Social Reproduction and the Limits of a Neo-Liberal Approach: the case of Singapore

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Social reproduction and the limits of a neoliberal approach: 
the case of Singapore

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Should citizenship status confer social rights independent of an individual’s economic contribution? This study approaches this question through looking at social settings in which answers are contested. Specifically, it documents and analyzes qualitative semi-structured interviews and focus group interviews with 221 Singaporean citizens. As such, it complements existing critical policy studies on shifting conceptualizations of social citizenship and the rise of neoliberal governance. Data analysis illustrates interviewees’ perceptions and lived experience of neoliberal, or ‘market citizenship’, bias in state population policy. Interviewees, moreover, find existing pronatalist incentives helpful but insufficient, largely because they see a decision to have more children as a long-term commitment requiring continual investment. They call for more generous, sustained, and universal state provisions for education and health, as well as homemaker allowances, which would be closer to feminist and classical formulations of citizenship-as-social rights.

Keywords: benefits; birth; citizen; citizenship; neo-liberal

Introduction

Citizenship, in theory and practice, provides a means for exploring the relationship between the state and the individual. It also provides a framework for considering aims and outcomes of public policy. Recently, scholars have called for more empirical work in the field of citizenship studies (Conover et al. 1991, Lister 1997/2003, Desforges et al. 2005, Isin et al. 2008b). This article is an attempt to make a contribution to this field through an empirical investigation of the relationship between state population policies and individual reproductive decisions. The need to take individuals’ perceptions of state policies seriously gains greater urgency in the context of a potential conflict of interest between the state and citizens regarding human reproduction.

Should citizenship status confer rights independent of an individual’s socioeconomic standing? While the issue of rights and responsibilities is not new, it has received more scholarly attention as the neoliberal approach has gained ascendance (Brodie 1997, 2007, Faulks 1998, 2000, Bezanson 2006, Isin 2008). Moreover, the Singapore case provides a different national and spatial setting from previous studies that have focused primarily on America and European countries. This article suggests that the neoliberal ‘market citizenship’ thesis finds its expression in the development of Singapore, a city-state of 5.1 million with a per capita income that, in all of Asia, is second only to that of Japan. Nonetheless, I argue that there is evidence pointing to limits to the neoliberal logic of

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‘citizenship-as-responsibility’. Analysis of data consisting of semi-structured and focus group interviews with 221 Singaporean citizens indicates that citizenship is interpreted by the Singaporean state as ‘economic-duty’, and that the state ‘rewards’ individuals who fulfill their economic obligations through offering them state assistance in their reproductive behavior. However, as will be illustrated, citizens themselves want citizen-social rights, rather than citizen-economic obligations and differentiated rewards; hence, we see the limitations of the state’s neoliberal market approach.

Theoretical background

The issue of rights and responsibilities (and the relationship between the two) is central to the institution of citizenship. The most influential exposition of the concept of citizenship-as-rights is T.H. Marshall’s *Citizenship and Social Class* (1950). Marshall argues that

> By the social element I mean the whole range from the right to a modicum of economic welfare and security to the right to share to the full in the social heritage and to live the life of a civilized being according to the standards prevailing in the society. (Marshall 1950, pp. 10–11)

The interpretation of citizenship as rights is closely associated with the welfare state. As Bussemaker and Voet (1998, p. 287) noted: ‘it was T.H. Marshall who finally laid out the map for post-world war citizenship notions in which social and liberal notions were reconciled through the community, e.g., the welfare state’. Bussemaker and Voet (1998, p. 288) further characterized the ensuing feminist contribution as ‘studies focusing on the relation between care, gender, and citizenship have raised the critical questions of... whether carework should be recognized as a basis for citizenship rights, for example through care allowances’.

There are, however, disagreements in the literature about whether there are different kinds of citizenship with corresponding variable notions of entitlement to the state’s goods and services as rights. For example, on the one hand, Turner (2001, p. 189) demonstrated that there were different models of citizenship and argued that ‘effective entitlement was based on participation in work, war and reproduction, resulting in three types of social identity: worker-citizens, warrior-citizens, and parent-citizens’. Turner (2010, p. 243) further emphasized that ‘the citizen who enjoys the provision of goods and who has entitlements must also be engaged in various public and private spaces. Without this crucial component [i.e., participation], the entitled citizen may well be a passive subject. The problem of weak or futile participation is the major flaw of a consumer society in which the characteristic activity of citizenship may be shopping’. On the other hand, Somers (2008) is critical of how entitlements have come to be linked predominantly to paid employment in the USA, excluding the unemployed and immigrants. Drawing on the instance of poor and African-American citizens abandoned after hurricane Katrina, she demonstrated how formal citizenship failed under the rising influence of neoliberal market fundamentalism. Somers argued, instead, that ‘citizenship is the right to have rights’ (2008, p. xiv).

A common method of investigation that reveals the direction of change in citizenship is critical policy analysis (Cox 1998, Dwyer 1998, Faulks 1998, 2000), and there exists a rich body of literature suggesting an increasing emphasis on citizenship duties, dating back to the 1990s (Plant 1991, Kymlicka and Norman 1994). Handler (2003, p. 230) analyzed changes in labor market policies in both Western Europe and the USA and argued that a ‘fundamental change’ has occurred in which ‘social citizenship is changed from status to contract’. As Handler noted, ‘social benefits are rights that attach by virtue of status – the
status of citizenship. Under the new regime, benefits have become conditional, rights attach only if obligations are fulfilled’ (ibid).

In Canada, Brodie (1997, 2007) eloquently argued that ‘social citizenship is being eclipsed by market citizenship’. Drawing on the Canadian experience, Brodie articulated that

The neo-liberal state’s meso-discourse of performativity is especially challenging for women and all equity-seeking groups because it prescribes the ascendency of market relations over political negotiation or ethical considerations . . . By performativity I mean that state practices are increasingly being formulated within the terms of the market. The neo-liberal state is fashioning itself as a market player rather than as the purveyor of public goods or as the instrument of the democratic will. (Brodie 1997, pp. 223–225, emphasis mine)

It is important, however, for the issue of social citizenship to be taken up not exclusively through the analysis of ‘law and policy in books’, but also ‘law and policy in action’ (Conover et al. 1991, Siltanen 2002, Desforges et al. 2005). Lister (2007) suggested the importance of studying the cultural, social, and political practices that constitute ‘lived citizenship for different groups of citizens in different national and spatial contexts’. Joppke (2008, p. 43) observed that ‘citizenship as identity has two possible meanings: the actual views held by ordinary people; and official views propagated by the state. What ordinary people associate with citizenship is one of the biggest lacunae in the literature’. Isin et al. (2008a, p. 11) showed the importance of ‘recasting the social in citizenship’ through ‘an analysis of social relations at various scales and sites’ to reveal how social groups are constructed and/or privileged.

This article complements recent studies conducted, for the most part, in Western countries, that aim to understand social processes and lived experiences under a neoliberal citizenship regime, with its attendant state-emphasis on citizen-responsibility (Schild 2000, Dwyer 2002, Bezanson 2006). In Asian contexts, Wong and Wong (2005, p. 19), drawing on an attitude survey, showed that ‘universal ideals of social citizenship have strong appeal among the Chinese in Hong Kong, even though the latter are conventionally seen as having low expectations in the area of social rights’ (Wong and Wong 2005, p. 19). Wong et al. (2009, p. 59) found that, in surveys conducted in Hong Kong and Taiwan, ‘social citizenship rights do not lose their momentum despite the strong traditional values of responsibility, family, and self-reliance’. This paper hopes to illustrate how social reproduction in the context of low fertility in advanced Asian countries can be fruitfully studied as a site in which social citizenship is contested.

The Singapore context

Singapore’s first Prime Minister, Lee Kuan Yew, portrayed the recent history of Singapore as transforming ‘From Third World to First’ (Lee 2000). This characterization is in terms of how the state sees itself, and indeed, a series of macro-level economic indicators support that perspective. First, Singapore’s real gross domestic product (GDP) has increased 86 times since independence in 1965; second, the per capita GDP has increased 34 times during the same period; and, third, the foreign reserve has also grown consistently – at S$250 billion in 2008, it was 204 times the 1965 amount (approximately S$12 million).

Singapore has been categorized as a developmental state (Rodan 1989, 2006, Tremewan 1994, Sung 2006, Chua 2007), a productivist state (Holliday 2000), and a social investment state (Pereira 2008). What these various scholarly analytical characterizations have in common is the suggestion that there is a set of state practices and domestic
institutions integral to Singapore’s economic transformation – most notably the Central Provident Fund (CPF) and the Housing Development Board (HDB) – which developed, historically, as institutional responses to pressing issues of worker retirement pensions and housing shortages. Turnbull (2009, p. 273), in her historical account of how the People’s Action Party [PAP] met the challenge of Singapore’s ‘unanticipated independence’ from Malaysia, wrote, ‘all the PAP leaders were pragmatists . . . the party took pride in rejecting not merely communism but ideologies in general, in the belief that people wanted good government in the solid shape of jobs, housing, schools, and healthcare’ (2009, pp. 272–274). Nonetheless, Hill and Lian (1995, p. 1) described how citizenship in Singapore was conceived as conferring ‘duties’ in the stage of nation-creation, notably ‘in a state which has firmly rejected welfarism, and whose political leaders have constantly maintained that the values of the collectivity over those of autonomous individuals are essential to its very survival’.

In this article, I suggest that these institutional mechanisms have been increasingly utilized as techniques of neoliberal governance – in particular, the compulsory, non-redistributive, employer-and-employee-contributed social security system, the CPF. The CPF came into legal existence in 1955. Since then, it has gradually become multipurpose: members have been able to use their CPF savings to pay for public housing since 1968 (the Public Housing Scheme), to pay for their dependents’ as well as their own hospitalization expenses since 1984 (the Medisave Scheme), and to finance tertiary education in Singapore for themselves or their children since 1989 (the Education Scheme).

While the CPF’s reach has extended, one principle has not changed: ‘the CPF is entirely funded by the workers themselves and their employers’ (Ramesh 2004, p. 63; see also Holliday 2003, p. 73). In January 1987, the government instituted the ‘Minimum Sum Scheme’ for CPF contributions; members are required to set aside a certain amount in their CPF accounts. The idea was that such a minimum sum would give members ‘a regular income after the official retirement age’. The minimum sum was set at S$80,000 in 2003, to be raised to S$120,000 (in 2003 dollars) in 2013. The CPF employee contribution rate in 2008 is listed in Table 1.

In relation to Brodie’s (1997) elucidation of the neoliberal state as perceiving itself more as a ‘market player’ than ‘the purveyor of public goods or as the instrument of the democratic will’, in the case of Singapore, as Low (2004, p. 308) eloquently demonstrated, the ‘CPF is a lynchpin in the developmental Singapore, Inc. ensemble’. Moreover, investment of CPF balances ‘is the primary responsibility of the Government of Singapore Investment Corporation (GIC), which is a private limited company wholly-owned by the Singapore government . . . This in effect lends members’ savings to the government’ (Asher and Newman 2001). Finally, the CPF is also a macroeconomic tool for the state; the government routinely adjusts CPF contribution rates in response to labor market conditions and, recently, the state began to promote private entrepreneurship, including investing S$62

<table>
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<tr>
<th>Income</th>
<th>50 years or below</th>
<th>Above 50–55 years</th>
<th>Above 55–60 years</th>
<th>Above 60–65 years</th>
<th>Above 65 years</th>
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<tr>
<td>&lt; $500–$1500</td>
<td>Phase in from 0% to 20%</td>
<td>Phase in from 0% to 18%</td>
<td>Phase in from 0% to 12%</td>
<td>Phase in from 0% to 7.5%</td>
<td>Phase in from 0% to 5%</td>
</tr>
<tr>
<td>More than $1500</td>
<td>20%</td>
<td>18%</td>
<td>12.50%</td>
<td>7.50%</td>
<td>5%</td>
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Table 1. Employee CPF contribution rate.
billion of CPF deposits. Rodan (2004, p. 53, emphasis mine) observed that ‘it [the Singapore government] is reluctant to surrender fundamental control over the CPF because through it a range of social policies are enacted. Indeed, the government increasingly deploys the CPF to foster self-funded health, educational and social security investments’.

In addition, the CPF, together with the HDB, plays a key role in promoting ‘housing ownership’ while maintaining minimal government expenditures. This structure is best elucidated by Chua (2007):

The entire process is conducted in a closed circuit of transactions – the working population save in the CPF, the government borrows from the CPF for infrastructure development including loans and grants to the HDB, the HDB sells the public housing, which is paid for by the households monthly through deductions from their CPF – without involving any conventional banking and financial instruments… By the early 1990s, more than 85 percent of the resident population lived in HDB flats and an equal percentage of these ‘owned’ a ninety-nine-year lease on their flats.

Moreover, the state has been able to keep a lid on various self-financed CPF accounts through administrative rules and regulations. For example, rules concerning withdrawal limits, in particular, have direct implications on how much citizens have to pay for medical expenses out of their own pocket rather than through the CPF Medisave account. For instance, the withdrawal limits stipulate that ‘for a hospitalization claim, the patient must have stayed in the hospital for at least 8 hours (unless the patient is admitted for day surgery) or died within 8 hours of being hospitalized’ and that ‘Medisave covers up to $450 per day for daily hospital charges… a fixed limit per table of surgical operations’. In other words, while citizens can draw on their Medisave accounts to make payments, there will almost always be a proportion to be paid in cash.

While the Singapore government’s expenditures on education and health declined from 4.5% of the GDP in 1970 to 3.7% in 2008, resident household expenditures on these services have increased over the years – for instance, during 1988–2008, household expenditures on housing increased from 17.5% to 26.6%, expenditures on education increased from 4.7% to 5.3%, and finally expenditures on healthcare increased from 2.6% to 5.3% (Singapore Department of Statistics 2008, various years).

At this juncture, it is important to examine the rising costs of education and health to help better understand Singaporean citizens’ perceptions and experiences, which will be presented in the findings section. For instance, in terms of education, university tuition fees have grown more than 30% between 2006 and 2010 (National University of Singapore 2010, Nanyang Technological University various years). In terms of preschool education, in 2008, a typical PAP kindergarten charged about S$100 a month for a half-day program covering five mornings a week, while fees for private kindergartens varied from several hundred dollars to more than S$1000 per month for full-day programs.

In terms of healthcare costs, the Singaporean Medical Association conducts regular surveys of primary care service costs, and has found that ‘the 1997 derived mean fee charged was S$27.69 per patient. This figure increased to $31.84 (+15%) and $34.73 (+25.4%) for HDB neighborhoods and all practices respectively over 10 years [i.e., 1996 to 2006]’ (Wong et al. 2007, p. 5).

While the CPF is a self-funded personal account for employed citizens, this is not to suggest that there is no state-provided benefit at all. Indeed, as Ramesh (2004, p. 54) pointed out, ‘In 2000, the government topped up all CPF accounts by between S$500 and S$1700, with the highest amount for low-income earners’. The state also began channeling funding through community organizations to provide welfare. As Chua (2007, p. 36) noted, ‘in the 2005 annual national budget, a Community Care (Comcare) Endowment
fund of S$500 million is allocated for social welfare expenditures; this is likely to generate more than $50 million a year for expenditures’. In 2008, the state initiated the ‘ComCare Call’ so that:

Singaporeans who need help with family problems, finances, employment or who are homeless but do not know which agency to call, can get in touch with ComCare Call. Depending on the assistance required, callers may be linked up with agencies like Community Development Councils (CDCs), Family Service Centres, the Destitute Persons Service, as well as other community-based organizations. (MCYS 2008)

The key to understanding such Singapore state actions, however, as Ramesh (2004, p. 54) pointed out, is that ‘they are discretionary payments that do not impose long-term commitment on the government’.

However, when it comes to state population policies aimed increasing birth rates, is the state providing assistance for the most needy as the rhetoric seems to indicate? Among the many policies formulated and implemented by the Singaporean government, a fundamental arena is population growth, not least because it concerns the long-term management and mobilization of human resources for economic development. Indeed, the Singaporean government launched the campaign ‘Have Three or More [Children], if You Can Afford It’ in 1987, and the ‘Baby Bonus’ Scheme was introduced in 2000. The most recent expansion of policy initiatives took effect in August 2008. Policy details are presented in Table 2.

In spite of such policies, however, the TFR reached a low of 1.22 babies per resident female in 2009, compared with 1.83 in 1990 and 1.6 in 2000. How are we to understand the gap between the stated policy goal – ‘bringing Singapore’s population growth back to the replacement level of 2.1 children per woman’ (Ministry of Education, Singapore 2007) – and the outcome of persistent low fertility? As will be shown, the state, through population policies, ‘invests’ in the making of future citizens. The citizens, as parents and potential parents, also ‘invest’ in the next generation. Who is worthy of such investment? The state and citizens may not always agree. Indeed, I suggest that the gap between aims and outcomes of two decades of pronatalist policies in Singapore is partly a function of competing notions of citizenship and the role of the state in social provision.

Method and data
As Ritchie and Spencer (2002, p. 305) explained, ‘the wider use of qualitative methods [in the last two decades]…is underpinned by the persistent requirement in social policy fields to understand complex behaviors, needs, systems, and cultures’. Indeed, Beeson (1997) noted that ‘the common thread that connects various approaches to qualitative research is the commitment to study the world from the perspective of the acting individual’ (Denzin and Lincoln 1994, p. 575, cited in Beeson 1997). This is a qualitative study consisting of various stages of data collection. In the first, semi-structured in-depth interviews with 165 women of childbearing age were carried out. I then conducted focus group interviews with women as well as their peers, spouses, prospective spouses, parents, and/or parents-in-law. Interviewing women alone, and then with their age-peers, spouses, and extended families (individuals whom the women identified in the first stage as having had a significant impact on their decisions) generated data on the nuanced contexts in which reproductive decisions are made.

I began with 11 research assistants who were senior university students (seven Singaporean-Chinese, two Singaporean-Indians, and two Singaporean-Malays). Each of these assistants then contacted 15 interviewees, who were women of childbearing age, the stated target group of pronatalist population policies. In sum, the research assistants
Table 2. Evolution of Singapore’s pronatalist policies (1987–2008).

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<tr>
<td>Monetary incentives</td>
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<tr>
<td>Income tax relief</td>
<td>(a) Personal income tax relief (the amount increased from S$750 in 1987 to S$1500 in 1989 for the first, second, third, and fourth child)</td>
<td>Unchanged</td>
<td>Unchanged</td>
<td>Qualifying tax relief: replacing personal income tax relief – relief increased to S$4000 per child for all children</td>
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<td></td>
<td>(b) Enhanced child relief scheme: working mothers can claim relief for the first, second, third, and fourth child of 5%, 10%, 15%, and 15% of their earned income, subject to S$15,000 cap</td>
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<tr>
<td>Tax rebates</td>
<td>(a) Tax rebate S$20,000 for the third child in 1987 and extended to the fourth child in 1989. Rebates for the 2nd child conditional on mother’s age</td>
<td>Unchanged</td>
<td>Parenthood tax rebate: S$20,000 for the third and fourth child, and S$10,000 for the second child. Age requirement for second birth removed</td>
<td>New parenthood tax rebate: S$5000 for the first child and S$20,000 for the fifth child and beyond. Rebates for the second, third, and fourth child remain the same</td>
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<tr>
<td></td>
<td>(b) Delivery and hospitalization expenses for fourth child offset against parents' earned income; cap S$3000</td>
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<tr>
<td>Childcare subsidy</td>
<td>Subsidies of children of working mothers, S$100/month for those who attend full-day childcare for each of the first three preschool children under age 7</td>
<td>Increased infant care subsidy: Monthly subsidy for infant care increased from S$150 to S$400 (for full-day) The subsidy remains at S$75 for non-working mothers who enroll their children</td>
<td>Increased infant (2–18 months old) care subsidy: monthly subsidy for infant care increased from S$400 to S$600 for all children</td>
<td>Increased infant (2–18 months old) care subsidy: monthly subsidy for infant care increased from S$400 to S$600 for all children</td>
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<td></td>
<td>(a) Infant care subsidy to working mothers who put their infants aged 2–18 months in childcare centers (S$150/month for full-day and S$75 for half-day); (b) S$75 childcare subsidy for children of non-working mothers enrolling their children in childcare centers</td>
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<tr>
<td>Use of CPF Medisave account (savings in the medical savings account of provident fund savings)</td>
<td>Medisave for delivery and hospitalization charges: payment of delivery and hospital charges for the third child can be made from Medisave account; S$3000 maximum</td>
<td>Unchanged</td>
<td>(a) Use of Medisave for maternity purposes extended to fourth child; (b) Medisave can pay for expenses associated with assisted conception procedures</td>
<td>(a) The Medisave Maternity Package enables parents to use Medisave for pre-delivery medical expenses for the first four children. (b) Medisave can also be used for delivery and pre-delivery medical expenses for the fifth and subsequent child, if both parents have a combined Medisave balance of at least S$15,000 at the time of delivery</td>
</tr>
<tr>
<td>Maid levy relief and reduction</td>
<td>Foreign-maid levy relief for working mothers: Income-tax relief equal to two times annual foreign-maid levy paid, for working mothers only (year 1990)</td>
<td>Unchanged</td>
<td>Monthly maid levy reduced from S$345 to S$250 for families with children younger than 12 years of age, or elderly persons aged 65 and above</td>
<td>Unchanged</td>
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‘Have Three, or More if You Can Afford It’

‘Singapore. A great place for families’
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<tr>
<td>Cash benefits</td>
<td>NA</td>
<td>Baby Bonus scheme: Two-tier system – (a) Cash gift S$3000 for the second child and S$6000 for the third child over 6 years; (b) Co-savings arrangement CDA; payable over 6 years, to be used for childcare or child-development purposes; maximum contribution from the government is S$6000 for the second child and S$12,000 for the third child</td>
<td>Baby Bonus scheme extended to the first and fourth child: (a) parents receive cash gift S$3000 each for the first and second child, and S$6000 for the third and fourth child each. The cash gift is now given earlier in five installments over a period of 18 months from the birth of the child; (b) The maximum contribution from the government is S$6000 for the second child and S$12,000 for the third and fourth child</td>
<td>Baby Bonus scheme: payout for the first and second child increased to S$4000. Government contributes up to S$6000 to the CDA for the first and second child. The cash benefit for the third and fourth child remains unchanged at S$6000. The government’s CDA matching contribution is capped at S$12,000 each for the third and fourth child. The fifth child and beyond are not eligible for cash grants, but the government will have a matching contribution of up to S$18,000 for the fifth child and beyond</td>
</tr>
<tr>
<td>Grandparent caregiver relief</td>
<td>NA</td>
<td>NA</td>
<td>Working mothers can claim relief of S$3000 if their parents or parents-in-law look after their children below age 12</td>
<td>Unchanged</td>
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carried out a semi-structured interview schedule (which the author as the principle investigator proposed and revised based on the pilot study) with 165 women aged between 19 and 49.

Once a woman felt comfortable with the questionnaire and topic, I asked her to participate in the second stage and/or third stage of focus group interviews with the individuals whom she had identified in her survey answers as having had or likely to have a strong influence on her reproductive decisions. All participation was voluntary, and respondents who joined the second and third stages provided written demographic information following the discussion. In sum, I conducted 39 focus group interviews. Typically, there were four to six participants in each focus group interview. While interviews in the second stage were carried out either in the respondents’ homes or in an interview room at the author’s university, all the interviews in the third stage with the respondents’ older family members were at the respondents’ homes.

Including all stages, 204 interviews were carried out from October 2007 to July 2008, involving 221 Singaporean interviewees, including partners and family members of the initial 165 interviewees. While the research strategy was that of ‘snowball sampling’, the sampling rationale followed that of ‘quota sampling’ along two dimensions. First, in an attempt to ensure ethnic minority groups’ representation in the project, a minimum number of respondents from the Singaporean-Indian and Singaporean-Malay communities for the larger sample were set at 30. Eventually, the number of respondents from these two communities exceeded this minimum requirement. Second, the sample reflects the national profile along the key dimension of monthly household income level. Employed households between 20% and 30% had an average monthly income below $3000, and 20–30% of employed households had an average monthly income above $8000 in 2006 and 2007 (*Key Household Income Trends 2008*).

All 204 interviews were audiotaped, transcribed, and translated. As Berg (2009, p. 148) wrote regarding analyzing data obtained from interviews, ‘typically, a systematic indexing process begins as researchers set up several sheets of paper with major topics of interest listed separately… Ideally, this process should be accomplished by two or more researchers/coders, independently reading and coding each of several transcripts’. Five research assistants and I independently read and coded all 204 interview transcripts (detailed descriptions and discussions of methods are presented elsewhere; see Author 2009, pp. 357–361).

**Findings**

**Economic bias in pronatalist financial incentives**

A recurring theme in the interview data is that the economically disadvantaged cannot contribute as much as the wealthy, so the requirement of the Children Development Account (CDA) matching fund (in contrast to universal child and family allowances) increases the capacity of the higher-income households to raise children. During focus group interviews with married couples who had used the CDA, it became clear that even respondents from middle-income households had difficulty in saving and benefiting from the scheme. For example, in an interview with Mr and Mrs Khaw, a Chinese couple in their early 30s with a combined household income of $7000–7999 and living in a five-room HDB flat, Mr Khaw reported:

> The thing is, we have to fork out the $3,000 first, then they’ll match dollar-for-dollar. But if we are already in financial difficulty, it’s very hard to cough up that $3,000 for the
government to match it dollar-for-dollar. So let’s say I can only come up with S$500? Then, effectively my Baby Bonus, so to speak, is S$1,000.

Other middle-class parents also articulated the manner in which the CDA scheme hinged on their income level. Ms Lim (Chinese, age 40, S$5000–5999/month), for instance, said:5

The Baby Bonus helps, but it may not be the best policy. I think it’s more day-to-day kinds of things [that help]. With the Baby Bonus, you put in S$1,000, they [i.e., the government] match S$1,000, you put in S$10, they match S$10. You must have that S$10 to put in so that the government can match you. But where is that S$10 coming from? That’s my question… It [i.e., the CDA] is not very effective [if] you don’t have the S$10. You will never get the S$10 from the government.

Mrs Balasingam (Indian, age 34, S$4000–4999) revealed that she understood that it was a ‘dollar-to-dollar match’. But her husband also noted the following in response to her statement that they ‘don’t have that extra money [that they] still have to put in [so that] the government will top it up’:

That’s [i.e., CDA] not money in your pocket. I still have to come up with 50 per cent. I take my cash, and I put it in the bank. The bank gets the money, the government tops it up… which means I’m still cash-poor… I still have to come up with the money in the first place. What I’m saying is… why do they want people to come up with the money in the first place?

Mrs Balasingam added:

But that’s not all… It depends on how much you’re earning; not all parents can top up $50 a month. So if it’s going by the rate of a dollar-per-dollar match, the more you put in… of course the more you benefit. But I’ve got other things to worry about day to day. I can’t think about how I can keep this money in the bank for future use when day to day is already a problem for me.

It is important to note that the data do not suggest that the CDA matching fund is not encouraging people to save at all; the question is who is it encouraging? University students described the CDA scheme as ‘a good move as it should make people save’ and ‘a step in the right direction’. At the same time, they observed that its effects may be limited and biased, as articulated by Hui Ling (Chinese, age 22, S$2000–2999):

What if parents already have problems settling all the bills that they need to pay for the children, and they will have little money left to contribute to the dollar-for-dollar scheme, which means that they can’t really benefit much from it? And then, for the more affluent, if it’s not limited to the lower-income, then they can contribute as much as they can, and then the doubling will be a lot more. It’s like S$10 and S$100. The S$10 becomes S$20, and the S$100 becomes S$200.

Hui Ling’s elaboration crystallizes an observation shared among other respondents that, on the one hand, lower-income households’ parents are disadvantaged because the amount of their disposable income is small, and this disadvantage transmits to the deprivation of their children’s CDA. On the other hand, children in well-off households benefit not only from their parents’ higher disposable income but also from the state’s financial contributions.

Respondents also suggest that the state provides allowances for stay-at-home mothers, which is in line with the idea of the ‘care allowances’ in the feminist contribution to citizenship mentioned earlier. Indeed, as can be seen from the following interview data, respondents tend to be aware of the practice of state-provided homemaker allowances in other countries. Mrs Yap (Chinese, age 41, upper secondary), who has two children, articulates:

There seems to be no relief for homemakers…[who] give the best quality time and everything to their children. I think probably the government should look into this, not just giving incentives to those parents who return to work. I mean, compared to my sister-in-law in Australia. She’s stay-home, and has a monthly 300 Aussie dollars… so it’s very good!
Mrs Osman (Malay, age 33, polytechnic diploma) shared a similar observation:

It’s good if they [the state] can give housewives some allowance. Even if it means S$100 or S$150 per month... it’s still an allowance for housewives. Because being housewives doesn’t mean we don’t contribute anything to the society. We do. That’s why we bring up our own kids to make sure that they do something for the society... As housewives, we are also contributing by bringing up the next generation. At least as a housewife, you feel that you are being appreciated in bringing up the future generation.

The interviewees put forth several points underscoring the need for a homemaker allowance. First, women choose to stay at home to ‘give the best quality time and everything to their children’, sometimes at the expense of their own careers; expenses for children’s education continue despite the lack of mothers’ income; state subsidies would help to defray some of those costs. Second, a homemaker allowance serves as an official recognition that stay-at-home mothers also contribute to society.

Below, I elaborate on the two specific types of subsidies – education and health – that respondents highlight in their answers to the following open-ended questions:

If you are deciding whether to have a child, is there anything the government can do that will help you to decide?

What needs to be done by the government in terms of policies to encourage people to have more children?

What is it that you need in order to have the number of children you want?

**Education**

Citizens acknowledged that primary and secondary school education has been heavily subsidized by the state in Singapore. But then they listed items that they still had to pay for out of their own pockets, such as school fees, books, assignment booklets, transportation, tuition, and extracurricular activities. Thus, they perceived that overall expenditures remained too high for them to consider having another child. They wanted more state subsidies – 63 of the 165 individual interviewees (i.e., 38%) wanted educational subsidies, but respondents in upper-income households (with monthly household incomes exceeding S$8000) were less likely to want such subsidies than their counterparts in lower- and middle-income households. That said, more than one-third of the respondents in each income bracket wanted educational subsidies.

Moreover, a notable number of interviewees suggested ‘free education’ for citizens – that is, the elimination of the nominal school fees that they were paying, especially since primary school education is compulsory. These fees were perceived as a burden that the government should bear as a matter of principle, as argued by Mr Rahimi (Malay, age 27, S$3000–3999):

Mr Rahimi: We have lots of government schools, but I don’t see the need to have to pay fees for government schools. Can’t they just subsidize across the board? Compulsory education for everybody so you shouldn’t need to pay school fees. Across the board, across all races.

Moderator: How much are school fees?

Mr Rahimi: S$20-plus a month for a child, about there. So even S$20–30, you add up for a year it’s already 30 times 12, S$400 to S$500-plus. So imagine, ease off all these on education because it’s already a government school. And you even pay taxes. Pay income tax to finance schools. So why not make education free? Like how other countries are doing it? Public schools are free unless you choose to go to a private school.
The Singapore government’s stance on compulsory education and the policy of free public education for citizens in countries such as Australia – as one interviewee pointed out, ‘As long as you’re a citizen, they provide this for you’ – were mentioned repeatedly by other interviewees across the income strata. Thus, interviewees expressed a strong desire for free education as a public good and perhaps even a social right for citizens, although their remarks were not couched explicitly in these terms.

Respondents placed a great emphasis on education, including preschool and tertiary. The former provides a foundation for primary and secondary schooling, while the latter is seen as a vehicle for upward mobility. Even with state subsidies, parents in lower-middle-income families found preschool ‘very expensive’ because there are additional costs associated with going to preschool, such as bus fare. Mrs Ibrahim (Malay, age 49, S$3000–3999) and Mr Idris (Malay, age 40, S$3000–3999), for instance, discussed their son’s preschool expenditures:

Mrs Ibrahim: Preschool includes school fees and the transport. Very expensive. Very, very expensive.

Mr Idris: Very expensive.

Moderator: How expensive?

Mrs Ibrahim: If kindergarten, about S$120 per month. If you have to send him by transport, it’s about, just nearby, a few bus stops away only, [the transportation cost is] about S$100.

Parents in higher-income families were also discouraged by the school fees because they anticipate sending their child(ren) to private kindergartens and paying for their children’s university education. As Mr Lee (Chinese, age 36, S$10,000 and above) explained:

Do you have enough income to put them into preschool or nurseries? Because the private ones cost like S$600–700 a month, and that’s only the fee. Enrichment classes and all those sort of stuff, it’s an additional cost. . .

The government will say that they have already subsidized university education for locals. Because the locals pay a different rate from the PRs and the foreigners. But then again, it [i.e., university education] costs a substantial amount of money.

If parents in upper-income families were concerned about education expenses in their childbearing decisions, parents in lower-middle-income families were worried about paying tertiary school fees even after receiving government grants. As Mr Rahimi (Malay, age 27, S$3000–3999) and his sister Jamilah pointed out:

Mr Rahimi: Education. It’s very big because now you can’t survive at O-Levels [i.e., the Singapore-Cambridge General Certificate of Education Ordinary Level]. Even if you get A-Level [i.e., the Singapore-Cambridge General Certificate of Education Advanced Level], a diploma, it’s not enough, you still need to keep going up. Even a degree is not sufficient.

Jamilah: S$6,000 [fees per year for a university degree with tuition grants]. So if you take four years, it will be about S$24,000.

In the following conversation with Mr and Mrs Goh (Chinese, S$4000–4999) and their friends Mr and Mrs Tay (Chinese, S$4000–4999), Mr Goh said strongly, ‘it’s tertiary that will kill’.

Mr Goh: I think tertiary education subsidies would be a major draw. Because her [referring to his daughter, attending a local university] fees are like S$6000 a year, which translates to about S$500 a month, and expenses are like another S$500–600 a month, so that works out to about S$1200 average per month, so where are we going
to get the money? Eventually, I hope the child will be getting tertiary education. So I have to anticipate, primary and secondary education is not so expensive. Somehow we’ll make ends meet, but it’s tertiary [education] that will kill. Actually, it has been said that it’s heavily subsidized, but still it’s a big expense in the home.

Mr Tay: This is a major thing. Two or three of my friends, they study up till A-Level [i.e., the Singapore-Cambridge General Certificate of Education Advanced Level], cannot afford, got to help the family, so they got to work two to three years, then they go study their own degree course.

Mr Goh went on to comment on the CPF education loan:

So yes, you can take a loan from the CPF. It’s an interest-free loan, which is very good ... It’s still a loan, so it translates into somebody has got to pay the loan. So the government can come in. Scholars will surely get the scholarships, subsidies, but what about the non-scholars? The bulk of them are non-scholars.

In sum, although interviewees were positive about pronatalist financial incentives, they said that they would appreciate considerably larger and more long-term subsidies in education. Citizens in lower- and even middle-income households are hurt by rising costs and struggling to make ends meet, while citizens in higher-income households are also ‘on a budget’, as they have higher expectations for their children. Substantial state provisions would help to make childrearing more affordable and imaginable.

Health

Singapore government-subsidized healthcare is provided by public hospitals and neighborhood polyclinics, which are utilized by citizens who cannot afford the higher healthcare costs of the private sector. In addition, as noted earlier, payment for certain categories of medical care can be drawn from citizens’ accumulated CPF savings through the Medisave account (for non-employed immediate relatives as well as themselves).

However, lower- and middle-income families find it difficult to cope with high prescription costs, which can run into hundreds of dollars, even under the public health system.\textsuperscript{14} Fifty-one of the 165 individual interviewees (approximately 30%) wanted more health subsidies. In each income bracket, about 30% of the respondents indicated this as a condition conducive to childbearing.

Long queues at polyclinics were also seen as problematic, especially for parents with young children, as the following conversation with Mrs Visvanathan (Indian, age 48, S$1000–1999) and Mrs Nair (Indian, age 51, S$5000–5999) suggests. Because of these queues, citizens may turn to neighborhood general practitioners, who charge higher fees:

Mrs Nair: The medical expenses here are quite high.

Moderator: How expensive?

Mrs Nair: Oh, definitely the minimum is S$32. Any GP [general practitioner] ... Especially, when they are young, because I face this problem, that’s why I am telling. The medical expense is quite high, S$32 or S$38,60 sometimes. Then you want to book an X-ray or blood test, then everything goes up to two hundred or three hundred. They [i.e., the state] should subsidize.

Similar to Mrs Nair’s point that unforeseen complications engender higher costs, Mr and Mrs Balasingam, mentioned earlier, provided another example of how healthcare costs increase because young children tend to catch one another’s illnesses:

Mrs Balasingam: People creating our policies should be in our shoes ... It’s very easy to sit in a room and come up with plans very nicely ... and it looks very nice on paper. Wow, S$6,000. I mean, when you have three kids, four kids, and
when one falls sick, all fall sick. And there is no way we can waive off the consultation fees. I think the doctor just saw dollar signs. The whole family is here. It’s to the point that I share the medicine with my kids. That’s not the way, right? I should not even worry about medicine.

Mr Balasingam: That one week we go down to the doctor is about [i.e., cost us] S$200 cash. We’re not talking about the cash amount here; we’re talking about policy, education, and health. Can you [i.e., the state] provide free health coverage for my child until he goes to National Service or tertiary education?... At the polyclinic. It doesn’t have to be at the private hospital. That means I bring my child to the polyclinic.

Among higher-income families, there is a willingness to turn to private sector healthcare providers, who are perceived as offering better service. However, even with their significantly higher incomes, in seeking better healthcare these families too want more government subsidies. For example, one pronatalist measure that the Singapore government has adopted since 1987, and has continued to refine, allows use of the CPF Medisave account for childbearing purposes. However, the use of the Medisave account is perceived as ‘still using our own money’, which does not satisfy citizens’ wish for more state-provided subsidies. This is illustrated in the following focus group discussion with Mr and Mrs Lee, mentioned earlier, who held their infant during the interview:

Moderator: If the government really wants to help...

Mr Lee: Up-front cost hospitalization, delivery charges. We went to Mount Alvernia, she [referring to Mrs. Lee] did a caesarean, more than S$7,000... The gynecological fees and everything, so that up-front [subsidies] would definitely be helpful.

Mrs Lee: That’s already up-front, not to mention actually the nine months you are carrying the baby to see the gynecologist. The medical checkup and everything.

Moderator: So how did you finance those?

Mrs Lee: Through our own means. Through our own money. But I think they do give. Apparently, they are saying you can still claim your [CPF] Medisave. But it’s your own money. They [i.e., the government] allow, but it’s still your own money.

Similarly, the S$3000 Baby Bonus cash incentive is perceived as insufficient. Mr Khaw pointed out that delivery and hospitalization expenditures are high at private hospitals:

Mr Khaw: Of course, the money [i.e., the subsidy] is there. But you’re talking about S$3,000 over a period of eighteen months. Three thousand dollars barely covers, if let’s say someone, for example, doesn’t have the CPF, who’s not working and doesn’t have the CPF, cannot have Medisave coverage, he will have to fork out cash. For example, our stay at the Thomson Medical Centre amounted to almost S$8,000. So Medisave covered about almost S$5,000-odd, so we have to fork out another S$2,000-odd. Of course, you’ll say, “It’s because you chose Thomson Medical Centre; who asked you to choose Thomson Medical Centre?” But you know, in terms of facilities and professionalism so far as other mothers have experienced, these are the recommended places.

In summary, citizens from all income strata want the state to provide more healthcare financial support for the making of future citizens, albeit with different rationales. On the one hand, citizens in lower-income households face a struggle with prescription fees and encounter long waits at government-subsidized polyclinics and find the situation particularly difficult with young children; and citizens in middle-income households are trying to pay overall higher fees at neighborhood clinics. On the other hand, citizens in higher-income households also spend large sums on healthcare, as they want to receive better treatment, particularly in private hospitals and medical centers.
Summary and discussion

I suggest that the gap between the stated aims of pronatalist population policies and persistent low fertility reflects the limitations of a neoliberal paradigm, in which ‘citizenship-as-economic responsibility’ is a key component. There is a disjuncture between the ‘merit-based’ thrust of state policies and citizens’ quest for a more supportive socioeconomic environment as a precondition for having a child or an additional child. While citizens who were interviewed as parents and prospective parents did not invoke individual ‘rights’, they did, in particular, want state-provided or guaranteed universal access to education (or ‘free’ education) and more subsidized healthcare.

At the theoretical level, this study suggests the importance of taking ‘bottom-up’ constructs seriously in the field of citizenship studies. Research findings suggest that citizens’ concerns about the rising cost of living and their perceptions of state subsidies benefiting particular groups (i.e., individuals with higher socioeconomic status) have meant limited effectiveness of state policies in encouraging childbirth among the citizenry. There is a desire for the state to extend its range of direct provision from particular groups to all citizens, through universal financial, educational, and healthcare subsidies. It is important to note, however, that these interviewees have yet to make these claims by invoking individual rights or entitlements.

This study also suggests that, as far as the relationship between rights and responsibilities (or entitlements and duties) is concerned, the question is more complicated than a binary formulation of whether rights should be unconditional or participation-based; rather, we need to ask ‘what constitutes (active) participation or contribution’ and ‘who decides what counts as participation or contribution’. Indeed, as Turner (1990) and Siim (2000) pointed out, these are historically and politically contingent. Moreover, citizenship could be conceptualized beyond participation in work, war, and reproduction. For instance, following classical macro-economic theories, individual consumption is a core element of the GDP and the Gross National Product, and, thus, what is seen as ‘private and passive’ shopping can arguably be considered a ‘public and active’ contribution. One of the key issues identified in this study, however, is that the state is seen as privileging economic contribution over and above all other possible and emerging forms of contribution, while citizens who were subjects in this research project actively questioned such a premise and believed that state-sponsored social provisions should be based on status rather than (employment) on contract.

To the extent that citizens’ desires for social rights are expressed in the context of global capitalism, rising income inequality, an increasing sense of job insecurity, and growing inequality in access to education and healthcare, this study suggests the importance of a context-dependent understanding of citizenship and demands on the state through the study of public policies. Its general proposition points toward facilitating more dialog between state agencies and citizens with regard to their respective rights and responsibilities, and a more grounded understanding and articulation of social citizenship.

Notes
1. According to the Singaporean Department of Statistics, per capita GDP at current market prices was S$53,192 (US$37,597) in 2008. The most comparable data come from the 2007/2008 UN Human Development Report: In 2005, GDP per capita (PPP US$) was 41,890 for the USA; 31,267 for Japan; and 29,663 for Singapore.
2. It was approximately S$3 billion (approximately US$965 million) in 1965 and S$258 billion (approximately US$182 billion) in 2008.
5. Singapore dollar equals approximately 0.71 US dollars.
6. Focus groups #5 and #21.
7. Focus groups #5, #21, #29, and #32.
8. Focus group #21.
9. Focus groups #27 and #32.
10. Focus group #21.
11. Focus group #13.
12. Focus group #35, Mr Palaniswami (Indian, age 56, S$4000–4999): ‘They’ve got to change ... giving free education to Singaporean citizens. Now education is more or less compulsory, right? You have to send your child to school, otherwise they come around and ask you why. But do they from the very start say you have to send your child to school, you don’t have to pay? Why can’t they say that?’
    Focus group #28, Mr Krishnan (Indian, age 51, S$4000–4999): ‘As I said again, it’s not just financial subsidies, but it is for long-term financial subsidies ... Because, as I said again, you [i.e., the government] put so much emphasis on education, it’s not free’.
    Mr Balasingam (Indian, S$4000–4999): ‘The primary reason is the financial aspect of it. I think the government can do more by providing free education. From preschool to university ... As in, say, countries like the UK, Australia ... OK, as long as you’re a citizen, they provide this for you ... Even if you [i.e., the government] don’t give [free] tertiary [education], that’s fine. I want free education from the time the child is born, at least until pre-tertiary ... OK, if you think policy does not allow free tertiary education, fine. But basics as a parent, what will I think of first? The basics for my child must be covered. He must have a basic education, he must have a basic health care’.
    Focus group #9, Kathleen (Chinese, age 31, S$10,000 and above) and Huey Yee (Chinese, age 31, S$9000–9999):
    Huey Yee: ‘A lot of my friends, they are like trying to get PR [i.e., Permanent Resident status] in Australia, because they know that if the child is born there, education is free till tertiary. That’s like a big load off a parent’s mind, I think’.
    Kathleen: ‘Ya. Free education maybe they just give you up to secondary school. Maybe JC [i.e., junior college]’.
13. Focus group #23, Mrs Wong (Chinese, age 27, executive HDB apartment, S$6000–6999): ‘Free education. University education is a big concern’.
14. Focus group #33.

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