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Opening Address

By

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OPENING ADDRESS

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We all know that childhood constitutes a small fraction of the human life span, but it is the critical stage during which the quality of adult life is set. A child's development depends greatly on proper nutrition, adequate medical care and sanitation, and parental love. Childhood experience of family care and the availability of essential welfare services will determine his physical and moral well being in adult life. Ironically, in developing countries, improved health services and better nutrition also increase the number of children with various forms of handicap who otherwise would not have survived the ravage of poverty. Handicapped children in these countries fare badly because they will remain a liability to society which has other priorities. These unfortunate children suffer not so much from their physical disabilities than from ill treatment and neglect. Ignorance and superstitions of parents and social stigma add to their mental sufferings. They need special care. We must realise that child/family welfare efforts can only be effective when the broader welfare, that is, the provision of facilities and services for the control of family size, education for all children, low-cost housing with adequate utilities and subsidized health services, is forcefully tackled first. Hence, governments of developing countries should first attempt to eradicate over-population, mass unemployment, poverty, malnutrition, slums, diseases and illiteracy rather than impressive social handouts.

In the last two decades, the Singapore Government had been concerned with keeping the population growth to a manageable rate and in providing adequate housing, education, health care and employment opportunities. Primary education in Singapore is free and universal. There are 516 schools for 481,140 pupils, 6,746 of whom are in registered kindergartens, 297,873 in primary schools and 176,521 in secondary schools. In the field of health for mothers and children, the Government provides 30 maternal and child health clinics throughout the country. Pre-school children are given free immunization against a whole host of childhood diseases and health screening. These clinics also provide guidance on child care and conduct a comprehensive home visiting programme. The School Health Service provides a health screening service for school children with follow-up services at outpatient clinics and where necessary specialist sessions are held in the Institute of Health School Clinic. In 1979, a total of 341,636 children were examined. There is also a Child Psychiatric Clinic for children with behavioural, emotional or psychosomatic problems. In the area of public housing, Singapore's Housing and Development Board has undertaken 4 five-year building programmes since 1960 to provide adequate low-cost flats with essential utilities for the people. 326,799 flats are built to date and 67 per cent of the population are living in such flats. More than half of the flats are purchased by occupants using their Central Provident Fund savings.

- 1b -

While concentrating on the broader social services, the Singapore Government is also doing its best to alleviate the sufferings of the underprivileged. It has been estimated that there are 11,544 or slightly less than 0.5% of Singapore's 2.36 million people who are disabled in some ways. In 1979, the Social Welfare Department spent \$12.3 million, of which \$3.7 million or 34 percent were on direct financial assistance and other welfare services and \$0.3 million in Block Grants and Per Capita Grants to voluntary welfare organizations. In addition, the Department also provides direct services such as a fostering scheme for children who are deprived of parental care (202 such children were placed in foster homes in 1979), a homemaker's scheme which employs neighbours, relatives and friends of the family to provide care for children in the mother's absence, and public assistance and tuberculosis allowance schemes and emergency relief fund to relieve children from hardship when the breadwinner is incapacitated.

In addition to the Government efforts, voluntary welfare services by private organisations are encouraged and widely practised in Singapore. There are 34 welfare organisations providing special education, vocational training, physiotherapy, occupational and speech therapy, medical treatment, counselling and supportive services for disabled children. These welfare organisations together with 137 organisations affiliated to the Singapore Council of Social Service provide multifarious social services. The Council of Social Service, an autonomous national body, was incorporated in 1968. Its main objectives are to improve social conditions by studying social needs and making recommendations to the Government, disseminating information on current social problems and needs, coordinating voluntary welfare efforts and initiating new services.

From the viewpoint of potential users of welfare services, lack of information on the availability of such services is as bad as lack of such services themselves. This is particularly true in view of the fact that most of such potential users are less educated and ill-informed. Mass media should play an active and direct role in this area. Not only should they inform the public of the types of services and where these services are available, they should also educate the public on proper child care. Thus, in developing countries, particularly those with vast rural areas, the transistor radio, which can be mass produced cheaply, should be made available to as many people as possible as part of the country's mass education effort. Radio broadcast which transcends geographical barriers and illiteracy can reach the people in the most remote areas. Talks on child care and information on services available in the simple language of the people broadcast to target audience at specified time with regular follow-up person-to-person counselling by health/welfare workers can do a great deal to eliminate unnecessary sufferings. The people could be educated to accept self-help instead of depending on charity. They could be trained to organise self-generating welfare programmes by their own community. Prolonged charity reduces the dignity of the receiver.

- 1c -

TV set is still expensive compared to the transistor radio, although in some developing countries it is no longer a luxury. Because of its audio-visual impact, TV sets should be made readily available at least in schools, community centres and public places. Its potential as a vehicle for social education and dissemination of information should not be under-estimated. As living standard improves, TV will become more accessible. There is need now to conduct scientific research on the effects of TV programmes, particularly commercials, on children. Asian Mass Communication Research and Information Centre (AMIC), being an independent body, could work closely with relevant bodies on this important area of research.

Another area which AMIC could advantageously go into is to collect and compile on a regular basis results and findings of child/family welfare projects and programmes in developing countries, feedbacks from the people and disseminate such information in a monthly educational/news bulletin as widely as possible. Such a publication will help individual countries to identify priorities and to avoid duplication of services and dissipation of limited funds. The complex problem and urgent needs of children require multi-sectoral involvement, long range planning, and enormous amount of energy and resources. Communication should be an integral part of the development strategy. A bulletin like this will go a long way to minimise waste and give workers in this field and the people a common contact point in generating self-help projects for the betterment of their communities.

I have great pleasure in declaring this Seminar open.