

YANGON UNIVERSITY OF ECONOMICS

MASTER OF ECONOMICS

**A COMPARATIVE STUDY OF THE ECONOMIC
DEVELOPMENT OF SINGAPORE AND MYANMAR**

(2006-2016)

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May, 2018

YANGON UNIVERSITY OF ECONOMICS
MASTER OF ECONOMICS

**A COMPARATIVE STUDY OF THE ECONOMIC
DEVELOPMENT OF SINGAPORE AND MYANMAR
(2006-2016)**

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the**

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ABSTRACT

Singapore has set an example of success story of a miracle economy. Singapore's economy is vibrant, competitive and innovative. Singapore's survival and economic take-off required for reaching government program as well as creative and innovative private sector efforts to provide the successes set into motion by government activities. Much of Singapore's success is attributed to very good civil service. Being a founding member of the ASEAN, Singapore always showed a leading role in all the regional economic activities and business forums. Even in the recent Asian financial crisis Singapore is the one that has the least impact from the contagion effect which brought economic slump and recession to most other ASEAN countries. In fact, Singapore's open – trade economic policies have enabled it to overcome land, labour and resource constraints to become world's second most competitive economy. Singapore has moved to open restricted sectors, such as domestic banking, telecommunications and power, to foreign investment. The British – inspired education system includes six years of compulsory primary school, four years of secondary school, and two years of junior college for those aspiring to higher education. English is the primary medium of instruction. At the moment Singapore is offering up-to-date educational services to international students through many foreign universities that have set up their educational institutions in Singapore. The above mentioned aspects contributed greatly to the economic development of Singapore. Poverty in Myanmar has declined from 44.5% in 2004 to 37.5% in 2009/10 and 26.1% in 2015, according to the recent Myanmar-World Bank joint poverty analysis. However, poverty remains substantial, especially in rural areas where people rely on agricultural and casual employment for their livelihoods. Those who live near the poverty line are susceptible to economic shocks. Among ASEAN countries, Myanmar has the lowest life expectancy and the second-highest rate of infant and child mortality.

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LIST OF ABBREVIATIONS

ASEAN	Association of South East Asian Nation
CPF	Central Provident fund
GDP	Gross Domestic Product
GNP	Gross National Product
HCS	Health Corporation of Singapore
HDB	Housing Development Board
HDI	Human Development Index
HDR	Human Development Reports
MAS	Monetary Authority of Singapore
NHP	National Health Plan
NTU	Nanyang Technical University
NUS	National University of Singapore
ODC	Overseas Development Council
PQLI	Physical Quality of Life Index
SIT	Singapore Institute of Technology
SM	Singapore Management University
UNDP	United Nations Development Program

CHAPTER 1

INTRODUCTION

1.1 Rationale of the study

Singapore's economy is vibrant, competitive and innovative. It is one of the four tigers in South East Asia. It has set an example of success story of a miracle economy. The economy of Singapore is a highly developed free – market economy. Being a founding member of the ASEAN, Singapore always showed a leading role in all the regional economic activities and business forums. Singapore's open –trade economic policies have enabled it to overcome land, labour, and resources constraints to become world's second most competitive economy. It has helped Singapore to achieve the world's fifth highest per capita income. It is therefore intended here to make an endeavor to conduct a study on the development experiences of Singapore.

1.2 Objectives of the study

The objective of the study is to examine leading role in all the regional economic development activities experiences of Singapore and Myanmar.

1.3 Method of study

The study is a descriptive study with secondary data obtained from various sources. The secondary data has been collected from various published such as Statistical Yearbooks, Library of Yangon University of Economics and Internet website.

1.4 Scope and limitations of the study

This paper is confined to the development aspect of Singapore's economy with available and indicators of growth obtained from the website secondary in nature. The study covered the period from 2006 to 2016.

1.5 Organization of the study

This paper includes five chapters. Chapter (1) studies the introduction of the chapter. Chapter (2) describes the development indicators. Chapter (3) explains the economic indicators of Singapore. Chapter (4) illustrates social indicators and Chapter (5) is conclusions.

CHAPTER 2

DEVELOPMENT INDICATORS

It is important to have some working definition on the meaning of development. Economic development has always been typically seen in terms of the planned alteration of the structure of production and employment agriculture's share of both declines and that of manufacturing and services industries increase.

On the whole, development was nearly always seen as economic phenomenon in which rapid gains in overall and per capita GDP growth would either "trickle down" to the masses in the form of jobs and other economic opportunities or create the necessary conditions for the wider distribution of the economic and social benefits of growth.

According to the new economic view of development, development came to be redefined in terms of the reduction or elimination of poverty, inequality, and unemployment within the context of growing economy. There are also some indices as in the following paragraphs.

2.1 The Physical Quality of Life Index

The Physical Quality of Life Index (PQLI) is an attempt to measure the quality of life or well-being of a country. The value is the average of three statistics: basic literacy rate, infant mortality, and life expectancy at age one, all equally weighted on a 0 to 100 scale.

It was developed for the Overseas Development council in the mid-1970s by Morris David Morris, as one of a number of measure created due to dissatisfaction with the use of GNP as an indicator of development. PQLI might be regarded as an improvement but shares the general problems of measuring quality of life in a quantitative way. It has also been criticized because there is considerable overlap between infant mortality and expectancy. For life expectancy, the upper limit of 100 was assigned to 77 years (achieved by Sweden in 1973) and the lower limit of 1 was assigned to 28 years (the life expectancy of Guinea-Bissau in 1950) . Within these limits, each country's life expectancy figure is ranked from 1 to 100. Similarly, for infant mortality, the upper limit was set at 9 per 1,000 (achieved by Sweden in 1973) and the lower limit at 229 per 1,000 (Gabon, 1950).

Although the study found that countries with low per capita GNP tended to have high PQLIs, the correlations between GNP and PQLI were not substantially close. Some countries with high per capita GNP had very low PQLI- even below the average of the poorest countries.

2.2 The Human Development Index (HDI)

The latest most ambitious attempt to analyze the comparative status of socioeconomic development in both developing and developed nations systematically and comprehensively has been undertaken by the United Nations Development Program (UNDP) in its annual series of Human Development Reports. The centerpiece of these reports, which were initiated in 1990, is the construction and refinement of the Human Development index (HDI). The Human Development Index (HDI) is a composite statistic (composite index) of life expectancy, education, and per capita income indicators, which are used to rank countries into four tiers of human development. A country scores higher HDI when the lifespan is higher, the education level is higher, and the GDP per capita is higher.

The HDI was created to emphasize that people and their capabilities should be the ultimate criteria for assessing the development of a country, not economic growth alone. The Human Development Index (HDI) is a summary measure of average achievement in key dimensions of human development: a long and healthy life, being knowledgeable and have a decent standard of living. The HDI is the geometric mean of normalized indices for each of the three dimensions.

The Health dimension is assessed by life expectancy at birth the education dimension is measured by mean of years of schooling for adults aged 25 years and more and expected years of schooling for children of schooling entering age. The standard of living dimension is measured by gross national income per capita.

Table (2.1) Human Development Index

Year	Singapore	Myanmar
2006	0.87	0.48
2007	0.88	0.49
2008	0.89	0.50
2009	0.89	0.52
2010	0.91	0.53
2011	0.92	0.53
2012	0.92	0.54
2013	0.92	0.55
2014	0.92	0.55
2015	0.93	0.56

Source: World Data Atlas

In 2015, human development index for Singapore was 0.93 score. Human development index of Singapore increased from 0.78 score in 1996 to 0.93 score in 2015 growing at an average annual rate of 0.89%. In 2015, human development index for Myanmar was 0.56 score. Human development index of Myanmar increased from 0.4 score in 1996 to 0.56 score in 2015 growing at an average annual rate of 1.746% is shown in (Table 2.1). A composite index measuring average achievement in three basic dimensions of human development a long and healthy life, knowledge and a decent standard of living

2.3 Per capita Gross Domestic Product

The per capita GNP measure has some limitations and some critics certain academic economists argue that its assumption of the rapidly diminishing marginal value of money income above the world average threshold of \$5,120 real GDP per capita distorts some HDI estimates and limits its applicability. They also claim that its basic statistical methodology is compromised by insufficient or inaccurate data so that cross-country comparisons and measures of development over time are highly suspect. Although these are somewhat valid criticisms, the fact remains that the HDI, when used in conjunction with traditional economic measures of development, greatly increases our understanding of which countries are really experiencing development and which are not. More important, by examining each of the three major components

of the HDI-adjusted real per capita income, life expectancy, and literacy and schooling measures and by disaggregating a country's overall HDI to reflect income distribution, gender, regional, and ethnic differentials, we are now able to identify not only whether a country is developing but also whether various significant groups within that country are participating in that development.

The gross domestic product (GDP) measures the total value for final use of output produced by an economy, by both residents and non-residents. Thus GNP comprises GDP plus the difference between the income residents receive from abroad for factor services (labor and capital) less payments made to non-residents who contribute to the domestic economy. Where there is a larger non-resident population playing a major role in the domestic economy (such as foreign corporation), these differences can be significant.

CHAPTER 3

COMPARISON OF SINGAPORE AND MYANMAR

Singapore is located in Southeast Asia between Malaysia and Indonesia, at the narrowest point of the Strait of Malacca, one of the world's strategic sea routes connecting the India Ocean with the South China Sea. Lying off the southern tip of the Malay Peninsula.

Located between Malaysia and Indonesia, Singapore is island republic with a land area of 719.1 square kilometers. Singapore is among the 20 smallest countries in the world and consists of one main island and 63 small islands. Singapore has a tropical climate; it is wet and warm for the majority of the year, with normal temperatures ranging between 22C and 35C. The rainy seasons are from December to March and from June to September. The hottest month of the year is May and the coolest December.

Singapore is an island nation with no land boundaries. Malaysia lies north across the Johore Strait and Indonesia to the south across the Strait of Malacca. Singapore comprises one main island and 58 islets. The total coastline in 2015 was 193 kilometers. Since 1988, the coastline has increased by kilometers as a result of extensive land reclamation and landfill projects.

The Singapore River is only 4.1 kilometers in length but was an important resource historically for early settlers and traders. The Singapore River has five tributaries: the Rochor, Whampoa, Kallang, Pelton, and Geylang rivers. Some of the large streams have been damned at their mouths to form freshwater reservoirs. Singapore has 10 major reservoirs, both coastal and island.

Singapore has a tropical climate, with high temperatures moderated by sea breezes and high humidity. There are two monsoon seasons, the northeastern (dry) monsoon from December to March and the southwestern (wet) monsoon from June to September. In the inter-monsoon seasons, afternoon and early evening thunderstorms are frequent in occurrence.

3.1 Overview of the economy of Singapore and Myanmar

Singapore success story of economic development can be said to have a demonstration effect on other developing countries and also Myanmar without exception. Much of Singapore's success is attributed to very good civil service. Singapore is the country that shows resilience to any business cycles when most other countries used to have hard times to struggle through them. Singapore's survival and economic take-off required for reaching government program as well as creative and innovative private sector efforts to provide the successes set into motion by government activities.

Being a founding member of ASEAN, Singapore always showed a leading role in all the regional economic activities and business forums. Even in the recent Asian financial crisis Singapore is the one that has the least impact from the contagion effect which brought economic slump and recession to most other ASEAN countries.

Singapore's population size is relatively small. There were 3.9 million Singapore residents and 1.6 million non-residents. The resident population registered a growth rate of 0.8 percent in 2016 the non-resident population grew by 2.5 percent in 2016. Labour force is depends on the size of the population. Employment and economic growth rate strongly related in Singapore. Therefore, employment has been rising in Singapore. Formal sector job creation is concentrated in construction, transport, retail and wholesale and business services.

To understand the economic development of Singapore that is quite unique in south-east Asia, it is important to have knowledge of the general policy framework of Singapore. In fact, Singapore's open-trade economic policies have enabled it to overcome land, labour, and resource constraints to become world's second most competitive economy.

Investment policies are generally open and tailored to attract foreign investment and ensure an environment conducive to efficient business operations. The government seeks to upgrade Singapore into a knowledge-based economy with a particular focus on the logistics, electronics, and info-technology, chemicals, life sciences, bio-medical, and healthcare sectors. Singapore is trying to become a key Asia-Pacific financial center and an info- communication hub. To achieve these objectives, Singapore has moved to open restricted sectors, such as domestic banking, telecommunications and power, to foreign investment. Singapore extensively uses

fiscal policy tools to encourage research and development, as well as attract foreign professionals to work in Singapore.

Singapore does not directly subsidize exports. The government offers significant incentives to attract foreign investment, with most incentives directed at export-oriented industries. It also offer tax incentives to exporters and reimburses firms for certain costs incurred in trade promotion. Singapore does not employ multiple exchange rates, preferential financing schemes, import cost reduction measures or other trade- distorting policy tools.

Myanmar, a lower-middle income economy with a GNI per capita of \$1,455 in 2017, is one of the fastest growing economies in the East Asia and Pacific region and globally. The GDP growth rate for 2016/2017 was 6.4 percent and is expected to remain the same in 2017/18, growing to 6.7% in 2018/19 and 7 percent in 2019/2020, mainly driven by services, industry and agriculture. Growth may be hampered by challenges including the ongoing and incomplete peace process with multiple ethnic armed organizations and the crisis in Rakhine State. The country must continue to improve its investment climate, banking sector and strengthen its implementation capacity on major reform programs.

Poverty in Myanmar has declined from 44.5% in 2004 to 37.5% in 2009/10 and 26.1% in 2015, according to the recent Myanmar-World Bank joint poverty analysis. However, poverty remains substantial, especially in rural areas where people rely on agricultural and casual employment for their livelihoods. Those who live near the poverty line are susceptible to economic shocks. Among ASEAN countries, Myanmar has the lowest life expectancy and the second-highest rate of infant and child mortality. Out of every 100 children, 6.2 die before their first birthday and 7.2 before their fifth (Population and Housing Census, 2014). In terms of nutrition, 29% of children under 5 are moderately stunted and 8% are severely stunted (DHS, 2015). The school dropout rate is high, especially in rural areas where 6 out of 10 children who start grade one dropout before the end of middle school; among the poorest families, this figure is 7 in 10.

Access to basic infrastructure and services remains a challenge in both rural and urban areas. Only one-third of the population has access to the national electricity grid, while road density remains low at 219.8 kilometers per 1,000 square kilometers

of land area. However, with the recent liberalization of the telecommunications sector, mobile and internet penetration has increased significantly from less than 20% and 10% in 2014, to 60% and 25% respectively in 2016. Myanmar is one of the world's most disaster-prone countries exposed to multiple hazards, including floods, cyclones, earthquakes, landslides, and droughts, ranking 2nd out of 187 countries in the 2016 Global Climate Risk Index and 9th out of 191 countries in the INFORM Index for Risk Management.

3.2 Gross Domestic Product

In 2016, GDP for Singapore was 309.75 billion US dollars. GDP of Singapore increased from 85.71 billion US dollars in 1998 to 309.75 billion US dollars in 2016 growing at an average annual rate 7.55%. In 2016, GDP for Myanmar was 63.25 billion US dollars. GDP of Myanmar increased from 7.44 billion US dollars in 1998 to 63.25 billion US dollars in 2016 growing at an average annual rate of 13.90% is showed in (Table 3.1). GDP at purchaser's prices is the sum of gross value added by all resident producers in the economy plus any product taxes and minus any subsidies not included in the value of the products. Data are in current U.S. dollars. Dollar figures for GDP are converted from domestic currencies using single year official exchange rates.

Table (3.1) Gross Domestic Product**(billion US dollars)**

Year	Singapore	Myanmar
2006	147.79	16.71
2007	179.98	23.25
2008	192.23	34.49
2009	192.41	38.00
2010	236.42	49.54
2011	275.97	59.98
2012	290.68	59.73
2013	304.45	60.13
2014	311.55	65.58
2015	304.09	59.49
2016	309.75	63.25

Source: World Data Atlas

3.3 Environment

In 2016, CO₂ emissions per capita for Singapore was 8.61 metric tons. Though Singapore CO₂ emissions per capita fluctuated substantially in recent years, it tended to decrease through 1997-2016 period ending at 8.61 metric tons in 2016. In 2016, CO₂ emissions per capita for Myanmar was 0.32 metric tons. Though Myanmar CO₂ emissions per capita fluctuated substantially in recent years, it tended to increase through 1997-2016 period ending at 0.32 metric tons in 2016 is showed in (Table 3.2). Carbon dioxide emissions are those stemming from the burning of fossil fuels and the manufacture of cement. They include carbon dioxide produced during consumption of solid, liquid, and gas fuels.

Table (3.2) CO₂ emissions per capita**(Metric Tons)**

Year	Singapore	Myanmar
2006	9.09	0.21
2007	9.21	0.22
2008	9.11	0.16
2009	8.52	0.15
2010	9.00	0.17
2011	8.67	0.17
2012	8.51	0.18
2013	8.46	0.20
2014	8.09	0.29
2015	8.52	0.30
2016	8.61	0.32

Source: World Data Atlas

3.4 Health

In 2016, infant mortality rate for Singapore was 2.2 deaths per 1,000 live births. Infant mortality rate of Singapore fell gradually from 25.2 deaths per 1,000 live births in 1967 to 2.2 deaths per 1,000 live births in 2016 show in (Table 3.3). In 2016, infant mortality rate for Myanmar was 40.1 deaths per 1,000 live births. Infant mortality rate of Myanmar fell gradually from 70.2 deaths per 1,000 live births in 1997 to 40.1 deaths per 1,000 live births in 2016. Infant mortality rate is the number of infants dying before reaching one year of age, per 1,000 live births in a given year.

Table (3.3) Infant Mortality Rate

(deaths per 1,000 live births)

Year	Singapore	Myanmar
2006	2.3	56.2
2007	2.3	54.5
2008	2.2	57.0
2009	2.2	51.0
2010	2.2	49.3
2011	2.2	47.6
2012	2.2	45.9
2013	2.1	44.3
2014	2.1	42.8
2015	2.1	41.4
2016	2.2	40.1

Source: World Data Atlas

3.5 Education

Between 1997 and 2016, Singapore duration of primary education remained stable at around 6 years. Between 1997 and 2016, Myanmar duration of primary education remained stable at around 5 years in shown (Table 3.4). Primary duration refers to the number of years of full- time equivalent duration in primary education in the school system according to ISCED.

Table (3.4) Duration of primary education**(Years)**

Year	Singapore	Myanmar
2006	6.0	5.0
2007	6.0	5.0
2008	6.0	5.0
2009	6.0	5.0
2010	6.0	5.0
2011	6.0	5.0
2012	6.0	5.0
2013	6.0	5.0
2014	6.0	5.0
2015	6.0	5.0
2016	6.0	5.0

Source: World Data Atlas

CHAPTER 4

SOCIAL INDICATORS

4.1 Population

Singapore's total population in 2016 was 5,607,300 (Table 4.1). There were 3.9 million Singapore residents and 1.6 million non-residents. Singapore residents, comprising Singapore citizens and Singapore permanent residents formed percent of the total population. The total population in 2016 grew by 0.1 per cent over the previous year. The resident population registered a growth rate of 0.8 percent in 2016. The non-resident population grew by 2.5 percent in 2016.

Table 4.1 Population and Annual Growth

Year	Number (‘000)			Average Annual Growth (Per cent)		
	Total Population	Singapore Residents	Non- Residents	Total Population	Singapore Residents	Non- Residents
2006	4,401.4	3,525.9	875.5	3.2	1.7	9.7
2007	4,588.6	3,583.1	1,005.5	4.3	1.6	14.9
2008	4,839.4	3,642.7	1,196.7	5.5	1.7	19.0
2009	4,987.6	3,733.9	1,253.7	3.1	2.5	4.8
2010	5,076.7	3,771.7	1,305.0	1.8	1.0	4.1
2011	5,183.7	3,789.3	1,394.4	2.1	0.5	6.9
2012	5,312.4	3,818.2	1,494.2	2.5	0.8	7.2
2013	5,399.2	3,844.8	1,554.4	1.6	0.7	4.0
2014	5,469.7	3,870.7	1,599.0	1.3	0.7	2.9
2015	5,535.0	3,902.7	1,632.3	1.2	0.8	2.1
2016	5,607.3	3,933.6	1,673.7	1.3	0.8	2.5

Source: Singapore Department of Statistics

Two reasons have been given for the growth in population. They are natural growth and migration. Natural growth is due to the difference between the crude death rate and birth rate. In the case of Singapore, the growth rate in population is due to both reasons. The growth rate of Singapore resident is 0.8 percent and non- resident is 2.5 percent.

Total Fertility Rate: Fertility rate refers to the number of live- births each woman would have during her reproductive years if she was to experience the age- specific fertility rates prevailing during the period. In 2016, there were 41,251 live- births, 2.2 percent lower than the 42,185 live- births in 2015. The number of resident births (with at least one parent being a Singapore resident) also declined from 37,861 in 2015 to 36,875 in 2016. Singapore's resident total fertility rate (TFR) was 1.20 births per female in 2016, down from 1.24 in 2015.

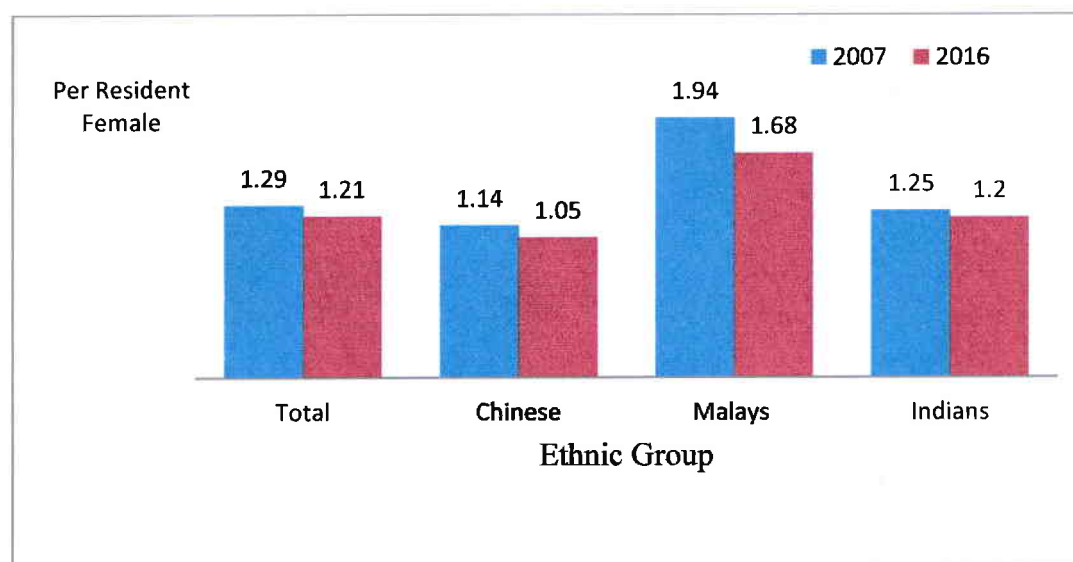
Table 4.2 Total Fertility Rate by Ethnic Group

(Per Resident Female)

Year	Total	Chinese	Malays	Indians
2007	1.29	1.14	1.94	1.25
2008	1.28	1.14	1.91	1.19
2009	1.22	1.08	1.82	1.14
2010	1.15	1.02	1.65	1.13
2011	1.20	1.08	1.64	1.09
2012	1.29	1.18	1.69	1.15
2013	1.19	1.05	1.66	1.11
2014	1.25	1.13	1.73	1.13
2015	1.24	1.10	1.79	1.15
2016	1.21	1.05	1.68	1.20

Source: Singapore Department of Statistics, Population Trends 2017

Figure 4.1 Total Fertility Rate by Ethnic Group



Source: Singapore Department of Statistics

Among the main ethnic groups the Chinese continued to have the lowest TFR at 1.21 in 2016 (Table 4.2). The total fertility rate for Indians was higher at 1.20, while that of the Malays (1.68) fell below the replacement level for the first time in 2016.

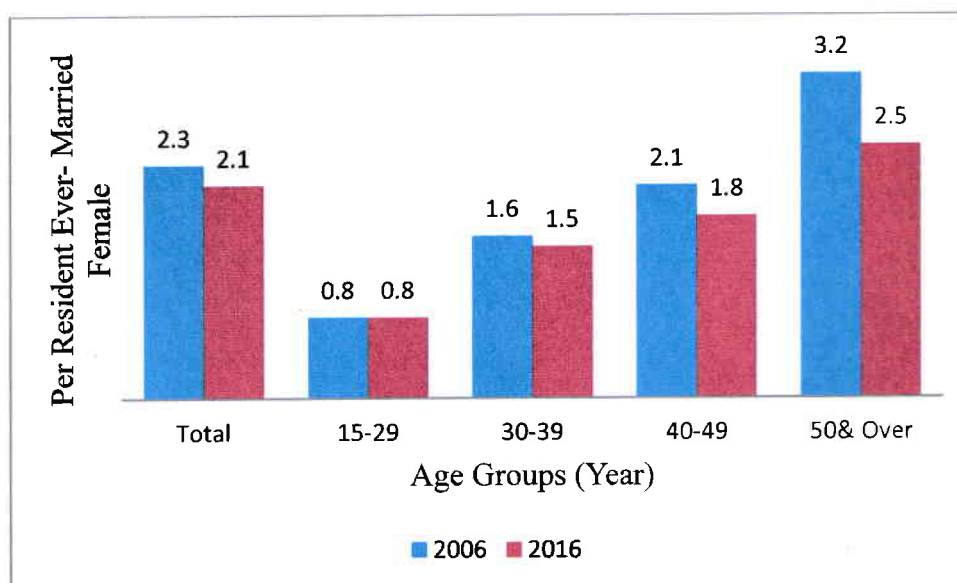
Average Number of Children Born by Age Group of Females: Consequently, the average number of children born to resident ever-married females aged 40- 49 years declined from 2.1 in 2006 to 1.8 in 2016 (Table 4.3). The decline in family size occurred for ever-married females across all age groups.

Table 4.3 Average Number of Children Born by Age Group of Resident Ever-Married Females

Age Groups(Year)	2006	2016
Total	2.3	2.1
15-29	0.8	0.8
30-39	1.6	1.5
40-49	2.1	1.8
50& Over	3.2	2.5

Source: Singapore Department of Statistics, Population Trends 2017

Figure 4.2 Average Number of Children Born by Age Group of Resident Ever-Married Females



Source: Singapore Department of Statistics

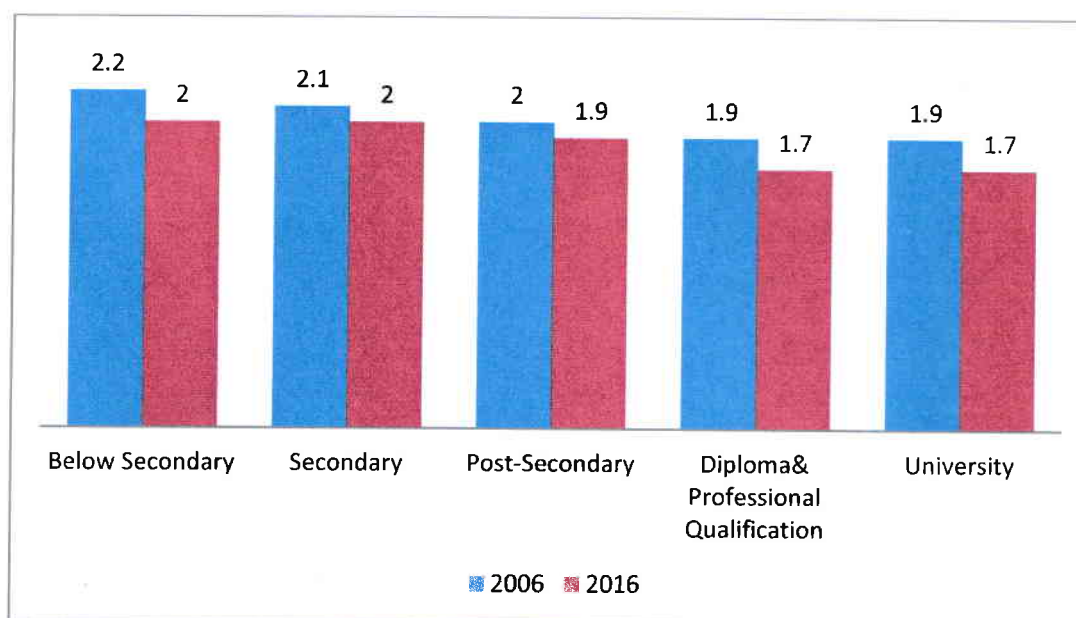
Average Number of Children Born by Educational Attainment of Females: Females with higher educational qualifications generally had fewer children than those with lower qualifications (Table 4.4). Resident ever-married females aged 40-49 years with below secondary qualifications had 2 children on average in 2016, higher than their counterparts with diploma & professional qualifications (1.7) or university degrees (1.7).

Table 4.4 Average Number of Children Born to Resident Ever-Married Females Aged 40-49 Years by Educational Attainment

Year	Below Secondary	Secondary	Post-Secondary	Diploma & Professional Qualification	University
2006	2.2	2.1	2	1.9	1.9
2016	2	2	1.9	1.7	1.7

Source: Singapore Department of Statistics, Population Trends 2017

Figure 4.3 Average Number of Children Born to Resident Ever-Married Females Aged 40-49 Years by Educational Attainment



Source: Singapore Department of Statistics

Mortality: Mortality refers to the death rate, or the number of deaths in a certain group of people in a certain period of time. Mortality may be reported for people who have a certain disease, live in one area of the country, or who are of a certain gender, age, or ethnic group.

Deaths and Death Rates: The number of total deaths rose to 20,017 in 2016 from 19,862 in 2015 as the population aged. The resident crude death rate in 2016 remained the same as the previous years at 4.8 deaths per 1,000 residents.

Age-Specific Death Rates: The resident death rates for males and females were generally lower in 2016 compared to a decade ago. The death rates for females lower than males in most age groups.

Infant Mortality Rate: This refers to the number of deaths of children under one year of age per 1,000 live-births. Along with life expectancy, it is one of the most widely used indicators of the population's health status. The infant mortality rate was 2.4 infant deaths per 1,000 resident live-births in 2016 and had remained between 1.7 to 2.6 infant deaths in the last decade (Table 4.5). The infant mortality rate for females was 2.5 per thousand live-births as compared with 2.3 per thousand live-births for boys.

Table 4.5 Infant Mortality Rate

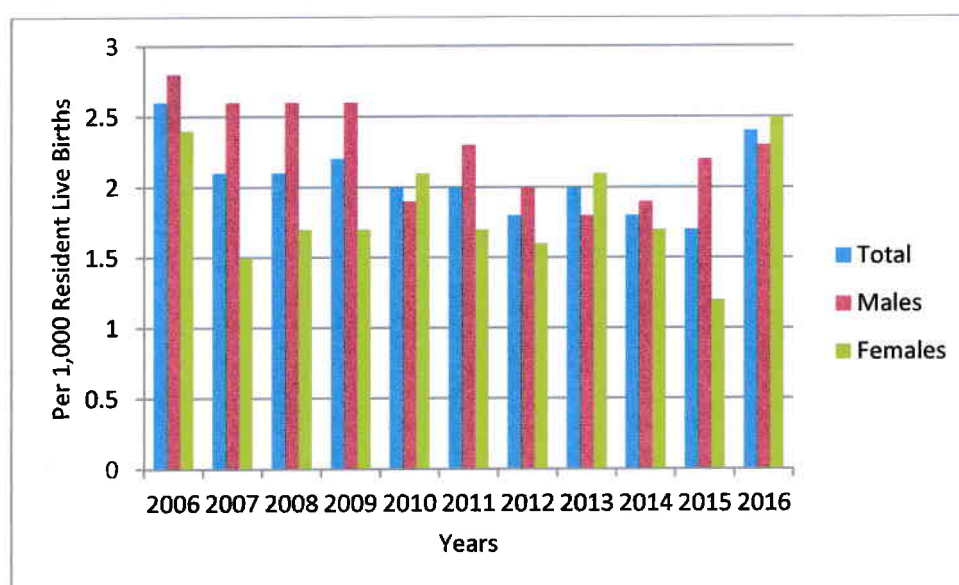
(Per 1,000 Resident Live Births)

Year	Total	Males	Females
2006	2.6	2.8	2.4
2007	2.1	2.6	1.5
2008	2.1	2.6	1.7
2009	2.2	2.6	1.7
2010	2	1.9	2.1
2011	2	2.3	1.7
2012	1.8	2	1.6
2013	2	1.8	2.1
2014	1.8	1.9	1.7
2015	1.7	2.2	1.2
2016	2.4	2.3	2.5

Source: Singapore Department of Statistics

Population Trends 2017

Figure 4.4 Infant Mortality Rate



Source: Singapore Department of Statistic

Life Expectancy: Life Expectancy refers to the average number of years a person (at birth or at a specific age such as age 65) could expect to live base on the age specific mortality rates of a given year. This single indicator is commonly used to sum up the mortality experience of a population, taking into account the age and sex structure.

Life expectancy at birth was 82.9 years in 2016, up from 80.3 years in 2006 (Table 4.6). Life expectancy at age 65 years also increased, from 18.9 years in 2006 to 20.8 years in 2016. Females had higher life expectancies at birth and at age 65 than males.

**Table 4.6 Life Expectancy of Singapore Residents at Birth and at Age 65 Years
by Sex, 2006-2016**

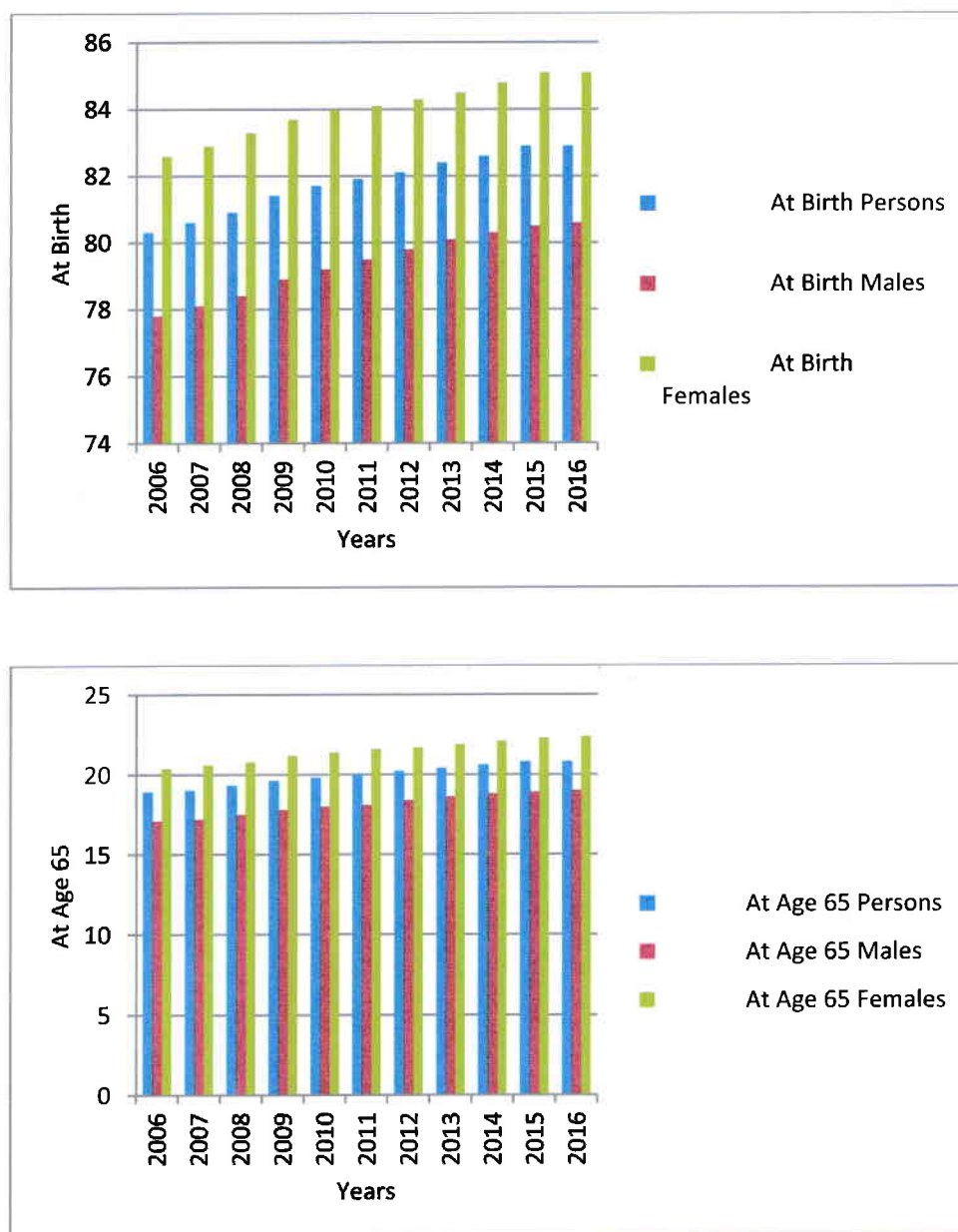
(Years)

Year	At Birth			At Age 65		
	Persons	Males	Females	Persons	Males	Females
2006	80.3	77.8	82.6	18.9	17.1	20.4
2007	80.6	78.1	82.9	19	17.2	20.6
2008	80.9	78.4	83.3	19.3	17.5	20.8
2009	81.4	78.9	83.7	19.6	17.8	21.2
2010	81.7	79.2	84	19.8	18	21.4
2011	81.9	79.5	84.1	20	18.1	21.6
2012	82.1	79.8	84.3	20.2	18.4	21.7
2013	82.4	80.1	84.5	20.4	18.6	21.9
2014	82.6	80.3	84.8	20.6	18.8	22.1
2015	82.9	80.5	85.1	20.8	18.9	22.3
2016	82.9	80.6	85.1	20.8	19	22.4

Source: Singapore Department of Statistics

Population Trends 2017

Figure 4.5 Life Expectancy of Singapore Residents at Birth and at Age 65 Years by Sex, 2006-2016,



Source: Singapore Department of Statistics

Employed Persons: Employed Persons refer to those who, during the reference week (i) worked for one hour or more either for pay, profit or for family gains or (ii) had a job or business but were temporarily absent because of illness, injury, labor-management dispute or other reasons.

Unemployed Persons: Unemployed Persons refer to those who did not work during the reference period but were available for work and were looking for a job with pay.

Persons in the process of starting their own business or taking up a new job after the reference period were also considered as unemployed.

Economically Active Persons: Economically Active Persons refer to those who were either employed or unemployed during the reference week.

Unemployment Rate: This entry contains the percent of the labor force that is without jobs. Substantial underemployment might be noted.

Dependency Ratios: Dependency ratios are a measure of the age structure of population. They relate the number of individuals that are likely to be economically “dependent” on the support of other. Dependency ratios contrast the ratio of youths (age 0-14) and the elderly (age 65+) to the number of those in the working – age group (ages 15-64). Changes in the dependency ratio provide an indication of potential social support requirements resulting from changes in population age structure. As fertility levels decline, the dependency ratio initially fall because the proportion of youths decreases while the proportion of the population of working age increases. As fertility levels continue to decline, dependency ratios eventually increase because the proportion of the population of working age starts to decline and the proportion of elderly persons continues to increase.

Total Dependency Ratio: The total dependency ratio is the ratio of combined youth population (ages 0-14) and elderly population (age 65+) per 100 people of working – age (ages 15-64). A high total dependency ratio indicates that the working- age population and the overall economy face a greater burden to support and provide social services for youth and elderly persons, who are often economically dependent.

Migration: A foreign worker is one who works in a country other than the one of which he or she is a citizen. Migrant workers who work outside their home country may also be called foreign workers or expatriates, especially when they are sent for or invited to work in the host country before leaving the home country.

The International Labour Organization estimated in 2014 there were 323 million international migrants worldwide who were outside their home country for at least 12 months and approximately half of them were estimated to be economically active (i.e. being employed or seeking employment). Some countries have millions of migrant workers. Some migrant workers may be illegal immigrants.

Illegal immigration, as well as immigration in general, is overwhelmingly upward, from a poorer to a richer country. Living in another country illegally includes

a variety of restrictions, as well as the risk of being detained and deported or of facing other sanctions.

In terms of the number of illegal immigrants living in a country, India hosts the largest number for any country in the world, with illegal immigrants from Bangladesh alone numbering 20 million.

The social indicators analyzed in the study showed that the health status in Singapore is high by international standards. Rising standards of living, high level of education and other high living conditions have contributed to the health of Singapore.

Aspired by English educational system, Singapore has attained a good educational system. At the moment Singapore is offering up-to-date educational services to international students through many foreign universities that have set up their educational institutions in Singapore. This has also contributed greatly to the economic development of Singapore.

4.2 Health

The state of health in Singapore is good by international standards. According to the Ministry of Health, rising of living, high standards of educations, good housing, safe water supply and sanitation, a high level of medical services, and the active promotion of preventive medicine all have helped to significantly boost the health of Singaporeans. The leading causes of death in Singapore are cancer, heart disease, pneumonia, and cerebrovascular diseases.

Healthcare in Singapore is mainly under the responsibility of the Singapore Government's Ministry of Health. Singapore generally has an efficient and widespread system of healthcare. Singapore was ranked 6th in the world Health Organization's ranking of the world's health system in the year 200. Bloomberg ranked Singapore's healthcare system the most efficient in the world in 2014.

Singapore's healthcare system uses a mixed financing system that includes nationalised life insurance schemes and deductions from the compulsory saving plan, or the Central Provident Fund (CPF), for working Singaporeans and permanent residents. This mechanism is intended to reduce the overuse of healthcare services. Medical insurance is available via Medisave for hospitalization and some outpatient services, Medifund for those unable to pay for their medical expenses, Medishield for catastrophic illness, and Eldersshield for senior citizens with severe disabilities.

In 2012, there were a total of 10, 756 hospital beds in the 25 hospitals and specialty centres in Singapore. The 8 public hospitals comprise 6 acute general hospitals (SGH, NUH, CGH, TTSH, KTPH& NTFGH), a women's and children's hospital (KKH) and a psychiatry hospital (IMH). In addition, there are 8 national specialty centres for cancer (NCCS), cardiac (NHCS), eye (SNEC), skin (NSC), neuroscience (NNI), dental care (NDCS) and a medical centre for multiple disciplines (NCIS and NHCS).

Health Care Structure of Singapore: The Ministry of Health has the overall responsibility for the provision and regulation of health care services in Singapore. It formulates health policies and plans and develops health care facilities. It also provides preventive, curative and rehabilitative health care services through public hospitals and polyclinics. The Health Corporation of Singapore (HSC) which is the holding company for the public hospitals is also under the Ministry of Health. HSC was incorporated in 1987 and is wholly owned by the government. The Director of Medical Services oversees the professional regulatory boards and the five divisions of medical services including those on Public Health, Services (hospitals, traditional medicine, forensic medicine, blood transfusion and pharmaceutical services) and Elderly and Continuing Care.

Health Care Delivery System in Singapore: Singapore has a dual health care delivery system where individuals can choose between public and private providers. For primary health care, 80% of the services are provided by private practitioners while the remaining 20% by government polyclinics. For the more costly hospital care, it is the reverse situation with 80% of the hospital care being provided by the public sector and the remaining 20% by the private sector.

Primary Health Care Services: In Singapore, primary health care services include curative out-patient medical treatment, health screening, preventive health programmes for school children, home nursing, day care and rehabilitation for the elderly, health education and promotion.

There are 15 government polyclinics throughout the country providing one-stop services to the public. The services provided by the public clinics include the following:

- medical treatment for acute and chronic illnesses;
- follow-up of patients discharged from hospitals;

- maternal (antenatal & postnatal) & child health (immunization and developmental assessment);
- health screening including cervical and breast cancer screening;
- health education;
- minor surgical procedures;
- clinical laboratory;
- X-ray facility;
- pharmacy;
- dietician service;
- medical social work service;
- psychiatric care;
- dental care;
- rehabilitation; and
- home nursing.

Private Health Care: The increasingly large private sector provides care to those who are privately insured, foreign patients, or public patients who are able to afford what often amounts to very large out-of-pocket payments above the levels provided by government subsidies.

The government uses the capacity of the private sector to reduce waiting times in the public sector. In 2015 it plans to use the Raffles Medical Group to receive non-critical ambulance cases.

Health Care Philosophy: Singapore aims to build up a healthy population through preventive health care programmes and the promotion of healthy living. Emphasis is placed on health education, immunization and health screening for early detection of diseases. The Singapore government considers that it has the responsibility to intervene in the health care sector where the market fails to keep health care costs down. The government controls the supply of hospital beds and their distribution by class in each hospital. It also controls the introduction of new technology and the development in specialist department. Lastly, the Singapore government has committed to be the provider of the last resort. The government provides heavily subsidized services at public hospitals and government polyclinics. Those who cannot afford health care services can apply for financial assistance under Medifund.

Dental Care Services: The government runs 187 school dental clinics to provide free dental care for school children. The government also provides dental care at six

mobile clinics, polyclinics and military camp. The majority of the population obtains dental care from the 452 private dental clinics.

National Health Plan: The National Health Plan (NHP) was announced in February 1983 and the declared objectives of the NHP were to secure a healthy, fit and productive population through active disease prevention and promotion of healthy lifestyles, and to improve cost-efficiency in the health care system. It would also meet the growing demand of a rapidly aging population for increased health care. Under this plan, the Medisave scheme (a compulsory savings scheme) was introduced in 1984 to meet rising medical expenditure. The Medisave account in the Central Provident Fund (CPF) allows members to withdraw funds from their accounts to pay for hospital services, within certain limits, of themselves and their immediate family members.

4.3 Education

The British-inspired education system includes six years of compulsory primary school, four years of secondary school, and two years of junior college for those aspiring to higher education. All children between age 6 and 14 are required to attend school, and school attendance in 2005 was almost universal for both the primary and secondary levels. The main language of instruction in Singapore is English, which was officially designated the first language within the local education system in 1987. English is the first language learned by half the children by the time they reach primary school.

Singapore has two public universities: the National University of Singapore, founded in 1905, with 27,972 undergraduate and graduate students in academic year 2013-2014; and Nanyang Technical University, founded in 1955, with 24,300 undergraduate and graduate students in academic year 2013-2014. A third, government-funded, privately managed institution, the Singapore Management University, was established in 2000 and had 7,979 undergraduate and graduate students in 2014-2015.

Singapore has six autonomous local universities, namely the National University of Singapore, Nanyang Technological University, Singapore Management University, Singapore University of Technology & Design, Singapore Institute of Technology and Singapore University of Social Sciences.

The education system is flexible and caters to every child's abilities, interests and aptitudes so as to help each develop to his fullest potential. It focuses on the development of human resources to meet Singapore's need for an educated and skilled workforce. It also facilitates the inculcation of sound moral values to serve as cultural ballast in the face of rapid progress and change.

Primary Level: At the primary level, normally starting at age seven, is a four-year foundation stage (Primary 1 to 4) and a two-year orientation stage (Primary 5 to 6). Primary education is compulsory under the Compulsory Education Act since 2003. Exemptions are made for pupils who are homeschooling, attending a full-time religious institution or those with special needs who are unable to attend mainstream schools. The foundation stage is the first stage of formal schooling. The four-year, from primary 1 to 4, provide a foundation in English, Mother Tongue, Mathematics and Science. Other subjects include Civics and Moral Education, Arts & Crafts, Music, Health Education, Social Studies and Physical Education, which are taught throughout Primary 1 to 6. Science is taught from primary 3 onwards.

To maximize their potential, pupils are formally streamed according to their learning ability at the end of Primary Four. All pupils then advance to the next stage of primary education, the orientation stage.

After six years of primary education, students will have to sit for the national Primary School Leaving Examination (PSLE). Students will then choose the secondary school of their choice based on their results at this examination; they will then be assigned to a secondary school based on merit and their choice. Pupils who have obtained the necessary standards are then admitted to the special Express or Normal stream in secondary schools.

Education is compulsory up to Primary 6 as this is considered the minimum period of education for all Singaporean children. Certain categories of children, e.g. those with special needs will be exempted from compulsory education.

Secondary Level: At the secondary level, pupils have the choice of three courses designed to match their learning abilities and interests. Pupils undergo four to five years of secondary education with different curricular emphases. The majority of pupils undergo the Special course or Express course while the rest enter the Normal course. Within the Normal course, pupils have the option of taking the Normal (Academic) course or the Normal (Technical) course, both leading to the Singapore-Cambridge General Certificate of Education 'Normal' – GCE 'N' level examination

at the end of four years. Those who are competent go on to take the Singapore-Cambridge General Certificate of Education 'Ordinary'-GCE 'O' level examination at the end of the fifth year. Upon completion of their GCE 'O' Level Examinations, students can apply for entry to a junior college for a two-year pre-university course, or a polytechnic for a three-year diploma course.

Pre-University Level: Admission to a junior college for a two-year pre-university course is based on a points system computed from the aggregate of the student's GCE 'O' Level result. At the end of the pre-university course, students sit for the Singapore-Cambridge General Certificate of Education 'Advanced' (GCE 'A') Level Examinations. Their eligibility for tertiary education is determined by the results of their GCE 'A' Level Examinations, SAT1 score and Extra-curricular activities.

The curriculum for pre-university students comprises two compulsory subjects, namely, General Paper and the Mother Tongue, and a maximum of four GCE 'A' Level subjects. Subjects offered in the Art Course include English Literature, Music, Economics, History, Geography, Art and Design and mathematics. Students in the science Course can opt for Physics, Biology, Chemistry, Physical Science, Mathematics, Further Mathematics, Economics and Computing. Management of Business and Principles of Accounting are only offered in Central institutes. Non-examinable subjects include Civics and Physical Education.

Polytechnic: Polytechnic is an institution of higher learning in Singapore. It is also the first polytechnic established in Singapore. It was founded on 27 October 1954 to provide studies, training and research in technology, science, commerce and arts. The former campus was originally located at Prince Edward Road and was relocated to its present-day location at Dover next to Dover MRT Station in 1978. AS an industry-oriented alternative to a broader based high school education, polytechnic graduates in Singapore after for work or many continue to complete university degrees. In contrast to polytechnics in the United States and UK, polytechnics in Singapore admit majority of its students after middle school which is after 10 years of formal education. Diplomas in a specialized area of study, for example Biomedical Science, is awarded after completing 3 or 2 years of studies. 2010 saw Singapore Polytechnic's 50th graduation ceremony and 150,000th graduate. To date, 195,000 students have graduated from Singapore Polytechnic.

Singapore polytechnic offers full-time diploma courses and range of continuing education program. It has ten academic schools and one academic department:

- ❖ School of Architecture and the Built Environment (ABE)
- ❖ SP Business School (SB)
- ❖ School of Chemical and Life Sciences (CLS)
- ❖ School of Communication, Arts and Social Sciences (CASS)
- ❖ SP Design School (SD)
- ❖ School of Mathematics and Science (MS)
- ❖ Department of Educational Development (EDU)

The Professional & Adult Continuing Education Academy or PACE Academy, is a multidisciplinary Continuing Education and Training (CET) Academy offering CET program for adults, both online and classroom based.

Universities and engineering programs: Professional engineering education in Singapore had its humble beginning in 1956. Classes then were held at the Singapore campus of the University of Malaya. When the Department of Engineering was transferred of Kuala Lumpur in 1958, a four-year professional diploma course was established in the Singapore Polytechnic. This course was superseded in 1964 by the establishment of the four-year Bachelor of Engineering course. The first batch of engineering students graduated in 1968. It was not until 1969 that a more local identity was established with the inauguration of the Faculty of Engineering at the University of Singapore. It became the Faculty of Engineering under the National University of Singapore with the merger in 1980 between the University of Singapore and Nanyang University.

There are three mainstream universities in Singapore. Only two of them, which are public universities, are providing engineering programs and they are the National University of Singapore (NUS) and Nanyang Technological University (NTU). These universities have initiated a number of innovative programmes, including the broadening of undergraduate education, the introduction of a core curriculum, collaboration with top foreign universities, and the establishment of interdisciplinary centres. A third university, the Singapore Management University (SMU), is a government-funded privately managed university offering a broad-based business curriculum modeled after that of the Wharton School of the University of Pennsylvania.

CHAPTER 5

CONCLUSIONS

5.1 Findings

Singapore's success story of economic development can be said to have a demonstration effect on other developing countries. Singapore is the country that shows resilience to any business cycles when most other countries used to have hard time to struggle through them. Being a founding member of the ASEAN, Singapore always showed a leading role in all the regional economic activities and business forums. Even in the recent Asian financial crisis Singapore is the one that has the least impact from the contagion effect which brought economic slump and recession to most other ASEAN countries.

Singapore's population size is relatively small. There were 3.9 million Singapore residents and 1.6 million non-residents. The resident population registered a growth rate of 0.8 percent in 2016 the non-resident population grew by 2.5 percent in 2016. Labour force depends on the size of the population. Employment and economic growth are strongly related in Singapore. Therefore, employment has been rising in Singapore. Formal sector job creation is concentrated in construction, transport, retail and wholesale and business services.

The state of health in Singapore is good by international standards. According to the Ministry of Health, rising of living, high standards of education, good housing, safe water supply and sanitation, a high level of medical services, and the active promotion of preventive medicine all have helped to significantly boost the health of Singaporeans.

Singapore's healthcare philosophy aims to build up a healthy population through preventive health care program and the promotion of healthy living. Emphasis is placed on health education, immunization and health screening for early detection of diseases. In Singapore, primary health care services include curative outpatient medical treatment, health screening preventive health program for school children, home nursing, day care and rehabilitation for the elderly, health education and promotion.

The British – inspired education system includes six years of compulsory primary school, four years of secondary school, and two years of junior college for

those aspiring to higher education. All children between age 6 and 14 are required to attend school, and school attendance in 2005 was almost universal for both the primary and secondary levels. The main language of instruction in Singapore is English, which was officially designated the first language within the local education system in 1987. English is the first language learned by half the children by the time they reach primary school.

Myanmar, a lower-middle income economy with a GNI per capita of \$1,455 in 2017, is one of the fastest growing economies in the East Asia and Pacific region and globally. Growth may be hampered by challenges including the ongoing and incomplete peace process with multiple ethnic armed organizations and the crisis in Rakhine State. The country must continue to improve its investment climate, banking sector and strengthen its implementation capacity on major reform programs. Poverty in Myanmar has declined from 44.5% in 2004 to 37.5% in 2009/10 and 26.1% in 2015, according to the recent Myanmar-World Bank joint poverty analysis.

5.2 Suggestions

To understand the economic development of Singapore that is quite unique in south-east Asia, it is important to have knowledge of the general policy framework of Singapore. In fact, Singapore's open – trade economic policies have enabled it to overcome land, labour, and resource constraints to become the world's second most competitive economy.

The government pursues conservative fiscal policies designed to encourage high levels of savings and investment, but invest heavily in the country's social and physical infrastructure, including education and transportation. The government generally runs a surplus budget. Singapore has virtually no control on capital movements. The key objectives of the country's Central Bank also engages in limited money- market operations to influences interest rates and ensure adequate liquidity in the banking system.

The social indicators analyzed in the study showed that the health status in Singapore is high by international standards. Rising standards of living, high level of education and other high living conditions have contribution to the health of Singapore. Aspired by English educational system, Singapore has attained a good educational system. At the moment Singapore is offering up-to –date educational

services to international students through many foreign universities that have set up their educational institutions in Singapore. This has also contributed greatly to the economic development of Singapore.

Singapore's population is small and it can thus lay down and enforce rules and regulations system dramatically. Its management system is also efficient: Myanmar ought to follow Singapore's management system in order to promote its economics growth.

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