

# The 20<sup>th</sup> ASEAN Japan High Level meeting on Caring Societies -Day 2 -

Country name

Name/SOMSWD, SOMHD,SLOM

### ■ What opportunities do you have to share and communicate with your children about “Social security”?

~Social insurance, Social welfare, Public assistance, Healthcare and public health, etc.~

Various agencies working together as whole of nation to achieve Wawasan Brunei 2035.

- The accomplishments of its well-educated and highly skilled people
- The quality of life
- The dynamic, sustainable economy

One of the priority key-area is that Bruneian to focus to achieve is “*Resilient and cohesive society*” which is inclusive and sustainable social security, population with core values and social harmony through community unity.

Various participation are from the government, central bank, bank institutions, insurance agencies and individuals.

- Under the Brunei Vision, Brunei Darussalam desire to become a developed country by 2035 with Highly Educated, Skilled and Successful People; People have a High Quality of Life; and a Dynamic and Powerful National Economy.
- Additionally, it is essential to improve income and health security in order to maintain economic growth and establish a stable society (from young). Additionally crucial is the establishment of a secure society in which the population as a whole is prepared for a various risks or uncertainty.

### 1. Social Insurance and Social Welfare

The government of Brunei administered programs that support the community such as:

- Old-aged Pension, allowances for person with disability (this includes those who experiencing mental disorder, blind, and Hansen). The recent old age pension and disability allowance act, 2021, allows person with disability from **age new-born and above** (upon the verification from the specialist/doctors) to get the benefits.
- Welfare assistance are given to those are in need with the aim to easing their burden for a period until the recipients has a source of income that is though to be able to support their daily life.
- Pension scheme (before 1993)
- TAP and SCP are compulsory **for working group aged from 18 years and above.**
- SCP self-employed also for those who are generating income, has no formal employment or no longer works in a formal job and does not receive pension from any pension scheme service. The Government will provide a match-up of B\$17.50 when the member make voluntary contribution.
- New: SPK will be implemented in July 2023, which aim to strengthen TAP members' social security at retirement

- Welfare Benefits provided through the **Old Age and Disability Pensions Act**, whereby women also have equal rights to receive old age pensions once they attain the age of 60 years. On social and financial security, in addition to our provision of old age pension and disability allowance as well as the mandatory **Employees Trust Fund** (ETF), Brunei Darussalam has introduced the **Supplemental Contributory Pension** (SCP) Scheme.

# Brunei Darussalam

## **2. Access to healthcare and public health.**

“The Government of Brunei Darussalam provides free medical and health care to the citizens via government hospitals, health centers and clinics. A large network of health centers and clinics, located throughout the country, provides primary health care services, including those for mothers and children. In remote areas that are not accessible or are difficult to access by land or water, primary health care is provided by Flying Medical Services. The decentralization of primary health care services in 2000 was initiated to enhance the accessibility of care to all in the country. To date, there are four government general hospitals, 17 health centers (including Panaga Health Centre), 15 health and maternal and child health clinics, five travelling health clinics and two Flying Medical Services teams for remote areas.”

[Source: Health Information Booklet, 2012]

## Country Profile

~Social Security Education~

### ■ Challenges

- Unemployment
- NCD

### ■ What we want to share at this meeting

- **Best practices and exchange of information on developing and maintaining long-term care for the elderlies.**