REDEFINING BEFRIENDING:

BUILDING RELATIONSHIPS AND ENHANCING CARE IN THE COMMUNITY CARE ECOSYSTEM

Speakers' Presentation Synopsis

Multiple Dimensions of Health and Wellbeing at Older-Midlife and Older Ages in Singapore: Insights from Survey Research

The presentation will delve into different dimensions of physical and psychological health and wellbeing at older-midlife (50-59 years old) and older ages (60 years and older) in Singapore from national surveys conducted by Duke-NUS. The findings presented will include aspects such as psychological resilience, depressive symptoms, quality of life, physical activity, self-assessed health. and use of digital technology.

Dr Abhijit Visaria

Collaborating with Primary Care Networks and GPs under Healthier SG

MOH has announced the implementation of Healthier SG in 2023. Healthier SG involves a mindset change in the way we look at healthcare. The key features involve the mobilisation of family doctors, co-developing a health plan for enroled patients, support from community partners, national enrolment of patients to primary care doctors, and strengthening of enablers.

Private GPs are important elements of the primary care sector. GPs, as trusted family doctors play a critical role in Healthier SG. A Primary Care Network (PCN) is a network of GPs supported by nurses and care coordinators in providing holistic and coordinated care for patients with chronic conditions. The team-based care approach ensures patients are better cared for in the community.

Dr Tham Tat Yean

Social isolation and loneliness among the elderly in the post COVID-19 time: Insights from a community participatory study in Clementi neighbourhood

In partnership with Lions Befrienders (LB), the NUS school of public health research team has conducted a multi-phased mixed-methods study to understand social isolation and loneliness among the elderly in Clementi since Jan 2021. The presentation will be focused on the following:

(1) individual and social attributes relating to social isolation, loneliness, and community engagement; and
(2) the elderly's views and experiences of their neighbourhood and their roles in community participation.

Dr Yi Huso

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Community Engagement in Active Ageing

Assoc Prof Carol Ma

Population ageing cannot be considered a process that concerns only older adults. A whole of society approach is needed to address population ageing. The presentation will discuss concepts for community engagement and service learning, particularly how service-learning can be applied to older adults' community engagement activities. Additionally, active ageing and empowerment of older adults can be promoted through senior volunteerism, lifelong learning, and intergenerational learning. Insights from active ageing policy from Hong Kong and overseas community engagement projects will also be drawn.

Exergaming and Health Coaching for Health and Well-Being: Towards User-Centred Community Initiatives for the Elderly

Prof Theng Yin Leng

The ageing population with multiple chronic conditions and complex health issues cause huge stresses on the healthcare system in Singapore, for example, the long admission waiting time and hospital bed crunch. This presents an urgency to fill the gaps between care from the healthcare system and from the community. To help patients be more involved in their own health, health coaching has been deployed in various nations. Health coaching is a goal-oriented, client-centred partnership that is health-focused and occurs through client enlightenment and empowerment. In this presentation, I will be highlighting ARISE's work in training of volunteers to be health coaches as well as leveraging on technology-enablers to match and allocate health coaches to support elderly care recipients with guided coaching towards better health and well-being.

End of Life Care in the Community: Considerations and Options

Dr Ng Wai Chong

With a rapidly ageing population, the need for end of life care is expected to rise rapidly. This is further challenged by the changing living arrangement of the older persons. The focus on End of Life Care for the Frail Elders is thus imminent. While the hospice movement and the Agency for Integrated Care have committed tremendous effort and achieved enormously in setting standards and making EoL care more accessible, the work is not done, especially in scaling the best practices across the 'world' of community aged-care. In order to meet the needs of the dying older person, the community should embed end of life care into all aspects of community health and social care, especially for the frail and aged.