A handbook for building enabled communities based on practical experiences and lessons learnt from leaders in the Community Care sector.
BUILDING ENABLED COMMUNITIES IN SINGAPORE

A project supported by the Agency for Integrated Care (AIC)

Authored by Caroline Lim, PhD
Edited by Ivan Lim
ABOUT THIS PROJECT

Dr Caroline Lim

Enabled communities is a strengths-based approach to community development. In an enabled community, all members including the young, the elderly, the able-bodied, and those with special needs, participate actively in community life.

An enabled community is not utopia. Ibasho Café in Japan is an example of an enabled community. The Ibasho approach (www.ibasho.org) recognises elders as invaluable assets and seeks to empower them to be active participants.

Instead of treating what is wrong, enabled communities discover and draw on what is strong to enrich lives. Hence such communities often exhibit traits of resilience, resourcefulness and resolve.

Enabled communities are emerging locally. I am privileged to interact with six of these organisations in our midst through this Project.

I am grateful to Sweet Fun, Loong Mun and Siang Jye for the opportunity to partake in this meaningful initiative. I wish to also thank Ivan and Xiang Yao who extended instrumental support from start to finish.

Touching one life at a time, these six organisations have dedicated their mission to care for and to enable our communities. Each of them possesses different capacities and capabilities. Irrespective, they share a common goal – one that goes beyond supporting the communities to enabling residents to lead independent and dignified lives.

As we share their stories in the ensuing pages, I believe this is only the start of our journey to discovering more organisations who are making a positive difference in our communities, in their unique ways.

Caroline is a senior lecturer at the Singapore University of Social Sciences who teaches mostly marketing courses such as business-to-business marketing and customer relationship management. Her research areas cut across blockchain, common pooled resource, community development and healthcare.
“You need to have a philosophy of ownership – adopting blocks under your care. And it cannot be just in one person, but all the way throughout the organisation. And that philosophy will undergird you in whatever you do.”

Ms Quek Ai Siew,
St Hilda’s Community Services
CONTENTS

07 Foreword
10 Building Enabled Communities
43 Our Enabled Communities
60 Resources
80 Credits and Acknowledgements

Photo courtesy of AWWA.
“We believe that regardless of age, there is a role for contribution. We need to change mind-sets. Just because you are old, it does not mean you cannot keep on learning and giving.”

Ms Han Yah Yee,
Montfort Care
FOREWORD

Dr Wong Loong Mun and Dr Wong Sweet Fun

Co-chairs, Enabled Communities Workgroup

Singapore is a rapidly ageing society. By 2030, one in four Singaporeans will be aged 65 and above. The Community Care sector has grown much over the last several years in response to the health and social care needs of our seniors. This has been thanks to the combined efforts of government, the public and private sector, voluntary welfare organisations and many supporters from organisational sponsors to families and individuals.

Just as importantly, a crucial piece of the puzzle is to ensure that the communities we live in are strong, stable and welcoming. They are, after all, where we spend most of our time. When people are enabled to be active, engaged and involved, communities thrive. They become a solid base of support for the needy as well as a platform for the discovery and fulfilling of potentials – regardless of age, physical or social status. These communities can withstand challenges, because of their collective belief and strong bonds built between their residents.

We want to celebrate such communities, and we thank the organisations who have started to make them happen, each in their own way, in their own neighbourhoods. We hope that you will find the stories captured within this book encouraging and uplifting.

For Community Care providers, your efforts have been instrumental in preparing Singapore for our ageing population. Being closest to the ground and able to create the most meaningful impact to people, you are well-positioned to continue playing a pivotal role in community development. More than being excellent providers of services, you can also be facilitators and enablers of the community. Inside this book is a guiding framework we call the Five Pillars of Enabled Communities. It was developed from the learnings of our partners who themselves have taken this bold step. We hope that it will be useful to you.

Once again, we convey our warmest thanks to our six partners – AWWA, Montfort Care, St Hilda’s Community Services, TOUCH Community Services, Tsao Foundation and Yishun Health – for sharing their stories to help make this publication possible and for embarking on this meaningful work.
Building Enabled Communities In Singapore

WHO IS THIS HANDBOOK FOR?

If you are a Community Care provider who aspires to do more for the community around you, this handbook is for you.

Inside, you will find a guiding framework and resources developed from the experiences of a number of organisations that have dared to be different.

Beyond the health and social care services they provide for their beneficiaries, these organisations have taken deliberate steps to be inclusive and to play an active role in enabling the community around them. They seek not only to support their beneficiaries, but also to activate their wider community’s resourcefulness, resolve and resilience.

We hope this handbook provides a starting point for reflection and discussion in developing your own enabled communities around Singapore.
We spoke with the staff of six Community Care organisations who have embarked on their own journey of enabling their communities.

The key was to uncover the practices and lessons they have learnt as they sought to build resilient and resourceful communities around them, enabling their residents to lead independent and dignified lives.

All in, over 1,000 minutes’ worth of transcripts were derived from the interviews.

We hope that the insights documented within will serve as a resource and inspiration for the birthing of more enabled communities around Singapore.
“We are here to help build up the community, to weave together and create spaces for people to come together. Through providing the tools and spaces, we want people to know that they have a great deal of capabilities and resources within themselves and in the community. That is the essence of why we are here.”

Mr Bastari Irwan, Yishun Health
WHAT ARE ENABLED COMMUNITIES?

No two communities are the same. Yet, we see that some communities appear more active, cohesive and resilient than others. Their residents, regardless of age, abilities and physical conditions, are actively contributing to strengthening community ties and social bonds. Together, they make their own communities stronger.

These are characteristics of an Enabled Community, where the social fabric – the glue that binds a community together – is especially strong. This is not created by chance.

Often, it is the work of many organisations and individuals working together with the common goal of building up the communities in which they live.

Organisations can be the catalysts and anchors for such collaborative, enabling work. Health and social care service providers, in particular, stand especially ready to take on such a task. The core services they provide and the relationships built grant them legitimacy in the community, and provide a springboard upon which to reach out, engage, empower and enable.

That is what a number of organisations have done. They have gone beyond their core work and sought to enable the communities in which they are based.
A PARADIGM SHIFT: FROM SUPPORTING TO ENABLING

Many voluntary welfare organisations were originally set up with a mission to support beneficiaries with relevant services and programmes. For those thinking of doing more to enable their community, a paradigm shift in management and control is needed – from a mindset of supporting, to one of enabling; from top-down, to bottom-up.

From the six organisations we spoke with, we observed a shift in management approaches; a shift to one that is: decentralised, disintermediated and democratised.

An enabled community encourages the active participation of its residents. Every member, regardless of abilities, counts in shaping the community. This inclusive approach is evident especially when residents themselves design and execute programmes and activities, bottom-up not top-down. The management of each community is decentralised, being open to feedback from multiple sources and so being able to effectively respond to what is strong in the community, instead of what is wrong.

Residents are fellow citizens, not clients. They each possess unique capabilities and capacities to contribute. Staff, therefore, should be facilitators to empower them to discover and harness their strengths. And as programmes are co-designed and co-produced with residents in the community, barriers are reduced (disintermediated) and they become more accessible to all (democratised). The enabled community learns to be resourceful and develops self-reliance.
WHAT MAKES ENABLED COMMUNITIES WORK?

FIVE PILLARS OF ENABLED COMMUNITIES

To be enabled is to be able to do more for oneself and for others. This is the essence of an enabled community. Such communities are resolute, resilient and resourceful. Each member is encouraged and empowered to participate and contribute, regardless of age, ability or physical status.

This is an aspirational goal for many organisations that have set their life’s work into building strong and cohesive communities. Incidentally, communities are diverse, and there is no one right way suitable for every organisation. So how does one go about developing a community like that?

Seeking to uncover the core elements of these communities, we conducted in-depth interviews with the six organisations that have embarked on their own journeys in building enabled communities.

We have identified five pillars as the foundation of such enabled communities – Sense of Purpose, Building Bridges, 3M (Mine, Map, Mobilise) Your Assets, Programmes to Empower and, Reflect & Realign. Individually, they can serve as a starting point for deliberation and a launchpad for the journey. Together, they constitute a sustainable strength-based approach to building enabled communities.

Over the next few pages, you will find a guide on how your organisation may choose to act on each of these pillars, with suggested activities and outcomes that can help make your enabled community work.
FIVE PILLARS OF ENABLED COMMUNITIES
A sustainable strengths-based approach to building Enabled Communities.

01 Sense of Purpose
Attain a shared organisational purpose that is inclusive, community-based and community-oriented.

02 Building Bridges
Outreach and connect with community members so that your organisation becomes a “household name” amongst residents in your community.

03 Your Assets
Mine, map and mobilise a network of community assets that you can harness to develop the community.

04 Programmes to Empower
Co-design programmes and activities with residents in the community to cultivate and strengthen their sense of belonging, ownership and responsibility.

05 Reflect and Realign
Reflect on community feedback to define your set of “enablement” indicators and realign your activities as the community grows and develops.
Purpose drives people and organisations. Building an enabled community is no different. As you will see in the stories featured here, there are many ways to define your purpose, but a common thread through them all is one that is inclusive, community-based and community-oriented.

An inclusive approach to development is one where your residents are involved in the co-design and co-production as the community is shaped with and by their inputs. Ultimately, your organisation will initiate programmes for the community and draw residents in as co-designers or programme owners, where appropriate. Ownership cultivates responsibility, which sustains the long-term commitment to community development.

It is essential that your organisation believes in this and communicates this to all staff. This shared purpose will shape thinking and behaviour towards the community. This is the first of five pillars in building an enabled community.

You may find it helpful to do some research on the needs of your community. A good source for such ground information could be AIC’s Community Networks for Seniors (CNS). Think about what is realistic and feasible, and select a target area or community to work in. This initial research will help you refine your purpose, define your roles, strategy and action plans going forward.

Questions for Reflection

1. What is our purpose?
2. Where is our community?
3. What is the make-up of our target community?
4. What role can we play with our community?

Get in touch with AIC to learn more.
## SENSE OF PURPOSE

### ACTIVITIES

- Research and learn needs of the community
- Adopt an inclusive community mind-set
- Define roles, align vision, mission, strategy, action plans, target area and segment

### OUTCOMES

**Short-term**

- As a start, achieve internal consensus of organisation role, vision, mission, strategy, action plans etc.
- Select a community area and target segment

**Mid-term**

- Have organisational purpose distilled within organisation
- Adopt continuous learning and understanding of the needs of the community and opportunities for intervention

**Long-term**

- Achieve strong organisational sense of ownership of community

---

Clients at AWWA are encouraged to take up volunteering roles around the centre.

*Photo courtesy of AWWA.*
Building Enabled Communities In Singapore

EMPOWERED LIVES
Believing that the disadvantaged can be empowered to lead dignified and independent lives, AWWA encourages residents and clients at AWWA Senior Community Home (SCH) and AWWA Senior Activity Centre (SAC) – many of whom are aged, functionally and financially challenged – to take up various empowering roles. These include serving as fire wardens and senior ambassadors who help out for outings and events, as well as informal roles such as reading the papers aloud for other residents.

For their contributions, the residents are recognised through special celebrations to rejoice in their efforts and to build their self-esteem.

PROMOTING HEALTH THROUGH SOCIAL BONDS
Yishun Health sought to unlock the power of informal social networks in an effort to promote healthy living amongst residents in the north of Singapore.

Three Wellness Kampungs – each offering a suite of health and social programmes – were strategically set up close to blocks of flats with a high concentration of frequent hospital admitters. These three open-concept sites located at the void decks encourage residents to enter and explore and foster interactions between residents.

Early findings have been encouraging – Wellness Kampung participants appear to have fewer hospital admissions than non-participants.

Photo courtesy of AWWA.

One of the three Wellness Kampungs in Yishun at Blk 765 Nee Soon Central. It is open to the public from 8.30am to 5pm during the weekdays.

Photo courtesy of Yishun Health.
ComSA was envisioned as a community-wide effort to enable a healthy community where seniors and residents are engaged and have increased sense of wellbeing.

A SYSTEM FOR SUCCESSFUL AGEING

Seeking to create a sustainable and integrated Community Care system that enables successful ageing-in-place, the Tsao Foundation understood that a community-based, community-wide approach was needed for its Community for Successful Ageing (ComSA) in Whampoa. Health is recognised as a product of many factors – biological, psychological and social.

To that end, Tsao developed and piloted a community risk screening and needs assessment tool to identify high risk seniors for early intervention and uncover their needs. This allowed them to systematically evaluate how well the community was managing and identify opportunities for person-centred interventions and supportive partnerships with community organisations, health and social service providers and other stakeholders.

Get in touch with Tsao Foundation to learn more.
EVERY RESIDENT IS A FRIEND
St Hilda’s Community Services started reaching out to 13 blocks of HDB flats in Tanjong Rhu with a clear aim in mind – to get to know its senior residents as friends and help them age in place within their homes and the community. This has given rise to a sense of ownership of the community and a desire to remain relevant through a thorough understanding of its residents.

Since 2004, St Hilda’s has expanded its outreach to another 22 blocks of flats at Dakota Crescent and Old Airport Road. Through the years of learning and growing with the community, St Hilda’s has come to offer a holistic suite of services based on the identified needs of its residents. This includes day rehabilitation, health screenings, social activities and various forms of community support for the residents they call friends.

MY EXTENDED HOME
With a deep-rooted belief in being a community-based organisation, Montfort Care sought to create an inclusive community living space. Named the GoodLife! Makan community kitchen, this community space brought stay-alone seniors together for meals, bonding and learning.

The idea of inclusivity trickled down to the physical design of the space, where the flooring was intended to look just like the common corridor. This subtle difference encourages residents to walk in and out openly and see the space as an extension of their home.

Montfort Care’s GoodLife! Makan community kitchen is located at the void deck of Block 52 Marine Terrace, right below the homes of many of its regular senior visitors.

The Tanjong Rhu estate where St Hilda’s started its community engagement efforts some 17 years ago.
Relationships are the cornerstone of all your community efforts. If you are new to the community, you will need to build them up. Even if you are established and have long-standing ties with your residents, you will need to maintain them. The aim is to build strong visibility and popularity with your residents, who will then relate to you and trust that your organisation is looking out for them. This is the second pillar in building enabled communities.

There are many methods to outreach and stay connected. Spend deliberate time in the community by visiting your residents and participating in or organising community events. Be visible, helpful, welcoming and likeable – just like a good neighbour would.

Seek to become a “household name” amongst your residents, who will think of you as the first point of contact for issues in the community. This is how you go deeper to uncover their wishes, dreams, core issues and needs.

Questions for Reflection
1. Who are our residents?
2. How may we reach out effectively to them?
3. How do we stay connected and build rapport with them?
## BUILDING BRIDGES

### ACTIVITIES

- Introduce yourself and actively outreach to the community
- Meet residents, door knock and survey for interests and needs
- Participate in and organise community events

### OUTCOMES

<table>
<thead>
<tr>
<th>Short-term</th>
<th>Mid-term</th>
<th>Long-term</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Track the number of residents outreached to</td>
<td>- Be recognised by the community</td>
<td>- Organisation is a household name and popular among residents</td>
</tr>
<tr>
<td>- Develop a map of residents’ interests and needs</td>
<td>- Be able to articulate the interests, wishes and needs of the community</td>
<td>- Residents have top-of-mind awareness of organisation.</td>
</tr>
</tbody>
</table>

*Photo courtesy of TOUCH Community Services.*

▲ Frequent and genuine interactions with Ang Mo Kio residents have helped cement TOUCH’s image as a good neighbour in their eyes.
EVERY DOOR COUNTS
Relationship building takes time but reaps dividends. That is why St Hilda’s has been knocking on doors four times a year for the past 17 years in Tanjong Rhu.

So committed have they been in reaching out to know every resident and see to their needs, the community has embraced St Hilda’s and come to see them as part of the very fabric of the community. The strong trust built up with the residents over the years has fostered much more open information sharing.

In turn, St Hilda’s has been able to remain relevant to the community’s needs, resourcing and enabling senior residents to age well and in-place. Many residents themselves have signed up for the cause, volunteering as floor representatives to reach out to and stay in touch with their neighbours, inviting them to various health and social programmes organised by St Hilda’s.

A GOOD NEIGHBOUR
As a new service provider in Ang Mo Kio, TOUCH staff deliberately sought to make themselves more visible and to show the community that they were here as a good neighbour.

This meant active participation in community events and having frequent engagements with residents to build up understanding, familiarity and rapport.

They even chose to conduct meetings close to their residents, in nearby coffee shops instead of the office, donned in their signature grey polo t-shirts.

◀ TOUCH makes it a point to be visible in the community by having a presence at many community events such as this health screening.

▶ Going door knocking to meet and greet residents is one of the staple activities of community organisations determined to build relationships with residents. It is also a great way to uncover needs and interests of the community.

Photo courtesy of TOUCH Community Services.

Photo courtesy of TOUCH Community Services.
OUR LITTLE VILLAGE
When AWWA started their services in Ang Mo Kio, they wanted to value-add to the community, build up recognisability and establish goodwill with the neighbourhood’s residents.

One of the ways they did this was to offer a wheelchair loan service which has been readily embraced by residents. So far, close to ten wheelchairs have already been loaned out for up to two months or more. The initiative was accompanied by the building of a community gym which has since become popular with the residents living nearby.

AWWA also actively reached out to residents and frequently partnered with grassroots, religious institutions and other community organisations on various community events and projects.

Through their concerted efforts in being present and helpful, AWWA has built up a strong credibility and relationship with the residents in the ten blocks of surrounding flats which they regard as their “little village”.

Mr Lim is one of the happy beneficiaries of AWWA’s wheelchair loan service. Living just a few blocks away, the wheelchair has allowed him to get around more easily. In particular, he frequents the centre to meet up with AWWA staff whom he has struck up a friendship with.

The community gym situated inside AWWA’s Rehab and Day Care Centre at Ang Mo Kio Block 126 is open to the public from 4 to 7pm on weekdays.
NOTHING BEATS A LIKEABLE FACE
Montfort Care believes that nothing beats a “likeable face” when seeking to engage the community. Beyond the usual door knocking, Montfort makes it a priority to be popular with the residents by introducing programmes aligned with their interests.

One of the results was GoodLife! Makan – a community kitchen launched in 2016. It was designed to bring stay-alone seniors together for social interactions and daily lunches prepared by the seniors themselves for sharing with one another.

Offering more than food, the centre is a space for conversations, learning and companionship. It has also been a subtle yet effective way of building up Montfort’s recognition and acceptance by the community.

▲ GoodLife! has an entire room full of massage equipment – a favourite of the seniors. Many come down daily just to enjoy the massages and catch up with friends.

▲ At GoodLife! Makan, regular activities are held daily to bring seniors together and keep them active. Here, they are enjoying their staple Tuesday exercise led by a volunteer trainer.

▲ Few things bond people better than food. Residents connect with one another over the daily meals they prepare themselves at GoodLife! Makan.
An important component of the strength-based approach toward building enabled communities is that of assets, which are resources within the community that can be harnessed and strengthened. Assets may include individuals, infrastructure, facilities and stakeholders who all possess different capabilities and capacities that can enable the community when networked.

To effectively harness their assets, organisations can Mine, Map then Mobilise them (the 3Ms).

To mine is to identify your assets and areas for addressing – through available information, research or simply walking the ground to observe and speak with residents, business owners, organisations and other stakeholders.

You will uncover a wealth of tacit knowledge that can be consolidated and mapped into a structured format, such as a set of protocols for support or escalation, or a power-interest grid.

With your assets identified and appropriately mapped out, you will get a clearer understanding of the resources you have to activate and mobilise. Build up your partner networks, match your assets to community needs and think of what your residents can be empowered to do. This is the third pillar in building enabled communities.

Questions for Reflection

1. What are our assets?
2. How are they important to the community?
3. How may we engage and partner them for the community?
### 3M YOUR ASSETS

#### ACTIVITIES

**Mine your assets**
- Walk the ground to identify strengths and resources in the community, including residents themselves
- Identify partners, build and strengthen partner relationships
- Uncover areas for improvement within the community

#### OUTCOMES

<table>
<thead>
<tr>
<th>Short-term</th>
<th>Mid-term</th>
<th>Long-term</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Map your assets</strong></td>
<td><strong>Mobilise your assets</strong></td>
<td><strong>Organisation becomes a well-networked node that is able to effectively harness assets to develop the community</strong></td>
</tr>
<tr>
<td>- Develop a map of assets such as on a 2X2 power-interest grid or visual mapping of community resources</td>
<td>- Partner networks are established and collaborative</td>
<td></td>
</tr>
<tr>
<td>- Develop agreed protocols of escalation, support, who-does-what</td>
<td>- Residents are empowered, well-equipped and active contributors</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Developed working model of how residents can be supported by community assets</td>
<td></td>
</tr>
</tbody>
</table>

---

Photo courtesy of TOUCH Community Services.
UNCOVERING HIDDEN ASSETS

Soon after their new centre was set up in Ang Mo Kio, TOUCH conducted a physical audit of the town’s environment as well as to mine and map assets and partners they can work with.

Besides overseeing changes that aid residents’ mobility, they have also formed a constituency wide network with a number of community partners who meet regularly to discuss how to share information and resources, resolve the challenges identified and better coordinate care for the residents, particularly those who are isolated or with little caregiver support.

Door-to-door surveys and community consultations helped them uncover an eagerness amongst residents to help and give back to community. TOUCH directed them to areas of need, providing the opportunity and platforms for residents to be a resource. Many residents have since become more confident and active volunteers, establishing informal networks of care in their neighbourhood.

► TOUCH worked with Ang Mo Kio Town Council to improve accessibility for seniors around the neighbourhood. Feedback from the town audit was well-received by the town council who implemented changes within three months.

► Walking the ground together with residents with mobility issues helped TOUCH and Tsao Foundation identify areas that could be made more accessible.
WALKING THE GROUND
When the Tsao Foundation’s Community for Successful Ageing (ComSA) started in Whampoa, one of the first things they did was to conduct an extensive town audit, mapping assets such as government agencies, grassroots and other community partners such as TOUCH Community Services.

Volunteers also walked the estate with ambulant seniors and residents using wheelchairs to identify areas of improvement.

Improvements that have since been made include smoothening of gaps that could have caused falls and building of more gradual ramps for easier wheelchair access.

An example of a 2x2 power-interest asset map

Partners frequently identified include government and public agencies, health and social care providers, grassroots advisors and organisations such as residents’ committees, religious entities, shopkeepers, food & beverage and retail operators, and not forgetting – the residents themselves!

1. Government and public agencies, sponsors
2. Grassroots, residents, VWOs
3. F&B, retail operators

A good resource to identify the community partners, programmes and services around your area is the National Council of Social Service’s (NCSS) Social Service Navigator available at: https://www.ncss.gov.sg/navigator
REKINDLING THE KAMPUNG SPIRIT
At Yishun Health’s Wellness Kampungs, residents themselves are viewed as the most important assets – volunteers who can give back to the community and contribute to the kampung spirit.

Resident volunteers have heartily taken on various duties to serve their neighbours, such as offering their skills in gardening, dancing, repair work and much more. “Kampung Buddies” dedicatedly deliver meals-on-wheels two times a day to homebound seniors living nearby, while taking the opportunity to reach out and befriend.

At the same time, residents have clear and quick access to many of the community partners that have been identified as part of the support network, such as Yishun Health’s hospitals – Khoo Teck Puat Hospital and Yishun Community Hospital, St Luke’s Eldercare Centres and Nee Soon Grassroots Organisations.

▲ The Kampung Buddies treat the daily meal deliveries to their less mobile neighbours both as a way to befriend and to stay active.
PEOPLE ASSETS
AWWA has identified and established partnerships with employers willing to hire residents with disabilities.

Regardless of their disabilities, AWWA believes that people are valuable assets, and they have facilitated many successful match-ups. One resident in long term daycare due to stroke was recently placed in sheltered employment. Another was given a chance to take and pass his driving test and is now employed as a driver.

AWWA also actively promotes volunteerism within the centre. Residents put their skills to work, making handicrafts that are sold to raise funds for other charitable activities, providing accompaniment services for fellow residents attending medical appointments and much more.

Residents-turned-volunteers at AWWA frequently accompany other less physically mobile residents to their medical appointments. Beyond the socialising opportunity, it is also a means for them to stay active.

AWWA encourages residents to learn new skills and make use of them. Here, they are making handbags from used drink sachets.
For many organisations, programmes are the bread and butter of their work. Designing programmes for enabled communities, however, requires one to put on a different lens – of community involvement, co-design, and empowerment. The aim is to cultivate and strengthen residents’ sense of belonging and responsibility for their own community. This is the fourth pillar in building enabled communities.

Involve your residents even in the design phase of your programmes and activities. Observe their habits and routines, or simply ask them. Let your programmes be shaped by them and for them. Consider how the programmes may be seamlessly integrated into their lives.

Think about the outcomes of your programmes. They should be inclusive and participatory, engaging and interesting to your residents, so that they themselves become your spokespersons to their families, friends and neighbours. Encourage participants to contribute, and provide meaningful opportunities for them to give back, be it as simple as arranging equipment for an exercise session, or taking charge of attendances and organising events. Every participation opportunity is an empowerment opportunity.

It may require a little risk-taking and some letting go of structure and schedules. Be prepared to let your residents take the lead.

**Questions for Reflection**

1. What motivates our residents?
2. How may we involve our residents in programme design?
3. How may we facilitate more residents’ participation?
### PROGRAMMES TO EMPOWER

#### ACTIVITIES
- Seek feedback on and observe for community routines, habits and preferences
- Co-design programmes and activities to be inclusive and empowering
- Appoint facilitators to encourage participation, contribution and relationship building

#### OUTCOMES

**Short-term**
- Develop a range of programmes to empower and encourage participation by residents
- Monitor participation in terms of programme attendances and popularity

**Mid-term**
- Monitor contribution in terms of the volunteers, support groups and informal networks that have emerged
- Residents enjoy and actively participate in programmes
- Residents become advocates and volunteers for the programmes and activities
- Informal stories emerge

**Long-term**
- Residents have a deep-rooted sense of ownership of and responsibility for the community

Photo courtesy of St Hilda’s Community Services.
**LONELY NO MORE**

St Hilda’s active outreach discovered that many seniors living in Tanjong Rhu were lonely, many of whom were empty nesters, or had family members who were too busy to visit.

The outcome was the creation of what is endearingly called the “Coffee Bin” – a daily gathering of residents which started out at a refurbished refuse bin centre. The programme helps seniors connect with one another and gives them something to look forward to everyday.

Many participants have become volunteers themselves, going door-to-door around the neighbourhood to invite other seniors to join them at the Coffee Bin.

The Coffee Bin is now part of St Hilda’s Friends @ St Hilda’s Link which operates like a membership club on the weekdays. Each member resident receives a personal card that identifies him or her as a member of the Friends Centre. Members enjoy a whole suite of activities and facilities – nutritious meals, learning and social activities, games, reading and TV corners, and regular outings.
FITTING INTO ROUTINES
At TOUCH Community Services, feedback from residents and observations on the ground are fed directly into programme design.

Hearing from residents that health and wellness are important to them, and through observing human traffic in the vicinity, TOUCH started morning exercises at the void deck of Block 445 – an area that was spacious, open and on the go-to-market route for residents so they had no excuse to miss it.

It was also scheduled in the morning from 9 to 10am as many of the participating seniors would have to care for their grandchildren after 11am.

Residents would help to set up chairs and equipment, as well as help each other take blood pressure readings prior to the exercises. Friendships are built, bonds are strengthened, and residents get the physical workout they need.
FACILITATING PARTICIPATION
At Montfort Care’s GoodLife! Makan community kitchen, the cooks are volunteers who live nearby and set aside time to plan and prepare lunch for their neighbours.

Staff also are facilitators more than providers. To encourage participation when the space first opened, staff deliberately placed on each table a plate of bean sprouts to be trimmed for cooking. Residents nowadays start the tasks themselves to prepare all that they need for lunch.

In another instance, when a group of seniors grumbled that the new community kitchen at Block 52 had seemed to draw attention away from the original GoodLife! premises at Block 15, staff did not attempt to counter their protests. Instead they encouraged the seniors to advocate for their causes with their support.

When the group came to realise that the new space was indeed more conducive as a community kitchen, they decided not to pursue the issue. Nonetheless, they felt empowered that they were heard and had the potential to effect change. Today, both spaces at Block 15 and 52 Marine Terrace have become well-accepted by the community as complementary sites to each other.
THE COMMUNITY’S HANDYMEN

Wielding screwdrivers, soldering pens and other tools, a group of elderly gentlemen turn their attention to the assortment of household appliances before them. This is a gathering of the “Repair Kakis” – a group of about 15 men who offer their electrical, repair and other DIY skills to assemble and fix various appliances brought in by residents.

The Wellness Kampung initiative was designed to draw the interest and participation of male residents. Having undergone training with the Sustainable Living Lab and Khoo Teck Puat Hospital’s Green Community, the amiable Repair Kakis now meet every Friday to help fellow residents repair their items. Since the group was started in September 2017, over 80 items have been worked on with an 85% success rate of repair. This is not surprising – because many of the Repair Kakis are themselves experienced technicians, electricians and engineers.

More than becoming a useful resource to the community, the programme aims to help increase the level of social participation and overall wellness among participants. These repair sessions are also a way for both the Repair Kakis and fellow residents to make more friends.

GETTING HEARD

To empower seniors to advocate for and implement their own projects to enhance life in the community, Tsao Foundation introduced the Sharing Wellness and Initiative Group (SWING) which facilitates participation in their community. SWING brings residents together through meetings, events or activities to speak out and take action to address various community needs, with the end goal of cultivating civic-mindedness.

On one occasion, when a resident in Whampoa raised a complaint over unresolved issues in the community, the members of SWING facilitated by helping him express the issue in a letter to a Member of Parliament. When he received the acknowledgement letter assuring him that the issue would be looked into, the small gesture made a big impact – he felt appreciated that he mattered in the community.
The fifth and final pillar of building enabled communities is to reflect and realign. Because people change, so do communities, and thus must the organisations who have taken on the great responsibility of enabling them.

You will need to stay ever present, close to the ground and open to receiving and observing for feedback. Look for indicators of enablement, such as how residents have participated, how they have gotten involved, stepped up to help and to serve. Look for signs of empowered, confident and resilient residents. Turn these into stories to be shared with various stakeholder groups.

And at regular intervals, take stock and reflect upon what has been done, the impacts and opportunities for more. You may find new assets emerging, be they in the form of new partners, or capabilities that your organisation or residents have acquired or discovered.

Then, realign your purpose, roles, strategy and plans, to keep in step with and stay relevant to the community as it grows and develops. Be flexible and willing to be shaped by your community.

Questions for Reflection

1. What indicators of enablement may we define?
2. Have we learnt anything new about our community?
3. How do we stay relevant to the community?
CONFIDENCE BOTH INSIDE AND OUT

Do not be surprised if you were to visit a Wellness Kampung centre and find the residents there dressed to their nines, full make-up on (for the ladies) and ready to welcome you with the best of smiles. These are some of the interesting observations that centre managers have used as an indicator of increasing self-efficacy and esteem of their residents.

Many other creative indicators have been adopted. These include seeing more residents coming ready in sports attire for their exercises and having more frequent conversations with the community nurse, dietitians and other allied health professionals at the centres. Centre managers also keep track of the number of “Kampung Buddies”, supported self-management groups formed and resident-initiated health activities.
HAPPY, HEALTHY, HELPFUL
These are the three key indicators that TOUCH has adopted to define the success of an enabled community. They define such a community as one whose residents are engaged with one another, physically and socially well, and able to support or help each other continue to live well in the community.

The positive changes that staff look out for include more seniors getting out of their homes, feeling fitter, becoming more cheerful and chatty. They also look out for how many begin serving as befrienders, volunteering their time to help out around the community and check-in on fellow neighbours. Residents discover new strengths, acquire new skills and become new assets for the community.

Residents have been encouraged to lead a more active lifestyle, such as these seniors whom TOUCH accompanied on a day out at the beach.

The number of Wellness Kampung participants who are more proactive in asking questions about their health is one indicator that Yishun Health looks for as a sign of increasing confidence and self-efficacy.
HOW THE COMMUNITY HAS GROWN
The Tsao Foundation sought to take stock of how ComSA has enabled the community to grow, participate and take ownership according to their personal capacities and interests.

Through various methods such as observation, interviews and focus group discussions, Tsao Foundation found positive improvements in a range of indicators such as health (self-care), wellbeing (life satisfaction), optimism (positive ageing perceptions) and community pride (likelihood of solving community issues). In particular, the latter was also used as an indicator of collective self-efficacy.

Other positive indicators in the evaluation process included participants’ increased confidence and capacities for volunteering, having more smiles and becoming more vocal in giving feedback.

Photo courtesy of AWWA.

▲ A satisfied resident doing her final checks on the drink sachet handbags made by her and fellow volunteers. These will be used to fund-raise for other beneficial programmes run by AWWA.
ENABLED COMMUNITIES: A MORE SUSTAINABLE STRATEGY

Developed with insights and experiences from Community Care organisations in Singapore, the Five Pillars offer a practical, strength-based approach to building enabled communities.

Traditional models of care have often taken top-down approaches, with professionals determining what is best for clients, taking into account standardisation and resource optimisation. Communities developed under such approaches can be very well supported by the various systems, organisations or institutions tasked to care for them. An inadvertent consequence, however, is that community members themselves may become little more than passive recipients of the support and services planned for them.

Today, there is an increasing acceptance that communities can do much more when the residents within are included, valued and empowered. There are strengths, resources and assets to be harnessed when people are valued as residents and contributors instead of clients and consumers. While top-down approaches may work effectively, there is also great value in bottom-up design shaped by the very participants themselves. Drawing from the contributions, capacities and capabilities from the community, seeking to build enabled communities can be a more sustainable strategy.

Organisations can aspire to help create such communities that are more resilient, self-reliant and able to respond and recover from adversity. It will be an ongoing process as the community evolves over time, and organisations will need to be comfortable adapting with the community. The journey will be long and at times challenging. But as we partner with residents themselves to create our vibrant, independent and enabled communities, it will no doubt be a greatly rewarding one.

We hope that you will find this handbook and accompanying framework useful as a guide and inspiration to start on your own journey of building enabled communities.
HOW DO I START?

If you have come this far and are thinking of starting on the fulfilling journey of enabling your community, congratulations! We would like to support you.

You may wish to begin by using the space in Chapter 3 to consolidate some of your thoughts using the Five Pillars as a guide. Refer to the sample tools and resources shared by our partners for an idea of what the effort entails. Then, get in touch with us and we can work together to put your plans into action.

Want to learn more? Meet with one of the organisations featured in this handbook? Thinking of getting some funding support? We will be happy to help too.

Just contact us at enquiries@aic.sg and we will link you up with what you need.
“Together with these two blocks 123 and 125, there are ten blocks around us that we consider as our little village. We are all very connected.”

Mr Sairam Azad,
AWWA

Photo courtesy of AWWA.
Our six partners featured in this handbook have each embarked on diverse and innovative efforts to enable their communities. In this chapter, we provide a profile of each of them, the communities they serve and the key programmes and initiatives they have started.

**Yishun Health**  
**Wellness Kampung**  
115 Yishun Ring Road  
260 Yishun Street 22  
765 Yishun Street 72

**Tsao Foundation**  
**ComSA Centre**  
300 Whampoa Drive
AWWA
Senior Activity Centre / Senior Community Home
123 Ang Mo Kio Avenue 6

Rehab and Day Care Centre
126 Ang Mo Kio Avenue 3

TOUCH
Community Services
444 Ang Mo Kio Avenue 10

St Hilda’s
Community Services
12 Kampong Arang Road

Montfort Care
GoodLife! Makan
52 Marine Terrace
About AWWA Health and Senior Care

AWWA Health and Senior Care is an arm of AWWA operating multiple services that ensure a continuum of care for seniors living in Ang Mo Kio, Boon Keng, Yishun and surrounding neighbourhood areas.

Beyond holistically supporting seniors’ physical, clinical, social and emotional needs, AWWA seeks to empower them and other residents to be able to meaningfully contribute back to the community and lead independent and dignified lives.

Quick Facts

**Target Area**
10 HDB blocks - Blocks 119 to 128 in Ang Mo Kio Avenue 6. In particular, the rental blocks of 123 and 125.

**Target Residents**
Depending on services, participants range from 50 to over 90 years old.

*Photo courtesy of AWWA.*
Building Enabled Communities In Singapore

Programmes & Initiatives

Senior Community Home (SCH)
The AWWA Senior Community Home at Block 123 provides accommodation for low-income seniors without family support and with no alternative shelter for them. The first community home to be housed within a HDB rental block, it enables senior residents to remain integrated with the larger community in which they live. SCH serves about 140 residents with an average age of about 75 years.

Senior Activity Centre (SAC)
Located next door is AWWA's Senior Activity Centre (SAC) which provides socio-recreational activities for seniors aged 60 and above. The activities are designed to promote social interaction and participation, and ultimately enhance the quality of life of the seniors through greater engagement, support and companionship.

Rehab and Day Care Centre (RDCC)
Down the road at Block 126, the Rehab and Day Care Centre (RDCC) supports residents with physical disabilities and seniors who require rehabilitation after being discharged from hospital. About half of the 70 clients that the centre serves per day on average require wheelchairs to get around.

Community Care Services
AWWA Health and Senior Care also offers a range of other Community Care services including Integrated Home and Day Care (IHDC), Personal Care Service (Seniors), Dementia Day Care and Centre Based Nursing.
About GoodLife!

GoodLife! started as a wellness programme under the Marine Parade Family Service Centre some 17 years ago. It sought to build a supportive community for seniors to age in place through adopting a model of inclusivity.

With the belief that good health, good mind, good family, good friends and good community lead to good living, activities were organised with not just physical and mental wellbeing, but also the social cohesion of seniors in mind.

Quick Facts

**Target Area**
Five rental blocks – Block 15, 16, 51, 52 and 53 in Marine Terrace.

**Target Residents**
Seniors in the neighbourhood and members of GoodLife!

*Photo courtesy of Montfort Care.*
GoodLife! Makan
GoodLife! Makan started in January 2016 to revive the kampung spirit using food as a social glue. The premises at Block 52 Marine Terrace has since become a popular gathering space and provides a platform for seniors to build a natural support network through engaging in activities and programmes together. In particular, many stay-alone seniors have been invited out of their rental flats and found companionship with fellow seniors in the neighbourhood.

Community Outreach
Trained senior volunteer befrienders and staff regularly visit seniors and their caregivers in the neighbourhood to get to know them better and support them with various forms of assistance. For residents who have been identified to require additional support, dedicated social workers will follow up with them, provide counselling and link them with relevant community resources.

Health and Wellbeing
An important component in GoodLife!'s network of community programmes is the healthcare and mental health support provided by the Care Closer to Home (CACHE) and Community Resource, Engagement and Support Team (CREST) programmes.

CACHE seeks to support seniors to manage their health and chronic conditions in the space of their own homes with regular monitoring and self-care education.

To better support residents with dementia and depression as well as their caregivers, CREST was formed as a community network to provide outreach, education and linkages with community mental health resources.
ST HILDA’S COMMUNITY SERVICES

About St Hilda’s Community Services

St Hilda’s Community Services traces its beginnings to 1999 when the St Hilda’s Church Community Outreach Programme for the Elderly (COPE) was formed. COPE was initiated by the then Marine Parade Community Development Council to harness community efforts to support the growing numbers of seniors.

Actively outreaching to every resident, St Hilda’s has since grown into a familiar and trusted community partner to the Tanjong Rhu, Dakota Crescent and Old Airport Road neighbourhoods.

Quick Facts

Target Area
13 blocks of HDB flats in Tanjong Rhu and 22 blocks in Dakota Crescent and Old Airport Road.

Target Residents
Seniors living in the community.

The Friends @ St Hilda’s Link centre today is a lively space where residents gather daily for meals, activities and companionship.

Photo courtesy of St Hilda’s Community Services.
Friends Plus
St Hilda’s Friends Plus is a day care programme for seniors aged 55 years and above. Seniors participating in the programme find engaging and learning activities such as art and music, group games and language classes. They also enjoy fresh and nutritious meals and the regular outings.

Friends Special
Friends Special offers centre-based rehabilitative care services for residents to recover from various mobility issues in a conducive community setting. Working with St Andrew’s Community Hospital, the programme also provides home visits to seniors where nursing, caregiver and care coordination support is delivered to enable seniors to age within their homes.

Coffee Bin
The Coffee Bin is open to residents daily offering a wide range of activities for different interest groups such as Rummy-O, Zumba, singing and gardening. Having originated from a nearby refurbished refuse bin centre, the Coffee Bin is now permanently based within the Friends @ St Hilda’s Link centre.

Community Support
St Hilda’s provides holistic support to residents through offering and coordinating various services with community partners. These include providing financial assistance, help with shopping, reading and writing letters, subsidised medical services (in partnership with SATA CommHealth, scheduling medical appointments, medical escort and transportation and exercise programmes.
About TOUCH Community Services

TOUCH Community Services (TOUCH), a multi-service organisation, reaches out to many individuals from all religions and races, including children, youths, families, people with special and healthcare needs and the elderly.

TOUCH has more than 20 years of eldercare experience in the community. The range of services provided includes a team of care coordinators who manage the “Care Line” – a helpline for caregiving or elderly-related issues, caregivers training, home modifications and home care services.

Anticipating the resource limitations in supporting an ageing population, TOUCH started the Community Enablement Project (CEP) to support residents to age in place. TOUCH believes that independent and inter-reliant residents, who are better connected to supportive community partners and programmes, can contribute to a better quality of life for seniors and their caregivers.

Drawing on its range of services and coordinating efforts with multiple stakeholders, TOUCH seeks to enable residents in Ang Mo Kio to be happy, healthy and helpful to one another.

Quick Facts

**Target Area**
32 HDB blocks located in the Cheng San-Seletar constituency of Ang Mo Kio – Block 422 to 453. Most are three to four room flats.

**Target Residents**
12,000 residents in the 32 blocks of flats. Approximately 2,500 residents are above the age of 60.
Happy Community
As social connections and relationships are found to improve overall wellbeing, residents are engaged with people in their neighbourhood through a variety of activities and interest-based groups facilitated by TOUCH. This includes the biweekly exercises at the void decks of Blocks 442 and 445, resident outings and more recently, the photography and pop band interest groups, which seek to encourage greater male resident participation. The trust and relationships forged enable residents to participate actively and draw out other residents to join them.

Healthy Community
Empowering residents to take charge of their own health and healthcare is key to the CEP. Besides running regular exercises and talks, TOUCH partners many community, social and health care providers to conduct regular health screenings for residents. A Community Health Post is also based at TOUCH’s Ang Mo Kio office for residents to follow up with health coaches from the National Healthcare Group. Other recent initiatives include a 12-week Diabetes Peer Support Group – in collaboration with TOUCH Diabetes Support – to build on social bonds among participants to facilitate knowledge transfer and peer encouragement for better diabetes management.

Helpful Community
Many residents have expressed their desire to “help someone else” but often lack the information to know where to direct their energy or resources. They are found to be happiest when engaged in activities that make them forget themselves, practice what they learnt, and feel a sense of belonging to the community. TOUCH leverages on the bonds built by creating informal networks of care in the community. Residents are made aware of community needs, upskilled and given opportunities to be of service. The ability to complete a task or overcome a challenge provides a sense of achievement and increases their confidence to do more for others.

Community Befriending Programme
The Community Befriending Programme is a component of TOUCH’s CEP that reaches out to isolated residents and provides opportunities for residents to connect with one another. Volunteer befrienders reach out to connect with home bound or lonely residents and link them with neighbours, other CEP programmes, community resources or service providers. Befrienders who take on these tasks are coached to engage residents, reconnect them to the community and help them become more confident to live on their own.
TSAO FOUNDATION
COMMUNITY FOR
SUCCESSFUL AGEING (ComSA)

About ComSA

ComSA adopts a community-wide approach to create an integrated system of comprehensive programmes and services to promote health and wellbeing of seniors.

Based in Whampoa – one of Singapore’s oldest estates in Singapore with more than 5,000 residents being 65 years old and above, ComSA provides opportunities for older persons to grow, participate and claim their roles in the community, according to their personal capacity and interests. In the process, they chip away at the barriers to co-creating communities where all ages find meaning, thrive and benefit from the longevity dividend.

The ComSA Centre opened at Whampoa Community Club in 2017. It has a clinic, day care facility, cooking studio, training and activity rooms and exercise facilities.

Quick Facts

Target Area
Whampoa constituency covering two Community Clubs and nine Residents’ Committees Zones.

Target Residents
The whole community, especially residents who are aged 50 years old and more.
Self Care on Health for Older Persons in Singapore (SCOPE) Programme

SCOPE was used as an outreach initiative to the Whampoa community in 2015. It aims to promote a self-care approach to help seniors improve health and wellbeing. It was later adapted into SCOPE @ Home – a simplified version suitable for homebound seniors. Many SCOPE @ Home facilitators are themselves graduates of SCOPE and they are thus able to better connect with and support their homebound peers.

ComSA Kawan

A gathering space fronted by a café and cooking studio at the ComSA centre, ComSA Kawan provides opportunities for seniors to spend time together, share and learn from each other. As a social hub, it also promotes social connections across all generations by welcoming all ages through its doors.

Sharing Wellness and Initiatives Group (SWING)

SWING is another community development programme which facilitates participants to develop an action plan for community issues through identification, solutions brainstorming and finally taking action. In mid-2016, BIG (Be Involved and Grow) SWING was also introduced as a monthly platform for SWING graduates to get back together for learning and encouragement for continued action planning for the Whampoa neighbourhood. Twenty-three of the BIG SWING participants were later trained as ComSA Champions. They have since November 2017 begun planning and running the BIG SWING sessions and other ComSA events.
About Wellness Kampung

The three Wellness Kampungs were officially opened in September 2016 in collaboration with St Luke’s ElderCare and Nee Soon Grassroots Organisation (GRO) to bring healthcare closer into the community as a more desirable alternative to formal healthcare services.

Through healthy cooking classes, mass exercise sessions, health screenings and intervention programmes and a variety of social activities, Wellness Kampung provides a space and opportunities for residents to bond and adopt healthier lifestyles. These activities support the holistic wellbeing of residents who are themselves empowered to organise their own activities and to volunteer.

Quick Facts

Target Area
Yishun, Sembawang, Admiralty, Woodlands and Marsiling

Target Residents
Residents of all ages living in the northern part of Singapore.

Photo courtesy of Yishun Health.
Programmes & Initiatives

Share-a-Pot
The Share-a-Pot sessions held at the Wellness Kampungs as well as other community locations aim to improve the nutrition and health of seniors in the community. The homemade soups are made with high protein and calcium ingredients and enjoyed in a communal dining setting. It is also an opportunity for the seniors to participate in light exercises such as aerobics and Zumba, as well as for Yishun Health to conduct periodic health assessments for the participants.

Kampung Buddies
To harness the kampung spirit of togetherness and contributing to the community, the Kampung Buddies initiative was started with a group of dedicated volunteers who wanted to do their bit for their neighbours. This included delivering lunches five days a week to homebound residents through a partnership with SWAMI Home’s Meals-on-Wheels programme. They see it as an opportunity to stay active and getting to reach out to lonely seniors.

Active Ageing
The daily exercise sessions draw large groups of seniors from the nearby flats to the three Wellness Kampung centres every morning. There, they enjoy a range of classes from Tai Chi to Zumba, as well as modified exercises for those who are more frail or on wheelchairs. They thereafter adjourn for healthy meals prepared by volunteers and pick up healthier cooking tips and recipes. Health checks, such as on blood pressure, blood sugar and cholesterol levels are also a regular feature.

Residents are additionally encouraged to exercise their minds by both teaching and learning various skills such as calligraphy and languages. There is also a common mini library with books contributed by the National Library Board as well as other residents.
Building Enabled Communities In Singapore

IT TAKES A COMMUNITY

Building up enabled communities is a result of the combined efforts of many partners and residents who are committed toward the same purpose. They participate in, encourage, and support the work of enabling each community member to do more for themselves and one another. Here, we share some of their thoughts.

“TOUCH Community Services has involved residents and grassroots leaders in designing programmes and solutions that are suited for our seniors. This has led to innovative solutions and customised initiatives that support ageing in the community. Our residents tell us they are happier and healthier as they are coming out of their homes to connect, keep fit and learn useful knowledge and skills with fellow neighbours. They also feel empowered to reach out to vulnerable seniors to help them age meaningfully, healthily and actively in place.”

Mr Ang Hin Kee, Member of Parliament for Ang Mo Kio GRC and Adviser to Cheng San-Seleatar GROs

“I come to GoodLife! Makan whenever I can. We cook Chinese and Malay food here, and we’re all happy to work together. I even bring my recipe scrapbook, filled with recipes I’ve been collecting for years. I sometimes refer to it when I’m cooking. I feel that it’s a good system here. Beyond cooking and eating, it strengthens ties between friends and makes us happy.”

Mdm Hindon binte Abdul Hafidz, GoodLife! Makan Participant

“Before I came here, I was just living from day to day and whiling my time away. Now, I find more purpose in life with the encouragement from AWWA. I can help to accompany my friends who are frailer to their medical appointments and even buy groceries for them. It is a joy to be able to help others.”

Mr Ho Koon Long, AWWA Senior Community Home Resident

“The work and dedication of St Hilda’s Community Services to the community is a wonderful example of what an ideal community model should be like. Their comprehensive suite of programmes and services is complemented with care, respect and commitment to bless the residents in the community. We have a lasting impression of their good work and look forward to seeing their good example influencing others in Singapore.”

Dr Wan-Koo May Yeok, Assistant Director, School of Health & Social Sciences, Nanyang Polytechnic

“We have been working closely with the Tsao Foundation’s ComSA team to place our discharged patients under their excellent care. The ComSA team comprises doctors, nurses and social workers who provide multidisciplinary community care, looking after patients’ medical, functional and psycho-social needs. This helps to reduce the likelihood of re-admission.”

Dr Tan Kok Leong, Head of Department, Continuing and Community Care, Tan Tock Seng Hospital

“Wellness Kampung has become more than just a place to exercise. To me, it is its own community. Here, all kinds of people of different races and nationalities celebrate together and create wonderful memories. This makes me very happy to be part of a great community.”

Mdm Mariam Beevi, Wellness Kampung Participant
“AWWA has been a close partner to our RC to actively engage the residents in our neighbourhood and promote neighbourliness. Their programmes, activities and strong support with renovating our community garden, has been instrumental in drawing residents closer together. We have seen huge development in social mixing and corporate partnership in our community because of this strong collaboration with AWWA. We look forward to building on our partnership with AWWA in the years ahead.”

Mr Eric Chua, Chairman, Yio Chu Kang Zone 3 Residents’ Committee

“Although I have no music knowledge, I decided to try to learn something new. You are never too old to learn new things! I am not afraid as my friends from the TOUCH exercise group are also learning with me. The health talks on depression, dementia and diabetes have also made us more aware of health issues and how we can take better care of ourselves.”

Mr Hui Kew Yeng, TOUCH Volunteer

“Goodlife! Makan has made a significant impact on the vulnerable and socially isolated seniors in Marine Parade, empowering them to be more independent through the centre’s programmes. This is no mean feat, given that each senior has his or her unique circumstances to be overcome. All this is only possible because of the remarkable individuals who work at GoodLife!.”

Mr Derrick Wong, Head, WeCare@MarineParade

“St. Hilda’s Community Services plays a key role in caring for the residents of Jalan Batu Estate. Their love and effort for the residents have inspired many students from Dunman High School to actively give back to the community. Through the partnership with St Hilda’s, Dunmanians have the opportunity to interact with the elderly and befriend children living in this estate. This meaningful relationship between St Hilda’s Community Services and Dunman High School has allowed our students to grow into young adults who will continue to care, to serve and to lead. Thank you, St. Hilda’s Community Services.”

Mr Lim Pia Leong, Head of Department – Student Management, Dunman High School

“Having participated in the Tsao Foundation’s Curating Whampoa community art and heritage project alongside the seniors in Whampoa, my biggest takeaway has undoubtedly been in learning to be more conscious in my interactions with the elderly. The younger generation can play an important role in engaging with seniors, considering their capabilities and needs and helping them feel most welcome in the modern context of life.”

Mr Lim Zeherng, Visual Arts Student, School of the Arts, Singapore (SOTA), Curating Whampoa Participant

“GoodLife! Makan is like a big family for the community here. After my wife passed on in 2015, there was nobody to talk to, and I felt isolated. I decided to do something about it, and started coming to GoodLife! Makan. Here I can eat and also contribute. I used to own a bakery, so I take on the baking duty. Talking to friends and baking for them is a good way for me to pass the time. I don’t feel as lonely anymore.”

Mr Phua Kok How, GoodLife! Makan Participant

“Joining the programmes organised by TOUCH has helped me open my eyes to the world and regain my sense of purpose in life. I have learnt so many new things like photography, meeting new friends in the neighbourhood, and lending a listening ear to elderly residents. I was so thrilled when we were given the opportunity to display and share our photos with other residents at an exhibition. It was a once-in-a-lifetime experience!”

Mdm Saravathy, Ang Mo Kio Resident
“We recognise that we cannot do everything by ourselves, so we are like someone who pulls the strings together and helps to build up our residents and link them to resources. We may not have all the answers, but we do this to try and be a friendly neighbour.”

Ms Jacinda Soh,
TOUCH Community Services
YOUR REFLECTION SPACE

This space is for you to think about how you would like to begin this meaningful work of enabling your community. Then, get in touch with AIC and we can help you start your journey!

Over the following pages you will also find a few resources shared courtesy of our partners. We hope you will find them useful.

01

SENSE OF PURPOSE

1. What is our purpose?
2. Where is our community?
3. What is the make-up of our target community?
4. What role can we play with our community?

02

BUILDING BRIDGES

1. Who are our residents?
2. How may we reach out effectively to them?
3. How do we stay connected and build rapport with them?
3M YOUR ASSETS
1. What are our assets?
2. How are they important to the community?
3. How may we engage and partner them for the community?

PROGRAMMES TO EMPOWER
1. What motivates our residents?
2. How may we involve our residents in programme design?
3. How may we facilitate more residents’ participation?

REFLECT AND REALIGN
1. What indicators of enablement may we define?
2. Have we learnt anything new about our community?
3. How do we stay relevant to the community?
COMMUNITY SURVEY SAMPLES

Provided courtesy of TOUCH Community Services and AWWA.

This section shares three sample surveys used by TOUCH Community Services and AWWA.

The following Door-to Door Knocking Survey was used by TOUCH staff as they went door knocking in the Ang Mo Kio neighbourhood. The responses gathered were compiled into a shared spreadsheet after each interaction.

**Door Knocking Survey**

- **To be recorded:** block number, unit number, time of the day
- **To be observed and recorded:** how is the mood of the interviewee, state of home and corridor (cluttered versus neat), hanging clothes, shoes, steps, door open or closed, water meter in use, flyers gathered at the entrance of the door

**Questions**

1. Number of generations staying together
2. Number of people living in household
3. Any elderly above 50 staying here and how are they (well/ ambulating/ wheelchair bound/ cared for by domestic helper)?
4. Do they know anyone in need (frail and lonely, stressed family in caregiving in this area)?
5. If we can run programmes in this area, what will interest you? Is it about a fitness programme/ volunteerism: helping out in the community/ employment/ leisure/ health talks)?
6. Are you keen to volunteer your time for the interviewee and elderly above 50 years old? A potential to sense whether this person is a volunteer leader?
The more in-depth Community Engagement Survey (CES) was used by TOUCH staff as they went around the estate in pairs to interview residents. The information was captured in a spreadsheet and shared during weekly meetings.

### Community Engagement Survey (CES)

<table>
<thead>
<tr>
<th>Name of interviewer:</th>
<th>Date and time:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location of interview:</td>
<td></td>
</tr>
</tbody>
</table>

**Introduction**

Hello, I am ____________________ from TOUCH Community Services. We have a new office in Ang Mo Kio Block 444, so we are going around the neighbourhood to find out more about this estate. Do you have 10 minutes to spare for a short conversation?

We are very interested to find out your opinion about whether this estate is able to support your needs as you age, so that we can see how we can support each other along the way.

<table>
<thead>
<tr>
<th>Info Category</th>
<th>Prompting Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Database</td>
<td>1. Do you prefer to speak in English, Mandarin or dialects?</td>
</tr>
<tr>
<td></td>
<td>2. How may I address you?</td>
</tr>
<tr>
<td></td>
<td>3. Which block do you stay in?</td>
</tr>
<tr>
<td></td>
<td>4. How long have you lived in this community?</td>
</tr>
<tr>
<td></td>
<td>a. 5 years or less</td>
</tr>
<tr>
<td></td>
<td>b. 5 years but less than 15 years</td>
</tr>
<tr>
<td></td>
<td>c. 15 years but less than 25</td>
</tr>
<tr>
<td></td>
<td>d. 25 years but less than 35</td>
</tr>
<tr>
<td></td>
<td>e. 35 years but less than 45</td>
</tr>
<tr>
<td></td>
<td>f. 45 years or more</td>
</tr>
<tr>
<td></td>
<td>4. Do you think that you will continue to live in this estate when you are less mobile and frailer? Why?</td>
</tr>
<tr>
<td><strong>Info Category</strong></td>
<td><strong>Prompting Questions</strong></td>
</tr>
<tr>
<td>---------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Environmental access</td>
<td>1. Have you noticed any improvements in the facilities E.g., more ramps, railings and contrast along steps within the last 3 months?</td>
</tr>
<tr>
<td></td>
<td>2. Do you like your estate? Why?</td>
</tr>
<tr>
<td></td>
<td>3. Are the facilities sufficient and accessible? E.g., places for eating, marketing, meeting friends and exercise.</td>
</tr>
<tr>
<td></td>
<td>4. Do you think that there are enough facilities for someone to age in this estate?</td>
</tr>
<tr>
<td></td>
<td>5. Do you have difficulty using public transportation to go to common amenities like markets, polyclinics, MRT station, etc.?</td>
</tr>
<tr>
<td></td>
<td>6. Are you able to bring your shopping trolley/ push a baby stroller/ use a wheelchair in the community with ease?</td>
</tr>
<tr>
<td></td>
<td>7. Can you highlight some really inconvenient areas in your estate?</td>
</tr>
<tr>
<td></td>
<td>8. What are the facilities or physical environment which can be improved further?</td>
</tr>
<tr>
<td>Community upskilling</td>
<td>1. Are the people in the community friendly and helpful? E.g., people are understanding towards wheelchair users and will help if your marketing trolley is too heavy.</td>
</tr>
<tr>
<td></td>
<td>2. Are there areas of training which people such as bus operators and shopkeepers should learn more about to support the ageing community?</td>
</tr>
<tr>
<td></td>
<td>3. Do you know of anyone with dementia?</td>
</tr>
<tr>
<td></td>
<td>4. If you met a person whom you suspect has dementia, asking for directions, do you know how to help, where to direct this person and/or which numbers to call?</td>
</tr>
<tr>
<td></td>
<td>5. Where do you learn about dementia E.g., through media?</td>
</tr>
<tr>
<td></td>
<td>6. If we can conduct talks about dementia, managing your own chronic diseases, communication with your children etc., will you be keen to attend?</td>
</tr>
<tr>
<td></td>
<td>7. What topics will you be interested to learn about?</td>
</tr>
<tr>
<td></td>
<td>8. What are the suitable timings (and day) to arrange for such talks?</td>
</tr>
<tr>
<td>Info Category</td>
<td>Prompting Questions</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| Social network and connectivity | 1. Where do you go most frequently in this estate?  
2. Where do you meet your friends?  
3. What do you usually do with your friends in this estate?  
4. Do you go out during rainy days? Why do you need to be out?  
5. Do you go out at night? Why do you need to be out?  
6. Are you able to walk to the places you frequently visit?  
7. Are those places you frequently go accessible via public transport? |
| Wellness and Health            | 1. Do you exercise?  
2. What is the reason you do/ do not exercise?  
3. Where do you usually exercise?  
4. Are there exercise corners in this estate?  
5. Do many residents go there to exercise? Who are the users?  
6. How would you improve the exercise corner to attract more users?  
7. If we are going to set up a gym at the void deck, suitable for everybody including elderly, will you attend?  
8. To attract more users, what facilities/activities would you suggest including in the gym area (E.g., kopi corners for hanging out or eat after exercising, community garden outside etc.).  
9. Do you know of anyone who can and is keen to teach activities that promote physical and mental health E.g., tai chi, recreation activities). |
| Communication                 | 1. Do you use any technology e.g. iPad, smart phone, assistive devices such as motorised scooter?  
2. Why do you use the device?  
3. How do you stay in touch with your family?  
4. Do you use any apps to connect with your friends and family?  
5. Are you keen to learn how to use apps to connect with your family/ friends?  
6. Have you heard of or read in newspapers about devices which can be installed at home for you to monitor e.g. blood pressure and falls, and the information can be sent to your family or a healthcare provider to monitor too so that they know when you need help?  
7. Do you think it is a good idea and beneficial?  
8. If we are trying out such system, would you be keen to try? Or do you know of anyone who will be able to benefit from this? |
### Info Category | Prompting Questions
---|---
**Community Befriending** | 1. Do you know of anyone who is lonely, homebound, lacking social interaction?
2. Do you think they will like to have some volunteers to befriend and visit them?
3. Are you willing to go with us to introduce this person to us?
4. Are you willing to volunteer with us to be befrienders? Do you know of friends who want to be befrienders?

**Caregivers support** | 1. Are you currently caring for someone at home or used to do so before?

If response is **no**
- a. Would you be keen to volunteer your time in supervising your frail neighbour for 2 – 4 hours so that the caregiver can go out for a while?
- b. Would you be comfortable in some simple handling such as feeding, assist in getting up from a chair, changing diapers?
- c. What would be some of your concerns?

If response is **yes**
- a. What are some key challenges you have encountered?
- b. Are you open for volunteers to help look after your loved ones to give you some breathing time to do your own things?
- c. Why yes? Why no?
- d. What would give you the confidence in allowing volunteers to support your caregiving role?

**Survey design** | 1. We are designing a survey to better understand the needs of the residents and what the residents can also contribute in support the ageing residents to continue to stay in the estate as long as they can (i.e. to delay nursing home admission). What kind of questions would you propose to include in the survey?

**Database** | **Demographics of the person interviewed:**
1. Age & Sex
2. Nationality
3. Employment status
4. Occupation history
5. No. of generations staying in the same household
This survey comprises a mix of multiple-choice and open-ended questions. It was used by AWWA staff in partnership with the Yio Chu Kang Zone 3 Residents Committee to gain an understanding of residents in the neighbourhood. Answers were captured using an online survey tool (Google Forms) to help analyse the responses gathered.

**Impact Assessment Survey**

This survey is owned by AWWA and execution supported by Yio Chu Kang Zone 3 RC. The data collected through this survey will enable AWWA and RC to gain better understanding of residents in this neighbourhood so as to help us review our services.

* Required

1. Interview Date (DD-MM-YYYY) *
   
   Example: December 15, 2012

2. Start Time *

   Example: 4:03:32 (4 hours, 3 minutes, 32 seconds)

3. Client Age 年龄 *

   Mark only one oval.
   
   - Below 70 岁岁以下
   - 71-80 71 至 80 岁
   - Above 80 80 岁以上

4. Client Gender 性别 *

   Mark only one oval.
   
   - Male 男
   - Female 女

5. Client Length of Stay 居住时间 *

   Mark only one oval.
   
   - Less than 4 years 四年以下
   - 4 - 9 years 四至九年
   - More than 9 years 九年以上
   - Not Sure 不确定

6. Functional Category *

   Mark only one oval.
   
   - Cat I - physically & mentally independent; may or may not use walking aids; do not need or need minimal assistance in activities of daily living.
   - Cat II - semi-ambulant; require some physical assistance and supervision in activities of daily living; may have mild dementia, psychiatric/biological problems.
   - Not Sure 不确定

7. Employment 就业情况 *

   Mark only one oval.
   
   - Employed 就业者
   - Unemployed 失业或待业者

8. People Living In The Same HDB Flat Unit 居住在同个组屋单位的人 *

   Mark only one oval.
   
   - I live alone
   - I live with my family (incl. siblings, children, grandchildren) I live with my relatives
   - I live with other people who are not my siblings, children, grandchildren or relatives.

9. Have you stated the purpose of this survey? (You can say: This survey allows AWWA to evaluate the impact of its ComHome at Blk 123 and to identify areas of improvement to serve the residents better.)

   You can say: 9. Have you stated the purpose of this survey? (You can say: This survey allows AWWA to evaluate the impact of its ComHome at Blk 123 and to identify areas of improvement to serve the residents better.)

   9. Have you stated the purpose of this survey? (You can say: This survey allows AWWA to evaluate the impact of its ComHome at Blk 123 and to identify areas of improvement to serve the residents better.)

   * Check all that apply.
   
   - Yes

10. Have you ensured the anonymity and confidentiality of the data? (You can say: Before the survey begins, let us reassure you that this survey is anonymous and that AWWA would not know who completed this survey.)

   You can say: Before the survey begins, let us reassure you that this survey is anonymous and that AWWA would not know who completed this survey.

   10. Have you ensured the anonymity and confidentiality of the data? (You can say: Before the survey begins, let us reassure you that this survey is anonymous and that AWWA would not know who completed this survey.)

   * Check all that apply.
   
   - Yes
Building Enabled Communities In Singapore

Section 1: Independence
Independence is defined by AWWA as freedom given to individuals for their self-maintenance of physical and mental wellness.

1. I am satisfied with the freedom that I have to pursue what I like to do. 我很满意我现有的自由，让我去追求我想做的事情。
   Mark only one oval.
   ○ 1 Strongly Disagree 非常不同意
   ○ 2 Disagree 不同意
   ○ 3 Neutral 中立
   ○ 4 Agree 同意
   ○ 5 Strongly Agree 非常同意

Open Ended 1: If disagree or strongly disagree, why? 开放式问题 1: 如果不同意或非常不同意，请说出理由。

Qn 3 Comments

Qn 4 Comments

3. I am taking initiative to keep myself healthy. 我会主动确保自己的健康。
   Mark only one oval.
   ○ 1 Strongly Disagree 非常不同意
   ○ 2 Disagree 不同意
   ○ 3 Neutral 中立
   ○ 4 Agree 同意
   ○ 5 Strongly Agree 非常同意

4. I have been feeling cheerful [or feeling optimistic about the future]. 我觉得开心或对将来感到乐观。
   Mark only one oval.
   ○ 1 Strongly Disagree 非常不同意
   ○ 2 Disagree 不同意
   ○ 3 Neutral 中立
   ○ 4 Agree 同意
   ○ 5 Strongly Agree 非常同意

Pillar Open Ended 1: Is there any positive or negative feedback you have about having an independent life in this neighbourhood? 开放式问题 1: 对于在这邻里独立的生活，你有没有任何正面或负面的想法？
Section 2: Empowerment
Empowerment is defined by AWWA as improving the individuals’ wellbeing by encouraging and enabling them to represent their interests and supporting them to live a meaningful life.

5. I am aware of the activities happening in the neighbourhood i.e., those organised by community groups e.g. Community Club, Residents’ Committee (information can be sourced based on one’s initiative or given by others). 我知道社区机构例如联络所、居委会所举办的活动（可以通过自己或他人取得相关信息）。
   * Mark only one oval.
   1 Not At All Aware 完全不知道
   2 Not Very Aware 不太清楚
   3 Neutral 中立
   4 Somewhat Aware 知道大多数
   5 Extremely Aware 完全知道

Qn 5 Comments
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

6. I am able to offer feedback freely (both positive and negative feedback) to community organisations in my neighbourhood e.g., Town Council, CC, RC. 我能随时和轻易地向相关的社区机构例如市镇会，联络所，居委会提出建议和说出我 的看法（正面或负面）。
   * Mark only one oval.
   1 Strongly Disagree 非常不同意
   2 Disagree 不同意
   3 Neutral 中立
   4 Agree 同意
   5 Strongly Agree 非常同意

Qn 6 Comments
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

7. I feel my physical, medical and emotional needs are supported by my family members. 我觉得自己的身心需求和医疗需要，都得到家人的照顾。
   * Mark only one oval.
   1 Strongly Disagree 非常不同意
   2 Disagree 不同意
   3 Neutral 中立
   4 Agree 同意
   5 Strongly Agree 非常同意

Qn 7 Comments
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

8. I feel supported by my family, the people and community organisations e.g., Town Council, CC, RC in the neighbourhood, in having a meaningful life. 我觉得家人，家里的群众和社区机构例如市镇会，联络所，居委会帮助我有一个充实的生活。
   * Mark only one oval.
   1 Strongly Disagree 非常不同意
   2 Disagree 不同意
   3 Neutral 中立
   4 Agree 同意
   5 Strongly Agree 非常同意

Pillar Open-ended: Is there anything you would like to comment on for the support that the neighbourhood has provided you with or any particular area you think is lacking? 开放式问题 8: 对于这邻里所提供的支持，有没有任何方面你觉得做得很好或是需要改进的？
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Section 3: Community Integration
Community Integration is defined by AWWA referring to CoriHome’s residents in the neighbourhood growing a strong sense of community belonging and be encouraged to socialise and participate.

70
9. I am generally comfortable living in the environment with my fellow HDB block neighbours. 我跟同座 HDB 租屋的邻居大致上关系良好，相处和睦。
Mark only one oval.

1. Strongly Disagree 非常不同意
2. Disagree 不同意
3. Neutral 中立
4. Agree 同意
5. Strongly Agree 非常同意

Qn 9 Comments

10. I feel that I am a part of the neighbourhood. 住在这邻里让我感到自己是社区成员的一份子。
Mark only one oval.

1. Strongly Disagree 非常不同意
2. Disagree 不同意
3. Neutral 中立
4. Agree 同意
5. Strongly Agree 非常同意

Qn 10 Comments

11. I participate in activities organised by community groups e.g. CC, RC, etc. at least 3 times a week. 我每个星期参加社区机构如联络所，居民委员会所主办的活动至少三次或以上。
Mark only one oval.

1. Never 完全没有
2. One to four times a month 每月 1 至 4 次
3. One to two times a week 每个星期 1 至 2 次
4. Three to five times a week 每个星期 3 至 5 次
5. Everyday 每天

Qn 11 Comments

Pillar Open-ended: Is there any positive or negative feedback you have about living in this neighbourhood or participating in activities organised by community groups e.g. CC, RC?

Open-ended 11: If not, why? 开放式问题 11: 如果没有，为什么?

End Time *
Example: 8:30 AM
ASSET MAPPING SAMPLE

*Provided courtesy of Yishun Health.*

One of the ways in which asset maps can be prepared is to mark the physical locations of each of your identified assets against a visual diagram of your selected community area. This “birds-eye view” will be useful in developing your understanding of the resources and linkages within your community.

To guide their planning and development of programmes, Yishun Health laid out a map of the north of Singapore, drawing boundaries and plotting down where each of their facilities and programme sites were located using coloured thumbtacks. The map is updated over time as more assets are added and boundaries are shifted in response to developments in the community.

Yishun Health’s three Wellness Kampung sites at 115 Yishun Ring Road, 260 Yishun Street 22 and 765 Yishun Street 72
PROGRAMME SCHEDULE SAMPLE

Provided courtesy of Montfort Care.

This is a typical week of activities taking place as part Montfort Care’s suite of GoodLife! Programmes at Blocks 15 and 52 Marine Terrace.
PROGRAMME EVALUATION TOOLS SAMPLE

Provided courtesy of Centre for Health Services and Policy Research

The Tsao Foundation adopted the following tools developed by the Centre for Health Services and Policy Research to evaluate the SCOPE programme – an outreach initiative of ComSA. These comprise surveys for centre managers and participants as well as a focus group discussion guide.

Centre Manager Survey (online)

For each of the following statements, please indicate the extent to which you agree/disagree:

1) I have noticed improvements in the physical health of the SCOPE-2 participants after they started the program.

- Strongly disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

2) I have noticed improvements in the mental health of the SCOPE-2 participants after they started the program.

- Strongly disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

3) I have noticed improvements in the ability of SCOPE-2 participants to manage their own health after they started the program.

- Strongly disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

4) I would not change anything about how SCOPE-2 is currently run.

- Strongly disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

5) It is easy to recruit participants to join the SCOPE-2 program.

- Strongly disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

6) It is easy to retain participants in the SCOPE-2 program.

- Strongly disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

7) How long do you think the effects of SCOPE-2 will last for the participants?

- 1(or less) month
- 2-4 months
- 5-6 months
- > 6 months
- 1year or more
Participant Survey

Dear participants, we would like to know your experiences attending the Tsao Foundation SCOPE program. The results from this survey will help to improve the program. This survey will take no longer than 10 minutes to complete. Thank you for your time.

Below are some statements, please check the respective boxes if you agree or disagree with the statements.

1) I have noticed improvements in my physical health after I started the program.
   - [ ] Strongly disagree
   - [ ] Disagree
   - [ ] Neutral
   - [ ] Agree
   - [ ] Strongly Agree

2) I have noticed improvements in my mental well-being after I started the program.
   - [ ] Strongly disagree
   - [ ] Disagree
   - [ ] Neutral
   - [ ] Agree
   - [ ] Strongly Agree

3) I have noticed improvements in my ability to manage my own health after I started the program.
   - [ ] Strongly disagree
   - [ ] Disagree
   - [ ] Neutral
   - [ ] Agree
   - [ ] Strongly Agree

4) I would not change anything about how SCOPE-2 is run currently.
   - [ ] Strongly disagree
   - [ ] Disagree
   - [ ] Neutral
   - [ ] Agree
   - [ ] Strongly Agree

5) I would be likely to continue attending the SCOPE program.
   - [ ] Strongly disagree
   - [ ] Disagree
   - [ ] Neutral
   - [ ] Agree
   - [ ] Strongly Agree

Thank you very much for taking the time to complete this survey. Your feedback is valued and very much appreciated!
Focus Group Discussion Guide

Let's talk about the SAC/CC/RC you have attended...

1) How long have you been coming to this SAC/CC/RC?
   [Clarification: When did you first come to this SAC/CC/RC?]

2) How often do you come to the SAC/CC/RC?
   [Clarification: How many times a week do you come to this SAC/CC/RC?] [Follow up: If participant rarely comes follow up with Why?]

3) How did you find out about SCOPE program?

4) Do you use any other community services?
   [Probe: Which services?]

I understand that the SCOPE has some activities...

5) Why did you join SCOPE?

6) Do you know other people who also come to the SCOPE program?
   [Probe: What activities you do with your friends?]

7) What do you do during SCOPE sessions?
   [Probe: What activities?]

8) What SCOPE activities do you like/not like?
   [Probe: Why?]

9) How has SCOPE helped you manage your health?
   [Probe: Remind you to take medication? Remind you about doctor's appointments? Give you health advice?]

10) Are there any changes would you like to see to the SCOPE program?
    [Probe: Anything you don't like?]
    [Probe: Is there anything you would like to see added to the SAC/CC/RC?]
    [Probe: Any activity? Service? Program?]

11) Is there anything else you would like to share?
FUNDING SCHEMES ADMINISTERED BY AIC

TOTE BOARD COMMUNITY HEALTHCARE FUND (TBCHF)

The Tote Board Community Healthcare Fund (TBCHF) seeks to build a healthier nation, enhance the quality of life of patients, and improve the affordability and accessibility of healthcare services for the needy and disadvantaged. This fund was launched by the Tote Board in 2009. It is jointly administered by the Ministry of Health, AIC and the Health Promotion Board.

This scheme is open to not-for-profit organisations that have programmes which can improve preventive care, Community Care and/or build the capabilities of healthcare services.

Eligibility for TBCHF

Your organisation is eligible for TBCHF funding if:

- You are a not-for-profit organisation and have a programme that can improve preventive care, Community Care and/or build the capabilities of healthcare services.

Such programmes include:
- Public health education and preventive health programmes
- Projects that build capacity and quality enhancement in the Community Care sector
- Pilot programmes and new areas including caregiver support and care coordination; and
- Initiatives to sustain ground-up community initiatives in the Community Care sector

COMMUNITY SILVER TRUST (CST)

The Community Silver Trust (CST) is a dollar-for-dollar donation matching grant provided by the Government to enhance the services of Voluntary Welfare Organisations (VWOs) in the Community Care sector.

Eligibility for CST

Your organisation is eligible for CST funding if:

- You are a VWO and have registered as an Institution of Public Character (IPC) under the Charities Act; and
- Receiving funding support from the Government (i.e. MOH and/or the Ministry of Social and Family Development) for the provision of Community Care services.
HEALTHCARE PRODUCTIVITY FUND (HPF)

The Healthcare Productivity Fund (HPF) supports quality and productivity improvement efforts of service providers through technology adoption, process improvement and demand aggregation of products and services.

Eligibility for HPF

Institutions providing Community Care services that are in line with the Ministry of Health’s (MOH) licensing or service requirements.

EMPLOYMENT FACILITATION

The Employment Facilitation (EF) programme supports manpower growth and localisation efforts within the Community Care sector with dedicated recruitment fairs and sector-wide branding and outreach activities. The programme encompasses support for various job roles and levels.

As part of the EF, Support Care staff who are new to the sector can attend a customised programme that covers therapy and clinical training via the Community Care Traineeship Programme (CCTP). In addition, while the Senior Management Associate Scheme (SMAS) aims to attract mid-career PMETs (Professionals, Managers, Executives and Technicians) to build management pipelines, Return-to-Nursing (RTN) targets the returning of nurses who have left the workforce and are keen to join the Community Care sector.

TRAINING AND DEVELOPMENT

The Community Care Training Grant (CCTG) and Community Care Manpower Development Award (CCMDA) both encourage the continuous upgrading and growth of our Community Care partners from short courses, NITEC, diploma, degree to master programmes. The Skills Standard Framework (SSF) provides a common reference to develop and design training programmes for support care to ensure quality and relevancy of training. The appointment of six Learning Institutes (LI) offering a broad spectrum of training from therapy, clinical, psychosocial to people management and organisational excellence ensure that we continue to build training capacity and capability. Four signature AIC Leadership programmes have also been curated to enable leaders to lead teams and organisations in a dynamic Community Care sector.

Get in touch with AIC to find out more about the available support schemes for your organisation.
About the Agency for Integrated Care

The Agency for Integrated Care (AIC) aims to create a vibrant care community for people to live well and age gracefully.

AIC coordinates and supports efforts in integrating care to achieve the best care outcomes for our clients. We reach out to caregivers and seniors with information on staying active and ageing well, and connect people to services they need. We support stakeholders in their efforts to raise the quality of care, and also work with health and social care partners to increase services for the ageing population. Our work in the community brings care services and information closer to those in need.

For more about us, please visit [www.aic.sg](http://www.aic.sg).
ACKNOWLEDGEMENTS

We thank the Enabled Communities Workgroup and contributors for their stories, support and feedback to co-create this handbook. Above all, we are grateful to them for looking ahead and going beyond to help us better learn how enabled communities can be created and sustained.

The work does not stop here. There is still a great deal to learn, and there are many more stories to tell. We look forward to seeing more like-minded partners coming together on this learning journey to build more resourceful, resolute and resilient communities in Singapore.

ENABLED COMMUNITIES WORKGROUP AND CONTRIBUTORS

AWWA
Mr Sairam Azad

Montfort Care
Ms Han Yah Yee
Ms Lin Aiting
Ms Joy Liaw

St Hilda’s Community Services
Ms Quek Ai Siew
Ms Florina Wong

TOUCH Community Services
Mr Kelvin Lee
Ms Jacinda Soh
Ms Melody Tan

Tsao Foundation
Ms Peh Kim Choo

Yishun Health
Dr Wong Sweet Fun (Co-chair)
Mr Bastari Irwan
Ms Evon Chua

Ministry of Health
Ageing Planning Office

Agency for Integrated Care
Dr Wong Loong Mun (Co-chair)

Secretariat
Mr Chern Siang Jye
Mr Ang Xiang Yao
Mr Ivan Lim

Community Networks for Seniors Division

Research Writer
Ms Caroline Lim, PhD

SUPPORTED BY

tote board
and
Community Silver Trust

Giving Hope
Improving Lives
We are partners in care. Not providers, not supporters. Partners, to enable them to grow, develop and thrive, like wind beneath their wings.”

Ms Peh Kim Choo,
Tsao Foundation

Photo courtesy of Tsao Foundation.