



MINISTRY OF HEALTH
SINGAPORE

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**SPEECH BY MR GAN KIM YONG, MINISTER FOR HEALTH
AT THE SINGAPORE MENTAL HEALTH CONFERENCE 2014,
17 OCTOBER**

Associate Professor Chua Hong Choon, Chief Executive Officer (CEO),
Institute of Mental Health and Co-Chairperson of SMHC 2014 Advisory
Committee

Dr Jennifer Lee, Chairman, Agency for Integrated Care

Mr Hsieh Fu Hua, President of the National Council of Social Service (NCSS)
and Founder of Binjai Tree Foundation

Ms Tina Hung, Deputy CEO, NCSS and Co-Chairperson of SMHC 2014
Advisory Committee



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Distinguished guests

Ladies and gentlemen

1. I am very pleased to join all of you for this year's Singapore Mental Health Conference. Let me start by thanking four key stakeholders in the mental healthcare network who have come together to organise this event. They are the Institute of Mental Health, National Council of Social Service, Agency for Integrated Care, and Health Promotion Board.

Importance of the Community in Mental Wellness

2. Mental well-being is an important part of one's overall health and well-being. Mental health strengthens our ability to have healthy relationships, helps us make good life choices, motivates us to maintain physical health and well-being, and increases our capacity to handle the ups and downs of life. Excessive anxiety and stress can contribute to physical problems such as heart disease. It can also affect the immune system and make us more susceptible to illnesses.



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3. The community, families and caregivers play critical roles in promoting mental wellness. **First, community partners are in the best position to outreach and promote public awareness on mental wellness programmes.** An example is the Mental First Aid Kit programme that is anchored by HPB, made possible through collaboration with some 115 senior activity and day care centres, wellness centres, and community and family service centres.

4. More than 5,300 seniors have participated in this programme, and 9 out of 10 have shared that they enjoyed the sessions where they learnt about keeping themselves mentally fit and happy through art & craft, music and games. Many of these seniors have gone on to participate in other activities at these centres, while some have started new interest groups.

5. **Second, because family, friends and neighbours are closest to those who may have early signs of mental issues, they are the first to notice early signs such as a change in behaviour or thinking before the mental illness becomes more severe.** They are in the best position to pick up signs and promote early treatment.



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6. Take the example of Madam Pauline. One of her friends noticed that she was depressed and easily distracted for quite some time, and invited her to an outreach event that was organised by a Community Resource Engagement and Support team, or CREST. The first home visit screening revealed no significant findings as Madam Pauline, a single mother, did not like to share her feelings.

However, staff in the CREST team pressed on. The social worker, with her professional intuition, decided to return for additional visits. Madam Pauline soon opened up to the social worker on deeper issues like conflicts with her children that were troubling her. Madam Pauline was eventually diagnosed with mild depression and received treatment. The CREST team provided her with the emotional support she needed to cope throughout this period.

7. Thanks to the support she received from CREST in the community, Madam Pauline has since established regular contact with her daughter. She is now much happier and finds time to perform volunteer work. To date, eight CREST teams have been set up through AIC and they continue to function as community safety nets. More than 24,000 residents have gained a better understanding of mental wellness through CREST and this has also prompted more to come forward and seek help.



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8. **Third, patients who are just discharged from hospital need the support of their family, friends, and the community at large, in order to re-integrate into society and regain control of their daily functions and routines.** Nothing can replace the understanding, acceptance and patience of people you meet and interact with on a daily basis.

9. Since 2012, under the Community Mental Health Masterplan, we have made some progress in developing community networks to support patients with mental illness, and empower the community with information to help reduce stigma and strengthen support for clients. AIC has been working closely with IMH and various community partners to form Local Community Support Networks that help to identify care needs in the neighbourhood and refer residents to appropriate services.

10. I would particularly like to thank the grassroots leaders from Kembangan-Chai Chee, Macpherson, Bedok, Kreta Ayer-Kim Seng and Taman Jurong for their strong support in developing community networks to outreach and support patients with mental illness in the community. Other partners whom we would like to recognise include the Singapore Soka Association, Brahm Centre, and the Pharmaceutical Society of Singapore.



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Voluntary Welfare Organisations are also important in enhancing community support for these patients. Thank you for your passion and commitment in helping our patients.

11. **On its part, MOH will enhance the healthcare capability within the community.** Critical to a good community support system is the availability of primary care physicians who are able to manage and provide timely intervention and support for people with mental illnesses.

12. MOH is committed to training and supporting more GPs to care for patients with mental illness in their neighbourhoods. Care teams formed by AIC and IMH provide support for these primary care physicians as well as offer long-term follow-up and emotional support for patients in the community. Support and funding from NCSS also play a huge role in serving the psychosocial needs of caregivers of persons with mental illness.

13. To illustrate the journey a patient takes through the integrated community mental health services, let me introduce you to Emily. Emily was diagnosed with Major Depressive Disorder eight months ago and stopped working due to her condition. She was treated by her psychiatrist at the Specialist Outpatient Clinic regularly for six months.



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14. Her psychiatrist, satisfied with Emily's recovery progress, referred her to her local GP so that Emily could continue to be cared for in the community. This initiative is an expansion of the IMH GP Partnership programme to engage and support GPs to manage stabilised chronic patients from the public hospitals as well as new patients in the community. Thankfully, Emily's condition has stabilised, and with the support she received in the community, she has started a new job and embarked on a journey of recovery.

Conclusion

15. I am also happy to see regional collaboration in promoting mental health, through the ASEAN Mental Health Taskforce. Just last week in Kuala Lumpur, a new logo was unveiled to kick off the first ASEAN Mental Health Campaign, which will see member countries coming together to promote mental health and prevent mental disorders.



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16. In conclusion, we need to take **a whole of community approach to promote mental health**. I would like to take this opportunity to acknowledge a special group of people today – the patients and caregivers who have dedicated their time and effort to contribute to the community despite their own personal struggles. Some of them are even participating as speakers today for the conference. Let us put our hands together to give them a round of applause for their efforts

17. I wish everyone a very fruitful conference. Thank you.

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