



Caring Communities

Production &
Participation
by People

Caring Communities

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Foreword

As Minister for Health, finding new and sustainable ways of uplifting the health of our population is always on my mind.

We are doing so against a rapidly ageing population and a rising prevalence of chronic diseases. But it is possible to age well and healthily, provided we practise good preventive care and start on a strong note from young. It is also never too late to start. Many of us know inspiring examples who have successfully improved their health and well-being through lifestyle changes.

From my time as a board member for the Alexandra Health System – the former regional health system Yishun Health was under – till today as Member of Parliament for Sembawang GRC, I have witnessed the good work of Yishun Health’s Population Health and Community Transformation team. For many years, they have continuously engaged the residents here and encouraged them to participate in various healthy community activities. Today, over 7,000 residents young and old regularly enjoy a range of community activities to achieve better health and well-being.

This book documents how Yishun Health has mobilised and brought together community members to co-create solutions for a healthier and happier resident population. The reflections in this book are rich in insights for the healthcare sector, providing a window into the possibilities across the varied communities of our nation.

Preventive care is the essence of the national Healthier SG programme. As a nation, we seek to build a health ecosystem that taps on our network of family doctors as well as partners in the community, to address social and environmental factors that affect our health.

I am encouraged to see the progress made by Yishun Health in its many collaborations with community partners and residents. I look forward to its contribution to Healthier SG, and the well-being of residents here. Keep up the good work!

Mr Ong Ye Kung

Minister for Health, Singapore



Message from CEO

The way we lead in health is changing. In 2011, Khoo Teck Puat Hospital (KTPH) launched a series of initiatives to support the health and function of residents living in the north of Singapore. This began with the Ageing-in-Place programme to increase access to health at Community Nurse Posts and support for post-discharge recovery at home. We increased our presence in the community with health screening, health action coaching, right-siting of care, conversations for end-of-life preferences, and support for residents in nursing homes in the following years.

In 2017, the Ministry of Health announced its strategy to provide good and affordable healthcare in its visionary Three Beyonds: Beyond healthcare to health, Beyond hospital to community and Beyond quality to value. This involved major restructuring of the six regional health systems into three integrated clusters to offer a fuller range of services to Singapore citizens. Yishun Health, together with Central Health and Woodlands Health, form the National Healthcare Group (NHG). NHG expresses its care philosophy in its River of Life approach to enable residents to live well across five segments of care: Living Well, Living with Illness, Crisis and Complex Care, Living with Frailty and Leaving Well. Yishun Health became the Integrated Care Organisation to integrate care across health, social, environmental and behavioural domains in the north of Singapore, particularly in Yishun and Sembawang.

Place-based care remains a vital cornerstone of our connection to residents where they live, work, play and age. We now have Regional Teams comprising Community Nurses and Connectors who live the local life, meeting residents at community spaces where they regularly “bump” into each other. These include our three Wellness Kampung, numerous Community Health Posts and other community nodes. We continue to work with residents to build an ecosystem of attractive and relevant opportunities to support self-management and mutual help, while reducing risks and barriers for them to produce health and participate actively at these sites.

In our interactions with the residents living in Yishun and Sembawang, we have been delighted by creative residents who have inspired pockets of excellence in finding solutions for their collective aspirations and challenges. This publication is the first of our sharing with the greater community on how health is practised beyond the hospital. We hope you will enjoy reading it.

Prof Chua Hong Choon

Chief Executive Officer, Yishun Health
Deputy Group Chief Executive Officer (Strategy & Transformation),
National Healthcare Group



Introduction

What is Yishun Health's Caring Communities about?

Introduction

In 2011, Khoo Teck Puat Hospital began a conversation with the residents living in the north of Singapore to re-imagine health in the future, where they will have the capability and capacity to take personal responsibility for their health, receive support for self-management and offer mutual help to each other.

Strengthening Community by Increasing Participation at Community Nodes

To turn this lofty re-imagination into something more tangible, we realised that any plan would have to look beyond the walls of the hospital and be co-created with residents and partners in the community. This involved a fundamental shift in the way we saw residents – not as a potential pool of patients but as functional residents who occasionally call on us only when they need healthcare. While healthcare can restore people to health after they have fallen ill, the production of health rests upon every individual through their daily life decisions.

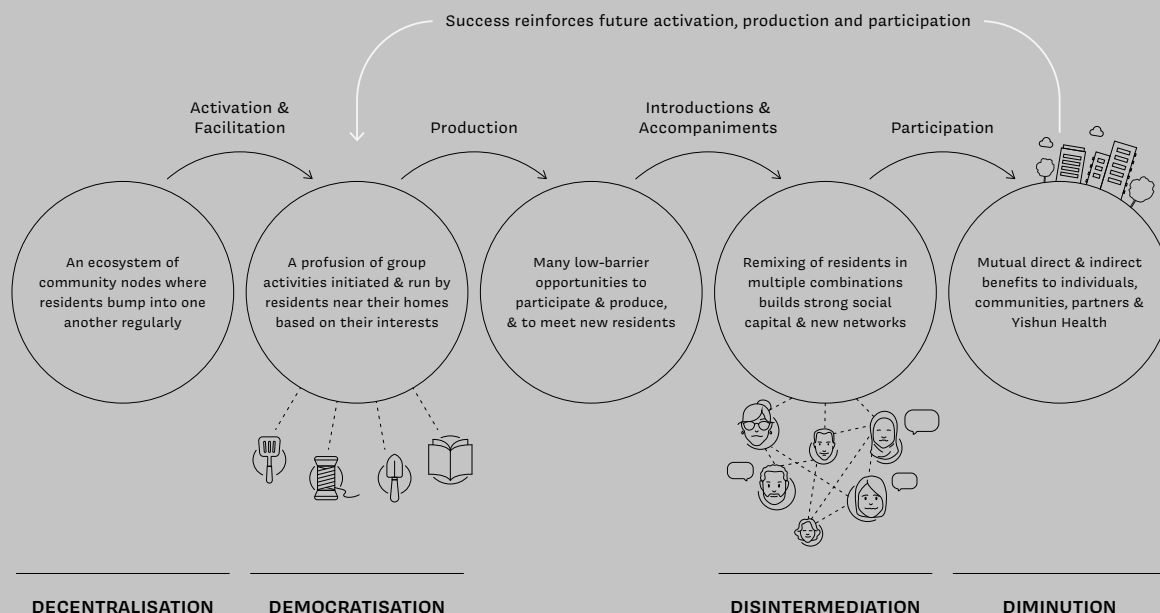
Salutogenesis, an approach that focuses on factors that make and keep us well (rather than risk factors that contribute to illness), helps us to better understand the origins of health. Residents are active producers of health, not passive recipients of care. They produce health when they participate in each other's lives instead of being isolated at home. Active *participation* in community life can instill a sense of personal achievement as well as stimulate an exchange of health-promoting ideas and self-management practices with other individuals.

A little support, not just in illness but also during other life stressors, can go a long way in building capacity for self-management. Members of communities with similar life experiences can form support circles and safety nets for each other, raising the threshold for presenting to the emergency department in crisis. This is achieved by transferring the ownership and initiation of health and other life solutions back to residents through regular conversations facilitated by approaches such as Asset-Based Community Development (ABCD), Local Area Coordination (LAC) and Personalised Care and Support Planning (PCSP).

Communities, and the support they bring, become visible when they have a regular physical platform to congregate. *Community nodes* are community 'living rooms' for residents to meet and check in with each other. The buzz at these nodes acts like a barometer of the connectedness of residents within their community; and this collection, or ecosystem, of nodes helps Yishun Health calibrate where our presence is needed.

The community nodes together with the residents and their activities form the *Participatory Care Ecosystem* enabled by *Caring Communities*.

The Theory of Change



Based on our early work, we established a sustainable theory of change. This can be elegantly represented by Yishun Health's 4Ds of Engagement*: Decentralise, Democratise, Disintermediate and Diminish.

Community activities should not be run from a giant headquarters like the hospital but rather be **decentralised** to the many community nodes which are directly attuned to the local sentiments and needs of their community. At these nodes, a proliferation of activities is encouraged, rather than one or two well-developed flagship programmes. In this way, residents themselves **democratically** choose the activities they want to participate in. Participation levels are a direct indicator of activities that meet salient needs. Naturally, participation will grow and new initiatives will emerge as a result of residents remixing in different combinations as they increase their participation at multiple activities.

All residents should be able to derive some benefit from supporting others and in turn be supported in their communities. Residents who need a little extra help to access the participatory care ecosystem, for example if they have limited mobility, or are simply shy, are introduced to community groups and even accompanied to activities that suit them. In the process, they discover that they too have talents and strengths to offer their communities. Once they know each other well, they start to become the agents of introductions and accompaniments, and we as a healthcare provider can now begin to **disintermediate**. As the community becomes vibrant, healthy and active, residents start to lead and our role as facilitators, after we help our 'patients' return to being 'residents,' quickly **diminishes**.

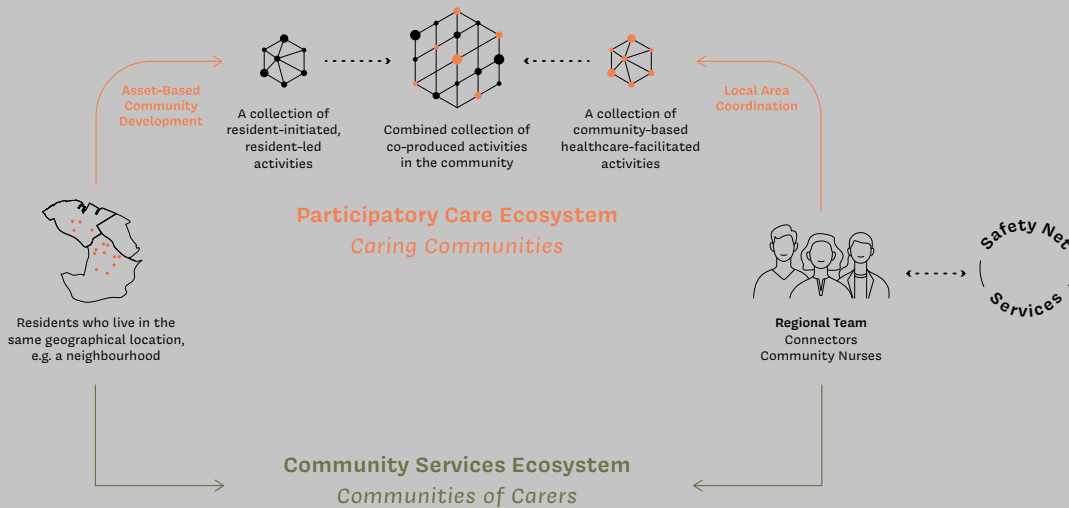
The Plan to Scale

More community nodes will provide more opportunities for the production of, and participation in community activities. This generates more frequent and regular participation, stronger social capital and networks, more benefits to self and others in health and care, and all its wider determinants.

* LIM, Caroline Seow Ling. (2017). Beyond firm-customer interactions to better customer experience. [Doctoral dissertation, Singapore Management University]. https://ink.library.smu.edu.sg/etd_coll/416

Yishun Health supports the population that it serves, together with our local community partners, in our Community of Care framework. The three components of our Community of Care framework are the Participatory Care Ecosystem, Community Services Ecosystem and Safety Net Services.

The Participatory Care Ecosystem draws its inspiration from many luminaries in community building and individual empowerment: Aaron Antonovsky's salutogenesis, Asset-Based Community Development, Local Area Coordination, Personalised Care and Support Planning, and the work of the Participatory City Foundation.



This book describes our learning journey since 2011 when we first engaged with residents to co-create the Participatory Care Ecosystem, and what happened in the next ten years up to the year 2021. The broad and undefined nature of this task and the unprecedented situation of a local healthcare organisation attempting to stimulate a community response meant that we were not able to publish our work, to give time for the ecosystem to take shape and mature. The outcome of this work is just coming to fruition and is the product of the specific strengths of residents living in the north of Singapore. We hope that the quantitative data collected over these years, combined with the language of salutogenesis and asset-based relationships, will illustrate the story of health creation in our northern locality.

In this publication, we will not attempt to document the work done with our community partners (Communities of Carers in the Community Services Ecosystem) nor the safety net health and care services provided by the extended healthcare team from Yishun Health to residents in their homes and their communities. They remain crucial supports during periods of acute and/or transient or short-term decompensation, as well as for people with gradually progressive frailty and residual disabilities. We hope to present this view of work in an integrated fashion across the full spectrum of the health and care needs in our future publications.

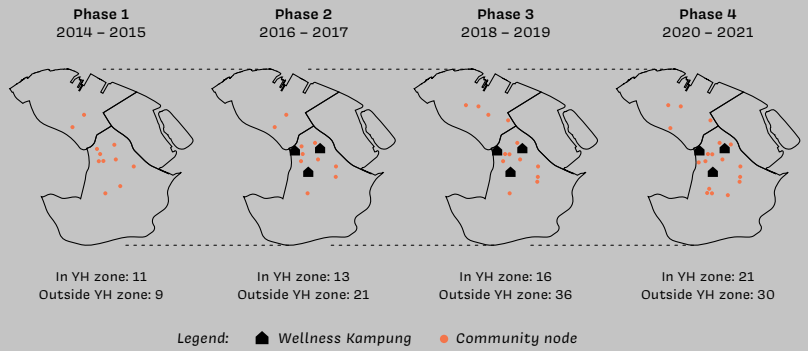
Dr Wong Sweet Fun

Clinical Director, Population Health & Community Transformation
 Deputy Chairman, Medical Board (Community Care & Population Health)
 Yishun Health

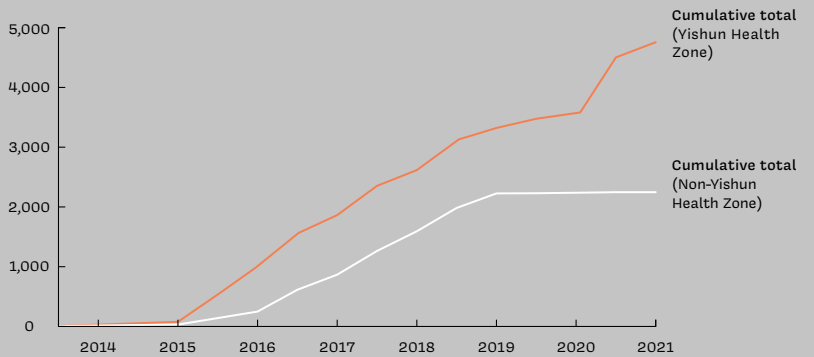
Key Developments in the Participatory Care Ecosystem

We are pleased to say that the number of community nodes and resident participation have palpably increased over these years. We have weathered various challenges, notably the multiple waves of the 2020-21 COVID pandemic, and while this has slowed our progress, it has also given rise to more reasons for stronger co-creation with our residents.

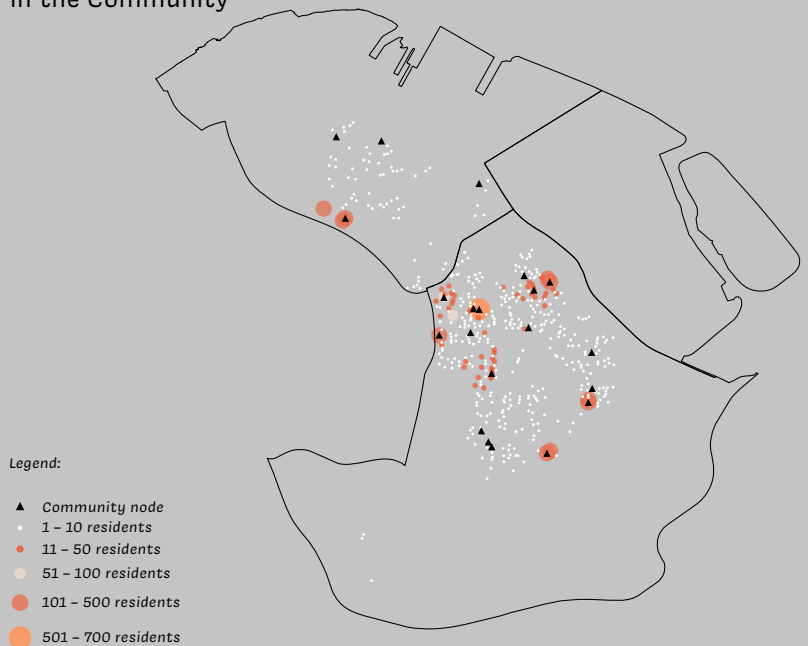
Yishun Heath's (YH) Community Nodes



Resident Participation



Resident Networks in the Community







Who We Are 1

Yishun Health

The National Healthcare Group (NHG) is the Accountable Care Organisation (ACO) that oversees healthcare needs of the population living in central and northern Singapore. It comprises three geographically adjacent Integrated Care Organisations (ICOs) which are led by the anchor hospital of each region. The Yishun Health ICO consists of Yishun and Sembawang URA planning areas, and its healthcare is helmed by Khoo Teck Puat Hospital (KTPH), which opened in June 2010 as the first hospital to serve the 550,000 people living in the north of Singapore (including Woodlands).

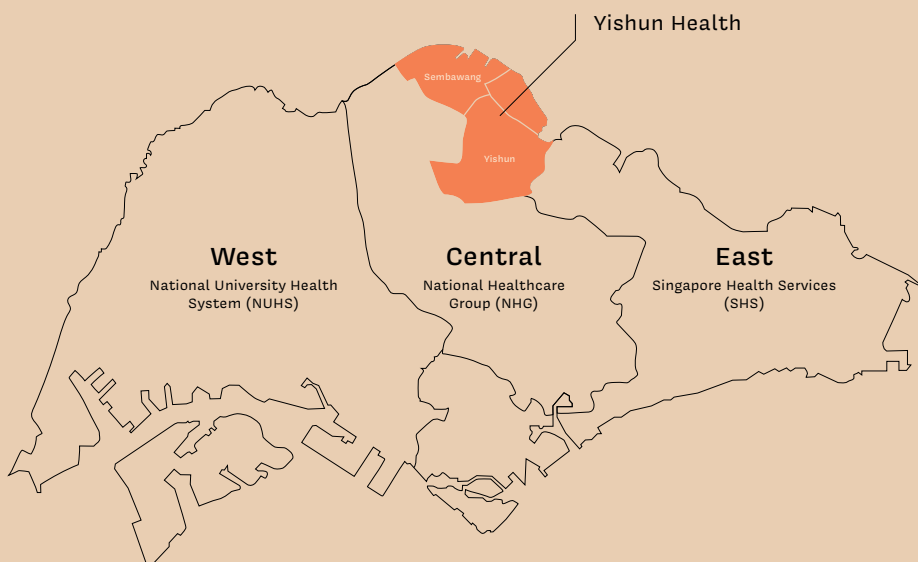
Yishun Health launched extended healthcare services into the community as early as 2011 when blocked beds and access bottlenecks at the new hospital could not be resolved solely with higher efficiency and effectiveness or more inpatient and ambulatory services. It began a systemic change to reach beyond the walls of a brick-and-mortar hospital and function as a local healthcare system.

Concerns of Patients During Illness

A heterogenous population seeks help at KTPH. This includes a group of lower income families seeking healthcare on a reactive basis, resulting in care being provided late and at the most expensive parts of the system – inpatient and at the Acute and Emergency unit. During short hospital stays, these patients' complex social determinants of health are not always adequately addressed; older patients with complex poly-morbidity and frailty require continuing care within their homes and the community.

Care quality at home can be constrained by factors like limited capacity for support from stretched caregivers who may be equally frail, low community involvement, cluttered and disorganised home conditions, poor resources as well as difficulties in understanding and navigating complex services and schemes, resulting in powerlessness, isolation, malnutrition and illness.

While acute episodic care for urgent needs is still best provided by hospitals with specialised diagnostic and therapeutic expertise and equipment, long-term conditions require multiple and regular touchpoints with Health and Care Professionals (H&CPs). Patients can reasonably take ownership of their personalised care plans only when these are integrated with their daily routines. This necessitates an earlier focus on health promotion and anticipatory care to better reduce the strain on urgent access to the healthcare system.



A Snapshot of Yishun:

A brief history and insights from an ethnographic study



From Feb–Oct 2015, we conducted an ethnographic study called “Project Orange” in an area of Yishun West where 26.4% of residents were already aged above 55 years to give us a better indication of how the future could be like with Singapore’s rapidly ageing demographic. Project Orange sought to uncover the underlying attitudes and mindsets of the older adults residing in the north, so as to discover their needs and opportunities.

The development of Yishun New Town started in 1976 when *kampung*¹ were cleared, and many farmer residents were relocated to new high-rise flats. They became shopkeepers and formed a merchants’ association in support of one another. These original residents have aged in their neighbourhoods. Meanwhile, younger families and singles have shifted in from other parts of Singapore in response to housing and employment opportunities. Over a short period, Singapore’s rapid socio-economic development since its independence had resulted in a segmentation of the local population into two distinct groupings: *cosmopolitan* – young, educated, upwardly mobile, and *heartlander* – mature, more parochial dialect speaking. Today, traditional businesses dealing with daily and weekly needs, such as DIY hardware, household items, groceries, clothing and hairdressing, compete for space with trendy pop-up stores selling digital devices and accessories, as well as maid and tuition services which cater to the younger newcomers.

We observed that majority of community conversations and interactions occurred over common roles (e.g. grandparenting) and interests (e.g. hobbies) at common spaces such as playgrounds, *kopitiam*², using familiar props like the daily

newspaper or an unfinished cup of coffee or tea as conversation invitations. The design of open common spaces was not always optimal but creative improvisations by residents quickly and effectively reorganised the space for different users. Such interactions fostered trust-based social networks and a sense of belonging, with exchanges of experiences, skills and gifts for the occasional crisis or celebration.

Retirement had created a sharp void in the roles that defined what seniors, especially the men, once played in their families and communities. Women hung on to their shrinking homemaker and caregiving roles as their last birds left the nests. Many felt lost and insignificant without socio-economic engagement and clear community roles. They desired to participate, be valued and supported in their later years. Yet they perceived that their opportunities to be seen, heard and connected were progressively diminishing. The majority (90%) of the interviewees were fit and pre-frail individuals. About half (53%) of them frequented the town centre at least five times weekly, living within its 500m radius; they were still functional but had nowhere to go.

This study sharpened our intent to co-create a platform of community nodes where residents can mobilise one another to build the very communities in which they want to live, work, play and age in. As a healthcare system, the benefit to us is a population that can produce health, maintain their well-being and care for their community. All in all, safety and security, social, economic and environmental improvements together contribute to a place that is enjoyable to work in and a population with whom we love to engage!

¹ *kampung*: Malay word for villages and attap houses

² *kopitiam*: colloquial word for coffee shops

What We Do 2



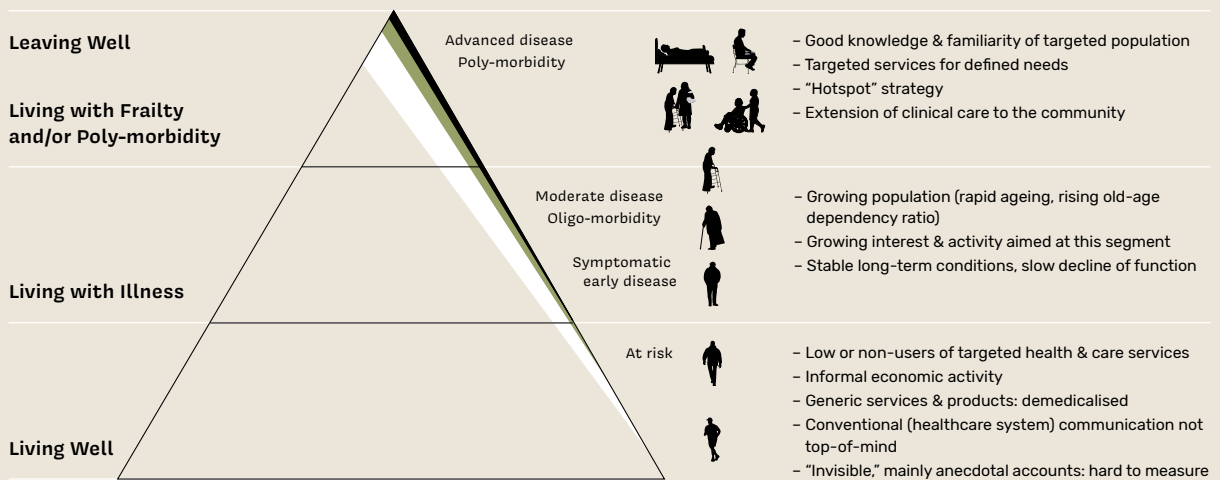
GO MARKET

鮮蛋品
LOCAL FRESHNESS



Tip, Middle and Base of Pyramid Approaches to Community and Population Health

Our population is not homogenous; individuals at various life stages have different health and care needs. The health-and-care needs pyramid below shows a simplified representation of the population. As one ascends the pyramid, age increases and health and fitness decrease.



Legend: Self-management Clinical support Case management Nursing home

Health-and-care needs pyramid with increasing age and diminishing health and fitness status as one ascends the pyramid

*Diagram not drawn to scale, for graphic representation only

Safety Net Services for the Tip of the Health-and-Care Needs Pyramid

We recognise that health and social crises do occur, for which acute and specialised services are required. These traditional service-based models focus on expert-driven improvements of unmet needs to reduce, delay or prevent undesired outcomes - measured by a slew of indicators such as unnecessary emergency department utilisation, hospitalisations, institutionalisation, increasing morbidity, dependence and premature death. They remain relevant for persons at the tip of the needs pyramid, who require extensive or technical

support as safety-net services in their care. Inclusion criteria ensure that these services are targeted, efficient and provide good value.

The support for such care transitions can be served by trained healthcare staff in multi-disciplinary teams. When more than one service is invoked, sense-making and integration of services become important for the patient, and services should be connected to give them a hassle-free experience.

'Health-and-care' is used, in contrast to healthcare, to include the wider psycho-social-behavioural, economic and environmental needs which determine health, and the care provided by people who are not trained in the healthcare system, e.g. connectors, community social workers, volunteers

An Alliance of Care Providers to Integrate Services for the Middle of the Needs Pyramid

Residents at the middle of the health-and-care needs pyramid tend to have several long-term conditions (LTCs), which occasionally decompensate, causing them to seek care episodically. In general, they are older and many start to have declining function. They spend more of their time managing their own conditions in their homes and within the community. There is burgeoning interest and activity by care agencies to provide services to this segment of the pyramid, fuelled by a growing caregiver population sandwiched between the demands of our rapidly ageing demographic and the rise of our old-age dependency ratio. Within a neighbourhood, care providers forming a community of carers can better cover needs and become valued by the very communities that they serve.

Safety Net Services *Coping Community*

Community Services Ecosystem Communities of Carers *Sufficient Community*

Participatory Care Ecosystem Caring Communities *Thriving Community*

A Participatory Care Ecosystem to Achieve Health at the Base of the Needs Pyramid

The population that forms the base of the needs pyramid is also the most unknown majority. These people are not known to any services because they are low or non-users, preferring informal economic activity, and generic services and products – they search the internet and go to gyms. Therefore, health here is demedicalised, invisible, mainly anecdotal, and hard to measure.

These individuals are core members and assets of their communities, and most lead a good life, functioning independently of health and social services. They exert their own choice and control over daily lifestyle decisions, including health decisions. They experience the occasional care crisis, when circumstances exceed both their personal capability and capacity to self-manage, and the buffer of their informal support, such as family, friends, neighbours and the community. Here, they may just require some short-term safety net services when they transit through the healthcare or social system. Their accumulated life and care experiences and the outcomes shape the culture of their communities, such as the way they use health services.

Yishun Health built a Participatory Care Ecosystem model as its complementary strategy for the base of the needs pyramid to balance the strategic services directed at the tip of the needs pyramid. Beyond providing care within the hospital, we also went upstream to strengthen the capacity and capability of our residents and their community support networks to care for self and each other.

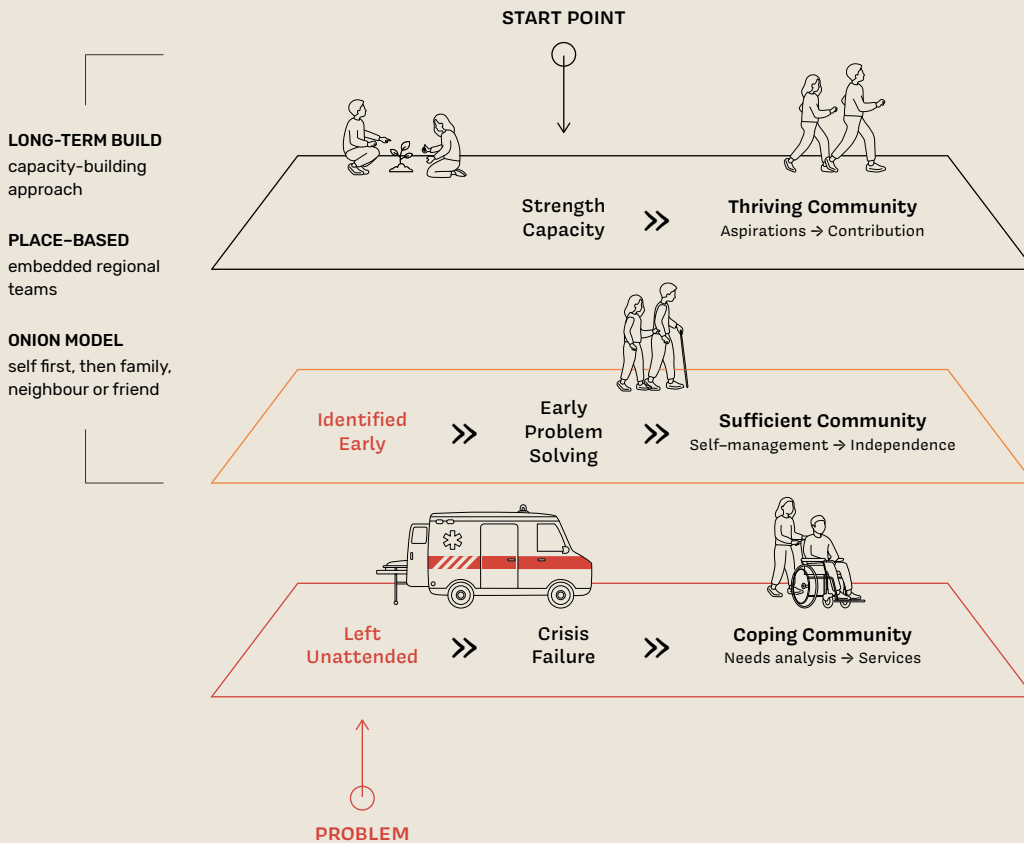
To create mutual value for the population and care organisations, the strategy takes into account the residents' wider determinants of health, their motivations and strengths to be culturally and socially inclusive, and the long-term goal to be environmentally and economically sustainable. The population and community health strategy is a 'forward defence' to influence the population to make good proactive decisions individually and collectively in seeking the appropriate level of health-and-care support. In doing so, community-based help can be activated early, averting crises that require formal care.

Yishun Health incorporated the crucial roles of salutogenesis and participation in its Participatory Care Ecosystem to anchor the health, well-being and care of residents where they live, outside the walls of its healthcare institutions.

What Does Success Throughout the Needs Pyramid Look Like?

A Good Balance of Safety Net Services in a Capable Self-management and Mutual Help Ecosystem

Upstream work is 'long-term building' and may take upwards of the next 30 years to achieve. It requires a few paradigm shifts. Instead of working from centralised headquarters, we need to take a place-based approach and embed our teams into the neighbourhoods where residents live, work, play and age. Instead of having a healthcare worker mindset where we tend to offer help at the first recognition of need, we adopt an 'onion model of care'. When someone has a need, this first asks what they are doing or have done about it, followed by whom they have approached for help and how that has panned out, before finally asking how they would like us to assist them. In this way, solutions are more customised and sustainable and we facilitate self-management and self-efficacy.



The three layers of work are equally important. Success is achieved when we finally develop a good balance of safety net services in a capable self-management and mutual help ecosystem.

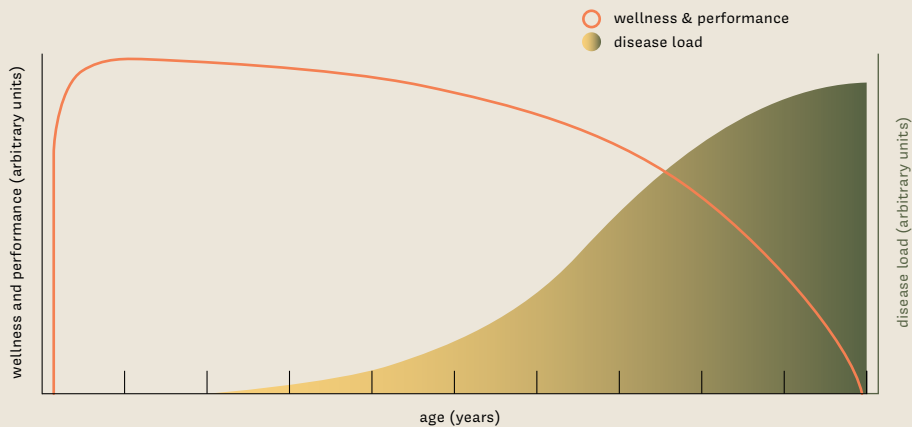
Some people in the community do not need the healthcare system yet, but they have difficulties – for example, vulnerable youth, the frail, those holding down multiple jobs to make ends meet, unsupervised children, missing members of families from incarcerations and addictions. They may need some formal services to help sort out their issues, and for that they move into the next tier where the Community Services Ecosystem, a local alliance of primary and social care partners, can facilitate early problem solving.

Unfortunately, sometimes, problems left unattended for too long can fester and lead to crisis and failure. In such cases, traditional professionals can step in with high-intensity, high-resource rescue services.

The bread and butter of healthcare providers is searching for the causes of disease when people get sick. However, what makes people sick, known as pathogenesis, tells only half the story. We should also search for factors that make us and keep us well, in an approach called salutogenesis.

Salutogenesis as a Community Health-and-Care Model

Healthy ← a spectrum → Dis-ease
not a dichotomy of healthy or not healthy



Salutogenesis

What makes us well?

- Relates to all aspects of individuals working with their community
- Highlights salutary factors that actively promote health

Pathogenesis

What makes us sick?

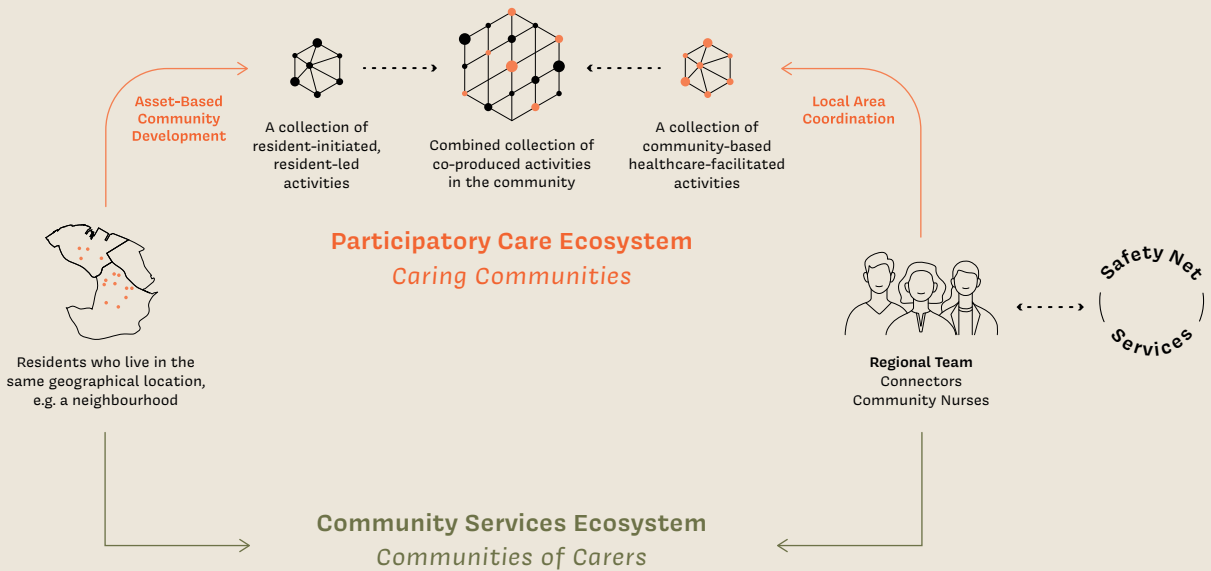
- Refers to the origin and development of disease
- Highlights risk factors that predispose one to disease

The salutogenic-pathogenic orientation (adapted from Antonovsky, 1996)

The concept was introduced by Aaron Antonovsky in 1979 and continues to remain highly relevant today to explain myriad phenomena in society. A society with high well-being is achieved not just by the avoidance of health-damaging behaviours, adherence to medical prescriptions and healthy lifestyle advice; it also requires, not exhaustively, literacy and high educational attainment, clean living spaces, safe streets and strong cultural cohesion.

Wellness is thus produced by individuals every day through their ability to care for themselves and others, make good decisions, and exercise control over their outcomes. This production is enhanced by strong social networks and high levels of social connectedness. As healthcare providers, our expertise lies on the pathogenesis end of the spectrum. However, we *can* play an active part in boosting the social buffer that keeps people well away from pathogenesis.

Participation as a Relevant and Sustainable Driver of Health Culture



Yishun Health's Communities of Care consists of two care ecosystems that work together – the Participatory Care Ecosystem annotated in orange, and the Community Services Ecosystem outlined in olive. The healthcare system providing safety net services is represented separately on the right. People move from the Communities of Care ecosystems to enter the healthcare system when they are destabilised and in crisis, and the role of the Regional Team is to help them navigate and return to their Communities of Care.

The majority of health production takes place in the low acuity setting of people's homes and their communities. Every individual's eventual health outcomes are dependent on their daily lifestyle choices and influenced by their values, cultures and communities, from the time they are young, even before they have any diseases.

Once they start to live with long-term conditions (LTCs), they manage their conditions all of the time, while healthcare professionals are involved in the care for only a tiny fraction of it. Healthcare activity such as scheduled doctors' appointments, driven by the healthcare system, are regular but out of sync in usefulness to residents, and do not correspond to the highs and lows of their LTCs at all.

Hence, active participation, whether in community activities or health interventions, leads to increased involvement and puts the person's voice into the decision-making processes for their own lives. It is needed to ensure relevance and ownership of the content of such activity or intervention.

Every step
towards
participation
in life is a
step towards
good health.

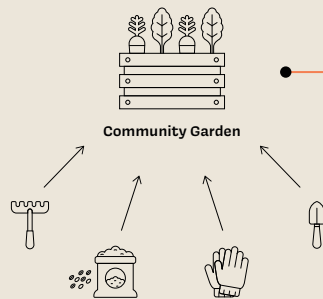
Participatory Care Ecosystem: Caring Communities

We use *care ecosystem* to mean a real-life complex system composed of individuals or groups of individuals living and working in a defined geographical area, together with the organisations and infrastructure of the same region, in a set of care relationships and interactions with each other that brings about a dynamic yet

balanced state, specifically for care, health and well-being.

We use *participatory* as an adjective of the care ecosystem, to describe a behaviour in which residents do not just consume services for expected outcomes, but produce health and care, and contribute to such outcomes as well.

Asset-Based Community Development



Community Garden



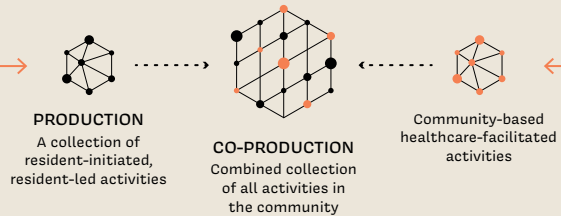
Everyone Brings Something

Contribution Reinforces Agency

Who/what are assets in a defined geographical community (e.g. a neighbourhood)?

- Every individual is an asset to their community: they contribute their talents, skills, experience and time
- Groups of people bonded by common interests (called associations)
- Paid groups organised structurally to provide services (local institutions)
- Local natural and built infrastructure
- Connections, relationships, networks and their exchanges form the social capital of the community
- Residents' stories as carriers of culture, heritage and traditions

Everyone Participates



PRODUCTION

A collection of resident-initiated, resident-led activities

CO-PRODUCTION

Combined collection of all activities in the community

Community-based healthcare-facilitated activities

Participatory Care Ecosystem Caring Communities

The *Participatory Care Ecosystem* is one which encourages individual engagement, supports production and the sharing of one's creations, and where what is known by those who are more experienced is passed on to novices. Members of the ecosystem believe that their contributions matter and feel some degree of social connection with one another.

Access to such a participatory care ecosystem brings benefits including a diversity of activities, development of skills, a more empowered citizenry, and opportunities for peer-to-peer support and learning.

Local Area Coordination

Conversations & Introductions

Strengths-based, Relationship-based



Regional Team
Connectors
Community Nurses

care management
care coordination



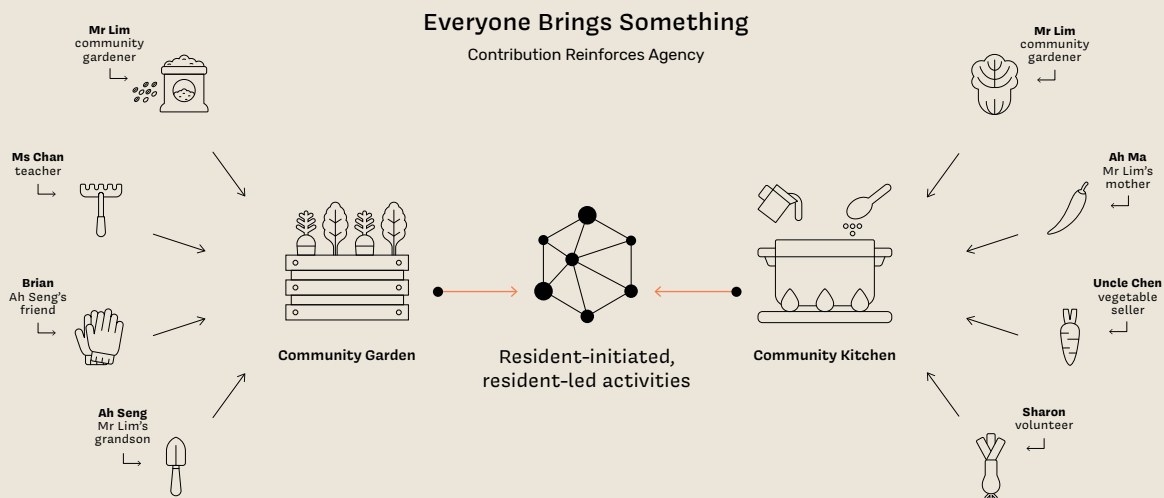
Social Care
Primary Care



Community Services Ecosystem

Communities of Carers

Safety Net
Services



Asset-Based Community Development Production & Co-production

ABCD and Production

A basic tenet of Asset-Based Community Development (ABCD) is that every person in the community is an asset, bringing something to the table. This is inclusive, whether the individual is a child, an adult with or without disability, or a senior with a Clinical Frailty Scale (CFS) of 1 or 9. An asset-based approach to community building first uncovers, then recognises and appreciates these assets.

There are six types of community assets: residents as individuals, groups of residents (termed associations), their stories, their connections and exchanges, local amenities and local institutions. Individual resident contributions, however small, reinforce a sense of personal agency. Regular contributions by many individuals bring sustainability to community building compared to large-scale events conducted by a small group of heroes. Residents form small common interest groups, and these connections result in valuable exchanges, creating a network of trust-based relationships and social capital. Interactions may be hosted at local amenities (e.g. parks, roads) or with institutions (e.g. schools, government agencies, businesses). These activities that are initiated, led and maintained by residents, and spread over the neighbourhood, are collectively called production. This production maintains and/or drives improvements in health and security, influences local economies and food production, brings up children, and cares for the frail, while protecting natural environmental resources.

Systems do not have a part in this production, and as a healthcare system, we contribute very little effort, funding or manpower to these projects. Instead, we practise stealth health, where subtle influencing occurs through regular observations and exchanges of good practices. Direct health and fitness benefits are generated by better choices in food selection, healthier eating and moving more.

There are also indirect benefits to the social determinants of health. Neighbourhoods that are maintained not just by the city cleaning services but also by their residents tend to be beautiful and clean – an indicator of good community hygiene practices. Residents who are familiar with their neighbours have confidence to walk in the streets. Hence, unexpected deviations from habit, perhaps an indicator of mental health, are noticed by their neighbours. Informal helping reduces the need for paid services, reducing economic burden while keeping minds active and healthy. Neighbourliness provides opportunities to stay social and connected, and improves cultural sharing and tolerance in a multi-racial community. The collective result is a healthy, happy, secure, active and caring community.

Co-production

Certain things cannot be done by either residents or professionals independently. In such situations, co-production is the next best approach, where solutions are designed with people, rather than *for* them or *to* them. The underpinning principle of co-production is residents working together in equal and reciprocal relationships with institutions and/or professionals to address their own needs. This principle recognises that residents, healthy or living with LTCs and/or frailty, have existing capabilities. Co-production works well when residents ask for it, after they have exhausted their best efforts under the best conditions (resources, access to community and the relationships there) to do so.

A co-production approach starts with the question, "How do you want to live your life?" rather than, "What services do you need?" Co-production should not result in services that potentially keep people in need, nor re-direct resources intended to address health or social issues to professionals for delivery of such services. Instead, professionals just need to facilitate such solutions that will see people reconnected into mainstream societal life, with less dependence on tax-funded services.



Currently, many health and social care policymakers hover over communities like passengers in an aeroplane on a night-time flight. All they can see on the ground are the lights of public-sector, third-sector, and private-sector institutions. In contrast, neighbourhoods are in complete darkness, except when an institution decides to point a spotlight in their direction, but then only to reveal their deficiencies.

Institutions are not the sole source of power in society. They do not have a monopoly on the means of producing the best solutions to socioeconomic challenges and better health outcomes. Communities, another essential power source, also produce collective well-being outcomes. These primarily overlooked assets become evident through the community lens.

The community lens makes the invisible health-creating capacities in every neighbourhood visible. In every neighbourhood there is a treasure chest of health assets, waiting to be discovered, connected and mobilised.

— Cormac Russell

Managing Director, Nurture Development; Faculty, ABCD Institute, Chicago
Author of *Rekindling Democracy* (2020), *ABCD: Looking Back to Look Forward* (2018)



The primacy of local community is key for people to achieve their vision of a good life. Communities are rich sources of friendship, support and contribution, and provide a range of possibilities and activities for people to explore. Local Area Coordination supports people to stay strong and connected as valued members of the community by nurturing natural relationship networks, making connections and encouraging contributions to the local community.

Local Area Coordination is available to and walks alongside people to build individual and family capacity and resilience, and nurture more welcoming, inclusive and supportive communities early, rather than waiting for them to fall into crisis, harm and service use. This sets the stage to reduce demand for and dependency on formal service responses, thereby supporting stronger people, stronger families, stronger communities and stronger services.

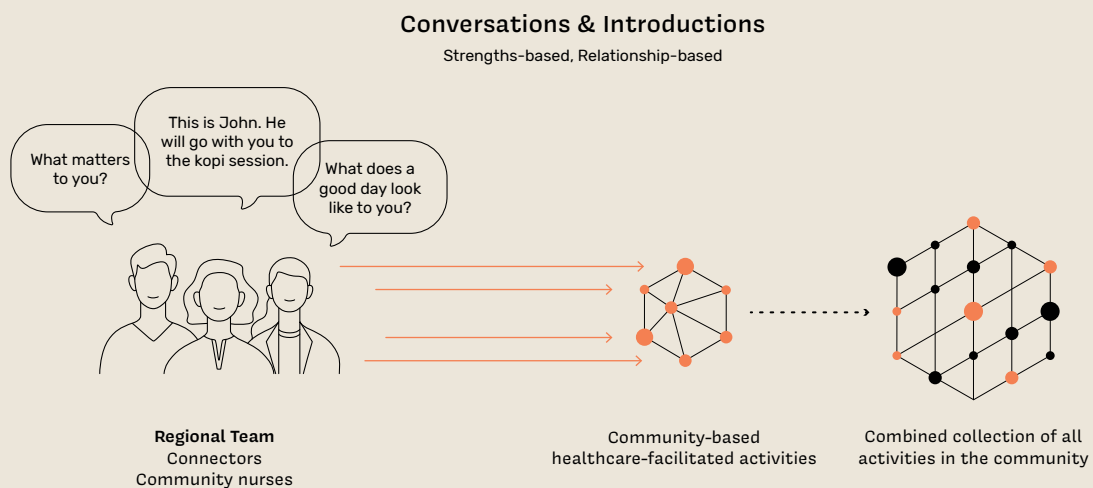
It's exciting and inspiring to see Yishun Health shifting from crisis management to capacity building through Local Area Coordination. A strong health system is one that helps people to not need it, or to need less of it – purposefully unprescribed.

— **Ralph Broad**

Director, Inclusive Neighbourhoods; Founder, Local Area Coordination Network
Author of *Power and Connection* (2021), *People, Places, Possibilities* (2015)

Local Area Coordination (LAC) is Yishun Health’s alternative to social prescription. LAC goes beyond referring people to community activities that bring them health and social benefits. It respects both the community that produces the activities and the person who is re-introduced into the community through such activities.

Local Area Coordination



From professional support → To participatory care ecosystem

As the provider of local healthcare services, we see a group of people who, because of illness or disability, have ‘dropped out’ of their communities. Some of these people present to healthcare services frequently because they are not strongly tethered to their own communities. Our role then is to re-anchor these people into their communities in a lasting way. To do this well, we see value in deeply understanding and taking an active interest in the communities that our patients belong to. Thus, we embedded our Regional Teams directly into these communities. Each team has connectors and community nurses, supported by allied health professionals. Conversations and introductions to reintegrate our patients

into their communities are opened up even as their medical problems are being settled, through the LAC process.

Instead of focusing on fixing their problems, these conversations and introductions revolve around what matters to a person, and what one is good at. Using this personalised and strengths-based approach, we introduce them to relevant community-based health interventions that appeal to their strengths and interests. As they regain their confidence, they progress in a stepwise manner from receiving professional support to participating in resident-produced or co-produced activities and projects within the Participatory Care Ecosystem.

Conclusion

This book describes our work revolving around the Participatory Care Ecosystem, made possible by Caring Communities, where residents in an asset-based approach look for local talent to take collective action, finding local solutions to make their communities more liveable. The beginnings of a thriving community can be seen as the result of their mobilisation. Many of them form the base of the health-and-care needs pyramid, and make daily common-sense decisions. As the local healthcare provider, we merely facilitate and nudge them towards healthier options.

Some residents fall ill or suffer injuries which require a period of recovery, receiving care from the hospital or the clinics. If they encounter difficulties re-integrating into their communities because of new disabilities or care-related routines, they are introduced and accompanied to new groups which suit their new function through Local Area Coordination.

In building our Participatory Care Ecosystem, we apply the converging principles surrounding production and participation, inspired by salutogenesis, Asset-Based Community Development, Local Area Coordination, Personalised Care and Support Planning and Participatory City, and constantly strive to relocate authority back to the residents.

As a group of individuals start to need the continuous support from local care partners, they transit to the middle of the health-and-care needs pyramid. Their needs are served by the many community partners who operate locally as a Community of Carers within the Community Services Ecosystem. We do not forget that these individuals still have remnant strengths and want to have choice and control over their own lives. Instead of overly “wrapping services around their needs”, we let them decide how they want to balance their capabilities and limitations. Finally, for those at the tip of the pyramid, targeted safety net services to support their specific needs are served by Yishun Health’s community clinical teams. Our work with community partners and safety net services in these two domains are not described in this publication.

We humbly thank everyone who has supported and contributed to this work and publication.





How We Do What We Do 3

Resident Networks in the Community

We work with residents and partners to increase touchpoints and opportunities for community participation. Networks of residents in Yishun and Sembawang are built around these touchpoints.

STATISTICS

550,000
residents in the north

885
residents reached in Sembawang

6,009
residents reached in Yishun







270
residents reached in Woodlands

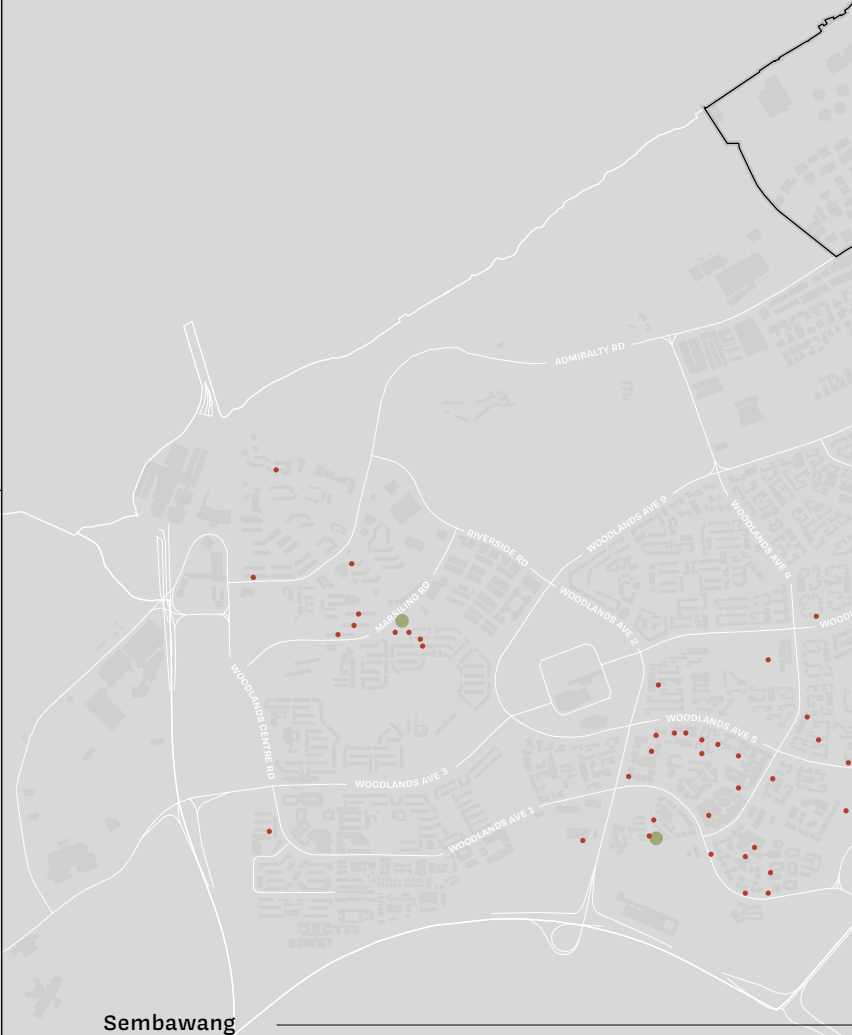
21
community nodes

38
community projects

For the full list of community projects and programmes, please refer to pages 62 & 63.

LEGEND

-  Community node
-  1 – 10 residents
-  11 – 50 residents
-  51 – 100 residents
-  101 – 500 residents
-  501 – 700 residents

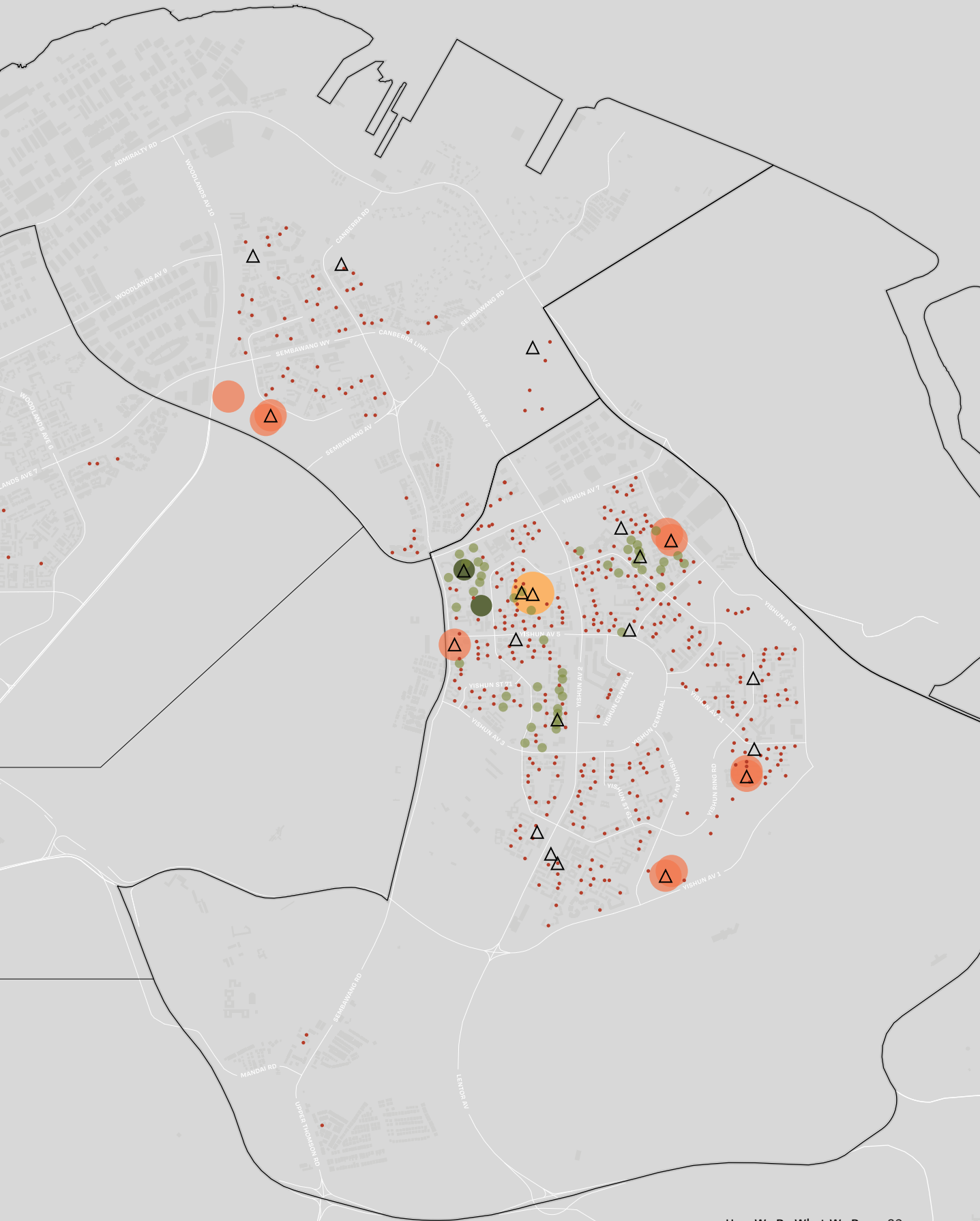


Sembawang

Situated at Singapore's northern end, Sembawang residential town is home to nearly 100,000 residents. With much of its past steeped in naval history and now playing a prominent role in Singapore's shipping trade, Sembawang has been developing since 1998 into a residential town favoured by young and growing families.

Yishun

Yishun Town Project was initiated in 1976. Its 250,000 residents enjoy plenty of amenities and community facilities. Though the town has aged with its residents, it is undergoing revitalisation through the Remaking Our Heartland (ROH) programme to maintain its attractiveness as a town for new residents.

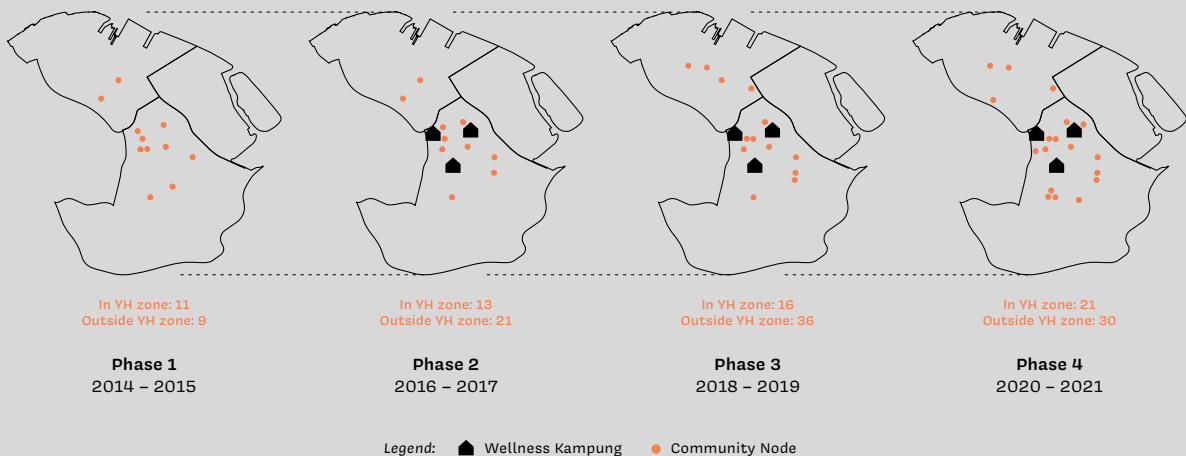


Growing Scale: More Community Nodes

Together with our community partners and residents in Yishun and Sembawang, we have developed 21 community nodes over the last ten years, including 3 Wellness Kampung and 15 Community Health Posts. These are bumping spaces where residents pop in to have *kopi* and *roti* (coffee and bread) and/or participate in resident-initiated, resident-led activities. For Yishun Health, they represent a decentralised health model where proximity to where residents live lowers their barriers to participation in community life.

In a parallel move, Yishun Health deployed Regional Teams (comprising connectors and community nurses) into the community to be visible points of access to health-promoting activities in a place-based approach. Whenever residents have a new idea, they can form an interest group and collectively decide to start a new project. If they need assistance beyond their collective capability, they can rope in a Yishun Health Regional Team member.

Each of these community nodes becomes a local ecosystem that supports resident-initiated and resident-led group activities. More group activities create more opportunities for participation. The remixing of residents through their varying combinations of interest across multiple activities encourages new networks of friends, new conversations and new experiences. The regularity of such activities also makes it easy for residents to incorporate them into their daily routines. The simple everyday hello and the time spent together build strong social capital. Introductions and accompaniments to new groups and activities build confidence to attempt new experiences and generate mutual benefits.



Proximity to Activities is Key to Scaling

Residential postcode analysis revealed a geographical catchment area around the locations of relevant activities of about 300 metres. Residents participate in and initiate more activities when they develop more and deeper relationships with their neighbours, local organisations and businesses. They may not take a bus trip but may walk a few blocks from their homes to participate regularly as a part of their daily lives. Proximity to the activity lowers the engagement barrier by increasing convenience and salience.

Collectively and over time, the dense network and high visibility of regular activities nearby lower thresholds to interest and participation.

Growing Scale: More Active Residents

Early adopters have a galvanising impact on the success of a participatory care ecosystem. Based on various mathematical models and sociological observations, critical mass is reached between 10% and 40% participation rates. This early majority plays a vital role in the proliferation of participation through their influence and connections. We selected an aspirational goal of activating 30% of residents to participate in community-based activities at least three times a week for the success of this participatory care ecosystem.

The graph below captures the cumulative number of residents participating regularly at our community nodes since 2014, starting with Share a Pot, followed by Wellness Kampung (since 2016) and activities by the Regional Teams (since 2018). The limitations of safe distancing measures during COVID-19 from 2020-2021 accounted for the dampening of overall attendance during that period.

Our key learning points on increasing active participation:

1. Ground-up participation

Share a Pot showed us that proliferation happened wherever there were interested community partners, and ground-up commitment sustained the programme at their various sites. Regular word-of-mouth publicity in the nearby blocks and community nodes was highly effective in raising awareness and inviting participation.

2. Inclusivity

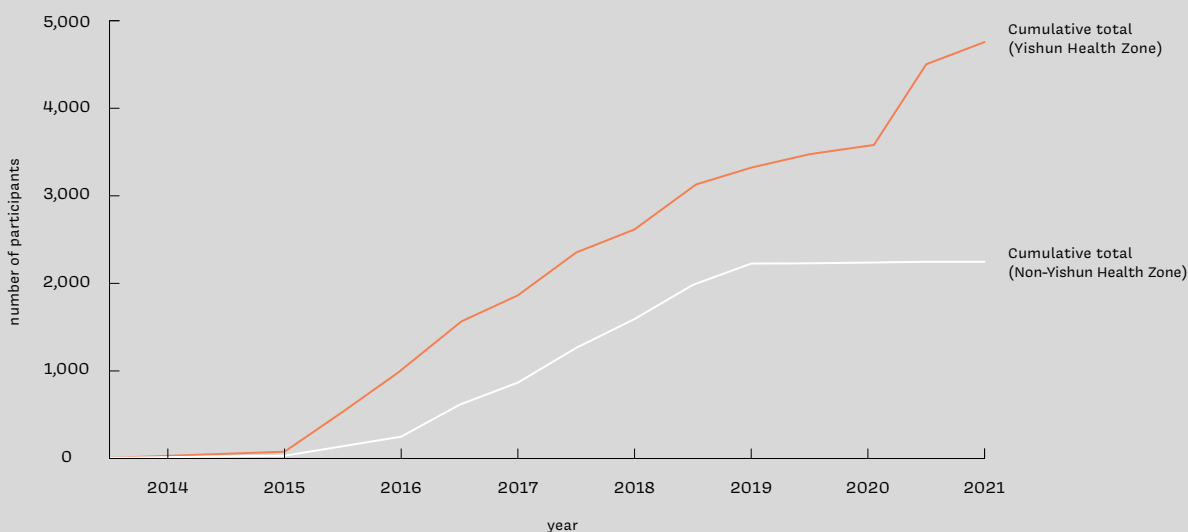
None of the activities had any membership or inclusion and exclusion criteria for participation. This lowered the barriers to entry (and exit), giving residents choice and a platform for varied and diverse interests.

3. Ownership by residents

These physical and communal activities (e.g. gardening, cooking and eating, playing games together) have direct health benefits to individuals without the need for specialised medical expertise. Instead, programmes are interest-driven and low-cost, enhancing their reach and sustainability.

Resident Participation

Growing number of residents participating in the community



Growing Scale: More Participation

**2014
&
2015**

4 Share a Pot sites

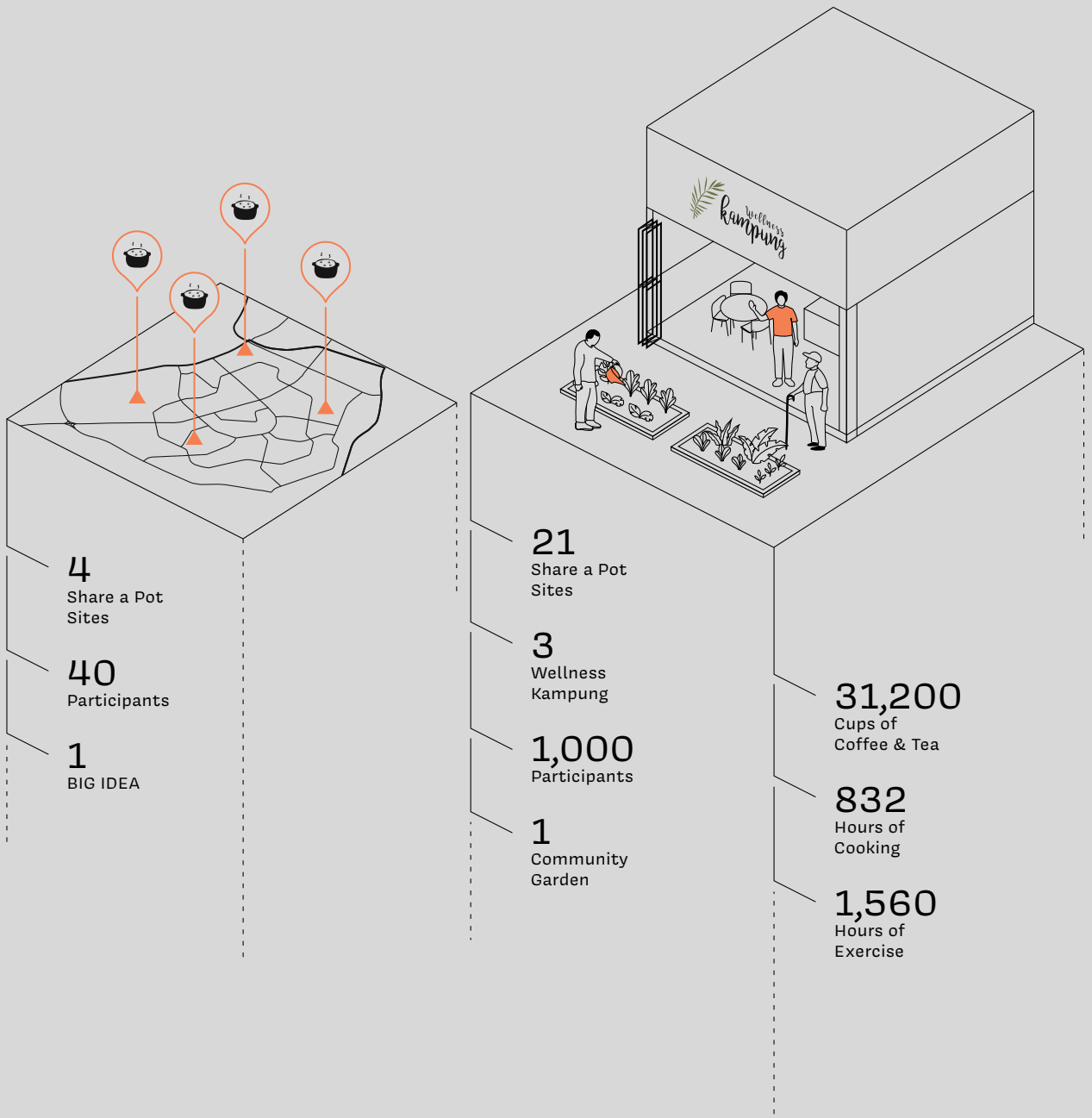
We piloted Share a Pot at a St Luke's Eldercare Centre in Yishun before launching the programme with 3 other community partners.

**2016
&
2017**

21 Share a Pot sites

3 Wellness Kampung

We opened Wellness Kampung as nodes for residents to connect and participate in community life.



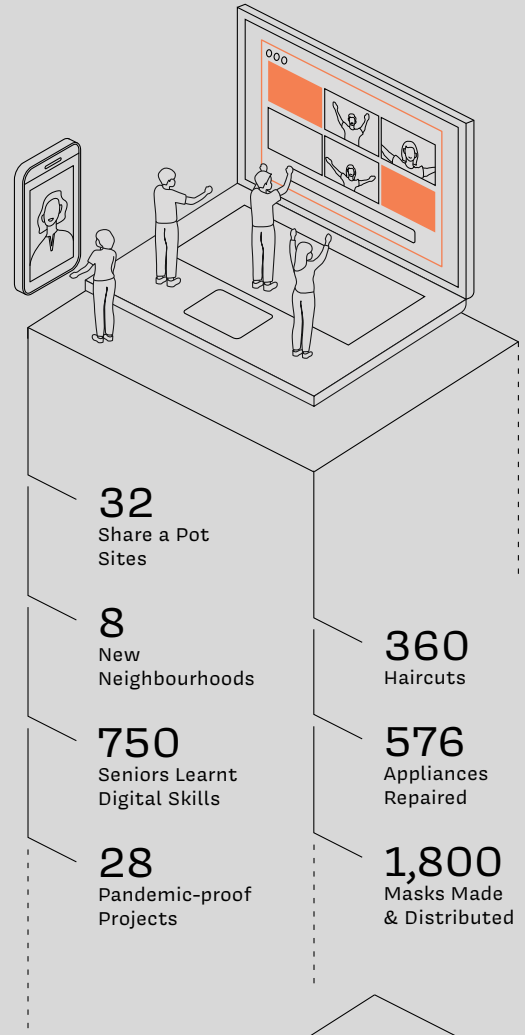
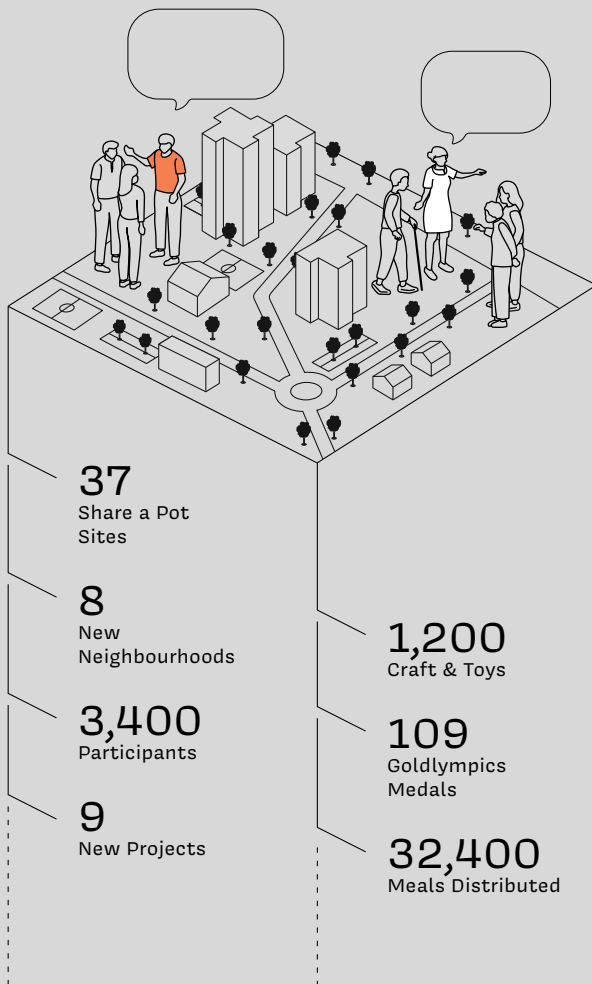
**2018
&
2019**

37 Share a Pot sites
3 Wellness Kampung
6 Regional Teams

Six Regional Teams were formed to work with residents and community partners.

**2020
&
2021**

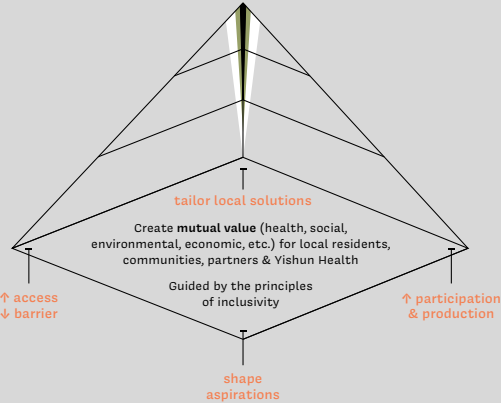
Due to COVID-19, many activities were curtailed, but we took the opportunity to pandemic-proof our programmes and supported residents to cope with the new normal.



What we continue to do together:

- Make & Learn
- Move More
- Cook & Eat Better
- Have Fun
- Know & Support Each Other

Caring Communities: Our Journey, Our Playbook



Increase Local Participation and Production

Creating mutual value for Yishun Health and local communities that form the base of the needs pyramid was an immersive process of learning to recognise what production looks like in the community and working with residents as co-creators for uniquely local participation. We actively sought voices that were seldom heard. At times we had to suspend our disbelief, respect divergent views and see strengths we had not initially recognised; surely, residents who survive on \$5 per day must be doing something right. With humility, respect and patience, the trust that was built became a strong foundation for replicating and proliferating a sustainable and inclusive Participatory Care Ecosystem.

Tailor Local Solutions to be Specific and Relevant

Every community is unique and what works in one community may not have the same outcome in another. Asset-Based Community Development cherishes these families and individuals with diverse backgrounds, talents and contributions to knit a strong social fabric that can buffer against challenges.

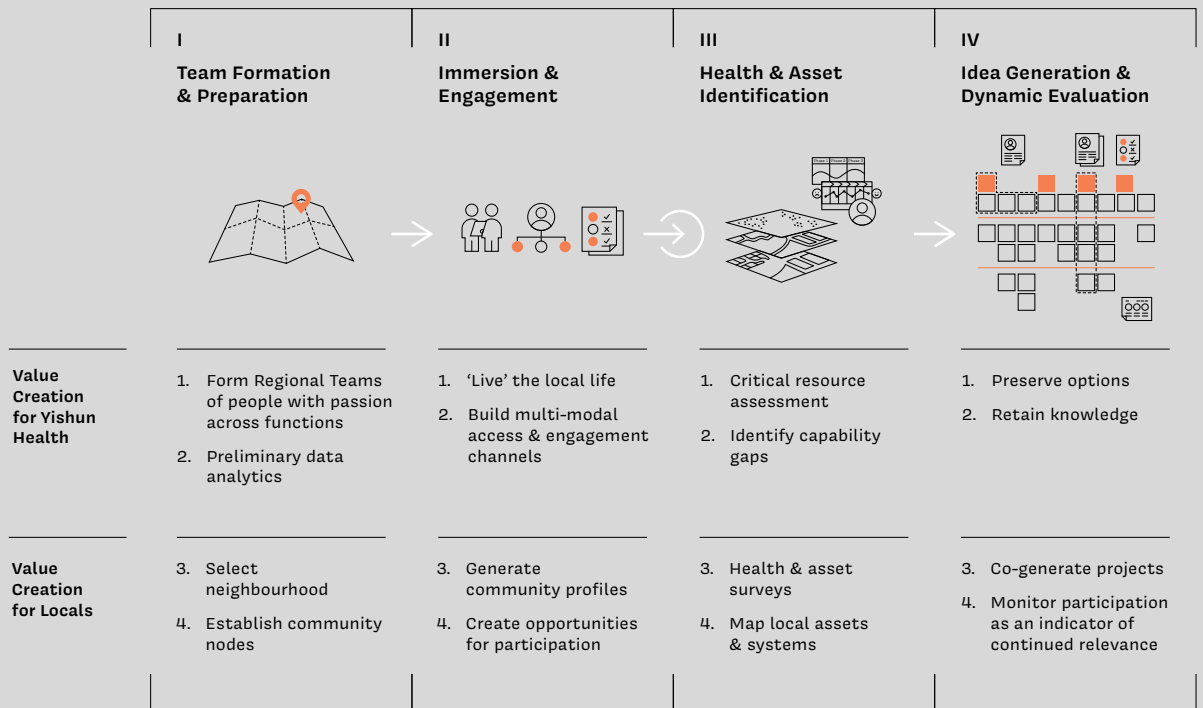
Make Participation Easy by Raising Access, Reducing Barriers and Creating Their Own Solutions

Local Area Coordination integrates residents back into their own communities by first discovering what is meaningful to them, and then by introducing them to community activities that match their interests. Nervous energy can be transformed into easy participation when solutions are initiated and led by peers. In contrast, professionally-designed solutions can involve cost, and raise the barrier to entry for participation. When risks and barriers to participation are reduced, access to such local solutions is increased.

Shape Aspirations for a Healthy, Active and Happy Population

Instead of dispensing standard health advice, Health and Care Professionals (H&CPs) practise Personalised Care and Support Planning conversations with each individual to define their personal life and health goals, take ownership of these goals and then find ways to achieve them.

4 Easy Steps



I. Team Formation and Preparation

We formed Regional Teams of H&CPs, each team working in a region with approximately 60,000 residents. Each Regional Team comprises a combination of community nurses and connectors, supported by allied health professionals, chosen to complement the talents within their community. Using health and social data analytics, we prioritise high potential neighbourhoods in each region to work with (e.g. areas of high healthcare utilisation, rental blocks). We also look for opportunities to establish our presence and build up local community nodes in these neighbourhoods (e.g. Wellness Kampung and Share a Pot).

II. Immersion and Engagement

Regional Team members 'live' the local life to understand the informal economic and social activities, and the relational dynamics within these neighbourhoods. We attempt to connect with as many residents as possible in these neighbourhoods through face-to-face meetings, phone calls, smartphone applications, group meetings, and even via systematic door knocking at their homes. Multiple channels of access and engagement generate more representative community profiles and stories.

III. Health and Asset Identification

Systematically conducted health and asset surveys at residents' homes and at community nodes reveal local community connectors who readily network with others and bring out the gifts of fellow residents. Through these conversations, we discover the resources of 'the commons' and opportunities for capability building.

IV. Idea Generation and Dynamic Evaluation

Together with the residents and community partners, we co-create opportunities and projects for active participation to form new collective experiences. Sustained participation is an indicator of immediate relevance to the community, while ideas that initially gain less traction reinvent themselves to find new relevance to suit their needs.





Case study 1

Wellness Kampung®

Significant deep change in the community occurs best in small and local settings. In 2016, three underutilised spaces at the void decks were converted into Wellness Kampung (WK), 'community living rooms' that serve as meeting places for residents to meet and spend time with their neighbours, to organise and to participate in activities of interest to them.

The WK space is designed for ownership, inclusivity and engagement. Firstly, the name and branding 'Wellness Kampung' was sourced from the residents, reflecting their aspirations to live well in an inclusive caring community. The specific logos give recognition to the history of the long-staying residents and characteristics of the locale, further instilling familiarity and ownership of the space.

Secondly, a participatory design approach is adopted in the built space and programming of the WK. Preserving the bygone practice of keeping doors open in villages, foldable large glass doors are always kept open, with little differentiation between the interior and exterior spaces,

inviting participation from casual passers-by. Minimal tall built-in structures within the space lend visibility to the indoor activities and the open layout of the communal kitchens encourages collective use. Space use is adapted to the activity conducted: stackable furniture used for calligraphy or craft sessions will be stored away during large scale activities such as zumba, pilates, puppet plays or festive lunch celebrations at a multi-purpose space. Cosy corners become favourite meeting spaces for tête-à-tête conversations.

Finally, programming is intentionally incomplete to encourage participation and increase the stake of the residents. The 'invisible' management of the space lowers the entry barrier and personal risk to residents coming forward. Guiding principles regulating the use of the space are developed by the residents themselves to establish their collective norms, including taking responsibility for shared spaces, caring for their neighbours and the environment.



Design Philosophies

While the process of co-designing and co-operating the WK was an iterative journey, four enduring design philosophies support our efforts.

We pay attention to what is available locally; not what we think should be there.

We believe everyone is an agent of change and has the capability to give and capacity to receive. Hence, residents are given the autonomy to organise activities of interest to themselves and to contribute their skills.

We recognise that community is stronger together; the associational whole is greater than the sum of its individual parts.

Health can be subtly incorporated into daily activities and choices, e.g. vegetables grown and harvested from the community garden and incorporated into shared meals can increase fresh food and fibre intake.



Jeremy: From user to producer

Every morning, a chorus of greetings signals the start of the day at each of our three WK. This was the kind of community spirit Jeremy Wong, 69, was looking for after being diagnosed with Parkinson's Disease in 2020. He was experiencing daily fluctuations in his function and low mood due to his condition and sought a space to relax, spend his time and lift his mood. He felt something was lacking at the usual day facilities where residents generally came only for the activities and went home as soon as they were over. At his case manager's recommendation, he visited the WK at Block 765, Nee Soon Central, in May 2021. There, he felt welcomed by the Centre Coordinator, Mary Ong, and the residents who regularly turned up.

Now, he engages in Rummy-0 and Sudoku with his friends at the WK daily, relaxing with a cup of *kopi*¹ in his favourite comfortable geriatric chair donated to the WK. Although the community did not initially understand Jeremy's condition, they started to look out for him when they gained insight into his fluctuating function, often pausing their games for him to get up and walk about to relieve the stiffness in his legs.

As much as Jeremy received, he gave in equal measure. When Mary told him that a fellow resident's electrical power had tripped, Jeremy visited the resident's home to check on the cause. Drawing on his experience as a former air-conditioner repairman, he was able to reset the circuit breaker and dispense safety advice to the resident to prevent future recurrences. Together with Mary, he also pioneered Walking *Kaki*², a morning walk interest group for residents with limited mobility like himself. During their walks every Friday morning, Jeremy can be found watching out for the slower and older members of the group, especially at traffic crossings.

The number of residents who now know Jeremy by name and face, and stop regularly to greet him "Hello" each morning, bear witness to the reality that Parkinson's Disease did not deter him from being connected to opportunities to participate; in seizing the chance to contribute, he has become a valued giver to his community.

¹ kopi: local term for coffee
² kaki: colloquial term for friends

Human City Design Award

Judging Comment



This project (Wellness Kampung) addresses one of our biggest challenges: ageing populations. Its innovative character is how it connects daily problems with a community building process and the creation of support networks and meeting places.

Wellness Kampung was one of the 12 finalists of the first Human City Design Award in 2019, selected from a total of 75 projects from 25 countries

“

I felt privileged to chair the Human City Design Award jury and to see so many proposals from younger and more experienced design teams focused on solving our complex problems. The choices we made seek to reflect the breadth of important human issues the applicants presented, they ranged from: co-creating communities in participatory ways, to creating stimulating gathering places, to addressing affordability issues in cities, to using design to tackle ethnic and social conflict, to looking at innovative design solutions to make the elderly and disadvantaged feel welcomed in our cities, to rethinking schools, to showing how we can become more sustainable places through design and much more.

Charles Landry

Head of the Selecting Committee
Founder of Comedia
International authority on using imagination in urban change
Author, *The Creative City* and many more

“

The theme itself is very interesting and timely... consequently, the projects presented allowed us to verify how a significant international group of designers interpreted it. In general terms, the projects presented at the Human City Award have told us that an idea of the city, and of city making, is emerging: a city made for citizens and also, above all, made by citizens. Literally: the city seen as a weave of all the activities that citizens want, know and can do within it.

... These projects tell us that a human city must also be socially just and sustainable for the environment. These themes have been recognised by the jury as important and have had a weight in its discussion and in its choices.

Ezio Manzini

Founder of DESIS Network
Distinguished Professor at Elisava, Barcelona
Honorary Professor of Politecnico di Milano

The Human City Design Award is a differentiated award given to urban design projects that have solved complex urban environment problems through creative design and contributed to establishing a harmonious and sustainable relationship between people, the society, the environment, and nature by presenting new visions.

“

What a remarkable place...

In my career as a public health physician since 1973, this was my second visit to a place where a hospital offers an infrastructure and tells clients or beneficiaries, *“This is your centre, you decide how to use it to live a happy, healthy life. We’ll just be present if you need us.”*

— Dr Jean-Louis Lamboray

Senior Public Health Specialist, The World Bank, 1987–1998





Case study 2

Share a Pot[®]

Broth to build brawn,
bone, brains and bonds

Frailty is a clinical concept of general vulnerability to various external stressors that extends beyond the physical to include psychological, cognitive and social dimensions. However, it is often misunderstood and feared as an inevitable part of ageing. The view that seniors are weak goes against their desire to be dignified and valued members of society, causing them to deny their symptoms of frailty and leave these unaddressed. They fear being a burden to their families and refuse to seek help when they observe a decline in their well-being and function, leading to a progressive downward spiral of falls, fear of further falls, immobility and depression.

Share a Pot is a holistic community-driven programme that strengthens residents and fortifies their neighbourhoods, and importantly maintains the dignity of age without stigma. Its engagement philosophy is embedded deep in our Asian culture of communal dining and exercise, lowering the barriers for anyone to volunteer or participate.

The science behind the design

Traditional bone soup is boiled for hours to extract its nutrients. Protein from ingredients like meat or beans enrich the bone broth into a nutritious muscle-building supplement. Adding ingredients with natural acids like tomatoes or vinegar leach the bone-building calcium into the soup. By pairing soup with an exercise session, muscle synthesis and strengthening can be stimulated for as long as 24 hours after the combined activity. Additionally, these communal interactions take place in nearby and familiar 'third places' such as community centres and religious organisations, increasing the opportunities for local residents to meet each other frequently, improving their cognitive and social functioning.



An asset-based approach

Share a Pot is a fun social activity that removes the notion of receiving help. People do not come to be 'recipients of charity'; they come of their own accord to enjoy the soup, exercise and company. In this way, anyone regardless of age and ability is included, celebrating interdependence as communities rally together to give and to receive. Participants do not wait to be served but wash their own bowls and clean up after themselves, and as they do this regularly, they affirm each other's dignity.



The simple programme



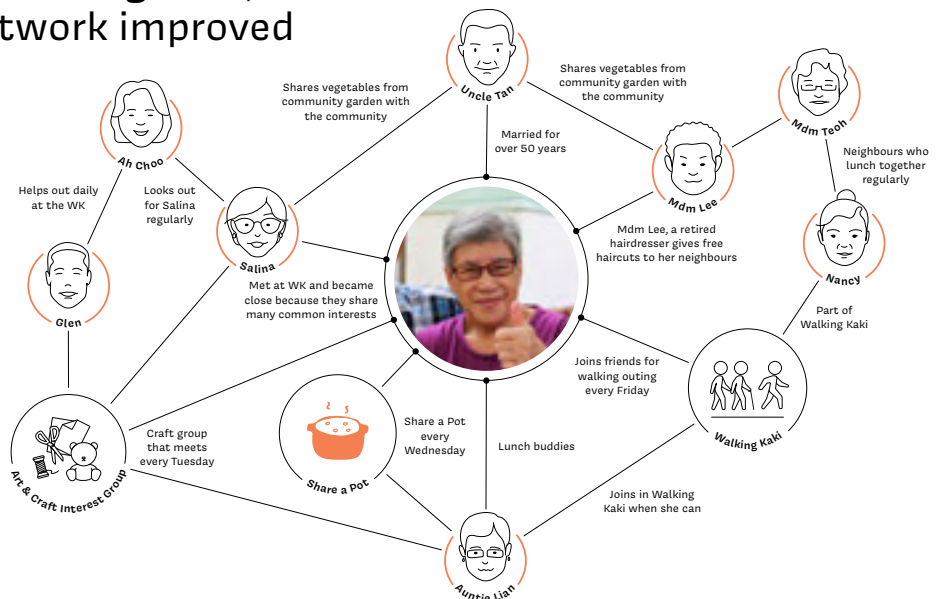
Benefits

The benefits of Share a Pot extend beyond the immediate value of a meal and exercise, to friendships and community-building. It has moved beyond mere soup to become a social catalyst that brings volunteers, market-stall owners and other community members together to put what they can into the commons and sustain the programme.

The humble pot may be the signature symbol and attraction of Share a Pot, but its true value lies in its preservation of our Asian values, its solid scientific basis and its design for social impact.



Mdm Sim: Better together, network improved



Mdm Sim Gek Choo was introduced to the Wellness Kampung (WK) community in 2016 by a Community Nurse. There, she learnt of Share a Pot, and started looking forward to Wednesdays when residents at the WK would prepare delicious soups after their morning exercises.

Participating in this programme opened a whole new world of friends and activities for her. At first, the shy 67-year-old did not know what to do with her own free time. A housewife who focused on raising her children and supporting the family's small business in her younger days, community life was a luxury that she did not have until her children were old enough to have their own families. She stayed home on most days and watched repeated runs of soap opera on TV. She visited the local markets but did not know how to start a conversation with her neighbours.

At WK, she struck up a friendship with Salina. The two women bonded over their love for soap opera and found that they shared many common interests. They had scores of topics to chat about over soup at Share a Pot sessions.

When the pandemic hit, Mdm Sim and her friends kept in close contact and looked out for one another. When some of them had to limit their social interactions, they kept in touch through regular phone calls. When friends sewed masks for the local migrant workers, Mdm Sim helped to pack them into gift packs. When friends had concerns about taking the vaccination, she encouraged them to chat with the local Community Nurse to gather more information. When friends shared that they were starting a new Walking Group post-lockdown, she readily joined in the weekly outings.

Today (2022), Mdm Sim is 71 years old and a known member of the community. She is greeted whenever she is out of her house and is often surrounded by friends at the market, coffee shops or at the WK. Through this healthy self-managed community, Mdm Sim's associational life has improved greatly in the last five years. She has introduced her husband, a retired farmer, to the community. Together, they and the community around them support each other to get stronger and age-in-place.

Project summary on page 85

Jury's Statement



This is a compassionate and harmonious community with a sympathetic understanding of Asian culture. This soup is good for body and soul as it combines healthy eating with sharing and nurturing a sense of belonging for the elderly. A loving, caring project that allows people to have a positive impact in each other's life is never so hard!

Share a Pot was one of the six awardees for the iF Social Impact Prize in 2017

The iF SOCIAL IMPACT PRIZE aims to publish and support projects that contribute to our society. The prize categories correspond to the Sustainable Development Goals of the United Nations.

Judging Comment



This is a very well-branded community service. A slick and effective website and brochure, well-maintained social media postings, and press coverage associating the service with the right sort of partners, presses all the right buttons for its intended community. Its service offering across all communication channels is clear and compelling.

Share a Pot received the Gold Award in the ‘Excellence in Brand Building and Marketing’ category in 2019

The Asian Elderly Care Awards recognise best practices and excellence in contributing to the well-being of the elderly.



Case study 3

Community Spaces

Local Heroes lead the charge for the community-owned Yishun Superhero Library

Since October 2020, a dramatic transformation has taken hold of the void deck of Block 436 – from a dark, quiet corner to a lively community resource point.

It started when a resident placed a shoe cabinet at the area to be used as a bookshelf for children who had been part of a weekly reading session organised by Yishun Health connectors. Three retirees Mr Chia Kam Poi, 67, Mr Wong Poh Khim, 73, and Mr Azhar Mohamed Soh, 58, who live in the area chanced upon the space and took it upon themselves to expand it into a library. "It was just a small shelf of books, but I thought we could do better," said Mr Chia.

The three friends had previously attended a woodworking course together and applied their skills to upcycling old and discarded furniture into shelves and tables, transforming the space into a charming do-it-yourself library. In just six months, the library had amassed a collection of children's books, and its footprint had grown from a single cupboard to several shelves. "We just did what we could, like call our friends to ask for donations," Mr Wong shared. The collection is now estimated to have more than 1,000 magazines, comics and books in various languages, for persons of all ages.

The community rallies around

The library has since instilled a deep sense of neighbourliness among the local residents. It is open every day and works on a simple honour system. Anyone can pick up a book, take it home to read and return it later. If they wish to keep it, they are simply encouraged to donate a book in return.

Since the library has been established, it has become a space for sharing and giving of any kind. Leveraging the bumping space, residents have placed clothes, toys and snacks at the area, complete with homemade signs and containers made from recycled materials, inviting others to take what they need. In January 2022, Hua Yi Secondary School reached out through the nearby TOUCH Senior Activity Centre to donate 1,000 books to the Yishun Superhero Library. The space also became an informal message board where residents could leave words of encouragement for each other. With the help of Mr Chia's daughter, the self-appointed custodians of the library started a Facebook and Instagram page, using it to acknowledge and appreciate the donations and notes. In the midst of the COVID-19 pandemic, the library gradually evolved into an informal sharing corner and beacon of life for the community.

With residents proud to be in the drivers' seat, Yishun Superhero Library has become a space that the community rallies around. In the evenings, anonymous heroes have been spotted cleaning the library. The children of the neighbourhood also participate in making decorations for the library. Occasionally, chairs and tables find a new home at the void deck space. "It has gone beyond being just a library – people have taken ownership of this space. It is our library without borders," said Mr Chia.



Yishun Superhero Library:

From void deck to neighbourhood nook

The small group of library custodians meets once a week to tidy the space and review the contents of newly donated books to ensure that they are suitable for children. With more books being donated each week, the original trio has grown to a group of six and welcomes new residents to join them.

While the upkeep of the library requires commitment, this dedicated group agrees that it is a meaningful task. Mr Chia, who retired from product development and manufacturing, is a grandfather of two and wants to inspire children to read. "It is important to start from young to inculcate a love for reading," he says. "Children today are exposed to a lot of digital media, but they should start with reading books first – the rest can come later. They have their whole lives to enjoy the internet."

Former electrician Mr Azhar, agrees that it keeps his spirits up. "It is a very meaningful thing to do," he adds. He uses a personal mobility device and goes for haemodialysis thrice a week, but takes pride in being able to use his skills to create unique, 'refreshed' pieces of furniture for the library. He can often be found taking pictures of interesting furniture to use as inspiration.

Mr Wong, formerly in a sales position, chimes in, "It's better than only staying home to stare at the walls. This is interesting and fun. It keeps me happy and healthy."



The team continues to dream about how Yishun Superhero Library can be a space for children to learn and grow. For example, Mr Chia hopes to introduce 3D printing to children in this space. The future of this space is limited only by the community's imagination.

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Ki P.88 / Grow & Recycle Community Gardening
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Sembawang Cres 269A/B Community Pride P.102 /
Sembawang Cres WhatsApp Group P.105 /

Project Directory 4

Project Registry

PROJECT NAME	LOCATION (postal code)	START DATE	PHASE	STATUS*
Care & Support				
162 Resident Volunteers (Free Food For All)	760162	01 / 2020	<div style="display: flex; justify-content: space-between;"> Emergent Designed Tested Ongoing Replicated Pandemic Ready </div>	▶
Community Volunteer Team	762269	04 / 2020		▶
Garden Salon	760765, 760260	05 / 2016		▶
Guardians of Wellness Kampung	760260	2018		▶
Kampung Buddies	760115, 760260	05 / 2016		■
Membawang Kakys	761510	06 / 2018		▶
Mums with Mugs	761510	04 / 2021		▶
Project Love Lunch	760436, 760162	2015		▶
Project Pencil SG	761701	02 / 2014		▶
Stroke Survivor Support Group	760765	04 / 2021		▶
Strong Women Group	762269	08 / 2020		⏸
The CHAMPions	760260, 760115	04 / 2021		⏸
Cook & Eat				
Cooks for Community	3 sites	05 / 2016		⏸
Skill UP	762269	07 / 2017		▶
Exercise & Movement				
Block Games	762269	12 / 2020		⏸
Community Dance Groups	760115, 760260	05 / 2016		⏸
Dance UP	760115, 760765	01 / 2021		▶
HAPPY Exercise	760115, 761701	02 / 2021		▶
Morning Exercise Groups	3 sites	03 / 2016		⏸
Rummy O & Games	760115, 760260	04 / 2016		▶
Share a Pot	32 sites	01 / 2015		▶
Singing Groups	760115, 760260	05 / 2016		▶

*Status of projects is accurate as of 31 December 2021



Active



Paused



Dormant

PROJECT NAME	LOCATION (postal code)	START DATE	PHASE	STATUS*
			Emergent Designed Tested Ongoing Replicated Pandemic Ready	
Swimming Kaki	760765	11 / 2019	●●●●○	⏸
Walking Kaki	760765, 701701	06 / 2021	●●●●○	▶
Grow & Recycle				
Community Garden Groups	4 sites	05 / 2016	●●●●○	▶
Repair Kaki	760765	09 / 2017	●●●●○	▶
Make & Learn				
Arts & Crafts	3 sites	05 / 2016	●●●●○	⏸
Chinese Painting & Calligraphy	760765, 760115	02 / 2017	●●●●○	▶
Language Classes	760260, 760765	05 / 2016	●●●●○	⏸
Reading Group	760436	08 / 2019	●●●●○	▶
Superhero Library	760436	10 / 2020	●●●●○	▶
Toy Story Group	760115	01 / 2019	●●●●○	⏸
Others				
269A/B Community Pride	762269	03 / 2020	●●●●○	▶
461A WhatsApp Community	761461	11 / 2021	●●●●○	▶
Sembawang Blessing Corner	751363	07 / 2021	●●●●○	▶
Sembawang Cres WhatsApp Group	750364	06 / 2021	●●●●○	▶
Sembawang Friday Chitchat	750364	06 / 2020	●●●●○	▶
Wellness on Wheels (WOW)	762510	11 / 2021	●●●●○	▶

*Status of projects is accurate as of 31 December 2021

162 Resident Volunteers (Free Food For All)

Feeding the body, nourishing the neighbourhood

01 / 2020

Start Date



Ongoing & Pandemic Ready



Active

Free Food For All (FFFA) is a charity registered in Singapore since 2015 to provide free meals to the less fortunate, regardless of ethnicity or religion. Besides providing relief to fulfil a basic human need, FFFA also seeks to empower their beneficiaries to take action in raising themselves out of poverty and be contributing members of society. Visit FFFA at <https://www.freefood.org.sg> for more information.



Scan to watch video

Together with Chong Pang Community Club and Darul Makmur Mosque, FFFA set up a community fridge at the void deck of Block 162 Yishun Avenue 11 since the start of the pandemic in 2020 for the community to share excess or unsold Halal-certified food. This initiative has now grown to benefit approximately 200 families. Residents are encouraged to take only what they need so that everyone can have a share.

In addition to fresh groceries, they also receive bread, oil and dried goods like rice. A group of residents staying at Block 162 volunteers with FFFA to distribute food rations to their neighbours. They even initiated a WhatsApp group chat to collate their neighbours' needs as well as disseminate information on any upcoming food distributions.

On some occasions, resident volunteers also help to source for donors to donate items like blood pressure monitoring sets, thermometers and fans. Seniors who are living alone or non-ambulant residents are not forgotten, as the volunteers go the extra mile to bring the rations to their doorstep. The strong community spirit of the volunteers ensures that no neighbour goes hungry.



Community Volunteer Team

Neighbours helping neighbours

04 / 2020 Start Date

●●●●● Ongoing & Pandemic Ready

▶ Active

A gift that keeps on giving: When COVID-19 first hit our shores in 2020, a small group of 12 neighbours living in an estate in Nee Soon East rose to the occasion. These community members rallied around each other to look out for neighbours who may be vulnerable and coordinated with goodwill sponsors to distribute food and essentials to their community. The group has grown from strength to strength in the prolonged pandemic, finding new ways to gather contributions from neighbours.



Garden Salon

Cuts by the kerb

05 / 2016

Start Date

●●●●○ Ongoing

▶ Active

With a few chairs placed on a sidewalk overlooking a community garden, volunteer hairdressers set up shop to provide free haircuts for seniors and other regulars at the Wellness Kampung. Back in 2016, these sessions were held once a month. Now, as the activity becomes more well-known, some residents would try their luck and walk in to see if their favourite hairdresser is around for a much-needed haircut!



Guardians of Wellness Kampung

Caregivers, helpers and guardians

2018

Start Date



Ongoing & Pandemic Ready



Active

Residents are not the only ones who have formed bonds at Yishun Health's Wellness Kampung. Foreign domestic workers (FDWs) who accompany their charges also become regulars, forming a support network of their own. Their insights into the needs and well-being of seniors make these FDWs an invaluable source of useful information. They act as 'eyes' and 'ears', looking out for one another and supporting each other's adopted family by sharing exercise videos, recipes and caregiving tips, especially during the pandemic.



This community group came to the attention of Mr Teoh Gin Wah, a former Wellness Kampung centre coordinator. "This is an untapped resource we don't usually think about. When we want to know more about the senior, their helper often has the best information. When a senior is not at the centre, we ask one of the helpers where she is. They would know because they communicate with one another. They are our community assets." Mr Teoh sees them as guardians of the centre, helping to serve lunch to some of the elderly who need assistance, and keeping an eye on the others. In 2018, he also invited them to attend a Fall Prevention Workshop at the Wellness Kampung, where they picked up practical skills such as how to support seniors to rise from a seated position.

"We are a community here. And we have big hearts with the passion to serve", says Ms Sumarwati, who prefers to be known as Levi. Since 2016, Levi, 38, has been an FDW tasked with the care of Ah Ma, an 86-year-old Yishun resident. Levi first came to Yishun three years ago and found it difficult to make friends. However, she gradually got to know and grew to be a part of the community here. Similarly, Levi found companions in other FDWs who accompanied the seniors under their care to Wellness Kampung. According to Levi, this community has been an invaluable resource for support. They share tips on ways to keep their Ah Gong and Ah Ma healthy, active and happy. They also help one another to cope with the unique stresses of being an FDW caring for seniors. "When we have a problem, we need to share it with our friends", said Levi.

These FDWs are constant companions to the seniors' appointments at Khoo Teck Puat Hospital, as well as visits to the Community Health Post at the Wellness Kampung. Levi prides herself on being able to care for Ah Ma. For example, she reinforces the teachings from a Community Nurse, Wan Ting, on how to keep Ah Ma physically active and control her temper. She also makes sure to check with the doctors and nurses before introducing a new activity to Ah Ma, e.g. bringing her on a visit to Sembawang Hot Spring Park.

Kampung Buddies

Better a nearby friend than a distant relative

05 / 2016 Start Date  Ongoing  Dormant

Kampung Buddies is a peer support initiative that was started in 2016, with an aim to reach out to homebound or frail residents who have limited engagement with their community. Simply put, if you are unable to visit the Kampung, the Kampung will visit you!

Today, the Kampung Buddies support senior residents in their community by accompanying one another for medical appointments, meal deliveries, social outings and other errands.



Membawang Kakys

Your friendly neighbourhood kakys

06 / 2018 Start Date Ongoing & Pandemic Ready ▶ Active

Membawang Kakys is a resident group that was set up in 2018. The group started as a 'just for fun' gathering amongst five close-knit families living in Blocks 510A and 510B in Yishun Street 51.

When the pandemic affected many of neighbours in their community, the Membawang Kakys rallied behind and provided support for their old and frail neighbours. They prepared food and celebration packs, and distributed them to seniors who could not visit their families during *Hari Raya*. They helped with grocery runs and checked in on older neighbours regularly. They also worked closely with the Resident's Committee during the COVID-19 outbreak in 2020.

Today, they continue to be active in the neighbourhood. Membership of the group has also grown to more than 20 people.



Mums with Mugs

Mums fighting malnutrition and improving health

04 / 2021

Start Date



Tested & Pandemic Ready



Active



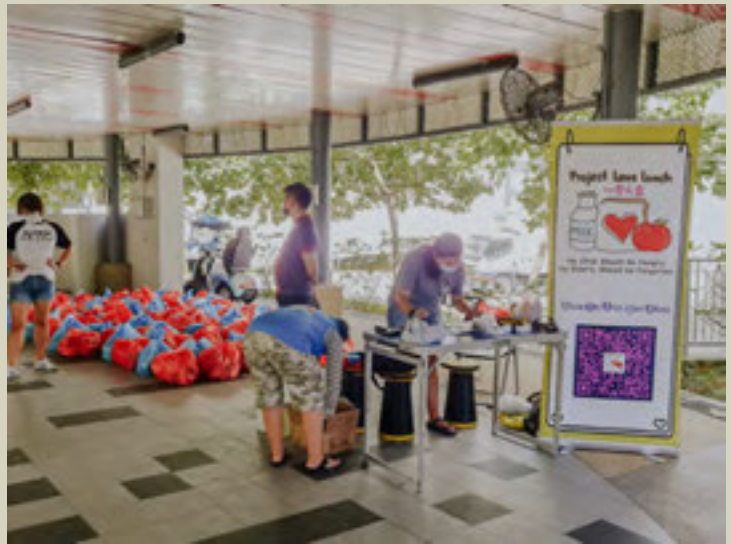
Mums with Mugs is a group that was set up to address nutrition amongst mothers. The first session was held on 6 April 2021. Since its inception, the group has grown from three to 11 close-knit residents. The group provides opportunities for residents to share healthy recipes as well as food with one another. The relationships built through the group also saw members rendering help where needed. There was even talk about setting up an exercise group! COVID-19 restrictions meant that physical meetups were not possible but the group remained active over WhatsApp text messenger.

Project Love Lunch

Delivery of meals and groceries to residents by residents

2015 Start Date Ongoing & Pandemic Ready ▶ Active

Project Love Lunch is a community-based group that is led by Ms Priscilla Ong, 39. She believes that “no child should go hungry, and no elderly should be forgotten”. As such, the group supports the community in Yishun by providing meal deliveries and monthly grocery distributions across different rental blocks such as Blocks 436, 438, 461A and 461B. The team is made up of a group of dedicated volunteers, with some residents from the rental blocks. Project Love Lunch receives funding through corporate sponsorships and sponsorship appeals on their Facebook page.



Project Pencil SG

Improving lives in Yishun Street 71 and beyond

02 / 2014

Start Date



Ongoing & Pandemic Ready



Active

Project Pencil SG is a ground-up initiative that was started by Mdm Sarimah Amat, 55, in 2014, when a friend approached her for donations of pencils for 30 orphans in Thailand who enjoyed drawing and painting. She put the request up on Facebook, and collected 70kg worth of colour pencils, watercolour paints and drawing block. Since then, the group regularly holds donation drives to collect school supplies for disadvantaged children in Singapore and overseas.

Since the COVID-19 pandemic, the group has become more active. In January 2021, they sourced for discarded furniture to set up a study corner at a void deck in the North to hold tuition sessions for disadvantaged children several nights a week. In November 2021, they acquired the keys to an office space that they call their 'second home': a three-room shophouse unit in Chong Pang, where tuition sessions are regularly held for 34 students. The group feels strongly for the growth and development of these disadvantaged children, and also runs Silat martial arts classes to build up their resilience and mentor them to impart valuable life skills.

Besides helping disadvantaged children, the group also encourages neighbours in the Yishun Street 71 neighbourhood to care for one another. "Neighbours are the closest available help we can get, so we really need to be united as one," says Mdm Sarimah. Regular food distributions, neighbourhood clean-ups, helping elderly residents to spring clean their homes, and looking out for rough sleepers in the neighbourhood are just some of the activities that the group regularly does. They provide an avenue for residents to request for or offer help to their fellow neighbours of different ages and backgrounds, thereby fostering a 'kampung spirit' in a caring and thriving community.



Stroke Survivor Support Group

Empowering stroke survivors

04 / 2021 Start Date Tested & Pandemic Ready Active

Stroke Survivor Support Group (SSSG) provides a platform for stroke survivors to share information and personal life experiences. The group also provides peer-to-peer emotional support in promoting a spirit of empowerment and helping other stroke survivors achieve a better quality of life.

The SSSG programme provides coaching to increase confidence and self-management among stroke survivors. This is accomplished through educating, equipping and empowering them using peer-to-peer influence and dynamics. The support group comprises six sessions:

1. Stroke and Symptoms
2. Risk Factors
3. Healthy Lifestyle
4. Exercise
5. Emotional Management
6. Recap and Community Resources

Despite disruptions from the COVID-19 pandemic and the need to switch from face-to-face to an online platform, participants demonstrated flexibility and versatility in learning how to use Zoom to continue their participation. Participants not only gained knowledge and skills but also developed compassion and acceptance of self and others. They moved beyond self to helping others, forging friendships beyond the programme.



Strong Women Group

Circle of friendship and support among mothers

08 / 2020

Start Date



Ongoing & Pandemic Ready



Paused

'Strong Women' is made up of a group of mothers who formed a circle of friendship to strengthen and support one another through the ups and downs of caring for themselves and their families. They believe that health is a priority and should be made accessible to all women. They meet regularly to share not only their personal struggles but also the insights gleaned from these experiences. It offers a platform for mothers to be heard and be affirmed for braving the odds and thriving amidst it all. The women draw inspiration and wisdom from one another's ideas and stories. It is a safe space for them to discuss various health and social issues, such as providing nutritious food for their loved ones, pregnancy and post-delivery pain, as well as employment opportunities. They also work with sponsors to distribute diapers, milk powder and other essentials to one another.



The CHAMPions

Coaching for health action and management

04 / 2021

Start Date



Ongoing & Pandemic Ready



Paused

Knowing how our lifestyle habits impact our health is important; but actually *living* a healthy lifestyle is what makes a difference. CHAMPions support one another to take charge of their own health by adopting good lifestyle habits and sharing tips and checking on each other's progress.

Every fortnight, a small group of residents gather to learn how they can develop healthy lifestyle habits to prevent, delay or better control their long-term conditions. With the guidance of a Health Action Coach (HAC), residents gain skills such as learning how to read nutrition information labels and choose healthier options such as wholegrain foods at the supermarket. CHAMPions motivate and support one another to take action, and leave the session with a new health goal. Personalised one-to-one coaching is also offered to those who may need extra guidance from the HAC. The HAC follows up via tele-consultations regularly to check on the residents' progress and supports them towards becoming CHAMPions of healthy lifestyles.



Cooks for Community

A community that eats together, stays together

05 / 2016

Start Date



Tested



Paused

Food brings people together in a way that very few activities can. Growing, preparing, cooking and sharing food together form a big part of community life. Different community groups come together to grow vegetables and share their harvest with the home cooks. Both the young and old also help with food preparations and share meals. Local home cooks host weekly community cooking sessions to share traditional and new recipes too.



Skill UP

Gaining knowledge and skills to stay healthy for our loved ones!

07 / 2017 Start Date Ongoing & Pandemic Ready ▶ Active

With an emphasis on nutrition to help participants prevent the onset of chronic diseases, Skill UP aims to educate and activate healthy eating lifestyle habits by supporting individuals in adopting and sustaining simple health actions as part of the strategy towards the prevention and management of chronic disease. Participants are also encouraged to share their personal experiences and support one another through their healthier lifestyle journey. By creating this 'kampung spirit' amongst them, health goals can be achieved together!

Previously known as Skills for Life! @ Community, Skill UP has successfully engaged participants through interactive hands-on sessions and facilitated discussions surrounding various health topics such as sugar, wholegrains and vegetables. Skill UP has curated experiential opportunities to facilitate the group's learning through informal discussions and engages with the participants through social media to support them through their journey to better health. As each run comprises different unique individuals, it keeps the learning experience exciting and relevant.

The COVID-19 pandemic has propelled the team to venture into new ways of engaging with participants as to better prepare them to be pandemic-resilient. Sessions have been shifted online and the large sign-up rate and active participation has been heartening. This also indicates that participants are adapting well to this 'new normal'.

The success of Skill UP is a product of constructive feedback from participants. In the future, the team hopes to co-develop more engaging content so as to keep the learning experience relevant and interesting!



Block Games

Health conversations with children using play

12 / 2020 Start Date Ongoing Paused

Block games is a weekly programme which engages children in conversations about health and well-being. Using play and drama-based techniques, the three domains of health behaviour (biological, psychological and social) are unpacked and explored, giving space for children to make meaning and develop their own interpretations of health. The programme also encourages the children to share their dreams for the well-being of their loved ones, and act on their agency as young influencers to their families.



Community Dance Groups

Social dancing to fitness and friendships

05 / 2016 Start Date Ongoing Paused

The Social Dance Interest Group was started in 2016 by two dance extraordinaires from the Wellness Kampung. Members of this interest group range from 50-80 years old. One of the popular dances being practised is the Cha-cha-cha dance, which also doubles up as an aerobic exercise. The group was even invited to give a lunch-time performance at Khoo Teck Puat Hospital.



Dance UP

Community dance programme to improve fitness and reduce frailty

01/ 2021 Start Date Ongoing & Pandemic Ready ▶ Active

Co-developed with professional dance artistes and a physiotherapist, Dance UP is a community dance programme that is led by residents, for residents. While strength and balance exercises are among the most effective ways to prevent falls and frailty, exercise programmes are sometimes seen as being boring and repetitive, with high dropout rates. To tackle this, Dance UP incorporates exercises from the Otago Exercise Programme into dances that have been choreographed by professional dance artistes. Each session comprises warm ups, a walking segment for improving dynamic balance and reaction time, floor exercises, and creative dances which reflect local cultural roles. Since January 2021, a group of residents has been undergoing training by professional dance artistes and leading weekly dance sessions.





HAPPY Exercise

HAPPY (Healthy Ageing Promotion Programme For You) Exercise

02 / 2021

Start Date



Replicated



Active

The HAPPY Exercise was adapted from a programme designed by the National Centre for Geriatrics and Gerontology in Nagoya, Japan. This programme has been implemented by the National University Health System (NUHS) nationwide since 2019. Seniors on this programme have shown significant improvement in memory, mental well-being, functional ability and strength. Several Wellness Kampung volunteers went through theory-based training sessions and practicums conducted by NUHS Trainers and were certified as HAPPY Exercise Trainers. They have since been conducting HAPPY Exercises almost daily at the Wellness Kampung.



Morning Exercise Groups

Daily exercise sessions, rain or shine

03 / 2016

Start Date



Ongoing & Pandemic Ready



Paused

Residents engage in this staple Wellness Kampung activity every morning from 9am to 10am since the opening of the three centres in 2016. Run by both external exercise trainers and community volunteers, the exercise themes range from Bollywood dances to Zumba and even relaxing yoga. The exercises aim to be inclusive by offering options for seniors with varying functional levels, including those on wheelchairs or who require support from their foreign domestic worker (FDW) to exercise alongside their more independent friends. During the Circuit Breaker in 2020, residents of the Wellness Kampung continued to exercise every day at home with assistance from their FDWs to keep the habit alive even though the physical morning sessions were suspended.



Rummy O & Games

Fun with board games

04 / 2016

Start Date



Ongoing & Pandemic Ready



Active

The Rummy 'O' (Rummikub) game is one of the most popular board games that the residents at the Wellness Kampung play. This interactive game brings people of different backgrounds together in shared moments of exhilaration, which keeps their minds active and improves mental agility. Such mental stimulation can delay the onset of dementia in seniors while promoting social interaction. Residents also took part in the

National Rummy 'O' Competition held in 2017 and 2018, and were placed 4th and 12th out of 120 participants respectively.

Group telematches are equally thrilling, bringing laughs as residents pit themselves against each other, sometimes with festive props to add colour and fun. If calm is what they need, mindful colouring activities can fill their time.



Share a Pot

Tackling frailty with soups, exercises and friends

01 / 2015 Start Date Replicated & Pandemic Ready ▶ Active

List of Share a Pot sites

- Admiralty Primary School
- Admiralty Zone 10 RN
- Agape Village
- All Saints Home
- Anglican Senior Centre (Tampines)
- Anglican Senior Centre (Woodlands)
- Anglican Senior Centre (Yishun)
- Blk 139 Residents' Lounge (Cashew)
- Blossom Seeds Limited Active Ageing Centre
- Bukit Panjang Zone 10 RC
- Care Corner Senior Activity Centre (WL 569A)
- Carelight Wellness Centre
- Chong Hua Tong Tou Teck Hwee
- Church of Our Lady Star of the Sea
- Church of St Anthony
- Church of St Vincent de Paul
- Covenant Evangelical Free Church (Woodlands)
- Evergreen Circle Seniors Activity Centre
- Fei Yue Senior Activity Centre (Senja)
- Goodlife! Telok Blangah
- Jalan Besar Bendemeer RC
- Kampung Kembangan Community Club
- Kebun Baru Community Club
- Lions Befrienders Active Ageing Centre @ Ang Mo Kio 318
- Marsiling RC Zone 3
- Meeting Point @ 128
- NTUC Health Active Ageing Hub (Kampung Admiralty)
- Pacific Activity Centre (Treegrove @ Woodlands)
- Pek Kio Community Club
- SilverCOVE Marsiling
- Sree Narayana Mission Home (Singapore)
- St Luke's ElderCare Centre
- Tampines Starlight RN
- Tembusu Senior Activity Centre
- THK Bedok Radiance Senior Activity Centre
- THK Chong Pang Wellness Centre
- Thye Hua Kwan Senior Activity Centre @ Cassia
- Victory Family Centre
- Wellness Kampung @ 115
- Wellness Kampung @ 260
- Wellness Kampung @ 765
- Whampoa Community Club
- Woodgrove Zone 1 RC
- Woodlands Galaxy Community Club
- Yew Tee Community Club

Inspired by the Asian culture of eating as a family, Share a Pot was designed to address frailty in the community by bringing the principles of good nutrition together with exercise. It attracts seniors to form local communities who come together regularly to eat, exercise, and grow stronger and closer together. Seniors are excited to share these 'feel-good experiences' with their friends and neighbours, becoming our biggest advocates. At the end of the day, our pot contains more than soup – it contains, more importantly, love and friendship.

Case study on page 54



The programme is inactive at the sites which are greyed out.

Singing Groups

Fine-tuning health with a community

05 / 2016

Start Date



Tested & Pandemic Ready



Active

Written by Elana Choo, 59 years old:

"In 2015, I was facing immense stress at work and had developed a host of health problems. I was drained both physically and mentally and was completely unable to lead a normal life. Therefore, I decided to quit my job and head for early retirement.

I started taking slow jogs in the park every morning and made two new friends. We chatted often and heard about a new community space at Yishun Block 115. There, I was greatly encouraged by the older residents whom I met. They have found health improvement, enjoyment, and meaning in life through participating in various activities.

From merely participating in the activities, I moved on to leading the theraband exercises. Together, we also formed a singing group. We practised regularly and performed weekly for the nursing homes and senior care centres in the neighbourhood. Over the years, after many singing rehearsals and participation in the various activities at the centre, I noticed a gradual improvement in both my mental and physical well-being.

In early 2018, I went with the singing team to Khoo Teck Puat Hospital for a New Year performance. When I was standing on the stage with my peers and facing hundreds of spectators without a moment of fear, I knew that my confidence had returned.

After that, I returned to complete my Nutrition Diploma Course, which I had stopped for two years, and eventually graduated. I am deeply grateful and would like to thank Wellness Kampung for the opportunities. I am especially grateful to my friends and community for encouraging me to accept different challenges. With their trust and support, I overcame the obstacles I was facing and regained my long-lost confidence in facing adversities."



Swimming Kaki

Making a splash

11 / 2019

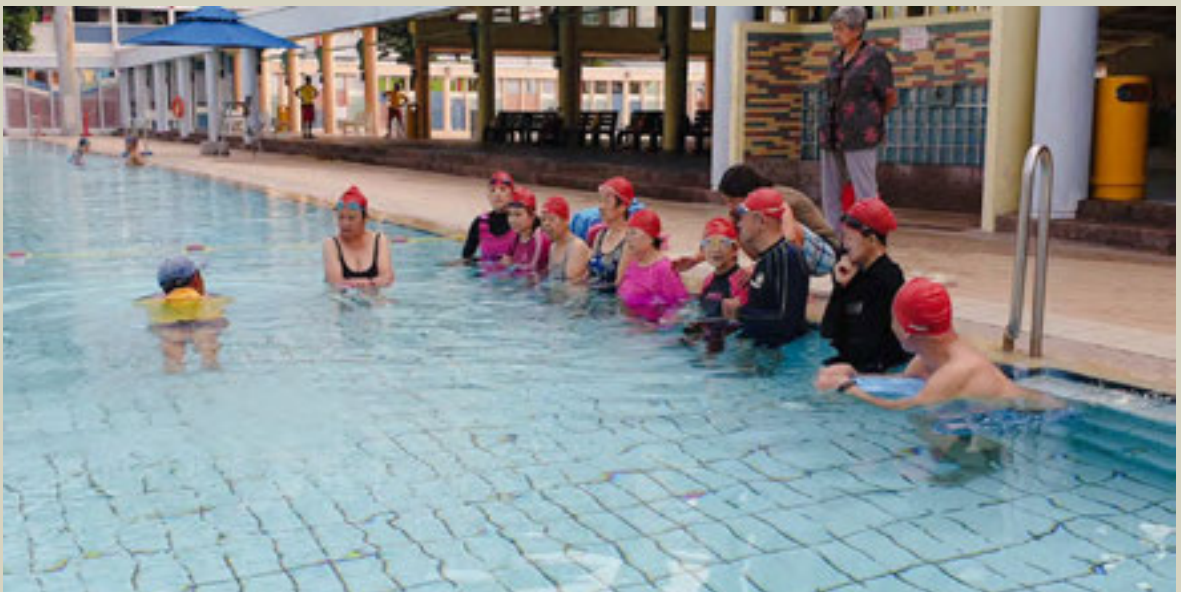
Start Date

●●●○●○ Tested

⏸ Paused



Once a week, the Swimming Kaki gather at Yishun Swimming Complex to cool down on a hot day with a swim. The project was started in 2019 by residents who wanted to learn to swim but could not find support for adult learners. SportSG reached out and offered support, providing 10 weeks of lessons and a venue for the group to practise swimming. After completing the lessons, the group continues to meet weekly in the pool for a splashing good time!



Walking Kaki

Walking for health and fitness

06 / 2021

Start Date



Ongoing & Pandemic Ready



Active

Amidst the pandemic in 2021, Walking Kaki was founded as an avenue for residents to get out of the house for some fresh air and light exercise. Since then, residents have been gathering weekly between 9am to 10am for a nice morning walk around the neighbourhood. Before they begin their walk, the resident leader for the week will gauge the group's fitness level and tailor their walk accordingly. Fitter residents will also keep a lookout for the safety of their peers and ensure that no one is left behind.





Community Garden Groups

Harvesting vegetables from community gardens

05 / 2016

Start Date



Ongoing & Pandemic Ready



Active

In 2016, green fingers transformed unused pots and plots of land into blooming community gardens. Being unfenced, these gardens are a shared space that fosters community spirit. The garden at Wellness Kampung@115 Chong Pang is supported by Nee Soon Town Council and features a wide pathway connecting the vegetable plots for wheelchair access.

In the wake of the Circuit Breaker in 2020, a group of three residents rolled up their sleeves and worked to revitalise a humble garden patch located outside the Wellness Kampung@260 in Nee Soon East. The group now meets every morning to tend to

the plot and share resources with neighbouring gardeners. The garden also draws the community in other ways. Neighbours and passers-by stop to take photos, chat with one another, and contribute plants and other materials which can be upcycled into decorative arches and paths. The expansive garden now boasts a dazzling variety of edible plants, including *kang kong* (water spinach), spring onions, curry leaves and papaya.

The gardeners won the Singapore National Parks Board (NParks) Community in Bloom Gold & Silver awards in 2021.



Repair Kaki

Repair to reduce waste

09 / 2017 Start Date Ongoing & Pandemic Ready Active

Inspired by the Sustainable Living Lab's Repair Kopitiam, Repair Kaki was started in 2017. Repair Kaki is a group of men who gather weekly to fix a range of faulty items such as printers, bicycles and wheelchairs. Being able to give faulty items a new lease of life not only promotes environmental sustainability, but also gives the group of residents a sense of satisfaction and purpose.

To date, the group has fixed a total of more than 800 items. As the men meet to do the repair work, they also build bonds and form a social network to discuss topics around their lives and health, encouraging and supporting one another to better care for their own health.







Arts & Crafts

Sewing projects that stitch the community together

05 / 2016

Start Date



Ongoing & Pandemic Ready



Paused

Patchwork, quilting, paper craft, sewing projects and stuffed toys are among the many hobby crafts that residents have been creating at the Wellness Kampung.

The Patchwork interest group was started in 2016 by two residents from Chong Pang, Mdm Goh Gek Hong, 59, and Mdm Ng Luck Choo, 61. Patchwork is a form of needlework that involves sewing different pieces of square, triangle and hexagon-shaped fabric together to form a larger design such as a quilt blanket. For three consecutive years (2017-2019), the interest group was invited to set up a booth at Khoo Teck Puat Hospital during 'Mini Medical School' to sell their patchwork. The patchwork proved to be extremely popular among the attendees. Profits made were then used to purchase basic necessities for needy residents in the community.

During the pandemic when many activities came to a standstill, Nee Soon Central residents Sharon, 70, and Alice, 75, were hard at work. They were sewing masks for the community after finding out that there was a temporary shortage of masks in Singapore. "We want to ensure the older members in the communities are protected from COVID-19 without depleting the limited surgical mask supplies for frontline healthcare workers," they said. Together, they made more than 1,000 masks within a month, which were then distributed to older residents and migrant workers in the community.



Chinese Painting & Calligraphy

Traditional Chinese painting and Chinese calligraphy interest groups

02 / 2017 Start Date Ongoing & Pandemic Ready ▶ Active

The Traditional Chinese Painting Group is a resident-led interest group that started in 2017. Traditional Chinese painting is done using a brush dipped in black ink or coloured pigments, usually on paper or silk. Residents from all walks of life come together weekly to practise the art of traditional Chinese painting and learn different techniques from one another. Paintings adorn the walls of the Wellness Kampung, showing off the various styles of the residents' masterpieces.

Also started in 2017 by residents is the Chinese Calligraphy Group. Chinese calligraphy is the stylised artistic writing of Chinese characters, which requires one to develop the virtue of patience and the skill of holding the brush with a steady hand. This resident-led group congregates weekly to learn new brush strokes and to hone their skills and gain mastery in Chinese calligraphy.



Language Classes

Resident-led language classes

05 / 2016 Start Date Ongoing Paused

Language and culture are complexly intertwined. Learning the Korean language can greatly enhance the experience and cultural insights gained from watching hours of soap operas, a favourite activity among our residents.

Language classes at the Wellness Kampung started as early as 2016, with residents volunteering to teach various languages to other residents keen on picking up a new language. To date, language classes for English, Mandarin and Hanyu Pinyin, Malay, Thai and Japanese have been conducted.

Naturally, communication and cultural tolerance flourish, and lifelong learning continues for seniors.



Reading Group

Read with children, draw in the parents

08 / 2019 Start Date Tested Active



What started as a reading with children activity in 2019 at the void deck of Block 436, Yishun Ave 11 attracted hovering parents and grandparents to the same space. A WhatsApp group chat kept in touch with the families of these children, allowing the Regional Team to share information about the evolving COVID-19 situation and enabled residents to share resources, knowledge and job opportunities with one another. The chat was also a means to get feedback directly from the community when the team could not go down physically due to COVID-19 restrictions.







Superhero Library

A community library of books and knick knacks

10 / 2020

Start Date



Tested & Pandemic Ready



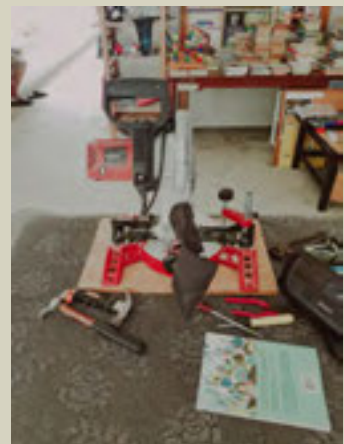
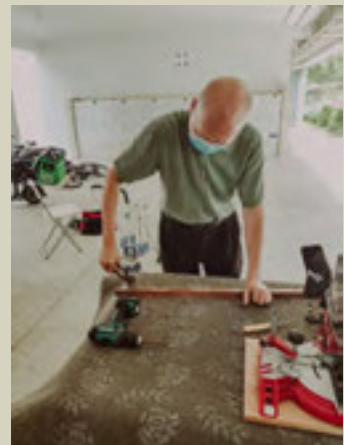
Active

The Yishun Superhero Library group is a ground-up initiative started by three uncles who came together with hopes of sharing the joy of reading with the community. The group is led by Mr Chia, a retiree and former product developer, together with his friends Mr Wong and Mr Azhar whom he met through a woodworking course. The trio worked hard with willing hearts and hands to build up the space at B1K 436 Yishun Avenue 11. This super team transformed old and discarded furniture into shelves and tables that held a unique assortment of books and gave the library its homely charm.

The library works on an honour system where anyone can pick up a book, take it home, and then return it later. Members of the community have even started donating other items, creating a sharing corner where anyone can pick up items such as pre-loved clothes and toys, and even food items such as cookies, sweets and fruits.

In recent months, the team has seen a growing interest from other community residents who are stepping forward to take ownership of the space, and doing their part to care for the library. This comes in the form of residents helping to keep the library space neat and tidy, and growing their super team to a total of six dedicated volunteers.

Case study on page 58



Toy Story Group

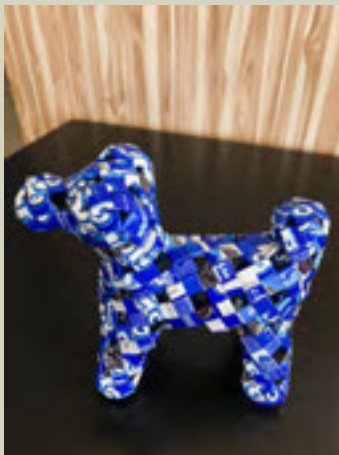
Toys stuffed with love

01 / 2019 Start Date Ongoing Paused

The Toy Story Group was established in 2019 by two talented volunteers, making it the community's first toy-making interest group. They teach handicraft skills such as making toys out of socks. Residents learn the basics of stitching and hemming to create the overall animal shape, before cotton is stuffed into the sock to make adorable-looking toys.

In 2020, they were commissioned to create toy animals that were gifted to healthcare workers for Nurses' Day celebrations.

The Toy Story Group also participates and sells their masterpieces at community bazaars and events.



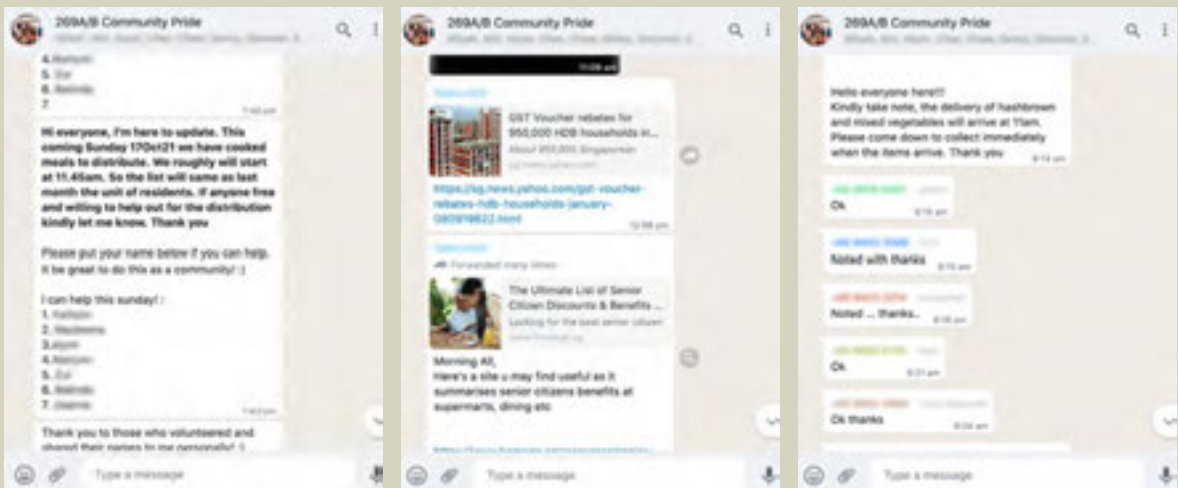
269A/B Community Pride

Chatter for better

03 / 2020 Start Date Ongoing & Pandemic Ready ▶ Active

Nee Soon East residents at blocks 269A and 269B have good reasons to be proud of their community. They formed a WhatsApp group chat called '269A/B Community Pride' to update one another about available resources and coordinate volunteer efforts for food distribution.

The group grew from 12 to over 80 members and has become a useful platform for building social capital. Akin to the chatter you hear along the corridors of their flats, the residents use the WhatsApp chat to send morning greetings, share timely information with one another, make offers and requests, and even support each other's businesses.

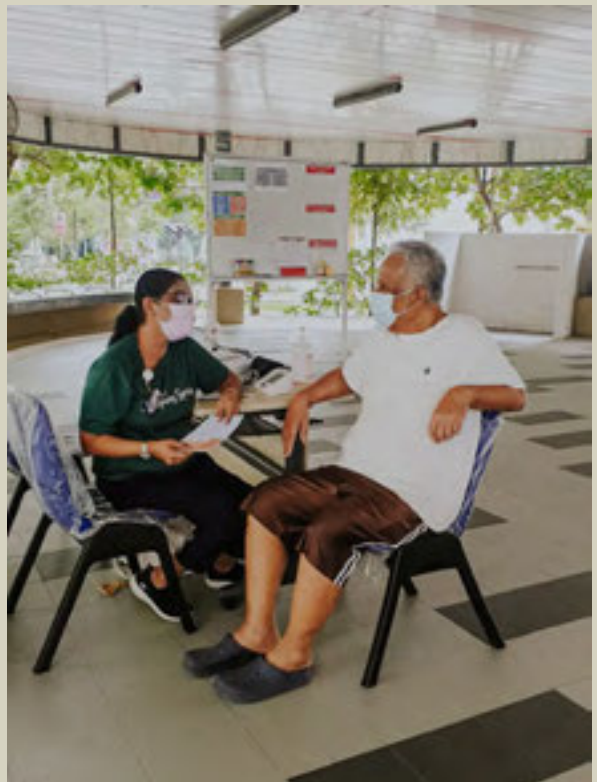


461A WhatsApp Community

Walk beside me and be my friend

11 / 2021 Start Date Ongoing & Pandemic Ready ▶ Active

Join the 'Community Group @ 461AB' chat to meet helpful and friendly neighbours. Here, they share anything and everything, including information, the latest happenings in the community and even value buys! From there, residents group together for bulk purchases to reap the shared savings. Regular gatherings together at these outings and other events perpetuate the cycle of mutual benefits.



Sembawang Blessing Corner

A blessing corner in the works

07 / 2021

Start Date



Tested & Pandemic Ready



Active

Not satisfied with just dreaming and talking, residents at 364A Sembawang Crescent started small. Little gifts left at a common space were quickly taken up, and these individual kind gestures snowballed into a generous outpouring. Soon, a dedicated space was needed. Therein birthed a prototype of a permanent void deck blessings corner.

Since July 2021, these enthusiastic residents have visited potential spaces and drawn up a floor plan with a proposal on the location and design. They even started sourcing for suitable shelving units and cabinets.

They have collectively come up with three ideas for this 'Blessing Corner' at Blk 364A, Sembawang Crescent:

1. A cupboard or shelf at the void deck for residents to exchange dry food and other items like books and toys
2. A community photo gallery to showcase photos from estate or block events
3. A wall sticker or mural to beautify the space and to draw the attention of neighbours to the void deck area

Discussions on logistical arrangements, potential challenges and continuous improvements were done over regular video chats. Currently, conversations with the authorities are ongoing to ensure that this project obtains the necessary approvals. The long-term goal is to create a safe and engaging space for the residents to support one another, connect over common interests and passions, and ultimately improve community cohesiveness. Now, just awaiting the blessings of the authorities.



Sembawang Cres WhatsApp Group

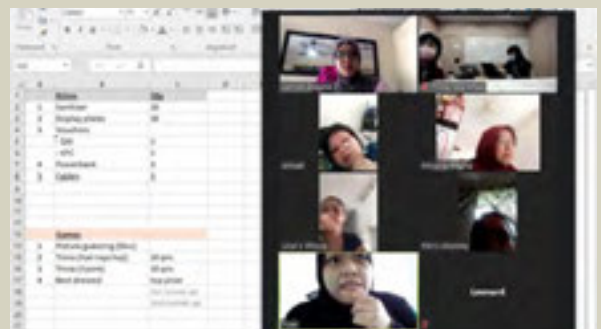
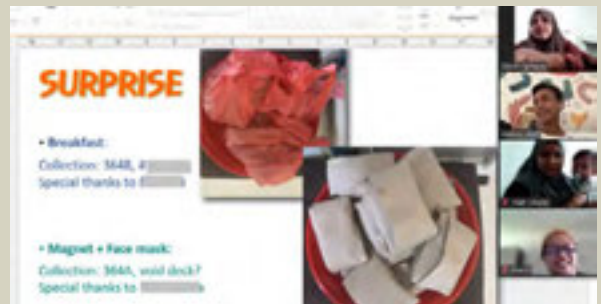
A virtual neighbourhood marketplace turned to reality

06 / 2021 Start Date Ongoing & Pandemic Ready ▶ Active

Residents living at three blocks in Sembawang Crescent are younger and tech-savvy. Many are willing to be connected with their neighbours on a community WhatsApp group chat. Through direct engagement with them and a survey conducted, Connectors were able to gather these like-minded residents to spark off casual conversations among their neighbours.

The WhatsApp chatter evolved to action, bringing them together to share food and information, make donations, and extend help to neighbours in need. Gaining momentum, community projects now start to surface. One resident started a mini 'blessing corner' at her block, where she placed items on top of the letterboxes for sharing with neighbours. A few other neighbours were encouraged by her and subsequently added on items at the blessing corner. 'Kampung spirit' was clearly displayed through these simple acts of kindness and sharing among neighbours.

The WhatsApp group chat is one way that Connectors support in connecting neighbours and forging bonds in the community.



Sembawang Friday Chitchat

Community-building from chat to action

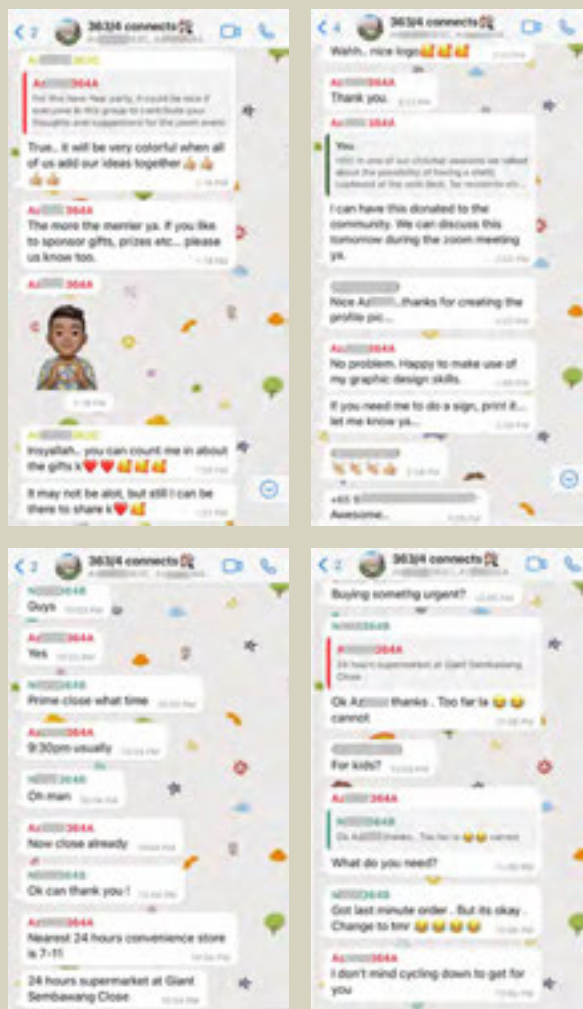
06 / 2020 Start Date Tested & Pandemic Ready Active

Since June 2020, residents at identified areas in Sembawang have been engaging with a team of Connectors. Via a health and asset survey, many of them shared their strengths and indicated that they were willing to be involved should the need arise.

When the COVID-19 pandemic struck, Connectors were able to rally these residents to do more for, and with their neighbours and community. Holding regular Zoom chats every Friday, the residents contributed ideas and went on to lead these sessions, with facilitation by the Connectors.

Project and event plans started to unfold at these meetings. A clear plan to build a 'blessing corner' at the void deck for residents to share items such as dry food, books and toys was generated. Flea markets were also organised. Subsequently, they even held a virtual Hari Raya and National Day celebration!

Connectors were able to help the residents recognise their own strengths and mobilise them to build their dreams within their communities in an organic manner. All these paint a picture of residents thriving in the face of adversity.



Wellness on Wheels (WOW)

Encouraging community involvement through a mobile pushcart

11 / 2021 Start Date Tested Active

The cart project, which has been lovingly dubbed 'Wellness on Wheels (WOW)', started as a pilot to create opportunities for increased community involvement and visibility.

The project was launched under Yishun Health's Rapid Prototyping Grant. It began on 29 November 2021, with residents designing and putting together a purpose-built cart. This cart has created a third space around which residents gather and organise activities for themselves.

It also serves as a mobile Community Health Post. Despite occasional unexpected disruptions such as void deck cleaning, the team maintained a regular and reliable presence. More residents have been signing up and the growth in participation has been encouraging.

Moving forward, the team hopes to mobilise residents to expand the use of the pushcart and its space according to their needs.



Meet The Team

In addition to the efforts of residents and partners, the work of our staff has been pivotal to shaping the development of this community.

Thank you to the team who shows we CAN - Clinicians, Connectors, Allied Health Professionals, Administrators, and Nurses – by working alongside residents in our community to care, support and inspire on a daily basis.

A

An Ning
Ang Pey Ling
Ang Siew Beng
Ang Yan Hoon
Azizah Bte Mohd Yusoff

B

Baey Keng Chew
Bavani D/O Elanggovan
Beh, Bernice
Boh Toon Li
Buk Mei Ping, Petunia

C

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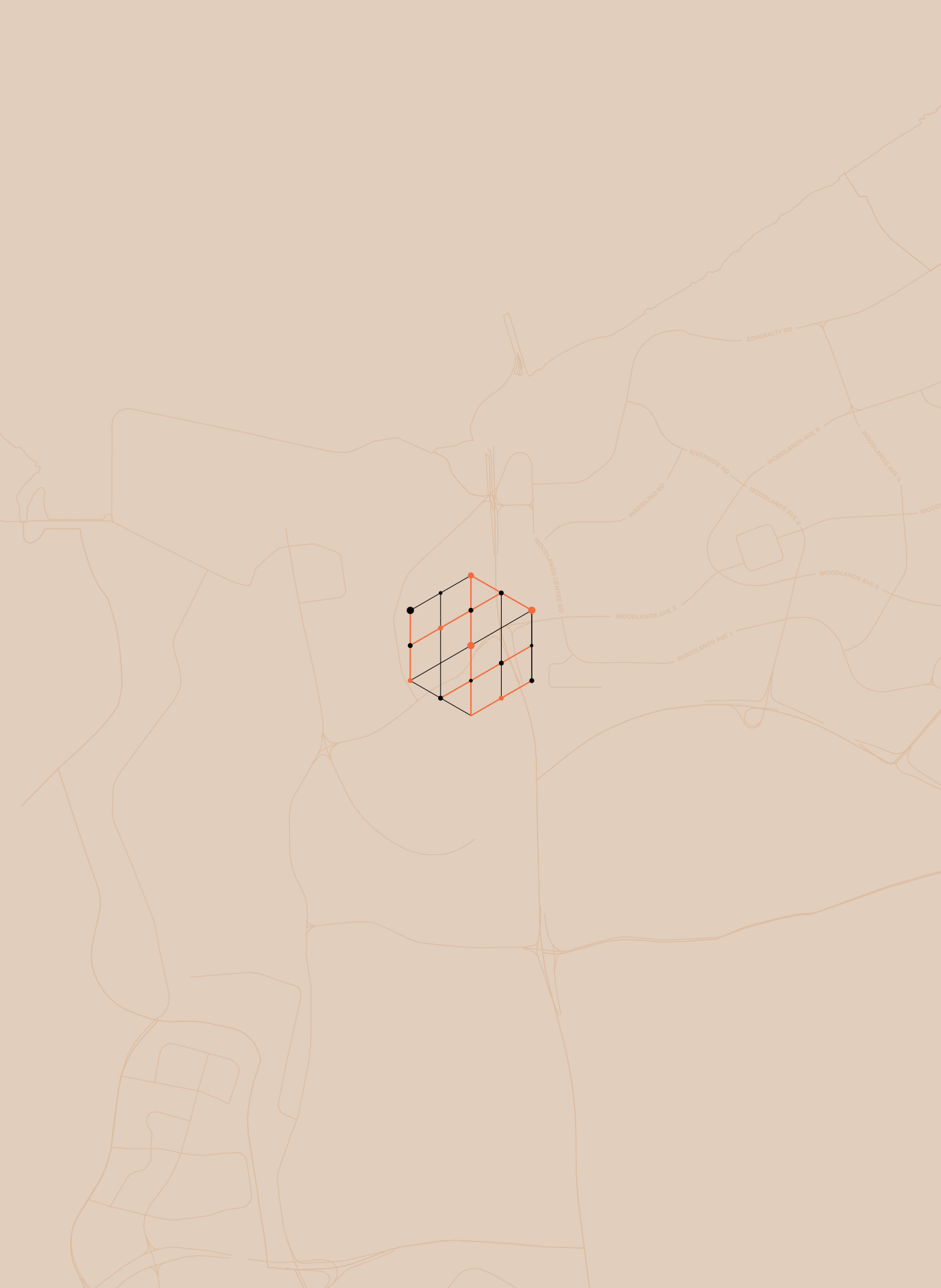
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