



Seniors taking part in a group exercise class in Toa Payoh. In the five-year Health4All@Toa Payoh study launched in March by Tan Tock Seng Hospital, researchers want to understand how non-medical factors such as daily activities, social networks and living environments affect the residents' health. ST PHOTO: KELVIN CHNG

More studies being done to help S'pore residents take charge of their health

Research includes looking into factors like social networks, lifestyles, caregiving

Joyce Teo
Senior Health Correspondent

In Toa Payoh, surveyors are making house visits, spending up to 45 minutes in each home to gather information about residents' health and lifestyles.

The questions range from what they do for a living to how many friends and relatives they connect with at least once a month, and whether they have caregiving responsibilities. All the answers feed into a five-year research programme aimed at improving residents' health outcomes.

The Health4All@Toa Payoh study by the Department of Epidemiology and Preventive Medicine at Tan Tock Seng Hospital (TTSH) was launched in March. It has recruited about half of its target of 4,000 participants aged between 35 and 70.

In this longitudinal study, participants – Singapore citizens or permanent residents residing in Toa Payoh – will be followed over five years through annual online surveys. Interviews and focus group discussions will also be held with groups of participants.

Researchers want to understand how non-medical factors, such as daily activities, social networks and living environments, affect the residents' health. Such factors, known as the social determinants of health, are widely believed to contribute to 80 per cent of health outcomes, while medical care accounts for an estimated 20 per cent.

The data collected will be used to design personalised health solutions for residents.

The study comes as Singapore



A Healthier SG ambassador with a resident in East Coast. The Healthier SG programme, launched in July 2023, focuses on preventive care by getting residents to enrol with a family doctor. PHOTO: LIANHE ZAOBAO

pivots from traditional patient-centred care to a resident-centred approach. This is to help the population take charge of their health so that they can spend more years in good health as they age.

A key move was in July 2023, when Singapore launched Healthier SG to get residents to enrol with a family doctor and focus on preventive care.

Professor Teo Yik Ying, vice-president for global health and dean of the Saw Swee Hock School of Public Health at NUS, described Healthier SG as the first major reform of Singapore's health system. Rather than focusing solely on treating the sick, the programme aims to help the population stay healthy.

But designing solutions to achieve that goal – which could include getting the community to form online networks – requires a deeper understanding of people's lives, said Associate Professor An-

gela Chow, the programme director of Health4All@Toa Payoh.

What is lacking now is the understanding of how and what type of social networks influence health, said the senior consultant at TTSH's Department of Epidemiology and Preventive Medicine.

"How can we leverage our social networks to help us improve our health, and especially using community resources to do that?" she said.

Her department head, Adjunct Assistant Professor Lim Wei-Yen, who is also the study's principal investigator, noted that many health studies capture only traditional risk factors such as physical activity, diet and smoking.

However, people's lived environments, life circumstances and social networks can shape not only their health behaviours, but also their health literacy, he said.

Knowing how significant life events like bereavement or divorce

can influence a person's well-being and health will enable the team to find ways of supporting residents and identifying opportunities for early intervention, he added.

TTSH is part of the National Healthcare Group (NHG), one of the three clusters that manage Singapore's public healthcare system.

Prof Chow said the lessons gleaned from various studies of different population groups in Singapore are meant to be shared across the healthcare clusters so that successful strategies in one region can be scaled up and tested in other areas.

If another research team discovers an effective approach, the NHG team will also want to see how it can pilot the approach for the population under its care, she said.

Each of the three healthcare clusters covers a specific geographic area. The central region is

managed by NHG, the western region by the National University Health System (NUHS), and the eastern region by Singapore Health Services (SingHealth).

Each cluster – expected to look after up to 1.5 million people – gets paid for each resident, regardless of whether the person is healthy or not.

At SingHealth, its population health research includes an ongoing four-year study to understand residents' sentiments on the various aspects of Healthier SG, with the goal of improving its implementation.

In 2023, some 5,000 participants around Singapore were asked about their beliefs and attitudes towards enrolling in Healthier SG and their expectations. SingHealth then surveyed another group of more than 2,000 participants in the eastern region in 2024 about their enrolment status and their experience with Healthier SG.

A key finding was that residents were unsure about the community resources that their general practitioners (GPs) could refer them to, said Associate Professor Low Lian Leng, director of the SingHealth Centre for Population Health Research and Implementation.

"Our community nurses and well-being coordinators now work with the GPs so that they can refer their patients to us, and we will help them to navigate the community services required," he added.

SingHealth plans to continue engaging different groups to understand their views on other aspects of Healthier SG.

In the west, NUS is conducting the second phase of the Baseline Study for Health District @ Queenstown to evaluate new factors such as financial literacy and caregiving.

The study's first phase, completed in the first half of 2024, involved over 5,000 Queenstown residents aged 21 to 102. It discovered that about two-thirds of the respondents above 65 years old did not actively participate in activities such as exercising, volunteering and learning, among other findings.

A range of initiatives and programmes have been introduced in Queenstown since the health district pilot – spearheaded by NUS, NUHS and the Housing Board – was launched in October 2021 to promote healthy longevity.

A recent initiative was the Happy Village @ Mei Ling, a shared community space at Block 160 Mei Ling Street that officially opened in March. Residents can receive health counselling, join exercise classes and attend monthly health talks and workshops.

With three healthcare clusters operating autonomously, there is bound to be some variations in their operations.

A clear disadvantage of such a varied approach is the confusion it may cause for the average Singaporean, who may not be aware that some programmes are unique to specific clusters, said Prof Teo.

But the upside is that having a variety of programmes provides an opportunity for the country to test out different strategies to find out what works best, he said.

A system is then needed to test and evaluate the different approaches – scaling those that are effective and discontinuing others that consistently underdeliver, he added.

"Health is multifaceted and affected by a range of factors, and it is not wrong that different clusters may prioritise different perspectives or determinants," he said. "However, we should ultimately have one single narrative of population health that Singapore wishes to have its people understand, and ensure the clusters conform to this."

Singapore is among the few countries in the world which are finding solutions to rapid demographic transitions and escalating healthcare costs, said Prof Teo.

joycetee@sph.com.sg