

Teo Yik Ying

Picture two workers in Singapore. Both spend decades at their jobs, clocking long hours and juggling family responsibilities.

One reaches retirement overweight, diabetic, and exhausted, having skipped regular check-ups and carried years of stress. The other leaves the workforce healthier than when they started, having benefitted from regular health screenings at work, subsidised healthy meals in the canteen, access to mental health support, and a workplace culture that valued rest and balance.

The difference between these two stories is not luck or genetics, but whether the workplace was intentionally designed to promote health and well-being.

This is precisely the opportunity before us. At the National Day Rally, Prime Minister Lawrence Wong declared that Singapore must aspire to be a "we-first" society, where institutions, businesses and communities pursue success together in ways that help all Singaporeans thrive. This vision reframes public policy around collective well-being as a core national priority.

In practice, this ethos already underpins several recent initiatives.

Age Well SG was launched as a coordinated strategy led by the Ministry of Health (MOH) alongside the ministries of National Development and Transport. It rethinks neighbourhoods, transport, and home environments through a whole-of-society lens that lets seniors live independently, stay socially connected, and receive care in the community.

Grow Well SG likewise brings together MOH with the ministries of Education and Social and Family Development to build healthy habits in children and adolescents, mobilising schools, pre-schools, health providers, and community partners.

Together with Healthier SG, these initiatives sketch a life course approach to health promotion and disease prevention, from the earliest years to the sunset years.

But the life course remains incomplete if the decades spent in the workplace are left out of this national reimagining of health.

WHY THE WORKPLACE MATTERS

After all, the workplace is where most adults spend the majority of their waking lives. Consider the maths: The average Singaporean lives to 85. With retirement at 65, that amounts to about 40 years spent working. Assuming 16 waking hours a day, with half of those hours at work, nearly a third of one's waking life would have been spent in the workplace.

That fraction reveals a huge untapped opportunity.

If health promotion and disease prevention are to be core foundations of Singapore's health

Your office could be Singapore's next big health intervention

Helping people become healthier when they work should be the next priority for Singapore public health.



The vision of a Singapore where decades of work do not leave people burned out and diabetic, but healthier, fitter, and more resilient may sound radical, even quixotic. But Singapore has a track record of defying sceptics by building policy architectures that are both visionary and implementable, says the writer. PHOTO: LIANHE ZAOBAO

and vaccination.

But today, as the population ages, chronic disease patterns evolve, and health promotion paradigms shift, it is time to refresh and reimagine that movement into a whole-of-society vision, Work Well SG.

Total WSH was fundamentally about protection, guarding workers against injury, occupational hazards, and lifestyle risks that threatened safety. Work Well SG, by contrast, must be about promotion, designing the workplace as a positive, proactive environment

that strengthens well-being, fosters healthier habits, and builds resilience over time. This is not simply a continuation of where we started, but an evolution in ambition.

WHAT WORK WELL SG COULD LOOK LIKE

The rationale is straightforward. The workplace is one of the few environments where adults can be systematically reached. It is structured, bounded, and governed by rules, and these very features create unique

opportunities to embed health into daily routines, all of which fall into three broad pillars.

The first is around health access and prevention, covering screenings, vaccinations, and preventive services.

Health screenings are a core pillar of Healthier SG, yet uptake is often held back by inertia and inconvenience. Offering screenings for blood pressure, cholesterol, glucose, and body mass index at the workplace would sharply increase participation. Coupled with referral pathways to general

practitioners (GPs), this would translate early detection into early management.

Vaccination is another clear opportunity. Every flu season imposes real productivity costs through absenteeism and presenteeism. Employers could organise subsidised or even free vaccination drives onsite, extending not just to influenza but also to other recommended vaccines like pneumococcal or hepatitis B, depending on age and occupational risk.

At the Saw Swee Hock School of Public Health, we bring clinical operators to the school premises each year so staff can receive free influenza vaccinations, and the uptake has been consistently strong.

Even preventive dental care, often overlooked, could be folded in through subsidised cleanings and oral health education. Together, these measures would make prevention routine, not optional.

The second pillar is healthy environments, shaping the daily choices that accumulate over a working life.

Food and nutrition matter: Staff canteens, pantries and vending machines shape daily dietary choices. The Health Promotion Board already provides clear dietary guidelines, portion control standards, and "Healthier Choice" labels. Employers who adopt these standards, subsidise healthier options, or integrate them into food contracts will make healthier choices accessible, convenient and affordable.

Beyond diet, physical activity can also be built into the workday through active design of offices, flexible breaks, or partnerships with fitness providers. A healthy workplace environment is one that nudges and normalises better choices.

The third pillar is workplace culture and mental well-being. Stress, burnout, and mental health conditions are rising globally, and Singapore is no exception. A Work Well SG vision must embed practices that value rest, encourage realistic workloads, and treat seeking help as a mark of responsibility rather than weakness.

Confidential counselling services, regular workload reviews, and visible leadership support can help build a culture where mental health is treated on a par with physical health. This is critical to sustaining a resilient and productive workforce.

One of the strongest arguments for Work Well SG is how the workplace reaches populations often missed by national campaigns.

Healthier SG deliberately targets those aged 40 and above, relying on GP enrolment and community touchpoints. But workplaces include younger adults, contract staff, and even gig workers, many of whom may be disengaged from formal health outreach.

By broadening workplace offerings to cover all employees, a Work Well SG approach can close gaps and capture the

CONTINUED ON PAGE B2

Overcoming barriers to Work Well SG

FROM B1

“unconverted and unmotivated” who might otherwise slip through the cracks.

MAKING WORK WELL SG WORK ACROSS DIVERSE WORKPLACES

As compelling as the vision is, implementing Work Well SG will not be straightforward.

The first barrier is heterogeneity. While I have used the phrases work and workplace above in a generic sense, the reality is that not all work and workplaces are the same.

The wellness needs of an office-bound professional differ vastly from those of a construction worker exposed to physical hazards. Large multinationals with HR teams and in-house canteens can

implement sophisticated programmes, while small and medium-sized enterprises (SMEs) with 10 employees may struggle. Full-time employees have different entitlements and time availability from contract, part-time, or gig workers.

Beyond operational differences, there is also variation in employer incentives and capacity.

Many employers face tight margins and uncertain returns on preventive health investment, particularly when employees frequently change jobs. For SMEs, wellness programmes may look like discretionary expenses, while employers of gig workers may feel no obligation to invest at all.

There are real privacy and trust barriers too. Employees may fear that health data collected at the workplace could influence career progression. Without strict data

governance, transparency, and clear separation of health records from personnel decisions, such programmes risk being perceived as surveillance rather than care.

Moreover, small employers often lack the expertise to design programmes or the bargaining power to negotiate with providers. Pilots that look successful in well-resourced firms may be hard to replicate in micro-enterprises without subsidies, shared services, or sectoral intermediaries.

These structural hurdles mean that policy must think not only about what an ideal Work Well SG looks like, but how to make it implementable across an economy of diverse workplaces.

NEXT STEPS

Achieving this vision will require many steps to be taken. First, Work Well SG can enrol employers into a national compact, similar to Healthier SG’s enrolment of residents and GPs.

Companies could commit to a basic set of services across the three pillars, with tiered

recognition for those who go further. Because companies investing in workplace health are directly advancing Healthier SG’s objectives, the Government could consider co-funding efforts through matching grants, subsidies, and tax deductions, or provide technical assistance.

A tiered co-funding model, scaled by the level of employer investment, would embody a principle of shared responsibility and shared benefits, ensuring the costs of prevention are not borne by employers alone while the wider savings in healthcare costs and productivity accrue to society as a whole.

Insurers can also be drawn in. Corporate insurers and group health underwriters benefit directly from healthier insured pools, and can be incentivised to offer premium discounts, rebates, or value-added services for employers who meet Work Well SG benchmarks. In turn, claims data can identify which interventions reduce absenteeism and medical costs, creating a virtuous circle of value-driven and evidence-based investments.

Implementation must also be modular to account for heterogeneity. Sector-specific playbooks can tailor standards for industries as varied as F&B, logistics, office work, construction, healthcare, and SME contexts. Shared service models involving community health provider networks could offer pooled screening for SMEs, or national mobile vaccination fleets could be provided for shift workers, which can reduce costs and increase access.

Above all, data governance must be safeguarded with clear rules on how health data will be used, and the assurance that only aggregated, anonymised metrics are shared with employers. Clear legislative and contractual protections will be needed, especially when incentives from insurers or public agencies are tied to outcomes.

AN AMBITIOUS VISION

The vision may sound radical, even quixotic: a Singapore where decades of work do not leave people burned out and diabetic,

but healthier, fitter, and more resilient. Yet Singapore has a track record of defying sceptics by building policy architectures that are both visionary and implementable.

We have already extended this ethos into health and well-being through Healthier SG, Age Well SG, and Grow Well SG. Extending this to Work Well SG completes the life course approach.

The challenges of formulating Work Well SG are formidable, but as the White Paper on Singapore’s response to Covid-19 reminded us, we should not let perfect be the enemy of good. Policy ambition should not be paralysed by concerns about uneven implementation or enforcement.

If Singapore succeeds here, we may become the first country in the world to show that the workplace is not only a place for wealth creation, but also for health creation.

• Teo Yik Ying is vice-president for global health and dean of the Saw Swee Hock School of Public Health at the National University of Singapore.