



We need to close the gap between Singapore's mental health goals and reality

There's greater awareness about well-being and support services, but this must translate more meaningfully into the everyday lives of Singaporeans.

Anthea Ong and Rayner Tan

"How is a Grab driver supposed to take a mental health break without losing his income?" This question by a participant in a recent public consultation by SG Mental Health Matters lingered with organisers long after the engagement.

Singapore has spent the better part of the last decade trying to convince people that mental health matters. In many ways, that effort has succeeded. Mental health is now discussed far more openly in Singapore than before.

This shift matters. It reflects growing recognition that mental well-being is not simply a private issue, but a societal one.

Yet SG Mental Health Matters' consultation with independent research company, OPPI, on the National Mental Health and Well-Being Strategy suggests that many Singaporeans – such as the Grab driver – may now be asking a different question altogether.

Not whether mental health matters. But whether the growing number of policies, programmes and campaigns are translating meaningfully into everyday life.

Singapore's next mental health challenge may no longer be awareness alone, but the growing gap between mental health goals and lived experience.

THE FEELINGS ON THE GROUND

True, schools have introduced well-being initiatives. Workplaces increasingly speak the language of psychological safety and burnout. Mental health support is being expanded across polyclinics, GP clinics and community settings.

The national strategy has brought greater coordination, investment and policy attention to the issue. The establishment of the National Mental Health Office under the Ministry of Health marks an important milestone in recognising mental well-being as a national priority.

And indeed, many respondents in the consultation broadly supported the direction of Singapore's mental health efforts and recognised the investments being made.

At the same time, though, many also described feeling emotionally exhausted, uncertain about the future, and unconvinced that everyday environments – workplaces, schools, families and online spaces – consistently feel psychologically safe or supportive.

One respondent captured this tension bluntly: "Positive well-being engagement does not negate work stressors and demands."

Most said they would be willing to seek mental health support through GPs or polyclinics. Yet only slightly over half trusted that they would receive appropriate support. This hesitation was about whether they would receive help in time, and whether reaching out felt safe.

Respondents pointed to issues like long waits for professional care, to past experiences of being dismissed or invalidated for their mental health challenges, and to fears about privacy and judgment, with several saying they would come forward only if support were anonymous.

Many recognised that workplaces were increasingly organising well-being initiatives. Yet fewer than half of working respondents felt it had become easier to discuss their own mental health challenges at work without fear of negative consequences.

These are not questions about the availability of mental health services. People know the services are there. These questions are about trust, work culture, caregiving realities, economic pressures and whether support feels realistically reachable within the conditions of everyday life.

Taken together, the consultation points to a gap that promoting awareness alone has not closed. Today, closing that gap is less about adding more services than about tailoring our efforts towards ensuring that services are accessible and can meaningfully promote change in ways that allow Singaporeans to flourish.

MOVING BEYOND CRISIS RESPONSE

At the recent WorkWell Leaders Awards and Gala dinner, Coordinating Minister for Social Policies and Health Minister Ong Ye Kung spoke about the need to "go further upstream" and rebalance mental health efforts towards prevention rather than

crisis response.

Singapore's current strategy already includes many upstream efforts: community support teams, emotional support training, school and workplace well-being initiatives, and expanding primary care mental health support.

But support and prevention alone may no longer be enough. We may now need to become equally intentional about building well-being which asks a harder question: What conditions allow people to genuinely flourish, feel safe, connected, capable and heard in the environments they inhabit every day?

It is more about what shapes daily life before distress emerges. The gap, in practice, often looks like this:

A manager may understand burnout conceptually, but still not know how to respond safely when an employee discloses distress.

A parent may recognise anxiety in theory, but struggle to have emotionally open conversations at home.

A workplace may provide mental health benefits and services while employees continue fearing professional consequences for speaking honestly about it.

A young person may know the language of mental health from social media, yet still feel isolated, overwhelmed or unable to seek help safely.

Today, with the national strategy's tiered model of care, mental health is understood in terms of recognising distress, reducing stigma, knowing referral pathways and identifying when someone may need help. These remain important.

But that is only one part of the equation. Indeed, the national strategy is nominally intentional about separating "mental health" from "well-being"; the former tends to refer to the absence of negative states of health, and the latter, the presence of positive states.

This is an important distinction because the evidence is clear that one can live with a mental disorder, yet experience high levels of well-being.

That is why developing well-being remains a critical area of focus for the national strategy. This means building individual capabilities across life stages as well as fostering environments that allow people to thrive.

TOWARDS TOTAL HEALTH LITERACY

What needs to happen for schools

to spark joy in learning and life – and not become places where one in three young people reports internalising depression, loneliness and anxiety?

What does it truly mean for workplaces to become sources of well-being, trust and sustainable growth, instead of causes of burnout and anxiety in one in three workers?

What allows families to feel emotionally safe, connected and hopeful together – and not merely function under pressure, especially when 65 per cent of parents with young children with developmental needs require formal mental health or psychosocial support?

In this sense, mental health literacy must increasingly involve enabling people to learn how to regulate emotions, reframe challenges, manage stress and energy sustainably, recover from setbacks, navigate conflict, build healthier relationships, ask for help without shame, support others safely, and cultivate meaning, perspective and gratitude alongside achievement and performance.

For example, we teach kids to perform – even in physical education (PE) classes. What if PE periods become total health education lessons instead to teach our young ones energy management, emotional regulation and recovery techniques as a well-being standard across all schools?

Similarly, we demand productivity from managers and workers. What if we also demand rest as part of sustained performance as a national workplace well-being standard and new economic strategy?

Indeed, the deeper national question may therefore no longer simply be: How do we reduce mental health prevalence? It must increasingly be: How do we build a society more capable of well-being?

Perhaps this is the next frontier of Singapore's mental health journey: not only expanding services or reducing distress, important as these remain, but also becoming more deliberately developmental as a society so people and institutions do not merely cope – but flourish.

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The next frontier of Singapore's mental health journey is not only expanding services or reducing distress, important as these remain, but also becoming more deliberately developmental as a society so people and institutions do not merely cope – but flourish, say the writers. PHOTO: ST FILE