International Longevity Centre - Singapore

A PROFILE OF OLDER MEN AND OLDER WOMEN IN SINGAPORE 2011





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Preface

How are individual older people faring in this aging society?

This report "A Profile of Older Men and Women in Singapore 2011" prepared by the International Longevity Center Singapore contributes to examining the socio-economic impact of population aging; household size and living arrangements; health; and economic status.

It is organized into five sections: "The Aging Population", "Living Arrangements", "Health Status", "Mental Health" and "Economic Status".

This report is a compilation of data from the Singapore Ministry of Community Development, Youth and Sports (MCYS) Social Isolation, Health and Lifestyles Survey (SIHLS) 2009, Singapore Department of Statistics Census of Population 2000 and 2010; Singapore Registry of Births and Deaths 2006; Singapore Department of Statistics General Household Survey 2005; Singapore Ministry of Manpower Report on the Labor Force in Singapore 2010; and the Population Division, Department of Economic and Social Affairs of the United Nations Secretariat along with brief analyses of key patterns.

ILC-Singapore hopes this information will be helpful in understanding the implications of population aging in Singapore and in general. We welcome questions and suggestions for future editions of this report.

We would like to acknowledge the funding and support of the Tsao Foundation Aging Research Initiative at NUS for the writing of this report. We would also like to acknowledge the Ministry of Community Development, Youth and Sports (MCYS) for allowing the use of the Social Isolation, Health and Lifestyles Survey (SIHLS) 2009 data.

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(Tsao Foundation, UEN 199 302 114W).

I. The Aging Population

From Aging to Aged

In 2000, Singapore became an aging society and, since last year, the speed of aging is projected to exceed countries like South Korea and the United Kingdom, which have seen a rapid advance in age.

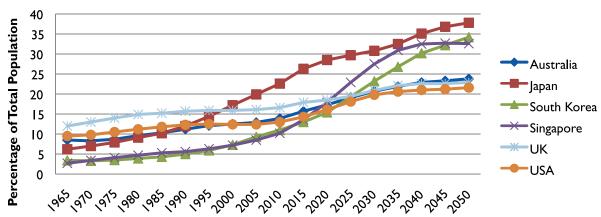
The World Health Organization defines an aged society as one where 14%, or more, of the population is aged 65 years and above. In less than five years, Singapore is forecast to become an aged society. (See Graph 1-1)

A first world nation today, Singapore has made rapid advancements since World War II, when it was a young society with only 2.5% of the population aged 65 and above.

Between 1965 and 2010, as the country developed into an economic powerhouse, Singapore's population began graying at a speed that matched many other industrialized economies. As a result, by 2000, with at least 7% of its population aged 65 and above, Singapore had become an aging society. In 2010, the resident population aged 65 and above was 339,453 (Singapore Census of Population, 2010).

However, from 2011 onwards, Singapore's population is expected to age at a faster rate than that of such countries as Australia, South Korea, the U.K. and the U.S.A.

I-I. Population Aging Trends,% of Total Population Aged 65 and Above,Medium Variant, International Comparison

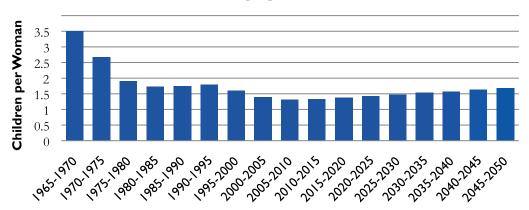


Source: Population Division, Department of Economic and Social Affairs of the United Nations Secretariat, World Population Prospects: The 2008 Revision

Fewer Babies and a Greater Number of Older Persons

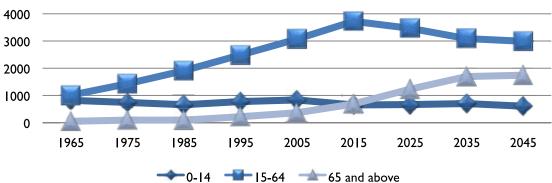
One of the main reasons Singaporean society is aging so rapidly is the declining number of births each year as men and women choose to remain single or marry later and have fewer babies. So, at one end of the spectrum, fewer babies are being born and, at the other end, the proportion of older people is growing. (See Graphs I-2 and I-3)

I-2.Trends in Total Fertility in Singapore



Source: Population Division, Department of Economic and Social Affairs of the United Nations Secretariat, World Population Prospects: The 2008 Revision

I-3. Trends in the Age Group Composition in Singapore



Source: Population Division, Department of Economic and Social Affairs of the United Nations Secretariat, World Population Prospects: The 2008 Revision

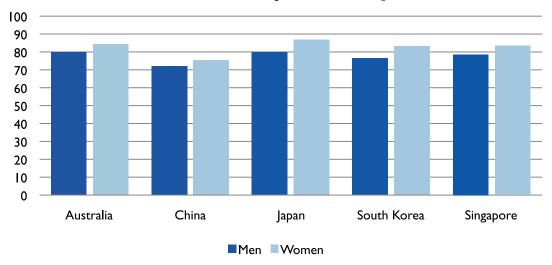
Living Longer and Increases in Life Expectancy

Following in the footsteps of rich, industrialized nations in the Asia Pacific region such as Australia, China, Japan and South Korea, people in Singapore are living longer lives thanks to improvements in nutrition, living conditions and public health in tandem with Singapore's rapid economic growth and prosperity. Advances in medical and pharmacological technology have also led to dramatic changes in the nature of prevalent diseases.

As a prosperous industrialized Asian nation, the life expectancy in Singapore now equals that of Korea and follows closely behind Japan, which has the world's highest life expectancy. (See Graph 1-4)

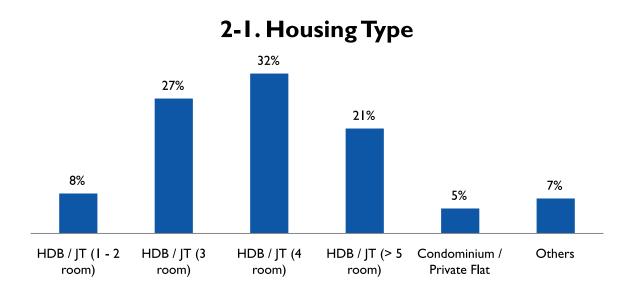
While both men and women are leading longer lives in Singapore, women are living longer than men, with their average life expectancy at 82.8 years, compared to the average life expectancy of men at 77.9 years.

I-4. Life Expectancy at Birth: International Comparison, by Gender

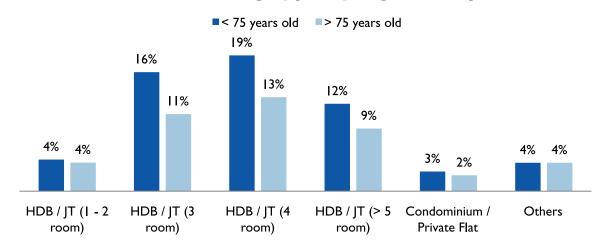


2. Living Arrangements

In space-constrained Singapore where high-density living is prevalent, older persons, whether aged above or below 75, tend to live in the same type of housing: 3-room or 4-room public housing flats built by the Housing Development Board (HDB). Unlike in other industrialized countries, the elderly in Singapore tend not to move into smaller housing later in life. (See Graphs 2-1, 2-2)



2-2. Housing Type by Age Group



Notes: For Graphs 2-1 and 2-2, n = 5,000

Source: MCYS SIHLS 2009

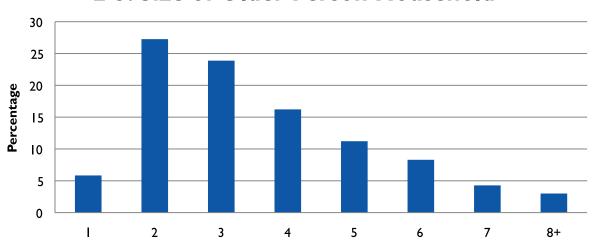
Small Household Size is the Norm

A small household size is the norm for most older persons in Singapore, with 27% living in two-person households and 24% living in three-person households (See Graph 2-3).

Correspondingly, the number of adult children living together with their parents is low. 54% of older persons live together with one child, while 14% of older persons live together with two children.

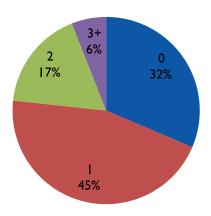
When segmented by gender, more older women tend to live with their children compared to older men. In older female households, 62% of older women live together with one child, while 22% live alone. In contrast, in older men households, 45% of older men live together with one child, while 32% live alone. (See Graphs 2-4, 2-5)

2-3. Size of Older Person Household

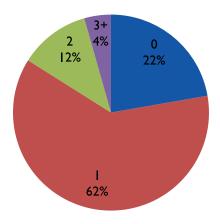


Notes: For Graph 2-3, n = 5,000 Source: MCYS SIHLS 2009

2-4. Number of Older Children in an Older Male Household



2-5. Number of Older Children in an Older Female Household



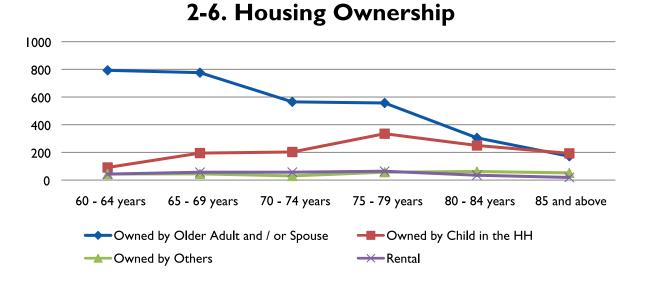
Notes: For Graph 2-4, n = 2,159. For Graph 2-5, n = 2,548

Source: MCYS SIHLS 2009

Older Persons Have More Say in Living Arrangements If They Own the Home

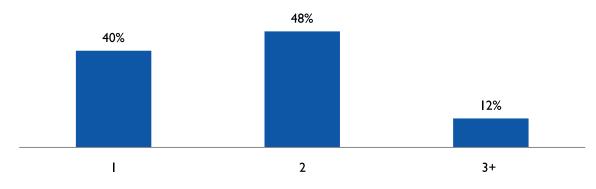
Preferred living arrangements tend to be determined by who owns the home and by default is the head of household (HDB 2003 and HDB 2008). In Singapore, most older persons own their homes, either through sole ownership or joint ownership with their spouse.

While home ownership by the elderly tends to decrease with age, the oldest old, or, rather, those who are above 85 years in age, are equally likely to live in their own homes as they are to live in homes owned by their children. (See Graph 2-6)



A large majority of older persons who own their own homes tend to live with their children. Some 48% of households owned by older people consist of two generations living together – an older person and adult children, based on data from the Ministry of Community Development, Youth and Sports' (MCYS) Social Isolation, Health and Lifestyles Survey (SIHLS) of 2009. (See Graph 2-7)

2-7. Number of Generations Co-Residing in Older Person Owned Housing

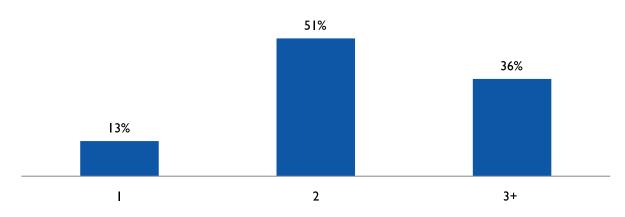


Notes: For Graph 2-7, n = 3,168 Source: MCYS SIHLS 2009

However, 40% of households owned by older persons consist of only one generation – the older person and spouse, older person siblings or older adults who are companions, friends or relatives. Only 12% of older person-owned households consist of three generations.

In housing owned by non-older persons, 51% of households consist of two generations co-residing – older persons and adult children. 35% of all households where the adult child or another individual owns the housing consists of three generations co-residing – the older person, the adult child and the grandchild. A much lower 13% of older persons reside with others of the same generation. (See Graph 2-8)

2-8. Number of Generations Co-Residing in Non-Older Person Owned Housing

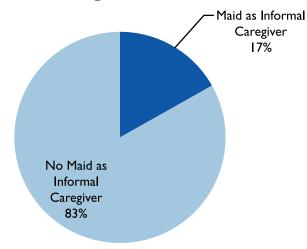


Notes: For Graph 2-8, n = 1,832

Foreign Domestic Workers Hired Specifically to Care for Older People

In Singapore, foreign domestic workers are employed as live-in maids in older adult households to provide care and support. They are employed as caregivers for older adults in 17% of households, based on the 2009 MCYS SIHLS. (See Graph 2-9)

2-9. Maid as Caregiver for Older People



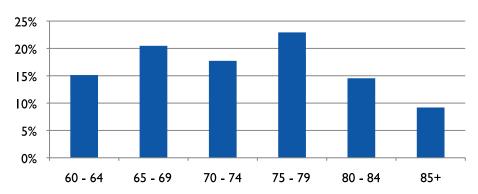
Notes: For Graph 2-9, n = 5,000 Source: MCYS SIHLS 2009

3. Health Status

Chronic Disease Risk Factors

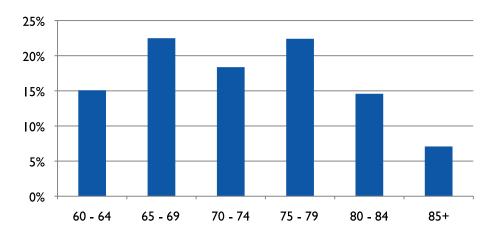
Of chronic conditions, older Singaporeans have a tendency to suffer most from high blood pressure; this tends to occur most in the 75-79 age group. About 54.6% of older persons aged 60 and above report having high blood pressure, based on 2009 data from the MCYS SIHLS. (See Graphs 3-8, 3-9 and 3 - 10 for selected chronic conditions for older persons 60+)

3-8. High Blood Pressure Prevalence, by Age



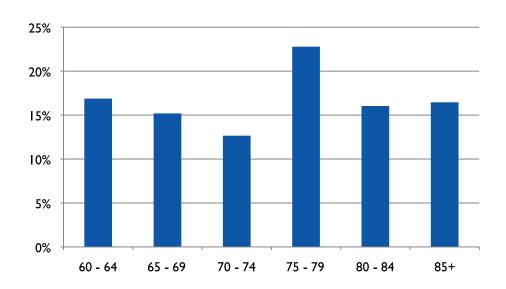
Notes: For Graph 3-8, n = 2,730 Source: MCYS SIHLS 2009

3-9. Diabetes Prevalence, by Age



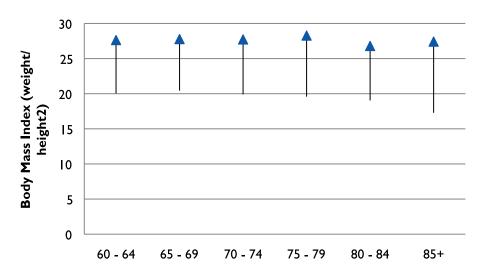
Notes: For Graph 3-9, n = 1,214 Source: MCYS SIHLS 2009

3-10. Respiratory Illness Prevalence, by Age



Notes: For Graph 3-10, n = 237 Source: MCYS SIHLS 2009

3-II. Body Mass Index, by Age



Notes: For Graph 3-11, n = 5,000. This graph shows the body mass index (BMI) for older adults (mean and standard deviation) by age. Using the Ministry of Health revised BMI cutoffs for Singapore, an index in the range of 23 - 27.4 poses moderate health risk and 27.5 and above poses high health risk.

Source: MCYS SIHLS 2009

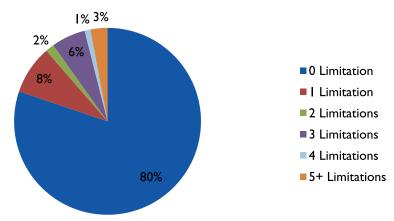
Activities of Daily Living (ADL) and Disability

Deteriorating health in the elderly as a result of chronic disease is a major cause of disability and difficulties in carrying out daily activities such as washing; dressing; feeding; going to the bathroom; using the toilet -a sitting or squatting toilet, moving around or leaving the house and transferring from a bed to a chair or wheelchair.

A large majority of older men -80%, compared to 52% of older women say they are able to carry out their daily activities without any difficulty, according to the 2009 MCYS SIHLS.

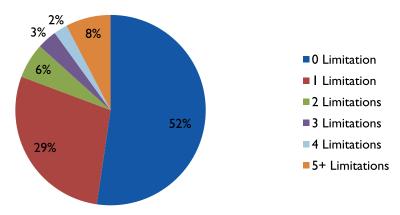
Similarly, a smaller percentage of older men -8% - reported one limitation in executing their daily activities, compared to 29% of older women. (See Graphs 3-12, 3-13)

3-12. Number of ADL Limitations, Older Men



Notes: For Graph 3-13, n = 2,251 Source: MCYS SIHLS 2009

3-13. Number of ADL Limitations, Older Women



Notes: For Graph 3-14, n = 2,757 Source: MCYS SIHLS 2009 In Singapore, the main causes of death in old age are cancer, heart and hypertensive diseases, based on 2006 data from the Singapore Registry of Birth and Death. 26% of all deaths in 2006 were caused by cancer, closely followed by 25.2% of deaths by heart and hypertensive diseases. Stroke, as a cause of death, accounted for 11% of all deaths that year. (See Graph 3-14)

3-14. Age at Death and Main Causes of Death

Age at Death	Percentage of all Deaths
Young Old (65 – 74 years)	31.6
Medium Old (75 – 84 years)	40.3
Oldest Old (85 years and above)	28.1
	100.0
Causes of Death	Percentage of all Deaths
Cancer (ICD9: 140-208)	26.0
Heart and Hypertensive Diseases (ICD9: 390-429)	25.2
Stroke (ICD9: 430-438)	10.7
Lung and Respiratory System Diseases (ICD9: 460-519)	23.3
Other Diseases	14.9
	100.0

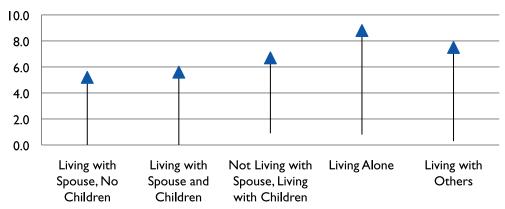
Notes: For Table 3-12, n = 10,399. The age classification of young old 60 - 74, medium old 75 - 84 and oldest old 85 + follows Singapore Department of Statistics, National Statistical Standards (March 2007)

Source: Singapore Registry of Birth and Deaths, 2006

4. Mental Health

Good mental health is vital in enabling older people to enjoy later life and manage the decreased physical functions that come with old age, as well as such life changes as retirement and the departure of grown up children. However older people can experience depression. Depressive symptoms in older people can be associated with changes to the family including such shocks as the death of a spouse, according to data from the 2009 SIHLS. Both older men and older women who live alone have the highest propensity for depression compared to older persons with other household living arrangements. (See Graphs 4-1, 4-2, 4-3)

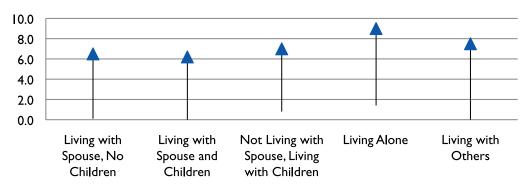
4-1. Depressive Symptoms Score for Older Men, by Living Arrangement



Notes: For Graph 4-1, n=4,542. This graph shows the depressive symptoms scores (mean and standard deviation) for older men in Singapore using the Center for Epidemiologic Studies Depression (CES-D) scale. A score that is 7 points of higher requires clinical attention.

Source: MCYS SIHLS 2009

4-2. Depressive Symptoms Score for Older Women, by Living Arrangement

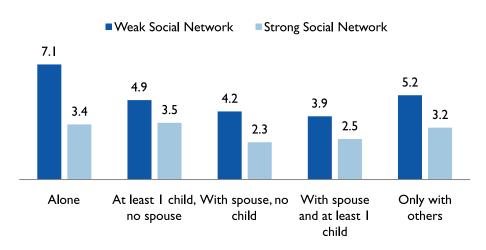


Notes: For Graph 4-2, n=4,542. This graph shows the depressive symptoms scores (mean and standard deviation) for older women in Singapore using the Center for Epidemiologic Studies Depression (CES-D) scale. A score that is 7 points of higher requires clinical attention.

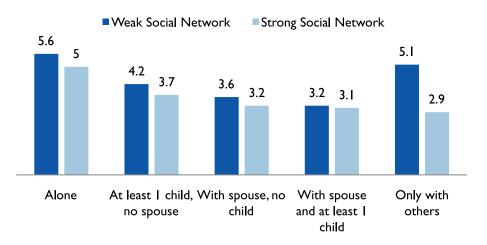
Source: MCYS SIHLS 2009

4-3. Mean Depressive Symptom Scores for Older Men and Older Women, by Living Arrangements and Social Networks

Older Men



Older Women



Notes: For Graph 4-3, n=4,542 Source: MCYS SIHLS 2009

But between the two sexes, older women are more likely than older men to have higher levels of depression that require clinical attention. Older women with higher depressive symptom scores tend to live alone; live with others who are unrelated; or are widowed and living with their children. In contrast, older women who live with their spouses only tend to have lower symptoms of depression.

Importance of a Social Network

A strong social network of family, friends and neighbors plays a vital role in ensuring good mental health among older people.

In a 2010 study, Chan, Malhotra, Malhotra and Østbye found that older men and older women tended to have a lower incidence of depression when they had strong social networks. The strength of their network was assessed using Lubben's revised social network scale. The scale measures size, the frequency of contact and closeness of an elderly person's social network.

Risk of Cognitive Decline a Factor for Depression

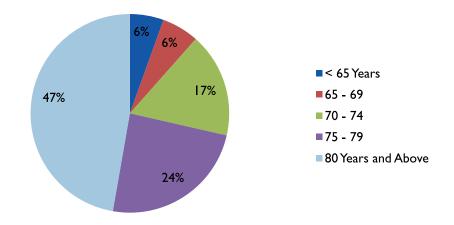
Poor cognitive functioning – from mild cognitive decline to dementia – can have implications for an older person's health and well-being. Also the risk of cognitive decline can trigger depression among older persons.

Older people experiencing cognitive decline may be unable to care for themselves or conduct the necessary activities of daily living, such as preparing their own meals or managing their money.

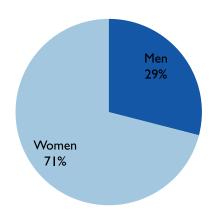
Screening and early detection of poor cognitive functioning, however, can substantially improve the quality of life for older people.

According to the 2009 SIHLS, only 6% of older people suffering from cognitive impairment were screened early, before the age of 65. Of this group who were screened, 71% were only diagnosed at 75 years or later. (See Graph 4-4)

4-4. Age at Diagnosis of Cognitive Impairment



4-5. Gender of Older Adults Diagnosed with Cognitive Impairment



Notes: For Graphs 4-3 and 4-4, n = 188

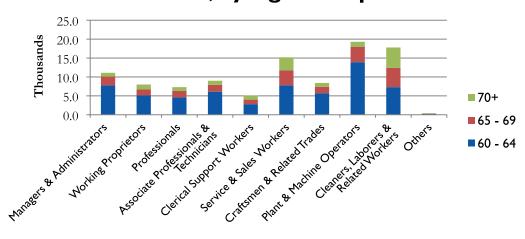
Source: MCYS SIHLS 2009

5. Economic Status

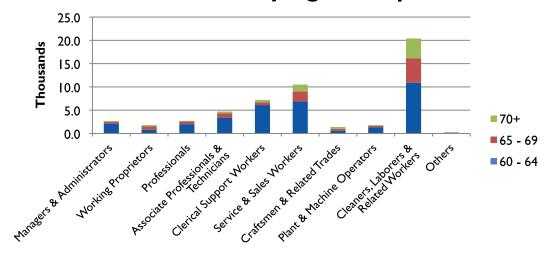
More Older Men Work than Older Women

Based on the Ministry of Manpower's (MOM) population level labor survey of 2010, there were approximately 155,000 older workers aged 60 and above in Singapore, of which a substantially higher proportion were men compared to women. (See Graphs 5–1, 5-2)

5 - I. Occupation Type for Older Men, by Age Group



5 - 2. Occupation Type for Older Women, by Age Group



Notes: For Graph 5-1, n =101,600. For Graph 5-2, n=53,400. 'Others' includes Agricultural & Fishery Workers and Workers Not Classifiable by Occupation.

Source: Singapore Ministry of Manpower Report on the Labor Force in Singapore 2010

While the proportion of older working men falls with age, there are men aged 70 and above who continue to work. However, they typically work as cleaners and laborers. See Graph 5-1 which shows the occupation types for older men by age group.

A majority of older women aged 60 and above do tend to also work as cleaners and laborers, contrasting sharply with the more varied occupation type of older men, which is less skewed towards one type of occupation. (See Graph 5-2)

Older People Earn Less Income

With age, the amount of earned income tends to decrease as productivity declines. Consequently, younger people, due to their higher productivity, tend to earn more income than older people.

According to the 2005 General Household Survey, which contains detailed information on monthly per capita income of Singaporeans up to the age of 65, the highest income earners were the late baby boomers in the 45-49 year range, who were born in the 1955-1964 period. In comparison, the early baby boomers – who were born between 1947 and 1954 and are older – earned comparatively less. (See Graph 5-3)

5-3. Monthly Income Per Capita,

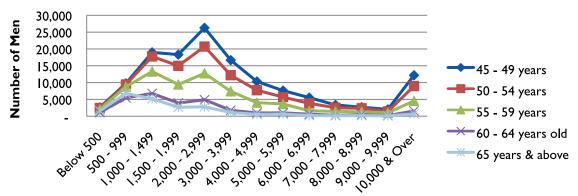
Source: Singapore Department of Statistics General Household Survey 2005

Men Earn More than Women, But Gap Narrows after Age 60

When the income distribution is segmented according to gender, men are found to earn more than women.

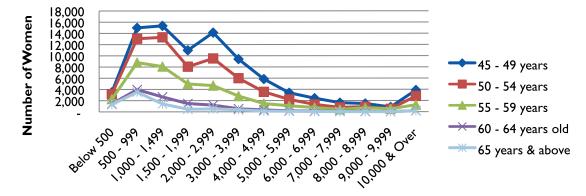
Below the age of 60, the income gap between men and women is wide. However, this difference narrows after the age of 60. Older men aged 60 and above tend to earn in the range of 1,500 - 2,999 while older women aged 60 and above tend to earn in the range of 500 - 1,499 a month. (See Graphs 5-4 and 5-5)

5-4. Monthly Income Per Capita for Men, by Age Group (in 2005 prices)



Source: Singapore Department of Statistics General Household Survey 2005

5-5. Monthly Income Per Capita for Women, by Age Group (in 2005 prices)



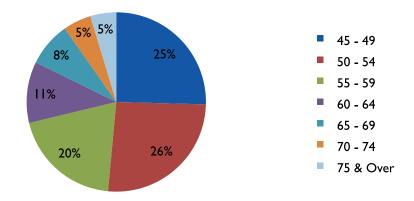
Source: Singapore Department of Statistics General Household Survey 2005

Lack of Work History has Serious Implications for Older Women Living Longer

Older women tend to earn very low incomes on account of their limited work history in the labor market and a lifetime of being homemakers.

Graph 5-6 shows that 51% of late baby boomer women, aged 45-49, are homemakers and do not work. The lack of earned income will have serious implications for older women living longer, particularly those who have not worked as they will have to depend more on different types of resources such as family and community support (Wu and Chan, 2011), rather than on the Central Provident Fund (CPF) - the mandatory savings plan for employees' retirement.

5-6. Women as Homemakers, by Age Group



Notes: For Graph 5-6, n = 181, 543

Source: Singapore Department of Statistics General Household Survey 2005

Alternative Income Sources for Old Age Care

Given the lower earned income for older men and women and the substantial number of women aged 45 and above, alternative sources of income for old age care would be beneficial.

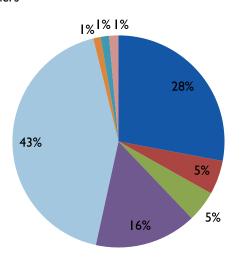
Among older persons with children, financial support from children and grandchildren is the first source of income for 43% of men and 75% of women. For 28% of older men and 12% of older women, the main source of income is from work. (See Graphs 5-7 and 5-8)

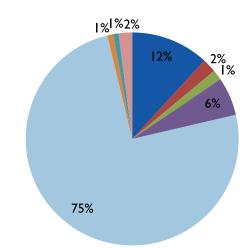
5-7. Sources of Income, Older Men

5-8. Sources of Income, Older Women

- ■Income from work
- Pension
- CPF
- Savings, life insurance, bonds, stock
- Financial support from children, grandchildren
- ■Income in the form of rent from self-owned property
- Public assistance / Assistance from CDC
- Others

- ■Income from work
- Pension
- CPF
- Savings, life insurance, bonds, stock
- Financial support from children, grandchildren
- Income in the form of rent from self-owned property
- Public assistance / Assistance from CDC
- Others





Notes: For Graph 5-7, n = 2,257. For Graph 5-8, n = 2,743

Source: MCYS SIHLS 2009

For only 5% of older men and 2% of older women, CPF contributions represent the first source of financial support in old age. Income from assets such as owned property is the first source of income for a minuscule 1% of older men and 1% of older women.

Also for older women, less than 1% reports that the first source of financial support is their husbands. Public assistance and short term financial assistance from Community Development Councils cover 1% or less of all older adults as the first source of financial support.

The main source of income support for the elderly particularly older women, is adult children and grandchildren, according to the 2009 SIHLS. However, for 5% of older adults, who have no children, this is not the case.

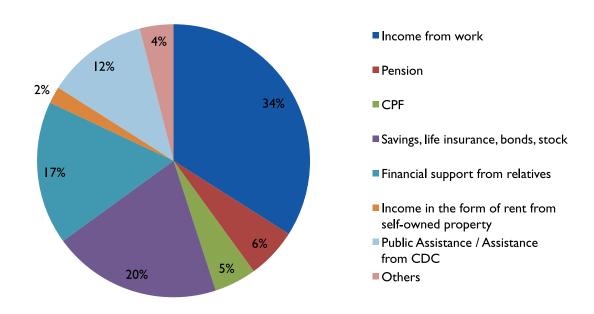
Public Assistance Plays an Important Role for Older Persons without Children

For older people without children, public assistance plays an important role as a substitute for children in providing a source of old age financial support. Public assistance covers older persons who are unable to work, have a limited means of subsistence and little or no family support; and who receive a small monthly payout from the CPF Minimum Sum or CPF Life schemes, that is not sufficient to sustain basic living.

Graph 5-9 shows that 12% of older persons without biological children depend on public assistance as the first source of financial support. This is an 11% point increase over the number of older persons with children who receive public assistance, as illustrated in Graphs 5-7 and 5-8 above.

Graph 5-9 also shows that for 34% of older persons, work is their first source of income. This implies that older persons without children do not retire and continue to work in old age.

5-9. Sources of Income, Older Persons without Children



Notes: For Graph 5-9, n = 191. These 191 respondents do not have any biological / adopted / step children. Source: MCYS SIHLS 2009



Photo credit: Tsao Foundation Hua Mei Center for Successful Aging

At 97 years old, Mrs Lee Ah Nui is an independent lady who lives on her own. Active and sociable, she enjoys engaging in conversation and activities with fellow senior citizens, and receiving visitors in her home.

For the last seven years, she has been in the care of Hua Mei Mobile Clinic. The mobile clinic team visits her home on a regular basis to provide medical, nursing and social care.

In 2010 she was convinced to go for her cataract operation. She had been worried about the out-of-pocket expenditures that would have to be incurred and had consistently refused to undergo the operation. However, upon being informed that the Tsao Foundation Hua Mei Center for Successful Aging would defray some of the costs through the Eye Fund which is used to help the low income, disadvantaged elderly, she finally agreed to the procedure.

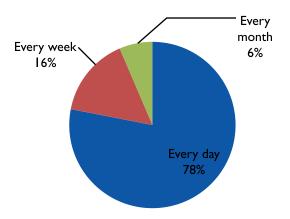
6. Social Participation

As part of active aging, activities such as meeting friends for a walk in the park, gardening, volunteering and attending religious services can all bring personal satisfaction and a sense of connectedness to the older person.

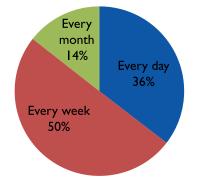
Older Singaporeans participate in a variety of activities such as attending events held in their neighborhood, going out for a meal, attending religious service and going for a walk, based on the 2009 SIHLS.

The most popular social activity is attending resident committee (RC), community centre (CC) and community development centre (CDC) events in the neighborhood. Over 78% of the elderly attend these events on a daily basis. Graphs 6–1, 6-2, 6-3, 6-4 show the various activities that older Singaporeans participate in on a regular basis.

6 – I. Attends RC / CC / CDC Neighborhood Events



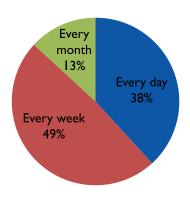
6 - 3. Attends Religious Services



Notes: In Graph 6-1, 6-2, 6-3, 6-4 n = 5,000

Source: MCYS SIHLS 2009

6 - 2. Goes Out to Eat



6 – 4. Goes Walking for Exercise

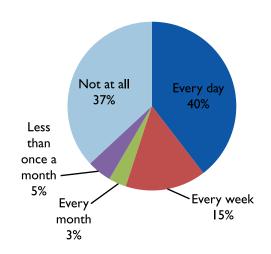




Photo credit: Tsao Foundation Hua Mei Center for Successful Aging

Madam Loo is a busy 78 year who lives on her own. Never married, she stopped working to become her mother's primary caregiver until she passed away.

For 18 years, she worked as a packer and following that she worked for five years making local baked goods such as kueh lapis and pineapple tarts. These days, she keeps herself busy with a myriad of activities. During the week, she is often found exercising at the residents' corner and engaging in social activities such as singing and knitting. On Sundays, she spends time with family members and friends.

Conclusion

This report provides an overall description of the status of older adults in Singapore. The current generation of older adults faces challenges that are mainly related to their health and financial status. There are significant differences by age suggesting that policies and programs for older adults need to target the young-old (60-69), the middle-old (70-79) and the oldest-old (80+). There are also important gender differences to note. Older women are significantly more dependent on their children compared to older men for financial support and this is often exacerbated by the presence of multiple chronic disease conditions. This emphasizes the need for policy making in the area of aging to be more gender specific.

The current generation of older adults faced life course events that starkly differentiate them from the incoming baby boomer cohort. Singapore's baby boomers have higher levels of education and different work histories compared to today's older generation. The cohort also has far fewer children compared to today's elderly. This will impact sources of care in old age and highlights the need to address long term care issues in an innovative manner.

The information in this report is reflective of the current situation in Singapore today. Future reports will include additional information on the baby boomer cohort and their experiences as they age.

Appendix

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ILC-Singapore

The International Longevity Centre Singapore (ILC-Singapore) aims to promote the well-being of older people and contribute to national development through supporting policy, practice and capacity-building by enabling a "connecting of the dots" between community, practitioners, academia, policy makers and the private sector through the creation of relevant stakeholder platforms as well as high impact research that strives to inform policy, facilitate cogent policy-action translation, and promote quality, effective practice in Singapore and internationally.

ILC-Singapore is a member of the ILC Global Alliance, a multinational research and education consortium which aims to address longevity and population ageing in positive and productive ways, typically using a life course approach, highlighting older people's productivity and contributions to family and society as a whole.

As an initiative of the Tsao Foundation, ILC-Singapore's mission is to drive for constructive change in how society approaches and responds to ageing.

Tsao Foundation

Established in 1993, the Tsao Foundation is a not-for-profit organisation dedicated to promoting successful ageing. Through its three major initiatives – the Hua Mei Centre for Successful Ageing, Hua Mei Training Academy and International Longevity Centre Singapore – the Foundation pioneers and provides community-based, primary healthcare and social services, promotes capacity-building in eldercare skills, and brings together practitioners, researchers and policy-makers to generate ideas and systems which enable the actualization of the physical, social and mental wellbeing of people as they age.

The Foundation promotes access to affordable healthcare, economic security and the social participation of adults in line with the World Health Organization's concept of active ageing, and frames its activities within an interdisciplinary, intergenerational and life course perspective.

With innovation, excellence and constructive change as its core values, the Foundation's goal is to enable people to age well, regardless of life stage, health status or physical ability.

Tsao Foundation Ageing Research Initiative at NUS

In collaboration with the NUS Faculty of Arts and Social Sciences, the Tsao Foundation Ageing Research Initiative at NUS was established in 2009 to spearhead ILC-Singapore's research on ageing. Under the direction of Associate Professor Angelique Chan, a leading researcher in the field of ageing in Singapore and internationally, numerous studies are already underway, and new, strategic research partnerships such as with the Duke-NUS Program in Health Services and Systems Research in community long term care service programme evaluation - are continually being forged.

