AGE-FRIENDLY CITIES
Lessons from Seoul and Singapore
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About the Centre for Liveable Cities
Set up in 2008 by the Ministry of National Development and the Ministry of the Environment and Water Resources, the Centre for Liveable Cities’ (CLC) mission is to distil, create and share knowledge on liveable and sustainable cities. CLC’s work spans four main areas: Research, Capability Development, Advisory Services and Knowledge Platforms. Through these activities, CLC hopes to provide urban leaders and practitioners with the knowledge and support needed to make our cities better. www.clc.gov.sg

About the Seoul Institute
The Seoul Development Institute was established by the Seoul Metropolitan Government (SMG) in 1992 and was renamed as the Seoul Institute (SI) on 1 August 2012. The Seoul Institute’s goal is to establish a medium- to long-term vision for Seoul and propose social policies on welfare, culture, education and industries, and urban management policies on city planning, transportation, safety and the environment. SI’s primary objective is to improve municipal administration through professional research, improve the quality of life in Seoul, and reinforce and sustain the competitiveness of Seoul. https://www.si.re.kr/
Korea will be a super-aged society in 2026, with total populations above the age of 65. Singapore and Korea are on a similar trajectory, and their efforts have greatly improved our mutual understanding and the relationship between the two cities. Their open sharing of innovative policy initiatives and the trial and errors of implementation will provide useful insights into issues all cities around the world are facing.

Ageing issues are ever more pertinent in our cities. As we know, there are commonalities in the range of concerns in Seoul and Singapore, as a result of our rapid growth and high population density. Now both our societies are ageing. How to overcome the challenges from ageing societies will be an important priority that calls for much consideration.

In terms of the ageing phenomenon, both Singapore and Korea are on a similar trajectory, with about 14 percent of our total populations above the age of 65. Korea will be a super-aged society in 2026, less than a decade from now. It is usually the case that what is a problem in Korea is a very serious problem in Seoul. This is particularly true for the ageing issue. Many senior citizens in Seoul are not ready to live in an ageing society, either physically or financially. Many live alone. Many need jobs to make ends meet. It is often very difficult for them to find job opportunities. Ageing is a critical concern in Seoul, and in Korea as a whole.

This publication emphasises the importance of ageing issues in our cities. At the same time, this book offers comprehensive perspectives and ideas to policymakers by comparing in-depth how ongoing efforts are being made in Seoul and Singapore. We may be a long way from solving the ageing issue. However, by learning from each other, we can better understand where we are and where we need to go in the process of finding creative solutions to population ageing in Seoul and Singapore. This book is the beginning.

Once again, I would like to express my gratitude to SI and CLC researchers for their great efforts in producing this publication.

Park Won-soon
Mayor of Seoul
South Korea

For the past three years, the two institutions have been collaborating to compare policies in Seoul and Singapore. Their efforts have greatly improved our mutual understanding and the relationship between the two cities. Their open sharing of innovative policy initiatives and the trial and errors of implementation will provide useful insights into issues all cities around the world are facing.

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Park Won-soon
Mayor of Seoul
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We often think of cities as buildings and infrastructure. But cities are as much about the people, as it is about the hardware. A liveable city is also one that is socially inclusive—a place that embraces diversity, and ensures citizens of all ages enjoy a high quality of life.

Today, Seoul and Singapore are amongst the fastest ageing cities in Asia. Both cities have put in place a range of programmes and initiatives for seniors. We both share the same aspiration—to make our cities age-friendly, and to build inclusive communities where our seniors can age with dignity and grace.

In the case of Singapore, one in four citizens will be aged 65 years and above by 2030. That is why we are taking proactive steps to prepare for an ageing population. Our urban planning has taken into account the needs of the elderly through the implementation of universal design guidelines, the provision of elderly-friendly features and facilities, and the planning and design of our homes and environment that are conducive for ageing-in-place.

We also recognise the importance of tailoring our efforts and providing housing, lifestyle and care options to meet the diverse needs of our seniors. In public housing, for instance, we offer a 2-room Flexi Housing Scheme, where seniors have the flexibility to choose the length of lease based on their age, needs, and preferences.

Our public housing estates are designed to be barrier-free. Over the years we have been upgrading the neighbourhoods and towns to provide direct lift access to every floor, and incorporating elderly-friendly designs in our flats and estates.

In a recent public housing project called Kampung Admiralty, we integrated public housing flats for seniors with a continuum of social and health facilities. In this way, residents have easy access to a full range of services, which enable them to age-in-place, and to participate actively in the community. We are honoured that this project recently won the award for World Building of the Year at the World Architectural Festival 2018.

These are just a few of the many initiatives we have embarked on for our seniors in Singapore. We remain committed to strengthening both the physical and the social infrastructure for an ageing population, and making Singapore a liveable city for all ages.

Age-Friendly Cities: Lessons from Seoul and Singapore is a timely publication to distil the experiences of both Seoul and Singapore in planning age-friendly cities and inclusive communities. I hope this third collaboration between the Centre for Liveable Cities and the Seoul Institute provides useful insights for cities in their journey of supporting and empowering seniors.

Lawrence Wong
Minister for National Development & Second Minister for Finance
Singapore
Population ageing—the increasing share of older persons in the population—is growing in tandem with urbanisation around the world. These two global trends are tightly intertwined. By 2050, it is projected that 68% of the world’s population will be living in cities, and most regions in the world will have nearly a quarter or more of their populations aged 60 years and older.  

Cities have a huge impact on older persons, who have to navigate the urban environment to carry out their day-to-day activities. The urban environment can play a part in adapting to the changing needs of the ageing population; it can also be improved to offer better liveability. In fact, planning a city such that it is safer, more accessible and more liveable for older persons also makes it much more liveable for everyone else. For example, providing safe, well-lit, even pavements and streets would encourage older persons to head out without fearing for their safety. This would also benefit persons with physical or cognitive disabilities, parents with strollers, children, cyclists, and even the general public.

Until now, the common narrative on ageing has largely been framed around declining health, physical and cognitive capacities as one ages. This narrative makes the ageing experience a private “problem” for older persons, instead of seeing ageing as a natural process. As ageing populations become a global phenomenon, it is important to
Ageing in Seoul and Singapore

Seoul and Singapore are among the top cities in Asia experiencing an ageing population. The proportion of elderly populations are similar in both Seoul and Singapore: 13.1% of Seoul’s 9.8 million population are aged 65 years and older (1,295,000 persons) while 14.4% of Singapore’s 5.6 million population are aged 65 years and older (440,000 persons).

A society is often defined to be an ‘ageing’, ‘aged’, and ‘super-aged’ when the proportion of its population that is 65 years and older exceeds certain thresholds, namely 7%, 14% and 20% respectively. Seoul and Singapore are already fast-approaching an aged society; by 2030, both Seoul and Singapore will be super-aged as Seoul expects 23.5% of its population to be elderly, close to Singapore’s projected 25% or 900,000 seniors.

While countries like Japan took 36 years to transit from an ageing to a super-aged society, South Korea and its capital city, Seoul, will make that transition at a much faster rate: it is expected to take just 26 years to transit from 5.3% in 2000 to 20.2% by 2026. Likewise, Singapore will make the transition in 27 years, going from 7% in 1999 to 20% of the population being elderly in 2026. This means a shorter time to plan and prepare infrastructure, healthcare and social institutions.

Global estimates show that by 2030, a total of 34 nations will be classed as super-aged societies. Many middle-income countries like China, Cuba and Thailand are expected to join high income countries such as Japan, Italy and Germany in becoming super-aged. More countries are expected to make the transition from aged to super-aged in the coming decades, and urban areas will be where ageing populations cluster. An examination of efforts in Seoul and Singapore to address population ageing is thus timely and useful.

Recognising these phenomena, the Seoul Institute (SI) and the Centre for Liveable Cities (CLC) undertook this collaborative research study to explore how Seoul and Singapore, two high-density cities with rapidly ageing populations, are responding to and engaging with this important urban challenge.
Research Approach and Process

Age-Friendly Cities

Many cities around the world have responded to population ageing by adopting or adapting the concept of an ‘age-friendly city’.

A term first used by the World Health Organisation (WHO) in 2005, an ‘age-friendly city’ is defined as one which “encourages active ageing by optimising opportunities for health, participation, and security in order to enhance quality of life as people age”.12

With a focus on planning for seniors, SI and CLC both adopted the concept of ‘age-friendly cities’ for this study. This is because the concept encapsulates both physical infrastructure and social services, and emphasises the enablement and empowerment of seniors as they age. The team also noted that an age-friendly city is also a friendly city for everyone. As WHO has highlighted, “in an age-friendly city… the natural and built environment… anticipates users with different capacities, instead of designing for the mythical ‘average’ (i.e. young) person. An age-friendly city emphasises enablement rather than disablement; it is friendly for all ages, and not just ‘elder-friendly’”.13

Although the definition of an elderly person is not fixed, initiatives explored in this study were primarily targeted at persons aged 65 years and above, unless otherwise specified.

Both Seoul and Singapore share common aspirations to build supportive, enabling and friendly environments for their seniors. It is hoped that the knowledge gleaned from this collaborative research study furthers Seoul’s and Singapore’s efforts in planning for an ageing population and provides learning points for other cities experiencing population ageing.

Research Process

The joint SI-CLC team embarked on a 6-month research process to examine ageing-related initiatives in both Seoul and Singapore. Planning for population ageing involves many stakeholders: from the seniors themselves to the wider community, government officials and city leaders. The research process engaged a diverse range of stakeholders in order to gain a comprehensive understanding of relevant programmes in both cities.

The joint research team comprised members from the SI and Seoul Welfare Foundation, as well as Singapore’s CLC, Ministry of Health (MOH)’s Ageing Planning Office, Housing & Development Board (HDB), Urban Redevelopment Authority (URA) and People’s Association (PA).

Study Trips and Roundtable Discussions

To understand each city’s age-friendly initiatives in context, researchers conducted a short exchange programme between Seoul and Singapore in May and June 2018. Researchers visited selected case study sites, and carried out in-depth discussions with site directors, community leaders and the users of age-friendly facilities.

Each trip was also paired with a roundtable discussion involving experts, city officials, policy-makers and academics from Singapore and Seoul. Participants discussed the thought processes behind each city’s ageing-related master plans, identified similar challenges faced, and exchanged ideas on learning opportunities from each other’s initiatives. The discussions centred on inclusive infrastructure design and provision, the sustainability of programmes, the engagement of seniors, as well as social welfare policy and financing.
### Seoul

#### General
- **Land Area**: 605 km²
- **Total Population**: 9,774,088 (2018)
- **Population Density**: 16,728 per km² (2017)
- **GDP per Capita**: KRW 33,996,000 (USD 30,000)

#### Population
- **Median Age (2018)**: 42 years old
- **Total Fertility Rate (2017)**: 0.84

#### Elderly in Seoul
- **Population of Elderly 65 & Above (2018)**: 1,405,404
- **Retirement Age**: Official Retirement Age 60 years old, Actual Retirement Age 52.6 years old
- **Old-Age Support Ratio**: 5.6 (number of residents aged 15-64 per resident aged 65 years and older)

#### Living Arrangements
- Where one household member is aged 65 years and over:
  - Single-member: 138,825
  - Single-generation: 168,455
  - Two-generation: 231,465
  - Three-generation: 164,926
  - Four or more generation: 2,058
  - No-kin: 3,856

### Singapore

#### General
- **Land Area (2017)**: 720 km²
- **Total Population (2017)**: 5,612,300
- **GDP per Capita (2017)**: SGD 79,697 (USD 58,339)

#### Population
- **Median Age (2017)**: 40.5 years old
- **Total Fertility Rate (2017)**: 1.16

#### Elderly in Singapore
- **Population of Elderly 65 & Above (2017)**: 516,700
- **Retirement Age**: Official Retirement Age 62 years old, Re-employment Age 67 years old
- **Old-Age Support Ratio (2017)**: 5.1 (number of residents aged 20-64 per resident aged 65 years and older)

#### Living Arrangements
- Where head of household is aged 65 years and over:
  - Couple-based with children: 74,100
  - Couple-based without children: 71,500
  - Lone-parent: 23,100
  - Living alone: 47,400
  - Others: 33,000
2. AGEING IN SEOUL AND SINGAPORE

Population ageing brings both challenges and opportunities.

Both Seoul and Singapore are seeing longer life expectancies and an increase in average healthy years among their growing elderly populations. With the average life expectancy in Seoul at 82.4 years and in Singapore at 81.7 years, the increased longevity and improved health empower seniors with more opportunities for personal fulfilment and growth. Older persons are also a dynamic and growing talent pool that can be empowered as jobs and the economy restructure to adapt to the needs of older persons.

Seoul and Singapore both face a similar demographic challenge: not only do they have a growing proportion of older persons in their populations, they are also experiencing a shrinking workforce and decreasing total fertility rate. The old-age dependency ratio in both cities—the number of citizens in the working ages of 20–64 years for each elderly citizen—is thus declining. Presently, Seoul’s old-age dependency ratio is 5.6 while Singapore’s is 5.1 and both cities have projected that the old-age dependency ratio could drop to as low as 2.8 for Seoul and 2.1 for Singapore by 2030. Coupled with low fertility rates of 0.84 and 1.16 respectively, there will be a smaller base of economically active citizens to support the ageing population in both cities if economic and social structures remain the same.
While the rise in seniors living alone can be attributed to changing lifestyles, preferences, desire for more personal space and independence, one key concern is the risk of social isolation—seniors living alone may tend to keep to themselves and may not be able to receive help from the larger community should they need it.

However, it is important to distinguish between loneliness (a perceived feeling) living alone (a living arrangement), and social isolation (a possible outcome of this living arrangement). The international literature on the link between seniors living alone and mortality is mixed. Some find that living alone is associated with increased risk of mortality, while others find decreased mortality risk or no effect. A study in Singapore found that it is the experience of loneliness and not living arrangements per se that is associated with mortality. For example, the same study found that a higher proportion of elderly Singaporeans who live with children or other (non-family) household members have expressed more feelings of loneliness compared to those living alone.

Correspondingly, Seoul is not only seeing a rise in seniors living alone, but also a high percentage of two-generations living under one roof: a household of senior citizen(s) living with unmarried children. Because of the economic downturn in Korea, it is not uncommon nowadays to find families where adult children are looking for employment opportunities. Seniors then have to continue supporting the household by working longer or finding part-time work after retirement. There is thus the challenge of supporting seniors through re-employment and continued social engagement.

When discussing the trends and opportunities of an ageing population in Seoul and Singapore, two similar trends in Seoul and Singapore stood out for the researchers—the changing profiles of seniors and the rise in seniors living alone.

Notwithstanding the similarities, researchers also recognised trends that are particular to each city: Seoul is faced with the challenges of early retirement of seniors and intergenerational conflict, while Singapore is faced with the challenges of increased chronic disease burden and issues of caregiving.

Similar Trends in Seoul and Singapore

Changing profiles of seniors

The profiles of seniors in both cities are changing. For one, seniors—particularly the baby boomers, broadly defined as those born in the 1940s to 1960s following the Second World War and Korean War—are more highly educated and have higher incomes than previous generations for their age group. Almost 45.5% of the 1.44 million baby boomers in Seoul have attended technical college or higher, compared to only 16.1% of pre-boomers.

Baby boomers in both cities also have higher incomes and greater financial security: many of them were able to take advantage of rapid economic growth in the late 1970s to early 1980s. In the past decade, economic activities and employment for senior citizens in Seoul have also continued to grow, from 2.16% in 2005 to 26.7% in 2015. As of 2015, one in four people aged 65 or older were engaged in economic activities. Among the OECD countries, Korea (31.5%) ranks second in a comparison of elderly participation in economic activities.

Rise of seniors living alone

Another trend common to both Seoul and Singapore is a change in family structures, resulting in a greater occurrence of single elderly households, elderly living alone or elderly having to continue supporting the household.

The number of seniors living alone continues to grow in Seoul, standing at 27.7% in 2015. In both cities, more elderly women live alone compared to men, likely due to the longer life expectancy for women. In particular, of seniors living alone in Seoul, males accounted for 31.5% (88,549) and females 68.5% (192,519). Of seniors living alone in Singapore, males accounted for 6.1% and females 11.2%.

Both cities face a rise in seniors living alone.
Distinct Trends

While Seoul and Singapore share similar trends and challenges, each city has to grapple with some issues particular to its context.

Seoul: Early retirement age; Intergenerational conflict

In Seoul, seniors retire at the age of 52.6 years: earlier than the national average, and earlier than most cities around the world. Retirees may face a gap of years in which they have no income: between the retirement age of 52.6 years and the start of pension payouts at age 65. This is a phase during which the mature-aged could fall through the cracks in the social security system, and be financially unprepared for retirement. According to a 2015 study by the Seoul Metropolitan Government (SMG), many individuals over 50 years of age are highly anxious about and unprepared for life after early retirement.29

While there has been social consensus on providing care to the elderly, a worsening unemployment rate for the younger generation in Seoul, set against a rise in the number of working seniors, has surfaced intergenerational conflict. As some seniors are not ready for life after retirement and are determined to work for as long as their health allows, there is growing competition between these seniors and younger people for available jobs in the market—the young want the same comfortable, high-paying jobs as seniors do.

This intergenerational conflict also plays out in daily life in Seoul. For example, many seniors staying in the university districts depend on the rental income from leasing out their properties. As such, these seniors are opposed to the construction or expansion of university dormitories. The SMG and Local District Government (LDG) have attempted to resolve this issue through dialogues, but some seniors are unwilling to compromise and want the projects to be scrapped.

Although there has not yet been any case where young people have systematically organised in opposition to the elderly, the risk of unexpected intergenerational friction has risen. There have been efforts to initiate policies in local communities to socially integrate the old and the young, but Seoul faces a difficult dilemma since many citizens do not work where they live.

Local residents in Seoul protesting against the building of rental apartments for young people.

Singapore: Growing chronic disease burden, dementia and challenges of caregiving

With a rapidly ageing population, Singapore faces a growing chronic disease burden. About 3 in 4 Singapore residents aged 65 and above are affected by diabetes, high cholesterol or hypertension, or a combination of the three.30

The proportion of seniors with dementia is also increasingly rapidly, in tandem with the growth of the ageing population. 1 in 10 persons above the age of 60 is estimated to suffer from dementia, which is the gradual decline of cognitive abilities such as thinking, memory and judgement.31

It takes continued focus and effort to ensure that seniors with a diverse range of needs—including those with chronic diseases and dementia—can continue to age well in the community. Singapore continues to explore innovative solutions for high quality healthcare services at affordable cost. Singapore also recognises the importance of preventive care, and has been investing heavily in health promotion, early vaccination, and screening for diseases.

In contrast to Seoul, engaging foreign domestic workers (FDWs) for caregiving help is common in Singapore. While the majority of family caregivers are middle-aged children, a survey showed that 20% of family caregivers providing care to elderly persons aged 75 years and above are themselves above the age of 65 years old.33 There is thus the complication of older caregivers dealing with the complex health needs of their elderly care recipients, even as they are themselves getting older and less healthy.

Another related trend in caregiving for the elderly in Singapore is the rise in the number of older caregivers. While the majority of family caregivers are middle-aged children, a survey showed that 20% of family caregivers providing care to elderly persons aged 75 years and above are themselves above the age of 65 years old.33 There is thus the complication of older caregivers dealing with the complex health needs of their elderly care recipients, even as they are themselves getting older and less healthy.

is estimated to rise to about 300,000 by 2030.32 FDWs will continue to play a role in supporting families with elderly household members as family sizes shrink, while working adults have to juggle multiple responsibilities such as caregiving of young children and tending to aged parents. To provide more options and better support for households, Singapore is expanding community-based healthcare and eldercare.
SEOUL

**Similar Trends**
- Declining Old-Age Dependency Ratio
- Changing Profiles of Seniors: Higher Education and Higher Income
- Rise of Seniors Living Alone

**Distinct Trends**
- Early Retirement Age
- Intergenerational Conflict

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**SINGAPORE**

**Similar Trends**
- Declining Old-Age Dependency Ratio
- Changing Profiles of Seniors: Higher Education and Higher Income
- Rise of Seniors Living Alone

**Distinct Trends**
- Increasing Chronic Disease Burden and Dementia
- Issues of Caregiving

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**Distinct Trends**
- Early Retirement Age
- Intergenerational Conflict

**Rise of Seniors**
- Financially unprepared for retirement due to gap period between retirement age (52.6 years old) and pension payouts age (65 years old).
- Increased competition between seniors and younger people over available jobs in the market.

**Changing Profiles**
- About 3 in 4 seniors are affected by diabetes, high cholesterol and/or hypertension.
- 1 in 10 persons aged 60 years and above is estimated to have dementia.

**Rise of Seniors Living Alone**
- While Singapore is expanding centre-based and home-based care facilities and services, the total demand for foreign domestic workers is estimated to rise to about 300,000 by 2030.
Both Seoul and Singapore have taken steps to plan and design their city to ensure that seniors continue to enjoy a good living environment, with access to adequate levels of care and social support, as they age.

Interestingly, planning for an ageing population in Singapore began as early as the 1980s, long before the city started experiencing population ageing. In line with Singapore’s approach of long-term planning, then-Prime Minister Lee Kuan Yew decided that a Whole-Of-Government approach was needed to understand and plan for a greying population. He appointed a Committee on the Problems of the Aged in 1982 to study trends and recommend possible ways to meet the anticipated challenges of an ageing population in Singapore.34

This evolved into the present day Ministerial Committee on Ageing (MCA) which currently provides Whole-Of-Government leadership in tackling ageing, anticipating shifts and coordinating a national response.

Given the corresponding demand on healthcare services from an ageing population, Singapore is committed to making three key paradigm shifts to bring healthcare closer to home and support Singaporeans to age well in their community, make healthy lifestyle choices, and get good healthcare at the best affordable value.35
Beyond Hospital to Community
- Singapore’s government spending on primary care and intermediate/long-term care sectors has increased from S$1.3 billion (FY2007–2011) to S$5.1 billion (FY2012–2016). These investments reflect a priority to anchor care firmly in the community. Singapore continues to invest in community care by bringing social and healthcare services closer to the people. This has led to the formation of the Silver Generation Office (SGO), as well as an expansion of the Community Networks for Seniors (CNS) programme.

Beyond Quality to Value
- This shift plays a pivotal role in ensuring sustainability. Singapore adopts a multi-pronged approach in managing healthcare costs and has consistently reviewed its healthcare financing policies to ensure that it remains affordable through targeted subsidies.

Beyond Healthcare to Health
- This shift focuses on creating a supportive environment to encourage and support Singaporeans in leading healthier lifestyles.

Seoul was relatively late to recognise the ageing phenomenon as a major policy issue. It was only in the early 2000s that the central government as well as local governments in Korea started paying attention to ageing. A committee was formed in the central government to discuss issues related to ageing in 2004. The discussion, however, was heavily geared towards addressing low-birth rates rather than ageing.

The first plan to tackle the ageing issue in Seoul was the ‘2020 Aged Society Master Plan’ drafted in 2010. This plan was significant for being the first of its kind to paint a picture of an ‘age-friendly city.’ However, few of its proposed goals were realised. Nonetheless it is important to note that this master plan laid a foundation proposing the way forward for an age-friendly Seoul.

More recently, Seoul and Singapore have launched master plans that guide their planning for an ageing population. This section offers an overview of these master plans, highlighting how each city has incorporated considerations of an ageing population in its urban planning and development, and how each city is adapting its approaches in light of prevailing trends and anticipated challenges.

Seoul: Age-Friendly Seoul Master Plan
Based on the concept of an age-friendly city proposed in the World Health Organisation (WHO) Guide, the Seoul Metropolitan Government (SMG) drafted the “Seoul Comprehensive Seniors Plan” in 2012 as its first action plan to become age-friendly. The new plan was targeted at the mid- to long-term, and consisted of workable tasks that could be implemented within a 3-year time frame (2013–2015).
Seoul Comprehensive Seniors Plan: Significance and Achievements

An age-friendly city upholds active ageing, ageing-in-place, and generational integration as its key values. The WHO’s Global Network of Age-friendly Cities and Communities (GNAFCC) has proposed eight themes to enable these values. These are grouped into two major spheres: physical and social environments. Three themes—(1) Outdoor Spaces and Buildings, (2) Transportation, and (3) Housing—cover the physical environment, while five other topical themes—(1) Social Participation, (2) Respect and Social Inclusion, (3) Civic Participation and Employment, (4) Communication and Information, and (5) Community Support and Health Services—address the social environment.

The eight themes were not directly adopted in the Seoul Comprehensive Seniors Plan, however. Seoul reviewed its own characteristics and conditions and came up with six topical areas for its first Action Plan: (1) Support for Baby Boomers, (2) Community Care, (3) Age-Friendly Environment, (4) Leisure and Culture, (5) Respect and Integration, and (6) Customised Employment.

The three GNAFCC-proposed themes to do with the physical environment were combined into one topical area: “Age-Friendly Environment”. The GNAFCC-proposed social themes of ‘Respect and Social Inclusion’ and ‘Communication and Information’ were also combined into one in Seoul’s Seniors Plan. Seoul also added one more theme to its Plan: Support for Baby Boomers.

Seoul’s Age-Friendly Master Plan

Seoul’s plan differs from the WHO Guide, and from the approaches of other cities, in its consideration for baby boomer support. When the first action plan was under development, baby boomers (born between 1955 and 1963) accounted for 14% of the city’s population, i.e. they were more populous than senior citizens over age 65 at the time. However, there was no plan to support them in their preparation for retirement and old age.

Based on such observations, the Seoul Metropolitan Government (SMG) made support for baby boomers, to help baby boomers design the next stage in their lives, its top policy priority. Basic tasks were developed in this process, to which goals implemented through specifically refined policies were added. Today, the SMG has 50+ Centers, a 50+ Campus, and other infrastructural facilities designed to assist baby boomers with a wide array of services on offer.

Customised employment has not performed as well as other areas in terms of meeting its goals. To make structural improvements, further efforts have since been made to upgrade facilities and restructure relevant organisations to offer greater support towards employment.

To ensure Community Care, a certification system was enforced for long-term care facilities, while systemic support was instituted to assist caregivers so as to improve the quality of care given to senior citizens. In the meantime, support continued to be offered to relevant projects.

Seoul’s focus on an Age-friendly Environment is an integration of WHO’s three thematic areas concerning the physical environment. The plan was to see how Seoul could enhance housing and local community environments for seniors. The process of exploring different programmes under this concept was significant because a wide range of projects have since been put into action locally. Some examples include the pilot age-friendly business project which was launched in 2016 to make local stores more age-friendly; the list also includes a pilot project implemented in 2017 to offer housing services to senior citizens, i.e. Borin Housing.

Tasks proposed in the areas of Leisure and Culture and Respect and Integration were an opportunity to remind public and private service providers that leisure facilities for seniors are important and that these facilities should be developed into something local residents can also share and enjoy. Seoul understands that it is important to disseminate information in an age-friendly way to engage mature-aged citizens. The city regularly publishes newsletters and guidelines to keep seniors informed.

It is worth noting that the six areas proposed in the Seoul Comprehensive Seniors Plan realise the principles of active ageing and ageing-in-place, which are key to WHO’s concept of an age-friendly city. In other words, Seoul’s plan demonstrates the city government’s commitment to incorporating WHO’s key concepts of
the process became an opportunity for the SMG, and its internal policymakers and partners in the public and private sectors, to appreciate what it takes to be an age-friendly city.

During the development of the Seoul Comprehensive Seniors Plan, the Senior Citizen Support Division, which is in charge of making the city age-friendly, led the way in investigating, sharing and discussing projects launched by the different SMG divisions (e.g. public health, transport, housing, park, design, etc.) that would impact senior citizens. Relevant officials from these divisions came together to share work done and future plans, discuss improvements, and confirm progress in each project. This approach is likely to continue if it is not feasible to create a comprehensive umbrella organisation: in which case it is imperative that support be given to ensure that the different divisions work together more closely. Examples of this might include instituting an official framework with which to check the progress of projects regularly, or incentivising ideas and achievements to promote and extend relevant projects.

The SMG has endeavoured to understand what the GNAFCC hopes to realise in an age-friendly city. Seoul carefully studied the GNAFCC guidelines and knowledge resources in order to upgrade its own ageing policies and to develop better plans in the future. Seoul has continued to share such information with other cities, deepening the GNAFCC’s understanding of the Korean urban context. Seoul is now poised for its second Action Plan. While the new plan is set to be implemented in the next five years, the SMG needs to focus its interventions on the local community, in order to ensure that that citizens do indeed experience improvements brought on by age-friendly initiatives.

Since 2014, the Senior Policy Monitoring Group has been evaluating the Seoul Master Plan and proposing improvements.
Singapore: Action Plan For Successful Ageing

In 2015, the MCA launched the S$3 billion Action Plan for Successful Ageing, which serves as Singapore’s blueprint to prepare for population ageing.

The Action Plan was developed following a series of consultations involving over 4,000 Singaporeans from all walks of life, through focus group discussions, online consultations and “listening points” at public spaces like libraries, shopping malls, and universities.

A wide range of topics were discussed at the public consultations. On employment and lifelong learning, for example, seniors expressed their aspirations to work beyond the official retirement age to remain financially independent. They wanted to keep learning, for work and for personal interest. They also wanted a greater range of activities to keep their minds and bodies active, and desired more volunteering opportunities that interest them, through which they can apply their skills and expertise.

Seniors also discussed what matters to them as they age, and what they need in order to age well, such as good health and intergenerational interaction. They sought more access to information on health issues, health checks and exercise opportunities near their homes or at their workplaces. They also wanted more social spaces near their homes to be made available so that they can interact more frequently with others. They voiced their hopes for a more inclusive society in which the young respect and care for the old.

The discussions also sought to understand how seniors can be supported to remain independent and to age in the community. Seniors highlighted the value and convenience of having eldercare centres and primary care services like general practitioner clinics and polyclinics nearer their homes. They also hoped to see more senior-friendly urban infrastructure, such as public spaces or transport, that would allow them to make their way around Singapore more easily and safely. Caregivers wanted greater assistance in caring for their loved ones, such as respite care and financial support.

Vision for a Successfully Ageing Singapore

OPPORTUNITIES FOR ALL AGES
Singapore will be a place where everyone, including seniors, can continually learn, grow and achieve their fullest potential.

KAMPONG FOR ALL AGES
Singapore will be a caring and inclusive society that respects and embraces seniors as an integral part of our cohesive community.

CITY FOR ALL AGES
Singapore will be distinctive globally not just for its economic success, but also as a model for successful ageing.
These ideas and aspirations informed the Action Plan for Successful Ageing and its corresponding focus areas.

The Action Plan seeks to build “A Nation for All Ages” through more than 70 initiatives in 12 areas: health and wellness, learning, volunteerism, employment, housing, transport, public spaces, respect and social inclusion, retirement adequacy, healthcare and aged care, protection for vulnerable seniors, and research.

Overview of the Action Plan for Successful Ageing

Singapore’s vision of an age-friendly city works on three levels: national, community and individual.

At the national level, Singapore aims to be a City For All Ages, transforming the city through a range of initiatives and improvements in healthcare, housing, transportation, parks, and research on ageing.

At the community level, Singapore aims to encourage the community to come together and build a Kampong For All Ages; the vision of a “kampong” (a Malay term for ‘village’) underscores the focus on strengthening community support and care for the seniors and enabling cohesive homes and inter-generational harmony.

At the individual level, Singapore is committed to enabling Opportunities For All Ages, seeing longevity as an opportunity and enabling seniors to continue working, learning, growing as they enjoy many more years of healthy life.

INDIVIDUAL LEVEL
OPPORTUNITIES FOR ALL AGES

Longevity is opportunity. Seniors can continue working, learning and growing as they enjoy many more years of healthy life.

Seniors’ Health Programme
Over 400,000 seniors reached through health talks and exercise programmes.

Workplace Health
44,000 mature workers reached in 7 sectors.

Learning
Over 21,000 places across 900 courses provided under National Silver Academy, benefiting close to 13,000 participants.

Volunteerism
Over 2,200 new senior volunteers as of Dec 2017.

Employment
From July 2016 to November 2017, 600 companies applied for the job redesign grant under enhanced WorkPro, benefitting more than 9,500 older workers aged 50 and above.

COMMUNITY LEVEL
KAMPONG FOR ALL AGES

Cohesive home with inter-generational harmony. We will involve the public, people and private sectors to strengthen community support and care for our seniors.

Dementia Friendly Communities
6 Dementia Friendly Communities in Yishun, MacPherson, Hong Kah North, Bedok, Queenstown and Fengshan. Reached out to over 23,000 individuals to support persons with dementia and their caregivers.

Inter-generational Harmony
Over 15,000 students participated in inter-generational learning programmes.

NATIONAL LEVEL
CITY FOR ALL AGES

Live well and age confidently in place. Transform Singapore into a city where Singaporeans can age gracefully and confidently.

Research on Ageing
6 grant calls launched in home care, cognition, ageless workplaces, assistive devices, frailty prevention and falls prevention.

Housing
• 1st Active Ageing Hub at Kallang/Whampoa started in July 2017.
• 2nd Active Ageing Hub at Kampong Admiralty started in February 2018

Aged Care Facilities (increase from end-2015 to end-2017)
+23% nursing home beds
+16% home care places
+43% centre-based care places

Parks
• Parks incorporating more senior-friendly amenities (e.g. senior-friendly fitness corners)
• 3 therapeutic gardens opened at HortPark, Bishan-Ang Mo Kio Park and Tiong Bahru Park.

Transport
14 Silver Zones completed, 804 Green Man Plus crossings, >96% bus services made wheel-chair accessible.
Summary of Seoul’s Age-Friendly Seoul Master Plan

Developed based on World Health Organisation (WHO) ‘Global Age-Friendly Cities: A Guide’ in an effort to join the Global Network for Age-Friendly Cities and Communities (GNAFCC)

Launched 2012

Key Concepts
- Age-Friendly City
- Active Ageing
- Ageing-in-Place
- Generational Integration

Focus Areas
- Support for baby boomers
- Community care
- Age-friendly environment
- Leisure and culture
- Respect and integration
- Customised employment

Engagement
- Via the Seoul Senior Policy Monitoring Group since 2014
- Groups of about 50 people including youth and seniors
- Review different aspects of the plan every year through discussions and site inspections
- 2nd Action Plan in preparation

Summary of Singapore’s Action Plan for Successful Ageing

Developed by the Ministerial Committee on Ageing (MCA). The Action Plan serves as Singapore’s blueprint to prepare for population ageing.

Launched 2015

Vision
- Opportunities for All Ages
- Kampong (village) for All Ages
- City for All Ages

Focus Areas
- Employment
- Lifelong learning
- Volunteerism
- Health and wellness
- Social engagement and inclusion
- Aged care services
- Housing
- Transport
- Public spaces
- Research on ageing

Engagement
- Engaged over 4,000 Singaporeans
- Almost 50 focus group discussions
- “Listening points” at public spaces like libraries, shopping malls and universities
- Online consultations
Age-Friendly Cities: Seoul, Singapore and Beyond

Insights from the World Cities Summit (WCS) 2018 Panel Discussion

The concept of ‘age-friendly cities’ has been central to Seoul’s and Singapore’s development of their master plans. It was important for the team to understand how both cities assess their progress to date in building an age-friendly city, and what they regard as current and future challenges. It was also useful for the research team to get a sense of what an age-friendly city means to comparable cities, other than Seoul and Singapore, which have also adopted or adapted an age-friendly approach to planning holistically for population ageing.

The joint research team organised a high-level panel discussion at the World Cities Summit (WCS) in July 2018, in which representatives from Seoul, Singapore as well as New Taipei City discussed age-friendly cities in an Asian context. Academics from Seoul and Singapore—Dr. Miree Byun, Director, Seoul Institute and Dr. Belinda Yuen, Director, Lee Kuan Yew Centre for Innovative Cities, discussed current and future research as well as challenges for Seoul and Singapore’s age-friendliness. The panel was also joined by Dr. Eric Chu, Mayor of New Taipei City, who provided insights from another swiftly ageing city in Asia, and Dr. Emi Kiyota, an environmental gerontologist and Founder of Ibasho, who provided global perspectives on age-friendly cities.

Over 250 participants attended the panel, from members of the public to international delegates. The panel discussion drew out several key characteristics of what it means to be an age-friendly city:

An age-friendly city empowers and enables its seniors

The panel emphasised the importance of not seeing ageing as a problem to be solved. Rather, problems arise when a city and its functions cannot accommodate the physical and social needs of the elderly in the society. In the same vein, it is important not to treat seniors solely as recipients of policies and initiatives: they should be enabled to be part of the solution as well. Dr. Miree Byun noted the importance of empowering seniors to help minimise risks of social isolation and perceived loneliness. She pointed out that the happiness index starts to decline in the mid-40s, and continues to do so instead of recovering; as citizens grow older, their sense of loneliness increases as they feel less empowered particularly after retirement.

Dr. Kiyota shared the example of her community programme, Ibasho, which sees seniors empowered to plan and develop a self-sustaining café and day-care centre, fully run by seniors for the rest of the community. Elders come together to discuss disaster risk management and draw up their own evacuation maps in light of potential earthquakes and flooding. Through Ibasho, seniors take ownership of a community resource and are drawn out of their homes, thus preventing social isolation.

Community support is key to an age-friendly city

An age-friendly city not only has to empower seniors, but also needs to leverage community support. Tapping on the community, for activities such as befriending services or even having neighbours check in on elderly neighbours, can help ensure a safer and more liveable city for seniors.

Dr. Eric Chu, the Mayor of New Taipei City, shared about his city’s Time Banking initiative which lets seniors and citizens volunteer their services to others in the neighbourhood, in exchange for time credits that can be drawn on in future for their own needs. Volunteers are trained by professionals for 40 hours before they go into the
field. The time banking scheme has seen 2,500 volunteers—most of them seniors themselves—and over 272,304 hours deposited. While this has saved the government some resources and manpower, it has more importantly helped nurture a community that can care for its own seniors.

Another citywide dining programme, ‘Dining with Seniors’, has also worked through community support to help elderly citizens find companionship: at 900 sites across the city, seniors can find others to eat a meal with.

Using technology to build an age-friendly city

The impact of technology in creating an age-friendly city emerged as a topic of interest. Panelists discussed how technology can alleviate some issues such as rising healthcare costs, and the growing strain on manpower. Mayor Chu called for private companies to step up and experiment with innovative solutions, particularly in the healthcare sector. Dr. Kiyota noted that while technology is helpful, the emphasis should be on using technology to create and sustain meaningful relationships that can support seniors.

Gender disparity in participation

Panelists and participants also discussed the persistent gender disparity in participation in age-friendly initiatives. Dr. Belinda Yuen noted that some elderly males in Singapore have expressed disinterest in the programmes or activities in the senior centres and are much more inclined to sit at void decks with their friends than go to a senior centre. Dr. Eric Chu concurred, noting that elderly males in New Taipei City are less predisposed to participate in the activities, with only 10% of active senior citizens being male seniors as of 2011. The discussion noted the importance of continuing to raise awareness, but also suggested redesigning programmes to cater to elderly males, who wish to be seen as useful, such as by having them teach a craft or repair old appliances.
As part of the joint CLC-SI Panel on Age-Friendly Cities at World Cities Summit (WCS) 2018, the Mayor of New Taipei City, Dr. Eric Chu was invited to share about New Taipei City’s population ageing and age-friendly initiatives.

No region will be more impacted by population ageing than Asia. Taiwan, South Korea and Singapore are ageing at a similar rate, with each expected to progress from an ‘aged society’ to ‘super-aged society’ in about 7–8 years. In New Taipei City, Taiwan, seniors currently make up 12.6% of citizens, a comparable proportion to Seoul’s and Singapore’s percentage of seniors in the population.

New Taipei City is Taiwan’s largest city, surpassing neighbouring Taipei in both area size and population. Since its establishment in 2010, New Taipei City’s focus has shifted from creating jobs to retain and attract young people to addressing its rapidly ageing demographic.

In 2012, the government formed a Senior Population Strategy Group with the aim of making New Taipei City more age-friendly. Similar to actions taken by cities around the world, New Taipei City has since carried out infrastructural improvements such as upgrading public transport and making public spaces barrier-free. However, the real success of New Taipei’s ageing initiatives lies in their management of the ‘software’: changing attitudes, improving caregiving support and working with stakeholders and community partners.

A main trope in New Taipei City’s ageing policy messaging is that seniors are energetic, fashionable, stylish and confident. Messages work to remove the association of ageing with disease and disability, fighting existing stigmas against seniors and nurturing inclusiveness. New Taipei City even finds innovative ways of incorporating positive messaging into disease management initiatives. In a bid to encourage seniors to check and treat presbyopia, New Taipei City began a campaign offering free reading glasses to those aged 65 and older. Publicity materials were designed akin to a fashion spread, drawing in seniors and challenging perceptions of the elderly as passé or disempowered.

New Taipei City also understands that increased demand for care work is intrinsically linked to population ageing. It works closely with its people to improve community support for caregivers. New Taipei City pioneered a ‘Volunteer Time Banking’ programme in 2013, training participants to be voluntary caregivers for current seniors. Participants clock in caregiving hours in ‘volunteer time accounts’ and can redeem these hours from other...
volunteers when they themselves grow old. Mobile Caretaker Cafes also provide venues for caregivers to rest, share experiences and seek professional advice on caregiving.

Finally, New Taipei City leverages the vibrancy of Taiwanese civil society, NGOs and private entities to sustain and improve initiatives. In creating an age-friendly city, the New Taipei City government takes on the role of initiator and facilitator, allowing communities and private entities to take the lead in maintaining programmes. In addition, New Taipei City recognises that fiscal resources are limited; it thus channels efforts to building strong partnerships with private entities. New Taipei City attributes much of the success of its age-friendly initiatives to autonomous community partners. An example of this is their popular ‘Joint Dining for the Seniors’ programme where seniors can visit 900 sites citywide to share food and make friends. After it was initiated by the government, many local communities, religious groups and private entities took it in stride to adapt the idea to their contexts, with some even pairing it with local farming initiatives. As of 2017, the programme counts over 1.5 million participants; the initiative is also being adopted by other Taiwanese cities.

Despite being a relatively ‘new’ city, New Taipei City’s experience and dynamism in programming for their ageing population offers interesting insights for other Asian cities on how to leverage on society’s strengths to come up with innovative and context-appropriate solutions.
Throughout the comparative studies between Seoul and Singapore, two aspects of ageing were evident and consistent in both cities: the need for seniors to continue ‘ageing-in-place’ and the need to encourage seniors to continue to live productively and purposefully through ‘active ageing’.

**Ageing-in-Place**

Housing is a fundamental need for all and it is much more than a physical space. A dwelling space functions as a foundation for maintaining physical and emotional health as well as social ties. Ageing-in-place is commonly understood as the ability to continue living in one’s home and community—as opposed to moving to an institutionalised care facility—comfortably and independently even as one ages. Ageing in institutionalised facilities can be more costly and it may reduce seniors’ independence and autonomy. On the other hand, facilitating seniors to age in a familiar neighbourhood empowers them, and allows them to maintain their connection to social support—particularly the social networks that they have built up in the community over the years.

An ageing-in-place approach requires the urban environment, housing and supporting services to be adaptable and responsive in order to enable seniors to comfortably and safely remain in their homes and communities for as long as possible.
Ageing-in-Place in Seoul and Singapore

Seoul's living and housing environment for the elderly lacks several desirable features. About 71% of all senior residents in the city live in a single-person or a two-person household. By housing type, 39.4% of Seoul's seniors live in apartment housing, while 59.1% live in detached or multi-family housing with relatively poorer access to heating, security, waste collection and other residential services. In short, Korea's housing policy for the elderly has not been adequate or timely enough to meet changing needs.

The first law to recognise the significance of housing for the elderly was the Welfare of the Aged Act enacted in 1981, but full-scale discussions only began in the 2000s when Korea began to experience population ageing. A study identified four prominent types of elderly housing welfare services. The first type, 'homecare service', provides housing benefits and improvement services necessary to maintain a house. The second is 'public rental housing', which provides seniors with ordinary public rental housing. The third type is 'serviced senior housing', whereby group homes and local community care services are matched for the benefit of low-income seniors. While these three housing service types are provided for those who live within their local community, the fourth type, 'residential welfare facility for the elderly', takes in seniors who cannot live on their own. In its elderly housing policies, Korea has focused attention on the fourth type rather than the first three. However, as of 2015, only 0.3% (19,909) of the entire senior population—a mere 5.3% of seniors on welfare benefits as of 2014—lived in such care facilities. This indicates that the policy has so far helped only an extremely small number of low-income senior citizens. There have also been limitations to policies that encourage the elderly to live within their local community. A considerable number of low-income seniors live in poor conditions (e.g., basement, semi-basement, rooftop structures), compromising the effects of the homecare service.

The Seoul Metropolitan Government (SMG) has recognised the significant limitations of its housing policies for the elderly. After joining the Global Network of Age-friendly Cities and Communities (GNAFCC), the SMG sees the concept of ageing-in-place as a guiding principle of housing policy for the elderly in future. The SMG is now actively pursuing housing policies based on the concept of ageing-in-place, although this is still in its early stages. The SMG’s experts and officials feel that the time is ripe for developing ageing-in-place programmes in Seoul.

In comparison, more than 80% of Singapore’s population live in public housing flats built by the Housing & Development Board (HDB). Each HDB town is planned to be walkable in scale, to promote familiarity among neighbours and facilitate community development over time.

Since the majority of Singapore’s elderly live in public housing, an ageing-in-place approach allows seniors to remain in towns where they have established bonds with neighbours and are familiar with their surroundings. These are sources of emotional and mental support to seniors as they age.

Singapore’s efforts to support ageing-in-place is reflected in the building of senior-friendly housing, and in initiatives to ensure accessibility in the built environment through building codes stipulating barrier-free accessibility and universal design. In selected towns with a higher proportion of seniors, infrastructure is also retrofitted (for example by installing handle bars or levelling uneven roads) to make the built environment more senior-friendly, allowing seniors to go about their day independently and safely.
Active Ageing

Ageing is a natural process that everyone goes through. While there is no universal consensus on the definition of active ageing, the concept is associated with an individual’s or population’s continued involvement in life and quality of life. Being active as one ages goes beyond physical or economic activity: it also means one continues to participate in various aspects of social life, including but not limited to social, civic and cultural activities.

To support population ageing, policies and programmes should enable seniors to stay active and healthy, remain physically and cognitively engaged, while staying connected to their loved ones as well as to the wider community.

Active Ageing for Seniors in Seoul and Singapore

While barrier-free buildings and safe neighbourhoods enhance the mobility and independence of ageing populations, both Seoul and Singapore recognise that to be an age-friendly city goes beyond the built environment—it requires social infrastructure that is age-friendly also.

The active ageing strategies in both Seoul and Singapore are similar in focus. Both cities adopt an approach that recognises and values seniors as they age, and ensures that seniors continue to have access to opportunities for health, participation and security.

As such, Seoul and Singapore have dedicated efforts to maintain seniors’ participation in the community through programmes to support re-employment, volunteering and lifelong learning. Both cities have also ensured that seniors can access services for good health and well-being even as they age and their physical or cognitive capacities decline. Most importantly, the active ageing approach is reflected in efforts to maintain an inclusive community, in which seniors are empowered, well-integrated and respected.

Overview of Case Studies

To better appreciate how Seoul and Singapore have translated the ageing-in-place and active ageing approaches, the next chapter shares a series of case studies that the research team has documented and reviewed.

To examine ageing-in-place, case studies feature Seoul’s and Singapore’s senior-friendly housing, integrated developments and community-based support efforts. Box stories highlight local efforts from both cities to develop age-friendly and inclusive neighbourhoods.

To look at active ageing, the case studies investigate Seoul’s and Singapore’s initiatives on lifelong learning and employment, health and wellness, as well as centres that facilitate and support active ageing. The box stories also showcase local initiatives that encourage the social participation and inclusion of seniors.

Overview of Case Studies

Age-Friendly Cities

Ageing-In-Place

Active Ageing

Housing for Seniors

Lifelong Learning

Integrating Needs

Well-being and Wellness

Community-Based Support

Centres for Active Ageing

Inclusive Urban Design

Local Initiatives
Seoul Case Study Locations

- Shinnae Medical Housing (SMH)
- Open Kitchen
- Gwangjin-gu Socio-Economic Cluster
- Seoul 50+ Foundation
- Reaching Out Community Service Center’s (ROCSC) Health Care Services
- Environmental Design for the Cognitively Impaired
- Borin Housing
- Senior Welfare Centers and Day Care Centers
Singapore Case Study Locations

- Studio Apartment (SA) and 2-room Flexi Scheme
- Kampung Admiralty
- Wellness Kampungs
- National Silver Academy (NSA)
- Goodlife! Makan
- Wellness Programme
- Community Network for Seniors (CNS)
- Innovative Planning and Design of Age-Friendly Neighbourhoods
- Senior Activity Centres (SACs) and Active Ageing Hubs (AAHs)
This chapter will examine how Seoul and Singapore enable ageing-in-place through senior-friendly housing and neighbourhoods, integrated medical and housing developments, strong community-based support systems and inclusive urban design.

**Housing for Seniors**
- **Seoul:** Borin Housing
- **Singapore:** Studio Apartment (SA) and 2-room Flexi Scheme

**Integrating Needs**
- **Seoul:** Shinnae Medical Housing (SMH)
- **Singapore:** Kampung Admiralty

**Community-Based Support**
- **Seoul:** Reaching Out Community Service Center’s (ROCSC) Health Care Services
- **Singapore:** Community Networks for Seniors (CNS)

**Inclusive Urban Design**
- **Seoul:** Environmental Design for the Cognitively Impaired
- **Singapore:** Innovative Planning and Design of Age-Friendly Neighbourhoods
Background

Jointly supported by the Geumcheon-gu district government, the Seoul Metropolitan Government (SMG), and Seoul Housing and Communities Corporation (SH Corp), Borin Housing is a shared housing facility available on public lease for senior citizens over 65 years of age and living alone.

The name Borin means ‘to protect neighbours.’ The elderly in Borin Housing live in a shared space so that they can protect and take care of one another. In a shared house, residents share a living room, kitchen and other common areas but have their own bedroom and bathroom. While this type of housing is quite common in Europe and Japan, Seoul was the first city in South Korea to introduce such dwellings in 2013.

By accommodating multiple households and sharing spaces, this type of dwelling encourages and promotes community living. A fairly new concept for the elderly in Seoul, all four Borin Housing projects (56 households) are currently located in Geumcheon-gu.

Since 2016, the concept has been implemented by local Gu governments in Seoul and nationwide.

Geumcheon-gu, where the Borin Housing programme commenced, had a significant number of low-income seniors who lived alone in substandard conditions. A Geumcheon-gu government in-house survey in 2015 found that 514 (31.8%) out of the 1,618 older adults in the area lived on their own in basement, semi-basement or rooftop units. Such units did not receive sufficient daylight and were often inadequately ventilated. Many of the residents had to share a bathroom with other tenants.

Based on this baseline data, the Geumcheon-gu government proposed a rental housing programme for elderly single-person households in the city. This was accepted by the SMG and SH Corp.

The Borin Housing programme was launched as part of a larger initiative to provide public housing for lease to target households, which include the elderly, the young, and newlyweds.

Pursuant to the Special Act of Public Housing, SH Corp purchases pre-existing houses and releases them under a public lease scheme, so that citizens have access to a stable supply of housing. The SMG purchases 2,000 units annually—1,500 units of multi-family housing and 500 studio units. At least 30% of purchased housing stock is allocated to seniors living alone, young adults, newly-weds, artists, single-parent families and women, on a priority basis.

The SMG decides on the supply of public rental housing to specific target groups and borrows from social investment funds to finance the construction projects. SH Corp (1) proposes quantity and pricing standards, (2) purchases new houses built by the private sector and (3) oversees general maintenance and management.

Community coordinators are sometimes sent to support housing welfare services for the target tenants of shared accommodation. Private contractors are responsible for general work related to construction, such as the purchase of land, design, and construction work. The Geumcheon-gu government selects tenants and manages deposit loans along with housing welfare services. The Happy House Group at the Geumcheon Self-Sufficiency Center dispatches managers to Borin Housing to support tenants and to source for external programmes and resources.

Eligibility for admission to Borin Housing:

- Geumcheon-gu resident
- Aged 65 years or older
- Lives alone
- Receives Basic Livelihood Security benefits

Cost of living in Borin Housing:

- Deposit: KRW 10 million (USD 9,040)
- Rent per month: KRW 60,000–70,000 (USD 55–63)
- Maintenance fee

Eligibility and Cost

To be eligible for admission to Borin Housing, a candidate must be a Geumcheon-gu resident aged 65 or older who lives alone and receives Basic Livelihood Security benefits. Pursuant to the National Basic Livelihood Security Act, benefit recipients are defined as individuals who earn no more than 30–50% of the median income and the minimum cost of living. They are eligible for livelihood, medical, housing and education support provided by the government. If the size and facilities of the Borin Housing permits, grandparents or single parent families are also eligible.
Demands for places is generally stable, with around 3 or 4 applications per vacancy. As tenants are required to share common areas and programmes with other tenants, they sign an agreement that establishes the rules of shared living and maintenance. The contract is renewed every two years. If eligibility conditions are satisfied, tenancy may be extended for up to 20 years.

Borin Housing tenants pay a deposit of around KRW 10 million, rent of KRW 60,000–70,000 per month, and an extra amount as a maintenance fee. It was found that many tenants had lived in substandard housing with KRW 3–5 million in deposit and KRW 10,000–20,000 in rent. While the Borin Housing’s deposit is on average more expensive than tenants’ previous expenditure, it is approximately 30% of local market rates for comparable accommodation. For those who cannot afford the deposit, the Geumcheon-gu government offers a loan of up to 90% of the total amount. Since most tenants are on welfare benefits, their monthly rent is paid with their housing benefits. Borin Housing rents its parking space to neighbours for a fee; this is used to help tenants with their maintenance fees and to mitigate their financial burden.

### Advanced-age-friendly Spatial Design

As of 2018, there are four Borin Housing buildings in Geumcheon-gu. Buildings #1, #3, and #4 are primarily residential, and consist of studio units and a shared community room on the ground level. Each unit has a folding chair for residents to wear their shoes.

<table>
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<th>Location</th>
<th>Doksan-2-dong</th>
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<th>Doksan-2-dong</th>
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<td>Number of Households</td>
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<td>Programme Cost (KRW 1 million)</td>
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<td>1,040</td>
<td>910</td>
<td>1,120</td>
</tr>
<tr>
<td>Nationally Funded</td>
<td>458</td>
<td>763</td>
<td>861</td>
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<tr>
<td>City Funded</td>
<td></td>
<td></td>
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<tr>
<td>Total</td>
<td>1,498</td>
<td>1,903</td>
<td>1,771</td>
<td>1,619</td>
</tr>
<tr>
<td>Builder</td>
<td>iBookee</td>
<td>DLIM Architects</td>
<td>iBookee</td>
<td>iBookee</td>
</tr>
</tbody>
</table>
The unit on the fifth floor of Building #1 is allocated to one single parent family (two residents) as it is relatively spacious for a one-person household.

Building #2 was previously part of the SMG’s Dure Housing Program but was soon incorporated into the Borin Housing system in collaboration with SH Corp and the Geumcheon-gu local government. Before Building #2 was built, the area was occupied by a senior community centre. To retain some of this original purpose, the second floor of Building #2 was converted to a senior community centre. Tenants have private rooms, each with a kitchenette and bathroom. They share the living room and kitchen in the centre.

According to iBookee, a social enterprise that built three of the Borin Housing buildings, its design for the buildings focused on creating senior-friendly spaces. For example, understanding that it is crucial for tenants of a shared house to also have sufficient independence and privacy, iBookee made sure its design incorporated studio units each with their own room, bathroom and kitchen. Community spaces have been included, to be used for meals together, meetings, welfare programmes or other events. The entire building is designed to be barrier-free, to aid senior citizens who are often limited in their physical movements. Automatic sliding doors, elevators and handrails have been installed. The floors of the common areas and residential spaces have been kept at the same height. Each unit features a folding chair (to help residents to safely and comfortably wear/remove shoes) and a video intercom for emergencies. A small garden has been built on the rooftop so tenants can grow their own organic vegetables. Solar panels have also been fitted to reduce the shared costs of electricity and maintenance.

Living Assistance and Management Bylaws

The Geumcheon-gu government has assigned Geumcheon Self-Sufficiency Center employees to Borin Housing as managers, to provide living assistance to tenants. Managers check on tenants, accompany seniors to medical clinics, maintain the building and help seniors with their daily needs and administrative issues. They also work actively with local health and welfare services, managing resident needs carefully to match public and private resources.

Personnel from public health centres visit the House weekly to provide medical check-ups while local government volunteer teams offer cleaning services. Local volunteers provide services such as acupuncture therapy and haircuts. Local organisations, medical clinics and businesses make other contributions in service and in kind. Such well-coordinated assistance has improved the quality of life for tenants.

A number of issues have emerged since the establishment of Borin Housing. These include excessive concentration of limited local resources on Borin Housing, and the growing dependence of seniors on the local government, managers and external resources for help.

In light of these concerns, seniors have begun to establish management rules and take charge of their shared living spaces. It started with Building #4 after all the tenants had moved in. A conflict arose among tenants over the use of common areas and waste management. The SMG sent in shared housing experts, who held four conflict resolution workshops.

Apart from training in conflict resolution, other events were also held to bring tenants closer together, such as a bibimbap day. After numerous discussions, tenants finally established the ‘Geumcheon Borin Together House Management Rules’ in December 2016. The rules cover general principles that govern shared living at Borin Housing, including: the rights and responsibilities of tenants; tenant organisation and assembly; building maintenance and the use of maintenance fees; common areas and community programs; conflict resolution; and action in the event of rule violations.
A good example of such collaborative efforts by seniors is a new system that assigns each tenant as a ‘leader.’ A leader is “a representative elected by tenants to manage and maintain building, tenant health, and other given areas.” At Building #4, the tasks to be carried out by these ‘leaders’ are shared among tenants. These roles include:

- a liaison leader, who contacts external institutions in case of emergency;
- a visiting leader, who visits each unit to see how tenants are doing on weekends and holidays when the manager is absent;
- a rooftop leader, who manages the use of the rooftop and garden;
- a safety leader, who inspects the building facilities regularly and reports any issue to the manager;
- a cleaning leader, who inspects the cleanliness of the waste and recycling area and common areas.

According to one expert who helped establish the rules, “seniors can often be stubborn, have strong personalities or are not used to discussion. The leader system assigns small roles so that seniors can share the responsibilities and make decisions together. It was designed to give them a sense of belonging to the community.” This management approach was also applied to other Borin Housing buildings in 2017. A satisfaction survey conducted in 2018 aims to confirm the efficacy of this system.

Conclusion

Borin Housing is a shared living space leased by the public sector to low-income senior citizens living on their own. It was established to overcome the limitations of Seoul’s housing policy for the elderly, which focuses on providing decent rental housing to low-income families.

Few or none of the Seoul’s current housing programmes specifically deal with low-income senior citizens. Local Gu governments used pre-existing programmes and resources to provide adequate incentives for the private sector to build senior-only houses. In turn, private contractors have proposed a safe and economical housing model quite unlike pre-existing group homes. It is tailored towards its intended target group of seniors, and balances shared living with privacy. It is also significant in combining housing cost assistance, living assistance, and management rules into one package to improve the overall quality of life for seniors.

Borin Housing is an exemplary model of ageing-in-place. It is based on the approach of purchasing existing properties to be converted to rental housing for seniors. Senior housing can thus be provided in areas where the elderly already live.

Smaller houses, with a capacity to hold up to 20 households, are more advantageous than larger facilities. It is easier for tenants to form a tight-knit community. Local neighbours are less likely to protest against accommodating the socially vulnerable in their neighbourhood.

While the SMG does not provide seniors with assistance in going about their day-to-day living, such support has been made available using local public and private resources. It is expected that this approach will help the Borin Housing programme go beyond its initial success and help make the entire local community age-friendly.

However, several issues remain to be addressed.

The first is to encourage senior tenants to stay independent. Comprehensive living assistance has indeed enhanced their quality of life, but tenants have grown increasingly dependent on external sources and service providers.

The second issue is the equitable distribution of limited local resources. There is concern that the concentration of local public and private resources on Borin Housing might deprive other low-income senior citizens of benefits. It may be worth considering opening up the common areas and programmes to local low-income senior citizens.

The third issue is to ensure the continuity of housing and care, by going beyond the Borin Housing programme to address elderly housing needs in a broader context. The current eligibility criteria for admission to Borin Housing does not consider the health conditions of the elderly. There is no specific plan to take care of a tenant if one falls ill or is involved in an accident. More specific guidelines should be established as to when and on what basis a certain type of housing is matched with a senior citizen, based on their individual age or health. It is also crucial to develop a good system of cooperation among the relevant authorities.
To better cater for independent elderly living, the Housing & Development Board (HDB) unveiled the Studio Apartment (SA) Scheme in 1998 as an additional housing option for elderly flat owners aged 55 years and above. The SA Scheme enables seniors, who were mostly living in 3-room and 4-room flat types, to unlock their housing equity by selling their existing flat and moving into smaller senior-friendly flats.

The SAs come in two sizes (35/36 m² and 45 m²) and can comfortably accommodate a one- or two-person household. The apartments are sold on a 30-year lease, with the option to extend for another 10 years.

The units are in ready-to-occupy condition: toilet and kitchen are fitted with wall/floor tiles, window grilles, a wardrobe, lighting, kitchen cabinets, a cooker hood and hob and a water heater. Elderly-friendly features in the SAs include lever taps, rocker switches, non-slip tiles, levelled flooring between different parts of the flat, a bathroom with support hand bars, an Alert Alarm System (AAS), an enlarged door eye viewer and support hand bars along corridors.

The SA projects also feature an on-site drop-in centre for vulnerable seniors living in the SA flats. These centres have basic alert alarm monitoring and emergency response during operating hours. These facilities are mainly operated by commercial operators or Voluntary Welfare Organisations (VWOs).

Many seniors have taken advantage of the SA Scheme. It was found that two-thirds of them were below 65 years of age. Half were living alone, being divorced, single or widowed. 22% had remained in the same HDB town.

In 2013, the Studio Apartment Priority Scheme (SAPS) was introduced to give priority to the elderly buying an SA near their married children or their existing home. It also sets aside half the flat supply for those eligible under the scheme.

In the span of some 18 years, HDB has offered 72 SA projects, comprising over 11,900 units across Singapore.

2-room Flexi Scheme

In August 2015, after incorporating public feedback, Ministry of National Development (MND)/HDB announced the new 2-room Flexi Scheme to cater to the diverse needs of families, singles and the elderly.

The scheme merged and replaced the
SAs (specifically targeted at the elderly) and 2-room flats (catered to general buyers including families and singles), which were similar in size. It offered flat buyers, including the elderly, increased flexibility through the following three features:

- **Catering to the diverse housing needs of different flats buyers, i.e. the elderly, families and singles.**

- **Flexible choice of fittings.**

  Elderly buyers of short lease flats can choose from three Optional Component Scheme packages. These include flooring, sanitary fittings, built-in kitchen cabinets, with induction hobs and cooker hood, kitchen sink, window grilles and built-in wardrobe.

- **Flexible lease terms for senior citizens aged 55 and above.**

  Instead of a fixed 30-year lease under the SA Scheme, the elderly can choose to buy a 2-room Flexi flat on short lease from 15 to 45 years (in five-year increment), as long as it covers them and their spouses up to the age of 95 years.

The new 2-room Flexi Scheme supports inclusive living by bringing together people of different demographic profiles within the same estate.

Similar to SAs, the short lease 2-room Flexi flats cannot be sold or rented out on the open market. If the elderly no longer need the flat, they may return it to HDB and be refunded the value of the remaining lease of the flat. In the unfortunate event that the senior passes away during their stay, the flat will be passed to their estates. Family members, if eligible, can continue living in the flat for the balance of the lease. Alternatively, HDB will reimburse the beneficiaries based on the value of the remaining lease of the flat.

To ensure an adequate supply for the elderly, at least 40% of the 2-room Flexi flat supply is set aside for seniors. Half of this quota is allocated under the Seniors Priority Scheme (SPS) to those who are right-sizing in a familiar environment or are applying to stay near their married child.

Unlike SAs, HDB will no longer provide fixed pull-cord alarm systems, as their positions are fixed. Instead, HDB has been working with partners to explore electronic communication devices and smart alert systems to monitor the safety and well-being of elderly HDB residents. Trials have already been conducted in some estates. Moving forward, residents will be able to subscribe to smart alert systems available in the market directly from a service provider. HDB and the Ministry of Health (MOH) are also working together to provide elderly facilities strategically in selected Built-To-Order (BTO) projects.

The 2-room Flexi Scheme has seen a higher take-up rate by the elderly (>90%), compared to the average take-up rate for SA projects (79%) launched in the first half of 2015.

The Future Ahead

As society ages and more elderly stay on their own, housing for the elderly will need to go beyond infrastructural changes (i.e. “Hardware”). Complementary social, custodial and care services (i.e. “Heartware”) are also needed to enable seniors to remain active, mobile and healthy.

Singapore’s concerns have primarily to do with continuing to provide accessible, quality and affordable care to seniors in a landscape with shrinking family sizes and weaker caregiver support for frail seniors. There is thus a need for eldercare services to better integrate social and health aspects to meet seniors’ needs more holistically.

Nevertheless, as illustrated by the evolution of the SAs to 2-room Flexi flats, supplying senior housing options that meet changing lifestyles and preferences is a priority in Singapore’s housing planning. MND and HDB continue to work closely with the public and relevant stakeholders to ensure housing provisions are responsive to present and upcoming ageing trends.
Singapore’s Public Housing Policies and Schemes for Seniors

Studio Apartment Scheme
Smaller apartments with elderly-friendly features for seniors aged 55 years and above.

2-room Flexi Scheme
Under this scheme, seniors have the flexibility of choosing the length of lease for their 2-room Flexi flat based on their needs as long as it covers them and their spouses up to the age of at least 95 years.

Lease Buyback Scheme (LBS)
Seniors may sell part of their flat’s lease to HDB and retain the length of lease based on the age of the youngest owner. The proceeds will be used to top up their Central Provident Fund (CPF) Retirement Account (RA), and they will use their RA savings to join CPF LIFE for a lifelong monthly income. Furthermore, they will receive an additional cash bonus of up to SGD 20,000 (USD 14,607). The seniors can continue to stay in their flat after joining the scheme.

Enhancement for Active Seniors (EASE)
EASE allows improvement items to be installed in the flats to make it more elderly-friendly. Eligible households enjoy subsidies of up to 95%. Depending on their flat type, the share of cost ranges from SGD 125 to SGD 312.50 (USD 91 to USD 228) for 3 improvement items, namely slip-resistant treatment to existing floor tiles, installation of grab bars and ramps.

Silver Housing Bonus (SHB)
Up to SGD 20,000 (USD 14,607) cash bonus is given if the senior right-sizes to a smaller flat (up to 3-room) and uses some of the net sale proceeds to top up their CPF RA, and joins CPF LIFE for a lifelong monthly income.

Seoul: Shinnae Medical Housing (SMH)

Background
Shinnae Medical Housing (SMH) is a public rental housing scheme tailored to meet the medical needs of the disadvantaged elderly. As part of Seoul Metropolitan Government’s (SMG) policy to provide 80,000 units of rental housing, SMH is a project to provide medical, welfare and healthcare services by combining the public rental housing facilities with the functions of public healthcare and medical services.

To afford people with impaired mobility easier access to hospitals, the project required SMH to be located within a 500-metre radius of any municipal hospital, community health centre or national medical institution. As the first example of the project, SMH was located opposite the Seoul Medical Center in Shinnae-dong, Jungnang-gu. It opened in August 2015 with two buildings (B1–7th Floor) housing 222 households in total (92 households in 18 m² units and 130 households in 29 m² units). Households are spread over a total ground area of 13,099.58 m².

Front view of Shinnae Medical Housing.
SMG set up a Task Force to build housing based on the medical needs of residents in Korea. The Task Force established design requirements and guidelines, bearing in mind potential residents such as the elderly and people with disabilities. Publicly appointed architects provided advice on the project in general. Government departments responsible for healthcare policy, the welfare of senior citizens and support for the disabled also provided active assistance in the planning and implementation of the project.

On July 28, 2015, the Jungnang-gu local district office, the Seoul Medical Center and the Seoul Housing and Communities Corporation (SH Corp) —three organisations in charge of operating and supporting the medical housing project—signed an agreement. The Jungnang-gu district government would be responsible for operating senior community centres, and managing community welfare centres as well as community health centres. Seoul Medical Center would provide healthcare programmes for residents, in cooperation with the community health centres. The Center offers a free health consultation twice a month, with a hotline to an emergency medical centre. SH Corp would be responsible for constructing the SMH, and for housing management: including maintenance and living support services.

**Eligible Residents**

Any resident of Seoul who is older than 65, with a chronic disease, such as high blood pressure and diabetes, or uses a wheelchair

**Qualifications and Residential Costs**

Any resident of Seoul older than 65 years of age, with chronic diseases such as high blood pressure and diabetes or uses a wheelchair, can live in SMH. Of the 212 units available in SMH, 70% (147 households) were provided to elderly residents in Jungnang-gu. The remaining 30% were provided to Seoul citizens who lived outside Jungnang-gu. 10 housing units were set aside as a special provision for Seoul Medical Center staff in charge of responding to emergency situations.

The residential costs of SMH are relatively lower than for public housing in general. The rental cost for an 18 m² unit for single-person households is KRW 120,000 a month with KRW 9.1 million in deposit; a 29 m² unit for two-member households is KRW 190,000 a month with KRW 14 million in deposit.

**Living Support Services**

The superintendent’s office, operated by Dongdaemun Housing Welfare Support Center under SH Corp, oversees the maintenance of SMH and provides support for the residents. On 21st April 2016, business agreements were signed with 8 different agencies including: Municipal Senior Care Center in Central Seoul, Shinnae Municipal Senior Welfare Service Center, Wongwang Welfare Center for the Disabled, Yeongan Welfare Foundation, Jungnang Fire Station, Jungnang Police Station, Yongma Municipal Senior Welfare Center and the Seoul Kkottongnae Maintenance Foundation. These agreements provide for a range of senior welfare programmes such as knitting, ping-pong, health consulting, health

**Overview of Shinnae Medical Housing**

**Roles of Organisations**

- **Jungnang-Gu Local District Office**
  Management and programming of community welfare centres and community health centres.

- **Seoul Medical Center**
  Provision of healthcare programmes for residents together with community health centres. Community health centres offer residents free health consultation twice a month and operate an emergency hotline service to medical centres.

- **SH Corp**
  Construction of SMH and housing management such as building maintenance and living support services.

**Average Cost**

- **18m²**
  For single-member households
  KRW 120,000 (USD 107) a month with KRW 9.1 million (USD 8,136) deposit

- **29m²**
  For two-member households
  KRW 190,000 (USD 170) a month with KRW 14 million (USD 12,512) deposit
education, tests for dementia, haircuts, gardening classes and movie events as well as services such as preventive patrols, fire and safety training, companion services and the offering of goods to residents.

**Place Design**

The two SMH buildings surround an inner court. The 1st and 2nd floors are community spaces and the 3rd to 7th floors are residential areas.

The 1st floor consists of the superintendent’s office, restaurants, cafés, care centre and welfare facilities. Since the law limits what areas can be used for medical treatment, not all medical services are available in SMH. The care centre on the 1st floor offers simple medical services such as check-ups and physiotherapy. The SMH also carries a range of equipment such as a blood pressure gauge, a diabetograph and emergency kits. This allows residents to monitor their health by themselves. It also features a small-sized bathhouse for the elderly and disabled with impaired mobility, as well as fitness centres.

The community zone on the 2nd floor is divided into a guesthouse and a hobby centre. The guesthouse is a more spacious area for receiving visitors in lieu of the small studio units. It also has a rest area connected to a nearby park. The hobby centre is intended for residents who share the same hobbies to exchange information and ideas. Each facility is connected directly to the residential area, and equipped with a ramp for wheelchairs and a hand rail for better access by residents.

The rooftop, named the “Sky Garden”, accommodates 80 sectors of vegetable gardening lots. Here, residents can farm till November, after being randomly assigned a lot in February. Having the residents grow a variety of vegetables and fruits and sharing their produce with neighbours promotes community spirit as well as emotional health.
In addition, the interior and exterior of the SMH is designed as a barrier-free zone. Differences in floor levels have been removed for easy access to the complex. The corridor width has been expanded to 2.1 m so that two wheelchairs can use it at the same time. In addition, the number of ramps have been minimised. Hand rails have been installed on the wall, to aid the elderly with impaired mobility. Each unit in the SMH features a large entrance to ease access for wheelchairs and moving beds. There are patio chairs and handles so that the elderly with back pain can easily put on or take off their shoes. There are also special storage spaces for wheelchair-bound residents. The threshold of each bathroom has been reduced to level the floor. A folding chair is installed in each bathroom, so that residents can take a shower while seated.
A significant feature of SMH is the life rhythm checking system. A motion detector is installed in each unit, so that if any resident fails to use the entrance, bathroom or any such facility for 24 hours or longer, the superintendent will automatically be notified. By doing so, the SMH managers can monitor the health condition of residents and ensure that the elderly who live alone do not die alone. Moreover, emergency alarms are installed in several places in each housing unit: such as in the bathroom and living room. An emergency-bell necklace is provided to each resident: if they push the bell at any time, the superintendent will attend to them immediately. When necessary, residents can be referred to the 119 centre or Seoul Medical Center’s emergency room, under the ‘two-way safety system.’

Conclusion

SMH is significant because it is the first project in which housing and medical services are integrated to allow the elderly to live independently. However, some challenges remain.

First, medical service is not provided within each housing unit. While there are national hospitals or public health centres within 500 metres of SMH, they are limited to providing emergency medical services. At the very least, amenities for providing first aid should be available within individual homes.

Second, it is beneficial for the elderly to have stable housing for the long-term. However, the SMH programme is limited in being able to cope with the elderly who cannot live on their own. There is no plan to extend housing service to senior citizens who cannot carry out daily activities without caregivers. Eventually, the SMH programme should be linked to related services such as nursing care facilities, so that the elderly can make a smooth transition if needed.

Third, senior housing in general is often not welcomed by the local community, who adopt a ‘NIMBY’ (Not In My Backyard) attitude. There needs to be good, ongoing communication between the housing authority and local communities.

Singapore: Kampung Admiralty

As part of the Singapore Government’s effort to transform housing and healthcare, Kampung Admiralty is the nation’s first public housing innovation for seniors aged 55 years and above. It integrates residential with healthcare, recreational and commercial facilities. Set amidst a lush green environment and offering Universal Design elements, this modern kampung (a Malay word which means village) serves as a one-stop hub that helps senior citizens age-in-place, encouraging them to live active and healthy lives through its innovative design, communal spaces and sustainable features.

The location of the site, in the northern part of Singapore next to Admiralty Mass Rapid Transit (MRT) station in Woodlands town, presented an opportunity to introduce innovative land use strategies, such as the vertical integration of various facilities under one roof.

Design Concept

Input from a range of public agencies led to the development of a robust design brief, which emphasised tiered social spaces and the seamless integration of uses. To accommodate various amenities within a tight site, the development was designed with facilities stacked up in layers.
On the ground level, the brief called for a large public space for community activities and interaction. For the mid-tier, a semi-public space was planned for residents and the community to exercise, relax, bond with neighbours and friends, or participate in gardening activities at the community park and farm. Studio apartments, beginning from the 4th to 11th floors, constitute the private spaces for residents.

Shops, a bank and a supermarket are located on the 1st floor and in the basement. A hawker centre on the 2nd floor overlooks the community plaza. A medical centre occupies the quieter 3rd and 4th floors. A childcare centre and Active Ageing Hub (AAH) located on the 6th and 7th floors have been placed next to each other to facilitate cross-programming.

The studio apartments (of 36 m² and 45 m²) are housed in the two 11-storey blocks. Consisting of 8 units per floor, each studio apartment is designed to overlook the sky gardens. The finishes and fittings have been carefully chosen to offer the elderly a safe and comfortable living environment.

At Kampung Admiralty, a total of 104 studio apartments are housed in two 11-storey residential blocks. The floor plans of the 36 m² and 45 m² units are shown above.

The units are in move-in condition, complete with finishes and fittings carefully chosen to provide the elderly with a safe and comfortable living environment. For example:

- Resilient (vinyl) strip flooring has been chosen for its slip- and moisture-resistant quality. It is safe, durable and easy to clean.

- Elderly-friendly and safety features, such as grab bars, a ramp at the entrance of the unit and bigger switches, are also provided to aid mobility and ageing-in-place.
• The kitchen is fitted with cabinets, a cooker hood and an induction hob. The induction hob was chosen as a safer and cleaner option for seniors. Unlike conventional gas or electric stoves, induction hobs do not involve open flames for cooking, thus eliminating the risk of fire or gas leakage. The cooking zone also cools down faster and is easier to clean.

• A retractable clothes drying rack is installed in the kitchen. It can be swung out through the window to allow clothes to be dried outdoors.

• The kitchen is fitted with cabinets, a cooker hood and an induction hob. The induction hob was chosen as a safer and cleaner option for seniors. Unlike conventional gas or electric stoves, induction hobs do not involve open flames for cooking, thus eliminating the risk of fire or gas leakage. The cooking zone also cools down faster and is easier to clean.

All the units were sold when they were first launched for sale in July 2014. Half of the flats were set aside for eligible seniors under the Studio Apartment Priority Scheme (SAPS), which gives priority to elderly residents who want to age in place, or live near their parents or married children. About 6 in 10 of those who bought a flat at Kampung Admiralty were previously residents of Woodlands or nearby towns such as Sembawang or Yishun.

Besides optimising land use, the project was designed to achieve the following objectives, through a combination of hardware, software and ‘heartware’:

• Encouraging Active Living and Social Interaction

A key feature of this “vertical kampung” is the fully sheltered Community Plaza on the ground level. The 1,000 m² plaza is an ideal venue for large scale sports and fitness activities (such as zumba, yoga or line dancing), educational events (such as cooking classes, health talks, or handicraft workshops), performances (such as singing, cultural or talent shows), festivities and so on. Such activities add life and bustle to Woodlands town.

• Promoting Intergenerational Bonding

• Facilitating Wellness and Care.

Encouraging Active Living and Social Interaction

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Residents contribute ideas for activities and events they would like to participate in at the Community Plaza.

The Community Plaza is a vibrant spot where residents can enjoy events and activities all year round. For example, “Let’s Play @ Kampung Admiralty” is a community engagement effort that brings together residents of all ages through games and group activities.
At the high-rise Community Farm located on the rooftop, residents bond over gardening activities. The 180 m² community garden features more than 30 species of tropical plants (such as fruit trees, herbs and spices, vegetables, and medicinal plants), most of which are edible.

Through the National Parks Board (NParks)-led Community in Bloom programme, residents harvest edibles from the Community Farm to use in their cooking. Such activities bring residents together through a common hobby which also promotes health and well-being.

Besides outdoor gardening, indoor gardening workshops have also been organised to beautify the indoor spaces at the AAH.

Promoting Intergenerational Bonding

Within the development, a childcare centre is co-located with an AAH. The AAH promotes active ageing and provides care services for seniors in the vicinity. The Community Park and a playground are located in front of the two centres, so the young and old can interact and bond when using these facilities.

Weekly events such as musical performances and outdoor gardening activities help to encourage inter-generational bonding. Parents are encouraged to be role models to their children, by visiting and delivering meals and groceries to seniors who are less mobile or seniors who live alone.

This helps improve the psychological well-being of the elderly.

Facilitating Wellness and Care

At the AAH, active ageing programmes (such as life skills courses for seniors) and preventive health programmes (such as health checks and fall-risk screenings) help keep seniors in the community healthy and safe. A community nurse is on site to check the senior’s vitals and advise seniors, referring them to specialised care if necessary.

A weekly Share-a-Pot® cooking session at the AAH mobilises the elderly to cook and partake in meals together. Located on the 3rd and 4th level of the complex, the Admiralty Medical Centre provides one-stop, comprehensive medical services. Specialists from nearby Khoo Teck Puat Hospital deliver specialist outpatient services, day surgery, endoscopies, rehabilitation and diagnostic services to residents. An in-house Diabetes Centre provides care for complex diabetes patients. To help residents stay healthy, the medical centre also provides a range of community health education programmes and chronic disease management.

An on-site integrated pharmacy offers a range of personal care & wellness products, health supplements and medication at affordable prices.
Residents have easy access to specialist medical care services at the Admiralty Medical Centre.

To promote healthy eating, the operators of the supermarket and hawker centre at Kampung Admiralty have included healthier options on their menus. Up to 50% of food offerings at the hawker centre are healthier choices. At the supermarket, there are dedicated bays for products with the Healthier Choice Symbol, including organic products, brown rice and so on, to improve their visibility to shoppers.

Sustainable and Green Features for Residents’ Wellness

The lush greenery cascading from the rooftop and throughout the entire development provide visual relief for both residents and visitors. Rain gardens and bioswales to treat surface water runoff further “greenify” the landscape.

Other sustainable features include a Pneumatic Waste Conveyance System which serves the entire development. The system eliminates the need for manual waste collection from individual refuse chutes. Solar panels installed on top of the two residential blocks harness solar energy to power common services.

Conclusion

As Singapore’s first public integrated development, Kampung Admiralty is not only piloting a new approach to integrate housing and healthcare services, but also building strong community support for seniors and encouraging greater intergenerational bonding.

The approach in developing Kampung Admiralty was novel and holistic as it considered various facets of a senior’s life—from living to health, family and community. Such a planning approach is needed for seniors to truly age in place within their neighbourhoods.

The overwhelming interest from seniors to live in Kampung Admiralty indicates a large demand and preference for residing in such integrated developments. The future challenge then is in expanding and adapting such developments to other neighbourhoods. HDB, together with partner agencies, is currently exploring the feasibility of applying the Kampung Admiralty model to other towns, taking into consideration the particular needs of each town.
Seoul: Reaching Out Community Service Center’s (ROCSC) Health Care Services

Reaching Out Community Service Center (ROCSC) is a major project of the 6th democratically elected Seoul Metropolitan Government (SMG). With expanded personnel in each dong office, the programme promotes citizen awareness of welfare and healthcare services and strengthens cooperation within the community. From the perspective of taking care of an ageing population, ROCSC has revolutionised services for elderly welfare and healthcare, shifting the paradigm from selective to universal, from application-based to discovery-based and from government-driven to public-private partnerships. The ROCSC project has expanded from 80 dongs in 13 local districts (2015) to 283 dongs in 18 local districts (2016) and to 342 dongs in 24 local districts (2017). Since August 2017, the national government has been benchmarking the ROCSC project, which has received ever more public attention.
Reaching Out Community Service Center

A number of welfare benefits are distributed by local governments. These include cash benefits, such as basic living assurance, and other service benefits for the elderly, people with disabilities, children and youth.

In Seoul, these are administered by the Gu district governments. Most of these services are performed after applications are received at a dong office. The dong is the smallest administrative authority in Seoul’s municipal system, and the role of each dong office in the welfare delivery system is vital. Since the 1990s, the Korean government has tried to improve the standard of public welfare through the reorganisation of dong offices. However, the reorganisation of the welfare delivery system by the central government was hampered by a lack of manpower. Moreover, the national government’s broad approach to implementation did not fully reflect local contexts. It only focused on improving service accessibility for the poor.

Mayor Park Won-soon, who took office in 2011, has sought to expand the welfare budget and policies of Seoul, which had been considered weak to date. SMG put forth its 3rd community welfare plan (2015–2018) with an increased budget; its strategic goals were to strengthen universal welfare, mitigate social polarisation, revitalise local welfare community and strengthen the welfare delivery system.

Seoul launched the ROCSC project as a welfare programme to realise this plan. It conducted a major reform of dong offices, which are at the forefront of the welfare delivery system, with the following steps:

First, SMG increased the public workforce to a large extent. From 2011 to 2014, the number of beneficiaries who receive benefits under various systems had increased by 79%. However, the public workforce had increased by only 18%. The workforce had to grow in order to ensure the smooth functioning of welfare systems. In the past, the central government and other municipalities had not been able to make much headway because they had not applied the appropriate metrics whenever they attempted to reform the welfare delivery system. SMG increased the average number of welfare officers in each dong office by 5.8, and the number of visiting nurses by 1.2. As a result, a total of 2,450 welfare workers and visiting nurses have been added in Seoul from 2015 to 2017.

Second, SMG undertook an administrative revolution: citizens would not need to go to public officials but public officials would reach out to them instead. Public social workers and nurses would visit not only the poor and vulnerable, but also all newborns and the elderly, to ascertain their health and well-being. Public officials would also provide information and services appropriate to each situation.

Third, SMG built a one-stop service through cooperation with other agencies. Under Korea’s welfare delivery system, the central government manages over 360 projects, while local governments oversee 170 projects. These are carried out to different standards, making it difficult for the projects to benefit people in need. However, the ROCSC system facilitates coordination between the administrative, welfare and health sectors at the dong office level, so that a range of residents’ issues (such as poverty, jobs and health) can be reviewed at once, and a comprehensive response provided.

### Changes in the Social Welfare Budget of SMG

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<tbody>
<tr>
<td><strong>Total Budget</strong></td>
<td>217,829</td>
<td>235,069</td>
<td>244,133</td>
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<tr>
<td><strong>Net Budget</strong></td>
<td>199,496</td>
<td>206,287</td>
<td>215,498</td>
<td>228,427</td>
<td>242,350</td>
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<tr>
<td><strong>Social Welfare Budget</strong></td>
<td>51,658 (25.9%)</td>
<td>60,285 (29.2%)</td>
<td>68,425 (31.8%)</td>
<td>78,349 (34.3%)</td>
<td>83,452 (34.4%)</td>
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The ROCSC system facilitates coordination between the different sectors so that a range of residents’ issues, including health, can be reviewed at once.
Fourth, SMG worked to create a health and welfare ecosystem in collaboration with private institutions and community groups. This is because it is difficult to cope with the welfare and health needs of the local community with only public resources. Towards this end, ROCSC reformed the system to facilitate cooperation between public and private organisations, in order to address blind spots. At the same time, SMG also promoted a supporting scheme that allows the community to gather resources through initiatives such as community funding, community planning and a vibrant community centre.

**Reaching Out Health Care Services**

In terms of Seoul’s efforts to be a senior-friendly city, what is most remarkable about the ROCSC project is its ‘Reaching Out Health Care Services’ initiative. The ROCSC’s vision for the healthcare sector is “to live a long and healthy life in the community”—which aligns with the principles of “Ageing-in-Place” and “Active Ageing” in the World Health Organisation’s (WHO) guidelines for an age-friendly city. Health promotion is essential for successful ageing, but it needs to take into account complex, multi-layered determinants: from individual biologies and lifestyles to national socio-economic conditions. There are also community-level factors such as the environment, economy, as well as the cultural contexts and social networks of the areas in which people reside. In order to promote elderly health, the ROCSC project aims to strengthen capacity not only at the individual level but also at the community level, with resident participation and cooperation across each sector. To accomplish this, SMG set up a promotional strategy based on the three values of Accessibility, Sustainability and Integration along with eight detailed projects.

**Vision System of the ROCSC Project for the Health Sector**

**Vision**

To live a long and healthy life in the community

**Values (Strategies)**

- **Accessibility**
  - Resolving blind spots/health gaps

- **Sustainability**
  - Health promotion throughout the entire life cycle

- **Integration**
  - Integration with the community

**Projects**

- Universal health management visits
- Intensive management of high-risk groups
- Health promotion for infants and young children
- Health promotion for the elderly
- Provision of health information to entire generations
- Integrated health-welfare services
- Public-private cooperation
- Linking the resources of the community
The model to achieve accessibility and sustainability is the ‘Reaching Out Health Care Service’. The elderly over 65 years of age are visited by a public social worker and a visiting nurse. So far, most public welfare services have been means-tested, i.e. provided based on residents’ wealth. However, services in the ROCSC project are provided universally to all the elderly regardless of their income level. Age 65, which marks the onset of senescence, tends to indicate greater welfare needs. There is tremendous room for improvement in health behaviours for this segment (compared with the elderly of a greater age), in terms of providing health education and information. It is meaningful for public health and welfare officers to visit applicable households in this age band, because it has turned the application-based approach of current public welfare programmes into a discovery-based one.

The Reaching Out Health Care Services are provided as follows: First, the government finds out who it needs to visit. Based on resident registration information or introductions by residents, all elderly persons between 65 and 70 years old are identified. Then the government schedules a visit by phone. In consultation with the National Health Service, health information is used only for elderly persons who have agreed to follow-up management during their health examinations.

Second, the government visits the family and conducts a health assessment. Consent to carry out continuous management is obtained from the elderly person. Then they are registered as a subject. Next, comprehensive health evaluation and counselling are used to identify risk factors and health problems for the target group. This evaluation includes basic measurements such as any degree of weakness, a geriatric depression scale assessment, a suicide tendency test, a dental check-up, a screening for dementia (MMSE-DS), and alcohol dependency. According to the results and health risk levels, subjects are divided into the intensive management group, regular management group or the self-capacity supporting group. In addition, an individual health management plan for the elderly is designed. Information, training or services that could help them improve their health behaviours—such as quitting smoking, eating less salt, taking medication or regular exercise—are provided directly or indirectly.

Third, different services appropriate to each type of management group are provided. The intensive management group is visited once a week or every other week. The regular management group is visited once in 2–6 months. The self-capacity supporting group is visited once in 4–12 months to receive health management services.

Fourth, a re-assessment on health levels is conducted annually. Each elderly person’s management type is re-adjusted according to the assessment results. If the subject is able to manage their health by themselves or if the total period of non-visits exceeds two years, the registration of the subject is cancelled.

To integrate service provision with the community, visiting nurses provide healthcare services in collaboration with a range of local organisations and community groups. Under this cooperative system, public healthcare institutions —such as the community health centre, dementia supporting centre, mental health promotion centre and integrated support centre for addiction management—are linked with private medical institutions such as private clinics or hospitals and “safe pharmacies”. Integrated case management is provided by the dong as well as public welfare programmes including long-term medical treatment services. Each dong office coordinates this integration, taking into consideration their local context.

Cooperation System for Provision of Comprehensive Health Management Services

- Private clinics/ hospitals
- Community health centres and branch offices
- Dementia supporting centres
- Mental health promotion centres
- Integrated supporting centres for addiction management
- Visiting nurses for the elderly
- Long-term medical treatment services
- Bioptope health ecosystem
- Relationship with welfare and community support (case management)
How Reaching Out Health Care Services are Provided

1. DISCOVERY OF SUBJECTS

List of eligible residents is compiled from:
- Data in the Livelihood Welfare Comprehensive Information System
- Dong residents registration network
- Happiness e-eum System
- Neighbourhood officials

The elderly subjects are sorted into an intensive management group, regular management group or self-capacity supporting group.

2. REGISTRATION OF SUBJECTS AND HEALTH EVALUATION

65 years old:
- A plan established by the welfare planner

70 years old:
- A plan established by the visiting nurse

Health assessment
- Health risk factors and health problems are identified from a basic research table and a health consultation.

In consultation with the National Health Service, health information is used only for elderly persons who have agreed to follow up management during this health examination.

3. CONTINUOUS HEALTH MANAGEMENT

- The intensive management group: Should be visited once every week or every other week
- The regular management group: Should be visited every 2–6 months (working staff visits homes or external community healthcare centre is referred to residents)
- The self-capacity supporting group: Should be visited every 4–12 months.

4. HEALTH REASSESSMENT

A reassessment is conducted annually if the subject is able to manage their health by themselves. If the total period of non-visit exceeds 2 years, the registration is cancelled.

Classification of Groups

- Intensive
- Regular
- Self-capacity

Registration of subjects

☑️ 65 years old
☑️ Not vulnerable
☑️ Gave consent
Major Achievements of the Reaching Out Health Care Services

The health sector of the ROCSC project, with 80 dongs in the first year and 283 dongs in the second year, achieved the following results:

First, the registration rates of the Reaching Out Health Care Services in 2017 were 53.8% for the elderly aged 65 years or older, and 50.1% for those aged 70 years or older. This indicates that services have been universally provided to over half of the total elderly population under consideration. The visiting rate was 384.4%, meaning that nurses visited a patient about 3.8 times in a year. 25.0% of the cases received continuous management. This shows that a regular healthcare programme has been implemented, in lieu of a trend of one-off visits. In terms of linking up health and medical resources, there were 110,701 cases where public health and medical resources were linked together in the community. In the second year of the project, 6,461 senior health education sessions were held, for 53,276 participants—a significant increase from the first year.

The Reaching Out Health Care Services initiative has been very successful in uncovering blind spots. Through comprehensive tests for senior depression, suicidal tendencies, dementia and weakness, 4.3% to 33.4% of elders in high-risk groups were discovered. Since seniors have impaired mobility and lack health information, it is difficult for them to be examined through direct visit by the institutions. Hence, it is a significant achievement to have found these subjects who might have otherwise been missed.
The satisfaction rate for ROCSC has been high. Of those who have used the services, 700 elders aged 65 years and 300 elders aged 70 years were surveyed on a scale of 1 to 5. The respondents said they received the healthcare and information they needed (3.93), the consultations with visiting nurses were easy to understand (4.23), the services were helpful for their own health management (3.82) and they were satisfied with the quality of services in general (4.11).

In addition, many dongs have actively conducted senior health promotion projects with community participation and cooperation. Some examples include:

“Depression Out”: The disease prevention department of Seongdong-gu operates a healthcare programme called “Depression Out! Let’s meet outside the house” for depressed or secluded seniors. It helps seniors who spend their elderly years at home lead healthy and happy lives, by helping them to engage with other people and with the world outside their homes. It consists of three detailed programmes for physical activity, cultural experience and nutrition management.

Healthy food provision for seniors with feeding difficulties and households with persons with disabilities: Of the 165 single households who are beneficiaries of the Basic Livelihood Security allowance in Haengdang 2-dong, 98 households (59.4%) are elderly persons who live alone. After observing that some of the elderly had difficulty in eating, a community activist in Haengdang 2-dong thought that healthy and digestible rice porridge should be provided. Since January 2016, the dong office and 7 members of the community association in Haengdang 2-dong have brought healthy rice porridge to 40 vulnerable households, including seniors and persons with disabilities, once a month. These visits also keep the elderly company, relieving them of their loneliness. This meaningful collaboration between the public and the private sectors resolves a welfare blind spot, mitigating the elderly’s loneliness and sense of alienation with regular communication and visits.

Conclusion

The ROCSC project aims to raise the minimum level of welfare and health for Seoul citizens through administrative innovation and public-private cooperation. In particular, it has sought to implement community-based integrated care for the elderly through the Reaching Out Health Care Services and a variety of local resource partnerships.

However, the ROCSC initiative still has significant areas for improvement.

First, the purpose of visits is still focused on resource input and service delivery. It is a bureaucratic process headed by a dong office. This process needs to become one in which residents’ organisations can act independently to ensure that the visiting service can offer continuous management at the community level. In particular, there should be caution about regarding the community as a way to mobilise private resources to supplement insufficient public resources. The ROCSC project should also recognise that community members are not merely the subjects of problems for the public sector and that knowledge and experience should be shared with each other so that creative solutions can be sought.

Second, there should be better connections between healthcare and welfare, and with higher healthcare institutions. At present, horizontal cooperation between the health and welfare sectors at the dong office level remains low. Vertical cooperation in
healthcare fields—such as community health centres, municipal hospitals, private medical institutions and long-term care for the elderly—has not been elaborated in terms of respective roles. Current segmented welfare health services have yet to be sufficiently integrated and coordinated. In order to improve this situation, the dong office should increase opportunities for mutual understanding and promote joint activities between these sectors, such as through database sharing and community joint diagnoses. For the health sector, phased goals and a process to collaborate with other institutions and systems should be set up.

Third, there is a need to maintain a balance between active state intervention and the protection of individual rights. The ROCSC project risks leaking personal information or infringing privacy due to an excessive accumulation of sensitive personal health and welfare information. Sharing such information with other public and private organisations calls for caution. Institutional support is needed to prevent any potential adverse effects, even while continuing to promote close collaboration between the public and private sectors.

Notwithstanding these issues, over the past four years, the ROCSC project has transformed dong offices—a front-line administrative institution—into a community-level health and welfare service platform. With the dong office as a hub, other entities and resources for welfare, health and the community support can now be concentrated and connected. It is highly likely that Seoul’s age-friendly community strategy will henceforth be centred on the dong offices. New elderly services and programmes can be added to the ROCSC project, instead of being operated independently. Efforts to integrate other groups such as women and children can also be carried out through links with other projects under the ROCSC initiative. This is why policies to make Seoul an age-friendly city should pay attention to the ROCSC project in future.

Singapore: Community Network for Seniors (CNS)

Given a rapidly ageing population and smaller family sizes, Singapore recognises the need to build a strong community-based support system to support seniors as a complement to family-based support. Singapore’s approach has three aims: First, to keep seniors physically healthy for as long as possible, enabling them to enjoy longer healthy life years. Second, to keep them socially engaged, minimising social isolation. Third, to enable them to age well in place for as long as possible, and minimise unnecessary acute care episodes or premature institutionalisation in nursing homes.

The Community Networks for Seniors (CNS) initiative brings together different stakeholders in a community to jointly engage and support Singapore’s seniors—these include voluntary welfare organisations, grassroots organisation, regional health systems and government agencies. The objectives are to promote active ageing among seniors to keep them well, extend befriending services to seniors living alone, and sew up health and social support for seniors with needs.

Through CNS, Singapore is working towards a system with four layers of community care:
(i) outreach
(ii) keeping seniors well
(iii) community support
(iv) senior-centric help.

Outreach
One goal of CNS is to put in place a basic system of “preventive health home visits” for seniors. A lead agency in this effort is the Silver Generation Befrienders are deployed to support seniors at higher risk of social isolation.
Office (SGO). A community-based organisation, it honours seniors through face-to-face, personalised outreach and works with partners to help seniors age gracefully. Since SGO (formerly known as the Pioneer Generation Office) was established in 2014, it has trained over 3,000 Silver Generation (SG) Ambassadors and successfully engaged over 420,000 seniors. In addition to communicating government policies, SG Ambassadors play expanded roles as frontliners of the community care system to look out for health risks among the senior population and to encourage them to stay healthy.

To help SG Ambassadors persuade seniors to be active and socially engaged, they carry tablets which contain customised flyers on senior-centric programmes within walking distance of their homes. These programmes, which are organised by the People’s Association (PA) or Health Promotion Board (HPB), include physical exercises, health talks, health coaching sessions and healthy nutrition classes, as well as chronic health and functional screening sessions that can help to prevent frailty among seniors.

After their door-to-door visits, SG Ambassadors complete a Post-Engagement Form on the senior’s social, health and financial situation and refer consenting seniors to active ageing programmes and health screenings, Agency for Integrated Care (AIC) for home-based or centre-based aged care services, and relevant voluntary welfare organisations (VWOs) for community befriending or family services.

**Keeping seniors well**

Another goal of CNS is to bring basic healthcare services to seniors’ doorsteps. This is similar to how healthcare was delivered to students via the School Health Service in the past. Periodic health checks were conducted for schoolchildren, and free follow-up treatment was given to those who needed it. Schoolchildren also benefited from free immunisations and health education (e.g. proper techniques of brushing teeth). A school-health equivalent programme for seniors would reinforce preventive health strategies to promote general health and wellness, and detect chronic diseases and decline in seniors’ functional abilities (i.e. vision, hearing and oral health and frailty) early, so that timely intervention can be given to delay senescence.

Preventive health screenings have already been started island-wide in community nodes such as Senior Activity Centres (SACs), Community Clubs (CCs) and Residents’ Committee (RC) Centres to identify seniors who may have functional decline in vision, hearing, and oral health. Seniors with abnormal screening results are given appointments to mobile eye, hearing and dental services operated by our Regional Health Systems (RHS). This means that seniors can enjoy follow-up care in community settings near their homes.

To date, more than 300 functional screening sessions have been completed. As part of building a community support system, SG Ambassadors will help sign-up seniors for functional screening during their door-to-door engagements. RHS and CNS will then call seniors nearer to the date to remind them to go for follow-up.

**Community support**

CNS also aims to build a network of befrienders within the community to ensure a pair of eyes for every senior who lives alone. Today, SG Ambassadors are already trained to identify such seniors. Using this data, the Ministry of Health (MOH) and AIC work with community befriending providers and PA to: (i) mobilise existing pools of befrienders and neighbour helpers, and (ii) systematically match seniors who live alone to befrienders and neighbour helpers.

- **Befrienders**: Seniors living alone who have consented to being referred to befriending services will receive these services from Senior Activity Centres (SACs) if they stay in rental flats, or VWOs appointed under the Community Befriending Programme (CBP) if they stay in other areas. Befrienders under SACs will make regular visits to seniors’ home and invite them to join the daily activities in the SACs. Befrienders under CBP will make at least two home visits and two phone calls per month to seniors and encourage them to step out of their homes and join PA/HPB active ageing programmes within the community.
• Neighbour helpers: As a complement to family support, MOH/AIC is also working with PA to identify neighbours to keep an eye on seniors living alone staying within the same block/precinct. The vision is that this network of neighbours will become the first line responders to support seniors in the event of an emergency (e.g. if a senior falls at home), and alert the family as well as relevant agencies.

• Care Line: Seniors can also tap on Care Line for a baseline level of social support. Care Line is a 24/7 senior call centre operated by Changi General Hospital. It supports seniors in the community by providing urgent assistance to seniors in distress, as well as tele-care services such as medication reminders and tele-befriending. Care Line also alerts seniors on active ageing activities in their area, and provides information about programmes. As of 31 December 2018, 2,900 seniors have been enrolled onto Care Line.

Senior-centric help

For seniors with complex needs, CNS seeks to develop a network system on the ground to get help quickly and in a coordinated manner. Social and health needs are closely linked. For example, the health outcomes of seniors may be adversely affected by a lack of social support or when the “social last mile” is not closed (e.g. no transport to attend medical appointments). CNS links up healthcare services, social assistance and community support so that the seniors benefit from a more holistic care plan for their needs.

Existing stakeholders are brought together to support seniors.

Seoul: Environmental Design for the Cognitively Impaired⁶¹

The Challenge

For a neighbourhood to be age-friendly, it must have housing for senior citizens and appropriate outdoor amenities. Ageing-in-place supports senior citizens to go beyond the bounds of their home and into community spaces to be involved in diverse social activities despite declining physical strength. According to the Seoul Metropolitan Government’s (SMG) Senior Population Survey (2016), older citizens spend 7.6 hours of their day outdoors.⁶² To ensure that they enjoy and spend more and not less of such time, the outdoor environment must be improved in age-friendly ways.

Since elderly persons with dementia lose their way easily due to cognitive impairment, they are in more need of age-friendly outdoor spaces. In South Korea, the number of persons known to have dementia grew from 219,414 in 2008 to 323,858 in 2016—an increase of more than 100,000 persons in eight years.⁶³ Seoul is home to the largest number of people diagnosed with dementia of any local government in Korea: 64,178 as of 2015.⁶⁴

Senior citizens with mild dementia who do not need to be admitted to a care facility often refrain from normal daily routines, or do not leave home, due to fear of what might ensue. This exacerbates their symptoms. According to the Seoul Dementia Centre (2014), 62.7% of the city’s aged population with dementia do not move into a care facility but stay at home even after their symptoms worsen. Designing better age-friendly outdoor spaces therefore also means taking into account characteristics of cognitive impairment so that the affected elderly can go about their daily routine.

Cognitive Health Design as a Solution

In light of this need, the SMG became the first local government in Korea to introduce a “Pilot Program
on Cognitive Health Design’ in 2014. It is designed to improve built environments and to encourage the elderly with deteriorating cognitive health to get out of their homes, interact with neighbours and engage in physical activities. As part of the programme, the SMG selected local Gu-district governments with a higher percentage of senior citizens and demographic groups at greater risk of dementia. After a preliminary study involving experts, residents and design workshops, plans were drafted to make improvements to the outdoor environment.

One of the most noteworthy outcomes is a high-rise public rental housing project in Shingil-dong, Yeongdeungpo-gu. In Korea, the maximum duration that residents can stay in public housing is 50 years. Over time, the age of occupants only increases. As of 2016, 26% of the 851 occupants in public rental housing in Shingil were at least 65 years of age—twice the percentage of that age group compared to the entire city. As Cognitive Health Design for outdoor spaces is still in its infancy and high-rise apartment housing is the most common type of housing in Seoul, the Shingil apartments were the most appropriate testbed.

Seven design features for improving the outdoor space have been incorporated into this apartment complex. Each design follows the overarching concept of ‘Creating a Memory-Building Community’.

The first design is ‘Memory Lane’, a 220 m walking path around the apartment complex. The pedestrian path is coloured green while bumps are marked in yellow for high visibility. A bench has been installed every 100 m for pedestrians to rest if they wished. Short bollard lighting has been added for walking at night. The second design is ‘Memory Ground’, an exercise area installed in a neglected basketball court at the rear of the complex. On one wall, seven exercise routines to promote cognitive health have been painted for residents to try. The area has also been designed to promote light physical exercise, with painted lines inviting people to walk on them while maintaining their balance. One corner features a path studded with pressure points for people to walk on and stimulate their feet at the same time. These features help boost physical activity and improve health.

The third is ‘Memory Space’. Two pagodas rarely used by occupants in public rental housing in Shingil were at least 65 years of age—twice the percentage of that age group compared to the entire city. As Cognitive Health Design for outdoor spaces is still in its infancy and high-rise apartment housing is the most common type of housing in Seoul, the Shingil apartments were the most appropriate testbed.

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The third is ‘Memory Space’. Two pagodas rarely used by residents had been frequented
by non-residents, leading to many complaints. The two pagodas have been improved and named ‘Sun Space’ and ‘Moon Space’. In Sun Space, a sundial has been painted on the ground; anyone standing can tell the time by their shadow. In addition, a layout of the complex and a compass have been added to enhance orientation, along with digital clocks showing the time and date. Moon Space has been fitted with a device that plays old pop music for senior citizens at the push of a button. Flower beds have been added to stimulate the senses and cognition.

The fourth design addition is ‘Memory Signs’. Signs on each floor lobby have been improved in terms of contrast, brightness and saturation to help seniors who are often confused by the low-visibility of signs and identical-looking entrances. Highly visible colours have been used to mark the corresponding floors on the walls. Signs with unit numbers and directions have been installed at floor corners to guide the elderly to their homes.

The fifth design is ‘Memory Milestone,’ which involves identifying three different parking lots and entrances according to different themes proposed by occupants: Sun, Moon, and Stars. For instance, residents can easily identify where they are to meet one another: “Use the Sun entrance”, or “I’ll see you at Moon parking.” Handrails, slip-proof floor features, benches, and lighting have also been added.
The sixth addition is ‘Memory Gallery,’ a place to remember the old days and chat with others in the ground-level common area. The space has been decorated, by residents from senior community centres and the resident council, with props and photos harking back to the 1960s and 1970s. Such reminders of ‘the good old days’ seem to help the elderly maintain cognitive health. They also spark communication between the generations and with other neighbours.

The seventh design feature is ‘Memory Mailbox.’ The mailboxes of 387 households have been painted in different colours according to their floors, marked in large, highly visible numbers. For 50 applicants, their favourite artworks were painted with the help of illustrators to create their own ‘Memory Nameplate’. Thanks to these unique nameplates, senior citizens are no longer confused by identical doors and unit numbers when they come home. This has helped them cognitively and has also boosted their self-confidence.

Effects and Outcomes

In the pilot project with the Shingil public rental housing, these spatial improvements had empirically significant effects. A survey conducted on 53 residents aged 40 or older to compare the outdoor space before April 2016 and after May 2017 yielded the following results:

The serviceability levels of all seven outdoor space designs were rated more highly than before. Some of the changes indicated as most effective were: improved visibility from Memory Milestone, floor signs in the elevators (50%), and signs on units and their respective directions (50%) in the lobby area on each floor from Memory Signs. Other improvements to serviceability pointed out by residents included: slip-proof features on slopes for Memory Lane and Memory Milestone (47.6%), and benches installed as part of Memory Space (42.9%) and Memory Lane (41%).

Occupants were also found to be more satisfied with the outcomes of the seven design features. Satisfaction was highest with the benches in the “Sun” Space of Memory Space (40.9%); Memory Mailbox (36.1%); the “Moon” Space (33%) of Memory Space; and Memory Signs (31.9%).

As for changes to social activities, the percentage of elders who went outside their homes five times or more a week, and another group that did so five times or more per day, increased by 6.7% and 16.2% respectively. The percentage of those who use the outdoor space in the apartment complex for get-togethers also increased from 49.1% to 69.8%. There was a significant increase in the number of visits residents made to spaces inside the complex that had been improved by the programme: Memory Lane (32%), Memory Space (20.4%) and Memory Ground (18.5%). This shows that such improvements have indeed encouraged residents to ‘get out of the house’ more often.

The SMG has published and distributed guidebooks to further disseminate good cognitive health designs. The first, published in 2016, is titled “Guide to Living Environments for Cognitive Health”. It deals with interior design for senior citizens. The following year, the SMG published three guidebooks on residential, outdoor and facility environments. These books have been distributed to relevant institutions and other local governments in the country. The outdoor environment guidebook is now used in the pilot programme for Cognitive Health Design. The facility guidebook offers guidance to those responsible for the city’s senior facility improvement projects, such as Senior Welfare Centers and Day Care Centers.
The Challenge

Singapore’s population is ageing rapidly, and the changing demographics will have significant implications for the way we plan and design our city and neighbourhoods. As Dr. Belinda Yuen, Research Director of the Lee Li Ming Programme in Ageing Urbanism at the Lee Kuan Yew Centre for Innovative Cities (LKYCIC), Singapore University of Technology and Design (SUTD) points out: “An ideal ageing friendly neighbourhood should be welcoming (inclusive for all), walkable, wonderful (with attractive spaces) and warm (with human interactions). The task is clear—to provide the opportunities that encourage older people to get out of the house and to support them in their capacity to use the spaces around them.”

Healthy ageing is defined as the process of developing and maintaining the functional ability that enables well-being as one ages. Degeneration that accompanies ageing will have a negative influence on one’s mobility as it leads to problems with balance and walking. At the same time, there is research evidence to suggest that maintaining one’s mobility for as long as possible is beneficial in enhancing cognition, improving physical performance, and preventing physical disability.

Planning, design, and management of outdoor spaces in the neighbourhood, where older people spend the majority of their time, are important for healthy ageing. The spatial qualities of built environment have an important influence on older people’s health and well-being, as they can either support or hinder mobility in older adults and their daily outdoor activities. The provision and design of social spaces, accessibility to these spaces, and factors such as gradient, walking surface and visibility can affect an older adults’ mobility and outdoor experience. For instance, a risk of falling at a certain location is likely to create fear for older adults who frequent this path. A non-sheltered fitness corner that is tucked away from sight is likely to be underutilised. As such, it is important to create a built environment that is age-friendly, which supports older adults’ movement, allows for outdoor recreational and leisure activities, and encourages them to interact with people.

Current State of Play

In Singapore, a number of initiatives by multiple agencies and practitioners have been introduced to develop age-friendly schemes and design guidelines at the scale of the home and buildings. For example, Housing & Development Board (HDB)’s Enhancement for Active Seniors (EASE) programme provides retrofit features such as grab bars, slip-resistant treatment to existing floor tiles and ramps in the homes of elderly. This retrofitting is subsidised and aims to improve mobility and comfort for elderly residents.

Similarly, the Building and Construction Authority (BCA) has introduced a Universal Design guide to promote a built environment which addresses the needs of seniors and people of different abilities, such as wheelchair users. The guide gives urban design recommendations for barrier-free accessibility that are applicable not only to commercial buildings but also a wider range of building types, including residential buildings as well as public and community facilities.

The Land Transport Authority (LTA) has also piloted Silver Zones—neighbourhoods with specific traffic policies, road infrastructure and other design features to encourage motorists to slow down and pedestrians to exercise caution, given the high proportion of seniors living and travelling in that neighbourhood. Other age-friendly initiatives include the introduction of therapeutic gardens.
garden in public parks by the National Parks Board (NParks). Four such therapeutic gardens have been piloted. They feature design elements, based on the science of horticulture therapy, which have been shown to help improve the mental health and well-being of the elderly, and support the care of seniors with dementia and post-stroke patients. However, there are no overarching ‘age-friendly guidelines’ that unify different technical design specifications for more efficient downstream implementation. There has also been limited research done to understand how older people experience their neighbourhood built environment as they go about their everyday lives, and how the built environment in turn influences the older persons’ physical, social and mental health and well-being. Further research is therefore needed in these areas, in order to develop appropriate planning guidelines and contextualised design interventions.

‘Innovative Planning and Design of Age-Friendly Neighbourhoods in Singapore’ research study

The ongoing ‘Innovative Planning and Design of Age-Friendly Neighbourhoods in Singapore’ research study, which commenced in July 2017, is an 18-month project funded by the National Research Foundation and Ministry of National Development (MND). The study, led by Dr. Belinda Yuen from SUTD, is a multi-agency and multi-disciplinary project involving government agencies such as the Urban Redevelopment Authority (URA), HDB, Ministry of Health (MOH), BCA, Agency for Integrated Care (AIC), and industry partners such as the Geriatric Education & Research Institute, CPG Consultants Pte Ltd, LEKKER Architects, and Tierra Design.

The project concentrates on three neighbourhoods in Singapore: Hong Kah North, MacPherson, and Toa Payoh West, which were identified as having a high percentage of older adults aged 55 years and above, with buildings across different ages and typologies.

To better inform the planning and design of age-friendly neighbourhoods, the study seeks to understand the physical, social, cognitive and psychological dynamics of older adults and their day-to-day interaction with the built environment in their residential neighbourhoods through various qualitative and quantitative methods including surveys, interviews, focus group discussions and community workshops.

For instance, three community engagement workshops were carried out in June–July 2018 for each of the three neighbourhoods selected, with many residents aged 55 years and above. Through these workshops, the residents were able to share detailed aspects about the existing built environments that support or hinder their daily movement and outdoor activities within their neighbourhoods.

With the findings, the architectural firms (CPG Consultants Pte Ltd, LEKKER Architects and Tierra Design) will be coming up with creative design interventions for their assigned neighbourhood to make it more age-friendly. Some of the proposed design interventions will be tested via the installation of temporary prototypes at selected sites within the neighbourhoods. Eventually, if deemed useful in aiding the mobility and outdoor activities of older adults, these design interventions may be adopted in other parts of the neighbourhoods. A post-implementation review will also be conducted to measure the impact of the design interventions on the overall physical, social and mental health of older residents.

Other key deliverables of the research study include the development of a Guidebook for Planning and Designing Age Friendly Neighbourhood, as well as an Environmental Audit Toolkit, which can be used by planners, architects, local town councils or even residents themselves to assess the age-friendliness of their neighbourhood spaces.
This chapter will look into how Seoul and Singapore enable active ageing through efforts to promote lifelong learning, well-being and wellness as well as centres for active ageing. It also features two local initiatives—Open Kitchen in Seoul and Goodlife! Makan in Singapore that support active ageing in their respective cities.
When the 50+ Campus is made available, it will be spatially significant. The over-50s really need their own space as much as they need work. For them, the 50+ Campus is simply indispensable as it offers the space they need.

Yu-mi Son
at the 2014 SMG Expert Meeting

Seoul: Seoul 50+ Foundation

Background

Seoul citizens retire at the age of 52.6 years, earlier than the national average. The Seoul 50+ Foundation was established to address the gap between this early retirement age of 52.6 and the beginning of pension payouts at age 65. This is a period of time in which mature-aged retirees with insufficient income could fall through the cracks in the social security system and be left financially unprepared for retirement.

According to a 2015 study by the Seoul Metropolitan Government (SMG), many individuals over 50 years of age are highly anxious about, and unprepared for, their lives after early retirement. This ‘50+ generation’ wish to keep working, so as to be financially independent and have a place outside their homes that they can go to as part of their daily routine. This generation is also motivated by a desire to explore possibilities, fulfill their potential, and be involved in society. They seek a good work-life balance and want to use their talents to give back to the community. They also want to be part of a social network based on common interests. Above all, they yearn for a ‘space’ in which they can pursue new activities and challenges.
The Seoul 50+ Foundation was set up as a think tank and a hub of networks committed to helping the 50+ generation create a new vision for the second half of their lives. As a control tower for the SMG’s 50+ policies, the Foundation uses its research activities to propose policies. It offers education and counselling at 50+ Campus sites in six regions across Seoul, and designs and implements a range of 50+ job programmes. The Foundation also supports activities and community events proposed by those over age 50. Furthermore, it helps local 50+ Centers implement their programmes in a more professional and effective manner.

The Seoul 50+ Western Campus, the first campus directly run by the Foundation, began to recruit students in May 2016 for its education courses, heralding the official launch of the SMG’s 50+ policies.

As they say, “when an old man dies, a library burns to the ground.” That is how much experience and wisdom one person attains throughout their life. If we were to lose such experience and knowledge of baby boomers who flourished through the dynamic modern times, it would simply be a sheer loss to our country…

Mayor Park Won-soon of Seoul from the 50+ Policy Master Plan announcement in June 2016
Aims of the Seoul 50+ Foundation

To ensure that services are tailored to the needs of citizens, the Foundation seeks to build a 50+ framework in which roles are distributed and assigned among the Foundation, 50+ Campus sites and 50+ Centers. The Foundation focuses primarily on research and programmes that deal with site-specific agendas and users.

### General Directions of the Foundation

| Focus on site/user-oriented research and improved policy actionability | Share, match and connect people, institutions, organisations, administrators, and resources |
| Enable policy services and daily campaigns that transform the lives of the over-50s as well as raise public awareness and understanding of that generation | Benchmark innovations, from both home and abroad, and localise them |

As part of strategies to uphold its values and set its policies apart from existing ones, the Foundation embraces an ‘Empowerment Movement’ philosophy. An Empowerment Movement is a campaign based on self-empowerment: it enables individuals to ‘solve one’s own problems’. Empowered individuals work voluntarily together to find solutions to improve their lives, protect their rights, and engage with the local community. One of the key objectives of the Seoul 50+ Foundation is to help the 50+ generation to create their own community and find solutions to problems, thereby kindling their own empowerment movement. The over-50s are policy beneficiaries, and a generally educated, asset-rich generation with tremendous potential for social contribution. The 50+ generation has a dual identity as ‘prosumers’ (consumers who also produce at the same time).

The Foundation’s platform has three aims. First, it provides shared services such as a database on job opportunities, a shared office, an information centre, and community support. Second, it serves as a network hub for over-50s to connect with each other and with other generations, sectors and locations, in order to create networks, share information and draw benefits from a matching system. Third, the platform will offer a venue for a variety of initiatives. This includes opportunities to test pilot projects as well as provide physical venues for activities.

### 3 Aims of the Foundation’s Platform

| 1 | Provides shared services e.g. a database on job opportunities, a shared office, an information centre, and community support |
| 2 | Serves as a network hub for over-50s to connect with each other and with other generations, sectors and locations, in order to create networks, share information and draw benefits from a matching system |
| 3 | Offer a venue for various initiatives. This includes opportunities to test pilot projects as well as provide physical venues for activities |

The Foundation embraces an ‘Empowerment Movement’ philosophy in which individuals are enabled to ‘solve one’s own problems’.
Educational Programmes

Under the auspices of the Foundation, the 50+ Campus develops and offers courses customised to the needs of the 50+ generation so that they may explore and prepare for new modes of life. Key principles guide the planning and running of these courses. These include: forming partnerships with relevant organisations, steering clear of non-interactive teacher-to-student lectures and rote learning, matching education with work/activity, and facilitating and encouraging citizen involvement.

The 50+ Campus offers three departmental faculties, each with different educational content and objectives. Students select one according to their personal interests, preferences and circumstances. This has been influenced in part by the academic system of the Rikkyo Second Stage College in Japan.

The ‘Department of Life Redesign’ focuses on changing perceptions on life and old age and designing a new life. The ‘Department of Career Exploration’ offers education that redefines the meaning of work and encourages participants to explore new career pathways. Lastly, the ‘Department of Everyday Skills’ helps students to acquire the daily skills necessary to live a happy, independent life.

Second Semester Courses at the Seoul 50+ Western Campus (2016)

- **Department of Life Redesign**
  - Change perceptions of life and old age and design a new life.
  - Seoul 50+ Life School (Introductory course to the Campus)
  - Seoul 50+ Time (Special guest lecture)
  - The 7PM Salon (For those with current jobs)
  - Volunteer Guide
  - 50+ Life Design Counseling Center
  - 50+ Book Club

- **Department of Career Exploration**
  - Redefine the meaning of work and explore new career paths.
  - 50+ Encore Career (Introduction to career exploration)
  - 4050 New Career Workshop
  - 50+ Business Start-up
  - ABCs of Starting and Running a Non-profit
  - 50+ Vision through Social Enterprises and Cooperatives
  - International Development and Social Economy (Introductory/overseas visits)
  - Introduction: Farming Renaissance and 50+ “City to Farm”
  - 50+ Odyssey: Visiting Farms
  - 50+ Travel Planning School
  - 50+ Guide to Starting an Urban B&B
  - 50+ City Commentator Training
  - 50+ Creative Professionals Training
  - 50+ IT Maintenance Class
  - 50+ Professional Instructor Training

- **Department of Everyday Skills**
  - Sejong Art Center Art & Culture School: Musical, Bongsan traditional mask dance, haegeum playing
  - House of My Life
  - Slow Fashion Workshop
  - Cooking Class for Middle-aged Men
  - People+ Photography Class
  - Body & Mind Yoga

**Special Courses**
- Life Photography Workshop
- Chef Young’s Saturday Brunch Class
- 50+ Programs

Planned and managed by 50+ organisations and individuals
The Department of Life Redesign is best exemplified by the courses offered by Seoul 50+ Life School. As an introductory programme representative of the 50+ Campus, Seoul 50+ Life School is characterised by the following process:

**Seoul 50+ Life School Process**

1. First, the Dean and teaching staff—who are the same age as the students—lead the way. As mentors, they stimulate and establish rapport with students and help them along each step of the way, from learning preparation to follow-up. Theirs is a relationship unlike any other.

2. Students then submit a ‘letter of commitment’: a summary of what to add or subtract from their life, for selection. Students are selected based on the originality and value of their idea (‘lecture-shoppers’ are discouraged), diversity in age, gender and career background, and potential as fellow partners (open-mindedness and commitment to community).

3. The core of these educational courses is not lectures but workshops that engage students both physically and mentally. The courses employ movies and plays to share and discuss the growing pains associated with adulthood as well as ways for different people—another ‘me’—to live together.

4. The courses arrange for students to meet with communities or people who have made small but meaningful changes.

5. Students are encouraged to volunteer for community groups and take up self-empowerment activities. The first class organised six communities—Leaders Forum, Ludens Tango, Value Bank, 50+ Play (movies and theatre), Jamshin (exploration of traditional cultural heritage), and 50+ Busking. They continue to engage in activities after graduation.

6. All formalities and ceremonial protocols are removed from graduation day. Instead, graduates make their graduation special by renewing their commitment to their way forward.

7. Sixty classmates go on a two-day trip to celebrate their new beginning.
Survey on the First Class of Graduates

"The School is for both the mind and the body."

"The greatest assets are my 60 new friends."

"The School is the starting point of change."

"I want my husband to be my alumnus."

"An opportunity to transform my philosophy on 'money'."

"Experience at the School made me realize that citizens of Seoul are truly privileged."

"Busy Thursdays were mine and mine only at the School where everyone experienced growing pains."

"All 60 classmates were alike and yet completely different. It was as exhilarating as dating."

"It was a time to hone the sword that had grown blunt over the last 50 years."

"Time to contemplate over my passive attitude toward life so far and my dynamic attitude toward life from now and forward."

As the name indicates, the Department of Career Exploration supports students as they explore the world of new occupations. The training courses are designed to help students, both directly and indirectly, to experience different types of jobs and build their own vision for their second career.

The Department of Everyday Skills broadens the scope of existing cultural and liberal arts education to ensure that members of the 50+ generation acquire and develop all the ‘skills’ necessary to lead a happy life. In this context, ‘skills’ collectively refer to knowledge, technical competence, general knowledge and insight. The Department offers general culture and liberal arts classes as well as courses in skills that enable the over-50s to take care of basic needs on their own, as well as to prepare themselves, both physically and mentally, for a second beginning.

Counselling Programmes

The 50+ Counseling Center is a one-stop destination for counselling customised to individuals, providing information on education, jobs, finance, leisure, and life design. The Centers play a vital role, not only because they provide counselling services, but also because their services lay the groundwork for the SMG’s 50+ policies, programmes and plans.

For over-50s who visit the 50+ Campus for the first time, the 50+ Counseling Centers serve as a reliable guide. At the Counseling Centers, consultants and moderators, of the same age as the Campus users, examine individual needs to help design and build learning and activity plans. Campus users can begin with extensive counselling and design their roadmap forward step by step, according to their interests and competencies. The 50+ Campus programmes are built on the platform provided by the 50+ Counseling Center, organically bringing together crucial components such as counselling, education, job, and voluntary activities.

50+ consultants are particularly indispensable in making policies practical and effective. They are on the frontline of implementing 50+ policies, counselling students in their efforts to design their life, and conducting a variety of studies and site surveys. How the students perform and what they achieve will demonstrate the potential of empowerment
movements run by and for the 50+ generation. Many empowered over-50s take part in Counseling Center activities, experimenting with this new counselling model shaped and enabled by collective intelligence.

Jobs Programmes

While the SMG has new 50+ policies in place, no magic bullet can resolve the issue of jobs once and for all. It will also take much more than just the commitment of Seoul citizens. In fact, the central government’s job employment programmes are of considerably larger scope than those of the SMG. With respect to jobs, it is vital that current policies are linked and coordinated with current jobs, even as efforts continue to innovate solutions based on what previous policies have missed.

In terms of employment, it is particularly important to accurately capture the features of jobs that the over-50s want and require. The Survey on the Needs of the 50+ Generation for the Second Stage of Life, conducted by the SMG in 2015, revealed two key findings. First, over-50s increasingly want to fulfil their life purpose by doing what they have always wanted to do, rather than what they have to do. Second, they want a life in which work, relationships and leisure are interconnected. They want to work in a job they like, connect with people as they do so, and earn a certain level of income.

The 50+ generation should be seen not as an employment liability but valuable resource persons that can help resolve a wide array of social issues. It is useful, when working with over-50s, to train and support them to develop their own job models, instead of falling back on the approaches typically adopted by public job programmes, such as one-on-one job matching or job placement.

Boram Job Program is an excellent embodiment of the Foundation’s 50+ job programme strategies. ‘Boram’ means “purposeful, rewarding, or meaningful” in Korean. Although the financial compensation is small, candidates are matched with jobs that offer work and the opportunity to give back to society. When they complete a number of hours of education, they are immediately encouraged to gain practical experience in their newly chosen field. In 2016, the Seoul 50+ Western Campus selected 472 over-50s and assigned them to ten different fields via the Seoul Rewarding Jobs programme. They are now actively engaged in various fields of work.

Research Activities

The Seoul 50+ Foundation’s research is characterised by being field-oriented and practically focused, without much emphasis on theory or meta-discourse. Examples of their research include finding jobs suitable for the over-50s, and developing 50+ content. In addition, the Foundation is keen on collective intelligence: it collaborates with organisations that have practical experience in specific areas, as well as with academic scholars, researchers and over-50s eager to take part.

Supporting Other 50+ Organisations

The 50+ Organisation Support Program identifies and supports organisations that are led and operated by the over-50s themselves. Support is provided in three categories: establishment, initial set-up, and growth. In 2016, a total of 27 organisations—nine in each category—had their activities subsidised. Five months after the start of the programme, half of the subsidised organisations had completed the process for establishing a legal entity, or were about do so in the near future. For organisations that had been subsidised for the initial set-up period of two years or less, the programme helped to broaden membership. Those organisations subsidised for growth (with two or more years of activity), have expanded their network and projects.

Community Plus is one of the programmes implemented by the 50+ Campus to provide support to the 50+ generation. Community Plus assists over-50s in developing and implementing educational, in-field, or social contribution projects to share their knowledge, talent and experience. This programme does not adhere to a fixed theme or format. Any community of three or more people aged 50 and above is eligible to apply. A community receives up to KRW 500,000 as subsidy for project implementation; it is also provided with access to a meeting space, conference rooms and other facilities. There are also opportunities for communities to present extraordinary cases and promote their projects.

From May to September 2016, 956 people in 98 communities benefitted from support under this programme. Community Plus facilitates activities after the completion of the 50+ Campus courses. Over-50s who complete their courses get to organise a small group, plan their own projects and gain experience on implementation.

Conclusion

While the primary focus only a few years ago was on jobs, the 50+ generation in recent years has become increasingly interested in a wide range of areas. A number of concerns relevant to the over-50s have emerged, including questions about who they want to spend their old age with, where they can live, what they can do to support themselves, what work they can do and so on. Different solutions have been developed by the over-50s themselves: from experiments in shared living to learning communities or new businesses led by over-50s. Such activities have evolved and progressed as the 50+ generation continues to grapple with these issues.

These inspiring developments demonstrate how empowerment movements have taken the 50+ generation beyond personal concerns for life after retirement, towards an entirely new stage of personal development in pursuit of social value as well as a culture in which the elderly are seen as creators and contributors. To keep up with such divergent needs and evolving aspirations, the SMG and its 50+ policies must also seek to change.
Singapore: National Silver Academy (NSA)

Background

The National Silver Academy (NSA) is an initiative under Singapore’s Action Plan for Successful Ageing. Launched in May 2016, the Academy is not a physical campus, but made up of a network of over 30 post-secondary education institutions, community-based organisations and partners that offer a wide range of subsidised courses for seniors aged 50 and above.

NSA was set up in response to feedback from seniors that many would like to “learn for learning’s sake” and not necessarily for work or employability. Learning keeps their minds active, and allows them to stay engaged with their family, friends, community and society. To enable seniors to be cognitively and socially active, the Ministry of Health (MOH) worked with the Ministry of Education (MOE) to establish the NSA, to enable seniors to pursue learning in diverse areas according to their interests.

The NSA offers three key types of learning opportunities for seniors. Course offerings include IT, media, health and wellness, business and the arts:

- **Subsidised short courses**
  These subsidised short courses aim to equip seniors with life skills such as home maintenance, financial planning for retirement and general knowledge on how to age well. There are also courses to aid skills upgrading at the workplace.

- **“Exam-free” modules**
  ITE, polytechnics and publicly-funded universities will open up selected modules to seniors, without the need for formal assessment, at a token fee. Seniors can attend these classes together with regular, younger students attending the same modules.

- **Other learning opportunities**
  The NSA will also offer the Intergenerational Learning Programme (ILP) and other ad-hoc learning opportunities such as talks and seminars organised by community-based organisations. The ILP aims to promote intergenerational bonding by pairing students with seniors to learn about topics such as public speaking, social media and music.

When it was first launched, the NSA offered over 10,000 learning places across 500 courses across 17 institutions. Since then, the NSA has grown from strength to strength and now offers 20,000 learning places across 1,000 courses and more than 35 institutions. Enhancements have since been made to the course offerings based on public feedback, to include additional bite-size learning opportunities and modalities such as e-learning.

3 Learning Opportunities for Seniors

- **Subsidised short courses**
- **“Exam-free” modules**
- **Other learning opportunities**
The government provides heavy subsidies for NSA courses to encourage course take up. On top of that, Singaporean seniors can use their SkillsFuture Credits to defray out of pocket costs for most courses post-government subsidies.\textsuperscript{73}

As part of its outreach efforts, The Council for Third Age organises NSA roadshows in the community, and operates a hotline to assist seniors with signing up for learning opportunities.

**Conclusion**

NSA has helped seniors keep active with its accessible and varied learning opportunities, each tailored to the diverse needs and interests of Singaporean seniors. As of 2018, 26,000 seniors have benefitted from NSA’s course offerings and the reach of the network continues to grow each year. A study by Duke-NUS Medical School’s Centre for Ageing Research is being conducted to evaluate the impact of lifelong learning on seniors.

**WELL-BEING AND WELLNESS**

**Seoul: Gwanjin-gu Socio-Economic Cluster\textsuperscript{74}**

**Background**

In Seoul, seniors depend mainly on state-provided vouchers to access private providers for their meals, cleaning, laundry, and care services. However, private sector services are often of low quality, do not engage emotionally with the seniors, and are therefore limited in satisfying needs.

Gwangjin-gu’s Local Care Cluster is a socio-economic cluster that integrates private sector senior care services within Seoul’s Gwangjin district. Supported by a framework of social enterprises and local community groups, it represents a pioneering strategy to enable seniors to age actively and in place.

Gwangjin-gu’s Local Care Cluster is a project under Seoul Metropolitan Government (SMG)’s Special Social Economic Zone (SSEZ) programme. The SSEZ programme is an intensive local-specific programme to create a sustainable ecosystem of social economy in the local community, resolve social issues and gather lessons learnt from success stories that could be applied broadly.

As part of this programme, the SMG calls for citizen-involved initiatives tailored to the specific needs of local Gu-districts. From these, SMG selects preliminary and principal projects to support. The principal projects are subsidised up to KRW 500 million over three years. Gu district governments apply for the SSEZ grant under different themes, based on their local needs.

In Gwangjin-gu, it was care services that were needed. Gwangjin-gu was selected in 2016 as a Special Care Zone, with its project to establish an integrative care service by forming a local cluster of social economy resources. Gwangjin-gu is now in the third year of the SSEZ programme.
Status of Special Social Economic Zone Projects in Seoul

Principal projects underway
Preliminary projects underway

1 Young generation in the locality
2 Leather industry
3 Neighborhoods & schools
4 Young generation in the locality
5 Childcare

Local regeneration
A social economy-based ecosystem designed for younger generations established in Gangbuk-gu

Leather industry
A cooperative system of leather and fashion industry established

Neighborhoods & schools
A school-based social economy cluster established

Young generation in the locality
‘Dongjak Young Adults Community’ built to help young adults

Childcare

Gwangjin Social Economy Network (GSEN)

The Steering Group for Gwangjin-gu’s Special Care Zone is led primarily by the Gwangjin Social Economy Network (GSEN), a social cooperative network consisting of social economy organisations and local community groups located in Gwangjin-gu. What began as a network of 17 organisations in 2014 soon grew considerably: by 2017, the network had come to include some 39 organisations, 690 staff, and 2,000 cooperative members.

Even before the GSEN started operations, many of its member organisations were social enterprises that provided care services to the local community. The GSEN aimed to bring together organisations which were providing similar services. This was to enhance solidarity and collaboration, as well as to encourage neighbourhood communities to become more active, thereby paving the way for an ecosystem of social economy in Gwangjin-gu. The GSEN wanted its members to devote their time to attending to those in need and nurturing a happy community, rather than worrying about sales. A number of strategies were proposed towards this end: one of them, the formation of a Local Care Cluster, was submitted to the SSEZ programme for consideration.

Local Care Cluster

While the GSEN’s Local Care Cluster sought to build a framework for an integrated life-cycle care service, it began with aged care. Existing aged care services provided in Seoul had a number of problems.

First, the rapid growth of Korea’s aged demographic, and changes in family structure, had resulted in higher demand for elderly care services and lower service quality levels. In 2017, the size of the care services labour market was approximately 643,346 people. However, only a small percentage of this manpower was in public service; the rest were in private micro businesses—which made it difficult to manage the quality of human resources pool and service levels.

Second, existing elderly care services were segmented according to the type of providers and not by actual needs. In other words, institution-bound services, homecare, hygiene and cleaning services, nutritious meal provision, and services catering to emotional and mental needs were all separately provided by different care providers.

The GSEN decided that success would be more likely if these social enterprises were to work together based on a socially responsible elderly care business model for the public good.
In fact, the GSEN was well-equipped to pursue such a business model. First, many of its members were capable and experienced aged care service providers. One of these is Gwangjin Care (Gj-Care), the nation’s first social cooperative to be designated and certified by the Ministry of Health and Welfare. Since 2008, Gj-Care has provided lifestyle services, including: bathing, domestic help, activities and outings, conversation and companionship. Another example is Well-Union, founded in 2011. Well-Union is a social enterprise that develops and sells nutritious aged-friendly food, offers nutrition assessment for senior citizens, and provides nutrition consulting to small welfare facilities. Others include In’s Care, a social enterprise specialising in home cleaning, hygiene management and pest control; the Korea Music Teaching Academy for Children (KMTAC), which uses traditional music to offer emotional care and therapy services; and senior cooperatives offering education programmes to train senior as employees and instructors.

The GSEN also promoted collaboration between its member organisations to advance individual services while also building a framework for integrative care services. Members shared their expertise and experience to improve service levels and to develop new care services. The GSEN was also able to combine various service channels to ensure economies of scale, and to offer one-stop services to meet a range of needs.

Furthermore, with Gj-Care’s membership, the GSEN had access to individuals who would need new aged care services. As of 2017, Gwangjin-gu’s public elderly care services were offered to 1,477 persons; 13.1% of the services was provided through Gj-Care. Numbering nearly 200, Gj-Care service recipients were potential customers for the new services provided through the Local Care Cluster.
Conclusion

The Gwangjin-gu Local Care Cluster is significant in creating a local community model of elderly lifestyle services based on a social economy and local community support. This model is quite unlike current ones provided by the state or the market. How social enterprises form a cluster to improve the quality of one-stop elderly care services and meet the needs of the elderly is well worth benchmarking.

A social economy grows and progresses when members of the local community are involved in its production and use at a larger scale. In its first year, Gwangjin-gu’s Special Care Zone programme targeted 600 senior citizens who used care services; by its second year, GSEN had 2,500 staff and members. In the third year, GSEN’s goal is to attract more local residents and increase the membership to 10,000. Care services would then no longer be confined to the elderly but can be expanded to meet the needs of the entire life-cycle, including single-person households and children who do not have access to proper meals. This will enable the elderly to interact with people of other age groups. It may even encourage them to join the other side of the care service desk. Such approaches may have a broader, positive impact on intergenerational relations and the social involvement of the elderly: two important elements stressed in the World Health Organization (WHO)’s guidelines for age-friendly cities.

However, for the Gwangjin-gu Local Care Cluster to be expanded as a major element of a broader age-friendly city strategy, some concerns will have to be addressed. First, public support should be continued after the SSEZ project ends. In particular, financial support from the public sector must be secured in order to keep public welfare affordable.

Second, the Local Care Cluster is being administered throughout the whole Gwangjin-gu with a population of 350,000. In future, the service should be subdivided at the smaller dong level to provide even better customised community services.

Third, connecting various care services from social enterprises is a meaningful task. The Local Care Cluster’s integration effort should be further expanded to link up with other services essential to elderly living, such as housing, health, and welfare.

Integrated Senior Services Provided since 2016

<table>
<thead>
<tr>
<th>Service Category</th>
<th>Number of Recipients, Hours, Cases</th>
<th>Description</th>
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<tr>
<td><strong>NURSING CARE</strong></td>
<td></td>
<td><strong>Description</strong></td>
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</table>
| Lifestyle Services     | 5 persons, 174 hours               | - Caregiver visits  
                        |                                                     | - Physical activity up to 36 hours a month          |
|                        |                                    | - Domestic help  
                        |                                                     | - Lifestyle support                                |
| **NUTRITIONAL CARE**   |                                    | **Description**                                                                                   |
| Nutritional Services   | 109 persons, 2,079 cases           | - Texture-modified/patient meals (17 kinds, 300g per serving, 300kcal)                           |
|                        |                                    | - 7 packs delivered weekly for 3 months                                                          |
|                        |                                    | - Monthly visits by nutritionist                                                                  |
|                        |                                    | - Nutrition assessment and consulting                                                              |
| **HYGIENE CARE**       |                                    | **Description**                                                                                   |
| Cleaning Services      | 79 persons, 212 cases              | - 2-4 cleaning and hygiene managers                                                               |
|                        |                                    | - Eco-friendly cleaning and steam cleaning services                                              |
|                        |                                    | - Dusting, cleaning, disinfection, polishing                                                      |
| Laundry Services       | 24 persons, 85 cases               | - Blanket / comforter laundry service (collected by car, laundered and delivered home)           |
| **EMOTIONAL CARE**     |                                    | **Description**                                                                                   |
| Emotional Services     | 33 persons, 174 times              | - Music (folk music, traditional drum, ukulele, etc) and creative activities, once a week for 3 months (12 times) |
| **TOTAL**              | 250 persons                        | 2,697 cases                                                                                 |

Since 2016, the Local Care Cluster has provided the following integrated senior services:
Singapore: Wellness In Communities

Caring for seniors’ health and wellness traditionally takes place at home or in dedicated medical facilities. In Singapore, apart from medicalised care in clinics and hospitals, families are largely expected to care for a senior’s well-being. However, there are emerging trends shifting the focus of health and wellness towards the community.

Household structures are changing—families are getting smaller and more seniors are living alone. This means seniors may have less access to familial support, thereby running greater risks of social isolation and poor health. However, family support can be complemented with community support and seniors can be encouraged to lead healthier lifestyles by ageing actively in their communities. In line with Singapore’s commitment to go beyond the hospital to the community and to go beyond healthcare to health, various health and wellness initiatives have been put in place at the neighbourhood level to develop local clusters or ‘communities of care’ for seniors to keep active and healthy. Active ageing programmes are spread out in various active ageing nodes in the community such as Community Clubs (CCs), Residents’ Committees (RCs) and Neighbourhood Committees (NCs). The Wellness Programme and Wellness Kampung are two such community initiatives.

Wellness Programme

Background
A key channel through which active ageing programmes are provided is the People’s Association (PA). PA is a statutory board which promotes racial harmony, community bonding and social cohesion in neighbourhoods. The PA’s Senior Citizens Executive Committees (SCECs) constitute the largest seniors’ network in Singapore. Through this network, the PA plans and organises a wide array of activities and courses to enrich the life experiences of senior citizens, such as sports and dance activities, lifelong learning courses and more.

The most widespread senior wellness and health programme implemented by PA at the community level is the Wellness Programme. The Wellness Programme is far-reaching as it is conducted through PA’s extensive network of 1,800 grassroots organisations and over 100 Community Clubs.

Started in 2008, the PA Wellness Programme reaches out to Singaporeans and Permanent Residents, aged 50 years and above, to engage them in programmes and activities that keep them mentally, physically and socially active. These programmes encourage seniors to adopt healthier lifestyles.

Main Initiatives

Under the Wellness Programme, health services, health education, senior learning and volunteerism are delivered at the community level.

To secure better health outcomes for seniors, vaccinations and health screenings are conducted at convenient neighbourhood community facilities such as CCs and RCs premises. Those found to be at risk of developing chronic illnesses and age-related functional decline are then encouraged to adopt healthier lifestyles, and to participate in follow up interventions by the Regional Health Systems (RHS) and the Health Promotion Board (HPB). Mobile clinics also travel to different neighbourhoods to provide screening and services for visual, nutritional, oral, aural and bone health.
Wellness Time

Together with the Ministry of Health (MOH) and the Silver Generation Office (SGO), PA is currently establishing Wellness Time at suitable community facilities throughout Singapore. Wellness Time is a suite of active ageing activities conducted on a weekly basis at selected Wellness sites. These include health screening and coaching, senior-centric exercises and social living activities. The Wellness sites thus far have realised that getting the majority of people who are sedentary to be more active physically is an uphill task. PA is making a concerted effort to work with multiple agencies and grassroots organisations in order to reach out to these seniors.

At its inception, the Wellness Programme targeted to engaged with 50% of the senior population aged 50 years and above in every constituency. To date, it has engaged with about 500,000 seniors. PA continues to increase touchpoints around the country so that seniors can age well within their communities.

Wellness Kampung

Background

The Wellness Kampung initiative is a network of three wellness and care centres for residents in the North of Singapore. It was formed through a partnership among Alexandra Health Systems,76 St Luke’s ElderCare and Nee Soon grassroots organisations (GROs). The purpose of Wellness Kampung is to bring healthcare beyond hospital walls and into the community. Wellness Kampung offers a platform for residents to remain active and healthy through activities and preventive health programmes, allowing the frail elderly to age-in-place with follow-up care services, and even give them opportunities to contribute back to their neighbourhoods. As the name suggests, Wellness Kampung facilitate a close-knit support network between residents—akin to how village communities functioned in the past—bolstering their overall wellness and encouraging healthier lifestyles.

Process

Yishun Health (YH), a network of medical institutions and health facilities under the National Healthcare Group (formerly Alexandra Health System), initiated the idea of Wellness Kampung. YH oversees public healthcare provision for over 800,000 residents in the north of Singapore: this includes Yishun town, where about 20,000 seniors reside.77 YH wanted to encourage its residents, particularly seniors, to adopt healthier lifestyles actively rather than be passive recipients of traditional formal health education.

To ensure that the three Wellness Kampungs would meet the particular needs of the Northern residents, YH proactively partnered local advisors from Nee Soon GROs, and also conducted preliminary ethnographic studies. The team spoke with Yishun residents to understand what ‘health’ means to them and observed how traditional Senior Activity Centres (SACs) were being run. Their findings showed that residents appreciated simple and actionable health education that affects their everyday lives, such as how to eat well and sleep well. In addition, they noticed that most SACs lacked participation from male seniors, and that administration processes discouraged people from joining in activities. These findings helped the team accommodate resident preferences and circumvent known challenges through physical design, programming and better administration of the centres.

With funding from MOH for renovations, the three Wellness Kampung were set up in Yishun town in March 2016.78 They are located in Nee Soon East, Nee Soon Central and Chong Pang.

Features

While each of the Wellness Kampung is unique to suit the populace served,
there are several common general features.

**Physical Design**

In line with the purpose of bringing healthcare into community spaces, the three Wellness Kampungs are conveniently located at the void decks or ground floors of housing blocks so residents can easily access them. Adjacent to each Wellness Kampung is an eldercare centre run by St Luke’s ElderCare, where seniors who are frail receive rehabilitation and day care services. The co-location of the Wellness Kampung with the eldercare centre allows these seniors to join in the centre’s activities and forge friendships more easily.\(^7^9\)

The overall design concept for Wellness Kampungs was for them to be seen as community spaces, not clinical medicalised spaces. As such, the centres were designed to look like extended ‘community living rooms’ with open concept plans and minimal physical barriers (such as walls, doors or fencing). The openness of the physical space makes Wellness Kampungs easily accessible and encourages residents to enter and walk through them. The open plan also eases management, allowing the entire centre to be overseen by a single manager.

In the case of Wellness Kampung @ 115 Chong Pang, the open design was further extended to its community garden, which is in front of the centre. The community garden is fenceless and features an open allotment system so that the gardening beds are integrated with public areas in the precinct. The seamless flow from centre to garden further promotes wellness by allowing a visual connection between the centres’ interiors and surrounding greenery in the estate. This reinforces YH’s emphasis on the benefits of greenery for healing.

Further positioning the centres as welcoming community spaces, the interior of every Wellness Kampung is designed to look like a trendy café with blackboard menus. The space also features a corner library run by the National Library Board (NLB).

Since successful physical design does not always come from a top-down approach, the team encouraged different forms of participatory design. For instance, the interior setup of the Wellness Kampungs had been deliberately left ‘incomplete’, giving users the flexibility to move furniture around to suit their needs. The successful physical design of Wellness Kampung @ 765 Nee Soon Central clinched the Singapore Good Design Mark (SG Mark) award in 2017.\(^8^0\)

**Management and Programming**

The community is the leader at Wellness Kampungs. Residents are encouraged to take the lead in the management of each centre and its activities, with YH and a single centre manager as facilitators. No membership fee is imposed on participants and anyone can join in activities regardless of their place of residence. This encourages participation and ownership, driving the residents to take charge of their own health and wellness by incorporating healthy and active behaviours into their daily living.

Wellness Kampungs offer both health-focused programmes as well as interest group activities to promote active ageing. They host daily mass exercises, stretching exercises and aerobics sessions for seniors. Seniors also take the lead in educational and leisure programmes, forming interest groups such as a singing group and quilt blanket making group, sharing their skills with one another. As part of their multigenerational engagement efforts, Wellness Kampungs invite students from nearby schools to participate in intergenerational programmes such as digital workshops, in which they teach seniors how to use smartphones.
A second challenge is encouraging participation from the younger generation. The centres are not exclusive to seniors but are meant to be multi-generational spaces. However, despite hosting intergenerational programmes, most youth are only able to commit to activities once a year, due to conflicting school schedules.

Finally, not all initiatives are welcomed by residents living in the housing blocks surrounding the centres. Some popular programmes such as mass exercises are conducted in neighbourhood common spaces due to high participation rates, but have received resident complaints about noise.

Nevertheless, the Wellness Kampung initiative provides accessible and attractive spaces for seniors of various abilities to pursue hobbies, manage health and forge close-knit networks with minimal support. Their holistic approach to health and wellness also ensures that seniors can age both actively and healthily in ways that suit their preferences. The strong emphasis on self-organisation sets an example for how active ageing can be promoted in a sustainable way.

YH brings in healthcare professionals intentionally to support resident-led programmes, mindful not to over-medicalise efforts or adopt a paternalistic approach. For instance, a community dietician visits regularly but does not dictate or ‘teach’ seniors what to eat. Rather, the dietician is present for seniors to consult during cooking programmes. YH also engages community nurses as educators, coaches and counsellors so residents can get regular health check-ups at the three centres. The centres, however, do not bring in clinical practice as they want to encourage sustainable self-management rather than doctor-led health management.

Challenges

Although YH sought to engage more male seniors, users of the three Wellness Kampungs today are still predominantly female. To address this, the centres organise targeted programmes such as weekly appliance repair workshops to draw in male seniors and help them feel less out of place.

Other Wellness Initiatives in Singapore

National Seniors’ Health Programme

An initiative under the Action Plan for Successful Ageing, the National Seniors’ Health Programme aims to encourage and empower seniors to take charge of their health through community-based activities, healthy lifestyle campaigns and targeted intervention for mature workers in workplaces.

The inaugural healthy lifestyle campaign was launched by Health Promotion Board (HPB) in September 2015 with an exercise video for seniors titled ‘7 Easy Exercises to an Active Lifestyle’. Other campaigns include the Falls Prevention Awareness Campaign that aimed to educate seniors and their caregivers on the five tips to reduce the risks of falls, and the Stroke Awareness Campaign that worked to deepen public understanding of the signs of stroke and advocate timely action when stroke occurs.

A new workplace health programme is also being implemented across 7 sectors and targets 120,000 mature workers aged 40 and above. Initiatives include health screenings at workplaces and designing workplace-specific preventive health programmes. For example, the “Check Car, Check Body” programme collaborates with local taxi operator companies to offer mature taxi drivers free health screenings while their taxis are being serviced. This programme has helped time-pressed drivers prioritise their health and well-being.

Healthy Ageing Promotion Program for You (HAPPY)

With ageing population, prevention of frailty and dementia will become a public health priority. Intervention programmes have shown that frailty may be reversible or modifiable through lifestyle interventions. Healthy Ageing Promotion Program for You (HAPPY), initiated by the National University Healthcare System (NUHS), is a programme encompassing physical activity, brain activity and empowerment of seniors conducted
within community centers and housing estates in Singapore. The aim of HAPPY is to improve cognition, reduce prevalence of frailty and improve overall mental well-being of seniors in the community. Early results show promising results in reversing frailty and improving memory.

There are now 30 sites across the island with more than 500 seniors participating in HAPPY on a regular basis.

Neighbours for Active Living

The Neighbours for Active Living programme was developed by Changi General Hospital (CGH) and Southeast Community Development Council (SECDC) to reduce hospital readmissions of high-risk senior residents through engagement and community support. Community care teams, comprising of healthcare professionals from CGH, are embedded within communities to reach out to and befriend vulnerable seniors in their homes. Seniors’ health and well-being are supported as teams provide services such as health monitoring, coordinating medical care and connecting seniors to informal networks and formal services. Under the SECDC ‘Friend a Senior’ initiative, residents are engaged as volunteers to conduct regular house visits for participants. Strong networks are also established with community partners to connect seniors to services and long-term support.

Since launching in 2013, the Neighbours programme has grown significantly. It has been rolled out in all 18 constituencies in eastern Singapore and over 15,000 home visits have been conducted. The Neighbours programme has benefitted more than 6,000 patients. Between 2013 and 2017, 73% of patients with frequent readmissions had a decrease in the number of hospital readmissions. Their readmissions rate fell from 2.3 to 1.1 over 6 months. CGH is now exploring scaling up the programme and activating communities in other regions.

Senior Welfare Centers

Seoul’s Senior Welfare Centers were established, along with various other social welfare facilities, when Seoul’s local self-government system was introduced in 1995. Prior to 2000, one Senior Welfare Center was built in each of the 25 administrative Gu districts. More were added as circumstances allowed. There are at present 76 such Centers operating in Seoul. Initially, these Centers were subsidised by the central government. Today, however, most are run and funded by the Seoul Metropolitan Government (SMG) and Local District Gu Governments (LDG).

Currently, Senior Welfare Centers cover most of the city’s districts, but there is a growing demand for additional Centers due to the rapidly ageing population. The local Gu district average was 10.4 persons per m² of centre space. There are also issues: while some areas are oversaturated in terms of service coverage, other areas remain underserved.
Service Coverage of Senior Welfare Centers in Seoul (Radius of 1 km)

- Senior Welfare Centers
- Similar Institutions

Number of Senior Welfare Centers in Each Gu

<table>
<thead>
<tr>
<th>District</th>
<th>No. of Facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jongno-gu</td>
<td>3</td>
</tr>
<tr>
<td>Jung-gu</td>
<td>2</td>
</tr>
<tr>
<td>Yongsan-gu</td>
<td>2</td>
</tr>
<tr>
<td>Seongdong-gu</td>
<td>2</td>
</tr>
<tr>
<td>Gwangjin-gu</td>
<td>1</td>
</tr>
<tr>
<td>Dongdaemun-gu</td>
<td>1</td>
</tr>
<tr>
<td>Jungnang-gu</td>
<td>4</td>
</tr>
<tr>
<td>Seongbuk-gu</td>
<td>5</td>
</tr>
<tr>
<td>Gangbuk-gu</td>
<td>2</td>
</tr>
<tr>
<td>Dobong-gu</td>
<td>5</td>
</tr>
<tr>
<td>Nowon-gu</td>
<td>2</td>
</tr>
<tr>
<td>Eunpyeong-gu</td>
<td>6</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>76</strong></td>
</tr>
</tbody>
</table>

Changes in Seoul’s Senior Welfare Center Policy

Prior to 2010, the SMG focused on growing the number of Senior Welfare Centers. In 2010 however, the city announced a plan to adopt a different approach: the creation of “Happy Silver Towns” in different regions, as well as smaller Senior Welfare Centers better adapted to local conditions.

By 2011, an ordinance on senior welfare was enacted in an effort to make the city more senior-friendly. This ordinance also enabled support for lifelong learning and retraining programmes. In 2012, the “Aging Friendly City Master Plan” was put forward to reinforce the role of Senior Welfare Centers in leisure and social engagement, while separating out other current homecare services. In the following year, financial support that had been concentrated...
on city-run Senior Welfare Centers was extended to those run by the LDGs. In 2014, manpower was increased to handle employment and counselling. In 2015 and 2016, the 50+ Centers were opened, to which baby boomer programmes were transferred. In 2017, the Senior Welfare Centers began to provide one-stop employment services to its users. In 2018, it was announced that a new approach to the Senior Welfare Centers would be developed, in response to soaring demand. The specifics of this new approach are currently being looked into.

**Role of Senior Welfare Centers**

According to the Welfare of the Aged Act, Senior Welfare Centers are categorised as leisure facilities. They also provide counselling services to the elderly for little or no fee. The Centers offer services such as health promotion, culture, and leisure. While they focus on leisure, the Centers handle interventions in all matters concerning the elderly, such as poverty or long-term care, as programmes are often launched or added to their offerings when required by the SMG or LDGs.

Members can participate in classes like English classes at no or low cost.

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**Changes to Seoul’s Senior Welfare Center Policies**

- **2010**
  - Ordinance on senior welfare to make Seoul more senior-friendly (revised on December 11, 2014)
    - Lifelong learning and retraining programmes for the elderly
    - Build and support senior leisure welfare facilities (e.g. Senior Welfare Centers)

- **2011**
  - Reinforce support for LDG Senior Welfare Centers and provide balanced subsidies

- **2012**
  - Adjust the basic HR capacity at Senior Welfare Centers
    - Increase capacity of social welfare workers (employment/counselling) by one person from 23 to 24 persons

- **2013**
  - Transfer baby boomer programmes to the new 50+ Centers

- **2014**
  - Reinforce the Centers’ role in leisure and social engagement
  - Provide community spaces to bring different generations and local residents together and offer inter-generational programs

- **2015, 2016**
  - Reinforce job counselling and employment functions and encourage social engagement
    - Provide one-stop employment services to senior citizens using the Senior Welfare Centers
    - Manage the entire cycle of hiring, job seeking, counselling, job placement, and follow-up

- **2020 Aged Society Master Plan**
  - Build infrastructure for senior welfare
    - Build 5 regional Happy Senior Towns by 2014
    - Build 125 local smaller Senior Welfare Centers by 2020

- **2020**
  - Build and support senior leisure welfare facilities (e.g. Senior Welfare Centers)
Seoul’s Senior Welfare Centers’ Functions

**Elderly**
- Lifelong Learning
- Hobby / Leisure
- Employment
- Healthy Living
  - Functional Recovery
  - Care Service
  - Health Promotion
  - Meal Services
- Emotional Support
- Social Engagement

**Family**
- Family Integration
- Family Service
- Local Resource
  - Development
  - Volunteer recruitment and management
  - Sponsorships
- Local Welfare Matching
  - Collaborations with other Centers
  - Joint local programmes
- Senior Rights Protection and Promotion

**Local Community**
- Local Resource Development
- Local Welfare Matching
- Senior Rights Protection and Promotion

**Organisation Management**
- Operations and Management
- Research and Development
- Programme Management
- Healthy Living
  - Functional Recovery
  - Care Service
  - Health Promotion
  - Meal Services
- Emotional Support
- Social Engagement
- Senior Community Center Innovation Program
- Residential Support
- Income Support
Eligible Users of Senior Welfare Centers

Municipal ordinance stipulates that local residents aged 60 or older have priority access to Senior Welfare Centers. Most of these Centers are open to those aged 60 or older in principle, but for married couples, as long as one spouse is at least 60 years of age, both spouses are deemed eligible. In most cases, the Centers limit their membership to local residents, with one exception. The Center in Jongno, being located in the city centre, opens its membership to all citizens of Seoul who are above 60. Members are free to participate in the Center’s programmes at no or low cost. Low income seniors, so called “eligible benefit recipients”, can use the services for free.

A survey was conducted on the use of a Senior Welfare Center in 2013. It was found that 59% of the users were women and 41% were men, and that 53% were in their 70s, 25% in their 80s, and 17% in their 60s. Only 9% were eligible benefit recipients whereas 73% were residents of local Gu districts.

Facilities such as ping pong tables are popular amongst members of Mapo Senior Welfare Center.

Centers engage seniors to provide community support services such as being traffic wardens for children.

Users of Senior Welfare Centers in Seoul

<table>
<thead>
<tr>
<th>Gender</th>
<th>Age</th>
<th>Eligible Benefit Recipients</th>
<th>Residential Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>60s</td>
<td>9%</td>
<td>Local Gu District</td>
</tr>
<tr>
<td>Female</td>
<td>70s</td>
<td>53%</td>
<td>Other Areas</td>
</tr>
<tr>
<td></td>
<td>80s</td>
<td>17%</td>
<td></td>
</tr>
</tbody>
</table>

Problems Senior Welfare Centers Face

While Senior Welfare Centers are a positive development in many regards, some issues have nevertheless surfaced after years of operation.

First, the Welfare of the Aged Act, the Ministry of Health and Welfare guidelines, and SMG protocols stipulate different sets of rules regarding eligible users, hours of operation, fees, facility requirements, and the manpower of senior welfare centres. These rules are not consistent, and the lack of specific requirements and rules have led to confusion in operation.

Second, the Centers do not have sufficient space. While the average building area of a Senior Welfare Center is slightly greater than that of a general social welfare centre, the area per person is relatively low. This is because the Senior Welfare Centers experience a high volume of daily users.
Compared to similar facilities overseas, Senior Welfare Centers in Seoul operate under poorer conditions, underperforming than those in other cities around the world in all three categories: number of daily users, building area, and area per person. Accordingly, Senior Welfare Centers are crowded more often than not, resulting in space shortages.

### Capacity of Social Welfare Centers in Seoul

<table>
<thead>
<tr>
<th>Centre Type</th>
<th>Building Area per Centre (A)</th>
<th>Daily Users per Centre (B)</th>
<th>Area per Person (A/B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Social Welfare Centers</td>
<td>2,668 m²</td>
<td>726 Persons</td>
<td>3.8 m²</td>
</tr>
<tr>
<td>Disability Welfare Centers</td>
<td>3,026 m²</td>
<td>909 Persons</td>
<td>3.3 m²</td>
</tr>
<tr>
<td>Senior Welfare Centers</td>
<td>2,888 m²</td>
<td>1,279 Persons</td>
<td>2.3 m²</td>
</tr>
</tbody>
</table>

Third, it is difficult to expand Center services to more senior citizens. Current Senior Welfare Centers are limited in space and have exceeded their maximum capacity. Therefore, they are not as keen to take on new users. There are cases where new members do not adapt well when they fail to bond with existing members. This is one of the reasons many Center programmes focus solely on existing members. It is a challenging issue to address.

Fourth, there is prejudice against Senior Welfare Centers. Many citizens see them as places that attract the elderly who need financial or other assistance. This perception has made it difficult to expand the scope of programmes. It is crucial that general awareness be improved to show that while there are many free programmes for eligible benefit recipients, the Centers are essentially designed as senior leisure facilities that are open to all senior citizens.

Finally, there are issues regarding accessibility and dilapidated facilities. While some Senior Welfare Centers are located near metro stations or near main roads, most are in residential areas or the outskirts. Restricted access by public transport has discouraged many potential Center users. Although there are free shuttle bus services for better access to Centers, the number and frequency of buses are insufficient to accommodate current demand. Furthermore, most Senior Welfare Centers are more than 20 years old, and no longer provide a pleasant environment. Budget allocation is not an easy matter to resolve, and facility improvement will take some time.
Day Care Centers

Background

Seoul's Day Care Centers are part of a range of homecare services provided to senior citizens with limited physical and mental capabilities, who cannot rely on long-term care from their families. Seniors are admitted to daytime or night-time facilities to support their daily routines and improve their physical/mental capabilities. One of the major roles of a Day Care Center is to ease the physical and emotional burden on families. For a variety of reasons, many seniors are taken care of by family members even when they need institutional care. Such seniors are admitted to care facilities for a limited period of time to help the family return to their lives.

It was in the mid-1980s that senior welfare organisations started this caregiving service. When the Welfare of the Aged Act was revised in 1989, this service began to be recognised as part of the public institutional care programme. These and other changes led to the day care services in Seoul today. As of 2018, there are 323 Day Care Centers in Seoul.

Changes in Seoul’s Day Care Center Policy

After a pilot programme was launched in 1992, Seoul’s Day Care Centers experienced substantial growth. From 2002 onwards, regulations were relaxed to allow Senior Welfare Centers, Senior Community Centers, churches, temples or other such facilities to be used as small-scale care facilities or daytime care facilities. This contributed to a rapid increase in the number of Day Care Centers. In 2005, the central government decided to transfer the authority over the day care programme to local governments, after which the SMG began to implement the programme citywide. Care was provided only in the daytime, but it was soon expanded to night-time: both are available to the present day. Since 2009, the SMG has reviewed and certified those facilities that have added professional programmes to existing services.

Role

Day Care Centers in Seoul serve senior citizens with dementia or other serious illnesses by looking after them on the premises, either day or night, for a specific period of time. This provides some respite for family members.

A variety of programmes are provided to the elderly for little or no fees. These range from basic health management, such as help with high blood pressure or diabetes, to meals and nutrition care as well as professional programmes for rehabilitation. The Centers encourage seniors who need care to stay healthy and continue living in their local communities, delaying their admission to care facilities as much as possible.

Certification Indicators for Senior Day Care Centers

**Fundamental Elements**
- Organisational vision
- Human resources
- Facility and environment
- Ethics
- Standardised service

**Tailored Care**
- Service plans and evaluation
- Nutritional service
- Dementia improvement strategies
- Pick-up and drop-off service
- Leisure and social participation assistance
- Night-time service

**Peace of Mind**
- Emergency care
- Hygiene and health check system

**Rights to Use**
- Service information and guide
- Family assistance
- Protection of user rights
Users
An elderly person eligible under the Senior Long-term Care Insurance scheme may apply for Center services. When circumstances allow, the Centers may admit those with geriatric illnesses.

Issues
Day Care Centers face a number of issues:
First, there is the gap between family demands and Center services. For seniors suffering from dementia or geriatric illnesses, their families often want facilities with beds like in hospitals or more advanced care facilities. However, Day Care Centers are often limited in space and cannot provide beds to all users. Moreover, as operating hours are usually from 8 am to 10 pm, it is difficult for family members who are working to drop off and pick up the patients on time.

Second, the budget and manpower of Day Care Centers are often inadequate. While they vary in size, SMG subsidies to Day Care Centers remains very small: between KRW 11,000 and KRW 53,000 per person, per month. It is true that seniors with Senior Long-term Care Insurance receive up to 85% in subsidies from the National Health Insurance Service, but the Centers are left with only KRW 3 million to take care of 15 seniors for 20 days a month. This places a lot of pressure on the caretakers, who have to cope with a ratio of 1 caretaker to 5 seniors. The turnover rate of caretakers is quite high, making it difficult to provide quality service.

Conclusion
With the prospect of a super-aged society looming in the near future, Senior Welfare Centers and Day Care Centers cannot avoid the greater challenges they are expected to face in the years to come. The Centers also face the equally crucial responsibility of being at the forefront in identifying and responding to elderly issues in the city. While the Centers will have to resolve their many issues, substantial investments are also needed to improve Center spaces, expand facilities for easier access, and offer a wider variety of programmes. It will not be possible to cater to every single demand from the growing senior population in senior facilities. Nevertheless, it is vital that the Centers think beyond the old, rigid frameworks that continue to define current programmes.

Singapore: Senior Activity Centres (SACs) and Active Ageing Hubs (AAHs)
Complementing active ageing services and initiatives in the community are centre-based services, which play an important role in supporting seniors and families with seniors who have mild to moderate care needs. These centre-based initiatives are important nodes for seniors to continue being engaged in the community, receive care support and also support seniors with working caregivers.

This case study shares two centre-based initiatives in Singapore that support active ageing—Senior Activity Centres (SACs) and Active Ageing Hubs (AAHs).

SACs mainly focused on providing resources for vulnerable and lower-income seniors while AAHs integrate active ageing and care services, offering both centre-based and home-based care services.
Senior Activity Centres

Addressing the need for care and support services to be situated near to where vulnerable elderly residents live, Singapore established drop-in centres known as Senior Activity Centres (SAC). Such centres provide a place in which seniors can be kept mentally, socially and physically active through social and recreational activities. They also provide a basic level of support, including emergency response, information or referral for care support.

Background

SACs were first established in 1995 to provide support services to low income seniors under a joint Ministry of Community Development, Youth and Sport (now known as Ministry of Social and Family Development) and Housing and Development Board (HDB) project to improve the living conditions of seniors living in HDB rental flats.

The SAC is a drop-in centre that provides information and referral, as well as activities to support and engage the vulnerable and socially-isolated seniors living in HDB rental flats.

The primary target clientele of SACs is seniors, 60 years old and above, residing in HDB rental flats. The key objectives of the SACs are to:

(a) Improve the quality of life of low-income and vulnerable seniors residing in HDB rental flats;

(b) Detect and prevent social isolation of low-income and vulnerable seniors within the SAC's service cluster;

(c) Enable seniors to remain cognitively and physically active in the community as long as possible by engaging them through social and recreational activities.

Each SAC organizes social recreational activities and reaches out to all seniors residing in rental units at least once every year. Its representatives visit frail and/or homebound seniors at least once a week. Apart from these services, the SACs also facilitate the formation of mutual help groups and offer information and referral services. Some SACs are also responsible for manning the Alert Alarm System during their operational hours, and for responding to the distress calls of seniors if they were to activate the emergency pull-cords fitted in their homes.

Since April 2018, the SACs’ programmes in public rental housing blocks are funded by the Ministry of Health (MOH). As of 2018, there were 77 SACs supporting seniors residing in HDB rental flats.

The success of SACs in public rental housing estates led the Ministry of Social and Family (MSF) and HDB to pilot SACs at HDB Studio Apartment (SA) developments in 2011. As of end 2018, there were 50 such SACs located at SA developments.
Active Ageing Hubs

In anticipation of increasing healthcare needs, MOH unveiled Active Ageing Hubs (AAHs) in 2017. These are one-stop hubs in the community, often within new and existing housing developments, integrating both active ageing programmes as well as care services such as day care, day rehabilitation and assisted living services.

With a wide-range of services, AAHs aim to facilitate the seamless transition of care for seniors in the community—from the active to the frail. This is important as seniors’ needs change and evolve as they grow older. Moreover, these hubs also serve as venues for social and learning activities for all ages, enabling AAHs to be vibrant places which can foster a sense of community amongst residents in the wider neighbourhood and strengthen intergenerational bonding.

MOH has planned for AAHs to be built in at least 10 future HDB developments. As of end 2018, 5 Active Ageing Hubs have started operations, of which the first two (i.e. Kwong Wai Shiu Community Care Centre at McNair Road and NTUC Health Active Ageing Hub at Kampung Admiralty) are the most developed.

The Kwong Wai Shiu Community Care Centre offers rehabilitative care as well as social programmes for residents in the area, complementing services offered by the Kwong Wai Shiu Hospital in the neighbourhood. Since the Centre’s opening in November 2017, more than 500 elderly residents have signed up as members, enjoying access to a gym designed for seniors, and activities such as line-dancing and IT classes. The centre has 40 day care places for elderly residents and also serves 100 house-bound residents, providing them with home-based medical care.

Similarly, the NTUC Health Active Ageing Hub in Kampung Admiralty offers a diverse range of services for active and ambulant seniors, as well as care services. For instance, it offers senior day care services, which includes dementia care, respite care and other services such as transport and escort services. It also provides day rehabilitation, which focuses on active rehabilitation therapy, maintenance exercises and a specialised gym programme for seniors.

More importantly, this AAH has developed community and healthy living activities such healthy cooking demonstrations, fall-risk and wellness screening, as well as advanced care and retirement planning programmes. It also cultivates volunteer opportunities, where younger and more active seniors can help older and frail seniors. These volunteers might become a ‘makan kaki’, a buddy with whom seniors can cook and eat together, or be trained to assist as a Dementia Friend, caring for seniors with dementia. Co-located beside a childcare centre, this AAH also supports intergenerational programmes to encourage greater bonding between seniors and young children.
Health check-ups and screenings conducted at NTUC Health Active Ageing Hub.

Intergenerational reading and art and crafts programmes at NTUC Health Active Ageing Hub.

As a newly piloted initiative, the efficacy of AAHs remains to be seen. However, as a one-stop hub, AAHs can facilitate the integrated provision of both active ageing and care services. This should encourage both younger or more ambulant seniors, who can enjoy active ageing services, to also be key resources as senior volunteers. It also encourages the greater activation of social and public spaces to promote active ageing, since AAH programmes extend beyond the physical space of the hub into the community.
Aiming to build a care service platform in collaboration with local partners, the Steering Group for the Gwangjin-gu Special Care Zone studied the needs of the elderly and their families in 2015 before launching its initiatives. They found that meals were the main concern: households comprising one or two senior citizens found it very challenging to eat properly and on time.

As a result, member organisations of the Gwanjin-gu Special Care Zone decided to start the Open Kitchen to provide healthy meals and related local care services for seniors.

The Open Kitchen has three functions: restaurant, service platform and education centre.

First, it is a restaurant offering balanced meals under the leadership and management of nutrition specialists.

Co-located at the ground floor of the building where Gj-Care and Well-Union are based, the Open Kitchen is 130 m² in area, and consists of a dining area of 70 seats, a buffet-style serving area, an open kitchen, an age-friendly food stand and an outdoor patio.

The restaurant sells nutritious meals at lunchtime. Senior citizens pay KRW 4,000 (others pay KRW 7,000) for a meal of rice, soup, and seven or more side dishes. Senior citizens are not the only ones who use the facility. Gwangjin-gu Special Care Zone staff members, employees and people from nearby businesses, schools and a church also visit as well. The Open Kitchen thus serves as an avenue for people of different generations to interact socially.

The Open Kitchen also serves as an integrated care service platform for Local Care Cluster members. The service platform sells a wide variety of age-friendly food products produced by Well-Union. It also offers information to help people access nutritional consultation and other care services.

Finally, the Open Kitchen is also an education centre offering training on age-friendly cuisine to professionals and elderly care health consultants who are in the Local Care Cluster service. This helps create jobs for the elderly.

The Open Kitchen was promoted to other Gwangjin Social Economy Network (GSEN) member organisations, local welfare councils, an adjacent primary school, businesses, the church and the local community. It attracted a sizable number of visitors.
Meals play a vital role in bringing senior citizens together with their peers and with other generations, helping to build a close-knit local community. Providing affordable healthy meals to older adults who do not have ready access to welfare care services is a form of preventive care: an intervention before further social costs occur.

Outside mealtimes, the space is also open to local residents to be used for meetings, cultural activities and other such events. The Open Kitchen thus becomes a community-owned space.

Social support for seniors living alone comes mainly from the community: organised meal deliveries, home help and befriending services. However, these support services often deliver right to the elderly’s doorstep, leading to concerns that stay-alone seniors become even more cocooned in their flats. While there are dedicated eldercare centres such as Senior Activity Centres (SACs), the efficacy of these centres depends on how frequently the individual senior uses them. Moreover, the extensive help and support given to the elderly can have an opposite effect: being recipients of help can make the elderly feel they are not in control of their lives, which in turn may worsen depressive symptoms and feelings of loneliness.

One neighbourhood in Singapore decided to do things differently. Hoping to go beyond traditional forms of support for elderly living alone such as meal deliveries, Montfort Care—together with the Ministry of Health (MOH), the Agency for Integrated Care (AIC) and the Tote Board Community Health Fund—decided to change the approach towards social support for stay-alone seniors. Instead of treating stay-alone seniors as passive recipients of help, they decided to facilitate a social environment where there is self-help. They sought to empower stay-alone seniors to do their part in contributing to the community.

The Goodlife! Makan community kitchen was thus born out of this desire to empower stay-alone seniors and draw them out of their homes. This community kitchen is designed to be for seniors, by seniors. Seniors living alone in the rental blocks and in the surrounding neighbourhood come together daily to prepare, cook and share their meals together.
Goodlife! Makan is located in the Marine Parade neighbourhood. There were concerns that there was a growing population of stay-alone seniors in Marine Parade and that some seniors might be at risk of social isolation, given their limited interaction with fellow seniors and residents within the neighbourhood. Montfort Care, a voluntary welfare organisation, has been providing community-based support with a network of programmes to the Marine Parade community for 15 years. Through its programmes, Montfort Care reaches out to seniors living alone to ensure they are provided with necessary assistance. For instance, they bring healthcare closer to home for seniors diagnosed with chronic illnesses. Montfort Care saw an opportunity to empower stay-alone seniors, and to build a place where seniors can come together and help themselves.

The 360 m² kitchen is located at the void deck of a public housing rental block. Seniors stream in at around 10:00 am in the morning and decide among themselves what the meal of the day will be, who will shop at the nearby market, and who will be in charge of the different stages of preparing the meal. About 40 to 50 seniors will gather at the kitchen every morning and only two or three staff members are present to help. This keeps the kitchen informal and gives seniors a greater sense of ownership.

There are provisions for seniors of different backgrounds and profiles. For instance, there are designated cooking stations for Muslims and non-Muslims so that they can prepare meals together. The community kitchen also sees other residents mingling and interacting with the seniors.

The design of the community kitchen enhances its accessibility. The borderless compound shifts away from conventional designs for elderly centres, which are usually fenced up and gated. With its bright, colourful interior and doors opening up to the walkways, Goodlife! Makan is seamlessly connected to the wider community. This setting not only helps create an inviting communal space, but also addresses the psychological well-being of stay-alone seniors and reduces social stigma.

The community kitchen has redefined what it means to help the elderly. Having such a community kitchen draws the elderly who live alone out of their homes, and also enables them to interact and build friendships. For some, it is also a chance to learn new skills and rediscover a sense of purpose and potential.

What might have been another typical gated elderly centre, where seniors would passively receive their meals, has been redesigned to be a vibrant, active space for conversation, learning and companionship.

Goodlife! Makan not only empowers stay-alone seniors to take ownership in preparing their meals, but also transforms the way in which the community lives and interacts with its seniors. For example, a chef who stays in the neighbourhood recently walked past Goodlife! Makan and willingly volunteered his time to conduct baking lessons for the seniors. Some stallholders from the adjacent hawker centre have also voluntarily supplied fresh produce free-of-charge to the kitchen. This helps improve the sustainability of the social space, which need not be solely dependent on government or organisational funding and manpower.

Goodlife! Makan is inspiring other communities and neighbourhoods in Singapore, such as Tampines and Hong Kah North, to start their own ground-up initiatives that are similarly open and empowering spaces for the elderly. The community kitchen has provided a good starting point to re-think how our community spaces can be truly multigenerational, engaging residents of different age groups. As CEO of Montfort Care Mr Samuel Ng puts it, the initiative is a step towards being “part of a community that is refining ageing and living.”
In recent years, both Seoul and Singapore have responded to demographic shifts towards a rapidly ageing population through a range of targeted policies and initiatives. They have sought to ensure that seniors can age in a familiar environment within their communities, with convenient access to health and social services near to where they live. Both cities are also supporting seniors in their active ageing, through lifelong learning programmes as well as health and wellness activities, to keep their minds and bodies fit.

Common Principles

The experiences of both Seoul and Singapore suggest that two key principles are vital in building an age-friendly city: a concerted approach which involves a range of partners and stakeholders, and the involvement of the seniors themselves in determining how they will age well.

Concerted multi-stakeholder approach

Ageing is a complex issue that cuts across all sectors and domains, be it housing, social services, transport or education. No one institution can cope with all ageing issues in their entirety. It is important to ensure that the different agencies within the government are aligned and working together, across sectors, to address the challenges of an ageing population.
Singapore has taken a Whole-of-Government approach to ageing. It has developed a number of inter-ministerial committees over the years, with representation from all ministries and agencies, to look comprehensively at the challenges of an ageing population. Such committees have allowed cross-cutting issues to be tackled holistically, with better coordination in addressing different age-related aspects of public policy, from health to infrastructure planning.

Alongside this coordinated strategy, Singapore also encourages a multi-stakeholder approach to ageing, ensuring that the family, the community and seniors themselves are actively involved in ensuring the well-being of Singapore’s elders. For example, while the Government provides policies and programmes for seniors, the community plays key roles such as providing befriender services and peer support.

The Seoul Metropolitan Government (SMG) has also made an effort to adopt a multi-stakeholder approach in dealing with ageing issues. To overcome a tendency towards a silo mentality in public administration, the Seoul Comprehensive Seniors Plan was designed to be led by a multi-agency task force formed within the SMG. City agencies and outside experts have participated to pursue the aims proposed by World Health Organization’s (WHO) Global Network of Age-friendly Cities and Communities (GNAFCC), which specifies key values such as active ageing, ageing-in-place, and generational integration.

Planning with seniors, for seniors

While population ageing is a global phenomenon, ageing is also a personal experience and varies with each person. As such, it is important in the planning of an age-friendly city to engage with the seniors, to understand their needs as they age and their aspirations for ageing well. This ensures that policies and initiatives can directly address the needs of seniors, and that seniors are empowered to share and be part of the decision-making process.

The development of Singapore’s Action Plan for Successful Ageing involved multiple public consultations with seniors through different channels to better understand how they wish to age. Seniors were able to highlight their needs and interests, such as the desire to continue working and volunteering, the need for more caregiver support, and the wish to see a more senior-friendly urban environment. These insights informed policies and initiatives directed towards improving key areas under the Action Plan.

After the finalisation of Seoul’s 2020 Aged Society Master Plan—the city’s first master plan to become an age-friendly city—a Senior Monitoring Team was formed from senior citizens living in different districts in Seoul. The team’s mission was to review the progress of the master plan’s implementation, and to propose policy alternatives for the future. Policy ideas and new suggestions from this monitoring effort have been incorporated in the second master plan, the Seoul Comprehensive Seniors Plan.

The purpose of adopting a multi-stakeholder approach and actively working with seniors is to realise the vision of an age-friendly city guided by the principles of ageing-in-place and active ageing. Through this joint study, CLC and SI researchers have identified key lessons from these two approaches to support effective ageing in our cities.

**Key Lessons**

**Physical infrastructure and social services should be integrated**

The experiences of Seoul and Singapore show that it is especially important to integrate physical infrastructure for the elderly with senior-friendly housing and relevant services, such as eldercare and healthcare. Infrastructure and services should be planned from the point of view of senior citizens’ convenience and needs. This is the most important element to consider in developing senior-friendly living facilities.

Singapore’s Kampung Admiralty exemplifies this through the integration of housing, healthcare, recreational and commercial facilities in one single development. This ensures that seniors can access medical and social services where they live, enabling them to continue to stay on in these homes even as their needs change. Kampung Admiralty is a single development; Singapore also recognises the need to make such integration of physical planning and social services more widespread throughout the city.

Beyond better integration, Singapore is going further to explore Assisted Living. This is a model of living that integrates home and care. For example, within one block or even on the same floor of a public housing block, there may be individual apartment units together with shared communal facilities for dining, social activities and a range of eldercare services. It was announced in 2018 that Housing & Development Board (HDB) will be working with the Ministry of Health (MOH) to pilot assisted living in public housing in Singapore.87
Similarly, Borin Housing and Shinnae Medical Housing (SMH) in Seoul are examples of integrating housing and social services. An in-house manager addresses the elderly’s needs for welfare and healthcare. Through a variety of programmes in these housing establishments, senior citizens are encouraged to lead an independent life and initiate ‘self-help’ activities. Such activities are closely aligned with and supported by the physical design of the housing facilities. Emulating current best practices, a model should be developed for desirable senior housing, to document and demonstrate how to integrate physical planning and social service provision right from the early stage of architectural design.

Physical planning and social services can also be more closely integrated in the outdoor environment. There is an increasing need to reflect the needs of the aged with cognitive impairment in built environments. Such needs drive initiatives such as Seoul’s Environmental Design for the Cognitively Impaired for outdoor space and Singapore’s research study on Age-Friendly Neighbourhoods. Both projects are however still in their inception; more could be done to disseminate this approach more widely. The outdoor spaces of high-rise apartments could serve as a good test-bed for further innovations of this nature, since apartments are the most common type of housing in both Seoul and Singapore.

Scale ageing-related policies and initiatives to seniors’ actual way of life

For seniors to age-in-place successfully, they need to be able to easily reach the amenities and facilities they need. Mobility and the accessibility of the living environment are therefore important considerations. Mobility can be understood in terms of ‘life space’: the pattern of movements and activities reflecting where and how a senior lives. Life space can be measured in terms of how far the senior travels within or out of his or her neighbourhood, and the assistance needed to get to each venue or to conduct each activity. Knowing a senior’s life space is important, as amenities and facilities can then be sited according to the areas they frequent.

In this light, it is important to scale ageing-related policies and initiatives to seniors’ actual way of life. This encourages localised initiatives that the seniors can have access to near to where they live. It may also be necessary to review the administrative unit of municipal planning and governance. For instance, dong, the smallest administrative unit in Seoul, is used as a geographic basis to provide social services to senior citizens. However, according to a study conducted at the Seoul Institute (SI) using GPS analysis, the sphere of senior activities tends to be smaller than the size of a dong. Further research, perhaps involving big data analysis, is needed to investigate the actual behaviours of senior citizens, in terms of walking, leisure, consumption, and social networks.

Rethink housing and community

As we grow older, we form emotional attachments with our familiar surroundings and community. Senior citizens who can live independently want to continue living in their own homes. That said, some seniors may require specific amenities in senior-friendly housing.

The research team has observed strong resistance in both Seoul and Singapore towards moving into senior housing and facilities significantly away from home (e.g. suburbs), even when health or other circumstances obliged the elderly citizens to move out from their homes.

It is important to give the elderly an option to continue staying within their existing neighbourhoods. For this reason, public housing units designed for the elderly should ideally be distributed throughout the city, so that senior citizens can form their own local bonds and later stay within their own communities. Again, Kampung Admiralty in Singapore and Shinnae Medical Housing and Borin Housing in Seoul point to some best practices which could be more widely applied in other parts of each city.

Greater accessibility to eldercare and healthcare and a range of residential options, such as assisted living for elderly who could be too frail to live even in senior housing, should be made more widely available in local communities. The aim is to meet the varying housing needs of the elderly at different stages of health within local communities.

An age-friendly city is about having both appropriate physical infrastructure and effective social networks in the community to support seniors as they continue to reside within the neighbourhood. For instance, Singapore’s Active Ageing Hubs (AAHs) are physical hubs with programmes and services to support...
seniors as they age-in-place and to promote active ageing. These Hubs also serve as focal points to foster a sense of community amongst residents in the wider neighbourhood and to strengthen intergenerational bonding. Seoul’s Open Kitchen is a similar example. Made available not only to senior citizens but also the wider community, it provides a gathering place during mealtimes in order to foster a sense of community living. The Open Kitchen gives seniors opportunities to develop a sense of fellowship with community members and strengthen their social networks.

Partnering with existing providers is more effective than developing new social services

A salient lesson is the effectiveness of involving multiple stakeholders: partnering with existing providers and tapping on existing communities rather than developing new services or creating new networks. In Singapore, the Community Networks for Seniors (CNS) initiative draws on the resources and energies of existing community partners, enhancing instead of displacing or centralising their efforts to help seniors age actively in-place through their ongoing programmes and reach on the ground.

Similarly in Seoul, the Reaching-Out Community Service Center (ROSCSC) is effective only because it taps into a network of existing social services. Previously, social services provided by Senior Welfare Centers, dong offices, and community health centres were scattered around the city. The ROCSIC brought all services providing welfare, healthcare, cultural activities, and assistance for daily activities under a single umbrella. This increased accessibility for the elderly significantly.

Networking is a useful way to harness resources from the private sector. Seoul’s Socio-Economic Cluster at Gwangjin-gu represents a bottom-up social policy model. Originally introduced by a group of non-governmental organisations, the Seoul government now aims to spread the Gwangjin model throughout the city. Singapore’s Goodlife! Makan, while on a smaller scale, is also a good example of non-governmental efforts to take care of the needs of the elderly.

Ageing as an opportunity

Some senior citizens in Seoul have expressed that they feel overwhelmed when nearing retirement age. Not having prepared for life after retirement, many seniors feel that they are left without adequate financial resources for their later years. CLC and SI researchers have also observed that this trend is more common among men, compared to women, as women tend to participate more actively in social activities and community initiatives.

However, it is heartening that the conversation on ageing is shifting to one that focuses on the opportunities of ageing. Singapore’s National Silver Academy (NSA), for example, offers a platform where seniors can continue to learn. It provides access to a network of over 30 post-secondary education institutions and community-based organisations with which seniors can sign up for a wide range of subsidised courses and learning programmes. The Seoul 50+ Foundation and 50+ Center is also looking to enable seniors with greater opportunities to explore second careers and rediscover their life goals through education, interest groups and careers. What remains crucial is to rethink the role of older persons in society, seeing that they can continue to having meaningful roles throughout their lives, as they age.
Conclusion

A rapidly ageing population is an unprecedented urban challenge for cities around the world; Seoul and Singapore are no exceptions. However, Seoul’s and Singapore’s experiences show that a rapidly ageing population is also full of opportunities—supporting seniors to age-in-place, empowering communities to play a part, facilitating lifelong learning and active ageing, and seeding local ground-up initiatives.

In concluding this study, CLC and SI picked out two considerations for cities that are facing or will face population ageing.

Reconsider how we view seniors

The seniors of tomorrow will be vastly different from those of today. Widespread improvements in healthy life expectancy are expected, alongside new health challenges such as an increase in the prevalence of dementia. As discussed earlier, the profile of seniors is changing, with higher education and income levels and evolving lifestyle patterns. An age-friendly city not only needs to consider physical and social infrastructure, but also how seniors are defined, regarded and treated in society.

While most policies and programmes tend to use the age of 65 to demarcate the turning point at which one becomes ‘elderly’, such a definitive age marker continues to be debated and questioned. Policies and initiatives also adopt a range of definitions of an elderly, depending on the aim of their programmes.

It would be simplistic to think that a certain age is the only marker of being elderly. Seoul conducted interviews with seniors who indicated that they consider themselves to have crossed the elderly threshold at age 70 or above. This suggests that 65 years need not be a rigid age boundary after which a person is considered senior: it is a milestone that differs by society and individual. Many who are above 65 years of age continue to want to be active and socially engaged. There is thus a need to be aware of and account for the complexities of ageing as well as the considerable physical and cognitive capabilities one can continue to possess despite one’s numerical age.

Taking this into account, there needs to be a mindset shift: from regarding ageing as a negative process, to seeing it as a natural process in which seniors can stay active and continue to make distinct and positive contributions to their communities, with the benefit of their life experience and wisdom.

Empower our seniors and foster a greater sense of ownership

If we need to change how we regard seniors, we must also continue to empower seniors to be active agents of their own lives and futures.

Seoul and Singapore have offered some good examples of this. Seoul’s 50+ Foundation, for example, is a key initiative in empowering seniors to take charge of the second half of their lives—to continue learning and pursuing new activities and challenges. Wellness initiatives in Singapore also empower seniors to take charge of their own health, so that they become community stewards themselves, managing senior-related programmes and spaces and helping others to age well.

Seoul and Singapore should continue to encourage and nurture seniors to become active contributors and assets in their communities. With greater community and senior ownership of senior-friendly initiatives, the discourse on ageing can grow beyond welfare or healthcare concerns. This may well encourage more innovative policies that can address the varied and complex needs and aspirations of tomorrow’s urban seniors.
Towards an Age-Friendly City: Lessons from Seoul and Singapore

- Planning for seniors, with seniors
- Concerted multi-stakeholder approach
- Partnering with existing providers is more effective than developing new social services
- Reconsider how we view seniors
- Physical infrastructure and social services should be integrated
- Empower our seniors and foster a greater sense of ownership
- Rethink housing and community
- Ageing as an opportunity
- Scale ageing-related policies and initiatives to seniors’ actual way of life
## GLOSSARY

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>AAH</td>
<td>Active Ageing Hub</td>
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<tr>
<td>AAS</td>
<td>Alert Alarm System</td>
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<td>AIC</td>
<td>Agency for Integrated Care, Singapore</td>
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<td>BCA</td>
<td>Building &amp; Construction Authority, Singapore</td>
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<td>BTO</td>
<td>Build-To-Order</td>
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<td>C3A</td>
<td>Council for Third Age, Singapore</td>
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<td>CBP</td>
<td>Community Befriending Programme</td>
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<td>CC</td>
<td>Community Club</td>
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<td>CGH</td>
<td>Changi General Hospital</td>
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<td>CLC</td>
<td>Centre for Liveable Cities, Singapore</td>
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<td>CNS</td>
<td>Community Networks for Seniors</td>
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<td>CPF LIFE</td>
<td>Central Provident Fund Lifelong Income For the Elderly</td>
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<td>CPF</td>
<td>Central Provident Fund</td>
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<tr>
<td>EASE</td>
<td>Enhancement for Active Seniors</td>
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<td>EHA</td>
<td>Eastern Health Alliance</td>
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<td>FDW</td>
<td>Foreign domestic worker</td>
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<td>GNAFCC</td>
<td>Global Network of Age-friendly Cities and Communities</td>
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<td>GRO</td>
<td>Grassroots organisations</td>
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<td>GSEN</td>
<td>Gwangin Social Economy Network</td>
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<td>HAPPY</td>
<td>Healthy Ageing Promotion Program for You</td>
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<td>HDB</td>
<td>Housing &amp; Development Board, Singapore</td>
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<td>HPB</td>
<td>Health Promotion Board, Singapore</td>
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<td>ILP</td>
<td>Intergenerational Learning Programme</td>
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<td>ITE</td>
<td>Institute of Technical Education</td>
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<td>KMTAC</td>
<td>Korea Music Teaching Academy for Children</td>
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<td>LBS</td>
<td>Lease Buyback Scheme</td>
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<td>LDG</td>
<td>Local District Gu Government</td>
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<td>LKYCIC</td>
<td>Lee Kuan Yew Centre for Innovative Cities</td>
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<td>LTA</td>
<td>Land Transport Authority, Singapore</td>
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<td>MCA</td>
<td>Ministerial Committee on Ageing, Singapore</td>
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<td>MCYS</td>
<td>Ministry of Community Development, Youth and Sports, Singapore</td>
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<td>MND</td>
<td>Ministry of National Development, Singapore</td>
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<td>MOE</td>
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<td>MOH</td>
<td>Ministry of Health, Singapore</td>
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<td>MRT</td>
<td>Mass Rapid Transit</td>
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<td>MSF</td>
<td>Ministry of Social and Family</td>
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<td>NAFA</td>
<td>Nayang Academy of Fine Arts</td>
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<td>NC</td>
<td>Neighbourhood Committee</td>
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<td>NCSS</td>
<td>National Council for Social Services</td>
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<td>NLB</td>
<td>National Library Board, Singapore</td>
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<td>N Parks</td>
<td>National Parks Board, Singapore</td>
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<td>NSA</td>
<td>National Silver Academy</td>
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<td>NUH</td>
<td>National University Hospital, Singapore</td>
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<td>NUHS</td>
<td>National University Health System</td>
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<td>PA</td>
<td>People’s Association, Singapore</td>
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<td>RA</td>
<td>Retirement Account</td>
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<td>RC</td>
<td>Residents’ Committee</td>
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<td>RHS</td>
<td>Regional Health System</td>
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<td>ROCSC</td>
<td>Reaching Out Community Service Center</td>
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<td>SA</td>
<td>Studio Apartment</td>
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<td>SAC</td>
<td>Senior Activity Centre</td>
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<td>SAPS</td>
<td>Studio Apartment Priority Scheme</td>
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<td>SCEC</td>
<td>Senior Citizens Executive Committee</td>
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<td>SG Mark</td>
<td>Singapore Good Design Mark</td>
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<td>SG</td>
<td>Silver Generation</td>
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<td>SGO</td>
<td>Silver Generation Office</td>
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<td>SH Corp</td>
<td>Seoul Housing and Communities Corporation</td>
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<td>SHB</td>
<td>Silver Housing Bonus</td>
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<td>SI</td>
<td>Seoul Institute</td>
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<td>SMG</td>
<td>Seoul Metropolitan Government</td>
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<td>SMH</td>
<td>Shinnae Medical Housing</td>
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<td>SPS</td>
<td>Seniors Priority Scheme</td>
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<td>SSEZ</td>
<td>Special Social Economic Zone</td>
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<td>SSO</td>
<td>Social Service Office</td>
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<td>SUTD</td>
<td>Singapore University of Technology and Design</td>
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<tr>
<td>TCM</td>
<td>Traditional Chinese medicine</td>
</tr>
<tr>
<td>URA</td>
<td>Urban Redevelopment Authority, Singapore</td>
</tr>
<tr>
<td>VWO</td>
<td>Voluntary welfare organisation</td>
</tr>
<tr>
<td>WCS</td>
<td>World Cities Summit</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
<tr>
<td>YH</td>
<td>Yishun Health</td>
</tr>
</tbody>
</table>
ENDNOTES


8 Seoul’s data was gathered from Statistics Korea, “Special Population Projections”, 2005.


10 Sarah O’Connor, “World will have 13 ‘super-aged’ nations by 2020”, Financial Times, 7 August 2014, https://www.ft.com/content/f3368a0-1d8c-11e4-8f0c-00114feabdc0.


13 Ibid.

14 Seoul’s data was gathered from Statistics Korea (2016) http://kosis.kr/statHtml/statHtml.do?orgId=101&tblId=DT_1B8000F&language=en; Singapore’s data was gathered from Ministry of Health, Action Plan for Successful Ageing, 9.

15 Seoul defines the working age range as 15–64 years old while Singapore defines the working age range as 20–64 years old.

16 Seoul’s data was gathered from Statistics Korea, “Special Population Projections”; Singapore’s data was gathered from PMO NPTD, Population in Brief 2017 and Toh, “Singapore ageing”.


25 Linton, “Home Alone”.


27 Linton, “Home Alone”; Chan et al., “Loneliness and All-cause Mortality”.


35 Ministry of Health, “Speech by Mr Gan Kim Yong”.

36 Because of the Korean War, Seoul’s definition of its baby boomers (i.e. those born between 1955 and 1963) is different from that of the rest of the world, where it is defined as those born in the 1940s to 1960s.


40 All the statistics are from Jeong Eun-ha and Hwang Hye-shin, Senior Population Survey 2016, Seoul Welfare Foundation, 2016.


43 Tan Hueh Yun, “HDB to sell studio flats for the elderly”, The Straits Times, 6 November 1997.


46 Khaw Boon Wan, “Who Buys Studio Apartments?”.

47 A merger of the former Ageing-in-Place Priority Scheme (APPS) and the Married Child Priority Scheme (MCPS).

48 HDB suspended the supply of 2-room flats in the 1980s due to a lack of demand. In 2006, HDB resumed the supply of 2-room flats to cater to low-income families.

49 Buyers who are wheelchair bound may choose to have a lower kitchen countertop.

50 Take-up rate is based on the 2-room Flexi flats set aside for elderly in Build-To-Order (BTO) projects where the selection has already been completed up to April 2018. It includes elderly who booked a 2-room Flexi flat, either on long lease or short lease.

51 The Central Provident Fund (CPF) is Singapore’s social security system that enables working Singapore Citizens and Permanent Residents to set aside funds for retirement. Through its various accounts, it also addresses healthcare, home ownership, family protection and asset enhancement. The CPF Retirement Account (RA) is automatically created when a Singapore Citizen or Permanant Resident turns 55. The CPF Lifelong Income For The Elderly (LIFE) Scheme is a life annuity scheme that provides Singapore Citizens and Permanent Residents with a monthly pay-out for as long as they live.

52 The development of Kampung Admiralty was led by the Housing & Development Board (HDB), in partnership with Yishun Health (YH), National Environment Agency (NEA), National Parks Board (NParks), Land Transport Authority (LTA), Early Childhood Development Agency (ECDA) and Ministry of Health (MOH).

53 This refers to an initiative in which pharmacies with good accessibility provide various services such as medication, counselling, suicide prevention and comprehensive management of medication history in order to promote the health of citizens. 215 pharmacies of 15 local districts are designated as “safe pharmacies” as of 2017.

54 Continuous management rate is calculated as follows: Continuous management rate = (Intensive management group + Regular management group) / Total number of persons registered.

55 Health and medical resources include community health centres, welfare institutions, medical institutions, dementia support centres, mental health promotion centres and others.

56 Linking rate is calculated as follows: Linking rate = Number of cases linked / Total number of elders registered.

57 The decrease in the visiting rate and registration rate in the 2nd year compared to the 1st year was because 80 Dongs saw a significant drop in home visits aside from new registrations and continuous management. This decrease does not necessarily mean there were issues with the progress of the project.


60 Kim Bo Yeong, “What does the Reaching Out Community Service Center project look for?”.

Activities inside the bounds of home include hours spent in sleep. Space near home includes streets in front of the home, pagodas and shaded areas for public use, homes of neighbours nearby, and routes used for daily walks. External activities include time spent on the move to reach a destination.


Orientation refers to the ability to correctly recognize where one is. It generally concerns the ability to distinguish between people, places, and time. Orientation requires awareness, the ability to think and make decisions, memory, and attentiveness. Someone who is disoriented is generally unable to answer questions about identity, location and time, such as ‘Who are you?’ and ‘What date is today?’

There were 198 respondents in total, but only 53 took part in both the preliminary and follow-up surveys. 39 of these were 65 years or older.

The rates were calculated as follows: Increase (%) = (Follow-up survey – Preliminary survey) / 4 (Top score – Lowest score) * 100.


More information on Silver Zones can be found in the first CLC-SI publication. Centre for Liveable Cities, Planning for Communities: Lessons from Seoul and Singapore (Singapore: Centre for Liveable Cities, 2017), 44 – 45.

As part of the Ministry of Health’s healthcare system reorganisation efforts in 2018, Alexandra Health Systems has since been merged with National Healthcare Group to form the National Healthcare Group (NHG) cluster. Refer to Lianne Chia, “MOH to reorganise healthcare system into three integrated clusters”, Channel News Asia, 18 January 2018.


Ibid.


Content provided by National University Health System.

Content provided by Changi General Hospital; INSEAD.

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Diagram Credits

6: Korean Statistical Information Service
7: Department of Statistics, Singapore
20, 22: Seoul Welfare Foundation
25, 27: Ministry of Health, Singapore
70: Seoul Metropolitan Government
82: Lee Tae Su et al. (2017)
Seoul and Singapore are experiencing a demographic shift as their populations age. Over the years, both cities have formulated plans, programmes and policies to support their seniors to live healthily, actively and purposefully as they navigate their daily lives within high-density urban environments. Both Seoul and Singapore share common aspirations to continue building age-friendly cities that support and empower their seniors.

*Age-Friendly Cities: Lessons from Seoul and Singapore* is the third joint research publication between the Centre for Liveable Cities and the Seoul Institute. This publication explores the current and future ageing landscape in Seoul and Singapore and their ongoing efforts to address these issues. Case studies are examined under the themes of ageing-in-place and active ageing to distil common lessons on how cities can be more inclusive for seniors.