COS FACTSHEET: BEYOND HEALTHCARE TO HEALTH

NURTURING A HEALTHY NATION AND A HEALTHY PEOPLE

1. We should move beyond delivering good healthcare to encouraging good health. In the coming year, the Ministry of Health (MOH) will invest in new efforts to encourage and empower individuals to take good care of their health, arrest the causes of ill health early and reduce the progression of long-term chronic diseases.

WAR ON DIABETES

2. Many of the efforts will support the work of the Diabetes Prevention and Care Taskforce to prevent, screen and control for diabetes more effectively.

Prevent

a. Healthier Dining in the Community

3. The public sector will play its role in encouraging healthier diets by implementing Whole-of-Government Healthier Catering Guidelines from 1 April 2017. Caterers engaged for government events and training courses will offer healthier options in accordance with the guidelines. This includes providing whole grain options, reducing the number of deep-fried items, and offering plain water and fresh fruits.

4. The Health Promotion Board (HPB) is working with the catering industry to help them meet the new guidelines. It is also encouraging public sector organisations to include healthier options, while still providing sufficient flexibility and choice. HPB hopes that being able to pick from a wider range of caterers offering healthier options will also encourage private sector consumers to adopt similar practices.

b. Healthier Ingredient Development Scheme (HIDS)

5. From 1 July 2017, HPB will invest $20 million over three years on the Healthier Ingredient Development Scheme (HIDS). The scheme will build on HPB’s earlier Healthier Ingredient Scheme pilot and focus on introducing whole grains (in rice and noodles) and healthier cooking oil. It will incentivise food ingredient manufacturers and suppliers to innovate and develop products with healthier ingredients, and promote their adoption among F&B businesses and consumers.

c. Launch of HealthHub Track

6. From April 2017, HPB will launch HealthHub Track – a personal health management app in HealthHub which will allow Singaporeans to utilise digital tools to monitor and manage their health conditions. Singaporeans at risk of developing diabetes can also enrol in the HPB’s 12-week long Diabetes Prevention Programme that will help participants to tackle lifestyle risk factors for diabetes.

Screen
d. **Diabetes Risk Assessment (DRA) Tool**

7. The current recommendation under HPB’s Screen for Life programme is for those aged 40 and above to go for diabetes screening once every three years. However, age is not the only risk factor and some below 40 years old may also be at risk of diabetes due to other factors.

8. MOH will roll out a Diabetes Risk Assessment (DRA) tool, to help Singaporeans aged 18 to 39 assess their risk for undiagnosed diabetes and based on the assessment, determine if they should go for diabetes screening. The tool will incorporate several risk factors, such as family history, age, gender, body mass index (BMI), physical activity and nutrition, known hypertension and history of gestational diabetes. It was developed using local data, referencing similar tools in other countries. It will be accessible online on HealthHub from 1 September 2017.

e. **Enhanced Screen for Life (SFL) Subsidies**

9. Under HPB’s Screen for Life (SFL) programme, HPB invites eligible Singaporeans to undergo recommended screening tests at the appropriate time. These tests include screening for diabetes, high cholesterol, high blood pressure, obesity, colorectal cancer and cervical cancer.

10. To further encourage screening and follow-up under SFL, MOH will simplify the subsidy framework and enhance the subsidies from 1 September 2017.

11. The fee for screening and the first post-screening consultation will be fixed at $5 for eligible Singaporeans and $2 for CHAS cardholders, both Blue and Orange. Pioneers will not have to pay. The fixed fee of $2 and $5 will cover both the initial screening and the first post-screening consultation, if the test results show that a consultation is required.

**Control**

f. **Holistic Approach in Lowering and Tracking Chronic Kidney Disease (HALT-CKD) Programme**

12. A common complication of diabetes is chronic kidney disease (CKD) and kidney failure. To slow down the deterioration of chronic kidney disease and reduce kidney failure rate, MOH will introduce a national ‘Holistic Approach in Lowering and Tracking Chronic Kidney Disease’ (HALT-CKD) programme across all polyclinics progressively from April 2017. Other than initiating and optimising kidney-protective medication, HALT-CKD will better identify and control risk factors that contribute to CKD deterioration, such as blood pressure and diabetes control.
g. Diabetes Appropriate Care Guides (ACGs) on Medications for Type 2 Diabetes & Pre-Diabetes Management

13. To better equip primary care doctors to care for patients with diabetes, the Agency for Care Effectiveness will issue two Appropriate Care Guides in July this year. The first care guide will provide recommendations on medications for type 2 diabetes, while the second details a systematic way for the management of pre-diabetes. The guides will complement the existing Diabetes Clinical Practice Guidelines, which were issued in 2014.

Healthy Bodies, Healthy Minds: NurtureSG Recommendations

14. The NurtureSG Taskforce has developed a suite of recommendations to strengthen health promotion from pre-schools to Institutes of Higher Learning, and extend health promotion beyond schools to homes and the community. While schools will do more to integrate health promotion into the daily activities of our young, the government will also partner parents and caregivers in efforts to improve their children’s health. The broad strategies by the Taskforce are:

- **Enable** our young to experience the benefits of healthy living;
- **Equip** parents, students, and teachers with the skills necessary to foster a healthier environment;
- **Educate** and support parents to inculcate healthy habits in their young; and
- **Engage** the public through various platforms.

a. Physical Activity and Nutrition: Active and Healthy Living

15. We will expand opportunities for physical activities in pre-schools, mainstream schools and Institute of Higher Learning, to make healthy living more accessible for students:

- We will enhance requirements for outdoor physical activities in pre-schools, and provide more opportunities for unstructured play in mainstream schools.
- Outside of the school curriculum, we will introduce more opportunities for parents and children to engage in physical activities together. HPB will also provide students with steps trackers as part of the National Steps Challenge.
- The availability of healthier food options will also be increased for children and youth, with enhanced nutritional requirements in pre-schools. HPB’s healthier meals programmes will also be intensified in schools of all levels.

b. Mental Well-being: Strengthening Supportive Networks & Resilience

16. Mental well-being is important in enabling our youth to manage themselves well and lead meaningful lives.

- MOE and HPB will strengthen peer support efforts through peer support structures to equip students to look out for signs of mental stress among peers.
• HPB will move upstream to build social emotional competencies in our young. The Tote Board has also set aside up to $10 million in grant funding to tap on ground-up ideas to nurture mental well-being and resilience in our young.

• As suicides and suicidal and self-harm behaviours are often complex and multi-faceted, an Inter-Agency Research Workgroup for Youth Suicides has been set up to study the issues surrounding suicides, including the risk and protective factors.

c. Sleep Health: Sleep Well, Live Well

17. The government will raise awareness of the importance of adequate and quality sleep in children, and promote sleep health recommendations and tips for healthy sleep habits.

• HPB and MOE will initiate public education efforts on the benefits of sleeping well, and promote sleep health practices and tips for healthy sleep habits.

Tobacco Control Measures

18. Tobacco is a leading contributor to diseases. About six Singapore residents died prematurely from smoking-related diseases each day in 2015. Our multi-pronged approach to discourage and reduce the use of tobacco products includes:

- Legislative restrictions (e.g. advertising restrictions, point-of-sale display ban, mandatory graphic health warnings, smoking prohibition in public places);
- Fiscal policy (e.g. tax on tobacco products);
- Public education on the harms of tobacco use; and
- Smoking cessation efforts to encourage tobacco-free living.

Raising the Minimum Legal Age

19. Research has shown that adolescent brains have a heightened sensitivity to the rewarding effects of nicotine. A report by WHO stated that persons who do not start smoking before the age of 21 “are unlikely to ever begin”.

20. MOH will take further steps to reduce, if not eliminate opportunities for our young to be tempted and take up smoking before 21. We will propose legislative changes to Parliament within a year to raise the Minimum Legal Age for the sale of tobacco products to minors, from 18 to 21 years. The change will be phased in over a few years. The minimum legal age restriction will continue to cover purchase, use and possession by minors and sale to minors below the minimum legal age, for both retail and social supply.

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