

State of the Elderly in Singapore

2008/2009

Release 3:

Social Well-being

Going Forward

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Chapter 4 Social Well-being

This chapter is divided into two sections: Ageing in Place and Active Ageing. Together, they provide a measure of the Singaporean elderly's social integration or well-being. Indicators of ageing in place include those physical and social factors that enable an elderly to live an active life in the community. It also looks at the availability of social services for the elderly. On the other hand, there will be a minority who have been or are committed to institutional living arrangements such as sheltered and nursing homes. Where available, a profile of these residents and the reasons for their institutionalisation would be useful as well. Indicators of active ageing include participation in formal as well as informal organisations and groupings. Another aspect is participation in family/household activities. Reasons for non-participation are also important – they point to possible remedial action that could be taken to encourage/promote participation and ultimately active ageing.

A. Ageing in Place

“Ageing in place” is a concept that has differing interpretations. For some, it refers to the elderly being able to live in the community in their own homes without ever having to move while for others, it involves a move to a community home, such as assisted living facilities or continuing care retirement communities (CCRCs) that provide for the changing health and housing needs over time [see, for example, http://helpguide.org/elder/continuing_care_retirement_communities.htm]. It is the former idea that Singapore is advocating although the latter should also not be ruled out as the demographic changes proceed apace.

Singapore's conceptualisation of ageing in place involves developing strong social networks involving families and friends and providing care and social services so that the elderly can continue to live in the community for as long as possible without institutionalisation. According to the CAI, “‘Ageing-in-place’ refers to growing old in the home, community and environment that one is familiar with, with minimal change or disruption to one's lives and activities. This is to promote social integration where the needs of seniors can be met within the community, rather than to segregate them as a distinct and separate population”¹. Ageing in place also involves seniors being able to live with or near their children, and in this regard, various schemes such as the CPF Housing Grant Scheme and the

¹ Report on the Ageing Population, Chapter 3 p 16
(http://www.mcys.gov.sg/successful_ageing/report/CAI_report.pdf)

Married Child Priority Scheme have been put in place². The CAI also considered the option of retirement villages but it was felt that this should be left to private sector developers although government is helping with shorter land lease to ameliorate the cost of such developments. The CAI concurred with the IMC that institutionalisation should be a last resort³.

Living Arrangements

Only a very small number of Singapore's resident population (9,278) lived in institutions for the elderly in 2008 (Table 4.1). As shown in chapter 3, the vast majority were residents of nursing homes which provide long term nursing care for those with medical conditions. The rest were in government welfare homes or sheltered housing which provide residential care for ambulant destitute or low-income elderly without family support (http://app.mcys.gov.sg/WEB/faml_supfaml_caringelderly.asp).

Table 4.1 Residents in Old Folks' Homes

	1997	2002	2003	2004	2005	2006	2007	2008
Total	5,203	7,154	7,552	7,924	8,329	8,600	9,031	9,278
Males	2,181	3,196	3,390	3,543	3,754	3,898	4,071	4,218
Females	3,022	3,958	4,162	4,381	4,575	4,702	4,960	5,060

Source: MCYS and MOH. (Statistics also reflected in Yearbook of Statistics Singapore 2008 and 2009, DOS.)

Living Arrangements of Elderly in the Community

In contrast, the vast majority of Singapore's old aged 65 and over live in the community. Data from the 2005 mid-term mini-census, the General Household Survey, presented in Table 4.2 show that nearly 70% of those living in the community lived in inter-generational households, with their spouse and children (35%) or with their children only (35%). However, an increasing proportion either lived alone (8%), or more likely, only with their spouses (17%). This has implications for their future care and possible institutionalisation. It is also possible that they might move in with their children later on should the need for care and support arise.

² Ibid. p 17

³ Ibid. p 12

Table 4.2 Living Arrangements of Elderly Living in the Community

Person(s) Elderly Living with	2000 (%)	2005 (%)
Total	100.0	100.0
Spouse only	13.9	17.4
Spouse and children	36.5	34.9
Children only	37.2	34.5
Alone	6.6	7.7
Other elderly persons	1.2	1.3
Others	4.5	4.1

Source: General Household Survey 2005 Release 2, DOS.

Gender and Age

Women were much more likely than men to be living with their children only - 51% as compared to 14% (Table 4.3). Only about one third of female elderly were living in households that included their spouse as compared to 75% for male elderly. This is because of the gender differential in longevity and the greater likelihood of their being married to older men.

In terms of age, the older old were more likely to be living with their children only (50%) as compared to the younger old (26%). The latter were much more likely to be living with their spouse (62% compared to 36%). There was no difference in the proportions not living with their spouses or children.

Table 4.3 Living Arrangements by Gender and Age

Person(s) Elderly Living with	Male	Female
Spouse	75.3	34.6
Children	13.7	50.6
Neither	11.0	14.7
Person(s) Elderly Living with	65-74 years	75 and over
Spouse	61.8	35.9
Children	25.5	50.2
Neither	12.7	13.9

Source: As above.

Present and Preferred Social Living Arrangements

In spite of the traditional Asian ideal of the multi-generational family/household, Table 4.4 (below) shows older residents aged 55 years and above in Singapore were much more likely to be living with spouse and/or with their unmarried children than with their married children, male or female – at least, this was the case among HDB residents. In 2008, 68% of older HDB residents lived with their spouse and/or unmarried children while only 14% lived with a married son or married daughter. Only a very small proportion formed multi-generational households with their unmarried children and parents or parents-in-law, probably because they no longer had any such surviving relatives.

There was some difference between present and preferred living arrangements, with slightly more preferring to live with their married children and slightly fewer preferring to live only with spouse and/or unmarried children.

Table 4.4 Present and Preferred Living Arrangements Among Older HDB Residents*

Social Living Arrangement		SHS 1998		SHS 2003		SHS 2008	
		Present	Preferred	Present	Preferred	Present	Preferred
Live with Spouse and/or Unmarried Children		74.1	57.4	73.3	61.1	68.1	65.7
Live with Spouse and/or Unmarried Children and Parents and/or Parents-in-law		2.0	2.3	5.2	4.8	1.4	1.7
Live with Married Children		12.7	24.2	5.0	17.4	13.8	16.9
Live Alone		7.9	12.6	11.3	13.0	10.3	9.7
Other Living Arrangements (e.g. With Companion/Friend/Relatives)		3.3	3.5	5.2	3.7	6.4	6.0
Total	%	100.0	100.0	100.0	100.0	100.0	100.0
	N	138,460	138,460	132,094*	131,977*	172,040*	171,790*

Source: HDB Sample Household Survey 2008. * Data are for HDB residents aged 55 and above who have married children. ** excludes non-response.

Physical Proximity to Married Child

There was a difference between the present physical living arrangements of married children and the preferred as perceived by the older HDB residents aged 55 and above. More of the older HDB residents would prefer their married child to live at least within the same housing estate (in closer proximity) than was actually the case (Table 4.5).

Table 4.5 Physical Location of Nearest Married Child of Older HDB Residents*

Physical Living Arrangement		SHS 1998		SHS 2003		SHS 2008	
		Present	Preferred	Present	Preferred	Present	Preferred
In the Same Flat		13.8	13.6	9.4	15.0	14.3	14.7
Next Door		1.4	13.2	1.9	6.1	1.0	2.6
In the Same Block		3.1	10.2	2.9	9.0	2.8	5.3
In a Nearby Block		11.3	22.6	14.1	21.0	12.5	16.3
In the Same Estate		10.0	16.9	14.3	21.6	12.1	15.9
In a Nearby Estate		26.1	14.5	21.5	14.5	20.1	18.8
Elsewhere in Singapore		34.3	9.0	35.8	12.1	36.7	25.6
Short-term Stay-in with Children		-	-	0.1	0.7	0.5	0.6
No Preference		-	-	-	-	-	0.2
Total	%	100.0	100.0	100.0	100.0	100.0	100.0
	N	138,460	138,460	128,845*	129,143*	166,355*	167,278*

Source: HDB Sample Household Survey 2008. * As above ** Excludes non-response.

Households Headed by Elderly

The majority (60.3%) of the elderly lived with their spouse and/or unmarried children (Table 4.6). This proportion has fallen over the years. Another 10.9% lived with their married children and the remaining were either living alone (19.3%) or with unrelated persons (9.3%).

The proportion of the elderly who lived alone had increased from 14.7% in 1998 to 21.1% in 2003, but dipped slightly to 19.3% in 2008. Their preference to do so also dropped from 24.3% in 2003 to 18.0% in 2008.

More than half of the elderly (59.6%) also preferred to live with their spouse and/or unmarried children, up from 52.6% in 2003, narrowing the gap between their present and preferred living arrangements. The proportion that preferred to live with unrelated persons also increased from 1.2% in 2003 to 7.5% in 2008. Such living arrangements include living with friends, companions, or subtenants.

Table 4.6 Living Arrangements in Elderly Headed Households

Social Living Arrangement		SHS 1998		SHS 2003		SHS 2008	
		Present	Preferred	Present	Preferred	Present	Preferred
Live with Spouse and/or Unmarried Children		71.5	59.6	63.9	52.6	60.3	59.6
Live with Married Children		9.1	21.5	7.2	16.5	10.9	14.6
Live with Siblings/Relatives		2.2	2.6	3.8	5.4	0.2	0.3
Live Alone		14.7	15.2	21.1	24.3	19.3	18.0
Live with Unrelated Persons		2.5	1.1	4.1	1.2	9.3	7.5
Total	%	100.0	100.0	100.0	100.0	100.0	100.0
	N*	67,015	67,015	66,722	66,722	92,817	92,760

* Excluding non-response cases

Source: HDB Sample Household Surveys 2003, 2008.

The proportion of the elderly who lived in the same flat or within close proximity⁴ to their nearest married child was comparable across the years, with about 40% presently doing so (Table 4.7). The proportion living elsewhere in relation to their married children had decreased slightly from 2003, while the proportion living in nearby estates had increased.

Comparing present and preferred living arrangement over time, successively less elderly would prefer to live close to their married children if they could. These proportions had declined over the decade, from 75.7% in 1998 to 53.5% in 2008. An increase in preference for married children to live in nearby estates (16.2% in 1998 to 22.7% in 2008) or elsewhere (8.1% in 1998 to 23.8% in 2008) is interesting, suggesting that distance mattered less to them. With improvement in the transportation network and availability of childcare facilities, both the elderly and their children have greater mobility and autonomy, and hence are more realistic in their preferences now.

⁴ Living “within close proximity” to their married children is defined as living together, next door, in the same block, in a nearby block, and in the same estate as their married children.

Table 4.7 Proximity to Married Children

Physical Arrangement	Living	SHS 1998		SHS 2003		SHS 2008	
		Present	Preferred	Present	Preferred	Present	Preferred
In the Same Flat		11.4	17.7	7.6	16.2	12.0	13.3
Next Door		2.1	10.6	2.0	3.9	1.5	2.9
In the Same Block		3.5	10.4	5.0	11.0	3.4	7.0
In a Nearby Block		12.5	19.6	16.6	19.6	11.7	14.7
In the Same Estate		11.1	17.4	12.0	18.4	11.6	15.6
In a Nearby Estate		23.2	16.2	17.8	13.7	24.6	22.7
Elsewhere (Includes Overseas)		36.2	8.1	39.1	17.2	35.2	23.8
Total	%	100.0	100.0	100.0	100.0	100.0	100.0
	N*	53,570	53,570	53,357	53,357	74,593	74,187

* Excluding non-response cases

Programmes and Services for Ageing- in-Place

The Housing and Development Board (HDB) has initiated various schemes to encourage the elderly and their children to stay with or near each other for mutual care and support, such as Married Child Priority Scheme, Multi-Generation Living Scheme, Higher-tier Family CPF Housing Grant, Higher-tier Singles CPF Housing Grant and higher income ceiling for extended families. The elderly could also sublet their whole flat and move in with their married children or rightsize to a smaller flat or Studio Apartment to stay near them. Alternatively, the elderly could continue to stay in their own flats and rent out a room for an income. Eligible elderly who own a 3-room or smaller flat could also apply for the Lease Buyback Scheme which allows them to remain in their existing flats for the next 30 years while enjoying a lifelong stream of annuity payout to supplement their retirement income.

To enable the elderly to live in the community rather than an institution, HDB has put in place several programmes for existing estates. HDB works closely with Town Councils to give them technical advice on Barrier-free accessibility (BFA) programme to improve the accessibility in HDB estates. Apart from this, HDB has also been carrying out Lift Upgrading Programmes (LUP) to provide full lift access to eligible HDB blocks, Home Improvement

Programme (HIP) to enhance the living conditions within the flat and the Neighbourhood Renewal Programme (NRP) to allow for ageing in place within HDB estates.

Over the years, HDB has improved public housing design by creating a user-friendly living environment through network of barrier-free and vehicular-free sheltered walkways linking to amenities. In addition, HDB has also introduced Universal Design features in all new public housing projects tendered from July 2006. To cite a few examples, within flats, switches and sockets will be positioned low enough to be accessible from a wheelchair, minimise level difference, wide enough internal corridors for wheelchair access, and larger door viewer, provide at least one wheelchair accessible bathroom with space provision for future installation of grab bars by residents.

Ageing in place involves accessibility not just in the home or housing block but the entire built environment (including entrances to buildings, lifts and staircases, car parks, transport nodes, and the like). Between October 2008 and July 2009, the Building and Construction Authority (BCA) audited a total of 1,105 government and non-government buildings for accessibility. Of these, about 80% were found to be accessible and nearly 20% were deemed not accessible. The accessible buildings were equally distributed among government and non-government buildings. On a scale of 1-5 (smiles), the majority were scored 2 (37%) and 3 (30%).

Besides these, a range of support programmes and services are provided through community-based voluntary organisations, often with support from the government. These include: the setting up of Day Care Centres and Seniors Activity Centres; befriending and home help services, case management; counselling and a seniors helpline; and caregiver support services.

B. Active Ageing

There has been much focus on active ageing by the Government since 1999 (http://app.mcys.gov.sg/web/indv_publicedu.asp). The Council for Third Age (C3A) was set up in 2007 to provide public education on ageing, organise active ageing festivals, and recognise active agers. It also administers the Golden Opportunities! (GO!) Fund. The Wellness Programme was also introduced in 2007 to help individuals aged over 50 manage their health and be more socially engaged.

Participation in Work

This has already been discussed in chapter 3 in the section on Employment.

Participation in Family

The elderly are not only recipients of support; they may also be caregivers and support providers. The NSSC 2005 showed that such participation differed by age and type of support activity (Table 4.8). Among the younger old (65-74 year olds), looking after grandchildren, providing financial support to parents and parents-in-law, and caring for a spouse were the three most common support activities, with about 20%-33% doing these. The proportions dropped sharply for those aged 75 and older. The decline in childcare is probably because their grandchildren are likely to be older and they are also less likely to have surviving parents or parents-in-law. However, a notable 18% provided care for their spouse.

Table 4.8 Senior Citizens as Caregivers

	Total 55 and over	Age Group (%)		
		55-64 years	65-74 years	75 years and over
Help look after grandchild	34.4	43.9	33.6	19.9
Help grandchild with homework	5.4	6.7	5.7	2.6
Help grandchild financially	3.7	5.5	3.1	1.4
Provide physical care to parents/parents-in-law on a regular basis	23.3	30.3	7.9	1.4
Provide financial support to parents/parents-in-law	51.3	61.6	31.3	9.6
Provide physical care to spouse on a regular basis	22.4	23.7	21.1	18.1

Source: NSSC 2005, MCYS.

The important role played by the elderly as grandparents is shown in the HDB Sample Household Survey 2008. More than one in four households with children aged 12 and younger relied on grandparents as the main care provider (Table 4.9). Grandparents were second only to mothers as the main caregiver.

Table 4.9 Childcare Arrangements for Younger Married Residents' Households with Children Aged 12 Years and Below by Year

Main Provider	Childcare	SHS 1998	SHS 2003	SHS 2008
Mother		52.0	52.6	40.1
Father		4.1	2.4	1.4
Grandparents		20.7	19.7	29.6
Maids		12.7	10.1	13.9
Childcare Centre/Baby Sitter		6.5	8.3	11.0
Children Themselves		2.2	1.6	0.3
Relatives		1.7	2.0	1.4
Other Arrangements		0.1	3.3	2.3
Total	%	100.0	100.0	100.0
	N*	215,485	212,739	166,117

Source: HDB Sample Household Survey 2008 *Residents with children 12 years old and below, excluding non-response cases

As shown below, grandparents were more likely to be the main caregiver where there was only one child (Table 4.10).

Table 4.10 Childcare Arrangements for Households with Children Aged 12 Years and Below By Number of Children Aged 12 Years and Below in the Household

Main Provider	Childcare	Number of children aged 12 years and below in the household			All Younger Married Residents' Households with Children Aged 12 Years and Below
		One	Two	Three or More	
Mother		38.8	38.6	45.2	40.1
Father		1.9	1.3	0.0	1.4
Grandparents		31.4	28.7	27.0	29.6
Maids		9.1	17.2	22.0	13.9
Childcare		12.5	12.1	4.3	11.0
Children		0.3	0.3	0.0	0.3
Relatives		2.0	1.1	0.6	1.4
Other		4.0	0.7	0.9	2.3
Total	%	100.0	100.0	100.0	100.0
	N*	72,127	66,494	22,645	166,117

*Source: As above. *Households with children 12 years old and below, excluding non-response cases*

In the HDB study, grandparent caregivers were likely to be living close by the family (Table 4.11). However, a substantial 26.5% lived beyond the HDB estate or nearby estate.

Table 4.11 Where Grandparents who were the Main Childcare Provider Lived

Location Of Grandparents' Home		SHS 2003	SHS 2008
Same Flat/Next Door		23.9	24.5
Same Block/Nearby Block		10.7	17.6
Same Estate/Nearby Estate		23.2	29.2
Elsewhere		39.1	26.5
Others		3.1	2.2
Total	%	100.0	100.0
	N*	41,968	48,839

Source: As above. *Residents with children 12 years old and below, excluding non-response cases

Frequency of Visits by Non-Coresident Married Children

The HDB study also showed that only a minuscule proportion (1.5%) of the elderly HDB residents who were not living with their married children did not exchange visits with their married children in 2008. Among those who exchanged visits, about nine in ten did it at least once a month, declining slightly from 92.1% in 2003 (Table 4.12).

The most common activities carried out by the elderly with their married children at least once a month were having meals together (83.9%), going on outings (59.7%), and exchanging suggestions and advice about personal problems (57.4%),

Table 4.12 Frequency of Visits between Elderly and their Married Children by Year

Frequency Of Visits		Elderly		
		SHS 1998	SHS 2003	SHS 2008
Daily		18.2	23.0	21.8
At Least Once A Week		53.5	53.4	50.4
At Least Once A Month		20.7	15.7	16.3
Less Than Once A Month		7.6	7.9	11.5
Total	%	100.0	100.0	100.0
	N*	44,818	47,039	67,283

Source: As above. * Excluding never visit, living together and non-response cases

Frequency of Talking to Non-Coresident Children

The NSSC 2005 found that more than seven out of ten Singaporean elderly spoke to their children daily (Table 4.13). Including those that spoke at least once a week, the proportion that had frequent communication with their children rose to over 90%. In contrast, about 1% had no contact for the past year.

Table 4.13 Frequency of Talking to Non-Coresident Children

Frequency of Talking to Children	55 & above	55-64	65-74	75 & above
Total	100.0	100.0	100.0	100.0
Daily	73.7	76.0	70.1	73.3
2-3 times a week	13.5	13.7	13.8	12.2
Once a week	7.6	6.6	9.2	8.1
2-3 times a month	2.1	1.3	2.9	3.0
Once a month	0.9	0.5	1.3	1.3
Less than once a month	1.4	1.2	2.1	1.1
No contact for the past 1 year	0.7	0.7	0.6	1.1

Source: NSSC 2005, MCYS.

Frequency of Meeting with Friends

The frequency of contact with friends was much lower than that of meeting with family members. Nevertheless about one in five still had daily contacts with friends, and about eight out of ten had at least weekly interactions (Table 4.14). Thus it would appear that there were already social networks in place for the elderly to age- in-place.

Table 4.14 Frequency of Meeting with Friends

Frequency of Meeting Friends	Total 55 & Above	55-64 years	65-74 years	75 & Above
Total	100.0	100.0	100.0	100.0
Daily	20.3	18.0	23.7	22.7
4-6 times a week	11.9	12.7	10.6	11.5
2-3 times a week	23.4	25.0	22.2	19.0
Once a week	24.1	23.0	25.4	26.3
2-3 times a month	7.5	7.7	8.3	5.0
Once a month	5.7	6.2	4.9	5.0
Less than once a month	7.0	7.4	4.9	10.4

Source: NSSC 2005, MCYS.

Sources of Help

The vast majority of the elderly would turn to family and friends for support, either when they were ill, needed financial assistance, or simply, when they needed someone to talk to (Table 4.15). However, almost one in ten also claimed to have no one to turn to for financial assistance.

Table 4.15 Sources of Help

Sources of Help	55 & Above	55-64	65-74	75 & Above
When ill				
Family	92.1	93.0	91.3	90.6
Friends	4.2	4.5	4.3	3.2
No one	5.6	5.5	5.9	5.6
When in need of financial help				
Family	87.5	86.5	88.2	89.2
Friends	4.4	5.8	3.3	2.0
No one	10.1	10.9	9.6	8.5
When in need for someone to talk to				
Family	91.4	93.3	89.5	89.1
Friends	36.2	36.3	39.3	30.3
No one	2.2	2.0	1.8	3.4

Source: NSSC 2005, MCYS.

Elder Abuse and Neglect

In 2008, there were 145 cases of alleged elder abuse involving victims aged 60 and older; in Jan-Sep 2009, there were 131 cases (Table 4.16). About one third of the victims were aged 80 and older whereas the remaining cases were roughly evenly spread between the younger age groups. Females made up 57% of the victims in 2008, and 69% in the first three quarters of 2009. In 2008, Indians were over-represented relative to their share of the population at 16%, as compared to 62% who were Chinese and 17% Malay. Sons, followed by daughters and spouses were the most likely perpetrators of abuse. The main forms of abuse in 2008 were physical abuse (39%), followed by neglect (37%) and psychological abuse (25%).

Table 4.16 Age Profile of Alleged Abuse Victims 2008-2009

	2008		Jan – Sep 2009	
	Number	Per cent	Number	Per cent
60-64	25	17.0	25	19.1
65-69	24	16.6	22	16.8
70-74	23	16.0	30	22.9
75-79	26	18.0	16	12.2
80 and over	47	32.4	38	29.0
Total	145	100.0	131	100.0

Source: Collated statistics from Family Service Centres (FSCs), counselling centres, medical social work departments of hospitals and MCYS (Jan 2008-Sep 2009).

Sports Participation

According to the National Sports Participation Survey 2005, about four out of ten (38%) of senior citizens (aged 55 and above) classified themselves as “regular sports participants”, defined as those who had taken part in sports at least once a week in the three months immediately preceding the survey (Table 4.17). This comprised 28% who took part in sports at least three times a week and 10% who took part in sports once or twice a week. Another 1% were irregular sports participants who did so irregularly (less than once a week). The majority (61%) were sedentary or had not participated in any sports or physical exercise during the three-month period.

Table 4.17 Regular Sports Participation Rate

	55-59	60-64	65 and above
Regular Sports Participation (%)	41	36	37

Source: National Sports Participation Survey 2005, MCYS.

Elderly and the Community

The social capital⁵ level of the elderly and the future elderly is measured using the four components – trust, reciprocity, confidence in institutions and network size – to produce an average score for each component as shown in Table 4.18. The findings revealed that even though the elderly had lower average trust (6.2) and reciprocity scores (6.3) and smaller network size (53), their confidence in institutions (6.8) was the same as those of all households.

⁵ Social capital refers to the accumulation of people's trust, confidence and shared relationships among each other in both formal and informal settings. It has both an individual and a collective dimension. At the individual level, it refers to the resources available to a person (in this case, an HDB resident), through his networks of relationships with informal groups (e.g. family, relatives, friends, neighbours, colleagues) and formal institutions (e.g. community and government agencies). The strength of a person's social capital depends on the extent of his networks and the degree of trust, confidence and reciprocity in the relationships which can facilitate or enable the pursuit of his objectives. At the community level, social capital refers to the collective strength of individuals' social networks, along with the related attributes, which facilitates the pursuit of collective or shared objectives. See pp. 14-19 for more details.

Table 4.18 Social Capital Scores of Elderly and Future Elderly

Components	Average Scores (0 –10)		
	Elderly	Future Elderly	All
Trust in informal and generalised network (0 – 10)	6.2	6.3	6.4
Reciprocity in informal and generalised network (0 – 10)	6.3	6.4	6.6
Confidence in institutions (0 – 10)	6.8	6.8	6.8
Size of informal network (<i>persons</i>)	53	57	61

Source: HDB Sample Household Survey 2008

The lower average reciprocity score of the elderly could be attributed to the physical vulnerabilities of old age that hampered attempts to help each other. Further breakdown of the composition of their network sizes showed that they had a smaller network of friends compared to the future elderly and all households (Table 5.21). This could be due to the passing on of friends who were around their age. However, Table 4.19 also shows that despite their age, the elderly still knew a span of neighbours, comparable to all other households.

Table 4.19

Composition of Network Size of Elderly and Future Elderly

Network	Average Network size (persons)		
	Elderly	Future Elderly	All
a) Family members	7	7	7
b) Relatives	15	15	17
c) Friends who are not neighbours	16	21	23
- Chinese	12	14	15
- Malay	3	4	5
- Indian	2	3	3
- Others	0	1	1
d) Neighbours who are friends	6	6	6
e) Neighbours in general	10	10	10
Overall Average Number*	53	57	61

Source: HDB Sample Household Survey 2008 * Individual figures for items (a) to (e) may not add up to the overall average number. This is because the overall average number excludes cases with no response for any of the items in (a) to (e)

Sense of Belonging to Town/Estate

More elderly households felt a sense of belonging to the town/estate they lived in as compared to all households (Table 4.20). However, the proportions were generally high.

Table 4.20 Sense of Belonging among Elderly by Year

Sense Of Belonging	SHS 1998		SHS 2003		SHS 2008	
	Elderly	All	Elderly	All	Elderly	All
Yes	90.1	82.3	96.4	90.0	99.5	98.6
No	9.9	17.7	3.6	10.0	0.5	1.4
Total	%	100.0	100.0	100.0	100.0	100.0
	N*	67,015	728,815	66,722	821,126	92,764

Source: HDB Sample Household Survey 2008. * Excluding non-response cases

Elderly HDB households scored higher than all households on practically every indicator on the Sense of Community score (Table 4.21). The only indicator where elderly households did not score better was with regard to noise.

Table 4.21 Sense of Community (SOC) Score among Elderly by Year

SOC Indicators	Average Score (Over Maximum of 100)			
	SHS 2003		SHS 2008	
	Elderly	All	Elderly	All
"It is very easy to talk to people living in my HDB estate."	77.5	75.0	75.0	75.0
"Noise from my neighbours is not annoying."	67.5	67.5	65.0	65.0
"I can always get help from my neighbours when in need."	72.5	70.0	72.5	72.5
"Residents in this block can recognise one another easily."	75.0	72.5	75.0	72.5
"Residents here care about the maintenance of their block."	72.5	67.5	70.0	70.0
"I feel a sense of belonging to this housing estate/town."	77.5	67.5	77.5	72.5
Overall Score (Over Maximum of 100)	73.8	70.0	72.5	71.3

Source: As above.

The elderly had a stronger sense of community as compared to younger HDB residents (Table 4.22).

Table 4.22 Sense of Community Scores by Age Group (2008)

Age Group	SOC Score (Over maximum of 100)
Below 35 years old	68.8
35 – 44 years old	70.8
45 - 54 years old	71.7
55 - 64 years old	71.7
65 years old & above	72.1

Source: HDB Sample Household Survey 2008

Participation in Community

Participation rate in community activities was found to increase with age of residents. Nearly half of the elderly residents engaged in community activities in the 12 month period before the survey.

Table 4.23 Community Participation by Age Group (2008)

Age Group	Participation Rate (%)
Below 35 years old	40.8
35 - 44 years old	46.6
45 - 54 years old	44.6
55 - 64 years old	45.4
65 years old & above	48.0

Source: HDB Sample Household Survey 2008

The HDB Sample Household Survey 2008 showed that elderly households (i.e. households headed by an elderly) are more likely to participate in community activities relative to all HDB households (Table 4.24). This is probably because they have more leisure time. Participation in community activities has risen over time for both elderly and other households.

Table 4.24 Community Participation of Elderly in the Last 12 Months by Year

Community Participation	SHS 1998		SHS 2003		SHS 2008	
	Elderly	All	Elderly	All	Elderly	All
Yes	16.8	13.2	40.7	38.0	46.9	45.3
No	83.2	86.8	59.3	62.0	53.1	54.7
Total	%	100.0	100.0	100.0	100.0	100.0
	N*	67,015	728,815	66,503	817,530	92,870

Source: As above. * Excluding non-response cases

Interestingly, a small proportion of the elderly was pro-active and was interested to organise community activities themselves (Table 4.25). This proportion is likely to grow as more reach old age in relatively healthier states and also as awareness of the benefits of remaining active sink in. It is also an indication of active citizenry.

Table 4.25 Desire to Organise Community Activities

Age Group	%
Below 30	30.9
30-<40	30.8
40-<50	33.0
50-<60	27.4
60-<70	23.6
70 & Above	10.5

Source: HDB Sample Household Survey 2003. This information was not captured in SHS2008

However, the proportion of elderly households that was willing to organise community activities was much lower than those willing to participate (Table 4.26). Nevertheless the proportion has risen compared to 1998.

Table 4.26 Desire to Help Organise Community Activities by Elderly Households

Desire to help organise community activities		1998		2003	
		Elderly Households	All Households	Elderly Households	All Households
Yes		9.4	27	15.6	29
No		90.6	73	84.4	71
Total	%	100.0	100.0	100.0	100.0
	N	67,015	728,815	66,722	821,126

Source: HDB Sample Household Survey 2003. This information was not captured in SHS2008

Volunteerism

Only 5.9% of senior citizens aged 55 and above participated in the 12 months preceding the NSSC in 2005 (Table 4.27). The elderly aged 65 and above formed about one third of the volunteers.

Table 4.27 Characteristics of Senior Citizens who Volunteered

Characteristics	%
Total	100.0
Age Group	
55 to 64 years	64.2
65 to 74 years	29.1
75 & Above	6.7
Gender	
Male	52.6
Female	47.4
Educational Attainment	
No Qualification	21.7
Primary	28.5
Secondary & Above	49.9

Source: NSSC 2005, MCYS.

Interest and involvement in Learning

Table 4.28 shows that the current seniors demonstrate less interest in learning than their younger counterparts. The average “interest in learning” score for the younger age band is 3.40, as compared to 2.24 for the older age band.

Table 4.28: “Interest in learning” by Age Band (mean scores)

Age Band	Mean score	N
40-54 yrs old	3.40	926
55-64 yrs old	2.82	361
65-74 yrs old	2.24	193
Total	3.11	1481

Note: Score range 1 (low)/ 5 (high)

Source: MCYS Survey on the Learning Needs of Seniors in Singapore 2008

Table 4.29 also indicates a similar pattern in regard to participation in learning. Indeed, participation in job or career-related courses declined from 15 per cent for the younger age band to 1 per cent for the older age band.

Table 4.29: Participation and potential participation in learning by Age Band (%)

Age Band	Job/career-related courses	Non-job/career-related courses	Total
40-54	15	13	28
55-64	7	11	18
65-74	1	9	10

Source: As above.

Perception of Wellbeing

Perceptions of wellbeing among senior citizens appear to be generally positive (Table 4.30). Seniors believed they were important to family and friends. However about 23% agreed that ageing was a depressing stage of life.

Table 4.30 Perceived Wellbeing of Seniors

Social Well-Being	Total	Strongly Agree	Agree	Disagree	Strongly Disagree
I believe that I am very important to my family	100.0	53.1	42.7	2.3	1.9
I believe that I am very important to my friends	100.0	25.2	55.3	17.5	2.0
As I grow older, I feel less stressed and worry less	100.0	15.0	56.2	23.9	5.0
Ageing is a very depressing stage of life	100.0	5.0	18.2	60.0	17.1

Source: NSSC 2005, MCYS.

Active Ageing Index

Following Thanakwang and Sunthorndhada (2006)⁶, an Active Ageing Index was computed for Singapore based on the NSSC 2005. (Annex A explains the construction of the index.) A total of 13 indicators reflecting the three dimensions of Active Ageing identified by the World Health Organisation, namely, health, participation and security was used. A list of the indicators and the methodology used can be found in Annex 1.

The results show that active ageing declined with age (Table 4.31): the proportions that scored high on the Active Ageing Index thus constructed declined from 5% among the elderly aged 65-69 years to only about 1% among those aged 70 and older. Similarly, the proportions that scored medium fell from 89% among the 65-69 year olds to below 70% for the oldest old. On the other hand, the proportions on the low end of the scale increased from about 6% to 31%. It would be instructive to monitor this trend over time.

Table 4.31 Active Ageing Level by Age

Level of Active Ageing	65-69	70-74	75-79	80 and over	55 and over
High	5.0	3.4	1.1	1.0	8.4
Medium	89.1	82.9	79.0	68.1	81.3
Low	5.9	13.7	19.9	30.9	10.3
Total	100.0	100.0	100.0	100.0	100.0

⁶ K Thanakwang and K Sunthorndhada, "Attributes of Active Ageing among Older Persons in Thailand: Evidence from the 2002 Survey", *Asia-Pacific Population Journal* 2006, volume 21 no 3 (<http://www.unescap.or/esid/psis/population/journal/Navigation/byVolume.asp>).

Source: Computed from NSSC 2005 data.

Programmes and Services for Active Ageing

As mentioned earlier, a series of programmes and services have been established to promote active ageing among Singapore's elderly. These include:

Golden Opportunities! (GO!) Fund: to tap on talents and experiences of seniors to come up with projects for seniors; objective is to encourage active ageing among seniors through volunteerism, healthy living, lifelong learning, intergenerational bonding, developing active lifestyles and broadening social networks – projects approved for funding reflect these dimensions.

Public Education on Ageing (PEA): Since October 2007, C3A administers the PE Fund through the PEA Partnership Programme that serves to: increase awareness of active ageing among seniors; increase seniors' participation in activities focusing on at least one of the six dimensions of wellness (emotional, intellectual, physical, social, spiritual and vocational); encourage the development of active and novel ways to raise seniors' awareness and understanding of active ageing and engage them in activities that enhance their wellness.

Active Ageing Festival: Commencing in 2007, this is the rebranded Senior Citizens' Week and Senior Citizens Award. The theme of AAF is to celebrate a whole new realm of choices and activities for seniors that enable them to live active and fulfilling lives, reflected in the slogan "Active Ageing, Active Living". Three core activities of AAF: Active Ageing Carnival and roadshows at five CDCs; Grandparents Day; and Active Agers Award.

Chapter 5 Going Forward

The Elderly in 2030

The elderly in 2030 will be made up mainly of baby boomers who were born during the period 1947-1964. Data show that baby boomers are different from the current generation of elderly who are mainly of the pre-World War II and earlier cohorts. Baby boomers have higher levels of educational attainment – 58% have secondary and post-secondary education while 11% have university education (Table 5.1) – and they hold higher-skilled jobs and earn higher incomes during their lifetime compared to the earlier generations.

Table 5.1 Educational Attainment, current elderly versus baby boomers

Age group	Total	Below secondary	Secondary	Post-secondary	University
Aged 65 and over today	100.0	86	7	5	2
Baby boomers	100.0	42	26	32	11

Source: General Household Survey 2005; Baby Boomers Survey 2008, MCYS.

Baby boomers, especially the late baby boomers and those with middle level educational attainment (secondary and upper secondary), are however more likely to have never married and could thus lack the family network for their support in old age.

Generally, the baby boomers also have smaller family sizes – they have on average 2.2 children each (Table 5.2) – and more are childless compared to the current generation of elderly.

Table 5.2 Number of children had, baby boomers

No. of children	Total (%)	Early Baby Boomers (%)	Late Baby Boomers (%)
None	13	9	15
1 child	13	11	14
2 children	38	36	39
3 or more children	36	44	32
Average number	2.2	2.4	2.1

Source: Baby Boomers Survey 2008, MCYS.

The gender gap in educational attainment remains although it has narrowed among the later-born cohorts of baby boomers. There also remains gender differential in employment -- about 30% of baby boomer women have never held a job and thus are unlikely to benefit from the CPF and its related schemes. Their future financial security will depend more on the success of the various schemes put in place to ensure financial security, including employment, CPF top-ups by family members and government, and housing equity.

Expectation of family support remained high but it was lower than among Singaporeans currently aged 65 and over. Women continue to be more reliant on family support than men. On the other hand, men are more likely to expect physical care from their family members.

Regarding their expectation on ageing in place, most baby boomers would like to maintain their own homes independently or with their spouse alone; however, 25% would not mind staying in a retirement village; and 14% would not mind staying in a nursing home.

These findings on the baby boomers have implications on provisions for old age. However, in the shorter term, policies will have to focus on the current near-old or pre-retirees. This is defined as those currently aged 55-64 years old who will soon join the cohorts of senior citizens.

The Near-Old

The NSSC 2005 shows that the near-old, defined in this study as those aged 55-64 years, as a group generally tends to be better off than the current generation of elderly in terms of health and financial security. It is not quite possible to gauge how they relate to the baby boomers as the two studies are strictly not comparable. However, it can be surmised that their attitudes lie somewhere between those of the current old and the baby boomers. It is likely that what will determine how well they age is their post-65 life span (i.e. how long they live after age 65).

Suggestions for Further Research

Role of the family

The near old are able to be more self-reliant and less dependent on their families compared to the current generation of the old. At the same time, they will have fewer family members, in particular children, to rely on. What will be the future role of the family, in view of the changing profiles of our elderly? How will this impact the provision for elder care by family members, for those seniors who need care? Research needs to delve deeper into the family to test out these hypotheses.

Age-Friendly Cities (WHO Project)

This is an initiative of the World Health Organisation (WHO) whereby city-dwelling elderly are engaged in focus group discussions to share their concerns and ideas on eight areas of city living. These are (a) outdoor space and buildings, (b) transportation, (c) housing, (d) social participation, (e) respect and social inclusion, (f) civic participation and employment, (g) communication and information, and (h) community support and health services. A total of 35 cities in 22 countries have participated in the project. The responses of the elderly were supplemented by those of caregivers and service providers. The output is a guide that cities could use to monitor or improve on any aspect of urban life. It also proposes ways to make a city age-friendly (http://www.who.int/ageing/age_friendly_cities/en/index.html). Singapore could do well to replicate this study.

Centenarians

In 2000, there were about 230 centenarians in Singapore. This number grew to 500 in 2007⁷. Centenarians were the fastest growing age group in the US, growing from 3,700 in 1940 to over 100,000 currently⁸, while in Japan, the number of centenarians doubled in six years to reach 40,000 by September 2009⁹. Following from trends in these more advanced countries, one could similarly expect a sharp growth in the population of centenarians in Singapore. The rapid rise in the number of centenarians with attendant concerns about their care and other provisions deserve further monitoring and study.

⁷ June Cheong, "500 Centenarians in Singapore and counting" The Straits Times 26 August 2007.

⁸ "A world of Methuselahs", Economist 25 June 2009.

⁹ "Centenarian numbers growing", The Straits Times 12 September 2009.

Annex

Construction of the Active Ageing Index

The Active Ageing index was constructed based on the methodology used for creating an Active Ageing index for Thai senior citizens described in Thanakwang and Soonthorndhada (2006). The authors selected a total of 15 individual indicators, representing the three dimensions of active ageing identified by the World Health Organisation (WHO), for use in the construction of the index. The three dimensions are health, community participation and security. An index for each dimension was computed and the average of the three scores was taken to represent an individual's overall active ageing score.

Methodology

In a replication of Thanakwang and Soonthorndhada's study for Singapore seniors, 13 relevant indicators that correspond directly to those used by the authors were identified from the National Survey of Senior Citizens (NSSC) 2005. These are listed in Table A.

Table A. Indicators

No.	Component	Indicators	Description	Measurement Scale	Frequency (Per Cent)
1.	Health Index	Self-assessed health status	The respondents were asked if they had no health problems.	1 = No ailments	33.3
				0 = 1 or more	66.7
2.		Psychological well-being	The perceptions of sense of mental wellness in terms of self-esteem with respect to how important they are to family and friends.	3 = High 2 = Moderate 1 = Low	68.7 23.6 7.6
No.	Component	Indicators	Description	Measurement Scale	Frequency (Per Cent)

3.	Disabilities	No suitable questions in NSSC survey.	N.A.	N.A.	
4.	Activity of daily living (ADL) limitations	ADL limitations consider inability in performing one of these three activities: eating, dressing and bathing.	1 = Independent 0 = 1 or more	93.3 6.7	
5.	Functional limitations	Move around physically without any help	1 = Mobile 0 = Needs help	90.4 9.6	
6.	Exercise Behaviour	Older persons having performed any exercise 6 months prior to the interview.	1 = Yes 0 = No	28.9 71.1	
7.	Community participation index	Participation in workforce	The elderly still participates in paid and unpaid work	1 = Yes 0 = No 23.8 76.2	
8.	Interaction with family members	The elderly’s support to family members, e.g. food supply, house keeping and child care.	1 = Yes 0 = No	92.3 7.7	
No.	Component	Indicators	Description	Measurement Scale	Frequency (Per Cent)

9.		Participation in clubs/groups	The elderly takes part in activity proposed by various groups, i.e. elderly group, vocational group, housewife group, cooperatives group and volunteer scout group.	1 = Yes 0 = No	5.5 94.5
10.	Security index	Income	Average income.	2 = > S\$500 1 = < S\$500 0 = No Income	58.1 39.5 2.4
11.		Sufficiency of income	The self-assessment by the older persons on whether his/her income is sufficient for a living.	2 = Sufficient 1 = Not sufficient 0 = No Income	79.0 20.2 0.8
12.		Sources of income	The number of sources of income that the elderly receives, i.e. work, pension, government living allowance, saving/interest, spouse, children, relatives or others.	2 = 2 or more 1 = 1 source 0 = None	49.8 47.9 2.4
13.		House ownership	The ownership of the dwelling in which older person is living.	1 = Yes 0 = No	70.9 29.1
No.	Component	Indicators	Description	Measurement Scale	Frequency (Per Cent)

14.	Living arrangement	The co-residence of the elderly with family members or others in their household.	1 = With spouse, children or others 0 = Living Alone	94.0 6.0
15.	Safety facilities	No suitable questions in NSSC survey.	N.A.	N.A.
16.	Active ageing index	A composite index constructed from the three dimensions	The positive or active living of the elderly based on the WHO concept (a combination of health, community participation and security indices). 3 = High 2 = Medium 1 = Low	8.3 81.4 10.3

Index Computation

An index was first computed for each of the three components as follows:

$$\text{Index score} = X_1/M \cdot T + X_2/M \cdot T + X_3/M \cdot T + \dots X_n/M \cdot T$$

Where X = the score of each indicator

M = the maximum answer value of each indicator

T = the total number of indicators of a dimension

Hence, for example, the Community Participation index score = $X_1/1 \cdot 3 + X_2/1 \cdot 3 + X_3/1 \cdot 3$

The Active Ageing Index is then computed as the average of the scores on the three indices as follows:

$$\text{Active Ageing Index (AAI)} = 1/3(\text{Health sub-Index}) + 1/3(\text{Participation sub-Index}) + 1/3(\text{Security sub-Index})$$

The AAI is further categorised in three groups as follows: <5 = Low; 0.5 – 0.79 = Medium; and >= 0.8 = High

Reference

Thanakwang, K. and Kusol Soonthorndhada. 2006. "Attributes of Active Ageing among Older Persons in Thailand: Evidence from the 2002 Survey." *Asia-Pacific Population Journal*, 21(3), pp. 113-135.