to catalyse innovative responses to social needs through applied research and capacity building in collaboration with the public, private, and social sectors
900,000 elderly by 2030
13.4% between 55 and 64 y.o.
11.2% above 65 y.o.

2.1 working-age citizens for each elderly by 2030
62-year-old man, has financial troubles (behind on rent and utility payments), depends on VWO for food.

**Interviewers reported:**

“*His wife passed away two decades ago, and he lives alone. His eldest son committed suicide and his daughter has married and lives far away with her family. Not only is he isolated from his children, when asked about his grandchildren, he says he doesn’t want to talk about the situation and seems to be resigned to it. [When asked about daily activities] at this point subject is rather distraught. Points out that he has nothing to eat and tries to sleep as much as possible, spends a lot of time on the sofa.*”
82-year-old widow, lives in rental housing, has a son who lives with her who works as a delivery person.

**Interviewers reported:**

“Although she has very poor eyesight and her back and leg problems hinder her walking, she uses a trolley to collect recycling items for extra money. Her son takes care of their bills and she doesn’t feel that they are especially challenged financially. In addition to living with her son, her daughter, who lives in Malaysia, calls her regularly, tries to visit once a month and also helps with their expenses. The recycling activity gets her out of the house, where she meets friends as she works, and they sometimes help her carry the newspapers and cardboard back to her apartment.”
Types of social networks and their impact on mental wellness

- Have people to depend on when in need
- Satisfying relationships with children/grandchildren

- Frequency of going to place of worship

- Living alone
- Relationships with relatives, friends, neighbours
- Number of social activities
- Work outside the home
Social Network & Mental Wellness
Perception vs. Reality of Financial Situation
Social Isolation = Poor Mental & Physical Wellness + Loneliness
97,200 PWDs
77,200 over 18 y.o.

Sampling of 20-59 y.o.
No severe and other non-physical disabilities
No studies on caregivers
He is a 42-year-old man, who has been in a wheelchair since the age of 15. He has had several surgeries before that, and was able to walk during his early childhood. He lives with his ageing parents who have medical issues. His father has dementia and his mother recently had a fall and fractured her legs. At the time of the interview, she was still in the hospital and the respondent would visit her every day. His mother was his primary caregiver, and used to support him with more than half his ADL and IADL activities prior to her fall. Mother would cook for all in the family, but with her in the hospital, they have been relying on food stalls for meals. “Sometimes, when there is no money, there is no food to eat,” he says. Respondent also cares for his father in the night. Respondent has been working in a sheltered programme for more than 10 years, and worries about “what will happen to me after my parents?”
He is a 22-year-old man, who is currently pursuing undergraduate studies in a local university. When we asked about his family, he lists his father, mother and brother and continues, “Can I call my helper a relative? She has been with us since my mother got pregnant, until now, for 22 years. Even for my study trips, I take her along as she helps with my daily activities.” The respondent has cerebral palsy, which makes him unable to walk, and he lacks control in his hands. He depends on his domestic worker for bathing, dressing, transferring (for example moving from bed to chair) and cleaning after bowel movements. He has relied on her since birth and feels her absence the most when she leaves for her hometown on two weeks’ leave every year. When she is away, “my parents struggle to carry me or transfer me between chair and bed. [Are there] any tools to help me? [Are there] no support services such as part-time nurses? I will probably have to move out to a nursing home in the future, [without such assistance].”

She is a 22-year-old woman who is currently doing a diploma course in a local polytechnic. She has had congenital disorder since birth which causes her to get tired easily; she is unable to walk and has slurred speech. “If I am tired, then I go home and sleep; my body does not function properly,” she says. She is mobile and requires minimal help with her ADL and IADL needs. Her only worry is about finding a suitable job once she finishes her higher education. “If I get tired, I cannot work, I need to rest. Working life is long hours; will they [the employers] understand?”
“Family as first line of support”
Cross between elderly vs. PDWs
Lack of support for caregivers

Not all schools are disabled-accessible
Bullying and experiencing isolation

Mainstream vs. Sheltered jobs

Healthcare costs run high
Collective Approach

policy
service
innovation
tenrepreneurship
“People will forget what you said, people will forget what you did, but people will never forget how you made them feel”

Maya Angelou