

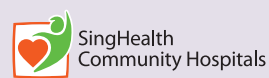
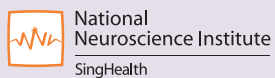


— SINGAPORE HEALTH —
**INSPIRATIONAL
PATIENT &
CAREGIVER**
— AWARDS 2021 —

Organised by



Participating Organisations



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About **THE AWARDS**

Since 2010, the annual Singapore Health Inspirational Patient and Caregiver Awards honour individuals for their strength, courage and resilience in the face of health challenges, as well as outstanding patient support groups that have provided invaluable support to patients and caregivers.

Each year, our winners continue to inspire us with their ability to overcome adversity. Their experiences provide valuable learning for the doctors, nurses, allied health professionals and other healthcare workers.

This year, we recognise 27 winners who, amid the challenges posed by the COVID-19 pandemic, continue to motivate healthcare professionals to deliver better care and inspire many others with their zest for life.

PARTNER-IN-CARE AWARD

Patients who are engaged in their own care and actively partner the healthcare team in their care journey experience better health outcomes. To encourage patients and caregivers to take on active roles in their care, the Partner-in-Care Award honours winners from each of the Inspirational Patient and Inspirational Caregiver award categories who have demonstrated exemplary active partnership to improve care quality and experience.



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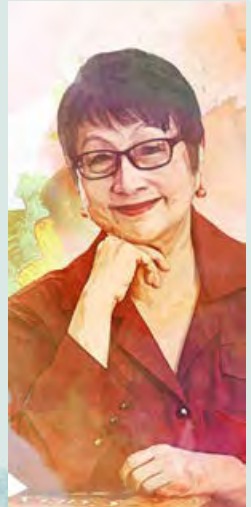
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“I want patients to know that even with Parkinson Disease, we can still lead free and fulfilling lives.”

In 2006, I started noticing tremors in both my hands. I went to the doctor and was shocked when the diagnosis turned out to be Parkinson Disease, a nervous system disorder that affects movement and has no cure. Until then, I had not heard of the illness before.

I was prescribed medication for my symptoms, which gradually worsened over time. I started to experience muscle stiffness and had difficulty balancing. Whenever I took my medication every four hours, I would have a two-hour window when I felt better and could do chores or go out. Beyond that, I would feel as if I had aged drastically and could not move or do chores independently.

Eventually, my balance became so severely impaired that I had bad falls, even from just trying to get out of bed. I could no longer walk and had to use a wheelchair. I was also in pain due to the muscle stiffness, and had difficulties performing simple tasks like putting on my clothes. This is, unfortunately, how Parkinson Disease usually progresses irreversibly.

In 2015, my doctor suggested Deep Brain Stimulation (DBS) surgery to reduce the symptoms I was experiencing. DBS is a surgical procedure where electrodes are implanted into the brain while the patient is awake. These electrodes are connected to a generator installed in the chest, which sends electrical pulses to the brain to help reduce Parkinson Disease symptoms. However, I was deeply fearful of such an invasive operation and refused to take the risk.

I had a change of heart in 2017 after speaking to a friend who benefitted from DBS surgery. He used to have difficulties moving around like I did, but after surgery, became a

Mdm Ann Moo Fu Kang

Homemaker

lot more mobile with massive improvements to his quality of life. I decided to give the surgery a try.

Getting through the surgery was nerve-wracking but also a fascinating experience! It took a total of six hours, three for each hemisphere of my brain. The surgeon stimulated parts of my brain and asked me to do simple tasks like recite the days of the week or move my hands, and calibrated the stimulation based on my response. I could feel my muscle stiffness and tremors immediately lessen as the stimulation was calibrated! I like to joke that after the surgery, I went from moving slowly like an 80-year-old to becoming as sprightly as an 18-year-old again.

I would like to thank the medical team from the National Neuroscience Institute (NNI) who performed the operation and continue to monitor my condition as well as the ward staff from Tan Tock Seng Hospital for their care and concern.


The DBS surgery changed my life. I decided to become a volunteer at NNI to share my experience undergoing DBS with other patients and how it could help their condition. I have spoken at forums organised by the Parkinson Disease Support Group, counselled patients individually and addressed their fears about the surgery. I even invited them to my home to see how my condition has improved.

Many patients who are undergoing DBS are anxious and worried, just like I was. I am so grateful that I can be of help by offering practical advice and sharing my personal experience with them. I want patients to know that even with Parkinson Disease, we can still lead free and fulfilling lives.

“After undergoing surgery, Ann volunteered to be a DBS resource person. Her encouragement and positive attitude helped many patients better understand the surgery and get through the procedure smoothly.”

Li Wei

Advanced Practice Nurse
National Neuroscience Institute



“There is a famous saying by Steve Jobs, ‘Stay hungry, and stay foolish’. I believe that one should reinvent oneself every five years. In my mind, I am forever 18 and there are still many mountains to climb and foolish things I want to do!”

It was June 2014, and I was going about my usual routine when I suddenly lost balance on one side of the body while walking. I was admitted to the Singapore General Hospital (SGH), where doctors subsequently informed me that I had suffered a cerebellar stroke – a rare type of stroke that affects the back of my brain.

For the next five weeks, I stayed in the hospital to recover and rehabilitate. There were many simple tasks that I had to relearn, such as walking and hanging my clothes. The wonderful occupational therapist even conducted a baking class for a group of us and it was great fun relearning the simple motions of handling the cake mixture and spatula. Being a task-driven person, I found these changes in my life quite fascinating and followed the tasks given each day by the doctors, physiotherapists and occupational therapists.

Diet was, of course, a main consideration of the healing process and at one point, due to swallowing difficulties, I could only eat pureed food. People asked me how I could get used to eating bland food when I was a chef, a food critic and a taster of the finest foods in the world. But what I often tell others is that our palates can adapt to any new kinds of food.

When I turned 70 in 2019, in the same week, I was awarded the Lifetime Achievement for Outstanding Contribution to Tourism by the Singapore Tourism Board and it spurred me on to ask myself “What next?” After such an amazing accolade, my instinct was to finally get down to doing community service as this was something that I had desired to do but never got round to it.

Violet Oon

Chef and Restaurateur

I came up with a bucket list of seven things to do for the community and for Singapore, one project for each decade of my life. One programme

was to engage with four other chefs to create a dessert each to teach the culinary trainees from the Association for Persons with Special Needs to prepare them and serve the guests, who included President Halimah, at the Community Chest Donors Awards ceremony at the Istana.

Last year, during the “circuit breaker” period, the Singapore National Stroke Association asked if I could develop and film a series of four programmes featuring four Singapore and Asian inspired recipes crafted for stroke survivors and for those who want to eat healthy. Healthy eating is very important in reducing the risk of stroke, and I wanted to show stroke patients and their families that they can create delicious and aesthetically pleasing food which also meets their dietary and medical needs.

There is a famous saying by Steve Jobs, ‘Stay hungry, and stay foolish’. I believe that one should reinvent oneself every five years. In my mind, I am forever 18 and there are still many mountains to climb and foolish things I want to do!

I have mostly recovered from my stroke and I understand better now what it means to have a health condition that challenges the norms of everyday living. To me, what matters most is celebrating the baby steps that patients take towards recovery. When I am out, I am not averse to asking strangers for help if necessary. I do not mind letting people know that I had a stroke, and that I sometimes struggle to get around or do things that others may find easy. In doing so, it also signals to people with challenges that it is okay to ask for help. There is no need to hide one’s challenges and issues.

“Violet contributed her culinary expertise to create healthy, delicious and aesthetically pleasing dishes specially crafted to suit the dietary and medical needs of stroke survivors. Her expertise and advocacy for healthy eating is invaluable.”

Dr Shamala Thilarajah

Principal Physiotherapist
Singapore General Hospital
and President
Singapore National Stroke Association



“God afflicted me with these trials but He has also given me the strength to overcome them so that I can pass on this strength to others who need them.”

Ms Usha Rani

Teacher

I was 16 when I started having severe migraines. However, it was not until 2003, when I was managing a school in Jakarta, that the migraines became particularly debilitating. I was having a migraine attack every few hours, and even faced difficulties remembering things or forming sentences. A day or two prior to rushing to the hospital, I could hardly stay awake. An urgent visit to a doctor led to the shocking discovery of an intracranial haemorrhage (bleeding within the skull) that needed immediate attention – that would be my first brain surgery.

Having been given a new lease of life after the surgery, I served another six glorious years at the National High Jakarta School before deciding to head back to Singapore. I rejoined the teaching profession as a teacher at a local primary school. Unfortunately, about one and a half years later, in November 2010, while I was pursuing my Masters in Educational Management, the brain haemorrhage recurred and I had to undergo surgery a second time.

As a workaholic, it did not take me long to get up on my feet again after the surgery. An important test was coming up so I pushed myself to study hard for it. Regrettably, the bleeding returned barely a month after the second surgery. I was forced to set aside my studies again for another operation.

Recovering from the third surgery was tough. I could not even lie flat on my back because of the excruciating pain. During that time, my mother cared for me by my bedside and I frequently caught her crying when she thought I was asleep. Seeing her tears was a wake-up call for me, and I decided that I did not want to go through another surgery and make her cry again. I took a 10-week break from teaching and my Masters programme to concentrate on my recovery so that I could recuperate fully.

However, more hurdles were placed in my path in the following years. When an episode of heavy menstrual bleeding with thick blood clots

did not stop in 2014, a subsequent biopsy revealed that I had cervical intraepithelial neoplasia grade three, a pre-cancerous condition where abnormal cells grow on the surface of the cervix.

The bleeding did not subside even with medication, which made it challenging for me to teach the graduating classes I was responsible for at the time. Exasperated at this impediment, I opted to remove my womb to eliminate the problem. Separately, I was diagnosed with hyperlipidaemia and hypertension in 2018.

As disheartening as it is to be faced with so many challenges and setbacks in life, I did not let them kill my spirit. God afflicted me with these trials, but He has also given me the strength to overcome them so that I can pass on this strength to others who need them.

In 2019, I volunteered with Beautiful People SG to mentor incarcerated women aged between their 20s to their 50s. Their Free For Life programme is aimed at building a relationship with the women six months before they are released, while continuing to support them as they reintegrate into their families and the community. In my journey with these women, I always encourage them to remain positive even when life throws them curveballs or in the face of adversities.

I am thankful to my Mum and niece for being my cheerleaders, my bosses and colleagues for their unrelenting support and my students for teaching me to see things from a different perspective. Teaching has always been my calling. I believe that with every child I help, I am on my way to changing a whole generation.

“Ms Usha Rani exemplifies resilience and determination in her pursuit to achieve both happiness and good health. She is an inspiration to other patients and her students alike.”

Dr Hwang Siew Wai

Clinic Director and Senior Consultant
SingHealth Polyclinics – Bukit Merah

“I tell other patients that everything happens for a good reason. I don’t know what the future may hold, but I am not giving up on myself, and neither should they.”



It started with a seemingly harmless bloated stomach in January 2020. When the discomfort did not go away even after I took the medicine prescribed by the doctor, I was referred to the hospital for further tests. The test results came back, and I was diagnosed with Stage Three pancreatic cancer.

The diagnosis shocked me, and I immediately thought about my husband and two sons. My husband suffers from a spinal nerve disorder and has impaired physical mobility for the past 12 years. My sons are still tertiary students. I was the sole breadwinner of the family. Who would take care of them if I am gone?

I was determined to do whatever it took to overcome the disease. There was a chance of a cure when I was scheduled for cancer surgery to remove the malignant tumour. But that chance diminished when we found out that my tumour could not be removed because it had already encased a major vein.

I then went for chemotherapy and suffered side effects at every stage of the treatment cycle. I experienced hair loss, rashes, constipation, blurry vision, and hypersensitivity to cold food, drinks and surfaces.

Mdm Annie Ng

(1967 – 2021)

I was very anxious and despondent before my chemotherapy sessions, and even suffered panic

attacks. To make the chemotherapy sessions more bearable, the nurses at the National Cancer Centre Singapore would engage in role-play with me. We pretended we were at a beach in Hawaii and the reclining treatment chairs were beach chairs. They even played music in the background and we exchanged jokes. I also learnt to cope with my panic attacks and physical discomfort through meditation and prayer.

Despite everyone's best efforts, the cancer continued to spread from my pancreas – first to my liver, and then my lymph nodes. By the end of 2020, I had exhausted the available treatment options and the cancer had progressed to Stage Four. I was also diagnosed with diabetes at the end of my chemotherapy cycle, for which I continue to be treated at Changi General Hospital.

I voluntarily share my experience with other patients I meet and give them tips on how to cope with panic attacks and the side effects of chemotherapy. I also tell them that everything happens for a good reason. I don't know what the future may hold, but I am not giving up on myself, and neither should they.

“Despite her weaker health condition and bleak prognosis given by her oncologist, Mdm Ng remains resilient. She is always willing to share about her life journey and fight against cancer with other patients.”

Juliah Bee D/O Abdul Latiff

Community Coordinator
Changi General Hospital

Mdm Ng passed away on 4 April 2021. Her indomitable spirit remains an inspiration to all of us.



“I don’t feel limited in any way. I like to run, jump, sing and dance, just like any other kid.”

I know I am different from other children as I was born with health issues that other kids do not have. But I don't feel limited in any way. I like to run, jump, sing and dance, just like any other kid.

I was born with a rare condition called Cloacal Exstrophy, where my bladder and intestines were lying outside my body at birth. The doctors and nurses tell me that it is the most severe birth defect of the lower abdominal organs.

The condition caused my urinary, genital, rectal systems, and left leg to not form properly. I have had more than 10 reconstructive surgeries since I was a baby. As my systems require many stages of reconstruction, I know that I have to go through more surgeries as I grow older, and monitor my condition carefully. Everyone tells me that I am brave and strong.

I am also the youngest person in Singapore to have undergone continent diversion to prevent urine leakage. The surgeon made a pouch inside my body from part of my intestines to hold my urine, and then an opening on my tummy, called

Alesha Binte Sheikh Ismail

Student

a stoma, for the urine to pass through. I was in the hospital for two months!

With this stoma, I must insert a catheter tube a few times a day to drain my urine. Now that I am in primary school, I am learning to drain the urine on my own. My mother comes to my school every 1 hour and 20 minutes to guide me through this procedure.

In addition, I was born with a clubfoot, which means that my left leg is rotated inwards at the ankle. I wear special shoes to help my leg and feet grow normally. I also need regular hospital visits for my rehabilitation aids to be adjusted.

Despite these problems, I enjoy doing many things. For example, I love singing! My proudest moment was when I did a solo performance of "Into the Unknown" from the movie "Frozen" for my kindergarten's talent show. Everyone loved that I could reach the high notes easily!

When I grow up, I want to be a surgeon just like the wonderful doctors who made my life better. In this way, I can help other kids just like myself.

"Alesha is the youngest child to undergo continent diversion in Singapore. Her courage and strength inspires other differently-abled children."

Ranjit Kaur

Nurse Clinician

Department of Urology

KK Women's and Children's Hospital

“I wish to continue supporting other patients with gynaecological cancer on their recovery journey, just like how I had received the help and comfort when I most needed it.”



I first found out that I had cervical cancer after a routine pap smear in 2015. As I felt fine and had no symptoms, the diagnosis came as a shock to me. I was only 35 years old then and felt that there were still so many things I had yet to accomplish.

I underwent chemotherapy and radiotherapy in 2019 but unfortunately, the cancer had spread to other parts of my body. The doctor told me that the cancer cells had metastasised from my cervix to my bladder and peritoneum, a membrane that covers my abdominal wall.

As a tumour had also caused my kidneys to enlarge, I underwent a procedure to insert a Percutaneous Nephrostomy (PCN) drainage tube into one of my kidneys to channel urine into a bag attached to my back. I have been using the PCN tube for the past year. It is uncomfortable, but I have accepted that I will be relying on this tube for long-term survival.

My husband has been wonderfully supportive. He changes the dressing for my PCN tube every week and does most of the heavy household chores. My Buddhist faith also helps me to focus on cherishing what I have, and doing good one day at a time. These little blessings help me cope with the stress of living with cancer.

Mdm Lovy Goh

Homemaker

I am also fortunate to have friends who offer me comfort and support. One of my friends introduced me to the former radio deejay,

Dongfang Billy, a leukaemia survivor. He gave me tips on how to manage the side effects of my chemotherapy and radiation therapy treatments, which ranged from numbness in my fingers, hair loss to severe vomiting. I remember a time when I vomited for 48 hours continuously. It was a terrifying experience.

After I completed a set of active treatment last June, I decided to volunteer at the Singapore General Hospital to support other patients. As a patient advocate, I share my experiences with patients diagnosed with gynaecological cancer who have yet to undergo therapy so that they can make an informed choice on their treatment.

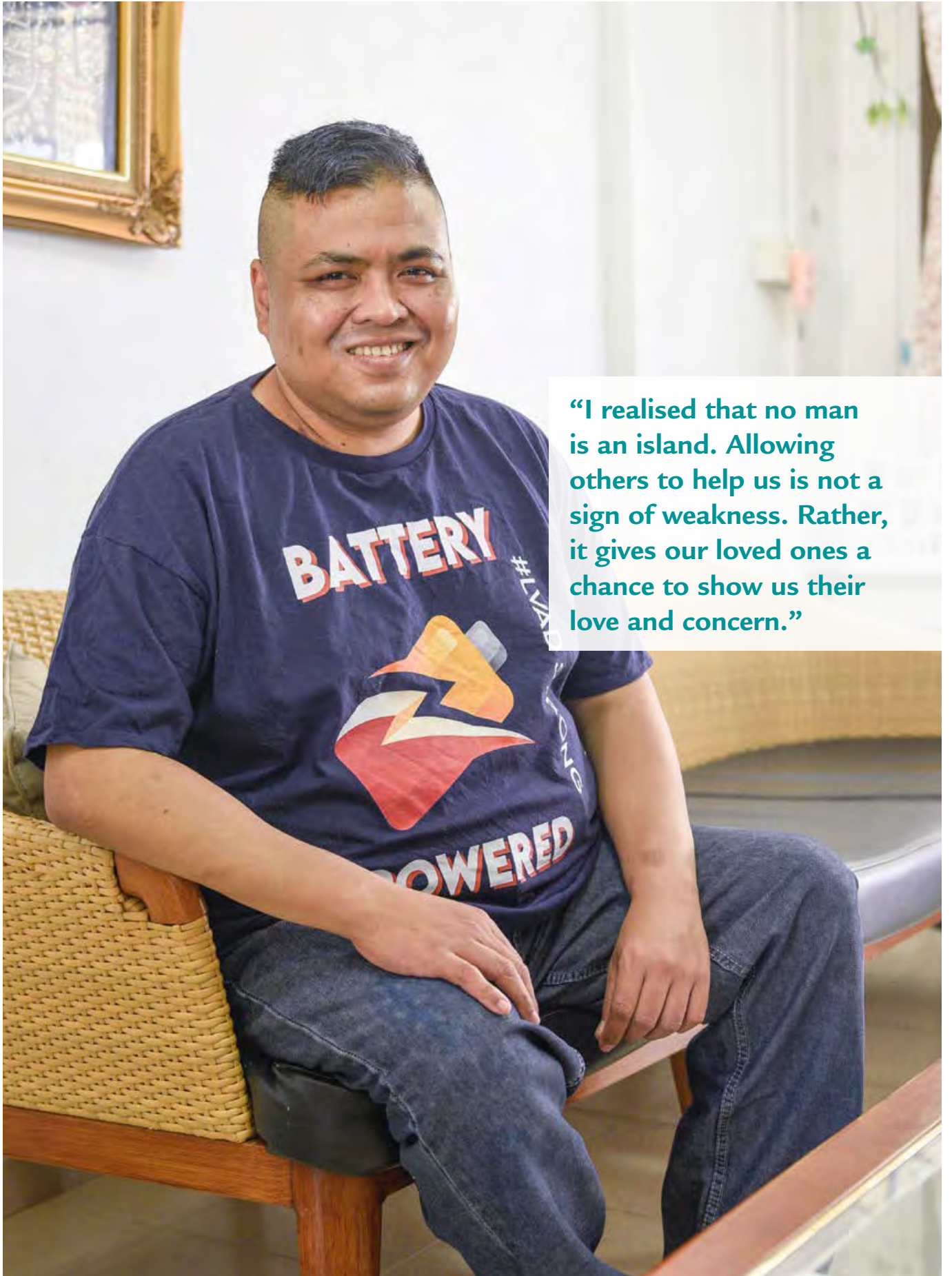
The patients I met through my care team have since become friends with one another as well. We provide mutual support over WhatsApp and through video calls. If they ask for treatment advice, I encourage them to have faith in their medical team and treatment, and advise against fad therapies.

I wish to continue supporting others on their recovery journey, just like how I had received the help and comfort when I needed it most.

“Since she completed active treatment, Lovy has been seeking out opportunities to contribute to society. Her bubbly and positive personality makes her an ideal patient advocate.”

Tay Beng Choo

Senior Nurse Clinician
Division of Supportive and Palliative Care
National Cancer Centre Singapore



“I realised that no man is an island. Allowing others to help us is not a sign of weakness. Rather, it gives our loved ones a chance to show us their love and concern.”

I first learnt that I had dilated cardiomyopathy in 2008, when I kept breaking out in cold sweat and had difficulties breathing and sleeping. The doctor explained that I needed to be on long-term medication and have an implantable cardioverter-defibrillator (ICD) implanted in the event of sudden heart failure. It turned out to be the best decision I made, because the ICD saved my life on two occasions, stimulating my heart to beat again after I collapsed.

The second time my heart failed, I collapsed at work. After the incident, I decided to leave my job in the shipping industry. As I was the sole breadwinner of my family at the time, this marked the start of a phase of depression and self-blame. I felt that I was becoming a burden to my family.

As my condition worsened, I was also fitted with a Left Ventricular Assist Device (LVAD) in 2016, as a temporary solution while I wait for a heart transplant.

My depression got worse when I discovered that my family members were also struggling with their own mental health issues without my knowledge. Of my three children, my two oldest were diagnosed with clinical depression. My wife had kept the situation from me in order not to add to my stress. I felt very useless and started to keep to myself, refusing help from my family members.

However, my family, friends and medical social workers at the National Heart Centre Singapore (NHCS) never gave up on me. They reminded me about how much those around me cared about me. I realised that no man is an island.

Mr Effendy Bin Idris

Active Volunteer

Allowing others to help us is not a sign of weakness. Rather, it gives our loved ones a chance to show their love and concern.

In 2018, I became the first LVAD patient in Singapore to undergo a laparoscopic sleeve gastrectomy to reduce my weight so that I could be considered as a candidate for heart transplant. It was a big risk as the surgeons had never performed bariatric surgery on someone with an LVAD before. When I awoke, the nurse even took a photograph with me to commemorate this milestone!

Before my illness, I was very active in volunteer work. In 2019, my wife encouraged me to do what I love again, so I joined CampusImpact, which reaches out to youths from lower-income and disadvantaged families. I joined the centre's counsellors to visit schools twice a week, where I spoke to troubled youths and joined them in various activities like archery.

Even when I had driveline infections from my LVAD and walked around with an antibiotics pump, I would continue my volunteer work. I became a much happier person who rarely fell ill. I felt that I was a person with value again.

I am also on the executive committee of the LVAD Patient Support Group at NHCS. Even when hospitalised, I would still leave the ward for an hour or two to join their activities and help as much as I could.

I have been waiting for a heart transplant for the past four years, and I know that I am currently living on borrowed time. I just want to focus on spending time with my family and enjoying each day as it comes.

“Mr Effendy and his family have always remained supportive and united when the going gets tough, even as they manage their individual health issues. They are truly an inspiration.”

Kerk Ka Lee

Senior Manager
Heart & Lung Transplant Unit
National Heart Centre Singapore



“People with disabilities are not limited – I believe that we can and should take the initiative to better the lives of people in our community.”

I was in primary school when I first learnt that I had an eye disorder. We were going through a routine health screening and I was unable to read some of the numbers on the colour blindness chart. I was asked to go for further checks and was diagnosed with a rare hereditary condition called retinitis pigmentosa or bilateral rod cone dystrophy.

In a nutshell, the light-sensing cells at the back of my eyes gradually break down and cause visual impairment. I also have bilateral cataracts which further limit my sight. These conditions render me legally blind.

Growing up with visual impairment is not easy, but I have learnt to use a variety of tools to help me stay independent in my daily life. I use voiceover and text-to-speech software to “read” text on my digital devices, and magnifiers to enlarge text in print media so that I can read them. I also use a white cane to get around on my own.

After I graduated from Temasek Polytechnic, I joined a local social enterprise, Fairmarch, which is an online marketplace for socially and environmentally responsible products. I help my organisation with its online marketplace business, and am happy to be able to play a part in sustaining a source of income for people with disabilities who wish to sell their products.

In my free time, I enjoy playing chess, and refuse to let my visual impairment get in the way of honing my skills. I have represented Singapore at international chess tournaments as a para chess athlete, including the ASEAN Para Games

Mr Edwin Tan

Connections Builder

in 2015! In order to play, I memorise the entire chess board, where each piece is and where my opponent moves the pieces at every turn. After visualising the current board state, I strategise my subsequent moves to win the game.

I am also an ardent supporter of local causes. In 2012, I joined Runninghour, a sports club that promotes integration of people with special needs through running or walking. We are paired with sighted volunteers to exercise at different parks in Singapore.

In 2018, I joined the Youth Development Programme organised by SPD, a local charity that supports people with disabilities. The programme invites youths to come up with solutions for social problems under the guidance of a mentor. My team held workshops for autistic students at Singapore Polytechnic to teach them to better manage interpersonal conflicts and their moods.

My most memorable moment was being invited to deliver a speech at the Global Compact Network Singapore Youth Forum in 2019, where President Halimah Yacob was the guest-of-honour. I spoke about empowering persons with disabilities to gain meaningful employment. It was an honour to speak at such a prestigious event.

Although I am visually impaired, I am still able-bodied and can accomplish many things. People with disabilities are not limited — I believe that we can and should take the initiative to better the lives of people in our community.

“Despite the difficulties he faces with his poor vision, Edwin does not wallow in self-pity. Instead, he chooses to give back to society and help others who are less fortunate.”

Dr Chan Choi Mun

Senior Consultant
Medical Retina Department
Singapore National Eye Centre



“I have come a long way since those dark days. I continue to work hard at my therapy sessions to regain more of my physical functions. In time, I hope to be well enough to be able to run a small food business with my wife.”

My life changed completely in January 2019 when I suffered a sudden stroke. I was at work as usual that day, in my role as a construction site supervisor. I got into a disagreement with a colleague and the next thing I knew, I was in the hospital with the entire right side of my body paralysed.

My mind was in a haze the entire time I was in the hospital. It was not until I was transferred to St Luke's Hospital for rehabilitation that the realisation of what had happened hit me. That was the darkest period in my life, and I felt really helpless and depressed. At my lowest point, I did not want to live any more.

It was the thought of my family that got me through that bleak period. As the sole breadwinner, I have many dependants who rely on me — my 88-year-old mother who has dementia, my wife who is a housewife, and my three daughters who are still in school.

My wife has been my strongest pillar of support. Even though she was equally devastated by my condition, she remained by my side. For nearly two months, she came down to the hospital

Mr Toh Boon Beng

Stroke Survivor

twice a day to look after me. She brought home-cooked food and massaged my back and legs so that my muscles would not deteriorate.

During my rehabilitation, I worked hard every day to get better. It was really difficult in the beginning. I had to relearn how to talk and walk. With the help and encouragement of the therapists, I slowly regained my basic functions. The first time I managed to lift my arm on my own, I was filled with hope. I finally saw a light at the end of the tunnel.

At St Luke's, I saw that I was not alone in my recovery journey. There were many other stroke survivors, some even younger than me. I got to know a few of them personally. Having gone through the same experience, I encouraged them to stay positive, keep going and not give up.

I have come a long way since those dark days. I continue to work hard at my therapy sessions to regain more of my physical functions. In time, I hope to be well enough to be able to run a small food business with my wife. I want to leave it as a future source of income for her, after all that she has done for me and our family.

“Boon Beng's positivity is felt by the people around him. Despite his condition, he envisions hope and possibilities for the future.”

Chua Hwee Leng

Manager

Corporate Communications and Partnerships
St Luke's Hospital

INSPIRATIONAL *Caregivers*



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IN-CARE
AWARD**

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Mdm
Haslina
Bte Zainal



**PARTNER-
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Mdm
Noryusnita
Asmara
Binte Unus



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Mdm Chua
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The Guan
Sisters



“One of the best gifts in my life was being able to wake up every day for the past 11 years and see Natasha’s face.”

Natasha was the younger of my two daughters. When she was born in 2009, she was just like any other baby. However, as she grew, I observed that she was unable to flip onto her stomach like other babies. It wasn't until we brought her to the A&E for fever when she was eight months old did we find out that something was wrong.

Natasha was diagnosed with Type 2 Spinal Muscular Atrophy (SMA). It is a genetic disorder that causes progressive muscle weakness, affecting the ability to stand, walk and even eat properly. The doctors told us she was unlikely to live beyond the age of two.

My husband and I were in denial over the news. As it was a genetic disorder, we even blamed each other for her illness. However, the worst was yet to come.

In 2011, my husband passed away suddenly after an accident, leaving me to take care of our young daughters. My older daughter, Alicia, was only six years old then.

The loss of my husband forced me to come to terms with my situation and Natasha's illness, and to stay strong for the sake of my daughters. I read up extensively about SMA and the more I learnt about it, the better I became at taking care of Natasha. Although I had my family's help, I knew that ultimately, I was the main caregiver responsible for meeting her needs.

I became a lot better at interpreting Natasha's moods and physical needs. As Natasha could only roll her eyes, I had to rely on her vital signs, such as her pulse, to tell whether she was unhappy or in any discomfort. It was challenging whenever she fell sick as I would

Mdm Noryusnita Asmara Binte Unus

Homemaker

have to constantly monitor her condition. There was once when I went without sleep for four days, taking care of her.

As a single mother, it was tough but I persevered over the years for my daughters. When Alicia was approaching her teenage years, I realised that I had been caught up with caring for Natasha and was not always able to give Alicia the attention and care she needed. I sensed that she was growing distant and withdrawn, and decided to seek advice from professional counsellors to learn how best to communicate with her. With their guidance, I began building a loving relationship with Alicia again.

The StarPALS community palliative team at HCA Hospice Care and the KK Women's and Children's Hospital (KKH) homecare staff were an excellent source of support throughout my journey in caring for Natasha. Not only did they take great effort to make her comfortable, they were patient and took all my suggestions for her care seriously. For example, when I requested for a cough assist machine for Natasha, the staff followed up on my request promptly with the doctors.

Natasha passed away on 5 February 2021 at the age of 11. She had outlived the doctors' prognosis by nine years. One of the best gifts in my life was being able to wake up every day for the past 11 years and see her face. I also feel blessed to be able to be by her side in her final moments.

Today, I hope to be able to give back to the community by being a respite care volunteer for other parents of children with chronic illnesses.

"Mdm Asmara demonstrated a tremendous amount of patience, unwavering love and resilience to ensure that her child has a good quality of life at home. She inspires every caregiver to give the best for their child."

Maryani Binte Abdul Wahab

Nurse Clinician
Children's Complex Home Care Services
KK Women's and Children's Hospital



“I did as best as I could to look after my late father and paternal grandmother, and I have no regrets. I had been by their side up to our last goodbyes.”

Mdm Haslina Bte Zainal (left) with her mother

As the eldest of three children, I am used to taking care of others, and I have always had a strong sense of responsibility.

My mother is my role model. She is an extremely strong woman who battled with — and eventually conquered — breast cancer. When I was a child, I was inspired by how readily she accepted the role of main caregiver to her own parents. Her father was a stroke patient and her mother had dementia.

In fact, my mother inspired me to pursue a career in nursing, where I found my calling in caring for others. Even as a nursing student, I found it easy to establish rapport with elderly patients, including those with dementia. Perhaps it was due to my own experiences at home.

Still, nothing prepared me for what was to come 20 years later. At that time, I was in my late 40s and was a single mother raising three young children. My parents were no longer working and were living with me in a three-room flat.

In 2019, my mother had a stroke and lost her vision. My father's health also began to deteriorate. He had hypertension and experienced frequent fainting spells. In May 2020, just before I left for work one morning, he fainted again. This time, the doctors confirmed that he had Stage 4 lung cancer.

A month later, to my shock, my paternal grandmother was also diagnosed with end-stage lung cancer. With my father refusing cancer treatment and my grandmother unsuitable for surgery due to her old age, we had to painfully accept that both of them only had a few months left to live. During those last months, my father asked for my grandmother to live together with us, so that she would not be alone.

Mdm Haslina Bte Zainal

Gynaecologist's Assistant

I accepted his wishes and turned my three-room flat into a home for three aged family members, three children and myself.

In the days that followed, I would wake up at four every morning to shower and change diapers for my father and grandmother, and to prepare food for everyone before heading to work. My brother would come over to help out when I was at work. When I returned home, I continued to look after my parents and grandmother until the wee hours of the morning, setting aside time to chat with all of them and brighten up their day. I would also record my father's and grandmother's vital signs at regular intervals and send them to the healthcare team, something that I am accustomed to doing as a nurse.

As tiring as it was, the hardest part was not the physical labour. It was seeing my loved ones suffer from restless nights and hearing them groan in pain. It was seeing my children getting frightened and lost when their great-grandmother had fits, and distancing themselves from me when I had no time for them.

However, those also sparked the most heartening moments. I watched my mother, father and grandmother take turns to soothe one another when they sensed that any one of them was in pain. With support from my eldest daughter, I taught my son how to manage the situation when his great-grandmother had a fit, and watched proudly as he bravely took charge the next time it happened.

On 24 August 2020, my grandmother passed away. Eight days later, I lost my father too.

I did as best as I could to look after my late father and grandmother, and I have no regrets. I had been by their side up to our last goodbyes.

“For many months, Haslina had to concurrently look after two patients with terminal cancer at home. Throughout that time, she demonstrated courage, tenacity and strength. Both her willingness and ability to use her nursing skills to co-operate with the healthcare teams, and her determination to honour her family members' wishes to be cared for at home till the end were extremely admirable.”

Florina Wong

Social Worker
Psychosocial Department
Singapore Cancer Society



“It was great to see the smiles on the patients’ faces when I handed them my gifts. Small gestures like this can mean a lot to the patients who feel lonely during their stay in the hospital.”

Mr Derick Wong (left) with his mother

My 64-year-old mother, Mdm Molly Tan, suffered pain in her knees and had difficulty walking for years. After persuading her to go for a knee replacement surgery, she decided to do so at the Singapore General Hospital in 2020, and was subsequently admitted to Sengkang Community Hospital (SKCH) in December that year for post-surgery rehabilitative care.

The ward staff at SKCH were friendly and helpful. I was happy to work with them to keep my mother comfortable and well cared for, so that she could have a fast and smooth recovery. I also made it a point to share ideas with them whenever I noticed areas for improvement within the ward.

For example, I gave suggestions on how SKCH could give patients' family members regular updates on their conditions via text messages. I felt that this might be helpful to family members who wanted to know more about how their loved ones were recovering, but who were unable to find time to speak with the care team.

I would visit my mother with her favourite food and keep her company regularly. As an extrovert, I enjoyed chatting with other patients in the ward. When I noticed that some of them had no visitors or looked sad, I made it a point to check on them and ask how they were, and even buy them snacks if possible.

Mr Derick Wong

Business Development Director

As I continued to interact with the patients and staff, I noticed that the ward started to have a familial kampung spirit. The healthcare team at the ward told me that my friendliness in reaching out to the patients helped to cheer them up immensely.

But in my opinion, the healthcare workers were the ones who deserved the appreciation and praise. Their work was not easy, yet they always maintained an approachable and supportive demeanour to keep their patients in positive spirits.

To show my appreciation, and as it was nearing Christmas at the time, I decided to spread a little Christmas cheer in the ward. I put together gift bags with supermarket shopping vouchers for all the staff and patients. For the staff, I added "Thank You" notes to express my gratitude. It was great to see the smiles on everyone's faces when I handed them the gifts. I also realised that small gestures like this can mean a lot to the patients who may feel lonely during their stay in the hospital.

I don't think that what I've done is extraordinary. To me, life is short, so we should find time to do good deeds. There will be times when we are ill, old or need help, so if we can be kind to others, we should do it.

"Mr Wong took the effort to befriend the other patients in the ward. His positive energy was inspiring to the care team and contributed to the community spirit of the ward. Such social and emotional support plays an important role in patients' recovery."

Tan Li Hao

Executive
Community Relations
SingHealth Community Hospitals



“Taking care of my mother is my duty as a son. As long as my mother lives each day happily, I am contented.”

Mr Tan Joo Khiang (right) with his mother

I am the full-time caregiver for my mother, Mdm Khoo Luang Eng. She is 105 years old this year. It's just the two of us living in our flat, so I take care of all her needs.

I left my job of 41 years as a technician at a large manufacturing company in 2014 after my mother had a fall at home and injured her ankle. Even though it was not a serious fall, I felt that it was time for me to stop work and take care of her. I would always remember how my mother greeted me with a ready smile every time I came home from work, and her fall prompted me to focus on taking care of her as she had done for me.

Two years later, my mother had a much worse fall at home and broke her hip. This time, she needed to go for an operation at Changi General Hospital. It was during her stay there that she was diagnosed with dementia.

In the beginning, it was quite frustrating to take care of her. She would have memory lapses such as forgetting that she had eaten, or she would spill her food onto herself. Sometimes, she would be uncooperative if I needed to bathe or change her. But over time, as I understood more about her condition, I learnt to cope and be patient with her. I now sleep next to her so that if she wakes up at night to go to the toilet, I can help her.

Mr Tan Joo Khiang

Full-time Caregiver

Our lifestyle is very simple. I cook all my mother's meals so that I can take care of her nutritional needs. Once, the doctor told me that she

was not getting enough protein, so I adjusted her diet to include more protein-rich food like eggs, fish, meat and quinoa. I also make sure she eats a banana and fish oil supplements daily to prevent constipation and to boost her nutrition.

To keep my mother's mind active, I play card games with her, ask her to identify colours, or encourage her to sing her favourite childhood Teochew folk songs. I praise her singing each time, and I can see that this makes her very happy.

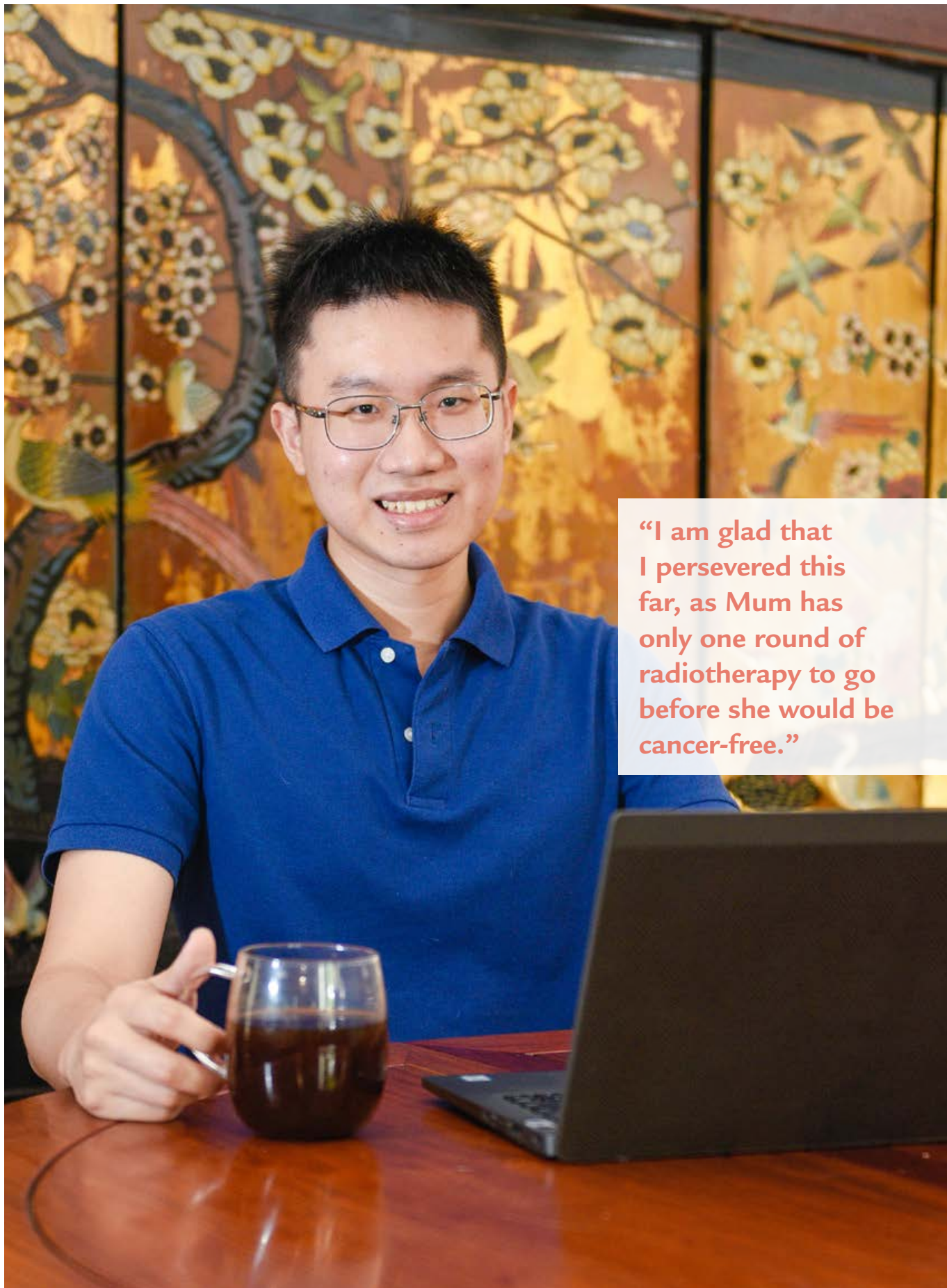
I do not go out much except for quick trips to the market early in the morning to buy groceries when my mother is still asleep, or to accompany her to the hospital for her medical appointments. Sometimes when I need help, I would ask my younger brother or sister, who are usually very obliging and willing, for support. Occasionally, our neighbour would buy some fish or meat from the market for me to cook for my mother.

My advice to other caregivers of loved ones with dementia is to have patience. Your loved one is usually not aware of his or her actions during their dementia episodes. I believe that taking care of my mother is my duty as a son. As long as my mother lives each day happily, I am contented.

“Mr Tan's devotion to his mother touches our hearts. He does his filial duty with a sincere heart. His uncomplaining, selfless and caring ways never fail to amaze and inspire us.”

Waheedah Bte Abdul Majeed

Community Care Assistant
Changi General Hospital



“I am glad that I persevered this far, as Mum has only one round of radiotherapy to go before she would be cancer-free.”

When I was six years old, I moved to Singapore with my Mum and brother. Our Dad remained in Taiwan for work and visited us twice a year.

Growing up, I was very close to Mum. She was my confidante and I would turn to her for advice whenever I had problems. Hence, when we found out in September 2020 that she had a lump in her right breast, I was devastated. The doctor warned that it could be stage four breast cancer.

Mum was very anxious and afraid, and I tried to chat with her frequently to keep her spirits up. Thankfully, the biopsy results confirmed that it was breast lymphoma instead, which is a highly treatable condition. She was relieved and resolved to get well.

Unfortunately, the road to recovery was not easy. Her breast mass had been growing for a few months and resulted in a large wound affecting many layers of her skin. It released copious amounts of discharge and blood, as well as a foul smell. We had to make multiple trips to the clinic for wound care and chemotherapy.

Not wanting her to endure this inconvenience, I underwent training by the experienced nurses at the National Cancer Centre Singapore (NCCS) so that I could perform wound care procedures for her at home. I also managed to work out a flexible work arrangement with my understanding

Mr James Tseng Sheng Hsuan

Analyst

boss so that I could care for Mum during the day.

At the end of the training, I was able to clean and dress Mum's 14-cm-long

wound. As the wound was at a sensitive part of her body, I had to remind myself to be gentle. The trickiest part was the flushing of the central venous catheter inserted in her body for chemotherapy. One wrong move could put her at risk of severe infection.

With Mum resting often, my brother and I took turns with the household chores and made sure she ate nutritious food to maintain a healthy weight. After she retired for the night, I would catch up on my work commitments.

Mum's treatments were intense. They had to be condensed within five months, leaving me little time for anything else. However, I am glad that I persevered this far, as she has only one round of radiotherapy to go before she would be cancer-free.

I am grateful to so many people who have supported Mum and I on her cancer journey — my brother and my boss for their support, the kind healthcare professionals at NCCS for journeying alongside us, and Mum herself, for not giving up despite the numerous challenges.

I look forward to many more years with Mum and when Dad retires, I hope he can leave Taiwan and settle here with us.

“Mr Tseng worked around his busy work schedule to avail himself to support his mother throughout her battle with cancer. This is an act of selflessness and love that is hard to come by.”

Dr Bernard Chua
Senior Resident
Medical Oncology
National Cancer Centre Singapore



“When we look at the storms in our life, it can be very depressing. Instead, I challenge myself to look at the blessings that I have around me.”

Mdm Pauline Lim (left) with her mother

My mother, Mdm Yew Yong Sing, was 21 years old when she married my late father and relocated from her hometown in Malaysia to Singapore.

Despite being thrust into an unfamiliar environment, my mother, being an extrovert, adjusted well and made many new friends. She was physically active and enjoyed being outdoors. When I was a child, she would often take my two younger sisters and me out to cycle, fly kites and even catch guppies in the drains near our home.

Her feisty and adventurous personality stayed with her as she aged. When she was in her 60s, she once climbed a tree to retrieve a kite for my son!

I have three adult sons, all of whom are diagnosed with autism. When they were young, my mother would drive over to my place every day to help take care of them. They were very close, and she continued to be an active and dedicated caregiver for them until four years ago, when she was diagnosed with dementia at the age of 71.

My mother's dementia symptoms appeared suddenly and her condition worsened drastically in a short time. Within a span of two weeks, she was exhibiting signs of confusion and illogical thinking. We knew something was wrong when she failed to turn up for a family dinner, only to return home at two in the morning, while thinking that it was only afternoon.

Mdm Pauline Lim

Tax Professional

Today, my mother requires help to walk, use the toilet, shower, and even to eat. She still recognises me but is mostly quiet and speaks in

monosyllables – a shadow of her past outspoken self. I engage her through activities such as colouring and going for walks. She loves music and dancing, so I also sing and play familiar oldies on the piano to help her recollect the past memories.

When we look at the storms in our life, it can be very depressing. Some days, I worry about the fact that there are four people – my mother and my sons – who are dependent on me for the rest of their lives.

However, I choose not to dwell on negative thoughts. Instead, I challenge myself to look at the blessings I have around me. We have a beautiful house that we live in together, and I am healthy and able to continue to work and care for my loved ones.

For caregivers like me, a reliable support system protects our mental health and well-being. I am grateful for the support network I have in my life – my husband, sisters, church family and helpers. My husband, in particular, is my pillar of strength. All these years, he has been by my side through the highs and lows. Despite the trials, life must go on and I believe that it is important to find the light at the end of the tunnel and keep going.

“Pauline was well aware of the added responsibilities on her shoulders when she became the main caregiver for Mdm Yew. However, she remains positive and resilient. What keeps her going is the sense of responsibility she feels for her children and her mum.”

Dr Yang Jingrong

Consultant

Clinical – Restorative Dentistry
National Dental Centre Singapore



“I do not see caring for Beng Tuan as a burden. I think it is important to accept the situation and work towards helping him regain his health.”

My husband Beng Tuan and I have been married for more than 50 years and have weathered some difficult times together. We are very close as a couple. When Beng Tuan was well, we hardly went out without each other. In fact, my sister liked to joke that if you saw me, my husband would not be far behind.

Over the years, Beng Tuan survived many health crises. He was diagnosed with chronic conditions such as gastrointestinal bleeding and hepatitis B, as well as prostate cancer about 20 years ago. He also has heart and kidney diseases which led to his hospitalisation at the National Heart Centre Singapore (NHCS) for more than a month in late 2020.

The hospital stays last year were really hard on him and our family. As he suffered consecutive heart and kidney failure and required resuscitation and urgent dialysis, he became really frail. There were a few occasions when we thought we would lose him.

He required special care because of his conditions. Once, he had to be put on a liquid diet because he had difficulty swallowing. He also needed

Mdm Chua Bee Lay

Retiree

help with basic needs such as using the toilet. While he was hospitalised, I got up early every day to cook meals based on his dietary

restrictions for him and spent the whole day with him.

Our children – three sons and a daughter – and their spouses are very loving towards Beng Tuan. They took turns to stay overnight at the ward so that I could get some rest at home. I think Beng Tuan managed to pull through those critical times because our whole family had rallied around him, and I am grateful for that.

When Beng Tuan could be discharged from the hospital, I had to learn how to take care of him at home. The NHCS staff trained me on caregiving duties such as blood glucose monitoring and cleaning of Beng Tuan's ulcer wound on his right leg. Although I used to be afraid of blood and needles, I gathered the courage to care for him on my own.

I do not see caring for Beng Tuan as a burden. Instead, it is important to accept the situation and help him work towards regaining his health. I hope that he will get better and we can go out together again like we used to.

“Family plays a big part in providing psychological stability and support for patients to better recover. Bee Lay and her children were actively involved in Beng Tuan's recovery, working closely with the care team to take care of him at all times.”

Jasmine Lee Mei Bao

Senior Nurse Manager
National Heart Centre Singapore

“The faith that I had in our vows of marriage was what kept me going through the most difficult times.”



My husband Kim Hock and I met when I was in my teens. We were neighbours, and we dated for eight years before we got married in 1972. We have three children – two sons and a daughter. Both of us worked full-time as we brought up our family together.

My husband worked as a senior construction site supervisor. One day, he had a near-fatal fall at work during one of his routine site inspections. Concerned for his safety, our children pleaded with him to leave his job, so he decided to apply for a taxi license in 2000.

It was during the health screening for the license application that he found out that he had Type Two diabetes and heart problems. His kidneys also started to fail as time went on. He was only in his early 50s then.

I remember it was just before Chinese New Year when I accompanied him to his first dialysis session. I tried to hold back my tears when I saw the needles piercing into his arm. When we got home, I put some ice on his arm to soothe the pain.

When he started dialysis, life became very hectic. I was working full-time and taking care of my three growing children. On top of that, I had to accompany him for dialysis three times a week. I switched jobs so that I could be present for all his medical appointments.

During this period, he could still drive the kids to school and do community work in his church.

Mdm Sally Ang Yian Neo

Senior Pharmacy Tech Supervisor

We even went on short trips to Taiwan and Australia with the kids. But as his health got worse, he stopped going out.

Over the years, my husband developed other medical conditions. He underwent numerous procedures such as a heart bypass, angioplasty procedure, heart valve replacement and had a pacemaker installed. Eventually, he also had to have both legs amputated due to poor blood circulation.

Due to his various operations, my husband was warded in the Intensive Care Unit (ICU) numerous times. Each time he was in the ICU, I would feel very stressed and worried. I was always so relieved each time he pulled through. The last two years of his life were especially challenging. He was frequently in and out of the hospital due to complications from his multiple conditions.

I experienced health issues of my own too – I had also undergone a second angioplasty in 2018, and due to worries about my husband's condition, my cholesterol level rose in 2020. It was a difficult time for both of us.

My husband passed away on 7 December 2020. After going through the highs and lows of his illnesses for the past 20 years, my family and I are still trying to adjust to his absence.

My advice to other caregivers is to never give up hope. The faith that I had in our vows of marriage was what kept me going through the most difficult times.

“Despite dealing with her husband’s ongoing medical issues for the past 20 years as well as her own recent health problems, Mdm Ang remained deeply involved in coordinating his care and communicating them to the rest of the family.”

Dr Jack Tan Wei Chieh

Senior Consultant
Cardiology

National Heart Centre Singapore and Sengkang General Hospital



“I am confident that Khairul will continue to improve as long as I do not give up on him.”

My oldest son, Khairul, was 19 when his motorcycle collided with a bus in 2004. My husband and I rushed to the hospital when we heard the news.

Seeing him lying motionless in the emergency room was so horrific that I had to lean on a nurse for support. The accident resulted in traumatic subarachnoid haemorrhage, which is bleeding into the cerebrospinal fluid space meant to protect the brain. He also suffered a fractured left hip. The extent of his brain injuries meant that he would be bedridden, and would even require a feeding tube for food intake.

Reality hit me hard but I chose to remain positive. I devoted my efforts to ensuring that Khairul lived his days in comfort. After his discharge from the hospital in 2005, we admitted him into the former Ren Ci @ Moulmein nursing home as we had to continue working to pay his medical bills and support our three younger children.

Even though we lived all the way in Bukit Batok, my husband and I took turns visiting Khairul every day. I would wake up at 3am to do household chores, visit Khairul around noon to feed him lunch, help him with exercises, communicate his needs to the staff and spend time chatting with him, and then leave for work at 3pm. My day would finally end at 11pm.

Mdm Jamilah Bte Othman

Retiree

However, the lack of rest quickly took its toll. I lost weight and became much weaker in the months after the accident. It was only because of my other children's help around the house and my employer's support that I found the will to continue. Things improved when Khairul was subsequently moved to Ren Ci @ Bukit Batok in 2015, which was closer to our home.

When the "circuit breaker" was imposed in 2020 to manage the COVID-19 pandemic, we could not visit Khairul for two months. It was an agonising and difficult time for us. However, the wonderful staff at Ren Ci arranged video calls between us every day during that period so that I would not miss out on his laughter.

I am happy that Khairul has made progress over the years. His feeding tube has been removed and he is able to sit up while eating. His glaucoma, diagnosed in 2011, is now under control and he can communicate using simple gestures, a vast improvement from when he met with the accident 17 years ago.

I will be 62 years old this year. My main hope is to have the strength and good health to carry on caring for my son for many years to come. I am confident that Khairul will continue to improve as long as I do not give up on him.

"Mdm Jamilah's commitment to her role as a mother and caregiver for Khairul is a constant motivation for us at Ren Ci, and the fortitude she has shown all these years is truly deserving of praise."

Elsie Teo Siew Hun

Assistant Director, Nursing
Ren Ci @ Bukit Batok Nursing Home



“Looking after my mother for the past decade was my way of repaying her for everything she had done for me. I am grateful to have had the chance to take care of her till the very end.”

My late mother, Mdm Ponnayee D/O Kurunathan, devoted her entire life to work and running a household with nine children.

For many years, she clocked 12-hour days with my late father at their hawker stall in Little India so that they could provide a better life for us.

My mother doted on me since I was young. We remained close even after I got married. We enjoyed spending time together doing simple activities such as cooking, eating and watching television. When my husband passed away in 2002, she was my pillar of support.

My mother was always healthy, but things started to change in 2011, when she was 81. One day, when I came home from work, she told me fearfully that there were strangers standing at our front door. At that time, I didn't think of taking her to the doctor as I thought her hallucination was just a normal sign of ageing. However, as I was still concerned, I decided to quit my job to look after her.

In 2016, when I noticed that my mother was frequently agitated, I took her for a check with the doctor, and there she was officially diagnosed with dementia. Her frequent hallucinations, constant repeating of questions, and unfounded fears over lost items were early signs of dementia that I had not previously recognised.

My mother gradually lost her ability to perform daily tasks independently such as showering

Mdm Kengeamal D/O Chinniah

Full-time Caregiver

and eating. She often refused to cooperate when I tried to give her a shower, brush her teeth, change and feed her. She didn't like wearing diapers, and would sometimes urinate or

pass motion on the floor or the sofa. When that happened — and it was usually in the middle of the night — I would clean it up as well as shower and change her.

Being a full-time caregiver took a toll on my health. My eyesight started failing due to insufficient sleep, and the condition of my varicose veins worsened from prolonged physical exertion. In 2017, at the healthcare team's advice, I enrolled my mother into a dementia day care programme at Ren Ci @ Ang Mo Kio, so that I could have time to rest and go for my own medical appointments.

Nonetheless, I checked in on my mother frequently by keeping in close contact with the staff at Ren Ci. Whenever she refused to take the transport home from Ren Ci, I would pick her up and take a 15-minute walk home with her on the wheelchair. Towards the end of 2019, my mother was diagnosed with throat cancer. She would cough up copious amounts of blood. It was heart-wrenching to see her suffer.

I was right by her side when she passed away peacefully in February 2021 at the age of 91. Looking after my mother for the past decade was my way of repaying her for everything she had done for me. I am grateful to have had the chance to take care of her till the very end.

“Mdm Kengeamal has a never-give-up attitude. She often reached out to therapists, social workers and care staff to gain insights and caregiving knowledge to better look after her mother. She prioritised her mother's well-being above her own without asking for any recognition of her efforts.”

Evon Li Huijing
Medical Social Worker
Psychosocial Department
Ren Ci Hospital



“As a caregiver, it is important to embrace the help offered by others, have adequate rest, and try to fit in some form of normalcy in your life.”

I have been a primary school teacher for the past 30 years and am married with two sons.

My younger son, Dominic (Dom), turned 23 last year. He is a gentle, loving and caring person with many friends.

Up until that fateful night, Dom was pursuing a double major in Psychology and Organisational Behaviour & Human Resources at a local university. He had also just commenced his internship at the Singapore Boys' Home – something he believed would bring him closer to his passion of helping troubled youths get back on their feet.

I remember distinctly that it was Father's Day, 21 June 2020. Looking back, I am glad that we had enjoyed quality time as a family that day.

After dinner, Dom went over to a friend's place. As I was getting ready for bed, my husband received a phone call that Dom had collapsed after complaining of a sudden and severe headache.

We rushed over and sent Dom to the hospital immediately. At the hospital, we were told that Dom had massive bleeding in his brain and required immediate surgery. There was a possibility that he would not make it through the grueling operation. We kept vigil at the hospital and prayed hard. It was one of the worst nights of my life.

To our relief, Dom managed to pull through! However, he was in a coma for three weeks and after that, has remained in an unawakened state. The doctors were on the lookout for purposeful responses to verbal directions but there were none. Much later, we were told that Dom had an arteriovenous malformation, which is a condition where there is an abnormal flow of blood between a mass of his arteries and veins. The bleeding led to severe damage to his brainstem.

Mdm Sarah Jane Lee

Full-time Caregiver

After spending eight months at Sengkang General Hospital (SKH), we decided to bring him home. Since his collapse, I have been on unpaid leave

so that I can be his main caregiver.

We were told that Dom's hearing was affected by the arteriovenous malformation. However, we still talk to him and let him listen to music and online Mass sessions, believing that our words and efforts will still reach him, and that he can be back to his normal self again one day. Many different medical professionals have worked with us on Dom's care. Of the many was his speech therapist who had helped us with taking care of Dom's tracheostomy and his airways, all in the hope that Dom will be able to breathe normally again one day.

I am coping better these days, although I still get bouts of sadness. As a caregiver, it is important to embrace the help offered by others, have adequate rest, and try to fit in some form of normalcy in my life. I used to go for walks on my own, so I still make time for them regularly. I also found an outlet to express my sadness and frustrations in a healthy way without venting excessively to family and friends, and that is by sending voice and text messages to myself. Being able to talk through my emotions makes me feel a lot lighter.

I wish to express my gratitude to the staff at SKH. Their love, patience and level of care for Dom have opened my eyes to the wonderful work that our healthcare heroes are doing each day.

Lastly, by sharing my story, I hope to honour all the caregivers out there who each have a unique story to share. Regardless of background and circumstances, every individual will face different personal struggles. Yet, not everyone will receive the great support I have nor the chance to share their story. I am, hence, very grateful.

“When faced with the unknown, Mdm Lee and her husband remain firm in their dedication to their son and have unwavering faith in his recovery.”

Goh Huai Zhi

Senior Speech Therapist
Sengkang General Hospital



“When taking care of end-of-life patients, we must bear in mind that what they want is more important than what we want for them.”

Leading to the year 2019, my wife and I, with blessings from my parents, persistently persuaded my father-in-law to move in with us as he had suffered many falls. He was ill at that time with venous leg ulcers, congestive heart failure, diabetes and kidney disease. We felt that he needed closer attention and care.

Trained as a medic during my National Service, I was equipped with basic wound care knowledge, and could clean and dress his leg ulcers regularly. Unfortunately, despite my best efforts, they were not healing well. Determined to find him some reprieve, I scoured medical journals for a solution and came across some articles that recommended silver dressing for wounds. The antibacterial quality of the silver dressing enabled his wounds to heal well for some time.

However, in 2020, we were dealt another blow when my father-in-law was diagnosed with dementia. We wasted no time in fitting my home with geriatric equipment such as a geriatric chair and commodes, and sought dietary advice from a dietitian. We even engaged a physiotherapist to show us the way to move my father-in-law between the bed and chair, and the exercises he should do regularly.

My friend, who is a doctor, once told me this, “When we take care of end-of-life patients, we must bear in mind that what they want is more important than what we want for them.” With this philosophy in mind, I focus on keeping my 85-year-old father-in-law happy and respect his wishes, instead of imposing my own beliefs on him.

Mr Steven Chan

Event Organiser

He is a man of few words, but I often engage him with jokes and play games using old photos to jog his memory.

Sometimes I will suddenly appear in front of him and ask if he recognises me. I love hearing his hearty laughter fill the room!

My wife, helper and mother-in-law also help to take on the caregiving responsibilities, so that all of us have time for ourselves and not burn out.


I admire the professionalism displayed by the vascular team at the Singapore General Hospital, who takes care of my father-in-law’s chronic leg ulcer. They have been very patient with my questions and take time to clarify any doubts I might have. On days when I was not able to be at the hospital, they would take pictures of his wound and contact me on my mobile phone to pass me specific instructions or to highlight areas I needed to take care of. Their constant guidance made it easier for me to make informed health decisions for my father-in-law. Their affirmation and assurance also gave me the strength to continue this journey of caring for my father-in-law.

This journey has reinforced my belief that family comes first. I believe every family member has a role to play in taking care of our loved ones. We should stop saying that we don’t know what to do, but rather ask what we can do. I hope the COVID-19 pandemic will pass soon, so that we can regain normalcy to our lives, and have more time to focus on family bonding.

“Mr Chan’s selflessness in looking after his father-in-law and his resilience in the face of additional nursing care challenges has touched my heart.”

Tan Wei Xian

Nurse Clinician, Speciality Nursing (Vascular Care)
Singapore General Hospital

A photograph of two men, Mr Tan Lai Hock and Mr Lim Chong Khim, standing next to a dark red car. Mr Tan Lai Hock is on the left, wearing a white polo shirt, khaki pants, and a light blue face mask, with his arms crossed. Mr Lim Chong Khim is sitting in the driver's seat of the car, wearing a light blue short-sleeved shirt, shorts, and a light blue face mask. The car has several colorful sticky notes (yellow, orange, red, black) on its side. The background shows a building and a palm tree.

“I believe that kindness begets kindness, so we should try to do good while we can.”

Mr Tan Lai Hock (left) with Mr Lim Chong Khim

I have been a taxi driver for five years and 85-year-old Mr Lim Chong Khim is my regular passenger.

We met three years ago when he called for a taxi and I picked up his booking. When we reached his destination, he asked if I could wait for him to finish his errand and send him home. I agreed because I was not in a hurry and sympathised with him as he had difficulties walking.

On the ride back, Mr Lim shared that he lives alone in his rental flat, and asked if I could assist him on his regular errands and ferry him to his medical appointments. I thought about it and agreed.

From then on, Mr Lim would call me whenever he needs help. I know his routine well by now. About once or twice a month, I will accompany him to the bank, to get a haircut and to buy groceries. Each trip can take up to three to four hours because Mr Lim is not able to move quickly due to osteoarthritis. I have asked him to get a wheelchair which he had declined many times.

Whenever Mr Lim has a medical appointment, I will accompany him as well. After driving him

Mr Tan Lai Hock

Taxi Driver

there, I wait with him in the clinic till we have collected his medications. Each medical appointment can

take up to four or five hours. I will also help him with translations as he only speaks Mandarin and Hokkien, and has trouble communicating with the nurses or doctors.

Mr Lim does not share much about himself or his life, but I have come to understand his needs. Sometimes, when he has special requests such as cravings for fried Hong Kong noodles, Tiong Bahru Pau or fried carrot cake, he will call me to ask if I could buy them for him. Every Lunar New Year, he will want a carton of Mandarin oranges, as well as a specific brand of chocolates which is not easily available.

Today, I am happy that Mr Lim has accepted the offer to get a wheelchair. With the wheelchair, it is much easier for me to fetch and bring Mr Lim around for his monthly errands.

My philosophy in life is very simple: I believe that kindness begets kindness, so we should try to do good while we can. I do not think that what I do for Mr Lim is extraordinary. However, Mr Lim once said to me: "I'm very lucky to have met you."

"I often see patients coming alone for their appointments because their caregivers are too busy to accompany them. It is selfless of Mr Tan to sacrifice his time and income to help Mr Lim. I was overwhelmed by his kindness towards a fellow human being."

Lakshmanasamudram S Mohanram

Ophthalmic Investigation Specialist
Singapore National Eye Centre



“We hope to create many happy memories with our Mum and look forward to the day when our big family can reunite while she is still alive.”

(Clockwise from far left) Mdm Guan Sow Meng Mavis, Mdm Guan Saw Lye Joyce, Mdm Guan Saw Foon Josephine and Mdm Guan Siew Hong Emma, with their mother

**Mdm Guan Saw
Foon Josephine**

Customer Service Executive

**Mdm Guan Saw
Lye Joyce**

Salesperson

**Mdm Guan Sow
Meng Mavis**

Salesperson

**Mdm Guan Siew
Hong Emma**

Salesperson

Our fondest childhood memories are of us growing up in a kampung in Tai Seng – playing hide-and-seek and going on rickshaw rides. But life was tough for our Mum back then. When our father left us in 1971, the responsibility of raising 12 children was thrust upon her.

In the 1990s, Mum became ill with diabetes and hypertension and was hospitalised several times for cardiac failure. Our other siblings had become estranged from us by then, so the four of us banded together to ensure that Mum’s needs were cared for.

As Mum lives alone and requires help to move around, we hired a domestic helper for her while we worked and supported her financially. We also set up CCTV cameras in her home to monitor her safety. We would frequently rush down at a moment’s notice to mediate conflicts between her and the helper because Mum mainly only speaks Cantonese and suffers from severe hearing loss. We use a combination of hand gestures, writing and speaking loudly to communicate with her.

Upset at having to be reliant on others, Mum would often vent her frustrations on us. Arguments would also ensue if we tried to control her diet. Instead of giving up, we would patiently take these outbursts in our stride and do our best to empathise with her.

The four of us would meet regularly for meals and have heart-to-heart talks. Through these gatherings, we find renewed strength and motivation to give Mum our best.

The restrictions on new foreign domestic workers because of COVID-19 threw a curveball at us when her helper’s contract expired in 2020. Moving our wheelchair-bound, 75kg mother to and from our respective residences was no easy feat at our age. So we rostered ourselves to stay with her at her home – two of us in the day and two at night – to ensure she had round-the-clock care until the new helper arrived.

We also worked with her physician of 30 years, Dr Tan Ngiap Chuan from SingHealth Polyclinics, and the Agency of Integrated Care (AIC), to enrol Mum in NTUC Health’s Senior Day Care (Silver Circle) at Bedok. Mum enjoyed spending time and mingling with her peers before the new helper arrived.

Our efforts were not in vain. Mum, who turns 94 this year, is in better health than before. Her diabetes has improved and she only needs insulin injections once a day now, as compared to thrice a day in the past.

We hope to create many happy memories with Mum and look forward to the day when our big family can reunite while she is still alive.

“The love and devotion these four daughters show their mother is the embodiment of filial piety. Their commitment to ensure that their mother lives happily, comfortably and safely is most admirable.”

Dr Tan Ngiap Chuan

Family Physician, Senior Consultant
Director, Research
SingHealth Polyclinics

The background features a light blue watercolor wash. Overlaid on this are several overlapping, tilted rectangular frames in various colors: purple, orange, green, and red. The text is centered within these frames.

INSPIRATIONAL
*Patient
Support Groups*



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Parkinson
Disease
Support Group



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Haematopoietic
Cell Therapy
and Transplant
Programme Peer
Support Group



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Support Group



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Liver and
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Support Group



“It is heartening to see that, for some members, our meetings have become bonding sessions for them to make friends and offer mutual support.”

Ms Chua Shu Ting
Senior Staff Nurse
National Neuroscience Institute

Parkinson Disease (PD) is a neurodegenerative disease that leads to shaking, stiffness and difficulty with walking and balance, and gets worse over time. As PD patients generally require long-term medical follow-up and support as their conditions progress, the National Neuroscience Institute (NNI) started a patient support group in 2004 to offer patients and their caregivers a social network and to share resources.

Before the COVID-19 pandemic, the group held monthly sessions at NNI where members could attend talks, have their questions answered by healthcare professionals and share their experiences with others. Topics covered during the sessions range from advice on nutrition and mental well-being to administrative matters such as advance care planning and Lasting Power of Attorney. Currently, the group meets regularly online for talks over Zoom sessions.

The sessions are conducted in English and Mandarin and usually start with warm-up sessions led by physiotherapists or nurses, as exercise is known to help PD patients. They also feature other activities such as dance and music therapy to help PD patients improve their speech and movement abilities.

Beyond patient activities, the sessions give healthcare professionals a chance to observe how members are doing. “During our interaction with the members, the healthcare team would take note of patients who require help, such as in making adjustments to their medication doses or getting referrals to community care services. We then follow up and help to reduce the patients’ healthcare burden,” explained Senior Staff Nurse Chua Shu Ting, who is one of the coordinators of the support group. “It is also heartening to see that, for some members, our meetings have given them the opportunity to make friends and offer mutual support.”

Parkinson Disease Support Group

National Neuroscience Institute

Mdm Lan has been a member of the support group since 2007, when she was diagnosed with PD. She had joined a tai chi class after her diagnosis, and met a friend who also had PD, who invited her to join the support group.

“I found many new friends through the support group,” Mdm Lan shared. “We can share about our symptoms and encourage one another because we all have first-hand experience on the difficulties of the condition.”

Being able to listen to experiences of others have helped the support group members in their own journey with PD. For example, patient-led discussions on treatments such as Deep Brain Stimulation Surgery (DBS) have been instrumental in creating awareness of the procedure and improving patients’ understanding of its benefits, giving them more confidence to undergo the procedure. DBS is typically performed on PD patients whose conditions have progressed such that medication alone is no longer able to adequately control their motor symptoms.


During DBS, electrodes are implanted into the brain so that electrical pulses can stimulate the brain. The surgery is usually carried out when patients are awake and able to respond to the surgeon’s instructions. Many patients have found this idea very daunting.

“Hearing from a fellow PD warrior, which is what we call our members, on their experience before and after DBS is very different from learning about it from healthcare professionals. We hope that more patients will come forward to share their DBS experience to help other patients overcome their fears and anxieties about the procedure,” shared Ms Ng Hwee Lan, Nurse Clinician at NNI.

“The Parkinson Disease Support Group has allowed PD warriors and their families to gain insight and learn coping strategies on disease management. By sharing their experiences, PD warriors are better able to manage their conditions and improve their quality of life.”

Prof Louis Tan Chew Seng

Senior Consultant
National Neuroscience Institute



“We help patients undergoing a blood stem cell transplant or immune cell therapy deal with their emotions, the side effects from their treatment and be their source of comfort because we have walked in their shoes.”

Mr Sam Vijaya

Former Transplant Recipient and
Core Organising Committee Member
HCTTP Peer Support Group

For patients about to undergo a Haematopoietic Stem Cell transplant, the road ahead can be daunting. The transplant, which is a procedure where healthy blood stem cells are transplanted to treat certain types of cancer or blood and immune diseases, comprises various complex steps. These may include the search for a donor, pre-transplant treatment, stem cell collection, the transplant itself, as well as management of various post-transplant complications.

To ensure that patients receive the support they need, transplant coordinators and medical social workers from the Haematopoietic Cell Therapy and Transplant Programme (HCTTP) of the Department of Haematology at the Singapore General Hospital (SGH), together with transplant recipients, formed the HCTTP Peer Support Group in 2019.

Since then, things have come full circle for 14 such recipients, who received training as peer supporters and would share their experiences with patients going through such transplants. “We help patients undergoing a blood stem cell transplant or immune cell therapy deal with their emotions, the side effects from their treatment and be their source of comfort because we have walked in their shoes,” shared Mr Sam Vijaya, a former transplant recipient and a core organising committee member.

Having expanded its scope to include new cell therapies, such as chimeric antigen receptor (CAR) T-cell therapy in 2021, the HCTTP saw an increase in demand for peer supporters. Ms Lee Jing Jing, SGH Senior Clinical Transplant Manager and support group representative, explained, “Even though we have 14 peer supporters now, our immediate goal is to recruit and train

Haematopoietic Cell Therapy and Transplant Programme Peer Support Group

Singapore General Hospital

more of them because, with new cell therapies offered, we have even more patients requesting support.”

The peer supporters either meet with patients in person or talk to them over the phone to offer support and encouragement throughout

their transplant journey.

Other than assisting the patients, the group also raises awareness about HCTTP and the support they render. They designed publicity posters which were put up within SGH, and made presentations to transplant physicians and medical professionals at multidisciplinary transplant rounds to encourage them to refer their patients to the support group, especially if those patients wanted to speak with someone who had gone through a similar experience. With COVID-19 restrictions, the peer supporters currently meet once a month virtually to discuss new initiatives and delve deeper into issues such as recruitment and training to create a more valuable patient experience.

This experience has been extremely rewarding for the peer supporters. “There is a lot of satisfaction from seeing patients complete their treatment and transition into normal life, and from knowing that we had a part to play in their journey,” Mr Vijaya shared.

The positive feedback from patients is further testament to the group’s efforts. “It has been very heartening to hear patients express their gratitude and witness the dedication shown by our peer supporters,” shared Ms Kathleen Cheung, an SGH medical social worker who trains peer supporters.

Motivated by the group’s impact, Ms Cheung added, “We hope to extend our services to patients from other hospitals in future so that they too, can receive the support they need.”

“Since its inception, the group has been selfless in sacrificing their time to support and comfort pre-HCTTP patients. Their altruism and dedication are truly exemplary.”

Assoc Prof Aloysius Ho Yew Leng

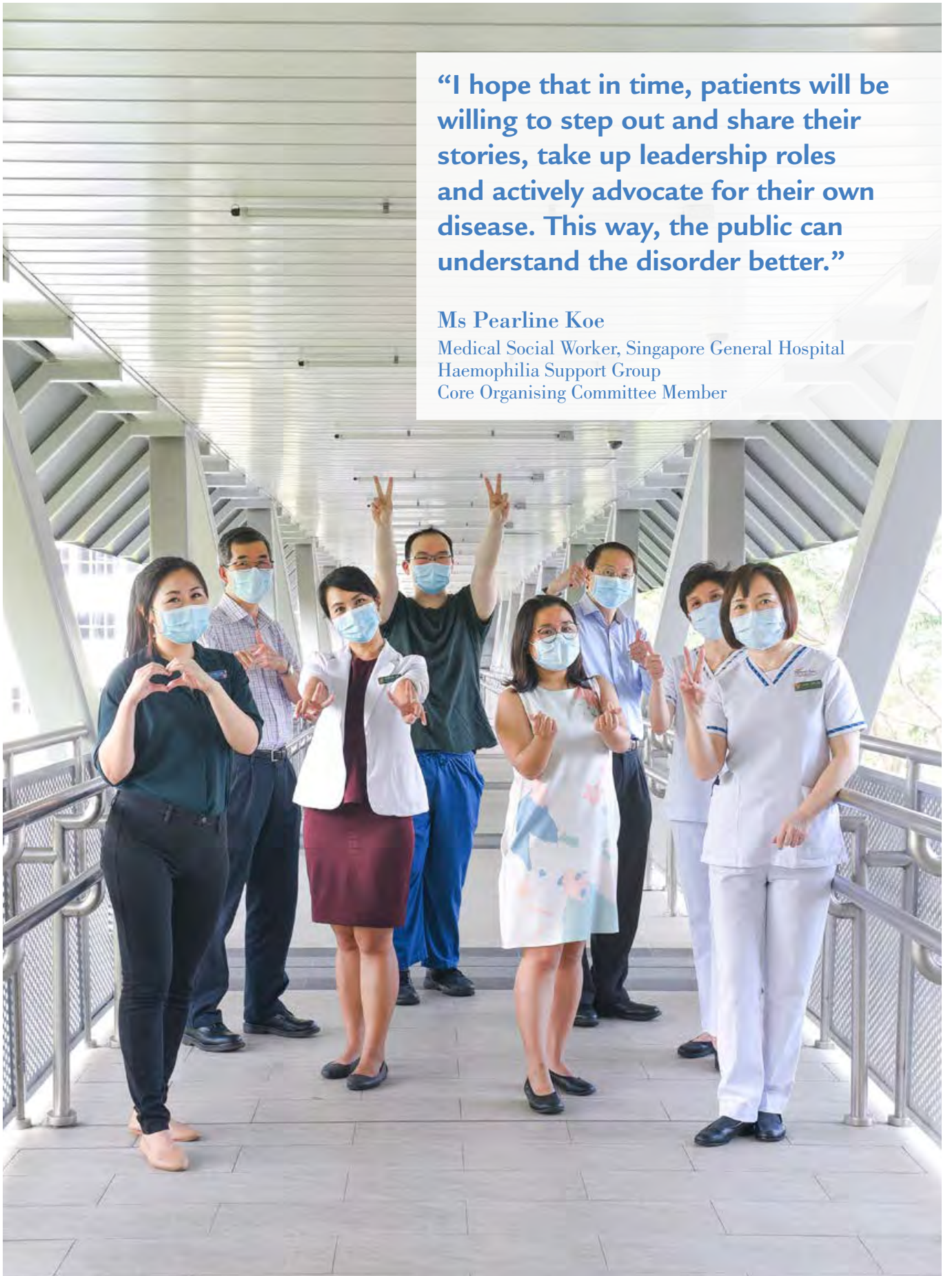
Senior Consultant & Programme Director

Haematopoietic Stem Cell Transplant Programme, Department of Haematology
Singapore General Hospital

“I hope that in time, patients will be willing to step out and share their stories, take up leadership roles and actively advocate for their own disease. This way, the public can understand the disorder better.”

Ms Pearlline Koe

Medical Social Worker, Singapore General Hospital
Haemophilia Support Group
Core Organising Committee Member



In Singapore, about one in 10,000 babies are born with haemophilia, a rare inherited bleeding disorder where blood does not clot properly. People with haemophilia are at risk of internal bleeding from physically demanding activities, contact sports injuries or minor surgeries like dental work. Such internal bleeding can be potentially life-threatening.

To manage this lifelong condition, haemophiliacs have to be injected with clotting agents regularly to prevent excessive bleeding. With consistent and proper treatment, they can live normal, full and active lives.

However, haemophilia can take an emotional toll on patients. Ms Yeap Shin Yen, Nurse Clinician at the Singapore General Hospital (SGH) and one of the coordinators of the Haemophilia Support Group (HSG), explained, “One of the biggest challenges for haemophilia patients is that they feel they can’t lead fulfilling lives. Some may face discrimination by potential employers who see their illness as a liability. Others are reluctant to start a family as they are worried about passing on the genes to their children. The financial burden of their treatment is also very heavy.”

Providing social and psychological support beyond clinical treatment is thus a crucial part of haemophilia treatment. In 2006, the HSG was started with this mission in mind. The group currently serves 48 patients ranging from 21 to 74 years old and is supported by a multidisciplinary team of doctors, nurses, physiotherapists and medical social workers. The team collaborate to provide clinical care, emotional support as well as financial and genetic counselling to its members.

Haemophilia Support Group

Singapore General Hospital

As part of patient engagement, HSG organises two events a year – an educational seminar in April and a social event in December. These events

share up-to-date information about the condition through talks by invited speakers, and provide opportunities for mingling among the patients.

Many members saw their quality of life improve after intervention by the HSG. One of them is 58-year-old Mr Sum Yew Seng. When Mr Sum was younger, preventive treatment was not yet available and he suffered crippling and painful joint damage as a result. Taking public transport was particularly stressful for him as he was unable to bend his knees when he sat down. His extended legs often attracted unkind remarks from other commuters who were not aware of his medical condition.

With the HSG’s encouragement and help, Mr Sum underwent hip and knee replacements in 2019. Today, he is able to walk without pain or difficulty.

For medical social worker Ms Pearline Koe, encountering such personal stories of resilience has helped her understand the struggles haemophilia patients face. She is inspired by the younger generation of patients she has met, one of whom even took part in the local Manhunt competition in the hope of projecting a healthy image of haemophilia.

“I hope that in time, patients will be willing to step out and share their stories, take up leadership roles and actively advocate for their own disease. This way, the public can understand the disorder better,” she said.

“We learn from our patients and caregivers, and that makes us better at caring for them.”

Zhang Xiao

Assistant Nurse Clinician
Haematology
Singapore General Hospital

“It is encouraging to see how the patients motivate one another in the chat group, and how forthcoming and helpful they are in dispensing advice.”

Ms Julianah Bee D/O Abdul Latiff

Senior Programme Coordinator,
Department of Hepatopancreatobiliary/
Transplant Surgery
Singapore General Hospital
Liver and Pancreas Support Group Leader



Having witnessed the positive impact of patient support groups during her attachments in New York and Texas, Ms Julianah Bee D/O Abdul Latiff, Senior Programme Coordinator at the Singapore General Hospital (SGH), was inspired to start a similar one for patients with liver and pancreatic diseases. Together with Dr Peter Mack, Senior Consultant, SGH and five other colleagues from the Department of Hepatopancreatobiliary/Transplant Surgery, Medical Social Services, Nursing Division, and Department of Psychology, they started the Liver and Pancreas Support Group (LPSG) in 2017.

“We wanted to share with our patients coping strategies while providing psychosocial support that is crucial to their treatment,” shared Ms Julianah, who is the leader of the core organising committee.

Since its inception, the group has organised group therapy sessions like art, yoga, healthy cooking and educational sharing sessions, and published quarterly e-newsletters to create an enriching patient experience for its 35 active members.

Beyond the programmes it offers, the LPSG has collaborated with other patient support groups in SGH to organise activities such as art expression and narrative workshops. Through their initiatives, the liver support groups at Changi General Hospital (CGH) and Sengkang General Hospital (SKH) have since joined them in a combined effort to expand their membership.

Liver and Pancreas Support Group

Singapore General Hospital

In 2018, the group launched an art exhibition to showcase 15 pieces of linen crafts designed by LPSG patients at SGH to empower and build public awareness on the condition.

Despite being unable to meet in-person in 2020 due to COVID-19, the group conducted a total of 13 virtual educational talks and workshops via Zoom, and plans to continue with its monthly engagements virtually this year.

A WhatsApp chat group that was started in 2019 by one of its members, Mr James Lau also played a key role in helping patients stay in touch amid the pandemic. Mr Lau has written books on his 20-year cancer journey and is a great inspiration to the group. Fellow member, Mrs Cecilia Kong, also shared valuable experiences as a caregiver for her husband, who has liver cancer. She received the Inspirational Caregiver Award in 2018.

“It is encouraging to see how the patients motivate one another in the chat group, and how forthcoming and helpful they are in dispensing advice,” shared Ms Julianah, who hopes that this positive impact can be extended to more patients. As such, the group is continuously recruiting through word of mouth and publicity posters placed at SGH clinics and wards.

“We want to reach out to as many patients as we can and let them know that they are not alone in this journey.”

“Since it started in 2017, the LPSG has thoughtfully designed programmes to ensure that patients feel empowered and have a sense of belonging with the group throughout their treatment journey.”

Dian Handayani

Senior Art Therapist
Department of Psychology
Singapore General Hospital





