WECARE - a synergistic partnership towards preventive medical care for elders

A two-year medical care pilot study on the prevention of disabilities among community-dwelling older persons was initiated in 2010, in a partnership between the Tsao Foundation and the Tan Chin Tuan Foundation. Known as WECARE (Working to Enhance the Care and Resilience of Elders), the study is due for completion in January 2014.

Aligned with the causes of both foundations, the collaboration seeks to share the results of the study with policy makers and health practitioners so as to improve the system of care for disadvantaged elders with health conditions. It is also hoped that this foundation-to-foundation effort will encourage similar partnerships for the public good.

WECARE sets to define the components of medical care in a model of primary care, as practised at Hua Mei Clinic - one of 6 services under the Hua Mei Centre for Successful Ageing, Tsao Foundation's service arm.

The integrated, multi-disciplinary model is designed to address the complex medical and psycho-social needs of an aged population. Central to this model is an emphasis on prevention of disability through early detection and age/disease specific interventions before complications develop. The model is compatible with the World Health Organisation's definition of health, which frames it as a state of complete physical, mental and social well-being, rather than the mere absence of disease or infirmity.

Global disease burden has shifted away from communicable to non-communicable diseases and from premature death (mortality) to years lived with disability (disability adjusted life years (DALYs)). Unfortunately, primary healthcare as practised in Singapore, tend to be episodic, fragmented and does not adequately address the complexities of psycho-social problems. The study aims to address some of these areas and contribute towards an improved comprehensive system of primary healthcare in Singapore.

*One DALY can be thought of as one lost year of "healthy" life. Key contributors to an increase in DALY are depression, osteoporosis and frailty.*