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| **Delivering health programmes to hard-to-reach older workers on a large scale through the 4R approach** |
| **Maximum 2500 characters (including spaces but excluding title)**  **Setting/problem**  The workplace is a key setting for health promotion in Singapore where labour force participation rate (aged 15 and over) is 67.7% (Labour Force, Singapore 2017 Report). Recognising that Singaporeans spend long hours at work (about 43.2 hours on average), the Health Promotion Board, Singapore (HPB) partnered business space owners and companies to turn workplaces into healthy ecosystems. Through structured health programmes, HPB reached out to 250,000 workers from 2014 to 2017.  However, workers in industries such as transport and cleaning, who made up about 21.1% or 459,000 of the workforce had poor access to these structured programmes, as they either worked off-site or in shifts. 73.6% of these workers were aged 40 and above, and had a higher prevalence of chronic diseases than the general population (Singapore National Health Survey 2010). Hence, it was important to customise health programmes to help older workers in these industries.  **Intervention**  HPB developed an industry-specific approach comprising 4 ‘R’s: a) Right siting; b) Right timing; c) Relevant and customised health programmes; and d) Rapid scale-up. The approach was implemented in partnership with key stakeholders such as companies, unions and workers. The 4R approach was piloted in the transport industry. Health screening and coaching were brought to places that were convenient for the target audience, sometimes even at unconventional settings (e.g. taxi servicing centres for taxi drivers) and timings (e.g. 4 am for bus drivers at bus depot). Once tested, the model was rapidly scaled up and implemented in other sectors.  **Outcomes**  In the pilot project for taxi and bus drivers in 2014, 50% of the 3,000 drivers screened found that they had chronic diseases. After completing the pilot a year later, 50% of those with abnormal screening results improved in at least one chronic condition. Further, 1 in 4 workers with abnormal health status returned to normal health status.  Through rapid scale-up, health programmes implemented through the 4R approach have impacted more than 44,000 under-served older workers across 7 key sectors with higher proportion of older workers: a) transport and logistics; b) cleaning; c) security; d) education; e) food and beverage; f) healthcare; and g) retail.  **Implications**  The early results of the 4R approach demonstrate the feasibility of providing targeted and customised health programmes on a large scale, thereby empowering workers with the health literacy and skills to take charge of his or her health.  **Preferred presentation format**  Oral or Poster Presentation |