|  |
| --- |
| **Bringing health to your doorstep - Increasing the community-dwelling older adults’ health knowledge and eliciting positive health behavioural changes via a roving health team.** |
| **Background/Objective**It is estimated that by 2030, 1 in 4 Singapore citizens will be over the age of 65. An ageing population will result in an increased burden of non-communicable diseases such as diabetes and etc. As of 2010, 3 in 4 older adults did not consume enough calcium and 6 in 10 had insufficient physical activity. Lifestyle interventions have been shown to improve chronic conditions and currently there is a lack of lifestyle interventions for community-dwelling older adults (CDOA). One approach is to bring practical health messages to them. The Healthy Lifestyle Centre (HLC) comprising of certified allied health professionals was formed in December 2012. HLC brought practical healthy lifestyle workshops to the CDOA in the Southwest region. The aim was to increase their health knowledge and encourage them to have adopt healthy lifestyle habits. The pilot ran till 31 March 2015 at 20 sites. **Methods**Recruitment platforms: Community clubs, screening events and senior activity centres. Programme: Each site had a minimum of 6 health-related workshops that covered three main pillars of health; nutrition, physical activity and mental well-being and one-on-one consultations upon request. An hour’s workshop with health messages (awareness), practical tips (for behavioural change) and call-to-action were included. Evaluation: Self-reported survey forms and qualitative feedback. **Results** 1,341 individuals. 77.2% cited an increase in health knowledge and 93.1% stated having had an intention to/had a positive health behavioural change after attending the programme. Qualitative data showed that the common behavioural changes were increased fruits, vegetables, whole grains consumption, duration of exercises, improvement in mood and greater confidence in reaching health goals. **Discussion**The programme relied on self-reported intention to make changes to existing behaviours, as well as any form of actual health behaviour change. Although this method of evaluation may not be as robust in measuring impact, it was considered the most appropriate for the target audience as most of them had lower education levels (primary school and under) or were illiterate. The program was successful in increasing the CDOA’s health knowledge and had also elicited positive health behavioral changes. Following the pilot, the program was incorporated in the national Senior’s Health Curriculum in mid-2016. As of December 2017, 1,245 sessions were conducted nationwide and 22,221 older adults benefited from the curriculum.  |