

**OLDER
WOMEN'S
RESPONSES
TO THE WHITE
PAPER ON
SINGAPORE
WOMEN'S
DEVELOPMENT**

BY



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EXECUTIVE SUMMARY

This report is the product of the first societal review on the Singapore Government's White Paper on Singapore Women's Development ("White Paper"); which focuses on views and insights from older women. In September 2020, a year-long campaign comprising nationwide conversations on Singapore Women's Development, was mooted to gather Singaporeans' views and chart the way forward. Responses and ideas from the conversations contributed to the White Paper, which sets out 25 collective action plans in the following five key areas:

1 EQUAL OPPORTUNITIES IN THE WORKPLACE

STRENGTHEN WORKPLACE FAIRNESS, ENABLE MORE WOMEN TO PARTICIPATE MORE FULLY IN THE WORKPLACE AND FACILITATE INCREASED WOMEN'S REPRESENTATION IN LEADERSHIP ROLES.

2 RECOGNITION & SUPPORT FOR CAREGIVERS

RECOGNISE CAREGIVERS' CONTRIBUTIONS AND SUPPORT THEIR EFFORTS AND CARING FOR THE WELL-BEING OF CAREGIVERS AS A SOCIETY.

3 PROTECTION AGAINST VIOLENCE AND HARM

TAKING A STRONG STANCE AGAINST VIOLENCE AND HARM, REINFORCING A CULTURE OF SAFETY AND RESPECT IN SOCIETY.

4 OTHER SUPPORT MEASURES FOR WOMEN

ENHANCE SUPPORT FOR SINGLE PARENTS, DIVORCING/DIVORCED WOMEN, AND LOW-INCOME FAMILIES WITH CHILDREN AND GIVE WOMEN A CHOICE TO UNDERGO ELECTIVE EGG FREEZING.

5 MINDSET SHIFTS

ADDRESSING GENDER STEREOTYPES THROUGH UPDATED WOMEN'S CHARTER, CHARACTER AND CITIZENSHIP EDUCATION (CCE) CURRICULUM, SETTING GENDER RESPONSIVE STANDARDS UNDER THE SINGAPORE STANDARDISATION PROGRAMME

As the Singapore Alliance for Women in Ageing (SAWA) celebrated this historic move towards gender equality, we noticed gaps within the White Paper's action plans, a glaring one being the lack of attention paid to the challenges faced by older women. Recognising that these older women have different needs and priorities from their younger counterparts, SAWA organised a forum involving women aged 55 years and above, to seek their views on the White Paper and build greater understanding on older women's issues and challenges.

The report is segmented into four parts, as follows:

Part I introduces SAWA and its members, the background and objectives of the report and the methodology for collecting the qualitative data presented. Four focus group discussions (FGDs) were held between July 2022 and February 2023 with 170 participants in total. Every FGD was conducted in a different language – English, Malay, Mandarin, and Tamil.

Part III tackles the needs and concerns of older women outlined in the five themes with correlating sets of recommendations.

Part II provides an analysis of the data collected from the FGDs. SAWA identified five main themes relating to the challenges faced by older women. The themes are (1) Workplace (2) Caregiving (3) Retirement Adequacy (4) Health and Well-being, and (5) Community Support and Outreach.

Part IV outlines future research directions relating to the needs of older women across Singapore's diverse communities.

¹ www.msf.gov.sg/what-we-do/celebrating-sg-women/white-paper-on-singapore-womens-development

PART I: INTRODUCTION

ABOUT SAWA AND ITS MEMBERS

The **Singapore Alliance for Women in Ageing (SAWA)** is an alliance of organisations that promotes the independence, care, participation, dignity, and self-fulfilment of older women. A coalition of four local organisations, SAWA comprises the Association of Women for Action and Research (AWARE), the Singapore Muslim Women's Association (PPIS), the Singapore Council of Women's Organisations (SCWO) and the Tsao Foundation.

AWARE is Singapore's leading women's rights and gender-equality advocacy group. It was founded in 1985 and works to identify and eliminate gender-based barriers through research, advocacy, education, training, and support services. AWARE embraces diversity, respects the individual and the choices she makes in life, and supports her when needed.

Persatuan Pemudi Islam Singapura (PPIS) is a non-profit organisation founded in 1952, which focuses on services for women, families, and children. It works with women of all ages in carrying out their multiple roles in society. PPIS runs three core community services namely; Family Services, Student Care and Early Childhood Education (ECE). With 17 centres island-wide including the newly opened Halfway House, the services work together to provide quality and holistic support as well as developmental programmes for women and their families across the different phases of their lives.

The Singapore Council of Women's Organisations (SCWO) was established in 1980 as the national coordinating body of women's organisations in Singapore. SCWO has more than 60 member organisations, which represent over 600,000 women, and it serves to unite them to work toward the ideals of 'Equal Space, Equal Voice and Equal Worth' for women in Singapore.

Tsao Foundation's vision is of an inclusive society for all ages that optimise opportunities for longevity. Established in Singapore in 1993, the goals of the non-profit family foundation are aligned with the MIPAA and WHO healthy ageing frameworks. Through four major initiatives – the Hua Mei Centre for Successful Ageing, Hua Mei Training Academy, International Longevity Centre Singapore and Community for Successful Ageing (ComSA) – the Tsao Foundation pioneers and provides community based, person-centred primary healthcare for adults aged 40 and above; builds capacity in professional and informal age care and self-care; fosters elder empowerment and community development; and initiates policy-relevant research and cross-sector partnerships in its advocacy for mindset and systemic change to actualise health, wellness and participation over the life course.

Established in 2018, **SAWA** aims to connect and galvanise organisations concerned about women and ageing to become subject matter experts and thought leaders. Moreover, it intends to impact decision-making strategically to ensure that older women maintain independence and dignity, leading fulfilling lives.

See **Annex A** for the list of SAWA member representatives.

BACKGROUND

When the Singapore Government released its White Paper on Singapore Women’s Development (“White Paper”) in March 2022, SAWA noted its action plans had focused on the younger working women and did not include targeted policies or initiatives that protect older women against discrimination in workplaces or offer adequate support for senior/older caregivers.

Thus, it became clear to SAWA that older women require a platform to be heard, where their needs and concerns could be raised directly and consistently from the ground – through conversations and consultations. In other words, older women need to speak up for themselves in more safe, public spaces to share and represent their specific thoughts, needs and concerns.

Hence, SAWA decided to embark on a research project to address this lack of focus on older women in the White Paper. Given Singapore’s ageing population, the proportion of women in this age group will grow rapidly within the next ten years, and hence, their needs must be adequately addressed.

As stipulated in the Senior Citizen Act of Singapore, senior citizens are those who are at least 60 years, but for the purpose of the forum, SAWA had decided to extend the age range to include those aged 55 years and above, to acquire more current and wider range of lived experiences of ageism in the workplace.

RESEARCH PLAN

Four focus group discussions (FGDs) were held between July 2022 and February 2023 with 170 participants in total. Every FGD was conducted in a different language – English, Malay, Mandarin, and Tamil – to ensure participants felt comfortable expressing their thoughts. True to the spirit of working closely with the social service agencies that serve the needs of their community on the ground, this study worked closely with SINDA² to conduct the FGDs on older women within the Tamil-speaking community.

RESEARCH PARTICIPANTS

The FGDs conducted for the English, Chinese, and Malay-speaking communities were conducted and facilitated by SAWA members. Participants were recruited by leveraging on the individual SAWA members’ databases and networks for outreach via, EDM marketing, social media or word-of-mouth. The pool of participants for the Tamil-speaking FGD was obtained through SINDA and Project SMILE³.

² www.sinda.org.sg

³ Project SMILE is a Singapore-based charity committed to empowering underprivileged women and helping them lead better lives. Funded by the SINDA Community Impact Fund, Project SMILE has been running weekly programmes for older women to foster learning, support and companionship in a close-knit community.

RESEARCH METHODOLOGY - SEMI-STRUCTURED INTERVIEWS

The FGDs were first opened with a presentation of the White Paper and the action plans that were relevant to the group – Area 1: Equal Opportunities at the Workplace and Area 2: Recognition and Support for Caregivers. Participants were then split into smaller groups of 6 to 12 to discuss their thoughts and concerns on the White Paper and what they hope to see addressed concerning older women and their issues. The FGDs ended with a sharing by each group and an exchange of feedback and recommendations. The details of the FGDs are as follows:

DATE	FGD	ORGANISATION-IN-CHARGE	VENUE
17 June 2022	English	AWARE	SCWO Centre
	Malay	PPIS	SCWO Centre
11 October 2022	Mandarin	Tsao Foundation	Whampoa Community Centre
9 February 2023	Tamil	SCWO (in collaboration with SINDA)	PGP Hall

See **Annex B** for acknowledgements.



PART II: FINDINGS

Based on the qualitative information gathered from the participants, we have identified 5 main themes relating to the challenges faced by older women. The themes are (1) Workplace (2) Caregiving (3) Retirement Adequacy (4) Health and Well-being, and (5) Community Support and Outreach.

1. WORKPLACE

1.1. Older Women's Perceptions of Employer Stereotypes

Older women want to be considered and treated fairly based on merit and contribution. Most women across all the four FDGs highlighted they were often stereotyped as slow, less productive, and less adaptable. In addition, older women often feel less supported at the workplace as there was a lack of understanding of their needs due to the stereotypes and generation gaps between younger employees.

"Nowadays, younger people look down on us and do not want to be around us when we try to look for jobs. They feel that we are unsuitable because we seem to work slowly. This is different from us – we don't think this way about older workers when we are young. Hence, it is difficult for us due to our age."

- Participant in Mandarin session

Participants also expressed that discrimination in the workplace could not be easily defined and lacked clarity as it can be expressed indirectly such as not being cooperative or extending support to the individual.

"We have been encouraged to work longer but it is observed that promotion opportunities start earlier in one's career. At about 58 years old, we no longer receive promotions and job responsibilities might start to change or reduce. You are suddenly on your deceleration, and this demotivates the person to continue working up to 65 or 68 years old."

Life seems to stop moving forward for those reaching 58 years old. This type of treatment is not ideal. I feel that management needs to recognise that Singapore is a place where individuals will work longer."

- Participant in English session

In the FGD for Tamil-speaking older women, perceived language barriers and discrimination in terms of preference for use of certain languages at the workplace were expressed as the reality for some. The language and communication incongruity have also left them feeling disconnected from a sense of community and representation.

"Sometimes when they want to pass instruction, they say it in mandarin. I have to ask them again; to know what the instruction is. Sometime when I speak Tamil with customers, they will say Channel 5 please. So, I say you stop Channel 8."

- Participant in Tamil session

Furthermore, older women are looking for more representation in workplaces as some participants articulated the need for a union to support older women and be their voice to eradicate discrimination and defend fair protection on workplace issues including re-employment.

"It is good that a union is present to engage the company management to eradicate discrimination as HR is not strong. We can also seek the union's support in guidance and learn more information."

- Participant in English session

1.2. Enabling Workforce Participation

Older women experience challenges in balancing fulfilling caregiving responsibilities, taking care of their health and meeting the demands of work. They felt that workplaces should adopt inclusive and family-friendly practices which recognise their caregiving responsibilities and support active ageing.

“We are willing to work but I’ll ultimately prioritise my family first, so we need to be able to take leave on workdays. My daughter who is currently working told me that she is not willing to apply for leaves too often as well as no one can stand in for her if she does. We [senior women] have the pressure to take care of others too, so we should be able to do so.”

- Participant in English session

Some participants also shared that they should be able to apply for leave (without being penalised or dismissed by their employers) to go for medical appointments, check-ups, and treatments – which could result in their absence from work for an extended duration.

Older women are mindful that employers need to balance the opportunities for younger employees while being fair to older workers. A few women mentioned that the available work at their age was typically manual, and employers often did not understand their physical limitations for this type of work. Despite possessing valuable skills in other areas, some felt they were funnelled into menial work due to their age.

“They don’t consider our age or the limitation(s) we have when assigning jobs or roles.”

- Participant in Tamil session

Some older women suggested that more resources be invested in the creation of roles that proactively consider the physical exertion older women can realistically withstand, as compared to their younger colleagues. They understand that with any changes in the job scope, they would have to be prepared for potential salary adjustments.

2. CAREGIVING

2.1. Mindset of Older Women on Caregiving

Older women tend to place family as a priority. Some felt the need to take on the caregiving responsibility of their grandchildren to allow their children to focus on work. As a result, older women are constantly caring for the family, leaving minimal breathing space for themselves.

“Working mothers have their challenges. For the younger generation, it is still preferred for the working mother to do everything especially when it comes to children. That’s why the ageing group like us will need to support them if they still want to work, to share some of the responsibility. If the cost of hiring domestic helpers can be reduced, we would not have to be so involved.”

- Participant in Malay session

In addition, caregivers often bear significant emotional and financial costs. It was observed that older women are often the main caregivers of sick family members and/or elderly parents. Some even felt the pressure to fulfil caregiving and household responsibilities expected by elderly parents due to their incapacitated capabilities. Participants resonated that efforts/initiatives focusing on the welfare of caregivers, as well as easing caregiving and financial load, would offer them greater support.

2.2. Ease Caregivers’ Load

Older women acknowledge that the existing efforts and community care services available have provided support for their caregiving responsibilities. However, working caregivers suggested that day care services on weekends should be offered by more providers, so they could rest during weekends when they are not working.

In addition, older women feel that day care centres are not very culturally inclusive, and thus, may cause seniors from minority groups to feel out of place. Because of this, they hesitate to attend day care centres in an environment that is culturally unfamiliar.

“When we suggested for the elderly to go for services at the day care centre, they do not favour the idea because most of the attendees are of a different cultural background. As such the seniors do not feel connected with them and would not want to go.”

- Participant in Malay session

2.3. Reduce Caregivers' Financial Strain and Encourage Care in the Community

Participants shared that besides supporting their elderly parents financially and physically, they had to attend to their own medical needs too. Thus, they expressed that the increasing costs of caregiving and healthcare, as well as high inflation would add to their financial strain.

“When my mother was diagnosed with dementia, my children were studying for tertiary education, I had to take care of them while juggling my health. When her condition deteriorated, I had to engage a helper to look after and took care of my mother in every aspect including financially.”

- Participant in Malay session

Older women feel that the demographic of caregivers is evolving and that the eligibility criteria for healthcare and caregiving subsidies do not reflect this change. They worry that it will not be relevant in the new landscape if they do not undergo periodic reviews. In addition, they also expressed that current application processes for caregiving and healthcare subsidies are rather tedious and time-consuming.

“I had to do two jobs to keep us afloat while still sending the children to school and caring for the household. Some of us have to take care of our husbands (due to medical conditions etc).”

- Participant in Tamil session

As caregiving can be stressful, older women saw the importance of taking breaks for self-care, and hence, support and understanding from family members on caregiving arrangements are important. However, they are not familiar with the existing resources and community support available to help them cope with the emotional impacts of caregiving.

“I have 4 children and when one of them gets sick, I have had difficulties in applying for leave, since the employers will say that they don't have anyone to replace me and will not permit me to go on leave.”

- Participant in Tamil session

2.4. Support for Older Women Living Alone

As our society ages, there will be an increasing number of older women who live alone and are also caregivers to their family members. Thus, it would be paramount to address their needs and challenges. Unlike their family members, this group of older women might not have dependents who could take care of them when they become ill or as they age.

“It is a must for individuals to have some personal savings as they become older and prepare to retire, but it may be difficult for older singles who are not married and do not have children.”

- Participant in Mandarin session

3. RETIREMENT ADEQUACY

3.1. Challenges to Achieving Retirement Adequacy

Older women face challenges in achieving retirement adequacy given the rising healthcare and caregiving costs. With more women marrying and setting up families at a later age, more older women will eventually end up in the sandwiched class – simultaneously caring for children below 12 years old as well as family members aged 65 and above.

Besides caring for the family's day-to-day needs, they also must support their family financially. Older women of middle-income families could be subjected to more financial strains with lesser subsidies extended to them.

"My mother was hospitalised several times before she passed on. A substantial amount for her hospitalisation and medical treatment of about \$250,000 came from my savings. I wonder if I would be able to get the same treatment when I get old. How would caregivers be able to replenish their savings in time when we turn old?"

- Participant in English session

It was noted that older women exhibit some characteristics of the sandwiched class as they have to care for elderly or sick family members on top of their well-being. Some shared experiences as a working sole caregiver who had to leave the workforce due to caregiving responsibilities and shouldering financial burdens.

Such individuals would find it even more challenging to build up their retirement funds due to workplace discrimination. Additionally, as they will not have dependents to rely on physically and financially during their old age, financial and caregiving support as well as facilities need to evolve.

3.2. Proactive Retirement Planning

Most participants saw the value to be proactive in retirement planning. Besides setting aside finances needed to maintain a certain standard of living during retirement, planning on resources required for caregiving for family members and oneself, and health insurance to cover medical treatments and hospitalisation would be vital.

"I had cancer two years ago and had to go for chemotherapy weekly. Luckily, I had insurance which helped me a lot as I was hospitalised for a long time. In addition, I also received help as I live alone in a 3-bedded house. Till now, I still go for chemotherapy, and I don't have to pay for it."

- Participant in Mandarin session

4. HEALTH AND WELL-BEING

4.1. Standard of Living

Older women recognise the importance of being healthy to remain independent and enjoy a good quality of life while ageing actively.

"I see that life is also tough for the younger generation, they work very hard and come home late after work. It is important that we can take care of ourselves and be independent, we can see the doctor by ourselves when we are sick. Our children have to accompany their children and do not have time for us."

- Participant in Mandarin session

Downgrading is often proposed as a fiscal solution. The government encourages seniors to move to a 3-room or smaller flat and supplement their Central Provident Fund (CPF) Retirement Account with the proceeds. Through this scheme, the government also offers a cash bonus of up to \$30,000 if they have done so and they fit the eligibility criteria. However, this does not offer any respite for multigenerational families living in the same unit/household.

"We bought a 5-room flat in the past when we were stable, but now because we are still living in the 5-room flat, we are not entitled to government schemes for financial assistance. [It] is not fair to us to downgrade just for this."

- Participant in Tamil session

In dealing with diseases, participants concurred that being physically, mentally, and socially engaged would prevent the onset of dementia. They are also mindful to take prevention against other health risks besides female-specific health problems. However, as older women become increasingly independent, more tend to attend medical appointments or treatments at healthcare institutions on their own.

4.2. Managing Medical Bills

MediSave is a national medical savings scheme where citizens set aside part of their income to meet healthcare needs. For seniors, their MediSave is accumulated through the contributions made throughout their working years. A few women were housewives and had little in their MediSave accounts. However, even the women who had worked consistently felt MediSave was insufficient for their medical expenses. While it is possible to tap on their spouses' or children's MediSave, several women did not want to burden them.

"I have to depend on my child's MediSave, but it is limited, and my child needs it too."

- Participant in Tamil session

Moreover, MediSave have carefully set withdrawal limits that stipulate the number of charges that can be covered by MediSave yearly and only covers some but not all conditions/treatment. Beyond that, the women had to pay out-of-pocket. While the Community Health Assist Scheme (CHAS) assists by offering subsidies for outpatient doctors' visits, the women described that the subsidies only cover a few visits per year. This could be indicative of growth avenues for the social services agencies working to connect community members to the right avenues enabling affordable medical care.

4.3. Mental Health

Besides addressing older women's physical well-being, attending to their mental and emotional well-being is also crucial. Some participants experienced feelings of emptiness and loneliness as their children have grown up, hence, engaging them socially and extending information on where to get assistance would be helpful.

In addition, several non-English-speaking older women expressed their stress and frustrations in not comprehending their English-speaking healthcare workers, as well as the collaterals and reminders given to them, which were written in English.

5. COMMUNITY SUPPORT AND OUTREACH

Most participants also expressed their concerns about stereotypes against the ageing population – especially older women – such as being primary caregivers for both the young and old, as well as their perceived lack of digital and technical skills. They emphasised that it would require a whole-of-society effort to shift such mindsets to promote a more positive representation of the group.

Some older women also expressed discomfort towards being in settings which deviate from the culture and environment they are familiar with. To encourage social interaction and participation from this group of older women, it would be essential that activities, programmes, and services are culturally inclusive. In addition, more interaction and engagement with this group could be required to shift their mindsets and encourage them to enroll in mainstream activities and services.

"There should be ground initiatives to encourage all communities to join in mainstream activities and not be constrained to their worlds. I feel that we should also accommodate the minority communities so they would try to join these activities."

- Participant in Malay session

One of the questions asked the women if they had engaged in any governmental support schemes and if they faced any challenges in engaging these services. It was shocking to realise that most women were unaware of the various support organisations (e.g. Agency for Integrated Care) and support schemes (e.g. ComCare, Silver Support Scheme) available. Those who were aware described attempts to engage these support services, but their attempts were unsuccessful.

"It was for my husband. I found out that there was this organisation (AIC) to help, but it was not easy to do. They rejected me, and it was difficult to get these resources."

- Participant in Tamil session

The lived reality of certain community members feeling disconnected to formal support structures is a good indicator that more concise needs assessment projects can be undertaken by different agencies functioning within the social services ecosystem.

PART III: RECOMMENDATIONS

1. WORKPLACE

- Introduce pre-screening processes and referral of jobs which are relevant to older women by a third party such as the Community Development Council for higher success of placement.
- Social service agencies (SSAs) can align their advocacy efforts along women's concerns surrounding the legislation of the right to request for FWAs, as well the introduction of paid eldercare or Family Care Leave.
- Strengthen policy protection for re-employed workers in terms of remuneration and standards of workplace practices. For example, a reassessment of standard practices relating to leave and off-hours for senior employees.
- The building – or greater utilisation – of institutional structures aimed at empowering companies to strategically support older women employees juggling domestic obligations and workplace responsibilities.
- Relevant regulating bodies to review the policies that incentivise workplace recognition of older workers' ability to mentor younger employees.
- Conduct concise needs assessment exercises with older women, to understand how to improve the efficacy of programmes such as the SkillsFuture Career Transition Programme (SCTP), SkillsFuture Work-Study Programme and SkillsFuture Mid-Career Enhanced Subsidy.

2. CAREGIVING

- Participants acknowledged that under the Agency for Integrated Care (AIC)'s Home Personal Care service, light housekeeping may be available based on request or only applicable to a senior's room. However, they suggested incorporating household chores under the list of services so that they could focus on attending to the needs of their loved ones. One avenue of support would be the establishment of a caregiver support grant which covers cash and CPF components.
- As Home Personal Care services support frail and homebound seniors or their caregivers, a referral from doctors in hospitals or polyclinics is required. Older women feel that the qualifying conditions of this service should be lowered to allow more seniors to benefit so that they could continue to live more independently.
- Participants explored the idea of community caregiving support within the neighbourhood, where volunteers living within the neighbourhood could provide support to women by taking care of working women's children or engaging seniors weekly. The recognition of these volunteers could be made via a credit system, and they could use their earned credits to request such support when needed.
- Participants hoped for more subsidies on caregiving, healthcare and consumables for both care givers and care recipients. They put forth the consideration of providing transport subsidies for seniors with mobility issues who may be unable to take public transport.
- Strengthening awareness on the AIC as the go-to resource agency on caregiving is crucial. Participants were aware of the peer support networks for caregivers and looked forward to being connected with the groups to learn caregiving tips and for emotional support.
- Participants explored the following caregiving arrangements to address the needs of this group:
 - For individuals who were unable to engage domestic helpers, there could be volunteers to assist in the cleaning of the individual's house and their loved ones.
 - For seniors living alone with health issues, an additional support care system could be developed to engage and monitor them daily. This will enable them to be attended to quickly if they fall ill or injure themselves at home.
 - Participants noted that older women caring for adults with disabilities would require more support in areas of work, finances and caregiving needs for themselves and their children as they age.

3. RETIREMENT ADEQUACY

- To encourage women to proactively plan for retirement, more efforts from the community and agencies, such as MoneySense and CPF Board, to embark on retirement planning, including medical and healthcare needs would be key.
- Besides older women taking ownership in retirement planning, the criteria for healthcare and caregiving subsidies should be reviewed regularly in tandem with the profile of the population.

4. HEALTH AND WELL-BEING

- It would be important for healthcare institutions to put in place systems catered to older women who are non-English speaking. Having information and signs in vernacular languages could provide clarity in the communications and instructions to be delivered, reducing confusion and delays.
- Ensure the diagnosis and treatment explanation done by doctors is clearly understood by seniors, especially for those without dependents.
- Community partners and agencies could publicise volunteering opportunities to engage individuals who would like to contribute back to society meaningfully.
- Conduct a study to understand how to mitigate the negative effects of gendered differences in CareShield Life premiums.

5. COMMUNITY SUPPORT AND OUTREACH

- Participants called for more support (for Malay older women) and suggested more support groups within the community to encourage social interaction, especially those who are empty nesters. In addition, the Malay community could organise more ground-up initiatives to encourage individuals to do things together and remain socially engaged/active.
- In shifting mindset through schools' curriculums, schools could be encouraged to develop more programmes and opportunities to forge stronger inter-generational bonds, as well as mutual respect and understanding between the youths and seniors/generations. This would help eradicate discrimination faced by older women and enable the younger generation to better appreciate the contributions of older women.
- Support could be extended through engagements with SG Digital Office, to help seniors identify the kind of digital skills relevant to their professional goals.

PART IV: CONCLUSIONS AND FUTURE PLANS

It was opportune that SAWA organised this forum to speak with older women from different racial groups. Older women have distinctly different needs and priorities from their younger counterparts: securing adequate retirement savings is more pressing for the former as they have fewer years left in the workforce, whereas their caregiving responsibilities often interfere with their ability to work.

For deeper insight into the future struggles of older women, three sets of data point out other probable challenges for our ageing women population:

- The prevalence of chronic/non-communicable diseases remains high among senior citizens (Ministry of Health, 2010).
- Singapore Department of Statistics (2021) states that the proportion of employed elderly residents is steadily increasing. More and more seniors are going back to work.
- The resident old-age support ratio declined further to 3.8 as at end-June 2022 (Singapore Department of Statistics, 2022). This means there are only 3.8 residents aged 20-64 years for each resident aged 65 years and over.

Considering the data, this paper concludes with recommendations for future research projects and programme prototypes that are aimed at either (a) building a deeper, nuanced understanding of the issues faced by older women, or (b) piloting innovative programmes that can holistically complement the existing support structures older women have access to.

The following list is a non-exhaustive outline of potential research directions, which corresponds to the different recommendations specified in **Part III**.

CORE AREA	RECOMMENDATIONS	FUTURE RESEARCH AND DEVELOPMENT DIRECTIONS
1. Workplace	Pre-screening Processes and Referral of jobs for older women	<p>COLLABORATE WITH WORKFORCE SINGAPORE (WSG) SAWA partner up with WSG – and potentially other agencies like SNEF – to assess what companies need when it comes to providing older women with equitable work opportunities. SAWA can partner up with WSG – and potentially other agencies like SNEF – to assess what companies need when it comes to providing older women with equitable work opportunities.</p>
	Work with the Tripartite Alliance for Fair and Progressive Employment Practices (TAFEP) to enshrine protection of older women in policy	<p>NEEDS ASSESSMENT TAFEP can work closely with SSAs, to assess what the potential for policy-level changes can do for older women (re)entering the workforce.</p>

		<p>BUILDING SOLIDARITY Pilot programmes designed to nurture allyship between older women (re)entering the workforce with existing female employees.</p>
	Needs assessment exercises to know what older women require as they re-enter the workforce.	<p>LEANING INTO DIGITALISATION SSAs connected to older women in different communities can conduct a needs assessment on their propensity to adopt and embrace digitalisation amidst today's industrial change.</p>
2. Caregiving	Strengthening awareness of the Agency for Integrated Care (AIC)	<p>CROSS-SECTOR COLLABORATION Pilot programmes aimed at helping AIC force deeper connections with SSAs working directly with vulnerable communities, to propose ways of marketing their support services in ways that sustain accessibility.</p>
	Consolidated effort to better serve seniors who live alone and have health issues	<p>NEEDS ASSESSMENT Pilot an assessment exercise aimed at understanding how the current support ecosystem for seniors living alone is sustaining itself, as well as potential ways for said ecosystem to better collaborate with SAWA's member organisations.</p>
3. Retirement Adequacy	To encourage women to proactively plan for retirement	<p>CROSS-SECTOR COLLABORATION Pilot programmes aimed at helping SAWA's member organisations partner up with agencies equipped with the professional skillsets and emotional acumen to help older women collectively mobilise and form communities geared towards retirement preparation.</p>
4. Health And Well-being	Promoting the detection of other prevalent diseases	<p>CROSS-SECTOR COLLABORATION Pilot Programmes aimed at helping AIC force deeper connections with SSAs working directly with vulnerable communities, to propose ways of deepening accessibility to health screening services</p>

	Put in place systems catered to older women who are non-English speaking	NEEDS ASSESSMENT Pilot an assessment exercise aimed at understanding how specifically non-English speaking older women navigate their health and wellbeing needs.
5. Community Support and Outreach	Initiatives for empty nesters	BUILDING SOLIDARITY Pilot programmes designed to nurture allyship between senior empty nesters. SSAs serving different communities could have collaborate programmes where empty nesters from different socio-cultural backgrounds get together and build solidarity.

Finally, more FGDs could be conducted to delve deeper into key underlying concerns, challenges and support these older women need. During our discussions, several participants felt overlooked by those in positions of social, political, and economic power.

More public education/awareness campaigns are also needed to help the community – including employers – better appreciate the importance of caregiving. A whole-of-society effort, which includes leveraging on relevant agencies and stakeholders such as the Tripartite Committee on Workplace Fairness (TCWF), AIC and WSG, is fundamental to generating more holistic support for older women and in our collective efforts towards building a more equitable and inclusive society.

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