

THE HOSPICE LINK

DECEMBER 2025 – FEBRUARY 2026 • MDDI (P) 083/03/2025



Caring for the caregivers

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COUNCIL

30
YEARS OF
CARING TOGETHER

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**The Palliative Care Centre
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**SingHealth Community Hospitals
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St Joseph's Home

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St Luke's Hospital

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**Cash donations are eligible for 250% tax deductions.*

EXECUTIVE DIRECTOR'S NOTE

As I was writing this note, I marked the anniversary of my mum's (pictured) passing. I still recall vividly the days leading up to her passing. She had struggled to sleep during the nights. Every posture was just not right. She ended up hugging the bolster and sleeping in a sitting position. I was the night caregiver for both of my parents, and I know from experience that caregiving may be both mentally and physically demanding, but it is also a deeply meaningful journey — one that provides precious moments of connection, tenderness and love between the loved one and the caregiver. These moments often become cherished memories that last long after the caregiving ends. I am not alone. Over the years, I've met many caregivers — spouses, children, friends, and even neighbours — who have poured their hearts into looking after someone they love. Each carries their own story of love, strength, and sacrifice.

In this issue of *The Hospice Link*, we turn our attention to caregivers. Our feature story includes three perspectives: a caregiver who finds strength through her palliative care team, workplace, and neighbours; a medical social worker who highlights the skills and sensitivity needed to support caregivers well;

and a researcher who invites us to see caregivers not merely as people in need, but as individuals with resilience and inner strength that deserve recognition and support. They serve as timely reminders that compassion is the foundation of care, not just from professionals, but from the entire community.

This notion, that caring belongs to all of us, is also central to Compassionate Communities Singapore, a new effort aimed at integrating compassion into the fabric of our daily lives. It urges all of us, as neighbours, colleagues and friends, to support each other through illness, caregiving, loss and grief. When care becomes a shared responsibility, our entire society becomes more connected, empathetic and humane.

May we remember that compassion flows both ways, from those who give care and those who receive it. Let us continue to foster a community where everyone feels supported, valued and cared for, and in which every act of love, no matter how tiny, becomes part of our shared legacy of compassion.

Warm regards,
Sim Bee Hia
Executive Director
Singapore Hospice Council



WHEN CARE
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ABOUT THE ARTWORK ON THE COVER

"Happy Journey" by Mr Radwan

Late patient at St. Andrew's Community Hospital

Mr Radwan titled his artwork of two cats "Happy Journey" and then outlined, detailed, and coloured it over seven art therapy sessions. He wanted his artwork to be a message of encouragement to others: keep pushing forward, keep your spirits high, and battle on; don't be frightened. Mr Radwan was always upbeat and humorous. Even during his final painting session, he observed that his picture was not yet complete, demonstrating his mindset to continue giving, creating, and battling on. His tenacity and optimism continue to inspire us now, and we cherish his legacy with gratitude.



BONDING IN CARE

NEWS, VIEWS, UPDATES AND SPOTLIGHTS

LIVE WELL. LEAVE WELL. FESTIVAL 2025

In commemoration of World Hospice and Palliative Care Day, the Live Well. Leave Well. Festival returned in October 2025 for its most ambitious run.

Singapore Hospice Council's (SHC) 30th anniversary edition of the Live Well. Leave Well. Festival (LWLW Festival) took place from 7-12 October 2025 at Suntec City Atrium (Tower 1 & 2), featuring stage performances, information booths, and an interactive escape room designed to spark reflection on life's final chapter. The festival expanded from 10-19 October, with 11 information booths, 15 talks and webinars, and 14 interactive workshops, including exclusive hospice visits held across multiple venues islandwide, with nearly 50 partners.

"This year's festival builds on insights from our first Death Literacy Index (DLI) study, which found that factual knowledge of end-of-life matters remains low despite the wealth of information available. Only one in four knew the law on dying at home and how to access palliative care, and one in three knew what documents were needed," said Ms Sim Bee Hia, SHC Executive Director. "In response, we have curated a range of programmes aimed at closing these knowledge gaps, from practical sessions on care planning and navigating resources to interactive workshops with our member organisations and partners."

The 11 October opening ceremony was graced by Guest of Honour Mr Eric Chua, Senior Parliamentary Secretary for Law, and Social and Family Development, marking a significant step forward in engaging the community on living meaningfully and leaving with dignity.

- 1 Wish upon a star at Ren Ci Hospital's booth.
- 2 St. Andrew's Community Hospital inviting members of the public to share what they'd like their last meal to be.
- 3 Participants find out which Assisi Hero they are at the Assisi Hospice booth.
- 4 How much do you know about cancer? Singapore Cancer Society sharing some little-known facts.
- 5 Spreading positivity through cards with words of affirmation at the HCA Hospice booth.

HIGHLIGHTS

1 Launch of SHC 30th anniversary docuseries 30 Years of Caring Together

To mark its 30th anniversary, SHC launched Part I of a special five-part docuseries celebrating three decades of compassion and caring together.



Scan the QR Code to watch Part I.



2 Launch of SHC characters: "Legacy Fighters of the CoCo Guild"

Adding a youthful twist to the Festival, SHC introduced the "Legacy Fighters of the CoCo Guild" characters, adapted from the designs by Team Legacy, the Gold Winner of Hack Care: YOLO! 2024

3 Interactive escape room: "The Four Doors"

SHC presented an immersive escape room experience that invites participants to reflect on the essential messages of "I'm sorry", "I love you", "I forgive you", and "thank you".



4 Meet and greet with the cast of Channel 8's "The Gift of Time" 《你好，再见》

Mediacorp artistes Chen Hanwei, Xie Shaoguang and Desmond Ng shared their experiences filming their drama on reconciliation, wishes, and life's final journey.

5 'Die Die Also Must Say' chatshow by Lin Ru Ping and Chen Jian Bin

Through conversations filled with songs and laughter, Lin Ru Ping and Chen Jian Bin delighted the audience and proved that end-of-life conversations need not be heavy or dreary.



- 6 Children and adults alike leaving a legacy piece through fingerprint art at St. Luke's Hospital's booth.
- 7 Senior Parliamentary Secretary Mr Eric Chua scoring a prize at Ng Teng Fong General Hospital's booth.
- 8 Dover Park Hospice booth debunking participants' myths about palliative care.



MEET THE TEAM

ART THERAPIST **CELESTE CHOO**
Dover Park Hospice

Art therapy is a form of psychotherapy that uses art as its primary modality, allowing caregivers to develop insight through self-exploration, articulate complex thoughts and experiences, and foster bonding with the patient in their final journey. A trained art therapist facilitates this process, thereby supporting and empowering the caregiver in their journey.

What techniques or practices do art therapists use to support caregivers?

We begin by getting to know the caregiver — their goals, preferences, values and challenges. It is important to know what they want, what they are comfortable working with or discussing, and what they hope to achieve. We would then suggest art media or directives that are aligned with their goals or needs, while preserving a safe, conducive therapeutic alliance for inner work and reflection.

An art therapist selects art materials based on their evocative properties to augment the caregiver's process. For instance, sensorially rich materials like clay or yarn may promote a sense of relaxation or comfort. Furthermore, materials that are easy to apply and visually stimulating could potentially facilitate self-expression or stimulate interest.

To strengthen familial bonds, the art therapist may suggest the creation of transitional objects or legacy work to foster connection between the caregiver and patient.

What is your favourite part of your job?

Moments when patients or caregivers share intimate laughter or life advice with me brighten my day. In spite of the heavy circumstances, it reassures me that there is a quiet strength and resilience within us all. It feels like our roles are reversed — or perhaps they have ceased to matter, and we are just people on a journey together. It is truly an uplifting privilege to be a part of it.

LAUNCH OF COMPASSIONATE COMMUNITIES SINGAPORE



On 12 October 2025, the Singapore Hospice Council (SHC) officially launched Compassionate Communities Singapore (CoCoSG), a national movement to build a compassionate and inclusive ecosystem where no one dies or grieves alone. The event was held in conjunction with the Mountbatten Carnival Funfair and was graced by Guest of Honour Ms Rahayu Mahzam, Minister of State, Ministry of Health and Ministry of Digital Development and Information, and Special Guest Ms Gho Sze Kee, Member of Parliament and Adviser to Mountbatten Grassroots Organisations.

CoCoSG brings together organisations and individuals across sectors to reimagine end-of-life and bereavement care as a shared social responsibility. The movement aims to nurture community networks that empower people to care for one another, ensuring that those facing life-limiting illness, caregiving stress, or grief are not left to journey alone.

"The journey through end-of-life, grief and bereavement after a demise need not be a lonely one," said Ms Sim Bee Hia, Executive Director of SHC. "SHC acts as a connector and capacity builder, helping groups learn from one another so they can drive initiatives that shift



mindsets around death, dying and grief, ensuring patients and families get the support they need."

As part of the launch, SHC recognised more than 40 founding stakeholders who have pledged their commitment to this national movement. Representing healthcare, education, social service, community, ethnic and faith-based organisations, these founding stakeholders embody the spirit of empathy, inclusiveness and collaboration, working together to build an ecosystem of care that honours dignity, choice and cultural sensitivity, while fostering a kampong spirit of togetherness, respect and shared responsibility. Each founding stakeholder will also develop a charter, outlining their commitment to CoCoSG and how they will strengthen community networks and foster meaningful connections that extend beyond institutional care.

As one of the founding stakeholders, Compassionate Communities Mountbatten was also launched as Singapore's first constituency-led compassionate community, embracing a whole-of-community approach. For caregivers, it is important to know they are not carrying their burden alone. "I have met caregivers here who put on a brave face to the world but who were hurting and struggling inside. Through Compassionate Communities Mountbatten, we hope to provide them with resources, care training, and most importantly, a support network," said Ms Gho. To further strengthen the spirit of care, a Mountbatten Compassionate Care Fund was also set up with a seed amount of \$40,000 dedicated to supporting eligible Mountbatten caregivers, without any income requirements.

To commemorate the launch of CoCoSG, SHC unveiled the "Winds of Compassion" community art installation, which featured 10,000 hand-decorated pinwheels, each with a personal message co-created with 63 partners, including SHC member organisations, schools, and community members. Each pinwheel represents a small act of care — a symbol of how simple gestures, when multiplied across the community, can create a powerful ripple of compassion and connection.



- ① Thank you to our member organisations, CoCoSG founding stakeholders, volunteers, and everyone in the community who came down for the launch!
- ② Each pinwheel, a small act of care.
- ③ (From left to right) Ms Sim Bee Hia, Ms Gho Sze Kee, Ms Rahayu Mahzam, Dr Chong Poh Heng, Vice Chairman, Singapore Hospice Council, with their planted pinwheel.
- ④ Hand-decorating their pinwheels.
- ⑤ "Winds of Compassion" community art installation.



Caring for the caregiver

Through the experience of a caregiver who had to take care of two loved ones while raising four children, a social worker who continues to upskill and a researcher looking to change the perspective of caregiving, it is time to build compassionate communities to make a difference.

Looking back on the last few years of Koh Mei Ting's life, some might wonder how she held it all together. At 36, she works full-time as an administrative manager while also raising four children, ages 6, 13, 15, and 18. She has also been a caregiver to two loved ones with serious illnesses: her late grandmother, who had advanced skin cancer, and her father, who lives with vascular dementia.

For Mei Ting, the two caregiving journeys could not have been more different. Her late grandmother wished to spend her final days at home rather than in hospital. Every day, Mei Ting would reach her grandmother's home by 6am, patiently sitting by her bed to clean and dress the wounds that had opened across her face and neck. Her skin had grown paper-thin and blistered, sometimes bleeding from the lightest touch. Mei Ting learnt to apply cream with the gentlest pressure, to soothe and to comfort without causing pain.

"It was very painful to witness," Mei Ting recalled. "My role was to keep her comfortable."

The Tzu-Chi Foundation (Singapore)'s home care staff assisted Mei Ting, guiding her through wound care and palliative measures. Their presence gave comfort and reassurance when she had a lot of questions or required help at 2am to administer the fentanyl injection.

Her father's condition, by contrast, is a long unfolding journey. When he was working as a driver, he suffered a stroke, got into several accidents and started to show signs of memory loss.

These days, Mei Ting tries to maintain her father's feeling of normalcy by allowing him to continue his long-standing habit of buying breakfast for the family at the market or riding his bicycle around the neighbourhood. To keep his mind active, she engages him with simple mathematics games and has installed an app on his phone to track his location during his daily walks. He also carries a card with his address in case his phone runs out of battery.

"He's like my fifth child," she said with a wry laugh. "Sometimes he thinks it's 1999 or that he's still in his twenties and asks for treats like

McDonald's. We even give him a bit of cash to motivate him. We joke about it instead of getting upset — that's how we handle the stress."

However, humour doesn't always help to relieve stress. She becomes frustrated when he refuses to help her monitor his blood pressure, becomes angry out of confusion, or when she must play the "bad cop" role.

Despite the emotional weight, Mei Ting carries a calm optimism, perhaps shaped by years of being the eldest child who had to shoulder the most responsibility. Thankfully, her workplace has been flexible, allowing her to work from home when needed. Her mother, husband and children have become part of the caregiving ecosystem too. When Mei Ting is at work, her mother looks after her father and ensures the latter brings his phone with him when he goes out. Her daughters help with home care tasks like using the oximeter or checking blood pressure, while her husband takes leave to accompany her father to medical appointments. "Caregiving is a family affair," she said. "Maybe I do more, but everyone has a role. They give me moral support."

FROM CAREGIVER TO CARE PARTNER

Stories like Mei Ting's are far from rare, and yet, experts say, society still tends to see caregivers only through the lens of sacrifice.

Professor Andy Ho, Director of Research at the Palliative Care Centre for Excellence in Research and Education (PalC) and Professor of Psychology and Medicine at Nanyang Technological University, Singapore, believes it's time for a shift in perspective.

"The support structure for caregivers has traditionally focused on skills — how to provide wound care, manage symptoms, and handle breathlessness or constipation," he said. "But true caregiving goes beyond competence. It's also about


emotional readiness and resilience, to be able to witness and stay with suffering, to know that no matter what you do, you can't always make it better, yet still offering a compassionate presence."

Prof Ho calls for a paradigm shift — one that recognises caregivers not as passive helpers or recipients, but as care partners. "They possess strengths, wisdom, and intimate knowledge of their loved ones — things that even doctors and nurses may not fully know," he said. "We need to recognise their competencies and work with them; it must be a partnership."

In practice, this shift means moving away from a top-down medical hierarchy toward a more collaborative model, where

caregivers help shape decisions and patient wishes guide the process. Prof Ho noted that this requires more than goodwill: caregivers need the resources, knowledge and confidence to work alongside healthcare teams in planning the best care for their loved ones.

Caregiving, he added, is not just about attending to a patient's needs but managing stress on multiple fronts. When caregivers are excluded from the process, tension and blame can arise within families. There is a need to empower the primary caregiver to make informed decisions while ensuring emotional support from others. Such empowerment, Prof Ho stressed, must come with compassion-based training,



"In caring for others, we hold one another through the hardest seasons of love and remember what it means to be human."

PROFESSOR ANDY HO



emotional resilience building, and the practice of self-care “so caregivers can sustain not just their role, but their own well-being”.

At PalC, Prof Ho and his team run programmes that support both family and professional caregivers through skills-based and psychological interventions. One of their signature initiatives is Mindful Compassion Art-based Therapy (MCAT), a six-week group programme that combines mindfulness practice, expressive arts and self-compassion exercises to promote mental well-being and holistic wellness.

“The sessions help caregivers put words to their feelings and emotions of caregiving,” said Prof Ho. “The sense of identity, purpose, and life’s meaning begin to emerge.”

Professional caregivers, including hospice nurses, physicians, and allied health staff, not only provide medical and emotional support to patients but also play a critical role in guiding families through end-of-life care. Prof Ho emphasised that these caregivers, too, need permission to be vulnerable.

“These are professional caregivers who need not only capability but also the confidence to be vulnerable and to ask for help,” Prof Ho said.

Caregiving, he noted, often involves “living losses” — the daily grief of watching a loved one decline and losing one’s identity, career or social connections in the process. “We need to talk more about grief, not only after death but during care itself,” he said. “Caregivers live with anticipatory grief — experiencing and coping with the slow physical and psychological decline of their loved one until death ensues.”

To that end, he advocates for a national grief and bereavement strategy, similar to initiatives in Australia and Canada that combine sustainable public education to foster death and grief literacy in society, driven and informed by rigorous university-based empirical

research, supported and maintained by government funding.

As Singapore moves toward building more compassionate communities, Prof Ho envisions a network of community support that combines practical help, emotional care, and professional guidance. Neighbours can assist with groceries or housework to provide respite for caregivers.

Meanwhile, wellness coaches, acting as allied health professionals, provide consistent check-ins, motivation, and guidance on resilience and goal-setting. Prof Ho said, “When caregivers feel heard and supported, their well-being improves, and so does the quality of care they provide.”

HOLDING SPACE FOR CAREGIVERS AT HOME

Those on the ground witness how fragile and complicated caregiving can be. Lim Yi Xi, a senior social worker at the Singapore Cancer Society, has spent the last three years assisting families through the home hospice care programme. She works together with doctors, nurses, and therapists to visit patients at home.

“Many caregivers are caught off guard,” said Yi Xi. “Some suddenly find themselves responsible for everything — medical decisions, daily care, finances — while also grieving the reality that death may be near and that there may be more to the patient’s needs.”

Caregivers often face practical demands that can feel overwhelming, from making split-second decisions to managing routines and appointments. At the same time, they grapple with emotional challenges: the loss of identity, feeling undervalued, and a mix of stress, frustration and grief, she said.

She recalled a caregiver who had looked after her mother with

Caregiving is fundamentally an act of unconditional love.

cancer and advanced dementia for

more than a decade. In that time, the woman put her life on pause — quitting her job and putting her daughter’s schooling and health on hold — to provide round-the-clock care. Yi Xi said, “That is one of the hardest parts of caregiving — the invisibility. Many don’t feel seen or appreciated, and they lose their sense of self.”

With families shrinking and professional care becoming more expensive, caregiving often falls on a single person, such as an unmarried daughter or an elderly spouse. Support needs vary — some families require financial assistance first, while others need emotional guidance. Once immediate needs are met, caregivers are helped to anticipate and plan for the challenges that arise as their loved one’s condition progresses, said Yi Xi.

What keeps Yi Xi going is the ethos of dignity and personhood that underpins palliative social work. “We see patients and caregivers as individuals with stories, cultures, and relationships,” she said. “Our role is to help them live and love well, even in the face of loss.”

Each year, the Singapore Cancer Society hosts its annual flagship event, Relay For Life, at the National Stadium. The 15-hour overnight relay features an exhibition sharing stories of palliative patients and their caregivers; it celebrates their resilience, the strength of their



1 Koh Mei Ting (second from left) with her family.
2 Senior Medical Social Worker Ms Lim Yi Xi.
3 Professor Andy Ho
4 Yi Xi in action!



relationships, and the courage to live meaningfully while navigating advanced illness and the end-of-life journey.

Yi Xi underlines that professional caregivers, especially palliative care social workers, require ongoing training and self-care resources. To support both patients and caregivers, other professionals use narrative therapy, family dignity interventions, solution-focused counselling, brief therapy, and play therapy in their practice.

THE HEART THAT HOLDS

Caregiving is fundamentally an act of unconditional love, albeit one that is often messy and stressful. Mei Ting understands this all too well. When fatigue sets in, she carves out small moments of rest, whether it is


a quiet lunch with friends at the mall or a pause to gaze at the sky. “It helps me recharge,” she said. Over time, caregiving has reshaped her from within, teaching her patience, resilience, and even creativity in the face of daily challenges.

“Sometimes caregiving can feel like such a lonely road, so it really means a lot to have someone listen with care and understanding,” she said. “To all caregivers out there, may you always find strength in small moments, comfort in the people around you, and peace in knowing that what you do truly matters.”

For Prof Ho, the focus is on reframing how we see compassion. He hopes to dispel the myth of compassion fatigue. “Compassion doesn’t deplete us,” he said. “It replenishes us. Repeated

neuropsychological research prove that when we engage in compassionate thoughts and actions, we feel more connected, more grounded. Compassion breeds compassion. It’s what keeps our species alive.”

He believes compassion training should be built into the curriculum for doctors, nurses, and all healthcare professionals. “When we nurture compassion, we strengthen our shared humanity. Compassion,” he concluded, “is the key element for the survival of our species.”

Perhaps that’s what caregiving reminds us: that in caring for others, we hold one another through the hardest seasons of love and remember what it means to be human. 

RECOGNISING PALLIATIVE CARE IN EDUCATION AND PRACTICE

In this third instalment of a four-part article, we learn how having palliative care included in Singapore's medical schools and recognition as a subspecialty have proved to be gamechangers for the sector.



In the early years, palliative medicine did not feature strongly in the undergraduate medical curriculum. Not every hospital had palliative care departments or services, while students could not be attached to hospices routinely in view of the large number of students vis-à-vis the small number of palliative care facilities that were available at the time.

After clinical teachers in geriatric medicine, internal medicine, family medicine, and oncology began introducing some topics and case presentations in undergraduate classes, students became interested in projects related to end-of-life care, be it fundraising or event volunteering. Today, Singapore's three medical schools — National University of Singapore Yong Loo Lin School of Medicine (NUS

Medicine), Duke-NUS School of Medicine (Duke-NUS) and Nanyang Technological University, Singapore Lee Kong Chian School of Medicine — have a joint tripartite programme supporting the children of parents who are undergoing cancer treatment.

Palliative care was officially introduced into the family medicine module of the NUS undergraduate curriculum in 2002. This was a

Clockwise from right: Dr Koo Wen Hsin, Consultant, National Cancer Centre, Singapore with NUS medical students, 2002; Candidates of the first Palliative Medicine Advanced Specialist exit examination: Dr Mervyn Koh and Dr Allyn Hum, 11 March 2009; Dr Kok Jaan Yang, Consultant, Dover Park Hospice, with medical students, 2002; Opposite page: First two candidates and examiners of the Palliative Medicine Advanced Specialist Training exit examination, March 2009 (Standing, from left) Associate Professor Pang Weng Sun, Dr Kok Jaan Yang, Dr Alethea Yee, Dr Noreen Chan; (Seated, from left) Dr Mervyn Koh, the late Professor Cynthia Goh and Dr Allyn Hum.



four-day programme in which fourth-year students were assigned to a residential hospice, a hospital service, and a home care service, and they participated in a workshop based on the HBO film *Wit*, which starred Emma Thompson as a professor with stage 4 ovarian cancer who receives experimental chemotherapy in a hospital.

Palliative care became a subspecialty of general, geriatric, oncological, and family medicine in 2007, marking a watershed moment. Senior clinicians from these specialities, who applied palliative care in their work — looking after patients with palliative care needs — were inducted or 'grandfathered' into the first palliative medicine specialist register. These included the late Professor Cynthia Goh, Professor Pang Weng Sun, Dr R Akhileswaran, Dr Angel Lee, Dr Noreen Chan, Dr James Low, Dr Ian Leong, Dr Philip Yap, Dr Patrick Kee, Dr Koh Nien Yue, Dr Kok Jaan Yang, Dr Tan Yew Seng, Dr Koo Wen Hsin, Dr Chan Mei Yoke, Dr Yap Keng Bee, Dr Lee Lai Heng, Dr Tay Miah Hiang and Dr Angeline Seah. The first two advanced specialist trainees were Dr Allyn Hum and Dr Mervyn Koh from Tan Tock Seng Hospital.

Under Prof Goh's leadership and with the hard work of successive education leads, Dr Angel Lee, Dr Koh Ai Lian and Dr Jerry Lim, palliative courses were launched on the Singapore Hospice Council platform: the Postgraduate


Course for Doctors (2009), the Palliative Care Course for Social Workers (2015), the Palliative Care Course for Pharmacists (2016), the Palliative Care Course for Nurses (2017) and the Palliative Care Course for Therapists (2019). Concurrently, the Ministry of Health supported the establishment of the Graduate Diploma in Palliative Medicine, aimed at general practitioners and community hospital doctors, by NUS Medicine and the Chapter of Geriatricians, Academy of Medicine Singapore.

Several other doctors, leaders in the family medicine fraternity who deserve special mention in the history of palliative care education, include Professor Goh Lee Gan, who taught at NUS Medicine; Dr Jerry Lim, who advocated strongly for the formation of the subspecialty; and Dr Kok Jaan Yang, who was grandfathered into the subspecialty and was instrumental in pushing for the Graduate Diploma Course in Palliative Medicine and contributed much to the Specialist Training Committee and the nurturing of many palliative care physicians of the day. Dr Kok went on to start the first private palliative care practice in Singapore.

In 2008, the Lien Centre for Palliative Care was established to support and fund training and research in palliative care for Singapore. This programme was administered in collaboration with Duke-NUS and has successfully conducted and funded many research projects relating to palliative care in Singapore.

While the local palliative care speciality grew, Prof Goh and her team also started looking at engaging the regional countries. The Asia Pacific Hospice Network, chaired by Dr Rosalie Shaw for many years, had its headquarters at the National Cancer Centre of Singapore. Singapore also started hosting many international hospice conferences over the years, such as the Singapore Palliative Care Conference, the Asia Pacific Hospice Conference, and the Advance Care Planning International Conference, attracting participants from various countries, allowing for the sharing of experience and best practices.

To be continued...

Look out for the final instalment of this series in *The Hospice Link* March 2026-May 2026 issue, where we look at the importance of communications and conversations regarding the end-of-life journey. 

WORDS: ASSOCIATE PROFESSOR JAMES LOW, PROFESSOR PANG WENG SUN
PHOTOS: DR KOK JAAN YANG

WALKING ALONGSIDE CAREGIVERS: THE UNSEEN JOURNEY

At HCA Hospice, we journey alongside caregivers, easing their load through psychosocial support and grief services, so they never have to face the final chapter alone.

In end-of-life care, the patient is naturally the focus. However, just beyond the spotlight stands another vital figure who is often emotionally and physically exhausted: the caregiver. These loved ones, often family members, carry the immense responsibility of providing round-the-clock care while navigating their fears, grief and sacrifices.

HCA Hospice's care is patient-centred and family-focused, ensuring that patients and caregivers receive the support they need. Medical Social Worker Tay Jia Sen and Assistant Nurse Manager Nicole Peng share insights from their experience supporting caregivers and how the HCA team provides essential guidance and care.

RECOGNISING THE WEIGHT OF THE ROLE

Caregiving can be emotionally demanding and thankless, especially when layered with family tensions or the caregiver's own health struggles. From waking in the night to soothe a loved one to repeating instructions tirelessly, these small, constant acts of devotion take a profound toll. Even the strongest caregivers can feel isolated and overwhelmed.

Nicole recounts a daughter caring for both her parents, one with

end-stage heart failure and the other with dementia, while also managing her heart condition. "I witnessed her mother shout at her one day, and she was visibly shaken. We connected her to our psychologist to ensure she received the support she needed for the immense stress she was under."

The medical team, together with the psychosocial services team, is responsible for noticing the caregivers' struggles and ensuring they are not left to cope alone. Through practical assistance, emotional support, and a compassionate presence, HCA helps caregivers manage this demanding role with renewed strength and hope.

SEEING THE WHOLE PERSON

For both Jia Sen and Nicole, effective support begins by seeing the whole person.

"Before we can talk about emotions, we always check the basics: are they coping financially, is the patient comfortable?" said Jia Sen. "Addressing these practical needs creates the space for emotional sharing."

"I learn what brings them joy," added Nicole. "Conversations about hobbies or daily life build a foundation of trust. When difficulties arise, they feel safe to be open with us."

TAILORING SUPPORT TO INDIVIDUAL NEEDS

There is no one-size-fits-all approach in caregiver support, Jia Sen explained. An elderly spouse caring for their partner has vastly different needs from an adult child balancing care and career.

"Some caregivers may not feel comfortable expressing their emotions openly," Jia Sen noted. "For them, support often means being consistently present and reassuring. Regular visits and ongoing check-ins help build trust, so caregivers know they are not alone in this journey."

Nicole remembers Jonathan*, a senior in his 70s who was very close to his elder brother diagnosed with end-stage heart failure. As his brother's illness worsened, Jonathan expressed suicidal thoughts, which were promptly flagged to his medical social worker.

A COMMITMENT THAT CONTINUES

As bereavement care is integral, HCA's support for caregivers does not end with a loved one's passing.

After Jonathan's brother passed, the team stayed closely involved, checking in regularly, especially on culturally significant days like the 49th and 100th days after death. They also introduced him



Top: Daughter caring for father; Inset: In sickness and in health

to Project CAREs (Connecting And Remembering Experiences with you), an HCA initiative that journeys with the bereaved through different stages of grief with targeted interventions. With support from his care team, Jonathan is coping well today and continues to speak fondly of his brother.

"We don't impose time limits on bereavement support," Jia Sen stressed. "I've journeyed with caregivers for years, gradually reducing visits but always remaining available. They know they can reach out long after their loss."

Sometimes, caregivers proactively ask for visits to continue even before their loved one passes. "Ending the relationship abruptly could leave them feeling abandoned," explained Jia Sen. "Regular check-ins provide reassurance and a comforting routine during this difficult time."

STRENGTH IN VULNERABILITY

Despite the difficult journey, some caregivers demonstrate incredible strength. One such caregiver was Belle*, who returned from working abroad to care for her elderly father diagnosed with oesophageal cancer. Being a healthcare professional herself, Belle naturally managed his medical care.


The role weighed heavily on Belle. Her father was delirious, and the reality of his decline was heart-wrenching. She also had to reassure her mother and family while holding herself together. "Yet, she was remarkably open about her emotions and sought advice when she needed it," recalled Jia Sen.

"I saw incredible strength in her ability to embrace uncertainty."

Nicole also recalls Belle's humility and warmth. "During the first visit she greeted me with a cheery 'hi', as though we'd known each other for years," said Nicole. "She was proactive in updating her family, and despite her professional background, never hesitated to ask questions."

Belle's story highlights an important truth: despite their sacrifices, caregivers still need reassurance, clear information, and emotional support to carry on.

YOU'LL NEVER WALK ALONE

Caregiving can be a lonely road, but it is one no one should walk alone. By offering practical guidance, emotional support, and an unwavering presence, HCA helps caregivers navigate one of life's most challenging journeys with dignity, confidence, and the assurance that they are not alone. 

**Names have been changed for confidentiality.*

FINDING LIGHT IN THE FINAL CHAPTER

Caregiving can be a lonely journey fraught with uncertainty, but MWS Home Care & Home Hospice provides the holistic support families need.



Caring for a loved one in their final chapter of life is both a privilege and a deeply demanding responsibility. Behind every patient is a caregiver, often a daughter, son or spouse, who pours their energy, love and time into ensuring comfort and dignity during this critical stage.

At Methodist Welfare Services (MWS), the Home Care & Home Hospice (HCHH) team provides personalised medical interventions for patients and walks with caregivers, giving them much-needed respite and practical assistance as their loved ones approach the end of life. When the final moment comes, the team also offers bereavement care so that caregivers are never alone in this journey of love and loss.

Through the experiences of two caregivers, Maybel and Chloe, we see how MWS' palliative care services bring light, relief and hope into life's hardest moments.

SUPPORTING MUM THROUGH DEMENTIA

Fifty-seven-year-old Maybel would wake in the middle of the night to find her 87-year-old mother, Madam Teo Geck Hoong, wandering restlessly around the house, convinced someone had stolen her money. Ever since her Alzheimer's disease worsened, sleepless nights have become the norm for both mother and daughter.

For Maybel, caring for her mother has been a journey filled with both anguish and grace. Madam Teo, once fiercely independent, was

diagnosed with breast cancer at 72 years old and later Alzheimer's at 75. She had previously travelled across the island on her own to visit family, but her world shrank rapidly after her memory began to fade.

One day, Madam Teo could not find her way to her daughter's home. She then started misplacing her belongings and, heartbreakingly, even forgetting her children's names. "That was when we knew life had changed forever," recalled Maybel.

By 2024, Maybel felt compelled to have her mother move in with her due to repeat hospitalisations. It was a decision that came with endless challenges. "We were exhausted, and I didn't know how much longer we could cope," Maybel shared.

WORDS: METHODIST WELFARE SERVICES
PHOTOS: METHODIST WELFARE SERVICES AND THE PROFILES



Left: Maybel's family; Below: Madam Teo with MWS nurse Christine; Opposite page, from left: Chloe's family; Chloe and her mom.



The MWS team stepped in then, with doctors adapting treatment to Madam Teo's specific needs, including prescribing sleep medication that allowed both mother and daughter to get proper slumber.

Sally Gui, a medical social worker, also helped Maybel's son adjust to living with Grandma at home. Perhaps most invaluable was the MWS HCHH 24-hour hotline. When Madam Teo was delirious or gasping in pain, there was the reassurance that professional advice was just a phone call away, however late at night.

"I felt helpless when I first brought my mum home. I was emotionally and physically drained, managing her medical care on top of household responsibilities, and questioning if I had made the right decision. Thankfully, the MWS HCHH team equipped me with the medical knowledge and emotional support I needed. At first, I wasn't even aware of the resources available, so hospitals play an

important role in referring social workers. I'm heartened to see progress in the healthcare and social services sectors," Maybel shared.

As Madam Teo lives out her final days, Sally has been helping Maybel embrace the reality bravely. "Sally taught me not to fear the end but to treasure the days left," she recalled.

One such instance occurred on Maybel's birthday, when Madam Teo sang "Happy Birthday" to her despite her deteriorating memory. That memory remains a precious gift to Maybel — a reminder that even in seasons of hardships, small blessings can break through.

A DAUGHTER'S DEVOTION

At just 21 years of age, Chloe has already shouldered responsibilities far beyond her years. The eldest of three, she became the main caregiver to her mother, Cindy, who was diagnosed with advanced idiopathic pulmonary arterial hypertension in 2017 —

a rare, incurable condition that damages the heart and lungs, eventually robbing her of the ability to manage even daily tasks such as showering or eating.


Even before she was legally an adult, Chloe had been her mother's advocate at hospital appointments, communicating with doctors and helping make treatment decisions. As Cindy's health worsened, Chloe made the difficult choice to drop out of school to spend more time with her.

While other girls her age were shopping or meeting friends, Chloe's days began at dawn, administering medication, managing oxygen tanks, and helping her mother with basic needs. By 2025, caregiving had become a round-the-clock responsibility, with Chloe even taking driving lessons so she could ferry her mum to appointments.

Relief finally came when the family was referred to the MWS team in May 2025. Nurse Pui Teng visited regularly, guiding Chloe on administering injections for her mother. "She stayed until I was confident," Chloe said.

Sally not only sourced and personally delivered donated medical supplies but also went the extra mile to honour Cindy's final wish for a family portrait. Working with Ambulance Wish Singapore, she arranged a photoshoot at home, creating a memory that Chloe, her brothers and her father will treasure forever.

Cindy's wish was for the family to take care of each other. The 'iron lady' of the family, she had continued to work and run the household faithfully, from budgeting to cleaning and supervising her children's studies, until her condition worsened. She passed away in July 2025, leaving behind a treasured legacy of resilience and devotion.

"I hope more families can get help sooner. Caregiving is tough, and no one should do it alone," Chloe reflected. Inspired by her experience, she hopes to one day volunteer with MWS to support others. 

A GRADUATION TO REMEMBER

Being able to create cherished memories of one's milestones in life, despite difficult circumstances, makes it all the more precious.

For many families, graduation day is a once-in-a-lifetime celebration — a proud milestone that brings parents and children together. For the Ang family, however, this moment took on a different form. Michael Ang, 69, who has terminal cancer, was unable to attend his son Christopher's university graduation photoshoot because of his declining health. Thanks to the thoughtfulness of St Luke's Hospital (SLH) staff, the family was able to fulfil his wish and recreate a photoshoot within the hospital, creating a treasured memory.

Although Michael, known for his stoic nature, showed little outward emotion, his family could sense how touched he was. "My father had always wanted to see me graduate before he passes," Christopher shared. "Being able to wear my gown and take a family photo together was truly heartwarming."

A JOURNEY OF CARE AND LOSS

"The journey has been deeply melancholic," he said. "From the initial diagnosis until now, we have watched my father's health slowly decline. He has progressively lost the things he enjoyed, the things he used to do, and his usual habits have gradually been taken away from him. It's been challenging for us to alter everything so we don't exhaust him."

Balancing caregiving with his responsibilities also came at a cost.

"I've had to cut back a lot on my social and personal time to care for both of my parents," he added.

Still, he shared this advice for others, "It can be difficult and tiring, but the feelings and comfort of loved ones should always be the priority. Many don't get the chance to have a proper final journey, that's why it's important to do the little things we can to make their remaining time meaningful and fulfilling."

WALKING THE JOURNEY TOGETHER

Michael was admitted to SLH on 5 August 2025 for inpatient palliative care. The team had initially prepared for him to attend Christopher's photoshoot scheduled by his university at a studio on 16 August 2025. However, just a day before, he became dangerously ill.

Within hours, Senior Medical Social Worker Yvonne Yeo contacted volunteer-led charity Ambulance Wish Singapore to quickly organise a photographer, graduation gowns, and refreshments for the following day. The SLH multidisciplinary team arranged an appropriate venue at the hospital's Community Garden. Nurses assisted Michael in changing and carefully moved him there.

"In palliative care, every moment counts. By working together with our partners, we can tap into our collective strengths to connect

community resources and fulfil the wishes of patients and families," shared Yvonne.

"From pre-planning to the event itself, we played very little part in the preparations. Much of the credit goes to SLH for making it happen," said Christopher, who was deeply moved by how much was taken off his family's shoulders.

Michael often shared with his family how much he enjoyed the little touches of care, from relaxing massages in the ward and short outings at a nearby supermarket by the rehabilitation team to singing performances by volunteers that lifted his spirits. These small yet meaningful experiences brought joy and comfort amid illness.

Assistant Nurse Manager Loh Yean Ting reflected, "At the wards, whether through a celebration, a simple outing, or time with loved ones, we strive to honour dignity, enrich quality of life, and support families through what can be a deeply difficult time. It is our privilege to create space for comfort, connection, and lasting memories."

When Michael saw his son in his graduation gown for the first time, he was filled with pride and said, "He is an obedient, hard-working, and caring son; I'm very pleased to see him do so well." He also expressed his gratitude to the SLH staff, whom he described as "treating him like family", for their care, support, and unique arrangements that enabled this moment.



Left: Christopher's (second row, second from right) graduation photoshoot at SLH Community Garden with his family, including his father Michael (first row) and sister (second row, second from left); Below: Michael with the SLH care team including his doctor, nurses, medical social worker and the rehab team.





Left: Linda and her nephew, Phillip.

RECEIVING SUPPORT AT HOME

Caregiver Linda Tan shares her experience with the Assisi Hospice Palliative Home Care team supporting her and her nephew Phillip Soh.

For patients who prefer and can receive care at home, the Assisi Hospice Palliative Home Care team offers a crucial alternative. A team of doctors, nurses, and social workers visits patients at home and helps their families manage the symptoms of severe illnesses while also offering training and emotional support. The palliative care team is also contactable on the phone, 24 hours a day, to address any urgent concerns.

For 76-year-old Linda Tan, the 10-year journey caring for her 56-year-old nephew, Phillip Soh, was challenging.

Linda had always treated Phillip like her son. She became Phillip's main caregiver when he suffered three strokes in his 40s and was subsequently diagnosed with kidney failure in 2022. He was hospitalised more than 20 times because of persistent health problems. He gradually deteriorated and became bedbound.

In June 2024, Phillip came under the care of Assisi Hospice Palliative Home Care. By then, he was in physical pain and feeling frustrated and depressed. Linda was desperate, at a loss as to how to ease his physical and emotional pains. Home Care nurses walked this journey with them, providing regular visits and support. They guided Linda in managing his disease symptoms, teaching her how to administer medications, including injections. Their care brought immense relief to both Phillip and his family. Linda shared, "They treated Phillip like family. He was always happy to see them."

The hospice's 24-hour helpline was a lifeline to Linda. She said, "I'd send videos when Phillip had breathing issues, and they'd always advise me."

Phillip's wish was to remain at home in his final days, and the Home Care team's timely and strong support made it possible. On the eve of Phillip's passing, the Home Care nurse alerted him and Linda to his critical infection and prepared detailed instructions and injections for Linda to help provide him comfort. The next day, on 8 August 2024, the nurse visited together with the team's senior doctor to review his condition. She put him on the syringe driver, which allowed a continuous infusion of medication. Linda said, "Phillip nodded his head when asked if he was more comfortable. He passed on peacefully that night, with all family members around him at home."

Linda is forever grateful. She shared, "Their kindness, patience, and personalised care meant the world to us. They made Phillip's last days dignified and peaceful, lifting his spirits when we needed it most."

WORDS AND PHOTO: ASSISI HOSPICE



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CAREGIVER SUPPORT AT HOME

The Tsao Foundation's Director of Nursing, Ms Fong Yoke Hiong, shares practical tips to empower caregivers in their roles and ensure that they take care of themselves too.



Sister Fong has been with the Tsao Foundation for the last 30 years, serving older people in the community. Her training in Gerontological Nursing from Oxford Brookes University and a master's in gerontology from King's College London give her the drive to promote quality care for older people. Besides training nurses at the Tsao Foundation, she also taught nurses who have taken up the Specialist Diploma in Community Gerontological Nursing at Ngee Ann Polytechnic. She believes that “teachers can change lives” and thus supports the Tsao Foundation's Hua Mei Training Academy in conducting

training on eldercare-related topics. As a nurse educator and a home healthcare nurse when needed, she also participated in the Ministry of Health Community Nursing Competency Framework and serves as co-chair for the Community Nursing Service Standards Committee.

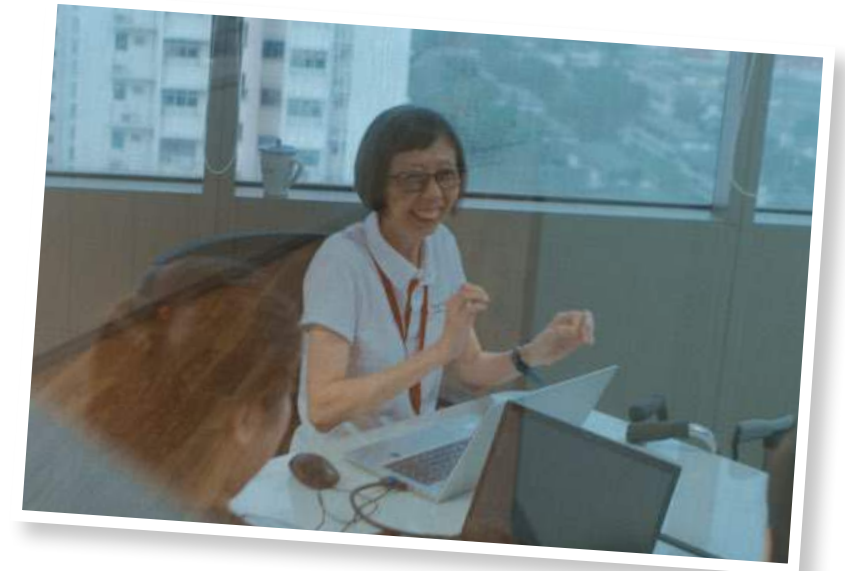
What are caregivers most anxious about?

Caregivers are often anxious about their loved ones' comfort when on palliative care. They are physically and emotionally stressed and worried. If he or she is the only one providing care, the experience can

be a very lonely and discouraging journey without the support of other family members or friends.

Caregivers frequently worry that their love ones will be hungry, so they make every effort to provide the older person their favourite food or fluid, which they may be too tired or drowsy to enjoy. I will patiently explain to the caregiver, the older person will not feel hungry, and we can feed when they are more awake. We can also use a spray bottle to deliver fluids into the mouth to prevent dryness and keep the mouth moist with Oral Seven mouth gel.

Right: Sister Fong having a lively tutorial session with her team of nurses at Tsao Foundation (Still from an upcoming documentary, *Nowhere Like Home*, presented by Tsao Foundation and produced by Very); Opposite page: Sister Fong packs medication during a home care visit.



What practical support do palliative home care nurses provide caregivers with?

Teaching caregivers to manage their loved ones' symptoms is one of the best ways to ease their worries about care. As a palliative home care nurse for Tsao Foundation's Hua Mei Mobile Clinic, which provides care at clients' homes, I do not work alone but have my team members — a doctor and social worker — to help in addressing the biopsychosocial needs of their loved ones. This partnership offers the caregiver confidence in knowing that they are working with a professional team, bringing comfort and assurance to the family.

How can caregivers feed, bathe, and lift their loved ones with dignity?

I will work alongside them to give them the confidence in providing care to their loved ones with dignity. First, I will assess the client's functional ability and caregiver's competency in performing these daily activities. Tailor-made interventions will need to be made based on the assessment outcome and health literacy of the caregiver. I would suggest bed sponging and even hair washing if the caregiver really wants to do something for their loved ones but is incapable of bathing them.

How do palliative home care nurses support caregivers' psychosocial needs and empower them in their roles?

Working alongside caregivers on their physical caregiving tasks and hearing stories of their loved ones, or their fears and concerns, gives me opportunities to understand and address their worries together

with my team. By recognising their dedication and contributions to the loved ones they care for helps to meet their psychological needs and roles.

How would you advise caregivers to care for themselves?


Physical and psycho-emotional exhaustion often confront the caregivers. I always encourage carers to claim their rights to food and rest. Good sleep is very crucial for resting the fatigued body and preventing them from being ill. This is an essential part of self-care. In addition, if necessary, seek respite care.

How can caregivers reframe a difficult situation to focus on the positive?

Caregivers often blame themselves when their loved ones take their last breath without them witnessing the last moment. Such a painful experience can be reframed as their loved ones wanting to spare them

from separation anxiety and to make them feel at peace with the departure. This can hopefully help them put things in perspective and aid their grieving process.

Could you share the most memorable experience you've had with a caregiver?

I met this family two years ago, and the mother had advanced dementia that affected her ability to swallow food, resulting in repeated hospital stays and a lot of stress for her daughter and helper at home. Our team at Tsao Foundation taught the caregiver the appropriate way to reduce the risk of choking, which helped prevent hospital readmission. Working alongside them, the daughter and helper felt more confident in caring for and feeding the mother. The daughter was even able to serve her mother her favourite bean paste. Both mother and daughter were pleased to be able to make the situation more manageable. 

INTERVIEW FONG YOK HIONG

“GOOD SLEEP IS VERY CRUCIAL FOR RESTING THE FATIGUED BODY AND PREVENTING THEM FROM BEING ILL.”

SISTER FONG YOK HIONG

EMPOWERING YOU TO TAKE OWNERSHIP OF THE END-OF-LIFE JOURNEY

The role of a caregiver to someone in their end-of-life journey can often come quite suddenly, leaving you with little time to equip yourself with information on what to do.

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- **Subscribe to our e-news** to find out when we're holding free talks, workshops and events.

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