Is super-aged Singapore prepared for dementia?

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Singapore keeps its dementia advocacy gentle and sanitised, bereft of awkwardness, an approach that lets the masses comfortably distance themselves, says the writer. But what is needed is to tear down the polite veil and let rip the fact that dementia is around us, a terminal medical crisis that devastates, she stresses. PHOTO: ST FILE

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Earlier conversations and support for literacy matter before families reach a crisis point.

Rosie Ching

My "Lao Ma" was the only great-grandmother I ever knew. In my girlhood, she was the epitome of neatness, quiet selflessness and tireless efficiency. Gentle, caring, never sitting down for a moment, sewing, serving, washing, clearing, the sole hyper-efficient housekeeper who alone went to the market, cooked all meals, swept the floor, and cleaned the toilets.

It was also she who gradually forgot where she kept the rice, wandered disoriented in the HDB estate she had lived in for the past two decades, who couldn't tell one relative from the other.

My grand-relatives fought over her: those who believed these were merely senior moments she could snap out of if only she tried hard enough, against others who grew frantic that something was genuinely wrong.

I heard news filtered down in hushed whispers of Lao Ma's descent into helplessness, her last fall, the final hospitalisation, the violent disagreements, her confusion nobody could name. Dementia, if it were spoken of at all, evoked senility, madness, lunacy and stigma of the-then Woodbridge Hospital, today's Institute of Mental Health (IMH).

Lao Ma's death certificate dated 1993 declares she died of heart failure.

In the wry words of a doctor friend years later: "Doesn't everybody?"

For all the damage this creeping malice can wreak on mind and body, passive awareness is something we just cannot afford as Singapore careens into a super-aged reality.

Dementia demands an uncompromising national readiness to strip away the discomfort that makes us look away, the ability to spot the early signs taught from a young age, a life skill as foundational to survival in modern Singapore as financial prudence or digital literacy.

THE UNCOMFORTABLE TRUTH

Thirty-three years on, Singaporeans today know far more about the condition that Dr Alois Alzheimer documented more than a century ago.

Findings from three nationwide surveys conducted since 2019, involving nearly 11,000 people, show that misconceptions are steadily giving way to better understanding. Fewer people now mistake dementia for mere forgetfulness or see it as an inevitable part of ageing.

With rising inclusion in everyday life, the lived stigma of rejection and loneliness reported by persons living with dementia has fallen by almost 40 per cent, according to the 2026 Remember.For.Me. survey which I led with 89 Singapore Management University undergraduate students.

These are statistically significant signs of a nation moving in the right direction. It has taken the greater part of a decade for our national dementia awareness to limp into today's "low-average", up from the abysmal "low" where it languished for years.

But beneath this improvement hangs a problematic underbelly. Many Singaporeans remain uneasy engaging directly with someone living with dementia.

Three in four report embarrassment with and decisive avoidance of people living with dementia, the highest levels in seven years. Many feel acutely unprepared. Even primary care partners signal escalating discomfort that mirrors that of the general public.

We have pulled out all stops to remind every citizen of our super-aged status and extended our First World lifespans to the premium tier worldwide, only to find ourselves living where the majority knows and understands the dementia diagnosis but finds its presence too embarrassing to confront.

Strikingly, seven in 10 do not know where to seek dementia support for a loved one. But we can hardly be blamed.

There is a profound difference between general awareness and knowing what to do when your parent starts wandering on familiar routes, when your spouse gets trapped in an endless loop of the same questions, or when they look into your eyes and no longer recognise your face.

The irony is that those who know the least feel most comforted. The same seven out of 10 respondents with the weakest connection to dementia, lowest awareness, and highest levels of stigma are precisely the ones who hold the greatest faith that Singapore's infrastructure will provide them the care and support should this insidious menace one day sidle into their lives.

The lack of dementia awareness challenge we faced seven years ago is now no longer as urgent as that of a paucity of readiness. Eighty per cent in our study admitted they became aware of dementia services only after it cast its shadow over their family.

It isn't surprising. Not one of the thousands of students I have met has ever said they were taught or encountered any awareness campaign about dementia.

While a dementia course at university for freshmen may appear a little of an ask, surely exposure to ageing, caregiving, memory, human dignity and essential life skills deserves a rightful place in our educational system. Today's students are tomorrow's care partners.

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WHAT MORE NEEDS TO BE DONE?

Singapore has come a long way in the battle. The network of elder daycare centres with integrated dementia daycare support services appears vast. Hundreds of Dementia Go-To Points have sprung up islandwide in public spaces like train stations and malls, alongside dementia-friendly neighbourhoods and wayfinding murals.

State-backed support now exists for care partners, offering training, financial, emotional, workplace and respite assistance, including subsidies for dementia day care. Polyclinics and general practitioners are trained in dementia assessment and intervention.

These are extraordinary achievements when juxtaposed against the deafening silence that surrounded my Lao Ma's generation.

But for all the labour invested, there is curiously little knowledge about how the final end-products make life better for everyone in the dementia space.

In conversations with respondents, one carer recounted how their polyclinic completely missed their father's dementia which presented as violent and aggressive behaviour, leaving them adrift for many painful months believing he was just being a "cantankerous old man", until a CT scan finally revealed his structural neurodegeneration.

The accessibility of dementia daycare centres is another massive sticking point for carers, that such facilities should be a standard fixture in every single housing estate.

We may build the physical hardware with the best of intentions. But what of the social software? As it stands, the operational burden still rests largely on the disoriented individual or the already heavily laden carer.

Bluntly put by a primary carer, "In our busyness, who in the blazes is going to look out for a person who looks like he's wandering around confused and take him to this go-to point when there's just bloody no one there?"

Another carer, having already looked after a father with dementia and now commuting regularly by train with a mother facing the same condition, has never heard of, let alone seen, a single Dementia Go-To Point.

We keep our dementia advocacy gentle and sanitised, bereft of awkwardness and more difficult sentiments, an approach that lets the masses comfortably distance themselves. When major transport operators or supermarket chains run collaborative dementia projects, they are too often seen as passive, box-checking exercises for annual reports.

This is where I think we should take a leaf out of the book of the raw, unapologetic strategy in the UK, where independent dementia organisations screen emotional primetime television ads that depict the gut-wrenching, real-life scenes of carers or persons with dementia.

One was of a son declaring how his mother "died again, and again, and again" every time the disease stripped away a piece of her. When British viewers complained of "unjustifiable distress" the ads caused, the regulators ruled that the harsh and undiluted truth in its fullness was necessary to break societal inertia and apathy.

Singapore's dementia space needs a similar injection of unfiltered, high-impact media. Tear down the polite veil and let rip the fact that dementia is around us, a terminal medical crisis that devastates.

THE TRUE MEASURE OF PROGRESS

How do we wish to be treated when we, in the haunting words of 51-year-old Auguste Deter, the first person diagnosed with Alzheimer's disease, "have lost ourselves, so to speak"?

At last count, seven in 10 of my parents' lifelong friends, now spanning their 70s to 90s, suffer from moderate to extreme dementia.

Some live by themselves in their own homes, a few are cared for by their children who are themselves certified seniors with health problems of their own as serious as cancer, and at least one lies in a vegetative state in a care home.

My English teacher, a beloved school icon and easily the most dazzling of all encyclopaedias that ever walked, spent the last decade of his life in a care home, where the sheer severity of his agitation often required restraint to keep him and those around him safe. His screams pierced his days and nights in a language no one could understand. The devastation wrought by the disease left behind a lingering sense of helplessness even in his doctor.

The true measure of how far along we are in this interminable journey is how we value someone when what we once loved and treasured in them becomes harder to see.

It will show in how aggressively we democratise preventive medicine, grading us on our speed in embedding advanced biomarker blood tests for dementia into the heartland polyclinics and subsidised hospitals.

Tests like Precivity and Lumipulse can now detect Alzheimer's with over 90 per cent accuracy. Both are widely accessible across the West, but jarringly unavailable in Singapore at clinics I asked early this year.

It will reveal how prepared a family is for the storm long before it hits. Adult children will actively prepare for Lasting Power of Attorney, Advance Care Planning and caregiver support networks before a memory begins to fail.

Our national education curriculum will adapt to a fast-greying society where historically low fertility rates leave fewer young shoulders to bear an ever-growing weight of care. Schools will teach our children not merely what dementia is as another sterile textbook disease, but how to identify its early signs and respond with understanding and confidence instead of deliberate avoidance.

Our progress will be measured in how empowered we feel in seeking help earlier without the sting of embarrassment, how protected carers feel, and whether someone living with dementia continues to experience uncompromised dignity even after the memory of who they are fades from themselves.

My Lao Ma never received the help she desperately needed. She bore in silence what must have been a frightening dissolution of mind, memory and identity, leaving a family grieved and torn apart.

Our family will always carry a truth no official death certificate will ever record.

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