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After learning to live with COVID-19, it was now time for

Singapore to turn the page on the pandemic and exit the acute phase.

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COMMUNITY



THE COMMUNITY QUILT WHICH WAS A PROJECT INITIATED BY TEMASEK POLYTECHNIC SCHOOL OF DESIGN IN COLLABORATION WITH BERNINA (SINGAPORE) PTE LTD, COMPRISES DESIGNS AND MESSAGES OF ENCOURAGEMENT AND GRATITUDE FROM MEMBERS OF THE PUBLIC INCLUDING SOME SCHOOLS, THE SWISS EMBASSY, AND TEMASEK POLYTECHNIC STAFF, STUDENTS AND ALUMNI TO FRONTLINE HEALTHCARE WORKERS AT THE NATIONAL CENTRE FOR INFECTIOUS DISEASES (NCID). IT IS NOW DISPLAYED AT THE NCID GALLERY.

NEARING

midnight on March 31, 2022, the traffic was building up at Woodlands Checkpoint, with vehicles waiting to enter Malaysia under the new Vaccinated Travel Framework. COVID-19 arrival tests and quarantine were no longer mandated for fully vaccinated travellers between countries with the same open border regulations, such as Singapore and Malaysia.

At 11:59pm, vehicles revved to action and tooted their horns, as the crowd

cheered, clapped and shouted their thanks into the air. Normalcy had returned to the Singapore-Johor Causeway, after more than two years of restricted movements.

Over the next three days, more than 176,000 people would cross the land border at Woodlands and Tuas. Thousands more took to the skies, jetting off for their long-delayed vacations, leading to record-long queues for passport renewals.

Singaporeans were not only relishing their regained freedom for travel, but also reclaiming many parts of their lives –

from dining in a big group to socialising at events and weddings – that were lost to the pandemic. The virus, which had mutated into the Omicron and XBB strains, was still circulating, but there was a sense that COVID-19 seemed under control.

Along with refreshed travel frameworks, community restrictions were loosened too. The five-person cap on gatherings was raised to 10, and mask-wearing, while still mandatory indoors, became optional at outdoors settings.



CHAPTER 13

LIVING WITH COVID



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When announcing the easing of rules in March 2022, Prime Minister Lee Hsien Loong said Singapore had reached a “major milestone” in its COVID-19 journey – with most of the population vaccinated, or recovered from the virus.

“Taking all things into consideration, we believe that we are now ready to take a decisive step forward towards living with COVID-19,” said PM Lee in a televised speech on March 24.

Over the next few weeks, more rules were eased. By the end of March 2022, the Ministry of Health (MOH) had removed the cap on group sizes and the safe distancing

rule between individuals and groups. Workers were also able to resume on-site work fully.

A month later, on April 26, 2022, the Disease Outbreak Response System Condition, or DORSCON, was lowered from orange to yellow, as the disease was assessed to be mild, and being contained. It took over two years to stand down the alert that was first raised to orange in February 2020.

This was what MOH and the whole healthcare family were working tirelessly towards – for the pandemic to transition to endemicity.

(Clockwise) People dining in at Marina Bay Sands on Apr 11, 2022; Motorists and motorcyclists at Tuas Checkpoint cheer, welcoming the reopening of the land borders between Singapore and Malaysia on Apr 1, 2022, after a two-year closure due to COVID-19; Office workers go for lunch at the central business district on Apr 26, 2022, the first day of Singapore lifting most of its COVID-19 restrictions.

THANKFUL FOR THE TEAM EFFORT

ASK MR NG HOW YUE which were the low points in the three years of fighting COVID-19, and he would name without hesitation: the outbreak at foreign worker dormitories, the circuit breaker and the Delta wave.

Looking back, the Permanent Secretary for Health Development is thankful that everyone went beyond the call of duty.

“I know all the teams were working past midnight. So I’m quite proud that at the darkest moments, people were doing their best,” he said, his voice cracking with emotion and his eyes tearing up.

After a short pause to regain his composure, he shared how the team beat a “cunning foe” that continuously evolved, forcing everyone to constantly adapt their response in this long-drawn war with the virus.

“COVID-19 continuously changed in different directions,” said Mr Ng. “The focus was more on how we could respond

as the adversary changed its tactics.”

For Mr Ng, fighting COVID-19 challenged all his multi-tasking skills.

Since the virus made landfall in January 2020, his task tray was constantly filled to the brim, from conducting global surveillance of the virus to assessing the national stockpile of medical equipment to preparing isolation facilities.

“Every day, there was something new, there was something to respond to,” he said. “The virus changes daily. The situation changes daily. There were teams that were responding and needed guidance and action.”

There were also endless meetings with the different teams to discuss operations and assess the healthcare situation on the ground. Regular meetings, which took place every day – weekends and public holidays included – started at 4pm, and could last for more than eight hours.

“It’s a battle cycle – intelligence,

operations, supplies and public communications,” he explained. “But it was not too bad for myself, I could get five hours of sleep daily.”

While there were dark days and challenges, especially when the case numbers spiked and hospitals were under strain, he was heartened to see the healthcare system and its people still trudging on and working well. “People were all cooperating, and the frontlines were holding up.”

At the peak of the pandemic, MOH’s Contingency Task Force, which Mr Ng co-chaired, met up to three times a day, with some meetings dragging on for hours due to the sheer number of plans and policies to work through.

While the pace of work was punishing, the teamwork was inspiring, as members from different departments and ministries contributed unstintingly to keep Singapore safe.

Mr Ng How Yue was the co-chair of the Ministry of Health’s Contingency Task Force, which met regularly to assess the COVID-19 situation on the ground and discuss operations. These meetings happened as frequently as three times a day, with some sessions dragging on for hours due to the sheer volume of work.



KEEP CALM AND REMAIN OPEN

Throughout the pandemic, Minister for Health Mr Ong Ye Kung was convinced of one thing, staying open instead of shutting down, unless the situation called for stricter measures such as a lockdown.

“I suppose it is a survival instinct,” he explained about his conviction. Pandemics have occurred before, and time and again, they have ended either with medicine or when fear of the disease wanes.

“At some point, society will recover, it will. It is how you recover. So your starting point must be that you will recover and be restored, the question is how,” he added.

His guiding framework was simple: to avoid shutting down unnecessarily. As the Minister for Education during the start of the pandemic, he did not close schools for a prolonged period by creatively bringing forward the school holiday in June by a month.

While schools were suspended during the circuit breaker, select groups of students who needed additional support continued to return to school. The decision to keep schools largely open was informed by scientific evidence that the initial virus strain typically affected children less severely, he said.

When he moved to helm the Ministry of Transport in July 2020, he sought to



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Schools were largely kept open in the early phases of the pandemic, with the exception of circuit breaker.

retain Singapore’s connectivity by proposing an air travel bubble with Hong Kong. The experimental project would allow people to travel between the two cities freely. But it was ultimately scrapped when both sides decided on different strategies to manage COVID-19.

“I was very determined that we must find a way to open up our aviation sector. If not, then at least, we tell the world that we are determined to open up. That’s very important,” he said.

And when he took over the reins at MOH during the Delta wave, Mr Ong did not give up his conviction to open up. He was a firm believer in mapping out a blueprint for living with COVID-19.



As the Minister for Health, **Mr Ong Ye Kung** was convinced that Singapore had to gradually move towards living with COVID-19. To do so, everyone would have to exercise social responsibility by adhering to safe management measures and getting vaccinated to achieve minimum protection against the virus.

“I suppose whoever decided that I should come to MOH might have taken my inclinations into account. They should know that if I landed here, I would be quite determined to open up,” he shared with a wry smile.

These decisions were not leaps of faith, but were calculated risks. He was also clear that should things not go according to plan, there would be consequences, both for the country and himself.

“In MOE, I was determined to keep schools open. But if the virus had spread amongst children and unfortunately they fall very sick or die, I was prepared to lose my job. I was very clear about that,” he said bluntly.

“It was the same thing here in MOH. If our process of transitioning to

endemicity was like what the United States or Britain had to go through, and if our people were unable to accept it, I would lose my job.”

Fortunately, Singapore did not succumb to the virus. As the Delta strain was replaced by the more contagious Omicron variant at the end of 2021, the nation plodded on without adding more tightening measures. It was on its road to treating COVID-19 as endemic.

For a country to live with COVID-19 successfully, it requires trust that everyone will do the right thing. “In a crisis, you can’t handle everything,” said Mr Ong. “Instead you tell people: ‘This is it. These are the considerations, this is how you keep yourself safe, I’m putting it to you as simply as possible. Do your part, help each other.’”

LOOKING FOR LIGHT AT THE END OF THE TUNNEL NOT ONCE OR TWICE, BUT THRICE



Healthcare personnel were deployed to help battle the COVID-19 clusters that sprang up in migrant worker dormitories (above); Elderly folks, identified as a vulnerable group, were among the first in Singapore to get vaccinated (right).

IN EARLY 2020, when Singapore was still grappling with the first wave of COVID-19, Permanent Secretary for Health Mr Chan Yeng Kit had harboured hopes that the novel coronavirus would play out like how SARS did. Things would be intense, but in a few months’ time, the worst should be over.

So in townhall meetings with his colleagues at MOH, he rallied them to push on for the next couple of months. “I tried to encourage them that things would be over soon, there would be light at the end of the tunnel,” he said.

That light never quite came. Singapore went out to battle multiple COVID-19 clusters in migrant workers’ dormitories around the island, and even instituted a circuit breaker



to stem community spread.

Furthermore, by the end of the year, Singapore had procured its first batch of vaccines, and was kickstarting its nationwide campaign to vaccinate as many people as possible, beginning with frontline healthcare workers and elderly folks.

“The first light didn’t quite materialise, but vaccines were the next light at the end of the tunnel,” said Mr Chan.

He sent out email notes to colleagues sketching out Singapore’s plan to vaccinate everyone and build immunity against the virus.

“The concept of herd immunity was still there then, and it boosted people’s hopes that COVID-19 was not a never-ending

journey. There was an endpoint to look forward to.”

Yet, despite the nationwide vaccination exercise, the Delta wave swept across the country, leading to a surge in cases and COVID-19 hospitalisations.

“The virus was smarter than we had hoped for and it kept mutating. Eventually, the concept of living with COVID-19 became our third light at the end of the tunnel.”

“There is no one silver bullet, but with vaccines, with safe management measures, we can depress the transmission and infection rates. That was the last light at the end of the tunnel,” he said.

Moving from pandemic to endemic seemed to be the best way out for the nation.

THE MENTAL TOLL OF LIVING THROUGH COVID-19

“IN THE PANDEMIC, WE SAW THE MENTAL HEALTH OF MANY DETERIORATING.”

– MS VOON YEN SING,
SENIOR ASSISTANT DIRECTOR OF CLINICAL SERVICES
AT THE SINGAPORE ASSOCIATION FOR MENTAL HEALTH

CALLS TO THE HELPLINE run by the Singapore Association for Mental Health (SAMH) peaked during the circuit breaker, which started on April 7, 2020.

There was about 50 per cent increase in calls between April and June in 2020, compared to the same period a year before, going by estimates of staff at the non-profit social service organisation, which promotes mental wellbeing through creative, outreach and rehabilitation services.

But callers do not always call to talk about the pandemic, said Ms Voon Yen Sing, Senior Assistant Director of Clinical Services at SAMH. “They say they are highly stressed and anxious, experiencing anxiety and/or depression. Some were able to identify certain stressors that they were experiencing, while others were unsure,” she said.

“Then at some point in the conversation, they talk about how COVID-19 has affected them. It disrupted their routines. They can’t go out, they can’t go to work, they feel stuck and unsure of what’s going to happen next.”

Beyond being a public health crisis, the pandemic has also been viewed as

a mental health crisis. As the pandemic dragged on, some felt themselves sinking even deeper into despair. Even those who were physically healthy and with no mental illnesses found themselves languishing and feeling unsettled.

“We have been educating the public that mental health is a spectrum, and a state of well-being. Just because you have no mental illnesses doesn’t mean that you are mentally healthy,” said Ms Voon.

“In the pandemic, we saw the mental health of many deteriorating. The concern is that if you don’t do anything about your mental health, it may lead to an illness, like depression or anxiety.”

The upside, however, was that because so many people shared similar feelings of anxiety and dread, mental health was no longer a taboo topic to be talked about in hushed tones. More people were also seeking help.

SAMH received 2,719 calls in 2020, a 27 per cent increase compared to 2,143 in 2019. Other agencies reported a similar rise too. Samaritans of Singapore, a suicide prevention non-profit organisation, logged 39,492 suicide and crisis-related calls in 2020, an 18 per cent

increase from the 33,387 calls it got in 2019.

The helpline run by the Institute of Mental Health also received 48 per cent more calls between April and December in 2020, compared to the same period in 2019.

Ms Voon also observed some difference among those seeking help. “Previously, those who called the helpline were generally more ambivalent about going for counselling. But now, when people call, they ask us for a counselling appointment.”

“COVID-19 brought the importance of mental health to the fore. There was increased awareness, which is a good thing,” said Ms Ngo Lee Yian, Executive Director of SAMH.

Her wish is for the continual growth in awareness and emphasis on mental health, even as life gradually gets back on track.

“I hope people don’t become forgetful and relegate mental health to the back burner again, and think that they are powerful. We can’t be complacent. There is no health without mental health,” said Ms Ngo.

(From left) Ms Voon Yen Sing and Ms Ngo Lee Yian from the Singapore Association for Mental Health (SAMH).

During the pandemic, many individuals experienced stress, anxiety and sadness, said Ms Voon, Senior Assistant Director of Clinical Services at SAMH.



REBOOTING HEALTHCARE

In the darkest days of Singapore’s fight against COVID-19, there were silver linings too. For instance, the pandemic gave healthcare administrators a vision of what an alternative health ecosystem could look like, and provided a test bed for a new, decentralised model of healthcare.

“Our healthcare system is very centralised in that everybody who is ill enough would come to the hospital. With COVID-19, we validated that a decentralised system would work,” noted Associate Professor Dan Yock Young, Deputy Director of Medical Services (Health Services Group) at MOH.

“In fact, to keep our hospitals sustainable, and not to have to keep building more and more hospitals, we have to decentralise our care.”

The aim of a decentralised model, said Assoc Prof Dan, was to reserve hospital spaces only for those who truly need them.

For this vision to work, it needed a strong ecosystem where individual healthcare components were integrated with one another.



PHOTO: MOMENT VIA GETTY IMAGES/D3SIGN

“In the past, the system was very fragmented. Hospitals, primary care, polyclinics – everybody was operating in their own silos, he added. “But COVID-19 literally brought the whole healthcare system together.”

To cope with the healthcare demands of the pandemic, community care facilities, primary care providers such as general practitioners and polyclinics, and even telemedicine were tapped to ease the load on hospitals. Telemedicine in particular, said Assoc Prof Dan, was something the medical fraternity had tried to do for years but there was never an impetus until the pandemic hit.

The pandemic offered this decentralised healthcare system a test run. “During COVID-19, the very sick ones went to hospitals, the moderately ill ones went to

COVID-19 treatment facilities, those with mild symptoms to polyclinics, while the rest did teleconsultations. Every unit had a role in this whole system,” he noted.

As Singapore emerged from the pandemic, it now had a chance to relook its healthcare model and update it.

It was based on this vision of decentralised care that MOH drafted a White Paper on Healthier SG, a healthcare reform plan that focuses heavily on preventive care. The paper, submitted to Parliament in September 2022, provided Singapore with a blueprint to manage the challenge of an ageing population.

Presenting this plan to Parliament in October 2022, Mr Ong told the House that Singapore’s COVID-19 response of vaccinating, testing, and self-isolating were very much preventive in nature. It was

proof that preventive care could be integrated with acute care in hospitals and treatment facilities.

If Singapore could replicate this effort in its fight against debilitating chronic illnesses, it would be a crucial step in managing the challenges of an ageing society.

“Ageing is a bigger pandemic than COVID-19, the burden of diseases is far greater than COVID-19,” noted Mr Ong. “With COVID-19, it gives us waves. But ageing is an inexorable line and it will just keep going on. It is long term.”

Added Assoc Prof Dan: “People always say, ‘Oh I wish COVID-19 will go away and we can go back to normal life.’ But that will be the biggest mistake. There are so many things we have learned from COVID-19. We must not go back.”



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▲ Bukit Panjang Polyclinic was among six polyclinics that extended operation hours to receive patients with acute respiratory infection symptoms in 2022.

◀ 721 new beds were rolled out at the F1 Pit Building from November 2021 to monitor stable patients who were nonetheless at risk due to chronic conditions.

“I CAN BE COURAGEOUS TOO”

IT WAS EARLY 2020, and Mr Rajendran Rajesh, then a 20-year-old student, had just enrolled in the Diploma in Nursing at Nanyang Polytechnic.

With regard to his career choice, the reactions from people around him were negative initially. His parents warned him that the COVID-19 virus would be here to stay. If he chose to be a nurse, his work would be more than tough.

“My parents had friends asking them ‘Why is your son still doing nursing? Why not do something else?’,” said Mr Rajesh, now 23. He will continue his journey with a nursing degree later this year.

What caused the concern were the things said in the news and on social media, where nurses and healthcare workers shared stories of how they were shunned in public when they wore their uniforms.

But Mr Rajesh was unfazed. He was inspired to become a nurse whilst serving as a combat medic during his National Service. He found it rewarding to help and care for patients, who are often vulnerable and afraid.

As the number of COVID-19 cases rose, he was further convinced of his decision to join the nursing profession. “I didn’t want to be someone who said, ‘This is not the right career for me’ just as we are battling a pandemic. I wanted to step up and contribute,” he maintained.

Still, there were fears. When he was sent to the Institute of Mental Health for on-the-job training, he would attend to a patient and spend time chatting with them, only to find out the next day that the person had tested positive for COVID-19.

“There was always this fear that I was harbouring the virus. I had a lot of mixed feelings – I wanted to do this work, yet I didn’t want to fall sick and spread the virus,” he shared.

But fears and anxieties aside, he saw resilience and strength in his seniors. “There was this sense of togetherness – these nurses were helping our country, they didn’t let COVID-19 beat them up, they were courageous. It made me realise that I could be courageous too,” he said.

When **Mr Rajendran Rajesh** decided to pursue a nursing diploma in 2020, many around him reacted negatively to his decision. But he remained unfazed, as he found the career to be meaningful.



TENDING TO THE CHILDREN

APART FROM TREATING CHILDREN WHO WERE ILL,

HEALTHCARE WORKERS HAD TO EASE THE FEARS OF PARENTS TOO.

MS SHARIMILA SUBRAMANIAM entered the ward with a COVID-19 test kit. She would perform a nasal swab on the patient and leave – the whole procedure should take no more than five minutes.

Yet when the young child saw the swab stick in Ms Sharimila’s hands, he leapt off the bed and ran straight for the toilet, refusing to be tested.

What was meant to be a five-minute affair stretched on for 45 minutes. Ms Sharimila, donned in full PPE and perspiring beneath the layers, had to calm, coax and cajole the child to complete the test. The caregiver, often a parent allowed to accompany the child in the ward, had to step in to help too.

This became an almost-daily affair for Ms Sharimila, Assistant Nurse Clinician at KK Women’s and Children’s Hospital (KKH), at the height of the Delta and Omicron waves in 2021.

The two COVID-19 variants resulted in sharp increases in the number of infected children who needed to be hospitalised. By January 2022, a total of 17,699 children below the age of 12 had been infected with COVID-19 since the start of the pandemic, with 2,586 hospitalised.

Associate Professor Thoon Koh Cheng, Chairman of the Hospital Infection Control Committee and Senior Consultant of Infectious Disease Service at KKH, noted: “At one point, more than half of our paediatric wards were converted to COVID-19 isolation wards. We set up tents outside the emergency department to house more patients, and even then there was an overflow.”

Apart from treating children who were ill, healthcare workers had to ease the fears of parents too.

While some children had more serious complications such as pneumonia, bronchitis and croup, fortunately most were well enough to be discharged within three days. But once the kids felt better, they were fidgety and grew frustrated being cooped up in a tiny room. The doctors and nurses at KKH found themselves having to manage a group of tiny, lively and increasingly restless patients.

“We had to make sure we occupied the children with something, be it paint brushes, Lego sets, toys and crafts. Thank goodness the wards had television sets. We also gave the parents the password

to the Wi-Fi – whatever we could give, we gave,” said Ms Sharimila.

At times, the staff had to care for parents too. Some parents who had accompanied their child to be isolated in KKH ended up contracting the virus, even developing a high fever.

“Sometimes, parents would be so sick that they were not even able to take care of their child. It was scary for the parents too, to realise that they were falling so sick,” she shared.

Caring for adults was a new experience for Ms Sharimila. “As a paediatric nurse, I never expected that I would have to treat adults and even pregnant mums who were isolating together with their child,” she said. “But COVID-19 was a learning journey for me. If I was needed, I had to go, even if it was to nurse a profile of patients that I was not familiar with.”

The pandemic also gave the public insights into the work of healthcare workers. “Whatever that happens in a hospital often remains there, but COVID-19 was an eye-opener for everyone. People saw what went on in the hospitals, how nurses contributed to the team and provided care to patients,” she added.

IT WAS NOW TIME TO TURN
THE PAGE ON THE PANDEMIC
AND EXIT THE ACUTE PHASE.



PHOTO: MINISTRY OF COMMUNICATIONS AND INFORMATION

In a televised announcement on Feb 9, 2023, Deputy Prime Minister and **Minister for Finance Lawrence Wong**, co-chair of the Multi-Ministry Taskforce, announced that Singapore would step down its COVID-19 measures and exit the acute phase of the pandemic.

ESTABLISHING A NEW NORM

As the world welcomed 2023, the COVID-19 situation had also reached a turning point. In Singapore and across the world, the number of new cases was declining and viral variants of higher severity had not emerged, even with the resumption of travel and tourism.

With vaccinations, the Singapore population had developed a high level of hybrid immunity to the virus. Eight in 10 had received the minimum level of protection of at least three or four doses of vaccines. The risk of COVID-19 infections causing severe illnesses or death was much lower.

After learning to live with COVID, it was now time to turn the page on the pandemic and exit the acute phase.

On February 9, 2023, the Multi-Ministry Taskforce (MTF) made a televised announcement. Co-chair of the MTF, Deputy Prime Minister and Minister for Finance Mr Lawrence Wong, said: “It is time to step down the remaining measures in Singapore and establish an endemic COVID new norm.”

The DORSCON level would be lowered from yellow to green, indicating the mild nature of COVID-19. Protocols 1-2-3, which made home recovery the norm, would be phased out too.



PHOTOS: THE STRAITS TIMES © SPH MEDIA LIMITED

As pandemic measures were phased out, tourist attractions and public gatherings came back to life.



Border measures would also be further eased. Travellers who were not fully vaccinated did not need to produce a negative pre-departure COVID-19 test result, and neither would they be required to buy COVID-19 travel insurance.

Finally, and more importantly, the MTF, which was convened in January 2020, would now be stood down – signalling that the chapter of managing COVID-19 actively was now closing. But it did not mean that the virus was vanquished. Vigilance was still needed, and work must go on to support the country’s healthcare structures, systems and workers.

As Singapore set up a new norm in this post-pandemic world, Mr Ong made clear that life was no longer the same and MOH would remain prepared to deal with any new challenges.

“Healthcare workers will largely be masked up at work, a constant reminder that the COVID-19 virus is still with us, and we have to be ready for the next variant of concern, or the next pandemic,” he said at an MTF press conference.

“Today’s announcement is significant but does not mean that our state of alert and preparedness is over. In fact, the more society stands down, the greater the responsibility for the healthcare system

and our healthcare workers.”

Like many other countries, Singapore had lived through one of the most devastating pandemics in modern history, a three-year nightmare that forced billions of people across the world to stay home, emptied once-vibrant tourist sites, shut down workplaces and cut off borders.

It had emerged with one of the lowest COVID-19 death rates in the world, and was now bustling back to life. Yet, the nation remained stoic. Singapore was ready to move on, carrying with it crucial lessons from the pandemic that will prepare it for the next crisis.