Good morning everyone! My name is Gordon. This is Yutong, Chuan Yew, Kendrea, and Yitong.

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I will be guiding you through the introduction and the analysis of case study. Yutong will be introducing the target situation. Chuan Yew, Kendrea and Yitong will elaborate on the proposed interventions. Welcome to Technology? So EZ!

Have you ever wondered why elderly are often seen as digitally inferior? As Singapore progresses and endeavours to become a smart nation, technology advances at a very fast pace. Elderly currently face difficulties in keeping up with the advancement of technology. If this is left unresolved, they will have troubles integrating into society.

In this project, we propose a 3-phase intervention. Phase 1 is a publicity campaign, phase 2 is the reality show, Technology? So ez! And phase 3 is the 'Silver Techie' carnival.

The case study we have chosen to research on is workers disrupted by mental illness in the workplace. We gained meaningful insights from studying the pre-existing managements of the disruption caused by mental illnesses on patients in the workplace, guiding us in designing interventions to help alleviate the disruption elderly faces.

Both the mental illness patients and elderly are uncomfortable with the social stigma towards them. For the mental illness patients, they are regarded as unfit to work due to their condition while the elderly are regarded as too old to learn new skills such as technology. These existing perceptions result in low participation of pre-existing managements.

The following are the managements that we have studied.

The first management is the counselling service provided by the Employee

Assistance Programme. Employees can choose between face-to-face or video counselling. For offline counselling, employees risk being identified as a mental health patient, causing reluctance to go for counselling services, rendering measures to be ineffective. On the other hand, online counselling is convenient and accessible for patients seeking help as they do not have to be there physically.

The second management is roadshows brought onsite. Roadshows are held at the sites of companies. For example, the 4-hour long stress management roadshow by the Health Promotion Board allows employees to visit the roadshow at their own convenience. Staff will be equipped with effective stress management skills through interactive activities. For example, terrarium-making is used to involve the workers. This way, mental illness patients are more engaged and willing to participate when they are preoccupied with fun-filled hands-on activities.

We have derived three lessons learnt from these two managements. Firstly, we have learnt that interventions should be designed such that they are convenient and accessible to the public, attracting greater participation amongst our target audience. Subsequently, by utilising interactive methods such as hands-on activities, the target audience would be more enticed to participate. Lastly, interventions that focus on spreading awareness of the target situation should be designed, eliminating stigma. In summary, I have introduced our project and given an analysis of our case study, deriving the lessons learnt. Now I will hand the time to Yutong, who is going to introduce the target situation.