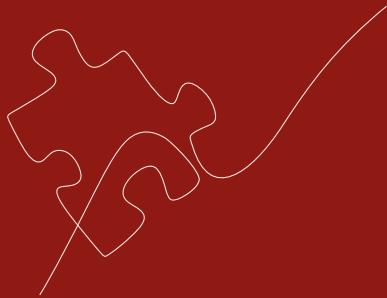


ANNUAL  
REPORT  
2020



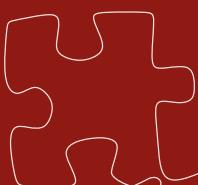
# Stronger As a Community

# Contents



*HealthServe is a non-profit organisation dedicated to providing healing and hope to migrant workers.*

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## Word From Our Chairman



*Ms Chan Chia Lin*

CHAIRMAN  
HealthServe Limited

*“HealthServe has been a community at heart. We are immensely heartened to see this community widen hugely in 2020, as many Singaporeans, expatriates, corporates, foundations, churches and other institutions rallied around our efforts to support the migrant workers in distress. Over 1,000 individuals responded to our call for volunteers during the height of the crisis.”*

2020, defined by the Covid-19 pandemic, has been a watershed year for HealthServe and the migrant worker community which we serve.

It is a year where our team was confronted with a myriad of challenges. Prior to Covid-19, we focused on supporting the most vulnerable migrant workers. With Covid-19, the entire community was in distress. The explosion of needs from the migrant worker community accelerated our adoption of various technologies, ranging from the launch of hybrid medical tele-consultations and tele-counselling to a dedicated Covid-19 microsite featuring an AI-powered chatbot.

2020 is a year where our migrant worker community was propelled into the spotlight. Their living conditions, economic hardships and mental strain were brought to the forefront of our consciousness. As was their contribution to our nation.

It is also a year where the government more actively engaged migrant workers and migrant worker non-governmental organisations (NGOs). HealthServe is privileged, alongside other NGOs, to have been asked to support the work of the Inter-agency Taskforce during the Circuit Breaker period. We were also invited to be a member of the Project Dawn taskforce, set up by the Ministry of Manpower (MOM), to promote better mental wellbeing of our migrant worker community.

2020 has moreover been a year of significant organisation change. Our co-founder Dr Goh Wei Leong stepped down as Chairman after 14 years of inspiring leadership and dedicated service. We are grateful to Wei



Leong and co-founder Tang Shin Yong for their pioneering work in bringing hope and healing to migrant workers in need. We welcomed Serene Chee, Choy Peng Wah and Gail Lien as new board members, and welcomed back previous board member and psychiatrist Dr Chan Lai Gwen who led our mental health work during the dormitory lockdowns. We established a Mental Health Advisory Panel comprising mental health professionals. We also appointed Dr Benjamin Kuan as Head of Medical Services and as Deputy Executive Director, tasked with the overall responsibility of overseeing our client-facing work.

HealthServe has been a community at heart. We are immensely heartened to see this community widen hugely in 2020, as many Singaporeans, expatriates, corporates, foundations, churches and other institutions rallied around our efforts to support the migrant workers in distress. Over 1,000 individuals responded to our call for volunteers during the height of the crisis. Voices of Singapore and their children's choir produced a moving music video to show solidarity with the migrant workers, raising funds for HealthServe. Oliver Wyman volunteered their services pro-bono for a third year to help refine our long-term strategy for chronic disease management and mental health services. Our pool of donors surged to 8,680, a 22-fold increase from 2019, with donors giving both in cash and in kind. Barclays Bank and Blackstone have also been key funders in our Covid-19 relief work. Beleaguered F&B and retail establishments looked beyond their own challenges to champion

fundraising campaigns for us, which were amplified by our media friends and social influencers. We are deeply grateful for and truly humbled by the overwhelming show of support and encouragement.

The management and staff of HealthServe have worked tirelessly and relentlessly in the past year. Amidst the disruptions and restrictions, they have embraced technology to keep our services running. Despite the surge in infections in the dormitories, they, together with our volunteers, selflessly attended to patients at our clinics and continued walking the ground to support affected workers.

Looking ahead, we are excited to further expand our services in two key areas – chronic disease treatment and mental health services. We will continue to integrate technology in our service delivery, stepping up physical and mental health education to migrant workers through web and app-based platforms. Recognising the importance of cultural affinity, we will hire staff and recruit volunteers with the ability to speak the workers' native languages, and also train peer leaders and coaches in psychological first aid.

As we embark on this new season of growth to bring Christ's healing ministry to migrant workers in need, we look forward to your continued support and collaboration.



## Word From Our Executive Director

*Mr Michael Cheah*

EXECUTIVE DIRECTOR  
HealthServe Limited



2020 was a year of unexpected battles, and blessings. The spread of the Covid-19 pandemic amongst our migrant worker community spurred our team to tackle and overcome a string of challenges unprecedented in HealthServe's history.

Perhaps one of our biggest hurdles was the announcement of the DORSCON Orange restrictions which led to the overnight loss of over 95% of our medical volunteers. As a lean organisation supported by hundreds of medical volunteers, this dealt our clinic operations a huge blow. To mitigate the pressing issue, we worked closely with the Ministry of Health (MOH) to swiftly implement a telehealth solution that allowed volunteer doctors to dial into our Geylang clinic, so that we could continue serving our patients who were then in even more distress.

Recognising that the pandemic was also causing a toll on our workers' mental wellbeing, HealthServe escalated plans to expedite the launch of multi-tiered initiatives, from tele-counselling to in-person individual counselling and virtual group intervention sessions. We also partnered medical institutions at the community care facilities and collaborated with onsite "morale teams" to develop and co-organise psychosocial activities. Drawing upon our 14-year

experience of supporting migrant workers, we also published a recommended framework for psychosocial support of the workers in lockdown.

Teams were activated daily to support workers at the purpose-built and factory-converted dormitories. We engaged residents and operators at Covid-19 facilities such as the cruise ships, hotels and floatels. Working closely with authorities on the ground, we were able to identify and extend increased support to patients in need of additional help.

To plug communication gaps and combat the spread of false information, we rolled out a slew of targeted educational materials across new digital platforms, translated in workers' native languages. Various helplines, manned daily by hundreds of volunteers, were also launched to provide distressed workers more avenues to reach out. At its peak, hundreds were calling or texting these helplines every day.

We would not have been able to meet the needs of the tens of thousands of migrant workers without the thousands of volunteers, donors and partners who selflessly gave their time, effort, money and other gifts. Thousands of donated items for migrant workers and our clinics came through our doors. We have been encouraged, inspired and humbled by the outpouring of support in our year of greatest need.

As we adjust to a new normal, 2021 and beyond spells exciting times of growth for HealthServe. We have embraced the challenges and opportunities that have come our way and are looking forward to more breakthroughs that will enable us to better serve our migrant worker community's growing needs. These include a 24/7 crisis helpline for distressed migrant workers – a first in Singapore – and other new digital solutions that can extend our reach and improve access to our services.

We hope that you will continue your journey with us as we take big steps forward to ensuring every migrant worker has access to affordable healthcare services, and a life of dignity, right here in Singapore.



## About HealthServe

*“We believe in a society where every migrant worker lives a life of dignity.”*

Established in 2006, HealthServe is an IPC registered charity that believes in a society where every migrant worker lives a life of dignity. We seek to bring healing and hope to the migrant worker community through the provision of healthcare, mental health programmes, case work, social assistance and other support services.

There are close to one million work permit holders in Singapore. Access to affordable healthcare and mental health support can be a problem for low wage migrant workers. Primary healthcare including chronic disease and dental treatments are expensive for these workers, as foreigners in Singapore do not receive subsidies for healthcare at public institutions. By law, workers are supposed to be covered for both inpatient and outpatient treatment by their employers but, sadly, not all are. In addition, fear of repatriation and cultural and language barriers also contribute to migrant workers not receiving proper treatment.

The more unfortunate workers may get injured at work and could end up losing their jobs and suffering a loss of pay for a protracted period. The wait for their workman compensation applications to be processed and resolved can take months or even years.

From a single clinic providing GP services in Geylang primarily for migrant workers in the construction, marine and process (CMP) sectors, HealthServe has since expanded our range of services to include specialist medical, rehabilitation and dental services, casework support, social assistance, and counselling. In 2019, we also launched Singapore's first comprehensive mental health programme for migrant workers and their support network.

Today, HealthServe remains very much a volunteer-run organisation. Our operations are run by a lean team of staff and hundreds of medical and non-medical volunteers and interns.

### *Our Vision*

A society where every migrant worker lives a life of dignity.

### *Our Mission*

To serve disadvantaged migrant workers in Singapore through healthcare, counseling, casework and social assistance.

To advocate for and raise awareness of the needs of migrant workers.

To bridge communities through meaningful partnerships and be a platform for effective volunteerism.



# Board of Directors

**CHAIRMAN & CO-FOUNDER**  
(17 Oct 2006 - 31 Jul 2020)



*Dr Goh Wei Leong*  
GP, Manhattan Medical Centre

**CHAIRMAN**  
from 1 Aug 2020

**DIRECTOR**  
from 1 Aug 2014

Nominations and HR Committee (Chairman)  
(from 1 Sep 2020)  
Fundraising and Finance Committee  
(up till 30 Jun 2020)



*Chan Chia Lin*  
Director, Lam Soon Cannery Pte Ltd  
Vice President, National Council of Social Services

**VICE CHAIRMAN**  
from 1 Aug 2020

**DIRECTOR**  
from 17 Aug 2017

Medical Services Committee (Chairman)  
Audit Committee  
(up till 31 Dec 2020)



*Dr Jeremy Lim Fung Yen*  
CEO, AMILI (Asian Microbiome Library)  
Director Global Health Programme, NUS Saw Swee Hock School of Public Health

**DIRECTOR**  
from 1 Aug 2014

Services Committee (Chairman)



*Dr Calvin Chong Peng Choon*  
Assoc. Prof, S'pore Bible College

**DIRECTOR**  
from 30 Jun 2013

Finance Committee (Chairman)



*Chan Kum Kit*  
Partner, Verity Partners

**DIRECTOR**  
from 21 Sep 2020

Mental Health Advisory Panel Committee



*Dr Chan Lai Guen*  
Consultant Psychiatrist, Tan Tock Seng Hospital

**DIRECTOR**  
from 21 Sep 2020

Fundraising and Engagement Committee (Chairman)



*Choy Peng Wah*  
Former finance professional

**DIRECTOR**  
from 21 Sep 2020

Finance Committee  
Services Committee



*Gail Lien*  
Governor, Lien Foundation

**DIRECTOR**  
from 1 Mar 2012

Services Committee



*Matthew Saw Seang Kuan*  
Partner, Lee & Lee



*Serene Chee*  
Chairman, LCEC Christ Methodist Church

**DIRECTOR**  
from 21 Sep 2020

Audit Committee (Chairman)



*Susan Kong Yim Pui*  
Director, QED Law Corporation

As of 31 Dec 2020



# Board Committees

## AUDIT

### CHAIRMAN

*Susan Kong* (Board Member)

### MEMBERS

*Choy Peng Wah* (Board Member)  
*Ms Lee Yuit Chieng*  
Chief Operating Officer, LUMIQ

## NOMINATIONS AND HUMAN RESOURCE

### CHAIRMAN

*Chan Chia Lin* (Board Member)

### MEMBERS

*Dr Jeremy Lim* (Board Member)  
*Janelle Tan*  
Relationship Director, Financial Services,  
Dunn & Partners  
*Janet Koh*  
VP of Human Resources, SMBC Nikko  
Securities

## FINANCE

### CHAIRMAN

*Chan Kum Kit* (Board Member)

### MEMBERS

*Gail Lien* (Board Member)  
*Serene Chee* (Board Member)

## MEDICAL SERVICES

### CHAIRMAN

*Dr Jeremy Lim* (Board Member)

### MEMBERS

*Dr Gan Wee Hoe*  
Head of Department of Occupational and Environmental  
Medicine, Singapore General Hospital  
*Dr Lam Jie Feng, Joshua*  
Medical Doctor  
*Dr Shawn Vasoo*  
Clinical Director, National Centre for Infectious Diseases  
*Dr Tan Thong Kwan, Benjamin*  
Specialist Periodontist, Poon and Phay Dental Surgeons  
*Dr Yeo Cheng Hsun Jonathan*  
Director and Family Physician, Family Medicine Clinic Chinatown  
*Dr Yoong Su-Yin, Joanne*  
Senior Economist and Director, Research and Science, CESR East

## SERVICES

### CHAIRMAN

*Dr Calvin Chong* (Board Member)

### MEMBERS

*Gail Lien* (Board Member)  
*Long Chey May*  
Group Chief Patient Officer, National  
University Health System  
*Matthew Saw* (Board Member)

## FUNDRAISING AND ENGAGEMENT

### CHAIRMAN

*Choy Peng Wah* (Board Member)

### MEMBERS

*Chandrima Das*  
Global Head of Managed Investments, Standard  
Chartered  
*Darren Tay*  
Head of Treasury Management, Fullerton Fund  
Management  
*Gopi Mirchandani*  
CEO, NN Investment Partners Singapore  
*Serene Chee* (Board Member)

## MENTAL HEALTH ADVISORY PANEL

*Dr Chan Lai Gwen* (Board Member)

*Dr Donna Lim*

Adjunct lecturer and counsellor, Singapore Bible  
College

*Dr Jeremy Lim* (Board Member)

*Dr Mok Yee Ming*

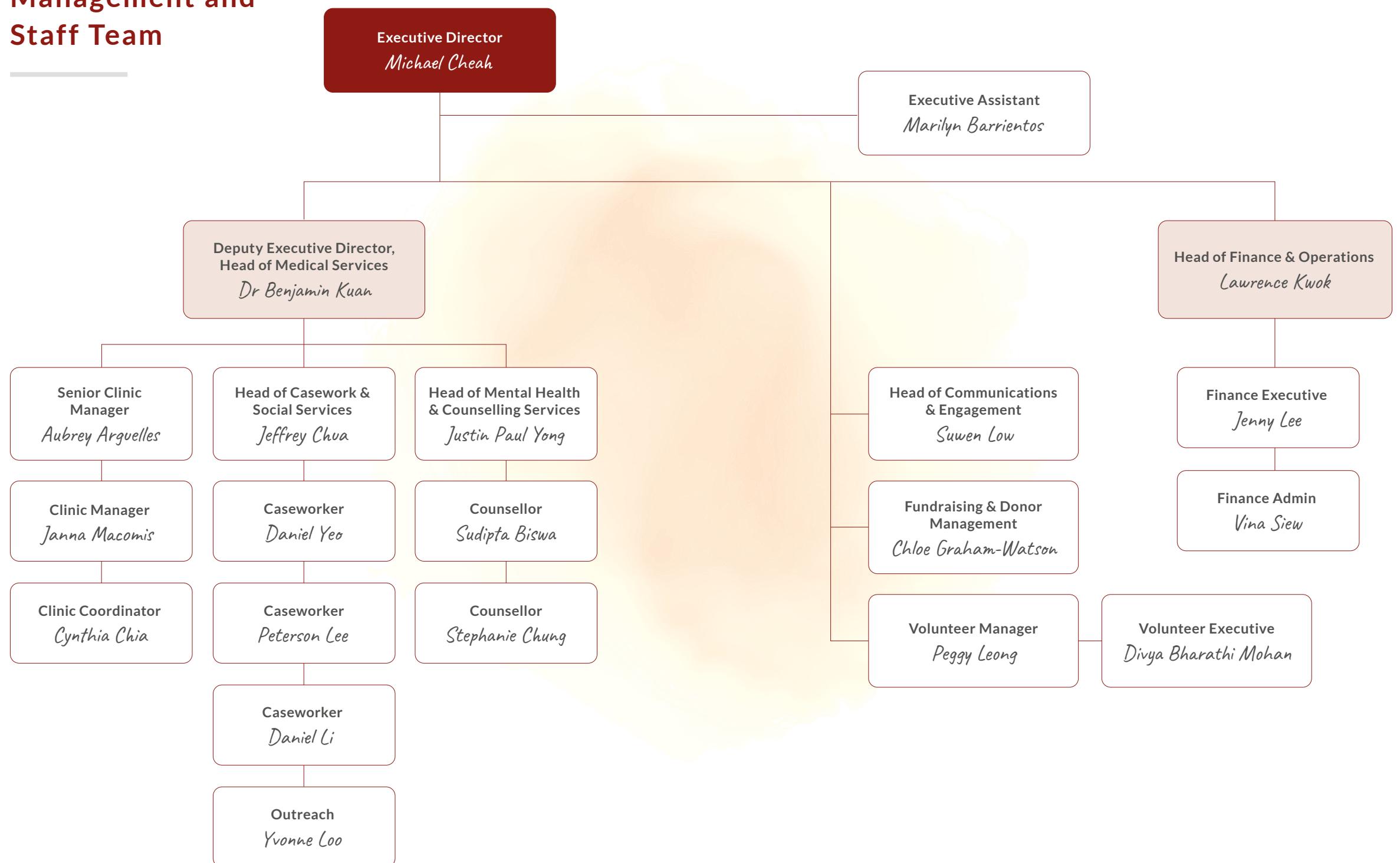
Assistant Chairman, Medical Board (Clinical),  
Institute of Mental Health

*Dr Mythily Subramaniam*

Assistant Chairman, Medical Board (Research),  
Institute of Mental Health



## Management and Staff Team



As of 31 Dec 2020

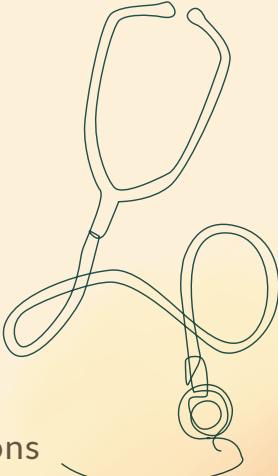


## 2020 Highlights



5,850

Total medical and dental consultations



5,880

Total migrant workers supported through our mental health services



840

Migrant workers supported through counselling and telecounselling

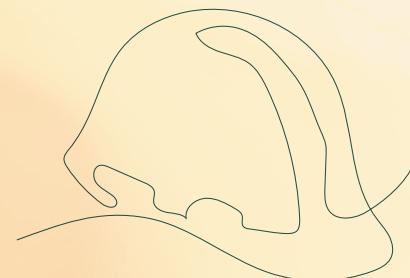


7,500

Migrant workers engaged through on-ground programmes

820

Total migrant workers supported through casework and social services

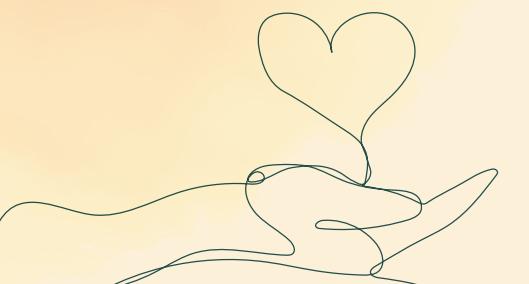


\$617,000

Social services aid disbursed to migrant workers who suffered work injuries or faced employment issues

17,780

Free meals provided through our food projects



\$5,175,000

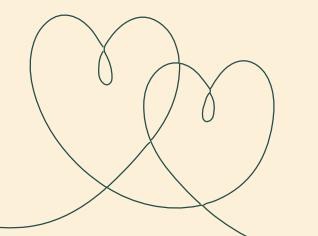
Raised from individual, corporate and institutional donors

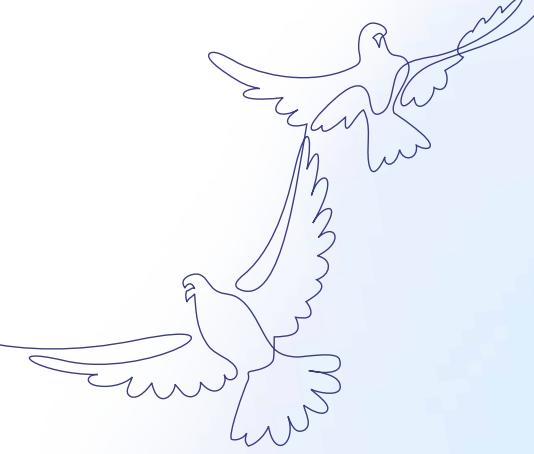
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Research projects conducted

610

Volunteers who supported our work



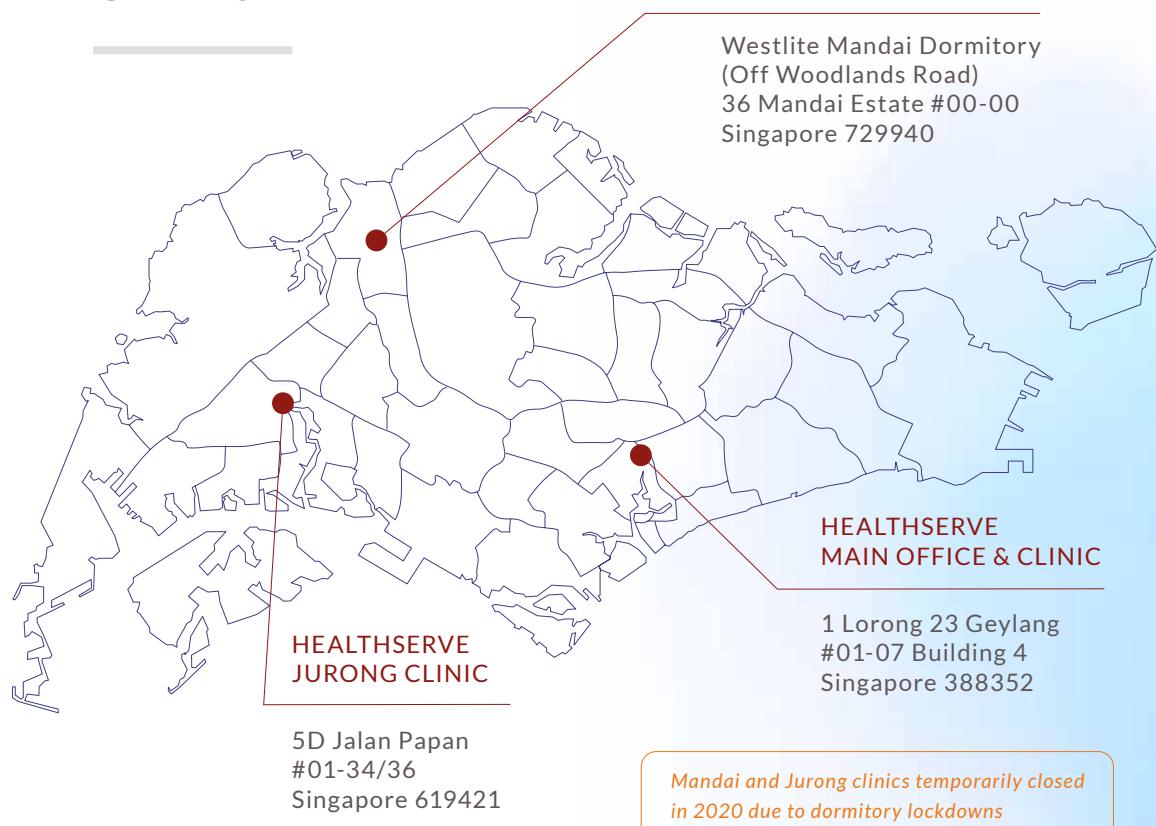


Medical Services





## About Our Clinics



Our community medical and dental clinics are located near areas popular with migrant workers - Geylang (East), Mandai (North) and Jurong (West). On top of providing low wage migrant workers access to affordable medical and dental care, we also offer bi-weekly specialist orthopaedic, dermatology and rehabilitation consultations in occupational therapy, physiotherapy and traditional Chinese medicine (TCM).

We charge a flat fee of \$8 for our GP clinics and \$15 for dental services for both consultation and medication. However, fees are waived for migrant workers who are Special Pass holders or those who have been referred by other partner NGOs.





## 2020 Overview

2020 was a year of challenges, adaptation and growth for HealthServe's Medical Services team.

With the government's announcement of DORSCON Orange arising from the Covid-19 pandemic, enhanced precautionary measures were implemented to minimise the risk of further transmission of the virus in the community. This resulted in the overnight loss of over 95% of our medical volunteers in February 2020. Together with the gazetting of dormitories, we made the difficult decision to temporarily shut all clinic services in Jurong and Mandai and to consolidate the services at Geylang.

**Working with MOH, we deployed a telehealth solution that allowed volunteer doctors to dial into our Geylang clinic so that we can continue seeing our patients.**

We initially struggled to procure personal protective equipment (PPE) for our clinic operations and community. However, the need was quickly met by an outpouring of public donations after media coverage and individuals spread the word about our need. **These timely PPE donations allowed our team to continue clinic sessions with confidence, and to also share them with dormitories and workers in need.**

**Our chronic disease management service saw a steady increase in demand, with 50% of current visits to our clinic now involving at least one chronic medical condition, up from 25% in Jan 2020.** This was the result of global travel lockdowns. Prior to the Covid-19 pandemic, most migrant workers with chronic diseases would obtain medications from home, given the high costs of unsubsidised medicines here as well as the fear of being repatriated should their employers learn about their conditions. The great need for chronic care was likewise observed by

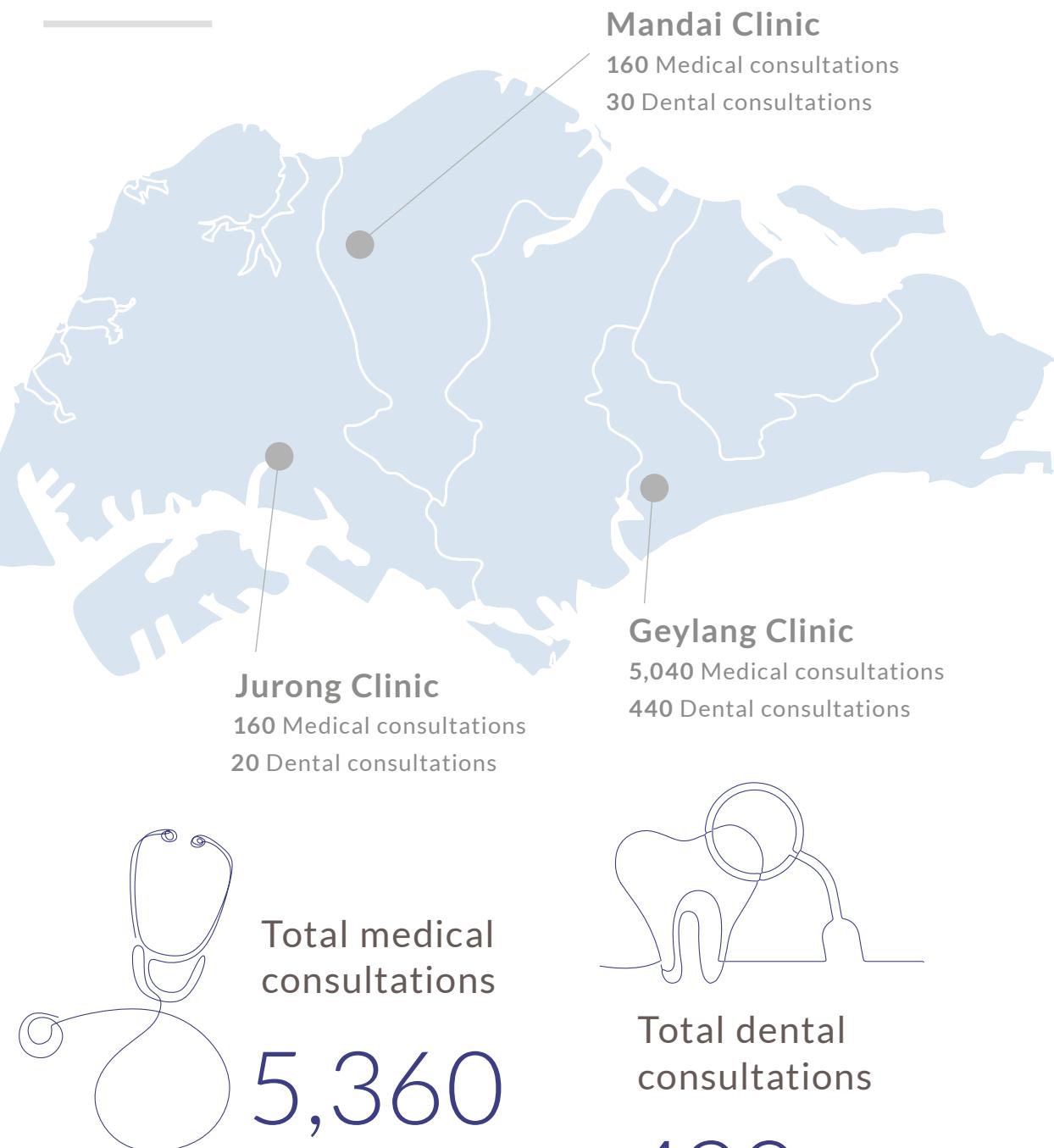


frontline medical teams, with a case incidence rate of about 5% reported islandwide. HealthServe stepped forward to receive direct referrals from the hospital teams for workers who had recovered from Covid-19.

HealthServe's dental services were curtailed during the Circuit Breaker period. Due to limited resources and the closure of our Jurong and Mandai clinics, we prioritised emergency or severe dental cases. While Circuit Breaker restrictions might have eased, the backlog of demand meant that the wait time to see a dentist was still several months at the end of 2020. To reduce the wait time, another dental chair will soon be added to our Geylang clinic.



## 2020 Highlights



### In-house specialist consultations

490

(comprising complex chronic diseases, orthopaedic, dermatology and gastroenterology)



### Specialist referrals

85



### Physiotherapy/ Occupational Therapy sessions

24



## Hear From Our Patients

Guo

CONSTRUCTION WORKER  
FROM CHINA

*"If we visit [private] clinics, the consultation fee is high and there's a language barrier, they can't understand me. That's why I came here. For those people from my hometown with fevers or headaches, I will recommend them to come here."*

Guo has been working in Singapore as a construction worker since 2009. After learning of HealthServe through his church, he has been coming to us regularly for the past 11 years, and also actively recommending HealthServe to others.

Guo suffers from skin problems. Prior to this, he had to pay for costly consultations and treatments at private clinics out of his own pocket. Today, our volunteer GPs and dermatologists at HealthServe treat him at a fraction of the cost he used to pay.

*"I have quite a good impression of HealthServe, their services are convenient for us migrant workers. And they are almost always able to understand us, or they have translators. Even at those big hospitals, they sometimes can't understand what I'm saying."*

Rona

SHIPYARD WORKER  
FROM BANGLADESH



*"HealthServe has made me feel more secure about being in a foreign country and reminded me not to be afraid or lonely in case I need medical or emotional support."*

"I was very upset," recalls Rona, when he had to choose between paying for dental treatment and sending money back home to his family in April 2020. He had visited a private dentist before the dormitories went into lockdown. The treatment for his toothache would cost \$200-\$300, a huge chunk of his monthly pay.

His employer was not willing to help out as he was a Special Pass holder and was not working. Faced with the difficult decisions between easing his pain and sending money home to his family, Rona decided to forgo treatment. His pain worsened as he was moved around to different facilities after being diagnosed with Covid-19. Unable to swallow or eat properly, Rona couldn't sleep at night and recalls feeling extremely helpless and alone.

After recovering from Covid-19 in August, he was moved to a cruise ship where we met him and heard about his dental problem. Soon after, our volunteer dentist extracted his tooth and filled in his dental cavity. Rona is grateful to have received free dental treatment at HealthServe, for "if not, I [will have to] continue [being in] pain, everyday cry then sleep," he shares.



## Hear From Our Clinic Volunteers

Dr Suzie

CLINIC VOLUNTEER,  
DOCTOR



A long-time volunteer with HealthServe, Dr Suzie's commitment to serving the migrant worker community is well-known at HealthServe. Her service extends beyond treating the workers for medical problems. She often brings baked treats for our migrant brothers and donates useful items to them. During DORSCON Orange, she even contributed tips on making hand sanitisers and suggestions for handicraft activities for our brothers in lockdown.

*"When we decide to volunteer, we often think of ourselves as serving and giving. In my journey, I realise that I have received more than I have given. And amidst the challenges of 2020, I have learnt much from the migrant brothers we serve and the volunteers alongside me."*

*When faced with challenges, we are forced to react and adapt. God reveals His will and draws us to Him in many ways. The migrant brothers have shown resilience, faith and trust in our system and us. In many ways, this is how we should look to our Father who provides and guides us.*

*I have been truly blessed by my work at HealthServe. While I am about to be a grandmother, I hope to continue serving when time permits.....as and when the Lord leads."*

Jayne

CLINIC VOLUNTEER,  
PHYSICIAN'S ASSISTANT



*"I like coming back to HealthServe because everyone is working towards the same goals, be it in casework or the clinic."*

A medical student in Ireland, Jayne started volunteering with HealthServe in 2017 during her summer break. She returned in 2018 to join HealthServe's casework internship programme and again in 2020 to volunteer at our clinics.

As a senior medical student, she supported the clinic as a physician's assistant where she helped with teleconsultations, physical examination and clarifying questions that doctors may have with the patients. She noticed more migrant workers suffering from mental stress during the lockdowns, with many workers complaining of headaches and insomnia. She enjoys conversing with migrant workers each clinic session and hopes that Singaporeans can find opportunities to get to know the migrant workers here.

Jocelyn

CLINIC VOLUNTEER,  
NURSE



*"I feel that most patients are very appreciative. Once, on my way to HealthServe at Geylang, I got lost, but a man recognised me and led me, "Auntie, you want to go clinic is it?" They are very friendly and give thanks from their heart. It's very heartwarming that they remember and recognise me."*

A retired nurse, Jocelyn has been volunteering at our Mandai clinic regularly since 2017. When HealthServe had to close the Mandai clinic during the Circuit Breaker period, she switched to volunteering at our Geylang Clinic.

A multitasker with a bundle of energy, she is often found chatting happily to migrant workers and volunteers, helping to change dressings and teaching patients how to take their medication.



## Hear From Our Volunteer

*Adelene*

VOLUNTEER  
OCCUPATIONAL THERAPIST



*"We don't have to meet very big needs...sometimes, just [meeting their] basic needs can help them."*

*"Through this volunteering, I got to know more about their culture, debts incurred from high recruitment fees, and I feel glad that I can play a part in relieving part of their burden."*

Twice a month, occupational therapist Adelene comes to Geylang to help our injured migrant friends with rehabilitation therapy. The clients who are referred to her are ones whose rehabilitation sessions elsewhere were insufficient in addressing their anxieties of coping with disability, pain and future livelihoods, or were discontinued. Many of her clients are motivated to get better and she is glad to have seen improvement in most cases. Each case of improved mobility and decreased reliance on painkillers, she says, is a success story.

As she sits down with each client to identify their concerns, she continues to learn more about their culture and the personal difficulties they face. "I feel glad that I can play a part in relieving part of their burden," she shares. Her experience has also helped her realise how fortunate Singaporeans are and has further encouraged her to help where she can.

## Hear From Our Clinic Staff

*Aubrey*

CLINIC MANAGER



*"There are many beautiful stories I can share that I have had the privilege to hear. But if I write it all I don't think it will have an ending. One thing is certain - the pandemic has affected each one of us hugely."*

"Running the clinic during the Circuit Breaker period was very challenging. Because of restrictions on medical personnel working across facilities, our volunteer pool shrank, and we were left with a very limited number of volunteer doctors, nurses and pharmacists. I am glad we pivoted to telehealth to keep the clinics running.

While we were still able to operate, there were days that we had to ask patients to come back at the next clinic session as there were too many of them. At the start of the pandemic, we had a shortage of PPEs. The public soon started to hear about what HealthServe does. Individuals then started dropping by the clinic with donations - one or two boxes of N95 masks, disinfectants, and sometimes drinks. Companies reached out too with larger donations.

It was also during this pandemic that the migrant workers felt even more that they were part of our HealthServe community. Patients would often express appreciation for HealthServe's support, be it consultations at the clinic, referrals to specialists or social assistance from our casework team. "



## Hear From Our Clinic Interns

Rebecca

CLINIC INTERN



*“Serving as a medical intern in HealthServe has granted me many unique experiences but the ones that I hold closest to my heart are undoubtedly the heartfelt interactions that I have had with migrant workers.”*

A patient once asked me what he could do to improve his hypertension condition besides taking the medication prescribed. He was eager to learn about the diet and lifestyle changes that he could make to better manage his blood pressure. He also expressed his difficulty in exercising regularly as he only has one to two Sundays off per month because he works overtime to earn more money.

While I was saddened by this, I was grateful to be able to share just a fraction of his burden as I conversed with him and hopefully eased some of his worries.

These simple but meaningful encounters reminded me of the precious relationships that we are able to build with our migrant brothers through seemingly ordinary interactions. While going through the motions of our clinic operations might seem mundane and challenging at times, I am always comforted by and reminded of the tangible impact that we are making when interacting with our patients as I serve alongside our dedicated team of volunteers, interns and staff!”

Min Ann

CLINIC INTERN



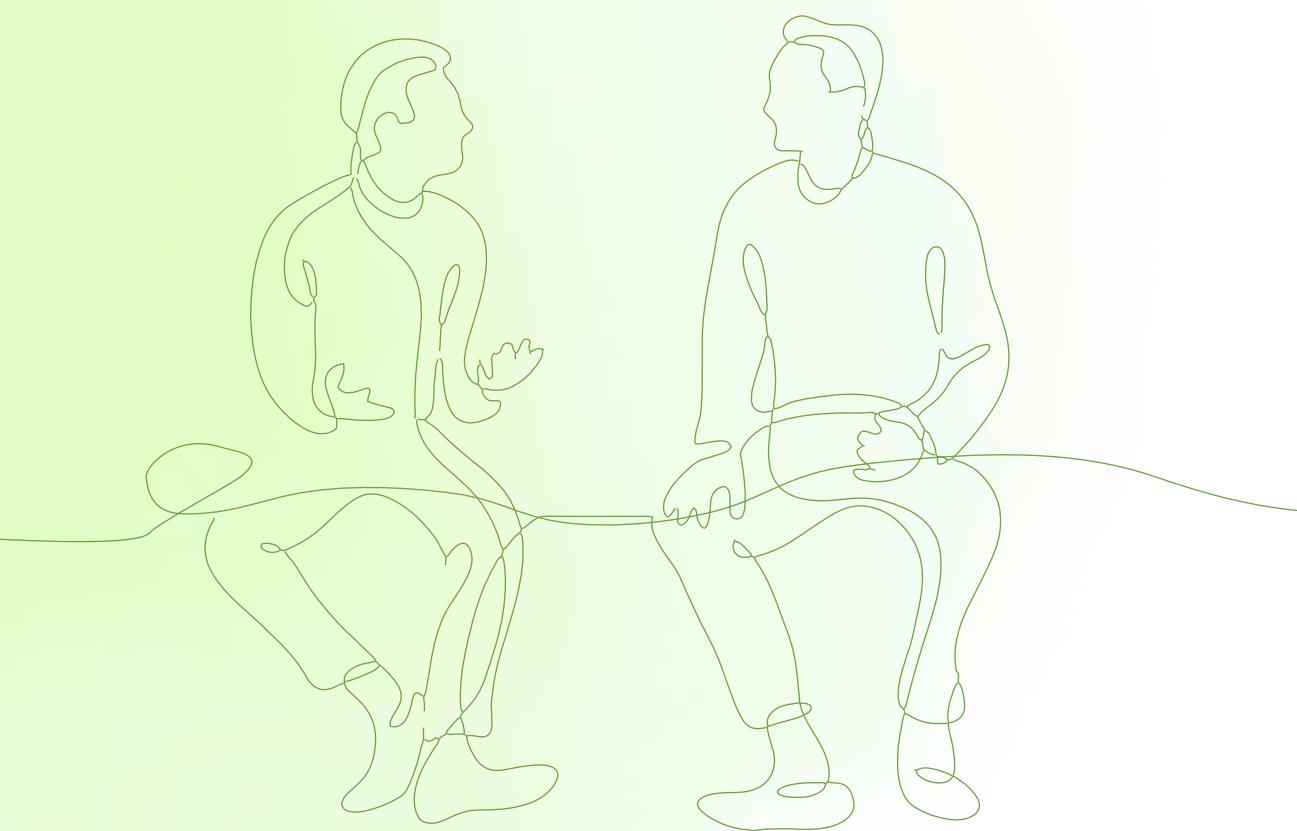
“During my time at HealthServe, I have had the opportunity to interact with many of our migrant brothers. On one occasion, I asked a patient if he wanted to learn stretches to alleviate back pain, a common problem faced by patients coming to our clinic. He eagerly tried out all the stretches together with me, sharing that he had never learnt how to properly take care of his back and had been plagued by frequent back pains.

He shared that he has been coming to HealthServe since 2018 and that HealthServe has been of great help to him. He gets cheaper rates for his diabetes medicines, and has also learnt a lot from the volunteers and doctors about disease and pain management.”

*“In addition, he appreciated how HealthServe’s volunteers take the time to find out more about our patients’ emotional wellbeing. It struck me how a simple conversation can easily make someone’s day, and how migrant workers are really much like us. Sometimes, just getting to know them on a personal level can relieve any stress they might be having.”*



Mental Health &  
Counselling Services



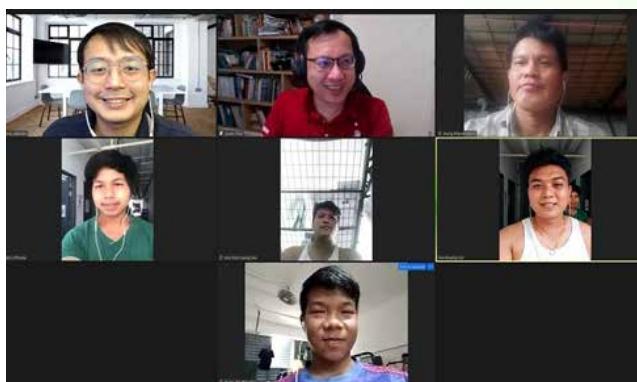


# 2020 Overview

Incepted in 2019, HealthServe's Mental Health & Counselling Services team saw a surge in demand in 2020 as the Covid-19 pandemic and dormitory lockdowns exacted a heavy toll on the mental health of the migrant worker community. We escalated plans to roll out different tiered initiatives to support the workers' mental wellbeing.

## Virtual Telecounselling Clinic

Migrant workers could sign up through HealthServe's website and helpline to access a safe platform for them to converse with native-speaking care persons. They shared with us their concerns surrounding Covid-19, employment-related issues, financial needs, and also on sick family members they were very worried about.



## Professional Counselling Service

Clients in greater distress were referred to a team of five native-speaking professional counsellors through zoom calls for more in-depth interventions. Referrals also came from government ministries (e.g. MOM, MOH, MSF), Covid-19 isolation facilities and dormitory operators.

## Group Intervention Sessions

Our volunteer psychiatrists also conducted group therapy sessions for about 140 workers, with many referrals from employers, dormitory operators, government agencies, medical teams and peers.

The team worked closely with medical institutions at the community care facilities at the Singapore Expo (Woodlands Health Campus (WHC) and SingHealth) and Big Box (National University Hospital of Singapore (NUHS) and the Institute of Mental Health (IMH). Engagements were done in different ways:

- Setting up self-grooming kiosks to empower resident patients to provide haircuts for one another
- Conducting on-ground engagements to find out the patients' anxieties, share resources and connect them to provide mutual support
- Collaborating with onsite "morale teams" from different institutions to develop new psychosocial activities

## Mental Health Education

HealthServe also expanded our mental health services upstream by providing psychoeducation to different levels of stakeholders, from migrant workers to supervisors and managers. The training ranged from mass psychoeducation sessions in the native languages of the participants to full workshops for smaller groups on topics such as psychological first aid.



## 2020 Highlights

5,880

Total migrant workers supported



Telecounselling clinic

280

Migrant workers supported



Professional  
counselling

560

Migrant workers supported



Group therapy sessions

140

Migrant workers supported

Covid-19 ground engagement

4,040

Migrant workers supported



Mental health workshops

850

Migrant workers attended



## Hear From Our Staff

Sudipta  
COUNSELLOR



*"I counselled migrant workers in their native Bengali language. This made a big difference since it enabled communication at a deeper level and they were able to better express the struggles and challenges they were experiencing."*

Working at HealthServe during the Covid-19 crisis period was both challenging and fulfilling. It was challenging because everything had to change. I had to adjust to working from home. I had to work long hours, often into the night and over the weekend. I had to switch to telecounselling, rather than counselling workers in person. From largely counselling injured or exploited workers! I now had to counsel many in distress from prolonged lockdown and isolation.

However, to be able to comfort the distressed workers so severely affected by Covid-19, to counsel them and give them emotional and psychological support at this time was also very fulfilling. I hope I made a difference in lives during this period.

Counselling the workers in their native Bengali language made a big difference since it enabled deeper communication about their struggles and challenges. It also avoided miscommunication. Once, I was told that a person was suicidal. Upon speaking to him, however, I realised that he had meant to say that he felt as if he was dying because of the stressful conditions that he was in. He had no intention of taking his life!"

## Hear From Our Intern

Wai Yan  
INTERN



*"People here are driven to help others, I see unconditional acts of assistance and concern."*

Wai Yan is a Psychology student from Myanmar. He was an intern in HealthServe's Casework & Social Services team, and subsequently the Mental Health & Counselling Services team. He supported our caseworkers by helping to answer enquiries, follow up on cases and giving out practical assistance to many anxious and confused workers.

He learnt more about the cultural sensitivities involved and the importance of mental wellness education when he joined the MHCS team. He assisted the team to create workshops to educate migrant workers on how to manage stress and emotional problems in their daily lives. He also participated in dormitory visits when needed and helped with research and analysis.

*"Cultural sensitivity is paramount in what we do, the way we talk to people, the way we conduct workshops... I didn't have that kind appreciation before."*

Though at times it was difficult to meet every need, he is grateful for the opportunity to make a small impact. He appreciates his time in HealthServe as it has opened doors for him to communicate better with migrant workers and appreciate cultural differences more.



*Casework &  
Social Services*



## 2020 Overview

In 2020, the Casework & Social Services team had to respond to the changing and surge in needs of migrant workers as the Covid-19 pandemic evolved.

In early 2020, our PRC Chinese clients struggled with concerns about their families and stigmatisation here as Covid-19 cases escalated in China. In addition to our usual assistance to injured migrant workers under Special Passes, HealthServe expanded our work to support these Chinese workers through a series of **group sessions** to address their concerns. And as the virus spread to Singapore, we provided PPEs and hygiene kits to migrant workers under our care.

With the dormitory lockdowns and implementation of Circuit Breaker in April, we extended our help to affected workers living in private accommodation. With the support of generous donors, we offered **emergency aid in the form of cash assistance, phone top-ups, rent assistance, food and other daily provisions**. This was especially urgent during the period when mass Stay Home Notices and Quarantine Orders were issued. The aid was issued in collaboration with MOM and other partner NGOs including Covid-19 Migrant Support Coalition (CMSC), Humanitarian Organisation for Migration Economics (HOME), Migrant Workers' Centre (MWC), Project Providence Singapore, Ray of Hope Initiative and Transient Workers Count Too (TWC2).

HealthServe also introduced a **new helpline** to provide additional case management support and a listening ear to distressed workers. Our caseworkers and casework volunteers were also stationed at National Centre for Infectious Diseases (NCID) to support Covid-19 positive migrant workers who were warded and needed emotional care and support.





## 2020 Highlights

When Circuit Breaker was lifted in July, we resumed and extended our lunchtime **Food Project Programme** from four days to five days a week. Beneficiaries increased to about 200 workers per meal before dropping to around 60 as many of the Special Pass holders had their cases resolved and were repatriated. With generous sponsorships by Eastspring Investments and Prudence Foundation, we also launched commemorative EZ-Link cards which were distributed to Special Pass holders.

As the Covid-19 pandemic raged on around the world, demand for social assistance increased as the employment market for migrant workers worsened. There were job losses while Special Pass and Work Permit holders, many with uncleared debts and dependents to worry about, had increased difficulties in securing employment.

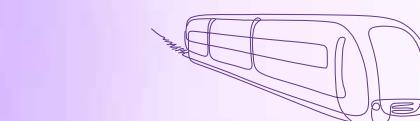
In the latter half of the year, we saw an increase in referrals of stroke patients as well as migrant workers who have been diagnosed with critical illnesses requiring additional social and medical assistance.



Total migrant workers supported  
**820**

**\$617,000**

Social services aid disbursed to migrant workers who suffered work injuries or faced employment issues



**\$40,000**  
in EZ-Link top-ups

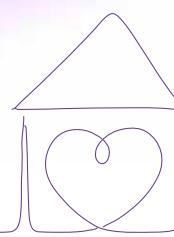


**\$40,000**  
in phone top-ups



Financial aid disbursed

**\$228,000**



Rental assistance disbursed for unemployed migrant workers at risk of being evicted

**\$146,000**



## Hear From Our Casework Clients

Dipu

CONSTRUCTION WORKER  
FROM BANGLADESH



*"I thinking, I no makan but no die, maybe HealthServe come from God to help me."*

Seven years into his second job in Singapore in 2018, Dipu became entangled in a police investigation. His then employer had lodged a report against him and other workers for mishandling money, which he claimed was unwarranted. His employer had also owed him two months of wages.

Following the police report, he was not able to work for two years. As his case is unresolved, he has also not been able to go home to see his parents and young daughter. The Covid-19 pandemic only added to his woes and uncertainty. He was introduced to HealthServe by a friend in July. We assisted him with rent payments and provided him with phone top-ups, an EZ-link card and cash for daily necessities.

In addition, we covered the costs for the renewal of his passport so that he could have a valid passport for a new work pass application. In October 2020, Dipu found a job and now has approval to work under a Temporary Job Scheme.

Jiang

WASTE MANAGEMENT  
WORKER FROM CHINA



*"HealthServe saved my life."*

Shortly after arriving in Singapore to work in the waste management sector in July 2019, Jiang sustained a serious injury after falling from the back of a moving vehicle. He injured his skull and underwent surgery. He is now hard of hearing in his left ear and in need of a crutch to move around.

Left largely alone in his dormitory in the weeks after his accident, Jiang fell into a deep depression and was plagued with constant thoughts of suicide. His inability to work dealt a huge blow to his family's finances.

He sought our assistance after hearing about HealthServe from a fellow worker. We supported him with financial assistance and free meals. We also engaged him in wellness activities and events, where he could befriend other migrant workers and the HealthServe team.

We saw a tremendous improvement in his mental health and outlook during his time with us. He subsequently received injury compensation and left Singapore in a much happier state in August 2020.



## Hear From Our Casework Clients

Dong

CONSTRUCTION  
WORKER FROM CHINA



“最感谢康侍的是... 对我心里不明白的, 康侍给我们指明了一个方向。还有我们自身应得的利益拿不到的时候, 康侍可以帮助新加坡的政府还有我的老板, 从中调解。”

(What I'm most grateful to HealthServe for is... showing me a direction to work towards, whenever there is something I don't understand. And when we don't receive our rightful compensation, HealthServe mediates for us with the government and our employers.)

The staff of HealthServe know Dong as the soft-spoken, helpful migrant brother who helped clean the Geylang office. He would be there to warmly welcome our staff in the mornings and frequently tended to the garden around our premises.

After working for 12 years in Singapore, Dong suffered a foot injury when a metal pole he was carrying slipped from his hands and crushed his right foot. Despite being on crutches, he was asked by his employer to return to work. An ex-colleague referred him to HealthServe and our caseworkers helped him to seek a second opinion from another hospital. The doctor there prescribed him extended medical leave. In addition to helping him file for his workman injury compensation claim, HealthServe supported him with free meals and transport assistance. He participated in our activities for injured workers, as well as group work and individual counselling sessions.

Veerasamy

LANDSCAPE WORKER  
FROM INDIA



Veerasamy had barely any belongings when we met him for the first time - two shirts, a pair of shorts, a set of pants, a pair of sandals, and his work permit card.

Diagnosed with Covid-19 in April 2020, Veerasamy was admitted into Tan Tock Seng Hospital and later transferred to the Covid-19 Community Care Facility at Expo. He was worried about his belongings back at his dormitory, and could not top up his phone card to contact his family. Uncertain about where he would be transferred to next or when he could resume work, he contacted HealthServe after finding out about our helpline.

Though he was able to start working in May after moving to temporary accommodation at a golf club, he remained anxious, concerned over job security as he was still in the debt he had taken to pay \$10,000 in agent fees to secure a job in Singapore.

HealthServe supported him over several months through providing emotional support, phone card top-ups, and practical tasks like collecting his personal belongings from his dormitory. Unfortunately, his work permit was not renewed and Veerasamy had to return to India. The HealthServe team facilitated his check-in process at the airport.

Despite his difficulties, he hopes to return to work in Singapore one day.



## Hear From Our Casework Volunteers

Vivien and Xiu Yi  
CASEWORK VOLUNTEERS



*"I came in thinking that no matter how small a part I'm going to play, I can still do something and contribute to helping the caseworkers."*

*"They [migrant workers] tell us a lot about their financial difficulties and their family troubles. It's amazing how they persevere through it all. I'd assume that if someone was going through what some of them go through, they'd be at their breaking point. But they still press on." - Xiu Yi*

*"We see many cases of their mom/dad/family being severely ill or passing on, and they can't attend funerals, see the birth of a child. For them [migrant workers] to say I'm going to survive another day is courageous."*  
- Vivien

Vivien and Xiu Yi joined HealthServe as casework interns in 2019 when they were studying social work. They returned to volunteer again during the Covid-19 pandemic to help man HealthServe's helplines and to give out rental, financial and food aid. Xiu Yi now works at HealthServe full time.

## Hear From Our Casework Staff

Peterson  
CASEWORKER

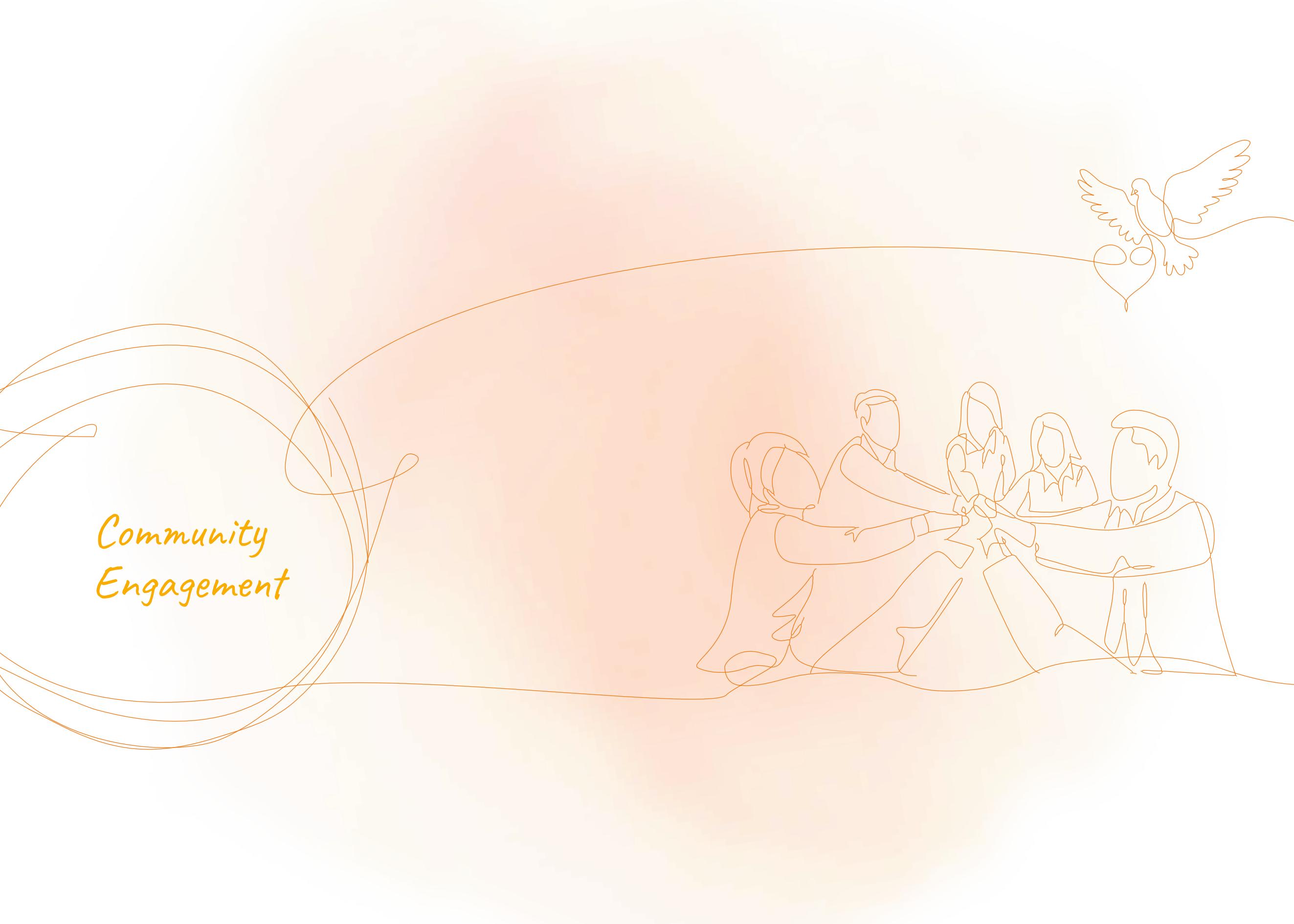


*"Donations poured into HealthServe. There were so many donations that we did not have enough room to store them. This really warmed my heart!"*

*"Since the Covid-19 lockdown started, the work of HealthServe took a drastic change in direction. It was no longer the usual day in the life of a caseworker for my colleagues and I in the Casework & Social Services team.*

*Our working hours increased greatly. I had to work from home, due to restricted access to the office. Some days, I had to go to the office to buy and pack food items for HealthServe clients living in private housing within the Geylang area. Many new cases came to our attention. Workers felt bewildered, not having adequate access to information. Some also lacked basic necessities. Others were not being paid their salaries, and hence couldn't pay their rent and faced eviction. The work intensified when we set up a new helpline in April to answer queries sent by workers in dormitories or isolation facilities. The needs were overwhelming. Our small team tried our best to help the affected workers. Hearing workers share about unfair treatment from their employers, their family problems and their anxieties would leave us with heavy hearts.*

*Though it was emotionally, physically and mentally draining for our team during the crisis, it was heartening to see our local community stepping forward so readily to help, be it donating money and PPEs, distributing masks, food and care packs to the dormitories or volunteering for our engagement activities at the isolation facilities."*



Community  
Engagement



## 2020 Overview

2020 was one hectic year for our Communications & Engagement team. As the pandemic worsened and the dormitories were locked down, we had to double down on our communications and engagement efforts to combat the circulation of false information and ease the growing anxiety and confusion within the migrant community. We continued strengthening public awareness and education through participating in panel discussions, media interviews and increasing our social media outreach. Across the year, HealthServe was mentioned almost 100 times across various forms of media, locally and internationally.

We organised an NGO roundtable webinar “Stepping Up for Migrant Workers: Voices from the Trenches”. More than 1,000 viewers tuned in to hear representatives from HealthServe and other partner NGOs including CMSC, HOME, MWC and TWC2 share about the realities and challenges faced by their organisations and migrant workers as a result of the pandemic.

### Multilingual Covid-19 Websites and New Platforms

To address communication gaps and mitigate the spread of misinformation, HealthServe rolled out several new digital platforms and tools: a multilingual website, updated daily with Covid-19-related news and resources in English, Bengali, Tamil and Chinese for the migrant worker community, a breathing exercise tool, a resource website for frontline teams and a solidarity wall for the public to post well wishes online. These websites received more than half a million page views in total during the year.

### Helplines and Chatbot

With the support of Bridge Alliance, LivePerson, Twilio and Zoho, HealthServe launched a 24-hour helpline incorporating AI-powered





chatbot technology and a customer management system. At its peak, the helpline received more than 300 calls a day.

#### Educational and Support Videos

More than 80 multilingual videos covering Covid-19 and mental health topics and inspirational stories have been produced and shared across social media, hospitals, dormitories and Covid-19 facilities.

The videos were supported by the Ministry of Communications and Information (MCI) and Community Integration Fund. In June, we collaborated with Voices of Singapore to produce a music video to inspire a shift in the public's mindset towards greater compassion and genuine integration of foreigners into Singapore's society. Within 24 hours, the video was shared more than 10,000 times and raised \$50,000 for HealthServe's programmes.

#### Communications Support

Local telco operators Singtel, StarHub and M1 stepped forward to communicate HealthServe's website and helpline to subscribers in their databases via broadcasting hundreds of thousands of SMSes. Furthermore, with the backing of Zoom, TikTok and Facebook, HealthServe was able to widen our mental health outreach more efficiently.

#### Ground Outreach and Engagement

To understand and serve the workers better, we also engaged them in the dormitories and Covid-19 isolation facilities. The team conducted focus group sessions with migrant workers in their language to listen to and address their concerns relating to the pandemic. We also distributed PPEs and morale

boosters to dormitory management teams and migrant workers. Groups of volunteers were activated to bake goods, buy and deliver essential items or groceries to bring cheer to those in dormitories and isolation facilities such as the cruise ships, hotels and floatels. We reached out to 3,400 migrant workers through more than 50 sessions of mental wellness activities and needs assessment sessions. Those who needed further support were connected with HealthServe's other services. Working closely with authorities on the ground, we were able to identify and better support counsel distressed residents.

In partnership with Ben & Jerry's, we also distributed more than 3,000 scoops of ice cream to residents, crew and volunteers at the cruise ships, as well as 50,000 specially designed mental health journals to workers at the isolation and recovery facilities, dormitories and our clinic and centres. Workers were encouraged to jot down their thoughts in the journal, which also featured encouraging notes in multiple languages from our Solidarity Wall.





## Hear From Our Volunteer

Pugalenthhi

GROUND ENGAGEMENTS  
VOLUNTEER



*“People in HealthServe do really care - they really pursue from start to finish a brother’s case.”*

Pugal signed up as a volunteer to support Tamil speaking residents at HealthServe’s engagement programmes at Covid-19 isolation facilities such as the cruise ships and floatels from June to September 2020.

At the floatels, many residents shared with him the anxiety and fear they faced when they were diagnosed with COVID. The fear was compounded as they could not share their concerns with their families back home in India as they did not want their families to worry. A particular case that hit him the hardest was when he spoke to an Indian migrant worker whose mother had passed away.

Since interacting with the migrant workers closely, he has learned how resilient and resourceful they are. He believes that they should be seen less as victims but more as survivors who need guidance to navigate Singapore’s system. He admires their strong networking skills and “kampung spirit” and thinks that these are areas that Singaporeans can learn from.

## Hear From Our Intern

Naomi

COMMUNICATIONS &  
ENGAGEMENT INTERN



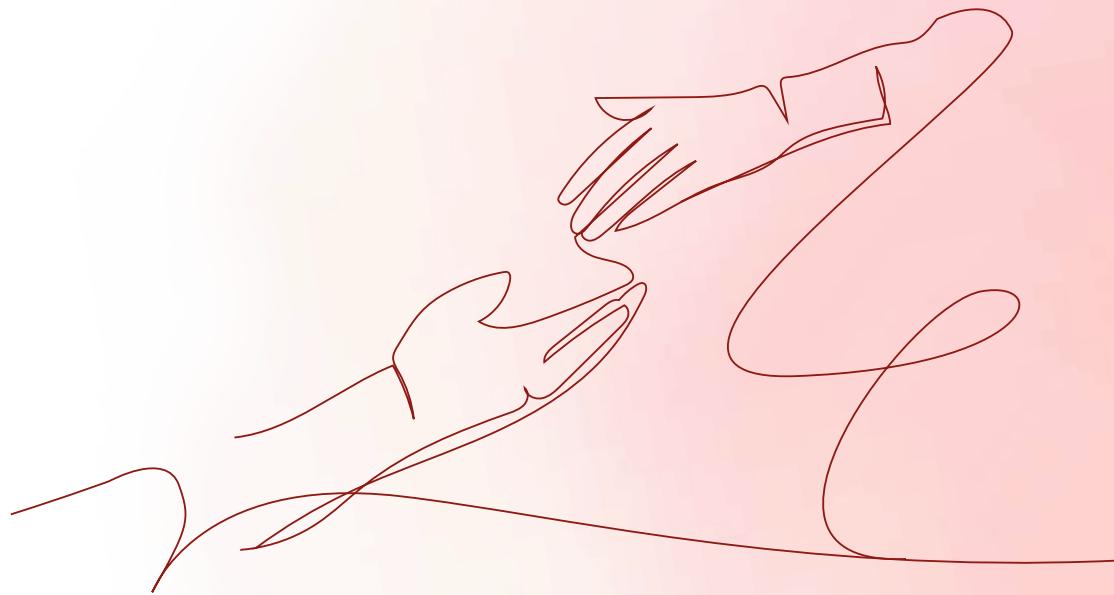
*“My greatest takeaway is what I have learnt from the community, that we truly do not need to have a lot to help others.”*

*“The many hours I spent picking up phones and getting to know 80+ migrant workers individually is something that forced me to grow beyond my years. I am reminded that for someone out there, my effort and time can help them relieve some of their stress or grievances.”*

Naomi was an intern and contract staff in HealthServe’s Communications & Engagement team. As a fluent Mandarin speaker and a Communications & Media student, she helped with translations, design work, updating social media channels and supporting engagement efforts at the cruise ships, hotels and dormitories. Though she was initially concerned that she would not be able to converse well with the migrant workers, she quickly realised that many of them were very friendly people who were more than willing to share their experiences and life stories.

Locked down in isolation facilities, the workers were often lonely and burdened, as many did not share with their families about their situation. At the peak of the crisis, she would get 14 messages from the workers, sometimes at night or in the early morning.

Though it was painful for her to see a migrant worker struggle through the challenges of the Covid-19 pandemic, she is grateful for her time at HealthServe. It has helped her to forge many friendships, and also provided a heartwarming reminder that acts of kindness can overcome cultural and language differences.



## Volunteer Engagement

In 2020, we lost but also gained many new volunteers.

To deal with the sudden shortage of medical volunteers arising from DORSCON Orange restrictions announced at the beginning of the year, we turned to hybrid teleconsultations. We enlisted local medical students as well as student members of the Singapore Medical Society of the United Kingdom to help out as Physician Assistants and Clinic Assistants at our clinic, alongside other doctors who were volunteering online.

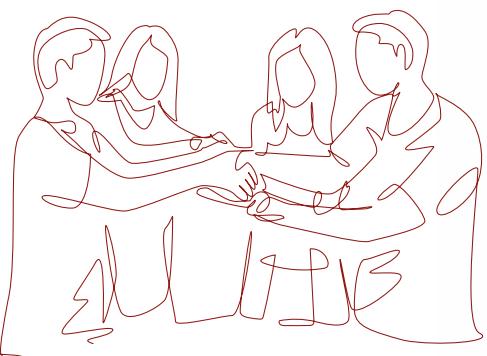
Additionally, we were immensely encouraged when over 1,000 people responded to our call for volunteers to support migrant workers in lockdown. Many of these volunteers were deployed to help out as translators, interpreters, social workers, counsellors, befrienders and with on-ground logistics.

We trained more than 100 of these volunteers to befriend the workers and to administer basic psychological first aid. We activated more than 90 translators in four languages to produce multilingual communication materials. In addition, we subsequently deployed 80 volunteers to support dormitory and cruise ship engagements from April to September.

**We are beyond thankful for our volunteers who have lent their skills, time and heart to serve our migrant friends during this crisis.**



## 2020 Highlights



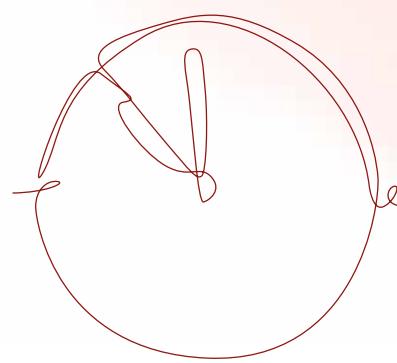
**440**

New volunteers



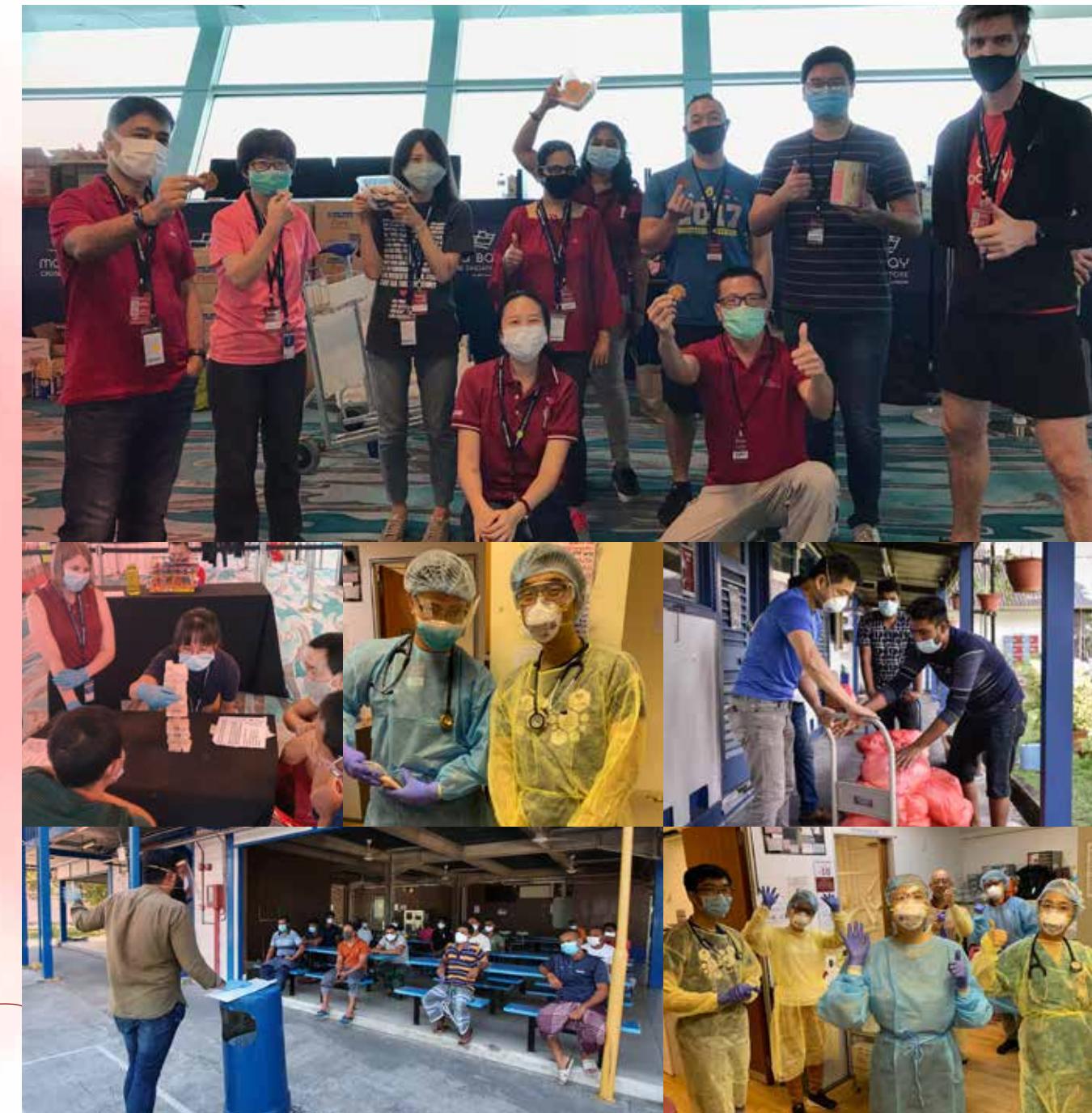
**9,000**

Total volunteering hours for clinic services, helpline support and ground engagement efforts



**610**

Volunteers who served with us





## Fundraising & Donations

The spotlight on the plight of the migrant workers in lockdown saw a surge in many stepping forward to show solidarity with the migrant worker community.

**Over 8,600 individuals, corporates, foundations, churches and other institutions donated towards HealthServe's work in 2020**, a 22-fold increase year-on-year. The number of individual donors increased by an overwhelming 2,000% from the previous year. We saw more than 40 community initiatives to raise funds for our migrant workers, from businesses, schools, workplaces and social groups. Large and small corporate donors donated in cash and in kind. We are also deeply encouraged by the food, drinks and other tokens of appreciation for our staff and volunteers from individuals and companies including Ark Coffee, Bata, Bettr Barista, Changi Airport Group and the Fullerton Hotel. While we were unable to do any physical fundraising events, our online campaign for the Migrant Health Relief Fund brought in close to S\$386,000.

We are truly thankful for the outpouring of support during such a challenging year for the migrant worker community in Singapore and beyond.



## 2020 Highlights

### Total no. of donors



### Individual donors



### Corporates, foundations, churches, and other institutional donors



### Total amount raised

\$5,175,000

We would like to express our heartfelt appreciation to the following individuals and organisations for their amazing effort, time, energy and support as they have contributed towards our initiatives to help the migrant community:

### Corporate and Other Institutional Donors

#### Above \$500,000:

- Barclays Bank Pte Ltd

#### \$200,000 - \$499,999:

- Blackstone Singapore Pte Ltd

#### \$100,000 - \$199,999:

- Chen Su Lan Trust
- eBay Singapore Services Pte Ltd
- Far East Organisation
- Lee Foundation
- Lien Properties

#### \$50,000 - \$99,999:

- Nathalin Shipping Pte Ltd
- Siemens
- STT Communications Ltd
- TikTok Pte Ltd
- TL Whang Foundation Limited

#### \$10,000 - \$49,999:

- Adisseo Pte Ltd
- Albourne Partners (Singapore Pte Ltd)
- Aortic Asia Ltd
- Azalea Investment
- Binjaitree
- Birds of Paradise Gelato Boutique

- CSL Behring Pte Ltd
- Cooley SG LLP
- Covenant Evangelical Free Church
- Falcon House Capital Management Pte Ltd
- First Sentier Investors (Singapore)
- Hansgrohe Pte Ltd
- His Mission
- IGC'X Private Limited
- Johnson & Johnson
- Leap Philanthropy Ltd
- Partners Capital Investment Group (Asia) Pte Ltd
- Ong Shunmugam Pte Ltd
- Silicon Laboratories Intl Pte Ltd
- Singapore Association of Pharmaceutical Industries
- SymAsia Singapore Fund - Yeo Family Foundation
- Tantallon Capital Advisor
- The Community Foundation of Singapore
- The Silent Foundation
- Touch C Girov
- Wesley Methodist Church
- Wong Partnership LLP



## Corporate and Other Institutional Donors (Cont.)

### Up to \$9,999

- Adam Road Presbyterian Church
- Air Connection Design Pte Ltd
- Amica Law LLC
- Amyt Fleur
- Ambros Industries International Pte Ltd
- Asiabox Consultancy Services Pte Ltd
- Astuitone Pte Ltd
- Astute Tax Pte Ltd
- AT Marketing Consultancy
- BeathChapman Pte Ltd
- Be Inclusive Pte Ltd
- Beth Chapman Pte Ltd
- Bethesda (Katong) Church
- Bible Presbyterian Church in Singapore
- Bikes N Bits Pte Ltd
- Books Actually Pte Ltd
- Cairnhill Methodist Church
- Chapters Pte Ltd
- Christ Methodist Church
- Christalite Methodist Chapel
- Cortex ML Pte Ltd
- Credit Suisse AG
- Croda Singapore Pte Ltd
- Delegate Pte Ltd
- Dr Warren Lee Paediatrics Growth & Diabetes Centre Pte Ltd
- Ebenezer Evangelical Free Church
- Edith Patisserie Holdings Pte Ltd

- Emmanuel Assembly of God
- Eterate.Co
- Excellent Business Pte Ltd
- First State Investments (Singapore)
- GC Tax Services Pte Ltd
- Genesis 122 LLP
- Grateful Dress
- Higo Marine Services Pte Ltd
- His Workz
- Indi Bindie
- JEB Healthcare Technologies Pte Ltd
- JHL Productions
- Leap Foundation Ltd
- Lede Collective Pte Ltd
- Lensbridge Capital Pte Ltd
- Little Bakery Pte Ltd
- Loomis Sayles Investment Asia Pte Ltd
- Mark 12 Architects
- Max Metro Pte Ltd
- Mellford Pte Ltd
- Mud Rock Pte Ltd
- Nabcore Pte Ltd
- Nanyang Technological University Christian Fellowship (NTU-CF)
- Nest.Bio Labs Pte Ltd
- Nineteen Niche
- NTUC - Migrant Workers Centre
- Nyk Asset Management Pte Ltd
- Oliv Trading & Services
- OMF Singapore Ltd

- One Syllable LLP
- Paya Lebar Methodist Church
- Practical Measures LLP
- Pytheas Infosys Pte Ltd
- Quantum Security Pte Ltd
- Raffles Winds
- Rainbow Home Christian Church
- Razer (Asia-Pacific) Pte Ltd
- Ru Education Pte Ltd
- Sandraho Dance
- Seedly Pte Ltd
- Smartidea Pte Ltd
- Singapore Shipping Association
- Solar Moon Studio Pte Ltd
- Solomon's Porch Singapore Limited
- Sophie Williamson Fabrics Pte Ltd
- Skadden, Arps, Slate, Meagher & Flom (Singapore) LLP
- Skyroom Pte Ltd
- St James' Church
- SymAsia Singapore Fund - Apricot Capital Foundation
- Teckaki Pte Ltd
- Warburg Pincus Singapore Pte Ltd
- Watering Hole Pte Ltd
- Waypoints Pte Ltd
- Zion Serangoon Bible-Presbyterian Church

## Donations in-kind

The sudden DORSCON Orange restrictions from the Covid-19 pandemic caused many struggles for HealthServe, which included a shortage of PPEs for our clinic operations and community. This need was quickly met by our corporate donors. Telecommunications companies also stepped in to help us send out messages to their phone card migrant users about our services.

We thank the following supporters who donated in-kind during the height of the Covid-19 pandemic in Singapore:

- LyGH Capital
- M1
- Mapletree
- M&C
- Prudential Foundation & Eastspring Investments
- Razer (Asia Pacific) Pte Ltd
- Singtel
- Starhub
- Tanoto Foundation
- And many individuals, doctors and dentists who donated PPEs



## Hear From Our Corporate Donor, Barclays Bank

*"We wanted to show support for the migrant worker community that has helped build Singapore to the great country that it is today. This is why we are delighted to partner organisations like HealthServe who play an important role in our society by supporting and addressing unmet needs in our communities."*

**Mr Alexander Harrison**

Country CEO, Singapore and Head of Corporate Banking, Asia Pacific and Middle East, Barclays



At Barclays, we are committed to support the communities in which we operate in. "We wanted to show support for the migrant worker community that has helped build Singapore to the great country that it is today. This is why we are delighted to partner organisations like HealthServe who play an important role in our society by supporting and addressing unmet needs in our communities." said Mr. Alexander Harrison, Country CEO, Singapore and Head of Corporate Banking, Asia Pacific and Middle East, Barclays.

"Our support is dedicated to our trusted partners who are mobilised on the ground and are providing support to communities hardest hit by the crisis as well as to those on the frontline of the pandemic response. By partnering with HealthServe in Singapore, we hope to amplify their impactful work and provide relief to vulnerable communities in need of support especially during such challenging times." said Ms. Hui Joo Hoo, Managing Director and Head of Compliance, APAC, Barclays. Barclays stand with HealthServe in building a society where every migrant worker lives a life of dignity. Our support will help HealthServe reach migrant workers living in dormitories where physical distancing is a challenge, providing food and medical care of migrant workers with chronic health conditions as well as provision of shelter and counselling support. In the long run, Barclays hope to support migrant workers into better and sustained employment to tide them through the pandemic and beyond."

"Barclays is committed to helping its customers, clients, colleagues, and the wider community deal with the current unprecedented medical and economic crisis caused by Covid-19. In response to our fight against Covid-19, Barclays has pledged to support charity partners in the countries that we operate in with the launch of the £100 million Covid-19 Community Aid Package in April 2020. The package aims to support charities working to care for vulnerable people impacted by Covid-19, and to alleviate the associated social and economic hardship caused by the crisis.

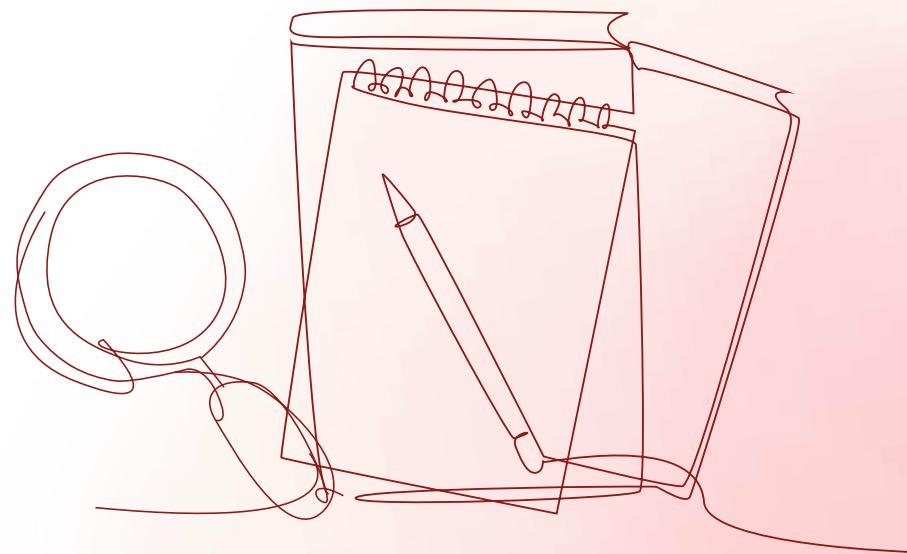
In Singapore, the Covid-19 crisis has magnified the vulnerability of the migrant workers who make up a third of the country's labour force. By the end of 2020, nearly half of the migrant workers in Singapore had been infected with the virus. Besides fearing for their physical well-being, prolonged confinement and job uncertainties have taken a toll on the mental health of these workers as well.

*"By partnering with HealthServe in Singapore, we hope to amplify their impactful work and provide relief to vulnerable communities in need of support especially during such challenging times."*

**Ms Hui Joo Hoo**

Managing Director and Head of Compliance, APAC, Barclays





## Our Research

HealthServe has been very privileged to be invited to various policy forums and national level platforms to contribute our expertise and share our experiences of “ground realities”.

This is a responsibility we take seriously and hence have, in this season of HealthServe’s growth, committed to developing research and evaluation capabilities in partnership with the Saw Swee Hock School of Public Health at the National University of Singapore.

We have partnered social enterprise Research for Impact to conduct a study of Singapore residents’ perceptions of and attitudes towards migrant workers, and how these changed after the Circuit Breaker and dormitory outbreaks. We also supported many other institutions involved in migrant worker research including the National University of Singapore and SingHealth.

Even as HealthServe expands the services we offer to our migrant workers, we strive to ensure our efforts are underpinned by sound evidence and robust analysis. Read on to learn about some of our key findings and recommendations from three research projects conducted in 2020.

### Building Bridges: Improving the Lives of Migrant Workers in Singapore (February 2021)

The Covid-19 outbreak in dormitories led to the increased public scrutiny of the living and working conditions of low-wage migrant workers in Singapore. To better inform and guide public discourse in an otherwise unfamiliar domain to many, we embarked on a research project to uncover new reference points.

Funded by philanthropic organisations The Majority Trust and LEAP201, this three-part research project focused on low-wage migrant workers in Singapore’s construction sector.

Part 1 - Review of policies governing employment and living conditions for construction migrant workers in six countries: Kuwait, Thailand, Hong Kong, the United Kingdom, Australia and New Zealand.

Part 2 - A cross-sectional national survey of 1,000 Singaporean Citizens and Permanent Residents on Singaporeans’ knowledge, attitudes, and perceptions of low-wage migrant work issues and challenges.

Part 3 – Group consultations and in-depth interviews with local stakeholders to gather their perspectives on the living and employment conditions of low-wage migrant workers, as well as possible next steps.

From the data collected over the three phases, five key findings and four recommendations were identified:

#### Key Findings:

1. There is general support for improving the welfare of migrant workers, but this is conditional.
2. For better migrant welfare, higher costs are more acceptable than cuts to what Singaporeans feel entitled to.
3. Stakeholders have varying views on social integration.
4. Public misinformation and lack of timely, quality statistics are growing risks.
5. Low-wage migrant workers have fewer rights and less access to social services than locals everywhere, though this may not be as obvious in places with high-productivity construction sectors.

#### Recommendations:

1. Invest in better monitoring and communication of low-wage migrant workers’ living and working conditions here.
2. Provide consistent and reliable information about migrant worker communities, including their contributions to Singaporean society, to counter misinformation and stigmatisation.
3. Establish a platform for building trust and consensus among different stakeholders.
4. Continue studying specific practices that improve low-wage migrant worker welfare, and that resonates with Singaporeans’ views.

[View full report: 2020 Research – Building Bridges Exec Summ and Report – HealthServe](#)



## Exclusion of Migrant Workers from National Universal Health Coverage (UHC) Systems (August 2020)

HealthServe's former Head of Medical Services, Dr Natarajan Rajaraman, and team outline the current healthcare financing system for migrant workers in Singapore and discuss the barriers to healthcare access from the lens of Universal Health Coverage.

HealthServe found **five barriers** that prevented migrant workers from having access to adequate healthcare services:

- 1. Ability to perceive:** Migrant workers are assiduous in seeking healthcare for acute complaints that are perceived as potential threats to their earning capacity. There is a lower perceived need for chronic disease care, and as a result, HealthServe's clinics routinely encounter complications such as those arising from poorly controlled diabetes and hypertension.
- 2. Ability to seek:** We frequently observe reluctance to seek care, occurring across the full spectrum of healthcare needs and severities: non-work related minor acute illnesses (e.g. coughs and colds), major acute illnesses (e.g. acute abdominal syndromes), chronic diseases (e.g. diabetes, hypertension), work injuries (e.g. fractures, burns), and occupational diseases (e.g. irritant contact dermatitis).  
  
As alternatives to conventional medical care provided by employers, migrant workers resort to self-treatment, remote treatment (e.g. friends transporting medications from home countries), traditional medicine, non-profit organisations, paying out of pocket for care at private primary care providers, awaiting return to home countries for care, or simply foregoing care.
- 3. Ability to reach:** The availability to reach some categories of care is limited, a prime example of which is mental health. The prevalence of some form of psychological distress is estimated to be 15–20% of migrant workers. In our experience, the dominant syndromes are adjustment and mood disorders, with the most important stressors being family-related, work-related, and financial. Mental health services at scale for migrant workers were non-existent before HealthServe's 2019 launch of a comprehensive programme covering prevention, screening, and multi-modality treatment.
- 4. Ability to pay:** Although employers are required to provide all essential medical care and mandatory medical insurance covers inpatient care and day surgery, HealthServe and other non-profits routinely encounter migrant workers who pay out of pocket because of a lack of understanding of their entitlements, reluctance to approach their employers, or denial by employers of such claims.
- 5. Ability to engage:** Migrant workers in Singapore generally come from backgrounds of low socio-economic status and education. Navigating Singapore's healthcare system can be especially challenging due to language and cultural differences with healthcare providers. HealthServe frequently hears experiences of migrant workers who have been through an episode of acute care in a hospital, and emerge with little understanding of the diagnosis, treatment provided, and follow-up plans.

*View full report: Exclusion of Migrant Workers from National UHC Systems—Perspectives from HealthServe, a Non-profit Organisation in Singapore (nih.gov)*

## Addressing Mental Health and Psychosocial Aspects of Covid-19 Outbreak Among Migrant Workers in Singapore (April 2020)

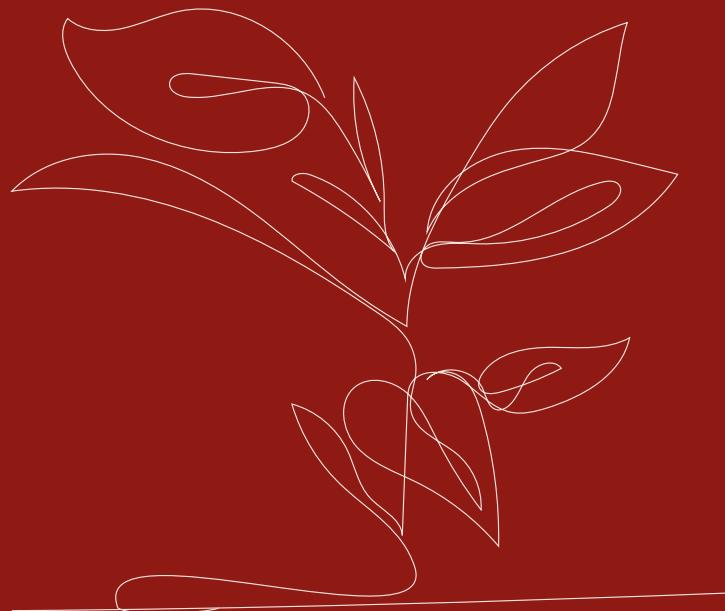
HealthServe has provided medical care to migrant workers in Singapore for the past 14 years and championed the idea of focusing on not only physical but also mental health. HealthServe's guiding framework on "Addressing mental health and psychosocial aspects of Covid-19 outbreak among migrant workers in Singapore" aided local medical teams and hospitals in their response planning during this challenging period. It showcases the collaborative model between HealthServe and key stakeholders in the psychosocial response to Covid-19 for migrant workers in Singapore.

This report highlights the mental health needs of migrant workers and the recommended support activities by NGOs, government agencies, dormitory operators, employers as well as healthcare professionals.

**Four recommendations** were made to better support the migrant worker community in Singapore:

1. Ensure that accurate information about Covid-19 is readily available and accessible. Information should include evidence-based practice for preventing transmission, how to seek out healthcare support, as well as messages to promote psychosocial wellbeing.
2. Train volunteers and staff (where possible) on essential psychosocial care principles, psychological first aid and how to make referrals when needed.
3. Ensure that a functioning referral pathway for persons with psychosocial distress is activated between all sectors involved and that all actors operating in the response are aware of and use such a system.
4. Establish measures to reduce the negative impact of social isolation in quarantine sites.
  - a. *Communications with family and friends outside of the site, as well as measures that promote autonomy (e.g. choice in daily activities) should be facilitated and promoted.*
  - b. *Develop activity toolkits that promote resilience and hope.*
  - c. *Experience indicates that persons in quarantine who can make choices during their day (e.g. meal choices), have access to structured activities, have a routine and receive information updates (on notice boards or through text messages) are likely to cope better than individuals confined to an isolated area with decreased autonomy.*

*View full report: Addressing Mental Health and Psychosocial Aspects of Covid-19 Outbreak Among Migrant Workers in Singapore (healthserve.org.sg)*



# Corporate Governance

The Board of Directors of HealthServe (the Board) recognises that good governance (establishing and maintaining a framework and processes concerned with managing the overall direction, effectiveness, supervision and accountability) is critical in ensuring that HealthServe is effective, transparent, sustainable and accountable to all our stakeholders. In this regard, the Board and Management have been working towards establishing good practices that are in compliance with the recommendations of the Code of Governance for Charities and Institution of Public Character issued by the Charity Council (April 2017) (the Code) as are applicable to HealthServe. This report highlights the Corporate Governance practices that are in place during the Financial Year ending on 31 December 2020 (FY 2020). We are pleased to report that HealthServe has complied with the recommendations in the Code. We have completed and uploaded the Governance Evaluation Checklist for FY 2020 and this is available for viewing by members of the public on the Charity Portal.

## BOARD GOVERNANCE

### **1. *Independence***

The Board is comprised of ten (10) members (Directors) who are all independent; there are no staff members on the Board. None of the Directors is related to any staff member. The Directors do not receive any remuneration for their services as Directors. All Directors are required to make a declaration of their independence and any potential or actual conflict of interest at least annually. The Constitution of HealthServe has clear procedures for directors' conduct where a potential conflict of interest may arise.

### **2. *Skills Set and Diversity***

The Directors are individuals with leadership experiences in businesses, philanthropy, academia, pastoral field and professional practices. The Board collectively has a broad diversity of expertise and experience including, but not limited to, accounting, finance, fund raising, legal, medical and business management. There is also gender diversity on the Board. With the completion of the recent Board renewal in FY 2020, five out of the 10 directors (including the Chairperson) are female. Detailed information on each of the Directors are set out in pages 12 – 13 of this report.



## BOARD RENEWAL

Each Director is appointed for a term of three years. The Nominations and Human Resource Committee is tasked with identifying and nominating suitable candidates for directorship or Board committee memberships according to the needs of the organisation.

The Board is conscious of the need for Board renewal from time to time and has been working on this continually and systematically to ensure that transition is smooth and without disruption. In FY 2020, four new members have been added to the Board, further strengthening the diversity of skillset on the Board and achieving a more optimal size given the growing needs of HealthServe.

FY 2020 also saw the retirement of Dr Goh Wei Leong, co-founder of HealthServe who has been Chairman of the Board since its inception, spanning a total of 14 years. Because of Dr Goh's medical background and experience in building relationships with the migrant worker community and other stakeholders, the Board had held the unanimous view that he was uniquely qualified to advance the migrant worker cause and that he should serve as Chairman of the Board beyond 10 years.

The transition of the chairmanship from Dr Goh to Ms Chan Chia Lin, who has been a Board Member since 2014, had been part of HealthServe's leadership succession plan. With her wealth of experience in the corporate and social sectors as well as her years of active involvement at HealthServe, Ms Chan was accordingly appointed as Chairman in August 2020.

## BOARD PERFORMANCE

### 1. Induction of New Directors

All our new Directors who joined the Board in FY 2020 are familiar with HealthServe, having volunteered in HealthServe in different capacities prior to joining the Board.

### 2. Continuing Training

Board members are encouraged to undergo continual training as directors through the various courses and webinars that are conducted by NCSS, Singapore Institute of Directors and other organisations.

### 3. Code of Conduct

HealthServe has implemented a Code of Conduct for its Board members which is strictly adhered to by all Directors and Board Committee members who are not Board members.

### 4. Strategic Planning

The Board holds strategic planning sessions regularly with Management to review and set strategic directions for the organisation. The last strategic review was undertaken in 2018 and the next strategic review session is scheduled for 2022.

### 5. Reserved Matters

In the various policies that are in place and in the constitution of HealthServe, there are critical matters that cannot be undertaken by Management without the approval of the Board, and these include undertaking obligations above certain financial thresholds, undertaking new businesses and critical communications on behalf of HealthServe.

### 6. Board Evaluation

The Board has implemented a Self Evaluation process which is led by the Chairman. This will be done on an annual basis.

### 7. Directors' Attendance at Board and Board Committee Meetings

There are at least four Board meetings a year (once a quarter) and ad hoc meetings are held from time to time when the need arises. Board meetings were well attended and there is a 100% attendance for all Board meetings in FY 2020. Board Committee meetings are held in accordance with the Terms of Reference of each Committee. Each Director sits on at least one of the Board committees and actively participates in all Board meetings. Information on the participation of Board members in the various Committees are set out in pages 14 - 15 of this report. Directors who are unable to attend meetings in person are able to participate through video/audio/tele-conferencing.

#### Board Meetings Attendance

NAME	5 MAR	21 MAY	25 AUG	2 DEC
Dr Goh Wei Leong <sup>1</sup>	●	●	●	
Ms Chan Chia Lin	●	●	●	●
Mr Chan Kum Kit	●	●	●	●
Dr Calvin Chong Peng Choon	●	●	●	●
Dr Jeremy Lim Fung Yen	●	●	●	●
Ms Susan Kong Yim Pui	●	●	●	●
Mr Matthew Saw Seang Kuan	●	●	●	●
Dr Chan Lai Gwen <sup>2</sup>	●	●	●	●
Ms Serene Chee <sup>2</sup>				●
Ms Gail Lien <sup>2</sup>				●
Mr Choy Peng Wah <sup>2</sup>				●
Total	7	7	7	10



## 8. Delegation By Board

To assist the Board in the detailed consideration and provide more targeted oversight of various aspects of the operations of the organisation and to facilitate more efficient decision making, six Board committees were formed namely, the Finance Committee (“FC”), the Audit Committee (“AC”), the Nominations and Human Resource Committee (“NHRC”), the Medical Services Committee (“MSC”) , the Services Committee (“SC”), and the Fundraising and Engagement Committee (“FEC”).

Each of the Committees is chaired by a Board member and includes other Board members and coopted members who have the relevant expertise in the matters covered by the respective Committees. The appointment of Board committee members is approved by the Board. Each Committee has a clear set of Terms of Reference which has been approved by the Board. Details of each Committee and its members are set out in pages 14 - 15 of this report.

Although the Board Committees are empowered to make their own decisions, the Board is ultimately responsible for all decisions made by the Board Committees.

<sup>1</sup> Dr Goh retired from the Board on 1 August 2020.

<sup>2</sup> New board members who joined the Board on 21 September 2020.

### FINANCE COMMITTEE

A key aspect of the financial governance of HealthServe lies in the work of the Finance Committee which has oversight of all financial matters of the organisation including budget planning and monitoring, financial reporting and disclosure and financial management and controls. The Finance Committee also provides guidance to both the Board and the management team on the finance policies to ensure appropriate operational and accounting practices are established.

### AUDIT COMMITTEE

The Audit Committee assists the Board in providing oversight of HealthServe’s financial and risk governance by:

- i. Working with external auditors to identify potential concerns in HealthServe’s statutory audit and internal controls; and report any irregularities and concerns to the board. The Audit Committee assists the Board to ensure that reviews are conducted regularly on the Company’s internal controls.

- ii. Ensuring that there is a process to identify, regularly monitor and review the company’s key risks.

### RISK MANAGEMENT AND INTERNAL CONTROLS

#### 1. Review of Internal Controls

To further strengthen governance and as part of its regular review of internal controls, HealthServe has engaged an external consultant to review and refine its written policies and Standard Operating Procedures (SOPs) to ensure the incorporation of updated best practices. This project is expected to be completed by 2021. Following the refinement of policies and SOPs based on the recommendations, the management team will continue to monitor and evaluate the workings of these policies and SOPs.

#### 2. Risk Management

The management team identifies key risks and their respective ownership (at executive and functional levels) and presents them annually to the Audit Committee and the Board. As part of the risk management process, all operating units are required to monitor and refresh their risk inventories, conduct risk prioritisation exercises, identify key and emerging risks and develop the requisite risk controls and risk treatment action plans. This is undertaken and reviewed continually and reported to the Audit Committee and the Board on a quarterly basis.

### ADDITIONAL MEASURES TO ENHANCE CORPORATE GOVERNANCE

HealthServe has put in place various additional measures to enhance governance, and below are some of the highlights:

### RESERVES POLICY

The reserves that HealthServe has set aside provide financial stability and the means for the development of the organisation’s work. In FY 2020, HealthServe met its reserves policy target of a minimum of two years of operating expenditure.

### CONFLICT OF INTEREST POLICY

HealthServe has a Conflict of Interest policy that mandates that no staff or Board member may engage in any undermine or conflict with the organisation’s overall welfare. Annual declaration of interests by members of key management personnel is required. The charity



does not have any paid staff who is a close member of the family belonging to the Executive Head or a governing board member of the charity during the financial year.

### **WHISTLEBLOWING POLICY**

HealthServe promotes an open and transparent culture and is committed to the highest standards of integrity and professional conduct. HealthServe's whistleblowing policy aims to provide an avenue for employees and external parties to raise concerns relating to any aspect of the organisation's operations, including potential breaches of the Code of Conduct by employees. HealthServe treats such reports with strict confidentiality. The policy also serves to protect employees from any potential negative consequences for reporting their concerns. Should any party come across possible corporate or employee improprieties, they are encouraged to write in to [whistleblow@healthserve.org.sg](mailto:whistleblow@healthserve.org.sg) immediately and in good faith.

### **PRIVACY POLICY**

As HealthServe's principal activity is the provision of medical services to our beneficiaries, it is crucial that the privacy of our beneficiaries' personal data is safeguarded. HealthServe is committed to treating all essential personal data collected with strict confidentiality and ensuring that it is protected and managed in accordance with relevant data protection laws of Singapore, international good practice and individuals' rights. Since 2014, HealthServe has complied with requirements listed under the Personal Data Protection Act, with the appointment of a Data Protection Officer. Reviews and assessments continue to be undertaken on a regular basis, with the next cycle slated for completion in FY 2021.

### **FUNDRAISING PRACTICES**

HealthServe's main source of financial support are donations from foundations, churches and corporations as well as individual donors. The organisation is committed to ensuring that all fundraising activities are carried out ethically and in line with Singapore's fundraising laws. Its Donor and Fundraising policy sets out the organisation's position, principles and practices on fundraising and data transparency, ensuring accountability to all stakeholders including the public. The Fundraising & Engagement Committee oversees HealthServe's fundraising efforts. The Committee works with the management team to achieve HealthServe's fundraising goals and ensure that the appropriate regulations are complied with.

### **PROGRAMME MANAGEMENT**

The key activities of HealthServe are the provision of medical and mental health services to our beneficiaries. The structuring, organisation and operation of these services demand a high level of specialist advice and guidance. In this regard, the management team has the guidance of a panel of highly qualified professionals in the Medical Services Committee as well as a newly-established Mental Health Advisory Panel (MHAP). Tasked to promote the development of clinical practice standards and benchmarking in the domains of mental health and psychosocial needs, the MHAP assists the Board and the management team in reviewing related programmes, services and research in HealthServe.

### **CODE OF CONDUCT FOR STAFF AND VOLUNTEERS**

HealthServe's operations and services are supported by a lean core team and hundreds of volunteers every year. A key aspect of HealthServe's work lies in ensuring effective volunteer management and governance. Prior to engaging beneficiaries, all staff and volunteers of HealthServe are required to undergo onboarding and relevant trainings, and also agree to adhere to a Code of Conduct which sets out the principles, values and behaviours expected of them. These are regularly reviewed and managed by HealthServe's Volunteer Management team.

### **PUBLIC IMAGE**

The public image and reputation of an Institution of a Public Character is critical to reflect the values and integrity of the organisation in order to instill confidence and peace of mind amongst its stakeholders. Aimed at safeguarding HealthServe's brand and reputation, HealthServe has in place a Communications & Media Policy for all staff, which sets out principles and guidelines related to external and internal communications. This is regularly reviewed and enhanced to ensure the policy's relevance in line with the evolving media landscape.

### **REMUNERATION DECLARATIONS**

During 2020, there are three staff whose annual remuneration was within the band of \$100,000 and \$200,000.



healing, inspiring & bridging communities

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