On Being A Volunteer

PHYSICIANS' COMMITMENT TO SOCIETY

In the best traditions of medicine, the physician is committed to compassion and charity. The early hospitals and medical schools were established by religious orders. With the explosion of biological sciences and technology in the 20th century, the practice of medicine has changed. As we approach the era of a health industry, there is an urgent need to re-examine our commitment as volunteers in the care of the handicapped and as volunteer teachers in the training of doctors and paramedics in providing basic medical care in the poorer countries. The fabric of medicine is more an art than a science and as we continue to make great advancements in the field of science and technology, we seem to be less concerned with altruism, especially in the care of the disabled, the aged and those who are terminally ill. "Medical Doctors are the priests of our secular society because health has taken the place of salvation", Drame a social scientist wrote.

Voluntarism is not new in Singapore. In the post-war years, doctors volunteered to serve in the Children's Society and the Red Cross Home for the severely handicapped and malnourished at Tanah Merah. Doctors worked hand in hand with volunteers from the British and Australian Armies and their spouses who cared for the ill and under nourished and physically disabled children. The late Dr Chen Su Lan was a concerned physician. Doctors volunteered their services to the St Andrew's Children's Hospital and the Singapore Anti-tuberculosis Association. In the late 40s and 50s, the people of Singapore were poor and lived in slums. There was tuberculosis and poliomyelitis and malnutrition and there were many doctors and nurses who volunteered in various homes to care for these unfortunate citizens.

Doctors are teachers and are committed to the training of both nurses, doctors and paramedics. It is gratifying to note that doctors having obtained a higher degree and after gaining experience, have volunteered their services in parts of Africa, Lebanon, Palestine, Myanmar, Indonesia and China. There are today, doctors in institutions and in the private sector, who give freely their expertise in the field of cardiology and cardiothoracic surgery, orthopaedic surgery and plastic surgery, going to parts of Indonesia and Myanmar in treating children with hare-lips and and cleft pallates. When a professional reaches the peak of his career, what

greater satisfaction will one get than to go and establish various medical centres in the less developed parts of the world. There are many visually disabled people in China, India and Africa and doctors from Singapore have set up centres for the treatment of these people in their own countries. Doctors and institutions in Singapore have also provided time and money in training some of these doctors who will return to their own country to serve their people. There is now the Singapore International Foundation and doctors have greater opportunities to offer their services to countries in the region. There are also many support groups and doctors must be willing to volunteer to advise those in need. In the field of drug rehabilitation and AIDS, doctors have to be involved as counsellors.

There are many "invisible" volunteers in our profession who have carried out their mission of compassion and caring in their own quiet way and have not sought any formal recognition. Even doctors who are in the Rotary Clubs and the Lions Club have been most helpful in financing some of our welfare associations. Voluntary service is a twoway street. It provides many benefits to the volunteers as well as those in various rehabilitation programmes. For me, I have had the rare opportunity to meet and know the late Dr Ee Peng Liang and Mr Leslie Rayner and his many Rotarian friends who helped to set up the Society for Aid to the Paralysed. There is now a large workshop and the handicapped are gainfully employed and trained to take up positions in the industry. Many doctors may not have heard of "Field House" in Gilstead Road. It was set up by Dr Elaine Field who was the Head of Paediatrics and the late Professor DR Gunn, to care for the spastic children in Singapore. Many doctors volunteered in running the clinics and helping with the treatment of these children and there were also volunteer therapists from Britian, Australia and New Zealand, who helped with the rehabilitation. There were also educational programmes supported by the government.

In the training of young undergraduate in our medical school, little emphasis has been paid in training doctors to care for the dying and also the aged. The hospice movement in Singapore was started in 1985 when St Joseph's Home opened its doors to the terminally ill patients by setting aside beds for hospice care. Similarly, there were beds for

the terminally ill at Mount Alvernia Hospital and many voluntered their service to these charitable organisations. There will be a greater need for doctors to be involved in hospice care and homes for the aged as we move into the next century. We must build towards our dream of a more caring and gracious society, a society which has a place for everyone.

In the early 70s, many doctors and nurses volunteered to serve with the Singapore Armed Forces and helped to form the General Support Medical Group and prior to that, they volunteered as doctors in the Peoples Defence Forces.

In a very materialistic society with high expectations, society is often distressed when they suddenly become ill, disabled and terminally ill. We, as a profession, must be committed to these very special problems that we will have to face and give some of our time, energy and contributions to those in need. Hope is a divine feeling, compassion, charity, concern and care for the disabled must be the hallmark of our profession.

DR N BALACHANDRAN
President
Singapore Medical Council

As I became more involved in volunteer work, it dawned on me how much I was getting out of all these - increasing my self-esteem and confidence, through net working and interacting with others doing volunteer work and meeting up with the less fortunate, and helping me to mature. On further reflection, it occurred to me that my interest in the community around me was aroused at about the time when Singapore became self-governing and later, independent. I may have realised how important it was for each citizen to play a positive role in Singapore's survival, and in building the community, and that for me as a volunteer in my vocation as a doctor and in my capacity as a citizen of my country, in assisting the development of my community into a civil society.

Whilst much of this feeling can be said to be altruistic, there is no denying that some of it is selfish, because in contributing my little bit towards making Singapore into a better place for all, it will also be a better place for my family, my children and grand-children.

DR ROBERT C K LOH
Ophthalmologist in private practice

Voluntarism has become a way of life with me, perhaps a little more so than the average person. However, I did not choose to be a volunteer, not at first. On looking back, it may have started when I was in school and had joined YMCA and the Boys Brigade but my conscious involvement in public service, perhaps started when I had returned from UK in 1954 and rejoined the Government Medical Service in the Ophthalmology Department as Senior Registrar and in 1958, was asked to represent the Ministry of Health in the management committee of the Singapore Association for the Blind and later on, I was invited to be Honorary Consultant to St Andrew Mission Hospital in 1960.

My participation in voluntary service is quite varied but the most satisfying of all these is my association with the National Council of Social Service (NCSS) which replaced the Singapore Council of Social Service (founded in 1958) in 1992. I was appointed the NCSS's first President but had been with its predecessor, the Singapore Council of Social Service since 1972 and served as its vice-president between 1984 and 1992.

My early involvement as a student in volunteer work was entirely fortuitous. I took part because my friends did so. But as my interest grew, I am certain that the example set by both my parents, my father Dr Loh Poon Lip who was quite a public figure in the YMCA movement and a Municipal Commissioner in his time, and by my mother, who was a lay leader in her Church, President of YWCA and was decorated MBE by the Queen, played a significant part in all these.

What motivates people to do charity work? Some do so with a genuine love for his fellow men in distress, others out of social conscience, having done well in their profession or business, and yet others for fame and publicity. Whatever their motives, it is gratifying to see increasing numbers coming forward to help the less fortunate, the disabled and the destitute.

The two main charitable organisations I was intimately involved in the last decade are the Home Nursing Foundation (HNF) and the Movement for the Intellectually Disabled of Singapore (MINDS). As a board member of the Home Nursing Foundation, I was able to contribute towards the management of the Foundation. Being in the medical profession helped me see the needs of this less fortunate group of patients in the right perspective and appreciate their difficulties and special requirements. Management policies are thus geared towards this end. Fund raising, training of staff and public education are among other activities undertaken to ensure that our objectives are met. The HNF was chaired by Ms Lee Siok Tin, an outstanding volunteer, well known to all who are involved in any way in charity. I derived as much satisfaction as I contributed.

I stepped down from the HNF in 1995 due to increasing pressure of other commitments as well as to concentrate on my involvement in MINDS.

I took up the presidency of MINDS in 1993 when the then president, Mr Lim Ewe Huat, stepped down for health reasons. My predecessor, Mr Lim, has been one of the beacon of light in MINDS for well over two decades and has been responsible for building up the organisation from

its humble beginnings in 1962. MINDS owed much to his commitment, personal sacrifice and dedication.

The Movement for the Intellectually Disabled of Singapore is the largest VWOs in Singapore. Started in 1962 by a group of concerned volunteers for the welfare of this often forgotten group of the less fortunate in our society, MINDS has grown from a small education centre looking after 26 intellectually disabled children at Towner Road, to running five special schools, three sheltered workshops, two day-activity centres, two residential homes and a youth group today. Its objectives are to provide the intellectually disabled a basic education and train them in skills to live independently as useful and equal members of society. To do this requires not only dedicated and committed volunteers, but full-time staff with a calling to serve this group of our citizens as well as the support of our Government and the understanding and acceptance by society at large. Over the years, with perseverance, we have been fortunate in achieving a measure of success towards this end. It is gratifying to note that we are not as cold, business-like, selfish and uncaring as a society as we are sometimes made out to be, judging by the actions of individuals, groups, business corporations and our Government, over the past years.

What is it that makes people take on work like welfare voluntarism which are not part of their fulltime jobs. As mentioned earlier, motivation comes from many sources. To be honest, I cannot claim that my initial involvement in welfare work was started off by a deep love and sense of caring for the less fortunate. However, what started off as a casual offer to help out friends and colleagues in such organisations, developed into a conviction that we must help our fellow men, especially the disabled and the helpless. Voluntarism is also not just a one way traffic of giving and helping. I derived as much personal satisfaction and happiness in seeing the smiles on those we helped. Viewed from such a perspective, it has a side of human selfishness and weakness but we are human after all. Life is not just about ourselves in our own tiny comfortable confines but also about others around

"We make a living by what we get but we make a life by what we give."

Norman MacEwan

A/PROF TAN SER KIAT Consultant Orthopaedic Surgeon Singapore General Hospital I began in voluntary work as a helper to my husband Dr N C Tan. The year was 1966. He had been given the opportunity for starting the new Department of Cardiothoracic Surgery. He had a nice-sounding designation and was rich in ideas, but the department was poor in money and staff resources. I was then working mainly as a homemaker, so I volunteered several hours a week at the heart-lung machine to keep animals alive while he and his surgical team practiced their skills on the poor creatures. If the animal lived, I carried it home and nursed it in our garage through the night. The team honed their skills for a year before embarking on the treatment of patients, at which point my voluntary job became a paid one. The work was exhilarating and every case was a learning experience, so I had no complaints about being unpaid and unacknowledged by the Ministry of Health for a whole year.

This initiation into voluntary work showed me how much one can benefit in terms of learning and satisfaction, and paved the way for more voluntary work through the years which followed.

My next big voluntary job was being the treasurer for the Asian-Pacific Congress of Cardiology which took place in 1972. In those days, there were no congress organisers at all in Singapore, so committee members did all the work in their area of responsibility for the three years running up to the congress. The paid assistance for the whole committee came from one part-time office manager and three school leavers. I had some start-up help in book-keeping from a friendly university lecturer in accountancy, after which the whole account from beginning to end was handled by me and my young assistant. The congress was the first meeting held in the newly built Shangri-la Hotel, it was a resounding success and it netted a profit which benefitted cardiology for years afterwards. It was the same story again. I learned skills in book-keeping and organising which still stand me in good stead today.

During the years from 1967 to 1988, I helped to organise 9 more medical meetings in Singapore. I served as the Business Manager for the Annals of the Academy of Medicine from 1974 to 1989, during which time, I learned a lot about publishing and advertising.

By the late 1970s, I was devoting more time to voluntary welfare work. The impetus came from my intellectually disabled son, who needed special schooling, then unavailable for his disability. A group of interested professionals and parents of similar children established the Association for Educationally Subnormal Children in 1976, to which I was elected the Founder President. From its very small beginnings, the association today runs four schools and a centre for the adults who have passed through the schools. What I did for my son to begin with, I still continue to do for all the other children who are helped by the association. For the first decade, a large part of its expenditure was raised by members of the association. I learned about handicaps, special education and fund raising. This time around, I received a national award in recognition of my work, but my reward remains the satisfaction for help given rather than an award.

My interest in women as a group with needs of their own has grown with my involvement with the Quota Club of which I was the Founder President in 1980. The club members have raised funds for many worthy projects. In so doing, members have shared their lives with each other and have visibly grown in skills and assurance.

I trained for a new profession late in life, in counselling with families and couples, which has opened for me a new area of paid and voluntary work since 1991. The remuneration for counselling is far less than that for medical work, so I keep a toehold on my medical practice. But the satisfaction of helping people put their disordered lives together again is payment too.

In 1994, I was appointed a Justice of the Peace. With this appointment, I began to visit the womens' prison where I learnt about yet another world within our familiar world, and about the many needs there.

In conclusion, I have learnt many skills and lessons in life as a direct result of doing voluntary work. It has made my life richer in quality, more interesting and more worthwhile. At the end of the day, when our Maker calls for us, we cannot take our money with us; but the good that we do for others will live on.

DR DIXIE TAN Consultant Cardiologist and Family Therapist

Pro Bono Publico - for the good of the public. That is what we believe we are doing when we volunteer to do community service.

How many of us are really doing this altruistically? Some of us are pushed into doing public service by our friends, sometimes even by our superiors. Others have public service thrust upon them by their own nagging conscience.

So was I when I took on the job of Founder President of the Singapore Association of Mental Health. My name was proposed by a senior colleague and there was no backing out.

At that time, an organisation like the SAMH was looked upon by the Government as a political party in disguise and not without reason too. When everybody else was full of praise for the work of the HDB, here comes a new upstart organisation warning of the possible dangers of crowded public housing.

We had to have credibility and to an extent, I felt we managed to allay fears and suspicion by being constructive in our observations.

One of our successes, I like to feel, was our ability to convince the HDB for the need of play space for children living in the housing estates. "We do provide for playgrounds in every housing estate", they argued. "Ah yes! But what about the very young ones, those about four or five years who cannot cross the street to get to the other side? Isn't it important that they should have playspace in their own block." "We can put these on the roof as they do in Hongkong", came the instant reply. "Do you know the temperature in

the tropics on a hot concrete roof in the afternoon?" we retorted.

And so was born the idea of the void deck. It was going to cost the HDB a tremendous amount of money - imagine the rentals they could have got from the audio-video shops, the *kopi-tiams* and all the small *kek-lais*.

So the children got their play space, or so we thought when we mooted the idea 25 years ago. As I go around the housing estate these days, I feel someone somewhere must have forgotten what it was all about. Signs abound - no ball games, no cycling. These days the wedding feasts and the funeral wakes have taken over the void decks. At least some use has been made of our void decks.

My service with the SMA began when Arthur (now Prof Arthur Lim) accosted me when I was eating satay at the Orchard Road car park nearly thirty years ago. "EK, we must have a credible professional organisation in the SMA with non-vested interests. I agreed and was handed the job of putting life into the Newsletter, an unenviable task. I brought certain topics to bear on mental health and the danger of silicosis, much to the opprobrium of some of my friends. All the effort has not been in vain however, as many of my colleagues now recognise the importance of stress in emotional disorders and after some period of time, the Government has gazetted that silicosis be regarded a compensatory industrial hazard.

Would you believe it, as President of the SMA, I also had the opportunity to host a reception for the Chinese badminton team at the Istana?

But that is another story.

DR E K KOH General Practitioner Past President, SMA

I was introduced to the Spastic Children Association of Singapore (SCAS) in 1986 by Dr Ong Leong Boon. He was then the Chairman of the Association. He told me that he needed new blood to run the organisation. The organisation also required help to run the clinic as well as to lead the professional staff in the organisation.

I did not hesitate in accepting the proposal as I felt that it was a good chance to contribute to society in return for the benefits that I had acquired through the opportunity of education and working.

I started by running a clinic to look after the unfortunate children who through no fault of theirs, were born with physical and mental handicaps. The clinic also ties in with my own personal expertise as an orthopaedic surgeon.

Within six months of joining the organisation, I was asked to be the Chairman of the Case and Review Committee of the organisation. The committee looked into admissions of new cerebral palsy children to the association and how the staff and association could help in the treatment, rehabilitation, schooling

and physical therapy of the children. The therapy treatment included physiotherapy, occupational therapy and speech therapy. We also looked into all aspects of the children's requirements including transport and financial aid.

Barely a year later, I was again approached to be Chairman of the Professional Subcommitte and later as Secretary of the Association in 1988 and as Deputy Chairman from 1990. In the process, I was involved in organising two National Cerebral Palsy Symposia and various fund raising projects.

By virtue of being the SCAS Deputy Chairman, I was invited to sit in the Board of Directors for Children's Charities Association in 1990. This is another voluntary organisation which raises fund for the six children organisations under their umbrella. Again, I was involved in various fund raising projects.

In 1995, I was invited to sit in the Raffles Institution(RI) Boarding Supervisory Committee. Our tasks were mainly to explore and monitor the welfare of the students who are boarding in the complex, to monitor the financial status of the boarding programme and provide recommendations/input to the Board of Governors who will be responsible for the financial viability of boarding.

I am honoured to be able to serve in these three organisations. The first two were serving the underprivileged children. Serving them is a challenge to my professional and social abilities, to help them integrate in our very competitive society. It is gratifying to see some of these children being able to improve their physical abilities and find employment either in the open market or sheltered workshops. While others who are more disabled manage to be independent in the activities of daily living.

As for the Rl Boarding, the challenge ahead is to help these brilliant chlidren achieve their maximum potential in life. These include education, peer understanding, cross-cultural knowledge, net-working with overseas students and communal living. These inputs will certainly enhance the development of our future leaders teaching them to be broad-minded and to think globally.

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CARING BEFORE CURING

I remember when I was little, sitting before the television set, the story (in black-and-white pictures) of a poor widow who worked diligently to raise her two sons, was to become an inspiration in my practice of medicine. The older son was soon to be a lawyer and the younger one had inspired to enter a medical career. When she asked the latter what the most important pre-requisite to this vocation was, he cited hard work and intelligence, which seemed good judgement until the widow offered an alternative love for mankind. Since then, this message has been deeply embedded in my temporal lobe. In Sunday school, I was brought up to "Love thy neighbout as thyself". Such an idea became translated into activities like visiting children, the physically and intellectually disabled, and the elderly. The Singapore Red Cross Society and the Charity Squad in school were a natural follow-up of that. In medical college, it was Welfare Society of the hostel, where regular visits were made to bring crackers, rice and canned food to old folks in Chinatown. As a doctor, it was St John's Ambulance Brigade, Singapore Anti-Narcotics Association, Anglican Welfare Council, and now, Singapore Action Group of Elders.

The celebration of breakthroughs in medical sciences has led the modern man to expect the physician to fix his body (and mind). Yet, as a doctor, one is fully aware that we have more questions than answers to human diseases and sufferings. So when a cure is found wanting, care is always at hand.

Care is not necessarily cure. But one does not need to be a physician in order to care. Dr John Collins Warren, a Professor of Anatomy at Harvard, was the surgeon who performed the historic operation under ether with his colleague Dr James Jackson. They were also the two doctors who founded the Massachusetts General Hospital in Boston and often reminded their students: "When in distress, every man becomes your neighbour" (August 20, 1810).

Care is not mere emotion, or an attitude, or even a value. It is the deliberate choice and conscious effort to love one's neighbour as oneself. Care in itself can bring about healing. It is well said: "To cure seldom, to relieve sometimes, to comfort (and care) always". And the widow's remark is indeed simple wisdom.

DR KO SOO MENG Consultant Psychiatrist National University Hospital

Back in 1994, just before I started my studies in the medicine faculty, I decided that I should do some form of voluntary work, so I joined the Students Care Service - a VWO whose main target group are students. I felt that since my purpose of joining the medical profession was to heal people, it would be good if I could also learn the art of helping people. Initially, I was at a loss when the children whom I was taking care of started to quarrel. At the end of the first year, I even contemplated quiting my voluntary work with the agency, as I did not see myself contributing to the students we were helping. I was not sure if my efforts had made a difference in their lives. Then the agency started a new center in Yishun and I went to help out in the setting up of the place. That was when I started to learn more about the agency and the sort of work they were doing. By knowing the direction the organisation was heading, it gave me a clearer idea of the work I was doing. At the same time, I committed myself to taking on the role of a hotline counsellor. I suppose the regularity of the work I was doing allowed me to see the results of my work, which acts as a sort of a yardstick for me to see if I am indeed heading in the right direction. Having supportive volunteers and staff to help me along the way really makes my voluntary work more pleasant. They also helped me overcome many difficulties I faced in the course of my work.

When I started to volunteer, my idea of voluntary work is just to give all of myself. I felt that since life is unfair, I, being more fortunate than others, should try to help those who are less fortunate. No doubt, voluntary work is about giving one's time to help

others, but it can turn out to be a win-win situation. In fact, the win-win relationship between my voluntary work and I, is the main driving force that has kept me going. The 3 years of voluntary work has enriched my life. Every session I had with any child was a learning experience. I had initially thought that counselling work would make me feel horrible, as I would be listening to people's problems everyday, but it turned out to be most enjoyable. Through listening to the callers, I was not just able to help them with their problems, but also able to gain another perspective in life.

My voluntary experience has also made a difference when I step into the wards as a medical student. I am able to practise what I learnt and treat a patient as a person rather than someone with a disease. It was a struggle for me initially as I tried to balance learning with caring for the patient. All these while, my voluntary work kept reminding me of the reason why I took up medicine - to help people who are less fortunate. It prevented me from losing my objective under the extreme pressure of the heavy workload. I do hope that as time goes by, I will learn to achieve the right balance.

Voluntary work has certainly been a rewarding one for me. It has certainly added another dimension to my life and the lessons I learnt are certainly priceless.

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