DOMESTIC VIOLENCE TRENDS REPORT

OCTOBER 2026

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Published on 29 October 2026

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TECHNICAL NOTE

GENERAL

Age of victim-survivor refers to the age of the victim-survivor at the time the case was taken up by the Ministry of Social and Family Development's (MSF) Protective Service (PSV) or a community agency to address safety and risk concerns.[1]

Community agencies refer to Child Protection Specialist Centres (CPSCs), Protection Specialist Centres (PSCs) (including the Integrated Services for Individual and Family Protection Specialist Centre) and Family Service Centres (FSCs). CPSCs and PSCs are community-based specialist agencies that provide services and support to families and persons who face abuse or neglect. FSCs are community-based agencies that provide social and emotional support to families in need. For child abuse cases, CPSCs, PSCs and FSCs may also be referred to as Child Protection Case Management (CPCM) agencies.

New cases of abuse in a specified year refer to cases that were taken up by MSF's PSV or a community agency in that year to address safety and risk concerns. The number of new cases may not equate to the unique number of victim-survivors. For example, if a case was closed by MSF's PSV or a community agency, and subsequently re-opened due to new incidences of abuse, it would be counted as two cases.

Primary type of abuse refers to the type of abuse assessed to have significant impact, harm or injury on a victim-survivor, and is most likely to place the victim-survivor at risk in the short term, based on available information and evidence. A victim-survivor may be subjected to more than one type of abuse.

Statutory intervention refers to legal actions and measures that MSF's PSV takes to protect vulnerable persons, such as children and Vulnerable Adults, from abuse or neglect. For example, MSF's PSV can intervene under the Children and Young Persons Act (CYPA) to investigate cases, place a child under supervision, or remove a child from his/her home and place the child in out-of-home care.

Tier 1 cases are those overseen by community agencies. Generally, these are cases that present low to moderate safety and risk concerns for the victim-survivor. For example, where there is infrequent occurrence of verbal abuse, such as derogatory remarks, that does not escalate to severe physical violence or psychological abuse.

Tier 2 cases are those that require statutory intervention, overseen by MSF's PSV. Generally, these are cases that present with high safety and risk concerns for the victim-survivor which may warrant more intrusive intervention (e.g. removal of a child or Vulnerable Adult) to keep the victim-survivor safe. For example, where severe injuries (e.g. burns, fractures) have been inflicted on a child by the parents.

CHILD ABUSE

Age of child in out-of-home care is determined by the child's birth year. For instance, if a child was born in December 2006 and the case was taken up by a community agency or MSF's PSV in January 2024 (i.e. aged 17 years and 1 month), the child's age would be reported as 18 years, based on the child's year of birth.

Family-based care comprises kinship care and foster care. Children under kinship care are cared for by their natural or extended family, while children under foster care are cared for by foster parents approved by MSF.

Incidence rate of Tier 2 child abuse is the total number of unique children (Singapore residents and non-residents) in new cases investigated by MSF's PSV per 1,000 population aged below 18 years in that year.

Number of children under out-of-home care is as of 31 December of the specified year, regardless of the year the child's case was opened.

Number of foster families is as of 31 December of the specified year.

Out-of-Home Care refers to alternative care arrangements for a child or young person when they cannot safely remain at home. Such arrangements consist of family-based care and residential care.

[1] Since May 2025, Child Protective Service, Adult Protective Service and Children in Care Service have been integrated to form the Protective Service.

Residential care refers to care provided by Children's Homes for children in need of out-of-home care.

Tier 1 child abuse cases refer to children aged below 18 years in new cases overseen by CPSCs, PSCs and FSCs due to child safety and risk concerns.

Tier 2 child abuse cases refer to children aged below 18 years in new cases investigated by MSF's PSV.

SPOUSAL ABUSE

Tier 1 spousal abuse cases refer to new cases overseen by PSCs and FSCs due to safety and risk concerns. This report excludes victim-survivors who sought protection in other forms (e.g. applying for a Personal Protection Order at the Court) but are not known to these community agencies. As most victim-survivors of spousal abuse are able to seek help on their own behalf, these cases are largely managed by community agencies.

ELDER ABUSE

Elderly person refers to a person aged 65 years and above.

Tier 1 elder abuse cases refer to new cases overseen by PSCs and FSCs due to safety and risk concerns. Cases involving elderly persons who meet the definition of a Vulnerable Adult and present with high safety and risk concerns are classified and reported separately as Tier 2 elderly Vulnerable Adult abuse cases.

VULNERABLE ADULT ABUSE

Vulnerable Adult is defined in the Vulnerable Adults Act as a person aged 18 years and above, and is by reason of mental or physical infirmity, disability or incapacity, incapable of protecting himself or herself from abuse, neglect or self-neglect.

Incidence rate of Tier 2 non-elderly Vulnerable Adult abuse is the total number of unique non-elderly Vulnerable Adults (Singapore residents and non-residents) in new cases investigated by MSF's PSV per 1,000 population aged 18-64 years who are unable to perform or who have a lot of difficulty in performing at least one basic activity (estimated based on the proportion of such residents from Census of Population 2020). This excludes Vulnerable Adult self-neglect cases.

Incidence rate of Tier 2 elderly Vulnerable Adult abuse is the total number of unique elderly Vulnerable Adults (Singapore residents and non-residents) in new cases investigated by MSF's PSV per 1,000 population aged 65 years and above who are unable to perform or who have a lot of difficulty in performing at least one basic activity (estimated based on the proportion of such residents from Census of Population 2020).[2] This excludes Vulnerable Adult self-neglect cases.

SELF NEGLECT

Incidence rate of Tier 2 Vulnerable Adult self-neglect cases is the total number of unique Vulnerable Adults (Singapore residents and non-residents) in new self-neglect cases investigated by MSF's PSV per 1,000 population aged 18 years and above who are unable to perform or who have a lot of difficulty in performing at least one basic activity (estimated based on the proportion of such residents from Census of Population 2020).

METHODOLOGICAL REFINEMENTS IN THE DOMESTIC VIOLENCE TRENDS REPORT 2026

The Domestic Violence Trends Report 2026 adopted three methodological refinements to improve the accuracy and consistency of reporting. These refinements affect how cases are counted and reported, and compared to previous reports, resulted in fewer cases by more precisely identifying individuals affected and removing duplicates. However, it does not change how cases are assessed, managed or supported. All victim-survivors from households with domestic violence concerns continue to receive the appropriate level of support and intervention, according to their needs, circumstances and level of risk.

[2] Basic activities refer to seeing, hearing, mobility, remembering or concentrating, self-care and communicating.

(a) Use of Family and Adult Support Tool (FAST) as the basis for reporting Tier 1 domestic violence cases managed by FSCs

In previous reports, FSC domestic violence cases were counted based on whether child, spousal or elder abuse was recorded as a presenting and/or underlying issue for the household during intake or casework. Cases were reported at the household rather than the individual level, limiting visibility of the specific victim-survivor. As a result, the reported figures may have overstated the number of affected individuals. For example, where child abuse concerns were identified, all children within the household were counted, even if abuse concerns were related only to a specific child. This does not affect the standard practice of assessing all children in the household for concerns and possible intervention.

In 2025, MSF refined its reporting methodology to leverage data from the FAST assessment tool, enabling more precise identification of abused individuals.[3] These refinements were possible due to improvements in data availability and reporting capabilities. Compared to the previous methodology, FAST provides a more robust and consistent basis for identifying current abuse concerns, the primary type of abuse, and victim-survivor profiles. Reported figures may be lower under this approach as FAST attributes abuse-related concerns at the individual rather than household level. For example, in child abuse situations, reporting is based on the specific child assessed to have experienced or been exposed to abuse, rather than assuming that all children within the household are affected. The revised methodology was retrospectively applied from 2023, to support like-for-like comparison.

(b) Classification of abuse exposure category

MSF's PSV assesses the safety of all children within a household whenever child protection concerns arise, as standard practice. Under the previous reporting methodology, all the children assessed would be counted as a Tier 2 case, regardless of whether the child had indeed been abused or were exposed to abuse.

Following a review of new Tier 2 cases in 2025, only (i) children who were directly abused or neglected (e.g. the child personally experienced abuse or neglect); and (ii) children who were exposed to abuse within the household (e.g. the child witnessed domestic violence but was not directly abused) would be counted. Children assessed, but who were not found to be directly abused, neglected or exposed to abuse would not be counted. This refinement presents a more accurate picture of the actual number of Tier 2 cases.

As historical cases were not classified in this manner, the 2025 Tier 2 child abuse figures are not directly comparable with previous years and should be treated as a new baseline. This is only a reporting refinement and does not change MSF's PSV's standard practice of considering the safety of all children in a household when concerns arise.

(c) Counting approach for cases involving multiple agencies or tiers

The counting approach was revised in 2025 to provide a more accurate count of new abuse cases within a reference year.

Under the previous reporting methodology, a case could be counted twice if it moved between MSF's PSV (Tier 2) and community agencies (Tier 1) within the same year. For example, a case initially overseen by MSF's PSV which was subsequently transferred to a community agency for ongoing support within the same year would be counted once in the Tier 2 dataset and once in the Tier 1 dataset.

Under the revised methodology, a case that appears across Tiers or Tier 1 community agencies within the same year is counted only once, under the higher safety and risk classification. Using the same example above, a case overseen by MSF's PSV and subsequently transferred to a community agency would only be counted once in the Tier 2 dataset. This provides a more accurate count of unique cases and avoids double-counting.

However, cases that are closed and subsequently re-enter MSF's PSV or community agencies within the same year due to a new or recurring incident of abuse continue to be counted as separate entries, as

[3] FAST is an assessment tool used by FSCs to assess family needs, risks and case complexity. FSC caseworkers are trained to apply the tool consistently using standardised definitions, assessment criteria and ratings.

they represent distinct episodes requiring intervention. For example, if the same case as above was closed by the community agency but later re-enters MSF's PSV following a recurrence of abuse, it would be counted twice in the Tier 2 dataset.

The revised methodology was retrospectively applied from 2023, to support like-for-like comparison.

A. EXECUTIVE SUMMARY

The Domestic Violence Trends Report 2026 reports key trends on child abuse, spousal abuse, elder abuse, and Vulnerable Adult abuse and self-neglect cases.

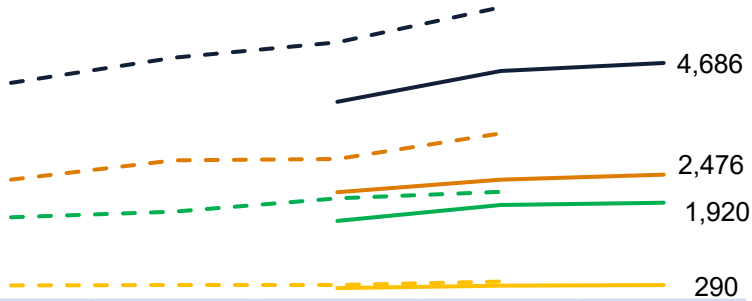
Cases reported have been categorised as Tier 1 or Tier 2.[4]

- **Tier 1**: Cases with low to moderate safety and risk concerns. These cases are overseen by community agencies.
- **Tier 2:** Cases with high safety and risk concerns, which may warrant more intrusive statutory intervention to keep the individual safe. These cases are overseen by MSF's Protective Service (PSV).

The 2026 report adopted methodological refinements to improve the accuracy and consistency of reporting, including refinements to the reporting of Tier 1 FSC-managed cases, Tier 1 and Tier 2 child abuse cases, and the counting approach of cases involving multiple agencies or tiers. Where possible, the revised methodology was applied retrospectively from 2023 to support like-for-like comparison. The reporting periods vary by dataset and are specified in the relevant sections and charts. Please refer to the Technical Note for more details on the methodological changes.

The total number of new Tier 1 abuse cases remained broadly stable at 4,686 cases in 2025, compared to 4,527 cases in 2024 (Chart A). However, cases remained elevated compared to the 2023 baseline of 3,918 cases. The continued elevation in Tier 1 cases may reflect improved detection and reporting, alongside earlier intervention. Sustained public awareness, legal protections and comprehensive support services may have continued to support earlier help-seeking, allowing concerns to be surfaced and managed sooner. Reported incidence may continue to remain elevated in the short to medium term as awareness and detection improve.

CHART A: NEW TIER 1 CASES IN 2025



	2021	2022	2023	2024	2025
Total (new method)	NA	NA	3,918	4,527	4,686
Total (old method)	4,292	4,795	5,092	5,787	NA
Child Abuse (new method)	NA	NA	2,128	2,373	2,476
Child Abuse (old method)	2,377	2,760	2,787	3,292	NA
Spousal Abuse (new method)	NA	NA	1,560	1,871	1,920
Spousal Abuse (old method)	1,632	1,741	2,008	2,136	NA
Elder Abuse (new method)	NA	NA	230	283	290
Elder Abuse (old method)	283	294	297	359	NA

[4] Cases that re-entered MSF's PSV or community agencies due to recurrence of abuse were counted as separate cases. Therefore, Tier 1 and Tier 2 cases should not be aggregated to determine the total number of unique individuals who experienced abuse.

There were 2,021 new Tier 2 abuse cases in 2025 (Chart B), consisting of child abuse and Vulnerable Adult abuse cases.[5] Tier 2 child abuse cases formed the majority of all new Tier 2 abuse cases in 2025. As the 2025 Tier 2 child abuse figures were based on a refined reporting approach, they should not be directly compared with previous years.

Over the longer term, MSF will continue to strengthen upstream prevention and the protection ecosystem, with the aim of reducing the occurrence and severity of domestic violence while ensuring that individuals and families at risk are identified and supported early.

CHART B: NEW TIER 2 CASES IN 2025



	2021	2022	2023	2024	2025
Total (new method)	NA	NA	NA	NA	2,021
Total (old method)	2,267	2,152	2,076	2,373	2,150

[5] Figures exclude Vulnerable Adult self-neglect cases.

B. DOMESTIC VIOLENCE RESPONSE SYSTEM

Addressing domestic violence requires a coordinated response that enables concerns to be identified early, provides timely protection where there is immediate danger, and connects individuals and families to the appropriate support.

The Government works with the public, professionals, the Police and community agencies to strengthen the response at each stage. Members of the public and frontline professionals play an important role in recognising and reporting suspected abuse, while agencies assess safety and risk concerns, and provide interventions suited to the circumstances of each case.

This section presents key statistics related to the early detection and reporting of domestic violence, and the system's response to high-risk cases requiring immediate protection.

B1. STRENGTHENING DETECTION AND REPORTING

Domestic violence often occurs behind closed doors, and victim-survivors may face significant barriers to seeking help. Early detection therefore depends on family members, neighbours, frontline professionals and community partners being able to recognise possible signs of abuse and take appropriate action.

MSF strengthens early detection through a combination of public education and capability-building efforts. Public education initiatives encourage greater awareness of domestic violence, promote timely help-seeking and reporting, and reinforce the message that addressing domestic violence is a shared community responsibility. Training programmes complement these efforts by equipping professionals and community partners with the knowledge and skills to identify and respond to suspected abuse in the course of their work.

In 2025, MSF continued the Break the Silence campaign through integrated media, digital and partnership efforts. The campaign reached about 2.4 million people. Together with the Domestic Violence Awareness Training, these initiatives helped build public and professional awareness of domestic violence, strengthened confidence in recognising warning signs, and increased knowledge of available reporting and support channels.

Nearly 11,000 persons engaged to build awareness on how to recognise and respond to violence in 2025

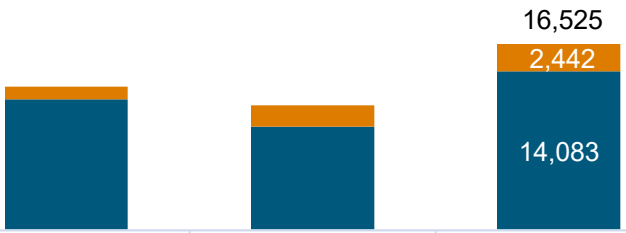
In 2025, 10,997 individuals participated in roadshows, talks, symposiums, forums and other outreach initiatives aimed at raising awareness of domestic violence, strengthening community capability for early detection and intervention, and encouraging timely help-seeking.

Reports to NAVH increased by almost 50% in 2025

The National Anti-Violence and Sexual Harassment Helpline (NAVH) received 16,525 reports in 2025, up from 11,068 in 2024 (Chart 1). The increase was driven mainly by calls to NAVH, which rose from 9,153 in 2024 to 14,083 in 2025. Online reports also increased from 1,915 to 2,442 over the same period. The sustained growth in reports suggests increased awareness of NAVH and a greater willingness among members of the public, professionals and victim-survivors to seek help or report concerns. The availability of multiple reporting channels has also made it easier for individuals to access support and surface potential abuse concerns at an earlier stage.

Not every report to NAVH leads to a new Tier 1 or Tier 2 case. Of the reports received in 2025, 82% (11,033 calls and 2,442 online reports) required follow-up, including further assessment, investigation, safety planning, or referrals to MSF's Protective Service and community agencies. However, some of these reports were related to existing cases or information requests, while others were assessed not to require statutory or community-based intervention. Accordingly, the increase in NAVH reports was not accompanied by a corresponding increase in Tier 1 and Tier 2 cases. Heightened awareness, stronger vigilance amongst professionals, and a greater willingness by members of the public to report suspected abuse may have contributed to the rise in reporting.

CHART 1: NUMBER OF NEW REPORTS TO NAVH



	2023	2024	2025
Online reports	1,113	1,915	2,442
Calls	11,596	9,153	14,083
Total reports	12,709	11,068	16,525

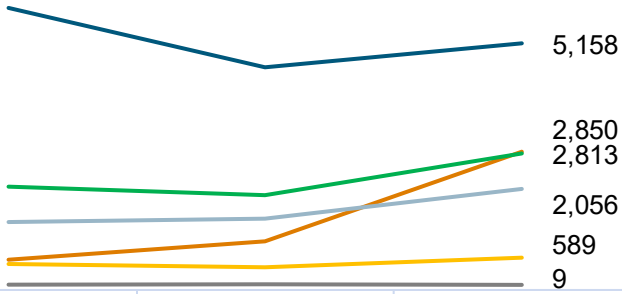
Members of the Public remain largest source of reports requiring follow-up; Law enforcement, social service agencies and the education sector drove the increase in reports

Of the 13,475 NAVH reports requiring follow-up in 2025, members of the public, including victim-survivors themselves, remained the largest source of reports, accounting for 5,158 reports (Chart 2).

The overall increase in reports compared with 2024 was driven primarily by the law enforcement agencies, social service agencies and the education sector. Together, these sectors accounted for 57% of reports requiring follow-up in 2025, up from 46% in 2024. Reports from law enforcement agencies more than tripled, increasing from 941 in 2024 to 2,850 in 2025. One contributing factor was that from September 2024, police officers responding to domestic violence incidents involving a child or Vulnerable Adult are required to notify NAVH, so that safety concerns can be assessed, and appropriate referrals made where necessary.

Reports from social service agencies increased by 46% from 1,923 to 2,813, while reports from the education sector rose by 45%, from 1,418 to 2,056. The increase in reports from these sectors suggests continued vigilance from frontline professionals and agencies in identifying suspected abuse concerns, alongside sustained reporting by members of the public.

CHART 2: SOURCES OF NAVH REPORTS FOR CASES REQUIRING FOLLOW-UP



	2023	2024	2025
Public	5,918	4,651	5,158
Law Enforcement	545	941	2,850
Social Service Agencies	2,102	1,923	2,813
Education	1,349	1,418	2,056
Healthcare	460	384	589
Others	16	21	9

B2. RESPONDING TO HIGH-RISK DOMESTIC VIOLENCE CASES

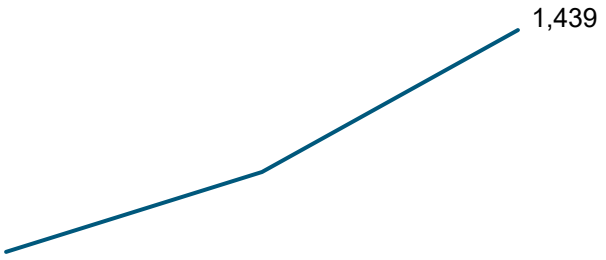
The Domestic Violence Emergency Response Team (DVERT) responds jointly with the Police to high-risk domestic violence cases with immediate safety concerns to the victim-survivor. The team could be activated either through a case referral from the Police, or a NAVH referral. DVERT is empowered to issue Emergency Orders, which temporarily restrain a person causing harm from committing violence against a family member, until the victim-survivor obtains a longer-term order from the Court.

DVERT responses more than doubled in 2025

Following DVERT's expansion from one Police Division in April 2023 to all seven Police Divisions islandwide in September 2024, DVERT responded to 1,439 domestic violence incidents in 2025, more than double the 675 incidents in 2024 (Chart 3). A significant proportion of these incidents involved suspected spousal abuse and child abuse.

Each DVERT response is counted separately, including instances where the same family required assistance on multiple occasions. This increase in DVERT responses is likely attributed in part to the nationwide expansion of DVERT, which has increased the availability of crisis intervention and facilitated access to support for affected families. Depending on the family's circumstances and needs, DVERT may provide immediate safety planning, crisis intervention, and practical support at the scene, before linking family members to appropriate follow-up services.

CHART 3: NUMBER OF DVERT RESPONSES



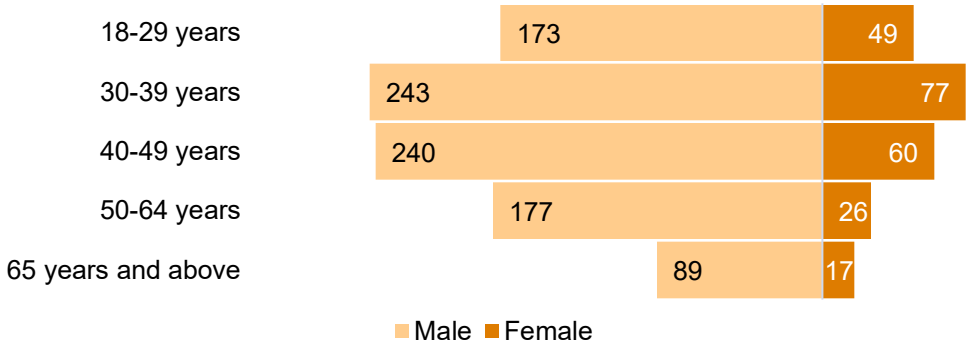
	2023*	2024	2025
Total	244	675	1,439

* Note: The 2023 figures were based on DVERT responses between Apr and Dec 2023.

Four in five Emergency Orders were issued to male perpetrators

With the implementation of the family violence amendments to the Women's Charter in January 2025, DVERT officers were empowered to issue Emergency Orders. A total of 1,151 Emergency Orders were issued in 2025. Of these, 80% were issued to male perpetrators. Emergency Orders were also most commonly issued to perpetrators aged 30 to 49 years.

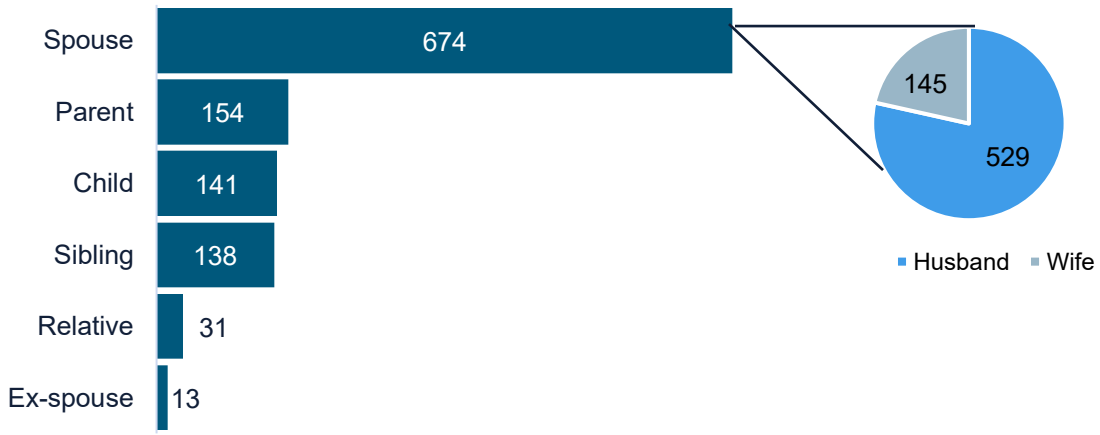
CHART 4: NUMBER OF EMERGENCY ORDERS ISSUED, BY AGE AND SEX OF PERPETRATOR



More than half of Emergency Orders were issued to spouses of victim-survivors

Of the Emergency Orders issued in 2025, 59% (674) were issued to perpetrators who were the spouses of victim-survivors (Chart 5). The remaining Emergency Orders involved perpetrators across a range of other family relationships, such as parents, children, siblings, relatives and ex-spouses, reflecting the use of emergency protection in different domestic violence situations.

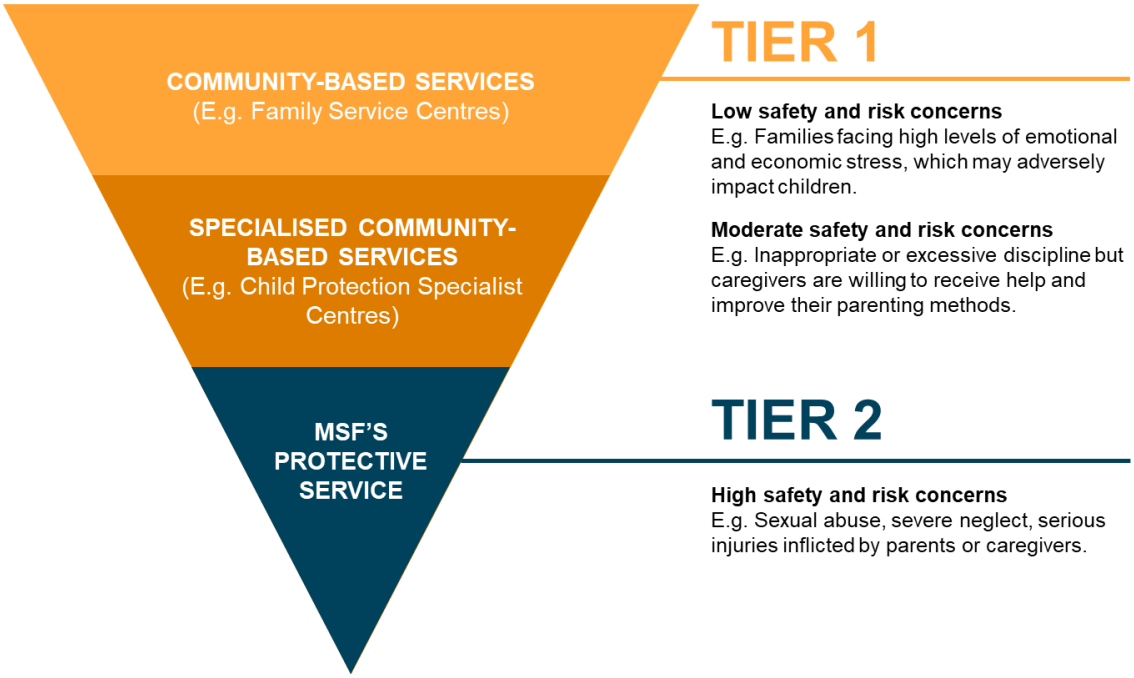
CHART 5: NUMBER OF EMERGENCY ORDERS ISSUED, BY RELATIONSHIP TO VICTIM-SURVIVOR



C. CHILD ABUSE

Child abuse refers to any action or inaction by an individual (e.g. parent or caregiver) that endangers or damages a child's physical or emotional well-being. This may take the form of physical, sexual, emotional & psychological abuse, or neglect. In this report, individuals under the age of 18 years are referred to as a "child" or "children".

Child abuse cases present with varying levels of safety and risk concerns. Tier 1 cases are overseen by community agencies such as the Child Protection Specialist Centres (CPSCs), Protection Specialist Centres (PSCs) and Family Service Centres (FSCs). Tier 2 cases involve higher safety and risk concerns and are overseen by MSF's Protective Service (PSV) for statutory intervention. Under the CYPA, MSF may investigate child abuse cases, place a child under supervision, or remove a child from his/her home and place the child in alternative care such as family-based care or residential care.

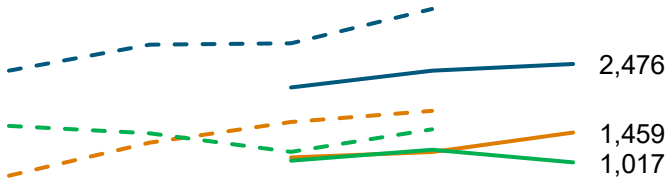


C1. NEW TIER 1 CHILD ABUSE CASES

New Tier 1 child abuse cases remained elevated

In 2025, there were 2,476 new Tier 1 child abuse cases. While numbers were broadly stable when compared with the 2,373 cases in 2024, it remained elevated relative to the 2023 baseline of 2,128 cases (Chart 6). The sustained level of cases may reflect heightened vigilance and continued reporting of child protection concerns by members of the public and frontline professionals.

CHART 6: NUMBER OF NEW TIER 1 CHILD ABUSE CASES

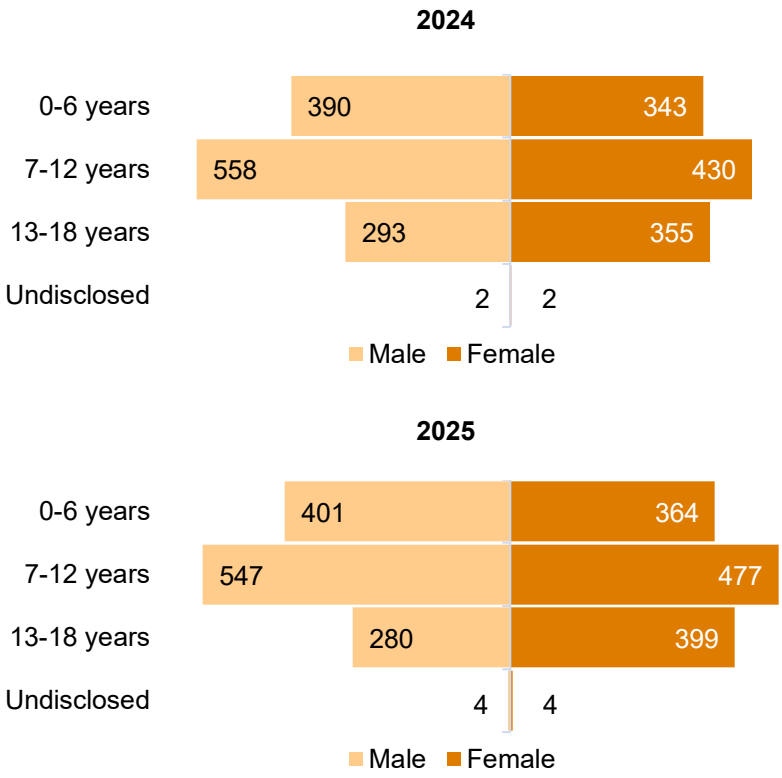


	2021	2022	2023	2024	2025
Total (new method)	NA	NA	2,128	2,373	2,476
Total (old method)	2,377	2,760	2,787	3,292	NA
Family Service Centres (new method)	NA	NA	1,090	1,169	1,459
Family Service Centres (old method)	819	1,314	1,614	1,781	NA
Specialist Centres (new method)	NA	NA	1,038	1,204	1,017
Specialist Centres (old method)	1,558	1,446	1,173	1,511	NA

Children aged 7-12 years made up the largest group of new Tier 1 cases

The age and sex breakdown of new Tier 1 cases in 2025 remained similar to 2024 (Chart 7). Comparisons between years were based on figures derived using the refined methodology (i.e. the use of FAST and counting approach).

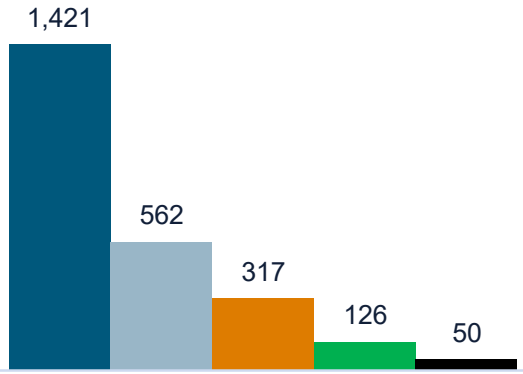
CHART 7: NUMBER OF NEW TIER 1 CHILD ABUSE CASES BY AGE AND SEX (2024, 2025)



Physical abuse was the most common type of abuse experienced

Physical abuse was the most common primary type of abuse experienced by Tier 1 child abuse cases in 2025 (Chart 8). [6]

CHART 8: NUMBER OF NEW TIER 1 CHILD ABUSE CASES BY TYPE OF ABUSE (2025)



	2025
Physical abuse	1,421
Emotional & psychological abuse	562
Neglect	317
Sexual abuse	126
Others	50

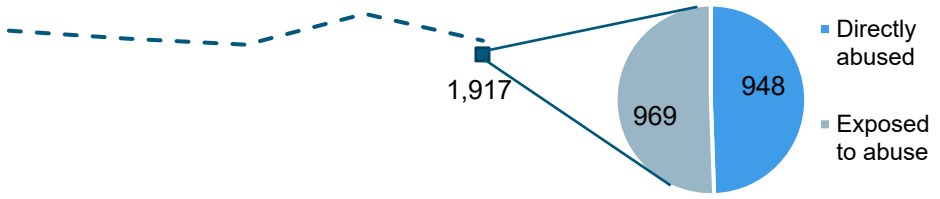
[6] Other abuse types include financial exploitation, situations where the child's parents or guardians were unable to care for them due to incarceration or drug abuse, and one case where the type of abuse was unrecorded.

C2. NEW TIER 2 CHILD ABUSE CASES

Around half of the new Tier 2 child abuse cases involved children who were directly abused

In 2025, there were 1,917 new Tier 2 child abuse cases, with the split between children who were directly abused and exposed to abuse being almost equal (Chart 9).[7]

CHART 9: NUMBER OF NEW TIER 2 CHILD ABUSE CASES



	2021	2022	2023	2024	2025
Tier 2 child abuse (new method)	NA	NA	NA	NA	1,917
Tier 2 child abuse (old method)	2,141	2,067	2,011	2,303	2,046

Incidence rate of new Tier 2 child abuse cases remained relatively low

The incidence rate of new Tier 2 cases was 2.3 per 1,000 children in 2025 (Chart 10). This incidence rate remained lower compared to other countries; for example, the incidence rate in Australia was 21 per 1,000 children in 2023-2024.[8]

CHART 10: INCIDENCE RATE OF NEW TIER 2 CHILD ABUSE CASES (PER 1,000 CHILDREN)



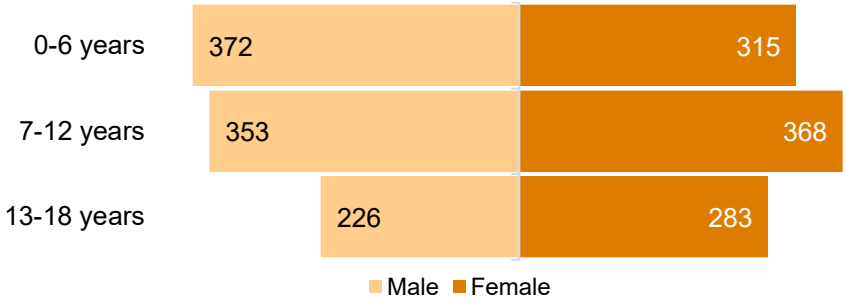
	2021	2022	2023	2024	2025
Incidence rate (new method)	NA	NA	NA	NA	2.3
Incidence rate (old method)	2.6	2.5	2.4	2.8	NA

[7] Due to the change in coding methodology, numbers in 2025 are not directly comparable to previous years' numbers.
[8] Refers to children for whom notifications were made to a child protection department alleging child maltreatment or harm to a child and were subjected to subsequent investigations as the notification met the threshold for further action. Australian Institute of Health and Welfare (2026). Child Protection Australia 2023-2024, AIHW, Australia Government. Australia's child abuse incidence rate was the closest approximation to the counting method used for the Tier 2 child abuse incidence rate.

Majority of new Tier 2 cases were children aged 7-12 years

In 2025, children aged 7-12 years formed the largest age group among new Tier 2 child abuse cases, accounting for 721 cases, followed closely by children aged 0-6 years (Chart 11). Amongst male children, those aged 0-6 years formed the largest group, while among female children, those aged 7-12 years formed the largest group. Continued vigilance by parents, caregivers, professionals and the wider community remain critical, especially as younger children may be less able to recognise, communicate or seek help for abuse.

CHART 11: NUMBER OF NEW TIER 2 CHILD ABUSE CASES BY AGE AND SEX (2025)

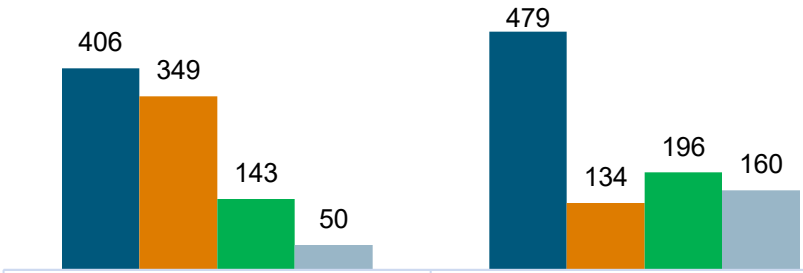


Physical abuse was the most common type of abuse among new Tier 2 abuse cases

In 2025, physical abuse was the most common primary type of abuse among new Tier 2 child abuse cases involving children who were directly abused (Chart 12). Many of these cases involved the excessive use of physical force in the course of discipline. While parents may adopt different approaches to discipline, MSF encourages parents to use non-physical means of discipline and build positive parent-child relationships.

Among children who were exposed to abuse (e.g. witnessed abuse within the household but were not directly abused), most were exposed to situations involving physical abuse.

CHART 12: NUMBER OF NEW TIER 2 CHILD ABUSE CASES BY TYPE OF ABUSE (2025)

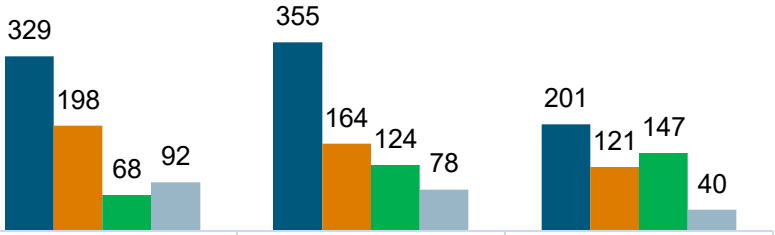


	Directly abused	Exposed to abuse
Physical abuse	406	479
Neglect	349	134
Sexual abuse	143	196
Emotional & psychological abuse	50	160

Physical abuse remained the most common type of abuse across age groups

Physical abuse was the most common primary type of abuse across all age groups in 2025 (Chart 13). The forms of harm experienced by children may differ across developmental stages, underscoring the need for continued vigilance and age-appropriate detection and support. Among younger children aged 0-6 and 7-12 years, neglect also featured more prominently, reflecting younger children's greater dependence on caregivers for daily care, supervision and protection. Among older children, neglect was less common, while sexual abuse accounted for a larger share of cases.

CHART 13: NUMBER OF NEW TIER 2 CHILD ABUSE CASES BY AGE AND TYPE OF ABUSE (2025)



	0-6 years	7-12 years	13-18 years
Physical abuse	329	355	201
Neglect	198	164	121
Sexual abuse	68	124	147
Emotional & psychological abuse	92	78	40

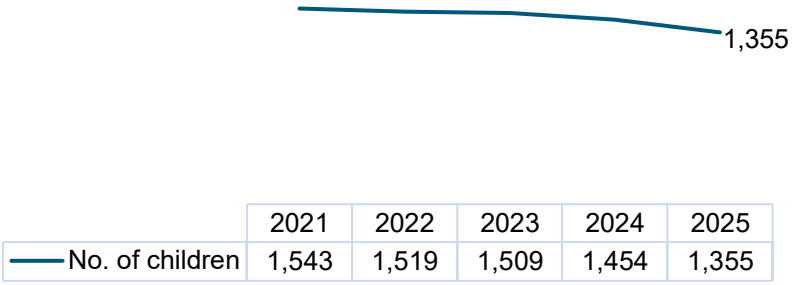
C3. CHILDREN IN OUT-OF-HOME CARE

Downward trend in children in out-of-home care

When a child cannot remain safely at home despite support and interventions provided by MSF and community agencies, out-of-home care may be required as a measure of last resort. Children are placed in family-based care or residential care to ensure their safety and well-being while efforts continue to address the underlying concerns and, where appropriate, support family reunification.

The number of children in out-of-home care continued to decline in 2025. As of December 2025, 1,355 children were residing in out-of-home care, down from 1,454 in 2024 (Chart 14). This continued decline is consistent with ongoing efforts to support children to remain safely with, or return safely to, their families through safety planning, interventions, and other forms of support.

CHART 14: NUMBER OF CHILDREN IN OUT-OF-HOME CARE



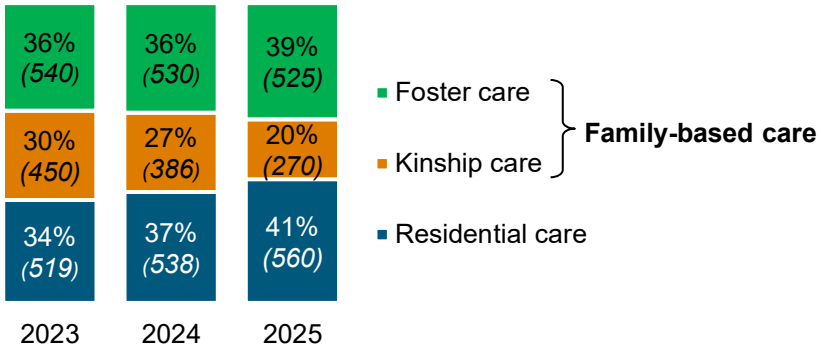
	2021	2022	2023	2024	2025
No. of children	1,543	1,519	1,509	1,454	1,355

More than half of children in out-of-home care were placed in family-based care

In 2025, majority of children in out-of-home care were placed in family-based care, comprising foster care and kinship care (Chart 15). Family-based care remains the preferred placement option where appropriate, as it provides a more stable and nurturing family environment and is associated with better outcomes for children.

The proportion of children in family-based care decreased from 63% in 2024 to 59% in 2025, driven mainly by a decline in kinship care placements. This reflects a combination of factors, including challenges in identifying and assessing suitable kin carers, as well as the stabilisation of some kinship care arrangements such that ongoing placement within the out-of-home care system was no longer required. The decline does not reflect a shift away from family-based care. MSF continues to prioritise family-based care placements wherever they are assessed to be safe, suitable and in the child's best interests.

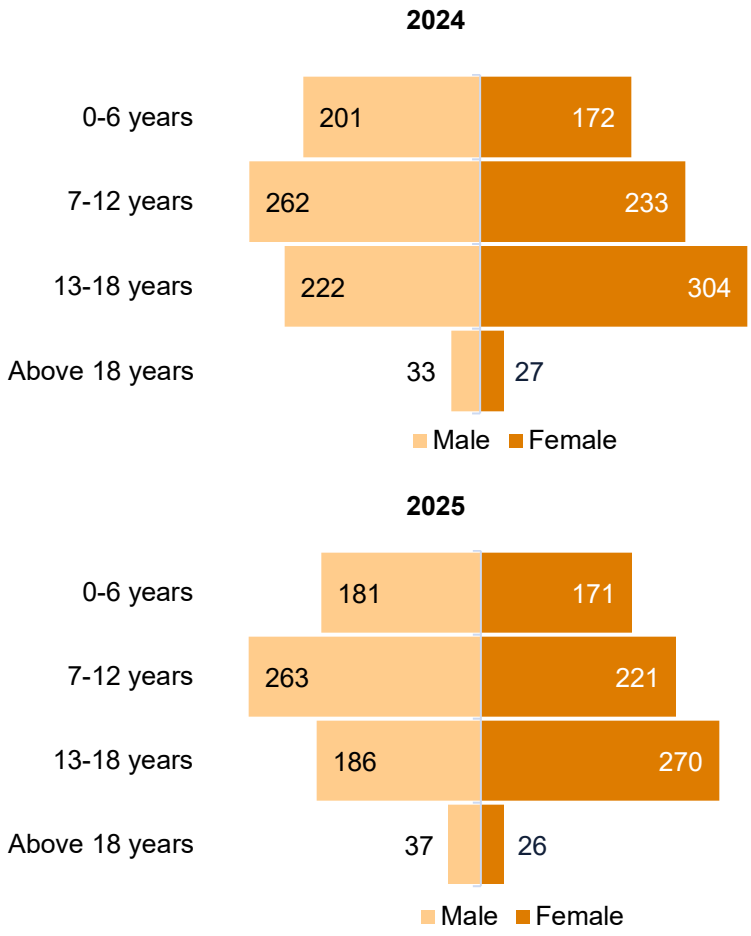
CHART 15: PROPORTION OF CHILDREN IN OUT-OF-HOME CARE BY TYPE OF CARE (2023-2025)



Children aged 7-12 years were the largest age group of children in out-of-home care

Among children in out-of-home care in 2025, children aged 7-12 were the largest age group (484 children), followed by children aged 13-18 years (456 children) (Chart 16). The sex breakdown remained broadly similar in 2024 and 2025, with females forming a slight majority, particularly among children aged 13-18 years.

CHART 16: NUMBER OF CHILDREN IN OUT-OF-HOME CARE BY AGE AND SEX (2024, 2025)[9]



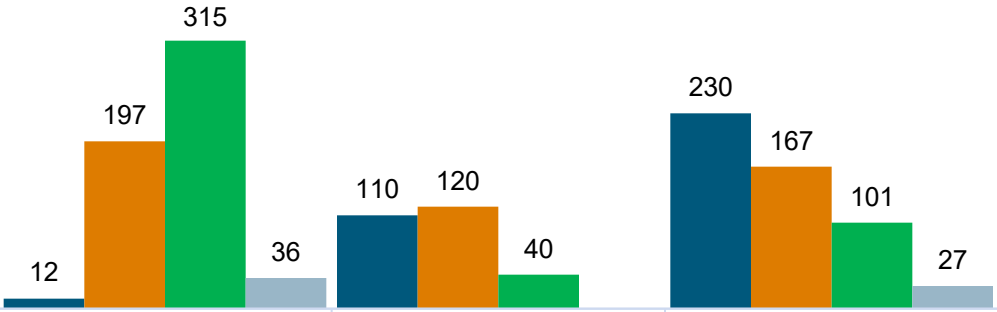
[9] Youths aged 18 years old and above may remain in out-of-home care as their Court Order can remain in force until they reach 21 years of age. Some youths can also be under Voluntary Care Agreements, signed between their parents/lawful guardians and MSF, until they reach 21 years of age.

Majority of children in residential care were aged 13-18 years

Children in residential care tended to be older than those in foster and kinship care. The largest group in residential care comprised those aged 13-18 years (315 children and youths) (Chart 17). This reflects the greater challenges of identifying and securing suitable family-based care placements for older children and youths, who often have more complex needs and circumstances.

To strengthen support for the fostering of teenagers, MSF increased the monthly fostering allowance for foster parents caring for teenagers in October 2025.

CHART 17: NUMBER OF CHILDREN IN OUT-OF-HOME CARE BY AGE AND TYPE OF CARE (2025)[10]



	Residential Care	Kinship Care	Foster Care
0-6 years	12	110	230
7-12 years	197	120	167
13-18 years	315	40	101
Above 18 years	36	0	27

Increase in foster families

The number of foster families increased slightly from 633 families in 2024 to 646 in 2025 (Chart 18). MSF continues to recruit foster parents from diverse backgrounds, including different age groups and family profiles, to support the varying needs of children in care. Having a larger pool of foster families allows MSF to match each child to a foster family that best suits their needs and ensures that there are available foster families to take placements when required.

CHART 18: NUMBER OF FOSTER FAMILIES



	2021	2022	2023	2024	2025
Total	595	596	614	633	646

[10] Children aged 0 to 6 years placed in residential care were aged 4 and above. These children were placed in residential care as a last resort, after multiple foster care breakdowns.

D. SPOUSAL ABUSE

The Women's Charter protects both men and women from family violence, including spousal abuse. Victim-survivors of spousal abuse can seek help through multiple channels, including the Police, PSCs, FSCs, family members and friends, and may apply for a Personal Protection Order (PPO) under the Women's Charter.

MSF supports victim-survivors of spousal abuse through FSCs (cases with low safety and risk concerns) and PSCs (cases with moderate to high safety and risk concerns). Unlike child and Vulnerable Adult abuse cases, most spousal abuse cases are managed within the community, as adult victim-survivors generally retain the ability to make decisions about their own safety and can access support with the assistance of community partners.

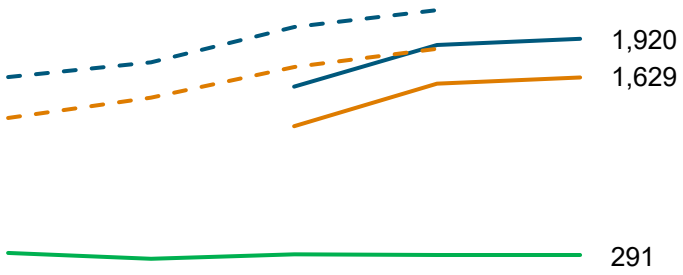
However, some victim-survivors may be unable or unwilling to take steps to protect themselves, including where control, fear or dependence affects their decision-making. To strengthen protection for such cases, the family violence amendments to the Women's Charter that were operationalised in January 2025 empower MSF's PSV to apply for PPOs and related orders on behalf of victim-survivors whose safety is seriously threatened – even if they are unwilling or unable to make the application themselves.

D1. NEW TIER 1 SPOUSAL ABUSE CASES

Continued upward trend in new Tier 1 spousal abuse cases

New Tier 1 spousal abuse cases remained stable from 1,871 cases in 2024 to 1,920 cases in 2025 but elevated compared to 1,560 cases in 2023 (Chart 19). The upward trend was mainly driven by the increase in cases managed by the FSCs, while cases managed by the PSCs remained stable. This suggests that more victim-survivors came forward to seek support through FSCs, reducing the likelihood of cases escalating in risk severity.

CHART 19: NUMBER OF NEW TIER 1 SPOUSAL ABUSE CASES

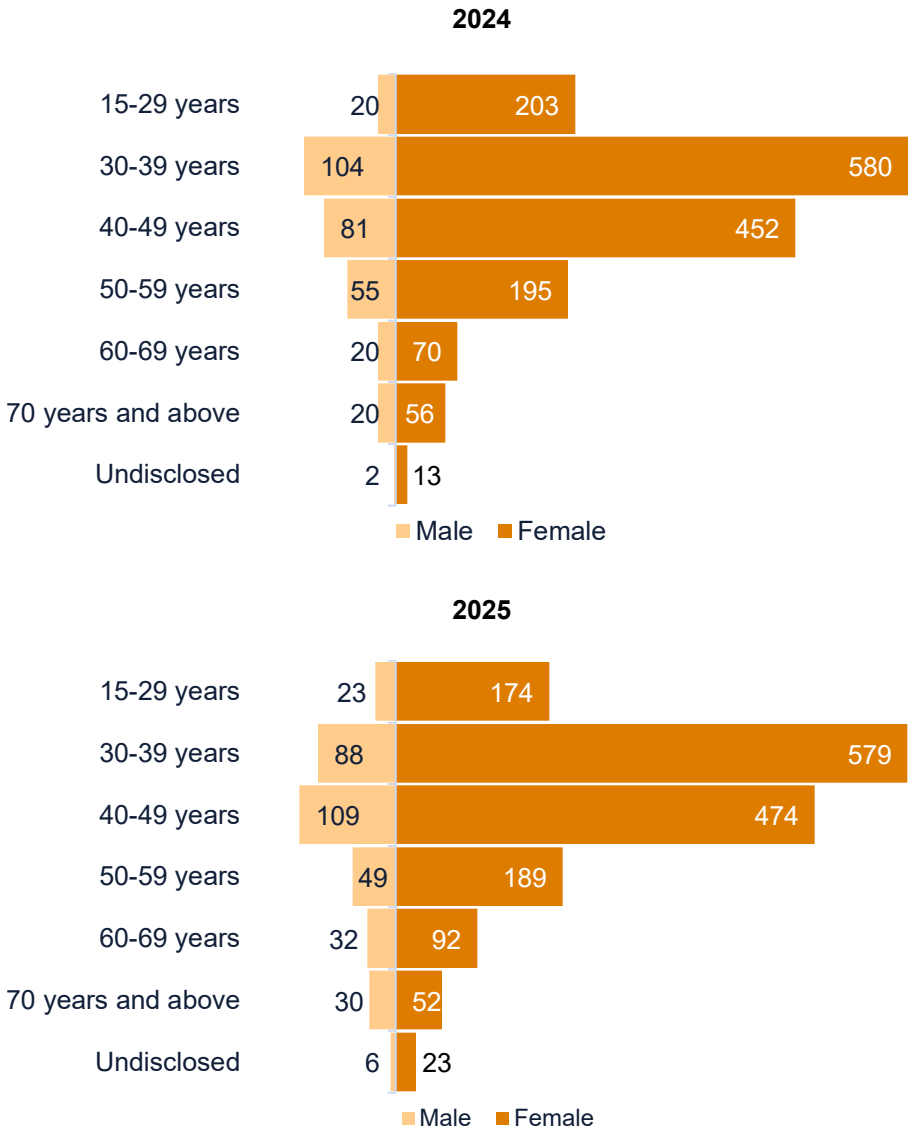


	2021	2022	2023	2024	2025
Total (new method)	NA	NA	1,560	1,871	1,920
Total (old method)	1,632	1,741	2,008	2,136	NA
Family Service Centres (new method)	NA	NA	1,262	1,580	1,629
Family Service Centres (old method)	1,324	1,477	1,710	1,845	NA
Protection Specialist Centres	308	264	298	291	291

Majority of the victim-survivors of spousal abuse were females aged 30-49 years

In 2024 and 2025, the majority of the victim-survivors of spousal abuse cases were female. The highest proportion of victim-survivors were aged 30-39 years, followed by those aged 40 to 49 years (Chart 20).

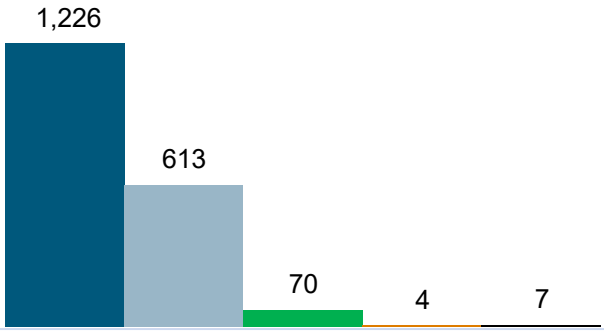
CHART 20: NUMBER OF NEW TIER 1 SPOUSAL ABUSE CASES BY AGE AND SEX



Physical abuse was the most common type of abuse

In 2025, physical abuse was the most common primary type of abuse experienced by victim-survivors, accounting for 1,226 cases (Chart 21). Emotional & psychological abuse was the second most common type with 613 cases, followed by sexual abuse with 70 cases. The higher number of physical abuse cases may partly reflect how physical harm was more readily recognised by victim-survivors and those around them, which may in turn increase the likelihood of reporting and help-seeking.

CHART 21: NUMBER OF NEW TIER 1 SPOUSAL ABUSE CASES BY TYPE OF ABUSE (2025)[11]



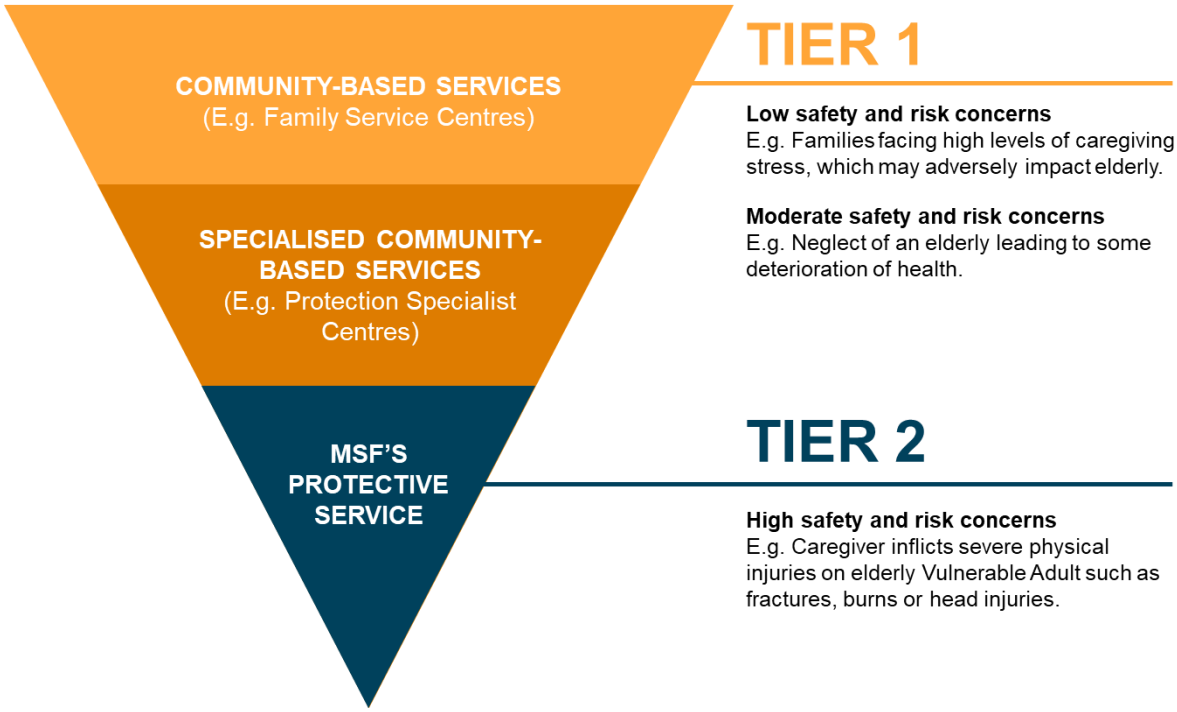
	2025
Physical abuse	1,226
Emotional & psychological abuse	613
Sexual abuse	70
Neglect	4
Others	7

[11] Other types of abuse include cases of financial exploitation.

E. ELDER ABUSE

An elderly person in this report refers to a person aged 65 years and above. Elder abuse refers to any action or inaction that puts the safety or well-being of an elderly person at risk. It is often perpetrated by a family member or caregiver whom the victim-survivor trusts.

Elder abuse cases present with varying levels of safety and risk concerns. This section focuses on cases with low to moderate safety and risk concerns that are managed by community-based agencies. Elderly persons who meet the definition of a Vulnerable Adult and present with high safety and risk concerns are included in Sections F and G, which cover Vulnerable Adult abuse and self-neglect cases requiring statutory intervention by MSF's Protective Service.

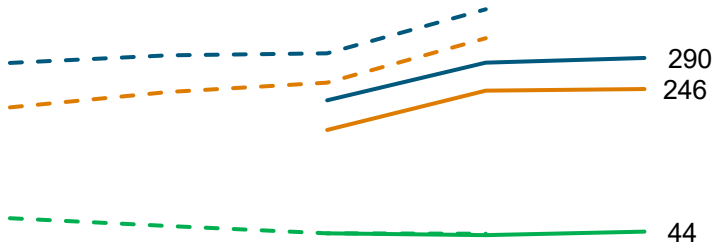


E1. NEW TIER 1 ELDER ABUSE CASES

New Tier 1 elder abuse cases remained stable in 2025

The number of new Tier 1 cases remained stable, with 290 cases in 2025 compared with 283 cases in 2024 (Chart 22). However, cases remained higher than the 2023 baseline. As Singapore's population ages, MSF will continue to monitor elder abuse trends, and work with community partners to raise awareness and encourage early reporting and intervention.

CHART 22: NUMBER OF NEW TIER 1 ELDER ABUSE CASES[12]



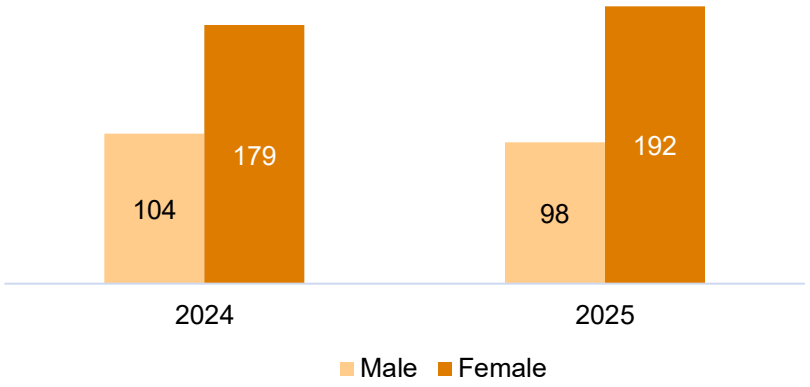
	2021	2022	2023	2024	2025
Total (new method)	NA	NA	230	283	290
Total (old method)	283	294	297	359	NA
Family Service Centres (new method)	NA	NA	188	244	246
Family Service Centres (old method)	220	242	255	318	NA
Protection Specialist Centres (new method)	NA	NA	42	39	44
Protection Specialist Centres (old method)	63	52	42	41	NA

[12] The figures exclude cases managed by eldercare agencies (e.g. eldercare centres, home-based services for elders, nursing homes) and healthcare agencies.

Female victim-survivors continued to make up a larger share of new Tier 1 elder abuse cases

Similar to 2024, female victim-survivors made up a larger share of new Tier 1 elder abuse cases in 2025 (Chart 23). The sex profile of cases remained broadly similar across the two years.

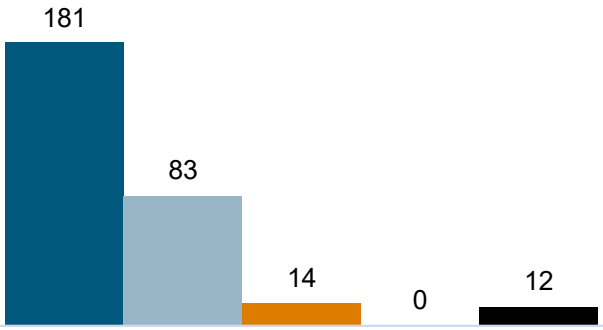
CHART 23: NUMBER OF NEW TIER 1 ELDER ABUSE CASES BY SEX



Physical abuse was the most common type of elder abuse

Physical abuse was the most common primary type of elder abuse in 2025, at 181 cases (Chart 24). This was nearly double the next most common abuse type – Emotional & psychological abuse, which accounted for 83 cases in 2025. This could be attributed to physical abuse being more readily detected and reported because injuries such as bruising are often visible.

CHART 24: NUMBER OF NEW TIER 1 ELDER ABUSE CASES BY TYPE OF ABUSE (2025)[13]



	2025
Physical abuse	181
Emotional & psychological abuse	83
Neglect	14
Sexual abuse	0
Others	12

[13] Other types of abuse include cases of financial exploitation.

F. VULNERABLE ADULT ABUSE

A Vulnerable Adult is defined in the Vulnerable Adults Act as a person aged 18 years and above, and is by reason of mental or physical infirmity, disability or incapacity, incapable of protecting himself or herself from abuse, neglect or self-neglect. Vulnerable Adult cases with high safety and risk concerns (i.e. Tier 2 cases) require statutory intervention by MSF's Protective Service (PSV) to keep them safe from abuse.

Vulnerable Adults include both non-elderly Vulnerable Adults (aged 18 to 64) and elderly Vulnerable Adults (aged 65 and above).

The number of Vulnerable Adults is expected to increase due to our ageing population, and it is projected that one in two healthy Singaporeans aged 65 today could become severely disabled in their lifetime. As such, the Government is working to ensure that legal protection and social services are relevant and sufficient for this group.

F1. NEW VULNERABLE ADULT ABUSE CASES

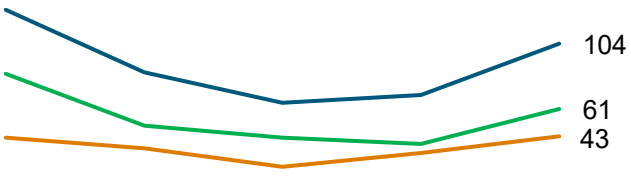
Increase in new Tier 2 Vulnerable Adult abuse cases

New Tier 2 Vulnerable Adult abuse cases increased from 70 cases in 2024 to 104 cases in 2025, continuing the upward trend since 2023 (Chart 25). This was driven by increases in both non-elderly and elderly Vulnerable Adult cases. From 2024 to 2025, non-elderly Vulnerable Adults abuse cases increased from 32 to 43 cases, while elderly Vulnerable Adult abuse cases increased from 38 to 61 cases.

The increase may partly reflect improvements in the identification and reporting of abuse and neglect. In 2024, MSF's PSV introduced the Vulnerable Adult Structured Decision-Making Tools comprising screening, assessment and intervention guides for Vulnerable Adult cases. These tools support healthcare institutions and social service agencies in identifying indicators of abuse, neglect and self-neglect more consistently, including cases involving physical injuries, deteriorating living conditions, unmet care needs, and other concerns that may otherwise go undetected.

This underscores the importance of continued vigilance by healthcare and community partners, particularly as some Vulnerable Adults may have limited help-seeking behaviour and rely on others to identify concerns and connect them to support.

CHART 25: NUMBER OF NEW TIER 2 VULNERABLE ADULT ABUSE CASES[14]



	2021	2022	2023	2024	2025
Total	126	85	65	70	104
Non-elderly Vulnerable Adult Abuse	42	35	23	32	43
Elderly Vulnerable Adult Abuse	84	50	42	38	61

[14] Only Tier 2 figures are reported. There may be Tier 1 cases overseen by FSCs and PSCs or cases managed solely by disability or healthcare agencies, which have not been included in the report as data on these cases is currently unavailable.

Incidence rate of new Tier 2 Vulnerable Adult abuse cases remained relatively low

Incidence of non-elderly Vulnerable Adult abuse increased to 1.3 per 1,000 non-elderly vulnerable population in 2025 from 0.9 in 2024 but remained relatively low (Chart 26). Incidence of elderly Vulnerable Adult Abuse remained relatively stable, ranging between 0.4 to 0.6 per 1,000 vulnerable elderly population in the last four years.

CHART 26: INCIDENCE RATE OF NEW TIER 2 VULNERABLE ADULT ABUSE CASES (PER 1,000 OF NON-ELDERLY / ELDERLY VULNERABLE POPULATION)



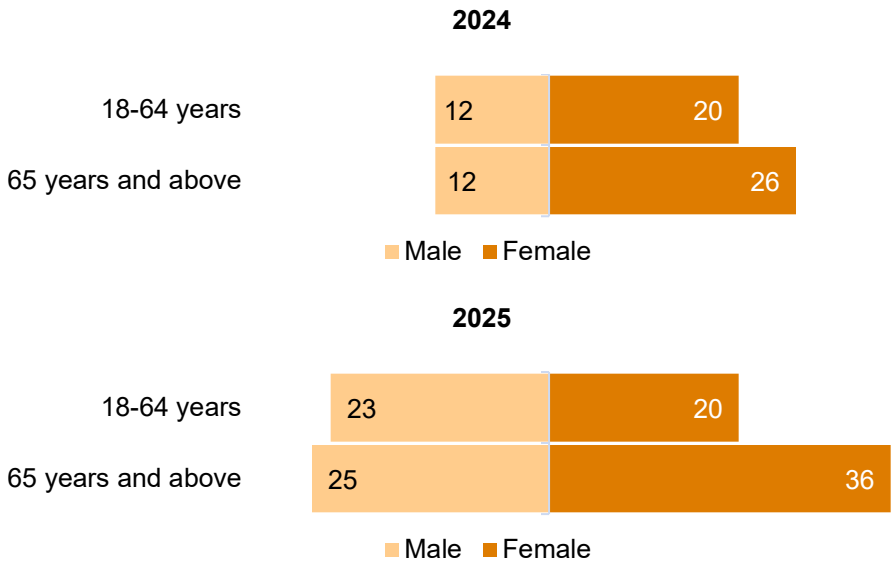
	2021	2022	2023	2024	2025
Non-elderly Vulnerable Adult Abuse	1.3	1.1	0.7	0.9	1.3
Elderly Vulnerable Adult Abuse	1.1	0.6	0.5	0.4	0.6

New Tier 2 Vulnerable Adult abuse cases increased among both sexes, with sharper increase among males

New Tier 2 Vulnerable Adult abuse cases increased among both male and female victim-survivors in 2025. While female victim-survivors continued to account for more cases, the increase was more pronounced among males, with cases doubling from 24 in 2024 to 48 in 2025. Female cases increased from 46 to 56 over the same period (Chart 27).

The sharper increase in male cases may reflect a combination of factors, including a growing awareness that men may also experience abuse and improvements in identification of abuse and neglect. Enhanced assessment processes, including the use of the Vulnerable Adult Structured Decision-Making tools support more consistent identification of safety concerns across different victim profiles and circumstances. Some male Vulnerable Adults may also face risk factors associated with social isolation, limited support networks, or declining health. As outreach, detection and reporting efforts continue to strengthen, cases involving these individuals may be more readily identified and connected to support services.

CHART 27: NUMBER OF NEW VULNERABLE ADULT ABUSE CASES BY AGE AND SEX (2024, 2025)

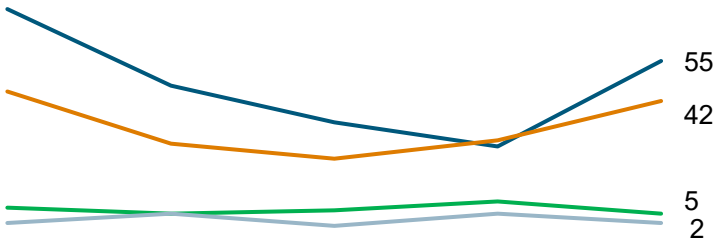


Physical abuse remains the most common type of abuse among new Tier 2 Vulnerable Adult abuse cases

Physical abuse was the most common primary type of Vulnerable Adult abuse in 2025, followed by neglect (Chart 28). Physical abuse cases more than doubled from 27 cases in 2024 to 55 cases in 2025, while neglect cases increased from 29 to 42 cases over the same period. Physical abuse commonly involved the use of physical force or threats of serious harm. The sharper increase in physical abuse cases may partly reflect the greater visibility of injuries and clearer indicators of harm, which can make such cases easier to detect and report through strengthened reporting pathways. Neglect cases commonly involved the failure to meet the Vulnerable Adult's physical, caregiving or medical needs.

This underscores the importance of recognising both visible signs of physical abuse and less obvious indicators of neglect, such as poor living conditions, inadequate caregiving, or unmet medical needs. Early reporting enables timely assessment and intervention, helping to reduce the risk of harm, connect Vulnerable Adults to appropriate support services, and strengthen safeguards for those at risk.

CHART 28: NUMBER OF NEW TIER 2 VULNERABLE ADULT ABUSE CASES BY TYPE OF ABUSE



	2021	2022	2023	2024	2025
Physical abuse	72	47	35	27	55
Neglect	45	28	23	29	42
Sexual abuse	7	5	6	9	5
Emotional & psychological abuse	2	5	1	5	2

G. VULNERABLE ADULTS WHO NEGLECT THEMSELVES

Self-neglect can result in Vulnerable Adults living in grossly unsanitary or hazardous conditions, experiencing malnutrition or dehydration, or having untreated physical or mental health conditions. In these cases, the individual is unable to adequately care for themselves or perform essential activities of daily living, resulting in significant risks to their safety and well-being. Such cases are overseen by MSF's PSV as Tier 2 Vulnerable Adult self-neglect cases. Many self-neglect cases come to light through community outreach workers, social workers, healthcare professionals, or neighbours who observe signs of neglect or deteriorating living conditions. Cases may also be identified when Vulnerable Adults are admitted to hospital for urgent medical treatment.

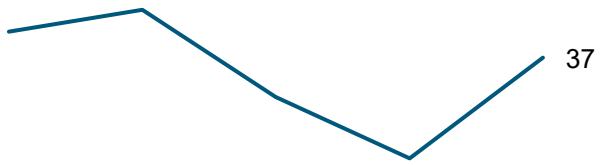
The community plays an important role in identifying self-neglect. Regular interaction with at-risk individuals places family members, neighbours, community partners and frontline professionals in a position to recognise warning signs early and alert helping agencies. Early identification enables timely assessment and intervention, helping Vulnerable Adults access the support and services needed to remain safe and well.

G1. NEW TIER 2 VULNERABLE ADULT SELF-NEGLECT CASES

Increase in new Tier 2 Vulnerable Adult self-neglect cases

The number of new Tier 2 Vulnerable Adult self-neglect cases increased from 14 cases in 2024 to 37 cases in 2025 (Chart 29). While the number of cases remained below 2021 to 2022 levels, it is above the 5-year average of 34 cases, suggesting a reversal of the earlier decline.

CHART 29: NUMBER OF NEW TIER 2 VULNERABLE ADULT SELF-NEGLECT CASES[15]



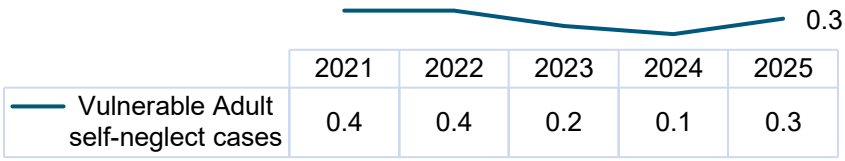
	2021	2022	2023	2024	2025
Vulnerable Adult self-neglect cases	43	48	28	14	37

[15] Only Tier 2 figures are reported. There may be Tier 1 cases overseen by FSCs and PSCs or cases managed solely by healthcare agencies, which have not been included in the report as data on these cases is currently unavailable.

Incidence rate of new Tier 2 Vulnerable Adult self-neglect cases increased slightly but remained low

The incidence rate of new Tier 2 Vulnerable Adult self-neglect cases increased to 0.3 per 1,000 vulnerable population aged 18 years and above in 2025, from 0.1 in 2024, but remained low (Chart 30).

CHART 30: INCIDENCE RATE OF NEW TIER 2 VULNERABLE ADULT SELF-NEGLECT CASES (PER 1,000 VULNERABLE POPULATION AGED 18 YEARS AND ABOVE)



	2021	2022	2023	2024	2025
Vulnerable Adult self-neglect cases	0.4	0.4	0.2	0.1	0.3

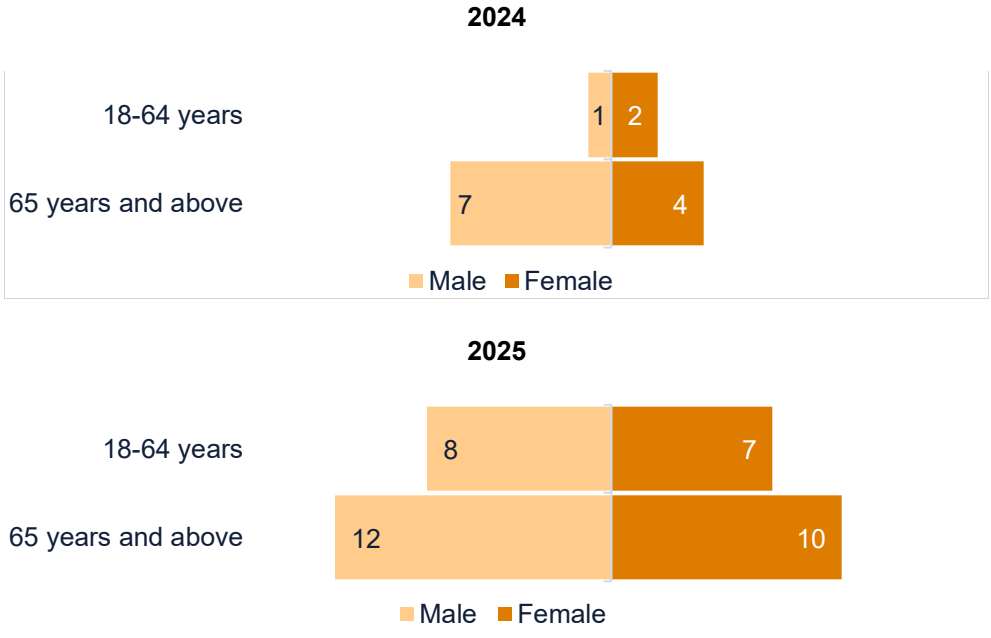
Most new Tier 2 Vulnerable Adult self-neglect cases were elderly persons

The number of new Tier 2 Vulnerable Adult self-neglect cases increased across both non-elderly and elderly Vulnerable Adults in 2025 (Chart 31). Among non-elderly Vulnerable Adults, self-neglect cases rose from 3 cases in 2024 to 15 cases in 2025. Among elderly Vulnerable Adults, cases increased from 11 to 22 cases over the same period. Increases were observed among both male and female Vulnerable Adults.

Elderly Vulnerable Adults continued to account for majority of self-neglect cases in 2025. This is consistent with the greater risks associated with ageing, including declining physical or cognitive functioning, social isolation, and limited caregiving or support networks.

This underscores the importance of early identification and community support for Vulnerable Adults who may be struggling to care for themselves. Timely intervention can help address escalating risks, connect individuals to appropriate services, and support them to remain safe and well within the community.

CHART 31: NUMBER OF NEW TIER 2 VULNERABLE ADULT SELF-NEGLECT CASES BY AGE AND SEX (2024, 2025)



H. CONCLUSION

Domestic violence causes profound and lasting harm to individuals, families and communities. The Government remains committed to preventing and addressing domestic violence and will continue to strengthen efforts to protect victim-survivors, support families and safeguard those at risk of harm.

The report reflects progress over the years in strengthening the domestic violence ecosystem. More victim-survivors have come forward to seek help, while professionals and institutions remain vigilant in identifying and reporting concerns. Improvements in legislation, reporting pathways, community capabilities and intervention approaches have enhanced our collective ability to detect risks, intervene earlier, and provide timely support.

As awareness, detection and reporting continue to improve, reported domestic violence cases may remain elevated in the short to medium term. While this may not immediately translate into lower case numbers, it reflects a system that is becoming more proactive at surfacing concerns and connecting those affected to help. MSF will continue to strengthen upstream preventive efforts, address risk factors earlier, and work towards reducing the incidence of domestic violence and prevent the repeat and escalation of harm.

Addressing domestic violence is a shared responsibility. The Government cannot do this alone. Community partners, schools, healthcare professionals, employers, neighbours, family members and friends all play a crucial role in early detection and intervention. Domestic violence is not a private matter. It is unacceptable and must not be condoned. Every report can make a difference in protecting those at risk and connecting them to help.

Through our collective efforts as a society, we can better protect vulnerable individuals, support families in crisis and create a safer society.

I. ANNEX

Table A: New Tier 1 child abuse cases by age, sex and type of abuse

	2023	2024	2025
TOTAL	**2,128**	**2,373**	**2,476**
Age and sex of child			
- ***0-6 years***	***664***	***733***	***765***
○ Male	375	390	401
○ Female	289	343	364
- ***7-12 years***	***894***	***988***	***1,024***
○ Male	498	558	547
○ Female	396	430	477
- ***13-16 years***	***462***	***510***	***529***
○ Male	*217*	240	*227*
○ Female	*245*	270	*302*
- ***17-18 years***	***106***	***138***	***150***
○ Male	43	53	53
○ Female	63	85	97
- ***Undisclosed***	***2***	***4***	***8***
Type of abuse[16]			
- ***Physical abuse***	-	-	***1,421***
- ***Neglect***	-	-	***317***
- ***Sexual abuse***	-	-	***126***
- ***Emotional & psychological abuse***	-	-	***562***
- ***Others***[17]	-	-	***50***

Table B: New Tier 2 child abuse cases by age, sex and type of abuse[18]

	Old method				New method
	2021[19]	2022	2023	2024	2025
TOTAL	**2,141**	**2,067**	**2,011**	**2,303**	**1,917**
Age and sex of child					
- ***0-6 years***	***685***	***730***	***742***	***824***	***687***
○ Male	351	371	370	427	372
○ Female	334	359	372	397	315
- ***7-12 years***	***751***	***744***	***717***	***834***	***721***
○ Male	381	360	368	443	353
○ Female	370	384	349	391	368
- ***13-16 years***	***578***	***486***	***459***	***530***	***405***
○ Male	231	185	195	226	180
○ Female	347	301	264	304	225
- ***17-18 years***	***126***	***107***	***93***	***115***	***104***
○ Male	53	48	36	52	46
○ Female	73	59	57	63	58
Type of abuse					
- ***Physical abuse***	***788***	***758***	***888***	***1,171***	***885***
Age of child					
▪ 0-6 years	304	292	329	422	329
▪ 7-12 years	302	317	354	481	355
▪ 13-16 years	152	119	178	224	167
▪ 17-18 years[20]	30	30	27	44	34
Sex of child					
▪ Male	408	403	462	631	496

[16] Type of abuse data for Tier 1 Child Abuse cases in 2023 and 2024 is unavailable.
[17] Other types of abuse include financial exploitation, cases where the child's parents or guardians are unable to care for them due to incarceration or drug abuse, and one unrecorded case.
[18] The 2025 Tier 2 child abuse figures are based on the new classification of abuse exposure methodology. They are not directly comparable with previous years and should be treated as a new baseline.
[19] The 2021 breakdown excludes one case of a young person initially screened in as aged 18 but subsequently ascertained to be aged 19 (by birth year). The case was closed after ascertaining that there were no further safety concerns.
[20] CYPA was amended in 2019 to extend protection to children from aged below 16 years, to below 18 years.

	Old method				New method
	2021[19]	2022	2023	2024	2025
▪ Female	380	355	426	540	389
- ***Neglect***	***629***	***536***	***544***	***537***	***483***
Age of child					
▪ 0-6 years	199	205	214	208	198
▪ 7-12 years	192	157	162	164	164
▪ 13-16 years	188	140	140	139	95
▪ 17-18 years	49	34	28	26	26
Sex of child					
▪ Male	311	246	259	265	231
▪ Female	318	290	285	272	252
- ***Sexual abuse***	***443***	***351***	***272***	***331***	***339***
Age of child					
▪ 0-6 years	80	63	55	79	68
▪ 7-12 years	165	125	104	109	124
▪ 13-16 years	163	132	90	110	111
▪ 17-18 years	35	31	23	33	36
Sex of child					
▪ Male	159	116	105	110	125
▪ Female	284	235	167	221	214
- ***Emotional & psychological abuse***	***281***	***422***	***307***	***264***	***210***
Age of child					
▪ 0-6 years	102	170	144	115	92
▪ 7-12 years	92	145	97	80	78
▪ 13-16 years	75	95	51	57	32
▪ 17-18 years	12	12	15	12	8
Sex of child					
▪ Male	139	199	143	142	99
▪ Female	142	223	164	122	111

Table C: Children in out-of-home care[21]

	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Children in foster care	430	509	535	545	543	541	540	540	530	525
Children in kinship care[22]	354	229	295	288	338	485	467	450	386	270
Children in residential care	643	631	631	597	554	517	512	519	538	560

Table D: Foster Families[23]

	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Total	420	456	498	530	564	595	596	614	633	646

Table E: New Tier 1 Spousal Abuse cases by age, sex and type of abuse

	2023	2024	2025
TOTAL	**1,560**	**1,871**	**1,920**
Age and sex of victim-survivor			
- ***15-29 years***	***216***	***223***	***197***
○ Male	21	20	23
○ Female	195	203	174
- ***30-39 years***	***550***	***684***	***667***
○ Male	51	104	88
○ Female	499	580	579
- ***40-49 years***	***458***	***533***	***583***
○ Male	59	81	109
○ Female	399	452	474
- ***50-59 years***	***196***	***250***	***238***
○ Male	31	55	49

[21] Represents all children in out-of-home care as of 31 December of the specified year, regardless of the year the child's case was opened.

[22] Number of cases placed in kinship care from 2013-2020 is an estimate based on the total number of open child abuse investigation and intervention cases as of 31 December of each year, multiplied by the percentage of children placed in kinship care. Actual figures are reported for 2021-2025.

[23] Represents the number of foster families as of 31 December of the specified year.

○ Female	165	195	189
- ***60-69 years***	***85***	***90***	***124***
○ Male	16	20	32
○ Female	69	70	92
- ***70 years and above***	***45***	***76***	***82***
○ Male	19	20	30
○ Female	26	56	52
- ***Undisclosed***	***10***	***15***	***29***
○ Male	1	2	6
○ Female	9	13	23
Type of abuse			
- ***Physical abuse***	***984***	***1,259***	***1,226***
- ***Neglect***	***3***	***3***	***4***
- ***Sexual abuse***	***48***	***64***	***70***
- ***Emotional & psychological abuse***	***522***	***540***	***613***
- ***Others, i.e. financial exploitation***	***3***	***5***	***7***

Table F: New Tier 1 Elder Abuse cases by age, sex and type of abuse

	2023	2024	2025
TOTAL	**230**	**283**	**290**
Age and sex of victim-survivor			
- ***65-69 years***	***54***	***72***	***79***
○ Male	22	26	29
○ Female	32	46	50
- ***70-79 years***	***117***	***139***	***140***
○ Male	39	51	46
○ Female	78	88	94
- ***80-89 years***	***52***	***59***	***52***
○ Male	11	24	17
○ Female	41	35	35
- ***90 years and above***	***3***	***10***	***11***
○ Male	2	2	2
○ Female	1	8	9
- ***Undisclosed***	***4***	***3***	***8***
○ Male	1	1	4
○ Female	3	2	4
Type of abuse			
- ***Physical abuse***	***127***	***155***	***181***
- ***Neglect***	***16***	***25***	***14***
- ***Sexual abuse***	***2***	***2***	***0***
- ***Emotional & psychological abuse***	***76***	***87***	***83***
- ***Others, i.e. financial exploitation***	***9***	***14***	***12***

Table G: New Tier 2 Non-Elderly and Elderly Vulnerable Adult abuse cases by sex and type of abuse

	2021	2022	2023	2024	2025
TOTAL	**126**	**85**	**65**	**70**	**104**
Age and sex of Vulnerable Adult					
- ***18-29 years***	***14***	***10***	***7***	***8***	***12***
○ Male	6	6	4	2	7
○ Female	8	4	3	6	5
- ***30-39 years***	***3***	***7***	***5***	***10***	***11***
○ Male	1	4	2	4	9
○ Female	2	3	3	6	2
- ***40-49 years***	***4***	***4***	***3***	***4***	***8***
○ Male	0	2	1	2	3
○ Female	4	2	2	2	5
- ***50-64 years***	***21***	***14***	***8***	***10***	***12***
○ Male	9	4	1	4	4
○ Female	12	10	7	6	8
- ***65 years and above***	***84***	***50***	***42***	***38***	***61***
○ Male	31	16	22	12	25
○ Female	53	34	20	26	36

Type of abuse					
- ***Physical abuse***	***72***	***47***	***35***	***27***	***55***
Age of Vulnerable Adult					
▪ 18-29 years	10	8	5	4	7
▪ 30-39 years	3	3	2	4	3
▪ 40-49 years	3	4	1	1	6
▪ 50-59 years	15	9	2	4	9
▪ 65 years and above	41	23	25	14	30
Sex of non-elderly Vulnerable Adult					
▪ Male	11	13	3	6	13
▪ Female	20	11	7	7	12
Sex of elderly Vulnerable Adult					
▪ Male	17	8	14	4	12
▪ Female	24	15	11	10	18
- ***Neglect***	***45***	***28***	***23***	***29***	***42***
Age of Vulnerable Adult					
▪ 18-29 years	1	0	1	0	2
▪ 30-39 years	0	2	2	3	7
▪ 40-49 years	1	0	1	3	2
▪ 50-59 years	5	4	3	6	3
▪ 65 years and above	38	22	16	17	28
Sex of non-elderly Vulnerable Adult					
▪ Male	4	3	5	6	11
▪ Female	3	3	2	6	3
Sex of elderly Vulnerable Adult					
▪ Male	13	6	7	6	11
▪ Female	25	16	9	11	17
- ***Sexual abuse***	***7***	***5***	***6***	***9***	***5***
Age of Vulnerable Adult					
▪ 18-29 years	3	2	1	3	3
▪ 30-39 years	0	2	1	3	1
▪ 40-49 years	0	0	1	0	0
▪ 50-59 years	0	1	2	0	1
▪ 65 years and above	4	0	1	3	0
Sex of non-elderly Vulnerable Adult					
▪ Male	1	0	0	0	0
▪ Female	2	5	5	6	5
Sex of elderly Vulnerable Adult					
▪ Male	1	0	1	1	0
▪ Female	3	0	0	2	0
- ***Emotional & psychological abuse***	***2***	***5***	***1***	***5***	***2***
Age of Vulnerable Adult					
▪ 18-29 years	0	0	0	1	0
▪ 30-39 years	0	0	0	0	0
▪ 40-49 years	0	0	0	0	0
▪ 50-59 years	1	0	1	0	0
▪ 65 years and above	1	5	0	4	2
Sex of non-elderly Vulnerable Adult					
▪ Male	0	0	0	0	0
▪ Female	1	0	1	1	0
Sex of elderly Vulnerable Adult					
▪ Male	0	2	0	1	1
▪ Female	1	3	0	3	1

Table H: New Tier 2 Vulnerable Adult self-neglect cases by age and sex

	2021	2022	2023	2024	2025
TOTAL	**43**	**48**	**28**	**14**	**37**
Age and sex of Vulnerable Adult					
- ***18-29 years***	***1***	***0***	***1***	***0***	***1***
○ Male	0	0	0	0	0
○ Female	1	0	1	0	1
- ***30-39 years***	***1***	***1***	***1***	***0***	***0***
○ Male	1	0	0	0	0

	2021	2022	2023	2024	2025
○ Female	0	1	1	0	0
- ***40-49 years***	***5***	***3***	***2***	***0***	***3***
○ Male	2	2	2	0	2
○ Female	3	1	0	0	1
- ***50-64 years***	***13***	***14***	***7***	***3***	***11***
○ Male	10	9	4	1	6
○ Female	3	5	3	2	5
- ***65 years and above***	***23***	***30***	***17***	***11***	***22***
○ Male	12	18	13	7	12
○ Female	11	12	4	4	10