



Commission on Poverty



Collaborate for Greater Impact Envision Targeted Support

**Report on Impact of Targeted Poverty
Alleviation Strategy in Hong Kong**



Commission on Poverty

June 2026

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Chapter 1

Collaborate for Greater Impact



An important aim of poverty alleviation is to synergise different sources of care and support in order to alleviate the "most pressing concerns" of the people of Hong Kong. The Government of the Hong Kong Special Administrative Region (the Government) firmly believes that simply allocating more public resources to combat poverty is not enough, on its own, to make its poverty alleviation efforts more effective and sustainable. Successful poverty alleviation also requires cross-sector collaboration and targeted governance. It involves different sectors of the community working together to strengthen the sense of belonging, achievement and satisfaction of underprivileged citizens.

This Report on Impact of Targeted Poverty Alleviation Strategy in Hong Kong (the Report) starts by reviewing the core objectives of poverty alleviation, and looks back at the Government's poverty alleviation strategies in the past. It then introduces the "targeted poverty alleviation" policy, and explores the Government's transformation of its poverty alleviation strategy and the reasons for the change, along with the specific policy measures that have been introduced and their interim results. The Report also reviews the effectiveness of the Government's livelihood policies in alleviating, combating and preventing poverty, from both micro and macro perspectives. It aims to highlight good stories arising from Hong Kong's targeted poverty alleviation efforts, and to foster understanding of and support for the Government's targeted poverty alleviation strategies throughout the community. By doing so, it aims to achieve consensus and cross-sectoral strength, and become a reference point for further optimisation of the social welfare system in future.

Core Objectives of Poverty Alleviation Work

The Government has always attached great importance to poverty alleviation. Over the years, through continuous practice, review and evolution, the Government has refined its policies, coordination structure and assessment tools for poverty alleviation in order to respond to the needs of society in a more targeted and effective manner.

Overall, the Government's poverty alleviation objectives have involved adopting a multi-pronged approach and a comprehensive framework that together provide a "safety net" for grassroots families and "empower" those in need to achieve self-reliance. To this end, the Government will continue to strengthen its macro-level policy measures through further resource allocation, ensuring that a safety net is always in place for those in need in the community. Alongside this, however, the current Government has also adopted a targeted poverty alleviation strategy. This strategy builds on the existing safety net, using a multi-dimensional analytical framework to identify those groups most in need and tailoring targeted micro-level support programmes for them. In this way it is plugging existing service gaps by concentrating resources on those at the "end of the queue" and those who require the most assistance. This targeted poverty alleviation strategy reflects the Government's commitment to making the most effective use of public resources, as well as demonstrating its commitment to providing care and support for the underprivileged. The core concepts involved in the Government's poverty alleviation work can be summarised as follows:



Sustained Growth in Resource Allocation – Recurrent expenditure on livelihood policy measures in areas such as education, healthcare, housing and social welfare has been continuously increasing. This expenditure, which consistently accounts for a large proportion of the Government's recurrent expenditure, provides direct subsidies and cash assistance to grassroots families as well as maintaining and enhancing various basic public services and welfare programmes. It reflects the Government's ongoing commitment to providing livelihood support.



Greater Emphasis on "Poverty Prevention" and Fostering Upward Mobility – The Government is actively balancing its poverty alleviation work by not only pursuing traditional measures to alleviate and combat poverty, but also gradually strengthening the "poverty prevention" elements in various policy areas. At the macro policy level, the Government is continuing to invest resources into all stages of education, thus ensuring that children from underprivileged families receive the equitable education and development opportunities they need to break the cycle of intergenerational poverty. In addition, through the safety net of the public healthcare system, the Government is ensuring that citizens do not fall into poverty because of illness. The housing support provided by the Government also helps grassroots families by alleviating financial pressures, improving their housing stability and helping foster upward mobility. Further, the Government provides diversified welfare and employment support services that cater for the needs of various groups in need; these reduce the burden on carers, and help those who are capable to return to work and achieve self-reliance.



Revamp of Cross-Sector Collaboration – The Government is actively promoting tripartite collaboration between the Government, the business sector and the community. As part of this, it draws on various community forces to involve them in poverty alleviation, combating and prevention work, thereby expanding its resource base. This collaboration model goes beyond the traditional government-led framework to build a more resilient social support network, since it allows the business sector to provide additional support in terms of funding, premises, technology, management and talent, and community welfare organisations to contribute frontline insights and professional services. While the Government focuses on its safety-net responsibilities, along with rule-setting and resource allocation, it is also facilitating integrated efforts from the other sectors. Each sector is thus able to perform its own functions in ways that complement the other's strengths and leverage their respective advantages. In the long run, this collaboration model is promoting cross-sector experience sharing and knowledge transfer, and enabling innovative ideas to take root in the social welfare sector. The outcome is sustainable and scalable solutions that are supplementing limited public resources and generating greater social benefits.

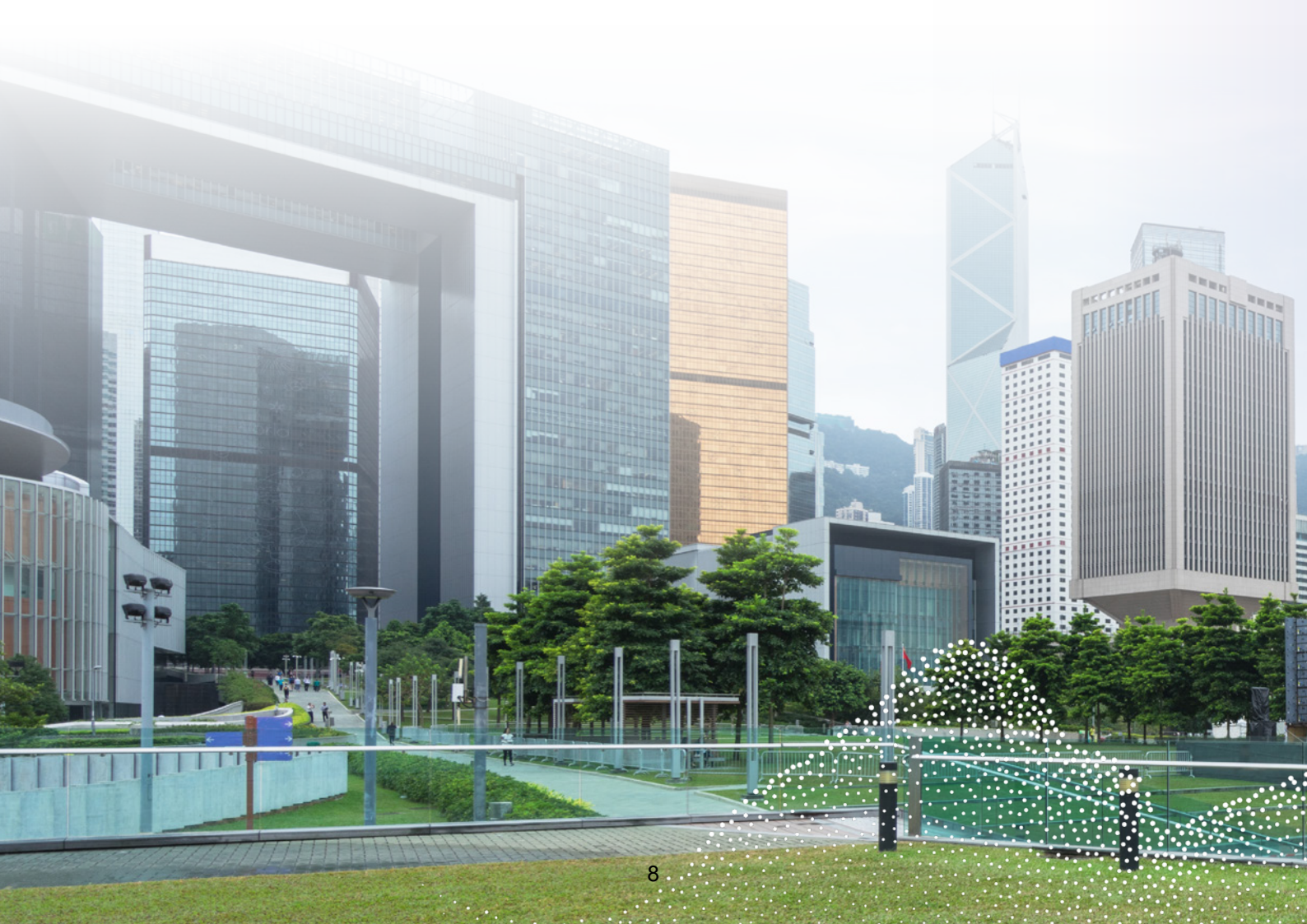


Enhancing a "Sense of Satisfaction" and "Sense of Achievement" – Targeted poverty alleviation efforts can support the underprivileged in a precise and focused manner, aligning closely with the needs of the community and more effectively addressing some of its most pressing concerns. Examples include the Pilot Programme on Community Living Room, launched to expand the living space available to households in subdivided unit, along with expanded after-school care services that have boosted support for parents in need. These measures aim to build a solid social foundation for improving people's livelihoods and alleviating the pressures arising from daily living and caregiving. At the same time, they aim to uphold individuals' personal dignity, enabling them to live more contentedly, build deeper connections with the community, and ultimately contribute to wider social advancement. These outcomes create a positive ripple effect, with individuals moving from being helped to helping themselves, and from there to helping others, in a process that fosters an ongoing sense of personal satisfaction and achievement.

Heading to Targeted Poverty Alleviation

The Journey of the Commission on Poverty

In 2005, the Government established the first Commission on Poverty (CoP) in accordance with that year's Policy Address, and in doing so introduced cross-bureau strategic co-ordination to its poverty alleviation work. The CoP at that time was chaired by the Financial Secretary and included representatives from the Government, the Legislative Council, the business sector, academia and the social welfare sector. Its terms of reference included studying the poverty situation, making policy recommendations and encouraging community participation in the Government's poverty alleviation work, with a particular focus on four areas: children and youth, the working population, the elderly and the community. The CoP completed its term and submitted a report in June 2007, after which it was dissolved, with the day-to-day co-ordination and follow-up of poverty alleviation work being taken over by the Labour and Welfare Bureau (LWB). The LWB established the cross-bureau "Poverty Alleviation Task Force", led by the Secretary for Labour and Welfare, and poverty alleviation efforts entered a phase which involved the routine implementation of standard poverty alleviation measures. In this context, some community members began to express the view that there was room for improvement, especially in terms of how the Government led these efforts and how its policy was co-ordinated across different areas.





In 2012, the Government reconstituted and established a new CoP, which has continued to today, with the Chief Secretary for Administration serving as Chair. Set up to enhance the effectiveness of cross-bureau collaboration by co-ordinating poverty alleviation affairs at the highest level of Government decision-making, the current CoP effectively co-ordinates resources across multiple policy areas, including education, health, housing, labour and welfare, and home and youth affairs.





The Chief Secretary for Administration Mr Chan Kwok-ki led members of the Sixth-term CoP to visit To Kwa Wan Community Living Room.



The Chief Secretary for Administration Mr Chan Kwok-ki chaired the third meeting of the Sixth-term CoP.



The Chief Secretary for Administration Mr Chan Kwok-ki chaired the first meeting of the Sixth-term CoP. The Secretary for Health Prof Lo Chung-mau, the Secretary for Labour and Welfare Mr Chris Sun, the Under Secretary for Home and Youth Affairs Mr Clarence Leung, and the Under Secretary for Education Dr Jeff Sze also attended the meeting.



The Chief Secretary for Administration Mr Chan Kwok-ki (front row, fifth left), the Secretary for Health Prof Lo Chung-mau (front row, fifth right), the Secretary for Labour and Welfare Mr Chris Sun (front row, fourth left), the Under Secretary for Home and Youth Affairs Mr Clarence Leung (front row, fourth right), and the Under Secretary for Education Dr Jeff Sze (front row, third left) took a group photograph with members of Sixth-term CoP.

Today, the CoP's terms of reference are more focused and clearer than they were originally. They encompass two key strategic areas: advising the Government on poverty matters, and promoting cross-sector collaboration to address poverty issues with precision. The Commission also oversees the operation of the Community Care Fund and the Social Innovation and Entrepreneurship Development Fund, which tackle poverty by funding gap-plugging initiatives and promoting social innovation. Consequently, poverty alleviation decisions receive high levels of administrative support while also drawing on community expertise. The CoP also maintains direct links with key policy implementation bureaux, an arrangement that provides a solid foundation for the "targeted poverty alleviation" strategy being implemented.

The Sixth-term CoP (term from 1 July 2024 to 30 June 2026), which has been responsible for producing this Report, has fully embraced the synergies created by cross-sector collaboration. Its non-official members come from various sectors of the community and have diverse professional backgrounds and extensive social service experience. They include academics and professionals (such as economists and healthcare professionals), leaders from the business and industrial sectors, representatives of social welfare organisations, frontline workers deeply engaged in the districts, and community figures concerned with grassroots rights and interests. Each has accumulated rich experience in their respective fields. The Commission is thus well able to examine poverty alleviation work from different perspectives, offer valuable advice for the Government's poverty alleviation strategies, and ensure that internal CoP discussions are grounded in academic research and empirical data while remaining closely attuned to district dynamics and grassroots needs.

Reforming the Poverty Alleviation Policies

In 2022, after taking on board the views of the Legislative Council's Subcommittee on Reforming the Poverty Alleviation Policies and Strategies, the Government officially announced its adoption of the "targeted poverty alleviation" strategy to replace the previously used "poverty line". In the past, the "poverty line" was defined as a certain percentage of the median household income, which was used as a core quantitative tool for poverty assessment and policy discussions. However, years of practice and analysis have revealed fundamental limitations in the ability of this single-dimensional income indicator to reflect the realities of poverty and assess the overall effectiveness of policies to combat poverty. Three of its major limitations are as follows:

Static, One-Sided Nature: The indicator captures only a household's current cash income, and ignores its assets (such as savings and property) and its liabilities. This leads to households with assets but limited cash flow (such as retired elderly households living on savings) being defined as "poor", resulting in an overestimation of the population in poverty. As the percentage of the aged population increases, this limitation is becoming increasingly significant.

Neglect of Non-cash Benefits: The traditional framework for assessing the poverty line does not comprehensively cover major non-cash benefits provided by the Government, such as near-universal public healthcare services, free basic education and senior secondary education. These benefits contribute significantly to improving the living standards and financial situation of the grassroots population. However, their contribution is neglected in the traditional "poverty line" statistics, leading to an underestimation of the effectiveness of the Government's substantial public investments.

Inherent Paradox of the Relative Poverty Concept: Because it is a relative measure, the poverty line necessarily rises as overall income levels grow in society. The absolute income and the living standards of all income groups may substantially improve over time, but as long as the income growth of the low-income group lags behind the median growth, the statistical measure of the population in poverty may remain stubbornly high or even increase. This can easily create an illusion among the public that "more efforts lead to more poverty", creating a focus on poverty alleviation as a numbers game rather than something aimed at leading to substantive improvements in people's quality of life.

Given the above limitations, relying solely on the "poverty line" makes it difficult to accurately identify the groups most in need of support, and does not allow a fair assessment of the actual effectiveness of the Government's multi-pronged poverty alleviation policies, which combine both cash and non-cash measures. As a result, the current-term Government has promoted a paradigm shift in its poverty alleviation strategy, one that involves the transition from a focus on a single statistic to a more evidence-based, goal-oriented "targeted poverty alleviation". The core spirit of the new strategy can be summed up as "focusing on targets and delivering resources". It uses a multi-dimensional analysis framework to precisely pinpoint underprivileged groups in need, and design targeted measures for proactive intervention. Chapter 2 of this Report describes this strategy in greater depth.



CoP Promotion



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Production of Promotional
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Telling Good Stories of Hong Kong Through the Report

This Report is designed to systematically explain the concepts, practices and achievements of the “targeted poverty alleviation” strategy, and is structured as follows:

Chapter 2: Targeted Poverty Alleviation Strategy and Impact of Targeted Schemes

This chapter elaborates on a “multi-dimensional analysis framework” designed to complement targeted poverty alleviation strategy. The three target groups recommended by CoP for targeted poverty alleviation are “households residing in subdivided units (SDUs)”, “single-parent households”, and “all-elderly households”. The framework takes an in-depth look from the multiple perspectives of economic resources and daily essential needs of people, to identify those most in need. The chapter provides a micro perspective to describe the specific targeted poverty alleviation projects designed and implemented for the needs of each of these groups, and assesses the interim results based on empirical research.

Chapter 3: Impact of Macro Policy Measures on Poverty Alleviation, Combating and Prevention

Taking a broader and more fundamental perspective, this chapter analyses the Government’s standing policy measures in four areas: education, healthcare, housing, and social welfare and employment services. These measures constitute Hong Kong’s social safety net and upward mobility ladder. The chapter elaborates on how they contribute to alleviating, combating and preventing poverty.

Chapter 4: Analysis of Social Transfer Values

This chapter estimates the social transfer values and the number of households benefiting from the four policy areas of education, healthcare, housing and social welfare. It demonstrates the effectiveness of poverty alleviation measures and the impact of the overall policies from a macro perspective.

Chapter 5: Envision Targeted Support

This chapter is based on new trends and current social development challenges. It offers a strategic blueprint for the future direction of Hong Kong’s poverty alleviation efforts, as well as identifying key areas and continuous optimisation pathways for these efforts.



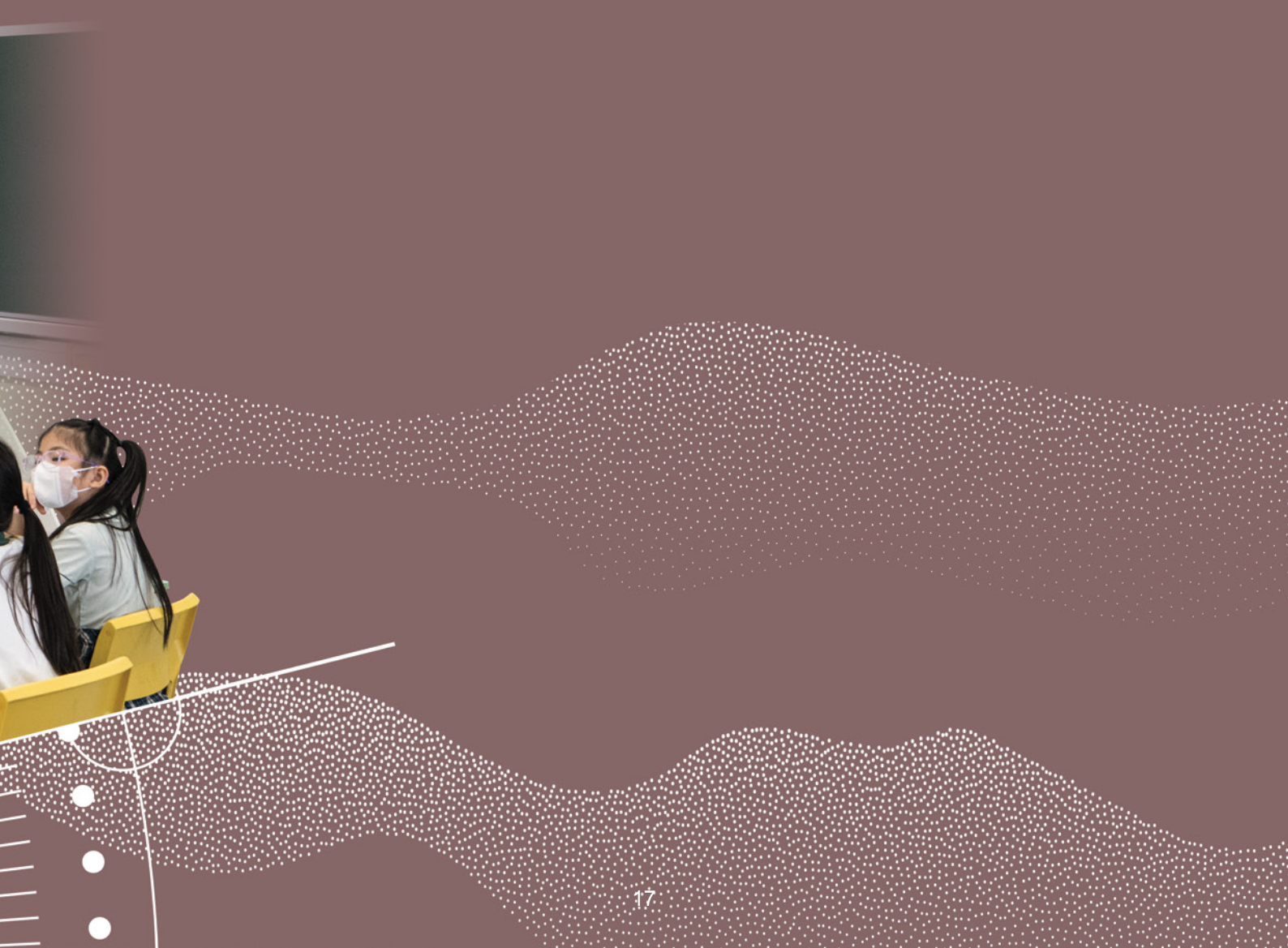


Chapter 2

Targeted Poverty Alleviation Strategy and Impact of Targeted Schemes



The current-term Government has adopted the strategy of targeted poverty alleviation by directing limited resources to help those most in need. The Commission on Poverty (CoP) supports the Government's adoption of the targeted poverty alleviation strategy that addresses the needs of different target groups to achieve the objectives of alleviating, combating and preventing poverty through a two-pronged approach: firstly, by promoting tripartite collaboration among the Government, the business sector and the community in "empowering those who are able to help themselves" so that they can achieve self-reliance and improve their standard of living, while releasing the potential labour force in society; and secondly, by building upon the existing social security safety net and continuing to plug the service gaps in "supporting those who are unable to help themselves".



Method of Identifying Target Groups - Multidimensional Analytical Framework

To fully implement the targeted poverty alleviation strategy, CoP assists the Government in identifying the groups most in need in society. CoP has reached a consensus based on views from different sectors of our society and suggested that the Government should accord priority care to three target groups: households residing in subdivided units (SDUs)¹, single-parent households² and all-elderly households³.

CoP generally agrees that “poverty” is complex and multifaceted. To align with the targeted poverty alleviation strategy, CoP recognises the need to develop a **multidimensional analytical framework** for examining the situations of the target groups. By contrast, the “poverty line” adopted in the past was only based on household income as the sole indicator for measuring poverty and failed to account for other areas of support, rendering it unable to fully reflect the plight faced by individual target groups.

In formulating the multidimensional analytical framework, the Government has made reference to the experience of the local community, other economies and international organisations, as well as the views of CoP and its Theory Working Group. After extensive discussions and exchanges, a consensus has been reached on the functions and major components of the analytical framework.

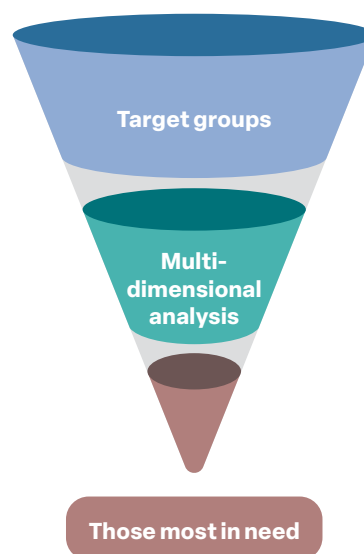
The multidimensional analytical framework should perform the following key functions (Figure 2.1):

Assist in the verification of target groups: Through conducting a multidimensional analysis of the target groups proposed by CoP, the framework identifies the demographic and socio-economic characteristics as well as their needs and difficulties, thereby verifying and establishing that they are the priority groups requiring care under the targeted poverty alleviation strategy;

Align with the society’s concern for the target groups: Based on the characteristics and uniqueness of the target groups, the framework identifies appropriate focus areas for further analysis; and

Facilitate the identification of those most in need within the target groups: Taking into consideration the demographic and socio-economic characteristics of the target groups and adopting objective criteria, the framework identifies those most in need within the target groups and their specific difficulties and pain points, thereby enabling the targeted poverty alleviation measures to be more focused and effective.

Figure 2.1: Illustrative diagram of the multidimensional analytical framework

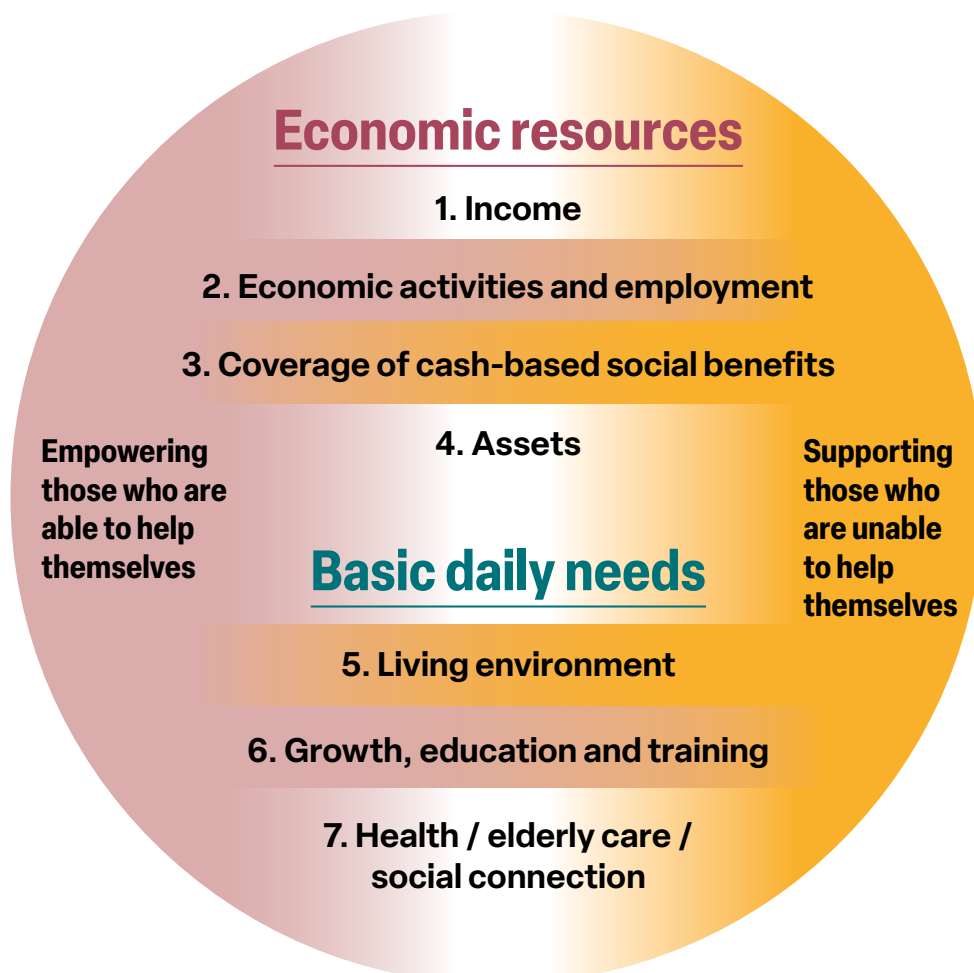


1. In this chapter, “SDUs” refer to those, as defined by the Census and Statistics Department (C&SD), formed by splitting a unit of quarters into two or more “internally connected” and “externally accessible” units commonly for rental purposes.
2. Single-parent households refer to domestic households with at least one widowed, divorced, separated or never-married member living with children aged below 18.
3. All-elderly households refer to domestic households in which all household members other than foreign domestic helpers (FDHs) are elders aged 65 and above.

Key components of the multidimensional analytical framework are as follows:

Seven dimensions: They include aspects of economic resources and basic daily needs, which align with the two core directions of “empowering those who are able to help themselves” and “supporting those who are unable to help themselves” under the targeted poverty alleviation strategy (Figure 2.2), so as to reflect the situations of different groups from multiple dimensions, including factors such as their needs, abilities and environment.

Figure 2.2: Seven dimensions of the multidimensional analytical framework



Chapter 2 Targeted Poverty Alleviation Strategy and Impact of Targeted Schemes

Given that each target group has different demographic and socio-economic characteristics as well as unique needs, the corresponding entry points and focus for analysis may also differ (Figure 2.3). Specifically:

- As SDU households mainly face problems arising from undesirable living environments, the analysis of this group should focus on the dimension of “Living environment”.
- Single-parent households may experience constrained employment opportunities and reduced income levels due to the need of providing sole childcare. Hence, the analysis of this group should focus on the dimensions of “Income”, “Economic activities and employment” and “Growth, education and training”.
- All-elderly households, comprising mostly retirees, are unable to rely on employment earnings to meet their daily expenses. Meanwhile, they likely have greater need in the areas of health, care and usage of digital technology. Hence, the analysis of this group should focus on the dimensions of “Coverage of cash-based social benefits”, “Assets” and “Health / elderly care / social connection”.

Figure 2.3: Dimensions for focus of the target groups

Seven dimensions under the analytical framework		SDU households	Single-parent households	All-elderly households
Economic resources	Income	★ ★	★ ★ ★	★
	Economic activities and employment	★ ★	★ ★ ★	★ ★
	Coverage of cash-based social benefits	★ ★	★ ★	★ ★ ★
	Assets	★ ★	★ ★	★ ★ ★
Basic daily needs	Living environment	★ ★ ★	★ ★	★ ★
	Growth, education and training	★ ★	★ ★ ★	★
	Health / elderly care / social connection	★ ★	★ ★	★ ★ ★

Notes: The dimensions marked with ★ ★ ★ are the dimensions for focus, which are more important to the target groups and more reflective of their urgent needs or difficulties.

The dimensions marked with ★ ★ may be relevant to the dimensions for focus and have certain reference value, and hence it is worthwhile to include them in the analysis.

As the members in all-elderly households are mostly retirees who generally do not rely on employment earnings to meet their daily expenses, the dimensions of “Income” and “Growth, education and training” may not be particularly relevant to this target group.



21 macro monitoring indicators: Under the seven dimensions, a total of 21 macro indicators are selected from the current statistical system.

I:	Income
1.	Monthly household income: median and the 25th percentile
II:	Economic activities and employment
2.	Proportion of working households
3.	Economic dependency ratio
4.	Labour force participation rate (LFPR)
5.	Proportion of employed members who are part-timers / underemployed
6.	Median monthly employment earnings of employed members
7.	Proportion of members in workless households by reason of being economically inactive
III:	Coverage of cash-based social benefits
8.	Proportion of households with members receiving major cash benefits from the Government (i.e. Comprehensive Social Security Assistance (CSSA) / Old Age Living Allowance (OALA) / Old Age Allowance (OAA) / Disability Allowance (DA) / Working Family Allowance (WFA))
IV:	Assets
9.	Proportion of households with owner-occupied properties
10.	Rental values of owner-occupied properties: median and the 25th percentile
11.	Proportion of households with rental income
V:	Living environment
12.	Proportion of households by housing type
13.	Median per capita floor area of accommodation
14.	Proportion of accommodation equipped with an independent toilet
15.	Median rent-to-income ratio
VI:	Growth, education and training
16.	Proportion of household members with post-secondary educational attainment
17.	Proportion of households with children attending special schools
VII:	Health / elderly care / social connection
18.	Proportion of households with elderly members requiring long-term care, and the proportion of such elders having a carer
19.	Proportion of elderly members who had feelings of loneliness
20.	Proportion of elderly members who received community support / care services
21.	Proportion of elderly members who had a smartphone and had used the Internet

Comparison groups: An appropriate comparison group is identified for each target group with an aim to conducting a multidimensional comparative analysis to give a more holistic picture of the situation of the target group to highlight its needs and difficulties. The selected comparison group shares certain common characteristics with the target group in terms of household composition or socio-economic characteristics (Figure 2.4).

Figure 2.4: Target groups and their corresponding comparison groups

Target group	Comparison group	Common characteristics
SDU households	Tenant households residing in non-SDU private domestic properties*	Mostly tenants of private properties
Single-parent households	Households with children	With children aged below 18
All-elderly households	Other households with elders (i.e. there are younger members in these households)	With elderly members aged 65 and above

Note:(*) Excluding households residing in temporary housing, non-domestic housing, rooms / cubicles, cocklofts and bedspaces, as well as those with household members who are co-tenants, main tenants or sub-tenants.

Taking into account the objective of the targeted poverty alleviation strategy is to devote limited resources to the people most in need, CoP **deems that objective criteria should be adopted** to identify households / individuals within the three target groups that are in more challenging situations with more pressing needs (i.e. households / individuals at “the end of the queue”). This will help facilitate the design of more targeted support measures to improve their well-being at the earliest opportunity.

For each target group, the multidimensional analytical framework adopts the following two steps to conduct a systematic analysis:

- **Step 1:** Examine the key demographic structure (e.g. age, gender and family composition) and socio-economic characteristics (e.g. educational attainment and employment situation) of the target group to gauge its basic profile.
- **Step 2:** Compare the indicators under certain dimensions for focus (e.g. “Economic activities and employment”, “Living environment”, and “Health”) of the target group and its comparison group to confirm the unique needs and / or difficulties of the target group, and identify the “end-of-the-queue” households / individuals that are most in need of support along with their specific difficulties and pain points.



Each target group can be further analysed in depth based on the following objective criteria:

- SDU households live in cramped living environments and face heavy rental burdens, and some families find it difficult to make ends meet. For SDU families with children, their living environments are even more crowded given their larger average household size, which are not conducive to children's growth and learning, and may hinder their physical and psychological development. Therefore, when identifying those most in need within SDU households, **whether they have children can serve as an objective criterion for further analysis;**
- Some parents in single-parent households are unable to fully participate in the workforce as they have to take care of their children, especially those with young children. If the children in these families are supported, this will not only relieve the childcare pressures on their parents, but also help unleash the potential labour force of caregivers. Therefore, when identifying those most in need within single-parent households, **the age of children in the households can serve as an objective criterion for further analysis;** and
- As the members in all-elderly households age, their physical functioning and mobility progressively decline. Their interpersonal interactions and social participation reduce, and their need for daily care as well as mental care and emotional support increase. In addition, the older cohorts may find it hard to keep abreast of the rapidly-evolving digital technology, and they may need assistance in using more recent or sophisticated products and services. Therefore, when identifying those most in need within all-elderly households, **the age of household members can serve as an objective criterion for further analysis.**

Based on the analysis of indicators under the dimensions for focus of the above target groups, their sub-groups and their comparison groups, CoP proposes that those most in need within the target groups which require our focus are: SDU households with children, single-parent households with children aged below 12, and all-elderly households with all members aged 80 and above (Figure 2.5).

Figure 2.5: Those most in need within the target groups

Target group	Needs and difficulties*	Those most in need within the target groups
SDU households	Cramped living environments may hinder children's growth	SDU households with children
Single-parent households	Some parents are unable to fully participate in the workforce as they have to look after young children on their own	Single-parent households with children aged below 12
All-elderly households	Ageing of elders may give rise to greater need in the areas of daily living, mental and emotional well-being, digital literacy and the use of technology	All-elderly households with all members aged 80 and above

Note:(*) Findings of the analysis on the target groups' characteristics, needs and difficulties using the multidimensional analytical framework are set out in the ensuing part of this chapter.

The above multidimensional analytical framework allows for timely updates as and when necessary, and adjustments to align with the latest situations of the target groups, social trends and available data, etc. for refinements. In the following analysis, we will discuss those most in need within each target group, and the areas and difficulties for which they need care based on empirical evidence. This will assist the Government in devising targeted poverty alleviation measures.

Characteristics and Situations of Those Most in Need within the Target Groups

According to the data⁴ from C&SD's General Household Survey (GHS) in 2024 and its 2021 Population Census, there were about 210 000 persons residing in SDUs⁵, about 200 000 persons from single-parent households, and about 720 000 persons from all-elderly households in Hong Kong. Among them, there were about 90 000 persons in SDU households with children (accounting for over 40% of the population in SDU households); about 100 000 persons in single-parent households with children aged below 12 (accounting for some 50% of the population in single-parent households); and about 130 000 persons in all-elderly households with all members aged 80 and above (accounting for nearly 20% of the population in all-elderly households) (Figure 2.6)⁶.

Figure 2.6: Number of domestic households and population residing therein in the target groups and those most in need within each group

Target group	Number of households*	Population residing therein*
SDU households Of which: SDU households with children	107 200 (2021) 29 600 (27.6%)	214 200 (2021) 90 800 (42.4%)
Single-parent households Of which: single-parent households with children aged below 12	69 000 (2024) 32 400 (46.9%)	203 900 (2024) 101 200 (49.6%)
All-elderly households Of which: all-elderly households with all members aged 80 and above	491 200 (2024) 107 000 (21.8%)	717 600 (2024) 131 600 (18.3%)

Notes:(^) The number of domestic households / population residing therein may overlap among various groups. Since the data of each group were collected in different years, the figures in this table cannot be added up.

() Percentages in parentheses denote the proportion of the number of domestic households / population residing therein in the corresponding target groups.

Sources: Data of SDU households came from C&SD's 2021 Population Census; data of single-parent households and all-elderly households came from C&SD's GHS in 2024.

4. Unless otherwise specified, the figures on household and population in this chapter refer to the number of land-based domestic households and their population (excluding FDHs). Furthermore, due to rounding, there may be a slight discrepancy between the sum of individual items and the total in this chapter; percentages of individual items may also not add up to 100%.

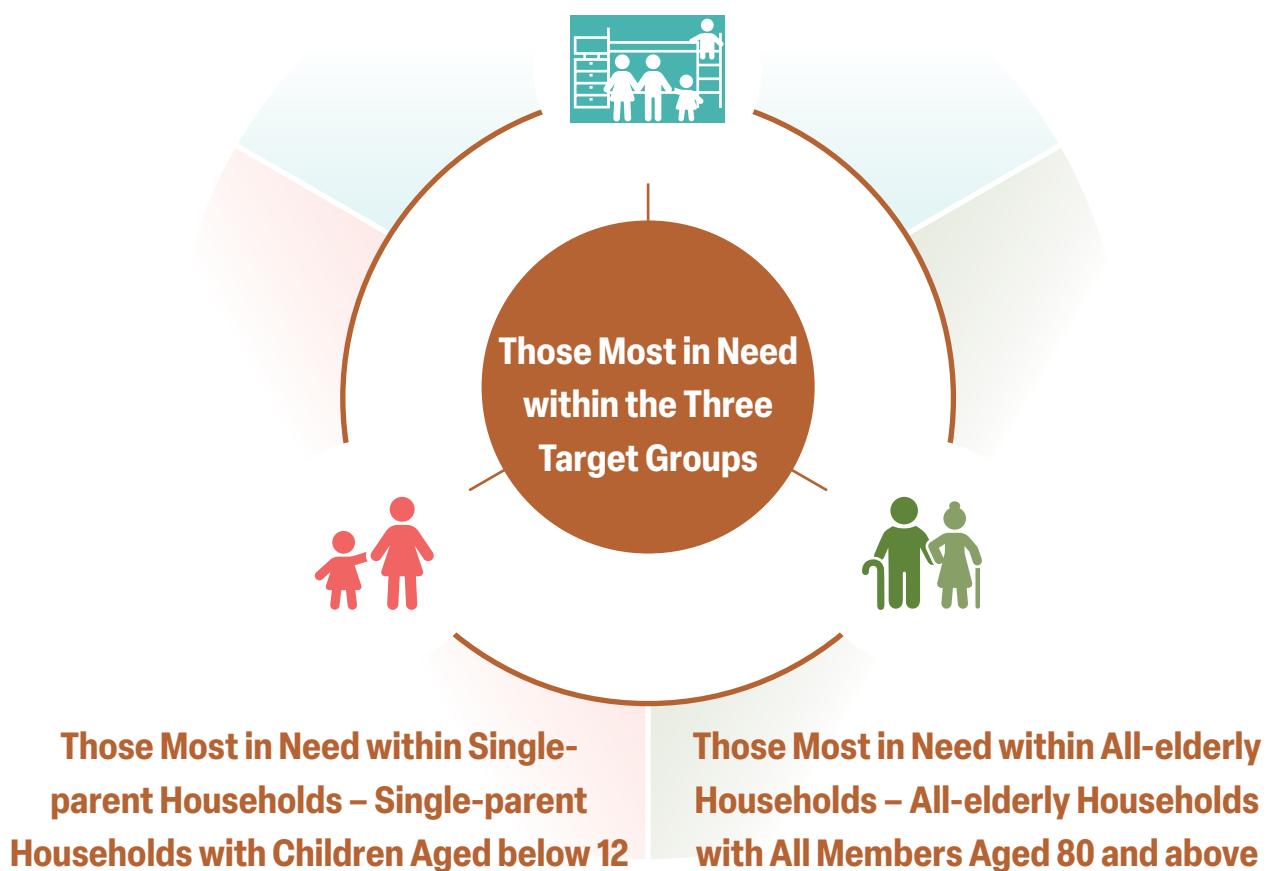
5. According to a statistical survey on SDUs conducted between February and May 2024 by Policy 21 (a consultancy firm commissioned by the Task Force on Tackling the Issue of Subdivided Units), there were about 108 400 SDU households in Hong Kong, with a population of about 220 000 residing therein. As that survey can only provide limited data on the households' characteristics, data from C&SD's 2021 Population Census are used in the analysis of SDU households in this chapter.

6. Since the household and population data of each target group were collected in different years, the figures cannot be added up.



The characteristics, needs and difficulties of the three target groups are elaborated below⁷. Those most in need within the target groups, along with their specific difficulties and pain points, are identified to enable the targeted design of support measures.

Those Most in Need within SDU Households – SDU Households with Children



7. Data related to SDU households came from C&SD's 2021 Population Census; data of single-parent households and all-elderly households came from C&SD's GHS in 2024, but the proportion of SDU households under indicator (12), as well as the data under indicators (13), (14), (17) and (18) came from the 2021 Population Census; whereas the data under indicators (19), (20) and (21) came from C&SD's Thematic Household Survey on Health, Elderly Care and Social Inclusion of Elderly Persons in 2024. To ensure direct comparability of the analysis, the data used for comparison were drawn from the same statistical survey. Similarly, the overall household figures may either come from the 2021 Population Census or GHS in 2024, depending on the target group being analysed.

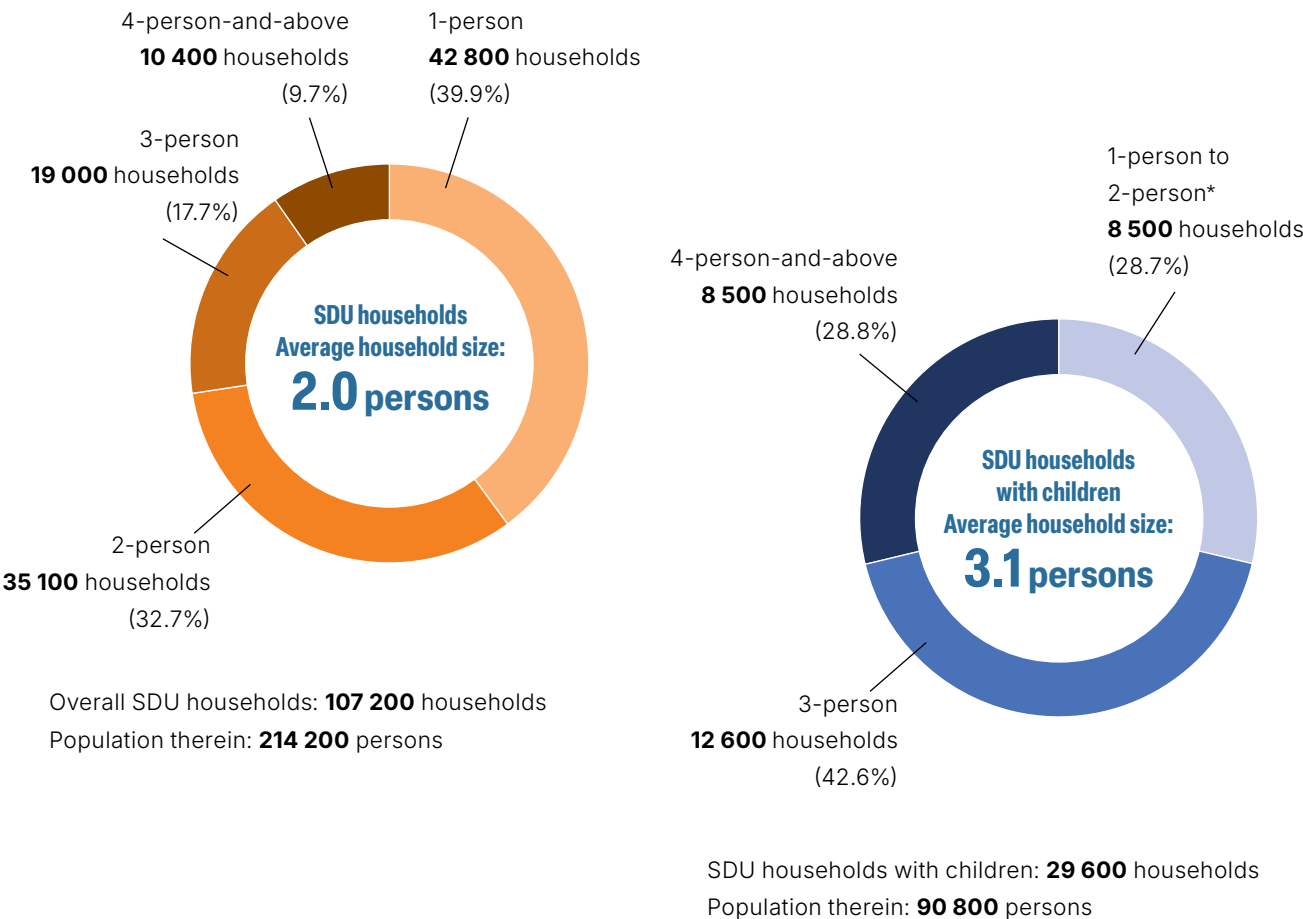
Those Most in Need within SDU Households – SDU Households with Children

In 2021, there were about 107 200 SDU households in Hong Kong (accounting for 4.0% of overall domestic households) with about 214 200 persons residing therein (accounting for 3.1% of the overall population in domestic households). Of these, there were about 29 600 SDU households with children, accounting for close to 30% (27.6%) of overall SDU households, with a total of 90 800 persons residing therein (accounting for 42.4% of the overall population in SDU households). Among the members in these households, about 45% (44.6% or 40 500 persons) were children aged below 18 (comprising 12 800 young children aged below 6, 14 500 children aged 6 to 11, and 13 300 youths aged 12 to 17) (Figure 2.7). Compared with overall SDU households, SDU households with children had:

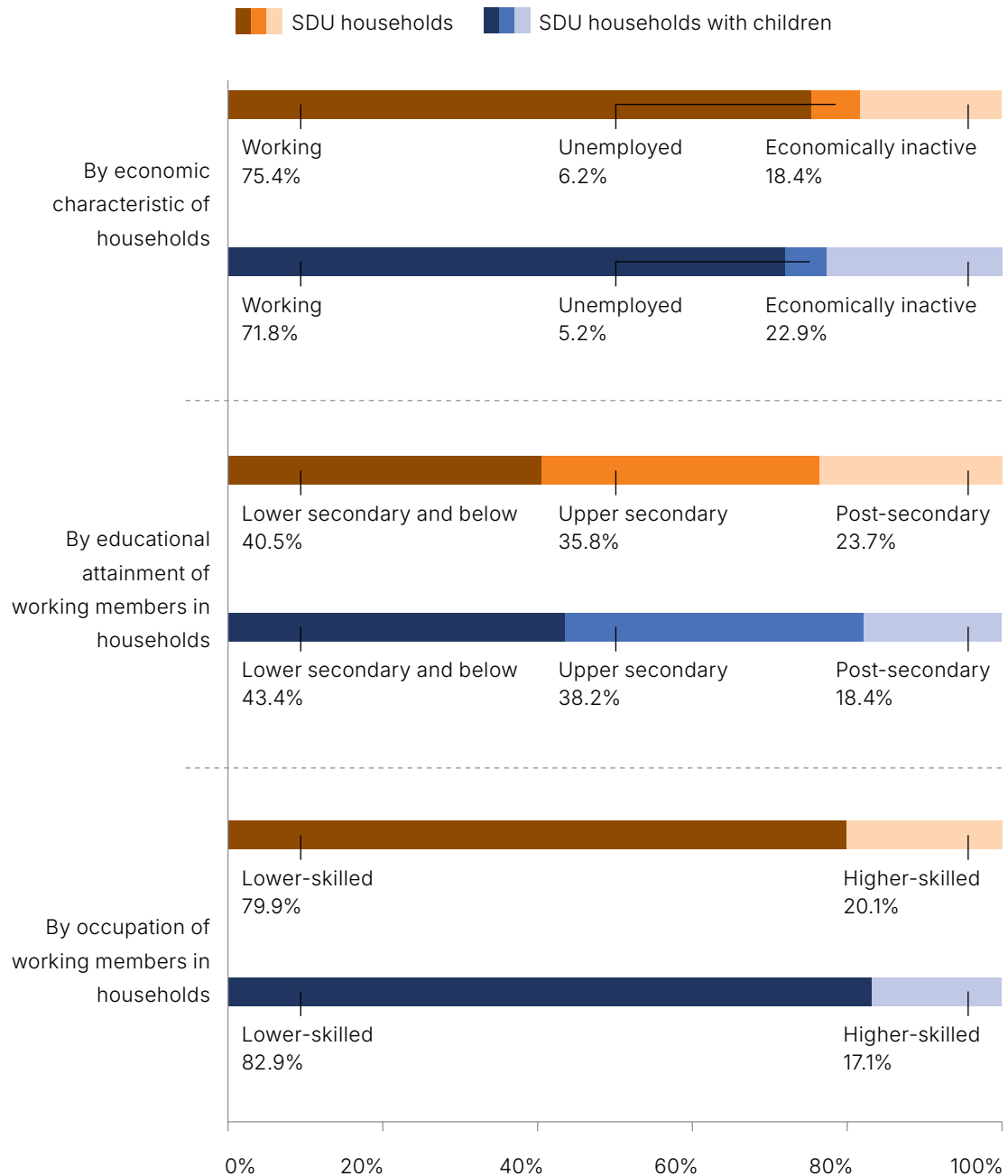
- **Larger household size:** The average household size was 3.1 persons, which was visibly larger than the average of 2.0 persons for overall SDU households. More than 40% of SDU households with children were 3-person households (42.6% or 12 600 households) while nearly 30% were 4-person-and-above households (28.8% or 8 500 households).
- **Less favourable employment conditions:** A lower proportion of working households, and a higher proportion of working members with lower educational attainment or engaging in lower-skilled jobs.

Figure 2.7: Key demographic and socio-economic characteristics of SDU households / SDU households with children

(a) By household size

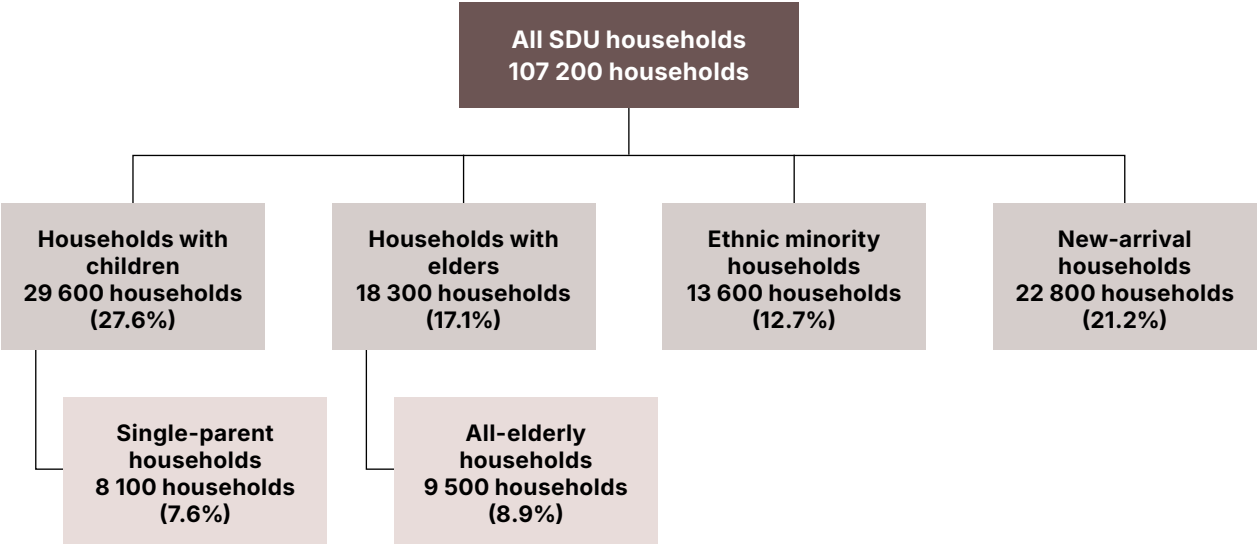


(b) Selected characteristics



The proportion to the total number of households /
total number of working members in the respective group

(c) By social characteristic of households^



Notes:(*) 1-person SDU households with children were very rare. These households mainly comprised a child and one or more members who did not belong to the Hong Kong Resident Population (e.g. Two-way Exit Permit holders in Hong Kong).
(^*) There may be overlaps among various household groups.
() Percentages in parentheses denote the proportion of households with the relevant characteristics to the total number of households in the respective group.

Source: 2021 Population Census, C&SD.



Focusing on the dimension of “Living environment”, the living environments of SDU households were generally poor compared with non-SDU private tenant households, and they faced heavy rental burdens. The living environments of SDU households with children were even more crowded (Figure 2.8):

- **Crowded living environments:** The median per capita floor area of accommodation was 65 square feet for SDU households, far below that of non-SDU private tenant households (226 square feet). For SDU households with children, their living spaces were even more congested due to larger family sizes. The median per capita floor area of their accommodation was 43 square feet, which was only two-thirds of that of overall SDU households (65 square feet).
- **Some resided in units without independent toilets:** 98.0% of SDU households with children resided in units equipped with independent toilets, slightly higher than the corresponding proportion in overall SDU households (95.9%), but lower than that in non-SDU private tenant households (100.0%).
- **Heavy rental burdens:** The median rent-to-income ratio⁸ of SDU households with children was 30.9% (i.e. in terms of the median, rental payment accounted for more than 30% of their household income). While this was slightly lower than that of overall SDU households (32.1%), it was notably higher than those of overall households and PRH households (at 16.9% and 11.8% respectively), reflecting that SDU households with children faced considerably heavy burdens of housing expenses.

Figure 2.8: Performance of SDU households / SDU households with children under the dimension of “Living environment”

	SDU households	SDU households with children	Non-SDU private tenant households	Overall households
Living environment				
Median per capita floor area of accommodation	65 square feet	43 square feet	226 square feet	178 square feet
Proportion of accommodation equipped with an independent toilet	95.9%	98.0%	100.0%	99.6%
Median rent-to-income ratio [#]	32.1%	30.9%	31.6%	16.9%

Note:(#) Excluding households with zero rent (e.g. those residing with relatives / friends without paying rent, and those living in accommodation provided free of charge by an employer) or households with zero income.

Source: 2021 Population Census, C&SD.

8. Excluding households with zero rent (e.g. those residing with relatives / friends without paying rent, and those living in accommodation provided free of charge by an employer) or households with zero income.

As for other dimensions related to economic resources, SDU households generally had fewer economic resources compared with non-SDU private tenant households, and the proportion of households receiving cash benefits from the Government was also higher. Among them, SDU households with children had heavier care-giving responsibilities, tighter per capita disposable resources and more significant financial pressure (Figure 2.9):

- **A lower labour force participation rate (LFPR), and many working members had lower educational attainment or were engaged in lower-skilled jobs:** The LFPR of members aged 18 to 64 in SDU households with children was 61.2%, visibly lower than that in overall SDU households (72.5%). Both proportions were lower than that in non-SDU private tenant households (77.6%).

The proportion of working members in SDU households with children working only part-time⁹ was 22.9%, while the corresponding proportion in overall SDU households was 25.6%. Both proportions were higher than that in non-SDU private tenant households (16.6%). It is worth noting that among workless SDU households with children, around 85% (85.1%) of economically inactive members aged 18 to 64 did not join the labour market because they were engaged in household duties or unpaid care to other persons. The proportion was notably higher than that of overall SDU households (60.3%) and far higher than that of non-SDU private tenant households (36.6%).

Moreover, over 40% (43.4%) of working members in SDU households with children had attained lower secondary education and below, and over 80% (82.9%) of them were engaged in lower-skilled jobs. Both proportions were higher than those in overall SDU households (at 40.5% and 79.9% respectively).

- **Lower income in general, and SDU households with children had heavy care-giving responsibilities:** The median monthly employment earnings of working members in SDU households with children was \$14,300, comparable to that in overall SDU households (\$14,000), but lower than that in non-SDU private tenant households (\$26,900). While the median monthly household income of SDU households with children (\$17,400) was slightly higher than that of overall SDU households (\$15,300), it was far lower than that of non-SDU private tenant households (\$42,200). Although the incomes of SDU households with children and overall SDU households were comparable, the average household size of SDU households with children was larger, and their family expenses would be correspondingly higher.

Moreover, the economic dependency ratio of SDU households with children (2.012; i.e. on average, each person in the labour force had to support about two economically inactive persons) was notably higher than that of overall SDU households (826). As observed from the above indicators, SDU households with children had heavier financial burdens. Their disposable economic resources would be even tighter after paying for their housing expenses, and they might need to cut back other expenses on daily necessities (such as food and childcare).

- **A higher proportion of households received cash benefits from the Government:** The proportions of SDU households with children receiving CSSA and WFA were 22.6% and 16.5% respectively, which were higher than those in overall SDU households (13.0% and 6.3% respectively). The proportions in both types of households were far higher than those in non-SDU private tenant households (3.6% and 1.7% respectively). This reflected that SDU households, in particular those with children, relied more heavily on cash assistance from the Government to sustain their basic living.



9. Whenever working part-time is mentioned for SDU households and non-SDU private tenant households, it refers to working less than 35 hours a week, with data from C&SD's 2021 Population Census. For other types of households, working part-time refers to taking up part-time employment or being underemployed, with data from C&SD's GHS in 2024.

Figure 2.9: Performance of SDU households / SDU households with children under the dimensions related to economic resources

	SDU households	SDU households with children	Non-SDU private tenant households	Overall households
Economic activities and employment				
Proportion of working households	75.4%	71.8%	86.2%	76.5%
Economic dependency ratio	826	2 012	760	931
LFPR (persons aged 18 to 64)	72.5%	61.2%	77.6%	73.4%
Median monthly employment earnings of employed members	\$14,000	\$14,300	\$26,900	\$19,500
Proportion of members aged 18 to 64 in workless households who are economically inactive due to being home-makers or unpaid carers	60.3%	85.1%	36.6%	31.6%
Income				
Median monthly household income	\$15,300	\$17,400	\$42,200	\$27,300
Coverage of cash-based social benefits				
Proportion of households receiving major cash benefits from the Government	29.3%	43.9%	15.4%	34.0%
- CSSA	13.0%	22.6%	3.6%	5.6%
- WFA	6.3%	16.5%	1.7%	2.3%

Source: 2021 Population Census, C&SD.

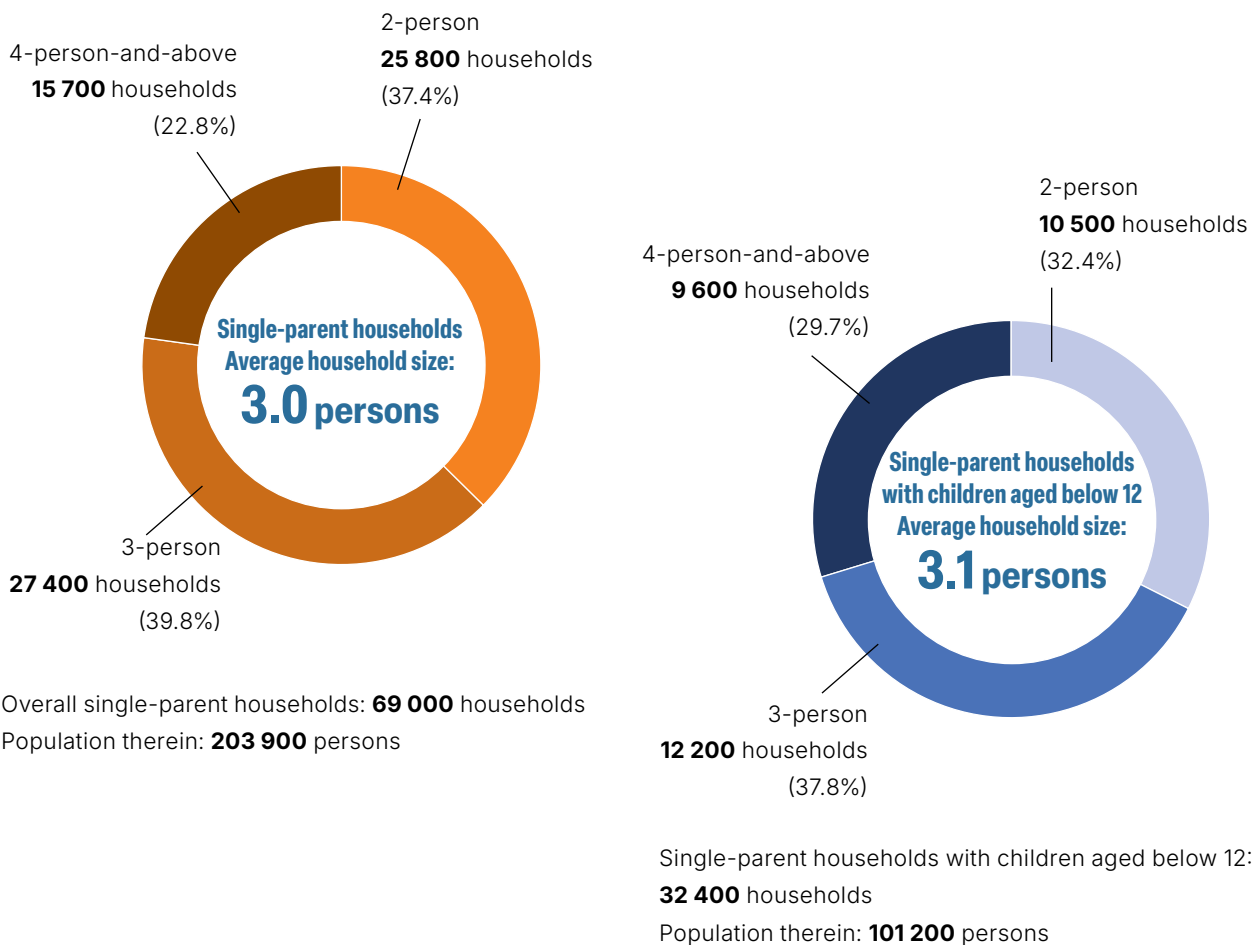
The above analysis reflects the issues commonly faced by SDU households, including relatively limited economic resources, heavy rental burdens, cramped living space and environmental hygiene concerns. Poor living environments will not only affect quality of life, but also have an adverse impact on physical health and mental well-being, as well as family relationships. It is worth noting that nearly 20% of the SDU population were children aged below 18 (40 500 persons), 27 300 of whom were children aged below 12. **Due to the crowded living space in SDUs, the children residing therein lack suitable space for activities and learning. The basic daily expenses of these households are also relatively higher due to larger family sizes. Yet, these households generally have tight economic resources and heavy rents to pay, so they may have to cut back some expenses related to children's education and learning (e.g. extra-curricular activities, computers and network equipment).** The provision of more amenities and shared space (e.g. for cooking, laundry, children's learning and playing, etc.) at the community level, along with supporting arrangements to facilitate the personal development of children and adolescents, will help improve the quality of life of these households, foster comprehensive development of their children, and lower the risk of intergenerational poverty. The performance of macro indicators pertaining to SDU households / SDU households with children under the multidimensional analytical framework is detailed at **Annex 1**.

Those Most in Need within Single-parent Households – Single-parent Households with Children Aged below 12

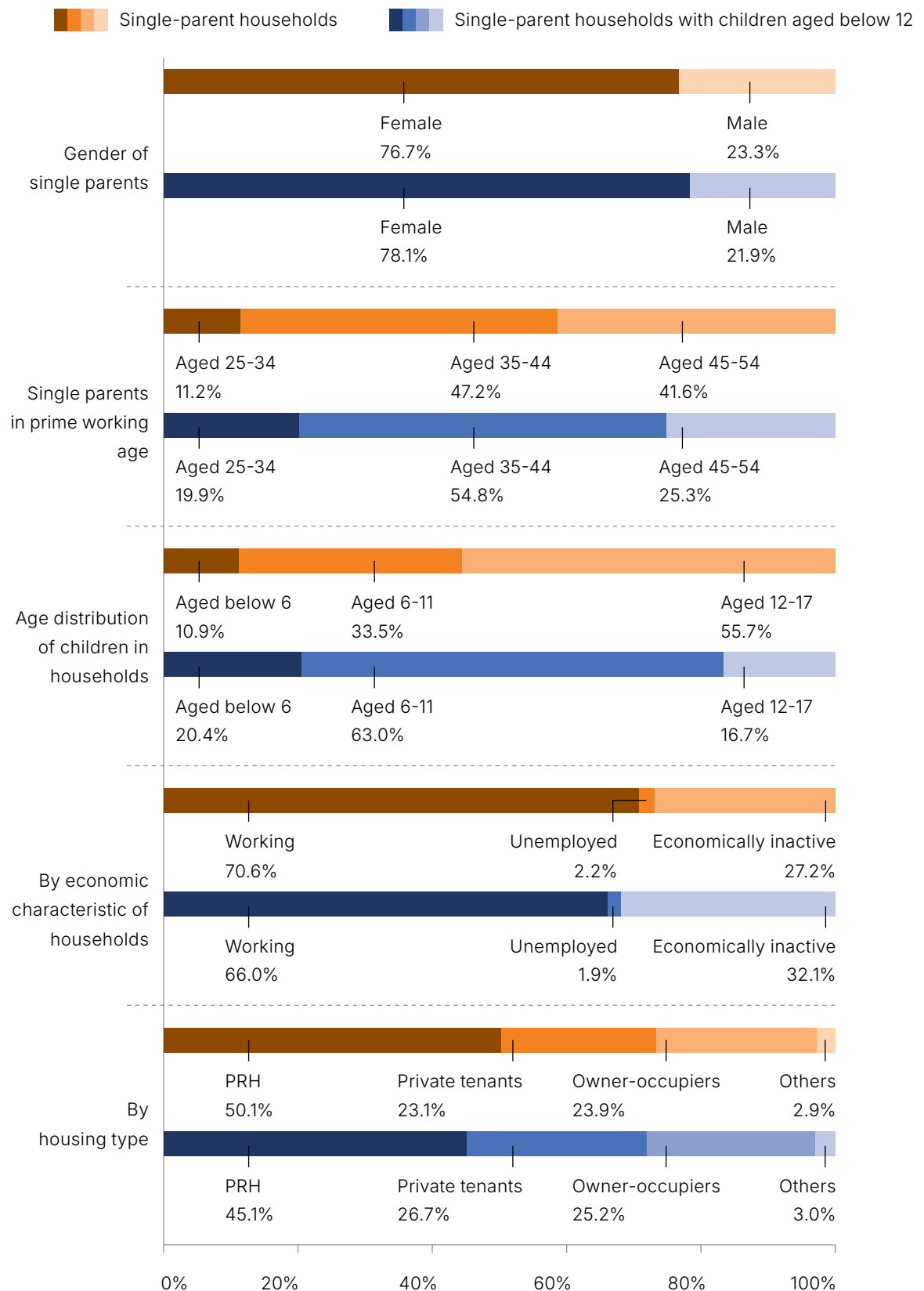
In 2024, there were about 69 000 single-parent households in Hong Kong (accounting for 2.5% of overall domestic households) with about 203 900 persons residing therein (accounting for 2.9% of the overall population in domestic households), including 90 700 children (accounting for 10.0% of the children residing in domestic households). There were about 32 400 single-parent households with children aged below 12, accounting for nearly half (46.9%) of overall single-parent households, with a total of 101 200 persons residing therein (accounting for 49.6% of the overall population in single-parent households), including 40 000 children aged below 12 (9 800 of them were young children aged below 6) (Figure 2.10). The profile of single-parent households with children aged below 12 was similar to those of overall single-parent households: the average household size was 3.1 persons; over 65% (67.6% or 21 900 households) were 3-person-and-above households; about 60% of them (60.3% or 19 500 households) comprised only single parents and their children; single parents were predominantly female (78.1% or 25 300 persons), with the vast majority of them (94.5%) in their prime working age; over half of them (53.2%) were receiving government cash benefits; and the proportion of working households was lower (66.0%).

Figure 2.10: Key demographic and socio-economic characteristics of single-parent households / single-parent households with children aged below 12

(a) By household size

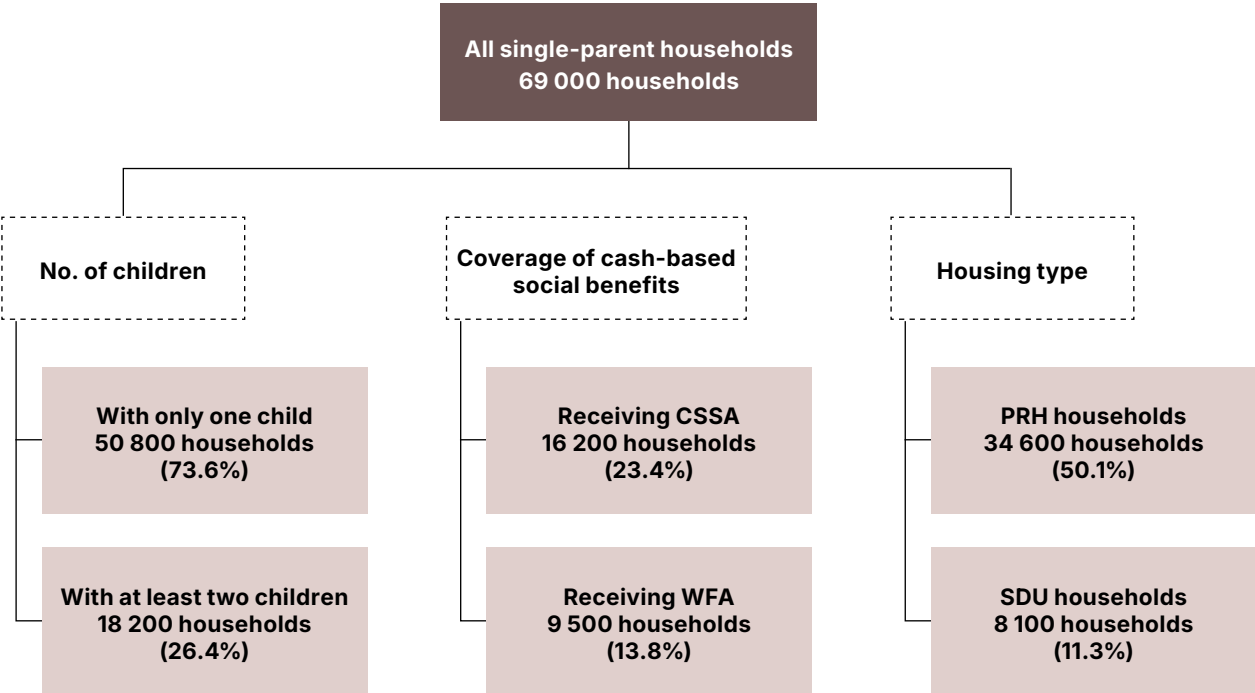


(b) Selected characteristics



The proportion to the population of single parents / population of single parents in prime working age / population of children in single-parent households / total number of households in the respective group

(c) By social characteristic of households^



Notes:(^) CSSA and WFA cannot be received concurrently. Besides, there may be overlaps among various household groups.
() Percentages in parentheses denote the proportion of households with the relevant characteristics to the total number of households in the respective group.
Sources: The data related to SDU households came from C&SD's 2021 Population Census, while other data came from C&SD's GHS in 2024.

Single parents shouldered heavier burdens of raising children, and some of them were unable to fully participate in the workforce because of their care-giving responsibilities. Single-parent households fared less favourably under the dimensions related to economic resources and the dimensions of “Growth, education and training” and “Living environment” compared with overall households with children. It is particularly worth noting that the situations of those with children aged below 12 were even more unfavourable than overall single-parent households (Figure 2.11):

- **Heavier burden of raising children:** The average number of children in single-parent households with children aged below 12 was higher, and the economic dependency ratio of these households was 2 444 (i.e. on average, each person in the labour force had to support over two economically inactive persons), which was higher than that of overall single-parent households (2 104). Both ratios were visibly higher than that of overall households with children (1 489), broadly reflecting that single parents with young children shouldered heavier financial burdens from raising children on their own.
- **Greater responsibilities in caring for young children reduced labour force participation and employment motivation:** Among single-parent households with children aged below 12, both the proportion of working households (66.0%) and LFPR of members aged 18 to 64 (61.1%) were lower than those of overall single-parent households (70.6% and 62.7% respectively), and notably lower than those of overall households with children (91.2% and 71.3% respectively). Moreover, among the workless households, over 80% (83.3%) of their economically inactive members aged 18 to 64 did not join the labour force due to household duties. This proportion was higher than that in overall single-parent households (74.2%).



Further analysis revealed that single mothers' willingness to participate in the workforce was, to a certain extent, influenced by their children's age. The LFPR of single mothers in their prime working age (between 25 and 54) rose as their youngest children grew older, from 57.2% (those with youngest children aged below 12) to 67.5% (those with youngest children aged 12 and above).

- **Lower educational attainment among working-age members and a higher proportion of working members being part-timers, which led to visibly lower employment earnings and household incomes in general:** The proportion of working-age members (aged 18 to 64) with post-secondary educational attainment in single-parent households with children aged below 12 was 30.4%, which was similar to that in overall single-parent households (30.6%), but both proportions were lower than that in overall households with children (48.2%). Further analysis revealed that over two-thirds (67.5%) of working members in single-parent households with children aged below 12, and over 70% (71.8%) of working members in single-parent households were engaged in lower-skilled jobs. Both proportions were higher than that of overall households with children (50.4%). Furthermore, among working members in single-parent households with children aged below 12 and those in overall single-parent households, about 15% (15.3% and 15.6% respectively) were working part-time. Both proportions were also higher than that in overall households with children (9.4%), conceivably because these working members were unable to take up full-time jobs due to childcare duties.

In view of the above, the median monthly employment earnings of working members in single-parent households with children aged below 12 and their median monthly household income were \$20,000 and \$23,400 respectively, slightly higher than those of overall single-parent households (\$18,500 and \$22,300 respectively), but visibly lower than those of overall households with children (\$26,100 and \$43,200 respectively).

- **A higher proportion of households relied on government cash benefits:** The proportion of single-parent households with children aged below 12 receiving CSSA was 27.0%, which was higher than that of overall single-parent households (23.4%), and visibly higher than that of overall households with children (5.8%). Among them, the proportion of economically inactive households receiving CSSA was even higher at 70.2%.
- **Heavier rental burdens:** Close to 30% (26.7%) of single-parent households with children aged below 12 were private tenants, which was higher than that of overall single-parent households (23.1%) and that of overall households with children (22.5%). The median rent-to-income ratio of single-parent households with children aged below 12 was 17.8%, higher than that of overall single-parent households (16.5%) and that of overall households with children (14.4%). On the other hand, the proportions of single-parent households with children aged below 12 and overall single-parent households residing in owner-occupied properties were 25.2% and 23.9% respectively, and both were visibly lower than that of overall households with children (46.4%).
- **Some single-parent households faced particularly dire situation:** A small proportion of single-parent households with children aged below 12 resided in SDUs, and their situations were particularly difficult. In 2021, there were 4 800 such households, with 11 900 persons residing therein, including 5 900 children aged below 12. The proportion of working households and LFPR of members aged 18 to 64 were both very low (34.1% and 39.0% respectively), while the proportion of working members in these households working part-time was relatively high (33.9%). The incomes of these households were notably lower, with the median monthly employment earnings of working members and the median monthly household income being \$10,500 and \$14,300 respectively. Among the workless households, the vast majority (97.0%) of economically inactive members aged 18 to 64 did not join the labour market because they were engaged in household duties or unpaid care of other persons. In addition, the proportion of households receiving CSSA was significantly higher (74.1%).

Separately, 1.7% of single-parent households (or 1 200 households) had children attending special schools, which was higher than that of overall households with children (0.9%, i.e. 6 000 households). These families needed more support from the community than ordinary families.

Figure 2.11: Performance of single-parent households / single-parent households with children aged below 12 under the dimensions related to economic resources, and the dimensions of “Growth, education and training” and “Living environment”

	Single-parent households	Single-parent households with children aged below 12	Households with children	Overall households
Economic activities and employment				
Proportion of working households	70.6%	66.0%	91.2%	74.6%
Economic dependency ratio	2 104	2 444	1 489	1 024
LFPR (persons aged 18 to 64)	62.7%	61.1%	71.3%	72.4%
Proportion of employed members who are part timers / underemployed	15.6%	15.3%	9.4%	10.7%
Median monthly employment earnings of employed members	\$18,500	\$20,000	\$26,100	\$21,500
Growth, education and training				
Proportion of working-age members with post-secondary educational attainment	30.6%	30.4%	48.2%	47.2%
Proportion of households with children attending special schools	1.7%	1.7%	0.9%	0.9%
Income				
Median monthly household income	\$22,300	\$23,400	\$43,200	\$30,200
Coverage of cash-based social benefits				
Proportion of households receiving CSSA	23.4%	27.0%	5.8%	4.9%
Living environment				
Median rent-to-income ratio	16.5%	17.8%	14.4%	15.2%

Sources: Except for the data on children attending special schools, which came from C&SD's 2021 Population Census, all data came from C&SD's GHS in 2024.



The above analysis reflects that single parents face considerable constraints due to their primary care-giving responsibilities, especially when their children are young and the responsibilities are heavier. Unlike two-parent families in which both parents can share childcare duties, single parents have to shoulder heavier financial burdens and also take sole care of their children's daily lives. In order to provide for their families, working single parents have limited time to spend with their children. Moreover, children from single-parent families may experience varying degrees of psychological and emotional impact resulting from their family changes or instability. Childcare and family support services would allow children from single-parent families to receive appropriate care and attention, which will be conducive to their physical health and mental well-being. Furthermore, these single parents can work with peace of mind, thus ultimately improving their quality of life. The performance of the macro indicators pertaining to single-parent households / single-parent households with children aged below 12 under the multidimensional analytical framework is detailed at **Annex 2**.



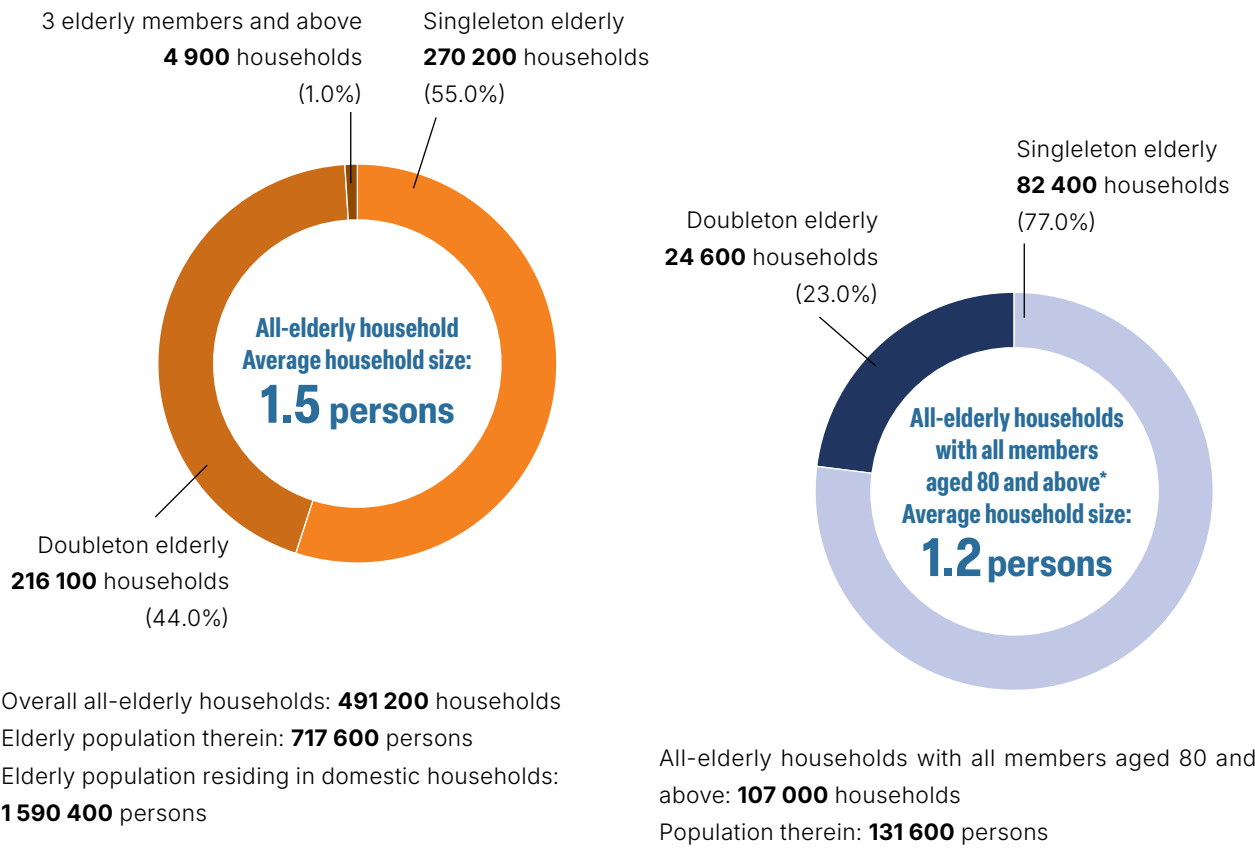
Those Most in Need within All-elderly Households – All-elderly Households with All Members Aged 80 and above

In 2024, there were around 491 200 all-elderly households in Hong Kong (accounting for 17.8% of overall domestic households) with around 717 600 persons residing therein (accounting for 45.1% of all elders aged 65 and above residing in domestic households, or 10.4% of the overall population in domestic households). Among them, there were about 107 000 all-elderly households with all members aged 80 and above (i.e. all household members are elders aged 80 and above) (accounting for 21.8% of overall all-elderly households), with 131 600 persons residing therein (accounting for 18.3% of the population in overall all-elderly households) (Figure 2.12). Compared with overall all-elderly households, those households with all members aged 80 and above had:

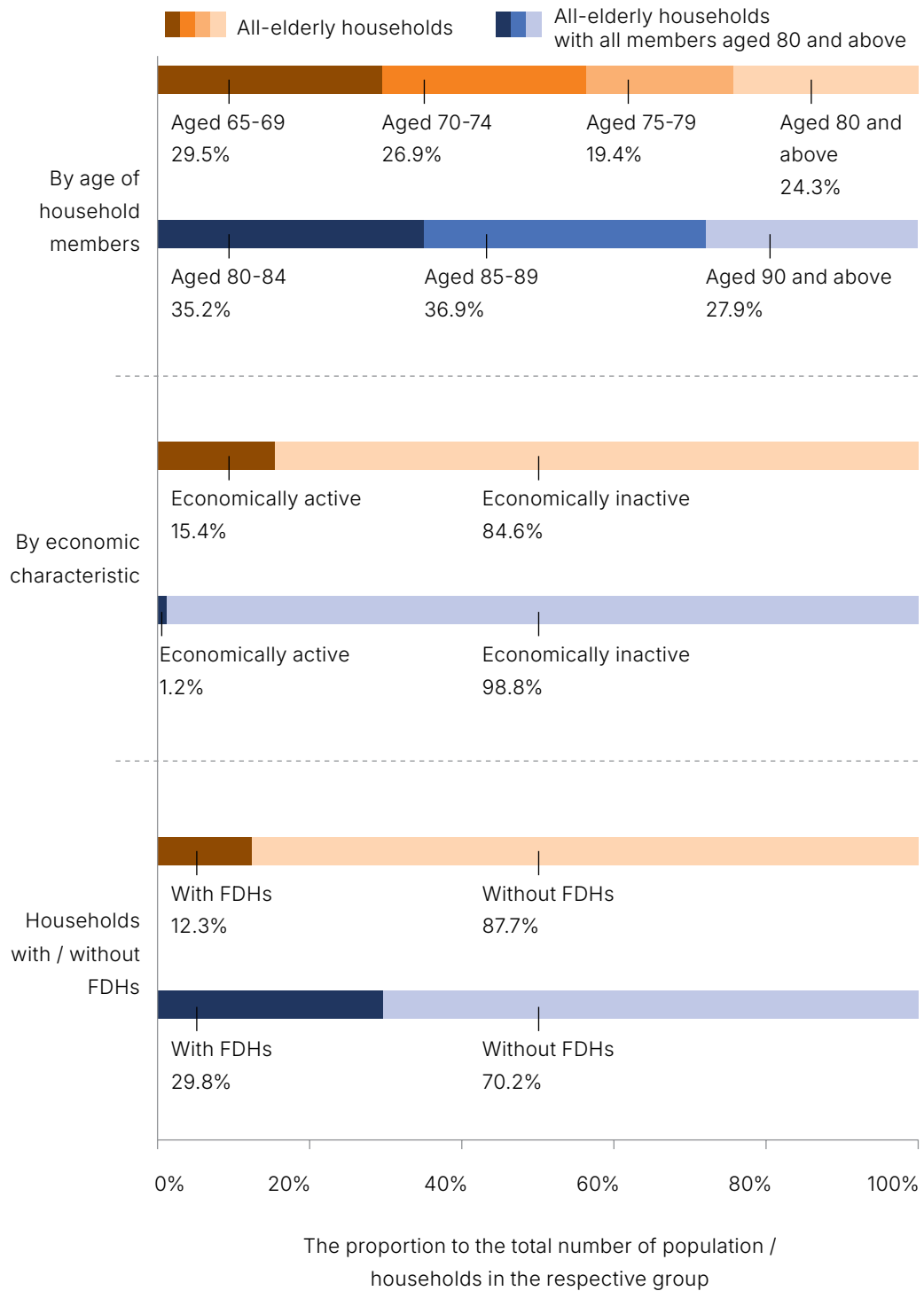
- **A higher proportion of singleton elderly households:** Around three quarters (77.0% or 82 400 households) were singleton elderly households, which was visibly higher than that of overall all-elderly households (55.0%); the rest were mostly doubleton elderly households.
- **A higher proportion of households hiring FDHs:** Close to 30% of the households (29.8% or 31 900 households) hired FDHs, reflecting to some extent that the older cohorts were more in need of care from others.

Figure 2.12: Key demographic and socio-economic characteristics of all-elderly households / all-elderly households with all members aged 80 and above

(a) By household size



(b) Selected characteristics



Notes: () Percentages in parentheses denote the proportion of households with the relevant characteristics to the total number of households in the respective group.

(*) The figures on elderly households with three members and above are not released due to relatively large sampling errors.

Source: GHS in 2024, C&SD.

Chapter 2 Targeted Poverty Alleviation Strategy and Impact of Targeted Schemes

The majority of members in all-elderly households had retired and generally did not rely on employment earnings to meet their living expenses. The analysis of the dimensions of “Assets” and “Coverage of cash-based social benefits” revealed that (Figure 2.13):

- **Their housing needs were mostly secured:** Over 55% (56.9%) of all-elderly households with all members aged 80 and above resided in owner-occupied properties, over 95% of which were mortgage-free. This was comparable to the proportion of overall all-elderly households residing in owner-occupied properties, at 57.1%, over 90% of which were mortgage-free. The median monthly rental values of owner-occupied properties of the two groups were both \$11,000, indirectly reflecting that some households might own a certain amount of fixed assets. Meanwhile, over 35% (36.3%) of all-elderly households with all members aged 80 and above resided in PRH, whereas around 1 000 (1.1%) resided in SDUs. The corresponding proportions in overall all-elderly households were 34.8% and 2.5%.
- **Most of them benefitted from cash-based social benefits that “support those who are unable to help themselves”:** Over 95% (97.0%) of all-elderly households with all members aged 80 and above received government cash benefits, mainly OALA (43.5%), followed by OAA (37.0%) and CSSA (15.0%). The proportion of overall all-elderly households receiving government cash benefits was also high at 84.6%, mainly OALA (42.6%), followed by OAA (30.1%) and CSSA (10.6%).
- **Some elders had prepared for their retirement and had passive income:** The proportions of all-elderly households with all members aged 80 and above and overall all-elderly households having rental income were 2.6% and 4.1% respectively. Focusing on the 230 100 all-elderly households not receiving CSSA or OALA, the analysis showed that a notably higher proportion of them owned a certain amount of economic resources¹⁰, with more than a quarter having rental income, dividend income or regular pensions, indicating that they had prepared for their retirement lives to a certain extent.

Figure 2.13: Performance of all-elderly households / all-elderly households with all members aged 80 and above under the dimensions of “Assets” and “Coverage of cash-based social benefits”

	All-elderly households	All-elderly households with all members aged 80 and above	Other households with elders	Overall households
Assets				
Proportion of households with owner-occupied properties	57.1%	56.9%	55.6%	50.4%
Median monthly rental value of owner-occupied properties	\$11,000	\$11,000	\$11,200	\$11,200
Proportion of households with rental income	4.1%	2.6%	4.4%	4.1%
Coverage of cash-based social benefits				
Proportion of households receiving major cash benefits from the Government	84.6%	97.0%	74.7%	40.0%
- OALA	42.6%	43.5%	47.7%	19.2%
- OAA	30.1%	37.0%	21.7%	10.6%
- CSSA	10.6%	15.0%	2.6%	4.9%

Source: GHS in 2024, C&SD.

10. Almost 80% of these households had owner-occupied properties, and close to 15% of them had a monthly income of \$30,000 and above.



However, even if the financial and housing needs of the elderly are met, they may feel lonely and helpless when faced with various daily-life issues (e.g. long-term care needs, not knowing how to use new technologies, etc.) due to the gradual decline of their health and self-care abilities. As the trend of population ageing continues in the future, the proportion of elderly persons living alone, as well as the proportion of households consisting solely of elderly members will likely be on the rise. Therefore, it is important to understand the needs and difficulties of all-elderly households in the aspects of "Health / elderly care / social connection". Compared with other households with elders, all-elderly households may have greater need for community care and support. In particular, all-elderly households with all members aged 80 and above were more in need of support (Figure 2.14):

- The proportion of households with members requiring long-term care was relatively high among the older cohorts, while the proportion of elders with long-term care needs that had a carer was lower than other households with elders:** About half (50.3%) of all-elderly households with all members aged 80 and above had members with long-term care needs. This was visibly higher than the corresponding proportions in overall all-elderly households (24.2%) and other households with elders (27.2%). In all-elderly households with all members aged 80 and above, the proportion of elders with long-term care needs that had a carer was 96.8%, while that of overall all-elderly households was 95.3%. The two proportions were slightly lower than that of other households with elders (98.4%).
- A higher proportion of household members had received community support / care services:** Among all-elderly households with all members aged 80 and above, about 10% (10.1%) of their members had received community support / care services for the elderly¹¹ during the 12 months before enumeration. This was higher than that among members in overall all-elderly households (4.4%), and visibly higher than that among elders in other household groups (2.9%). Among elders in all-elderly households with all members aged 80 and above who did not receive community support / care services, the main reason was that they considered the condition of their own health was good and did not need other people to take care of them (about 60%), followed by the reason that they already had family members / relatives / friends / FDHs or carers to take care of them (nearly 35%). The above reflected that among the older cohorts, those with poorer health conditions and / or without carers were more reliant on community support.
- A higher proportion of household members had feelings of loneliness:** Close to 30% (28.4%) of elders in all-elderly households with all members aged 80 and above had feelings of loneliness (i.e. feeling lacking companionship, left out, or isolated from others) during the week before enumeration. This was visibly higher than that of members in overall all-elderly households (16.4%) and that of elders in other household groups (12.1%), indicating that they might need greater care from families and friends, as well as from the community.
- Lower digital technology usage rates:** Only about 55% (56.6%) of elders in all-elderly households with all members aged 80 and above had a smartphone, which was far lower than that of members in overall all-elderly households (86.2%) and that of elders in other household groups (89.5%). Only about 45% (44.8%) of elders in all-elderly households with all members aged 80 and above had used the Internet during the 12 months before enumeration, which was also far lower than that of members in overall all-elderly households (81.5%) and that of elders in other household groups (86.1%). This reflected lower digital technology penetration among the older cohorts, and that they might need assistance when using digital technology (e.g. for booking government services through online platforms, etc.).



11. Community support services for the elderly cover District Elderly Community Centres, Neighbourhood Elderly Centres and Social Centres for the Elderly. Community care services for the elderly cover Day Care Centres/Units for the Elderly, Home Care Services for Frail Elderly Persons and the Community Care Service Vouchers for the Elderly.

Figure 2.14: Performance of all-elderly households / all-elderly households with all members aged 80 and above under the dimension of “Health / elderly care / social connection”

	All-elderly households	All-elderly households with all members aged 80 and above	Other households with elders	Overall households
Health / elderly care / social connection				
Proportion of households with elderly members requiring long-term care	24.2%	50.3%	27.2%	10.0%
Proportion of such elders having a carer	95.3%	96.8%	98.4%	97.3%
Proportion of elderly members who:				
had feelings of loneliness [#] during the week before enumeration	16.4%	28.4%	12.1%	14.1% ⁺
received community support / care services during the 12 months before enumeration	4.4%	10.1%	2.9%	3.6% ⁺
had a smartphone	86.2%	56.6%	89.5%	88.0% ⁺
had used the Internet during the 12 months before enumeration	81.5%	44.8%	86.1%	84.0% ⁺

Notes:(#) Had felt lacking companionship, left out, or isolated from others during the week before enumeration.

(+) Proportion in the overall elderly population.

Sources: Data on long-term care needs and carers came from C&SD's 2021 Population Census, while other data came from C&SD's Thematic Household Survey on Health, Elderly Care and Social Inclusion of Elderly Persons in 2024.



The above analysis shows that the primary difficulties faced by all-elderly households are not financial and housing-related; instead, increasingly more elders need other support (including care and medical and health services, community care, digital literacy and application skills, etc.). The needs of elders in their late years warrant more particular attention. These elders generally have to face gradual deterioration of physical health, as well as the accompanying anxiety, fears and sense of helplessness in their later years. Alongside the decline in self-care abilities, they will inevitably be less active socially, and this will directly affect their quality of life. Changing their lifestyles, or re-adapting to new ones as they age, will also affect their self-esteem and values, as well as their psychological and emotional well-being. **The above analysis reflects that the older cohorts may need more care and support from the community. In addition, with increasing digitalisation in the society, the older cohorts may find it difficult to understand and use complex digital technology. Providing appropriate support for the elders in need (e.g. on using smartphones to receive the latest information, making appointments for government services through online platforms, etc.) can facilitate their inclusion into a digitalised society.** The performance of macro indicators pertaining to all-elderly households / all-elderly households with all members aged 80 and above under the multidimensional analytical framework is detailed at **Annex 3**.





Targeted Poverty Alleviation Schemes

Based on the multidimensional analyses outlined above, and with reference to the recommendations of the Commission on Poverty (CoP), the Government launched a series of targeted poverty alleviation schemes for the three target groups, all aimed at improving the sense of belonging, achievement and satisfaction of the members of these groups.

Households Residing in Subdivided Units Strive and Rise Programme

Drawing on tripartite collaboration between the Government, the business sector and the community, the Government launched the Strive and Rise Programme (the Programme), which was the first of its target poverty alleviation initiatives, providing support to secondary school students from underprivileged families (particularly those living in Subdivided Units (SDUs)). The Programme is designed to help student participants broaden their horizons, build self-confidence, develop a positive outlook on life, set goals for their future, and strive to achieve upward mobility, with the ultimate goal of lifting these students out of intergenerational poverty.



The Chief Secretary for Administration Mr Chan Kwok-ki attended Strive and Rise Programme (Third Cohort 2025) Graduation Ceremony. In the photo, Mr Chan Kwok-ki (back row, third left), the Secretary for Labour and Welfare Mr Chris Sun (back row, third right), the Secretary for Home and Youth Affairs Miss Alice Mak (back row, second left), the Acting Secretary for Education Dr Jeff Sze (back row, second right), the Director of Social Welfare Mr Edward To (back row, first right) and the Acting Director of Home Affairs Ms Belinda Wong (back row, first left) witnessed the Graduation Ceremony of mentees.

Chapter 2 Targeted Poverty Alleviation Strategy and Impact of Targeted Schemes

Under the Programme, mentees are paired with mentors with rich life experience, who interact with the mentees and share their life experience. The mentors help mentees explore personal development possibilities and positive financial planning concepts, and guide them as they develop personal goals and action plans in a proactive and positive manner. The Programme also offers mentees \$10,000 in financial support (including a start-up sum of \$5,000 and a scholarship of \$5,000) to help them make good use of financial resources and use the financial planning skills they acquire to achieve their personal development plans under their mentor's guidance. The Programme arranges diverse group activities aimed at broadening mentees' horizons, including museum visits, I&T-related activities, visits to different types of companies and enterprises, star mentor exchange sessions and Chinese Mainland study tours.

Upon successfully completing the one-year intensive foundation training, the mentees automatically become members of the Alumni Club, where they can continue to expand their horizons and social networks. The Alumni Club also helps them to prepare for the employment market, through participation in a range of activities, career talks and job tasting/internship programmes for two years. The Alumni Club also encourages high-potential alumni to contribute to the Programme by sharing their experience with younger mentees, and eventually even becoming mentors themselves. This process enables mentees to continuously benefit from the Programme as they work to achieve their long-term goals.

Launched in 2022, the Programme rolled out its fourth cohort in 2026, with approximately 14 000 targeted secondary school students and 10 000 mentors having been recruited by the end of March 2026. It has received support from numerous enterprises and organisations in arranging over 2 000 group activities with over 100 000 attendances in total (including mentees, mentors and parents). The Programme has organised over 50 Chinese Mainland study tours for about 3 000 places. On top of this, the alumni co-ordinator has arranged over 5 000 orientations and other activities specifically for alumni to continue to broaden their horizons and sustain the Programme's effectiveness, along with a five-day internship experience for about 540 alumni over the age of 16.



The Chief Secretary for Administration Mr Chan Kwok-ki and members of the Hong Kong Patriotic Education Heilongjiang Study Tour under Strive and Rise Programme paid a visit together at The Exhibition Hall of Crime Evidence of Japanese Army Unit 731.



The Secretary for Labour and Welfare Mr Chris Sun was chatting with mentees who participated the Sichuan Study and Exchange Tour under the Strive and Rise Programme.



The Chief Secretary for Administration Mr Chan Kwok-ki was chatting with mentees at Future Scientist, Love Science and Exploration activity under Strive and Rise Programme.

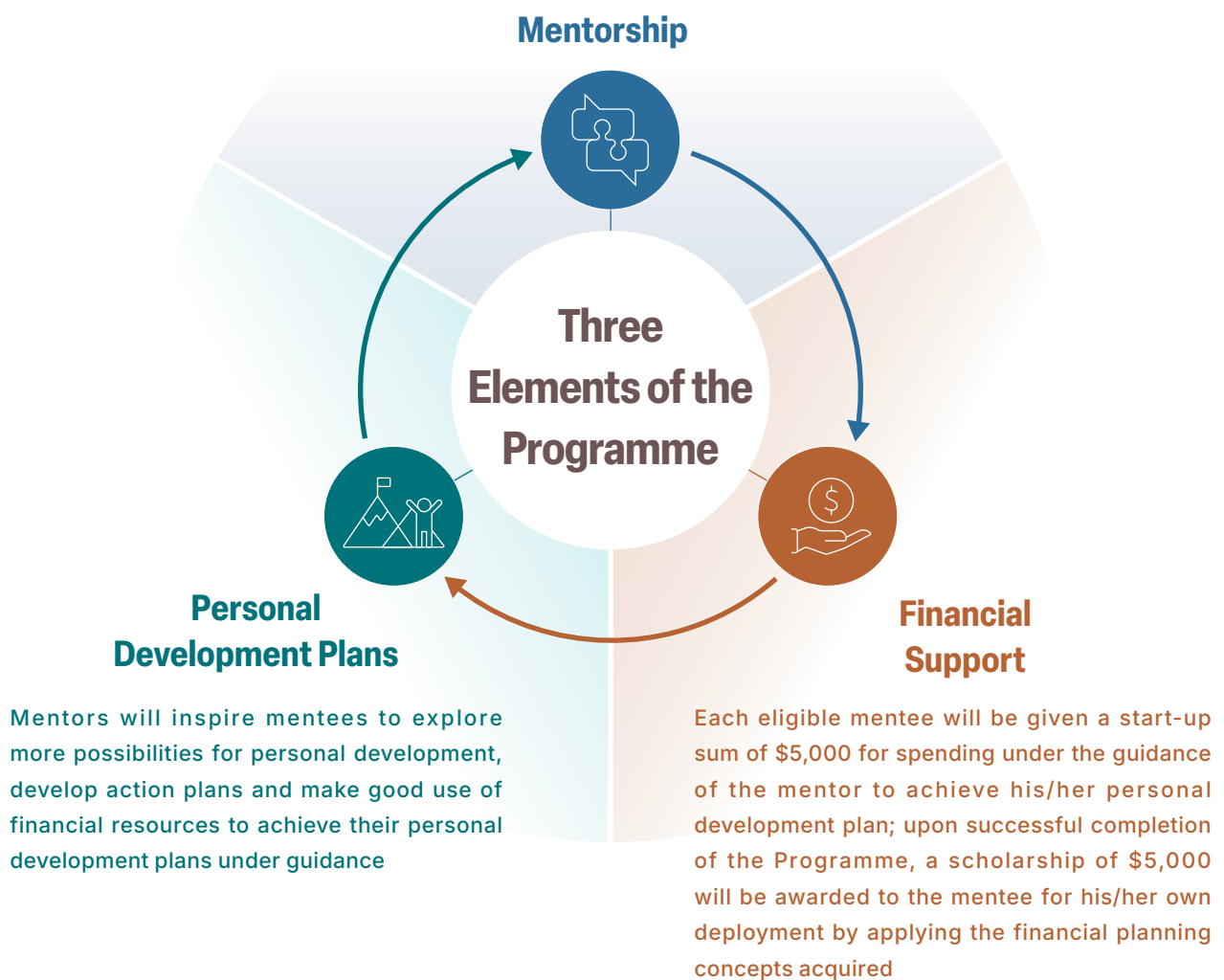


The Secretary for Labour and Welfare Mr Chris Sun interacting with mentees of Strive and Rise Programme during lunch time while convening the Kick-off Ceremony of Hong Kong Youth Sees Qianhai: Connecting Hearts Strive and Rise cum visit to Qianhai International Exchange and Cooperation Platform.

Continuous Enhancement of the Programme

To assess the Programme's effectiveness, the Government engaged a research team from The Hong Kong Polytechnic University to evaluate the first three cohorts, and referenced the research team's evaluation results and recommended improvements before launching new cohorts. For instance, for the second cohort, the Government drew on experience from the first cohort and increased the number of mentees to 4 000, expanded coverage to include Secondary 4 students, enriched the variety of group activities (such as by adding more study and exchange tours to the Chinese Mainland), and introduced mentorship groups. For the third cohort, the Government provided a blend of online and offline training courses and programmes for mentors to enhance their training and support. A dedicated mobile application was also launched containing videos on various topics for mentors to learn from according to their own experience and learning needs. The video topics include youth growth and development, special educational needs, multiculturalism, and communication with young people and parents. The Programme also arranges interactive training programme for mentors, aimed at strengthening their skillsets and giving them opportunities to share their experience with other mentors.

Mentees will each be paired up with a volunteer mentor who will share his/her life experience to help the mentees build up their self-confidence and guide them to develop their personal goals in a proactive and positive manner; the mentors will also assist their mentees in developing positive financial planning concepts and applying effectively the financial support provided under the Programme. On top of the one-on-one matching, two or three mentor-mentee pairs will form a mentoring group to enhance mutual sharing and support throughout the mentoring process



Pilot Programme on Community Living Room

Drawing on cross-sector collaboration, the Government launched the Pilot Programme on Community Living Room (CLR) to provide targeted support for SDU households. For this programme, the business sector provides venues and the Community Care Fund provides funding for non-governmental organisations to operate the CLRs. The CLRs not only provide SDU households with additional living space, they also help members establish and expand their interpersonal networks, thereby both enhancing their living standards and their sense of community belonging. The amenities and services provided by the CLRs include the following:

Extra living space: Essential facilities include shared living rooms, pantries, study/learning rooms for students, and washing machines and dryers. Depending on the size of the CLR, additional facilities may be made available, such as showers, children's play areas and reading corners, sports facilities and social activities, all designed to meet the daily needs of SDU households and improve their quality of life.



Shared dining room (Nam Cheong CLR)



Shared living room (Sham Shui Po East CLR)



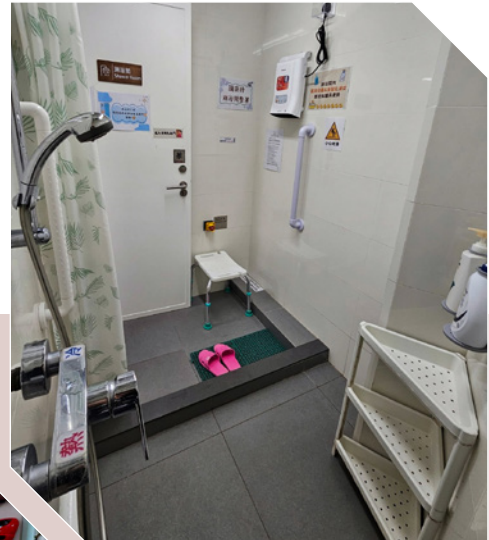
Shared pantry (Shau Kei Wan CLR)



Exercise facilities (Prince Edward CLR)



Group activity area (Ma Tau Kok CLR)



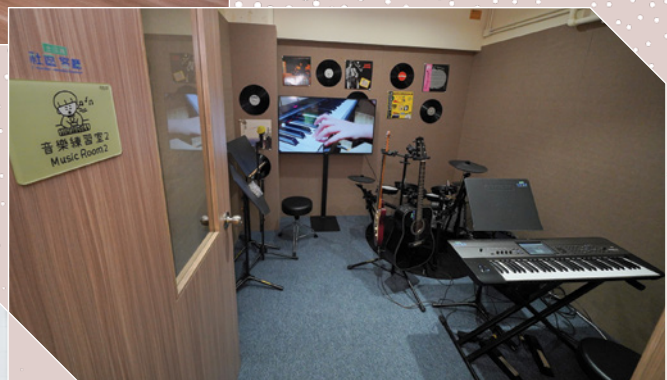
Shower facilities (Hung Hom CLR)



Children's playing corner (Ko Shan Road CLR)



Self-service washing and dryer machines (Sham Shui Po CLR)



Music room (To Kwa Wan CLR)

Community support: Essential services include student homework guidance and referrals to appropriate community services (e.g. integrated family service centres, integrated children and youth services centres, and neighbourhood elderly centres) depending on the individual needs of SDU households. Other support services may include the provision of information and talks on diet and nutrition, health and sports, home safety, hygiene and community resources.



Community resources talk

Caring and sharing: The CLRIs facilitate the giving of in-kind donations (e.g. food and food coupons) and the provision of voluntary services by businesses and local organisations.



The business sector and local organisations were engaged to provide in-kind donations



The first CLR was opened in December 2023, and since then the Government has rolled out a total of 11 CLRIs up to the end of March 2026. The first five CLRIs have now operated for over a year, serving nearly 3 000 SDU households and recording a total of over 1.18 million visits. The Government plans to launch at least four more CLRIs by the end of 2026. These, together with the existing CLRIs, are expected to serve about 7 000 target households, with approximately 1.4 million visits per year.



CLRs launched under the Pilot Programme

As at 31.3.2026

CLRs in operation for over a year		
Actual service figures		
CLR	Actual number of SDU households served (Expected number)	Actual number of attendances (Expected attendance)
1. Sham Shui Po CLR (Sham Shui Po District)	903 (500)	Over 520 000 (80 000)
2. Hung Hom CLR (Kowloon City District)	467 (400)	Over 280 000 (60 000)
3. Nam Cheong CLR (Sham Shui Po District)	561 (250)	Over 70 000 (40 000)
4. To Kwa Wan CLR (Kowloon City District)	681 (600)	Over 220 000 (90 000)
5. Shau Kei Wan CLR (Eastern District)	331 (330)	Over 80 000 (50 000)
Sub-total	2 943 (2 080)	Over 1 180 000 (320 000)
CLRs in operation for less than a year		
(Only expected figures)		
CLRs	Expected number of SDU households served	Expected number of attendances
6. Ko Shan Road CLR (Kowloon City District)	500	80 000
7. Sham Shui Po East CLR (Sham Shui Po District)	500	80 000
8. Prince Edward CLR (Sham Shui Po District)	500	80 000
9. Ma Tau Kok CLR (Kowloon City District)	350	52 000
10. Sai Ying Pun CLR (Central and Western District)	230	37 000
11. Mong Kok CLR (Yau Tsim Mong District)	500	80 000
Sub-total (Estimated figure)	2 580	409 000

Single-parent households

School-based After School Care Service Scheme

The Government implemented the School-based After School Care Service Scheme (the Scheme) from the 2023/24 school year with the support of the CoP, in order to help single parents with the care of their young children. The Scheme enables primary students in need (particularly those from single-parent families) to remain at school in a safe and familiar environment outside school hours for care and learning support, thus enabling their parents to undertake work and improve their quality of life.



The Chief Secretary for Administration Mr Chan Kwok-ki learnt more about the implementation of the Scheme. The Secretary for Labour and Welfare Mr Chris Sun and the Acting Secretary for Education Dr Jeff Sze also joined the visit.

Participating schools and service operators provide after school care and homework tutorials for students under the Scheme, helping them to finish their homework and revision work at school as far as possible. This alleviates parenting and caregiving pressures on parents, and helps them unlock their potential to undertake work. After homework tutorials, some social development activities, such as group games, are also offered. These are aimed at relieving students' academic stress, enhancing exchanges among peers, fostering communication and teamwork, and boosting the participants' learning and social skills.

The scheme operates from after school until 6 p.m. from Monday to Friday, and may be extended to 7 p.m. if school conditions permit. If there is sufficient demand, the Scheme also provides six hours of service per day on Saturdays and Sundays, so that working parents do not have to rush from work to pick up their children, enabling them to consider working full time or extending their part-time hours. The Scheme also provides parental guidance and education aimed at improving parent-child relationships and alleviating parental stress.

During its first year, the Scheme recruited 59 primary schools in Kowloon City, Yau Tsim Mong, Sham Shui Po, Kwun Tong, Kwai Tsing, Tsuen Wan and Yuen Long Districts. It provided nearly 3 000 service places in the 2023/24 school year. Following positive feedback after its launch, the Government expanded the Scheme in the 2024/25 school year to cover all 18 districts in Hong Kong, recruiting 126 primary schools and providing around 5 900 service places. For the 2025/26 school year, the Government uncapped the number of places in order to further expand support for primary students and parents in need. As at the end of March 2026, the Scheme had recruited over 200 primary schools, and was providing over 10 500 service places.



The Chief Secretary for Administration Mr Chan Kwok-ki led members of the Fifth-term CoP to visit a school participating the Scheme, learning more about the implementation of the Scheme. The Secretary for Labour and Welfare Mr Chris Sun, the Under Secretary for Home and Youth Affairs Mr Clarence Leung, and the Under Secretary for Education Dr Jeff Sze also joined the visit.



The Chief Secretary for Administration Mr Chan Kwok-ki made a site visit and learnt more about the implementation of the Service Scheme, took a close look at students doing homework and revisions under the guidance of instructors.



A teacher recruited by service providers was instructing students to complete their homework at school.

All-elderly households

District Services and Community Care Teams - Scheme on Supporting the Elderly and Carers

The CoP recognises that all-elderly households (which include households with one, two or three or more older persons) often lack interpersonal support networks, meaning that they need to deal with various problems on their own. This can bring immense pressures as elderly households grapple with issues such as worries about deteriorating health, difficulties in adapting lifestyle changes after retirement, and weakened financial capacity. They may experience a gradual detachment from society amid rapid social developments, and lack of understanding of their needs by families, relatives, friends, and wider society. All these issues may bring on a sense of isolation and helplessness among older adults, with some even becoming “hidden” as a result.

To tackle these issues, in March 2024, the Government engaged the District Services and Community Care Teams (Care Teams) in Tsuen Wan and Southern Districts as pilots to implement the Care Teams – Pilot Scheme on Supporting Households of Singleton/Doubleton Elderly and Carers of Elderly/Persons with Disabilities (Pilot Scheme). Under the Pilot Scheme, the Care Teams worked to identify households of singleton/doubleton elderly and the carers of elderly persons and persons with disabilities in need through visits or contacts, and referred these cases to social welfare service units for follow-up. The Care Teams also helped elderly persons and persons with disabilities in need to arrange for the installation of emergency alarm systems in their homes to boost support and reduce the risk of accidents. Given positive feedback on the Pilot Scheme, the Government extended the services to all 18 districts of Hong Kong in April 2025.

After consolidating data from the Hong Kong Housing Authority and SWD, the Government established the Carer Support Data Platform in July 2025. This platform is used to identify high-risk cases (e.g. singleton/doubleton elderly individuals, carers of elderly persons and carers of persons with disabilities) and to help establish a more robust community support network. With Kwun Tong and Sha Tin Districts as pilots, the Care Teams conducted household visits to high-risk cases identified by the data platform. The Scheme was expanded to cover all districts of Hong Kong in September 2025.



The Deputy Chief Secretary for Administration Mr Cheuk Wing-hing officiated at the Kick-off Ceremony of District Services and Community Care Teams - Scheme on Supporting Elderly and Carers. The Secretary for Labour and Welfare Mr Chris Sun, the Permanent Secretary for Labour and Welfare Ms Alice Lau, and the Director of Social Welfare Mr Edward To also joined the Ceremony. Photo shows Mr Cheuk Wing-hing (front row middle), Mr Chris Sun (front row, eighth right), Ms Alice Lau (front row, eighth left) and Mr Edward To (front row, seventh right) and other guests, District Officers/Representatives of the 18 Districts, District Social Welfare Officers and Care Teams members taking group photo.



The Chief Secretary for Administration Mr Chan Kwok-ki (centre) and then Permanent Secretary for Home and Youth Affairs Ms Shirley Lam (second right), together with representatives from the District Services and Community Care Team (Sai Kung), visited an elderly singleton family in Po Lam Estate, where they chatted with her and celebrated the festive joy together.

Impact of Targeted Poverty Alleviation Schemes

The three targeted poverty alleviation schemes – the Strive and Rise Programme, the Pilot Programme on Community Living Room and the School-based After-school Care Service Scheme – have continued to receive support from all sectors of society since their launch. To further monitor their progress and effectiveness, the Government commissioned a university research team to conduct a comprehensive evidence-based analysis grounded in scientific theory and data. This research examines the extent to which the schemes have positively enhanced citizens' living standards and well-being. The review findings are helping the Government monitor and evaluate the effectiveness of its targeted poverty alleviation efforts at the micro level, while providing a systematic and credible references for determining the way forward for the three schemes. The review examined whether the schemes effectively enhanced the sense of belonging, achievement and satisfaction of members of the target groups. Its evaluation methods included comparing the beneficiaries before and after their participation in the schemes and noting changes. The review also analysed outcomes based on the Key Performance Indicators (KPIs) established by the Government for the respective schemes.

Strive and Rise Programme:

No less than 70% of mentees who completed the Programme to achieve improvement in terms of personal development and positive thinking.



Pilot Programme on Community Living Room:

No less than 70% of service users to experience an enhancement in their living space, sense of belonging to the community and interpersonal networks after using the Community Living Room.



School-based After School Care Service Scheme

(1) No less than 70% of the beneficiary students to indicate that the School-based After-school Care Service Scheme provides them more appropriate care and learning support; and

(2) No less than 70% of parent/guardian beneficiaries to indicate that the School-based After-school Care Service Scheme helps reduce their child care pressure and allows them to consider seeking/taking up jobs.



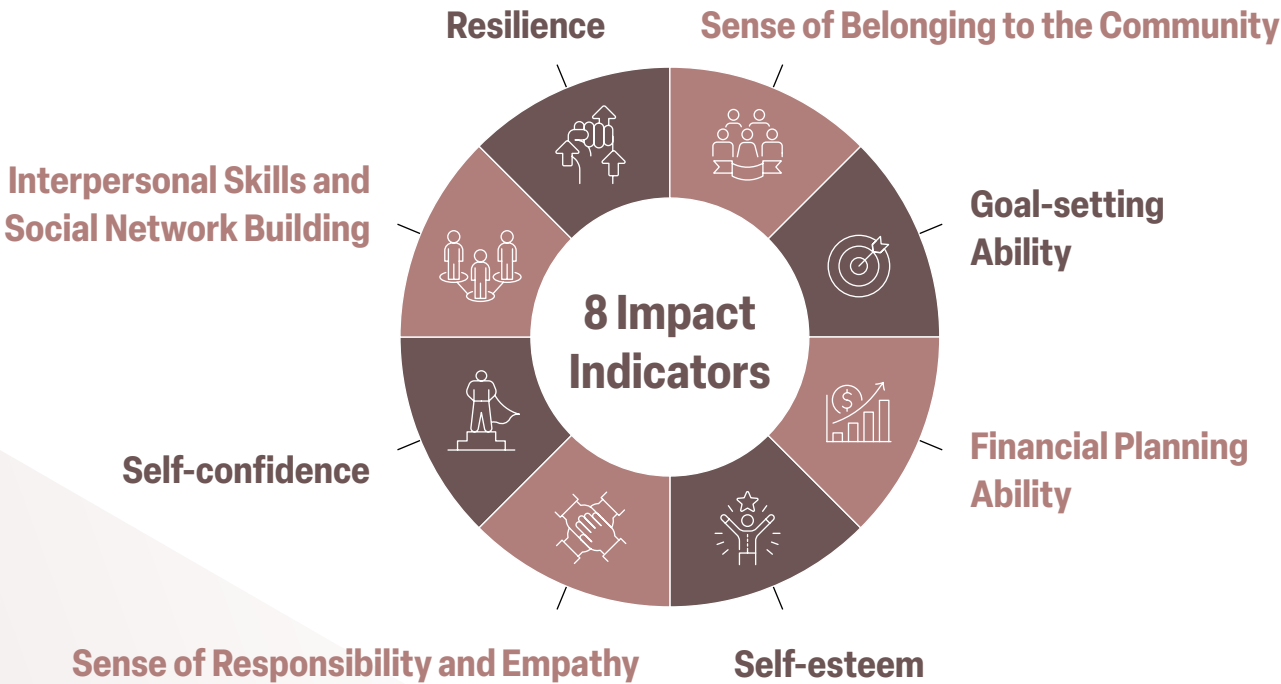
Strive and Rise Programme

The university research team conducted evaluations of the first and second cohorts in 2023 and 2024 respectively. Now entering the evaluation of the third cohort, the university research team has continued to adopt a mixed-method approach that combines quantitative and qualitative reviews. Mentees are asked to complete questionnaires for self-assessment before and after participating in the Programme, while mentors and parents evaluate the mentees' performance across eight selected impact indicators (namely goal-setting ability, financial planning ability, interpersonal skills and social network building, self-confidence, self-esteem, resilience, sense of responsibility and empathy, and sense of belonging to the community). In addition, interviews are conducted to collect qualitative data, which is then integrated with the quantitative data for more in-depth analysis.

The findings from all three cohorts indicate that mentees perceived improvements across all the selected impact indicators, with parents and mentors concurring that mentees made progress in every indicator. Mentees rated themselves as showing the most significant improvement in four impact indicators: financial planning ability, goal-setting ability, interpersonal skills and social network building, and sense of belonging to the community. Parents identified the most notable improvements in financial planning ability, interpersonal skills and social network building, sense of belonging to the community, and resilience. Mentors observed marked progress in the mentees across all eight impact indicators.

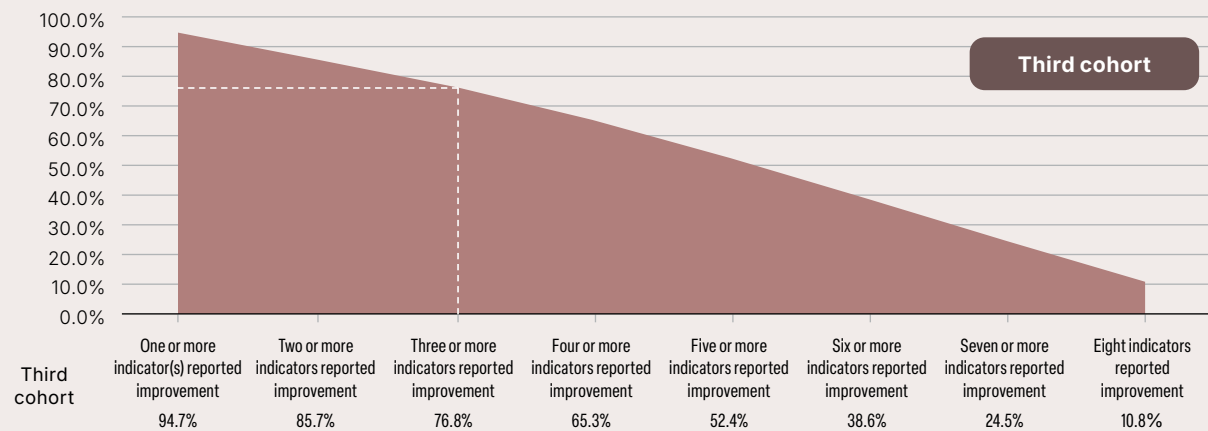
The evaluation of all three cohorts of the Programme showed that over 70% of mentees experienced improvements in three or more indicators. The research team found that mentees in the third cohort demonstrated greater improvement across all eight indicators than those in earlier cohorts, reflecting the positive impact of the added enhancement measures.

Synthesising both the quantitative and qualitative data, the team found that the Programme had a significant positive impact and notable benefits for the personal growth and whole-person development of young people from underprivileged families. The research provides empirical support to underpin the Government's continued implementation and enhancement of the Programme in the future. In addition, the research team is conducting five-year longitudinal interviews with selected mentees, parents and mentors to track the developmental changes of mentees after completing the Programme. This will provide the Government with longer-term analytical data to support continuous improvement of the Programme and help mentees break the cycle of intergenerational poverty.



Research Result

Mentees in the third cohort recorded continuous enhancement across all eight impact indicators



Wide-spread achievement

Over 90% mentees reported improvement on at least one indicator(s)

First cohort: 93.5%; second cohort: 94.0%; **third cohort: 94.7%**

Multidimensional growth

Over 70% mentees reported improvement on at least three indicator(s)

First cohort: 70.4%; second cohort: 73.4%; **third cohort: 76.8%**

Strive and Rise Programme Mentee Sharing

Sharing from student Pan

I am 16 years old, and in Secondary Three. I come from a grassroots family, and live with my parents and younger brother in a subdivided unit. Though I have a keen interest in music, the high cost of tuition always meant I was unable to pursue music studies further. Having recently arrived in Hong Kong, I was initially unfamiliar with the people and things here. As a result, I gradually became reluctant to try new things or express myself, and spent most of my spare time at home.

My decision to join the Strive and Rise Programme was driven by the hope of broadening my horizons, using the Programme's start-up fund to support my musical interests, engaging in in-depth exchanges with my mentor, and formulating a personal development plan. All of these would help me build the confidence to pursue my dreams.

The Programme has lived up to my expectations. I was paired with a mentor from the Chinese Mainland who works in Hong Kong. My mentor, family and social workers encouraged me to take part in group visits organised under the Programme, such as one to the Hong Kong Monetary Authority and another to a symphony concert. I was also selected to join the "Strive and Rise Choir", giving me the chance to pursue my musical interests and also boosting my self-confidence, helping me overcome the disappointment of having previously been unsuccessful in an audition for my school choir. In recognition of my outstanding performance in the Programme, I was nominated for the "Hainan Space Technology Experience Tour". Through that, I gained exposure to aspects of the social, economic and cultural development of our country, which has in turn broadened my career aspirations.

Through the Programme, I have been able to live out the belief I expressed in my application form: "Those who know are not as good as those who love; those who love are not as good as those who delight." Now that I am surrounded by a sense of hope, belonging and direction, I have become more outgoing and proactive. I now take part in more meaningful activities than I used to, and no longer prefer to stay at home and play video games. I have made friends with some like-minded mentees, and we are growing together. My mentor also meets with me regularly for face-to-face conversations and tutoring, and has encouraged me to work hard on my English. With the confidence and courage I have built up, I am now exploring new and different possibilities for my personal growth.

Participating in the Programme has allowed me to experience so many new things. It has truly been a precious turning point in my life journey.

Scan QR code to hear voices of mentees



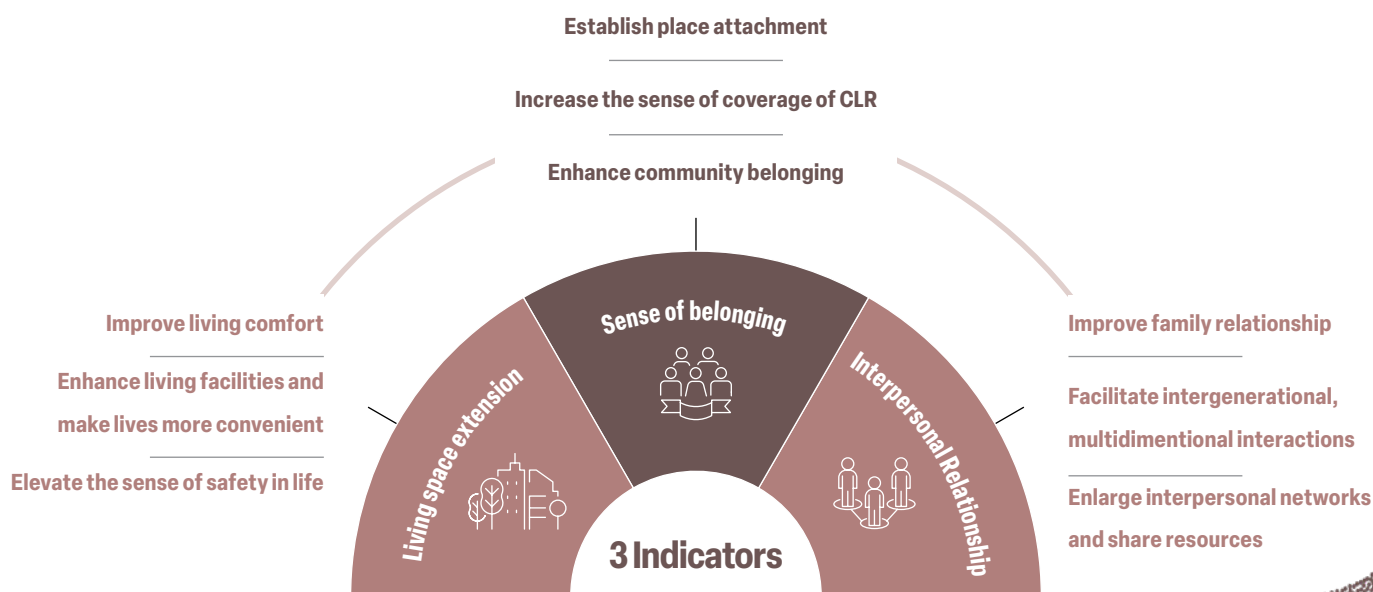
Pilot Programme on Community Living Room

For this programme, the university research team also adopted a mixed-method approach that combined quantitative and qualitative reviews. For the collection of quantitative data, active household members of the first six CLRs, located in Sham Shui Po, Hung Hom, Nam Cheong, To Kwa Wan, Shau Kei Wan and Ko Shan Road, were invited to complete questionnaires. Interviews were also conducted to gather qualitative data. The study focused on assessing the changes in CLR members following their participation in the scheme in three key areas: living space, sense of belonging and interpersonal relationships.

In gist, over 70% of CLR members reported improvements in all three areas of living space, community belonging and interpersonal networks. Approximately 95% of CLR members indicated an improvement in living space, demonstrating the effectiveness of CLR services in alleviating the stress of cramped living environments and improving living comfort. In terms of sense of belonging, over 95% of CLR members reported positive changes in their sense of social connectedness and community belonging, reflecting how the CLRs are gradually becoming a "second home" for many residents. On the interpersonal front, about 90% of CLR members reported strengthened social networks and support. The CLRs also serve as a platform for fostering parent-child relationships, as well as cross-generational and cultural integration.

The research team also found that the more frequently members in the survey visited the CLRs, the higher their scores were across various assessed indicators. This correlation was particularly pronounced in relation to extended living space, sense of belonging and interpersonal relationships (social support), reflecting the significant and direct positive impact of the scheme on SDU households.

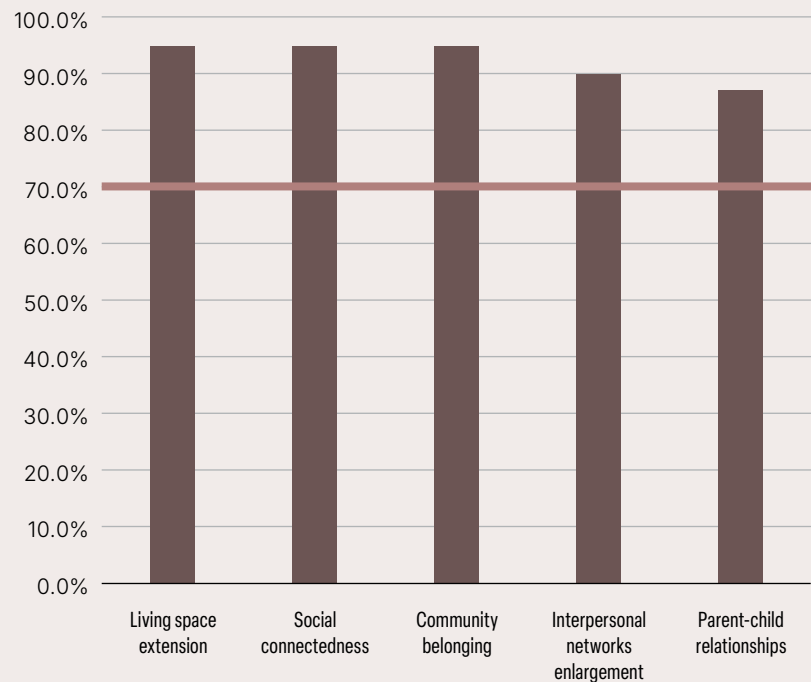
The Government is pleased to note that the CLRs have achieved notable success in improving the daily lives of SDU households and enhancing their sense of belonging and satisfaction, and will take on board the recommendations of the research team to improve the scheme, for instance by strengthening the support services for the largest member group of the CLRs, namely women aged 40 to 49. One example of such enhancement would be to provide dedicated vocational skills training for women.



Research Result

Pilot Programme on Community Living Room helps improve the quality of life of SDU households accurately in all aspects

CLR achieved over **70%** improvements in all 3 indicators (Living space extension, sense of belonging, interpersonal relationship)



Community Living Room Member Sharing

Sharing from Ms Pang

I am a housewife, and I live in an SDU with my husband, son and daughter.

We often visit the CLR to use facilities like the pantry, dining area, shower facilities and children's corner, as these are perfectly suited to our family's needs. In fact, my children are often reluctant to leave after we have visited. Here, we can cook, eat and bathe, taking care of all our daily necessities before heading home. It is incredibly convenient.

The children have a safe space to play at the CLR. The members here are also very warm and welcoming. Some even help to look after the children, so my husband and I can relax and chat about parenting with other parents.

The CLR has extended our living space and effectively given us a "home away from home". I often chat and share food with neighbours here; some of them have even taught me how to cook new dishes. We get along as if we have known each other for a long time, and we look out for one another in a process that has built up a lot of trust.

We are also very grateful that the CLR regularly organises various activities that enable us to enrich our lives in our free time. Through these activities, we are getting to know other members better, and strengthening our links with neighbours.

Scan QR code to hear voices of beneficiaries



Community Living Room Member Sharing

Sharing from Ms Wong

I am 64 years old and live with my husband. We used to reside in an SDU in Sham Shui Po, living the typical life of a household of two elderly people.

In the past, we were confined to our cramped SDU, which limited our daily lives and social activities quite significantly. Now that we are members of the CLR, we come here every day to cook and chat with neighbours. Sometimes we even team up with other families to buy ingredients and prepare soup together. In the evening, we gather like one big family to share a meal, in an atmosphere of warmth and harmony. It's like we have gradually built a small community, where everyone helps and cares for each another. My husband, who used to stay at home all the time, has now become much more outgoing and sociable.

The members affectionately call me the "Community Grandma", as I look after members of all ages at the CLR. When I learned that the working hours of one of the mothers here were irregular, I began helping her take care of her child by preparing meals, picking up her child from school, and accompanying the child to different activities. Our bond has gone beyond that of merely being neighbours.

CLR staff also regularly share information about transitional housing and organise visits. That's how I came to learn about the housing support applicable for me. I asked the social worker at the CLR to help me with a referral application. Not long afterwards, I was notified that my application was successful, and experienced an immense sense of relief and happiness as a result.

Scan QR code to hear voices of beneficiaries



School-based After School Care Service Scheme

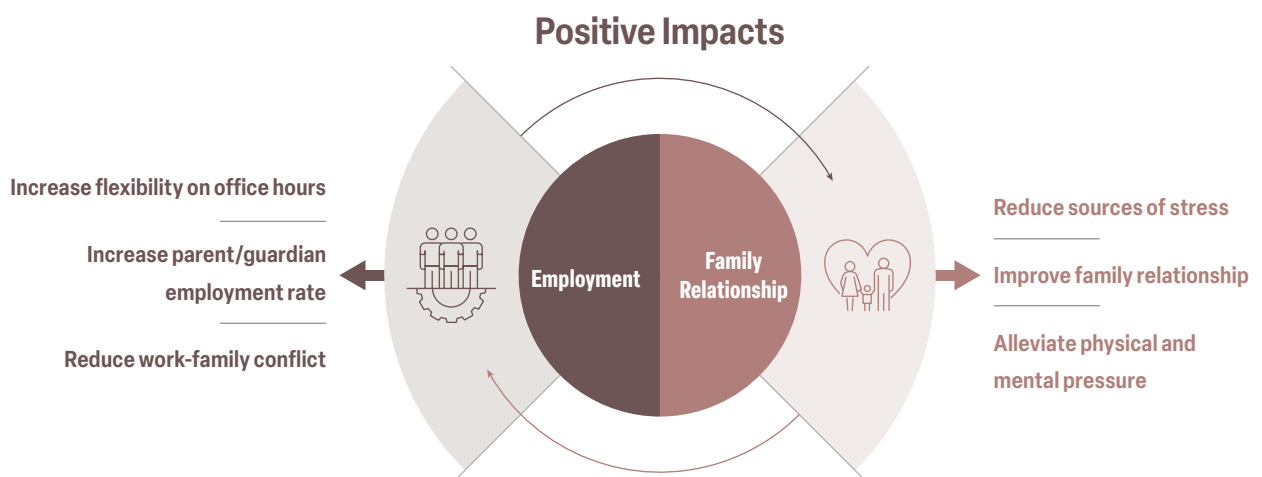
In reviewing this Scheme, the university research team adopted a similar mixed-method approach combining quantitative and qualitative research. Quantitative data was collected through surveys with students, parents, teachers, service operators and tutors, while interviews were conducted to collect qualitative data. The review focused on two main areas: (i) the impact of the Scheme on students' learning support, whole-person development and parent-child interaction, and (ii) whether the Scheme alleviated caregiving pressure on parents and guardians, and the effect of any such alleviation on their employment participation and family roles.

The quantitative findings revealed a high degree of consistency across different stakeholders. It showed that the Scheme had a notably positive effect on learning support, with 99% of parents reporting that the Scheme had effectively reduced the time their children spent on homework at home. In terms of whole-person development, 91% of students indicated that participating in the Scheme helped them make new friends and 88% that it helped them discover personal interests, reflecting the learning support and the fostering of students' mental well-being that the Scheme provides.

The Scheme has also had a notable impact in support of parental employment. A total of 97% of parents and guardians reported that the Scheme had alleviated the impact of their family responsibilities on their work performance. According to the data, the average monthly household income of families increased by approximately \$3,500 after participating in the Scheme. Among parents and guardians who were full-time homemakers prior to joining the Scheme, 21% successfully entered the workforce after their children took part in the Scheme. Of those who were previously unemployed, 55% secured employment. The Scheme has been particularly effective in relieving parents' caregiving stress, with over 97% of parents reporting reduced conflicts with their children and notable reductions in financial pressure, physical burdens, emotional stress and time-management challenges.

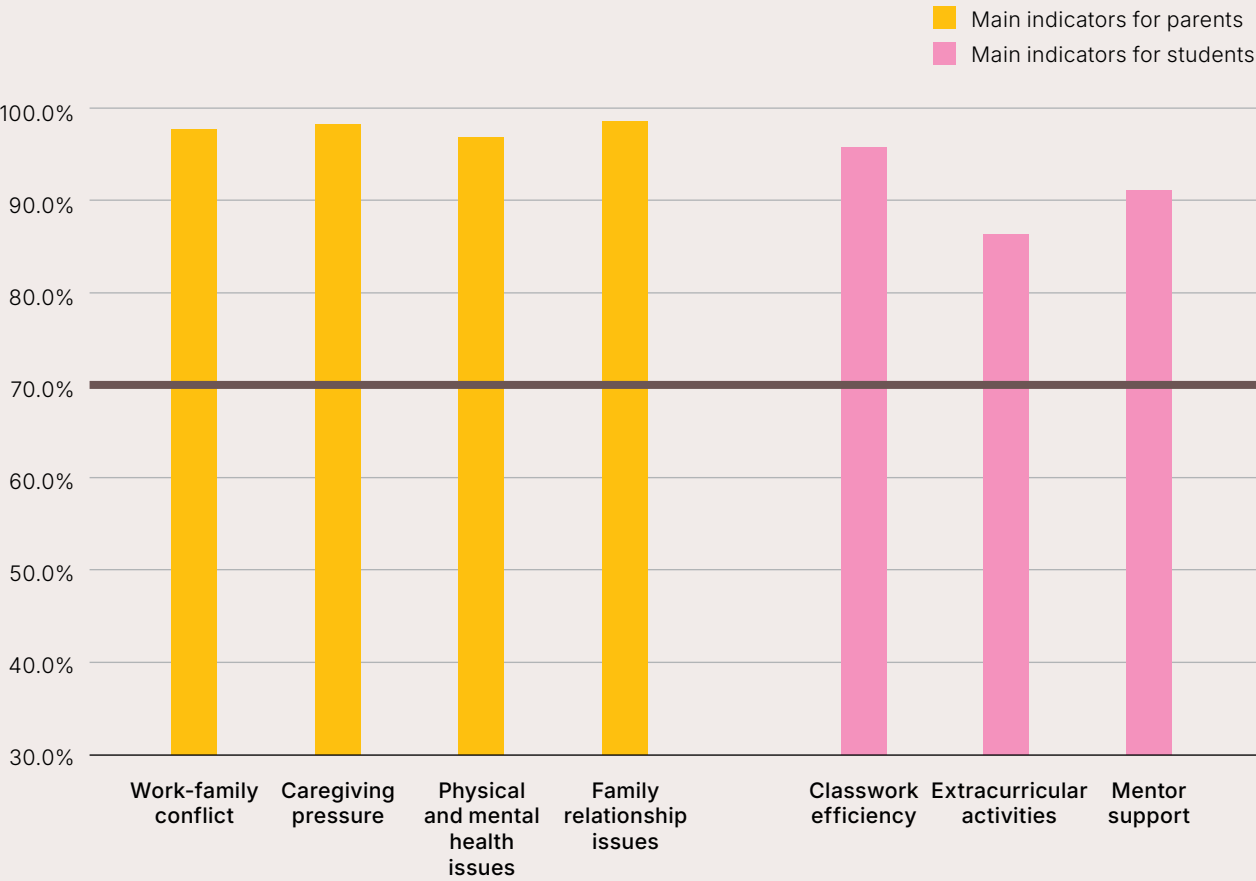
Both the quantitative and qualitative findings indicate that the Scheme met and in some cases surpassed the preset 70% benchmark across all KPIs, and had a positive impact on the mental well-being of both students and parents, and on parent-child relationships and family financial circumstances. To maintain and expand its support for parents and students in need, the Government will continue to implement the Scheme and encourage more schools to participate.

The research team identified commonalities between the Scheme and the existing School-based After-school Learning and Support Programmes (SALSP). Both schemes provide corresponding services tailored for the different needs of students and parents, but they complement each other by fulfilling distinct roles. Specifically, SALSP offers students learning experiences beyond the classroom designed to enhance their whole-person development, while the Scheme focuses on homework guidance and after-school care services, to facilitate the participation of parents in the workforce. To foster further synergies between the two schemes, the Government will flexibly coordinate various after-school learning activities and resources, while also enhancing communication with schools and parents to encourage greater participation in the Scheme.

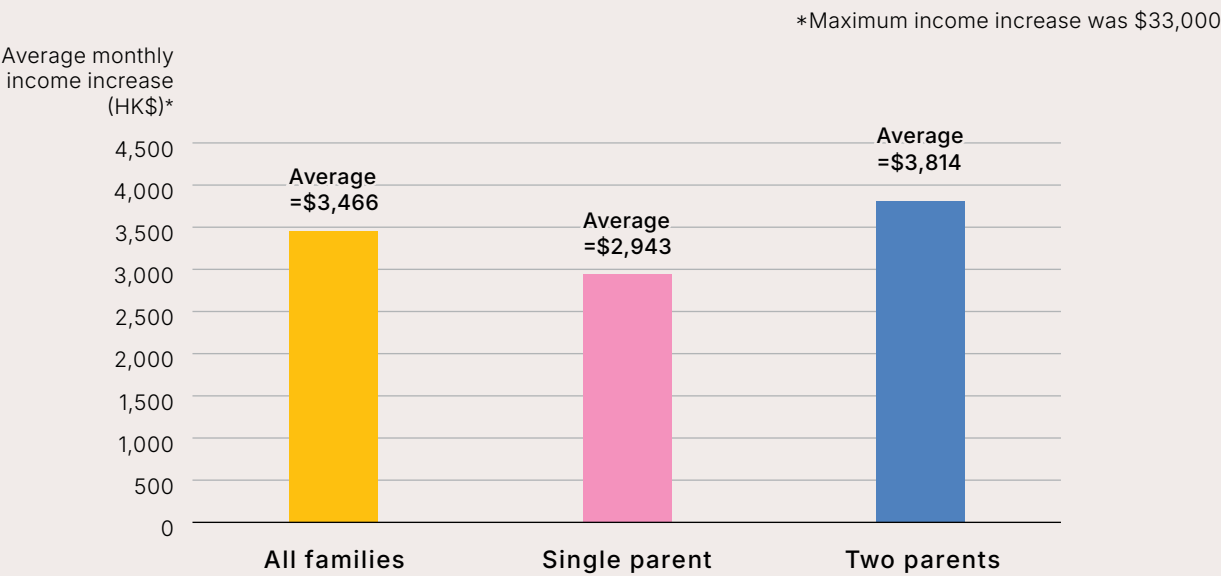


Research Result

Over 70% parents/guardians or students reflected improvements on all indicators



Significant improvement on income for parents/guardians who participated the Scheme



School-based After School Care Service Scheme Participants Sharing

Sharing from Ms Chan

I am 45 years old, a single mother, and the sole carer for both my 10-year-old son, who has ADHD, and my nine-year-old daughter, who has learning difficulties and attention deficit issues. To support my family, I work at a convenience store about nine hours a day, four days a week, with varying shift schedules. The pressures created by this arrangement are immense, and I often experience a roller-coaster of emotions.

When the school became aware of my situation, they referred my two children to join the Scheme. With patient guidance from the tutors, my children have gradually become more willing to ask questions and learn, and their academic skills have improved significantly. My daughter now completes her homework diligently and communicates well with her tutors, while my son's academic performance has progressed noticeably. In addition, both children are more open to participating in social and developmental activities, including group games, board game sessions and special interest classes like bread-making. Through their involvement in these activities, they have learnt to get along with their peers and developed better cooperation skills. Their social abilities and self-confidence have also grown steadily.

The Scheme has been very effective in reducing the pressure of taking care of children, enabling me to take care of my children after work when their homework has already been completed. I have time to play with them at home now, and we have closer parent-child relationships. As a result, my emotions are more stable, I feel a sense of relief, and I am able to focus on work better.



Sharing of Ms Hui

My son suffers from hyperactivity disorder and needs regular medication. Before enrolling in the Scheme, I enrolled him in another childcare service. However, he was frequently bullied and laughed at by his classmates there. That made him often get depressed and even led to self-harm episodes, for example scratching his feet or banging his head against the wall.

Later, due to work commitments, I transferred him to the Scheme. After joining the programme, my son became much happier and made many more friends at school. The mentor was also very kind and even organised birthday parties for him. It's clear that the mentor was very dedicated to helping my son, for instance by encouraging him to get involved in sports activities. My son has even asked to return to daycare during the holidays.

Scan QR code to hear
voices of participants



District Services and Community Care Teams – Scheme on Supporting Elderly and Carers

From its launch up to the end of March 2026, Care Teams have visited or contacted over 109 800 households in need under the Pilot Scheme, to identify household needs and offer care and support services aimed at enhancing the well-being of these households, particularly elderly households. Through these visits and contacts, the Care Teams have made over 13 600 service referrals, as well as referring over 3 500 households for the installation of subsidised Emergency Alarm Systems. These statistics indicate the effectiveness of the Scheme in providing targeted assistance that responds to the diverse needs of households requiring support.

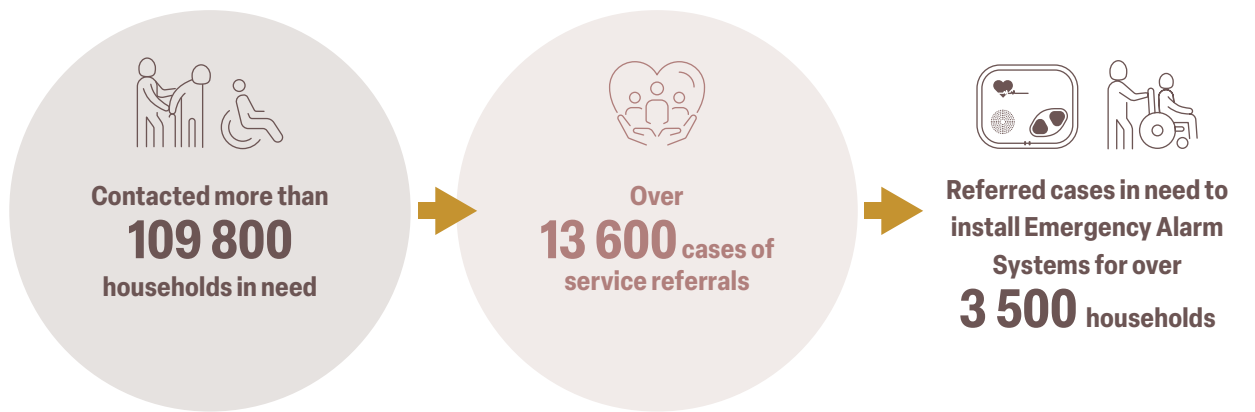
High-risk cases identified through the Data Platform are also referred to Care Teams for follow-up. As at the end of March 2026, Care Teams had visited over 34 900 high-risk households and referred over 2 400 cases to social welfare service units.



Through their daily contact with households in need, Care Teams are able to identify elderly households suffering from a lack of care and interpersonal support. Many beneficiaries of the scheme have affirmed that the visits and phone calls alone have made them feel less isolated and helpless. These, together with the support and service referrals provided by the Care Teams, are proving very effective in addressing their daily difficulties. The Government will continue to utilise the Care Teams to identify and support families with special needs.



District Services and Community Care Teams – Scheme on Supporting Elderly and Carers



* As at end-March 2026

District Services and Community Care Teams – Scheme on Supporting Elderly and Carers Beneficiary Sharing

Sharing from Ms Lau

I am 93 years old and have limited mobility, so I need a walking frame to get around. My 64-year-old son, who lives with me and whose daily care I am fully responsible for, has a disability in both his legs and receives a Disability Allowance. With my advanced age, I was worried about my declining health and the long-term care arrangements for my son. The Care Team reached out to us and began to make regular visits, as well as introducing us to various social welfare services. They helped me register as a member of a district elderly centre and apply for the Integrated Home Care Services (which includes cleaning and meal delivery), and also helped arrange for an Emergency Alarm System to be installed in my flat with subsidy support. Now that I have household assistance and care support in place, I have more time to rest and look after myself better. At the same time, my son's long-term care needs have been better secured, which has given me greater peace of mind about the future and significantly eased my daily living stresses.

Scan QR code to hear
voices of beneficiaries



Since the Chief Executive announced in the 2022 Policy Address that the current-term Government would adopt the targeted poverty alleviation strategy, the CoP and the Government have worked hand in hand to implement some significant targeted poverty alleviation measures. This has involved researching and identifying the target groups for targeted poverty alleviation, launching and continuously optimising various initiatives tailored for the needs of these groups, and reviewing the outcomes and progress of each initiative. The three major initiatives undertaken – namely, the Strive and Rise Programme, the Pilot Programme on Community Living Room, and the School-based After School Care Service Scheme – have all met the requirements of their KPIs, and have exceeded expectations for some indicators. The positive results of these initiatives have further grounded the poverty alleviation efforts of the Government and the CoP at the micro level. They are also complementing various Government policy measures at the macro level designed to alleviate, combat and prevent poverty. The following chapters elaborate on these macro-level policy measures and the poverty alleviation effects associated with them.

Chapter 3

Impact of Macro Policy Measures on Poverty Alleviation, Combating and Prevention



The Government invests substantially every year in macro policy areas such as education, healthcare, housing, social welfare and employment services. In financial year 2026-27, the Government projected over \$350 billion in recurrent expenditure on education, health and social welfare, accounting for approximately 60% of total recurrent government expenditure. The estimate for public expenditure on housing was \$64.5 billion.

The Government optimises resources to proactively implement policy measures under the four macro policy areas to enhance manpower quality, safeguard the health of citizens, and provide basic services and infrastructure. The execution of these policies “empowers” society to achieve self-reliance and provides a “safety net” for low-income families. This Chapter elaborates how these policy measures help alleviate, combat and prevent poverty in accordance with each macro policy area, complemented with real-case sharing from beneficiaries.



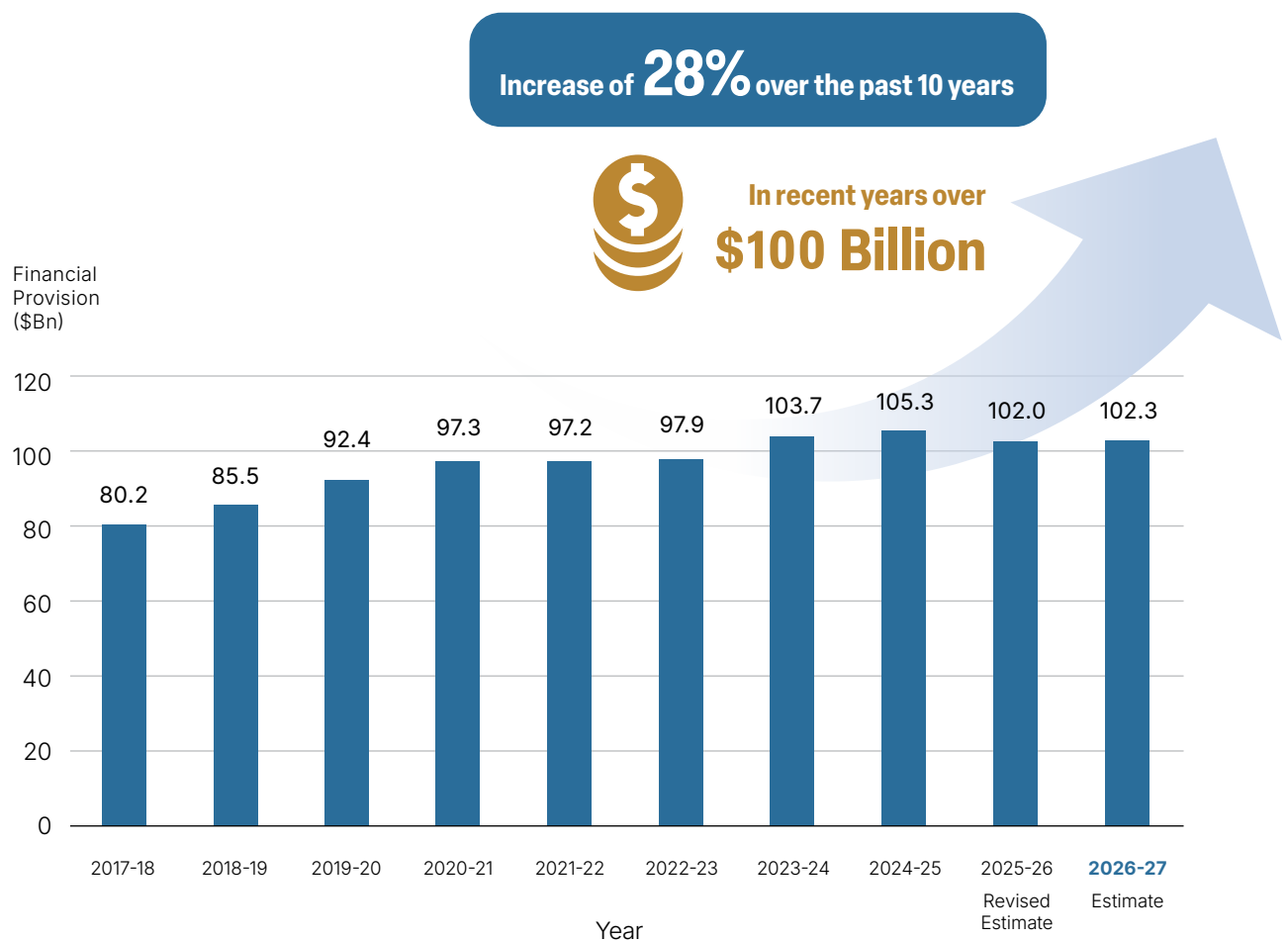
Impact of Macro Policy Measures on Poverty Alleviation, Combating and Prevention: Education



Education is the Key to a Hundred-year Plan

Quality and equitable education is the cornerstone of high-quality development and social advancement, playing a role in “empowering” society to achieve self-reliance. The Government is committed to enhancing the quality of education, enabling students to acquire knowledge and skills and nurturing them to become a new generation with insight, aspirations, competitiveness and a strong will to strive ahead, thereby paving the way for their future development.

The Government has been investing heavily in education. The recurrent expenditure on education is \$102.3 billion in Financial Year (FY) 2026-27, or 17.1% of the total recurrent government expenditure. The recurrent expenditure on education has, over the past ten years (i.e. from FY 2017-18 to FY 2026-27), increased by 28%. This demonstrates the Government’s determination and commitment to investing in education.



Chapter 3 Impact of Macro Policy Measures on Poverty Alleviation, Combating and Prevention

Based on the FY 2024-25 figures (as tabulated below), the Government invested about **\$2.5 million** in each student across his/her 19 years of education¹ in aided schools and universities.

Resources provided per student (2024-25)		
	Kindergartens and Kindergarten-cum-child care centres under the Kindergarten Education Scheme	\$54,490 / student
	Aided primary schools	\$86,330 / student
	Aided secondary schools	\$99,040 / student
	University Grants Committee (UGC)-funded universities	\$281,300 / student

The Government provides additional student financial assistance to students in need to cover their tuition fees, study-related expenses, and so forth. Based on the full-grant rate of various student financial assistance schemes in the 2024/25 Academic Year (2024/25 AY) (as tabulated below), each student with financial needs² could receive additional financial assistance of approximately \$500,000 throughout his/her 19 years of education from pre-primary to bachelor's degree level. Together with the previously mentioned general educational resources, the total financial support amounts to around **\$3 million**.

Additional Financial Assistance for Needy Students ² (2024/25 AY)		
	Pre-primary education	Kindergarten and Child Care Centre Fee Remission ³
		\$41,020
	Primary and Secondary education	Grant for School-related Expenses for Kindergarten Students
		School Textbook Assistance
		Student Travel Subsidy ³
		Subsidy for Internet Access Charges
	Post-secondary education	Examination Fee Remission (Secondary 6) ³
		Tuition Fees Grant
		Academic Expenses Grant
		Hostel Subsidy and Travel Subsidy
		\$42,100 ⁴
		\$8,660 - \$54,320 ⁵
		\$14,932 ⁶

1. This includes three years in kindergartens and kindergarten-cum-child care centres under the Kindergarten Education Scheme, 12 years in aided primary and secondary schools, and four years in University Grants Committee (UGC)-funded universities.
2. Students who pass the family income/assets tests of the related student financial assistance scheme.
3. The calculation was based on the fee remission ceiling under the Kindergarten and Child Care Centre Fee Remission Scheme. As the amounts of the student travel subsidy and examination fee remission depend on the districts in which the students reside and study, and the subjects taken in the relevant examinations, the subsidy amount stated above is based on the average disbursed amount for the respective items.
4. The maximum amount for students studying in UGC-funded bachelor's degree programmes.
5. Depending on the disciplines and levels of study.
6. Sum of the maximum hostel subsidy (i.e. \$10,420) and the average amount of the travel subsidy for post-secondary students (i.e. \$4,512).

Number of Students Who Benefitted under Free/Subsidised Education (2024/25 AY)

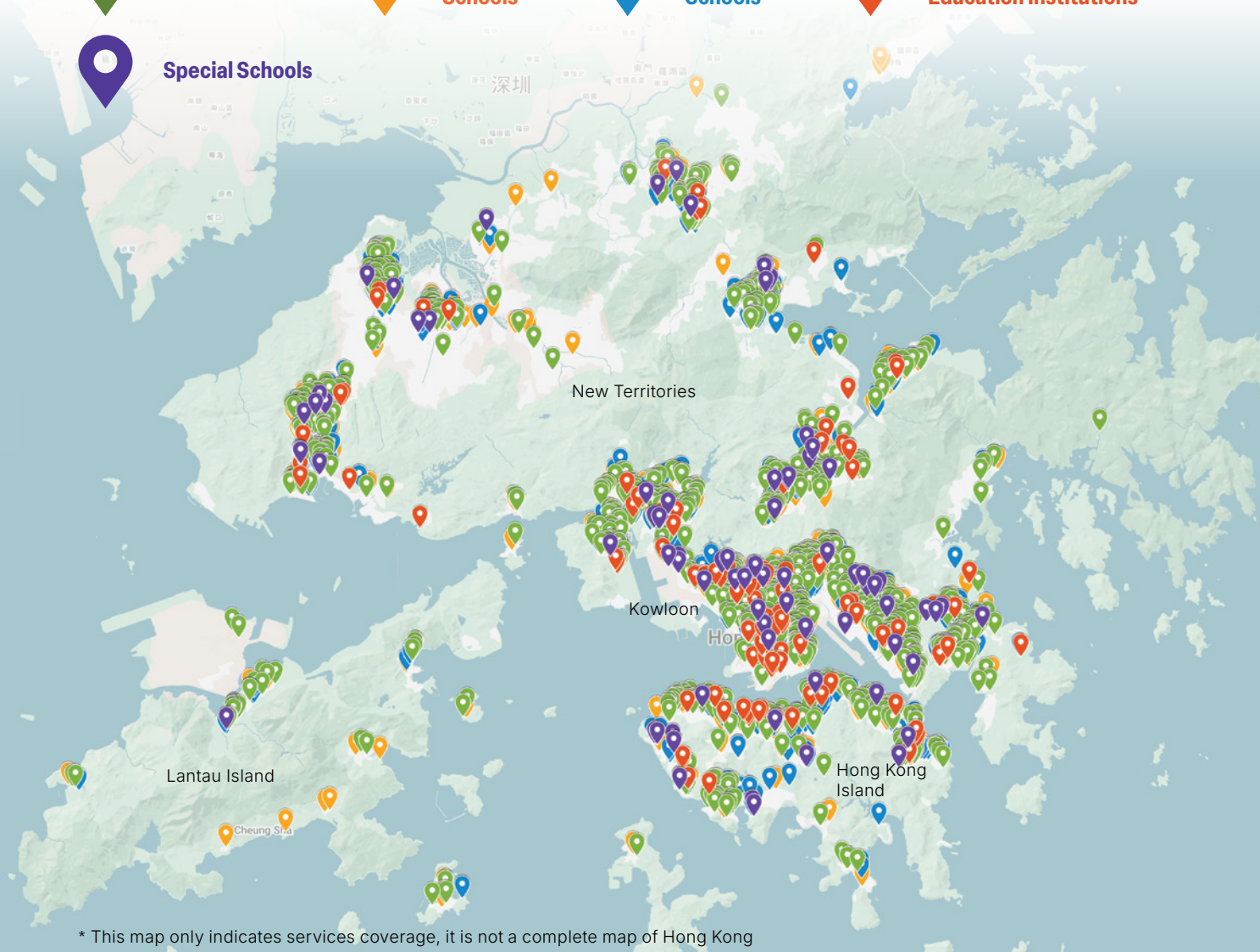
Kindergartens Joining the Kindergarten Education Scheme	94 298
Publicly Funded Primary Schools ¹	270 564
Publicly Funded Secondary Schools ¹	314 674
Publicly Funded Post-secondary Education ²	168 044
Total	847 580

1. Covered public sector ordinary schools, direct subsidy scheme schools and special schools.
2. Includes UGC-funded courses, pre-employment subvented courses provided by the Hong Kong Academy for Performing Arts and the Vocational Training Council, the Financial Assistance Scheme for Post-secondary Students and self-financed courses, and the "Study Subsidy Scheme for Designated Professions/Sectors".

Coverage of each education stage

 **Kindergartens**
 **Primary Schools**
 **Secondary Schools**
 **Post-secondary Education Institutions**

 **Special Schools**



* This map only indicates services coverage, it is not a complete map of Hong Kong

Lifelong Journey in Education

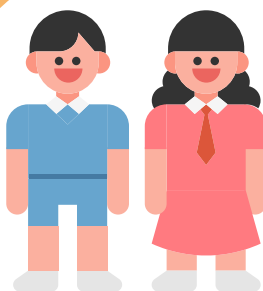
The Government fully utilises the resources invested to comprehensively support student learning across all stages of their educational journey, empowering their growth and preparing them for the future:

Age

0

3

12



Kindergartens

- Kindergartens and Kindergarten-cum-Child Care Centres Joining the Kindergarten Education Scheme
- Kindergarten and Child Care Centre Fee Remission Scheme
- Grant for School-related Expenses for Kindergarten Students

Primary Schools

- Public Sector Primary Schools
- Free Lunch at Schools (Primary Schools)

6



Primary and Secondary Schools

- School Textbook Assistance Scheme
- Student Travel Subsidy Scheme
- Subsidy Scheme for Internet Access Charges
- School-based After-school Learning and Support Programmes
- Special Educational Needs Coordinator
- Learning Support Grant
- Life-wide Learning and Sister School Grant
- Student Activities Support Grant
- Mainland Exchange and Study Tours
- Quality Education Fund e-Learning Funding Programme — Provision of Mobile Computer Devices and Internet Services Support
- School-based Educational Psychology Service
- Enhanced School-based Speech Therapy Service
- 4Rs Mental Health Charter
- Mental Health Literacy Resource Package
- Curriculum Framework on Parent Education (Primary and Secondary Schools)

Secondary Schools

- Public Sector Secondary Schools
- Business–School Partnership Programme
- Examination Fee Remission Scheme (Hong Kong Diploma of Secondary Education Examination/Non-local Chinese Examination)



15

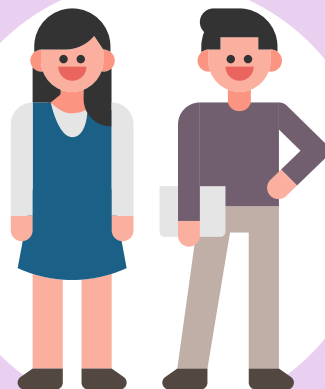


Secondary 3 or above

- Vocational Training Council (VTC) (Secondary 3 or above)

Post-Secondary/ Further Education

- UGC-funded Universities
- Study Subsidy Scheme for Designated Professions/Sectors
- Scholarships for Outstanding Performance
- Hong Kong Future Talents Scholarship Scheme for Advanced Studies
- Tertiary Student Finance Scheme - Publicly-funded Programmes
- Financial Assistance Scheme for Post-secondary Students
- Student Travel Subsidy for Tertiary or Post-secondary Students
- Non-means-tested Loan Scheme for Full-time Tertiary Students
- Non-means-tested Loan Scheme for Post-secondary Students
- Extended Non-means-tested Loan Scheme
- Diploma of Applied Education/Diploma Yi Jin Tuition Fee Reimbursement
- VTC Tuition Fee Remission Scheme and Flat Rate Grant for Academic Expenses
- Financial Assistance Scheme for Designated Evening Adult Education Courses
- Mainland Experience Scheme for Post-Secondary Students
- Funding Scheme for Mainland and Global Engagement and Student Learning Experience



18

Impacts of Education to Alleviate, Combat and Prevent Poverty

The Government implements the following education macro-policy measures to help alleviate, combat and prevent poverty:

- Free education for knowledge advancement; opportunities (Please refer to Annex 1 for details);
- Additional student financial assistance and subsidies to break intergenerational transmission of poverty;
- Promoting digital education to bridge the digital divide;
- Promoting special education and integrated education to support students in need; and
- Vocational and professional education and training to develop skills and promote employment;
- Enhancing students' mental health and promoting parent education.
- Broadening horizons and expanding development

Free Education Kindergarten Education Scheme

The Kindergarten Education Scheme was implemented in the 2017/18 school year, with the policy objectives of providing good quality and highly affordable kindergarten education, while improving accessibility to various services to meet students' specific needs.

In the 2024/25 school year, 734 kindergartens joined the Kindergarten Education Scheme, accounting for 97% of eligible kindergartens. Among them, approximately 90% of the half-day programmes were free of charge. For whole-day programmes, the additional subsidy from the Government helped maintain school fees at a low level.

Free Primary and Secondary Education

The Government provides 12 years of free primary and secondary education through public sector schools (including government and aided schools). In the 2024/25 school year, there were nearly 450 public sector primary schools and nearly 400 public sector secondary schools in Hong Kong.

Publicly-funded Post-secondary Education

The Government and the UGC are committed to working with institutions and members of the community to ensure that Hong Kong students receive excellent, diverse and internationalised higher education. This effort aims to cultivate high-calibre talent in response to societal needs and industry trends, thereby driving the robust development of Hong Kong's economy and society. The number of intake places for UGC-funded first-year, first-degree programmes and senior-year undergraduate programmes remains at 15 000 and 5 000, respectively, per AY during the 2025-28 triennium.

To attract additional outstanding local and non-local students to pursue studies in Hong Kong, the Government offers "Scholarships for Outstanding Performance" to recognise the exceptional performance of both local and non-local students enrolled in publicly funded, full-time undergraduate and sub-degree programmes in Hong Kong.

Additionally, starting from the 2025/26 AY onwards, the Government launched the “Hong Kong Future Talents Scholarship Scheme for Advanced Studies” to attract more local students to pursue postgraduate studies in priority areas that are conducive to Hong Kong’s development, thereby expanding the pool of high-calibre talent across various sectors and further establishing Hong Kong as an international hub for post-secondary education. Further details on post-secondary education are provided in Annex 2.

Learn more about
publicly-funded
post-secondary
education and student
finance schemes



Student Finance and Subsidies

Student Finance

In the 2024/25 AY, the Government disbursed approximately \$3.1 billion in grants and subsidies and \$260 million in low-interest loans to over 220 000 needy students at various education levels through ten means-tested student financial assistance schemes. The scope of financial assistance includes tuition fees and various study-related expenses, as detailed below:

Learn more about
student finance



Student Financial Assistance Scheme	Tuition Fees Grant	Grant for Study-related Expenses
Kindergarten and Child Care Centre Fee Remission Scheme	✓	
Grant for School-related Expenses for Kindergarten Students		✓
School Textbook Assistance Scheme		✓
Student Travel Subsidy Scheme		✓
Subsidy Scheme for Internet Access Charges		✓
Examination Fee Remission Scheme		✓
Diploma of Applied Education/Diploma Yi Jin Tuition Fee Reimbursement	✓	
Financial Assistance Scheme for Designated Evening Adult Education Courses	✓	
Tertiary Student Finance Scheme – Publicly-funded Programmes	✓	✓
Financial Assistance Scheme for Post-secondary Students	✓	✓

Note: Six assistance programmes provided under the Community Care Fund (namely, “Enhancement of the Flat Rate Grant under the School Textbook Assistance Scheme”, “Enhancement of the Financial Assistance for Needy Students Pursuing Programmes Below Sub-degree Level”, “Extra Travel Subsidy for Needy Special School Students”, “Providing Hostel Subsidy for Needy Undergraduate Students”, “Increasing the Academic Expenses Grant under the Financial Assistance Scheme for Post-secondary Students” and “Enhancing the Academic Expenses Grant for Students with Special Educational Needs and Financial Needs Pursuing Post-secondary Programmes”) have been incorporated into the regular student financial assistance schemes above.

Student Financial Assistance Scheme Beneficiary Cases Sharing

Sharing by Ms Chan

As a single mother of two, Ms Chan has been working part time to support her school-aged son and daughter alone. Ms Chan could only build up limited savings after making ends meet. Upon admission to university in 2024/25 AY, her son received full financial assistance under the Tertiary Student Finance Scheme — Publicly-funded Programmes.

In addition, her daughter, who is in Secondary 4, received school textbook assistance, student travel subsidies and subsidies for internet access charges. Such student financial support from the Government significantly relieved the financial burden of this single-parent family of three. Ms Chan hopes that her son will secure a steady job after graduating from university so that the family can enjoy better living conditions and move up the social ladder.

Ms Chan’s family received student financial assistance of \$73,312 in the 2024/25 AY.

Full level of assistance provided to her son	
Tuition fees grant	\$42,100
Academic expenses grant	\$10,560
Hostel subsidy	\$10,420

Full level of assistance provided to her daughter	
School textbook assistance	\$6,184
Student travel subsidy	\$2,348
Subsidy for internet access charges	\$1,700

A Non-Chinese Family with Four Children Share Their Story

The mother of this family, who is a homemaker, and the father, who works as a casual worker with unstable income, have been struggling under the heavy burden of household expenses. The student financial assistance granted for each of their children, studying from kindergarten through Secondary 6 has greatly relieved their educational burden. The family shared that although they were under heavy financial pressure, they firmly believed the quality education their children received would improve their financial and living conditions in future.

This family received student financial assistance of \$53,665 in the 2024/25 school year.

Full level of assistance provided to the four children	
School textbook assistance	\$15,748
Student travel subsidy	\$6,065
Subsidy for internet access charges (household basis)	\$1,700
Kindergarten fee remission	\$22,450
Grant for School-related Expenses for Kindergarten Students	\$4,460
Examination fee remission (Secondary 6)	\$3,242

Free Lunch at Schools

The Education Bureau (EDB) provides financially needy primary school students with free lunch at school, enabling them to enjoy balanced and substantial meals at school while relieving the financial burden on their families. In the 2024/25 school year, approximately 45 000 students benefited from this programme, with total funding amounting to about \$200 million.

Stakeholder testimonials on the Free Lunch at Schools programme

Sharing by a primary school teacher

This programme provides students with balanced nutrition and reflects the Government's care for them. During the pandemic, special arrangements under the Free Lunch at Schools programme were made for students to take their lunch boxes home. Quite a number of parents expressed gratitude as these 'timely' meals eased much of their stress.

Sharing by a primary school vice-principal

Some non-Chinese-speaking parents shared that their children were happy when eating at school. The programme provides free lunch for students and fosters the inclusion of non-Chinese-speaking students in the Hong Kong family.

Sharing by a primary school social worker

I was deeply moved by one student's family situation, which involved a disabled father and a mother who was the sole breadwinner. She had neither the time nor money to prepare lunch for her child. Thanks to the Free Lunch at Schools programme, she no longer had to worry about her child being hungry at school.



Scan the QR
code to listen to
the stakeholder
sharing



Vocational and Professional Education and Training

The Government promotes Vocational and Professional Education and Training (VPET) at different levels as a pathway parallel to conventional academic education through the strategy of fostering collaboration between industry and educational institutions and diversified development under a multi-pronged approach, the Government encourages partnerships that provide diversified learning and career opportunities to nurture quality talent with applied skills. Further information on VPET is set out in Annex 2.



Promoting the Development of Universities of Applied Sciences

In the 2023 Policy Address, the Chief Executive announced that the Government would press ahead with the establishment of universities of applied sciences (UASs) to provide an alternative pathway to success for young people who aspire to pursue careers in professional skills sectors. Following the Government's announcement of the criteria for becoming a UAS in February 2024, Hong Kong Metropolitan University (HKMU) and Saint Francis University (SFU), after successfully navigating the stringent procedures and accreditation process, became the first two UASs in Hong Kong.

The Government will continue to support the development of UASs, with a view to raising the status of VPET at the degree level. With Government funding of \$100 million, the UAS Alliance was established in November 2024 to strengthen institution–industry collaboration.

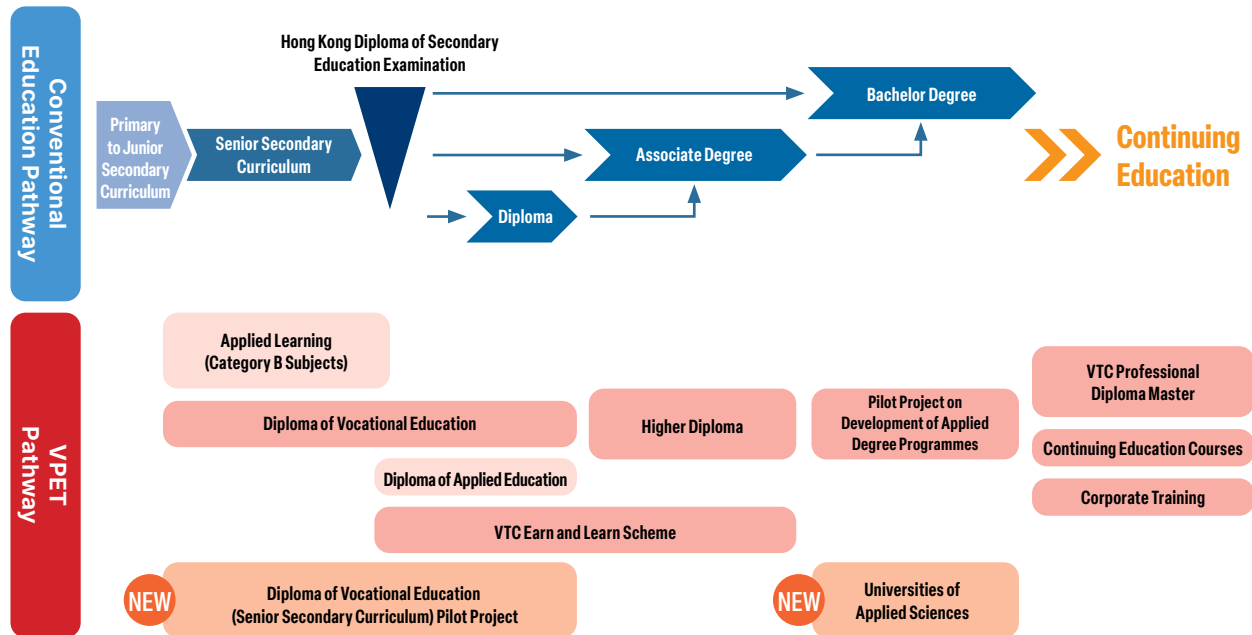


Recognition of VPET

VPET provides students with diversified articulation pathways from diploma to degree levels, enabling them to establish clear development directions and progression routes for further studies or employment. The average monthly salary of graduates in 2023/24 AY from the two UASs (HKMU and SFU) was \$24,363 and \$32,766, respectively. This indicates that VPET has developed in parallel with conventional academic pathways, offering graduates broad employment prospects and competitive remuneration in the job market.

With regard to the Vocational Training Council (VTC), in 2024, nearly 90% of Diploma of Foundation Studies graduates successfully articulated to Higher Diploma (HD) programmes, and HD graduates achieved an employment rate of 90%. Employers across industries have expressed strong recognition of VTC graduates, noting that they “possessed solid professional and communication skills and adaptability, and were able to quickly meet workplace demands.”

Multi-pronged approach to strengthen the VPET progression pathway



Stakeholder Sharing on Vocational Education

Sharing from a Student in the Diploma of Vocational Education (Senior Secondary Curriculum)

This programme covers various areas of information technology, which has deepened my understanding of VPET while clearly shaping my future pathways for further studies and career success.

Sharing from an IVE HD student and a THEi Bachelor's Degree Graduate

The HD programme was very career-oriented, combined with hands-on internships, enabling me to apply classroom knowledge in real-world settings. I joined a leading engineering consultancy as an Assistant Engineer and plan to pursue professional engineer registration in the future.

Sharing from a Parent of an HD Graduate

After completing an HD at IVE, my son received a scholarship to pursue bachelor's and master's degrees in the United Kingdom. Seeing him applying his knowledge in a career he is passionate about has brought me immense joy.

Sharing from an Industry Employer

The VTC's programmes have kept pace with industry developments, providing graduates with solid professional knowledge and skills. The industry is very willing to hire VTC graduates.

Scan the QR code to listen to sharing by Vocational Education Graduates



Promoting Digital Education

The Government has actively embraced the latest trends in Artificial Intelligence (AI), striving to promote digital education and continually updating the relevant curricula to enable students to learn about and apply AI. Regarding learning resources and teaching support, the Government has collaborated with Hong Kong Education City to promote the effective use of digital tools (including AI) in schools and to provide students with an online learning platform for knowledge and skills related to AI and computational thinking. In addition, through the e-Learning Ancillary Facilities Programme, funded by the Quality Education Fund (QEF), more than 20 high-quality e-learning platforms and tools have been progressively provided for schools to choose from to improve the effectiveness of learning and teaching.



To support schools in implementing the blended learning and teaching mode so that students with financial needs have equal opportunities to access e-learning, the EDB allocated \$1.5 billion in the QEF to launch a three-year e-Learning Funding Programme starting from the 2021/22 school year. Under the programme, public sector primary and secondary schools and schools under the Direct Subsidy Scheme may apply for funding to purchase mobile computing devices for loan to students in financial need. Schools may also provide portable Wi-Fi routers and mobile data cards to students who do not have adequate Internet access at home. The school sector responded actively to the programme, with about 700 schools participating in the programme each year, benefitting over 90 000 students since its launch. To continue supporting financially disadvantaged students in e-learning, the EDB extended the programme for three years up to the 2026/27 school year to allow sufficient time to collect more comprehensive data for formulating long-term measures to support needy students in e-learning.

Stakeholders have expressed high regard for this programme. According to a questionnaire survey conducted in early 2024, all participating schools agreed that the programme effectively supported the implementation of blended learning and teaching and met students' learning needs. They also considered the subsidy amount to be generally adequate and were broadly satisfied with the administrative workflow for implementing the programme, including the funding application procedures and arrangements for submitting the required documents.



Special Education and Integrated Education

The Government attaches great importance to supporting students with Special Educational Needs (SEN) and has continuously provided additional resources for diversified and comprehensive learning support for these students. In FY 2024-25, the Government's expenditure on special education and integrated education was approximately \$3.9 billion and \$4.1 billion, respectively.

The Government adopts a dual-track mode in providing Special Education (SE). Students with more severe or multiple disabilities are placed in special schools for intensive support, subject to the assessment and recommendations of specialists and the consent of parents. Other students with SEN attend ordinary schools. In the 2024/25 school year, about 67 870 students with SEN were enrolled in public sector ordinary primary and secondary schools.

In regard to SE, apart from the regular subvention, manpower, teacher training and professional support, the EDB also implemented a number of enhancement measures in recent years to provide special schools with additional resources, so that students with SEN could receive better education services. These measures included enhancing the staff provision of resource teachers for the primary and secondary sections of special schools, and extending the provision to schools for social development to facilitate the schools to provide students comorbid with autism spectrum disorder with additional support so as to help them learn effectively, develop their potential and integrate into the society; providing a one-off Grant on New Technology in Classroom to support special schools in using new technology to enhance the learning effectiveness of students and enable them to develop abilities in different areas; providing a one-off Improvement of Care and Support Grant to support special schools in acquiring technological products, special furniture/equipment and procurement of relevant services to improve the care and support of students and boarders, as well as better safeguard their safety and alleviate the burden and pressure on caregivers, etc.

With regard to Integrated Education (IE), on top of regular subvention, the EDB has been providing schools with additional resources, professional support and teacher training. Currently, all public sector ordinary primary and secondary schools are provided with a Special Educational Needs Coordinator (SENCO) post and the Learning Support Grant as well as additional regular teaching posts offered as appropriate to support the implementation of IE. All public sector ordinary schools have also implemented the School-based Educational Psychology Service and the Enhanced School-based Speech Therapy Service to support schools in catering for students' diverse educational needs.

“Funding for Ordinary Schools to Arrange Special Educational Needs Coordinators”

Community Care Fund Pilot Scheme and Subsequent Enhancement Arrangements

In the 2015/16 school year, the EDB initiated a three-year pilot scheme in 124 ordinary primary and secondary schools through funding from the Community Care Fund, to assess the impact of establishing the role of SENCO on promoting the Whole School Approach to IE.

With the positive impact of the pilot scheme, starting from the 2017/18 school year, EDB gradually provided all public sector ordinary primary and secondary schools with an additional teaching post on the staff establishment, designated for the role of SENCO to strengthen the implementation of IE.

Starting from the 2019/20 school year, the EDB implemented a series of enhanced measures on IE, including upgrading the post of SENCO in schools with a comparatively large number of students with SEN to enable them to perform their leadership duties more effectively.

Currently, all public sector ordinary primary and secondary schools are provided with a SENCO designated to assist in planning, coordinating and promoting the IE in order to foster a more inclusive school culture and enhance the effectiveness of support. In the 2024/25 school year, a total of 839 SENCO posts were established in public sector ordinary schools, supporting approximately 67 870 students with SEN. The expenditure was around \$970 million.

Learn more
about SENCO



Sharing from Stakeholders on “Funding for Ordinary Schools to Arrange Special Educational Needs Coordinators”

Sharing from a SENCO

SENCOs have to be highly perceptive in addressing the needs of every student. For instance, when I noticed that one of our students with multiple SEN needed additional support, we immediately arranged a joint meeting so that relevant teachers, the school-based educational psychologist, his parents and the family social worker could discuss support strategies tailored for his SEN. We also liaised with organisations in the community to solicit suitable after-school support resources for him, and introduced to his parents various services offered by social welfare organisations in the district, such as parent seminars, training and counselling services. This facilitated all-round support for the student.

Sharing from a Primary School Principal

The shared goal and vision of the SENCO's team and me is to provide early support to address students' learning and personal development needs and to help students experience the joy of school life.

Sharing from a Secondary School Teacher

Our curriculum covered professional requirements involving substantial content that requires memorisation. I regularly discuss with the SENCO on how to support and accommodate the SEN of students.

Sharing from a School-based Educational Psychologist

All professionals collaborate closely to support our students. For example, I review the school-based support strategies with the student support team to jointly optimise school policies and the arrangements of the "3-Tier Intervention Model".

Sharing from a Parent

The SENCO is committed to promoting mutual support among parents, such as arranging parents to participate in mindfulness activities that help relieve stress, and encouraging them to share insights on how to nurture their children and complement the school support.



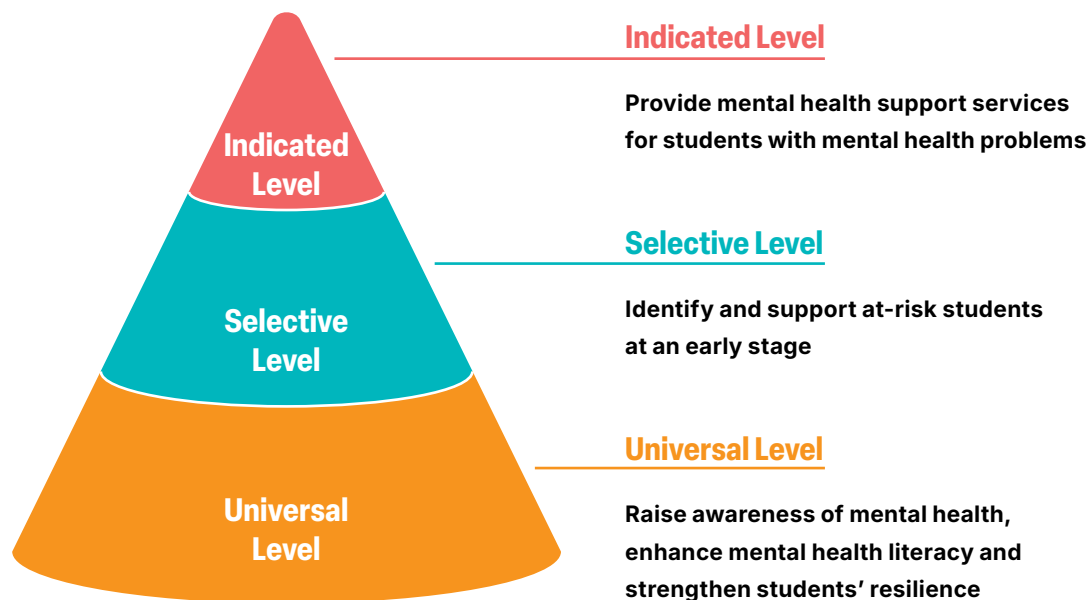
Learn more
about integrated
education



Promotion of Student Mental Health and Parent Education

“Whole School Approach”: Three-tier Support Model

The EDB encourages schools to adopt the Whole School Approach directed at three levels, namely Universal, Selective and Indicated, to promote mental health amongst students and to enhance support for students with mental health needs.



At the Universal Level, schools should raise the awareness of mental health and enhance mental health literacy among students, teachers and parents. This includes early detection of students in need, strengthening students' resilience and mental health, and reducing the stigma associated with help-seeking behaviour. At the Selective Level, schools should emphasise enhancing identification and support for at-risk students. At the Indicated Level, schools should ensure students with mental health problems, including those with mental illness, receive timely and appropriate mental health support services. (For more measures and resources, please refer to Annex 3.)

Witnessing the Achievements of Education

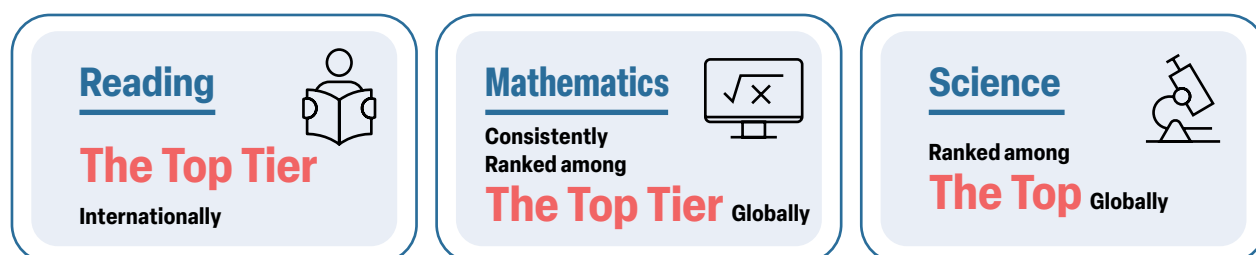
Outstanding International Performance of Hong Kong Students

Hong Kong uses the results of international studies and assessments as one of the indicators to holistically understand Hong Kong students' learning abilities and the factors that affect their learning. These include the "Progress in International Reading Literacy Study" (PIRLS), the "Programme for International Student Assessment" (PISA) and the "Trends in International Mathematics and Science Study" (TIMSS). We drew on the successful experience of countries and regions with outstanding performance to enhance the effectiveness of teaching and learning, preparing students to compete globally. Overall, Hong Kong students have excelled in various international studies and assessments, consistently ranking among the highest tier globally.

In reading, the PIRLS 2021 results showed that Hong Kong students ranked second among all participating countries/regions, placing them in the highest tier internationally.

In mathematics, Hong Kong students had consistently excelled, ranking among the top five globally. In PISA 2022, 15-year-old students in Hong Kong ranked fourth among all participating countries and economies. And the TIMSS 2023 results showed that Hong Kong's P4 and S2 students ranked fourth and fifth, respectively among all participating countries and regions.

Hong Kong students have also demonstrated outstanding performance in science, ranking among the top globally. The PISA 2022 results ranked 15-year-old students in Hong Kong seventh among all participating countries and economies; and the TIMSS 2023 results placed Hong Kong's P4 and S2 students ninth and eighth, respectively, among all participating countries and regions.



Hong Kong students have consistently achieved outstanding results, reflecting fully their solid academic foundation, representing the strengths of Hong Kong's education system, the continuous enhancement of education policies and a clear direction for development. Furthermore, Hong Kong's education system values equity and diversity. Regardless of students' backgrounds, all are given access to quality education. Diversified support mechanisms are in place to cater for individual differences and promote whole-person development.

It is noteworthy that the PISA 2022 results again underscored Hong Kong's outstanding performance in education equity. Hong Kong ranked second among countries and economies with high academic achievements, indicating that the family socio-economic status of Hong Kong students, including the occupations and education levels of their parents, had minimal bearing on their performance, demonstrating that Hong Kong's education system is able to provide all students with ample and appropriate education support services, offering them quality and equal education opportunities, thereby facilitating social mobility.

Inheritance and Innovation: Create Multiple Pathways to Enhance Growth Impetus of Hong Kong

The Government will continue to implement the following policy initiatives to “empower” society to achieve self-reliance and to nurture a new generation that is virtuous and physically and mentally healthy. We will enhance the quality of education, forge new competitive edges in development through digitalisation of education, and create multiple pathways for our students to provide further impetus for Hong Kong’s growth:



1. Free Education and Financial Assistance:

Continue providing quality kindergarten, primary, secondary and special education, and diversified post-secondary education to cater for the learning needs of students at different stages; and provide financial assistance to students with financial needs.



2. Expanding VPET:

Encourage UASs to deepen collaboration with leading enterprises in the Chinese Mainland and overseas, fostering industry–education collaboration and joint promotion; and continue to actively explore with the Chinese Mainland the implementation of the mutual recognition of sub-degree level qualifications between Hong Kong and the Chinese Mainland, facilitating cross-boundary job seeking and further study options for graduates of vocational and professional programmes in both places.



3. Broadening Students' Horizons:

Enhance the “Business-School Partnership Programme 2.0” by motivating industries relevant to the development of the “eight centres” to provide career exploration and work experience for students and encouraging organisations in relevant industries to join the “Mentorship Programme”, with a view to helping students explore their interests and aspirations at an early stage.



4. Promoting Digital Education:

Earmark \$2 billion under the Quality Education Fund to support primary and secondary schools in the implementation of digital education, and release the Blueprint for Digital Education in Primary and Secondary Schools in 2026.



5. Promoting Mental Health:

Regularise the implementation of the Three-Tier School-based Emergency Mechanism in secondary schools and extend it on a trial basis to Primary 4 to 6 students. Step up the promotion of mental health in the community by implementing the 4Rs Mental Health Charter and the Mental Health Workplace Charter in primary and secondary schools. And encourage more school staff to receive training related to mental health first aid.

Impact of Macro Policy Measures on Poverty Alleviation, Combating and Prevention:

Healthcare



Holistic Health, Shared Development

Chinese people often say, “health is priceless.” Everyone longs to be healthy. As President Xi Jinping pointed out, health is the most important indicator of a happy life. Health is like the number 1, while everything else is like the zeros that follow—without the 1, no matter how many zeros there are, they have no meaning.

The Government is committed to safeguarding public health in Hong Kong by maintaining an efficient, high-quality healthcare system, and promoting the health of the entire population. At present, Hong Kong’s public healthcare system provides comprehensive services, including a highly subsidised public healthcare safety net, to ensure that no one is denied appropriate medical care due to lack of means, thereby helping to alleviate and prevent poverty.

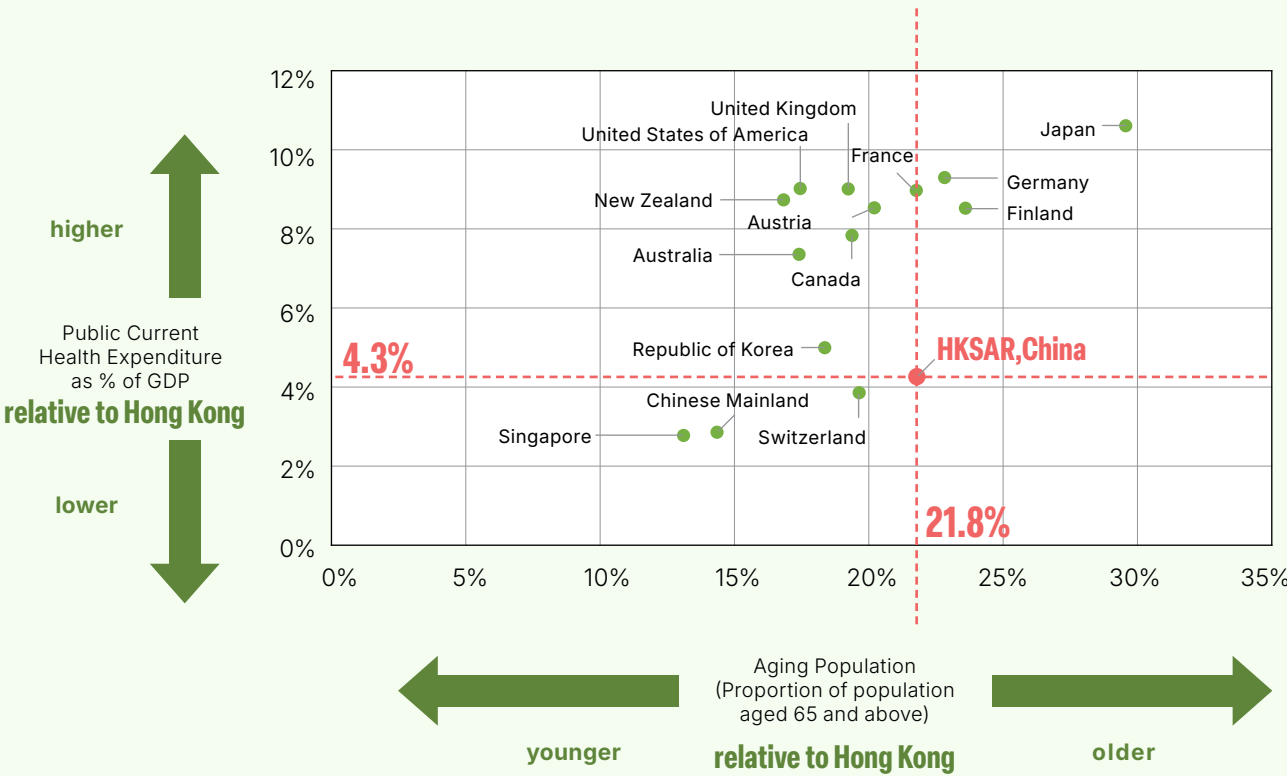


The Secretary for Health visiting a public hospital under the management of the Hospital Authority

Efficient Healthcare System

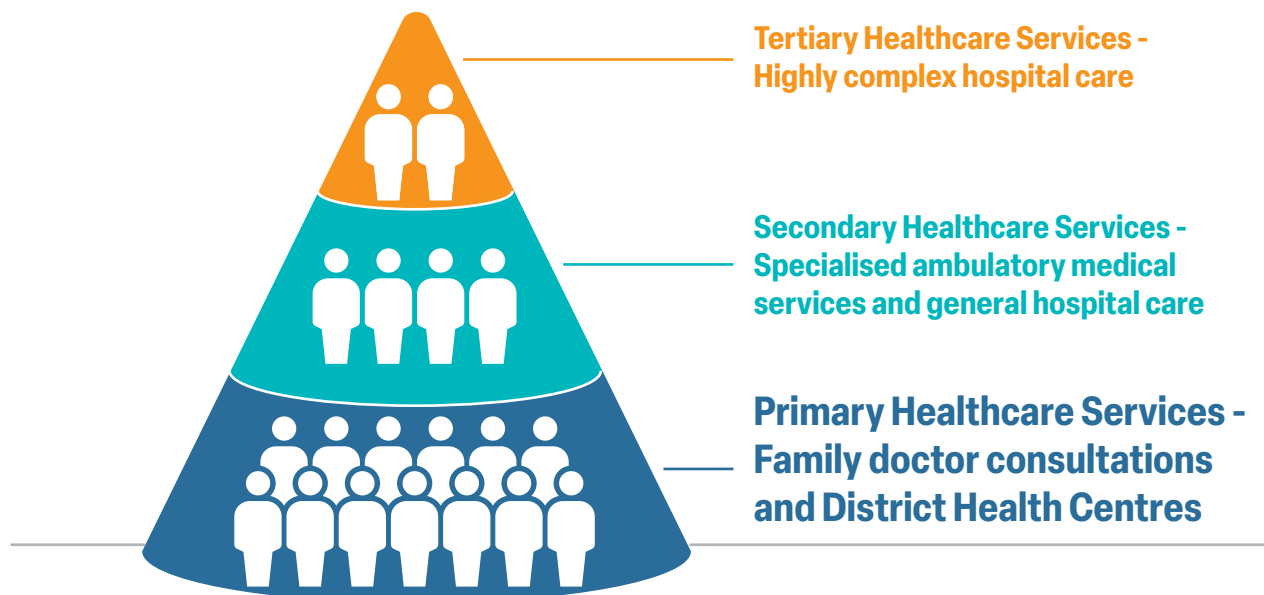
With its high-quality healthcare professionals and efficient healthcare system, Hong Kong boasts a number of world-leading health indicators. It has one of the longest life expectancies and lowest infant mortality rates in the world.

In addition, while the recurrent expenditure on public healthcare in Hong Kong accounted for only 4.3% of its GDP in the year 2023–24, which is relatively low compared with other economies with a similar proportion of elderly population, we are able to provide over 90% of the city’s inpatient and day inpatient services, while achieving a high standard of healthcare quality by international benchmarks, demonstrating its strong efficiency.



Healthcare System of Hong Kong

Hong Kong's healthcare system provides primary, secondary and tertiary healthcare services. Primary healthcare (PHC), the first point of contact for individuals and families in a continuous healthcare process, includes family doctor consultations and District Health Centres. Secondary healthcare services encompass specialised ambulatory medical services and general hospital care that are curative in nature, including acute and convalescent in-patient care, day surgery, specialist out-patient services, and Accident and Emergency services. Tertiary healthcare services refer to highly complex hospital care that generally involves the application of advanced technology and multi-disciplinary specialised expertise, such as organ transplants and brain radiosurgery.



Secondary and Tertiary Healthcare Services / Public Healthcare Services

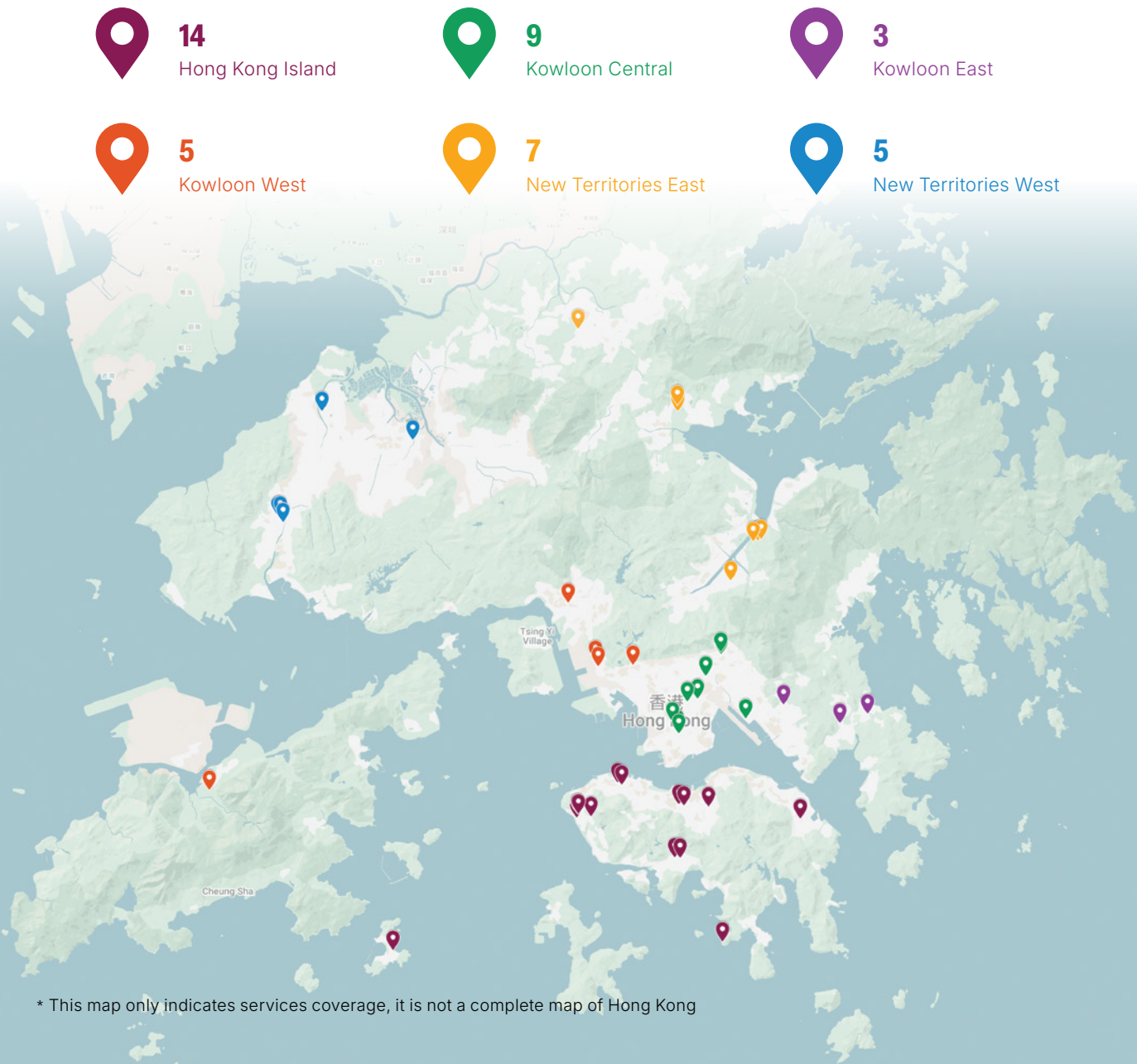
Public healthcare services are the cornerstone, population-wide safety net of the healthcare system in Hong Kong, ensuring that citizens, especially vulnerable groups who cannot afford medical expenses, are not denied of receiving adequate healthcare services, due to lack of means, thereby preventing illness from pushing people into poverty. Public healthcare services in Hong Kong are heavily subsidised by the Government, with an average subsidy rate of over 90%, providing a safety net for the community. Government expenditure on healthcare has continued to rise. The estimated recurrent government expenditure on health is \$118.9 billion in the year 2026-27, accounting for 19.8% of total estimated recurrent government expenditure, which is a 20.9% increase over the past five years (compared with the year 2021-22). The majority of the expenditure is devoted to subsidising the public healthcare services delivered by the Hospital Authority (HA), to which \$103.1 billion has been allocated in the year 2026-27.

Chapter 3 Impact of Macro Policy Measures on Poverty Alleviation, Combating and Prevention

The HA manages 43 public hospitals and institutions and 49 Specialist Out-patient Clinics (SOPCs), which are organised into six hospital clusters based on geographical location. They provide a full range of public healthcare services, including accident and emergency services, acute and infirmary in-patient care, SOPC services and relatively non-urgent day surgeries. As at end-2024, there were 30 816 public hospital beds across Hong Kong, comprising 24 470 general beds, 1 961 infirmary beds, 3 710 beds for mentally ill patients, and 675 beds for mentally handicapped patients. Private hospitals had 5 294 beds, including 4 955 inpatient beds and 339 day beds. In FY 2024-25, public hospital inpatient services incurred expenditure of \$61.7 billion, with about 2.03 million inpatient and day inpatient discharges recorded in 2025. SOPCs under the HA recorded about 8.78 million patient visits in 2025.

In addition to heavily subsidised public healthcare services, the HA has a medical fee waiver mechanism in place, offering full or partial waivers to Comprehensive Social Security Assistance recipients, Old Age Living Allowance recipients aged 75 or above, and Level 0 voucher holders of the Residential Care Service Voucher Scheme for the Elderly (“the three social welfare programmes”), as well as to other patients who meet the prescribed income and asset limits. Patients who do not meet the means-test criteria may also receive waivers if assessed by medical social workers/social workers as having special difficulties.

Distribution of Clusters, Hospitals & Institutions



Primary Healthcare

As the first line of defence for public health, primary healthcare services enhance the overall health of citizens through early identification and intervention.

The HA currently operates 75 Family Medicine Clinics and Family Medicine Integrated Centres, serving primarily the elderly, low-income families and patients with chronic conditions. In 2024, approximately 1.83 million patients used these services, with a total of 6.64 million visits. The Family Medicine Out-patient services under the HA are heavily subsidised by the Government, and the previously mentioned medical fee waiver mechanism also applies to them.

District Health Centres and District Health Expresses, established in all 18 districts of Hong Kong, provide comprehensive, continuous and people-oriented multi-disciplinary primary healthcare services (including chronic disease screening and management, family doctor pairing services, health promotion, health risk assessments and community rehabilitation). These centres have established a district health network comprising service providers such as family doctors, community pharmacies and allied health professionals.



地區康健中心
District Health Centre



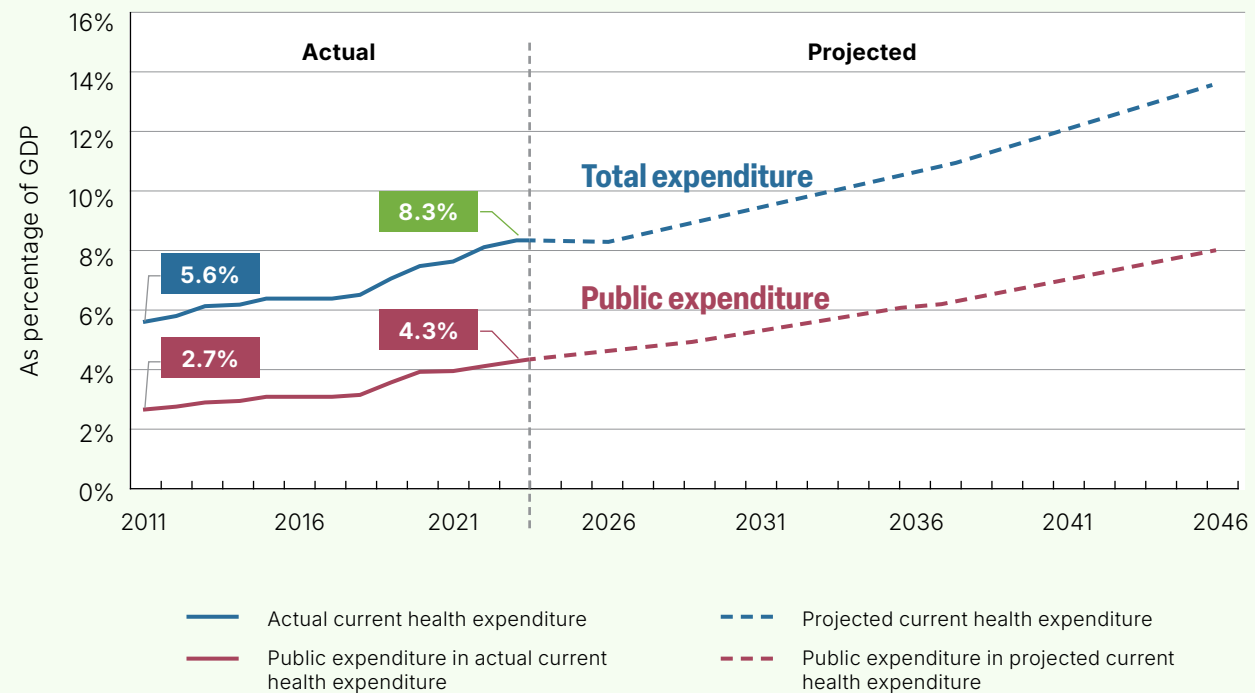
Coping With Challenges in Future

Hong Kong has an efficient, high-quality healthcare system. The public healthcare system is the cornerstone of this system and serves as a safety net for all. Ensuring its stability and sustainability is crucial for continuing its role in alleviating and preventing poverty.

However, Hong Kong faces a rapidly ageing population, and the growth trend is expected to intensify. The proportion of the population aged 65 or above is projected to rise from 24% in 2024 to 36% by 2046. In FY 2023-24, recurrent expenditure for healthcare reached approximately \$130.1 billion, accounting for 4.3% of GDP. With an ageing population and the increasing prevalence of chronic diseases driving continual growth in healthcare demand, both healthcare expenditure and its share of GDP will inevitably continue to rise, placing unprecedented pressure on the sustainability of our healthcare system. Moreover, the present healthcare system in Hong Kong relies more on treatment than prevention, with the ratio of primary healthcare to secondary and tertiary healthcare expenditure at approximately 3:7. This reflects an over-concentration of healthcare resources on costly hospital services, resulting in a system that prioritises treatment over prevention. This strains public finances and hinders improvements in the overall health of the population at the source.

To address these future challenges, the Government is continually deepening the reform of our healthcare system, including reforms of fees and charges and primary healthcare. The fees and charges reform aims to ensure that the public healthcare system remains financially stable, reinforcing its role as a safety net for all. Primary healthcare reform focuses on shifting the emphasis of the present healthcare system from a treatment-oriented approach to a prevention-oriented one, promoting public health and empowering those who are capable of self-help.

Current Health Expenditure as percentage of GDP



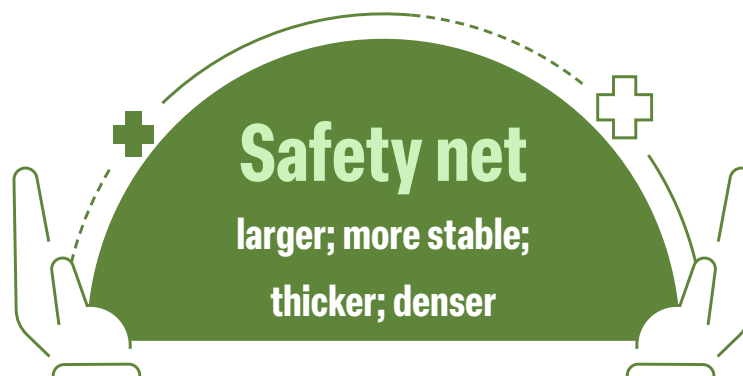
Data Source - Actual : Hong Kong's Domestic Health Accounts 2011/12 – 2023/24
Projected : 2019-based Health Expenditure Projections prepared by Health Bureau in 2023

"Supporting Those Who Are Unable to Help Themselves"

Fees and Charges Reform for Public Healthcare

Public healthcare differs fundamentally from other social welfare services. Demand for most social welfare services is closely tied to individuals' socio-economic background. However, the need for public healthcare services can vary significantly due to differences in health conditions. Moreover, demand for public healthcare services exhibits a highly skewed distribution. While a majority of the population requires relatively affordable basic healthcare services, a small number of critically ill patients with complex conditions have significantly higher service needs and incur substantially higher medical costs.

Given the distinctive nature of healthcare services compared to other social welfare services, independent assessment mechanisms are in place across policy areas to identify their respective target beneficiaries, supporting the strategy of targeted poverty alleviation. Each mechanism necessarily entails its own administrative procedures and costs. In the context of public healthcare services, the four categories of patients with particular medical needs are those who are poor, acute, serious or critical. Consequently, the fees and charges reform for public healthcare focuses on strengthening support for these four categories of patients.



A key principle of the fees and charges reform for public healthcare is that the Government's commitment to public health remains unwavering. All benefits derived from the reform will be fully reinvested in public healthcare services, ensuring that the high level of subsidies will be maintained after the reform.

By reforming the public healthcare subsidy structure, the Government aims to achieve the following objectives:

- Guiding the public to make optimal use of healthcare resources and ensuring that limited healthcare resources are directed to those most in need;
- Reducing wastage and abuse by improving the efficiency of healthcare services; and
- Utilising the benefits of the reform to strengthen healthcare protection for "poor, acute, serious, critical" patients on all fronts and reinforcing the safety net for all.

Achieving these three objectives will ensure that limited healthcare resources are allocated more effectively to patients most in need. This includes strengthening protection for sudden critically ill patients to prevent them from falling into poverty due to heavy medical expenses, as well as increasing subsidies for low-income individuals and patients with chronic conditions. These measures will enhance the public healthcare system's role as a safety net for all in preventing and alleviating poverty and improve the sustainability of the existing public healthcare system.

Enhancing Healthcare Protection

Through the implementation of the fees and charges reform for public healthcare since 1 January 2026, the Government has strengthened healthcare protection in three areas:

1. Expanding the medical fee waiver mechanism to significantly increase support for low-income families and underprivileged groups;
2. Introducing an annual cap on public healthcare fees and charges to better support patients with serious illnesses; and
3. Enhancing protection for critical patients in respect of self-financed drugs and medical devices by accelerating the introduction of more effective and innovative drugs and medical devices and relaxing the eligibility criteria for the safety net. This will enable more patients to receive subsidies for self-financed drugs and medical devices.



Expanding the Medical Fee Waiver Mechanism

Public healthcare services in Hong Kong are highly subsidised by the Government. The subsidy rate remains at approximately 95% even after the implementation of the fees and charges reform for public healthcare on 1 January 2026. Fees remain affordable for the general public. To support patients who cannot afford medical expenses despite the high level of subsidisation, the HA has in place a medical fee waiver mechanism to ensure that no patient is denied appropriate medical care due to financial constraints. As a necessary measure to ensure that limited public resources are targeted at these low income patients, the medical fee waiver mechanism has in place a financial assessment with specified income and asset limits to identify those with genuine financial hardship and provide them with appropriate assistance.

To uphold the reform objective of supporting patients in financial hardship, the HA has expanded the medical fee waiver mechanism. In addition to the some 600 000 people who had been benefiting from full medical fee waivers both before and after the reform, namely recipients of the three social welfare programmes, the number of other eligible low-income individuals is estimated to have increased substantially from about 300 000 in the past to about 1.4 million. This represents an additional 1.1 million low income individuals who may potentially benefit. Together with the 600 000 beneficiaries under the three social welfare programmes, it is estimated that about two million people across Hong Kong may be covered under this medical safety net, thereby strengthening support for the “poor” category in the “poor, acute, serious, critical” patient groups.

Under the medical fee waiver mechanism, in addition to assessing a patient’s financial situation based on monthly household income and asset values, medical social workers/social workers take into account other non-financial factors and handle cases on an individual basis at their discretion. This ensures that patients who do not meet the criteria of the financial assessment but face special difficulties still receive fee waivers.

The Government will continue to monitor and assess the existing medical fee waiver mechanism to ensure that the healthcare safety net effectively supports those who are unable to support themselves.



Case 1

A 42-year-old patient requires long-term dialysis and is unable to work full-time, so he can only work part-time as a transport worker. He lives in a three-person household.

Before the fees and charges reform, his monthly household income of \$29,000 fell within the income limit for partial fee waiver applications. However, with assets amounting to \$500,000, he was not eligible for any waivers because they exceeded the asset limit for a three-person household.

However, under the reformed mechanism, both his income and assets fall below the relaxed limits for a three person household. He is therefore eligible for a full fee waiver.

Establishing an Annual Cap on Fees and Charges

The HA has established an annual cap of \$10,000 on public healthcare fees and charges, covering both inpatient and outpatient services. This covers all chargeable items other than self-financed drugs and medical devices. All Hong Kong residents can apply for, and benefit from, this cap without undergoing a financial assessment. This measure is designed primarily to protect and support patients with serious illnesses and to prevent members of the public from falling into poverty because of a major illness.



Case 2

Some cardiac patients with more complex conditions require multiple consultations each year due to various complications, and their hospital stays may be longer.

Before the fees and charges reform, with no annual cap in place, these patients might have had to pay more than \$40,000 in medical expenses annually.

However, with the introduction of the annual cap, they now only need to pay \$10,000 per year and no longer have to pay any additional charges. This effectively contributes to "poverty prevention".

Accelerating the Introduction of More Effective Innovative Drugs and Medical Devices

The HA has streamlined the procedures for introducing and procuring new drugs in the HA Drug Formulary. The time required for incorporating new drugs with proven clinical efficacy into the HA Drug Formulary has been reduced by half, allowing new drugs to reach patients earlier. Additionally, the HA proactively reviews new drugs approved for registration in Hong Kong under the “1+” mechanism of the Department of Health for new drug approval. By expediting the inclusion of more effective and innovative drugs into the HA Drug Formulary and the safety net, the HA has strengthened protection for critical patients in need of self financed drugs and medical devices. As at end 2025, seven new drugs approved for registration in Hong Kong through the “1+” mechanism had been incorporated into the HA Drug Formulary. Among them, two drugs used for the treatment of metastatic colorectal cancer were included in the special drug category of the HA Drug Formulary in October 2024. Under specified clinical indications, patients prescribed these drugs are required to pay only the standard fee, which is currently \$20 every four weeks, significantly alleviating their financial burden.

Relaxing Eligibility Criteria for the Safety Net

By incorporating more effective drugs and medical devices into the coverage of the Samaritan Fund safety net, the HA has broadened the scope of subsidies available under the safety net and relaxed the means test requirements and subsidy calculation parameters of the Samaritan Fund. This enables critical patients from middle income families, who were previously ineligible, to receive subsidies for self financed drugs and medical devices. For patients already receiving partial subsidies, the proportion of subsidised expenses has increased, thereby reducing the risk of individuals being pushed into poverty due to critical illness.



Case 3

A 37 year old patient with psoriatic arthritis lives alone in public rental housing, earning an annual income of over \$300,000 from employment. However, due to the long term treatment required for his condition, his annual drug expenses can exceed \$100,000. Under the Samaritan Fund safety net before the relaxation of the subsidy assessment criteria, he was eligible for the partial subsidy. After the assessment criteria were relaxed, the amount of government subsidy he can receive increased substantially by more than 60%, greatly alleviating his financial burden.

For first time applications, the subsidy amount has increased from approximately \$52,000 to about \$84,000 (an increase of 62%).

For continuous applications, the subsidy amount has increased from approximately \$61,000 to about \$98,000 (an increase of 61%).

Samaritan Fund Safety Net – Beneficiary Story

Sharing by Mr Leung

Mr Leung, aged 50, is a patient with ankylosing spondylitis. He first began experiencing lower back and leg pain when he was in secondary school about 30 years ago. At first, the doctor prescribed conventional medications, but the treatment was not very effective. His pain kept returning and was often severe, to the extent that even moving around at home became difficult, greatly affecting his daily life.

After assessing his clinical condition, his doctor considered him suitable for switching to biologics. As biologics are significantly more expensive than conventional drugs, he was referred to a medical social worker at the same time to apply for a subsidy under the Samaritan Fund.

Mr Leung has used two different biologics over the years, both of which are extremely costly. Without support from the Samaritan Fund, his annual drug expenses would amount to several hundred thousand dollars, which is far beyond what he could afford given his financial situation. The biologics have been highly effective for him. He no longer feels debilitating pain when walking, and he is now able to manage his daily life with ease.

Being able to live normally again is an immense relief and blessing for patients like him. Simple moments, such as taking a walk and spending time with family, have become precious sources of happiness that he cherishes deeply.

Since the implementation of the fees and charges reform for public healthcare, the number of medical fee waiver applications approved by the HA has increased severalfold. Many patients have benefited from the medical fee waiver mechanism for the first time, receiving waivers for A&E, outpatient and inpatient services. This demonstrates that the measure has effectively strengthened support for low income families and vulnerable groups, ensuring that limited healthcare resources are more precisely targeted to those most in need—namely the “poor” category among the “poor, acute, serious, critical” patient groups—and that no patient is denied medical care due to lack of means.

The annual cap of \$10,000 introduced under the reform has also served effectively as a second safety net. In the first three months since implementation of the fees and charges reform, nearly 3 000 applications were approved, and the number is expected to increase progressively. These patients will not be required to pay any further public healthcare charges for the remainder of the year, demonstrating the measure’s effectiveness in preventing patients with serious illnesses from falling into poverty due to medical expenses.

"Empowering Those Who Are Able to Help Themselves"

Strengthening Primary Healthcare Services

The Government launched the Primary Healthcare Blueprint in 2022 to shift the focus of the healthcare framework from curative treatment to disease prevention, and to promote reforms in preventive care and primary healthcare services to establish a sustainable healthcare system. The Government is continuing to advance primary healthcare services. The Blueprint proposed achieving a better balance between primary and secondary/tertiary care in overall health expenditure, ideally reaching a ratio of about 3.5:6.5, or even 4:6 in the long term. In FY 2023-24, primary healthcare expenditure accounted for 29.3% of Current Health Expenditure in Hong Kong, which is the highest percentage in the past decade. This demonstrates that the Government's efforts to promote primary healthcare are bearing fruit. The Government will continue to adopt a multi-pronged approach to strengthen primary healthcare services and promote the health of citizens to improve their quality of life by empowering those who can help themselves.



District Health Centres

In accordance with the Primary Healthcare Blueprint, the Government is progressively expanding the district health network, with District Health Centres and District Health Centre Expresses serving as hubs. Following the upgrade of the District Health Centre Expresses in Central and Western, Yau Tsim Mong and Eastern Districts into District Health Centres in 2025, the number of District Health Centres across the 18 districts of Hong Kong increased to 10. At end-December 2025, the number of members of District Health Centre/Expresses had exceeded 500 000, with the cumulative number of visits reaching over 3.6 million.

In 2025, the women's health services under the Department of Health (DH) were integrated into three 'Women Wellness Satellites' in Hong Kong, Kowloon and the New Territories under the Primary Healthcare Commission. This integration aims to form a more connected district health network with the District Health Centre/Expresses across the 18 districts to provide more personalised women's health services. The Government is preparing to integrate the services of the DH's elderly health centres into the district health network in phases and to expand the services of District Health Centre Expresses.

Chronic Disease Co-Care Pilot Scheme

The Government launched the Chronic Disease Co-Care Pilot Scheme in November 2023 to provide subsidised diabetes mellitus (DM) and hypertension (HT) screening and consultation services in the private healthcare sector to Hong Kong residents aged 45 or above with no known medical history of DM or HT. Starting in January 2025, the Scheme introduced dedicated nurse clinic and allied health services and was expanded to include blood lipid testing starting

in March 2025, achieving full coverage of the 'three highs'. By end-December 2025, nearly 190 000 citizens had enrolled in the Scheme. Among them, over 40% of participants who had completed screening were diagnosed with prediabetes, DM, HT or dyslipidaemia. These patients can proceed to the treatment phase and will receive government-subsidised, multi-disciplinary follow-up care, achieving the goal of 'early detection and early treatment'.



Case 1 - Sharing from a Participant in the Chronic Disease Co-Care Pilot Scheme

Sharing by Mr Yip

Mr Yip, aged 79, enrolled in the 'three highs' screening under the Chronic Disease Co-Care Pilot Scheme at the East Kowloon Family Medicine Clinic. His objective in joining the Scheme was very clear. He wanted to learn about his own 'three highs' condition, demonstrating a proactive and positive approach to managing his health.

After completing the screening, Mr Yip felt that the greatest benefit was receiving clear health guidance. He expressed his satisfaction, stating that the Scheme had taught him how to look after his own health. The specific test results enabled him to make more informed adjustments to his lifestyle habits. As a result of his continued participation in the Scheme, he has made tangible changes. He now pays closer attention to his daily diet and maintains a regular exercise routine. He admitted, "I'm a bit more careful about what I eat now, and I make time for exercise every day." The Scheme has successfully provided Mr Yip with a scientifically grounded health roadmap, encouraging him to put the concept of self-care into practice in his daily life.

Case 2 - Sharing from a Participant in the Chronic Disease Co-Care Pilot Scheme

Sharing by Ms Yau

Ms Yau, who is in her sixties, visited the Hung Hom Family Medicine Clinic after catching a cold. Following a recommendation from a nurse, she underwent the 'three highs' screening under the Chronic Disease Co-Care Pilot Scheme at the East Kowloon Family Medicine Clinic. She also received the women's health services offered by the clinic, including breast and cervical cancer screening, which are particularly suitable for her age group in terms of preventing potential health problems.

Speaking of the benefits of participating in the Scheme, Ms Yau stated frankly: "First, I was exempted from the fees, so I could take part in the Scheme free of charge, enabling early detection and treatment of various conditions." She emphasised that since this is a government-initiated scheme, she finds it very reassuring. "We ordinary citizens don't need to worry about falling ill and not knowing where to seek medical care." After finishing the examination, she said the biggest takeaway was a shift in her emotional well-being. "I feel more at ease, no longer worrying about whether I might have breast cancer, cervical cancer or other chronic conditions." When a friend of hers was diagnosed with breast cancer at just over 40 years old, she became even more aware of the importance of regular check-ups. "I will definitely take part again next year!" she said.



Scan the QR code
to hear from
beneficiaries



Repositioning Family Medicine Clinics

The Hospital Authority's (HA's) General Out-patient Clinics (GOPC) and Family Medicine Specialist Out-patient services were unified under the name 'Family Medicine Out-patient (FMOP) Services' in 2025, and its GOPC and Community Health Centres were renamed "Family Medicine Clinics (FMCs)" and "Family Medicine Integrated Centres (FMICs)". This renaming aligns with the recommendations of the Primary Healthcare Blueprint to reposition GOPC services to focus on serving underprivileged groups. Specific underprivileged groups requiring public primary healthcare services, including recipients of the three social welfare schemes and beneficiaries of the Working Family Allowance Scheme, may also make priority bookings for FMOP services through the "Family Medicine Out-patient Services Priority Groups Pilot Scheme".

Under the relevant strategy, starting in March 2025, designated FMCs and FMICs of the HA introduced new preventive screening and care services for underprivileged groups in phases, including screening and management services for 'three highs'. The service points covered all 18 districts across Hong Kong in 2025. In addition, the HA incorporated women's preventive care and health promotion services into designated FMCs and FMICs to provide more comprehensive support. In FY 2025-26, the HA's FMC preventive screening and care services were expanded, their service capacity was increased, and the current extended service hours will be progressively regularised.

Primary Healthcare Services for Elderly Persons

Regarding the elderly, there are currently 18 Elderly Health Centres providing primary healthcare services to elderly persons aged 65 and above, including health assessments, treatments, education, and counseling services. Meanwhile, 18 Visiting Health Teams conduct health promotion activities and provide training for caregivers. In 2024, the number of registered persons in the Elderly Health Centres was about 32 000, providing approximately 125 000 health assessments and treatments, while promotional activities for elderly health service saw about 353 000 participants. The Government is integrating the services of Elderly Health Centres into district health network in phases to provide more comprehensive care for the elderly.

The Government launched the Elderly Health Care Voucher Scheme (EHVS) in 2009 to subsidise elderly persons to choose private primary healthcare services in the community that best suit their needs. Each eligible elderly person is currently provided with an annual Elderly Health Care Voucher (EHCv) amount of \$2,000, with an accumulated limit of \$8,000. Under the framework of the Primary Healthcare Blueprint, the Government has continued to enhance the EHVS. In 2023, this included extending the coverage of EHCvs to include four categories of healthcare professions under the Accredited Registers Scheme for Healthcare Professions; allowing the shared use of vouchers between spouses; and implementing the Elderly Health Care Voucher Pilot Reward Scheme to further incentivise elderly persons to make better use of EHCvs for continuous preventive healthcare and chronic disease management services, etc. As at end-December 2025, over 1.81 million elderly persons had used EHCvs, accounting for about 100 per cent of the eligible elderly population.



2023			2024	
Number of elderly persons who had used EHCVs		About 1.61 million	About 1.71 million	
Total amount of vouchers claimed (\$)		About \$3.28 billion	About \$3.38 billion	
Most frequently used services	Number of voucher claim transactions	Average amount of vouchers per claim transaction	Number of voucher claim transactions	Average amount of vouchers per claim transaction
	Medical Practitioners			
	2 325 617	\$546 / claim transaction	2 444 952	\$558 / claim transaction
	Chinese Medicine Practitioners			
	1 965 635	\$580 / claim transaction	2 160 315	\$568 / claim transaction
	Dentists			
	331 342	\$1,247 / claim transaction	331 567	\$1,213 / claim transaction

In addition, regarding the cross-border use of health care vouchers, in 2024 the Government launched the "Elderly Health Care Voucher Greater Bay Area Pilot Scheme" ("Pilot Scheme"), expanding the scope of medical voucher application in stages to provide eligible elderly persons with more service point choices when using health care vouchers in the Greater Bay Area. Currently, eligible elderly persons can use health care vouchers at a total of 21 service points in cities across the Greater Bay Area, achieving full coverage of the nine mainland cities in the Greater Bay Area.



Government-subsidised Chinese Medicine Outpatient Services

The Hospital Authority, non-governmental organisations and local universities operate the Chinese Medicine Clinics cum Training and Research Centres (CMCTRs) in all 18 districts under a tripartite collaboration model. This initiative aims to promote the development of Chinese medicine (CM) by providing services and training and conducting research. Since March 2020, the CMCTRs have been providing Government-subsidised CM outpatient services at the district level, including CM general consultations (up to five doses of Chinese medicine) and acupuncture services. Bone-setting and tui-na services are also available at some of the clinics. At present, each type of service costs \$120 per visit, but the fees are waived for recipients of Comprehensive Social Security Assistance and the Old Age Living Allowance aged 75 or above.

Since October 2023, the 18 CMCTRs have increased the annual quota of Government-subsidised CM outpatient services by over 30%, from about 600 000 to 800 000. In addition to Government-subsidised CM services, the CMCTRs provide non-Government-subsidised services to offer more options for the public.



Dental Services

The Government's latest oral health policies include developing prevention-oriented primary oral health and dental care (i.e. community-wide preventive primary oral healthcare); encouraging citizens engage in prevention, early identification and timely intervention of dental diseases to achieve the objective of teeth retention; and providing appropriate oral health and dental care services for underprivileged groups with financial difficulties and special needs (i.e. essential dental care services targeting underprivileged groups), ensuring that these groups have access to essential dental care services.

To promote community-wide preventive primary oral healthcare, the Department of Health (DH) provides the School Dental Care Service (SDCS) for Hong Kong primary school students. Participating students receive annual oral examinations and basic preventive and restorative treatment at designated school dental clinics. In the 2025/26 service year, approximately 294 400 primary school students participated in the SDCS, representing 91% of the total number of primary school students in Hong Kong. Students with disabilities studying in special schools can access the SDCS until they turn 18.

In 2025, the Government launched the Community Dental Support Programme (CDSP) to provide subsidised dental services to underprivileged groups with financial difficulties. This initiative enhanced service capacity, increased the number of service points and expanded the scope of services under a new service model, aiming to at least double the service capacity of the current quotas for general public dental sessions at government dental clinics (i.e. targeting 40 000 participants annually). Starting on 1 January 2026, the CDSP expanded its scope of services and extended the scope of beneficiaries to the homeless, replacing the Community Care Fund Elderly Dental Assistance Programme. The DH currently provides free emergency dental services to the public through designated sessions in 11 government dental clinics and increased the total service quotas by about 30% starting in June 2025. Additionally, the dental grants under the Comprehensive Social Security Assistance Scheme of the Social Welfare Department are provided to those with financial difficulties.



Mental Health Support

The Government attaches great importance to promoting public mental health through an integrated approach, providing multidisciplinary and cross-sector collaboration services that include prevention, early identification, and timely intervention, treatment and rehabilitation for persons in need, including children and adolescents.

18111 – Mental Health Support Hotline

The Health Bureau launched the "18111 – Mental Health Support Hotline" to provide 24-hour, one-stop support for people with mental health needs, offering emotional and mental health support to members of the public from all backgrounds and of all ages, and providing service information or referrals to appropriate service organisations based on the needs of individual callers. At end-December 2025, the Hotline had handled nearly 240 600 calls, which was an average of about 327 calls per day, and referred nearly 600 cases.



Mental Health Services in the HA

The HA offers free community psychiatric services for eligible persons, comprising three levels of care: the Intensive Care Team, the Case Management Programme and the Standard Community Psychiatric Service. Multidisciplinary teams assess patients' medical conditions and clinical needs and risks to provide appropriate community support, such as mental health assessments, symptom management, relapse prevention, medication management, crisis intervention, stress management, physical health care and psychoeducation. Through regular outreach and home visits, as well as close collaboration with community partners, case managers help persons in mental recovery set goals and recovery plans to facilitate their re-integration into the community, while also offering appropriate support and advice to their caregivers and family members.

Healthy Mind Pilot Project

The Health Bureau launched the Healthy Mind Pilot Project at three District Health Centre (DHC)/District Health Centre Expresses (DHCEs). This initiative offers free initial mental health assessments to members of the public on a trial basis at the community level to achieve the "early identification, early treatment" goal of primary healthcare and to strengthen appropriate support for those in need. As at end-December 2025, the above DHCs and DHCEs had completed initial mental health assessments under the pilot project for approximately 40 500 individuals, with some cases recommended for further assessment and low-intensity psychological intervention. "The Government's 2025 Policy Address" announced that the pilot project would be expanded to nine centres in 2026, with follow-up services provided by qualified practitioners with an academic background and training in fields such as psychology or counselling.



Mental Health First Aid Training – Care Team

“The Government’s 2023 Policy Address” announced that the Health Bureau would provide mental health support training for Care Team members in 2024 to help them refer individuals in need of mental health support in the community to seek timely support. Care Team members in all 18 districts have received mental health support training provided by the Health Bureau.

Ethnic Minority Well-being Centre

“The Government’s 2022 Policy Address” announced the establishment of a service centre on a trial basis to provide emotional support and counselling for ethnic minorities in their native languages. A multidisciplinary team comprising social workers, counsellors and support staff proficient in various ethnic minority languages provided emotional support and counselling services for ethnic minorities and referred those in need to other service platforms for additional support and/or intervention services. As at end-December 2025, the centre had provided more than 5 600 mental health questionnaire assessments, conducted over 950 phone calls to follow-up and provided about 2 300 counselling sessions to those in need.



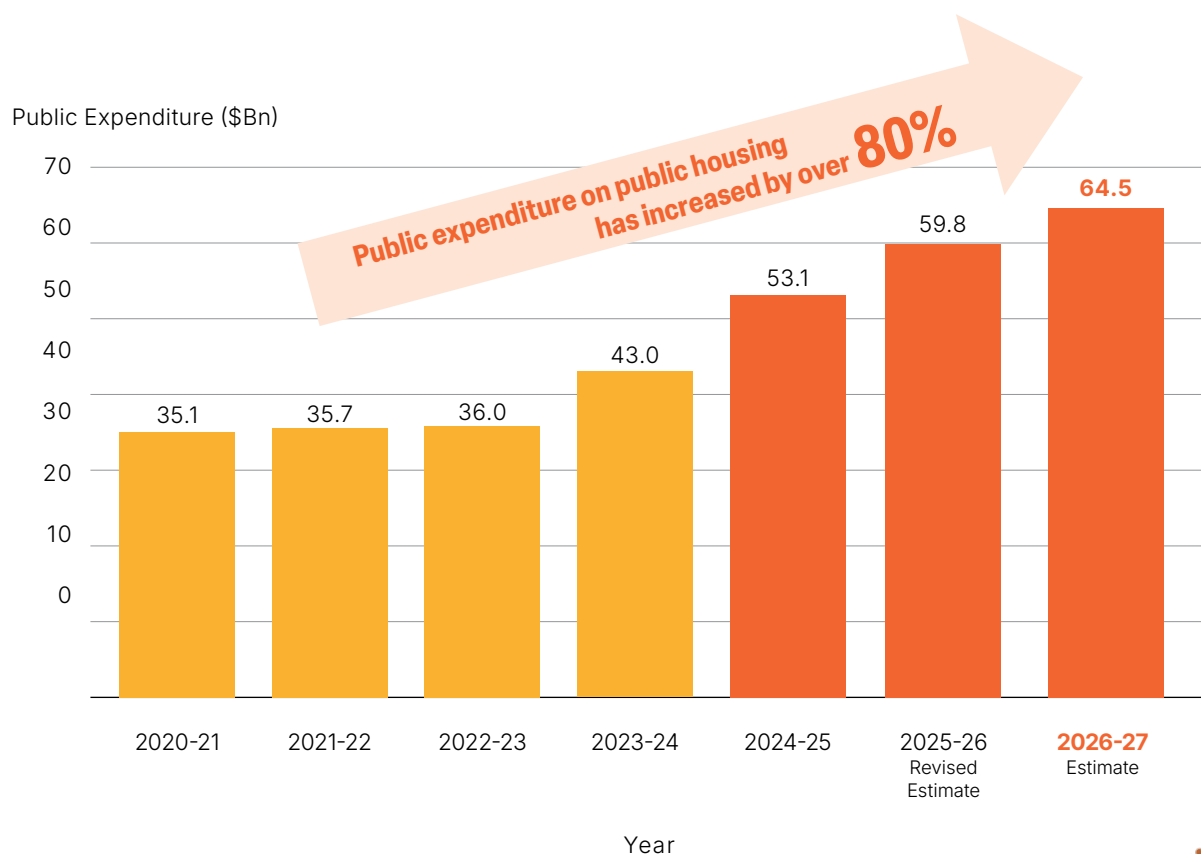
Impact of Macro Policy Measures on Poverty Alleviation, Combating and Prevention: Housing



Providing Housing Where People Enjoy Life and Thrive, and to Facilitate Wealth Accumulation

The Government's public housing policy objectives, which include public rental housing and subsidised housing, are to provide low-income families with affordable rental housing as a "safety net", and to provide low- and middle-income families with affordable home ownership. This enables them to improve their livelihoods in pursuit of happiness, gradually accumulate wealth and move up the housing ladder, thereby laying a solid foundation for social development.

The Government has committed substantial resources to public housing. Related public expenditure has significantly increased by more than 80%, from about \$35.1 billion in FY 2020-21 to about \$64.5 billion in FY 2026-27, underscoring the Government's emphasis on public housing development.



Housing Ladder

The Government is committed to enhancing the housing ladder to meet the housing needs of families across all income levels. Over the years, the Government has established a housing ladder that reflects the city's socio-economic changes:

Transitional Housing (TH)

The Government continues to promote TH by providing construction funding to non-government organisations to offer short-term accommodation to people in need. This initiative also creates greater social value by using short-term land, buildings and vacant school premises lent by the Government or private owners.

Light Public Housing (LPH)

To quickly fill the short-term gap in public housing supply at the soonest, LPH is built under a Government-led approach, making use of Government and private land whose long-term development plans are not expected to be implemented in the near future, as well as vacant school premises. Standardised simple designs and Modular Integrated Construction (MiC) approach are used to build the LPH expeditiously, to improve the living conditions and quality of life of people living in inadequate housing.





Private Housing

Private housing refers to housing that is developed and/or rented or sold by private entities based on market mechanisms. The Government's policy objective is to maintain the healthy and steady development of the private residential property market.

Subsidised Sale Flats (SSF)

The HKHA has been committed to enhancing the housing ladder by selling SSF to help middle-to-low-income families achieve home ownership. SSF are available for purchase by Green Form and White Form applicants. Green Form applicants are usually existing PRH tenants. As for White Form applicants, they must meet income and asset limits to ensure resources are allocated to those in need.

Public Rental Housing (PRH)

PRH is a long-established safety net for low-income families. The objective of the Hong Kong Housing Authority (HKHA) is to provide PRH to low-income families who cannot afford to rent private accommodation. Factors for determining the eligibility of PRH applicants include PRH income and asset limits. Households with income and assets below the prescribed limits are deemed to be low-income families who cannot afford to rent private accommodation and are therefore eligible for PRH.

Light Public Housing: Target and Latest Progress

To improve the living conditions and quality of life for those with urgent housing needs as soon as possible, LPH is being constructed under a Government-led approach, with the target of completing the construction of about 30 000 LPH units before FY 2027-28. All 13 LPH projects continue to proceed according to the original schedule. As at end-December 2025, six projects (including Yau Pok Road, Yuen Long; Choi Hing Road, Ngau Tau kok; Choi Yuen Road, Sheung Shui; Shun On Road, Kwun Tong; Olympic Avenue, Kai Tak (Phase 1); and Tsing Fuk Lane, Tuen Mun), with a total of approximately 9 500 flats, had been completed. We expect about 20 300 LPH units to be completed in 2026 and 200 units in early 2027 (see **Annex 1** for more details).

Rental Savings

LPH prioritises applicants who have been waiting for traditional PRH for three years or more and assists the neediest, based on a Marking Scheme.

The rent of LPH units, which is linked to that of traditional PRH, is set at approximately 90% of the rent of newly completed traditional PRH in the same district. Making reference to the rent of traditional PRH in October 2024, the rents for LPH units in the urban area ranges from \$1,230 to \$3,310 per month, while those of LPH units in the New Territories ranges from \$860 to \$2,320 per month. The median rent for LPH is about \$1,300. The Government estimated that each household could save an average of about \$4,200 per month after moving into LPH (assuming the median rent for subdivided units (SDUs) in Hong Kong is about \$5,500). This represents **over \$7.5 billion** in total rental savings for the 30 000 households residing in LPH units over five years. By moving into LPH with affordable rents, grassroots residents can alleviate their rental burden and utilise the rental savings for other more meaningful purposes.

The Housing Bureau (HB) has been closely monitoring the situation of LPH residents upon intake. Earlier, it engaged the operating organisation to conduct a survey among the residents of Yau Pok Road, Yuen Long. The survey results indicated the following –

**The total rental savings for
30 000 households residing in
LPH units across various districts will
exceed \$7.5 billion over five years.**



Approximately 97% of residents reported that they no longer worry about accommodation issues after moving in;



About 95% of residents indicated that they and their families feel an increased sense of well-being and happiness after moving in; and



About 94% of residents said that the social services provided by LPH helped them and their families plan for a better future.

This feedback from residents and the related statistics have reflected LPH's immediate improvement on residents' living conditions and quality of life, thereby enhancing their overall sense of well-being.

Sharing from a Household Living in LPH at Yau Pok Road, Yuen Long

Sharing by Ms Du

Ms. Du lives with her family of five. Her husband works as a driver, and their son and daughter attend school in Yuen Long District. They used to live in a 200-square-foot village house in San Tin, Yuen Long District, and paid a monthly rent of about \$5,000. Their previous residence was in a remote area with poor transportation and a mosquito-prone environment. After they moved into LPH at Yau Pok Road in Yuen Long, the rent decreased by more than half, and their living space doubled. They have experienced a significant improvement in their living environment and quality of life since moving into LPH. As the LPH operating organisation prioritises hiring LPH residents as security guards and cleaners for the project, and Ms. Du holds a security guard licence, she applied and was successfully hired. Now, she has a stable job to support her family, and her workplace is conveniently located. The operating organisation has been considerate in arranging her shifts, allowing her to balance work and childcare effectively, which has significantly enhanced the well-being of her family.

Scan the QR code
to watch the Chief
Executive visit LPH
residents.



Scan the QR code
to view stories of
residents of "LPH •
Yau Pok".



Transitional Housing

Under the “Funding Scheme to support Transitional Housing Projects by Non-government Organisations” (Funding Scheme), the Government has identified land lots and buildings to provide over 21 000 TH units, exceeding the original target of 20 000 units. As at end-December 2025, more than 19 600 TH units had been put into operation, available for application by those in need.

Number of Transitional Housing Projects	
Area	Number of Projects under the Funding Scheme
Urban	23
Extended Urban	11
New Territories	14



Rental Savings

The average monthly rent for TH units is approximately \$3,000. The Government estimates that households moving into TH can each save about \$2,500 in rental expenses per month (assuming the median rent for SDUs in Hong Kong is about \$5,500), i.e. total rental savings of \$150,000 over a five-year period. This represents a total of **\$3.15 billion** in rental savings for the 21 000 households residing in TH units over five years.

The total rental savings for **21 000** households residing in TH units across various districts is approximately **\$3.15 billion** over five years.



The Hong Kong Sheng Kung Hui Welfare Council published the results of "Research on 'United Court' Transitional Housing" at the end of June 2025. The study was conducted in collaboration with City University of Hong Kong, The University of Hong Kong, Lingnan University, Saint Francis University and the University of New South Wales. The research confirmed that TH has positively impacted residents' physical and mental health, sense of security at home and community connections, and significantly relieved their rental burden (see **Annex 2** for more details).

Case Sharing from TH Beneficiaries

Sharing by Mr and Mrs Wong

Transitional housing aims to provide citizens living in harsh environments with timely improvements, allowing them to enjoy better living conditions. The HB helped Mr and Mrs Wong relocate from their original metal hut, in which they suffered from water leakage on rainy days and cold draughts in winter. They moved to the TH project "Pok Oi Sing Ping Village", located in Ta Kwu Ling. Now, they no longer worry about sleepless nights due to rain, or snakes and rodents entering their home. They now enjoy a much safer and more comfortable living environment. What is even more heartwarming is that the staff of the project provide comprehensive support, making their twilight years more comfortable, with brighter living space and warm care.

"Pok Oi Sing Ping Village" has a well-established transportation network, with a self-operated "shuttle bus" directly connecting to the Sheung Shui MTR station, minibuses running between Fanling and Ping Che, and buses going directly to the Heung Yuen Wai Boundary Control Point. Mr and Mrs Wong, who are senior citizens, expected moving home to be an extremely strenuous task. However, they received comprehensive support from the operating organisation, councillors, rural committees, care teams and the HB. We hope that their story will encourage more people to confidently take a step forward in changing their lives and choose a better life for themselves and their families.

Scan the QR code to watch [Our Stories
in Transitional Housing] Episode 6: From
Metal Hut to "Pok Oi Sing Ping Village"



Case Sharing from TH Beneficiaries

TH Project “Wellness Lodge”: Nurturing Children's Growth

One of the most delightful outcomes of the TH projects is the transformation in the lives of children as they become more cheerful and outgoing thanks to the significant improvement in their living environment and the gradual establishment of community connections. These changes foster a sense of safety and hope for the future among the children.

During an HB visit to a pair of Thai brothers living in “Wellness Lodge”, HB representatives noticed them thoroughly enjoying running and jumping around the project, and playing and learning from STEAM gaming facilities in the public activity room. “Wellness Lodge” provides quality public facilities, creating an environment full of learning opportunities for children. This environment allows children to learn through play and encourages them to become valuable members of society in the future. Providing a good environment for children nurtures their growth and enables them to contribute positively to society. This positive energy will inject more love and warmth into Hong Kong, making it a more harmonious and inclusive society.

Scan the QR code to watch residents share their heartfelt thoughts.

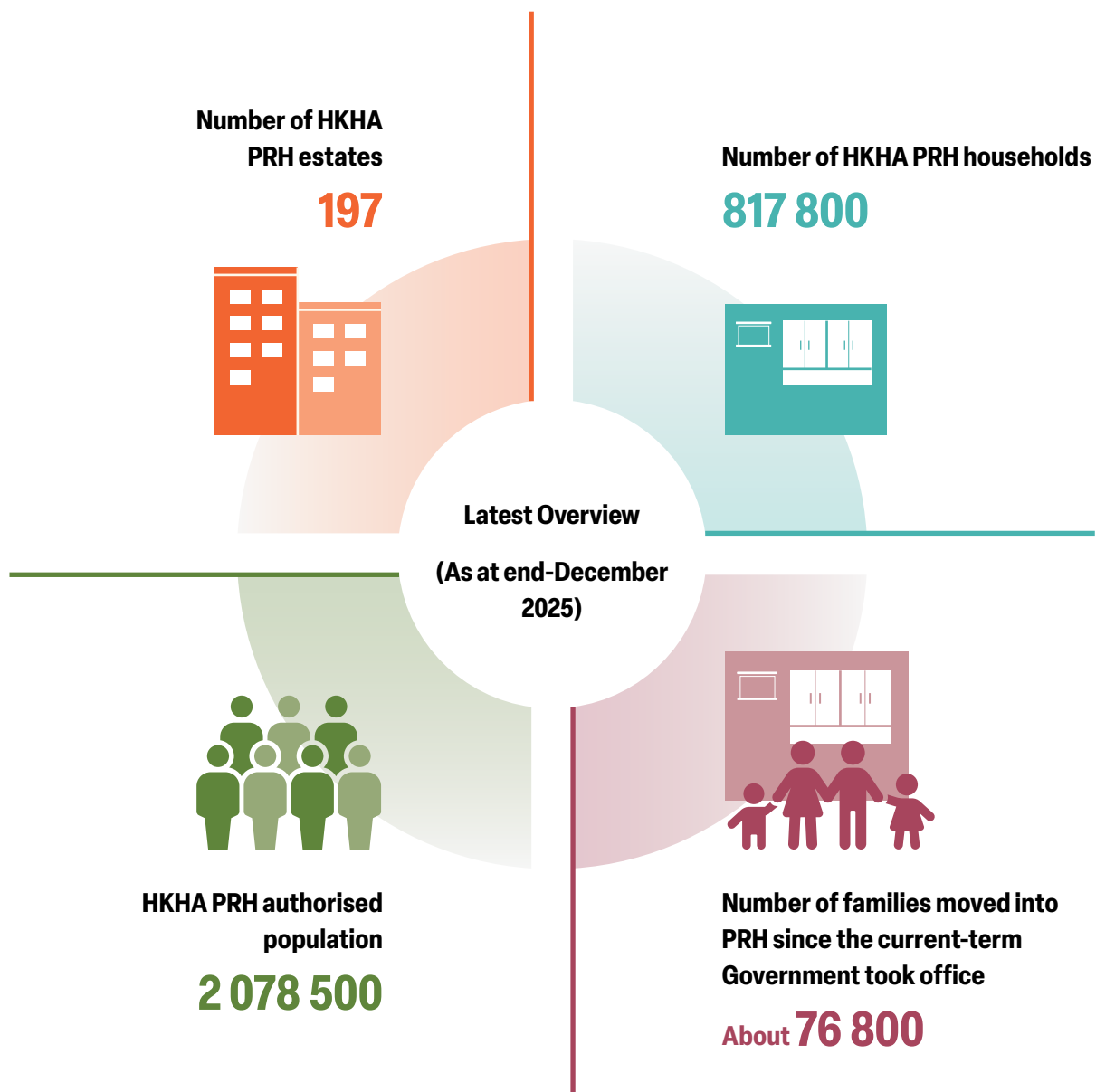


Allowance Schemes for Housing Expenditure

To alleviate the financial pressure on TH and LPH households, the Government has formulated a series of allowance schemes for housing expenditure (see **Annex 3** for details).

Public Rental Housing

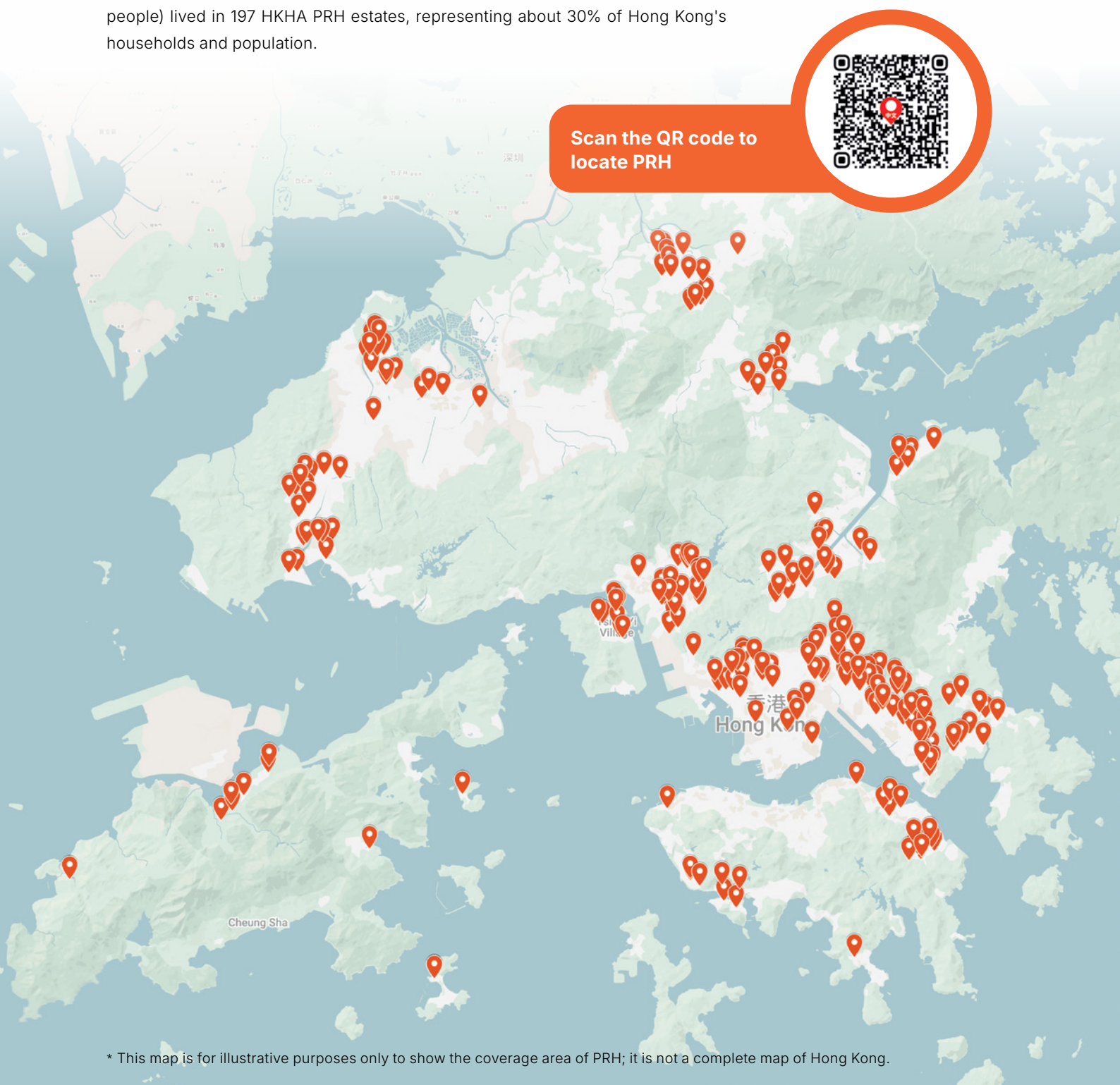
PRH serves as a safety net for grassroots and low-income families, addressing their housing needs and promoting social mobility. PRH improves the living conditions and quality of life of grassroots families and significantly lowers their housing costs. This allows them to gradually accumulate wealth and lay a solid foundation for stepping onto a higher rung of the housing ladder. The poverty alleviation results of PRH are notable. In 2025, PRH units accounted for nearly 30% of Hong Kong's overall housing stock, ranking second among selected economies (see **Annex 4** for details). In addition to providing a home for approximately 2.1 million citizens every year, over the past few decades, more than 500 000 families have achieved home ownership through the purchase of SSFs. This has allowed them to move up the housing ladder, embodying many inspiring stories of grassroots families achieving upward mobility.



Chapter 3 Impact of Macro Policy Measures on Poverty Alleviation, Combating and Prevention

As at end-December 2025, approximately 820 000 households (about 2.1 million people) lived in 197 HKHA PRH estates, representing about 30% of Hong Kong's households and population.

Scan the QR code to
locate PRH



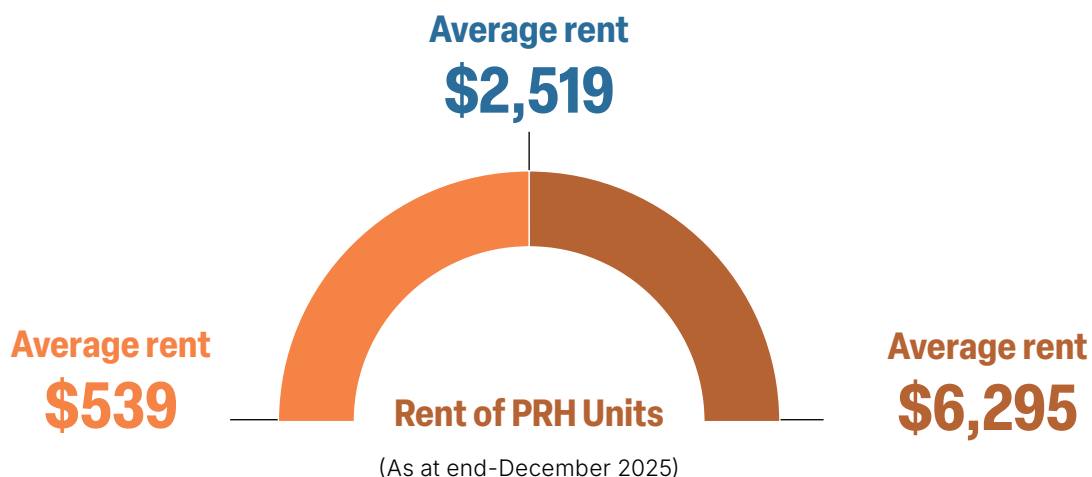
* This map is for illustrative purposes only to show the coverage area of PRH; it is not a complete map of Hong Kong.

The current-term Government has all along been striving to increase public housing supply, including rental PRH and SSF, through multiple measures to "enhance speed, quantity, efficiency and quality". The situation of back-loaded public housing production has turned around through our unremitting efforts. Coupled with LPH, the overall public housing supply in the coming five years (i.e. 2026-27 to 2030-31) will be around 196 000 units, a significant increase of over 80% compared to the first five-year period when the current-term Government took office (i.e. 2022-23 to 2026-27).

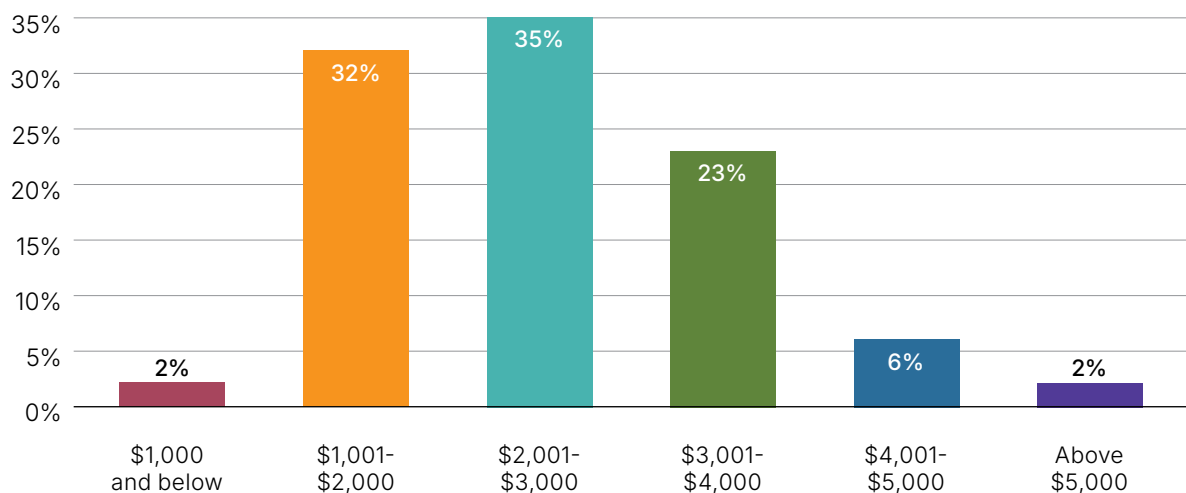
Rental Savings

Section 16A of the Housing Ordinance provides that the HKHA will conduct a rent review every two years in accordance with the mechanism stipulated in Section 16A and adjust PRH rents based on changes in the income index between the first and second periods covered by the review. Under the existing rent review mechanism, there is a 10% cap on rent increases, but no minimum limit for rent reductions. These arrangements ensure that PRH rents are affordable for tenants and provide housing security for low-income families.

Compared to rents for private accommodations, PRH rents are very low. As at end-December 2025, the average monthly rent for HKHA PRH units was only \$2,519. Rents for nearly 70% of units were less than \$3,000 per month. Compared with the average rent for a private residential flat of comparable size (i.e. around \$13,000 per month), PRH rents are only about 20% of the cost of private accommodations. This means that each PRH tenant can save more than \$10,000 on monthly rent, or about \$130,000 per year. With a total stock of over 830 000 PRH units, the total annual rental savings for the PRH population is **more than \$100 billion**.

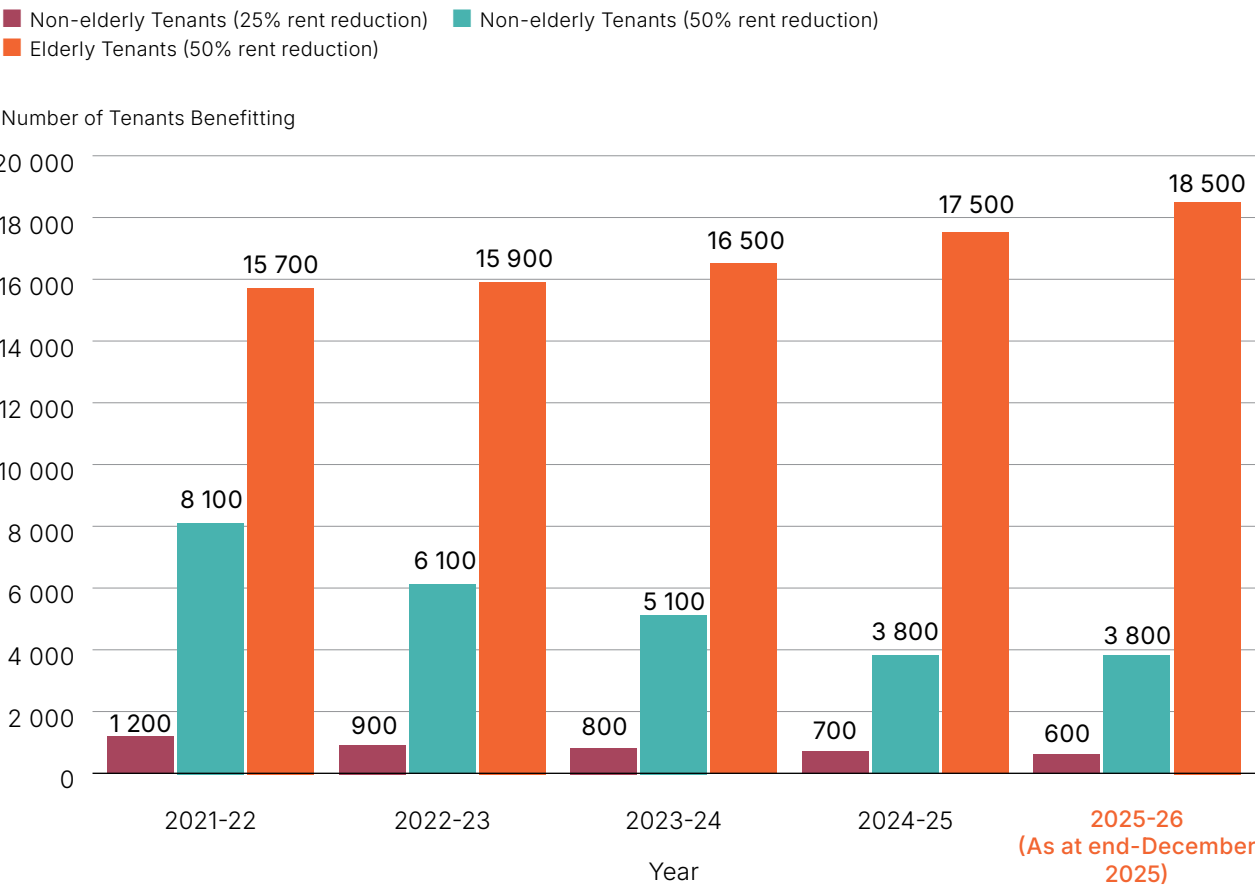


Distribution of Rent of PRH Units (As at end-December 2025)



Under the current "Well-off Tenants Policies", PRH tenants who have resided in their units for less than ten years are exempted from biennial income and asset declarations. This gives tenants a financial break and allows them to focus on accumulating wealth. Over the course of a decade, each PRH household can **save an average of over \$1.3 million** in rental expenses, providing a solid foundation for upward mobility through the housing ladder.

Number of PRH Tenants Benefiting from RAS in Recent Years



PRH tenants with temporary financial difficulties may apply for the HKHA's Rent Assistance Scheme (RAS). Depending on the level of their income, eligible applicants can receive a rent reduction of either 25% or 50% for a period of two years.

As at end-December 2025, approximately 22 800 (about 3%) PRH tenants had received various levels of rent waivers under the RAS. In the period from FY 2021-22 to 2025-26 (as at end-December 2025), the HKHA's RAS **saved nearly \$1.2 billion** in housing expenses for PRH tenants.

Enhancing Well-being

Government surveys found that PRH tenants experienced significant improvements in rental affordability, living conditions, access to amenities and well-being after moving into PRH units. Living in PRH provides residents with respite to build up their strength and accumulate wealth, eventually allowing those who are more financially stable to work towards the goal of home ownership and move up the housing ladder (see **Annex 5** for details).

Case Sharing from a Rental Assistance Beneficiary

A three-person household case sharing

A three-person non-fully elderly household, comprising a retired couple caring for their mentally handicapped son, faced financial hardship. The HD provided the family with rental assistance starting in September 2016, amounting to approximately \$100,000. In August 2024, support transitioned to the Social Welfare Department (SWD)'s Comprehensive Social Security Assistance (CSSA) rental subsidy, enabling the couple to reside securely in their PRH home and focus on taking care of their son. This reduced their long-term reliance on social services.

Poverty Alleviation Strategy and Effectiveness: The HD's RAS provided an eight-year transition period for the family, effectively easing pressures from insufficient retirement savings and the burden of disability care. Simultaneously, the SWD integrated the case into the CSSA system, ensuring seamless continuity of welfare support and preventing gaps in assistance.

Feature Stories

The HKHA has provided countless Hong Kong people with the blessing of a home. Over the years, many of them, born at the grassroots level and spending their early years in public housing estates, diligently worked their way up to become celebrities and Government officials today. If you wish to learn more about the inspiring stories of these celebrities related to PRH, please refer to the commemorative book titled "Housing for Millions — Striding across 50 Years of Public Housing", as well as in-person sharing by celebrities in the TV programme "Show You Where I Lived", produced by Television Broadcasts Limited (TVB). Scan the QR codes for their inspiring stories.



Commemorative book of the
HKHA's 50th Anniversary
"From Shelter to Home:
Striding across 50 Years of
Public Housing"



TV programme "Show
You Where I Lived"
produced by TVB
[Chinese version only]

Subsidised Sale Flats (SSF)

The HKHA has consistently aimed to help low- to middle-income families move up the housing ladder and achieve home ownership through the sale of SSFs. Over the past 50 years, the HKHA has sold more than 500 000 SSFs, providing essential support for achieving upward mobility and fostering a sense of well-being and achievement among citizens. To make SSFs more affordable to target households, the Government revised the pricing mechanism of Home Ownership Scheme (HOS) flats in 2018 so that their prices are based on the affordability of applicants and delinked from the price of the private property market. The minimum discount rate for HOS flats is 30%.

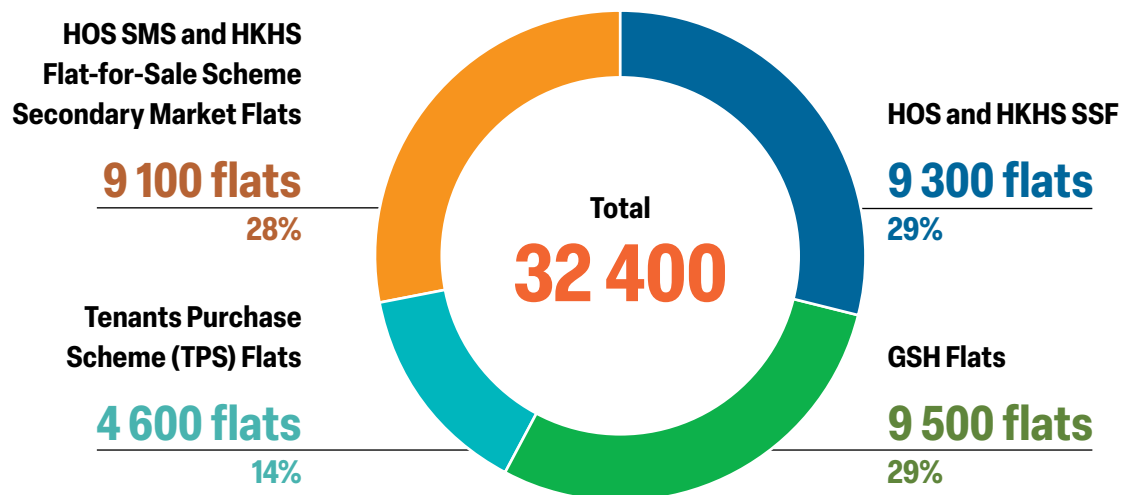
Under the revised pricing mechanism, at least 75% of the flats for sale can allow non-owner occupier households earning the median monthly household income to spend no more than 40% of their monthly income on mortgage payment. With HKHA subsidies, many low-income families can climb up the home ownership ladder and own their homes, allowing them to better plan their lives. SSFs thus become a family asset that can be passed down to the next generation, benefiting their children and continuing the legacy. The HKHA also implements the HOS Secondary Market Scheme (HOS SMS) for PRH households and Green Form Certificate holders to purchase SSFs (see **Annex 6** for details).



Under the “Sale of Green Form Subsidised Home Ownership Scheme (GSH) Flats 2024”, flats are sold at a 40% discount from the assessed market value. The selling price for a one- to two-person flat is about \$1.28 million, which represents **savings of approximately \$850,000**. With the HKHA's 95% mortgage default guarantee, assuming a mortgage repayment period of 30 years at a mortgage interest rate of 3.5%, applicants need a down payment of only approximately \$64,000 and a monthly mortgage payment of about \$5,500 to achieve home ownership.

Based on the average selling price of the entire sale exercise, a flat with an area of about 370 sq ft. costs only about \$2.47 million, representing total **savings of \$1.65 million**. The flat can be purchased with a down payment of about \$123,000. Assuming a mortgage repayment period of 30 years at a mortgage interest rate of 3.5%, the monthly mortgage payment would be about \$10,500.

**Number of SSFs of the HKHA and Hong Kong Housing Society (HKHS)
purchased by Green Form buyers since the current-term Government took office in July 2022**



Remarks: Figures may not add up to the total due to rounding.

Since the current-term Government took office (as at end-December 2025), approximately 32 400 Green Form buyers have purchased SSFs from the HKHA or HKHS, successfully moving up the housing ladder. The GSH, HOS and Tenants Purchase Scheme (TPS) offered by the HKHA have helped Green Form buyers save **over \$47 billion**.

Carrying Forward the Legacy: Enhancing the Housing Ladder to Alleviate Poverty and Promote Upward Mobility

To help low-income families achieve upward mobility on the housing ladder, the Government has invested an average of about \$3.1 million per three-person household over 10 years or more (as an illustrative example).

1st year

Assuming the monthly rent of a private domestic flat for a three-person family was:

about **\$13,000**

Total annual rental:

about **\$160,000**

Private
domestic
rental flats

Light
Public
Housing

Subsidised Sale Flats

15th year

Savings in purchasing a GSH unit as compared with a private flat:

about **\$1.65 million**

Public Rental Housing

5th to 14th years

Average monthly rent of PRH units: **\$2,519**

Monthly rental savings: over **\$10,000**

Total rental savings over 10 years:

about **\$1.3 million**

2nd to 4th years

Median monthly rent of LPH: **\$1,300**

Trial Scheme on Special Allowance for Households of LPH: **\$4,500**

Monthly rental savings: **\$4,200** (Assuming the median rent for SDUs in Hong Kong is \$5,500)

Total rental savings for 3 years:

about **\$160,000**

Impact of Macro Policy Measures on Poverty Alleviation, Combating and Prevention:

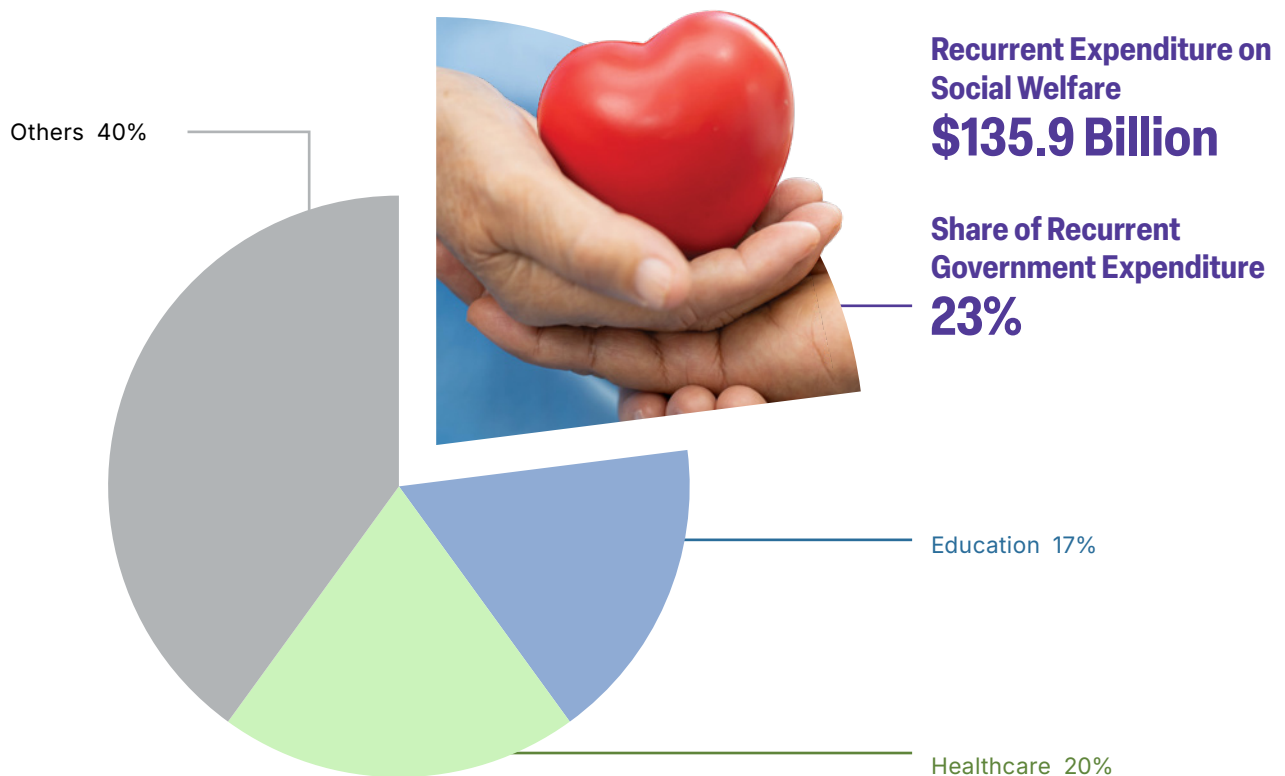
Social Welfare and Employment Services



Compassion in Action, Empowering the Future

By providing social welfare services, the Government “empowers” society to achieve self-reliance and provides a “safety net” for low-income citizens in need, thus contributing to alleviating, combating and preventing poverty.

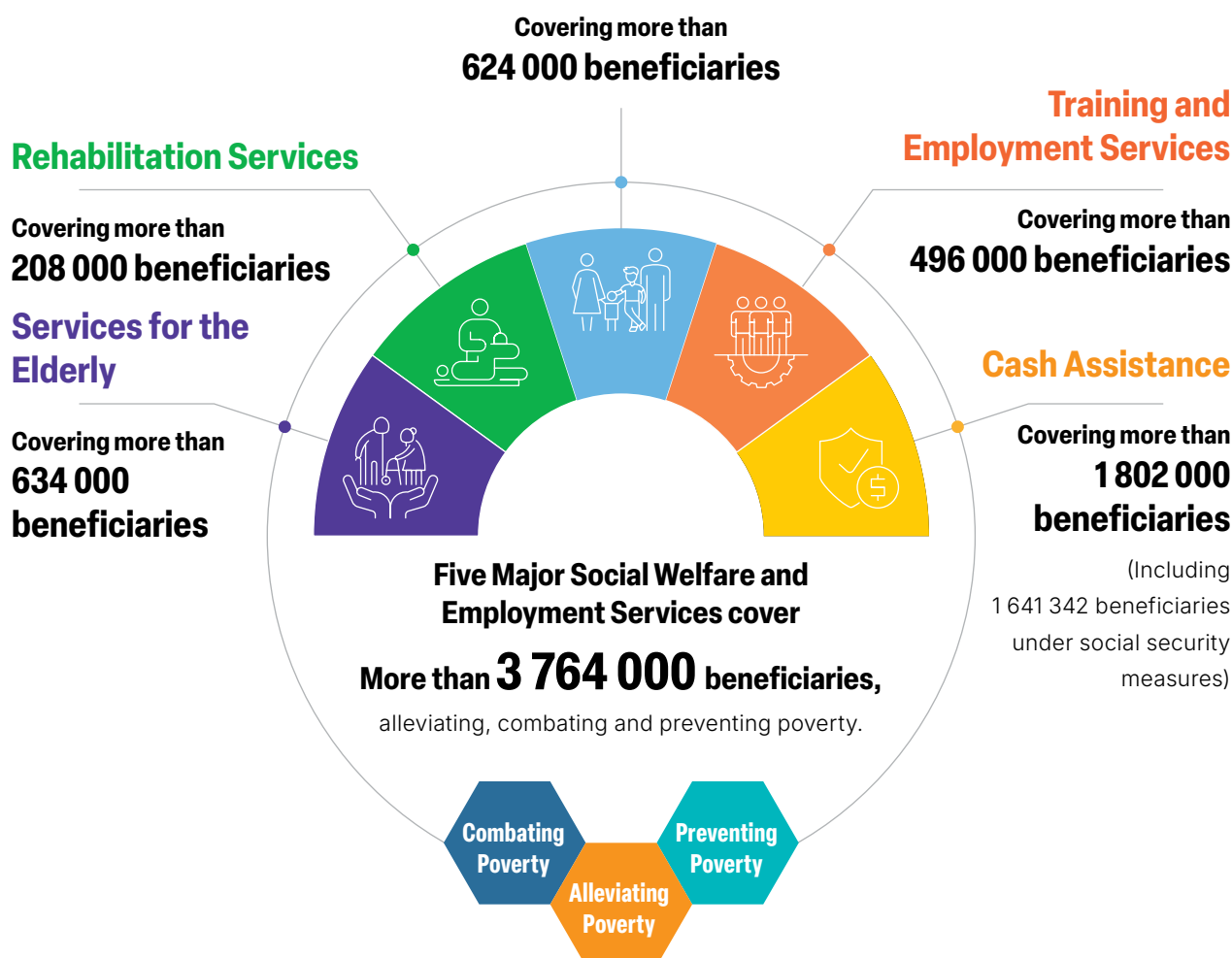
Substantial resources are dedicated to measures in the social welfare macro policy area. Recurrent expenditure increased from \$89.0 billion in Financial Year (FY) 2020-21 to \$135.9 billion in FY 2026-27, reaching an accumulated growth of 53%, accounting for 23% of total recurrent government expenditure, ranking first among all policy areas.



The Government has made good use of the resources mentioned above to provide multi-dimensional support in five policy areas under social welfare and employment services: Children, Youth and Family Services; Rehabilitation Services; Services for the Elderly; Cash Assistance; and Training and Employment Services.

Services Coverage

Children, Youth and Family Services



Remarks: There may be overlap among beneficiaries; for instance, elderly individuals who receive the Old Age Living Allowance may also receive Services for the Elderly. In addition, the number of beneficiaries does not equate to the population living in poverty. For example, older adults receiving the Old Age Allowance and using subsidised community and residential care services are not required to undergo a means test.

There are more than 4 000 social welfare and training-employment services units across all 18 districts of Hong Kong, forming a tight community network that benefits all citizens.



About 1 100

Children, Youth and Family Services Units



More than 1 700

Rehabilitation Services Units



More than 800

Units Providing Services for the Elderly



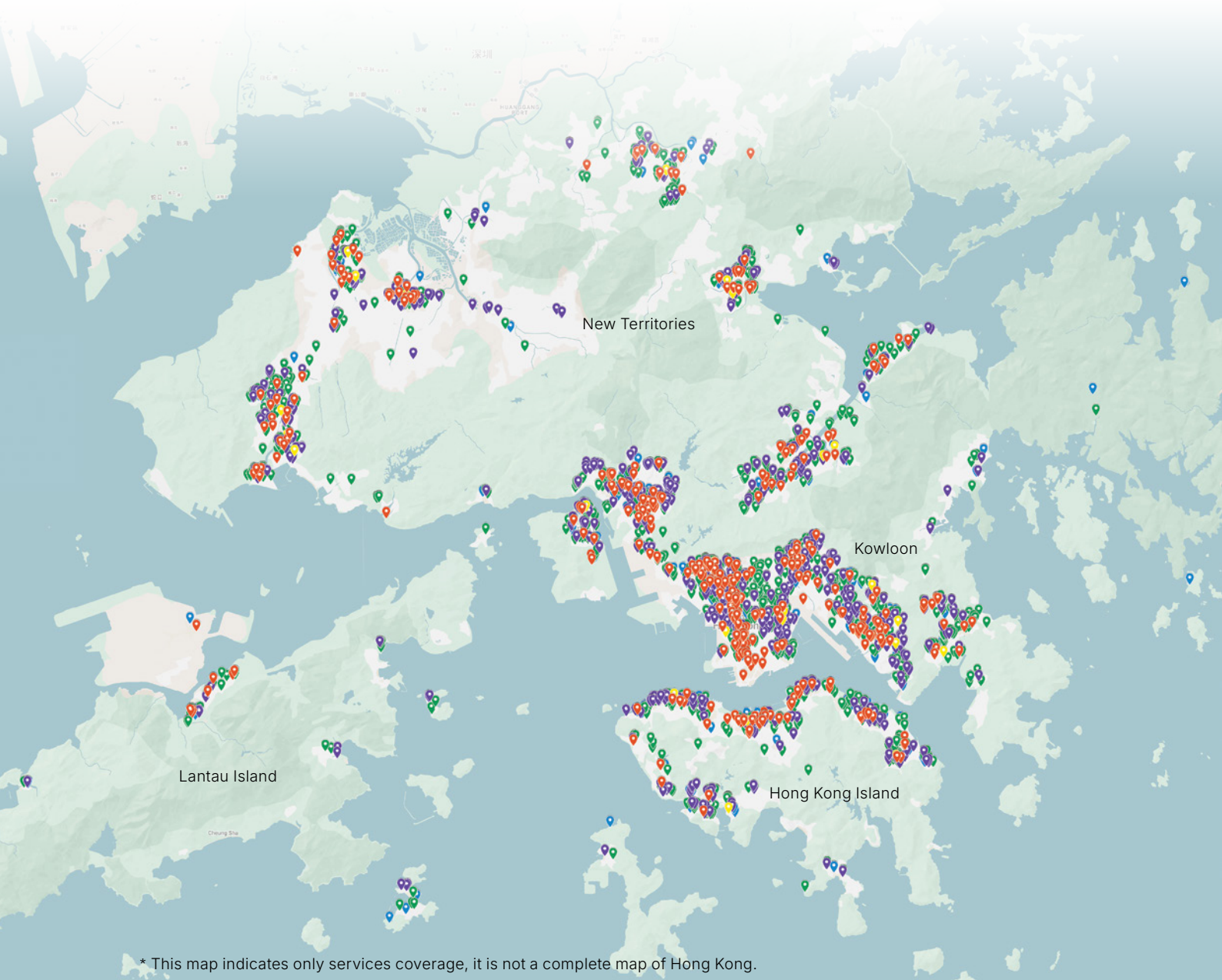
More than 40

Cash Assistance Services Units



More than 400

Training and Employment Services Units



* This map indicates only services coverage, it is not a complete map of Hong Kong.

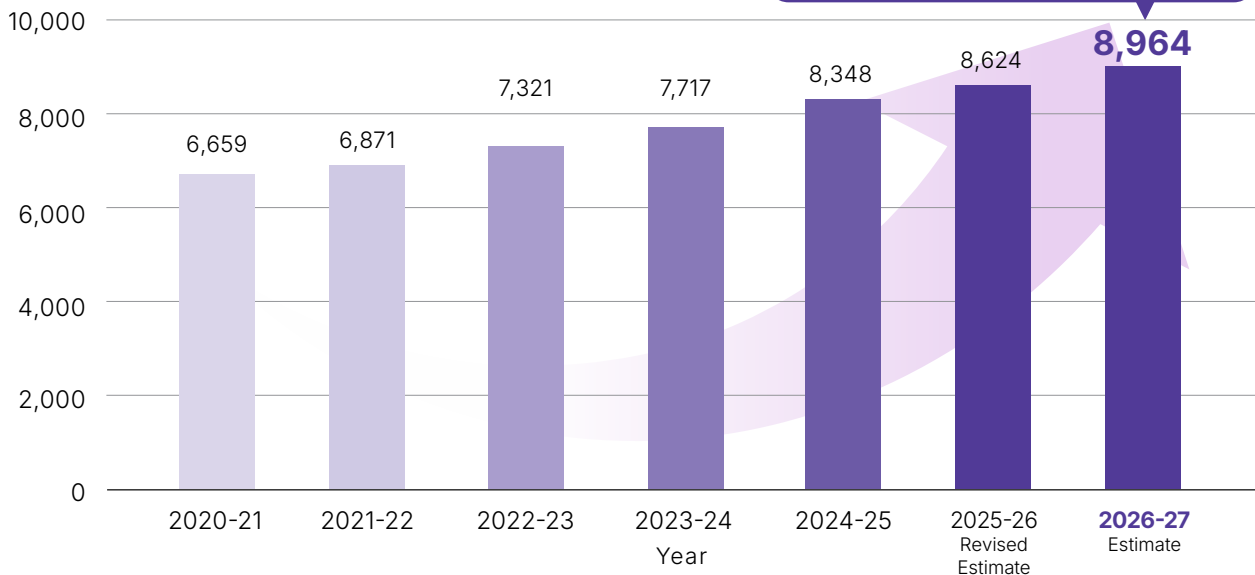
Children, Youth and Family Services

Under the “child-centred, family-focused and community-based” approach, the Government offers comprehensive support for persons aged from 0 to 24, as well as their families. These support measures seek to nurture the next generation to become responsible, contributing members of society, and to provide parents with child care support to help them seek employment, thereby helping to alleviate, combat and prevent poverty in the long term.

The recurrent financial provision of the services has reached accumulated growth of 35% over the past six years.

Financial Provision to the Social Welfare Department for Family and Child Welfare, and Young People Programmes (\$Mn)

Financial Provision (\$Mn)



Child Welfare Services

The Government is committed to providing a quality caregiving environment for children and supporting parents in need, enabling them to focus on their career or skills development to achieve self-sufficiency. The Government provides services based on the various needs of families, including the After School Care Programme for children, Day Child Care Services and Residential Child Care Services¹.



1. Please refer to Annex 1 for details of Foster Care Service.

To ensure effective service coverage, the After School Care Programme (ASCP) for Pre-primary Children of SWD has been extended to all districts across Hong Kong. As at December 2025, 28 centres provided after-school care services for pre-primary children aged three to below six, offering a total of 1 176 service places. In addition, the ASCP for Primary School Children offers fee waivers for low-income families. Some operators have extended their service hours to evenings, weekends and school holidays to support parents with long or irregular work schedules.

As at December 2025, **28** centres
provided after-school care
services for pre-primary
children aged three to
below six, offering a total
of **1 176** service places.



Beneficiary sharing in the “ASCP for Pre-primary Children”

Sharing by Mr Fung

I am a 40-year-old engineering technician. Following my wife's sudden passing, I have had to raise my two daughters, aged 3 and 7, on my own. I struggled to manage both our grief and my long working hours across districts. Under this immense pressure, I felt lost and my emotions eventually hit rock bottom.

Fortunately, with the help of a social worker, my younger daughter was enrolled in the ASCP with a fee waiver. The service provider offered a pick-up service, childcare service and a variety of activities. Through the patient guidance and companionship of the centre staff, my younger daughter has gradually become more lively. She is no longer withdrawn and proactively shares her daily experiences with me. Her self-care and social skills have also improved significantly, greatly relieving my caregiving burden. In addition, the social worker has helped me improve my communication skills and smoothen my daughter's emotions, helping me build a positive relationship with my children. As our spirits gradually recovered, I have been able to compose myself and focus on my work with peace of mind.



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to hear from
beneficiaries



The Government also provides Day Child Care Services that integrate “care” and “education”. Through games and interactive activities, and so forth, these services facilitate children’s development in various areas, including language skills, sensory perception, social skills and emotional expression. There are about 40 000 service places available in Child Care Centres (CCCs) in Hong Kong, about 9 000 of them subsidised by the Government. Additionally, the Government provides the Child Care Centre Parent Subsidy of \$1,000 per month. It also subsidises some aided CCCs to offer “Occasional Child Care Services” and “Extended Hours Services” for children aged below 6 to support families in need.

CCC services provides day care for children aged from birth to under three years, offering about 40 000 service places in Hong Kong.

About 9 000 of them are provided by aided standalone CCCs and aided CCCs attached to kindergartens subsidised by the Government.



Beneficiary sharing from Day Child Care Services

Sharing by Mr Chiang

I am a 44-year-old chef and the sole breadwinner for my family of five. My wife is a full-time caregiver of our six-year-old son with special educational needs and is currently suffering from postnatal depression after giving birth to twins about two years ago.

I wanted to apply for Day Child Care Services for the twins, but our financial situation is strained, making it a struggle to afford the fees for the twins. Luckily, with the assistance of the CCC, a social worker helped us apply for a fee reduction.

Initially, the twins would cry bitterly whenever they were separated from their mother. But thanks to the patient care and thoughtful arrangements of the staff and teachers, the twins adapted quickly. Now, they greet their teachers with smiles and open arms for a hug every morning.

This has given my wife much-needed respite and emotional support and helped her acquire healthy parenting knowledge. I can now focus on my work and strive for a better future for our children.

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To support parents with long or irregular working hours or those who have sudden engagements, the Government provides the Neighbourhood Support Child Care Project (NSCCP). This service allows parents to work with peace of mind, thereby relieving pressure on the labour force and promoting community mutual assistance. The service is categorised into two main types: centre-based care groups and home-based child care service. The former is provided by centre-based groups at the centres of the service operators, offering childcare services for children aged three to primary school age with sudden or emergency care needs. The latter provides care services by “home-based child carers” for newborn to pre-primary school children and primary school children with sudden or emergency care needs. For details, please refer to Annex 1.

Beneficiary sharing from the NSCCP

Sharing by Ms Ng

I am a 39-year-old single mother with a five-year-old son who has mild autism and a one-year-old daughter. Our family lives in public housing and relies on the Carer Allowance and my son's Disability Allowance to get by. My elderly mother can assist only with looking after my son, so I found it difficult to re-enter the workforce while caring for my young daughter. This left me constantly worried about our financial situation.

After coming across information about the NSCCP online, I approached a social worker for assistance. Following an assessment, within two weeks, the social worker arranged for a home-based child carer from our housing estate to care for my daughter. The social worker also helped us apply for a six-month service fee waiver, which alleviated our immediate financial hardship.

The home-based child carer was highly responsible and compassionate. She patiently soothed my shy, introverted daughter and paid meticulous attention to her diet, leading to my daughter's emotions becoming increasingly stable. I can finally focus on my part-time job with peace of mind. I plan to transition to full-time employment once my daughter enrolls in kindergarten, with the goal of earning a stable income and achieving self-sufficiency.

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Youth Welfare Services

The Government has set up 139 Integrated Children and Youth Services Centres (18 of which provide an Overnight Outreaching Service for Young Night Drifters), 17 Children and Youth Centres, 19 Youth Outreaching Teams, and five Cyber Youth Support Teams across all districts to provide a series of services for young people aged 6 to 24.

Family Welfare Services

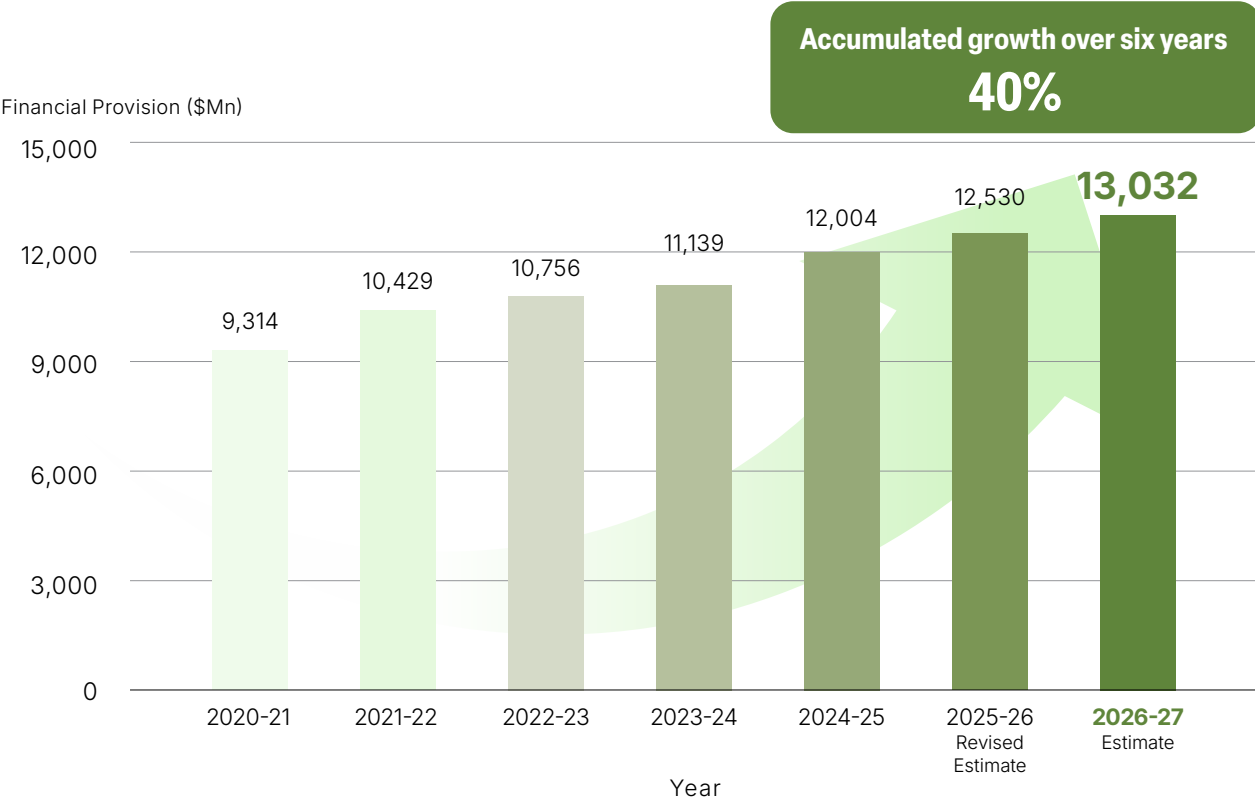
The Government provides three levels of services to families in need to help maintain family ties, preserve and strengthen family cohesion, consolidate family functions, and prevent and handle personal and family problems:

- First level: Early identification and prevention of family problems through public education and publicity.
- Second level: Preventive, supportive and remedial family services through 65 Integrated Family Service Centres and two Integrated Service Centres. The service centres handled more than 80 000 cases in 2024.
- Third level: 11 Family and Child Protective Services Units provide specialised services for cases involving domestic violence, child abuse, and disputes over child custody and guardianship. The Units handled nearly 6 300 cases in 2024. In addition, five Specialised Co-parenting Support Centres provide co-parenting support services for separated/divorcing/divorced parents and their children. The Government also coordinates relevant departments and non-governmental organisations to provide support and specialised services for victims of domestic and sexual violence.

Rehabilitation Services

The Government has been actively investing resources in enhancing Rehabilitation Services. Over the past six years, there has been accumulated growth of 40% in the related financial provision. By providing various rehabilitation services, the Government helps persons with disabilities unleash their potential and integrate into society; and supports caregivers, alleviating their caregiving pressure and burden and helping them rejoin the workforce, thus improving their household financial condition and living quality, and ultimately alleviating, combating and preventing poverty.

Financial Provision to the Labour and Welfare Bureau and SWD on Rehabilitation and Medical Social Services (\$Mn)





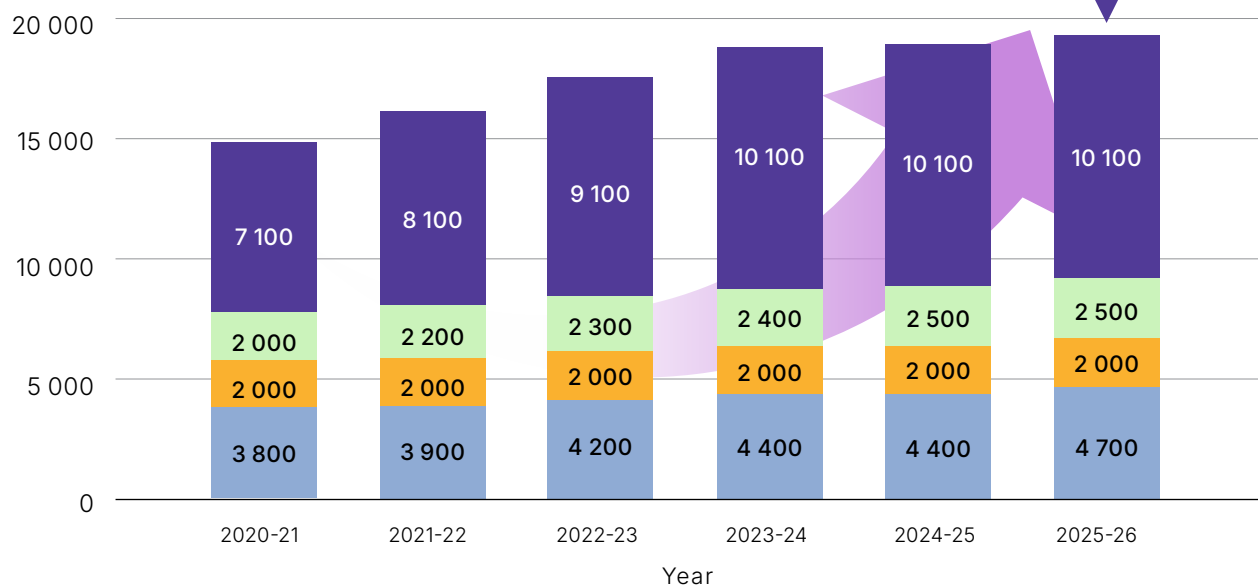
Pre-school Rehabilitation Services

The Government provides early intervention for children with special needs through the Early Education and Training Centre (EETC), the Integrated Programme in Kindergarten-cum-Child Care Centre (IP), the Special Child Care Centre (SCCC), and the On-site Pre-school Rehabilitation Services (OPRS). These initiatives aim to enhance their physical, psychological and social development to improve their opportunities for attending ordinary schools and participating in daily activities.

Pre-school Rehabilitation Services Places

■ EETC ■ IP ■ SCCC ■ OPRS

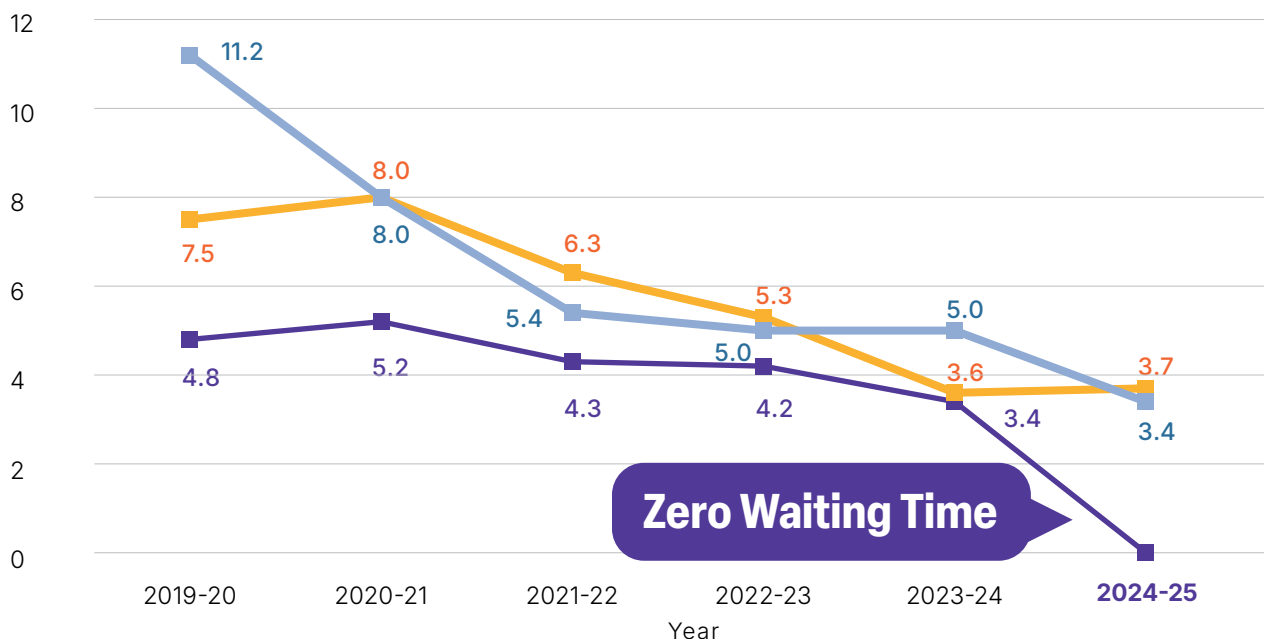
Services Places



Pre-school Rehabilitation Services Waiting Times

■ EETC ■ IP ■ OPRS

Waiting Time (Months)



The Government provides OPRS for pre-school children with special needs, enabling them to receive timely and comprehensive training during their critical developmental period and alleviating the stress and burden on parents. As of December 2025, the service places had increased to more than 10 100, reflecting accumulated growth of 30% over the previous five years, covering nearly 900 kindergartens/kindergarten-cum-child care centres across 90% of Hong Kong. Starting in the 2024-25 financial year, the OPRS has achieved "zero waiting time". The Government also provides "Training Subsidy Programme for Children on the Waiting List of Subvented Pre-school Rehabilitation Services" for children on the waiting list to receive services as soon as possible.



OPRS Case Sharing

Sharing by a Social Worker

Ali is a three-year-old child with special needs, who comes from a Pakistani family. He was quiet but tended to scream and hit people in unfamiliar environments. His parents struggled to understand the importance of pre-school rehabilitation services to Ali because of language barriers.

Fortunately, the OPRS service team assessed Ali's situation at his kindergarten and tailored a training plan for him. They developed some special therapeutic tools catering for cultural differences to spark Ali's interest and encourage him to communicate with those around him. Ali gradually learnt to follow classroom rules and interact appropriately with his classmates. At the graduation ceremony, he wore a graduation gown and delivered a speech, moving the entire audience with his remarkable progress. Now, Ali is in Primary One where he can take care of himself and learn to solve problems

The service team also facilitated his family's integration into the community through various activities and group sharing sessions. The parents are grateful for the service provided by the service team and share their experience with other Pakistani parents, encouraging them to seek help as well.

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Community Support Services

The Government provides a diverse range of rehabilitation services for individuals with disabilities living in the community. These services aim to alleviate the stress of carers and help them re-enter the workforce, thereby improving the financial situation of households. The services include centre-based services, home-based services, and day and residential respite services.

Various centres offer community support services in response to various needs of persons with disabilities across districts of Hong Kong. These include Integrated Community Centres for Mental Wellness, District Support Centres for Persons with Disabilities, Parents/Relatives Resource Centres, Social and Recreational Centres for persons with disabilities and Community Rehabilitation Day Centres. The Government also plans to establish 14 "Integrated Community Rehabilitation Centres" in phases, providing persons with disabilities requiring medium to high level care needs with integrated community support services through a case-management approach.

Sharing from a Community Rehabilitation Service Beneficiary

Sharing by Mr Chiu

I am 55 years old and was the breadwinner for my family. I live with my elderly parents, wife and two children. Unfortunately, I suffered a stroke that resulted in partial paralysis and left me unable to work, forcing me to rely on my wife for our daily needs, causing significant financial and psychological stress for my family and me. I sought help from the Integrated Community Rehabilitation Centre, which provides professional rehabilitation services and home-based support services. The Rehabilitation Team (comprising therapists, nurses and social workers) helped me set clear rehabilitation goals and regularly reviewed my progress. The support and services I received significantly improved my self-care, mobility and speech abilities. I was able to find a part-time job, which greatly reduced my wife's caregiving burden and our family's financial stress. As a result, our quality of life improved, and we gradually overcame our difficulties.



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Home-based services include "Home Care Service for Persons with Severe Disabilities" and "Integrated Support Service for Persons with Severe Physical Disabilities", providing home-based support services for persons with severe and moderate disabilities, including personal care, nursing care and rehabilitation training, etc. Day and residential respite services provide persons with disabilities living in the community with short-term care service. They provide relief for carers so that they may take a break or attend to personal matters when required.

Sharing from a Respite Service Beneficiary

Sharing by Mr Yeung

I am 40 years old. I was hospitalised for medical treatment and could not take care of my daughter, so I called the Designated Hotline for Carer Support (the Hotline) for assistance. The Hotline arranged residential respite service for my daughter and helped me apply for financial assistance covering respite service fees, medical checkup fees and transportation costs. Their assistance eased my stress and financial burden as a caregiver, allowing me to focus on my recovery.



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Residential Care Services (RCS)

The Government provides subvented RCS for persons with disabilities who are unable to live independently in the community or cannot be adequately cared for by their families. A variety of residences cater for persons with specific rehabilitation needs.

Sharing from a Residential Care Services Beneficiary

Sharing by Ms Kong

I am a 63-year-old single mother suffering from mental illness and cancer. I have to singlehandedly look after my 27-year-old son with moderate intellectual disability and autism. He has a history of absconding from home, frequently shoplifting food from convenience stores, and even scavenging from trash bins for food. Close monitoring of his behaviour left me physically and emotionally exhausted.

After a social worker became involved with my family, my son was helped to apply for services at the Day Activity Centre (DAC) and Hostel for Severely Mentally Handicapped Persons. The hostel offered him a safe, home-like accommodation. During the day, he received training at the DAC, which improved his self-care abilities, and helped him develop social skills and simple job skills, making him more independent in daily life. He learnt how to express his emotions and needs, and his behaviour gradually improved.

With my caregiving stress alleviated, I now have more time to focus on my own health. As a result, my physical and mental well-being have been gradually improving.

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Vocational Rehabilitation and Training Services

These services aim to improve the self-care abilities of persons with disabilities and help them develop their potential and integrate into society, giving full play to their strengths. The service network includes the DAC, the Integrated Vocational Rehabilitation Services Centre (IVRSC), the Integrated Vocational Training Centre, and Service Units of Supported Employment Training for Persons with Disabilities and Shine Skills Centres run by the Vocational Training Council (VTC). (For details, please refer to Annex 2.)

The “Stepping Stone Pilot Scheme on Subsidy to Encourage Employment of Disabled Recipients under the Comprehensive Social Security Assistance (CSSA) Scheme” provides an additional monthly employment subsidy to CSSA recipients with disabilities who have jobs. Since the launch of the Scheme in September 2024, it has benefited more than 7 000 persons with disabilities who have entered the workforce.

In addition, the Government regularised the “Pilot Project on Enhancing Vocational Rehabilitation Services” starting in July 2025 to improve the service and training mode of Sheltered Workshops and the IVRSC in stages. The Sheltered Workshops were simultaneously transformed into IVRSCs to provide assessments for all service users, tailor training courses to their abilities, willingness and learning progress, and arrange job attachments and matching. The arrangement increases the job knowledge and skills of service users and improves their employment opportunities.

Sharing from a Beneficiary under the “Pilot Project on Enhancing Vocational Rehabilitation Services”

Sharing by Mr Lui

I am a 45-year-old person in mental recovery, with a mild intellectual disability. I have worked in a sheltered workshop for many years. Encouraged by a social worker, I joined the “Pilot Project on Enhancing Vocational Rehabilitation Services” and started a job attachment as a shop assistant in a rehabilitation supplies store. At first, I felt nervous when facing customer inquiries, but with the continuous encouragement and support from my employer and social worker, I gradually adjusted and improved. Now, I am more confident and hope to become a full-time employee in the future. My story proves that as long as we are willing to try, everyone can lead a fulfilling life!

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Employment measures and support services

The Government creates employment and on-the-job training opportunities for persons with disabilities through various schemes² to help them become employed and self-reliant. For instance, the “Enhancing Employment of People with Disabilities through Small Enterprise” Project (the 3E Project) funds non-governmental organisations to set up businesses and create work opportunities for persons with disabilities. As at end-November 2025, total grants of over \$185 million had been approved under the 3E Project to set up 148 businesses, creating a total of approximately 1 460 jobs, about 1 020 (70%) of which are specifically for persons with disabilities.

The Selective Placement Division of the Labour Department (LD) provides personalised employment services for job seekers with disabilities who are fit for open employment, and through the “Work Orientation and Placement Scheme”, provides employers with an on-the-job training allowance during a nine-month subsidy period to encourage them to employ persons with disabilities.



2. Please refer to Annex 2 for details about the “Caring Employer” medal.

Funds for Specific Groups

The Government also provides financial support to persons with disabilities to enhance their talent in arts and sports. The “Arts Development Fund for Persons with Disabilities” had approved 168 projects from 99 service units across six batches of applications as at the end of 2025. The “Hong Kong Paralympians Fund” supports athletes with disabilities during all stages of their sporting career and thereafter.

The “Arts Development Fund for Persons with Disabilities” had approved **168** projects.



Sharing of a Beneficiary of the “Hong Kong Paralympians Fund”

Sharing by Mr Chan

I am 40 years old. Following a serious car accident, I lost a leg and now rely on a prosthetic limb for mobility. After discovering wheelchair badminton, I found a new direction in life and eventually became a member of the Hong Kong wheelchair badminton team. With the direct financial grant allocated to elite athletes with disabilities and the subsistence grant from the “Hong Kong Paralympians Fund”, I was able to fully dedicate myself to training and pursuing sporting excellence in international events. I won medals in wheelchair badminton events when representing Hong Kong at the Paralympic Games in 2020 and 2024, bringing honour to Hong Kong. To share my journey, I authored a book and actively engage in advocacy work for sports and services for persons with disabilities, promoting the value of athletics and the spirit of perseverance.



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Supporting Carers

The Government provides a range of support services for carers of elderly persons and persons with disabilities to reduce caregiver stress. In July 2025, the Government launched the first phase of the Carer Support Data Platform, initially connecting data from the SWD, the Hospital Authority (HA) and the Hong Kong Housing Authority (HKHA). When the HA identifies a high-risk caregiver who has been hospitalised, the SWD arranges outreach to the care recipients and offers emergency support tailored to their needs. The Government will progressively connect the data of more government departments and public organisations to expand the Carer Support Data Platform. With the support of the Data Platform, the Government identifies high-risk caregivers of elderly persons and caregivers of persons with disabilities, as well as singleton and doubleton elderly households, and deploys Care Teams to conduct visits.

The Government provides a living allowance for caregivers from low-income families, and a special care subsidy scheme for individuals with severe disabilities (Please refer to Annex 2 for details). In addition, the Government has set up community-based support projects for persons with disabilities and their families and a “Designated Hotline for Carer Support” (Please refer to Annex 2 for details). The Government also set up a Designated Team in each of the 21 District Support Centres for Persons with Disabilities across the territory, providing training in self-care and interaction skills for special school leavers six months before graduation. This initiative also includes post-school care plans within 18 months and links them with community support services to help them make a smooth transition from school to community living and alleviate caregiver stress. Annex 2 has more details on the projects and schemes under “Rehabilitation Services”.

A Designated Team was set up in each of the 21 District Support Centres for Persons with Disabilities to alleviate pressure on caregivers.



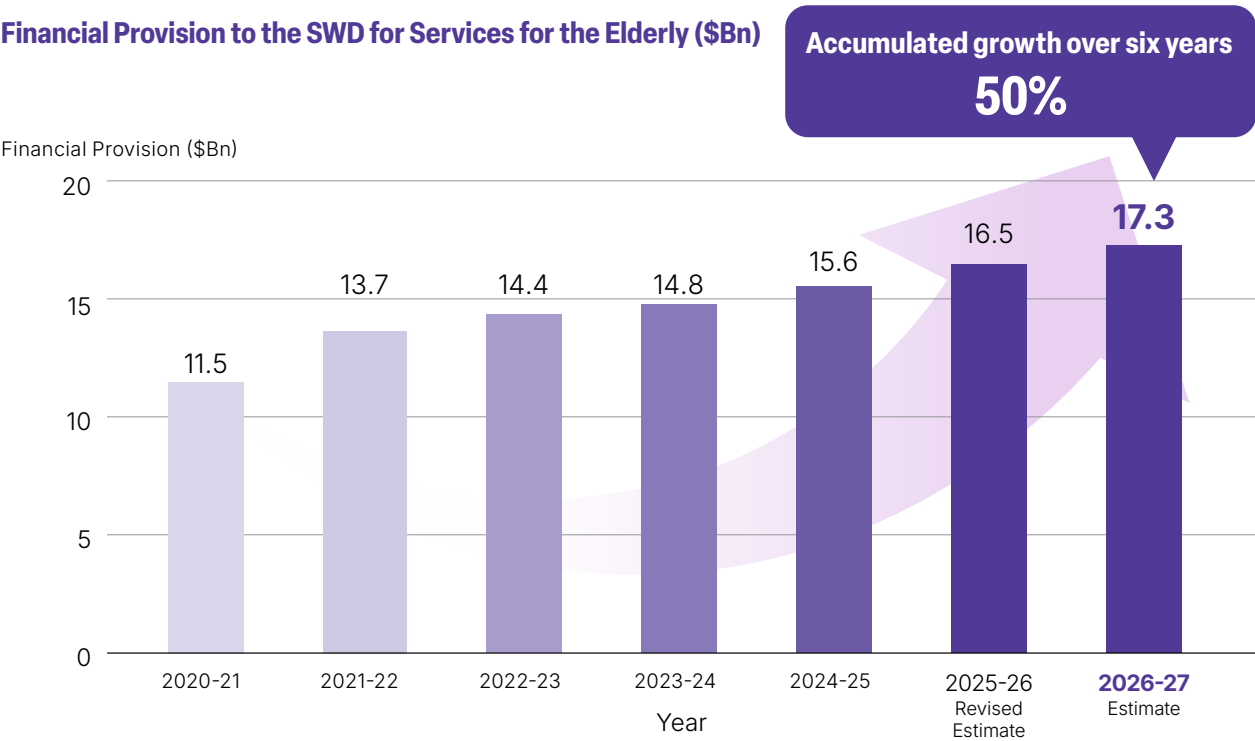
Services for the Elderly

To address Hong Kong’s ageing population, the Government adheres to the policy directive of “ageing in place as the core, with institutional care as back-up” when planning and providing welfare facilities and services for the elderly. This approach caters for their diverse needs and supports their caregivers, thus positively impacting poverty alleviation.



The Government provides a range of subsidised care and support services for the elderly according to their level of frailty. Over 90% of the costs of these subsidised services are borne by the Government, so that elderly persons in need will not be deprived of adequate care or support because of financial constraints.

Financial Provision to the SWD for Services for the Elderly (\$Bn)



Support for elderly persons to age in place

Frail elderly individuals assessed by the Standardised Care Need Assessment Mechanism for Elderly Services (SCNAMES) of the SWD as suitable for receiving community or residential care services may choose “home-based” services (including meal services, rehabilitation exercise and nursing care) or “centre-based” services. As at the end of December 2025, about 13 200 and 6 300 elderly persons were receiving “home-based” and “centre-based” community care services, respectively. They may also opt to receive community care services through the “Community Care Service Voucher (CCSV) Scheme for the Elderly” under the “money-following-the-user” model. As at the end of December 2025, approximately 13 400 elderly persons were using the CCSVs. Approximately 19 700 elderly persons with mild impairment had received home support services, including personal care, household cleaning and meal services at the same time point.

Elderly individuals in better health can join the District Elderly Community Centres or Neighbourhood Elderly Centres across the territory as members to connect with their communities. As at the end of December 2025, there were a total of about 290 000 members in all elderly centres in Hong Kong.

There were a total of about
290 000 members in
all elderly centres in Hong Kong.



Sharing from a Beneficiary under the “CCSV Scheme for the Elderly”

Sharing by Uncle Leung

I am in my eighties and live with my son and daughter-in-law. After I suffered a stroke and developed dementia, my communication and self-care abilities diminished. After recovering from COVID-19 and being discharged from hospital, my health deteriorated significantly. My family was deeply concerned about my future care arrangements. Under the SCNAMES, I was assessed as suitable for community care services and opted for the CCSV Scheme for the Elderly. The service provider promptly arranged for a professional staff member to perform physiotherapy for me at my home. After a period of continued training, my mobility improved markedly, allowing me to attend a day care centre for rehabilitation exercises and participate in social activities.

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Sharing from a Respite Service Beneficiary

Sharing by Auntie Chu

I am approaching 70 years old. I have to take care my 94-year-old mother, who is unable to take care of herself and is wheelchair-bound. I once employed a foreign domestic helper to help me take care of her, but the helper suddenly had visa problems. I felt lost and anxious, so I turned to a day care centre for the elderly to seek immediate respite services. The Centre's social worker arranged respite services for my mother to ensure that she received appropriate care, giving me some buffer time to handle caregiving arrangements.

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Subsidised residential care services for the elderly

Elderly persons assessed by the SCNAMES as needing long-term residential care may apply for subsidised residential care services. As at the end of December 2025, there were about 39 000 subsidised residential care places in the territory (including places subsidised by the Residential Care Service Voucher Scheme for the Elderly).

Sharing from a Beneficiary under Residential Care Services for the Elderly

Sharing by Ms Li

I am 37 years old and suffer from Systemic Lupus Erythematosus. I have to take care of my elderly parents on my own. This burden became overwhelming when my mother was hospitalised after a fall, which severely impaired her ability to take care of herself. A medical social worker introduced residential care services for the elderly to me. With my mother receiving adequate care, my caregiving pressure was greatly alleviated, which also stabilised my physical and mental wellbeing. I now have more time and energy to continue caring for my parents.

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“Residential Care Services Scheme in Guangdong”

The “Residential Care Services Scheme in Guangdong” provides one more option for frail Hong Kong elderly persons waitlisted for subsidised residential care services. As at the end of March 2026, there were 26 Residential Care Homes for the Elderly (RCHes) in the Chinese Mainland under the Scheme, located in nine Chinese Mainland cities within the Guangdong-Hong Kong-Macao Greater Bay Area (GBA), serving about 1 100 elderly residents. In late December 2025, the Government launched a Pilot Medical Subsidy Arrangement for two years, which subsidises elderly participants for their self-paid medical expenses under the coverage of the National Basic Medical Insurance Policy.

Sharing from a Beneficiary under the “Residential Care Services Scheme in Guangdong”

Sharing by Auntie Kwok

I am 92 years old and used to live in Hong Kong. During the COVID-19 pandemic, I went to Guangzhou to visit my relatives and was hospitalised for treatment after an accidental fall. Upon discharge, I had to use a wheelchair and required assistance, so I participated in the “Residential Care Services Scheme in Guangdong” and moved into a residential care home in Guangdong. I am very satisfied with life in the local care home. The staff provide high-quality services and thoughtful care. I have gradually regained my mobility and can now take slow walks within the care home. The transportation network between Hong Kong and Guangdong is convenient, so my son visits me two to three times a week.

Scan the QR code
to hear from
beneficiaries



Cash Assistance

Social security cash assistance comprises the Comprehensive Social Security Assistance (CSSA) Scheme and the Social Security Allowance (SSA) Scheme. Beneficiaries receive suitable cash assistance on a non-contributory basis to meet their living needs.

The CSSA Scheme provides a safety net of last resort for persons who cannot support themselves financially for various reasons, such as old age, illness, disability, single parenthood, unemployment and low earnings, to meet their basic needs. The disregarded earnings arrangement under the CSSA Scheme encourages recipients to secure employment, work continuously and achieve self-reliance. The SSA Scheme provides a monthly cash allowance to Hong Kong residents aged 65 or above or severely disabled to meet special needs arising from old age or severe disability. The SSA Scheme comprises the Old Age Living Allowance (OALA), Old Age Allowance (OAA) and Disability Allowance (DA).

The estimated recurrent expenditure on social security in FY 2026-27 is projected to reach \$85.2 billion, a 51% increase over that in FY 2020-21. As at end-December 2025, about 1.64 million Hong Kong residents had benefitted from these cash assistance schemes.

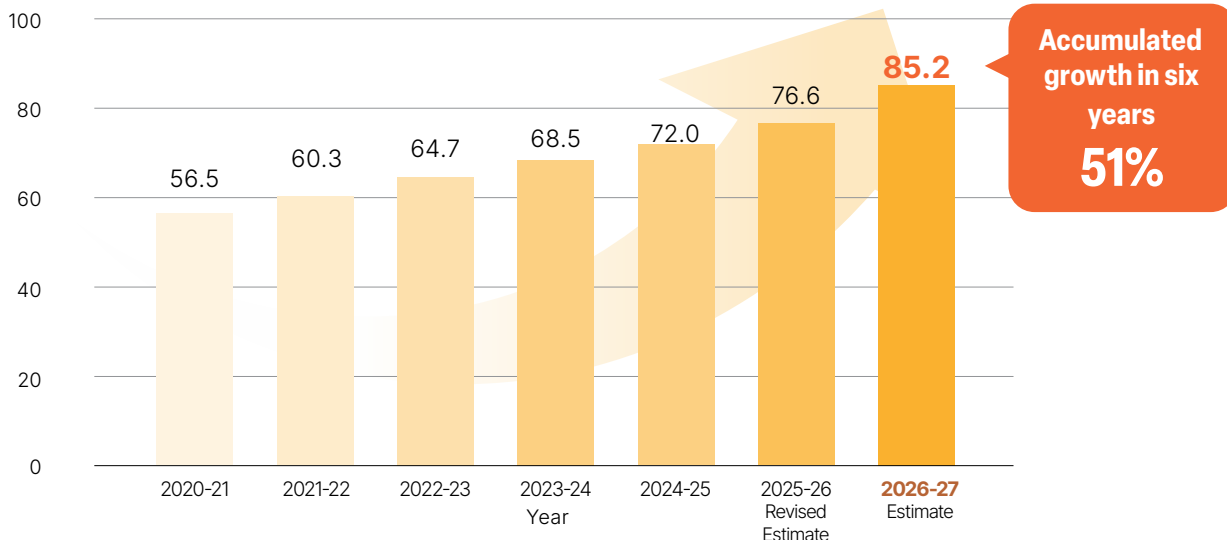


Number of social security beneficiaries (December 2025)

Scheme	Number
CSSA Scheme	256 518
SSA Scheme	
OALA	794 453
OAA	375 217
DA	184 999
Guangdong Scheme	27 555
Fujian Scheme	2 600
Total	1 641 342

Recurrent Expenditure on CSSA and SSA Schemes (\$Bn)

Recurrent Expenditure (\$Bn)



The Government provides cash assistance, including the CSSA, OALA and OAA, to eligible Hong Kong elderly persons who choose to retire in Guangdong or Fujian provinces through portable cash assistance measures, including the Portable CSSA (PCSSA) Scheme under the CSSA Scheme, and the Guangdong Scheme and Fujian Scheme under the SSA Scheme. As at end-December 2025, about 28 100 and 2 600 elderly persons retiring in Guangdong and Fujian provinces, respectively, had received portable cash assistance. In addition, in October 2025, the Government launched a three-year pilot scheme to subsidise elderly CSSA recipients who choose to reside in designated residential care homes for the elderly in Guangdong. Each eligible elderly recipient will receive a monthly subsidy of \$5,000, with a quota of 1 000 recipients.

Sharing from a PCSSA Recipient

Sharing by Mr Lam

I am a 65-year-old CSSA recipient. I lost my right arm several years ago in an accident, which rendered me unable to work. Facing high living costs, cramped living conditions and a lack of adequate care, I decided to join the PCSSA Scheme. I returned to my hometown in Jiangmen to retire, while continuing to receive monthly CSSA payments.

In Jiangmen, the cost of living is lower, so the CSSA payments are sufficient to meet my daily needs. My living environment and space have also significantly improved. I am now enjoying family life and spending leisure time with my old friends, which has enriched my social life and allows me to enjoy my later years in comfort.

Scan the QR code
to hear from
beneficiaries



Working Family Allowance Scheme

The Government provides support for lower-income working households who are not receiving the CSSA through the Working Family Allowance (WFA) Scheme to alleviate their financial burden and encourage self-reliance. The amount of the WFA depends on the household's working hours, income and asset levels. The WFA Scheme also provides additional allowances to households with eligible children and youth. As at end-December 2025, there were about 47 000 "active WFA households" (i.e. households which had received approval for the WFA and have submitted their latest WFA applications in the past six months according to the records of the Working Family Allowance Office), benefitting 160 000 persons (including 70 000 children and youth).

Recurrent expenditure for the WFA Scheme (\$Mn)

2020-21	1,769
2021-22	2,062
2022-23	2,023
2023-24	1,713
2024-25	1,834
2025-26 (Revised Estimate)	1,846
2026-27 (Estimate)	2,068

Sharing from a Beneficiary under the WFA Scheme

Sharing by Ms Chan

I am a working mother striving to meet the needs of my child as he grows. However, tutoring classes and extra-curricular activities are costly. Despite having a stable job, my modest salary is insufficient to balance our daily living expenses with these extra costs. The WFA helps subsidise my living expenses, giving me the means to enrol my child in extra-curricular activities. It has also relieved my financial burden and motivated me to continue working hard to provide a better living environment for my family.



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Training and Employment Services

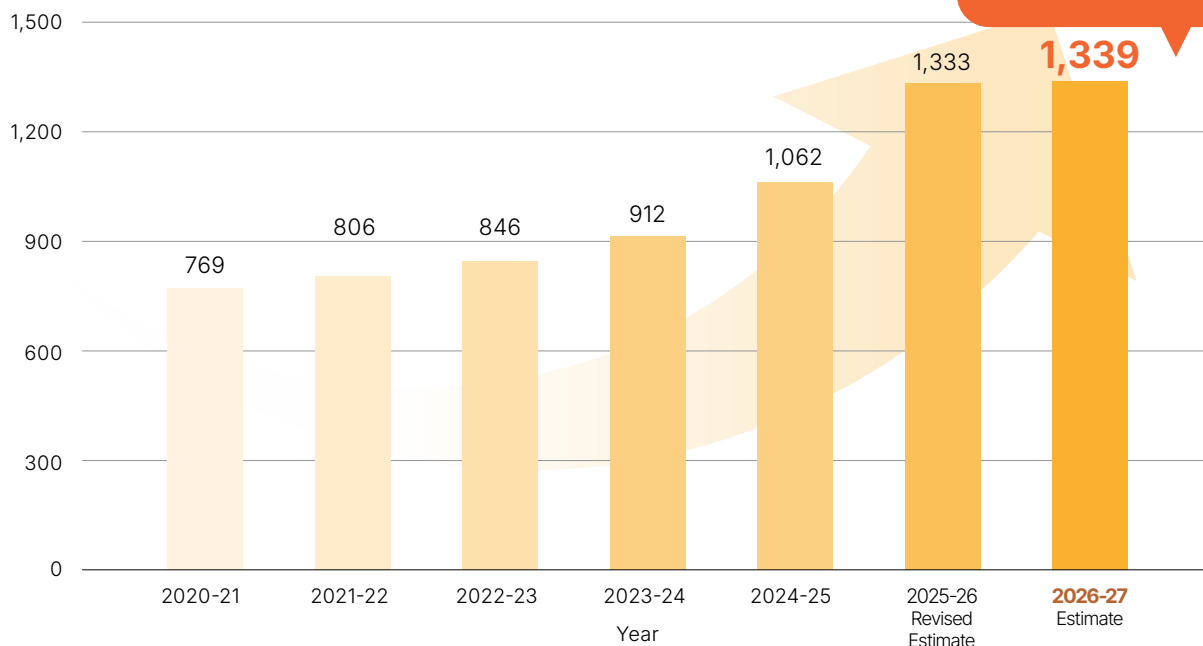
The Government attaches great importance to the development of manpower resources, continuously investing in a variety of training and employment support programmes to improve the adaptability and competitiveness of the workforce. This creates opportunities for upward mobility, thus contributing to alleviating, combating and preventing poverty. Over the past five years, recurrent expenditure on the relevant services has reached accumulated growth of 74%. Various bureaux and departments implement sector-specific talent training programmes in response to the latest industry developments and manpower situation.



Employers who successfully employ imported workers are required to pay a levy that goes to the Employees Retraining Board (ERB) to provide training and retraining for local workers. The ERB promotes continuous learning and skills upgrading for all, targeting the entire local workforce aged 15 and above with no restriction on educational attainment. The ERB provides market-oriented, skill-based training, retraining and employment support services, including vocational skills training for various industries, generic skills, skills upgrading and career planning. The aim is to help various groups of trainees (including in-service workers, the unemployed, people with different levels of education and the latent labour force) acquire vocational skills to improve their employability. Placement-tied courses offered by the ERB are dedicated to the unemployed, providing retraining allowances and a placement follow-up service to help trainees enter the job market. The ERB also provides dedicated courses for young people, persons with disabilities and those recovering from work injuries, rehabilitated persons, ethnic minorities and new arrivals to cater for their training and employment needs. Through about 80 training bodies, the ERB offers more than 800 training courses spanning 28 industries at 370 training centres, providing no fewer than 165 000 training places in FY 2025-26. The ERB's costs are paid by the Employees Retraining Fund, managed by the Board.

Financial Provision to the LD and the VTC for Training and Employment Services (\$Mn)

Financial Provision (\$Mn)



Sharing from a Beneficiary of Training Services

Sharing by Mr Suen

I am 27 years old and grew up in a single-parent family. During my school years, my ambition was to become an engineer, but I was unable to pursue a university education. Instead, I started working to alleviate my family's financial burden. After working for some time, I decided to reset my academic and career goals. I enrolled in an electrical and mechanical course offered by the ERB and obtained professional certification, enabling me to enter the electrical and mechanical services industry and pursue my goal of becoming an engineer.

My experience demonstrates the effectiveness of the ERB's training services in empowering trainees and creating opportunities for upward mobility

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to hear from
beneficiaries



As mentioned in the Education section of this Chapter, the VTC provides comprehensive vocational and professional education and training (VPET) to cultivate professionals equipped with skills needed in the workplace. The “Apprenticeship Scheme” enables young people to gain work experience through full-time, full-salaried employment in a systematic, regulated and supported environment, while also allowing them to attend professional technical courses free of charge. For a period of three years starting in FY 2024-25, the Government provides each registered apprentice with an additional monthly training allowance of \$1,000. Graduated apprentices can continue to receive subsidies for relevant courses for 36 months after employment. As at end-December 2025, more than 5 900 registered apprentices had received the additional \$1,000 training allowance.

Sharing from a Beneficiary of the Apprenticeship Scheme

Sharing by Mr Ho

I am 19 years old. After taking the Hong Kong Diploma of Secondary Education Examination, I felt uncertain about my future career path. I took various courses but still could not find a suitable career direction. Through the recommendation of friends and family, I joined the Apprenticeship Scheme. Through classroom learning of professional knowledge and accumulating practical experience in the work environment, I gradually built a solid foundation for my career and prepared myself for the job market. The Apprenticeship Scheme equipped me with practical skills and enhanced my competitiveness in the job market. It also restored my confidence and strengthened my determination to pursue further education to become a professional in my field and contribute to society.

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to hear from
beneficiaries





The LD provides free employment services for job seekers and implements employment programmes, including the “Re-employment Allowance Pilot Scheme”, the “Employment Programme for the Elderly and Middle-aged”, the “Youth Employment and Training Programme”, the “GBA Youth Employment Scheme” and the “Racial Diversity Employment Programme”. These programmes aim to enhance and support the employment of older and middle-aged persons, young people and ethnic minorities thereby improving their income and livelihoods. For details, please refer to Annex 3.

The LD launched the three-year “Re-employment Allowance Pilot Scheme” in July 2024, covering full-time jobs, part-time jobs and qualified “casual work” to encourage persons aged 40 or above who have not been in paid work for three consecutive months or more to join the employment market. Each eligible participant who has worked full-time for 12 months continuously can receive a re-employment allowance of \$20,000. Half-rate allowance will be given to those who have worked part-time. Since the launch of the Scheme, nearly 64 000 participants and over 36 000 placements were recorded as at December 2025.

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over **36 000** placements were
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Forging Ahead with Determination: Creating Room for Development, Facilitating Innovative Services

In light of the challenges presented by the shortage of welfare premises, the increase in demand for elderly services due to the ageing population and the increasingly diverse service needs, the Government has to take timely action and adopt a flexible, multi-pronged approach to overcome constraints, create space and initiate innovative welfare services. The aim is to increase the number of social welfare service places, shorten waiting times, and provide timely services for persons in need.

1. Creating Room for Development

The Government will implement the following measures to create more space for social welfare facilities in the future:

- It will take into account multiple factors, including the planning ratios of subsidised elderly, childcare and rehabilitation facilities in the Hong Kong Planning Standards and Guidelines, location and population to reserve sites in new and redeveloped areas.
- It will identify suitable sites in public housing development projects and urban renewal projects for the provision of welfare facilities. The Government will also increase the provision of welfare premises through land sale programmes and making use of private sites owned by social welfare institutions.
- It will actively promote the use of innovative technology in the social welfare sector to improve their service processes and overall service efficiency and reduce the labour burden on caregivers and residential care units.



2. Innovative Services

The Government will continue to spare no effort to facilitate cross-sector co-operation between the Government, the business sector and the community, as well as innovative service modes, to release social resources and improve service flexibility:

- Forging cross-sector co-operation: Through the “Strive and Rise Programme”, the “Pilot Programme on Community Living Room”, and so forth, resources from the Government, the business sector and the community will be integrated to focus on supporting underprivileged families. The Government will roll out a platform in 2026 to encourage family offices involved in philanthropic endeavours to provide resources for projects that benefit disadvantaged groups.
- Providing “on-site” services. The Government will break the limitations of social welfare facilities by proactively extending outreach service modes, such as “On-site Pre-school Rehabilitation Services”, the “Neighbourhood Support Child Care Project”, the “School-based After School Care Service Scheme” and “Community Parents and Children Centres”.
- Early case identification and intervention: The Government is exploring the establishment of an inter-disciplinary and inter-organisation database on caregivers of elderly persons and persons with disabilities. This database will use identification tools designed by university teams to identify high-risk cases for early intervention and support.
- Broadening living space: The Government will enhance and expand the “Residential Care Services Scheme in Guangdong” to provide a choice for cross-border elderly care and reduce waiting times.
- Promoting employment of older persons: The LD is conducting a mid-term review of the “Re-employment Allowance Pilot Scheme”, along with the “Employment Programme for the Elderly and Middle-aged”, to explore measures for promoting the employment of older and middle-aged persons.

Chapter 4

Analysis of

Social Transfer Values



The Government has consistently devoted substantial resources to education, healthcare, housing and social welfare. Most of the measures and services under these four macro policy areas are non-means-tested, benefitting the community regardless of social class. These measures play a crucial role in preventing, combating and alleviating poverty, empowering those who can support themselves and providing a safety net for those who cannot.

This chapter aims to help the public understand the direct impact of these policies on their lives by learning about the average monthly income received by beneficiary households from the policy measures through estimates of **social transfer values** and the number of beneficiary households across the four policy areas. In addition, examining social transfer values from a macro level can complement micro level targeted poverty alleviation projects. This analysis reflects the Government's efforts and effectiveness in alleviating poverty in a comprehensive and holistic manner.

It is important to note that the estimates of social transfer values provided in this chapter are derived from a macro level analysis of the impact of the four macro policy areas. This is not comparable to the subsidised amounts in Chapter 3 compiled at the micro level based on individual measures.

Concept and Estimation Methodology of Social Transfer Values

The social transfer values for the four policy areas are compiled to measure the benefits received by households in Hong Kong from recurrent expenditure of the Government in terms of average monthly income received by beneficiary households. It is important to note that policy measures comprise both cash and non-cash items. Although the non-cash measures, which are mostly services, do not constitute actual income for households, they have an income redistribution effect, helping to achieve the goal of preventing, combating and alleviating poverty. Public housing, for example, has a notable effect on alleviating poverty by improving the living environment for low-income families and reducing their housing expenses, ultimately increasing their disposable income.

The concept of social transfer values is well recognised and applied in the international community. The Organisation for Economic Co-operation and Development (OECD) also compiles social benefits to households.



Social Transfer Values



Education

(Cash and non-cash benefits
per beneficiary household)

Examples of policy measures:

Cash benefits: Student Travel Subsidy, School Textbook Assistance

Non-cash benefits: Students enrolled in full-time programmes in government-subsidised schools

Healthcare

(Non-cash benefits
per beneficiary household)

Examples of policy measures:

Non-cash benefits: Hospitalisation services, doctor consultation services, Elderly Health Care Voucher Scheme

Housing

(Non-cash benefits
per beneficiary household)

Examples of policy measures:

Non-cash benefits: Public Rental Housing, Subsidised Sale Flats, Light Public Housing, Transitional Housing, Interim Housing

Social Welfare

(Cash benefits per beneficiary household and
non-cash benefits per beneficiary place)

Examples of policy measures:

Cash benefits: Comprehensive Social Security Assistance, Old Age Living Allowance

Non-cash benefits: Day care centres for the elderly

To estimate the average monthly income received per beneficiary household, we first need to determine the (a) monthly total social transfer values and (b) number of beneficiary households of the four policy areas. We then need to divide (a) by (b) to derive the average monthly income received per beneficiary household.

$$\frac{\text{(a) monthly total social transfer values}}{\text{(b) number of beneficiary households}} = \text{average monthly income received per beneficiary household}$$

When estimating the monthly total social transfer values, not all recurrent expenditure items under the four policy areas are directly related to public benefits. Therefore, the first step in the estimation is to identify the expenditure items that directly benefit the public. Then the social transfer values of those items are estimated based on the administrative records provided by the relevant Government Bureaux and Departments. For instance, the expenditure items directly related to public benefits in the healthcare sector include the various public medical services, the Elderly Health Care Voucher Scheme, and so forth. Their monthly total social transfer values are estimated using the expenditure data provided by the Health Bureau (HHB).

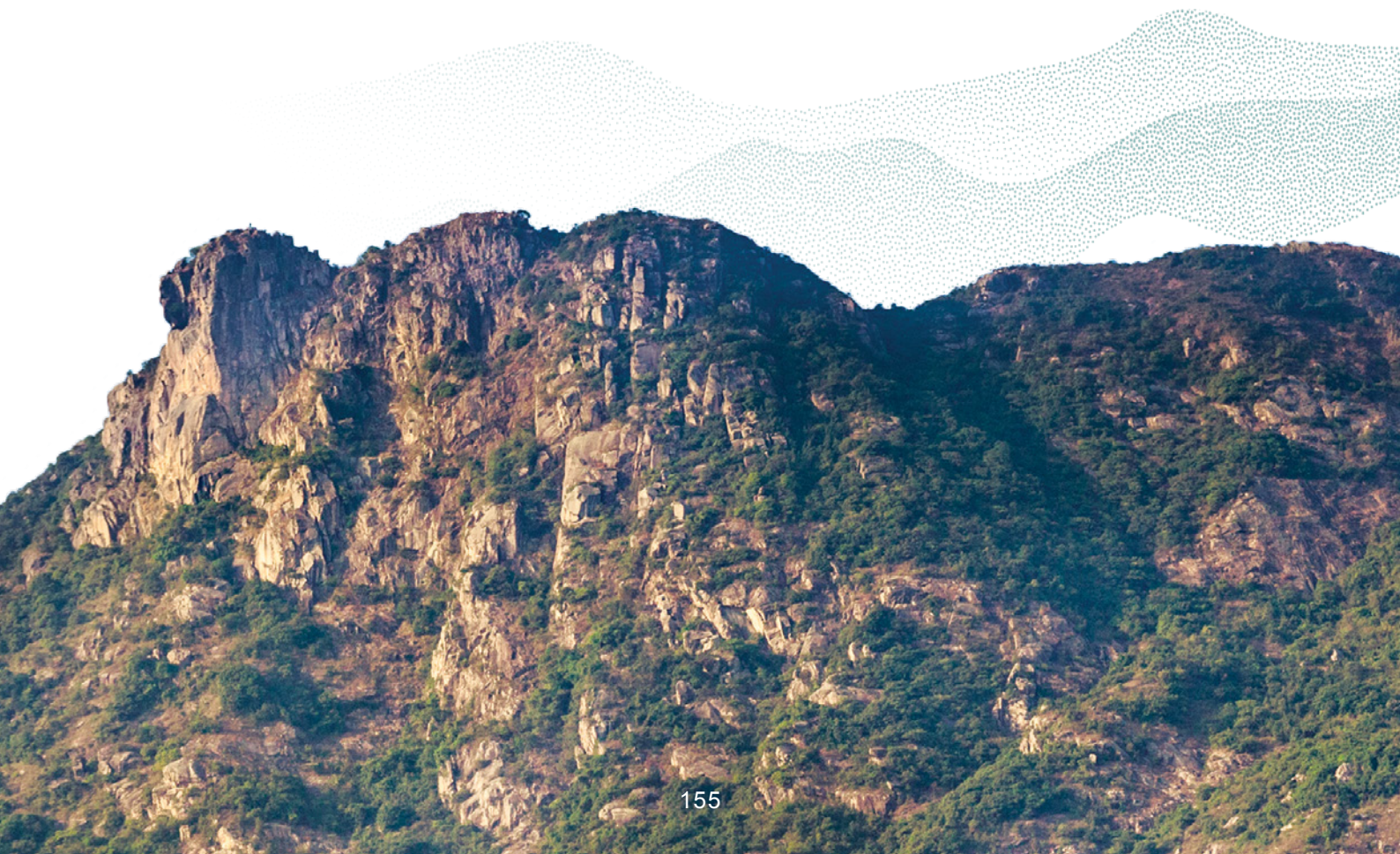
It is important to note that the social transfer values of the four policy areas refer only to benefits that households in Hong Kong can directly receive, excluding administrative costs related to various measures (e.g. computer system construction expenses and the salaries of administrative staff). Benefits received by households outside Hong Kong are also excluded (e.g. the Guangdong Scheme and the Fujian Scheme under the Social Security Allowance Scheme).



Furthermore, the objective of estimating the social transfer values is to reflect the continuous allocation of resources by the Government, so the scope of social benefits covered in social transfer values is limited to recurrent Government measures. Non-recurrent benefits, such as the electricity charge subsidy, the public housing rental waiver and the “double pay” of Comprehensive Social Security Assistance (CSSA), are excluded.

Regarding the number of beneficiary households, since detailed data is unavailable for years between the Population Census, a model-based approach is adopted for high-level estimation. A frequently applied method is to extrapolate the number of beneficiary households from the results of the 2021 Population Census. Assuming the average number of beneficiaries per beneficiary household remains stable, the number of beneficiary households in 2024¹ is extrapolated with reference to the change in the number of beneficiaries from 2021 to 2024.

1. Owing to data limitations, the social transfer values of some policy areas (e.g. healthcare) are not in the 2024 reference year.



When interpreting the number of beneficiary households in the four policy areas, it is important to note that the figures should not be regarded as equivalent to the total population living in poverty. In fact, the four policy areas include non-means-tested public services, such as education and medical services, as well as means-tested relief measures, such as public housing, CSSA and Old Age Living Allowance (OALA).



Apart from that, the four policy areas support a wide range of beneficiaries, covering far beyond the most vulnerable households under the strategy of targeted poverty alleviation. Indeed, the number of beneficiary households across the four policy areas is significantly larger than the number of households in the target groups for poverty alleviation.

Limitations of the Estimates of Social Transfer Values

The estimated social transfer values and number of beneficiary households come with inherent limitations.

For the social transfer values, measures for which the number of beneficiary households cannot be reasonably estimated because of data limitations, such as the Government Public Transport Fare Concession Scheme for the Elderly and Eligible Persons with Disabilities, are excluded. Additionally, various administrative data may not be recorded in the same time frame. Data for 2024, for example, covered administrative data recorded on a calendar year basis (i.e. 2024), fiscal year basis (i.e. 2024-25) and school year basis (i.e. the 2024/25 school year). It is important to note that while social transfer values aggregate the benefits of various measures at the macro level, the social transfer values received by individual beneficiary households cannot be compiled at the micro level owing to data limitations. Consequently, analyses by specific groups or by individual beneficiary households are not available.

In years without a Population Census, a model-based approach is adopted for high-level estimations of the number of beneficiary households, so detailed analyses by specific groups or by individual policies are not available.

Social Transfer Values of the Four Macro Policy Areas

Education

Public education services (including full-time programmes in government-subsidised schools and the Kindergarten Education Scheme) are the major education benefits provided by the Government. These public services are not means tested. Education benefits also include some cash benefits and financial assistance schemes. Some of these are means-tested (e.g. the school textbook assistance, student travel subsidy and financial assistance for post-secondary students).

The monthly total social transfer values for public education services are estimated based on average government subventions by school type and education level provided by the Education Bureau (EDB) and the University Grants Committee (UGC). Cash benefits are compiled mainly from allowances and subsidies provided by the EDB and the Working Family and Student Financial Assistance Agency (WFSFAA).



Free primary and secondary education

Coverage of Education Benefits

Non-cash Benefits

- ☑ Publicly Funded Post-Secondary Education
- ☑ Free Primary and Secondary Education
- ☑ Kindergarten Education Scheme¹
- ☑ School-based After-school Learning and Support Programmes
- ☑ Free Lunch at Schools



Kindergarten Education Scheme

1. Previously known as the Pre-primary Education Voucher Scheme



To estimate the number of beneficiary households, we take the number of households receiving education benefits derived from the 2021 Population Census as a benchmark and extrapolate the number of beneficiary households based on the change in the total number of students from 2021 to 2024 provided by the EDB and UGC.

In 2024, approximately 650 000 households in Hong Kong received education benefits, with an average monthly social transfer value per beneficiary household of about \$12,600. The resources provided to each subsidised student (by education level) are shown in the following table:

**In 2024, approximately
650 000 households in Hong
Kong received education benefits,
with an average monthly social
transfer value per beneficiary
household of about \$12,600.**



Education level	Kindergarten Education Scheme	Aided primary schools	Aided secondary schools	UGC-funded universities	Aided special schools
Monthly resources provided to each subsidised student	\$4,500	\$7,200	\$8,300	\$23,400	\$32,800

► Recurrent Cash Benefits

- ☑ Kindergarten and Child Care Centre Fee Remission Scheme
- ☑ Grant for School-related Expenses for Kindergarten Students
- ☑ School Textbook Assistance Scheme
- ☑ Student Travel Subsidy Scheme
- ☑ Subsidy Scheme for Internet Access Charges
- ☑ Examination Fee Remission Scheme
- ☑ Diploma of Applied Education/Diploma Yi Jin Tuition Fee Reimbursement
- ☑ Vocational Training Council Tuition Fee Remission and Flat Rate Grant for Academic Expenses
- ☑ Financial Assistance Scheme for Designated Evening Adult Education Courses
- ☑ Financial Assistance Scheme for Post-secondary Students
- ☑ Tertiary Student Finance Scheme – Publicly Funded Programmes

Source: EDB, WFSFAA and UGC

Healthcare

Public healthcare is a public service for all citizens, providing a safety net that ensures that no one is denied appropriate medical services due to lack of means. At present, public healthcare services are heavily subsidised by public funds, with service charges that are affordable for the general public. To address issues related to our ageing population and the increasing demand for healthcare services and to enhance the sustainability of the healthcare system, the Government introduced reforms of fees and charges for public healthcare. This also ensures the rational use of medical resources and less waste. At the same time, the Government has strengthened support for vulnerable groups, particularly patients classified as “poor, acute, serious or critical”, on all fronts, thereby supporting the underprivileged. These measures include expanding the medical fee waiver mechanism, introducing an annual cap on fees and charges, accelerating the introduction of effective and innovative drugs and medical devices, and relaxing the eligibility criteria for safety net programmes.

The estimated monthly total social transfer values of medical benefits are based on the expenditure data provided by the HHB.

Regarding the number of beneficiary households, since no information on household usage of medical benefits was collected in the 2021 Population Census, the number of beneficiary households in 2023 was estimated by dividing the number of users of public medical services by the average household size.

In 2023, approximately 1.63 million households in Hong Kong received medical benefits, with an average monthly social transfer value per beneficiary household of about \$5,000.



Coverage of Healthcare Benefits

- ☑ Highly subsidised (on average 97.6%) public hospital services:
 - In-patient
 - Accident and Emergency services
 - Out-patient services (e.g. specialist, family medicine, allied health)

Those in need may apply for medical fee waivers and subsidies for expensive drugs and medical devices
- ☑ Primary healthcare services, such as services provided by District Health Centres and the Chronic Disease Co-Care Pilot Scheme.
- ☑ Health services provided for specific groups, such as child health services, school dental care services, student health services, woman health services, antenatal/postnatal services and elderly health services.
- ☑ Elderly Health Care Voucher Scheme
- ☑ Community Outreach Services
- ☑ Vaccination Schemes
- ☑ Other health-related services

Source: HHB

In 2023, approximately 1.63 million households in Hong Kong received medical benefits, with an average monthly social transfer value per beneficiary household of about \$5,000. Historical data indicates that the average number of uses in the public health system and the total number of patient days per elderly (aged 65 or above) are higher than those of the non-elderly population, so the values of public medical services received by elderly are higher. The average monthly social transfer values received by the elderly and non-elderly are as follows:

	Elderly (65 or above)	Non-elderly
Average monthly social transfer values	\$3,000	\$1,200

Remarks: According to data from the Hospital Authority (HA), taking FY 2023/24 as an example, among service users aged 65 and above, the average monthly HA service cost (government-subsidised portion) for the top 10 percentile and the top one percentile was \$19,400 and \$55,000, respectively. Among service users aged below 65, the average monthly HA service cost (government-subsidised portion) for the top 10 percentile and the top one percentile was \$10,100 and \$46,400, respectively.



The Secretary for Health visited service facilities of a public hospital.



Family Medicine Clinics under the Hospital Authority focus on the needs of the underprivileged.

Housing

Public housing (including subsidised rental housing and subsidised sale flats), which is the primary type of housing welfare provided by the Government, is a means-tested measure. The Government has long been committed to providing affordable rental housing for low-income families in need, as well as assisting low- to middle-income families with home ownership, thereby enhancing citizens' sense of well-being and belonging.

As public housing is a non-cash welfare measure, a marginal analysis approach is used to quantify its social transfer value. For instance, to determine the social transfer value for a household residing in public rental housing (PRH), the rent of a private residential unit of comparable size to the PRH unit is estimated. The social transfer value received by the household is then derived by deducting the PRH rent paid by the household from the estimated rent for a comparable unit in the private market.

The Government also provides housing benefits to low-income families in need through transitional housing (TH) and Light Public Housing (LPH) under the Housing Bureau (HB), as well as interim housing managed by the Housing Authority (HKHA). To calculate the social transfer values for these households, the rent of subsidised rental housing paid by the households is deducted from the estimated rent of subdivided units (SDUs) in the private market.

Approximately 860 000 households in Hong Kong benefit from subsidised rental housing provided by the Government, at an average monthly social transfer value of approximately \$10,000 per household.



The Secretary for Housing visited the "Wah Fu Living Room", which features exhibits on the history of Wah Fu Estate, its redevelopment plan, and the design of the receiving estates, giving residents a vivid and comprehensive understanding of Wah Fu Estate's past, present and future.

Coverage of Housing Benefits

Non-cash Benefits

- ✓ Public Rental Housing
- ✓ Subsidised Sale Flats
- ✓ Light Public Housing
- ✓ Transitional Housing
- ✓ Interim Housing

Data Source: Housing Authority, Hong Kong Housing Society, and Housing Bureau



The Secretary for Housing visited Choi Hung Estate to showcase the shops under the "Well Being · Start-Up" Programme and to encourage participants to develop more products, thereby fostering cultural and creative development in the public housing estates.



For households in subsidised sale flats (SSF), the estimated social transfer value is derived from the difference between the monthly mortgage payment calculated at the market price of the flat and the monthly mortgage payment calculated at the discounted price. The number of beneficiary households for each type of housing above is estimated based on administrative records provided by the HKHA, the Hong Kong Housing Society (HKHS), and the HB.

Social transfer values and number of beneficiary households (2024)

Macro Policy Area	Number of Beneficiary Households	Average Social Transfer Values per Beneficiary Household (per month)
Overall Subsidised Rental Housing	860 400 households ¹	\$9,900 ²
Transitional Housing (TH)	11 200 households	\$2,500 ³
Light Public Housing (LPH) ⁴	4 400 households	\$4,200 ⁵
Interim Housing (IH)	2 700 households	\$4,900 ⁶
Public Rental Housing (PRH) ⁷	842 000 households	\$10,100 ⁸
Subsidised Sale Flats (SSF)	101 500 households ⁹	\$7,700 ¹⁰

- Figures may not add up to the totals due to rounding.
- Refers to the average obtained by dividing the total social transfer values of various types of Government subsidised rental housing by the total number of beneficiary households.
- Refers to the median rent of SDUs in the private market minus the actual average rent paid by TH tenants.
- The first LPH project commenced intake in March 2025. LPH projects that have already commenced intake include Yau Pok Road, Yuen Long; Choi Hing Road, Ngau Tau Kok; Olympic Avenue, Kai Tak (Phase 1); Tsing Fuk Lane, Tuen Mun; Shun On Road, Kwun Tong; and Choi Yuen Road, Sheung Shui. The number of beneficiary households in this row refers to the figure as of October 2025 (i.e. including only the relevant figures for Yau Pok Road, Yuen Long and Choi Hing Road, Ngau Tau Kok).
- Refers to the median rent of SDUs in the private market minus the median rent of LPH.
- Refers to the median rent of SDUs in the private market minus the actual average rent paid by IH tenants.
- The data in this row includes figures from the HKHA and HKHS.
- Refers to the average rent of units of comparable size in the private market minus the actual average rent paid by PRH tenants.
- The number of beneficiary households refers to the number of domestic households residing in SSF that still have mortgage repayments.
- Owing to data limitations, only the social transfer value for buyers who purchased new SSF in 2024 is provided, i.e. the difference between the average monthly mortgage payment per buyer calculated at the market price and that calculated at the discounted price.

Over 100 000 households in Hong Kong have benefited from SSF, with an average monthly social transfer value of \$7,700 per beneficiary household.



The HB and HKHA announced at a press conference that they would officially release the "Well-Being Design Guidelines", implementing people-centric public housing designs to enhance residents' sense of well-being.

Social Welfare

Social welfare benefits are the most diverse among the four policy areas, encompassing a wide range of cash and non-cash benefits to support different groups of people in need. Cash benefits include the CSSA and OALA, whereas non-cash benefits cover a wide range of measures, including residential care, day community care, integrated service centres and outreach work.

The monthly total social transfer values of social welfare benefits are estimated based on the administrative records provided by the SWD and WFSFAA.

Regarding the number of beneficiary households, the number of households receiving social welfare cash benefits derived from the results of the 2021 Population Census is taken as the benchmark. Assuming that the average number of beneficiaries per household remains stable, the number of beneficiary households is extrapolated based on the change in the number of beneficiaries from 2021 to 2024. The number of beneficiary households receiving non-cash benefits is compiled based on the administrative records provided by the SWD. For non-cash benefits, administrative records are generally compiled on a per-service-unit basis for such social welfare provisions. For instance, residential care services are counted per bedspace, while day community care and support services are counted per place.



Mr Chris Sun, Secretary for Labour and Welfare officiated the kick-off ceremony of "Care the Carers Campaign" 2024. Mr Sun (first right) distributed promotional souvenirs to attendees.

Cash Benefits

In 2024, approximately 850 000 households in Hong Kong received social welfare cash benefits. The average monthly social transfer value received per beneficiary household was about \$5,800.



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Since non-cash benefits cover a wide variety of measures, they are categorised into three groups for analysis. The first category is residential care services. There were approximately 50 000 subsidised residential places in Hong Kong in 2024, with an average monthly subsidy of about \$20,200 per place. The second category comprises day and community care and support services. There were approximately 40 000 subsidised places in Hong Kong, with an average monthly subsidy of around \$10,400 per place. The third category comprises other non-cash supporting services, including integrated home care services, family and child protective services, outreaching social work services, integrated family service centres, integrated children and youth services centres and medical social services. The monthly expenditure for this category was about \$1.6 billion.

Non-cash benefits

Service category	Subsidised places	Average monthly subsidy
Residential care services	50 000 places	\$20,200 (per place)
Day and community care and support services	40 000 places	\$10,400 (per place)
Other non-cash supporting services ¹	-	\$1.6 billion (monthly expenditure)

1. Includes integrated home care services, family and child protective services, outreaching social work services, integrated family service centres and medical social services.

Coverage of Social Welfare

Non-cash Benefits

- ☑ Residential care services (e.g. care-and-attention homes for the elderly, residential homes for children and residential care homes for persons with disabilities)
- ☑ Day and community care and support services (e.g. day care centres for the elderly, early education and training centres and standalone child-care centres)
- ☑ Other support services (e.g. integrated home care services, family and child protective services, outreaching social work services, integrated family service centres, medical social services, integrated children and youth services centres and the Community Care Service Voucher Scheme for the Elderly)

Recurrent Cash Benefits

- ☑ Comprehensive Social Security Assistance
- ☑ Old Age Living Allowance
- ☑ Normal Disability Allowance and Higher Disability Allowance
- ☑ Working Family Allowance¹



The Secretary for Labour and Welfare Mr Chris Sun and the Permanent Secretary for Labour and Welfare Ms Alice Lau visited the Heep Hong Society Integrated Service Complex in Pok Fu Lam, to learn more about pre-school rehabilitation services and support to parents. Mr Sun (front row, middle) and Ms Lau (front row, right) listened to the introduction from staff on how to assist children with special education needs to integrate into mainstream education with the use of physiotherapy training at the Early Education and Training Centre.

1. Previously known as the Low-income Working Family Allowance

Data source: SWD and WFSFAA

The following table summarises the social transfer values and the number of beneficiary units across the four policy areas. It is important to note that the estimates of social transfer values provided in this chapter measure the macro level impact of the four policy areas. In contrast, the subsidised amount received by recipients, as detailed in Chapter 3, is compiled at the micro level for individual measures, so the two are not directly comparable.

Social transfer values and the number of beneficiary units

Macro policy areas	Beneficiary units ¹	Average social transfer values received per beneficiary unit (monthly) ²	
Public services (provided to all residents)			
Education (2024)	650 000 households		\$12,600 (per household)
		Kindergarten Education Scheme	\$4,500 (per student)
		Aided primary schools	\$7,200 (per student)
		Aided secondary schools	\$8,300 (per student)
		UGC-funded universities	\$23,400 (per student)
		Aided special schools	\$32,800 (per student)
Healthcare (2023)	1 630 000 households		\$5,000 (per household)
		65 or above	\$3,000 (per person)
		Non-elderly	\$1,200 (per person)
Services provided to eligible persons (focus on those most in need)			
Housing (2024)	About 860 000 households ³	Overall subsidised rental housing	\$9,900 (per household)
		Transitional Housing	\$2,500 (per household)
		Light Public Housing	\$4,200 (per household)
		Interim Housing	\$4,900 (per household)
		Public Rental Housing	\$10,100 (per household)
	Over 100 000 households	Subsidised Sale Flats ⁴	\$7,700 (per household)
Social Welfare ⁵ (2024)	850 000 households	Cash benefits	\$5,800 (per household)
		Non-cash benefits ⁶	
	50 000 places	Residential care services	\$20,200 (per place)
	40 000 places	Day and community care and support services ⁷	\$10,400 (per place)

1. Figures are rounded to the nearest ten thousand.

2. Figures are rounded to the nearest hundred.

3. The number of households benefiting from LPH is as of October 2025.

4. Owing to data limitations, only the social transfer value for buyers who purchased new SSF in 2024 is provided.

5. The Old Age Allowance and the Government Public Transport Fare Concession Scheme for the Elderly and Eligible Persons with Disabilities are not included.

6. The cost of other non-cash supporting services was approximately \$1.6 billion per month, including integrated home care services, family and child protective services, outreaching social work services, integrated family service centres, integrated children and youth services centres and medical social services.

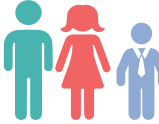
7. Owing to data limitations, this category covers only the day and community care and support services for which beneficiary units are available in the administrative records.

Possible Combinations of Social Transfer Values and Corresponding Illustrative Examples of Beneficiary Households

Households may receive various combinations of social transfer values from the four macro policy areas based on their household composition. To help readers understand the possible total social transfer values received by beneficiary households, several household types and their corresponding benefits combination illustrative examples are listed below, together with the total social transfer values received.

It is important to note that these illustrative examples are provided for reference only. They do not represent the majority of household compositions for the beneficiary households since the household compositions and socio-economic characteristics of the beneficiary households vary. In addition, the social transfer values in the illustrative examples were compiled based mainly on the average values of all beneficiary households or individuals, so the actual social transfer values received by individual households will differ according to their specific circumstances.

Possible Combinations of Social Transfer Values and Illustrative Examples of Beneficiary Households

Household type	Corresponding illustrative examples of beneficiary households	Average monthly social transfer values ¹
Family with children in school	A couple lives in private housing and has a child studying in an aided primary school ² 	 Education: \$7,200 Family total: \$7,200
	A couple lives in PRH and has a child studying in an aided secondary school 	 Healthcare: $1,200 \times 3 = \$3,600$  Education: \$8,300  Housing: \$10,100 Family total: \$22,000
	A couple lives in PRH and has a child studying in a UGC-funded university 	 Healthcare: $1,200 \times 3 = \$3,600$  Education: \$23,400  Housing: \$10,100 Family total: \$37,100
	A couple lives in PRH and has a child studying in an aided special school. The family receives the Working Family Allowance ³ 	 Healthcare: $1,200 \times 3 = \$3,600$  Education: \$32,800  Housing: \$10,100  Social Welfare (cash): \$3,200 Family total: \$49,700
Elderly doubletons	Two elders live in private housing and receive OALA 	 Healthcare: $3,000 \times 2 = \$6,000$  Social Welfare (cash): $4,200 \times 2 = \$8,400$ Family total: \$14,400
	Two elders live in PRH and receive OALA 	 Healthcare: $3,000 \times 2 = \$6,000$  Social Welfare (cash): $4,200 \times 2 = \$8,400$  Housing: \$10,100 Family total: \$24,500



Household type	Corresponding illustrative examples of beneficiary households	Average monthly social transfer values ¹	
Elderly doubletons	Two elders receive OALA; one of them lives in PRH and the other lives in a subsidised residential care home 	Elderly living in PRH: + Healthcare: \$3,000 💰 Social Welfare (cash): \$4,200 🏠 Housing: \$10,100 Total: \$17,300	Elderly living in a subsidised residential care home: + Healthcare: \$3,000 ♥ Social Welfare (non-cash): \$20,200 💰 Social Welfare (cash): \$4,200 Total: \$27,400
Family total: \$44,700			
	Two elders live in PRH and receive CSSA ⁴ ; both use day and community care and support services 	+ Healthcare: $3,000 \times 2 =$ \$6,000 ♥ Social Welfare (non-cash): $10,400 \times 2 =$ \$20,800 💰 Social Welfare (cash): \$11,000 🏠 Housing: \$10,100 Family total: \$47,900	
Family with other needs	An elderly lives in PRH and uses day and community care and support services; and an adult son/daughter lives in a residential care home for persons with disabilities and receives the normal disability allowance 	Elderly living in PRH: + Healthcare: \$3,000 ♥ Social Welfare (non-cash): \$10,400 💰 Social Welfare (cash): \$4,200 🏠 Housing: \$10,100 Total: \$27,700	Adult son/daughter living in a residential care home for persons with disabilities: + Healthcare: \$1,200 ♥ Social Welfare (non-cash): \$20,200 💰 Social Welfare (cash): \$2,100 Total: \$23,500
Family total: \$51,200			

1. The average monthly total social transfer values are compiled based on the figures rounded to the nearest hundred.
2. This family does not use public medical services.
3. Assumes that the family is receiving the full-rate higher allowance and full-rate child allowance under the Working Family Allowance.
4. Assumes that the family is receiving the CSSA standard rate for the category of able-bodied/50% disabled, as well as the annual long-term supplement, monthly community living supplement and rent allowance.

Chapter 5

Envision Targeted

Support



This Report summarises the transformation of Hong Kong's poverty alleviation efforts during the tenure of the current-term Government, charting a move from macro-level statistics to micro-level care, from single-indicator to multi-dimensional analysis, and from government-led to cross-sector collaboration. The ultimate goal of these efforts is to serve the welfare of grassroots families in Hong Kong, enhancing their sense of belonging, achievement and satisfaction and making them part of a happier and more harmonious Hong Kong.

Review and Summary

The Report has adopted the following outline to lay out the progress of Hong Kong's poverty alleviation work since mid-2022:



- **Identifying Targets:** The Government now utilises a multi-dimensional analysis framework to break free of the limitations of the single "poverty line" indicator. The multiple dimensions take into account, including individuals' economic resources and their daily essential needs, precisely lock onto the three most-in-need groups among the three target groups – "households residing in subdivided units (SDUs)", "single-parent households" and "all-elderly households", to ensure that resources are deployed more accurately and in a more focused manner.



- **Focusing Support:** With these most-in-need groups in mind, the Government has designed and launched multiple targeted poverty alleviation projects, namely the "Strive and Rise Programme", the "Pilot Programme on Community Living Room" and the "School-based After School Care Service Scheme", and conducted effectiveness evaluations for each of them. The evaluation results are highly encouraging. Key Performance Indicators (KPIs) have been met and some targets have even been exceeded, confirming the effectiveness of these targeted poverty alleviation efforts.



- **Policy Enabling:** Policy measures across the four major areas of education, healthcare, housing, and social welfare and employment services together constitute the community's basic safety net for "supporting those who cannot help themselves" and the ladder for upward mobility for "empowering those who can help themselves". These policies are interlocking and mutually reinforcing, enabling those with capacity to become self-reliant while providing basic protection for those unable to help themselves.



- **Information Sharing:** This reflects how the Government has been allocating substantial resources across the four macro-policy areas of education, healthcare, housing and social welfare to enhance the living standards of beneficiary households, thus enabling citizens to perceive the direct relevance of Government policies to themselves. By sharing information about social transfer values from a macro perspective, along with information about its micro-level targeted poverty alleviation projects, the Government is creating for the public a more comprehensive picture of its efforts in poverty alleviation, and their effectiveness.



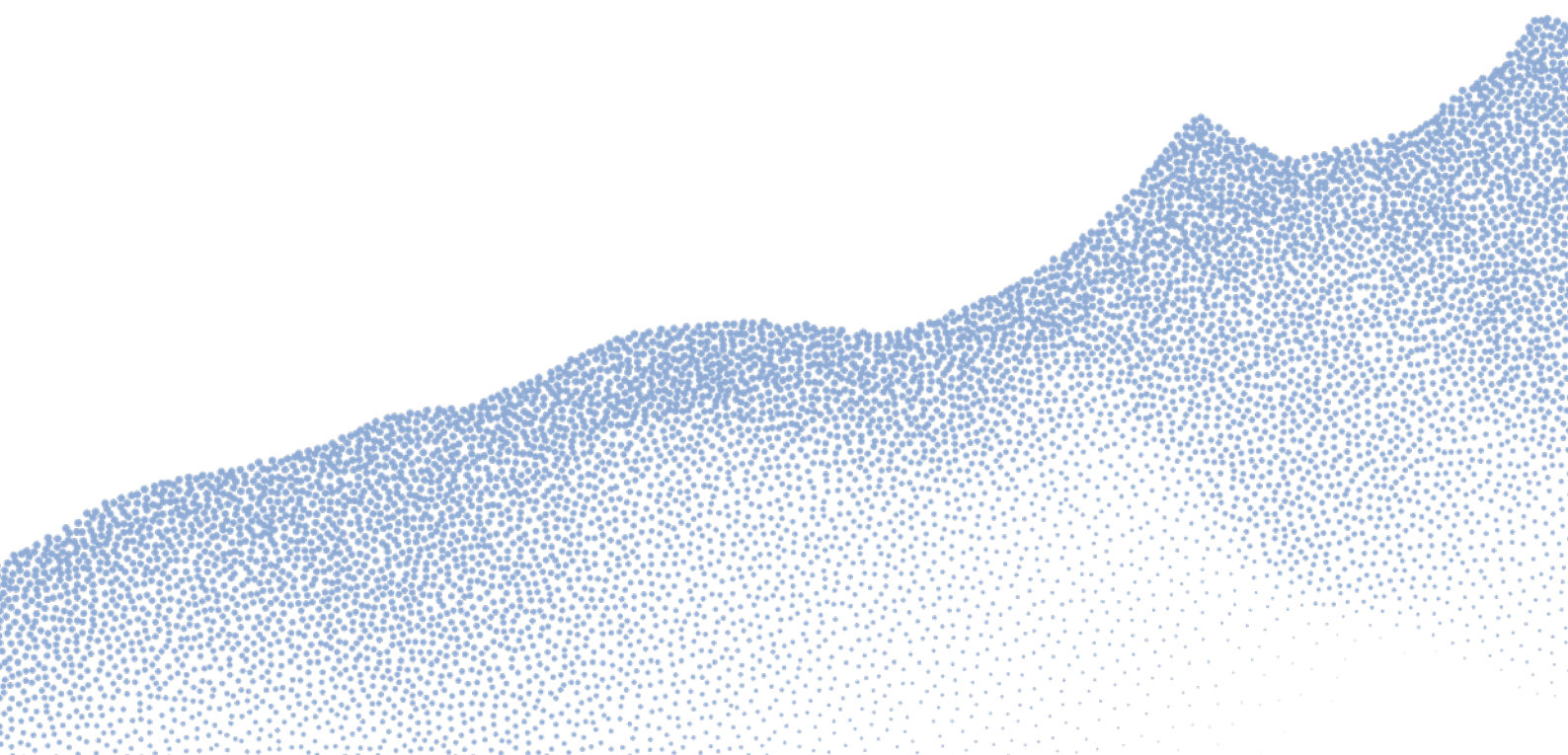
The following four comic stories summarise the content and the key messages of this Report in a way that is relatable to everyday life, showing how the ultimate goal of poverty alleviation work is to enable every family to feel the community's care for them and experience "home" as a place of warmth and safety. Drawn from real-life cases, these comic stories reflect how families from different backgrounds are moving towards happier lives with the support of policy measures and specific projects. They demonstrate both the practical effectiveness of the Government's targeted poverty alleviation projects and the more subtle and nurturing effects of its macro-level policies.

Comic Story 1 An Extra Dish for Dinner: At dinner time, an ordinary family sits down to eat and share details of their days with each other, including how different policy measures have been helping them in their daily lives.

Comic Story 2 Juggling Help for the Elderly and the Disabled: The various interlocking benefits of Government support services provide valuable all-round support for this family, helping them stand firm through storms and live in contentment.

Comic Story 3 Health Help Comes Knocking: Two elderly individuals experience happiness thanks to the attentive care of outreach nurses and the cheerful visits of Care Team volunteers.

Comic Story 4 Warmth Radiating From the Community: Although this family living in an SDU faces considerable daily pressures, the care and support they have found from the community give them the ability to move forward.





1. District Health Centres provide district-based primary healthcare services, including but not limited to health promotion, health risk assessment, and screening for chronic diseases (e.g. diabetes mellitus, hypertension).
2. The University Grants Committee (UGC) subsidises full-time bachelor's degree, taught postgraduate and research postgraduate students at an annual tuition fee of \$42,100 per student. The Government's investment per UGC-funded university student for the year 2024-25 was \$281,300.
3. For subsidised primary schools where tuition is free, the Government's investment per subsidised primary school student for the year 2024-25 was \$86,330.
4. The Working Family Allowance Scheme provides allowances to in-work families with relatively low income who are not on Comprehensive Social Security Assistance (CSSA). It aims to encourage self-reliance and alleviate intergenerational poverty.



5. The School-based After-school Care Service Scheme focuses on supporting families in need by allowing primary school students in need to stay at school after school hours for care and learning support, enabling parents to choose to go out to work.



1. Schools for children with physical disabilities provide educational services for students with severe physical disabilities or multiple disabilities. In addition to offering academic curricula, these schools employ supporting and specialised staff to provide therapy services (physiotherapy, occupational therapy, speech therapy), and procure rehabilitation equipment and aids to enable students with physical disabilities to fully develop their potential.
2. The Student Health Service Centres of the Department of Health provide services including physical check ups and health assessments for primary and secondary school students.
3. Community Rehabilitation Day Centres provide professional and psychosocial rehabilitation training services for post discharge patients.
4. The Carer Support Hotline 182 183 operates 24 hours a day and is answered by professional social workers. It aims to reduce the pressure and burden of daily caregiving on carers and continuously enhance their caregiving capabilities.



5. Under the Social Welfare Department's Social Security Allowance Scheme, the Disability Allowance provides a monthly cash allowance to Hong Kong residents with severe disabilities to meet special needs arising from their disabilities. With effect from 1 February 2025, the monthly rate of Normal Disability Allowance was \$2,095; and the monthly rate of Higher Disability Allowance was \$4,190.
6. The Home Ownership Scheme is a major subsidised sale flats scheme administered by the Hong Kong Housing Authority, allowing eligible applicants under the scheme to purchase HOS flats at prices lower than the assessed market value. It aims to assist low to middle income families (including eligible public rental housing tenants) to achieve home ownership.



1. The Community Outreach Healthcare Service provides comprehensive, integrated home based healthcare services for community members, including assessment and, according to individual needs, medical consultations, nursing care, therapy, education, counselling and referral.
2. The "Care Teams – Support for the Elderly and Carers Scheme" enables Care Teams, through home visits or contacts, to help identify elderly persons living alone or in double elderly households, as well as carers of the elderly and persons with disabilities, in need, and to refer needy cases to social welfare service units for follow up.
3. The Community Dental Support Scheme aims to provide subsidised dental services to the underprivileged with financial difficulties. Recipients of the Old Age Living Allowance under the Social Welfare Department are eligible to join the Scheme, and the related administrative costs are fully funded by the Government.



4. The Old Age Living Allowance is subject to an income and asset test. It provides a monthly special allowance to Hong Kong residents aged 65 or above who are in financial need to help meet their living expenses. With effect from 1 February 2025, the monthly rate of the Old Age Living Allowance was \$4,250.



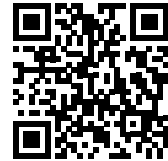
1. The Pilot Programme on Community Living Room focuses on supporting households living in subdivided units (SDUs) by providing them with additional living space and broadening their social networks, thereby enhancing their living standards and strengthening their sense of belonging to the community.
2. The Government makes good use of Government and private sites that have not yet been committed to long term development plans, adopts standard simple designs and Modular Integrated Construction methods, or converts vacant school premises, to quickly construct Light Public Housing, so as to fill the gap in the short term public housing supply as soon as possible and improve the living environment and quality of life of citizens living in inadequate housing.
3. The Maternal and Child Health Centres of the Department of Health provide services including child health, maternal health, family planning and cervical screening services.
4. The Child Assessment Service of the Department of Health serves children under the age of 12 with developmental or behavioural problems. Children can be referred by professionals or directly by hospitals. The Department of Health provides professional assessments and necessary follow up services according to the child's needs.



5. The On-site Pre-school Rehabilitation Services aim to provide on site rehabilitation services for kindergarten / kindergarten cum child care centre children with special needs of varying degrees.
6. The Strive and Rise Programme targets Secondary 1 to Secondary 4 students from underprivileged families (especially those living in SDUs). It aims to help participants broaden their horizons, build up self confidence, develop a positive outlook on life, set goals for their future, and strive for upward mobility.

As well as these four comic stories, this Report shares other moments of daily lives of grassroots families, as well as the voices of service providers and service users, in a series of videos related to poverty alleviation work. They illustrate moments such as the bustle of Community Living Room members in the kitchen and around the dining table, the relief of parents on having their caregiving burden alleviated, and the smiles on the faces of elders after receiving visits from Care Teams. They all are simple, authentic reflections of the fruits arising when Hong Kong society works together with one heart and one mind to build happy homes.

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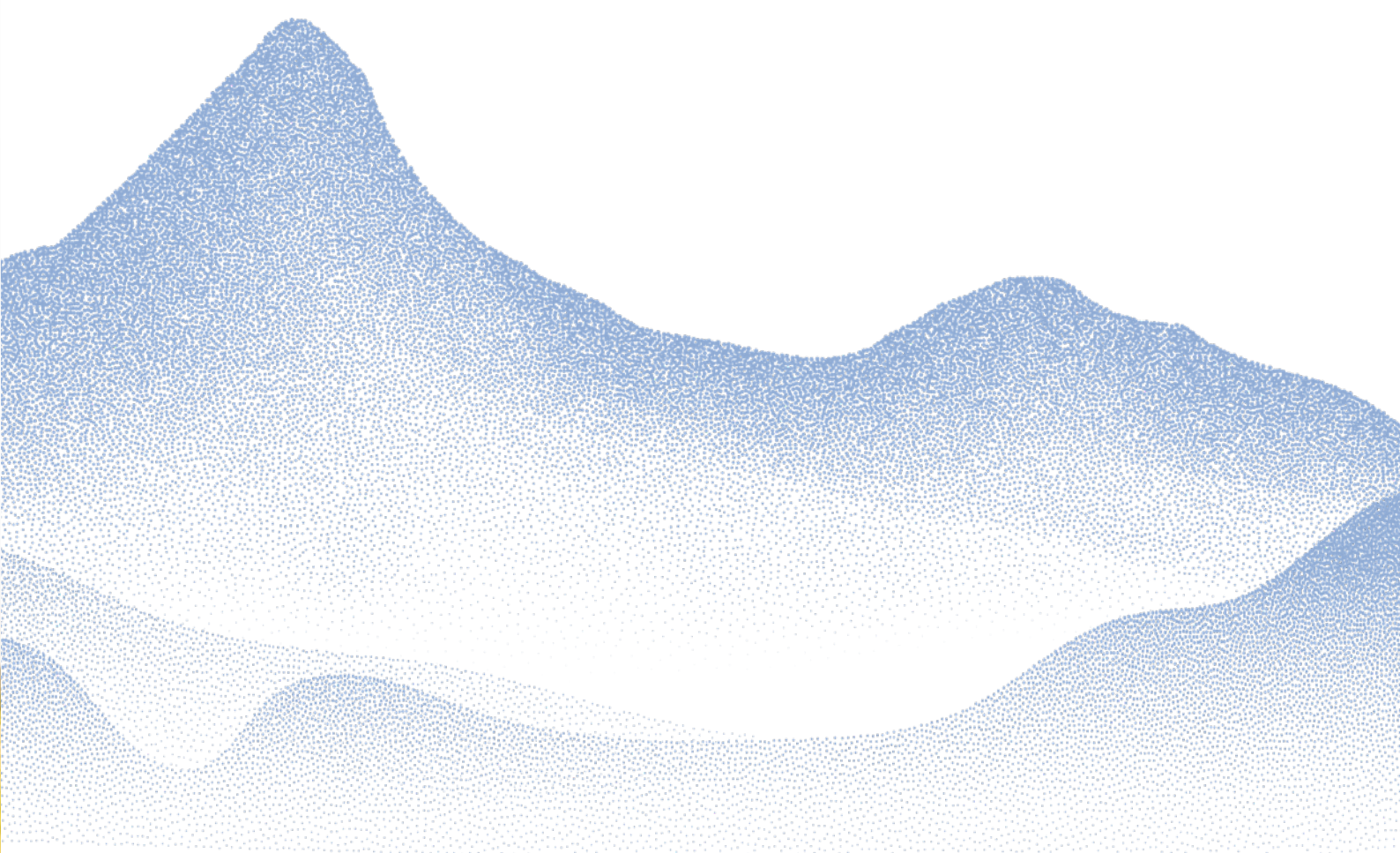




Envision Targeted Support

Looking ahead, the challenges facing Hong Kong society are still formidable. The volatile external environment, coupled with an ageing population, will generate increasingly acute demand for social welfare services, and bring pressure on public finances. The old model of relying on public funds for “handouts” and passive intervention is unsustainable, having not only failed to address the root causes but also incurred relatively high social costs. Hong Kong must adopt a more forward-looking and breakthrough mindset in its efforts to support the underprivileged.

The previous “poverty line” framework, which used income as the sole indicator, oversimplified the poverty problem by casting poverty purely as a lack of financial means. In fact, the difficulties faced by grassroots people often involve multiple intertwined issues beyond the economic dimension, including challenges such as difficult living environment, poor physical and mental health, burdens of family caregiving, social isolation and a lack of development opportunities. Because of this, cash assistance alone cannot fundamentally improve living conditions and standards.



The practical experience arising from targeted poverty alleviation projects and their interim successes indicate that support for grassroot families should not be confined to financial assistance, but should precisely and comprehensively address their physical, psychological, social and developmental needs. This requires the previous focus solely on “relief” to be abandoned, and a shift made towards the proactive identification and targeted support.

“Proactive identification” must be undertaken on the basis of safeguarding privacy, legality and compliance, and building public trust. It involves utilising data to proactively and progressively identify the most-in-need groups - those at the “end of the queue”. “Targeted support” means providing comprehensive, focused assistance tailored to the multi-faceted needs of these most-in-need groups. Caring for the underprivileged in future will involve making the community the main venue, the family the unit to be focused on, and poverty prevention the priority, thus moving poverty alleviation services away from a “response to complaints” approach towards proactive intervention. It will require greater sensitivity in uncovering the practical difficulties of those in need across various aspects of daily life, and responding to these with more targeted policies. It will also require a focus on the long-term impact of support measures (such as enhancing development opportunities for young people, helping parents in need to return to the workforce, and strengthening social connections and community network support for the elderly), rather than on short-term results.

Government resources alone are insufficient to comprehensively address the increasingly complex social challenges we face. A core strategy will be to deepen tripartite collaboration among the Government, the business sector and the community, and to promote a more formalised and sustainable collaboration model. Under this tripartite collaboration, the Government will focus on providing a safety net, setting rules and allocating resources; the business sector and social capital will provide support in terms of funding, premises, technology application, management and talent; and the community and welfare organisations will contribute frontline insights and professional services, and undertake execution tasks. By mobilising community forces and promoting a comprehensive culture of care, individuals from different sectors, backgrounds and ages will all be able to participate in district care efforts, fostering a social atmosphere of “all for one and one for all”.

An aerial photograph of a dense urban skyline, likely Hong Kong, with numerous high-rise buildings and a body of water in the foreground. The image is used as a background for the text.

The Government will focus on providing a safety net, setting rules and allocating resources;
the business sector and social capital will provide support in terms of funding, premises, technology application, management and talent; and
the community and welfare organisations will contribute frontline insights and professional services, and undertake execution tasks.

Leveraging the synergies generated by cross-sectoral, cross-professional and cross-generational collaboration, the Government will further promote diversified community-based poverty alleviation projects, expand their service coverage and make them accessible to all. This will lead to tangible improvements to the quality of life of grassroots families and underprivileged groups. In line with this vision, the Government will establish a platform to match business sector funding, talent, premises, technology application and management experience with innovative and scalable social welfare projects, in a move that will further drive innovation and new developments in social welfare work.



Writing a New Chapter of Happiness Together

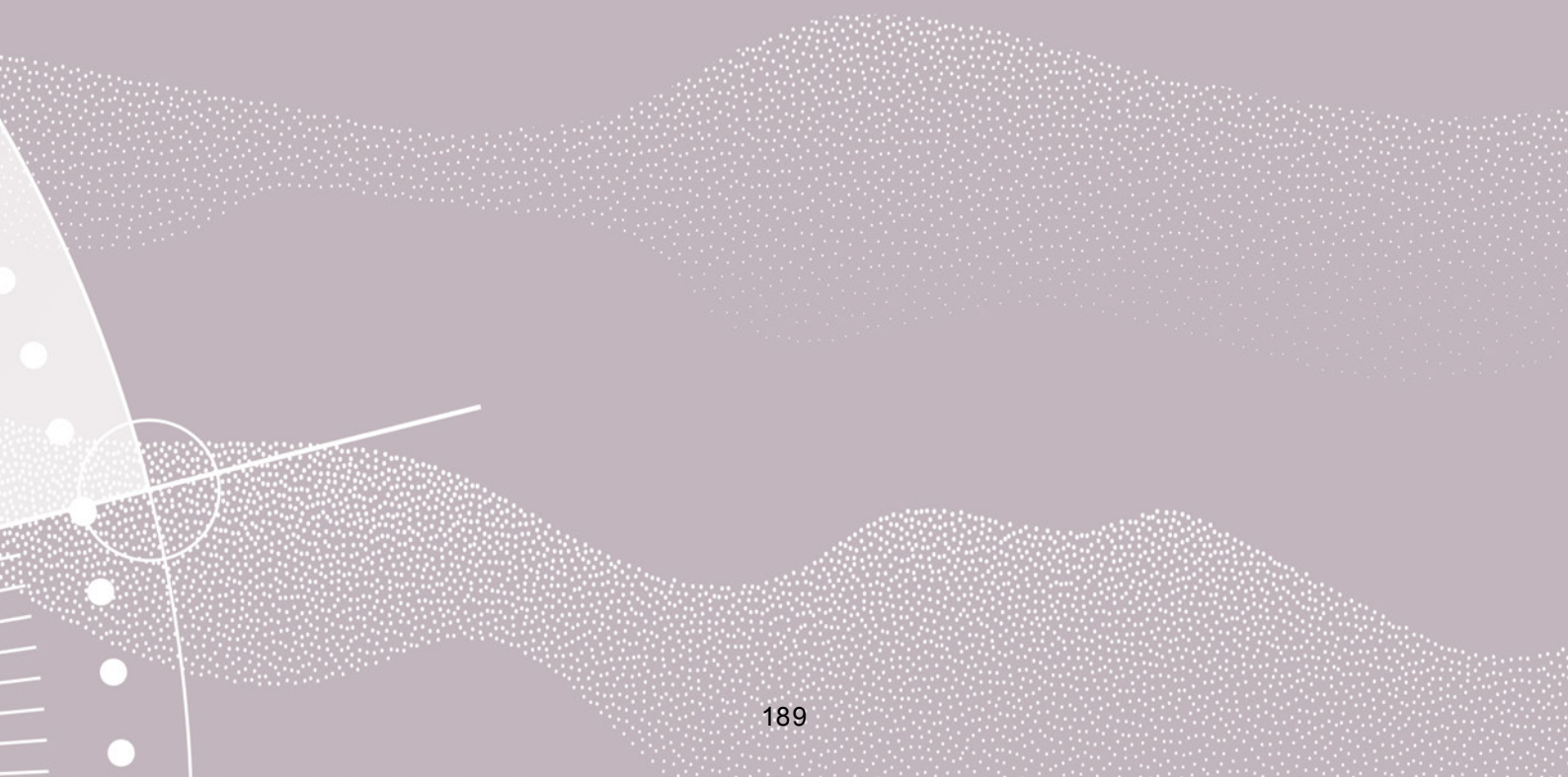
The image of Lion Rock on the cover of this Report symbolises the “Lion Rock Spirit” of striving for self-reliance. As Hong Kong society continues to evolve, so the needs of the underprivileged groups are changing too. All policy bureaux of the Government will continue to perform their respective functions and collaborate with one another, while upholding an open-minded attitude and an innovative spirit, actively and broadly uniting all sectors of the community, providing all-round support, and leading citizens towards a future with a stronger sense of belonging, sense of achievement and sense of satisfaction.





Annexes





Chapter 2 Annexes

Annex 1 Performance of SDU households as measured by selected macro indicators under the multidimensional analytical framework^a

		SDU households	SDU households with children	Non-SDU private tenant households	Overall households
	Number of households	107 200	29 600	335 000	2 671 200
	Population in households	214 200	90 800	845 700	6 955 200
I: Income					
1	Monthly household income (\$)*				
	- Median	15,300	17,400	42,200	27,300
	- 25 th percentile	10,300	11,800	20,100	12,100
II: Economic activities and employment					
2	Proportion of working households (%)	75.4	71.8	86.2	76.5
3	Economic dependency ratio (the number of economically inactive persons per 1 000 economically active persons)	826	2 012	760	931
4	LFPR (%)				
	- Persons aged 18 to 64	72.5	61.2	77.6	73.4
	- Persons aged 65 and above	31.0	#	21.8	15.2
5	Proportion of employed members who are part-timers / underemployed (%)	25.6 [@]	22.9 [@]	16.6 [@]	17.0 [@]
6	Median monthly employment earnings of employed members (\$)	14,000	14,300	26,900	19,500
7	Proportion of members aged 18 to 64 in workless households who are economically inactive due to being home-makers or unpaid carers(%)	60.3	85.1	36.6	31.6
III: Coverage of cash-based social benefits					
8	Proportion of households with members receiving major cash benefits from the Government (%) ^{&}	29.3	43.9	15.4	34.0
	- CSSA	13.0	22.6	3.6	5.6
	- OALA	5.0	#	4.9	15.1
	- OAA	2.3	#	2.8	7.4
	- DA	3.4	4.0	2.8	5.2
	- WFA	6.3	16.5	1.7	2.3
IV: Assets					
9	Proportion of households with owner-occupied properties (%)	N.A.	N.A.	N.A.	48.5
10	Monthly rental values of owner-occupied properties (\$)				
	- Median	N.A.	N.A.	N.A.	10,800
	- 25 th percentile	N.A.	N.A.	N.A.	8,000
11	Proportion of households with rental income (%)	2.0	#	7.6	5.8



		SDU households	SDU households with children	Non-SDU private tenant households	Overall households
V: Living environment					
12	Proportion of households by housing type				
	- SDU (%)	100.0	100.0	N.A.	4.0
	- PRH (%)	N.A.	N.A.	N.A.	30.2
	- Owner-occupiers (%)	N.A.	N.A.	N.A.	48.5
	- Private tenants (%)	N.A.	N.A.	100.0	17.2
13	Median per capita floor area of accommodation (sq. ft.)	65	43	226	178
14	Proportion of accommodation equipped with an independent toilet (%)	95.9	98.0	100.0	99.6
15	Median rent-to-income ratio (%)~	32.1	30.9	31.6	16.9
VI: Growth, education and training					
16	Proportion of household members with post-secondary educational attainment (%)				
	- Working-age members aged 18 to 64	23.5	16.9	61.1	44.1
	- Elderly members aged 65 and above	9.2	#	22.3	11.0
17	Proportion of households with children attending special schools (%) (in overall households with children)	#	#	0.8	0.9
VII: Health / elderly care / social connection					
18	Proportion of households with elderly members requiring long-term care (%)	2.4	#	4.1	10.0
	- Proportion of such elders having a carer (%)	96.9	#	96.3	97.3
19	Proportion of elderly members who had feelings of loneliness (%)	N.A.	N.A.	N.A.	14.1*
20	Proportion of elderly members who received community support / care services (%)	N.A.	N.A.	N.A.	3.6+
21	Proportion of elderly members who:				
	- had a smartphone (%)	N.A.	N.A.	N.A.	88.0+
	- had used the Internet (%)	N.A.	N.A.	N.A.	84.0+

Notes: (^) Data mostly came from C&SD's 2021 Population Census, except for the following: data under indicators (19) to (21) came from C&SD's Thematic Household Survey on Health, Elderly Care and Social Inclusion of Elderly Persons in 2024.

(*) Original household income, including the Government's recurrent cash measures.

(@) It refers to the proportion of employed members working less than 35 hours a week.

(&) CSSA / OALA / OAA / DA / WFA.

(~) Excluding households with zero rent (e.g. those residing with relatives / friends without paying rent, and those living in accommodation provided free of charge by an employer) or households with zero income.

(#) Figures are not released due to large sampling errors.

(+) Proportion in the overall elderly population.

N.A. Not applicable.

There may be a slight discrepancy between the sum of individual items and the total owing to rounding; the percentages may not add up to 100%.

Sources: 2021 Population Census and Thematic Household Survey on Health, Elderly Care and Social Inclusion of Elderly Persons in 2024, C&SD.

Annex 2 Performance of single-parent households as measured by selected macro indicators under the multidimensional analytical framework^a

		Single-parent households	Single-parent households with children aged below 12	Households with children	Overall households
Number of households		69 000	32 400	619 300	2 759 700
Population in households		203 900	101 200	2 321 400	6 912 800
I: Income					
1	Monthly household income (\$)*				
	- Median	22,300	23,400	43,200	30,200
	- 25 th percentile	13,800	13,900	26,300	13,700
II: Economic activities and employment					
2	Proportion of working households (%)	70.6	66.0	91.2	74.6
3	Economic dependency ratio (the number of economically inactive persons per 1 000 economically active persons)	2 104	2 444	1 489	1 024
4	LFPR (%)				
	- Persons aged 18 to 64	62.7	61.1	71.3	72.4
	- Persons aged 65 and above	17.2	16.9	12.7	13.8
5	Proportion of employed members who are part-timers / underemployed (%)	15.6	15.3	9.4	10.7
6	Median monthly employment earnings of employed members (\$)	18,500	20,000	26,100	21,500
7	Proportion of members aged 18 to 64 in workless households who are economically inactive due to being home-makers (%)	74.2	83.3	63.1	29.1
III: Coverage of cash-based social benefits					
8	Proportion of households with members receiving major cash benefits from the Government (%) ^{&}	50.2	53.2	27.5	40.0
	- CSSA	23.4	27.0	5.8	4.9
	- OALA	8.2	9.1	8.1	19.2
	- OAA	2.3	1.9	3.4	10.6
	- DA	6.3	7.0	5.8	5.3
	- WFA	13.8	12.9	7.3	2.1
IV: Assets					
9	Proportion of households with owner-occupied properties (%)	23.9	25.2	46.4	50.4
10	Monthly rental values of owner-occupied properties (\$)				
	- Median	10,500	10,700	12,200	11,200
	- 25 th percentile	7,500	7,800	9,200	8,400
11	Proportion of households with rental income (%)	1.9	1.3	5.5	4.1



		Single-parent households	Single-parent households with children aged below 12	Households with children	Overall households
V: Living environment					
12	Proportion of households by housing type				
	- SDU (%)	11.3	12.5	4.5	4.0
	- PRH (%)	50.1	45.1	26.0	30.1
	- Owner-occupiers (%)	23.9	25.2	46.4	50.4
	- Private tenants (%)	23.1	26.7	22.5	16.2
13	Median per capita floor area of accommodation (sq. ft.)	123	118	127	178
14	Proportion of accommodation equipped with an independent toilet (%)	99.5	99.5	99.8	99.6
15	Median rent-to-income ratio (%)~	16.5	17.8	14.4	15.2
VI: Growth, education and training					
16	Proportion of household members with post-secondary educational attainment (%)				
	- Working-age members aged 18 to 64	30.6	30.4	48.2	47.2
	- Elderly members aged 65 and above	6.1	8.4 ⁺⁺	6.5	10.6
17	Proportion of households with children attending special schools (%) (in overall households with children)	1.7	1.7	0.9	0.9
VII: Health / elderly care / social connection					
18	Proportion of households with elderly members requiring long-term care (%)	3.6	3.6	4.4	10.0
	- Proportion of such elders having a carer (%)	97.0	94.6	97.7	97.3
19	Proportion of elderly members who had feelings of loneliness (%)	N.A.	N.A.	N.A.	14.1 ⁺
20	Proportion of elderly members who received community support / care services (%)	N.A.	N.A.	N.A.	3.6 ⁺
21	Proportion of elderly members who:				
	- had a smartphone (%)	N.A.	N.A.	N.A.	88.0 ⁺
	- had used the Internet (%)	N.A.	N.A.	N.A.	84.0 ⁺

Notes: (^) Data mostly came from C&SD's GHS in 2024, except for the following: data related to SDU households under indicator (12), as well as data under indicators (13), (14), (17) and (18), came from C&SD's 2021 Population Census, while data under indicators (19) to (21) came from C&SD's Thematic Household Survey on Health, Elderly Care and Social Inclusion of Elderly Persons in 2024.

(*) Original household income, including the Government's recurrent cash measures.

(&) CSSA / OALA / OAA / DA / WFA.

(~) Excluding households with zero rent (e.g. those residing with relatives / friends without paying rent, and those living in accommodation provided free of charge by an employer) or households with zero income.

(+) Proportion in the overall elderly population.

(++) To be interpreted with caution due to relatively large sampling errors.

N.A. Not applicable.

There may be a slight discrepancy between the sum of individual items and the total owing to rounding; the percentages may not add up to 100%.

Sources: 2021 Population Census, GHS in 2024, and Thematic Household Survey on Health, Elderly Care and Social Inclusion of Elderly Persons in 2024, C&SD.

Annex 3 Performance of all-elderly households as measured by selected macro indicators under the multidimensional analytical framework^a

		All-elderly households	All-elderly households with all members aged 80 and above	Other households with elders	Overall households
	Number of households	491 200	107 000	669 100	2 759 700
	Population in households	717 600	131 600	2 099 700	6 912 800
I: Income					
1	Monthly household income (\$)*				
	- Median	7,700	5,600	32,900	30,200
	- 25 th percentile	4,200	4,100	20,200	13,700
II: Economic activities and employment					
2	Proportion of working households (%)	14.9	1.2	85.3	74.6
3	Economic dependency ratio (the number of economically inactive persons per 1 000 economically active persons)	7 652	96 859	1 239	1 024
4	LFPR (%)				
	- Persons aged 18 to 64	N.A.	N.A.	73.6	72.4
	- Persons aged 65 and above	11.6	1.0	15.7	13.8
5	Proportion of employed members who are part-timers / underemployed (%)	37.2	48.4 ⁺⁺	11.1	10.7
6	Median monthly employment earnings of employed members (\$)	12,100	10,500	20,000	21,500
7	Proportion of members aged 18 to 64 in workless households who are economically inactive due to being home-makers (%)	N.A.	N.A.	35.9	29.1
III: Coverage of cash-based social benefits					
8	Proportion of households with members receiving major cash benefits from the Government (%) ^{&}	84.6	97.0	74.7	40.0
	- CSSA	10.6	15.0	2.6	4.9
	- OALA	42.6	43.5	47.7	19.2
	- OAA	30.1	37.0	21.7	10.6
	- DA	2.5	1.9	7.5	5.3
	- WFA	0.3	#	1.6	2.1
IV: Assets					
9	Proportion of households with owner-occupied properties (%)	57.1	56.9	55.6	50.4
10	Monthly rental values of owner-occupied properties (\$)				
	- Median	11,000	11,000	11,200	11,200
	- 25 th percentile	8,100	8,100	8,200	8,400
11	Proportion of households with rental income (%)	4.1	2.6	4.4	4.1



		All-elderly households	All-elderly households with all members aged 80 and above	Other households with elders	Overall households
V: Living environment					
12	Proportion of households by housing type				
	- SDU (%)	2.5	1.1	1.4	4.0
	- PRH (%)	34.8	36.3	37.4	30.1
	- Owner-occupiers (%)	57.1	56.9	55.6	50.4
	- Private tenants (%)	5.2	2.5	5.7	16.2
13	Median per capita floor area of accommodation (sq. ft.)	269	323	147	178
14	Proportion of accommodation equipped with an independent toilet (%)	99.4	99.3	99.8	99.6
15	Median rent-to-income ratio (%)~	24.6	25.4	9.9	15.2
VI: Growth, education and training					
16	Proportion of household members with post-secondary educational attainment (%)				
	- Working-age members aged 18 to 64	N.A.	N.A.	43.1	47.2
	- Elderly members aged 65 and above	12.7	10.8	8.9	10.6
17	Proportion of households with children attending special schools (%) (in overall households with children)	N.A.	N.A.	1.0	0.9
VII: Health / elderly care / social connection					
18	Proportion of households with elderly members requiring long-term care (%)	24.2	50.3	27.2	10.0
	- Proportion of such elders having a carer (%)	95.3	96.8	98.4	97.3
19	Proportion of elderly members who had feelings of loneliness (%)	16.4	28.4	12.1	14.1 ⁺
20	Proportion of elderly members who received community support / care services (%)	4.4	10.1	2.9	3.6 ⁺
21	Proportion of elderly members who:				
	- had a smartphone (%)	86.2	56.6	89.5	88.0 ⁺
	- had used the Internet (%)	81.5	44.8	86.1	84.0 ⁺

Notes: (^) Data mostly came from C&SD's GHS in 2024, except for the following: data related to SDU households under indicator (12), as well as data under indicators (13), (14), (17) and (18), came from C&SD's 2021 Population Census, while data under indicators (19) to (21) came from C&SD's Thematic Household Survey on Health, Elderly Care and Social Inclusion of Elderly Persons in 2024.

(*) Original household income, including the Government's recurrent cash measures.

(&) CSSA / OALA / OAA / DA / WFA.

(~) Excluding households with zero rent (e.g. those residing with relatives / friends without paying rent, and those living in accommodation provided free of charge by an employer) or households with zero income.

(#) Figures are not released due to large sampling errors.

(+) Proportion in the overall elderly population.

(++) To be interpreted with caution due to relatively large sampling errors.

N.A. Not applicable.

There may be a slight discrepancy between the sum of individual items and the total owing to rounding; the percentages may not add up to 100%.

Sources: 2021 Population Census, GHS in 2024, and Thematic Household Survey on Health, Elderly Care and Social Inclusion of Elderly Persons in 2024, C&SD.

Annexes of Education

Annex 1

School-based After-school Learning and Support Programmes

The School-based After-school Learning and Support Programmes (SALSP) are designed to support the participation of financial needy students in after-school learning activities. In the 2024/25 school year, there were approximately 172 000 beneficiaries, with total funding of about \$234 million.

Sharing by stakeholders of the SALSP

Sharing from a school teacher

The SALSP supports the holistic development of financial needy students, boosts their self-confidence and learning motivation through participation in after-school learning activities, and alleviates the financial burden on low-income families for their children's participation in extra-curricular activities. Students can learn through experiential activities in the community beyond the school environment. The tutorial classes are popular with parents.



Sharing from a student

Taking part in the SALSP leadership training activities helped me better understand my character and the importance of setting goals, which has greatly benefitted my personal growth.

Sharing from a parent

I am grateful to the tutors in the SALSP tutorial classes for their dedicated guidance and encouragement, which led to considerable improvement in my child's academic results.

Sharing from a non-governmental organisation

Through the SALSP, we have provided diverse training opportunities for students in the collaborating schools, complementing their existing programmes.

Scan the QR code
to listen to the
stakeholders'
sharing



Business-School Partnership Programme

Since the launch of the “Business-School Partnership Programme” (BSPP) in 2005, the EDB has been providing students with diversified career exploration activities, with a view to equipping them with knowledge and information about different industries so that they can better understand the workplace, develop positive work attitudes and get well prepared for further studies and career pursuits.

In the 2022/23 school year, the EDB further promoted co-operation between the business sector and schools through the launch of the BSPP 2.0 with more business partners covering more industries, to widen students’ exposure and enhance life planning.

Since the implementation of Life Planning Education, more than 580 business partners have joined the BSPP. The business partners have collaborated with the EDB to organise over 14 200 career exploration activities, covering around 40 industries, benefitting over 1.8 million student participants.

帶領學生走出課堂 認識職場
Lead Students out of Classrooms to Understand Workplaces

請加入教育局「商校合作計劃」
Please join Business-School Partnership Programme of EDB

協助青年人規劃人生 達致商校共贏
Assist Young People in Life Planning
Attain Mutual Benefits for Business Entities and Schools

4大得益
Main Benefits

- 提升公司形象
Enhance Enterprises' Public Image
- 推廣相關行業
Promote Relevant Industries
- 發掘青年人才
Identify Young Talents
- 提升培訓策略
Enhance Training Strategies

成為「商校合作計劃」機構伙伴，為學生、教師及家長提供多元化事業探索活動
Be a Business-School Partnership Programme partner to provide diversified career exploration activities to students, teachers and parents

香港特別行政區政府教育局
商校合作計劃網站
Education Bureau, The Government of H.K.S.A.R.
Business-School Partnership Programme Website
<https://www.edb.gov.hk/bspp>

聯絡我們
Contact Us

加入我們
Join Us

Sharing from the Stakeholders of the “Business-School Partnership Programme”

Student Sharing

The work experience has enhanced my understanding of Chinese medicine and helped me realise the importance of attentive patient observation. I also gained insight into the personality traits required to be a Chinese medicine practitioner. This experience has further inspired my life planning, and I hope that I can contribute to society in the future.

Teacher Sharing

As schools lack connections with enterprises in related industries, we are very grateful to the EDB's "Business-School Partnership Programme" for providing this valuable opportunity for students to broaden their horizons in the world of work.

Organisation Sharing

This activity on one hand allowed me to share our scope of work, industry prospects and entry requirements with students. On the other hand, it provided an opportunity for our organisation to understand the current situation and thoughts of the younger generation, so that we can adjust our training and strategies for new recruits.

Life-wide Learning and Sister School Grant

This grant is provided every year to enable public sector schools and DSS schools to flexibly organise learning activities outside the classroom and collaborate with sister schools.

Student Activities Support Grant

Schools can apply to the EDB for this grant to help financially needy students participate in life-wide learning activities.

Mainland Exchange Programmes and Study Tours for Students

The Government has been organising Mainland exchange programmes for students with diverse themes and subsidising those organised by schools, thereby providing sufficient quotas for all students in publicly funded schools to participate in at least one subsidised Mainland exchange programme each in their primary and secondary stages. In addition, all senior secondary students taking the local curriculum are fully subsidised to participate in one Chinese Mainland study tour related to the Citizenship and Social Development (CS) subject.



Sharing from stakeholders of the Mainland Exchange Programmes and Study Tours for Students

Participating students' voices



The visit to the Chinese Medicine Museum was an eye-opening experience for me. I learnt about the vast variety of Chinese herbal medicines and their diverse therapeutic effects. What particularly amazed me was that even unusual materials like rhinoceros horn and centipedes could be used in medicine, which truly showed our ancestors' profound understanding of the nature.



The comprehensive itinerary of the visit allowed us to fully understand the history and trajectory of economic development in Shanghai. We also realised that the prosperity and stability of modern society were rooted in the hard work and persistence of many generations.



We visited the source of the Dongjiang River at Sanbai Mountain, took a cable car, walked on a glass bridge, and admired the beautiful ecological environment of Sanbai Mountain. Through the illustrations of the docents and exhibits, we learnt about the history of the Dongjiang water supply to Hong Kong and the close relationship between Jiangxi and Hong Kong. A forest ranger who helps protect the source of the Dongjiang River shared his experience with us, allowing us to truly appreciate the great contributions and selfless spirit of those involved in constructing the Dongjiang water supply. Their work is worthy of our respect and admiration.



This study tour deepened my understanding of various aspects of development in the Chinese Mainland. I learnt that cities like Shenzhen and Guangzhou are rapidly developing in both economic growth and cultural preservation. Places like Qianhai attach great importance to innovation and technology development, creating opportunities for young people.

Sharing from a special school principal

The GS Mainland study tour opened a window to a broader world for students with SEN, creating unique cognitive paths for each individual. When visually impaired students touched the textures of a thousand-year-old city wall, when a wheelchair-bound teenager smiled at an accessible high-speed train platform, when an autistic child used a paintbrush to depict his understanding of a "beautiful village", it highlighted the visualisation and manifestation of civic education and a true measure of the level of civilisation of a society.



Mainland Experience Scheme for Post-secondary Students

Through the “Mainland Experience Scheme for Post-secondary Students”, the EDB provides funding for post-secondary students enrolled in full-time bachelor’s degree and sub-degree programmes to participate in exchange activities in the Chinese Mainland (including internships, voluntary service schemes, national/regional/international events and competitions). The scheme encourages them to gain first-hand understanding of the country’s latest social, economic and cultural landscape. In 2024/25 AY, the scheme provided funding of approximately \$4.1 million to 34 participating institutions.

Funding Scheme for Mainland and Global Engagement and Student Learning Experience

The 2022 Policy Address advocated a target for 2024/25 AY for approximately 50% of local undergraduate students at UGC-funded universities to gain learning experience outside Hong Kong. Since 2023/24 AY onwards, the UGC has injected an additional \$100 million into the “Funding Scheme for Mainland and Global Engagement and Student Learning Experience” to enable universities to provide more overseas exchange and learning opportunities up to 2025/26 AY and to enhance cross-cultural exchange on campus, thereby fostering a diverse and inclusive international learning environment. Universities use this funding to support local students’ participation in learning experience programmes outside Hong Kong, such as exchange programmes, visits, internships, field trips, voluntary service and international activities covering the Greater Bay Area (GBA), various other regions in China, Asia, Europe, America, Africa and Oceania, with the GBA being a key focus of the funding scheme. These activities encourage students to learn about diverse cultures and developments around the world, fostering cross-cultural adaptability and problem-solving skills, while also cultivating a sense of global citizenship and broadening their international horizons. For example, students recently undertook a two-week field project in Rwanda, where they successfully install approximately 400 solar power systems across seven villages, from which they gained significant benefits.

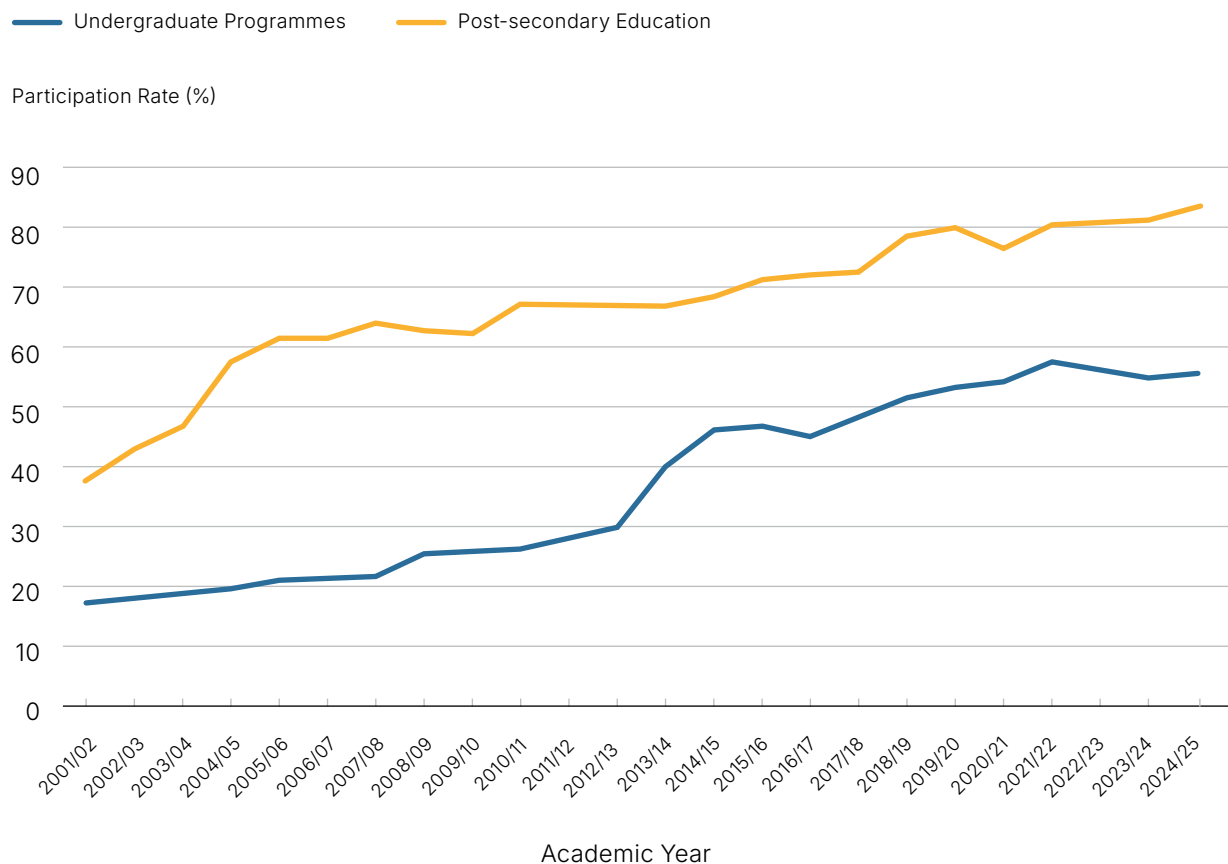
Furthermore, the UGC consistently encourages UGC-funded universities to actively utilise the collaborative platforms offered by university consortia to provide university staff and students with more opportunities for exchange with Chinese Mainland partners. During the 2025–2028 triennium, the UGC will provide a total of approximately \$12 million in funding to support four university alliances comprising Chinese Mainland and Hong Kong institutions to coordinate and organise various academic and exchange activities.



Annex 2 Post-secondary Education

Participation Rate in Post-secondary Education

The Government is committed to providing diversified articulation pathways with multiple entry and exit points for secondary school leavers. At present, there are 22 local degree-awarding higher education institutions (including nine publicly funded and 13 self-financing institutions). In addition to undergraduate programmes, students can pursue various sub-degree, continuing education, and vocational and professional education and training programmes. We adopt a parallel approach to supporting the development of publicly funded and self-financing post-secondary education. Currently, approximately 55% of the relevant age cohort have access to undergraduate programmes. Taking into account sub-degree programmes, more than 80% of young people have access to post-secondary education. After graduation from undergraduate programmes, student can choose from a wide array of postgraduate programmes, including both taught and research postgraduate programmes.



Study Subsidy Scheme for Designated Professions/Sectors

The Government's Study Subsidy Scheme for Designated Professions/Sectors (SSSDP) currently subsidises about 4 000 students per cohort to pursue designated full-time locally accredited self-financing undergraduate (including top-up degree) programmes and 2 000 students for sub-degree programmes in selected disciplines. This initiative aims to nurture talent for industries with high human resource demand.

In 2025/26 AY, the SSSDP has subsidised a total of 4 916 places in 55 undergraduate programmes across eight post-secondary institutions and 2 276 places in 32 sub-degree programmes across seven post-secondary institutions. The annual subsidy amount for undergraduate programmes ranges from \$46,780 to \$89,620 and for sub-degree programmes, it is \$23,390 or \$40,730. The subsidies are tenable for the normal duration of the respective programmes. Students in need may also apply for student financial assistance from the Student Finance Office of the Working Family and Student Financial Assistance Agency to cover the actual tuition fees due after the deduction of the subsidy.



VTC

As the largest VPET institution in Hong Kong, VTC is committed to providing comprehensive VPET services through its 14 member institutions, offering a diverse range of full- and part-time VPET programmes. VTC's programmes cover seven major professional areas: health and life sciences, business, childcare, elderly and community services, design, engineering, hospitality and information technology. VTC awards various qualifications ranging from Certificates, Diplomas and HDs to Bachelor's and Master's Degrees. VTC trains over 200 000 students per year, including 40 000 full-time students, nurturing skilled talent for various industries to meet the manpower demand from society and industry.

Diploma of Vocational Education (Senior Secondary Curriculum)

With the support of the EDB, VTC launched the Pilot Project on Diploma of Vocational Education (Senior Secondary Curriculum) in 2023/24 AY, allowing senior secondary school students to pursue VPET-related programmes embedded in the Hong Kong Diploma of Secondary Education curriculum.

The Pilot Project covers two subject areas: Hospitality and Information Technology. A total of 152 students have enrolled in these programmes. Since its launch, it has achieved positive outcomes, with both students and teachers reporting that it effectively enhances students' understanding of VPET and related industries, and helps them explore further study and career pathways at an early stage.

Annex 3 Enhancing Mental Health

“4Rs Mental Health Charter”

To promote mental health in schools in a comprehensive and systematic manner, the EDB launched the 4Rs Mental Health Charter (the 4Rs Charter) in the 2024/25 school year. Through inter-departmental and cross-sector collaboration, the EDB provides more services, activities and courses to the participating schools.



“Mental Health Literacy Resource Packages”

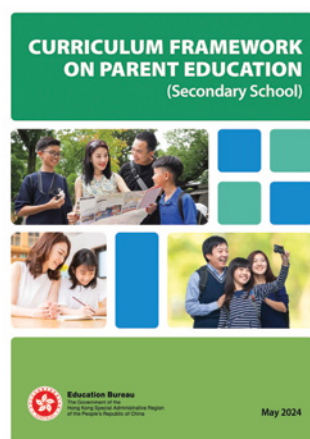
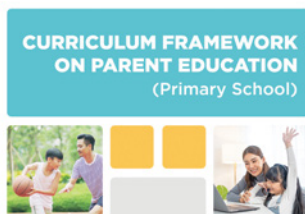
The EDB launched Mental Health Literacy Resource Packages for students at different learning stages. These resource packages aim to help student master and apply knowledge and attitudes about mental health through classroom activities. The resource packages have been uploaded to the “Mental Health @ School” website for schools’ reference.



Positive Parent Education Activities

The EDB has been actively promoting parent education, advocating proper ways and attitudes in parenting, fostering a positive and optimistic mindset among parents, and helping children learn effectively and grow up happily.

The EDB launched the Curriculum Frameworks on Parent Education, which are applicable to kindergartens, and primary and secondary schools respectively. These frameworks provide a common basis for schools, and relevant organisations or groups for systematic provision of parent education courses.



The EDB also makes use of the one-stop parent education website “Smart Parent Net” (parent.edu.hk) and its social media platforms to disseminate messages on supporting the physical and psychological development of students for parents’ reference.



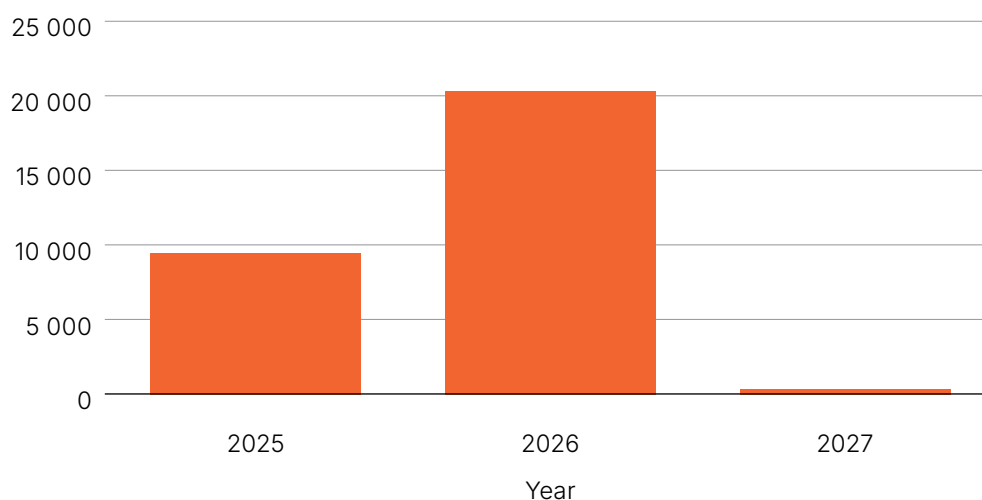
Housing Annexes

Annex 1

LPH Details

Urban	Choi Hing Road, Ngau Tau Kok Olympic Avenue, Kai Tak Shun On Road, Kwun Tong Choi Shek Lane, Kowloon Bay Sheung On Street, Chai Wan Shun Lee Tsuen Road, Kwun Tong Chuk Yuen Road, Wong Tai Sin
Extended Urban	Tsing Fuk Lane, Tuen Mun Yan Po Road, Tuen Mun Tsing Fat Street, Tuen Mun Hang Kwong Street, Ma On Shan
New Territories	Yau Pok Road, Yuen Long Choi Yuen Road, Sheung Shui

Number of LPH Units

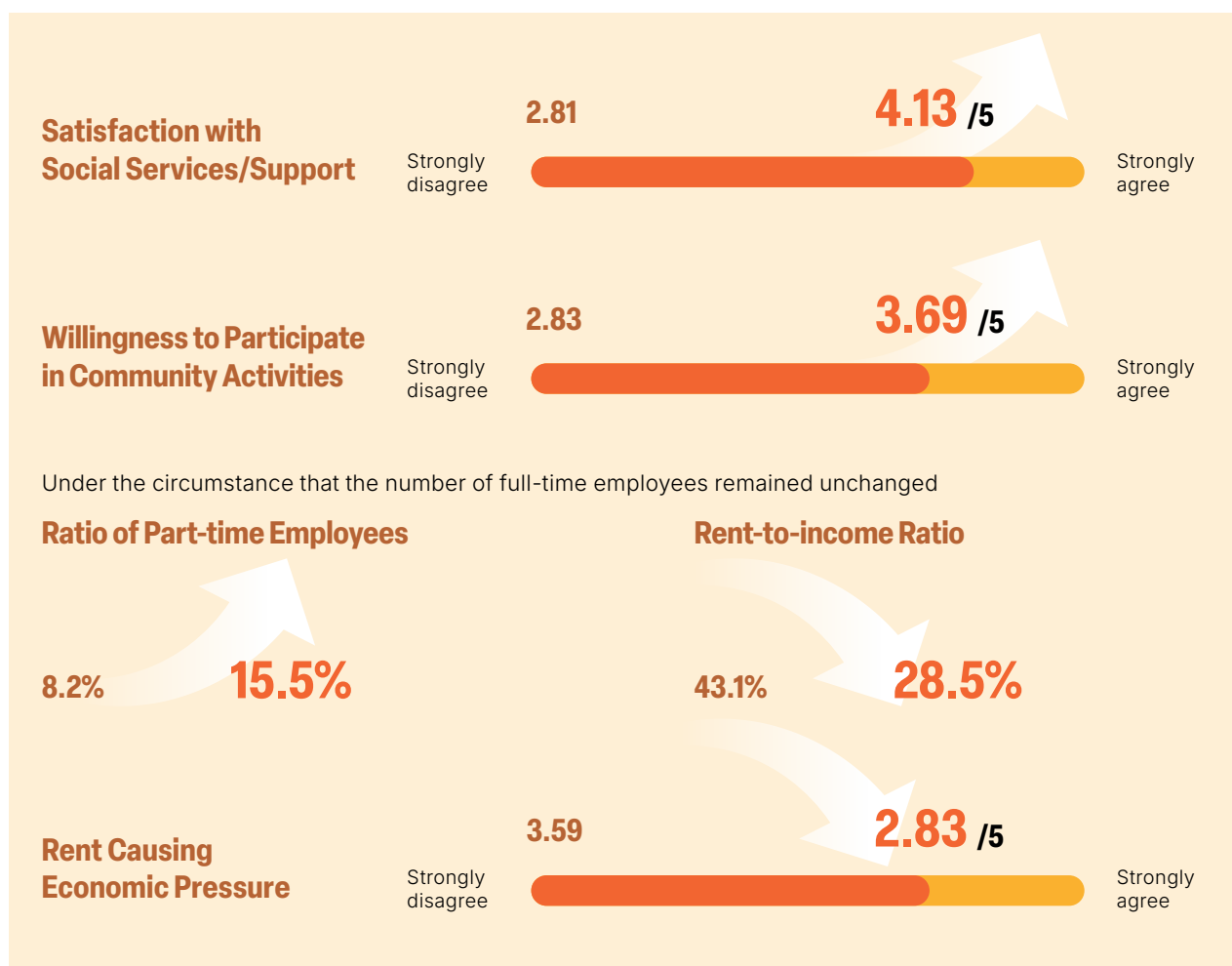




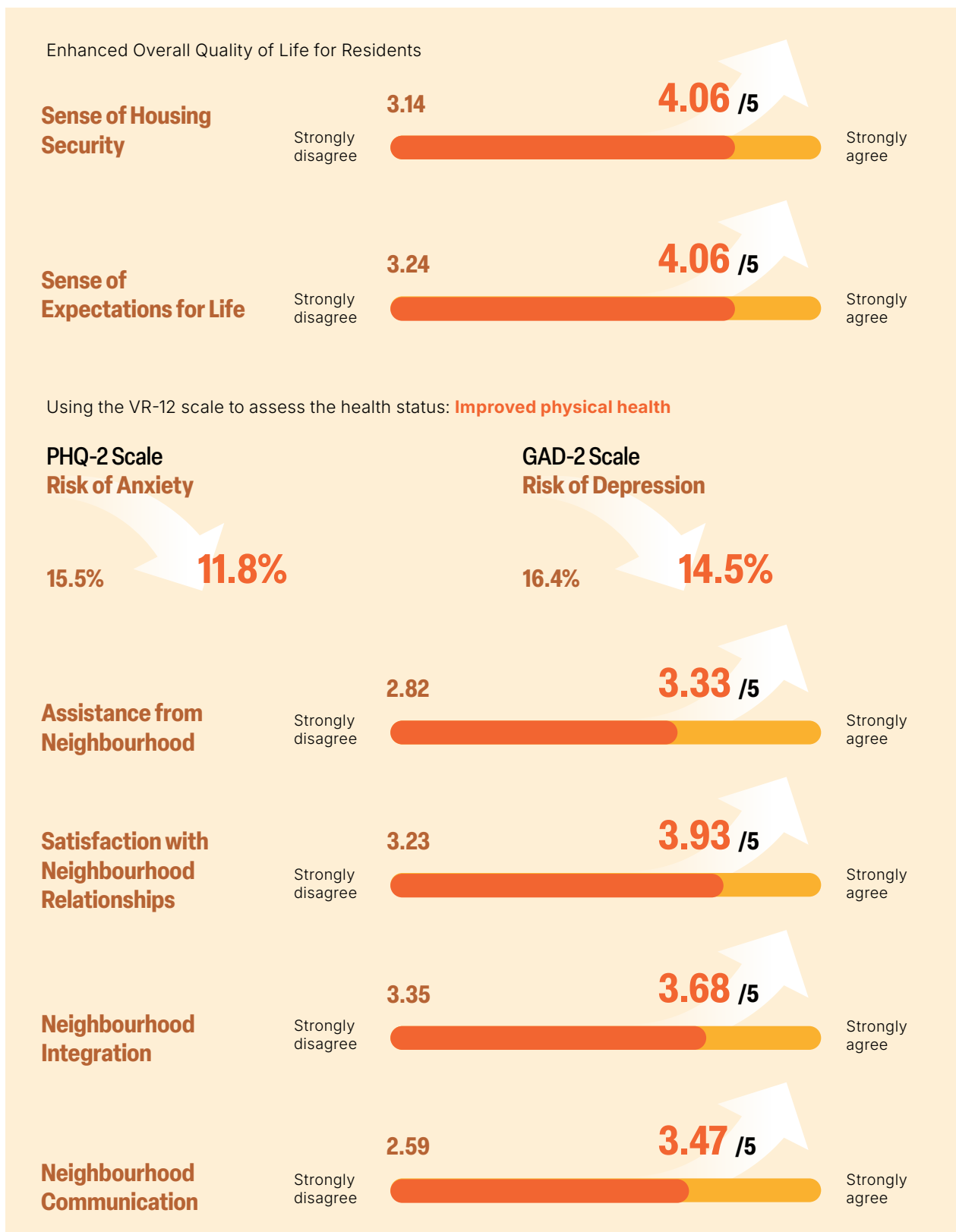
Annex 2

Findings of the "United Court Transitional Housing Study"

- The Hong Kong Sheng Kung Hui Welfare Council published its "Research on 'United Court' Transitional Housing" study at the end of June 2025, which was conducted in collaboration with City University of Hong Kong, the University of Hong Kong, Lingnan University, Saint Francis University and the University of New South Wales. The research confirmed that TH has positively impacted the residents' physical and mental health, sense of security at home and community connections. It also significantly relieved their rental burden, with their rent-to-income ratio falling considerably from roughly 43.1% to 28.5%. In terms of physical and mental well-being, the study assessed the respondents' health and found that both their physical and mental health had improved.



- From end-2022 to early 2024, the respondents' anxiety risk level decreased from 15.5% to 11.8%. As regards community engagement, respondents became more engaged in the community after moving into United Court, with their willingness to participate in community activities increasing significantly from 2.83 out of 5 before moving in to 3.69 afterwards. These findings demonstrate that living in United Court provides residents with a stable and secure environment, significantly improving their living environment, and providing a healthier and more engaged community life.



Annex 3

Trial Schemes on Special Allowance for Households of TH and LPH (Trial Schemes)



- The Trial Schemes funded by the Community Care Fund provide one-off special allowances to alleviate financial pressure on residents of TH and LPH during their transition to their new living environment and community (e.g. children's school transfers, purchasing furniture and appliances, rebuilding community networks, etc.). Depending on the number of family members living together and the location of the housing project, the allowance amounts range from \$1,950 to \$13,000.

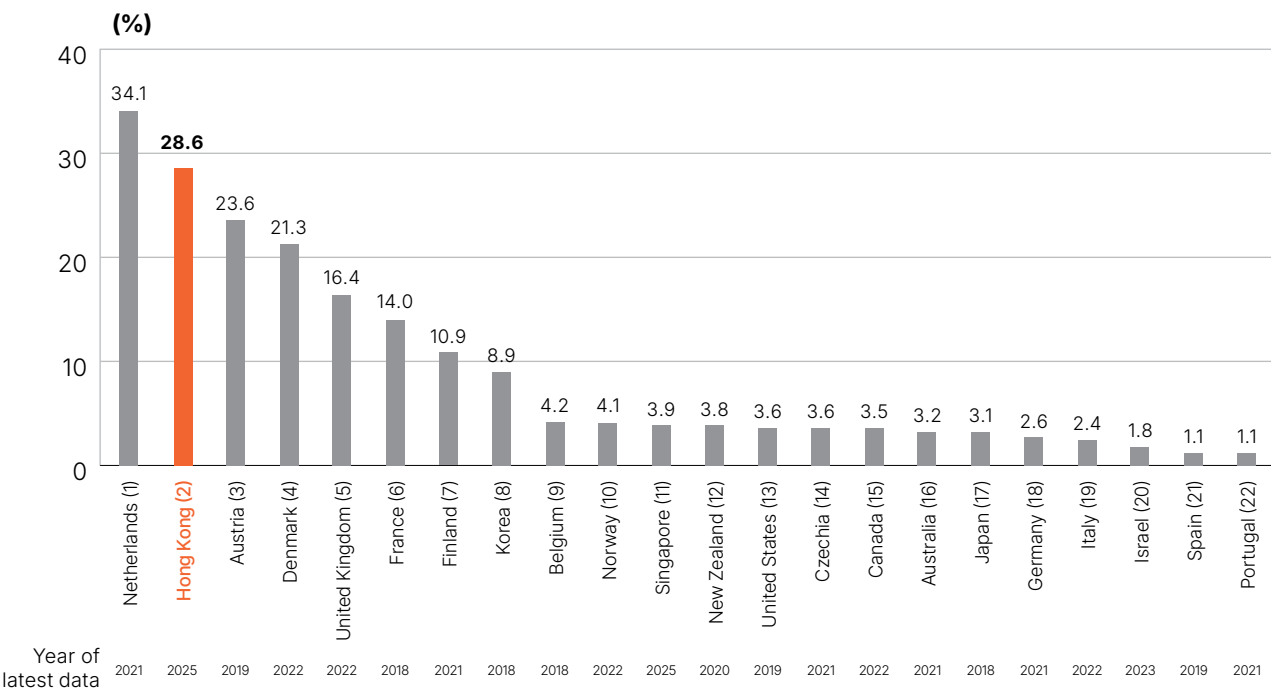


Annex 4

Proportion of public rental housing units in total housing stock

- One of the main objectives of the Government's housing policy is to provide public rental housing for low-income families who cannot afford to rent private residential units, so as to meet their basic housing needs and reduce their housing expense burdens, and thereby increasing their disposable economic resources. This has a positive effect in alleviating, combating and preventing poverty. Since taking office, the current-term Government has been actively tackling the housing issue and striving to substantially increase the supply of public housing, including public rental housing and subsidised sale flats, in order to address the housing needs of the grassroots effectively.
- In 2025, public rental housing units accounted for nearly 30% of the total housing stock in Hong Kong, which was the second highest proportion among the selected economies.

Proportion of public rental housing units in total housing stock



Notes:() Figures in parentheses denote the rankings of the selected economies (in descending order). Singapore's proportion is a rough estimate. It is worth noting that about 70% of residential dwelling units in Singapore are public housing units for sale. These units are sold to Singapore citizens and permanent residents below market prices (in terms of the housing ladder in Hong Kong, they are similar to the Home Ownership Scheme flats). Therefore, the proportion of public rental housing units in Singapore shown in the figure is rather low.

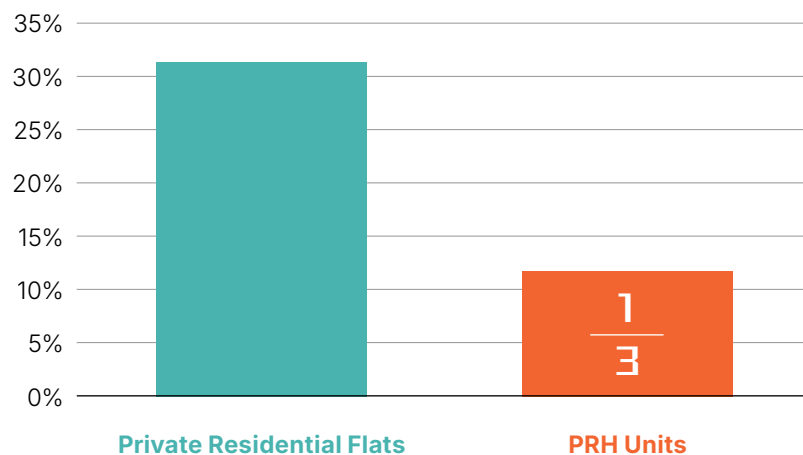
Sources: OECD Affordable Housing Database; Hong Kong's data came from Housing Bureau's *Housing in Figures 2025*; as for Singapore, the data on public rental housing units came from the Housing & Development Board of Singapore, and the data on the total number of residential dwelling units came from the Singapore Department of Statistics.

Annex 5

Enhancing Wellbeing

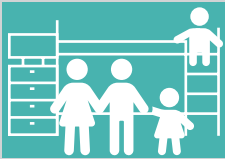
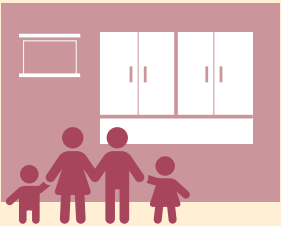
(a) Rental Burden of PRH Tenants Only One-third That of Private Housing Tenants

Median Rent-to-Income Ratio of PRH Households and Private Housing Tenants



Data Source: 2021 Population Census – Main Results, Census and Statistics Department

(b) More Spacious Accommodations and Better Living Conditions for PRH Households

	SDUs in residential buildings ⁽¹⁾ Median internal floor area: 10 sq. m. Supporting Facilities: None
	PRH Units ⁽²⁾ Median internal floor area: 32 sq. m. Supporting Facilities: Comprehensive community facilities, such as retail shops, kindergartens, welfare facilities and car parks

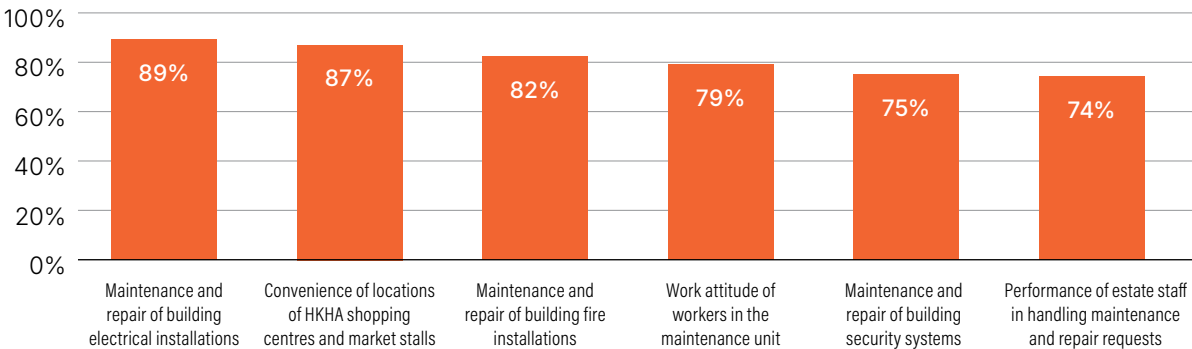
Notes:

- (1) The floor areas of common areas shared by households are excluded. (Data source: Results of a 2024 study conducted by the Task Force on Tackling the Issue of Subdivided Units of the Government).
- (2) Data Source: 2021 Population Census – Main Results, Census and Statistics Department.

Annex 5 (Cont.)

(c) Enhanced Satisfaction with PRH Estate Management Services

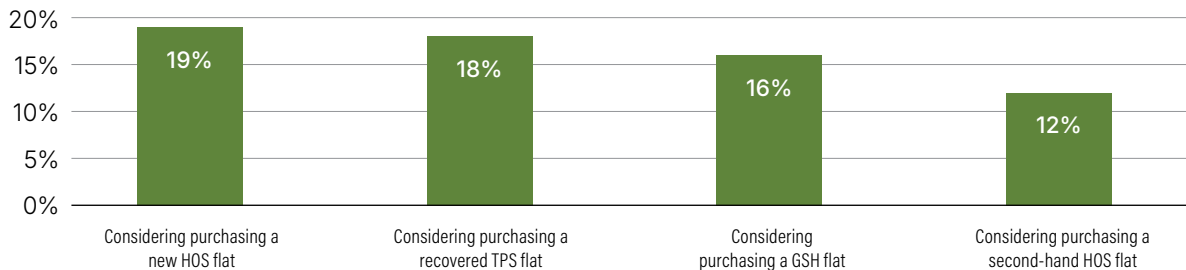
Satisfaction Index of PRH Tenants on Estate Management Services



Data Source: Public Housing Recurrent Survey 2025, Housing Department

(d) Low PRH Rents Enable Tenants to Accumulate Wealth for Home Ownership and Strive for Upward Mobility

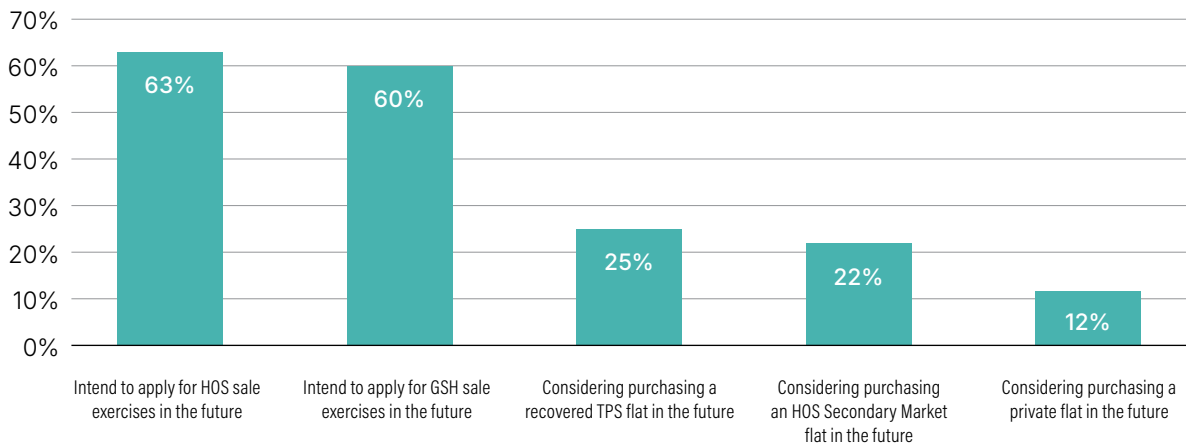
Intention of PRH Tenants to Purchase SSF



Data Source: Public Housing Recurrent Survey 2025, Housing Department

(e) Perseverance and Reaching Higher

Future Housing Plans of Unsuccessful Green Form Applicants



Data Source: Survey on Applicants of the Sale of Home Ownership Scheme Flats 2023, Housing Department

Annex 6

Green Form Subsidised Home Ownership Scheme (GSH)

- To facilitate home ownership for PRH households, the HKHA launched the GSH Pilot Scheme in 2016 and regularised it in 2018. With the “one-for-one” arrangement under the GSH, each GSH flat serves the dual functions of addressing the home ownership aspirations of Green Form applicants and allowing PRH flats to be recovered and reallocated to other applicants, fulfilling their housing needs and achieving a win-win situation. GSH flats are sold at a discount of 10% more than the price determined for the preceding HOS sale exercise.

Home Ownership Scheme (HOS)

- Since the sale of HOS flats in 1978 by the HKHA, the flats have remained popular among the public and PRH households. The HKHA reserves a specific quota for Green Form applicants in each sale exercise, with at least a 30% discount from the assessed market value of the flats.

HOS Secondary Market Scheme

- The HKHA formally implemented the HOS Secondary Market Scheme in 1997. It enables PRH households and Green Form Certificate holders to purchase flats sold under the HOS / Private Sector Participation Scheme / TPS. It later included flats sold under the GSH. Under this arrangement, SSF owners can sell their flats in the HOS Secondary Market with premium unpaid, increasing the turnover of SSFs to meet society's demand for SSFs. Importantly, this provides current PRH tenants and Green Form Certificate holders with an additional pathway to home ownership without quota restrictions.
- To address the aspirations of low- to middle-income families seeking home ownership, the HKHA launched an Interim Scheme to extend the HOS Secondary Market to White Form buyers in 2013 and 2015, and endorsed it in November 2017 to regularise the Interim Scheme as the White Form Secondary Market Scheme (WSM), with effect from 2018.



Annexes of Social Welfare and Employment Services

Annex 1 Child Care Services

“Foster Care Service”

The Foster Care Service provides residential family care and protection for children under the age of 18. To encourage dedicated individuals to become foster parents, the Government has substantially increased the incentive payment for foster parents. The monthly incentive payment for ordinary foster care service has more than doubled, from about \$5,000 to about \$11,000; and that for emergency foster care service has doubled from about \$6,600 to about \$13,000. Additional support is provided to foster families caring for children with special learning or care needs, including arranging early assessment and professional rehabilitation therapy and training.



“Neighbourhood Support Child Care Project” (NSCCP) – “Home-based Child Carers”

Starting in April 2024, the Government increased the incentive payment for “home-based child carers” to encourage more people to participate in the NSCCP. For caregivers of infants and young children aged 0 to 3 or children with special learning needs, the rate has more than doubled to \$60 per hour. For caregivers of other children, the rate has increased by 60% to \$40 per hour. Since September 2024, the number of service places under the project has doubled from 954 to about 2 000, with the number of child beneficiaries increasing from up to 10 000 to 20 000. To better meet parents’ needs for childcare, the number of service places under the NSCCP will be further increased to 2 500, with the number of beneficiaries expected to increase from 20 000 to 25 000 children.



社區保姆
Home-based
Child Carer





Annex 2 Rehabilitation Services

“Day Activity Centre”

The centre provides day care and training in daily living skills and basic work skills for persons with intellectual disabilities, preparing them for better integration into the community or transition to other forms of service or care.



“Integrated Vocational Rehabilitation Services Centre” and “Integrated Vocational Training Centre”

The centres provide vocational rehabilitation and training to strengthen the working ability of persons with disabilities in a specially designed environment to support their open employment.



“Supported Employment Training for Persons with Disabilities Service Units”

These units provide employment training to persons with disabilities, along with wage subsidies to encourage employers to provide jobs for them.



“Shine Skills Centres”

These centres, run by the VTC, provide vocational training to persons with disabilities aged 15 or above to improve their employment prospects for open employment.



“Enhancing Employment of People with Disabilities through Small Enterprise Project” (3E Project)

This project funds non-governmental organisations to set up small enterprises/businesses using a market-driven approach to create more work opportunities for persons with disabilities. The maximum grant per small enterprise/business is \$3 million.



“Work Orientation and Placement Scheme”

This scheme provides on-the-job training allowances to employers to encourage them to employ persons with disabilities and provide them with training and support, and to appoint mentors to assist employees with disabilities. Eligible employers of persons with disabilities are entitled to an on-the-job training allowance of up to \$60,000 per employee during the nine-month subsidy period.



“Caring Employer” Medal

In the 2024 Policy Address, the Chief Executive announced that to encourage and support persons with disabilities to engage in employment, the Government would introduce the “Caring Employer” medal, commending employers who actively engage persons with disabilities.



“Scheme on Living Allowance for Low-income Carers of Persons with Disabilities”

This scheme provides carers of older adults and persons with disabilities from low-income families with a monthly living allowance to help supplement their living expenses, so that frail elderly and persons with disabilities may, with the help of their caregivers, receive proper care and remain living in the community.



“Special Care Subsidy Scheme for Persons with Severe Disabilities”

This scheme provides a monthly subsidy to individuals aged under 60 with severe disabilities living in the community, requiring constant care and receiving a higher disability allowance under the Social Security Allowance Scheme. The aim of the subsidy is to help them purchase care goods and services or pay for other nursing-related expenses.





“Community-based Support Projects for Persons with Disabilities and their Families”

These projects subsidise various non-governmental organisations to launch projects aimed at strengthening the capacity of caregivers, relieving their stress, and improving the quality of life of persons with disabilities and their families.



“Designated Hotline for Carer Support”

This hotline provides caregivers with information on community support services, emotional support and counselling, welfare service referrals and matching of respite services. It also provides emergency support to caregivers in need through outreach services.



“Professional Outreaching Team for Private Residential Care Homes for Persons with Disabilities (POT)”

To address the social and rehabilitation needs of residents of private Residential Care Homes for persons with Disabilities (RCHDs), the Government established district-based POTs, comprising physiotherapists, occupational therapists, speech therapists, registered nurses (psychiatric), social workers and clinical psychologists. POTs provide multi-disciplinary outreach services for private RCHDs (including persons with physical and/or intellectual disabilities, persons in mental recovery and/or persons with suspected mental health problems) to facilitate their integration into the community.



“Financial Support Scheme for Self-help Organisations for Persons with Disabilities/Chronic Illnesses” (FSS)

To support self-help organisations for persons with disabilities and to assist in their development and operation, the SWD launched the FSS. The scheme is structured in two-year batches, providing financial support for self-help organisations/persons with disabilities. The FSS has allocated over \$50 million for a total of 104 self-help organisations.



Annex 3 Training and Employment Services

“Employment Programme for the Elderly and Middle-aged”¹

This programme aims to encourage employers to hire persons aged 40 or above and provide them with on-the-job training. Eligible employers can receive a maximum on-the-job training allowance of \$5,000 per month per employee for three to 12 months, facilitating the employment of older and middle-aged persons.



“Youth Employment and Training Programme” (YETP)²

The YETP provides a comprehensive platform of job search and employment support for young people aged 15 to 29 with an educational attainment at sub-degree level or below, aimed at enhancing their employability. The YETP also provides on-the-job training allowances to employers to encourage the employment of young people under the programme.

“Racial Diversity Employment Programme”³

This programme commissions non-governmental organisations, through a case management approach, to provide one-stop employment services for ethnic minority job seekers and to connect with employers across industries, thereby increasing employment opportunities for ethnic minority job-seekers.



1. Details are available at: <https://www.jobs.gov.hk/0/en/information/epem/>
2. Details are available at: <https://www.yes.labour.gov.hk/Home?c=en>
3. Details are available at: <https://www.jobs.gov.hk/0/en/information/rdep/>

“GBA Youth Employment Scheme”⁴

This scheme encourages enterprises with business in both Hong Kong and GBA Mainland cities to employ Hong Kong young people aged 29 or below with sub-degree or higher qualifications, in accordance with Hong Kong laws to work in GBA Mainland cities. The scheme also aims to foster their career development and the exchange of talent in the GBA. Participating enterprises can receive an allowance of \$12,000 per month per young person for up to 18 months.



4. Details are available at: <https://www.jobs.gov.hk/0/en/information/gbayes/>

Abbreviations (listed in alphabetical order)

AI	Artificial Intelligence
ASCP	After School Care Programme
AY	Academic Year
BSPP	Business-School Partnership Programme
C&SD	Census and Statistics Department
Care Teams	District Services and Community Care Teams
CCC	Child Care Centre
CCF	Community Care Fund
CCSV	Community Care Service Voucher
CDF	Child Development Fund
CDSP	Community Dental Support Programme
CLR	Community Living Room
CM	Chinese Medicine
CMCTRs	Chinese Medicine Clinics cum Training and Research Centres
CoP	Commission on Poverty
CS	Citizenship and Social Development
CSSA	Comprehensive Social Security Assistance
DA	Disability Allowance
DAC	Day Activity Centre
DH	Department of Health
DHC	District Health Centre
DHCEs	District Health Centre Expresses
DM	Diabetes Mellitus
EDB	Education Bureau
EETC	Early Education and Training Centre
EHCv	Elderly Health Care Voucher
EHVS	Elderly Health Care Voucher Scheme
ERB	Employees Retraining Board
FDHs	Foreign Domestic Helpers
FMC	Family Medicine Clinics
FMIC	Family Medicine Integrated Centres
FMOP	Family Medicine Out-patient



FSS	Financial Support Scheme for Self-help Organisations for persons with disabilities/ Chronic Illnesses
FWSS	Fee-Waiving Subsidy Scheme
FY	Financial Year
GBA	Greater Bay Area
GDP	Gross Domestic Product
GHS	General Household Survey
GOPC	General Out-patient Clinics
GSH	Green Form Subsidised Home Ownership Scheme
HA	Hospital Authority
HB	Housing Bureau
HD	Higher Diploma
HHB	Health Bureau
HKCSS	Hong Kong Council of Social Service
HKHA	Hong Kong Housing Authority
HKHS	Hong Kong Housing Society
HKMU	Hong Kong Metropolitan University
HOS	Home Ownership Scheme
HOS SMS	Home Ownership Scheme Secondary Market Scheme
HT	Hypertension
IE	Integrated Education
IH	Interim Housing
IP	Integrated Programme in Kindergarten-cum-Child Care Centre
IVRSC	Integrated Vocational Rehabilitation Services Centre
KPIs	Key Performance Indicators
LD	Labour Department
LFPR	Labour force participation rate
LIFA	Low-income Working Family Allowance
LPH	Light Public Housing
LWB	Labour and Welfare Bureau
NSCCP	Neighbourhood Support Child Care Project

Abbreviations

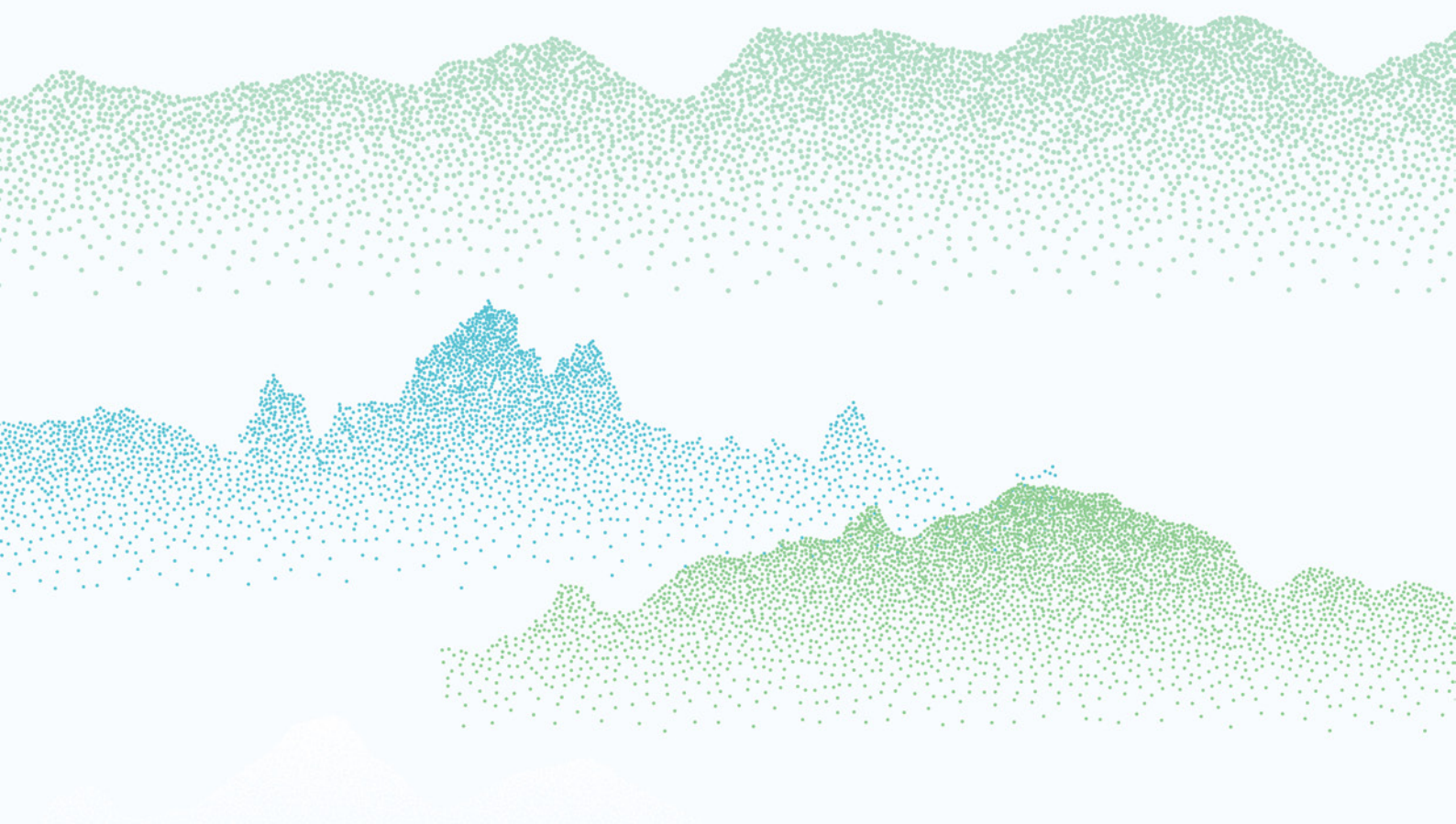
OAA	Old Age Allowance
OALA	Old Age Living Allowance
OECD	Organisation for Economic Co-operation and Development
OGE	Office of the Government Economist
OPRS	On-site Pre-school Rehabilitation Services
PCSSA	Portable Comprehensive Social Security Assistance
PHC	Primary healthcare
Pilot Scheme	District Services and Community Care Teams – Pilot Scheme on Supporting Households of Singleton/Doubleton Elderly and Carers of Elderly/Persons with Disabilities
PIRLS	Progress in International Reading Literacy Study
PISA	Programme for International Student Assessment
POT	Professional Outreaching Team for Private Residential Care Homes for Persons with Disabilities
PRH	Public Rental Housing
PSEA	Post-secondary Educational Attainment
PTFSS	Public Transport Fare Subsidy Scheme
QEF	Quality Education Fund
RAS	Rent Assistance Scheme
RCHDs	Residential Care Homes for persons with Disabilities
RCHes	Residential Care Homes for the Elderly
RCS	Residential Care Services
RMP	Reverse Mortgage Programme
SALSP	School-based After-school Learning and Support Programmes
SCCC	Special Child Care Centre
SCNAMES	Standardised Care Need Assessment Mechanism for Elderly Services
SDCS	School Dental Care Service
SDUs	Subdivided Units
SE	Special Education
SEN	Special Educational Needs
SENCO	Special Educational Needs Coordinator
SFA	Student Financial Assistance



SFU	Saint Francis University
SnRP	Strive and Rise Programme
SOPCs	Specialist Out-patient Clinics
SSA	Social Security Allowance
SSF	Subsidised Sale Flats
SSSDP	Study Subsidy Scheme for Designated Professions/Sectors
SWD	Social Welfare Department
TH	Transitional Housing
the 3E Project	Enhancing Employment of People with Disabilities through Small Enterprise
the 4Rs Charter	4Rs Mental Health Charter
the Funding Scheme	Funding Scheme to support Transitional Housing Projects by Non-government Organisations
the Government	The Government of the Hong Kong Special Administrative Region
the Programme	the Strive and Rise Programme
the Report	Report on Impact of Targeted Poverty Alleviation Strategy in Hong Kong
the Scheme	the School-based After School Care Service Scheme
THS	Thematic Household Survey
TIMSS	Trends in International Mathematics and Science Study
TPS	Tenants Purchase Scheme
Trial Schemes	Trial Schemes on Special Allowance for Households of Transitional Housing and Light Public Housing
TVB	Television Broadcasts Limited
UASs	Universities of Applied Sciences
UGC	University Grants Committee
VPET	Vocational and Professional Education and Training
VTC	Vocational Training Council
WFA	Working Family Allowance
WFSFAA	Working Family and Student Financial Assistance Agency
WITS	Work Incentive Transport Subsidy
YETP	Youth Employment and Training Programme



Commission on Poverty



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