IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

[2026] SGFC 45

Divorce No 3679 of 2024
FC/RA 3 of 2026
HCF/RAS 5 of 2026

Between

XZE

… *Plaintiff*

And

XZF

… *Defendant*

JUDGMENT / GROUNDS OF DECISION

[Family Law – Examination of Children – Expert Evidence – Whether leave should be granted for applicant to adduce and rely upon medical reports]

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XZE
v
XZF

[2026] SGFC 45

Family Court — Divorce No 3679 of 2024
Registrar's Appeal No 3 of 2026
District Judge Kenneth Yap
2 March 2026

30 March 2026

District Judge Kenneth Yap:

Introduction

1 This appeal is against the Assistant Registrar's ("AR") decision to dismiss the Mother's application for leave under Rule 35(4) of the Family Justice Rules 2014 ("FJR 2014") to adduce medical reports from two doctors to ascertain the special educational needs of the child.

2 I dismissed the appeal and provide my reasons as follows.

Facts

The Parties

3 The parties married on 24 November 2011, with one male child to the marriage, aged 13. They resided with the child in Australia for a majority of the marriage, until the Mother relocated with the child to Singapore in early 2024.

4 Divorce proceedings commenced on 13 August 2024, and interim judgment was granted on 17 February 2025. Parties have now agreed on all ancillary matters save for maintenance, which will in turn be impacted by the question of whether the child attends a private as opposed to government special needs school ("the disputed issue").

Background to the Dispute

5 The medical reports in question are provided by Senior Consultant Psychiatrist Dr Jared Ng dated 22 September 2025 and Senior Consultant Dr Tian Cheong Sing dated 22 October 2025. It is not disputed that the child has been diagnosed with Autism Spectrum Disorder and Attention Deficit Hyperactivity Disorder with mild intellectual disability. It is also agreed between the parents that the child does require placement in a special needs school.

6 The Mother submits that these reports would assist the Court on:

(a) The child's appropriate educational placement;

(b) The need for shadow support/aide in the school environment;

(c) The level and structure of therapeutic and development interventions required; and

(d) The management of transition-related risks.

7 The Mother adduced the report by Dr Jared Ng in her Affidavit of Assets and Means filed on 2 October 2025. The Father sought to have this medical report expunged as it was adduced without leave of Court as required under Rule 35 of the FJR 2014. In response, the Mother filed SUM 2667 of 2025 to apply for leave to adduce Dr Jared Ng's report and in her supporting affidavit to this application, further adduced Dr Tian Cheong Sing's report.

8 Rule 35(1) of the FJR 2014 requires parties to obtain leave of Court before causing a child to be examined by a medical practitioner for the purposes of tendering expert evidence in family proceedings. Where such leave has not been obtained, an application can be made under Rule 35(4) of the FJR 2014 to nevertheless adduce such evidence of the examination or assessment, with the leave of court. Rule 35(1) and (4) are provided as follows:

> 35.—(1) Where a child is a party to or a subject of any action or proceedings, or where any action or proceedings involve the welfare or custody of a child, a party must not, without the leave of the Court, cause the child to be examined or assessed by any registered medical practitioner, psychologist, counsellor, social worker or mental health professional for the purpose of preparing expert evidence for use in those proceedings.
>
> (4) Where a registered medical practitioner, psychologist, counsellor, social worker or mental health professional who is not appointed by the Court pursuant to an application under paragraph (1) examines or assesses the child, no evidence

> arising out of the examination or assessment may be adduced without the leave of the Court.

The Medical Reports

9 Dr Jared Ng is a Senior Consultant (Psychiatrist) and Medical Director at Connections Mindhealth. He examined the child on 26 April 2024 and 3 July 2024. A further appointment on 13 December 2024 could not proceed because the child had become dysregulated. The relevant portions of Dr Jared Ng's report are extracted as follows:

> From the history provided and my observations, (the child) was a boy with significant social and emotional difficulties related to his autism and ADHD…
>
> Given his diagnosis of autism, ADHD, and mild intellectual disability, (the child) has clear special educational needs. He requires a highly structured environment, predictable routines, and skilled adult support to manage emotional dysregulation and prevent meltdowns. **A mainstream school setting without tailored support is unlikely to meet his needs. He would benefit from placement in a private special needs school with small class sizes, an autism focused curriculum, and access to therapies such as speech and occupational therapy. A one-to-one shadow teacher or classroom aide would also be helpful in supporting him during transitions and stressful settings, providing consistency and helping him apply coping strategies.**
>
> …
>
> In summary, (the child) is a child with complex psychiatric and developmental needs … He will benefit from a comprehensive, multidisciplinary approach including psychiatric follow up,

> behavioural support and **a school placement designed for children with autism and intellectual disability. He requires structured support at school and at home, shadow support in the classroom,** and ongoing involvement of his mother, to whom he has shown a strong attachment.
>
> [*Emphasis added*]

10 Dr Tian Cheong Sing is a Senior Consultant from the Department of Psychological Medicine at the National University Hospital. The Mother had brought the child to see him on 5 November 2024 following their return to Singapore in April 2024 to continue the management of the child's Autism Spectrum Disorder. The relevant portions of his report are extracted below:

> 9. In summary, (the child) suffers from an Autism Spectrum Disorder. An assessment of his cognitive functioning in Year 2018 revealed borderline intellectual functioning at that time.
>
> 10. There are severe social communication and language difficulties and very poor emotional functioning with emotional dysregulation.
>
> 11. **I am of the opinion that (the child) will require placement in a special school where his current intellectual functioning can be assessed and a (sic) individualised educational plan can be mapped out with an educational psychologist. He will need intensive psychological therapy, home based and school based support to cope with the learning.**
>
> 12. I am also of the opinion that a delay in implementing the educational interventions will lead to a further accumulation of his deficits.
>
> [*Emphasis added*]

The Decision by the AR

11 The AR dismissed the application, noting that since both parties agreed that the child required enrolment in a special needs school, the dispute pertained only to whether a government or privately-run special needs school would be appropriate. The AR also accepted the Defendant's submission that it would not fall to medical professionals to opine on the matter of affordability and what the child's reasonable expenses should be.

12 The AR also noted that in any event, neither of the two doctors in their medical reports had given an opinion on the appropriateness of attending a private as opposed government-run special needs school. Dr Jared Ng had only appeared to make a comparison between "a mainstream school setting without tailored support" and a "private special needs school". Similarly, Dr Tian Cheong Sing's medical report merely stated that the child required placement in a special school. The AR pointed out that neither doctor had addressed the disputed issue specifically.

13 Finally, the AR also accepted the Mother's submission that the medical reports were prepared without the Father's involvement and input.

14 Given the above, the AR dismissed the application and reserved costs to the ancillary hearing.

The Appeal

15 In the appeal, counsel for the Mother submitted that the reports were relevant as they still articulated the child's needs even if they did not express an opinion on the disputed issue. As the reports were already available, it was

submitted that they should be placed before the hearing judge at the ancillary hearing.

16 Counsel for the Father contended that neither report addressed the crux of the parties' dispute. There was no evidence provided in the reports on the quality of education from the two types of schooling options and how it impacted the four listed issues in the Mother's summons. It was also submitted that the reports were skewed and should not have been provided without input from the Father, and that the expertise of the doctors in relation to the disputed issue was unclear. Finally, as to the disputed issue, the Father submitted that there would be no need for an expert report to opine on the appropriate educational placement, as the question of affordability of such private special needs school should properly be the province of a hearing judge and not a medical professional.

My Decision

17 At the outset, I note that the threshold that an applicant has to meet for leave to be granted under Rule 35(4) of the FJR 2014 to adduce a medical report is one based on necessity and not relevancy alone.

18 In *UVM v UVN* [2019] SGFC 56, the Court noted that "(t)he purpose of Rule 35 of the FJR 2014 is to ensure that the child is not subject to unnecessary psychological assessment which could of itself lead to issues of its own." (at [19]). In this regard I note that the AR had suggested that parties appoint a joint expert and agree on a list of issues to be put to the expert, but no agreement was reached. There is every likelihood that, if this report were admitted, the Father would in turn request for an expert of his choosing to examine the child and provide a separate view on the appropriateness of private special needs

schooling. The court has to consider whether such multiple medical assessments are in the best interest of the child, and whether the views expressed therein would truly be determinative of the disputed issue.

19 For an applicant to be granted leave under Rule 35(4), there needs to be clarity of the purpose of such expert evidence and the probative value it will bring to the hearing, before the court will permit the child to be subjected to such examination or assessment. In *XAB v XAC* [2024] SGFC 53 ("*XAB v XAC*"), when dismissing the application for a psychologist to examine the child to prepare a report, the Court held at [17] that:

> The assessment of a child is not simply a fact-finding exercise but may be better described as a forensic one, in order to gain expert insight/evidence on issues which are relevant to the proceedings in which leave for such assessment is sought. It should therefore be clear why the expert evidence is required, and what questions it would answer, relating to the welfare or interest of, or relating to the custody, care and control of and access to the child.

20 The Court in *XAB v XAC* further referred to the factors found in the UK Children and Families Act 2014 in relation to such applications to adduce expert evidence, and considered these to provide helpful guidance with regard to an application under Rule 35. These factors include (a) the impact of the examination or assessment on the welfare of the child, (b) the issues to which the expert evidence would relate, (c) the questions which the court would require the expert to answer, (d) what other expert evidence is available, (e) whether the evidence could be given by another person on the matters on which the expert would give evidence, (f) the impact on the timeline, duration and conduct of the proceedings and (g) the cost of the expert evidence (at [18]).

21 The question of the necessity of an expert report should therefore be prefaced by a concise framing of the issue(s) that the expert is called upon to address. A report should not be called for just because it is generally informative or useful to provide context or background to the child issues at hand. To my mind, the justification for calling an expert depends on several factors which can be framed as follows:

(a) **Cogency:** Whether the expert has the relevant expertise to address the issues to be answered, and whether the methodology and modality of the examination would result in a report that is helpful to the court in addressing the disputed issue.

(b) **Fairness:** Whether the other party needs to be involved in the examination by the expert, and if so, whether this has or will be done, and/or whether the report will be jointly accepted by the parties or it is open to the other party to apply for a separate expert report.

(c) **Best interests of the child:** What the impact of the examination or assessment will have on the welfare of the child.

(d) **Cost and delay:** Whether the cost and time taken for the examination or assessment is commensurate to the significance of the issues to be answered, as well as whether other expert or factual evidence is available to address the issues.

(e) **Impact on therapeutic outcome:** What impact such examination or assessment would have on the parties, and whether it would detract from a sustainable and long-term resolution of the conflict between the parties.

22 In the present case, I found the first factor of cogency to be clearly in favour of the Father. I agreed with the AR that the medical reports did not specifically address the disputed issue at all. The question of whether a private or government-run special needs school would be more appropriate for the child's needs was not specifically posed to or answered by either practitioner. I also did not expect it to be within the scope of medical expertise for a practitioner to comment on the adequacies of government-run special needs schools.

23 As regards the consideration of fairness, I did not find the lack of input from the Father in the examination process to be fatal. The issue at hand is the educational needs of the child, and not the relationship between the child and the Father. I did however consider that the Father would very likely apply for his own expert to assess the child if these reports were admitted, given that he clearly disagrees with the findings of both practitioners. It is questionable whether such escalation is helpful, given that the reports do not address the disputed issue in the first place. Given the description of how the child resisted assessment in Dr Jared Ng's report, it is also questionable whether such multiplicity of assessments would truly be in the welfare of the child.

24 I further considered that the cost and delay that would be occasioned by a tit-for-tat exchange of expert opinions was not necessary in this case. The question of choice of school is a mixed question which is based on medical necessity but ultimately determined as an issue of financial affordability. There is no reason why the Mother cannot point out the differences between the schooling options in her affidavit in the ancillary proceedings, and address the court on the suitability and affordability of her preferred choice. I did not think the views of multiple experts, which only provide the preliminary steps in this calculus, would justify the cost and delay involved.

25 Finally, I did not think a protracted exchange of expert opinion on the suitability of schools would assist in a lasting therapeutic outcome to the dispute. Parties still have many years where they have to work together to address the special needs of the child. It will be a long road ahead, along which they have to prioritise the best interest of the child, over their own personal interests if necessary. It will call for mutual trust and forbearance on the multitude of issues that will arise in the difficult task of handling a child with such special needs. Starting off post-divorce co-parenting by discrediting or disputing doctors' recommendations would not auger well for the future relationship. For all intents and purposes, the Father has already had sight of the reports, even if they are not adduced before the hearing judge as a result of my order. In calibrating his position in the ancillary proceedings, he would do well to pay heed to the needs of the child as opined by the examining psychiatrists. He should also take cognisance of the difficulty the Mother has had in managing the child, and appreciate that her request to maintain the child in a private school is ultimately borne out of her view of the needs and best interest of the child. This in my view should be the focus of a responsible parent, and should be uppermost in mind even if the medical reports are not formally adduced at the ancillary hearing.

Conclusion

26 For the reasons I have cited above, I dismissed the appeal to adduce both medical reports under Rule 35(4) of the FJR 2014.

27 With regard to costs, Counsel for the Father submitted that costs should follow the outcome, and requested for costs of $1,500 (all-in) for the appeal. Counsel for the Mother asked that no costs be imposed as the Mother was

handling a very difficult and emotional child, and that a further costs order would not be in the best interest of the child.

28 While I note that the Mother's appeal was motivated by the welfare of the child, costs should generally follow the outcome of the appeal, to instil discipline in the appellate process. I therefore fixed costs at $1,200 (all-in) to be paid by the Plaintiff (Mother).

Kenneth Yap
District Judge

Remya Aravamuthan (High Street Chambers LLC) for the plaintiff;
Tan Xuan Qi Dorothy and Lim Fang-Yu Mathea
(Kith & Kin Law Corporation) for the defendant;