

KEY FINDINGS



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Department of Children, Equality, Disability, Integration, and Youth Block 1, Miesian Plaza, 50–58 Lower Baggot Street, Dublin 2 D02 XW14

Tel: +353 (0)1 647 3000

Email: data and analytics @equality.gov. ie

Web: www.gov.ie/dcediy

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STATE OF THE NATION'S CHILDREN



Part 1: Sociodemographics

- In 2023, it is estimated that there were 1,255,738 children living in Ireland. This accounted for 23.2% of the total population (see Table 1).
- In 2021, 291 children died in Ireland. This equated to an overall mortality rate of 2.41 per 10,000 (see Table 4).
- In 2022, 15.5% of children lived in a single parent family unit (see Table 9).
- In 2016, 8.1% of children had a mother with either no formal education or primary education only, and 50.6% of children had a mother whose highest level of education was either a lower secondary or upper-secondary education (see Table 12)
- In 2022, there were 14,142 Traveller children in Ireland. This accounted for 1.2% of the total child population and 42.9% of the total Traveller population (see Table 15).
- In 2022, there were 88,630 foreign national children in Ireland. This accounted for 7.3% of the child population (see Table 17).
- In 2022, there were 131,764 children with a disability in Ireland. This accounted for 10.8% of the child population (see Table 20).
- In 2022, there were 8,165 children providing regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability in Ireland. This accounted for 0.7% of the child population (see Table 22).



Part 2: Children's relationships

- In 2018, 83.3% of children aged 10–17 reported finding it easy to talk to their mother when something is really bothering them. This changed only marginally between 2014 and 2018 (see Table 24).
- In 2018, 67.9% of children aged 10–17 reported finding it easy to talk to their father when something is really bothering them. This decreased between 2014 and 2018 (see Table 27).
- In 2018, 69.6% of children aged 15 reported that their parents spend time just talking with them several times a week (see Table 30).
- In 2018, 51.9% of children aged 15 reported that their parents discuss with them how well they are doing at school several times a week (see Table 32).
- In 2018, 69.1% of children aged 15 reported that their parents eat a main meal with them several times a week (see Table 34).
- In 2018, 89.3% of children aged 10–17 reported having three or more friends of the same gender. This increased between 2014 and 2018 (see Table 36).
- In 2018, 71.7% of children aged 10–17 reported having a pet of their own or a pet in the family. This decreased between 2014 and 2018 (see Table 39).
- In 2018, 31.1% of children aged 10–17 reported having been bullied at school in the past couple of months. This increased between 2014 and 2018 (see Table 42).



Part 3: Children's outcomes

- For the 2022/23 pre-school year there were 108,616 children registered for the latest finalised ECCE programme call under Core Funding. There were 3,970 services contracted to offer ECCE in 2022/23 (see Table 45).
- Over the period 2017 to 2021, the percentage of primary school children who were absent from school for 20 days or more increased from 12.1% to 40.3% (see Table 47).
- Over the period 2017 to 2021, the percentage of post-primary school children who were absent from school for 20 days or more increased from 14.6% to 26.8% (see Table 50).
- The Leaving Certificate retention rate for children entering secondary school in 2016 was 91.7%, i.e. out of the 63,910 enrolled on 30 September 2016 in year one of the Junior Cycle, 58,605 sat the Leaving Certificate or received a calculated grade by 2021 or 2022 (see Figure 9).
- In 2022, 15 year-old children in Ireland achieved a mean score of 516.0 on the reading literacy scale (see Table 55).
- In 2022, 15 year-old children in Ireland achieved a mean score of 491.6 on the mathematics literacy scale (see Table 57).
- In 2022, 15 year-old children in Ireland achieved a mean score of 503.8 on the science literacy scale (see Table 59).
- In 2021, 5.9% of all babies born were in the low birth weight category (weighing less than 2,500 grams) (see Table 61).
- In 2021, 61.7% of infants were breastfed on being discharged from hospital. This includes 46.0% who were breastfed exclusively and a further 15.7% who were fed using a combination of bottle and breastfeeding (see Table 63).
- In 2022, there were 135,033 hospital discharges of children (see Table 65).



- In 2022, there were 11,758 hospital discharges of children with a principal diagnosis of "injury, poisoning, and certain other consequences of external causes" (see Table 67).
- In 2018, 76.9% of first class children were classified as being in the "normal" weight category according to the International Obesity Taskforce Standards. 15.5% were classified as either "overweight" or "obese" (see Table 69).
- In 2022, there were 8,826 children registered as having an intellectual disability (see Table 70).
- In 2022, there were 6,340 children registered as having a physical and/or sensory disability (see Table 72).
- In 2022 Q4, there were 21,473 child welfare and protection referrals to Tusla, the Child and Family Agency (see Table 74).
- In 2018, 32.6% of children aged 10–17 reported students at their school participate in making the school rules. This decreased between 2014 and 2018 (see Table 76).
- In 2018, 30.8% of children aged 15 reported that reading is one of their favourite hobbies (see Table 79).
- In 2018, 2.4% of children aged 10–17 reported smoking cigarettes every week. This decreased between 2014 and 2018 (see Table 81).
- In 2018, 89.4% of children aged 10–17 reported never having smoked cigarettes. This increased between 2014 and 2018 (see Table 84).
- In 2018, 6.9% of children aged 10–17 reported having been drunk at least once in the past 30 days. This decreased between 2014 and 2018 (see Table 87).
- In 2018, 69.4% of children aged 10–17 reported never having had an alcoholic drink. This increased between 2014 and 2018 (see Table 90).



- In 2018, 7.8% of children aged 10–17 reported having taken cannabis at least once in their lifetime. This decreased between 2014 and 2018 (see Table 93).
- In 2021, there were 141 births to mothers aged 15–17, down from 209 in 2018 (see Table 96).
- In 2018, 24.8% of children aged 15-17 reported having ever had sex. This decreased between 2014 and 2018 (see Table 98).
- In 2018, 57.6% of children aged 10–17 reported feeling happy with the way they are. This changed only marginally between 2014 and 2018 (see Table 101).
- In 2018, 88.2% of children aged 10–17 reported being happy with their lives at present. This decreased between 2014 and 2018 (see Table 104).
- In 2021, there were 9 suicides by children aged 10–17, down from 16 in 2014 (see Table 107).
- In 2020, the rate (per 100,000) of children and young people aged 10-24 presenting at a hospital emergency department following self-harm was 375 (see Table 109).
- In 2018, 51.1% of children aged 10–17 reported being physically active for at least 60 minutes per day on more than four days per week. This changed only marginally between 2014 and 2018 (see Table 111).
- In 2018, 78.2% of children aged 10–17 reported eating breakfast on five or more days per week. This increased between 2014 and 2018 (see Table 114).
- In 2018, 6.5% of children aged 10–17 reported drinking soft drinks that contain sugar at least once a day. This decreased between 2014 and 2018 (see Table 117).



Part 4: Formal and informal supports

- Public expenditure on educational institutions between primary and tertiary level decreased from 5.21% of gross domestic product (GDP) in 2013 to 3.13% in 2019 (see Figure 26), although real public expenditure increased from €8,286,000,000 in 2013 to €9,192,000,000 in 2018 (see Table 121).
- In 2022, 15.2% of children were considered to be at risk of poverty, down from 15.9% in 2018 (see Table 122).
- In 2022, 7.5% of children experienced consistent poverty, down from 7.7% in 2018 (see Table 123).
- In 2022, there were 21,086 households with children identified as being in need of social housing (see Table 124).
- In 2018, 90.2% of children aged 10–17 reported feeling safe in the area where they live. This increased between 2014 and 2018 (see Table 126).
- In 2018, 67.2% of children aged 10–17 reported that there are good places in their area to spend their free time. This increased between 2014 and 2018 (see Table 129).
- In 2022, 8,404 children aged 10–17 were referred to the Garda Diversion Programme. Some children were referred more than once and so the total number of referrals was 15,719 (see Table 132).
- In 2021, 89.4% of pregnant women attended antenatal care in the first trimester of pregnancy (see Table 135).
- In 2022, 98.4% of newborns were visited by a public health nurse within 72 hours of discharge from hospital for the first time (see Table 136).



- In 2022, 85.4% of newborn children had their developmental health screening before reaching 12 months of age (see Table 137).
- In 2022, for children at 12 months of age, uptake rates among Local Health Offices (LHOs) for D₃, P₃, T₃, and Polio₃ ranged from 77% to 93% (see Table 139).
- In 2022, for children at 24 months of age, uptake rates among Local Health Offices (LHOs) for D₃, P₃, T₃, Polio₃, HepB₃, and Hib₃ ranged from 88% to 97% (see Table 140).
- As of December 2022, there were 8,959 children on an inpatient/day case (IPDC) waiting list and 83,239 children on an outpatient (OP) waiting list (see Table 142 and Table 143).
- In 2022, there were 5,626 children in the care of Tusla, the Child and Family Agency (see Table 144).
- In 2022, there were 366 admissions of children to psychiatric hospitals/units and child and adolescent units (see Table 146).

STATE OF THE NATION'S CHILDREN





SOCIODEMOGRAPHICS



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Department of Children, Equality, Disability, Integration, and Youth Block 1, Miesian Plaza, 50–58 Lower Baggot Street, Dublin 2 D02 XW14

Tel: +353 (0)1 647 3000

Email: dataandanalytics@equality.gov.ie

Web: www.gov.ie/dcediy

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Child population

Measure: The number of children

- In 2023, it is estimated that there were 1,225,738 children living in Ireland. This accounted for 23.2% of the total population.
- Of the total child population in 2023, it is estimated that 625,865 were male and 599,873 were female (see *Table 1*).

Table 1. Number of childre	n, by age and gender	(2023)	
	Male	Female	Both sexes
Population under 18	625,865	599,873	1,225,738
All ages	2,606,170	2,675,442	5,281,612
Age			
Under 1 year	27,418	28,298	55,716
1 year	29,995	28,642	58,637
2 years	29,499	28,099	57,598
3 years	30,767	29,478	60,245
4 years	31,496	30,077	61,573
5 years	32,299	30,448	62,747
6 years	33,317	32,041	65,358
7 years	34,751	33,311	68,062
8 years	36,126	34,269	70,395
9 years	36,949	35,135	72,084
10 years	37,651	35,889	73,540
11 years	38,787	36,722	75,509
12 years	38,961	37,463	76,424
13 years	39,560	37,880	77,440
14 years	38,968	37,343	76,311
15 years	37,953	36,743	75,696
16 years	36,196	34,611	70,807
17 years	35,172	33,424	68,596

 ${\bf Source: Population \ and \ Migration \ Estimates \ (CSO)}$

- The percentage of the population under 18 decreased from 34.7% in 1986 to an estimated 23.2% in 2023 (see *Table 2*).
- Between 2016 and 2023, it is estimated that the number of children increased by 2.96%, from 1,190,502 to 1,225,738. In the 36 year period between 1986 and 2023, it is estimated that the number of children decreased by 0.4%, from 1,230,150 to 1,225,738.



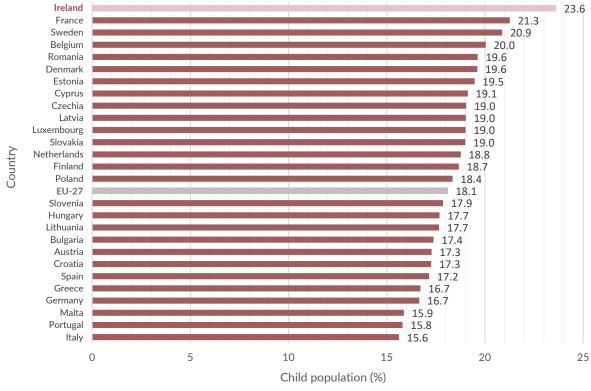
Table 2. Number and percentage of population under 18, by gender (1986-2023)

	Male	% of all males	Female	% of all females	Total	% of all ages
1986	630,985	35.7	599,165	33.8	1,230,150	34.7
1991	587,655	33.5	557,738	31.5	1,145,393	32.5
1996	550,389	30.6	521,583	28.6	1,071,972	29.6
2002	519,483	26.7	493,548	25	1,013,031	25.9
2006	531,506	25.1	505,246	23.9	1,036,752	24.5
2011	587,782	25.9	560,905	24.2	1,148,687	25
2016	608,785	25.9	581,717	24.2	1,190,502	25
2017	611,334	25.9	585,375	24.1	1,196,709	24.9
2018	616,944	25.5	589,511	23.9	1,206,455	24.7
2019	619,796	25.2	591,019	23.6	1,210,815	24.4
2020	620,962	24.9	590,874	23.2	1,211,836	24.1
2021	617,646	24.6	589,343	23	1,206,989	23.8
2022	623,567	24.5	595,000	22.8	1,218,567	23.7
2023	625,865	24	599,873	22.4	1,225,738	23.2

Source: Census of the Population, Population and Migration Estimates

• In 2022, Ireland had the highest estimated proportion of children in the European Union (23.6%). The EU-27 average was 18.1%.

Figure 1. Child population as a percentage of total population, by EU-27 country (2022)



Source: Eurostat

Note: The population reported for Ireland in Eurostat refers to the population on 1st January of that year, while the population from Census and CSO population estimates refer to the population in the month of April. As such the figures reported are slightly different between sources.



Table 3. Number of children, by age, sex and EU-27 country (2022)

		Und	er 5 years	5-	-9 years	10-	10-14 years		15-17 years	
	Population	Male	Female	Male	Female	Male	Female	Male	Female	% under 18
EU-27	446,735,291	10,671,549	10,146,944	11,503,817	10,906,939	12,166,206	11,514,138	7,200,452	6,792,193	18.1
Country										
Austria	8,978,929	221,746	210,039	224,192	210,984	218,440	206,188	133,657	126,444	17.3
Belgium	11,617,623	305,029	292,439	332,400	317,406	350,355	334,022	203,979	192,347	20.0
Bulgaria	6,838,937	158,366	150,008	172,137	162,831	179,778	169,945	100,671	95,067	17.4
Croatia	3,862,305	90,451	85,314	92,999	87,826	100,156	95,465	59,077	55,327	17.3
Cyprus	904,705	24,794	23,517	25,414	23,460	24,699	23,400	14,129	13,615	19.1
Czechia	10,516,707	285,445	272,653	283,568	269,538	297,849	284,355	159,302	150,271	19.0
Denmark	5,873,420	159,857	151,555	154,975	146,639	170,680	162,125	105,196	100,702	19.6
Estonia	1,331,796	35,654	33,880	36,658	34,694	39,393	37,520	21,449	20,090	19.5
Finland	5,548,241	124,402	118,888	150,340	143,812	160,703	153,649	93,909	89,814	18.7
France	67,871,925	1,828,740	1,747,098	2,058,199	1,969,514	2,188,833	2,084,753	1,313,344	1,242,936	21.3
Germany	83,237,124	2,040,392	1,934,941	1,996,626	1,891,515	1,925,158	1,818,303	1,163,408	1,092,916	16.7
Greece	10,459,782	219,430	206,758	238,554	225,045	277,490	261,356	165,602	154,132	16.7
Hungary	9,689,010	240,989	227,635	239,154	226,045	250,542	232,286	152,621	144,229	17.7
Ireland	5,060,004	153,908	147,314	170,068	161,727	185,793	177,706	101,929	96,683	23.6
Italy	59,030,133	1,101,059	1,041,775	1,297,135	1,226,182	1,453,792	1,369,852	892,661	836,458	15.6
Latvia	1,875,757	48,494	45,296	55,030	51,289	51,205	48,678	29,149	27,723	19.0
Lithuania	2,805,998	65,795	62,253	74,263	70,426	74,155	70,494	39,810	38,422	17.7
Luxembourg	645,397	17,162	16,563	17,770	17,001	17,529	16,648	10,405	9,656	19.0
Malta	520,971	11,969	11,229	12,621	11,505	11,638	11,022	6,574	6,119	15.9
Netherlands	17,590,672	442,832	421,821	458,669	435,951	488,187	465,001	301,628	286,755	18.8
Poland	37,654,247	950,649	900,553	978,507	926,166	1,055,413	1,002,156	562,564	534,267	18.4
Portugal	10,352,042	208,615	198,745	220,863	209,828	250,014	236,818	159,395	151,860	15.8
Romania	19,042,455	499,126	472,896	526,020	497,505	562,459	531,017	333,083	315,854	19.6
Slovakia	5,434,712	150,603	143,794	150,346	142,731	145,832	139,490	82,015	77,663	19.0
Slovenia	2,107,180	50,713	47,320	55,389	52,230	57,719	54,567	30,036	28,416	17.9
Spain	47,432,893	949,275	896,606	1,160,940	1,092,467	1,305,624	1,223,025	779,899	730,250	17.2
Sweden	10,452,326	286,054	286,054	320,980	302,622	322,770	304,297	184,960	174,177	20.9

Source: Eurostat



Child mortality

Measure: The number of deaths of children

- In 2021, 291 children died in Ireland. This equated to an overall mortality rate of 2.41 per 10,000 children.
- 68.4% of all child deaths occurred in the period of infancy (age less than one year) (see *Table 4*).

Table 4. Number and rate (per 10,000) of deaths of children, by age (2017-2021)

	2017		20	2018		2019		2020		2021	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	
Total	296	2.47	279	2.31	284	2.35	278	2.29	291	2.41	
Age											
Under 1 year	188	29.62	174	28.19	167	27.65	178	30.60	199	35.62	
1-4 years	31	1.19	24	0.93	27	1.06	25	1.00	15	0.61	
5-9 years	27	0.75	13	0.36	31	0.87	22	0.63	15	0.44	
10-14 years	18	0.55	35	1.05	23	0.67	23	0.65	27	0.74	
15-17 years	32	1.72	33	1.72	36	1.84	30	1.51	35	1.76	

Source: Vital Statistics (CSO)

• The mortality rate was higher for boys (2.59 per 10,000) than for girls (2.22). The mortality rates have consistently been higher for boys than girls over the period 2017–2021 (see *Table 5*).

Table 5. Number and rate (per 10,000) of deaths of children, by gender (2017–2021)

	2017		2018		2019		2020		2021	
	No.	Rate								
Total	296	2.47	279	2.31	284	2.35	278	2.29	291	2.41
Sex										
Male	152	2.49	159	2.58	170	2.74	154	2.48	160	2.59
Female	144	2.46	120	2.04	114	1.93	124	2.1	131	2.22

Source: Vital Statistics (CSO)

• In 2021, the largest single cause of child deaths was conditions in the perinatal period, that is, conditions which originate in the period immediately before, during and after birth, the vast majority of which relate to children aged under 1. The next largest cause was congenital malformations, that is, disorders which are present from birth.

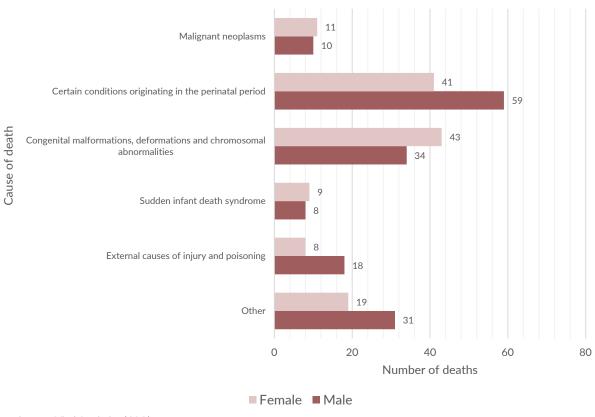


Table 6. Number of deaths of children, by cause of death and age (2021) < 1 1-4 5-9 10 - 1415-17 < 18 Total Main cause of death Malignant neoplasms Certain conditions in the perinatal period Congenital malformations Sudden infant death syndrome External causes of injury and poisoning Other causes of death

Source: Vital Statistics (CSO)

- In 2021, the infant mortality rate across the EU-27 ranged from 1.8 per 1,000 in Sweden, Slovenia and Finland to 5.6 per 1,000 in Bulgaria (see *Table 7*). The infant mortality rate in Ireland was 3.2 per 1,000. This was equal to the EU-27 average.
- In 2021, the child mortality rate in the EU-27 was higher for boys than for girls in all age groups (see *Table 8*). Child mortality rates continue to be substantially higher for children under 5 years than for any other age group.

Figure 2. Number of deaths of children, by gender and cause of death (2021)



Source: Vital Statistics (CSO)



Table 7. Infant mortality rate (per 1,000 live births), by EU-27 country (1991-2021) 2011 2021 1991 2001 EU-27 3.2 10.2 5.8 3.8 Country 7.5 4.8 3.6 2.7 Austria 8.3 4.5 2.9 Belgium 3.4 Bulgaria 16.9 14.4 8.5 5.6 Croatia 11.1 7.7 4.7 3.8 2.7 12.2 4.9 Cyprus 3.1 2.2 Czechia 10.4 4 2.7 Denmark 7.3 4.9 3.5 3.1 Estonia 13.3 8.8 2.5 2.2 5.8 3.2 1.8 Finland 2.4 France 4.6 3.5 3.7 6.9 4.3 3.6 3 Germany 9 5.1 3.4 3.5 Greece 4.9 3.3 15.6 8.1 Hungary **Ireland** 7.6 5.7 3.5 3.2 8 4.4 2.9 2.3 Italy Latvia 15.7 11 6.6 2.7 Lithuania 14.4 8 4.8 3.1 Luxembourg 9.2 5.9 4.3 3.1 3.9 Malta 9.6 3.8 6.5 Netherlands 3.3 6.5 5.4 3.6 Poland 18.2 7.7 4.7 3.9 Portugal 10.8 5 3.1 2.4 5.2 Romania 22.7 18.4 9.4 4.9 Slovakia 13.2 6.2 4.9 Slovenia 8.2 4.2 2.9 1.8 7.2 2.5 Spain 4 3.1

6.2

3.7

2.1

Source: Eurostat

Sweden

1.8



Table 8. Rate (per 10,000) of deaths of children, by age, gender, and EU-27 country (2021)

		Under 5 years		5-9	5-9 years		4 years	15-17	15-17 years	
	Total	Male	Female	Male	Female	Male	Female	Male	Female	
EU-27	2.7	8.0	6.9	0.8	0.7	1.0	0.8	2.6	1.3	
Country										
Austria	2.6	6.7	6.3	0.5	0.7	0.8	0.5	3.8	1.6	
Belgium	2.6	8.0	6.3	0.9	0.6	0.8	0.7	2.2	1.1	
Bulgaria	5.0	12.8	13.0	1.7	1.9	2.1	1.5	4.5	3.0	
Croatia	3.3	10.2	9.0	0.9	1.0	0.7	0.9	3.2	1.6	
Cyprus	2.6	7.7	7.2	0.8	0.4	0.8	1.3	0.0	0.0	
Czechia	2.3	6.2	4.4	0.8	1.0	1.3	0.7	2.4	1.5	
Denmark	2.5	7.4	7.5	1.0	0.4	0.7	0.6	1.2	0.7	
Estonia	2.6	7.6	3.5	1.1	0.3	2.0	0.8	2.9	3.1	
Finland	2.0	4.1	4.6	0.9	0.8	1.1	0.8	3.6	1.8	
France	3.0	9.7	8.1	0.9	0.6	1.0	0.7	2.4	1.1	
Germany	2.8	7.5	6.5	0.8	0.6	0.9	0.8	2.3	1.3	
Greece	2.6	8.9	7.4	1.0	0.6	0.9	0.6	2.3	1.1	
Hungary	3.0	8.8	6.6	1.2	0.6	0.7	1.0	3.2	1.4	
Ireland	2.3	6.8	6.9	0.6	0.2	0.6	0.5	2.0	0.9	
Italy	1.9	5.5	4.8	0.6	0.6	0.8	0.8	2.1	1.2	
Latvia	2.4	8.5	4.6	0.7	0.6	0.6	1.0	2.8	0.0	
Lithuania	3.0	8.2	5.8	1.5	1.1	1.9	1.1	3.6	1.1	
Luxembourg	2.6	5.8	8.5	1.1	0.0	0.6	0.6	1.0	3.2	
Malta	3.0	5.0	10.7	0.8	0.9	2.6	0.9	0.0	1.6	
Netherlands	2.7	8.4	7.1	0.5	0.8	1.1	0.8	1.7	1.1	
Poland	3.3	9.3	7.6	0.9	0.7	1.1	1.1	3.7	2.1	
Portugal	2.3	6.3	5.7	0.9	1.0	1.5	0.5	2.7	8.0	
Romania	4.9	13.2	12.3	1.5	1.2	2.2	1.5	4.7	2.2	
Slovakia	4.3	11.8	10.1	1.6	8.0	1.3	1.2	3.3	2.2	
Slovenia	1.8	5.1	3.8	0.2	1.0	0.2	1.3	2.4	1.5	
Spain	2.0	6.0	5.2	0.7	0.8	0.9	0.8	2.0	0.9	
Sweden	1.9	5.1	4.0	0.7	0.5	0.7	0.8	2.3	1.3	

Source: Eurostat



Family structure

Measure: The number of children living in a single parent family unit in Ireland

- In 2022, 15.5% of children lived in a single parent family unit.
- 21.8% of Traveller children, 12.3% of foreign national children, and 22.7% of children with a disability lived in a single parent family unit (see *Table 9*).

Table 9. Number and percentage of children living in a single parent family unit, by population group (2022)

	No.	% of all children
All children	189,437	15.5
Population group		
Traveller children	3,083	21.8
Foreign national children	10,922	12.3
Children with a disability and/or chronic illness	29,968	22.7

Source: Census of the Population (CSO)

- 19.2% of children aged 15–17 lived in a single parent family unit (see *Table 10*).
- The percentage of boys and girls living in a single parent family unit was broadly similar.

Table 10. Number and percentage of children living in a single parent family unit, by age and gender (2022)

	Male		Fema	le	Total	
	No.	% of all boys	No.	% of all girls	No.	% of all children
All children	96,911	15.5	92,526	15.6	189,437	15.5
Age						
Under 5 years	19,390	12.8	18,566	12.9	37,956	12.8
5-9 years	24,874	14.2	23,743	14.2	48,617	14.2
10-14 years	32,352	16.9	30,901	16.9	63,253	16.9
15-17 years	20,295	19.2	19,316	19.2	39,611	19.2

Source: Census of the Population (CSO)

• The percentage of children living in a single parent family unit ranged from 11.4% in Galway County to 21.2% in Dublin City (see *Table 11*).



Table 11. Number and percentage of children living in a single parent family unit, by administrative county (2022)

	No.	% of all children
State	189,437	15.5
Administrative county		
Carlow	2,642	17.7
Cavan	2,765	12.9
Clare	4,202	13.7
Cork City	7,695	17.3
Cork County	11,324	12.3
Donegal	6,615	16.0
Dublin City	22,287	21.2
Dún Laoghaire-Rathdown	6,054	12.0
Fingal	13,622	15.5
Galway City	2,695	17.2
Galway County	5,606	11.4
Kerry	5,002	14.3
Kildare	8,802	13.7
Kilkenny	3,429	13.4
Laois	3,804	15.5
Leitrim	1,165	13.4
Limerick	7,614	16.0
Longford	1,954	16.6
Louth	6,854	19.4
Mayo	4,429	13.9
Meath	7,929	13.2
Monaghan	2,389	13.9
Offaly	3,052	14.7
Roscommon	2,164	12.7
Sligo	2,541	15.7
South Dublin	14,349	18.8
Tipperary	6,671	16.5
Waterford	5,600	18.8
Westmeath	3,467	14.6
Wexford	6,954	17.6
Wicklow	5,761	14.8



Maternal education level

Measure: The percentage of children whose mothers have attained primary, lower secondary, upper secondary, or third-level education

- In 2016, 8.1% of children had a mother with either no formal education or primary education only, and 50.6% of children had a mother whose highest level of education was either a lower secondary or upper-secondary education.
- 36.2% of Traveller children had a mother who either had no formal education or primary education only.
- 39.3% of foreign national children had a mother who had a third-level degree or higher. The national average was 38.3%.

Table 12. Percentage of children, by population group and educational attainment of mother (2016)

	Traveller children	Foreign national children	Children with a disability	All children
Highest level of education attained by mother				
Primary or no formal education	36.2	8.2	9.4	8.1
Lower secondary	21.6	11.4	15.8	13.3
Upper secondary	23.6	37.1	38.7	37.3
Third-level degree or higher	12.9	39.3	33.3	38.3
Other/not stated	5.8	4.1	2.8	2.9

Source: Census of the Population (CSO)

• The percentage of children whose mother had a third level degree ranged from 32.7% for children aged 15–17 to 42.8% for children aged 4 and under.

Table 13. Percentage of children, by age and educational attainment of mother (2016)

	0-4	5-9	10-14	15-17	All children
Highest level of education attained by mother					
Primary or no formal education	7.4	8.0	8.5	9.0	8.1
Lower secondary	11.4	12.8	14.5	16.0	13.3
Upper secondary	35.5	36.9	38.7	39.3	37.3
Third-level degree or higher	42.8	39.3	35.4	32.7	38.3
Other/not stated	2.9	3.0	3.0	3.0	2.9

Source: Census of the Population (CSO)

• The percentage of children whose mother had either no formal education or a primary education only ranged from 4.8% in Dún Laoghaire-Rathdown to 11.6% in Donegal and Dublin City.

^{* 2022} update not available at time of publication

^{* 2022} update not available at time of publication



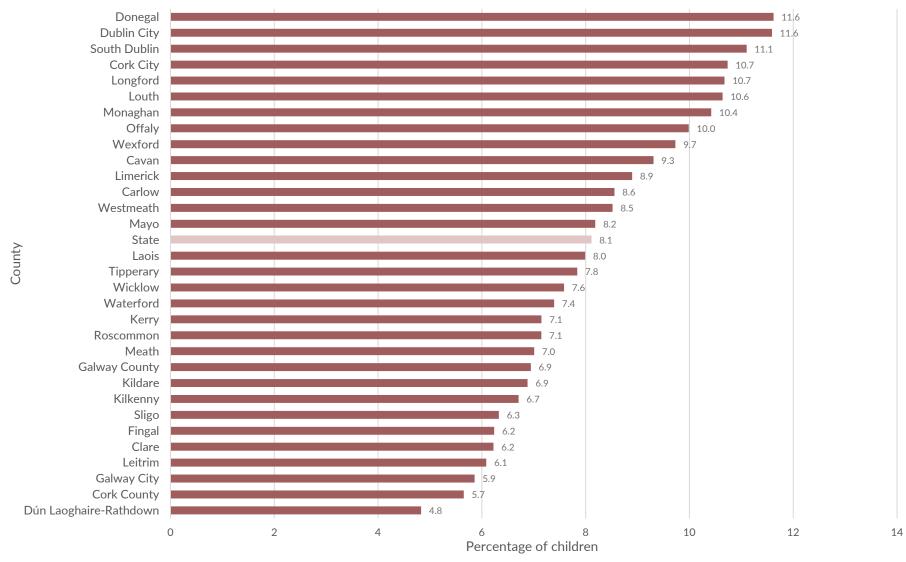
Table 14. Number of children, by county and educational attainment of mother (2016)

	Primary or no formal	Lower secondary	Upper secondary	Third-level degree or	Other/not stated	Total
	education	Lower Secondary	оррег зесопиагу	higher	Other/flot stated	
State	79,607	130,900	366,505	375,575	28,922	981,509
Administrative county						
Carlow	1,048	1,644	4,967	4,114	478	12,251
Cavan	1,661	2,489	7,138	5,971	588	17,847
Clare	1,595	3,113	10,042	10,194	683	25,627
Cork City	1,797	3,021	5,726	5,493	703	16,740
Cork County	5,448	11,552	37,526	39,423	2,451	96,400
Donegal	4,099	5,447	12,189	12,565	975	35,275
Dublin City	8,755	11,097	22,733	30,366	2,590	75,541
Dún Laoghaire-Rathdown	1,940	3,315	11,041	23,126	752	40,174
Fingal	4,119	7,583	24,917	27,158	2,258	66,035
Galway City	686	1,065	3,851	5,647	460	11,709
Galway County	2,877	4,435	15,333	17,883	910	41,438
Kerry	2,062	3,539	11,042	11,184	1,023	28,850
Kildare	3,607	6,593	19,736	20,958	1,530	52,424
Kilkenny	1,460	3,032	8,422	8,361	492	21,767
Laois	1,611	2,715	8,478	6,647	711	20,162
Leitrim	433	746	2,702	3,063	173	7,117
Limerick	3,424	5,716	14,499	13,707	1,143	38,489
Longford	992	1,240	3,666	2,970	424	9,292
Louth	2,992	4,666	10,603	9,094	771	28,126
Mayo	2,230	3,269	10,951	10,190	607	27,247
Meath	3,397	6,776	19,484	17,395	1,423	48,475
Monaghan	1,464	2,311	5,353	4,526	396	14,050
Offaly	1,767	2,888	6,989	5,416	634	17,694
Roscommon	997	1,503	5,560	5,535	358	13,953
Sligo	844	1,385	5,003	5,711	396	13,339
South Dublin	6,596	9,302	22,320	19,155	2,039	59,412
Tipperary	2,664	5,003	13,725	11,580	1,018	33,990
Waterford	1,766	3,419	9,255	8,761	690	23,891
Westmeath	1,648	2,606	7,613	6,761	720	19,348
Wexford	3,221	5,374	13,793	10,040	681	33,109
Wicklow	2,407	4,056	11,848	12,581	845	31,737

^{* 2022} update not available at time of publication



Figure 3. Percentage of children whose mothers have no formal education or primary education only, by county (2016)



^{* 2022} update not available at time of publication



Traveller children

Measure: The number of Traveller children

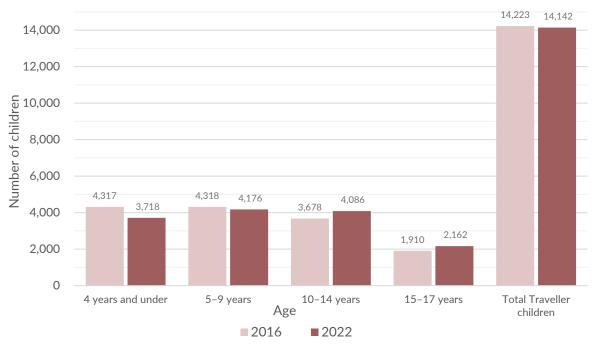
- In 2022, there were 14,142 Traveller children in Ireland. This accounted for 1.2% of the total child population and 42.9% of the total Traveller population.
- There were 7,225 Traveller boys and 6,917 Traveller girls in Ireland in 2022 (see *Table* 15).

Table 15. Number of Traveller children, by age and gender (2022)				
	Male	Female	Total	
Total Traveller population	16,172	16,777	32,949	
Total Traveller children	7,225	6,917	14,142	
Age				
Under 5 years	1,897	1,821	3,718	
5-9 years	2,141	2,035	4,176	
10-14 years	2,087	1,999	4,086	
15-17 years	1,100	1,062	2,162	

Source: Census of the Population (CSO)

- The number of Traveller children changed marginally, from 14,223 in 2016, to 14,142 in 2022 (see *Figure 4*).
- 26.3% of Traveller children were less than five years old (see *Table 15*).

Figure 4. Number of Traveller children, by age (2016–2022)





• Overall 11.6 children per 1,000 were Travellers. Rates ranged from 3.3 per 1,000 in Dún Laoghaire-Rathdown to 50.6 per 1,000 in Galway City (see *Table 16*).

Table 16. Number and rate (per 1,000) of Traveller children, by administrative county (2022)

	Traveller children	All children	Rate
State	14,142	1,218,567	11.6
Administrative county			
Carlow	226	14,905	15.2
Cavan	209	21,370	9.8
Clare	504	30,580	16.5
Cork City and County	1040	136,786	7.6
Donegal	282	41,372	6.8
Dublin City	811	105,093	7.7
Dún Laoghaire-Rathdown	167	50,583	3.3
Fingal	729	88,093	8.3
Galway City	791	15,625	50.6
Galway County	1087	49,094	22.1
Kerry	453	34,994	12.9
Kildare	454	64,261	7.1
Kilkenny	311	25,603	12.1
Laois	371	24,616	15.1
Leitrim	78	8,679	9.0
Limerick	750	47,560	15.8
Longford	405	11,782	34.4
Louth	347	35,346	9.8
Mayo	565	31,911	17.7
Meath	389	60,202	6.5
Monaghan	107	17,178	6.2
Offaly	522	20,747	25.2
Roscommon	291	17,080	17.0
Sligo	192	16,176	11.9
South Dublin	812	76,456	10.6
Tipperary	668	40,482	16.5
Waterford	285	29,825	9.6
Westmeath	419	23,817	17.6
Wexford	522	39,414	13.2
Wicklow	355	38,937	9.1



Foreign national children

Measure: The number of foreign national children

- In 2022, there were 88,630 foreign national children in Ireland. This accounted for 7.3% of the child population.
- There were 44,942 boys and 43,688 girls (see *Table 17*).

Table 17. Number of foreign national children, by age and gender (2022)			
	Male	Female	Both sexes
Total	44,942	43,688	88,630
Age			
Under 5 years	8,945	8,854	17,799
5-9 years	13,361	12,912	26,273
10-14 years	14,438	13,884	28,322
15-17 years	8,198	8,038	16,236

Source: Census of the Population (CSO)

• The number of foreign national children increased by 11.4%, from 79,536 in 2016, to 88,630 in 2022 (see *Figure 5*).

100,000 88.630 90,000 79,536 80,000 70,000 Number of children 60,000 50,000 40,000 28,322 30,000 26,273 25,078 23,049 17,514 17,799 20,000 16,236 13,895 10,000 5-9 years 4 and under 10-14 years 15-17 years Total Age **2016** 2022

Figure 5. Number of foreign national children, by age (2016–2022)



Table 18. Number and rate (per 1,000) of foreign national children, by administrative county (2022)

	Foreign national children	All children	Rate
Total	88,630	1,218,567	72.7
Administrative county			
Carlow	1,050	14,905	70.4
Cavan	1,680	21,370	78.6
Clare	2,016	30,580	65.9
Cork City	3,277	44,484	73.7
Cork County	5,259	92,302	57.0
Donegal	2,054	41,372	49.6
Dublin City	10,170	105,093	96.8
Dún Laoghaire-Rathdown	5,298	50,583	104.7
Fingal	9,223	88,093	104.7
Galway City	1,659	15,625	106.2
Galway County	2,345	49,094	47.8
Kerry	2,038	34,994	58.2
Kildare	4,355	64,261	67.8
Kilkenny	1,214	25,603	47.4
Laois	1,659	24,616	67.4
Leitrim	568	8,679	65.4
Limerick	3,137	47,560	66.0
Longford	1,127	11,782	95.7
Louth	2,785	35,346	78.8
Mayo	1,975	31,911	61.9
Meath	4,297	60,202	71.4
Monaghan	1,200	17,178	69.9
Offaly	1,181	20,747	56.9
Roscommon	1,396	17,080	81.7
Sligo	792	16,176	49.0
South Dublin	6,055	76,456	79.2
Tipperary	2,277	40,482	56.2
Waterford	2,116	29,825	70.9
Westmeath	1,997	23,817	83.8
Wexford	2,294	39,414	58.2
Wicklow	2,136	38,937	54.9



• 14% of foreign national children reported their nationality as Polish (see *Table 19*). Indian was the next most common nationality (9% of the total). Other nationalities/nationality groups with 5% or more of the total number of foreign children were: Other Asian, African, Romanian, Other EU-27, British or Northern Irish, Ukrainian and Lithuanian.

Table 19. Number and percentage of foreign national children, by nationality (2022)

	No.	%
Total	88,630	100.0
Nationality		
Polish	12,463	14%
Indian	8,229	9%
Other Asian	7,431	8%
African	7,233	8%
Romanian	7,199	8%
Other EU-27	6,160	7%
UK	5,809	7%
Ukrainian	5,437	6%
Lithuanian	4,018	5%
Latvian	2,926	3%
Other nationalities	2,712	3%
Croatian	2,450	3%
Chinese	2,288	3%
Brazilian	2,180	2%
American (US)	2,070	2%
Spanish	2,006	2%
Italian	1,894	2%
Other European	1,892	2%
French	1,313	1%
German	1,211	1%
Other American	988	1%
Australian	721	1%



Children with a disability

Measure: The number of children with a disability

- In 2022, there were 131,764 children with a disability in Ireland. This accounted for 10.8% of the child population.
- 57.4% of children with a disability were boys (see *Table 20*).

Table 20. Number of children with a disability, by age and gender (2022)			
	Male	Female	Both sexes
Total	75,626	56,138	131,764
Age			
Under 5 years	7,679	4,992	12,671
5-9 years	21,917	13,158	35,075
10-14 years	29,459	21,594	51,053
15-17 years	16,571	16,394	32,965

Source: Census of the Population (CSO)

• Geographically, rates of children with a disability ranged from 85.2 per 1,000 in Monaghan to 123.5 per 1,000 in Offaly (see *Table 21*).



Table 21. Number and rate (per 1,000) of children with a disability, by administrative county (2022)

	Children with a disability	All children	Rate
Total	131,764	1,218,567	108.1
Administrative county			
Carlow	1,728	14,905	115.9
Cavan	2,064	21,370	96.6
Clare	3,098	30,580	101.3
Cork City	5,338	44,484	120.0
Cork County	10,311	92,302	111.7
Donegal	4,330	41,372	104.7
Dublin City	10,717	105,093	102.0
Dún Laoghaire-Rathdown	4,691	50,583	92.7
Fingal	9,237	88,093	104.9
Galway City	1672	15,625	107.0
Galway County	4,717	49,094	96.1
Kerry	3,649	34,994	104.3
Kildare	7,182	64,261	111.8
Kilkenny	2,485	25,603	97.1
Laois	3,015	24,616	122.5
Leitrim	832	8,679	95.9
Limerick	5,486	47,560	115.3
Longford	1246	11,782	105.8
Louth	3,916	35,346	110.8
Mayo	3,004	31,911	94.1
Meath	6,390	60,202	106.1
Monaghan	1464	17,178	85.2
Offaly	2,563	20,747	123.5
Roscommon	1,899	17,080	111.2
Sligo	1778	16,176	109.9
South Dublin	8,925	76,456	116.7
Tipperary	4,681	40,482	115.6
Waterford	3,153	29,825	105.7
Westmeath	2,642	23,817	110.9
Wexford	4,749	39,414	120.5
Wicklow	4,802	38,937	123.3



Children as carers

Measure: The number of children who provide regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability

- In 2022, there were 8,165 children providing regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability in Ireland. This accounted for 0.7% of the child population.
- 20.6% of child carers were aged nine or under (see Table 22).

Table 22. Number of children who provide regular unpaid personal help for a friend or family member, by age and gender (2022)

	Male	Female	Both sexes
Total	4,106	4,059	8,165
Age			
Under 5 years	263	255	518
5-9 years	566	599	1165
10-14 years	1,526	1,550	3,076
15-17 years	1,751	1,655	3,406

Source: Census of the Population (CSO)

• Geographically, rates of child carers ranged from 4.9 per 1,000 in Dún Laoghaire-Rathdown to 10.2 per 1,000 in Offaly (see *Table 23*).



Table 23. Number and rate (per 1,000) of children who provide regular unpaid personal help for a friend or family, by administrative county (2022)

	Children as carers	All children	Rate
Total	8,165	1,218,567	6.7
Administrative county			
Carlow	96	14,905	6.4
Cavan	157	21,370	7.3
Clare	248	30,580	8.1
Cork City	272	44,484	6.1
Cork County	699	92,302	7.6
Donegal	278	41,372	6.7
Dublin City	526	105,093	5.0
Dún Laoghaire-Rathdown	250	50,583	4.9
Fingal	472	88,093	5.4
Galway City	94	15,625	6.0
Galway County	465	49,094	9.5
Kerry	273	34,994	7.8
Kildare	384	64,261	6.0
Kilkenny	199	25,603	7.8
Laois	193	24,616	7.8
Leitrim	88	8,679	10.1
Limerick	339	47,560	7.1
Longford	103	11,782	8.7
Louth	182	35,346	5.1
Mayo	306	31,911	9.6
Meath	372	60,202	6.2
Monaghan	138	17,178	8.0
Offaly	212	20,747	10.2
Roscommon	143	17,080	8.4
Sligo	124	16,176	7.7
South Dublin	395	76,456	5.2
Tipperary	294	40,482	7.3
Waterford	220	29,825	7.4
Westmeath	133	23,817	5.6
Wexford	286	39,414	7.3
Wicklow	224	38,937	5.8

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Department of Children, Equality, Disability, Integration, and Youth Block 1, Miesian Plaza, 50–58 Lower Baggot Street, Dublin 2 D02 XW14

Tel: +353 (0)1 647 3000

Email: dataandanalytics@equality.gov.ie

Web: www.gov.ie/dcediy

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STATE OF THE NATION'S CHILDREN



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Relationship with mothers

Measure: The percentage of children aged 10–17 who report finding it easy to talk to their mother when something is really bothering them

- In 2018, 83.3% of children aged 10–17 reported finding it easy to talk to their mother when something is really bothering them. This changed only marginally between 2014 and 2018.
- Among individual population groups, when compared to all other children, Traveller children, immigrant children, and children with a disability and/or chronic illness were less likely to report finding it easy to talk to their mother when something is really bothering them (see *Table 24*).
- Immigrant children were the population group with the lowest percentage who reported finding it easy to talk to their mother when something is really bothering them (see *Table 24*).

Table 24. Percentage of children aged 10–17 who reported finding it easy to talk to their mother when something is really bothering them, by population group (2014–2018)

	2014	2018
All children	82.7	83.3
Traveller status		
Traveller children	78.8	84.6
All children except Traveller children	82.7	86.3
Immigrant status		
Immigrant children	80.3	78.3
All children except immigrant children	83.1	84.0
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	81.4	80.6
All children except those with a disability and/or chronic illness	83.0	84.1

- A lower percentage of females than males reported finding it easy to talk to their mother when something is really bothering them (see *Table 25*).
- On average, the percentage of children who reported finding it easy to talk to their mother when something is really bothering them decreased with age (see *Table 25*).
- The percentage of children who reported finding it easy to talk to their mother when something is really bothering them was lowest among the low social class group (see *Table 25*).



Table 25. Percentage of children aged 10–17 who reported finding it easy to talk to their mother when something is really bothering them, by age, gender, and social class (2014–2018)

		2014			2018	
	Male	Female	Total	Male	Female	Total
All children	83.6	81.8	82.7	84.3	82.4	83.3
Age						
10 years	86.9	85.7	86.3	86.4	85.9	86.1
11 years	88.4	89.8	89.1	88.3	88.8	88.5
12 years	87.8	87.5	87.7	86.9	87.9	87.4
13 years	86.0	83.4	84.7	86.9	81.2	83.8
14 years	83.1	77.8	80.4	80.5	78.9	79.7
15 years	82.3	77.2	79.7	80.6	76.1	78.1
16 years	76.2	75.8	76.0	76.3	75.9	76.1
17 years	75.7	77.6	76.6	79.7	79.5	79.6
Social class						
High	85.1	82.7	83.9	85.1	84.1	84.5
Middle	83.6	81.5	82.5	84.4	81.8	83.1
Low	77.7	82.3	80.0	84.1	80.9	82.4

• The percentage of children who reported finding it easy to talk to their mother when something is really bothering them ranged from 82.1% in Mid-West to 84.5% in Mid-East (see *Table 26*).

Table 26. Percentage of children aged 10–17 who reported finding it easy to talk to their mother when something is really bothering them, by NUTS region (2014–2018)

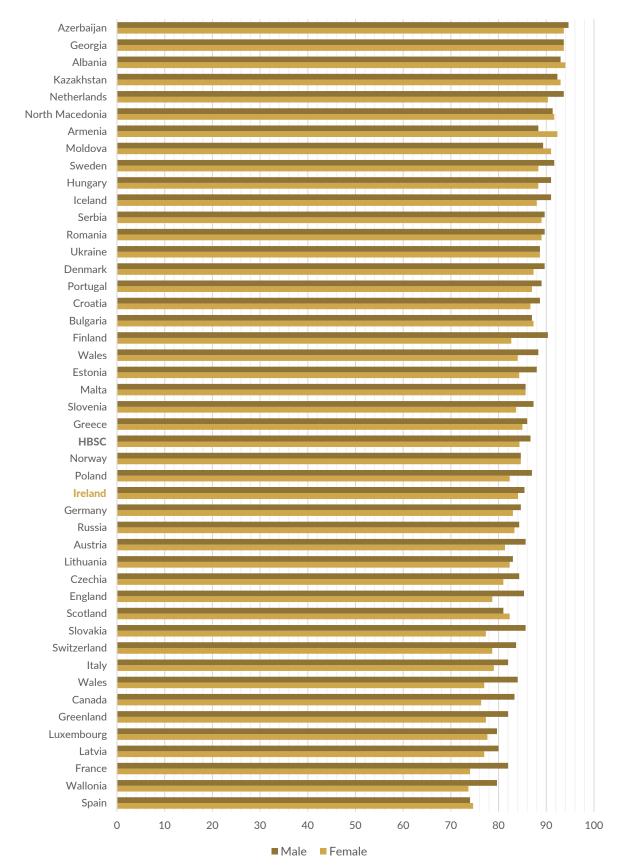
	2014	2018
State	82.7	83.3
NUTS region		
Border	83.0	84.3
Midland	82.5	82.9
West	83.3	82.2
Dublin	80.7	83.5
Mid-East	83.0	84.5
Mid-West	83.8	82.1
South-East	82.3	82.4
South-West	84.8	84.4

Source: HBSC Survey

• Across 45 countries/regions, the average percentage of children who reported finding it easy to talk to their mother when something is really bothering them was 83.9% (see *Figure 6*). This ranged from 72% in France to 91.8% in Albania. The corresponding percentage in Ireland was 83.5%. This was below the international HBSC average.



Figure 6. Percentage of children aged 11, 13, and 15 who reported finding it easy to talk to their mother, by country (2018)





Relationship with fathers

Measure: The percentage of children aged 10–17 who report finding it easy to talk to their father when something is really bothering them

- In 2018, 67.9% of children aged 10–17 reported finding it easy to talk to their father when something is really bothering them. This decreased between 2014 and 2018.
- Among individual population groups, when compared to all other children, immigrant children and children with a disability and/or chronic illness were less likely to report finding it easy to talk to their father when something is really bothering them (see Table 27).
- Immigrant children were the population group with the lowest percentage who reported finding it easy to talk to their father when something is really bothering them (see *Table 27*).

Table 27. Percentage of children aged 10–17 who reported finding it easy to talk to their father when something is really bothering them, by population group (2014–2018)

	2014	2018
All children	70.2	67.9
Traveller status		
Traveller children	70.4	68.9
All children except Traveller children	70.2	67.8
Immigrant status		
Immigrant children	67.5	60.8
All children except immigrant children	70.7	68.7
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	68.7	64.1
All children except those with a disability and/or chronic illness	70.6	68.9

- A lower percentage of females than males reported finding it easy to talk to their father when something is really bothering them (see *Table 28*).
- On average, the percentage of children who reported finding it easy to talk to their father when something is really bothering them decreased with age (see *Table 28*).
- The percentage of children who reported finding it easy to talk to their father when something is really bothering them was lowest among the low social class group (see *Table 28*).



Table 28. Percentage of children aged 10–17 who reported finding it easy to talk to their father when something is really bothering them, by age, gender, and social class (2014–2018)

	2	014			2018	
_	Male	Female	Total	Male	Female	Total
All children	75.7	64.4	70.2	72.5	63.5	67.9
Age						
10 years	80.2	72.8	76.6	78.7	76.5	77.6
11 years	82.7	74.8	78.9	79.7	72.3	76.3
12 years	83.6	69.5	77.4	75.4	68.0	71.7
13 years	78.2	66.0	72.0	74.2	61.0	67.1
14 years	73.5	59.3	66.3	67.8	54.4	60.5
15 years	71.5	57.3	64.3	64.7	52.0	57.6
16 years	66.1	56.8	61.6	60.9	52.2	56.2
17 years	67.8	58.2	63.6	58.6	52.9	55.7
Social class						
High	76.8	65.6	71.1	75.1	66.9	70.7
Middle	76.6	63.6	70.3	73.2	62.9	67.9
Low	72.4	62.0	67.2	66.2	59.0	62.4

• The percentage of children who reported finding it easy to talk to their father when something is really bothering them ranged from 63.9% in the West to 71% in the South-West (see *Table 29*).

Table 29. Percentage of children aged 10–17 who reported finding it easy to talk to their father when something is really bothering them, by NUTS region (2014–2018)

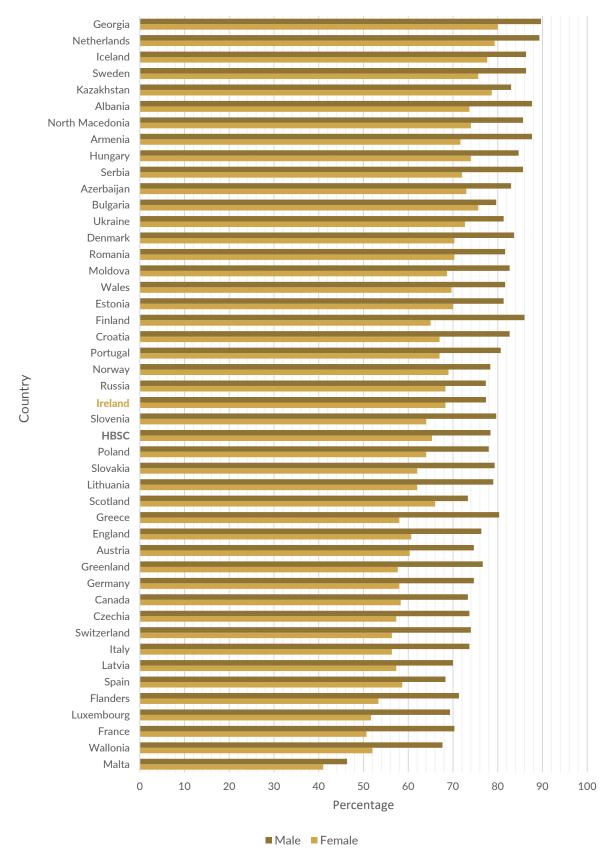
	2014	2018
State	70.2	67.9
NUTS region		
Border	70.5	68.5
Midland	69.0	67.5
West	70.5	63.9
Dublin	67.9	70.7
Mid-East	71.4	70.3
Mid-West	73.7	64.0
South-East	70.1	65.3
South-West	71.0	71.0

Source: HBSC Survey

• Across 45 countries/regions, the average percentage of children who reported finding it easy to talk to their father when something is really bothering them was 78.3% for boys and 65.3% for girls (see *Figure 7*). This ranged from 46.3% and 41.0%, respectively, in Malta to 89.7% and 80.0%, respectively, in Georgia. The corresponding percentage in Ireland was 77.3% for boys and 68.3% for girls. This was above the international HBSC average.



Figure 7. Percentage of children aged 11, 13, and 15 who reported finding it easy to talk to their father, by country (2018)





Talking to parents

Measure: The percentage of children aged 15 who report their parents spend time just talking with them several times a week

- In 2018, 69.9% of children aged 15 reported that their parents spend time just talking with them several times a week.
- 65.9% of immigrant children aged 15 reported that their parents spend time just talking with them several times a week, compared to 70.9% for non-immigrant children.

Table 30. Percentage of children aged 15 who reported that their parents spend time just talking with them several times a week, by population group (2018)

	Mean score
All children	69.9
Immigrant status	
Immigrant children	65.9
Non-immigrant children	70.9

Source: OECD-Pisa Survey

- 78.5% of girls aged 15 reported that their parents spend time just talking with them several times a week, compared with 61% of boys.
- 73.7% of children in the high socio-economic status category reported that their parents spend time just talking with them several times a week. The corresponding figure for those belonging to the medium socio-economic status category was 70.2%, and for those in the low socio-economic status category, it was 65.7%.

Table 31. Percentage of children aged 15 who reported that their parents spend time just talking with them several times a week, by gender and social class (2018)

	2009	2012	2015	2018
All children	59.8	67.9	73.4	69.9
Gender				
Male	48.9	58.5	65.5	61.0
Female	70.8	77.4	81.6	78.5
Social class				
High	63.0	71.3	75.2	73.7
Medium	60.2	66.9	72.1	70.2
Low	57.1	65.4	72.9	65.7

Source: OECD-Pisa Survey

^{*2022} update not available at time of publication

^{*2022} update not available at time of publication



Parental involvement in schooling

Measure: The percentage of children aged 15 who report their parents discuss with them how well they are doing at school several times a week

- In 2018, 51.9% of children aged 15 reported that their parents discuss with them how well they are doing at school several times a week.
- 57.4% of immigrant children aged 15 reported that their parents discuss with them how well they are doing at school several times a week, compared to 51.1% for non-immigrant children.

Table 32. Percentage of children aged 15 who reported that their parents discuss with them how well they are doing at school several times a week, by population group (2018)

	Mean score
All children	51.9
Immigrant status	
Immigrant children	57.4
Non-immigrant children	51.1

Source: OECD-Pisa Survey

- 58.9% of girls aged 15 reported that their parents discuss with them how well they are doing at school several times a week, compared with 44.7% of boys.
- 55.1% of children in the high socio-economic status category reported that their parents discuss with them how well they are doing at school several times a week. The corresponding figure for those belonging to the medium socio-economic status category was 52.5%, and for those in the low socio-economic status category, it was 47.8%.

Table 33. Percentage of children aged 15 who reported that their parents discuss with them how well they are doing at school several times a week, by gender and social class (2018)

	2009	2012	2015	2018
All children	42.8	49.4	56.1	51.9
Gender				
Male	39.4	45.2	51.3	44.7
Female	46.3	53.6	61.1	58.9
Social class				
High	46.6	55.2	58.7	55.1
Medium	43.6	48.3	57.2	52.5
Low	37.9	44.6	52.6	47.8

Source: OECD-Pisa Survey

^{*2022} update not available at time of publication

^{*2022} update not available at time of publication



Eating a main meal together

Measure: The percentage of children aged 15 who report their parents eat a main meal with them several times a week

- In 2018, 69.1% of children aged 15 reported that their parents eat a main meal with them several times a week.
- 62.3% of immigrant children aged 15 reported that their parents eat a main meal with them several times a week, compared to 70.9% for non-immigrant students.

Table 34. Percentage of children aged 15 who reported that their parents eat a main meal with them several times a week, by population group (2018)

	Mean score
All children	69.1
Immigrant status	
Immigrant children	62.3
Non-immigrant children	70.9

Source: OECD-Pisa Survey

- 72.7% of girls aged 15 reported that their parents eat a main meal with them several times a week, compared with 65.4% of boys.
- 76.6% of children in the high socio-economic status category reported that their parents eat a main meal with them several times a week. The corresponding figure for those belonging to the medium socio-economic status category was 68.9%, and for those in the low socio-economic status category, it was 61.4%.

Table 35. Percentage of children aged 15 who reported that their parents eat a main meal with them several times a week, by gender and social class (2018)

	2009	2012	2015	2018
All children	72.4	73.2	76.0	69.1
Gender				
Male	70.1	71.8	74.8	65.4
Female	74.6	74.6	77.2	72.7
Social class				
High	77.1	79.2	81.0	76.6
Medium	73.6	72.9	75.9	68.9
Low	66.9	67.5	71.3	61.4

Source: OECD-Pisa Survey

^{*2022} update not available at time of publication

^{*2022} update not available at time of publication



Friendships

Measure: The percentage of children aged 10–17 who report having three or more friends of the same gender

- In 2018, 89.3% of children aged 10–17 reported having three or more friends of the same gender. This increased between 2014 and 2018.
- Among individual population groups, when compared to all other children, Traveller children, immigrant children, and children with a disability and/or chronic illness were less likely to report having three or more friends of the same gender (see *Table 36*).
- Immigrant children were the population group with the lowest percentage who reported having three or more friends of the same gender (see *Table 36*).

Table 36. Percentage of children aged 10–17 who reported having three or more friends of the same gender, by population group (2014–2018)

	2014	2018
All children	88.0	89.3
Traveller status		
Traveller children	87.7	86.1
All children except Traveller children	88.0	89.4
Immigrant status		
Immigrant children	85.0	84.5
All children except immigrant children	88.5	90.0
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	86.4	87.8
All children except those with a disability and/or chronic illness	88.4	89.8

- A lower percentage of females than males reported having three or more friends of the same gender (see *Table 37*).
- On average, the percentage of children who reported having three or more friends of the same gender decreased with age (see *Table 37*).
- The percentage of children who reported having three or more friends of the same gender was lowest among the low social class group (see *Table 37*).



Table 37. Percentage of children aged 10–17 who reported having three or more friends of the same gender, by age, gender, and social class (2014–2018)

	2014			2018		
	Male	Female	Total	Male	Female	Total
All children	88.0	87.9	88.0	89.4	89.3	89.3
Age						
10 years	88.5	89.4	88.9	90.8	88.4	89.6
11 years	91.1	90.9	91.0	93.0	91.8	92.4
12 years	90.8	90.3	90.6	93.5	93.1	93.3
13 years	91.2	88.5	89.8	91.4	91.3	91.4
14 years	87.5	88.9	88.2	85.4	90.4	88.1
15 years	85.9	85.2	85.6	86.9	87.3	87.2
16 years	86.5	85.3	85.9	80.0	83.4	81.8
17 years	80.5	83.7	81.9	86.2	86.5	86.3
Social class						
High	88.7	88.7	88.7	90.8	90.6	90.7
Middle	89.2	88.5	88.9	89.8	89.1	89.5
Low	86.9	87.2	87.0	86.7	88.1	87.5

• The percentage of children who reported having three or more friends of the same gender ranged from 87.9% in the Border region to 90.7% in the West (see *Table 38*).

Table 38. Percentage of children aged 10–17 who reported having three or more friends of the same gender, by NUTS region (2014–2018)

	2014	2018
State	88.0	89.3
NUTS region		
Border	87.2	87.9
Midland	87.7	88.2
West	88.0	90.7
Dublin	87.7	89.7
Mid-East	87.4	89.3
Mid-West	90.0	89.3
South-East	86.9	89.6
South-West	89.5	89.7



Pets and animals

Measure: The percentage of children aged 10–17 who report having a pet of their own or a pet in the family

- In 2018, 71.7% of children aged 10–17 reported having a pet of their own or a pet in the family. This decreased between 2014 and 2018.
- Among individual population groups, when compared to all other children, Traveller children were less likely to report having a pet of their own or a pet in the family (see *Table 39*).

Table 39. Percentage of children aged 10–17 who reported having a pet of their own or a pet in the family, by population group (2014–2018)

	2014	2018
All children	74.6	71.7
Traveller status		
Traveller children	77.2	66.6
All children except Traveller children	74.5	71.9
Immigrant status		
Immigrant children	59.5	73.2
All children except immigrant children	77.3	59.7
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	77.4	73.4
All children except those with a disability and/or chronic illness	73.8	71.3

- A lower percentage of males than females reported having a pet of their own or a pet in the family (see *Table 40*).
- On average, the percentage of children who reported having a pet of their own or a pet in the family increased with age (see *Table 40*).
- The percentage of children who reported having a pet of their own or a pet in the family was lowest among the high social class group (see *Table 40*).



Table 40. Percentage of children aged 10–17 who reported having a pet of their own or a pet in the family, by age, gender, and social class (2014–2018)

	2014			2018		
	Male	Female	Total	Male	Female	Total
All children	73.5	75.6	74.6	70.5	72.9	71.7
Age						
10 years	75.0	75.1	75.1	68.8	74.2	71.4
11 years	75.4	71.9	73.7	70.8	74.6	72.5
12 years	76.2	76.4	76.3	69.4	72.8	71.1
13 years	71.4	74.1	72.8	71.4	70.8	71.1
14 years	71.6	76.6	74.1	70.6	71.8	71.2
15 years	76.4	77.3	76.9	71.8	69.7	70.6
16 years	70.7	77.2	74.0	70.9	73.5	72.3
17 years	69.3	76.0	72.4	75.1	77.7	76.4
Social class						
High	75.2	77.3	76.3	69.2	73.5	71.5
Middle	75.2	75.0	75.1	71.6	74.1	72.8
Low	71.7	76.9	74.3	73.5	74.3	73.9

• The percentage of children who reported having a pet of their own or a pet in the family ranged from 61.4% in the South-East to 80.7% in the Mid-West (see *Table 41*).

Table 41. Percentage of children aged 10–17 who reported having a pet of their own or a pet in the family, by NUTS region (2014–2018)

	2014	2018
State	74.6	71.7
NUTS region		
Border	75.5	76.5
Midland	78.6	74.3
West	78.5	78.7
Dublin	62.2	73.4
Mid-East	74.0	78.2
Mid-West	82.2	80.7
South-East	84.6	61.4
South-West	78.4	72.3



Bullying

Measure: The percentage of children aged 10–17 who report having been bullied at school in the past couple of months

- In 2018, 31.1% of children aged 10–17 reported having been bullied at school in the past couple of months. This increased between 2014 and 2018.
- Among individual population groups, when compared to all other children, Traveller children and immigrant children and children with a disability and/or chronic illness were more likely to report having been bullied at school in the past couple of months (see *Table 42*).
- Traveller children were the population group with the highest percentage who reported having been bullied at school in the past couple of months (see *Table 42*).

Table 42. Percentage of children aged 10–17 who reported having been bullied at school in the past couple of months, by population group (2014–2018)

	2014	2018
All children	26.5	31.1
Traveller status		
Traveller children	32.8	42.0
All children except Traveller children	26.3	30.8
Immigrant status		
Immigrant children	31.1	36.4
All children except immigrant children	25.6	30.4
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	31.9	38.9
All children except those with a disability and/or chronic illness	25.0	29.0

- A lower percentage of males than females reported having been bullied at school in the past couple of months (see *Table 43*).
- On average, the percentage of children who reported having been bullied at school in the past couple of months decreased with age (see *Table 43*).
- The percentage of children who reported having been bullied at school in the past couple of months was highest among the low social class group (see *Table 43*).



Table 43. Percentage of children aged 10–17 who reported having been bullied at school in the past couple of months, by age, gender, and social class (2014–2018)

		2014			2018	
	Male	Female	Total	Male	Female	Total
All children	25.2	27.7	26.5	30.8	31.3	31.1
Age						
10 years	34.1	36.0	35.0	33.7	35.9	34.8
11 years	22.6	28.1	25.3	30.6	29.7	30.2
12 years	21.4	28.1	24.5	27.1	28.4	27.7
13 years	26.2	30.1	28.2	31.2	33.0	32.1
14 years	26.7	26.1	26.4	29.9	34.1	32.2
15 years	24.5	27.2	25.9	31.0	28.1	29.3
16 years	24.6	24.2	24.4	30.4	30.3	30.4
17 years	19.9	17.3	18.8	27.9	20.4	24.0
Social class						
High	23.3	25.1	24.2	29.6	28.4	28.9
Middle	26.2	28.2	27.2	30.5	34.1	32.3
Low	27.9	31.9	29.9	33.7	34.9	34.3

• The percentage of children who reported having been bullied at school in the past couple of months ranged from 29% in the Border region to 34.4% in the Mid-West (see *Table 44*).

Table 44. Percentage of children aged 10–17 who reported having been bullied at school in the past couple of months, by NUTS region (2014–2018)

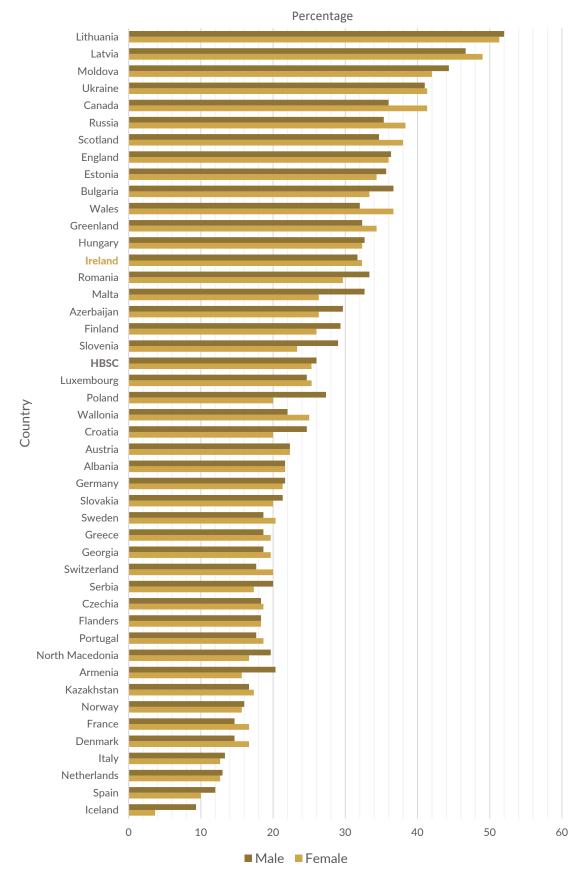
	2014	2018
State	26.5	31.1
NUTS region		
Border	28.1	29.0
Midland	29.2	30.2
West	25.2	31.9
Dublin	27.5	32.3
Mid-East	23.7	30.6
Mid-West	24.5	34.4
South-East	27.5	30.5
South-West	25.4	31.7

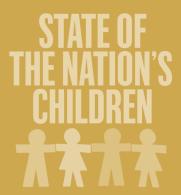
Source: HBSC Survey

• Across 45 countries/regions, the average percentage of children who reported having been bullied at school in the past couple of months was 26.0% for boys and 25.3% for girls (see *Figure 8*). This ranged from 9.3% and 3.7%, respectively, in Iceland, to 52.0% and 51.3%, respectively, in Lithuania. The corresponding percentage in Ireland was 31.7% for boys and 32.3% for girls. This was above the international HBSC average.



Figure 8. Percentage of children aged 11, 13, and 15 who reported having been bullied at least once or twice at school in the previous couple of months, by country (2018)







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Department of Children, Equality, Disability, Integration, and Youth Block 1, Miesian Plaza, 50–58 Lower Baggot Street, Dublin 2 D02 XW14

Tel: +353 (0)1 647 3000

Email: dataandanalytics@equality.gov.ie

Web: www.gov.ie/dcediy

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Education Outcomes



Quality of Early Childhood Care and Education

Measure: The percentage of pre-school services contracted to deliver the Early Childhood Care and Education (ECCE) Programme under Core funding

Note: Due to changes in Core Funding, 2022/2023 data is only presented below. See Appendix 1 for more details.

- For the 2022/23 pre-school year there were 108,616 children registered for the latest finalised ECCE programme call under Core Funding. There were 3,970 services contracted to offer ECCE in 2022/23 (see *Table 45*).
- For the 2022/23 pre-school year 2,946 (78%) of pre-school services under contract to deliver the ECCE Programme under Core Funding had a least one staff member with Quality and Qualifications Ireland level 7 (QQI L7) or above. The percentage ranged from 68% in Longford to 95% in Meath (see *Table 46*).

Table 45. Number of unique children registered for the Early Childhood Care and Education Programme (ECCE) and the unique number of services contracted to offer ECCE (2022/2023)

	No. of Children	No. of Services
2022/23	108,616	3,970

Source: Pobal



Table 46. Number and percentage of pre-school services under contract to deliver the Early Childhood Care and Education (ECCE) Programme under Core Funding, by administrative county (2022)

	Services	Services	With at least one staff member QQI L7 or above		With member Q	no staff QI L7 or above
	No.	% of all ECCE 2022 services	No.	%	No.	%
Total	3,790	95	2,946	78	844	22
Administrative county						
Carlow	44	96	40	91	<5	N/A
Cavan	65	98	51	78	14	22
Clare	123	98	91	74	32	26
Cork City	125	97	109	87	16	13
Cork County	284	96	225	79	59	21
Donegal	133	96	98	74	35	26
Dublin City	337	93	253	75	84	25
Dún Laoghaire-Rathdown	148	90	128	86	20	14
Fingal	244	91	196	80	48	20
South Dublin	243	96	176	72	67	28
Galway County	123	99	98	80	25	20
Kerry	165	96	134	81	31	19
Kildare	87	100	66	76	21	24
Kilkenny	73	95	56	77	17	23
Laois	30	100	21	70	9	30
Leitrim	156	96	121	78	35	22
Limerick	29	91	23	79	6	21
Longford	102	98	69	68	33	32
Louth	118	98	81	69	37	31
Mayo	173	98	127	73	46	27
Meath	59	98	56	95	<5	N/A
Monaghan	60	98	45	75	15	25
Offaly	54	96	43	80	11	20
Roscommon	64	97	51	80	13	20
Sligo	184	91	133	72	51	28
Tipperary	152	97	112	74	40	26
Waterford	88	93	66	75	22	25
Westmeath	70	99	49	70	21	30
Wexford	121	95	111	92	10	8
Wicklow	136	94	117	86	19	14

Source: Pobal

Note: See further information on this table in the appendix.



Primary school attendance

Measure: The percentage of primary school children who are absent from school for 20 days or more in the school year

Note: School attendance from 2019/20 to 2021/22 was affected by the Covid-19 pandemic.

 Over the period 2017 to 2021, the percentage of primary school children who were absent from school for 20 days or more increased from 12.1% to 40.3% (see *Table* 47).

Table 47. Percentage of primary school children who were absent from school for 20 days or more in the school year (2017–2021)

	2017/18	2018/19	2019/20	2020/21	2021/22
Primary school children	12.1	10.7	5.0	11.1	40.3

Source: Tusla, the Child and Family Agency

- The average percentage of primary school children who were absent from school for 20 days or more in the 2021/22 school year was higher in rural schools (45.5%) compared to urban schools (35.1%)
- The average percentage of school children who were absent from school for 20 days or more in the 2021/22 school year was highest in schools characterised as urban, in School Support Programme Band 1¹ (57.6%).

Table 48. Average percentage of primary school children per school* who were absent from school for 20 days or more in the school year, by selected school characteristics (2017–2021)

	2017/18	2018/19	2019/20	2020/21	2021/22
Type of school					
Rural	7.9	7.5	7.4	15.9	45.5
Urban	15.0	13.2	3.4	7.0	35.1
DEIS status					
Rural, not in School Support Programme	7.4	7.1	3.2	6.9	34.7
Rural, in School Support Programme	9.9	9.7	4.6	7.9	37.4
Urban, not in School Support Programme	12.2	10.3	6.2	13.0	42.0
Urban, in School Support Programme Band 2	18.6	16.7	8.2	18.9	50.7
Urban, in School Support Programme Band 1	23.1	21.8	12.1	27.2	57.6

^{*} This table uses schools-level data

Source: Tusla, the Child and Family Agency

¹ See here for details of the DEIS programme



• In the 2021/22 school year, the average percentage of primary school children per school who were absent for 20 days or more ranged from 28.5% in Monaghan to 46.1% in Offaly.

Table 49. Average percentage of primary school children per school* who were absent from school for 20 days or more in the school year, by county (2017–2021)

	2017/18	2018/19	2019/20	2020/21	2021/22
All counties	11.3	10.5	5.0	10.4	39.0
County					
Carlow	13.8	11.7	6.3	11.2	42.3
Cavan	9.8	8.7	4.2	8.3	33.1
Clare	10.4	10.2	5.0	8.4	32.8
Cork	10.8	10.1	4.4	8.3	36.7
Donegal	8.0	7.9	3.2	10.4	36.1
Dublin	15.6	14.5	7.7	16.5	45.5
Galway	10.0	10.6	4.4	7.5	34.6
Kerry	11.3	12.0	4.9	9.0	37.0
Kildare	12.1	10.4	5.3	10.5	43.5
Kilkenny	9.6	7.6	3.8	8.1	36.8
Laois	13.0	10.9	3.8	12.3	45.2
Leitrim	8.1	7.0	5.5	8.0	36.2
Limerick	11.6	11.6	4.8	13.6	40.1
Longford	13.7	12.8	6.3	14.9	43.6
Louth	12.7	12.0	5.2	11.8	44.3
Mayo	10.2	9.0	4.4	6.3	39.7
Meath	9.5	8.5	3.8	8.9	37.4
Monaghan	6.8	5.4	2.4	6.3	28.5
Offaly	12.2	11.4	5.4	11.1	46.1
Roscommon	9.3	9.7	5.5	10.0	36.6
Sligo	10.0	9.3	4.8	8.3	34.2
Tipperary	9.3	8.5	4.2	7.8	36.0
Waterford	10.4	9.4	4.6	9.3	37.0
Westmeath	12.2	9.4	6.0	11.9	41.1
Wexford	12.0	11.2	5.5	10.8	41.5
Wicklow	10.7	10.1	3.6	8.4	42.2

^{*} This table uses schools-level data

Source: Tusla, the Child and Family Agency



Post-primary school attendance

Measure: The percentage of post-primary school children who are absent from school for 20 days or more in the school year

Note: School attendance from 2019/20 to 2021/22 was affected by the Covid-19 pandemic.

• Over the period 2017 to 2021, the percentage of post-primary school children who were absent from school for 20 days or more increased from 14.6% to 26.8% (see *Table 50*).

Table 50. Percentage of post-primary school children who were absent from school for 20 days or more in the school year (2017–2021)

	2017/18	2018/19	2019/20	2020/21	2021/22
Post-primary school children	14.6	14.5	9.5	12.0	26.8

Source: Tusla, the Child and Family Agency

• In the 2021/22 year, the average percentage of post-primary school children who were missing for 20 days or more was lowest in secondary schools (24%). This average percentage was 24.5% in non-DEIS schools and 36.8% in DEIS schools.

Table 51. Average percentage of post-primary school children per school* who were absent from school for 20 days or more in the school year, by selected school characteristics (2017–2021)

	2017/18	2018/19	2019/20	2020/21	2021/22
Type of school					
Secondary schools	12.7	12.3	8.3	10.0	24.0
Community and comprehensive schools	18.7	17.5	12.0	15.8	31.1
Vocational schools	19.7	19.8	13.3	17.0	33.2
DEIS status					
DEIS schools	23.6	22.9	17.1	23.1	36.8
Non-DEIS schools	12.9	12.7	7.7	9.7	24.5

^{*} This table uses schools-level data Source: Tusla, the Child and Family Agency

• In the 2021/22 school year, the average percentage of post-primary school children per school who were absent for 20 days or more ranged from 18.9% in Leitrim to 44.6% in Laois.



Table 52. Average percentage of post-primary school children per school* who were absent from school for 20 days or more in the school year, by county (2017–2021)

	2017/18	2018/19	2019/20	2020/21	2021/22
All counties	15.8	15.5	10.4	13.3	28.0
County					
Carlow	15.6	17.6	13.1	15.9	24.0
Cavan	12.4	13.2	14.4	11.0	24.6
Clare	12.5	15.4	6.4	11.2	24.0
Cork	13.9	12.3	8.3	10.8	21.4
Donegal	18.2	18.7	11.0	17.7	33.6
Dublin	15.4	15.4	11.4	14.6	28.1
Galway	18.1	19.5	11.1	14.2	30.2
Kerry	16.2	13.7	10.9	14.6	28.6
Kildare	15.4	16.2	9.4	9.0	28.5
Kilkenny	14.4	18.6	10.3	12.8	26.1
Laois	17.7	19.0	11.0	23.7	44.6
Leitrim	17.5	12.6	8.5	15.8	18.9
Limerick	14.3	13.5	9.7	9.4	33.5
Longford	21.2	25.0	10.3	26.3	32.9
Louth	12.1	12.9	5.0	10.6	24.1
Mayo	19.8	17.1	10.9	12.2	31.0
Meath	13.8	16.4	6.6	7.9	29.0
Monaghan	18.0	17.9	9.8	13.4	30.8
Offaly	17.7	15.4	11.9	4.4	22.9
Roscommon	17.6	10.0	9.4	15.0	25.8
Sligo	19.1	18.3	9.9	18.0	30.9
Tipperary	27.1	13.4	8.1	7.4	24.2
Waterford	14.9	11.8	12.2	12.0	23.9
Westmeath	17.2	15.8	10.0	17.6	35.2
Wexford	20.6	18.7	16.5	14.5	34.5
Wicklow	17.3	17.5	12.1	14.2	31.5

^{*} This table uses schools-level data

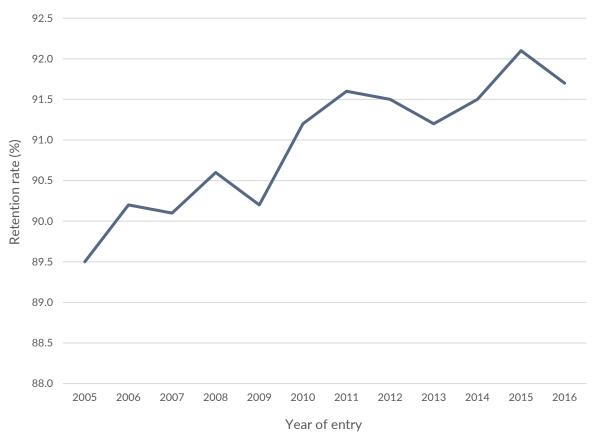
Source: Tusla, the Child and Family Agency



Leaving Certificate retention rates

Measure: The Leaving Certificate retention rate

Figure 9. Leaving Certificate retention rate (2005–2016 school entry cohorts)



Source: Department of Education

- The Leaving Certificate retention rate for children entering secondary school in 2016 was 91.7%, i.e. out of the 63,910 enrolled on 30 September 2016 in year one of the Junior Cycle, 58,605 either sat the Leaving Certificate or received a calculated grade by 2021 or 2022 (see *Table 53*).
- Leaving Certificate retention rates increased from 89.5% in 2005 to 91.7% in 2016 (see *Figure 9*).
- The retention rate for boys in the 2016 school entry cohort was 90.1%, compared to 93.3% for girls (see *Table 53*).
- On average, secondary schools had the highest retention rates (at 93.2%) when compared with community and comprehensive schools (90.4%) and vocational schools (89.5%) (see *Table 53*).
- For the 2016 school entry cohort, the retention rate was 85% in DEIS schools, compared to 93.4% for children in non-DEIS schools.
- Overall, the Leaving Cert retention rate for children in the 2016 entry cohort ranged from 94.2% in Sligo to 89.5% in Carlow (see *Table 54*).



Table 53. Leaving Certificate retention rate, by gender, school type, and DEIS status (2016 school entry cohort)

	No. in cohort	Retention rate (%)
Total	63,910	91.7
Sex		
Male	32,545	90.1
Female	31,365	93.3
School type		
Secondary schools	34,812	93.2
Vocational schools	18,296	89.5
Community and comprehensive schools	10,802	90.4
DEIS status		
DEIS schools	12,973	85
Non-DEIS schools	50,937	93.4

Source: Department of Education

Table 54. Leaving Certificate retention rate, by county (2016 school entry cohort)

	No. in cohort	Retention rate (%)
Total	63,910	91.7
County		
Carlow	993	89.5
Cavan	999	91
Clare	1,486	91.6
Cork	7,081	92
Donegal	2,384	90.5
Dublin	15,869	91.2
Galway	3,508	92.2
Kerry	1,966	92.7
Kildare	3,487	92.6
Kilkenny	1,317	91.8
Laois	1127	89.7
Leitrim	496	91.5
Limerick	2,721	92.6
Longford	675	89.8
Louth	2,199	93
Mayo	1,720	93.7
Meath	2,759	93.4
Monaghan	866	90.6
Offaly	1,171	90.5
Roscommon	602	92.2
Sligo	825	94.2
Tipperary	2,254	91.8
Waterford	1,582	92.9
Westmeath	1,493	89.7
Wexford	2,326	90.1
Wicklow	2,004	90.6

Source: Department of Education



Achievement in reading: OECD-PISA Reading Literacy Scale

Measure: The Mean scores of children based on the OECD-PISA reading Literacy Scale

- In 2022, 15 year-old children in Ireland achieved a mean score of 516.0 on the reading literacy scale (see *Table 55*).
- Immigrant children scored 507.4 on the reading literacy scale, compared to a score of 520.4 for non-immigrant students.
- Girls scored 525.4 on the reading literacy scale, compared with 507.1 for boys.
- In 2022, Irish students are the best performing in reading literacy among the 37 countries in the OECD and the 26 EU countries. In reading literacy, Ireland has moved from eighth place to second place among the 81 countries taking part in the PISA project.

Table 55. Mean score of children aged 15 based on the OECD-PISA Reading Literacy Scale, by population group (2022)

	Mean score
All children	516.0
Immigrant status	
Immigrant children	507.4
All children except immigrant children	520.4

Source: OECD-Pisa survey

Table 56. Mean score of children aged 15 based on the OECD-PISA Reading Literacy Scale, by gender and socio-economic status (2012–2022)

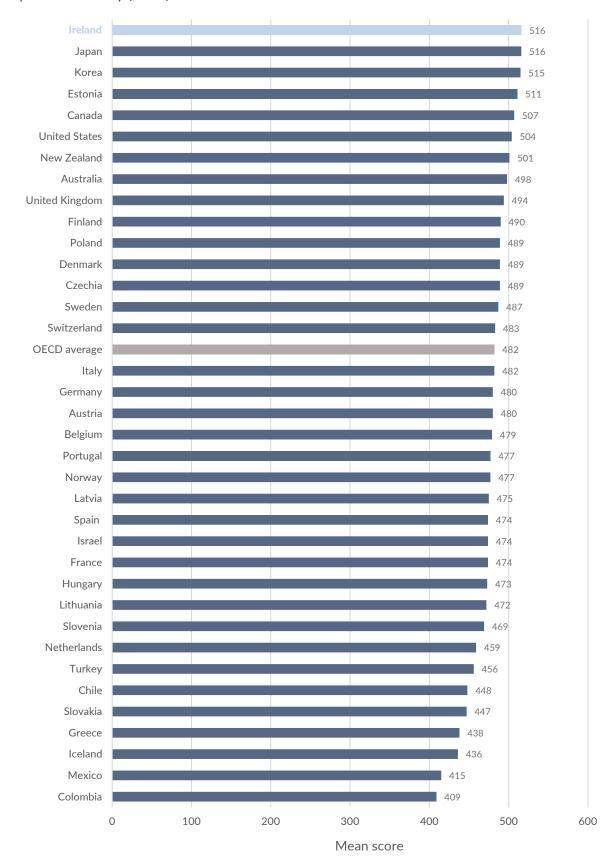
	2012	2015	2018	2022
All children	523.2	520.8	518.1	516
Gender				
Male	509.2	515	506.4	507.1
Female	537.7	526.9	529.6	525.4
Social class				
High	562.3	555.6	551.8	Pending*
Medium	523.3	520.5	517.5	Pending*
Low	485.9	488	487.9	Pending*

Source: OECD-Pisa survey

^{*}Update not available at time of publication



Figure 10. Mean score of children aged 15 based on the OECD-PISA Reading Literacy Scale, by OECD country (2022)





Achievement in mathematics: OECD-PISA Mathematics Literacy Scale

Measure: The Mean scores of children based on the OECD-PISA mathematics Literacy Scale

- In 2022, 15 year-old children in Ireland achieved a mean score of 491.6 on the mathematics literacy scale (see *Table 57*).
- Immigrant children scored 486.6 on the mathematics literacy scale, compared to a score of 494.8 for non-immigrant students.
- Girls scored 485.1 on the mathematics literacy scale, compared with 497.8 for boys.
- In 2022, Ireland moved from twenty-first place to eleventh place in mathematical literacy among the 81 countries taking part in the PISA project.

Table 57. Mean score of children aged 15 based on the OECD-PISA Mathematics Literacy Scale, by population group (2022)

	Mean score
All children	491.6
Immigrant status	
Immigrant children	486.6
All children except immigrant children	494.8

Source: OECD-Pisa survey

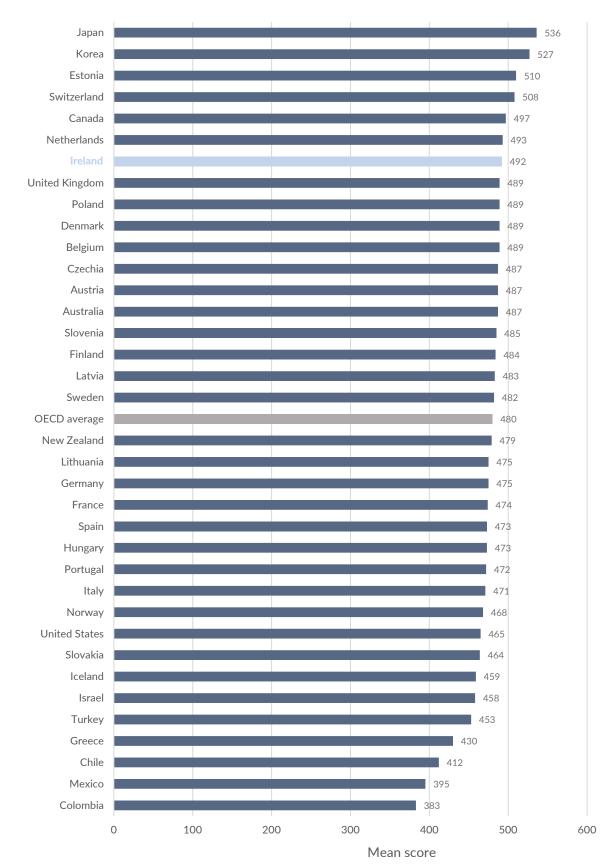
Table 58. Mean score of children aged 15 based on the OECD-PISA Mathematics Literacy Scale, by gender and socio-economic status (2012–2022)

	2012	2015	2018	2022
All children	501.5	503.7	499.6	491.6
Gender				
Male	509	511.6	502.6	497.8
Female	493.7	495.4	496.7	485.1
Social class				
High	538.9	537.7	530	Pending*
Medium	501.3	502.4	498.5	Pending*
Low	465.5	471.5	472.3	Pending*

^{*}Update not available at time of publication



Figure 11. Mean score of children aged 15 based on the OECD-PISA Mathematics Literacy Scale, by OECD country (2022)





Achievement in science: OECD-PISA Science Literacy Scale

Measure: The Mean scores of children based on the OECD-PISA science Literacy Scale

- In 2022, 15 year-old children in Ireland achieved a mean score of 503.8 on the science literacy scale (see *Table 59*).
- Immigrant children scored 502.6 on the science literacy scale, compared to a score of 506.4 for non-immigrant students.
- Girls scored 501.0 on the science literacy scale, compared with 506.6 for boys.
- In 2022, Ireland moved from twenty-second place to twelfth place in science literacy among the 81 countries taking part in the PISA project.

Table 59. Mean score of children aged 15 based on the OECD-PISA Science Literacy Scale, by population group (2022)

	Mean score
All children	503.8
Immigrant status	
Immigrant children	502.6
All children except immigrant children	506.4

Source: OECD-Pisa survey

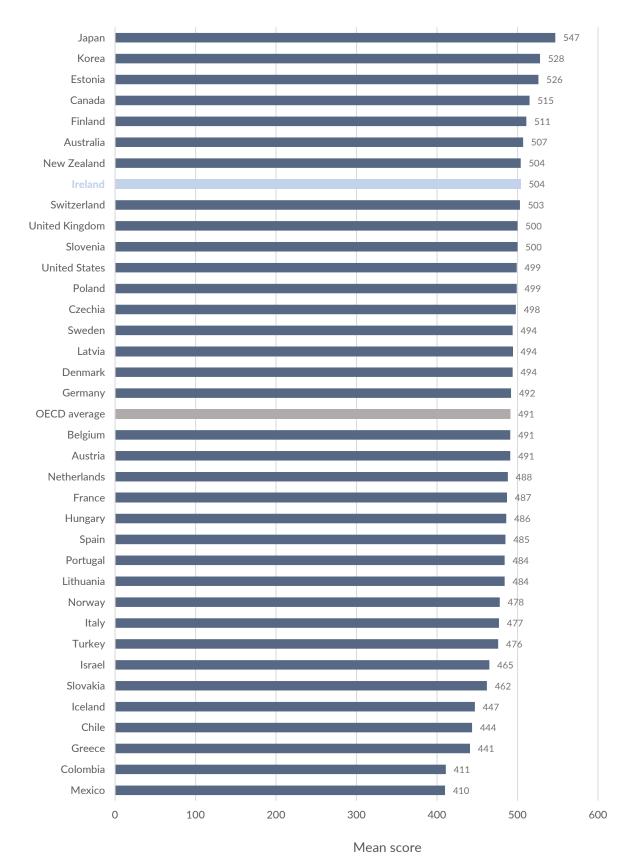
Table 60. Mean score of children aged 15 based on the OECD-PISA Science Literacy Scale, by gender and socio-economic status (2012–2022)

	2012	2015	2018	2022
All children	522	502.6	496.1	503.8
Gender				
Male	523.9	507.7	495.4	506.6
Female	520	497.2	496.9	501.0
Social class				
High	562.4	538.5	529.3	Pending*
Medium	522.3	501.8	495.7	Pending*
Low	483	468.3	465.9	Pending*

^{*}Update not available at time of publication



Figure 12. Mean score of children aged 15 based on the OECD-PISA Scientific Literacy Scale, by OECD country (2022)



Health Outcomes



Birth weight

Measure: The percentage of babies born weighing less than 2,500 grams (live and still births)

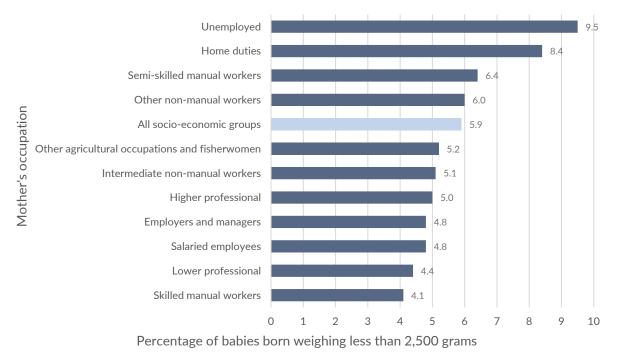
Table 61. Percentage of babies born in birth weight categories (live and still births), by gender (2019–2021)

		2019			2020			2020 2021		
	Low weight	Healthy weight	High weight	Low weight	Healthy weight	High weight	Low weight	Healthy weight	High weight	
Total	5.8	79.6	14.6	5.8	79.7	14.6	5.9	79.4	14.7	
Gender										
Male	5.5	76.8	17.7	5.1	77.1	17.8	5.3	76.6	18	
Female	6.1	82.5	11.3	6.5	82.4	11.1	6.5	82.2	11.3	

Source: National Perinatal Reporting System (NPRS), Healthcare Pricing Office

- In 2021, 5.9% of all babies born were in the low birth weight category (weighing less than 2,500 grams) (see *Table 61*).
- Girls were more likely than boys to be born in the low birth weight category (6.5% and 5.3% respectively) (see *Table 61*).
- The percentage of babies born in the low birth weight category was highest among mothers who reported being unemployed (9.5%) (see *Figure 13*).

Figure 13. Percentage of babies born weighing less than 2,500 grams (live and still births), by occupation of mother (2021)





• Overall, 5.9% of babies born in 2021 were in the low birth weight category. This percentage ranged from 3.5% of all births in Roscommon to 7.2% of all births in Longford (see *Table 62*).

Table 62. Percentage of babies born weighing less than 2,500 grams (live and still births), by mother's county of residence (2019–2021)

	2019	2020	2021
Total	5.8	5.8	5.9
Mother's county of residence			
Carlow	6.2	5.2	5.3
Cavan	7.2	5.2	5.9
Clare	6.6	6.4	6.7
Cork	6	5.7	6.0
Donegal	6.2	5.9	6.2
Dublin City	5.9	6	6.1
Dublin County	5.2	5.3	5.2
Galway	4.9	4.6	5.8
Kerry	4.9	5.8	5.1
Kildare	5.7	5.3	5.5
Kilkenny	4.5	4.9	5.8
Laois	6.8	6.9	5.7
Leitrim	6	4.5	6.5
Limerick	6.9	7	7.0
Longford	6.7	8.2	7.2
Louth	6.1	7.1	6.8
Mayo	5.5	5	4.4
Meath	6	4.9	5.0
Monaghan	4.4	5.4	5.6
Offaly	6.6	5.7	6.0
Roscommon	5.2	5.6	3.5
Sligo	4.6	6.7	5.6
Tipperary	5.8	6	6.8
Waterford	7.3	6.3	5.6
Westmeath	6	5.6	6.8
Wexford	4.8	5.7	6.5
Wicklow	5.4	5.5	4.5



Breastfeeding

Measure: The percentage of infants who are (a) exclusively breastfed and (b) partially breastfed on being discharged from hospital

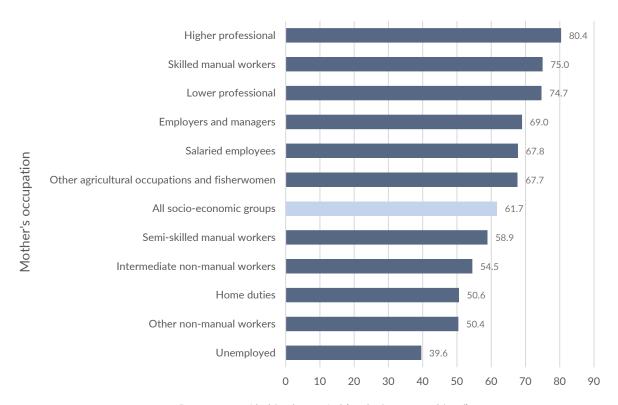
- In 2021, 61.7% of infants were breastfed on being discharged from hospital. This includes 46% who were breastfed exclusively and a further 15.7% who were fed using a combination of bottle and breastfeeding (see *Table 63*).
- The percentage of infants who were breastfed (either exclusive or combined) was higher among mothers aged 40-44 years of age (see *Table 63*).
- The percentage of infants who were breastfed (either exclusive or combined) was highest among mothers in "higher professional" and "skilled manual workers" groups (80.4% and 75% respectively), when compared with mothers in the "unemployed" group, among whom it was lowest (39.6%) (see *Figure 14*).

Table 63. Percentage of infants who are breastfed (exclusive and combined) on being discharged from hospital, by mother's age (2019–2021)

		2019			2020			2021	
	Excl.	Comb.	Total	Excl.	Comb.	Total	Excl.	Comb.	Total
Total	45.5	15.2	60.7	44.2	17.1	61.3	46.0	15.7	61.7
Mother's age									
15-19 years	19.3	8.1	27.4	18.9	8	26.9	16.5	8.5	25.0
20-24 years	28.4	10.6	39	25.7	11.5	37.2	25.8	10.7	36.5
25-29 years	37.8	13.9	51.7	36	15.5	51.5	36.8	14.7	51.5
30-34 years	48.3	15.4	63.7	47	17.7	64.7	48.0	16.7	64.7
35-39 years	51.5	16.2	67.7	50.4	17.8	68.2	52.7	16.0	68.7
40-44 years	48.2	18.6	66.8	48.1	21.3	69.5	51.1	17.8	68.9
45 years and over	35.7	25.8	61.5	35.1	29.8	64.9	45.2	22.4	67.7



Figure 14. Percentage of infants who are breastfed (either exclusive or combined) on being discharged from hospital, by occupation of mother (2021)



Percentage of babies breastfed (exclusive or combined)



• Geographically, breastfeeding on being discharged from hospital ranged from 47.8% in Donegal to 72.6% in Dublin County (see *Table 64*).

Table 64. Percentage of infants who are breastfed (exclusive and combined) on being discharged from hospital, by mother's county of residence (2021)

	Exclusive	Combined	Total
Total	46.1	15.8	61.9
Mother's county of residence			
Carlow	47.8	8.5	56.2
Cavan	38.5	14.0	52.5
Clare	49.3	7.8	57.1
Cork	63.0	3.5	66.6
Donegal	35.8	12.0	47.8
Dublin City	42.1	23.8	65.8
Dublin County	48.3	24.2	72.6
Galway	43.3	20.6	63.9
Kerry	58.6	6.0	64.7
Kildare	41.4	23.7	65.2
Kilkenny	57.8	3.3	61.1
Laois	51.9	6.7	58.5
Leitrim	41.3	18.9	60.2
Limerick	43.8	7.6	51.4
Longford	42.5	10.0	52.6
Louth	32.6	20.2	52.8
Mayo	43.2	16.1	59.3
Meath	43.5	20.2	63.6
Monaghan	37.0	13.9	50.9
Offaly	42.5	9.7	52.1
Roscommon	42.1	16.9	59.1
Sligo	39.2	19.1	58.3
Tipperary	38.3	12.9	51.2
Waterford	57.5	3.0	60.5
Westmeath	47.6	11.2	58.9
Wexford	42.6	12.6	55.2
Wicklow	46.5	17.5	63.9



Health conditions and hospitalisation

Measure: The number of hospital discharges of children

- In 2022, there were 135,033 hospital discharges of children (see *Table 65*).
- Children aged under 1 year and 1–4 years together accounted for 44.2% of total hospital discharges of children (20.9% and 23.4% respectively) (see *Table 65*).
- Boys accounted for more than half of total hospital discharges of children (54.9%) (see *Table 65*).
- The most commonly reported principal diagnosis recorded was "diseases of the respiratory system" (13.2%) followed by "diseases of the digestive system" (9.3%) (see *Table 65*).

Table 65. Number, percentage and rate (per 1,000) of hospital discharges of children, by age, gender, and principal diagnosis (2021–2022)

		2021		2022		
	No.	%	Rate	No.	%	Rate
Total	119,642	100	99.1	135,033	100	110.8
Age						
Under 1 year	25,356	21.2	453.9	28,160	20.9	487.2
1-4 years	26,333	22	107.5	31,571	23.4	132.9
5-9 years	22,390	18.7	65.3	26,791	19.8	78.2
10-14 years	26,833	22.4	73.7	28,215	20.9	75.3
15-17 years	18,730	15.7	93.9	20,296	15.0	98.4
Gender						
Male	64,422	53.8	104.3	74,126	54.9	118.9
Female	55,220	46.2	93.7	60,907	45.1	102.4
Principal diagnosis						
Diseases of the respiratory system	11,338	9.5	9.4	17,827	13.2	14.6
Injury, poisoning and certain other consequences of external causes	12,241	10.2	10.1	11,758	8.7	9.6
Diseases of the digestive system	11,755	9.8	9.7	12,607	9.3	10.3
Certain infectious and parasitic diseases	5,077	4.2	4.2	8,463	6.3	6.9
Certain conditions originating in the perinatal period	9,790	8.2	8.1	9,773	7.2	8.0
Congenital malformations, deformations and chromosomal abnormalities	6,448	5.4	5.3	6,760	5.0	5.5
Diseases of the genitourinary system	5,428	4.5	4.5	5,450	4.0	4.5
Neoplasms	5,983	5	5.0	6,924	5.1	5.7
Diseases of the skin and subcutaneous tissue	3,605	3	3.0	3,986	3.0	3.3
Diseases of the ear and mastoid process	1,991	1.7	1.6	2,537	1.9	2.1
All other conditions and reasons for admission	45,986	38.4	38.1	48,948	36.2	40.2

Rates calculated using population estimates for the relevant years and Census 2022.

Source: Hospital In-patient Enquiry, Healthcare Pricing Office



• Overall, there were 110.3 hospital discharges of children residing in Ireland per 1,000 total children in 2022. Rates ranged from 78.5. per 1,000 in Monaghan to 253.0 per 1,000 in Mayo (see *Table 66*).

Table 66. Number and rate (per 1,000) of hospital discharges of children, by county of residence (2022)

	No.	Rate
State	134,412	110.3
County of residence		
Carlow	1,741	116.8
Cavan	2,168	101.5
Clare	2,974	97.3
Cork	12,712	92.9
Donegal	8,518	205.9
Dublin	32,024	100.0
Galway	7,501	115.9
Kerry	3,967	113.4
Kildare	6,429	100.0
Kilkenny	2,457	96.0
Laois	2,771	112.6
Leitrim	769	88.6
Limerick	5,819	122.4
Longford	1,271	107.9
Louth	3,565	100.9
Mayo	8,073	253.0
Meath	5,355	89.0
Monaghan	1,349	78.5
Offaly	2,173	104.7
Roscommon	2,303	134.8
Sligo	2,310	142.8
Tipperary	4,476	110.6
Waterford	3,128	104.9
Westmeath	2,728	114.5
Wexford	4,489	113.9
Wicklow	3,342	85.8

Rates calculated using county population at Census 2022 Source: Hospital In-patient Enquiry, Healthcare Pricing Office



Accidents, injuries, and hospitalisation

Measure: The number of hospital discharges of children with a principal diagnosis of "injury, poisoning, and certain other consequences of external causes"

- In 2022, there were 11,758 hospital discharges of children with a principal diagnosis of "injury, poisoning, and certain other consequences of external causes" (see *Table 67*).
- Children aged under 1 year and 1–4 years together accounted for 26.8% of total hospital discharges of children with a principal diagnosis of "injury, poisoning, and certain other consequences of external causes" (5.6% and 21.2% respectively) (see *Table 67*).
- Boys accounted for more than half of total hospital discharges of children with this diagnosis (57.1%) (see *Table 67*).
- The most commonly reported cause recorded was "accidental falls" (39.6%) followed by "other external causes of injury" (16.3%) and "accidents caused by objects" (15%) (see *Table 67*).

Table 67. Number, percentage, and rate (per 1000) of hospital discharges of children with a principal diagnosis of "injury, poisoning and certain other consequences of external causes", by age, gender, and cause (2021–2022)

		2021			2022	
	No.	%	Rate	No.	%	Rate
Total	12,241	100	10.1	11,758	100	9.6
Age						
Under 1 year	695	5.7	12.4	655	5.6	11.3
1-4 years	2,782	22.7	11.4	2,497	21.2	10.5
5-9 years	2,946	24.1	8.6	2,815	23.9	8.2
10-14 years	3,464	28.3	9.5	3,504	29.8	9.4
15-17 years	2,354	19.2	11.8	2,287	19.5	110.9
Gender						
Male	6,956	56.8	11.3	6,708	57.1	10.8
Female	5,285	43.2	9.0	5,050	42.9	8.5
Cause						
Accidental falls	4,717	38.5	3.9	4,651	39.6	3.8
Accidents caused by objects	1,776	14.5	1.5	1,762	15.0	1.4
Transport accidents	1,031	8.4	0.9	866	7.4	0.7
Drowning, submersion, other accidental threats to breathing and foreign bodies	601	4.9	0.5	548	4.7	0.4
Intentional self-harm	975	8	0.8	870	7.4	0.7
Accident, not otherwise specified	479	3.9	0.4	555	4.7	0.5
Accidental poisoning	329	2.7	0.3	236	2.0	0.2
Assault	133	1.1	0.1	124	1.1	0.1
Contact with heat or hot substances	135	1.1	0.1	144	1.2	0.1
Event of undetermined intent	63	0.5	0.1	53	0.5	0.0
Exposure to smoke, fire and flames	14	0.1	0.0	26	0.2	0.0
Other external causes of injury	1,985	16.2	1.6	1,915	16.3	1.6
External cause not reported	< 5	NA	NA	< 5	NA	NA

Rates calculated using population estimates for the relevant years and Census 2022.

Source: Hospital In-patient Enquiry, Healthcare Pricing Office



• Overall, there were 9.6 hospital discharges of children residing in Ireland with a principal diagnosis of "injury, poisoning, and certain other consequences of external causes" per 1,000 total children in 2022. Rates ranged from 7.2 per 1,000 in Cork to 13.5 per 1,000 in Donegal (see *Table 68*).

Table 68. Number and rate (per 1,000) of hospital discharges of children with a principal diagnosis of "injury, poisoning and certain other consequences of external causes", by county of residence (2022)

	No.	Rate
State	11,669	9.6
County of residence		
Carlow	193	12.9
Cavan	228	10.7
Clare	340	11.1
Cork	981	7.2
Donegal	560	13.5
Dublin	2,693	8.4
Galway	594	9.2
Kerry	321	9.2
Kildare	557	8.7
Kilkenny	251	9.8
Laois	309	12.6
Leitrim	69	8.0
Limerick	570	12.0
Longford	110	9.3
Louth	366	10.4
Mayo	401	12.6
Meath	500	8.3
Monaghan	131	7.6
Offaly	221	10.7
Roscommon	165	9.7
Sligo	210	13.0
Tipperary	482	11.9
Waterford	298	10.0
Westmeath	298	12.5
Wexford	459	11.6
Wicklow	362	9.3

Rates calculated using county population at Census 2022 Source: Hospital In-patient Enquiry, Healthcare Pricing Office



Nutritional outcomes

Measure: The percentage of first class children in Body Mass Index (BMI) categories "normal", "overweight", and "obese"

- In 2018, 76.9% of first class children were classified as being in the "normal" weight category according to the International Obesity Taskforce Standards. 15.5% were classified as either "overweight" or "obese" (see *Table 69*).
- 79.3% of boys were classified as being in the "normal" weight category, compared to 74.3% of girls. 13.5% of boys and 17.7% of girls were classified as being either "overweight" or "obese" (see *Table 69*).

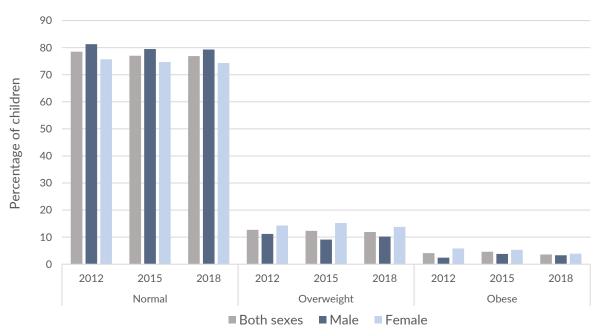
Table 69. Percentage of first class children in BMI categories "normal", "overweight", and "obese", by gender (2012–2018)

		2012			2015			2018	
	Normal	Overweight	Obese	Normal	Overweight	Obese	Normal	Overweight	Obese
Total	78.5	12.7	4.1	77.0	12.3	4.6	76.9	11.9	3.6
Gender									
Male	81.3	11.2	2.4	79.5	9.1	3.8	79.3	10.2	3.3
Female	75.7	14.3	5.8	74.7	15.2	5.3	74.3	13.8	3.9

Source: Childhood Obesity Surveillance Initiative

• The percentage of first class children classified in the "normal" weight category decreased, from 78.5% in 2012 to 76.9% in 2018.

Figure 15. Percentage of first class children in BMI categories "normal", "overweight", and "obese", by gender (2012–2018)



Source: Childhood Obesity Surveillance Initiative



Intellectual disability

Measure: The number of children with an intellectual disability registered for HSE funded disability services

Note: there was a change to data collection in 2022 resulting in an increase of registrations, see the appendix for more details.

- In 2022, there were 8,826 children with an intellectual disability registered for HSE disability services (see *Table 70*). This equates to 7.2 children per 1,000, registered as having an intellectual disability in 2022 (see *Table 70*).
- 5% of children registered as having an intellectual disability were aged 4 years and under, while 43.8% were aged 10–14 years (see *Table 70*).
- 67% of children registered as having an intellectual disability were boys and 32.7% were girls. This equates to a rate of 9.5 per 1,000 for boys and 4.9 per 1,000 for girls (see *Table 70*).
- 29.5% of children who were registered as having an intellectual disability were registered as having a moderate disability. (see *Table 70*).

Table 70. Number, percentage, and rate (per 1,000) of children registered as having an intellectual disability, by age, gender, and severity of disability (2020–2022)

		2020			2021			2022	
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	9,592	100	7.9	8,969	100	7.4	8,826	100	7.2
Age									
Under 5 years	654	6.8	2.1	495	5.5	1.6	440	5	1.5
5-9 years	2,558	26.7	7.3	2,235	24.9	6.5	2,145	24.3	6.3
10-14 years	4,017	41.9	11.3	3,932	43.8	10.8	3,864	43.8	10.3
15-17 years	2,363	24.6	11.9	2,307	25.7	11.6	2,377	26.9	11.5
Gender									
Male	6,451	67.3	10.4	6,012	67	9.7	5,914	67	9.5
Female	3,137	32.7	5.3	2,954	32.9	5.0	2,888	32.7	4.9
Not known	NA			NA			24	0.3	
Severity									
Borderline	315	3.3	0.3	267	3	0.2	253	2.9	0.2
Mild	2,439	25.4	2.0	2,231	24.9	1.8	2,140	24.2	1.8
Moderate	2,626	27.4	2.2	2,446	27.3	2.0	2,603	29.5	2.1
Severe	683	7.1	0.6	645	7.2	0.5	641	7.3	0.5
Profound	133	1.4	0.1	115	1.3	0.1	113	1.3	0.1
Not verified	3,396	35.4	2.8	3,265	36.4	2.7	3,076	34.9	2.5

Rates calculated using population estimates for the relevant years

Notes: Changes to reporting in 2022 (see technical notes in Appendix 1).



• In 2022, rates of those registered with an intellectual disability ranged from 1.7 per 1,000 in Laois to 15.2 per 1,000 in Kerry (see *Table 71*).

Table 71. Number and rate (per 1,000) of children registered as having an intellectual disability, by administrative county (2022)

	No. of children	Rate
Total	8,826	7.2
County		
Carlow	138	9.3
Cavan	167	7.8
Clare	54	1.8
Cork	1439	10.5
Donegal	296	7.2
Dublin	2,051	6.4
Galway	540	8.3
Kerry	531	15.2
Kildare	414	6.4
Kilkenny	79	3.1
Laois	43	1.7
Leitrim	61	7.0
Limerick	190	4.0
Longford	31	2.6
Louth	313	8.9
Mayo	308	9.7
Meath	462	7.7
Monaghan	119	6.9
Offaly	51	2.5
Roscommon	247	14.5
Sligo	204	12.6
Tipperary	250	6.2
Waterford	271	9.1
Westmeath	68	2.9
Wexford	230	5.8
Wicklow	254	6.5

Rates calculated using administrative county population at Census 2022



Physical and sensory disability

Measure: The number of children with a physical and/or sensory disability registered for HSE funded disability services

Note: there was a change to data collection in 2022 resulting in an increase of registrations, see the appendix for more details.

- In 2022, there were 6,340 children with a physical and/or sensory disability registered for HSE disability services (see *Table 72*). This equates to a rate of 5.2 per 1,000 children.
- 9.6% of children registered as having a physical and/or sensory disability were aged 4 years and under, 24.2% were aged 5–9 years, 42.9% were aged 10–14 years, and the remaining 23.3% were aged 15–17 years (see *Table 72*).
- 65.1% of children registered as having a physical and/or sensory disability were boys and 34.8% were girls. This equates to a rate of 6.6 per 1,000 for boys and 3.7 per 1,000 for girls (see *Table 72*).
- In 2022, 78.4% of children who were registered as having a physical and/or sensory disability were registered as having either a physical disability or a neurological disability (59.1% and 19.3% respectively) (see *Table 72*).

Table 72. Number, percentage, and rate (per 1,000) of children registered as having a physical and/or sensory disability, by age, gender, and type of disability (2020–2022)

		2020			2021			2022	
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	7,252	100	6.0	5,873	100	4.9	6,340	100	5.2
Age									
Under 5 years	634	8.7	2.1	475	8.1	1.6	609	9.6	2.1
5-9 years	1,916	26.4	5.5	1,395	23.8	4.1	1,534	24.2	4.5
10-14 years	3,229	44.5	9.1	2,709	46.1	7.4	2,719	42.9	7.3
15-17 years	1,473	20.3	7.4	1,294	22	6.5	1,478	23.3	7.2
Gender									
Male	4,686	64.6	7.5	3,801	64.7	6.2	4,125	65.1	6.6
Female	2,566	35.4	4.3	2,072	35.3	3.5	2,204	34.8	3.7
Not known	NA			NA			11	0.2	
Type of disability									
Physical	4082	56.3	3.4	3,322	56.6	2.8	3,744	59.1	3.1
Neurological	1,339	18.5	1.1	1,184	20.2	1.0	1,222	19.3	1.0
Hearing loss/deafness	450	6.2	0.4	321	5.5	0.3	379	6	0.3
Visual	669	9.2	0.6	453	7.7	0.4	494	7.8	0.4
Speech/language	3,506	48.3	2.9	2,443	41.6	2.0	2,688	42.4	2.2
Deaf Blind-dual sensory	12	0.2	0.0	15	0.3	0.0	61	1	0.1

Rates calculated using population estimates for 2020 and 2021 and Census for 2022



• In 2022 rates of those registered as having a physical and/or sensory disability ranged from 1.0 per 1,000 in Clare, to 19.1 per 1,000 in Roscommon (see *Table 73*).

Table 73. Number and rate (per 1,000) of children registered as having a physical and/or sensory disability, by administrative county (2022)

	No. of children	Rate
Total	6,340	5.2
County		
Carlow	98	6.6
Cavan	199	9.3
Clare	32	1.0
Cork	376	2.7
Donegal	213	5.1
Dublin	1294	4.0
Galway	532	8.2
Kerry	75	2.1
Kildare	370	5.8
Kilkenny	98	3.8
Laois	33	1.3
Leitrim	38	4.4
Limerick	137	2.9
Longford	21	1.8
Louth	304	8.6
Mayo	409	12.8
Meath	815	13.5
Monaghan	143	8.3
Offaly	34	1.6
Roscommon	326	19.1
Sligo	126	7.8
Tipperary	98	2.4
Waterford	280	9.4
Westmeath	45	1.9
Wexford	152	3.9
Wicklow	92	2.4

Rates calculated using administrative county population at Census 2022



Child welfare and protection

Measure: The number of child welfare and protection referrals to Tusla, the Child and Family Agency

- In 2022 Q4, there were 21,473 child welfare and protection referrals to Tusla, the Child and Family Agency (see *Table 74*).
- 55.8% of these referrals related to welfare concerns (see *Table 74*).
- Overall, there was a 22.8% increase across the period between 2020 Q4 and 2022 Q4 (see *Table 74*).

Table 74. Number, percentage and rate (per 1,000) of child welfare and protection referrals to Tusla, by type of referral (2017 Q4 – 2022 Q4)

	2017 Q4	2018 Q4	2019 Q4	2020 Q4	2021 Q4	2022 Q4		
	No.	No.	No.	No.	No.	No.	%	Rate
Total	13,365	13,823	12,623	17,485	19,580	21,473	100.0	18.0
Type of referral								
Welfare issues	8,051	7,109	7,148	8,529	10,483	11,975	55.8	10.1
Physical abuse	1,336	1,630	1,609	1,808	1,878	2,026	9.4	1.7
Emotional abuse	2,051	2,996	2,080	2,525	2,959	3,243	15.1	2.7
Sexual abuse	708	929	861	1,072	1,159	1,314	6.1	1.1
Neglect	1,219	1,159	925	720	1,006	1,039	4.8	0.9
Not recorded	NA	NA	NA	2,831	2,095	1,876	8.7	1.6

Rates calculated using population at Census 2016

Note: Starting in 2020, the number of referrals also includes cases not requiring a social work response (type "Not recorded") Source: Tusla, the Child and Family Agency



Table 75. Number and rate (per 1,000) of child welfare and protection referrals to Tusla, by administrative area (2020 Q4–2022 Q4)

	2020 Q4		2021	Q4	2022 Q4	
	No.	Rate	No.	Rate	No.	Rate
All Tusla regions	17,485	14.7	19,580	16.4	21,437	18.0
Tusla Dublin North East	4,541	16.5	5,009	18.2	5,656	20.6
Cavan/Monaghan	521	14.3	619	17	595	16.3
Dublin North	1,720	17.1	1,845	18.3	2,097	20.8
Dublin North City	1,036	23.1	1,244	27.7	1,325	29.5
Louth/Meath	1,264	13.6	1,301	14	1,639	17.6
Tusla Dublin Mid Leinster	5,323	15.6	5,961	17.5	6,607	19.4
Dublin South Central	1,363	20.8	1,259	19.2	1,654	25.2
Dublin South East/ Wicklow	686	7.9	842	9.7	819	9.4
Dublin South West/Kildare/West Wicklow	1,668	15.4	1,944	18	2,095	19.4
Midlands	1,606	20	1,916	23.9	2,039	25.4
Tusla South	4,432	14.8	4,698	15.7	5,180	17.3
Carlow/Kilkenny/South Tipperary	1,009	16	1,036	16.4	952	15.1
Cork	1,670	12.5	1,725	12.9	1,992	14.9
Kerry	488	14.1	505	14.6	619	17.9
Waterford/Wexford	1,265	18.5	1,432	20.9	1,617	23.6
Tusla West	3,189	11.6	3,912	14.2	3,994	14.5
Donegal	436	10.2	463	10.8	574	13.4
Galway/Roscommon	889	11.1	1,039	13	1,009	12.6
Mayo	399	12.5	429	13.4	424	13.3
Mid West	1,152	12	1,570	16.3	1,651	17.2
Sligo/Leitrim/West Cavan	313	13.3	411	17.4	336	14.3

Rates calculated using regional populations at Census of Population 2016

Note: Starting in 2020, the number of referrals also includes cases not requiring a social work response (type "Not recorded") Source: Tusla, the Child and Family Agency

• There were 18 referrals per 1,000 children in 2022 Q4. Rates ranged from 9.4 per 1,000 in Dublin South East/Wicklow to 29.5 per 1,000 in Dublin North City (see *Table 75*).

Social, Emotional, and Behavioural Outcomes



Participation in decision-making

Measure: The percentage of children aged 10–17 who report students at their school participate in making the school rules

- In 2018, 32.6% of children aged 10–17 reported that students at their school participate in making the school rules. This decreased between 2014 and 2018 (see *Table 76*).
- Among individual population groups, when compared to all other children, children with a disability and/or chronic illness were less likely to report students at their school participate in making the school rules (see *Table 76*).

Table 76. Percentage of children aged 10–17 who reported that students at their school participate in making the school rules, by population group (2014–2018)

	2014	2018
All children	35.5	32.6
Traveller status		
Traveller children	47.7	40.0
All children except Traveller children	35.2	32.4
Immigrant status		
Immigrant children	31.2	33.2
All children except immigrant children	36.2	28.3
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	35.3	31.1
All children except those with a disability and/or chronic illness	35.5	33.1

- A lower percentage of males than females reported that students at their school participate in making the school rules (see *Table 77*).
- On average, the percentage of children who reported that students at their school participate in making the school rules decreased with age (see *Table 77*).
- The percentage of children who reported that students at their school participate in making the school rules was lowest among the high social class group (see Table 77).



Table 77. Percentage of children aged 10–17 who reported that students at their school participate in making the school rules, by age, gender, and social class (2014–2018)

		2014			2018	
	Male	Female	Total	Male	Female	Total
All children	36.0	34.9	35.5	31.9	33.4	32.6
Age						
10 years	49.6	53.3	51.4	45.6	48.7	47.1
11 years	55.3	55.4	55.3	39.9	46.5	43.0
12 years	46.2	49.9	47.9	35.2	43.2	39.2
13 years	39.2	37.5	38.3	30.0	33.4	31.8
14 years	28.5	29.3	28.9	23.8	23.1	23.4
15 years	24.6	17.3	20.9	18.9	16.2	17.4
16 years	20.3	19.3	19.8	15.2	14.8	15.0
17 years	21.0	15.3	18.5	12.5	14.4	13.5
Social class						
High	34.9	32.9	33.9	30.5	32.1	31.4
Middle	36.3	35.3	35.8	32.7	32.6	32.6
Low	35.6	41.3	38.4	33.6	35.3	34.5

Source: HBSC Survey

• The percentage of children who reported that students at their school participate in making the school rules ranged from 28.1% in the Border region to 37% in the South-West (see *Table 78*).

Table 78. Percentage of children aged 10–17 who reported that students at their school participate in making the school rules, by NUTS region (2014–2018)

	2014	2018
State	35.5	32.6
NUTS region		
Border	33.4	28.1
Midland	33.0	30.9
West	32.9	31.0
Dublin	36.7	32.6
Mid-East	37.6	31.6
Mid-West	33.2	31.3
South-East	37.3	33.5
South-West	36.2	37.0



Reading as a leisure activity

Measure: The percentage of children aged 15 who report that reading is one of their favourite hobbies

- In 2018, 30.8% of children aged 15 reported that reading is one of their favourite hobbies (see *Table 79*).
- 40.2% of immigrant children aged 15 reported that reading is one of their favourite hobbies, compared to 28.8% for non-immigrant students.

Table 79. Percentage of children aged 15 who reported that reading is one of their favourite hobbies, by population group (2018)

	%
All children	30.8
Immigrant status	
Immigrant children	40.2
All children except immigrant children	28.8

Source: OECD-Pisa Survey

- 39.3% of girls aged 15 reported that reading is one of their favourite hobbies, compared with 22.1% of boys.
- 38.5% of children in the high socio-economic status category reported that reading is one of their favourite hobbies. The corresponding figure for those in the medium socio-economic status category was 28.6%, and for those in the low socio-economic class category, it was 25.2% (see *Table 80*).

Table 80. Percentage of children aged 15 who reported that reading is one of their favourite hobbies, by gender and social class (2018)

	2006	2009	2012	2018
All children	42.6	31.7	38.6	30.8
Gender				
Male	32.7	23.4	30.0	22.1
Female	52.0	40.2	47.3	39.3
Social class				
High	50.0	39.2	46.3	38.5
Medium	41.8	31.7	37.6	28.6
Low	36.5	25.3	31.6	25.2

^{*2022} update not available at time of publication

^{*2022} update not available at time of publication



Smoking cigarettes: Weekly smoking

Measure: The percentage of children aged 10-17 who report smoking cigarettes every week

- In 2018, 2.4% of children aged 10–17 reported smoking cigarettes every week. This decreased between 2014 and 2018 (see *Table 81*).
- Among individual population groups, when compared to all other children, Traveller children and immigrant children were more likely to report smoking cigarettes every week (see *Table 81*).
- Traveller children were the population group with the highest percentage who reported smoking cigarettes every week (see *Table 81*).

Table 81. Percentage of children aged 10–17 who reported smoking cigarettes every week, by population group (2014–2018)

	2014	2018
All children	5.3	2.4
Traveller status		
Traveller children	11.4	9.1
All children except Traveller children	5.2	2.2
Immigrant status		
Immigrant children	5.2	4.2
All children except immigrant children	5.3	2.2
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	6.9	3.1
All children except those with a disability and/or chronic illness	4.9	2.2

- A lower percentage of females than males reported smoking cigarettes every week (see *Table 82*).
- On average, the percentage of children who reported smoking cigarettes every week increased with age (see *Table 82*).
- The percentage of children who reported smoking cigarettes every week was highest among the low social class group (see *Table 82*)



Table 82. Percentage of children aged 10–17 who reported smoking cigarettes every week, by age, gender, and social class (2014–2018)

	2014		2018			
	Male	Female	Total	Male	Female	Total
All children	6.0	4.5	5.3	2.6	2.3	2.4
Age						
10 years	0.5	0.4	0.4	2.8	2.3	0.3
11 years	1.8	0.9	1.3	3.6	2.3	0.4
12 years	2.6	1.8	2.3	3.1	3.0	0.5
13 years	4.3	2.0	3.1	3.0	2.1	1.1
14 years	4.5	4.0	4.3	2.7	2.5	2.9
15 years	8.4	7.5	7.9	3.2	3.0	5.5
16 years	13.7	10.0	11.9	1.9	2.0	8.2
17 years	14.3	11.7	13.2	2.2	2.2	7.7
Social class						
High	4.8	3.1	4.0	1.9	1.4	1.6
Middle	5.2	4.2	4.7	2.4	2.3	2.3
Low	6.1	6.2	6.1	3.8	3.0	3.4

Source: HBSC Survey

• The percentage of children who reported smoking cigarettes every week ranged from 2.0% in the South-East to 3.1% in the Mid-West (see *Table 83*).

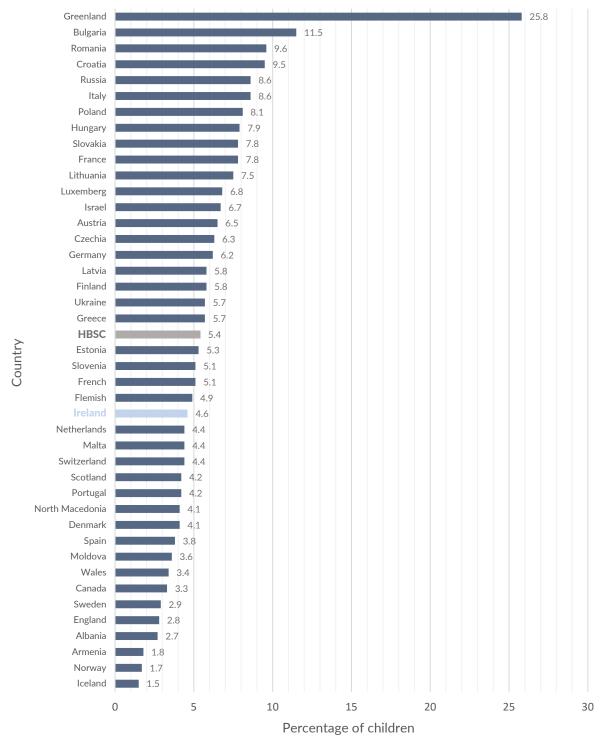
Table 83. Percentage of children aged 10–17 who reported smoking cigarettes every week, by NUTS region (2014–2018)

	2014	2018
State	5.3	2.4
NUTS region		
Border	6.5	2.6
Midland	5.7	2.9
West	4.5	3.0
Dublin	5.6	2.5
Mid-East	5.2	2.6
Mid-West	3.7	3.1
South-East	5.1	2.0
South-West	5.2	2.2



• Across 45 countries/regions, the average percentage of children who reported smoking cigarettes every week was 5.4% (see *Figure 16*). This ranged from 1.5% in Iceland to 25.8% in Greenland. The corresponding percentage in Ireland was 4.6%. This was below the international HBSC average.

Figure 16. Percentage of children aged 11, 13, and 15 who reported smoking cigarettes every week, by country (2014)



Note: This indicator was last collected internationally in 2014.



Smoking cigarettes: Never smoking

Measure: The percentage of children aged 10-17 who report never having smoked cigarettes

- In 2018, 89.4% of children aged 10–17 reported never having smoked cigarettes. This increased between 2014 and 2018 (see *Table 84*).
- Among individual population groups, when compared to all other children, Traveller children, immigrant children, and children with a disability and/or chronic illness were less likely to report never having smoked cigarettes (see *Table 84*).
- Immigrant children were the population group with the lowest percentage who reported never having smoked cigarettes (see *Table 84*).

Table 84. Percentage of children aged 10–17 who reported never having smoked cigarettes, by population group (2014–2018)

	2014	2018
All children	84.2	89.4
Traveller status		
Traveller children	75.1	84.5
All children except Traveller children	84.4	89.5
Immigrant status		
Immigrant children	83.0	84.2
All children except immigrant children	84.5	90.1
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	82.1	86.1
All children except those with a disability and/or chronic illness	84.8	90.2

- A lower percentage of females than males reported never having smoked cigarettes (see *Table 85*).
- On average, the percentage of children who reported never having smoked cigarettes decreased with age (see *Table 85*).
- The percentage of children who reported never having smoked cigarettes was lowest among the low social class group (see *Table 85*).



Table 85. Percentage of children aged 10–17 who reported never having smoked cigarettes, by age, gender, and social class (2014–2018)

	2014			2018		
	Male	Female	Total	Male	Female	Total
All children	83.7	84.8	84.2	89.5	89.3	89.4
Age						
10 years	94.7	96.2	95.5	100.0	100.0	100.0
11 years	95.8	98.5	97.1	98.4	99.7	99.0
12 years	95.2	96.6	95.8	98.0	98.9	98.4
13 years	90.8	93.7	92.3	94.4	96.0	95.3
14 years	85.5	86.5	86.0	91.0	89.6	90.3
15 years	77.6	81.0	79.3	83.0	81.8	82.3
16 years	70.7	66.8	68.8	74.2	73.6	73.8
17 years	67.4	63.9	65.8	66.1	68.2	67.2
Social class						
High	83.3	86.8	85.1	89.7	89.5	89.6
Middle	86.2	85.1	85.7	90.0	89.8	89.9
Low	84.4	81.1	82.8	87.7	88.4	88.0

Source: HBSC Survey

• The percentage of children who reported never having smoked cigarettes ranged from 85.0% in the South-East to 91.4% in the Mid-East (see *Table 86*).

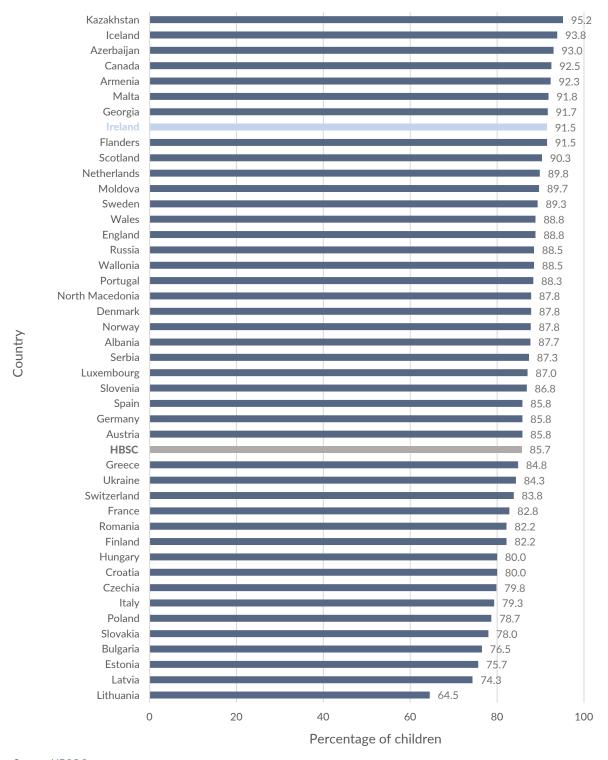
Table 86. Percentage of children aged 10–17 who reported never having smoked cigarettes, by NUTS region (2014–2018)

	2014	2018
State	84.2	89.4
NUTS region		
Border	83.0	89.8
Midland	83.1	88.4
West	84.6	89.3
Dublin	83.7	90.5
Mid-East	84.4	91.4
Mid-West	88.5	88.4
South-East	83.1	85.0
South-West	84.8	87.0



 Across 45 countries/regions, the average percentage of children who reported never having smoked cigarettes was 85.6% (see Figure 17). This ranged from 64.5% in Lithuania to 95.2% in Kazakhstan. The corresponding percentage in Ireland was 91.5%. This was above the international HBSC average.

Figure 17. Percentage of children aged 11, 13, and 15 who reported never having smoked cigarettes, by country (2018)





Alcohol use: Drunkenness

Measure: The percentage of children aged 10–17 who report having been drunk at least once in the past 30 days

- In 2018, 6.9% of children aged 10–17 reported having been drunk at least once in the past 30 days. This decreased between 2014 and 2018 (see *Table 87*).
- Among individual population groups, when compared to all other children, Traveller children and children with a disability and/or chronic illness were more likely to report having been drunk at least once in the past 30 days (see *Table 87*).
- Traveller children were the population group with the highest percentage who reported having been drunk at least once in the past 30 days (see *Table 87*).

Table 87. Percentage of children aged 10–17 who reported having been drunk at least once in the past 30 days, by population group (2014–2018)

	2014	2018
All children	10.0	6.9
Traveller status		
Traveller children	16.8	12.9
All children except Traveller children	9.9	6.8
Immigrant status		
Immigrant children	8.9	7.2
All children except immigrant children	10.2	6.8
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	11.6	8.4
All children except those with a disability and/or chronic illness	9.6	6.5

- The same percentage of females and males reported having been drunk at least once in the past 30 days (see *Table 88*).
- On average, the percentage of children who reported having been drunk at least once in the past 30 days increased with age (see *Table 88*).
- The percentage of children who reported having been drunk at least once in the past 30 days was highest among the low social class group (see *Table 88*).



Table 88. Percentage of children aged 10–17 who reported having been drunk at least once in the past 30 days, by age, gender, and social class (2014–2018)

	2014		2018			
	Male	Female	Total	Male	Female	Total
All children	10.5	9.6	10.0	6.9	6.9	6.9
Age						
10 years	0.0	0.0	0.0	0.0	0.0	0.0
11 years	0.5	0.3	0.4	0.4	0.1	0.0
12 years	0.4	0.7	0.6	0.3	0.4	0.0
13 years	1.7	1.4	1.5	1.9	1.4	1.7
14 years	5.7	6.0	5.8	4.2	4.3	4.2
15 years	11.6	10.4	11.0	10.1	10.4	10.3
16 years	25.9	22.2	24.1	19.4	19.0	19.2
17 years	32.2	36.3	34.0	32.3	29.0	30.6
Social class						
High	10.7	9.0	9.8	7.2	6.6	6.8
Middle	9.3	9.4	9.3	5.7	7.3	6.6
Low	7.8	10.0	8.9	7.7	7.2	7.4

Source: HBSC Survey

• The percentage of children who reported having been drunk at least once in the past 30 days ranged from 5.1% in the Mid-East to 9.3% in the South-West (see *Table 89*).

Table 89. Percentage of children aged 10–17 who reported having been drunk at least once in the past 30 days, by NUTS region (2014–2018)

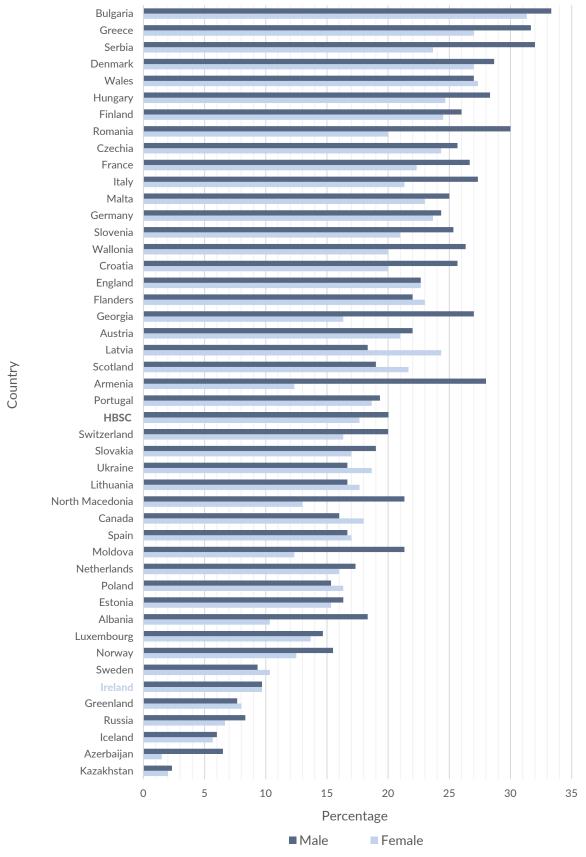
	2014	2018
State	10.0	6.9
NUTS region		
Border	12.1	8.5
Midland	7.2	5.9
West	9.5	5.7
Dublin	11.4	7.1
Mid-East	8.9	5.1
Mid-West	11.3	6.3
South-East	10.5	9.0
South-West	7.3	9.3

Source: HBSC Survey

• Across 45 countries/regions, the average percentage of children who reported having drunk alcohol at least once in the past 30 days was 20.0% for boys and 17.7% for girls (see *Figure 18*). This ranged from 2.3% and 2.0%, respectively, in Kazakhstan, to 33.3% and 31.3%, respectively, in Bulgaria. The corresponding percentage in Ireland was 9.7% for both boys and girls. This was below the international HBSC average.



Figure 18. Percentage of children aged 11, 13, and 15 who reported having drunk alcohol in the last 30 days, by country (2018)





Alcohol use: Never drinking

Measure: The percentage of children aged 10-17 who report never having had an alcoholic drink

- In 2018, 69.4% of children aged 10–17 reported never having had an alcoholic drink. This increased between 2014 and 2018 (see *Table 90*).
- Among individual population groups, when compared to all other children, immigrant children and children with a disability and/or chronic illness were less likely to report never having had an alcoholic drink (see *Table 90*).
- Immigrant children were the population group with the lowest percentage who reported never having had an alcoholic drink (see *Table 90*).

Table 90. Percentage of children aged 10–17 who reported never having had an alcoholic drink, by population group (2014–2018)

	2014	2018
All children	58.4	69.4
Traveller status		
Traveller children	60.4	74.7
All children except Traveller children	58.4	69.3
Immigrant status		
Immigrant children	56.6	63.9
All children except immigrant children	58.7	70.3
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	54.6	64.1
All children except those with a disability and/or chronic illness	59.3	70.8

- A lower percentage of males than females reported never having had an alcoholic drink (see Table 91).
- On average, the percentage of children who reported never having had an alcoholic drink decreased with age (see *Table 91*).
- The percentage of children who reported never having had an alcoholic drink was lowest among the high social class group (see *Table 91*).



Table 91. Percentage of children aged 10–17 who reported never having had an alcoholic drink, by age, gender, and social class (2014–2018)

	2014				2018	
	Male	Female	Total	Male	Female	Total
All children	55.8	61.0	58.4	69.1	69.8	69.4
Age						
10 years	88.0	93.4	90.8	92.8	98.9	95.8
11 years	80.4	90.2	85.4	90.4	96.9	93.5
12 years	82.2	87.9	84.8	88.9	93.9	91.4
13 years	72.4	79.6	76.1	83.0	85.9	84.6
14 years	58.5	64.8	61.7	69.3	69.6	69.5
15 years	42.9	46.1	44.5	50.3	51.2	50.8
16 years	27.9	29.9	28.9	31.7	30.9	31.3
17 years	17.7	14.9	16.5	22.9	16.4	19.5
Social class						
High	53.6	61.7	57.8	68.0	69.1	68.6
Middle	58.2	61.8	59.9	69.3	69.9	69.6
Low	56.2	59.5	57.8	68.8	70.5	69.7

• The percentage of children who reported never having had an alcoholic drink ranged from 61.2% in the Mid-West to 75.1% in the South-West (see *Table 92*).

Table 92. Percentage of children aged 10–17 who reported never having had an alcoholic drink, by NUTS region (2014–2018)

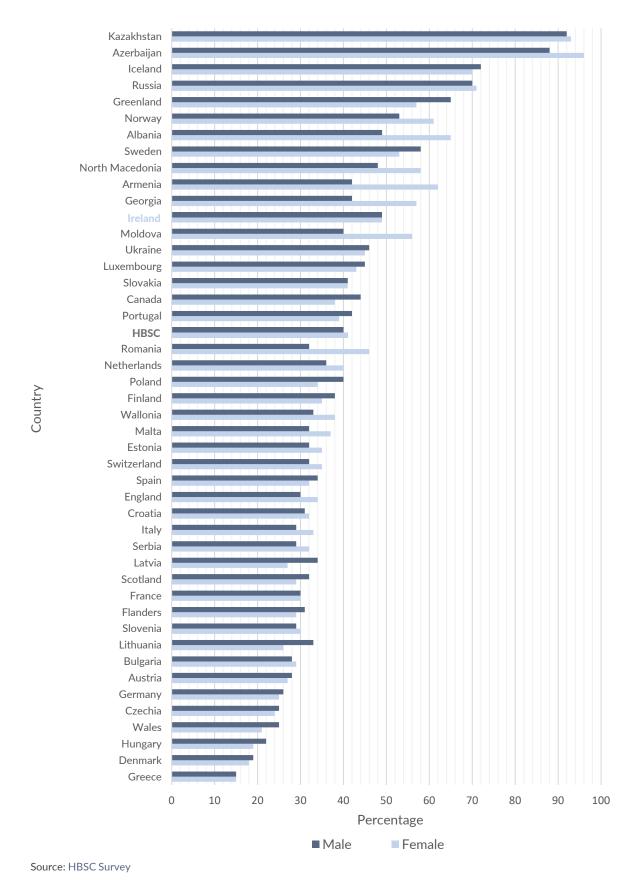
	2014	2018
State	58.4	69.4
NUTS region		
Border	59.3	67.6
Midland	54.9	67.0
West	58.4	66.9
Dublin	57.8	70.4
Mid-East	57.9	66.8
Mid-West	59.5	61.2
South-East	54.0	70.9
South-West	63.5	75.1

Source: HBSC Survey

 Across 45 countries/regions, the average percentage of children who reported never having had an alcoholic drink was 41.0% for girls and 40.0% for boys (see *Figure 19*). This ranged from 15% for both girls and boys in Greece, to 93.0% and 92.0% for girls and boys, respectively, in Kazakhstan. The corresponding percentage in Ireland was 49% for both boys and girls. This was above the international HBSC average.



Figure 19. Percentage of children aged 15 who reported never having had an alcoholic drink, by country (2018)





Cannabis use

Measure: The percentage of children aged 10–17 who report having taken cannabis at least once in their lifetime

- In 2018, 7.8% of children aged 10–17 reported having taken cannabis at least once in their lifetime. This decreased between 2014 and 2018 (see *Table 93*).
- Among individual population groups, when compared to all other children, Traveller children, immigrant children, and children with a disability and/or chronic illness were more likely to report having taken cannabis at least once in their lifetime (see *Table* 93).
- Traveller children were the population group with the highest percentage who reported having taken cannabis at least once in their lifetime (see *Table 93*).

Table 93. Percentage of children aged 10–17 who reported having taken cannabis at least once in their lifetime by population group (2014–2018)

	2014	2018
All children	8.8	7.8
Traveller status		
Traveller children	18.2	12.0
All children except Traveller children	8.6	7.7
Immigrant status		
Immigrant children	10.9	12.0
All children except immigrant children	8.4	7.1
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	10.1	10.0
All children except those with a disability and/or chronic illness	8.5	7.2

- A lower percentage of females than males reported having taken cannabis at least once in their lifetime (see *Table 94*).
- On average, the percentage of children who reported having taken cannabis at least once in their lifetime increased with age (see *Table 94*).
- The percentage of children who reported having taken cannabis at least once in their lifetime was highest among the high social class group (see *Table 94*).



Table 94. Percentage of children aged 10–17 who reported having taken cannabis at least once in their lifetime, by age, gender, and social class (2014–2018)

		2014			2018	
	Male	Female	Total	Male	Female	Total
All children	10.7	6.9	8.8	8.9	6.7	7.8
Age						
10 years	0.7	0.0	0.3	0.0	0.0	0.0
11 years	0.8	0.5	0.7	0.3	0.0	0.2
12 years	1.8	0.3	1.1	0.5	0.6	0.6
13 years	3.6	2.5	3.0	2.8	1.2	1.9
14 years	5.9	4.5	5.2	7.0	5.2	6.0
15 years	14.1	8.2	11.1	15.7	11.2	13.2
16 years	23.4	15.5	19.6	25.0	18.5	21.5
17 years	28.5	21.9	25.5	32.6	23.4	27.9
Social class						
High	10.1	5.7	7.8	9.1	6.8	7.8
Middle	10.3	6.4	8.4	7.5	6.0	6.7
Low	7.7	7.7	7.7	9.4	6.0	7.5

• The percentage of children who reported having taken cannabis at least once in their lifetime ranged from 6.1% in the West and Mid-West to 11.3% in the South-East (see *Table 95*).

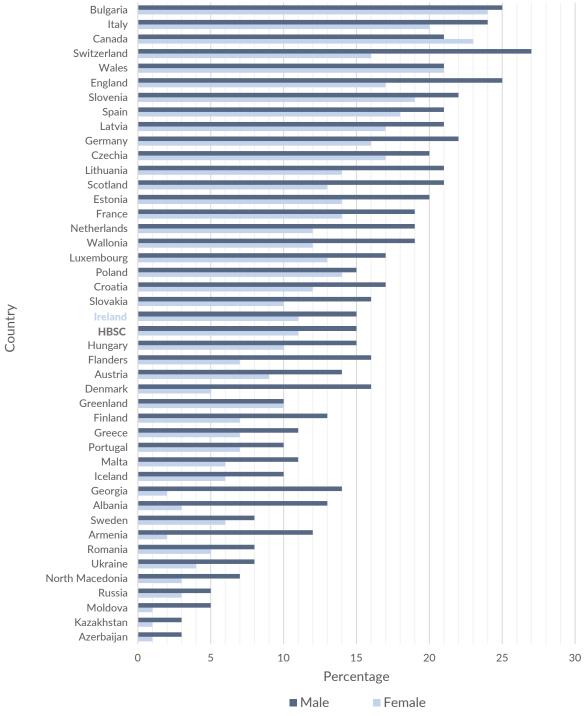
Table 95. Percentage of children aged 10–17 who reported having taken cannabis at least once in their lifetime, by NUTS region (2014–2018)

	2014	2018
State	8.8	7.8
NUTS region		
Border	8.9	7.2
Midland	8.8	7.3
West	5.9	6.1
Dublin	11.2	8.8
Mid-East	10.5	7.2
Mid-West	6.7	6.1
South-East	8.8	11.3
South-West	6.5	8.4



Across 45 countries/regions, the average percentage of children who reported having taken cannabis at least once in their lifetime was 15.0% for boys and 11.0% for girls (see Figure 20). This ranged from 3% and 1%, respectively, in Azerbaijan, to 25% and 24%, respectively, in Bulgaria. The corresponding percentage in Ireland was 15% for boys and 11% for girls. This was above the international HBSC average.

Figure 20. Percentage of children aged 15 who reported having ever used cannabis, by country (2018)





Sexual health and behaviour: Teen births

Measure: The number of births to mothers aged 15-17

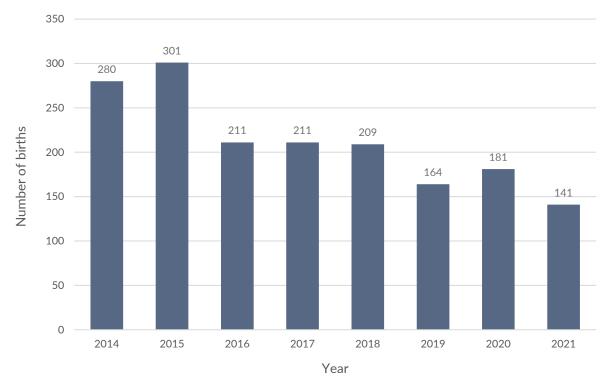
- In 2021, there were 141 births to mothers aged 15–17 (see *Table 96*).
- Over the four-year period 2018 to 2021 the number of births to mothers aged 15–17 decreased by 32.5% (see *Table 96*).

Table 96. Number and rate of births (per 1,000 of female population), by mother's age (2018–2021)

	20	18 2019		2020		2021		
	No.	Rate	No.	Rate	No.	Rate	No.	Rate
All ages 15+	61,022	31.0	59,294	29.5	56,812	27.8	60,573	29.6
Mother's age								
15-17 years	209	2.2	164	1.7	181	1.9	141	1.5
18-24 years	5,817	28.5	5,378	25.5	4,989	23.1	4,847	22.4
25 years and over	54,996	32.9	53,752	31.6	51,642	29.8	55,585	32.1

Source: Vital Statistics (CSO)

Figure 21. Number of births to mothers aged 15–17 (2014–2021)



Source: Vital Statistics (CSO)



• Overall 2.3 births per 1,000 were to mothers aged 15–17 in 2021 (see *Table 97*). This rate was highest in Westmeath, at 4.1, and lowest in Leitrim, which had no births to 15–17 year olds in 2021.

Table 97. Number and rate (per 1,000) of births to mothers aged 15-17, by county (2021)

	No. of births to 15–17 year olds	No. of births to all ages 15+	Rate of births to 15–17 year olds*
Total	141	60,573	2.3
County			
Carlow	3	768	3.9
Cavan/Monaghan	2	1,829	1.1
Clare	2	1,375	1.5
Cork	6	6,763	0.9
Donegal	3	1,755	1.7
Dublin	60	17,538	3.4
Galway	2	3,231	0.6
Kerry	3	1,703	1.8
Kildare	7	3,100	2.3
Kilkenny	4	1,121	3.6
Laois/Offaly	6	2,052	2.9
Leitrim	0	412	0.0
Limerick	4	2,395	1.7
Longford	1	549	1.8
Louth	6	1,677	3.6
Mayo	3	1,515	2.0
Meath	8	2,847	2.8
Roscommon/Sligo	1	1,561	0.6
Tipperary	4	2,045	2.0
Waterford	1	1,398	0.7
Westmeath	5	1,231	4.1
Wexford	6	1,830	3.3
Wicklow	4	1,841	2.2

Source: Vital Statistics (CSO) *Rate calculated per 1,000 births



Sexual health and behaviour: Sexual activity

Measure: The percentage of children aged 15–17 who report having ever had sex

- In 2018, 24.8% of children aged 15–17 reported having ever had sex. This decreased between 2014 and 2018 (see *Table 98*).
- Among individual population groups, when compared to all other children, Traveller children, immigrant children, and children with a disability and/or chronic illness were more likely to report having ever had sex (see *Table 98*).
- Traveller children were the population group with the highest percentage who reported having ever had sex (see *Table 98*).

Table 98. Percentage of children aged 15–17 who reported having ever had sex, by population group (2014–2018)

	2014	2018
All children	26.8	24.8
Traveller status		
Traveller children	54.7	57.1
All children except Traveller children	26.4	24.5
Immigrant status		
Immigrant children	29.1	26.2
All children except immigrant children	26.4	24.2
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	30.3	28.8
All children except those with a disability and/or chronic illness	25.9	24.0

- A lower percentage of females than males reported having ever had sex (see *Table 99*).
- Children aged 17 years were most likely to report having ever had sex and children aged 15 years were least likely (see *Table 99*).
- The percentage of children who reported having ever had sex was highest among the low social class group (see *Table 99*).



Table 99. Percentage of children aged 15–17 who reported having ever had sex, by age, gender, and social class (2014–2018)

	2014			2018			
	Male	Female	Total	Male	Female	Total	
All children	32.2	21.3	26.8	29.3	21.0	24.8	
Age							
15 years	25.9	13.6	19.6	23.1	12.3	16.9	
16 years	34.9	21.6	28.3	30.7	26.1	28.2	
17 years	37.9	36.1	37.1	38.6	33.0	35.7	
Social class							
High	26.4	18.4	22.3	26.7	17.9	21.8	
Middle	31.1	20.9	26.0	30.3	22.9	26.3	
Low	34.3	27.0	30.9	31.6	26.3	28.6	

• The percentage of children who reported having ever had sex ranged from 19.6% in the Mid-West to 32.8% in the South-West (see *Table 100*).

Table 100. Percentage of children aged 15–17 who reported having ever had sex, by NUTS region (2014–2018)

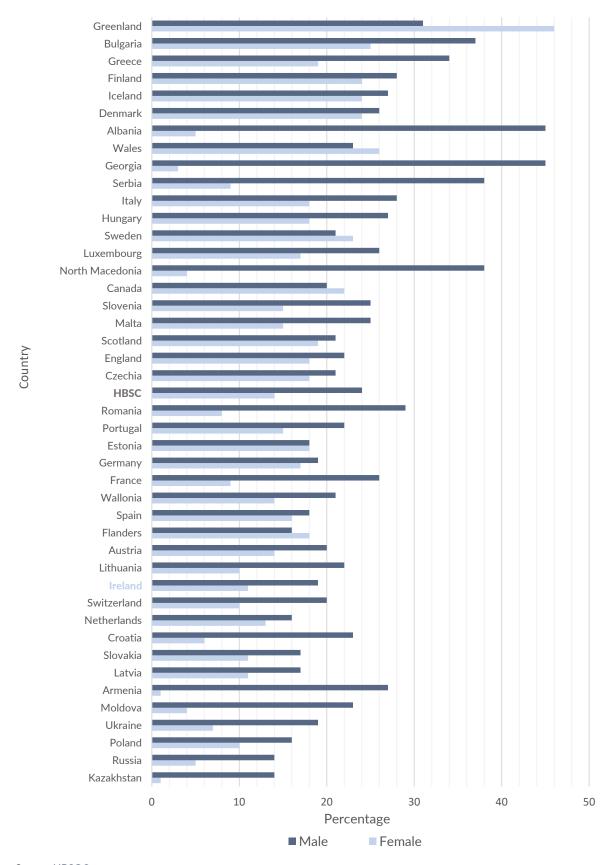
	2014	2018
State	26.8	24.8
NUTS region		
Border	26.9	26.4
Midland	23.9	27.8
West	24.1	25.9
Dublin	33.1	21.7
Mid-East	25.0	24.9
Mid-West	24.5	19.6
South-East	31.8	30.0
South-West	18.4	32.8

Source: HBSC Survey

• Across 45 countries/regions, the average percentage of children who reported having ever had sex was 24% for boys and 14% for girls (see *Figure 22*). This ranged from 14% and 1%, respectively, in Kazakhstan, to 31% and 46% respectively, in Greenland. The corresponding percentage in Ireland was 19% for boys and 11% for girls. This was below the international HBSC average.



Figure 22. Percentage of children aged 15 who reported having had sexual intercourse, by country (2018)





Self-esteem

Measure: The percentage of children aged 10–17 who report feeling happy with the way they are

- In 2018, 57.6% of children aged 10–17 reported feeling happy with the way they are. This changed only marginally between 2014 and 2018 (see *Table 101*).
- Among individual population groups, when compared to all other children, immigrant children and children with a disability and/or chronic illness were less likely to report feeling happy with the way they are (see *Table 101*).
- Children with a disability and/or chronic illness were the population group with the lowest percentage who reported feeling happy with the way they are (see *Table 101*).

Table 101. Percentage of children aged 10–17 who reported feeling happy with the way they are, by population group (2014–2018)

	2014	2018
All children	57.5	57.6
Traveller status		
Traveller children	62.4	63.0
All children except Traveller children	57.4	57.5
Immigrant status		
Immigrant children	56.1	52.2
All children except immigrant children	57.7	58.3
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	53.6	51.1
All children except those with a disability and/or chronic illness	58.5	59.4

- A lower percentage of females than males reported feeling happy with the way they are (see *Table 102*).
- On average, the percentage of children who reported feeling happy with the way they are decreased with age (see *Table 102*).
- The percentage of children who reported feeling happy with the way they are was lowest among the middle social class group (see *Table 102*).



Table 102. Percentage of children aged 10–17 who reported feeling happy with the way they are, by age, gender, and social class (2014–2018)

		2014			2018	
	Male	Female	Total	Male	Female	Total
All children	64.2	50.5	57.5	62.9	52.7	57.6
Age						
10 years	77.6	76.7	77.2	71.2	75.8	73.5
11 years	75.0	74.4	74.7	72.8	69.7	71.4
12 years	71.3	66.8	69.3	68.8	60.8	64.7
13 years	63.4	48.9	55.9	60.2	47.5	53.4
14 years	64.3	41.2	52.6	56.5	38.2	46.7
15 years	54.8	30.2	42.1	51.5	32.5	40.9
16 years	52.8	32.2	42.8	49.7	32.7	40.5
17 years	51.5	32.7	43.2	47.6	28.7	37.9
Social class						
High	65.1	51.4	58.1	63.6	54.5	58.7
Middle	66.5	50.6	58.6	62.4	51.0	56.6
Low	64.1	47.6	55.9	63.3	51.1	56.9

• The percentage of children who reported feeling happy with the way they are ranged from 52.8% in the West to 61.9% in Dublin (see *Table 103*).

Table 103. Percentage of children aged 10–17 who reported feeling happy with the way they are, by NUTS region (2014–2018)

	2014	2018
State	57.5	57.6
NUTS region		
Border	57.2	57.4
Midland	56.0	59.6
West	57.6	52.8
Dublin	55.5	61.9
Mid-East	59.5	61.6
Mid-West	59.4	55.2
South-East	56.4	55.0
South-West	59.6	58.0



Self-reported happiness

Measure: The percentage of children aged 10–17 who report being happy with their lives at present

- In 2018, 88.2% of children aged 10–17 reported being happy with their lives at present. This decreased slightly between 2014 and 2018 (see *Table 104*).
- Among individual population groups, when compared to all other children, immigrant children and children with a disability and/or chronic illness were less likely to report being happy with their lives at present (see *Table 104*).
- Children with a disability and/or chronic illness were the population group with the lowest percentage who reported being happy with their lives at present (see *Table* 104).

Table 104. Percentage of children aged 10–17 who reported being happy with their lives at present, by population group (2014–2018)

	2014	2018
All children	89.7	88.2
Traveller status		
Traveller children	89.2	88.6
All children except Traveller children	89.7	88.2
Immigrant status		
Immigrant children	88.1	84.8
All children except immigrant children	90.0	88.6
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	87.1	83.5
All children except those with a disability and/or chronic illness	90.4	89.4

- A lower percentage of females than males reported being happy with their lives at present (see *Table 105*).
- On average, the percentage of children who reported being happy with their lives at present decreased with age (see *Table 105*).
- The percentage of children who reported being happy with their lives at present was lowest among the low social class group (see *Table 105*).



Table 105. Percentage of children aged 10–17 who reported being happy with their lives at present, by age, gender, and social class (2014–2018)

	2014			2018			
	Male	Female	Total	Male	Female	Total	
All children	92.6	86.8	89.7	91.1	85.6	88.2	
Age							
10 years	94.8	95.2	95.0	95.6	95.9	95.8	
11 years	95.0	95.2	95.1	94.3	93.7	94.0	
12 years	96.0	92.5	94.4	93.1	91.9	92.5	
13 years	92.2	86.4	89.2	91.9	85.7	88.6	
14 years	91.9	82.2	87.0	88.3	78.3	82.8	
15 years	90.1	79.6	84.7	86.1	77.8	81.3	
16 years	89.4	81.7	85.7	86.5	77.6	81.6	
17 years	91.0	81.8	86.9	89.4	80.9	85.0	
Social class							
High	94.0	87.5	90.7	91.2	86.3	88.5	
Middle	93.0	88.2	90.7	91.5	85.0	88.2	
Low	90.2	84.3	87.3	89.6	83.9	86.5	

• The percentage of children who reported being happy with their lives at present ranged from 85.2% in Dublin to 90.5% in the Mid-East (see *Table 106*).

Table 106. Percentage of children aged 10–17 who reported being happy with their lives at present, by NUTS region (2014–2018)

	2014	2018
State	89.7	88.2
NUTS region		
Border	90.4	89.0
Midland	89.7	87.9
West	90.5	88.6
Dublin	88.7	85.2
Mid-East	90.0	90.5
Mid-West	89.5	89.4
South-East	88.7	89.3
South-West	91.1	89.3



Child and youth suicide

Measure: The number of suicides by children aged 10-17

- In 2021, there were 9 suicides by children aged 10–17 (see *Table 107*).
- Over the eight year period from 2014 to 2021, the number and rate (per 100,000) of suicides by children aged 10–17 was typically higher among boys (see *Table 107*).

Table 107. Number and rate (per 100,000) of suicides, by age and gender (2014-2021)

		10–17 years 18–24 years								
	Mal	е	Fema	ale	Ма	le	Fema	ale	10-24	years
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
2014	12	4.8	4	1.7	66	33.5	10	5.2	92	10.5
2015	14	5.5	1	0.4	33	16.6	10	5.2	58	6.5
2016	9	3.5	12	4.9	54	27.1	9	4.7	84	9.4
2017	12	4.6	7	2.8	39	19.2	14	7.2	72	7.9
2018	3	1.1	3	1.2	44	20.8	22	10.8	72	7.7
2019	13	4.8	7	2.7	43	20	14	6.7	77	8
2020	5	1.8	8	3	42	19	10	4.7	65	6.6
2021	7	2.4	2	0.7	43	19.2	11	5.1	63	6.3

Source: Vital Statistics (CSO)

• Overall, suicide accounted for 14.5% of deaths of children aged 10–17 in 2021.

Table 108. Suicides as a percentage of total deaths of children aged 10–17, by gender (2014–2021)									
	2014	2015	2016	2017	2018	2019	2020	2021	
Total	27.6	30.6	29.2	38	8.8	33.9	24.5	14.5	
Sex									
Male	28.6	35	21.4	37.5	7.3	31	15.2	17.1	
Female	25	111	40	38.9	111	41.2	40	9.5	

Source: Vital Statistics (CSO)



Self harm

Measure: The number of children aged 10-24 who presented at a hospital emergency department

- In 2020, the rate of children and young people aged 10–24 presenting at a hospital emergency department following self-harm was 375 per 100,000 (see *Table 109*).
- The rate for girls was 493 per 100,000 and the rate for boys was 261 per 100,000.
- In 2020 the highest rate of presentation to an emergency department following self-harm was among girls aged 15–19 years.

Table 109. Rate (per 100,000) of children aged 10–24 who presented at a hospital emergency department following self-harm, by gender and age (2011–2020)

		Male			Female				То	tal		
	10-14	15-19	20-24	10-24	10-14	15-19	20-24	10-24	10-14	15-19	20-24	10-24
2011	35	430	568	338	98	586	534	406	65	507	551	371
2012	40	368	533	303	119	617	520	409	79	490	527	356
2013	34	345	510	282	144	619	529	416	88	478	519	347
2014	49	381	544	305	160	678	534	442	104	524	538	372
2015	45	364	553	297	178	718	570	470	110	535	561	381
2016	53	377	516	294	160	760	583	483	106	563	549	386
2017	60	357	505	292	174	758	496	481	115	553	500	384
2018	73	377	543	320	196	766	544	496	133	568	543	406
2019	71	386	485	304	210	726	536	484	139	554	510	392
2020	71	316	422	261	234	779	485	493	151	544	453	375

Note: 2020 rates have been estimated due to missing data from one hospital

Source: National Suicide Research Foundation

Table 110. Rate (per 100,000) of children aged 10–24 who presented at a hospital emergency department following self-harm, by HSE region (2019)

	10-14	15-19	20-24	10-24
HSE region				
Dublin Mid-Leinster	123	575	463	389
Dublin North East	204	580	493	419
South	147	563	622	429
West	113	552	560	394

Source: National Suicide Research Foundation

- In 2019, Dublin North East had the highest rate (per 100,000) of children and young people aged 10–14 (204) and 15–19 (580) presenting at a hospital emergency department following self-harm.
- The South region had the highest rate of young people aged 20–24 (622) presenting at a hospital emergency department following self-harm and had the highest rates overall in the 10–24 age group (429).



Physical activity

Measure: The percentage of children aged 10–17 who report being physically active for at least 60 minutes per day on more than four days per week

- In 2018, 51.1% of children aged 10–17 reported being physically active for at least 60 minutes per day on more than four days per week. This changed only marginally between 2014 and 2018 (see *Table 111*).
- Among individual population groups, when compared to all other children, immigrant children and children with a disability and/or chronic illness were less likely to report being physically active for at least 60 minutes per day on more than four days per week (see *Table 111*).
- Immigrant children were the population group with the lowest percentage who reported being physically active for at least 60 minutes per day on more than four days per week (see *Table 111*).

Table 111. Percentage of children aged 10–17 who reported being physically active for at least 60 minutes per day on more than four days per week, by population group (2014–2018)

	2014	2018
All children	52.0	51.1
Traveller status		
Traveller children	60.1	53.9
All children except Traveller children	51.9	51.0
Immigrant status		
Immigrant children	47.9	43.4
All children except immigrant children	52.8	52.2
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	51.2	47.8
All children except those with a disability and/or chronic illness	52.3	52.0

- A lower percentage of females than males reported being physically active for at least 60 minutes per day on more than four days per week (see *Table 112*).
- On average, the percentage of children who reported being physically active for at least 60 minutes per day on more than four days per week decreased with age (see *Table 112*).
- The percentage of children who reported being physically active for at least 60 minutes per day on more than four days per week was lowest among the low social class group (see *Table 112*).



Table 112. Percentage of children aged 10–17 who reported being physically active for at least 60 minutes per day on more than four days per week, by age, gender, and social class (2014–2018)

	2014			2018			
	Male	Female	Total	Male	Female	Total	
All children	60.2	43.5	52.0	58.1	44.8	51.1	
Age							
10 years	63.4	56.7	59.9	72.7	61.5	67.1	
11 years	73.1	65.4	69.2	75.4	67.9	71.9	
12 years	75.2	60.9	68.8	67.5	60.9	64.1	
13 years	64.3	47.8	55.9	58.9	49.0	53.6	
14 years	58.3	39.7	48.9	51.0	36.4	43.2	
15 years	54.8	31.8	43.1	46.7	30.4	37.6	
16 years	49.3	30.6	40.2	48.3	29.3	38.1	
17 years	46.0	29.1	38.5	42.2	25.6	33.8	
Social class							
High	61.3	43.9	52.3	60.1	46.9	53.0	
Middle	60.3	44.3	52.4	57.7	42.6	50.0	
Low	57.9	43.1	50.5	53.6	41.4	47.0	

• The percentage of children who reported being physically active for at least 60 minutes per day on more than four days per week ranged from 46.5% in the Border region to 57.2% in the West (see *Table 113*).

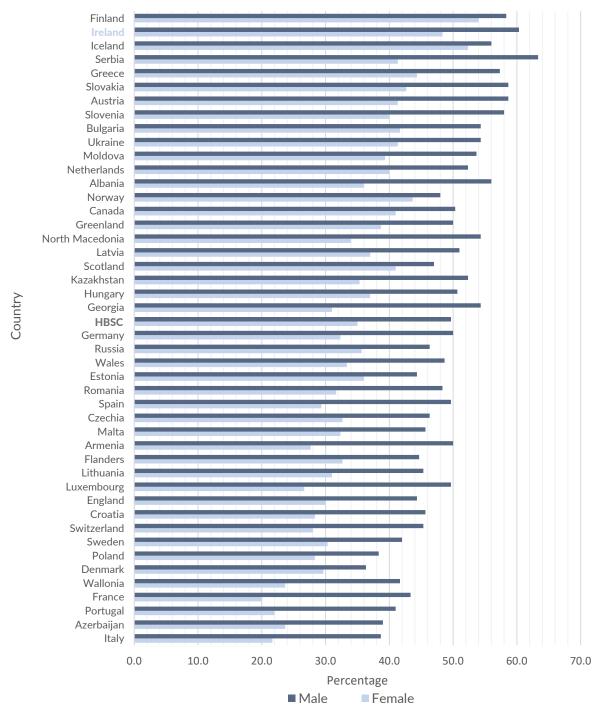
Table 113. Percentage of children aged 10–17 who reported being physically active for at least 60 minutes per day on more than four days per week, by NUTS region (2014–2018)

	2014	2018
State	52.0	51.1
NUTS region		
Border	48.6	46.5
Midland	47.7	48.0
West	53.3	57.2
Dublin	53.2	51.0
Mid-East	52.5	50.5
Mid-West	52.8	53.7
South-East	52.1	50.6
South-West	53.5	50.1



Across 45 countries/regions, the average percentage of children who reported exercising four times or more per week outside of school hours was 49.7% for boys and 35.0% for girls (see *Figure 23*). This ranged from 38.7% and 21.7%, respectively, in Italy, to 58.3% and 54.0%, respectively, in Finland. The corresponding percentage in Ireland was 60.3% for boys and 48.3% for girls. This was above the international HBSC average.

Figure 23. Percentage of children aged 11, 13, and 15 who reported exercising four times or more a week (outside school hours), by country (2018)





Nutrition: Breakfast consumption

Measure: The percentage of children aged 10-17 who report eating breakfast on five or more days per week

- In 2018, 78.2% of children aged 10–17 reported eating breakfast on five or more days per week. This increased between 2014 and 2018 (see *Table 114*).
- Among individual population groups, when compared to all other children, Traveller children, immigrant children, and children with a disability and/or chronic illness were less likely to report eating breakfast on five or more days per week (see *Table 114*).
- Traveller children were the population group with the lowest percentage who reported eating breakfast on five or more days per week (see *Table 114*).

Table 114. Percentage of children aged 10–17 who reported eating breakfast on five or more days per week, by population group (2014–2018)

	2014	2018
All children	76.7	78.2
Traveller status		
Traveller children	65.3	72.5
All children except Traveller children	76.9	78.3
Immigrant status		
Immigrant children	74.4	74.7
All children except immigrant children	77.2	78.7
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	75.0	76.4
All children except those with a disability and/or chronic illness	77.2	78.6

- A lower percentage of females than males reported eating breakfast on five or more days per week (see *Table 115*).
- On average, the percentage of children who reported eating breakfast on five or more days per week decreased with age (see *Table 115*).
- The percentage of children who reported eating breakfast on five or more days per week was lowest among the low social class group (see *Table 115*).



Table 115. Percentage of children aged 10–17 who reported eating breakfast on five or more days per week, by age, gender, and social class (2014–2018)

		2014			2018	
	Male	Female	Total	Male	Female	Total
All children	79.6	73.7	76.7	81.8	74.8	78.2
Age						
10 years	92.1	84.9	88.3	86.6	88.4	87.5
11 years	85.2	86.0	85.6	90.1	88.9	89.6
12 years	84.1	77.5	81.1	86.1	83.0	84.5
13 years	77.6	73.1	75.3	81.9	74.9	78.2
14 years	78.9	70.6	74.7	79.1	70.2	74.4
15 years	79.5	68.0	73.6	77.1	66.5	71.2
16 years	74.7	71.3	73.0	74.2	66.4	70.0
17 years	75.2	69.9	72.8	77.3	68.2	72.7
Social class						
High	83.6	79.1	81.3	86.4	79.1	82.5
Middle	81.8	72.8	77.3	81.0	74.7	77.7
Low	75.9	68.6	72.3	72.1	68.2	70.0

• The percentage of children who reported eating breakfast on five or more days per week ranged from 75.6% in the South-East to 82.0% in Dublin (see *Table 116*).

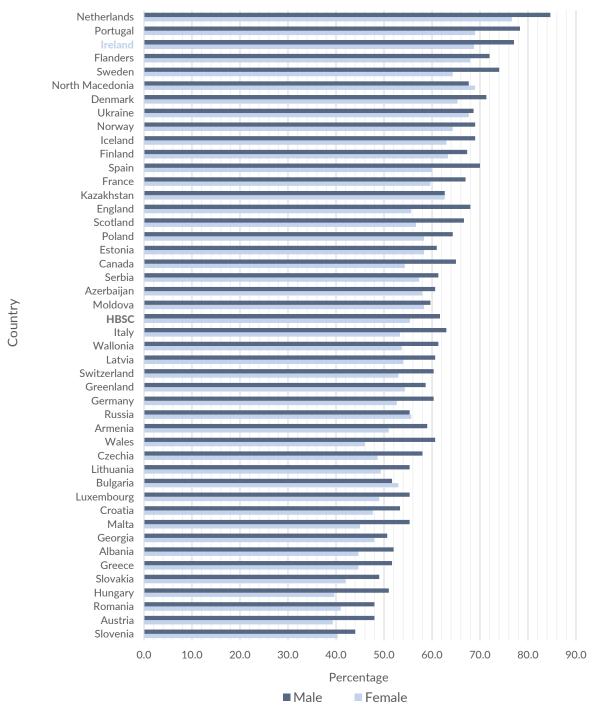
Table 116. Percentage of children aged 10–17 who reported eating breakfast on five or more days per week, by NUTS region (2014–2018)

	2014	2018
State	76.7	78.2
NUTS region		
Border	76.9	77.5
Midland	76.8	76.5
West	81.1	79.0
Dublin	73.5	82.0
Mid-East	77.9	81.3
Mid-West	76.8	76.9
South-East	74.8	75.6
South-West	79.7	79.2



Across 45 countries/regions, the average percentage of children who reported eating breakfast on five or more days per week was 61.7% for boys and 55.3% for girls (see Figure 24). This ranged from 44.0% and 40.3%, respectively, in Slovenia, to 84.7% and 76.7%, respectively, in the Netherlands. The corresponding percentage in Ireland was 77.0% for boys and 68.7% for girls. This was above the international HBSC average.

Figure 24. Percentage of children aged 11, 13, and 15 who reported eating breakfast every weekday, by country (2018)





Nutrition: Soft drinks

Measure: The percentage of children aged 10–17 who report drinking soft drinks that contain sugar at least once a day

- In 2018, 6.5% of children aged 10–17 reported drinking soft drinks that contain sugar at least once a day. This decreased between 2014 and 2018 (see *Table 117*).
- Among individual population groups, when compared to all other children, Traveller children, immigrant children, and children with a disability and/or chronic illness were more likely to report drinking soft drinks that contain sugar at least once a day (see *Table 117*).
- Traveller children were the population group with the highest percentage who reported drinking soft drinks that contain sugar at least once a day (see *Table 117*).

Table 117. Percentage of children aged 10–17 who reported drinking soft drinks that contain sugar at least once a day, by population group (2014–2018)

	2014	2018
All children	12.6	6.5
Traveller status		
Traveller children	23.5	16.5
All children except Traveller children	12.4	6.2
Immigrant status		
Immigrant children	10.6	7.0
All children except immigrant children	12.9	6.4
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	12.9	7.2
All children except those with a disability and/or chronic illness	12.5	6.2

- A lower percentage of females than males reported drinking soft drinks that contain sugar at least once a day (see *Table 118*).
- Children aged 14 years were most likely to report drinking soft drinks that contain sugar at least once a day and children aged 11 years were least likely (see *Table 118*).
- The percentage of children who reported drinking soft drinks that contain sugar at least once a day was highest among the low social class group (see *Table 118*).



Table 118. Percentage of children aged 10–17 who reported drinking soft drinks that contain sugar at least once a day, by age, gender, and social class (2014–2018)

		2014			2018	
	Male	Female	Total	Male	Female	Total
All children	13.8	11.3	12.6	7.1	5.9	6.5
Age						
10 years	11.6	9.4	10.5	5.9	4.3	5.1
11 years	6.1	9.2	7.6	4.8	4.0	4.4
12 years	8.7	12.7	10.5	5.2	6.2	5.7
13 years	16.0	10.4	13.1	6.9	6.5	6.7
14 years	18.3	12.5	15.4	10.9	7.4	9.0
15 years	18.1	13.3	15.7	8.3	6.0	7.0
16 years	16.3	12.0	14.2	9.1	7.6	8.3
17 years	14.2	10.6	12.6	6.3	3.9	5.1
Social class						
High	8.5	6.4	7.4	4.3	3.1	3.7
Middle	14.1	12.0	13.1	7.1	6.5	6.8
Low	16.2	17.9	17.0	10.2	9.9	10.0

• The percentage of children who reported drinking soft drinks that contain sugar at least once a day ranged from 4.4% in the Midland region to 9% in the Mid-East (see *Table 119*).

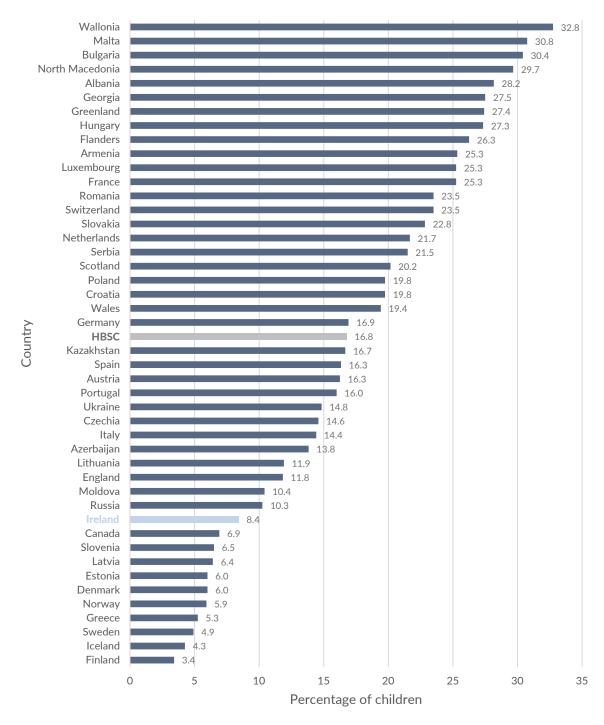
Table 119. Percentage of children aged 10–17 who reported drinking soft drinks that contain sugar at least once a day, by NUTS region (2014–2018)

	2014	2018
State	12.6	6.5
NUTS region		
Border	11.4	5.1
Midland	9.0	4.4
West	8.4	5.7
Dublin	16.8	6.7
Mid-East	11.8	9.0
Mid-West	11.2	7.0
South-East	14.6	8.3
South-West	10.6	5.1



 Across 45 countries/regions, the average percentage of children who reported drinking soft drinks that contain sugar at least once a day was 16.7% (see *Figure 25*). This ranged from 3.4% in Finland to 32.7% in Wallonia. The corresponding percentage in Ireland was 8.4%. This was below the international HBSC average.

Figure 25. Percentage of children aged 11, 13, and 15 who reported drinking soft drinks at least once a day, by country (2018)



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Department of Children, Equality, Disability, Integration, and Youth Block 1, Miesian Plaza, 50–58 Lower Baggot Street, Dublin 2 D02 XW14

Tel: +353 (0)1 647 3000

Email: dataandanalytics@equality.gov.ie

Web: www.gov.ie/dcediy

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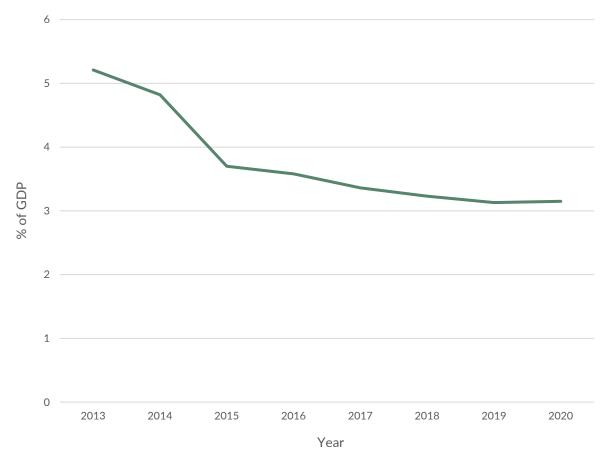


Public expenditure on education

Measure: Public expenditure on education

• Public expenditure on educational institutions at primary, secondary, and tertiary level decreased from 5.21% of gross domestic product (GDP) in 2013 to 3.15% in 2020 (see *Figure 26*).

Figure 26. Public expenditure on educational institutions at primary, secondary, and tertiary level (2013–2020)



Source: Eurostat

• In 2020, expenditure on educational institutions as a percentage of GDP ranged from 2.77% in Romania to 6.39% in Denmark. The EU-27 average expenditure in the EU-27 was 4.46%.



Table 120. Public expenditure on educational institutions between primary and tertiary levels as a percentage of GDP, by EU-27 country and UK (2016–2020)

	2016	2017	2018	2019	2020
EU-27	NA	4.17	4.2	4.19	4.46
Country					
Austria	4.89	4.75	4.62	4.33	4.88
Belgium	5.64	5.61	5.6	5.56	6
Bulgaria	2.91	3.16	3.14	3.26	3.54
Croatia	3.31	3.37	3.37	3.35	3.8
Cyprus	5.68	5.44	5.18	4.96	5.37
Czechia	3.07	3.23	3.67	3.92	4.05
Denmark	6.53	6.17	6.06	5.92	6.39
Estonia	4.13	3.93	4.16	4.17	4.32
Finland	5.79	5.34	5.19	5.29	5.49
France	4.72	4.76	4.72	4.68	4.96
Germany	4.04	4.01	4.07	4.14	4.5
Greece	2.63	3.16	3.34	3.3	NA
Hungary	3.7	3.48	3.39	3.23	3.19
Ireland	3.58	3.35	3.23	3.13	3.15
Italy	3.37	3.56	3.78	3.62	3.97
Latvia	3.91	3.57	3.49	3.62	3.73
Lithuania	3.26	3.05	3.04	3.1	3.49
Luxembourg	3.12	3.09	2.99	3.19	3.3
Malta	4.39	3.98	4.29	4.21	4.82
Netherlands	5.12	4.83	5.01	4.81	5.04
Poland	4	3.9	3.92	3.93	4.08
Portugal	4.3	4.5	4.23	4.27	4.47
Romania	2.28	2.38	2.49	2.78	2.77
Slovakia	3.39	3.4	3.42	3.66	4.1
Slovenia	3.99	3.97	4.12	4.1	4.49
Spain	3.64	3.62	3.58	3.65	4.22
Sweden	5.84	5.84	5.96	5.93	6.2
United Kingdom	5.2	5.14	4.94	4.99	NA

NA = not available Source: Eurostat



Table 121. Real current public expenditure on education, by educational level (2006–2018)

		student (€ at cons oy educational lev	Real current expenditure (€m	
	First	Second	Third	at constant 2019 prices)
2006	5,229	7,390	9,610	7,666
2007	5,796	8,430	10,329	7,997
2008	6,455	9,343	11,160	8,242
2009	6,684	9,417	10,565	8,530
2010	6,058	8,406	9,339	8,479
2011	6,134	8,468	8,797	8,388
2012	6,133	8,543	8,323	8,185
2013	5,959	7,837	7,702	8,286
2014	5,755	7,777	7,245	8,166
2015	5,973	7,835	6,999	8,451
2016	5,906	7,771	6,774	8,451
2017	6,342	8,208	7,092	8,703
2018	6,788	8,797	7,252	9,192

Source: Department of Education

Second level includes further education, e.g. post-leaving certificate programmes

- Real current public expenditure on education was €9,192,000,000 in 2018.
- In 2018, expenditure per student was highest for second level education (€8,797), followed by third level (€7,252), then first level (€6,788).
- Expenditure on education increased by 19.9% between 2006 and 2018.



At risk of poverty

Measure: The percentage of children at risk of poverty (i.e. living in households with an equivalised household disposable income below the 60% median)

- In 2022, 13.1% of the population were considered to be at risk of poverty (see *Table* 122).
- Children had a higher risk of being poor than did the population as a whole. 15.2% of children were at risk of being in poverty.
- The highest "at risk of poverty" rate for children occurred among those aged 12–17. 18.5% of children in this age group were at risk of poverty in 2022. This compares with a rate of 15.0% for those aged 6–11 and a rate of 11.5% for those aged 5 and under.
- For households in 2022, those comprising of 2 adults with 3+ children under 18 were most likely to be at risk of poverty, with a rate of 24.3%. This contrasts with a rate of 23.8% for households comprising of 1 adult with children under 18, and with 7.5% of households comprising of 2 adults with 1–2 children under 18 being at risk of poverty.

Table 122. Percentage of population at risk of poverty, by age and household composition (2018–2022)

	2018	2019	2020	2021	2022
All ages	14.0	12.8	13.2	11.6	13.1
Population under 18	15.9	15.3	16.4	13.6	15.2
Age					
Under 6 years	8.9	10.7	11.6	8.4	11.5
6-11 years	17.0	15.0	16.0	13.3	15.0
12-17 years	20.2	19.1	21.4	18.5	18.5
Household composition					
1 adult with children under 18	33.5	29.7	31.0	22.8	23.8
2 adults with 1–2 children under 18	8.4	11.5	8.2	7.0	7.5
2 adults with 3+ children under 18	16.3	13.8	16.6	17.3	24.3
Other households with children under 18	14.5	12.3	19.1	11.9	8.3
Households without children	13.6	11.2	11.1	11.4	13.3

Note: Break in series in 2020 (see technical notes in Appendix 1)

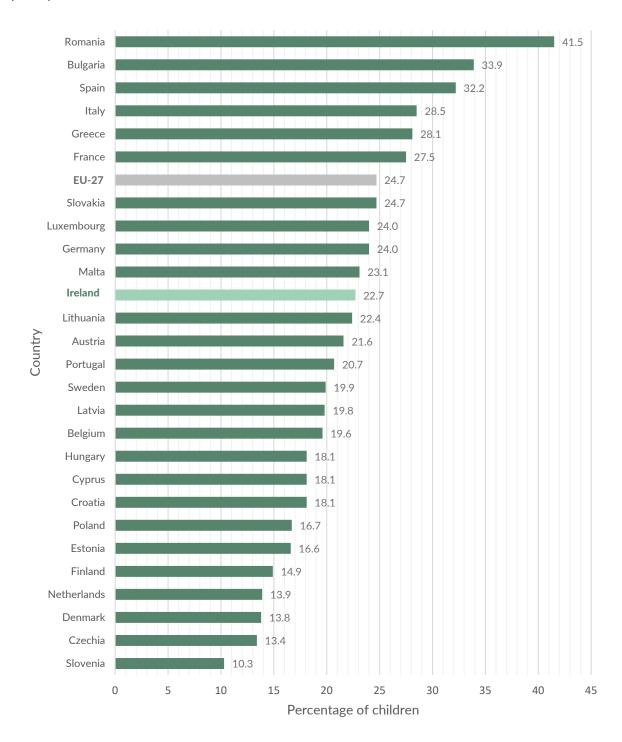
Source: CSO, SILC

• In 2022, the percentage of children at risk of poverty or social exclusion² across the EU-27 ranged from 10.3% in Slovenia to 41.5% in Romania. The corresponding percentage for Ireland was 22.7%. This was in line with the EU-27 average of 24.7% (see *Figure 27*).

² See technical notes in Appendix 1 for details



Figure 27. Percentage of children at risk of poverty or social exclusion, by EU-27 country (2022)



Source: Eurostat



Consistent poverty

Measure: The percentage of children experiencing consistent poverty (i.e. living in households with an equivalised household disposable income below the 60% median who experienced at least two forms of enforced deprivation)

- In 2022, 5.3% of the population experienced consistent poverty (see *Table 123*).
- Children were more likely to experience consistent poverty than the population as a whole. 7.5% of children experienced consistent poverty, compared with 5.3% of the population as a whole (see *Table 123*).
- The highest consistent poverty rate for children occurred among those aged 12–17. 9.6% of children in this age group experienced consistent poverty in 2022. This compares with a rate of 6.7% for those aged 6–11 and a rate of 5.8% for those aged 5 and under (see *Table 123*).
- For households in 2022, those comprising of 1 adult with children under 18 were most likely to experience consistent poverty, with a rate of 14.1%. This contrasts to a rate of 9.3% for households comprising of 2 adults with 3+ children under 18, and with 3.8% of households comprising of 2 adults with 1-2 children under 18 experiencing consistent poverty (see *Table 123*).

Table 123. Percentage of population experiencing consistent poverty, by age and household composition (2018–2022)

	2018	2019	2020	2021	2022
All ages	5.6	5.5	4.7	4	5.3
Population under 18	7.7	8.1	7.2	5.2	7.5
Age					
Under 6 years	4.8	5.9	4.9	2.8	5.8
6-11 years	9	9.7	7	6.2	6.7
12-17 years	8.8	8.3	9.7	6.4	9.6
Household composition					
1 adult with children under 18	19.2	17.1	19.3	13.1	14.1
2 adults with 1–2 children under 18	3.7	5.8	2	3.1	3.8
2 adults with 3+ children under 18	9.1	7.9	6.6	5.7	9.3
Other households with children under 18	3.8	4.2	7.9	1.9	4.9
Households without children	4.6	3.5	2.9	3.7	4.3

Note: Break in series in 2020 (see technical notes in Appendix 1)

Source: CSO SILC



Availability of housing for families with children

Measure: The number of households with children identified as being in need of social housing

- In 2022, there were 21,086 households with children identified as being in need of social housing.
- 53% (11,169) of households with children identified as being in need of social housing were households with one child, 30% (6,320) were households with two children, 11.3% (2,381) were households with three children, and the remaining 5.7% (1,216) were households with four or more children (see *Table 124*).

Table 124. Number and percentage of households with children identified as being in need of social housing, by number of children (2017–2022)

	2017	2018	2018 2019 2020 2021 202		2021		022	
	No.	No.	No.	No.	No.	%	No.	%
Total	42,911	34,628	30,420	24,646	21,932	100	21,086	100
No. of children								
1 child	20,550	16,567	15,178	12,732	11,594	52.9	11,169	53.0
2 children	14,101	11,228	9,578	7,523	6,568	29.9	6,320	30.0
3 children	5,354	4,460	3,691	2,860	2,495	11.4	2,381	11.3
4 children	1,950	1,584	1,341	1,035	838	3.8	811	3.8
5 or more children	956	789	632	496	437	2.0	405	1.9

Source: The Housing Agency

- In 2022, 64.4% (13,579) of households with children identified as being in need of social housing were one-parent households, 25.4% (5,350) were two-parent households, and the remaining 10.2% (2,147) were multi-adult households (see *Table 125*).
- 43.3% (9,122) of households with children identified as being in need of social housing were in Co. Dublin (see *Table 125*).



Table 125. Number and percentage of households with children identified as being in need of social housing, by household structure and county (2022)

	Single with children	Couple with children	Multi-adult households with children	All households	s with children
	No.	No.	No.	No.	%
Total	13,579	5,350	2,157	21,086	100%
County					
Carlow	156	38	20	214	1.0%
Cavan	135	51	16	202	1.0%
Clare	264	97	52	413	2.0%
Cork	1,505	596	188	2,289	10.9%
Donegal	210	55	28	293	1.4%
Dublin	5,676	2,382	1,064	9,122	43.3%
Galway	440	256	69	765	3.6%
Kerry	456	200	81	737	3.5%
Kildare	662	346	116	1,124	5.3%
Kilkenny	155	54	25	234	1.1%
Laois	176	68	23	267	1.3%
Leitrim	37	23	8	68	0.3%
Limerick	564	126	67	757	3.6%
Longford	77	29	6	112	0.5%
Louth	344	84	44	472	2.2%
Mayo	150	65	42	257	1.2%
Meath	421	168	58	647	3.1%
Monaghan	71	7	8	86	0.4%
Offaly	146	47	14	207	1.0%
Roscommon	38	29	5	72	0.3%
Sligo	136	33	9	178	0.8%
Tipperary	302	106	31	439	2.1%
Waterford	337	83	25	445	2.1%
Westmeath	231	83	40	354	1.7%
Wexford	414	126	39	579	2.7%
Wicklow	476	198	79	753	3.6%

Note: Household composition variable changed in 2021, data not comparable with previous years

Source: The Housing Agency



Community characteristics

Measure: The percentage of children aged 10-17 who report feeling safe in the area where they live

- In 2018, 90.2% of children aged 10–17 reported feeling safe in the area where they live. This increased marginally between 2014 and 2018.
- Among individual population groups, when compared to all other children, Traveller children, immigrant children, and children with a disability and/or chronic illness were less likely to report feeling safe in the area where they live (see *Table 126*).
- Traveller children were the population group with the lowest percentage of children who reported feeling safe in the area where they live (see *Table 126*).

Table 126. Percentage of children aged 10–17 who reported feeling safe in the area where they live, by population group (2014–2018)

	2014	2018
All children	89.2	90.2
Traveller status		
Traveller children	83.0	82.9
All children except Traveller children	89.4	90.4
Immigrant status		
Immigrant children	86.3	88.3
All children except immigrant children	89.8	90.5
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	86.0	87.5
All children except those with a disability and/or chronic illness	90.1	91.0

- A lower percentage of females than males reported feeling safe in the area where they live (see *Table 127*).
- On average, the percentage of children who reported feeling safe in the area where they live decreased with age (see *Table 127*).
- The percentage of children who reported feeling safe in the area where they live was lowest among the low social class group (see *Table 127*).



Table 127. Percentage of children aged 10–17 who reported feeling safe in the area where they live, by age, gender, and social class (2014–2018)

	2014			2018			
	Male	Female	Total	Male	Female	Total	
All children	89.6	88.9	89.2	91.1	89.4	90.2	
Age							
10 years	90.5	89.9	90.2	92.3	92.9	92.6	
11 years	93.2	92.6	92.9	92.7	92.3	92.5	
12 years	92.1	90.2	91.2	92.0	92.8	92.4	
13 years	88.4	90.1	89.3	91.4	86.8	88.9	
14 years	88.6	88.1	88.3	88.7	86.3	87.4	
15 years	88.8	85.3	87.0	88.0	86.0	86.9	
16 years	86.4	88.8	87.6	90.4	85.5	87.8	
17 years	88.3	85.6	87.1	90.1	88.7	89.4	
Social class							
High	93.6	92.0	92.8	93.9	92.5	93.1	
Middle	88.7	88.2	88.5	89.5	87.7	88.6	
Low	86.1	85.1	85.6	89.4	84.6	86.8	

Source: HBSC Survey

• The percentage of children who reported feeling safe in the area where they live ranged from 84.4% in the South-East to 94.5% in the Border region (see *Table 128*).

Table 128. Percentage of children aged 10–17 who reported feeling safe in the area where they live, by NUTS region (2014–2018)

	2014	2018
State	89.2	90.2
NUTS region		
Border	92.2	94.5
Midland	91.2	90.4
West	94.2	91.3
Dublin	81.7	94.2
Mid-East	88.6	94.4
Mid-West	92.5	92.2
South-East	90.3	84.4
South-West	92.8	89.8



Environment and places

Measure: The percentage of children aged 10–17 who report that there are good places in their area to spend their free time

- In 2018, 67.2% of children aged 10–17 reported that there are good places in their area to spend their free time. This increased between 2014 and 2018.
- Among individual population groups, when compared to all other children, children with a disability and/or chronic illness were less likely to report that there are good places in their area to spend their free time (see *Table 129*).

Table 129. Percentage of children aged 10–17 who reported that there are good places in their area to spend their free time, by population group (2014–2018)

	2014	2018
All children	61.5	67.2
Traveller status		
Traveller children	73.4	74.0
All children except Traveller children	61.3	67.0
Immigrant status		
Immigrant children	64.8	69.1
All children except immigrant children	60.9	66.9
Disability and/or chronic illness status		
Children with a disability and/or chronic illness	58.3	64.9
All children except those with a disability and/or chronic illness	62.3	67.8

- A lower percentage of females than males reported that there are good places in their area to spend their free time (see *Table 130*).
- On average, the percentage of children who reported that there are good places in their area to spend their free time decreased with age (see *Table 130*).
- The percentage of children who reported that there are good places in their area to spend their free time was lowest among the middle social class group (see *Table 130*).



Table 130. Percentage of children aged 10–17 who reported that there are good places in their area to spend their free time, by age, gender, and social class (2014–2018)

	2014				2018	
	Male	Female	Total	Male	Female	Total
All children	64.4	58.4	61.5	69.1	65.4	67.2
Age						
10 years	71.8	73.2	72.5	78.0	77.4	77.7
11 years	74.3	73.4	73.9	78.7	76.9	77.9
12 years	71.2	72.4	71.7	74.3	71.2	72.7
13 years	68.6	62.2	65.3	70.7	67.9	69.2
14 years	69.1	54.2	61.5	61.8	58.1	59.8
15 years	56.0	45.2	50.4	55.8	54.4	55
16 years	51.0	42.5	46.8	52.6	47.2	49.7
17 years	50.1	42.5	46.7	51.2	43.3	47.2
Social class						
High	62.9	56.8	59.8	69.2	65.9	67.4
Middle	64.8	58.9	61.9	67.9	63.2	65.5
Low	65.3	60.3	62.8	68.4	66.7	67.5

Source: HBSC Survey

• The percentage of children who reported that there are good places in their area to spend their free time ranged from 58.3% in the Border region to 78.1% in the South-East (see *Table 131*).

Table 131. Percentage of children aged 10–17 who reported that there are good places in their area to spend their free time, by NUTS region (2014–2018)

	2014	2018
State	61.5	67.2
NUTS region		
Border	57.2	58.3
Midland	59.7	65.7
West	55.1	60.5
Dublin	77.3	63.5
Mid-East	59.6	63.6
Mid-West	54.9	59.9
South-East	55.7	78.1
South-West	53.9	65.9



Garda Diversion Programme referrals

Measure: The number of children aged 10–17 referred to the Garda Diversion Programme

- In 2022, 8,404 children aged 10–17 were referred to the Garda Diversion Programme. Some children were referred more than once and so the total number of referrals was 15,719 (see *Table 132* and *Table 133*).
- 66% of those referred were aged 15–17 years (see *Table 132*).
- The rate per 1,000 of referrals among boys (20.4) was over twice as high as the rate of referrals among girls (8.3) (see *Table 132*).

Table 132. Number, percentage, and rate (per 1,000) of children aged 10–17 referred to the Garda Diversion Programme, by age and gender (2020–2022)

	2020		2021			2022			
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total children	8,169	100	14.8	8,514	100	15.1	8,404	100	14.5
Sex									
Male	6,372	78	22.5	6,641	78	23.1	6,051	72	20.4
Female	1,797	22	6.6	1,873	22	6.8	2,353	28	8.3
Age									
10-14 years	2,287	28	6.4	2,214	26	6.1	2,857	34	7.6
15-17 years	5,882	72	29.7	6,300	74	31.6	5,547	66	26.9

Rates based on population estimates for 2020 and 2021 and Census data for 2022.

Note: Numbers in subgroups of age and sex were calculated from percentages provided and may not be exact.

Source: The Garda Diversion Programme

• 58.2% of referrals were deemed suitable for admission to the Garda Diversion Programme and received either a formal or informal caution.

Table 133. Number and percentage of referrals of children aged 10–17 to the Garda Diversion Programme, by outcome (2020–2022)

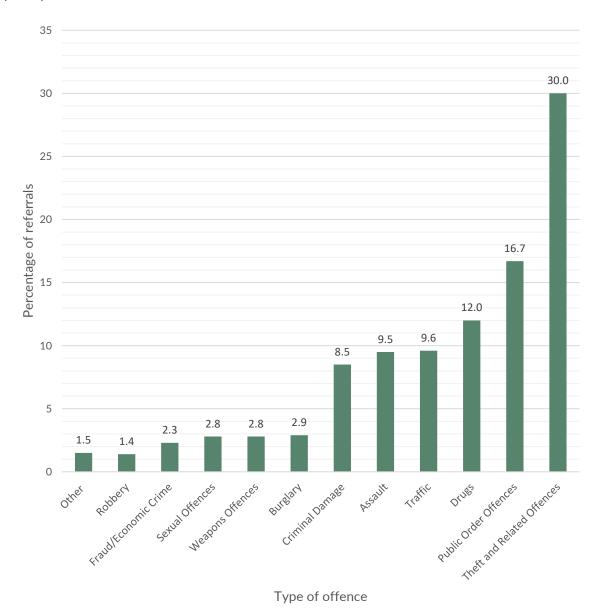
	2020	2020		-	2022	
	No.	%	No.	%	No.	%
Total referrals	16,301	100	15,090	100	15,719	100
Outcome						
Formal caution	4,448	27.3	3,552	23.5	3,658	23.3
Informal caution	5,178	31.8	5,336	35.4	5,480	34.9
Not suitable	5,629	34.5	4,106	27.2	4,735	30.1
Other outcome	1,046	6.4	2,096	13.9	1,846	11.7

Source: The Garda Diversion Programme



- "Theft and related offences" was the single highest cause of referrals to the Garda Diversion Programme, representing 30.0% of all referrals (see *Figure 28*).
- Over the period 2020 to 2022, the number of children referred to the Garda Diversion Programme decreased by 3.6%.

Figure 28. Percentage of referrals to the Garda Diversion Programme, by type of offence (2022)



Source: The Garda Diversion Programme

- The rate of children referred to the Garda Diversion Programme per 1,000 children ranged from 8.2 in Cork West to 33.8 in D.M.R. North Central.
- The rate of referrals per 1,000 children ranged from 15.0 in Cork West to 43.4 in Waterford.



Table 134. Number and rate (per 1,000) of children aged 10–17 referred and all referrals to the Garda Diversion Programme, by region and division (2022)

	Children referred		All refer	rals	Average no. of	
_	No.	Rate	No.	Rate	referrals per child	
State	8,404	14.5	15,719	27.1	1.9	
Dublin Region	2,750	18.6	5,598	37.9	2.0	
D.M.R. Eastern	280	12.9	432	19.8	1.5	
D.M.R. North Central	218	33.8	512	79.3	2.3	
D.M.R. Northern	720	17.4	1,481	35.8	2.1	
D.M.R. South Central	161	18.2	355	40.0	2.2	
D.M.R. Southern	557	21.0	1,121	42.2	2.0	
D.M.R. Western	814	19.1	1,697	39.7	2.1	
Eastern Region	1,980	11.9	3,733	22.5	1.9	
Kildare	367	11.9	631	20.5	1.7	
Kilkenny/Carlow	216	11.0	358	18.3	1.7	
Laois/Offaly	241	11.4	511	24.1	2.1	
Meath	260	9.1	523	18.4	2.0	
Waterford	332	21.5	670	43.4	2.0	
Westmeath	148	12.2	304	25.0	2.1	
Wexford	193	10.1	398	20.7	2.1	
Wicklow	223	11.7	338	17.7	1.5	
North Western Region	1,574	12.4	2,742	21.6	1.7	
Cavan/Monaghan	235	12.9	419	23.0	1.8	
Donegal	238	11.8	495	24.5	2.1	
Galway	366	11.9	594	19.3	1.6	
Louth	283	16.0	456	25.8	1.6	
Mayo/Roscommon/Longford	330	11.8	520	18.5	1.6	
Sligo/Leitrim	122	10.2	258	21.7	2.1	
Southern Region	2,051	14.7	3,579	25.6	1.7	
Clare	191	13.6	264	18.8	1.4	
Cork City	515	18.9	923	33.9	1.8	
Cork North	281	13.0	466	21.6	1.7	
Cork West	139	8.2	254	15.0	1.8	
Kerry	224	13.5	413	24.9	1.8	
Limerick	446	18.7	815	34.1	1.8	
Tipperary	255	13.1	444	22.7	1.7	
Outside jurisdiction/Not assigned region	49		67			

Rates based on regional and divisional populations at Census 2022

D.M.R. = Dublin Metropolitan Region Source: The Garda Diversion Programme



Antenatal care

Measure: The percentage of pregnant women attending antenatal care in the first trimester of pregnancy

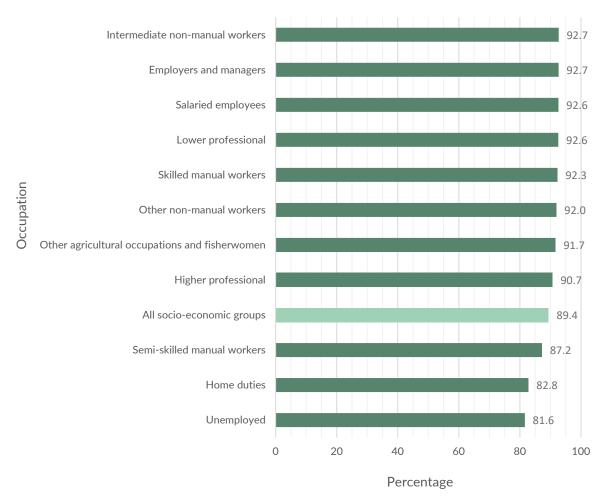
- In 2021, 89.4% of pregnant women attended antenatal care in the first trimester of pregnancy (see *Table 135*).
- The percentage of women attending antenatal care in the first trimester of pregnancy increased marginally from 89.3% in 2016 to 89.4% in 2021.
- In 2021, antenatal care in the first trimester of pregnancy was lowest among pregnant women aged 15–19 years (73.0%) (see *Table 135*).
- Women who were unemployed or primarily on home duties had the lowest attendance at antenatal visits in the first trimester of pregnancy (81.6% and 82.8% respectively) (see *Figure 29*).

Table 135. Percentage of pregnant women attending antenatal care in the first trimester of pregnancy, by age (2016–2021)

	2016	2017	2018	2019	2020	2021
Total	89.3	87.3	82	88.3	90.9	89.4
Age						
15-19 years	76.8	75.9	67.9	75.8	75.5	73.0
20-24 years	82.9	80.1	77.3	81.3	84.1	82.8
25-29 years	88.3	86	80.3	86.2	89.3	88.2
30-34 years	90.9	89	83.6	89.9	92.6	90.6
35-39 years	90.6	88.9	83.2	89.9	92.4	90.9
40-44 years	89.1	86.1	82.3	88.8	90.7	88.4
45 years and over	85.2	84.1	77.4	87.7	88.3	84.8



Figure 29. Percentage of pregnant women attending antenatal care in the first trimester of pregnancy, by occupation (2021)

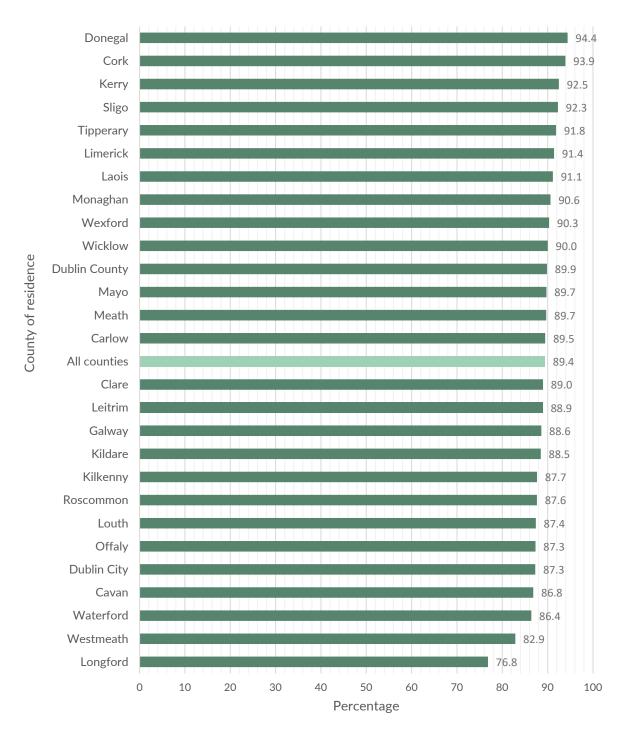


Source: Healthcare Pricing Office

• In 2021, the percentage of women attending antenatal care in the first trimester of pregnancy ranged from 76.8% in Longford to 94.4% in Donegal (see *Figure 30*).



Figure 30. Percentage of pregnant women attending antenatal care in the first trimester of pregnancy, by county of residence (2021)





Public health nurse visit

Measure: The percentage of newborns visited by a public health nurse within 72 hours of discharge from hospital for the first time

- In 2022, 98.4% of newborns were visited by a public health nurse within 72 hours of discharge from hospital for the first time.
- In 2022, the percentage of newborns visited by a public health nurse for the first time within 72 hours of discharge from hospital ranged from 34.8% in Mayo to 138.8% in Galway (see *Table 136*).

Table 136. Percentage of newborns visited by a public health nurse within 72 hours of discharge from hospital for the first time, by Local Health Office (2019–2022)

	2019	2020	2021	2022
Total	98.6	96.3	97.8	98.4
Local Health Office				
Cavan/Monaghan	95.6	94.8	81.8	92.1
Donegal	100	100	99.8	100
Sligo/Leitrim	99.9	99.9	100	100
Galway	99.8	99	99	138.8
Mayo	99.5	99.2	99	34.8
Roscommon	99.7	98	99	98.9
Clare	97.3	100	99.9	99.7
Limerick	102.8	104	98.3	100
North Tipperary/East Limerick	103.2	103.5	99.3	100
Kerry	100	99.9	100	100
North Cork	99.6	99.7	99.9	100
North Lee	101.1	100.5	100.9	99.6
South Lee	99.8	98.3	98.8	96.8
West Cork	99.3	98.6	100.5	100
Carlow/Kilkenny	97.2	97	95.7	98.9
South Tipperary	99.6	99.6	99.7	100
Waterford	99.5	100	100	99.4
Wexford	99.9	98.5	100	100
Dublin South East	98.8	NA	94.1	NA
Dún Laoghaire	90.5	100	97.2	88.8
Wicklow	99.2	NA	96.6	98.6
Dublin South City	100	100	100	100
Dublin South West	95.1	89.2	97.8	99.7
Dublin West	99.2	100	102	100
Kildare/West Wicklow	100	100	100	100
Laois/Offaly	100	100	100	100
Longford/Westmeath	97.7	100	99.4	100
Louth	96.5	94.8	93.6	93.4
Meath	93.3	89.5	89.7	90.9
Dublin North	96.6	66.6	97.8	100
Dublin North Central	99.1	95.3	98.2	96.7
Dublin North West	97.8	95	100	98.3

Note: Numbers greater than 100% are due to newborn babies being present in one area for the first 24/48 hours after birth and then moving to another area within 72 hours of birth



Developmental health screening

Measure: The percentage of infants who have had their 9-11 month developmental check on time (i.e. before reaching 12 months of age)

Note: In 2021, this measure was changed from 7–9 month developmental check by 10 months to 9–11 month developmental check by 12 months.

- In 2022, 85.4% of newborn children had their 9–11 month developmental check on time.
- The percentage of newborns who had their 9–11 month developmental check on time ranged from 47.0% in Wexford to 107.4% in Kildare/West Wicklow (see *Table* 137).

Table 137. Percentage of children who have had their developmental health screening before reaching 12 months of age, by Local Health Office (2021-2022)

	2021	2022
Total	59.8	85.4
Local Health Office		
Cavan/Monaghan	NA	85.8
Donegal	71.4	83.5
Sligo/Leitrim	34.1	91.3
Galway	41.0	80.4
Mayo	60.8	83
Roscommon	46.2	98.7
Clare	86.4	97.8
Limerick	45.5	86.5
North Tipperary/East Limerick	62.1	89.6
Kerry	69.2	91.1
North Cork	90.3	87
North Lee	89.5	82.4
South Lee	92.5	91.6
West Cork	91.1	100
Carlow/Kilkenny	94.4	93.4
South Tipperary	78.5	98.8
Waterford	24.8	76.7
Wexford	19.2	47
Dublin South East	12.1	60
Dún Laoghaire	18.3	50.8
Wicklow	53.4	82.9
Dublin South City	60.4	74.1
Dublin South West	75.9	80.5
Dublin West	76.2	66.2
Kildare/West Wicklow	74.5	107.4
Laois/Offaly	36.1	95.2
Longford/Westmeath	58.9	97
Louth	65.0	93.5
Meath	80.1	92.9
Dublin North	56.9	87.7
Dublin North Central	40.1	97.8
Dublin North West	65.8	85.2



Childhood immunisation

Measure: The percentage uptake of the recommended doses of vaccines among children at 12 months and 24 months of age

Note: Tables in this section should be read alongside detailed notes for the relevant year, available at the website of the Health Protection Surveillance Centre.

• In 2022, uptake rates of each of the vaccines D₃, Hib₃, and HepB₃ were 87% at 12 months and 93% at 24 months, down from 89% at 12 months and 94% at 24 months in 2018.

Table 138. Immunisat	ion uptake rates ((%), by age and	d vaccine type	(2018-2022)	
	2018	2019	2020	2021	2022
At 12 months					
D ₃	89	90	88	87	87
Hib ₃	89	90	88	87	87
HepB ₃	89	90	88	87	87
MenC ₁	89	90	88	87	87
PCV_2	89	90	88	87	87
Polio ₃	89	90	88	87	87
T ₃	89	90	88	87	87
P ₃	89	90	88	87	87
At 24 months					
D ₃	94	94	94	94	93
Hib ₃	94	94	94	93	93
HepB₃	94	94	94	93	93
PCV_b	91	88	88	87	85
MMR ₁	92	91	92	90	90
Hibb	90	90	89	88	87
MenC ₂	87	86	86	85	83
Polio ₃	94	94	94	94	93
T ₃	94	94	94	94	93
$MenC_b$	88	89	89	88	86
PCV ₃	90	86	87	85	84
P ₃	94	94	94	94	93

Source: Health Protection Surveillance Centre

- In 2022, for children at 12 months of age, uptake rates among Local Health Offices (LHOs) for D₃, P₃, T₃, and Polio₃ ranged from 77% to 93%.
- Uptake rates among LHOs for MenC₁ and PCV₂ ranged from 77% to 94%.



Table 139. Immunisation uptake rates (%) at 12 months, by vaccine type and Local Health Office (2022)

	D ₃ , P ₃ , T ₃ , Polio ₃	Hib ₃	HepB ₃	MenC ₁	PCV ₂
State	87	87	87	87	87
Local Health Office					
Cavan/Monaghan	79	79	79	78	79
Donegal	84	84	84	83	84
Sligo/Leitrim	87	87	87	86	87
Galway	92	92	92	91	91
Mayo	92	92	92	92	92
Roscommon	93	93	93	94	94
Clare	91	91	91	91	91
Limerick	86	86	86	86	86
North Tipperary/East Limerick	90	90	90	90	90
North Cork	90	90	90	91	91
North Lee	89	89	89	89	89
South Lee	89	89	89	89	89
West Cork	83	83	83	84	83
Kerry	87	87	87	87	86
Carlow/Kilkenny	87	87	87	88	87
South Tipperary	89	89	89	89	89
Waterford	85	85	85	86	85
Wexford	91	91	91	91	90
Dublin South	89	89	89	89	89
Dublin South East	88	88	88	89	88
Wicklow	86	86	86	86	86
Dublin South City	88	88	88	88	88
Dublin South West	86	86	86	86	86
Dublin West	84	84	84	84	84
Kildare/West Wicklow	88	88	88	88	88
Laois/Offaly	93	93	93	93	93
Longford/Westmeath	93	93	93	93	93
Louth	82	82	82	82	82
Meath	77	77	77	77	77
Dublin North West	84	84	84	84	84
Dublin North Central	84	84	84	84	84
Dublin North	85	85	85	84	84

Source: Health Protection Surveillance Centre

- In 2022, for children at 24 months of age, uptake rates among Local Health Offices (LHOs) for D₃, P₃, T₃, Polio₃, HepB₃, and Hib₃ ranged from 88% to 97%.
- Uptake rates for MMR₁ ranged from 81% to 95%.
- Uptake rates for PCV₃ ranged from 74% to 97%.
- Uptake rates for PCV_b ranged from 74% to 97%.
- Uptake rates for MenC₂ ranged from 75% to 89%.
- Uptake rates for MenC_b ranged from 77% to 92%.



Table 140. Immunisation uptake rates (%) at 24 months, by vaccine type and Local Health Office (2022)

	D ₃ , P ₃ , T ₃ , Polio ₃	Hib₃	HepB ₃	PCV _b	MMR ₁	Hib♭	MenC ₂	MenCb	PCV ₃
State	93	93	93	85	90	97	83	86	84
Local Health Office									
Cavan/Monaghan	92	92	92	76	86	79	76	78	76
Donegal	91	91	90	80	83	82	76	81	75
Sligo/Leitrim	93	93	93	82	90	83	80	82	81
Galway	95	95	95	89	93	90	86	89	90
Mayo	94	94	94	92	91	90	84	89	93
Roscommon	97	97	97	97	95	94	87	91	97
Clare	92	92	92	88	90	89	86	89	86
Limerick	92	92	92	79	87	81	78	80	78
North Tipperary/East Limerick	92	92	92	87	90	88	85	88	84
North Cork	96	96	96	92	94	94	89	92	89
North Lee	96	96	96	91	94	93	88	91	88
South Lee	96	96	96	91	94	93	88	91	88
West Cork	93	93	93	88	90	90	84	88	84
Kerry	95	95	95	88	91	90	86	88	86
Carlow/Kilkenny	92	92	92	84	90	85	80	84	81
South Tipperary	96	96	96	90	94	91	88	90	88
Waterford	88	88	88	83	87	84	79	83	81
Wexford	92	92	92	86	89	86	81	85	84
Dublin South	94	94	94	89	93	89	NA	90	88
Dublin South East	94	94	94	91	93	91	NA	91	90
Wicklow	88	88	88	82	85	82	NA	83	81
Dublin South City	94	94	94	88	91	89	NA	88	87
Dublin South West	94	94	94	86	91	88	NA	87	84
Dublin West	94	91	91	80	86	82	NA	82	78
Kildare/West Wicklow	93	93	93	87	91	88	NA	88	86
Laois/Offaly	94	94	94	91	93	91	86	91	88
Longford/Westmeath	94	94	94	91	93	91	89	91	89
Louth	89	89	89	76	84	79	76	79	76
Meath	89	89	89	74	81	77	75	77	74
Dublin North West	94	94	94	84	90	87	NA	86	82
Dublin North Central	93	93	93	84	88	87	NA	86	82
Dublin North	90	90	90	82	86	83	NA	83	80

NA = not available

Source: Health Protection Surveillance Centre

- In 2022, uptake rates across the EU-28 for D₃, P₃, and T₃ ranged from 84% in Austria to 99% in Greece, Hungary, Luxembourg, and Portugal.
- Uptake rates across the EU-28 for Polio₃ ranged from 84% in Austria to 99% in Greece, Hungary, Luxembourg, and Portugal.
- Uptake rates across the EU-28 for the first dose of measles-containing vaccine ranged from 71% in Poland to 99% in Hungary and Luxembourg.



Table 141. Immunisation uptake rates (%) among children of relevant age, by vaccine type and EU-28 country (2022)

	D_3 , P_3 , and T_3	Polio ₃	Measles-containing vaccine
Country			
Austria	84	84	95
Belgium	98	98	96
Bulgaria	91	91	91
Croatia	92	92	90
Cyprus	96	96	86
Czechia	94	94	97
Denmark	97	98	95
Estonia	85	85	82
Finland	91	91	94
France	96	96	94
Germany	91	91	97
Greece	99	99	97
Hungary	99	99	99
Ireland	93	93	90
Italy	95	95	94
Latvia	95	95	96
Lithuania	90	90	87
Luxembourg	99	99	99
Malta	98	98	96
Netherlands	93	93	89
Poland	90	91	71
Portugal	99	99	98
Romania	85	85	83
Slovakia	97	97	95
Slovenia	89	89	96
Spain	93	93	96
Sweden	94	94	92
United Kingdom	92	92	90

Source: World Health Organization



Accessibility of basic health services

Measure: The number of children on hospital waiting lists

- As of December 2022, there were 8,959 children on an inpatient/day case (IPDC) waiting list and 83,239 children on an outpatient (OP) waiting list.
- Of those children on an IPDC waiting list, 9.5% were waiting between 12 and 18 months, and a further 11.3% were waiting 18 months or more. The corresponding percentages for children on OP waiting lists were 11.2% and 15.3%, respectively (see *Table 142* and *Table 143*).
- The number of children on an IPDC waiting list increased by 30.7% between 2019 and 2022. Over the same period, the number of children on an OP waiting list increased by 2.4% (see *Table 142* and *Table 143*).

Table 142. Number and percentage of children on inpatient/day case waiting lists, by waiting time (2019–2022)

	2019		202	2020		2021		2022	
	No.	%	No.	%	No.	%	No.	%	
Total	6,861	100	7,551	100	7,944	100	8,959	100	
Waiting time									
Less than three months	2,723	39.7	2,219	29.4	2,809	35.4	3,377	37.7	
3-6 months	1,482	21.6	1,257	16.6	1,466	18.5	1,896	21.2	
6-9 months	862	12.6	485	6.4	837	10.5	1173	13.1	
9-12 months	535	7.8	1,238	16.4	629	7.9	652	7.3	
12-15 months	434	6.3	885	11.7	530	6.7	555	6.2	
15-18 months	200	2.9	520	6.9	349	4.4	294	3.3	
18 months or more	625	9.1	947	12.5	1,324	16.7	1,012	11.3	

Source: National Treatment Purchase Fund

Table 143. Number and percentage of children on outpatient waiting lists, by waiting time (2019–2022)

	201	9	20:	20	20.	21	202	2
	No.	%	No.	%	No.	%	No.	%
Total	81,316	100	80,801	100	83,377	100	83,239	100
Waiting time								
Less than three months	22,451	27.6	18,894	23.4	21,648	26	26,739	32.1
3-6 months	13,133	16.2	10,196	12.6	13,861	16.6	15,503	18.6
6-9 months	10,952	13.5	5,661	7	8,779	10.5	11,805	14.2
9-12 months	7,655	9.4	9,424	11.7	5,700	6.8	7,148	8.6
12-15 months	5,966	7.3	7,129	8.8	5,497	6.6	5,522	6.6
15-18 months	4,471	5.5	5,601	6.9	3,408	4.1	3,791	4.6
18 months or more	16,688	20.5	23,896	29.6	24,484	29.4	12,731	15.3

Source: National Treatment Purchase Fund



Children and young people in care

Measure: The number of children who are in the care of Tusla, the Child and Family Agency

- In December 2022, there were 5,626 children in the care of Tusla, the Child and Family Agency.
- The number of children in the care of Tusla decreased by 3.3% between 2020 and 2022 (see *Table 144*).
- Overall 4.6 children per 1,000 were in care in 2022 (see *Table 144*).
- More children (64.4%) were in general foster care in 2022 than in any other type of placement (see *Table 144*).
- A greater proportion (51.2%) of those in care were male (see *Table 144*).

Table 144. Number, percentage, and rate (per 1,000) of children in the care of Tusla, by age, gender, and type of placement (2020–2022)

		2020			2021			2022	
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	5,818	100	4.8	5,777	100	4.8	5,626	100	4.6
Age									
Under 5 years	742	12.8	2.4	712	12.3	2.4	647	11.5	2.2
5-9 years	1,587	27.3	4.5	1,557	27	4.5	1,461	26	4.3
10-14 years	2,020	34.7	5.7	2,063	35.7	5.7	2,083	37	5.6
15-17 years	1,469	25.2	7.4	1,445	25	7.2	1,435	25.5	7.0
Gender									
Male	2,982	51.3	4.8	2,958	51.2	4.8	2,883	51.2	4.6
Female	2,836	48.7	4.8	2,819	48.8	4.8	2,733	48.6	4.6
Type of placement									
General foster care	3,822	65.7	3.2	3,760	65.1	3.1	3,621	64.4	3.0
Relative foster care	1,516	26.1	1.3	1,502	26	1.2	1,453	25.8	1.2
Residential care	389	6.7	0.3	408	7.1	0.3	389	6.9	0.3
Other care placements	91	1.6	0.1	107	1.9	0.1	163	2.9	0.1

Rates based on population estimates for the relevant years and Census 2022.

Source: Tusla, the Child and Family Agency

• Rates ranged across administrative areas, from 2.4 per 1,000 in Dublin South East/Wicklow, to 10.3 per 1,000 in Dublin North City (see *Table 145*).



Table 145. Number and rate (per 1,000) of children in the care of Tusla, by administrative area (2020–2022)

	202	20	202	21	2022	
	No.	Rate	No.	Rate	No.	Rate
All Tusla regions	5,818	4.9	5,777	4.9	5,626	4.7
Tusla Dublin North East	1,377	5	1,392	5.1	1,406	5.1
Cavan/Monaghan	154	4.2	153	4.2	149	4.1
Dublin North	340	3.4	351	3.5	374	3.7
Dublin North City	486	10.8	470	10.5	463	10.3
Louth Meath	397	4.3	418	4.5	420	4.5
Tusla Dublin Mid Leinster	1,334	3.9	1,340	3.9	1,301	3.8
Dublin South Central	362	5.5	365	5.6	355	5.4
Dublin South East/Wicklow	231	2.7	212	2.4	205	2.4
Dublin South West/Kildare/West Wicklow	402	3.7	429	4	413	3.8
Midlands	339	4.2	334	4.2	328	4.1
Tusla South	1,682	5.6	1,646	5.5	1,575	5.2
Carlow/Kilkenny/South Tipperary	328	5.2	325	5.2	307	4.9
Cork	772	5.8	749	5.6	706	5.3
Kerry	153	4.4	159	4.6	158	4.6
Waterford/Wexford	429	6.3	413	6	404	5.9
Tusla West	1,425	5.2	1,399	5.1	1,344	4.9
Donegal	220	5.1	226	5.3	217	5.1
Galway/Roscommon	378	4.7	370	4.6	350	4.4
Mayo	130	4.1	144	4.5	137	4.3
Midwest	582	6	550	5.7	531	5.5
Sligo/Leitrim/West Cavan	115	4.9	109	4.6	109	4.6

Rates based on regional populations at Census 2016

Source: Tusla, the Child and Family Agency



Mental health referrals

Measure: The number of admissions to psychiatric hospitals/units and child and adolescent units

- In 2022, there were 336 admissions of children to psychiatric hospitals/units and child and adolescent units.
- Overall, 30.0 per 100,000 children were admitted to psychiatric/units and child and adolescent units in 2022 (see *Table 146*).
- 78.4% of children admitted to psychiatric hospitals/units and child and adolescent units in 2022 were aged 15–17 (see *Table 146*).
- 26.2% of children admitted to psychiatric hospitals/units and child and adolescent units were male and the remaining 73.8% were female (see *Table 146*).
- Among children, "personality disorders" (49.7%) followed by "mania" (24.9%) were the most common reason for admission to hospitals/units and child and adolescent units (see *Table 146*).

Table 146. Number, percentage and rate (per 100,000) of admissions to psychiatric hospitals/units and child and adolescent units, by age, gender, and diagnosis (2018–2022)

	2018	2019	2020		2021			2022	
	No.	No.	No.	No.	%	Rate	No.	%	Rate
Total	408	497	486	509	100	42.2	366	100	30.0
Age									
Under 5 years	0	0	0	0	0	0	0	0	0
5-9 years	0	0	0	0	0	0	0	0	0
10-14 years	65	84	113	99	19.4	27.2	79	21.6	21.1
15-17 years	343	413	373	410	80.6	205.6	287	78.4	139.3
Gender									
Male	152	175	136	143	28.1	23.2	96	26.2	15.4
Female	256	322	350	366	71.9	62.1	270	73.8	45.3
Diagnosis									
Alcoholic disorders	0	0	0	0	0.0	0.0	0	0	0
Depressive disorders	130	179	164	158	31.0	13.1	0	0	0
Drug dependence	7	15	7	13	2.6	1.1	8	2.2	0.7
Mania	18	16	25	26	5.1	2.2	91	24.9	7.5
Mental handicap	1	0	0	1	0.2	0.1	0	0.0	0.0
Neuroses	96	126	148	168	33.0	13.9	12	3.3	1.0
Organic psychoses	1	6	7	6	1.2	0.5	6	1.6	0.5
Other psychoses	43	57	42	50	9.8	4.1	34	9.3	2.8
Personality disorders	17	42	26	50	9.8	4.1	182	49.7	14.9
Schizophrenia	13	14	8	15	2.9	1.2	14	3.8	1.1
Unspecified	82	42	59	22	4.3	1.8	19	5.2	1.6

Rates based on population estimates for the relevant years

Source: Health Research Board



• The rate of admission of children to psychiatric hospitals/units and child and adolescent units was highest in Dublin, with 11.9 admissions per 100,000 children (see *Table 147*).

Table 147. Number and rate (per 100,000) of admissions to psychiatric hospitals/units and child and adolescent units, by county of residence (2022)

	No. of children	Rate
State	366	30.0
County of residence		0.0
Carlow	<5	N/A
Cavan	13	1.1
Clare	8	0.7
Cork	24	2.0
Donegal	9	0.7
Dublin	145	11.9
Galway	16	1.3
Kerry	7	0.6
Kildare	19	1.6
Kilkenny	5	0.4
Laois	7	0.6
Leitrim	<5	N/A
Limerick	14	1.1
Longford	<5	N/A
Louth	11	0.9
Mayo	<5	N/A
Meath	15	1.2
Monaghan	<5	N/A
Offaly	10	0.8
Roscommon	5	0.4
Sligo	<5	N/A
Tipperary	14	1.1
Waterford	7	0.6
Westmeath	<5	N/A
Wexford	7	0.6
Wicklow	13	1.1

Rates based on county populations at Census 2022

Source: Health Research Board

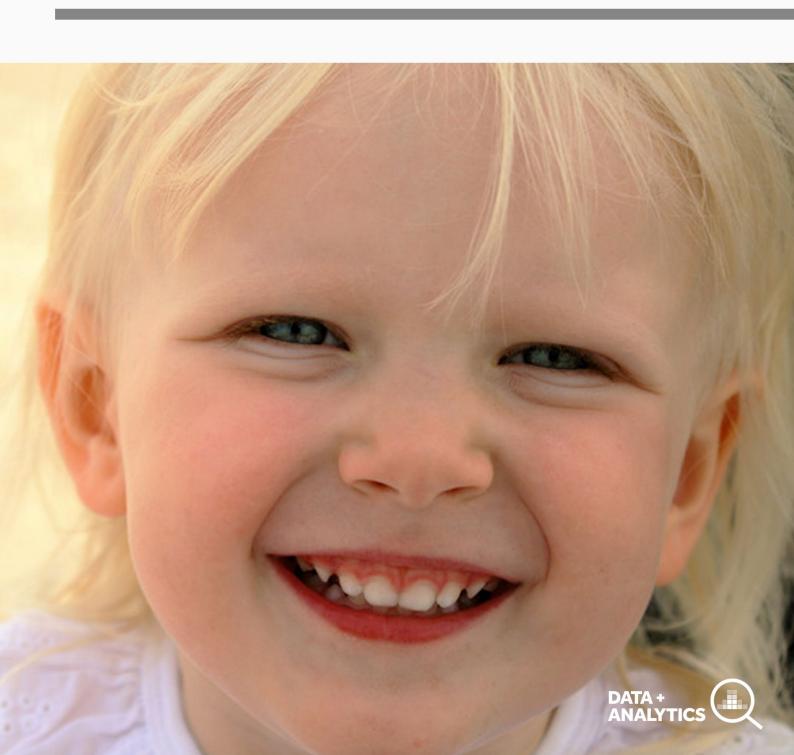
STATE OF THE NATION'S CHILDREN



An Roinn Leanaí, Comhionannais, Míchumais, Lánpháirtíochta agus Óige Department of Children, Equality, Disability, Integration and Youth



APPENDICES



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Department of Children, Equality, Disability, Integration, and Youth Block 1, Miesian Plaza, 50–58 Lower Baggot Street, Dublin 2 D02 XW14

Tel: +353 (0)1 647 3000

Email: dataandanalytics@equality.gov.ie

Web: www.gov.ie/dcediy

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STATE OF THE NATION'S CHILDREN

Appendix 1: Main data sources, definitions, and technical notes



Census of the Population and Population Estimates: Central Statistics Office

The Census of the Population is conducted by the Central Statistics Office (CSO) every five years. The following indicators, which draw on data from this source, define children as "all population under 18 years of age" when the data were collected. Figures are based on either the de facto population, i.e. the total of all persons present within the boundaries of the state on Census night or the usually resident population:

- Number of children (de facto)
- Number of children living in a single parent family unit (usual residence and present)
- Percentage of children whose mothers have attained (a) primary, (b) lower secondary, (c) upper secondary or (d) third-level education (usual residence and present)
- Number of Traveller children (de facto)
- Number of foreign national children (usual residence and present)
- Number of children with a disability (de facto)
- Number of children who provide regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability (de facto).

Parental education level data refer to the highest educational attainment of the mother rather than the head of household. All information supplied is for those whose full-time education has ceased. Where no mother is present, the highest educational attainment of the father is used instead. The figures are based on responses to Question 25 of the 2016 Census, which distinguishes between the following main categories:

- 1. No formal education or just primary education: NFQ Levels 1 or 2 (FETAC Level 1 or 2 Cert. or equivalent).
- 2. Lower secondary education: NFQ Level 3 (Junior/Inter/Group Cert., FETAC Level 3 Cert., FAS Introductory Skills, NCVA Foundation Cert. or equivalent).
- 3. Upper secondary: NFQ Levels 4, 5 or 6 (Leaving Cert. [including Applied and Vocational programmes] or equivalent), Technical or Vocational (FETAC Level 4/5 Cert., NCVA Level 1/2, FAS Specific Skills, Teagasc Cert. in Agriculture, CERT Craft Cert. or equivalent), Advanced Certificate/Completed Apprenticeship (FETAC Advanced Cert., NCVA Level 3, FAS National Craft Cert., Teagasc Farming Cert., CERT Professional Cookery Cert. or equivalent).
- 4. Third level: NFQ Levels 6, 7, 8, 9 or 10 (Higher Certificate, Ordinary Bachelor's Degree or National Diploma, Honours Bachelor's Degree/Professional qualification or both, Postgraduate Diploma or Degree, Doctorate (PhD) or higher).



A person is classified as a **Traveller** in the 2022 Census if the answer is "Irish Traveller" to Question 11: "What is your ethnic group/background?"

A person is identified as a **foreign national** in the 2022 Census if the answer is not "Ireland" to Question 10: "What is your country of citizenship?"

A person is defined as **having a disability** in the 2022 Census if they answer "Yes" to any of the options in Question 15 or Question 16.

Question 15: "Do you have any of the following long-lasting conditions or difficulties?"

- (a) Blindness or a serious vision impairment.
- (b) Deafness or a serious hearing impairment.
- (c) A difficulty with basic physical activities, such as walking, climbing stairs, reaching, lifting or carrying.
- (d) An intellectual disability.
- (e) A difficulty with learning, remembering or concentrating.
- (f) A psychological or emotional condition or mental health issue
- (g) A difficulty with pain, breathing or any other chronic illness or condition.

Question 16 "As a result of a long-lasting condition, do you have difficulty doing any of the following? Include issues due to old age"

- (a) Dressing, bathing or getting around inside the home.
- (b) Going outside the home alone to shop or visit a doctor's surgery.
- (c) Working at a job or business or attending school or college.
- (d) Participating in other activities, for example, leisure or using transport.

Unlike in Census 2016, there was no filter between Q15 and Q16, meaning that all respondents were expected to answer both questions. Respondents were also instructed to answer 'Yes' to any of the difficulties listed in Q15 which were experienced due to old age.

For the publication of the results, three categories were created based on the response options in Q15 and Q16. These are as follows:

Long-lasting condition or difficulty experienced to any extent Long-lasting condition or difficulty experienced to some extent Long-lasting condition or difficulty experienced to a great extent

Respondents who ticked any of the 'Yes' boxes in Q15 or Q16 were also included in the 'disability to any extent' rate.

Respondents who ticked at least one of the boxes for 'Yes, to some extent' in Q15 or 'Yes, a little' in Q16 but did not tick any of the 'Yes to a great extent' in Q15 or 'Yes, a lot' in Q16



were used as part of the calculation of the 'Long-lasting condition or difficulty experienced to some extent' category.

Respondents who ticked at least one of the 'Yes, to a great extent' boxes in Q15 or 'Yes, a lot' boxes in Q16 were used as part of the calculation of the 'Long-lasting condition or difficulty experienced to a great extent' category.

Calculation of annual population estimates

The annual population estimates for mid-April are calculated by trending forwards the previous Census of Population data. For example, the base population data for estimating the April 2023 figure was the number of males and females in each region by single year of age and nationality as established by the 2022 Census. From this base, each person was aged by one year, births for the period were added and deaths were subtracted. The estimated number of immigrants was then added and the number of emigrants was subtracted. Allowance was also made for estimated inter-regional migration in arriving at the final 2023 figures. No estimates are made for the population of children in counties for intercensal years. In this publication, "Rates per county" calculations for years subsequent to 2022 continue to use the 2022 Census of Population county figures. Where regional breakdowns using 2022 Census of Population have not yet been published by the CSO 2016 Census of Population is used.

Centralised Information System for Infectious Diseases: World Health Organization

The Centralised Information System for Infectious Diseases (CISID) is compiled by the World Health Organization (WHO) European Region. The following indicator draws on data from the CISID:

• The percentage uptake of the recommended doses of vaccines among children at (a) 12 months and (b) 24 months of age.

Programmes Implementation Platform: Pobal

The Early Childhood Care and Education (ECCE) Database was an administrative data source managed by the Department of Children Equality, Disability, Integration, and Youth that was established in 2010 to administer the Early Childhood Care and Education (ECCE) Programme. The database was transferred in 2014 to the Programmes Implementation Platform (PIP), managed by Pobal. The following indicator draws on data from this source:

Percentage of pre-school services under contract to deliver the Early Childhood Care



and Education (ECCE) Programme that meet basic and higher capitation criteria.

The Early Childhood Care and Education (ECCE) Programme offers every child in the eligible age cohort up to 15 hours per week of free early childhood care and education provision for 38 weeks per year. The programme is available to children who have turned 2 years and 8 months of age before 1 September. Children can continue in the programme until they transfer to primary school if they are not older than 5 years and 6 months at the end of the pre-school year on 30 June. There are some exemptions from the age limit. Children are eligible to start the ECCE scheme in the September of the year that they turn 3 years old. Pre-school services may enter into a Grant Funding Agreement with the State to provide the ECCE Programme on the basis of meeting a number of criteria, including qualifications of staff.

In September 2022, a new Core Funding model was launched. The First 5 Government Strategy commits to having a graduate-led ELC workforce by 2028. There are two types of graduate premiums under Core Funding: The Graduate Lead Educator Premium and the Graduate Manager Premium. The Graduate Lead Educator Premium is paid as a top-up on the number of hours of provision that is led by a graduate with a relevant qualification and three years of experience. The Graduate Manager Premium is also a paid top-up for a service whose manager has a relevant qualification and three years experience. These graduate premiums are replacing the ECCE Higher Capitation. Providers who offer the ECCE scheme but who choose not to apply for Core Funding will no longer be able to access higher capitation funding.

The standard weekly ECCE capitation is €69.00. Where a child is attending a part-time or full-time service the approved provider must reduce the fee paid by the parent/guardian by a minimum of €64.50.

Prior to the introduction of Core Funding, higher capitation could apply to services that had suitably qualified staff in place. This amounted to an extra €11.25 per child per week. The ECCE higher capitation funding is now being replaced by the Core Funding Graduate Premium from the 2022/2023 programme year onwards.

The information in Table 46 shows the number and percentage of ECCE services which were also contracted under Core Funding and therefore had access to funding for graduates. The information signifies if the service: (i) has at least one staff member who is QQI L7 or above; or, (ii) does not have any staff member with such qualifications. Not every staff member who is QQI L7 or above will be attracting graduate premiums, as the premiums under Core Funding do not apply to graduate Lead Educators or Managers with fewer than 3 years' experience or graduate Educators. Therefore, not every service included in these figures may have been in receipt of funding for graduates.



Education Statistics Database: Department of Education

The following indicators draw on data from the Department of Education:

- Leaving Certificate retention rates
- Public expenditure on education.

Leaving Certificate retention rates are drawn from the school-based returns collated by the Department of Education. Rates are adjusted for emigration and transfer to non-aided second-level schools, but not for transfer to other destinations (e.g. Youthreach). From 2005 onwards, an updated methodology was employed to calculate adjusted rates, so these rates are not completely comparable to those for previous cohorts.

Non-capital public expenditure on education includes direct public expenditure on educational institutions, public subsidies to other private entities for education matters and public subsidies to households, such as scholarships and loans to students for tuition fees and student living costs. The expenditure has been deflated to real prices by using the National Accounts series for net expenditure by Central and Local Government on current goods and services at base year 2013. Public expenditure on education as used for the international comparison includes both current and capital expenditure. In the mid-1990s, undergraduate tuition fees were abolished in Ireland. Educational institutions are defined as entities that provide instructional services to individuals or education-related services to individuals and other educational institutions. Data on total public expenditure on education are expressed as a percentage of gross domestic product (GDP). GDP is the central aggregate of National Accounts. It represents the total value added (output) in the production of goods and services in the country. National public expenditure as a percentage of GDP is calculated using figures in national currency both for public expenditure and for GDP. European averages are weighted and therefore take into account the relative proportion of the student population or the education expenditure of the considered countries. They are calculated taking into account all relevant countries for which data are available. They are considered of sufficient quality if countries with available data exceed 70% of the population or of the GDP of the European aggregate.

Note: "Public expenditure on educational institutions between primary and tertiary level" as outlined in this report does not include expenditure on pre-primary education and is not comparable to "public expenditure on education" which was reported in previous editions of State of the Nation's Children, as this included all levels of education.



European Union Survey on Income and Living Conditions (EU-SILC): Central Statistics Office

The European Union Survey on Income and Living Conditions (EU-SILC) is conducted in Ireland by the Central Statistics Office. The EU-SILC collects information on poverty, deprivation and social exclusion. The following indicators draw on data from this source:

- At risk of poverty: The percentage of individuals (children in the case of this report) living in households with an equivalised household disposable income below 60% of the median equivalised household disposable income.
- **Consistent poverty**: The percentage of individuals (children in the case of this report) living in households with an equivalised household disposable income below 60% of the median equivalised household disposable income who experienced at least two forms of enforced deprivation.

There are two definitions of income and "at risk of poverty" used in the measures shown in this report. These include national, (i.e. "CSO, SILC"), and EU, (i.e. "EU-SILC") measures. The key difference between the national and EU definition of income is that the national definition includes the value of goods produced for own consumption and non-cash employee income (i.e. benefit-in-kind/BIK), while the EU definition does not. The calculation of national and EU "at risk of poverty" measures also involves the use of different equivalence scales. The purpose of an equivalence scale is to account for the size and composition of different income units (households) and thus allows for a more accurate comparison between households.

The national equivalence scale used to obtain the equivalised household size attributes a weight of 1.0 to the first adult in a household, 0.66 to each subsequent adult (aged 14+ living in the household) and 0.33 to each child aged less than 14 years. For EU "at risk of poverty" rates, the equivalised disposable income for each person is calculated as the total net income figure divided by the equivalised household size according to the modified OECD scale (which gives a weight of 1.0 to the first adult, 0.5 to other persons aged 14 or over who are living in the household and 0.3 to each child aged less than 14 years). In the tables/graphs shown in this report, tables with national data only use the national income definition and equivalence scale to calculate the "risk of poverty" rate, while tables showing EU comparisons use the corresponding EU definitions. The indicators shown in this report refer to income after social transfers are included.



"Consistent poverty" is a measure designed to examine the extent to which persons at risk of poverty may be excluded and marginalised from participating in activities that are considered the norm for other people in society. To this end, a set of basic deprivation indicators (listed below) has been agreed. Persons in consistent poverty are defined as persons who are at risk of poverty (national measure) and who live in households deprived, through inability to afford them, of two or more of the following basic deprivation items:

- Two pairs of strong shoes.
- A warm waterproof overcoat.
- Buy new (not second-hand) clothes.
- Eat a meal with meat, chicken, fish (or vegetarian equivalent) every second day.
- Have a roast joint or its equivalent once a week.
- Had to go without heating during the last year through lack of money.
- Keep the home adequately warm.
- Buy presents for family or friends at least once a year.
- Replace any worn-out furniture.
- Have family or friends for a drink or meal once a month.
- Have a morning, afternoon or evening out in the last fortnight for entertainment.

Note: Changes were introduced in the 2020 SILC survey which result in a break in the series. These changes include changes to income definition, private household definition, income reference period, collection and processing methods and weighting and calibration methods. For further information see https://www.cso.ie/en/releasesandpublications/in/silc/informationnote-breakintimeseriessilc2020.

Health Behaviour in School-aged Children (HBSC) Survey: Health Promotion Research Centre

The Health Behaviour in School-aged Children (HBSC) Survey is conducted in Ireland by the Health Promotion Research Centre every four years. This comprises self-report, self-completion questionnaires completed by children in schools. The following indicators draw on data from this source:

- Percentage of children aged 10–17 who report that they find it easy to talk to their mother when something is really bothering them*
- Percentage of children aged 10–17 who report that they find it easy to talk to their father when something is really bothering them*
- Percentage of children aged 10–17 who report having three or more friends of the same gender*



- Percentage of children aged 10–17 who report having a pet of their own or a pet in their family*
- Percentage of children aged 10–17 who report having been bullied in school (in the past couple of months)*
- Percentage of children aged 10–17 who report that students at their school participate in making the school rules*
- Percentage of children aged 10–17 who report smoking cigarettes every week*
- Percentage of children aged 10–17 who report never smoking cigarettes
- Percentage of children aged 10–17 who report who report having been drunk at least once in the past 30 days
- Percentage of children aged 10–17 who report never having had an alcoholic drink
- Percentage of children aged 10–17 who report having taken cannabis at least once in their lifetime
- Percentage of children aged 15–17 who report having ever had sex
- Percentage of children aged 10–17 who report feeling happy with the way they are*
- Percentage of children aged 10–17 who report being happy with their lives at present*
- Percentage of children aged 10–17 who report being physically active for at least 60 minutes per day on more than four days per week
- Percentage of children aged 10–17 who report that they eat breakfast five or more days per week
- Percentage of children aged 10–17 who report drinking soft drinks that contain sugar at least once a day*
- Percentage of children aged 10–17 who report feeling safe in the area where they live*
- Percentage of children aged 10–17 who report that there are good places in their area to spend their free time*.

Indicators marked with an asterisk (*) include data on children aged nine. These indicators use data collected separately in a Middle Childhood Study. These children are not included in the core HBSC sample. Therefore, these data have been excluded from overall percentages and from analyses by population group, social class and geographic location.

Data are subject to potential bias in relation to self-presentation and memory. They may also suffer from social desirability bias. The overall percentages for HBSC 2014 presented in this report have been weighted. The data were probability weighted prior to analysis to account for a gender imbalance which arose due to response variations during data collection in 2014. The sample weights were constructed using census data and accounted for using gender, age group and region. The weights were constructed as W=1/P. W can be interpreted as the inverse selection probability.



Social class is determined by inclusion in the following social class groups (introduced in 1996 by the CSO), which are defined on the basis of occupation:

- High: Social Class I (Professional) and Social Class II (Managerial),
- Middle: Social Class III (Non-manual) and Social Class IV (Skilled manual),
- Low: Social Class V (Semi-skilled) and Social Class VI (Unskilled).

The method to categorise social class for HBSC 2014 is different to that used in previous survey cycles. The highest social class in the household was used. In previous survey cycles, social class was categorised using the father's social class (or the mother's social class where the father's social class was not available or was missing data). Social class is missing for some records. This should be taken into account when comparing classifications by social class to overall totals.

NUTS is an acronym for the EU Nomenclature of Territorial Units for Statistics. This classification was legally established by EU Regulation No. 1059/2003 on 29 May 2003. The eight Regional Authorities (NUTS 3 regions) were established under the Local Government Act 1991. In Ireland, it is classified hierarchically as Level 1 - Ireland; Level 2 - Regions; and Level 3 - Regional Authorities (see Appendix 2).

Children are identified as **Traveller children** if they answered "Yes" to the question "Are you a member of the Travelling community?"

Children are identified as **having a disability and/or chronic illness** if they answered "Yes" to the question "Do you have a long-term illness, disability, or a medical condition (like diabetes, asthma, allergy or cerebral palsy) that has been diagnosed by a doctor?"

Children are identified as **immigrants** if both of their parents were born outside of Ireland.

Notes:

- The overall percentages in the data for 2010 were weighted and therefore results may differ to earlier years.
- The data for 2014 referred to "Percentage of children who reported being physically active for at least 60 minutes per day on four or more days per week". This has been amended to "Percentage of children who reported being physically active for at least 60 minutes per day on more than four days per week" in line with the data presented for earlier years.
- International comparisons are based on data from children aged 11, 13, and 15 only.



Hospital In-Patient Enquiry: Healthcare Pricing Office

The Hospital In-Patient Enquiry (HIPE) scheme, established in 1971, is a health information system designed to collect clinical and administrative data on discharges from, and deaths in, acute hospitals in Ireland. Since the 1st of January 2014, the Healthcare Pricing Office (HPO) within the Health Service Executive has overseen the administration and management of this scheme. Between 1990 and 2013 HIPE was managed by the Economic and Social Research Institute (ESRI) on behalf of the Department of Health and the Health Service Executive. The following indicators draw on data from this source:

- The number of hospital discharges among children
- The number of hospital discharges among children with a principal diagnosis of "injury, poisoning and certain other consequences of external causes".

HIPE data for 1994–2004 were classified using ICD-9-CM. All HIPE discharges from 2005 have been coded using ICD-10-AM (the Australian Modification of ICD-10, incorporating the Australian Classification of Health Interventions) specifically the ICD-10-AM 4th edition from 2005–2008, 6th edition from 2009 to 2014 and the 8th edition from 2015 onwards, which includes significant changes in the classification of diagnoses and procedures. This means that it is not possible to directly compare the data published for 2009–2013 in these reports with previously reported data for 1994–2004.

The **principal diagnosis** is defined as "The diagnosis established after study to be chiefly responsible for occasioning an episode of admitted patient care, an episode of residential care or an attendance at the health care establishment, as represented by a code" (METeOR: 391326) (Australian Institute of Health and Welfare 2012) [extracted from NCCC eBook, July 2013, General Standards for Diseases].

In-patient and day case discharges are reported only. ED and out-patient attendances are not recorded on HIPE. Care must be taken not to use hospitalisation rates as a proxy for incidence or prevalence of ill-health in children. Rates are based on episodes of care, such that an individual case will be counted separately in the statistics for each admission to hospital. In addition, hospital data will reflect changes in treatment protocols as well as issues of access to care. The data does not include any public activity performed in private hospitals under the private hospitals agreements.

HIPE has covered close to 100% of the discharges from publicly funded acute hospitals in recent years. Please see www.hpo.ie for further information on the HIPE System.



Immunisation Uptake Statistics: Health Protection Surveillance Centre

National data on immunisation uptake in children at 12 and 24 months of age are collated by the Health Protection Surveillance Centre using data provided by the HSE Regions on a quarterly basis. There is no national database on childhood immunisations. All immunisation uptake statistics in this report should only be read alongside caveats to data which is contained in the annual reports published on the website of the Health Protection Surveillance Centre (www.hpsc.ie). The following indicator draws on data from this source:

• The percentage uptake of the recommended doses of vaccines among children at (a) 12 months and (b) 24 months of age.

The vaccines included are:

- D₃ three doses of vaccine against diphtheria
- HepB₃ three doses of vaccine against hepatitis B
- Hib₃ three doses of vaccine against Haemophilus influenzae type B
- Hib_b one booster dose of vaccine against Haemophilus influenzae type B on or after 12 months of age
- MenC₁ one dose of vaccine against meningococcal group C
- MenC₂ two doses of vaccine against meningococcal group C
- MenC_b one dose of vaccine against meningococcal group C on or after 12 months of age
- MMR₁ one dose of vaccine against measles, mumps and rubella
- P₃ three doses of vaccine against pertussis
- PCV₂ two doses of pneumococcal conjugate vaccine
- PCV₃ three doses of pneumococcal conjugate vaccine
- PCV_b one dose of pneumococcal conjugate vaccine on or after 12 months of age
- Polio₃ three doses of vaccine against polio
- T_3 three doses of vaccine against tetanus.

Since 18 September 2006, a Hib booster (Hib_b) was recommended. This followed the national Hib campaign from November 2005 to May 2006 among children aged less than four years. Since 1 September 2008, the childhood immunisation schedule outlined in the table below has been implemented for children born on or after 1 July 2008. Compared with the previous schedule, the changes to the primary schedule for children born on or after 1 July 2008 include:

 Introduction of a hepatitis B vaccine (as part of a 6-in-1 vaccine) given at two, four and six months of age



- Introduction of pneumococcal conjugate vaccine given at two, six and twelve months of age
- Change in timing of meningococcal serogroup C conjugate vaccination, now given at four, six and thirteen months of age
- Change in timing of the Haemophilus influenzae type b booster vaccination, now given at thirteen months of age.

Age	Children born before 1 July 2008		Children born on or after 1 July 2008	
Birth	BCG		BCG	
2 months	DTaP/Hib/IPV + MenC		DTaP/Hib/IPV/HepB + PCV	
4 months	DTaP/Hib/IPV + MenC		DTaP/Hib/IPV/HepB + MenC	
6 months	DTaP/Hib/IPV + MenC		DTaP/Hib/IPV/HepB + PCV + MenC	
12 months	MMR + Hib		MMR + PCV	
13 months	_		MenC + Hib	
KEY:				
BCG	Bacillus Calmette-Guerin vaccine	IPV	Inactive Polio Virus vaccine	
DTaP	Diptheria, Tetanus and acellular Pertussis vaccine	MMR	IR Measles, Mumps and Rubella vaccine	
Hib	Haemophilus influenza type B vaccine	MenC	Meningococcal group C vaccine	
НерВ	Hepatitus B vaccine	PCV	Pneumococcal conjugate vaccine	

Please see <u>www.immunisation.ie</u> for complete information on the Irish childhood immunisation schedule and the immunisation guidelines for Ireland

National Ability Support System: Health Research Board

The National Ability Supports System (NASS) is an administrative data source managed by the Health Research Board. NASS is a national database that records information about disability-funded services that are received or required as a result of an intellectual disability, developmental delay, physical, sensory, neurological, learning, autism spectrum or speech/language disability. Mental health as a type of disability is also recorded on NASS where an individual is in receipt of a disability-funded service. The purpose of NASS is to gather information to aid the planning, development and organisation of disability funded services.

NASS began collecting data in September 2019 following consultation with the Health Service Executive (HSE), Department of Health (DoH) and disability service providers. NASS replaces two disability databases - the National Intellectual Disability Database (NIDD) and the National Physical and Sensory Disability Database (NPSDD). The NIDD and NPSDD were decommissioned in January 2018.

Since 2019, when data were first available from NASS, only some special schools and a small



number of the HSE's Early Intervention Teams and School-Age Teams were returning information to NASS. In order to improve the coverage of children on NASS in 2022, the Health Research Board (HRB) NASS team and HSE NASS personnel in the CHO areas undertook a project to register the caseloads of the Children's Network Disability Teams (CDNTs) on NASS. As part of the 2022 data collection, the 91 new CDNTs were asked to submit all relevant available data from their current caseloads to NASS, where possible, given the teams' existing resourcing issues. A total of 43,759 children were recorded as being on the caseload of a CDNT in 2022. Of these, 30,251 were new registrations on NASS. The remainder (13,508) were existing records previously held on NASS. A total of 47,550 children were registered on NASS in 2022 for various disability types.

The following indicators draw on data from NASS:

- The number of children with an intellectual disability registered for HSE funded disability services
- The number of children with a physical and/or sensory disability registered for HSE funded disability services

Data for these indicators prior to 2020 are no longer comparable with current data due to the above changes in database.



National Perinatal Reporting System: Health Pricing Office

The National Perinatal Reporting System (NPRS) was established in the 1980s and was managed by the Department of Health. From 1999 to 2013, the Economic and Social Research Institute was contracted by the Department of Health and the Health Service Executive to oversee the collection, processing, management and reporting of data submitted to the NPRS. The system has been managed by the Healthcare Pricing Office (www.hpo.ie) since January 2014. The NPRS is an administrative, clinical and demographic data source and provides details of national statistics on perinatal events (live births, still births and early neonatal deaths). The information collected includes data on pregnancy outcomes, with particular reference to perinatal mortality and important aspects of perinatal care. In addition, descriptive social and biological characteristics of mothers giving birth and their babies are recorded. The following indicators draw on data from this source:

- The percentage of babies born weighing less than 2,500 grams (live and still births)
- The percentage of infants who are (a) exclusively breastfed and (b) partially breastfed on being discharged from hospital
- The percentage of pregnant women attending antenatal care in the first trimester of pregnancy.

The birthweight categories are defined as: Low: < 2,500 g; Healthy: 2,500 g-3,999 g; High: \geq 4,000 g.

The trimesters are defined as: First: ≤ 14 weeks; Second: 15–27 weeks; Third: ≥ 28 weeks.

The collection of data on the variable "timing of first antenatal contact" attempts to capture important information on Irish women's first contact with the healthcare services during pregnancy. This variable acts as an indicator of the length of antenatal care each mother has received and can be examined with birth, still birth and mortality rates. The completion of this indicator at present, however, may not provide an accurate estimation of this information. Although 85.3% of total births were recorded as receiving combined antenatal care in 2021, the date of the first visit to the doctor was recorded as "not known" for 28.5% of these births. As a result of the absence of these data, the timing of first contact with health professionals within this category will reflect the date of the first hospital visit, even though this is likely to have been later than the first doctor visit.



National Psychiatric In-Patient Reporting System: Health Research Board

The National Psychiatric In-Patient Reporting System (NPIRS) is an administrative data source managed by the Health Research Board. The data collected for the NPIRS include demographic data relating to each patient (such as gender, date of birth, marital status, address from which admitted and socioeconomic group), together with clinical and diagnostic information (such as date of admission/discharge, legal category, order of admission, diagnosis on admission and discharge in accordance with ICD-10, the World Health Organization International Statistical Classification of Diseases and Related Health Problems, 10th Revision and reason for discharge).

The following indicator draws on data from the NPIRS:

 Number and percentage of admissions to psychiatric hospitals/units and child and adolescent units among children.

National Self-Harm Registry Ireland: National Suicide Research Foundation

The National Self-Harm Registry Ireland is a national system of population monitoring for the occurrence of hospital-treated self-harm. The Registry is operated by the National Suicide Research Foundation and is funded by the HSE's National Office for Suicide Prevention. Data for the Registry are recorded by independently trained data registration officers, who register self-harm presentations to all of the country's hospital emergency departments. They follow standard operating procedures and apply standardised inclusion/exclusion criteria in line with an internationally recognised definition of self-harm. Note that although some individuals make more than one self-harm presentation to hospital, the figures presented relate to the number of individuals annually rather than the total number of presentations.

The Registry's Annual Reports are available at www.nsrf.ie.

Outturn of Quarterly Performance Indicator Returns: Health Service Executive

The Outturn of Quarterly Performance Indicator Returns is collated by the Health Service Executive (HSE). The following indicators draw on data from this source:

 The percentage of newborn babies visited by a public health nurse within 48 hours of discharge from hospital for the first time



• The percentage of children who have had their 9–11 month developmental check on time (i.e. before reaching 12 months of age).

Notes:

- The indicator "The percentage of newborn babies visited by a public health nurse within 48 hours of discharge from hospital for the first time" was changed from "The percentage of newborn babies visited by a public health nurse within 48 hours of discharge from hospital for the first time" in 2016
- The indicator "The percentage of children who have had their 9–11 month developmental check on time (i.e. before reaching 12 months of age)" was changed from "The percentage of children reaching 12 months who have had their 7–9 month developmental check on time (i.e. before reaching 10 months of age)" in 2020.

Patient Treatment Register: National Treatment Purchase Fund

The Patient Treatment Register (PTR) is an administrative data source managed by the National Treatment Purchase Fund. This register of patients on inpatient/day case (surgical and medical) and outpatient waiting lists in Ireland has been operational since September 2005 and now includes information from 45 hospitals (see below). Not all of the 45 hospitals on the PTR treat paediatric patients. The following indicator draws on data from the PTR:

- Number of children on IPDC hospital waiting lists in December of each year
- Number of children on OP hospital waiting lists in December of each year.

Hospitals contributing to PTR:

Bantry General Hospital; Beaumont Hospital; Cappagh National Orthopaedic Hospital; Cavan General Hospital; CHI at Crumlin; CHI at Tallaght; CHI at Temple St; Connolly Hospital Blanchardstown; Cork University Hospital; Cork University Maternity Hospital; Croom Orthopaedic Hospital; Ennis Hospital; Galway University Hospitals; Letterkenny University Hospital; Lourdes Orthopaedic Hospital Kilcreene; Louth County Hospital; Mallow General Hospital; Mater Misericordiae University Hospital; Mayo University Hospital; Mercy University Hospital; Merlin Park Hospital Galway; Midland Regional Hospital Mullingar; Midland Regional Hospital Portlaoise; Midland Regional Hospital Tullamore; Monaghan Hospital; Naas General Hospital; Nenagh Hospital; Our Lady of Lourdes Hospital Drogheda; Our Lady's Hospital Navan; Portiuncula University Hospital; Roscommon University Hospital; Rotunda Hospital; Royal Victoria Eye and Ear Hospital; Sligo University Hospital; South Infirmary Victoria University Hospital; South Tipperary General Hospital; St. Columcille's Hospital; St. James's Hospital; St. John's Hospital Limerick; St. Luke's General Hospital Kilkenny; St. Michael's Hospital; St. Vincent's University Hospital; Tallaght University Hospital; University Hospital



Waterford; Wexford General Hospital.

Note: Kilcreene OP waiting list included with St. Luke's General Hospital Kilkenny. The Rotunda Hospital Dublin provides OP data only.

Primary and Post-Primary Pupil Annual School Attendance Reports: Tusla, the Child and Family Agency

National data on school attendance are drawn from annual attendance reports based on returns submitted by individual schools at primary and post-primary level under Section 21(6) of the Education (Welfare) Act 2000 and collated by Tusla, the Child and Family Agency. The following indicator draws on data from this source:

• Percentage of children who are absent from (a) primary school and (b) post-primary school for 20 days or more in the school year.

Response rates and further information can be found on the Tusla Website.

Programme of International Student Assessment (PISA) Survey: Educational Research Centre

The Programme of International Student Assessment (PISA) Survey is conducted in Ireland by the Educational Research Centre every three years. In addition to achievement tests, it employs self-report, self-completion questionnaires, which are completed by participating children in their schools. The following indicators draw on data from this source:

- Percentage of children aged 15 who report that their parents spend time just talking with them several times a week
- Percentage of children aged 15 who report that their parents discuss with them how well they are doing at school more than once a week
- Percentage of children aged 15 who report that their parents eat a main meal with them around a table more than once a week.

In 2015, PISA was administered on computer for the first time in most participating countries, including Ireland. In 2015, science literacy was the major assessment domain in PISA, meaning that it was comprehensively assessed, using a large number of test items. Reading literacy and mathematics literacy were minor assessment domains. The following indicators draw on data from this source:

- Mean score for children aged 15 based on the OECD-PISA Reading Literacy Scale
- Mean score for children aged 15 based on the OECD-PISA Mathematics Literacy



Scale

• Mean score for children aged 15 based on the OECD-PISA Science Literacy Scale

The "OECD average" refers to the OECD country average, i.e. it is the average of the country means and not of all the OECD students pooled together.

The measure of the social class status is based on the PISA ESCS (economic, social and cultural status) index, which was divided into thirds.

Children are identified as immigrants based on the questions that ask about the country in which they and their parents were born. The variable IMMIG in the OECD database is based on responses to these questions. For the analyses reported here, it was recoded into two categories: (1) first- and second-generation immigrant children; and (2) other (i.e. native) children. Children with missing responses for either their own country of birth or those of both parents were assigned a missing value on IMMIG.

Annual Report of the Committee Appointed to Monitor the Effectiveness of the Diversion Programme: An Garda Síochana

The Annual Report of the Committee Appointed to Monitor the Effectiveness of the Diversion Programme is published by An Garda Síochana. The following indicator draws on data from this source:

 Number of children aged 10–17 referred and total referrals to the Garda Diversion Programme.

Review of Adequacy Reports: Tusla, the Child and Family Agency

The data used to calculate the number of children in care for any given year for the Review of Adequacy and historically used to populate the State of the Nation's Children report are extracted from Tusla Q4 Addendum Return, which replaced the Department of Health and Children Child Care Interim Dataset and these data are returned from March of the following year onwards and have gone through a rigorous validation process. The previous State of the Nation's Children report was based on data from the HSE and its 32 LHO areas. Tusla, the Child and Family Agency report on 17 Administrative Areas. The following indicator draws on data from this source:

The number of children in the care of Tusla, the Child and Family Agency.



Data for the Review of Adequacy Report are also extracted from the Child Care Quarterly PI (performance indicator) Metrics. A breakdown of the number of referrals of child protection (abuse reports) for 2012 was unavailable due to the transition within the HSE Local Health Offices from the Child Care Interim Dataset reporting, which was deemed not suitable in its current format, to a new collection process called the Quarter 4 Addendum Return. As part of a process of transition, a review of the dataset metrics took place and an agreement was formulated to incorporate any of the dataset metrics that could be collected quarterly as part of the PI suite of metrics. The review formed the opinion that it was appropriate to report on the abuse referrals quarterly (in arrears) as part of the PI suite of metrics. Due to the timing of the change for 2012, it was not possible to collect the breakdown of abuse types for 2012; however, a process was put in place to return to collecting abuse referrals by type format for 2013, which has occurred successfully. Starting in 2020, the number of referrals also includes cases not requiring a social work response following screening. The counting of all reports of concern provides a more accurate account of activity and demand on child protection and welfare services. The following indicator draws on data from this source:

 The number of child welfare and protection reports to Tusla, the Child and Family Agency.

Summary of Social Housing Assessments: Department of Housing, Local Government, and Heritage

Under section 21 of the Housing (Miscellaneous Provisions) Act 2009, the Minister may, from time to time, direct housing authorities to prepare a summary of the social housing assessments carried out in their administrative area. This summary replaces the triennial (every three years) statutory summaries of need which were carried out under Section 9 of the Housing Act 1988. The following indicator draws on data from this source:

The number of households with children identified as being in need of social housing.

The 2013 summary was the first to be carried out under the new assessment regime commenced by the Social Housing Assessment Regulations 2011. In light of the statutory changes introduced in 2011, the methodology used to collect the 2013 data differs substantially from that used in previous years and therefore the 2013 figures are not directly comparable to previous years. The methodologies used to collect the 2008 and 2011 data also differed. These differences limit comparisons between the years. 2013 and 2016 are the only two years that are directly comparable in terms of the data collected. In preparing the 2013 assessment, Local Authorities reviewed their waiting lists to confirm that those on the list were still seeking and in need of social housing. Data represent net need for social housing support, meaning households that have been assessed as being qualified for support



(i.e. deemed eligible and in need of support) and whose housing need has not been met. These figures are net of duplicate applications (i.e. applicants who have applied to more than one Local Authority), those households appearing on multiple lists in different authorities, and households already in receipt of Social Housing Support, e.g. those in RAS, in receipt of HAP, or those that have applied for a transfer. The 2013 figures on the breakdown of households with children in Templemore, Co Tipperary are unavailable. Due to this omission, percentages are calculated on the basis of 89,744 households on the waiting list for social housing, as opposed to the complete figure of 89,872 households.

Prior to 2021, the household composition variable resulted in some anomalies, with most multi-adult households having been classified as single adult households (with and without children) and as couple households. The variable has been changed in 2021 to correct for this.

Vital Statistics: Central Statistics Office

Vital statistics relating to births, deaths and marriages are compiled by the Central Statistics Office on an annual basis. The following indicators draw on data from this source:

- Number of deaths of children
- Number of births to mothers aged 15–17
- Number of suicides by children aged 10–17.

Deaths are coded according to the 10th Revision of the International Statistical Classification of Diseases, Injuries and Causes of Death. Stillborn babies are excluded from infant mortality figures, which refer to deaths of children aged less than one year. The CSO reports quarterly on births, deaths and marriages registered during a three-month period. They also produce annual summary reports of births, deaths and marriages registered during the reference year. Not all deaths registered in a particular year will have occurred in that year. For example, a death occurring at the end of one year might not be registered until the beginning of the next year. There can be a delay of some months between occurrence and registration in the case of a death where an inquest is required. To account for this, the CSO also publishes an annual report of births and deaths that occurred during a particular year.

Suicides by children aged 10–17 years include a small number of suicides by children aged 10–14 years. Data for the most recent year are provisional.

WHO European Childhood Obesity Surveillance Initiative: National Nutrition Surveillance Centre

The WHO European Childhood Obesity Surveillance Initiative is conducted in Ireland by the



National Nutrition Surveillance Centre. This survey collects the weight, height and waist circumference of first class children (aged 6—7 years). The following indicator draws on data from this source:

• The percentage of first class children in BMI categories "normal", "overweight", and "obese".

Height is recorded to the last 0.1 cm, weight recorded to the last 0.1 kg and waist circumference to the last mm. Training in standardised measurement techniques and standard equipment is provided to qualified nutritionists who carry out the fieldwork.



Appendix 2: EU country classifications



EU-27

The EU-27 countries are: Austria, Belgium, Bulgaria, Croatia, Cyprus, Czechia, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, and Sweden.

EU-28

The EU-28 (including the United Kingdom), and the EU-27 (excluding the United Kingdom) are used in different sections of SONC according to the most recently available data.

Appendix 3: NUTS classifications



NUTS is an acronym for the EU Nomenclature of Territorial Units for Statistics. This classification was legally established by EU Regulation No. 1059/2003 on 29 May 2003. The eight Regional Authorities for Ireland (NUTS 3 Regions), which were established under the Local Government Act 1991, are set out below.

NUTS2 Code	NUTS 2 Name	NUTS3 Code	NUTS 3 Name	County
IEO4	Northern & Western	IEO41	Border	Donegal
				Sligo
				Leitrim
				Cavan
				Monaghan
		IE042	West	Galway
				Mayo
				Roscommon
IEO5	Southern	IE051	Mid-West	Clare
				Tipperary
				Limerick
		IE052	South East	Waterford
				Kilkenny
				Carlow
				Wexford
		IE053	South-West	Cork
				Kerry
IE06	Eastern & Midland	IE061	Dublin	Dublin
		IE062	Mid-East	Wicklow
				Kildare
				Meath
				Louth
		IE063	Midlands	Longford
				Westmeath
				Offaly
				Laois

STATE OF THE NATION'S CHILDREN



An Roinn Leanaí, Comhionannais, Míchumais, Lánpháirtíochta agus Óige Department of Children, Equality, Disability, Integration and Youth