An Roinn Leanaí
agus Gnóthaí Óige
Department of
Children and Youth Affairs

State of the Nation's Children




Ireland 2014

DECEMBER 2014
DEPARTMENT OF CHILDREN AND YOUTH AFFAIRS

State of the Nation's Children
Ireland 2014

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This report should be cited as follows:

Department of Children and Youth Affairs (2014) *State of the Nation's Children: Ireland 2014.* Dublin: Government Publications. Available at: www.dcya.ie

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Published by Government Publications, Dublin

ISBN 978-1-4064-2843-8

MINISTER'S FOREWORD

As Minister for Children and Youth Affairs, it is my great pleasure to launch the *State of the Nation's Children: Ireland 2014*. This is the fifth report in a biennial series prepared by the Department of Children and Youth Affairs in association with the Central Statistics Office and the Health Promotion Research Centre at the National University of Ireland, Galway.

This report provides socio-demographic data and measures of the child well-being indicators. These cover children's health, education and social, emotional and behavioural outcomes. It also looks at both formal and informal services and relationships. It aims to inform Government policy on children, young people and families.

The 2014 report is an updated version of the 2012 report. Through the continuation of the *State of the Nation's Children* series, my Department will continue to highlight and address the issues arising around the coverage, timeliness and use of data on child well-being.

The *State of the Nation's Children: Ireland 2014* report is an important resource that helps those who seek a better understanding of our children's lives. As such, it will help us towards our goal of making Ireland a better place for children, young people and their families.

Dr. James Reilly, TD
Minister for Children and Youth Affairs
December 2014

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ACKNOWLEDGEMENTS

We would like to thank all the people and organisations who provided data for or contributed to this 2014 report, especially:

Aidan Waterstone, Ian Folan and Paul Harrison, Health Service Executive (Review of Adequacy Reports); Albert O'Donoghue, Mary Hogan and Mairead O'Neill, Department of Children and Youth Affairs (ECCE Database); Anne-Marie Carew, Health Research Board (National Physical and Sensory Disability Database); Antoinette Daly, Health Research Board (National Psychiatric In-Patient Reporting System); Mirjam Heinen and Celine Murrin, National Nutrition Surveillance Centre (European Childhood Obesity Surveillance Initiative); Cormac Halpin, James Hegarty, Declan Smyth, Gerard Bradley and Dermot Corcoran, Central Statistics Office (Census of the Population); David Millar and Marian Brattman, Educational Research Centre (National Educational Welfare Board Database); Caraíosa Kelly and Fionnola Kelly, Health Research Board (National Intellectual Disability Database); Gillian Golden, Department of Education and Skills (Education Statistics); Aisling Mulligan, Department of Health (Hospital In-Patient Enquiry System); Helen McGrath, Department of the Environment, Community and Local Government (Triennial Assessment of Housing Needs); Brian Parsons and Jason Sibley, National Treatment Purchase Fund (Patient Treatment Register); Martina Curran and John Nolan, Health Service Executive (Outturn of Monthly Activity Data Returns and Quarterly Performance Indicator Returns); Patrick Foley, Marian McCann and Caitriona O'Brien, Central Statistics Office (European Union – Survey on Income and Living Conditions); Paul Corcoran and Eve Griffin, National Suicide Research Foundation (National Registry of Deliberate Self-Harm); Rachel Perkins and Gerry Shiel, Educational Research Centre (Programme for International Student Assessment); Marie Crowley, Louise O'Loughlin, Kieran O'Shea and Sandra Tobin, Central Statistics Office (Vital Statistics); Saoirse Nic Gabhainn, Michal Molcho and the HBSC Ireland Team, Health Promotion Research Centre, National University of Ireland, Galway, the International Coordinator – Professor Candace Currie, St. Andrews University, Scotland, and the International Databank Manager – Professor Oddrun Samdal, University of Bergen (Health Behaviour in School-aged Children (HBSC) Survey); Sarah Craig, Health Research Board (National Intellectual Disability Database and National Physical and Sensory Disability Database); Sarah Gee, Health Protection Surveillance Centre (Immunisation Uptake Statistics); Sheelagh Bonham, Economic and Social Research Institute (National Perinatal Reporting System); and Ruairi Gogan, Department of Justice and Equality.

We are also very grateful to all the people who provided feedback on individual indicators and to the children, families and others who provided the data included in this report.

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ACRONYMS

BCG	Bacillus Calmette-Guerin vaccine
BMI	Body Mass Index
CSO	Central Statistics Office
D_3	Diphtheria and Tetanus vaccine
DCYA	Department of Children and Youth Affairs
DEIS	Delivering Equality of Opportunity in Schools
$DTaP_3$	Diphtheria, Tetanus and Pertussis vaccine
ERC	Educational Research Centre
ESRI	Economic and Social Research Institute
EU	European Union
EU-27 average	Average result for 27 EU Member States
EU-28 average	Average result for 28 EU Members States
Eurostat	Statistical Office of the European Communities
EU-SILC	European Union Survey on Income and Living Conditions
GDP	Gross Domestic Product
GNP	Gross National Product
GNI	Gross National Income
HBSC	Health Behaviour in School-aged Children Survey
Hib_3	Haemophilus Influenzae Type B vaccine
HIPE	Hospital In-Patient Enquiry System
HPSC	Health Protection Surveillance Centre
HRB	Health Research Board
HSE	Health Service Executive
ICD-9-CM	Clinical modification of the 9th Revision of the International Classification of Diseases
ICD-10	World Health Organization's International Classification of Diseases
ICD-10-AM	Australian modification of ICD-10
IPDC	In-patient/day-case
$MenC_3$	Meningococcal Type C vaccine
MMR	Measles, Mumps and Rubella vaccine
NCVA	National Council for Vocational Awards
NEWB	National Educational Welfare Board
NIDD	National Intellectual Disability Database
NPIRS	National Psychiatric In-Patient Reporting System
NPRS	National Perinatal Reporting System

NPSDD	National Physical and Sensory Disability Database
NTPF	National Treatment Purchase Fund
NUTS	Nomenclature of Territorial Units for Statistics
OECD	Organization for Economic Co-operation and Development
OP	Out-patient
$Polio_3$	Poliomyelitis vaccine
PISA	Programme for International Student Assessment Survey
PTR	Patient Treatment Register
P_3	Pertussis vaccine
T_3	Tetanus vaccine
UNESCO	United Nations Educational, Scientific and Cultural Organization
WHO	World Health Organization

INTRODUCTION

This is Ireland's fifth biennial *State of the Nation's Children* report. These reports are compilations of data from many sources. They provide the most up-to-date data on the National Set of Child Well-being Indicators in one place and aim to:

- chart the well-being of children in Ireland;
- track changes over time;
- benchmark progress in Ireland relative to other countries;
- highlight policy issues arising.

OUTLINE OF REPORT

This *State of the Nation's Children* report is presented in four sections, as follows:

- **Part 1: Socio-demographics:** This section provides information on the child population, child mortality, family structure, parental education level, Traveller children, foreign national children, children with a disability and children as carers. Data are largely drawn from Vital Statistics and the Census of Population.
- **Part 2: Children's relationships:** This section provides information on children's relationships with their parents and peers, including, for example, levels of reported bullying and children's friendships. Data are drawn from the Health Behaviour of School-aged Children (HBSC) surveys and the Programme for International Student Assessment (PISA) surveys.
- **Part 3: Children's outcomes:** This section provides information on children's health outcomes, educational outcomes, and social, emotional and behavioural outcomes, including, for example, smoking, alcohol and cannabis use, births to teenage girls, health conditions and hospitalisation, educational attainment and self-reported happiness. Data are drawn from, among others, the Health Behaviour of School-aged Children (HBSC) surveys, the Programme for International Student Assessment (PISA) surveys, the National Intellectual Disability Database, the National Physical and Sensory Disability Database and the National Perinatal Reporting System.
- **Part 4: Formal and informal supports:** This section provides information on a range of supports, both formal and informal, including school, housing, antenatal care, immunisation and economic. Data are drawn from, among others, the European Union Survey on Income and Living Conditions (EU-SILC), Health Behaviour of School-aged Children (HBSC) surveys, National Perinatal Reporting System, Vital Statistics (CSO), Triennial Assessment of Housing Needs, and Programme for International Student Assessment (PISA) surveys.

NEW DEVELOPMENTS

This *State of the Nation's Children: Ireland 2014* represents an update of the 2012 report. In this report, there is new data for many of the indicators. The indicators for which there is no new data are those that draw on the Census of Population and the Health Behaviour of School-aged Children Survey; the latest source for these is 2011 and 2010 respectively.

One new measure has been introduced in order to complement existing data (*see below*).

MEASURE	DATA SOURCE
New indicator	
Number and percentage of children on out-patient (OP) waiting lists, by waiting time	Patient Treatment Register

KEY FINDINGS 2014

- The child population of Ireland increased by an estimated 17.9% between 2002 and 2014 (Population and Migration Estimates, 2014).
- 61.3% of all child deaths in 2013 occurred in the period of infancy (Vital Statistics, 2013).
- Approximately 1 in 6 children live in a lone-parent household (Census of the Population, 2011).
- 1 in 3 children live in families where the mother has a third-level qualification (Census of the Population, 2011).
- The number of Traveller children increased by 30.3% between 2006 and 2011 (Census of the Population, 2011).
- The number of foreign national children increased by 49.5% between 2006 and 2011 (Census of the Population, 2011).
- Almost 6% of the child population in Ireland have a disability (Census of the Population, 2011).
- 5.6 per 1,000 children provide regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability (Census of the Population, 2011).
- Older children find it more difficult to talk to their mothers when something is really bothering them (HBSC Survey, 2010).
- The percentage of children who report that they find it easy to talk to their father when something is really bothering them has increased from 48.1% in 1998 to 66.6% in 2010 (HBSC Survey, 2010).
- Significantly more girls than boys report that their parents spend time just talking with them (PISA Survey, 2012).
- Approximately half of 15-year-old children report that their parents discuss with them how well they are doing at school (PISA Survey, 2012).
- Approximately 73% of 15-year-old children report that their parents eat a main meal with them around a table (PISA Survey, 2012).
- Almost 9 out of 10 children have 3 or more friends of the same gender (HBSC Survey, 2010).

- 3 out of 4 children have a pet of their own or a pet in their family (HBSC Survey, 2010).
- Immigrant children, Traveller children and children with a disability and/or chronic illness are significantly more likely to report being bullied at school (HBSC Survey, 2010).
- Nearly 25% of the 4,220 Early Childhood Care and Education (ECCE) services contracted to deliver the Free Pre-School Year Scheme in 2013 met the higher capitation requirements (ECCE Database, 2013).
- Approximately 1 in every 9 primary school children misses 20 days or more in the school year (Primary Pupil Absence Report, 2010/11).
- Approximately 1 in every 6 post-primary school children misses 20 days or more in the school year (Post-Primary Pupil Absence Report, 2010/11).
- Retention rates to the completion of the Leaving Certificate have increased by almost 8 percentage points – from 82.3% of children in the 1997 school entry cohort to 90.1% of children in the 2007 school entry cohort (Education Statistics Database, 2013).
- There has been a significant increase in print reading literacy scores among 15-year-olds in Ireland (PISA Survey, 2012).
- Print mathematics literacy scores of 15-year-olds in Ireland are above the OECD average (PISA Survey, 2012).
- Science literacy scores of 15-year-olds in Ireland are above the OECD average (PISA Survey, 2012).
- The percentage of low birth weight babies has increased slightly over the last 5 years (National Perinatal Reporting System; Healthcare Pricing Office, 2013).
- Breastfeeding initiation rates have continued to increase (National Perinatal Reporting System; Healthcare Pricing Office, 2013).
- Half of the total hospital discharges of children in 2013 were children under 5 years of age (Hospital In-Patient Enquiry, 2013).
- The number of hospital discharges among children with a diagnosis of 'transport accidents' has decreased by 20% between 2009 and 2013 (Hospital In-Patient Enquiry, 2013).
- The percentage of children aged 7 classified as being in the 'normal' weight category has increased by 3 percentage points over the period 2010-2012 (WHO European Childhood Obesity Surveillance Initiative, 2012).

- Approximately 6 in 10 children registered as having an intellectual disability are boys (National Intellectual Disability Database, 2013).
- Approximately 1 in 3 children on the National Physical and Sensory Disability Database are registered as having multiple disabilities (National Physical and Sensory Disability Database, 2013).
- The number of child welfare and protection reports increased by 3.5% between 2012 and 2013 (Child Care Quarterly PI Metrics, 2013).
- The percentage of children aged 10-17 who report that students at their school participate in making the school rules has increased by more than 10 percentage points between 2006 and 2010 – from 22.5% in 2006 to 32.6% in 2010 (HBSC Survey, 2010).
- More than one-third of 15-year-old children report that reading is one of their favourite hobbies (PISA Survey, 2012).
- Cigarette smoking is significantly higher among Traveller children (HBSC Survey, 2010).
- The percentage of children aged 10-17 who report never smoking has increased from 50.8% in 1998 to 73.5% in 2010 (HBSC Survey, 2010).
- Traveller children are more likely to report being drunk at least once in the last 30 days (HBSC Survey, 2010).
- The percentage of children aged 10-17 who report never having had an alcoholic drink increased from 40.0% in 2002 to 54.1% in 2010 (HBSC Survey, 2010).
- Cannabis use is significantly higher among immigrant children, Traveller children and children with a disability and/or chronic illness (HBSC Survey, 2010).
- The number of babies born to girls aged 17 and under decreased by 47.8% between 2009 and 2013 (Vital Statistics, 2013).
- Approximately 1 in 4 children aged 15-17 report that they have had sex (HBSC Survey, 2010).
- Approximately 4 in 10 girls aged 15-17 report feeling happy with the way they are (HBSC Survey, 2010).
- Approximately 9 in 10 children aged 10-17 report being happy with their lives at present (HBSC Survey, 2010).

- In 2013, there were 13 suicides by children aged 10-17 (Vital Statistics, 2013).
- In 2013, more than twice as many girls as boys presented at hospital emergency departments following deliberate self-harm (National Registry of Deliberate Self-Harm, 2013).
- Children in Ireland have one of the highest levels of physical activity among 40 WHO countries and regions (HBSC Survey, 2010).
- Children in higher social classes are more likely to eat breakfast on 5 or more days per week (HBSC Survey, 2010).
- 1 in 5 children aged 10-17 report drinking soft drinks that contain sugar at least once a day (HBSC Survey, 2010).
- In 2011, Ireland's public expenditure on education was 6.2% of Gross Domestic Product (GDP) and was above the EU-27 average (Department of Education and Skills, 2011).
- In 2013, 17.9% of children were considered to be at risk of poverty (EU-SILC, 2013).
- In 2013, 11.7% of children experienced consistent poverty (EU-SILC, 2013).
- In 2011, there were 43,578 households with children identified as being in need of social housing (Triennial Assessment of Housing Needs, 2011).
- 9 in 10 children report feeling safe in the area where they live (HBSC Survey, 2010).
- The percentage of children who report that there are good places in their area to spend their free time has increased from approximately 42% in 2006 to 51% in 2010 (HBSC Survey, 2010).
- Over the 5-year period 2008-2012, the number of children referred to the Garda Diversion Programme has decreased by 42.8% (Report of the Committee Appointed to Monitor the Effectiveness of the Diversion Programme, 2012).
- Early antenatal care is lowest among younger pregnant women (National Perinatal Reporting System; Healthcare Pricing Office, 2013).
- In 2013, 84.2% of newborn babies were visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time (Outturn of Quarterly Performance Indicator Returns, 2013).
- In 2013, 88.1% of children had the 7-9 Month Developmental Check on time (Outturn of Monthly Activity Data Returns, 2013).

- In 2013, the national uptake rates of D_3, P_3, T_3, Hib_3, $Polio_3$ and $HepB_3$ for children at 24 months of age reached the target of 95% (Immunisation Uptake Statistics, 2013).
- The number of children on an in-patient/day-case waiting list awaiting treatment increased by 17.3% between 2010 and 2014 (Patient Treatment Register, 2014).
- The number of children in the care of the HSE increased by approximately 20.8% between 2008 and 2013 (Quarter 4 Addendum Return 2013 – Addendum 6).
- In 2013, the most common reason for children being admitted to psychiatric hospitals/units and child and adolescent units was for 'depressive disorders' (National Psychiatric In-Patient Reporting System, 2013).

PART 1:
SOCIO-DEMOGRAPHICS

CHILD POPULATION

The child population of Ireland increased by an estimated 17.9% between 2002 and 2014.

Measure

The number of children.

Key findings

- In 2014, there were an estimated 1,194,462 children living in Ireland. This accounted for about one-quarter (26%) of the total population of Ireland.

Differences by age, gender and over time

- 609,916 were boys and 584,546 were girls (*see Table 1*).

Table 1: Number of children under 18, by age and gender (April 2014)

	Male	Female	Total	Cumulative Total
Total population (age 0-17)	**609,916**	**584,546**	**1,194,462**	
Total population (all ages)	**2,279,685**	**2,329,942**	**4,609,627**	
Age				
Under 1	34,980	33,275	68,255	68,255
1	36,571	35,025	71,596	139,851
2	38,435	37,025	75,460	215,311
3	37,236	36,466	73,702	289,013
4	37,403	36,152	73,555	362,568
5	37,227	35,952	73,179	435,747
6	36,347	35,435	71,782	507,529
7	34,383	32,928	67,311	574,840
8	33,075	31,737	64,812	639,652
9	33,389	31,377	64,766	704,418
10	32,658	31,563	64,221	768,639
11	32,381	31,159	63,540	832,179
12	31,690	30,543	62,233	894,412

continued

Table 1 (*continued*)				
Age	**Male**	**Female**	**Total**	**Cumulative Total**
13	31,310	29,660	60,970	955,382
14	30,950	29,445	60,395	1,015,777
15	31,248	29,500	60,748	1,076,525
16	30,642	28,961	59,603	1,136,128
17	29,991	28,343	58,334	1,194,462

Source: Population and Migration Estimates, April 2014

- The percentage of children has decreased over the past 33 years, from 36.2% in 1981 to 25.9% in 2014 (*see Table 2*).
- The number of children fell over the period 1981 to 2002 from 1,246,443 to 1,013,031. Since 2002, it increased by 17.9%, to stand at 1,194,462 in 2014.

Table 2: Number of children and percentage of population under 18, by gender in April (selected years 1981-2014)						
Year	**Boys**	**% of all males**	**Girls**	**% of all females**	**Total**	**% of all ages**
1981	638,768	36.9	607,675	35.5%	1,246,443	36.2
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	25.0%	1,013,031	25.9
2006	531,506	25.1	505,246	23.9%	1,036,752	24.5
2011	586,050	25.8	558,463	24.2%	1,144,513	25.0
2012	595,900	26.3	569,482	24.6%	1,165,382	25.4
2013	603,222	26.5	578,277	24.9%	1,181,499	25.7
2014	609,916	26.8	584,546	25.1%	1,194,462	25.9

Source: Censuses of the Population; Population and Migration Estimates, April 2014

Differences by geographic location

- In 2013, Ireland had the highest percentage of children in the European Union (25.6%). The EU-28 average was 18.8% (*see Table 3 and Figure 1*).

Table 3: Percentage of population under 18 in January in the EU-28, by country (1993, 2003 and 2013)			
	1993	**2003**	**2013**
EU-28	*n/a*	**20.3**	**18.8**
Country			
Austria	21.2	20.0	17.7
Belgium	21.8	20.9	20.4
Bulgaria	23.6	18.6	16.2
Cyprus	29.6	25.6	20.2
Croatia	*n/a*	20.1	18.4
Czech Republic	25.3	19.4	17.5
Denmark	21.0	22.1	21.2
Estonia	25.8	20.9	18.5
Finland	23.1	21.4	19.9
France	24.1	22.9	22.2
Germany	19.4	18.5	16.0
Greece	22.7	18.6	17.6
Hungary	24.2	19.9	17.7
Ireland	**31.5**	**25.6**	**25.6**
Italy	19.3	17.2	16.8
Latvia	25.3	20.9	17.1
Lithuania	26.6	23.0	18.3
Luxembourg	21.1	22.2	20.6
Malta	*n/a*	23.0	18.1
Netherlands	21.9	22.2	20.6
Poland	29.1	22.7	18.3
Portugal	23.9	19.6	17.9
Romania	27.4	21.7	18.9
Slovakia	29.4	22.9	18.7
Slovenia	24.1	18.8	17.3
Spain	23.2	17.8	17.9
Sweden	22.0	21.7	20.2
United Kingdom	22.9	22.4	21.2

n/a = not available
Source: Eurostat

Figure 1: Percentage of children in EU-28, by country (2013)

Source: Eurostat

CHILD MORTALITY

61.3% of all child deaths in 2013 occurred in the period of infancy.

Measure

The number of deaths of children.

Key findings

- In 2013, 372 children died in Ireland. This equated to an overall child mortality rate of 3.1 per 10,000.

Differences by age, gender and over time

- 61.3% of all child deaths in 2013 occurred in the period of infancy (age less than 1 year) (*see Table 4*).

Table 4: Number and rate (per 10,000) of deaths of children, by age (2009-2013)

	2009		2010		2011		2012		2013	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
Total	**403**	**3.6**	**413**	**3.7**	**393**	**3.4**	**399**	**3.4**	**372**	**3.1**
Age										
Under 1	247	33.6	271	36.2	262	36.2	250	33.5	228	32.0
1-4	59	2.3	45	1.7	31	1.1	45	1.6	47	1.6
5-9	23	0.7	30	1.0	25	0.8	27	0.8	31	0.9
10-14	31	1.1	22	0.7	22	0.7	33	1.1	27	0.9
15-17	43	2.5	45	2.6	53	3.2	44	2.6	39	2.2

Source: Vital Statistics (CSO)

- The mortality rates were consistently higher for boys (3.4 per 10,000) than for girls (2.9 per 10,000) (*see Table 5*).

Table 5: Rate (per 10,000) of deaths of children, by gender (2009-2013)					
	2009	2010	2011	2012	2013
Total	**3.6**	**3.7**	**3.4**	**3.4**	**3.1**
Gender					
Boys	4.2	4.2	3.9	3.7	3.4
Girls	3.1	3.1	2.9	3.1	2.9

Source: Vital Statistics (CSO)

Differences by cause of death

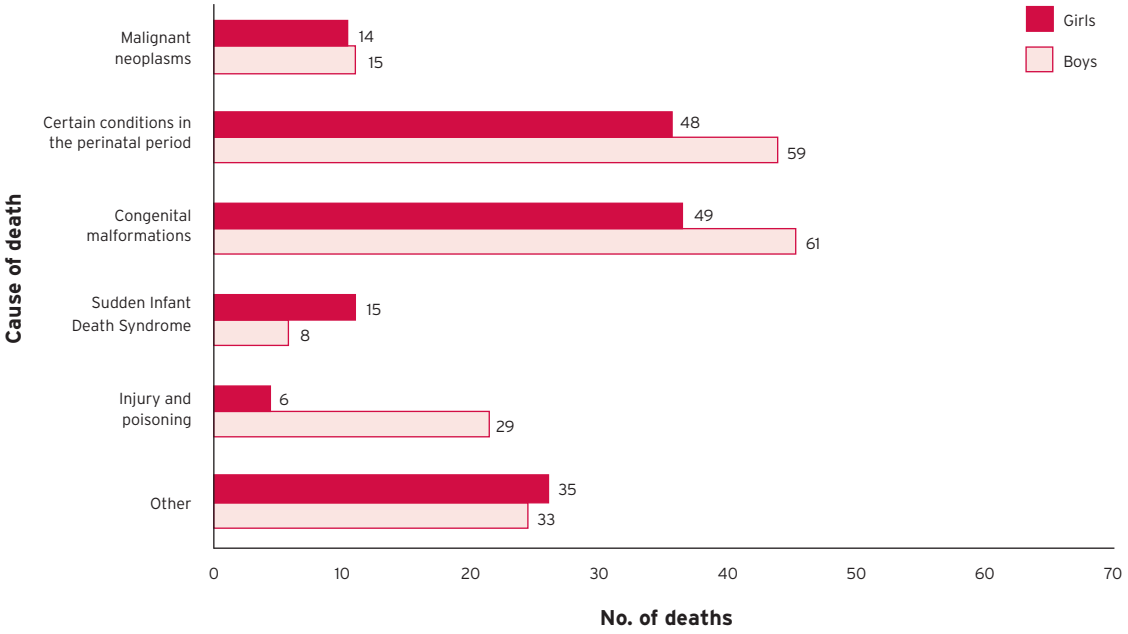
- In 2013, the category with the largest number of child deaths was '*congenital malformations*' (*see Table 6*). This was followed by '*certain conditions in the perinatal period*' and '*injury and poisoning*'.

Table 6: Number of deaths of children, by age and cause of death (2013)						
	Under 1	1-4	5-9	10-14	15-17	All children
	No.	No.	No.	No.	No.	No.
Total	**228**	**47**	**31**	**27**	**39**	**372**
Main cause						
Malignant neoplasms	2	7	10	7	3	29
Certain conditions in the perinatal period	107	–	–	–	–	107
Congenital malformations	88	13	3	4	2	110
Sudden Infant Death Syndrome	22	1	–	–	0	23
Injury and poisoning	–	6	5	4	20	35
Other	9	20	13	12	14	68

Source: Vital Statistics (CSO)

- More boys than girls died in each category according to cause of death, with the exception of '*Sudden Infant Death Syndrome*' and '*Other*' (*see Figure 2*). This was particularly notable in the category '*injury and poisoning*', where more than four times as many deaths were recorded for boys (29) than for girls (6).

Figure 2: Number of deaths of children, by gender and cause of death (2013)



Source: Vital Statistics (CSO)

Differences by geographic location

- In 2012, the infant mortality rate across the EU-28 ranged from 9.0 per 1,000 in Romania to 1.6 per 1,000 in Slovenia (*see Table 7*). The infant mortality rate in Ireland was 3.5 per 1,000. This was below the EU-28 average of 3.8 per 1,000.

Table 7: Infant mortality rate (per 1,000 live births) in EU-28, by country (1992, 2002 and 2012)			
	1992	2002	2012
EU-28	**9.3**	**5.4**	**3.8**
Country			
Austria	7.5	4.1	3.2
Belgium	8.2	4.5	3.8
Bulgaria	15.9	13.3	7.8
Croatia	11.6	7.0	3.6
Cyprus	11.1	4.7	3.5
Czech Republic	9.9	4.1	2.6
Denmark	6.6	4.4	3.4
Estonia	15.7	5.7	3.6
Finland	5.2	3.0	2.4
France	6.8	4.2	3.5
Germany	6.2	4.2	3.3
Greece	8.4	5.1	2.9
Hungary	14.1	7.2	4.9
Ireland	**6.5**	**5.0**	**3.5**
Italy	7.8	4.1	2.9
Latvia	17.6	9.8	6.3
Lithuania	16.3	8.1	3.9
Luxembourg	8.5	5.1	2.5
Malta	10.8	5.4	5.3
Netherlands	6.3	5.0	3.7
Poland	17.5	7.5	4.6
Portugal	9.2	5.0	3.4
Romania	13.3	17.3	9.0
Slovakia	12.6	7.6	5.8
Slovenia	8.9	3.8	1.6
Spain	7.1	4.1	3.1
Sweden	5.3	3.3	2.6
United Kingdom	6.6	5.2	4.1

Source: Vital Statistics (CSO); Eurostat

- In general, the child mortality rate across the EU-28 is higher for boys than for girls (*see Table 8*). Child mortality rates are also substantially higher in the age group 0-4 years than for any other age group.

Table 8: Rate (per 10,000) of deaths of children aged 0-19 across selected countries in EU-28, by age and gender (2012)								
	0-4 years		5-9 years		10-14 years		15-19 years	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
EU-28	**9.6**	**8.0**	**1.0**	**0.9**	**1.3**	**0.9**	**2.8**	**1.5**
Country								
Austria	7.7	7.4	0.9	0.8	1.4	1.0	2.8	1.9
Belgium	10.5	7.6	1.1	1.0	1.5	0.9	3.0	1.5
Bulgaria	22.0	15.6	2.2	2.1	3.2	1.6	5.6	2.6
Croatia	9.3	8.0	1.0	1.1	1.5	0.9	3.3	1.7
Cyprus	11.2	6.7	0.4	1.8	3.2	0.8	3.3	0.0
Czech Republic	6.9	5.0	0.7	1.2	1.7	0.8	3.2	2.2
Denmark	7.3	7.4	1.1	0.4	0.6	0.6	1.8	1.0
Estonia	8.2	8.7	1.1	0.9	1.3	0.7	3.1	1.1
Finland	6.0	5.9	0.8	1.3	1.1	0.7	2.7	1.7
France	9.6	7.7	0.9	0.7	1.1	0.9	2.7	1.3
Germany	8.3	7.1	0.9	0.8	1.1	0.6	2.7	1.3
Greece	7.2	6.0	1.1	0.8	1.1	0.7	3.0	1.9
Hungary	10.7	10.9	0.8	1.2	2.2	1.0	2.4	1.9
Ireland	**8.6**	**7.4**	**0.9**	**0.8**	**1.1**	**1.1**	**3.1**	**2.1**
Italy	7.0	6.2	0.7	0.7	1.0	0.8	2.4	1.2
Latvia	14.8	12.6	2.2	1.0	1.3	0.9	5.9	3.1
Lithuania	10.7	8.1	1.9	2.0	2.6	0.9	6.1	2.2
Luxembourg	6.0	4.8	0.0	0.0	0.6	0.7	5.1	3.2
Malta	11.5	13.4	1.0	0.0	0.9	1.8	0.0	2.7
Netherlands	9.3	7.5	1.2	0.8	1.2	0.8	2.2	1.5
Poland	11.2	9.1	1.3	1.0	1.6	1.2	4.2	1.9
Portugal	7.6	7.3	0.9	1.3	1.4	1.1	2.5	1.0
Romania	21.9	19.1	2.6	1.8	3.8	1.9	5.2	3.0
Slovakia	15.0	11.7	1.6	0.9	2.0	1.0	4.8	2.0
Slovenia	4.6	4.7	1.3	0.0	0.4	1.3	2.3	1.0
Spain	7.2	6.4	1.0	0.8	1.1	0.7	2.2	1.1
Sweden	7.0	5.4	0.8	0.5	1.0	1.1	2.6	1.8
United Kingdom	10.7	8.5	1.0	0.8	1.0	0.7	2.1	1.3

Source: Eurostat, 2012

FAMILY STRUCTURE

Approximately 1 in 6 children live in a lone-parent household.

Measure

The number of children living in a lone-parent household.

Key findings

- In 2011, 18.3% of children lived in a lone-parent household.

Differences by population groups

- 23.5% of Traveller children, 17.7% of foreign national children and 27.3% of children with a disability lived in a lone-parent household (*see Table 9*).

Table 9: Number and percentage of children living in a lone-parent household, by population groups (2011)

	No.	% of all children
All children	**202,444**	**18.3**
Population groups		
Traveller children	3,165	23.5
Foreign national children	15,679	17.7
Children with a disability	17,130	27.3

Source: Census of the Population, 2011

Differences by age and gender

- More than 1 in 5 children (21.3%) aged 15-17 lived in a lone-parent household (*see Table 10*).
- The percentage of boys and girls living in a lone-parent household was broadly similar.

Table 10: Number and percentage of children living in a lone-parent household, by age and gender (2011)						
	Boys		Girls		Total	
	No.	% of all boys	No.	% of all girls	No.	% of all children
All children	**103,493**	**18.3**	**98,951**	**18.4**	**202,444**	**18.3**
Age						
0-4	27,168	15.4	25,841	15.4	53,009	15.4
5-9	29,058	18.3	27,881	18.4	56,939	18.3
10-14	30,018	20.2	28,768	20.3	58,786	20.2
15-17	17,249	21.2	16,461	21.4	33,710	21.3

Source: Census of the Population, 2011

Differences by geographic location

- Overall, 18.3% of children lived in a lone-parent household in 2011 (*see Table 11*). This percentage ranged from 12.6% in Co. Leitrim to 23.9% in Co. Dublin.

Table 11: Number and percentage of children living in a lone-parent household, by county (2011)		
	No. of children living in a lone-parent household in State/County	Children living in a lone-parent household as a percentage of all children in State/County
Total	**202,444**	**18.3**
County		
Carlow	2,443	17.9
Cavan	2,636	13.5
Clare	4,348	14.7
Cork	20,272	16.4
Donegal	7,760	18.4
Dublin	65,464	23.9
Galway	8,622	14.7
Kerry	5,407	16.2
Kildare	8,954	15.6
Kilkenny	3,465	14.5
Laois	3,522	15.9
Leitrim	988	12.6

continued

Table 11 (*continued*)

County	No. of children living in a lone-parent household in State/County	Children living in a lone-parent household as a percentage of all children in State/County
Limerick	8,423	19.1
Longford	2,010	19.5
Louth	6,682	20.7
Mayo	4,447	14.2
Meath	6,946	13.4
Monaghan	2,194	14.1
North Tipperary	2,707	15.2
Offaly	3,299	16.2
Roscommon	2,080	13.4
Sligo	2,380	16.0
South Tipperary	4,223	19.5
Waterford	5,744	20.8
Westmeath	3,726	17.0
Wexford	7,337	19.6
Wicklow	6,365	18.2

Source: Census of the Population, 2011

PARENTAL EDUCATION LEVEL

1 in 3 children live in families where the mother has a third-level qualification.

Measure

The percentage of children whose mothers have attained (a) primary, (b) lower secondary, (c) upper secondary or (d) third-level education.

Key findings

- In 2011, 4.8% of children lived in families where the mother had either no formal education or primary education only; 56.1% lived in families where the highest level of educational attainment by mothers was a lower or upper secondary education; and 36.7% lived in families where the mother had a third-level degree or higher.

Differences by population groups

- Approximately 7 out of every 10 Traveller children (67.3%) lived in families where the mother had either no formal education or primary education only, while 38.0% of foreign national children lived in families where the mother had a third-level degree or higher (*see Table 12*).

Table 12: Percentage of children, by population groups and educational attainment of mother (2011)

Highest level of education attained by mother	All children	Traveller children	Foreign national children	Children with a disability
Primary (including no formal education)	4.8	67.3	5.6	7.9
Lower secondary	14.2	17.7	7.8	19.4
Upper secondary	41.9	7.1	43.3	42.1
Third level (degree or higher)	36.7	0.7	38.0	28.3
Not stated/not available	2.4	7.2	5.4	2.3

Source: Census of the Population, 2011

Differences by age

- The percentage of children living in families where the mother had a third-level degree or higher ranged from 26.7% for households with children aged 15-17 to 46.2% for households with children aged 0-4 (*see Table 13*).

Table 13: Percentage of children, by age and educational attainment of mother (2011)

Highest level of education attained by mother	0-4 years	5-9 years	10-14 years	15-17 years	All children
Primary (including no formal education)	3.3	4.3	5.7	7.5	4.8
Lower secondary	9.2	13.1	17.6	20.8	14.2
Upper secondary	39.0	42.7	44.1	42.6	41.9
Third level (degree or higher)	46.2	37.4	30.2	26.7	36.7
Not stated/not available	2.3	2.4	2.4	2.4	2.4

Source: Census of the Population, 2011

Differences by geographic location

- Overall, 4.8% of children lived in families where the mother had either no formal education or primary education only. This percentage ranged from 3.3% in Co. Cork to 9.0% in Co. Donegal (*see Table 14 and Figure 3*).

Table 14: Number of children, by county and educational attainment of mother (2011)

	Primary (including no formal education)	Lower secondary	Upper secondary	Third level (degree or higher)	Not stated/ not available	Total
Total	**48,040**	**141,329**	**416,407**	**364,299**	**23,590**	**993,665**
County						
Carlow	599	1,714	5,391	3,951	429	12,084
Cavan	1,016	2,542	8,285	5,394	495	17,732
Clare	963	3,362	11,725	10,288	571	26,909
Cork	3,689	14,784	49,133	43,006	2,518	113,130
Donegal	3,436	6,740	14,857	12,394	795	38,222
Dublin	13,203	36,392	90,350	93,803	6,867	240,615
Galway	2,286	5,568	21,190	22,711	988	52,743
Kerry	1,271	4,185	12,957	11,204	767	30,384

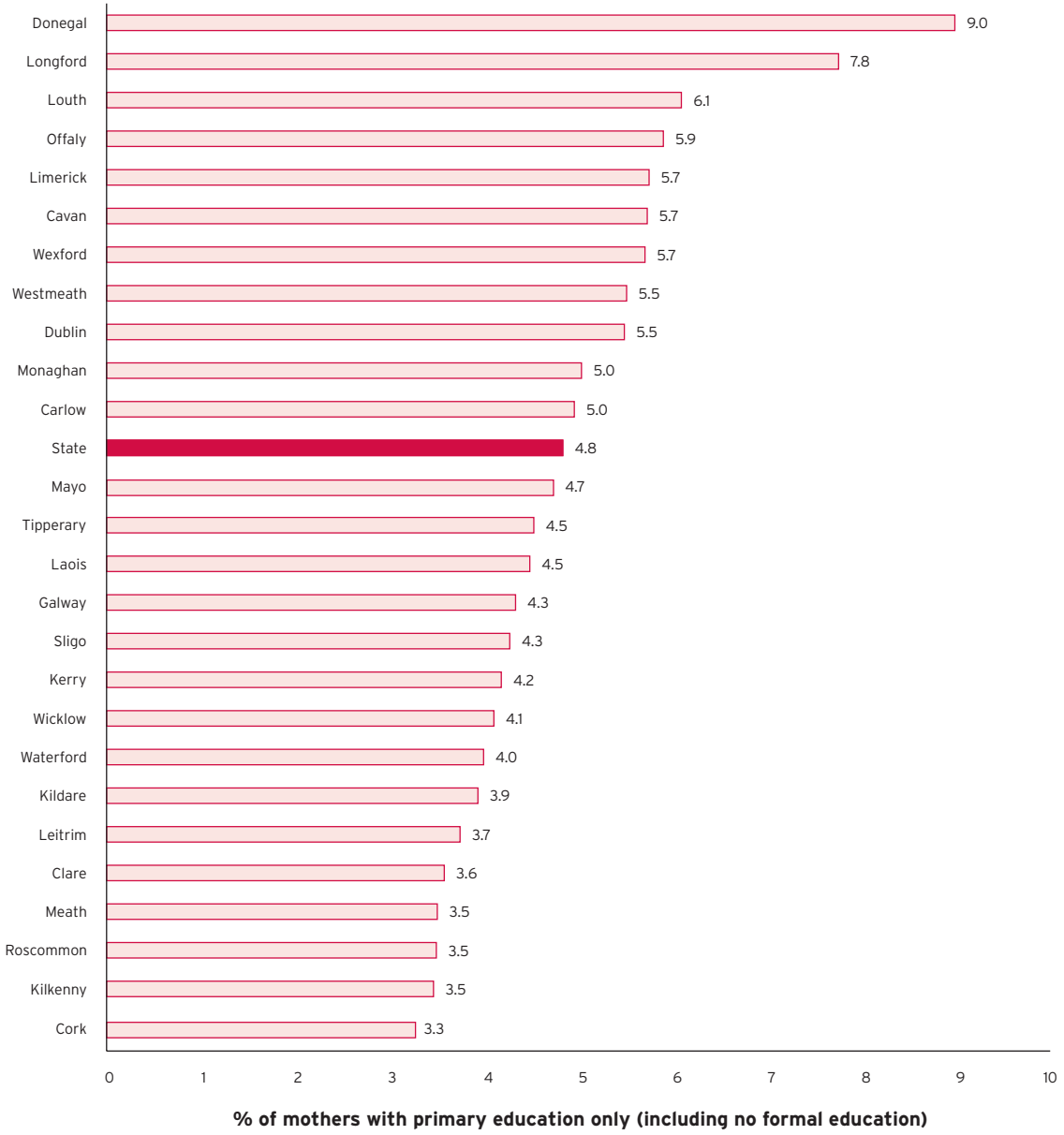
continued

Table 14 (*continued*)

County	Primary (including no formal education)	Lower secondary	Upper secondary	Third level (degree or higher)	Not stated/ not available	Total
Kildare	2,050	6,544	22,238	19,926	1,332	52,090
Kilkenny	758	2,841	9,411	8,461	407	21,878
Laois	897	2,830	9,375	6,356	541	19,999
Leitrim	269	821	3,282	2,702	107	7,181
Limerick	2,280	6,081	16,351	14,125	820	39,657
Longford	705	1,294	4,069	2,695	325	9,088
Louth	1,736	5,110	11,747	9,253	653	28,499
Mayo	1,359	3,593	13,386	9,887	482	28,707
Meath	1,664	6,436	21,239	17,074	1,065	47,478
Monaghan	712	2,421	6,176	4,576	262	14,147
Offaly	1,091	3,097	8,355	5,501	446	18,490
Roscommon	500	1,582	6,634	5,303	289	14,308
Sligo	583	1,523	5,522	5,653	364	13,645
Tipperary	1,624	5,127	16,663	11,666	787	35,867
Waterford	985	3,654	10,862	8,648	505	24,654
Westmeath	1,083	2,890	8,430	6,675	573	19,651
Wexford	1,964	6,074	15,713	10,102	568	34,421
Wicklow	1,317	4,124	13,066	12,945	634	32,086

Source: Census of the Population, 2011

Figure 3: Percentage of children whose mothers have no formal education or primary education only, by county (2011)



Source: Census of the Population, 2011

TRAVELLER CHILDREN

The number of Traveller children increased by 30.3% between 2006 and 2011.

Measure

The number of Traveller children.

Key findings

- In 2011, there were 14,245 Traveller children in Ireland. This accounted for 1.2% of the total child population and 48.2% of the total Traveller population.

Differences by age, gender and over time

- The number of Traveller boys (7,334) and girls (6,911) was broadly similar (*see Table 15*).

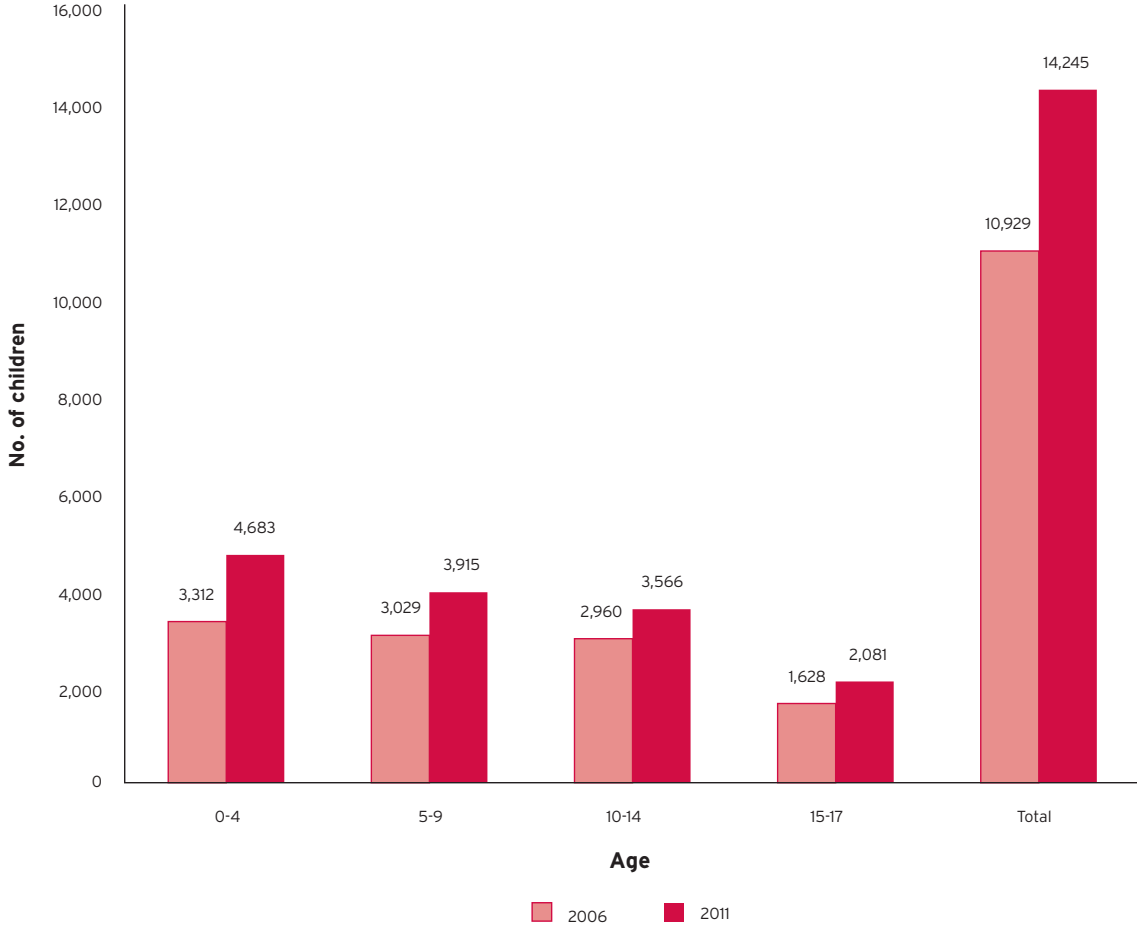
Table 15: Number of Traveller children, by age and gender (2011)

	Boys	Girls	Total
Total (Traveller population)	**14,625**	**14,948**	**29,573**
Total (Traveller children)	**7,334**	**6,911**	**14,245**
Age			
0-4	2,410	2,273	4,683
5-9	1,987	1,928	3,915
10-14	1,827	1,739	3,566
15-17	1,110	971	2,081

Source: Census of the Population, 2011

- The number of Traveller children increased by 30.3%, from 10,929 in 2006 to 14,245 in 2011 (*see Figure 4*).
- Almost one-third of Traveller children (32.9%) were less than 5 years old.

Figure 4: Number of Traveller children, by age (2006 and 2011)



Source: Censuses of the Population

Differences by geographic location

- Overall, 12.4 per 1,000 children were Travellers. Rates ranged from 6.6 per 1,000 in Co. Cork to 35.3 per 1,000 in Co. Longford (*see Table 16*).

Table 16: Number and rate (per 1,000) of Traveller children, by county (2011)			
	No. of Traveller children in State/County	No. of children in State/County	Rate per 1,000 children in State/County
Total	**14,245**	**1,148,687**	**12.4**
County			
Carlow	186	14,139	13.2
Cavan	194	20,194	9.6
Clare	468	30,666	15.3
Cork	846	128,448	6.6
Donegal	377	43,732	8.6
Dublin	2,884	287,258	10.0
Galway	2,045	61,194	33.4
Kerry	381	34,940	10.9
Kildare	490	59,449	8.2
Kilkenny	266	25,015	10.6
Laois	350	22,932	15.3
Leitrim	139	8,051	17.3
Limerick	627	46,067	13.6
Longford	374	10,593	35.3
Louth	262	33,292	7.9
Mayo	708	32,514	21.8
Meath	448	53,400	8.4
Monaghan	115	16,031	7.2
Offaly	463	21,149	21.9
Roscommon	164	16,076	10.2
Sligo	239	15,541	15.4
Tipperary	644	40,760	15.8
Waterford	199	28,908	6.9
Westmeath	400	23,052	17.4
Wexford	663	38,842	17.1
Wicklow	313	36,444	8.6

Source: Census of the Population, 2011

FOREIGN NATIONAL CHILDREN

The number of foreign national children increased by 49.5% between 2006 and 2011.

Measure

The number of foreign national children.

Key findings

- In 2011, there were 93,005 foreign national children in Ireland. This accounted for 8.3% of the total child population of Ireland.

Differences by age, gender and over time

- The number of foreign national boys (47,214) and girls (45,791) was broadly similar (*see Table 17*).

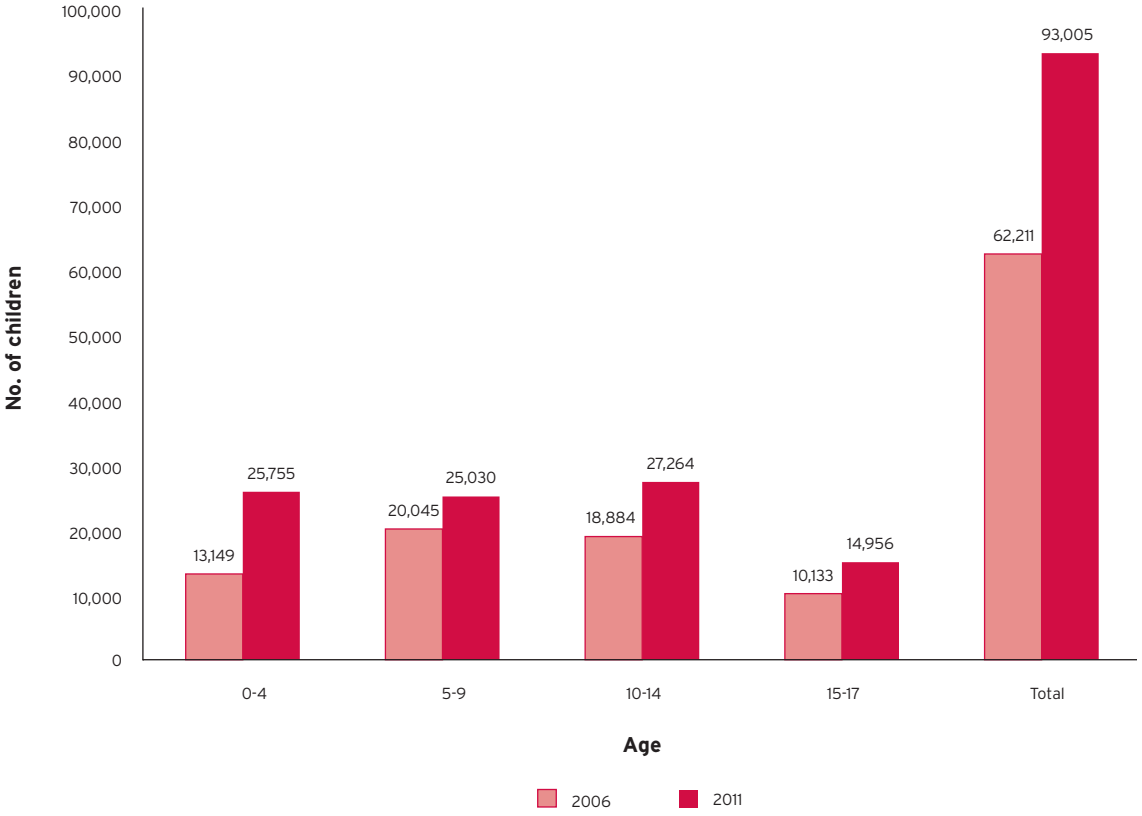
Table 17: Number of foreign national children, by age and gender (2011)

	Boys	Girls	Total
Total	**47,214**	**45,791**	**93,005**
Age			
0-4	12,911	12,844	25,755
5-9	12,784	12,246	25,030
10-14	13,940	13,324	27,264
15-17	7,579	7,377	14,956

Source: Census of the Population, 2011

- The number of foreign national children increased by 49.5%, from 62,211 in 2006 to 93,005 in 2011 (*see Figure 5*).

Figure 5: Number of foreign national children, by age (2006 and 2011)



Source: Censuses of the Population

Differences by geographic location

- Overall, 82.5 per 1,000 children were foreign national (*see Table 18*). Rates ranged from 59.4 per 1,000 in Co. Donegal to 118.3 per 1,000 in Co. Longford.

Table 18: Number and rate (per 1,000) of foreign national children, by county (2011)			
	No. of foreign national children in State/County	No. of children in State/County	Rate per 1,000 children in State/County
Total	**93,005**	**1,126,919**	**82.5**
County			
Carlow	1,283	13,983	91.8
Cavan	1,859	19,942	93.2
Clare	2,195	30,160	72.8
Cork	9,422	126,205	74.7
Donegal	2,545	42,813	59.4
Dublin	27,270	281,040	97.0
Galway	5,110	59,905	85.3
Kerry	2,762	33,931	81.4
Kildare	4,542	58,484	77.7
Kilkenny	1,569	24,367	64.4
Laois	1,931	22,648	85.3
Leitrim	750	7,937	94.5
Limerick	3,204	45,261	70.8
Longford	1,238	10,468	118.3
Louth	2,697	32,861	82.1
Mayo	2,676	31,762	84.3
Meath	4,003	52,690	76.0
Monaghan	1,566	15,827	98.9
Offaly	1,563	20,738	75.4
Roscommon	1,440	15,866	90.8
Sligo	1,110	15,262	72.7
Tipperary	3,020	40,170	75.2
Waterford	2,173	28,275	76.9
Westmeath	2,124	22,503	94.4
Wexford	2,704	38,164	70.9
Wicklow	2,249	35,657	63.1

Source: Census of the Population, 2011

- More than 1 in 4 foreign national children (26.5%) reported their nationality as Polish (*see Table 19*). British or Northern Irish was the next most common nationality (16.0% of the total). The only other national minorities with 5% or more of the total number of foreign national children were Lithuanians and Nigerians.

Table 19: Number and percentage of foreign national children, by nationality (2011)

	No.	%
Total	**93,005**	**100.0**
Nationality		
Poland	24,611	26.5
Great Britain	14,870	16.0
Lithuania	7,417	8.0
Nigeria	4,635	5.0
Latvia	4,158	4.5
India	4,127	4.4
Philippines	2,998	3.2
Romania	2,942	3.2
USA	2,922	3.1
Pakistan	1,321	1.4
Slovakia	1,309	1.4
Germany	1,279	1.4
Hungary	1,127	1.2
Brazil	906	1.0
Other	18,383	19.8

Source: Census of the Population, 2011

CHILDREN WITH A DISABILITY

Almost 6% of the child population in Ireland have a disability.

Measure

The number of children with a disability.

Key findings

- In 2011, there were 66,437 children with a disability in Ireland. This accounted for 5.8% of the total child population of Ireland.

Differences by age and gender

- Almost two-thirds of children with a disability (62%) were boys (*see Table 20*).

Table 20: Number of children with a disability, by age and gender (2011)

	Boys	Girls	Total
Total	**41,215**	**25,222**	**66,437**
Age			
0-4	5,986	4,098	10,084
5-9	12,517	7,045	19,562
10-14	14,736	8,676	23,412
15-17	7,976	5,403	13,379

Source: Census of the Population, 2011

Differences by geographic location

- Overall, 57.8 per 1,000 children had a disability. Rates ranged from 45.2 per 1,000 in Co. Monaghan to 65.4 per 1,000 in Co. Limerick (*see Table 21*).

Table 21: Number and rate (per 1,000) of children with a disability, by county (2011)			
	No. of children with a disability in State/County	No. of children in State/County	Rate per 1,000 children in State/County
Total	**66,437**	**1,148,687**	**57.8**
County			
Carlow	874	14,139	61.8
Cavan	972	20,194	48.1
Clare	1,781	30,666	58.1
Cork	7,801	128,448	60.7
Donegal	2,475	43,732	56.6
Dublin	16,810	287,258	58.5
Galway	3,282	61,194	53.6
Kerry	2,036	34,940	58.3
Kildare	3,556	59,449	59.8
Kilkenny	1,392	25,015	55.6
Laois	1,394	22,932	60.8
Leitrim	450	8,051	55.9
Limerick	3,012	46,067	65.4
Longford	571	10,593	53.9
Louth	1,668	33,292	50.1
Mayo	1,569	32,514	48.3
Meath	2,769	53,400	51.9
Monaghan	725	16,031	45.2
Offaly	1,277	21,149	60.4
Roscommon	774	16,076	48.1
Sligo	921	15,541	59.3
Tipperary	2,494	40,760	61.2
Waterford	1,600	28,908	55.3
Westmeath	1,367	23,052	59.3
Wexford	2,502	38,842	64.4
Wicklow	2,365	36,444	64.9

Source: Census of the Population, 2011

CHILDREN AS CARERS

5.6 per 1,000 children provide regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability.

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.

Key findings

- In 2011, there were 6,449 children who provided regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability in Ireland. This accounted for 0.6% of the total child population of Ireland.

Differences by age and gender

- The number of boys (3,152) and girls (3,297) who provided regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability was broadly similar (*see Table 22*).

Table 22: Number of children who provide regular unpaid personal help for a friend or family member, by age and gender (2011)

	Boys	Girls	Total
Total	**3,152**	**3,297**	**6,449**
Age			
0-4	395	408	803
5-9	529	506	1,035
10-14	1,150	1,240	2,390
15-17	1,078	1,143	2,221

Source: Census of the Population, 2011

Differences by geographic location

- Overall, 5.6 per 1,000 children provided regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability. Rates ranged from 4.3 per 1,000 in Co. Louth to 8.2 per 1,000 in Co. Leitrim (*see Table 23*).

Table 23: Number and rate (per 1,000 children) of children who provide regular unpaid personal help for a friend or family member, by county (2011)

	No. of children as carers in State/County	No. of children in State/County	Rate per 1,000 children in State/County
Total	**6,449**	**1,148,687**	**5.6**
County			
Carlow	76	14,139	5.4
Cavan	89	20,194	4.4
Clare	208	30,666	6.8
Cork	807	128,448	6.3
Donegal	284	43,732	6.5
Dublin	1,341	287,258	4.7
Galway	367	61,194	6.0
Kerry	272	34,940	7.8
Kildare	275	59,449	4.6
Kilkenny	134	25,015	5.4
Laois	125	22,932	5.5
Leitrim	66	8,051	8.2
Limerick	305	46,067	6.6
Longford	72	10,593	6.8
Louth	143	33,292	4.3
Mayo	234	32,514	7.2
Meath	250	53,400	4.7
Monaghan	100	16,031	6.2
Offaly	147	21,149	7.0
Roscommon	109	16,076	6.8
Sligo	103	15,541	6.6
Tipperary	273	40,760	6.7
Waterford	147	28,908	5.1
Westmeath	156	23,052	6.8
Wexford	207	38,842	5.3
Wicklow	159	36,444	4.4

Source: Census of the Population, 2011

PART 2: CHILDREN'S RELATIONSHIPS

covering
Relationships with parents
and
Relationships with peers

RELATIONSHIP WITH MOTHERS

Older children find it more difficult to talk to their mothers when something is really bothering them.

Measure

The percentage of children aged 10-17 who report that they find it easy to talk to their mother when something is really bothering them.

Key findings

- In 2010, 81.8% of children aged 10-17 reported that they find it easy to talk to their mother when something is really bothering them.

Differences by population groups

- When compared to other children, children with a disability and/or chronic illness were less likely to report that they find it easy to talk to their mother when something is really bothering them (*see Table 24*). This difference was statistically significant.
- There were no significant differences observed between Traveller and other children and between immigrant and other children.

Table 24: Percentage of children aged 10-17 who report that they find it easy to talk to their mother when something is really bothering them, by population groups (2010)

	%
All children	**81.8**
Traveller status	
Traveller children	79.5
All other children	81.8
Immigrant status	
Immigrant children	81.0
All other children	81.9
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	78.8
All other children	82.5

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

- Statistically significant differences were observed across age and gender, with a lower percentage of older children and of boys reporting that they find it easy to talk to their mother when something is really bothering them (*see Table 25*).
- The differences observed across social class categories were not statistically significant.
- The percentage of children who report that they find it easy to talk to their mother when something is really bothering them has increased from 74.0% in 1998 to 81.8% in 2010.

Table 25: Percentage of children aged 9-17 who report that they find it easy to talk to their mother when something is really bothering them, by age, gender and social class (1998, 2002, 2006 and 2010)

	1998	2002	2006	2010		
	Total (%)	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	**74.0**	**77.6**	**78.0**	**81.0**	**82.6**	**81.8**
Age						
9**	*n/a*	*n/a*	87.5	84.3	83.6	84.0
10-11	81.2	86.7	88.4	88.9	89.2	89.1
12-14	76.4	79.6	81.0	83.1	84.7	83.9
15-17	65.0	71.1	70.8	75.8	77.3	76.5
Social class						
SC 1-2	71.6	76.2	78.2	79.7	83.3	81.5
SC 3-4	75.0	78.5	78.8	82.0	83.5	82.7
SC 5-6	75.6	80.1	79.0	80.5	81.5	81.0

* Refers to children aged 10-17 only.

** Refers to data collected separately in a Middle Childhood Study. These children are not part of the core HBSC sample. Further details can be found in the technical notes in Appendix 1.

n/a = not available

Source: HBSC Surveys

Differences by geographic location

- Overall, 81.8% of children report that they find it easy to talk to their mother when something is really bothering them. There were no significant differences observed across regions (*see Table 26*).

Table 26: Percentage of children aged 10-17 who report that they find it easy to talk to their mother when something is really bothering them, by NUTS Region (2010)

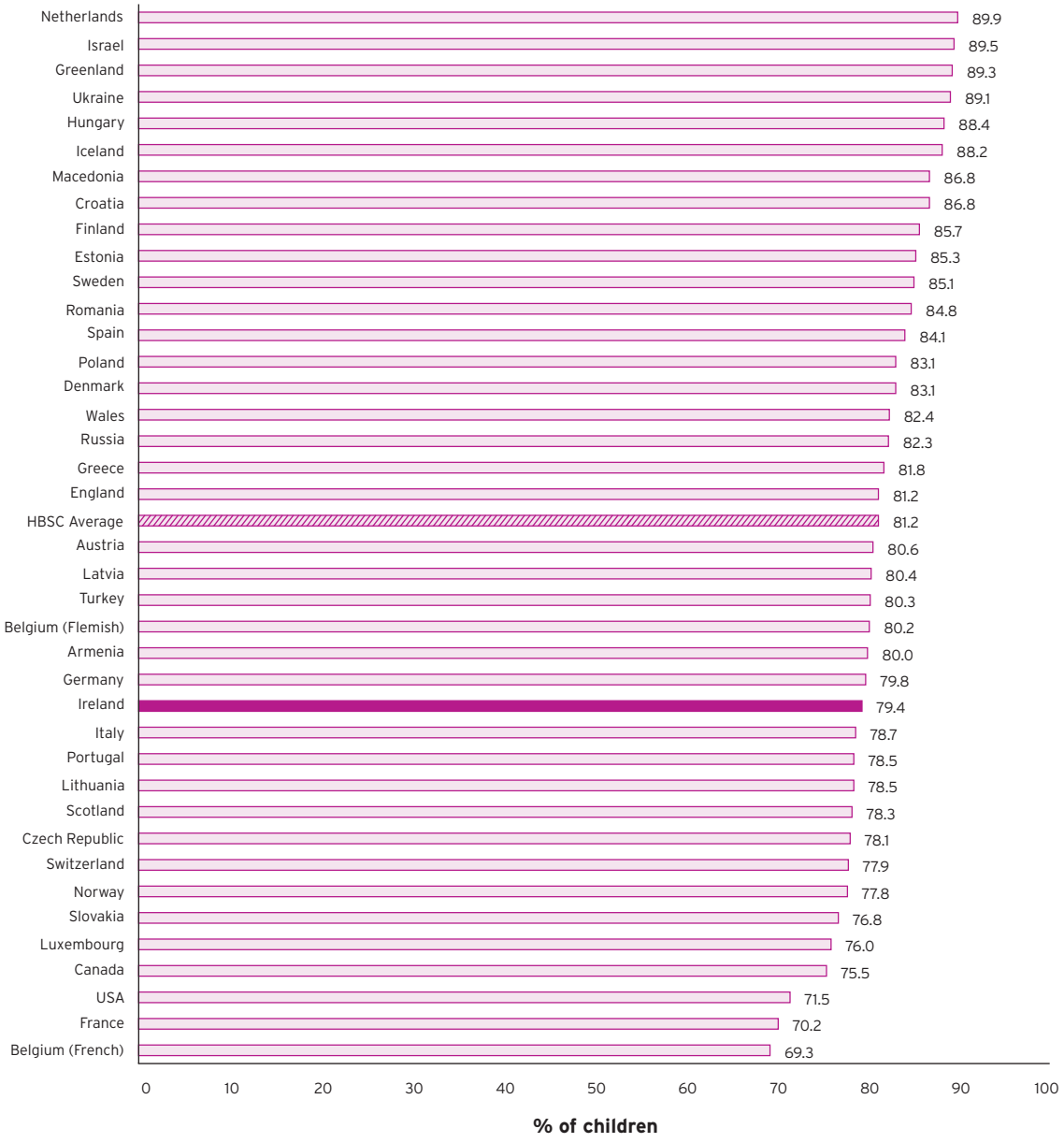
	%
All children	**81.8**
NUTS Region	
Border	82.2
Dublin	81.2
Midlands	80.8
Mid-East	84.5
Mid-West	81.6
South-East	82.9
South-West	81.2
West	80.8

Source: HBSC Survey, 2010

International comparisons

- Across 39 countries and regions, the average percentage of children who reported that they find it easy to talk to their mother when something was really bothering them was 81.2% (*see Figure 6*). This ranged from 69.3% in Belgium (French) to 89.9% in the Netherlands. The corresponding percentage in Ireland was 79.4%. This was below the HBSC average of 81.2%. (Note: International comparisons are based on data from children aged 11, 13 and 15 only.)

Figure 6: Percentage of children aged 11, 13 and 15 who report that they find it easy to talk to their mother when something is really bothering them, by country (2010)



Source: HBSC Survey, 2010

RELATIONSHIP WITH FATHERS

The percentage of children who report that they find it easy to talk to their father when something is really bothering them has increased from 48.1% in 1998 to 66.6% in 2010.

Measure

The percentage of children aged 10-17 who report that they find it easy to talk to their father when something is really bothering them.

Key findings

- In 2010, 66.6% of children aged 10-17 reported that they find it easy to talk to their father when something was really bothering them.

Differences by population groups

- When compared to other children, there were no significant differences in the percentages of Traveller children, immigrant children and children with a disability and/or chronic illness who reported that they find 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 report that they find it easy to talk to their father when something is really bothering them, by population groups (2010)

	%
All children	**66.6**
Traveller status	
Traveller children	68.0
All other children	66.0
Immigrant status	
Immigrant children	64.6
All other children	66.8
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	65.9
All other children	66.7

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

- Statistically significant differences across age and gender were observed, with a higher percentage of younger children and a lower percentage of girls reporting that they find it easy to talk to their father when something is really bothering them (*see Table 28*).
- The percentage of children in each social class category who reported that they find it easy to talk to their father when something is really bothering them was broadly similar, with no statistically significant differences.
- The percentage of children who report that they find it easy to talk to their father when something is really bothering them has increased from 48.1% in 1998 to 66.6% in 2010.

Table 28: Percentage of children aged 9-17 who report that they find it easy to talk to their father when something is really bothering them, by age, gender and social class (1998, 2002, 2006 and 2010)

	1998	2002	2006	2010		
	Total (%)	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	**48.1**	**56.2**	**59.8**	**73.1**	**59.5**	**66.6**
Age						
9**	*n/a*	*n/a*	78.4	78.0	72.9	75.3
10-11	60.2	71.3	72.2	81.9	69.0	75.4
12-14	50.0	57.8	63.7	76.6	60.9	69.1
15-17	36.7	47.5	51.1	65.6	54.1	60.2
Social class						
SC 1-2	44.1	56.1	61.4	73.6	62.2	67.9
SC 3-4	49.2	56.8	60.1	73.4	58.3	66.2
SC 5-6	47.9	56.4	59.3	72.7	57.9	65.5

* Refers to children aged 10-17 only.

** Refers to data collected separately in a Middle Childhood Study. These children are not part of the core HBSC sample. Further details can be found in the technical notes in Appendix 1.

n/a = not available

Source: HBSC Surveys

Differences by geographic location

- Overall, 66.6% of children report that they find it easy to talk to their father when something is really bothering them. There were no statistically significant differences across regions (*see Table 29*).

Table 29: Percentage of children aged 10-17 who report that they find it easy to talk to their father when something is really bothering them, by NUTS Region (2010)

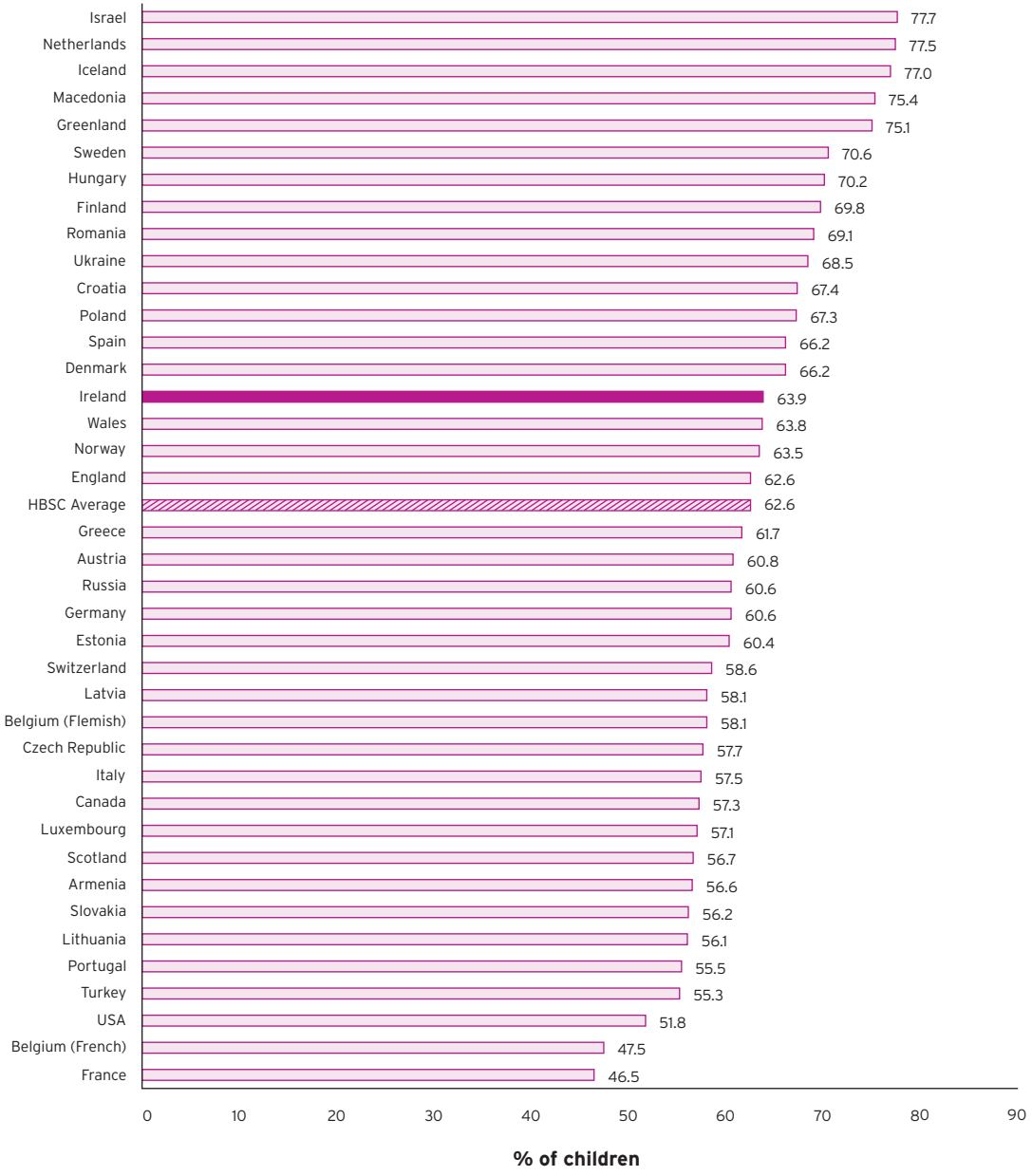
	%
All children	**66.6**
NUTS Region	
Border	70.1
Dublin	66.3
Midlands	64.6
Mid-East	68.4
Mid-West	65.5
South-East	67.4
South-West	65.7
West	65.8

Source: HBSC Survey, 2010

International comparisons

- Across 39 countries and regions, the average percentage of children who reported that they find it easy to talk to their father when something was really bothering them was 62.6% (*see Figure 7*). This ranged from 46.5% in France to 77.7% in Israel. The corresponding percentage in Ireland was 63.9%. This was above the HBSC average of 62.6%. (Note: International comparisons are based on data from children aged 11, 13 and 15 only.)

Figure 7: Percentage of children aged 11, 13 and 15 who report that they find it easy to talk to their father when something is really bothering them, by country (2010)



Source: HBSC Survey, 2010

TALKING TO PARENTS

Significantly more girls than boys report that their parents spend time just talking with them.

Measure

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

Key findings

- In 2012, 67.9% of 15-year-olds reported that their parents spend time just talking with them several times a week.

Differences by population groups

- The proportion of children from the Traveller community who reported that their parents spend time just talking with them several times a week (66.0%) is similar to the corresponding proportion for all other children (68.0%) (*see Table 30*).
- The proportion of children with an immigrant background who reported that their parents spend time just talking with them several times a week (64.2%) is lower than the corresponding proportion for non-immigrant children (68.4%), although the difference is not statistically significant.

Table 30: Percentage of children aged 15 who report that their parents spend time just talking with them several times a week, by population groups (2012)

	%
All children	**67.9**
Traveller status	
Traveller children	66.0
All other children	68.0
Immigrant status	
Immigrant children	64.2
All other children	68.4

Source: PISA Survey, 2012

Differences by gender, social class and over time

- Significantly more girls (77.4%) than boys (58.5%) reported that their parents spend time just talking with them several times a week (*see Table 31*).
- The proportion of children from the highest social class category who reported that their parents spend time just talking with them several times a week (71.3%) is significantly higher than the corresponding proportions of children from the medium (66.9%) and lowest social class categories (65.4%).

Table 31: Percentage of children aged 15 who report that their parents spend time just talking with them several times a week, by gender and social class (2006, 2009 and 2012)

	2006	2009	2012
All children	**64.7**	**59.8**	**67.9**
Gender			
Boys	55.6	48.9	58.5
Girls	73.4	70.8	77.4
Social class			
High SES	66.6	63.0	71.3
Medium SES	64.6	60.2	66.9
Low SES	63.0	57.1	65.4

Source: PISA Surveys

PARENTAL INVOLVEMENT IN SCHOOLING

Approximately half of 15-year-old children report that their parents discuss with them how well they are doing at school.

Measure

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

Key findings

- In 2012, 49.4% of 15-year-olds reported that their parents discuss with them how well they are doing at school several times a week.

Differences by population groups

- The proportion of children from the Traveller community who reported that their parents discuss with them how well they are doing at school several times a week (43.9%) is lower than the corresponding proportion for all other children (49.5%), but the difference is not statistically significant (*see Table 32*).
- The proportion of children with an immigrant background who reported that their parents discuss with them how well they are doing at school several times a week (51.2%) is higher than the corresponding proportion for non-immigrant children (49.2%), although the difference is not statistically significant.

Table 32: Percentage of children aged 15 who report that their parents discuss with them how well they are doing at school several times a week, by population groups (2012)

	%
All children	**49.4**
Traveller status	
Traveller children	43.9
All other children	49.5
Immigrant status	
Immigrant children	51.2
All other children	49.2

Source: PISA Survey, 2012

Differences by gender, social class and over time

- In 2012, the proportion of girls who reported that their parents discuss with them how well they are doing at school several times a week (53.6%) is significantly higher than the corresponding proportion of boys (45.2%) (*see Table 33*).
- The proportion of children from the highest social class category who reported that their parents discuss with them how well they are doing at school several times a week (55.2%) is significantly higher than the corresponding proportions of children from the medium (48.3%) and lowest social class categories (44.6%).

Table 33: Percentage of children aged 15 who report that their parents discuss with them how well they are doing at school several times a week, by gender and social class (2006, 2009 and 2012)

	2006	2009	2012
All children	**48.0**	**42.8**	**49.4**
Gender			
Boys	44.1	39.4	45.2
Girls	51.6	46.3	53.6
Social class			
High SES	50.0	46.6	55.2
Medium SES	50.0	43.6	48.3
Low SES	43.5	37.9	44.6

Source: PISA Surveys

EATING A MAIN MEAL TOGETHER

Approximately 73% of 15-year-old children report that their parents eat a main meal with them around a table.

Measure

The percentage of children aged 15 who report that their parents eat a main meal with them around a table several times a week.

Key findings

- In 2012, 73.2% of 15-year-olds reported that their parents eat a main meal with them around a table several times a week.

Differences by population groups

- The proportion of children from the Traveller community who reported that their parents eat a main meal with them around a table several times a week (57.4%) is significantly lower than the corresponding proportion for all other children (73.5%) (*see Table 34*).
- The proportion of children with an immigrant background who reported that their parents eat a main meal with them around a table several times a week (67.3%) is significantly lower than the corresponding proportion for non-immigrant children (73.9%).

Table 34: Percentage of children aged 15 who report that their parents eat a main meal with them around a table several times a week, by population groups (2012)

	%
All children	**73.2**
Traveller status	
Traveller children	57.4
All other children	73.5
Immigrant status	
Immigrant children	67.3
All other children	73.9

Source: PISA Survey, 2012

Differences by gender, social class and over time

- The proportion of girls who reported that their parents eat a main meal with them around a table several times a week (74.6%) does not differ significantly from the corresponding proportion of boys (71.8%) (*see Table 35*).
- The proportion of children from the highest social class category who reported that their parents eat a main meal with them around a table several times a week (79.2%) is significantly higher than the corresponding proportions of children from the medium (72.9%) and lowest social class categories (67.5%).

Table 35: Percentage of children aged 15 who report that their parents eat a main meal with them around a table several times a week, by gender and social class (2006, 2009 and 2012)

	2006	2009	2012
All children	**74.5**	**72.4**	**73.2**
Gender			
Boys	73.7	70.1	71.8
Girls	75.3	74.6	74.6
Social class			
High SES	78.2	77.1	79.2
Medium SES	75.2	73.6	72.9
Low SES	70.7	66.9	67.5

Source: PISA Surveys

FRIENDSHIPS

Almost 9 out of 10 children have 3 or more friends of the same gender.

Measure

The percentage of children aged 10-17 who report to have 3 or more friends of the same gender.

Key findings

- In 2010, 89.5% of children aged 10-17 reported that they had 3 or more friends of the same gender.

Differences by population groups

- When compared to other children, Traveller children and immigrant children were less likely to report having 3 or more friends of the same gender (*see Table 36*). These differences were statistically significant.
- There were no significant differences between children with and children without a disability and/or chronic illness.

Table 36: Percentage of children aged 10-17 who report to have 3 or more friends of the same gender, by population groups (2010)

	%
All children	**89.5**
Traveller status	
Traveller children	84.2
All other children	89.6
Immigrant status	
Immigrant children	84.0
All other children	90.1
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	89.9
All other children	89.4

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

- Statistically significant differences across age and gender were observed, with a higher percentage of girls and of children aged 12-14 reporting that they have 3 or more friends of the same gender (*see Table 37*).
- The percentage of children in each social class category who reported having 3 or more friends of the same gender was broadly similar, with no statistically significant differences.

Table 37: Percentage of children aged 9-17 who report to have 3 or more friends of the same gender, by age, gender and social class (2002, 2006 and 2010)

	2002	2006	2010		
	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	**85.3**	**89.5**	**88.6**	**90.5**	**89.5**
Age					
9**	*n/a*	94.2	86.2	84.7	85.4
10-11	85.1	89.5	87.2	86.9	87.1
12-14	85.7	90.3	89.9	91.2	90.6
15-17	85.7	88.8	87.2	90.6	88.9
Social class					
SC 1-2	86.8	89.6	89.8	91.5	90.7
SC 3-4	86.2	90.1	89.1	89.8	89.5
SC 5-6	84.5	90.4	87.1	90.7	88.9

* Refers to children aged 10-17 only.

** Refers to data collected separately in a Middle Childhood Study. These children are not part of the core HBSC sample. Further details can be found in the technical notes in Appendix 1.

n/a = not available

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 38*). Overall, 89.5% of children reported that they had 3 or more friends of the same gender. This ranged from 87.6% in the West to 91.2% in the South-West.

Table 38: Percentage of children aged 10-17 who report to have 3 or more friends of the same gender, by NUTS Region (2010)

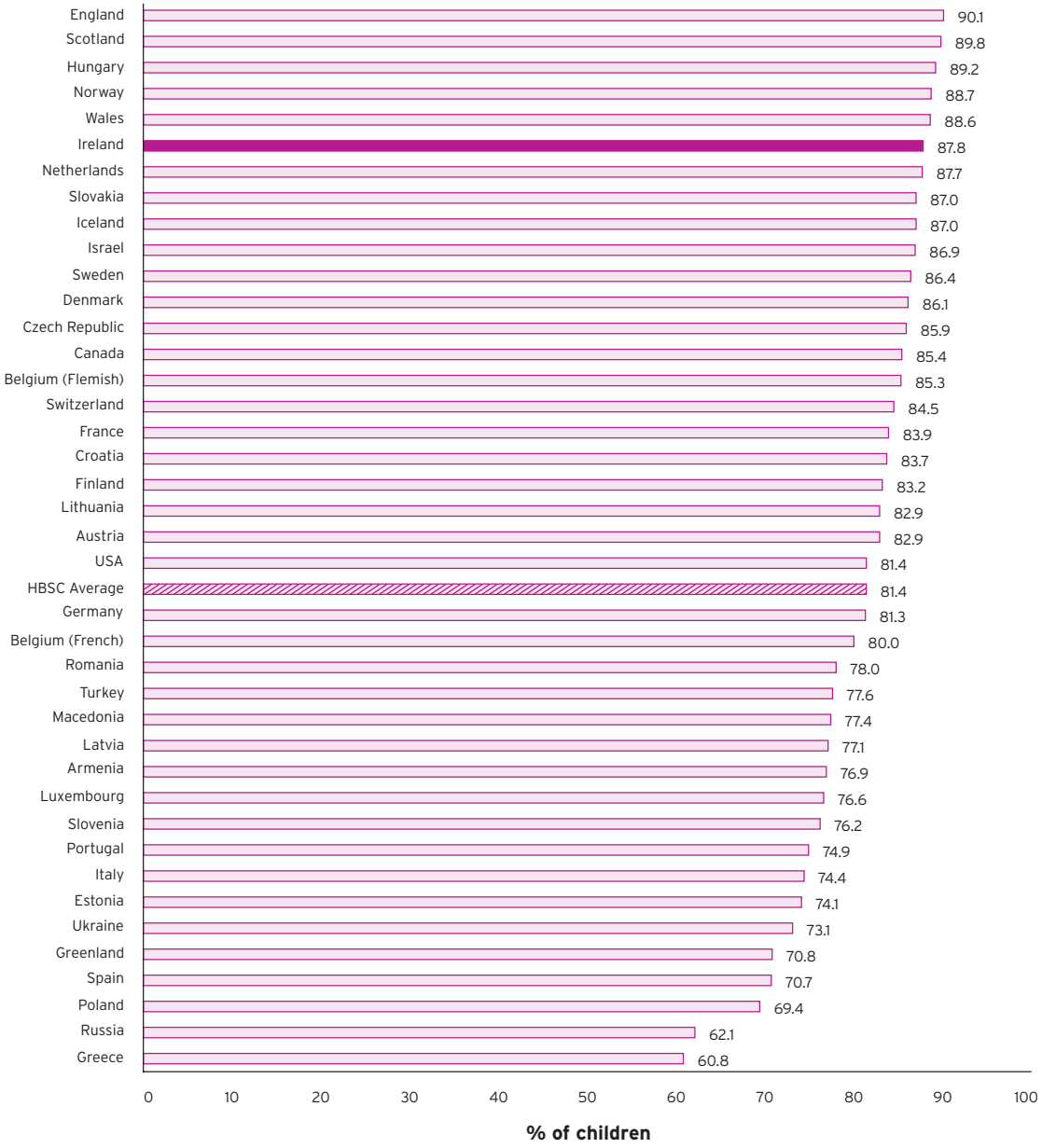
	%
All children	**89.5**
NUTS Region	
Border	88.4
Dublin	88.5
Midlands	89.8
Mid-East	88.8
Mid-West	89.9
South-East	91.1
South-West	91.2
West	87.6

Source: HBSC Survey, 2010

International comparisons

- Across 40 countries and regions, the average percentage of children who reported having 3 or more friends of the same gender was 81.4% (*see Figure 8*). This ranged from 60.8% in Greece to 90.1% in England. The corresponding percentage in Ireland was 87.8%. This was above the HBSC average of 81.4%. (Note: International comparisons are based on data from children aged 11, 13 and 15 only.)

Figure 8: Percentage of children aged 11, 13 and 15 who report to have 3 or more friends of the same gender, by country (2010)



Source: HBSC Survey, 2010

PETS AND ANIMALS

3 out of 4 children have a pet of their own or a pet in their family.

Measure

The percentage of children aged 10-17 who report having a pet of their own or a pet in their family.

Key findings

- In 2010, 75.5% of children aged 10-17 reported having a pet of their own or a pet in their family.

Differences by population groups

- When compared to other children, immigrant children were less likely to report having a pet of their own or a pet in their family (*see Table 39*). This difference was statistically significant.
- There were no significant differences observed between Traveller and other children and between children with and children without a disability and/or chronic illness.

Table 39: Percentage of children aged 10-17 who report having a pet of their own or a pet in their family, by population groups (2010)

	%
All children	**75.5**
Traveller status	
Traveller children	75.4
All other children	75.5
Immigrant status	
Immigrant children	59.9
All other children	77.1
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	75.7
All other children	75.4

Source: HBSC Survey, 2010

Differences by age, gender and social class

- Statistically significant differences were observed across gender and social class categories, with a lower percentage of boys and of children in the lowest social class category reporting to have a pet of their own or a pet in their family (*see Table 40*).
- The percentage of children in each age category who reported having a pet of their own or a pet in their family was broadly similar, with no statistically significant differences.

Table 40: Percentage of children aged 9-17 who report having a pet of their own or a pet in their family, by age, gender and social class (2006 and 2010)

	2006	2010		
	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	**73.8**	**74.3**	**76.8**	**75.5**
Age				
9**	72.0	71.3	72.4	71.9
10-11	75.0	71.4	76.3	73.9
12-14	74.4	75.9	77.1	76.5
15-17	72.9	73.3	76.6	74.9
Social class				
SC 1-2	76.4	76.9	79.9	78.4
SC 3-4	72.8	72.6	77.3	74.9
SC 5-6	73.9	75.2	73.6	74.4

* Refers to children aged 10-17 only.

** Refers to data collected separately in a Middle Childhood Study. These children are not part of the core HBSC sample. Further details can be found in the technical notes in Appendix 1.

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 41*). Overall, 75.5% of children reported having a pet of their own or a pet in the family. This ranged from 64.7% in Dublin to 83.6% in the South-East.

Table 41: Percentage of children aged 10-17 who report having a pet of their own or a pet in their family, by NUTS Region (2010)

	%
All children	**75.5**
NUTS Region	
Border	76.0
Dublin	64.7
Midlands	79.8
Mid-East	76.1
Mid-West	79.8
South-East	83.6
South-West	77.8
West	78.8

Source: HBSC Survey, 2010

BULLYING

Immigrant children, Traveller children and children with a disability and/or chronic illness are significantly more likely to report being bullied at school.

Measure

The percentage of children aged 10-17 who report having been bullied at school.

Key findings

- In 2010, 24.3% of children aged 10-17 reported that they were bullied at school at least once in the past couple of months.

Differences by population groups

- When compared to other children, Traveller children, immigrant children and children with a disability and/or chronic illness were more likely to report that they were bullied at school (*see Table 42*). These differences were statistically significant.

Table 42: Percentage of children aged 10-17 who report having been bullied at school (in the past couple of months), by population groups (2010)

	%
All children	**24.3**
Traveller status	
Traveller children	31.6
All other children	24.1
Immigrant status	
Immigrant children	29.4
All other children	23.7
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	28.9
All other children	22.9

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

- Statistically significant differences were observed across age and gender, with a higher percentage of younger children and of boys reporting that they were bullied at school in the past couple of months (*see Table 43*).
- The percentage of children in each social class category who reported being bullied at school was broadly similar, with no statistically significant differences.

Table 43: Percentage of children aged 9-17 who report having been bullied at school (in the past couple of months), by age, gender and social class (1998, 2002, 2006 and 2010)

	1998	2002	2006	2010		
	Total (%)	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	**24.6**	**23.3**	**24.5**	**25.5**	**23.0**	**24.3**
Age						
9**	*n/a*	*n/a*	38.3	36.2	39.0	37.7
10-11	31.2	28.3	29.3	28.2	31.2	29.7
12-14	25.2	25.8	26.2	26.1	24.3	25.2
15-17	18.8	18.2	20.8	23.7	18.0	21.0
Social class						
SC 1-2	21.8	23.0	25.0	25.2	21.4	23.3
SC 3-4	25.4	22.9	23.9	24.2	22.8	23.5
SC 5-6	24.3	23.1	24.6	27.1	24.5	25.9

* Refers to children aged 10-17 only.

** Refers to data collected separately in a Middle Childhood Study. These children are not part of the core HBSC sample. Further details can be found in the technical notes in Appendix 1.

n/a = not available

Source: HBSC Surveys

Differences by geographic location

- Overall, 24.3% of children reported being bullied at school in the past couple of months (*see Table 44*). There were no statistically significant differences observed across regions.

Table 44: Percentage of children aged 10-17 who report having been bullied at school (in the past couple of months), by NUTS Region (2010)

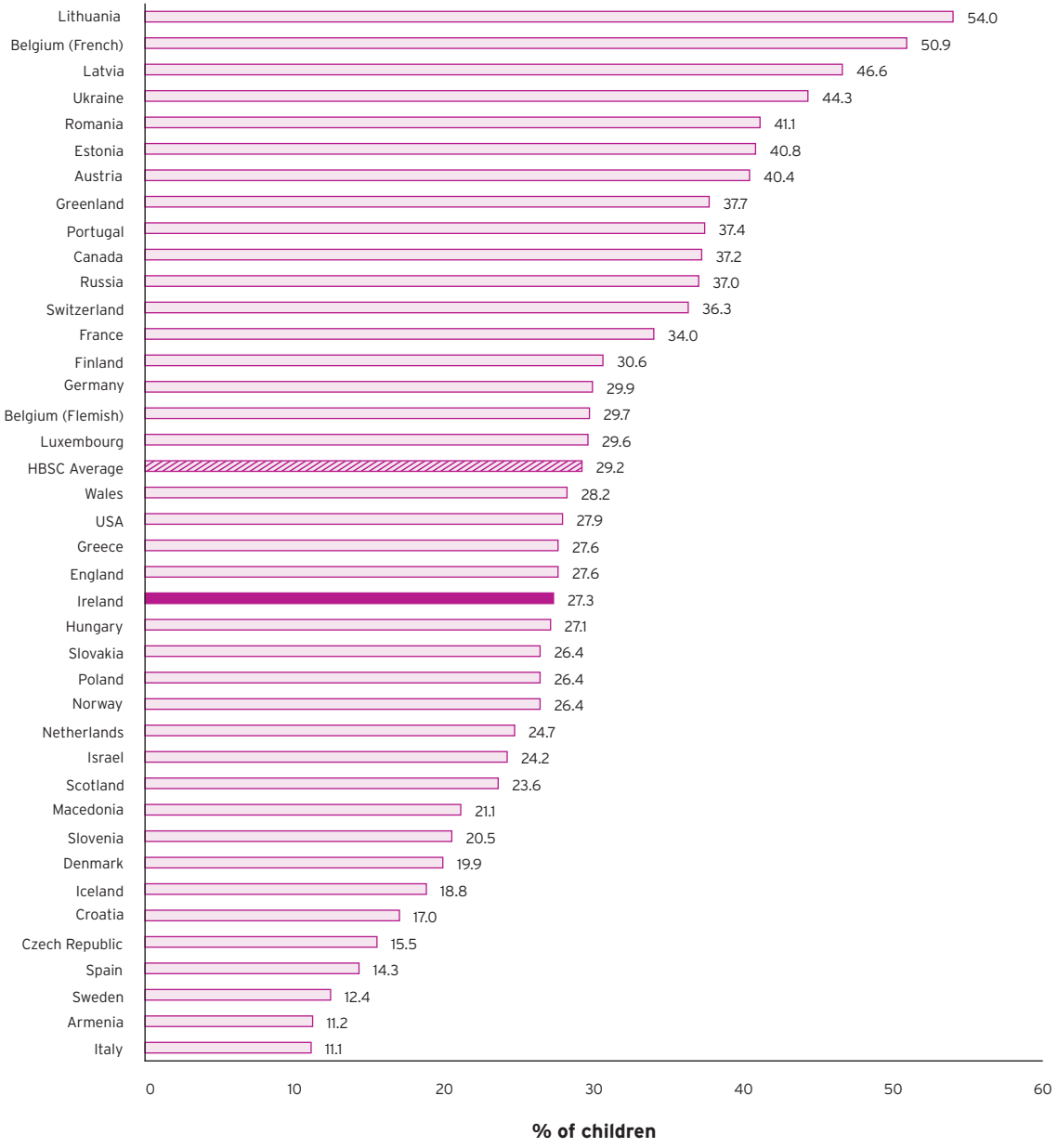
	%
All children	**24.3**
NUTS Region	
Border	21.7
Dublin	24.8
Midlands	23.9
Mid-East	23.0
Mid-West	26.8
South-East	23.9
South-West	24.3
West	25.3

Source: HBSC Survey, 2010

International comparisons

- Across 39 countries and regions, the average percentage of children who reported being bullied at school at least once in the past couple of months was 29.2% (*see Figure 9*). This ranged from 11.1% in Italy to 54.0% in Lithuania. The corresponding percentage in Ireland was 27.3%. This was below the HBSC average of 29.2%. (Note: International comparisons are based on data from children aged 11, 13 and 15 only.)

Figure 9: Percentage of children aged 11, 13 and 15 who report having been bullied at school (in the past couple of months), by country (2010)



Source: HBSC Survey, 2010

PART 3: CHILDREN'S OUTCOMES

covering
Education
Health
Social, emotional and behavioural outcomes

EDUCATION OUTCOMES

QUALITY OF EARLY CHILDHOOD CARE AND EDUCATION

Nearly 25% of the 4,220 Early Childhood Care and Education (ECCE) services contracted to deliver the Free Pre-School Year Scheme in 2013 met the higher capitation requirements.

Measure

The percentage of Early Childhood Care and Education (ECCE) services under contract to deliver the Free Pre-School Year Scheme that meet basic and higher capitation criteria.

Key findings

- In 2013, a total of 4,220 ECCE services were under contract to deliver the Free Pre-School Year Scheme to 68,005 children. Of these ECCE services, 75.8% met the basic capitation criteria and 24.2% met the higher capitation criteria.

Differences over time

- 24.2% of ECCE services contracted to deliver the Free Pre-School Year Scheme met the higher capitation criteria, which is an increase from 19.8% in 2012 *(see Table 45)*.

Table 45: Percentage of Early Childhood Care and Education (ECCE) services under contract to deliver the Free Pre-School Year Scheme that meet basic and higher capitation criteria, (2012 and 2013)

	Total ECCE services	Meeting basic capitation criteria		Meeting higher capitation criteria	
	No.	No.	%	No.	%
Year					
2012	4,182	3,354	80.2	828	19.8
2013	4,220	3,197	75.8	1,023	24.2

Source: ECCE Database

Differences by geographic location

- Overall, 24.2% of ECCE services under contract to deliver the Free Pre-School Year Scheme met the higher capitation criteria (*see Table 46*). This percentage ranged from 6.3% in Leitrim to 42.0% in Cork City.

Table 46: Percentage of Early Childhood Care and Education (ECCE) services under contract to deliver the Free Pre-School Year Scheme that meet basic and higher capitation criteria, by administrative county (2013)

	No. of children	Total ECCE services	Meeting basic capitation criteria		Meeting higher capitation criteria	
		No.	No.	%	No.	%
Total	**68,005**	**4,220**	**3,197**	**75.8**	**1,023**	**24.2**
Administrative county						
Carlow	753	45	28	62.2	17	37.8
Cavan	1,257	63	54	85.7	9	14.3
Clare	1,709	134	116	86.6	18	13.4
Cork City	1,425	81	47	58.0	34	42.0
Cork County	6,216	357	248	69.5	109	30.5
Donegal	2,324	139	104	74.8	35	25.2
Dublin City	5,605	371	265	71.4	106	28.6
Dun Laoghaire/Rathdown	2,701	189	126	66.7	63	33.3
Fingal	5,346	321	268	83.5	53	16.5
Galway	3,620	256	211	82.4	45	17.6
Kerry	1,939	126	78	61.9	48	38.1
Kildare	3,761	211	170	80.6	41	19.4
Kilkenny	1,348	97	73	75.3	24	24.7
Laois	1,462	82	64	78.1	18	22.0
Leitrim	439	32	30	93.8	2	6.3
Limerick City	770	44	33	75.0	11	25.0
Limerick County	1,927	128	88	68.8	40	31.3
Longford	591	35	28	80.0	7	20.0
Louth	1,958	112	100	89.3	12	10.7
Mayo	1,721	116	91	78.5	25	21.6
Meath	3,344	203	176	86.7	27	13.3
Monaghan	890	57	41	71.9	16	28.1
Offaly	1,174	69	59	85.5	10	14.5

continued

Table 46 (*continued*)

	No. of children	Total ECCE services	Meeting basic capitation criteria		Meeting higher capitation criteria	
		No.	No.	%	No.	%
Roscommon	845	54	40	74.1	14	25.9
Sligo	889	64	51	79.7	13	20.3
South Dublin	4,195	222	171	77.0	51	23.0
Tipperary NR	1,011	73	57	78.1	16	21.9
Tipperary SR	1,291	75	54	72.0	21	28.0
Waterford City	837	39	30	76.9	9	23.1
Waterford County	911	53	35	66.0	18	34.0
Westmeath	1,413	82	66	80.5	16	19.5
Wexford	2,104	133	89	66.9	44	33.1
Wicklow	2,232	157	106	67.5	51	32.5

Source: ECCE Database

PRIMARY SCHOOL ATTENDANCE

Approximately 1 in every 9 primary school children misses 20 days or more in the school year.

Measure

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

Key findings

- In the 2010/11 school year, 11.1% of primary school children were absent from school for 20 days or more.

Differences over age and time

- Over the period 2006/07 to 2010/11, the percentage of primary school children who were absent from school for 20 days or more ranged between 10.9%-12.0% (*see Table 47*).

Table 47: Percentage of primary school children who are absent from school for 20 days or more in the school year (2006/07 – 2010/11)

	2006/07	2007/08	2008/09	2009/10	2010/11
Primary school children	10.9	12.0	11.8	11.7	11.1

Source: Primary Pupil Absence Reports

Differences by location and school type

- In the 2010/11 school year, the average percentage of primary school children per school missing 20 days or more was almost twice as high for schools in urban areas (14.1%) when compared to schools in rural areas (7.3%) (*see Table 48*).
- There was also a clear relationship between 20-day absences and levels of disadvantage. Using the Delivering Equality of Opportunity in Schools (DEIS) categories and participation in the School Support Programme (SSP), the average percentage of primary school children missing 20 days or more tended to be higher in SSP schools when compared to non-SSP schools (although 20-day absences were still higher in non-SSP urban schools than in SSP rural schools).

Table 48: Average percentage of primary school children per school who are absent from school for 20 days or more in the school year, by selected school characteristics (2010/11)	
	%
School location	
Rural	7.3
Urban	14.1
DEIS status	
Rural, not in School Support Programme	7.0
Rural, in School Support Programme	9.3
Urban, not in School Support Programme	11.1
Urban, in School Support Programme Band 2	19.6
Urban, in School Support Programme Band 1	21.9

Source: Primary Pupil Absence Report, 2010/11

Differences by geographic location

- Overall, the average percentage of primary school children per school who are missing for 20 days or more was 10.6% (*see Table 49*). This ranged from 7.6% in Co. Donegal to 15.2% in Co. Dublin.

Table 49: Average percentage of primary school children per school who are absent from school for 20 days or more in the school year, by county (2010/11)	
	%
Total	**10.6**
County	
Carlow	9.8
Cavan	10.9
Clare	10.0
Cork	9.8
Donegal	7.6
Dublin	15.2
Galway	11.0
Kerry	9.1
Kildare	10.6
Kilkenny	7.7
Laois	11.6
Leitrim	8.5
Limerick	13.0
Longford	12.3
Louth	12.7
Mayo	9.2
Meath	8.9
Monaghan	7.8
Offaly	11.0
Roscommon	9.1
Sligo	10.9
Tipperary NR	8.6
Tipperary SR	8.7
Waterford	9.5
Westmeath	9.3
Wexford	9.7
Wicklow	9.7

Source: Primary Pupil Absence Report, 2010/11

POST-PRIMARY SCHOOL ATTENDANCE

Approximately 1 in every 6 post-primary school children misses 20 days or more in the school year.

Measure

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

Key findings

- In the 2010/11 school year, 16.5% of post-primary school children were absent from school for 20 days or more.

Differences over age and time

- Over the period 2006/07 to 2010/11, the percentage of post-primary school children who were absent from school for 20 days or more ranged between 16.5%-18.6% (*see Table 50*).

Table 50: Percentage of post-primary school children who are absent from school for 20 days or more in the school year (2006/07 – 2010/11)

	2006/07	2007/08	2008/09	2009/10	2010/11
Post-primary school children	18.6	17.7	18.0	17.6	16.5

Source: Post-Primary Pupil Absence Reports

Differences by location and school type

- In the 2010/11 school year, the average percentage of post-primary school children per school who were missing 20 days or more was higher in Community/ Comprehensive and in Vocational schools (*see Table 51*). This percentage was also twice as high in DEIS schools (28.4%) when compared to non-DEIS schools (14.6%).

Table 51: Average percentage of post-primary school children per school who are absent from school for 20 days or more in the school year, by selected school characteristics (2010/11)	
	%
Type of school	
Secondary	14.5
Community/Comprehensive	19.0
Vocational	24.7
DEIS status	
DEIS	28.4
Non-DEIS	14.6

Source: Post-Primary Pupil Absence Report, 2010/11

Differences by geographic location

- Overall, the average percentage of post-primary school children per school who were missing for 20 days or more was 18.4% (*see Table 52*). This ranged from 12.8% in Co. Waterford to 28.2% in Co. Longford.

Table 52: Average percentage of post-primary school children per school who are absent from school for 20 days or more in the school year, by county (2010/11)	
	%
Total	**18.4**
County	
Carlow	19.4
Cavan	24.5
Clare	15.9
Cork	15.8
Donegal	19.4
Dublin	18.1
Galway	20.5
Kerry	19.6
Kildare	21.8
Kilkenny	15.1
Laois	24.9
Leitrim	13.5

continued

Table 52 (*continued*)	
County	**%**
Limerick	19.3
Longford	28.2
Louth	17.5
Mayo	22.0
Meath	14.2
Monaghan	16.5
Offaly	21.7
Roscommon	14.8
Sligo	17.8
Tipperary NR	19.0
Tipperary SR	15.5
Waterford	12.8
Westmeath	21.7
Wexford	20.3
Wicklow	16.1

Source: Post-Primary Pupil Absence Report, 2010/11

LEAVING CERTIFICATE RETENTION RATES

Retention rates to the completion of the Leaving Certificate have increased by almost 8 percentage points – from 82.3% of children in the 1997 school entry cohort to 90.1% of children in the 2007 school entry cohort.

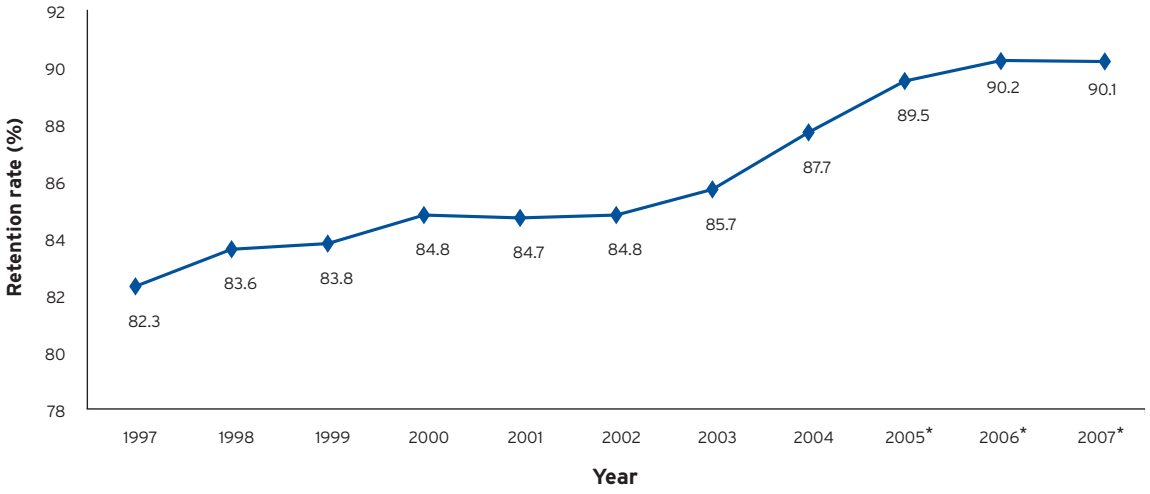
Measure

The Leaving Certificate retention rate.

Key findings

- The Leaving Certificate retention rate for children entering secondary school in 2007 was 90.1% (i.e. out of the 55,223 children enrolled on 30th September 2007 in Year 1 of the Junior Cycle, 49,755 sat the Leaving Certificate by 2012 or 2013) (*see Figure 10*).

Figure 10: Leaving Certificate retention rates for the 1997-2007 school entry cohorts



* Break in series from 2005 onwards due to revised methodology. Further details in technical notes, Appendix 1.

Source: Education Statistics Database (Department of Education and Skills)

Differences by gender, school type and over time

- The retention rate for boys in the 2007 school entry cohort was 88.3% compared to 91.9% for girls (*see Table 53*).
- On average, secondary schools had the highest retention rates (at just under 92%) when compared to vocational (86.2%) and community and comprehensive (89.9%) schools.
- For the 2007 school entry cohort, the retention rate was 80.4% for children in DEIS schools compared to 92.6% for children in non-DEIS schools.
- Retention rates to the completion of the Leaving Certificate have increased by almost 8 percentage points – from 82.3% of children in the 1997 school entry cohort to 90.1% of children in the 2007 school entry cohort (*see Figure 10*).

Table 53: Leaving Certificate retention rates for the 2007 school entry cohort, by gender, school type and DEIS status

	No. in school entry cohort	% sat Leaving Certificate
Total	**55,223**	**90.1**
Gender		
Boys	28,147	88.3
Girls	27,076	91.9
School type		
Secondary	31,957	91.9
Vocational	13,798	86.2
Community and Comprehensive	9,468	89.9
DEIS status		
DEIS schools	11,077	80.4
Non-DEIS schools	44,146	92.6

Source: Education Statistics Database (Department of Education and Skills)

Differences by geographic location

- Overall, the retention rate to Leaving Certificate for children for the 2007 school entry cohort was 90.1% (*see Table 54*). This ranged from 84.9% in Co. Carlow to 92.9% in Co. Mayo and Co. Meath.

Table 54: Leaving Certificate retention rates for the 2007 school entry cohort, by administrative county

	No. in school entry cohort	% sat Leaving Certificate
Total	**55,223**	**90.1**
Administrative county		
Carlow	790	84.9
Cavan	813	88.8
Clare	1,357	89.9
Cork County	4,437	91.7
Cork City	1,776	89.0
Donegal	2,158	90.6
Dublin City	5,399	87.2
Dublin Fingal	2,858	91.6
Dublin South	3,269	88.9
Dun Laoghaire/Rathdown	2,275	91.0
Galway County	2,143	90.3
Galway City	898	87.6
Kerry	1,836	91.8
Kildare	2,609	90.8
Kilkenny	1,145	91.3
Laois	813	89.7
Leitrim	431	91.0
Limerick County	1,390	92.3
Limerick City	1,162	87.5
Longford	596	88.9
Louth	1,780	89.4
Mayo	1,654	92.9
Meath	1,983	92.9
Monaghan	842	89.6
Offaly	1,022	88.7

continued

Table 54 (*continued*)		
Administrative county	**No. in school entry cohort**	**% sat Leaving Certificate**
Roscommon	590	90.9
Sligo	783	92.3
Tipperary NR	1,102	91.8
Tipperary SR	1,070	90.5
Waterford County	657	92.1
Waterford City	729	88.1
Westmeath	1,320	90.0
Wexford	1,929	91.7
Wicklow	1,580	87.2

Source: Education Statistics Database (Department of Education and Skills)

ACHIEVEMENT IN READING: PRINT READING LITERACY SCALE

There has been a significant increase in print reading literacy scores among 15-year-olds in Ireland.

Measure

The mean scores of children aged 15 based on the OECD-PISA Print Reading Literacy Scale.

Key findings

- In 2012, 15-year-old children in Ireland achieved a mean score of 523.2 on the OECD-PISA Print Reading Literacy Scale, which is significantly higher than the OECD average score of 496.5.

Differences by population groups

- In Ireland, children with an immigrant background obtained a significantly lower mean score (514.1) on the OECD-PISA Print Reading Literacy Scale than all other children (525.4) (*see Table 55*).

Table 55: Mean score for children aged 15 based on the OECD-PISA Print Reading Literacy Scale, by population groups (2012)

	%	Mean score
All children	**100.0**	**523.2**
Immigrant status		
Immigrant children	10.2	514.1
All other children	89.8	525.4

Source: PISA Survey, 2012

Differences by gender, social class and over time

- Girls in Ireland performed significantly better in print reading literacy than boys, achieving a mean score of 537.7 compared to 509.2 (*see Table 56*). This continues the trend seen in PISA surveys since 2003.
- Print reading achievement was related to social class again in 2012 (as it has been since 2003). The mean score of children from the highest social class category (562.3) was significantly higher than the mean score of children in the medium (523.3) and lowest (485.9) social class categories.
- The mean print reading score for children in Ireland in 2012 (523.2) was significantly higher than in 2009 (495.6), but did not differ from the mean print reading scores of children in 2003 (515.5) or 2006 (517.3).

Table 56: Mean score for children aged 15 based on the OECD-PISA Print Reading Literacy Scale, by gender and social class (2006, 2009 and 2012)

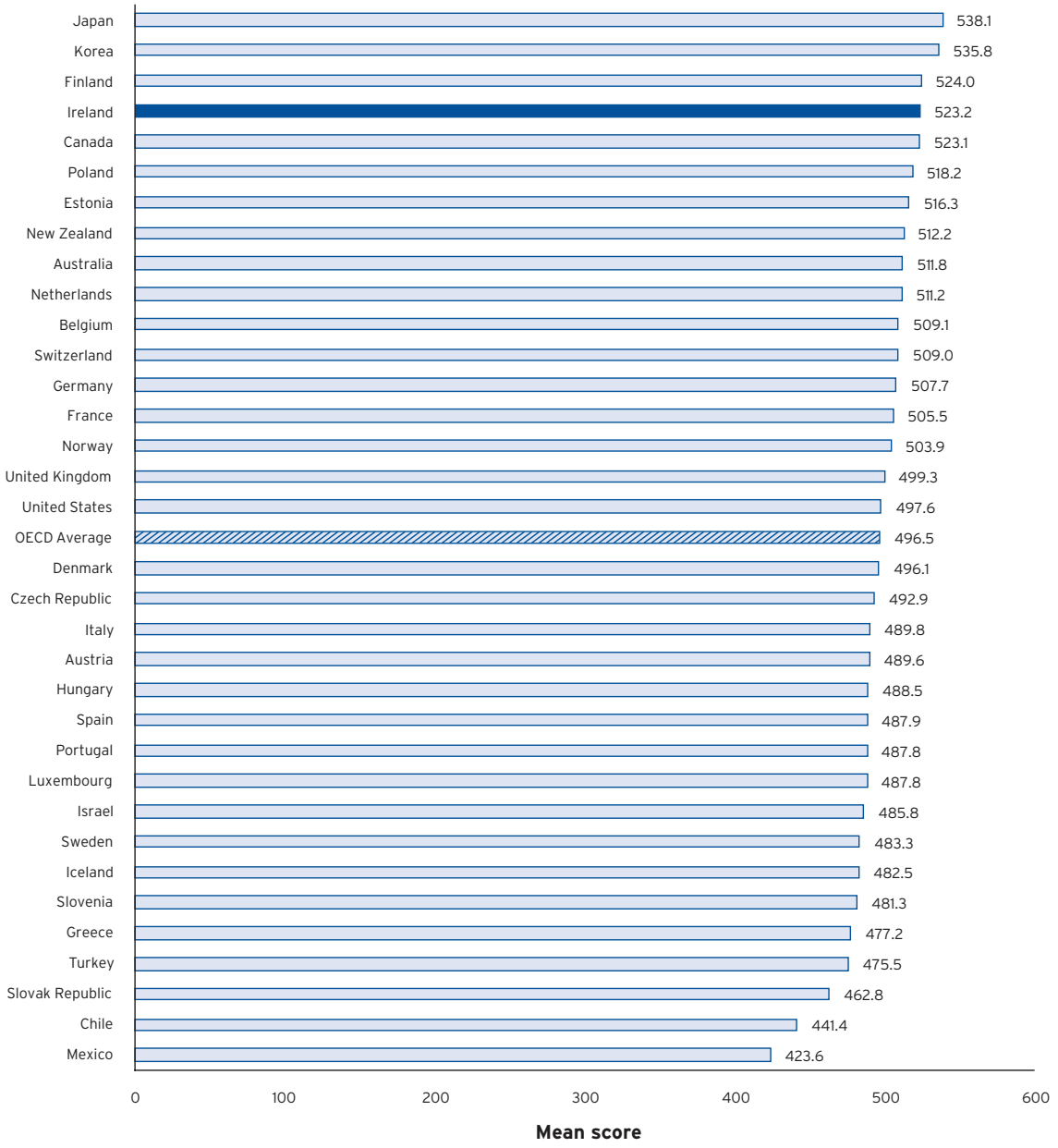
	2006	2009	2012
All children	**517.3**	**495.6**	**523.2**
Gender			
Boys	500.2	476.3	509.2
Girls	534.0	515.4	537.7
Social class			
High SES	551.2	535.5	562.3
Medium SES	522.4	497.9	523.3
Low SES	490.2	459.5	485.9

Source: PISA Surveys

International comparisons

- In 2012, Ireland's mean score of 523.2 on the OECD-PISA Print Reading Literacy Scale was higher than the OECD average score of 496.5 (*see Figure 11*).
- Mexico was the lowest-scoring OECD country on this indicator, while Japan achieved the highest mean score.
- Ireland ranked 4th (true rank: 3rd – 6th) in print reading literacy among 34 participating OECD countries.

Figure 11: Mean scores of children aged 15 based on the OECD-PISA Print Reading Literacy Scale, by OECD country (2012)



Source: PISA Survey, 2012

ACHIEVEMENT IN MATHEMATICS: PRINT MATHEMATICS LITERACY SCALE

Print mathematics literacy scores of 15-year-olds in Ireland are above the OECD average.

Measure

The mean scores of children aged 15 based on the OECD-PISA Print Mathematics Literacy Scale.

Key findings

- In 2012, 15-year-old children in Ireland achieved a mean score of 501.5 on the OECD-PISA Print Mathematics Literacy Scale, which is significantly above the OECD average score of 494.0.

Differences by population groups

- In Ireland, the mean print mathematics score for children with an immigrant background (499.7) was lower than the average of all other children (502.6), although this difference was not statistically significant (*see Table 57*).

Table 57: Mean score for children aged 15 based on the OECD-PISA Print Mathematics Literacy Scale, by population groups (2012)

	%	Mean score
All children	**100.0**	**501.5**
Immigrant status		
Immigrant children	10.2	499.7
All other children	89.8	502.6

Source: PISA Survey, 2012

Differences by gender, social class and over time

- Boys in Ireland achieved a significantly higher mean print mathematics score than girls, obtaining a mean score of 509.0 compared to 493.7 (*see Table 58*). This continues the trend seen in PISA surveys since 2003.
- Children from the highest social class category achieved a significantly higher mean print mathematics score (538.9) than those in the medium (501.3) and lowest (465.5) social class categories.
- The mean print mathematics score for children in Ireland in 2012 (501.5) was significantly higher than in 2009 (487.1), but did not differ from the mean print mathematics scores of children in 2003 (502.8) or 2006 (501.5).

Table 58: Mean score for children aged 15 based on the OECD-PISA Print Mathematics Literacy Scale, by gender and social class (2006, 2009 and 2012)

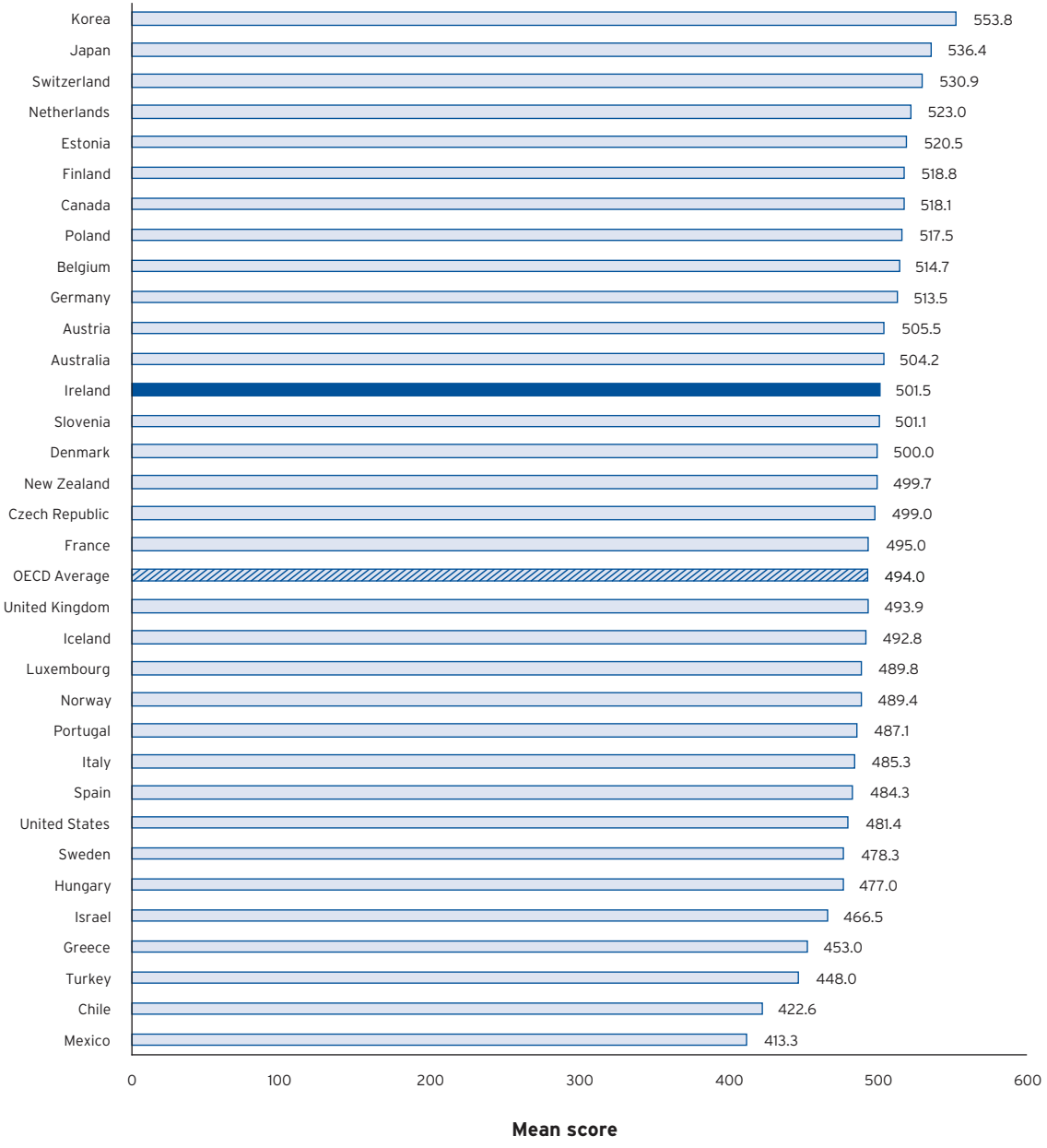
	2006	2009	2012
All children	**501.5**	**487.1**	**501.5**
Gender			
Boys	507.3	490.9	509.0
Girls	495.8	483.3	493.7
Social class			
High SES	532.8	523.4	538.9
Medium SES	505.0	490.1	501.3
Low SES	476.0	452.3	465.5

Source: PISA Surveys

International comparisons

- In 2012, Ireland's mean score of 501.5 on the OECD-PISA Print Mathematics Literacy Scale was above the OECD average mean score of 494.0 (*see Figure 12*).
- Mexico was the lowest-scoring OECD country on this indicator, while Korea achieved the highest mean score.
- Ireland ranked 13th (true rank: 11th – 17th) in print mathematical literacy among all 34 OECD countries.

Figure 12: Mean scores of children aged 15 based on the OECD-PISA Print Mathematics Literacy Scale, by OECD country (2012)



Source: PISA Survey, 2012

ACHIEVEMENT IN SCIENCE: SCIENTIFIC LITERACY SCALE

Science literacy scores of 15-year-olds in Ireland are above the OECD average.

Measure

The mean scores of children aged 15 based on the OECD-PISA Scientific Literacy Scale.

Key findings

- 15-year-old children in Ireland achieved a mean score of 522.0 on the OECD-PISA Scientific Literacy Scale, which is significantly above the OECD average of 501.2.

Differences by population groups

- In Ireland, children with an immigrant background performed at similar levels to all other children on the OECD-PISA Scientific Literacy Scale in 2012, obtaining a mean score of 520.8 compared to 523.2 (*see Table 59*).

Table 59: Mean score for children aged 15 based on the OECD-PISA Scientific Literacy Scale, by population groups (2012)

	%	Mean score
All children	**100.0**	**522.0**
Immigrant status		
Immigrant children	10.2	520.8
All other children	89.8	523.2

Source: PISA Survey, 2012

Differences by gender, social class and over time

- Boys and girls in Ireland in 2012 performed at similar levels to each other on the OECD-PISA Scientific Literacy Scale. The mean score for boys was 523.9, while the mean for girls was 520.0 (*see Table 60*).
- Children from the highest social class category in Ireland achieved a significantly higher mean science score (562.4) than those in the medium (522.3) and lowest (483.0) social class categories.
- The mean science score for children in Ireland in 2012 (522.0) was significantly higher than in 2009 (508.0) and 2006 (508.3).

Table 60: Mean score for children aged 15 based on the OECD-PISA Scientific Literacy Scale, by gender and social class (2006, 2009 and 2012)

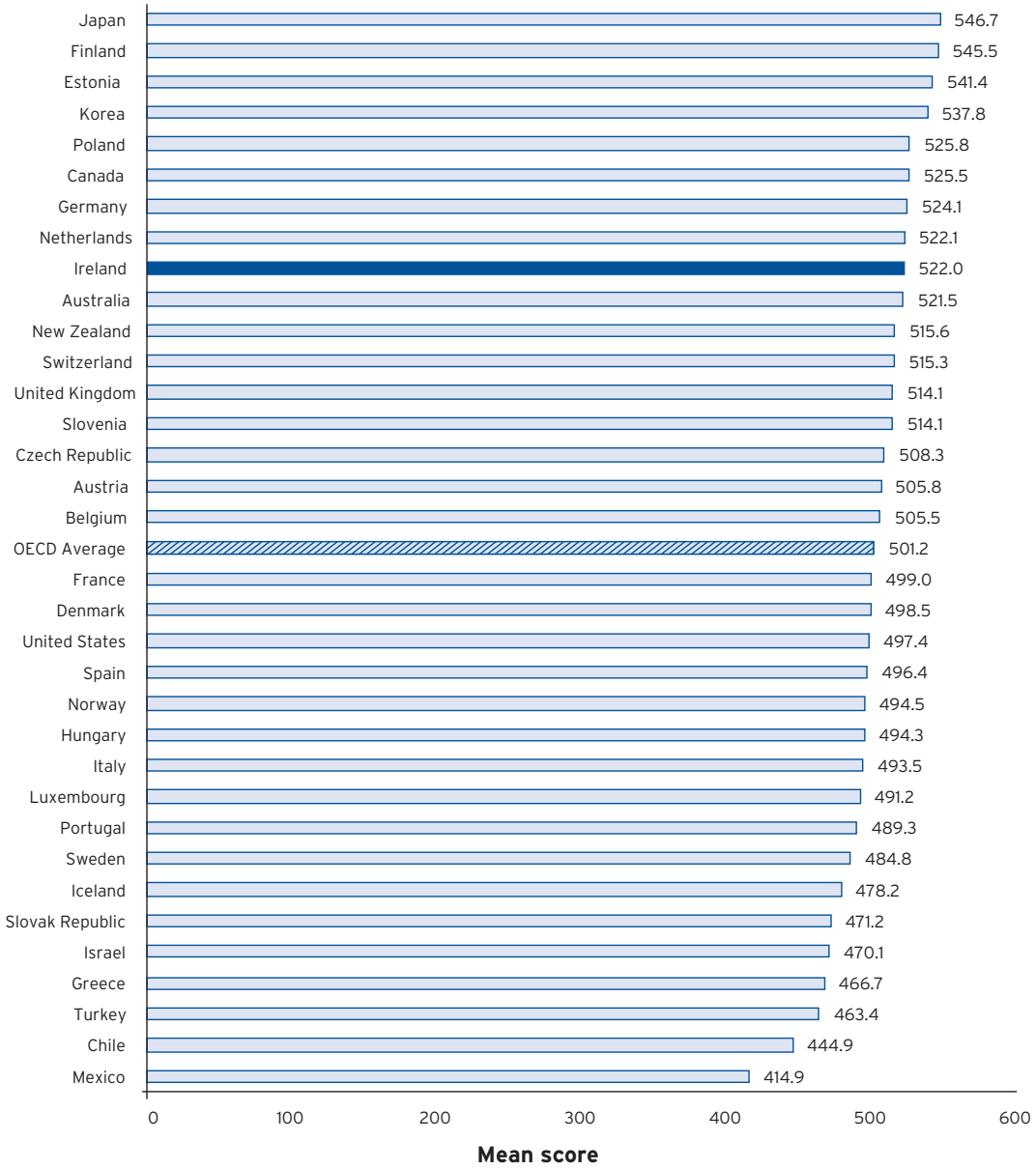
	2006	2009	2012
All children	**508.3**	**508.0**	**522.0**
Gender			
Boys	508.1	506.6	523.9
Girls	508.5	509.4	520.0
Social class			
High SES	542.3	545.7	562.4
Medium SES	512.8	512.8	522.3
Low SES	480.7	471.0	483.0

Source: PISA Surveys

International comparisons

- In 2012, Ireland's mean score of 522.0 on the OECD-PISA Scientific Literacy Scale was above the OECD average mean score of 501.2 (*see Figure 13*).
- Mexico was the lowest-scoring OECD country on this indicator, while Japan achieved the highest mean score.
- Ireland ranked 9th (true rank: 6th – 11th) in scientific literacy among all 34 OECD countries.

Figure 13: Mean scores of children aged 15 based on the OECD-PISA Scientific Literacy Scale, by OECD country (2012)



Source: PISA Survey, 2012

HEALTH OUTCOMES

BIRTH WEIGHT

The percentage of low birth weight babies has increased slightly over the last 5 years.

Measure

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

Key findings

- In 2013, 5.8% of all babies born were in the low birth weight category (weighing less than 2,500 grams).

Differences by gender, social class and over time

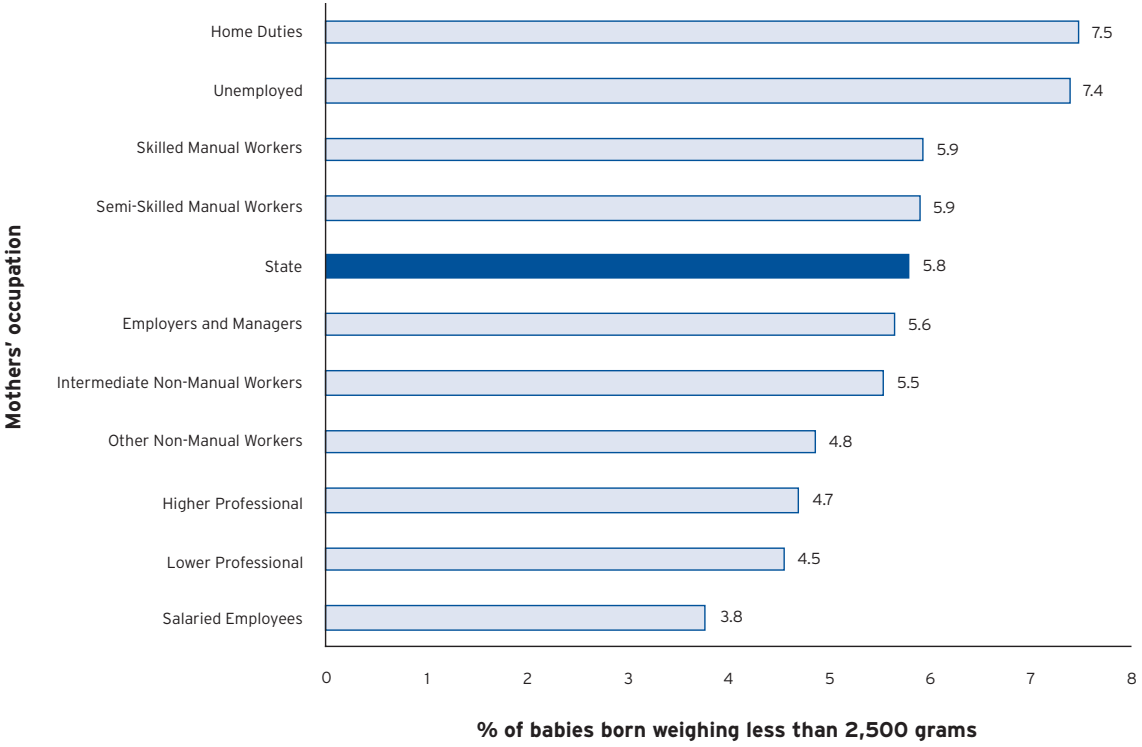
- Girls were more likely than boys to be born in the low birth weight category (6.0% and 5.6% respectively) (*see Table 61*).
- The percentage of babies born in the low birth weight category was highest among mothers who reported to have 'home duties' (7.5%) (*see Figure 14*).
- Over the 5-year period 2009-2013, the percentage of babies born in the low birth weight category has increased slightly.

Table 61: Percentage of babies born weighing less than 2,500 grams (live and still births), by gender (2009-2013)

	2009	2010	2011	2012	2013		
	Low birth weight (%)	Low birth weight (%)	Low birth weight (%)	Low birth weight (%)	Low birth weight (%)	Healthy birth weight (%)	High birth weight (%)
Total	**5.3**	**5.3**	**5.4**	**5.6**	**5.8**	**78.6**	**15.6**
Gender							
Boys	4.9	5.0	5.1	5.3	5.6	75.5	18.9
Girls	5.8	5.7	5.9	6.0	6.0	81.9	12.1

Sources: National Perinatal Reporting System (NPRS); Healthcare Pricing Office, 2013

Figure 14: Percentage of babies born weighing less than 2,500 grams (live and still births), by occupation of mother (2013)*



* Categories where percentages are based on less than 100 births (i.e. 'unskilled manual workers', 'other agricultural occupations and fishermen', 'farmers and farm managers') and 'not stated' and 'not classifiable' categories have been omitted from this Figure.

Source: National Perinatal Reporting System (NPRS); Healthcare Pricing Office, 2013

Differences by geographic location

- Overall, 5.8% of all babies born in 2013 were in the low birth weight category (*see Table 62*). This percentage ranged from 3.3% of all births in Co. Leitrim to 8.6% of all births in Co. Laois.

Table 62: Number and percentage of babies born weighing less than 2,500 grams (live and still births), by mothers' county of residence (2013)		
	No. of low birth weight babies in State/County	**Low birth weight babies as a percentage of all births in State/County**
Total	**4,006**	**5.8**
County		
Carlow	56	6.4
Cavan	59	5.2
Clare	75	5.1
Cork	498	6.3
Donegal	98	5.0
Dublin City	959	6.3
Dublin County	270	5.0
Galway	195	5.2
Kerry	79	4.5
Kildare	223	6.5
Kilkenny	58	4.5
Laois	106	8.6
Leitrim	15	3.3
Limerick	193	6.9
Longford	38	6.1
Louth	127	6.4
Mayo	80	4.7
Meath	172	5.5
Monaghan	35	4.1
Offaly	48	4.5
Roscommon	40	4.8
Sligo	58	6.5
Tipperary*	117	5.2
Waterford	116	6.8
Westmeath	70	5.2
Wexford	84	4.0
Wicklow	120	5.8
Other	17	15.2

* Tipperary North and Tipperary South have been combined for Co. Tipperary.

Source: National Perinatal Reporting System (NPRS); Healthcare Pricing Office, 2013

BREASTFEEDING

Breastfeeding initiation rates have continued to increase.

Measure

The percentage of infants who are (a) exclusively breastfed and (b) who are partially breastfed on discharge from hospital.

Key findings

- In 2013, 55.7% of infants were breastfed on discharge from hospital. This includes 46.3% who were exclusively breastfed and a further 9.4% who were fed using a combination of bottle and breastfeeding.

Differences by age, social class and over time

- The percentage of infants who were breastfed (either exclusive or combined) is higher among older mothers (*see Table 63*).
- There were also marked social class differences (*see Figure 15*). The percentage of infants who were breastfed (either exclusive or combined) was higher among mothers in 'higher' and 'lower professional' groups (73.8% and 69.4% respectively) compared to mothers who reported to be 'unemployed' (35.8%).
- Over the 5-year period 2009-2013, the percentage of infants who were breastfed on discharge from hospital has risen consistently.

Table 63: Percentage of infants who are breastfed (exclusive or combined) on discharge from hospital, by mothers' age (2009-2013)*

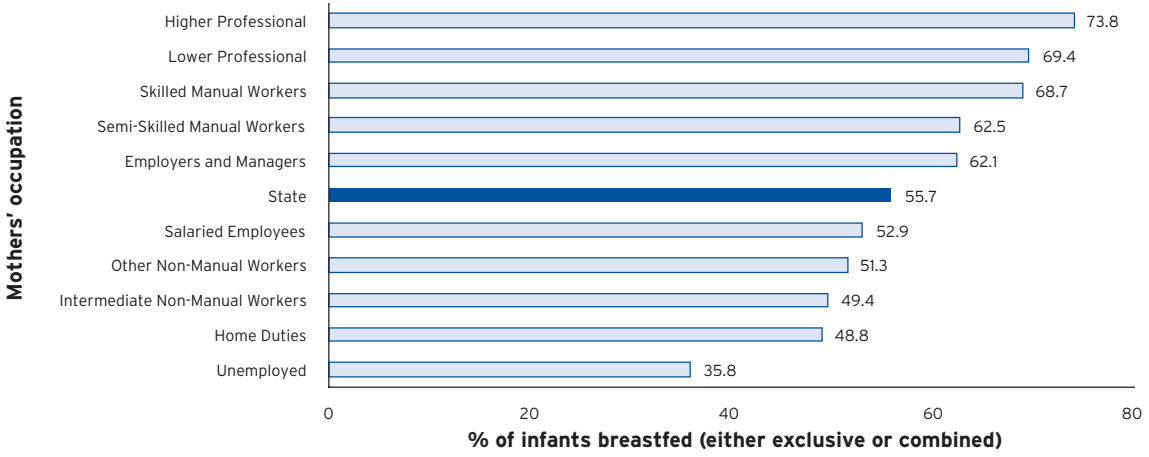
	2009		2010		2011		2012		2013		
	Excl	Comb	Excl	Comb	Excl	Comb	Excl	Comb	Excl	Comb	Total
Total**	**45.2**	**7.4**	**45.9**	**8.1**	**46.6**	**8.6**	**46.6**	**8.7**	**46.3**	**9.4**	**55.7**
Age											
15-19	21.2	4.9	19.7	4.5	20.5	3.5	20.4	4.7	20.4	4.7	25.1
20-24	36.3	6.2	33.9	6.4	32.5	6.3	30.4	6.9	30.3	7.7	38.0
25-29	45.2	7.3	46.4	7.9	46.9	8.3	46.1	8.3	43.4	9.1	52.5
30-34	48.4	7.8	49.3	8.5	50.2	8.9	50.5	8.9	50.2	9.6	59.8
35-39	47.9	7.8	48.2	8.6	48.9	9.2	49.7	9.2	50.2	10.0	60.2
40-44	47.9	8.5	48.8	9.8	47.6	10.9	48.3	10.6	49.3	11.2	60.5
Over 45	44.2	14.1	42.9	12.9	49.4	13.6	43.5	17.7	47.5	11.3	58.8

* Categories where percentages are based on less than 100 births (i.e. 'under 15 years' and 'age not stated') have been omitted from this Table.

** Data based on Live Births (excluding Early Neonatal deaths). Further details can be found in the technical notes in Appendix 1.

Source: National Perinatal Reporting System (NPRS); Healthcare Pricing Office, 2013

Figure 15: Percentage of infants who are breastfed (either exclusive or combined) on discharge from hospital, by occupation of mother (2013)*



* Categories where percentages are based on less than 100 births (i.e. 'unskilled manual workers', 'other agricultural occupations and fishermen', 'farmers and farm managers') and 'not stated' and 'not classifiable' categories have been omitted from this Figure.

Source: National Perinatal Reporting System (NPRS); Healthcare Pricing Office, 2013

Differences by geographic location

- Overall, 55.7% of infants in 2013 were breastfed (either exclusive or combined). This ranged from 37.0% in Co. Limerick to 66.9% in Dublin County (*see Table 64*).

Table 64: Percentage of infants who are breastfed (exclusive or combined) on discharge from hospital, by mothers' county of residence (2013)*

	Exclusive	Combined	Total
	%	%	%
Total	**46.3**	**9.4**	**55.7**
County			
Carlow	50.3	3.3	53.6
Cavan	43.5	3.9	47.4
Clare	34.9	6.3	41.2
Cork	54.9	5.0	59.9
Donegal	36.6	6.3	42.9
Dublin City	49.8	13.0	62.9
Dublin County	53.4	13.5	66.9
Galway	39.6	18.4	58.0
Kerry	47.0	7.8	54.8
Kildare	46.9	11.6	58.5
Kilkenny	54.8	0.8	55.6
Laois	46.3	6.4	52.7
Leitrim	43.3	11.2	54.5
Limerick	32.1	4.9	37.0
Longford	41.9	3.6	45.5
Louth	36.2	11.2	47.4
Mayo	39.5	12.5	52.0
Meath	46.5	9.6	56.1
Monaghan	41.2	4.8	46.0
Offaly	35.9	5.1	41.0
Roscommon	37.3	11.3	48.6
Sligo	35.5	16.7	52.2
Tipperary**	44.8	2.6	47.4
Waterford	49.9	2.0	51.9
Westmeath	44.3	5.6	49.9
Wexford	44.8	6.4	51.2
Wicklow	45.4	10.9	56.3
Other	40.4	17.4	57.8

* Data based on Live Births (excluding Early Neonatal deaths). Further details in technical notes, Appendix 1.

** Tipperary North and Tipperary South have been combined for Co. Tipperary.

Source: National Perinatal Reporting System (NPRS); Healthcare Pricing Office, 2013

HEALTH CONDITIONS AND HOSPITALISATION

Half of the total hospital discharges of children in 2013 were children under 5 years of age.

Measure

The number of hospital discharges of children.

Key findings

- In 2013, there were 150,981 hospital discharges of children.

Differences by age, gender, principal diagnosis and over time

- Half of the total hospital discharges were of infants and children aged 1-4 (21.2% and 28.6% respectively) and more than half of the total hospital discharges were of boys (55.0%) (*see Table 65*).
- The most commonly reported principal diagnosis recorded was '*diseases of the respiratory system*' (12.4%), followed by '*injury, poisoning and certain other consequences of external causes*' (9.3%).
- The number of discharges of children increased year on year from 2009 to 2012 and then decreased in 2013.

Table 65: Number and percentage of hospital discharges of children, by age, gender and principal diagnosis (2009-2013)

	2009	2010	2011	2012	2013	
	No.	No.	No.	No.	No.	%
Total	**145,922**	**146,693**	**154,120**	**156,914**	**150,981**	**100**
Age						
Under 1	32,895	32,227	33,810	33,527	32,063	21.2
1-4	43,268	43,271	44,768	45,605	43,218	28.6
5-9	28,676	29,406	31,342	32,526	30,901	20.5
10-14	22,579	23,661	25,495	25,496	25,257	16.7
15-17	18,504	18,128	18,705	19,760	19,542	12.9
Gender						
Boys	80,851	81,128	85,836	86,311	83,043	55.0
Girls	65,071	65,565	68,284	70,603	67,938	45.0
Principal diagnosis						
Diseases of the respiratory system	18,987	16,893	19,091	22,172	18,654	12.4
Injury, poisoning and certain other consequences of external causes	14,169	14,762	14,121	14,177	14,093	9.3
Diseases of the digestive system	13,152	13,472	13,796	13,681	13,693	9.1
Certain infectious and parasitic diseases	11,868	11,392	12,376	12,680	11,702	7.8
Certain conditions originating in the perinatal period	9,833	9,748	10,348	10,020	10,064	6.7
Congenital malformations, deformations and chromosomal abnormalities	9,170	9,409	10,283	9,068	9,356	6.2
Diseases of the genitourinary system	7,911	7,905	7,431	7,149	6,996	4.6
Neoplasms	5,870	6,534	6,733	6,914	6,826	4.5
Diseases of the skin and subcutaneous tissue	4,006	4,035	4,374	4,951	4,682	3.1
Diseases of the ear and mastoid process	4,868	4,429	4,289	4,609	4,357	2.9
All other conditions and reasons for admission	46,088	48,114	51,278	51,493	50,558	33.5

Source: Hospital In-Patient Enquiry

Differences by geographic location

- Overall, there were 131.4 hospital discharges per 1,000 children in 2013 (*see Table 66*). Rates ranged from 101.6 per 1,000 in Co. Leitrim to 176.6 per 1,000 in Co. Sligo.

Table 66: Number and rate (per 1,000 children) of hospital discharges of children, by county of residence (2013)

	No. of hospital discharges of children in State/County	No. of children in State/County in 2011*	Rate in 2013 per 1,000 children in State/County in 2011*
Total	**150,981**	**1,148,687**	**131.4**
County			
Carlow	2,194	14,139	155.2
Cavan	2,480	20,194	122.8
Clare	3,700	30,666	120.7
Cork	16,141	128,448	125.7
Donegal	6,479	43,732	148.2
Dublin	33,968	287,258	118.2
Galway	8,788	61,194	143.6
Kerry	4,650	34,940	133.1
Kildare	6,872	59,449	115.6
Kilkenny	2,739	25,015	109.5
Laois	3,481	22,932	151.8
Leitrim	818	8,051	101.6
Limerick	7,042	46,067	152.9
Longford	1,481	10,593	139.8
Louth	4,338	33,292	130.3
Mayo	5,538	32,514	170.3
Meath	6,437	53,400	120.5
Monaghan	1,693	16,031	105.6
Offaly	2,965	21,149	140.2
Roscommon	2,049	16,076	127.5
Sligo	2,744	15,541	176.6
Tipperary	5,870	40,760	144.0
Waterford	4,024	28,908	139.2
Westmeath	4,020	23,052	174.4
Wexford	5,844	38,842	150.5
Wicklow	4,115	36,444	112.9
Non-residents	511	–	–

* County-level population estimates are not available for 2013.

Source: Census of the Population, 2011; Hospital In-Patient Enquiry, 2013

ACCIDENTS, INJURIES AND HOSPITALISATION

The number of hospital discharges among children with a diagnosis of 'transport accidents' has decreased by 20% between 2009 and 2013.

Measure

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

Key findings

- In 2013, there were 14,093 hospital discharges of children with a principal diagnosis of '*injury, poisoning and certain other consequences of external causes*'.

Differences by age, gender, principal diagnosis and over time

- Almost one-third of the hospital discharges (30.4%) with a diagnosis of *'injury, poisoning and certain other consequences of external causes'* were of children aged 1-4 and 60.9% were of boys (*see Table 67*).
- Over the 5-year period 2009-2013, the total number of hospital discharges of children with a diagnosis of '*injury, poisoning and certain other consequences of external causes*' has remained in the band 14,000-15,000.

Table 67: Number and percentage of hospital discharges among children with a principal diagnosis of injury, poisoning and certain other consequences of external causes, by age, gender and cause (2009-2013)

	2009	2010	2011	2012	2013	
	No.	No.	No.	No.	No.	%
Total	**14,169**	**14,762**	**14,121**	**14,177**	**14,093**	**100**
Age						
Under 1	972	854	817	845	834	5.9
1-4	4,367	4,524	4,387	4,439	4,287	30.4
5-9	3,382	3,690	3,514	3,558	3,620	25.7
10-14	3,008	3,361	3,225	3,194	3,246	23.0
15-17	2,440	2,333	2,178	2,141	2,106	14.9

continued

Table 67 (*continued*)						
	2009	2010	2011	2012	2013	
	No.	No.	No.	No.	No.	%
Gender						
Boys	8,810	9,123	8,858	8,745	8,584	60.9
Girls	5,359	5,639	5,263	5,432	5,509	39.1
Principal diagnosis of injury, poisoning and certain other consequences of external causes						
Accidental falls	5,883	6,191	5,716	5,667	5,699	40.4
Accidents caused by objects*	2,923	3,026	3,034	3,057	3,111	22.1
Transport accidents	1,481	1,457	1,251	1,276	1,184	8.4
Drowning, submersion, other accidental threats to breathing and foreign bodies	539	615	586	614	585	4.2
Accident, not otherwise specified	606	529	562	605	553	3.9
Accidental poisoning	340	387	367	362	397	2.8
Intentional self-harm	321	334	318	332	357	2.5
Assault	295	247	255	234	187	1.3
Contact with heat or hot substances	272	221	265	230	208	1.5
Event of undetermined intent	87	100	133	89	111	0.8
Exposure to smoke, fire and flames	55	47	49	39	38	0.3
Other external causes of injury	1,291	1,534	1,522	1,610	1,579	11.2
External cause not reported**	76	74	63	62	84	0.6

* This is a more expansive range than that provided in the 2012 *State of the Nation's Children* report. The inclusion of the additional codes results in a decrease in the number of discharges reported in the category *'other external causes of injury'*. '*Accidents caused by objects*' include striking against or being struck accidentally by objects or persons; caught accidentally in or between objects; accidents caused by machinery; and accidents caused by cutting/piercing objects, exposure to inanimate mechanical forces and exposure to animate mechanical forces. It excludes foreign body entering into or through eye or natural orifice, or foreign body or object entering through skin; these are included in the category '*drowning, submersion, other accidental threats to breathing and foreign bodies*'.

** '*External cause not reported*' refers to discharges with a principal diagnosis of injury, poisoning and certain other consequences of external causes and for which an external cause of injury or poisoning was not recorded. The inclusion of this category ensures that the total reported corresponds with the data reported for injury, poisoning and certain other consequences of external causes in Table 65.

Note: Please note that Table 67 includes updated information for 2009-2011. Therefore this information differs from that previously published in Table 65 of the 2010 *State of the Nation's Children* report and Table 67 of the 2012 *State of the Nation's Children* report.

Source: Hospital In-Patient Enquiry

Differences by geographic location

- Overall, there were 12.3 hospital discharges with a diagnosis of '*injury, poisoning and certain other consequences of external causes*' per 1,000 children in 2013 (*see Table 68*). Rates ranged from 8.9 per 1,000 in Co. Roscommon to 15.4 per 1,000 in Co. Louth.

Table 68: Number and rate (per 1,000 children) of hospital discharges of children with a principal diagnosis of injury, poisoning and certain other consequences of external causes, by county of residence (2013)

	No. of hospital discharges of children with a diagnosis of external causes of injury or poisoning in State/County	No. of children in State/County in 2011*	Rate per 1,000 children in State/County in 2011*
Total	**14,093**	**1,148,687**	**12.3**
County			
Carlow	203	14,139	14.4
Cavan	261	20,194	12.9
Clare	297	30,666	9.7
Cork	1,496	128,448	11.6
Donegal	442	43,732	10.1
Dublin	3,493	287,258	12.2
Galway	783	61,194	12.8
Kerry	510	34,940	14.6
Kildare	626	59,449	10.5
Kilkenny	278	25,015	11.1
Laois	271	22,932	11.8
Leitrim	80	8,051	9.9
Limerick	468	46,067	10.2
Longford	146	10,593	13.8
Louth	513	33,292	15.4
Mayo	351	32,514	10.8
Meath	719	53,400	13.5
Monaghan	202	16,031	12.6
Offaly	272	21,149	12.9
Roscommon	143	16,076	8.9
Sligo	223	15,541	14.3
Tipperary	495	40,760	12.1
Waterford	363	28,908	12.6
Westmeath	353	23,052	15.3
Wexford	563	38,842	14.5
Wicklow	420	36,444	11.5
Non-residents	122	–	–

* County-level population estimates are not available for 2013.

Source: Census of the Population, 2011; Hospital In-Patient Enquiry, 2013

NUTRITIONAL OUTCOMES

The percentage of children aged 7 classified as being in the 'normal' weight category has increased by 3 percentage points over the period 2010-2012.

Measure

The percentage of children aged 7 in Body Mass Index (BMI) categories: normal, overweight and obese.

Key findings

- In 2012, 82% of children aged 7 were classified in the 'normal' weight category according to the International Obesity Taskforce Standards. The remaining 18% of children were classified as either 'overweight' or 'obese' (14% and 4% respectively).

Differences by gender and over time

- Boys (86%) were more likely than girls (79%) to be categorised in the 'normal' weight category (*see Table 69*). 14% of boys were categorised as either 'overweight' or 'obese' (12% and 2% respectively), while 22% of girls were categorised as either 'overweight' or 'obese' (16% and 6% respectively).

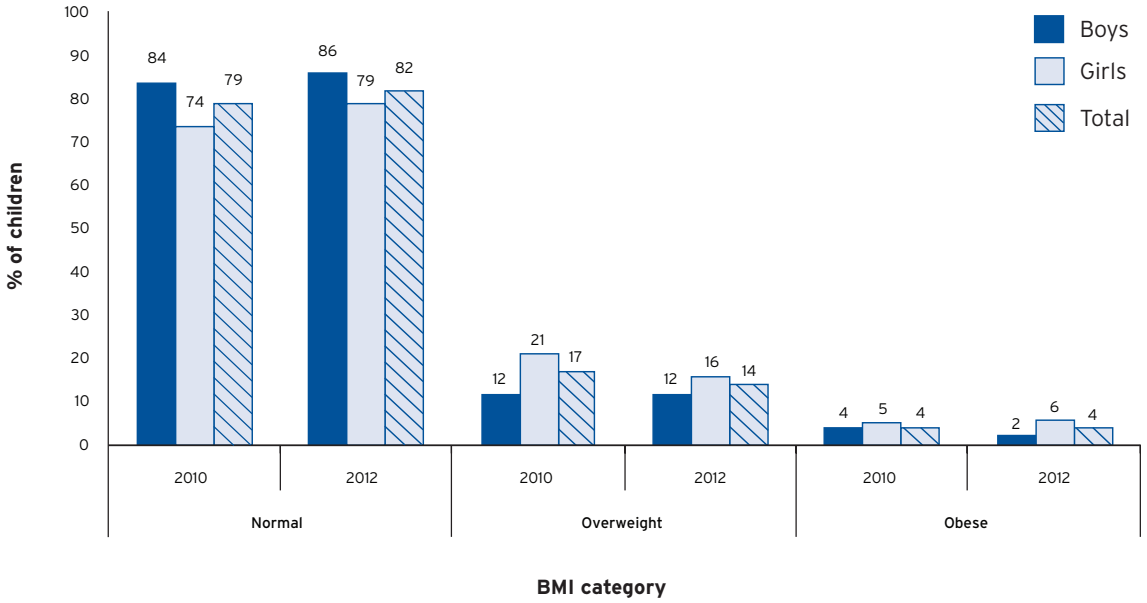
Table 69: Percentage of children aged 7 in BMI categories: normal, overweight and obese, by gender (2012)

	Normal	Overweight	Obese
	%	%	%
Total	**82**	**14**	**4**
Gender			
Boys	86	12	2
Girls	79	16	6

Source: Irish 2012 data from the WHO European Childhood Obesity Surveillance Initiative (National Nutrition Surveillance Centre)

- The percentage of children aged 7 classified in the 'normal' weight category according to the International Obesity Taskforce Standards has increased from 79% in 2010 to 82% in 2012 (*see Figure 16*).

Figure 16: Percentage of children aged 7 in BMI categories: normal, overweight and obese, by gender (2010 and 2012)



Source: Irish data from WHO European Childhood Obesity Surveillance Initiative (National Nutrition Surveillance Centre)

INTELLECTUAL DISABILITY

Approximately 6 in 10 children registered as having an intellectual disability are boys.

Measure

The number of children registered as having an intellectual disability.

Key findings

- In 2013, there were 9,018 children registered as having an intellectual disability.

Differences by age, gender, severity of disability and over time

- 13.4% of children registered as having an intellectual disability were aged 0-4 years; 30.6% were aged 5-9; 34.1% were aged 10-14; and the remaining 22.0% were aged 15-17 (*see Table 70*).
- 65.1% of children registered as having an intellectual disability were boys and 34.9% were girls. This equates to a rate of 9.7 per 1,000 boys and 5.4 per 1,000 girls.
- The majority of children were registered as having a mild or moderate disability (34.8% and 30.7% respectively).
- Over the 5-year period 2009-2013, the number of children registered as having an intellectual disability has increased.

Table 70: Number, percentage and rate (per 1,000) of children registered as having an intellectual disability, by age, gender and severity of disability (2009-2013)

	2009	2010	2011	2012	2013		
	No.	No.	No.	No.	No.	%	Rate per 1,000 children
Total	**8,028**	**8,224**	**8,852**	**9,123**	**9,018**	**100**	**7.6**
Age							
0-4	1,159	1,199	1,344	1,328	1,208	13.4	3.3
5-9	2,428	2,438	2,657	2,755	2,756	30.6	8.3
10-14	2,732	2,808	2,979	3,086	3,072	34.1	9.9
15-17	1,709	1,779	1,872	1,954	1,982	22.0	11.4
Gender							
Boys	5,051	5,211	5,668	5,906	5,872	65.1	9.7
Girls	2,977	3,013	3,184	3,217	3,146	34.9	5.4
Severity of disability							
Mild	2,983	3,033	3,201	3,163	3,139	34.8	2.7
Moderate	2,386	2,431	2,579	2,708	2,765	30.7	2.3
Severe	785	801	841	885	886	9.8	0.7
Profound	175	181	171	167	153	1.7	0.1
Not verified	1,699	1,778	2,060	2,200	2,075	23.0	1.8

Source: Population and Migration Estimates, April 2014; National Intellectual Disability Database

Differences by geographic location

- Overall, 7.9 per 1,000 children were registered as having an intellectual disability in 2013 (*see Table 71*). Rates ranged from 5.0 per 1,000 in Co. Longford to 12.5 per 1,000 in Co. Carlow.

Table 71: Number and rate (per 1,000) of children registered as having an intellectual disability, by county (2013)			
	No. of children registered as having an intellectual disability in State/County	No. of children in State/County in 2011*	Rate in 2013 per 1,000 children in State/County in 2011*
Total	**9,018**	**1,148,687**	**7.9**
County			
Carlow	177	14,139	12.5
Cavan	154	20,194	7.6
Clare	159	30,666	5.2
Cork	960	128,448	7.5
Donegal	341	43,732	7.8
Dublin	2,046	287,258	7.1
Galway	503	61,194	8.2
Kerry	346	34,940	9.9
Kildare	518	59,449	8.7
Kilkenny	217	25,015	8.7
Laois	146	22,932	6.4
Leitrim	52	8,051	6.5
Limerick	486	46,067	10.5
Longford	53	10,593	5.0
Louth	272	33,292	8.2
Mayo	340	32,514	10.5
Meath	374	53,400	7.0
Monaghan	97	16,031	6.1
Offaly	121	21,149	5.7
Roscommon	154	16,076	9.6
Sligo	160	15,541	10.3
Tipperary	353	40,760	8.7
Waterford	330	28,908	11.4
Westmeath	170	23,052	7.4
Wexford	294	38,842	7.6
Wicklow	195	36,444	5.4

* County-level population estimates are not available for 2013.

Source: Census of the Population, 2011; National Intellectual Disability Database, 2013

PHYSICAL AND SENSORY DISABILITY

Approximately 1 in 3 children on the National Physical and Sensory Disability Database are registered as having multiple disabilities.

Measure

The number of children registered as having a physical and/or sensory disability.

Key findings

- In 2013, there were 7,586 children registered as having a physical and/or sensory disability.

Differences by age, gender, type of disability and over time

- 8.8% of children registered as having a physical and/or sensory disability were aged 0-4 years; 29.0% were aged 5-9; 38.7% were aged 10-14; and the remaining 23.5% were aged 15-17 (*see Table 72*).
- 62.9% of children registered as having a physical and/or sensory disability were boys and 37.1% were girls. This equates to a rate of 7.9 per 1,000 boys and 4.9 per 1,000 girls.
- The majority of children were registered as having either a physical disability or a Speech and Language disability (35.9% and 25.5% respectively), while 33.6% of children were registered as having multiple disabilities.

Table 72: The number of children under 18 years registered as having a physical and/or sensory disability, by age, gender and type of disability (2009-2013)							
	2009	2010	2011	2012	2013		
	No.	No.	No.	No.	No.	%	Rate per 1,000 children
Total	**8,043**	**7,627**	**8,034**	**8,004**	**7,586**	**100**	**6.4**
Age							
0-4	510	427	596	735	668	8.8	1.8
5-9	2,700	2,322	2,360	2,305	2,197	29.0	6.6
10-14	3,387	3,362	3,379	3,218	2,937	38.7	9.5
15-17	1,446	1,516	1,699	1,746	1,784	23.5	10.3
Gender							
Boys	5,027	4,778	5,091	5,067	4,773	62.9	7.9
Girls	3,016	2,849	2,943	2,937	2,813	37.1	4.9
Type of disability							
Physical	2,939	2,642	2,665	2,704	2,726	35.9	2.3
Hearing loss/deafness	287	256	228	198	180	2.4	0.2
Visual	211	208	194	179	197	2.6	0.2
Speech and Language	2,339	2,263	2,406	2,246	1,935	25.5	1.6
Multiple disabilities	2,266	2,257	2,541	2,677	2,548	33.6	2.2
Refused	<5	<5	0	0	0	0.0	0.0

Source: Population and Migration Estimates, April 2014; National Physical and Sensory Disability Database

Differences by geographic location

- Overall, 6.6 per 1,000 children were registered as having a physical and/or sensory disability in 2013 (*see Table 73*). Rates ranged from 2.5 per 1,000 in Co. Clare to 22.0 per 1,000 in Co. Roscommon.

Table 73: Number and rate (per 1,000) of children registered as having a physical and/or sensory disability, by county (2013)			
	No. of children registered as having a physical and/or sensory disability in State/County	No. of children in State/County in 2011*	Rate per 1,000 children in State/County in 2011*
Total	**7,586**	**1,148,687**	**6.6**
County			
Carlow	141	14,139	10.0
Cavan	124	20,194	6.1
Clare	76	30,666	2.5
Cork	881	128,448	6.9
Donegal	194	43,732	4.4
Dublin	1,405	287,258	4.9
Galway	463	61,194	7.6
Kerry	159	34,940	4.6
Kildare	298	59,449	5.0
Kilkenny	202	25,015	8.1
Laois	77	22,932	3.4
Leitrim	26	8,051	3.2
Limerick	253	46,067	5.5
Longford	89	10,593	8.4
Louth	168	33,292	5.0
Mayo	420	32,514	12.9
Meath	557	53,400	10.4
Monaghan	91	16,031	5.7
Offaly	80	21,149	3.8
Roscommon	353	16,076	22.0
Sligo	51	15,541	3.3
Tipperary	527	40,760	12.9
Waterford	218	28,908	7.5
Westmeath	237	23,052	10.3
Wexford	238	38,842	6.1
Wicklow	258	36,444	7.1

* County-level population estimates are not available for 2013.

Source: Census of the Population, 2011; National Physical and Sensory Disability Database, 2013

CHILD WELFARE AND PROTECTION

The number of child welfare and protection reports increased by 3.5% between 2012 and 2013.

Measure

The number of child welfare and protection reports to the HSE.

Key findings

- In 2013, there were 41,599 child welfare and protection reports to the HSE.

Differences by type of report and over time

- More than half of the child welfare and protection reports (53.3%) were for welfare concerns (*see Table 74*).
- The number of child welfare and protection reports increased by 3.5% between 2012 and 2013.

Table 74: Number, percentage and rate (per 1,000) of child welfare and protection reports to the HSE, by type of report (2008-2013)

	2008	2009	2010	2011	2012*	2013		
	No.	No.	No.	No.	No.	No.	%	Rate per 1,000 children
Total	**24,668**	**26,888**	**29,277**	**31,626**	**40,187**	**41,599**	**100**	**36.2**
Type of report								
Welfare	12,932	14,875	16,452	15,808	21,143	22,192	53.3	19.3
Physical abuse	2,399	2,617	2,608	3,033	19,044**	4,330	10.4	3.8
Sexual abuse	2,379	2,594	2,962	3,326		5,271	12.7	4.6
Emotional abuse	2,192	2,125	2,500	4,001		3,385	8.1	2.9
Neglect	4,766	4,677	4,755	5,458		6,421	15.4	5.6

* Breakdown of the 2012 abuse types was not available due to transition from Child Care Interim Dataset to Quarter 4 Addendum Return. Please see technical notes under 'Review of Adequacy Reports' in Appendix 1.

** There was a break in the series from 2011 to 2012. Please see technical notes under 'Review of Adequacy Reports' in Appendix 1.

Source: Child Care Interim Dataset, 2008-2011 (HSE); Child Care Quarterly PI Metrics, 2012-2013 (HSE)

Differences by geographic location

- Overall, there were 36.2 child welfare and protection reports per 1,000 children in 2013 (*see Table 75*). Rates ranged across Local Health Office (LHO) Area from 13.7 per 1,000 in Dublin South East to 61.7 per 1,000 in Cavan/Monaghan.

Table 75: Number and rate (per 1,000) of child welfare and protection reports to the HSE, by HSE Region and LHO Area (2013)

	No. of child welfare and protection reports	No. of children in HSE Region/LHO Area	Rate in 2013 per 1,000 children in HSE Region/LHO Area in 2011*
Total	**41,599**	**1,148,687**	**36.2**
HSE Dublin North East	**10,152**	**258,569**	**39.3**
Cavan/Monaghan	2,166	35,085	61.7
Dublin North	2,010	63,256	31.8
Dublin North Central	951	24,619	38.6
Dublin North West	1,664	48,047	34.6
Louth	1,283	33,034	38.8
Meath	2,078	54,528	38.1
HSE Dublin Mid-Leinster	**10,237**	**324,955**	**31.5**
Dublin South	517	28,558	18.1
Dublin South City	740	23,409	31.6
Dublin South East	304	22,113	13.7
Dublin South West	1,120	38,227	29.3
Dublin West	777	39,029	19.9
Kildare/West Wicklow	1,687	64,573	26.1
Laois/Offaly	2,068	44,081	46.9
Longford/West Meath	2,010	33,645	59.7
Wicklow	1,013	31,320	32.3
HSE South	**11,394**	**292,796**	**38.9**
Carlow/Kilkenny	1,110	33,790	32.8
Kerry	727	34,940	20.8
North Cork	935	22,887	40.9
North Lee	2,201	46,453	47.4
South Lee	1,055	44,904	23.5
Tipperary SR	1,294	25,073	51.6
Waterford	1,521	31,703	48.0
West Cork	457	14,204	32.2
Wexford	2,094	38,842	53.9

continued

Table 75 (*continued*)

	No. of child welfare and protection reports	No. of children in HSE Region/LHO Area	Rate in 2013 per 1,000 children in HSE Region/LHO Area in 2011*
HSE West	**9,816**	**272,367**	**36.0**
Clare	1,170	27,027	43.3
Donegal	1,024	44,534	23.0
Galway	2,727	61,194	44.6
Limerick	1,643	41,041	40.0
Mayo	730	32,514	22.5
Roscommon	517	16,076	32.2
Sligo/Leitrim/West Cavan	987	23,060	42.8
Tipperary NR	1,018	26,921	37.8

* County-level population estimates are not available for 2013.

Source: Census of the Population, 2011; Child Care Quarterly PI Metrics, 2013 (HSE)

SOCIAL, EMOTIONAL AND BEHAVIOURAL OUTCOMES

PARTICIPATION IN DECISION-MAKING

The percentage of children aged 10-17 who report that students at their school participate in making the school rules has increased by more than 10 percentage points between 2006 and 2010 – from 22.5% in 2006 to 32.6% in 2010.

Measure

The percentage of children aged 10-17 who report that students at their school participate in making the school rules.

Key findings

- In 2010, 32.6% of children aged 10-17 reported that students at their school participate in making the school rules.

Differences by population groups

- When compared to other children, Traveller children were more likely to report that students in their school participate in making the school rules (*see Table 76*). This difference was statistically significant.
- There were no significant differences observed between immigrant and other children and children with and children without disability and/or chronic illness.

Table 76: Percentage of children aged 10-17 who report that students at their school participate in making the school rules, by population groups (2010)

	%
All children	**32.6**
Traveller status	
Traveller children	41.2
All other children	32.1
Immigrant status	
Immigrant children	34.0
All other children	32.5
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	32.4
All other children	32.7

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

- Statistically significant differences were observed across age and gender, with a higher percentage of younger children and of girls reporting that students in their school participate in making the school rules (*see Table 77*).
- There were no statistically significant differences across social class categories.
- The percentage of children who report that students in their school participate in making school rules has increased from 22.5% in 2006 to 32.6% in 2010.

Table 77: Percentage of children aged 9-17 who report that students at their school participate in making the school rules, by age, gender and social class (1998, 2002, 2006 and 2010)

	1998	2002	2006	2010		
	Total (%)	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	**32.5**	**23.5**	**22.5**	**30.6**	**34.7**	**32.6**
Age						
9**	*n/a*	*n/a*	42.9	47.2	51.7	49.6
10-11	39.5	36.0	38.7	40.7	49.1	44.9
12-14	34.2	25.6	24.1	35.1	39.0	37.0
15-17	24.7	14.6	15.0	21.4	23.1	22.2
Social class						
SC 1-2	28.8	21.5	19.6	29.5	33.7	31.1
SC 3-4	33.6	23.5	22.3	30.7	34.5	32.6
SC 5-6	34.2	26.8	24.1	31.2	36.1	33.3

* Refers to children aged 10-17 only.

** Refers to data collected separately in a Middle Childhood Study. These children are not part of the core HBSC sample. Further details can be found in the technical notes in Appendix 1.

n/a = not available

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 78*). Overall, 32.6% of children report that students at their school participate in making the school rules. This ranged from 29.5% in the Mid-West to 39.2% in the Mid-East.

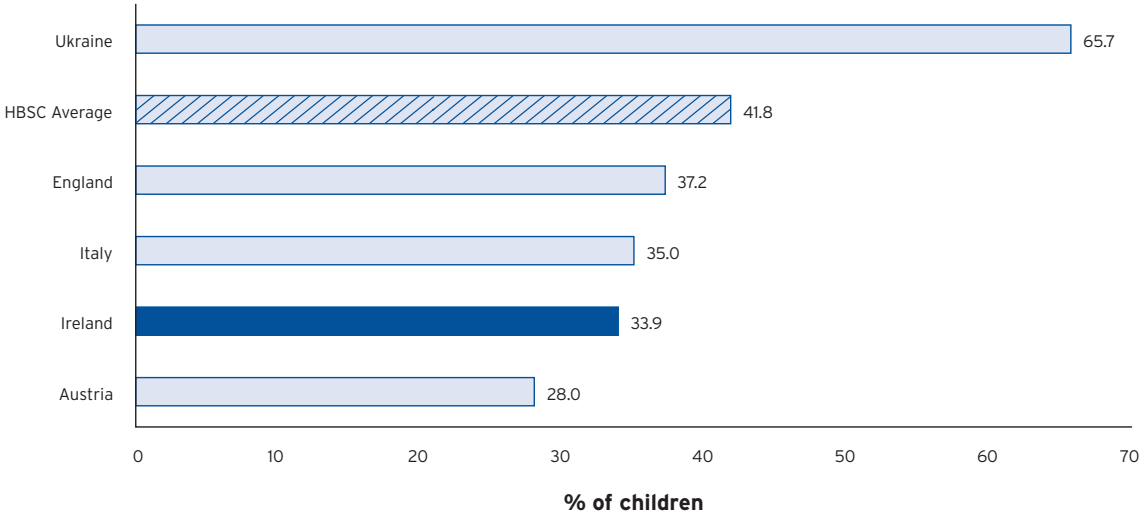
Table 78: Percentage of children aged 10-17 who report that students at their school participate in making the school rules, by NUTS Region (2010)	
	%
All children	**32.6**
NUTS Region	
Border	31.1
Dublin	33.2
Midlands	33.5
Mid-East	39.2
Mid-West	29.5
South-East	32.5
South-West	30.7
West	31.0

Source: HBSC Survey, 2010

International comparisons

- Across the 5 countries and regions where this question was asked, the average percentage of children who reported that students in their school participate in making the school rules was 41.8% (*see Figure 17*). This ranged from 28.0% in Austria to 65.7% in the Ukraine. The corresponding percentage in Ireland was 33.9%. This was below the HBSC average of 41.8%. (Note: International comparisons are based on data from children aged 11, 13 and 15 only.)

Figure 17: Percentage of children aged 11, 13 and 15 who report that students at their school participate in making the school rules, by country (2010)



Source: HBSC Survey, 2010

READING AS A LEISURE ACTIVITY

More than one-third of 15-year-old children report that reading is one of their favourite hobbies.

Measure

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

Key findings

- In 2012, 38.6% of 15-year-olds reported that reading is one of their favourite hobbies.

Differences by population groups

- The proportion of children from the Traveller community who reported that reading is one of their favourite hobbies (26.8%) is significantly lower than the corresponding proportion for all other children (38.9%) (*see Table 79*).
- The proportion of children with an immigrant background who reported that reading is one of their favourite hobbies (43.6%) is significantly higher than the corresponding proportion for all other children (38.2%).

Table 79: Percentage of children aged 15 who report that reading is one of their favourite hobbies, by population groups (2012)

	%
All children	**38.6**
Traveller status	
Traveller children	26.8
All other children	38.9
Immigrant status	
Immigrant children	43.6
All other children	38.2

Source: PISA Survey, 2012

Differences by gender, social class and over time

- The proportion of girls who reported that reading is one of their favourite hobbies (47.3%) is significantly greater than the corresponding proportion of boys (30.0%) (*see Table 80*).
- The proportion of children from the highest social class category who reported that reading is one of their favourite hobbies (46.3%) is significantly higher than the corresponding proportions of children from the medium (37.6%) and lowest social class categories (31.6%).

Table 80: Percentage of children aged 15 who report that reading is one of their favourite hobbies, by gender and social class (2006, 2009 and 2012)

	2006	2009	2012
All children	**42.6**	**31.7**	**38.6**
Gender			
Boys	32.7	23.4	30.0
Girls	52.0	40.2	47.3
Social class			
High SES	50.0	39.2	46.3
Medium SES	41.8	31.7	37.6
Low SES	36.5	25.3	31.6

Source: PISA Surveys

SMOKING CIGARETTES: WEEKLY SMOKING

Cigarette smoking is significantly higher among Traveller children.

Measure

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

Key findings

- In 2010, 7.9% of children aged 10-17 reported smoking cigarettes every week.

Differences by population groups

- When compared to other children, Traveller children, immigrant children and children with a disability and/or chronic illness were more likely to report smoking cigarettes every week (*see Table 81*). These differences were statistically significant.

Table 81: Percentage of children aged 10-17 who report smoking cigarettes every week, by population groups (2010)

	%
All children	**7.9**
Traveller status	
Traveller children	22.9
All other children	7.7
Immigrant status	
Immigrant children	9.7
All other children	7.7
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	9.5
All other children	7.4

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

- Statistically significant differences were observed across age and social class categories, with a higher percentage of older children and of children from lower social class categories reporting that they smoke cigarettes every week (*see Table 82*).
- There were no significant differences between boys and girls.
- The percentage of children who report smoking cigarettes every week has decreased from 13.3% in 2002 to 7.9% in 2010.

Table 82: Percentage of children aged 9-17 who report smoking cigarettes every week, by age, gender and social class (2002, 2006 and 2010)

	2002	2006	2010		
	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	**13.3**	**11.6**	**8.1**	**7.6**	**7.9**
Age					
9**	*n/a*	*n/a*	2.0	0.1	1.0
10-11	1.6	1.2	0.8	0.7	0.8
12-14	8.4	7.4	4.6	3.7	4.2
15-17	24.6	20.1	15.2	15.6	15.4
Social class					
SC 1-2	10.8	9.3	6.1	6.1	6.1
SC 3-4	13.6	11.6	7.7	7.4	7.6
SC 5-6	14.4	11.0	8.0	8.8	8.4

* Refers to children aged 10-17 only.

** Refers to data collected separately in a Middle Childhood Study. These children are not part of the core HBSC sample. Further details can be found in the technical notes in Appendix 1.

n/a = not available

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 83*). Overall, 7.9% of children report smoking cigarettes every week. This ranged from 6.0% in the Border region to 9.7% in the West.

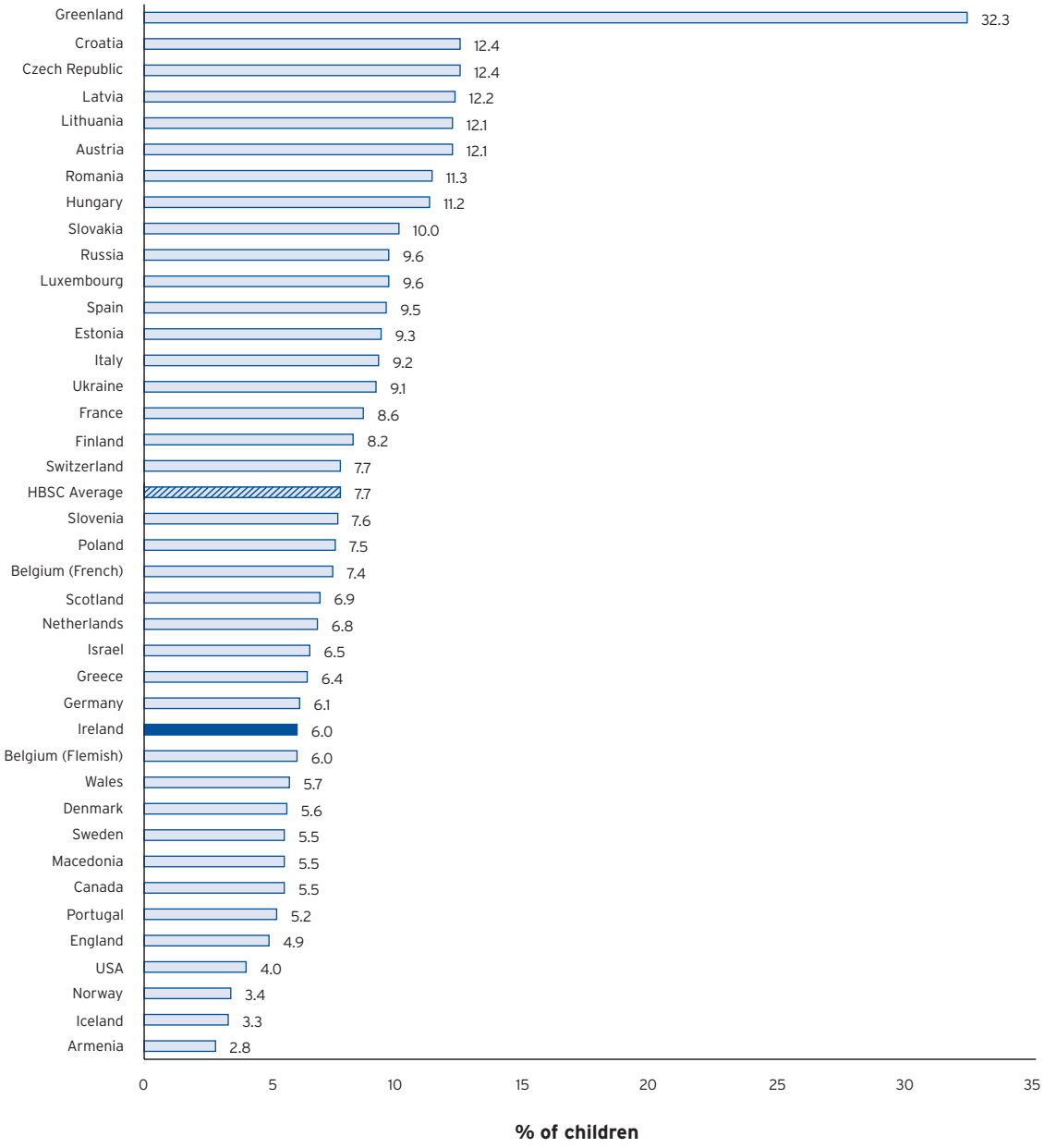
Table 83: Percentage of children aged 10-17 who report smoking cigarettes every week, by NUTS Region (2010)	
	%
All children	**7.9**
NUTS Region	
Border	6.0
Dublin	7.3
Midlands	8.9
Mid-East	7.6
Mid-West	9.3
South-East	8.2
South-West	7.7
West	9.7

Source: HBSC Survey, 2010

International comparisons

- Across 39 countries and regions, the average percentage of children who reported smoking cigarettes every week was 7.7% (*see Figure 18*). This ranged from 2.8% in Armenia to 32.3% in Greenland. The corresponding percentage in Ireland was 6.0%. This was below the HBSC average of 7.7%. (Note: International comparisons are based on data from children aged 11, 13 and 15 only.)

Figure 18: Percentage of children aged 11, 13 and 15 who report smoking cigarettes every week, by country (2010)



Source: HBSC Survey, 2010

SMOKING CIGARETTES: NEVER SMOKING

The percentage of children aged 10-17 who report never smoking has increased from 50.8% in 1998 to 73.5% in 2010.

Measure

The percentage of children aged 10-17 who report never smoking cigarettes.

Key findings

- In 2010, 73.5% of children aged 10-17 reported never smoking cigarettes.

Differences by population groups

- When compared to other children, Traveller children and children with a disability and/or chronic illness were less likely to report never smoking cigarettes (*see Table 84*). These differences were statistically significant.
- There were no significant differences between immigrant and other children.

Table 84: Percentage of children aged 10-17 who report never smoking cigarettes, by population groups (2010)

	%
All children	**73.5**
Traveller status	
Traveller children	57.7
All other children	73.5
Immigrant status	
Immigrant children	74.2
All other children	73.4
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	70.3
All other children	74.3

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

- Statistically significant differences were observed across age, gender and social class categories (*see Table 85*). A lower percentage of older children, boys and children from lower social class categories reported never smoking cigarettes.
- The percentage of children who report never smoking cigarettes has increased from 50.8% in 1998 to 73.5% in 2010.

Table 85: Percentage of children aged 9-17 who report never smoking cigarettes, by age, gender and social class (1998, 2002, 2006 and 2010)

	1998	2002	2006	2010		
	Total (%)	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	**50.8**	**59.8**	**64.3**	**72.6**	**74.5**	**73.5**
Age						
9**	*n/a*	*n/a*	*n/a*	93.2	98.4	95.9
10-11	79.0	89.8	91.4	94.0	96.4	95.2
12-14	51.0	66.5	71.6	81.1	83.7	82.3
15-17	31.6	37.9	45.9	54.4	53.4	53.9
Social class						
SC 1-2	49.0	59.8	64.9	75.4	76.3	75.8
SC 3-4	50.3	59.3	64.3	73.4	75.2	74.3
SC 5-6	52.3	60.6	64.5	70.9	69.5	70.2

* Refers to children aged 10-17 only.

** Refers to data collected separately in a Middle Childhood Study. These children are not part of the core HBSC sample. Further details can be found in the technical notes in Appendix 1.

n/a = not available

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 86*). Overall, 73.5% of children report never smoking cigarettes. This ranged from 68.7% in the West to 76.5% in the Border region.

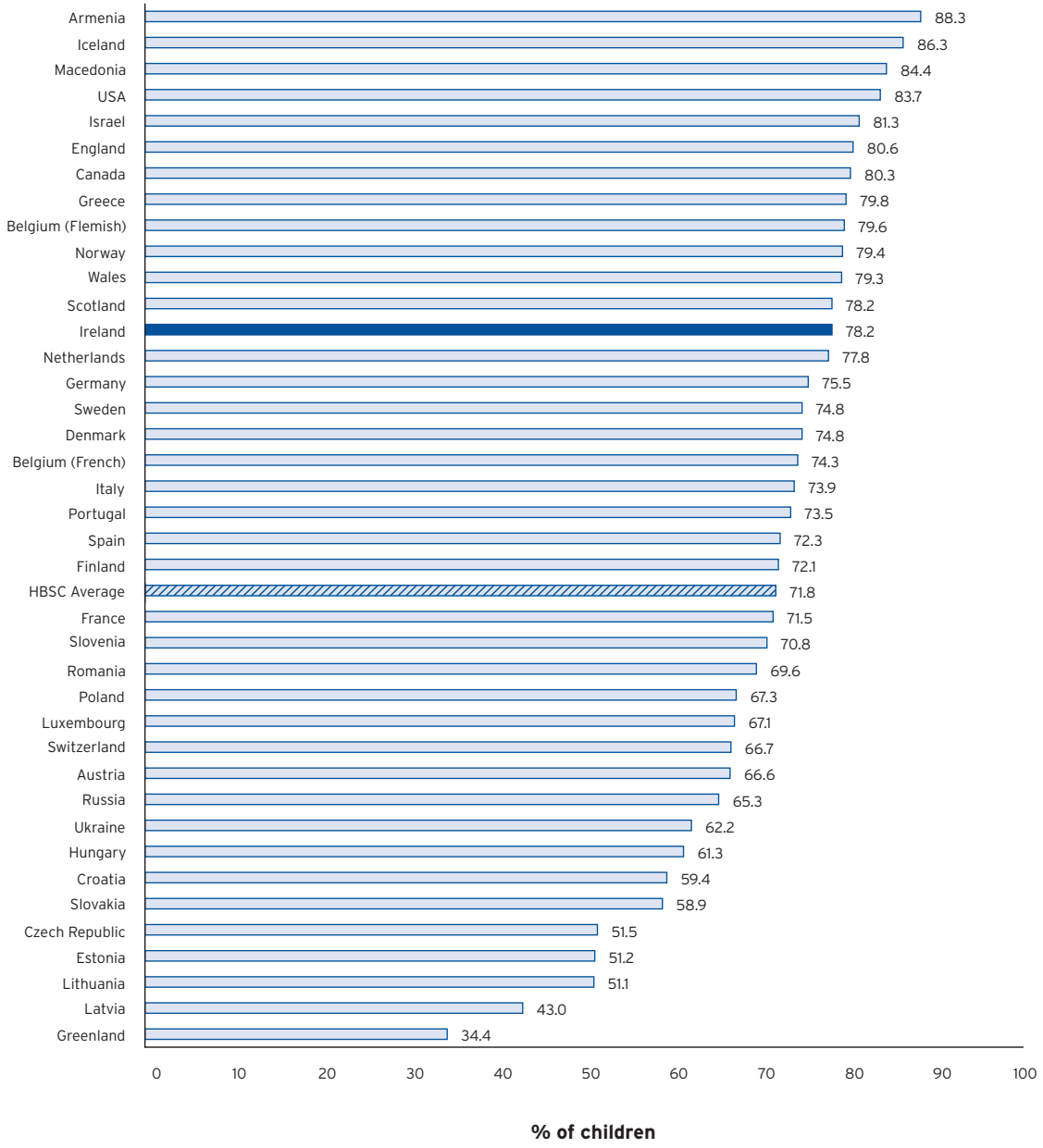
Table 86: Percentage of children aged 10-17 who report never smoking cigarettes, by NUTS Region (2010)	
	%
All children	**73.5**
NUTS Region	
Border	76.5
Dublin	76.3
Midlands	70.3
Mid-East	74.2
Mid-West	69.6
South-East	72.2
South-West	74.0
West	68.7

Source: HBSC Survey, 2010

International comparisons

- Across 39 countries and regions, the average percentage of children who reported never smoking cigarettes was 71.8% (*see Figure 19*). This ranged from 34.4% in Greenland to 88.3% in Armenia. The corresponding percentage in Ireland was 78.2%. This was above the HBSC average of 71.8%. (Note: International comparisons are based on data from children aged 11, 13 and 15 only.)

Figure 19: Percentage of children aged 11, 13 and 15 who report never smoking cigarettes, by country (2010)



Source: HBSC Survey, 2010

ALCOHOL USE: DRUNKENNESS

Traveller children are more likely to report being drunk at least once in the last 30 days.

Measure

The percentage of children aged 10-17 who report to have been drunk at least once in the last 30 days.

Key findings

- In 2010, 18.3% of children aged 10-17 reported that they had been drunk at least once in the last 30 days.

Differences by population groups

- When compared to other children, Traveller children and children with a disability and/or chronic illness were more likely to report being drunk at least once in the last 30 days, while immigrant children were less likely to report this (*see Table 87*). These differences were statistically significant.

Table 87: Percentage of children aged 10-17 who report to have been drunk at least once in the last 30 days, by population groups (2010)

	%
All children	**18.3**
Traveller status	
Traveller children	33.5
All other children	18.3
Immigrant status	
Immigrant children	16.1
All other children	18.5
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	21.1
All other children	17.6

Source: HBSC Survey, 2010

Differences by age, gender and social class

- Statistically significant differences were observed across age and gender, with a lower percentage of young children and of girls reporting to have been drunk at least once in the last 30 days (*see Table 88*).
- The percentage of children in each social class category who reported that they had been drunk at least once in the last 30 days was broadly similar, with no statistically significant differences.

Table 88: Percentage of children aged 10-17 who report to have been drunk at least once in the last 30 days, by age, gender and social class (2006 and 2010)

	2006	2010		
	Total (%)	Boys (%)	Girls (%)	Total (%)
All children	**20.4**	**19.1**	**17.4**	**18.3**
Age				
10-11	1.8	2.8	1.2	2.0
12-14	10.3	9.7	8.3	9.0
15-17	38.0	36.9	36.3	36.6
Social class				
SC 1-2	19.4	17.3	16.6	17.0
SC 3-4	19.6	19.0	16.5	17.8
SC 5-6	19.8	17.6	19.6	18.6

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 89*). Overall, 18.3% of children report to have been drunk at least once in the last 30 days. This ranged from 14.9% in the Border region to 21.5% in the West.

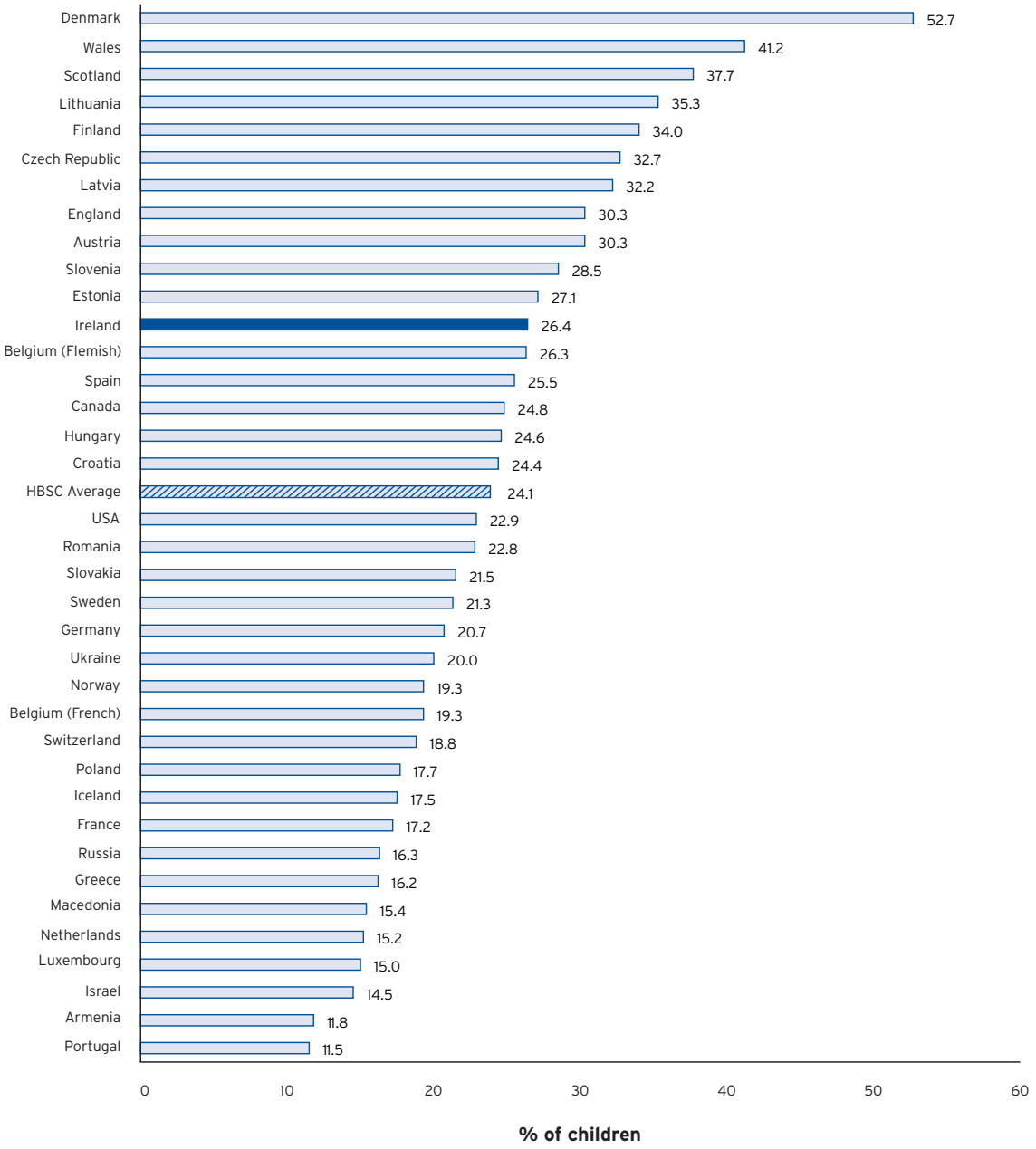
Table 89: Percentage of children aged 10-17 who report to have been drunk at least once in the last 30 days, by NUTS Region (2010)	
	%
All children	**18.3**
NUTS Region	
Border	14.9
Dublin	20.7
Midlands	17.4
Mid-East	17.7
Mid-West	18.4
South-East	16.1
South-West	17.8
West	21.5

Source: HBSC Survey, 2010

International comparisons

- Across 37 countries and regions, the average percentage of children who reported that they had been drunk at least once in the last 30 days was 24.1% (*see Figure 20*). This ranged from 11.5% in Portugal to 52.7% in Denmark. The corresponding percentage in Ireland was 26.4%. This was above the HBSC average of 24.1%. (Note: International comparisons are based on data from children aged 15 only.)

Figure 20: Percentage of children aged 15 who report to have been drunk at least once in the last 30 days, by country (2010)



Source: HBSC Survey, 2010

ALCOHOL USE: NEVER DRINKING ALCOHOL

The percentage of children aged 10-17 who report never having had an alcoholic drink increased from 40.0% in 2002 to 54.1% in 2010.

Measure

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

Key findings

- In 2010, 54.1% of children aged 10-17 reported never having had an alcoholic drink.

Differences by population groups

- When compared to other children, Traveller children and children with a disability and/or chronic illness were less likely to report never having had an alcoholic drink (*see Table 90*). These differences were statistically significant.
- There were no significant differences between immigrant and other children.

Table 90: Percentage of children aged 10-17 who report never having had an alcoholic drink, by population groups (2010)

	%
All children	**54.1**
Traveller status	
Traveller children	45.6
All other children	53.9
Immigrant status	
Immigrant children	53.9
All other children	54.1
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	49.6
All other children	55.2

Source: HBSC Survey, 2010

Differences by age, gender and social class

- Statistically significant differences were observed across age and gender, with a lower percentage of older children and of boys reporting never having had an alcoholic drink (*see Table 91*).
- The percentage of children in each social class category reporting never having had an alcoholic drink were broadly similar, with no statistically significant differences.
- The percentage of children who report never having had an alcoholic drink has increased from 40.0% in 2002 to 54.1% in 2010.

Table 91: Percentage of children aged 10-17 who report never having had an alcoholic drink, by age, gender and social class (2002, 2006 and 2010)

	2002	2006	2010		
	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children	**40.0**	**47.2**	**51.7**	**56.7**	**54.1**
Age					
10-11	69.4	78.5	78.4	88.6	83.5
12-14	48.0	57.1	61.5	69.6	65.5
15-17	17.1	24.9	30.6	27.3	29.0
Social class					
SC 1-2	40.9	47.1	51.6	56.3	53.9
SC 3-4	38.5	47.5	52.9	59.1	55.9
SC 5-6	41.2	48.1	52.5	53.3	52.9

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 92*). Overall, 54.1% of children report that they had never had an alcoholic drink. This ranged from 48.7% in the West to 56.8% in the Border region.

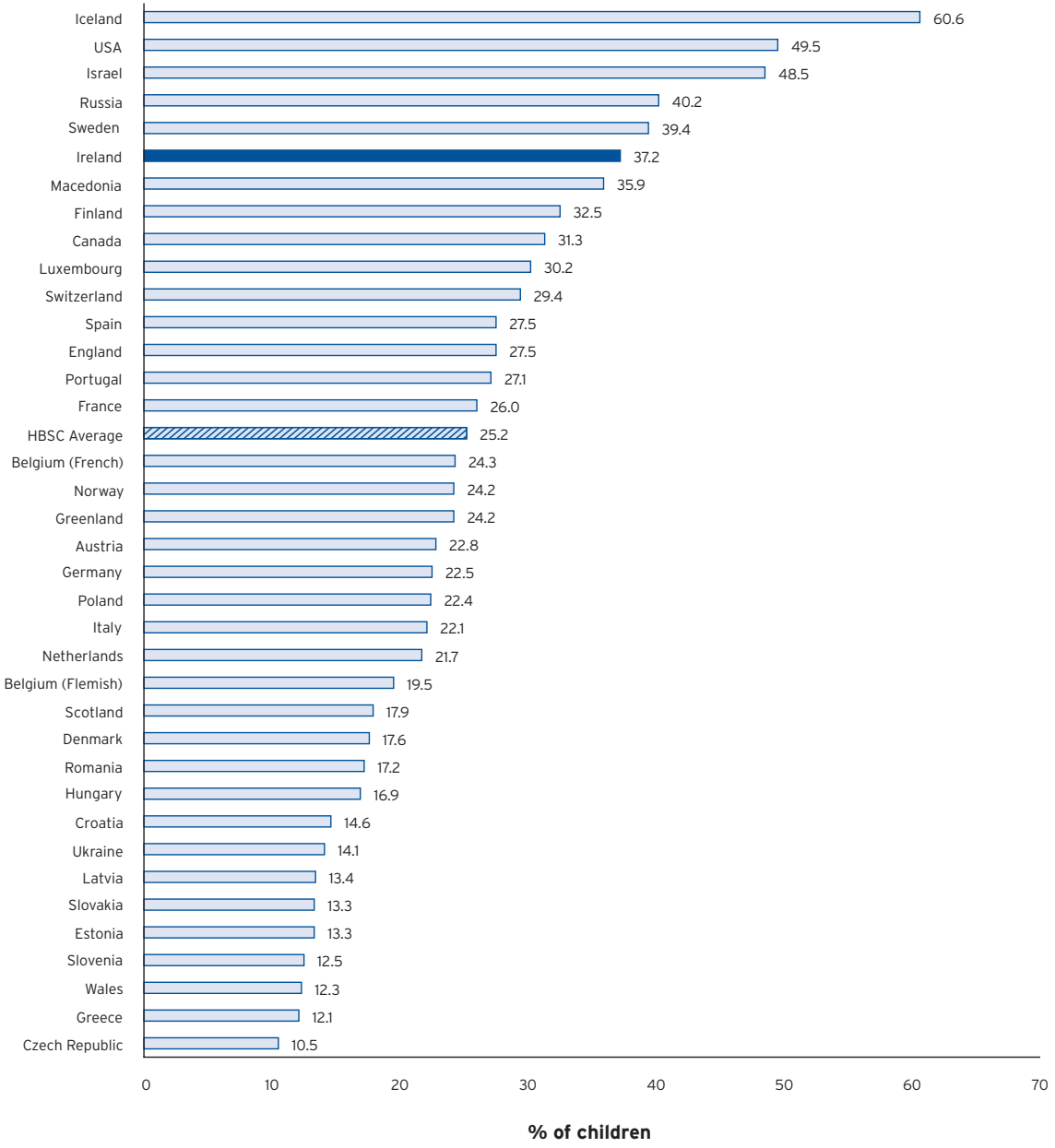
Table 92: Percentage of children aged 10-17 who report never having had an alcoholic drink, by NUTS Region (2010)	
	%
All children	**54.1**
NUTS Region	
Border	56.8
Dublin	56.6
Midlands	51.3
Mid-East	56.5
Mid-West	52.0
South-East	49.8
South-West	54.3
West	48.7

Source: HBSC Survey, 2010

International comparisons

- Across 37 countries and regions, the average percentage of children who reported never having had an alcoholic drink was 25.2% (*see Figure 21*). This ranged from 10.5% in Czech Republic to 60.6% in Iceland. The corresponding percentage in Ireland was 37.2%. This was above the HBSC average of 25.2%. (Note: International comparisons are based on data from children aged 15 only.)

Figure 21: Percentage of children aged 15 who report never having had an alcoholic drink, by country (2010)



Source: HBSC Survey, 2010

CANNABIS USE

Cannabis use is significantly higher among immigrant children, Traveller children and children with a disability and/or chronic illness.

Measure

The percentage of children aged 10-17 who report to have taken cannabis at least once in their lifetime.

Key findings

- In 2010, 10.5% of children aged 10-17 reported that they had taken cannabis at least once in their lifetime.

Differences by population groups

- When compared to other children, Traveller children, immigrant children and children with a disability and/or chronic illness were more likely to report that they had taken cannabis at least once in their lifetime (*see Table 93*). These differences were statistically significant.

Table 93: Percentage of children aged 10-17 who report to have taken cannabis at least once in their lifetime, by population groups (2010)

	%
All children	**10.5**
Traveller status	
Traveller children	26.6
All other children	10.4
Immigrant status	
Immigrant children	12.9
All other children	10.2
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	12.1
All other children	10.0

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

- Statistically significant differences were observed across age, gender and social class (*see Table 94*). A higher percentage of older children, boys and children from the lower social class category were more likely to report taking cannabis at least once in their lifetime.
- The percentage of children who reported taking cannabis at least once in their lifetime has decreased from 15.7% in 2006 to 10.5% in 2010.

Table 94: Percentage of children aged 10-17 who report to have taken cannabis at least once in their lifetime, by age, gender and social class (2002, 2006 and 2010)

	2002	2006	2010		
	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children	**12.1**	**15.7**	**12.5**	**8.2**	**10.5**
Age					
10-11	0.8	0.7	1.5	0.8	1.1
12-14	5.2	8.3	6.6	3.7	5.2
15-17	25.9	29.0	24.0	17.2	20.8
Social class					
SC 1-2	11.3	14.5	10.8	7.0	8.9
SC 3-4	12.2	15.2	11.8	7.1	9.5
SC 5-6	13.4	15.2	12.3	10.9	11.6

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 95*). Overall, 10.5% of children report taking cannabis at least once in their lifetime. This ranged from 8.1% in the Border region to 12.9% in the Mid-West.

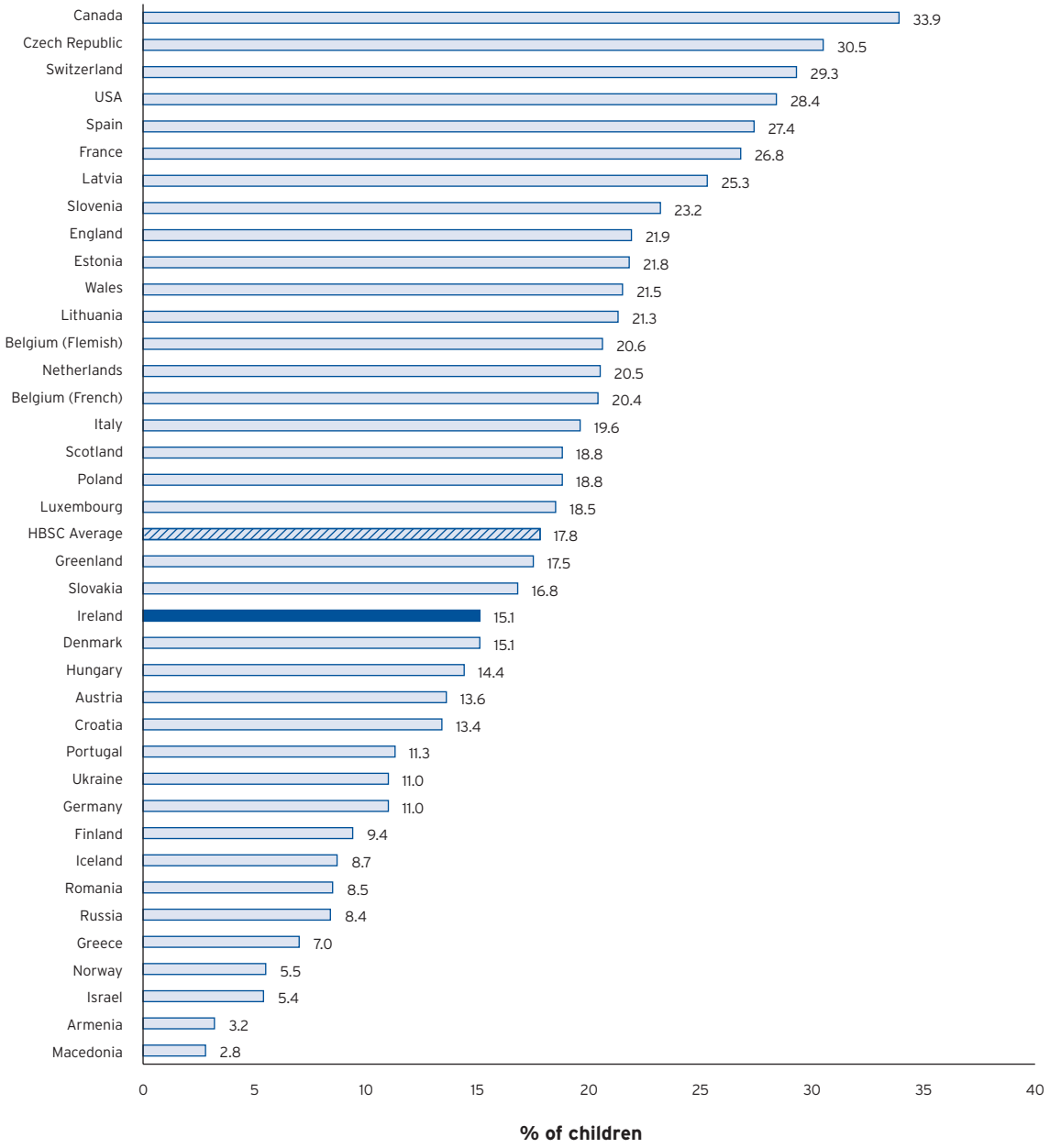
Table 95: Percentage of children aged 10-17 who report to have taken cannabis at least once in their lifetime, by NUTS Region (2010)	
	%
All children	**10.5**
NUTS Region	
Border	8.1
Dublin	11.4
Midlands	9.9
Mid-East	11.7
Mid-West	12.9
South-East	10.8
South-West	9.7
West	8.4

Source: HBSC Survey, 2010

International comparisons

- Across 38 countries and regions, the average percentage of children who reported having ever used cannabis in their lifetime was 17.8% (*see Figure 22*). This ranged from 2.8% in Macedonia to 33.9% in Canada. The corresponding percentage in Ireland was 15.1%. This was below the HBSC average of 17.8%. (Note: International comparisons are based on data from children aged 15 only.)

Figure 22: Percentage of children aged 15 who report to have taken cannabis at least once in their lifetime, by country (2010)



Source: HBSC Survey, 2010

SEXUAL HEALTH AND BEHAVIOUR: TEEN BIRTHS

The number of babies born to girls aged 17 and under decreased by 47.8% between 2009 and 2013.

Measure

The number of births to mothers aged 10-17.

Key findings

- In 2013, there were 303 births to mothers aged 10-17 (*see Table 96*).

Table 96: Number and rate (per 100,000) of births, by mothers' age (2009-2013)

	2009		2010		2011		2012		2013	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
Total (all ages)	**75,554**	**6,508**	**75,174**	**6,348**	**74,033**	**6,322**	**72,225**	**6,241**	**68,930**	**6,060**
Age										
15-17*	580	703	473	575	391	479	347	417	303	359
18-24	10,513	4,996	9,657	4,281	8,620	4,192	8,258	4,337	7,482	4,260
25+	64,429	7,422	65,022	7,419	65,010	7,357	63,600	7,197	61,140	6,968
Not stated	32	–	22	–	12	–	20	–	5	–

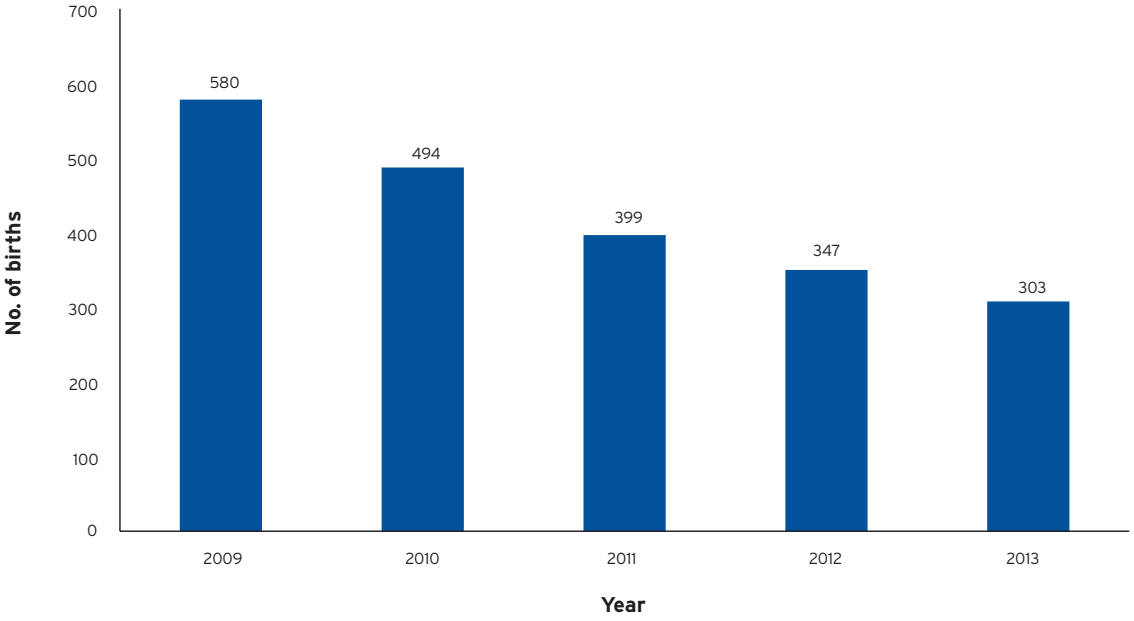
* The number of births to mothers aged 15-17 includes a small number to mothers aged 10-14 years.

Source: Vital Statistics and Population Estimates (CSO)

Differences over time

- Over the 5-year period 2009-2013, the number of births to mothers aged 10-17 has decreased by 47.8% (*see Figure 23*).

Figure 23: Number of births to mothers aged 10-17 (2009-2013)



Source: Vital Statistics and Population Estimates (CSO)

Differences by geographic location

- Overall, 4.4 per 1,000 births were to mothers aged 10-17 in 2013 (*see Table 97*). This rate was highest in Co. Longford, at 11.4 per 1,000 births.

Table 97: Number and rate (per 1,000) of births to mothers aged 10-17, by county (2013)			
	No. of births to 10-17 year-olds in State/County	No. of births to all ages in State/County	Rate in 2013 per 1,000 births in State/County
Total	**303**	**68,930**	**4.4**
County			
Carlow	4	852	4.7
Cavan	8	1,100	7.3
Clare	5	1,491	3.4
Cork	29	7,851	3.7
Donegal	15	1,919	7.8
Dublin	85	20,354	4.2
Galway	10	3,730	2.7
Kerry	5	1,802	2.8
Kildare	14	3,417	4.1
Kilkenny	9	1,328	6.8
Laois	8	1,200	6.7
Leitrim	1	458	2.2
Limerick	14	2,734	5.1
Longford	7	612	11.4
Louth	9	1,968	4.6
Mayo	5	1,713	2.9
Meath	8	3,202	2.5
Monaghan	4	830	4.8
Offaly	5	1,075	4.7
Roscommon	6	875	6.9
Sligo	4	875	4.6
Tipperary	13	2,287	5.7
Waterford	8	1,707	4.7
Westmeath	8	1,362	5.9
Wexford	11	2,086	5.3
Wicklow	8	2,102	3.8

Source: Vital Statistics, 2013 (CSO)

SEXUAL HEALTH AND BEHAVIOUR: SEXUAL ACTIVITY

Approximately 1 in 4 children aged 15-17 report that they have had sex.

Measure

The percentage of children aged 15-17 who report having ever had sex.

Key findings

- In 2010, 27.3% of children aged 15-17 reported that they have had sex.

Differences by population groups

- When compared to other children, children with a disability and/or chronic illness were more likely to report that they have had sex (*see Table 98*). This difference was statistically significant.
- There was no significant difference between immigrant and other children.

Table 98: Percentage of children aged 15-17 who report having ever had sex, by population groups (2010)

	%
All children	**27.3**
Traveller status	
Traveller children	*n/a*
All other children	*n/a*
Immigrant status	
Immigrant children	27.6
All other children	27.3
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	30.0
All other children	26.6

n/a = not available

Source: HBSC Survey, 2010

Differences by age, gender and social class

- Statistically significant differences were observed across gender and social class, with a higher percentage of boys and of children in the lower social class categories reporting that they had ever had sex (*see Table 99*).

Table 99: Percentage of children aged 15-17 who report having ever had sex, by age, gender and social class (2010)

	Boys (%)	Girls (%)	Total (%)
All children	**30.9**	**23.1**	**27.3**
Social class			
SC 1-2	24.8	17.7	21.3
SC 3-4	32.2	25.8	29.2
SC 5-6	30.2	28.3	29.2

Source: HBSC Survey, 2010

Differences by geographic location

- Overall, 27.3% of children report that they had ever had sex (*see Table 100*). There were no significant differences observed across regions.

Table 100: Percentage of children aged 15-17 who report having ever had sex, by NUTS Region (2010)

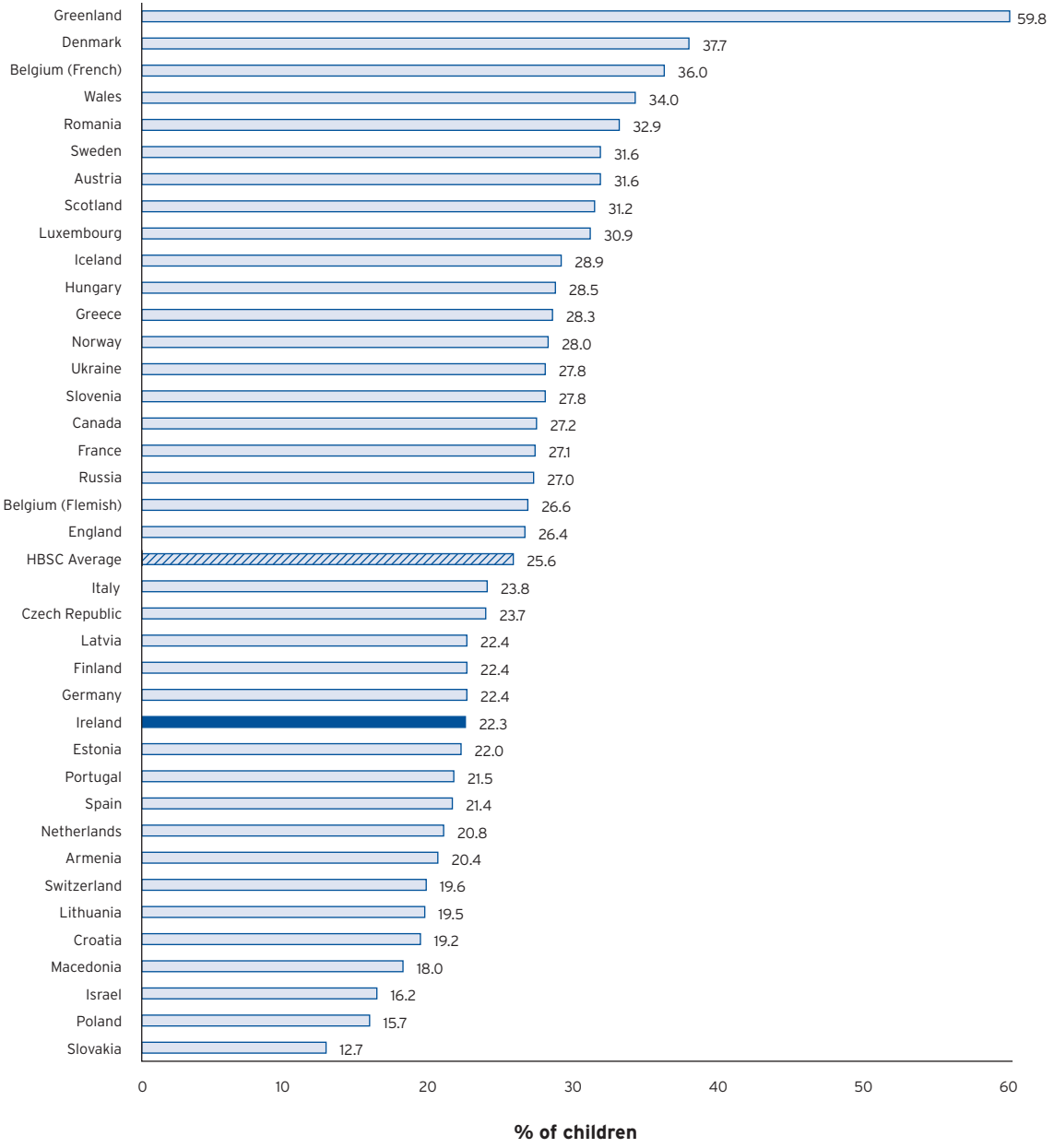
	%
All children	**27.3**
NUTS Region	
Border	24.3
Dublin	29.6
Midlands	24.6
Mid-East	28.2
Mid-West	30.0
South-East	25.4
South-West	26.6
West	27.2

Source: HBSC Survey, 2010

International comparisons

- Across 38 countries and regions, the average percentage of children who reported that they had ever had sex was 25.6% (*see Figure 24*). This ranged from 12.7% in Slovakia to 59.8% in Greenland. The corresponding percentage in Ireland was 22.3%. This was below the HBSC average of 25.6%. (Note: International comparisons are based on data from children aged 15 only.)

Figure 24: Percentage of children aged 15 who report having ever had sex, by country (2010)



Source: HBSC Survey, 2010

SELF-ESTEEM

Approximately 4 in 10 girls aged 15-17 report feeling happy with the way they are.

Measure

The percentage of children aged 10-17 who report feeling happy with the way they are.

Key findings

- In 2010, 57.3% of children aged 10-17 reported feeling happy with the way they are.

Differences by population groups

- When compared to other children, children with a disability and/or chronic illness were less likely to report feeling happy with the way they are (*see Table 101*). This difference was statistically significant.
- There were no significant differences between Traveller and other children and between immigrant and other children.

Table 101: Percentage of children aged 10-17 who report feeling happy with the way they are, by population groups (2010)

	%
All children	**57.3**
Traveller status	
Traveller children	55.4
All other children	57.3
Immigrant status	
Immigrant children	58.3
All other children	57.2
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	53.4
All other children	58.3

Source: HBSC Survey, 2010

Differences by age, gender and social class

- Statistically significant differences were observed across age and gender, with a lower percentage of older children and of girls reporting feeling happy with the way they are (*see Table 102*).
- The percentage of children in each social class category who reported feeling happy with the way they are was broadly similar, with no statistically significant differences.

Table 102: Percentage of children aged 9-17 who report feeling happy with the way they are, by age, gender and social class (2006 and 2010)

	2006	2010		
	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	**58.2**	**62.5**	**51.8**	**57.3**
Age				
9**	78.3	72.2	77.3	74.9
10-11	74.6	70.9	71.2	71.1
12-14	61.1	64.9	54.6	59.9
15-17	49.3	56.6	40.5	49.0
Social class				
SC 1-2	57.2	63.2	53.5	58.4
SC 3-4	58.2	63.1	51.8	57.6
SC 5-6	59.2	61.1	49.9	55.6

* Refers to children aged 10-17 only.

** Refers to data collected separately in a Middle Childhood Study. These children are not part of the core HBSC sample. Further details can be found in the technical notes in Appendix 1.

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 103*). Overall, 57.3% of children report feeling happy with the way they are. This ranged from 53.6% in the West to 60.9% in the South-West.

Table 103: Percentage of children aged 10-17 who report feeling happy with the way they are, by NUTS Region (2010)	
	%
All children	**57.3**
NUTS Region	
Border	56.0
Dublin	57.7
Midlands	57.2
Mid-East	54.8
Mid-West	55.8
South-East	57.4
South-West	60.9
West	53.6

Source: HBSC Survey, 2010

SELF-REPORTED HAPPINESS

Approximately 9 in 10 children aged 10-17 report being happy with their lives at present.

Measure

The percentage of children aged 10-17 who report being happy with their lives at present.

Key findings

- In 2010, 91.0% of children aged 10-17 reported being happy with their lives at present.

Differences by population groups

- When compared to other children, Traveller 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*). These differences were statistically significant.
- There was no significant difference between immigrant and other children.

Table 104: Percentage of children aged 10-17 who report being happy with their lives at present, by population groups (2010)

	%
All children	**91.0**
Traveller status	
Traveller children	82.2
All other children	91.2
Immigrant status	
Immigrant children	90.0
All other children	91.1
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	88.8
All other children	91.6

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

- Statistically significant differences were observed across age, gender and social class categories (*see Table 105*). There was a lower percentage of girls, older children and children from lower social class categories reporting feeling happy with their lives at present.

Table 105: Percentage of children aged 9-17 who report being happy with their lives at present, by age, gender and social class (1998, 2002, 2006 and 2010)

	1998	2002	2006	2010		
	Total (%)	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	**88.6**	**89.5**	**90.8**	**92.5**	**89.5**	**91.0**
Age						
9**	*n/a*	*n/a*	95.5	91.9	95.7	93.9
10-11	93.3	94.8	95.4	94.8	94.1	94.5
12-14	89.6	90.1	91.5	93.2	90.5	91.9
15-17	84.0	86.5	88.5	90.6	86.4	88.6
Social class						
SC 1-2	87.3	91.4	91.8	93.0	91.0	92.0
SC 3-4	89.3	90.1	91.4	93.7	89.6	91.7
SC 5-6	89.8	89.9	91.0	90.7	88.6	89.7

* Refers to children aged 10-17 only.

** Refers to data collected separately in a Middle Childhood Study. These children are not part of the core HBSC sample. Further details can be found in the technical notes in Appendix 1.

n/a = not available

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 106*). Overall, 91.0% of children report feeling happy with their lives at present. This ranged from 88.9% in the Mid-East to 92.6% in the Midlands.

Table 106: Percentage of children aged 10-17 who report being happy with their lives at present, by NUTS Region (2010)

	%
All children	**91.0**
NUTS Region	
Border	91.9
Dublin	90.3
Midlands	92.6
Mid-East	88.9
Mid-West	90.1
South-East	90.7
South-West	92.1
West	92.0

Source: HBSC Survey, 2010

YOUTH SUICIDE

In 2013, there were 13 suicides by children aged 10-17.

Measure

The number of suicides by children aged 10-17.

Key findings

- In 2013, there were 13 suicides by children aged 10-17.

Differences by gender and over time

- Over the 5-year period 2009-2013, the number and rate (per 100,000) of suicides was consistently higher among boys (*see Table 107*).

Table 107: Number and rate (per 100,000) of suicides, by age and gender (2009-2013)

	15-17 years*				18-24 years				All ages	
	Boys		Girls		Male		Female		Total	
Year	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
2009	14	16	5	6	58	25	10	4	552	12
2010	11	13	4	5	66	30	8	4	495	11
2011	11	13	2	2	67	32	14	7	554	12
2012	8	9	5	6	54	28	11	6	507	11
2013	12	13	1	1	37	20	9	5	475	10

* The number of suicides aged 15-17 includes a small number of children aged 10-14 years.

Source: Vital Statistics (CSO)

- Overall, suicide accounted for approximately 1 in 5 (19.7%) of all deaths of children aged 10-17 in 2013 (*see Table 108*).

Table 108: Suicides as a percentage of total deaths of children aged 10-17, by gender (2009-2013)					
	2009	2010	2011	2012	2013
Total	**25.7**	**22.4**	**17.3**	**16.9**	**19.7**
Gender					
Boys	27.5	25.0	24.4	18.2	25.5
Girls	21.7	17.4	6.7	15.2	5.3

Source: Vital Statistics (CSO)

DELIBERATE SELF-HARM

In 2013, more than twice as many girls as boys presented at hospital emergency departments following deliberate self-harm.

Measure

The number of children aged 10-17 who presented at a hospital emergency department following deliberate self-harm.

Key findings

- In 2013, 986 children aged 10-17 presented at a hospital emergency department following deliberate self-harm.

Differences by gender and over time

- Over the 5-year period 2009-2013, the number and rate (per 1,000) of children aged 10-17 who presented at a hospital emergency department following deliberate self-harm was approximately twice as high among girls (*see Table 109*).
- Overall, 2.0 per 1,000 children aged 10-17 presented at a hospital following deliberate self-harm in 2013.

Table 109: Number and rate (per 1,000) of children aged 10-17 who presented at a hospital emergency department following deliberate self-harm, by gender (2009-2013)

Year	Boys		Girls		Total	
	No.	Rate	No.	Rate	No.	Rate
2009	343	1.5	642	2.9	985	2.1
2010	317	1.3	661	2.9	978	2.1
2011	316	1.3	588	2.6	904	1.9
2012	295	1.2	662	2.9	957	2.0
2013	279	1.1	707	3.0	986	2.0

Source: Population and Migration Estimates, April 2014; National Registry of Deliberate Self-Harm

Differences by geographic location

- Rates per 1,000 children ranged from 1.7 per 1,000 in HSE West to 2.3 per 1,000 in HSE Dublin Mid-Leinster and Dublin North-East (*see Table 110*).

Table 110: Number and rate (per 1,000) of children aged 10-17 who presented at a hospital emergency department following deliberate self-harm, by HSE Region (2013)			
	No. of children aged 10-17 who presented at a hospital emergency department following deliberate self-harm in HSE Region	No. of children aged 10-17 in HSE Region*	Rate per 1,000 children in HSE Region in 2011*
Total	**986**	**471,588**	**2.1**
HSE Region			
Dublin Mid-Leinster	299	131,862	2.3
Dublin North-East	234	102,058	2.3
South	259	122,535	2.1
West	194	115,133	1.7

* HSE regional level population estimates are not available for 2012 and 2013.

Source: Census of the Population, 2011; National Registry of Deliberate Self-Harm, 2013

PHYSICAL ACTIVITY

Children in Ireland have one of the highest levels of physical activity among 40 WHO countries and regions.

Measure

The percentage of children aged 10-17 who report being physically active for at least 60 minutes per day on more than 4 days per week.

Key findings

- In 2010, 50.5% of children aged 10-17 reported being physically active for at least 60 minutes per day for more than 4 days per week.

Differences by population groups

- When compared to other children, immigrant children were less likely to report being physically active for at least 60 minutes per day on more than 4 days per week (*see Table 111*). This difference was statistically significant.
- There was no significant difference between Traveller and other children and children with and children without a disability and/or chronic illness.

Table 111: Percentage of children aged 10-17 who report being physically active for at least 60 minutes per day on more than 4 days per week, by population groups (2010)

	%
All children	**50.5**
Traveller status	
Traveller children	54.7
All other children	50.3
Immigrant status	
Immigrant children	43.5
All other children	51.2
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	51.5
All other children	50.3

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

- Statistically significant differences were observed across age and gender, with a lower percentage of older children and of girls reporting being physically active for at least 60 minutes per day on more than 4 days per week (*see Table 112*).
- The percentage of children in each social class category who reported being physically active for at least 60 minutes per day on more than 4 days per week was broadly similar, with no statistically significant differences.

Table 112: Percentage of children aged 9-17 who report being physical active for at least 60 minutes per day on more than 4 days per week, by age, gender and social class (2002, 2006 and 2010)

	2002	2006	2010		
	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	**47.4**	**54.8**	**60.1**	**40.4**	**50.5**
Age					
9**	*n/a*	79.5	73.3	68.1	70.6
10-11	59.8	75.1	65.7	57.9	61.7
12-14	51.1	61.5	64.0	44.0	54.2
15-17	37.7	39.9	53.2	28.9	41.4
Social class					
SC 1-2	48.6	55.2	61.5	41.3	51.4
SC 3-4	48.0	54.3	60.3	40.1	50.5
SC 5-6	46.1	55.3	59.4	37.8	48.6

* Refers to children aged 10-17 only.

** Refers to data collected separately in a Middle Childhood Study. These children are not part of the core HBSC sample. Further details can be found in the technical notes in Appendix 1.

n/a = not available

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 113*). Overall, 50.5% of children report being physically active for at least 60 minutes per day on more than 4 days per week. This ranged from 45.4% in Dublin to 54.6% in the West and South-West.

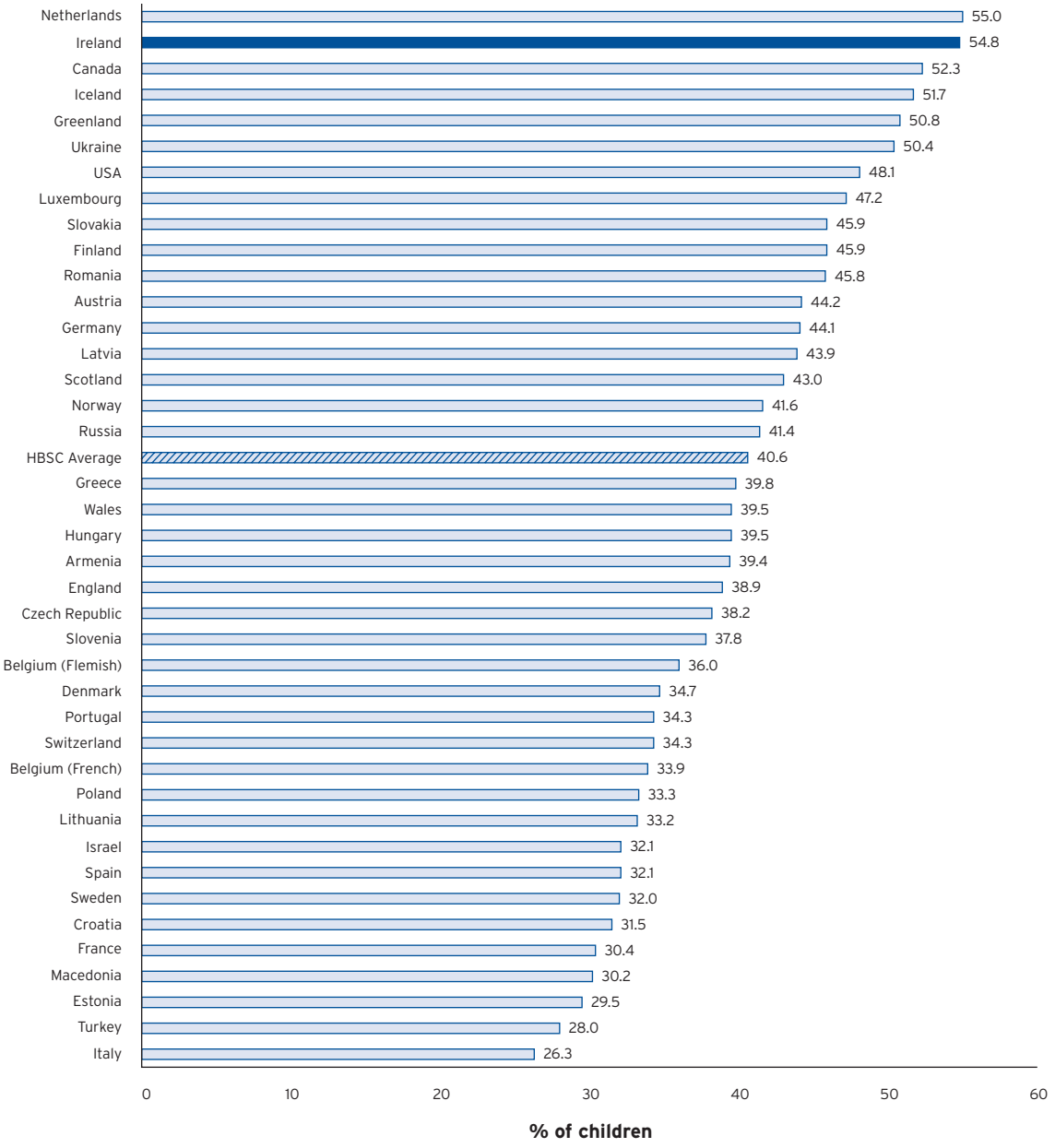
Table 113: Percentage of children aged 10-17 who report being physically active for at least 60 minutes per day on more than 4 days per week, by NUTS Region (2010)	
	%
All children	**50.5**
NUTS Region	
Border	50.2
Dublin	45.4
Midlands	48.1
Mid-East	48.7
Mid-West	51.9
South-East	52.7
South-West	54.6
West	54.6

Source: HBSC Survey, 2010

International comparisons

- Across 40 countries and regions, the average percentage of children who reported being physically active for at least 60 minutes per day on more than 4 days per week was 40.6% (*see Figure 25*). This ranged from 26.3% in Italy to 55.0% in the Netherlands. The corresponding percentage in Ireland was 54.8%. This was above the HBSC average of 40.6%. (Note: International comparisons are based on data from children aged 11, 13 and 15 only.)

Figure 25: Percentage of children aged 11, 13 and 15 who report being physically active for at least 60 minutes per day on more than 4 days per week, by country (2010)



Source: HBSC Survey, 2010

NUTRITION: BREAKFAST CONSUMPTION

Children in higher social classes are more likely to eat breakfast on 5 or more days per week.

Measure

The percentage of children aged 10-17 who report eating breakfast on 5 or more days per week.

Key findings

- In 2010, 76.6% of children aged 10-17 reported eating breakfast on 5 or more days per week.

Differences by population groups

- When compared to other children, Traveller children and immigrant children were less likely to report eating breakfast on 5 or more days per week (*see Table 114*). These differences were statistically significant.
- There were no significant differences between children with and without disability and/or chronic illness.

Table 114: Percentage of children aged 10-17 who report eating breakfast on 5 or more days per week, by population groups (2010)

	%
All children	**76.6**
Traveller status	
Traveller children	68.3
All other children	76.8
Immigrant status	
Immigrant children	69.4
All other children	77.3
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	75.4
All other children	77.0

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

- Statistically significant differences were observed across age, gender and social class categories, with a higher percentage of boys, younger children and children in the higher social class category reporting that they eat breakfast on 5 days or more per week (*see Table 115*).

Table 115: Percentage of children aged 10-17 who report eating breakfast on 5 or more days per week, by age, gender and social class (2002, 2006 and 2010)

	2002	2006	2010		
	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children	**77.3**	**76.0**	**79.9**	**73.2**	**76.6**
Age					
10-11	87.4	83.2	83.2	84.4	83.8
12-14	78.9	78.6	81.6	74.7	78.3
15-17	70.9	71.0	76.5	66.7	71.9
Social class					
SC 1-2	81.5	80.9	84.2	77.9	81.1
SC 3-4	75.3	75.7	79.8	72.0	76.0
SC 5-6	77.7	74.5	74.8	70.7	72.7

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 116*). Overall, 76.6% of children report eating breakfast on 5 or more days per week. This ranged from 73.0% in Dublin to 80.1% in the Border region.

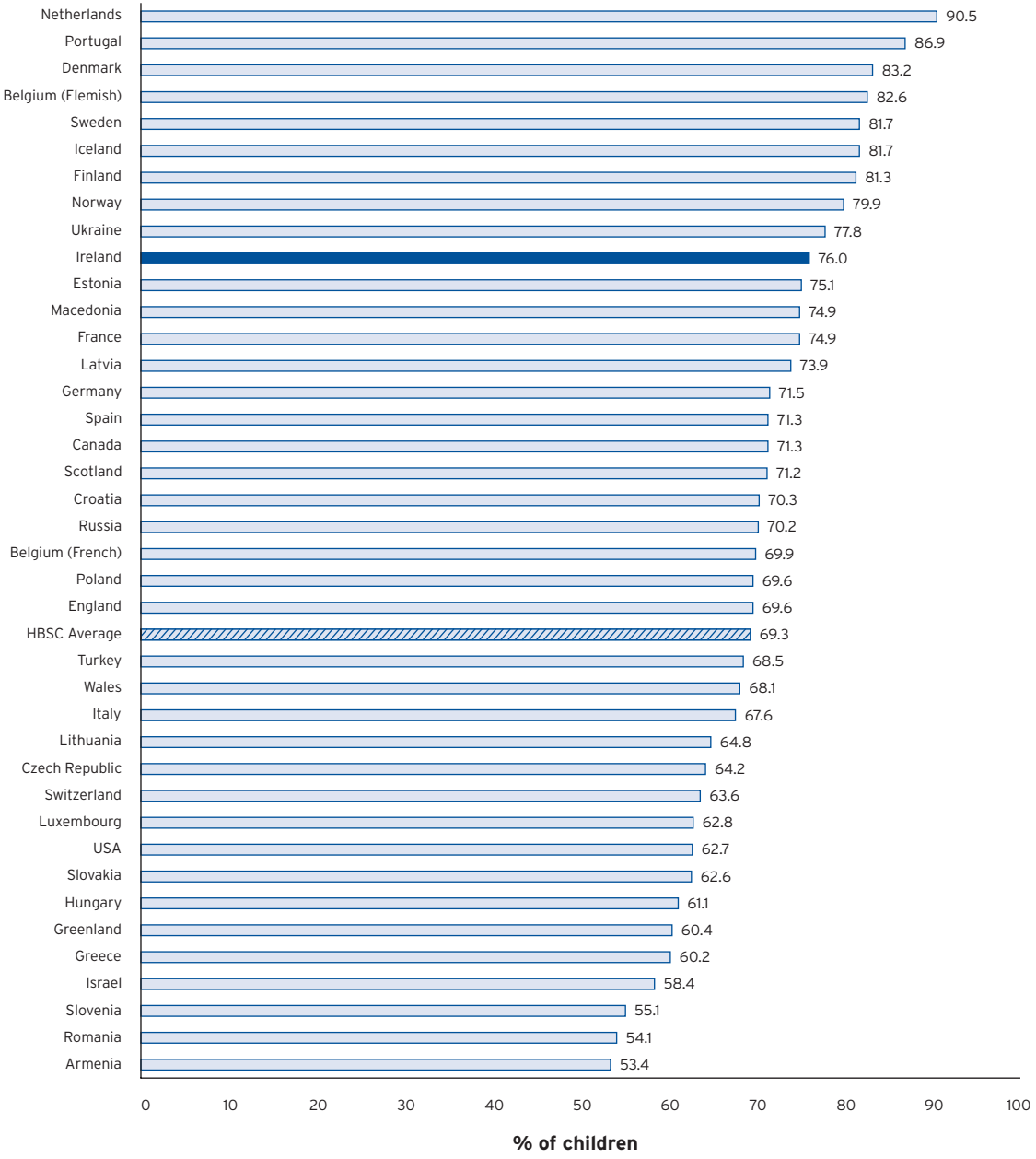
Table 116: Percentage of children aged 10-17 who report eating breakfast on 5 or more days per week, by NUTS Region (2010)	
	%
All children	**76.6**
NUTS Region	
Border	80.1
Dublin	73.0
Midlands	77.0
Mid-East	76.5
Mid-West	76.4
South-East	77.8
South-West	77.3
West	78.7

Source: HBSC Survey, 2010

International comparisons

- Across 39 countries and regions, the average percentage of children who reported eating breakfast on 5 or more days per week was 69.3% (*see Figure 26*). This ranged from 53.4% in Armenia to 90.5% in the Netherlands. The corresponding percentage in Ireland was 76.0%. This was above the HBSC average of 69.3%. (Note: International comparisons are based on data from children aged 11, 13 and 15 only.)

Figure 26: Percentage of children aged 11, 13 and 15 who report eating breakfast on 5 or more days per week, by country (2010)



Source: HBSC Survey, 2010

NUTRITION: SOFT DRINKS CONSUMPTION

1 in 5 children aged 10-17 report drinking soft drinks that contain sugar at least once a day.

Measure

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

Key findings

- In 2010, 20.8% of children aged 10-17 reported drinking soft drinks that contain sugar at least once a day.

Differences by population groups

- When compared to other children, Traveller 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*). These differences were statistically significant.
- There were no significant differences between immigrant and other children.

Table 117: Percentage of children aged 10-17 who report drinking soft drinks that contain sugar at least once a day, by population groups (2010)

	%
All children	**20.8**
Traveller status	
Traveller children	33.0
All other children	20.6
Immigrant status	
Immigrant children	20.1
All other children	20.9
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	23.1
All other children	20.0

Source: HBSC Survey, 2010

Differences by age, gender and social class

- Statistically significant differences were observed across gender, age and social class categories (*see Table 118*). A lower percentage of girls and a higher percentage of older children and children in lower social class categories reported drinking soft drinks that contain sugar daily or more frequently.

Table 118: Percentage of children aged 9-17 who report drinking soft drinks that contain sugar at least once a day, by age, gender and social class (2002, 2006 and 2010)

	2002	2006	2010		
	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	**23.2**	**26.0**	**22.9**	**18.5**	**20.8**
Age					
9**	*n/a*	*n/a*	21.5	11.7	16.3
10-11	16.9	18.7	13.9	15.5	14.7
12-14	22.8	25.3	22.8	18.6	20.8
15-17	26.4	29.3	25.9	19.5	22.9
Social class					
SC 1-2	19.5	20.0	18.3	12.6	15.5
SC 3-4	23.3	27.3	22.4	19.2	20.9
SC 5-6	25.1	28.5	29.2	24.4	26.8

* Refers to children aged 10-17 only.

** Refers to data collected separately in a Middle Childhood Study. These children are not part of the core HBSC sample. Further details can be found in the technical notes in Appendix 1.

n/a = not available

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 119*). Overall, 20.8% of children report that they drink soft drinks containing sugar at least once a day. This ranged from 14.4% in the West to 24.4% in Dublin.

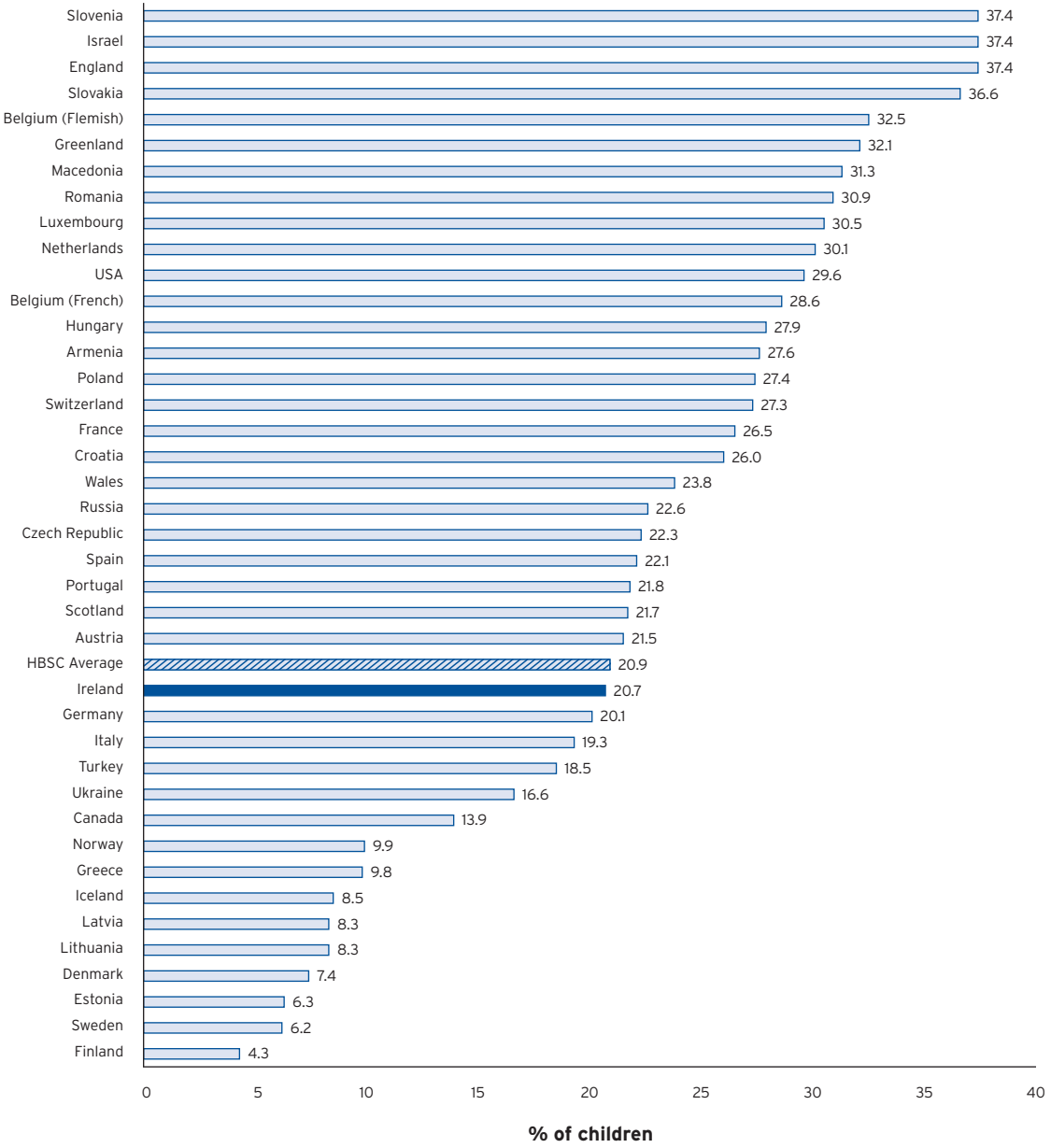
Table 119: Percentage of children aged 10-17 who report drinking soft drinks that contain sugar at least once a day, by NUTS Region (2010)	
	%
All children	**20.8**
NUTS Region	
Border	15.6
Dublin	24.4
Midlands	19.4
Mid-East	22.3
Mid-West	23.6
South-East	22.8
South-West	19.7
West	14.4

Source: HBSC Survey, 2010

International comparisons

- Across 40 countries and regions, the average percentage of children who reported drinking soft drinks that contain sugar at least once a day was 20.9% (*see Figure 27*). This ranged from 4.3% in Finland to 37.4% in England, Israel and Slovenia. The corresponding percentage in Ireland was 20.7%. This was similar to the HBSC average of 20.9%. (Note: International comparisons are based on data from children aged 11, 13 and 15 only.)

Figure 27: Percentage of children aged 11, 13 and 15 who report drinking soft drinks that contain sugar at least once a day, by country (2010)



Source: HBSC Survey, 2010

PART 4: FORMAL AND INFORMAL SUPPORTS

PUBLIC EXPENDITURE ON CHILDREN'S EDUCATION

In 2011, Ireland's public expenditure on education was 6.2% of Gross Domestic Product (GDP) and was above the EU-27 average.

Measure

Public expenditure on education.

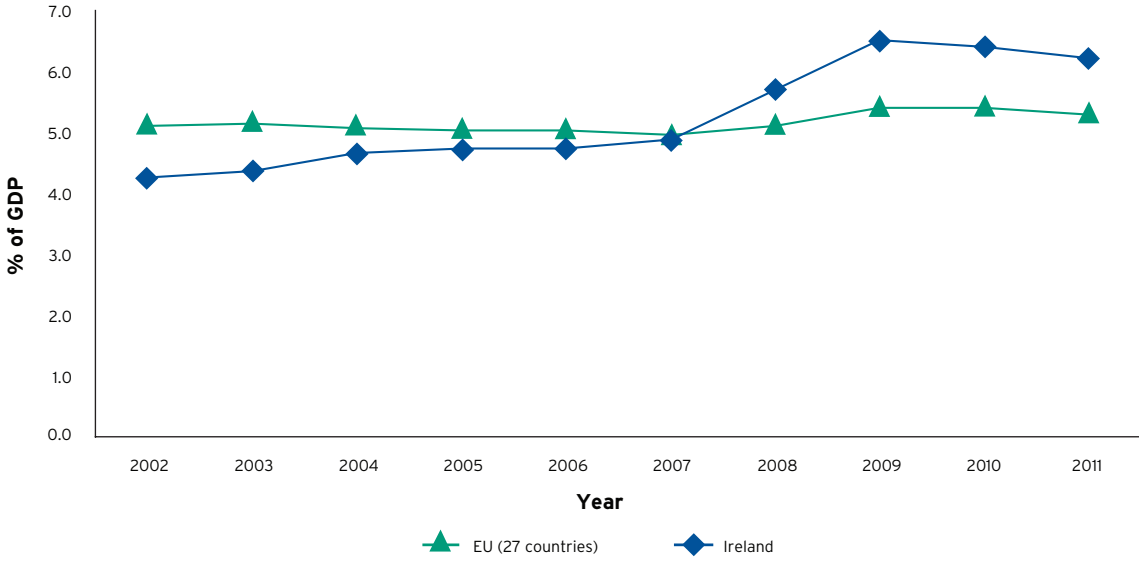
Key findings

- In 2011, public expenditure on education in Ireland represented 6.2% of Gross Domestic Product (GDP).

Differences over time

- Public expenditure on education in Ireland increased from just under 4.3% of GDP in 2002 to 6.2% of GDP in 2011 (*see Figure 28*).

Figure 28: Public expenditure on education in Ireland and in EU-27, as a % of GDP (2002-2011)



Source: Department of Education and Skills; Eurostat

Differences by geographic location

- In 2011, the EU-27 average expenditure on education as a percentage of GDP was 5.3% (*see Table 120*). This ranged from 3.1% in Romania to 8.8% in Denmark. Ireland's expenditure on education as a percentage of GDP in 2011 was 6.2%. This was above the EU-27 average of 5.3%.

Table 120: Public expenditure on education as a % of GDP in EU-27 (2009-2011)

	2009	2010	2011
EU-27	**5.4**	**5.4**	**5.3**
Country			
Austria	6.0	5.9	5.8
Belgium	6.6	6.6	6.6
Bulgaria	4.6	4.1	3.8
Cyprus	8.0	7.9	7.9
Czech Republic	4.4	4.3	4.5
Denmark	8.7	8.8	8.8
Estonia	6.0	5.7	5.2
Finland	6.8	6.9	6.8
France	5.9	5.9	5.7
Germany	5.1	5.1	5.0
Greece	*n/a*	*n/a*	*n/a*
Hungary	5.1	4.9	4.7
Ireland	**6.4**	**6.4**	**6.2**
Italy	4.7	4.5	4.3
Latvia	5.6	5.0	5.0
Lithuania	5.6	5.4	5.2
Luxembourg	*n/a*	*n/a*	*n/a*
Malta	5.3	6.7	8.0
Netherlands	6.0	6.0	5.9
Poland	5.1	5.2	4.9
Portugal	5.8	5.6	5.3
Romania	4.2	3.5	3.1
Slovakia	4.1	4.2	4.1
Slovenia	5.7	5.7	5.7
Spain	5.0	5.0	4.8
Sweden	7.3	7.0	6.8
United Kingdom	5.6	6.2	6.0

n/a = not available

Source: Department of Education and Skills; Eurostat

- Real non-capital public expenditure per student in Ireland increased by 29% for first-level and by 22% for second-level over the period 2003-2013, when measured in constant 2013 prices (*see Table 121*). At third-level, there was a decrease in expenditure per student of 20% in real terms over the same period.

Table 121: Real current public expenditure on education, by educational level (2003-2013)

Year	€ per student at constant 2013 prices Educational level			€m (at constant 2013 prices)
	First	Second*	Third**	Real current public expenditure
2003	5,456	7,921	10,668	6,768
2004	5,865	8,011	10,458	6,977
2005	5,970	8,363	10,820	7,220
2006	6,178	8,730	11,353	7,589
2007	6,323	9,196	11,267	7,918
2008	6,439	9,319	11,133	8,160
2009	6,686	9,420	10,568	8,445
2010	6,573	9,120	10,140	8,394
2011	6,534	9,020	9,389	8,304
2012	6,348	8,842	8,627	8,102
2013	6,274	8,252	8,126	7,869

* Includes Further Education sector (i.e. post-Leaving Certificate courses).

** Based on full-time equivalents.

Source: Department of Education and Skills

AT RISK OF POVERTY

In 2013, 17.9% of children were considered to be 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).

Key findings

- In 2013, 17.9% of children were considered to be at risk of poverty (*see Table 122*).
- Children had a higher risk of being poor than the population as a whole (17.9% compared to 15.2%).

Table 122: Percentage of population at risk of poverty, by age and household composition (2009-2013)

	2009	2010	2011	2012	2013
Total (population all ages)	**14.1**	**14.7**	**16.0**	**16.5**	**15.2**
Total (population age 0-17)	**18.6**	**18.4**	**18.8**	**18.8**	**17.9**
Age					
0-5	12.3	13.3	14.0	12.4	12.9
6-11	19.5	17.1	16.0	17.2	17.2
12-17	23.2	23.8	26.8	27.4	23.9
Household composition					
Households without children	11.2	10.9	12.4	14.5	12.5
1 adult, with children under 18	35.5	24.7	28.4	29.1	31.7
2 adults, with 1-2 children under 18	9.1	13.8	13.2	13.2	10.9
2 adults, with 3+ children under 18	21.8	18.9	19.5	19.2	15.8
Other households with children	14.0	19.5	21.5	20.3	24.6

Source: European Union Survey on Income and Living Conditions (EU-SILC)

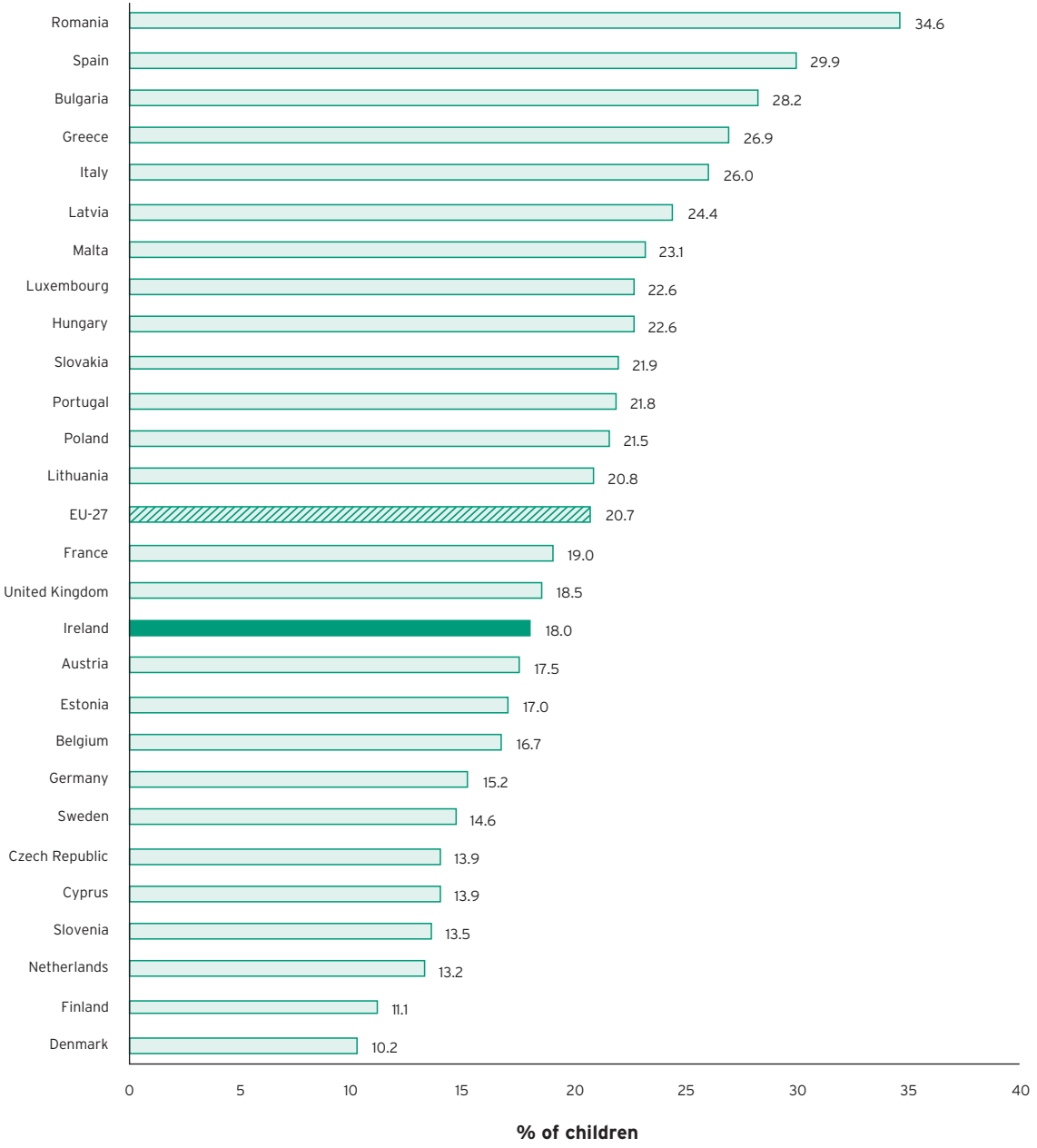
Differences by age, household composition and over time

- The highest 'at risk' of poverty rate for children occurred among those aged 12-17. This rate was 23.9% in 2013 compared with a rate of 17.2% for children aged 6-11 and a rate of 12.9% for those aged 0-5 (*see Table 122*).
- In 2013, the 'at risk' of poverty rate of persons living in households consisting of a single adult with children was 31.7%. This was substantially higher than the 'at risk' of poverty rate in households with 2 adults and 1-2 children (10.9%) and households with 2 adults and 3+ children under 18 years (15.8%).
- Over the period 2009-2013, the percentage of children considered to be 'at risk' of poverty was consistently higher than the population as a whole.

International comparisons

- In 2012, the percentage of children at risk of poverty across the EU-27 ranged from 10.2% in Denmark to 34.6% in Romania (*see Figure 29*). The percentage of children at risk of poverty in Ireland was 18.0%. This was below the EU-27 average of 20.7%.

Figure 29: Percentage of children at risk of poverty in EU-27, by country (2012)



Source: European Union Survey on Income and Living Conditions 2012 (EU-SILC); Eurostat

CONSISTENT POVERTY

In 2013, 11.7% of children experienced 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).

Key findings

- In 2013, 11.7% of children experienced consistent poverty (*see Table 123*).
- Children were more likely to experience consistent poverty than the population as a whole (11.7% compared to 8.2%).

Table 123: Percentage of population experiencing consistent poverty, by age and household composition (2009-2013)

	2009	2010	2011	2012	2013
Total (population all ages)	**5.5**	**6.3**	**6.9**	**7.7**	**8.2**
Total (population age 0-17)	**8.7**	**8.8**	**9.3**	**9.9**	**11.7**
Age					
0-5	4.4	5.8	7.6	7.2	7.4
6-11	10.6	8.4	8.5	9.4	11.1
12-17	10.6	11.6	11.8	13.3	16.6
Household composition					
Households without children	2.9	3.6	4.0	5.9	4.7
1 adult, with children under 18	16.6	13.6	16.4	17.4	23.0
2 adults, with 1-2 children under 18	4.1	4.7	6.2	5.5	5.9
2 adults, with 3+ children under 18	10.9	11.9	8.7	10.7	11.2
Other households with children	5.0	9.8	9.7	10.1	14.7

Source: European Union Survey on Income and Living Conditions (EU-SILC)

Differences by age, household composition and over time

- The highest consistent poverty rate for children occurred among those aged 12-17. This rate was 16.6% in 2013 compared with a rate of 11.1% for children aged 6-11 and a rate of 7.4% for those aged 0-5 (*see Table 123*).
- In 2013, the consistent poverty rate of persons living in a household consisting of a single adult with children was 23.0%. This was substantially higher than the consistent poverty rate in households with 2 adults and 1-2 children (5.9%) and in households with 2 adults and 3+ children under 18 years (11.2%).
- Over the period 2009-2013, the percentage of children experiencing consistent poverty was consistently higher than the population as a whole.

AVAILABILITY OF HOUSING FOR FAMILIES WITH CHILDREN

In 2011, there were 43,578 households with children identified as being in need of social housing.

Measure

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

Key findings

- In 2011, there were 43,578 households with children identified as being in need of social housing.

Differences by household structure and over time

- 57.0% (24,819) of households with children identified as being in need of social housing were households with one child; 27.1% (11,792) were households with 2 children; 10.2% (4,434) were households with 3 children; and the remaining 5.8% (2,533) of households included 4 or more children (*see Table 124*).
- The number of households with children identified as being in need of social housing has increased by 57.3% since 2008 (*see footnote in Table 124*).

Table 124: Number and percentage of households with children identified as being in need of social housing, by number of children (selected years 1999-2011)

	1999	2002	2005	2008*	2011*	
	No.	No.	No.	No.	No.	%
Total	**25,185**	**29,484**	**22,335**	**27,704**	**43,578**	**100.0**
No. of children						
1	14,734	17,523	13,703	15,369	24,819	57.0
2	6,117	7,250	5,385	7,479	11,792	27.1
3	2,402	2,685	1,991	2,924	4,434	10.2
4	1,036	1,126	772	1,210	1,677	3.8
5 or more	896	900	484	722	856	2.0

* The methodologies used to collect the 2008 and 2011 data differ, which limits any comparison between the two years. Further details can be found in the technical notes in Appendix 1.

Source: Triennial Assessment of Housing Needs

Differences by household structure and geographic location

- In 2011, 29.8% (12,998) of households with children identified as being in need of social housing were in Co. Dublin (*see Table 125*).
- 66.0% (28,768) of households with children identified as being in need of social housing were one-parent households and the remaining 34.0% (14,810) were two-parent households.

Table 125: Number and percentage of households with children identified as being in need of social housing, by household structure and county (2011)

	Single with child/children	Couple with child/children	All households with child/children	
	No.	No.	No.	%
Total	**28,768**	**14,810**	**43,578**	**100.0**
County				
Carlow	500	412	912	2.1
Cavan	195	221	416	1.0
Clare	667	496	1,163	2.7
Cork	3,531	2,505	6,036	13.9
Donegal	747	366	1,113	2.6
Dublin	9,942	3,056	12,998	29.8
Galway	1,222	766	1,988	4.6
Kerry	872	538	1,410	3.2
Kildare	1,806	1,118	2,924	6.7
Kilkenny	541	351	892	2.0
Laois	186	91	277	0.6
Leitrim	47	63	110	0.3
Limerick	1,147	520	1,667	3.8
Longford	118	97	215	0.5
Louth	1,177	690	1,867	4.3
Mayo	526	322	848	1.9
Meath	1,028	588	1,616	3.7
Monaghan	212	172	384	0.9
Offaly	266	331	597	1.4
Roscommon	120	108	228	0.5
Sligo	196	98	294	0.7
Tipperary	684	393	1,077	2.5
Waterford	705	312	1,017	2.3
Westmeath	549	417	966	2.2
Wexford	832	373	1,205	2.8
Wicklow	952	406	1,358	3.1

Source: Triennial Assessment of Housing Needs, 2011

COMMUNITY CHARACTERISTICS

9 in 10 children report feeling safe in the area where they live.

Measure

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

Key findings

- In 2010, 90.8% of children aged 10-17 reported feeling safe in the area where they live.

Differences by population groups

- When compared to 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*). These differences were statistically significant.

Table 126: Percentage of children aged 10-17 who report feeling safe in area where they live, by population groups (2010)

	%
All children	**90.8**
Traveller status	
Traveller children	77.9
All other children	91.1
Immigrant status	
Immigrant children	87.5
All other children	91.2
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	87.9
All other children	91.7

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

- Statistically significant differences were observed across gender and social class categories, with boys and children in the higher social class category more likely to report feeling safe in the area where they live (*see Table 127*).
- There were no statistically significant differences across age groups.

Table 127: Percentage of children aged 9-17 who report feeling safe in area where they live, by age, gender and social class (2002, 2006 and 2010)

	2002	2006	2010		
	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	**87.4**	**90.4**	**91.9**	**89.6**	**90.8**
Age					
9**	*n/a*	90.2	89.3	90.3	89.8
10-11	87.4	89.9	91.1	90.5	90.8
12-14	87.6	90.7	92.2	89.9	91.1
15-17	87.1	90.7	91.8	88.9	90.4
Social class					
SC 1-2	91.1	93.9	94.6	92.8	93.7
SC 3-4	87.7	90.5	91.8	89.6	90.7
SC 5-6	86.0	88.5	90.5	86.2	88.4

* Refers to children aged 10-17 only.

** Refers to data collected separately in a Middle Childhood Study. These children are not part of the core HBSC sample. Further details can be found in the technical notes in Appendix 1.

n/a = not available

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 128*). Overall, 90.8% of children report feeling safe in the area where they live. This ranged from 84.9% in Dublin to 96.5% in the West.

Table 128: Percentage of children aged 10-17 who report feeling safe in area where they live, by NUTS Region (2010)	
	%
All children	**90.8**
NUTS Region	
Border	92.3
Dublin	84.9
Midlands	92.4
Mid-East	88.7
Mid-West	90.4
South-East	93.5
South-West	93.7
West	96.5

Source: HBSC Survey, 2010

ENVIRONMENT AND PLACES

The percentage of children who report that there are good places in their area to spend their free time has increased from approximately 42% in 2006 to 51% in 2010.

Measure

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

Key findings

- In 2010, 51.2% of children aged 10-17 reported that there were good places in their area to spend their free time.

Differences by population groups

- When compared to other children, Traveller children and immigrant children were more likely to report that there are good places in their area to spend their free time (*see Table 129*). These differences were statistically significant.
- There were no significant differences between children with and children without a disability and/or chronic illness.

Table 129: Percentage of children aged 10-17 who report that there are good places in their area to spend their free time, by population groups (2010)

	%
All children	**51.2**
Traveller status	
Traveller children	66.5
All other children	50.6
Immigrant status	
Immigrant children	58.1
All other children	50.4
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	51.3
All other children	51.1

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

- Statistically significant differences were observed across age and gender, with a higher percentage of boys and of younger children reporting that there are good places in their area where they can spend their free time (*see Table 130*).
- The percentage of children in each social class category who report that there are good places in their area where they can spend their free time was broadly similar, with no statistically significant differences.
- The percentage of children who report that there are good places in their area to spend their free time has increased from 42.2% in 2006 to 51.2% in 2010.

Table 130: Percentage of children aged 9-17 who report that there are good places in their area to spend their free time, by age, gender and social class (2002, 2006 and 2010)

	2002	2006	2010		
	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	**43.9**	**42.2**	**53.4**	**48.9**	**51.2**
Age					
9**	*n/a*	77.1	69.6	72.4	71.1
10-11	59.6	55.6	67.4	62.1	64.7
12-14	47.5	45.9	57.8	54.5	56.2
15-17	32.6	33.3	42.8	36.3	39.7
Social class					
SC 1-2	43.0	38.6	52.3	47.4	49.8
SC 3-4	44.4	42.1	53.2	49.7	51.5
SC 5-6	44.1	45.2	52.8	46.4	49.6

* Refers to children aged 10-17 only.

** Refers to data collected separately in a Middle Childhood Study. These children are not part of the core HBSC sample. Further details can be found in the technical notes in Appendix 1.

n/a = not available

Source: HBSC Surveys

Differences by geographic location

- Statistically significant differences across regions were observed (*see Table 131*). Overall, 51.2% of children report that there are good places in their area where they can spend their free time. This ranged from 42.4% in the South-East to 67.3% in Dublin.

Table 131: Percentage of children aged 10-17 who report that there are good places in their area to spend their free time, by NUTS Region (2010)	
	%
All children	**51.2**
NUTS Region	
Border	48.4
Dublin	67.3
Midlands	43.9
Mid-East	50.8
Mid-West	43.6
South-East	42.4
South-West	48.2
West	45.9

Source: HBSC Survey, 2010

GARDA DIVERSION PROGRAMME REFERRALS

Over the 5-year period 2008-2012, the number of children referred to the Garda Diversion Programme has decreased by 42.8%.

Measure

The number of children aged 10-17 referred to the Garda Diversion Programme.

Key findings

- In 2012, 12,246 children aged 10-17 were referred to the Garda Diversion Programme. The number of incidents referred did not correspond to the number of children referred since some children were referred more than once. The total number of referrals received amounted to 24,069, a ratio of 2.0 referrals per child.

Differences by age, gender, offence and over time

- 74.8% of children referred were aged 15-17 years (*see Table 132*).
- The number and rate (per 1,000) of children referred was approximately three times higher among boys than girls.
- The majority of children referred were dealt with by way of a formal (23.2%) or informal (51.2%) caution, while 14.9% were considered unsuitable. A child is recorded as being unsuitable if (a) the child does not accept responsibility for his or her behaviour, (b) the child is offending persistently or (c) it would not be in the interest of society to caution the child.
- *'Public Order and other Social Code Offences'* were the single highest cause of referrals to the Garda Diversion Programme, representing 29.0% of all referrals (*see Figure 30*).
- Over the 5-year period 2008-2012, the number of children referred to the Garda Diversion Programme has decreased by 42.8%.

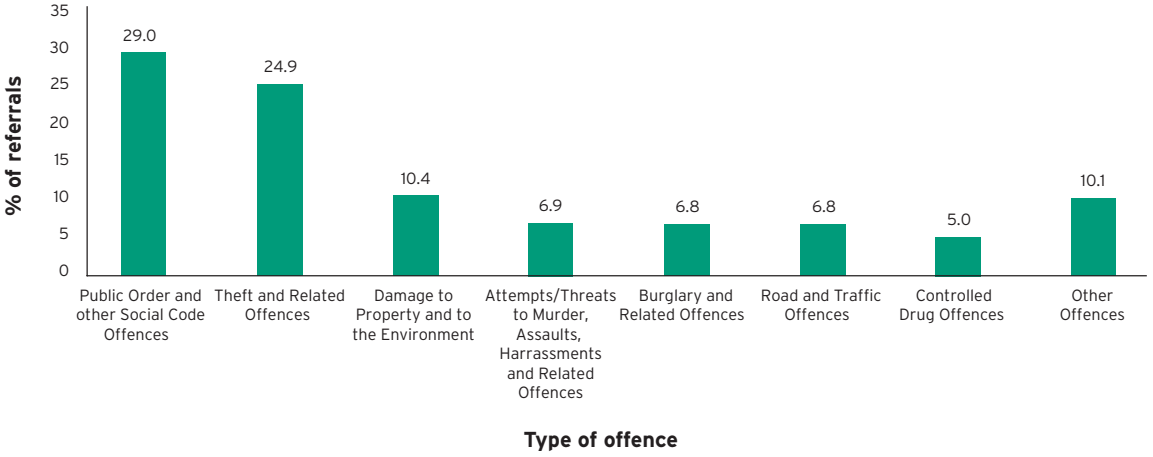
Table 132: Number, percentage and rate (per 1,000) of children aged 10-17 referred to the Garda Diversion Programme, by age, gender and outcome (2008-2012)

	2008	2009	2010	2011	2012		
	No.	No.	No.	No.	No.	%	Rate per 1,000 children aged 10-17
Total (incidents referred)	**27,422**	**23,952**	**27,257**	**27,384**	**24,069**	**100**	**50.6**
Total (children referred)	**21,412**	**18,519**	**17,986**	**12,809**	**12,246**	**100**	**25.7**
Gender							
Boys	17,195	14,950	14,034	9,627	9,194	75.1	37.7
Girls	4,217	3,569	3,952	3,182	3,052	24.9	13.1
Age							
10-14	*n/a*	*n/a*	4,376	3,146	3,085	25.2	10.1
15-17	*n/a*	*n/a*	13,610	9,663	9,161	74.8	53.7
Outcome							
Formal	3,958	3,988	3,567	2,777	2,840	23.2	6.0
Informal	11,796	10,059	9,332	6,944	6,265	51.2	13.2
No further action	1,666	1,024	856	738	648	5.3	1.4
Pending	575	482	1,165	515	671	5.5	1.4
Not suitable	3,417	2,966	3,066	1,835	1,822	14.9	3.8

n/a = not available

Source: Population and Migration Estimates, April 2014; 2012 Annual Report of the Committee appointed to monitor the effectiveness of the Diversion Programme

Figure 30: Referrals to the Garda Diversion Programme, by type of offence (2012)



Source: 2012 Annual Report of the Committee appointed to monitor the effectiveness of the Diversion Programme

Differences by geographic location

- Overall, 26.0 children per 1,000 were referred to the Garda Diversion Programme in 2012. This rate ranged across Garda Divisions, from 15.2 children per 1,000 in Meath to 65.3 children per 1,000 in Dublin North Central (*see Table 133*).
- In total, there were 51.0 referrals per 1,000 children aged 10-17. This rate also ranged across Garda Divisions, from 29.3 referrals per 1,000 children in Meath to 188.1 referrals per 1,000 children in Dublin North Central.

NOTE: Population estimates for the geographical areas are not available for intercensal years. The rates calculated below are based on the 2011 Census of Population figures.

Table 133: Number and rate (per 1,000) of children aged 10-17 referred/referrals to the Garda Diversion Programme, by Region and Division (2012)

	Total number of children referred		Total number of referrals		Average ratio referrals per child referred
	No.	Rate in 2012 per 1,000 children aged 10-17 in 2011 Census*	No.	Rate in 2012 per 1,000 children aged 10-17 in 2011 Census*	
Total	**12,246**	**26.0**	**24,069**	**51.0**	**2.0**
Eastern Region	**1,624**	**19.0**	**3,003**	**35.1**	**1.8**
Kildare	447	19.3	727	31.4	1.6
Laois/Offaly	307	17.8	525	30.4	1.7
Meath	305	15.2	586	29.3	1.9
Westmeath	225	21.8	507	49.1	2.3
Wicklow	340	22.9	658	44.3	1.9
Dublin Metropolitan Region (DMR)	**3,910**	**33.9**	**8,477**	**73.6**	**2.2**
DMR East	431	23.4	779	42.2	1.8
DMR North Central	291	65.3	838	188.1	2.9
DMR Northern	1,031	31.5	2,091	63.8	2.0
DMR South Central	217	34.0	532	83.4	2.5
DMR Southern	801	35.3	1,902	83.8	2.4
DMR West	1,157	38.0	2,335	76.8	2.0
Northern Region	**1,267**	**21.9**	**2,367**	**40.9**	**1.9**
Cavan/Monaghan	341	22.3	614	40.2	1.8
Donegal	413	22.0	678	36.1	1.6
Louth	337	24.5	749	54.4	2.2
Sligo/Leitrim	176	17.4	326	32.2	1.9

continued

Table 133 (*continued*)

	Total number of children referred		Total number of referrals		Average ratio referrals per child referred
	No.	Rate in 2012 per 1,000 children aged 10-17 in 2011 Census*	No.	Rate in 2012 per 1,000 children aged 10-17 in 2011 Census*	
South Eastern Region	**1,422**	**22.8**	**2,897**	**46.4**	**2.0**
Kilkenny/Carlow	357	22.3	720	45.0	2.0
Tipperary	320	18.2	667	38.0	2.1
Waterford	380	30.2	861	68.4	2.3
Wexford	365	22.4	649	39.8	1.8
Southern Region	**2,525**	**28.5**	**4,839**	**54.6**	**1.9**
Cork City	765	34.9	1,517	69.1	2.0
Cork North	408	25.4	661	41.2	1.6
Cork West	292	19.0	457	29.8	1.6
Kerry	397	26.7	802	54.0	2.0
Limerick	663	32.4	1,402	68.6	2.1
Western Region	**1,389**	**22.5**	**2,355**	**38.1**	**1.7**
Clare	324	26.8	607	50.2	1.9
Galway	564	22.6	910	36.5	1.6
Mayo	264	18.5	484	33.9	1.8
Roscommon/Longford	237	22.6	354	33.8	1.5
Outside jurisdiction	**109**	**–**	**131**	**–**	**1.2**

* Regional level population estimates are not available for these age groups for 2012.

Source: Census of the Population, 2011; 2012 Annual Report of the Committee appointed to monitor the effectiveness of the Diversion Programme

ANTENATAL CARE

Early antenatal care is lowest among younger pregnant women.

Measure

The percentage of pregnant women attending for antenatal care in the first trimester of pregnancy.

Key findings

- In 2013, 86.2% of pregnant women attended for antenatal care in the first trimester of pregnancy.

Differences by age, social class and over time

- Antenatal care in the first trimester of pregnancy is lowest among pregnant women aged 15-19 (73.4%) (*see Table 134*).
- Women who were primarily 'unemployed' or engaged in 'home duties' had the lowest percentages of antenatal visits in the first trimester of pregnancy (78.6% and 81.1% respectively) (*see Figure 31*).

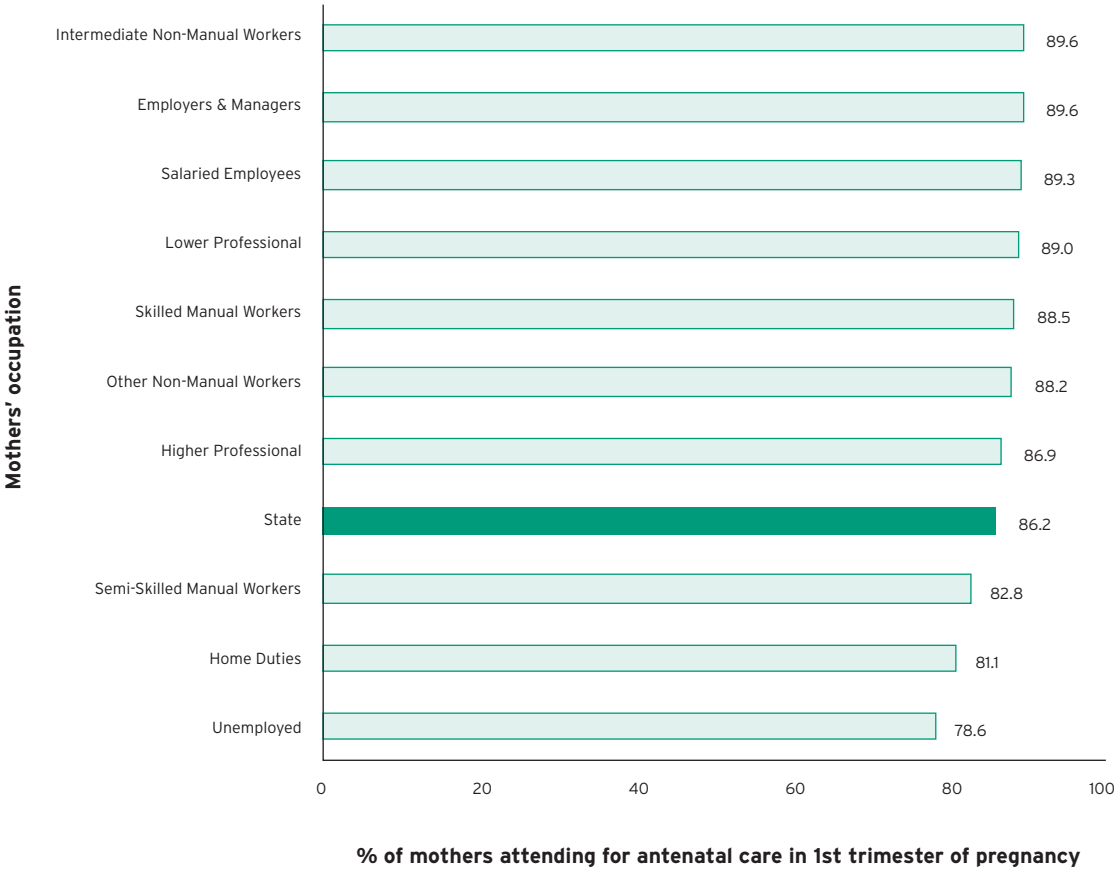
Table 134: Percentage of pregnant women attending for antenatal care in the first trimester of pregnancy, by mothers' age (2009-2013)*

	2009	2010	2011	2012	2013
Total	**70.9**	**77.6**	**82.7**	**85.5**	**86.2**
Age					
15-19	57.2	65.4	71.8	74.9	73.4
20-24	61.9	69.0	77.0	80.5	81.4
25-29	69.0	76.1	81.9	85.0	85.8
30-34	73.7	80.1	84.7	86.9	88.0
35-39	74.9	80.6	84.1	87.1	86.9
40-44	72.9	78.9	81.9	84.5	86.1
45 and over	75.9	74.3	78.9	79.3	81.7

* Categories where percentages are based on less than 100 maternities (i.e. 'under 15 years' and 'age not stated') have been omitted from this Table. Further details can be found in the technical notes in Appendix 1.

Source: National Perinatal Reporting System (NPRS); Healthcare Pricing Office, 2013

Figure 31: Percentage of pregnant women attending for antenatal care in the first trimester of pregnancy, by occupation of mother (2013)*



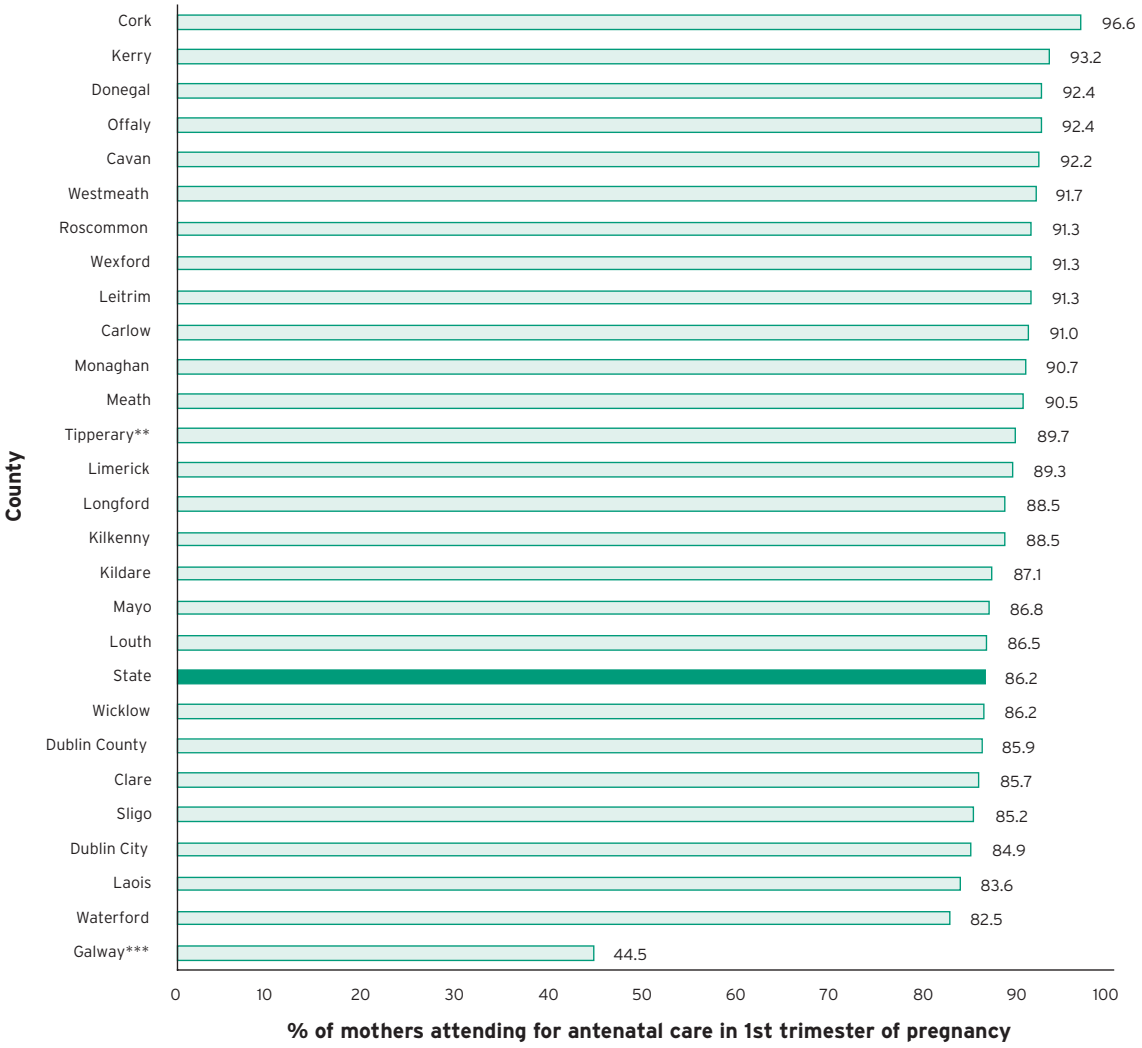
* Categories where percentages are based on less than 100 maternities (i.e. 'unskilled manual workers', 'other agricultural occupations and fishermen', 'farmers and farm managers') and 'not stated' and 'not classifiable' categories have been omitted from this Figure.

Source: National Perinatal Reporting System (NPRS); Healthcare Pricing Office, 2013

Differences by geographic location

- Overall, 86.2% of pregnant women attended for antenatal care in the first trimester of pregnancy (*see Figure 32*). This ranged from 44.5% in Co. Galway to 96.6% in Co. Cork.

Figure 32: Percentage of pregnant women attending for antenatal care in the first trimester of pregnancy, by mothers' county of residence (2013)*



* Categories where percentages are based on less than 100 births (i.e. 'other' and 'not stated') have been omitted from this Figure.

** Tipperary North and Tipperary South have been combined for Co. Tipperary.

*** Information on 'date of first visit to the doctor' is not captured at Galway University Hospital and is missing for more than 95% of births.

Source: National Perinatal Reporting System (NPRS); Healthcare Pricing Office, 2013

PUBLIC HEALTH NURSE VISIT

In 2013, 84.2% of newborn babies were visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time.

Measure

The percentage of pregnant women attending for antenatal care in the first trimester of pregnancy.

Key findings

- In 2013, 84.2% of newborn babies were visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time.

Differences over time

- The percentage of newborn babies who were visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time increased from 80.4% to 84.4% from 2009 to 2010. Since then, it has been consistently around 84% (*see Table 135*).

Table 135: Percentage of newborn babies visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time (2009-2013)

	2009	2010	2011	2012	2013
% within 48 hours	80.4	84.4	83.6	83.9	84.2

Source: Outturn of Quarterly Performance Indicator Returns (HSE)

Differences by geographic location

- The percentage of newborn babies who were visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time ranged from 67.6% in Meath to 98.4% in Roscommon (*see Table 136*).

Table 136: Percentage of newborn babies visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time, by HSE Region and Local Health Office (LHO) (2013)	
	%
Total	**84.2**
HSE Dublin North East	**74.7**
Cavan/Monaghan	78.0
Dublin North	76.4
Dublin North Central	79.9
Dublin North West	74.1
Louth	72.1
Meath	67.6
HSE Dublin Mid-Leinster	**87.3**
Dublin South	78.3
Dublin South City	94.0
Dublin South East	97.0
Dublin South West	81.3
Dublin West	72.9
Kildare/West Wicklow	93.0
Laois/Offaly	91.4
Longford/Westmeath	87.4
Wicklow	96.3
HSE South	**88.9**
Carlow/Kilkenny	89.2
Kerry	91.5
North Cork	97.8
North Lee	86.9
South Lee	85.8
Tipperary SR	94.2
Waterford	87.9
West Cork	94.8
Wexford	81.0
HSE West	**86.2**
Clare	80.1
Donegal	82.2
Galway	96.0
Limerick	75.3
Mayo	97.2
Roscommon	98.4
Sligo/Leitrim/West Cavan	82.2
Tipperary NR	74.6

Source: Outturn of Quarterly Performance Indicator Returns, 2013 (HSE)

DEVELOPMENTAL SCREENING

In 2013, 88.1% of children had the 7-9 Month Developmental Check on time.

Measure

The percentage of children reaching 10 months who have had their 7-9 Month Developmental Check on time (i.e. before reaching 10 months of age).

Key findings

- In 2013, 88.1% of children had the 7-9 Month Developmental Check on time.

Differences over time

- The percentage of children who had their 7-9 Month Developmental Check on time increased from 82.2% in 2011 to 88.1% in 2013.

Differences by geographic location

- The percentage of children who had the 7-9 Month Developmental Check on time ranged from 48.4% in Galway to 96.7% in Meath (*see Table 137*).

Table 137: Percentage of those children reaching 10 months within the reporting period who have had their Child Development Health Screening on time before reaching 10 months of age (2013)

	%
Total	**88.1**
HSE Dublin North East	**92.8**
Louth	82.3
Cavan/Monaghan	95.8
Meath	96.7
Dublin North West	95.3
Dublin North Central	86.1
Dublin North	93.0

continued

Table 137 (*continued*)	
	%
HSE Dublin Mid-Leinster	**90.2**
Dun Laoghaire	85.1
Dublin South East	89.2
Wicklow	95.1
Dublin South City	95.3
Dublin South West	79.4
Dublin West	90.9
Kildare/West Wicklow	95.9
Laois/Offaly	90.2
Longford/Westmeath	88.1
HSE South	**92.7**
North Lee	92.3
South Lee	92.5
North Cork	94.8
West Cork	95.6
Kerry	91.2
South Tipperary	96.3
Carlow/Kilkenny	92.6
Waterford	88.4
Wexford	93.5
HSE West	**75.8**
Limerick	78.1
Clare	88.7
North Tipperary/East Limerick	77.3
Galway	48.4
Mayo	85.2
Roscommon	65.0
Donegal	93.7
Sligo/Leitrim/West Cavan	95.2

Source: Outturn of Monthly Activity Data Returns, 2013 (HSE)

CHILDHOOD IMMUNISATION

In 2013, the national uptake rates of D_3, P_3, T_3, Hib_3, $Polio_3$ and $HepB_3$ for children at 24 months of age reached the target of 95%.

Measure

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

List of vaccines presented below (*see technical notes in Appendix 1 for immunisation schedule*):

D_3	3 doses of vaccine against diphtheria
P_3	3 doses of vaccine against pertussis
T_3	3 doses of vaccine against tetanus
Hib_3	3 doses of vaccine against *Haemophilus influenzae* type b
$Polio_3$	3 doses of vaccine against polio
$HepB_3$	3 doses of vaccine against hepatitis B
$MenC_2$	2 doses of vaccine against meningococcal group C
$MenC_3$	3 doses of vaccine against meningococcal group C
$MenC_b$	1 dose of vaccine against meningococcal group C on or after 12 months of age
PCV_2	2 doses of pneumococcal conjugate vaccine
PCV_3	3 doses of pneumococcal conjugate vaccine
PCV_b	1 dose of pneumococcal conjugate vaccine on or after 12 months of age
Hib_b	1 booster dose of vaccine against *Haemophilus influenzae* type b on or after 12 months of age
MMR_1	1 dose of vaccine against measles, mumps and rubella
BCG	1 dose of Bacillus Calmette-Guerin (BCG) vaccine

Key findings

- In 2013, the national uptake rates for children at **12 months** of age were 91% for D_3, P_3, T_3, Hib_3, $Polio_3$, $HepB_3$, $MenC_2$ and PCV_2 and 86% (based on available data) for BCG.
- The national uptake rates of D_3, P_3, T_3, Hib_3, $Polio_3$ and $HepB_3$ for children at **24 months** of age in 2013 reached or exceeded the target of 95%. The national uptake rates at 24 months of age were 93% for MMR_1, 91% for PCV_3, 90% for Hib_b and 87% for $MenC_3$.

Differences over time

- Over the 5-year period 2009-2013, for children at **12 months** of age the national uptake rates (based on available data) have increased from 89% to 91% for D_3, P_3, T_3, Hib_3 and $Polio_3$ (*see Table 138*).
- Over the same period, for children at **24 months** of age the national uptake rates (based on available data) increased from 94% to 96% for D_3, P_3, T_3 and $Polio_3$; from 93% to 95% for Hib_3; from 87% to 90% for Hib_b; and from 90% to 93% for MMR_1. $MenC_3$ declined from 93% in 2009 to 84% in 2011 and increased to 87% in 2013.

Table 138: Immunisation uptake rates, by age and vaccine type (2009-2013)*

	2009	2010	2011	2012	2013
At 12 months					
BCG	95	95	85	80	86
D_3	89	89	90	91	91
P_3	89	89	90	91	91
T_3	89	89	90	91	91
Hib_3	89	89	90	91	91
$Polio_3$	89	89	90	91	91
$MenC_3$	86	*n/a*	*n/a*	*n/a*	*n/a*
$HepB_3$	89	89	90	91	91
$MenC_2$	89	89	90	91	91
PCV_2	89	89	90	91	91
At 24 months					
D_3	94	94	95	95	96
P_3	94	94	95	95	96
T_3	94	94	95	95	96
Hib_3	93	94	95	95	95
Hib_b	87	85	88	89	90
$Polio_3$	94	94	95	95	96
$HepB_3$	*n/a*	94	95	95	95
$MenC_3$	93	86	84	85	87
$MenC_b$	*n/a*	*n/a*	*n/a*	90	90
PCV_3	*n/a*	*n/a*	90	91	91
PCV_b	*n/a*	*n/a*	*n/a*	93	93
MMR_1	90	90	92	92	93

n/a = not applicable (see below)

* Please see technical notes in Appendix 1 for caveats to data (as a number of figures presented here are incomplete).

Source: Immunisation Uptake Statistics

Differences by geographic location

- For children at **12 months** of age, uptake rates among Local Health Offices (LHOs) in 2013 for D_3, P_3, T_3, Hib_3, $Polio_3$, $MenC_2$ and PCV_2 ranged from 82%-97% and $HepB_3$ ranged from 82%-96% (*see Table 139*). The target uptake of 95% was reached or exceeded in Laois/Offaly, Longford/Westmeath and Roscommon for D_3, P_3, T_3, Hib_3, $Polio_3$, $HepB_3$, $MenC_2$ and PCV_2 and in Donegal for D_3, T_3, P_3, $Polio_3$ and PCV_2. The target uptake of 95% was reached or exceeded for BCG in 14 LHOs reporting data.

Table 139: Immunisation uptake rates (%) at 12 months, by HSE Region and Local Health Office (LHO) Area (2013)

	Immunisation uptake (%)						
	BCG	$D_3P_3T_3$	Hib_3	$Polio_3$	$HepB_3$	$MenC_2$	PCV_2
Total	**86**	**91**	**91**	**91**	**91**	**91**	**91**
HSE Dublin North East	**94**	**88**	**88**	**88**	**88**	**88**	**88**
Cavan/Monaghan	*n/a*	91	91	91	91	92	92
Dublin North	95	91	91	91	91	91	91
Dublin North Central	93	89	89	89	89	89	90
Dublin North West	93	82	82	82	82	82	82
Louth	*n/a*	89	89	89	89	90	90
Meath	*n/a*	89	89	89	89	89	89
HSE Dublin Mid-Leinster	**94**	**93**	**93**	**93**	**93**	**93**	**93**
Dublin South	92	92	92	92	92	91	92
Dublin South City	92	93	93	93	93	93	94
Dublin South East	93	90	90	90	90	90	90
Dublin South West	96	93	93	93	93	93	94
Dublin West	93	93	93	93	93	93	93
Kildare/West Wicklow	96	92	92	92	92	92	92
Laois/Offaly	96	95	95	95	95	95	95
Longford/Westmeath	96	96	96	96	96	96	96
Wicklow	93	91	91	91	91	90	91
HSE South	**95**	**91**	**91**	**91**	**91**	**89**	**89**
Carlow/Kilkenny	96	92	92	92	92	92	92
Kerry	93	92	92	92	92	90	89
North Cork	92	91	91	91	90	88	88
North Lee/South Lee*	94	89	89	89	89	87	87
Tipperary SR	98	93	93	93	93	93	93
Waterford	95	93	93	93	93	93	93
West Cork	92	88	88	88	88	85	85
Wexford	96	92	92	92	92	92	92

continued

Table 139 (*continued*)							
	Immunisation uptake (%)						
	BCG	$D_3P_3T_3$	Hib_3	$Polio_3$	$HepB_3$	$MenC_2$	PCV_2
HSE West	**62**	**93**	**93**	**93**	**93**	**93**	**93**
Clare	97	94	94	94	94	94	94
Donegal	95	95	94	95	94	94	95
Galway	*n/a*	93	93	93	93	93	93
Limerick	98	92	92	92	92	92	92
Mayo	*n/a*	90	90	90	90	90	91
Roscommon	*n/a*	97	97	97	96	97	97
Sligo/Leitrim/West Cavan	96	94	94	94	94	93	94
Tipperary NR	97	94	94	94	94	94	94

n/a = not available (see below)

* While North Lee and South Lee are two separate LHOs, their combined immunisation uptake data are reported here.

Source: Immunisation Uptake Statistics, 2013

- For children at **24 months** of age, uptake rates among LHOs in 2013 for D_3, P_3, T_3 and $Polio_3$ ranged from 91%-99%; Hib_3 ranged from 90%-99%; $HepB_3$ ranged from 90%-98%; MMR_1 ranged from 88%-98%; PCV_3 ranged from 86%-98%; PCV_b ranged from 86%-97% for which data were available; Hib_b ranged from 75%-98%; $MenC_3$ ranged from 76%-97% and $MenC_b$ ranged from 80%-96% for which data were available (*see Table 140*). The target uptake of 95% was exceeded in Roscommon for all vaccines for which data are available.

Table 140: Immunisation uptake rates (%) at 24 months, by HSE Region and Local Health Office (LHO) Area (2013)										
	Immunisation uptake (%)									
	$D_3P_3T_3$	Hib_3	Hib_b	$Polio_3$	$HepB_3$	$MenC_3$	$MenC_b$	PCV_3	PCV_b	MMR_1
Total	**96**	**95**	**90**	**96**	**95**	**87**	**90**	**91**	**93**	**93**
HSE Dublin North East	**94**	**94**	**87**	**94**	**94**	**85**	**88**	**89**	**91**	**91**
Cavan/Monaghan	95	95	87	95	95	85	*n/a*	91	*n/a*	92
Dublin North Central	95	95	89	95	95	85	89	89	92	91
Dublin North West	93	93	84	93	93	81	84	87	89	89
Dublin North	95	95	91	95	95	89	91	92	93	93
Louth	92	92	85	92	92	82	*n/a*	86	*n/a*	88
Meath	95	95	86	95	95	84	*n/a*	90	*n/a*	91

continued

Table 140 (*continued*)

	Immunisation uptake (%)									
	$D_3P_3T_3$	Hib_3	Hib_b	$Polio_3$	$HepB_3$	$MenC_3$	$MenC_b$	PCV_3	PCV_b	MMR_1
HSE Dublin Mid-Leinster	**96**	**96**	**92**	**96**	**96**	**88**	**91**	**92**	**94**	**94**
Dublin South	95	95	89	95	95	86	89	90	92	91
Dublin South City	97	97	91	97	97	87	90	92	94	94
Dublin South East	92	92	88	92	92	86	87	89	90	90
Dublin South West	96	96	93	96	96	88	92	91	94	95
Dublin West	96	96	90	96	96	86	89	91	94	93
Kildare/West Wicklow	96	96	92	96	96	90	92	93	95	94
Laois/Offaly	98	98	98	98	98	91	93	94	95	96
Longford/West Meath	97	97	97	97	97	91	94	94	97	97
Wicklow	94	94	85	94	94	81	85	89	91	91
HSE South	**96**	**96**	**89**	**96**	**95**	**87**	**90**	**92**	**93**	**93**
Carlow/Kilkenny	96	96	96	96	96	89	94	94	95	96
Kerry	97	97	87	97	96	89	92	92	94	94
North Cork	95	95	85	95	94	86	88	89	89	91
North Lee/South Lee*	96	95	83	96	95	83	85	90	91	91
Tipperary SR	98	98	98	98	98	92	96	95	96	95
Waterford	95	95	93	95	95	89	92	93	93	94
West Cork	91	90	75	91	90	76	80	86	86	89
Wexford	96	96	98	96	97	91	95	94	96	95
HSE West	**96**	**96**	**92**	**96**	**96**	**88**	**93**	**92**	**95**	**93**
Clare	96	96	95	96	96	92	95	94	95	95
Donegal	97	97	93	97	95	88	93	92	95	94
Galway	95	95	89	95	95	86	*n/a*	91	*n/a*	91
Limerick	95	95	91	95	95	88	90	92	93	93
Mayo	95	95	91	95	95	82	*n/a*	90	*n/a*	90
Roscommon	99	99	97	99	98	97	*n/a*	98	*n/a*	98
Tipperary NR	96	96	90	96	96	87	90	93	94	94
Sligo/Leitrim/West Cavan	97	97	95	97	97	88	95	90	95	96

* While North Lee and South Lee are two separate LHOs, their combined immunisation uptake data are reported here.

Source: Immunisation Uptake Statistics, 2013

International comparisons

- In 2013, uptake rates of the recommended doses of vaccines among children of relevant age reported in countries across the EU-27 for D_3, P_3, T_3 and $Polio_3$ ranged from 83% in Austria to 99% in Belgium, Czech Republic, France, Greece, Hungary, Luxembourg and Malta; and uptake rates for the first dose of measles-containing vaccine ranged from 76% in Austria to 99% in Czech Republic, Greece, Hungary and Malta (*see Table 141*). The equivalent uptake rates in Ireland were 96% for D_3, P_3, T_3 and $Polio_3$, and 93% for first dose of measles-containing vaccine.

Table 141: Immunisation uptake rates (%) among children of relevant age, by vaccine type and EU-27 (2013)

Country	$D_3P_3T_3$	$Polio_3$	Measles-containing vaccine (first dose)
Austria	83	83	76
Belgium	99	99	92
Bulgaria	95	95	94
Cyprus	99	99	86
Czech Republic	99	99	99
Denmark	94	94	89
Estonia	94	94	94
Finland	98	98	97
France	99	99	89
Germany	96	95	97
Greece	99	99	99
Hungary	99	99	99
Ireland	**96**	**96**	**93**
Italy	97	97	90
Latvia	95	95	96
Lithuania	93	93	93
Luxembourg	99	99	95
Malta	99	99	99
Netherlands	97	97	96
Poland	99	95	98
Portugal	98	98	98
Romania	89	88	92
Slovakia	98	98	98
Slovenia	95	95	94
Spain	96	96	95
Sweden	98	98	97
United Kingdom	96	96	95

Source: Centralised Information System for Infectious Diseases, 2013 (WHO)

ACCESSIBILITY OF BASIC HEALTH SERVICES

The number of children on an in-patient/day-case waiting list awaiting treatment increased by 17.3% between 2010 and 2014.

Measure

The number of children on hospital waiting lists.

Key findings

- In September 2014, 5,914 children were known to be on an in-patient/day-case waiting list, awaiting treatment.

Differences by waiting time and over time

- 75.9% of these children were on an in-patient/day-case (IPDC) waiting list for less than 6 months (*see Table 142*).
- The number of children on an IPDC waiting list awaiting treatment has increased by 17.3% between 2010 and 2014, and by 93.0% between 2012 and 2014.

Table 142: Number and percentage of children on in-patient/day-case waiting lists, by waiting time (2010-2014)

	2010	2011	2012	2013	2014	
	No.	No.	No.	No.	No.	%
Total	**5,041**	**4,894**	**3,065**	**5,141**	**5,914**	**100**
Waiting time (months)						
Less than 3 months	2,201	2,045	2,116	3,019	2,751	46.5
3-6 months	1,467	1,443	756	1,422	1,736	29.4
6-9 months	754	773	133	373	625	10.6
9-12 months	296	261	44	265	640	10.8
12 months or more	323	372	16	62	162	2.7

Source: Patient Treatment Register

- 66,927 children were on an out-patient (OP) waiting list in September 2014.
- 63.1% of these children were on an OP waiting list for less than 6 months (*see Table 143*).
- The number of children on an OP waiting list awaiting treatment has decreased by 10.3% between 2013 and 2014.

Table 143: Number and percentage of children on out-patient waiting lists, by waiting time (2013-2014)

	2013	2014	
	No.	No.	%
Total	**74,646**	**66,927**	**100**
Waiting time (months)			
Less than 3 months	23,042	24,789	37.0
3-6 months	16,578	17,445	26.1
6-12 months	17,475	17,281	25.8
12-24 months	12,282	7,182	10.7
24-36 months	4,221	168	0.3
36-48 months	778	60	0.1
48+ months	270	2	0.0

Source: Patient Treatment Register

CHILDREN AND YOUNG PEOPLE IN CARE

The number of children in the care of the HSE increased by approximately 20.8% between 2008 and 2013.

Measure

The number of children who are in the care of the Health Service Executive (HSE).

Key findings

- In 2013, 6,469 children were in the care of the HSE.

Differences by age, gender, type placement and over time

- The number of children in the care of the HSE increased by approximately 20.8% between 2008 and 2013 (*see Table 144*).
- Overall, 5.5 per 1,000 children were in the care of the HSE in 2013.
- The majority of children in the care of the HSE (92.9%) live in foster families.
- The number and rate (per 1,000) of boys and girls in the care of the HSE is broadly similar.

Table 144: Number, percentage and rate (per 1,000) of children in the care of the HSE, by age, gender and type of placement (2008-2013)*

	2008	2009	2010	2011	2012	2013		
	No.	No.	No.	No.	No.	No.	%	Rate per 1,000 children
Total	**5,357**	**5,674**	**5,965**	**6,160**	**6,332**	**6,469**	**100**	**5.5**
Age								
0-4	834	921	938	1,021	1,058	1,085	16.8	3.0
5-9	1,452	1,565	1,579	1,647	1,670	1,664	25.7	5.0
10-14	1,799	1,850	1,875	2,007	2,120	2,200	34.0	7.1
15-17	1,272	1,338	1,407	1,480	1,484	1,520	23.5	8.7
Not available	–	–	166	5	–	–	–	–

continued

Table 144 (*continued*)								
	2008	2009	2010	2011	2012	2013		
	No.	No.	No.	No.	No.	No.	%	Rate per 1,000 children
Gender								
Boys	2,717	2,914	3,008	3,182	3,245	3,262	50.4	5.4
Girls	2,640	2,760	2,791	2,973	3,087	3,207	49.6	5.5
Not available	–	–	166	5	–	–	–	–
Type of placement								
Foster care (general)	3,161	3,422	3,612	3,776	3,979	4,147	64.1	3.5
Foster care (relative)	1,581	1,678	1,742	1,788	1,837	1,862	28.8	1.6
Residential care	381	395	440	443	379	357	5.5	0.3
Other	234	179	171	153	137	103	1.6	0.1

* Section 6.4.1 on 'Admissions to Alternative Care' in the Review of Adequacy Report 2012 (HSE) reports that the numbers entering care have been decreasing over the period 2009-2012.

Source: Population and Migration Estimates, April 2014; Quarter 4 Addendum Return 2013 – Addendum 6 (HSE)

Differences by geographic location

- Rates ranged across Local Health Office (LHO) Areas from 2.6 per 1,000 in Meath to 14.4 per 1,000 in Dublin North Central (*see Table 145*).

Table 145: Number and rate (per 1,000) of children in the care of HSE, by HSE Region and Local Health Office (LHO) Area (2013)			
	No. of children in the care in HSE Region/LHO Area	No. of children in HSE Region/LHO Area	Rate in 2013 per 1,000 children in HSE Region/ LHO Area in 2011*
Total	**6,469**	**1,148,687**	**5.6**
HSE Dublin North East	**1,496**	**258,569**	**5.8**
Cavan/Monaghan	183	35,085	5.2
Dublin North	188	63,256	3.0
Dublin North Central	354	24,619	14.4
Dublin North West	392	48,047	8.2
Louth	237	33,034	7.2
Meath	142	54,528	2.6

continued

HSE Dublin Mid-Leinster	**1,565**	**324,955**	**4.8**
Dublin South	123	28,558	4.3
Dublin South City	185	23,409	7.9
Dublin South East	102	22,113	4.6
Dublin South West	266	38,227	7.0
Dublin West	218	39,029	5.6
Kildare/West Wicklow	212	64,573	3.3
Laois/Offaly	209	44,081	4.7
Longford/Westmeath	142	33,645	4.2
Wicklow	108	31,320	3.4
HSE South	**1,929**	**292,796**	**6.6**
Carlow/Kilkenny	209	33,790	6.2
Kerry	132	34,940	3.8
North Cork	107	22,887	4.7
North Lee	503	46,453	10.8
South Lee	245	44,904	5.5
Tipperary SR	167	24,010	7.0
Waterford	278	32,766	8.5
West Cork	67	14,204	4.7
Wexford	221	38,842	5.7
HSE West	**1,479**	**272,367**	**5.4**
Clare	169	27,027	6.3
Donegal	185	44,534	4.2
Galway	319	61,194	5.2
Limerick	305	41,041	7.4
Mayo	139	32,514	4.3
Roscommon	136	16,076	8.5
Sligo/Leitrim/West Cavan	84	23,060	3.6
Tipperary NR	142	26,921	5.3

* County-level population estimates are not available for 2013.

Source: Census of the Population, 2011; Quarter 4 Addendum Return 2013 – Addendum 6 (HSE)

MENTAL HEALTH REFERRALS

In 2013, the most common reason for children being admitted to psychiatric hospitals/units and child and adolescent units was for 'depressive disorders'.

Measure

The number of admissions of children to psychiatric hospitals/units and child and adolescent units.

Key findings

- In 2013, there were 415 admissions of children to psychiatric hospitals/units and child and adolescent units.

Differences by age, gender, diagnosis and over time

- 83.6% of children admitted to psychiatric hospitals/units and child and adolescent units were aged 15-17 years (*see Table 146*).
- 36.4% of children admitted to psychiatric hospitals/units and child and adolescent units were boys and 63.6% were girls. This equates to a rate of 25.0 per 100,000 boys and 45.7 per 100,000 girls.
- The most common reason for children being admitted to psychiatric hospitals/units and child and adolescent units was for '*depressive disorders*' (36.6%), followed by '*neuroses*' (19.8%).
- The number of admissions to psychiatric hospitals/units and child and adolescent units among children increased by 18.5% between 2009 and 2010, but has since remained stable.

Table 146: Number, percentage and rate (per 100,000) of admissions to psychiatric hospitals/units and child and adolescent units of children, by age, gender and diagnosis (2009-2013)

	2009	2010	2011	2012	2013		
	No.	No.	No.	No.	No.	%	Rate per 100,000 children
Total	**367**	**435**	**435**	**438**	**415**	**100.0**	**35.1**
Age							
0-4	0	0	0	0	0	0.0	0.0
5-9	1	0	2	1	0	0.0	0.0
10-14	44	79	74	73	68	16.4	22.0
15-17	322	356	359	364	347	83.6	199.6
Gender							
Boys	165	205	190	167	151	36.4	25.0
Girls	202	230	245	271	264	63.6	45.7
Diagnosis							
Alcoholic disorders	6	8	4	5	3	0.7	0.3
Depressive disorders	99	123	157	164	152	36.6	12.9
Drug dependence	16	23	15	12	10	2.4	0.8
Mania	19	23	28	31	19	4.6	1.6
Mental handicap	1	0	0	1	1	0.2	0.1
Neuroses	89	81	101	109	82	19.8	6.9
Organic psychoses	7	12	12	4	5	1.2	0.4
Other psychoses	19	20	24	33	32	7.7	2.7
Personality disorders	26	30	23	18	18	4.3	1.5
Schizophrenia	26	26	37	24	31	7.5	2.6
Unspecified	59	89	34	37	62	14.9	5.2

Source: Population and Migration Estimates, April 2014; National Psychiatric In-Patient Reporting System

Differences by geographic location

- Overall, 36.1 per 100,000 children were admitted to psychiatric hospitals/units and child and adolescent units in 2013 (*see Table 147*). Rates ranged across counties, with the highest rate being 74.5 per 100,000 in Co. Leitrim.

Table 147: Number and rate (per 100,000) of admissions to psychiatric hospitals/units and child and adolescent units of children, by county (2013)			
	No. of admissions to psychiatric hospitals/units and child and adolescent units among children	No. of children in State/County	Rate in 2013 per 100,000 children in State/County in 2011*
Total	**415**	**1,148,687**	**36.1**
County			
Carlow	7	14,139	49.5
Cavan	5	20,194	24.8
Clare	21	30,666	68.5
Cork	31	128,448	24.1
Donegal	12	43,732	27.4
Dublin	131	287,258	45.6
Galway	22	61,194	36.0
Kerry	17	34,940	48.7
Kildare	26	59,449	43.7
Kilkenny	2	25,015	8.0
Laois	4	22,932	17.4
Leitrim	6	8,051	74.5
Limerick	14	46,067	30.4
Longford	2	10,593	18.9
Louth	5	33,292	15.0
Mayo	16	32,514	49.2
Meath	7	53,400	13.1
Monaghan	6	16,031	37.4
Offaly	3	21,149	14.2
Roscommon	5	16,076	31.1
Sligo	1	15,541	6.4
Tipperary	28	40,760	68.7
Waterford	8	28,908	27.7
Westmeath	8	23,052	34.7
Wexford	19	38,842	48.9
Wicklow	8	36,444	22.0
Non-resident	1		

* County-level population estimates are not available for 2013.

Source: Census of the Population, 2011; National Psychiatric In-Patient Reporting System, 2013

APPENDICES

APPENDIX 1: MAIN DATA SOURCES, DEFINITIONS AND TECHNICAL NOTES

Note: The metadata on some data sources used in this report can be accessed in the DCYA's ***Inventory of Data Sources on Children's Lives*** at: **www.dcya.gov.ie/inventory-of-data-sources-on-childrens-lives/**

Census of the Population and Population Estimates: Central Statistics Office

The Census of the Population is conducted by the Central Statistics Office (CSO) on a quinquennial basis. 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 place of usual residence and present on Census night or de facto presence on Census night:

- Number of children (de facto).
- Number of children living in a lone-parent household (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 2011 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., FÁS 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, FÁS Specific Skills, Teagasc Cert. in Agriculture, CERT Craft Cert. or equivalent), Advanced Certificate/Completed Apprenticeship (FETAC Advanced Cert., NCVA Level 3, FÁS 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 Degree or National Diploma, Honours Bachelor Degree/Professional qualification or both, Postgraduate Diploma or Degree, Doctorate (PhD) or higher).

A person is classified as a **Traveller** in the 2011 Census if the answer is 'Irish Traveller' to Question 11: 'What is your ethnic or cultural background?'

A person is identified as a **foreign national** in the 2011 Census if the answer is not 'Irish' to Question 10: 'What is your nationality?'

A person is defined as having a **disability** in the 2011 Census if they answer 'Yes' to any of the options in Question 16 or Question 17.

- Question 16: *'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.
  (g) A difficulty with pain, breathing or any other chronic illness or condition.

- Question 17: *'If Yes to any of the conditions specified in Question 16, do you have any difficulty in doing any of the following?'*
  (h) Dressing, bathing or getting around inside the home.
  (i) Going outside the home alone to shop or visit a doctor's surgery.
  (j) Working at a job or business or attending school or college.
  (k) Participating in other activities, for example, leisure or using transport.

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 2012 figure was the number of males and females in each region by single year of age and nationality as established by the 2011 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. The population estimates are subject to revision once the definitive results of the next census become available.

No estimates are made of the population of children in counties or regions for intercensal years. In this publication, 'Rates per county' calculations for years subsequent to 2011 continue to use the 2011 Census of Population county figures.

Centralised Information System for Infectious Diseases: World Health Organization

The Centralised Information System for Infectious Diseases (CISID) is compiled by the 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.

Early Childhood Care and Education (ECCE) Database: Department of Children and Youth Affairs

The Early Childhood Care and Education (ECCE) Database is an administrative data source managed by the Department of Children and Youth Affairs. This was established in 2010 to administer the Free Pre-School Year Scheme. The following indicator draws on data from this source:

- Percentage of Early Childhood Care and Education (ECCE) services under contract to deliver the Free Pre-School Year Scheme that meet basic and higher capitation criteria.

The Free Pre-School Year Scheme provides every child in the eligible age cohort (i.e. participating children must normally be more than 3 years 2 months and less than 4 years 7 months in September of the relevant year) with up to 15 hours per week of free early childhood care and education provision for 38 weeks per year. Pre-school services are contracted by the State to provide the free pre-school year on the basis of meeting a number of criteria, including qualification of staff. Two capitation rates are available:

The **basic capitation rate** requires the following qualification profile:

> Pre-school Leaders must hold certification for a major award in childcare/early education at a minimum of Level 5 on the National Framework of Qualifications of Ireland (NFQ) or an equivalent nationally recognised qualification or a higher award in the childcare/early education field. A standard rate of €62.50 per week for 38 weeks is applicable.

The **higher capitation rate** is awarded based on the following criteria:

> A higher capitation fee, equivalent to €73 per week for 38 weeks, will be payable to playschool sessional service providers where all Pre-school Leaders hold a Bachelor degree in childcare/early education (minimum of Level 7 on the National Framework of Qualifications (NFQ) or equivalent) and have 3 years' experience working in the sector, and where all Pre-school Assistants hold a relevant major award in childcare/early education at Level 5 on the NFQ or its equivalent.

Education Statistics Database: Department of Education and Skills

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

- 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 and Skills. 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 2012.

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.

International data are collected through the joint UNESCO-OECD-Eurostat data collection questionnaires on educational finance. Countries provide data, coming usually from administrative sources on the basis of commonly agreed definitions.

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.

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 children living in households with an equivalised household disposable income below 60% of the median equivalised household disposable income.
- **Consistent poverty:** The percentage of children 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**' (national and EU) used in the measures shown in this report. 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 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.

In 2013, the 'at risk of poverty' threshold for an individual was €10,531.*

'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.

* Central Statistics Office (2015) *Survey on Income and Living Conditions: 2013*. Dublin: Government Publications.

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 on a quadrennial basis. 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 to have 3 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 to have 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 to have been drunk at least once in the last 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 to be physically active for at least 60 minutes per day on more than 4 days per week.*
- Percentage of children aged 10-17 who report to eat breakfast 5 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 9**. 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.

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

Social Class I:	Professional
Social Class II:	Managerial
Social Class III:	Non-manual
Social Class IV:	Skilled manual
Social Class V:	Semi-skilled
Social Class VI:	Unskilled

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 29th May 2003. The 8 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 their parents were born outside of Ireland.

Findings from the HBSC Survey 2014 will be available in 2015.

Hospital In-Patient Enquiry: Healthcare Pricing Office

The Hospital In-Patient Enquiry (HIPE) system is an administrative data source managed by the Healthcare Pricing Office, which was established on an administrative basis in January 2014 and attached to the Health Service Executive (HSE). Between 1990 and 2013, HIPE was managed by the Economic and Social Research Institute (ESRI) on behalf of the Department of Health and the HSE. HIPE provides information on each hospital discharge. 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), 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 this report 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' (Health Data Standards Committee (2006), National Health Data Dictionary, Version 13, AIHW). [Extracted from NCCH eBook, July 2008, General Standards for Diseases.]

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.

HIPE has covered close to 100% of the discharges from publicly funded acute hospitals in recent years. However please note the following: Bantry General Hospital has been included in HIPE since 2009 and had 65.3% coverage for that year*; its coverage for 2010 was estimated to be only 1.4%, in 2011 it did not submit any HIPE data, in 2012 its coverage was 97.3% but in 2013 it was 16.5%. Roscommon County Hospital did not submit any HIPE data from September 2010 to December 2010; its coverage for 2011 was 1.5%, for 2012 it was 62.7%, and 100% for 2013. Additionally, data coverage for Mid-Western Regional Hospital Ennis was 90.1% in 2013, and Cork University Hospital was 96.3%.

* Using the latest available data on coverage for Bantry, this figure is different from what was previously reported.

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 (HPSC) using data provided by the HSE Regions on a quarterly basis. There is no national database on childhood immunisations. 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 immunisation uptake data presented relate to children who reached their 1st or 2nd birthday (uptake at 12 and 24 months respectively) during the quarters/years in question and who have received the following as appropriate (i.e. depending on their age/birth cohort):

- BCG – 1 dose of BCG vaccine
- D_3 – 3 doses of vaccine against diphtheria
- $HepB_3$ – 3 doses of vaccine against hepatitis B
- Hib_3 – 3 doses of vaccine against *Haemophilus influenzae* type b
- Hib_b – 1 booster dose of vaccine against *Haemophilus influenzae* type b on or after 12 months of age
- $MenC_2$ – 2 doses of vaccine against meningococcal group C
- $MenC_3$ – 3 doses of vaccine against meningococcal group C
- $MenC_b$ – 1 dose of vaccine against meningococcal group C on or after 12 months of age
- MMR_1 – 1 dose of vaccine against measles, mumps and rubella
- P_3 – 3 doses of vaccine against pertussis
- PCV_2 – 2 doses of pneumococcal conjugate vaccine
- PCV_3 – 3 doses of pneumococcal conjugate vaccine
- PCV_b – one dose of pneumococcal conjugate vaccine on or after 12 months of age
- $Polio_3$ – 3 doses of vaccine against polio
- T_3 – 3 doses of vaccine against tetanus

Since 18th September 2006, a Hib booster (Hib_b) was recommended. This followed the national Hib campaign from November 2005 to May 2006 among children less than 4 years of age. Since 1st September 2008, the childhood immunisation schedule outlined in the table below has been implemented for children born on or after 1st July 2008. Compared to the previous schedule, the changes to the primary schedule for children born on or after 1st July 2008 include:

- Introduction of a hepatitis B vaccine (as part of a 6 in 1 vaccine) given at 2, 4 and 6 months of age.

- Introduction of pneumococcal conjugate vaccine given at 2, 6 and 12 months of age.
- Change in timing of meningococcal serogroup C conjugate vaccination, now given at 4, 6 and 13 months of age.
- Change in timing of the *Haemophilus influenzae* type b booster vaccination, now given at 13 months of age.

Change in Primary Childhood Immunisation Schedule (introduced on 1st September 2008)

Age	Children born before 1st July 2008	Children born on or after 1st 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

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

KEY:

BCG	Bacillus Calmette-Guerin vaccine	IPV	Inactivate Polio Virus vaccine
DTaP	Diptheria, Tetanus and acellular Pertussis vaccine	MMR	Measles, Mumps and Rubella vaccine
Hib	*Haemophilus influenzae* type b vaccine	MenC	Meningococcal group C vaccine
HepB	Hepatitis B vaccine	PCV	Pneumococcal conjugate vaccine

Caveats to immunisation uptake rates at 12 months, 2009-2013

BCG uptake data at 12 months has been incomplete since reporting to HPSC began in Quarter 3 2003. This has occurred due to differences in implementation of a neonatal BCG programme across the HSE areas as well as difficulties in providing these data to the HPSC where the programme was implemented. Prior to the establishment of the HSE, each former health board determined their own BCG vaccination policy and some areas (Western and parts of the Southern Health Boards) stopped routine neonatal BCG vaccination but provided BCG vaccination for adolescents or high risk groups. The neonatal programme has now been routinely implemented for all neonates in most, but not all, HSE areas. In addition, more complete data on neonatal BCG vaccination are now available. However, in the HSE NE, where a neonatal programme is implemented, data are not available for reporting. In the HSE W, the neonatal programme is not routinely or comprehensively implemented in all LHOs. Therefore, data provided for the HSE W reflect BCG vaccination for just a small proportion of all babies born in this area.

BCG uptake data were available for only 12 LHOs during Quarters 1 and 2 2009, 9 LHOs in Quarter 3 2009, 6 LHOs in Quarter 4 2009, 9 LHOs in Quarters 1 and 2 2010, 11 LHOs in Quarter 3 2010, 15 LHOs in Quarter 4 2010, Quarter 1 2011 and Quarter 2 2011, 18 LHOs in Quarters 3 and 4 2011 and 2012 and 28 LHOs in 2013. BCG data were available for the first time for Galway, Mayo and Roscommon in Quarters 3 and 4 2011; however, data were provided as a combined figure for the three LHOs. The combined uptake was 4% resulting in a low national uptake rate (85%) in 2011 compared to previous years. Combined BCG data (5%) were available for Galway, Mayo and Roscommon in 2012 (Quarters 1-4). National uptake of BCG was 80% in 2012. These 2011 and 2012 national BCG figures are not a true decline as uptake rates are based on available data and Galway, Mayo and Roscommon data were not available previously. BCG data were available for the first time for an additional 10 LHOs (combined uptake of 94%) in 2013 resulting in a national uptake rate of 86%. These 2013 national BCG figures are not a true increase as uptake rates are based on available data and data for these LHOs were not available previously.

Since 1st September 2008, the new primary childhood immunisation schedule has been implemented. The changes to the primary schedule for children born on or after 1st July 2008 include introduction of a hepatitis B vaccine (as part of a 6 in 1 vaccine) given at 2, 4 and 6 months of age; introduction of pneumococcal conjugate vaccine given at 2, 6 and 12 months of age; and a change in timing of meningococcal serogroup C conjugate vaccination, now given at 4, 6 and 13 months of age. Therefore, the 2009 $MenC_3$ data are only for those born between 1st January 2008 and 30th June 2008 (i.e. Quarters 1 and 2 2009 data only) and the $HepB_3$, $MenC_2$ and PCV_2 uptake data are only for those born between 1st July 2008 and 31st December 2008 (i.e. Quarters 3 and 4 2009 data only).

The 2009 data are incomplete since the following were unavailable: the Quarter 1 2009 D_3, T_3, P_3 and $Polio_3$ uptake data for those born on 31st March 2008 in 10 LHOs; the Quarter 3 2009 data for all vaccines for 6 LHOs, $MenC_2$ and PCV_2 for an additional 13 and 10 LHOs, respectively; and the Quarter 4 2009 data for 9 LHOs. The available 2009 national 12 month D_3, T_3, P_3, Hib_3 and $Polio_3$ cohort data may be around 88% (this figure is an estimate only) of the 2009 national birth cohort. The $MenC_3$ cohort data are complete (for Quarters 1 and 2 2009). The available national $HepB_3$, $MenC_2$ and PCV_2 data may be around 76%, 54% and 58% (these figures are estimates only), respectively, of the (combined Quarters 3 and 4) national birth cohort.

The 2010 data are incomplete since the following were unavailable: the Quarter 1 2010 data for 6 LHOs and the MenC2 data for an additional 3 LHOs; the Quarter 2 2010 data for 6 LHOs; and the Quarter 4 2010 data for 3 LHOs. The available 2010 national 12 month D_3, T_3, P_3, Hib_3, $HepB_3$, $Polio_3$ and PCV_2 cohort data may be around 87% (this figure is an estimate only) of the 2010 national birth cohort and the available $MenC_2$ cohort may be around 85% (this figure is an estimate only) of the 2010 national birth cohort.

Caveats to immunisation uptake rates at 24 months, 2009-2013

The 2009 data are incomplete since the following were unavailable: the Quarter 1 2009 D_3, T_3, P_3, $Polio_3$ and MMR_1 data for those born on 31st March 2007 for 10 LHOs; the Quarter 2 2009 Hib_b uptake data for one LHO; and all the Quarter 4 2009 data for 3 LHOs and Hib_b data for one additional LHO. The available 2009 national 24 month D_3, T_3, P_3, Hib_3, $Polio_3$, $MenC_3$ and MMR_1 birth cohort data may be around 98% of the national birth cohort and the available Hib_b data may be around 95% of the national birth cohort (these figures are estimates only).

The 2010 data for those at 24 months are incomplete since the following were unavailable: all the Quarter 1 2010 data for 6 LHOs and the Hib_b data for one additional LHO; the Quarter 2 2010 data for 2 LHOs; and the Quarter 4 2010 data for 3 LHOs. The available 2010 national 24 month cohort data may be around 89%–90% (this figure is an estimate only) of the 2010 national birth cohort. As a new childhood immunisation schedule was introduced in 2008, for those born on or after 1st July 2008, the 2010 HepB3 and PCV_3 data at 24 months are for those born between 1st July and 31st December 2008 (i.e. Quarters 3 and 4 2010 data only).

As uptake of $MenC_3$ and Hib_b were low since Quarter 3 2010 and as those over 12 months need only one dose of MenC and those aged 12-23 months need only one dose of PCV, data on $MenC_b$ (one dose of MenC on or after 12 months of age) and PCV_b (one dose of PCV on or after 12 months of age) was requested in 2012 for the first time and again in 2013. 25 LHOs were able to provide data representing approximately 80%–81% (estimate only) of the national birth cohort.

National Intellectual Disability Database: Health Research Board

The National Intellectual Disability Database (NIDD) is an administrative data source managed by the Health Research Board. The NIDD was established in 1995 to provide a comprehensive and accurate information base for decision-making in relation to the planning, funding and management of services for people with an intellectual disability.

The following indicator draws on data from this source:

- The number of children under 18 years registered as having an intellectual disability.

The nature of service provision in the intellectual disability area in Ireland ensures that an almost complete capture of data on all individuals with a moderate, severe or profound intellectual disability is possible and expected. Inclusion of individuals with a mild level of intellectual disability is sought if they are in special classes or in special schools for children with intellectual disabilities, attending an intellectual disability service in the case of adults, or if it is considered likely that they will require any of these services within the next five years. Participation in the database is voluntary.

For the reasons stated above, the NIDD may not include all people living in Ireland who have an intellectual disability.

National Perinatal Reporting System: Healthcare Pricing Office

The National Perinatal Reporting System (NPRS) was established in the 1980s and managed in the Department of Health. From 1999-2013, 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. From 1st January 2014, the system is managed by the Healthcare Pricing Office (www.hpo.ie).

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 breastfed (exclusive or combined) on discharge from hospital.
- The percentage of pregnant women attending for antenatal care in the first trimester of pregnancy.

Notes:

(A) 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 79.2% of total births were recorded as receiving combined antenatal care in 2013, the 'date of first visit to the doctor' was recorded as 'not known' for 35.2% of these births, and this rate differs across hospitals. As a result of the absence of these data, the timing of first contact with health professionals within this category may reflect the date of the first hospital visit, even though this is likely to have been later than the first doctor visit.

Information on 'date of first visit to the doctor' is not captured at Galway University Hospital and is missing for more than 95% of births.

(B) Data for 2013 are the data collected via Part 3 of the Birth Notification Form (BNF01) for the National Perinatal Reporting System for births occurring in 2013.

(C) Calculation on data on Breastfeeding has been provided for all years 2009-2013 and excludes Early Neonatal Deaths. Data on feeding in the published *Perinatal Statistics Reports* are based on Live Births excluding Early Neonatal Deaths (see www.hpo.ie for published reports).

(D) Tipperary North and Tipperary South have been combined for Co. Tipperary.

National Physical and Sensory Disability Database: Health Research Board

The National Physical and Sensory Disability Database (NPSDD) is an administrative data source managed by the Health Research Board. The NPSDD was established in 2000 to provide a comprehensive and accurate information base for decision-making in relation to the planning, funding and management of services for people with a physical and/or sensory disability. Data collection began in 2004. For an individual to be eligible to register on the NPSDD, he/she must meet all five registration criteria (*see below*). Information is collected from people with a physical and/or sensory disability who are receiving or who need a specialised health or personal social service, and/or who are receiving a specialised hospital service currently or within the next five years, and who:

1. have a persistent physical or sensory disability arising from disease, disorder or trauma;
2. in the case of dual disability, have a predominant disability that is physical, sensory or speech/language;
3. are less than 66 years of age;
4. are receiving, or require, a specialised health or personal social service, and/or are receiving a specialised hospital service, which is related to their disability;
5. have consented to being included on the database.

Therefore, the NPSDD may not include all people living in Ireland who have a physical and/or sensory disability.

The following indicator draws on data from the NPSDD:

- The number of children registered as having a physical and/or sensory disability.

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 socio-economic 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 the WHO International Classification of Diseases (ICD-10) 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 Registry of Deliberate Self-Harm: National Suicide Research Foundation

Data for the National Registry of Deliberate Self-Harm are recorded by data registration officers of the National Suicide Research Foundation who register deliberate 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 deliberate self-harm. The Registry's Annual Reports are available at www.nsrf.ie.

Some individuals make more than one deliberate self-harm presentation to hospital. But the figures presented relate to the number of individuals annually rather than presentations.

The Census 2011 population data were used in the calculation of the rate for 2011, 2012 and 2013. HSE regional level population estimates are not available for 2012 and 2013. For the years 2007-2010, the population was estimated based on the change in population between the Censuses of 2006 and 2011.

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 reaching 10 months who have had their 7-9 Month Developmental Check on time (i.e. before reaching 10 months of age).

The 2013 data relate to the actual 12-month time period of December 2012 to November 2013.

Patient Treatment Register: National Treatment Purchase Fund

The Patient Treatment Register (PTR) is an administrative data source managed by the National Treatment Purchase Fund. The register of patients on out-patient waiting lists in Ireland was first published in 2013. The register of patients on in-patient/day-case (surgical and medical) waiting lists in Ireland has been operational since September 2005 and now includes information from 42 hospitals (*see below*). Not all of the 42 hospitals on the PTR treat paediatric patients. The following indicators draw on data from the PTR:

- Number of children on in-patient/day-case waiting lists in September of each year.
- Number of children on out-patient waiting lists in September of each year.

Hospitals contributing to PTR

Bantry General Hospital; Beaumont Hospital, Dublin; Cappagh Orthopaedic Hospital; Cavan–Monaghan Hospital Group; Children's University Hospital, Temple Street, Dublin; Connolly Hospital, Blanchardstown; Cork University Hospital; Galway University Hospital; Kerry General Hospital; Letterkenny General Hospital; Lourdes Orthopaedic Hospital, Kilcreene*; Louth County Hospital; Mallow General Hospital; Mater Hospital, Dublin; Mayo General Hospital; Mercy University Hospital, Cork; Midlands Regional Hospital, Mullingar; Midlands Regional Hospital, Portlaoise; Midlands Regional Hospital, Tullamore; Mid-Western Regional Hospital, Croom; Mid-Western Regional Hospital, Doordoyle; Mid-Western Regional Hospital, Ennis; Mid-Western Regional Hospital, Nenagh; Naas General Hospital; Our Lady of Lourdes Hospital, Drogheda; Our Lady's Hospital for Sick Children, Crumlin; Our Lady's Hospital, Navan; Portiuncula Hospital, Galway; Roscommon County Hospital; Royal Victoria Eye and Ear Hospital, Dublin; Sligo General Hospital; South Infirmary – Victoria Hospital, Cork; South Tipperary General Hospital; St. Colmcille's Hospital, Loughlinstown; St. James's Hospital, Dublin; St. John's Hospital, Limerick; St. Luke's Hospital, Kilkenny; St. Michael's Hospital, Dun Laoghaire**; St. Vincent's University Hospital, Dublin; Tallaght Hospital (AMNCH), Dublin; Waterford Regional Hospital; Wexford General Hospital.

Notes:

* Kilcreene has no out-patient service.

** St. Michael's Hospital did not send in-patient information.

Primary and Post-Primary Pupil Absence Reports: National Educational Welfare Board*

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 the National Educational Welfare Board (NEWB).

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.

For the 2010/2011 school year, 98.5% of primary schools and 97.9% of post-primary schools returned Pupil Absence Reports to the NEWB.

Data in Tables 47 and 50 use student-level data. In contrast, for Tables 48, 49, 51 and 52, the school is the unit of analysis.

* **Note:** The functions of the National Educational Welfare Board transferred to Tusla, the Child and Family Agency in January 2014. Subsequent annual attendance reports under Section 21(6) of the Education (Welfare) Act 2000 will be the responsibility of the Agency.

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 on a triennial basis. 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 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.
- Percentage of children aged 15 who agree or strongly agree that reading is one of their favourite hobbies.

These data may be subject to bias in relation to self-presentation and memory. They may suffer from social desirability bias.

PISA also includes an assessment of 'literacy'. In 2012, mathematics was a major assessment domain in PISA, meaning that it was comprehensively assessed, using a large number of test items. Reading literacy and science literacy were minor assessment domains. Ireland also participated in computer-based assessments of mathematics, digital reading and problem-solving in 2012. The following indicators draw on data from this source:

- Mean score for children aged 15 based on OECD-PISA Print Reading Literacy Scale.
- Mean score for children aged 15 based on OECD-PISA Print Mathematics Literacy Scale.
- Mean score for children aged 15 based on OECD-PISA Scientific Literacy Scale.

The figures referred to as the OECD 'mean score' refer to the OECD 'country average', i.e. it is the average of the means of all the OECD countries and not of all the OECD students pooled together.

Children are identified as Traveller children if they answer 'Yes' to the question '*Are you a member of the Traveller community?*'. In 2012, 1.7% of 15-year-olds in PISA reported that they were members of the Traveller community.

Children are identified as immigrants if the answer is not 'Republic of Ireland' to the question '*In what country were you and your parents born?*' The percentage of immigrant children in PISA increased from 2.3% in 2000 to 10.2% in 2012. Some immigrant children in Ireland speak English or Irish as their first language.

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

The *Report of the Committee Appointed to Monitor the Effectiveness of the Diversion Programme* is published on an annual basis by An Garda Síochána. The following indicator draws on data from this source:

- Number of children aged 10-17 referred/referrals to Garda Diversion Programme.

Review of Adequacy Reports: Health Service Executive

The Review of Adequacy Report is based on the Child Care Interim Dataset (2008-2011), which was an administrative data source created by the Department of Health and Children in 1999 and managed by the Health Service Executive (HSE) from 2007 to 2011, and the Quarter 4 Addendum Return (2012 onwards), which replaced the Child Care Interim Dataset. The following indicator draws on data from this source:

- The number of children in the care of the HSE.

Data for the Review of Adequacy Report are also extracted from the Child Care Quarterly PI 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.

The following indicator draws on data from this source:

- The number of child welfare and protection reports to the HSE.

Some caution should be adopted when comparing across HSE Regions prior to 2012 because of differences in the way in which cases are recorded. The complete roll-out of Phase 1 of the National Child Care Information System (NCCIS) provided a consistent approach across the HSE Regions from 2012 and the Child and Family Agency is currently in the process of a phased implementation of a comprehensive ICT system to meet the operational and management information requirements for children and family services.

Triennial Assessment of Housing Needs: Department of the Environment, Community and Local Government

The Triennial Assessment of Housing Needs is conducted by the Department of the Environment, Community and Local Government on a triennial basis. The following indicator draws on data from this source:

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

Data represent net need for social housing, meaning households that have been assessed as being in need of either Local Authority or voluntary housing. The terminology used to describe a Local Authority's housing needs varies. These figures are net of duplicate applications (i.e. applicants who have applied to more than one Local Authority).

The methodology used to collect the 2011 data differs substantially from that used in previous years and therefore the 2008 and 2011 figures are not strictly comparable. In preparing the 2008 assessment, Local Authorities investigated their waiting lists prior to the 31st March deadline to confirm that those on the list were still seeking and in need of social housing. Authorities also contacted voluntary groups regarding local housing needs. The 2011 assessment was based on a data extract of those approved for social housing support on 31st March 2011. This might explain some of the increase in need witnessed between 2008 and 2011, because the figures would include households that may no longer be in housing need but have not been taken off the list.

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 10-17.
- 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. Still born babies are excluded from infant mortality figures, which refer to deaths of children aged less than one year. The mortality figures refer to crude death rates and are classified by year of occurrence up to and including 2011. Thereafter, classification is by year of registration.

Births to mothers aged 10-17 years include a small number of births to mothers aged 10-14 years. The denominator used to calculate the birth rate of mothers aged 10-17 is based on the population age group 15-17 years (rather than 10-17 years). Births relate to registered live births and exclude still born babies.

Suicides by children aged 10-17 years include a small number of suicides by children aged 10-14 years. The denominator used to calculate the suicide rate of children aged 10-17 is based on the population age group 15-17 years (rather than 10-17 years).

Data for the most recent year (in this case 2013) is 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 primary school children aged 7.0-7.9 years. The following indicator draws on data from this source:

- The percentage of children aged 7 in BMI categories: normal, overweight and obese.

Height is recorded to the last 0.1cm, weight recorded to the last 0.1kg 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: 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 29th May 2003. The 8 Regional Authorities for Ireland (NUTS 3 regions), which were established under the Local Government Act 1991, are set out below:

NUTS 2 Regions	Regional Authorities (NUTS 3 Regions)	Constituent counties (NUTS 4 Regions)	Type of area
Border, Midland and Western	**Border**	Cavan Donegal Leitrim Louth Monaghan Sligo	Administrative county Administrative county Administrative county Administrative county Administrative county Administrative county
	Midlands	Laois Longford Offaly Westmeath	Administrative county Administrative county Administrative county Administrative county
	West	Galway Galway Mayo Roscommon	County Borough Administrative county Administrative county Administrative county
Southern and Eastern	**Dublin**	Dublin Dun Laoghaire/Rathdown Fingal South Dublin	County Borough Administrative county Administrative county Administrative county
	Mid-East	Kildare Meath Wicklow	Administrative county Administrative county Administrative county
	Mid-West	Clare Limerick Limerick Tipperary North Riding	Administrative county County Borough Administrative county Administrative county
	South-East	Carlow Kilkenny Tipperary South Riding Waterford Waterford Wexford	Administrative county Administrative county Administrative county County Borough Administrative county Administrative county
	South-West	Cork Cork Kerry	County Borough Administrative county Administrative county

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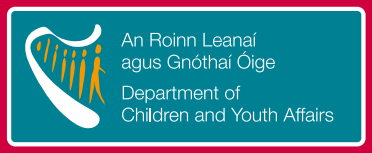

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Designed by Penhouse Design www.penhouse.ie

DUBLIN
PUBLISHED BY THE STATIONERY OFFICE
To be purchased from
GOVERNMENT PUBLICATIONS,
52 ST. STEPHEN'S GREEN, DUBLIN 2.
[Tel: 01 647 6834 or 1890 213 434; Fax: 01 647 6843]
or through any bookseller

Price: €5.00

ISBN 978-1-4064-2843-8
9 781406 428438