



STATE OF THE NATION'S CHILDREN 2025



An Roinn Leanaí, Míchumais
agus Comhionannais
Department of Children,
Disability and Equality

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Introduction

Welcome to Ireland's *State of the Nation's Children*. This web report provides up-to-date data on children in Ireland and aims to:

- Chart the well-being of children in Ireland
- Track changes over time
- Benchmark progress in Ireland relative to other countries
- Highlight issues which may be worthy of policy consideration

The majority of the data in this report was collected during Q4 2025, however some final updates were made in March 2026, prior to publication in order to include the most recently available data.

State of the Nation's Children was introduced in 2006, and was an outcome of the publication of the [*National Set of Child Well-Being Indicators*](#) a year earlier. It was subsequently published on a biennial basis, compiling data from numerous domestic and international sources in PDF and hardcopy format. All previous publications of the report are available on the [*Department website*](#).

Since 2020, the Department has transformed and modernised the delivery of the report by moving to a web version, with links provided to the underlying data tables, in the CSO's PxStat. This new format has many benefits for users, including that users always have access to the most up to date version of the data and have access to previous data and additional analysis of the data not reported on in the report. In line with the Government's Open Data Initiative the data is available in an open, machine-readable format.

State of the Nation's Children is produced by the Data and Analytics Unit of the Department of Children, Disability and Equality. The data is made available in an open data format in PxStat courtesy of the Central Statistics Office.

In addition to SONC, the Data and Analytics Unit are also responsible for updating the Children and Young People's (CYP) indicator set, a comprehensive collection of indicators relating to the lives of children and young people aged 0–24 years in Ireland. The SONC and the CYP indicators are currently under review; with a view to amalgamating these two statistical publications. This review has included extensive consultation with children and young people, and other key stakeholders, to ensure that these data and indicators reflect their priorities. Additionally, we are pursuing the development of bespoke IT solutions, to automate the process for updating these data.



The report is presented in four sections, as follows:

Part 1: Sociodemographics

This section provides information on child population, child mortality, family structure, maternal 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 the Population (Central Statistics Office).

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 Health Behaviour of School-aged Children (HBSC) surveys and also from Programme for International Student Assessment (PISA) surveys.

Part 3: Children's outcomes

This section provides information on children's health outcomes, education 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 Ability Supports System Database (formerly the National Intellectual Disability Database and 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 and community supports, as well as antenatal care, immunisation and other health supports. 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 (Central Statistics Office), Summary of Social Housing Assessments (The Housing Agency), and Programme for International Student Assessment (PISA) surveys.

STATE OF
THE NATION'S
CHILDREN



1

SOCIODEMOGRAPHICS





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Key findings

- In 2025, it is estimated that there were 1,229,603 children living in Ireland. This accounted for 22.5% of the total population (see Table 1).
- In 2023, 290 children died in Ireland. This equated to an overall mortality rate of 2.37 per 10,000 (see Table 4).
- In 2022, 15.5% of children lived in a single parent family unit (see Table 9).
- In 2022, 2.1% of children had a mother with either no formal education or primary education only, and 28.4% of children had a mother whose highest level of education was either a lower secondary or upper-secondary education (see Table 12)
- In 2022, there were 14,142 Traveller children in Ireland. This accounted for 1.2% of the total child population and 42.9% of the total Traveller population (see Table 15).
- In 2022, there were 88,630 foreign national children in Ireland. This accounted for 7.3% of the child population (see Table 17).
- In 2022, there were 131,764 children with a disability in Ireland. This accounted for 10.8% of the child population (see Table 20).
- In 2022, there were 8,165 children providing regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability in Ireland. This accounted for 0.7% of the child population (see Table 22).



Child population

Measure: The number of children

- In 2025, it is estimated that there were 1,229,603 children living in Ireland. This accounted for 22.5% of the total population.
- Of the total child population in 2025, it is estimated that 627,903 were male and 601,700 were female (see *Table 1*)

Table 1 Number of children, by age and gender (2025)

	Male	Female	Both sexes
Population under 18	627,903	601,700	1,229,603
All ages	2,703,168	2,755,439	5,458,607
Age			
Under 1 year	28,439	26,733	55,172
1 year	28,571	27,555	56,126
2 years	28,558	29,587	58,145
3 years	31,034	29,753	60,787
4 years	30,530	29,305	59,835
5 years	31,729	30,730	62,459
6 years	32,673	31,311	63,984
7 years	33,374	31,803	65,177
8 years	34,525	33,450	67,975
9 years	35,879	34,568	70,447
10 years	37,274	35,556	72,830
11 years	38,110	36,412	74,522
12 years	38,831	37,268	76,099
13 years	39,871	37,952	77,823
14 years	40,069	38,623	78,692
15 years	40,324	38,473	78,797
16 years	39,627	36,924	76,551
17 years	38,485	35,697	74,182

Source: Population and Migration Estimates (CSO)



- The percentage of the population under 18 decreased from 34.7% in 1986 to an estimated 22.5% in 2025 (see *Table 2*)
- In the 37-year period between 1986 and 2025, it is estimated that the actual number of children decreased by 0.04%, from 1,230,150 to 1,229,603.
- Between 2016 and 2025, it is estimated that the number of children increased by 3.2%, from 1,190,502 to 1,229,603.

Table 2 Number and percentage of population under 18, by gender (1986-2025)

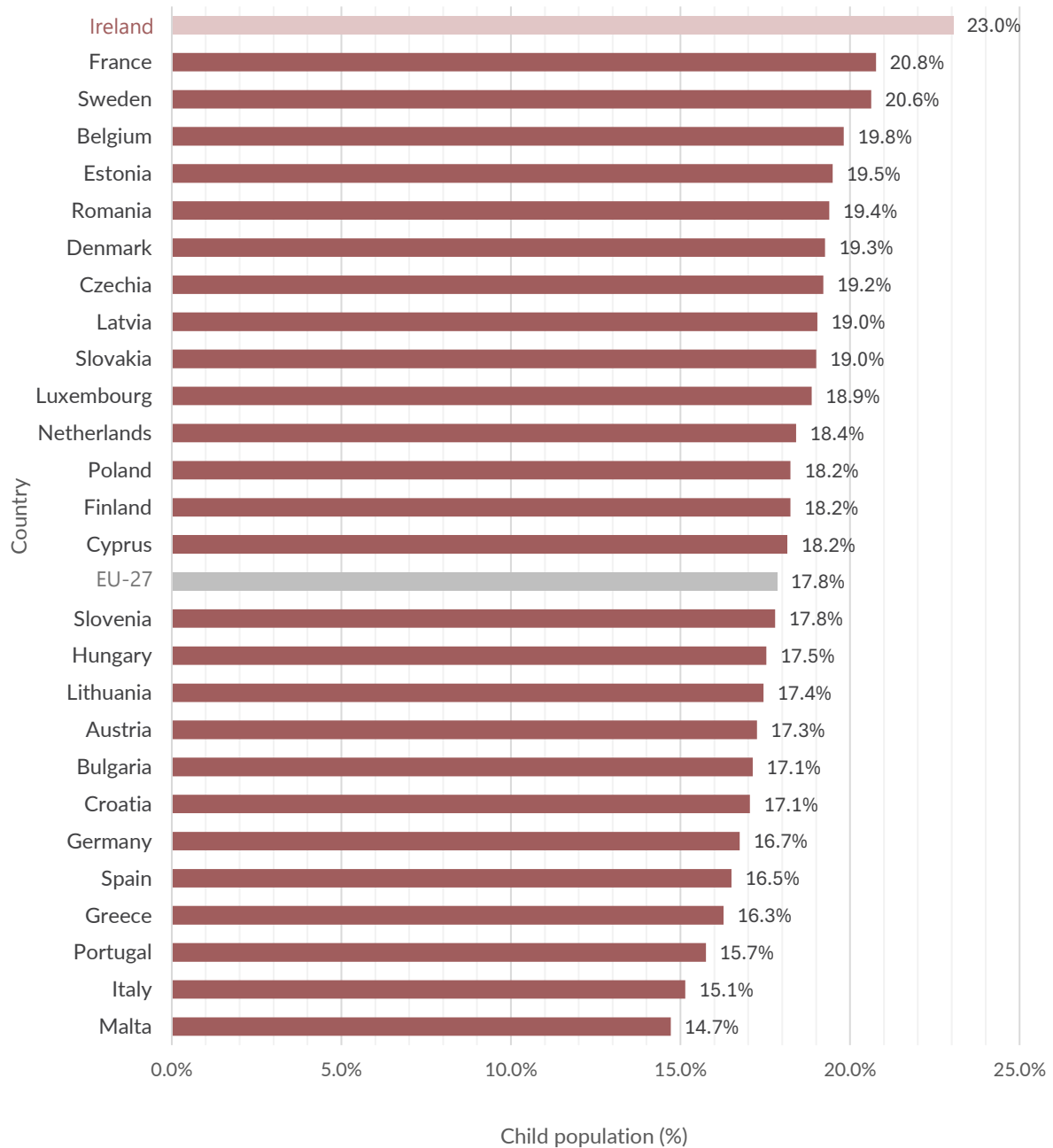
	Male	% of all males	Female	% of all females	Total	% of all ages
1986	630,985	35.7	599,165	33.8	1,230,150	34.7
1991	587,655	33.5	557,738	31.5	1,145,393	32.5
1996	550,389	30.6	521,583	28.6	1,071,972	29.6
2002	519,483	26.7	493,548	25	1,013,031	25.9
2006	531,506	25.1	505,246	23.9	1,036,752	24.5
2011	587,782	25.9	560,905	24.2	1,148,687	25
2016	608,785	25.9	581,717	24.2	1,190,502	25
2017	611,334	25.9	585,375	24.1	1,196,709	24.9
2018	616,944	25.5	589,511	23.9	1,206,455	24.7
2019	619,796	25.2	591,019	23.6	1,210,815	24.4
2020	620,962	24.9	590,874	23.2	1,211,836	24.1
2021	617,646	24.6	589,343	23	1,206,989	23.8
2022	623,567	24.5	595,000	22.8	1,218,567	23.7
2023	625,865	24	599,873	22.4	1,225,738	23.2
2024	630,743	23.7	601,971	22.1	1,232,714	22.9
2025	627,903	23.2	601,700	21.8	1,229,603	22.5

Source: Census of the Population, [Population and Migration Estimates](#)



- In 2024, Ireland had the highest estimated proportion of children in the European Union (23.0%). The EU-27 average was 17.8%.

Figure 1. Child population as a percentage of total population, by EU-27 country (2024) 



Source: Eurostat

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



Table 3. Number of children, by age, sex and EU-27 country (2024)

	Population	Under 5 years		5–9 years		10–14 years		15–17 years		% under 18
		Male	Female	Male	Female	Male	Female	Male	Female	
EU-27	449,306,184	10,187,278	9,681,857	11,465,168	10,877,689	12,059,373	11,431,055	7,453,981	7,001,927	17.8%
Country										
Austria	9,158,750	217,721	206,203	233,589	220,286	225,693	212,329	136,434	127,972	17.3%
Belgium	11,817,096	301,056	288,690	328,723	313,860	353,968	338,003	214,870	202,746	19.8%
Bulgaria	6,445,481	147,135	140,136	157,070	148,346	163,347	154,991	99,836	93,337	17.1%
Croatia	3,861,967	88,204	84,033	90,824	86,334	99,181	93,639	59,845	56,450	17.1%
Cyprus	966,365	26,093	24,949	24,561	22,754	25,233	23,866	14,559	13,417	18.2%
Czechia	10,900,555	276,560	263,212	303,080	288,796	304,832	291,278	189,185	177,134	19.2%
Denmark	5,961,249	157,540	149,098	159,866	151,243	164,296	156,225	107,837	102,410	19.3%
Estonia	1,374,687	33,712	32,313	38,941	36,755	40,162	38,445	24,457	23,094	19.5%
Finland	5,603,851	120,395	115,211	142,306	136,012	162,735	155,573	97,185	92,788	18.2%
France	68,467,362	1,762,357	1,684,279	1,996,946	1,901,896	2,183,474	2,082,546	1,344,374	1,262,363	20.8%
Germany	83,456,045	1,944,270	1,847,089	2,061,185	1,962,895	1,963,391	1,858,916	1,211,476	1,124,948	16.7%
Greece	10,400,720	203,662	192,537	231,457	217,913	264,464	249,486	173,228	159,255	16.3%
Hungary	9,584,627	236,014	222,595	242,033	229,335	233,966	221,236	151,567	144,036	17.5%
Ireland	5,351,681	149,260	144,371	173,143	165,145	195,084	185,740	113,551	106,581	23.0%
Italy	58,971,230	1,044,103	987,373	1,239,204	1,170,468	1,413,544	1,331,575	900,880	843,331	15.1%
Latvia	1,871,882	43,758	41,409	56,230	51,980	51,125	48,314	32,339	31,126	19.0%
Lithuania	2,885,891	61,177	58,267	76,659	72,447	76,897	73,436	43,188	41,439	17.4%
Luxembourg	672,050	17,265	16,658	18,443	17,485	18,385	17,511	10,780	10,306	18.9%
Malta	563,443	11,529	10,894	12,347	11,419	12,008	11,285	7,050	6,365	14.7%
Netherlands	17,942,942	442,219	421,643	460,199	438,319	488,076	463,584	303,225	286,080	18.4%
Poland	36,620,970	836,057	794,330	997,875	944,842	1,009,085	955,801	586,155	557,919	18.2%
Portugal	10,639,726	221,121	208,651	229,621	218,559	247,542	238,274	158,668	153,174	15.7%
Romania	19,067,576	473,159	446,647	536,945	508,776	548,443	519,169	340,929	322,194	19.4%
Slovakia	5,424,687	142,035	135,985	153,101	145,452	148,887	141,937	83,737	79,677	19.0%
Slovenia	2,123,949	47,833	45,120	54,530	51,229	58,844	55,289	33,337	31,622	17.8%
Spain	48,619,695	896,682	848,852	1,129,681	1,066,490	1,282,236	1,206,436	823,198	771,611	16.5%
Sweden	10,551,707	286,361	271,312	316,609	298,653	324,475	306,171	192,091	180,552	20.6%

Source: Eurostat



Child mortality

Measure: The number of deaths of children

- In 2023, 290 children died in Ireland. This equated to an overall mortality rate of 2.37 per 10,000 children, a decrease since 2022.
- 62.1% of all child deaths occurred in the period of infancy (age less than one year) (see *Table 4*).

Table 4. Number and rate (per 10,000) of deaths of children, by age (2019–2023) 

	2019		2020		2021		2022		2023	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
Total	284	2.35	278	2.29	291	2.41	313	2.57	290	2.37
Age										
Under 1 year	167	27.65	178	30.6	199	35.62	188	32.53	180	32.31
1–4 years	27	1.06	25	1	15	0.61	32	1.35	26	1.09
5–9 years	31	0.87	22	0.63	15	0.44	22	0.64	18	0.53
10–14 years	23	0.67	23	0.65	27	0.74	35	0.94	31	0.82
15–17 years	36	1.84	30	1.51	35	1.76	36	1.75	35	1.63

Source: Vital Statistics (CSO)

- The mortality rate was higher for boys (2.64 per 10,000) than for girls (2.08). The mortality rates have consistently been higher for boys than girls over the period 2019–2023 (see *Table 5*).

Table 5. Number and rate (per 10,000) of deaths of children, by gender (2019–2023) 

	2019		2020		2021		2022		2023	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
Total	284	2.35	278	2.29	291	2.41	313	2.57	290	2.37
Sex										
Male	170	2.74	154	2.48	160	2.59	177	2.84	165	2.64
Female	114	1.93	124	2.1	131	2.22	136	2.29	125	2.08

Source: Vital Statistics (CSO)

- In 2023, the largest single cause of child deaths was conditions in the perinatal period, that is, conditions which originate in the period immediately before, during and after birth, the vast majority of which relate to children aged under 1. The next largest cause was congenital malformations, that is, disorders which are present from birth.

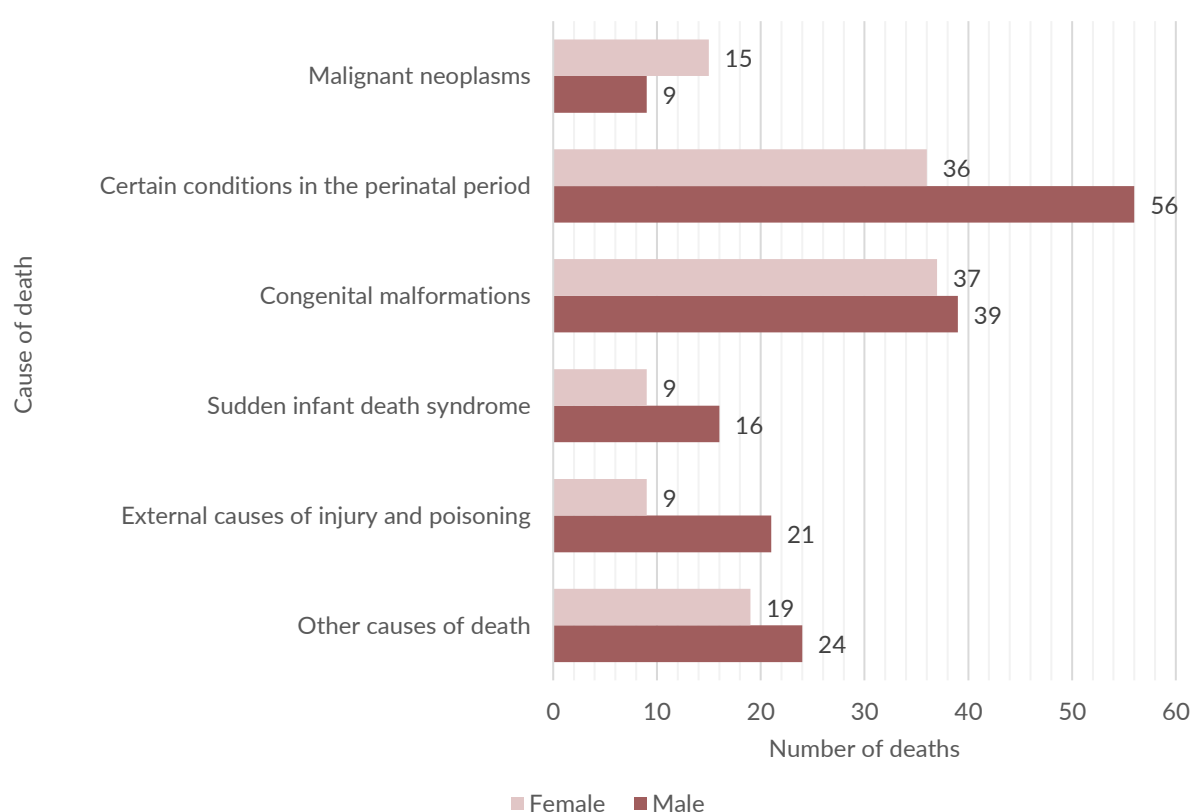


Table 6. Number of deaths of children, by cause of death and age (2023)

	< 1	1–4	5–9	10–14	15–17	< 18
Total	180	26	18	31	35	290
Main cause of death						
Malignant neoplasms	2	5	5	6	6	24
Certain conditions in the perinatal period	90	1	1	0	0	92
Congenital malformations	62	5	0	3	6	76
Sudden infant death syndrome	25	0	0	0	0	25
External causes of injury and poisoning	0	4	2	11	13	30
Other causes of death	1	11	10	11	10	43

Source: Vital Statistics (CSO)

Figure 2. Number of deaths of children, by gender and cause of death (2023)



Source: Vital Statistics (CSO)

- In 2023, the infant mortality rate across the EU-27 ranged from 1.7 per 1,000 in Estonia to 5.6 per 1,000 in Romania and Slovakia (see Table 7). The infant mortality rate in Ireland was 3.2 per 1,000. This was slightly under the EU-27 average.



Table 7. Infant mortality rate (per 1,000 live births), by EU-27 country (1993–2023)

	1993	2003	2013	2023
EU-27	9.1	5.2	3.7	3.3
Country				
Austria	6.5	4.5	3.1	2.8
Belgium	8.0	4.1	3.5	3.1
Bulgaria	15.5	12.3	7.3	4.9
Croatia	9.9	6.3	4.1	3.9
Cyprus	8.7	4.1	1.6	4.5
Czechia	8.5	3.9	2.5	2.2
Denmark	5.4	4.4	3.5	3.5
Estonia	15.6	7.0	2.1	1.7
Finland	4.4	3.1	1.8	1.8
France	-	4.2	3.6	4.0
Germany	5.8	4.2	3.3	3.2
Greece	8.5	4.0	3.7	3.4
Hungary	12.5	7.3	5.0	3.0
Ireland	6.1	5.3	3.6	3.2
Italy	7.0	3.8	2.9	2.5
Latvia	16.2	9.4	4.4	2.6
Lithuania	15.7	6.9	3.7	2.8
Luxembourg	6.0	4.9	3.9	4.3
Malta	8.2	5.7	6.7	3.6
Netherlands	6.3	4.8	3.8	3.6
Poland	16.2	7	4.6	3.9
Portugal	8.6	4.1	2.9	2.5
Romania	23.3	16.7	8.9	5.6
Slovakia	10.6	7.9	5.5	5.6
Slovenia	6.8	4	2.9	1.8
Spain	6.7	3.9	2.7	2.6
Sweden	4.8	3.1	2.7	2.1

Source: Eurostat

- In 2023, the child mortality rate in the EU-27 was higher for boys than for girls in all age groups (see *Table 8*). Child mortality rates continue to be substantially higher for children under 5 years than for any other age group.



Table 8. Rate (per 10,000) of deaths of children, by age, gender, and EU-27 country (2023)

	Total	Under 5 years		5–9 years		10–14 years		15–17 years	
		Male	Female	Male	Female	Male	Female	Male	Female
EU-27	2.7	8.0	6.7	0.9	0.8	1.1	0.9	2.5	1.4
Country									
Austria	2.6	7.1	4.6	0.7	0.7	1.2	0.8	3.6	2.5
Belgium	2.5	7.3	6.4	0.7	0.6	1.0	0.7	1.8	1.6
Bulgaria	4.7	13.1	11.4	2.1	0.6	2.5	1.8	3.6	1.7
Croatia	3.4	10.0	7.4	1.4	0.7	1.5	1.3	3.7	1.1
Cyprus	3.5	13.3	7.0	0.8	0.4	0.4	1.7	0.7	0.7
Czechia	2.0	5.0	4.3	0.6	1.0	1.1	0.7	2.4	1.3
Denmark	2.4	7.6	6.8	0.4	0.5	0.6	0.6	1.5	0.5
Estonia	2.5	5.9	2.6	2.1	1.7	0.7	1.8	2.6	3.7
Finland	2.0	4.3	4.3	1.1	0.9	0.9	0.8	3.3	1.5
France	3.1	9.7	8.7	0.8	0.7	1.0	0.8	2.5	1.2
Germany	2.8	7.6	6.4	1.0	0.8	1.0	0.9	2.5	1.3
Greece	2.5	7.9	6.6	0.7	0.4	0.8	0.4	2.9	1.3
Hungary	2.9	8.3	6.0	1.2	0.9	1.2	1.0	2.5	0.9
Ireland	2.2	7.5	5.9	0.5	0.5	0.8	0.6	1.7	1.0
Italy	2.1	6.0	5.1	0.8	0.7	0.9	0.9	2.1	1.3
Latvia	2.5	5.2	5.3	0.7	0.8	1.7	1.2	3.5	3.4
Lithuania	2.8	6.6	5.1	1.7	0.8	1.6	1.2	4.6	1.5
Luxembourg	3.0	8.7	10.1	0.0	0.6	0.6	2.3	0.0	0.0
Malta	2.8	8.6	7.3	0.0	0.9	0.8	0.0	2.9	1.6
Netherlands	2.8	8.8	6.8	0.8	0.6	0.9	0.8	2.1	1.2
Poland	3.0	8.1	6.3	0.9	1.1	1.3	1.3	3.4	2.0
Portugal	2.6	7.3	5.5	0.9	0.9	1.1	0.9	3.0	1.0
Romania	4.4	12.7	10.8	1.2	1.2	1.8	1.3	4.0	2.4
Slovakia	4.2	12.8	10.2	1.1	0.6	2.0	1.2	2.8	1.2
Slovenia	1.8	4.5	3.2	0.7	0.2	1.7	0.2	4.5	1.0
Spain	2.0	6.4	5.4	0.7	0.8	0.8	0.7	1.4	1.0
Sweden	1.9	5.1	4.1	0.6	0.5	1.0	0.8	2.3	1.4

Source: Eurostat



Family structure

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

- In 2022, 15.5% of children lived in a single parent family unit.
- 21.8% of Traveller children, 12.3% of foreign national children, and 22.7% of children with a disability lived in a single parent family unit (see *Table 9*). Also in 2022, 14.9% of Roma children lived in a single parent family.

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

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

Source: Census of the Population (CSO)

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

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

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

Source: Census of the Population (CSO)



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

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

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

Source: Census of the Population (CSO)



Maternal education level

Measure: The percentage of children whose mothers have attained primary, lower secondary, upper secondary, or third-level education¹

- In 2022, 2.1% of children had a mother with either no formal education or primary education only, and 28.4% of children had a mother whose highest level of education was either a lower secondary or upper-secondary education.
- 31.0% of Traveller children had a mother who either had no formal education or primary education only.
- 51.5% of foreign national children had a mother who had a third-level degree or higher. The national average was 54.9%.

Table 12. Percentage of children, by population group and educational attainment of mother (2022)

	Traveller children	Foreign national children	Children with a disability	All children
Highest level of education attained by mother				
Primary or no formal education	31.0	3.0	3.0	2.1
Lower secondary	21.2	3.5	8.4	5.4
Upper secondary	11.4	15.7	28.1	23.0
Third-level degree or higher	3.1	51.5	46.8	54.9
Other/not stated	33.3	26.4	13.8	14.6

Source: Census of the Population (CSO)

- The percentage of children whose mother had a third level degree ranged from 47.3% for children aged 15–17 to 61.0% for children aged 4 and under.

Table 13. Percentage of children, by age and educational attainment of mother (2022)

	0–4	5–9	10–14	15–17	All children
Highest level of education attained by mother					
Primary or no formal education	1.7	1.9	2.3	2.7	2.1
Lower secondary	3.4	4.4	6.2	8.5	5.4
Upper secondary	19.0	21.5	24.8	27.9	23.0
Third-level degree or higher	61.0	57.1	52.2	47.3	54.9
Other/not stated	14.9	15.1	14.4	13.7	14.6

Source: Census of the Population (CSO)

- The percentage of children whose mother had either no formal education or a primary education only ranged from 0.83% in Dún Laoghaire-Rathdown to 3.75% in Longford.

¹ Note this is a change to the methodology used in previous SONC publications; see appendix.



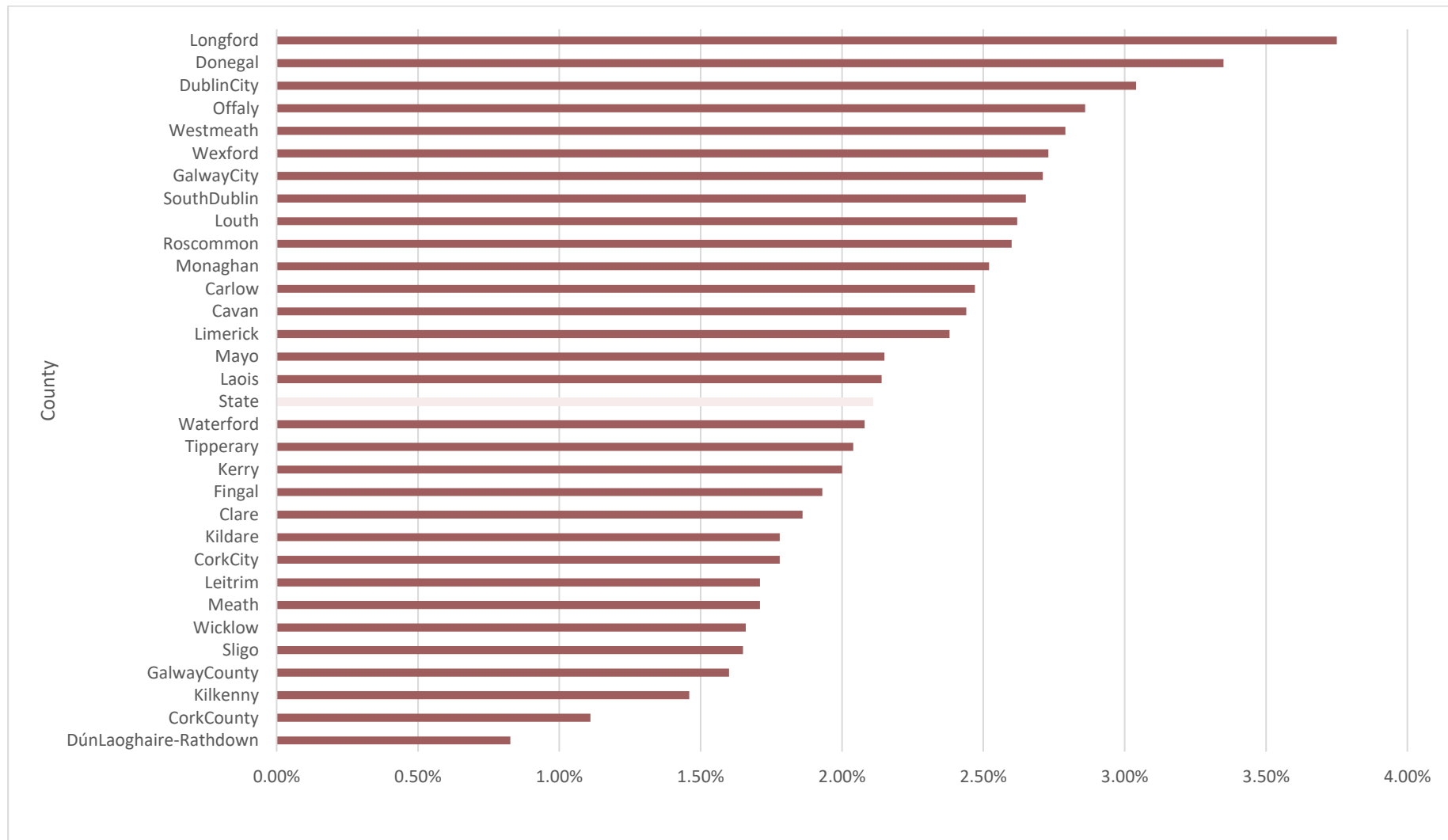
Table 14. Number of children, by county and educational attainment of mother (2022)

	Primary or no formal education	Lower secondary	Upper secondary	Third-level degree or higher	Other/not stated	Total
State	23,921	61,118	260,383	621,970	165,574	1,132,966
Administrative county						
Carlow	350	889	3,760	6,898	2,277	14,174
Cavan	490	1,223	5,137	10,374	2,874	20,098
Clare	531	1,461	6,553	16,251	3,706	28,502
Cork City	726	2,520	9,108	22,273	6,111	40,738
Cork County	979	3,680	20,876	52,126	10,349	88,010
Donegal	1,317	3,199	9,546	20,410	4,839	39,311
Dublin City	2,652	6,129	18,611	44,807	15,031	87,230
Dún Laoghaire-Rathdown	397	1,245	5,163	35,561	5,636	48,002
Fingal	1,581	3,467	17,479	44,301	15,005	81,833
Galway City	379	688	2,390	7,540	2,964	13,961
Galway County	750	1,762	9,353	29,468	5,472	46,805
Kerry	648	1,692	7,234	18,353	4,460	32,387
Kildare	1,095	2,996	13,769	34,845	8,724	61,429
Kilkenny	351	1,214	5,465	14,173	2,866	24,069
Laois	503	1,284	6,467	11,536	3,716	23,506
Leitrim	142	327	1,824	4,958	1,046	8,297
Limerick	1,027	2,557	10,172	22,847	6,520	43,123
Longford	389	789	2,510	4,685	2,009	10,382
Louth	857	2,292	8,575	15,505	5,536	32,765
Mayo	655	1,404	7,707	16,688	4,017	30,471
Meath	985	2,866	14,577	30,926	8,231	57,585
Monaghan	414	974	4,007	8,763	2,276	16,434
Offaly	557	1,280	5,194	9,576	2,845	19,452
Roscommon	422	747	3,714	9,084	2,268	16,235
Sligo	252	655	3,346	9,014	2,021	15,288
South Dublin	1,868	4,530	17,028	34,878	12,277	70,581
Tipperary	787	2,261	9,749	20,145	5,558	38,500
Waterford	577	1,487	7,146	14,397	4,150	27,757
Westmeath	618	1,190	5,239	11,603	3,522	22,172
Wexford	1,008	2,537	10,517	17,974	4,899	36,935
Wicklow	614	1,773	8,167	22,011	4,369	36,934

Source: Census of the Population (CSO)



Figure 3. Percentage of children whose mothers have no formal education or primary education only, by county (2022) 



Source: Census of the Population (CSO)



Traveller children

Measure: The number of Traveller children

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

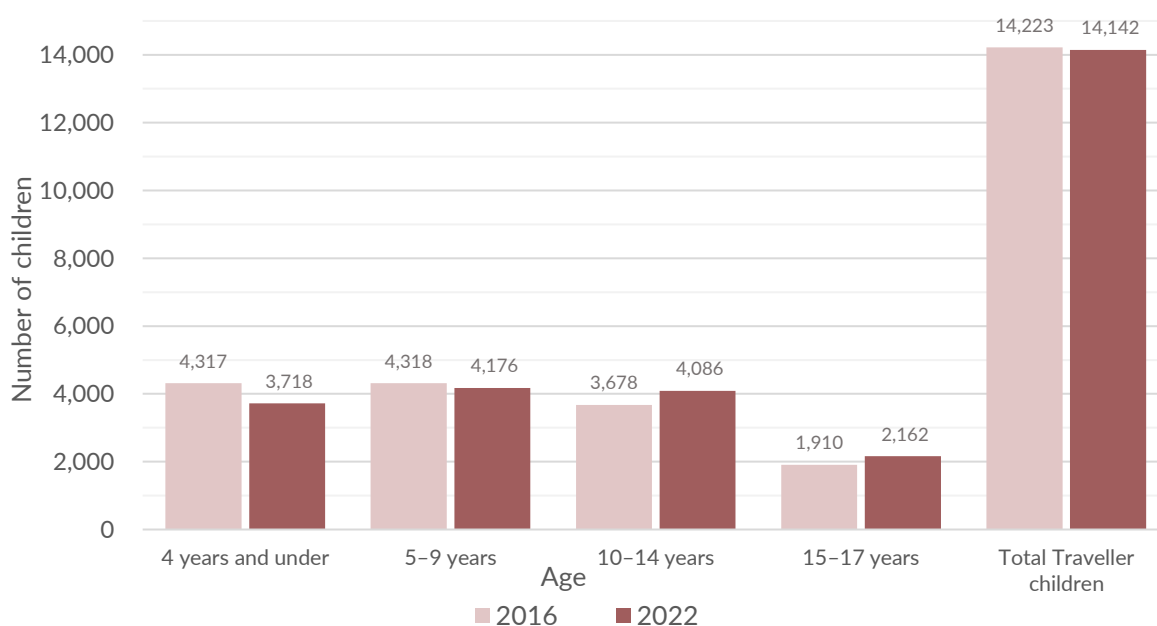
Table 15. Number of Traveller children, by age and gender (2022)

	Male	Female	Total
Total Traveller population	16,172	16,777	32,949
Total Traveller children	7,225	6,917	14,142
Age			
Under 5 years	1,897	1,821	3,718
5–9 years	2,141	2,035	4,176
10–14 years	2,087	1,999	4,086
15–17 years	1,100	1,062	2,162

Source: *Census of the Population (CSO)*

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

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



Source: *Census of the Population (CSO)*



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

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

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

Source: Census of the Population (CSO)



Foreign national children

Measure: The number of foreign national children

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

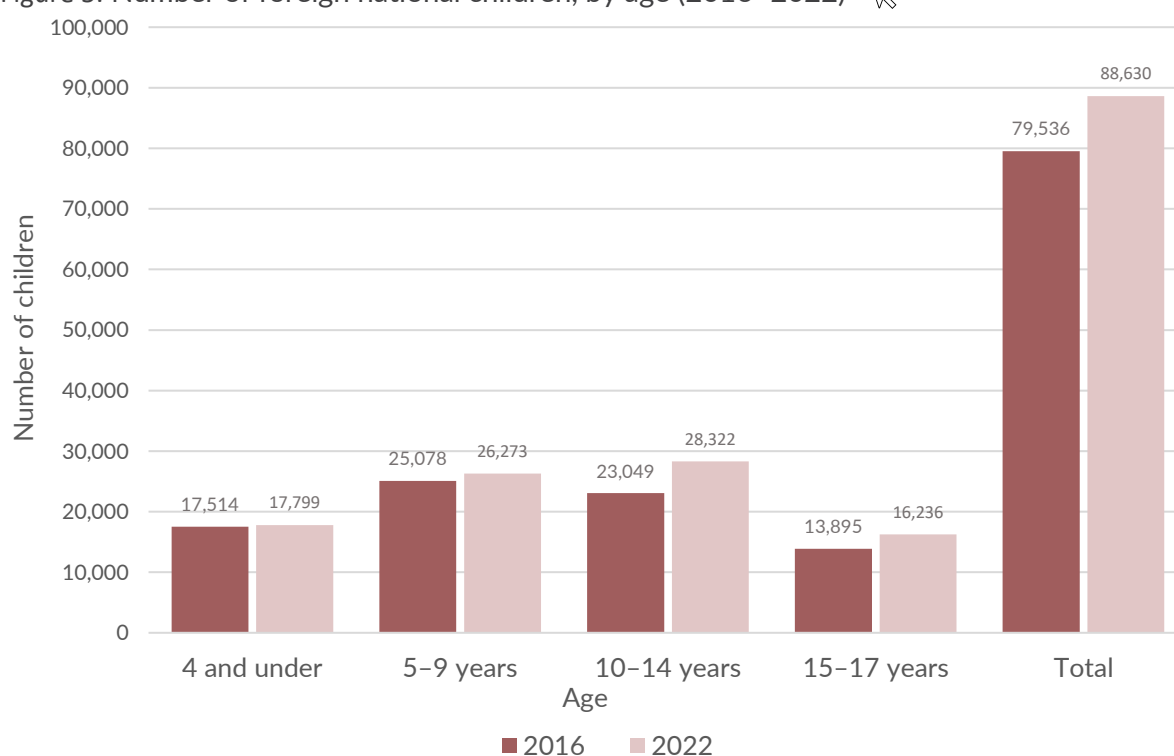
Table 17. Number of foreign national children, by age and gender (2022)

	Male	Female	Both sexes
Total	44,942	43,688	88,630
Age			
Under 5 years	8,945	8,854	17,799
5–9 years	13,361	12,912	26,273
10–14 years	14,438	13,884	28,322
15–17 years	8,198	8,038	16,236

Source: *Census of the Population (CSO)*

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

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



Source: *Census of the Population (CSO)*



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

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

Source: Census of the Population (CSO)



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

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

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

Source: *Census of the Population (CSO)*



Children with a disability

Measure: The number of children with a disability

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

Table 20. Number of children with a disability, by age and gender (2022) 

	Male	Female	Both sexes
Total	75,626	56,138	131,764
Age			
Under 5 years	7,679	4,992	12,671
5–9 years	21,917	13,158	35,075
10–14 years	29,459	21,594	51,053
15–17 years	16,571	16,394	32,965

Source: Census of the Population (CSO)

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



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

	Children with a disability	All children	Rate
State	131,764	1,218,567	108.1
Administrative county			
Carlow	1,728	14,905	115.9
Cavan	2,064	21,370	96.6
Clare	3,098	30,580	101.3
Cork City	5,338	44,484	120.0
Cork County	10,311	92,302	111.7
Donegal	4,330	41,372	104.7
Dublin City	10,717	105,093	102.0
Dún Laoghaire-Rathdown	4,691	50,583	92.7
Fingal	9,237	88,093	104.9
Galway City	1,672	15,625	107.0
Galway County	4,717	49,094	96.1
Kerry	3,649	34,994	104.3
Kildare	7,182	64,261	111.8
Kilkenny	2,485	25,603	97.1
Laois	3,015	24,616	122.5
Leitrim	832	8,679	95.9
Limerick	5,486	47,560	115.3
Longford	1,246	11,782	105.8
Louth	3,916	35,346	110.8
Mayo	3,004	31,911	94.1
Meath	6,390	60,202	106.1
Monaghan	1,464	17,178	85.2
Offaly	2,563	20,747	123.5
Roscommon	1,899	17,080	111.2
Sligo	1,778	16,176	109.9
South Dublin	8,925	76,456	116.7
Tipperary	4,681	40,482	115.6
Waterford	3,153	29,825	105.7
Westmeath	2,642	23,817	110.9
Wexford	4,749	39,414	120.5
Wicklow	4,802	38,937	123.3

Source: Census of the Population (CSO)



Children as carers

Measure: The number of children who provide regular unpaid personal help or support to a friend, family member or neighbour with a long-term illness, health issue, an issue related to old age or disability

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

Table 22. The number of children who provide regular unpaid personal help or support to a friend, family member or neighbour with a long-term illness, health issue, an issue related to old age or disability (2022)

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

Source: Census of the Population (CSO)

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



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

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

Source: Census of the Population (CSO)

STATE OF
THE NATION'S
CHILDREN



CHILDREN'S RELATIONSHIPS

2





Key findings

- In 2022, 81.9% of children aged 10–17 reported finding it easy to talk to their mother when something is really bothering them. This changed only marginally between 2018 and 2022 (see Table 24).
- In 2022, 70.2% of children aged 10–17 reported finding it easy to talk to their father when something is really bothering them. This increased slightly between 2018 and 2022 (see Table 27).
- In 2022, 71.7% of children aged 15 reported that their parents spend time just talking with them every day or almost every day (see Table 30).
- In 2022, 33.0% of children aged 15 reported that their parents discuss with them how well they are doing at school every day or almost every day (see Table 32).
- In 2022, 72.2% of children aged 15 reported that their parents eat a main meal with them every day or almost every day (see Table 34).
- In 2022, 87.1% of children aged 10–17 reported having three or more friends of the same gender. This decreased slightly between 2018 and 2022 (see Table 36).
- In 2022, 76.3% of children aged 10–17 reported having a pet of their own or a pet in the family. This increased between 2018 and 2022 (see Table 39).
- In 2022, 28.6% of children aged 10–17 reported having been bullied at school in the past couple of months. This decreased slightly between 2018 and 2022 (see Table 42).



Relationship with mothers

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

- In 2022, 81.9% of children aged 10–17 reported finding it easy to talk to their mother when something is really bothering them.
- Among individual population groups, when compared to all other children, immigrant children, and children with a disability and/or chronic illness were less likely to report finding it easy to talk to their mother when something is really bothering them across all years examined (see *Table 24*).
- In 2022, immigrant children were the population group with the lowest percentage who reported finding it easy to talk to their mother when something is really bothering them (see *Table 24*).

Table 24. Percentage of children aged 10–17 who reported finding it easy to talk to their mother when something is really bothering them, by population group (2014–2022)

	2014	2018	2022
All children	82.7	83.3	81.9
Traveller status			
Traveller children	78.8	84.6	79.6
All children except Traveller children	82.7	86.3	81.9
Immigrant status			
Immigrant children	80.3	78.3	76.6
All children except immigrant children	83.1	84.0	82.4
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	81.4	80.6	78.2
All children except those with a disability and/or chronic illness	83.0	84.1	82.9

Source: *HBSC Survey*

- A lower percentage of females than males reported finding it easy to talk to their mother when something is really bothering them (see *Table 25*).
- On average, the percentage of children who reported finding it easy to talk to their mother when something is really bothering them followed a downward trend with age up to age 16 but increased somewhat at age 17 (see *Table 25*).
- The percentage of children who reported finding it easy to talk to their mother when something is really bothering them was lowest among the low social class group and among females in this group especially (see *Table 25*).



Table 25. Percentage of children aged 10–17 who reported finding it easy to talk to their mother when something is really bothering them, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	84.3	82.4	83.3	83.8	80.0	81.9
Age						
10 years	86.4	85.9	86.1	88.5	87.9	88.2
11 years	88.3	88.8	88.5	87.1	89.4	88.3
12 years	86.9	87.9	87.4	88.1	85.5	86.8
13 years	86.9	81.2	83.8	86.8	79.3	83.2
14 years	80.5	78.9	79.7	82.3	77.2	79.7
15 years	80.6	76.1	78.1	80.6	73.0	77.1
16 years	76.3	75.9	76.1	78.9	75.6	77.2
17 years	79.7	79.5	79.6	81.7	81.9	81.8
Social class						
High	85.1	84.1	84.5	87.0	81.7	84.3
Middle	84.4	81.8	83.1	82.2	82.3	82.3
Low	84.1	80.9	82.4	84.2	71.6	77.7

Source: HBSC Survey

- The percentage of children who reported finding it easy to talk to their mother when something is really bothering them ranged from 79.7% in the Mid-East region to 84.4% in the South-East (see Table 26).

Table 26. Percentage of children aged 10–17 who reported finding it easy to talk to their mother when something is really bothering them, by NUTS region (2014–2022)

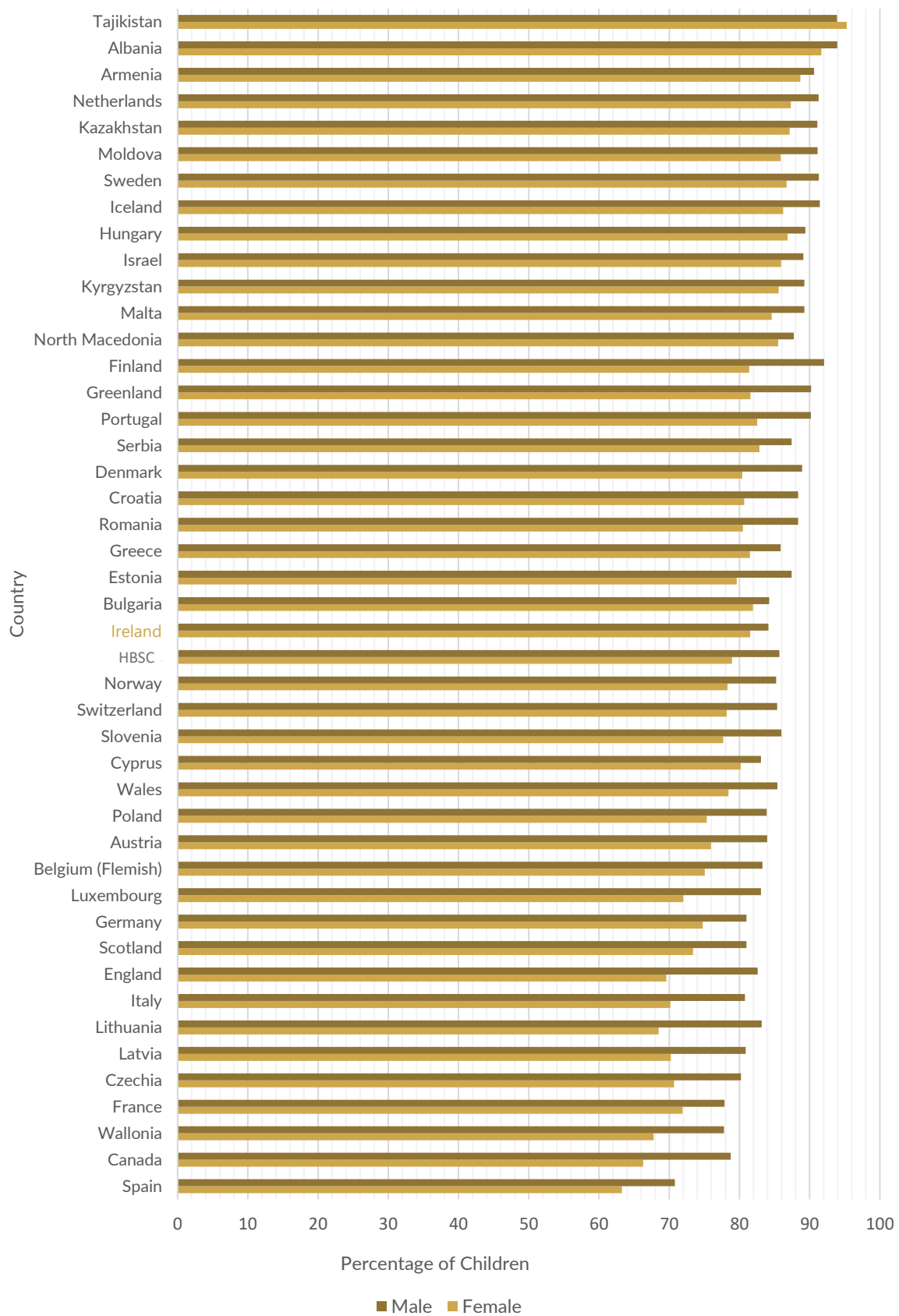
	2014	2018	2022
State	82.7	83.3	81.9
NUTS region			
Border	83.0	84.3	83.8
Midland	82.5	82.9	83.1
West	83.3	82.2	80.2
Dublin	80.7	83.5	82.6
Mid-East	83.0	84.5	79.7
Mid-West	83.8	82.1	82.3
South-East	82.3	82.4	84.4
South-West	84.8	84.4	80.8

Source: HBSC Survey

- Across 44 countries/regions in 2022, the average percentage of children who reported finding it easy to talk to their mother when something is really bothering them was 82.0% down slightly from 83.9% in 2018 (see Figure 6). This ranged from 67% in Spain to 94.6% in Tajikistan. The corresponding percentage in Ireland was 82.4% (84.1% for boys and 81.5% for girls) down slightly from 83.5% in 2018.



Figure 6. Percentage of children aged 11, 13, and 15 who reported finding it easy to talk to their mother, by country (2022)



Source: HBSC Survey



Relationship with fathers

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

- In 2022, 70.2% of children aged 10–17 reported finding it easy to talk to their father when something is really bothering them. This increased slightly between 2018 and 2022.
- Among individual population groups, when compared to all other children, immigrant children and children with a disability and/or chronic illness were less likely to report finding it easy to talk to their father when something is really bothering them across all years examined (see *Table 27*).
- Immigrant children were the population group with the lowest percentage who reported finding it easy to talk to their father when something is really bothering them (see *Table 27*).

Table 27. Percentage of children aged 10–17 who reported finding it easy to talk to their father when something is really bothering them, by population group (2014–2022)

	2014	2018	2022
All children	70.2	67.9	70.2
Traveller status			
Traveller children	70.4	68.9	67.4
All children except Traveller children	70.2	67.8	70.2
Immigrant status			
Immigrant children	67.5	60.8	60.5
All children except immigrant children	70.7	68.7	71.1
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	68.7	64.1	65.4
All children except those with a disability and/or chronic illness	70.6	68.9	71.4

Source: *HBSC Survey*

- A lower percentage of females than males reported finding it easy to talk to their father when something is really bothering them (see *Table 28*).
- On average, the percentage of children who reported finding it easy to talk to their father when something is really bothering them tends to decrease with age but again increased somewhat at age 17 in 2022 (see *Table 28*).
- The percentage of children who reported finding it easy to talk to their father when something is really bothering them was lowest among the low social class group and among females in this group especially (see *Table 28*).



Table 28. Percentage of children aged 10–17 who reported finding it easy to talk to their father when something is really bothering them, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	72.5	63.5	67.9	75.5	64.7	70.2
Age						
10 years	78.7	76.5	77.6	91.8	66.0	80.3
11 years	79.7	72.3	76.3	84.4	77.7	81.0
12 years	75.4	68.0	71.7	80.0	67.2	73.5
13 years	74.2	61.0	67.1	77.7	62.2	70.4
14 years	67.8	54.4	60.5	76.2	64.0	69.9
15 years	64.7	52.0	57.6	71.4	59.4	65.9
16 years	60.9	52.2	56.2	70.5	57.6	64.0
17 years	58.6	52.9	55.7	63.6	68.7	66.1
Social class						
High	75.1	66.9	70.7	77.2	66.3	71.7
Middle	73.2	62.9	67.9	75.1	65.5	70.4
Low	66.2	59.0	62.4	78.0	58.6	68.1

Source: HBSC Survey

- The percentage of children who reported finding it easy to talk to their father when something is really bothering them ranged from 63.7% in the Midlands to 76.1% in the South-East (see *Table 29*).

Table 29. Percentage of children aged 10–17 who reported finding it easy to talk to their father when something is really bothering them, by NUTS region (2014–2022)

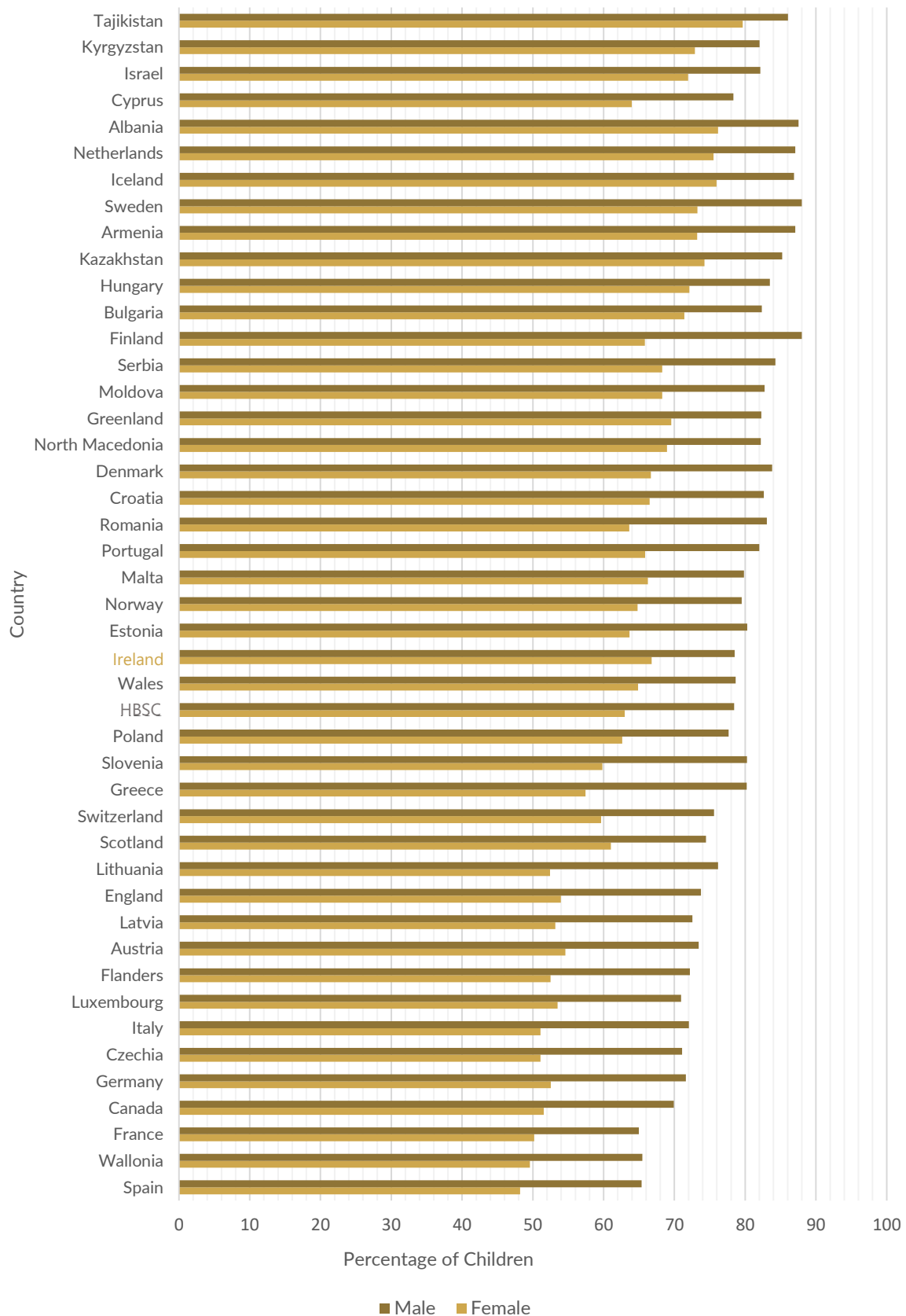
	2014	2018	2022
State	70.2	67.9	70.2
NUTS region			
Border	70.5	68.5	72.3
Midland	69.0	67.5	63.7
West	70.5	63.9	72.2
Dublin	67.9	70.7	70.5
Mid-East	71.4	70.3	69.8
Mid-West	73.7	64.0	68.7
South-East	70.1	65.3	76.1
South-West	71.0	71.0	68.7

Source: HBSC Survey

- Across 44 countries/regions in 2022, the average percentage of children who reported finding it easy to talk to their father when something is really bothering them was 70.4% (78.4% for boys and 63.0% for girls) (see *Figure 7*). This ranged from 56.5% in Spain to 82.7% in Tajikistan. The corresponding percentage in Ireland was 71.6% (78.5% for boys and 66.8% for girls). Overall, the proportion of children who find it easy to talk to their father was lower than for their mother.



Figure 7. Percentage of children aged 11, 13, and 15 who reported finding it easy to talk to their father, by country (2022)



Source: HBSC Survey



Talking to parents

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

- In 2022, 71.7% of children aged 15 reported that their parents spend time just talking with them every day or almost every day.
- 64.3% of immigrant children aged 15 reported that their parents spend time just talking with them every day or almost every day, compared to 73.4% for non-immigrant children.

Table 30. Percentage of children aged 15 who reported that their parents spend time just talking with them several times a week*, by population group (2018-2022)

	Mean 2018	Mean 2022*
All children	69.9	71.7
Immigrant status		
Immigrant children	65.9	64.3
Non-immigrant children	70.9	73.4

Source: OECD-Pisa Survey

- 75.0% of girls aged 15 reported that their parents spend time just talking with them every day or almost every day, compared with 68.5% of boys.
- 73.0% of children in the high socio-economic status category reported that their parents spend time just talking with them every day or almost every day. The corresponding figure for those belonging to the medium socio-economic status category was 71.8%, and for those in the low socio-economic status category, it was 70.4%.

Table 31. Percentage of children aged 15 who reported that their parents spend time just talking with them several times a week*, by gender and social class (2009-2022)

	2009	2012	2015	2018	2022*
All children	59.8	67.9	73.4	69.9	71.7
Gender					
Male	48.9	58.5	65.5	61.0	68.5
Female	70.8	77.4	81.6	78.5	75.0
Social class					
High	63.0	71.3	75.2	73.7	73.0
Medium	60.2	66.9	72.1	70.2	71.8
Low	57.1	65.4	72.9	65.7	70.4

Source: OECD-Pisa Survey

*In 2022 the response options for this item changed slightly. The 2022 percentage refers to children who spend time talking to their parents 'every day or almost every day', while the previous percentages refer to 'several times per week'.



Parental involvement in schooling

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

- In 2022, 33.0% of children aged 15 reported that their parents discuss with them how well they are doing at school every day or almost every day.
- 36.1% of immigrant children aged 15 reported that their parents discuss with them how well they are doing at school every day or almost every day, compared to 32.3% for non-immigrant children.

Table 32. Percentage of children aged 15 who reported that their parents discuss with them how well they are doing at school several times a week*, by population group (2018-2022)

	Mean 2018	Mean 2022*
All children	51.9	33.0
Immigrant status		
Immigrant children	57.4	36.1
Non-immigrant children	51.1	32.3

Source: [OECD-Pisa Survey](#)

- 36.5% of girls aged 15 reported that their parents discuss with them how well they are doing at school every day or almost every day, compared with 29.5% of boys.
- 30.7% of children in the medium socio-economic status category reported that their parents discuss with them how well they are doing at school every day or almost every day. This was lower than the percentage reported in both the high and low socio-economic status groups.

Table 33. Percentage of children aged 15 who reported that their parents discuss with them how well they are doing at school several times a week*, by gender and social class (2009-2022)

	2009	2012	2015	2018	2022*
All children	42.8	49.4	56.1	51.9	33.0
Gender					
Male	39.4	45.2	51.3	44.7	29.5
Female	46.3	53.6	61.1	58.9	36.5
Social class					
High	46.6	55.2	58.7	55.1	34.6
Medium	43.6	48.3	57.2	52.5	30.7
Low	37.9	44.6	52.6	47.8	33.7

Source: [OECD-Pisa Survey](#)

*In 2022 the response options for this item changed slightly. The 2022 percentage refers to children whose parents discuss how well they are doing at school 'every day or almost every day', while the previous percentages refer to 'several times per week'.



Eating a main meal together

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

- In 2022, 72.2% of children aged 15 reported that their parents eat a main meal with them every day or almost every day.
- 67.2% of immigrant children aged 15 reported that their parents eat a main meal with them every day or almost every day, compared to 73.2% for non-immigrant children.

Table 34. Percentage of children aged 15 who reported that their parents eat a main meal with them several times a week*, by population group (2018-2022)

	Mean 2018	Mean 2022*
All children	69.1	72.2
Immigrant status		
Immigrant children	62.3	67.2
Non-immigrant children	70.9	73.2

Source: [OECD-Pisa Survey](#)

- 71.9% of girls aged 15 reported that their parents eat a main meal with them every day or almost every day, compared with 72.4% of boys. This is the first time in the series that girls reported a lower percentage than boys.
- 80.6% of children in the high socio-economic status category reported that their parents eat a main meal with them every day or almost every day. The corresponding figure for those belonging to the medium socio-economic status category was 68.3%, and for those in the low socio-economic status category, it was 67.7%.

Table 35. Percentage of children aged 15 who reported that their parents eat a main meal with them several times a week, by gender and social class (2009-2022)

	2009	2012	2015	2018	2022*
All children	72.4	73.2	76.0	69.1	72.2
Gender					
Male	70.1	71.8	74.8	65.4	72.4
Female	74.6	74.6	77.2	72.7	71.9
Social class					
High	77.1	79.2	81.0	76.6	80.6
Medium	73.6	72.9	75.9	68.9	68.3
Low	66.9	67.5	71.3	61.4	67.7

Source: [OECD-Pisa Survey](#)

*In 2022 the response options for this item changed slightly. The 2022 percentage refers to children whose parents eat a main meal with them 'every day or almost every day', while the previous percentages refer to 'several times per week'.



Friendships

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

- In 2022, 87.1% of children aged 10–17 reported having three or more friends of the same gender. This decreased slightly between 2018 and 2022.
- Among individual population groups, when compared to all other children, Traveller children, immigrant children, and children with a disability and/or chronic illness were less likely to report having three or more friends of the same gender (see *Table 36*).
- Immigrant children were the population group with the lowest percentage who reported having three or more friends of the same gender (see *Table 36*).

Table 36. Percentage of children aged 10–17 who reported having three or more friends of the same gender, by population group (2014–2022)

	2014	2018	2022
All children	88.0	89.3	87.1
Traveller status			
Traveller children	87.7	86.1	83.2
All children except Traveller children	88.0	89.4	87.1
Immigrant status			
Immigrant children	85.0	84.5	83.0
All children except immigrant children	88.5	90.0	87.4
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	86.4	87.8	85.3
All children except those with a disability and/or chronic illness	88.4	89.8	87.5

Source: *HBSC Survey*

- In 2022, a lower percentage of males than females reported having three or more friends of the same gender (see *Table 37*).
- In 2022, children aged 11 were the most likely to report having three or more friends of the same gender, and children aged 15 were the least likely. The percentage of children who reported having three or more friends was lower among those aged 15 and over compared to those aged 10–14 (see *Table 37*).
- The percentage of children who reported having three or more friends of the same gender was lowest among the low social class group (see *Table 37*).



Table 37. Percentage of children aged 10–17 who reported having three or more friends of the same gender, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	89.4	89.3	89.3	85.4	88.7	87.1
Age						
10 years	90.8	88.4	89.6	90.1	85.9	88.4
11 years	93.0	91.8	92.4	92.6	91.2	91.9
12 years	93.5	93.1	93.3	88.5	90.3	89.4
13 years	91.4	91.3	91.4	88.5	90.3	89.4
14 years	85.4	90.4	88.1	85.8	90.0	87.9
15 years	86.9	87.3	87.2	81.1	84.9	82.9
16 years	80.0	83.4	81.8	80.2	87.2	83.7
17 years	86.2	86.5	86.3	80.4	87.5	84.0
Social class						
High	90.8	90.6	90.7	88.4	90.2	89.3
Middle	89.8	89.1	89.5	84.4	88.1	86.2
Low	86.7	88.1	87.5	81.5	87.8	84.8

Source: HBSC Survey

- The percentage of children who reported having three or more friends of the same gender ranged from 85.2% in the Border region to 89.7% in the Mid-West (see Table 38).

Table 38. Percentage of children aged 10–17 who reported having three or more friends of the same gender, by NUTS region (2014–2022)

	2014	2018	2022
State	88.0	89.3	87.1
NUTS region			
Border	87.2	87.9	85.2
Midland	87.7	88.2	85.7
West	88.0	90.7	87.3
Dublin	87.7	89.7	86.9
Mid-East	87.4	89.3	86.7
Mid-West	90.0	89.3	89.7
South-East	86.9	89.6	87.8
South-West	89.5	89.7	86.8

Source: HBSC Survey



Pets and animals

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

- In 2022, 76.3% of children aged 10–17 reported having a pet of their own or a pet in the family. This increased between 2018 and 2022.
- Among individual population groups, when compared to all other children, immigrant children were less likely to report having a pet of their own or a pet in the family in 2022 (see *Table 39*).

Table 39. Percentage of children aged 10–17 who reported having a pet of their own or a pet in the family, by population group (2014–2022)

	2014	2018	2022
All children	74.6	71.7	76.3
Traveller status			
Traveller children	77.2	66.6	79.5
All children except Traveller children	74.5	71.9	76.3
Immigrant status			
Immigrant children	59.5	73.2	62.5
All children except immigrant children	77.3	59.7	77.8
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	77.4	73.4	75.8
All children except those with a disability and/or chronic illness	73.8	71.3	76.5

Source: *HBSC Survey*

- A lower percentage of males than females reported having a pet of their own or a pet in the family (see *Table 40*).
- The percentage of children who reported having a pet of their own or a pet in the family fluctuated somewhat with age (see *Table 40*).
- The percentage of children who reported having a pet of their own or a pet in the family was lowest in the low social class group. This was only slightly lower than the middle social class group in 2022. However, in 2018 the low social class group reported the highest percentage with a pet (see *Table 40*).



Table 40. Percentage of children aged 10–17 who reported having a pet of their own or a pet in the family, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	70.5	72.9	71.7	74.6	78.1	76.3
Age						
10 years	68.8	74.2	71.4	77.8	78.6	78.1
11 years	70.8	74.6	72.5	74.4	77.5	76.0
12 years	69.4	72.8	71.1	70.5	78.2	74.4
13 years	71.4	70.8	71.1	75.0	77.9	76.4
14 years	70.6	71.8	71.2	76.4	78.0	77.2
15 years	71.8	69.7	70.6	76.4	75.3	75.9
16 years	70.9	73.5	72.3	75.1	79.3	77.2
17 years	75.1	77.7	76.4	74.9	81.8	78.5
Social class						
High	69.2	73.5	71.5	74.8	79.8	77.3
Middle	71.6	74.1	72.8	75.5	77.3	76.4
Low	73.5	74.3	73.9	71.9	79.7	76.0

Source: HBSC Survey

- The percentage of children who reported having a pet of their own or a pet in the family ranged from 61.8% in Dublin to 85.2% in the South-East (see Table 41).

Table 41. Percentage of children aged 10–17 who reported having a pet of their own or a pet in the family, by NUTS region (2014–2022)

	2014	2018	2022
State	74.6	71.7	76.3
NUTS region			
Border	75.5	76.5	83.7
Midland	78.6	74.3	82.4
West	78.5	78.7	82.4
Dublin	62.2	73.4	61.8
Mid-East	74.0	78.2	76.2
Mid-West	82.2	80.7	83.8
South-East	84.6	61.4	85.2
South-West	78.4	72.3	79.0

Source: HBSC Survey



Bullying

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

- In 2022, 28.6% of children aged 10–17 reported having been bullied at school in the past couple of months. This decreased slightly between 2018 and 2022.
- Among individual population groups, when compared to all other children, Traveller children, immigrant children and children with a disability and/or chronic illness were more likely to report having been bullied at school in the past couple of months across all years examined (see *Table 42*).
- Traveller children were the population group with the highest percentage who reported having been bullied at school in the past couple of months (see *Table 42*).

Table 42. Percentage of children aged 10–17 who reported having been bullied at school in the past couple of months, by population group (2014–2022)

	2014	2018	2022
All children	26.5	31.1	28.6
Traveller status			
Traveller children	32.8	42.0	42.6
All children except Traveller children	26.3	30.8	28.2
Immigrant status			
Immigrant children	31.1	36.4	32.6
All children except immigrant children	25.6	30.4	28.1
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	31.9	38.9	36.6
All children except those with a disability and/or chronic illness	25.0	29.0	26.4

Source: HBSC Survey

- A lower percentage of males than females reported having been bullied at school in the past couple of months (see *Table 43*).
- On average in 2022, the percentage of children who reported having been bullied at school in the past couple of months trended upwards between the ages of 10 and 13 and decreased with age from 14 to 17 (see *Table 43*).
- In 2022, the percentage of children who reported having been bullied at school in the past couple of months was highest among the middle social class group (see *Table 43*).



Table 43. Percentage of children aged 10–17 who reported having been bullied at school in the past couple of months, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	30.8	31.3	31.1	27.7	29.6	28.6
Age						
10 years	33.7	35.9	34.8	23.6	25.2	24.3
11 years	30.6	29.7	30.2	29.5	32.5	31.1
12 years	27.1	28.4	27.7	30.8	30.4	30.6
13 years	31.2	33.0	32.1	29.3	35.2	32.1
14 years	29.9	34.1	32.2	27.4	29.3	28.4
15 years	31.0	28.1	29.3	26.2	30.2	28.1
16 years	30.4	30.3	30.4	25.5	24.2	24.9
17 years	27.9	20.4	24.0	24.4	22.5	23.5
Social class						
High	29.6	28.4	28.9	25.0	26.4	25.7
Middle	30.5	34.1	32.3	29.2	32.1	30.6
Low	33.7	34.9	34.3	24.0	32.0	28.1

Source: HBSC Survey

- The percentage of children who reported having been bullied at school in the past couple of months ranged from 23.6% in the West region to 37.0% in the Midlands (see Table 44).

Table 44. Percentage of children aged 10–17 who reported having been bullied at school in the past couple of months, by NUTS region (2014–2022)

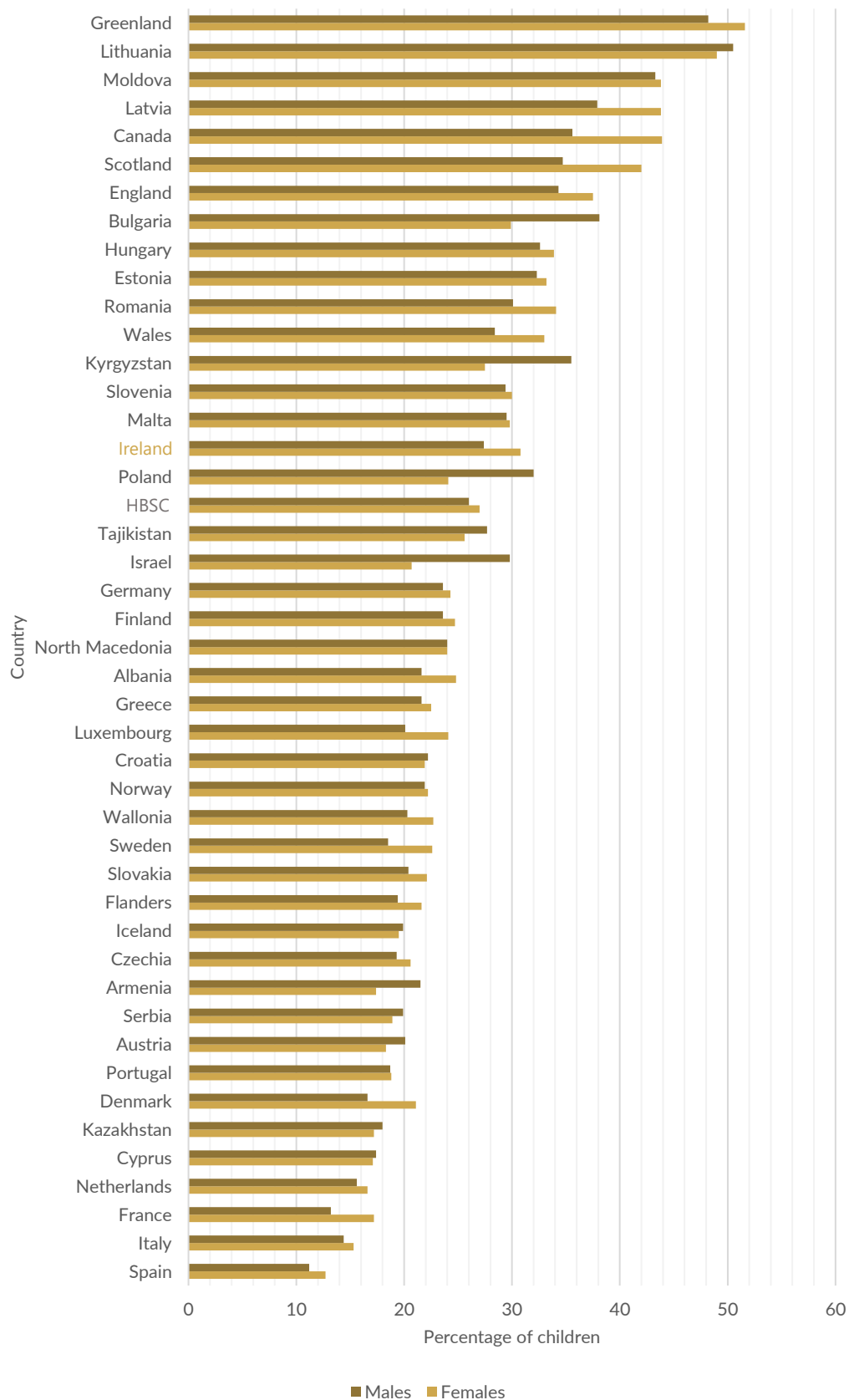
	2014	2018	2022
State	26.5	31.1	28.6
NUTS region			
Border	28.1	29.0	26.0
Midland	29.2	30.2	37.0
West	25.2	31.9	23.6
Dublin	27.5	32.3	29.5
Mid-East	23.7	30.6	29.5
Mid-West	24.5	34.4	25.6
South-East	27.5	30.5	26.4
South-West	25.4	31.7	30.8

Source: HBSC Survey

- Across 44 countries/regions, the average percentage of children who reported having been bullied at school in the past couple of months was 26.0% for boys and 27.0% for girls (see Figure 8). This ranged from 11.2% and 12.7%, for boys and girls respectively, in Spain, to 48.2% and 51.6%, in Greenland. The corresponding percentages in Ireland were 27.4% and 30.8%. This was just above the international HBSC averages.



Figure 8. Percentage of children aged 11, 13, and 15 who reported having been bullied at least once or twice at school in the previous couple of months, by country (2022) ↗



Source: HBSC Survey

STATE OF
THE NATION'S
CHILDREN



CHILDREN'S OUTCOMES

3





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Key findings

- In 2024 there were 24.4% of children aged under 3 in formal childcare or education. This represents an increase from 2023 (see Table 45).
- In 2024, 37% of ELC staff had a QQI Level 7 or higher, this percentage has increased since 2019 (see Table 46).
- Over the period 2018 to 2023, the percentage of primary school children who were absent from school for 20 days or more increased from 10.7% to 22.1% (see Table 47).
- Over the period 2017 to 2023, the percentage of post-primary school children who were absent from school for 20 days or more increased from 14.6% to 21.2% (see Table 50).
- The Leaving Certificate retention rate for children entering secondary school in 2017 was 90.0%, i.e. out of the 57,512 enrolled on 30 September 2017 in year one of the Junior Cycle, 51,761 sat the Leaving Certificate or received a calculated grade by 2022 or 2023 (see Figure 9).
- In 2022, 15-year-old children in Ireland achieved a mean score of 516.0 on the reading literacy scale (see Table 55).
- In 2022, 15-year-old children in Ireland achieved a mean score of 491.6 on the mathematics literacy scale (see Table 57).
- In 2022, 15-year-old children in Ireland achieved a mean score of 503.8 on the science literacy scale (see Table 59).
- In 2024, 6.2% of all babies born were in the low-birth-weight category (weighing less than 2,500 grams) (see Table 61).
- In 2024, 65.3% of infants were breastfed on being discharged from hospital. This includes 45.1% who were breastfed exclusively and a further 20.2% who were fed using a combination of bottle and breastfeeding (see Table 63).



- In 2024, there were 143,275 hospital discharges of children (see Table 65).
- In 2024, there were 12,011 hospital discharges of children with a principal diagnosis of “injury, poisoning, and certain other consequences of external causes” (see Table 67).
- In 2022, 75.3% of first-class children were classified as being in the “normal” weight category according to the International Obesity Taskforce Standards. 17.2% were classified as either “overweight” or “obese” (see Table 69).
- In 2022, there were 8,826 children registered for HSE disability services as having an intellectual disability (see Table 70).
- In 2022, there were 6,340 children registered for HSE disability services as having a physical and/or sensory disability (see Table 72).
- In 2024 Q4, there were 26,074 child welfare and protection referrals to Tusla, the Child and Family Agency (see Table 74).
- In 2022, 26.8% of children aged 10–17 reported students at their school participate in making the school rules. This decreased between 2018 and 2022 (see Table 76).
- In 2022, 35.8% of children aged 15 reported that reading is one of their favourite hobbies, an increase from 2018 (see Table 79).
- In 2022, 2.4% of children aged 10–17 reported smoking cigarettes every week. This remained unchanged between 2018 and 2022 (see Table 81).
- In 2022, 90.7% of children aged 10–17 reported never having smoked cigarettes. This increased slightly between 2018 and 2022 (see Table 84).
- In 2022, 8.7% of children aged 10–17 reported having been drunk at least once in the past 30 days. This increased slightly between 2018 and 2022 (see Table 87).



- In 2022, 69.1% of children aged 10–17 reported never having had an alcoholic drink, remaining stable since 2018 (see Table 90).
- In 2022, 7.1% of children aged 10–17 reported having taken cannabis at least once in their lifetime. This has remained stable between 2018 and 2022 (see Table 93).
- In 2023, there were 147 births to mothers aged 15–17, down from 181 in 2020 (see Table 96).
- In 2022, 25.1% of children aged 15–17 reported having ever had sex, remaining stable since 2018 (see Table 98).
- In 2022, 39.4% of children aged 10–17 reported feeling happy with the way they are, a substantial decrease from 2018 (see Table 101).
- In 2022, 78.5% of children aged 10–17 reported being happy with their lives at present. This decreased substantially between 2018 and 2022 (see Table 104).
- In 2023, there were 5 suicides by children aged 15–17, down from 16 in 2014 (see Table 107).
- In 2024, the rate (per 100,000) of children and young people aged 10–24 presenting at a hospital emergency department following self-harm was 332 (see Table 109).
- In 2022, 54.9% of children aged 10–17 reported being physically active for at least 60 minutes per day on more than four days per week, an increase from 2018 (see Table 111).
- In 2022, 69.7% of children aged 10–17 reported eating breakfast on five or more days per week, a decrease from 2018 (see Table 114).
- In 2022, 6.6% of children aged 10–17 reported drinking soft drinks that contain sugar at least once a day. This remained stable between 2018 and 2022 (see Table 117).



Education Outcomes



Early Learning and Care Attendance and Quality

Measure: The percentage of (a) children in early learning and care or education from birth to compulsory school age and (b) early years educators with a relevant qualification at level 7 or higher on the National Framework of Qualifications (NFQ)

Note: Tables 45 and 46 have changed since the previous version of SONC.

- In 2024 there were 24.4% of children aged under 3 in formal childcare or education. This represents an increase from 2023 (see *Table 45*).
- For the group aged 3 and over, 95.6% were in formal childcare or education in 2024 (see *Table 45*).

Table 45. Percentage of children in formal childcare or education by age group as a proportion of total children (2019-2024)

	2019	2020	2021	2022	2023	2024
Less than 3 years	32.0	17.9	14.8	18.2	22.1	24.4
From 3 years to minimum compulsory school age	89.5	90.1	79.2	93.6	94.1	95.6

Source: [EU-SILC](#)

Note: The lines in this table indicate breaks in the data series. Users should interpret differences across breaks in series with caution

- In 2024, 37% of ELC staff had a QQI Level 7 or higher, this percentage has increased since 2019 (see *Table 46*).

Table 46. Percentage of Early Learning and Care staff with a QQI Level 7 qualification or higher (2019-2024)

	2019	2020	2021	2022	2023	2024
Total	25	27	34	37	39	37

Source: [Pobal](#)

Note: Please note that a change in the data collection methodology for 2023 has resulted in some inconsistencies in the analysis. Accordingly, the data should be interpreted with caution.



Primary school attendance

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

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

- Over the period 2018/19 to 2023/24, the percentage of primary school children who were absent from school for 20 days or more increased from 10.7% to 22.1%. There was a substantial decrease from 2021 to 2022, continuing into 2023. (see Table 47).

Table 47. Percentage of primary school children who were absent from school for 20 days or more in the school year (2018–2023)

	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
Primary school children	10.7	5.0	11.1	40.3	25.1	22.1

Source: Tusla, the Child and Family Agency

- The average percentage of primary school children who were absent from school for 20 days or more in the 2023/24 school year was higher in urban schools (30.7%) compared to rural schools (21.5%)
- The average percentage of school children who were absent from school for 20 days or more in the 2023/24 school year was highest in schools characterised as urban, in School Support Programme Band 1² (38%).
- In the 2023/24 school year, the average percentage of primary school children per school absent for 20 days or more ranged from 15.3% in Cavan to 28.2% in Dublin.

Table 48. Average percentage of primary school children per school* who were absent from school for 20 days or more in the school year, by selected school characteristics (2019–2023)

	2019/20	2020/21	2021/22	2022/23	2023/24
Type of school					
Rural	3.4	7.0	35.1	21.5	NA
Urban	7.4	15.9	45.5	30.7	NA
DEIS status					
Rural, not in School Support Programme	3.2	6.9	34.7	19.1	16.3
Rural, in School Support Programme	4.6	7.9	37.4	28.2	20.2
Urban, not in School Support Programme	6.2	13.0	42.0	25.9	23.7
Urban, in School Support Programme Band 2	8.2	18.9	50.7	33.5	34.0
Urban, in School Support Programme Band 1	12.1	27.2	57.6	42.9	38.0

* This table uses schools-level data

Source: Tusla, the Child and Family Agency

² See [here](#) for details of the DEIS programme



Table 49. Average percentage of primary school children per school* who were absent from school for 20 days or more in the school year, by county (2018–2023) ↩

	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
All counties	10.5	5.0	10.4	39.0	25.0	21.4
County						
Carlow	11.7	6.3	11.2	42.3	25.0	20.0
Cavan	8.7	4.2	8.3	33.1	18.9	15.3
Clare	10.2	5.0	8.4	32.8	24.3	28.1
Cork	10.1	4.4	8.3	36.7	21.8	19.9
Donegal	7.9	3.2	10.4	36.1	23.4	18.2
Dublin	14.5	7.7	16.5	45.5	31.2	28.2
Galway	10.6	4.4	7.5	34.6	29.7	21.6
Kerry	12.0	4.9	9.0	37.0	25.4	20.9
Kildare	10.4	5.3	10.5	43.5	26.6	20.3
Kilkenny	7.6	3.8	8.1	36.8	18.5	16.1
Laois	10.9	3.8	12.3	45.2	26.1	22.5
Leitrim	7.0	5.5	8.0	36.2	22.9	20.2
Limerick	11.6	4.8	13.6	40.1	22.2	20.0
Longford	12.8	6.3	14.9	43.6	25.1	18.0
Louth	12.0	5.2	11.8	44.3	26.3	23.5
Mayo	9.0	4.4	6.3	39.7	23.3	19.5
Meath	8.5	3.8	8.9	37.4	23.2	19.3
Monaghan	5.4	2.4	6.3	28.5	15.9	12.4
Offaly	11.4	5.4	11.1	46.1	24.3	22.2
Roscommon	9.7	5.5	10.0	36.6	26.9	21.2
Sligo	9.3	4.8	8.3	34.2	22.0	16.4
Tipperary	8.5	4.2	7.8	36.0	22.3	22.2
Waterford	9.4	4.6	9.3	37.0	23.1	20.7
Westmeath	9.4	6.0	11.9	41.1	28.3	20.8
Wexford	11.2	5.5	10.8	41.5	26.0	20.7
Wicklow	10.1	3.6	8.4	42.2	23.3	20.1

* This table uses schools-level data

Source: Tusla, the Child and Family Agency



Post-primary school attendance

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

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

- Over the period 2018 to 2023, the percentage of post-primary school children who were absent from school for 20 days or more increased from 14.5% to 21.2% (see Table 50).

Table 50. Percentage of post-primary school children who were absent from school for 20 days or more in the school year (2018–2023)

	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
Post-primary school children	14.5	9.5	12.0	26.8	22.3	21.2%

Source: Tusla, the Child and Family Agency

- In the 2023/24 year, the average percentage of post-primary school children who were missing for 20 days or more was lowest in secondary schools (18.7%). This average percentage was 18.6% in non-DEIS schools and 28.3% in DEIS schools.

Table 51. Average percentage of post-primary school children per school* who were absent from school for 20 days or more in the school year, by selected school characteristics (2018–2023)

	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
Type of school						
Secondary schools	12.3	8.3	10.0	24.0	19.9	18.7
Community and comprehensive schools	17.5	12.0	15.8	31.1	26.7	23.1
Vocational schools	19.8	13.3	17.0	33.2	27.0	25.6
DEIS status						
DEIS schools	22.9	17.1	23.1	36.8	30.7	28.3
Non-DEIS schools	12.7	7.7	9.7	24.5	19.5	18.6

* This table uses schools-level data

Source: Tusla, the Child and Family Agency

- In the 2023/24 school year, the average percentage of post-primary school children per school who were absent for 20 days or more ranged from 15.8% in Monaghan to 31.7% in Longford.



Table 52. Average percentage of post-primary school children per school* who were absent from school for 20 days or more in the school year, by county (2018–2023)

	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
All counties	15.5	10.4	13.3	28.0	23.3	21.8
County						
Carlow	17.6	13.1	15.9	24.0	25.8	18.3
Cavan	13.2	14.4	11.0	24.6	20.1	19.0
Clare	15.4	6.4	11.2	24.0	20.6	17.5
Cork	12.3	8.3	10.8	21.4	20.9	21.1
Donegal	18.7	11.0	17.7	33.6	27.0	23.1
Dublin	15.4	11.4	14.6	28.1	22.4	20.8
Galway	19.5	11.1	14.2	30.2	23.5	27.3
Kerry	13.7	10.9	14.6	28.6	25.0	21.7
Kildare	16.2	9.4	9.0	28.5	22.2	18.8
Kilkenny	18.6	10.3	12.8	26.1	20.6	21.7
Laois	19.0	11.0	23.7	44.6	39.0	23.8
Leitrim	12.6	8.5	15.8	18.9	26.6	18.2
Limerick	13.5	9.7	9.4	33.5	22.9	19.3
Longford	25.0	10.3	26.3	32.9	33.7	31.7
Louth	12.9	5.0	10.6	24.1	22.1	19.8
Mayo	17.1	10.9	12.2	31.0	27.7	27.3
Meath	16.4	6.6	7.9	29.0	26.3	19.1
Monaghan	17.9	9.8	13.4	30.8	14.8	15.8
Offaly	15.4	11.9	4.4	22.9	22.1	19.9
Roscommon	10.0	9.4	15.0	25.8	23.2	25.3
Sligo	18.3	9.9	18.0	30.9	25.7	25.0
Tipperary	13.4	8.1	7.4	24.2	16.4	18.7
Waterford	11.8	12.2	12.0	23.9	22.3	24.9
Westmeath	15.8	10.0	17.6	35.2	25.8	24.5
Wexford	18.7	16.5	14.5	34.5	30.0	28.3
Wicklow	17.5	12.1	14.2	31.5	27.4	24.0

* This table uses schools-level data

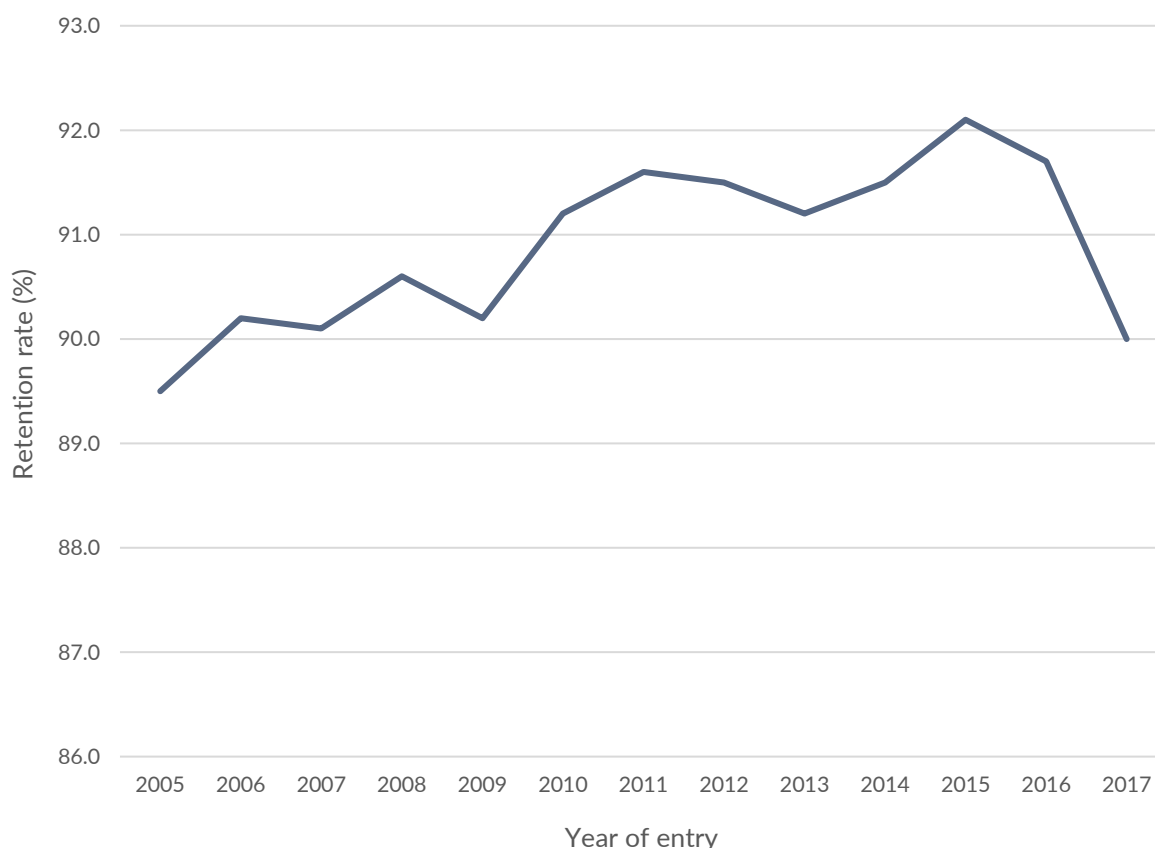
Source: Tusla, the Child and Family Agency



Leaving Certificate retention rates

Measure: The Leaving Certificate retention rate

Figure 9. Leaving Certificate retention rate (2005–2017 school entry cohorts) 



Source: Department of Education

- The Leaving Certificate retention rate for children entering secondary school in 2017 was 90.0%, i.e. out of the 57,512 enrolled on 30 September 2017 in year one of the Junior Cycle, 51,761 either sat the Leaving Certificate or received a calculated grade by 2022 or 2023 (see *Table 53*).
- Leaving Certificate retention rates increased from 89.5% for the 2005 entry cohort to 92.1% for the 2015 entry cohort but have declined since then to 90.0% in the 2017 entry cohort. This temporary increase in the Leaving Certificate retention rate may be attributable to the suspension of exams during the Covid 19 pandemic (see *Figure 9*).
- The retention rate for boys in the 2017 school entry cohort was 88.4%, compared to 91.6% for girls (see *Table 53*).
- On average, secondary schools had the highest retention rates (at 91.6%) when compared with community and comprehensive schools (89.7%) and vocational schools (87.2%) (see *Table 53*).
- For the 2017 school entry cohort, the retention rate was 83.4% in DEIS schools, compared to 92.1% for children in non-DEIS schools.
- Overall, the Leaving Cert retention rate for children in the 2017 entry cohort ranged from 83.7% in Longford to 93.0% in Mayo (see *Table 54*).



Table 53. Leaving Certificate retention rate, by gender, school type, and DEIS status (2017 school entry cohort)

	No. in cohort	Retention rate (%)
Total	57,512	90.0
Sex		
Male	28,890	88.4
Female	28,622	91.6
School type		
Secondary schools	31,762	91.6
Vocational schools	16,186	87.2
Community and comprehensive schools	9,564	89.7
DEIS status		
DEIS schools	13,090	83.4
Non-DEIS schools	44,422	92.1

Source: Department of Education

Table 54. Leaving Certificate retention rate, by county (2017 school entry cohort)

	No. in cohort	Retention rate (%)
State	57,512	90.0
County		
Carlow	857	88.3
Cavan	912	89.8
Clare	1,368	91.2
Cork	6,561	91.2
Donegal	2,039	89.7
Dublin	14,053	88.7
Galway	3,269	90.7
Kerry	1,731	91.2
Kildare	3,082	91.2
Kilkenny	1,185	91.8
Laois	998	91.0
Leitrim	444	92.9
Limerick	2,474	91.2
Longford	587	83.7
Louth	2,011	90.1
Mayo	1,648	93.0
Meath	2,514	92.4
Monaghan	781	88.9
Offaly	960	89.4
Roscommon	613	89.6
Sligo	823	91.2
Tipperary	2,209	90.3
Waterford	1,391	91.0
Westmeath	1,239	88.6
Wexford	1,975	88.2
Wicklow	1,788	87.0

Source: Department of Education



Achievement in reading: OECD-PISA Reading Literacy Scale

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

- In 2022, 15-year-old children in Ireland achieved a mean score of 516.0 on the reading literacy scale (see *Table 55*).
- Immigrant children scored 507.4 on the reading literacy scale, compared to a score of 520.4 for non-immigrant students (see *Table 55*).

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

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

Source: OECD-Pisa survey

- Girls scored 525.4 on the reading literacy scale, compared with 507.1 for boys (see *Table 56*).
- Reading literacy scores have been decreasing in the period 2012-2022 (see *Table 56*).

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

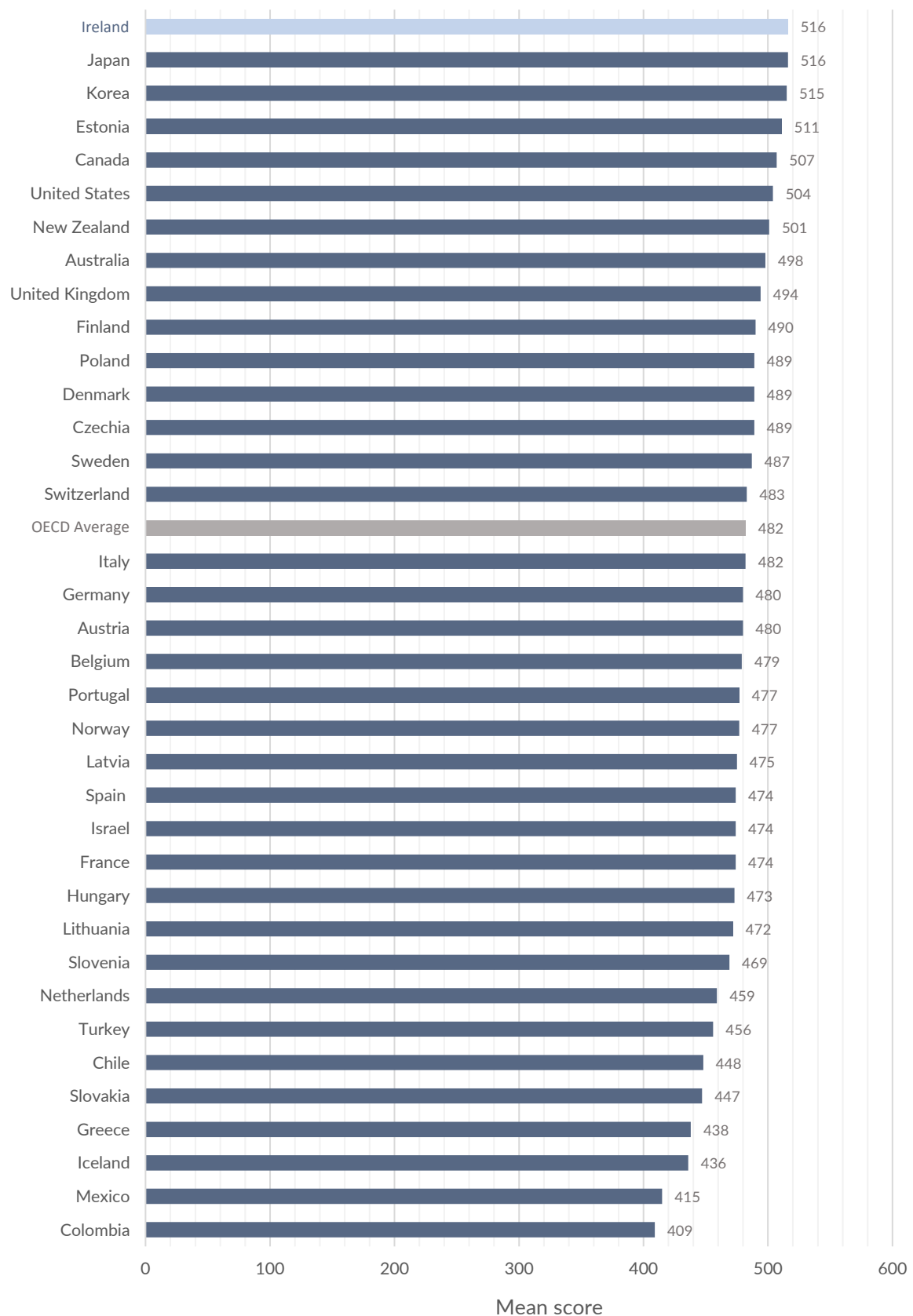
	2012	2015	2018	2022
All children	523.2	520.8	518.1	516.0
Gender				
Male	509.2	515.0	506.4	507.1
Female	537.7	526.9	529.6	525.4
Social class				
High	562.3	555.6	551.8	551.0
Medium	523.3	520.5	517.5	516.3
Low	485.9	488.0	487.9	484.7

Source: OECD-Pisa survey

- In 2022, Irish students were the best performing in reading literacy among the 37 countries in the OECD and the 26 EU countries. Overall, Ireland has moved from eighth place to second place among the 81 countries taking part in the PISA project.



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



Source: OECD-Pisa survey



Achievement in mathematics: OECD-PISA Mathematics Literacy Scale

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

- In 2022, 15-year-old children in Ireland achieved a mean score of 491.6 on the mathematics literacy scale (see *Table 57*).
- Immigrant children scored 486.6 on the mathematics literacy scale, compared to a score of 494.8 for non-immigrant children (see *Table 57*).

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

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

Source: OECD-Pisa survey

- Girls scored 485.1 on the mathematics literacy scale, compared with 497.8 for boys.
- The scores on the mathematics literacy scale decreased with socioeconomic status, the mean score in the high socioeconomic status group was 527.3 and in the low socioeconomic status group was 461.1 (see *Table 58*).

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

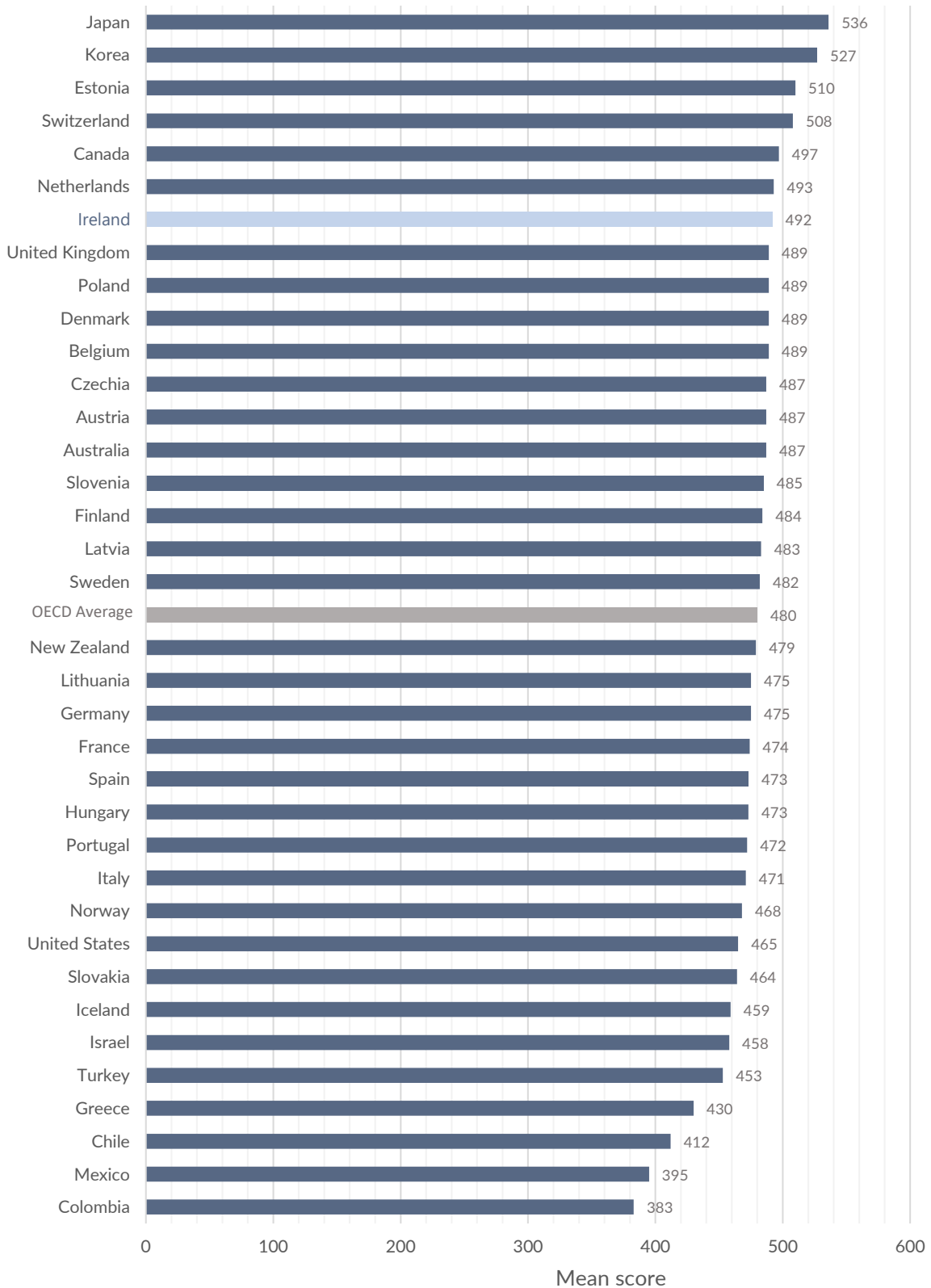
	2012	2015	2018	2022
All children	501.5	503.7	499.6	491.6
Gender				
Male	509.0	511.6	502.6	497.8
Female	493.7	495.4	496.7	485.1
Social class				
High	538.9	537.7	530.0	527.3
Medium	501.3	502.4	498.5	490.1
Low	465.5	471.5	472.3	461.1

Source: OECD-Pisa survey



- In 2022, Ireland moved from twenty-first place to eleventh place in mathematical literacy among the 81 countries taking part in the PISA project.

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



Source: OECD-Pisa survey



Achievement in science: OECD-PISA Science Literacy Scale

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

- In 2022, 15-year-old children in Ireland achieved a mean score of 503.8 on the science literacy scale (see *Table 59*).
- Immigrant children scored 502.6 on the science literacy scale, compared to a score of 506.4 for non-immigrant children.

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

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

Source: OECD-Pisa survey

- Girls scored 501.0 on the science literacy scale, compared with 506.6 for boys (see *Table 60*).
- Scores on the science literacy scale decreased with socioeconomic status.

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

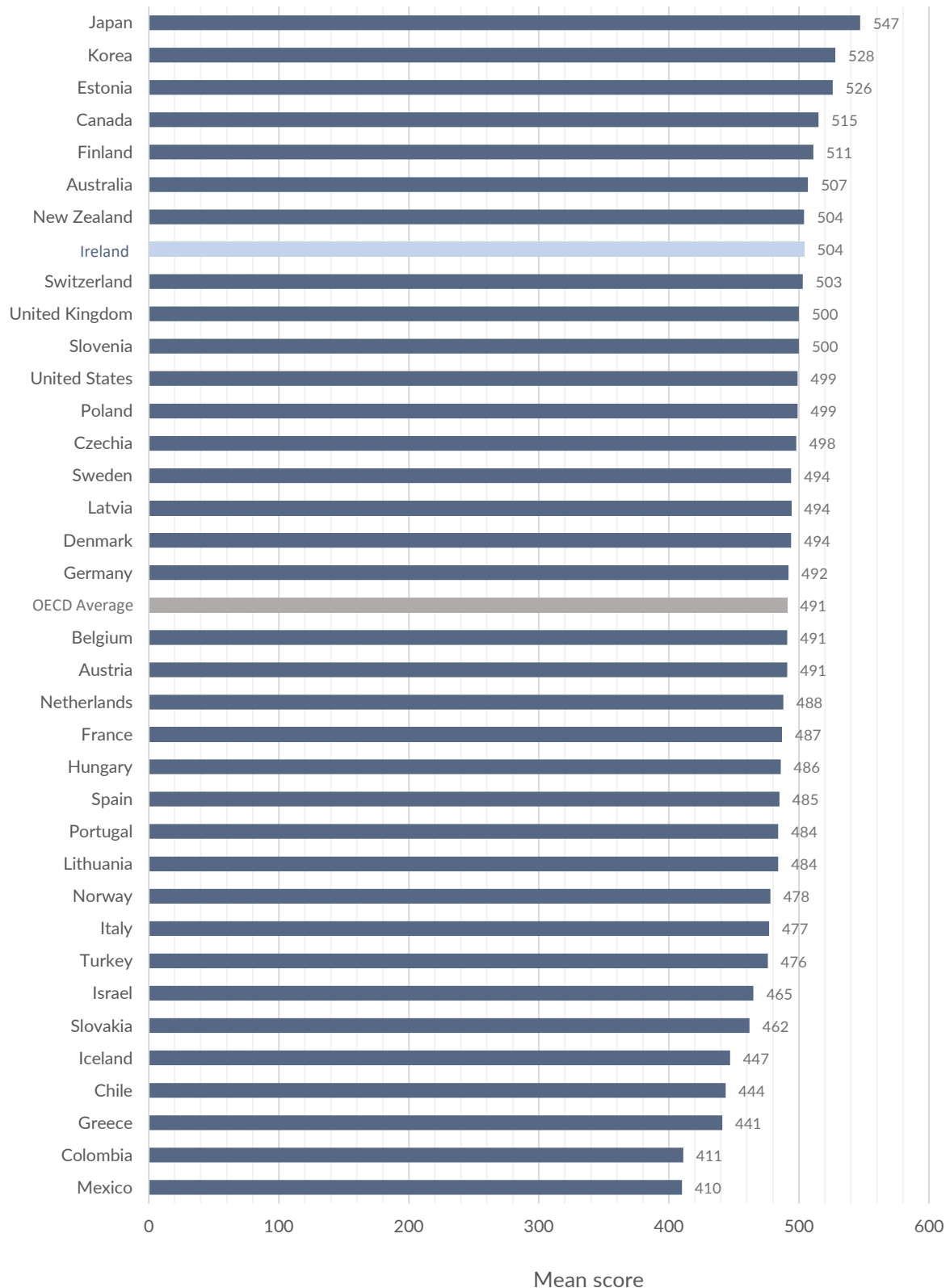
	2012	2015	2018	2022
All children	522.0	502.6	496.1	503.8
Gender				
Male	523.9	507.7	495.4	506.6
Female	520.0	497.2	496.9	501.0
Social class				
High	562.4	538.5	529.3	541.1
Medium	522.3	501.8	495.7	502.7
Low	483.0	468.3	465.9	471.6

Source: OECD-Pisa survey



- In 2022, Ireland moved from twenty-second place to twelfth place in science literacy among the 81 countries taking part in the PISA project.

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



Source: OECD-Pisa survey

Health Outcomes



Birth weight

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

- In 2024, 6.2% of all babies born were in the low-birth-weight category (weighing less than 2,500 grams) (see *Table 61*).
- Girls were more likely than boys to be born in the low-birth-weight category (6.8% and 5.6% respectively) (see *Table 61*).

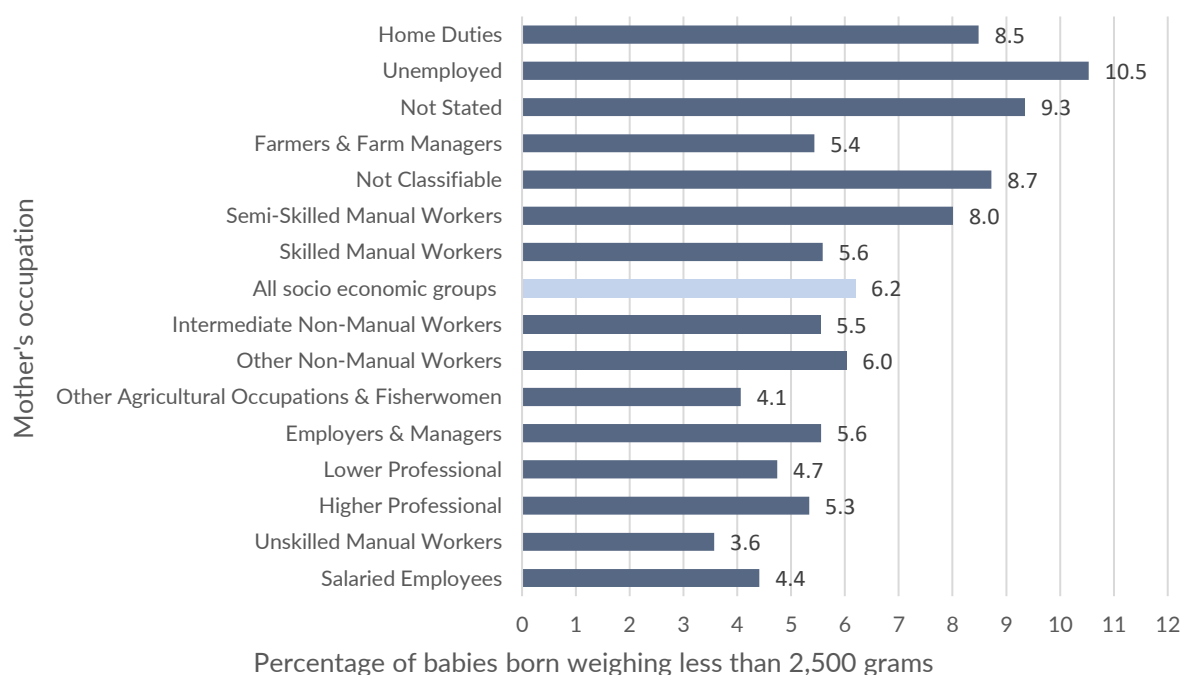
Table 61. Percentage of babies born in birth weight categories (live and still births), by gender (2022–2024)

	2022			2023			2024		
	Low weight	Healthy weight	High weight	Low weight	Healthy weight	High weight	Low weight	Healthy weight	High weight
Total	6.3	81	12.7	6.3	81.3	12.5	6.2	81.4	12.4
Gender									
Male	5.7	78.8	15.5	5.7	79	15.3	5.6	79.3	15.0
Female	6.8	83.4	9.7	6.9	83.7	9.5	6.8	83.7	9.5

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

- The percentage of babies born in the low-birth-weight category was highest among mothers who reported their occupation was unemployed (10.5%) (see *Figure 13*).

Figure 13. Percentage of babies born weighing less than 2,500 grams (live and still births), by occupation of mother (2024) 



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



- Overall, 6.2% of babies born in 2024 were in the low-birth-weight category. This percentage ranged from 3.8% of all births in Leitrim to 8.2% of all births in Limerick (see Table 62).

Table 62. Percentage of babies born weighing less than 2,500 grams (live and still births), by mother's county of residence (2020–2024)

	2020	2021	2022	2023	2024
State	5.8	5.9	6.3	6.3	6.2
Mother's county of residence					
Carlow	5.2	5.3	5.3	8.0	5.7
Cavan	5.2	5.9	7.7	7.1	5.9
Clare	6.4	6.7	5.4	6.1	7.7
Cork	5.7	6	6.5	6.2	6.0
Donegal	5.9	6.2	6.7	6.6	6.1
Dublin City	6	6.1	6.7	6.5	6.9
Dublin County	5.3	5.2	5.9	6.2	5.6
Galway	4.6	5.8	5.1	5.0	5.8
Kerry	5.8	5.1	5.2	5.8	5.9
Kildare	5.3	5.5	6	5.9	6.0
Kilkenny	4.9	5.8	5.8	5.9	4.9
Laois	6.9	5.7	8.9	6.4	6.0
Leitrim	4.5	6.5	5.8	6.3	3.8
Limerick	7	7	7.9	6.7	8.2
Longford	8.2	7.2	8.3	8.2	5.2
Louth	7.1	6.8	7.6	6.7	6.8
Mayo	5	4.4	4.8	5.5	4.0
Meath	4.9	5	6.4	6.2	5.3
Monaghan	5.4	5.6	4.9	5.5	5.4
Offaly	5.7	6	6.3	6.3	5.4
Roscommon	5.6	3.5	5.2	5.2	6.9
Sligo	6.7	5.6	5.1	6.7	6.8
Tipperary	6	6.8	5.4	6.4	6.4
Waterford	6.3	5.6	6.4	7.4	6.4
Westmeath	5.6	6.8	6.4	6.4	5.9
Wexford	5.7	6.5	5.3	6.8	5.7
Wicklow	5.5	4.5	4.9	4.7	6.0



Breastfeeding

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

- In 2024, 65.3% of infants were breastfed on being discharged from hospital. This includes 45.1% who were breastfed exclusively and a further 20.2% who were fed using a combination of bottle and breastfeeding (see *Table 63*).
- The percentage of infants who were breastfed (either exclusive or combined) was higher among mothers aged 40 years and over (see *Table 63*).
- The percentage of infants who were breastfed (either exclusive or combined) was highest among mothers in “higher professional” and “skilled manual workers” occupations (83.2% and 80.5% respectively), when compared with mothers in the “Unskilled Manual Workers” group, among whom it was lowest (42.9%) (see *Figure 14*).

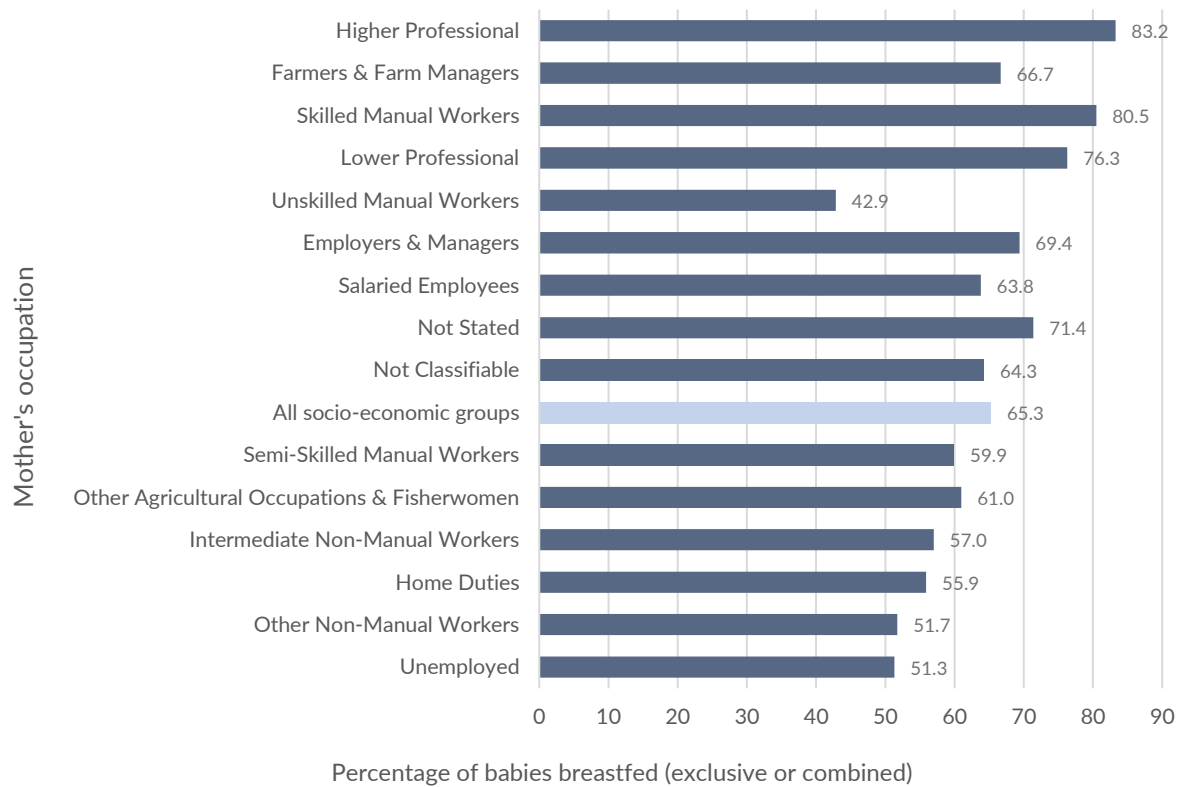
Table 63. Percentage of infants who are breastfed (exclusive and combined) on being discharged from hospital, by mother's age (2022–2024)

	2022			2023			2024		
	Excl.	Comb.	Total	Excl.	Comb.	Total	Excl.	Comb.	Total
Total	44.7	17.1	62.3	44.8	18.9	63.7	45.1	20.2	65.3
Mother's age									
15–19 years	20	9.9	29.9	18.4	11.7	30	18.2	12.0	30.2
20–24 years	25.6	12.8	38.4	26.9	14.3	41.2	28.4	13.9	42.3
25–29 years	36.5	16.4	52.9	36.8	17.5	54.3	37.0	19.4	56.4
30–34 years	46.5	18.3	64.9	46.8	20.1	67	47.1	21.2	68.2
35–39 years	51.3	18.3	69.6	51	18.7	69.7	51.1	20.5	71.5
40–44 years	49.9	20	70	49.6	21.5	71	49.5	22.4	71.9
45 years and over	45.3	27.2	72.5	42.9	28.3	71.2	39.8	28.0	67.8

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



Figure 14. Percentage of infants who are breastfed (either exclusive or combined) on being discharged from hospital, by occupation of mother (2024) 



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



- Geographically, breastfeeding on being discharged from hospital ranged from 53.5% in Donegal to 74% in Dublin County in 2024 (see *Table 64*).

Table 64. Percentage of infants who are breastfed (exclusive and combined) on being discharged from hospital, by mother's county of residence (2024)

	Exclusive	Combined	Total
State	45.1	20.2	65.3
Mother's county of residence			
Carlow	44.5	10.0	54.5
Cavan	34.6	19.9	54.5
Clare	63.9	4.2	68.1
Cork	64.8	5.0	69.8
Donegal	39.0	14.6	53.5
Dublin City	37.1	30.3	67.5
Dublin County	43.4	30.6	74.0
Galway	40.6	25.9	66.5
Kerry	57.6	9.8	67.4
Kildare	38.4	29.3	67.8
Kilkenny	62.0	2.7	64.7
Laois	51.5	10.5	62.0
Leitrim	45.5	19.5	65.0
Limerick	59.3	3.2	62.4
Longford	45.6	13.7	59.2
Louth	25.0	33.6	58.6
Mayo	46.2	18.2	64.4
Meath	36.0	29.5	65.4
Monaghan	31.5	22.8	54.3
Offaly	42.7	13.8	56.5
Roscommon	39.9	21.4	61.3
Sligo	42.7	24.7	67.3
Tipperary	45.3	10.4	55.7
Waterford	57.5	5.8	63.3
Westmeath	45.7	17.8	63.5
Wexford	37.5	20.2	57.8
Wicklow	47.3	23.4	70.7

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



Health conditions and hospitalisation

Measure: The number of hospital discharges of children

- In 2024, there were 143,275 hospital discharges of children (see *Table 65*).
- Children aged under 1 year and 1–4 years together accounted for 41.8% of total hospital discharges of children (18.4% and 23.4% respectively) (see *Table 65*).
- Boys accounted for more than half of total hospital discharges of children (55.2%) (see *Table 65*).
- The most reported principal diagnosis recorded was “diseases of the respiratory system” (15.2%) followed by “diseases of the digestive system” (9.8%) (see *Table 65*).

Table 65. Number, percentage and rate (per 1,000) of hospital discharges of children, by age, gender, and principal diagnosis (2023–2024)

	2023			2024		
	No.	%	Rate	No.	%	Rate
Total	136,077	100	111	143,275	100	116.2
Age						
Under 1 year	27,048	19.9	485.5	26,352	18.4	475.2
1–4 years	30,929	22.7	129.9	33,586	23.4	141.3
5–9 years	29,234	21.5	86.3	31,228	21.8	93.1
10–14 years	28,066	20.6	74	29,694	20.7	77.8
15–17 years	20,800	15.3	97.2	22,415	15.6	133.5
Gender						
Male	74,558	54.8	118.2	79,117	55.2	125.4
Female	61,519	45.2	102.2	64,158	44.8	106.6
Principal diagnosis						
Diseases of the respiratory system	19,282	14.2	15.7	21,749	15.2	17.6
Injury, poisoning and certain other consequences of external causes	11,692	8.6	9.5	12,011	8.4	9.7
Diseases of the digestive system	12,619	9.3	10.3	13,989	9.8	11.3
Certain infectious and parasitic diseases	7,418	5.5	6.1	9,075	6.3	7.4
Certain conditions originating in the perinatal period	9,720	7.1	7.9	9,556	6.7	7.8
Congenital malformations, deformations and chromosomal abnormalities	6,811	5	5.6	6,870	4.8	5.6
Diseases of the genitourinary system	5,624	4.1	4.6	5,818	4.1	4.7
Neoplasms	6,500	4.8	5.3	6,714	4.7	5.4
Diseases of the skin and subcutaneous tissue	5,071	3.7	4.1	5,221	3.6	4.2
Diseases of the ear and mastoid process	3,144	2.3	2.6	3,077	2.1	2.5
All other conditions and reasons for admission	48,196	35.4	39.3	49,195	34.3	39.9

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

Source: Hospital In-patient Enquiry, Healthcare Pricing Office



- Overall, there were 117.0 hospital discharges of children residing in Ireland per 1,000 total children in 2024. Rates ranged from 88.5 per 1,000 in Wicklow to 183.2 per 1,000 in Mayo (see *Table 66*).

Table 66. Number and rate (per 1,000) of hospital discharges of children, by county of residence (2023-2024)

	2023		2024	
	No.	Rate	No.	Rate
State	135,429	111.1	142,602	117.0
County of residence				
Carlow	1,879	126.1	1,886	126.5
Cavan	2,112	98.8	2,279	106.6
Clare	3,352	109.6	3,732	122.0
Cork	13,884	101.5	14,174	103.6
Donegal	8,299	200.6	7,422	179.4
Dublin	33,186	103.6	36,300	113.4
Galway	8,592	132.8	9,408	145.4
Kerry	4,327	123.6	4,487	128.2
Kildare	6,204	96.5	6,428	100.0
Kilkenny	2,419	94.5	2,666	104.1
Laois	2,541	103.2	2,762	112.2
Leitrim	769	88.6	798	91.9
Limerick	6,058	127.4	6,202	130.4
Longford	1,198	101.7	1,331	113.0
Louth	3,709	104.9	3,737	105.7
Mayo	5,422	169.9	5,846	183.2
Meath	5,672	94.2	5,640	93.7
Monaghan	1,600	93.1	1,607	93.5
Offaly	2,299	110.8	2,297	110.7
Roscommon	1,983	116.1	2,049	120.0
Sligo	2,298	142.1	2,345	145.0
Tipperary	4,487	110.8	4,780	118.1
Waterford	2,917	97.8	3,240	108.6
Westmeath	2,611	109.6	2,767	116.2
Wexford	4,374	111.0	4,972	126.1
Wicklow	3,237	83.1	3,447	88.5

Notes: Rates calculated using county population at Census 2022. State total is different to overall total due to some non-residents being counted in the total figure.

Source: Hospital In-patient Enquiry, Healthcare Pricing Office



Accidents, injuries, and hospitalisation

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

- In 2024, there were 12,011 hospital discharges of children with a principal diagnosis of “injury, poisoning, and certain other consequences of external causes” an increase since 2023 (see *Table 67*).
- Children aged under 1 year and 1–4 years together accounted for 27.1% of total hospital discharges of children with a principal diagnosis of “injury, poisoning, and certain other consequences of external causes” (see *Table 67*)
- Boys accounted for more than half of total hospital discharges of children with this diagnosis (58.9%) (see *Table 67*).
- The most commonly reported cause recorded was “accidental falls” (37.0%) followed by “other external causes of injury” (19.1%) and “accidents caused by objects” (16.7%) (see *Table 67*).

Table 67. Number, percentage, and rate (per 1000) of hospital discharges of children with a principal diagnosis of “injury, poisoning and certain other consequences of external causes”, by age, gender, and cause (2023-2024)

	2023			2024		
	No.	%	Rate	No.	%	Rate
Total	11,692	100	9.5	12,011	100	9.7
Age						
Under 1 year	583	5	10.5	628	5.2	11.3
1–4 years	2,436	20.8	10.2	2,625	21.9	11.0
5–9 years	2,868	24.5	8.5	2,935	24.4	8.8
10–14 years	3,513	30	9.3	3,459	28.8	9.1
15–17 years	2,292	19.6	10.7	2,364	19.7	10.6
Gender						
Male	6,779	58	10.8	7,079	58.9	11.2
Female	4,913	42	8.2	4,932	41.1	8.2
Cause						
Accidental falls	4,499	38.5	3.7	4,442	37.0	3.6
Accidents caused by objects	1,821	15.6	1.5	2,007	16.7	1.6
Transport accidents	748	6.4	0.6	835	7.0	0.7
Drowning, submersion, other accidental threats to breathing and foreign bodies	570	4.9	0.5	555	4.6	0.5
Intentional self-harm	785	6.7	0.6	678	5.6	0.6
Accident, not otherwise specified	551	4.7	0.4	554	4.6	0.4
Accidental poisoning	235	2	0.2	297	2.5	0.2
Assault	104	0.9	0.1	118	1.0	0.1
Contact with heat or hot substances	113	1	0.1	153	1.3	0.1
Event of undetermined intent	55	0.5	0	60	0.5	0.0
Exposure to smoke, fire and flames	14	0.1	0	20	0.2	0.0
Other external causes of injury	2,191	18.7	1.8	2,290	19.1	1.9
External cause not reported	< 5	NA	NA	< 5	NA	NA

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

Source: Hospital In-patient Enquiry, Healthcare Pricing Office



- Overall, there were 9.8 hospital discharges of children residing in Ireland with a principal diagnosis of “injury, poisoning, and certain other consequences of external causes” per 1,000 total children in 2024. Rates ranged from 7.6 per 1,000 in Cork to 13.2 per 1,000 in both Donegal and Laois (see *Table 68*).

Table 68. Number and rate (per 1,000) of hospital discharges of children with a principal diagnosis of “injury, poisoning and certain other consequences of external causes”, by county of residence (2023-2024)

	2023		2024	
	No.	Rate	No.	Rate
State	11,592	9.5	11,893	9.8
County of residence				
Carlow	155	10.4	188	12.6
Cavan	243	11.4	253	11.8
Clare	362	11.8	320	10.5
Cork	1007	7.4	1040	7.6
Donegal	583	14.1	546	13.2
Dublin	2,616	8.2	2,880	9.0
Galway	627	9.7	693	10.7
Kerry	385	11.0	387	11.1
Kildare	583	9.1	561	8.7
Kilkenny	246	9.6	250	9.8
Laois	272	11.0	325	13.2
Leitrim	76	8.8	68	7.8
Limerick	547	11.5	511	10.7
Longford	103	8.7	111	9.4
Louth	357	10.1	319	9.0
Mayo	341	10.7	343	10.7
Meath	540	9.0	524	8.7
Monaghan	176	10.2	161	9.4
Offaly	249	12.0	235	11.3
Roscommon	172	10.1	158	9.3
Sligo	215	13.3	188	11.6
Tipperary	497	12.3	493	12.2
Waterford	275	9.2	297	10.0
Westmeath	279	11.7	295	12.4
Wexford	395	10.0	444	11.3
Wicklow	291	7.5	303	7.8

Notes: Rates calculated using county population at Census 2022. State total is different to overall total due to some non-residents being counted in the total figure.

Source: Hospital In-patient Enquiry, Healthcare Pricing Office



Nutritional outcomes

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

- In 2022, 75.3% of first-class children were classified as being in the “normal” weight category according to the International Obesity Taskforce Standards. 17.2% were classified as either “overweight” or “obese”, an increase since 2018 (see *Table 69*).
- 76.8% of boys were classified as being in the “normal” weight category, compared to 73.8% of girls. 15.4% of boys and 18.9% of girls were classified as being either “overweight” or “obese” (see *Table 69*).

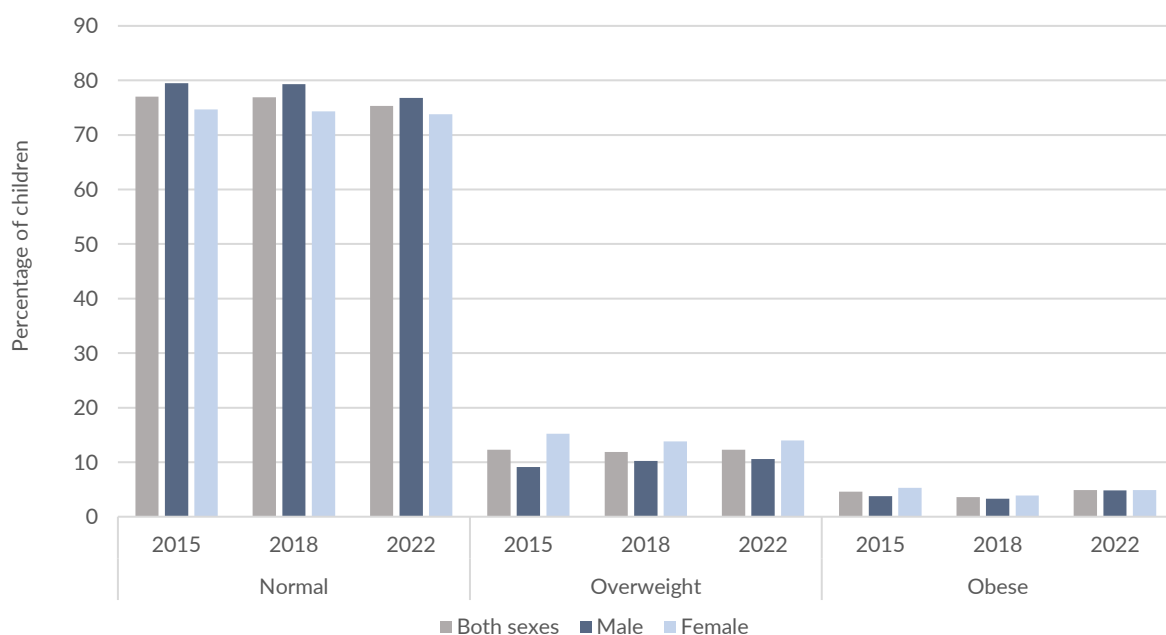
Table 69. Percentage of first-class children in BMI categories “normal”, “overweight”, and “obese”, by gender (2015–2022)

	2015			2018			2022		
	Normal	Overweight	Obese	Normal	Overweight	Obese	Normal	Overweight	Obese
Total	77.0	12.3	4.6	76.9	11.9	3.6	75.3	12.3	4.9
Gender									
Male	79.5	9.1	3.8	79.3	10.2	3.3	76.8	10.6	4.8
Female	74.7	15.2	5.3	74.3	13.8	3.9	73.8	14.0	4.9

Source: Childhood Obesity Surveillance Initiative

- The percentage of first-class children classified in the “normal” weight category decreased, from 77.0% in 2015 to 75.3% in 2022.

Figure 15. Percentage of first-class children in BMI categories “normal”, “overweight”, and “obese”, by gender (2015–2022)



Source: Childhood Obesity Surveillance Initiative



Intellectual disability

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

Note: there was a change to data collection in 2022 resulting in an increase of registrations, see the appendix for more details. In relation to 2023 data, due to the rolling out of a new IT system, the HSE were not able to provide the NASS with data on children attending the HSE's Children Disability Network Teams for 2023, therefore the number of child registrations on NASS is incomplete for 2023 and cannot be reported in SONC.

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

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

	2020			2021			2022		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	9,592	100	7.9	8,969	100	7.4	8,826	100	7.2
Age									
Under 5 years	654	6.8	2.1	495	5.5	1.6	440	5.0	1.5
5–9 years	2,558	26.7	7.3	2,235	24.9	6.5	2,145	24.3	6.3
10–14 years	4,017	41.9	11.3	3,932	43.8	10.8	3,864	43.8	10.3
15–17 years	2,363	24.6	11.9	2,307	25.7	11.6	2,377	26.9	11.5
Gender									
Male	6,451	67.3	10.4	6,012	67.0	9.7	5,914	67.0	9.5
Female	3,137	32.7	5.3	2,954	32.9	5.0	2,888	32.7	4.9
Not known	NA			NA			24	0.3	
Severity									
Borderline	315	3.3	0.3	267	3.0	0.2	253	2.9	0.2
Mild	2,439	25.4	2.0	2,231	24.9	1.8	2,140	24.2	1.8
Moderate	2,626	27.4	2.2	2,446	27.3	2.0	2,603	29.5	2.1
Severe	683	7.1	0.6	645	7.2	0.5	641	7.3	0.5
Profound	133	1.4	0.1	115	1.3	0.1	113	1.3	0.1
Not verified	3,396	35.4	2.8	3,265	36.4	2.7	3,076	34.9	2.5

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

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

Source: National Ability Support System (NASS)



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

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

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

Rates calculated using administrative county population at Census 2022

Source: National Ability Support System (NASS)



Physical and sensory disability

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

Note: there was a change to data collection in 2022 resulting in an increase of registrations, see the appendix for more details. In relation to 2023 data, due to the rolling out of a new IT system, the HSE were not able to provide the NASS with data on children attending the HSE's Children Disability Network Teams for 2023, therefore the number of child registrations on NASS is incomplete for 2023 and cannot be reported in SONC.

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

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

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

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

Source: National Ability Support System



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

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

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

Rates calculated using administrative county population at Census 2022

Source: National Ability Support System



Child welfare and protection

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

- In 2024 Q4, there were 26,074 child welfare and protection referrals to Tusla, the Child and Family Agency (see *Table 74*).
- 61% of these referrals related to welfare concerns (see *Table 74*).
- Overall, there was a 49.1% increase in referrals across the period between 2020 Q4 and 2024 Q4 (see *Table 74*).

Table 74. Number, percentage and rate (per 1,000) of child welfare and protection referrals to Tusla, by type of referral (2019 Q4 – 2024 Q4)

	2019 Q4	2020 Q4	2021 Q4	2022 Q4	2023 Q4	2024 Q4		
	No.	No.	No.	No.	No.	No.	%	Rate
Total	12,623	17,485	19,580	21,473	22,752	26,074	100%	21.4
Type of referral								
Welfare issues	7,148	8,529	10,483	11,975	13,692	15,915	61%	13.1
Physical abuse	1,609	1,808	1,878	2,026	2,255	2,706	10%	2.2
Emotional abuse	2,080	2,525	2,959	3,243	3,874	4,401	17%	3.6
Sexual abuse	861	1,072	1,159	1,314	1,347	1,438	6%	1.2
Neglect	925	720	1,006	1,039	1,360	1,480	6%	1.2
Not recorded	NA	2,831	2,095	1,876	224	134	1%	0.1

Rates calculated using population aged 0-17 at Census 2022

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

Source: Tusla, the Child and Family Agency



- There were 21.4 referrals per 1,000 children in Q4 2024. Rates ranged from 9.7 per 1,000 in Mayo to 32.3 per 1,000 in the Midlands (see *Table 75*).

Table 75. Number and rate (per 1,000) of child welfare and protection referrals to Tusla, by administrative area (2022 Q4–2024 Q4)

	2022 Q4		2023 Q4		2024 Q4	
	No.	Rate	No.	Rate	No.	Rate
All Tusla regions	21,437	17.6	22,752	18.7	26,074	21.4
Tusla Dublin North East	5,656	19.7	6,086	21.2	6,796	23.7
Cavan/Monaghan	595	15.9	723	19.4	845	22.6
Dublin North	2,097	20.1	2,205	21.1	2,458	23.6
Dublin North City	1,325	27.1	1,344	27.5	1,456	29.8
Louth/Meath	1,639	17.0	1,814	18.8	2,037	21.1
Tusla Dublin Mid Leinster	6,607	18.8	7,374	21.0	8,288	23.6
Dublin South Central	1,654	23.5	1,911	27.2	2,032	28.9
Dublin South East/ Wicklow	819	9.0	925	10.2	1,075	11.8
Dublin South West/Kildare/West Wicklow	2,095	19.2	2,296	21.1	2,567	23.6
Midlands	2,039	25.2	2,242	27.7	2,614	32.3
Tusla South	5,180	17.1	5,380	17.7	6,141	20.2
Carlow/Kilkenny/South Tipperary	952	15.3	1,141	18.3	1,204	19.3
Cork	1,992	14.6	2,216	16.2	2,403	17.6
Kerry	619	17.7	566	16.2	651	18.6
Waterford/Wexford	1,617	23.4	1,457	21.0	1,883	27.2
Tusla West	3,994	14.4	3,912	14.1	4,849	17.5
Donegal	574	13.6	597	14.2	851	20.2
Galway/Roscommon	1,009	12.3	1,010	12.3	1,277	15.6
Mayo	424	13.3	318	10.0	309	9.7
Mid West	1,651	17.1	1,632	16.9	1,980	20.5
Sligo/Leitrim/West Cavan	336	13.8	355	14.6	432	17.8

Rates calculated using regional populations at Census of Population 2022.

Note: Since 2020, the number of referrals also includes cases not requiring a social work response (type "Not recorded")

Source: Tusla, the Child and Family Agency

Social, Emotional, and Behavioural Outcomes



Participation in decision-making

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

- In 2022, 26.8% of children aged 10–17 reported that students at their school participate in making the school rules. This decreased between 2018 and 2022 (see *Table 76*).
- Among individual population groups, when compared to all other children, immigrant children were less likely to report students at their school participate in making the school rules (see *Table 76*).

Table 76. Percentage of children aged 10–17 who reported that students at their school participate in making the school rules, by population group (2014–2022)

	2014	2018	2022
All children	35.5	32.6	26.8
Traveller status			
Traveller children	47.7	40.0	34.2
All children except Traveller children	35.2	32.4	26.5
Immigrant status			
Immigrant children	31.2	33.2	24.6
All children except immigrant children	36.2	28.3	26.9
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	35.3	31.1	25.7
All children except those with a disability and/or chronic illness	35.5	33.1	27.2

Source: HBSC Survey

- In 2022, a slightly higher percentage of males than females reported that students at their school participate in making the school rules (see *Table 77*).
- In 2018, the percentage of children who reported that students at their school participate in making the school rules decreased with age. In 2022, this trend occurred only among those aged 11–16. (see *Table 77*).
- The percentage of children who reported that students at their school participate in making the school rules was similar for all social class groups in 2022 (see *Table 77*).



Table 77. Percentage of children aged 10–17 who reported that students at their school participate in making the school rules, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	31.9	33.4	32.6	27.5	26.0	26.8
Age						
10 years	45.6	48.7	47.1	30.0	29.5	29.8
11 years	39.9	46.5	43.0	37.3	33.5	35.3
12 years	35.2	43.2	39.2	30.0	31.3	30.7
13 years	30.0	33.4	31.8	28.6	33.1	30.7
14 years	23.8	23.1	23.4	27.8	23.1	25.4
15 years	18.9	16.2	17.4	24.7	22.3	23.6
16 years	15.2	14.8	15.0	21.6	18.1	19.8
17 years	12.5	14.4	13.5	23.1	18.6	20.8
Social class						
High	30.5	32.1	31.4	26.2	25.2	25.7
Middle	32.7	32.6	32.6	28.5	26.4	27.5
Low	33.6	35.3	34.5	23.4	28.7	26.1

Source: HBSC Survey

- The percentage of children who reported that students at their school participate in making the school rules ranged from 21.9% in the Border and West regions to 30.9% in the Mid-East (see *Table 78*).

Table 78. Percentage of children aged 10–17 who reported that students at their school participate in making the school rules, by NUTS region (2014–2022)

	2014	2018	2022
State	35.5	32.6	26.8
NUTS region			
Border	33.4	28.1	21.9
Midland	33.0	30.9	24.7
West	32.9	31.0	21.9
Dublin	36.7	32.6	27.0
Mid-East	37.6	31.6	30.9
Mid-West	33.2	31.3	24.5
South-East	37.3	33.5	30.0
South-West	36.2	37.0	29.0

Source: HBSC Survey



Reading as a leisure activity

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

- In 2022, 35.8% of children aged 15 reported that reading is one of their favourite hobbies, an increase from 2018 (see *Table 79*).
- 46.6% of immigrant children aged 15 reported that reading is one of their favourite hobbies, compared to 33.8% for non-immigrant children (see *Table 79*).

Table 79. Percentage of children aged 15 who reported that reading is one of their favourite hobbies, by population group (2018-2022)

	2018	2022
All children	30.8	35.8
Immigrant status		
Immigrant children	40.2	46.6
All children except immigrant children	28.8	33.8

Source: OECD-Pisa Survey

- 47.7% of girls aged 15 reported that reading is one of their favourite hobbies, compared with 23.8% of boys (see *Table 80*).
- The percentage reporting that reading is one of their favourite hobbies increased with socioeconomic status, 40.8% of children in the high socio-economic status category reported that reading is one of their favourite hobbies, compared to 31.0% for children in the low socioeconomic status group (see *Table 80*).

Table 80. Percentage of children aged 15 who reported that reading is one of their favourite hobbies, by gender and social class (2006-2022)

	2006	2009	2012	2018	2022
All children	42.6	31.7	38.6	30.8	35.8
Gender					
Male	32.7	23.4	30.0	22.1	23.8
Female	52.0	40.2	47.3	39.3	47.7
Social class					
High	50.0	39.2	46.3	38.5	40.8
Medium	41.8	31.7	37.6	28.6	35.3
Low	36.5	25.3	31.6	25.2	31.0

Source: OECD-Pisa Survey



Smoking cigarettes: Weekly smoking

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

- In 2022, 2.4% of children aged 10–17 reported smoking cigarettes every week. This has remained stable between 2018 and 2022 (see *Table 81*).
- Among individual population groups, when compared to all other children, Traveller children and children with a disability or chronic illness were more likely to report smoking cigarettes every week across all years examined. Immigrant children were more likely to smoke cigarettes in 2018 but not in 2022. (see *Table 81*).
- Traveller children remained the population group with the highest percentage who reported smoking cigarettes every week at 12.5% in 2022 (see *Table 81*).

Table 81. Percentage of children aged 10–17 who reported smoking cigarettes every week, by population group (2014–2022)

	2014	2018	2022
All children	5.3	2.4	2.4
Traveller status			
Traveller children	11.4	9.1	12.5
All children except Traveller children	5.2	2.2	2.1
Immigrant status			
Immigrant children	5.2	4.2	2.0
All children except immigrant children	5.3	2.2	2.4
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	6.9	3.1	4.0
All children except those with a disability and/or chronic illness	4.9	2.2	1.8

Source: HBSC Survey

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



Table 82. Percentage of children aged 10–17 who reported smoking cigarettes every week, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	2.6	2.3	2.4	2.6	2.1	2.4
Age						
10 years	2.8	2.3	0.3	*	*	*
11 years	3.6	2.3	0.4	*	*	*
12 years	3.1	3.0	0.5	*	*	*
13 years	3.0	2.1	1.1	1.1	1.0	1.1
14 years	2.7	2.5	2.9	2.0	2.2	2.1
15 years	3.2	3.0	5.5	4.2	3.8	4.0
16 years	1.9	2.0	8.2	5.6	3.6	4.5
17 years	2.2	2.2	7.7	6.1	4.8	5.4
Social class						
High	1.9	1.4	1.6	1.2	1.0	1.1
Middle	2.4	2.3	2.3	1.6	2.5	2.0
Low	3.8	3.0	3.4	4.6	*	3.6

Source: HBSC Survey

* indicates cells with less than 5 responses

- The percentage of children who reported smoking cigarettes every week ranged from 1.9% in the Mid-East and Mid-West to 3.6% in the Border region (see Table 83).

Table 83. Percentage of children aged 10–17 who reported smoking cigarettes every week, by NUTS region (2014–2022)

	2014	2018	2022
State	5.3	2.4	2.4
NUTS region			
Border	6.5	2.6	3.6
Midland	5.7	2.9	*
West	4.5	3.0	2.2
Dublin	5.6	2.5	2.8
Mid-East	5.2	2.6	1.9
Mid-West	3.7	3.1	1.9
South-East	5.1	2.0	2.3
South-West	5.2	2.2	2.8

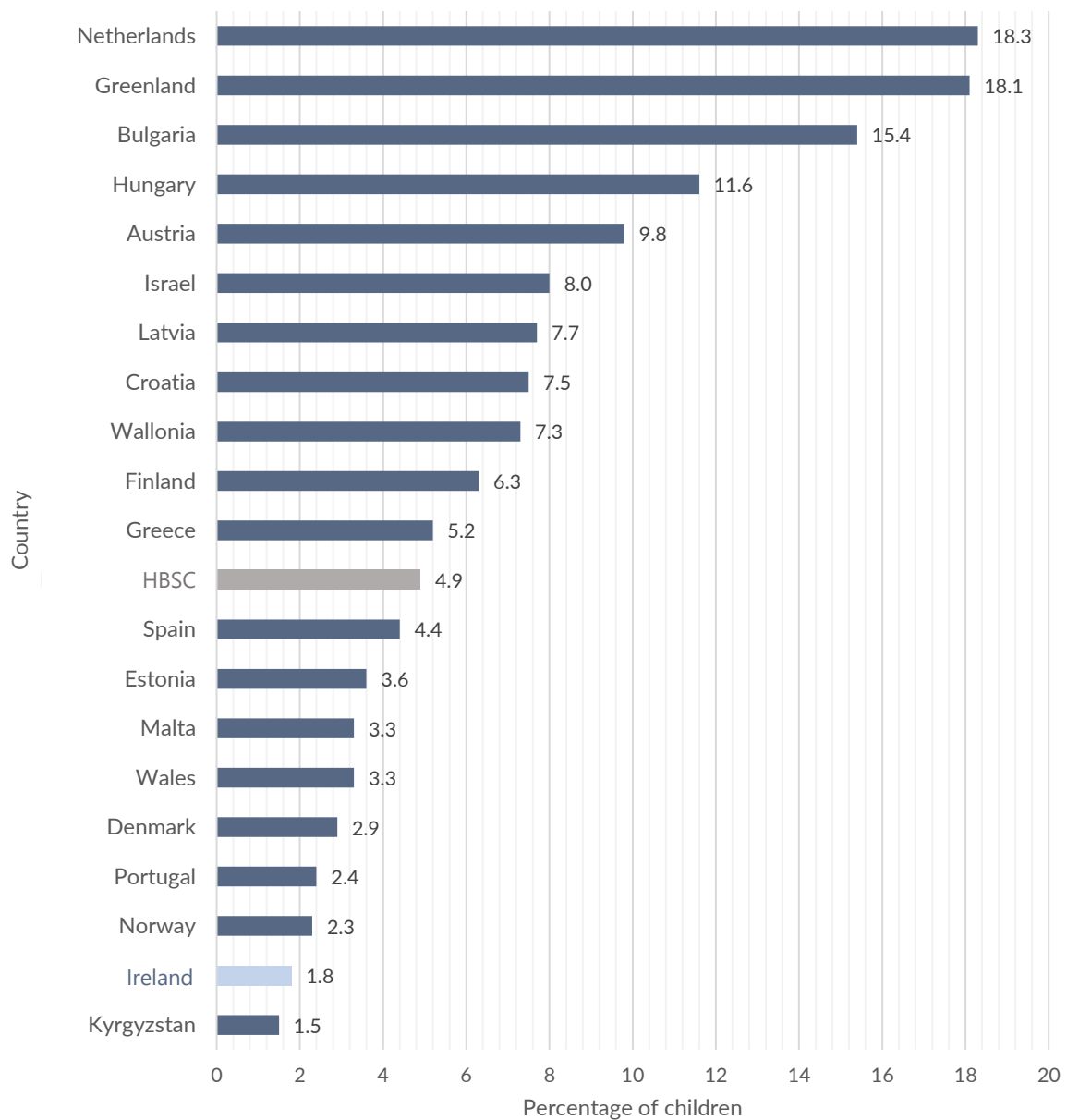
Source: HBSC Survey

* indicates cells with less than 5 responses



- Across 20 countries/regions, the average percentage of children who reported smoking cigarettes every week was 4.9% (see *Figure 16*). This ranged from 1.5% in Kyrgyzstan to 18.3% in the Netherlands. The corresponding percentage in Ireland was second lowest at 1.8%. This was below the international HBSC average, and a decrease from the latest data in 2014.

Figure 16. Percentage of children aged 11, 13, and 15 who reported smoking cigarettes every week, by country (2022) 



Source: HBSC Survey



Smoking cigarettes: Never smoking

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

- In 2022, 90.7% of children aged 10–17 reported never having smoked cigarettes. This marks a slight increase between 2018 and 2022 (see *Table 84*).
- Among individual population groups, when compared to all other children, Traveller children and children with a disability and/or chronic illness were less likely to report never having smoked cigarettes (see *Table 84*).
- In 2022, Traveller children were the population group with the lowest percentage who reported never having smoked cigarettes at 81.1% and immigrant children had the highest percentage at 92.5% (see *Table 84*).

Table 84. Percentage of children aged 10–17 who reported never having smoked cigarettes, by population group (2014–2022)

	2014	2018	2022
All children	84.2	89.4	90.7
Traveller status			
Traveller children	75.1	84.5	81.1
All children except Traveller children	84.4	89.5	90.8
Immigrant status			
Immigrant children	83.0	84.2	92.5
All children except immigrant children	84.5	90.1	90.5
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	82.1	86.1	86.9
All children except those with a disability and/or chronic illness	84.8	90.2	92.1

Source: HBSC Survey

- In 2022, a slightly lower percentage of females than males reported never having smoked cigarettes (see *Table 85*).
- On average, the percentage of children who reported never having smoked cigarettes tends to decrease with age. In 2022, the decrease started from age 11 (see *Table 85*).
- The percentage of children who reported never having smoked cigarettes did not vary greatly between social class groups (see *Table 85*).



Table 85. Percentage of children aged 10–17 who reported never having smoked cigarettes, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	89.5	89.3	89.4	91.6	89.7	90.7
Age						
10 years	100	100	100	97.9	100	98.8
11 years	98.4	99.7	99.0	98.8	99.6	99.2
12 years	98.0	98.9	98.4	98.8	99.3	99.1
13 years	94.4	96.0	95.3	96.9	97.2	97.0
14 years	91.0	89.6	90.3	94.7	91.3	93.0
15 years	83.0	81.8	82.3	87.7	85.8	86.8
16 years	74.2	73.6	73.8	82.6	75.6	79.0
17 years	66.1	68.2	67.2	76.0	73.4	74.7
Social class						
High	89.7	89.5	89.6	93.2	90.9	92.0
Middle	90.0	89.8	89.9	92.6	90.9	91.8
Low	87.7	88.4	88.0	93.4	89.8	91.5

Source: HBSC Survey

- The percentage of children who reported never having smoked cigarettes ranged from 88.4% in the Mid-West to 91.7% in the South-East (see Table 86).

Table 86. Percentage of children aged 10–17 who reported never having smoked cigarettes, by NUTS region (2014–2022)

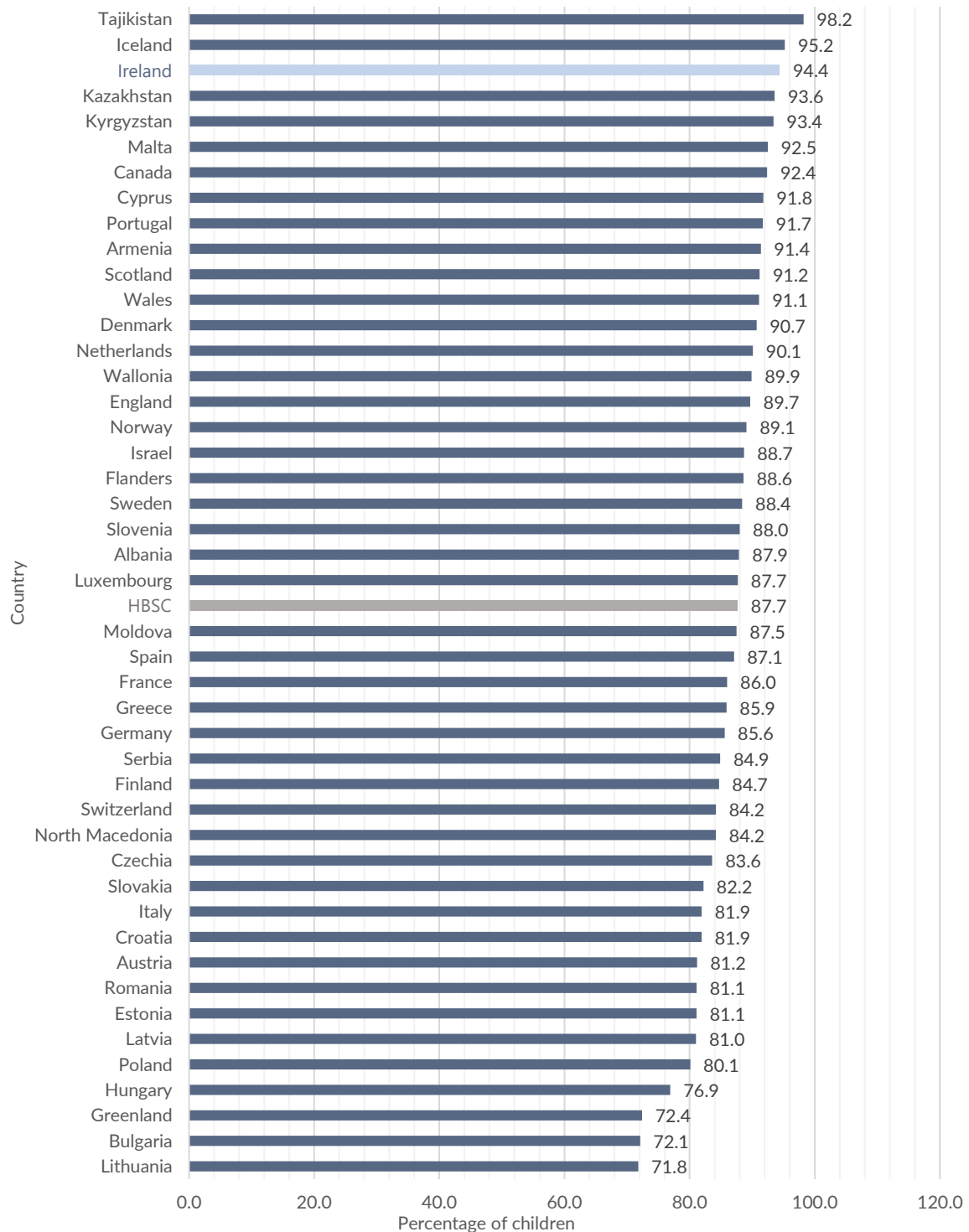
	2014	2018	2022
State	84.2	89.4	90.7
NUTS region			
Border	83.0	89.8	90.0
Midland	83.1	88.4	91.4
West	84.6	89.3	91.4
Dublin	83.7	90.5	90.6
Mid-East	84.4	91.4	90.8
Mid-West	88.5	88.4	88.4
South-East	83.1	85.0	91.7
South-West	84.8	87.0	91.5

Source: HBSC Survey



- Across 45 countries/regions, the average percentage of children who reported never having smoked cigarettes was 87.7% (see Figure 17). This ranged from 71.8% in Lithuania to 98.2% in Tajikistan. The corresponding percentage in Ireland was 94.4%. This was above the international HBSC average and the third highest result.

Figure 17. Percentage of children aged 11, 13, and 15 who reported never having smoked cigarettes, by country (2022)



Source: HBSC Survey



Alcohol use: Drunkenness

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

- In 2022, 8.7% of children aged 10–17 reported having been drunk at least once in the past 30 days. This increased slightly between 2018 and 2022 (see *Table 87*).
- Among individual population groups, when compared to all other children, Traveller children and children with a disability and/or chronic illness were more likely to report having been drunk at least once in the past 30 days across all years examined (see *Table 87*).
- In 2022, immigrant children were less like to report having been drunk in the past 30 days than children on average (see *Table 87*).
- Traveller children were the population group with the highest percentage who reported having been drunk at least once in the past 30 days (see *Table 87*).

Table 87. Percentage of children aged 10–17 who reported having been drunk at least once in the past 30 days, by population group (2014–2022)

	2014	2018	2022
All children	10.0	6.9	8.7
Traveller status			
Traveller children	16.8	12.9	18.0
All children except Traveller children	9.9	6.8	8.6
Immigrant status			
Immigrant children	8.9	7.2	5.4
All children except immigrant children	10.2	6.8	9.0
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	11.6	8.4	10.9
All children except those with a disability and/or chronic illness	9.6	6.5	7.6

Source: HBSC Survey

- Females were more likely than males to report having been drunk at least once in the past 30 days (see *Table 88*).
- On average, the percentage of children who reported having been drunk at least once in the past 30 days increased with age (see *Table 88*).
- The percentage of children who reported having been drunk at least once in the past 30 days was slightly higher among the low and high social class groups in 2022 (see *Table 88*).



Table 88. Percentage of children aged 10–17 who reported having been drunk at least once in the past 30 days, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	6.9	6.9	6.9	7.2	10.3	8.7
Age						
10 years	0.0	0.0	0.0	*	*	*
11 years	0.4	0.1	0.0	*	*	*
12 years	0.3	0.4	0.0	*	*	0.6
13 years	1.9	1.4	1.7	1.7	2.6	2.1
14 years	4.2	4.3	4.2	2.3	4.9	3.6
15 years	10.1	10.4	10.3	6.7	10.8	8.5
16 years	19.4	19.0	19.2	16.4	26.4	21.6
17 years	32.3	29.0	30.6	33.0	36.9	35.0
Social class						
High	7.2	6.6	6.8	6.1	9.9	8.0
Middle	5.7	7.3	6.6	6.3	9.4	7.8
Low	7.7	7.2	7.4	5.7	10.5	8.1

Source: HBSC Survey

* indicates cells with less than 5 responses

- The percentage of children who reported having been drunk at least once in the past 30 days ranged from 7.8% in Dublin and the Mid-East to 10.4% in the Mid-West (see Table 89).

Table 89. Percentage of children aged 10–17 who reported having been drunk at least once in the past 30 days, by NUTS region (2014–2022)

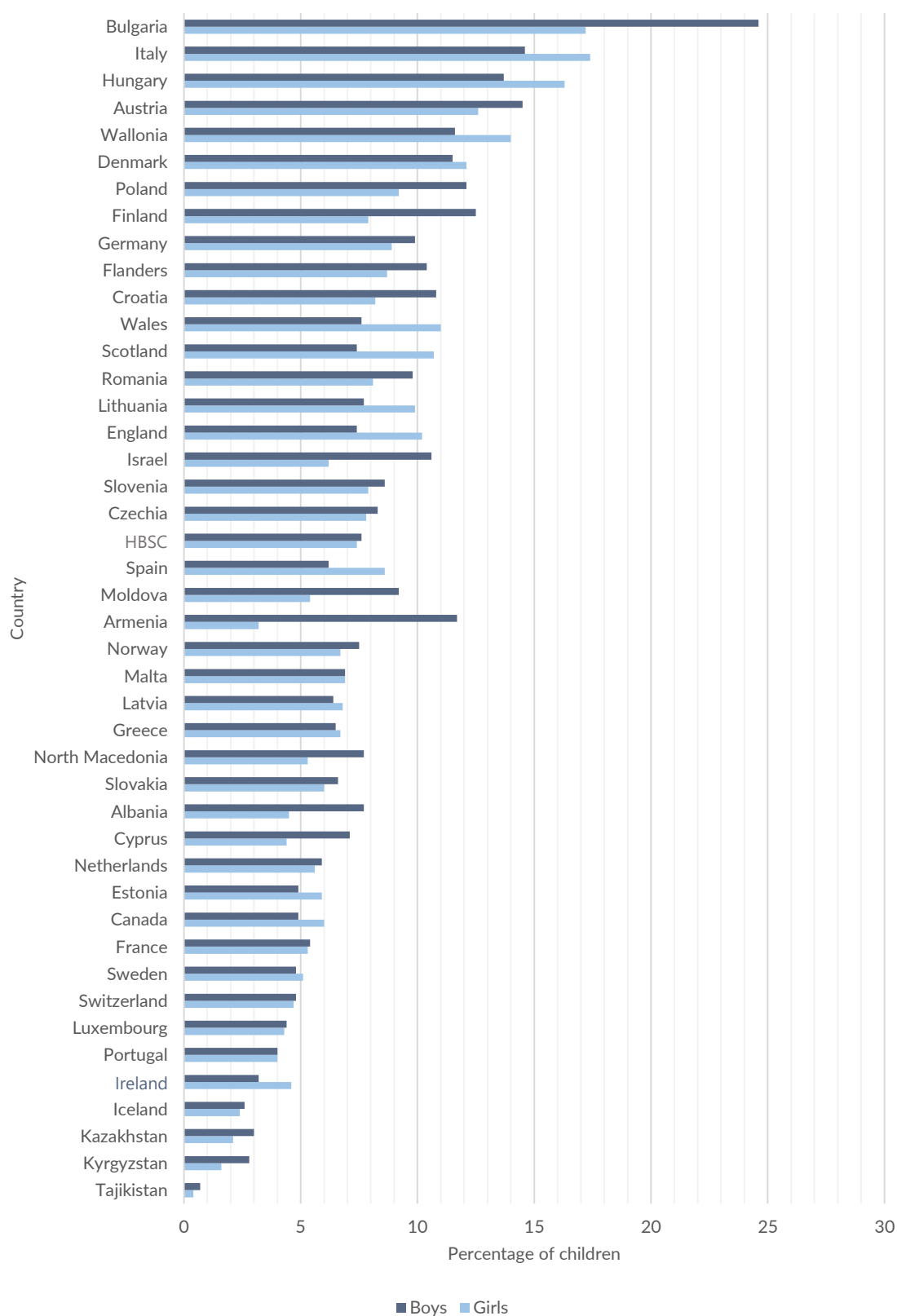
	2014	2018	2022
State	10.0	6.9	8.7
NUTS region			
Border	12.1	8.5	9.6
Midland	7.2	5.9	9.7
West	9.5	5.7	9.1
Dublin	11.4	7.1	7.8
Mid-East	8.9	5.1	7.8
Mid-West	11.3	6.3	10.4
South-East	10.5	9.0	9.6
South-West	7.3	9.3	8.3

Source: HBSC Survey

- Across 43 countries/regions, the average percentage of children who reported having been drunk at least once in the past 30 days was 7.6% for boys and 7.4% for girls (see Figure 18). This ranged from 0.7% and 0.4% for boys and girls, respectively, in Tajikistan, to 24.6% and 17.2%, respectively, in Bulgaria. The corresponding percentages in Ireland were 3.2% for boys and 4.6% for girls. This was below the international HBSC average and fifth lowest of the countries presented.



Figure 18. Percentage of children aged 11, 13, and 15 who reported having been drunk in the last 30 days, by country (2022) 



Source: HBSC Survey



Alcohol use: Never drinking

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

- In 2022, 69.1% of children aged 10–17 reported never having had an alcoholic drink. This remained stable between 2018 and 2022 (see *Table 90*).
- Among individual population groups, when compared to all other children, children with a disability and/or chronic illness were less likely to report never having had an alcoholic drink across all years examined (see *Table 90*).
- In 2022, immigrant children were the population group with the highest percentage who reported never having had an alcoholic drink at 75% (see *Table 90*).

Table 90. Percentage of children aged 10–17 who reported never having had an alcoholic drink, by population group (2014–2022)

	2014	2018	2022
All children	58.4	69.4	69.1
Traveller status			
Traveller children	60.4	74.7	67.2
All children except Traveller children	58.4	69.3	68.8
Immigrant status			
Immigrant children	56.6	63.9	75.0
All children except immigrant children	58.7	70.3	68.5
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	54.6	64.1	67.2
All children except those with a disability and/or chronic illness	59.3	70.8	70.0

Source: HBSC Survey

- A lower percentage of females than males reported never having had an alcoholic drink (see *Table 91*).
- On average, the percentage of children who reported never having had an alcoholic drink decreased with age. In 2022, the decrease started from age 11 (see *Table 91*).
- The percentage of children who reported never having had an alcoholic drink was lowest among the high social class group (see *Table 91*).



Table 91. Percentage of children aged 10–17 who reported never having had an alcoholic drink, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	69.1	69.8	69.4	70.6	67.5	69.1
Age						
10 years	92.8	98.9	95.8	90.4	97.1	93.3
11 years	90.4	96.9	93.5	93.7	96.5	95.1
12 years	88.9	93.9	91.4	90.1	92.5	91.3
13 years	83.0	85.9	84.6	86.4	85.3	85.9
14 years	69.3	69.6	69.5	76.7	72.2	74.5
15 years	50.3	51.2	50.8	61.4	56.0	58.9
16 years	31.7	30.9	31.3	46.7	30.5	38.4
17 years	22.9	16.4	19.5	22.9	22.2	22.6
Social class						
High	68.0	69.1	68.6	69.7	67.7	68.7
Middle	69.3	69.9	69.6	72.7	70.0	71.4
Low	68.8	70.5	69.7	74.8	71.0	72.8

Source: HBSC Survey

- The percentage of children who reported never having had an alcoholic drink ranged from 62.5% in the Mid-West to 71.2% in the West (see *Table 92*).

Table 92. Percentage of children aged 10–17 who reported never having had an alcoholic drink, by NUTS region (2014–2022)

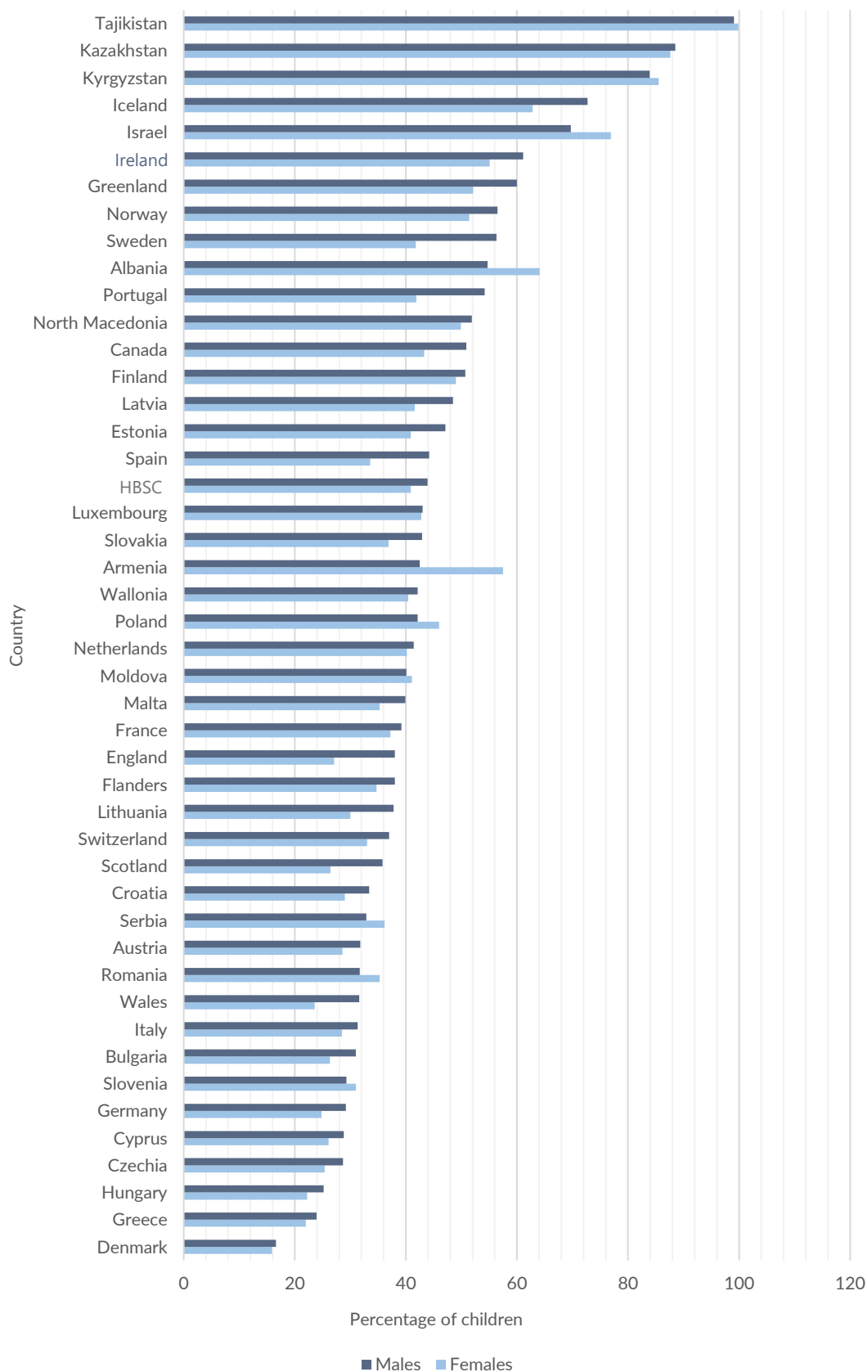
	2014	2018	2022
State	58.4	69.4	69.1
NUTS region			
Border	59.3	67.6	66.6
Midland	54.9	67.0	70.5
West	58.4	66.9	71.2
Dublin	57.8	70.4	70.9
Mid-East	57.9	66.8	69.5
Mid-West	59.5	61.2	62.5
South-East	54.0	70.9	68.3
South-West	63.5	75.1	70.5

Source: HBSC Survey

- Across 45 countries/regions, the average percentage of children who reported never having had an alcoholic drink was 43.9% for boys and 40.9% for girls (see *Figure 19*). This ranged from 16.6% for boys and 15.9% for girls in Denmark, to 99.1% and 99.9% for boys and girls, respectively, in Tajikistan. The corresponding percentage in Ireland was 61.1% for boys and 55.1% for girls. This was above the international HBSC average.



Figure 19. Percentage of children aged 15 who reported never having had an alcoholic drink, by country (2022)



Source: HBSC Survey



Cannabis use

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

- In 2022, 7.1% of children aged 10–17 reported having taken cannabis at least once in their lifetime. This has remained stable between 2018 and 2022 (see *Table 93*).
- Among individual population groups, when compared to all other children, Traveller children and children with a disability and/or chronic illness were more likely to report having taken cannabis at least once in their lifetime across all years examined (see *Table 93*).
- Traveller children were the population group with the highest percentage who reported having taken cannabis at least once in their lifetime (see *Table 93*).
- Immigrant children had higher percentages of cannabis use in 2014 and 2018 compared to all other children, but the percentage has dropped in 2022 (see *Table 93*).

Table 93. Percentage of children aged 10–17 who reported having taken cannabis at least once in their lifetime by population group (2014–2022)

	2014	2018	2022
All children	8.8	7.8	7.1
Traveller status			
Traveller children	18.2	12.0	19.5
All children except Traveller children	8.6	7.7	6.8
Immigrant status			
Immigrant children	10.9	12.0	6.8
All children except immigrant children	8.4	7.1	7.1
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	10.1	10.0	10.1
All children except those with a disability and/or chronic illness	8.5	7.2	5.7

Source: HBSC Survey

- A slightly lower percentage of females than males reported having taken cannabis at least once in their lifetime (see *Table 94*).
- On average, the percentage of children who reported having taken cannabis at least once in their lifetime increased with age (see *Table 94*).
- In 2022, the percentage of children who reported having taken cannabis at least once in their lifetime was similar across all social class groups (see *Table 94*).



Table 94. Percentage of children aged 10–17 who reported having taken cannabis at least once in their lifetime, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	8.9	6.7	7.8	7.3	6.9	7.1
Age						
10 years	0.0	0.0	0.0	*	*	*
11 years	0.3	0.0	0.2	*	*	*
12 years	0.5	0.6	0.6	1.3	*	0.8
13 years	2.8	1.2	1.9	1.8	1.1	1.5
14 years	7.0	5.2	6.0	5.5	5.1	5.3
15 years	15.7	11.2	13.2	8.5	9.2	8.8
16 years	25.0	18.5	21.5	16.6	16.8	16.7
17 years	32.6	23.4	27.9	24.3	19.6	21.9
Social class						
High	9.1	6.8	7.8	5.6	6.1	5.8
Middle	7.5	6.0	6.7	6.0	5.6	5.8
Low	9.4	6.0	7.5	5.3	6.9	6.1

Source: HBSC Survey

* indicates cells with less than 5 responses

- The percentage of children who reported having taken cannabis at least once in their lifetime ranged from 4.8% in the Midlands to 10.0% in Dublin (see Table 95).

Table 95. Percentage of children aged 10–17 who reported having taken cannabis at least once in their lifetime, by NUTS region (2014–2022)

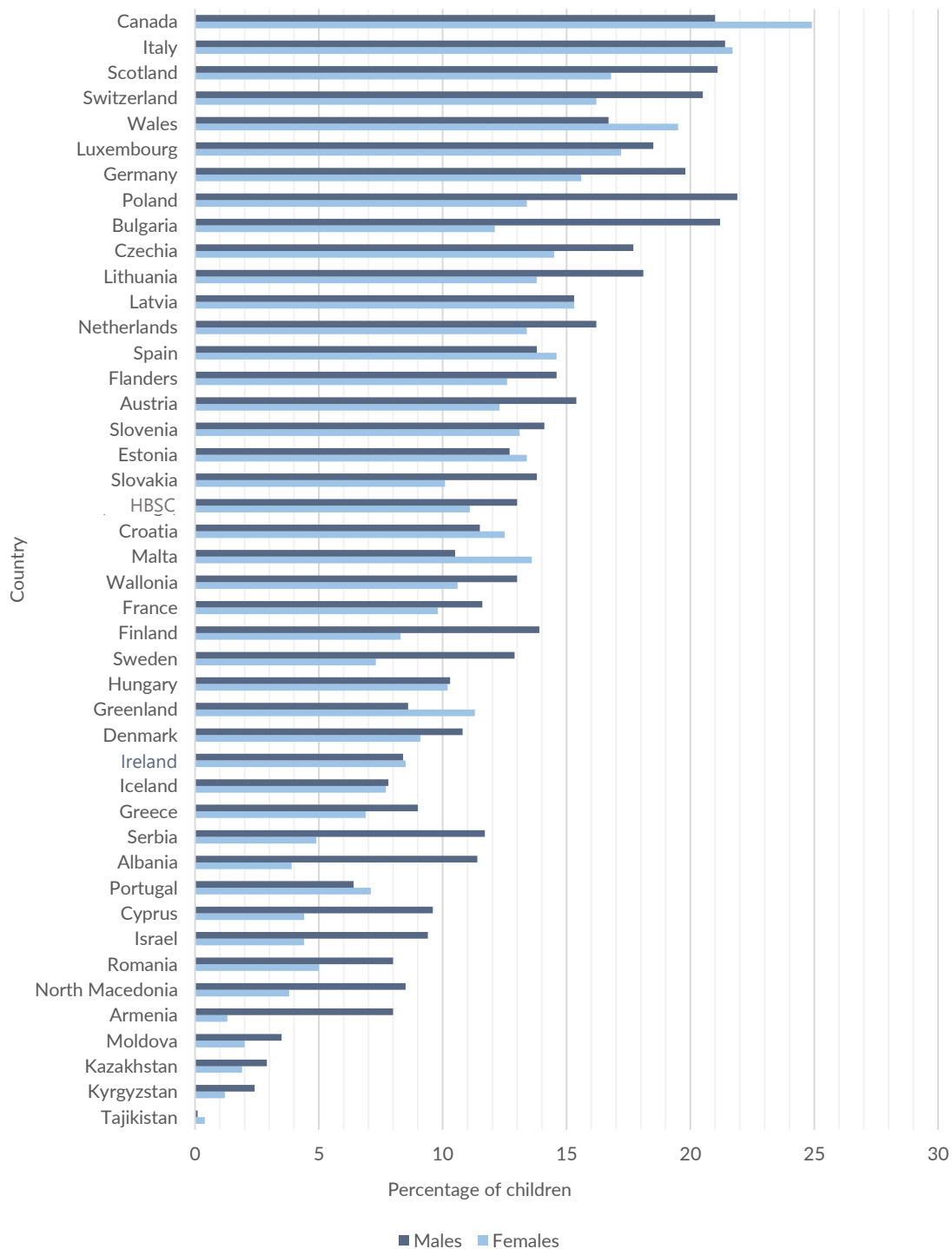
	2014	2018	2022
State	8.8	7.8	7.1
NUTS region			
Border	8.9	7.2	6.2
Midland	8.8	7.3	4.8
West	5.9	6.1	5.1
Dublin	11.2	8.8	10.0
Mid-East	10.5	7.2	7.9
Mid-West	6.7	6.1	5.5
South-East	8.8	11.3	6.1
South-West	6.5	8.4	5.9

Source: HBSC Survey



- Across 43 countries/regions, the average percentage of children who reported having taken cannabis at least once in their lifetime was 13.0% for boys and 11.1% for girls (see Figure 20). This ranged from 0.1% and 0.4%, for boys and girls respectively, in Tajikistan, to 21.0% and 24.9%, respectively, in Canada. The corresponding percentage in Ireland was 8.4% for boys and 8.5% for girls. This was below the international HBSC average.

Figure 20. Percentage of children aged 15 who reported having ever used cannabis, by country (2022)



Source: HBSC Survey



Sexual health and behaviour: Teen births

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

- In 2023, there were 147 births to mothers aged 15–17 (see *Table 96*).
- Over the ten-year period 2014 to 2023 the number of births to mothers aged 15–17 decreased by 47.5% (see *Figure 21*).

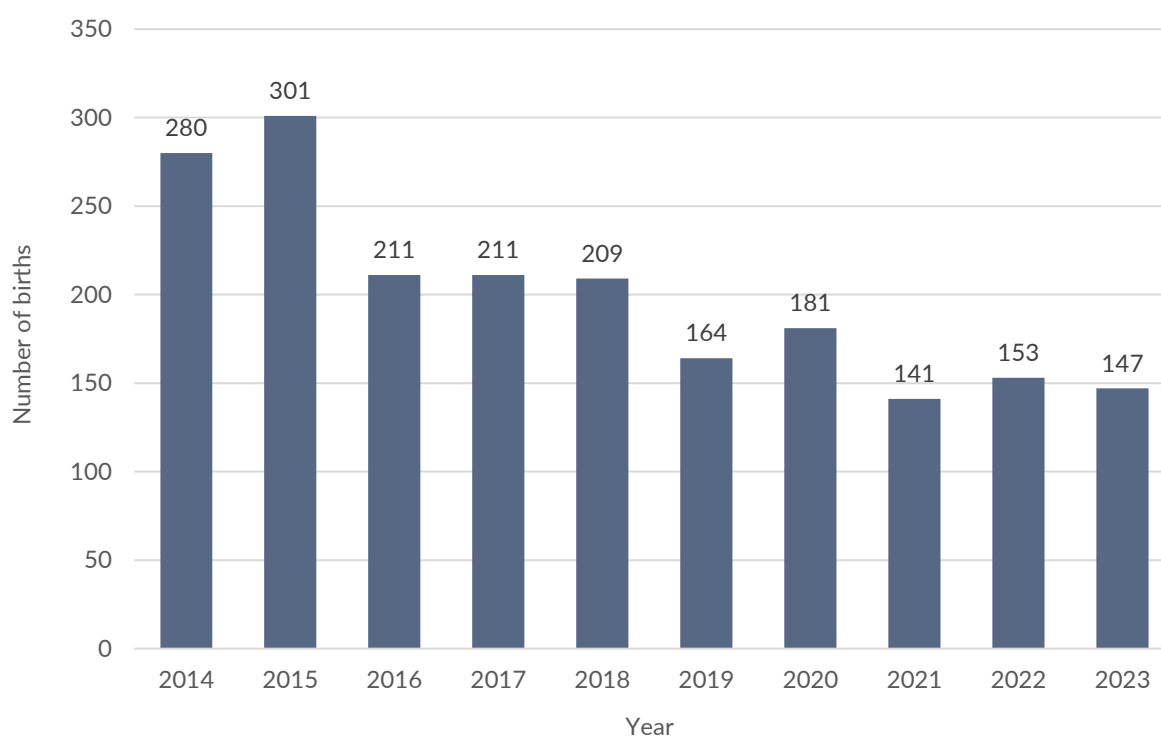
Table 96. Number and rate of births (per 1,000 of female population), by mother's age (2020–2023)

	2020		2021		2022		2023	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate
All ages 15+	56,812	27.8	60,573	29.3	54,426	25.8	54,469	25.0
Mother's age								
15–17 years	181	1.9	141	1.4	153	1.5	147	1.4
18–24 years	4,989	23.1	4,847	22.3	4,828	22.3	4,520	20.3
25 years and over	51,642	29.8	55,585	31.7	49,445	27.6	49,802	26.9

Note: Rates calculated using population estimates.

Source: Vital Statistics (CSO)

Figure 21. Number of births to mothers aged 15–17 (2014–2023)



Source: Vital Statistics (CSO)



- Overall, 2.7 births per 1,000 were to mothers aged 15–17 in 2023 (see Table 97). This rate was highest in Carlow at 6.1 per 1,000, and lowest in Roscommon, where there were no births to 15–17-year-olds in 2023.

Table 97. Number and rate (per 1,000) of births to mothers aged 15–17, by county (2023)

	No. of births to 15–17-year-olds	No. of births to all ages 15+	Rate of births to 15–17-year-olds*
State	147	54,469	2.7
County			
Carlow	4	658	6.1
Cavan	3	977	3.1
Clare	2	1,247	1.6
Cork	15	5,797	2.6
Donegal	3	1,758	1.7
Dublin	58	15,561	3.7
Galway	3	2,922	1.0
Kerry	5	1,450	3.4
Kildare	3	2,972	1.0
Kilkenny	1	1,023	1.0
Laois	3	960	3.1
Leitrim	1	331	3.0
Limerick	5	2,250	2.2
Longford	2	504	4.0
Louth	4	1,561	2.6
Mayo	2	1,388	1.4
Meath	3	2,623	1.1
Monaghan	4	738	5.4
Offaly	1	869	1.2
Roscommon	0	696	0.0
Sligo	1	706	1.4
Tipperary	6	1,744	3.4
Waterford	5	1,289	3.9
Westmeath	2	1,091	1.8
Wexford	8	1,771	4.5
Wicklow	3	1,583	1.9

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



Sexual health and behaviour: Sexual activity

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

- In 2022, 25.1% of children aged 15–17 reported having ever had sex. This remained stable between 2018 and 2022 (see *Table 98*).
- Among individual population groups, when compared to all other children, Traveller children and children with a disability and/or chronic illness were more likely to report having ever had sex across all years examined (see *Table 98*).
- Traveller children were the population group with the highest percentage who reported having ever had sex and were nearly twice as likely to have had sex than all children (see *Table 98*).

Table 98. Percentage of children aged 15–17 who reported having ever had sex, by population group (2014–2022)

	2014	2018	2022
All children	26.8	24.8	25.1
Traveller status			
Traveller children	54.7	57.1	50.1
All children except Traveller children	26.4	24.5	24.5
Immigrant status			
Immigrant children	29.1	26.2	23.2
All children except immigrant children	26.4	24.2	25.2
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	30.3	28.8	28.3
All children except those with a disability and/or chronic illness	25.9	24.0	23.7

Source: HBSC Survey

- In 2022, a slightly lower percentage of females than males reported having ever had sex (see *Table 99*).
- The percentage of children aged 15–17 who reported having ever had sex increased with age (see *Table 99*).
- The percentage of children who reported having ever had sex was similar across the social class groups, but lowest among the high social class group and highest among the middle social class group (see *Table 99*).



Table 99. Percentage of children aged 15–17 who reported having ever had sex, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	29.3	21.0	24.8	25.9	24.3	25.1
Age						
15 years	23.1	12.3	16.9	19.6	14.9	17.4
16 years	30.7	26.1	28.2	24.0	28.4	26.3
17 years	38.6	33.0	35.7	43.7	35.4	39.4
Social class						
High	26.7	17.9	21.8	21.1	22.3	21.7
Middle	30.3	22.9	26.3	27.0	22.6	24.8
Low	31.6	26.3	28.6	18.7	28.2	23.4

Source: HBSC Survey

- The percentage of children who reported having ever had sex ranged from 16.0% in the Midlands to 32.1% in the South-East (see *Table 100*).

Table 100. Percentage of children aged 15–17 who reported having ever had sex, by NUTS region (2014–2022)

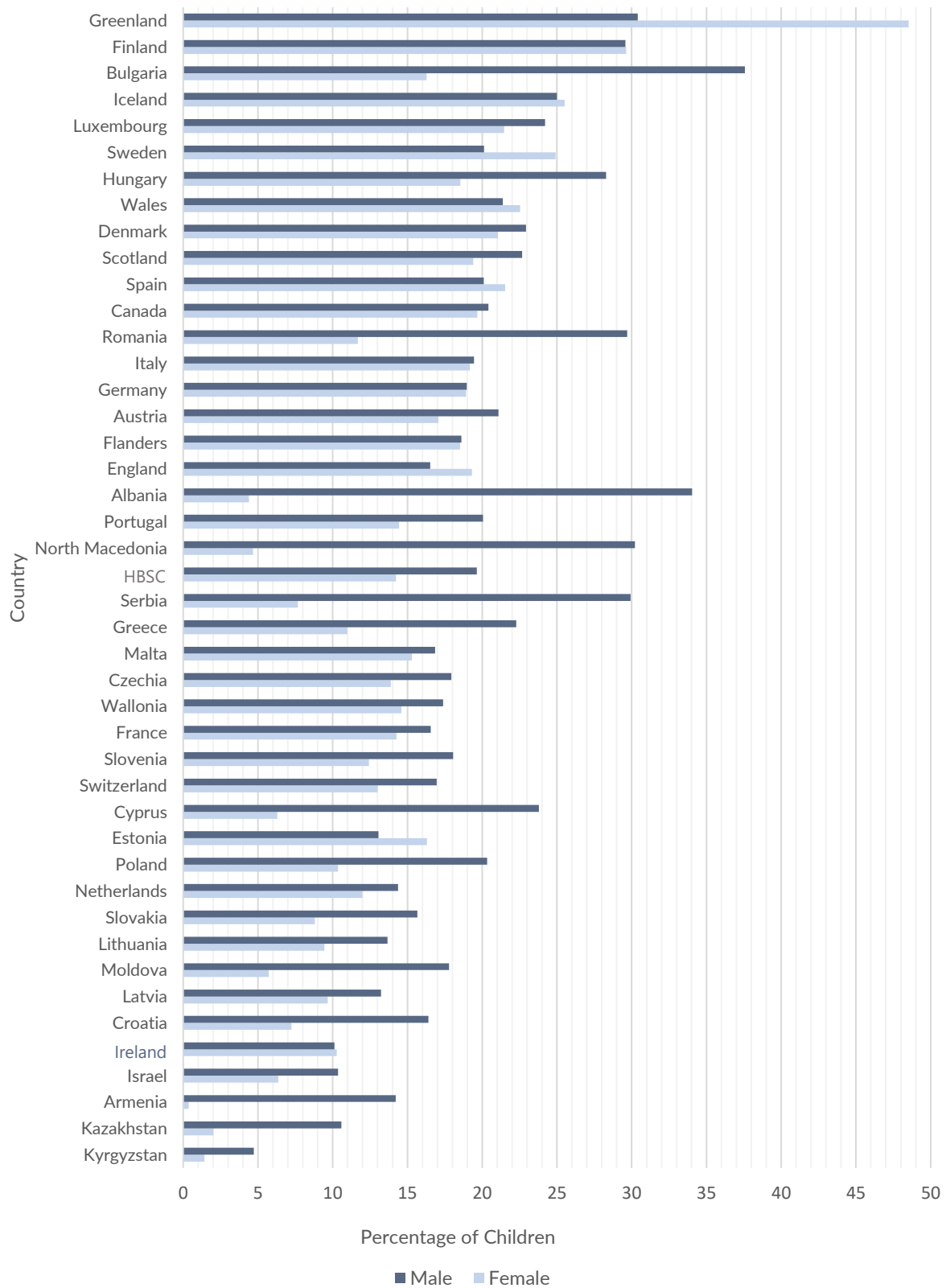
	2014	2018	2022
State	26.8	24.8	25.1
NUTS region			
Border	26.9	26.4	30.8
Midland	23.9	27.8	16.0
West	24.1	25.9	21.1
Dublin	33.1	21.7	29.7
Mid-East	25.0	24.9	24.6
Mid-West	24.5	19.6	23.3
South-East	31.8	30.0	32.1
South-West	18.4	32.8	20.0

Source: HBSC Survey

- Across the countries/regions surveyed in 2022, the average percentage of children aged 15 who reported having ever had sex was 16.9%, 19.6% for boys and 14.2% for girls in 2022 (see *Figure 22*). This ranged from 4.7% and 1.4%, respectively, in Kyrgyzstan, to 30.4% and 48.5% respectively, in Greenland. The corresponding percentages in Ireland were 10.1% for boys and 10.3% for girls. This was below the international HBSC average and represents a drop since 2018, particularly for boys when 19% reported having had sex.



Figure 22. Percentage of children aged 15 who reported having had sexual intercourse, by country (2022)* 



Source: HBSC Survey

Note: A different approach is used to data cleaning for the national figure on having had sexual intercourse compared to the international figure. See Appendix 1 for further information.



Self-esteem

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

- In 2022, 39.4% of children aged 10–17 reported feeling happy with the way they are. This decreased substantially between 2018 and 2022 (see *Table 101*).
- Among individual population groups, when compared to all other children, immigrant children and children with a disability and/or chronic illness were less likely to report feeling happy with the way they are across all years examined, while Traveller children were more likely to report feeling happy with the way they are (see *Table 101*).
- Children with a disability and/or chronic illness were the population group with the lowest percentage who reported feeling happy with the way they are (see *Table 101*).

Table 101. Percentage of children aged 10–17 who reported feeling happy with the way they are, by population group (2014–2022)

	2014	2018	2022
All children	57.5	57.6	39.4
Traveller status			
Traveller children	62.4	63.0	42.9
All children except Traveller children	57.4	57.5	39.3
Immigrant status			
Immigrant children	56.1	52.2	35.3
All children except immigrant children	57.7	58.3	39.8
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	53.6	51.1	32.9
All children except those with a disability and/or chronic illness	58.5	59.4	40.9

Source: HBSC Survey

- A lower percentage of females than males reported feeling happy with the way they are (see *Table 102*).
- On average, the percentage of children who reported feeling happy with the way they are decreased with age (see *Table 102*).
- The percentage of children who reported feeling happy with the way they are was lowest among the low social class group. This group saw the biggest drop from 2018 to 2022 dropping by 20 points from 56.9% to 36.2% (see *Table 102*).



Table 102. Percentage of children aged 10–17 who reported feeling happy with the way they are, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	62.9	52.7	57.6	47.0	31.7	39.4
Age						
10 years	71.2	75.8	73.5	76.6	66.8	72.3
11 years	72.8	69.7	71.4	62.1	53.5	57.6
12 years	68.8	60.8	64.7	57.1	43.8	50.3
13 years	60.2	47.5	53.4	51.3	33.0	42.6
14 years	56.5	38.2	46.7	45.9	23.1	34.5
15 years	51.5	32.5	40.9	37.4	22.4	30.4
16 years	49.7	32.7	40.5	37.0	21.8	29.2
17 years	47.6	28.7	37.9	36.4	21.3	28.8
Social class						
High	63.6	54.5	58.7	48.9	35.3	42.1
Middle	62.4	51.0	56.6	49.2	29.3	39.4
Low	63.3	51.1	56.9	41.6	31.2	36.2

Source: HBSC Survey

- The percentage of children who reported feeling happy with the way they are ranged from 37.2% in Dublin to 44.5% in the South-East. The percentage of children who reported feeling happy with the way they are decreased in all regions from 2018 to 2022 (see Table 103)

Table 103. Percentage of children aged 10–17 who reported feeling happy with the way they are, by NUTS region (2014–2022)

	2014	2018	2022
State	57.5	57.6	39.4
NUTS region			
Border	57.2	57.4	41.3
Midland	56.0	59.6	38.5
West	57.6	52.8	40.6
Dublin	55.5	61.9	37.2
Mid-East	59.5	61.6	38.9
Mid-West	59.4	55.2	37.4
South-East	56.4	55.0	44.5
South-West	59.6	58.0	41.7

Source: HBSC Survey



Self-reported happiness

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

- In 2022, 78.5% of children aged 10–17 reported being happy with their lives at present. This decreased by nearly 10 percentage-points between 2018 and 2022 (see *Table 104*).
- Among individual population groups, when compared to all other children, immigrant children and in particular children with a disability and/or chronic illness were less likely to report being happy with their lives at present (see *Table 104*).
- Children with a disability and/or chronic illness were the population group with the lowest percentage who reported being happy with their lives at present (see *Table 104*).

Table 104. Percentage of children aged 10–17 who reported being happy with their lives at present, by population group (2014–2022)

	2014	2018	2022
All children	89.7	88.2	78.5
Traveller status			
Traveller children	89.2	88.6	78.2
All children except Traveller children	89.7	88.2	78.4
Immigrant status			
Immigrant children	88.1	84.8	77.3
All children except immigrant children	90.0	88.6	78.7
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	87.1	83.5	71.7
All children except those with a disability and/or chronic illness	90.4	89.4	80.2

Source: HBSC Survey

- A lower percentage of females than males reported being happy with their lives at present (see *Table 105*).
- On average, the percentage of children who reported being happy with their lives at present trended down with age until about age 15 and then improved slightly (see *Table 105*).
- In 2022, the percentage of children who reported being happy with their lives at present was highest among the high social class group (see *Table 105*).



Table 105. Percentage of children aged 10–17 who reported being happy with their lives at present, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	91.1	85.6	88.2	83.6	73.2	78.5
Age						
10 years	95.6	95.9	95.8	84.5	94.5	88.8
11 years	94.3	93.7	94.0	91.6	88.3	89.9
12 years	93.1	91.9	92.5	89.4	81.1	85.2
13 years	91.9	85.7	88.6	86.2	69.8	78.5
14 years	88.3	78.3	82.8	83.0	68.3	75.7
15 years	86.1	77.8	81.3	77.2	65.6	71.8
16 years	86.5	77.6	81.6	80.5	68.9	74.5
17 years	89.4	80.9	85.0	78.1	71.1	74.5
Social class						
High	91.2	86.3	88.5	86.2	76.3	81.2
Middle	91.5	85.0	88.2	86.1	71.1	78.7
Low	89.6	83.9	86.5	80.1	75.9	78.0

Source: HBSC Survey

- The percentage of children who reported being happy with their lives at present ranged from 75.3% in the Midlands to 84.6% in the South-East. The percentage decreased in every region between 2018 and 2022 (see Table 106).

Table 106. Percentage of children aged 10–17 who reported being happy with their lives at present, by NUTS region (2014–2022)

	2014	2018	2022
State	89.7	88.2	78.5
NUTS region			
Border	90.4	89.0	80.6
Midland	89.7	87.9	75.3
West	90.5	88.6	80.2
Dublin	88.7	85.2	77.4
Mid-East	90.0	90.5	76.6
Mid-West	89.5	89.4	78.2
South-East	88.7	89.3	84.6
South-West	91.1	89.3	78.5

Source: HBSC Survey



Child and youth suicide

Measure: The number of suicides by children aged 15–17³

- In 2023, there were 5 suicides by children aged 15–17 (see *Table 107*).
- Over the nine-year period from 2014 to 2022, the number and rate (per 100,000) of suicides by children aged 15–17 was typically higher among boys (see *Table 107*).

Table 107. Number and rate (per 100,000) of suicides, by age and gender (2014–2023)

	15–17 years				18–24 years				10–24 years	
	Male		Female		Male		Female			
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
2014	12	13.1	4	4.6	66	33.5	10	5.2	92	5.9
2015	14	15.1	1	1.1	33	16.6	10	5.2	58	3.7
2016	9	9.6	12	13.5	54	27.1	9	4.7	84	5.3
2017	12	12.6	7	7.7	39	19.1	14	7.1	72	4.5
2018	3	3.1	3	3.2	44	20.7	22	10.8	72	4.4
2019	13	13.1	7	7.3	43	19.7	14	6.6	77	4.7
2020	5	4.9	8	8.2	42	18.8	10	4.6	65	3.9
2021	7	6.9	2	2.1	43	19.2	11	5.1	63	3.8
2022	7	6.6	1	1.0	37	16.4	6	2.7	55	3.3
2023	4	3.7	1	1.0	41	17.8	10	4.5	60	3.6

Source: Vital Statistics (CSO)

- Overall, suicide accounted for 14.3% of deaths of children aged 15–17 in 2023.

Table 108. Suicides as a percentage of total deaths of children aged 15–17, by gender (2014–2023)

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Total	51.6%	48.4%	50.0%	59.4%	18.2%	55.6%	36.1%	25.7%	22.2%	14.3%
Sex										
Male	52.2%	50.0%	37.5%	54.5%	13.6%	56.5%	21.7%	28.0%	28.0%	17.4%
Female	50.0%	33.3%	66.7%	70.0%	27.3%	53.8%	61.5%	20.0%	9.1%	8.3%

Source: Vital Statistics (CSO)

³ Previous editions of SONC used the age range 10–17; however, data for this age range was not available at the time of writing.



Self harm

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

- In 2024, the rate of children and young people aged 10–24 presenting at a hospital emergency department following self-harm was 332 per 100,000 (see *Table 109*).
- The rate for girls was 460 per 100,000 and the rate for boys was 210 per 100,000.
- In 2024 the highest rate of presentation to an emergency department following self-harm was among girls aged 15–19 years.

Table 109. Rate (per 100,000) of children aged 10–24 who presented at a hospital emergency department following self-harm, by gender and age (2013–2024)

	Male				Female				Total			
	10–14	15–19	20–24	10–24	10–14	15–19	20–24	10–24	10–14	15–19	20–24	10–24
2013	34	334	480	274	145	595	483	400	88	461	482	336
2014	49	368	486	292	161	649	465	418	104	504	476	354
2015	45	349	476	280	178	680	482	440	110	510	479	358
2016	53	361	440	274	161	720	470	444	106	536	455	358
2017	60	356	503	295	176	758	494	470	116	553	499	381
2018	72	375	539	318	195	762	540	493	132	565	540	404
2019	70	384	479	301	208	721	531	480	137	550	504	389
2020	70	314	416	258	232	773	482	489	149	540	448	371
2021	52	309	387	240	346	888	530	580	196	593	457	407
2022	85	324	388	255	337	850	511	559	208	582	449	404
2023	78	231	391	224	348	725	456	507	210	472	423	362
2024	67	251	334	210	314	652	423	460	188	445	377	332

Note: 2020–2024 rates have been estimated due to missing data from non-contributing hospitals

Source: National Suicide Research Foundation

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

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

Note: Rates by region are not available for more recent years due to missing data from hospitals.

Source: National Suicide Research Foundation

In 2019, Dublin North East had the highest rate (per 100,000) of children and young people aged 10–14 (204) and 15–19 (580) presenting at a hospital emergency department following self-harm.



Physical activity

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

- In 2022, 54.9% of children aged 10–17 reported being physically active for at least 60 minutes per day on more than four days per week. This increased between 2018 and 2022 (see *Table 111*).
- Among individual population groups, when compared to all other children, immigrant children were less likely to report being physically active for at least 60 minutes per day on more than four days per week at 47.0% (see *Table 111*).

Table 111. Percentage of children aged 10–17 who reported being physically active for at least 60 minutes per day on more than four days per week, by population group (2014–2022)

	2014	2018	2022
All children	52.0	51.1	54.9
Traveller status			
Traveller children	60.1	53.9	55.2
All children except Traveller children	51.9	51.0	54.7
Immigrant status			
Immigrant children	47.9	43.4	47.0
All children except immigrant children	52.8	52.2	55.6
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	51.2	47.8	54.0
All children except those with a disability and/or chronic illness	52.3	52.0	55.2

Source: HBSC Survey

- A considerably lower percentage of females than males reported being physically active for at least 60 minutes per day on more than four days per week in 2022 (see *Table 112*).
- On average, the percentage of children who reported being physically active for at least 60 minutes per day on more than four days per week decreased with age from age 11 (see *Table 112*).
- The percentage of children who reported being physically active for at least 60 minutes per day on more than four days per week increases with social class and was lowest among the low social class group (see *Table 112*).



Table 112. Percentage of children aged 10–17 who reported being physically active for at least 60 minutes per day on more than four days per week, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	58.1	44.8	51.1	62.6	47.0	54.9
Age						
10 years	72.7	61.5	67.1	71.3	57.6	65.4
11 years	75.4	67.9	71.9	70.6	67.4	68.9
12 years	67.5	60.9	64.1	74.0	59.4	66.5
13 years	58.9	49.0	53.6	67.8	49.1	59.0
14 years	51.0	36.4	43.2	62.4	43.4	52.9
15 years	46.7	30.4	37.6	54.3	40.9	48.1
16 years	48.3	29.3	38.1	54.2	35.9	44.7
17 years	42.2	25.6	33.8	54.1	29.2	41.3
Social class						
High	60.1	46.9	53.0	67.8	51.9	59.7
Middle	57.7	42.6	50.0	60.9	43.9	52.5
Low	53.6	41.4	47.0	51.5	45.0	48.1

Source: HBSC Survey

- The percentage of children who reported being physically active for at least 60 minutes per day on more than four days per week ranged from 47.3% in the Border region to 60.2% in the South-East (see Table 113).

Table 113. Percentage of children aged 10–17 who reported being physically active for at least 60 minutes per day on more than four days per week, by NUTS region (2014–2022)

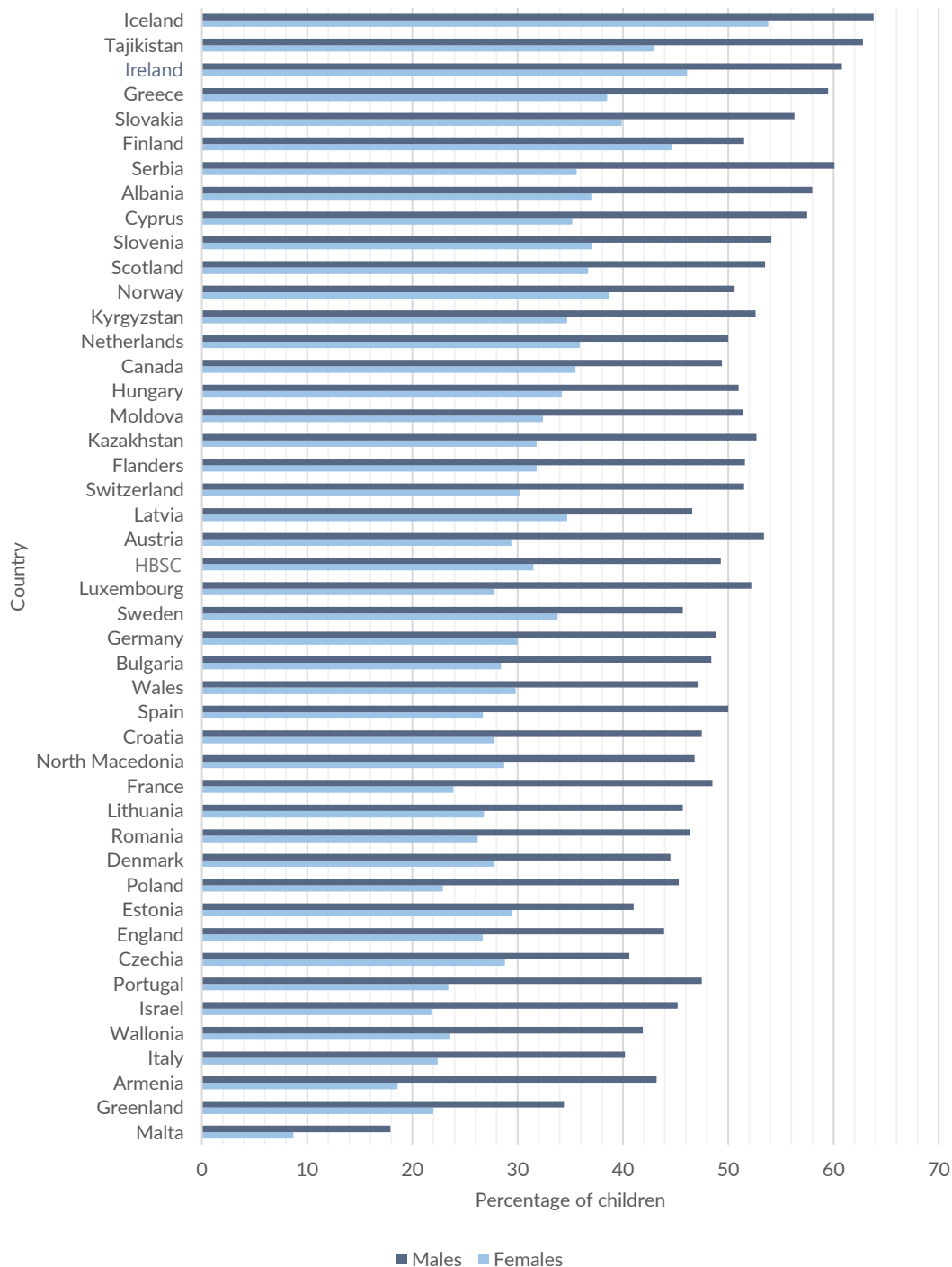
	2014	2018	2022
State	52.0	51.1	54.9
NUTS region			
Border	48.6	46.5	47.3
Midland	47.7	48.0	49.8
West	53.3	57.2	58.0
Dublin	53.2	51.0	54.3
Mid-East	52.5	50.5	57.6
Mid-West	52.8	53.7	54.2
South-East	52.1	50.6	60.2
South-West	53.5	50.1	55.7

Source: HBSC Survey



- Across 45 countries/regions, the average percentage of children who reported exercising four times or more per week outside of school hours was 49.3% for boys and 31.5% for girls (see Figure 23). This ranged from 17.9% and 8.7%, for boys and girls respectively, in Malta, to 63.8% and 53.8%, respectively, in Iceland. The corresponding percentages in Ireland were 60.8% for boys and 46.1% for girls. Ireland had the third highest percentage among the regions surveyed.

Figure 23. Percentage of children aged 11, 13, and 15 who reported exercising four times or more a week (outside school hours), by country (2022) 



Source: HBSC Survey



Nutrition: Breakfast consumption

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

- In 2022, 69.7% of children aged 10–17 reported eating breakfast on five or more days per week. This decreased between 2018 and 2022 (see *Table 114*).
- Among individual population groups, when compared to all other children, Traveller children, immigrant children, and children with a disability and/or chronic illness were somewhat less likely to report eating breakfast on five or more days per week (see *Table 114*).
- Traveller children were the population group with the lowest percentage who reported eating breakfast on five or more days per week (see *Table 114*).

Table 114. Percentage of children aged 10–17 who reported eating breakfast on five or more days per week, by population group (2014–2022)

	2014	2018	2022
All children	76.7	78.2	69.7
Traveller status			
Traveller children	65.3	72.5	65.1
All children except Traveller children	76.9	78.3	69.9
Immigrant status			
Immigrant children	74.4	74.7	67.4
All children except immigrant children	77.2	78.7	70.0
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	75.0	76.4	66.3
All children except those with a disability and/or chronic illness	77.2	78.6	71.5

Source: HBSC Survey

- A lower percentage of females than males reported eating breakfast on five or more days per week (see *Table 115*).
- On average, the percentage of children who reported eating breakfast on five or more days per week was highest at age 11 and lowest around age 15 and 16 (see *Table 115*).
- The percentage of children who reported eating breakfast on five or more days per week was lowest among the low social class group (see *Table 115*).



Table 115. Percentage of children aged 10–17 who reported eating breakfast on five or more days per week, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	81.8	74.8	78.2	75.8	63.5	69.7
Age						
10 years	86.6	88.4	87.5	80.9	90.1	84.9
11 years	90.1	88.9	89.6	86.7	85.4	86.0
12 years	86.1	83.0	84.5	82.4	75.7	79.0
13 years	81.9	74.9	78.2	77.8	63.6	71.1
14 years	79.1	70.2	74.4	77.0	57.0	67.1
15 years	77.1	66.5	71.2	67.7	51.3	60.2
16 years	74.2	66.4	70.0	72.2	52.5	61.9
17 years	77.3	68.2	72.7	69.1	60.8	64.9
Social class						
High	86.4	79.1	82.5	83.5	69.4	76.4
Middle	81.0	74.7	77.7	76.3	63.1	69.8
Low	72.1	68.2	70.0	70.9	61.1	65.9

Source: HBSC Survey

- The percentage of children who reported eating breakfast on five or more days per week ranged from 65.9% in the Border region to 75.1% in the South-East (see Table 116).

Table 116. Percentage of children aged 10–17 who reported eating breakfast on five or more days per week, by NUTS region (2014–2022)

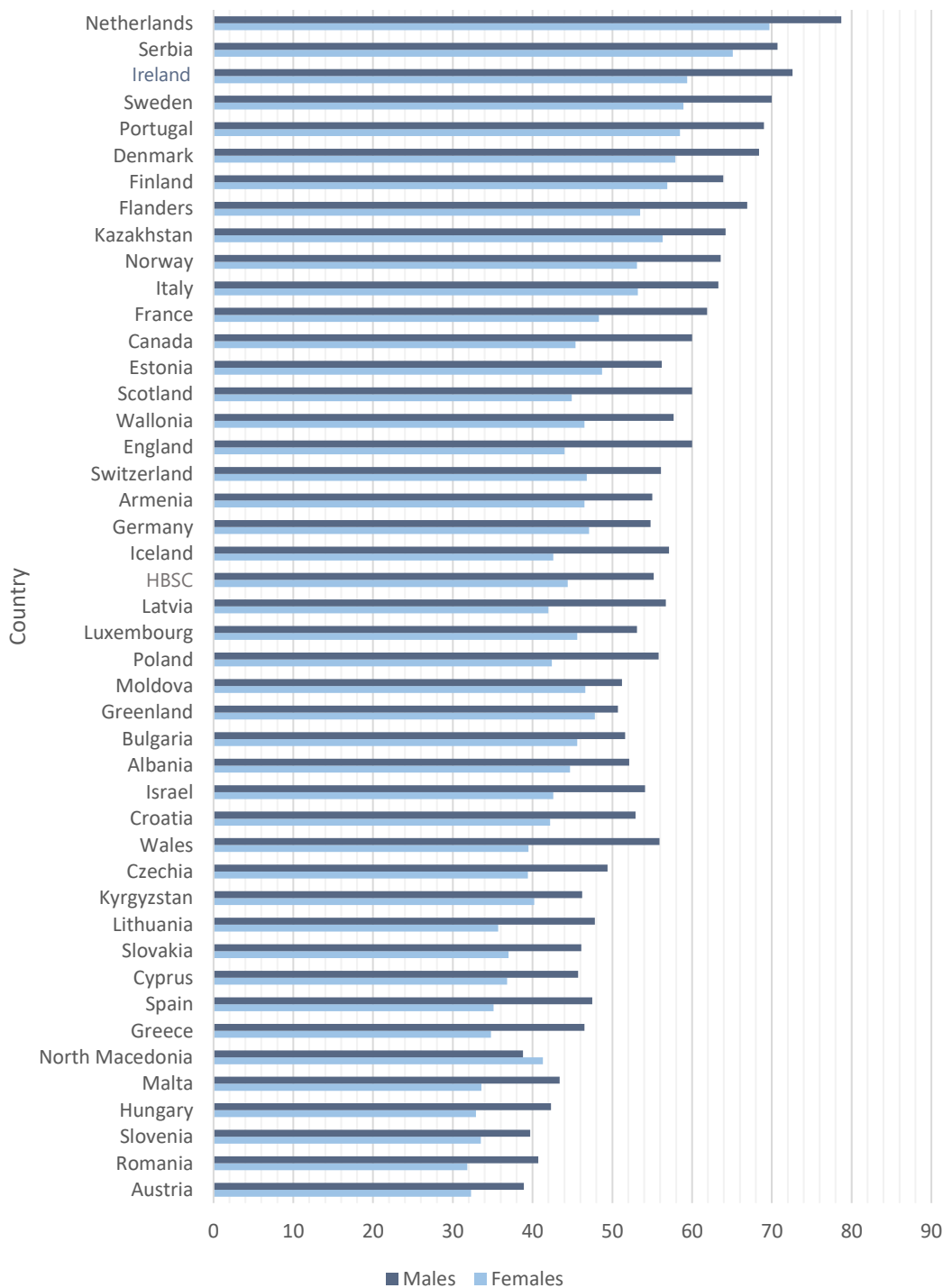
	2014	2018	2022
State	76.7	78.2	69.7
NUTS region			
Border	76.9	77.5	65.9
Midland	76.8	76.5	67.5
West	81.1	79.0	74.1
Dublin	73.5	82.0	66.6
Mid-East	77.9	81.3	70.1
Mid-West	76.8	76.9	70.7
South-East	74.8	75.6	75.1
South-West	79.7	79.2	71.9

Source: HBSC Survey



- Across 44 countries/regions, the average percentage of children who reported eating breakfast on five or more days per week was 55.2% for boys and 44.4% for girls (see Figure 24). This ranged from 38.9% and 32.3%, respectively, in Austria, to 78.7% and 69.7%, respectively, in the Netherlands. The corresponding percentage in Ireland was 72.6% for boys and 59.4% for girls. Ireland was third highest of the 44 countries presented.

Figure 24. Percentage of children aged 11, 13, and 15 who reported eating breakfast every weekday, by country (2022) 



Source: HBSC Survey



Nutrition: Soft drinks

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

- In 2022, 6.6% of children aged 10–17 reported drinking soft drinks that contain sugar at least once a day, indicating no change since 2018 (see *Table 117*).
- Among individual population groups, when compared to all other children, Traveller children, and children with a disability and/or chronic illness were more likely to report drinking soft drinks that contain sugar at least once a day (see *Table 117*).
- Traveller children were the population group with the highest percentage who reported drinking soft drinks that contain sugar at least once a day and were three times as likely to report this behaviour than children in general (see *Table 117*).

Table 117. Percentage of children aged 10–17 who reported drinking soft drinks that contain sugar at least once a day, by population group (2014–2022)

	2014	2018	2022
All children	12.6	6.5	6.6
Traveller status			
Traveller children	23.5	16.5	21.9
All children except Traveller children	12.4	6.2	6.1
Immigrant status			
Immigrant children	10.6	7.0	6.6
All children except immigrant children	12.9	6.4	6.5
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	12.9	7.2	8.1
All children except those with a disability and/or chronic illness	12.5	6.2	5.8

Source: HBSC Survey

- A slightly lower percentage of females than males reported drinking soft drinks that contain sugar at least once a day (see *Table 118*).
- In 2022, the percentage of children who reported drinking soft drinks that contain sugar at least once a day increased with age (see *Table 118*).
- The percentage of children who reported drinking soft drinks that contain sugar at least once a day was highest among the low social class group. The low and middle social class groups were over twice as likely to report drinking soft drinks than the high social class group (see *Table 118*).



Table 118. Percentage of children aged 10–17 who reported drinking soft drinks that contain sugar at least once a day, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	7.1	5.9	6.5	7.1	6.1	6.6
Age						
10 years	5.9	4.3	5.1	*	*	*
11 years	4.8	4.0	4.4	4.4	4.5	4.5
12 years	5.2	6.2	5.7	5.1	4.8	5.0
13 years	6.9	6.5	6.7	7.2	5.0	6.1
14 years	10.9	7.4	9.0	7.4	6.7	7.1
15 years	8.3	6.0	7.0	8.2	6.4	7.4
16 years	9.1	7.6	8.3	8.1	7.3	7.7
17 years	6.3	3.9	5.1	9.2	8.8	9.0
Social class						
High	4.3	3.1	3.7	4.0	2.9	3.4
Middle	7.1	6.5	6.8	8.0	6.4	7.2
Low	10.2	9.9	10.0	8.8	9.1	8.9

Source: HBSC Survey

* indicates cells with less than 5 responses

- The percentage of children who reported drinking soft drinks that contain sugar at least once a day ranged from 4.1% in the West region to 8.6% in the Midlands (see Table 119).

Table 119. Percentage of children aged 10–17 who reported drinking soft drinks that contain sugar at least once a day, by NUTS region (2014–2022)

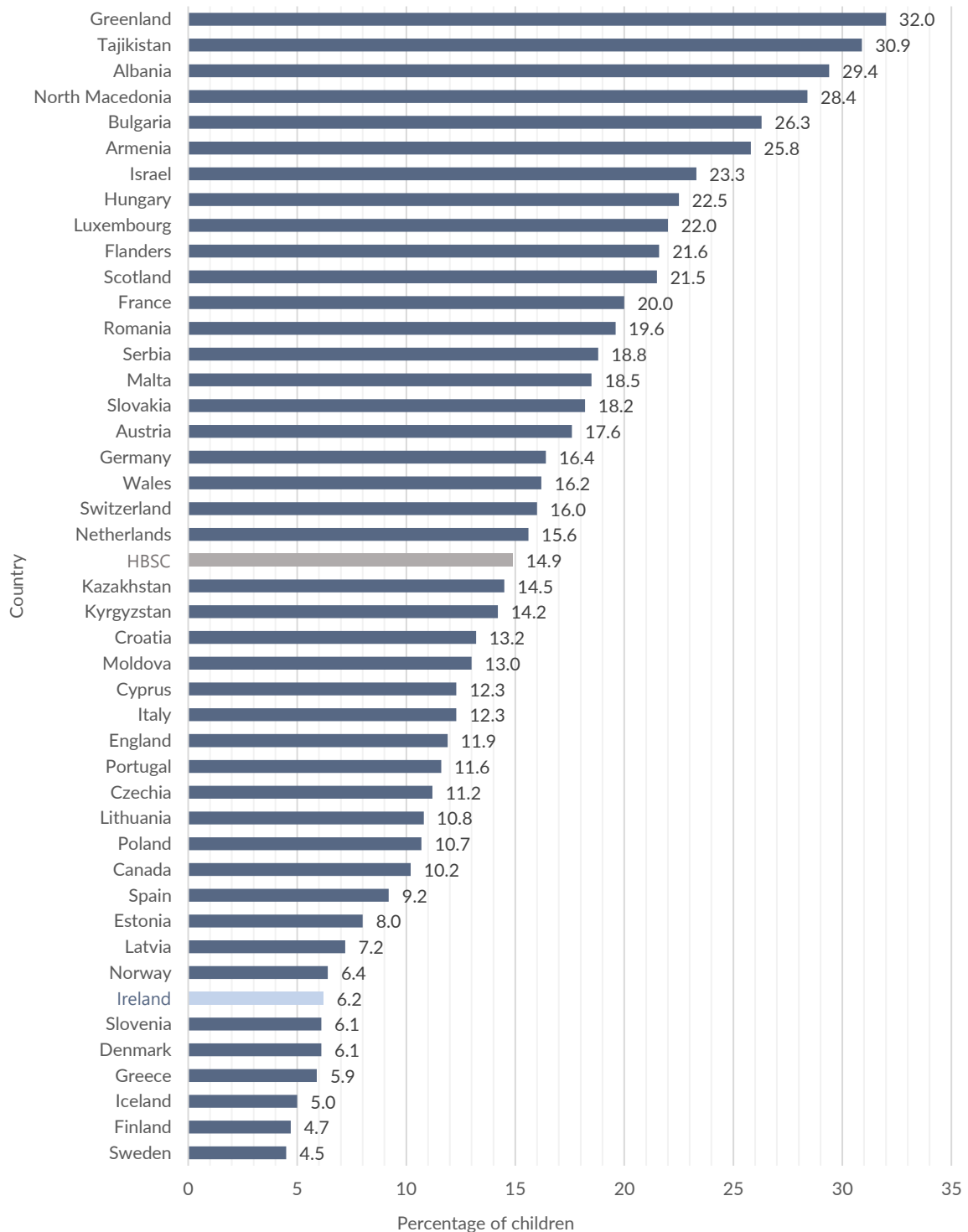
	2014	2018	2022
State	12.6	6.5	6.6
NUTS region			
Border	11.4	5.1	5.5
Midland	9.0	4.4	8.6
West	8.4	5.7	4.1
Dublin	16.8	6.7	8.4
Mid-East	11.8	9.0	6.2
Mid-West	11.2	7.0	7.3
South-East	14.6	8.3	6.1
South-West	10.6	5.1	4.9

Source: HBSC Survey



- Across 44 countries/regions, the average percentage of children who reported drinking soft drinks that contain sugar at least once a day was 14.9% (see Figure 25). This ranged from 4.5% in Sweden to 32.0% in Greenland. The corresponding percentage in Ireland was 6.2%. This was below the international HBSC average.

Figure 25. Percentage of children aged 11, 13, and 15 who reported drinking soft drinks at least once a day, by country (2022)



Source: HBSC Survey

STATE OF
THE NATION'S
CHILDREN



FORMAL AND INFORMAL SUPPORTS

4





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Key findings

- Public expenditure on educational institutions between primary and tertiary level decreased from 5.7% of Modified Gross National Income (GNI*) in 2014 to 4.1% in 2022 (see Figure 26), although real public expenditure increased from €9,390,100,000 in 2013 to €14,512,600,000 in 2022 (see Table 121).
- In 2025, 16.9% of children were considered to be at risk of poverty, up from 15.3% in 2024 (see Table 122).
- In 2025, 7.8% of children experienced consistent poverty, down from 8.5% in 2024 (see Table 123).
- In 2024, there were 19,088 households with children identified as being in need of social housing (see Table 124).
- In 2022, 89.5% of children aged 10–17 reported feeling safe in the area where they live. This remained stable between 2018 and 2022 (see Table 126).
- In 2022, 63.1% of children aged 10–17 reported that there are good places in their area to spend their free time. This decreased between 2018 and 2022 (see Table 129).
- In 2022, 8,404 children aged 10–17 were referred to the Garda Diversion Programme. Some children were referred more than once and so the total number of referrals was 15,719 (see Table 132).
- In 2024, 90.7% of pregnant women attended antenatal care in the first trimester of pregnancy (see Table 135).
- In 2024, 98.8% of newborns were visited by a public health nurse within 72 hours of discharge from hospital for the first time (see Table 136).



- In 2024, 86.5% of newborn children had their developmental health screening before reaching 12 months of age (see Table 137).
- In 2024, for children at 12 months of age, uptake rates among Local Health Offices (LHOs) for D₃, P₃, T₃, and Polio₃ ranged from 81% to 94% (see Table 139).
- In 2024, for children at 24 months of age, uptake rates among Local Health Offices (LHOs) for D₃, P₃, T₃, Polio₃, HepB₃, and Hib₃ ranged from 87% to 97% (see Table 140).
- As of December 2023, there were 10,005 children on an inpatient/day case (IPDC) waiting list and 77,682 children on an outpatient (OP) waiting list (see Table 142 and Table 143).
- In 2024, there were 5,705 children in the care of Tusla, the Child and Family Agency (see Table 144).
- In 2024, there were 332 admissions of children to psychiatric hospitals/units and child and adolescent units (see Table 146).

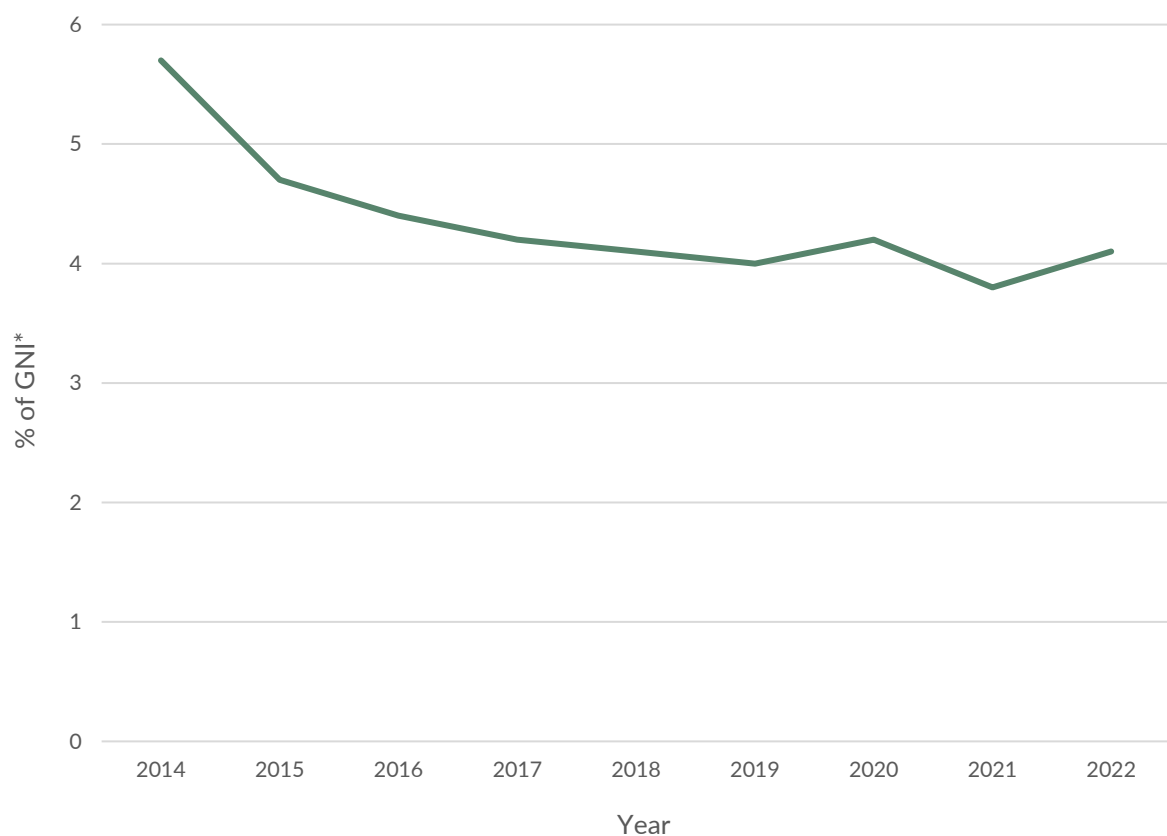


Public expenditure on education

Measure: Public expenditure on education

- Public expenditure on educational institutions at primary, secondary, and tertiary level decreased from 5.7% of Modified Gross National Income (GNI*) in 2014 to 4.1% in 2022 (see Figure 26).

Figure 26. Public expenditure on educational institutions in Ireland at primary, secondary, and tertiary level (2014–2022) 



Source: Eurostat

- In 2022, expenditure on educational institutions (primary to tertiary level) as a percentage of GNI* ranged from 2.5% in Latvia to 5.5% in Sweden. The EU-27 average expenditure in the EU-27 was 4.2%.



Table 120. Public expenditure on education at primary to tertiary level - as % of public expenditure or % of GNI*⁴

	2018	2019	2020	2021	2022
EU-27	4.3	4.2	4.6	4.3	4.2
Country					
Austria	4.6	4.4	4.8	4.7	4.7
Belgium	5.6	5.4	5.9	5.5	5.4
Bulgaria	0	0	0	0	3.6
Croatia	1.8	3.4	3.6	3.6	3.2
Cyprus	5.3	5.2	5.8	5.4	4.8
Czechia	4	4.2	4.2	4.2	3.8
Denmark	6.2	6.1	6.2	5.8	5.3
Estonia	4.3	4.2	4.3	4.2	4.2
Finland	5.1	5.2	5.4	5.3	5.2
France	4.6	4.6	5	4.7	4.6
Germany	3.9	3.9	4.3	4.2	4
Greece	3.4	3.3	0	0	3.2
Hungary	3.4	3.4	3.3	3.7	3
Ireland	4.1	4	4.2	3.8	4.1
Italy	3.8	3.6	3.9	3.7	3.7
Latvia	2.6	2.7	2.8	2.8	2.5
Lithuania	3.1	3.1	3.6	3.4	3.4
Luxembourg	4.2	4.9	4.8	4.7	5
Malta	4.5	4.5	5.2	4.9	4.4
Netherlands	4.9	4.8	5.2	5	4.9
Poland	4	4.1	4.3	4	3.7
Portugal	4.3	4.4	4.6	4.4	4.2
Romania	2.6	2.8	2.8	0	2.6
Slovakia	3.5	3.7	4.1	4.3	4.1
Slovenia	4.1	4.1	4.6	4.5	4.5
Spain	3.5	3.6	4.3	4.2	4
Sweden	5.9	5.8	5.9	5.8	5.5

NA = not available

Source: Eurostat

⁴ Previously Table 120 included data on public expenditure on education at primary to tertiary level as a percentage of GDP, however there is no data available on this for Ireland in recent years. Data for this original measure is still being compiled and published by Eurostat and can be found [here](#).



- Real current public expenditure on education was €14,512,600,000 in 2022.
- In 2023, expenditure per student was highest for second level education (€13,315), followed by first level (€13,139), then third level (€10,103).
- Public expenditure on education increased by 54.6% between 2013 and 2022.

Table 121. Real current public expenditure on education, by educational level (2011–2023) ⁵

	Expenditure per student (€ at constant 2022 prices) by educational level			Total public expenditure (€m in current prices)*
	First	Second	Third	
2011	7,389	10,199	10,617	NA
2012	7,310	10,181	9,933	NA
2013	7,464	9,817	9,667	9,390.1
2014	7,116	9,616	8,998	9,317.1
2015	7,391	9,694	8,681	9,465.4
2016	7,268	9,563	8,336	9,635.8
2017	7,488	9,691	8,373	9,988.6
2018	7,842	10,163	8,384	10,541.6
2019	7,871	10,399	7,951	8,913.5
2020	8,307	10,025	NA	11,748.9
2021	8,716	9,455	9,803	12,431.7
2022	9,063	9,443	10,031	14,512.6
2023	13,139	13,315	10,103	NA

Source: Department of Education

Please note that due to the establishment of DFHERIS in mid-2020, values for third level expenditure for years prior to 2020 inclusive should not be compared with those from 2021 onwards*[Includes total government expenditure on primary, secondary and tertiary education](#)

⁵ In previous iterations of SONC, Table 121 presented data from EDA23, prepared by the Department of Education and hosted by the CSO. However, EDA23 is no longer being updated, therefore this year's iteration of Table 121 presents data from a similar dataset EDA24. The data in the final column comes from Eurostat.



At risk of poverty

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

- In 2025, 12.6% of the population were considered to be at risk of poverty (see *Table 122*).
- Children had a higher risk of being poor than did the population as a whole. 16.9% of children were at risk of being in poverty.
- The highest “at risk of poverty” rate for children occurred among those aged 12–17. 19.2% of children in this age group were at risk of poverty in 2025. This compares with a rate of 13.6% for those aged 6–11 and a rate of 18.9% for those aged 5 and under.
- For households in 2025, those comprising of 2 adults with 3+ children under 18 were most likely to be at risk of poverty, with a rate of 27.3%. This contrasts with a rate of 10% for households without children, and with 10.1% of households comprising of 2 adults with 1–2 children under 18 being at risk of poverty.

Table 122. Percentage of population at risk of poverty, by age and household composition (2020–2025)

	2020	2021	2022	2023	2024	2025
All ages	12.8	11.8	12.5	10.6	11.7	12.6
Population under 18	16.0	14.5	14.7	14.3	15.3	16.9
Age						
Under 6 years	11.8	10.0	11.3	12.1	14.3	18.9
6–11 years	14.9	14.9	14.4	13.8	13.7	13.6
12–17 years	21.4	18.2	17.9	16.6	17.9	19.2
Household composition						
1 adult with children under 18	29.8	20.6	27.0	19.2	24.2	17.1
2 adults with 1–2 children under 18	8.2	8.1	6.9	10.6	10.7	10.1
2 adults with 3+ children under 18	16.4	19.8	22.3	22.0	18.2	27.3
Other households with children under 18	19.6	12.6	9.5	9.4	12.3	13.1
Households without children	10.6	10.8	12.4	7.8	9.6	10

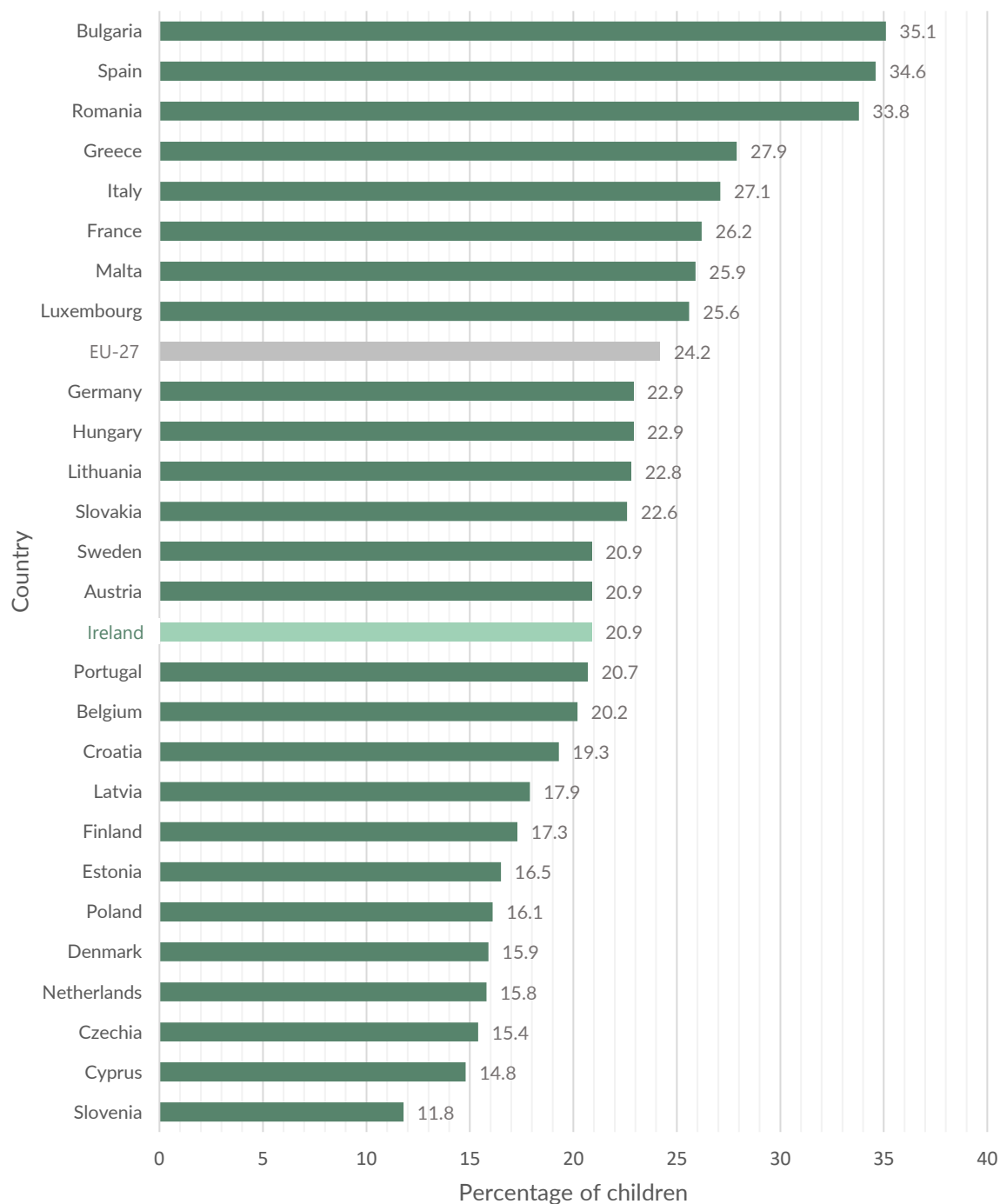
Note: Break in series in 2020 (see technical notes in Appendix 1)

Source: CSO, SILC



- In 2024, the percentage of children at risk of poverty or social exclusion⁶ across the EU-27 ranged from 11.8% in Slovenia to 35.1% in Bulgaria. The corresponding percentage for Ireland was 20.9%. This was lower than the EU-27 average of 24.2% (see Figure 27).

Figure 27. Percentage of children at risk of poverty or social exclusion, by EU-27 country (2024) 



Source: Eurostat

⁶ See technical notes in Appendix 1 for details



Consistent poverty

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

- In 2025, 4.7% of the population experienced consistent poverty (see *Table 123*).
- Children were more likely to experience consistent poverty than the population as a whole. In 2025 7.8% of children experienced consistent poverty, compared with 4.7% of the population as a whole (see *Table 123*).
- The highest consistent poverty rate for children occurred among those aged 12–17. 9.2% of children in this age group experienced consistent poverty in 2025. This compares with a rate of 7.1% for those aged 6–11 and a rate of 6.8% for those aged 5 and under (see *Table 123*).
- For households in 2025, those comprising of 1 adult with children under 18 were most likely to experience consistent poverty, with a rate of 13.4%. This compares to a rate of 12.6% for households comprising of 2 adults with 3+ children under 18, and with 4.5% of Other households with children under 18 experiencing consistent poverty (see *Table 123*).

Table 123. Percentage of population experiencing consistent poverty, by age and household composition (2020–2025)

	2020	2021	2022	2023	2024	2025
All ages	4.4	4.2	4.9	3.6	5.0	4.7
Population under 18	6.7	6.3	7.0	4.8	8.5	7.8
Age						
Under 6 years	4.7	3.9	5.3	3.7	7.6	6.8
6–11 years	5.9	7.7	6.7	4.9	7.4	7.1
12–17 years	9.6	7.1	8.8	5.7	10.5	9.2
Household composition						
1 adult with children under 18	17.6	11.3	15.5	7.1	11.0	13.4
2 adults with 1–2 children under 18	2.0	4.0	3.1	3.5	3.9	3.0
2 adults with 3+ children under 18	6.6	8.8	8.9	7.0	13.2	12.6
Other households with children under 18	8.2	2.2	4.7	3.7	6.6	4.5
Households without children	2.7	3.3	3.8	2.5	2.9	3.2

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

Source: CSO SILC



Availability of housing for families with children

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

- In 2024, there were 19,088 households with children identified as being in need of social housing.
- 53.5% (10,217) of households with children identified as being in need of social housing were households with one child, 29.9% (5,701) were households with two children, 11.2% (2,129) were households with three children, and the remaining 5.5% (1,041) were households with four or more children (see *Table 124*).

Table 124. Number and percentage of households with children identified as being in need of social housing, by number of children (2019–2024)

	2019	2020	2021	2022	2023	2024		
	No.	No.	No.	No.	No.	%	No.	%
Total	30,420	24,646	21,932	21,086	20,932	100	19,088	100
No. of children								
1 child	15,178	12,732	11,594	11,169	11,182	53.4	10,217	53.5
2 children	9,578	7,523	6,568	6,320	6,280	30	5,701	29.9
3 children	3,691	2,860	2,495	2,381	2,305	11	2,129	11.2
4 children	1,341	1,035	838	811	795	3.8	704	3.7
5 or more children	632	496	437	405	370	1.8	337	1.8

Source: The Housing Agency

- In 2024, 66.5% (12,701) of households with children identified as being in need of social housing were one-parent households, 23.2% (4,429) were two-parent households, and the remaining 10.3% (1,958) were multi-adult households (see *Table 125*).
- 34.7% (6,630) of households with children identified as being in need of social housing were in Co. Dublin (see *Table 125*).



Table 125. Number and percentage of households with children identified as being in need of social housing, by household structure and county (2024)

	Single with children	Couple with children	Multi-adult households with children	All households with children	
	No.	No.	No.	No.	%
State	12,701	4,429	1,958	19,088	100%
County					
Carlow	203	60	26	289	1.5%
Cavan	166	44	28	238	1.2%
Clare	331	100	41	472	2.5%
Cork	1,126	391	146	1,663	8.7%
Donegal	290	90	34	414	2.2%
Dublin	4,241	1,561	828	6,630	34.7%
Galway	496	266	66	828	4.3%
Kerry	504	177	79	760	4.0%
Kildare	898	381	143	1,422	7.4%
Kilkenny	137	46	16	199	1.0%
Laois	194	72	14	280	1.5%
Leitrim	48	17	7	72	0.4%
Limerick	685	194	93	972	5.1%
Longford	53	16	10	79	0.4%
Louth	496	122	58	676	3.5%
Mayo	222	63	52	337	1.8%
Meath	387	135	39	561	2.9%
Monaghan	75	13	12	100	0.5%
Offaly	155	60	19	234	1.2%
Roscommon	58	21	8	87	0.5%
Sligo	129	29	15	173	0.9%
Tipperary	369	108	42	519	2.7%
Waterford	361	91	32	484	2.5%
Westmeath	256	87	35	378	2.0%
Wexford	459	143	45	647	3.4%
Wicklow	362	142	70	574	3.0%

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

Source: The Housing Agency



Community characteristics

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

- In 2022, 89.5% of children aged 10–17 reported feeling safe in the area where they live. This has remained stable since 2014.
- Among individual population groups, when compared to all other children, Traveller children, immigrant children, and children with a disability and/or chronic illness were less likely to report feeling safe in the area where they live (see *Table 126*).
- Traveller children were the population group with the lowest percentage of children who reported feeling safe in the area where they live (see *Table 126*).

Table 126. Percentage of children aged 10–17 who reported feeling safe in the area where they live, by population group (2014–2022)

	2014	2018	2022
All children	89.2	90.2	89.5
Traveller status			
Traveller children	83.0	82.9	80.0
All children except Traveller children	89.4	90.4	89.7
Immigrant status			
Immigrant children	86.3	88.3	83.5
All children except immigrant children	89.8	90.5	90.1
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	86.0	87.5	84.5
All children except those with a disability and/or chronic illness	90.1	91.0	90.9

Source: HBSC Survey

- A lower percentage of females than males reported feeling safe in the area where they live (see *Table 127*).
- On average, the percentage of children who reported feeling safe in the area where they live tends to decrease with age between the ages of 10 and 16 but increases again at age 17 (see *Table 127*).
- The percentage of children who reported feeling safe in the area where they live was lowest among the low social class group (see *Table 127*).



Table 127. Percentage of children aged 10–17 who reported feeling safe in the area where they live, by age, gender, and social class (2018–2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	91.1	89.4	90.2	91.2	87.7	89.5
Age						
10 years	92.3	92.9	92.6	95.4	96.9	96.1
11 years	92.7	92.3	92.5	92.7	92.0	92.3
12 years	92.0	92.8	92.4	93.7	90.1	91.9
13 years	91.4	86.8	88.9	90.8	86.5	88.7
14 years	88.7	86.3	87.4	90.1	87.0	88.6
15 years	88.0	86.0	86.9	89.0	85.0	87.1
16 years	90.4	85.5	87.8	91.6	83.7	87.6
17 years	90.1	88.7	89.4	90.1	90.8	90.5
Social class						
High	93.9	92.5	93.1	93.4	91.1	92.2
Middle	89.5	87.7	88.6	92.2	86.7	89.5
Low	89.4	84.6	86.8	90.9	84.8	87.7

Source: HBSC Survey

- The percentage of children who reported feeling safe in the area where they live ranged from 83.0% in Dublin to 94.3% in the South-East (see Table 128).

Table 128. Percentage of children aged 10–17 who reported feeling safe in the area where they live, by NUTS region (2014–2022)

	2014	2018	2022
State	89.2	90.2	89.5
NUTS region			
Border	92.2	94.5	94.1
Midland	91.2	90.4	90.4
West	94.2	91.3	94.0
Dublin	81.7	94.2	83.0
Mid-East	88.6	94.4	87.9
Mid-West	92.5	92.2	93.3
South-East	90.3	84.4	94.3
South-West	92.8	89.8	90.3

Source: HBSC Survey



Environment and places

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

- In 2022, 63.1% of children aged 10–17 reported that there are good places in their area to spend their free time. This decreased between 2018 and 2022.
- Among individual population groups, when compared to all other children, children with a disability and/or chronic illness were less likely to report that there are good places in their area to spend their free time. Traveller children and immigrant children were more likely to report having good places in their area to spend their free time, when compared to all other children (see *Table 129*).

Table 129. Percentage of children aged 10–17 who reported that there are good places in their area to spend their free time, by population group (2014–2022)

	2014	2018	2022
All children	61.5	67.2	63.1
Traveller status			
Traveller children	73.4	74.0	64.5
All children except Traveller children	61.3	67.0	62.9
Immigrant status			
Immigrant children	64.8	69.1	69.3
All children except immigrant children	60.9	66.9	62.6
Disability and/or chronic illness status			
Children with a disability and/or chronic illness	58.3	64.9	61.0
All children except those with a disability and/or chronic illness	62.3	67.8	63.5

Source: HBSC Survey

- A lower percentage of females than males reported that there are good places in their area to spend their free time (see *Table 130*).
- On average, the percentage of children who reported that there are good places in their area to spend their free time decreased with age from age 11 (see *Table 130*).
- The percentage of children who reported that there are good places in their area to spend their free time was lowest among the high social class group (see *Table 130*).



Table 130. Percentage of children aged 10–17 who reported that there are good places in their area to spend their free time, by age, gender, and social class (2018-2022)

	2018			2022		
	Male	Female	Total	Male	Female	Total
All children	69.1	65.4	67.2	65.7	60.5	63.1
Age						
10 years	78.0	77.4	77.7	65.1	84.4	73.5
11 years	78.7	76.9	77.9	78.3	72.2	75.1
12 years	74.3	71.2	72.7	74.6	71.2	72.8
13 years	70.7	67.9	69.2	72.0	68.4	70.2
14 years	61.8	58.1	59.8	63.3	57.6	60.4
15 years	55.8	54.4	55.0	58.6	54.2	56.6
16 years	52.6	47.2	49.7	61.1	45.3	53.1
17 years	51.2	43.3	47.2	45.5	46.0	45.8
Social class						
High	69.2	65.9	67.4	64.0	60.9	62.4
Middle	67.9	63.2	65.5	68.7	61.5	65.2
Low	68.4	66.7	67.5	65.6	62.6	64.0

Source: HBSC Survey

- The percentage of children who reported that there are good places in their area to spend their free time ranged from 50.7% in the Mid-West region to 73.4% in Dublin (see Table 131).

Table 131. Percentage of children aged 10–17 who reported that there are good places in their area to spend their free time, by NUTS region (2014–2022)

	2014	2018	2022
State	61.5	67.2	63.1
NUTS region			
Border	57.2	58.3	59.7
Midland	59.7	65.7	59.0
West	55.1	60.5	59.6
Dublin	77.3	63.5	73.4
Mid-East	59.6	63.6	62.5
Mid-West	54.9	59.9	50.7
South-East	55.7	78.1	61.2
South-West	53.9	65.9	64.1

Source: HBSC Survey



Garda Diversion Programme referrals

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

- In 2023, 7,843 children aged 10–17 were referred to the Garda Diversion Programme. Some children were referred more than once and so the total number of referrals was 15,813 (see *Table 132* and *Table 133*).
- 65% of those referred were aged 15–17 years. The rate per 1,000 of referrals among boys (19.1) was over twice as high as the rate of referrals among girls (7.0) (see *Table 132*).

Table 132. Number, percentage, and rate (per 1,000) of children aged 10–17 referred to the Garda Diversion Programme, by age and gender (2021–2023)

	2021			2022			2023		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total children	8,514	100	15.1	8,404	100	14.5	7,843	100	13.2
Sex									
Male	6,641	78	23.1	6,051	72	20.4	5,804	74	19.1
Female	1,873	22	6.8	2,353	28	8.3	2,039	26	7.0
Age									
10–14 years	2,214	26	6.1	2,857	34	7.6	2,745	35	7.2
15–17 years	6,300	74	31.6	5,547	66	26.9	5,098	65	23.8

Rates based on population estimates for 2021 and 2023 and Census data for 2022.

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

Source: The Garda Diversion Programme

- 55.8% of referrals were deemed suitable for admission to the Garda Diversion Programme and received either a formal or informal caution. Over the period 2021 to 2023, the number of children referred to the Garda Diversion Programme decreased by 7.9% (see *Table 132* and *Table 133*).

Table 133. Number and percentage of referrals of children aged 10–17 to the Garda Diversion Programme, by outcome (2021–2023)

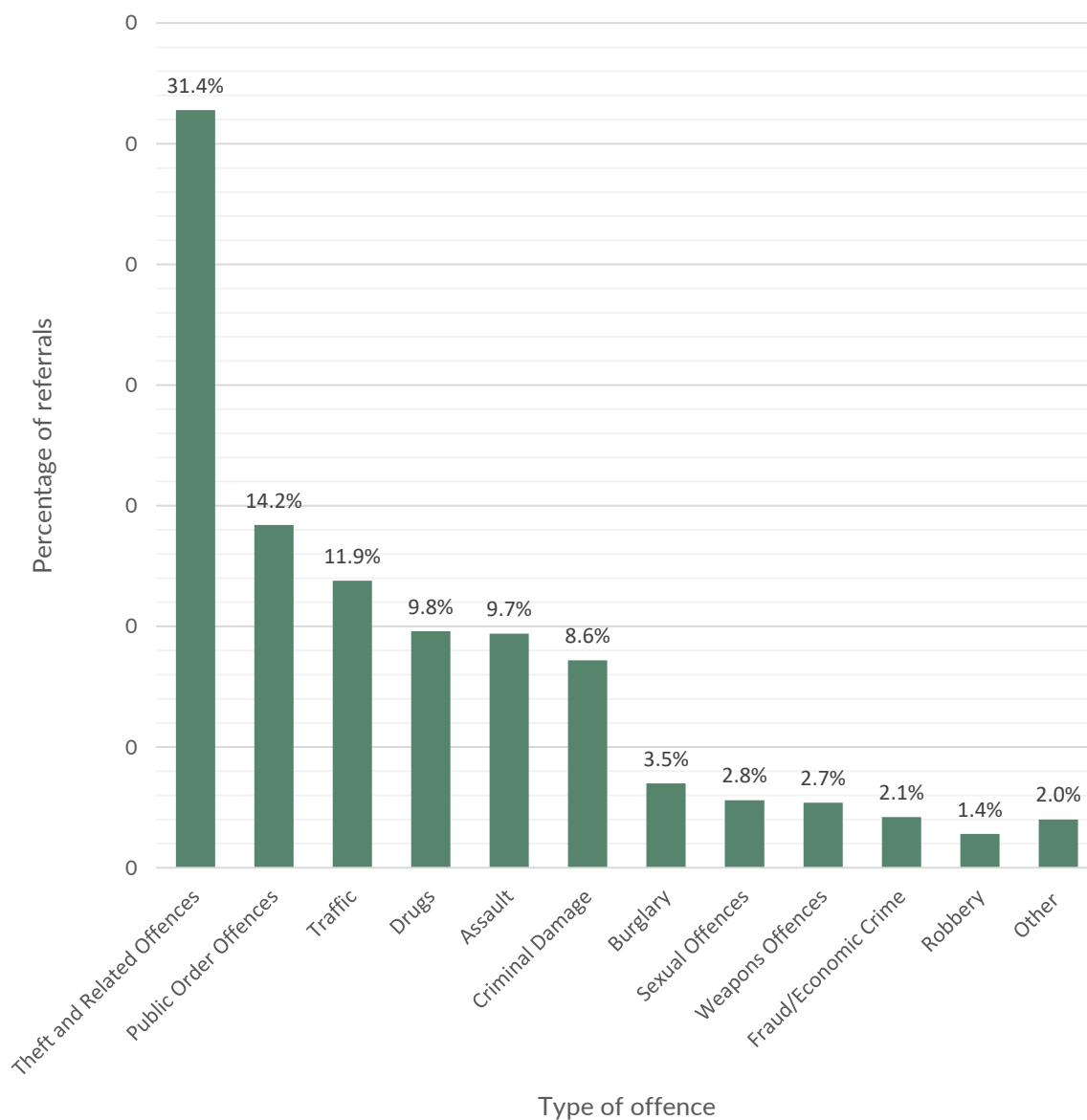
	2021		2022		2023	
	No.	%	No.	%	No.	%
Total referrals	15,090	100	15,719	100	15,813	100
Outcome						
Formal caution	3,552	23.5	3,658	23.3	3,904	24.7
Informal caution	5,336	35.4	5,480	34.9	4,924	31.1
Not suitable	4,106	27.2	4,735	30.1	5,194	32.8
Other outcome	2,096	13.9	1,846	11.7	1,791	11.3

Source: The Garda Diversion Programme



- “Theft and related offences” was the single highest cause of referrals to the Garda Diversion Programme, representing 31.4% of all referrals (see *Figure 28*).

Figure 28. Percentage of referrals to the Garda Diversion Programme, by type of offence (2024)



Source: The Garda Diversion Programme

- The rate of children referred to the Garda Diversion Programme per 1,000 children ranged from 8.3 in Cork West to 25.7 in D.M.R. North Central.
- The rate of referrals per 1,000 children ranged from 13.2 in Cork West to 72.2 in D.M.R. North Central.



Table 134. Number and rate (per 1,000) of children aged 10–17 referred and all referrals to the Garda Diversion Programme, by region and division (2023)

	Children referred		All referrals		Average no. of referrals per child
	No.	Rate	No.	Rate	
State	7,843	13.5	15,813	27.2	2.0
Dublin Region	2,274	15.4	5,450	36.9	2.4
D.M.R. Eastern	195	8.9	363	16.7	1.9
D.M.R. North Central	166	25.7	466	72.2	2.8
D.M.R. Northern	634	15.3	1,727	41.7	2.7
D.M.R. South Central	131	14.8	348	39.2	2.7
D.M.R. Southern	469	17.6	1,006	37.9	2.1
D.M.R. Western	679	15.9	1,540	36.0	2.3
Eastern Region	1,950	11.8	3,964	23.9	2.0
Kildare	303	9.9	558	18.2	1.8
Laois/Offaly	280	13.2	619	29.2	2.2
Meath/Westmeath	434	10.7	1066	26.2	2.5
Waterford/Kilkenny/Carlow	544	15.5	1069	30.5	2.0
Wexford/Wicklow	389	10.2	652	17.0	1.7
North Western Region	1620	12.8	2725	21.5	1.7
Donegal	295	14.6	434	21.5	1.5
Galway	395	12.9	668	21.8	1.7
Louth/Cavan/Monaghan	482	13.4	824	23.0	1.7
Mayo/Roscommon/Longford	328	11.7	531	18.9	1.6
Sligo/Leitrim	120	10.1	268	22.5	2.2
Southern Region	1937	13.9	3598	25.7	1.9
Clare/Tipperary	492	14.6	912	27.1	1.9
Cork City	392	14.4	843	31.0	2.2
Cork North	275	12.7	472	21.8	1.7
Cork West	141	8.3	224	13.2	1.6
Kerry	246	14.8	386	23.3	1.6
Limerick	391	16.4	761	31.9	1.9
Outside Jurisdiction/ Not Assigned Region	62		76		

Rates based on regional and divisional populations at Census 2022

D.M.R. = Dublin Metropolitan Region

Source: The Garda Diversion Programme



Antenatal care

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

- In 2024, 90.7% of pregnant women attended antenatal care in the first trimester of pregnancy, this represents a slight decrease from 2022 (see *Table 135*).
- The percentage of women attending antenatal care in the first trimester of pregnancy increased from 82% in 2018 to 90.7% in 2024.
- In 2024, antenatal care in the first trimester of pregnancy was lowest among pregnant women and girls aged 15–19 years (75.1%) and highest among those aged 35–39 (92.6%) (see *Table 135*).

Table 135. Percentage of pregnant women attending antenatal care in the first trimester of pregnancy, by age (2018–2024)

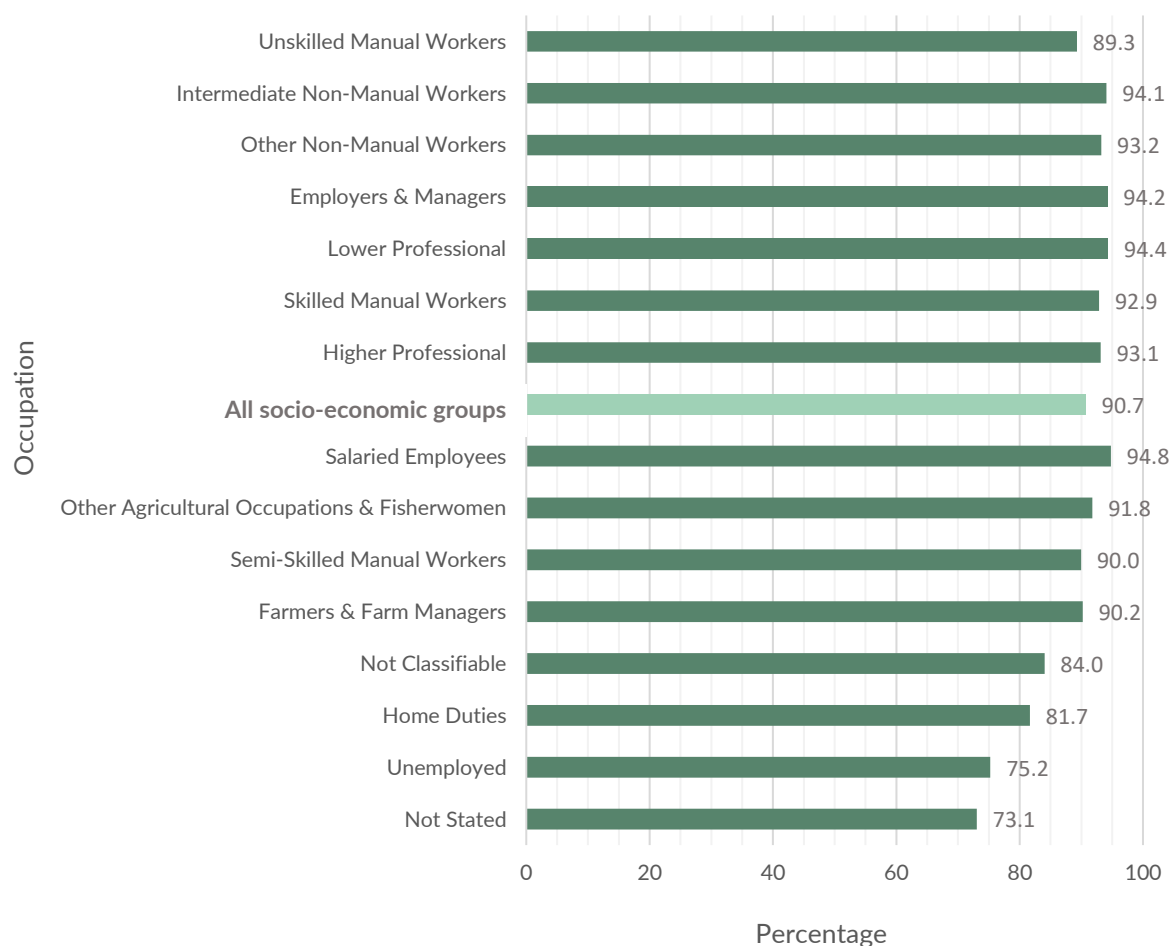
	2018	2019	2020	2021	2022	2023	2024
Total	82	88.3	90.9	89.4	90.6	89.5	90.7
Age							
15–19 years	67.9	75.8	75.5	73	77	73.5	75.1
20–24 years	77.3	81.3	84.1	82.8	85.5	84.0	83.8
25–29 years	80.3	86.2	89.3	88.2	89.1	87.4	88.3
30–34 years	83.6	89.9	92.6	90.6	91.7	90.7	92.2
35–39 years	83.2	89.9	92.4	90.9	92	91.2	92.6
40–44 years	82.3	88.8	90.7	88.4	90.9	89.7	91.4
45 years and over	77.4	87.7	88.3	84.8	86.4	90.4	88.8

Source: Healthcare Pricing Office



- Women who were unemployed or reported their occupation as home duties had the lowest attendance at antenatal visits in the first trimester of pregnancy (75.2% and 81.7% respectively) (see Figure 29).

Figure 29. Percentage of pregnant women attending antenatal care in the first trimester of pregnancy, by occupation (2024) 

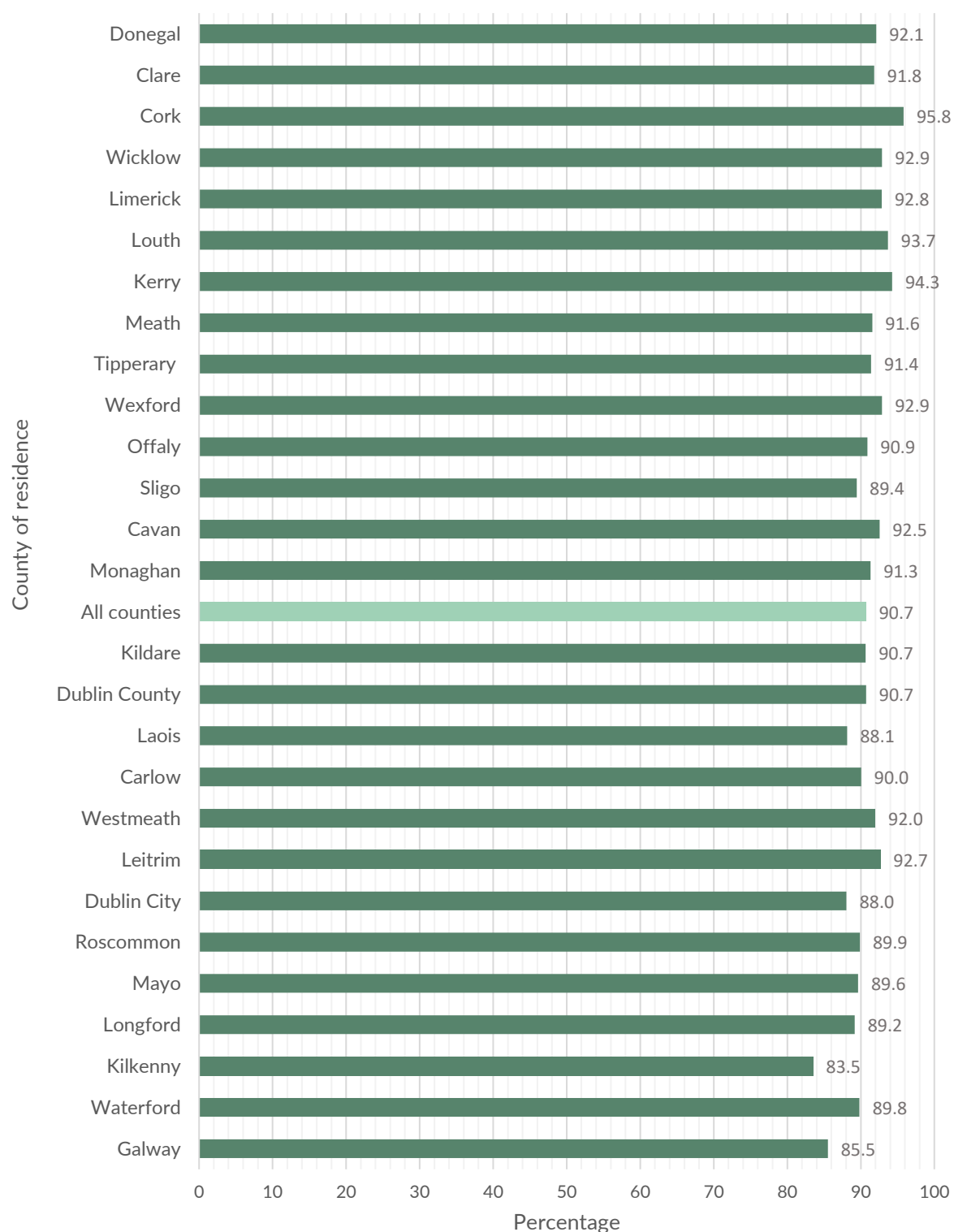


Source: Healthcare Pricing Office

- In 2024, the percentage of women attending antenatal care in the first trimester of pregnancy ranged from 83.5% in Kilkenny to 95.8% in Cork (see Figure 30).



Figure 30. Percentage of pregnant women attending antenatal care in the first trimester of pregnancy, by county of residence (2024) 



Source: Healthcare Pricing Office



Public health nurse visit

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

- In 2024, 98.8% of newborns were visited by a public health nurse within 72 hours of discharge from hospital for the first time.
- In 2024, the percentage of newborns visited by a public health nurse for the first time within 72 hours of discharge from hospital ranged from 91.3% in Dún Laoghaire to 100% in many local health offices (see *Table 136*).

Table 136. Percentage of newborns visited by a public health nurse within 72 hours of discharge from hospital for the first time, by Local Health Office (2020–2024)

	2020	2021	2022	2023	2024
State	96.3	97.8	98.4	98.8	98.8
Local Health Office					
Cavan/Monaghan	94.8	81.8	92.1	100	99.7
Donegal	100	99.8	100	98.0	98.1
Sligo/Leitrim	99.9	100	100	97.8	96
Galway	99.0	99.0	138.8	99.2	98.3
Mayo	99.2	99.0	34.8	96.9	98.9
Roscommon	98.0	99.0	98.9	99.5	99.5
Clare	100	99.9	99.7	99.1	100
Limerick	104	98.3	100	100	100
North Tipperary/East Limerick	103.5	99.3	100	98.6	100
Kerry	99.9	100	100	100	95.9
North Cork	99.7	99.9	100	99.3	98.3
North Lee	100.5	100.9	99.6	100	99.5
South Lee	98.3	98.8	96.8	99.5	100
West Cork	98.6	100.5	100	100	100
Carlow/Kilkenny	97.0	95.7	98.9	100	98.6
South Tipperary	99.6	99.7	100	100	100
Waterford	100	100	99.4	100	99.9
Wexford	98.5	100	100	97.4	99.6
Dublin South East	NA	94.1	NA	99.5	99.6
Dún Laoghaire	100	97.2	88.8	93.2	91.3
Wicklow	NA	96.6	98.6	97.7	98.5
Dublin South City	100	100	100	100	100
Dublin South West	89.2	97.8	99.7	100	98.7
Dublin West	100	102	100	100	100
Kildare/West Wicklow	100	100	100	100	100
Laois/Offaly	100	100	100	100	100
Longford/Westmeath	100	99.4	100	100	100
Louth	94.8	93.6	93.4	100	100
Meath	89.5	89.7	90.9	90.4	93.8
Dublin North	66.6	97.8	100	100	98.9
Dublin North Central	95.3	98.2	96.7	99.5	98.8
Dublin North West	95.0	100	98.3	100	98.9

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

Source: HSE



Developmental health screening

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

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

- In 2024, 86.5% of newborn children had their 9–11 month developmental check on time.
- The percentage of newborns who had their 9–11 month developmental check on time ranged from 37% in Dublin West to 99.8% in West Cork (see *Table 137*).

Table 137. Percentage of children who have had their developmental health screening before reaching 12 months of age, by Local Health Office (2021-2024)

	2021	2022	2023	2024
State	59.8	85.4	85.9	86.5
Local Health Office				
Cavan/Monaghan	NA	85.8	72.4	89.5
Donegal	71.4	83.5	84.7	88.1
Sligo/Leitrim	34.1	91.3	98.8	85.4
Galway	41.0	80.4	78.3	84.1
Mayo	60.8	83.0	100	90.7
Roscommon	46.2	98.7	91.4	94.7
Clare	86.4	97.8	93.2	98.9
Limerick	45.5	86.5	87.2	84
North Tipperary/East Limerick	62.1	89.6	80.2	88.2
Kerry	69.2	91.1	93.0	89.5
North Cork	90.3	87.0	88.0	96.1
North Lee	89.5	82.4	85.8	93.2
South Lee	92.5	91.6	71.4	91.4
West Cork	91.1	100	98.0	99.8
Carlow/Kilkenny	94.4	93.4	95.9	95.3
South Tipperary	78.5	98.8	98.7	97.1
Waterford	24.8	76.7	77.2	83.6
Wexford	19.2	47.0	52.6	63.1
Dublin South East	12.1	60.0	91.7	92.1
Dún Laoghaire	18.3	50.8	100	70.1
Wicklow	53.4	82.9	94.5	95
Dublin South City	60.4	74.1	56.5	64
Dublin South West	75.9	80.5	72.6	57.5
Dublin West	76.2	66.2	45.3	37
Kildare/West Wicklow	74.5	107.4	100	94.3
Laois/Offaly	36.1	95.2	96.1	96.5
Longford/Westmeath	58.9	97.0	96.7	96.6
Louth	65.0	93.5	93.5	92.7
Meath	80.1	92.9	91.2	95.4
Dublin North	56.9	87.7	89.8	84.7
Dublin North Central	40.1	97.8	95.7	84.4
Dublin North West	65.8	85.2	95.7	95.9

Source: HSE



Childhood immunisation

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

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

- In 2024, uptake rates of each of the vaccines D₃, Hib₃, and HepB₃ were 87% at 12 months and 92% at 24 months, down from 89% at 12 months and 94% at 24 months in 2018.

Table 138. Immunisation uptake rates (%), by age and vaccine type (2018–2024)

	2018	2019	2020	2021	2022	2023	2024
At 12 months							
D ₃	89	90	88	87	87	86	87
Hib ₃	89	90	88	87	87	86	87
HepB ₃	89	90	88	87	87	86	87
MenC ₁	89	90	88	87	87	86	87
PCV ₂	89	90	88	87	87	86	87
Polio ₃	89	90	88	87	87	86	87
T ₃	89	90	88	87	87	86	87
P ₃	89	90	88	87	87	86	87
At 24 months							
D ₃	94	94	94	94	93	93	92
Hib ₃	94	94	94	93	93	93	92
HepB ₃	94	94	94	93	93	93	92
PCV _b	91	88	88	87	85	85	86
MMR ₁	92	91	92	90	90	89	90
Hib _b	90	90	89	88	87	87	87
MenC ₂	87	86	86	85	83	81	83
Polio ₃	94	94	94	94	93	93	92
T ₃	94	94	94	94	93	93	92
MenC _b	88	89	89	88	86	86	87
PCV ₃	90	86	87	85	84	83	84
P ₃	94	94	94	94	93	93	92

Source: [Health Protection Surveillance Centre](#)

- In 2024, for children at 12 months of age, uptake rates among Local Health Offices (LHOs) for D₃, P₃, T₃, and Polio₃ ranged from 81% to 94%.
- Uptake rates among LHOs for MenC₁ and PCV₂ ranged from 81% to 95%.



Table 139. Immunisation uptake rates (%) at 12 months, by vaccine type and Local Health Office (2024)

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

Source: Health Protection Surveillance Centre

- In 2024, for children at 24 months of age, uptake rates among Local Health Offices (LHOs) for D₃, P₃, T₃, Polio₃, HepB₃, and Hib₃ ranged from 87% to 96%.
- Uptake rates for MMR₁ ranged from 84% to 94%.
- Uptake rates for PCV₃ ranged from 75% to 97%.
- Uptake rates for PCV_b ranged from 78% to 91%.
- Uptake rates for MenC₂ ranged from 75% to 90%.
- Uptake rates for MenC_b ranged from 79% to 91%.



Table 140. Immunisation uptake rates (%) at 24 months, by vaccine type and Local Health Office (2024)

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

NA = not available

Source: Health Protection Surveillance Centre

- In 2024, uptake rates across the EU-28 for D₃, P₃, and T₃ and Polio₃ ranged from 79% in Romania to 99% in Hungary, Luxembourg, and Portugal.
- Uptake rates across the EU-28 for Polio₃ ranged from 79% in Romania to 99% in Hungary, Luxembourg, and Portugal.
- Uptake rates across the EU-28 for the first dose of measles-containing vaccine ranged from 62% in Romania to 99% in Hungary.



Table 141. Immunisation uptake rates (%) among children of relevant age*, by vaccine type and EU-28 country (2024)

	D ₃ , P ₃ , and T ₃	Polio ₃	Measles-containing vaccine
Country			
Austria	85	85	84
Belgium	97	98	82
Bulgaria	94	94	91
Croatia	92	92	89
Cyprus	94	94	97
Czechia	86	86	89
Denmark	96	96	93
Estonia	81	81	74
Finland	91	91	92
France	96	96	93
Germany	89	88	92
Greece	95	95	71
Hungary	99	99	99
Ireland	92	92	90
Italy	94	94	84
Latvia	97	97	88
Lithuania	89	89	85
Luxembourg	99	99	94
Malta	97	97	86
Netherlands	91	91	81
Poland	94	86	82
Portugal	99	99	96
Romania	79	79	62
Slovakia	96	96	94
Slovenia	90	90	89
Spain	94	94	92
Sweden	96	95	92
United Kingdom	92	92	85

Source: World Health Organization

*Data for of D₃, P₃, and T₃ and Polio₃ vaccination rates relates to coverage among 1 year olds, data for a Measles-containing vaccine relates to coverage among children of the locally recommended age for vaccination



Accessibility of basic health services

Measure: The number of children on hospital waiting lists

- As of December 2023, there were 10,005 children on an inpatient/day case (IPDC) waiting list and 77,682 children on an outpatient (OP) waiting list.
- Of those children on an IPDC waiting list, 10.9% were waiting between 12 and 18 months, and a further 11.0% were waiting 18 months or more. The corresponding percentages for children on OP waiting lists were 9.9% and 9.1%, respectively (see Table 142 and Table 143).
- The number of children on an IPDC waiting list increased by 32.5% between 2020 and 2023. The number of children on an OP waiting list has been more variable and is at its lowest of the period in 2023 (see Table 142 and Table 143).

Table 142. Number and percentage of children on inpatient/day case waiting lists, by waiting time (2020–2023)

	2021		2022		2023		2024	
	No.	%	No.	%	No.	%	No.	%
Total	7,944	100	8,959	100	10,005	100	9,266	100
Waiting time								
Less than three months	2,809	35.4	3,377	37.7	3,091	30.9	3,502	37.8%
3–6 months	1,466	18.5	1,896	21.2	2,184	21.8	1,654	17.9%
6–9 months	837	10.5	1,173	13.1	1,431	14.3	1,243	13.4%
9–12 months	629	7.9	652	7.3	1,106	11.1	797	8.6%
12–15 months	530	6.7	555	6.2	664	6.6	730	7.9%
15–18 months	349	4.4	294	3.3	430	4.3	401	4.3%
18 months or more	1,324	16.7	1,012	11.3	1,099	11.0	939	10.1%

Source: National Treatment Purchase Fund

Table 143. Number and percentage of children on outpatient waiting lists, by waiting time (2020–2023)

	2021		2022		2023		2024	
	No.	%	No.	%	No.	%	No.	%
Total	83,377	100	83,239	100	77,682	100	73,764	100
Waiting time								
Less than three months	21,648	26	26,739	32.1	25,831	33.3	26,440	35.8%
3–6 months	13,861	16.6	15,503	18.6	15,683	20.2	14,332	19.4%
6–9 months	8,779	10.5	11,805	14.2	12,638	16.3	11,817	16.0%
9–12 months	5,700	6.8	7,148	8.6	8,773	11.3	7,507	10.2%
12–15 months	5,497	6.6	5,522	6.6	4,578	5.9	5,022	6.8%
15–18 months	3,408	4.1	3,791	4.6	3,075	4.0	2,768	3.8%
18 months or more	24,484	29.4	12,731	15.3	7,104	9.1	5,878	8.0%

Source: National Treatment Purchase Fund



Children and young people in care

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

- In December 2024, there were 5,705 children in the care of Tusla, the Child and Family Agency.
- The number of children aged 5-9 years in the care of Tusla decreased by 1.3% between 2022 and 2024 (see *Table 144*).
- Overall 4.6 children per 1,000 were in care in 2024 (see *Table 144*).
- More children (62.4%) were in general foster care in 2023 than in any other type of placement (see *Table 144*)
- A greater proportion (51.0%) of those in care were male (see *Table 144*).

Table 144. Number, percentage, and rate (per 1,000) of children in the care of Tusla, by age, gender, and type of placement (2022–2024)

	2022			2023			2024		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	5,626	100	4.6	5,615	100	4.6	5,705	100.0	4.6
Age									
Under 5 years	647	11.5	2.2	706	12.6	2.4	767	13.4	2.6
5–9 years	1,461	26.0	4.3	1,425	25.4	4.2	1,407	24.7	4.3
10–14 years	2,083	37.0	5.6	2,044	36.4	5.5	2,071	36.3	5.5
15–17 years	1,435	25.5	7.0	1,440	25.6	7.0	1,460	25.6	6.4
Gender									
Male	2,883	51.2	4.6	2,880	51.3	4.6	2,911	51.0	4.6
Female	2,733	48.6	4.6	2,726	48.5	4.6	2,782	48.8	4.6
Type of placement									
General foster care	3,621	64.4	3.0	3,560	63.4	2.9	3,561	62.4	2.9
Relative foster care	1,453	25.8	1.2	1,474	26.3	1.2	1,496	26.2	1.2
Residential care	389	6.9	0.3	410	7.3	0.3	457	8.0	0.4
Other care placements	163	2.9	0.1	171	3.0	0.1	191	3.3	0.2

Notes: Rates from 2022 onwards based on Census 2022; Data for all years (2022-2024) does not include separated children seeking international protection; Gender not included for 12 children for 2024 as no category 'other'

Source: Tusla, the Child and Family Agency



- Rates ranged across administrative areas, from 2.3 per 1,000 in Dublin South East/Wicklow, to 9.5 per 1,000 in Dublin North City (see *Table 145*).

Table 145. Number and rate (per 1,000) of children in the care of Tusla, by administrative area (2022–2024)

	2022		2023		2024	
	No.	Rate	No.	Rate	No.	Rate
All Tusla regions	5,626	4.6	5,615	4.6	5,705	4.6
Tusla Dublin North East	1,406	4.9	1,433	5.0	1,474	5.0
Cavan/Monaghan	149	4.0	157	4.2	167	4.5
Dublin North	374	3.6	388	3.7	424	4.1
Dublin North City	463	9.5	460	9.4	465	9.5
Louth Meath	420	4.4	428	4.4	418	4.3
Tusla Dublin Mid Leinster	1,301	3.7	1,244	3.5	1,306	3.7
Dublin South Central	355	5.1	335	4.8	332	4.7
Dublin South East/Wicklow	205	2.3	194	2.1	209	2.3
Dublin South West/Kildare/West Wicklow	413	3.8	393	3.6	419	3.8
Midlands	328	4.1	322	4.0	346	4.3
Tusla South	1,575	5.2	1,616	5.3	1,579	5.2
Carlow/Kilkenny/South Tipperary	307	4.9	319	5.1	308	4.9
Cork	706	5.2	705	5.2	667	4.9
Kerry	158	4.5	165	4.7	174	5.0
Waterford/Wexford	404	5.8	427	6.2	430	6.2
Tusla West	1,344	4.9	1,322	4.8	1,346	4.9
Donegal	217	5.1	213	5.1	236	5.6
Galway/Roscommon	350	4.3	356	4.4	344	4.2
Mayo	137	4.3	141	4.4	146	4.6
Midwest	531	5.5	504	5.2	501	5.2
Sligo/Leitrim/West Cavan	109	4.5	108	4.4	119	4.9

Notes: Rate for 2022 onwards based on regional populations at Census 2022; Data for all years (2022–2024) does not include separated children seeking international protection

Source: Tusla, the Child and Family Agency



Mental health referrals

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

- In 2024, there were 332 admissions of children to psychiatric hospitals/units and child and adolescent units, this equates to 26.9 per 100,000 children (see *Table 146*).
- 79.8% of children admitted to psychiatric hospitals/units and child and adolescent units in 2024 were aged 15–17 (see *Table 146*).
- 34.0% of children admitted to psychiatric hospitals/units and child and adolescent units were male and the remaining 66.0% were female (see *Table 146*).
- Among children, “neuroses” (46.1%) followed by “depressive disorders” (16.9%) were the most common reason for admission to hospitals/units and child and adolescent units (see *Table 146*).

Table 146. Number, percentage and rate (per 100,000) of admissions to psychiatric hospitals/units and child and adolescent units, by age, gender, and diagnosis (2019–2024)

	2019	2020	2021	2022	2023	2024		
	No.	No.	No.	No.	No.	No.	%	Rate
Total	497	486	509	366	322	332	100	26.9
Age								
Under 5 years	0	0	0	0	0	0	0	0
5–9 years	0	0	0	0	0	0	0	0
10–14 years	84	113	99	79	81	67	20.2	17.5
15–17 years	413	373	410	287	241	265	79.8	119.2
Gender								
Male	175	136	143	96	90	113	34.0	17.9
Female	322	350	366	270	232	219	66.0	36.4
Diagnosis								
Alcoholic disorders	0	0	0	0	0	<5	-	-
Depressive disorders	179	164	158	0	96	56	16.9	4.5
Drug dependence	15	7	13	8	5	17	5.1	1.4
Mania	16	25	26	91	12	12	3.6	1.0
Intellectual disability	0	0	1	0	~	0	0	0
Neuroses	126	148	168	12	134	153	46.1	12.4
Organic psychoses	6	7	6	6	6	8	2.4	0.6
Other psychoses	57	42	50	34	40	44	13.3	3.6
Personality disorders	42	26	50	182	15	~	-	-
Schizophrenia	14	8	15	14	<5	8	2.4	0.6
Unspecified	42	59	22	19	11	27	8.1	2.2

Notes: Rates are based on the most recently available population estimates for each period. However, in Table 147 county rates are based on Census 2022 due to limitations in availability of population estimates by geographic regions. Many of the diagnostic categories/groupings listed in the table have been updated in the National Psychiatric Inpatient Reporting System (NPIRS) in line with the updated ICD 11 but are retained here to allow for comparison with previous years. Some of the terminology has also been updated in NPIRS, to reflect this we have updated the diagnostic category previously labelled as 'Mental handicap' to 'Intellectual disability'.

~ Further suppression of data required to prevent disclosure of individuals.

Source: Health Research Board



- The rate of admission of children to psychiatric hospitals/units and child and adolescent units was highest in Wicklow, with 46.2 admissions per 100,000 children (see Table 147).

Table 147. Number and rate (per 100,000) of admissions to psychiatric hospitals/units and child and adolescent units, by county of residence (2024)

	No. of children	Rate
State	332	26.9
County of residence		
Carlow	<5	N/A
Cavan	8	37.4
Clare	7	22.9
Cork	25	18.3
Donegal	8	19.3
Dublin	140	43.7
Galway	18	27.8
Kerry	<5	N/A
Kildare	19	29.6
Kilkenny	<5	N/A
Laois	6	24.4
Leitrim	<5	N/A
Limerick	13	27.3
Longford	<5	N/A
Louth	10	28.3
Mayo	<5	N/A
Meath	15	24.9
Monaghan	<5	N/A
Offaly	<5	N/A
Roscommon	<5	N/A
Sligo	<5	N/A
Tipperary	7	17.3
Waterford	<5	N/A
Westmeath	<5	N/A
Wexford	6	15.2
Wicklow	18	46.2

Notes: The rate calculated for the State is based on population estimates as in Table 146. However, county rates are based on county populations at Census 2022 due to limitations in availability of population estimates by geographic regions.

Source: Health Research Board



APPENDICES





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



Census of the Population and Population Estimates: Central Statistics Office

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

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

Maternal education level data refer to the highest educational attainment of the mother. This data refers to mothers of children in family units only, rather than to all children. Note this is a change to the methodology used in previous SONC publications. 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 2022 Census, which distinguishes between the following main categories:

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



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

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

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

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

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

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

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

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

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

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

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

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



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

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

There was a small change to Question 23 for Census 2022: “Do you provide regular unpaid personal help or support to a family member, neighbour or friend with a long-term illness, health issue, an issue related to old age or disability?”. In 2016 respondents were asked “Do you provide regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability?” This included problems which are due to old age. Personal help includes help with basic tasks such as feeding or dressing.

Calculation of annual population estimates

The annual population estimates for mid-April are calculated by trending forwards the previous Census of Population data. For example, the base population data for estimating the April 2023 figure was the number of males and females in each region by single year of age and nationality as established by the 2022 Census. From this base, each person was aged by one year, births for the period were added and deaths were subtracted. The estimated number of immigrants was then added and the number of emigrants was subtracted. Allowance was also made for estimated inter-regional migration in arriving at the final 2023 figures. No estimates are made for the population of children in counties for intercensal years. In this publication, “Rates per county” calculations for years subsequent to 2022 continue to use the 2022 Census of Population county figures.

Centralised Information System for Infectious Diseases: World Health Organization

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

- The percentage uptake of the recommended doses of vaccines among children at (a) aged one year old (b) the locally recommended age.



Education Statistics Database: Department of Education

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

- Leaving Certificate retention rates
- Public expenditure on education.

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

Non-capital public expenditure on education includes direct public expenditure on educational institutions, public subsidies to other private entities for education matters and public subsidies to households, such as scholarships and loans to students for tuition fees and student living costs. The expenditure has been deflated to real prices by using the National Accounts series for net expenditure by Central and Local Government on current goods and services at base year 2013. Public expenditure on education as used for the international comparison includes both current and capital expenditure. In the mid-1990s, undergraduate tuition fees were abolished in Ireland. Educational institutions are defined as entities that provide instructional services to individuals or education-related services to individuals and other educational institutions.

Data on total public expenditure on education (primary, secondary and tertiary levels) are expressed as a percentage of Modified Gross National Income (GNI*), while in previous editions of SONC this expenditure was expressed as a measure of Gross Domestic Product (GDP). GNI* was developed to measure the size of the Irish economy more accurately than GDP, by excluding some globalised economic activities. Unlike GDP, Gross National Income (GNI) excludes the net profits of companies that have been sent abroad, and GNI* is a modification of this by for which the depreciation of intellectual property, depreciation on leased aircraft and the net factor income of redomiciled PLCs, are also excluded. The resulting figure is considered to be a more meaningful indicator of Irish economic performance, than either GDP or unmodified GNI.

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



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

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

- **At risk of poverty:** The percentage of individuals (children in the case of this report) living in households with an equivalised household disposable income below 60% of the median equivalised household disposable income.
- **Consistent poverty:** The percentage of individuals (children in the case of this report) living in households with an equivalised household disposable income below 60% of the median equivalised household disposable income who experienced at least two forms of enforced deprivation.
- **Childcare arrangements:** The percentage of children in formal childcare or education by age group and duration over the population of each age group.

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

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



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

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

In relation to childcare arrangements, the participation rates in formal childcare or education are calculated by combining the participation rates for the cohorts captured in the EU-SILC table: “Children in formal childcare or education by age group and duration - % over the population of each age group - EU-SILC survey”. The cohorts comprise of the sum of participation rates for those attending from 1 to 29 hours and those attending 30 hours or more.

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



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

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

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



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

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

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

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

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

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

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

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

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



Notes:

- The overall percentages in the data for 2010 were weighted and therefore results may differ to earlier years.
- The data for 2014 referred to "Percentage of children who reported being physically active for at least 60 minutes per day on four or more days per week". This has been amended to "Percentage of children who reported being physically active for at least 60 minutes per day on more than four days per week" in line with the data presented for earlier years.
- International comparisons are based on data from children aged 11, 13, and 15 only and for 15 only for sexual intercourse.
- A different approach was employed to data cleaning for the national data on having had sexual intercourse compared to the international data in 2022. In the national data, young people who said they have not had sex but subsequently answered the age at first sex, condom use and pill use questions (implying they had sex) are included in the sexual initiation question as well. This is not the approach taken for the international analysis.

Hospital In-Patient Enquiry: Healthcare Pricing Office

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

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

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

The principal diagnosis is defined as "The diagnosis established after study to be chiefly responsible for occasioning an episode of admitted patient care, an episode of residential



care or an attendance at the health care establishment, as represented by a code" (METeOR: 391326) (Australian Institute of Health and Welfare 2012) [extracted from NCCC eBook, July 2013, General Standards for Diseases].

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

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

National Ability Support System: Health Research Board

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

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

Since 2019, when data were first available from NASS, only some special schools and a small number of the HSE's Early Intervention Teams and School-Age Teams were returning information to NASS. In order to improve the coverage of children on NASS in 2022, the Health Research Board (HRB) NASS team and HSE NASS personnel in the CHO areas undertook a project to register the caseloads of the Children's Network Disability Teams



(CDNTs) on NASS. As part of the 2022 data collection, the 91 new CDNTs were asked to submit all relevant available data from their current caseloads to NASS, where possible, given the teams' existing resourcing issues. A total of 43,759 children were recorded as being on the caseload of a CDNT in 2022. Of these, 30,251 were new registrations on NASS. The remainder (13,508) were existing records previously held on NASS. A total of 47,550 children were registered on NASS in 2022 for various disability types.

The following indicators draw on data from NASS:

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

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



National Perinatal Reporting System: Health Pricing Office

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

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

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

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

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



National Psychiatric In-Patient Reporting System: Health Research Board

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

The following indicator draws on data from the NPIRS:

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

National Self-Harm Registry Ireland: National Suicide Research Foundation

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

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



Outturn of Quarterly Performance Indicator Returns: Health Service Executive

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

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

Notes:

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

Patient Treatment Register: National Treatment Purchase Fund

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

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

Hospitals contributing to PTR:

Bantry General Hospital; Beaumont Hospital; Cappagh National Orthopaedic Hospital; Cavan General Hospital; CHI at Crumlin; CHI at Tallaght; CHI at Temple St; Connolly Hospital Blanchardstown; Cork University Hospital; Cork University Maternity Hospital; Croom Orthopaedic Hospital; Ennis Hospital; Galway University Hospitals; Letterkenny University Hospital; Lourdes Orthopaedic Hospital Kilcreene; Louth County Hospital; Mallow General Hospital; Mater Misericordiae University Hospital; Mayo University Hospital; Mercy



University Hospital; Merlin Park Hospital Galway; Midland Regional Hospital Mullingar; Midland Regional Hospital Portlaoise; Midland Regional Hospital Tullamore; Monaghan Hospital; Naas General Hospital; Nenagh Hospital; Our Lady of Lourdes Hospital Drogheda; Our Lady's Hospital Navan; Portiuncula University Hospital; Roscommon University Hospital; Rotunda Hospital; Royal Victoria Eye and Ear Hospital; Sligo University Hospital; South Infirmary Victoria University Hospital; South Tipperary General Hospital; St. Columcille's Hospital; St. James's Hospital; St. John's Hospital Limerick; St. Luke's General Hospital Kilkenny; St. Michael's Hospital; St. Vincent's University Hospital; Tallaght University Hospital; University Hospital Kerry; University Hospital Limerick; University Hospital Waterford; Wexford General Hospital.

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

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

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

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

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



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

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

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

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

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

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

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

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



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

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

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

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

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

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

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



concern provides a more accurate account of activity and demand on child protection and welfare services. The following indicator draws on data from this source:

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

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

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

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

The 2013 summary was the first to be carried out under the new assessment regime commenced by the Social Housing Assessment Regulations 2011. In light of the statutory changes introduced in 2011, the methodology used to collect the 2013 data differs substantially from that used in previous years and therefore the 2013 figures are not directly comparable to previous years. The methodologies used to collect the 2008 and 2011 data also differed. These differences limit comparisons between the years. 2013 and 2016 are the only two years that are directly comparable in terms of the data collected. In preparing the 2013 assessment, Local Authorities reviewed their waiting lists to confirm that those on the list were still seeking and in need of social housing. Data represent net need for social housing support, meaning households that have been assessed as being qualified for support (i.e. deemed eligible and in need of support) and whose housing need has not been met. These figures are net of duplicate applications (i.e. applicants who have applied to more than one Local Authority), those households appearing on multiple lists in different authorities, and households already in receipt of Social Housing Support, e.g. those in RAS, in receipt of HAP, or those that have applied for a transfer. The 2013 figures on the breakdown of households with children in Templemore, Co Tipperary are unavailable. Due to this omission, percentages are calculated on the basis of 89,744 households on the waiting list for social housing, as opposed to the complete figure of 89,872 households.

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



Vital Statistics: Central Statistics Office

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

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

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

WHO European Childhood Obesity Surveillance Initiative: National Nutrition Surveillance Centre

The WHO European Childhood Obesity Surveillance Initiative is conducted in Ireland by the National Nutrition Surveillance Centre. This survey collects the weight, height and waist circumference of first class children (aged 6–7 years). The following indicator draws on data from this source:

- The percentage of first class children in BMI categories “normal”, “overweight”, and “obese”.

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



Appendix 2: EU country classifications



EU-27

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

EU-28

The EU-28 (including the United Kingdom), and the EU-27 (excluding the United Kingdom) are used in different sections of SONC according to the most recently available data. EU-28 became EU-27 in February 2020.



Appendix 3: NUTS classifications



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

Changes made under the 2014 Local Government Act prompted a revision to the Irish NUTS 2 and NUTS 3 Regions. These changes included the amalgamation of the local authorities of Tipperary North and South, Limerick City and County Councils and Waterford City and County Councils. Additionally, three Regional Assemblies were established (Northern & Western, Southern, Eastern & Midland).

NUTS2 Code	NUTS 2 Name	NUTS3 Code	NUTS 3 Name	County
IE04	Northern & Western	IE041	Border	Donegal
				Sligo
				Leitrim
				Cavan
				Monaghan
		IE042	West	Galway
				Mayo
				Roscommon
IE05	Southern	IE051	Mid-West	Clare
				Tipperary
				Limerick
		IE052	South East	Waterford
				Kilkenny
				Carlow
				Wexford
		IE053	South-West	Cork
				Kerry
IE06	Eastern & Midland	IE061	Dublin	Dublin
		IE062	Mid-East	Wicklow
				Kildare
				Meath
				Louth
		IE063	Midlands	Longford
				Westmeath
				Offaly
				Laois

STATE OF THE NATION'S CHILDREN



An Roinn Leanaí, Míchumais
agus Comhionannais
Department of Children,
Disability and Equality