

State of the Nation's Children



Ireland 2012



State of the Nation's Children Ireland 2012

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DEPARTMENT OF CHILDREN AND YOUTH AFFAIRS

The main authors of the *State of the Nation's Children: Ireland 2012* report are:

- **Anne-Marie Brooks**, Department of Children and Youth Affairs
- **Aoife Gavin**, Health Promotion Research Centre, National University of Ireland, Galway
- **Bairbre Meaney**, Department of Children and Youth Affairs
- **Gillian Roche**, Central Statistics Office

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Department of Children and Youth Affairs
43-49 Mespil Road
Dublin 4
Tel: +353 (0)1 647 3000
Fax: +353 (0)1 667 0826
E-mail: dcyaresearch@dcya.gov.ie
Web: www.dcy.gov.ie

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MINISTER'S FOREWORD

As Minister for Children and Youth Affairs, it is my great pleasure to launch the *State of the Nation's Children: Ireland 2012*. This is the fourth report in a biennial series prepared by the Department of Children and Youth Affairs in association with the Central Statistics Office and the Health Promotion Research Centre at the National University of Ireland, Galway.

This cutting-edge report provides an analysis of socio-demographic and child well-being indicators. It explores issues in relation to children's health, education and social, emotional and behavioural outcomes. It also looks at both formal and informal services and relationships. It aims to inform Government policy on children, young people and families.

Through the continuation of the *State of the Nation's Children* series, and the implementation of the *National Strategy for Research and Data on Children's Lives*, my Department will continue to highlight and address the issues arising around the coverage, timeliness and use of data on child well-being.

This is an important report with which we, as a society, can build our understanding of our children's lives. It is a key piece of research, which will help us towards our goal of making Ireland one of the best places in the world in which to raise a family.

Frances Fitzgerald, TD

Minister for Children and Youth Affairs

December 2012

Contents

Minister's Foreword	iii
Acknowledgements	viii
List of Tables	ix
List of Figures	xvi
Acronyms	xviii
INTRODUCTION	1
Outline of report	2
New developments	3
Key findings 2012	4
PART 1: SOCIO-DEMOGRAPHICS	9
Child population	10
Child mortality	14
Family structure	19
Parental education level	22
Traveller children	26
Foreign national children	29
Children with a disability	33
Children as carers	35
PART 2: CHILDREN'S RELATIONSHIPS	37
Relationship with mothers	38
Relationship with fathers	42
Talking to parents	46
Parental involvement in schooling	48
Eating a main meal together	50
Friendships	52
Pets and animals	56
Bullying	59

PART 3: CHILDREN'S OUTCOMES	63
EDUCATION OUTCOMES	65
Quality of early childhood care and education	66
Primary school attendance	69
Post-primary school attendance	72
Leaving Certificate retention rates	75
Achievement in reading	79
Achievement in mathematics	82
Achievement in science	85
HEALTH OUTCOMES	89
Birth weight	90
Breastfeeding	93
Health conditions and hospitalisation	96
Accidents, injuries and hospitalisation	99
Nutritional outcomes	102
Intellectual disability	104
Physical and sensory disability	107
Child welfare and protection	110
SOCIAL, EMOTIONAL AND BEHAVIOURAL OUTCOMES	113
Participation in decision-making	114
Reading as a leisure activity	118
Smoking cigarettes: Weekly smoking	120
Smoking cigarettes: Never smoking	124
Alcohol use: Drunkenness	128
Alcohol use: Never drinking alcohol	132
Cannabis use	136
Sexual health and behaviour: Teen births	140
Sexual health and behaviour: Sexual activity	143
Self-esteem	147
Self-reported happiness	150
Youth suicide	153
Deliberate self-harm	155
Physical activity	157
Nutrition: Breakfast consumption	161
Nutrition: Soft drinks consumption	165

PART 4: FORMAL AND INFORMAL SUPPORTS	169
Public expenditure on children's education	170
At risk of poverty	173
Consistent poverty	176
Availability of housing for families with children	178
Community characteristics	180
Environment and places	183
Garda Juvenile Diversion Programme referrals	186
Antenatal care	190
Public Health Nurse visit	193
Developmental screening	195
Childhood immunisation	197
Accessibility of basic health services	204
Children and young people in care	205
Mental health referrals	208
APPENDICES	211
Appendix 1: Main data sources, definitions and technical notes	212
Appendix 2: NUTS Classifications	230
Index	231

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LIST OF TABLES

Table 1:	Number of children, by age and gender (2011)	10
Table 2:	Number and percentage of children, by gender (selected years 1981-2011)	11
Table 3:	Percentage of children in EU-27, by country (selected years 1991-2011)	12
Table 4:	Number and rate (per 10,000) of deaths of children, by age (2007-2011)	14
Table 5:	Rate (per 10,000) of deaths of children, by gender (2007-2011)	15
Table 6:	Number of deaths of children, by age and cause of death (2011)	15
Table 7:	Infant mortality rate (per 1,000 live births) in EU-27, by country (selected years 1991-2011)	17
Table 8:	Rate (per 10,000) of deaths of children aged 0-19 across selected countries in EU-27, by age and gender (2010)	18
Table 9:	Number and percentage of children living in a lone-parent household, by population groups (2011)	19
Table 10:	Number and percentage of children living in a lone-parent household, by age and gender (2011)	20
Table 11:	Number and percentage of children living in a lone-parent household, by county (2011)	20
Table 12:	Percentage of children, by population groups and educational attainment of mother (2011)	22
Table 13:	Percentage of children, by age and educational attainment of mother (2011)	23
Table 14:	Number of children, by county and educational attainment of mother (2011)	23
Table 15:	Number of Traveller children, by age and gender (2011)	26
Table 16:	Number and rate (per 1,000) of Traveller children, by county (2011)	28
Table 17:	Number of foreign national children, by age and gender (2011)	29
Table 18:	Number and rate (per 1,000) of foreign national children, by county (2011)	31
Table 19:	Number and percentage of foreign national children, by nationality (2011)	32
Table 20:	Number of children with a disability, by age and gender (2011)	33
Table 21:	Number and rate (per 1,000) of children with a disability, by county (2011)	34
Table 22:	Number of children who provide regular unpaid personal help for a friend or family member, by age and gender (2011)	35
Table 23:	Number and rate (per 1,000 children) of children who provide regular unpaid personal help for a friend or family member, by county (2011)	36
Table 24:	Percentage of children aged 10-17 who report that they find it easy to talk to their mother when something is really bothering them, by population groups (2010)	38
Table 25:	Percentage of children aged 9-17 who report that they find it easy to talk to their mother when something is really bothering them, by age, gender and social class (1998, 2002, 2006 and 2010)	39
Table 26:	Percentage of children aged 10-17 who report that they find it easy to talk to their mother when something is really bothering them, by NUTS Region (2010)	40

Table 27:	Percentage of children aged 10-17 who report that they find it easy to talk to their father when something is really bothering them, by population groups (2010)	42
Table 28:	Percentage of children aged 9-17 who report that they find it easy to talk to their father when something is really bothering them, by age, gender and social class (1998, 2002, 2006 and 2010)	43
Table 29:	Percentage of children aged 10-17 who report that they find it easy to talk to their father when something is really bothering them, by NUTS Region (2010)	44
Table 30:	Percentage of children aged 15 who report that their parents spend time just talking with them several times a week, by population groups (2009)	46
Table 31:	Percentage of children aged 15 who report that their parents spend time just talking with them several times a week, by gender and social class (2000, 2006 and 2009)	47
Table 32:	Percentage of children aged 15 who report that their parents discuss with them how well they are doing at school several times a week, by population groups (2009)	48
Table 33:	Percentage of children aged 15 who report that their parents discuss with them how well they are doing at school several times a week, by gender and social class (2000, 2006 and 2009)	49
Table 34:	Percentage of children aged 15 who report that their parents eat a main meal with them around a table several times a week, by population groups (2009)	50
Table 35:	Percentage of children aged 15 who report that their parents eat a main meal with them around a table several times a week, by gender and social class (2000, 2006 and 2009)	51
Table 36:	Percentage of children aged 10-17 who report to have 3 or more friends of the same gender, by population groups (2010)	52
Table 37:	Percentage of children aged 9-17 who report to have 3 or more friends of the same gender, by age, gender and social class (2002, 2006 and 2010)	53
Table 38:	Percentage of children aged 10-17 who report to have 3 or more friends of the same gender, by NUTS Region (2010)	54
Table 39:	Percentage of children aged 10-17 who report having a pet of their own or a pet in their family, by population groups (2010)	56
Table 40:	Percentage of children aged 9-17 who report having a pet of their own or a pet in their family, by age, gender and social class (2006 and 2010)	57
Table 41:	Percentage of children aged 10-17 who report having a pet of their own or a pet in their family, by NUTS Region (2010)	58
Table 42:	Percentage of children aged 10-17 who report having been bullied at school (in the past couple of months), by population groups (2010)	59
Table 43:	Percentage of children aged 9-17 who report having been bullied at school (in the past couple of months), by age, gender and social class (1998, 2002, 2006 and 2010)	60
Table 44:	Percentage of children aged 10-17 who report having been bullied at school (in the past couple of months), by NUTS Region (2010)	61

Table 45: Percentage of Early Childhood Care and Education (ECCE) services under contract to deliver the Free Pre-School Year Scheme that meet basic and higher capitation criteria (2010 and 2011)	66
Table 46: Percentage of Early Childhood Care and Education (ECCE) services under contract to deliver the Free Pre-School Year Scheme that meet basic and higher capitation criteria, by administrative county (2011)	67
Table 47: Percentage of primary school children who are absent from school for 20 days or more in the school year (2005/06 - 2009/10)	69
Table 48: Average percentage of primary school children per school who are absent from school for 20 days or more in the school year, by selected school characteristics (2009/10)	70
Table 49: Average percentage of primary school children per school who are absent from school for 20 days or more in the school year, by county (2009/10)	71
Table 50: Percentage of post-primary school children who are absent from school for 20 days or more in the school year (2005/06 - 2009/10)	72
Table 51: Average percentage of post-primary children per school who are absent from school for 20 days or more in the school year, by selected school characteristics (2009/10)	73
Table 52: Average percentage of post-primary school children per school who are absent from school for 20 days or more in the school year, by county (2009/10)	73
Table 53: Leaving Certificate retention rates for the 2006 school entry cohort, by gender, school type and DEIS status	76
Table 54: Leaving Certificate retention rates for the 2006 school entry cohort, by administrative county	77
Table 55: Mean score for children aged 15 based on the OECD-PISA Reading Literacy Scale, by population groups (2009)	79
Table 56: Mean score for children aged 15 based on the OECD-PISA Reading Literacy Scale, by gender and social class (2003, 2006 and 2009)	80
Table 57: Mean score for children aged 15 based on the OECD-PISA Mathematics Literacy Scale, by population groups (2009)	82
Table 58: Mean score for children aged 15 based on the OECD-PISA Mathematics Literacy Scale, by gender and social class (2003, 2006 and 2009)	83
Table 59: Mean score for children aged 15 based on the OECD-PISA Combined Scientific Literacy Scale, by population groups (2009)	85
Table 60: Mean score for children aged 15 based on the OECD-PISA Combined Scientific Literacy Scale, by gender and social class (2003, 2006 and 2009)	86
Table 61: Percentage of babies born weighing less than 2,500 grams (live and still births), by gender (2007-2011)	90
Table 62: Number and percentage of babies born weighing less than 2,500 grams (live and still births), by mothers' county of residence (2011)	92
Table 63: Percentage of infants who are breastfed (exclusive or combined) on discharge from hospital, by mothers' age (2007-2011)	94

Table 64: Percentage of infants who are breastfed (exclusive or combined) on discharge from hospital, by mothers' county of residence (2011)	95
Table 65: Number and percentage of hospital discharges of children, by age, gender and principal diagnosis (2007-2011)	97
Table 66: Number and rate (per 1,000 children) of hospital discharges of children, by county of residence (2011)	98
Table 67: Number and percentage of hospital discharges among children with a diagnosis of external causes of injury or poisoning, by age, gender and principal diagnosis of external injury or poisoning (2007-2011)	100
Table 68: Number and rate (per 1,000 children) of hospital discharges of children with a diagnosis of external causes of injury or poisoning, by county of residence (2011)	101
Table 69: Percentage of children aged 7 in BMI categories: normal, overweight and obese, by gender (2010)	102
Table 70: Number, percentage and rate (per 1,000) of children registered as having an intellectual disability, by age, gender and severity of disability (2007-2011)	105
Table 71: Number and rate (per 1,000) of children registered as having an intellectual disability, by county (2011)	106
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 (2007-2011)	108
Table 73: Number and rate (per 1,000) of children registered as having a physical and/or sensory disability, by county (2011)	109
Table 74: Number, percentage and rate (per 1,000) of child welfare and protection reports to the HSE, by type of report (2007-2011)	110
Table 75: Number and rate (per 1,000) of child welfare and protection reports to the HSE, by HSE Region and Local Health Office (LHO) Area (2011)	111
Table 76: Percentage of children aged 10-17 who report that students at their school participate in making the school rules, by population groups (2010)	114
Table 77: Percentage of children aged 9-17 who report that students at their school participate in making the school rules, by age, gender and social class (1998, 2002, 2006 and 2010)	115
Table 78: Percentage of children aged 10-17 who report that students at their school participate in making the school rules, by NUTS Region (2010)	116
Table 79: Percentage of children aged 15 who report that reading is one of their favourite hobbies, by population groups (2009)	118
Table 80: Percentage of children aged 15 who report that reading is one of their favourite hobbies, by gender and social class (2000, 2006 and 2009)	119
Table 81: Percentage of children aged 10-17 who report smoking cigarettes every week, by population groups (2010)	120
Table 82: Percentage of children aged 9-17 who report smoking cigarettes every week, by age, gender and social class (2002, 2006 and 2010)	121
Table 83: Percentage of children aged 10-17 who report smoking cigarettes every week, by NUTS Region (2010)	122
Table 84: Percentage of children aged 10-17 who report never smoking cigarettes, by population groups (2010)	124

Table 85: Percentage of children aged 9-17 who report never smoking cigarettes, by age, gender and social class (1998, 2002, 2006 and 2010)	125
Table 86: Percentage of children aged 10-17 who report never smoking cigarettes, by NUTS Region (2010)	126
Table 87: Percentage of children aged 10-17 who report to have been drunk at least once in the last 30 days, by population groups (2010)	128
Table 88: Percentage of children aged 10-17 who report to have been drunk at least once in the last 30 days, by age, gender and social class (2006 and 2010)	129
Table 89: Percentage of children aged 10-17 who report to have been drunk at least once in the last 30 days, by NUTS Region (2010)	130
Table 90: Percentage of children aged 10-17 who report never having had an alcoholic drink, by population groups (2010)	132
Table 91: Percentage of children aged 10-17 who report never having had an alcoholic drink, by age, gender and social class (2002, 2006 and 2010)	133
Table 92: Percentage of children aged 10-17 who report never having had an alcoholic drink, by NUTS Region (2010)	134
Table 93: Percentage of children aged 10-17 who report to have taken cannabis at least once in their lifetime, by population groups (2010)	136
Table 94: Percentage of children aged 10-17 who report to have taken cannabis at least once in their lifetime, by age, gender and social class (2002, 2006 and 2010)	137
Table 95: Percentage of children aged 10-17 who report to have taken cannabis at least once in their lifetime, by NUTS Region (2010)	138
Table 96: Number and rate (per 100,000) of births, by mothers' age (2007-2011)	140
Table 97: Number and rate (per 1,000) of births to mothers aged 10-17, by county (2011)	142
Table 98: Percentage of children aged 15-17 who report having ever had sex, by population groups (2010)	143
Table 99: Percentage of children aged 15-17 who report having ever had sex, by age, gender and social class (2010)	144
Table 100: Percentage of children aged 15-17 who report having ever had sex, by NUTS Region (2010)	144
Table 101: Percentage of children aged 10-17 who report feeling happy with the way they are, by population groups (2010)	147
Table 102: Percentage of children aged 9-17 who report feeling happy with the way they are, by age, gender and social class (2006 and 2010)	148
Table 103: Percentage of children aged 10-17 who report feeling happy with the way they are, by NUTS Region (2010)	149
Table 104: Percentage of children aged 10-17 who report being happy with their lives at present, by population groups (2010)	150
Table 105: Percentage of children aged 9-17 who report being happy with their lives at present, by age, gender and social class (1998, 2002, 2006 and 2010)	151
Table 106: Percentage of children aged 10-17 who report being happy with their lives at present, by NUTS Region (2010)	152
Table 107: Number and rate (per 100,000) of suicides, by age and gender (2007-2011)	153

Table 108: Suicides as a percentage of total deaths of children aged 10-17, by gender (2007-2011)	154
Table 109: Number and rate (per 1,000) of children aged 10-17 who presented at a hospital emergency department following deliberate self-harm, by gender (2007-2011)	155
Table 110: Number and rate (per 1,000) of children aged 10-17 who presented at a hospital emergency department following deliberate self-harm, by HSE Region (2011)	156
Table 111: Percentage of children aged 10-17 who report being physically active for at least 60 minutes per day on more than 4 days per week, by population groups (2010)	157
Table 112: Percentage of children aged 9-17 who report being physical active for at least 60 minutes per day on more than 4 days per week, by age, gender and social class (2002, 2006 and 2010)	158
Table 113: Percentage of children aged 10-17 who report being physically active for at least 60 minutes per day on more than 4 days per week, by NUTS Region (2010)	159
Table 114: Percentage of children aged 10-17 who report eating breakfast on 5 or more days per week, by population groups (2010)	161
Table 115: Percentage of children aged 10-17 who report eating breakfast on 5 or more days per week, by age, gender and social class (2002, 2006 and 2010)	162
Table 116: Percentage of children aged 10-17 who report eating breakfast on 5 or more days per week, by NUTS Region (2010)	163
Table 117: Percentage of children aged 10-17 who report drinking soft drinks that contain sugar at least once a day, by population group (2010)	165
Table 118: Percentage of children aged 9-17 who report drinking soft drinks that contain sugar at least once a day, by age, gender and social class (2002, 2006 and 2010)	166
Table 119: Percentage of children aged 10-17 who report drinking soft drinks that contain sugar at least once a day, by NUTS Region (2010)	167
Table 120: Public expenditure on education as a % of GDP, by EU-27 (2007-2009)	171
Table 121: Real current public expenditure on education, by educational level (2002-2011)	172
Table 122: Percentage of population at risk of poverty, by age and household composition (2007-2011)	173
Table 123: Percentage of population experiencing consistent poverty, by age and household composition (2007-2011)	176
Table 124: Number and percentage of households with children identified as being in need of social housing, by number of children (selected years 1999-2011)	178
Table 125: Number and percentage of households with children identified as being in need of social housing, by household structure and county (2011)	179
Table 126: Percentage of children aged 10-17 who report feeling safe in area where they live, by population groups (2010)	180
Table 127: Percentage of children aged 9-17 who report feeling safe in area where they live, by age, gender and social class (2002, 2006 and 2010)	181
Table 128: Percentage of children aged 10-17 who report feeling safe in area where they live, by NUTS Region (2010)	182

Table 129: Percentage of children aged 10-17 who report that there are good places in their area to spend their free time, by population groups (2010)	183
Table 130: Percentage of children aged 9-17 who report that there are good places in their area to spend their free time, by age, gender and social class (2002, 2006 and 2010)	184
Table 131: Percentage of children aged 10-17 who report that there are good places in their area to spend their free time, by NUTS Region (2010)	185
Table 132: Number, percentage and rate (per 1,000) of children aged 10-17 referred to the Garda Juvenile Diversion Programme, by age, gender and outcome (2007-2011)	187
Table 133: Number and rate (per 1,000) of children aged 10-17 referred/referrals to the Garda Juvenile Diversion Programme, by Garda Region and Division (2011)	188
Table 134: Percentage of pregnant women attending for antenatal care in the first trimester of pregnancy, by mothers' age (2007-2011)	190
Table 135: Percentage of newborn babies visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time (2007-2011)	193
Table 136: Percentage of newborn babies visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time, by HSE Region and Local Health Office (LHO) Area (2011)	194
Table 137: Percentage of children reaching 10 months who have had their 7-9 Month Developmental Check on time, by HSE Region and Local Health Office (LHO) Area (2011)	195
Table 138: Immunisation uptake rates (%), by age and vaccine type (2007-2011)	199
Table 139: Immunisation uptake rates (%) at 12 months, by HSE Region and Local Health Office (LHO) Area (2011)	200
Table 140: Immunisation uptake rates (%) at 24 months, by HSE Region and Local Health Office (LHO) Area (2011)	201
Table 141: Immunisation uptake rates (%) among children of relevant age, by vaccine type and EU-27 (2010)	203
Table 142: Number and percentage of children on hospital waiting lists, by waiting time (2008-2012)	204
Table 143: Number, percentage and rate (per 1,000) of children in the care of the HSE, by age, gender and type of placement (2007-2011)	205
Table 144: Number and rate (per 1,000) of children in the care of the HSE, by HSE Region and Local Health Office (LHO) Area (2011)	206
Table 145: Number, percentage and rate (per 100,000) of admissions of children to psychiatric hospitals, by age, gender and diagnosis (2007-2011)	208
Table 146: Number and rate (per 100,000) of admissions of children to psychiatric hospitals, by county (2011)	210

LIST OF FIGURES

Figure 1: Percentage of children in EU-27, by country (2011)	13
Figure 2: Number of deaths of children, by gender and cause of death (2011)	16
Figure 3: Percentage of children whose mothers have no formal education or primary education only, by county (2011)	25
Figure 4: Number of Traveller children, by age (2006 and 2011)	27
Figure 5: Number of foreign national children, by age (2006 and 2011)	30
Figure 6: Percentage of children aged 11, 13 and 15 who report that they find it easy to talk to their mother when something is really bothering them, by country (2010)	41
Figure 7: Percentage of children aged 11, 13 and 15 who report that they find it easy to talk to their father when something is really bothering them, by country (2010)	45
Figure 8: Percentage of children aged 11, 13 and 15 who report to have 3 or more friends of the same gender, by country (2010)	55
Figure 9: Percentage of children aged 11, 13 and 15 who report having been bullied at school (in the past couple of months), by country (2010)	62
Figure 10: Leaving Certificate retention rates for the 1997-2006 school entry cohorts	75
Figure 11: Mean scores of children aged 15 based on the OECD-PISA Reading Literacy Scale, by OECD country (2009)	81
Figure 12: Mean scores of children aged 15 based on the OECD-PISA Mathematics Literacy Scale, by OECD country (2009)	84
Figure 13: Mean scores of children aged 15 based on the OECD-PISA Combined Scientific Literacy Scale, by OECD country (2009)	87
Figure 14: Percentage of babies born weighing less than 2,500 grams (live and still births), by occupation of mother (2011)	91
Figure 15: Percentage of infants who are breastfed (either exclusive or combined) on discharge from hospital, by occupation of mother (2011)	94
Figure 16: Percentage of children aged 7 in BMI categories: normal, overweight and obese, by gender (2008 and 2010)	103
Figure 17: Percentage of children aged 11, 13 and 15 who report that students at their school participate in making the school rules, by country (2010)	117
Figure 18: Percentage of children aged 11, 13 and 15 who report smoking cigarettes every week, by country (2010)	123
Figure 19: Percentage of children aged 11, 13 and 15 who report never smoking cigarettes, by country (2010)	127
Figure 20: Percentage of children aged 15 who report to have been drunk at least once in the last 30 days, by country (2010)	131
Figure 21: Percentage of children aged 15 who report never having had an alcoholic drink, by country (2010)	135

Figure 22: Percentage of children aged 15 who report to have taken cannabis at least once in their lifetime, by country (2010)	139
Figure 23: Number of births to mothers aged 10-17 (2007-2011)	141
Figure 24: Percentage of children aged 15 who report having ever had sex, by country (2010)	146
Figure 25: Percentage of children aged 11, 13 and 15 who report being physically active for at least 60 minutes per day on more than 4 days per week, by country (2010)	160
Figure 26: Percentage of children aged 11, 13 and 15 who report eating breakfast on 5 or more days per week, by country (2010)	164
Figure 27: Percentage of children aged 11, 13 and 15 who report drinking soft drinks that contain sugar at least once a day, by country (2010)	168
Figure 28: Public expenditure on education in Ireland and in EU-27, as a % of GDP (2000-2009)	170
Figure 29: Percentage of children at risk of poverty in EU-27, by country (2010)	175
Figure 30: Referrals to the Garda Juvenile Diversion Programme, by type of offence (2011)	187
Figure 31: Percentage of pregnant women attending for antenatal care in the first trimester of pregnancy, by occupation of mother (2011)	191
Figure 32: Percentage of pregnant women attending for antenatal care in the first trimester of pregnancy, by mother's county of residence (2011)	192

ACRONYMS

BCG	Bacillus Calmette-Guerin vaccine
BMI	Body Mass Index
CSO	Central Statistics Office
D ₃	Diphtheria and Tetanus vaccine
DCYA	Department of Children and Youth Affairs
DEIS	Delivering Equality of Opportunity in Schools
DTaP ₃	Diphtheria, Tetanus and Pertussis vaccine
ERC	Educational Research Centre
ESRI	Economic and Social Research Institute
EU	European Union
EU-25 average	Average result for 25 EU Member States
EU-27 average	Average result for 27 EU Member States
Eurostat	Statistical Office of the European Communities
EU-SILC	European Union Survey on Income and Living Conditions
GDP	Gross Domestic Product
GNP	Gross National Product
GNI	Gross National Income
HBSC	Health Behaviour in School-aged Children Survey
Hib ₃	Haemophilus Influenzae Type B vaccine
HIPE	Hospital In-Patient Enquiry System
HPSC	Health Protection Surveillance Centre
HRB	Health Research Board
HSE	Health Service Executive
ICD-9-CM	Clinical modification of the 9th Revision of the International Classification of Diseases
ICD-10	World Health Organization's International Classification of Diseases
ICD-10-AM	Australian modification of ICD-10
MenC ₃	Meningococcal Type C vaccine
MMR	Measles, Mumps and Rubella vaccine
NCVA	National Council for Vocational Awards

NEWB	National Educational Welfare Board
NIDD	National Intellectual Disability Database
NPIRS	National Psychiatric In-Patient Reporting System
NPRS	National Perinatal Reporting System
NPSDD	National Physical and Sensory Disability Database
NTPF	National Treatment Purchase Fund
NUTS	Nomenclature of Territorial Units for Statistics
OECD	Organization for Economic Co-operation and Development
P ₃	Pertussis vaccine
Polio ₃	Poliomyelitis vaccine
PISA	Programme for International Student Assessment Survey
PTR	Patient Treatment Register
T ₃	Tetanus vaccine
UNESCO	United Nations Educational, Scientific and Cultural Organization
WHO	World Health Organization

INTRODUCTION

This is Ireland's fourth biennial *State of the Nation's Children* report. These reports, which provide the most up-to-date data on all indicators in the National Set of Child Well-being Indicators, aim to:

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

OUTLINE OF REPORT

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

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

NEW DEVELOPMENTS

This *State of the Nation's Children: Ireland 2012* represents an advance on earlier reports in this series. In this report, there is new data for all indicators, with the exception of indicators that draw on the Programme for International Student Assessment (PISA). In addition, 8 indicators have been introduced or re-introduced in order to fill previously identified data gaps. Due to data issues, some existing indicators have either been replaced or discontinued (see *below*).

MEASURE	DATA SOURCE
New indicators	
The number of children who provide regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability.	Census of the Population
The percentage of children aged 10-17 who report never smoking cigarettes.	Health Behaviour of School-aged Children (HBSC) Survey
The percentage of children aged 10-17 who report never having had an alcoholic drink.	
The percentage of children aged 15-17 who report having ever had sex.	
The percentage of children aged 10-17 who report drinking soft drinks (coke or other soft drinks that contain sugar) at least once a day.	
The number of children aged 10-17 who presented to a hospital emergency department following deliberate self-harm.	National Registry of Deliberate Self-Harm
The percentage of newborn babies visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time.	Outturn of Monthly Activity Data Returns and Quarterly Performance Indicator Returns, HSE
The percentage of children reaching 10 months who have had their 7-9 Month Developmental Check on time (i.e. before reaching 10 months of age).	
Replacement indicators	
<p><i>From:</i> The percentage of children leaving national school, by destination.</p> <p><i>To:</i> The Leaving Certificate retention rate.</p>	Education statistics
<p><i>From:</i> The number of child welfare and protection reports that went to initial assessment and the number of confirmed child abuse cases.</p> <p><i>To:</i> The number of child welfare and protection reports to the HSE.</p>	Review of Adequacy Reports, HSE
Discontinued indicators	
The percentage of children under 13 years of age who avail of non-parental childcare.	Childcare Module, Quarterly National Household Survey, CSO
The percentage of households with children under 13 years of age who report they have 'access to high-quality, affordable childcare in the community'.	
The number of separated children seeking asylum.	Review of Adequacy Reports, HSE

KEY FINDINGS 2012

- The child population of Ireland increased by 13.4% between 2002 and 2011 (Census of the Population, 2011).
- 65.6% of all child deaths in 2011 occurred in the period of infancy (Vital Statistics, 2011).
- Approximately 1 in 6 children in Ireland live in a lone-parent household (Census of the Population, 2011).
- 1 in 3 children live in families where their mother has a third-level qualification (Census of the Population, 2011).
- The number of Traveller children increased by 30.3% between 2006 and 2011 (Census of the Population, 2011).
- The number of foreign national children increased by 49.5% between 2006 and 2011 (Census of the Population, 2011).
- Almost 6% of the child population in Ireland have a disability (Census of the Population, 2011).
- 5.6 per 1,000 children provide regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability (Census of the Population, 2011).
- Older children find it more difficult to talk to their mothers when something is really bothering them (HBSC Survey, 2010).
- The percentage of children who report that they find it easy to talk to their father when something is really bothering them has increased from 48.1% in 1998 to 66.6% in 2010 (HBSC Survey, 2010).
- Significantly more girls than boys report that their parents spend time just talking with them (PISA Survey, 2009).
- There has been a significant decrease in the percentage of 15-year-old children who report that their parents discuss with them how well they are doing at school (PISA Survey, 2009).
- There has been a significant decrease in the percentage of 15-year-old children who report that their parents eat a main meal with them around a table (PISA Survey, 2009).

- Almost 9 out of 10 children have 3 or more friends of the same gender (HBSC Survey, 2010).
- 3 out of 4 children have a pet of their own or a pet in their family (HBSC Survey, 2010).
- Immigrant children, Traveller children and children with a disability and/or chronic illness are more likely to report being bullied at school (HBSC Survey, 2010).
- The number of Early Childhood Care and Education (ECCE) services contracted to deliver the Free Pre-School Year Scheme has increased by almost 10% between 2010 and 2011 (ECCE Database, 2011).
- Approximately 1 in every 9 primary school children miss 20 days or more in the school year (Primary Pupil Absence Report, 2009/10).
- Approximately 1 in every 6 post-primary school children miss 20 days or more in the school year (Post-primary Pupil Absence Report, 2009/10).
- Retention rates to the completion of the Leaving Certificate have increased by almost 8 percentage points – from 82.3% of children in the 1997 school entry cohort to 90.2% of children in the 2006 school entry cohort (Education Statistics Database, 2012).
- There has been a significant decline in reading literacy scores among 15-year-olds in Ireland (PISA Survey, 2009).
- Mathematics literacy scores of 15-year-olds in Ireland are significantly below the OECD average (PISA Survey, 2009).
- Science literacy scores of 15-year-olds in Ireland are significantly above the OECD average (PISA Survey, 2009).
- The percentage of low birth weight babies has remained relatively stable over the last 5 years (National Perinatal Reporting System, 2011).
- Breastfeeding initiation rates have continued to increase (National Perinatal Reporting System, 2011).
- More than half of the total hospital discharges of children were children under 5 years of age (Hospital In-Patient Enquiry, 2011).
- The number of hospital discharges of children with a diagnosis of ‘transport accidents’ has decreased by almost 29% between 2007 and 2011 (Hospital In-Patient Enquiry, 2011).

- The percentage of children aged 7 classified as being in the 'normal' weight category has increased by 5 percentage points over the period 2008-2010 (WHO European Childhood Obesity Surveillance Initiative, 2010).
- Approximately 6 in 10 children registered as having an intellectual disability are boys (National Intellectual Disability Database, 2011).
- Approximately 1 in 3 children on the National Physical and Sensory Disability Database are registered as having multiple disabilities (National Physical and Sensory Disability Database, 2011).
- The number of child welfare and protection reports to the HSE increased by almost 36% between 2007 and 2011 (Review of Adequacy Report, 2011).
- The percentage of children aged 10-17 who report that students at their school participate in making the school rules has increased from 22.5% in 2006 to 32.6% in 2010 (HBSC Survey, 2010).
- Approximately one-third of 15-year-old children report that reading is one of their favourite hobbies (PISA Survey, 2009).
- Cigarette smoking is significantly higher among Traveller children (HBSC Survey, 2010).
- The percentage of children aged 10-17 who report never smoking has increased from 50.8% in 1998 to 73.5% in 2010 (HBSC Survey, 2010).
- Traveller children are more likely to report being drunk at least once in the last 30 days (HBSC Survey, 2010).
- The percentage of children aged 10-17 who report never having had an alcoholic drink increased from approximately 40% in 2002 to 54% in 2010 (HBSC Survey, 2010).
- Cannabis use is significantly higher among immigrant children, Traveller children and children with a disability and/or chronic illness (HBSC Survey, 2010).
- The number of babies born to teenage girls has decreased by 36% between 2007 and 2011 (Vital Statistics, 2011).
- Approximately 1 in 4 children aged 15-17 report that they have had sex (HBSC Survey, 2010).
- Approximately 4 in 10 girls aged 15-17 report feeling happy with the way they are (HBSC Survey, 2010).

- Approximately 9 in 10 children aged 10-17 report being happy with their lives at present (HBSC Survey, 2010).
- In 2011, there were 16 suicides of children aged 10-17 (Vital Statistics, 2011).
- Twice as many girls as boys present to hospital emergency departments following deliberate self-harm (National Registry of Deliberate Self-Harm Ireland, 2011).
- Children in Ireland have one of the highest levels of physical activity among 40 WHO countries and regions (HBSC Survey, 2010).
- Children in higher social classes are more likely to eat breakfast on 5 or more days per week (HBSC Survey, 2010).
- 1 in 5 children aged 10-17 report drinking soft drinks that contain sugar at least once a day (HBSC Survey, 2010).
- In 2009, Ireland's public expenditure on education was 6.5% of Gross Domestic Product (GDP) and was above the EU-27 average (Department of Education and Skills, 2009).
- In 2011, 18.8% of children were considered to be at risk of poverty (EU-SILC, 2011).
- In 2011, 9.3% of children experienced consistent poverty (EU-SILC, 2011).
- In 2011, there were 43,578 households with children identified as being in need of social housing (Triennial Assessment of Housing Needs, 2011).
- 9 in 10 children report feeling safe in the area where they live (HBSC Survey, 2010).
- The percentage of children who report that there are good places in their area to spend their free time has increased from 42.2% in 2006 to 51.2% in 2010 (HBSC Survey, 2010).
- Over the 5-year period 2007-2011, the number of children referred to the Garda Juvenile Diversion Programme has decreased by 41.6%; however, the overall number of referrals has been relatively stable (An Garda Síochána, 2011).
- Early antenatal care is lowest among younger mothers (National Perinatal Reporting System, 2011).
- 83.6% of newborn babies were visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time (Outturn of Quarterly Performance Indicator Returns, 2011).

- 82.2% of children had the 7-9 Month Developmental Check on time (Outturn of Monthly Activity Data Returns, 2011).
- In 2011, the national immunisation uptake rates of D₃, P₃, T₃, Hib₃, Polio₃ and HepB₃ for children at 24 months of age reached the target of 95% (Immunisation Uptake Statistics, 2011).
- The number of children on a hospital waiting list awaiting treatment decreased by 45.1% between 2009 and 2012 (Patient Treatment Register, 2012).
- The number of children in the care of the HSE increased by approximately 16% between 2007 and 2011 (Review of Adequacy Report, 2011).
- In 2011, the most common reason for children being admitted to psychiatric hospitals was for 'depressive disorders' (National Psychiatric In-Patient Reporting System, 2011).

PART 1:
SOCIO-DEMOGRAPHICS

CHILD POPULATION

The child population of Ireland increased by 13.4% between 2002 and 2011.

Measure

The number of children.

Key findings

- In 2011, there were 1,148,687 children living in Ireland. This accounted for one-quarter (25%) of the total population of Ireland.

Differences by age, gender and over time

- 587,782 were boys and 560,905 were girls (see Table 1).

Table 1: Number of children, by age and gender (2011)				
	Male	Female	Total	Cumulative Total
Total (population all ages)	2,272,699	2,315,553	4,588,252	
Total (population age 0-17)	587,782	560,905	1,148,687	
Age				
Under 1	36,850	35,560	72,410	72,410
1	37,230	35,415	72,645	145,055
2	37,153	35,413	72,566	217,621
3	36,382	35,075	71,457	289,078
4	34,461	32,790	67,251	356,329
5	33,199	31,738	64,937	421,266
6	33,534	31,442	64,976	486,242
7	32,829	31,612	64,441	550,683
8	32,578	31,238	63,816	614,499
9	31,897	30,703	62,600	677,099
10	31,514	29,915	61,429	738,528
11	31,114	29,720	60,834	799,362
12	31,430	29,804	61,234	860,596

continued

Age	Male	Female	Total	Cumulative Total
13	30,717	29,275	59,992	920,588
14	30,301	28,701	59,002	979,590
15	29,416	27,811	57,227	1,036,817
16	28,577	27,428	56,005	1,092,822
17	28,600	27,265	55,865	1,148,687

Source: Census of the Population, 2011

- The percentage of children has decreased over the past 30 years, from 36.2% in 1981 to 25.0% in 2011 (see *Table 2*).
- The number of children fell over the period 1981 to 2002 from 1,246,443 to 1,013,031. Since 2002, it increased by 13.4%, to stand at 1,148,687 in 2011.

Year	Boys	% of all males	Girls	% of all females	Total	% of all ages
1981	638,768	36.9	607,675	35.5	1,246,443	36.2
1986	630,985	35.7	599,165	33.8	1,230,150	34.7
1991	587,655	33.5	557,738	31.5	1,145,393	32.5
1996	550,389	30.6	521,583	28.6	1,071,972	29.6
2002	519,483	26.7	493,548	25.0	1,013,031	25.9
2006	530,973	25.0	505,061	23.8	1,036,034	24.4
2011	587,782	25.9	560,905	24.2	1,148,687	25.0

Source: Censuses of the Population

Differences by geographic location

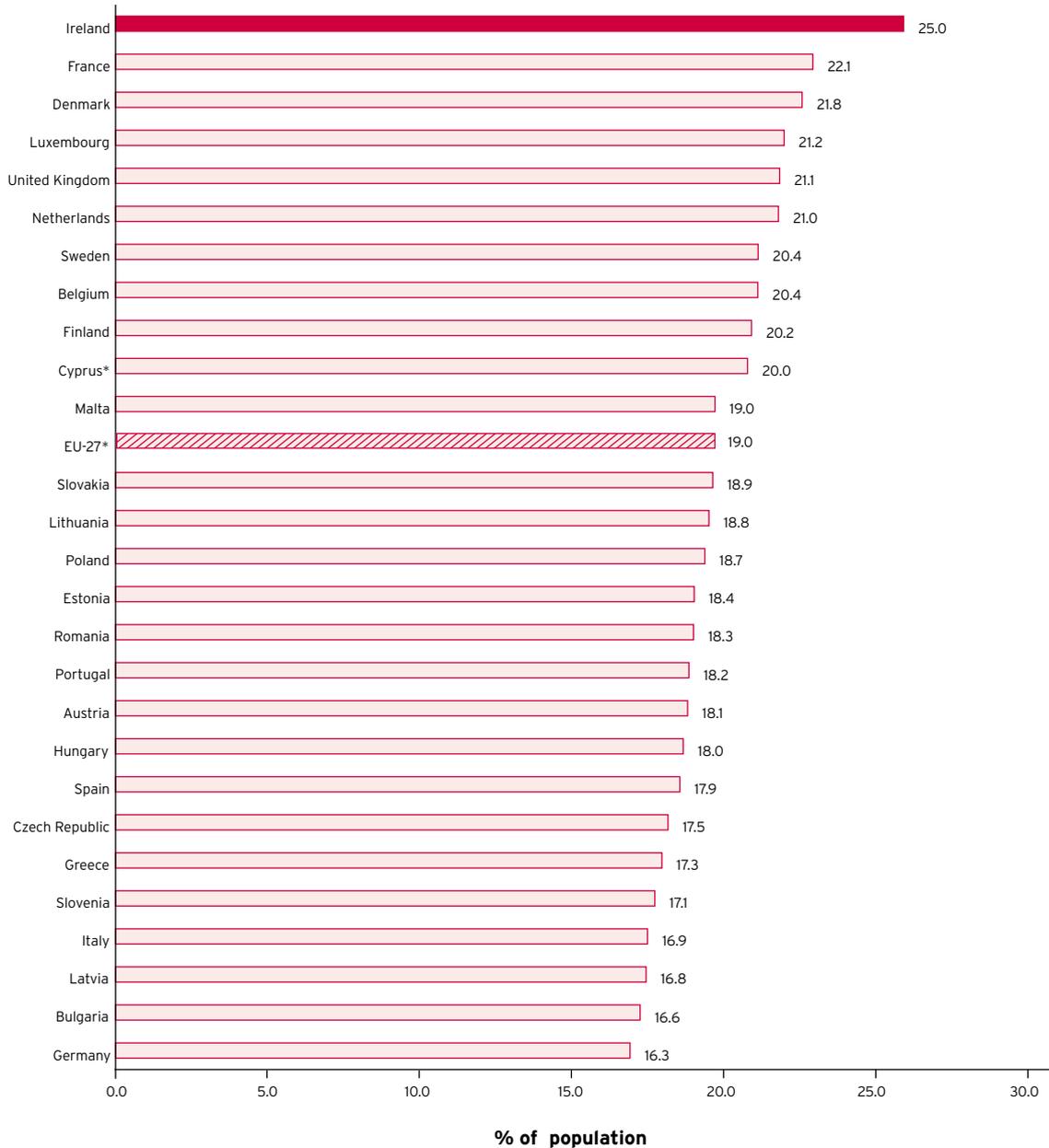
- In 2011, Ireland had the highest percentage of children in the European Union (25%). The EU-27 average was 19% (see Table 3 and Figure 1).

Table 3: Percentage of children in EU-27, by country (selected years 1991-2011)			
	1991	2001	2011
EU-27	<i>n/a</i>	20.8	*19.0
Country			
Austria	21.3	20.5	18.1
Belgium	21.9	21.1	20.4
Bulgaria	24.7	19.6	16.6
Cyprus	<i>n/a</i>	27.3	*20.0
Czech Republic	26.5	20.1	17.5
Denmark	21.2	21.7	21.8
Estonia	26.3	22.4	18.4
Finland	23.0	21.9	20.2
France	24.6	23.0	22.1
Germany	19.2	18.8	16.3
Greece	23.7	18.9	17.3
Hungary	25.0	20.4	18.0
Ireland	32.6	26.6	25.0
Italy	20.8	17.3	16.9
Latvia	25.6	22.1	16.8
Lithuania	26.8	24.5	18.8
Luxembourg	20.7	22.3	21.2
Malta	<i>n/a</i>	24.2	19.0
Netherlands	22.1	22.1	21.0
Poland	29.6	24.4	18.7
Portugal	25.2	19.8	18.2
Romania	28.2	22.3	18.3
Slovakia	30.3	24.1	18.9
Slovenia	25.0	19.7	17.1
Spain	24.6	18.3	17.9
Sweden	21.9	21.8	20.4
United Kingdom	22.8	22.7	21.1

n/a = not available

* 2010 data

Source: Censuses of the Population; Eurostat

Figure 1: Percentage of children in EU-27, by country (2011)*

* 2010 data

Source: Census of the Population, 2011; Eurostat

CHILD MORTALITY

65.6% of all child deaths in 2011 occurred in the period of infancy.

Measure

The number of deaths of children.

Key findings

- In 2011, 393 children died in Ireland. This equated to an overall child mortality rate of 3.4 per 10,000.

Differences by age, gender and over time

- 65.6% of all child deaths in 2011 occurred in the period of infancy (age less than 1 year) (see Table 4).

Table 4: Number and rate (per 10,000) of deaths of children, by age (2007-2011)

	2007		2008		2009		2010		2011	
	No.	Rate								
Total	413	3.9	463	4.3	403	3.6	423	3.8	393	3.4
Age										
Under 1	230	35.1	290	40.3	247	33.6	282	38.2	258	35.6
1-4	54	2.2	44	1.7	59	2.2	45	1.6	34	1.2
5-9	17	0.6	28	0.9	23	0.7	27	0.9	28	0.9
10-14	50	1.8	46	1.6	31	1.1	28	1.0	20	0.7
15-17	62	3.6	55	3.2	43	2.5	41	2.5	53	2.8

Source: Vital Statistics (CSO)

- The mortality rates were consistently higher for boys (4.0 per 10,000) than for girls (2.9 per 10,000) (see Table 5).

	2007	2008	2009	2010	2011
Total	3.9	4.3	3.6	3.8	3.4
Gender					
Boys	4.4	5.1	4.2	4.3	4.0
Girls	3.4	3.4	3.1	3.2	2.9

Source: Vital Statistics (CSO)

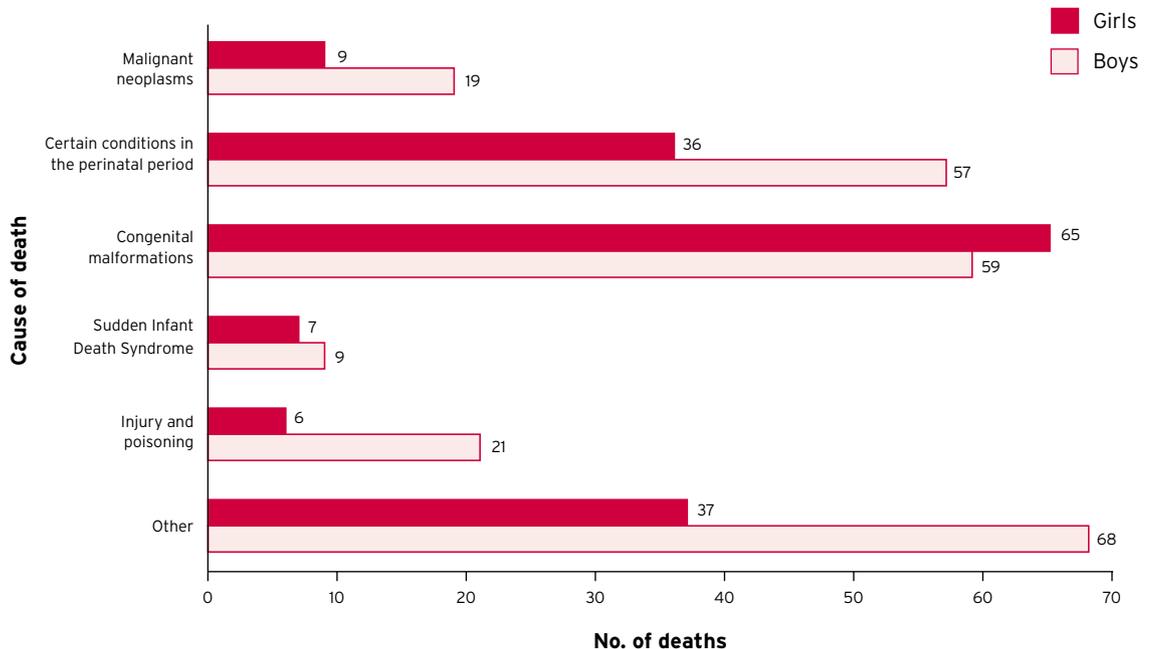
Differences by cause of death

- In 2011, the largest single cause of child deaths were '*congenital malformations*' (see Table 6). This was followed by '*certain conditions in the perinatal period*' and '*injury and poisoning*'.

	Under 1	1-4	5-9	10-14	15-17	All children
	No.	No.	No.	No.	No.	No.
Total	258	34	28	20	53	393
Main cause						
Malignant neoplasms	2	2	8	9	7	28
Certain conditions in the perinatal period	93	–	–	–	–	93
Congenital malformations	111	4	5	2	2	124
Sudden Infant Death Syndrome	13	3	–	–	–	16
Injury and poisoning	1	4	3	1	18	27
Other	38	21	12	8	26	105

Source: Vital Statistics (CSO)

- More boys than girls died in each category according to cause of death, with the exception of '*congenital malformations*' (see Figure 2). This was particularly notable in the category '*injury and poisoning*', where more than three times as many deaths were recorded for boys (21) than for girls (6).

Figure 2: Number of deaths of children, by gender and cause of death (2011)

Source: Vital Statistics (CSO)

Differences by geographic location

- In 2011, the infant mortality rate across the EU-27 ranged from 2.1 per 1,000 in Sweden to 9.4 per 1,000 in Romania (see *Table 7*). The infant mortality rate in Ireland was 3.6 per 1,000. This was below the EU-27 average of 4.2 per 1,000.

Table 7: Infant mortality rate (per 1,000 live births) in EU-27, by country (selected years 1991-2011)

	1991	2001	2011
EU-27	9.8	5.7	*4.2
Country			
Austria	7.5	4.8	3.6
Belgium	8.3	4.5	3.3
Bulgaria	16.9	14.4	8.5
Cyprus	12.2	4.9	3.1
Czech Republic	10.4	4.0	2.7
Denmark	7.3	4.9	3.5
Estonia	13.3	8.8	2.5
Finland	5.8	3.2	2.4
France	7.3	4.5	**3.5
Germany	6.9	4.3	3.5
Greece	9.0	5.1	3.8
Hungary	15.6	8.1	4.9
Ireland	7.6	5.7	3.6
Italy	8.0	4.4	**3.4
Latvia	15.7	11.0	6.6
Lithuania	14.4	7.9	4.2
Luxembourg	9.2	5.9	4.3
Malta	9.6	3.8	6.1
Netherlands	6.5	5.4	**3.8
Poland	18.2	7.7	4.7
Portugal	10.8	5.0	3.1
Romania	22.7	18.4	9.4
Slovakia	13.2	6.2	4.9
Slovenia	8.2	4.2	2.9
Spain	7.2	4.1	3.4
Sweden	6.2	3.7	2.1
United Kingdom	7.4	5.5	**4.3

* 2009 data

** 2010 data

Source: Vital Statistics (CSO); Eurostat

- In general, the child mortality rate across the EU-27 is higher for boys than for girls (see *Table 8*). Child mortality rates are also substantially higher in the age group 0-4 years than for any other age group.

Table 8: Rate (per 10,000) of deaths of children aged 0-19 across selected countries in EU-27, by age and gender (2010)

	0-4 years		5-9 years		10-14 years		15-19 years	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
EU-27*	11.3	9.4	1.1	1.0	1.5	1.1	3.6	1.8
Country								
Austria	10.3	8.3	0.6	1.0	1.4	0.8	4.1	2.0
Belgium	10.5	7.4	1.0	0.6	1.4	0.9	2.9	1.7
Bulgaria	25.9	19.4	2.5	2.1	3.5	2.4	4.1	2.9
Cyprus*	12.0	7.1	–	–	1.9	–	2.9	–
Czech Republic	7.7	6.5	0.9	1.1	2.0	1.1	3.6	1.9
Denmark	8.4	6.9	0.7	0.6	1.0	0.8	1.8	1.7
Estonia	12.2	7.6	2.1	2.2	1.9	1.3	4.9	2.3
Finland	6.6	5.3	1.0	1.1	1.1	0.6	3.1	1.4
France	9.7	8.2	1.0	0.7	1.3	0.9	3.7	1.4
Germany	8.9	7.5	0.9	0.8	1.1	0.7	2.5	1.5
Greece	9.4	8.6	1.2	0.9	1.7	1.1	4.4	2.0
Hungary	11.9	11.0	1.2	0.8	1.9	1.0	3.7	1.8
Ireland	10.2	8.2	0.8	1.0	1.3	0.6	3.5	1.4
Italy*	8.6	7.3	0.9	0.8	1.4	0.7	3.5	1.3
Latvia	12.6	12.5	3.1	1.0	3.5	3.2	6.0	2.3
Lithuania	12.5	10.5	1.5	1.4	3.5	1.2	7.2	2.1
Luxembourg	8.8	7.9	–	–	1.9	0.7	–	1.1
Malta	14.2	11.2	–	–	1.6	2.6	3.6	–
Netherlands	9.6	8.4	0.7	0.8	1.1	0.7	2.2	0.9
Poland	13.3	11.1	1.3	1.0	1.9	1.2	4.8	1.9
Portugal	6.1	6.4	1.3	1.0	1.4	0.9	2.9	1.9
Romania	25.5	20.5	3.0	2.3	3.3	2.2	4.8	3.2
Slovakia	15.7	13.3	1.7	1.6	2.2	1.6	3.0	1.0
Slovenia	5.5	9.0	1.1	1.4	1.0	0.7	1.6	1.4
Spain	7.9	7.3	1.0	0.7	1.3	0.8	2.4	1.1
Sweden	7.0	6.2	0.5	0.8	1.4	0.8	2.4	1.8
United Kingdom	11.2	9.8	1.0	0.9	1.1	0.9	2.4	1.7

* 2009 data

Source: Eurostat, 2010

FAMILY STRUCTURE

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

Measure

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

Key findings

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

Differences by population groups

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

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

Source: Census of the Population, 2011

Differences by age and gender

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

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

Source: Census of the Population, 2011

Differences by geographic location

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

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

continued

Table 11 (continued)

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

Source: Census of the Population, 2011

PARENTAL EDUCATION LEVEL

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

Measure

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

Key findings

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

Differences by population groups

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

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

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

Source: Census of the Population, 2011

Differences by age

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

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

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

Source: Census of the Population, 2011

Differences by geographic location

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

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

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

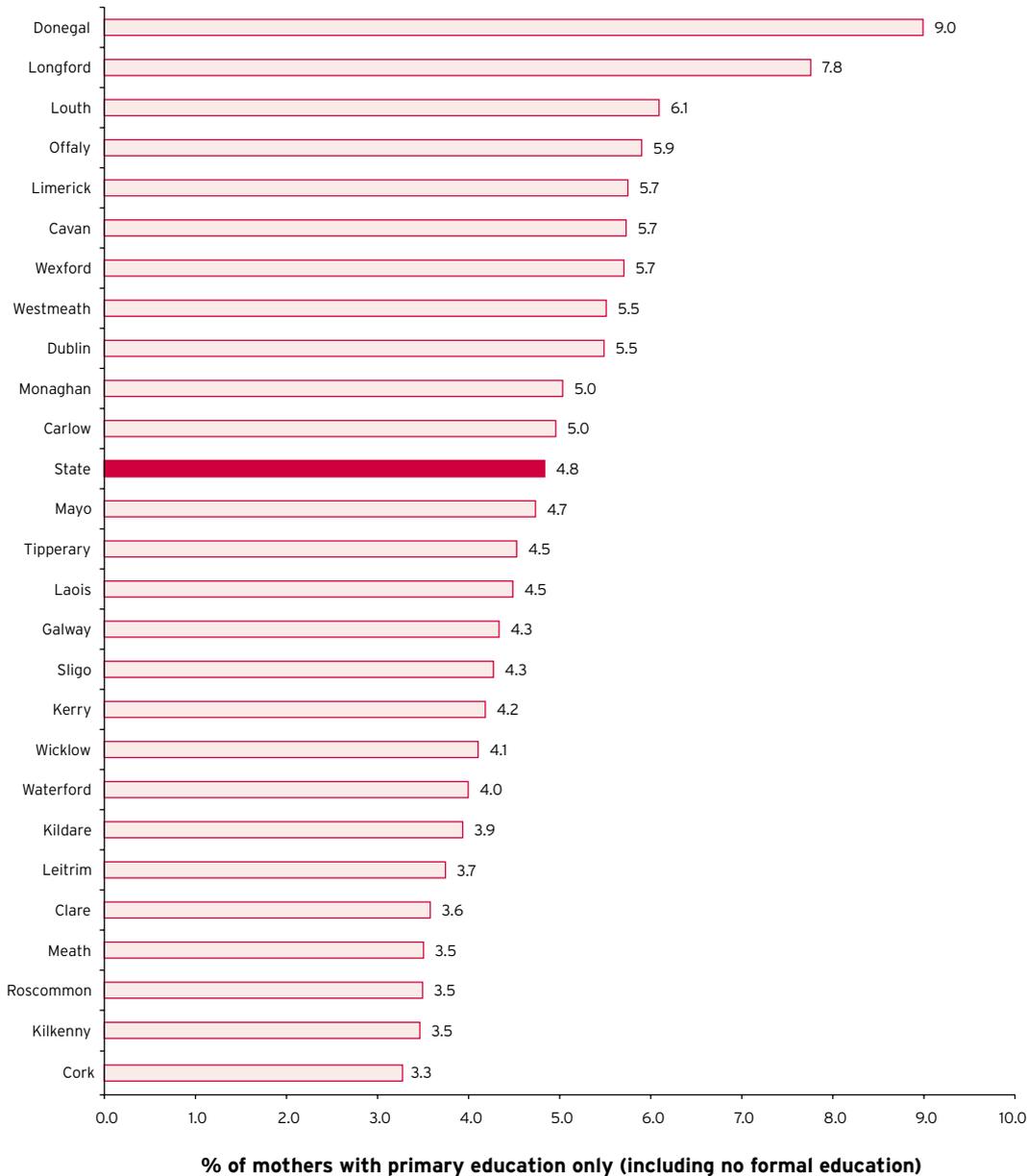
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Table 14 (continued)

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

Source: Census of the Population, 2011

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



Source: Census of the Population, 2011

TRAVELLER CHILDREN

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

Measure

The number of Traveller children.

Key findings

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

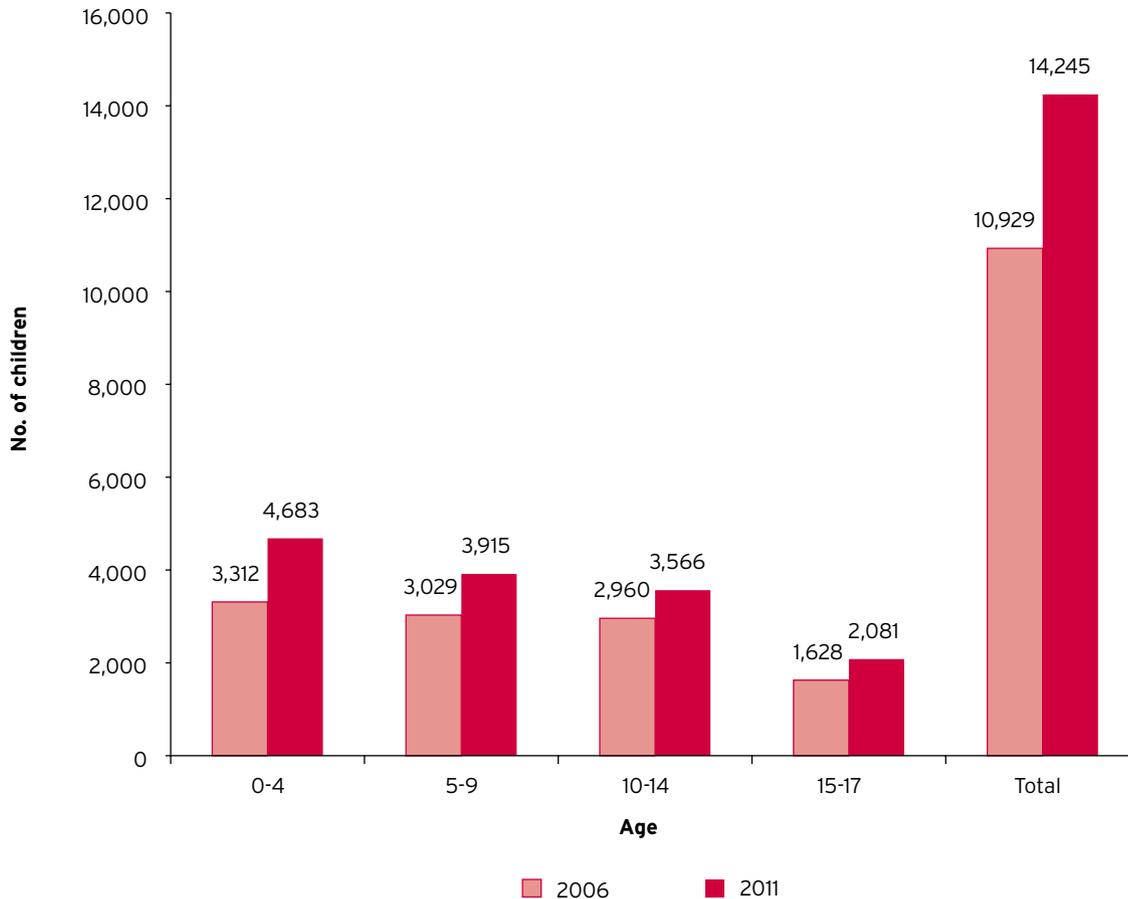
Differences by age, gender and over time

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

Table 15: Number of Traveller children, by age and gender (2011)			
	Boys	Girls	Total
Total (Traveller population)	14,625	14,948	29,573
Total (Traveller children)	7,334	6,911	14,245
Age			
0-4	2,410	2,273	4,683
5-9	1,987	1,928	3,915
10-14	1,827	1,739	3,566
15-17	1,110	971	2,081

Source: Census of the Population, 2011

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

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

Source: Censuses of the Population

Differences by geographic location

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

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

Source: Census of the Population, 2011

FOREIGN NATIONAL CHILDREN

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

Measure

The number of foreign national children.

Key findings

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

Differences by age, gender and over time

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

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

Source: Census of the Population, 2011

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

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

Source: Censuses of the Population

Differences by geographic location

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

Table 18: Number and rate (per 1,000) of foreign national children, by county (2011)

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

Source: Census of the Population, 2011

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

Table 19: Number and percentage of foreign national children, by nationality (2011)		
	No.	%
Total	93,005	100.0
Nationality		
Poland	24,611	26.5
Great Britain	14,870	16.0
Lithuania	7,417	8.0
Nigeria	4,635	5.0
Latvia	4,158	4.5
India	4,127	4.4
Philippines	2,998	3.2
Romania	2,942	3.2
USA	2,922	3.1
Pakistan	1,321	1.4
Slovakia	1,309	1.4
Germany	1,279	1.4
Hungary	1,127	1.2
Brazil	906	1.0
Other	18,383	19.8

Source: Census of the Population, 2011

CHILDREN WITH A DISABILITY

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

Measure

The number of children with a disability.

Key findings

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

Differences by age and gender

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

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

Source: Census of the Population, 2011

Differences by geographic location

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

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

Source: Census of the Population, 2011

CHILDREN AS CARERS

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

Measure

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

Key findings

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

Differences by age and gender

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

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

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

Source: Census of the Population, 2011

Differences by geographic location

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

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

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

Source: Census of the Population, 2011

PART 2: CHILDREN'S RELATIONSHIPS

**covering
Relationships with parents
and
Relationships with peers**

RELATIONSHIP WITH MOTHERS

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

Measure

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

Key findings

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

Differences by population groups

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

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

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

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

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

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

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

* Refers to children aged 10-17 only.

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

n/a = not available

Source: HBSC Surveys

Differences by geographic location

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

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

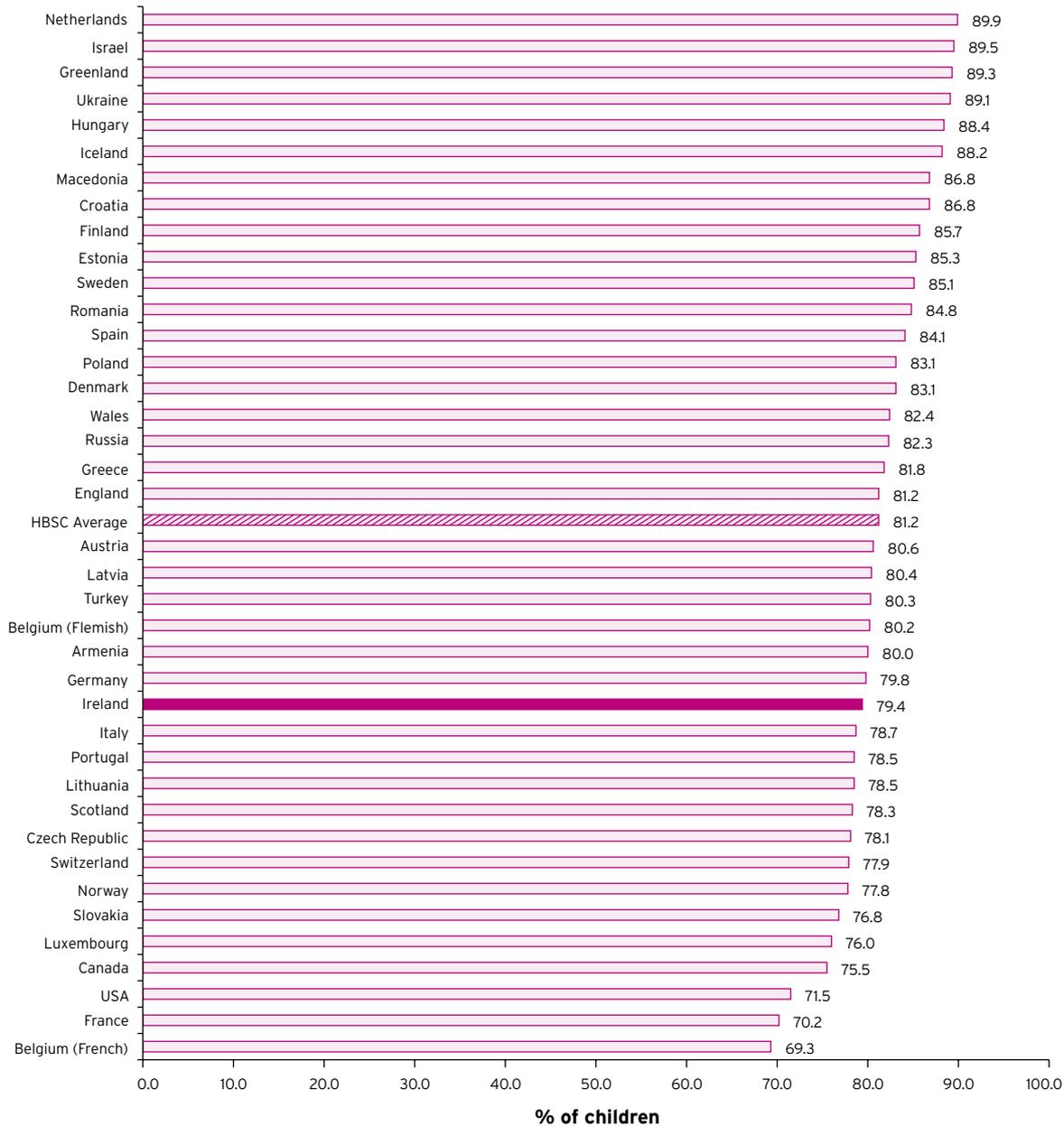
	%
All children	81.8
NUTS Region	
Border	82.2
Dublin	81.2
Midlands	80.8
Mid-East	84.5
Mid-West	81.6
South-East	82.9
South-West	81.2
West	80.8

Source: HBSC Survey, 2010

International comparisons

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

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



Source: HBSC Survey, 2010

RELATIONSHIP WITH FATHERS

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

Measure

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

Key findings

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

Differences by population groups

- When compared to other children, there were no significant differences in the percentages of Traveller children, immigrant children and children with a disability and/or chronic illness who reported that they find it easy to talk to their father when something is really bothering them (see *Table 27*).

Table 27: Percentage of children aged 10-17 who report that they find it easy to talk to their father when something is really bothering them, by population groups (2010)

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

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

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

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

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

* Refers to children aged 10-17 only.

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

n/a = not available

Source: HBSC Surveys

Differences by geographic location

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

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

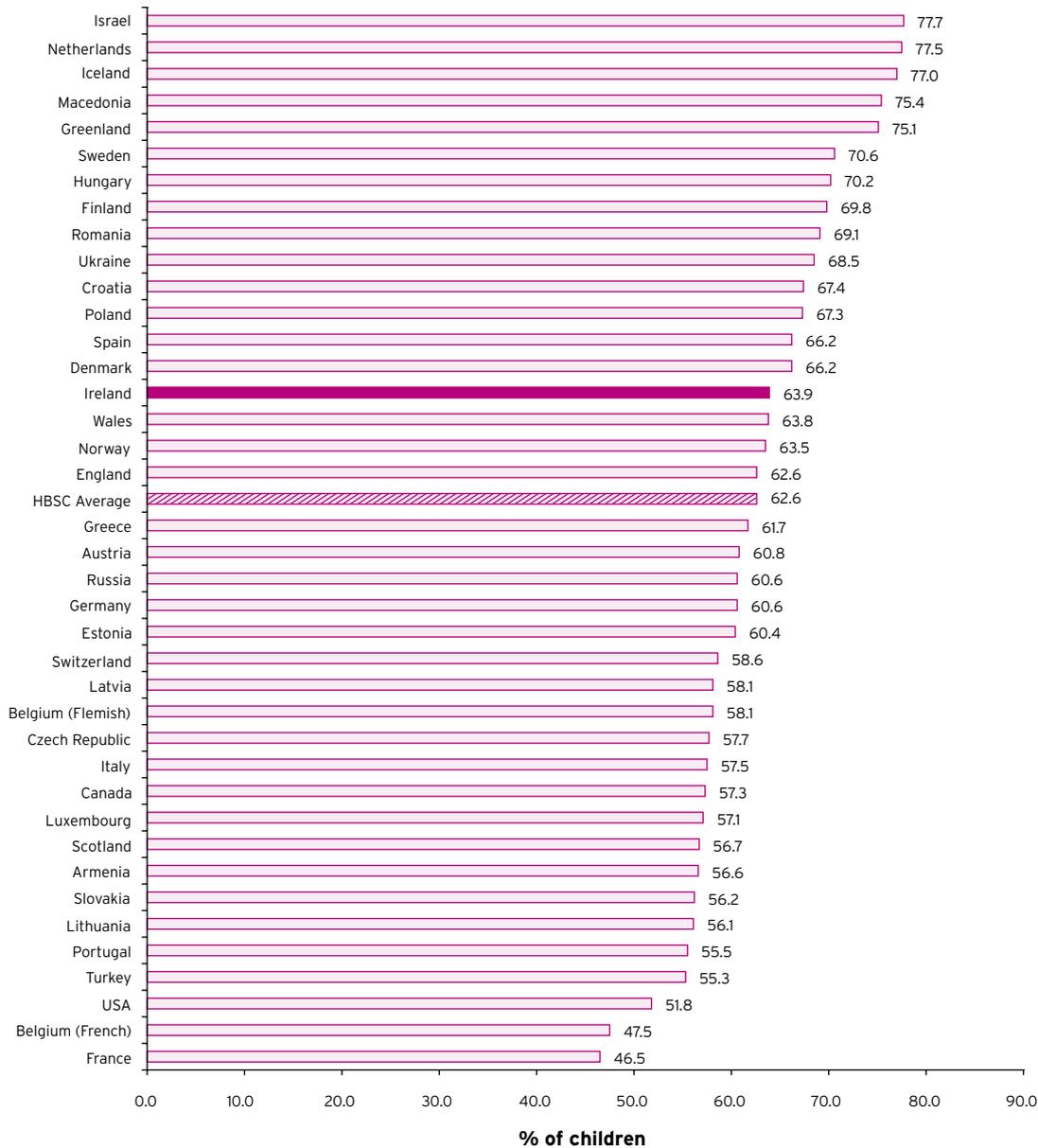
	%
All children	66.6
NUTS Region	
Border	70.1
Dublin	66.3
Midlands	64.6
Mid-East	68.4
Mid-West	65.5
South-East	67.4
South-West	65.7
West	65.8

Source: HBSC Survey, 2010

International comparisons

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

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



Source: HBSC Survey, 2010

TALKING TO PARENTS

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

Measure

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

Key findings

- In 2009, 59.8% of children aged 15 reported that their parents spend time just talking with them several times a week.

Differences by population groups

- The percentages of Traveller children and immigrant children who reported that their parents spend time just talking with them several times a week did not differ significantly from the corresponding percentages of other children (see *Table 30*).

Table 30: Percentage of children aged 15 who report that their parents spend time just talking with them several times a week, by population groups (2009)

	%
All children	59.8
Traveller status	
Traveller children	49.0
All other children	60.0
Immigrant status	
Immigrant children	51.9
All other children	60.4

Source: PISA Survey, 2009

Differences by gender, social class and over time

- In 2009, the percentage of girls (70.8%) who reported that their parents spend time just talking with them several times a week was significantly higher than the corresponding percentage of boys (48.9%) (see Table 31).
- Children from the highest social class category (63.0%) were significantly more likely to report that their parents spend time just talking with them several times a week when compared to children from the lowest social class category (57.1%).
- The percentage of children (59.8%) who reported that their parents spend time just talking with them several times a week was significantly lower than the corresponding percentage in 2006 (64.7%) and 2000 (61.6%).

Table 31: Percentage of children aged 15 who report that their parents spend time just talking with them several times a week, by gender and social class (2000, 2006 and 2009)

	2000	2006	2009
All children	61.6	64.7	59.8
Gender			
Boys	52.8	55.6	48.9
Girls	70.3	73.4	70.8
Social class			
High SES	62.3	66.6	63.0
Medium SES	61.9	64.6	60.2
Low SES	60.4	63.0	57.1

Source: PISA Surveys

PARENTAL INVOLVEMENT IN SCHOOLING

There has been a significant decrease in the percentage of 15-year-old children who report that their parents discuss with them how well they are doing at school.

Measure

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

Key findings

- In 2009, 42.8% of children aged 15 reported that their parents discuss with them how well they are doing at school several times a week.

Differences by population groups

- When compared to other children, immigrant children were less likely to report that their parents discuss with them how well they are doing at school several times a week (see *Table 32*). This difference was statistically significant.
- There was no significant difference between Traveller children and other children.

Table 32: Percentage of children aged 15 who report that their parents discuss with them how well they are doing at school several times a week, by population groups (2009)

	%
All children	42.8
Traveller status	
Traveller children	54.6
All other children	42.6
Immigrant status	
Immigrant children	30.4
All other children	42.8

Source: PISA Survey, 2009

Differences by gender, social class and over time

- In 2009, the percentage of girls (46.3%) who reported that their parents discuss with them how well they are doing at school several times a week was significantly higher than the corresponding percentage of boys (39.4%) (see Table 33).
- Children in the lowest social class category (37.9%) were significantly less likely to report that their parents discuss with them how well they are doing at school several times a week when compared to children in the highest and medium social class categories (46.6% and 43.6% respectively).
- The percentage of children (42.8%) who reported that their parents discuss with them how well they are doing at school several times a week was significantly lower than the corresponding percentages in 2006 (48.0%) and 2000 (47.9%).

Table 33: Percentage of children aged 15 who report that their parents discuss with them how well they are doing at school several times a week, by gender and social class (2000, 2006 and 2009)

	2000	2006	2009
All children	47.9	48.0	42.8
Gender			
Boys	45.7	44.1	39.4
Girls	50.0	51.6	46.3
Social class			
High SES	51.3	50.0	46.6
Medium SES	46.7	50.0	43.6
Low SES	45.1	43.5	37.9

Source: PISA Surveys

EATING A MAIN MEAL TOGETHER

There has been a significant decrease in the percentage of 15-year-old children who report that their parents eat a main meal with them around a table.

Measure

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

Key findings

- In 2009, 72.4% of children aged 15 reported that their parents eat a main meal with them around a table several times a week.

Differences by population group

- The percentages of Traveller children and immigrant children who reported that their parents eat a main meal with them around a table several times a week did not differ significantly from the corresponding percentages of non-Traveller and non-immigrant children (see Table 34).

Table 34: Percentage of children aged 15 who report that their parents eat a main meal with them around a table several times a week, by population groups (2009)

	%
All children	72.4
Traveller status	
Traveller children	61.8
All other children	72.6
Immigrant status	
Immigrant children	68.8
All other children	73.2

Source: PISA Survey, 2009

Differences by gender, social class and over time

- In 2009, the percentage of girls (74.6%) who reported that their parents eat a main meal with them around a table several times a week did not differ significantly from the corresponding percentage of boys (70.1%) (see Table 35).
- Children in the lowest social class category (66.9%) were significantly less likely to report that their parents eat a main meal with them around a table several times a week when compared to children in the highest and medium social class categories (77.1% and 73.6% respectively).
- The percentage of children (72.4%) who reported that their parents eat a main meal with them around a table several times a week was significantly lower than the corresponding percentage in 2000 (77.1%).

Table 35: Percentage of children aged 15 who report that their parents eat a main meal with them around a table several times a week, by gender and social class (2000, 2006 and 2009)

	2000	2006	2009
All children	77.1	74.5	72.4
Gender			
Boys	77.6	73.7	70.1
Girls	76.5	75.3	74.6
Social class			
High SES	78.5	78.2	77.1
Medium SES	78.6	75.2	73.6
Low SES	73.5	70.7	66.9

Source: PISA Surveys

FRIENDSHIPS

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

Measure

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

Key findings

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

Differences by population groups

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

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

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

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

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

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

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

* Refers to children aged 10-17 only.

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

n/a = not available

Source: HBSC Surveys

Differences by geographic location

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

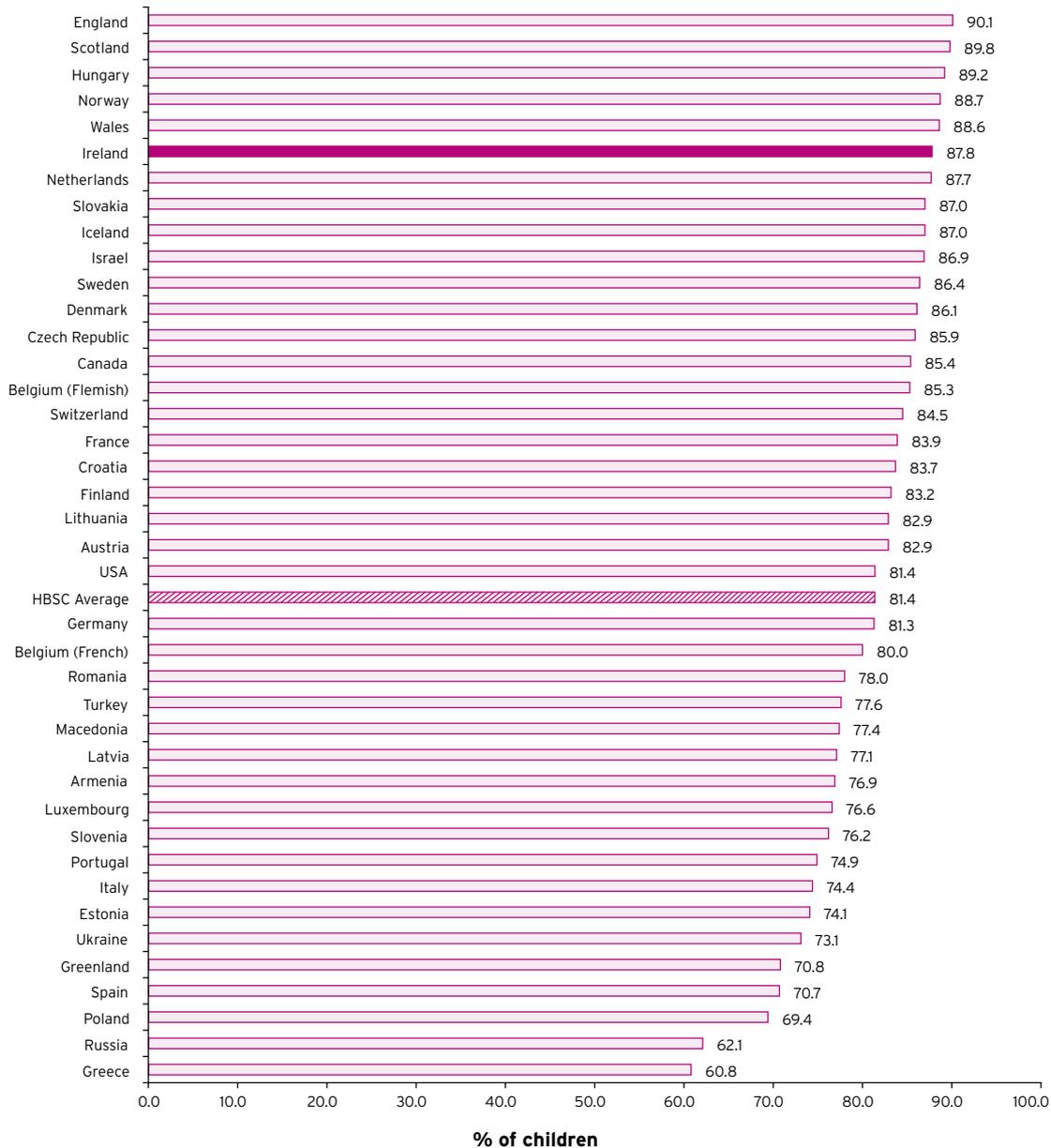
Table 38: Percentage of children aged 10-17 who report to have 3 or more friends of the same gender, by NUTS Region (2010)	
	%
All children	89.5
NUTS Region	
Border	88.4
Dublin	88.5
Midlands	89.8
Mid-East	88.8
Mid-West	89.9
South-East	91.1
South-West	91.2
West	87.6

Source: HBSC Survey, 2010

International comparisons

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

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



Source: HBSC Survey, 2010

PETS AND ANIMALS

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

Measure

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

Key findings

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

Differences by population groups

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

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

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

Source: HBSC Survey, 2010

Differences by age, gender and social class

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

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

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

* Refers to children aged 10-17 only.

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

Source: HBSC Surveys

Differences by geographic location

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

Table 41: Percentage of children aged 10-17 who report having a pet of their own or a pet in their family, by NUTS Region (2010)	
	%
All children	75.5
NUTS Region	
Border	76.0
Dublin	64.7
Midlands	79.8
Mid-East	76.1
Mid-West	79.8
South-East	83.6
South-West	77.8
West	78.8

Source: HBSC Survey, 2010

BULLYING

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

Measure

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

Key findings

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

Differences by population groups

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

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

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

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

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

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

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

* Refers to children aged 10-17 only.

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

n/a = not available

Source: HBSC Surveys

Differences by geographic location

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

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

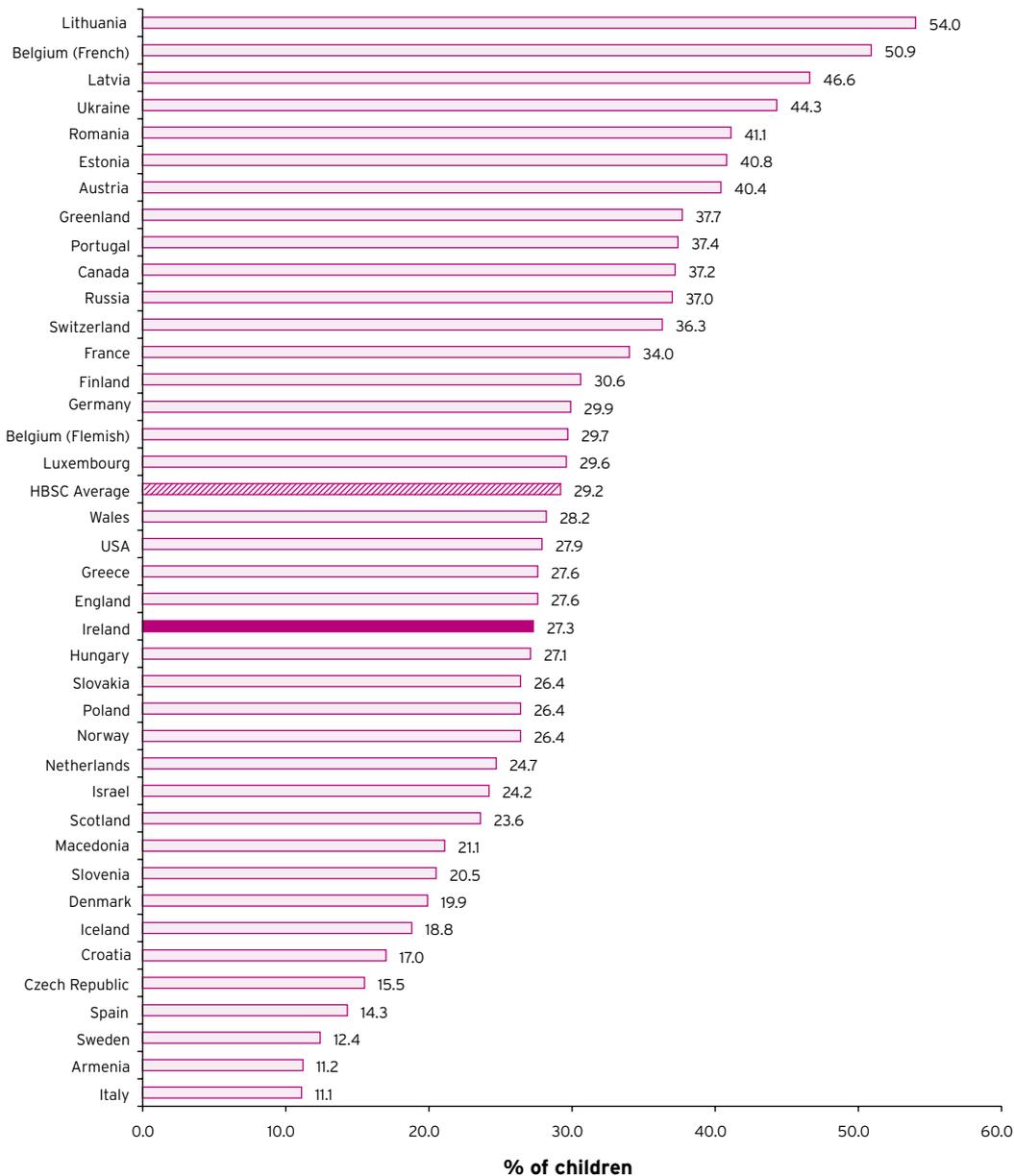
	%
All children	24.3
NUTS Region	
Border	21.7
Dublin	24.8
Midlands	23.9
Mid-East	23.0
Mid-West	26.8
South-East	23.9
South-West	24.3
West	25.3

Source: HBSC Survey, 2010

International comparisons

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

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



Source: HBSC Survey, 2010

PART 3:

CHILDREN'S OUTCOMES

covering

Education

Health

Social, emotional and behavioural outcomes

EDUCATION OUTCOMES

QUALITY OF EARLY CHILDHOOD CARE AND EDUCATION

The number of Early Childhood Care and Education (ECCE) services contracted to deliver the Free Pre-School Year Scheme has increased by almost 10% between 2010 and 2011.

Measure

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

Key findings

- In 2011, a total of 4,162 ECCE services were under contract to deliver the Free Pre-School Year Scheme to 65,592 children (see *Table 45*). Of these ECCE services, 85.4% met the basic capitation criteria and 14.6% met the higher capitation criteria.

Differences by over time

- The number of ECCE services contracted to deliver the Free Pre-School Year Scheme has increased by almost 10% between 2010 and 2011.

Table 45: Percentage of Early Childhood Care and Education (ECCE) services under contract to deliver the Free Pre-School Year Scheme that meet basic and higher capitation criteria (2010 and 2011)

	Total ECCE services	Meeting basic capitation criteria		Meeting higher capitation criteria	
	No.	No.	%	No.	%
Year					
2010	3,787	3,105	82.0	415	11.0
2011	4,162	3,553	85.4	609	14.6

Source: ECCE Database

Differences by geographic location

- Overall, 14.6% of ECCE services under contract to deliver the Free Pre-School Year Scheme met the higher capitation criteria (see *Table 46*). This percentage ranged from 2.6% in Waterford City to 26.2% in Cork City.

Table 46: Percentage of Early Childhood Care and Education (ECCE) services under contract to deliver the Free Pre-School Year Scheme that meet basic and higher capitation criteria, by administrative county (2011)

	No. of children	Total ECCE services	Meeting basic capitation criteria		Meeting higher capitation criteria	
			No.	%	No.	%
Total	65,592	4,162	3,553	85.4	609	14.6
Administrative county						
Carlow	786	44	36	81.8	8	18.2
Cavan	1,225	61	53	86.9	8	13.1
Clare	1,625	134	124	92.5	10	7.5
Cork City	1,411	84	62	73.8	22	26.2
Cork County	6,182	346	264	76.3	82	23.7
Donegal	2,346	141	128	90.8	13	9.2
Dublin City	4,898	362	304	84.0	58	16.0
Dun Laoghaire/Rathdown	2,399	177	140	79.1	37	20.9
Fingal	4,802	308	268	87.0	40	13.0
Galway	3,693	251	226	90.0	25	10.0
Kerry	1,940	122	95	77.9	27	22.1
Kildare	3,758	214	181	84.6	33	15.4
Kilkenny	1,320	96	86	89.6	10	10.4
Laois	1,473	78	73	93.6	5	6.4
Leitrim	411	33	31	93.9	2	6.1
Limerick City	783	44	36	81.8	8	18.2
Limerick County	1,904	127	100	78.7	27	21.3
Longford	555	36	32	88.9	4	11.1
Louth	1,854	112	107	95.5	5	4.5
Mayo	1,730	113	101	89.4	12	10.6
Meath	3,263	201	175	87.1	26	12.9
Monaghan	864	58	49	84.5	9	15.5
Offaly	1,133	66	59	89.4	7	10.6

continued

Table 46 (continued)

	No. of children	Total ECCE services	Meeting basic capitation criteria		Meeting higher capitation criteria	
		No.	No.	%	No.	%
Roscommon	800	53	49	92.5	4	7.5
Sligo	881	64	55	85.9	9	14.1
South Dublin	3,946	225	204	90.7	21	9.3
Tipperary NR	1,032	78	65	83.3	13	16.7
Tipperary SR	1,184	73	59	80.8	14	19.2
Waterford City	770	38	37	97.4	1	2.6
Waterford County	869	53	47	88.7	6	11.3
Westmeath	1,356	85	74	87.1	11	12.9
Wexford	2,211	135	113	83.7	22	16.3
Wicklow	2,190	150	120	80.0	30	20.0

Source: ECCE Database

PRIMARY SCHOOL ATTENDANCE

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

Measure

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

Key findings

- In the 2009/10 school year, 11.7% of primary school children were absent from school for 20 days or more.

Differences over age and time

- Over the period 2005/06 to 2009/10, the percentage of primary school children who were absent from school for 20 days or more ranged between about 11%-12% (see Table 47).

Table 47: Percentage of primary school children who are absent from school for 20 days or more in the school year (2005/06 – 2009/10)

	2005/06	2006/07	2007/08	2008/09	2009/10
Primary school children	11.5	10.9	12.0	11.8	11.7

Source: Primary Pupil Absence Reports

Differences by location and school type

- In the 2009/10 school year, the average percentage of primary school children missing 20 days or more was almost twice as high for schools in urban areas (14.8%) when compared to schools in rural areas (7.6%) (see Table 48).
- There was also a clear relationship between 20-day absences and levels of disadvantage. Using the Delivering Equality of Opportunity in Schools (DEIS) categories and participation in the School Support Programme (SSP), the average percentage of primary school children missing 20 days or more tended to be higher in SSP schools when compared to non-SSP schools (although 20-day absences were still higher in non-SSP urban schools than in SSP rural schools).

Table 48: Average percentage of primary school children per school who are absent from school for 20 days or more in the school year, by selected school characteristics (2009/10)

	%
School location	
Rural	7.6
Urban	14.8
DEIS status	
Rural, not in School Support Programme	7.7
Rural, in School Support Programme	9.8
Urban, not in School Support Programme	11.6
Urban, in School Support Programme Band 2	19.4
Urban, in School Support Programme Band 1	23.8

Source: Primary Pupil Absence Report, 2009/10

Differences by geographic location

- Overall, the average percentage of primary school children absent from school for 20 days or more was 10.9% (see *Table 49*). This ranged from 7.3% in Co. Monaghan to 15.9% in Co. Dublin.

Table 49: Average percentage of primary school children per school who are absent from school for 20 days or more in the school year, by county (2009/10)

	%
Total	10.9
County	
Carlow	10.7
Cavan	9.6
Clare	9.5
Cork	10.6
Donegal	8.9
Dublin	15.9
Galway	10.8
Kerry	9.0
Kildare	11.1
Kilkenny	8.9
Laois	10.9
Leitrim	7.5
Limerick	12.7
Longford	12.4
Louth	12.3
Mayo	9.8
Meath	8.4
Monaghan	7.3
Offaly	11.4
Roscommon	8.7
Sligo	9.3
Tipperary NR	8.6
Tipperary SR	9.9
Waterford	11.8
Westmeath	11.1
Wexford	10.6
Wicklow	9.4

Source: Primary Pupil Absence Report, 2009/10

POST-PRIMARY SCHOOL ATTENDANCE

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

Measure

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

Key findings

- In the 2009/10 school year, 17.6% of post-primary school children were absent from school for 20 days or more.

Differences over age and time

- Over the period 2005/06 to 2009/10, the percentage of post-primary school children who were absent from school for 20 days or more ranged between 17-18% (see *Table 50*).

Table 50: Percentage of post-primary school children who are absent from school for 20 days or more in the school year (2005/06 – 2009/10)

	2005/06	2006/07	2007/08	2008/09	2009/10
Post-primary school children	16.7	18.6	17.7	18.0	17.6

Source: Post-Primary Pupil Absence Reports

Differences by location and school type

- In the 2009/10 school year, the average percentage of post-primary school children missing 20 days or more was higher in Community/Comprehensive and Vocational schools (see *Table 51*). This percentage was also twice as high in DEIS schools (29.6%) when compared to non-DEIS schools (15.3%).

Table 51: Average percentage of post-primary children per school who are absent from school for 20 days or more in the school year, by selected school characteristics (2009/10)	
	%
Type of school	
Secondary	15.5
Community/Comprehensive	19.5
Vocational	25.9
DEIS status	
DEIS	29.6
Non-DEIS	15.3

Source: Post-Primary Pupil Absence Report, 2009/10

Differences by geographic location

- Overall, the average percentage of post-primary school children absent from school for 20 days or more was 19.4% (see Table 52). This ranged from 12.6% in Co. Waterford to 26.5% in Co. Roscommon.

Table 52: Average percentage of post-primary school children per school who are absent from school for 20 days or more in the school year, by county (2009/10)	
	%
Total	19.4
County	
Carlow	19.3
Cavan	23.8
Clare	12.8
Cork	17.2
Donegal	18.8
Dublin	19.2
Galway	20.7
Kerry	20.7
Kildare	21.1
Kilkenny	16.2
Laois	22.4
Leitrim	13.4

continued

Table 52 (continued)	
County	%
Limerick	22.2
Longford	26.3
Louth	15.7
Mayo	22.8
Meath	15.4
Monaghan	19.0
Offaly	25.5
Roscommon	26.5
Sligo	19.4
Tipperary NR	21.9
Tipperary SR	16.2
Waterford	12.6
Westmeath	22.1
Wexford	23.5
Wicklow	18.3

Source: Post-Primary Pupil Absence Report, 2009/10

LEAVING CERTIFICATE RETENTION RATES

Retention rates to the completion of the Leaving Certificate have increased by almost 8 percentage points - from 82.3% of children in the 1997 school entry cohort to 90.2% of children in the 2006 school entry cohort.

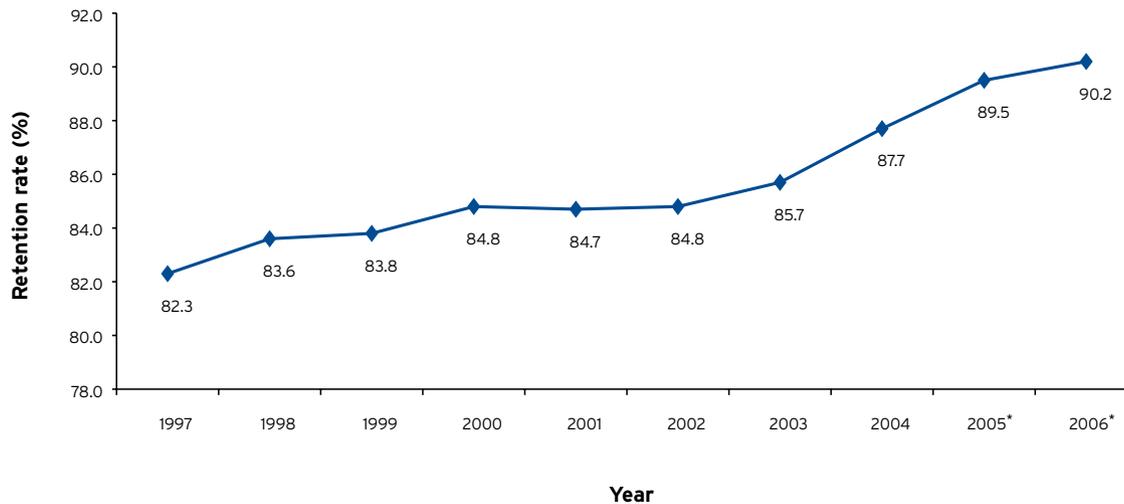
Measure

The Leaving Certificate retention rate.

Key findings

- The Leaving Certificate retention rate for children entering secondary school in 2006 was 90.2% (i.e. out of the 54,917 children enrolled on 30th September 2006 in Year 1 of the Junior Cycle, 49,535 sat the Leaving Certificate by 2011 or 2012).

Figure 10: Leaving Certificate retention rates for the 1997-2006 school entry cohorts



* Break in series from 2005 onwards due to revised methodology. Further details can be found in the technical notes in Appendix 1.

Differences by gender, school type and over time

- The retention rate for boys in the 2006 school entry cohort was 88.7% compared to 91.8% for girls (see *Table 53*).
- On average, secondary schools had the highest retention rates at 92% when compared to vocational (85.9%) and community and comprehensive (90.3%) schools.
- For the 2006 school entry cohort, the retention rate was 80.1% for children in DEIS schools compared to 92.7% for children in non-DEIS schools.
- Retention rates to the completion of the Leaving Certificate have increased by almost 8 percentage points - from 82.3% of children in the 1997 school entry cohort to 90.2% of children in the 2006 school entry cohort (see *Figure 10*).

Table 53: Leaving Certificate retention rates for the 2006 school entry cohort, by gender, school type and DEIS status		
	No. in school entry cohort	% sat Leaving Cert.
Total	54,917	90.2
Gender		
Boys	28,113	88.7
Girls	26,804	91.8
School type		
Secondary	32,414	92.0
Vocational	13,215	85.9
Community and Comprehensive	9,288	90.3
DEIS status		
DEIS schools	10,934	80.1
Non-DEIS schools	43,983	92.7

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

Differences by geographic location

- Overall, the retention rate to Leaving Certificate for children in the 2006 school entry cohort was 90.2% (see Table 54). This ranged from 85.7% in Dublin City to 94.2% in Co. Kilkenny.

Table 54: Leaving Certificate retention rates for the 2006 school entry cohort, by administrative county

	No. in school entry cohort	% sat Leaving Certificate
Total	54,917	90.2
Administrative county		
Carlow	801	90.0
Cavan	800	90.3
Clare	1,402	90.2
Cork County	4,367	92.3
Cork City	1,814	91.5
Donegal	2,228	89.0
Dublin City	5,460	85.7
Dublin Fingal	2,856	91.2
Dublin South	3,282	88.3
Dun Laoghaire/Rathdown	2,400	91.5
Galway County	2,101	91.2
Galway City	878	88.7
Kerry	1,776	92.0
Kildare	2,561	91.7
Kilkenny	1,124	94.2
Laois	778	90.5
Leitrim	404	91.4
Limerick County	1,331	92.7
Limerick City	1,128	86.6
Longford	586	87.1
Louth	1,791	89.6
Mayo	1,677	91.8
Meath	1,843	92.8
Monaghan	871	90.7
Offaly	945	88.1

continued

Table 54 (continued)		
Administrative county	No. in school entry cohort	% sat Leaving Certificate
Roscommon	531	94.0
Sligo	760	93.0
Tipperary NR	1,088	90.1
Tipperary SR	1,077	90.7
Waterford County	651	92.9
Waterford City	698	92.2
Westmeath	1,319	90.5
Wexford	1,959	90.6
Wicklow	1,630	86.1

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

ACHIEVEMENT IN READING

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

Measure

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

Key findings

- In 2009, children aged 15 in Ireland achieved a mean score of 495.6 on the OECD-PISA Reading Literacy Scale.

Differences by population groups

- The mean score on the OECD-PISA Reading Literacy Scale for immigrant children (473.1) was significantly lower than the corresponding mean score for all other children (501.9) (see Table 55).

Table 55: Mean score for children aged 15 based on the OECD-PISA Reading Literacy Scale, by population groups (2009)

	%	Mean score
All children	100.0	495.6
Immigrant status		
Immigrant children	8.3	473.1
All other children	91.7	501.9

Source: PISA Survey, 2009

Differences by gender, social class and over time

- In 2009, girls in Ireland performed significantly better in reading literacy than boys, achieving a mean score of 515.4 compared to 476.3 (see Table 56). There was also a large difference in favour of girls in 2006 and 2003.
- Reading achievement was related to social class across all three PISA cycles considered here. In 2009, the mean score of children from the highest social class category (535.5) was significantly higher than the mean score of children in the lowest social class category (459.5).
- The mean reading score for children in Ireland in 2009 was significantly lower than the Irish mean score in 2000 (526.7), which was the last time reading was a major assessment domain in PISA, and was also lower than in 2003 (515.5) and 2006 (517.3).

Table 56: Mean score for children aged 15 based on the OECD-PISA Reading Literacy Scale, by gender and social class (2003, 2006 and 2009)

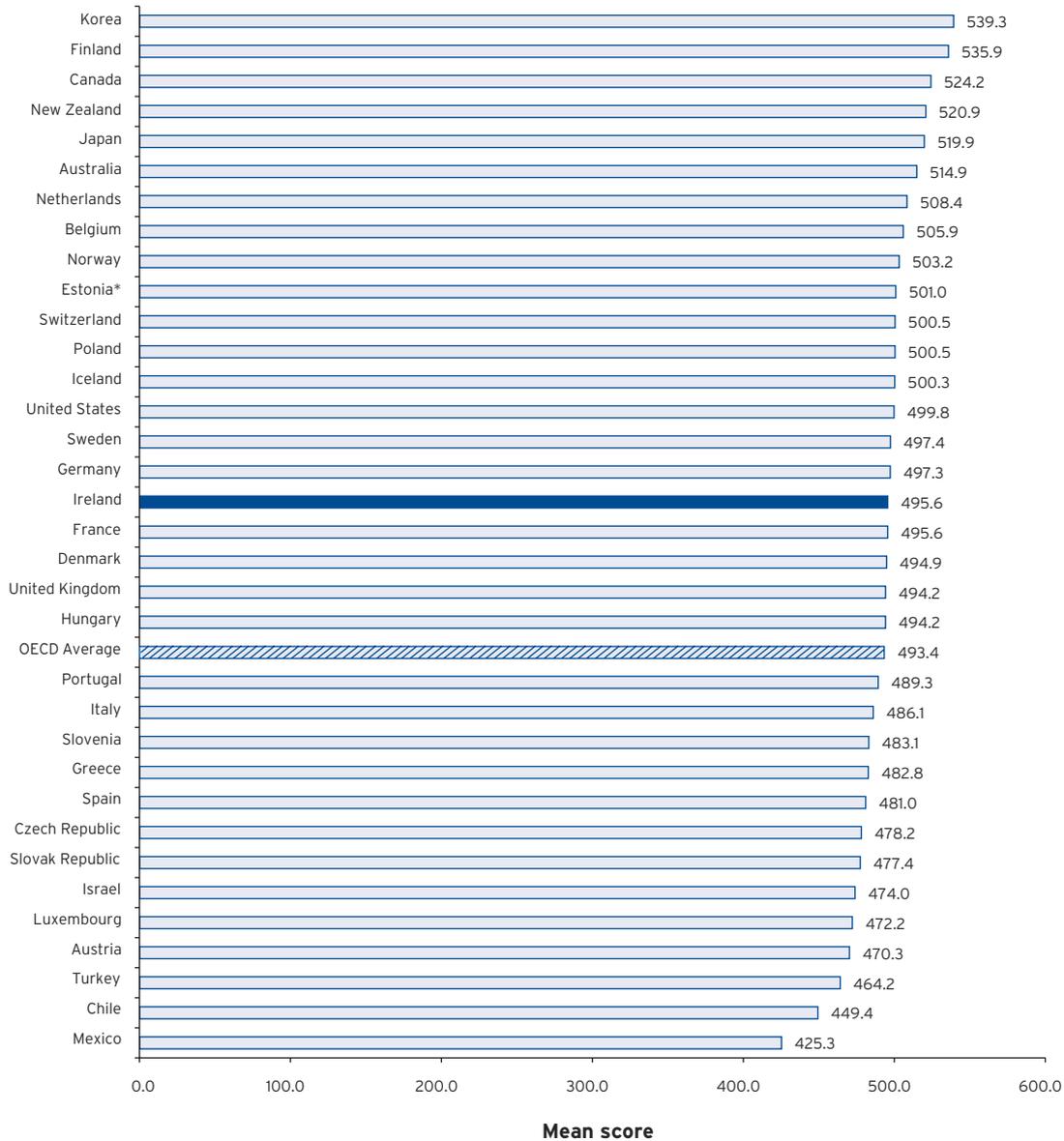
	2003	2006	2009
All children	515.5	517.3	495.6
Gender			
Boys	501.1	500.2	476.3
Girls	530.1	534.0	515.4
Social class			
High SES	547.8	551.2	535.5
Medium SES	521.6	522.4	497.9
Low SES	484.3	490.2	459.5

Source: PISA Surveys

International comparisons

- In 2009, Ireland's mean score of 495.6 on the OECD-PISA Reading Literacy Scale was not significantly different from the OECD mean score of 493.4 (see Figure 11).
- Mexico was the lowest-scoring OECD country on this indicator, while Korea achieved the highest mean score.
- Ireland ranked 17th (true rank: 12th - 22nd) in reading literacy among 34 participating OECD countries. Ireland's mean score is not significantly different from those of 13 OECD countries (including Norway, Poland, the United States, Germany, France and the United Kingdom).

Figure 11: Mean scores of children aged 15 based on the OECD-PISA Reading Literacy Scale, by OECD country (2009)



* PISA 2009 data for Estonia (an accession candidate country) are included in the OECD average estimates.

Source: PISA Survey, 2009

ACHIEVEMENT IN MATHEMATICS

Mathematics literacy scores of 15-year-olds in Ireland are significantly below the OECD average.

Measure

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

Key findings

- In 2009, children aged 15 in Ireland achieved a mean score of 487.1 on the OECD-PISA Mathematics Literacy Scale.

Differences by population groups

- The mean score on the OECD-PISA Mathematics Literacy Scale for immigrant children (471.7) was significantly lower than the corresponding mean score for all other children (491.7) (see *Table 57*).

Table 57: Mean score for children aged 15 based on the OECD-PISA Mathematics Literacy Scale, by population groups (2009)

	%	Mean score
All children	100.0	487.1
Immigrant status		
Immigrant children	8.3	471.7
All other children	91.7	491.7

Source: PISA Survey, 2009

Differences by gender, social class and over time

- In 2009, boys in Ireland achieved a higher mean score on the Mathematics Literacy Scale than girls (490.9 compared to 483.3), although the difference was not significant (see Table 58). In both 2006 and 2003, boys significantly outscored girls.
- The mean mathematics score of children from the highest social class category (523.4) was significantly higher than the mean of children from the medium or lowest social class categories (490.1 and 452.3 respectively). Mathematics achievement was similarly related to social class in 2006 and 2003.
- The mean mathematics score for students in Ireland in 2009 was significantly lower than the Irish mean score in 2003 (the last time mathematics was a major assessment domain in PISA).

Table 58: Mean score for children aged 15 based on the OECD-PISA Mathematics Literacy Scale, by gender and social class (2003, 2006 and 2009)

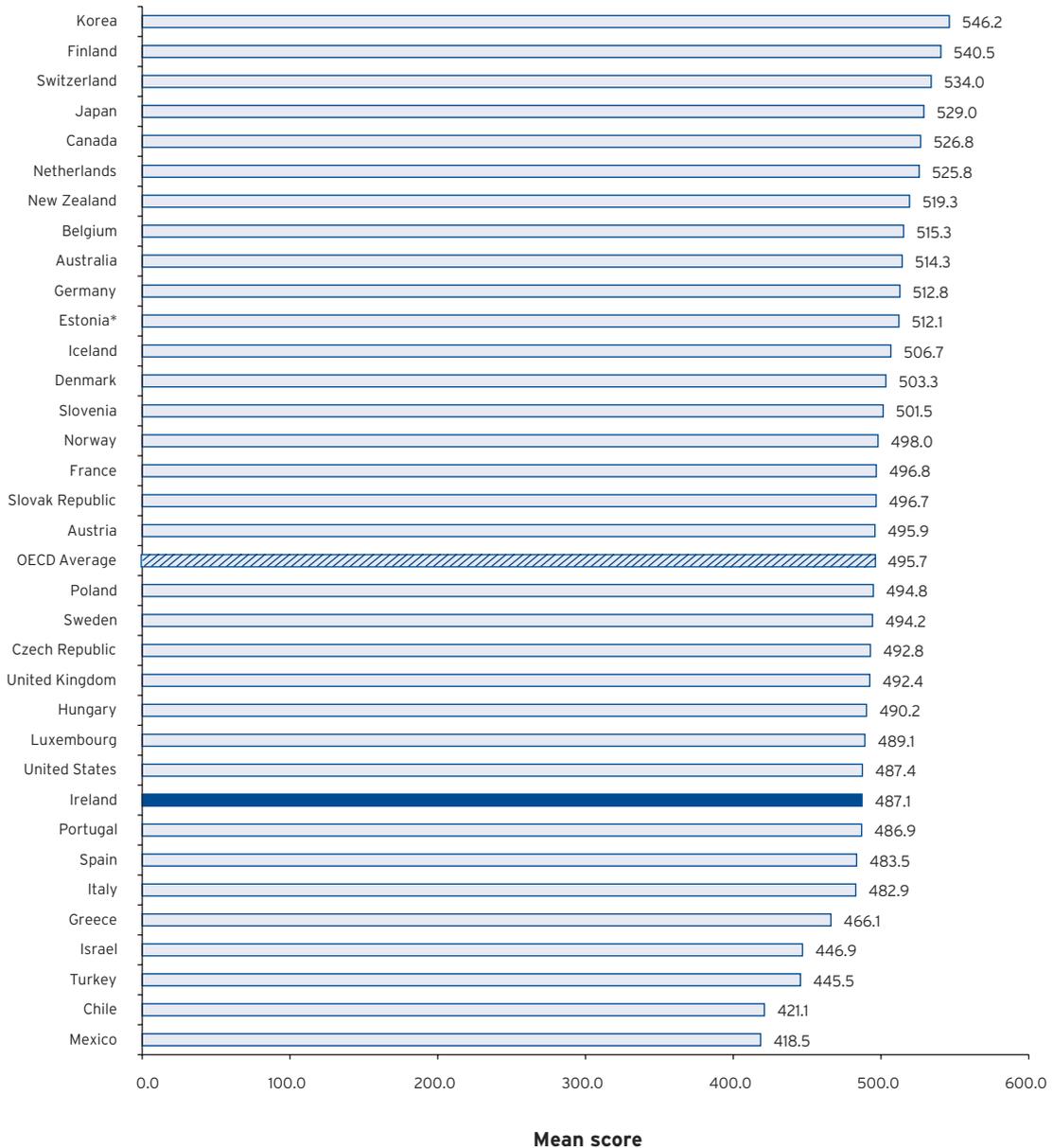
	2003	2006	2009
All children	502.8	501.5	487.1
Gender			
Boys	510.2	507.3	490.9
Girls	495.4	495.8	483.3
Social class			
High SES	535.7	532.8	523.4
Medium SES	506.1	505.0	490.1
Low SES	473.5	476.0	452.3

Source: PISA Surveys

International comparisons

- In 2009, Ireland's mean score of 487.1 on the OECD-PISA Mathematics Literacy Scale was significantly below the OECD mean score of 495.7 (see Figure 12).
- Mexico was the lowest-scoring OECD country on this indicator, while Korea achieved the highest mean score.
- Ireland ranked 26th (true rank: 22nd - 29th) in mathematical literacy among all 34 OECD countries. Ireland's mean score was not significantly different from the mean scores of 10 countries, including Sweden, the Czech Republic, the United Kingdom and the United States.

Figure 12: Mean scores of children aged 15 based on the OECD-PISA Mathematics Literacy Scale, by OECD country (2009)



* PISA 2009 data for Estonia (an accession candidate country) are included in the OECD average estimates.

Source: PISA Survey, 2009

ACHIEVEMENT IN SCIENCE

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

Measure

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

Key findings

- In 2009, children aged 15 in Ireland achieved a mean score of 508.0 on the OECD-PISA Combined Scientific Literacy Scale.

Differences by population groups

- The mean score on the OECD-PISA Combined Scientific Literacy Scale for immigrant children (492.3) was significantly lower than the corresponding mean score for all other children (513.1) (see *Table 59*).

Table 59: Mean score for children aged 15 based on the OECD-PISA Combined Scientific Literacy Scale, by population groups (2009)

	%	Mean score
All children	100.0	508.0
Immigrant status		
Immigrant children	8.3	492.3
All other children	91.7	513.1

Source: PISA Survey, 2009

Differences by gender, social class and over time

- In 2009, girls in Ireland achieved a higher mean score on the OECD-PISA Combined Scientific Literacy Scale than boys (509.4 and 506.6 respectively), although this difference was not significant (see *Table 60*). The mean scores of boys and girls did not differ significantly from each other in 2006 or in 2003.
- As with reading and mathematics in 2009, children from the highest social class category achieved a significantly higher mean score in science (545.7) than children in the medium or lowest social class categories (512.8 and 471.0 respectively). A similar pattern was observed in 2006 and 2003.
- The mean science score of students in Ireland in 2009 was almost identical to their score in 2006 (the last time science was a major assessment domain in PISA).

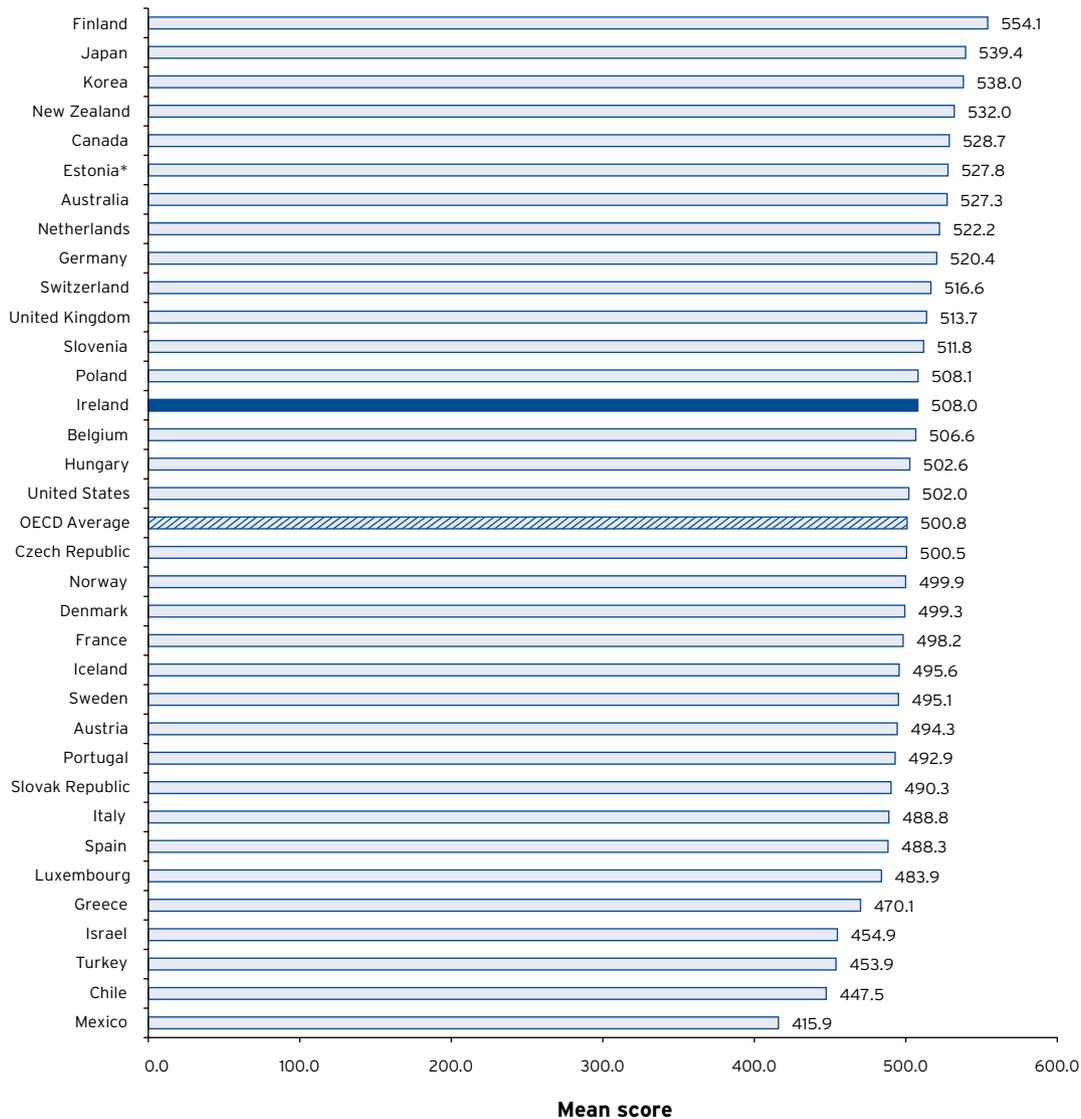
Table 60: Mean score for children aged 15 based on the OECD-PISA Combined Scientific Literacy Scale, by gender and social class (2003, 2006 and 2009)			
	2003	2006	2009
All children	505.4	508.3	508.0
Gender			
Boys	506.4	508.1	506.6
Girls	504.4	508.5	509.4
Social class			
High SES	542.5	542.3	545.7
Medium SES	509.6	512.8	512.8
Low SES	470.8	480.7	471.0

Source: PISA Surveys

International comparisons

- In 2009, Ireland's mean score of 508.0 on the OECD-PISA Combined Scientific Literacy Scale was significantly above the OECD mean score of 500.8 (see *Figure 13*).
- Mexico was the lowest-scoring OECD country on this indicator, while Finland achieved the highest mean score.
- Ireland ranked 14th (true rank: 11th - 17th) in scientific literacy among all 34 OECD countries. Ireland's mean score was not significantly different from the mean scores of 8 OECD countries, including the United Kingdom, the United States, the Czech Republic, Hungary and Norway.

Figure 13: Mean scores of children aged 15 based on the OECD-PISA Combined Scientific Literacy Scale, by OECD country (2009)



* PISA 2009 data for Estonia (an accession candidate country) are included in the OECD average estimates.

Source: PISA Survey, 2009

HEALTH OUTCOMES

BIRTH WEIGHT

The percentage of low birth weight babies has remained relatively stable over the last 5 years.

Measure

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

Key findings

- In 2011, 5.4% of all babies born were in the low birth weight category (weighing less than 2,500 grams).

Differences by gender, social class and over time

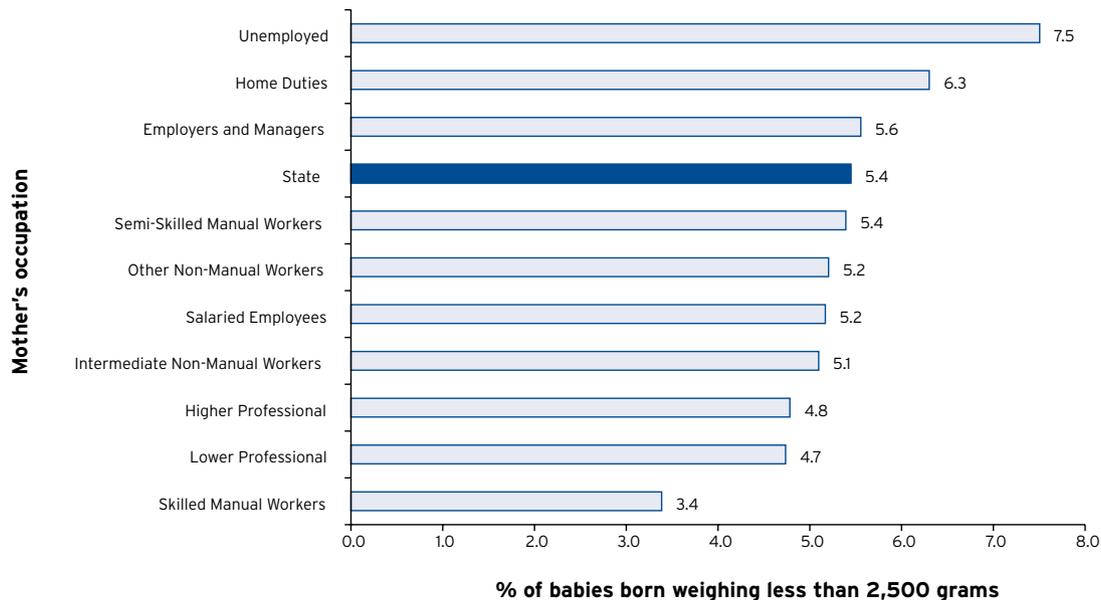
- Girls were more likely than boys to be born in the low birth weight category (5.8% and 5.1% respectively) (see *Table 61*).
- There were also marked social class differences. The percentage of babies born in the low birth weight category was highest among mothers who reported to be 'unemployed' (7.5%) (see *Figure 14*).
- Over the 5-year period 2007-2011, the percentage of babies born in the low birth weight category has been relatively stable.

Table 61: Percentage of babies born weighing less than 2,500 grams (live and still births), by gender (2007-2011)

	2007	2008	2009	2010	2011		
	Low birth weight (%)	Healthy birth weight (%)	High birth weight (%)				
Total	5.6	5.6	5.3	5.3	5.4	78.3	16.3
Gender							
Boys	5.1	5.2	4.9	5.0	5.1	75.3	19.6
Girls	6.0	6.0	5.8	5.7	5.8	81.4	12.8

Source: National Perinatal Reporting System

Figure 14: Percentage of babies born weighing less than 2,500 grams (live and still births), by occupation of mother (2011)*



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

Source: National Perinatal Reporting System, 2011

Differences by geographic location

- Overall, 5.4% of all babies born in 2011 were in the low birth weight category (see Table 62). This percentage ranged from 3.3% of all births in Co. Roscommon and Co. Sligo to 7% of all births in Co. Longford.

Table 62: Number and percentage of babies born weighing less than 2,500 grams (live and still births), by mothers' county of residence (2011)*

	No. of low birth weight babies in State/County	Low birth weight babies as a percentage of all births in State/County
Total	4,051	5.4
County		
Carlow	65	6.5
Cavan	74	5.8
Clare	103	6.1
Cork	461	5.5
Donegal	92	4.2
Dublin City	925	5.9
Dublin County	316	5.3
Galway	200	5.0
Kerry	118	5.9
Kildare	234	6.1
Kilkenny	81	5.7
Laois	59	4.4
Leitrim	19	4.0
Limerick	169	5.4
Longford	45	7.0
Louth	117	6.1
Mayo	87	4.8
Meath	183	5.2
Monaghan	42	4.8
Offaly	76	6.2
Roscommon	28	3.3
Sligo	31	3.3
Tipperary	125	5.2
Waterford	114	6.3
Westmeath	67	4.7
Wexford	93	4.1
Wicklow	125	5.6

* Categories where percentages are based on less than 100 births (i.e. 2 births with 'other' place of residence for mother) have been omitted from this Table.

Source: National Perinatal Reporting System, 2011

BREASTFEEDING

Breastfeeding initiation rates have continued to increase.

Measure

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

Key findings

- In 2011, 55.2% of infants were breastfed on discharge from hospital. This includes 46.6% who were exclusively breastfed and a further 8.6% who were fed using a combination of bottle and breastfeeding.

Differences by age, social class and over time

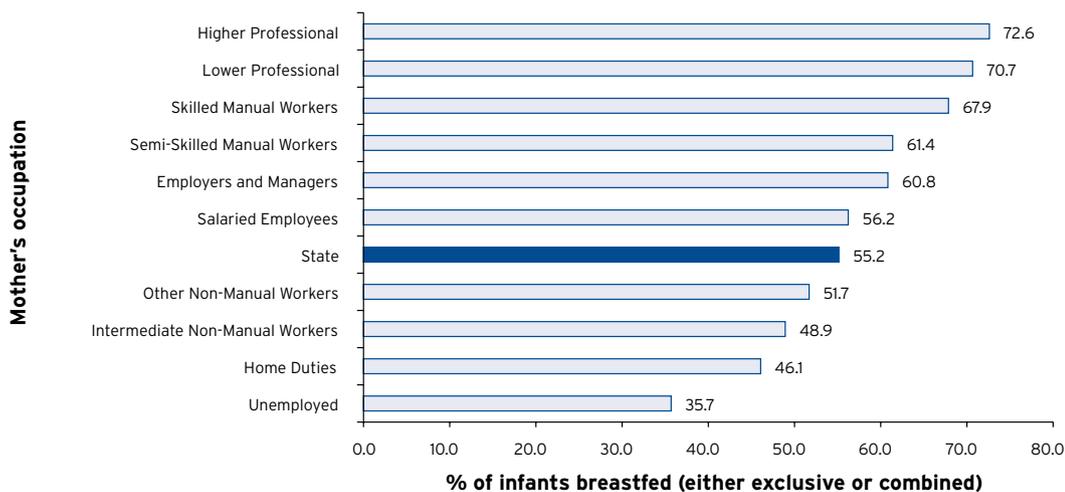
- The percentage of infants who were breastfed (either exclusive or combined) is higher among older mothers (see *Table 63*).
- There were also marked social class differences (see *Figure 15*). The percentage of infants who were breastfed (either exclusive or combined) was higher among mothers in 'higher' and 'lower professional' groups (72.6% and 70.7% respectively) compared to mothers who reported to be 'unemployed' (35.7%).
- Over the 5-year period 2007-2011, the percentage of infants who were breastfed (either exclusive or combined) on discharge from hospital has risen consistently.

Table 63: Percentage of infants who are breastfed (exclusive or combined) on discharge from hospital, by mothers' age (2007-2011)*

	2007		2008		2009		2010		2011		
	Excl	Comb	Total								
Total	45.0	5.5	44.4	6.6	45.2	7.4	45.9	8.1	46.6	8.6	55.2
Age											
15-19	22.9	3.7	22.3	4.7	21.2	4.9	19.7	4.5	20.5	3.5	24.0
20-24	36.7	5.0	35.6	5.9	36.3	6.2	33.9	6.4	32.5	6.3	38.8
25-29	44.0	5.8	44.2	6.9	45.2	7.3	46.4	7.9	46.9	8.3	55.2
30-34	47.8	5.6	47.4	6.9	48.4	7.8	49.3	8.5	50.2	8.9	59.1
35-39	48.8	5.6	47.2	6.4	47.9	7.8	48.2	8.6	48.9	9.2	58.1
40-44	50.4	6.0	48.6	7.7	47.9	8.5	48.8	9.8	47.6	10.9	58.4
Over 45	50.9	4.4	49.7	8.0	44.2	14.1	42.9	12.9	49.4	13.3	62.7

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

Source: National Perinatal Reporting System

Figure 15: Percentage of infants who are breastfed (either exclusive or combined) on discharge from hospital, by occupation of mother (2011)*

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

Source: National Perinatal Reporting System, 2011

Differences by geographic location

- Overall, 55.2% of infants in 2011 were breastfed (either exclusive or combined). This ranged from 37.8% in Co. Limerick to 62.1% in Co. Dublin (see Table 64).

Table 64: Percentage of infants who are breastfed (exclusive or combined) on discharge from hospital, by mothers' county of residence (2011)*

	Exclusive	Combined	Total
	%	%	%
Total	46.6	8.6	55.2
County			
Carlow	49.7	2.1	51.7
Cavan	44.0	3.9	47.8
Clare	37.5	6.3	43.8
Cork	52.9	7.4	60.3
Donegal	34.0	7.2	41.3
Dublin	51.3	10.8	62.1
Galway	41.0	16.7	57.8
Kerry	42.3	6.9	49.2
Kildare	46.6	9.9	56.4
Kilkenny	52.4	0.8	53.2
Laois	47.6	3.9	51.6
Leitrim	38.2	11.3	49.5
Limerick	31.6	6.3	37.8
Longford	45.7	4.4	50.1
Louth	37.6	8.4	46.0
Mayo	34.9	17.7	52.6
Meath	48.0	8.2	56.2
Monaghan	39.3	5.8	45.1
Offaly	42.0	2.9	44.8
Roscommon	43.3	8.8	52.1
Sligo	35.8	16.6	52.4
Tipperary	43.8	2.3	46.1
Waterford	56.3	1.9	58.2
Westmeath	51.9	4.7	56.6
Wexford	46.0	4.6	50.6
Wicklow	47.3	9.4	56.7

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

HEALTH CONDITIONS AND HOSPITALISATION

More than half of the total hospital discharges of children in 2011 were children under 5 years of age.

Measure

The number of hospital discharges of children.

Key findings

- In 2011, there was 153,905 hospital discharges of children.

Differences by age, gender, principal diagnosis and over time

- More than half of the total hospital discharges were of infants and children aged 1-4 years old (21.9% and 29.0% respectively) and more than half of the total hospital discharges were of boys (55.7%) (see Table 65).
- The most commonly reported principal diagnosis recorded was '*diseases of the respiratory system*' (12.4%), followed by '*injury, poisoning and certain other consequences of external causes*' (9.2%).
- Over the 4-year period 2007-2010, the total number of hospital discharges remained relatively stable. In 2011, this number increased by almost 5 percentage points.

Table 65: Number and percentage of hospital discharges of children, by age, gender and principal diagnosis (2007-2011)						
	2007	2008	2009	2010	2011	
	No.	No.	No.	No.	No.	%
Total	145,051	145,649	145,749	146,693	153,905	100.0
Age						
Under 1	31,614	33,478	32,863	32,227	33,762	21.9
1-4	42,659	42,258	43,206	43,271	44,690	29.0
5-9	28,210	28,184	28,657	29,406	31,302	20.3
10-14	22,865	23,551	22,538	23,661	25,467	16.5
15-17	19,703	18,178	18,485	18,128	18,684	12.1
Gender						
Boys	80,925	81,462	80,752	81,128	85,712	55.7
Girls	64,126	64,187	64,997	65,565	68,193	44.3
Principal diagnosis						
Diseases of the respiratory system	19,897	18,608	18,969	16,893	19,071	12.4
Injury, poisoning and certain other consequences of external causes	15,105	14,221	14,159	14,762	14,085	9.2
Diseases of the digestive system	12,815	13,127	13,144	13,472	13,781	9.0
Certain infectious and parasitic diseases	13,187	12,357	11,858	11,392	12,362	8.0
Certain conditions originating in the perinatal period	9,261	9,503	9,818	9,748	10,336	6.7
Congenital malformations, deformations and chromosomal abnormalities	8,682	9,094	9,142	9,409	10,275	6.7
Diseases of the genitourinary system	7,615	7,716	7,910	7,905	7,422	4.8
Neoplasms	6,046	6,157	5,827	6,534	6,726	4.4
Diseases of the skin and subcutaneous tissue	4,095	4,141	4,002	4,035	4,371	2.8
Diseases of the ear and mastoid process	4,723	5,044	4,865	4,429	4,286	2.8
All other conditions and reasons for admission	43,625	45,681	46,055	48,114	51,190	33.3

Source: Hospital In-Patient Enquiry

Differences by geographic location

- Overall, there were 133.6 hospital discharges per 1,000 children in 2011 (see Table 66). Rates ranged from 103.3 per 1,000 in Co. Leitrim to 195.0 per 1,000 in Co. Sligo.

Table 66: Number and rate (per 1,000 children) of hospital discharges of children, by county of residence (2011)

	No. of hospital discharges of children in State/County	No. of children in State/County	Rate per 1,000 children in State/County
Total	153,905	1,148,687	133.6
County			
Carlow	2,207	14,139	156.1
Cavan	2,549	20,194	126.2
Clare	3,700	30,666	120.7
Cork	16,691	128,448	129.9
Donegal	7,045	43,732	161.1
Dublin	35,727	287,258	124.4
Galway	8,844	61,194	144.5
Kerry	4,450	34,940	127.4
Kildare	6,935	59,449	116.7
Kilkenny	2,963	25,015	118.4
Laois	3,437	22,932	149.9
Leitrim	832	8,051	103.3
Limerick	7,042	46,067	152.9
Longford	1,459	10,593	137.7
Louth	4,101	33,292	123.2
Mayo	5,562	32,514	171.1
Meath	5,941	53,400	111.3
Monaghan	1,938	16,031	120.9
Offaly	3,280	21,149	155.1
Roscommon	2,006	16,076	124.8
Sligo	3,030	15,541	195.0
Tipperary	5,893	40,760	144.6
Waterford	3,774	28,908	130.6
Westmeath	4,288	23,052	186.0
Wexford	5,602	38,842	144.2
Wicklow	4,162	36,444	114.2
Non-residents	447	–	–

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

ACCIDENTS, INJURIES AND HOSPITALISATION

The number of hospital discharges among children with a diagnosis of 'transport accidents' has decreased by almost 29% between 2007 and 2011.

Measure

The number of hospital discharges of children with a diagnosis of external causes of injury or poisoning.

Key findings

- In 2011, there was 14,085 hospital discharges of children with a diagnosis of 'external causes of injury or poisoning'.

Differences by age, gender, principal diagnosis and over time

- Almost one-third (31.0%) of the hospital discharges with a diagnosis of 'external causes of injury or poisoning' were of children aged 1-4 and 62.7% were of boys (see Table 67).
- Over the 5-year period 2007-2011, the total number of hospital discharges of children with a diagnosis of 'external causes of injury or poisoning' has fallen consistently.

Table 67: Number and percentage of hospital discharges among children with a diagnosis of external causes of injury or poisoning, by age, gender and principal diagnosis of external injury or poisoning (2007-2011)

	2007	2008	2009	2010	2011	
	No.	No.	No.	No.	No.	%
Total	15,105	14,221	14,159	14,762	14,085	100.0
Age						
Under 1	895	971	972	854	809	5.7
1-4	4,236	4,069	4,367	4,524	4,367	31.0
5-9	3,629	3,294	3,380	3,690	3,510	24.9
10-14	3,458	3,347	3,001	3,361	3,223	22.9
15-17	2,887	2,540	2,439	2,333	2,176	15.4
Gender						
Boys	9,474	8,931	8,803	9,123	8,832	62.7
Girls	5,631	5,290	5,356	5,639	5,253	37.3
Principal diagnosis of external injury or poisoning						
Accidental falls	5,973	5,664	5,884	6,192	5,706	40.5
Accidents caused by objects*	2,538	2,243	2,141	2,237	2,243	15.9
Transport accidents	1,758	1,606	1,476	1,454	1,250	8.9
Drowning, submersion, other accidental threats to breathing and foreign bodies	571	540	539	615	585	4.2
Accident, not otherwise specified	527	549	605	529	561	4.0
Accidental poisoning	454	427	340	387	364	2.6
Intentional self-harm	352	359	321	333	319	2.3
Contact with heat or hot substances	289	256	272	221	262	1.9
Assault	317	345	295	247	255	1.8
Event of undetermined intent	105	100	87	100	133	0.9
Exposure to smoke, fire and flames	74	51	55	47	47	0.3
Other external causes of injury	2,033	2,014	2,079	2,339	2,305	16.4
External cause not reported**	114	67	65	61	55	0.4

* 'Accidents caused by objects' include striking against or being struck accidentally by objects or persons; caught accidentally in or between objects; accidents caused by machinery; and accidents caused by cutting/piercing objects.

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

Source: Hospital In-Patient Enquiry

Differences by geographic location

- Overall, there were 12.2 hospital discharges with a diagnosis of '*external causes of injury or poisoning*' per 1,000 children in 2011 (see Table 68). Rates ranged from 7.3 per 1,000 in Co. Leitrim to 14.8 per 1,000 in Co. Westmeath and Co. Wexford.

Table 68: Number and rate (per 1,000 children) of hospital discharges of children with a diagnosis of external causes of injury or poisoning, by county of residence (2011)

	No. of hospital discharges of children with a diagnosis of external causes of injury or poisoning in State/County	No. of children in State/County	Rate per 1,000 children in State/County
Total	14,085	1,148,687	12.2
County			
Carlow	192	14,139	13.6
Cavan	228	20,194	11.3
Clare	315	30,666	10.3
Cork	1,607	128,448	12.5
Donegal	511	43,732	11.7
Dublin	3,593	287,258	12.5
Galway	825	61,194	13.5
Kerry	458	34,940	13.1
Kildare	632	59,449	10.6
Kilkenny	267	25,015	10.7
Laois	240	22,932	10.5
Leitrim	59	8,051	7.3
Limerick	511	46,067	11.1
Longford	112	10,593	10.6
Louth	429	33,292	12.9
Mayo	363	32,514	11.2
Meath	567	53,400	10.6
Monaghan	177	16,031	11.0
Offaly	257	21,149	12.2
Roscommon	181	16,076	11.3
Sligo	215	15,541	13.8
Tipperary	565	40,760	13.9
Waterford	356	28,908	12.3
Westmeath	342	23,052	14.8
Wexford	575	38,842	14.8
Wicklow	413	36,444	11.3
Non-residents	95	-	-

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

NUTRITIONAL OUTCOMES

The percentage of children aged 7 classified as being in the 'normal' weight category has increased by 5 percentage points over the period 2008-2010.

Measure

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

Key findings

- In 2010, 82% of children aged 7 were classified in the 'normal' weight category according to the International Obesity Taskforce Standards. The remaining 18% of children were classified as either 'overweight' or 'obese' (14% and 4% respectively).

Differences by gender and over time

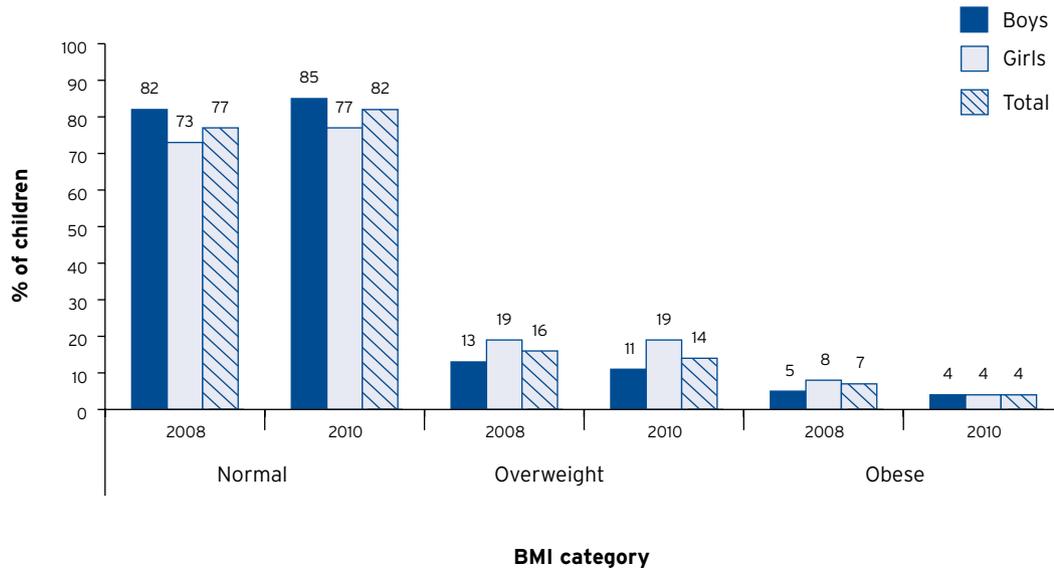
- Boys (85%) were more likely than girls (77%) to be categorised in the 'normal' weight category (see *Table 69*). 15% of boys were categorised as either 'overweight' or 'obese' (11% and 4% respectively), while 23% of girls were categorised as either 'overweight' or 'obese' (19% and 4% respectively).

Table 69: Percentage of children aged 7 in BMI categories: normal, overweight and obese, by gender (2010)			
	Normal	Overweight	Obese
	%	%	%
Total	82	14	4
Gender			
Boys	85	11	4
Girls	77	19	4

Source: WHO European Childhood Obesity Surveillance Initiative, 2010

- The percentage of children aged 7 classified in the 'normal' weight category according to the International Obesity Taskforce Standards has increased from 77% in 2008 to 82% in 2010 (see *Figure 16*).

Figure 16: Percentage of children aged 7 in BMI categories: normal, overweight and obese, by gender (2008 and 2010)



Source: WHO European Childhood Obesity Surveillance Initiative

INTELLECTUAL DISABILITY

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

Measure

The number of children registered as having an intellectual disability.

Key findings

- In 2011, there were 8,852 children registered as having an intellectual disability.

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

- 15.2% of children registered as having an intellectual disability were aged 0-4 years; 30.0% were aged 5-9; 33.7% were aged 10-14; and the remaining 21.1% were aged 15-17 (*see Table 70*).
- 64.0% of children registered as having an intellectual disability were boys and 36.0% were girls. This equates to a rate of 9.6 per 1,000 boys and 5.7 per 1,000 girls.
- The majority of children were registered as having a mild or moderate disability (36.2% and 29.1% respectively).
- Over the 5-year period 2007-2011, the number of children registered as having an intellectual disability has increased.

Table 70: Number, percentage and rate (per 1,000) of children registered as having an intellectual disability, by age, gender and severity of disability (2007-2011)							
	2007	2008	2009	2010	2011		
	No.	No.	No.	No.	No.	%	Rate per 1,000 children
Total	7,802	8,095	8,028	8,224	8,852	100.0	7.7
Age							
0-4	1,071	1,272	1,159	1,199	1,344	15.2	3.8
5-9	2,468	2,470	2,428	2,438	2,657	30.0	8.3
10-14	2,519	2,636	2,732	2,808	2,979	33.7	9.8
15-17	1,744	1,717	1,709	1,779	1,872	21.1	11.1
Gender							
Boys	4,898	5,077	5,051	5,211	5,668	64.0	9.6
Girls	2,904	3,018	2,977	3,013	3,184	36.0	5.7
Severity of disability							
Mild	2,870	3,001	2,983	3,033	3,201	36.2	2.8
Moderate	2,134	2,323	2,386	2,431	2,579	29.1	2.2
Severe	740	782	785	801	841	9.5	0.7
Profound	147	153	175	181	171	1.9	0.1
Not verified	1,911	1,836	1,699	1,778	2,060	23.3	1.8

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

Differences by geographic location

- Overall, 7.7 per 1,000 children were registered as having an intellectual disability in 2011 (see *Table 71*). Rates ranged from 4.8 per 1,000 in Co. Clare to 13.6 per 1,000 in Co. Carlow.

Table 71: Number and rate (per 1,000) of children registered as having an intellectual disability, by county (2011)

	No. of children registered as having an intellectual disability in State/County	No. of children in State/County	Rate per 1,000 children in State/County
Total	8,852	1,148,687	7.7
County			
Carlow	192	14,139	13.6
Cavan	142	20,194	7.0
Clare	148	30,666	4.8
Cork	954	128,448	7.4
Donegal	323	43,732	7.4
Dublin	2,016	287,258	7.0
Galway	493	61,194	8.1
Kerry	299	34,940	8.6
Kildare	483	59,449	8.1
Kilkenny	214	25,015	8.6
Laois	151	22,932	6.6
Leitrim	57	8,051	7.1
Limerick	478	46,067	10.4
Longford	52	10,593	4.9
Louth	289	33,292	8.7
Mayo	281	32,514	8.6
Meath	361	53,400	6.8
Monaghan	86	16,031	5.4
Offaly	119	21,149	5.6
Roscommon	177	16,076	11.0
Sligo	156	15,541	10.0
Tipperary	354	40,760	8.7
Waterford	302	28,908	10.4
Westmeath	192	23,052	8.3
Wexford	306	38,842	7.9
Wicklow	227	36,444	6.2

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

PHYSICAL AND SENSORY DISABILITY

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

Measure

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

Key findings

- In 2011, there were 8,034 children registered as having a physical and/or sensory disability.

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

- 7.4% of children registered as having a physical and/or sensory disability were aged 0-4 years; 29.4% were aged 5-9; 42.1% were aged 10-14; and the remaining 21.1% were aged 15-17 (see *Table 72*).
- 63.4% of children registered as having a physical and/or sensory disability were boys and 36.6% were girls. This equates to a rate of 8.7 per 1,000 boys and 5.2 per 1,000 girls.
- The majority of children were registered as having either a physical disability or a Speech and Language disability (33.2% and 29.9% respectively), while 31.6% of children were registered as having multiple disabilities.

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 (2007-2011)							
	2007	2008	2009	2010	2011		
	No.	No.	No.	No.	No.	%	Rate per 1,000 children
Total	8,373	8,546	8,043	7,627	8,034	100.0	7.0
Age							
0-4	697	640	510	427	596	7.4	1.7
5-9	3,081	2,994	2,700	2,322	2,360	29.4	7.4
10-14	3,189	3,466	3,387	3,362	3,379	42.1	11.2
15-17	1,406	1,446	1,446	1,516	1,699	21.1	10.0
Gender							
Boys	5,213	5,348	5,027	4,778	5,091	63.4	8.7
Girls	3,160	3,198	3,016	2,849	2,943	36.6	5.2
Type of disability							
Physical	5,463	3,235	2,939	2,642	2,665	33.2	2.3
Hearing loss/deafness	425	328	287	256	228	2.8	0.2
Visual	233	213	211	208	194	2.4	0.2
Speech and Language	1,121	2,538	2,339	2,263	2,406	29.9	2.1
Multiple disabilities	1,130	2,231	2,266	2,257	2,541	31.6	2.2
Refused	<5	<5	<5	<5	0	-	-

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

Differences by geographic location

- Overall, 7.0 per 1,000 children were registered as having a physical and/or sensory disability in 2011 (see *Table 73*). Rates ranged from 3.3 per 1,000 in Co. Cavan to 22.0 per 1,000 in Co. Mayo.

Table 73: Number and rate (per 1,000) of children registered as having a physical and/or sensory disability, by county (2011)

	No. of children registered as having a physical and/or sensory disability in State/County	No. of children in State/County	Rate per 1,000 children in State/County
Total	8,034	1,148,687	7.0
County			
Carlow	143	14,139	10.1
Cavan	67	20,194	3.3
Clare	118	30,666	3.8
Cork	1,117	128,448	8.7
Donegal	190	43,732	4.3
Dublin	1,278	287,258	4.4
Galway	603	61,194	9.9
Kerry	209	34,940	6.0
Kildare	326	59,449	5.5
Kilkenny	234	25,015	9.4
Laois	91	22,932	4.0
Leitrim	34	8,051	4.2
Limerick	297	46,067	6.4
Longford	88	10,593	8.3
Louth	199	33,292	6.0
Mayo	716	32,514	22.0
Meath	326	53,400	6.1
Monaghan	77	16,031	4.8
Offaly	105	21,149	5.0
Roscommon	325	16,076	20.2
Sligo	69	15,541	4.4
Tipperary	450	40,760	11.0
Waterford	234	28,908	8.1
Westmeath	305	23,052	13.2
Wexford	164	38,842	4.2
Wicklow	269	36,444	7.4

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

CHILD WELFARE AND PROTECTION

The number of child welfare and protection reports to the HSE increased by almost 36% between 2007 and 2011.

Measure

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

Key findings

- In 2011, there were 31,626 child welfare and protection reports to the HSE.

Differences by type of report and over time

- Half of the child welfare and protection reports were for welfare concerns (see Table 74).
- The number of child welfare and protection reports increased by almost 36% between 2007 and 2011.

Table 74: Number, percentage and rate (per 1,000) of child welfare and protection reports to the HSE, by type of report (2007-2011)

	2007	2008	2009	2010	2011		
	No.	No.	No.	No.	No.	%	Rate per 1,000 children
Total	23,268	24,668	26,888	29,277	31,626	100.0	27.5
Type of report							
Welfare	12,715	12,932	14,875	16,452	15,808	50.0	13.8
Physical abuse	2,152	2,399	2,617	2,608	3,033	9.6	2.6
Sexual abuse	2,306	2,379	2,594	2,962	3,326	10.5	2.9
Emotional abuse	1,981	2,192	2,125	2,500	4,001	12.7	3.5
Neglect	4,114	4,766	4,677	4,755	5,458	17.3	4.8

Source: Census of the Population, 2011; Review of Adequacy Reports (HSE)

Differences by geographic location

- Overall, there were 27.5 child welfare and protection reports per 1,000 children in 2011 (see Table 75). Rates ranged across Local Health Office (LHO) Area from 8.3 per 1,000 in Dublin South East to 65.5 per 1,000 in Roscommon.

Table 75: Number and rate (per 1,000) of child welfare and protection reports to the HSE, by HSE Region and Local Health Office (LHO) Area (2011)			
	No. of child welfare and protection reports to the HSE	No. of children in HSE Region/LHO Area	Rate per 1,000 children in HSE Region/LHO Area
Total	31,626	1,148,687	27.5
HSE Dublin North East	7,353	258,569	28.4
Cavan/Monaghan	1,687	35,085	48.1
Dublin North	1,017	63,256	16.1
Dublin North Central	610	24,619	24.8
Dublin North West	1,034	48,047	21.5
Louth	1,443	33,034	43.7
Meath	1,562	54,528	28.6
HSE Dublin Mid-Leinster	7,237	324,955	22.3
Dublin South	310	28,558	10.9
Dublin South City	412	23,409	17.6
Dublin South East	183	22,113	8.3
Dublin South West	916	38,227	24.0
Dublin West	783	39,029	20.1
Kildare/West Wicklow	686	64,573	10.6
Laois/Offaly	1,495	44,081	33.9
Longford/West Meath	1,950	33,645	58.0
Wicklow	502	31,320	16.0
HSE South	8,905	292,796	30.4
Carlow/Kilkenny	1,004	33,790	29.7
Kerry	623	34,940	17.8
North Cork	697	22,887	30.5
North Lee	1,321	46,453	28.4
South Lee	682	44,904	15.2
Tipperary SR	1,035	25,073	41.3
Waterford	1,359	31,703	42.9
West Cork	457	14,204	32.2
Wexford	1,727	38,842	44.5

continued

Table 75 (continued)			
	No. of child welfare and protection reports to the HSE	No. of children in HSE Region/LHO Area	Rate per 1,000 children in HSE Region/LHO Area
HSE West	8,131	272,367	29.9
Clare	933	27,027	34.5
Donegal	1,136	44,534	25.5
Galway	1,359	61,194	22.2
Limerick	1,347	41,041	32.8
Mayo	560	32,514	17.2
Roscommon	1,053	16,076	65.5
Sligo/Leitrim/West Cavan	913	23,060	39.6
Tipperary NR	830	26,921	30.8

Source: Census of the Population, 2011; Review of Adequacy Report, 2011 (HSE)

**SOCIAL, EMOTIONAL
AND BEHAVIOURAL
OUTCOMES**

PARTICIPATION IN DECISION-MAKING

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

Measure

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

Key findings

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

Differences by population groups

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

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

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

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

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

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

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

* Refers to children aged 10-17 only.

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

n/a = not available

Source: HBSC Surveys

Differences by geographic location

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

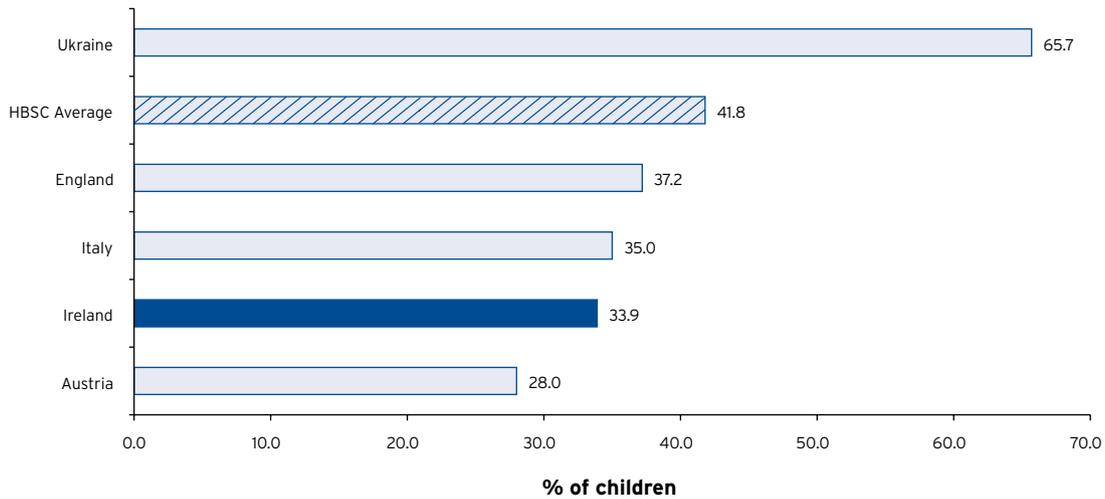
Table 78: Percentage of children aged 10-17 who report that students at their school participate in making the school rules, by NUTS Region (2010)	
	%
All children	32.6
NUTS Region	
Border	31.1
Dublin	33.2
Midlands	33.5
Mid-East	39.2
Mid-West	29.5
South-East	32.5
South-West	30.7
West	31.0

Source: HBSC Survey, 2010

International comparisons

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

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



Source: HBSC Survey, 2010

READING AS A LEISURE ACTIVITY

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

Measure

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

Key findings

- In 2009, 31.7% of children aged 15 reported that reading was one of their favourite hobbies.

Differences by population groups

- When compared to other children, Traveller children were less likely to report that reading was one of their favourite hobbies (see *Table 79*). This difference was statistically significant.
- There was no significant difference between immigrant and other children.

Table 79: Percentage of children aged 15 who report that reading is one of their favourite hobbies, by population groups (2009)

	%
All children	31.7
Traveller status	
Traveller children	19.9
All other children	32.0
Immigrant status	
Immigrant children	43.7
All other children	31.1

Source: PISA Survey, 2009

Differences by gender, social class and over time

- In 2009, the percentage of girls (40.2%) who reported that reading was one of their favourite hobbies was significantly higher than the corresponding percentage of boys (23.4%) (see Table 80).
- Children in the lowest social class category (25.3%) were significantly less likely to report that reading was one of their favourite hobbies when compared to children in the highest and medium social class categories (39.2% and 31.7% respectively).
- In 2009, the percentage of children (31.7%) who reported that reading was one of their favourite hobbies was significantly lower than the corresponding percentages in 2006 (42.6%) and 2000 (35.7%).

Table 80: Percentage of children aged 15 who report that reading is one of their favourite hobbies, by gender and social class (2000, 2006 and 2009)			
	2000	2006	2009
All children	35.7	42.6	31.7
Gender			
Boys	22.9	32.7	23.4
Girls	48.2	52.0	40.2
Social class			
High SES	40.7	50.0	39.2
Medium SES	35.0	41.8	31.7
Low SES	30.8	36.5	25.3

Source: PISA Surveys

SMOKING CIGARETTES: WEEKLY SMOKING

Cigarette smoking is significantly higher among Traveller children.

Measure

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

Key findings

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

Differences by population groups

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

Table 81: Percentage of children aged 10-17 who report smoking cigarettes every week, by population groups (2010)	
	%
All children	7.9
Traveller status	
Traveller children	22.9
All other children	7.7
Immigrant status	
Immigrant children	9.7
All other children	7.7
Disability and/or Chronic Illness status	
Children with a disability and/or chronic illness	9.5
All other children	7.4

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

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

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

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

* Refers to children aged 10-17 only.

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

n/a = not available

Source: HBSC Surveys

Differences by geographic location

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

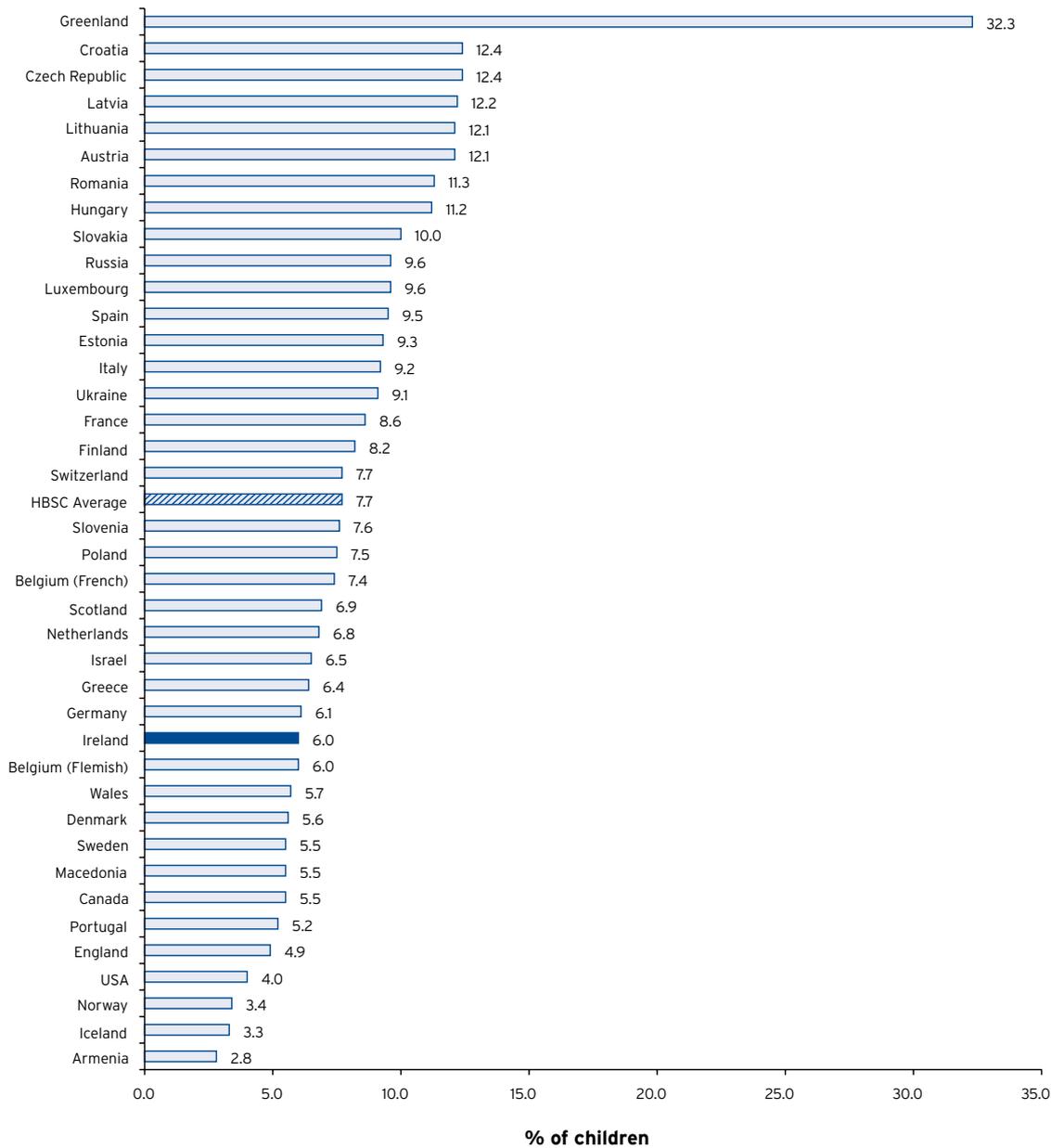
	%
All children	7.9
NUTS Region	
Border	6.0
Dublin	7.3
Midlands	8.9
Mid-East	7.6
Mid-West	9.3
South-East	8.2
South-West	7.7
West	9.7

Source: HBSC Survey, 2010

International comparisons

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

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



Source: HBSC Survey, 2010

SMOKING CIGARETTES: NEVER SMOKING

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

Measure

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

Key findings

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

Differences by population groups

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

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

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

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

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

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

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

* Refers to children aged 10-17 only.

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

n/a = not available

Source: HBSC Surveys

Differences by geographic location

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

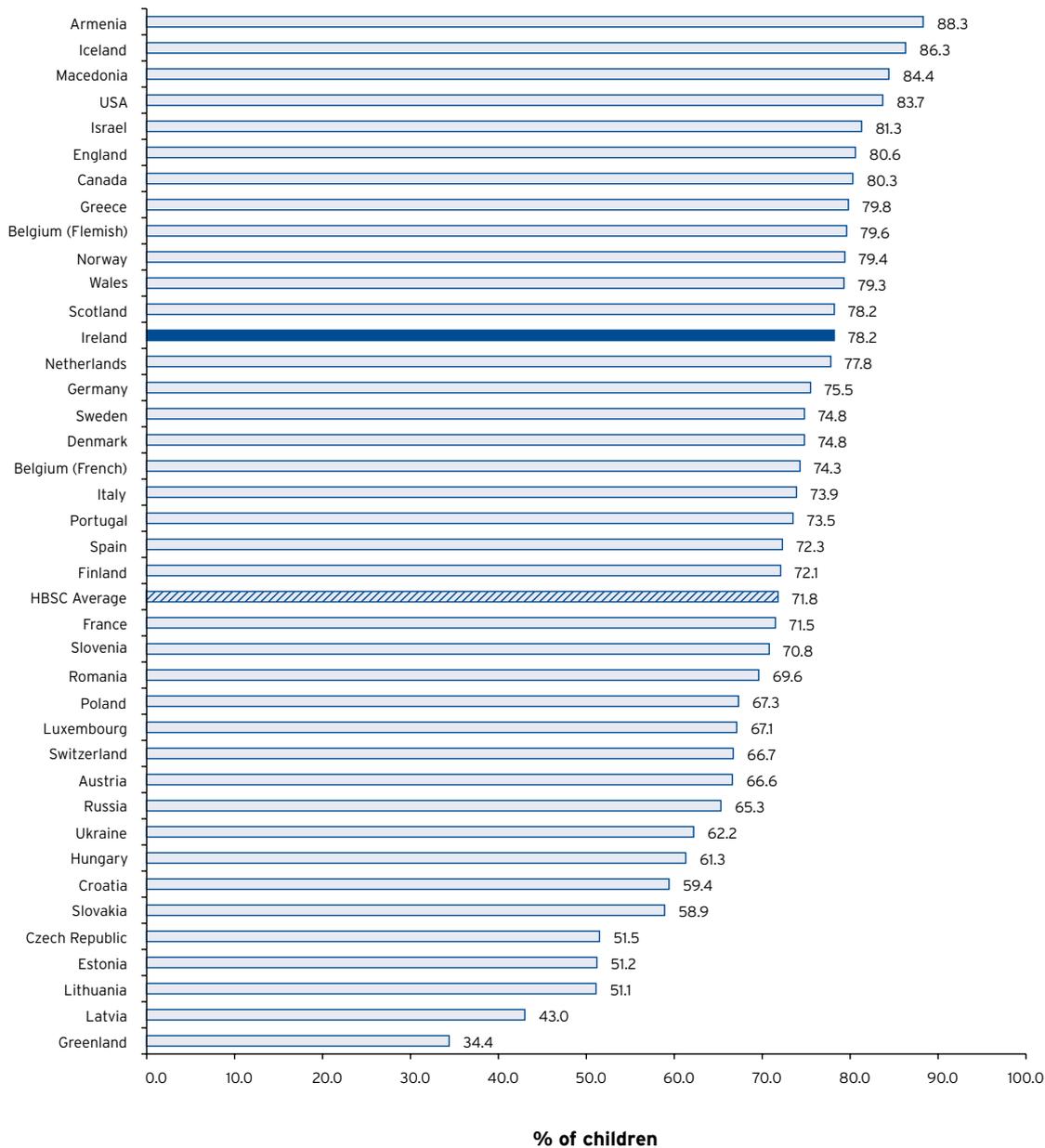
Table 86: Percentage of children aged 10-17 who report never smoking cigarettes, by NUTS Region (2010)	
	%
All children	73.5
NUTS Region	
Border	76.5
Dublin	76.3
Midlands	70.3
Mid-East	74.2
Mid-West	69.6
South-East	72.2
South-West	74.0
West	68.7

Source: HBSC Survey, 2010

International comparisons

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

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



Source: HBSC Survey, 2010

ALCOHOL USE: DRUNKENNESS

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

Measure

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

Key findings

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

Differences by population groups

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

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

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

Source: HBSC Survey, 2010

Differences by age, gender and social class

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

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

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

Source: HBSC Surveys

Differences by geographic location

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

Table 89: Percentage of children aged 10-17 who report to have been drunk at least once in the last 30 days, by NUTS Region (2010)

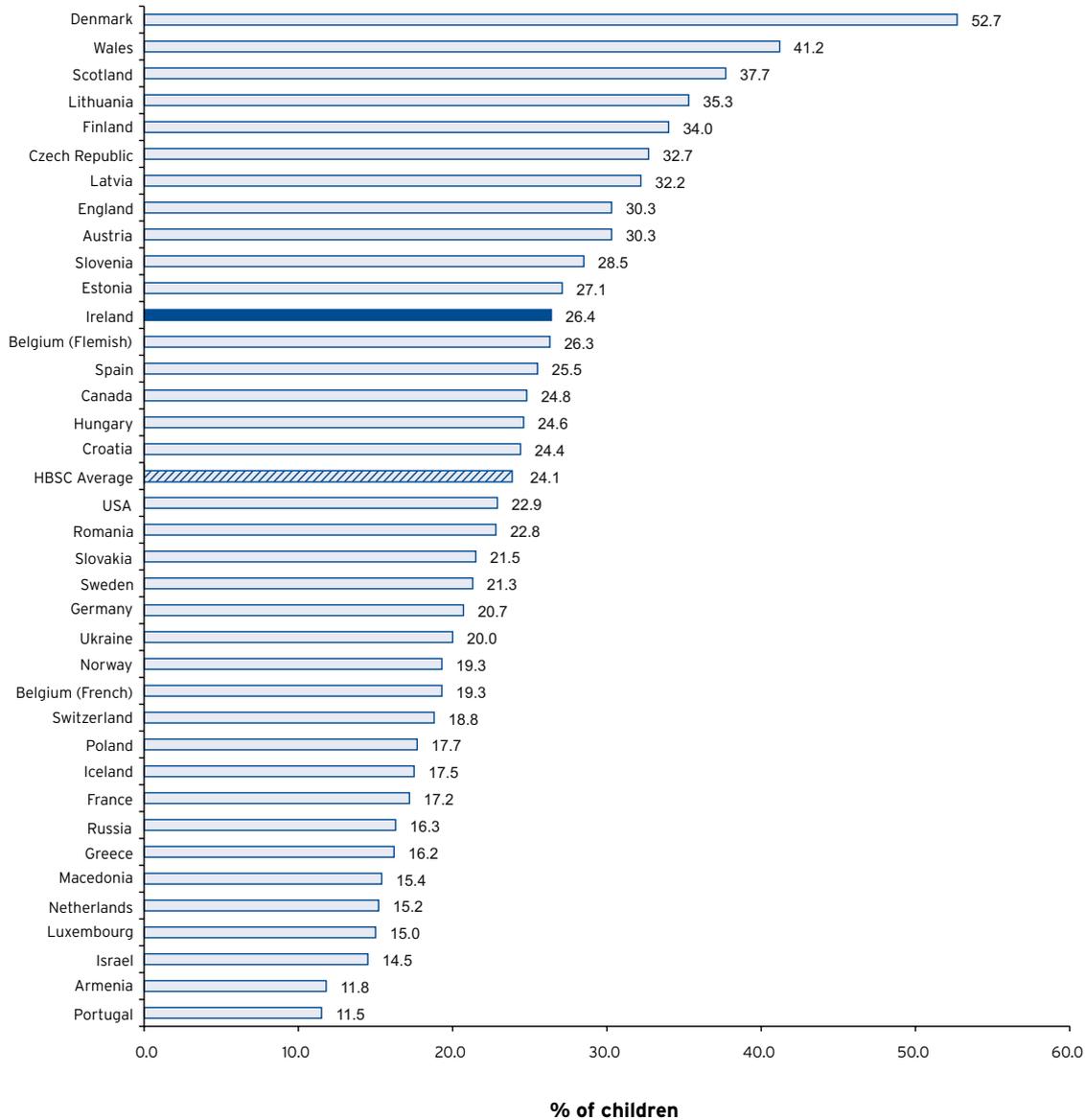
	%
All children	18.3
NUTS Region	
Border	14.9
Dublin	20.7
Midlands	17.4
Mid-East	17.7
Mid-West	18.4
South-East	16.1
South-West	17.8
West	21.5

Source: HBSC Survey, 2010

International comparisons

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

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



Source: HBSC Survey, 2010

ALCOHOL USE: NEVER DRINKING ALCOHOL

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

Measure

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

Key findings

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

Differences by population groups

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

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

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

Source: HBSC Survey, 2010

Differences by age, gender and social class

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

Table 91: Percentage of children aged 10-17 who report never having had an alcoholic drink, by age, gender and social class (2002, 2006 and 2010)					
	2002	2006	2010		
	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children	40.0	47.2	51.7	56.7	54.1
Age					
10-11	69.4	78.5	78.4	88.6	83.5
12-14	48.0	57.1	61.5	69.6	65.5
15-17	17.1	24.9	30.6	27.3	29.0
Social class					
SC 1-2	40.9	47.1	51.6	56.3	53.9
SC 3-4	38.5	47.5	52.9	59.1	55.9
SC 5-6	41.2	48.1	52.5	53.3	52.9

Source: HBSC Surveys

Differences by geographic location

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

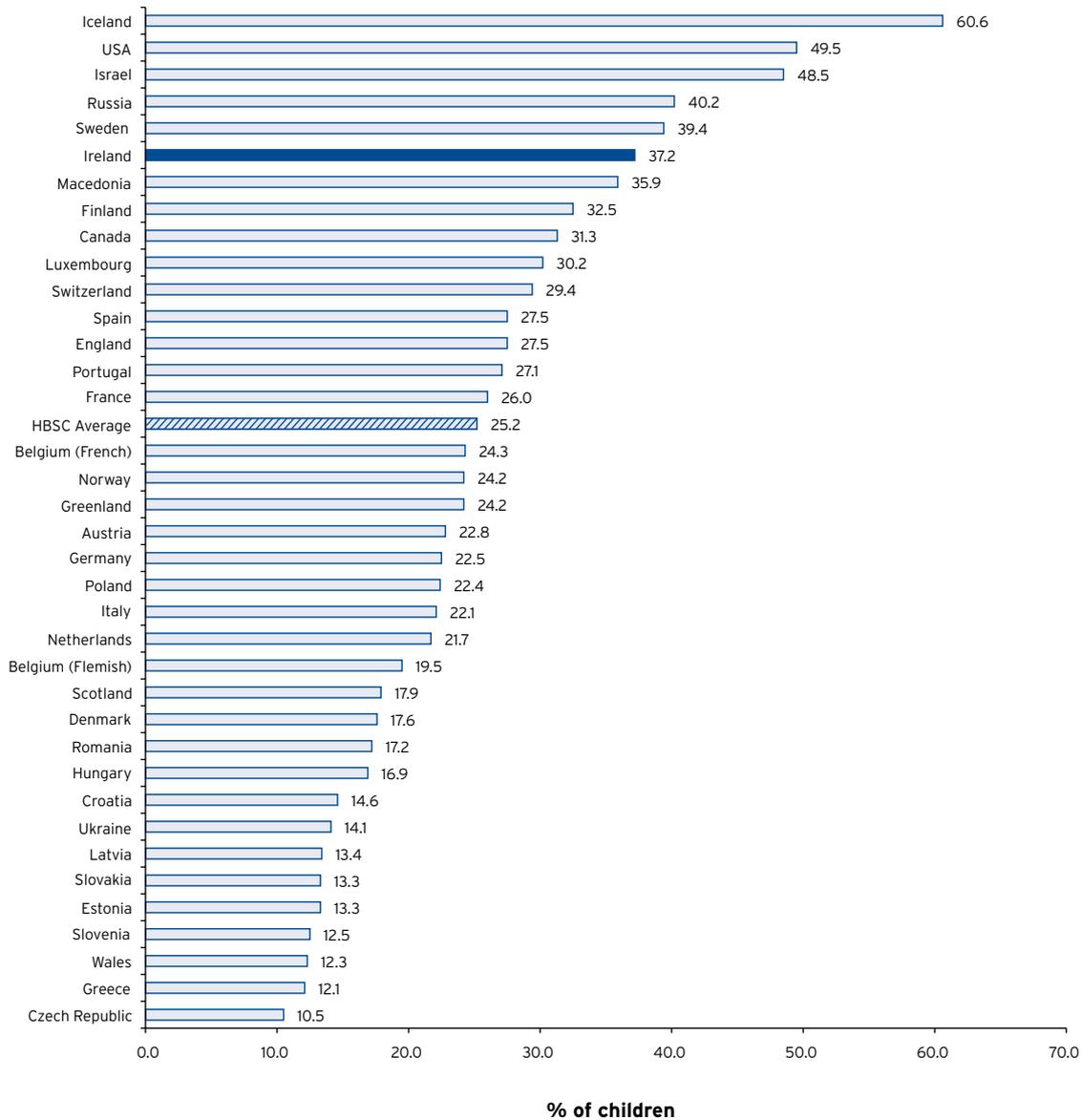
Table 92: Percentage of children aged 10-17 who report never having had an alcoholic drink, by NUTS Region (2010)	
	%
All children	54.1
NUTS Region	
Border	56.8
Dublin	56.6
Midlands	51.3
Mid-East	56.5
Mid-West	52.0
South-East	49.8
South-West	54.3
West	48.7

Source: HBSC Survey, 2010

International comparisons

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

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



Source: HBSC Survey, 2010

CANNABIS USE

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

Measure

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

Key findings

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

Differences by population groups

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

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

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

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

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

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

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

Source: HBSC Surveys

Differences by geographic location

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

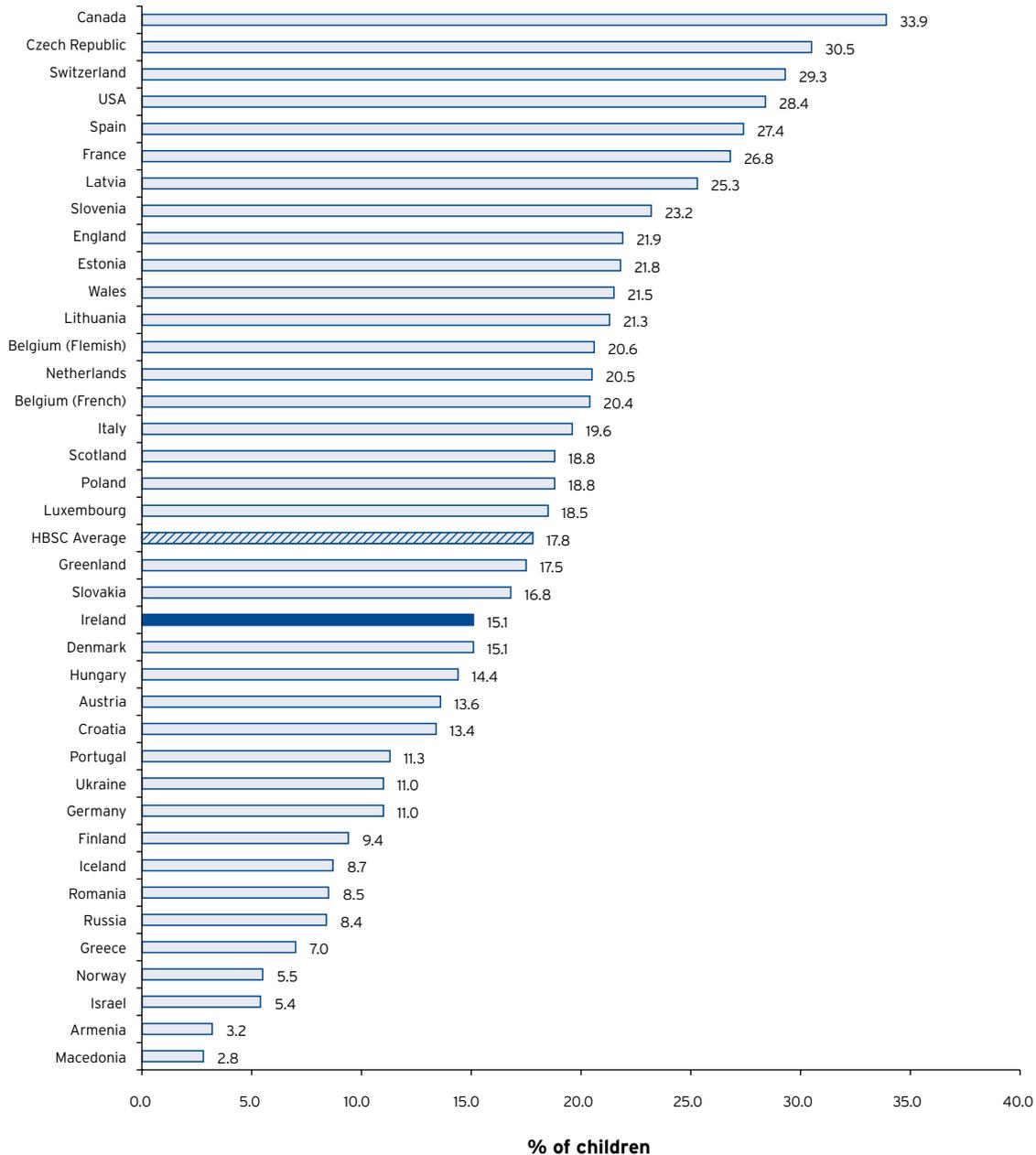
Table 95: Percentage of children aged 10-17 who report to have taken cannabis at least once in their lifetime, by NUTS Region (2010)	
	%
All children	10.5
NUTS Region	
Border	8.1
Dublin	11.4
Midlands	9.9
Mid-East	11.7
Mid-West	12.9
South-East	10.8
South-West	9.7
West	8.4

Source: HBSC Survey, 2010

International comparisons

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

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



Source: HBSC Survey, 2010

SEXUAL HEALTH AND BEHAVIOUR: TEEN BIRTHS

The number of babies born to teenage girls decreased by 36% between 2007 and 2011.

Measure

The number of births to mothers aged 10-17.

Key findings

- In 2011, there were 399 births to mothers aged 10-17 (see *Table 96*). 99% of these births were to mothers aged 15-17.

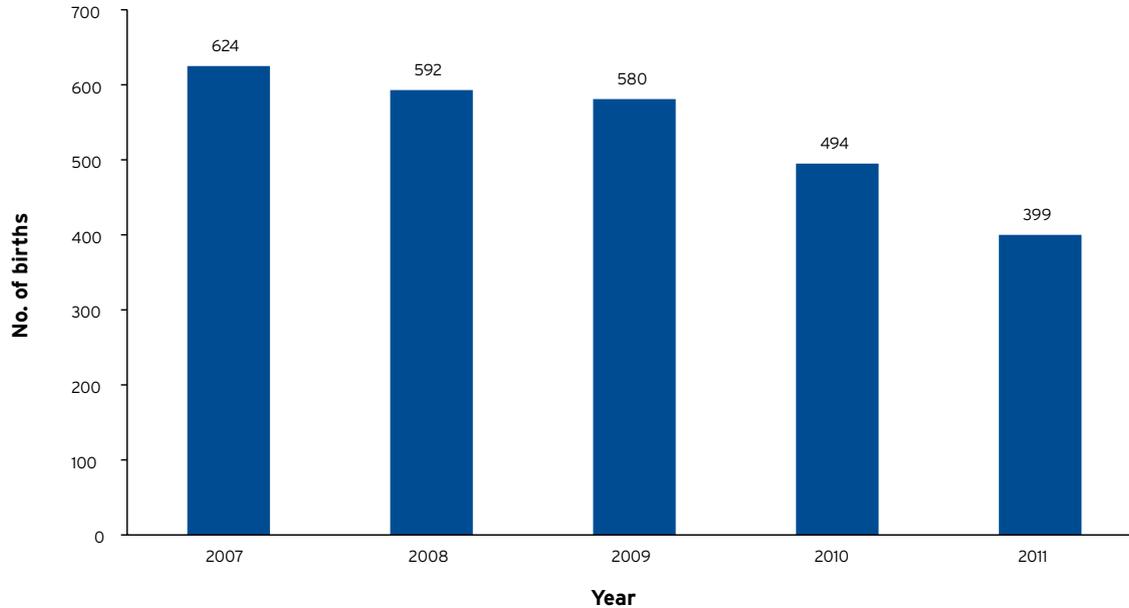
	2007		2008		2009		2010		2011	
	No.	Rate								
Total (all ages)	71,389	6,245	75,173	6,470	75,554	6,508	74,976	6,528	74,650	6,347
Age										
15-17*	624	736	592	703	580	703	494	610	399	484
18-24	10,800	4,724	11,093	4,964	10,513	4,996	9,684	4,949	8,767	4,238
25+	59,946	7,224	63,463	7,430	64,429	7,422	64,776	7,430	65,470	7,383
Not stated	19	-	25	-	32	-	22	-	14	-

* The number of births to mothers aged 15-17 includes a small number to mothers aged 10-14 years. There were 5 babies born to mothers in the 10-14 age group in 2011.

Source: Vital Statistics and Population Estimates (CSO)

Differences over time

- Over the 5-year period 2007-2011, the number of births to mothers aged 10-17 has decreased by 36.1% (see *Figure 23*).

Figure 23: Number of births to mothers aged 10-17 (2007-2011)

Source: Vital Statistics and Population Estimates (CSO)

Differences by geographic location

- Overall, 5.3 per 1,000 births were to mothers aged 10-17 in 2011 (see *Table 97*). This rate was highest in Co. Louth, at approximately 9 per 1,000 births.

Table 97: Number and rate (per 1,000) of births to mothers aged 10-17, by county (2011)			
	No. of births to 10-17 year-olds in State/County	No. of births to all ages in State/County	Rate per 1,000 births in State/County
Total	399	74,650	5.3
County			
Carlow	7	993	7.0
Clare	5	1,748	2.9
Cork	21	8,295	2.5
Donegal	14	2,212	6.3
Dublin	155	21,803	7.1
Galway	16	3,938	4.1
Kildare	14	3,948	3.5
Kilkenny	10	1,425	7.0
Laois	5	1,345	3.7
Limerick	19	3,071	6.2
Louth	17	1,903	8.9
Mayo	4	1,776	2.3
Meath	9	3,561	2.5
Monaghan	6	929	6.5
Offaly	10	1,240	8.1
Sligo	5	920	5.4
Tipperary	11	2,381	4.6
Waterford	14	1,793	7.8
Westmeath	12	1,425	8.4
Wexford	7	2,328	3.0
Wicklow	12	2,341	5.1
Other counties	26	5,275	4.9

Source: Vital Statistics, 2011 (CSO)

SEXUAL HEALTH AND BEHAVIOUR: SEXUAL ACTIVITY

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

Measure

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

Key findings

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

Differences by population groups

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

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

n/a = not available

Source: HBSC Survey, 2010

Differences by age, gender and social class

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

Table 99: Percentage of children aged 15-17 who report having ever had sex, by age, gender and social class (2010)			
	Boys (%)	Girls (%)	Total (%)
All children	30.9	23.1	27.3
Social class			
SC 1-2	24.8	17.7	21.3
SC 3-4	32.2	25.8	29.2
SC 5-6	30.2	28.3	29.2

Source: HBSC Survey, 2010

Differences by geographic location

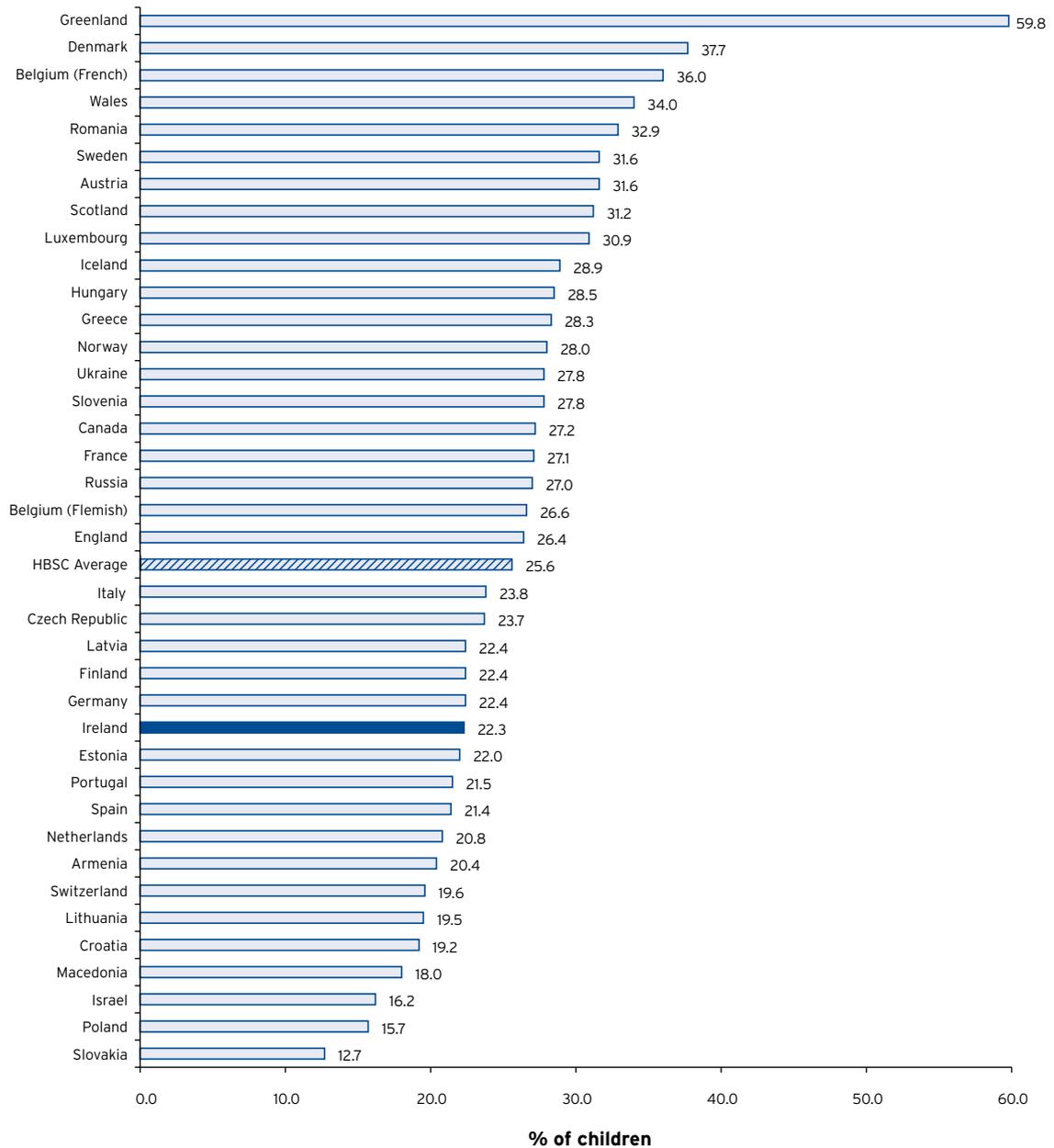
- Overall, 27.3% of children report that they had ever had sex (see *Table 100*). There were no significant differences observed across regions.

Table 100: Percentage of children aged 15-17 who report having ever had sex, by NUTS Region (2010)	
	%
All children	27.3
NUTS Region	
Border	24.3
Dublin	29.6
Midlands	24.6
Mid-East	28.2
Mid-West	30.0
South-East	25.4
South-West	26.6
West	27.2

Source: HBSC Survey, 2010

International comparisons

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

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

SELF-ESTEEM

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

Measure

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

Key findings

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

Differences by population groups

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

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

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

Source: HBSC Survey, 2010

Differences by age, gender and social class

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

Table 102: Percentage of children aged 9-17 who report feeling happy with the way they are, by age, gender and social class (2006 and 2010)				
	2006	2010		
	Total (%)	Boys (%)	Girls (%)	Total (%)
All children*	58.2	62.5	51.8	57.3
Age				
9**	78.3	72.2	77.3	74.9
10-11	74.6	70.9	71.2	71.1
12-14	61.1	64.9	54.6	59.9
15-17	49.3	56.6	40.5	49.0
Social class				
SC 1-2	57.2	63.2	53.5	58.4
SC 3-4	58.2	63.1	51.8	57.6
SC 5-6	59.2	61.1	49.9	55.6

* Refers to children aged 10-17 only.

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

Source: HBSC Surveys

Differences by geographic location

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

Table 103: Percentage of children aged 10-17 who report feeling happy with the way they are, by NUTS Region (2010)

	%
All children	57.3
NUTS Region	
Border	56.0
Dublin	57.7
Midlands	57.2
Mid-East	54.8
Mid-West	55.8
South-East	57.4
South-West	60.9
West	53.6

Source: HBSC Survey, 2010

SELF-REPORTED HAPPINESS

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

Measure

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

Key findings

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

Differences by population groups

- When compared to other children, Traveller children and children with a disability and/or chronic illness were less likely to report being happy with their lives at present (see *Table 104*). These differences were statistically significant.
- There was no significant difference between immigrant and other children.

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

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

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

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

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

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

* Refers to children aged 10-17 only.

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

n/a = not available

Source: HBSC Surveys

Differences by geographic location

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

Table 106: Percentage of children aged 10-17 who report being happy with their lives at present, by NUTS Region (2010)	
	%
All children	91.0
NUTS Region	
Border	91.9
Dublin	90.3
Midlands	92.6
Mid-East	88.9
Mid-West	90.1
South-East	90.7
South-West	92.1
West	92.0

Source: HBSC Survey, 2010

YOUTH SUICIDE

In 2011, there were 16 suicides by children aged 10-17.

Measure

The number of suicides by children aged 10-17.

Key findings

- In 2011, there were 16 suicides by children aged 10-17.

Differences by gender and over time

- Over the 5-year period 2007-2011, the number and rate (per 100,000) of suicides was consistently higher among boys (see *Table 107*).

Table 107: Number and rate (per 100,000) of suicides, by age and gender (2007-2011)

Year	15-17 years*				18-24 years				All ages	
	Boys		Girls		Male		Female		Total	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
2007	11	12	5	6	72	31	11	5	458	11
2008	14	16	11	13	58	26	14	6	506	11
2009	14	16	5	6	58	28	10	5	552	12
2010	13	15	6	7	58	31	8	4	490	11
2011	13	15	3	4	68	33	12	6	525	11

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

Source: Vital Statistics (CSO)

- Overall, suicide accounted for just over 1 in 5 (21.9%) of all deaths of children aged 10-17 in 2011 (see *Table 108*).

Table 108: Suicides as a percentage of total deaths of children aged 10-17, by gender (2007-2011)					
	2007	2008	2009	2010	2011
Total	14.3	25.5	25.7	27.5	21.9
Gender					
Boys	14.5	21.2	27.5	26.5	28.3
Girls	13.9	34.3	21.7	30.0	11.1

Source: Vital Statistics (CSO)

DELIBERATE SELF-HARM

In 2011, twice as many girls presented at hospital emergency departments following deliberate self-harm.

Measure

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

Key findings

- In 2011, 904 children aged 10-17 presented at a hospital emergency department following deliberate self-harm.

Differences by gender and over time

- Over the 5-year period 2007-2011, the number and rate (per 1,000) of children aged 10-17 who presented at a hospital emergency department following deliberate self-harm was approximately twice as high among girls (see *Table 109*).

Table 109: Number and rate (per 1,000) of children aged 10-17 who presented at a hospital emergency department following deliberate self-harm, by gender (2007-2011)

Year	Boys		Girls		Total	
	No.	Rate	No.	Rate	No.	Rate
2007	267	1.2	635	2.9	902	2.0
2008	277	1.2	694	3.1	971	2.1
2009	343	1.5	642	2.9	985	2.1
2010	317	1.3	661	2.9	978	2.1
2011	316	1.3	588	2.6	904	1.9

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

Differences by geographic location

- Overall, 1.9 per 1,000 children aged 10-17 presented at a hospital following deliberate self-harm in 2011 (see *Table 110*). Rates ranged from 1.5 per 1,000 in HSE West to 2.2 per 1,000 in HSE Dublin North-East and HSE South.

Table 110: Number and rate (per 1,000) of children aged 10-17 who presented at a hospital emergency department following deliberate self-harm, by HSE Region (2011)			
	No. of children aged 10-17 who presented at a hospital emergency department following deliberate self-harm in HSE Region	No. of children aged 10-17 in HSE Region	Rate per 1,000 children in HSE Region
Total	904	471,588	1.9
HSE Region			
Dublin Mid-Leinster	237	131,862	1.8
Dublin North-East	226	102,058	2.2
South	272	122,535	2.2
West	169	115,133	1.5

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

PHYSICAL ACTIVITY

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

Measure

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

Key findings

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

Differences by population groups

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

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

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

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

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

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

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

* Refers to children aged 10-17 only.

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

n/a = not available

Source: HBSC Surveys

Differences by geographic location

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

Table 113: Percentage of children aged 10-17 who report being physically active for at least 60 minutes per day on more than 4 days per week, by NUTS Region (2010)

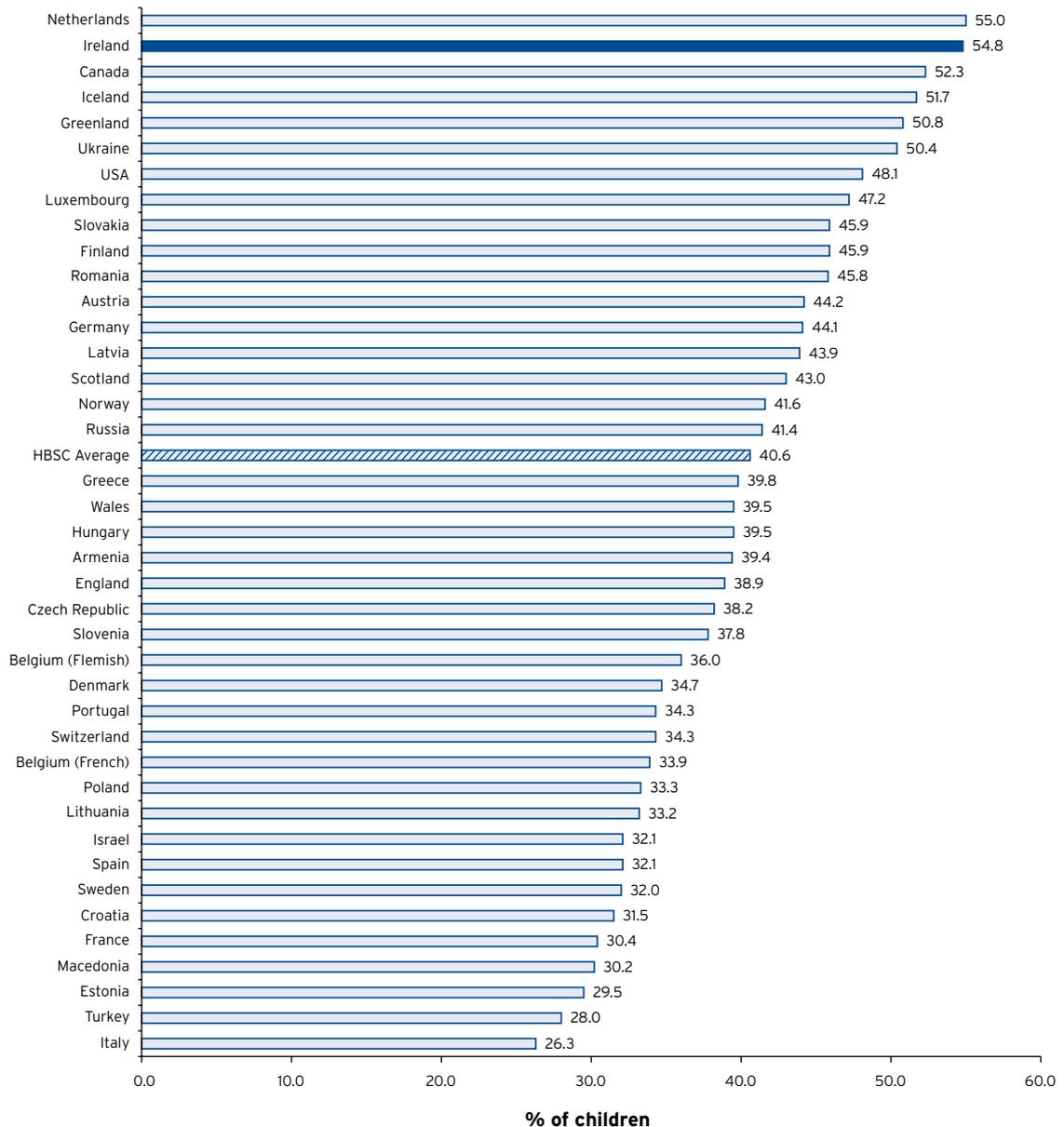
	%
All children	50.5
NUTS Region	
Border	50.2
Dublin	45.4
Midlands	48.1
Mid-East	48.7
Mid-West	51.9
South-East	52.7
South-West	54.6
West	54.6

Source: HBSC Survey, 2010

International comparisons

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

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



Source: HBSC Survey, 2010

NUTRITION: BREAKFAST CONSUMPTION

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

Measure

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

Key findings

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

Differences by population groups

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

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

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

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

Table 115: Percentage of children aged 10-17 who report eating breakfast on 5 or more days per week, by age, gender and social class (2002, 2006 and 2010)					
	2002	2006	2010		
	Total (%)	Total (%)	Boys (%)	Girls (%)	Total (%)
All children	77.3	76.0	79.9	73.2	76.6
Age					
10-11	87.4	83.2	83.2	84.4	83.8
12-14	78.9	78.6	81.6	74.7	78.3
15-17	70.9	71.0	76.5	66.7	71.9
Social class					
SC 1-2	81.5	80.9	84.2	77.9	81.1
SC 3-4	75.3	75.7	79.8	72.0	76.0
SC 5-6	77.7	74.5	74.8	70.7	72.7

Source: HBSC Surveys

Differences by geographic location

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

Table 116: Percentage of children aged 10-17 who report eating breakfast on 5 or more days per week, by NUTS Region (2010)

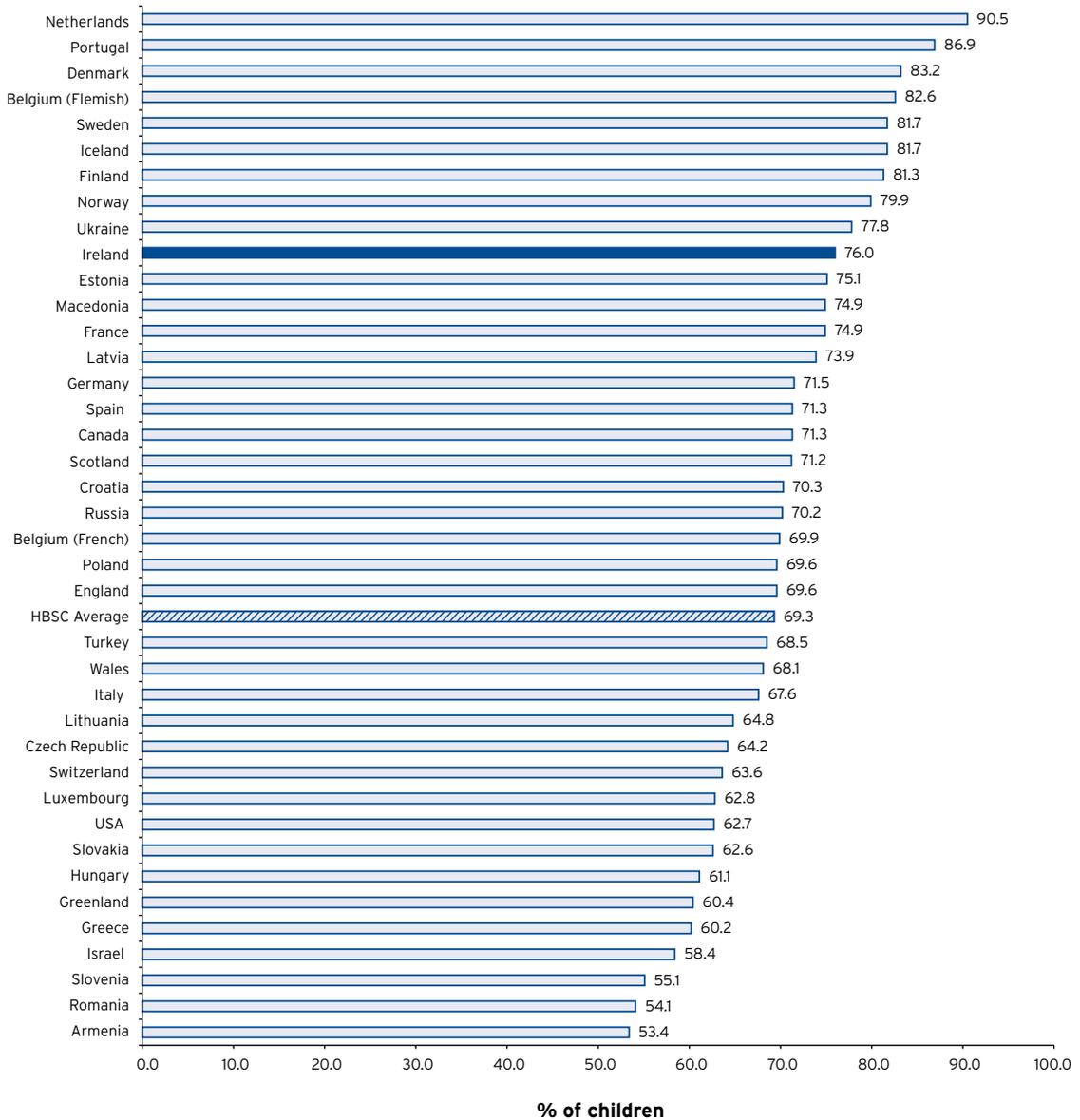
	%
All children	76.6
NUTS Region	
Border	80.1
Dublin	73.0
Midlands	77.0
Mid-East	76.5
Mid-West	76.4
South-East	77.8
South-West	77.3
West	78.7

Source: HBSC Survey, 2010

International comparisons

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

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



Source: HBSC Survey, 2010

NUTRITION: SOFT DRINKS CONSUMPTION

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

Measure

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

Key findings

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

Differences by population groups

- When compared to other children, Traveller children and children with a disability and/or chronic illness were more likely to report drinking soft drinks that contain sugar at least once a day (see *Table 117*). These differences were statistically significant.
- There were no significant differences between immigrant and other children.

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

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

Source: HBSC Survey, 2010

Differences by age, gender and social class

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

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

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

* Refers to children aged 10-17 only.

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

n/a = not available

Source: HBSC Surveys

Differences by geographic location

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

Table 119: Percentage of children aged 10-17 who report drinking soft drinks that contain sugar at least once a day, by NUTS Region (2010)

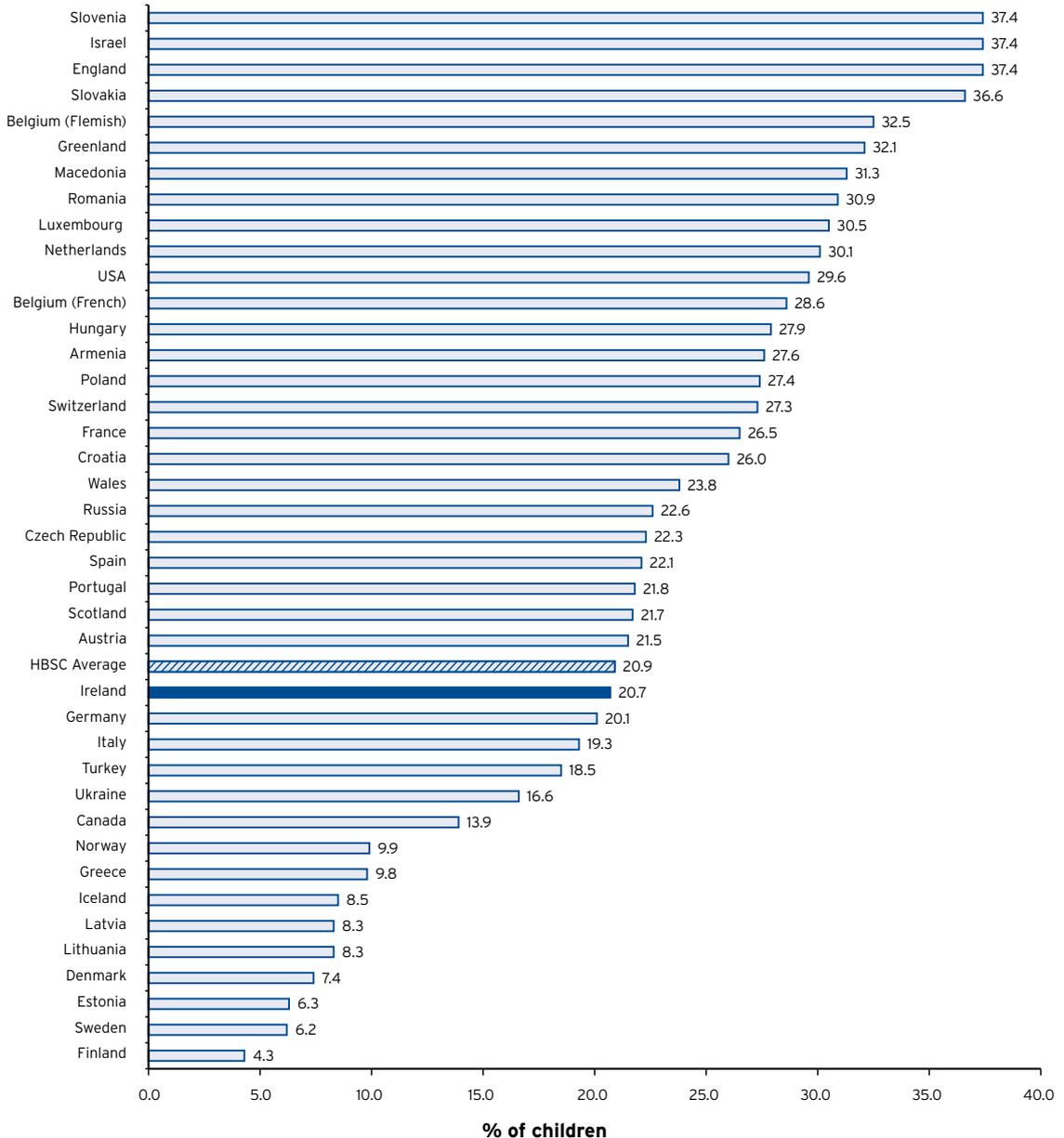
	%
All children	20.8
NUTS Region	
Border	15.6
Dublin	24.4
Midlands	19.4
Mid-East	22.3
Mid-West	23.6
South-East	22.8
South-West	19.7
West	14.4

Source: HBSC Survey, 2010

International comparisons

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

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



**PART 4:
FORMAL AND
INFORMAL SUPPORTS**

PUBLIC EXPENDITURE ON CHILDREN'S EDUCATION

In 2009, Ireland's public expenditure on education was 6.5% of Gross Domestic Product (GDP) and was above the EU-27 average.

Measure

Public expenditure on education.

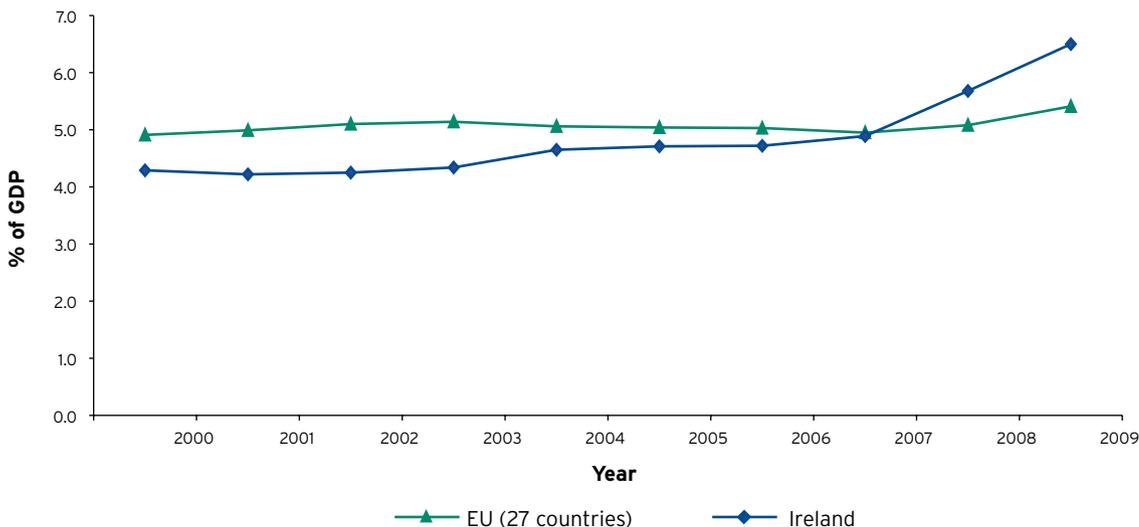
Key findings

- In 2009, public expenditure on education in Ireland represented 6.5% of Gross Domestic Product (GDP).

Differences over time

- Public expenditure on education in Ireland increased from just under 4.3% of GDP in 2000 to 6.5% of GDP in 2009 (see *Figure 28*).

Figure 28: Public expenditure on education in Ireland and in EU-27, as a % of GDP (2000-2009)



Source: Department of Education and Skills; Eurostat

Differences by geographic location

- In 2009, the EU-27 average expenditure on education as a percentage of GDP was 5.4% (see Table 120). This ranged from 4.1% in Slovakia to 8.7% in Denmark. Ireland's expenditure on education as a percentage of GDP was 6.5%. This was above the EU-27 average of 5.4%.

Table 120: Public expenditure on education as a % of GDP, by EU-27 (2007-2009)			
	2007	2008	2009
EU-27	5.0	5.1	5.4
Country			
Austria	5.3	5.5	6.0
Belgium	6.0	6.4	6.6
Bulgaria	3.9	4.4	4.6
Cyprus	7.0	7.5	8.0
Czech Republic	4.1	3.9	4.4
Denmark	7.8	7.7	8.7
Estonia	4.7	5.6	6.1
Finland	5.9	6.1	6.8
France	5.6	5.6	5.9
Germany	4.5	4.6	5.1
Greece	<i>n/a</i>	<i>n/a</i>	<i>n/a</i>
Hungary	5.3	5.1	5.1
Ireland	4.9	5.7	6.5
Italy	4.3	4.6	4.7
Latvia	5.0	5.8	5.6
Lithuania	4.6	4.9	5.6
Luxembourg	3.2	<i>n/a</i>	<i>n/a</i>
Malta	6.3	5.9	5.5
Netherlands	5.3	5.5	5.9
Poland	4.9	5.1	5.1
Portugal	5.1	4.9	5.8
Romania	4.3	<i>n/a</i>	4.2
Slovakia	3.6	3.6	4.1
Slovenia	5.2	5.2	5.7
Spain	4.3	4.6	5.0
Sweden	6.6	6.8	7.3
United Kingdom	5.4	5.4	5.7

n/a = not available

Source: Department of Education and Skills; Eurostat

- Real non-capital public expenditure per student in Ireland increased by 31% for first-level and by 27% for second-level over the period 2002-2011, when measured in constant 2011 prices (see *Table 121*). At third level, there was a decrease in expenditure per student of 14% in real terms over the same period.

Table 121: Real current public expenditure on education, by educational level (2002-2011)

Year	€ per student at constant 2011 prices Educational level			€m (at constant 2011 prices)
	First	Second*	Third**	Real current public expenditure
2002	4,860	7,176	10,552	6,181
2003	5,356	7,775	10,473	6,644
2004	5,756	7,863	10,264	6,848
2005	5,856	8,202	10,612	7,082
2006	6,055	8,558	11,128	7,439
2007	6,197	9,014	11,037	7,761
2008	6,315	9,140	10,909	8,003
2009	6,532	9,204	10,325	8,251
2010	6,434	8,928	9,926	8,217
2011	6,368	9,113	9,091	8,207

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

** Based on full-time equivalents.

Source: Department of Education and Skills

AT RISK OF POVERTY

In 2011, 18.8% of children were considered to be at risk of poverty.

Measure

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

Key findings

- In 2011, 18.8% of children were considered to be at risk of poverty (see *Table 122*). Children had a higher risk of being poor than the population as a whole (18.8% compared to 16.0%).

	2007	2008	2009	2010	2011
Total (population all ages)	16.5	14.4	14.1	14.7	16.0
Total (population age 0-17)	19.9	18.0	18.6	18.4	18.8
Age					
0-5	13.8	13.2	12.3	13.3	14.0
6-11	21.0	17.7	19.5	17.1	16.0
12-17	23.3	22.2	23.2	23.8	26.8
Household composition					
Households without children	14.9	12.3	11.2	10.9	12.4
1 adult, with children under 18	37.6	36.4	35.5	24.7	28.4
2 adults, with 1-2 children under 18	12.4	9.7	9.1	13.8	13.2
2 adults, with 3+ children under 18	19.9	16.7	21.8	18.9	19.5
Other households with children	14.8	15.1	14.0	19.5	21.5

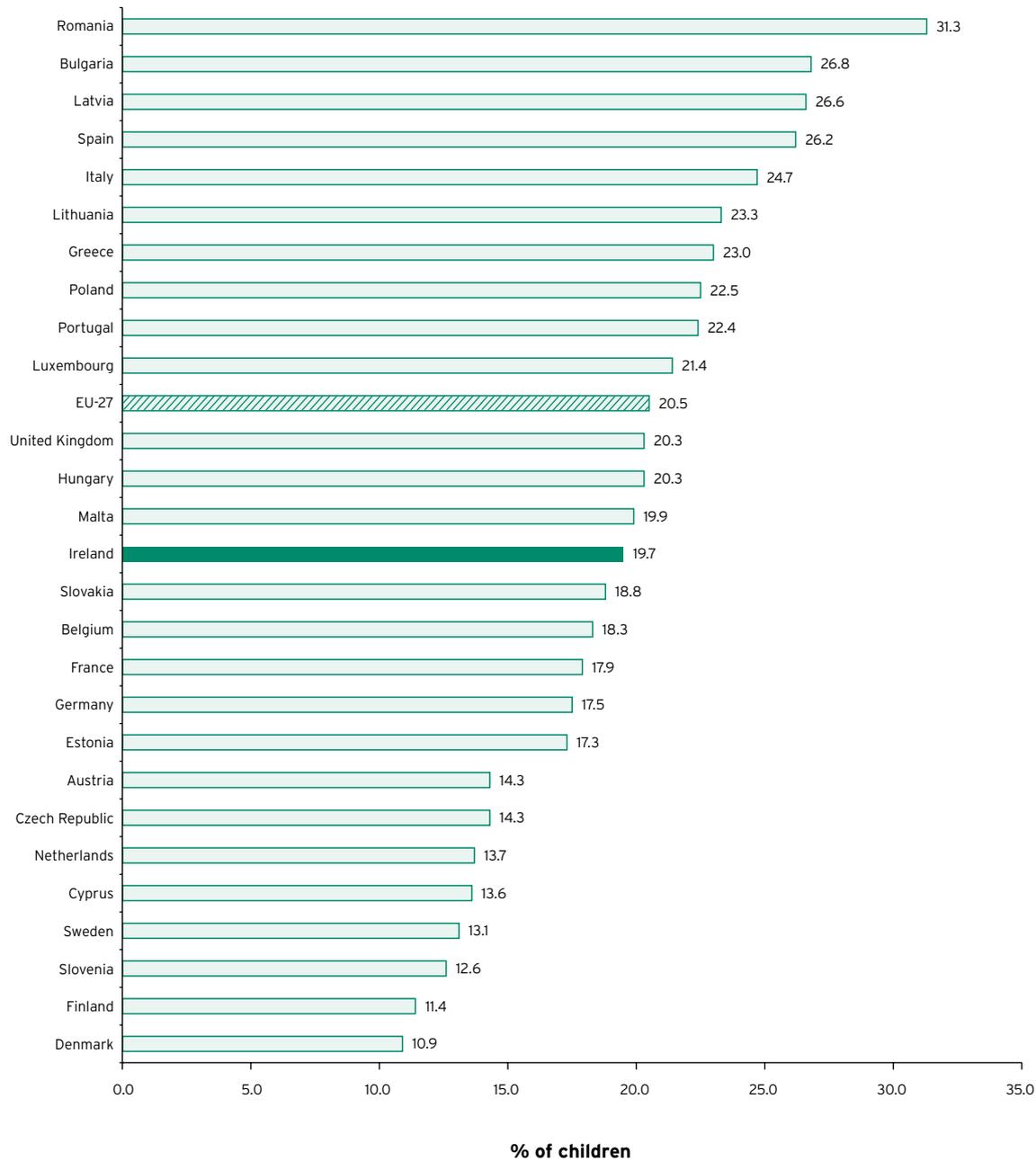
Source: EU-SILC

Differences by age, household composition and over time

- The highest 'at risk' of poverty rate occurred among children aged 12-17. This rate was 26.8% in 2011 compared with a rate of 16.0% for 6-11 year-olds and a rate of 14.0% for children aged 0-5.
- In 2011, the 'at risk' of poverty rate of persons living in households comprising a single adult with children was 28.4%. This was substantially higher than the 'at risk' of poverty rate in households with 2 adults and 1-2 children (13.2%) and households with 2 adults and 3+ children under 18 years (19.5%).
- Over the period 2007-2011, the percentage of children considered to be 'at risk' of poverty was consistently higher than the national average.

International comparisons

- In 2010, the percentage of children at risk of poverty across the EU-27 ranged from 10.9% in Denmark to 31.3% in Romania (see *Figure 29*). The percentage of children at risk of poverty in Ireland was 19.7%. This was below the EU-27 average of 20.5%.

Figure 29: Percentage of children at risk of poverty in EU-27, by country (2010)

Source: EU-SILC, 2010; Eurostat

CONSISTENT POVERTY

In 2011, 9.3% of children experienced consistent poverty.

Measure

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

Key findings

- In 2011, 9.3% of children experienced consistent poverty (see *Table 123*). Children were more likely to experience consistent poverty than the population as a whole (9.3% compared to 6.9%).

Table 123: Percentage of population experiencing consistent poverty, by age and household composition (2007-2011)

	2007	2008	2009	2010	2011
Total (population all ages)	5.1	4.2	5.5	6.3	6.9
Total (population age 0-17)	7.4	6.3	8.7	8.8	9.3
Age					
0-5	5.6	4.4	4.4	5.8	7.6
6-11	8.8	6.3	10.6	8.4	8.5
12-17	7.7	6.5	10.6	11.6	11.8
Household composition					
Households without children	3.9	2.9	2.9	3.6	4.0
1 adult, with children under 18	20.1	17.8	16.6	13.6	16.4
2 adults, with 1-2 children under 18	2.7	2.5	4.1	4.7	6.2
2 adults, with 3+ children under 18	5.6	5.3	10.9	11.9	8.7
Other households with children	4.6	3.6	5.0	9.8	9.7

Source: EU-SILC

Differences by age, household composition and over time

- The highest consistent poverty rate occurred among children aged 12-17. This rate was 11.8% in 2011 compared with a rate of 8.5% for 6-11 year-olds and a rate of 7.6% for children aged 0-5.
- In 2011, the consistent poverty rate of persons living in households comprising a single adult with children was 16.4%. This was substantially higher than the consistent poverty rate in households with 2 adults and 1-2 children (6.2%) and in households with 2 adults and 3+ children under 18 years (8.7%).
- Over the period 2007-2011, the percentage of children experiencing consistent poverty was consistently higher than the national average.

AVAILABILITY OF HOUSING FOR FAMILIES WITH CHILDREN

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

Measure

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

Key findings

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

Differences by household structure and over time

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

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

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

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

Source: Triennial Assessment of Housing Needs

Differences by household structure and geographic location

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

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

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

Source: Triennial Assessment of Housing Needs, 2011

COMMUNITY CHARACTERISTICS

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

Measure

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

Key findings

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

Differences by population groups

- When compared to other children, Traveller children, immigrant children and children with a disability and/or chronic illness were less likely to report feeling safe in the area where they live (see *Table 126*). These differences were statistically significant.

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

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

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

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

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

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

* Refers to children aged 10-17 only.

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

n/a = not available

Source: HBSC Surveys

Differences by geographic location

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

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

Source: HBSC Survey, 2010

ENVIRONMENT AND PLACES

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

Measure

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

Key findings

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

Differences by population groups

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

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

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

Source: HBSC Survey, 2010

Differences by age, gender, social class and over time

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

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

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

* Refers to children aged 10-17 only.

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

n/a = not available

Source: HBSC Surveys

Differences by geographic location

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

Table 131: Percentage of children aged 10-17 who report that there are good places in their area to spend their free time, by NUTS Region (2010)

	%
All children	51.2
NUTS Region	
Border	48.4
Dublin	67.3
Midlands	43.9
Mid-East	50.8
Mid-West	43.6
South-East	42.4
South-West	48.2
West	45.9

Source: HBSC Survey, 2010

GARDA JUVENILE DIVERSION PROGRAMME REFERRALS

Over the 5-year period 2007-2011, the number of children referred to the Garda Juvenile Diversion Programme has decreased by 41.6%; however, the overall number of referrals has been relatively stable.

Measure

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

Key findings

- In 2011, 12,809 children aged 10-17 were referred to the Garda Juvenile Diversion Programme. The number of incidents referred did not correspond to the number of children referred since some children were referred more than once. The total number of referrals received amounted to 27,384, a ratio of 2.1 referrals per child.

Differences by age, gender, offence and over time

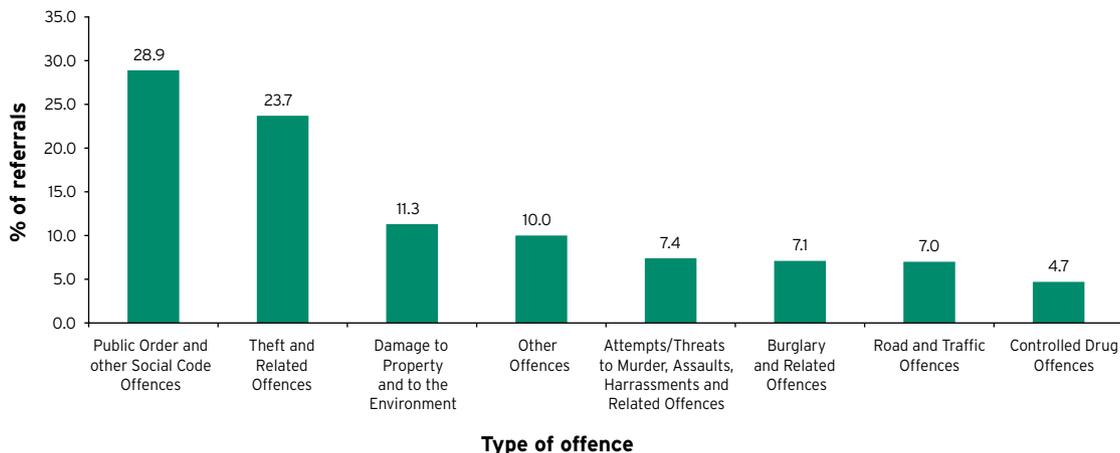
- 75.4% of children referred were aged 15-17 years (*see Table 132*).
- The number and rate (per 1,000) of children referred was approximately three times higher among boys.
- The majority of children referred were dealt with by way of a formal (23.0%) or informal (57.4%) caution, while 15.2% were considered unsuitable. A child is recorded as being unsuitable if (a) the child does not accept responsibility for his or her behaviour, (b) the child is offending persistently or (c) it would not be in the interest of society to caution the child.
- *'Public Order and other Social Code Offences'* were the single highest cause of referrals to the Garda Juvenile Diversion Programme, representing 28.9% of all referrals (*see Figure 30*).
- Over the 5-year period 2007-2011, the number of children referred to the Garda Juvenile Diversion Programme has decreased by 41.6%; however, the overall number of incidents referred has been relatively stable.

Table 132: Number, percentage and rate (per 1,000) of children aged 10-17 referred to the Garda Juvenile Diversion Programme, by age, gender and outcome (2007-2011)

	2007	2008	2009	2010	2011		
	No.	No.	No.	No.	No.	%	Rate per 1,000 children aged 10-17
Total (incidents referred)	27,853	27,422	23,952	27,257	27,384	100.0	58.1
Total (children referred)	21,941	21,412	18,519	17,986	12,809	100.0	27.2
Gender							
Boys	17,802	17,195	14,950	14,034	9,627	75.2	39.8
Girls	4,139	4,217	3,569	3,952	3,182	24.8	13.8
Age							
10-14	<i>n/a</i>	<i>n/a</i>	<i>n/a</i>	4,376	3,146	24.6	10.4
15-17	<i>n/a</i>	<i>n/a</i>	<i>n/a</i>	13,610	9,663	75.4	57.1
Outcome							
Formal	4,268	3,958	3,988	3,567	2,777	23.0	5.9
Informal	12,485	11,796	10,059	9,332	6,944	57.4	14.7
No further action	1,190	1,666	1,024	856	738	6.1	1.6
Pending	790	575	482	1,165	515	4.3	1.1
Not suitable	3,208	3,417	2,966	3,066	1,835	15.2	3.9

n/a = not available

Source: Census of the Population, 2011; An Garda Síochána

Figure 30: Referrals to the Garda Juvenile Diversion Programme, by type of offence (2011)

Source: Census of the Population, 2011; An Garda Síochána

Differences by geographic location

- Overall, 27.2 children per 1,000 were referred to the Garda Juvenile Diversion Programme in 2011. This rate ranged across Garda Divisions, from 16.4 children per 1,000 in Meath to 74.7 children per 1,000 in Dublin North Central (see Table 133). The overall referral rate was significantly higher. In total, there were 58.1 referrals per 1,000 children aged 10-17. This rate also ranged across Garda Divisions, from 32.3 referrals per 1,000 children in Meath to 257.4 referrals per 1,000 children in Dublin North Central.

Table 133: Number and rate (per 1,000) of children aged 10-17 referred/referrals to the Garda Juvenile Diversion Programme, by Garda Region and Division (2011)

	Total number of children referred		Total number of referrals		Average ratio referrals per child referred
	No.	Rate per 1,000 children aged 10-17	No.	Rate per 1,000 children aged 10-17	
Total	12,809	27.2	27,384	58.1	2.1
Eastern Region	1,697	19.8	3,422	40.0	2.0
Kildare	440	19.0	836	36.1	1.9
Laois/Offaly	329	19.1	678	39.3	2.1
Meath	328	16.4	647	32.3	2.0
Westmeath	244	23.6	601	58.2	2.5
Wicklow	356	24.0	660	44.4	1.9
Dublin Metropolitan Region (DMR)	3,960	34.4	9,357	81.2	2.4
DMR East	443	24.0	913	49.5	2.1
DMR North	333	29.8	1,147	68.0	3.4
DMR North Central	976	74.7	2,228	257.4	2.3
DMR South	820	36.1	1,889	83.2	2.3
DMR South Central	245	38.4	649	101.7	2.6
DMR West	1,143	37.6	2,531	83.2	2.2
Northern Region	1,333	23.0	2,721	47.0	2.0
Cavan/Monaghan	341	22.3	752	49.3	2.2
Donegal	461	24.5	839	44.7	1.8
Louth	334	24.3	675	49.0	2.0
Sligo/Leitrim	197	19.5	455	45.0	2.3

continued

Table 133 (continued)

	Total number of children referred		Total number of referrals		Average ratio referrals per child referred
	No.	Rate per 1,000 children aged 10-17	No.	Rate per 1,000 children aged 10-17	
South Eastern Region	1,719	27.5	3,498	56.0	2.0
Kilkenny/Carlow	441	27.5	928	57.9	2.1
Tipperary	417	23.8	836	47.6	2.0
Waterford	490	38.9	1,006	79.9	2.1
Wexford	371	22.8	728	44.7	2.0
Southern Region	2,520	28.4	5,395	60.9	2.1
Cork City	738	33.6	1,525	69.5	2.1
Cork North	421	26.3	746	46.5	1.8
Cork West	325	21.2	607	39.5	1.9
Kerry	354	23.8	737	49.6	2.1
Limerick	682	33.4	1,780	87.1	2.6
Western Region	1,497	24.2	2,861	46.3	1.9
Clare	326	26.9	657	54.3	2.0
Galway	595	23.9	1,069	42.9	1.8
Mayo	341	23.9	661	46.4	1.9
Roscommon/Longford	235	22.4	474	45.2	2.0
Outside jurisdiction	83	-	130	-	1.6

Source: Census of the Population, 2011; An Garda Síochána

ANTENATAL CARE

Early antenatal care is lowest among younger pregnant women.

Measure

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

Key findings

- In 2011, 82.7% of pregnant women attended for antenatal care in the first trimester of pregnancy.

Differences by age, social class and over time

- Antenatal care in the first trimester of pregnancy is lowest among pregnant women aged 15-19 (71.8%) (see Table 134).
- Women who were primarily engaged in 'home duties' or 'unemployed' had the lowest percentages of antenatal visits in the first trimester of pregnancy (76.5% and 76.8% respectively) (see Figure 31).

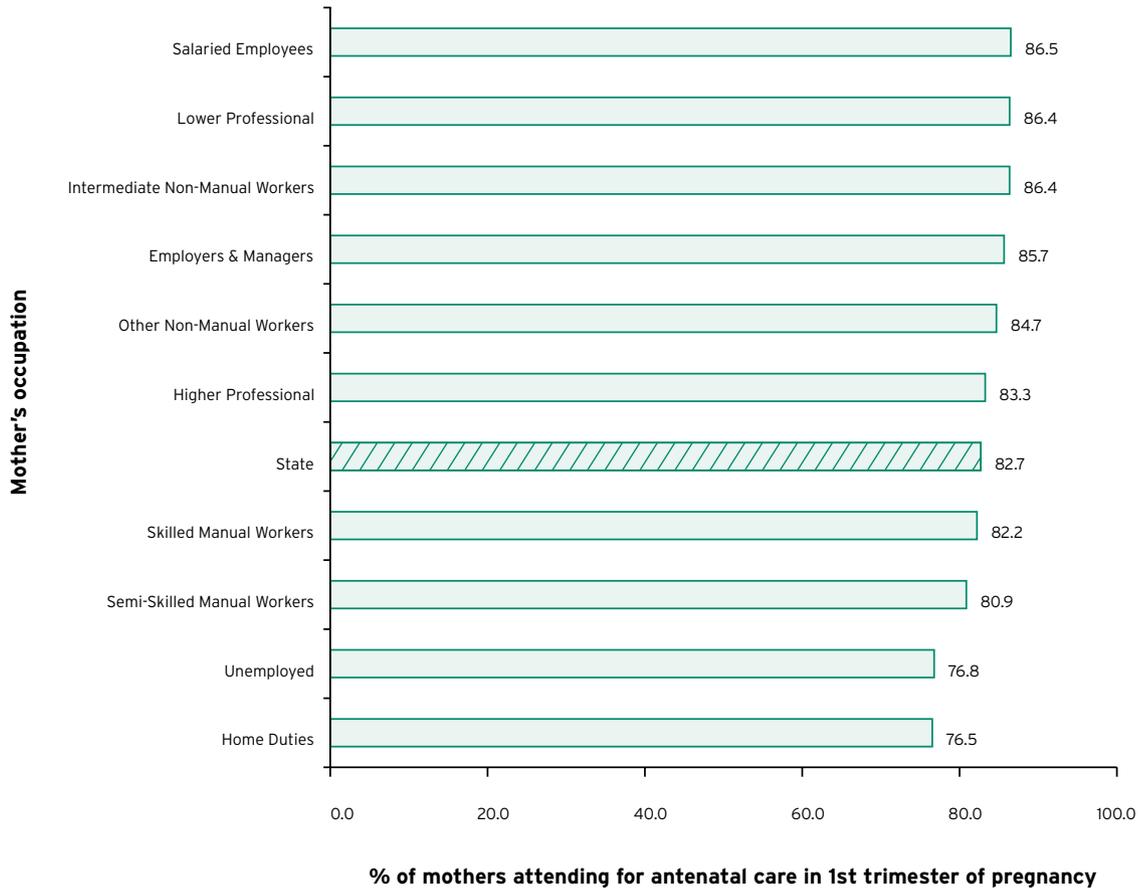
Table 134: Percentage of pregnant women attending for antenatal care in the first trimester of pregnancy, by mothers' age (2007-2011)*

	2007	2008	2009	2010	2011
Total	70.9	70.4	70.9	77.6	82.7
Age					
15-19	57.4	56.3	57.2	65.4	71.8
20-24	62.4	61.9	61.9	69.0	77.0
25-29	69.4	68.3	69.0	76.1	81.9
30-34	74.1	73.6	73.7	80.1	84.7
35-39	74.1	74.4	74.9	80.6	84.1
40-44	73.8	72.3	72.9	78.9	81.9
45 and over	64.2	70.9	75.9	74.3	78.9

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

Source: National Perinatal Reporting System

Figure 31: Percentage of pregnant women attending for antenatal care in the first trimester of pregnancy, by occupation of mother (2011)*



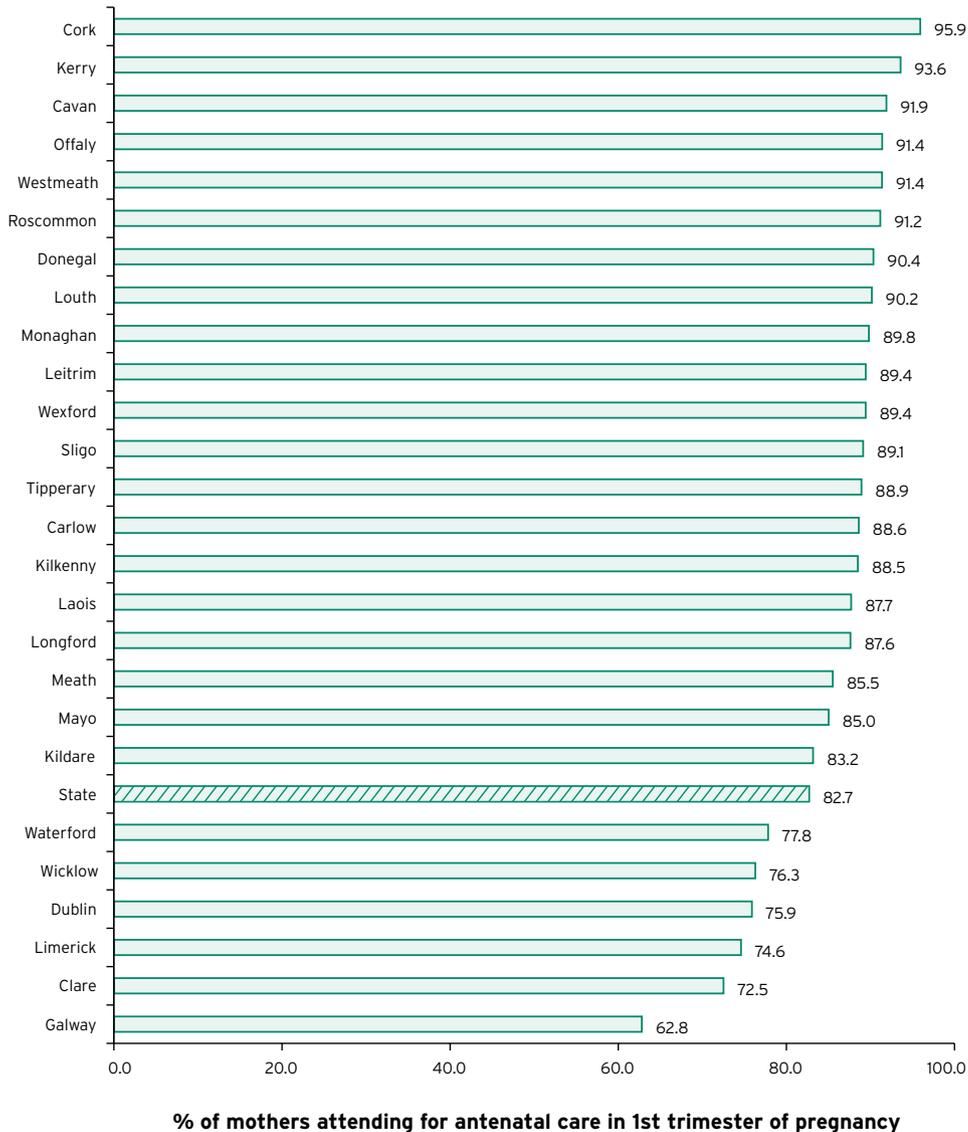
* Categories where percentages are based on less than 100 births (i.e. 'unskilled manual workers', 'other agricultural occupations and fishermen', 'farmers and farm managers') and 'not stated' and 'not classifiable' categories have been omitted from this Figure.

Source: National Perinatal Reporting System, 2011

Differences by geographic location

- Overall, 82.7% of pregnant women attended for antenatal care in the first trimester of pregnancy (see Figure 32). This ranged from 62.8% in Co. Galway to 95.9% in Co. Cork.

Figure 32: Percentage of pregnant women attending for antenatal care in the first trimester of pregnancy, by mother's county of residence (2011)*



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

Source: National Perinatal Reporting System, 2011

PUBLIC HEALTH NURSE VISIT

In 2011, 83.6% of newborn babies were visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time.

Measure

The percentage of newborn babies visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time.

Key findings

- In 2011, 83.6% of newborn babies were visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time.

Differences over time

- The percentage of newborn babies who were visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time rose consistently over the period 2007 to 2010 – from 73.2% to 84.4%. This percentage fell slightly in 2011 to 83.6% (see *Table 135*).

Table 135: Percentage of newborn babies visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time (2007-2011)

	2007	2008	2009	2010	2011
% within 48 hours	73.2	74.6	80.4	84.4	83.6

Source: Outturn of Quarterly Performance Indicator Returns (HSE)

Differences by geographic location

- The percentage of newborn babies who were visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time ranged from 50.0% in Meath to 100.0% in Mayo (see *Table 136*).

Table 136: Percentage of newborn babies visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time, by HSE Region and Local Health Office (LHO) Area (2011)	
	%
Total	83.6
HSE Dublin North East	71.3
Cavan/Monaghan	88.7
Dublin North	76.4
Dublin North Central	66.7
Dublin North West	71.9
Louth	65.7
Meath	50.0
HSE Dublin Mid-Leinster	83.6
Dublin South	53.1
Dublin South City	87.6
Dublin South East	95.5
Dublin South West	85.5
Dublin West	83.5
Kildare/West Wicklow	79.7
Laois/Offaly	87.2
Longford/West Meath	85.3
Wicklow	79.7
HSE South	86.9
Carlow/Kilkenny	84.9
Kerry	98.7
North Cork	84.3
North Lee	89.6
South Lee	86.6
Tipperary SR	89.5
Waterford	71.9
West Cork	91.4
Wexford	87.9
HSE West	92.8
Clare	90.4
Donegal	80.8
Galway	96.4
Limerick	93.0
Mayo	100.0
Roscommon	98.2
Sligo/Leitrim/West Cavan	95.1
Tipperary NR	91.8

Source: Outturn of Quarterly Performance Indicator Returns, 2011 (HSE)

DEVELOPMENTAL SCREENING

In 2011, 82.2% of children had the 7-9 Month Developmental Check on time.

Measure

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

Key findings

- In 2011, 82.2% of children had the 7-9 Month Developmental Check on time.

Differences by geographic location

- The percentage of children who had the 7-9 Month Developmental Check on time ranged from 22.5% in Galway to 100.0% in Cavan/Monaghan (see *Table 137*).

Table 137: Percentage of children reaching 10 months who have had their 7-9 Month Developmental Check on time, by HSE Region and Local Health Office (LHO) Area (2011)

	%
Total	82.2
HSE Dublin North East	90.1
Cavan/Monaghan	100.0
Dublin North	89.5
Dublin North Central	81.9
Dublin North West	94.6
Louth	78.1
Meath	92.2
HSE Dublin Mid-Leinster	81.1
Dublin South	55.1
Dublin South City	91.1
Dublin South East	86.8
Dublin South West	77.0
Dublin West	93.1
Kildare/West Wicklow	90.6
Laois/Offaly	88.5
Longford/West Meath	85.7
Wicklow	43.1

continued

Table 137 (continued)	
	%
HSE South	87.7
Carlow/Kilkenny	84.5
Kerry	88.4
North Cork	86.5
North Lee	90.0
South Lee	90.4
Tipperary SR	92.5
Waterford	82.2
West Cork	85.1
Wexford	86.5
HSE West	68.7
Clare	87.5
Donegal	78.9
Galway	22.5
Limerick	86.0
Mayo	76.9
Roscommon	74.3
Sligo/Leitrim/West Cavan	92.6
Tipperary NR	76.5

Source: Outturn of Monthly Activity Data Returns, 2011 (HSE)

CHILDHOOD IMMUNISATION

In 2011, the national uptake rates of D_3 , P_3 , T_3 , Hib_3 , $Polio_3$ and $HepB_3$ for children at 24 months of age reached the target of 95%.

Measure

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

Recommended doses of vaccines for children (see technical notes in Appendix 1 for immunisation schedule):

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

Key findings

- In 2011, the national uptake rates for children at **12 months** of age were 90% for D_3 , P_3 , T_3 , Hib_3 , $Polio_3$, $HepB_3$, $MenC_2$ and PCV_2 and 85% (based on available data) for BCG.

- The national uptake rates of D_3 , P_3 , T_3 , Hib_3 , $Polio_3$ and $HepB_3$ for children at **24 months** of age in 2011 reached the target of 95%. The national uptake rates at 24 months of age were 92% for MMR_1 , 90% for PCV_3 , 88% for Hib_b and 84% for $MenC_3$. There was a dramatic decline in $MenC_3$ uptake and a decline in Hib_b in Quarter 3 2010 following the introduction of the new childhood immunisation schedule. Under the new immunisation schedule, the third dose of MenC (i.e. $MenC_3$) vaccine and Hib_b vaccine are now recommended at 13 months of age. The data suggest that parents are less likely to get the necessary vaccines for their children at 13 months of age.

Differences over time

- Over the 5-year period 2007-2011, for children at 12 months of age the national uptake rates (based on available data) have increased from 87% to 90% for D_3 , P_3 , T_3 , Hib_3 and $Polio_3$ (see *Table 138*). In Quarters 3 and 4 2011, the HSE Western Area (Galway, Mayo and Roscommon) reported BCG uptake data (4%) for children at 12 months of age for the first time, resulting in a low national uptake rate (85%). This is not a true decline, compared to previous years, since figures are based on available data and the HSE Western Area BCG data were not available previously. Traditionally, BCG was given at age 10-12 years in the HSE Western Area.
- Over the same period, for children at 24 months of age the national uptake rates (based on available data) increased from 92% to 95% for D_3 , P_3 , T_3 , Hib_3 and $Polio_3$; from 74% to 88% for Hib_b ; and from 87% to 92% for MMR_1 . $MenC_3$ declined from a high of 93% in 2009 to 84% in 2011.
- A dramatic decline in $MenC_3$ uptake was observed in Quarter 3 2010, when uptake was 80%. Hib_b vaccine also declined in Quarter 3 2010 to 84% compared to 87% in Quarter 2 2010. Children who were 24 months of age in Quarter 3 2010 were children born between 1st July and 30th September 2008, and were therefore the first cohort recommended for the new immunisation schedule introduced on 1st September 2008 (see *Appendix 1*). Under the new immunisation schedule, the third dose of MenC (i.e. $MenC_3$) vaccine and Hib_b vaccine are now recommended at 13 months of age. The data suggest that parents are less likely to get the necessary vaccines for their children at 13 months of age.

Table 138: Immunisation uptake rates (%), by age and vaccine type (2007-2011)*

	2007	2008	2009	2010	2011
At 12 months					
BCG	93	94	95	95	85
D ₃	87	88	89	89	90
P ₃	87	88	89	89	90
T ₃	87	88	89	89	90
Hib ₃	87	88	89	89	90
Polio ₃	87	88	89	89	90
MenC ₃	87	88	86	<i>n/a</i>	<i>n/a</i>
HepB ₃	<i>n/a</i>	<i>n/a</i>	89	89	90
MenC ₂	<i>n/a</i>	<i>n/a</i>	89	89	90
PCV ₂	<i>n/a</i>	<i>n/a</i>	89	89	90
At 24 months					
D ₃	92	93	94	94	95
P ₃	92	93	94	94	95
T ₃	92	93	94	94	95
Hib ₃	92	93	93	94	95
Hib ₆	74	82	87	85	88
Polio ₃	92	93	94	94	95
HepB ₃	<i>n/a</i>	<i>n/a</i>	<i>n/a</i>	94	95
MenC ₃	91	92	93	86	84
PCV ₃	<i>n/a</i>	<i>n/a</i>	<i>n/a</i>	88	90
MMR ₁	87	89	90	90	92

n/a = not applicable (see below)

* Please see technical notes in Appendix 1 for caveats to data (as a number of figures presented here are incomplete) and for changes to the primary childhood immunisation schedule introduced on 1st September 2008.

Source: Immunisation Uptake Statistics

Differences by geographic location

- For children at **12 months of age**, uptake rates among Local Health Offices (LHOs) in 2011 for D₃, P₃, T₃, Hib₃, Polio₃, HepB₃ and MenC₂ ranged from 81%-96% and PCV₂ ranged from 81%-97% (see Table 139). The target uptake of 95% was reached or exceeded in Longford/Westmeath and Roscommon for D₃, P₃, T₃, Hib₃, Polio₃, HepB₃, MenC₂ and PCV₂, and reached in Sligo/Leitrim for PCV₂. The target uptake of 95% was reached or exceeded for BCG in 10 LHOs reporting data.

Table 139: Immunisation uptake rates (%) at 12 months, by HSE Region and Local Health Office (LHO) Area (2011)

	BCG*	D ₃ P ₃ T ₃	Hib ₃	Polio ₃	HepB ₃	MenC ₂	PCV ₂
Total	85	90	90	90	90	90	90
HSE Dublin North East	<i>n/a</i>	89	89	89	89	88	88
Cavan/Monaghan	<i>n/a</i>	92	92	92	92	90	90
Dublin North	<i>n/a</i>	92	92	92	92	92	92
Dublin North Central	<i>n/a</i>	90	90	90	90	89	89
Dublin North West	<i>n/a</i>	82	82	82	82	82	82
Louth	<i>n/a</i>	91	91	91	91	90	90
Meath	<i>n/a</i>	88	88	88	87	87	87
HSE Dublin Mid-Leinster	94	91	91	91	90	90	91
Dublin South	<i>n/a</i>	91	91	91	91	91	91
Dublin South City	<i>n/a</i>	94	94	94	94	94	94
Dublin South East	<i>n/a</i>	89	89	89	89	89	89
Dublin South West	<i>n/a</i>	92	92	92	92	92	93
Dublin West	<i>n/a</i>	81	81	81	81	81	81
Kildare/West Wicklow	<i>n/a</i>	91	91	91	91	91	91
Laois/Offaly	95	94	94	94	94	94	94
Longford/Westmeath	94	96	96	96	96	96	96
Wicklow	<i>n/a</i>	89	89	89	89	89	89
HSE South	92	90	90	90	90	88	88
Carlow/Kilkenny	96	90	90	90	90	90	91
Kerry	92	87	87	87	86	83	83
North Cork	79	90	90	90	89	87	86
North Lee/South Lee**	92	90	90	90	89	86	86
Tipperary SR	95	94	94	94	94	93	93
Waterford	96	93	93	93	93	93	93
West Cork	89	86	86	86	86	82	81
Wexford	97	91	91	91	91	91	92

continued

Table 139 (continued)

	BCG*	D ₃ P ₃ T ₃	Hib ₃	Polio ₃	HepB ₃	MenC ₂	PCV ₂
HSE West	72*	92	92	92	92	92	92
Clare	98	92	92	92	92	93	92
Donegal	95	93	93	93	93	93	93
Galway	<i>n/a</i>	90	90	90	90	90	90
Limerick	97	91	91	91	91	92	92
Mayo	<i>n/a</i>	92	92	92	92	91	92
Roscommon	<i>n/a</i>	96	95	96	96	96	97
Sligo/Leitrim/West Cavan	96	94	94	94	94	93	95
Tipperary NR/East Limerick	96	93	93	93	93	93	93

n/a = not available (see below)

* BCG data for children at 12 months of age were available for Galway, Mayo and Roscommon for the first time in Quarters 3 and 4 2011. However, the uptake was reported as a single combined figure (4%) and was not available by LHO. Traditionally, BCG was given at age 10-12 years in the HSE Western Area (Galway, Mayo and Roscommon).

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

Source: Immunisation Uptake Statistics, 2011

- For children at **24 months of age**, uptake rates among LHOs in 2011 for D₃, P₃, T₃ and Polio₃ ranged from 90-98%; Hib₃ and HepB₃ ranged from 89%-98%; MMR₁ ranged from 85%-97%; PCV₃ ranged from 83%-98%; Hib₆ ranged from 75%-97%; and MenC₃ ranged from 76%-96% (see Table 140). The target uptake of 95% was exceeded in Roscommon for all vaccines.

Table 140: Immunisation uptake rates (%) at 24 months, by HSE Region and Local Health Office (LHO) Area (2011)

	D ₃ P ₃ T ₃	Hib ₃	Hib ₆	Polio ₃	HepB ₃	MenC ₃	PCV ₃	MMR ₁
Total	95	95	88	95	95	84	90	92
HSE Dublin North East	94	94	87	94	94	84	89	90
Cavan/Monaghan	97	97	90	97	97	88	94	94
Dublin North	95	95	91	95	95	87	91	92
Dublin North Central	95	95	89	95	95	82	87	90
Dublin North West	91	91	81	91	91	77	85	85
Louth	94	94	89	94	94	85	91	92
Meath	96	96	87	96	96	84	91	91

continued

Table 140 (continued)								
	D₃P₃T₃	Hib₃	Hib_b	Polio₃	HepB₃	MenC₃	PCV₃	MMR₁
HSE Dublin Mid-Leinster	95	95	89	95	95	84	90	92
Dublin South	93	93	86	93	92	81	87	89
Dublin South City	96	96	88	96	96	83	90	93
Dublin South East	92	92	85	92	92	81	87	89
Dublin South West	95	95	89	95	94	83	89	92
Dublin West	93	93	84	93	93	76	86	89
Kildare/West Wicklow	97	97	93	97	97	88	93	95
Laois/Offaly	97	97	94	97	97	89	94	96
Longford/Westmeath	97	97	95	97	97	90	94	96
Wicklow	93	93	81	93	93	77	87	88
HSE South	96	96	87	96	95	85	91	93
Carlow/Kilkenny	95	95	94	95	95	85	89	93
Kerry	96	95	82	96	94	84	91	92
North Cork	95	94	82	95	94	83	90	90
North Lee/South Lee*	98	97	83	98	96	86	93	95
Tipperary SR	97	97	97	97	96	86	92	93
Waterford	95	95	94	95	95	88	92	93
West Cork	90	89	75	90	89	76	83	86
Wexford	95	95	94	95	95	87	91	93
HSE West	95	95	87	95	95	84	90	92
Clare	96	96	93	96	96	89	93	94
Donegal	97	97	91	97	95	86	91	93
Galway	93	93	78	93	93	78	87	88
Limerick	94	94	87	94	94	84	91	92
Mayo	95	95	80	95	95	80	89	89
Roscommon	98	98	97	98	98	96	98	97
Sligo/Leitrim/West Cavan	97	97	95	97	96	86	88	96
Tipperary NR/East Limerick	96	96	89	96	96	85	92	93

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

Source: Immunisation Uptake Statistics, 2011

International comparisons

- In 2010, uptake rates of the recommended doses of vaccines among children of relevant age reported in countries across the EU-27 for D₃, P₃, T₃ and Polio₃ ranged from 76% in Malta to 100% in Hungary, and for the first dose of measles-containing vaccine ranged from 73% in Malta to 100% in Hungary (see Table 141). The equivalent uptake rates in Ireland were 94% for D₃, P₃, T₃ and Polio₃ and 90% for first dose of measles-containing vaccine.

Table 141: Immunisation uptake rates (%) among children of relevant age, by vaccine type and EU-27 (2010)

Country	D ₃ P ₃ T ₃	Polio ₃	Measles-containing vaccine (first dose)
Austria	n/a	n/a	n/a
Belgium	99	99	94
Bulgaria	94	96	97
Cyprus	99	99	87
Czech Republic	n/a	99	n/a
Denmark	90	90	85
Estonia	94	94	95
Finland	n/a	n/a	n/a
France	99	99	90
Germany	n/a	95	96
Greece	n/a	n/a	n/a
Hungary	100	100	100
Ireland	94	94	90
Italy	n/a	n/a	n/a
Latvia	92	92	90
Lithuania	95	95	96
Luxembourg	99	99	96
Malta	76	76	73
Netherlands	97	n/a	96
Poland	99	96	98
Portugal	98	97	96
Romania	n/a	n/a	95
Slovakia	99	99	99
Slovenia	96	96	95
Spain	97	97	95
Sweden	98	98	97
United Kingdom	96	98	93

n/a = not available

Source: Centralised Information System for Infectious Diseases, 2010 (WHO)

ACCESSIBILITY OF BASIC HEALTH SERVICES

The number of children on a hospital waiting list awaiting treatment decreased by 45.1% between 2009 and 2012.

Measure

The number of children on hospital waiting lists.

Key findings

- In September 2012, 3,065 children were known to be on a hospital waiting list, awaiting treatment.

Differences by waiting time and over time

- 93.7% of these children were on a hospital waiting list for less than 6 months (see *Table 142*).
- The number of children on a hospital waiting list awaiting treatment has decreased by 45.1% between 2009 and 2012.

Table 142: Number and percentage of children on hospital waiting lists, by waiting time (2008-2012)

	2008	2009	2010	2011	2012	
	No.	No.	No.	No.	No.	%
Total	4,495	5,579	5,041	4,894	3,065	100.0
Waiting time (months)						
Less than 3 months	1,705	2,102	2,201	2,045	2,116	69.0
3-6 months	1,235	1,548	1,467	1,443	756	24.7
6-9 months	714	822	754	773	133	4.3
9-12 months	413	465	296	261	44	1.5
12 months or more	428	642	323	372	16	0.5

Source: Patient Treatment Register

CHILDREN AND YOUNG PEOPLE IN CARE

The number of children in the care of the HSE increased by approximately 16% between 2007 and 2011.

Measure

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

Key findings

- In 2011, 6,160 children were in the care of the HSE.

Differences by age, gender, type placement and over time

- The number of children in the care of the HSE increased by approximately 16% between 2007 and 2011 (see *Table 143*).
- The majority (90.3%) of children in the care of the HSE live in foster families.
- The number and rate (per 1,000) of boys and girls in the care of the HSE is broadly similar.

Table 143: Number, percentage and rate (per 1,000) of children in the care of the HSE, by age, gender and type of placement (2007-2011)

	2007	2008	2009	2010	2011		
	No.	No.	No.	No.	No.	%	Rate per 1,000 children
Total	5,307	5,357	5,674	5,965	6,160	100.0	5.4
Age							
0-4	819	834	921	938	1,021	16.6	2.9
5-9	1,434	1,452	1,565	1,579	1,647	26.7	5.1
10-14	1,780	1,799	1,850	1,875	2,007	32.6	6.6
15-17	1,274	1,272	1,338	1,407	1,480	24.0	8.8
Not available	-	-	-	166	5	0.1	-

continued

Table 143 (continued)							
	2007	2008	2009	2010	2011		
	No.	No.	No.	No.	No.	%	Rate per 1,000 children
Gender							
Boys	2,695	2,717	2,914	3,008	3,182	51.7	5.4
Girls	2,612	2,640	2,760	2,791	2,973	48.3	5.3
Not available	–	–	–	166	5	0.1	–
Type of placement							
Foster care (general)	3,172	3,161	3,422	3,612	3,776	61.3	3.3
Foster care (relative)	1,552	1,581	1,678	1,742	1,788	29.0	1.6
Residential care	388	381	395	440	443	7.2	0.4
Other	195	234	179	171	153	2.5	0.1

Source: Census of the Population, 2011; Review of Adequacy Reports (HSE)

Differences by geographic location

- Overall, 5.4 per 1,000 children were in the care of the HSE in 2011 (see Table 144). Rates ranged across LHO Area from 2.4 per 1,000 in Dublin North to 15.2 per 1,000 in Dublin North Central.

Table 144: Number and rate (per 1,000) of children in the care of the HSE, by HSE Region and Local Health Office (LHO) Area (2011)			
	No. of children in the care of the HSE in each HSE Region/LHO Area	No. of children in HSE Region/LHO Area	Rate per 1,000 children in HSE Region/LHO Area
Total	6,160	1,148,687	5.4
HSE Dublin North East			
	1,484	258,569	5.7
Cavan/Monaghan	155	35,085	4.4
Dublin North	149	63,256	2.4
Dublin North Central	374	24,619	15.2
Dublin North West	445	48,047	9.3
Louth	223	33,034	6.8
Meath	138	54,528	2.5
HSE Dublin Mid-Leinster			
	1,531	324,955	4.7
Dublin South	131	28,558	4.6
Dublin South City	170	23,409	7.3

continued

Table 144 (continued)			
	No. of children in the care of the HSE in each HSE Region/LHO Area	No. of children in HSE Region/LHO Area	Rate per 1,000 children in HSE Region/LHO Area
Dublin South East	93	22,113	4.2
Dublin South West	211	38,227	5.5
Dublin West	214	39,029	5.5
Kildare/West Wicklow	219	64,573	3.4
Laois/Offaly	225	44,081	5.1
Longford/West Meath	124	33,645	3.7
Wicklow	144	31,320	4.6
HSE South	1,877	292,796	6.4
Carlow/Kilkenny	199	33,790	5.9
Kerry	151	34,940	4.3
North Cork	117	22,887	5.1
North Lee	485	46,453	10.4
South Lee	233	44,904	5.2
Tipperary SR	173	25,073	6.9
Waterford	236	31,703	7.4
West Cork	65	14,204	4.6
Wexford	218	38,842	5.6
HSE West	1,268	272,367	4.7
Clare	163	27,027	6.0
Donegal	161	44,534	3.6
Galway	235	61,194	3.8
Limerick	264	41,041	6.4
Mayo	110	32,514	3.4
Roscommon	130	16,076	8.1
Sligo/Leitrim/West Cavan	70	23,060	3.0
Tipperary NR	135	26,921	5.0

Source: Census of the Population, 2011; Review of Adequacy Report, 2011 (HSE)

MENTAL HEALTH REFERRALS

In 2011, the most common reason for children being admitted to psychiatric hospitals was for 'depressive disorders'.

Measure

The number of admissions of children to psychiatric hospitals.

Key findings

- In 2011, there were 435 admissions of children to psychiatric hospitals.

Differences by age, gender, diagnosis and over time

- 82.5% of children admitted to psychiatric hospitals were aged 15-17 years (see *Table 145*).
- 43.7% of children admitted to psychiatric hospitals were boys and 56.3% were girls. This equates to a rate of 32.3 per 100,000 boys and 43.7 per 100,000 girls.
- The most common reason for children being admitted to psychiatric hospitals was for 'depressive disorders' (36.1%) followed by 'neuroses' (23.2%). Other common reasons included 'schizophrenia' (8.5%) and 'mania' (6.4%).
- The number of admissions of children to psychiatric hospitals increased by 19.5% between 2009 and 2010, but has since remained stable.

Table 145: Number, percentage and rate (per 100,000) of admissions of children to psychiatric hospitals, by age, gender and diagnosis (2007-2011)

	2007	2008	2009	2010	2011*		
	No.	No.	No.	No.	No.	%	Rate per 100,000 children
Total	364	406	367	435	435	100.0	37.9
Age							
0-4	0	0	0	0	0	0.0	0.0
5-9	4	3	1	0	2	0.5	0.6
10-14	72	62	44	79	74	17.0	24.5
15-17	288	341	322	356	359	82.5	212.3

continued

Table 145 (continued)

	2007	2008	2009	2010	2011*		
	No.	No.	No.	No.	No.	%	Rate per 100,000 children
Gender							
Boys	153	170	165	205	190	43.7	32.3
Girls	211	236	202	230	245	56.3	43.7
Diagnosis							
Alcoholic disorders	12	8	6	8	4	0.9	0.3
Depressive disorders	90	106	99	123	157	36.1	13.7
Drug dependence	15	17	16	23	15	3.4	1.3
Mania	18	21	19	23	28	6.4	2.4
Mental handicap	2	2	1	0	0	0.0	0.0
Neuroses	104	137	89	81	101	23.2	8.8
Organic psychoses	12	3	7	12	12	2.8	1.0
Other psychoses	10	28	19	20	24	5.5	2.1
Personality disorders	21	30	26	30	23	5.3	2.0
Schizophrenia	27	13	26	26	37	8.5	3.2
Unspecified	53	41	59	89	34	7.8	3.0

* Includes 3 cases aged over 18 that were treated in child and adolescent units.

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

Differences by geographic location

- Overall, 37.9 per 100,000 children were admitted to a psychiatric hospital in 2011 (see Table 146). Rates ranged across counties, with the highest rate being 71.1 per 100,000 in Co. Tipperary.

Table 146: Number and rate (per 100,000) of admissions of children to psychiatric hospitals, by county (2011)*			
	No. of admissions of children to psychiatric hospitals	No. of children in State/County	Rate per 1,000 children in State/County
Total	435	1,148,687	37.9
County			
Clare	20	30,666	65.2
Cork	28	128,448	21.8
Donegal	14	43,732	32.0
Dublin	143	287,258	49.8
Galway	22	61,194	36.0
Kerry	8	34,940	22.9
Kildare	27	59,449	45.4
Kilkenny	5	25,015	20.0
Laois	8	22,932	34.9
Leitrim	5	8,051	62.1
Limerick	23	46,067	49.9
Mayo	14	32,514	43.1
Meath	15	53,400	28.1
Monaghan	10	16,031	62.4
Roscommon	11	16,076	68.4
Sligo	5	15,541	32.2
Tipperary	29	40,760	71.1
Westmeath	7	23,052	30.4
Wexford	13	38,842	33.5
Wicklow	13	36,444	35.7
Other counties	15	128,275	11.7

* Includes 3 cases aged over 18 that were treated in child and adolescent units.

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

APPENDICES

APPENDIX 1: MAIN DATA SOURCES, DEFINITIONS AND TECHNICAL NOTES

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

Census of the Population and Population Estimates: Central Statistics Office

The Census of the Population is conducted by the Central Statistics Office (CSO) on a quinquennial basis. The following indicators, which draw on data from this source, define children as 'all population under 18 years of age' when the data were collected. Figures are based on either place of usual residence and present on Census night or de facto presence on Census night:

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

Parental education level data refer to the highest educational attainment of the mother rather than the head of household. All information supplied is for those whose full-time education has ceased. Where no mother is present, the highest educational attainment of the father is used instead. The figures are based on responses to Question 25 of the 2011 Census, which distinguishes between the following main categories:

1. No formal education or just primary education: NFQ Levels 1 or 2 (FETAC Level 1 or 2 Cert. or equivalent).
2. Lower secondary education: NFQ Level 3 (Junior/Inter/Group Cert., FETAC Level 3 Cert., FÁS Introductory Skills, NCVA Foundation Cert. or equivalent).

3. Upper secondary: NFQ Levels 4, 5 or 6 (Leaving Cert. (including Applied and Vocational programmes) or equivalent), Technical or Vocational (FETAC Level 4/5 Cert., NCVA Level 1/2, FÁS Specific Skills, Teagasc Cert. in Agriculture, CERT Craft Cert. or equivalent), Advanced Certificate/Completed Apprenticeship (FETAC Advanced Cert., NCVA Level 3, FÁS National Craft Cert., Teagasc Farming Cert., CERT Professional Cookery Cert. or equivalent).
4. Third level: NFQ Levels 6, 7, 8, 9 or 10 (Higher Certificate, Ordinary Bachelor Degree or National Diploma, Honours Bachelor Degree/Professional qualification or both, Postgraduate Diploma or Degree, Doctorate (PhD) or higher).

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

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

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

- Question 16: *'Do you have any of the following long-lasting conditions or difficulties?'*
 - (a) Blindness or a serious vision impairment.
 - (b) Deafness or a serious hearing impairment.
 - (c) A difficulty with basic physical activities, such as walking, climbing stairs, reaching, lifting or carrying.
 - (d) An intellectual disability.
 - (e) A difficulty with learning, remembering or concentrating.
 - (f) A psychological or emotional condition.
 - (g) A difficulty with pain, breathing or any other chronic illness or condition.
- Question 17: *'If Yes to any of the conditions specified in Question 16, do you have any difficulty in doing any of the following?'*
 - (h) Dressing, bathing or getting around inside the home.
 - (i) Going outside the home alone to shop or visit a doctor's surgery.
 - (j) Working at a job or business or attending school or college.
 - (k) Participating in other activities, for example, leisure or using transport.

Centralised Information System for Infectious Diseases: World Health Organization

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

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

Education Statistics Database: Department of Education and Skills

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

- Leaving Certificate retention rates.
- Public expenditure on education.

Leaving Certificate retention rates are drawn from the school-based returns collated by the Department of Education and Skills. Rates are adjusted for emigration and transfer to non-aided second-level schools, but not for transfer to other destinations (e.g. Youthreach). For 2005 and 2006, 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 2011.

Public expenditure on education as used for the international comparison includes both current and capital expenditure.

In the mid-1990s, undergraduate tuition fees were abolished in Ireland.

Educational institutions are defined as entities that provide instructional services to individuals or education-related services to individuals and other educational institutions.

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

Data on total public expenditure on education are expressed as a percentage of Gross Domestic Product (GDP). GDP is the central aggregate of National Accounts. It represents the total value added (output) in the production of goods and services in the country.

National public expenditure as a percentage of GDP is calculated using figures in national currency both for public expenditure and for GDP. European averages are weighted and therefore take into account the relative proportion of the student population or the education expenditure of the considered countries. They are calculated taking into account all relevant countries for which data are available. They are considered of sufficient quality if countries with available data exceed 70% of the population or of the GDP of the European aggregate.

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

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

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

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

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

Pre-school Leaders must hold certification for a major award in childcare/early education at a minimum of Level 5 on the National Framework of Qualifications of Ireland (NFQ) or an equivalent nationally recognised qualification or a higher award in the childcare/early education field.

In recognition of the unprecedented nature of these criteria, an interim measure was provided for whereby services could be contracted to deliver the Free Pre-school Year Scheme if they could meet the following criteria:

During the period September 2010 to August 2012, the qualification requirement will be considered to be met where a person can demonstrate that he or she has achieved a certification for an award in ECCE that includes significant content covering the core knowledge areas, child development, early learning, health and welfare, and has at least 2 years' experience of working in a position of responsibility with children in the 0-6 age range.

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

A higher capitation fee, equivalent to €75 per week for 38 weeks, will be payable to playschool sessional service providers where all Pre-school Leaders hold a Bachelor degree in childcare/early education (minimum of Level 7 on the National Framework of Qualifications (NFQ) or equivalent) and have 3 years' experience working in the sector, and where all Pre-school Assistants hold a relevant major award in childcare/early education at Level 5 on the NFQ or its equivalent.

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

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

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

There are two definitions of income and '**at risk of poverty**' (national and EU) used in the measures shown in this report. The key difference between the national and EU definition of income is that the national definition includes income from private pensions, while the EU definition does not. The calculation of national and EU risk of poverty measures involves the use of different equivalence scales. The purpose of an equivalence scale is to account for the size and composition of different income units (households) and thus allows for a more accurate comparison between households.

The national equivalence scale used to obtain the equivalised household size attributes a weight of 1.0 to the first adult in a household, 0.66 to each subsequent adult (aged 14+ living in the household) and 0.33 to each child less than 14.

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).

In the tables/graphs shown in this report, tables with national data only use the national income definition and equivalence scale to calculate the 'risk of poverty' rate, while tables showing EU comparisons use the corresponding EU definitions.

The indicators shown in this report refer to income after social transfers are included.

In 2011, the 'at risk of poverty' threshold for an individual was €10,889.*

'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.

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

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

- Percentage of children aged 10-17 who report that they find it easy to talk to their mother when something is really bothering them.*
- Percentage of children aged 10-17 who report that they find it easy to talk to their father when something is really bothering them.*
- Percentage of children aged 10-17 who report to have 3 or more friends of the same gender.*
- Percentage of children aged 10-17 who report having a pet of their own or a pet in their family.*

* Central Statistics Office (2013) *Survey on Income and Living Conditions: 2011*. Dublin: Government Publications.

- Percentage of children aged 10-17 who report to have been bullied in school (in the past couple of months).*
- Percentage of children aged 10-17 who report that students at their school participate in making the school rules.*
- Percentage of children aged 10-17 who report smoking cigarettes every week.*
- Percentage of children aged 10-17 who report never smoking cigarettes.*
- Percentage of children aged 10-17 who report to have been drunk at least once in the last 30 days.
- Percentage of children aged 10-17 who report never having had an alcoholic drink.
- Percentage of children aged 10-17 who report having taken cannabis at least once in their lifetime.
- Percentage of children aged 15-17 who report having ever had sex.
- Percentage of children aged 10-17 who report feeling happy with the way they are.*
- Percentage of children aged 10-17 who report being happy with their lives at present.*
- Percentage of children aged 10-17 who report to be physically active for at least 60 minutes per day on more than 4 days per week.*
- Percentage of children aged 10-17 who report to eat breakfast 5 or more days per week.
- Percentage of children aged 10-17 who report drinking soft drinks that contain sugar at least once a day.*
- Percentage of children aged 10-17 who report feeling safe in the area where they live.*
- Percentage of children aged 10-17 who report that there are good places in their area to spend their free time.*

* **Indicators marked with an asterisk (*) include data on children aged 9.** These indicators use data collected separately in a Middle Childhood Study. These children are not included in the core HBSC sample. Therefore, these data have been excluded from overall percentages and from analyses by population group, social class and geographic location.

Data are subject to potential bias in relation to self-presentation and memory. They may also suffer from social desirability bias.

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

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

NUTS is an acronym for the EU Nomenclature of Territorial Units for Statistics. This classification was legally established by EU Regulation No. 1059/2003 on 29th May 2003. The 8 Regional Authorities (NUTS 3 regions) were established under the Local Government Act 1991. In Ireland, it is classified hierarchically as Level 1 - Ireland, Level 2 - Regions and Level 3 - Regional Authorities (see *Appendix 2*).

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

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

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

Hospital In-Patient Enquiry: Department of Health

The Hospital In-Patient Enquiry (HIPE) system is an administrative data source managed by the Economic and Social Research Institute (ESRI) on behalf of the Department of Health and the Health Service Executive. HIPE provides information on each hospital discharge. The following indicators draw on data from this source, which was provided by the Department of Health:

- The number of hospital discharges among children.
- The number of hospital discharges among children with a diagnosis of external causes of injury or poisoning.

HIPE data for 1994-2004 were classified using ICD-9-CM. All HIPE discharges from 2005 are now coded using ICD-10-AM (the Australian Modification of ICD-10 incorporating the Australian Classification of Health Interventions). This system includes significant changes in the classification of diagnoses and procedures. This means that it is not possible to directly compare the data published for 2007-2011 in this report to previously reported data for 1994-2004.

Care must be taken not to use hospitalisation rates as a proxy for incidence or prevalence of ill-health in children. Rates are based on episodes of care such that an individual case will be counted separately in the statistics for each admission to hospital. In addition, hospital data will reflect changes in treatment protocols, as well as issues of access to care.

HIPE has covered close to 100% of the discharges from publicly funded acute hospitals in recent years. However, please note the following: Bantry General Hospital has been included in HIPE since 2009 and has complete data for that year; its coverage for 2010 was estimated to

be only 1.4% and in 2011 it did not submit any HIPE data. Also, Roscommon County Hospital did not submit any HIPE data from September 2010 to December 2010, and its coverage for 2011 data is estimated to be 2%.

Immunisation Uptake Statistics: Health Protection Surveillance Centre

National data on immunisation uptake in children at 12 and 24 months of age are collated by the Health Protection Surveillance Centre using data provided by the HSE Regions on a quarterly basis. There is no national database on childhood immunisations. The following indicator draws on data from this source:

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

The immunisation uptake data presented relate to children who reached their 1st or 2nd birthday (uptake at 12 and 24 months respectively) during the quarters/years in question and who have received the following as appropriate (i.e. depending on their age/birth cohort):

- BCG - 1 dose of BCG vaccine
- D₃ - 3 doses of vaccine against diphtheria
- HepB₃ - 3 doses of vaccine against hepatitis B
- Hib₃ - 3 doses of vaccine against *Haemophilus influenzae* type b
- Hib_b - 1 booster dose of vaccine against *Haemophilus influenzae* type b on or after 12 months of age
- MenC₂ - 2 doses of vaccine against meningococcal group C
- MenC₃ - 3 doses of vaccine against meningococcal group C
- P₃ - 3 doses of vaccine against pertussis
- PCV₂ - 2 doses of pneumococcal conjugate vaccine
- PCV₃ - 3 doses of pneumococcal conjugate vaccine
- Polio₃ - 3 doses of vaccine against polio
- MMR₁ - 1 dose of vaccine against measles, mumps and rubella
- T₃ - 3 doses of vaccine against tetanus

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

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

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

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

Age	Children born before 1st July 2008	Children born on or after 1st July 2008
Birth	BCG	BCG
2 months	DTaP/Hib/IPV + MenC	DTaP/Hib/IPV/HepB + PCV
4 months	DTaP/Hib/IPV + MenC	DTaP/Hib/IPV/HepB + MenC
6 months	DTaP/Hib/IPV + MenC	DTaP/Hib/IPV/HepB + PCV + MenC
12 months	MMR + Hib	MMR + PCV
13 months	–	MenC + Hib

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

KEY:

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

Caveats to immunisation uptake rates at 12 months, 2007-2011

BCG uptake data were available for only 12 LHOs from 2007 to Quarter 2 2009; 9 LHOs in Quarter 3 2009; 6 LHOs in Quarter 4 2009; 9 LHOs in Quarters 1 and 2 2010; 11 LHOs in Quarter 3 2010; 15 LHOs in Quarter 4 2010, Quarter 1 2011 and Quarter 2 2011; and 18 LHOs in Quarters 3 and 4 2011. BCG data were available for the first time for Galway, Mayo and Roscommon in Quarters 3 and 4 2011; however, data was provided as a combined figure and was not available by individual LHO. Traditionally, BCG was given at age 10-12 years in Galway, Mayo and Roscommon.

The 2008 national MenC₃ figure is incomplete since MenC₃ data were not available in Quarter 3 2008 for 13 LHOs.

The 2009 data are incomplete since the following were unavailable: the Quarter 1 2009 D₃, T₃, P₃ and Polio₃ uptake data for those born on 31st March 2008 in 10 LHOs; the Quarter 3 2009 data for 10 LHOs; PCV₂ data for an additional 10 LHOs; the MenC₂ data for an additional 13 LHOs; and the Quarter 4 2009 data for 9 LHOs.

Since 1st September 2008, the new primary childhood immunisation schedule has been implemented. The changes to the primary schedule for children born on or after 1st July 2008 include introduction of a hepatitis B vaccine (as part of a 6 in 1 vaccine) given at 2, 4 and 6 months of age; introduction of pneumococcal conjugate vaccine given at 2, 6 and 12 months of age; and a change in timing of meningococcal serogroup C conjugate vaccination, now given at 4, 6 and 13 months of age. Therefore, the 2009 MenC₃ data are only for those born between 1st January 2008 and 30th June 2008 (i.e. Quarters 1 and 2 data only) and the HepB₃, MenC₂ and PCV₂ uptake data are only for those born between 1st July 2008 and 31st December 2008 (i.e. Quarters 3 and 4 2009 data only).

The 2010 data are incomplete since the following were unavailable: the Quarter 1 2010 data for 6 LHOs and the MenC₂ data for an additional 3 LHOs; the Quarter 2 2010 data for 6 LHOs; and the Quarter 4 2010 data for 3 LHOs.

Caveats to immunisation uptake rates at 24 months, 2007-2010

The 2007 national Hib_b figure is incomplete since the data for Quarter 1 2007 for 3 LHOs and the Quarter 3 2007 data for 2 LHOs were not available. The 2007 national Hib_b figure also includes data from 4 LHOs, which are an underestimate due to data extraction methods.

The 2008 national MenC₃ figure is incomplete since the MenC₃ data for 13 LHOs were not available in Quarter 3 2008. The 2008 national Hib_b figure is incomplete since the Quarter 2 2008 data for 4 LHOs and the Quarter 3 2008 data for 3 LHOs were not available.

The 2009 data are incomplete since the following were unavailable: the Quarter 1 2009 D₃, T₃, P₃ and Polio₃ data for those born on 31st March 2007 for 10 LHOs; the Quarter 2 2009 Hib_b uptake data for one LHO; and all the Quarter 4 2009 data for 3 LHOs, Hib_b data for one additional LHO and Hib_b data for those given a Hib_b dose as part of the 5 in 1 or 6 in 1 vaccine after 12 months of age for 4 LHOs.

The 2010 data for those at 24 months are incomplete since the following were unavailable: all the Quarter 1 2010 data for 6 LHOs and the Hib_b data for one additional LHO; the Quarter 2 2010 data for 2 LHOs; and the Quarter 4 2010 data for 3 LHOs.

As a new childhood immunisation schedule was introduced in 2008, for those born on or after 1st July 2008, the 2010 HepB₃ and PCV₃ data at 24 months are for those born between 1st July and 31st December 2008 (i.e. Quarters 3 and 4 2010 data only).

National Intellectual Disability Database: Health Research Board

The National Intellectual Disability Database (NIDD) is an administrative data source managed by the Health Research Board. The NIDD was established in 1995 to provide a comprehensive and accurate information base for decision-making in relation to the planning, funding and management of services for people with an intellectual disability. The following indicator draws on data from this source:

- The number of children under 18 years registered as having an intellectual disability.

Currently, there is approximately 95% coverage on the NIDD. Participation in this database is voluntary and only includes those in receipt of, or requiring, specialised disability services. Therefore, the NIDD may not include all people living in Ireland who have an intellectual disability.

National Perinatal Reporting System: Economic and Social Research Institute

The National Perinatal Reporting System (NPRS) is an administrative, clinical and demographic data source managed by the Economic and Social Research Institute (ESRI) on behalf of the Department of Health and the Health Service Executive. The NPRS provides details of national statistics on perinatal events (live births, still births and early neonatal deaths). The information collected includes data on pregnancy outcomes, with particular reference to perinatal mortality and important aspects of perinatal care. In addition, descriptive social and biological characteristics of mothers giving birth and their babies are recorded. The following indicators draw on data from this source:

- The percentage of babies born weighing less than 2,500 grams (live and still births).
- The percentage of infants who are breastfed (exclusive or combined) on discharge from hospital.
- The percentage of pregnant women attending for antenatal care in the first trimester of pregnancy.

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 births and mortality rates. The completion of this indicator at present, however, may not provide an accurate estimation of this information. Although 76.7% of total births were recorded as receiving combined antenatal care in 2011, the date of the first visit to the doctor was recorded as 'not known' for 33.7% 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 Physical and Sensory Disability Database: Health Research Board

The National Physical and Sensory Disability Database (NPSDD) is an administrative data source managed by the Health Research Board. The NPSDD was established in 2000 to provide a comprehensive and accurate information base for decision-making in relation to the planning, funding and management of services for people with a physical and/or sensory disability. The following indicator draws on data from the NPSDD:

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

Currently, there is approximately 65% coverage on the NPSDD. Participation in this database is voluntary and only includes those in receipt of, or requiring, specialised disability services who are aged under 66 years. Therefore, the NPSDD may not include all people living in Ireland who have a physical and/or sensory disability.

National Psychiatric In-Patient Reporting System: Health Research Board

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

- The number of admissions of children to psychiatric hospitals.

National Registry of Deliberate Self-Harm: National Suicide Research Foundation

Data for the National Registry of Deliberate Self-Harm are recorded by data registration officers of the National Suicide Research Foundation who register deliberate self-harm presentations to all of the country's hospital emergency departments. They follow standard operating procedures and apply standardised inclusion/exclusion criteria in line with an internationally recognised definition of deliberate self-harm. The Registry's Annual Reports are available at www.nsrif.ie.

Some individuals make more than one deliberate self-harm presentation to hospital. But the figures presented relate to the number of individuals annually rather than presentations.

The Census 2011 population data were used in the calculation of the rate for that year. For the years 2007-2010, the population was estimated based on the change in population between the Censuses of 2006 and 2011.

Outturn of Monthly Activity Data Returns and Quarterly Performance Indicator Returns: Health Service Executive

The Outturn of Monthly Activity Data Returns and Quarterly Performance Indicator Returns are collated by the Health Service Executive (HSE). The following indicators draw on data from these sources:

- The percentage of newborn babies visited by a Public Health Nurse within 48 hours of discharge from hospital for the first time.
- The percentage of children reaching 10 months who have had their 7-9 Month Developmental Check on time (i.e. before reaching 10 months of age).

The 2011 data relate to the actual 12-month time period of December 2010 to November 2011.

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 online register of patients on in-patient and day-case surgical and medical waiting lists in Ireland has been operational since September 2005 and now includes information from 42 hospitals (*see below*). Not all of the 42 hospitals on the PTR treat paediatric patients. The following indicator draws on data from the PTR:

- The number of children on hospital waiting lists.

The PTR only includes children who have been assessed at an out-patient clinic as in need of a surgical or medical procedure; it does not include children who are waiting to be seen at an out-patient clinic.

Hospitals contributing to the PTR:

Bantry General Hospital; Beaumont Hospital, Dublin; Cappagh Orthopaedic Hospital; Cavan-Monaghan Hospital Group; Children's University Hospital, Temple Street, Dublin; Connolly Hospital, Blanchardstown; Cork University Hospital; Galway University Hospital; Kerry General Hospital; Letterkenny General Hospital; Lourdes Orthopaedic Hospital, Kilcreene; Louth County Hospital; Mallow General Hospital; Mater Hospital, Dublin; Mayo General Hospital; Mercy

University Hospital, Cork; Midlands Regional Hospital, Mullingar; Midlands Regional Hospital, Portlaoise; Midlands Regional Hospital, Tullamore; Mid-Western Regional Hospital, Croom; Mid-Western Regional Hospital, Doordoyle; Mid-Western Regional Hospital, Ennis; Mid-Western Regional Hospital, Nenagh; Naas General Hospital; Our Lady of Lourdes Hospital, Drogheda; Our Lady's Hospital for Sick Children, Crumlin; Our Lady's Hospital, Navan; Portiuncula Hospital, Galway; Roscommon County Hospital; Royal Victoria Eye and Ear Hospital, Dublin; Sligo General Hospital; South Infirmary - Victoria Hospital, Cork; South Tipperary General Hospital; St. Colmcille's Hospital, Loughlinstown; St. James's Hospital, Dublin; St. John's Hospital, Limerick; St. Luke's Hospital, Kilkenny; St. Michael's Hospital, Dun Laoghaire; St. Vincent's University Hospital, Dublin; Tallaght Hospital (AMNCH), Dublin; Waterford Regional Hospital; Wexford General Hospital.

Primary and Post-Primary Pupil Absence Reports: National Educational Welfare Board

National data on school attendance are drawn from school attendance reports, which are prepared by individual schools at primary and post-primary level and collated by the National Educational Welfare Board (NEWB). The following indicator draws on data from this source:

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

For the 2009/10 school year, 97.1% of primary schools and 95.8% of post-primary schools returned Pupil Absence Reports to the NEWB.

Data in Tables 47 and 50 use student-level data. In contrast, for Tables 48 and 51, the school is the unit of analysis.

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

The Programme of International Student Assessment (PISA) Survey is conducted in Ireland by the Educational Research Centre on a triennial basis. This comprises self-report, self-completion questionnaires completed by children in schools. The following indicators draw on data from this source:

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

- The percentage of children aged 15 who report that their parents eat a main meal with them around a table more than once a week.
- The percentage of children aged 15 who report that reading is one of their favourite hobbies.

These data may be subject to bias in relation to self-presentation and memory. In addition, they may suffer from social desirability bias.

The PISA Survey also includes an assessment of 'literacy'. In 2009, reading was a major assessment domain in PISA, meaning that it was comprehensively assessed, using a large number of test items. Mathematical literacy and science literacy were minor assessment domains in 2009. The following indicators draw on data from this source:

- Mean score for children aged 15 based on OECD-PISA Reading Literacy Scale.
- Mean score for children aged 15 based on OECD-PISA Mathematics Literacy Scale.
- Mean score for children aged 15 based on OECD-PISA Combined Scientific Literacy Scale.

The figures referred to as the OECD 'mean score' refer to the OECD 'country average', i.e. it is the average of the means of all the OECD countries and not of all the OECD students pooled together.

Children are identified as Traveller children if they answer 'Yes' to the question '*Are you a member of the Traveller community?*' In 2009, 2% of 15-year-olds in PISA reported that they were members of the Traveller community.

Children are identified as immigrants if the answer is not 'Republic of Ireland' to the question '*In what country were you and your parents born?*' The percentage of immigrant children in PISA increased from 2.3% in 2000 to 8.3% in 2009. Some immigrant children in Ireland speak English or Irish as their first language.

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

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

- The number of children aged 10-17 referred/referrals to Garda Juvenile Diversion Programme.

Review of Adequacy Reports: Health Service Executive

The Review of Adequacy Reports are based on the Childcare Interim Dataset, which is an administrative data source managed by the Health Service Executive (HSE). The following indicators draw on data from this source:

- The number of child welfare and protection reports to the HSE.
- The number of children in the care of the HSE.

Some caution should be adopted when comparing across HSE Regions because of differences in the way in which cases are recorded. Work is currently taking place on the development of consistent approaches across the HSE Regions and the HSE is currently in the process of procuring and implementing a comprehensive ICT system to meet the operational and management information requirements for Children and Family Services.

Triennial Assessment of Housing Needs: Department of the Environment, Community and Local Government

The Triennial Assessment of Housing Needs is conducted by the Department of the Environment, Community and Local Government on a triennial basis. The following indicator draws on data from this source:

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

Data represent net need for social housing, meaning households that have been assessed as being in need of either Local Authority or voluntary housing. The terminology used to describe a Local Authority's housing needs varies. These figures are net of duplicate applications (i.e. applicants who have applied to more than one Local Authority).

The methodology used to collect the 2011 data differs substantially from that used in previous years and therefore the 2008 and 2011 figures are not strictly comparable. In preparing the 2008 assessment, authorities investigated their waiting lists prior to the 31st March deadline to confirm that those on the list were still seeking and in need of social housing. Authorities also contacted voluntary groups regarding local housing needs. The 2011 assessment was based on a data extract of those approved for social housing support on 31st March 2011. This might explain some of the increase in need witnessed between 2008 and 2011, because the figures would include households that may no longer be in housing need but have not been taken off the list.

Vital Statistics: Central Statistics Office

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

- The number of deaths of children.
- The number of births to mothers aged 10-17.
- The number of suicides by children aged 10-17.

Deaths are coded according to the 9th Revision of the International Statistical Classification of Diseases, Injuries and Causes of Death. Still born babies are excluded from infant mortality figures, which refer to deaths of children aged less than one year. The mortality figures refer to crude death rates and are classified by year of registration.

Births to mothers aged 10-17 years include a small number of births to mothers aged 10-14 years. The denominator used to calculate the birth rate of mothers aged 10-17 is based on the population age group 15-17 years (rather than 10-17 years). Births relate to registered live births and exclude still born babies.

Suicides by children aged 10-17 years include a small number of suicides by children aged 10-14 years. The denominator used to calculate the suicide rate of children aged 10-17 is based on the population age group 15-17 years (rather than 10-17 years).

WHO European Childhood Obesity Surveillance Initiative: National Nutrition Surveillance Centre

The WHO European Childhood Obesity Surveillance Initiative is conducted in Ireland by the National Nutrition Surveillance Centre. This survey collects the weight, height and waist circumference of primary school children aged 7.0-7.9 years. The following indicator draws on data from this source:

- The percentage of children aged 7 in BMI categories: normal, overweight and obese.

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

Appendix 2: NUTS Classifications

NUTS is an acronym for the EU Nomenclature of Territorial Units for Statistics. This classification was legally established by EU Regulation No. 1059/2003 on 29th May 2003. The 8 Regional Authorities for Ireland (NUTS 3 regions), which were established under the Local Government Act 1991, are set out below:

NUTS 2 Regions	Regional Authorities (NUTS 3 Regions)	Constituent counties (NUTS 4 Regions)	Type of area
Border, Midland and Western	Border	Cavan Donegal Leitrim Louth Monaghan Sligo	Administrative county Administrative county Administrative county Administrative county Administrative county
	Midlands	Laois Longford Offaly Westmeath	Administrative county Administrative county Administrative county Administrative county
	West	Galway Galway Mayo Roscommon	County Borough Administrative county Administrative county Administrative county
Southern and Eastern	Dublin	Dublin Dun Laoghaire/Rathdown Fingal South Dublin	County Borough Administrative county Administrative county Administrative county
	Mid-East	Kildare Meath Wicklow	Administrative county Administrative county Administrative county
	Mid-West	Clare Limerick Limerick Tipperary North Riding	Administrative county County Borough Administrative county Administrative county
	South-East	Carlow Kilkenny Tipperary South Riding Waterford Waterford Wexford	Administrative county Administrative county Administrative county County Borough Administrative county Administrative county
	South-West	Cork Cork Kerry	County Borough Administrative county Administrative county

INDEX

A

absenteeism from school, 69-74, 226
 accidents and injuries, 99-101
 See also hospitalisation of children
 alcohol use
 drunkenness, 128-131
 never drinking, 132-135
 antenatal care
 attendance in first trimester of pregnancy,
 190-192, 223
 National Perinatal Reporting System (NPRS),
 223
 asylum, separated children seeking, 3
 Australian Classification of Health Interventions
 (ICD-10-AM), 219

B

birth rate among girls (aged 10-17), 140-142, 229
 birth weight, 90-92, 223
 body mass index (BMI) weight categories, 102-103,
 229
 breakfast, eating, 161-164
 breastfeeding, 93-95, 223
 bullying among children, 59-62

C

cannabis use, 136-139
 capitation criteria for early childhood care and
 education (ECCE) services, 66-68, 215-216
 care, children and young people in, 205-207, 228
 carers, children as, 35-36
 Census of the Population
 definitions of indicators, 212-213
 Centralised Information System for Infectious
 Diseases, WHO (CISID), 214
 Central Statistics Office (CSO), 212, 216, 218, 229
 'child', definition of (CSO), 212
 child welfare and protection
 Childcare Interim Dataset, 228
 reports to HSE, 110-112, 228
 types of abuse, 110
 welfare concerns, 110
 child well-being indicators. *See* National Set of Child
 Well-being Indicators
 Childcare Interim Dataset, 228

childcare, non-parental, 3
 childcare/early education, qualifications for, 215-216
 Children's Lives, Inventory of Data Sources on
 (DCYA), 212
 chronic illness. *See* disability
 cigarettes
 never smoking, 124-127
 smoking every week, 120-123
 community characteristics
 children feeling safe in area where they live,
 180-182
 good places in area to spend free time, 183-185
 country comparisons. *See* individual indicators
 county comparisons. *See* individual indicators
 CSO. *See* Central Statistics Office

D

data sources for report, 2-3, 212-229
 death rate. *See* mortality
 decision-making, participation of children in, 114-117
 Delivering Equality of Opportunity in Schools
 (DEIS), 69-70, 72-73, 76
 Department of Children and Youth Affairs (DCYA)
 ECCE database, 215
 Inventory of Data Sources on Children's Lives,
 212
 Department of Education and Skills, 214
 Department of Health
 Hospital In-Patient Enquiry (HIPE), 219-220
 National Perinatal Reporting System (NPRS),
 223
 Department of the Environment, Community and
 Local Government, 228
 deprivation indicators of consistent poverty, 176, 217
 developmental screening, 195-196, 225
 disability
 child population with a disability, 33-34
 definition of, 213 (CSO), 219 (HBSC)
 intellectual disability, 104-106
 National Intellectual Disability Database (NIDD),
 223
 National Physical and Sensory Disability
 Database (NPSDD), 224
 physical and/or sensory disability, 107-109
 See also individual indicators
 drinking. *See* alcohol use; soft drinks
 drug use. *See* cannabis use

E

- early childhood care and education (ECCE), quality of
 - capitation criteria for ECCE services, 66-68, 215-216
 - ECCE Database, 215
 - Free Pre-School Year (ECCE) Scheme, 66-68, 215
- eating habits. *See* breakfast, eating
- ECCE. *See* early childhood care and education
- Economic and Social Research Institute (ESRI), 219, 223
- education
 - definition of 'parental education level' (CSO), 212-213
 - EU-27 public expenditure on education, 170-171
 - literacy/numeracy levels, 79-84, 227
 - parental education level, 22-25, 212-213
 - public expenditure on education in Ireland, 170-172, 214-215
 - school attendance, 69-74, 226
 - scientific literacy levels, 85-87, 227
 - Statistics Database (Department of Education and Skills), 214-215
- Educational Research Centre, 226
- environment
 - children feeling safe in local area, 180-182
 - recreation places in local area, 183-185
- equivalence scale (household disposable income), 173, 176, 216
- EU-27 Member States, comparisons with. *See* individual indicators
- EU Nomenclature of Territorial Units for Statistics. *See* NUTS
- EU-SILC. *See* Income and Living Conditions, EU Survey on
- exercise. *See* physical activity

F

- family
 - children's relationships with parents, 38-51
 - eating meals together, 50-51
 - foster care, 205-206
 - lone-parent households, 19-21
 - structure of, 19-21
 - talking together, 46-47
- father and child relationship, 42-45

- foreign national children
 - definition of (CSO), 213
 - population in Ireland, 29-32
 - See also* individual indicators
- foster family placements, 205-206
- Free Pre-School Year (ECCE) Scheme, 66-68, 215
- friendships among children, 52-55

G

- Garda Juvenile Diversion Programme
 - referrals to, 186-189
 - Report of the Committee Appointed to Monitor the Effectiveness of the Diversion Programme, 227
- Garda Síochána, An, 227
- Gross Domestic Product (GDP), 170, 214-215
- Gross National Income (GNI), 170

H

- happiness, self-reported, 150-152
 - See also* self-esteem
- HBSC surveys. *See* Health Behaviour in School-aged Children Survey
- health
 - accessibility of basic services for children, 204
 - alcohol use, 128-135
 - antenatal care, 190-192, 223
 - birth weight, 90-92, 223
 - breastfeeding, 93-95, 223
 - cannabis use, 136-139
 - cigarette smoking, 120-127
 - child welfare and protection, 110-112
 - children on hospital waiting lists, 204, 225
 - disability, 33-34, 104-109
 - hospitalisation of children, 225-226
 - immunisation uptake rates, 197-203, 220-222
 - mental health, 208-210, 224
 - overweight and obese children, 102-103, 229
 - sexual health and behaviour, 140-146
 - See also* hospitalisation of children
- Health Behaviour in School-aged Children (HBSC) Survey
 - indicators in, 217-219
- Health Promotion Research Centre, 217
- Health Protection Surveillance Centre, 220
- Health Research Board, 223, 224

Health Service Executive (HSE)
 7-9 Month Developmental Check, 195-196, 225
 child welfare and protection, 110-112, 228
 Childcare Interim Dataset, 228
 children and young people in care, 205-207, 228
 Health Protection Surveillance Centre (HPSC), 220
 Hospital In-Patient Enquiry (HIPE), 219-220
 Local Health Offices and immunisation uptake data, 200-202, 221-222
 National Perinatal Reporting System (NPRS), 223
 Outturn of Monthly Activity Data Returns, 225
 Quarterly Performance Indicator Returns, 225
 Review of Adequacy Reports, 228
 health services, accessibility for children, 204
 hobbies. *See* reading as a leisure activity
 Hospital In-Patient Enquiry (HIPE), 219-220
 hospitalisation of children
 accidents and injuries, 99-101
 deliberate self-harm, 155-156
 discharges from hospital, 96-101, 219-220
 principal diagnosis (main causes), 96-97, 99-101
 psychiatric hospital admissions, 208-210, 224
 waiting lists for children, 204, 225
 hospitals on Patient Treatment Register (PTR), 225-226
 housing, social
 availability for families with children, 178-179
 Triennial Assessment of Housing Needs, 228
 HSE Regions comparisons. *See* individual indicators

I

ICD. *See* International Classification of Diseases, WHO
 immigrant children
 definition of, 219 (HBSC), 227 (PISA)
See also individual indicators
 immunisation for children
 childhood immunisation schedule (2008), 197, 220-221
 HSE Local Health Offices' uptake data, 200-202, 221-222
 uptake rates at 12 and 24 months, 197-203, 220-222
 vaccines, recommended doses of, 197, 214, 220
 'income', national and EU definitions of, 216
 Income and Living Conditions, EU Survey on (EU-SILC), 216-217

indicators of children's well-being. *See* National Set of Child Well-being Indicators
 infectious diseases. *See* Centralised Information System for Infectious Diseases, WHO (CISID)
 intellectual disability, 104-106, 223
 International Classification of Diseases, WHO (ICD)
 ICD-9-CM, 219
 ICD-10, 224
 ICD-10-AM, 219
 international comparisons. *See* individual indicators
 International Obesity Taskforce Standards, 102
 International Statistical Classification of Diseases, Injuries and Causes of Death, 9th Revision of, 229

K

key findings of 2012 *State of the Nation's Children* report, 4-8

L

Leaving Certificate retention rates, 75-78, 214
 leisure activity. *See* reading; physical activity
 literacy
 in mathematics, 82-84, 227
 in reading, 79-81, 227
 in science, 85-87, 227
 Local Authority housing. *See* housing, social
 Local Health Offices (HSE) comparisons.
See individual indicators
 lone-parent households. *See* family

M

mathematics, children's literacy in, 82-84, 227
 mental health
 National Psychiatric In-Patient Reporting System (NPIRS), 224
 psychiatric hospital admissions, 208-210
 reasons for admissions, 208-209
See also happiness; self-esteem; suicide among youth
 Middle Childhood Study (children aged 9), 218
 mortality
 among children, 14-18, 229
 among infants (under 1 year), 14, 15, 16-17, 229
 causes of death, 15-16, 229
 mother and child relationship, 38-41

N

- National Educational Welfare Board (NEWB), 226
- National Framework of Qualifications of Ireland (NFQ), 215, 216
- National Intellectual Disability Database (NIDD), 223
- National Nutrition Surveillance Centre, 229
- National Perinatal Reporting System (NPRS), 223
- National Physical and Sensory Disability Database (NPSDD), 224
- National Psychiatric In-Patient Reporting System (NPIRS), 224
- National Registry of Deliberate Self-Harm, 224
- National Set of Child Well-being Indicators
 - data sources for, 2-3, 212-229
 - definitions of indicators, 212-229
 - discontinued indicators, 3
 - new indicators (2012), 3
 - replacement indicators, 3
- National Suicide Research Foundation, 224
- National Treatment Purchase Fund, 225
- nationalities of foreign national children, 32
- nutrition
 - breakfast consumption, 161-164
 - soft drinks (containing sugar) consumption, 165-168
- NUTS classifications, 219, 230
- NUTS Regions comparisons. *See* individual indicators

O

- obese children, 102-103, 229
- Obesity Taskforce Standards, International, 102
- OECD-PISA Literacy Scales
 - combined scientific, 85-87, 227
 - mathematics, 82-84, 227
 - reading, 79-81, 227
- offences by youth, types of, 186-187
- outcomes for children
 - data sources, 2
 - education, 65-87
 - health, 89-112
 - nutritional, 102-103, 149-52
 - social, emotional and behavioural, 113-168
- Outturn of Monthly Activity Data Returns and Quarterly Performance Indicator Returns (HSE), 225
- overweight children, 102-103, 229

P

- parents
 - children's relationships with, 38-51
 - definition of 'parental education level' (CSO), 212-213
 - early childhood care and education, 66-68, 215-216
 - eating meals with their children, 50-51
 - education level of mothers, 22-25, 212-213
 - involvement in children's schooling, 48-49
 - lone-parent families, 19-21
 - relationship with fathers, 42-45
 - relationship with mothers, 38-41
 - talking with their children, 46-47
- participation of children in school decision-making, 114-117
- Patient Treatment Register (PTR), 225-226
- peers, children's relationships with, 52-55, 59-62
- perinatal events, 223
- pets and animals in family, 56-58
- physical activity, time spent in, 157-160
- physical disability, 107-109, 224
- PISA surveys. *See* Programme of International Student Assessment Survey
- Population Estimates (CSO), 212
- population of children
 - children as carers, 35-36
 - children with a disability, 33-34
 - data sources for, 212
 - foreign national children, 29-32
 - total in Ireland, 10-13
 - Traveller children, 26-28
- post-primary school attendance, 72-74
- poverty
 - at risk of poverty, 173-175
 - consistent poverty, 176-177
 - data source for, 216-217
 - definitions of 'income', 216
 - deprivation indicators, 217
 - threshold income, 217
- pregnancy
 - antenatal care during trimesters, 190-192, 223
 - outcomes, 223
- primary school attendance, 69-71
- Programme of International Student Assessment (PISA) Survey
 - assessment domains in, 80, 83, 86, 227
 - indicators in, 226-227

psychiatric hospitals, admissions of children, 208-210, 224
 public expenditure on education
 Ireland and EU-27, 170-172, 214-215
 Public Health Nurse, visit to newborn babies within 48 hours, 193-194, 225
 Pupil Absence Reports, Primary and Post-Primary, 226

R

reading
 as a leisure activity, 118-119, 227
 children's literacy in, 79-81, 227
 relationships, children's
 with parents and peers, 2, 37-62
 data sources for, 217-218, 226-227

S

School Support Programme (SSP), 69-70
 schools
 attendance at, 69-74, 226
 bullying in, 59-62
 DEIS schools, 69-70, 72-73, 76
 Free Pre-School Year (ECCE) Scheme, 66-68, 215
 national school leaving. *See* retention rates
 parental involvement in children's schooling, 48-49
 participation of students in decision-making, 114-117
 Pupil Absence Reports (primary and post-primary), 226
 retention rates, 75-78
 School Support Programme (SSP), 69-70
 types of secondary schools, 72-73, 76
See also early childhood care and education
 school attendance reports, 226
 science, children's literacy in, 85-87, 227
 self-esteem, 147-149
See also happiness, self-reported
 self-harm, deliberate, 155-156, 224-225
 sensory disability, 104-106, 224
 sexual health and behaviour
 teen births, 140-142
 sexual activity, 143-146

smoking
 cannabis, 136-139
 cigarettes (weekly), 120-123
 cigarettes (never), 124-127
 social class groups, definition of (CSO), 218
 socio-demographics of children in Ireland, 9-36, 212-213, 229
 soft drinks that contain sugar, consumption of, 165-168
 still born babies, 90-92, 223, 229
 suicide among youth, 153-154, 229
 supports for children, formal and informal, 2-3, 169-210

T

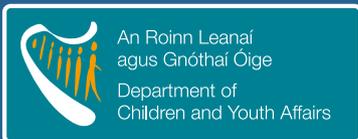
teenage mothers, births to, 140-142, 229
 Traveller community
 children in, 26-28
 definition of 'Traveller', 213 (CSO), 219 (HBSC), 227 (PISA)
See also individual indicators
 Triennial Assessment of Housing Needs, 228

V

vaccination. *See* immunisation for children
 Vital Statistics (CSO), 229

W

waiting lists
 for hospitalisation of children, 204, 225-226
 for Local Authority social housing, 228
 hospitals on Patient Treatment Register (PTR), 225-226
 weight categories. *See* body mass index (BMI)
 well-being. *See* National Set of Child Well-being Indicators
 World Health Organization (WHO)
 Centralised Information System for Infectious Diseases (CISID), 214
 European Childhood Obesity Surveillance Initiative, 229
 International Classification of Diseases (ICD), 219, 224



Department of Children and Youth Affairs
43-49 Mespil Road
Dublin 4

Tel: +353 (0)1 647 3000
Fax: +353 (0)1 667 0826
E-mail: dcyaresearch@dcya.gov.ie
Web: www.dcy.a.ie

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