

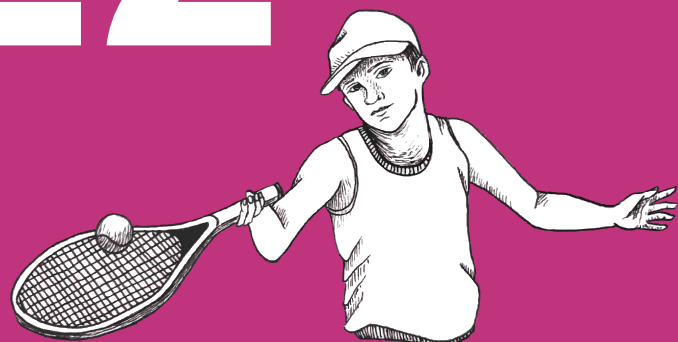
The Irish Health Behaviour in School-aged Children (HBSC) Study 2022



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HEALTH BEHAVIOUR IN
SCHOOL-AGED CHILDREN
WORLD HEALTH ORGANIZATION
COLLABORATIVE CROSS-NATIONAL STUDY



hbsc Ireland 2022



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The Irish Health Behaviour in School-aged Children (HBSC) Study 2022

April 2024

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Health Behaviour in School-aged Children: a World Health Organization (WHO)
collaborative cross-national study

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Introduction

This report presents data from the Health Behaviour in School-aged Children (HBSC) survey carried out in the Republic of Ireland in 2022. This is the seventh time that these data have been collected from young people across the Republic of Ireland; previous surveys were conducted in 2018, 2014, 2010, 2006, 2002 and 1998 (www.universityofgalway.ie/hbsc).

HBSC is a cross-sectional research study conducted in collaboration with the World Health Organization (WHO) Regional Office for Europe. The HBSC international survey runs on a four year academic cycle and in 2021/2022 there were 51 participating countries and regions (www.hbsc.org). The overall study aims to gain new insight into and increase our understanding of young people's health and wellbeing, health behaviours and their social context. As well as serving a monitoring and a knowledge-generating function, one of the key objectives of HBSC has been to inform policy and practice.

Cross-nationally, HBSC collects information on key indicators of health behaviours and outcomes as well as the context of health for young people. HBSC is a school-based survey with data collected through self-completion questionnaires administered by teachers in the classroom. The international HBSC survey instrument is a standard questionnaire developed by the international research network.

The areas of interest are chosen in collaboration with the WHO and are designed to help assist developments at a national and international level in relation to youth health. The topics identified for inclusion in this first report from the 2022 Irish survey are similar to those included in the 2018 national HBSC report. They were identified by the HBSC Advisory Board and are drawn from key national strategy documents including the Healthy Ireland Framework¹ and the Healthy Ireland Strategic Action Plan². Young people were also involved in prioritising topics for inclusion in the report. Topics include general health, smoking, use of alcohol and other substances, food and dietary behaviours, exercise and physical activity, self-care, injuries, bullying (including traditional and cyberbullying), and sexual health behaviours. New topics included in this report are loneliness, sun safety behaviours, menstrual health and period poverty, and the impact of the COVID-19 pandemic measures. All results are presented by gender, age and social class groups. Statistically significant differences across these groups are highlighted in this report.

The HBSC Ireland Study was funded by the Department of Health. The survey and analyses were carried out by the HBSC Ireland team at the Health Promotion Research Centre, University of Galway.

¹ Department of Health. (2013). *Healthy Ireland. A framework for improved health and wellbeing 2013-2025*. Dublin: Government of Ireland. <https://www.gov.ie/pdf/?file=https://assets.gov.ie/7555/62842eef4b13413494b13340fff9077d.pdf>

² Department of Health. (2021). *Healthy Ireland Strategic Action Plan 2021-2025*. Dublin: Government of Ireland. <https://www.gov.ie/pdf/?file=https://assets.gov.ie/134507/057dfa34-491f-4086-b16a-912cf1e3ad06.pdf>

Executive Summary

The Irish Health Behaviour in School-aged Children (HBSC) Study 2022 is a survey of school children in Ireland and is part of an international collaboration with countries across Europe and North America. In the 2022 survey, a total of 9,071 children aged from 9 to 18 years old from a representative sample of 191 primary and post-primary schools across the country participated. Children filled in a self-completion questionnaire on a wide range of issues including health behaviours, health outcomes and the contexts of health. The HBSC Study takes place every four years, and this is the seventh time that Ireland has taken part. This report is the first of a series of research outputs to present the findings from the Health Promotion Research Centre, University of Galway.

This report presents data on general health and wellbeing, substance use, food and dietary behaviours, physical activity, self-care, injuries, fighting and bullying, and sexual behaviour. New items in this report include loneliness, sun safety behaviours, menstrual health and period poverty, and the impact of COVID-19 and its associated measures. We have divided the participating children into sub-groups, by gender, age group and social class. Patterns in the findings across these sub-groups are described, and we compare the 2022 results with those collected from children in 2018. The report is divided into two sections, the Main HBSC Study that includes children from 5th class in primary schools up to 5th year in post-primary schools and the Middle Childhood Study that includes children in 3rd and 4th class in primary schools.

It is noteworthy that the findings presented in this report are from the first HBSC Ireland Study conducted since the start of the COVID-19 pandemic. The data were collected during a time when schools had recently reopened and young people were readjusting following long periods of school closures and remote learning. The findings presented in this report should be interpreted with this specific historical timeframe in mind, considering the impacts of recent COVID-19 pandemic measures on young people's lives.

The Main HBSC Study

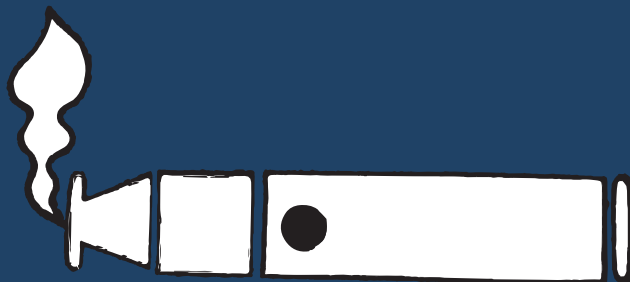
The good news is that there are decreases in both tobacco and cannabis use in the past 12 months, improvements across fruit and vegetable consumption and fewer children report being in a physical fight than in 2018. However, the number of children who report not having breakfast has increased. In addition, there is an increase in the percentage of 12 to 17 year olds who report using electronic cigarettes in the last 30 days. There is an overall decrease in general health and wellbeing, and this is particularly evident among older girls. There is also an increase in the percentage of children who report being cyberbullied, as well as an increase among those who report cyberbullying others since 2018. Overall, 10% of girls who have begun to menstruate report experiencing period poverty and 60% of girls report missing school as a result of period symptoms. There is a decrease among 15 to 17 year olds who report using a condom and an increase in those who report using no contraception at last sexual intercourse.

The Middle Childhood Study

The good news is that there is a decrease in the percentage of 3rd and 4th class children who report physical inactivity, soft drink consumption and bullying others compared to 2018. Smoking rates remain very low and are unchanged from 2018. There is an increase in the number of children reporting sweet consumption and going to school or bed hungry. Compared to 2018, there are no changes in the percentage who report always wearing a seatbelt and brushing their teeth more than once a day.



Overview of Findings





Overview of Findings: Main Study

The findings below are based on children aged 10 to 17, except where stated.

Table 1: General Health and Wellbeing

Children were asked a number of questions concerning their lives and perceived health.

Excellent health	Overall, 25% of children report that their health is excellent (29% in 2018). Boys, younger children and children from the highest social class group are more likely to report that their health is excellent.
Happiness	Overall, 28% of children report feeling very happy with their life at present (42% in 2018). Boys, younger children and children from the highest social class group are more likely to report feeling very happy with their lives.
Life satisfaction	Overall, 62% of children report high life satisfaction (73% in 2018). Boys, younger children and children from the highest social class group are more likely to report high life satisfaction.
Loneliness <i>(New in 2022)</i>	Overall, 20% of children report feeling lonely most of the time or always in the past 12 months. Girls, older children and children from lower social class groups are more likely to report feeling lonely most of the time or always in the past 12 months.
Love of family	Overall, 82% of 10 to 14 year old children report that they always love their family (84% in 2018). Younger children are more likely to report that they always love their family. There are no significant differences across gender or social class groups.

Table 2: Mental Health

Young people completed the WHO-5 Well-Being Index.

WHO-5 Well-Being Index	The WHO-5 Well-Being Index is a five item positively worded scale which provides a measure of emotional functioning. Scores are summed and transformed to create a scale ranging from 0 to 100. Scores of 50 and below on the WHO-5 indicate low mood and those with a score of 28 and below are classified as at risk of depression. Overall, 36% of children are classified as having low mood or at risk of depression (38% in 2018). Girls and older children are more likely to be classified as having low mood or at risk of depression. There is no significant difference across social class groups.
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Table 3: Smoking

Children were asked about their smoking behaviours, including use of electronic cigarettes.

Ever smoked cigarettes	Overall, 9% of children report that they have ever smoked cigarettes (12% in 2018). Girls and older children are more likely to report that they have ever smoked cigarettes. There is no significant difference across social class groups.
Current tobacco smoking status	Overall, 5% of children report that they are current tobacco smokers (6% in 2018). Older children are more likely to report that they are current tobacco smokers. There are no significant differences across gender or social class groups.
Ever used electronic cigarettes	Overall, 18% of 10 to 17 year old children report that they have ever used electronic cigarettes.* In 2022, 19% of 12 to 17 year olds report that they have ever used electronic cigarettes (22% in 2018). Girls and older children are more likely to report that they have ever used electronic cigarettes. There is no significant difference across social class groups.
Used electronic cigarettes in the last 30 days	Overall, 13% of 10 to 17 year old children report that they have used electronic cigarettes in the last 30 days.* In 2022, 13% of 12 to 17 year olds report that they have used electronic cigarettes in the last 30 days (9% in 2018). Girls and older children are more likely to report that they have used electronic cigarettes in the last 30 days. There is no significant difference across social class groups.

*Data only collected for 12 to 17 year olds in 2018.

Table 4: Alcohol Consumption and Drunkenness

Young people were asked questions about their alcohol consumption as well as having so much alcohol that they were 'really drunk'.

Never drinking	Overall, 69% of children report that they have never had an alcoholic drink (66% in 2018). Boys and younger children are more likely to report that they have never had an alcoholic drink. There is no significant difference across social class groups.
Had an alcoholic drink in the last 30 days	Overall, 19% of children report that they have had an alcoholic drink in the last 30 days (19% in 2018). Girls and older children are more likely to report that they have had an alcoholic drink in the last 30 days. There is no significant difference across social class groups.
Ever been 'really drunk'	Overall, 18% of children report ever having been 'really drunk' (19% in 2018). Girls and older children are more likely to report ever having been 'really drunk'. There is no significant difference across social class groups.
Been 'really drunk' in the last 30 days	Overall, 9% of children report having been 'really drunk' in the last 30 days (8% in 2018). Girls and older children are more likely to report having been 'really drunk' in the last 30 days. There is no significant difference across social class groups.

Table 5: Cannabis Use

Young people were asked questions about their use of cannabis.

Cannabis use in the last 12 months	Overall, 6% of children report using cannabis in the last 12 months (8% in 2018). Older children are more likely to report using cannabis in the last 12 months. There are no significant differences across gender or social class groups.
Cannabis use in the last 30 days	Overall, 4% of children report using cannabis in the last 30 days (4% in 2018). Boys and older children are more likely to report using cannabis in the last 30 days. There is no significant difference across social class groups.

Table 6: Food and Dietary Behaviours

Children were asked a number of questions regarding their dietary habits.

Fruit	Overall, 25% of children report that they consume fruit more than once a day (22% in 2018). Children from the highest social class group are more likely to report that they consume fruit more than once a day. There are no significant differences across gender or age groups.
Vegetables	Overall, 23% of children report that they consume vegetables more than once a day (21% in 2018). Children from the highest social class group are more likely to report that they consume vegetables more than once a day. There are no significant differences across gender or age groups.
Sweets	Overall, 24% of children report eating sweets once a day or more (22% in 2018). Girls and older children are more likely to report eating sweets once a day or more. There is no significant difference across social class groups.
Soft drinks	Overall, 7% of children report drinking soft drinks daily or more (7% in 2018). Older children and children from lower social class groups are more likely to report drinking soft drinks daily or more. There is no significant difference by gender.
Not having breakfast	Overall, 19% of children report never having breakfast on weekdays (13% in 2018). Girls, older children and children from lower social class groups are more likely to report never having breakfast on weekdays.
Going to school or bed hungry	Overall, 18% of children report ever going to school or bed hungry because there was not enough food at home (19% in 2018). Boys, younger children and children from lower social class groups are more likely to report ever going to school or bed hungry because there was not enough food at home.
Dieting or other weight loss methods	Overall, 13% of children report dieting or doing something else to lose weight (14% in 2018). Girls and older children are more likely to report trying to lose weight. There is no significant difference across social class groups.

Table 7: Exercise and Physical Activity

Children were asked about their participation in exercise and physical activity.

Vigorous exercise four or more times per week	Overall, 50% of children report participating in vigorous exercise four or more times per week (49% in 2018). Boys, younger children and children from higher social class groups are more likely to report participating in vigorous exercise four or more times per week.
Physical inactivity	Overall, 10% of children report participating in vigorous exercise less than weekly (11% in 2018). Girls, older children and children from lower social class groups are more likely to report participating in vigorous exercise less than weekly.
Physically active on seven days in the last week	Overall, 24% of children report being physically active on seven days in the last week (22% in 2018). Boys and younger children are more likely to report being physically active on seven days in the last week. There is no significant difference across social class groups.

Table 8: Self-Care

Children were asked questions regarding toothbrushing and seatbelt use.

Toothbrushing	Overall, 73% of children report brushing their teeth more than once a day (70% in 2018). Girls, older children and children from higher social class groups are more likely to report brushing their teeth more than once a day.
Seatbelt use	Overall, 81% of children report always wearing a seatbelt when in a car (80% in 2018). Younger children and children from higher social class groups are more likely to report always wearing a seatbelt when in a car. There is no significant difference by gender.

Table 9: Sun Safety Behaviours

Children were asked questions about sunscreen use and experience of sunburn last summer.

Sunscreen use	Overall, 85% of children report always or sometimes using sunscreen on a sunny day (80% in 2018). Girls, younger children and children from higher social class groups are more likely to report always or sometimes using sunscreen on a sunny day.
Sunburn last summer	Overall, 75% of children report having been sunburnt at least once last summer (73% in 2018). Girls and older children are more likely to report having been sunburnt at least once last summer. There is no significant difference across social class groups.



Table 10: Menstrual Health and Period Poverty

For the first time in 2022, girls were asked about their menstrual health and period poverty (ever been unable to afford period products).

Missed school as a result of period symptoms	Overall, 60% of girls who have begun to menstruate report ever missing school as a result of period symptoms (including pain, stomach cramps, or mood changes). Older girls and girls from the middle social class group are more likely to report ever missing school as a result of period symptoms.
Period poverty	Overall, 10% of girls who have begun to menstruate report being unable to afford period products on one or more occasion. Girls from lower social class groups are more likely to report being unable to afford period products on one or more occasion. There is no significant difference across age groups.

Table 11: Injuries

Children were asked to report on being injured in the last 12 months.

Ever injured	Overall, 43% of children report being injured once or more and requiring medical attention in the last 12 months (43% in 2018). Boys are more likely to report being injured once or more and requiring medical attention in the last 12 months. There are no significant differences across age groups or social class groups.
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Table 12: Physical Fighting and Bullying

Children were asked questions about being in a physical fight, and about bullying perpetration and victimisation.

Physical fight	Overall, 27% of children report having been in a physical fight during the last 12 months (32% in 2018). Boys, younger children and children from the highest social class group are less likely to report having been in a physical fight during the last 12 months.
Bullied others	Overall, 13% of children report bullying others at school once or more in the past couple of months (14% in 2018). Boys and children from the middle social class group are more likely to report bullying others at school once or more in the past couple of months. There is no significant difference across age groups.
Being bullied	Overall, 29% of children report being bullied at school once or more in the past couple of months (30% in 2018). Younger children and children from the middle social class group are more likely to report being bullied at school once or more in the past couple of months. There is no significant difference by gender.
Cyberbullying others	Overall, 9% of children report taking part in cyberbullying others once or more in the past couple of months (8% in 2018). Boys and children from lower social class groups are more likely to report taking part in cyberbullying others once or more in the past couple of months. There is no significant difference across age groups.
Being cyberbullied	Overall, 18% of children report being cyberbullied once or more in the past couple of months (15% in 2018). Girls, younger children and children from lower social class groups are more likely to report being cyberbullied once or more in the past couple of months.

Table 13a: Impact of COVID-19 measures

For the first time in 2022, young people were asked about the impact of the COVID-19 pandemic and its associated social and public health measures on their lives (e.g. lockdowns, school closures, home schooling and social distancing).

Impact of COVID-19 measures	Overall, children report that the two most positively affected aspects of life were family relationships and physical activity. The two most negatively affected aspects of life were mental health and school performance.
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Table 13b: COVID-19: Positive and Negative Impacts

Young people were asked about the impact of the COVID-19 pandemic and its associated measures.

Positive impact of measures on relationships with family	Overall, 54% of children report that the COVID-19 pandemic measures had a positive impact on their relationships with their family. Boys and younger children are more likely to report that the measures had a positive impact on their relationships with their family. There is no significant difference across social class groups.
Positive impact of measures on physical activity	Overall, 46% of children report that the COVID-19 pandemic measures had a positive impact on their physical activity. Younger children are more likely to report that the measures had a positive impact on their physical activity. There are no significant differences across gender or social class groups.
Negative impact of measures on mental health	Overall, 40% of children report that the COVID-19 pandemic measures had a negative impact on their mental health. Girls and older children are more likely to report that the measures had a negative impact on their mental health. There is no significant difference across social class groups.
Negative impact of measures on school performance	Overall, 40% of children report that the COVID-19 pandemic measures had a negative impact on their school performance. Girls and older children are more likely to report that the measures had a negative impact on their school performance. There is no significant difference across social class groups.

Table 14: Sexual Behaviours

Young people aged 15 to 17 years old were asked about engaging in sexual intercourse, and their use of contraception at last sexual intercourse.

Ever had sexual intercourse	Overall, 25% of 15 to 17 year olds report that they have ever had sexual intercourse (25% in 2018). There are no significant differences across gender or social class groups.
Condom use*	Of those who report having had sexual intercourse, 48% report that they or their partner used a condom at last sexual intercourse (62% in 2018). Girls are more likely to report that they or their partner used a condom at last sexual intercourse.
Use of birth control pill*	Of those who report ever having had sexual intercourse, 29% report that they or their partner used the birth control pill at last sexual intercourse (28% in 2018). Girls are more likely to report that they or their partner used the birth control pill at last sexual intercourse.
Other method(s) of contraception*	Of those who report having had sexual intercourse, 18% report that they or their partner used other method(s) of contraception at last sexual intercourse (18% in 2018). There is no significant difference by gender.
No contraception*	Of those who report having had sexual intercourse, 34% report that they or their partner used no contraception at last sexual intercourse (22% in 2018). Boys are more likely to report that they or their partner used no contraception at last sexual intercourse.

*Social class significance comparisons are not reported due to low sample size.

Overview of Findings: Middle Childhood Study (3rd and 4th Class)

Table 15: Middle Childhood Study: General Health and Wellbeing

Children were asked a number of questions concerning their lives and perceived health.

Excellent health	Overall, 44% of 3 rd and 4 th class children report that their health is excellent (46% in 2018). Girls are more likely to report that their health is excellent. There is no significant difference across social class groups.
Happiness	Overall, 63% of 3 rd and 4 th class children report feeling very happy with their life at present (68% in 2018). There are no significant differences across gender or social class groups.
Love of family	Overall, 90% of 3 rd and 4 th class children report that they always love their family (88% in 2018). There are no significant differences across gender or social class groups.

Table 16: Middle Childhood Study: Smoking

Children were asked about their smoking behaviours.

Ever smoked tobacco*	Overall, 1% of 3 rd and 4 th class children report that they have ever smoked tobacco (1% in 2018).
Current tobacco smoking status*	Overall, less than 1% of 3 rd and 4 th class children report that they are current tobacco smokers (<1% in 2018).

*Gender and social class comparisons are not reported due to low sample size.

Table 17: Middle Childhood Study: Food and Dietary Behaviours

Children were asked a number of questions regarding their dietary habits.

Fruit	Overall, 34% of 3 rd and 4 th class children report that they consume fruit more than once a day (34% in 2018). There are no significant differences across gender or social class groups.
Vegetables	Overall, 25% of 3 rd and 4 th class children report that they consume vegetables more than once a day (27% in 2018). There are no significant differences across gender or social class groups.
Sweets	Overall, 25% of 3 rd and 4 th class children report eating sweets once a day or more (21% in 2018). There are no significant differences across gender or social class groups.
Soft drinks	Overall, 7% of 3 rd and 4 th class children report drinking soft drinks daily or more (8% in 2018). Children from lower social class groups are more likely to report drinking soft drinks daily or more. There is no significant difference by gender.
Not having breakfast*	Overall, 3% of 3 rd and 4 th class children report never having breakfast on any day of the week (3% in 2018). There is no significant difference by gender.
Going to school or bed hungry	Overall, 32% of 3 rd and 4 th class children report ever going to school or bed hungry because there was not enough food at home (28% in 2018). Boys are more likely to report ever going to school or bed hungry because there was not enough food at home. There is no significant difference across social class groups.

*Social class significance comparisons are not reported due to low sample size.

Table 18: Middle Childhood Study: Exercise and Physical Activity

Children were asked about their participation in exercise and physical activity.

Vigorous exercise four or more times per week	Overall, 68% of 3 rd and 4 th class children report participating in vigorous exercise four or more times per week (69% in 2018). Boys are more likely to report participating in vigorous exercise four or more times per week. There is no significant difference across social class groups.
Physical inactivity*	Overall, 5% of 3 rd and 4 th class children report participating in vigorous exercise less than weekly (6% in 2018). There is no significant difference by gender.

*Social class significance comparisons are not reported due to low sample size.

Table 19: Middle Childhood Study: Self-Care

Children were asked questions regarding toothbrushing and seatbelt use.

<p>Toothbrushing</p>	<p>Overall, 71% of 3rd and 4th class children report brushing their teeth more than once a day (71% in 2018). Girls are more likely to report brushing their teeth more than once a day. There is no significant difference across social class groups.</p>
<p>Seatbelt use</p>	<p>Overall, 89% of 3rd and 4th class children report always wearing a seatbelt when in a car (89% in 2018). Girls are more likely to report always wearing a seatbelt when in a car. There is no significant difference across social class groups.</p>

Table 20: Middle Childhood Study: Bullying

Children were asked questions about bullying behaviours.

<p>Bullied others</p>	<p>Overall, 14% of 3rd and 4th class children report bullying others at school once or more in the past couple of months (17% in 2018). Boys are more likely to report bullying others at school once or more in the past couple of months. There is no significant difference across social class groups.</p>
<p>Being bullied</p>	<p>Overall, 33% of 3rd and 4th class children report being bullied at school once or more in the past couple of months (36% in 2018). There are no significant differences across gender or social class groups.</p>

Methods

HBSC 2022: Main & Middle Childhood Survey

The HBSC survey is conducted in collaboration with the European Regional Office of the World Health Organization (WHO). Research teams from all countries and regions co-operate in relation to survey content, methodology and timing, and an international protocol is developed. Strict adherence to the protocol is required for inclusion in the international database and this has been achieved with the current study.

Sampling: In Ireland, sampling was conducted in order to be representative of the proportion of children in each of the eight geographical regions (see Tables 22 and 25). The objective was to achieve a nationally representative sample of school-aged children, and the procedures employed were the same as those for the 1998, 2002, 2006, 2010, 2014 and 2018 HBSC Ireland surveys. Data from the 2016 Census (www.cso.ie) were employed to provide a picture of the population distribution across geographical regions. The sampling frame consisted of primary and post-primary schools, lists of which were sourced from the Department of Education. A two-stage process was used to identify study participants. Individual schools within regions were randomly selected and subsequently, class groups within schools were randomly selected for participation. In primary schools, 3rd to 6th class groups were included, while in post-primary schools all classes, with the exception of Leaving Certificate groups (i.e., final year examination classes), were sampled.

Procedure: School principals were first approached by post and a follow up e-mail. For the first time, schools were given the choice to administer the questionnaire, either using paper or online versions and in either English or Irish. Qualtrics software (Qualtrics, Provo, UT) was used to facilitate the online questionnaires. Schools who agreed to participate were sent parental consent forms, teacher and pupil information sheets, and classroom feedback forms. Those who chose paper questionnaires were also sent blank envelopes to facilitate anonymity and FREEPOST envelopes for returning materials. For schools who chose online administration, anonymised links were e-mailed to each teacher to share with pupils in the classroom. In order to maximise response rates, e-mail reminders were sent to schools, followed by telephone calls from research staff at the Health Promotion Research Centre, University of Galway. Data entry was conducted according to the International HBSC protocol for both online and paper questionnaires. Paper questionnaires were entered into Qualtrics software (Qualtrics, Provo, UT) by research staff; double entry was completed for 10% of the paper questionnaires to test data entry quality. A summary of the methods employed can be found in Table 21. The HBSC 'Main Study' includes children from 5th class to 5th year who were aged 10 to 17 years. The 'Middle Childhood Study' includes children in 3rd and 4th classes who were aged 8.5 to 10.5 years. An abbreviated version of the HBSC questionnaire was used in the Middle Childhood Study.

Survey Instrument: Different versions of the standard HBSC questionnaire were used with different class groups. Therefore, there is some variation in the results presented for the various age groups. For example, children from 5th class to 1st year were given a slightly shorter version of the questionnaire than those in 2nd to 5th year. Data on sexual behaviours were only collected from the older age group (15 to 17 year olds), while some of the child-developed questions were asked only of the younger (10 to 14 year olds) or older (15 to 17 year olds) children. Four new topics are presented in this report. These comprise questions on sun safety behaviours (also asked in 2018), the impact of the COVID-19 pandemic measures, menstrual health and period poverty and loneliness.

These new items were piloted in advance³. The survey was available in both paper and online versions. There was no deviation in the content or layout of the two versions.

Table 21: Summary of Methods for the HBSC Survey

Population	School going children aged 8 to 18 years
Sampling Frame	Department of Education schools list
Sample	Cluster sample of students in a given classroom
Stratification	Proportionate to the distribution of pupils across geographical regions
Survey Instrument	Self-completion questionnaire (paper or online) administered in a classroom setting
Delivery/Reminders	Postal and e-mail delivery via principals and teachers Reminders via telephone and e-mail
Return	Paper: FREEPOST addressed envelopes provided Online: data downloaded automatically via Qualtrics software (Qualtrics, Provo, UT)
Survey Mode	Overall: 58% paper; 42% online Main Study: 50% paper; 50% online Middle Childhood Study: 84% paper; 16% online
Response Rate	51% of invited schools
Obtained Sample	191 schools / 9,071 pupils 7,619 Main Study 1,452 Middle Childhood Study
Data Quality	Data were entered according to the HBSC international protocol
Ethics	Full ethical approval was granted by the University of Galway (formally NUI Galway) Research Ethics Committee. HBSC Ireland is fully GDPR compliant.

Data Processing: Findings in the results section are presented for the HBSC Main Study and the Middle Childhood Study separately. Overall percentages for 2018 and 2022 have been weighted (see Technical Note 1) so figures may differ from the 2018 published report. Unweighted data are presented by gender, age groups and social class (SC) groups (see Technical Note 2). Social class is represented by SC 1-2, SC 3-4 and SC 5-6 corresponding to high, middle and low social class groups. The categories used for social class are standard and were determined by the highest reported parental occupation. Social class 1 includes professional occupations (i.e., solicitor, doctor), social class 2 includes managerial occupations (i.e., nurse, teacher), social class 3 includes non-manual occupations (i.e., salesperson, office clerk), social class 4 includes skilled-manual occupations (i.e., hairdresser, carpenter), social class 5 includes semi-skilled occupations (i.e., postal worker, carer), social class 6 includes unskilled occupations (i.e., cleaner, labourer). Details of the demographic representativeness of the sample can be found in the Appendices (see Tables 22-27).

Statistical analysis: Statistical analyses were carried out to determine if the differences observed by gender, age groups and social class groups were statistically significant. Differences at $p < 0.05$ are described in the report. The vertical axes of the charts are adjusted to the scale of the findings.

³Költő, A., Gavin, A., Lunney, L., Maloney, R., Kelly, C., & Nic Gabhainn, S. (2023). *New questions for the Health Behaviour in School-aged Children (HBSC) Study in Ireland: Pilot 2022*. Galway: Health Promotion Research Centre, University of Galway. DOI: [10.13025/h9pf-rd42](https://doi.org/10.13025/h9pf-rd42).

Youth Engagement

Youth engagement is a fundamental aspect of the HBSC Study. As outlined in Article 12 of the United Nations Convention on the Rights of the Child, young people are entitled to have their voices heard on issues that affect their lives. By meaningfully involving young people in research, HBSC aims to capture data that is relevant to young people and reflective of their lifestyles and experiences.

HBSC Ireland have involved young people throughout the HBSC survey cycle.

To gain the perspectives of young people on the content of this report, a series of youth engagement workshops were carried out in primary and post-primary schools between April and May 2023. Students worked both individually and collectively to agree on priority health topics for this report. The ideas generated by the young people during the workshops helped to shape the report. Due to the age of participants, the sexual health topic was not included in the workshops.

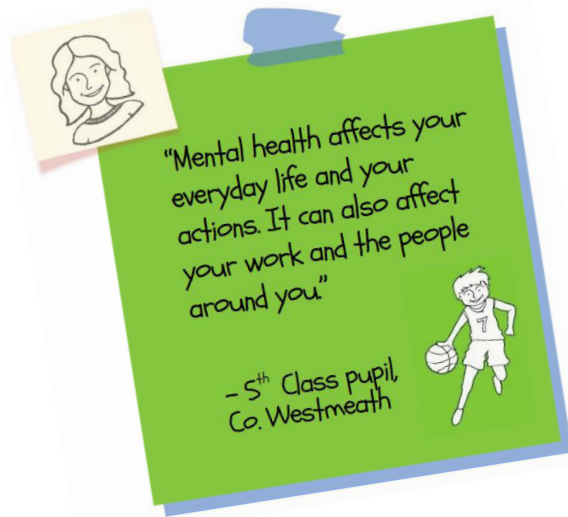
These are their priorities and words:

1	Mental Health	"Mental health affects your everyday life and actions"	"For healthy teeth and a beautiful smile"
2	Self-Care		
3	General Health and Wellbeing	"We need to be happy to live a good life"	
4	Exercise and Physical Activity		"To keep fit and healthy"
5	Period Poverty	"Period products are expensive and many girls can not afford it"	
6	Substance Use		"Smoking is really bad for your health and even affects other people's health"
7	Food and Dietary Behaviours	"If you have a good diet you will have a better physical and mental health"	
8	Injuries		"Bullying can destroy their life and how they feel about themselves"
9	Physical Fighting and Bullying		
10	COVID-19	"COVID-19 can affect your immune system and affect your family and other people and the elderly"	

Youth Engagement: Spotlight on Mental Health

Across our youth engagement workshops, mental health was the top priority. Children described why mental health is an important issue, what impacts their mental health, how they look after their own mental health and potential wider solutions to improve youth mental health.

These are their words:




Why it Matters

- "Mental health is important because it affects people of all ages in their everyday life"
- "It affects how we think, feel and act"
- "If your mental health is struggling many aspects of your everyday life will also struggle like your self esteem"

Coping Strategies

- "To help your mental health you can talk to your family and friends"
- "Write or journal your problems"
- "Make sure to get sleep"
- "Breathing exercises and meditation"



"As you progress through school the workload increases and the stress levels also increase, along with the demand from teachers, sometimes you're under a lot of pressure with homework and tests and all of that."

- 5th Year pupil, Co. Cavan



"Mobile phones can cause stress, worry and fear. People can be mean online and then act different online and in real life. It can affect you, how people treat you. It can make you sad, mad, depressed and angry."

- 2nd Year pupil, Co. Galway

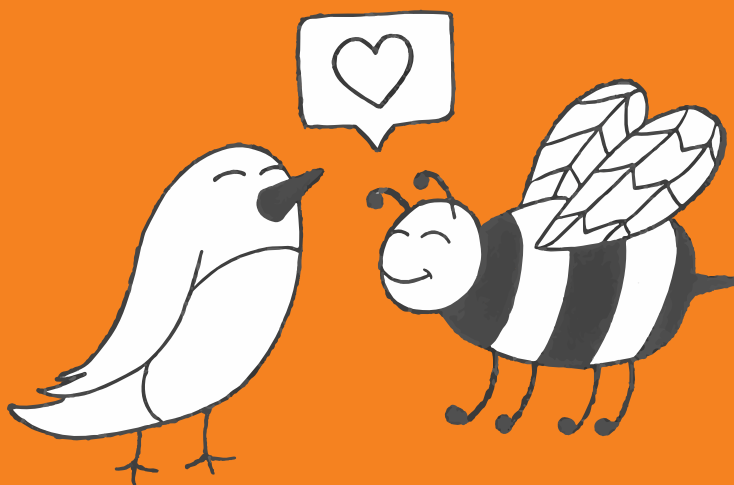
Policy Solutions

- "I hope mental health services could be improved in the future"
- "Therapists that are free"
- "The school workload should be spread out more and I think tests should be spread out more as well"



Findings from the Main Study

The results of the Main HBSC Study are presented in this section, stratified by gender, age groups and social class groups. The findings represent children aged 10 to 17 years, except where stated.



General Health and Wellbeing

Excellent health

There are statistically significant differences by gender, age group and social class. Overall, 30% of boys and 21% of girls report excellent health. Younger children are more likely to report excellent health than older children. Children from the highest social class group are more likely to report excellent health than those from other social class groups.

Figure 1: Percentages of boys who report their health is excellent

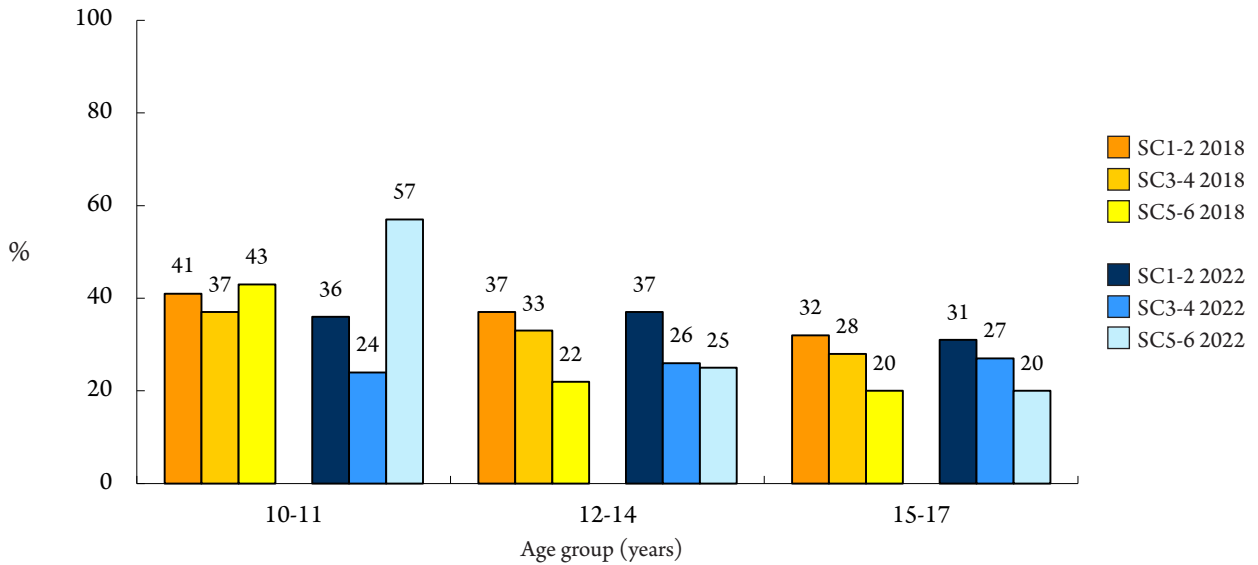
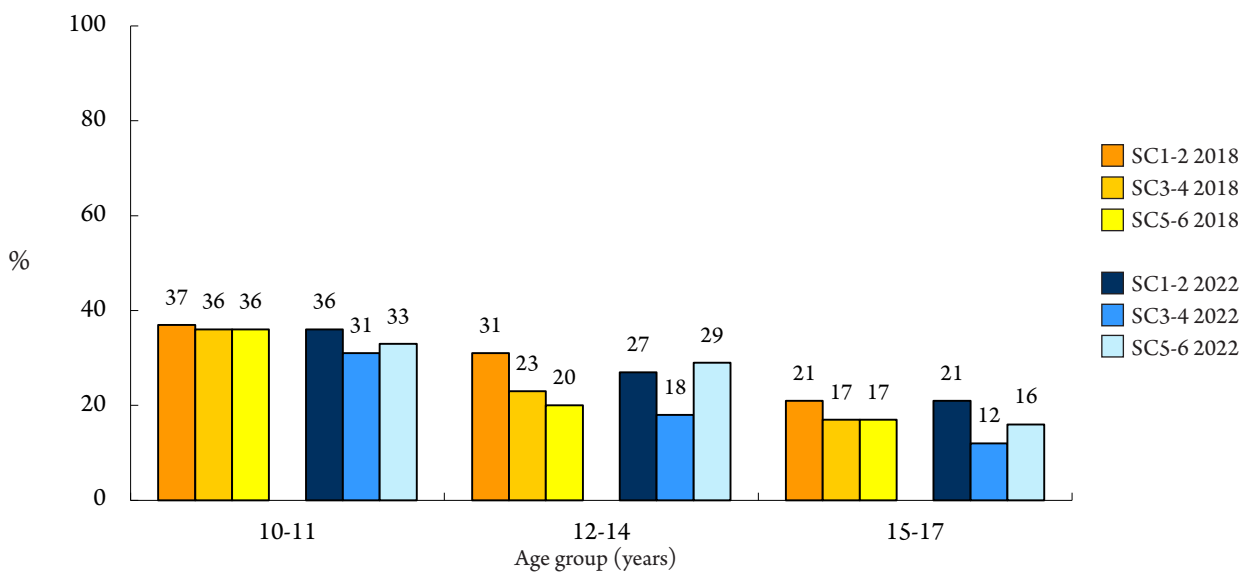


Figure 2: Percentages of girls who report their health is excellent



Life at present (happiness)

There are statistically significant differences by gender, age group and social class. Overall, 33% of boys and 22% of girls report feeling very happy with their life at present. Younger children are more likely to report feeling very happy with their lives than older children. Children from the highest social class group are more likely to report feeling very happy with their lives than those from other social class groups.

Figure 3: Percentages of boys who report feeling very happy with their lives at present

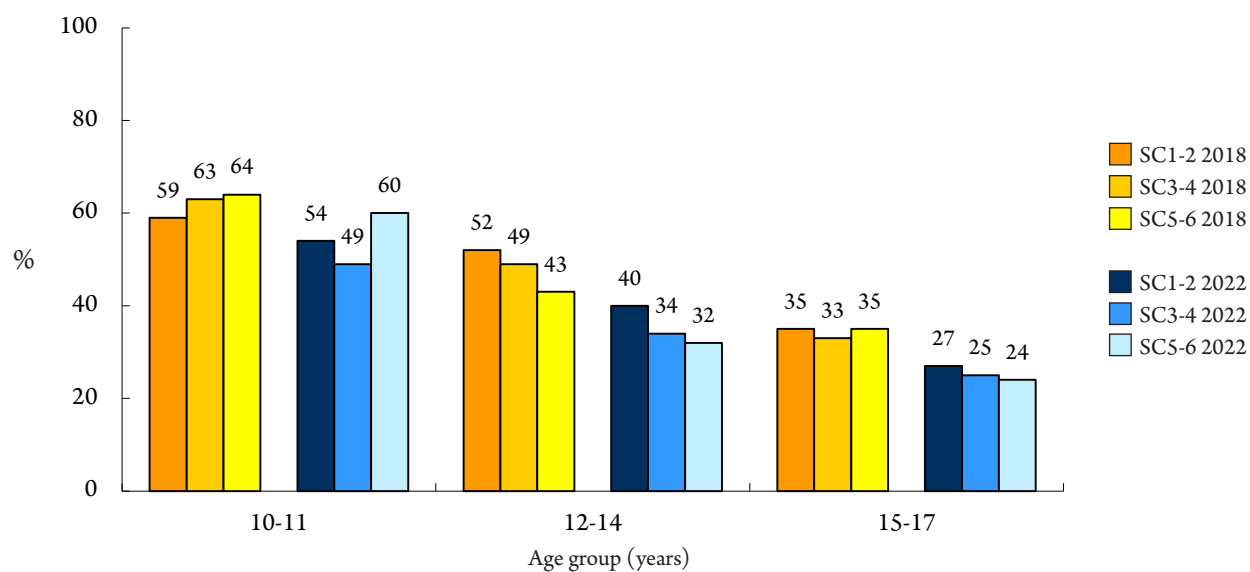
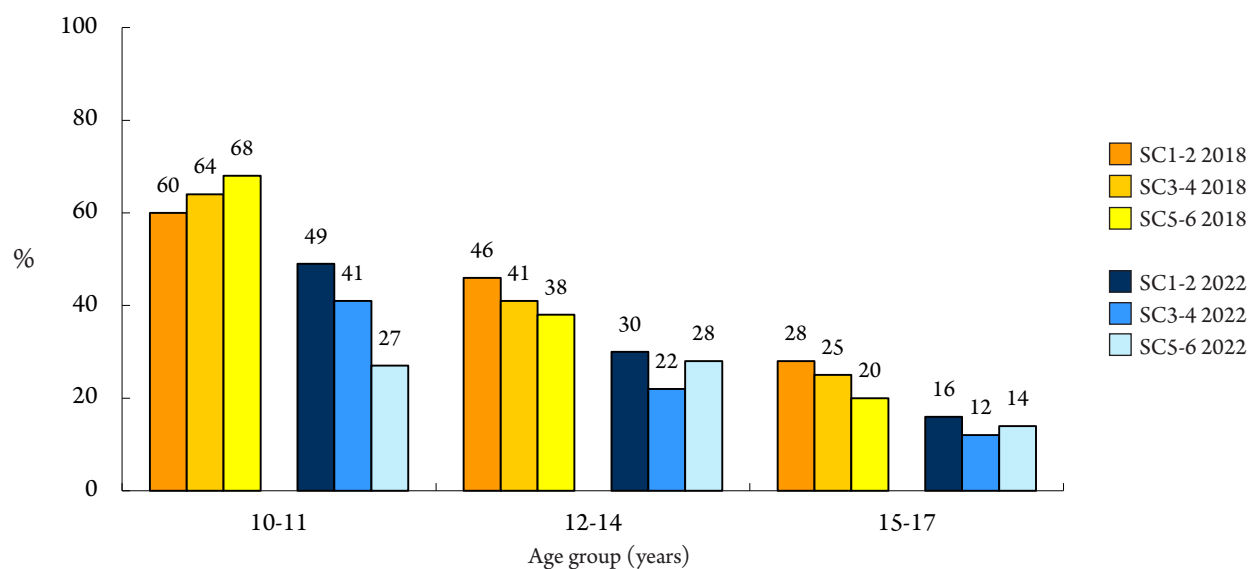


Figure 4: Percentages of girls who report feeling very happy with their lives at present



Life satisfaction

There are statistically significant differences by gender, age group and social class. Overall, 69% of boys and 54% of girls report high life satisfaction. Younger children are more likely to report high life satisfaction than older children. Children from the highest social class group are more likely to report high life satisfaction than those from other social class groups.

Figure 5: Percentages of boys who report high life satisfaction

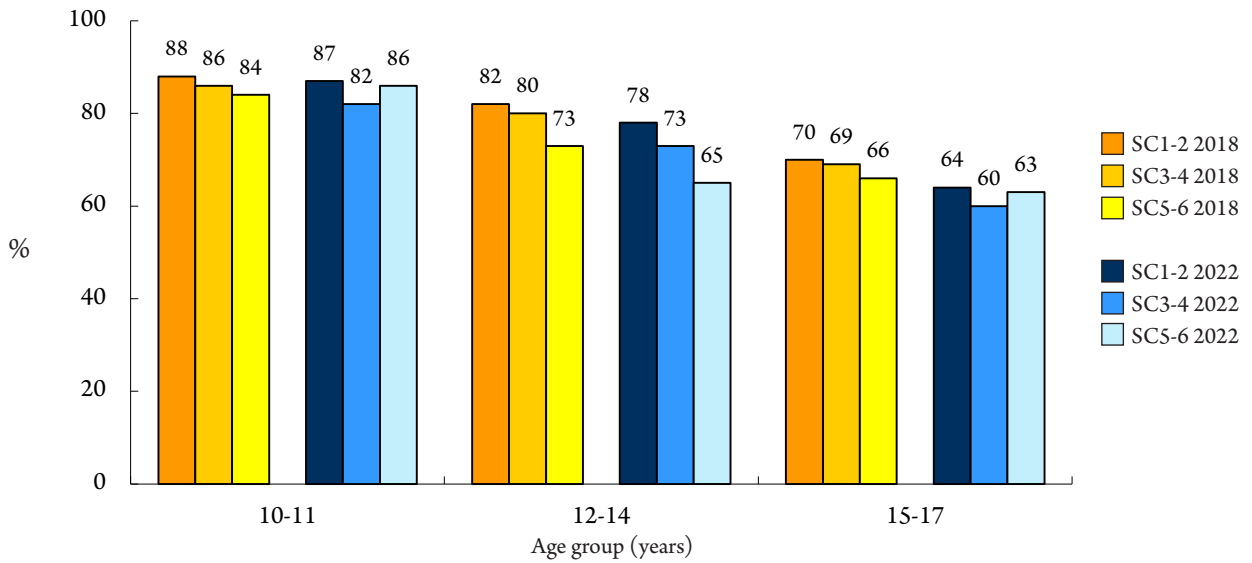
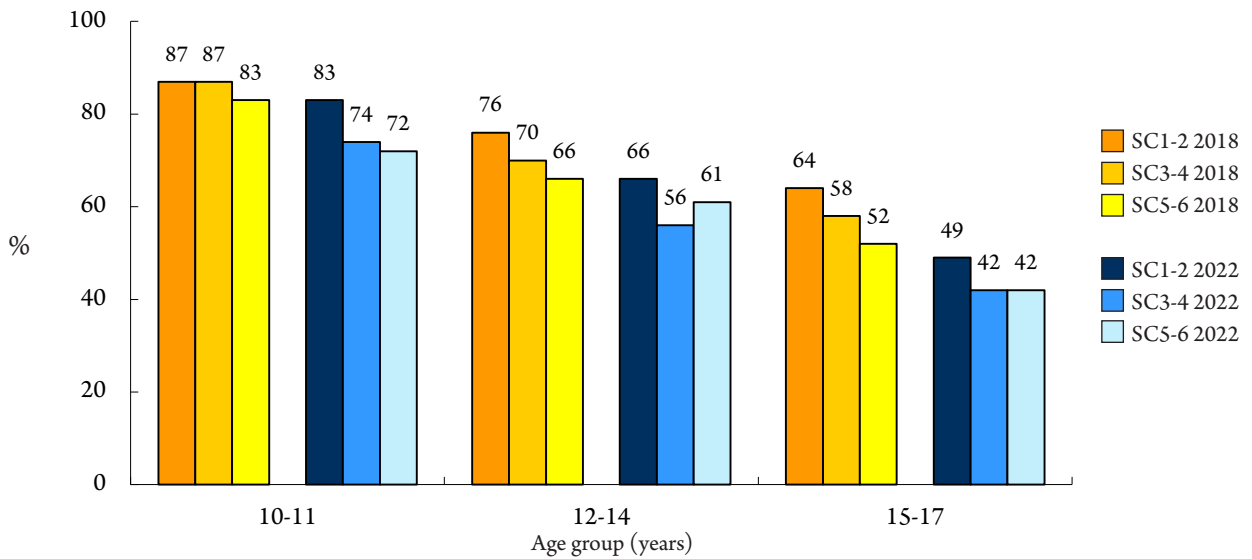


Figure 6: Percentages of girls who report high life satisfaction



Loneliness*

There are statistically significant differences by gender, age group and social class. Overall, 15% of boys and 26% of girls report feeling lonely most of the time or always in the past 12 months. Older children are more likely to report feeling lonely most of the time or always in the past 12 months than younger children. Children from lower social class groups are more likely to report feeling lonely most of the time or always in the past 12 months than those from other social class groups.

Figure 7: Percentages of boys who report feeling lonely most of the time or always in the past 12 months

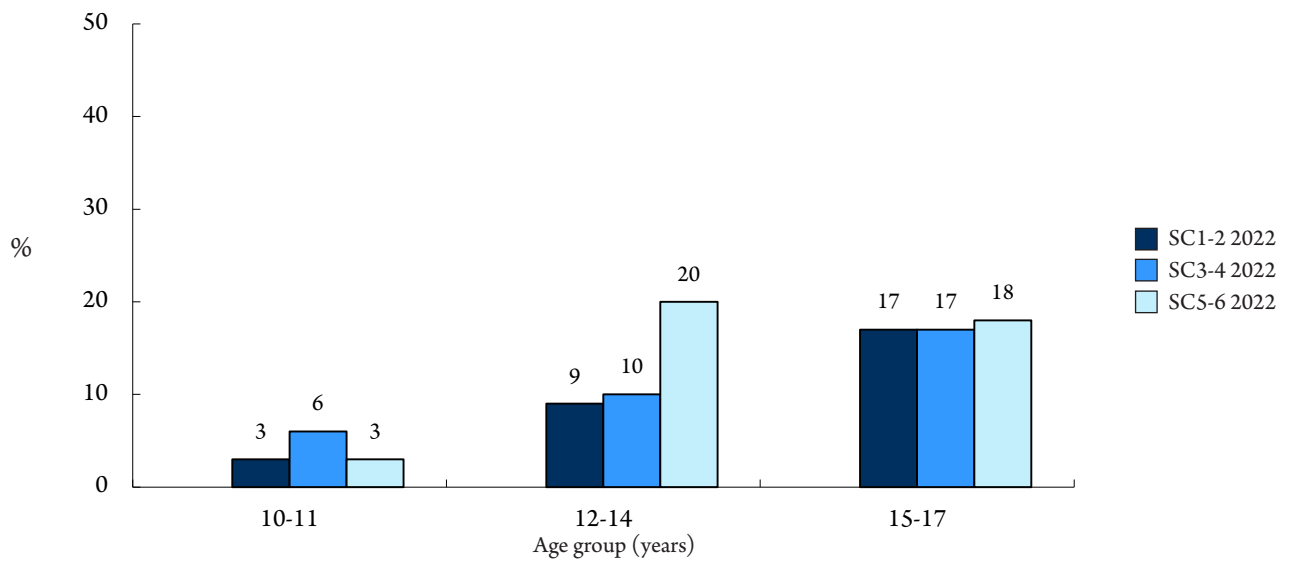
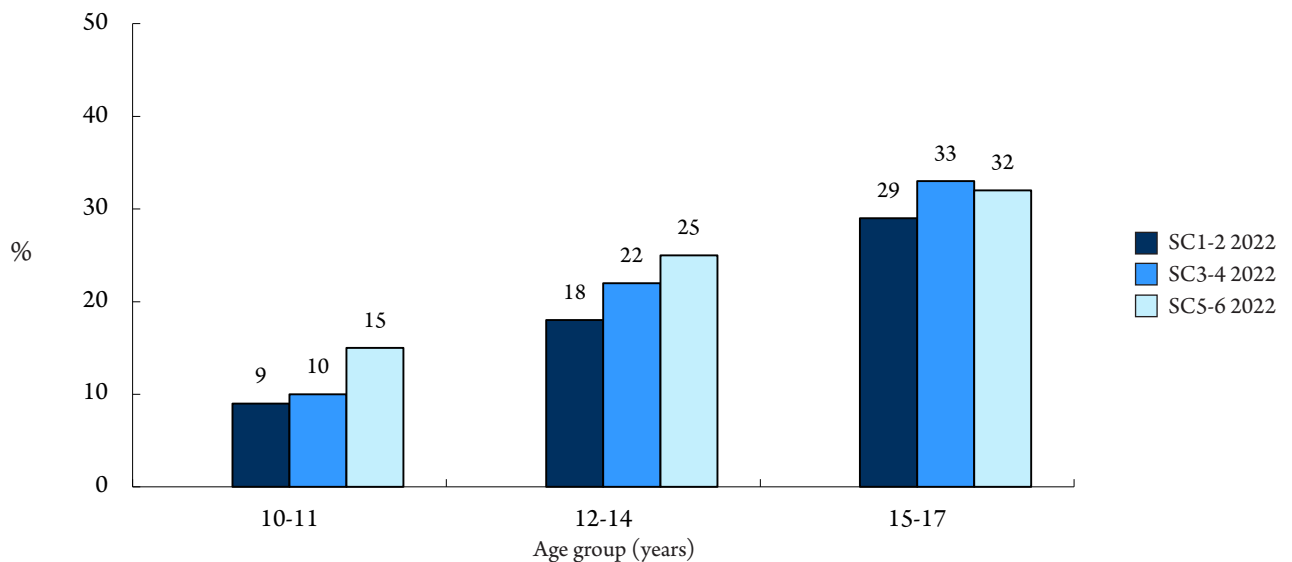


Figure 8: Percentages of girls who report feeling lonely most of the time or always in the past 12 months



*New item for 2022, therefore no 2018 data comparison.

Love of family

There is no statistically significant difference by gender. Overall, 83% of boys and 82% of girls report that they always love their family. There is a statistically significant difference by age group, with younger children more likely to report that they always love their family than older children. There is no statistically significant difference across social class groups.

Figure 9: Percentages of 10 to 14 year old boys who report they always love their family

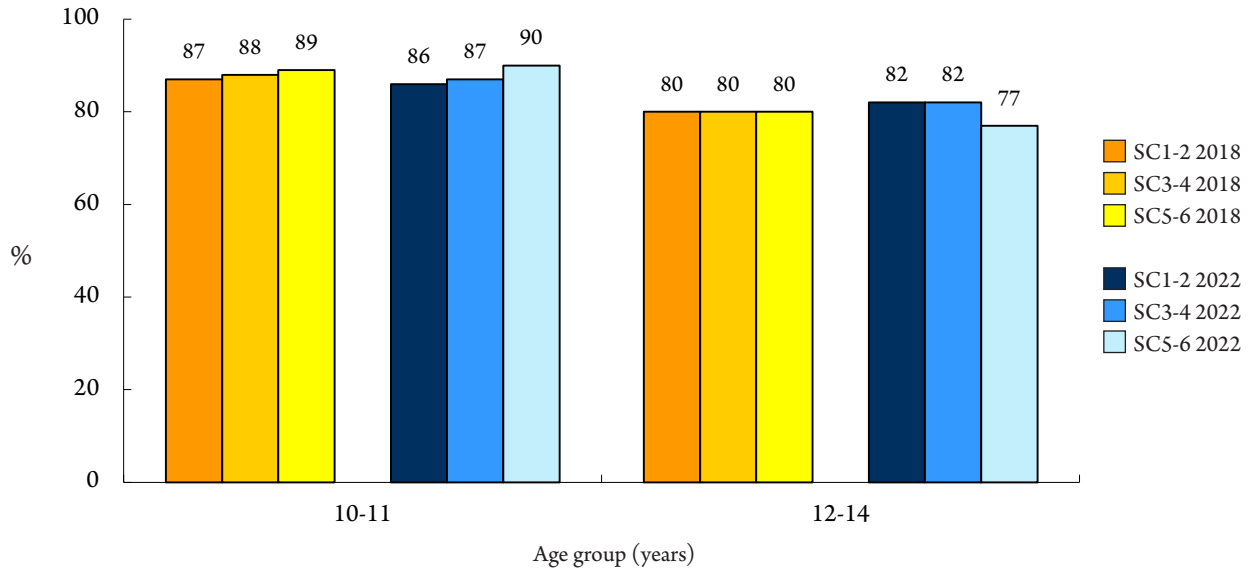
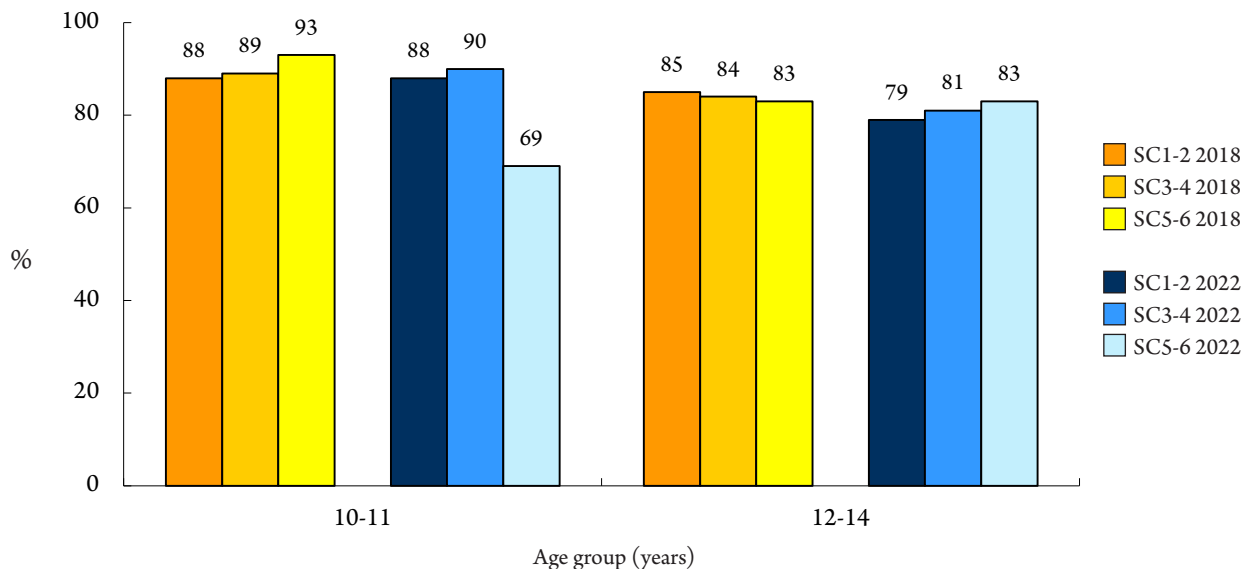


Figure 10: Percentages of 10 to 14 year old girls who report they always love their family

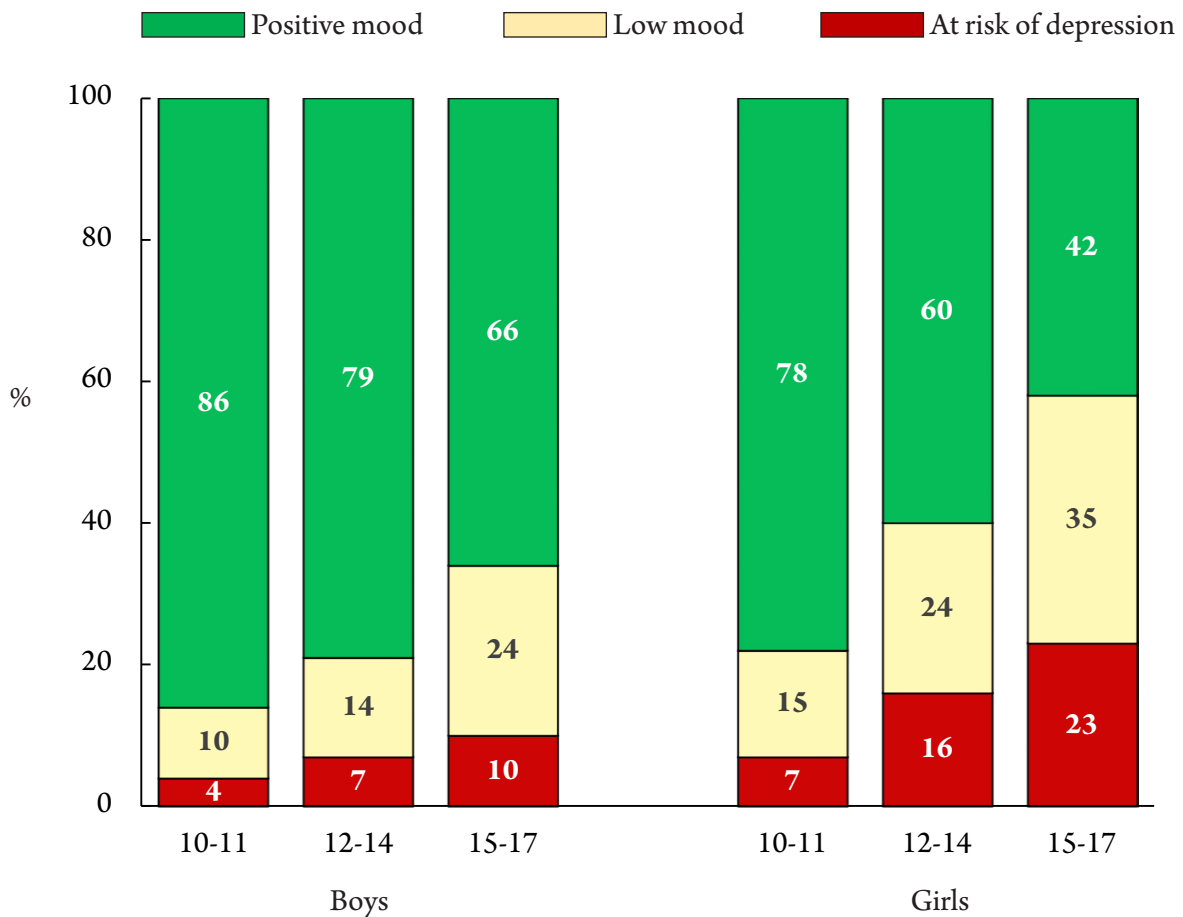


Mental Health

WHO-5 Well-Being Index

The WHO-5 Well-Being Index⁴ is a positively worded scale consisting of five items, which ask children how frequently the following were experienced in the previous two weeks: feeling cheerful and in good spirits; feeling calm and relaxed; feeling active and vigorous; waking up feeling fresh and rested; and feeling that their daily life had been filled with things that interest them. Scores are summed and transformed to create a scale ranging from 0 to 100. Scores of 50 and below on the WHO-5 indicate low mood, and those with a score of 28 and below are classified as at risk of depression. It should be noted that, at the time of data collection, schools had recently reopened and young people were readjusting from a long period of social distancing, school closures and remote learning.

Figure 11: Young people reporting different levels of mental wellbeing



⁴World Health Organization (1998). *Info package: Mastering depression in primary care* (Version 2.2). Frederiksborg: WHO Regional Office for Europe, Psychiatric Research Unit.

Low mood or at risk of depression

There are statistically significant differences by gender and age group. Overall, 26% of boys and 46% of girls are classified as having low mood or at risk of depression. Older children are more likely to be classified as having low mood or at risk of depression than younger children. There is no statistically significant difference across social class groups.

Figure 12: Percentages of boys classified as having low mood or at risk of depression

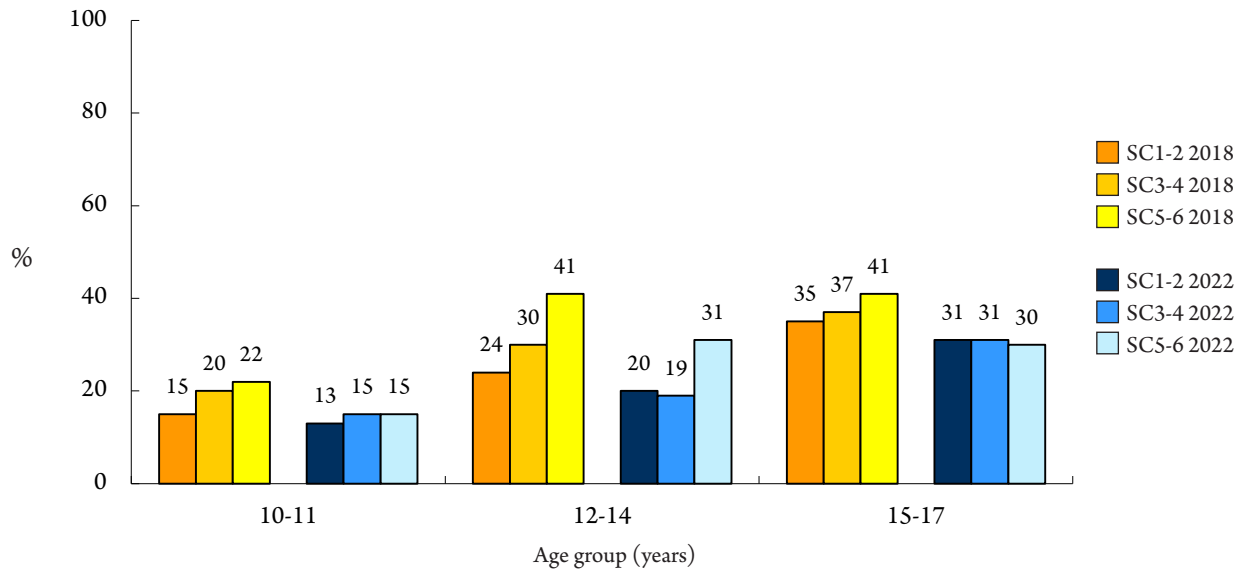
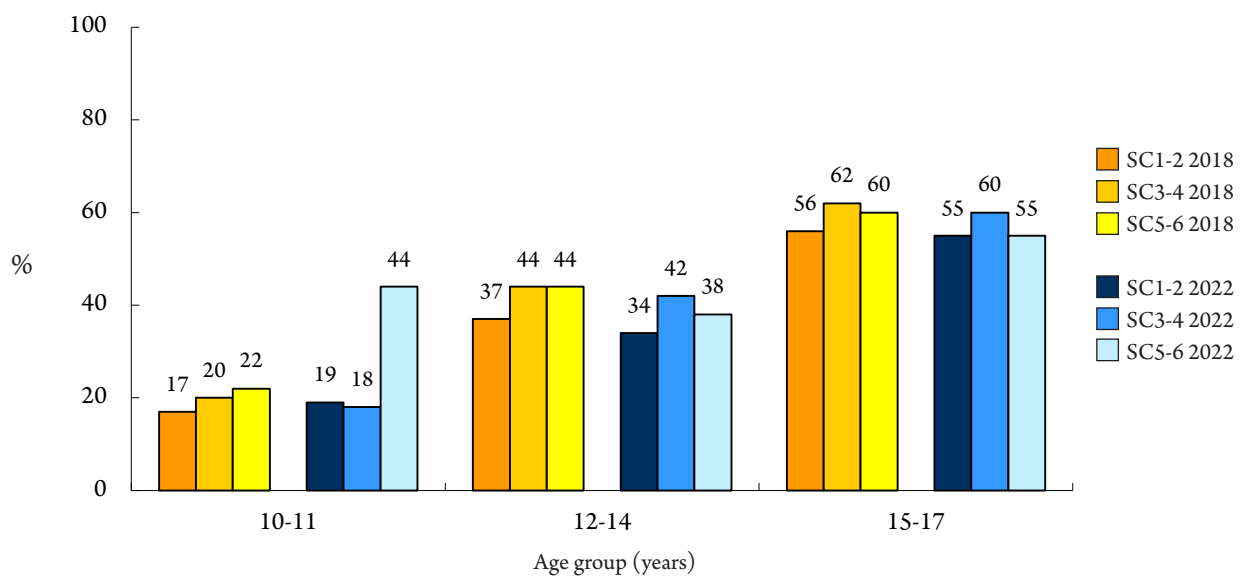


Figure 13: Percentages of girls classified as having low mood or at risk of depression



Smoking

Ever smoked cigarettes

There are statistically significant differences by gender and age group. Overall, 8% of boys and 10% of girls report that they have ever smoked cigarettes. Older children are more likely to report that they have ever smoked cigarettes than younger children. There is no statistically significant difference across social class groups.

Figure 14: Percentages of boys who report ever smoking cigarettes

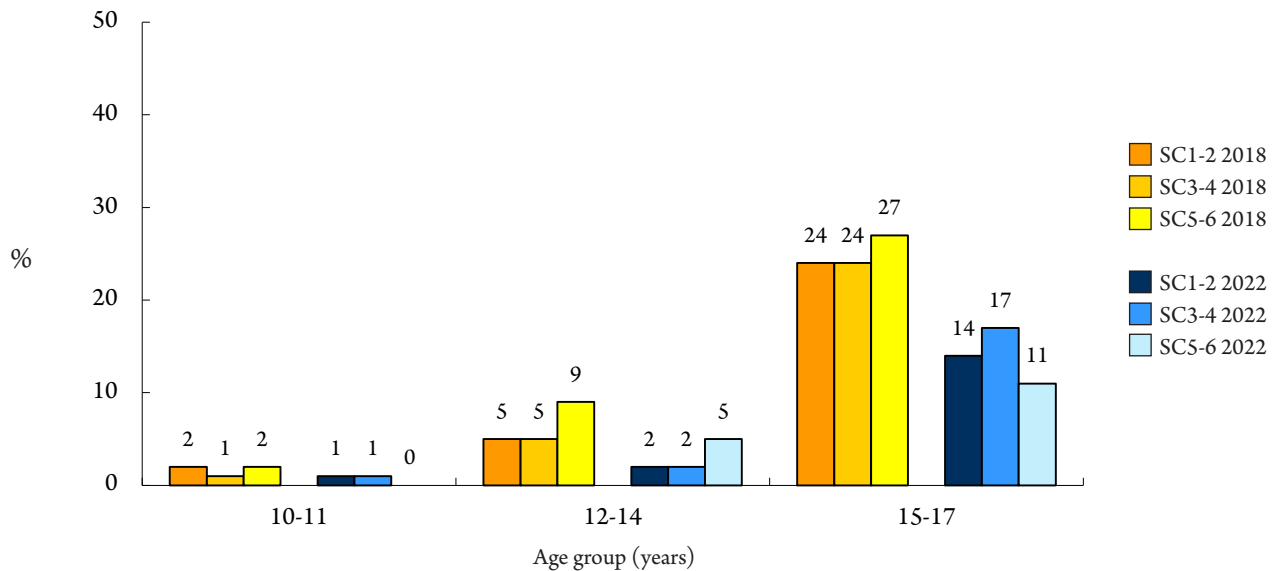
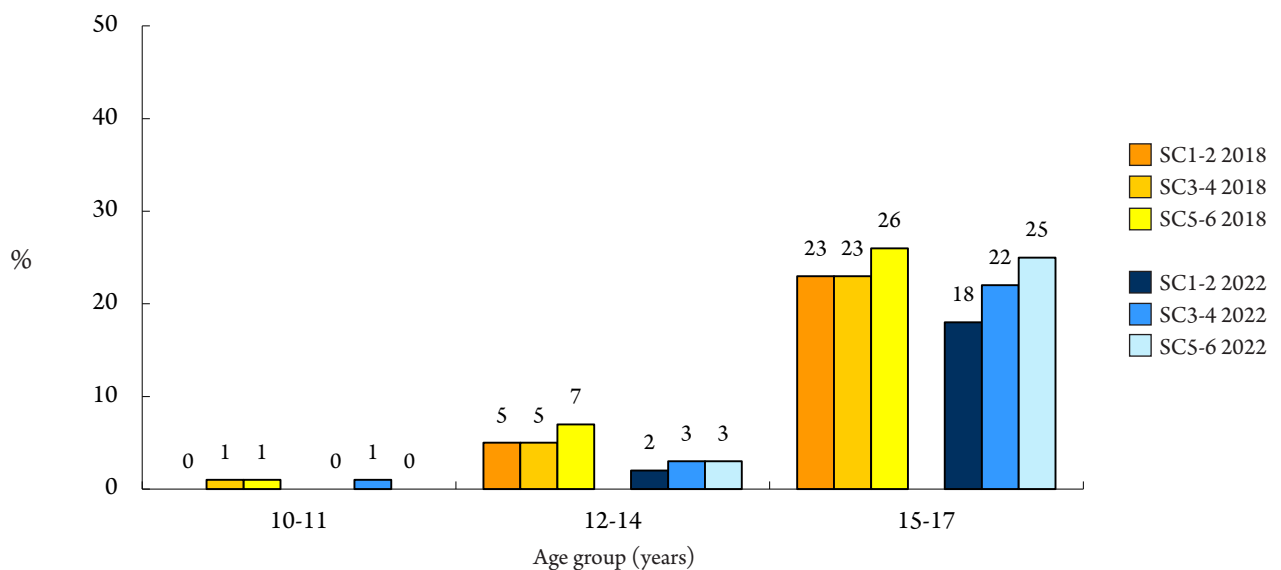


Figure 15: Percentages of girls who report ever smoking cigarettes



Current tobacco smoking status

There is no statistically significant difference by gender, with 4% of boys and 5% of girls reporting that they are current tobacco smokers. There is a statistically significant difference by age group, with older children more likely to report that they are current tobacco smokers than younger children. There is no statistically significant difference across social class groups.

Figure 16: Percentages of boys who report they are current tobacco smokers

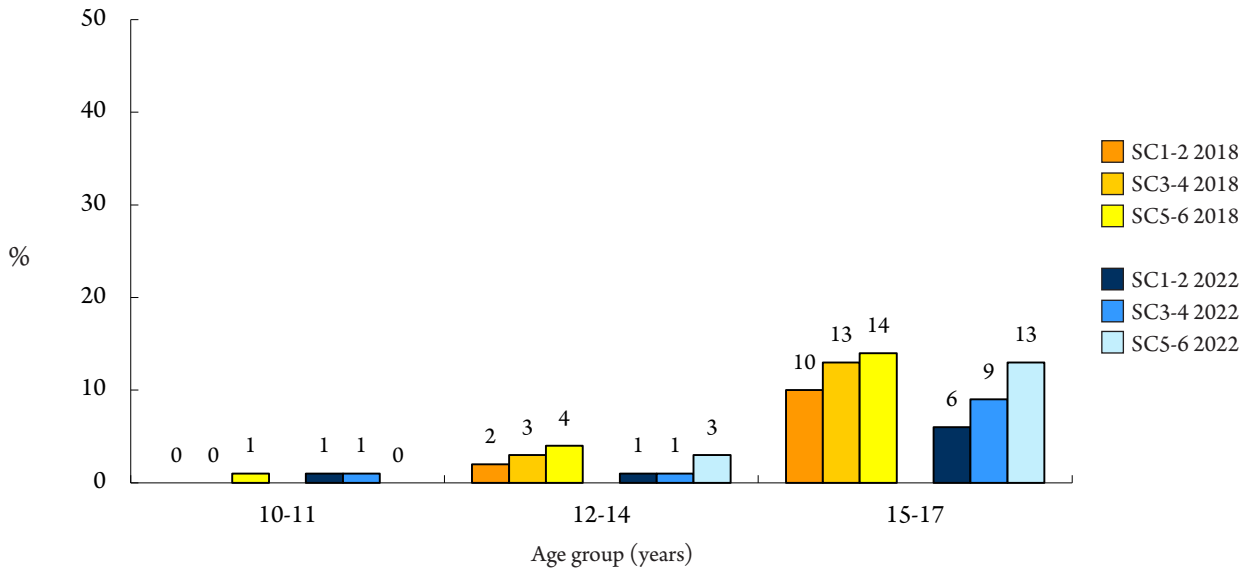
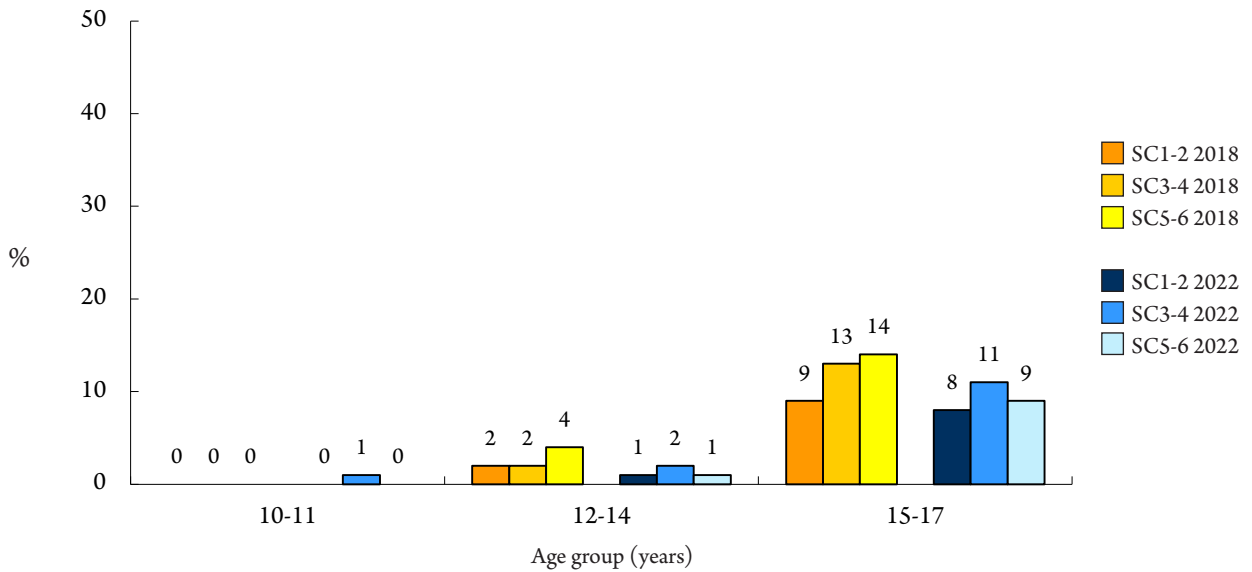


Figure 17: Percentages of girls who report they are current tobacco smokers



Ever used electronic cigarettes

There are statistically significant differences by gender and age group. Overall, 15% of boys and 21% of girls report that they have ever used electronic cigarettes. Older children are more likely to report that they have ever used electronic cigarettes than younger children. There is no statistically significant difference across social class groups.

Figure 18: Percentages of boys who report they have ever used electronic cigarettes

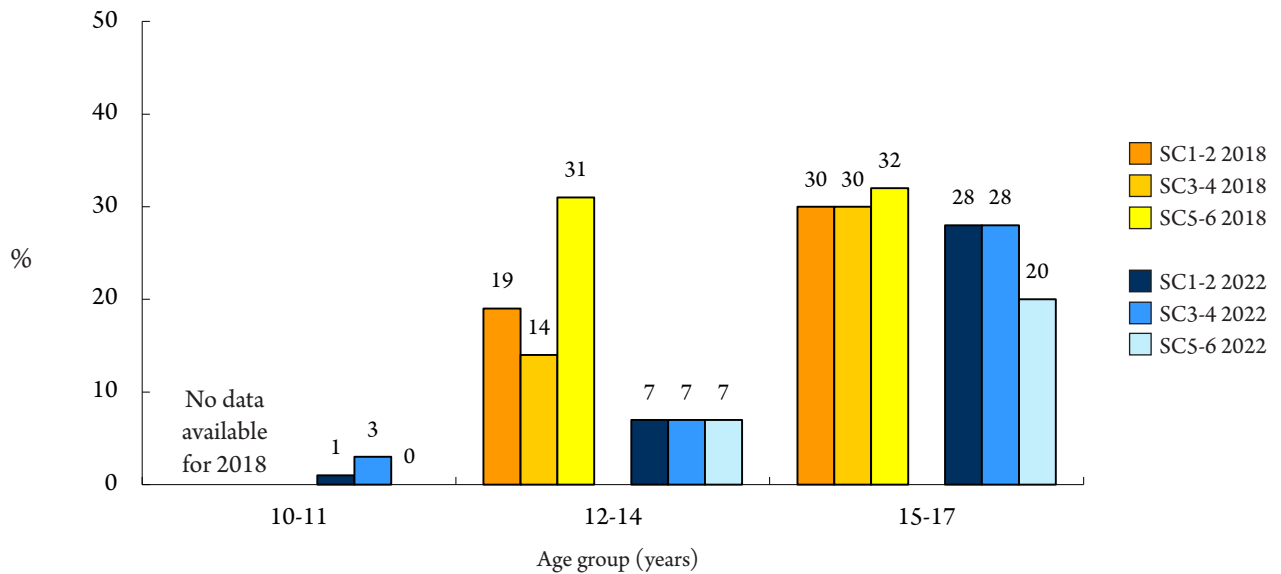
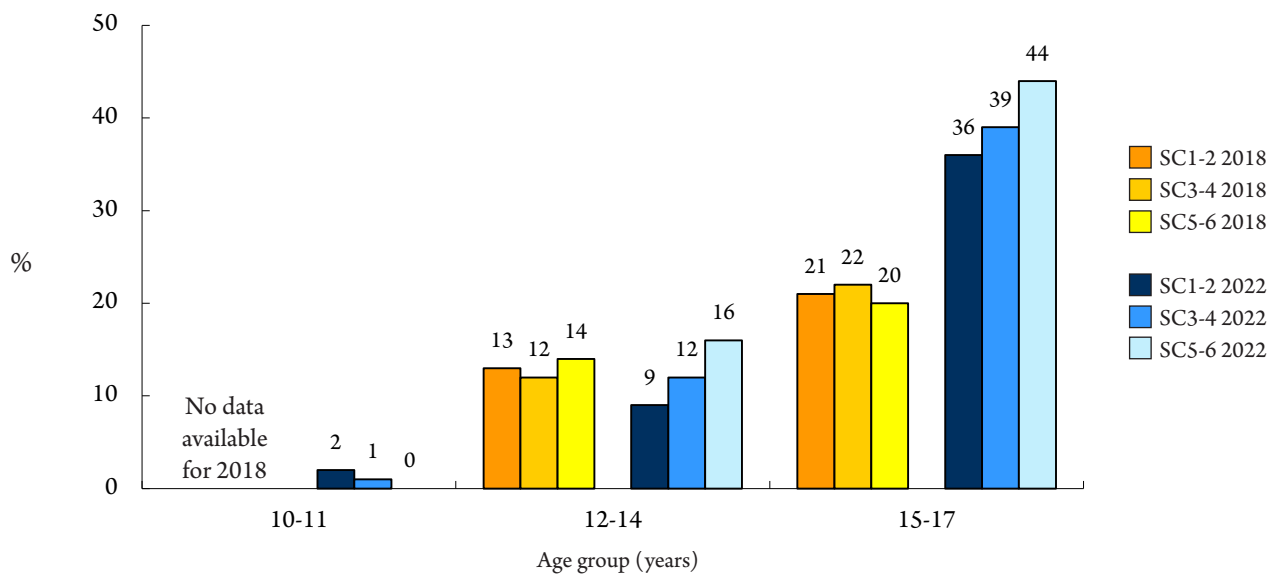


Figure 19: Percentages of girls who report they have ever used electronic cigarettes



Used electronic cigarettes in the last 30 days

There are statistically significant differences by gender and age group. Overall, 10% of boys and 16% of girls report that they have used electronic cigarettes in the last 30 days. Older children are more likely to report using electronic cigarettes in the last 30 days than younger children. There is no statistically significant difference across social class groups.

Figure 20: Percentages of boys who report they have used electronic cigarettes in the last 30 days

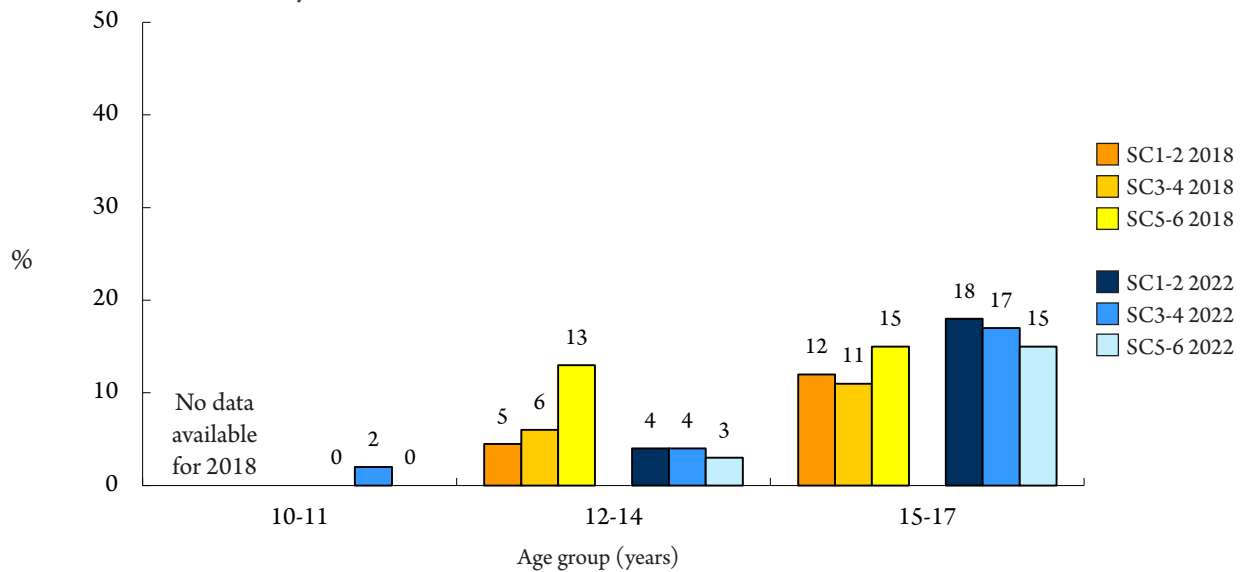
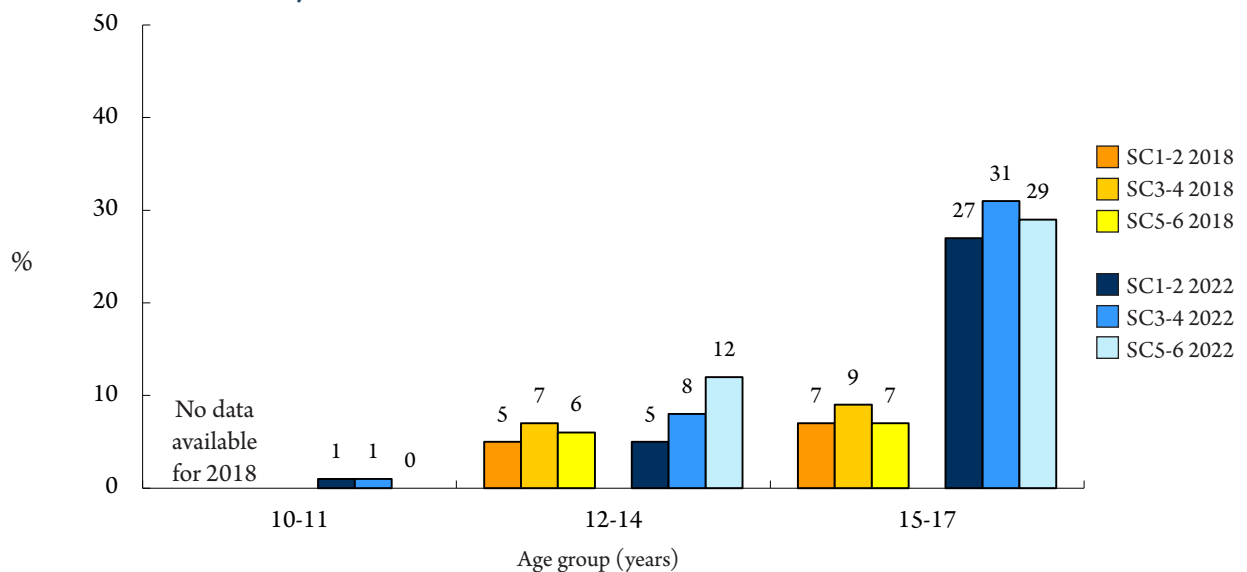


Figure 21: Percentages of girls who report they have used electronic cigarettes in the last 30 days



Alcohol Consumption and Drunkenness

Never drinking

There are statistically significant differences by gender and age group. Overall, 71% of boys and 67% of girls report never having had an alcoholic drink. Younger children are more likely to report never having had an alcoholic drink than older children. There is no statistically significant difference across social class groups.

Figure 22: Percentages of boys who report never having had an alcoholic drink

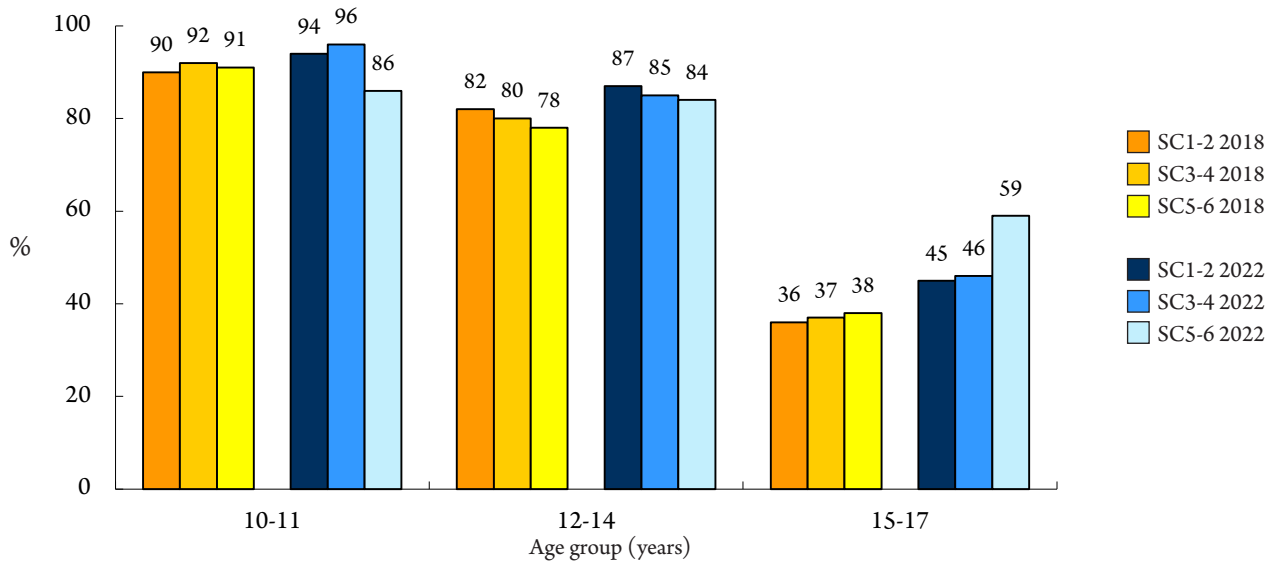
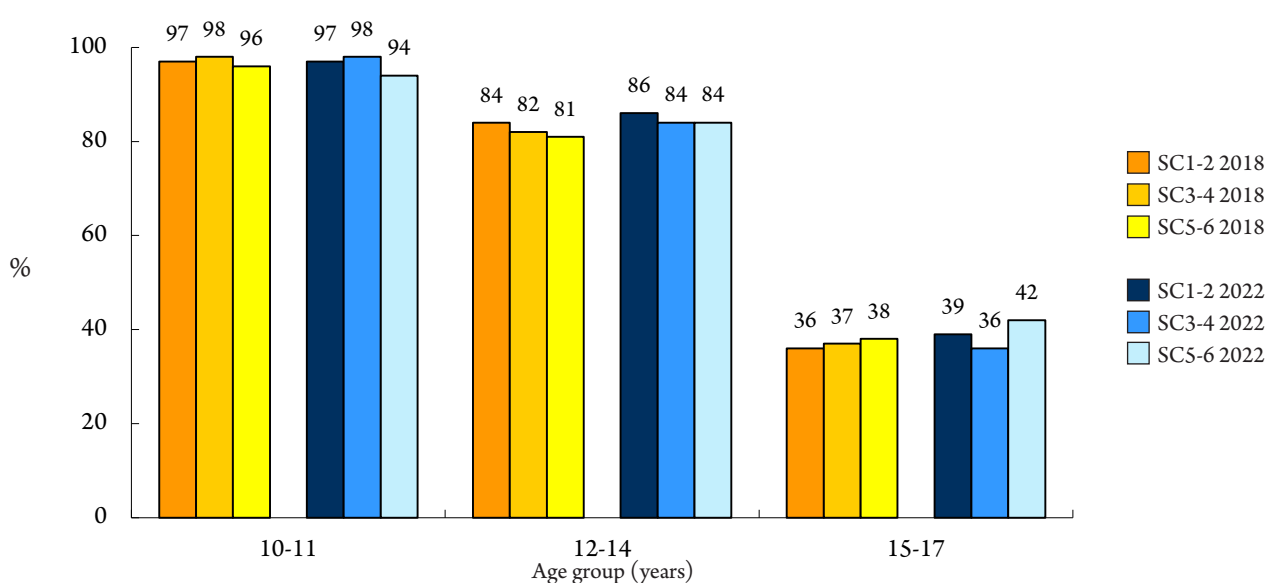


Figure 23: Percentages of girls who report never having had an alcoholic drink



Had an alcoholic drink in the last 30 days

There are statistically significant differences by gender and age group. Overall, 16% of boys and 21% of girls report having had an alcoholic drink in the last 30 days. Older children are more likely to report having had an alcoholic drink in the last 30 days than younger children. There is no statistically significant difference across social class groups.

Figure 24: Percentages of boys who report having had an alcoholic drink in the last 30 days

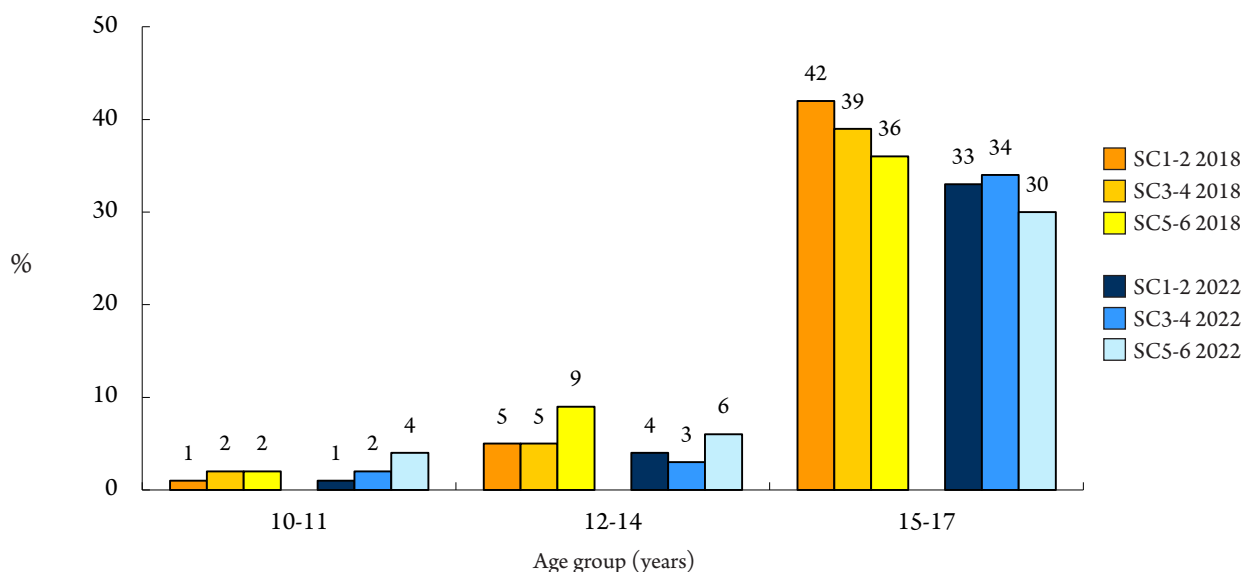
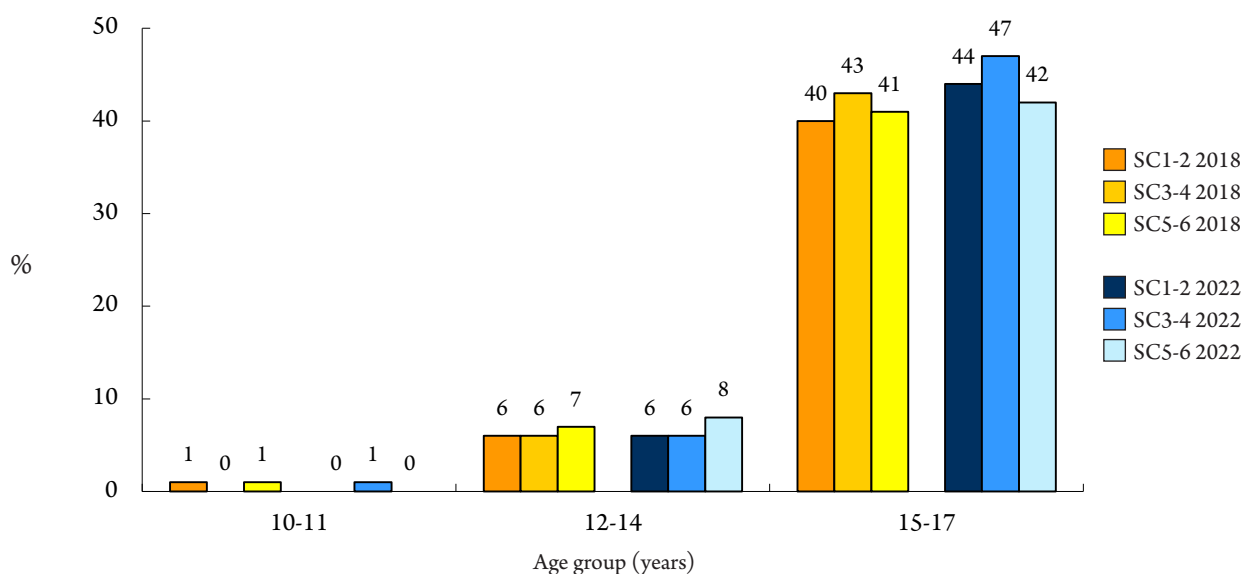


Figure 25: Percentages of girls who report having had an alcoholic drink in the last 30 days



Ever been 'really drunk'

There are statistically significant differences by gender and age group. Overall, 16% of boys and 20% of girls report ever having been 'really drunk'. Older children are more likely to report ever having been 'really drunk' than younger children. There is no statistically significant difference across social class groups.

Figure 26: Percentages of boys who report ever having been 'really drunk'

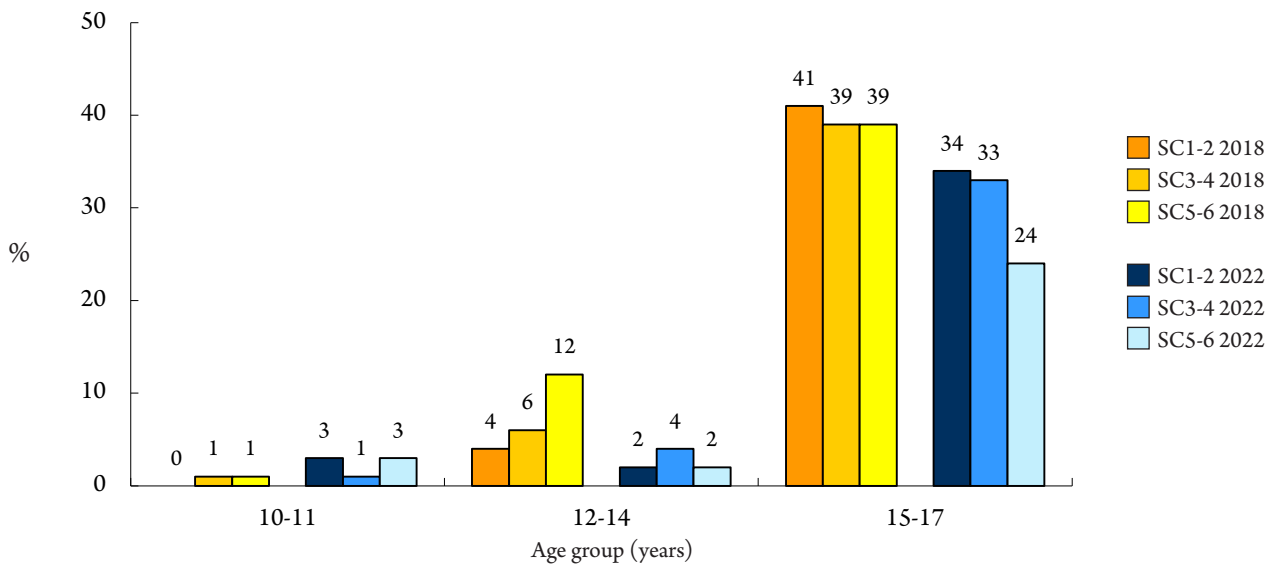
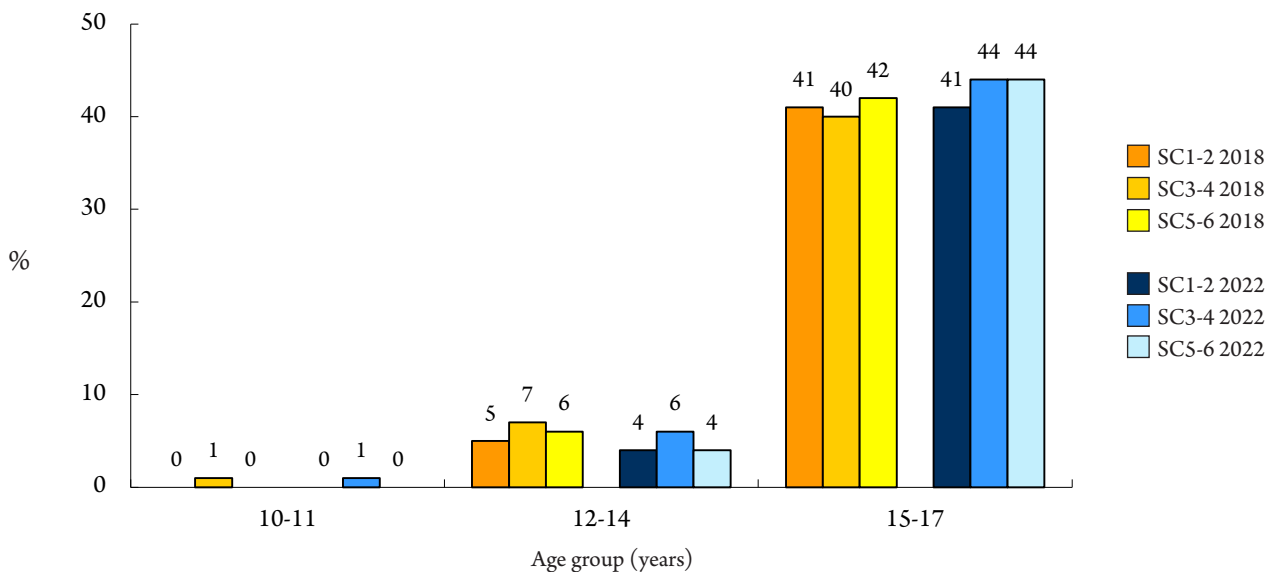


Figure 27: Percentages of girls who report ever having been 'really drunk'



Been 'really drunk' in the last 30 days

There are statistically significant differences by gender and age group. Overall, 7% of boys and 10% of girls report having been 'really drunk' in the last 30 days. Older children are more likely to report having been 'really drunk' in the last 30 days than younger children. There is no statistically significant difference across social class groups.

Figure 28: Percentages of boys who report having been 'really drunk' in the last 30 days

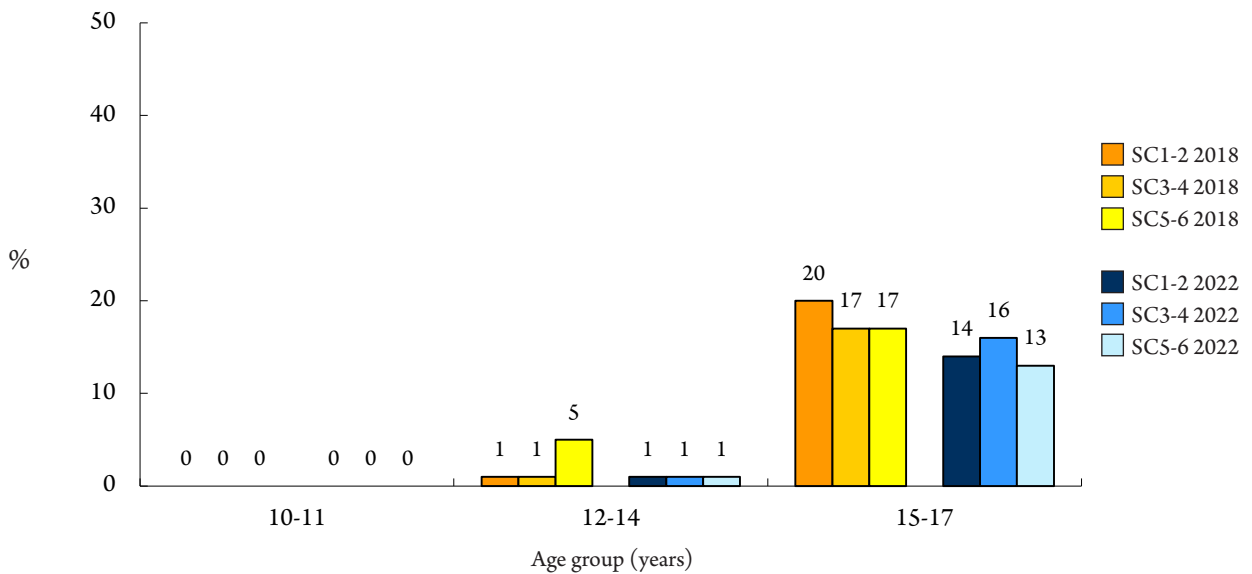
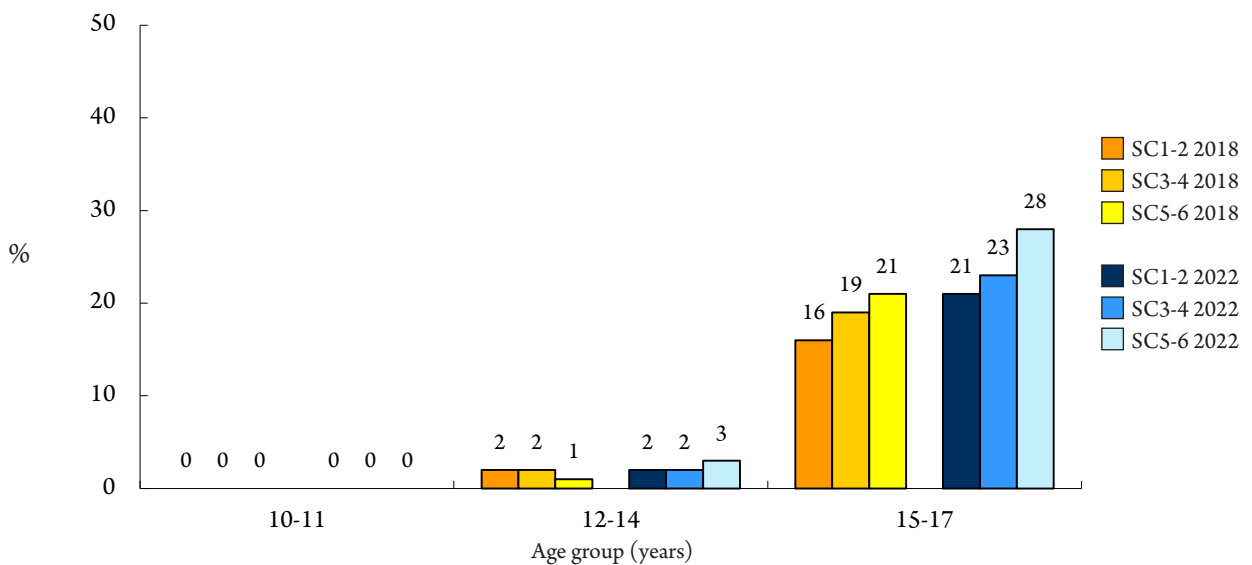


Figure 29: Percentages of girls who report having been 'really drunk' in the last 30 days



Cannabis Use

Cannabis use in the last 12 months

There is no statistically significant difference by gender, with 6% of boys and 6% of girls reporting that they have used cannabis in the last 12 months. There is a statistically significant difference by age group, with older children more likely to report that they have used cannabis in the last 12 months than younger children. There is no statistically significant difference across social class groups.

Figure 30: Percentages of boys who report they have used cannabis in the last 12 months

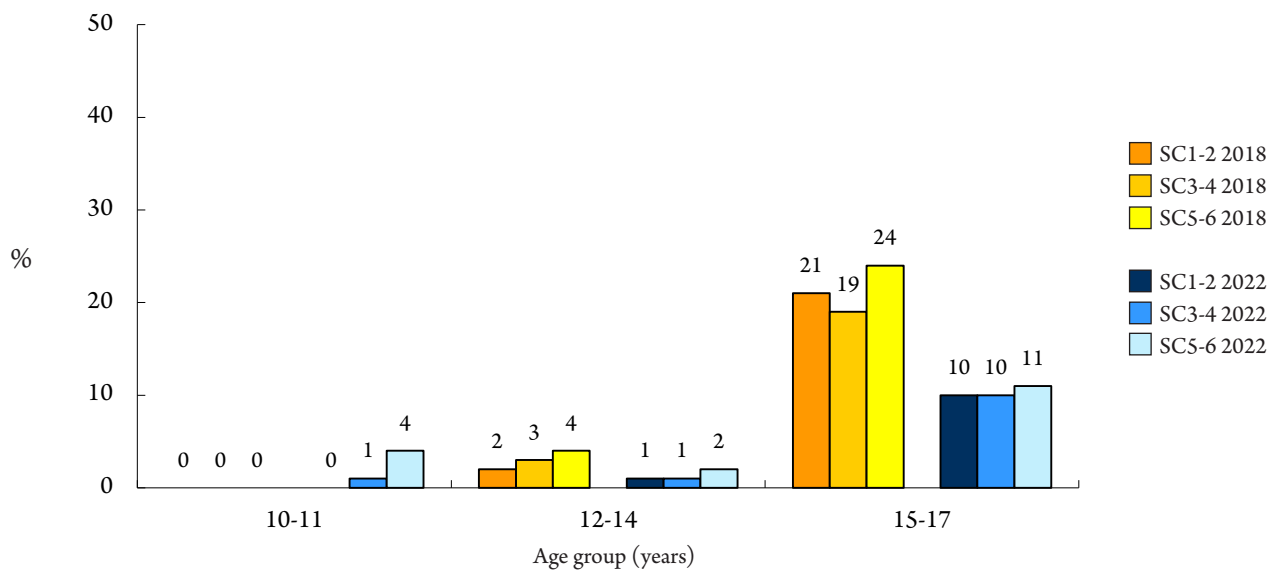
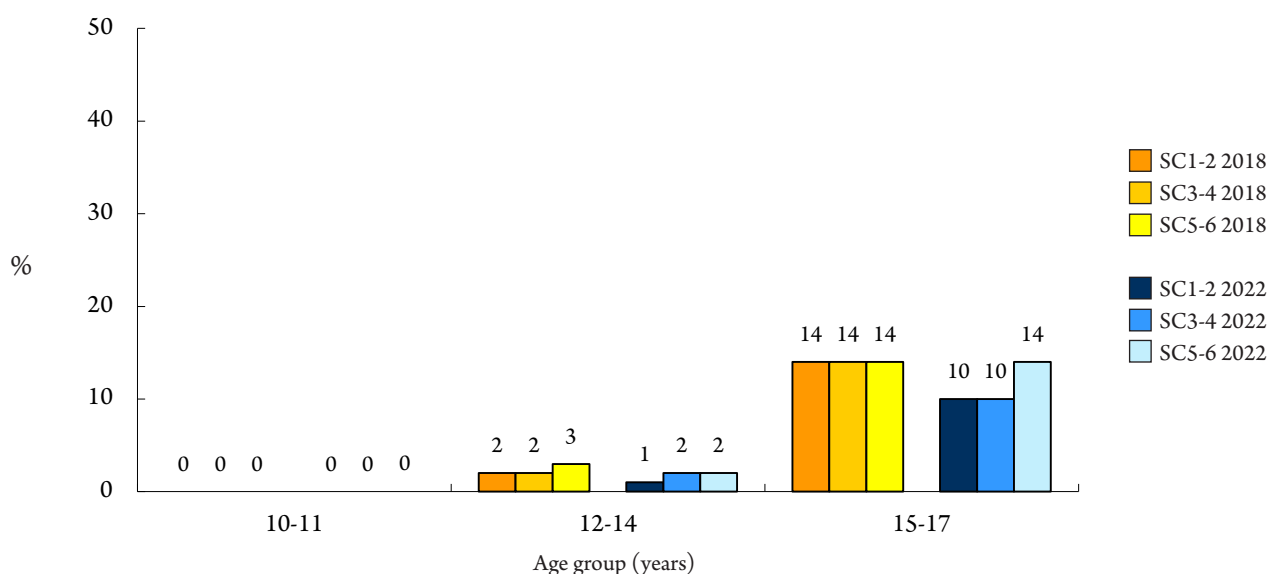


Figure 31: Percentages of girls who report they have used cannabis in the last 12 months



Cannabis use in the last 30 days

There are statistically significant differences by gender and age group. Overall, 4% of boys and 3% of girls report that they have used cannabis in the last 30 days. Older children are more likely to report that they have used cannabis in the last 30 days than younger children. There is no statistically significant difference across social class groups.

Figure 32: Percentages of boys who report they have used cannabis in the last 30 days

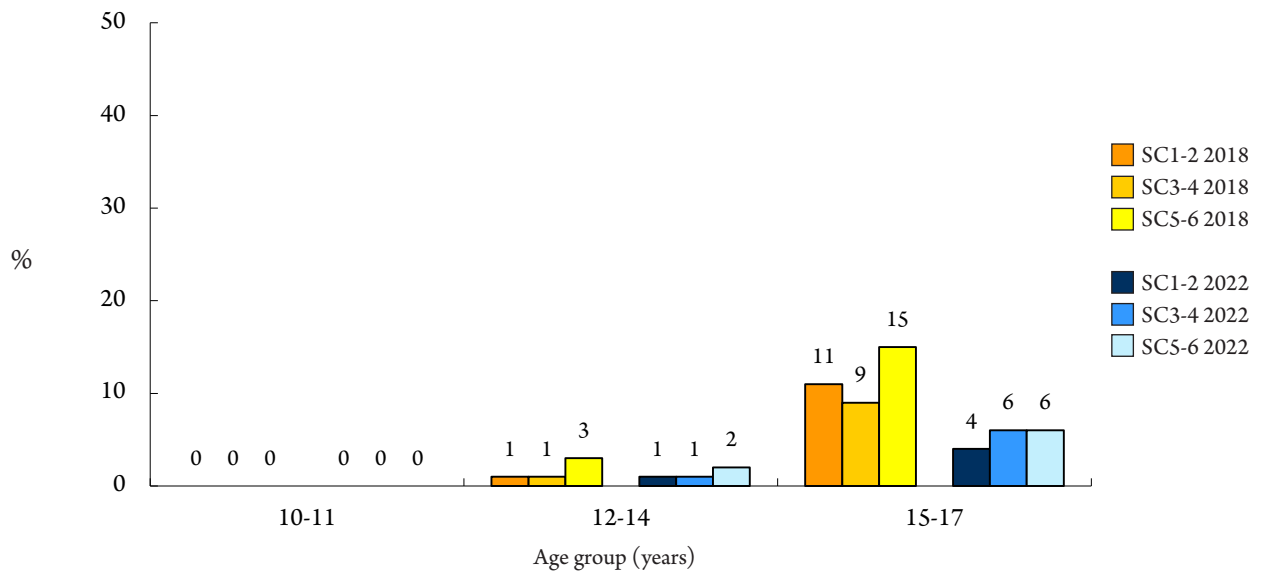
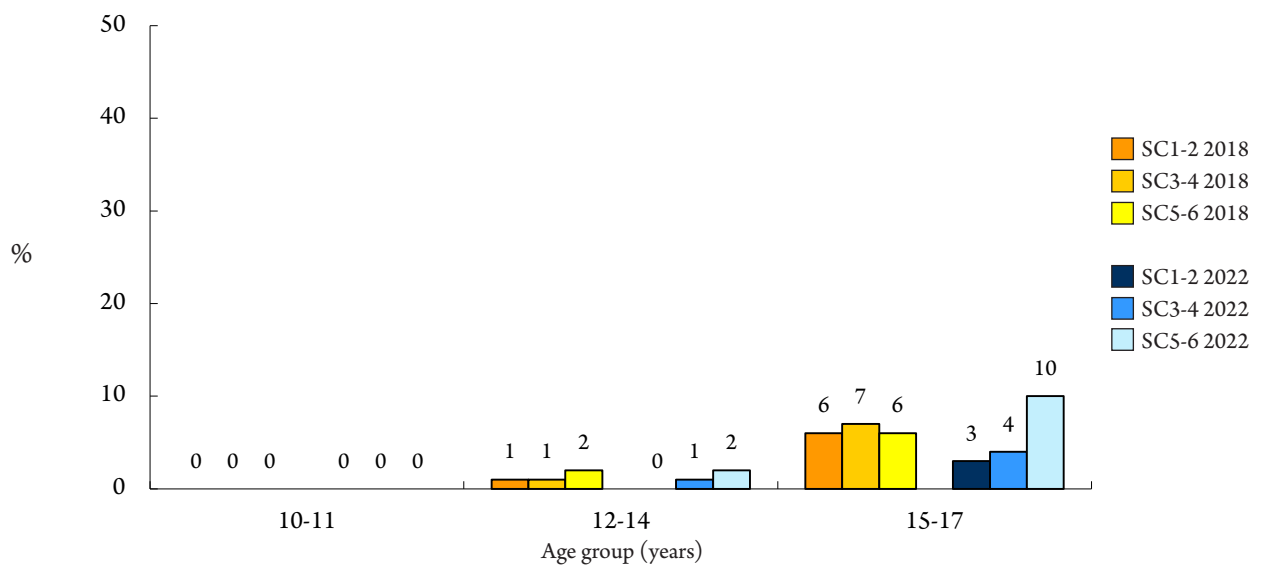


Figure 33: Percentages of girls who report they have used cannabis in the last 30 days



Food and Dietary Behaviours

Fruit

There are no statistically significant differences by gender or age group. Overall, 24% of boys and 25% of girls report that they consume fruit more than once a day. There is a statistically significant difference across social class groups, with children from the highest social class group more likely to report that they consume fruit more than once a day than those from other social class groups.

Figure 34: Percentages of boys who report they consume fruit more than once a day

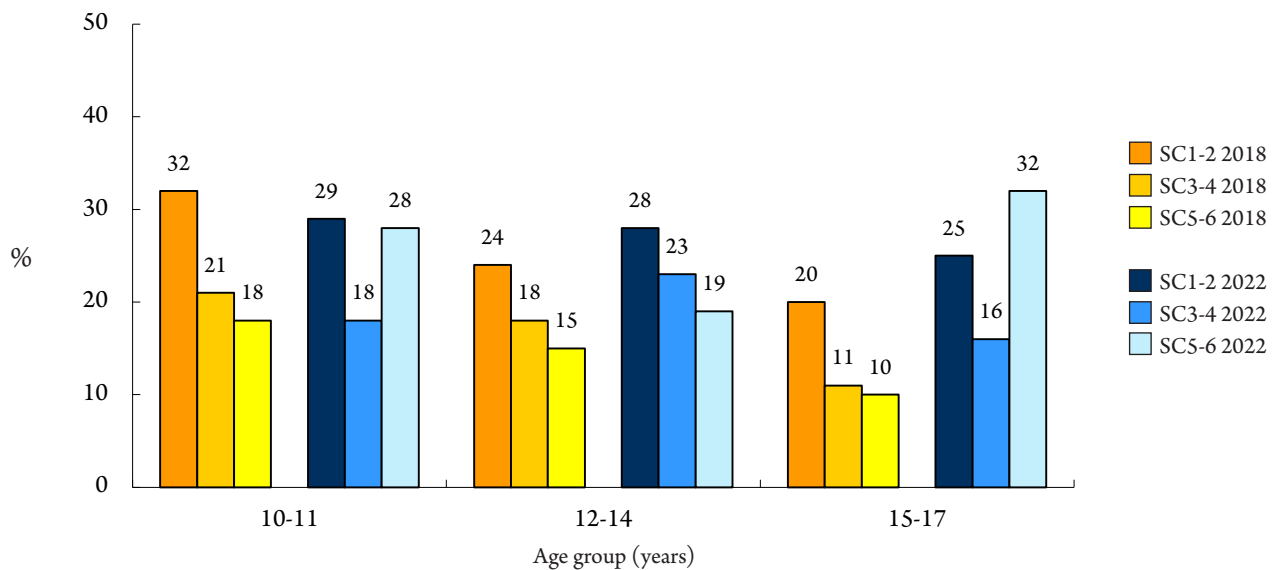
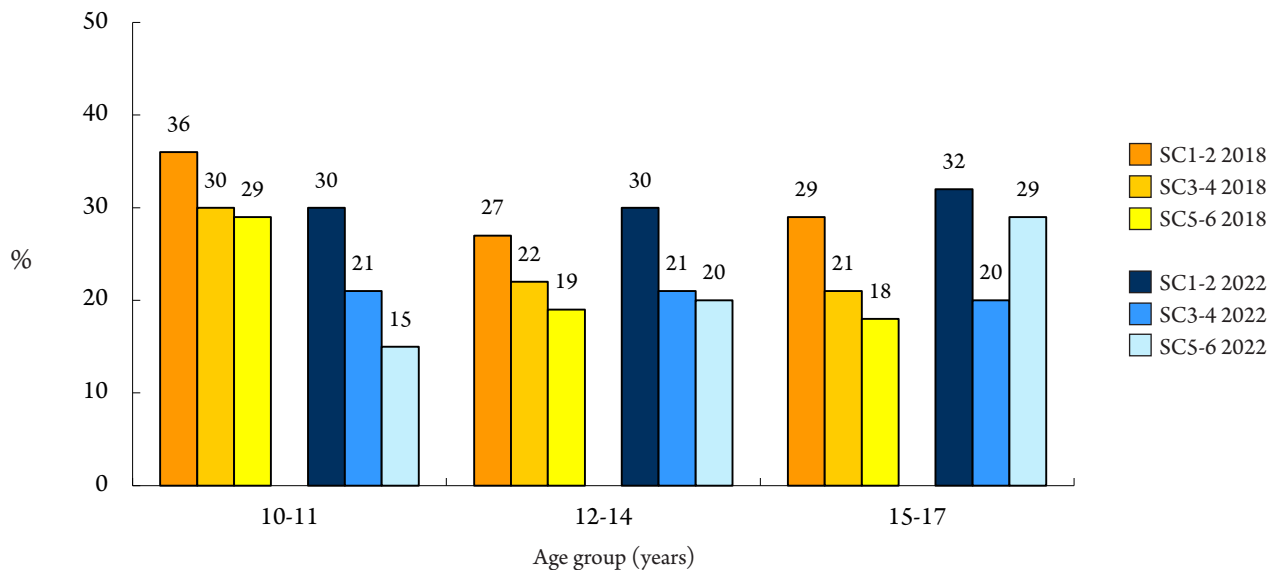


Figure 35: Percentages of girls who report they consume fruit more than once a day



Vegetables

There are no statistically significant differences by gender or age group. Overall, 22% of boys and 23% of girls report that they consume vegetables more than once a day. There is a statistically significant difference across social class groups, with children from the highest social class group more likely to report that they consume vegetables more than once a day than those from other social class groups.

Figure 36: Percentages of boys who report they consume vegetables more than once a day

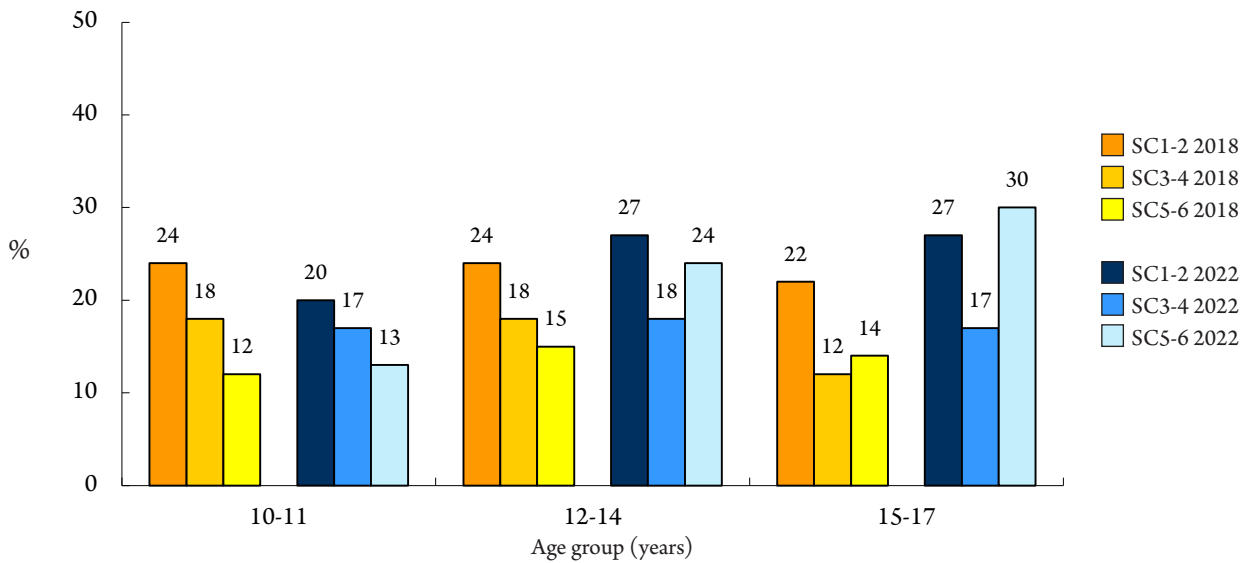
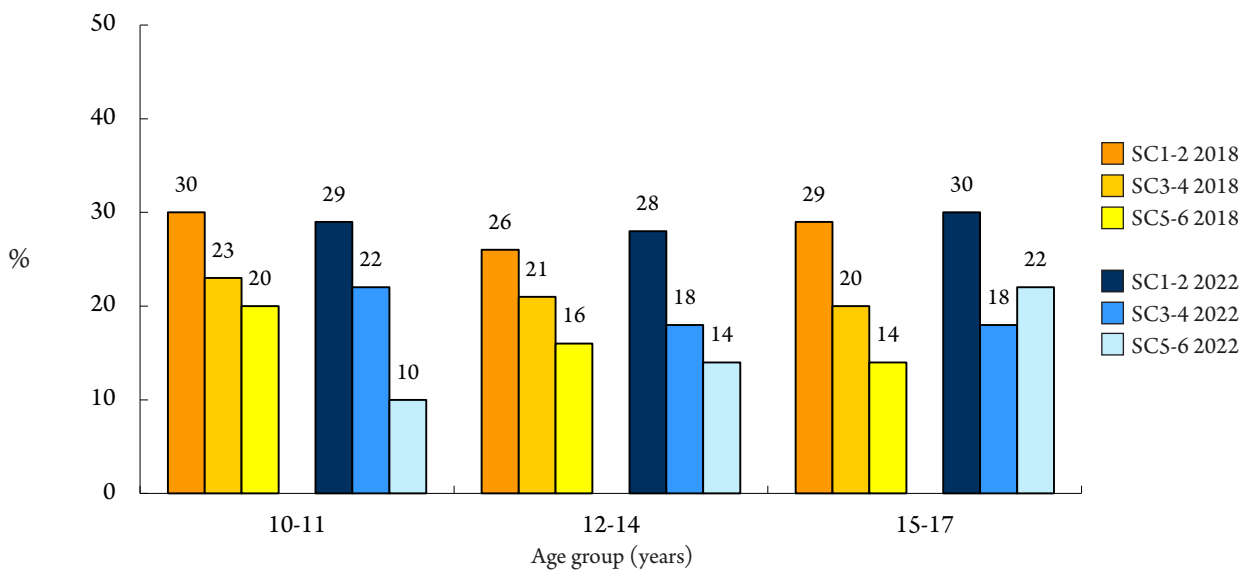


Figure 37: Percentages of girls who report they consume vegetables more than once a day



Sweets

There are statistically significant differences by gender and age group. Overall, 22% of boys and 26% of girls report that they eat sweets once a day or more. Older children are more likely than younger children to report eating sweets once a day or more. There is no statistically significant difference across social class groups.

Figure 38: Percentages of boys who report they eat sweets once a day or more

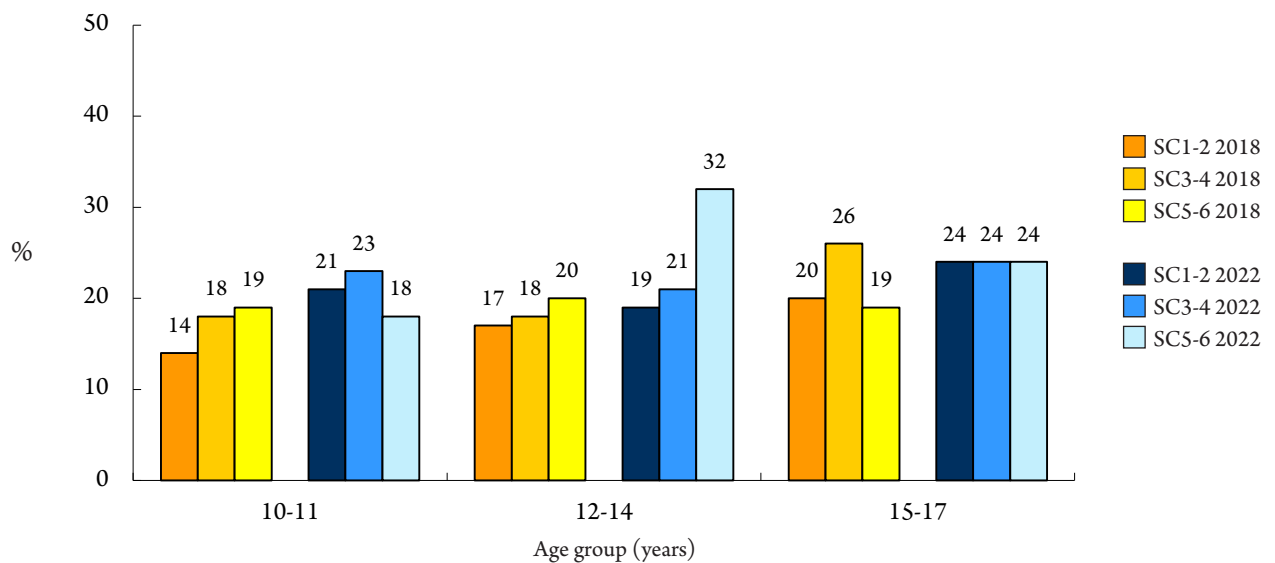
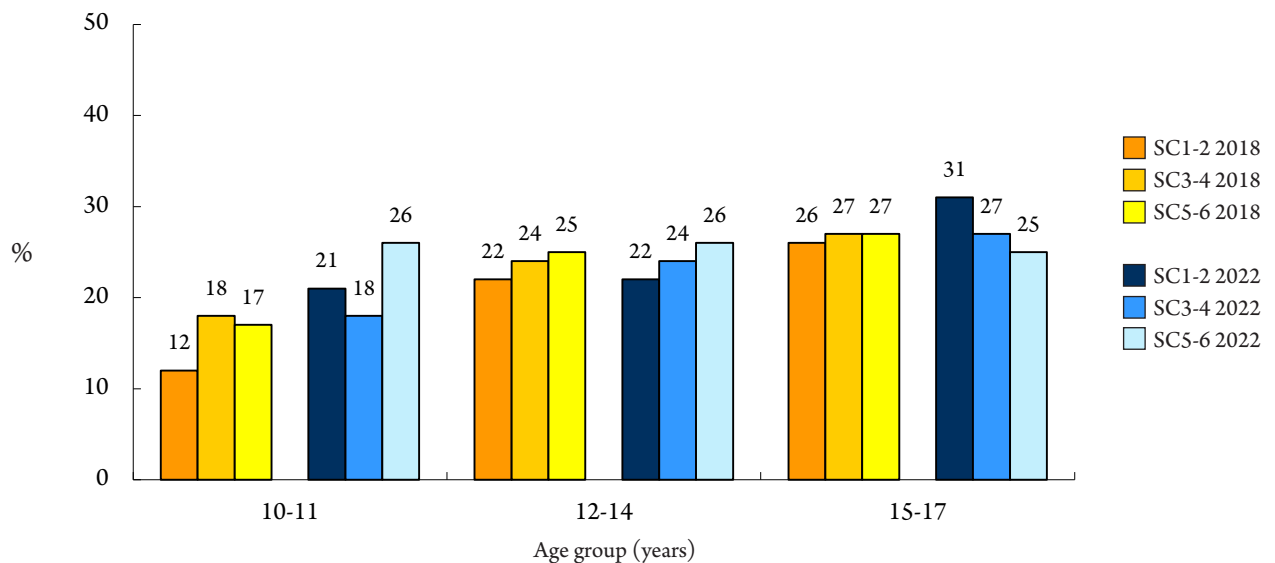


Figure 39: Percentages of girls who report they eat sweets once a day or more



Soft drinks

There is no statistically significant difference by gender. Overall, 7% of boys and 6% of girls report that they drink soft drinks daily or more. There are statistically significant differences across age groups and social class groups. Older children are more likely to report that they drink soft drinks daily or more than younger children. Children from lower social class groups are more likely to report that they drink soft drinks daily or more than those from other social class groups.

Figure 40: Percentages of boys who report they drink soft drinks daily or more

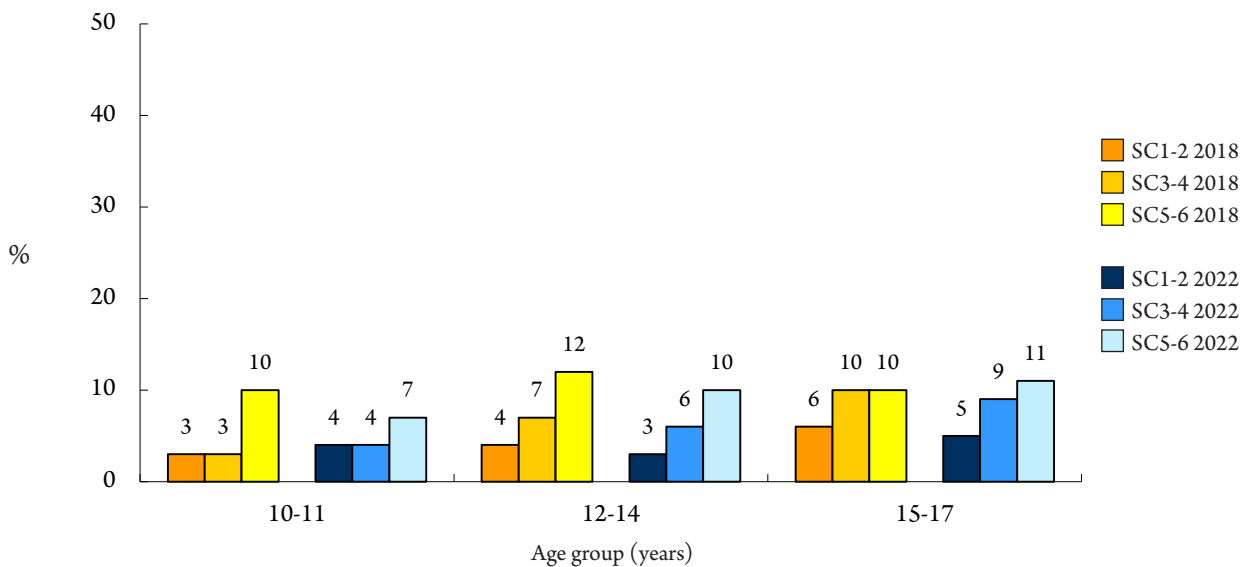
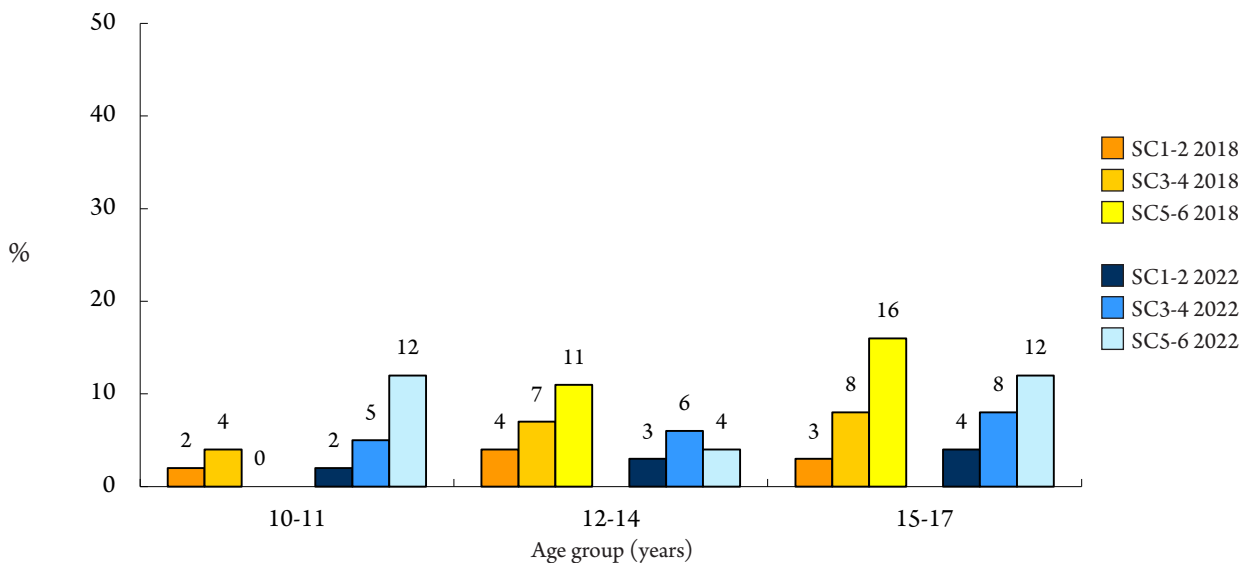


Figure 41: Percentages of girls who report they drink soft drinks daily or more



Not having breakfast

There are statistically significant differences by gender, age group and social class. Overall, 14% of boys and 24% of girls report never having breakfast on weekdays. Older children are more likely to report never having breakfast on weekdays than younger children. Children from lower social class groups are more likely to report never having breakfast on weekdays than those from other social class groups.

Figure 42: Percentages of boys who report never having breakfast on weekdays

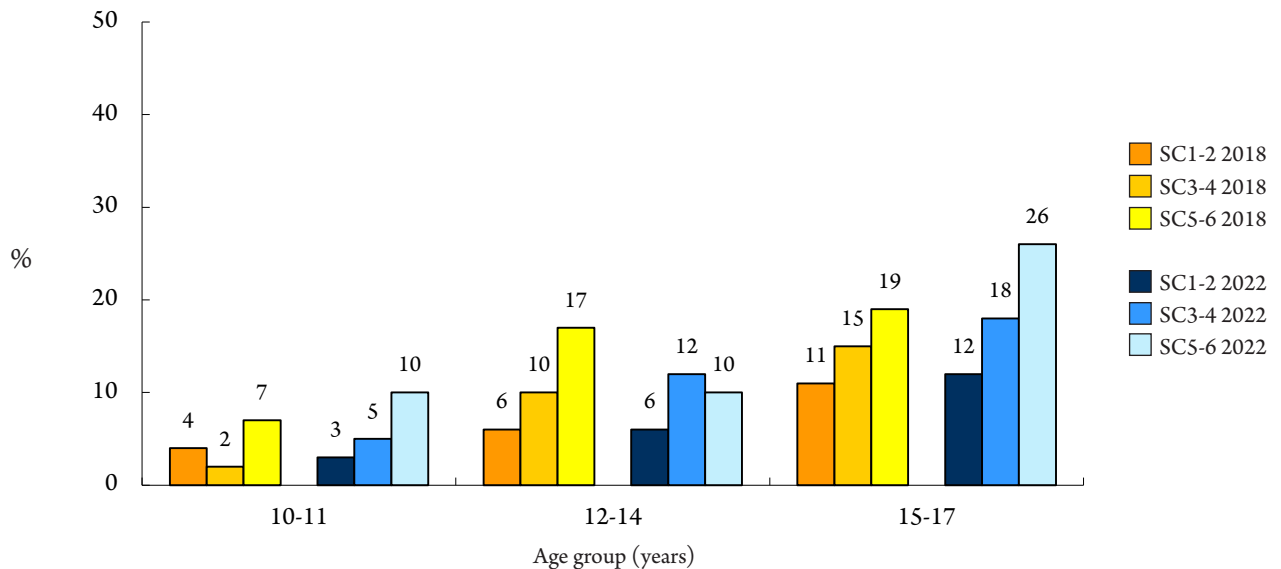
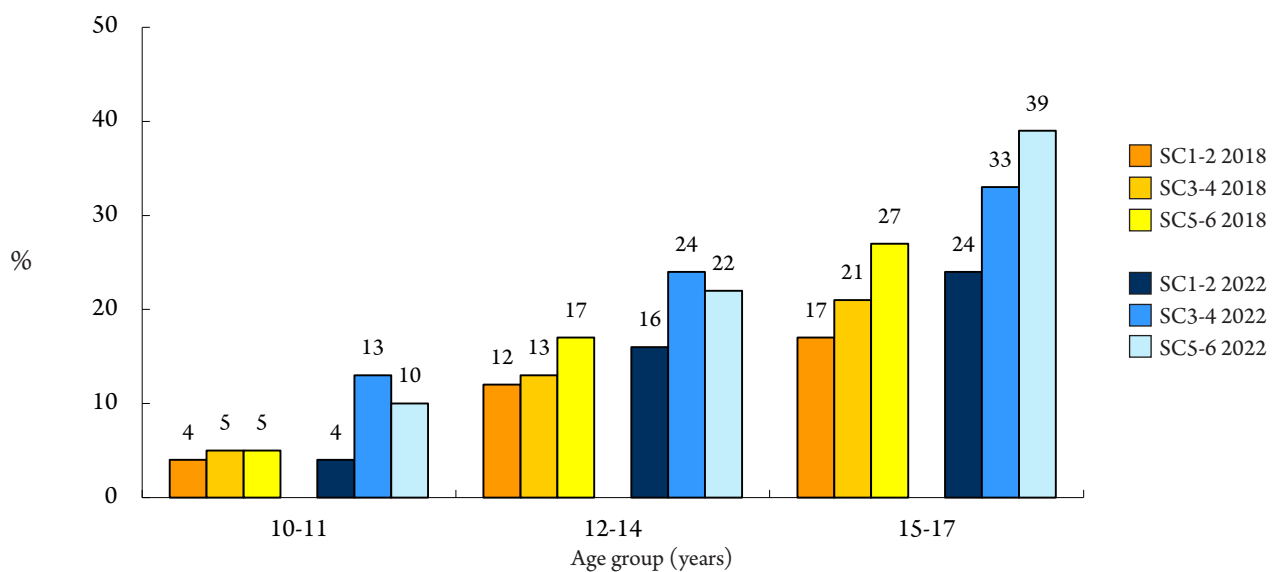


Figure 43: Percentages of girls who report never having breakfast on weekdays



Going to school or bed hungry

There are statistically significant differences by gender, age group and social class. Overall, 19% of boys and 17% of girls report ever going to school or bed hungry because there was not enough food at home. Younger children are more likely to report ever going to school or bed hungry than older children. Children from lower social class groups are more likely to report ever going to school or bed hungry than those from other social class groups.

Figure 44: Percentages of boys who report ever going to school or bed hungry

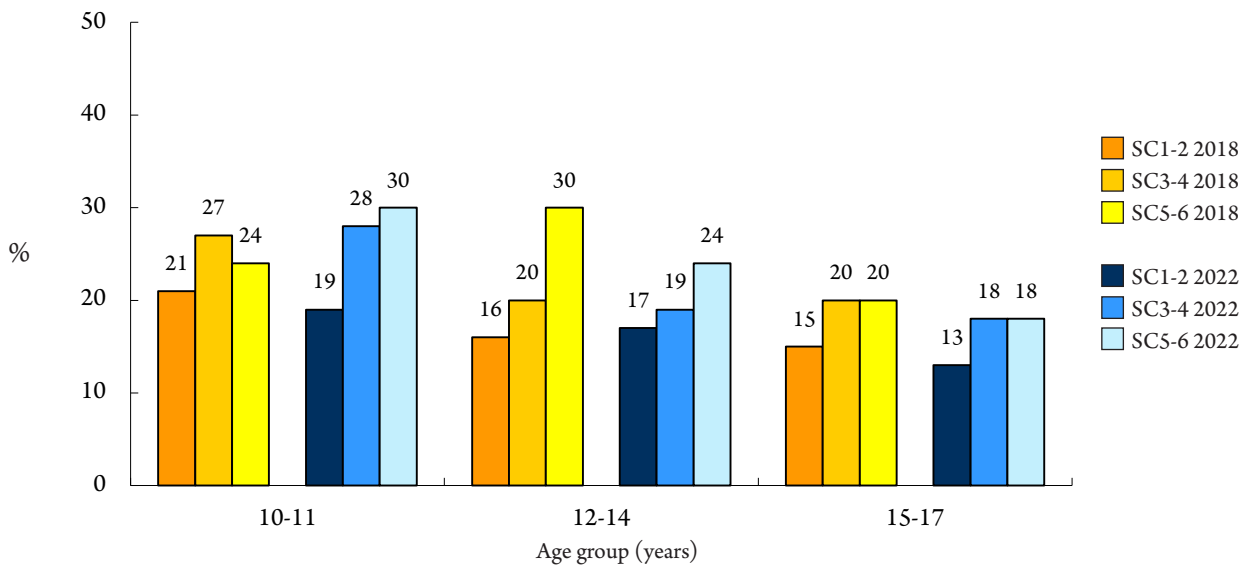
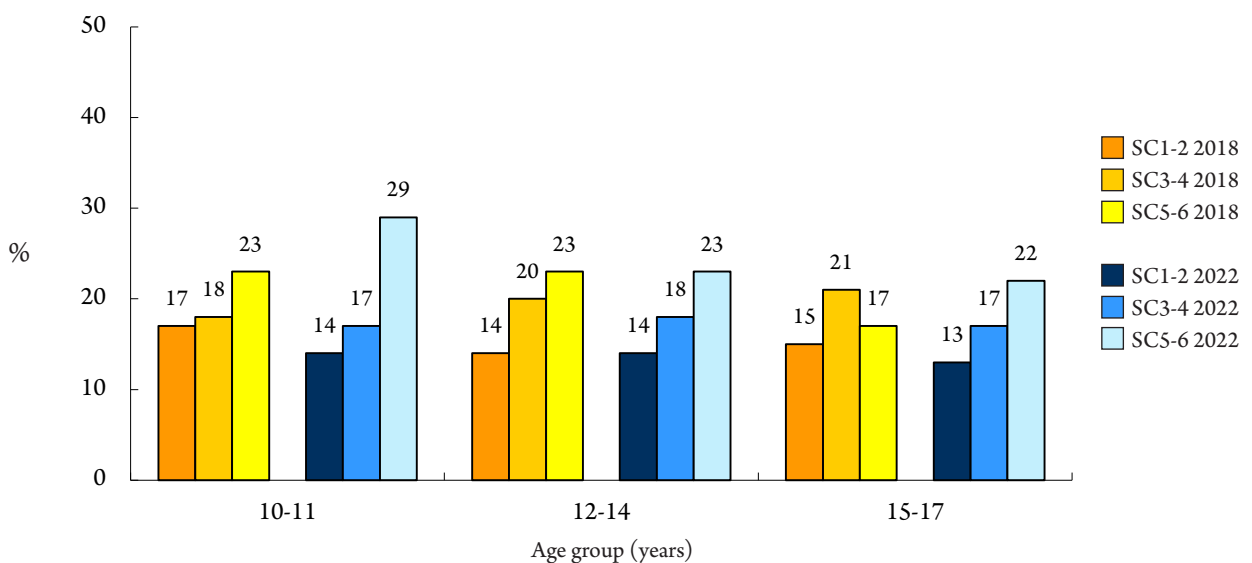


Figure 45: Percentages of girls who report ever going to school or bed hungry



Dieting or other weight loss methods

There are statistically significant differences by gender and age group. Overall, 11% of boys and 14% of girls report dieting or doing something else to lose weight. Older children are more likely to report trying to lose weight than younger children. There is no statistically significant difference across social class groups.

Figure 46: Percentages of boys who report dieting or doing something else to lose weight

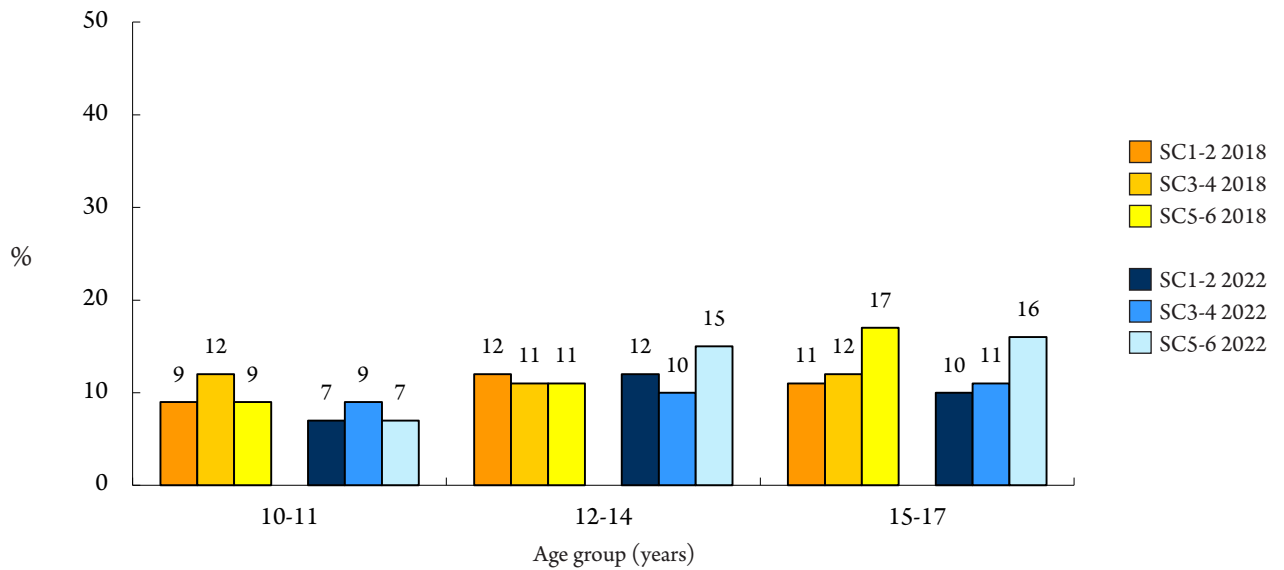
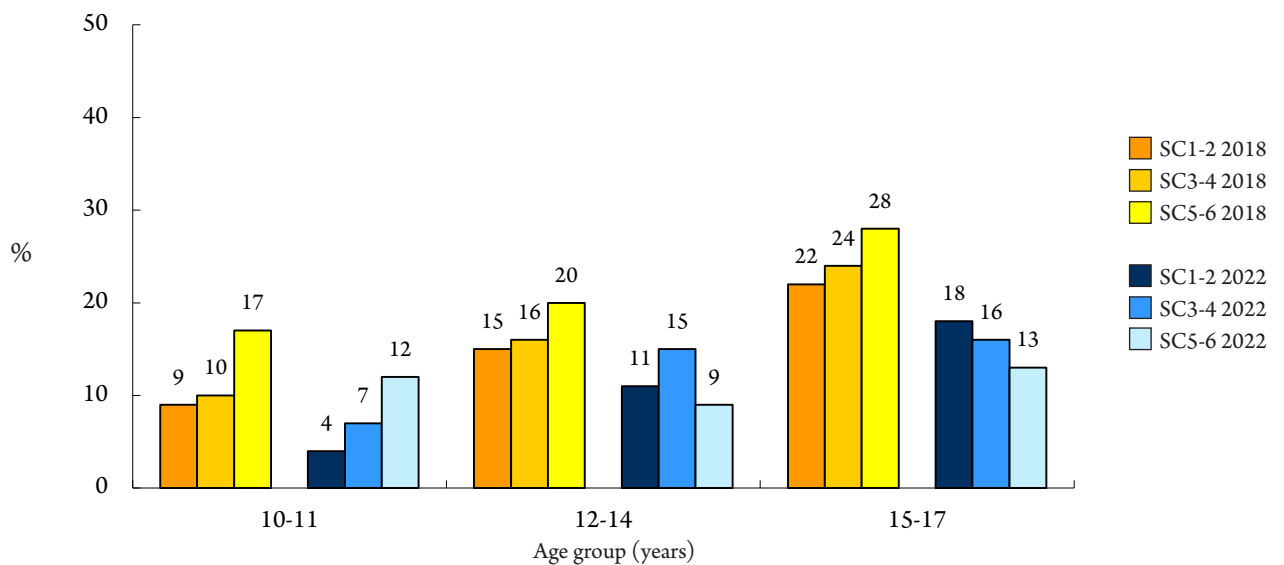


Figure 47: Percentages of girls who report dieting or doing something else to lose weight



Exercise and Physical Activity

Vigorous exercise four or more times per week

There are statistically significant differences by gender, age group and social class. Overall, 59% of boys and 42% of girls report participating in vigorous exercise four or more times per week. Younger children are more likely to report that they vigorously exercise four or more times a week than older children. Children from higher social class groups are more likely to report that they vigorously exercise four or more times a week than those from other social class groups.

Figure 48: Percentages of boys who report participating in vigorous exercise four or more times per week

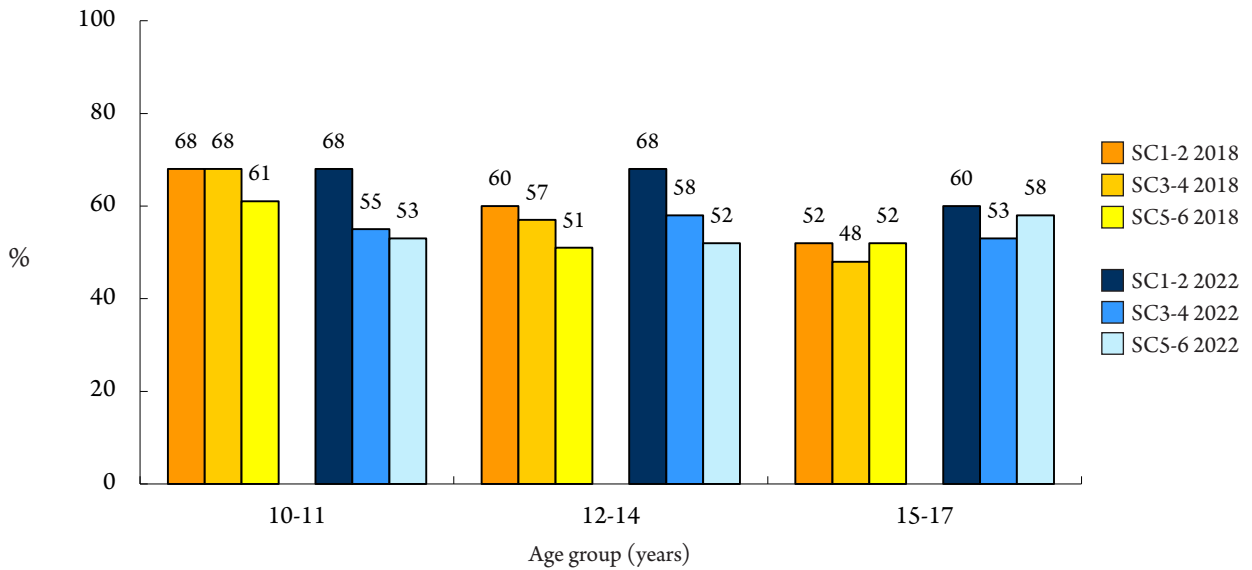
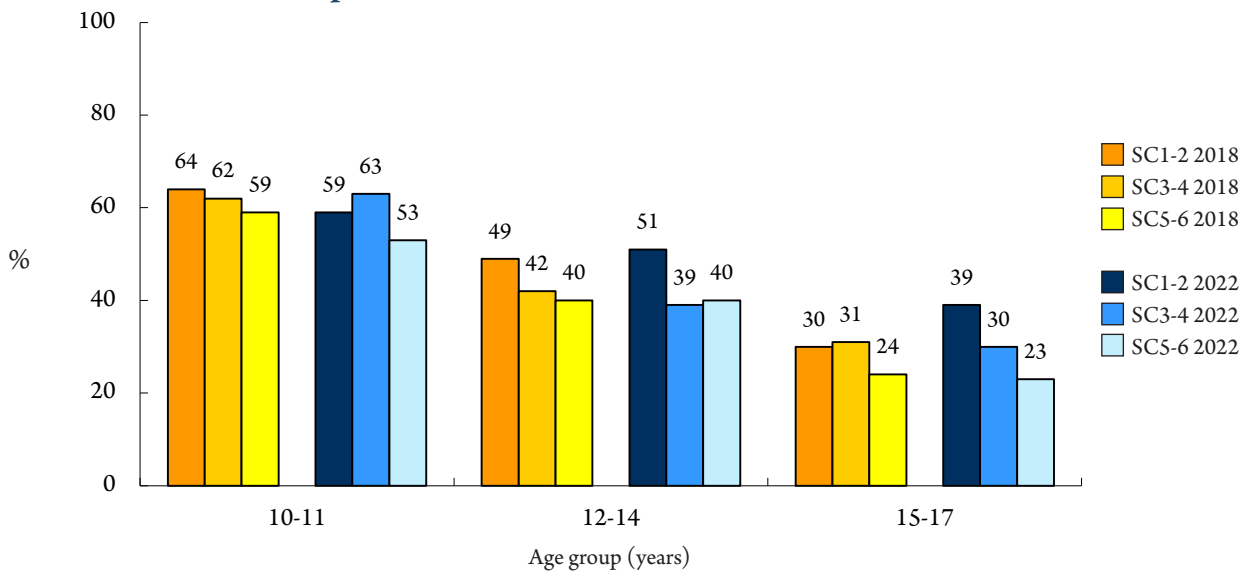


Figure 49: Percentages of girls who report participating in vigorous exercise four or more times per week



Physical inactivity

There are statistically significant differences by gender, age group and social class. Overall, 8% of boys and 11% of girls report participating in vigorous exercise less than weekly. Older children are more likely to report participating in vigorous exercise less than weekly than younger children. Children from lower social class groups are more likely to report participating in vigorous exercise less than weekly than those from other social class groups.

Figure 50: Percentages of boys who report participating in vigorous exercise less than weekly

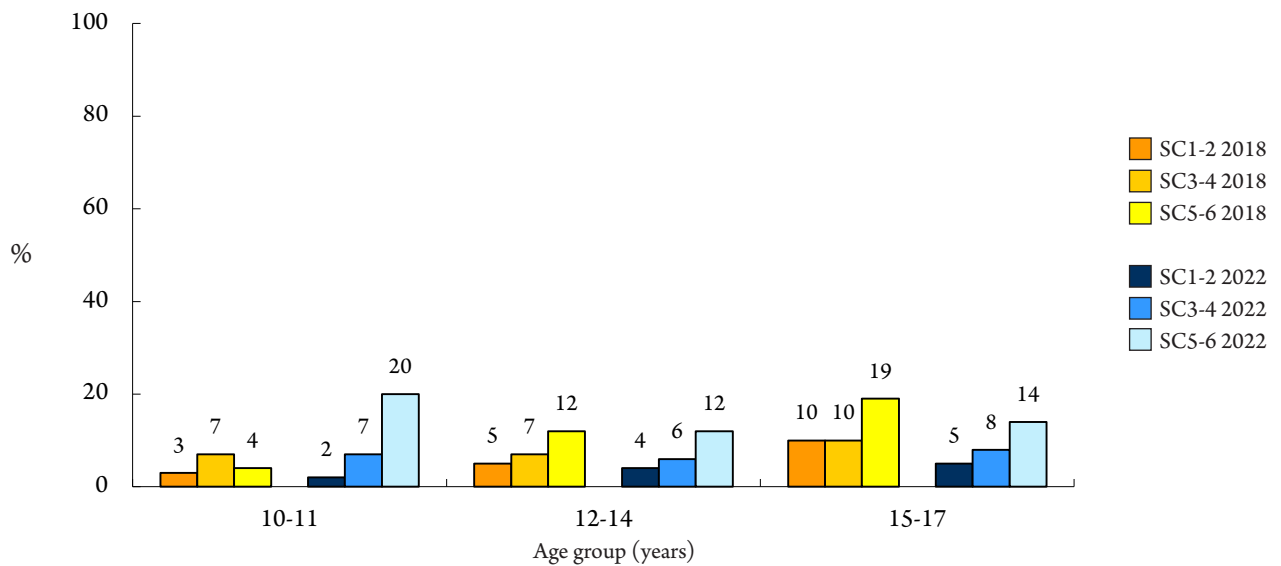
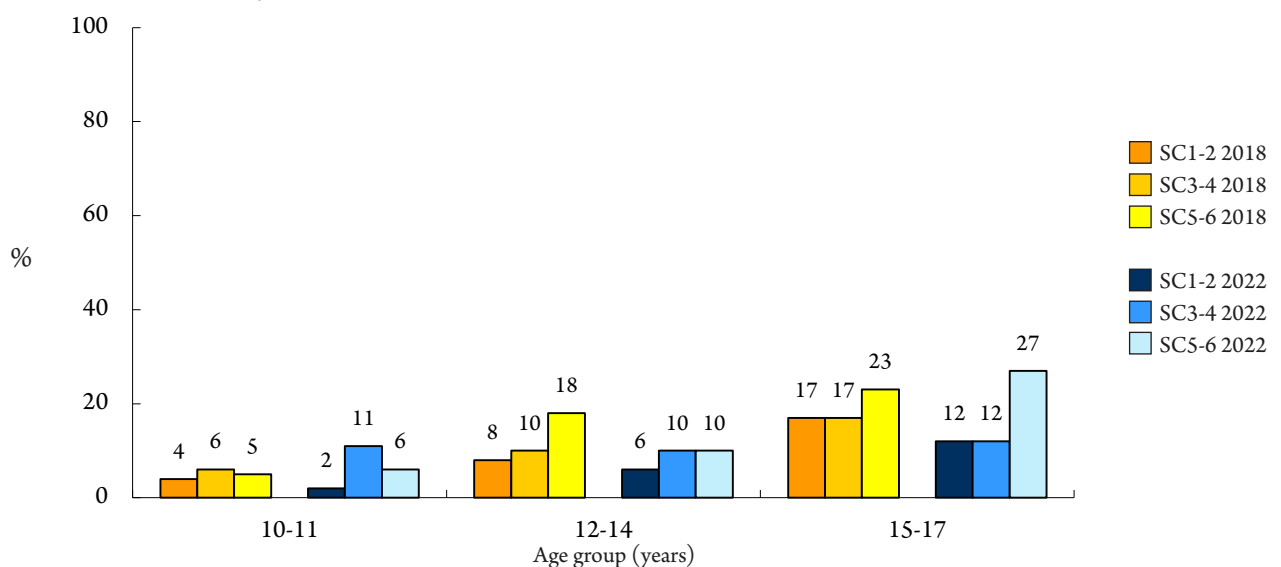


Figure 51: Percentages of girls who report participating in vigorous exercise less than weekly



Physically active on seven days in the last week

There are statistically significant differences by gender and age group. Overall, 30% of boys and 18% of girls report being physically active on seven days in the last week. Younger children are more likely to report being physically active on seven days in the last week than older children. There is no statistically significant difference across social class groups.

Figure 52: Percentages of boys who report being physically active on seven days in the last week

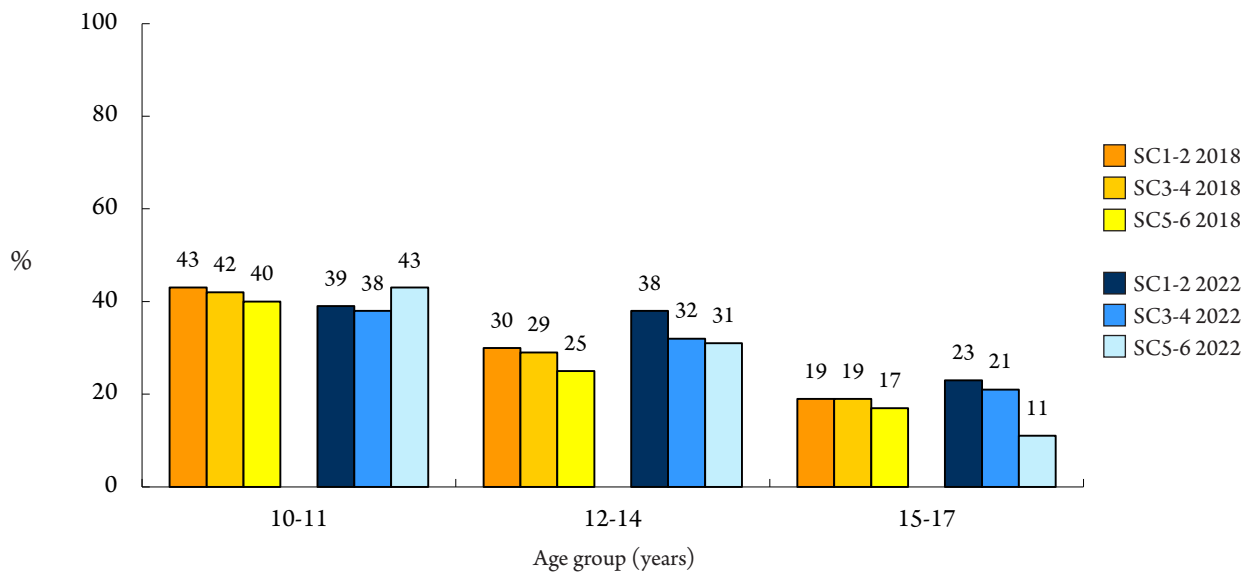
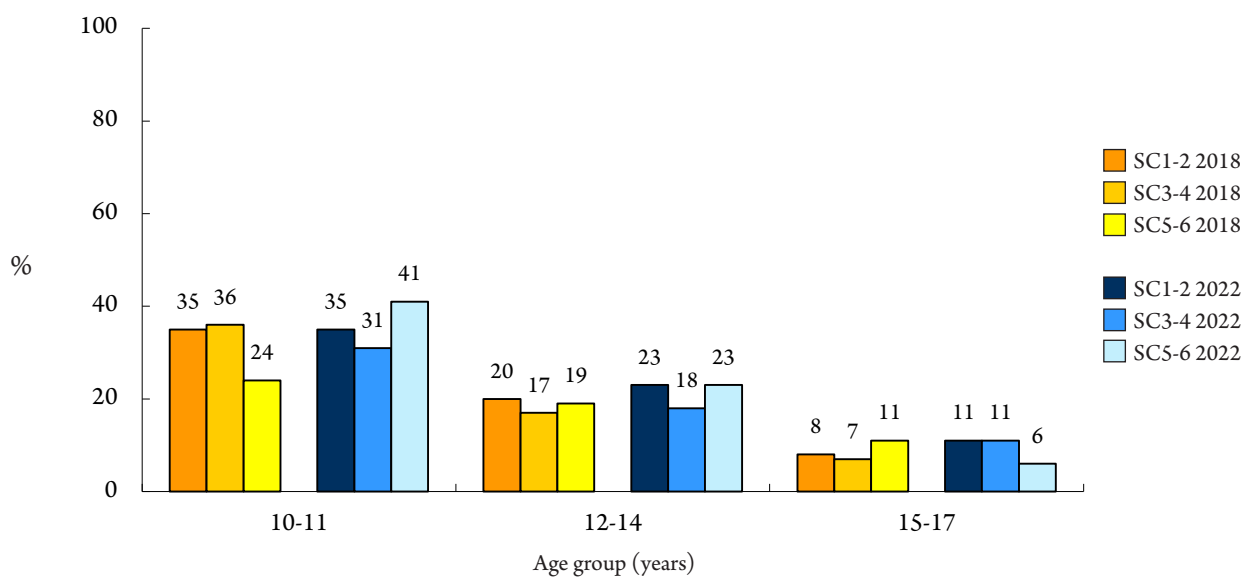


Figure 53: Percentages of girls who report being physically active on seven days in the last week



Self-Care

Toothbrushing

There are statistically significant differences by gender, age group and social class. Overall, 66% of boys and 79% of girls report brushing their teeth more than once a day. Older children are more likely to report brushing their teeth more than once a day than younger children. Children from higher social class groups are more likely to report brushing their teeth more than once a day than those from other social class groups.

Figure 54: Percentages of boys who report brushing their teeth more than once a day

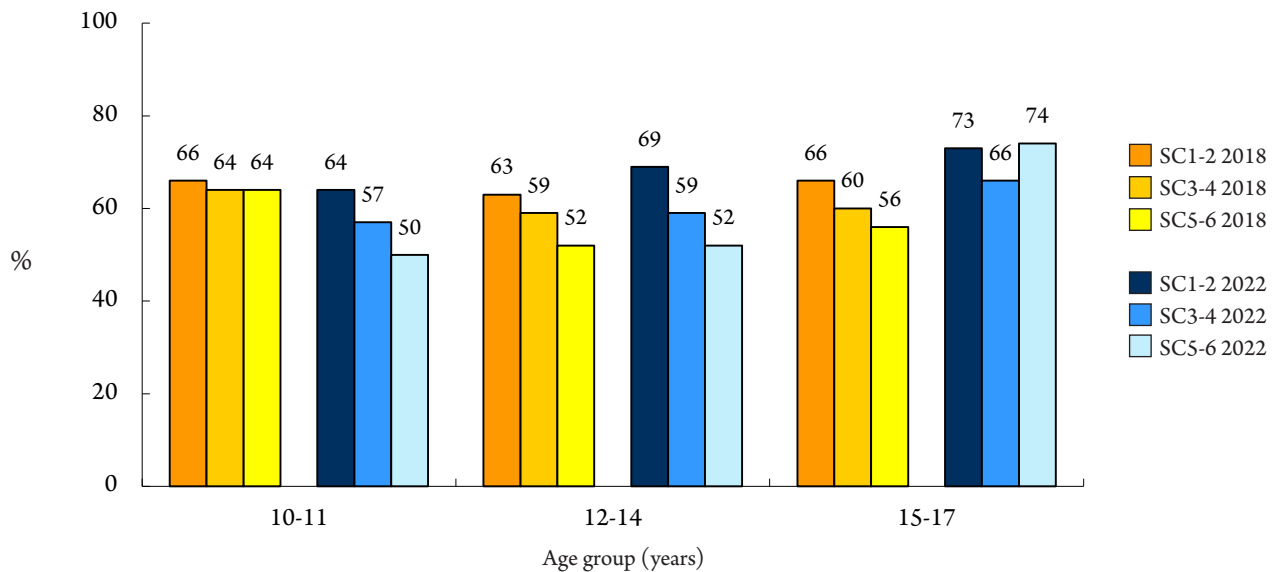
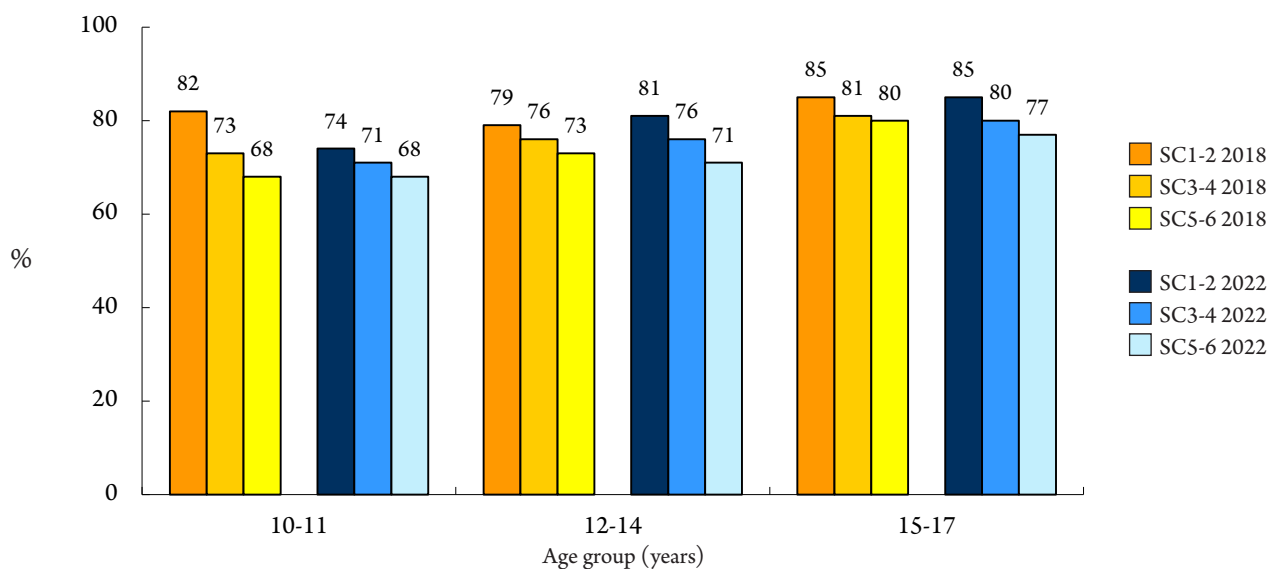


Figure 55: Percentages of girls who report brushing their teeth more than once a day



Seatbelt use

There is no statistically significant difference by gender. Overall, 81% of boys and 82% of girls report always wearing a seatbelt when in a car. There are statistically significant differences across age groups and social class groups. Younger children are more likely to report always wearing a seatbelt when in a car than older children. Children from higher social class groups are more likely to report always wearing a seatbelt when in a car than those from other social class groups.

Figure 56: Percentages of boys who report always wearing a seatbelt when in a car

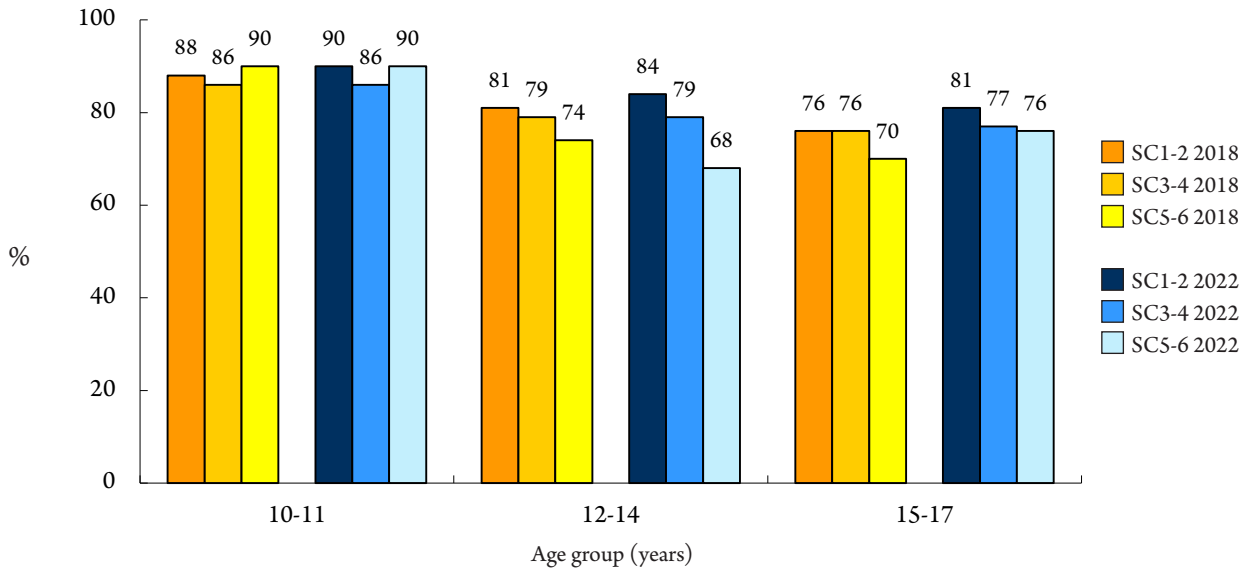
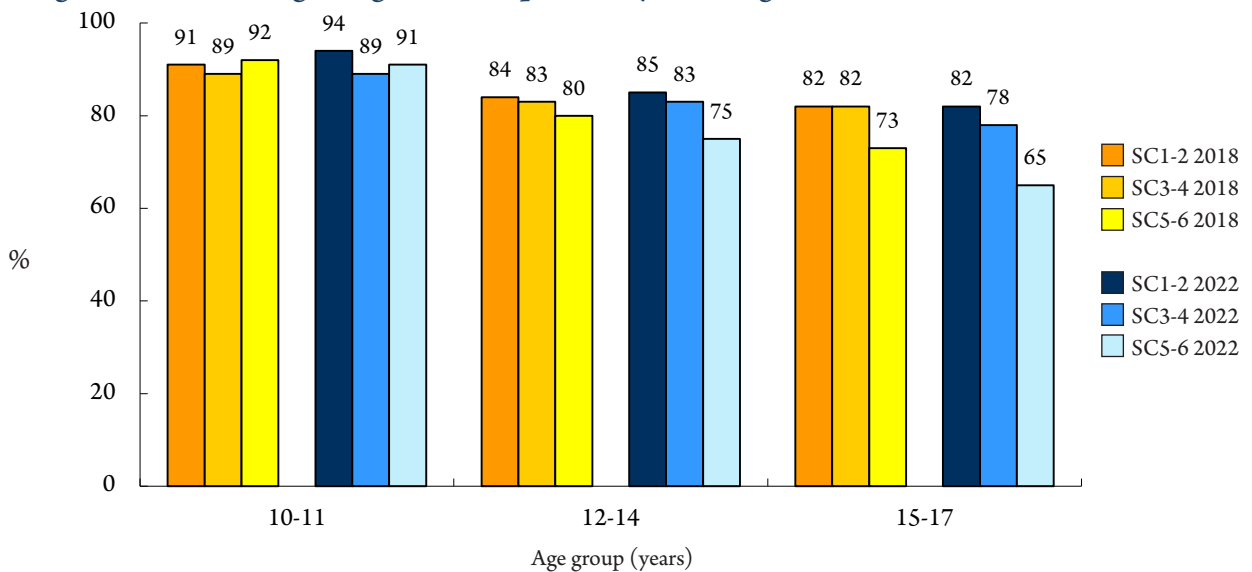


Figure 57: Percentages of girls who report always wearing a seatbelt when in a car



Sun Safety Behaviours

Sunscreen use

There are statistically significant differences by gender, age group and social class. Overall, 80% of boys and 91% of girls report always or sometimes using sunscreen on a sunny day. Younger children are more likely to report always or sometimes using sunscreen on a sunny day than older children. Children from higher social class groups are more likely to report always or sometimes using sunscreen on a sunny day than those from other social class groups.

Figure 58: Percentages of boys who report always or sometimes using sunscreen on a sunny day

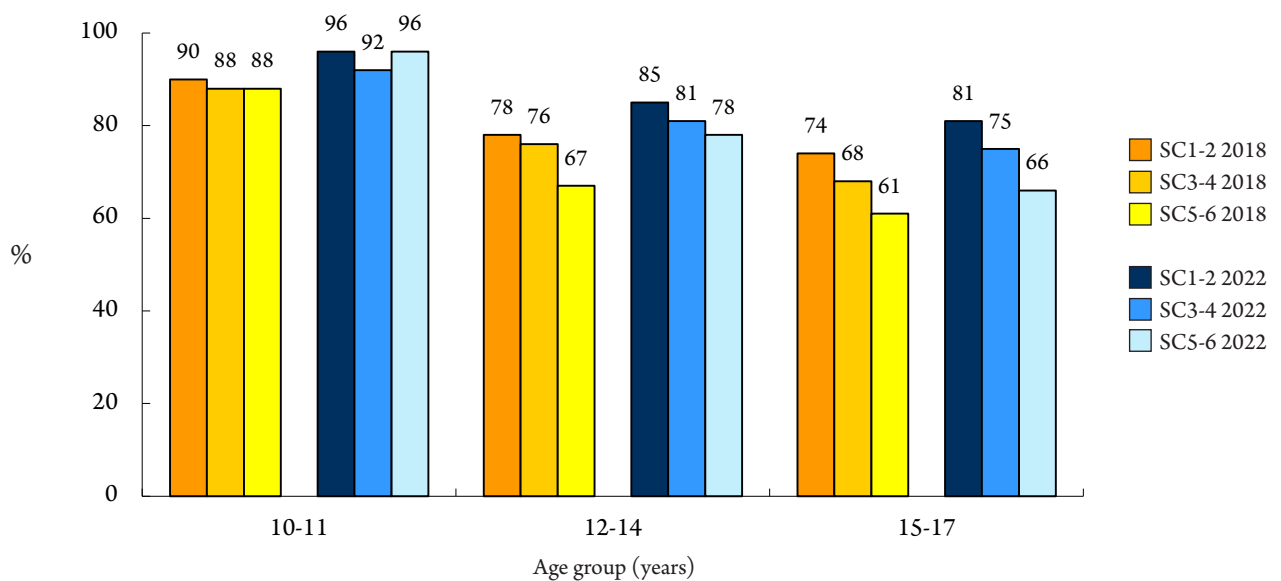
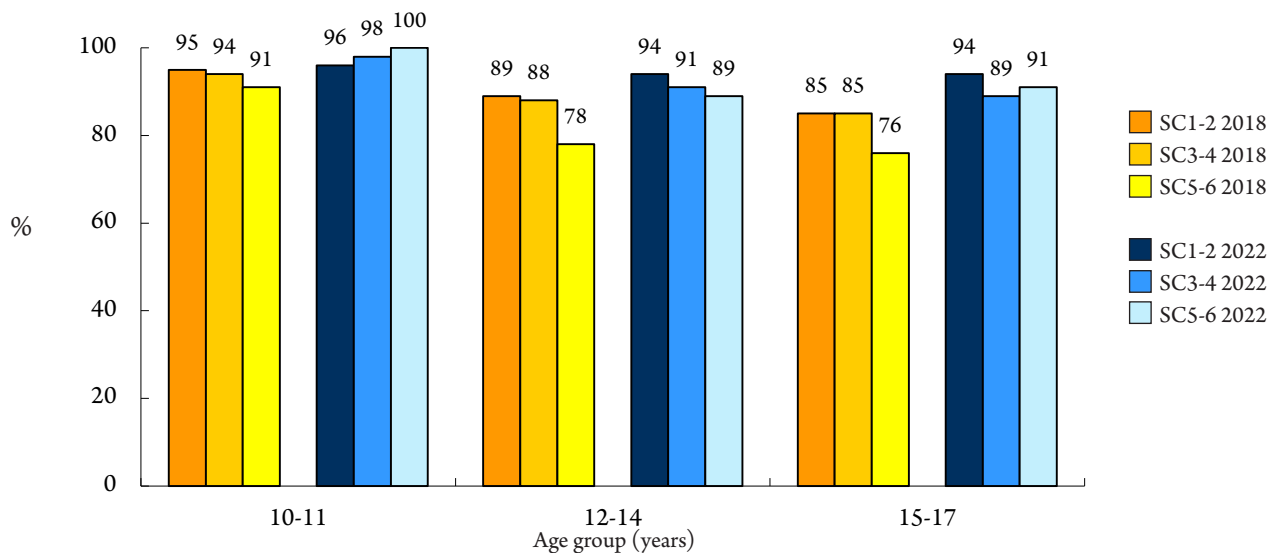


Figure 59: Percentages of girls who report always or sometimes using sunscreen on a sunny day



Sunburn last summer

There are statistically significant differences by gender and age group. Overall, 72% of boys and 79% of girls report having been sunburnt at least once last summer. Older children are more likely to report having been sunburnt at least once last summer than younger children. There is no statistically significant difference across social class groups.

Figure 60: Percentages of boys who report having been sunburnt last summer

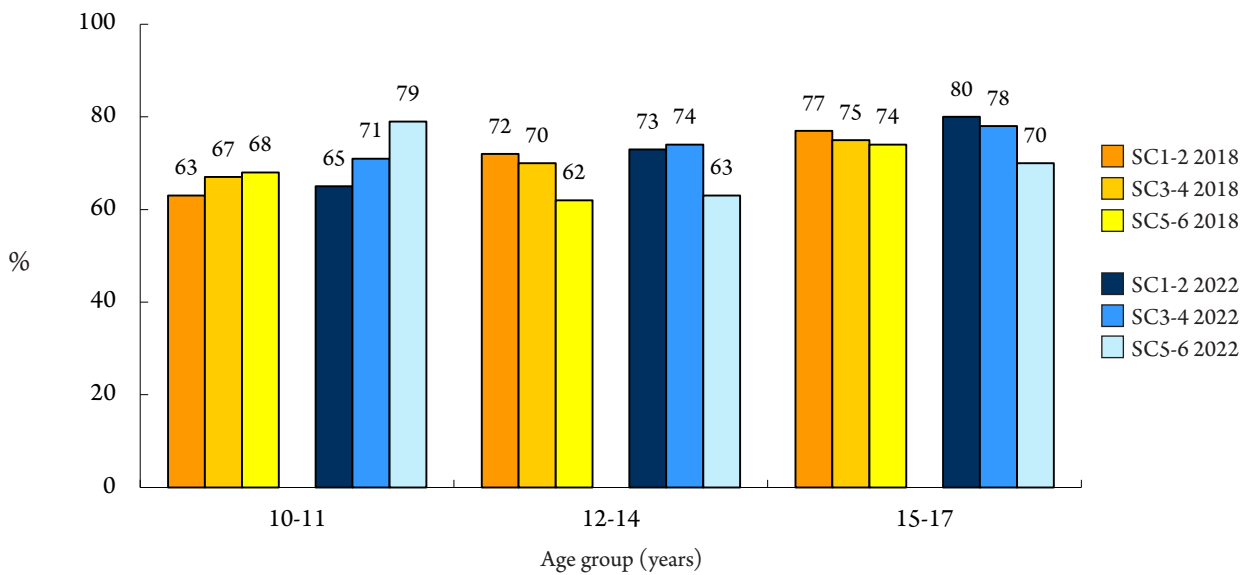
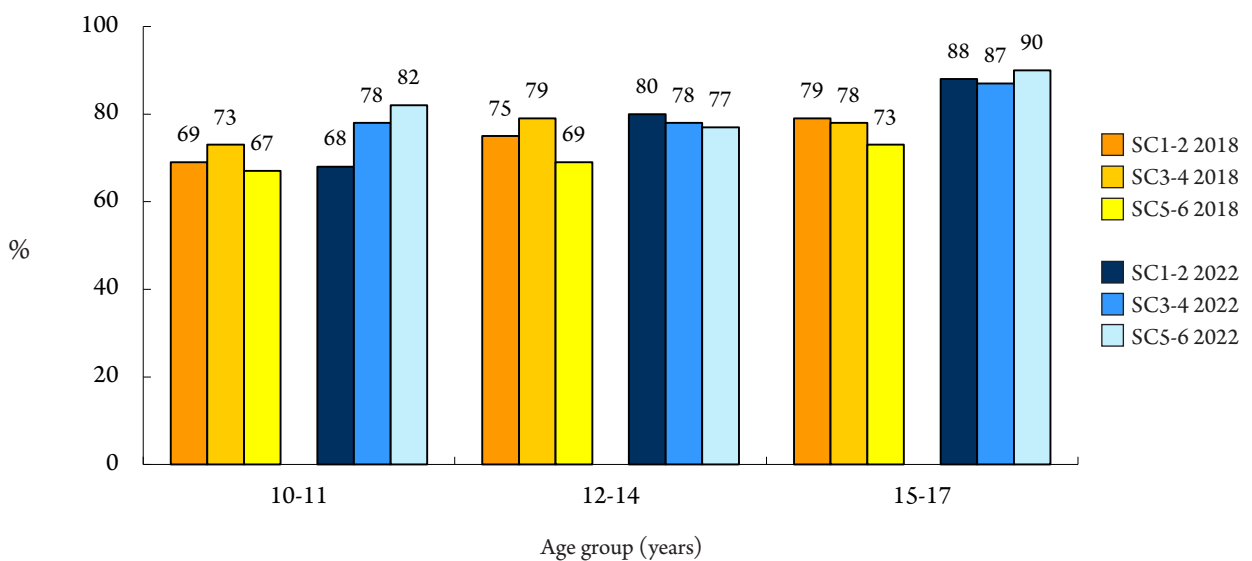


Figure 61: Percentages of girls who report having been sunburnt last summer

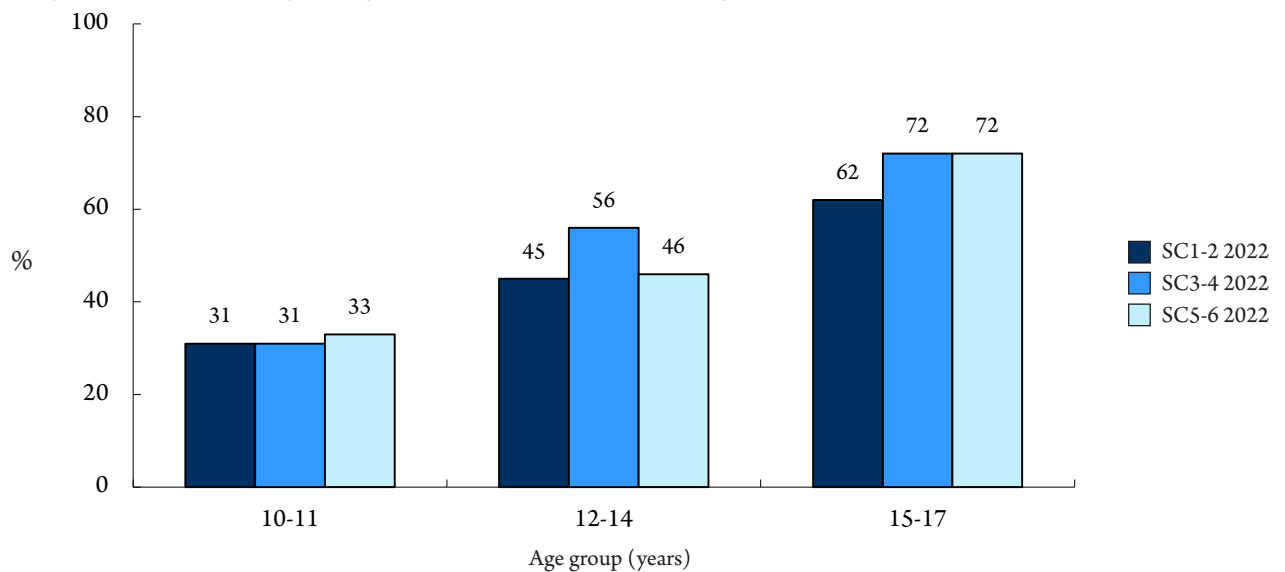


Menstrual Health and Period Poverty*

Missed school as a result of period symptoms

Overall, 60% of girls who have begun to menstruate report ever missing school as a result of period symptoms. There are statistically significant differences by age group and social class. Older girls are more likely to report ever missing school as a result of period symptoms than younger girls. Girls from the middle social class group are more likely to report ever missing school as a result of period symptoms than girls from other social class groups.

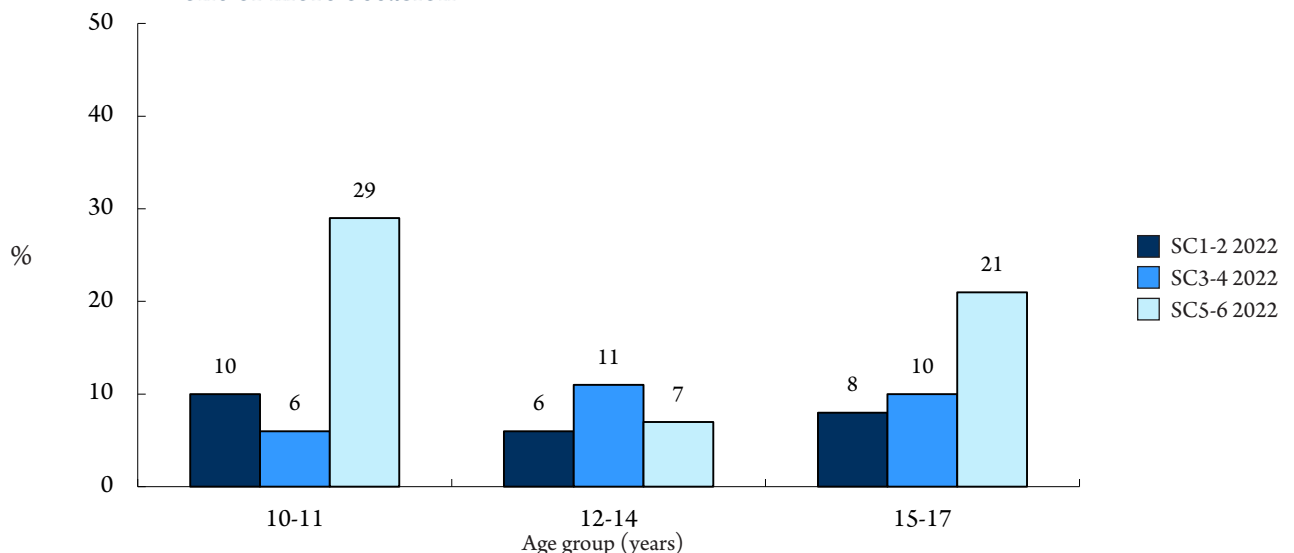
Figure 62: Percentages of girls who report ever missing school as a result of period symptoms



Period poverty

Overall, 10% of girls who have begun to menstruate report being unable to afford period products on one or more occasion. There is no statistically significant difference by age group. There is a statistically significant difference by social class, with girls from lower social class groups more likely to report being unable to afford period products on one or more occasion than girls from other social class groups.

Figure 63: Percentages of girls who report being unable to afford period products on one or more occasion



*New items for 2022, therefore no 2018 data comparison.

Injuries

Ever injured

There is a statistically significant difference by gender. Overall, 47% of boys and 39% of girls report being injured once or more and requiring medical attention in the last 12 months. There are no statistically significant differences across age groups or social class groups.

Figure 64: Percentages of boys who report being injured in the last 12 months

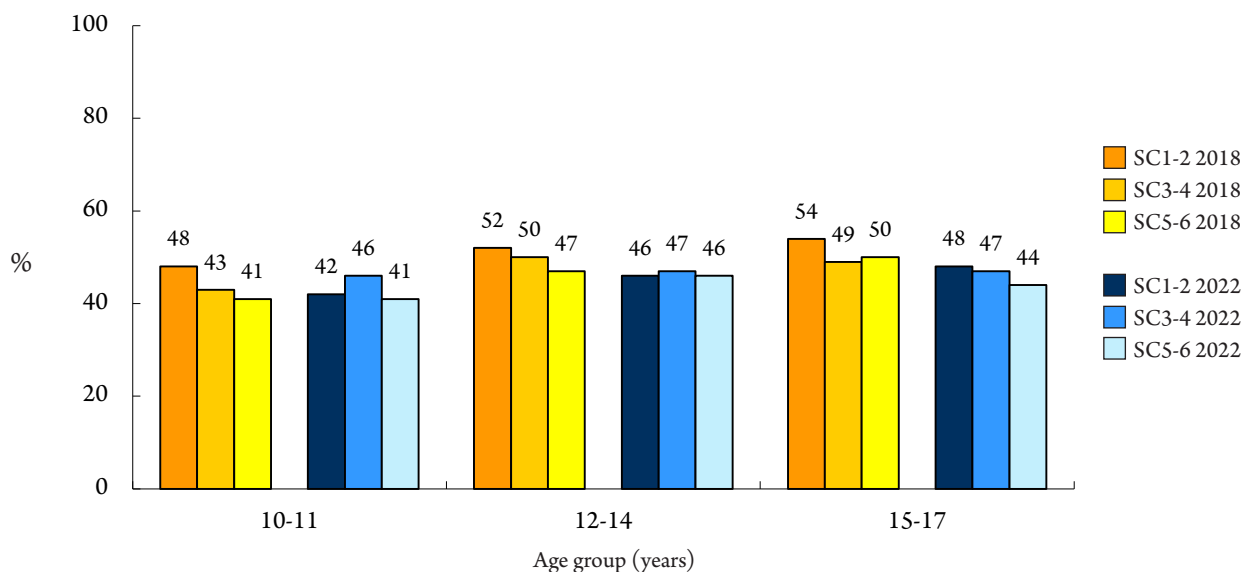
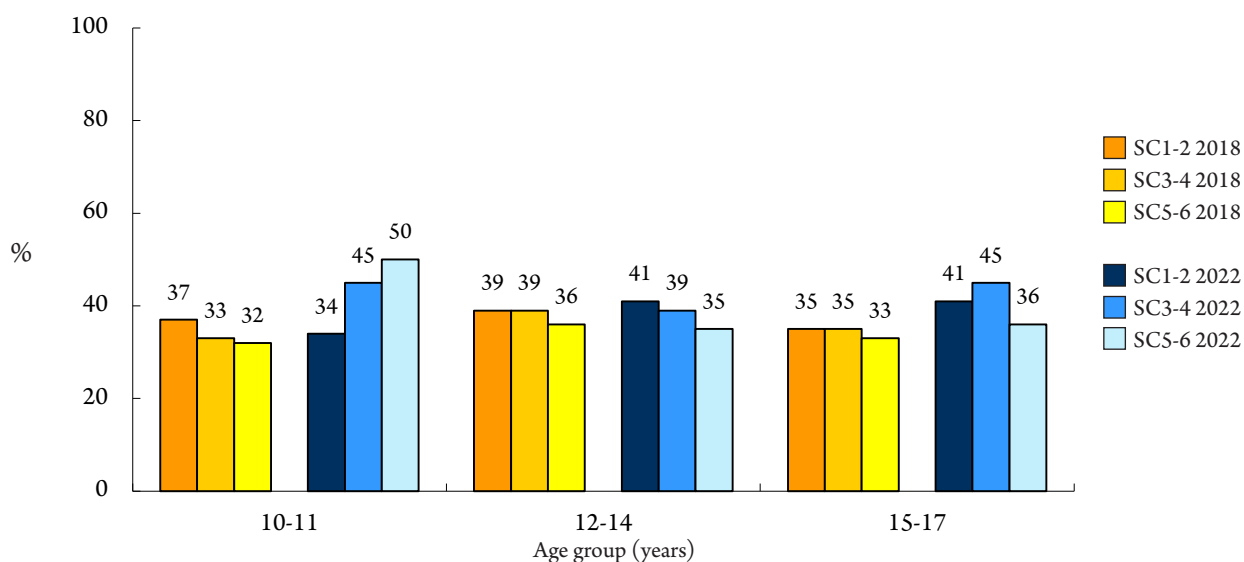


Figure 65: Percentages of girls who report being injured in the last 12 months



Physical Fighting and Bullying

Physical fight

There are statistically significant differences by gender, age group and social class. Overall, 37% of boys and 18% of girls report having been in a physical fight in the last 12 months. Younger children are more likely to report having been in a physical fight in the last twelve months than older children. Children from the highest social class group are less likely to report having been in a physical fight in the last twelve months than other social class groups.

Figure 66: Percentages of boys who report having been in a physical fight in the last 12 months

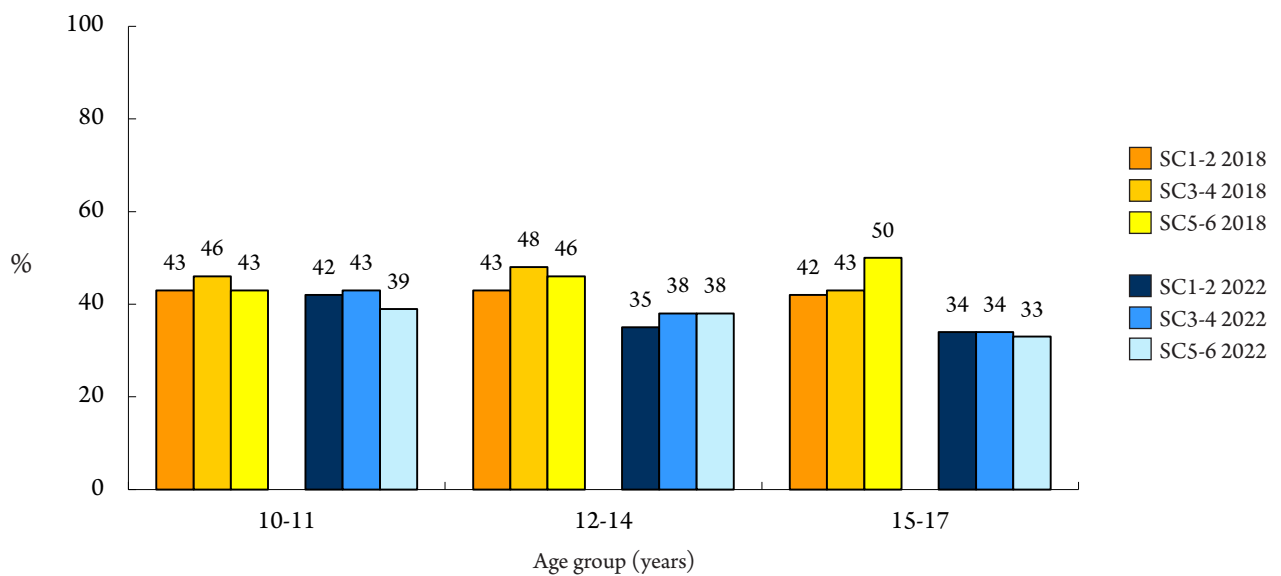
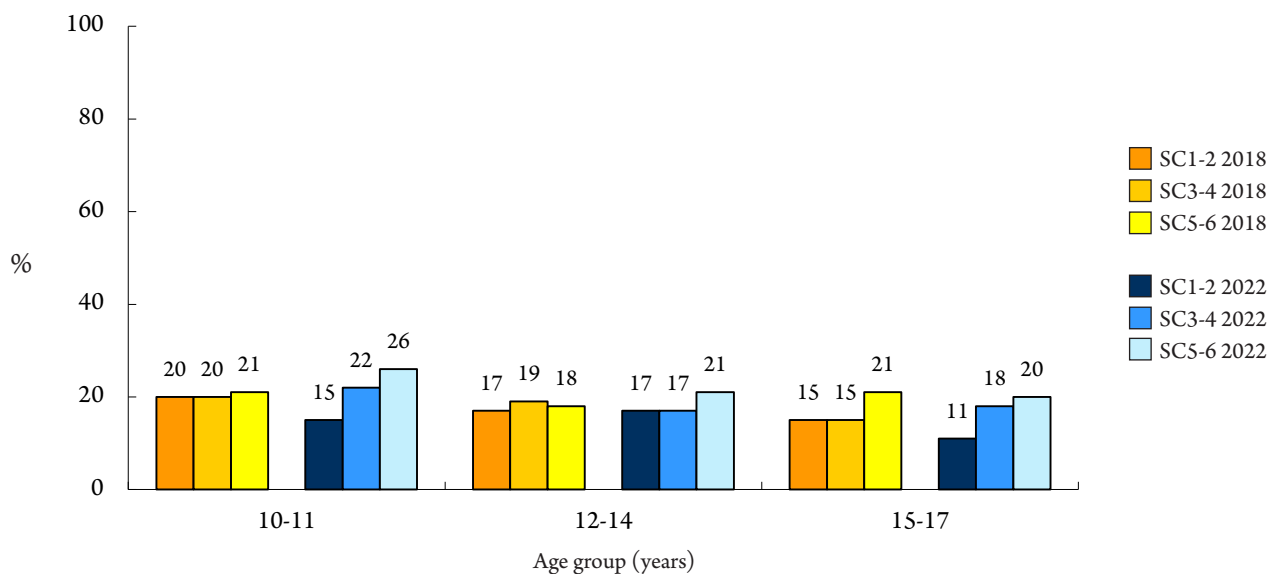


Figure 67: Percentages of girls who report having been in a physical fight in the last 12 months



Bullied others

There are statistically significant differences by gender and social class groups. Overall, 16% of boys and 10% of girls report bullying others at school once or more in the past couple of months. Children from the middle social class group are more likely to report bullying others at school once or more in the past couple of months than those from other social class groups. There is no statistically significant difference across age groups.

Figure 68: Percentages of boys who report bullying others at school once or more in the past couple of months

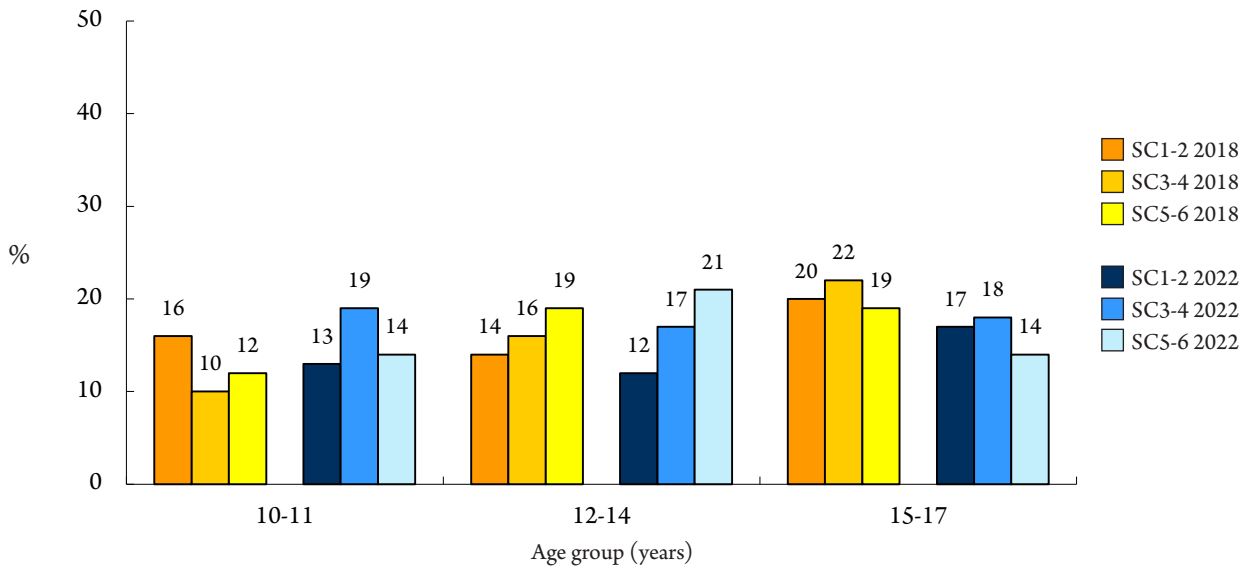
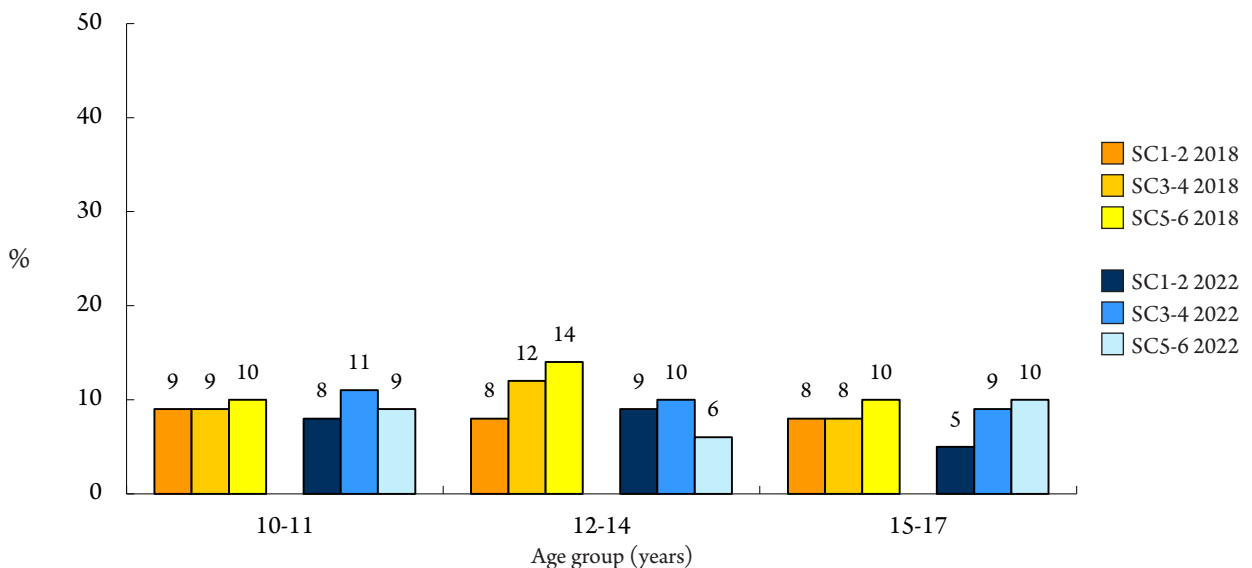


Figure 69: Percentages of girls who report bullying others at school once or more in the past couple of months



Being bullied

There is no statistically significant difference by gender, with 28% of boys and 30% of girls reporting being bullied at school once or more in the past couple of months. There are statistically significant differences across age groups and social class. Younger children are more likely to report being bullied at school once or more in the past couple of months than older children. Children from the middle social class group are more likely to report being bullied at school once or more in the past couple of months than those from other social class groups.

Figure 70: Percentages of boys who report being bullied at school once or more in the past couple of months

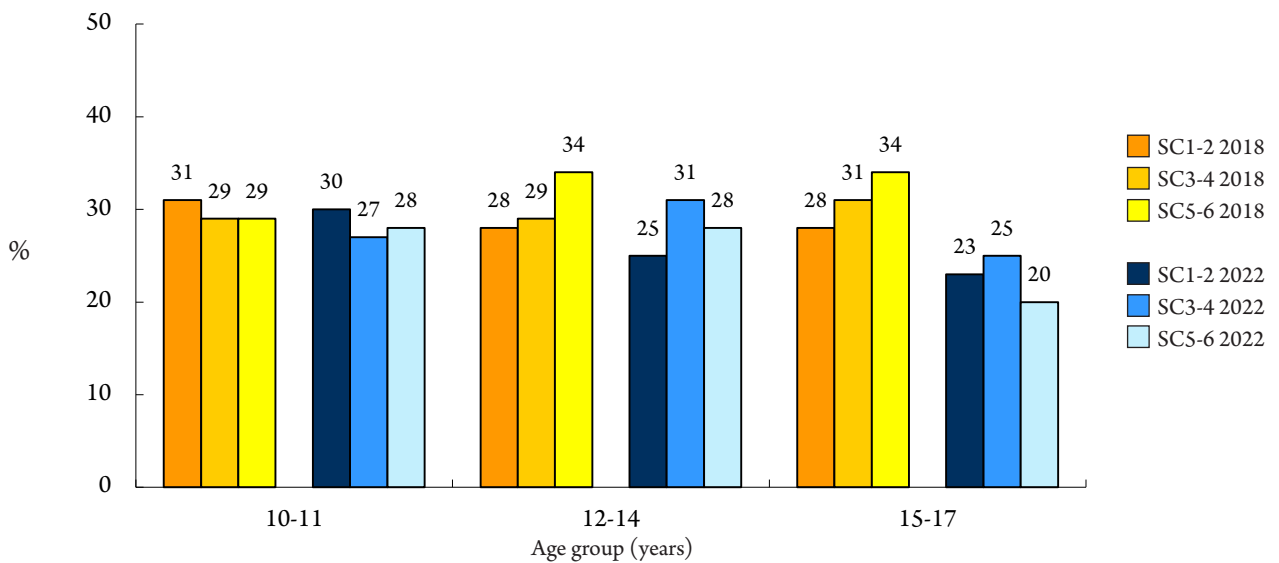
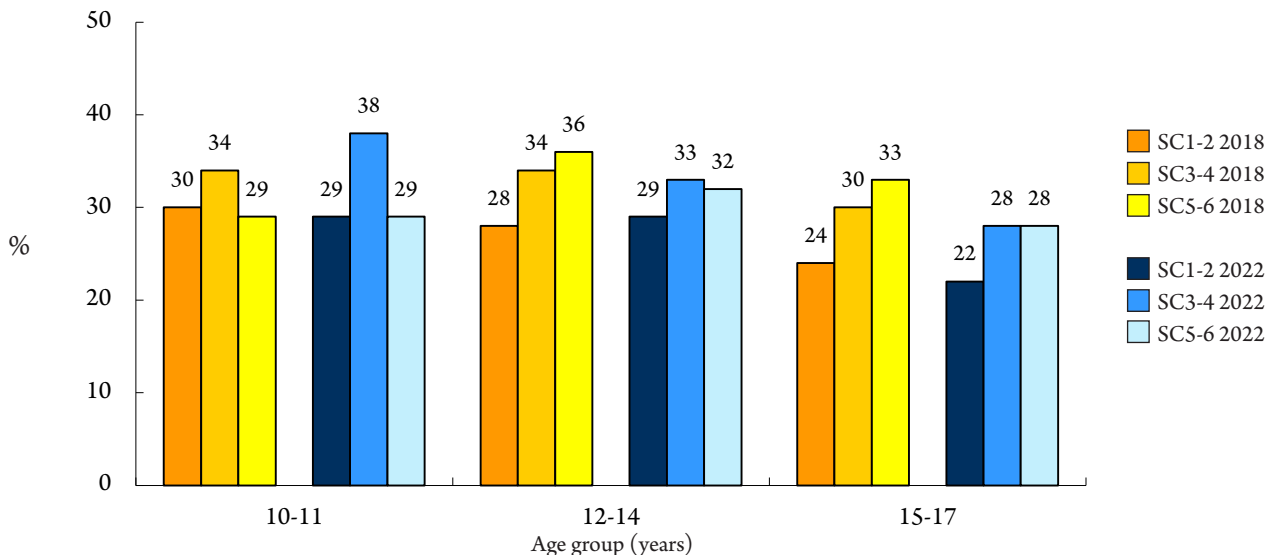


Figure 71: Percentages of girls who report being bullied at school once or more in the past couple of months



Cyberbullying others

There are statistically significant differences by gender and social class groups. Overall, 11% of boys and 8% of girls report taking part in cyberbullying others once or more in the past couple of months. Children from lower social class groups are more likely to report ever taking part in cyberbullying others once or more in the past couple of months than those from other social class groups. There is no statistically significant difference across age groups.

Figure 72: Percentages of boys who report cyberbullying others once or more in the past couple of months

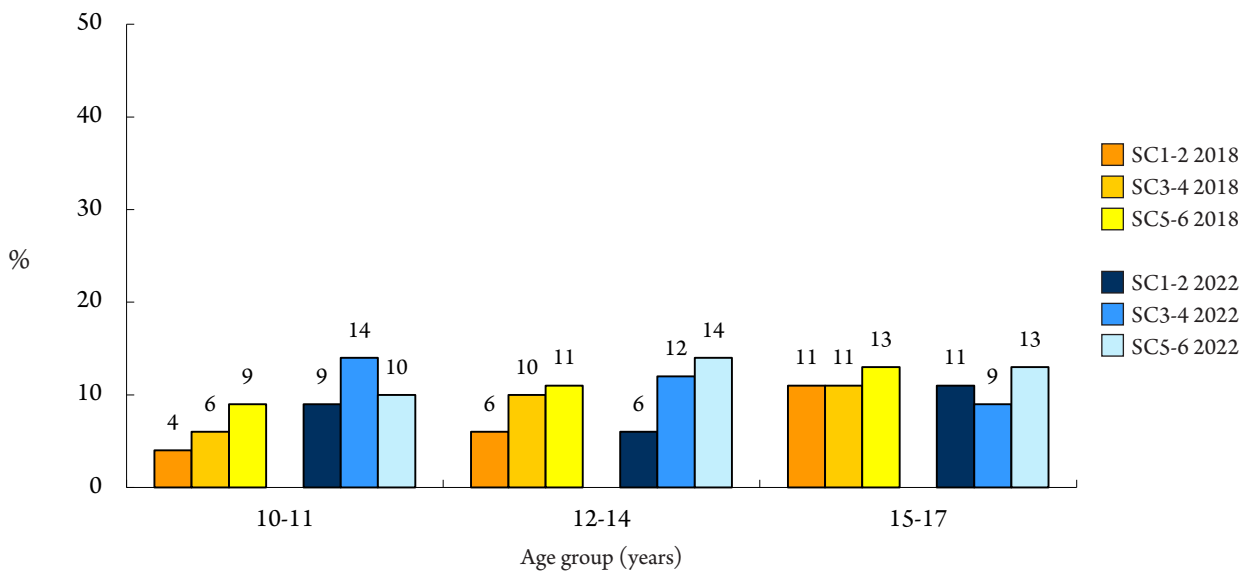
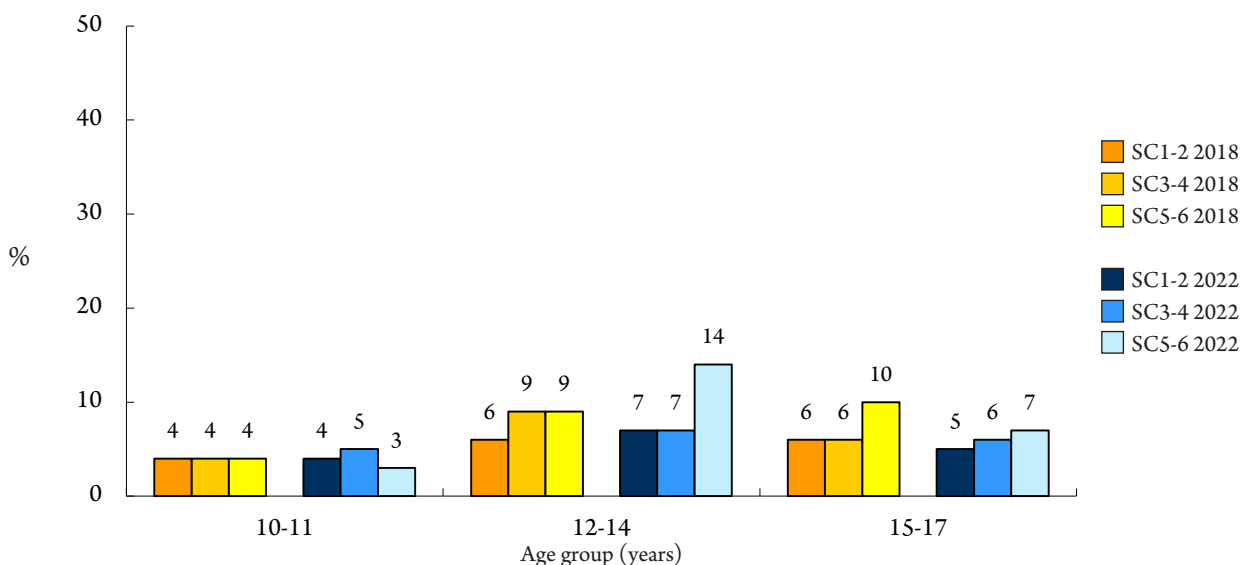


Figure 73: Percentages of girls who report cyberbullying others once or more in the past couple of months



Being cyberbullied

There are statistically significant differences by gender, age group and social class. Overall, 15% of boys and 21% of girls report being cyberbullied once or more in the past couple of months. Younger children are more likely to report being cyberbullied once or more in the past couple of months than older children. Children from lower social class groups are more likely to report being cyberbullied once or more in the past couple of months than those from other social class groups.

Figure 74: Percentages of boys who report being cyberbullied once or more in the past couple of months

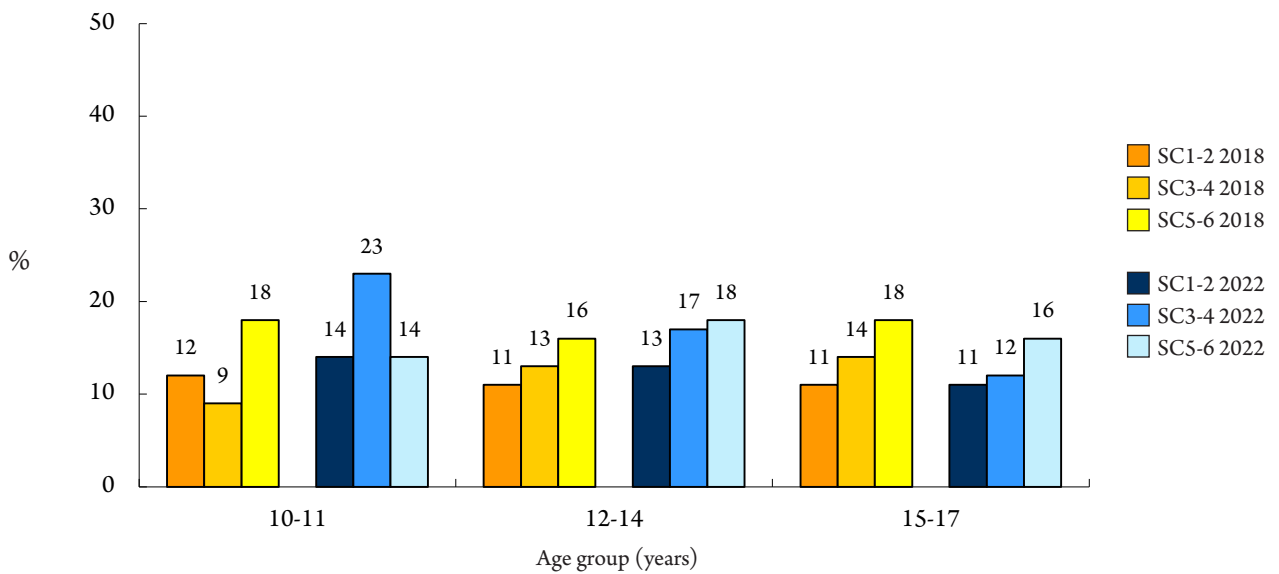
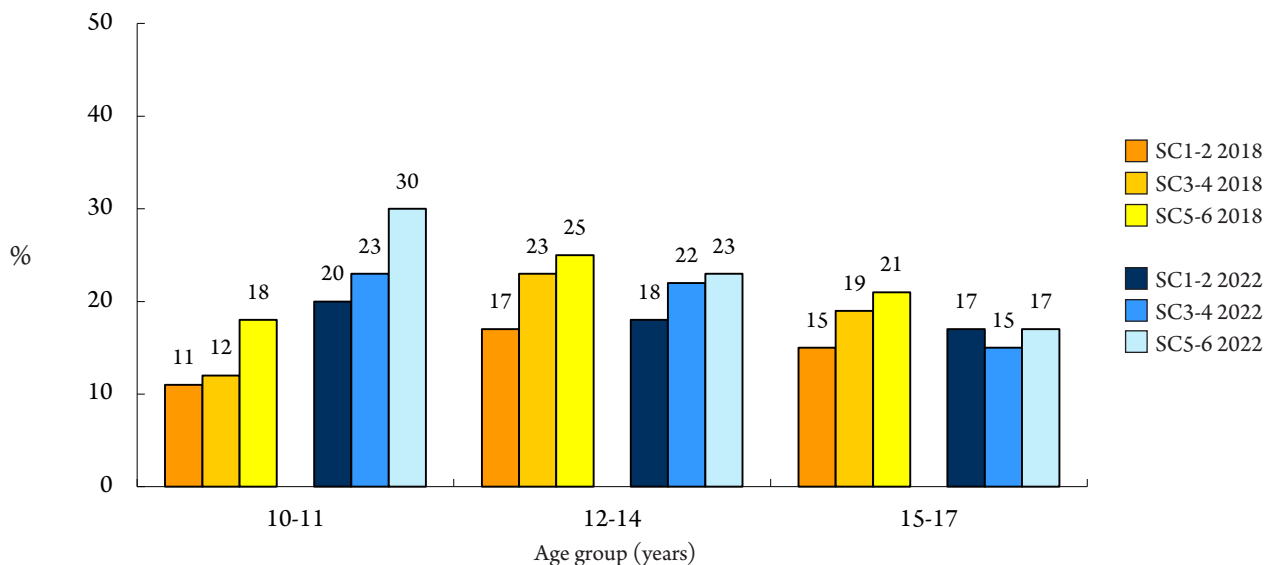


Figure 75: Percentages of girls who report being cyberbullied once or more in the past couple of months

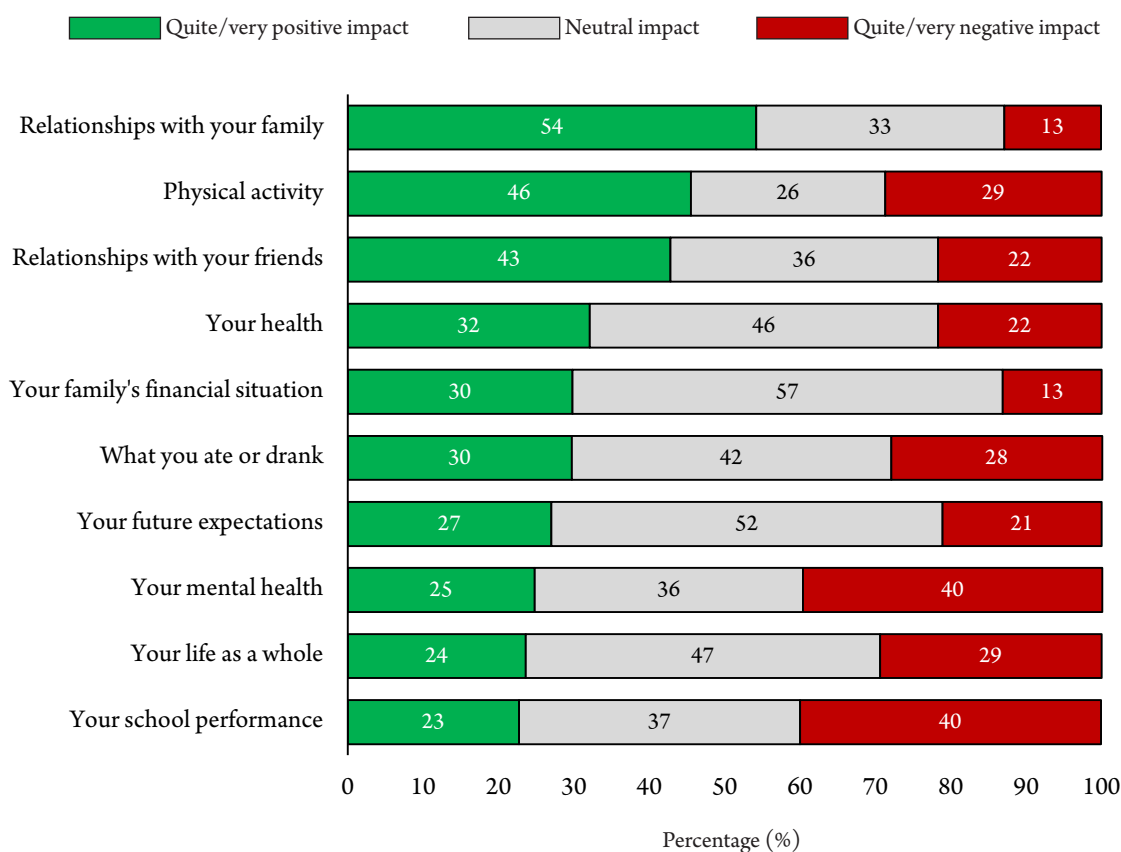


COVID-19

Impact of COVID-19 measures

Young people were asked about their experiences of the COVID-19 pandemic and its associated measures. They were asked to say how they felt various aspects of their lives had been impacted by social and public health measures, with response options: very negative / quite negative, neither negative nor positive (neutral), quite positive / very positive. Figure 76 below illustrates overall figures for all children aged 10-17. The two most positively affected (quite or very positive) aspects of life were family relationships (54%) and physical activity (46%). The two most negatively affected (quite or very negative) aspects of life were mental health (40%) and school performance (40%).

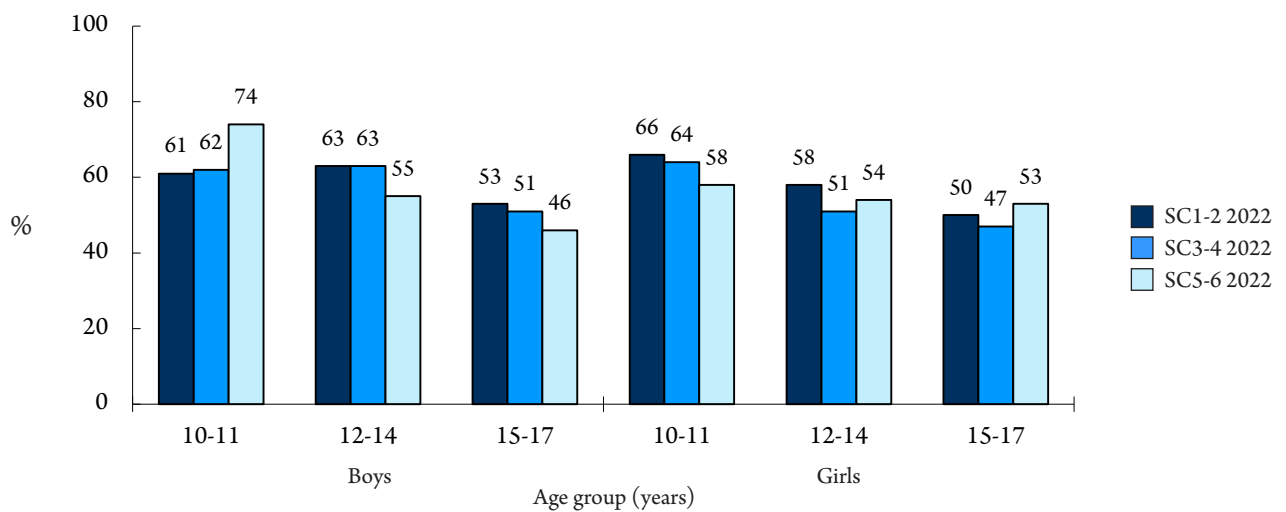
Figure 76: Distribution of positive, neutral and negative impact of COVID-19 pandemic measures across areas of children's lives



Positive impact of the COVID-19 pandemic measures on relationships with family

There are statistically significant differences by gender and age group. Overall, 57% of boys and 52% of girls report that the COVID-19 pandemic measures had a positive impact on their relationships with their family. Younger children are more likely to report that the COVID-19 pandemic measures had a positive impact on their relationships with their family than older children. There is no statistically significant difference across social class groups.

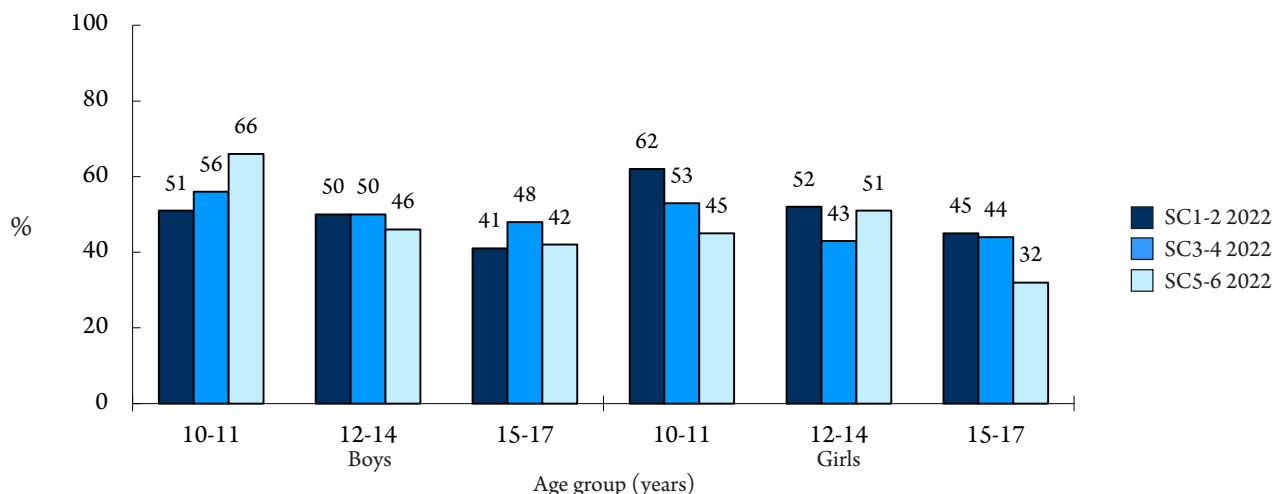
Figure 77: Percentages of boys and girls who report COVID-19 having a positive impact on their relationships with their family



Positive impact of the COVID-19 pandemic measures on physical activity

There is no statistically significant difference by gender. Overall, 47% of boys and 44% of girls report that the COVID-19 pandemic measures had a positive impact on their physical activity. There are statistically significant differences across age groups, with younger children more likely to report that the COVID-19 pandemic measures had a positive impact on their physical activity than older children. There is no statistically significant difference across social class groups.

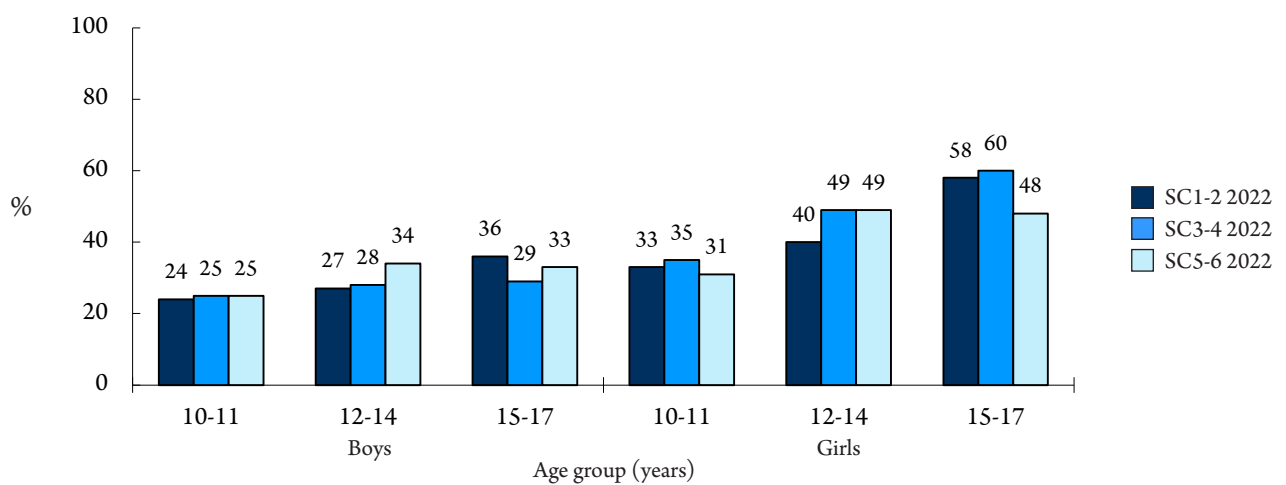
Figure 78: Percentages of boys and girls who report COVID-19 having a positive impact on their physical activity



Negative impact of the COVID-19 pandemic measures on mental health

There are statistically significant differences by gender and age group. Overall, 30% of boys and 50% of girls report that the COVID-19 pandemic measures had a negative impact on their mental health. Older children are more likely to report that the COVID-19 pandemic measures had a negative impact on their mental health than younger children. There is no statistically significant difference across social class groups.

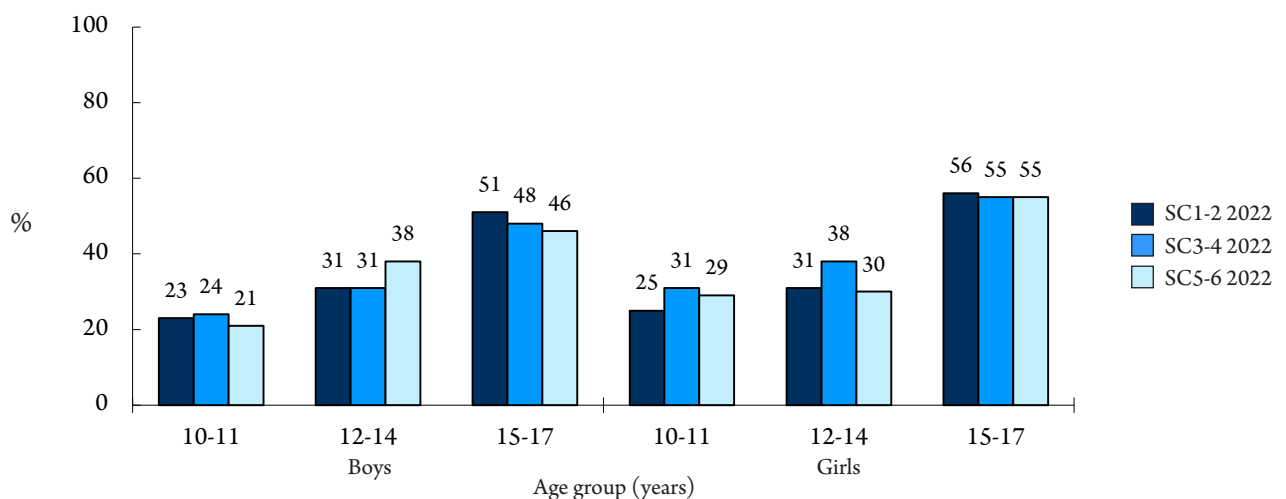
Figure 79: Percentages of boys and girls who report COVID-19 having a negative impact on their mental health



Negative impact of the COVID-19 pandemic measures on school performance

There are statistically significant differences by gender and age group. Overall, 37% of boys and 43% of girls report that the COVID-19 pandemic measures had a negative impact on their school performance. Older children are more likely to report that the COVID-19 pandemic measures had a negative impact on their school performance than younger children. There is no statistically significant difference across social class groups.

Figure 80: Percentages of boys and girls who report COVID-19 having a negative impact on their school performance

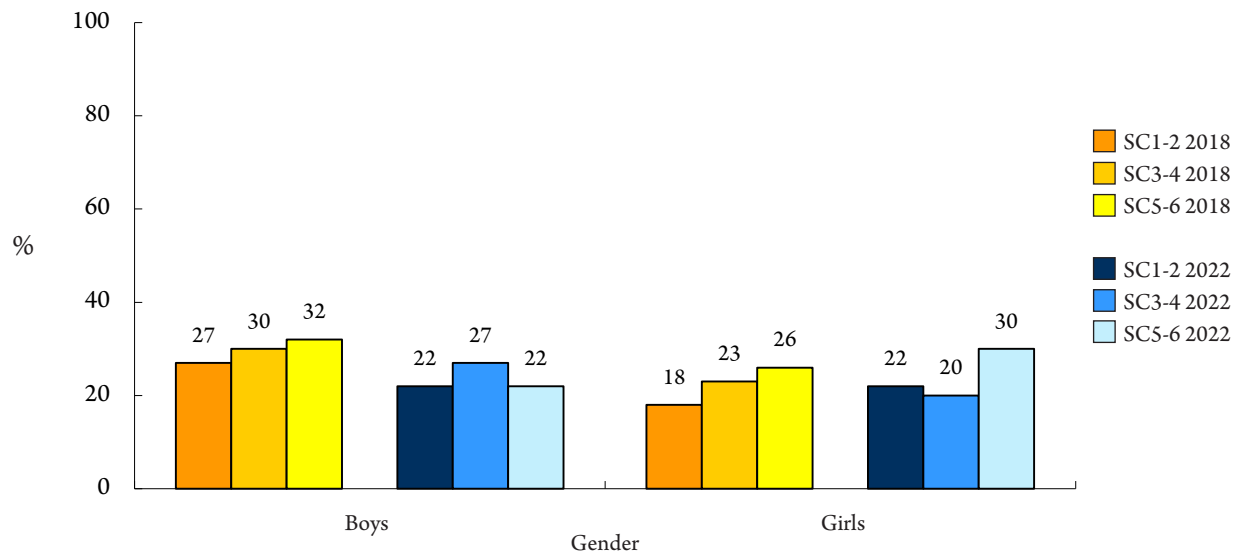


Sexual Behaviours

Ever had sexual intercourse

There is no statistically significant difference by gender. Overall, 26% of 15 to 17 year old boys and 24% of 15 to 17 year old girls report that they have ever had sexual intercourse. There is no statistically significant difference across social class groups.

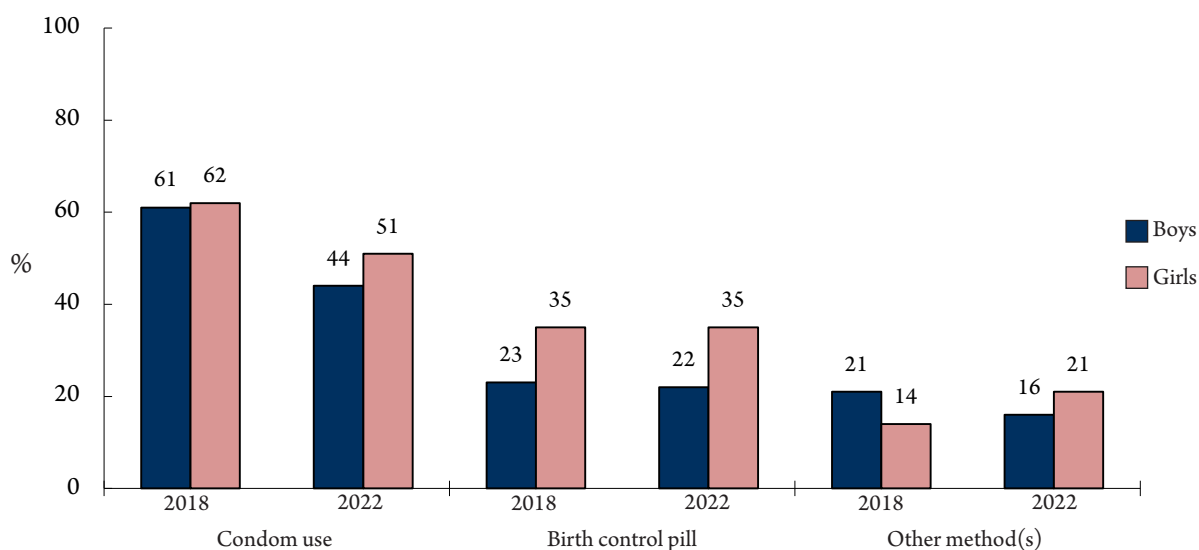
Figure 81: Percentages of 15 to 17 year olds who report they have ever had sexual intercourse, by gender



Contraceptive use*

Overall, of those who report ever having had sexual intercourse, there is a statistically significant difference by gender in reporting condom use and in reporting birth control pill use, with girls more likely than boys to report that they or their partner used either a condom or the birth control pill at last sexual intercourse. There is no statistically significant difference by gender in reporting the use of any other method(s) of contraception at last sexual intercourse.

Figure 82: Percentages of 15 to 17 year olds who report the method of contraception at last intercourse, by gender



There is a statistically significant difference by gender in reporting the use of no contraception (condom, birth control pill, or any other method(s)) at last sexual intercourse. Overall, 40% of boys and 27% of girls report that they or their partner used no contraception at last sexual intercourse.

*Social class significance comparisons are not reported due to low sample size.



Findings from the Middle Childhood Study

The findings from the Middle Childhood HBSC Study presented in this section are stratified by gender and social class. The findings presented in this section are based on children from 3rd and 4th class.

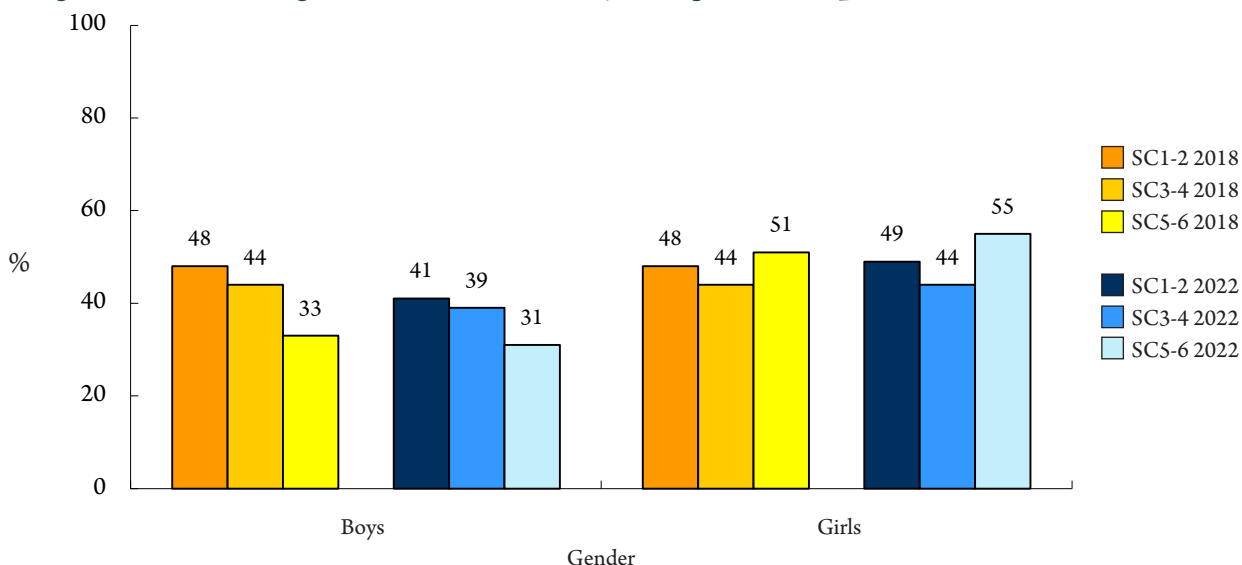


General Health and Wellbeing

Excellent health

There is a statistically significant difference by gender. Overall, 40% of boys and 48% of girls report that their health is excellent. There is no statistically significant difference across social class groups.

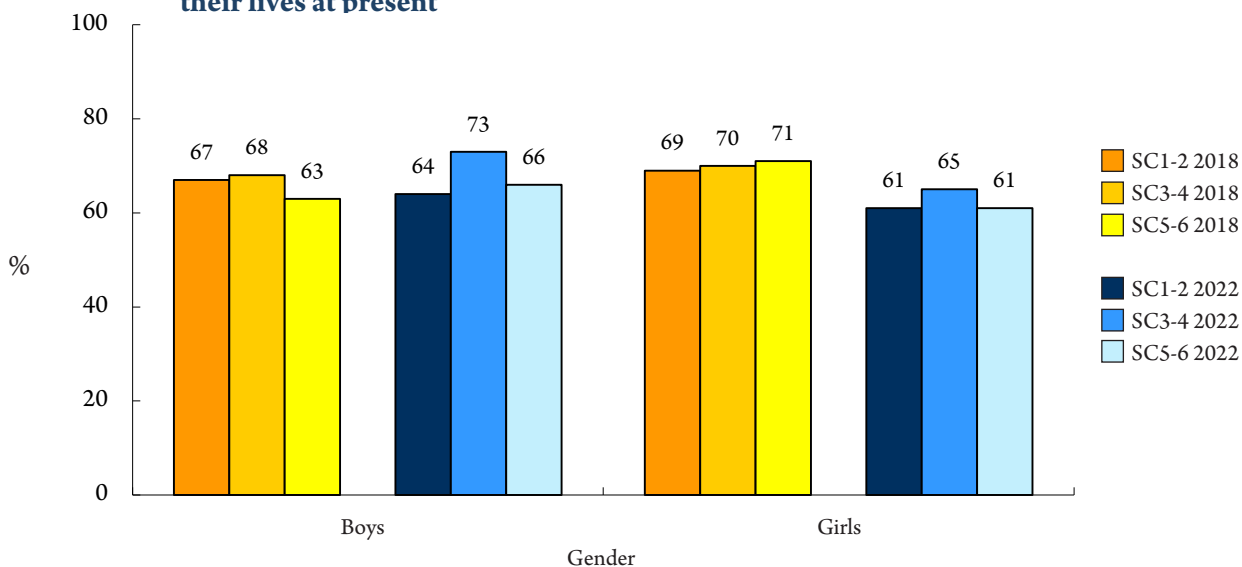
Figure 83: Percentages of 3rd and 4th class boys and girls who report their health is excellent



Life at present (happiness)

There is no statistically significant difference by gender. Overall, 65% of boys and 62% of girls report feeling very happy with their life at present. There is no statistically significant difference across social class groups.

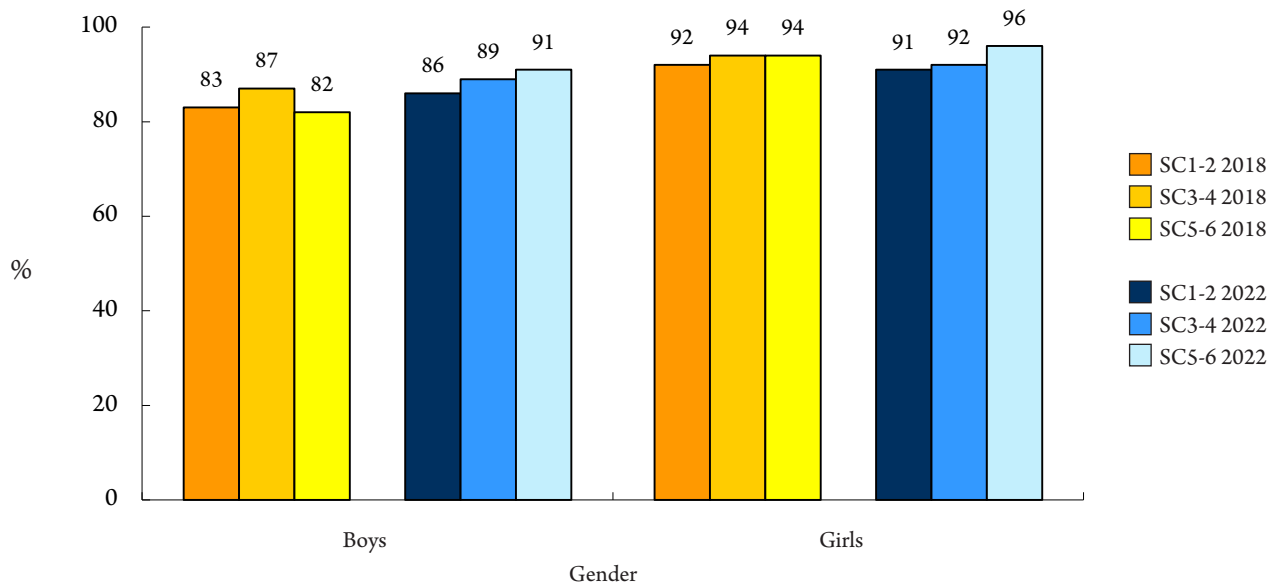
Figure 84: Percentages of 3rd and 4th class boys and girls who report feeling very happy with their lives at present



Love of family

There is no statistically significant difference by gender. Overall, 88% of boys and 92% of girls report that they always love their family. There is no statistically significant difference across social class groups.

Figure 85: Percentages of 3rd and 4th class boys and girls who report they always love their family

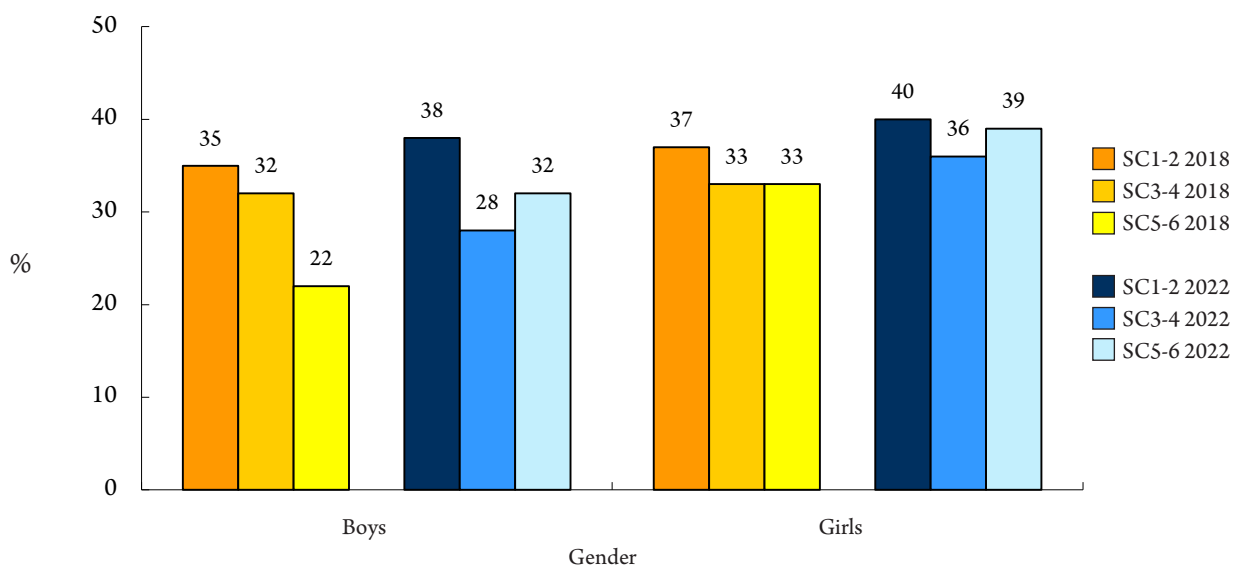


Food and Dietary Behaviours

Fruit

There is no statistically significant difference by gender. Overall, 32% of boys and 35% of girls report that they consume fruit more than once a day. There is no statistically significant difference across social class groups.

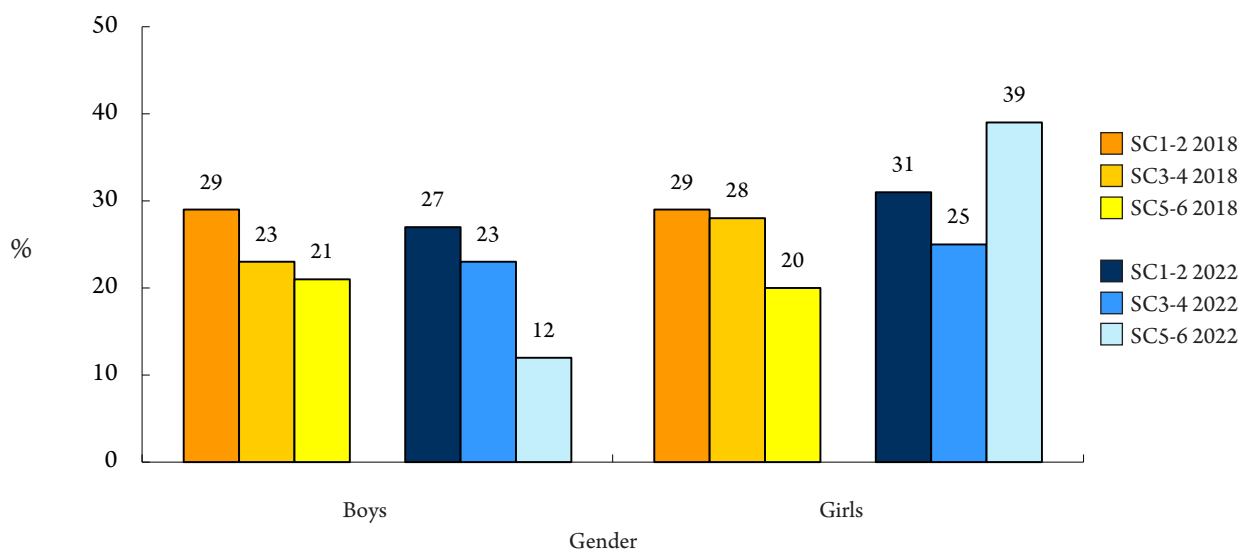
Figure 86: Percentages of 3rd and 4th class boys and girls who report they consume fruit more than once a day



Vegetables

There is no statistically significant difference by gender. Overall, 24% of boys and 27% of girls report that they consume vegetables more than once a day. There is no statistically significant difference across social class groups.

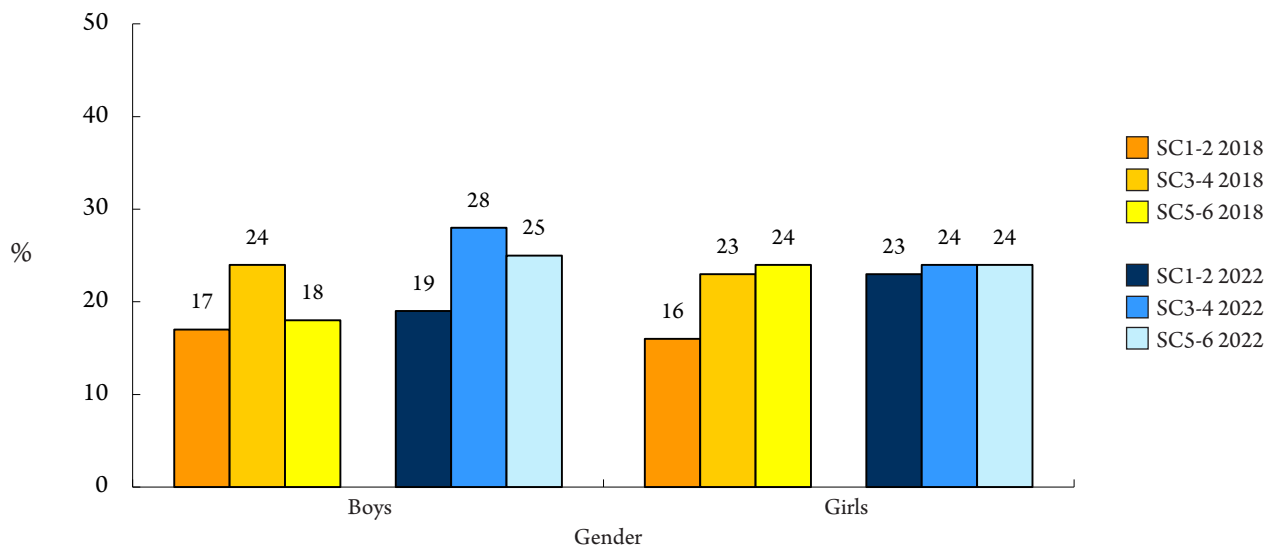
Figure 87: Percentages of 3rd and 4th class boys and girls who report they consume vegetables more than once a day



Sweets

There is no statistically significant difference by gender. Overall, 25% of boys and 25% of girls report that they eat sweets once a day or more. There is no statistically significant difference across social class groups.

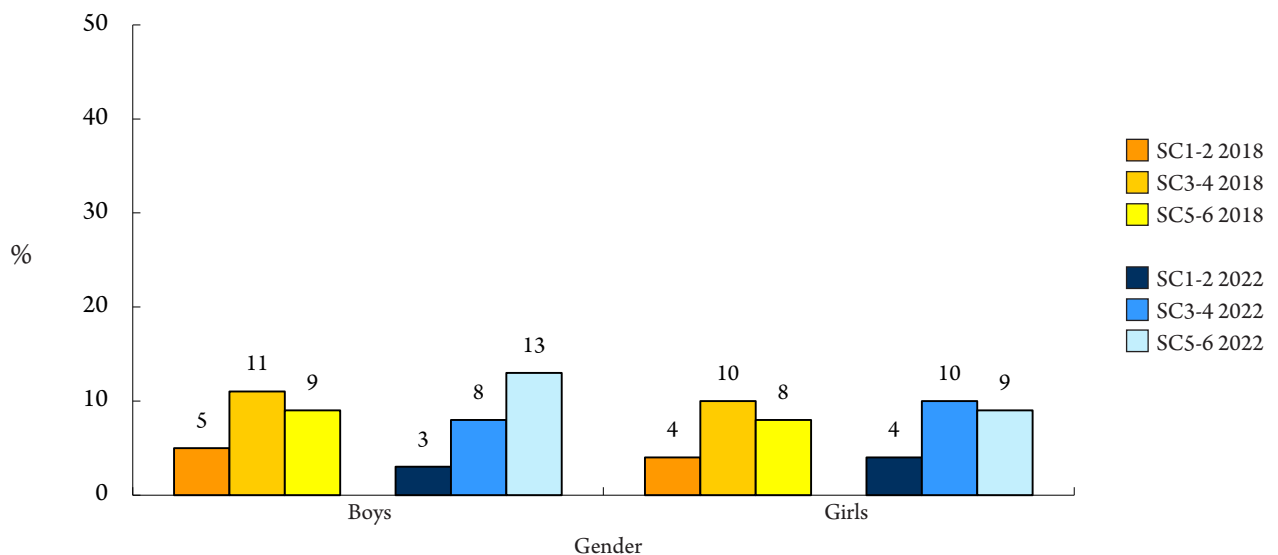
Figure 88: Percentages of 3rd and 4th class boys and girls who report they eat sweets once a day or more



Soft drinks

There is no statistically significant difference by gender. Overall, 8% of boys and 7% of girls report that they drink soft drinks daily or more. There is a statistically significant difference across social class groups, with children from lower social class groups more likely to report drinking soft drinks daily or more.

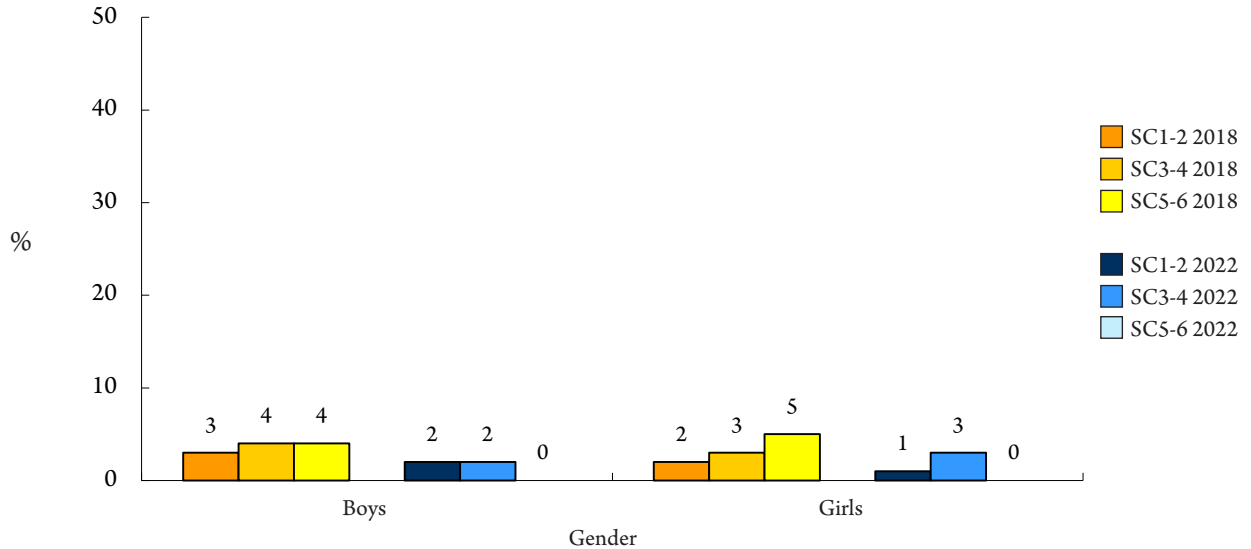
Figure 89: Percentages of 3rd and 4th class boys and girls who report they drink soft drinks daily or more



Not having breakfast*

There is no statistically significant difference by gender. Overall, 2% of boys and 3% of girls report never having breakfast on any day of the week.

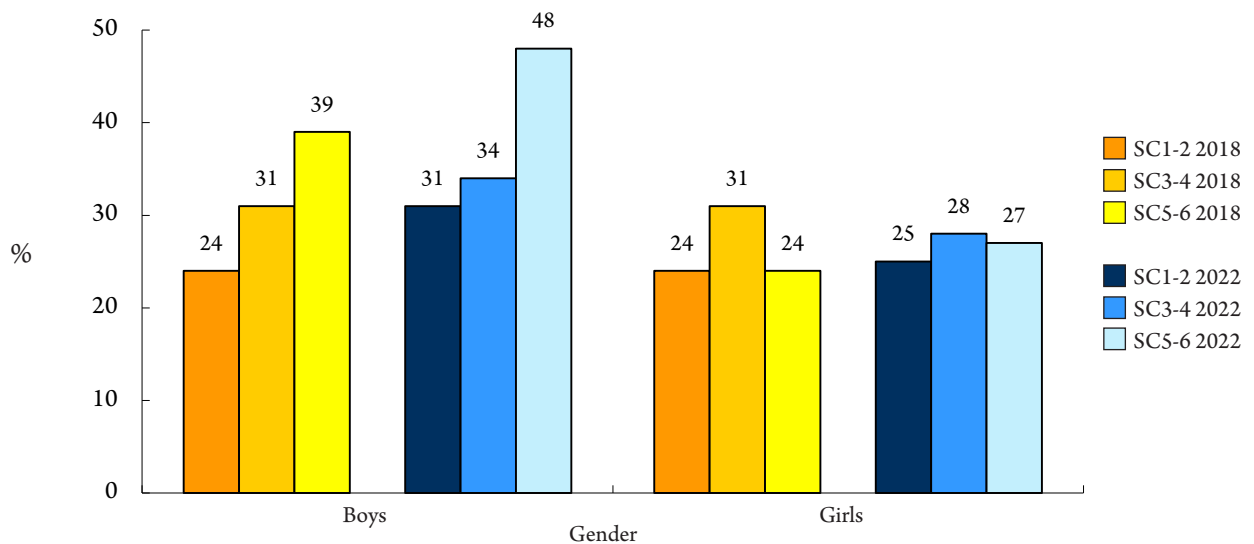
Figure 90: Percentages of 3rd and 4th class boys and girls who report never having breakfast on any day of the week



Going to school or bed hungry

There is a statistically significant difference by gender. Overall, 37% of boys and 27% of girls report ever going to school or bed hungry because there was not enough food at home. There is no statistically significant difference across social class groups.

Figure 91: Percentages of 3rd and 4th class boys and girls who report ever going to school or bed hungry



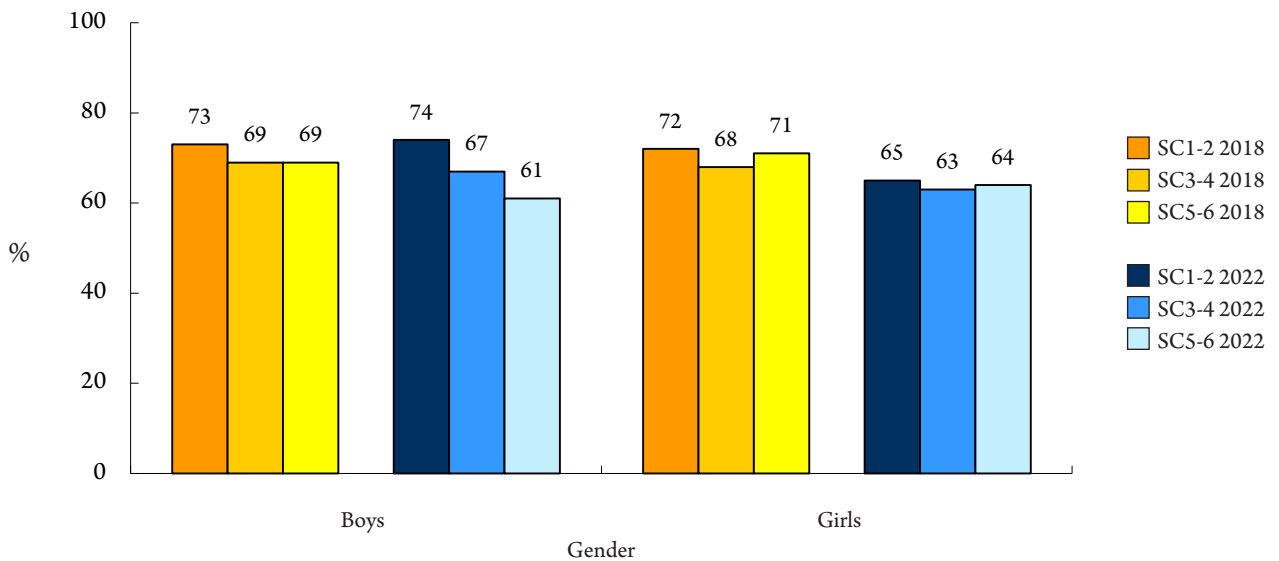
*Social class significance comparisons are not reported due to low sample size.

Exercise and Physical Activity

Vigorous exercise four or more times per week

There is a statistically significant difference by gender. Overall, 72% of boys and 65% of girls report participating in vigorous exercise four or more times per week. There is no statistically significant difference across social class groups.

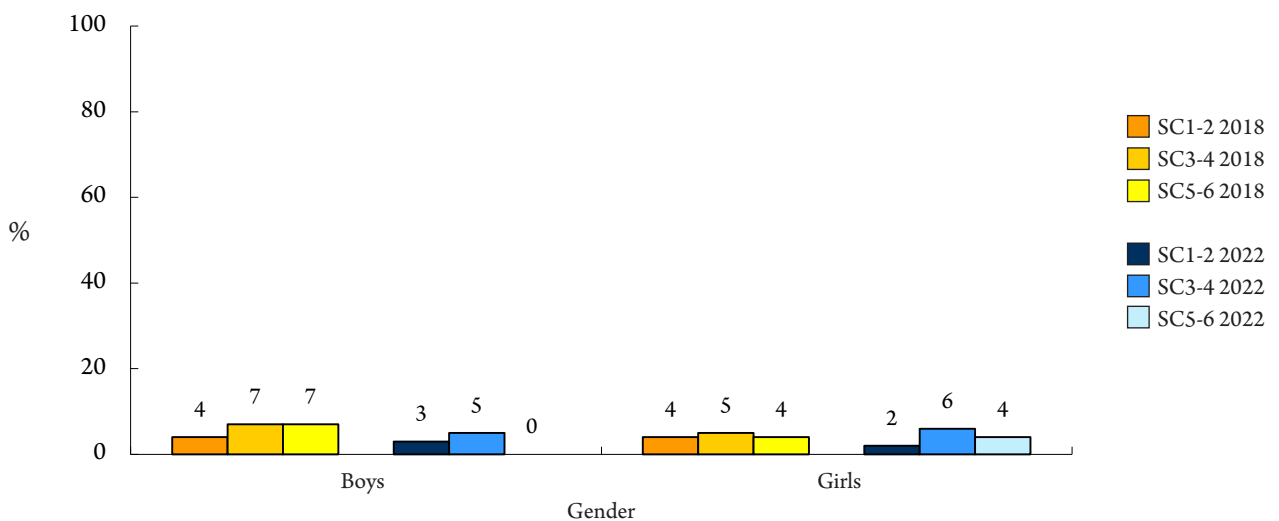
Figure 92: Percentages of 3rd and 4th class boys and girls who report participating in vigorous exercise four or more times per week



Physical inactivity*

There is no statistically significant difference by gender. Overall, 5% of boys and 4% of girls report participating in vigorous exercise less than weekly.

Figure 93: Percentages of 3rd and 4th class boys and girls who report participating in vigorous exercise less than weekly



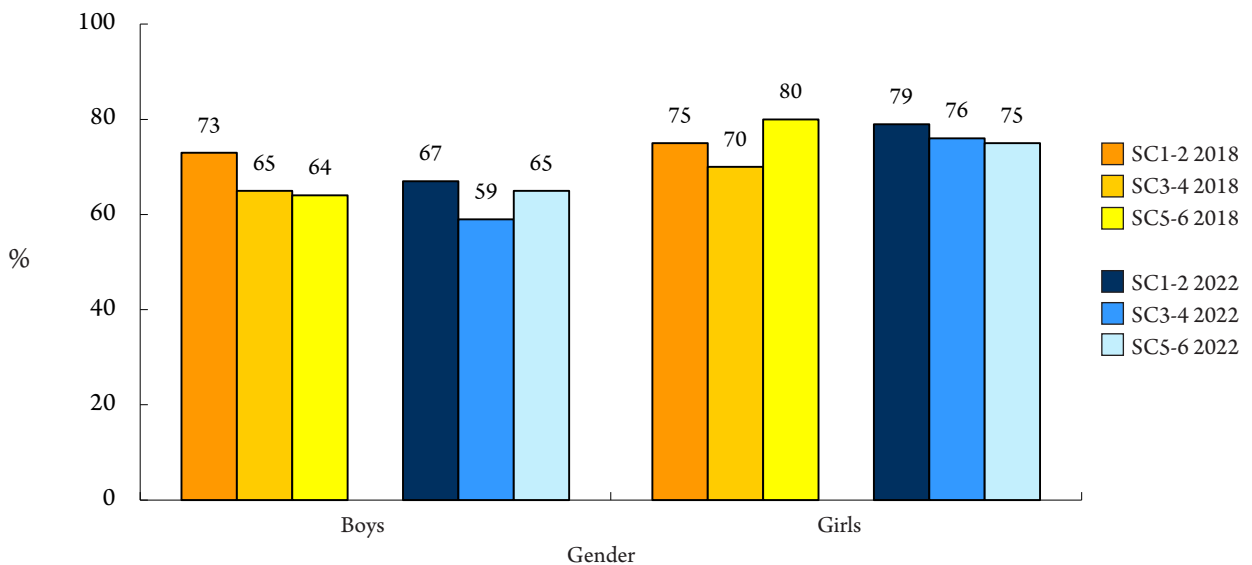
*Social class significance comparisons are not reported due to low sample size.

Self-Care

Toothbrushing

There is a statistically significant difference by gender. Overall, 66% of boys and 75% of girls report brushing their teeth more than once a day. There is no statistically significant difference across social class groups.

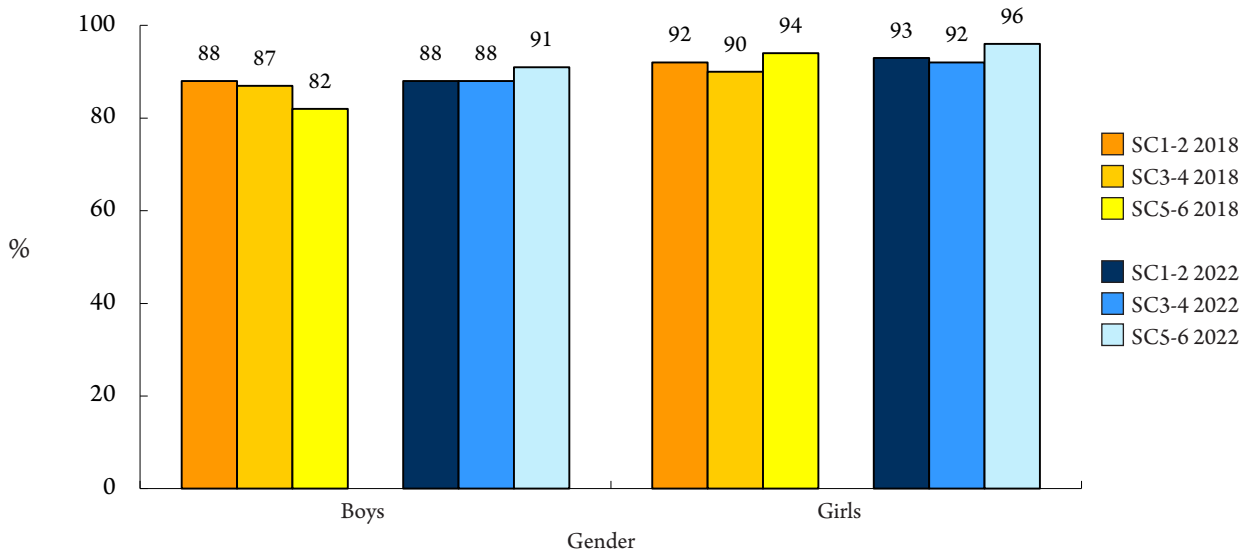
Figure 94: Percentages of 3rd and 4th class boys and girls who report brushing their teeth more than once a day



Seatbelt use

There is a statistically significant difference by gender. Overall, 87% of boys and 90% of girls report always wearing a seatbelt when in a car. There is no statistically significant difference across social class groups.

Figure 95: Percentages of 3rd and 4th class boys and girls who report always wearing a seatbelt when in a car

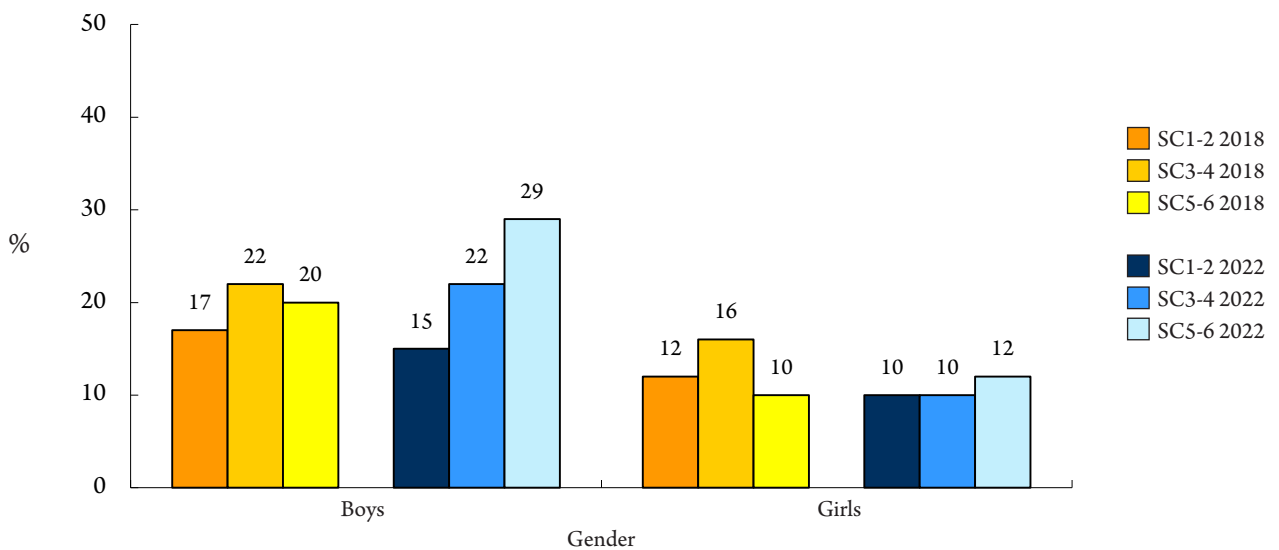


Bullying

Bullied others

There is a statistically significant difference by gender. Overall, 19% of boys and 9% of girls report bullying others at school once or more in the past couple of months. There is no statistically significant difference across social class groups.

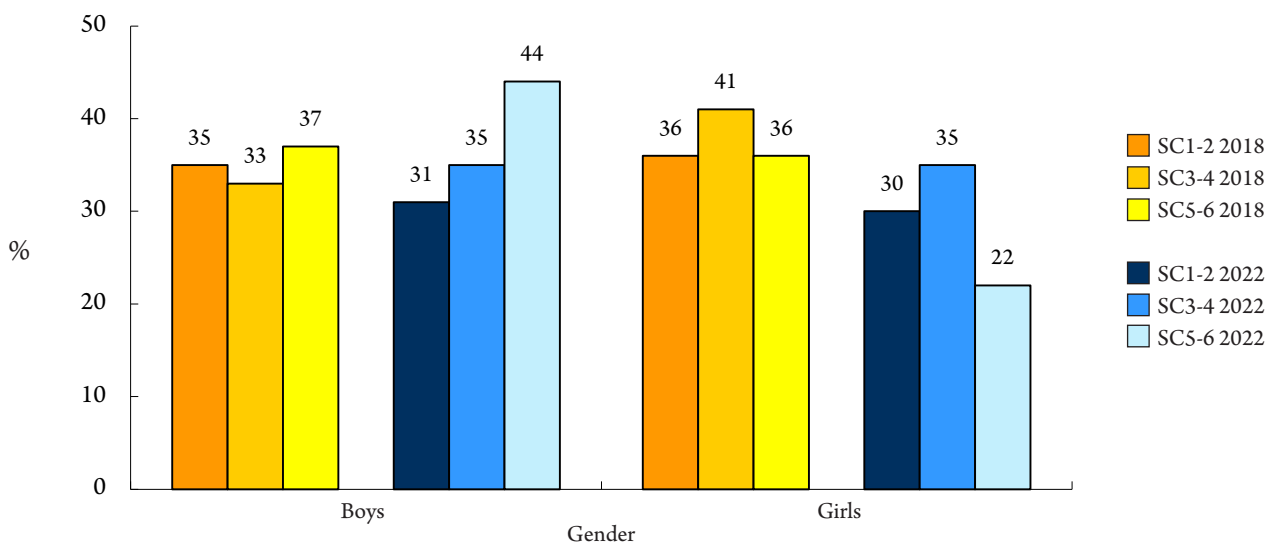
Figure 96: Percentages of 3rd and 4th class boys and girls who report bullying others at school once or more in the past couple of months



Being bullied

There is no statistically significant difference by gender. Overall, 34% of boys and 32% of girls report being bullied at school once or more in the past couple of months. There is no statistically significant difference across social class groups.

Figure 97: Percentages of 3rd and 4th class boys and girls who report being bullied at school once or more in the past couple of months



Appendices

Demographic Representativeness of Respondents: HBSC 2022 Main Study

The gender breakdown of the HBSC 2022 Main Study participants reveals that 45% are boys and 55% are girls. Those who participated were compared to data from the 2022 Census for region and social class. Table 22 presents the final numbers for each geographical region and the percentage (unweighted) of the total sample that this represents. The sixth column presents the percentages of 10 to 17 year olds recorded in the regions during the 2022 Census. The data are representative of the population distribution across regions, with slight variations from the 2022 Census.

Table 22: Comparison of the regional distribution of 2018 and 2022 HBSC Main Study respondents and the 2022 Census

Area	HBSC 2018 n	HBSC 2022 n	HBSC 2018 %	HBSC 2022 %	Census 2022 %
East	4,153	2,156	35	23	34
Midlands	856	676	7	7	7
Mid West	1,297	747	11	8	10
North East	1,625	1,029	14	11	11
North West	656	491	6	5	6
South East	825	1,547	7	14	9
South	1,075	1,624	9	18	14
West	1,270	969	11	10	9

In addition, social class was compared with those presented in the 2022 Census, as shown in Table 23. It should be noted that slight variations would be expected here because the census reports all persons by social class, not all of whom would be parents or guardians of children in these age groups.

Table 23: Comparison of the social class distribution of 2018 and 2022 HBSC Main Study respondents and the 2022 Census

Social Class	HBSC 2018 (%)	HBSC 2022 (%)	Census 2022 (%)
Professional	10	13	12
Managerial	34	30	36
Non-manual	15	16	15
Skilled manual	13	11	10
Semi-skilled	6	5	8
Unskilled	1	1	2
Unknown	21	26	17

Table 24 below presents the percentages of HBSC Main Study respondents across gender, age group and social class groups.

Table 24: Distribution of 2018 and 2022 HBSC Main Study respondents by gender, age group and social class

	SC 1-2 (%)		SC 3-4 (%)		SC 5-6 (%)		n	
	HBSC 2018	HBSC 2022	HBSC 2018	HBSC 2022	HBSC 2018	HBSC 2022	HBSC 2018	HBSC 2022
Boys								
10 to 11 years	49	51	39	41	11	8	919	358
12 to 14 years	53	55	37	38	11	7	2346	1373
15 to 17 years	55	60	35	33	10	7	1535	744
Girls								
10 to 11 years	51	54	38	38	11	7	877	459
12 to 14 years	56	56	33	36	11	8	2699	1712
15 to 17 years	56	62	34	32	10	7	1895	994

Demographic Representativeness of Respondents: HBSC 2022 Middle Childhood Study

The gender breakdown of the HBSC 2022 Middle Childhood Study participants reveals that 50% are boys and 50% are girls. Those who participated were compared to data from the 2022 Census for region and social class. Table 25 presents the final numbers for each geographical region and the percentage (unweighted) of the total sample that this represents. The sixth column presents the percentages of 8 and 9 year olds recorded in the regions during the 2022 Census. The data are representative of the population distribution across regions, with slight variations from the 2022 Census.

Table 25: Comparison of the regional distribution of 2018 and 2022 HBSC Middle Childhood Study respondents and the 2022 Census

Area	Middle Childhood 2018 n	Middle Childhood 2022 n	Middle Childhood 2018 %	Middle Childhood 2022 %	Census 2022 %
East	826	455	33	32	35
Midlands	104	107	4	7	6
Mid West	322	79	13	6	10
North East	352	147	14	10	11
North West	97	21	4	1	5
South East	162	290	7	20	9
South	222	228	9	16	14
West	391	102	16	7	9

In addition, social class was compared with those presented in the 2022 Census, as shown in Table 26. It should be noted that slight variations would be expected here because the census reports all persons by social class, not all of whom would be parents or guardians of children in these age groups.

Table 26: Comparison of the social class distribution of 2018 and 2022 HBSC Middle Childhood Study respondents and the 2022 Census

Social Class	HBSC 2018(%)	HBSC 2022 (%)	Census 2022(%)
Professional	14	15	14
Managerial	37	22	37
Non-manual	23	18	14
Skilled manual	15	13	10
Semi-skilled	9	6	7
Unskilled	1	1	2
Unknown	8	26	16

Table 27 below presents the percentages of HBSC Middle Childhood Study respondents across gender and social class.

Table 27: Distribution of 2018 and 2022 HBSC Middle Childhood Study respondents by gender and social class

	SC 1-2 (%)		SC 3-4 (%)		SC 5-6 (%)		n	
	HBSC 2018	HBSC 2022	HBSC 2018	HBSC 2022	HBSC 2018	HBSC 2022	HBSC 2018	HBSC 2022
Boys								
8.5 to 10.5 years	48	51	39	42	13	7	1246	518
Girls								
8.5 to 10.5 years	52	50	37	41	11	9	1230	560

Technical Notes

1. The overall percentages (for HBSC 2018 and HBSC 2022) presented in this report have been weighted. The data was probability weighted prior to analysis to account for a gender and regional imbalance which arose due to response variations during data collection in 2022. The sample weights were constructed using census data and accounted for using gender, age group and region. The weights were constructed as $W=1/P$, where W can be interpreted as the inverse selection probability. Sample weights for HBSC 2018 used the 2016 Census data, HBSC 2022 used the 2022 Census data.

2. Due to missing data for social class, there was a lower case base for analysis of results stratified by social class compared to results stratified by gender or age group.

Additional Notes

1. Research Translation Helpdesk - For further specific analyses of HBSC Ireland data, contact the HBSC Ireland team hbsc@universityofgalway.ie.

2. The HBSC website 'Useful Links' page (<https://www.universityofgalway.ie/hbsc/usefullinks/>) has contact information for various helplines and websites relating to the health topics in this report.

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Advisory Input

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HBSC International Databank Manager: Professor Oddrun Samdal, University of Bergen, Norway.

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Design and layout: Ms. Larri Walker, Ms. Eimer Brown and the HBSC Ireland Team.



Supplementary Data: Impact of COVID-19 Pandemic Measures

The findings presented in this section are stratified by gender, age groups and social class groups.



Impact of COVID-19 pandemic measures

The following pages present data on the positive and negative impacts of the COVID-19 pandemic measures on various aspects of children's lives (see page 60 for more information and overall figures).

List of Figures

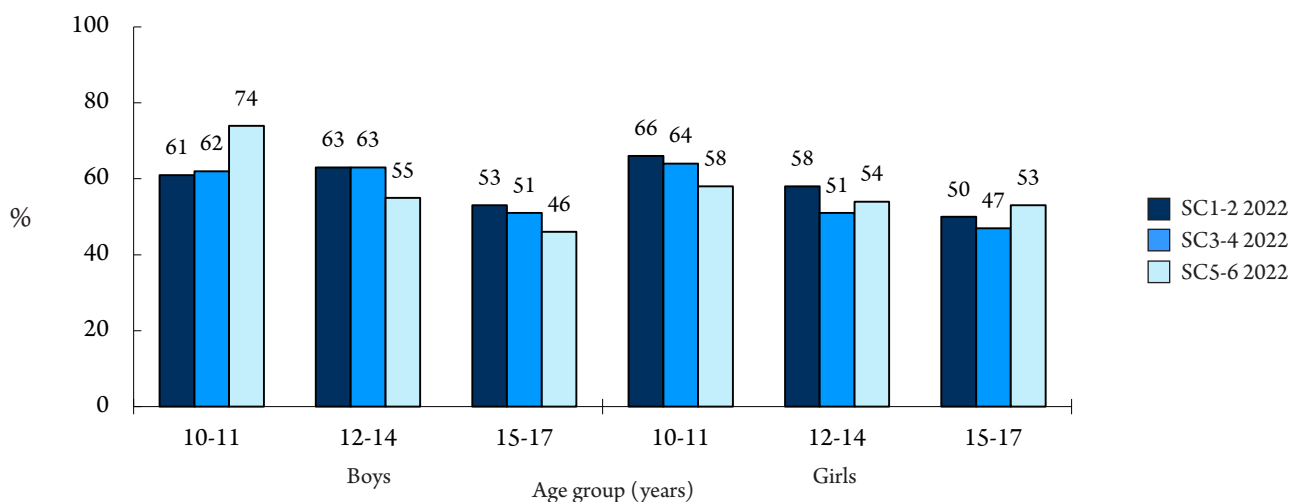
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Impact of COVID-19 pandemic measures on relationships with family

Positive impact

There are statistically significant differences by gender and age group. Overall, 57% of boys and 52% of girls report that the COVID-19 pandemic measures had a positive impact on their relationships with their family. Younger children are more likely to report that the COVID-19 pandemic measures had a positive impact on their relationships with their family than older children. There is no statistically significant difference across social class groups.

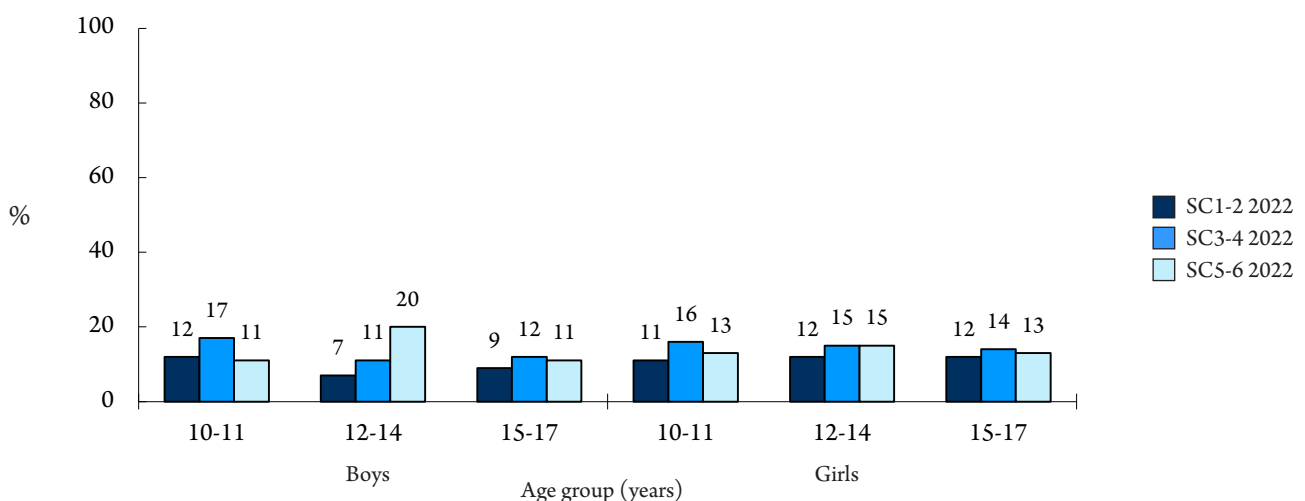
Figure S1: Percentages of boys and girls who report COVID-19 having a positive impact on their relationships with their family



Negative impact

There are statistically significant differences by gender and social class groups. Overall, 10% of boys and 15% of girls report that the COVID-19 pandemic measures had a negative impact on their relationships with their family. Children from lower social class groups are more likely to report that the COVID-19 pandemic measures had a negative impact on their relationships with their family than those from other social class groups. There is no statistically significant difference across age groups.

Figure S2: Percentages of boys and girls who report COVID-19 having a negative impact on their relationships with their family

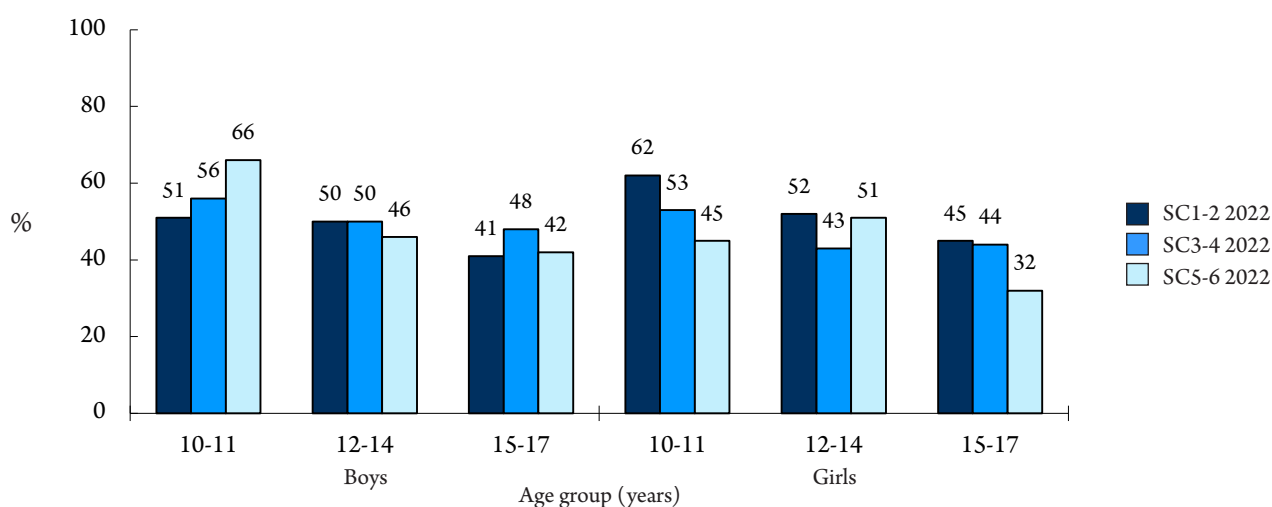


Impact of COVID-19 pandemic measures on physical activity

Positive impact

There is no statistically significant difference by gender. Overall, 47% of boys and 44% of girls report that the COVID-19 pandemic measures had a positive impact on their physical activity. There are statistically significant differences across age groups, with younger children more likely to report that the COVID-19 pandemic measures had a positive impact on their physical activity than older children. There is no statistically significant difference across social class groups.

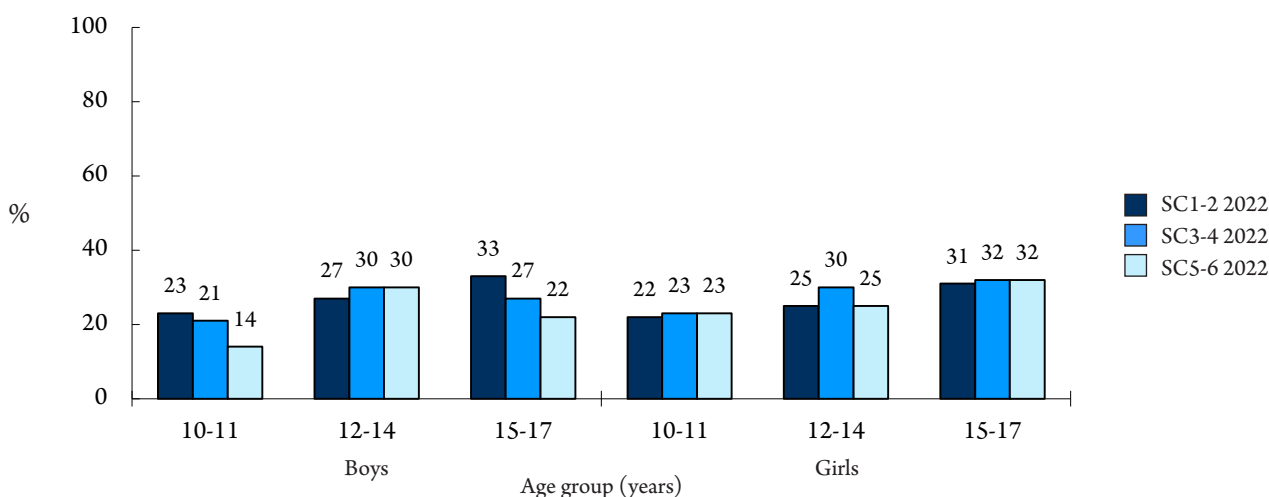
Figure S3: Percentages of boys and girls who report COVID-19 having a positive impact on their physical activity



Negative impact

There is no statistically significant difference by gender. Overall, 28% of boys and 30% of girls report that the COVID-19 pandemic measures had a negative impact on their physical activity. There are statistically significant differences across age groups, with older children more likely to report that the COVID-19 pandemic measures had a negative impact on their physical activity than younger children. There is no statistically significant difference across social class groups.

Figure S4: Percentages of boys and girls who report COVID-19 having a negative impact on their physical activity

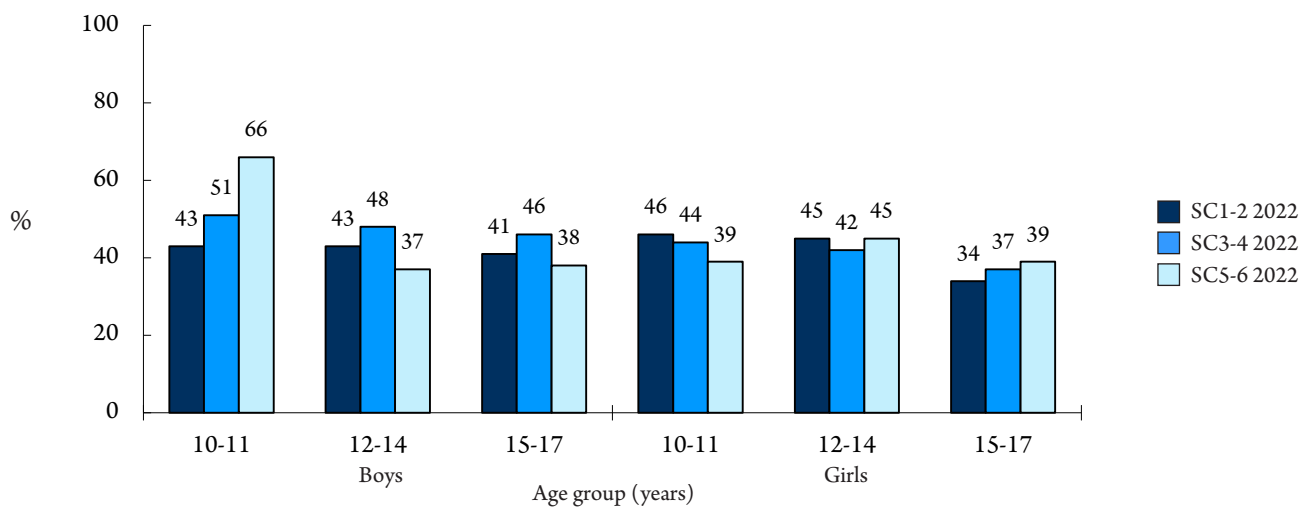


Impact of COVID-19 pandemic measures on relationships with friends

Positive impact

There are statistically significant differences by gender and age group. Overall, 45% of boys and 41% of girls report that the COVID-19 pandemic measures had a positive impact on their relationships with their friends. Younger children are more likely to report that the COVID-19 pandemic measures had a positive impact on their relationships with their friends than older children. There is no statistically significant difference across social class groups.

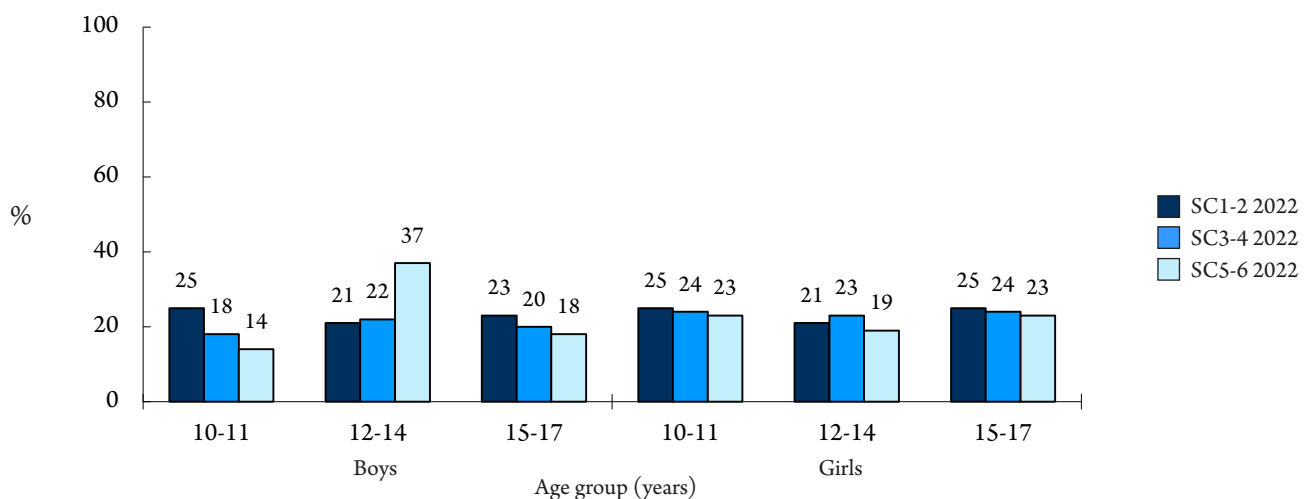
Figure S5: Percentages of boys and girls who report COVID-19 having a positive impact on their relationships with their friends



Negative impact

There is a statistically significant difference by gender. Overall, 20% of boys and 23% of girls report that the COVID-19 pandemic measures had a negative impact on their relationships with their friends. There are no statistically significant differences across age groups or social class groups.

Figure S6: Percentages of boys and girls who report COVID-19 having a negative impact on their relationships with their friends

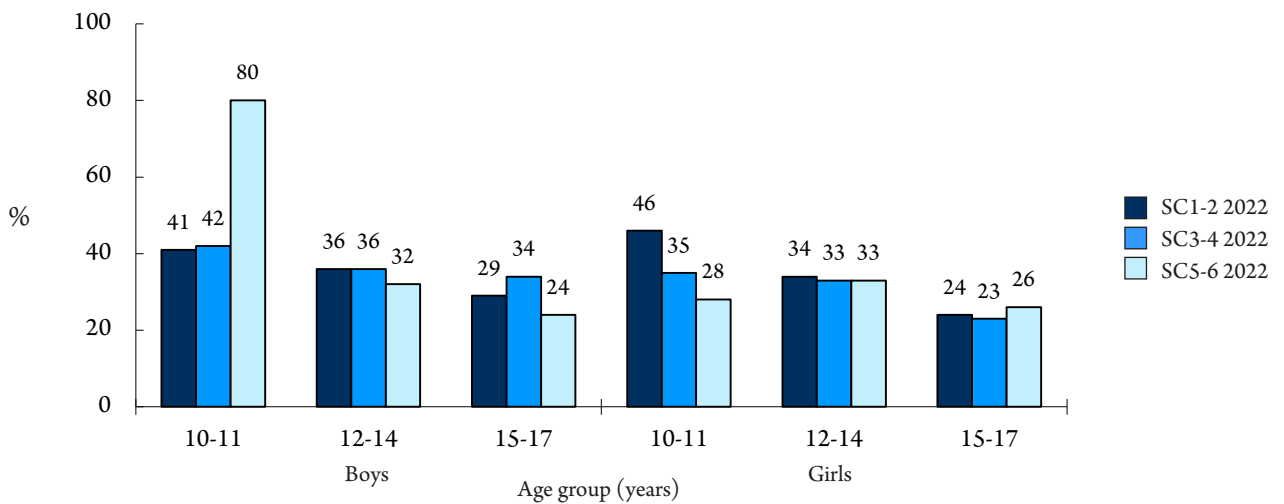


Impact of COVID-19 pandemic measures on health

Positive impact

There are statistically significant differences by gender and age group. Overall, 35% of boys and 29% of girls report that the COVID-19 pandemic measures had a positive impact on their health. Younger children are more likely to report that the COVID-19 pandemic measures had a positive impact on their health than older children. There is no statistically significant difference across social class groups.

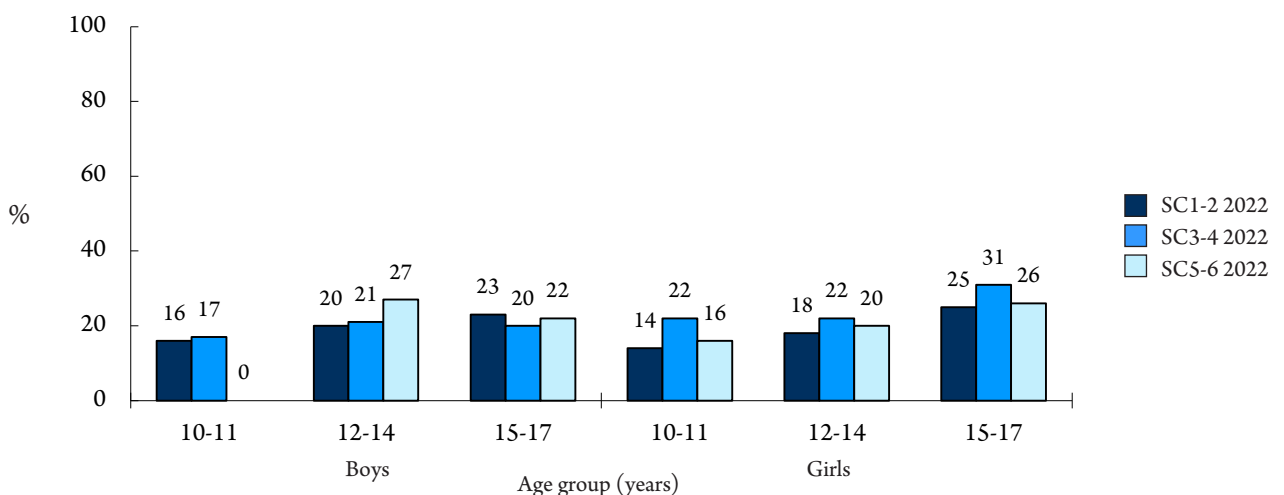
Figure S7: Percentages of boys and girls who report COVID-19 having a positive impact on their health



Negative impact

There are statistically significant differences by gender and age group. Overall, 20% of boys and 24% of girls report that the COVID-19 pandemic measures had a negative impact on their health. Older children are more likely to report that the COVID-19 pandemic measures had a negative impact on their health than younger children. There is no statistically significant difference across social class groups.

Figure S8: Percentages of boys and girls who report COVID-19 having a negative impact on their health

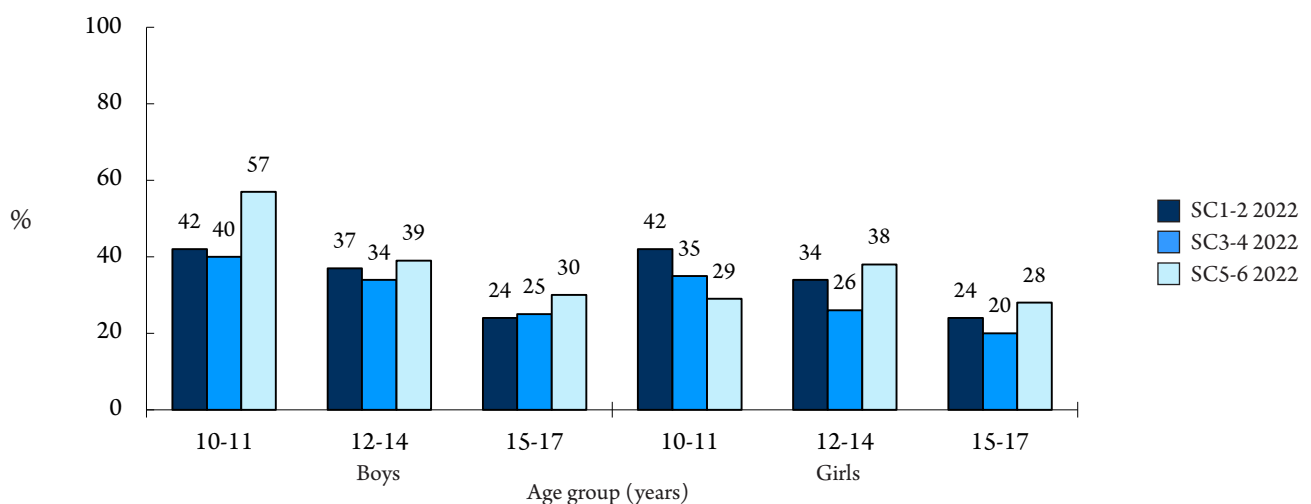


Impact of COVID-19 pandemic measures on family's financial situation

Positive impact

There are statistically significant differences by gender, age group and social class. Overall, 32% of boys and 28% of girls report that the COVID-19 pandemic measures had a positive impact on their family's financial situation. Younger children are more likely to report that the COVID-19 pandemic measures had a positive impact on their family's financial situation than older children. Children from the lowest social class group are more likely to report that the COVID-19 pandemic measures had a positive impact on their family's financial situation than those from other social class groups.

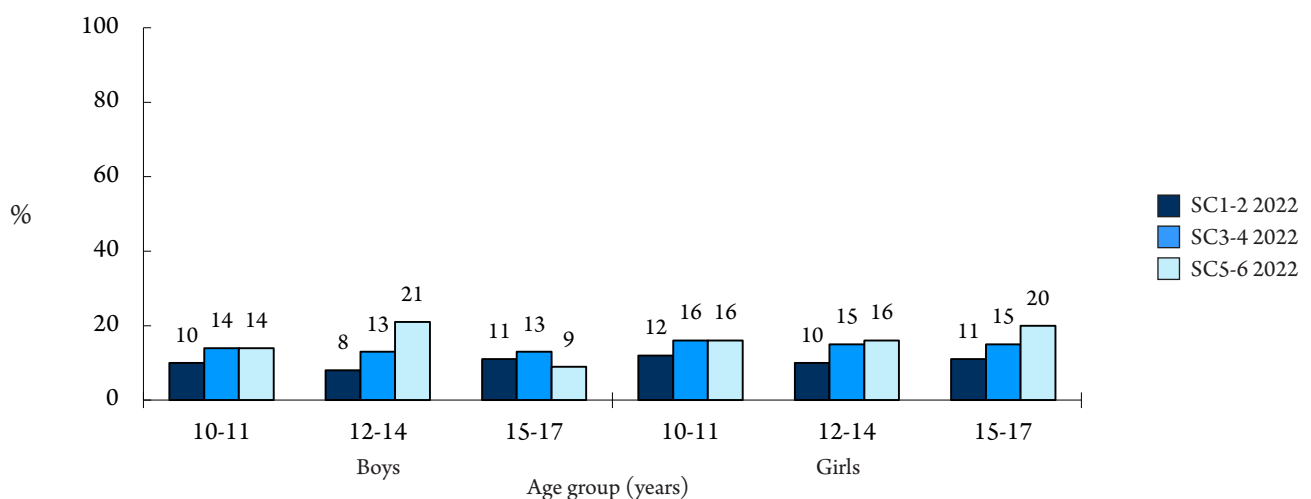
Figure S9: Percentages of boys and girls who report COVID-19 having a positive impact on their family's financial situation



Negative impact

There are statistically significant differences by gender and social class groups. Overall, 12% of boys and 15% of girls report that the COVID-19 pandemic measures had a negative impact on their family's financial situation. Children from lower social class groups are more likely to report that the COVID-19 pandemic measures had a negative impact on their family's financial situation than those from other social class groups. There is no statistically significant difference across age groups.

Figure S10: Percentages of boys and girls who report COVID-19 having a negative impact on their family's financial situation

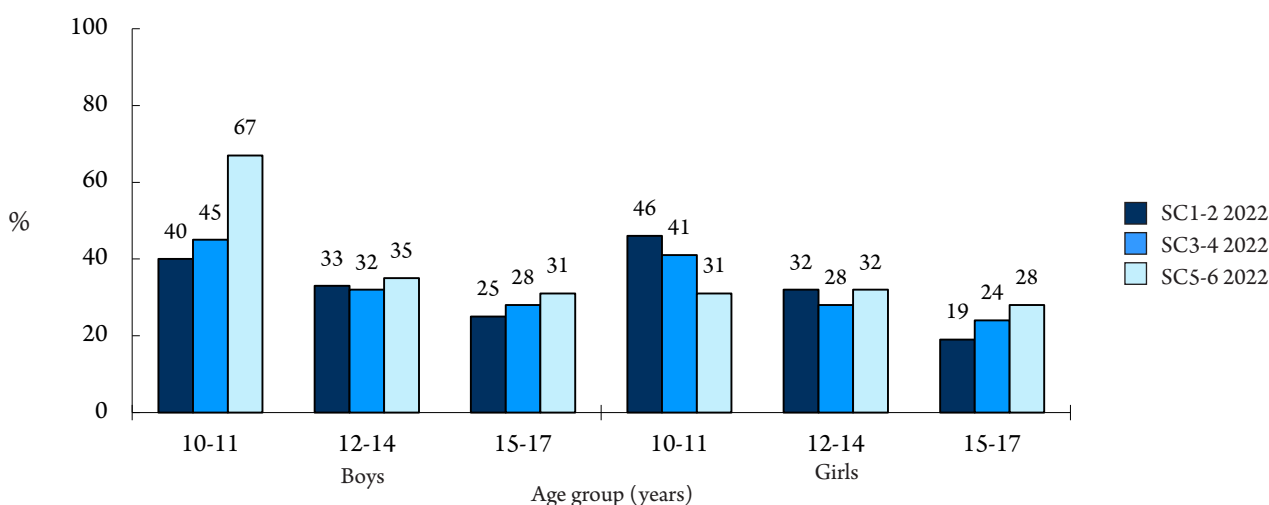


Impact of COVID-19 pandemic measures on food and dietary behaviours

Positive impact

There are statistically significant differences by gender and age group. Overall, 32% of boys and 27% of girls report that the COVID-19 pandemic measures had a positive impact on what they ate or drank. Younger children are more likely to report that the COVID-19 pandemic measures had a positive impact on what they ate or drank than older children. There is no statistically significant difference across social class groups.

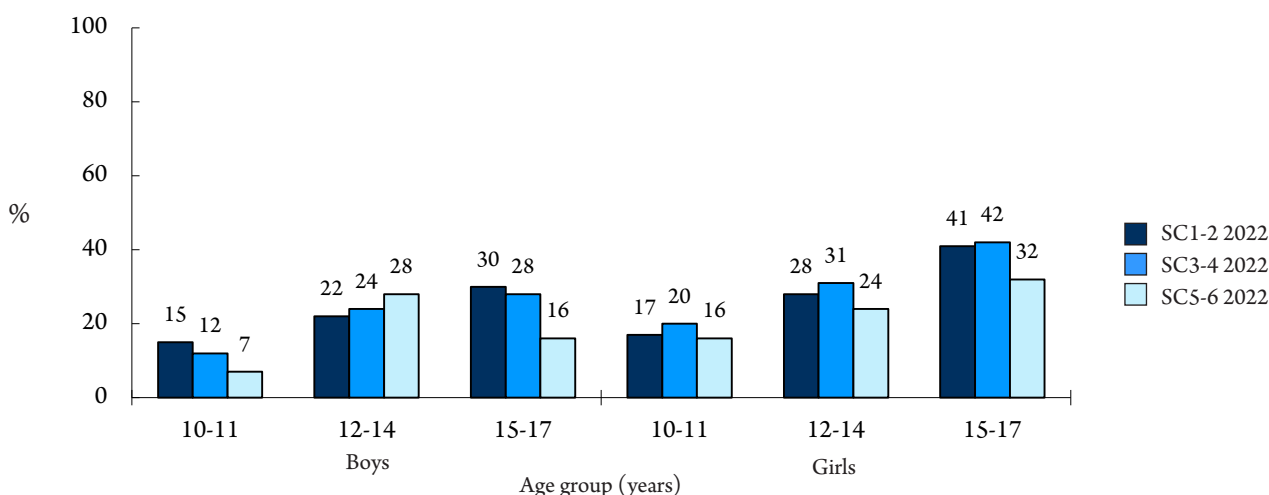
Figure S11: Percentages of boys and girls who report COVID-19 having a positive impact on what they ate or drank



Negative impact

There are statistically significant differences by gender and age group. Overall, 24% of boys and 32% of girls report that the COVID-19 pandemic measures had a negative impact on what they ate or drank. Older children are more likely to report that the COVID-19 pandemic measures had a negative impact on what they ate or drank than younger children. There is no statistically significant difference across social class groups.

Figure S12: Percentages of boys and girls who report COVID-19 having a negative impact on what they ate or drank

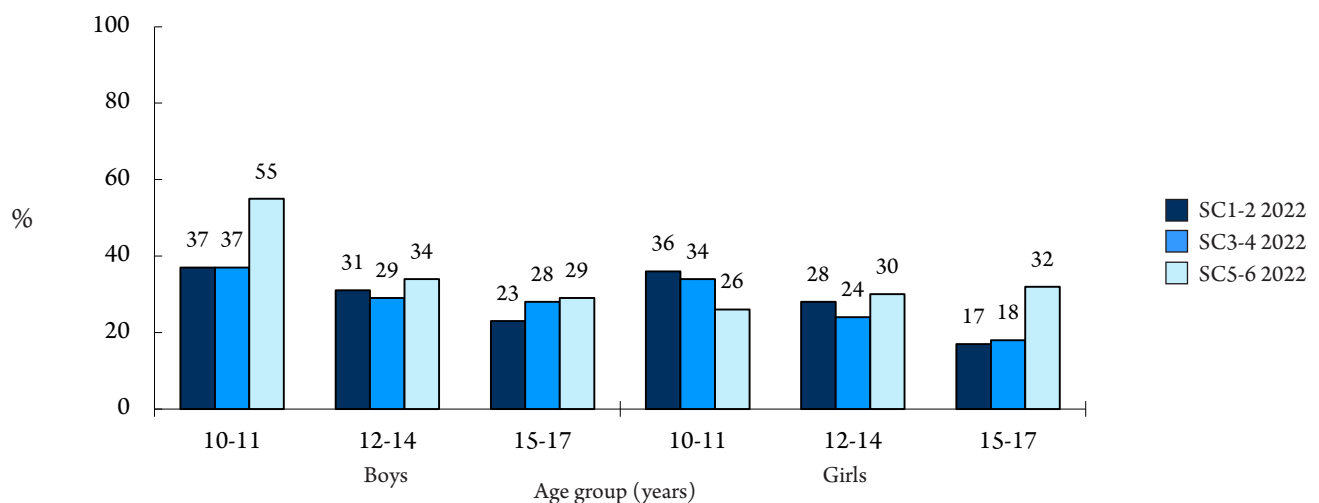


Impact of COVID-19 pandemic measures on future expectations

Positive impact

There are statistically significant differences by gender and age group. Overall, 30% of boys and 24% of girls report that the COVID-19 pandemic measures had a positive impact on their future expectations. Younger children are more likely to report that the COVID-19 pandemic measures had a positive impact on their future expectations than older children. There is no statistically significant difference across social class groups.

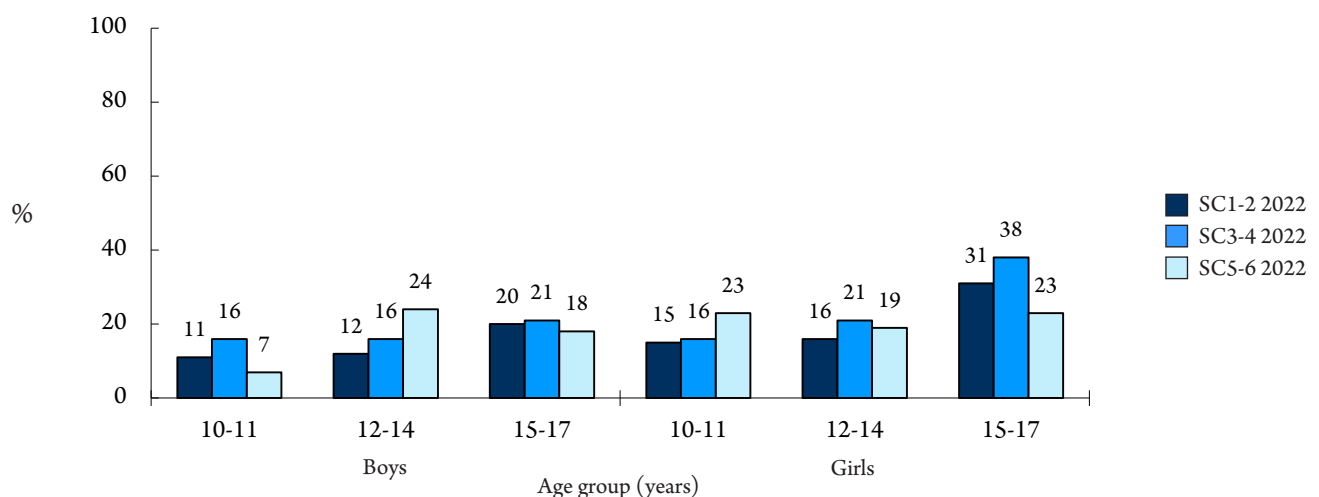
Figure S13: Percentages of boys and girls who report COVID-19 having a positive impact on their future expectations



Negative impact

There are statistically significant differences by gender, age group and social class. Overall, 17% of boys and 25% of girls report that the COVID-19 pandemic measures had a negative impact on their future expectations. Older children are more likely to report that the COVID-19 pandemic measures had a negative impact on their future expectations than younger children. Children from the middle social class group are more likely to report that the COVID-19 pandemic measures had a negative impact on their future expectations than those from other social class groups.

Figure S14: Percentages of boys and girls who report COVID-19 having a negative impact on their future expectations

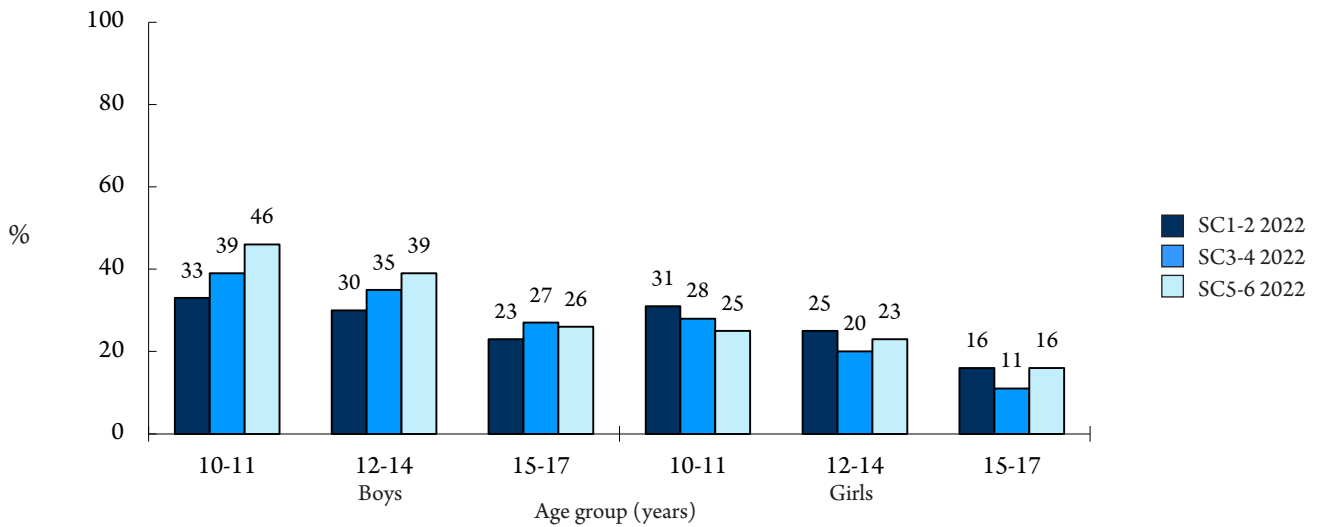


Impact of COVID-19 pandemic measures on mental health

Positive impact

There are statistically significant differences by gender and age group. Overall, 30% of boys and 20% of girls report that the COVID-19 pandemic measures had a positive impact on their mental health. Younger children are more likely to report that the COVID-19 pandemic measures had a positive impact on their mental health than older children. There is no statistically significant difference across social class groups.

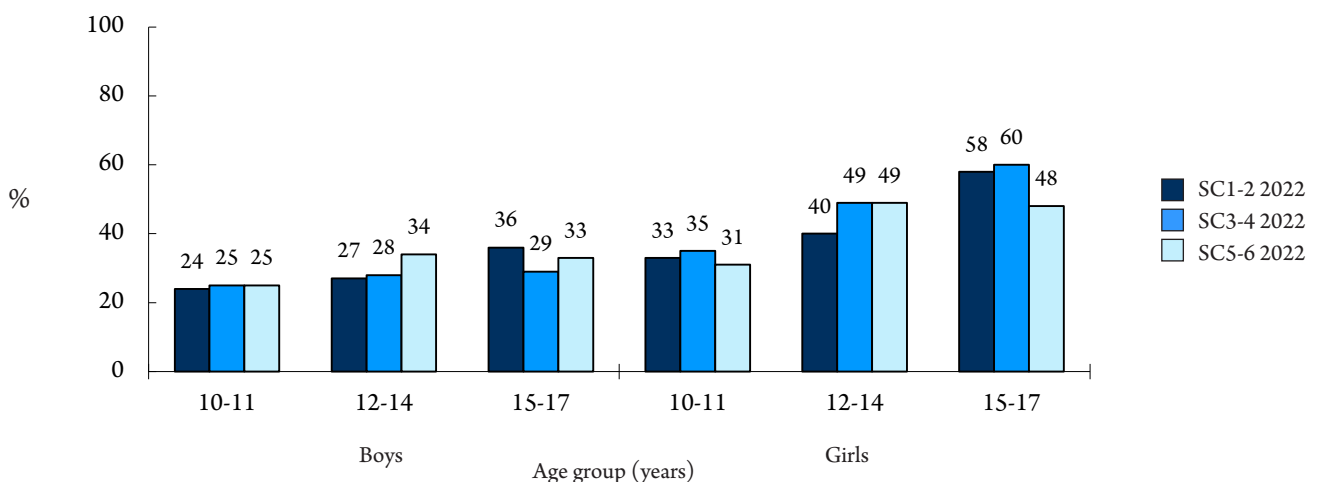
Figure S15: Percentages of boys and girls who report COVID-19 having a positive impact on their mental health



Negative impact

There are statistically significant differences by gender and age group. Overall, 30% of boys and 50% of girls report that the COVID-19 pandemic measures had a negative impact on their mental health. Older children are more likely to report that the COVID-19 pandemic measures had a negative impact on their mental health than younger children. There is no statistically significant difference across social class groups.

Figure S16: Percentages of boys and girls who report COVID-19 having a negative impact on their mental health

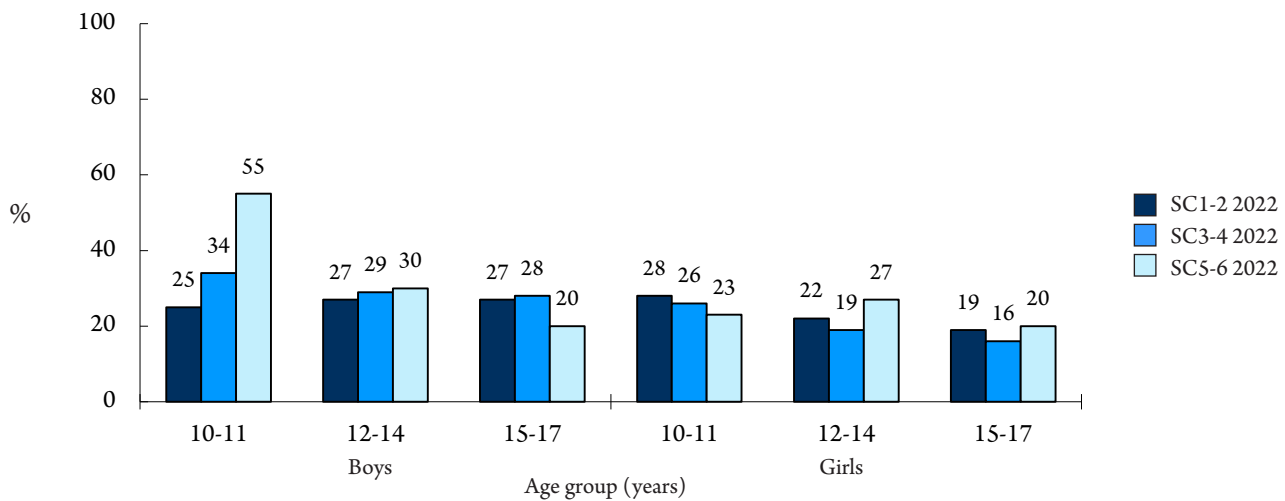


Impact of COVID-19 pandemic measures on life as a whole

Positive impact

There are statistically significant differences by gender and age group. Overall, 28% of boys and 20% of girls report that the COVID-19 pandemic measures had a positive impact on their life as a whole. Younger children are more likely to report that the COVID-19 pandemic measures had a positive impact on their life as a whole than older children. There is no statistically significant difference across social class groups.

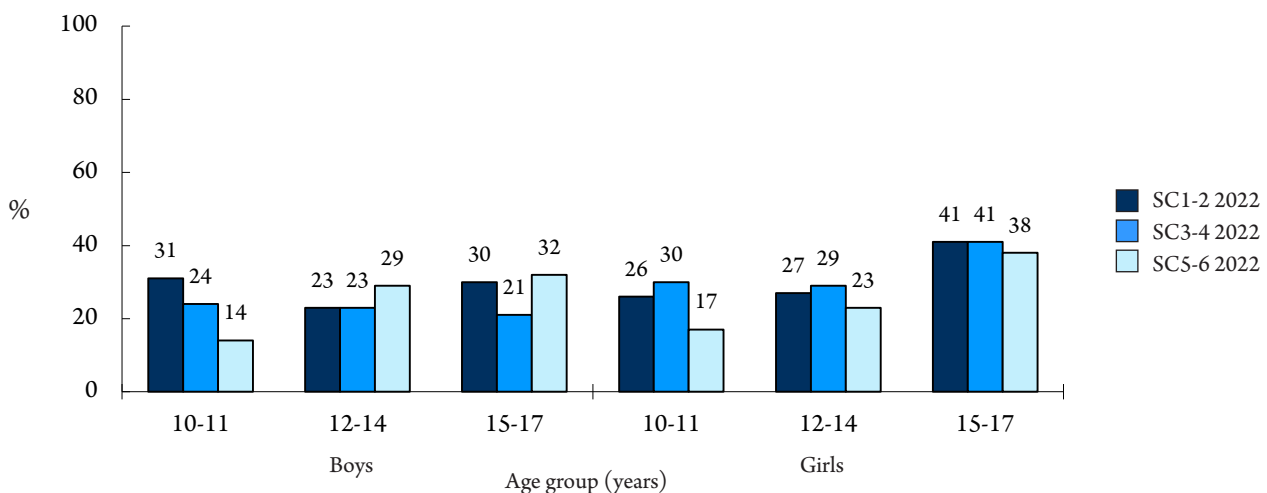
Figure S17: Percentages of boys and girls who report COVID-19 having a positive impact on their life as a whole



Negative impact

There are statistically significant differences by gender and age group. Overall, 26% of boys and 33% of girls report that the COVID-19 pandemic measures had a negative impact on their life as a whole. Children in the oldest age group are more likely to report that the COVID-19 pandemic measures had a negative impact on their life as a whole than other age groups. There is no statistically significant difference across social class groups.

Figure S18: Percentages of boys and girls who report COVID-19 having a negative impact on their life as a whole

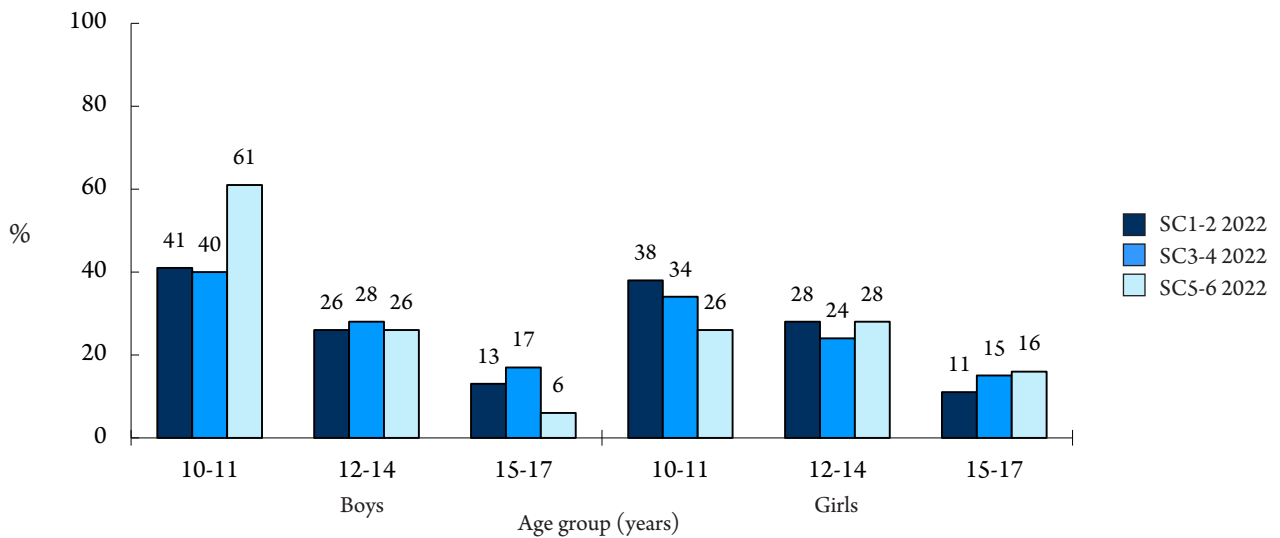


Impact of COVID-19 pandemic measures on school performance

Positive impact

There is no statistically significant difference by gender. Overall, 24% of boys and 22% of girls report that the COVID-19 pandemic measures had a positive impact on their school performance. There are statistically significant differences across age groups, with younger children more likely to report that the COVID-19 pandemic measures had a positive impact on their school performance than older children. There is no statistically significant difference across social class groups.

Figure S19: Percentages of boys and girls who report COVID-19 having a positive impact on their school performance



Negative impact

There are statistically significant differences by gender and age group. Overall, 37% of boys and 43% of girls report that the COVID-19 pandemic measures had a negative impact on their school performance. Older children are more likely to report that the COVID-19 pandemic measures had a negative impact on their school performance than younger children. There is no statistically significant difference across social class groups.

Figure S20: Percentages of boys and girls who report COVID-19 having a negative impact on their school performance

