



## Child Health Care in Ireland

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The Irish health care system is based on a complex and costly mix of private, statutory, and voluntary provisions. The majority of health care expenditure comes from the state, with a significant proportion of acute hospital care funded from private insurance, but there are relatively high out-of-pocket costs for most service users. There is free access to acute hospital care, but not for primary care, for all children. About 40% of the population have free access to primary care. Universal preventive public health services, including vaccination and immunization, newborn blood spot screening, and universal neonatal hearing screening are free. Major health challenges include poverty, obesity, drug and alcohol use, and mental health. The health care system has been dominated for the last 5 years by the impact of the current recession, which has led to very sharp cuts in health care expenditure. It is unclear if the necessary substantial reform of the system will happen. Government policy calls for a move toward a patient-centered, primary care-led system, but without very substantial transfers of resources and investment in Information and Communication Technology, this is unlikely to occur. (*J Pediatr* 2016;177S:S87-106).

Ireland and Northern Ireland (which is part of the United Kingdom) share a middle sized island (85 000 km<sup>2</sup>) with a population of 6.4 million people (4.8 million in the Republic and 1.6 million in Northern Ireland) in the North Atlantic. The country is flat or hilly, with a high rainfall, many rivers, and few tall mountains. The landscape is visually dominated by small scale agricultural holdings, with relatively little woodland.

Politically, historically, and culturally the Republic has been very heavily influenced by the United Kingdom, and there are very strong similarities between the 2 countries. The Republic gained its independence from Britain a little less than a century ago, and Northern Ireland remains part of the United Kingdom.

The 2 most significant political developments in the Republic over the last 40 years have been its membership of the European Union (EU) (from 1973), which has led to an economic transformation, and the Northern Ireland Peace process (from 1998 onward), which has greatly reduced violence on the island and improved cooperation between the 2 jurisdictions.

### Sociodemography

The demography of Ireland has been affected by 4 factors: relatively high birth rates (particularly in the last few years); increasing life expectancy<sup>1</sup>; substantial immigration (mostly from other EU countries); and substantial emigration (particularly among young people during the recent years of the global financial crisis). As a result, although the population age structure is currently relatively young, it is also aging rapidly.<sup>2,3</sup>

AMO	Area medical officer	HPSC	Health Protection Surveillance Center
CAMHS	Child and Adolescent Mental Health Services	HSE	Health Service Executive
CCHSSS	Core Child Health Screening and Surveillance Service	ICU	Intensive care unit
CEO	Chief Executive Officer	LOS	Length of stay
CFA	Child and Family Agency	MDT	Multidisciplinary team
CUH	Children's University Hospital	NCHD	Nonconsultant hospital doctor
DCYA	Department of Children and Youth Affairs	OECD	Organization for Economic Cooperation and Development
ED	Emergency department	OLHSC	Our Lady's Hospital for Sick Children in Crumlin
EU	European Union	PfG	Program for Government
GDP	Gross domestic product	PHN	Public health nurse
GP	General practitioner	RCN	Registered Children's Nurse
GUI	Growing Up in Ireland	SHO	Senior House Officer
HiAP	Health in All Policies	SPDS	Salaried public dental service
HIPE	Hospital Inpatient Enquiry	UN	United Nations
HIQA	Health Information and Quality Authority	VTEC	Verocytotoxin producing <i>Escherichia coli</i>
		WTE	Whole Time Equivalent

The birth rate is high, with a total fertility rate of 2.05 in 2011. Irish birth numbers rose rapidly over the last 2 decades from approximately 42 000 births in 1994,

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rates peaked between 2008 and 2009, and a reducing trend has been evident since then, which is confirmed by preliminary figures from 2013, showing births below 70 000 births for the first time since 2006. This rise in the number of births has severely stressed both maternity services and educational services.

The Republic of Ireland's population has increased by over 1 million in the last 20 years. The population growth rate increased 8.0% between 1995 and 2000 and has remained steady (to 2011). The average age of women at first childbirth has been steadily increasing, and the average family size has been decreasing since 2000. After falling in the 1990s, fertility rate and birth rate increased steadily up to 2009, while the death rate has been falling consistently during the entire period. Immigration rose from the mid-1990s, but has recently fallen off. Emigration has also risen sharply in recent years. Consequently, the age dependency ratio fell from 50 in 2000, to 46 in 2006 and is now back at 50 (World Bank data). Over the last 20 years, the national population has become progressively more urbanized, with 62.0% living in urban areas in 2011. Over 10% of households have been single parent households.

## Economy

Ireland had gone from being one of the poorest economies in the EU to one of the strongest between 1984 and 2004. Since 2008, the economic picture has been dominated by the collapse of a property bubble, and the payments by Irish taxpayers to foreign bondholders of bonds in Irish banks. There has been a very severe recession with a rapid rise in unemployment, especially among the youth, and very significant emigration, with severe cuts in funding for public health and social services.

There has been a rapid increase in gross domestic product (GDP) and GDP per capita, followed by recent stagnation in GDP and significant fall in GDP per capita. The unemployment rate, which was persistently high until the mid-1990s, fell steadily, but has risen sharply again since 2005. The figures for the poverty rates mask the fact that the "at risk of poverty rate" was falling until 2009 but have been steadily increasing, and the "deprivation rate" and "consistent poverty rate" have both increased very considerably since then.

## Political Context

Ireland is a parliamentary democracy. It is, generally, a very centralized country. There is a bicameral parliament, known as the Oireachtas. This has one directly elected chamber, the Dáil, and a chamber largely elected by local authority members, the Seanad (Senate); members of these are referred to as Teachtaí Dála and Senators, respectively. The President has a largely ceremonial role. The head of the Government, the Taoiseach, is a member of the Dáil, as are (currently) all the Ministers. Local authorities have limited powers with almost no role in either health or education.

The executive is part of the legislature, and the judiciary is independent of both. Responsibility for health policy lies

with the Department of Health, led by a Minister who is a member of the Dáil. Responsibility for health care delivery lies with an executive agency, the Health Services Executive, but this is being brought back under the control of the Department of Health at the moment. A great deal of effective power is exercised by senior civil servants and senior staff in local authorities.

The main political parties are Fianna Fáil and Fine Gael, center-right parties with origins in the Irish civil war of 1922-1923, the labor party, a social democratic party, and Sinn Féin, a nationalist and populist left-wing party. There are a large number of politically-independent Teachtaí Dála, both on the right and the left, and several smaller left-wing parties. The present government is a coalition of Fine Gael and labor. The country ranks 21st in the global corruption indicator from Transparency International. Ireland is a member of the United Nations (UN), the EU, the Council of Europe, General Agreement on Tariffs and Trade, the World Trade Organization, and has signed both the UN Convention on the Rights of the Child and the European Human Rights Convention.

## Child Health and Well-Being Status

Of Ireland's 4.6 million population, 1.25 million (23%) are children under 16 years of age. Ireland has the highest birth rate in the EU (16.3 per 1000) and almost 70 000 births per annum. There are 145 000 pediatric inpatient admissions (1 in 9 children), 244 000 emergency department (ED) pediatric attendances (1 in 5), and 387 000 outpatient attendances (1 in 3) per annum.

Ireland has an infant mortality rate of 3.5 deaths under 1 year of age per 1000 live births (Organization for Economic Cooperation and Development [OECD] average is 4.4 per 1000) (Table I). Sudden infant death syndrome has decreased 57% since 2002 to 0.29 per 1000 live births. Ireland's mortality for children under 5 years of age has been lower than the EU average since 2004. From the age of 1 year, the greatest proportion of childhood deaths (32%) are due to injuries (chiefly road-related and drowning) and are, thus, potentially avoidable.

Ireland ranks 8th in the EU for child well-being across 6 variables in the latest UN Children's Fund Innocenti Report.<sup>4</sup> Striking inequities can be noted in children's life chances and health outcomes, resulting from a complex interaction of cultural, social, and economic forces, including differential risk exposure and access to high quality health care. Many aspects of child health are affected by government policies, especially policies that affect the distribution of resources, employment, housing, education, and health care.

The overall health of Irish children is improving. However, almost no routine data are available on illness in children, and even though the available survey data from Health Behavior in School-Aged Children Study<sup>5</sup> and Growing Up in Ireland (GUI) Study<sup>6</sup> are very useful, they cover limited age groups and time periods, and are based on relatively small samples.

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