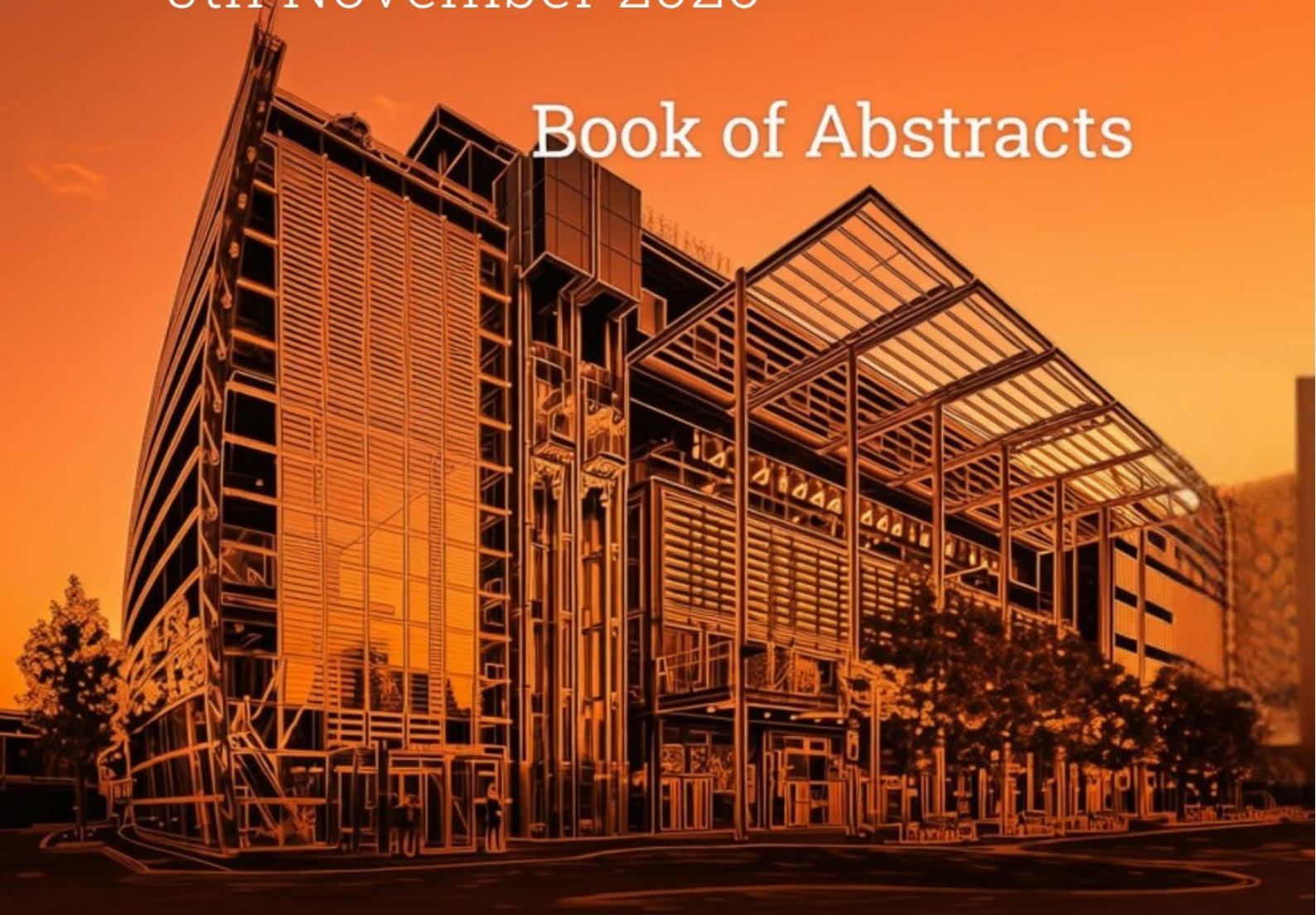
Fás Aníos in Éirinn
Growing Up in Ireland

GROWING UP IN IRELAND
20
YEARS
2006-2026

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Book of Abstracts



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

Keynote Presentation: Room 1, Stratocaster A&B, 13:30

From aspiration to reality: tracking the transitions and outcomes of Scotland's young people from 14 to 20

Paul Bradshaw (Scottish Centre for Social Research)

Biography: Paul Bradshaw is Director of the Scottish Centre for Social Research, an independent, not-for-profit research institute and the Scottish arm of the National Centre of Social Research. Over his career, Paul has worked on a wide range of research studies involving quantitative and qualitative methods and across several policy areas. His principal research role has been the management and development of the Growing Up in Scotland study – a large-scale, prospective longitudinal cohort study - which he has led since 2005.

Abstract: In Scotland and across the UK there is mounting concern that the social contract with young people has broken down: only one in four young people in Britain believe everyone has a fair chance to get ahead, and youth inactivity is at its highest in over a decade. Much of the evidence cited in recent discussions on this topic is cross-sectional. This paper draws on three sweeps of Growing Up in Scotland (GUS) - a nationally representative prospective cohort study of children born in 2004/05 - covering ages 14, 17 and 20 - to explore young people's routes from the end of school into life beyond and provide insight into issues of education, work, wellbeing and civic life.

Aspiration at 14 is near-universal; outcomes at 20 are not. At 20, young people from the least deprived areas were considerably more likely to be attending university than those from the most deprived areas; significant proportions of young people in work were on zero hours contracts; and many reported poor mental health, with higher rates amongst more disadvantaged groups. Yet the majority of young people remained optimistic about their future. The paper poses that the critical question is not whether young people aspire, but what happens between aspiration and outcome – a question which longitudinal studies such as Growing Up in Scotland and Growing Up in Ireland are uniquely well placed to answer.

Launch Presentation: Room 1, Stratocaster A&B, 9:55

Adolescent antisocial behaviour: Changes over time and across the lifecourse

Emer Smyth (Economic and Social Research Institute)

Merike Darmody (Economic and Social Research Institute)

Aisling Murray (Department of Children, Disability and Equality)

About this report: *This report has been commissioned by the Department of Children, Disability and Equality under the DCDE-ESRI Research Partnership. The full report will be available to download from esri.ie and growingup.gov.ie after the launch.*

Abstract:

Background: Antisocial behaviour (ASB) encompasses various behaviours ranging from graffiti to physical aggression. There has been a lack of large-scale empirical research in Ireland on changes in ASB over the adolescent years and its consequences for later outcomes.

Methods: Cohort '98 of the GUI study provides a unique opportunity to explore the prevalence of ASB, its drivers and consequences. Latent class analysis is used to identify four types of ASB trajectory and modelling explores the early adult outcomes for these four groups. Cohort '08 data are used to explore the extent to which patterns of ASB among 13-year-olds have changed over a decade.

Results: Both ASB trajectory and contact with the justice system are found to make a difference to outcomes in early adulthood. Those who increased their ASB involvement between 13 and 17 received lower Leaving Certificate grades, were much less likely to achieve a degree, had higher depression scores, lower life satisfaction, lower satisfaction with their social life and less trust in others at age 20.

Looking at adolescents a decade apart, levels for boys have remained stable, although with a dip in 2021 which related to behaviour in 2020/2021 during the pandemic-related restrictions. In contrast, there has been an increase over time in non-violent and violent ASB among girls, partly driven by worse mental health.

Conclusions: Given the range of factors influencing ASB, the findings point to the need for further developing a joined-up and coordinated approach across government departments, state agencies and community organisations as well as the Youth Diversion Programme to address ASB and moderate its consequences.

Session A: Mental health 1
Room 1, Stratocaster A&B

Adolescent self-harm and later outcomes: A longitudinal analysis of adult health status, mental health, and healthcare utilisation

Gretta Mohan (Economic and Social Research Institute)
Seán Feeney (Economic and Social Research Institute)

Session A, Room 1, Stratocaster A&B. 10:20

Background/Context: Self-harm amongst adolescents is a critical public health concern, yet the long-term health and healthcare implications as individuals transition into young adulthood remain poorly understood. This study investigates the changing prevalence of self-harm from late adolescence to early adulthood and examines its longitudinal impact on subsequent health status, healthcare utilisation, and lifestyle factors at age 25.

Methods: Growing Up in Ireland longitudinal data were analysed across three subsequent waves: Wave 3 (age 17), Wave 4 (age 20), and Wave 5 (age 25). Multivariable regression models were utilised to control for young person's sex, parental education, and baseline statuses of the respective outcome variables to isolate the independent effects of self-harm histories.

Results: Self-harm rates fell from ~16% at age 17 to ~7% at age 20. However, early self-harm predicted poorer outcomes at age 25. Persistent self-harm (Waves 3 and 4) significantly reduced the probability of reporting excellent or very good health. Individuals reporting self-harm at Wave 4 alone had a ~30-percentage-point higher probability of a depression or anxiety diagnosis by Wave 5. Furthermore, persistent self-harmers averaged 1.7 additional GP visits, 6.1 psychologist/counsellor visits, 1.1 psychiatrist visits, and 0.4 A&E visits in the prior year. Any history of self-harm increased the probability of sleep difficulties by ~20 percentage points, whilst persistent self-harm predicted a higher probability of daily smoking.

Conclusion: Whilst self-harm rates decline during the transition into adulthood, the long-term consequences persist. Youth self-harm is a robust predictor of poor adult health, heightened psychiatric morbidity, adverse lifestyle behaviours, and substantial healthcare utilisation at age 25.

Factors that foster resilience in outcomes for vulnerable children: An analysis using data from the Growing Up in Ireland survey

Bernadine Brady (University of Galway)
Charlotte Silke (University of Galway)
Caroline Heary (University of Galway)

Session A, Room 1, Stratocaster A&B. 10:40

Background: This research aims to identify the factors that promote resilience among young people in Ireland. The study explores, children's patterns of early-life risk exposure, their wellbeing profiles at age 25, and the protective factors that increase the likelihood of youth 'doing well' as young adults.

Methods: This study used longitudinal data from the Growing Up in Ireland (GUI) Cohort '98 study. Latent Class Analysis was used to identify patterns of childhood risk based on exposure to adverse developmental conditions and negative life experiences at age 9. Latent Profile Analysis was applied to identify wellbeing profiles at age 25. Finally, moderated logistic regression models examined whether key protective factors - including parent-child relationships, peer attachment, teacher support, educational attainment, and extracurricular participation - were associated with positive wellbeing outcomes.

Results: At age 9, three risk classes were identified: a Low Risk, a Social-Health risk, and a Family SES risk group. At age 25, two wellbeing profiles emerged: "Doing Well" and "Struggling". Young people exposed to either Social-Health or Family SES risk at age 9 were significantly less likely to be "Doing Well". Higher educational attainment, stronger teacher and peer relationships, lower parent-child conflict, and regular extracurricular participation were all associated with greater odds of "Doing Well."

Conclusion: Early-life adversity increases the likelihood of poorer wellbeing outcomes, but trajectories are not fixed. Findings highlight the importance of combining early intervention with sustained investment in supportive family, school, peer, and community environments to promote resilience and positive development across the life course.

Session B: Disability
Room 2, Alhambra

Disability and sexual health of young adults

Anne Nolan (Economic and Social Research Institute)
Emer Smyth (Economic and Social Research Institute)

Session B, Room 2, Alhambra. 10:20

Background: Sexual activity is an important component of physical and mental health and wellbeing, and adolescence and young adulthood are critical periods in the development of positive sexual health and relationships. Disabled young people may face additional challenges in achieving positive sexual health due to greater social isolation and stigma, more reliance on sexual health information from parents, and fewer opportunities for sexual experiences.

Methods: Data from the '98 Cohort of Growing Up in Ireland (GUI) at age 25 are used in this study. Multivariable regression models are used to examine the association between disability (as well as disability severity, type and duration) and a variety of sexual health outcomes. Outcome examined include age of sexual initiation, relationship status, condom use, contraception use and diagnoses of sexually transmitted infections (STIs).

Results: Preliminary analyses indicate that women report higher levels of disability at age 25 than men. Among both men and women with a disability, mental or emotional conditions are most common. Most young people have had sex by age 25, but those with a disability are less likely to have had sex and to be in a relationship. There is little association between disability and condom and contraption use, or STI diagnoses, after adjustment for other confounders.

Conclusion: The findings of the research will provide evidence to inform key national strategies such as the Sexual Health Strategy and the National Human Rights Strategy for Disabled People, as well as the work of those involved in policy implementation and service delivery.

Emerging adults living with long-term physical conditions in Ireland: A secondary analysis of the Growing Up in Ireland Wave Four of Cohort '98 Dataset

Orla Mooney (Dublin City University/Maynooth University)
Pamela Gallagher (Dublin City University)
Veronica Lambert (Dublin City University)

Session B, Room 2, Alhambra. 10:40

Background: Emerging adulthood (ages 18–25) is a distinct developmental phase characterised by identity exploration, instability, self-focus, feeling in-between, and possibilities. For emerging adults living with long-term physical conditions (LTPC), these developmental tasks may be shaped by additional challenges such as healthcare, housing and educational transitions. While research has examined disability in younger cohorts, less is known about how LTPC influences the experience of emerging adulthood in Ireland. This study addresses that gap using data from the national Growing Up in Ireland (GUI) study.

Methods: This study involved a secondary cross-sectional analysis of Wave Four of the GUI Cohort '98 dataset (aged 20 years), with a final sample of 4,788 participants, including 380 emerging adults with LTPC and 4,408 peers without LTPC. Variables were mapped onto Arnett's five features of emerging adulthood, and group comparisons were conducted.

Results: Emerging adults with LTPC reported similar experiences to peers across many domains, including self-esteem, friendships, family relationships, finances, and future aspirations. However, they reported significantly lower life satisfaction, were less likely to progress to higher education, more likely to experience unemployment or inability to work, and reported greater unmet healthcare needs. They were also less likely to identify as fully adult, despite being more likely to feel they had grown up faster.

Conclusion: Findings suggest that while emerging adults with LTPC share many normative experiences of emerging adulthood, they face distinct structural and health-related barriers that may shape their transition to adulthood. This highlights the need for targeted educational, healthcare, and policy supports.

Session C: Education 1

The origins of the STEM gender gap: Evidence from an analysis of secondary school subject selection

Ciarán Murphy (University College Dublin)
Dáire Crotty (University College Dublin)

Session C, Room 3, Stratocaster C. 10:20

Background/Context: Secondary school subject choices are a key gateway to STEM (Science, Technology, Engineering and Maths), yet their determinants remain underexplored. Most existing research treats STEM as a single category, overlooking practical, technology-oriented subjects, which strongly predict college STEM enrolment.

Methods: We use the Growing Up in Ireland study, which follows a nationally representative cohort from age 9 to the end of secondary school. We apply regression and Gelbach decomposition analysis to trace how gender gaps in subject choice develop from lower to upper secondary. We complement this with machine learning methods to exploit the richness of the data.

Results: Gender gaps in the uptake of most traditional academic STEM subjects in secondary school are small or favour girls. The large gaps in favour of boys lie instead in practical subjects such as engineering and construction. Lower-secondary subject choices, made around age 13, account for the majority of the upper-secondary gap. The lower-secondary gap is even larger, yet rich age-9 measures of ability, comparative advantage, preferences, aspirations and family background explain only 3% of it. Schools do not explain it either: the gap is larger in mixed-sex than single-sex schools, and it persists within schools once subject availability is controlled for. Machine learning methods considering a wide range of possible explanations yield the same conclusions.

Conclusions: The evidence points away from skill- and school-based explanations and towards mechanisms such as gender norms, and identifies ages 9 to 13 as a critical window for policy intervention.

Social origin and the risk of dropout: The stratification of higher education trajectories in Ireland

Rodolfo Pezzi (Trinity College Dublin)
Yekaterina Chzhen (Trinity College Dublin)
Luis Ortiz-Gervasi (Universitat Pompeu Fabra)

Session C, Room 3, Stratocaster C. 10:40

Background/Context: Inequalities in higher education are increasingly produced after enrolment, through differentiated risks of non-completion and their labour-market consequences. Building on the distinction between vertical and horizontal stratification, this study examines how social origin shapes higher-education trajectories beyond the point of entry in Ireland, a high-completion mass-participation system with comparatively low tuition costs and limited pre-university tracking.

Methods: Drawing on three waves of the Growing Up in Ireland '98 cohort study, it estimates the risk of non-completion by age 25 among entrants net of Leaving Certificate performance, using logistic models with an interaction between parental education and field of study, and models early labour-market destinations among completers, non-completers and never-entrants using multinomial logistic regression.

Results: Three findings emerge. First, parental education, rather than household income or parental social class, is the key predictor of tertiary completion, even after controlling for upper-secondary performance, and the association takes the form of a threshold: students whose parents hold, at most, lower secondary education face markedly higher risks, while the medium and high groups do not differ. Second, this parental-education differential varies sharply across fields of study. It is largest in Social Sciences, Business and Law and in Science, Mathematics and Computing, where the predicted probability of non-completion is approximately 0.50 among students whose parents hold, at most, lower secondary education, against 0.10 among those with tertiary-educated parents. Third, the consequences of non-completion are field-contingent and not uniformly negative relative to never entering higher education: non-completers retain an advantage over never-entrants in access to professional occupations, but this advantage reverses for managerial and technical destinations. Earnings premia to completion are largest in Health and Welfare and Education, and reverse in favour of non-completers in Humanities and Arts.

Conclusion: Horizontal differentiation structures inequality in persistence and in its labour-market consequences, not merely in access. Origin differentials are compressed in precisely those fields where the credential is a near-necessary condition of labour-market entry, while the reversal at managerial and technical destinations plausibly reflects vocational and apprenticeship routes outside higher education. That neither income nor social class carries a residual association once parental education is accounted for suggests that in a low-fee, means-tested system the barriers to completion are not primarily financial.

Session D: Mental health 2

Room 1, Stratocaster A&B

Mental health diagnosis, treatment, and service utilisation among young people in Ireland

Seán Feeney (Economic and Social Research Institute)
Anne Nolan (Economic and Social Research Institute)

Session D, Room 1, Stratocaster A&B. 11:30

Background/Context: Mental health and wellbeing are fundamental to people's overall health. Evidence indicates a rising prevalence of poor mental health in recent years, with young people being disproportionately affected. This research examines the factors associated with the diagnosis of mental health conditions among young people in Ireland. In Ireland, healthcare entitlement is stratified between means-tested public cover and private insurance, and the type of cover a young person holds can shape their access to mental health care.

Methods: Data are drawn from Wave 3 of the 1998 Cohort of Growing Up in Ireland, comprising 6,216 adolescents aged 17 years. Guided by the social determinants of health framework we fit multinomial logistic regression models of joint need–diagnosis status, with need defined by Short Mood and Feelings Questionnaire (SMFQ) thresholds (8 and 12) and self-reported depression/anxiety diagnosis status. Insurance category is the key exposure, adjusting for sex, age, parental education, self-rated health and region.

Results: Around 10% of 17-year-olds reported a formal diagnosis of depression or anxiety. Adolescents with a medical card were more likely than those without any cover to be diagnosed both where a current need was present and where no current need was evident but may have existed in the past. They were also less likely to have an unmet need.

Conclusion: These findings suggest that public medical card entitlement is associated with higher diagnosis and lower unmet need. This adds to our understanding of how insurance cover shapes the diagnosis of mental health conditions among adolescents in Ireland.

Integrating mental and physical healthcare for young people with mental health difficulties in Ireland: Identifying service users' needs using longitudinal data

Allyson Gallant (Trinity College Dublin)
Catherine Darker (Trinity College Dublin)
John Paul Lyne (HSE & RCSI)
Karen O'Connor (HSE & UCC)
Michelle Doody (Mental Health Ireland)
Vista Consortium (RCSI)

Session D, Room 1, Stratocaster A&B. 11:50

Background/context: Young people with anxiety and/or depression (A/D) are at increased risk of poor physical health outcomes; however, evidence identifying and describing these needs and how they evolve across adolescence into young adulthood remains limited. This study examined the physical health profiles of young people to identify factors associated with self-reported A/D diagnosis to inform the development of integrated mental and physical healthcare services in Ireland.

Methods: Secondary analyses were conducted using GUI Child '98 data. Self-reported A/D diagnosis by a healthcare provider collected at ages 17/18 (wave 3), 20 (wave 4) and 25 years (wave 5) were analysed. Cross-sectional analyses compared perceived health, physical activity,, diet and body image, and lifestyle variables between participants with and without an A/D diagnosis. Longtidunal analysis used multivariable logistic regressions to examine associations between physical health and a history of A/D across adolescence and young adulthood.

Results: A/D was consistently associated with poorer self-rated health and body image, shorter sleep length and more sleep difficulties. Reduced physical activity and disordered eating patterns emerged during adolescence, with cannabis use and diagnosed eating disorders priority concerns in young adulthood. Longitudinal findings revealed a history of A/D was associated with poorer physical and oral health, shorter sleep duration, higher body mass index and food insecurity.

Conclusion: Shared models of care between primary and secondary care should include routine screening for sleep issues, lifestyle behaviours and eating disorders to ensure early detection and intervention. Tailored prevention and health promotion strategies are needed to support long-term mental and physical health outcomes.

Community factors influence on mental health service use: A bi-national study of young people in Ireland and Scotland

Colm Healy (University College Dublin)
Kirstie O'Hare (University of Edinburgh)
Jonah Byrne (University of Edinburgh)

Session D, Room 1, Stratocaster A&B. 12:10

Background: Significant barriers prevent young people with mental ill-health from accessing mental health services. While individual-level factors influencing service use have been studied, the role of community-level factors remains poorly understood. The objective was to identify whether community factors are associated with mental health service use in adolescents; at the population level and among adolescents with high levels of mental ill-health.

Methods: Using data from two national cohort studies — Cohort 08' from Growing up in Ireland (GUI; n=6,332) and Cohort 1 from Growing up in Scotland (GUS; n=1,647) — we examined the associations between community factors and mental health service use in the whole cohort and in subsamples with high mental ill-health in early- (age 13; GUI; n=772) and late-adolescence (age 17; GUS; n=428). Mental ill-health was measured using the Strengths and Difficulties Questionnaire. Community factors included: neighbourhood crime, safety, community trust, neighbourhood identity, green space, safe hangout spaces, and local facilities. Logistic regression was used to examine associations, with inverse probability weighting used to account for potential confounders.

Results: In the whole cohort, neighbourhood crime, safety, community trust, neighbourhood identity, safe hangout spaces, and local facilities were associated with mental health service use. Among those with high symptom levels, and only in the GUS cohort, green space was associated with a small increased likelihood of service use after weighting.

Conclusion: Community factors are associated with mental health service use in the general population but largely unrelated to service use among those with high levels of mental ill-health.

Session E: Context 1
Room 2, Alhambra

How pet ownership influences children and youth well-being, health, and relationships in Ireland

Elza Elmira (Economic and Social Research Institute)
Elish Kelly (Economic and Social Research Institute)
Emer Smyth (Economic and Social Research Institute)

Session E, Room 2, Alhambra. 11:30

Background/Context: Positive interactions in childhood and adolescence are known to improve youth well-being, health, and relationships. This study examines how pet ownership contributes to these outcomes.

Methods: Using data from Growing Up in Ireland (GUI), a nationally representative longitudinal study tracking infants (Cohort '08) from 9 months and children (Cohort '98) from age 9 over more than nine years, we analyse the role of pet ownership at age 9 in both cohorts. Outcomes of interest include physical health; socioemotional and behavioural well-being, measured by the Strengths and Difficulties Questionnaire (SDQ); self-concept (Piers-Harris); and the Pianta Child–Parent Relationship Scale. A correlated random-effects (CRE) estimator is employed to control for time-invariant unobserved heterogeneity by using time averages of all time-varying explanatory variables.

Results: More than 67% of children at age 9 years old have at least one pet, with the majority being dogs. A higher proportion of children with pets live in an owner-occupied house, are female, live in rural areas, are Irish, and have older siblings, compared to children without pets. Our findings indicate that pet ownership at age 9 is significantly associated with better physical, emotional, and behavioural well-being. Children with pets report higher physical activity, greater prosocial behaviours, and more positive interactions with parents. However, pet ownership is also associated with more hyperactivity.

Conclusion: Our findings suggest that pet ownership in childhood is largely beneficial for physical and socioemotional development. A better understanding of this relationship is important to support effective childhood development.

Parenting with a disability in Ireland: Evidence from Growing Up in Ireland

Eva Slevin (Economic and Social Research Institute)
Helen Russell (Economic and Social Research Institute)
Emer Smyth (Economic and Social Research Institute)

Session E, Room 2, Alhambra. 11:50

Background: While there is a breadth of research on disabled children in Ireland, there has been little emphasis on the experience of parents who have a disability and their children. The percentage of children in the GUI dataset with a disabled parent ranges from 15 to 25 per cent over time. Irish policy states that disabled parents are an at-risk group that should be provided for in policy, but this has not occurred in practice. There is tension in policy discourse between seeing disabled persons as a group in need of care, and parents as sources of care, leading to a discontinuity within parenting and disability policy. While there can be stigma around disabled people becoming parents, previous research has emphasised that external factors such as economic or housing stress mediate relationships between parental disability and parent/child outcomes.

Methods: This research uses a combination of mediation analysis and standard regression to examine the relationship between parental disability and outcomes such as parenting stress, parent-child relationships, and parent mental health. We examine mediating factors such as material and social resources.

Results: Initial analysis finds a relationship between disability and parental stress, affected by external factors such as housing tenure and income quintile. This is an evolving project, and subsequent analysis will examine different outcomes and use alternative methods to better understand the relationship over time.

Conclusion: This research will provide a longitudinal examination of parental disability for the parents in the GUI cohort '08.

Growing up after a recession: Parental job loss and mental well-being in a multi-informant study from childhood to adolescence

Gabriele Mari (Erasmus University Rotterdam)

Session E, Room 2, Alhambra. 12:10

Background: Disruptive events like parental job loss might have persistent and disparate effects on mental well-being. Yet most studies have been focusing on average changes and on one stage of children's development. Besides, research often relies on survey responses from a single participant whose reports might be unreliable or biased. Studies based on administrative data use more 'objective' indicators, but might not capture mental distress that remains outside the purview of healthcare systems.

Methods: This study follows the Infant Cohort of GUI from birth to early adolescence. Leveraging the survey's multi-informant design, I ask how long and for whom does parental job loss experienced before age 5 affect children's mental well-being. I focus on two measures: the SDQ for socio-emotional difficulties and the MHI-5 for general mental health. Net of candidate confounders in linear regressions, I analyse SDQ reports by the primary caregiver (age 3 to 13) and teachers (age 5 and 9), as well as child-reported MHI-5 at age 13.

Results: Parental job loss is associated with persistently higher socio-emotional difficulties among children as reported by caregivers and teachers alike, although only in middle-class families. At age 13, however, I find mostly null effects on child-reported mental health, be it on a continuous scale or based on the cutoff used in healthcare settings.

Conclusion: Findings add an intergenerational dimension to the middle-class squeeze previously documented for Ireland during the recession. Yet long-run multi-informant analyses caution against the idea that effects might still be salient during adolescence.

Session F: Early childhood
Room 3, Stratocaster C

Association between maternal folic acid supplement use before and during pregnancy and child cognitive outcomes in Ireland

Clare Sullivan (RCSI University of Medicine and Health Sciences)
Fergal O'Shaughnessy (Rotunda Hospital / RCSI University of Medicine and Health Sciences)
Breda Hayes (Rotunda Hospital)
Brian Cleary (Rotunda Hospital / RCSI University of Medicine and Health Sciences)
Kathleen Bennett (RCSI University of Medicine and Health Sciences)

Session F, Room 3, Stratocaster C. 11:30

Background/Context: The aim of this study was to examine the association between maternal folic acid supplementation before pregnancy and during the first trimester and child neurodevelopment at 3 and 5 years in Ireland.

Methods: Data collected as part of the Growing Up in Ireland (GUI) longitudinal cohort was used. Information about maternal folic acid supplementation before pregnancy and during the first trimester was collected via questionnaire from the mother when the infant was 9 months. Data on child development was assessed at three and five years using the British Ability Scale (BAS) Early Years Battery, Naming Vocabulary (NV) and Picture Similarities (PS) sub-scales. Multivariable linear regression was used to assess the association between maternal folic acid supplementation and BAS sub-scale score after adjusting for social, demographic, health, obstetric, medication, substance use and infant factors.

Results: At baseline 10,772 children were included. Optimal maternal folic acid use was observed in 6667 (60.9%), 3471 (31.7%) had sub-optimal folic acid use and 634 (5.8%) had not supplemented with folic acid. In the fully adjusted model, maternal folic acid was not significantly associated with either of the sub-scales assessed at age 5. Other factors such as maternal educational level, infant gender, parent reading to the child and parity had more influence on the outcomes.

Conclusion: The relationship between maternal folic acid supplementation before pregnancy and during the first trimester and infant neurodevelopment remains unclear. Future research should include studies on folic acid supplementation later into pregnancy and association with infant neurodevelopment

Rolling sleeves up: A longitudinal analysis of childhood immunisation uptake in Ireland

Irene Mosca (Maynooth University)
Alexander Farnell (Maynooth University)
Peter Eibich (Université Paris Dauphine-PSL)

Session F, Room 3, Stratocaster C. 11:50

Background: The existing literature on the determinants of vaccine compliance in children is vast. However, most studies employ child-level cross-sectional data and/or focus on specific vaccines.

Methods: We contribute to the existing literature using longitudinal data from the infant cohort of the Growing Up in Ireland (GUI) study. In the GUI study, information is collected for the same children on the uptake of different vaccines over time, as the child grows older. The child's primary carer (usually the mother) provides information on whether the child received routine vaccinations at two, four and six months of age, the MMR vaccine in childhood and the HPV vaccine in early adolescence. We model these three vaccination uptake decisions as a dummy variable, taking the value 1 for vaccination, 0 otherwise and employ multivariate probit regression analysis. We include both baseline, time-invariant characteristics and wave-specific, time-varying characteristics measured at interview date among the explanatory variables.

Results: Among the strongest predictors of vaccination status is whether the mother smoked in pregnancy. Depending on vaccination, smoking during pregnancy is associated with a 4-10% point reduction in the probability of being vaccinated. Other determinants of vaccine uptake are vaccine specific. For example, household income is positively associated with the probability of vaccination in infancy and with the probability of taking up the HPV vaccination, but not with the probability of taking up the MMR vaccination.

Conclusion: While some determinants of vaccine uptake in children remain constant over time and across vaccines, others are vaccine specific.

Becoming who we are: Bidirectional associations between screen time and effortful control in early childhood

Eavan Rooney (TU Dublin)
David Gaul (TU Dublin)

Session F, Room 3, Stratocaster C. 12:10

Background: Temperament provides an early foundation for personality development and predicts children's emotional, behavioural, social, and academic outcomes. Effortful control, a core temperamental component of self-regulation, develops rapidly during early childhood. A potential transactional pathway may exist whereby early temperamental difficulties contribute to greater screen exposure, which may subsequently influence developing self-regulatory capacities. This study examined longitudinal associations between infant temperament, early childhood screen time, and later effortful control.

Methods: Data from Waves 1–3 (n = 9,705) of the Growing Up in Ireland '08 Cohort were analysed. Hierarchical linear regressions examined whether temperament at 9 months predicted screen time at 3 years, and whether screen time at 3 years predicted effortful control at 5 years. Analyses adjusted for key parental, household, and environmental factors. Temperament and effortful control were assessed using established caregiver-report measures, alongside caregiver-reported daily screen use.

Results: The model predicting screen time was significant, $F(6, 9698) = 129.95$, $p < .001$, explaining 7.4% of variance. Greater fussiness at 9 months predicted greater screen time at 3 years ($\beta = .045$). The model predicting effortful control was also significant, $F(6, 8635) = 13.67$, $p < .001$, explaining 0.9% of variance. Greater screen time at 3 years predicted lower effortful control at 5 years ($\beta = -.045$).

Conclusions: Small but significant prospective associations suggest a potential transactional developmental pathway linking infant fussiness, subsequent screen exposure, and later effortful control. Further research should examine underlying mechanisms and test whether screen use mediates associations between early temperament and later self-regulation.

Session G: Adolescent health
Room 1, Stratocaster A&B

SCOPE for HEALTH: Integrating mental and sexual healthcare for young people with anxiety and/or depression: Insights from the Growing Up in Ireland Child Cohort

Catherine Darker (Trinity College)
Allyson Gallant (Trinity College Dublin)
Karen O'Connor (HSE & UCC)
John Paul Lyne (HSE & RCSI)
Michelle Doody (Mental Health Ireland)
Vista Consortium (RCSI)

Session G, Room 1, Stratocaster A&B. 15:10

Background/Context: Young people with anxiety and/or depression (A/D) frequently experience co-occurring mental and sexual health needs, which can be left unaddressed between fragmented healthcare services. Translating local evidence into an actionable shared model of care (SMoC) remains a key challenge in complex and evolving healthcare systems. SCOPE for HEALTH seeks to address this gap by applying implementation science to inform the development of an integrated, youth-centred SMOC in Ireland.

Methods: Using longitudinal data from the Growing Up in Ireland '98 child cohort, participants who self-reported a diagnosis of A/D at age 17/18 (wave 3; n= 5769), age 20 (wave 4; n= 4689), and/or age 25 (wave 5; n=2194) were analysed. Sexual health and wellbeing indicators were included in the analyses, including timing of sexual initiation, number of sexual partners, history of sexually transmitted infections, and romantic relationship quality. Cross-sectional and longitudinal analyses included descriptive statistics and multivariate binary logistic regressions to examine associations of A/D within and across time points.

Results: Females and sexual minority were significantly more likely to report an A/D diagnosis at all three time points (all p-values <0.001). Number of sexual partners, unprotected sex and relationship quality were also associated with a diagnosis. Longitudinal analysis revealed patterns of A/D were associated with number of sexual partners, unsafe sex and romantic relationship status and quality.

Conclusion: Young people with A/D experience intersecting mental and sexual health inequities that are not reflected in current service configurations. Combining longitudinal epidemiological evidence with PPI-informed interpretation provides an evidence base for developing equitable shared models of care.

Neighbourhood characteristics and oral health among Irish adolescents: Growing Up in Ireland Wave 3 findings

Vinay Sharma (Trinity College Dublin)
Oscar Cassetti[1]
Michael Crowe[1]
Michael O'Sullivan [1]
Lewis Winning[1]

[1] (Dublin Dental University Hospital, Trinity College Dublin)

Session G, Room 1, Stratocaster A&B. 15:30

Background: Neighbourhood environments may influence oral health through psychosocial, behavioural and environmental pathways. This study examined the association between neighbourhood characteristics and self-reported oral health among Irish adolescents independently of family socioeconomic circumstances and individual oral behaviours.

Methods: Data from Wave 3 of the Growing Up in Ireland child cohort survey (n = 6,216; aged 17/18 years) were analysed. Self-reported oral health was dichotomised as optimal (excellent/very good/good) or sub-optimal (fair/poor). Five neighbourhood domains (physical environment, antisocial behaviour, neighbourhood safety, neighbourhood satisfaction and neighbourhood amenities) were derived from questionnaire items, with higher scores indicating more favourable neighbourhood perceptions. Weighted multivariable logistic regression examined associations between neighbourhood domains and sub-optimal oral health, adjusting for demographic, socioeconomic, and oral health behavioural factors.

Results: Overall, 6.8% of adolescents reported sub-optimal oral health. In fully adjusted models, higher neighbourhood satisfaction scores were associated with lower odds of sub-optimal oral health (OR 0.71, 95% CI 0.57–0.89). Higher perceived neighbourhood safety scores were associated with higher odds of sub-optimal oral health (OR 1.27, 95% CI 1.03–1.57). No significant associations were observed for physical environment, antisocial behaviour or neighbourhood amenities.

Conclusion: After adjustment for socioeconomic factors and oral health behaviours, neighbourhood characteristics demonstrated limited independent associations with adolescent self-reported oral health. The unexpected direction of association between higher perceived neighbourhood safety and increased odds of sub-optimal oral health may indicate residual confounding by unmeasured socioeconomic or contextual factors, or reverse causality. Longitudinal studies are warranted to elucidate the temporal and causal nature of this relationship.

Identifying distinct physical activity trajectories from adolescence to adulthood and subsequent health risks

Eoin McNamara (Department of Children, Disability and Equality)

Session G, Room 1, Stratocaster A&B. 15:50

Background: The health benefits of physical activity at different stages across the life course are well established. Less is understood about the health impact of physical activity trajectories and persistent inactivity over an extended period. This study aimed to identify distinct trajectories in physical activity levels from childhood to adulthood in a large cohort of young Irish people, identifying associated risk factors, and the extent to which specific physical activity trajectories predict negative health outcomes in adulthood.

Methods: Data from waves 1 to 5 of Growing Up in Ireland's Cohort '98 were used, spanning the period from age 9 to 25yrs. Self-reported physical activity data were gathered at each wave. Latent growth mixture modelling was employed to identify distinct physical activity trajectories within the cohort. Extensive information on health outcomes and wider socio-demographic factors was gathered via interview, and interactions with activity trajectories were explored through logistic regression analysis.

Results: Overall physical activity levels decreased by almost 50% from childhood to adulthood. Two distinct trajectories were identified: a persistently active group (14% of the cohort) and a decreasing activity group (86%). Membership of the decreasing activity group displayed the strongest predictive effect on subsequent health issues, including obesity and chronic illness. This group was characterised as having a higher representation of females and those from less advantaged family backgrounds.

Conclusions: The decreasing activity group was most at risk of subsequent health issues, highlighting the cumulative impact of poor health behaviours over a sustained period, and emphasising the need to address physical inactivity early in life.

Growing Up in Ireland: Designing for the original Infant Cohort turning 18

Dianne Hillery (Central Statistics Office)

Session G, Room 1, Stratocaster A&B. 16:10

Background/context: There are three cohorts now active within the Growing Up in Ireland study. The middle cohort, born in 2008, joined the survey at 9 months of age and are now aged 17/18. In the years that have passed since these young people joined the study, Ireland has undergone significant demographic, social, and economic change. Data from this wave will support policy makers in making evidence informed decisions at a national level.

Methods: This presentation will discuss the design of this latest wave of the survey for cohort '08. It will touch on the multiple instruments used which includes the main questionnaire administered by an interviewer in the young person's home to both the young person and their resident parent(s), cognitive tests for the young person, sensitive self-complete questionnaires for both the young person and their parent(s), a short main and a proxy main as alternatives to the main questionnaire for the young person and a web-based questionnaire for school principals. The presentation will also discuss how the use of secondary data sources and data linkage informed the design of the questionnaire, with the aim of reducing the response burden for participants and enriching the final dataset that will be made available for research.

Session H: Context 2
Room 2, Alhambra

Tiny start, lasting mark: Examining pathways associating birthweight with adult economic outcomes using Structural Equation Modelling

Joanne Twomey O'Connor (University College Cork)
Brendan McElroy (University College Cork)
Lee-Ann Burke (University College Cork)
Ann Kirby (University College Cork)

Session H, Room 2, Alhambra. 15:10

Background/Context: Low birthweight (LBW), defined as less than 2,500 grams, is a significant public health concern, with potential implications for educational attainment and economic outcomes in adulthood. This study examines the relationship between birthweight, educational attainment and economic potential in early adulthood in Ireland, considering both direct and indirect pathways.

Methods: Data from Wave 1 - 5 from GUI Cohort 98 were analysed using generalised structural equation modelling (GSEM). Birthweight was examined in relation to educational test scores measured at approximately nine years of age, Leaving Certificate performance, educational attainment (NFQ level) and a latent economic potential construct. Economic potential was measured using indicators of working hours, employment status, work-related income quintile, regular saving and pension participation.

Results: Preliminary results show birthweight was positively associated with educational test scores at nine years of age ($\beta = 1.350$, $p < 0.001$). Theses test scores were positively associated with Leaving Certificate performance, while stronger Leaving Certificate results were associated with higher NFQ levels. Birthweight was also positively associated with the latent economic potential construct ($\beta = 0.079$), alongside NFQ and LC. These findings suggest that early-life health may be associated with adult economic outcomes through multiple, potentially overlapping pathways.

Conclusion: The findings suggest that birthweight is associated with adult economic potential both directly and through educational pathways. The positive association between birthweight and economic potential, alongside the contributions of educational performance and attainment, suggests that the long-term economic implications of early-life health may extend beyond any single educational outcome. By considering these relationships simultaneously, this study provides a more comprehensive understanding of how early-life health may shape economic opportunities in early adulthood. Further examination of direct and indirect effects is required to establish the relative contribution of educational and other pathways.

Growing Up in Ireland Cohort '98 at age 25: Childhood influences on education and finances

Caragh Stapleton (Central Statistics Office)

Session H, Room 2, Alhambra. 15:30

Background/Context: Many childhood factors can influence a person's educational attainment and financial wellbeing in adulthood. We explored a number of these potential factors reported when the respondent was aged 9 and their association with educational attainment and financial wellbeing at the age of 25.

Methods: In Wave 1 when the respondents were aged 9, parents of respondents were asked questions relating to the child's use of a public library, whether the child had a television in their bedroom, how far did they expect their child to go in their education or training, and the household's income. Logistic regression was used to examine the relationship between these factors and the respondents' level of education and financial wellbeing at age 25. Regression modelling was carried out using the survey package in R taking a stepwise approach. Variables such as parental education, housing tenure and social class were included in the models to adjust for confounders.

Results/Conclusion: The respondent making use of a public library when they were 9 years old; having a television in their bedroom at age 9 and parental expectation of education were all significantly associated with the respondent's level of education at age 25. In addition, the respondent's household equivalised income at age 9 was significantly associated with the respondent's ability to make ends meet and their ability to meet loan repayments at age 25.

Perceptions of childhood – looking back at age 20 among Cohort 98

Aisling Murray (Department of Children, Disability and Equality)

Session H, Room 2, Alhambra. 15:50

Context: Given the 20th anniversary of the commencement of the Growing Up in Ireland study, this short paper looks at how positively young adults in Cohort 98 recalled their childhood at age 20.

Methods: When Cohort 98 were surveyed at age 20 (in 2018), the last question on their interview asked them to reflect on whether they felt their childhood (age 4-11 years) and teenage years (age 12-18 years) had been "happy". Both periods were answered separately on a six-point 'strongly agree' to 'strongly disagree' Likert scale.

Results: The longitudinal nature of Growing Up in Ireland allows us to compare the 20-year-old's reflections on their childhood with their contemporary circumstances back when they were 9 years old. For example, 20-year-olds whose family had been in the lowest income quintile when they were 9 years old were less likely to subsequently 'strongly agree' that their childhood had been happy (50%) than their peers who had been in the highest income quintile (59%). Children who said they 'always' liked school at age 9 were more likely to recall their childhoods as happy when they were 20 (61%) than those who 'never' liked it at the time (46%). Logistic regression models are used to check whether the association between circumstances – such as income – at age 9 and recollections at age 20 remain after controlling for similar characteristics at age 20.

Conclusion: This is a rare opportunity to consider participants' subjective evaluations of earlier stages in their life-course both with information that was collected contemporaneously and their current circumstances.

Children at risk: Benchmarking need in Barnardos' intensive family support services against the Growing Up in Ireland '98 Cohort

Gráinne Hickey (Barnardos)
Monica Hynds (Barnardos)
Stephanie Whyte (Barnardos)

Session H, Room 2, Alhambra. 16:10

Background: Family support services play an important role in supporting vulnerable children and families; however, little is known about the scale of need among service users compared with the general population. The wellbeing and family functioning of children attending Barnardos family support services were compared with those of children in the Growing Up in Ireland (GUI) '98 Cohort.

Methods: Parents completed The Strengths and Difficulties Questionnaire (SDQ) and the Pianta Child-Parent Relationship Scale. Descriptive analyses were used to examine child wellbeing and parent–child relationships and compare findings with the GUI '98 Cohort.

Results: Measures were completed by 1,262 parents and children (631 families). Children included 326 boys and 305 girls and were aged on average 10.18 years. Parents were predominately mothers (n = 525; 83.2%). Children attending Barnardos services had substantially higher SDQ Total Difficulties scores than children in the GUI '98 Cohort (M=19.31 vs. 8.00 at age 9 and 7.10 at age 13). Nearly two-thirds (64.4%) scored in the high/very high range compared with 7% of GUI children. Compared with families in the GUI study, parents also reported lower levels of closeness and higher levels of conflict in the parent-child relationship.

Conclusion: Children who score highly on the SDQ at ages 9 and 13 are more likely to continue experiencing difficulties into later adolescence. Barnardos family support services are working with children and families at risk of poorer long-term outcomes. The findings highlight the need for intensive family support services to produce meaningful improvements in family wellbeing.

Session I: Education 2
Room 3, Stratocaster C

Factors associated with school absenteeism among 9- and 13-year-olds in Ireland

Gavin Murphy (Department of Education and Youth)
Liam Mulryan (Department of Education and Youth)

Session I, Room 3, Stratocaster C. 15:10

Background/Context: School absenteeism in Ireland has increased substantially since the COVID-19 pandemic, with chronic absenteeism remaining above pre-pandemic levels. Identifying the factors associated with absenteeism is essential to informing effective attendance policy and targeted interventions. This study examines the individual, school and home factors associated with school absenteeism among children aged 9 and 13.

Method: Logistic regression models were estimated using the 1998 and 2008 cohorts at ages 9 and 13. Average marginal effects were calculated for three absenteeism thresholds (more than 6,10 and 20 days absent) to examine the association between a broad range of individual, school and home characteristics and school absenteeism. The results were interpreted using Bronfenbrenner's Ecological Systems Theory and policy outcomes were presented in line with a Multi-Dimensional Multi-Tiered System of Supports (MD-MTSS).

Results: Individual characteristics demonstrated the strongest and most consistent associations with absenteeism. Chronic illness, frequent GP visits, increased screen time, lateness and children experiencing bullying behaviour were all associated with a higher likelihood of school absence. Home characteristics including lower household income, lower parental educational attainment, and speaking a language other than English at home, were consistently associated with higher absenteeism. In contrast, school-level characteristics generally demonstrated limited associations once other factors were controlled for.

Conclusion: The findings support the adoption of a MD-MTSS approach, with universal supports for all, targeted interventions for emerging attendance concerns and intensive supports for chronic absenteeism. Identifying pupils at risk early can support more targeted, evidence-informed attendance policy and improve educational attainment.

Decoding disadvantage: The impact of socio-demographic factors on school suspensions in the Republic of Ireland

Sofiya Volvakova (University College Dublin)

Session I, Room 3, Stratocaster C. 15:30

Background/Context: School suspensions refer to a situation in which a student is temporarily sent home from school for their misbehaviour. In the academic year 2023/2024, approximately 13,000 students were suspended from school in the Republic of Ireland. While a growing body of literature examines the negative effects associated with temporal absence from school, few studies in the context of Ireland have examined the profile of excluded students.

Methods: To investigate the role of socio-demographic correlates in school suspensions, the paper uses Wave 2 of the Crowing Up in Ireland (GUI) Child Cohort '98 data, in which the question about school suspensions in the past 12 months was asked. The data are analysed in R using a survey-adjusted multivariate model with sandwich robust standard errors to account for the complex survey data. The results are reported using average marginal effects (AMEs).

Results: Findings show the continuing importance of several socio-demographic characteristics such as gender, social class, and disability associated with school suspensions. Boys, students from lower socio-economic backgrounds (SES), and children with disabilities are statistically significantly more likely to be excluded from school even after controlling for students' subjective misbehaviour.

Conclusion: While the study is not without limitations (e.g., issues of small sample size), the results are important insofar as they highlight that suspensions are not driven solely by student misbehaviour. Socio-demographic factors heavily influence the likelihood of being sent home, punishing those who already exhibit marginalised or vulnerable profiles. The paper concludes with recommendations for Irish policymakers and schools.

Socioeconomic gradients in educational attainment: Evidence from Ireland

Libor Melioris (Trinity College Dublin)
Barra Roantree (Trinity College Dublin)

Session I, Room 3, Stratocaster C. 15:50

Background/Context: Ireland is typically seen as a relatively equal country, with low income inequality and high social mobility. Using data from the GUI Child and Infant Cohorts, we show a steep socioeconomic gradient in educational attainment: small in early childhood, but widening over the life course, such that children with parents in the highest income decile at age 9 are over 40 percentage points more likely to graduate from higher education than those in the poorest decile. We quantify how much of this gap reflects unequal opportunity.

Methods: We establish a conservative lower-bound estimate of inequality of opportunity using two complementary approaches. First, following Chetty (2019), we construct reweighted counterfactual distributions that map the math test score profiles of high-income children onto lower-income children, at ages 9 and 13. Second, we estimate logit models regressing HE graduation on background circumstances measured at age 9 (parental education, household income decile, single-parent status, local unemployment, school type, and early child health) to generate predicted probability profiles.

Results: Matching the age-9 math distribution explains 23.47% of the income-driven graduation gap; matching age-13 performance raises this to 29.96%. Household income alone accounts for 25.80% of the rank separation in HE attainment, while the full vector of circumstances at age 9 accounts for 41.28%.

Conclusion: Over two-fifths of the entire gap in university graduation between richer and poorer children can be attributed to circumstances entirely beyond their control, present before they even enter secondary school, indicating a high degree of inequality of opportunity in educational attainment in Ireland.

Private tuition and Leaving Certificate attainment in Ireland: Evidence from GUI

Lochlann Cawley (Trinity College Dublin)
Barra Roantree (Trinity College Dublin)

Session I, Room 3, Stratocaster C. 16:10

Background/Context: Private tuition (grinds) is widely used among Leaving Certificate (LC) students in Ireland, with participation disproportionately concentrated among students from more advantaged socioeconomic backgrounds. If associated with improved LC outcomes, grinds may act as a mechanism through which educational inequalities are reproduced. Internationally and in Ireland, however, evidence regarding the association between private tuition and academic attainment remains mixed. Research has also begun to examine whether the benefits of private tuition differ across student groups. This study examines the association between grinds and LC attainment, and whether this relationship differs by school type, household income, and prior academic ability.

Methods: Using data from Waves 1-4 of the Growing Up in Ireland (GUI) Child Cohort '98, ordinary least squares regression models estimate the association between grinds and LC attainment. Models control for school type, gender, household income, and prior academic ability (measured using Drumcondra tests). Interaction effects are included in relation to prior academic ability, household income and school type.

Results: After controls, ongoing grinds remained positively associated with LC performance ($\beta = 0.17$ SD, $p < 0.01$). Block grinds showed no significant association, with weak evidence that the association between ongoing grinds and attainment was stronger among students with lower prior academic ability.

Conclusions: Grinds are positively associated with LC attainment. Given that access to grinds is disproportionately concentrated among higher-income households, they likely contribute to the reproduction of educational inequality. The increasing popularity of grinds among Leaving Certificate students may call for further consideration of this issue.

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