Committee on the Rights of the Child

Consideration of reports submitted by States parties under article 44 of the Convention

Combined third and fourth periodic reports of Ireland due in 2009

Ireland* **

[Date received: 13 August 2013]

* The present document is being issued without formal editing.
** Annexes can be consulted in the files of the secretariat.
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<td>AHTU</td>
<td>Anti-Human Trafficking Unit</td>
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<td>ASAI</td>
<td>Advertising Standards Authority of Ireland</td>
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<td>CAAB</td>
<td>Children Acts Advisory Board</td>
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<td>CCC</td>
<td>City and County Childcare Committee</td>
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<td>CCS</td>
<td>Community Childcare</td>
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<td>CDB</td>
<td>City and County Development Board</td>
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<td>CES</td>
<td>Centre for Effective Services</td>
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<td>CETS</td>
<td>Subvention Childcare Education and Training Support</td>
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<td>CFA</td>
<td>Child and Family Agency</td>
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<td>CIS</td>
<td>Crisis Intervention Service</td>
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<td>CRA</td>
<td>Children’s Rights Alliance</td>
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<td>CSC</td>
<td>Children’s Services Committee</td>
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<td>CSO</td>
<td>Central Statistics Office</td>
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<td>CSPE</td>
<td>Civics, Social and Political Education</td>
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<td>CYPF</td>
<td>Children and Young People’s Forum</td>
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<td>DCYA</td>
<td>Department of Children and Youth Affairs</td>
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<td>DES</td>
<td>Department of Education and Skills</td>
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<td>DoH</td>
<td>Department of Health</td>
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<td>DSP</td>
<td>Department of Social Protection</td>
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<td>DVSAIU</td>
<td>Domestic Violence and Sexual Assault Investigation Unit</td>
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<td>ECCE</td>
<td>Early Childhood Care and Education</td>
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<td>GAL</td>
<td>Guardian ad Litem</td>
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<td>GNIB</td>
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<td>GRC</td>
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<td>Health Information and Quality Authority</td>
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<td>HRC</td>
<td>Human Rights Commission</td>
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<td>HSE</td>
<td>Health Service Executive</td>
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<td>ICDRG</td>
<td>Independent Child Deaths Review Group</td>
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<tr>
<td>Acronym</td>
<td>Full Name</td>
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<td>INTO</td>
<td>Irish National Teachers Organisation</td>
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<td>ISC</td>
<td>Irish Sports Council</td>
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<td>IYJS</td>
<td>Irish Youth Justice Service</td>
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<td>Joint Committee on the Constitutional Amendment on Children</td>
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<td>LSP</td>
<td>Local Sports Partnership</td>
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<td>MTFC</td>
<td>Multidimensional Treatment Foster Care</td>
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<td>NAPR</td>
<td>National Action Plan Against Racism</td>
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<td>NCAC</td>
<td>National Children’s Advisory Council</td>
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<td>NCCA</td>
<td>National Council for Curriculum and Assessment</td>
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<td>NCCRI</td>
<td>National Consultative Committee on Racism and Interculturalism</td>
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<td>NCIP</td>
<td>National Childcare Investment Programme</td>
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<td>NCSE</td>
<td>National Council for Special Education</td>
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<td>NEPS</td>
<td>National Educational Psychology Service</td>
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<td>NEWB</td>
<td>National Educational Welfare Board</td>
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<td>NIO</td>
<td>National Immunisation Office</td>
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<td>NOSP</td>
<td>National Office for Suicide Prevention</td>
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<td>OCO</td>
<td>Ombudsman for Children’s Office</td>
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<td>OIS</td>
<td>Office for Internet Safety</td>
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<td>OMCYA</td>
<td>Office of the Minister for Children and Youth Affairs</td>
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<td>RIA</td>
<td>Refugee Integration Agency</td>
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<td>SAGO</td>
<td>Special Action Group on Obesity</td>
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<td>SPHE</td>
<td>Social, Personal and Health Education</td>
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<td>SSI</td>
<td>Social Services Inspectorate</td>
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<td>VEC</td>
<td>Vocational Education Committee</td>
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<td>WHA</td>
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<td>WTE</td>
<td>whole-time equivalent</td>
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Minister’s foreword

1. The vision of the Irish Government is that growing up in Ireland means that you have the best start in life compared to anywhere in the world.

2. With the first dedicated Minister for Children and Youth Affairs, the Irish Government has committed to achieving significant improvements in relation to children and young people. These include:

   • The holding of a referendum in relation to the rights of children under the Constitution;
   • The establishment of a Child and Family Agency on a statutory basis in order to fundamentally reform the delivery of child protection services and remove responsibility for these from the Health Service Executive (HSE);
   • Implementing the recommendations of the Ryan Report, including putting the Children First: National Guidance on a statutory footing and legislating for the use of ‘soft’ information;
   • Maintaining the free preschool year and improving its quality as resources allow;
   • Enacting legislation to consolidate and reform the law on adoption;
   • Investing in a targeted early childhood education programme for disadvantaged children, building on existing targeted preschool supports for families most in need of assistance;
   • Ending the practice of sending children to St. Patrick’s Institution.

3. It is in this context that I introduce this report by the Government to the Committee on the Rights of the Child. I look forward to continuing to work with the Committee and the various organisations in Ireland which I know share our ambitions for our children. In particular, I look forward to meeting the Committee at an early date to discuss the areas in which progress has already been achieved and the future progress which this Government is committed to achieving.

4. I wish the Committee every success in its work.

Acknowledgements

5. The Department of Children and Youth Affairs would like to sincerely thank the staff of the many government departments and agencies who contributed to the preparation of this report. In addition, the input and cooperation received from the non-governmental organisations is greatly appreciated.

Introduction

Background to the current report

6. Ireland’s consolidated third and fourth reports to the Committee on the Rights of the Child on the implementation of the Convention on the Rights of the Child provides an update on Ireland’s second report, published by the National Children’s Office (NCO) in 2005. In doing so, it highlights the progress made over the past six years (2006-2011) and
the significant changes in policies and provision aimed at enhancing our understanding of children’s lives and effecting positive change in their experiences.

7. Key to the progress achieved since the submission of the last report has been the ongoing implementation of Ireland’s National Children’s Strategy: Our Children – Their Lives, published in 2000. Rooted in the UN Convention, this cross-governmental strategy has resulted in a number of consultative structures and exercises through which the voices of Irish children may be heard on key issues that affect them, as well as a number of significant and ongoing research initiatives investigating the lives of children. As evidenced in the main body of this report, this increasing awareness of a need to listen to children and provide opportunities for their views to be heard has resulted in a number of important changes. Building on the experience of the National Children’s Strategy, the Department of Children and Youth Affairs (DCYA) is currently in the process of developing a new National Children and Young People’s Policy Framework.

8. Ireland’s commitment to improving children’s lives and strengthening their rights is evident in the creation of the Department of Children and Youth Affairs in June 2011, with full Cabinet status. It is also evident in the Constitutional Referendum regarding children’s rights that was held on 10 November 2012. The mission of the Department of Children and Youth Affairs is “to lead the effort to improve the outcomes for children and young people in Ireland”. The responsibilities of the Department encompass a wide range of policy and service activity, both direct and indirect, for children and young people in Ireland. It has a complex mandate, comprised of a number of separate, but interrelated strands:

- The direct provision of a range of universal and targeted services;
- Ensuring high-quality arrangements are in place for focused interventions dealing with child welfare and protection, family support, adoption, school attendance and reducing youth crime;
- The harmonisation of policy and provision across Government with a wide range of stakeholders to improve outcomes for children, young people and families.

9. This report covers the six years between 2006 and 2011. In some instances, data from 2012 are used for clarity. In order to contextualise developments made during these six years and proposals for the future, it is necessary to outline some wider recent trends and developments relevant to children’s lives in Ireland.

The economy

10. Following strong growth in the 1990s, the Irish economy, from 2000 onwards, began to lose competitiveness, resulting in a shifting of growth away from exports towards more unstable domestic demand sources such as construction. The resulting construction boom led to the accumulation of imbalances within the Irish economy, which left it highly exposed to the Great Recession – the rapid global downturn of 2008 and 2009.

11. A loss of competitiveness domestically, compounded by weakness in key trading partners and an appreciation of the euro during the turbulence, had a detrimental impact on Ireland’s exporting sectors. Exports fell by 7.3% between Q4 2007 and Q3 2009, while housing output, which peaked at over 90,000 houses in 2006, fell sharply as the demand for housing waned. A dramatic fall in consumer confidence resulted in an unprecedented decline in personal consumption. Against this backdrop, real GDP recorded annual contractions in 2008, 2009 and 2010, resulting in a peak-to-trough decline of 10.7% (Q4 2007 to Q4 2009), before returning to growth in 2011 – growing by 1.4% in the year. As is typical in a small open economy, the initial recovery was driven by strong export performance, resulting from a rapid improvement in Ireland’s competitiveness. Preliminary figures from the Central Statistics Office (CSO) show that Ireland achieved a second
successful year of growth in 2012, with real GDP growing by 0.9% in the year. The Department of Finance is forecasting a continuation of growth into this year, with the Department’s most recent forecasts projecting a rate of 1.5% for 2013.

12. In common with many European States, Ireland is attempting to address the economic crisis with a period of fiscal rectitude as outlined in the National Recovery Plan. Unfortunately, this has resulted in reductions in expenditure across many areas of the public sector.

13. Unemployment has increased considerably over the past years, from 4.4% in early 2006 to 14.8% in the third quarter of 2012, with long-term unemployment increasing from 1.3% to 8.9% over the same period.

Demographic trends

14. The population of Ireland has grown substantially over the last decade, with the total figure increasing by approximately 664,000 (17%) between 2002 and 2011. During the same period, the number of children aged less than 18 years grew from 1,013,031 to 1,148,687, an increase of approximately 13.4%. Although the proportion of the Irish population aged under 18 fell dramatically between 1981 (36.2%) and 2002 (25.9%), it has since remained stable, and by 2011, children represented 25% of the total population. The youth dependency ratio (the proportion of those aged from birth to 14 years to the total working-age population) was 31.9% in 2011, up from 29.7% in 2006.

15. According to the CSO analysis Women and Men in Ireland 2011 (CSO, 2012a), Irish women have the highest Total Period Fertility Rate in the European Union (EU) at 2.07, up from 1.9 in 2006. The number of births in Ireland has also increased over the past decade by 29%, rising from 57,854 in 2001 to 74,650 in 2011.

16. The population of Ireland is ageing. According to the CSO publication Older and Younger (CSO, 2012b), the number of individuals aged 65 years and over rose from 467,926 in 2006 to 535,393 in 2011, an increase of 14.4%. Older people now comprise 11.7% of the population, compared to 11% in 2006. The old dependency rate in 2011 was 17.4%, compared to 16.1% in 2006.

17. The population structure of Ireland has also been affected in recent years by a reversal in migration trends from a position of positive to negative net migration. In 2006, net migration stood at 71,800 persons, but by 2011 this had changed to minus 34,400 persons. CSO estimates for 2012 indicate that the working age population (those aged 15-65 years) fell by 36,600 due to negative net migration.

18. These demographic trends will place increasing demands on public supports and services.

Family size and structure

19. In 2011, as in 2006, the great majority of children resided with both parents. The overall proportion of children residing either with two parents or in a lone-parent household has remained relatively stable, with approximately 81% residing with both parents and 18.3% residing in lone-parent households. Despite this, there have been notable changes among the various age groups. The proportion of preschool children aged 4 years and under living with a lone parent has decreased from 16.8% in 2006 to 15.4% in 2012.

20. The number of reconstituted families identified in Census 2011 was 27,033, an increase of 55% since 2006. In 2011, reconstituted families represented 2.3% of all family units. 72% of these reconstituted families were husbands and wives and children, while a further 20% were cohabiting couples and children. The remaining 7% of cases were lone-parent families, of which 81% were headed by females. In 2011, there were 4,042 same-sex
couples living together – 2,321 male couples and 1,721 female couples. 230 were same-sex couples with children, with the vast majority of these being female couples. Most same-sex couples were cohabiting (3,876), but 166 indicated that they were married couples. Since same-sex civil unions had only recently been introduced in Ireland at the time of the Census, it is likely that most of these were married abroad. The figures refer to children of all ages and are not restricted to children under the age of 18.1

21. The great majority of these lone-parent households are headed by women. In 2006, 183,744 children were living in lone-parent households. By 2011, this had risen by approximately 10%, to 202,444.

22. As lone-parent households are at a particular risk of poverty, these increasing numbers have implications for the range of policy supports and provisions required to ensure that the children in such households are supported in appropriate ways.

**Emerging issues**

23. A number of new issues have come to the fore with regard to children’s lives in Ireland. As a result of the economic downturn, child poverty is now among these, with both the “at risk of poverty” rate and the “material deprivation” rate increasing for households with children. Other emergent issues further detailed in this report include literacy and numeracy, childhood obesity, alcohol misuse, child trafficking, and increasing pluralism and multiculturalism. In 2011, the Department of Education and Skills launched Literacy and Numeracy for Learning and Life: The National Strategy to Improve Literacy and Numeracy among Children and Young People, 2011-2020. The strategy outlines a range of measures in teacher education, teacher professional development, curriculum and assessment that will be taken in the years ahead to raise standards.

**Concluding observations and summary of progress**

24. Ireland submitted its second report to the UN Committee in 2005 (2005, CRC/C/IRL/2). Following examination of this report, the UN Committee issued its concluding observations.2 The text of these concluding observations is highlighted throughout the present report in bold type. These observations and the progress made with regard to them since 2005 are summarised below. It should be noted that the majority of developments and issues reported in this introduction are addressed in more detail in subsequent chapters of this report. They are summarised here to avoid undue repetition of material.

**Legislation and implementation (see chapters 1 and 5)**

25. The Committee urges the State party to take, as a matter of priority, all necessary measures, including the allocation of resources, to enact the outstanding provisions in the relevant Children Acts for the protection of children’s rights. The Committee encourages the State party to undertake further action to incorporate the Convention into domestic law.

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1 The data provided on reconstituted families are estimates. Because information was only captured on the Census form for the relationship of each person in the household to the first four persons in the household, some reconstituted families will not have been identified. For example, where Person 6 on the Census form was a stepchild and Person 5 was the stepparent, this reconstituted family will not have been identified in the figures quoted above.

Child Care (Amendment) Act 2007

26. The Child Care (Amendment) Act 2007 amended both the Child Care Act 1991 and the Children Act 2001. The principal purpose of the 2007 Act is to provide that a foster parent or a relative who has had a child in their care for a continuous period of 5 years, the child having been placed with them by the Health Service Executive (HSE), may apply for a court order for increased autonomy with regard to the care of the child. The Child Care (Amendment) Act 2007 amended Section 77 of the Children Act 2001 in relation to Family Welfare Conferencing. It also amended Section 29 of the Child Care Act 1991, which provides that child care court proceedings are to be held in private, with a provision allowing for reporting of those proceedings by specified persons in specified circumstances.

Child Care (Amendment) Act 2011

27. The primary objective of the Child Care (Amendment) Act 2011 is to create a clear statutory framework for the High Court to deal with Special Care cases rather than employing its inherent jurisdiction. (This is the use of implied powers to regulate or adjudicate on any matter that comes before the Court. Inherent jurisdiction is often invoked for matters not covered by statute, but nevertheless viewed as requiring adjudication in the interest of procedural justice or judicial efficacy.) The Act allows Special Care Units to be registered and inspected by the Health Information and Quality Authority (HIQA).

28. Special Care involves the detention, on an exceptional basis, of a non-offending child for his or her own welfare and protection in a Special Care Unit with on-site educational and therapeutic supports. The child’s behaviour and the risk of harm posed to his or her life, health, safety, development or welfare are addressed in the care setting. Future care requirements are also explored.

Adoption Act 2010

29. The Adoption Act 2010 commenced on 1 November of that year. The new legislation, which incorporates the provisions of the Hague Convention, is designed to provide a framework to ensure that appropriate procedures have been followed and that all adoptions are effected in the best interests of the child. It gives force of law to the Hague Convention on Protection of Children and Cooperation in respect of Intercountry Adoption, which also entered into force in Ireland on 1 November 2010.

Health Act 2007 (establishment of Health Information and Quality Authority)

30. The Social Services Inspectorate (SSI), which was originally established in 1999, was placed on a statutory basis as the Office of the Chief Inspector of Social Services within the Health Information and Quality Authority (HIQA). HIQA conducts inspections of statutory residential child care services (i.e. services managed by the HSE, formerly the health boards) under statutory powers contained in Section 69 of the Child Care Act 1991. HIQA was appointed to inspect the Children Detention Schools under the provisions of Sections 85 and 86 of the Children Act 2001 (as amended). HIQA also inspects foster care settings and has developed national child protection standards against which independent inspection of child protection services will commence shortly.


Thirty-first Amendment of the Constitution (Children) Bill 2012

32. A referendum to specifically enshrine children as rights holders into the Constitution of Ireland was held in November 2012. The proposal contained an express rights provision
for all children; a more child-centred basis for intervention where parents fail in their duties to protect the safety and welfare of their children; a requirement for specific provisions to be made by law relating to the adoption of children; and a requirement that legislation provides that in child protection, adoption and certain family law proceedings, the best interests of the child should be paramount and the views of the child should be considered having regard to age and maturity. The changes to the Constitution to be implemented on enactment of the Bill are set out in paragraphs 192-193 of this report.

The National Plan of Action (see chapter 1)

33. The Committee recommends that the State party:
   (a) Evaluate and assess the achievements of the Strategy to date in order to ensure that a rights-based approach to all the activities is taken;
   (b) Establish specific timeframes for the implementation of the goals and activities of the Strategy; and
   (c) Provide specific budget allocations for the implementation of the Strategy.

34. The Committee recommends that the State party take steps to ensure that the Plan of Action covers all areas of the Convention, and taking into account the outcome document A World Fit for Children adopted by the United Nations General Assembly at its special session on children held in May 2002. The Committee further recommends that the State party implement and monitor the National Plan of Action in a participatory and holistic way and submit information on the status and impact of these activities in its next report.

35. The National Children’s Strategy was rooted in the Convention on the Rights of the Child and sought to further the rights of children in many areas. The new National Children and Young People’s Policy Framework, currently being developed by the DCYA, will build on and develop the National Children’s Strategy, provide for its continuation in relevant areas and identify priorities for the Government over the following 5 years.

36. A Mid-Term Review of the National Children’s Strategy, conducted by Peyton and Wilson in 2006, pointed to the need, among other things, for a greater coordination of measures for children. The development of such coordination and greater central direction and oversight has been furthered through the establishment, in 2011, of the DCYA, with a Minister with full Cabinet status.

37. A single budget for the implementation of the National Children’s Strategy was not implemented due to the cross-departmental and cross-sectoral nature of the strategy and the “whole-child” perspective adopted in it. The multifaceted nature of the measures included in the strategy reflected the multidimensional nature of the lives of children and families (see paras. 214-215).

Ombudsman for Children’s Office (see chapter 1)

38. The Committee recommends that the State party, together with the Ombudsman for Children, review and propose amendments to specific provisions where necessary, to limit the scope of investigative powers with a view to eliminating possible gaps which may result in a violation of children’s rights.

39. In order to ensure the independent functioning of the Office of the Ombudsman, the Committee recommends that the State party seek ways and means to provide the Office of the Ombudsman with financial resources directly through the Oireachtas (National Parliament) and the Department of Finance. The Committee
also draws the State party’s attention to the Committee’s General Comment No. 2 on the role of independent national human rights institutions in the promotion and protection of the rights of the child (CRC/GC/2002/2).

40. In March 2012, the Ombudsman for Children’s Office (OCO) published and laid before the Houses of the Oireachtas (Irish Parliament) a report by the Ombudsman for Children on the operation of the Ombudsman for Children Act 2002 (OCO, 2012). This report contains a number of recommendations on a range of topics, some particular to specific sectors, including justice and education, and others with wider implications. The Minister for Children and Youth Affairs is consulting with colleagues in government and will bring forward legislative proposals in due course if appropriate.

41. One of the recommendations in the OCO’s 2012 report was to extend the remit of the Ombudsman for Children to complaints in respect of boys under 18 years detained in St. Patrick’s Institution. With effect from 1 July 2012, an order was made by the Minister for Children and Youth Affairs, with the consent of the Minister for Justice and Equality, that removed this exclusion (Statutory Instrument No. 210 of 2012). The Minister has also arranged through her government colleague, the Minister for Public Expenditure and Reform, to further extend the range of public bodies to come within the remit of the Ombudsman for Children. As a result of amendments contained in Sections 4 and 22 of the Ombudsman (Amendment) Act 2012, which came into force on 1 November 2012, any public body that comes under the remit of the Ombudsman will automatically come under the remit of the Ombudsman for Children. Thus the jurisdictions of both offices are aligned and there is legal certainty and clarity on the matter.

42. Funding for the OCO is drawn directly from the DCYA from funds provided by the Oireachtas in accordance with the Ombudsman for Children Act 2002. The Act also provides that one of the roles of the Ombudsman for Children is to promote awareness among members of the public of matters, including the principles and provisions of the Convention on the Rights of the Child, relating to the rights and welfare of children and how those rights can be enforced (see paras. 240-241).

Data collection

43. The Committee recommends that the State party undertake further measures, including through strengthening the role of the Central Statistical Office and other Governmental departments and agencies to develop a systematic and comprehensive collection of disaggregated data in compliance with the Convention, which should be used for the creation, implementation and monitoring of policies and programmes for children.

44. Considerable efforts have been made to develop a systematic and comprehensive collection of data on children in Ireland by Government departments and agencies, including the Central Statistics Office (CSO).

45. The National Children’s Research Programme, which was established in 2003 by the National Children’s Office (now part of the Department of Children and Youth Affairs), has led on several important initiatives, including the development of a National Set of Child Well-Being Indicators in 2005 and the subsequent compilation of the biennial State of the Nation’s Children report, first published in 2006 and now in its fourth edition (DCYA, 2012a). These reports, which are based on the National Set of Child Well-Being Indicators, are compiled by the DCYA, in partnership with the CSO and the Health Promotion Research Centre at the National University of Ireland, Galway. They aim to describe the lives of children in Ireland, track changes over time and benchmark progress in Ireland relative to other countries. Where appropriate and feasible, indicators in these
reports are disaggregated by age, gender, social class, geographic location and population groups (e.g. Traveller children, foreign national children and children with a disability).

46. Almost 40 research studies on children’s lives have also been commissioned under the National Children’s Research Programme by the DCYA. The most significant of these to date is Growing Up in Ireland: National Longitudinal Study of Children. Its aim is to “study the factors that contribute to or undermine the well-being of children in contemporary Irish families and, through this, contribute to the setting of effective and responsive policies relating to children and to the design of services for children and their families”. It monitors the development of almost 20,000 children – an infant cohort of 11,100 9-month-olds and a child cohort of 8,570 9-year-olds. Since Growing Up in Ireland commenced in 2006, more than €30 million has been allocated to two waves of data collection for both the infant (at age 9 months and 3 years) and child (at age 9 and 13 years) cohorts, and a third wave of data collection for the infant cohort (at age 5), which is due to commence in 2013 to capture the transition to primary schooling. Findings to date from the study are available on the dedicated website www.growingup.ie.

47. The National Strategy for Research and Data on Children’s Lives, 2011-2016 was published by the DCYA in 2011. This strategy sets out a clear direction for children’s research and data in Ireland and articulates a range of specific information needs in relation to children’s health, education, safety, economic security and social participation. The strategy’s Action Plan addresses many of the information deficits identified through a cross-government initiative which mobilises the resources of 23 organisations across government departments and State agencies, including the CSO. The DCYA has an oversight and reporting role in relation to the actions in the strategy, as well as having direct responsibility for a number of actions. The strategy places a strong focus on making better use of existing data holdings and other resources, and in particular emphasizes the role of data in providing insights for policy and service provision from the Growing Up in Ireland study and other large-scale government-funded surveys, such as Health Behaviour in School-aged Children (HBSC), the European School Project on Alcohol and Drugs (ESPAD) and the Programme for International Student Assessment (PISA).

48. The CSO’s role in these and other relevant initiatives has been significant. The data collected and/or analysed by the Social and Demographic Statistics Division at the CSO (i.e. Census of the Population, Household Budget Survey (HHS), Quarterly National Household Surveys (QNHS), Surveys on Income and Living Conditions (SILC) and Vital Statistics) contribute greatly to the bank of children’s data accumulating in Ireland. In addition, the data dissemination activities of the CSO are tremendous resources; they often have a particular focus on children, for example, Children and Young People in Ireland 2008 (CSO, 2009) and the SILC Thematic Report on Children 2004-2010 (CSO, 2012c).

49. In addition, building on actions already undertaken by the CSO in the implementation of the National Statistics Board’s Strategy for Statistics, 2003-2008 (NSB, 2003) (e.g. assessment of the Statistical Potential of Administrative Records, assistance with the development of data strategies for government departments), the latest strategy for the period 2009-2014 (NSB, 2009) has identified the following five priorities:

- Ensure that the Irish Statistical System is coherent and that the potential to produce relevant, impartial and reliable statistics to inform policy and fiscal decisions is fully realised;
- Increase value for money and efficient use of resources by prioritising investment in statistics (including data processing, sharing, storage and protection) across government departments and agencies, and by ensuring that official statistics can be used in all aspects of government decision-making;
• Develop systems to ensure that the burden of response on businesses, households and individuals is minimised and that the statistical value of existing survey and administrative data is maximised through the addition of consistent classification variables and data matching identifiers;

• Ensure that official statistics are “fit for purpose” by balancing relevance, timeliness, cost, and quality of data so that critical gaps are filled and new demands are met;

• Build on the progress of recent years by continuing to prioritise availability to users by improving access channels and promoting use of CSO statistics.

Dissemination, training and raising awareness (see chapters 1 and 7)

50. The Committee encourages the State party to further strengthen its efforts to ensure that the provisions of the Convention are widely known and understood by both adults and children, including through periodic and nation-wide public awareness-raising campaigns that include also child-friendly material, and through targeted campaigns and necessary training for professionals working with children, in particular within schools and health and social services, and legal professionals and law enforcement officials.

51. A number of dissemination, training and awareness-raising measures relating to both the UN Convention and children’s rights have been undertaken with children, professionals and the public, many of which are included in this report. These include human rights training for primary and second-level teachers, the provision of guidelines on diversity for preschool service providers, training undertaken by Gardaí in relation to child victims and offenders, and specific training for those dealing with child asylum-seekers and children who may have been trafficked. Human rights are also included in both the primary and secondary school curricula. A number of public awareness campaigns have been undertaken in relation to specific issues, including mental health and child protection.

Non-discrimination (see chapter 3)

52. The Committee recommends that the State party ensure that the National Action Plan Against Racism is fully implemented and that specific attention is given to measures to address racism, prejudice, stereotyping and xenophobia among children, in particular in primary and secondary education.

53. The National Action Plan Against Racism, 2005-2008 (Department of Justice, Equality and Law Reform, 2005) led to the development of a number of strategies which impact on children and which continue to be implemented by relevant government services, including the Intercultural Health Strategy, an Intercultural Education Strategy, an Arts Strategy and a Workplace Diversity Strategy.

Best interests of the child (see chapter 3)

54. The Committee recommends that the State party:

   (a) Ensure that the general principle of the best interests of the child is a primary consideration without any distinction and is fully integrated into all legislation relevant to children; and

   (b) Ensure that this principle is also applied in all political, judicial and administrative decisions, as well as projects, programmes and services that have an impact on children.

55. The best interests of the child have been included as the primary consideration in a number of new pieces of legislation, including the Adoption Act 2010 and the Child Care
The Constitutional change in relation to children’s rights, as a result of the referendum in November 2012, included provision to enshrine the principle of best interests in the Constitution of Ireland as regards child welfare and protection proceedings brought by the State or proceedings concerning the adoption, guardianship or custody of, or access to, any child.

Policy, including the National Children’s Strategy (Department of Health and Children, 2000) and the Agenda for Children’s Services (OMC, 2007a), has reinforced the importance of the best interests principle in decision-making. The Ombudsman for Children’s Office plays an important role in investigating administrative decision-making and service provision, and in doing so assesses the extent to which the best interests principle has been met.

Views of the child (see chapters 1 and 3)

58. In light of Article 12 of the Convention, the Committee recommends that the State party:

(a) Strengthen its efforts to ensure, including through Constitutional provisions, that children have the right to express their views in all matters affecting them and to have those views given due weight in particular in families, schools and other educational institutions, the health sector and in communities;

(b) Ensure that children be provided with the opportunity to be heard in any judicial and administrative proceedings affecting them, and that due weight be given to those views in accordance with the age and maturity of the child, including the use of independent representations (Guardian ad Litem) provided for under the Child Care Act of 1991, in particular in cases where children are separated from their parents; and

(c) Take into account the recommendations adopted on the Committee’s day of general discussion on the right of the child to be heard in September 2006.

59. Under the National Children’s Strategy, a number of structures were put in place to ensure that the views of the child are taken into account during administrative matters that affect them. These structures, and progress made under them, are further detailed in Chapters 1 and 3 of this report.

60. The Adoption Act 2010 provides that any child subject to an adoption application who has attained the age of 7 years must have their views heard by the Adoption Authority and due weight must be accorded to these views in line with the child’s age and maturity.

61. The National Standards for the Protection and Welfare of Children (HIQA, 2012a) state that “children will be listened to and their concerns and complaints are responded to openly and effectively”.


63. The Criminal Procedure Act 2010 amended the law on victim impact evidence and includes special provision for child victims of crime.

64. The Constitutional change in relation to children’s rights, which was the subject of a referendum on 10 November 2012, included provision to enshrine and strengthen the rights...
of the child to have his or her views ascertained and given due weight in child welfare and protection proceedings brought by the State or proceedings concerning the adoption, guardianship or custody of, or access to, any child.

Protection of privacy to all legal proceedings involving children (see chapter 4)

65. The Committee recommends that the State party take necessary measures to extend the protection of privacy to all legal proceedings involving children.

66. Legal proceedings involving children in both civil and criminal law prohibit the identification of children (see paras. 337-339).

Family environment (see chapter 5)

67. The Committee recommends that the State party:

(a) Undertake an extensive review of the support services provided under the different Governmental departments to assess the quality and outreach of these services and to identify and address possible shortcomings; and

(b) Extend the social work services provided to families and children at risk to a seven day, 24-hour service.

68. Since 2005, the Crisis Intervention Service, based in the greater Dublin area, has been expanded to include all children up to the age of 18 years. In June 2009, under Section 12 of the Child Care Act 1991, the HSE established the Emergency Place of Safety Service, whereby Gardaí can access an appropriate place of safety for children and young people found to be at risk outside normal working hours. Two pilot projects were commenced in 2011, in Cork and Donegal, to develop a model of out-of-hours social work provision. These pilots have been independently evaluated.

Family reunification (see chapter 5)

69. The Committee recommends that the State party:

(a) Consider reviewing the definition of family in the Refugee Act of 1996 to better correspond to the developing understanding of the family;

(b) Consider establishing a legal framework for family reunification outside situations under the Refugee Act; and

(c) Ensure that the principle of the best interests of the child is always a primary consideration when making decisions involving children under any legal or administrative procedures.

70. The question of broadening the definition of family reunification for persons granted refugee status is a matter that can be considered in the context of the redevelopment of Ireland’s immigration legislation and specifically the Immigration, Residence and Protection Bill 2010. The Minister for Justice and Equality has indicated his intention to republish this Bill subject to amendment. Without prejudging this consideration, it should be borne in mind that any person may make an application to come to Ireland and to provide all relevant information in support of the application. These applications may be based, inter alia, on the person’s relationship with a refugee. It should also be borne in mind that where family reunification is granted as of right, even where such rights are qualified, it would follow that there is a balance to be struck in terms of defining the qualifying family. In other words, the more automatic the right of reunification, the closer the required familial relationship.
71. Work is underway at present in relation to non-refugee family reunification, including setting out, in a more transparent way, the sort of outcome that might be reasonably expected from an application for family reunification.

72. The issue of the best interests of the child is also being considered in the context of the development of the Immigration, Residence and Protection Bill referred to above.

Alternative care for children without parental care (see chapter 5)

73. The Committee recommends that the State party:

(a) Consider measures to create a statutory basis for the Social Services Inspectorate to function and extend its mandate to all children without parental care, irrespective of the care required; and

(b) Strengthen its efforts to ensure and provide for follow-up and aftercare to young persons leaving care centres.

74. The Social Services Inspectorate was placed on a statutory footing under the Health Act 2007 and now forms part of the Health Information and Quality Authority (HIQA), which is the independent, statutory regulator of Health and Social Services. HIQA has developed standards in respect of children’s residential care (Department of Health and Children, 2001a), foster care (Department of Health and Children, 2003) and child protection services (HIQA, 2012), and has been provided with additional resources to inspect service provision against these standards.

75. Following an audit of existing aftercare services and consultations, the HSE introduced the Leaving and Aftercare Services: National Policy and Procedure, in 2011 (HSE, 2011a). This is currently being implemented nationally.

Adoption (see chapter 5)

76. The Committee recommends that the State party expedite its efforts to enact and implement the legislative reforms, ensure that all relevant legislation is in conformity with international standards, and that the best interests of the child are a primary consideration.

77. The Adoption Act 2010, which incorporates the provisions of the Hague Convention, was commenced on 1 November 2010, coinciding with the establishment of the Adoption Authority of Ireland (AAI) and Ireland’s ratification of the Hague Convention on Protection of Children and Cooperation in respect of Intercountry Adoption. The Act provides a framework to ensure that appropriate adoption procedures have been followed and that all adoptions are effected in the best interests of the child.

78. Effective from that date, intercountry adoptions may now be effected with other countries that have ratified the Hague Convention or with which Ireland has a bilateral agreement.

79. The AAI is working to establish administrative arrangements with other countries that have ratified the Hague Convention in relation to intercountry adoptions, as provided for under Sections 71 and 72 of the Adoption Act 2010.

80. The negotiation of bilateral agreements on intercountry adoption with States that have not ratified the Hague Convention is governed by Section 73 of the Adoption Act 2010. Any bilateral arrangements that might be entered into would be required by law to meet the minimum standards set out in the Hague Convention and Irish public policy regarding adoption. They must also have AAI consent, be effected through regulated adoption agencies and must not involve the exchange of money.
81. All adoptions registered in Ireland, both intercountry and domestic adoptions, must be in compliance with the Hague Convention.

Violence, abuse and neglect (see chapter 5)

82. In light of Article 19 of the Convention, the Committee recommends that the State party:

   (a) Continue reviewing the Children First guidelines and consider their establishment on a statutory basis;

   (b) Ensure that all reported cases of abuse and neglect are adequately investigated and prosecuted and that victims of abuse and neglect have access to counselling and assistance with physical recovery and social reintegration;

   (c) Develop a comprehensive child abuse prevention strategy, including developing adequate responses to abuse, neglect and domestic violence; facilitating local, national, and regional co-ordination, and conducting sensitisation, awareness-raising and educational activities; and

   (d) Ensure that evaluation of all employees and volunteers working with children is undertaken prior to recruitment, and that adequate support and training is provided for the duration of their employment.

83. In the context of the Secretary-General’s in-depth study on the question of violence against children, the Committee recommends that the State party use the outcome of the Regional Consultation for Europe and Central Asia held in Slovenia from 5 to 7 July 2005 as a tool for taking action, in partnership with civil society, to ensure that every child is protected from all forms of physical, sexual or mental violence, and for gaining momentum for concrete and, where appropriate, time-bound actions to prevent and respond to such violence and abuse. In addition, the Committee would like to draw the States party’s attention to the report of the independent expert for the United Nations study on violence against children (A/61/299) and to encourage the State party to take all appropriate measures to implement overarching recommendations as well as setting-specific recommendations contained in this report.

84. The revised edition of Children First: National Guidance for the Protection and Welfare of Children (DCYA, 2011b) was launched by the Minister for Children and Youth Affairs in July 2011. A comprehensive implementation strategy has been put in place with the participation of key sectors. Legislation is being drafted to place Children First on a legislative basis. Heads of Bill for the legislation have been published and considered in detail by the relevant Parliamentary committee (Oireachtas Health and Children Committee).

85. Following a number of child abuse inquiries, a range of additional measures and resources were put in place to strengthen the child protection system, including the forthcoming establishment of the Child and Family Agency (CFA) and the recruitment of 270 additional social workers.

86. In 2012, HIQA published the National Standards for the Protection and Welfare of Children. These standards are designed to ensure that the safety and welfare of children within the child protection system are protected and that the child is at the centre of all interventions.

87. The National Vetting Bureau (Children and Vulnerable Persons) Act 2012 places the vetting of persons working with children and/or vulnerable persons on a statutory basis, including the disclosure of non-criminal record information which gives rise to a concern that a person may harm or cause to be harmed a child or vulnerable person.
Corporal punishment (see chapter 4)

88. The Committee reiterates its previous recommendation (CRC/C/15/Add.85, para. 39) and urges the State party to:
   (a) Explicitly prohibit all forms of corporal punishment in the family;
   (b) Sensitise and educate parents and the general public about the unacceptability of corporal punishment;
   (c) Promote positive, non-violent forms of discipline as an alternative to corporal punishment; and
   (d) Take into account the Committee’s General Comment No. 8 on the right of the child to protection from corporal punishment and other cruel or degrading forms of punishment (CRC/GC/2006/8).

89. It is important to clarify that Ireland does not have any law that specifically permits corporal punishment within the home setting. Section 246 of the Children Act 2001 provides clear legal deterrents to the use of excessive physical discipline within this and other settings.

90. Although a limited defence of “reasonable chastisement” exists in common law, courts in Ireland have previously handed down severe sentences in cases where parents have been convicted for assault or the use of excessive or unreasonable force against their children.

91. It is important to emphasize that considerable progress has been made in recent years in eliminating virtually all forms of violence against children in Ireland and in encouraging parents to use alternative non-violent forms of discipline in the family setting. Recent findings to emerge from Growing Up in Ireland: National Longitudinal Study of Children, funded by the DCYA, indicate that almost 90% of parents reported never (57%) or rarely (32%) using corporal or physical punishment as a means of disciplining their children (Williams et al., 2009). A wide variety of parenting courses are provided throughout Ireland and further research indicates that parents both acknowledge and appreciate the influence of education on parenting styles as a factor in the declining use of corporal punishment. In addition, ongoing work is planned by the DCYA to establish the most effective ways in which to support parents through the new Child and Family Agency.

Children with disabilities (see chapter 6)

92. The Committee recommends that the State party:
   (a) Adopt an inclusive and rights-based legal framework that addresses the specific needs of children with disabilities and implement all relevant provisions of existing legislation related to children with disabilities; and
   (b) Undertake awareness-raising campaigns with the involvement of children which focus on prevention and inclusion, available support and services for children with disabilities, as well as combating negative societal attitudes towards children with disabilities.

93. The Committee also urges the State party to review existing policies and practices in relation to children with disabilities, giving due attention to the United Nations Standard Rules on the Equalisation of Opportunities for Persons with Disabilities (General Assembly Resolution 48/96) and the recommendations adopted by the Committee on its day of general discussion on the rights of children with disabilities (see CRC/C/69).
94. In Census 2011, 66,437 children and young people aged 17 and under in Ireland were recorded as having a disability.

95. Significant budget allocations (€9.8 million in 2008, with an additional €20 million in 2009) were made available to improve the assessment of and the provision of health and education services to children with special needs.

96. The HSE National Programme on Progressing Disability Services for Children and Young People (0-18 years) has been established since 2010. The programme aims to provide one clear pathway to services for all children with disabilities, according to need, with the health and education sectors collaborating to support children to achieve their full potential. A key element of the programme will be to address the inequity of access to services that currently exists across the country, due to the inconsistent development of these services that has taken place.

97. The National Housing Strategy for People with Disabilities was launched in October 2011 (Department of the Environment, Community and Local Government, 2011a). Among the key actions included in this policy is a commitment to ensuring that current and future needs of children with disabilities are made central considerations during the process of allocating housing to families.

98. Draft standards for all residential and respite services for adults and children with disabilities have been developed. These standards will be subject to public consultation, prior to their finalisation. HIQA has indicated that it plans to commence the inspection process in the second half of 2013.

99. The Department of Transport, Tourism and Sport is currently attempting to improve transport facilities for individuals with mobility and sensory impairments. Both rural and urban areas have seen significant increases in numbers of accessible vehicles and improved access to much of the public transport infrastructure.

Health and health services (see chapter 6)

100. The Committee recommends that the State party:

   (a) Adopt all-inclusive legislation that addresses the health needs of children;

   (b) Ensure that availability and quality of health care services are maintained throughout the country by providing targeted resources and by establishing statutory guidelines for the quality of these services;

   (c) Ensure that the resources used for existing health care services for children are used in a strategic and coordinated manner benefiting all i.e. the public, the community and the voluntary sectors; and

   (d) Pay special attention to needs of refugee and asylum-seeking children, and children belonging to the Traveller community, inter alia, by implementing the existing National Strategy for Traveller Health.

101. The Committee reiterates its previous recommendation (CRC/C/15/Add.85 paras. 20 and 38), and recommends that the State party:

   (a) Make full use of the findings and implement recommendations of the Expert Group on Mental Health Policy appointed by the Minister of State at the Department of Health in 2003;

   (b) Undertake awareness-raising and sensitisation measures to prevent stigmatisation and ensure that focus is given to early intervention programmes; and
(c) Continue its efforts to ensure that children with mental health difficulties benefit from specific services designed for children under 18 years of age.

102. The key objective of the Primary Care Health Strategy, *Quality and Fairness* (Department of Health and Children, 2001b), is to develop services in the community that will allow individuals direct access to integrated multidisciplinary teams of general practitioners, nurses, physiotherapists, occupational therapists and other medical staff. Additional services, such as speech and language therapy, may be provided on a sessional basis.

103. The implementation of the Primary Care Health Strategy is ongoing and the process is expected to be completed in coming years. The continued development of primary care teams and the provision of GP out-of-hours services are fundamental to allowing individuals easier access to care that is close to their homes.

104. The Government is embarking on a major reform programme that aims to deliver a single-tier health system supported by universal health insurance, to which access is determined with reference to need. Every citizen will have a selection of insurers from which to choose and equal access to a comprehensive range of curative services. Underpinning this programme is a strengthening of primary care services, including the removal of cost as a barrier to access.

105. The National Standards for Safer Better Healthcare were developed by HIQA (2012b) and launched by the Minister for Health in June 2012.

106. The National Intercultural Health Strategy, 2007-2012 (HSE, 2008a) acknowledges the Traveller community as a group at greater risk of poor health, with particular risk attached to the children of this community. The All-Ireland Traveller Health Study was completed in 2010 (see paras. 466-469).

107. A number of key developments have taken place in relation to Child and Adolescent Mental Health Services (CAMHS). There are now 61 multidisciplinary teams in place throughout the country, psychiatric bed capacity for children and adolescents has increased almost four-fold from 2007 levels, and a new child and adolescent day hospital is due to open in Dublin. Future plans in this area include the construction of a 22-bed in-patient facility in Dublin and the provision of a 10-bed child and adolescent forensic mental health unit as part of the National Forensic Mental Health Project. An additional allocation of €35 million has been provided for expenditure on mental health services in 2012, in line with commitments in the Programme for Government 2011-2016 (Department of An Taoiseach, 2011).

Adolescent health (see chapter 6)

108. The Committee recommends that the State party strengthen its efforts to address alcohol consumption by children, by, inter alia, developing and implementing a comprehensive strategy which should include awareness-raising, the prohibition of alcohol consumption by children and advertising that targets children.

109. In this regard the Committee also draws the State party’s attention to the Committee’s General Comment No. 4 on adolescent health (CRC/GC/4/2003).

110. The Committee urges the State party to implement the new ten-year National Strategy for Action on Suicide Prevention and the recommendations from the second report of the Strategic Task Force on Alcohol.

111. The Committee recommends that the State party strengthen its efforts to enhance access to adolescent-specific reproductive and sexual health information and services, and that these are not limited to school curricula but can also be accessed
within the adolescent daily living environment, in addition to information and awareness-raising campaigns.

112. Codes of practice on the placement of alcohol advertising were agreed in 2004 between the alcohol industry, advertising industry and Department of Health, and were further strengthened in 2008. The purpose of these codes is to reduce the exposure of children and young people to the marketing of alcohol. Real and tangible proposals on dealing with alcohol misuse on the basis of the recommendations of the Report of the National Substance Misuse Strategy Steering Group (published in February 2012) are being finalised. In addition, the Government has sponsored the development of a nationwide network of youth cafés that will provide a drug/alcohol-free alternative social space for young people. These are addressed in more detail later in this report. The Office of the Minister for Children also published a report in 2008, Teenagers’ Views on Solutions to Alcohol Misuse, based on a national consultation with young people (OMC, 2008).

113. In 2005, Reach Out: National Strategy for Action on Suicide Prevention, 2005-2014 was launched. The report was produced by the Health Service Executive, the National Suicide Review Group and the Department of Health and Children, following extensive consultation with all major stakeholders, including the general public. The strategy called for a multisectoral approach to the prevention of suicidal behaviour, involving cooperation between health, education, community, voluntary and private sector agencies.

114. The strategy is overseen by the National Office for Suicide Prevention (NOSP). The NOSP provides training, undertakes research on suicide, formulates strategies for its prevention and provides funding for organisations dealing with suicide and its prevention, including organisations working with young people.

115. A steering group was set up in May 2012 by the Department of Health to oversee the drafting of a National Sexual Health Strategy, which will be submitted to the Government upon completion. The DCYA will have direct input into the strategy, from its participation in the steering group, including material collected during consultation with young people. The strategy will formulate a strategic direction for the delivery of sexual health services, focus on improving sexual health and well-being, and address the surveillance, testing, treatment and prevention of HIV and other STIs, crisis pregnancy and sexual health education and promotion. The strategy will be in line with the forthcoming Public Health Policy Framework.

116. The HSE Crisis Pregnancy Programme funds a range of sexual health programmes targeted at particular groups, including adolescents. The programme works with educational and youth work organisations, and has launched a website (www.b4udecide.ie) to provide information on sexual health for young people, parents and professionals. Key areas of work under this programme include collaborating with the Department of Education and Skills and the National Youth Council of Ireland to progress the full implementation of the Relationships and Sexuality Education (RSE) programme in schools and youth work settings; the development, promotion and distribution of resources for young people and parents to promote good communication about sex; providing training to a range of youth organisations to deliver relationship and sexuality education to key target groups; and working alongside and funding youth-based services to ensure that these have relationship and sex education components, particularly services working with hard-to-reach groups in community settings.

Harmful traditional practices (see chapter 6)

117. The Committee urges the State party to continue its efforts to end the practice of FGM [female genital mutilation], for example, through prohibiting FGM by law, including the possibility of extra-territorial jurisdiction, and implementing targeted
programmes which sensitise all segments of the population about its extremely harmful effects. The Committee recommends that the State party involve and mobilise all relevant partners at the local level, including teachers, midwives, traditional health practitioners and religious and community leaders to prevent the practice of FGM. It also draws the attention of the State party to the recommendations adopted on the Day of General Discussion on the girl child (CRC/C/38).

118. On 2 April 2012, the President signed into law the Criminal Justice (Female Genital Mutilation) Act 2011. The Act commenced on 20 September 2012 and explicitly prohibits female genital mutilation (FGM) along with related offences, some of which apply to certain extra-territorial jurisdictions. The Act also makes it an offence to remove a girl from the State for the purpose of FGM. The legislation takes a human rights perspective and stipulates that the right to practise one’s cultural traditions and beliefs cannot be used to justify FGM, which has been internationally recognised as a form of gender-based violence. A defence of custom or ritual in proceedings is not permitted; neither is a defence that the girl/woman or her parents/guardians consented to FGM. Punishment is up to 14 years’ imprisonment and/or a fine; for a summary conviction, the penalty is a fine of up to €5,000 and/or imprisonment for up to 12 months, or both.

Standard of living (see chapter 6)

119. The Committee recommends that the State party:

(a) Effectively implement its National Anti-Poverty Strategy and strengthen its support to families living in economic hardship in order to ensure that poverty is reduced and children are protected against the negative impact of economic hardship on their development;

(b) Introduce a supplement to the existing universal child benefit payments as an additional and targeted allowance to assist the families which experience highest levels of poverty;

(c) Implement fully existing polices and strategies and increase budgetary allocations for and subsidisation of services, including childcare, healthcare and housing, for families with children who are particularly vulnerable; and

(d) Increase investments in social and affordable housing for low-income families.

120. Tackling child poverty is a priority for the Government. Four of the 12 high-level goals set out in the National Action Plan for Social Inclusion, 2007-2016 relate to children, as do 45 of its targets. The Programme for Government 2011-2016 also sets out commitments to help address child poverty.

121. Recent poverty trends have prompted a review of the national poverty target, as a result of which a new sub-target for the reduction of child poverty has been recommended. This will likely aim to reduce the differential rates of consistent poverty between children and adults.

122. UNICEF regularly produces report cards on child poverty and well-being. The most recent report, produced in 2010, ranks 24 OECD countries by performance in terms of three dimensions of inequality in child well-being: material well-being, educational well-being and health well-being. Ireland was awarded a score of 7 points, from a possible 8, for its
overall inequality record. This places Ireland in second place, alongside Iceland, Norway and Sweden.

123. A new approach, outlined in the Programme for Government 2011-2016, plans to break the most deeply entrenched cycles of child poverty, although the potentially negative impact of the economic recession provides a challenging backdrop.

124. As a result of the need to reduce the structural level of government spending, universal Child Benefit rates were reduced in Budgets 2010 and 2011. Budget 2012 maintained the Child Benefit rate for the first and second child at the rate of €140 per child per month and also provided for the standardisation of the rate to €140 for the third and subsequent children from 2013. Budget 2013 reduced the rate of Child Benefit for the first and second child to €130 per month. It also standardised the rate for the third child at €130 per month, while the rate for the fourth and subsequent child will be €140 per month during 2013 before full standardisation at €130 per month from 2014. Budget 2013 also directed some of the savings from the reductions in Child Benefit to a new Children Plus Initiative, which is targeted at low-income families and includes an area-based approach to child poverty, after-school childcare and additional funding for school meals.

125. In 2011, there were 43,578 households with children identified as being in need of social housing. The next assessment of housing needs is due to be carried out by local authorities in April 2013. Information on particular housing needs, household size and composition (including number and ages of children) will be gathered as part of the assessment. This information will be used by authorities when drawing up their social housing programmes.

126. The Community Childcare Subvention (CCS) Programme was introduced in September 2010, replacing a broadly similar programme that was in place from January 2008. The CCS Programme subsidises childcare costs for low-income parents. Under the programme, subvention funding is paid to community-based childcare services to enable them to charge reduced childcare fees to parents in receipt of (most) social welfare payments, Family Income Supplement, or who hold a medical or GP visit card.

127. The Childcare Education and Training Support (CETS) Programme was introduced in September 2010 and provides subsidised childcare places to parents availing themselves of certain FÁS or VEC training programmes.

128. These childcare programmes provide targeted support to parents who require childcare and who are in low-income employment, seeking employment or availing themselves of training and education support.

129. The Early Childhood Care and Education (ECCE) Programme, introduced in January 2010, is a universal programme designed to provide every child with a free preschool year in the key developmental period prior to starting school. The provision of a free preschool year to all children, regardless of income or circumstances, gives every child equal access to preschool education.

Education, leisure and cultural activities (see chapter 7)

130. The Committee recommends that the State party:

   (a) Continue undertaking measures to create an educational environment where the special needs of the child are taken into consideration, inter alia, by undertaking appropriate professional assessment of the specific needs of children,

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3 Ireland is ranked considerably better on the education (2nd) and health (7th) tables.
providing technical and material support for children with special needs, ensuring children in schools have the right to be heard in all matters concerning their well-being, and by continuing efforts to reduce overall class sizes to provide education to all children on an equal footing:

(b) Ensure that budgetary allocations are also directed at improving and upgrading school buildings, recreational equipment and facilities, and the sanitary conditions in schools;

(c) Ensure that necessary measures are taken to combat the phenomenon of bullying and that its consequences are dealt with in a responsive and child-sensitive manner; and

(d) Publish and disseminate the prepared Traveller Education Strategy and undertake training activities for teachers in order to sensitize them to Traveller issues and inter-cultural approaches.

131. The Committee encourages the State party to take fully into consideration the recommendations made by the Committee on the Elimination of Racial Discrimination (CERD/C/IRL/CO/2, para. 18) which encourages the promotion of the establishment of non-denominational or multi-denominational schools and to amend the existing legislative framework to eliminate discrimination in school admissions.

132. The current Programme for Government has committed to the publication of a plan regarding the implementation of the Education for Persons with Special Educational Needs Act 2004 (EPSEN). Priorities will include the implementation of a system in which necessary supports follow a child from primary school to second level, and greater integration of services related to special needs.

133. A number of resources are provided to schools to support the education of children with special needs. These include resource teachers and special needs assistants (SNAs). In 2006, 8,390 SNAs were in place supporting children in schools. In 2012, the number of SNAs was 10,324, which included some 2,000 in place in special schools supporting 6,905 pupils.

134. The Intercultural Education Strategy, 2010-2015 was launched in September 2010 by the Department of Education and Skills and the Office of the Minister for Integration. It is designed to assist in the creation of an intercultural, integrated and inclusive learning environment in all sectors of education, from preschool to further and higher education.

135. At both primary and second level, additional language support is provided for students who do not speak English as their first language. In 2012, allocation of language support was reformed by combining resources for high incidence special needs education and language support within a simplified allocation process. The new arrangements also provide for additional permanent teaching posts for schools with a high concentration of pupils requiring language support.

136. The phasing out of segregated Traveller preschools is one of the objectives of the Report and Recommendations for a Traveller Education Strategy, published by the Government of Ireland in 2006. The introduction of universal preschool provision (the ECCE Programme) in January 2010, and with it the opening of places in commercial and community services for all children, provided an opportunity for Traveller and settled children to attend preschool together. Preschool services have been supported in integrating children from all backgrounds through accredited equality and diversity training.

137. In addition, the National Council for Curriculum and Assessment (NCCA) published Guidelines for Schools on Intercultural Education in the Primary School (2005) and Intercultural Education in the Post-Primary School (2006) to assist schools to enable their
students “to respect and celebrate diversity, to promote equality and to challenge unfair discrimination”.

138. The colleges of education are working on the reconfiguration of their teacher education programmes in light of recent developments, including the publication of the National Strategy to Improve Literacy and Numeracy among Children and Young People, 2011-2020 (Department of Education and Skills, 2011) and the Teaching Council’s Policy on the Continuum of Teacher Education (2011a). The Teaching Council (2011b) has also published a document entitled Initial Teacher Education: Criteria and Guidelines for Programme Providers, which lists inclusive education (including special education, multiculturalism and disadvantage) as a mandatory element of the revised teacher education programmes. The process of reconfiguration is ongoing and detailed curricula for the colleges are indicated for 2012/13 for a revised Bachelor of Education and 2014 for a revised postgraduate course.

139. In 2011, the Minister for Education and Skills announced the establishment of the Forum on Patronage and Pluralism in the Primary Sector, and appointed an independent Advisory Group. The Report of the Advisory Group to the Forum on Patronage and Pluralism was published in April 2012 (Coolahe et al., 2012); the Minister outlined his action plan in response to the report in June 2012 and work is underway to implement this.

140. In 2010, Addressing Homophobia: Guidelines for the Youth Sector in Ireland was published. This was developed by the BeLonG To Youth Service, and funded by the OMCYA (now the DCYA).

141. On 17 May 2012, the Minister for Education and Skills and the Minister for Children and Youth Affairs jointly hosted a one-day anti-bullying forum. This forum sought to explore ways of tackling the problem of bullying in schools and to consider potential changes to existing practices and policies in schools to allow them to tackle bullying more effectively. The forum brought together more than 100 stakeholders, including representatives of student, parent and school management groups, teacher unions, support groups for victims of bullying, rights activists and bullying experts, and the proceedings were broadcast live over the Internet. At the forum, the Minister for Education and Skills issued a public call for submissions on the topic and 68 submissions were received. Alongside the forum, the Minister established an Anti-Bullying Working Group on tackling bullying, including homophobic bullying, cyber-bullying and racist bullying. The outcomes and recommendations from the Forum, along with the submissions received, were considered by the Working Group, which published its Action Plan on Bullying report in February 2013, launched by the Minister for Education and Skills and the Minister for Children and Youth Affairs. The Action Plan includes 12 actions that centre on supports for schools, raising awareness and further research. Work has commenced on implementing these actions in consultation with teachers, parents and management bodies at primary and secondary level.

Leisure, recreation and cultural activities (see chapter 7)

142. The Committee recommends that the State party place more emphasis on the creation of facilities for children to enjoy leisure, recreation and cultural activities.

143. Ready, Steady, Play: A National Play Policy was published in March 2004, the first of its kind to be published by any country (NCO, 2004). Since 2005, the Government has allocated approximately €28.3 million to local authorities for the provision or improvement of playgrounds as part of the implementation of both Ready, Steady, Play and the RAPID scheme for disadvantaged areas. In addition, the Government sponsors an annual national (themed) play-day in cooperation with a nationwide network of local government agencies.
and local community groups. Approximately 85% of local authorities staged play-day events in 2012, the highest-ever level of participation (see paras 614-615).

144. In September 2007, *Teenspace: The National Recreation Policy for Young People* was launched (OMC, 2007b). This policy addresses the recreational needs of young people between the ages of 12 and 17 years, and provides a strategic framework for the promotion of positive recreational opportunities aimed principally at this group. One action resulting from this policy has been the development of youth cafés, which allow young people to meet and socialise in a safe drug/alcohol-free environment. It is estimated that between 75 and 100 youth cafés were opened between 2007 and 2012. This rate intensified in 2010, following the establishment of the dedicated National Youth Café Funding Scheme by the Government, which is now commencing professional research to examine the impact of these facilities on local urban and rural communities (see paras. 629-632).

145. A number of programmes operated by the Youth Affairs Unit of the DCYA address the social, personal and recreational needs of young people. These include the Youth Service Grant Scheme, Special Projects for Youth, the Young People’s Facilities and Services Fund, the Local Youth Club Grant Scheme, Youth Information Centres, An Gaisce (The President’s Award), Léargas – The Exchange Bureau, the National Youth Health Programme and the National Youth Arts Programme. A number of these programmes are aimed specifically at hard-to-reach or disadvantaged young people. The DCYA oversees the implementation of both the National Play and National Recreation policies by local authorities.

**Special protection measures (see chapters 1, 2, 7 and 8)**

**Refugee and asylum-seeking children**

146. The Committee recommends that the State party take necessary measures to bring the policy, procedures and practice into line with its international obligations, as well as principles outlined in other documents, including the Statement of Good Practices produced by the United Nations High Commissioner for Refugees and Save the Children. The Committee further encourages the State party to ensure that the same standards of and access to support services applies whether the child is in the care of the authorities or a parent.

147. The Committee also draws the attention of the State party to its General Comment No. 6 (2005) on treatment of unaccompanied and separated children outside their country of origin (CRC/GC/2005/6).

148. The Office of the Refugee Applications Commissioner and the Refugee Appeals Tribunal continue to work with other agencies to ensure that all asylum procedures take the best interests of the child into account. Regular meetings are held with the HSE and the Refugee Legal Service in order to arrange for the processing of unaccompanied minor cases and to deal with practical issues as they arise.

149. Arrangements are in place to facilitate the presence of a social worker at the interview stage in cases of applicant minors who “age out” (i.e. reach their eighteenth birthday) during the appeals process. Where feasible, their hearing will be with a Tribunal Member trained in dealing with separated children.

150. In regard to services for Separated Children Seeking Asylum, the HSE has implemented an Equity of Care Policy and can confirm that separated children seeking asylum have access to and are provided with the same services as Irish citizens in accordance with the Child Care Act 1991.
151. All asylum-seeking children in the Direct Provision system access health and education (i.e. primary and post-primary) supports on the same basis as Irish citizens. In addition, a number of special protection measures are in place for refugee and asylum-seeking children, including provisions under the Intercultural Education Strategy, targeted education provisions for unaccompanied minors and training for staff of relevant agencies in the interviewing and screening of unaccompanied and accompanied minors.

**Age of criminal responsibility**

152. The Committee recommends that the State party reinstate the provisions regarding the age of criminal responsibility as established in the Children Act 2001.

153. Ireland’s age of criminal responsibility remains at 12 years of age. While 10 and 11 year-olds can be charged with serious offences, no prosecutions of any child under the age of 14 years may take place without the consent of the Director of Public Prosecutions.

**Administration of juvenile justice**

154. The Committee recommends that:

(a) The State party provides a statutory basis for the Irish Justice Service and that the Justice Service give high priority to the drafting and implementation of a child-oriented, rights-based Youth Justice Policy based on the Convention; and

(b) The Anti-Social Behaviour Orders are closely monitored and are only used as a last resort after preventive measures (including a diversion scheme and family conferences) have been exhausted.

155. The Committee recommends that children who have committed “anti-social behaviour” cannot be diverted to the Garda Diversion Programme, and that admission to the programme can never be considered as a sentence in future criminal proceedings. The Committee further urges the State party to implement a set of alternative measures as a matter of priority to ensure that the deprivation of liberty is used only as a last resort and for the shortest possible time.

156. The Committee recommends that the State party make every effort to use detention as a last resort. Where detention is deemed unavoidable, the Committee recommends that the State party provide children under the age of 18 with separate detention facilities. The Committee encourages the State party to make every effort in order to include in the investigation and inspection mandate of the Ombudsman for Children all places of detention where children are currently held.

157. There are no plans to place the Irish Youth Justice Service (IYJS) on a standalone statutory footing. The IYJS was incorporated into the DCYA on 1 January 2012, with some staff co-located from the Department of Justice and Equality. The report of the task force on the forthcoming Child and Family Agency has recommended that Children Detention Schools should come under the statutory remit of the Agency.

158. Progress has been made towards each of the five high-level goals of the National Youth Justice Strategy, 2008-2010, with the majority of objectives being completed. The IYJS is currently in the process of developing a follow-up strategy under the umbrella of the National Children and Young People’s Policy Framework and as part of a proposed national anti-crime strategy being developed by the Department of Justice and Equality as part of the white paper on crime.

159. The Department of Justice and Equality, in consultation with An Garda Síochána (Irish Police Force), continues to monitor the use of anti-social behaviour orders in the context of a range of measures and approaches which are available to help address anti-
social behaviour at the local level. The relevant legislation is subject to review on an ongoing basis.

160. The integration of the anti-social behaviour mechanism into the wider Garda Youth Diversion Programmes provides an effective incremental process for dealing with those who are slow to change behaviour. The options include (i) doing nothing/no further police action, (ii) an informal caution, (iii) a formal caution, involving supervision by a Garda Juvenile Liaison Officer, and (iv) prosecution.

161. With regard to the question of sentencing Judges being informed of previous admission(s) of a child to a Garda Youth Diversion Programme, the State believes that this is not necessarily out of line with international standards. Where a court is making a decision on a child who has pleaded guilty to or is found guilty of committing an offence, it is important that the Probation Officer, who makes the pre-sanction report, and the Judge have all relevant information about the child’s history when considering his or her best interests. The overriding principle is that detention must be used as a last resort.

162. The Children Act 2001 provides for the detention of a child as a measure of last resort. There has been a downward trend in the average annual use of detention of children being detained at any one time, from 134 places in 2004 to 80 in 2011.

163. All girls under 18 years who are subject to detention are accommodated in the Children Detention Schools, Oberstown. All boys under 17 years are also accommodated in Oberstown. The Government has approved a construction project for the redevelopment of the Oberstown campus and planning and procurement for this development is at an advanced stage. The redeveloped facilities will allow for the accommodation of 17-year-old boys who are currently detained in St. Patrick’s Institution.

164. The investigative powers of the Ombudsman for Children (OCO) have been extended to include boys under the age of 18 who are detained in St. Patrick’s Institution.

**Sexual exploitation and abuse**

165. The Committee recommends that the State party collect information and undertake research on child prostitution, pornography and other forms of sexual exploitation and sexual abuse of children with a view to developing targeted measures, and requests the State party to provide detailed information in that respect in its next report.

166. The Anti-Human Trafficking Unit of the Department of Justice and Equality collects and publishes data on instances of alleged human trafficking, including trafficking for the purposes of sexual exploitation, involving children. This information is provided by An Garda Síochána and NGOs, and is made available in the Anti-Human Trafficking Unit’s Annual Reports, which are accessible online via Ireland’s dedicated anti-human trafficking website, www.blueblindfold.gov.ie. These data are used by State officials and other relevant stakeholders to inform policy development and service provision in the field of anti-human trafficking.

167. The DCYA, in conjunction with the Irish Research Council for the Humanities and Social Sciences, is funding research on child sexualisation and commercialisation under the 2012 Research Development Initiative.

168. The HSE collates and publishes figures on an annual basis regarding the numbers of and primary reasons for victims of child abuse being admitted to care in the annual *Review of Adequacy of HSE Children and Family Services*. The latest figures relate to 2010, during which 687 children were admitted to care for reasons of abuse, with 63 children (3% of the total number of children admitted to care) being admitted to care due to sexual abuse (HSE,
2012a). This marks an increase from the 24 children admitted to care for this reason in 2006, but a decrease in the proportion of sexual abuse cases, which stood at 5.7% in 2006.

There were 2,248 children admitted to care in 2011. This represented a decrease of 5.2% (n=124) since the high point in 2009. The primary reasons for admission to care and care status were recorded for 2,218 of the children admitted to care (see Table 1). About 62% (n=1,382) of children were admitted to care voluntarily. For 50% (n=1,103), the primary reason related to family problems. More children were admitted to care for abuse (35%, n=772) than in 2010 (30%, n=687). The largest individual primary categories were “Parent unable to cope/family difficulty re. housing/finance etc.” (22%, n=480), “Neglect” (22%, n=483) and “Family member abusing drugs/alcohol” (12%, n=262). Compared to 2010, there were increases during 2011 for both “Neglect” (2010: 17%, n=398) and “Family member abusing drugs/alcohol” (2010: 10%, n=231).

Table 1
Primary reason for admission to care, by care status (2011)

<table>
<thead>
<tr>
<th>Primary reason for admission</th>
<th>Emergency court order</th>
<th>Other court order</th>
<th>Admitted voluntarily</th>
<th>Total</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abuse</td>
<td>202</td>
<td>265</td>
<td>305</td>
<td>772</td>
<td>35</td>
</tr>
<tr>
<td>Physical abuse</td>
<td>35</td>
<td>55</td>
<td>79</td>
<td>169</td>
<td>8</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>4</td>
<td>20</td>
<td>9</td>
<td>33</td>
<td>1</td>
</tr>
<tr>
<td>Emotional abuse</td>
<td>32</td>
<td>21</td>
<td>34</td>
<td>87</td>
<td>4</td>
</tr>
<tr>
<td>Neglect</td>
<td>131</td>
<td>169</td>
<td>183</td>
<td>483</td>
<td>22</td>
</tr>
<tr>
<td>Child problems</td>
<td>30</td>
<td>52</td>
<td>261</td>
<td>343</td>
<td>15</td>
</tr>
<tr>
<td>Child with emotional/behavioural problems</td>
<td>13</td>
<td>29</td>
<td>164</td>
<td>206</td>
<td>9</td>
</tr>
<tr>
<td>Child abusing drugs/alcohol</td>
<td>4</td>
<td>4</td>
<td>18</td>
<td>26</td>
<td>1</td>
</tr>
<tr>
<td>Child involved in crime</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Child pregnancy</td>
<td>0</td>
<td>1</td>
<td>6</td>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td>Physical illness/disability in child</td>
<td>3</td>
<td>3</td>
<td>14</td>
<td>20</td>
<td>1</td>
</tr>
<tr>
<td>Mental health problem/intellectual disability in child</td>
<td>1</td>
<td>6</td>
<td>9</td>
<td>16</td>
<td>1</td>
</tr>
<tr>
<td>Other</td>
<td>9</td>
<td>9</td>
<td>45</td>
<td>63</td>
<td>3</td>
</tr>
<tr>
<td>Family problems</td>
<td>108</td>
<td>179</td>
<td>816</td>
<td>1,103</td>
<td>50</td>
</tr>
<tr>
<td>Parent unable to cope/family difficulty re. housing/finance, etc.</td>
<td>16</td>
<td>43</td>
<td>421</td>
<td>480</td>
<td>22</td>
</tr>
<tr>
<td>Family member abusing drugs/alcohol</td>
<td>39</td>
<td>77</td>
<td>146</td>
<td>262</td>
<td>12</td>
</tr>
<tr>
<td>Domestic violence</td>
<td>8</td>
<td>14</td>
<td>12</td>
<td>34</td>
<td>2</td>
</tr>
<tr>
<td>Physical illness/disability in other family member</td>
<td>3</td>
<td>1</td>
<td>27</td>
<td>31</td>
<td>1</td>
</tr>
<tr>
<td>Mental health problem/intellectual disability in other family member</td>
<td>24</td>
<td>16</td>
<td>94</td>
<td>134</td>
<td>6</td>
</tr>
<tr>
<td>Separated children seeking asylum</td>
<td>0</td>
<td>5</td>
<td>4</td>
<td>9</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>18</td>
<td>23</td>
<td>112</td>
<td>153</td>
<td>7</td>
</tr>
<tr>
<td>Total</td>
<td>340</td>
<td>496</td>
<td>1,382</td>
<td>2,218</td>
<td>100</td>
</tr>
<tr>
<td>%</td>
<td>15%</td>
<td>22%</td>
<td>62%</td>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>

Source: HSE.
Sale and trafficking

170. In line with Articles 34 and 35 of the Convention, the Committee reiterates the recommendation by the Committee on the Elimination of Discrimination Against Women (CEDAW/C/IRL/CO/4-5, 22 July 2005) on, inter alia, the adoption and implementation of a comprehensive strategy to combat trafficking, and the measures to be put in place for the physical and psychological recovery and social reintegration of victims of trafficking, including the provision of shelter, counselling and medical care. The Committee requests the State party to provide in its next report further information and data on trafficking in particular with respect to children.

171. The Criminal Law (Human Trafficking) Act 2008 updated the law on the trafficking of children. Under the Act, a person found guilty of trafficking a child for the purposes of sexual exploitation, labour exploitation or the removal of organs is liable to life imprisonment. The legislation also criminalises the sale and purchase of children for any purpose, with life imprisonment also being the maximum penalty for this.

172. In 2009, Ireland produced its first report regarding potential and suspected victims of human trafficking. This report stated that, of the 66 cases of potential and suspected trafficking in human beings which came to the attention of An Garda Síochána, 17 were minors. In the 2010 Annual Report, a total of 69 cases of alleged trafficking in human beings were reported, 19 of which involved minors.

173. In February 2008, the Anti-Human Trafficking Unit was established in the Department of Justice and Equality, and in 2009 the National Action Plan to Prevent and Combat Trafficking in Human Beings in Ireland, 2009-2012 was published by the Minister for Justice and Equality.

174. Ireland also ratified the Council of Europe Convention on Action against Trafficking in Human Beings, which came into effect in Ireland on 1 November 2010. Ireland also ratified the Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children, which came into effect in Ireland on 17 July 2010. Ireland cooperates with other police forces, agencies and international organisations in an effort to combat human trafficking.

175. The National Referral Mechanism is the term used to describe (i) the process by which a suspected victim of human trafficking is identified; (ii) the range of assistance and support services available to potential and suspected victims of human trafficking; and (iii) how potential and suspected victims are referred to or can apply for access to each of those services.

176. The HSE provides assistance, support and protection to child victims of trafficking and in doing so considers the best interests of each child on a basis of individual assessment, including a risk assessment which is conducted in each case. The aim is to cater for each child’s specific needs as they present, with the long-term safety and welfare of the child in mind. This encompasses a multitude of actions and factors, including age, abilities, resilience and circumstances.

Children belonging to minorities

177. The Committee recommends that the State party:

(a) Work more concretely towards the recognition of the Traveller community as an ethnic group as called for by the Committee on the Elimination of Racial Discrimination (CERC/C/IRL/CO/2, para. 20);

(b) Undertake or use existing research or comprehensive needs assessment with a particular focus on children belonging to the Traveller community in the fields
of health, housing and education to further serve as a basis for policies and strategies and concrete measures for the improvement of the well-being of the children;

(c) Implement the recommendations of the Task Force on the Traveller community; and

(d) Provide in its next report detailed information on measures taken in order to enhance the enjoyment of the rights of children belonging to the Traveller community, in particular with regard to enjoyment and access to education, health services and housing facilities.

178. The Committee requests the State party to provide further detailed information in its next report (in respect of measures to promote the Irish language and culture, and prevent the marginalisation and social exclusion of Roma children).

179. Members of the Traveller community in Ireland have the same civil and political rights as all other citizens under the Constitution. The key anti-discrimination measures – the Prohibition of Incitement to Hatred Act 1989, the Unfair Dismissals Acts 1977, the Employment Equality Acts and the Equal Status Act – specifically identify membership of the Traveller community as an equality ground. The Equality Act 2004, which transposed measures from 3 EU Equality Directives, applied all protections contained within the Directives across all 9 grounds contained in Ireland’s pre-existing equality legislation, including that of membership of the Traveller community. The legislation also protects racial and ethnic groups as a specific ground.

180. During the course of the examination, conducted by a working group of the Human Rights Council, of Ireland’s report to that Council prepared under the universal periodic review procedures, one delegation specifically recommended that Ireland should recognise Travellers as an ethnic minority. A conference organised by the National Traveller Movement Advisory Committee took place in September 2012 to explore the issue of recognition of Travellers as an ethnic minority. This matter is currently being considered by the Department of Justice and Equality.

181. The Report and Recommendations for a Traveller Education Strategy (2006) was published in response to recommendations contained in the Report of the Task Force on the Travelling Community, published by the Government of Ireland in 1995. Specific measures to address the needs of children of the Traveller community – including the Traveller Education Strategy, the Intercultural Education Strategy and the Traveller Accommodation Strategy – are referred to in previous sections of this report and are described in further detail in subsequent chapters.

182. The National Intercultural Health Strategy, 2007-2012 recognises Travellers as Ireland’s most long-standing cultural minority group and one that is at greater risk of poor health. Further, it recognises that Traveller children are at particular risk. This applies equally to Roma children, who are an especially vulnerable group, and considerable work has taken place around this area. HSE National Social Inclusion was able to facilitate the appointment of a Roma Outreach worker, with a remit of linking families into health services. A series of seminars was co-hosted by the HSE and Pavee Point on issues faced by this group, as well as by service providers in responding to their needs. Issues of child protection were the focus of one seminar and a report is due to be signed off imminently in relation to this. There is ongoing inter-agency work on advancing care priorities of vulnerable children, including Traveller and Roma children. Establishment of a Children First Committee within the Social Inclusion Care group will incorporate Traveller representation – this will facilitate attention to the specific needs of Traveller children.
183. In 2010, the Government of Ireland published the *20-Year Strategy for the Irish Language, 2010-2030*. The Programme for Government 2011-2016 supports this strategy and will attempt to deliver on the achievable goals and targets proposed.

184. Although the number of schools in Gaeltacht (Irish-speaking) areas has reduced from 153 to just over 100, the number of schools teaching through the medium of Irish outside the Gaeltacht increased from 20 in 1975/76 to 141 in 2011/12.

**Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict**

185. The Committee looks forward to receiving, as indicated by the State party, the initial report on the Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflicts which was due in December 2004.


187. The Minister for Defence has outlined plans to increase the age limit for recruitment to the Defence Forces from 17 to 18 years. The State will forward a full report to the Committee on compliance with the Optional Protocol when new arrangements have been finalised by the Minister.

**Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography**

188. The Committee welcomes the signature of the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child pornography and prostitution in 2000 and recommends the ratification of this Optional Protocol in accordance with the intention of the State party.

189. The Minister for Children and Youth Affairs has announced her intention to examine ratification of the Optional Protocol as soon as possible, following full consideration of the content of the Protocol with the Minister for Justice and Equality. The Minister for Children and Youth Affairs discussed the issue of the ratification of this Protocol in a meeting with the Special Representative of the Secretary-General on Violence against Children, Martha Santos Pais, at a meeting in Dublin on 11 June 2012 during the Special Representative’s official visit to Ireland. It was agreed that the matter would be prioritised following consideration by the people of Ireland in the Children’s Referendum held in 2012, the submission of the State’s next report to the Committee on the Rights of the Child, and the setting-up of the new Child and Family Agency.

190. Many of the criminal law provisions of the Optional Protocol to the Convention have already been implemented in existing domestic legislation. Legislative proposals which the Minister for Justice and Equality intends to bring to Government shortly will facilitate full compliance with the criminal law requirements of the Optional Protocol and other related international legal instruments.

**Follow-up and dissemination (see chapter 1)**

191. The Committee recommends that the State party take all appropriate measures to ensure full implementation of the present recommendations, inter alia, by transmitting them to relevant Departments, Oireachtas (national parliament), and to relevant local authorities, for appropriate consideration and further action.
192. The Committee further recommends that the second periodic report and written replies submitted by the State party and related recommendations (concluding observations) adopted by the Committee be made widely available, including through Internet (but not exclusively), to the public at large, civil society organisations, youth groups, and children in order to generate debate and awareness of the Convention, its implementation and monitoring.

193. Periodic reports receive extensive coverage in print and broadcast media, and are made available to all relevant NGOs via the Children’s Rights Alliance. The reports, along with copies of the concluding observations, are also placed on Irish Government websites through the DCYA. A limited number of copies are retained for the use of students, public policy researchers and academics, and for distribution on request to schools teaching human rights education modules.

Next report

194. The Committee invites the State party to submit a consolidated third and fourth report by 27 April 2009 (that is, the due date of the fourth report). This is an exceptional measure due to the large number of reports received by the Committee every year. This report should not exceed 120 pages (see CRC/C/118). The Committee expects the State party to report every five years thereafter, as foreseen by the Convention.

195. The State apologises for the delay in submitting these reports and has notified the Committee accordingly. The Irish economy experienced a sudden and dramatic downturn during 2009 and 2010 in particular. It was therefore difficult, following this period, to accurately assess the medium- to long-term impacts of possible adjustments to expenditure and programmes relating to all aspects of the Government policy, and the lapsing of a reasonable period of time was necessary to allow a more accurate picture to emerge of the position in relation to services for children generally and the impact on cross-departmental budgets in particular. This report, covering the period between 2006 and 2011, details the years of economic growth up to 2008 and the subsequent period of recession up to 2011 and beyond. The State believes that this report is, therefore, a more accurate and reliable picture of the ways in which the Convention has been implemented in Ireland in recent years. This report also encompasses changes in administrative responsibilities consequent on the establishment of Ireland’s first-ever Department of Children and Youth Affairs, in 2011.

Format of the current report

196. The remainder of this report is presented in line with the guidelines of the Committee on the Rights of the Child Treaty regarding the form and content of periodic reports to be submitted by State parties under Article 44, Paragraph 1(b) of the Convention on the Rights of the Child.4 These guidelines provide specific chapter titles and subheadings under which States parties are requested to offer reports. These titles and subheadings are reproduced in the following pages of this report as they appear in the Committee’s guidelines.

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4 2010, CRC/C/58/Rev.2.
I. General measures of implementation

197. In brief, Ireland ratified the Convention on the Rights of the Child without reservation on 21 September 1992. Ireland operates a “dualist” system, whereby the Constitution permits the State to enter into international agreements. However, the Constitution also provides that such agreements do not become part of domestic law unless provided for by the Oireachtas by way of national legislation. Therefore, while Ireland ratified the Convention on the Rights of the Child, the Convention did not automatically become part of Irish law.

A. Measures taken to harmonise national law and policy with the provisions of the Convention and Optional Protocols

The status of children as rights holders

198. In its concluding observations on Ireland’s initial and second reports, the UN Committee recommended that Ireland undertake measures to reinforce the status of children as rights-holders. In February 2007, the Government presented the Twenty-eighth Amendment of the Constitution Bill 2007 to Dáil Éireann. The Bill proposed the insertion of a new Article 42(A) dedicated to children into the Constitution. A Joint Committee on the Constitutional Amendment on Children (JCCAC) was established and produced its final report to the Government in February 2010. The report dealt with the rights of children under the Constitution and the statute and case law concerning adoption, guardianship, care proceedings, custody and access. A copy of the third and final report of the JCCAC was presented to Cabinet in March 2010.

199. The Programme for Government 2011-2016 identified the holding of a referendum on children’s rights as a priority and stated that the wording should be along the lines of that proposed by the All-Party Oireachtas Committee. The wording proposed by the Government for approval by the people in a referendum was set out in the Thirty-first Amendment of the Constitution (Children) Bill 2012, which was published in September 2012. The Bill, which attracted all-party support, completed its passage through the Houses of the Oireachtas (Parliament) without amendment on 3 October 2012. The Children’s Referendum was held in November 2012, with a majority of votes in favour of the proposed Constitutional amendment; 58% of those who voted approved the Amendment to the Constitution. However, under general referendum legislation, a challenge to the validity of the referendum result has been initiated in the Irish High Court. The matter of referring the Bill to the President for signing into law, and to give effect to the Constitutional changes concerned, must await determination by the Courts of the legal challenge made.

200. In the standalone referendum conducted in November, the people voted on the following changes to the Constitution:

- The deletion of existing Article 42.5, which states:

  “In exceptional cases, where the parents for physical or moral reasons fail in their duty towards their children, the State as guardian of the common good, by appropriate means shall endeavour to supply the place of the parents, but always with due regard for the natural and imprescriptible rights of the child.”

- The insertion of a new Article 42A entitled “Children”, which states:

  “1. The State recognises and affirms the natural and imprescriptible rights of all children and shall, as far as practicable, by its laws protect and vindicate those rights.”
2. 1. In exceptional cases, where the parents, regardless of their marital status, fail in their duty towards their children to such extent that the safety or welfare of any of their children is likely to be prejudicially affected, the State as guardian of the common good shall, by proportionate means as provided by law, endeavour to supply the place of the parents, but always with due regard for the natural and imprescriptible rights of the child.

2. Provision shall be made by law for the adoption of any child where the parents have failed for such a period of time as may be prescribed by law in their duty towards the child and where the best interests of the child so require.

3. Provision shall be made by law for the voluntary placement for adoption and the adoption of any child.

4. 1. Provision shall be made by law that in the resolution of all proceedings –
   i. brought by the State, as guardian of the common good, for the purpose of preventing the safety and welfare of any child from being prejudicially affected, or
   ii. concerning the adoption, guardianship or custody of, or access to, any child,
   the best interests of the child shall be the paramount consideration.

2. Provision shall be made by law for securing, as far as practicable, that in all proceedings referred to in subsection 1 of this section in respect of any child who is capable of forming his or her own views, the views of the child shall be ascertained and given due weight having regard to the age and maturity of the child.”

Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict

201. Ireland signed the Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict in September 2000 and ratified the instrument in November 2002. In doing so, Ireland agreed to take all feasible measures to ensure that members of the Defence Forces who have not attained 18 years of age do not take a direct part in hostilities. In the period since 2002, Ireland has been fully compliant with the Optional Protocol.

202. While the minimum age for recruitment to the Defence Forces remained at 17 years, it was in fact unlikely that any member of the Defence Forces would be assigned to any operational duties under the age of 18, given training requirements, etc. In addition, personnel under 18 are precluded from overseas service as a matter of policy.

203. The issue of the minimum recruitment age for members of the Permanent Defence Force was recently reviewed by the Department of Defence and the military authorities. In June 2012, the Minister for Defence approved an increase in the minimum age for recruitment to the Permanent Defence Force from 17 to 18. In addition, the minimum age for the recruitment of apprentices in the Defence Forces will be increased to 18 years. This change will be implemented by means of an amendment to the relevant Defence Force Regulations. Work on the proposed regulatory amendments is currently underway.

204. Competitions for enlisted personnel and officer cadets were in train prior to the change in policy and the lower recruitment age limit of 17 will continue to apply for these competitions. However, the increase in the minimum age will apply to any new competition
advertised. Hence, the minimum age for the competition for new apprentices which has been advertised since the age change was approved is 18 years of age.

205. The current minimum age for recruitment to the Reserve Defence Force remains at 17. A review of the Reserve is currently ongoing and further consideration as to the appropriate minimum age for enlistment to the Reserve will be considered in that context. It should be noted that members of the Reserve are not considered to have been trained to the minimum standard required for Reserve operations until they have completed their “Three Star Private” course. Given that this is normally conducted in the second year of service, they cannot therefore participate in operations until they are at least 18 years of age. As a matter of policy, Reserve personnel are not eligible for any operational military duties until they are at least 18 years old. In addition, members of the Reserve are precluded from “Aid to Civil Power” operations within the State and cannot serve overseas.

**Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography**

206. The Criminal Law (Human Trafficking) Act 2008 was enacted on 7 June 2008. It criminalises human trafficking for the purposes of sexual exploitation, labour exploitation and exploitation for the purpose of removal of human organs. It also criminalises the sale or purchase of any person for any purpose. Under Section 5 of the Act, it is an offence to knowingly solicit a trafficked person, in any place, for the purpose of prostitution. For the purposes of the legislation, “child” means a person under the age of 18 years.

207. The Immigration, Residence and Protection Bill 2010, when enacted, will put in place an integrated statutory framework for the development and implementation of the Government immigration policies. It provides for a period of recovery and reflection of 60 days in the State for suspected adult victims of trafficking who require immigration permission, and the granting of a renewable period of 6 months of residence to allow the suspected victim to continue to assist the Garda Síochána or other relevant authorities with any investigation or prosecution arising in relation to the alleged trafficking. These arrangements are currently provided on an administrative basis and provide that, in the case of a person below the age of 18 years being identified as a suspected victim of human trafficking, a recovery and reflection period greater than 60 days may be granted. In determining such a duration, regard will be given to whether the child is in the care of the HSE or a parent or legal guardian who is taking responsibility for him/her, and the status of his/her parent or legal guardian in the State.

**Optional Protocol to the Convention on the Rights of the Child on a communications procedure**

208. The third Optional Protocol to the Convention on the Rights of the Child will provide for a communications procedure to be introduced to the Convention. This Optional Protocol would supplement the State reporting process under the Convention.

209. The Protocol addresses a policy area for which the Minister for Children and Youth Affairs has primary responsibility. The DCYA will therefore coordinate consideration of the Protocol by relevant Government departments and agencies, and make a recommendation to the Government regarding whether Ireland should become a party to it. As part of the process of drafting the current report, the DCYA has brought the introduction of the Protocol to the attention of all the Government departments. If the conclusion is reached that the State should become a party to it, the DCYA will in due course prepare a submission to the Government seeking approval to arrange for its signature, subject to ratification, on behalf of Ireland. This will be done in cooperation with the Department of Foreign Affairs and Trade. In order to allow for due consideration of the new Optional
Protocol by all relevant Government departments, a recommendation will be issued in due course by the Minister for Children and Youth Affairs.

National legislative updates

210. In addition to the legislative provisions detailed in previous reports and those outlined above, the following legislative changes have occurred since 2006 that further enhance and protect children’s rights in Irish law:

• **Criminal Law (Sexual Offences) Act 2006** came into operation in June 2006. It updated the existing provisions in Irish criminal law concerning the protection of children under the age of 17 from sexual abuse and exploitation. The legislation provides, inter alia, for a higher maximum penalty for the defilement of a 15 or 16 year-old child where the offender is a person in authority.

• **Criminal Law (Sexual Offences) (Amendment) Act 2007** increased the penalties in the 2006 Act for attempt offences and updated the offence of meeting or travelling with the intention of meeting a child for the purposes of sexual exploitation.

• **Child Care (Amendment) Act 2007** amended the Child Care Act 1991, as well as making amendments to the Children Act 2001. Its principal purpose was to provide that a foster parent or a relative who has had a child in their care for a continuous period of 5 years, the child having been placed with them by the HSE, may apply for a court order for increased autonomy in relation to the care of the child. It amended Section 77 of the Children Act 2001 in relation to Family Welfare Conferencing, as well as Section 29 of the Child Care Act 1991, which provides that child care court proceedings are held in private, to allow for reporting of those proceedings by specified persons in specified circumstances.

• **Health Act 2007** established the Social Services Inspectorate (SSI) on a statutory basis as the Office of the Chief Inspector of Social Services within the Health Information and Quality Authority (HIQA). This is in line with the concluding observations of the UN Committee on Ireland’s second report (NCO, 2005a). The SSI conducts inspections of statutory residential child care services (i.e. services managed by the HSE, formerly the health boards), under statutory powers contained in Section 69 of the Child Care Act 1991.

• **Adoption Act 2010** incorporated the provisions of the Hague Convention and was designed to provide a framework to ensure that appropriate procedures have been followed and that all adoptions are effected in the best interests of the child. It gives force of law to the Hague Convention on Protection of Children and Cooperation in respect of Intercountry Adoption, which entered into force for Ireland on 1 November 2010.

• **Criminal Procedure Act 2010** amended the law on victim impact evidence and included special provision for victims of crime who are children. The special provisions allow that any child who wishes to give evidence to the sentencing court about the impact of the crime may generally do so by means of a live television link. In the case of a child who is under 14 years of age, the child or the parent or guardian may give the evidence to the court.

• **Child Care (Amendment) Act 2011** created a statutory framework for the High Court to deal with Special Care cases rather than the court employing its inherent jurisdiction. The Act allows Special Care Units to be registered and inspected by HIQA.
• **Criminal Justice (Female Genital Mutilation) Act 2012** made it an offence to remove a girl from the State for the purposes of undergoing female genital mutilation (FGM), allows for the prosecution of any individual who performs the act in another jurisdiction in which FGM is illegal on a woman/girl usually resident in Ireland, removes the argument of consent or culture as a defence, explicitly refers to FGM as a human rights violation and a form of gender-based violence, protects medical professionals by providing clarity on what does and does not constitute FGM, and provides protection for victims during legal proceedings.

• **Criminal Justice (Withholding Information on Crimes against Children and Vulnerable Adults) Act 2012** made it an offence to fail to disclose information to An Garda Síochána where a serious criminal offence against a child or vulnerable adult has been committed. The Act specifically extended to children and other vulnerable persons a protection which has existed in Irish law since the Offences Against the State (Amendment) Act 1998.

• **National Vetting Bureau (Children and Vulnerable Persons) Act 2012** provides a statutory basis for the use of Garda criminal records in the vetting of persons applying for employment working with children or vulnerable adults. The Act also provides for the use of “soft” information in regard to vetting: this is information other than criminal convictions where such information leads to a bona-fide belief that a person poses a threat to children or vulnerable persons.

211. In addition, the following legislative proposal has been published by the Government and is currently being advanced in line with the legislative process:

• **Children First Bill 2013**: The General Scheme and Heads of Bill of the Children First Bill were published and referred to the Oireachtas Committee on Health and Children for consultation. Under the Children First Bill, it is intended to ensure that obligations that arise under Children First: National Guidance for the Protection and Welfare of Children (DCYA, 2011) will operate together with the obligations set out under the proposed legislation. Following enactment of the Bill, the principles and guidelines set out in Children First will continue to be implemented and due regard is to be given to Children First. The Committee on Health and Children engaged in a consultation process with organisations and individuals working in the children area and provided its extensive report on 5 July 2012. The Department of Children and Youth Affairs is giving ongoing consideration to the significant policy, operational and legal issues that have emerged from the views of the Oireachtas Committee in the context of the further development of the General Scheme and Heads of Bill in advance of proceeding with the drafting of the Bill.

**National policy initiatives**

212. A number of important national policy initiatives have been developed since 2006, including:

• Towards 2016: Ten-year Framework Social Partnership Agreement, 2006-2016 (Department of An Taoiseach, 2007);

• The Agenda for Children’s Services: A Policy Handbook (OMC, 2007a);

• National Action Plan for Social Inclusion, 2007-2016: Building an Inclusive Society (Government of Ireland, 2007);

• Report of the Commission to Inquire into Child Abuse: Implementation Plan (OMCYA, 2009);
• Intercultural Education Strategy, 2010-2015 (Department of Education and Skills and the Office of the Minister for Integration, 2010);
• Forum on Patronage and Pluralism in the Primary Sector (Coolahan et al., 2012);
• Literacy and Numeracy for Learning and Life: The National Strategy to Improve Literacy and Numeracy among Children and Young People, 2011-2020 (Department of Education and Skills, 2011a);
• The National Strategy for Research and Data on Children’s Lives, 2011-2016 (DCYA, 2011a);
• Guidance for Developing Ethical Research Projects involving Children (DCYA, 2012b);

213. The substance and impact of these and other policy initiatives are referred to in relevant sections of this report.

B. Steps taken to adopt and implement a comprehensive National Children’s Strategy within the framework of the Convention

214. The National Children’s Strategy, 2000-2010: Our Children – Their Lives, was a Government strategy based on extensive consultation with parents, children, statutory agencies and NGOs that work with children, and underpinned by the Convention on the Rights of the Child. Its primary aim was to provide a blueprint for the improvement of children’s lives, especially those who experience disadvantage or have atypical needs. The strategy was implemented over a 10-year period.

215. The Department of Children and Youth Affairs (DCYA) is currently developing a new strategy, called the National Children and Young People’s Policy Framework. This will build on the goals of Ireland’s first National Children’s Strategy, which were to ensure (1) that children have a voice in matters that affect them, (2) that their lives are better understood, and (3) that they will receive quality supports and services to promote all aspects of their development. The new Policy Framework will provide a seamless, whole-of-childhood approach to policymaking. It is intended to be the overarching framework for the future development of meaningful policies and services across Government aimed towards improving outcomes for children and young people. The new framework will encompass children and young people up to the age of 25. This is congruent with the Department’s legislative accountability, which covers children and young people in this age cohort.5

216. The forthcoming Children and Young People’s Policy Framework is being developed in a holistic way to comprehend the continuum of the life course – from infancy, through early and middle childhood, to adolescence through to early adulthood – in keeping with the Department’s responsibilities for children and young people. The high-level policy framework will facilitate the preparation of a number of more detailed age-related

5 This legislative responsibility includes the UN Convention on the Rights of the Child (children up to age 18), the National Educational (Welfare) Act 2000 (children and young people up to age 16 and age 17 if taking up employment) and the Youth Work Act 2001 (which defines a young person as under 25 years of age, yet which lays particular emphasis on young people in the 10-21 year age range).
strategies, including an Early Years Strategy, a Youth Strategy, and a further strategy that will address issues related to Middle Childhood.

217. Children’s participation has been a central aspect of the development of the new Children and Young People’s Policy Framework (see paras. 247-248).

C. Coordination of the implementation of the Convention and Optional Protocols

218. The coordination of the implementation of the UN Convention and its Optional Protocols rests with the Department of Children and Youth Affairs (DCYA). The DCYA was established in June 2011, building on the previous Office of the Minister for Children and Youth Affairs (OMCYA). The DCYA consolidates a range of functions that were previously the responsibilities of the Ministers for Health, Education and Skills, Justice and Equality, and the former Department of Community, Rural and Gaeltacht Affairs. It brings together a number of key areas of policy and provision for children and young people, including the OMCYA, and responsibility for overseeing the National Educational Welfare Board, the Family Support Agency, the Adoption Authority of Ireland and the Children Detention Schools (operated by the Irish Youth Justice Service).

219. The mandate of the DCYA encompasses a wide range of policy and service activity, both direct and indirect, for children and young people in Ireland, which will be referred to in relevant sections throughout this report. It has a complex mandate, comprised of a number of separate but interrelated strands:

- The provision of a range of universal and targeted services;
- The monitoring and oversight of a service delivery system;
- The development of legislation and policy to ensure the provision of high-quality arrangements for focused interventions dealing with child welfare and protection, family support, adoption, school attendance and the reduction of youth crime;
- The harmonisation of policy and provision across Government, with a wide range of stakeholders, to improve outcomes for children, young people and families.

220. The current Programme for Government 2011-2016 sets out a number of high-level priorities in relation to children that now fall under the remit of the DCYA. These include:

- Holding a Constitutional Referendum in relation to the rights of children under the Constitution;
- The establishment of a Child and Family Agency (CFA) on a statutory basis, with the aim of fundamentally reforming the delivery of child protection services and removing responsibility for these from the Health Service Executive (HSE);
- Implementing the recommendations of the Report of the Commission to Inquire into Child Abuse 2009 (known as the Ryan Report), including setting the Children First: National Guidance on a statutory footing and legislating for the use of “soft” information;
- Maintaining the free preschool year in early childhood care and education (ECCE) and improving its quality as resources allow;
- Enacting legislation to consolidate and reform laws regarding adoption;
- Investing in a targeted early childhood education programme for disadvantaged children, building on existing targeted preschool supports for families most in need of assistance;
• Ending the practice of sending children to St. Patrick’s Institution.

221. Progress on these priorities will be referred to in relevant sections of this report.

222. The National Children’s Strategy Implementation Group (NCSIG) was originally established under the terms of Towards 2016, the national social partnership agreement for 2006-2016. This high-level group is chaired by the DCYA. The NCSIG aims to ensure that children, young people and their families receive the support and services needed to create better futures for children through the cooperation of all local agencies and organisations, and to avoid duplication of effort, support sensible collaboration in service delivery and provide opportunities for agencies to assess the gaps sometimes caused by agency or service boundaries. The model for integrated service delivery is being developed through the establishment of Children’s Services Committees (CSCs) on a phased basis (see para. 217).

223. The Mid-Term Review of the National Children’s Strategy (Peyton and Wilson, 2006) highlighted that progress was evident in areas with good interdepartmental and multi-agency coordination, among other factors. However, the review noted that coordination issues remained, including a lack of control of central budgetary resources in areas covered by the strategy. The greater centralisation of children’s services, policies and programmes under the newly established DCYA has addressed a number of these issues.

224. The commitment to establish a new Child and Family Agency is at the heart of the Government’s reform of child and family services. The establishment of this agency, which is to be underpinned by legislation and will incorporate key children and family services, will provide a focus for the major reforms already underway. This reform programme contains a number of critical elements:

• Continuing the major cultural change required for the delivery of child-centred, transparent, quality-assured, professionally reflective and accountable services to children and their families;

• Implementing consistent child protection procedures in line with the revised 2011 national guidelines, entitled Children First: National Guidance for the Protection and Welfare of Children;

• Continuing the reforms necessary to provide safer, more reliable and effective services for children in care;

• Continuing implementation of the 2009 Report of the Commission to Inquire into Child Abuse (Ryan Report);

• Workforce development and improved collaboration with the community and voluntary sector.


Local structures

226. Commencing in 2007, the DCYA established Children’s Services Committees (CSCs) on a phased basis, with 16 currently in place. CSCs provide a structure for bringing together a diverse group of major agencies in local county areas with the aim of engaging in the joint planning of services for children. All major organisations and agencies working locally on behalf of children and young people are represented on the CSCs and most also have membership from the NGO sector. These committees are responsible for improving the lives of children and families at local and community levels through integrated
planning, working and service delivery. Their overall purpose is to secure better developmental outcomes for children. The Centre for Effective Services (CES) has been working with the DCYA to support the development and operation of the CSCs. The CES has commissioned and published a review of international best practice in inter-agency working for improved outcomes for children (CES, 2011) and has also produced findings from the initial pilot stages of the CSC initiative (CES, 2010).

D. Budgetary allocation for the implementation of the Convention and Optional Protocols

227. Due to the complex cross-sectoral nature of the issues that impact on children’s lives, there is at present no single budget stream specifically allocated to this area. Instead, each government department and agency concerned with children (such as Education, Health, etc.) maintains and manages its own budget and reports on expenditure. The resource allocations made available to the DCYA for the provision of the range of services and programmes administered by it in 2011 and 2012 are set out in Table 2.

Table 2
Resource allocations made to the DCYA, 2011-2012

<table>
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<tr>
<th>Programme expenditure</th>
<th>2011 provisional outturn (€000)</th>
<th>2012 estimate (€000)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Current</td>
<td>Capital</td>
</tr>
<tr>
<td>B. Sectoral Programmes for Children and Young People</td>
<td>305,709</td>
<td>10,292</td>
</tr>
<tr>
<td>C. Policy and Legislation Programme</td>
<td>17,935</td>
<td>–</td>
</tr>
<tr>
<td><strong>Gross total</strong></td>
<td>408,871</td>
<td>10,292</td>
</tr>
<tr>
<td>Less Appropriations-in-Aid</td>
<td>5,676</td>
<td>–</td>
</tr>
<tr>
<td><strong>Net total</strong></td>
<td>403,195</td>
<td>10,292</td>
</tr>
</tbody>
</table>

228. Due to the recent economic downturn experienced by Ireland since 2009 in particular, budgets to virtually all government departments and State agencies have been reduced. However, the budget of the DCYA has remained relatively stable, with an allocation of €419 million in 2011 and €427 million in 2012. The increased funding provision reflected certain key priorities and costs of demographic pressures. The estimated budgetary allocation to the Department of Education and Skills for primary and secondary level education (current and capital expenditure) decreased slightly, from €6.73 billion in 2009 to €6.48 billion in 2010 and €6.35 billion in 2011.

E. International assistance and development aid related to the Convention

229. The principles of the UN Convention are reflected in Ireland’s bilateral and multilateral aid programmes. Ireland provided €675 million in official development assistance (ODA) in 2010.

231. Overseas development is integral to Ireland’s foreign policy. The Government’s aid programme, Irish Aid, is managed by the Department of Foreign Affairs and Trade. Poverty reduction, to reduce vulnerability and increase opportunity, is the overarching objective of the aid programme. The fight against global hunger is a cornerstone of the programme, especially focused on women and children, and is heavily concentrated in some of the poorest countries in sub-Saharan Africa. Irish Aid has a strong focus on gender equality and seeks to contribute to the achievement of equality for men and women, boys and girls. The programme aims to ensure equal access for girls and boys to health and education. Preventing and responding to gender-based violence is another important priority, including making school a safe place to learn for all children.

232. The second Millennium Development Goal (MDG 2) calls for the achievement of universal primary education. Access to and the quality of education continues to be a priority of the Irish Aid programme. If the life-enhancing benefits of education are to be realised, the quality of education must improve. The core objective of Ireland’s support to education within its development cooperation programme is to continue to strive to get the most marginalised into school and to improve the quality of education.

233. Support for MDG 2 has had a major influence on the evolution of Ireland’s development cooperation policy in the education sector since the start of the millennium. There is a continued recognition of the importance of basic education, but also that other subsectors are vital to achieving it. Over 50% of Ireland’s education spend is provided directly to its programme countries in sub-Saharan Africa to strengthen national education systems. The Global Partnership for Education is also an important partner for Ireland in its response to the international education challenge. The Global Partnership’s focus on girls’ education, fragile States and improving quality are very much in line with Ireland’s focus. Ireland also supports UNICEF, which has considerable experience in education in fragile States and in the provision of much-needed technical support to address education bottlenecks.

234. Child health and nutrition remain a high priority in Ireland’s international development programme. Since 2005, the world has witnessed impressive reductions in child mortality in developing countries and Ireland has made major contributions attributable to these improvements. Ireland has contributed to the reduction in childhood deaths from malaria and AIDS in a number of African countries through supporting the work of the Global Fund to Fight AIDS, Tuberculosis and Malaria.

235. Ireland’s focus in its health sector support to countries emphasizes systems strengthening, country ownership and in-country leadership. As a result, service delivery and access to essential services has improved for children and their mothers.

236. Good nutrition during the 1,000 days between pregnancy and the age of 2 years contributes to good health, reduces child mortality and contributes to educational achievement. Highlighting this previously neglected issue at a global level, Ireland and the United States of America hosted the 1,000 Days: Change a Life, Change the Future high-level event at the United Nations Summit on the Millennium Development Goals on 21 September 2010. This meeting proved to be a significant landmark as a new global movement, Scaling Up Nutrition (SUN), was launched, in which Governments, other donor agencies, UN agencies, civil society, business and academia committed to work together to substantively scale up nutrition. Pivotaly, agreement was reached to demonstrate results in
the countries suffering the highest burden of childhood undernutrition within 1,000 days, i.e. by June 2013. Ireland continues to lead by example in the SUN movement, directing funding for new programmes that integrate nutrition-focused actions across all sectors, including a package of essential nutrition actions through country-level health systems.

237. Ireland is playing its part in fighting AIDS, especially in sub-Saharan Africa, where the epicentre of the pandemic lies. Addressing HIV/AIDS is fundamental to Ireland’s stated aim of poverty reduction and human development. Children affected by HIV and AIDS remain an explicit priority for Irish Aid. Ireland recognises that a supportive environment is crucial in this regard, with a focus on the household and culturally appropriate social protection networks. School and education protect children from HIV, and Education for All, another explicit policy priority for Irish Aid, is thus an essential element of a comprehensive response to HIV prevention. Prevention of mother-to-child transmission of HIV is a proven cost-effective intervention, strongly supported by Ireland through UN organisations, the Global Fund and the Clinton Foundation, as is follow-up care and treatment if required. Irish Aid emphasizes and advocates for increased focus on effective prevention in a comprehensive and balanced programme. Adequate nutrition for mothers with HIV is crucial, not only for birth outcomes, but also to reduce mother-to-child transmission of HIV. To this effect, Ireland supports nutrition for pregnant and lactating women with HIV.

238. Ireland’s financial commitment to support the fight against HIV and AIDS and other communicable diseases currently stands at approximately €100 million, of which investments benefiting children will exceed 20%, thus still honouring the country’s pledge made at the General Assembly of the United Nations in 2006.

239. Ireland’s support to civil society incorporates a child health component. Civil society partners, such as Concern Worldwide and World Vision, implement health and nutrition interventions to improve maternal and child health, while also focusing on increasing community ownership and strengthening local health systems. Irish Aid will maintain its focus on the cross-cutting issues of gender equality, good governance, HIV and AIDS, and environmental sustainability in its funding to civil society organisations during the period 2012-2015.

F. National human rights institutions

240. The Ombudsman for Children’s Office (OCO) was established in 2004 under the Ombudsman for Children Act 2002, with the aim of promoting and monitoring the rights of children in Ireland. The Ombudsman for Children was appointed by the President of Ireland on the nomination of the Oireachtas (Parliament) and is accountable directly to the Oireachtas.

241. The OCO has three principal statutory functions:

• Complaints and investigations: The OCO may investigate the actions of public bodies following the receipt of a complaint or of its own volition where it appears that the actions of the public body have or may have adversely affected a child, and where those actions were or may have been the result of maladministration. The OCO has dealt with over 6,000 complaints regarding the administrative actions of public bodies since its establishment and has frequently submitted advice to the Government on major legislation relating to the rights and welfare of children. The remit of the OCO has recently been expanded to include the investigation of complaints in relation to 17-year-olds detained in St. Patrick’s Institution, until such time as the practice of such detention of children ceases in line with Government plans (see para. 704-708).
• **Policy and legislation:** The OCO may advise the Government and the Oireachtas on any matter relating to the rights and welfare of children, including the operation of existing or proposed legislation affecting children. The OCO may also advise public bodies on the development of policies, practices and procedures designed to promote the rights and welfare of children.

• **Participation and education:** The OCO is obliged to promote awareness among members of the public, including children, of matters relating to children’s rights and welfare. This includes the principles and provisions of the Convention on the Rights of the Child. The OCO is also obliged to establish structures to consult with children and highlight issues relating to children’s rights and welfare that are of concern to children themselves. The Ombudsman for Children has also engaged directly with young people through participatory projects aimed at highlighting issues of concern to particular groups, including separated children seeking asylum, children in detention and homeless children. In addition, the OCO runs a programme of human rights workshops for schools and youth groups, and has engaged with thousands of children through this programme since its establishment.

242. The **Human Rights Commission** (HRC) was established in 2001 to promote, protect and develop human rights, and to create and foster a human rights culture in the State. The HRC collaborates with and supports the work of the Ombudsman for Children (see above) and has acted as amicus curiae (“friend of the court”) and provided legal assistance in legal cases involving children’s rights. The HRC has also advised the Government and State bodies in relation to a number of children’s issues, including school enrolment and religion in education.

243. The **Equality Authority**’s functions include working towards the elimination of unlawful discrimination, promoting equality of opportunity and providing information on equality legislation to the public. Recent work includes a resource pack developed for young people and organisations of young people dealing with the recognition and combat of stereotyping of and by young people. Significant progress has also been made with the Department of Education and Skills and the education partners in supporting schools in combating homophobic bullying and providing a safe and supportive environment for lesbian, gay and bisexual students. More generally, in 2010 guidelines were developed for embedding equality in second-level school development planning.

244. Following a Government decision in 2011, work is now at an advanced stage to merge the Equality Authority and the Human Rights Commission into a new Human Rights and Equality Commission. The purpose of this change is to promote human rights and equality issues in a more effective, efficient and cohesive way.

245. The provision of €4.409 million for 2013 in the budget for the new Irish Human Rights and Equality Commission is a significant achievement given the current financial pressures on the public purse. This level of funding maintains the combined 2012 level of Exchequer grant-in-aid funding of both bodies and demonstrates the Government’s strong commitment to strengthening our institutional framework for promotion and protection of human rights and equality. As part of the merger of the Human Rights Commission and the Equality Authority, bringing together and integrating two separate staff streams, the new Commission will, as a priority task, undertake a review of staffing needs and prepare a business case for any essential additional staff. It is recognised that this will have funding implications, but it will be considered as favourably as possible even in the current extremely difficult climate.
G. Disseminating information on the Convention (children and adults)

246. The National Children’s Strategy was based on extensive consultation with children, was widely disseminated, and resulted in the creation of a number of structures aimed at increasing children’s participation and raising their awareness of their rights. These structures are further detailed in chapter 3.

247. The forthcoming National Children and Young People’s Policy Framework is also informed by extensive consultations with children. Gaining the views of children and young people to inform its development has been a priority for the DCYA. In October 2010, an Oversight Committee (comprising the DCYA Research Unit, the Directors of the Second level and Primary Principals Networks, the Student Council Coordinator (second level), primary and secondary school teachers, children and young people from the DCYA Children and Young People’s Forum and other key stakeholders) was established by the DCYA Children’s Participation Unit to oversee a consultation process with children that aimed to inform the new Policy Framework.

248. In April 2011, children and young people were invited to complete questionnaires circulated to all primary and secondary schools, hospitals, special schools and Youthreach centres throughout the country. The questions directed at primary school children were devised by children themselves through a consultation with 7-12 year-olds conducted by the DCYA. The questions directed at second-level schoolchildren were devised by young people from a Children and Young People’s Forum organised by the DCYA.

249. A total of 1,594 schools and 67,000 children responded to these questionnaires, making this the largest consultation exercise undertaken with children to date. A report on this consultation was published in November 2012 (DCYA, 2012c).

250. In addition to consulting with children, the DCYA also invited submissions from the public on the new Policy Framework. Over 1,000 submissions have been received in response to this public consultation, which are currently being analysed by the DCYA.

251. The previous and current Ministers for Children and Youth Affairs have undertaken a number of consultations with children on various issues, which have resulted in published reports that highlight children’s rights and experiences. Since 2006 these have included (see Table 3):

Table 3
Consultations with children and subsequent publications

<table>
<thead>
<tr>
<th>Title of report and year of publication</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report on consultations with teenagers on issues to be considered by the Minister for Children when examining age of consent for sexual activity (2006)</td>
<td></td>
</tr>
<tr>
<td>Title of report and year of publication</td>
<td>Description</td>
</tr>
<tr>
<td>---------------------------------------</td>
<td>-------------</td>
</tr>
<tr>
<td><strong>Evaluation Report on the Inclusion Programme Office of the Minister for Children and Youth Affairs (2009)</strong></td>
<td>Evaluation of the Inclusion Programme, which supports organisations that represent or support young people considered “marginalised” or “hard to reach”, to encourage them to become involved in child/youth participation structures and processes.</td>
</tr>
<tr>
<td><strong>Evaluation Report of the Comhairle na nÓg (Local Youth Councils) Development Fund for the years 2007-2008, 2008-2009 and 2009-2010</strong></td>
<td>Presents the findings of an independent evaluation of the first three years of the Development Fund.</td>
</tr>
<tr>
<td><strong>Life skills matter – not just points: A survey of implementation of Social, Personal and Health Education (SPHE) and Relationships and Sexuality Education (RSE) in second-level schools (2010)</strong></td>
<td>This survey is the first Irish peer research on these issues and outlines the ways in which young people experience the implementation of SPHE and RSE in second-level schools. 134 students from 68 schools took part in the SPHE survey, and 220 students from 94 schools took part in the RSE survey.</td>
</tr>
<tr>
<td><strong>Evaluation of the work of the Dáil na nÓg Council (2010)</strong></td>
<td>This independent evaluation is based on the views of members of the Dáil na nÓg Council and policymakers.</td>
</tr>
</tbody>
</table>

252. A number of publications on the UN Convention are available on the DCYA website (www.dcya.ie). These include the text of the Convention, an information leaflet for children, Ireland’s first (1996) and second (2005) report to the UN Committee, and the Committee’s concluding observations on the second report. In addition, Ireland’s second report was published and widely disseminated by the National Children’s Office (NCO, 2005a).

253. Human rights education is included in the Social, Personal and Health Education (SPHE) Programme delivered as part of the primary curriculum, and Civics, Social and Political Education (CSPE) in second-level schools. Both programmes encompass the consideration of individual and groups rights and corresponding responsibilities. In addition, the Lift Off Programme is an optional programme developed and delivered to pupils at primary level, providing a specific tool for the promotion of human rights and detailed learning materials on the UN Convention.

254. The initial training of primary and second-level teachers includes a number of modules and electives relevant to the promotion of human rights. At primary level, these include: Inclusion; Educational Disadvantage; Intercultural Education; Equality and Cultural Diversity; and Social Justice. At second level, they include: Equality and Diversity; Social Justice; Multiculturalism; and Inclusion.
255. In April 2010, An Garda Síochána published a comprehensive policy on the investigation of sexual crime, crimes against children, and child welfare, the aim of which is to combine professionalism with sensitivity and compassion in the investigation of sexual crimes. A number of selected Garda personnel underwent intensive training and have been deemed competent to deal with all victims of serious crime, including children aged less than 14 years and people with intellectual disabilities. The number trained is dictated by the volume of serious crimes in a Garda District/Division/Region. These specialist interviewers are available for this task when required and the interviewing of under-14 year-olds takes priority over any other duty. A Garda who is not a trained specialist victim interviewer will only interview an under-14 year-old who has been the victim of a sexual offence, or an offence involving violence or threats of violence, in exceptional urgent circumstances.

H. Dissemination of State reports and concluding observations of the Committee to the public, civil society, business organisations, labour unions, religious organisations and others

256. Periodic reports receive extensive coverage in print and broadcast media, and are made available to all relevant NGOs via the Children’s Rights Alliance. The reports, along with copies of the UN Committee’s concluding observations, are also placed on government websites through the DCYA (www.dcy.ie) and are also available to purchase in printed form for a limited period following publication through Government Publications. A limited number of copies are retained for the use of students, public policy researchers and academics, and for distribution on request to schools teaching human rights education modules.

I. Plans to disseminate the current State report and concluding observations of the Committee to the public

257. As with previous reports, the current State report and concluding observations will be widely disseminated through the media, NGOs and government websites.

J. Cooperation with civil society organisations (including NGOs and children’s and youth groups)

258. Under the National Children’s Strategy, 2000-2010, a range of structures were put in place to allow NGOs and children’s and youth groups to become actively engaged in planning, monitoring and implementing Ireland’s progress on children’s rights.

259. The National Children’s Advisory Council (NCAC) has an advisory role to the Minister for Children and Youth Affairs, and includes representatives of the statutory agencies, voluntary sector, research community, parents and young people. Its overarching role is to contribute to the development of a strong collaborative interface between statutory and non-statutory providers of children’s services in order to improve outcomes for children and young people.

260. The Working Together for Children Initiative is led by the DCYA and aims to develop and implement a planning model for national and local inter-agency working, with the aim of securing better developmental outcomes for children through more effective integration of policies and services. The establishment of the country-wide Children’s Services Committees (CSCs) is a key component of this initiative (see para. 217).
261. The range of consultative structures that engage children and give them a voice in policy, decision-making and various consultative initiatives is detailed in paragraphs 310-314.

262. The DCYA has consulted with the Children’s Rights Alliance (CRA) in the preparation of this report. The CRA has over 100 member organisations that represent the majority of the organisations in Ireland concerned with children’s rights and welfare.

263. A draft of this report was sent to the Children’s Rights Alliance (CRA) for their observations in December 2012. Because of this, the Inter-Departmental Liaison Group, which was established to prepare the draft report, met with the CRA and its member organisations on 28 January 2013. Following this meeting, the CRA submitted initial specific observations on 8 February 2013, followed by a further summary submission on 25 February 2013. The report was revised, taking into account many of the changes suggested by the CRA. The summary submission from the CRA is included in full in the Appendix.

264. In addition, the Minister for Children and Youth Affairs and her Department consults with individual NGOs as issues arise.

II. Definition of the child

Minimum legal age definitions

265. The definition of “the child” and minimum legal age provisions in national legislation were comprehensively reported in Ireland’s second report (NCO, 2005a). Table 4 summarises this information, updating it where relevant.

Table 4
Definition of “the child” and minimum legal age provisions

<table>
<thead>
<tr>
<th>Provision</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age of majority</strong></td>
<td></td>
</tr>
<tr>
<td>Age of Majority Act 1985: Defines the age of majority and the age at which people can vote.</td>
<td>Majority attained at 18 years, or on marriage if prior to this.</td>
</tr>
<tr>
<td></td>
<td>Provides for the right to vote at 18 years.</td>
</tr>
<tr>
<td><strong>Age of marriage</strong></td>
<td></td>
</tr>
<tr>
<td>Family Law Act 1995: Defines the legal age at which a person can marry.</td>
<td>18 years, except in cases where a Court Exemption Order has been obtained.</td>
</tr>
<tr>
<td><strong>Social welfare provision</strong></td>
<td></td>
</tr>
<tr>
<td>Section 2(3) of the Social Welfare Consolidation Act 2005 (as amended): Defines the term “qualified child” as follows: a qualified child must (1) be ordinarily resident in the State, (2) not be detained in a reformatory or industrial school and (3) satisfy the condition as to age (which is defined within the scope of the relevant scheme).</td>
<td>Under 18 years for all schemes.</td>
</tr>
<tr>
<td></td>
<td>Between 18 and 22 years if young person is in full-time education for selected schemes.</td>
</tr>
<tr>
<td>Provision</td>
<td>Age</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
</tr>
<tr>
<td>Education Welfare Act 2000: Sets out the age at which children may leave education.</td>
<td>16 years, or following three years of full-time second-level education, whichever comes later.</td>
</tr>
<tr>
<td><strong>Medical treatment</strong></td>
<td></td>
</tr>
<tr>
<td>Non-Fatal Offences Against the Person Act 1997: Defines a child for the purposes of consenting to medical procedures for the purpose of diagnosis or ancillary to any medical treatment.</td>
<td>16 years.</td>
</tr>
<tr>
<td>Mental Health Act 2001: Defines a child for the purposes of psychiatric treatment.</td>
<td>18 years, or on marriage if prior to this.</td>
</tr>
<tr>
<td><strong>Child care</strong></td>
<td></td>
</tr>
<tr>
<td>Child Care Act 1991, Child Care (Placement of Children in Foster Care) Regulations 1995 and Child Care (Placement of Children with Relatives) 1995</td>
<td>Children in foster care remain legally part of their family until the age of 18 years.</td>
</tr>
<tr>
<td><strong>Age of consent to sexual activity</strong></td>
<td></td>
</tr>
<tr>
<td>Criminal Law (Sexual Offences) Act 2006: Raised the age of consent from 16 to 17 years irrespective of age, gender or sexual orientation. Provides for the offences of defilement where a child is under 15 years of age, and attached a possible sentence of life imprisonment to such.</td>
<td></td>
</tr>
<tr>
<td><strong>Purchase of alcohol and solvents</strong></td>
<td></td>
</tr>
<tr>
<td>Intoxicating Liquor Act 2003: Sets down the age at which people may purchase alcohol and be present on licensed premises.</td>
<td>Prohibits the sale of alcohol to persons under 18 years. Prohibits the presence of children under 18 years on licensed premises after 9 p.m. other than when accompanied by an adult or attending private functions at which a substantial meal is served.</td>
</tr>
<tr>
<td>Public Health (Tobacco) Act 2002</td>
<td>Makes it an offence to sell a tobacco product to a person under 18 years of age.</td>
</tr>
<tr>
<td>Child Care Act 1991</td>
<td>Prohibits the sale of solvent-based products to children under 18 years where it is known or suspected that they will be abused.</td>
</tr>
<tr>
<td><strong>Employment</strong></td>
<td></td>
</tr>
<tr>
<td>Protection of Young Persons (Employment) Act 1996: Prohibits the full-time regular employment of a child; sets out the requirements in relation to maximum working hours, rest periods and early morning and night work; sets out the conditions under which children aged 14 and 15 years can be employed.</td>
<td>Child is defined as anyone under 16 years. Young person is defined as anyone aged 16 or 17.</td>
</tr>
<tr>
<td>Provision</td>
<td>Age</td>
</tr>
<tr>
<td>-----------</td>
<td>-----</td>
</tr>
<tr>
<td><strong>Juvenile justice</strong></td>
<td></td>
</tr>
<tr>
<td>Children Act 2001 and Criminal Justice Act 2006: Defines the age of criminal responsibility.</td>
<td>Age of criminal responsibility raised from 7 to 12 years. 10 and 11 year-olds may be charged with serious offences such as murder, manslaughter, rape or aggravated sexual assault, with proceedings being taken with the consent of the Director of Public Prosecutions.</td>
</tr>
<tr>
<td><strong>Voluntary enlistment to the defence forces</strong></td>
<td></td>
</tr>
<tr>
<td>Statutory Regulation (forthcoming)</td>
<td>Minimum age of voluntary enlistment raised from 17 to 18 years in 2012.</td>
</tr>
</tbody>
</table>

266. With regard to children’s consent to medical treatment, the Health Service Executive (HSE) established the National Consent Advisory Group with a view to establishing a national consent policy. In May 2012, Draft National Consent Guidelines were released for comment and feedback on the HSE website (www.hse.ie). Part 2 of these draft guidelines deal expressly with issues relating to children and adolescents, and consent for medical and social care interventions. As indicated in Table 4, children who have reached the age of 16 years may consent to medical interventions without the agreement of their parents. However, the current legislation is unclear as to whether this right also applies to refusal of medical or social care interventions since the outcomes of such a refusal may have serious implications for the child’s health and life. The Draft National Consent Guidelines propose that in cases where an individual under the age of 18 refuses life-sustaining treatment, or of other decisions which may have profound irreversible consequences for him or her, an application should be made to the High Court to adjudicate on the refusal. In such a case, the High Court may intervene to order treatment that is necessary to save life where this is in the best interests of the young person. In the event of such an application, the person under 18 should be separately represented.

267. The Interim Report of the Steering Group reviewing the Mental Health Act made clear recommendations in relation to children, including relating to the definition, for the purposes of any new mental health legislation, of “a child”. The recommendations of the Steering Group are now being examined by an Expert Group, which expects to present its Final Report to the Minister in Quarter 2, 2013.

III. General principles

A. Non-discrimination

268. Ireland’s first report to the UN Committee, published by the Government of Ireland (1996), detailed the Constitutional provisions relating to non-discrimination, and progress on this issue was detailed in the second report, published by the National Children’s Office (NCO) in 2005. A number of significant anti-discrimination measures and initiatives have taken place since 2006. These have been introduced in light of the growing diversity of Irish society.

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269. Planning for Diversity – A National Action Plan Against Racism and Related Intolerance, published in January 2005, was implemented during the four-year period between 2005 and 2008 inclusive. The Plan had an overall focus on supporting key stakeholders in the development of locally based anti-racism strategies and social inclusion measures in order to promote diversity. Total expenditure under the Plan was approximately €5 million. The Plan led to the development of strategies such as the Intercultural Health Strategy, the Intercultural Education Strategy, the Arts Strategy and the Workplace Diversity Strategy, which continue to be implemented by the relevant government services.

270. The National Consultative Committee on Racism and Interculturalism (NCCRI) was established by the then Department of Justice, Equality and Law Reform as an independent expert body to provide advice, develop initiatives to combat racism and work towards a more inclusive, intercultural society in Ireland. The approach of the NCCRI was to promote intercultural approaches to integration through dialogue and consensus. It worked in partnership with a broad range of government and non-government bodies, with a focus on long-term sustainable outcomes. In 2008, the NCCRI chose education as the theme for Intercultural and Anti-Racism Week. An educational toolkit and posters celebrating intercultural dialogue in the classroom were subsequently sent to schools nationwide. Due to budgetary restrictions put in place as a result of the economic downturn in Ireland, the NCCRI was closed in 2008.

271. Following on from this, the Department of Education and Skills and the Office of the Minister for Integration launched the Intercultural Education Strategy, 2010-2015, in September 2010. The strategy is designed to assist in the creation of an intercultural, integrated and inclusive learning environment in all sectors of education, from preschool to further and higher education. It is aimed at respect for difference and concerted and evolving change of attitude, which would enable new immigrant students, along with their native peers, to feel more welcome. It is hoped that students within such a learning environment will have higher expectations and aspirations, and therefore remain in full-time education longer. The strategy aims to ensure that:

- All students experience an education that “respects the diversity of values, beliefs, languages and traditions in Irish society and is conducted in a spirit of partnership” (Education Act 1998);
- All education providers are assisted in ensuring that inclusion and integration within an intercultural learning environment becomes the norm.

272. The Report and Recommendations for a Traveller Education Strategy was launched in November 2006. It covers all aspects of Traveller education, from preschool through to further and higher education, within a lifelong learning context. The primary objective of the strategy is to ensure a quality, integrated education for Travellers underpinned by the principles of inclusion and mainstreaming, with an emphasis on equality, diversity and the adoption of an intercultural approach. The Traveller Implementation Group, consisting of senior officials of the Department of Education and Skills with responsibility for different aspects of Traveller education, was established in 2006 to progress implementation of the recommendations of the strategy. An Advisory and Consultative Forum was established in late 2009 to oversee the ongoing implementation of the strategy. The Forum includes key stakeholders in the education sector with an interest in or a responsibility for Traveller education in Ireland, as well as Traveller representative groups and Travellers themselves. The objective of the Forum is to identify issues, including obstacles, to the implementation of the strategy.

273. The Diversity and Equality Guidelines for Childcare Providers was published by the OMCYA in 2006 to support childcare practitioners to recognise and work with diversity
and equality issues within preschool settings. In 2010, the Department of Education and Skills announced funding of €500,000 for a Preschool Initiative for Children from Minority Groups to support preschool services to undertake accredited equality and diversity training, linked to these guidelines. Also at preschool level, Síolta, the National Quality Framework for Early Childhood Education, contains 16 standards, one of which is “identity and belonging” which states that “promoting positive identities and a strong sense of belonging requires clearly defined policies, procedures and practice that empower every child and adult to develop a confident self- and group identity, and to have a positive understanding and regard for the identity and rights of others”.

274. In 2008, the HSE launched the Intercultural Health Strategy, 2007-2012. This strategy provides a framework through which both staff and service users may be supported to participate actively and meaningfully in the design, delivery and evaluation of provisions of healthcare to minority ethnic service users in Ireland. With specific regard to children, the strategy states that mechanisms will be formulated around collaboration with relevant personnel within the children and family sectors, and will work towards supporting the care needs of children and families of diverse ethnicities and cultures. The care and support needs of separated children will be a priority within this approach. In addition, recommendations contained in the National Action Plan Against Racism form a key element of ensuring an inclusive intercultural approach to meeting the needs of children from diverse minority ethnic groups and communities. The Intercultural Health Strategy further acknowledges that support and training for staff may be required in the area of childcare and protection within the framework of interculturalism and diversity. Children and family services will be supported in efforts to develop comprehensive practice in this area. Work on the implementation of this strategy has included the production of a guide to responding to diverse religious and cultural communities for healthcare staff; collaborative work with a number of agencies to embed an Ethnic Identifier in core datasets; the development of an Emergency Multilingual Aid in 21 languages to assist staff in communicating with patients who present in acute or emergency situations and who are not proficient in English; and engagement with relevant agencies in relation to enhancing support for women from minority ethnic communities who are at risk of different forms of gender-based violence.

275. In 2010, the Arts Council launched a diversity strategy entitled Cultural Diversity and the Arts: Policy and Strategy. Working in partnership with relevant agencies and stakeholders, the strategy aims to undertake an audit of selected Arts Council schemes, the development of resources and guides for those working in the arts sector, and an intercultural arts scheme in collaboration with local development partnerships.

276. In 2009, the Gaelic Athletic Association (GAA), the Camogie Association and the Ladies Football Association launched a joint Inclusion and Integration Strategy, 2009-2015. This strategy aims to provide a sporting environment that “welcomes people of all nationalities, ethnicities, religions, ages and abilities and to make it easy for them to take part”. The strategy promotes a range of activities and actions at national, regional, county and local level.

277. In 2007, the Football Association of Ireland (FAI) launched an Intercultural Football Plan, with four overarching objectives: to combat “racism” in football; to promote participation among minority ethnic and multicultural communities; to develop a culture of football that is dynamic and globally competitive; and to contribute to the wider process of integration. In 2012, the Department of Justice and Equality is supporting the FAI’s Football for All programme. The rationale for the programme is that every individual, regardless of ability, should have the opportunity to access football in their local club and the FAI wishes to promote an ethos of inclusion within the football community. The programme is aimed at players with a wide range of disabilities, aged 6-14 years.
B. Best interests of the child

278. Ireland’s previous reports to the UN Committee reported on the legislative basis and regulations in place in various sectors for the protection of the best interests of the child. This legislative, administrative and judicial framework remains in place. The following provides an update on measures in this area.

279. The Child Care (Amendment) Act 2007, which provides for greater autonomy of foster carers who have had a child in their care for a continuous period of five years or more, provides that the court shall grant such orders only where it is in the best interests of the child to do so.

280. The Adoption Act 2010 provides that, in domestic and intercountry adoptions, the welfare of the child will be the first and paramount consideration of the Adoption Authority or the court in making an adoption order.

281. The Child Care (Amendment) Act 2011 provides that the best interests of the child must be upheld in all matters relating to the formulating and varying of Special Care Orders and decisions regarding the convening, organisation and management of Family Welfare Conferences.

282. The National Standards for the Protection and Welfare of Children were published by HIQA in 2012 to support continuous improvements in the care and protection of children in receipt of HSE child protection and welfare services, and are intended to be used in conjunction with the relevant legislation and Children First: National Guidance (DCYA, 2011). The best interests of the child are fundamental to a number of the themes included in the National Standards, including the development of child-centred services and the use of information, and in standards relating to the determination by social workers of the most appropriate course of action in relation to a child, all decision-making, partnership between social workers in building, supporting and promoting improvements in services, and the sharing of information with children and families (see paras. 199-200 on the 2012 referendum on children’s rights).

Employment rights legislation

283. Under-18s may obtain employment, but Ireland has employment rights legislation aimed at ensuring their health and well-being. The principal legislation governing the employment of under-18s is described below.

284. The Protection of Young Persons (Employment) Act 1996 consolidates the law on young workers and gives effect to international rules on protecting young workers drawn up by the International Labour Organization (ILO) and the European Union (EU). The Act regulates the protection of young persons in employment generally, including industrial work. The law is designed to protect the health of young workers and to ensure that work during the school years does not put a young person’s education at risk. The law sets minimum age limits for employment, sets rest intervals and maximum working hours, and prohibits the employment of under-18s on late night work. Employers must keep specified records for their workers who are under 18.

144 of the Safety, Health and Welfare at Work (General Application) Regulations 2007 requires an employer to carry out a risk assessment prior to a child or a young person commencing employment. Also, when there is a major change in the place of work or the work to be carried out, the employer is required to ensure that there is no significant risk to the safety and health of the child or young person. The Regulations prohibit an employer from employing a child or young person if the safety and health of that child or young person would be put at risk.

286. Under-18s are normally engaged on a part-time basis. Accordingly, the Protection of Employees (Part-Time Work) Act 2001 is of particular relevance. It provides that a part-time employee (as defined) cannot be treated in a less favourable manner than a comparable full-time employee in relation to conditions of employment. It also provides that all employee protection legislation applies to a part-time employee in the same manner as it already applies to a full-time employee. Any qualifying conditions (with the exception of any hours thresholds) applying to a full-time employee in any of that legislation also apply to a part-time employee.

287. Finally, the National Minimum Wage Act 2000 sets out the minimum rate of pay that an employee is entitled to receive, with specific provisions in relation to young people aged under 18.

**Specific provisions for unaccompanied minors, asylum-seeking children and victims of human trafficking**

288. A specialised training module for caseworkers (including those dealing with unaccompanied minors) working within the asylum area has been developed by UNHCR and the training is facilitated by UNHCR on a regular basis. While the procedures utilised relate to unaccompanied minors, the approach taken, and particularly the training provided, is also of considerable benefit in the interviewing of children who are accompanied but whose parents have decided they should be the subject of a separate application for asylum. The Office of the Refugee Applications Commissioner and the Refugee Appeals Tribunal have adopted a multi-agency approach in the training of practitioners in this area and as a result the specialised training programme is also attended by representatives from the HSE and the Refugee Legal Service.

289. The Office of the Refugee Applications Commissioner (ORAC) has also developed anti-human trafficking procedures. The procedures provide for ongoing liaison between the ORAC and the Anti-Human Trafficking Unit of the Department of Justice and Equality and the Garda National Immigration Bureau (GNIB). Training in this regard has been provided to front-line staff within ORAC.

290. The State’s response to child trafficking is set out in the National Action Plan to Prevent and Combat Trafficking in Human Beings, 2009-2012 (see paras. 684-688). Under this plan, a national referral mechanism has been developed for all potential and suspected victims of human trafficking (including children) under which all such potential and suspected victims are given the protection of the State, including accommodation, immigration status (where required), medical care, legal aid and advice, and interpretation facilities.

291. The HSE is responsible for the protection and welfare of children under the Child Care Act 1991, as amended, and Children First: National Guidance (DCYA, 2011). Operating under this remit, the HSE provides assistance, support and protection to child victims of trafficking and in doing so considers the best interests of each child on a basis of individual assessment, including a risk assessment which is conducted in each case. It should be noted that the “best interests” determination process begins from the moment a child presents to the time a durable solution is found. The child is allocated a social worker
from initial referral who, whenever possible, will be the individual who conducts the initial assessment in order to minimise the amount of disruption during the process. The aim is to cater for each child’s specific needs as they present, with their long-term safety and welfare in mind. This encompasses a multitude of actions and factors to be considered, such as age, abilities, resilience and circumstances.

292. The care plans developed by the HSE under the Child Care Acts 1991-2011 are in line with the objective expressed in paragraph 23 of the preamble to the EU Directive on Preventing and Combating Trafficking in Human Beings and Protecting its Victims, which was adopted on 5 April 2011. The Garda National Immigration Bureau deals with issues appropriate to the Garda Síochána in conjunction with the HSE. Similarly, the HSE liaises with the Legal Aid Board in relation to the provision of legal aid and advice.

C. Right to life, survival and development

293. Ireland’s first report comprehensively addressed the Constitutional recognition of the right to life of every citizen and the need to protect this right.8

294. Every pregnant woman who is usually resident in the State (i.e. living here or intending to remain here for at least one year) is entitled to free maternity care under the Maternity and Infant Care Scheme. This provides for access to public hospitals that provide maternity services. The HSE also provides grant support for those women who wish to avail themselves of home births. The scheme also provides for an expectant mother to attend a GP of her choosing at least six times before the birth, and twice within six weeks after the birth. Visits before the birth are alternated with visits to the maternity unit or hospital. Where the expectant mother has a significant illness, an additional five visits to the GP may be provided.

295. On birth, a range of health services are provided free of charge to mothers and infants. The Public Health Nurse (PHN) Service is responsible for child health monitoring, which involves a programme of screening interventions and support for parents through the preschool years. A home visit is made by the PHN/Community Midwifery Services following discharge from hospital after the birth of a baby, with further visits being offered as necessary. In 2011, 82.6% of newborn babies were visited by a PHN within 48 hours of discharge from the hospital for the first time. Details of further primary care services available are provided in paragraphs 478-490.

296. Provisions for maternity leave were reported on in Ireland’s second report.9 Since 2007, women have been entitled to 26 weeks’ paid maternity leave, an increase of 8 weeks over previous provision, and an additional 16 weeks’ unpaid leave, also an increase of 8 weeks over previous provision.

297. Maternity Benefit is a payment for employed and self-employed people who meet the PRSI contributions’ criteria for the tax year relevant to their claim and who are in insurable employment covered by the Maternity Protection Act 1994 immediately before the first day of maternity leave. The last day of insurable employment must be within 16 weeks of the end of the week that the baby is due. For an employed person, the weekly rate is calculated by dividing the gross income in the relevant tax year by the number of weeks worked in that year. 80% of this amount is then payable weekly, subject to a minimum payment of €217.80 and a maximum payment of €262.00. For the self-employed, the weekly rate is calculated by dividing the reckonable income in the relevant tax year by 52.

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9 2005, CRC/C/IRL/2, Paragraph 318.
Again, 80% of this amount is then payable weekly, subject to the minimum and maximum payments.

298. The Parental Leave Act 1998 was amended by the Parental Leave (Amendment) Act 2006. This increased the age of the child for which parental leave can be taken from 5 to 8 years. In the case of a child with disabilities, parental leave may be taken up to the age of 16 years. Parental leave is available for each child and amounts to a total of 14 working weeks per child. Both parents have equal and separate entitlement to parental leave. If both parents work for the same employer, parental leave entitlements may be transferred between parents with the employer’s agreement.

299. Capital punishment was abolished in Irish law in 1990. The Twenty-first Amendment to the Constitution Act 2001 removed all references to the death penalty from the Constitution.

300. All deaths, including those of children, are registered centrally with the Registrar of Births, Marriages and Deaths. Deaths must be registered within 3 months by a relative of the deceased, who will receive a Death Notification Form from the attending doctor or hospital. Where the doctor providing the Death Notification Form had not seen the deceased in the 28 days preceding his or her death, or where there may be any concerns about the cause of death, he or she may refer the death to the Coroner’s Office which will decide if a post-mortem is necessary.

301. Child mortality rates in Ireland have remained relatively stable over the past five years, with the highest recent rate of 4.3% reported in 2008 and the lowest rate of 3.4% reported in 2011.

302. In 2010, the Central Statistics Office (CSO) Vital Statistics reported three deaths of children aged less than 15 years due to homicide or assault.

303. Infanticide does not arise as a significant issue in Ireland. Between 2006 and 2011, there was one case of infanticide in Ireland.

304. Unfortunately, suicide remains a significant issue of concern in Ireland. The CSO reported 16 suicides of children aged less than 18 years in 2011 and the National Suicide Research Foundation reported 904 incidents of children aged between 10 and 17 years presenting to hospital emergency departments following deliberate self-harm. Suicide in the age range 0-17 years inclusive in Ireland is as follows:

- 2011 = 16 (provisional figure);
- 2010 = 15;
- 2009 = 19;
- 2008 = 25;
- 2007 = 16;
- 2006 = 18.

305. In 2005, Reach Out: National Strategy for Action on Suicide Prevention, 2005-2014 was launched. The strategy called for a multisectoral approach to the prevention of suicidal behaviour involving cooperation between health, education, community, voluntary, and private sector agencies. These include the family, schools, third-level institutions and youth organisations. The strategy was produced following extensive consultation with all major stakeholders, including the general public, and is overseen by the National Office for Suicide Prevention (NOSP).

306. The NOSP runs a training programme on suicide first aid, Applied Suicide Intervention Skills Training (ASIST), aimed at all types of caregivers. It also undertakes
research on strategies for suicide prevention and provides funding for organisations dealing with suicide and its prevention, including a number of organisations working with young people. In 2011, an additional €1 million was made available to fund such projects. These include the following projects targeted specifically at young people:

- The National Youth Council of Ireland delivers “Mind Out” training to youth workers and those working in the out-of-school sector to equip them with the knowledge and skills to deliver a 12-week programme to young people addressing the mental health of adolescents through a positive and practical approach to coping with stressful life events.

- In the academic year 2011/12, Young Social Innovators provided eight in-service trainings for teachers and youth workers, while almost 4,000 15-18 year-olds participated in its “Speak Outs”, designed to provide action-based learning with a focus on health and welfare.

- BeLonG To, an organisation funded by the DCYA that works with young LGBT individuals, has developed an NOSP-funded mental health project to improve the skills of youth workers, volunteers, steering groups and young people engaged in BeLonG To’s national network, which facilitates 17 LGBT youth groups in 15 services throughout the country.

- SpunOut (www.spunout.ie) provides young people with access to information, including health promotion and suicide prevention resources that encourage help-seeking behaviours.

- The PleaseTalk Campaign service targets 550,000 students in Ireland and Northern Ireland. It directly engages them on individual third-level campuses through current student welfare structures. The PleaseTalk website (www.Pleaseltalk.ie) provides a directory of support services available to students on campuses throughout Ireland, as well as links to other support services like ReachOut.com, an online service which aims to help young people get through tough times and which is funded by the NOSP and run by Inspire Ireland (a charitable organisation that aims to help young people live happier lives, (see www.inspire.ie).

- The NOSP also funds several other self-help programmes for young people, including Minding Our Mental Health On-Line, and Work Out (a mental fitness programme for young men). These programmes are developed and managed by Inspire Ireland, which is also in the process of developing resources for young people and their parents on deliberate self-harm. All of these projects are funded by the NOSP.

- Teenline is a telephone helpline dedicated to young people in crisis that offers support and signposting services.

- My Mind is a Dublin-based self-referral service providing psychological and psychotherapy services. It provides quick and easy access to community-based mental health services, with an online support system enabling support nationally. It is expanding to Cork and forecasts that in its first year of operation it will see about 300 under-18 year-olds avail themselves of its services.

- The NOSP in conjunction with the Department of Health and the Department of Education and Skills are about to publish new guidance for schools which aims to support them in developing an approach to mental health promotion and suicide prevention, with the intention of building on the existing good practice already in place in many post-primary schools. The guidelines have been developed in particular to support boards of management, in-school management teams, school principals, guidance counsellors, student support teams and teachers.
• The website www.letsomeoneknow.ie is an interactive platform that aims to increase young people’s awareness of mental health and well-being, and to provide contact details for support and advice. It features tips and quizzes concerning the well-being of young people and their friends, as well as a personal action diary. The website has been developed as part of the NOSP’s Your Mental Health Awareness Initiative, launched in October 2007, which is aimed at improving awareness and understanding of mental health and well-being among the general public.

• The National Suicide Research Foundation has received joint EU and NOSP funding for the SEYLE (Saving & Empowering Young Lives in Europe) Project, a multicentre project that aims to evaluate the impact of three school-based interventions directed towards reducing suicidal and risk-taking behaviours. The research focuses on the impact of screening on adolescents identified as emergency cases, adolescents’ evaluations of a mental health awareness project and a peer review paper reporting on SEYLE baseline outcomes, including the prevalence of suicidal thoughts and behaviours, levels of anxiety, depression and other psychological factors, such as substance use and risk-taking behaviour.

307. The NOSP also funds national support and counselling services for any person in crisis and at risk of suicide, and for people in bereavement. These services, such as the Samaritans, Console and Pieta House, are used by all age groups, including teenagers.

308. In addition to the NOSP, the HSE has 11 regional Resource Officers for Suicide Prevention. These staff members are key to building community capacity to respond to suicide. The resource officers, in consultation with the NOSP and other stakeholders, have developed action plans for suicide prevention and mental health promotion across many communities within their region. These action plans focus on suicide prevention, intervention, support for those bereaved by suicide and capacity to address suicide prevention in a thoughtful and practical way. Many local community initiatives are directed toward the needs of young people.

D. Respect for the views of the child

309. As reported on in Ireland’s second report, significant progress was made between 1995 and 2005 towards creating mechanisms and structures for hearing the voice of the child under the National Children’s Strategy and the National Children’s Office.10

310. The legislative basis for hearing the views of the child is contained in a number of Acts including the Child Care Act 1991, which is primarily concerned with child protection, the Guardianship of Infants Act 1964 and the Children Act 2001. The new Article 42A 4.2 on “Children” in the Constitution further reinforces this principle: it requires legal provision to be made that in proceedings brought by the State relating to the safety and welfare of any child, or in proceedings concerning the adoption, guardianship or custody of, or access to any child, the views of the child shall be ascertained and given due weight having regard to the age and maturity of the child.

Adoption

311. The Adoption Act 2010 provides that any child subject to an adoption application who has attained the age of 7 years must have their views heard by the Adoption Authority and due weight must be accorded to these views in line with the child’s age and maturity. Adoption legislation is currently being reviewed in light of the recent Children’s

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Referendum to ensure that the consideration of the views of the child are respected at every stage of the process.

Child protection

312. Standard 1.2 of the National Standards for the Protection and Welfare of Children (HIQA, 2012a) states that “children will be listened to and their concerns and complaints are responded to openly and effectively”. Features of practice required to meet this standard are further identified and include listening to and understanding children’s views and taking these seriously; putting measures in place to address communication difficulties and facilitate children in reporting concerns and complaints; consulting with the child on a regular basis for feedback to identify areas for service improvement; keeping children fully informed of developments during their involvement with the service where appropriate; providing access to external sources of advocacy and independent representation if required; and putting in place a complaints procedure that is transparent, open and accessible.

313. The HSE is actively promoting the voice of the child and has formal processes in place to include children in the development of policies and services that are child-centred and informed by the views of children. Current processes include the following:

- The HSE supports EPIC, the advocacy agency for children in care. A recent agreement has been put in place to expand this service nationally;
- The HSE, in coordination with the Department of Children and Youth Affairs, has a forum for children in care which meets with the National Director of Children and Family Services on a regular basis. This forum is informing changes to care plans and is developing information leaflets for children in care;
- An Alternative Care Practice Handbook, currently under development for professionals working with children in care, incorporates the views of children throughout and emphasizes the voices and rights of children.

Participation in judicial matters

314. Provision for hearing the views of the child in child care proceedings are provided for under the Child Care Act 1991. This Act allows for the appointment of an independent Guardian ad Litem (GAL) where the court considers such an appointment to be in the best interests of the child and in the interests of justice. The former National Children’s Office commissioned a review of the GAL service, completed in 2005, which presented a number of potential options for its development (NCO, 2005b). While recognising deficiencies in the current service, including the lack of regulation and the relatively high cost of the service by international standards, the review also concluded that there is a need for the role of the GAL, or a similar form of independent representation of children’s views in child care proceedings, to be continued, albeit in a regulated environment.

315. In 2009, the Children Acts Advisory Board (CAAB), in consultation with key stakeholders, published Giving a Voice to Children’s Wishes, Feelings and Interests: Guidance on the Role, Criteria for Appointment, Qualifications and Training of Guardians ad Litem Appointed for Children in Proceedings under the Child Care Act 1991. This guidance was developed as a key step in addressing the lack of an official definition and nationally agreed standard for the role, qualifications, appointment or training of GALs.

316. The Guardianship of Infants Act 1964 and the Children Act 1997 govern the appointment of a GAL in private law proceedings. These provisions have not yet been commenced. The procedures for obtaining the views of children in court proceedings, both child care and family law related, will be subject to further examination having regard to
the specific reference to this objective proposed for insertion into the Constitution in accordance with the Thirty-first Amendment of the Constitution (Children) Bill 2012.

317. The practical administrative arrangements to support the ascertaining of children’s views are also to be reviewed.

318. The Criminal Procedure Act 2010 amends the law on victim impact evidence and includes special provision for victims of crime who are children (see para. 210).

**Participation in decision-making**

319. The DCYA is committed to ensuring evidence-based outcomes and the inclusion of seldom-heard children and young people in participation structures and initiatives. Its work is particularly targeted at children under the age of 18 and is undertaken through the development of effective structures for children’s participation in decision-making, the conducting of consultations and dialogues with children and young people, the development of evidence-based policy in keeping with national and international best practice, and partnership with statutory and non-statutory organisations.

320. Since 2006, the DCYA Participation Unit has worked to ensure the establishment or consolidation of the following key structures:

- Comhairle na nÓg (local child/youth councils): Local child and youth councils were set up under the National Children’s Strategy, 2000-2010 in all 34 City and County Development Boards. The Comhairle na nÓg Development Fund allocated over €3 million to the 34 Comhairle na nÓg during the period from September 2007 to December 2012.

- Dáil na nÓg (national youth parliament): Dáil na nÓg is the annual national parliament for young people aged 12-18 years. The DCYA funds and oversees Dáil na nÓg, which is hosted annually by the Minister for Children and Youth Affairs. Delegates are elected to Dáil na nÓg by the 34 Comhairlí na nÓg.

Achievements of Dáil na nÓg:

- The Fairsay campaign, which highlighted the negative portrayal of teenagers in the media and urged media organisations to “talk to teenagers” rather than “talking about teenagers” (2007-2008).

- Took part in the reference panel of young people involved in developing the highly successful television and cinema advertisement known as “The boy in the hoodie” for the youth mental health awareness campaign, in cooperation with the NOSP and the DCYA (2008-2009).

- Influenced the Minister for Health and Children’s decision to commence the cervical cancer vaccine programme for 12-year-old girls (2010).

- Attained a commitment that questions on sexual behaviour not previously included will be asked in the Health Behaviour of School-aged Children (HBSC) Survey in Ireland in future years (2010).

- Peer-led, evidence-based survey among 2,500 teenagers on body image in November 2011, which was launched by young people and the Minister for Children and Youth Affairs later in 2012.

- The DCYA provides opportunities for children and young people to contribute their views on issues of national and personal importance, and has conducted national consultations and dialogues with children and young people on a range of issues since 2005, including:
• The development of the Taskforce on Active Citizenship (2006);
• The age of consent for sexual activity (2006);
• The development of the Irish Youth Justice Strategy (2007);
• The misuse of alcohol among young people (2007);
• Teenage Mental Health: What Helps and What Hurts (2008);
• Consultations with children and young people on the new Paediatric Hospital (2009);
• Consultations with children and young people in the care of the State (January–December 2010);
• Consultations with young people on reform of the Junior Cycle in second-level schools (November 2010);
• Consultation with young people on the White Paper on Crime (November 2010);
• Consultations with children and young people on the new National Children and Young People’s Policy Framework 2012-2017 (April 2011);
• Consultations with children and young people for the Forum on Patronage and Pluralism in Primary Schools (October 2011).

The findings and recommendations from the majority of the above consultations have been captured in individual reports, which are available on the DCYA website (www.dcya.ie). Several of the consultations have resulted in significant and lasting developments and changes in public policy and services, aimed at improving the lives of children and young people.

How a public consultation can influence policy and practice

The television advertisement on teen mental health, popularly known as “The boy in the hoodie”, is a highly successful model of good practice in participation by young people in decision-making (view the advertisement at www.letsomeoneknow.ie/home/video/).

This HSE advertisement grew out of a number of parallel processes on teenage mental health being overseen by the former Office of the Minister for Children and Youth Affairs (OMCYA), the Office for Disability and Mental Health, the Health Service Executive (HSE) and its National Office for Suicide Prevention (NOSP).

Both Dáil na nÓg 2008 and the mental health consultations conducted with teenagers by the OMCYA in 2008 highlighted the need for a positive mental health public awareness campaign aimed specifically at teenagers. Following the launch of the report of the consultations, Teenage Mental Health: What Helps and What Hurts? (OMCYA, 2009), concepts for an HSE television advertisement and awareness campaign on teenage mental health were focus-tested in several forums of young people around the country. A reference panel of 25 young people was established by the OMCYA and NOSP to become involved in the development of the awareness campaign at every stage of the process. Members of the reference panel gave feedback on creative concepts and messages throughout the process of developing the television and cinema advertisements and the online campaign. They advised on everything, from the ideal accent for the main character in the advertisement, to the most appropriate clothes for the actors, to appealing to the widest possible audience of teenagers. They also advised on the television time slots for screening the advertisement in order to ensure viewing by a maximum number of teenagers.
The ad

The advertisement features a teenage boy with a hoodie who cannot share his feelings with anyone. Young people from the reference panel featured as extras in the advertisement.

Quantitative research conducted on behalf of the HSE with 505 young people found that the television/cinema advertisement had an exceptionally high level of recall and awareness among teenagers, at 87%. (A recall/awareness rate of 49% is the Republic of Ireland norm for television/cinema advertisements from a cross-section of industries.)

The research further indicates that the television/cinema advertisement had the following impacts: motivated 3 in 4 young people to talk to someone if something is getting them down; encouraged them to find out more about looking after their mental health; and made them think differently about mental health.

The unusually strong impact of the television/cinema advertising campaign highlights the value of the methodology used in obtaining the views of young people and involving them in every stage of development and delivery of the campaign.

The advertisement received the Taoiseach’s Public Service Excellence Award and continues to be screened on a regular basis in cinemas throughout Ireland.

- Children and Young People’s Participation Support Team: In March 2009, the DCYA created the Children and Young People’s Participation Support Team. It is made up of staff from the DCYA Participation Unit and three regional Children and Young People’s Participation Officers from two national youth organisations. The regional Participation Officers provide support for the development of effective Comhairle na nÓg, support the operation and development of the Dáil na nÓg process and support other DCYA children and young people’s participation initiatives.

321. The DCYA is represented on two important European working groups: the Council of Europe Ad Hoc Committee on Participation of Children and Young People in Decision-making, and the ChildOne Europe Working Group on Child Participation.

322. The DCYA is committed to evidence-based policymaking and in this regard has engaged in a range of research and evaluation initiatives with a view to informing the development of a national policy on children and young people’s participation in the coming year.

323. The Inspectorate of the Department of Education and Skills routinely includes the perspectives of pupils in the conduct of whole-school evaluations. Inspectors meet with a focus group of pupils in schools where a whole-school evaluation is being conducted and, since September 2010, questionnaires have been administered to pupils in those schools also. The questionnaires gather the views of pupils on their schools and on their learning. The resulting data are an important source of evidence for the evaluating inspectors. 22,566 pupils at primary level and 13,642 pupils at post-primary level completed questionnaires in the period 2010-2011 inclusive.

IV. Civil rights and freedoms

A. Birth registration, name and nationality

324. Part 3 of the Civil Registration Act 2004 provides for the registration of births and stillbirths, including provisions to record, or add following initial registration, the name of the father where the parents of the child are not married to each other. In all cases, the Act
requires a forename and surname to be assigned to the child. If a father’s details are added after the initial registration, the surname may be amended to reflect the father’s details at re-registration.

325. In 2004, the Twenty-seventh Amendment of the Constitution Act and the Irish Nationality and Citizenship Act 2004 resulted in children born in Ireland to non-national parents losing an automatic right to citizenship. Instead, only Irish-born children of parents who have a genuine prior link to the country, evidenced by residing here for three of the previous four years, are entitled to citizenship. In January 2005, the Minister for Justice introduced the Irish-Born Children Scheme, commonly known as the IBC/05 Scheme. Parents granted permission to remain in the State under this scheme do not have the right to family reunification with spouses, children or other family members residing outside the State. Non-national parents of children born in Ireland after 1 January 2005 can apply for leave to remain in the State for a further two years. In 2007 and 2010, the IBC Renewal Schemes were introduced, under which non-national parents can apply for leave to remain for a further three years under certain conditions. In 2005, 16,991 non-nationals were granted leave to remain on the grounds of having an Irish-born child. In 2007, the number of renewals granted was 15,052, while in 2010 the number was 12,069.

B. Preservation of identity

326. As reported in Ireland’s second report, a child may be deprived of Irish citizenship based on birth or adoption only under strict conditions.11

C. Freedom of expression, and the right to seek, receive, and impart information

327. Article 40.6.1 of the Constitution of Ireland guarantees the rights of citizens to express freely their convictions and opinions.

328. The Freedom of Information Act 1997 and the Freedom of Information (Amendment) Act 2003 oblige the government departments and a wide range of statutory agencies to publish information regarding their activities and to make personal information held by them available to the individuals concerned. It also establishes the following legal rights:

• To access information held by public bodies and government departments;
• To have official information relating to him or herself amended where it is incomplete, incorrect or misleading;
• To obtain reasons for decisions affecting him or herself.

329. Under the Freedom of Information Acts, any individual may request the following records from government departments and a range of statutory agencies:

• Records relating to the individual, whenever created;
• All other records created after 21 April 1998.

11 2005, CRC/C/IRL/2, Paragraph 368.
D. Freedom of thought, consciousness and religion

330. Ireland’s second report outlines the Constitutional provisions regarding freedom of thought and consciousness, the free practice of religion, and the right of parents to guarantee their children’s religious education.\(^\text{12}\)

331. Ireland has signed but not yet ratified Protocol 12 of the European Convention on Human Rights. This is due to concerns regarding Article 1 of the Protocol and the lack of clarity in relation to the precise extent of the obligations imposed on States parties by the broad general prohibition on discrimination. The Department of Justice and Equality continues to keep the ratification of this Protocol and the interpretation of Article 1 by the European Court of Human Rights under review.

332. Ireland’s second report detailed the provisions for the teaching of religious education in schools.\(^\text{13}\)

333. In 2011, the Minister for Education and Skills announced the establishment of the Forum on Patronage and Pluralism in the Primary Sector, and appointed an independent Advisory Group to provide policy advice to the Minister on:

- How the education system may provide a diverse number and range of schools catering for all religions and none;
- The practicalities of how transfer or divesting of patronage should operate for individual primary schools in communities where it is appropriate and necessary;
- How such transfer or divesting may be advanced to ensure that demands for diversity of patronage (including from an Irish language perspective) can be identified and met on a national basis.

334. The Advisory Group to the Forum on Patronage and Pluralism adopted a multidimensional approach to its work and consulted with key stakeholders and young people. The report of the Advisory Group, published by the Minister for Education and Skills in April 2012, recommends achieving diversity of patronage using the existing stock of schools in areas where the population is stable (Coolahan et al., 2012). Where there is a cluster of denominational schools, but also parental demand for alternative school patronage, the report recommends that transfer of patronage be achieved with assistance from the Department. The Advisory Group advised that change of patronage should occur in a phased way through the adoption of a catchment approach, taking into account the preferences of parents. In June 2012, the Minister announced his action plan in response to the report and work is ongoing in this regard. Based on the Advisory Group’s recommendations, surveys of parents have been completed in 44 areas between October 2012 and February 2013. Parents were given full information on the different types of schools and possible patron bodies through a comprehensive information campaign, and a helpline was established to address queries. A detailed analysis of the results of the survey is being undertaken. In addition, a public call for submissions on promoting more inclusiveness in primary schools is planned and this will include an information leaflet for parents, developed with the assistance of the National Parents Council (Primary). The results of this consultation exercise and the findings and recommendations on inclusiveness made by the Advisory Group will feed into the drafting of a White Paper.


\(^{13}\) 2005, CRC/C/IRL/2, Paragraphs 373-374.
E. Freedom of association and peaceful assembly

335. Article 40.6.1 of the Constitution of Ireland guarantees the rights of all citizens, subject to public order and morality, to form associations and unions and to assemble peacefully without arms.

F. Protection of privacy and protection of the image

336. The Data Protection Act 1998 and Data Protection (Amendment) Act 2003 provide legal safeguards for the retention of personal information on computers or in manual files by third parties. The safeguards of these Acts apply equally to children and adults.

337. Legal proceedings in Ireland regarding and involving children are held “otherwise than in public” or in camera. The Judicial Separation and Family Law Reform Act 1989 provides that cases are heard otherwise than in public, which has been interpreted by the majority of the courts as meaning in private. The Family Law Act 1996 also provides that cases be heard other than in public and Statutory Instrument No. 84, 1997 translates this requirement as meaning in camera. The Civil Liabilities and Courts Act 2004 allows for the reporting of family law proceedings and decisions by legal professionals and certain classes of persons to be identified in regulations made by the Minister for Justice and Equality, but does not allow such reports to identify any party to the proceedings to which they relate. This has allowed for greater study of family law cases, by academic professionals in particular.

338. The Child Care Act 1991 provides for the hearing of child protection cases in camera. Access to such cases is at the discretion of the Judge and permitted only in relation to a limited range of professionals, primarily academic researchers. The Child Care Act 1991 (Section 29(7)) Regulations (S.I. No. 467/2012) provide that a specified class of persons are entitled to apply to attend hearings of proceedings under Part III, IV or VI of the Child Care Act 1991, in respect of child care and protection cases conducted in the District Court, to prepare a report on cases for the purpose of assisting in the better operation of the Child Care Act 1991. The person who will prepare the report is required to be engaged in child care law research, be nominated by a specified body and be approved by the Minister for Children and Youth Affairs. Any such reports prepared in accordance with these Regulations will not identify the parties to the proceedings to which they relate.

339. The Children Court in Ireland also sits in camera and no identifying information may be released to the public. In relation to criminal proceedings, the Children Act 2001 (as amended) provides for restrictions on the reporting of proceedings where children are concerned (Section 93 of the Act as amended by the Criminal Justice Act 2006) and also sets out what persons are entitled to be present at the court hearing (Section 94). The seriousness of the offence is not relevant to the application of these rules.

G. Access to information from a diversity of sources and protection from material harmful to children’s well-being

340. Ireland’s second report detailed the provision of appropriate information to children through library, radio and broadcasting services, and the protection of children from inappropriate or harmful information through media, films, video recordings and the

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14 2005, CRC/C/IRL/2, Paragraph 376.
Internet.\textsuperscript{15} Since 2005, a number of measures have been taken to further ensure that children have access to appropriate information while being protected from harmful materials.

**Broadcasting and advertising**

341. In January 2007, the Advertising Standards Authority of Ireland (ASAI) launched a revised *Manual of Advertising Self-Regulation with the Code of Standards for Advertising, Promotional and Direct Marketing in Ireland* (6th edition). This includes a chapter on advertising and children, which sets out a range of standards that recognise the need to respect children’s particular characteristics, portray them in an appropriate and inoffensive manner, protect them from physical, mental and moral harm, advertise food and beverage products aimed at children appropriately and protect their right to privacy.

342. Ireland’s second report detailed the development of a Children’s Code by the Broadcasting Commission of Ireland (now the Broadcasting Authority of Ireland (BAI)).\textsuperscript{16} A statutory review of this code was carried out in 2008 in consultation with key stakeholders. The outcomes of this, published in 2009, undertook to revise a number of the parts of the code, including the rules on food and drink, and to issue guidance notes in relation to other rules. Subsequent to this, the code was updated in order to transpose the AVMS Directive (Council Directive 2010/13/EU) into Irish law and a new extended Children’s Commercial Communication Code came into effect in May 2011. In 2011 and 2012, the BAI consulted on regulations to be applied to the promotion, via commercial communications to children, of foods that are high in fat, salt and sugar. A new code, including restrictions and rules on the promotion of these foods, will come into effect in the second half of 2013. The code applies specifically to commercial communications that promote products, services or activities that are deemed to be of particular interest to children and/or broadcast during and between children’s programmes. The code is available on the BAI website (www.bai.ie) in the Codes and Standards section.

343. The Minister for Children and Youth Affairs has worked with the retail industry in the matter of age-appropriate clothing for children, and in June 2012 she launched Retail Ireland’s Childrenswear Guidelines, which have been designed to combat the sexualisation of young children (Retail Ireland, 2012).

**Internet safety**

344. From 2006 to 2007, the Internet Advisory Board continued its work promoting awareness regarding Internet safety and potential risks for children and young people. It also continued to oversee the role of the Internet hotline, which allows individuals to anonymously report suspected illegal content on the Internet.

345. The Office for Internet Safety (OIS) was established in 2008 as a response to growing concerns about Internet safety and assumed the responsibilities of the previously existing Internet Advisory Board. The OIS has responsibility for coordinating measures to ensure a safer Internet environment, particularly for children and young people, within a self-regulatory and cooperative framework, and is particularly focused on combating child pornography. Since its establishment, it has published a range of advisory publications on aspects of Internet safety, including *A Parent’s Guide to New Media Technologies*, *A Parent’s Guide to Filtering Technologies*, *A Parent’s Guide to Social Networking Sites* and *A Guide to Cyber-bullying*.

\textsuperscript{15} 2005, CRC/C/IRL/2, Paragraphs 377-391.

\textsuperscript{16} 2005, CRC/C/IRL/2, Paragraph 385.
346. The OIS manages the Safer Internet Ireland project, which receives funding from the European Union’s Safer Internet Programme. A variety of initiatives are ongoing in this regard, including:

- The operation of the Internet hotline www.hotline.ie, which is co-funded and operated by the Internet Service Providers’ Association of Ireland and is a member of the International Network of Internet Hotlines (www.inhope.org). The hotline deals with confidential reports of illegal content on the Internet;
- Internet safety awareness campaigns, particularly those run in cooperation with the Professional Development Service for Teachers (PDST) (www.ncte.ie), which operates the Irish Internet safety awareness node, www.webwise.ie. The PDST works to disseminate Internet safety messages through the educational curriculum. The Webwise Primary School Programme was launched in February 2012;
- Engagement with relevant stakeholders, including statutory, industry and child protection interests, via the Internet Safety Advisory Council, which advises the OIS;
- Childline is a multimedia listening service for children and young people up to the age of 18, which is operated by the ISPCC (www.ispcc.ie). The service is free and confidential and available 24 hours a day, 7 days a week, 365 days a year (www.childline.ie);
- A national confidential helpline for parents that provides information and support in relation to Internet issues, in particular cyber-bullying, operated by the National Parents’ Council (Primary) (www.npc.ie).

347. In 2010, the Irish Safer Internet Youth Advisory Panel was launched to ensure that the views of children and young people feed into the awareness-raising activities and the policy development work of the Office for Internet Safety (OIS). Work to further develop and enhance all of the activities detailed is continuing.

H. The right not to be subjected to torture or other cruel, inhuman or degrading treatment or punishment, including corporal punishment

348. Ireland’s second report detailed the Constitutional and legislative provisions with regard to torture, cruel or inhuman treatment, and corporal punishment. These provisions continue to govern this area.

349. It is important to clarify that Ireland does not have any law or statute that specifically permits corporal punishment within the home setting. Section 246 of the Children Act 2001 provides clear legal deterrents to the use of excessive physical discipline within this and other settings.

350. Although a limited defence of “reasonable chastisement” exists in common law, Irish courts have previously handed down severe sentences in cases where parents have been convicted for assault or the use of excessive or unreasonable force. The practice of corporal punishment has been specifically prohibited in all professional care settings in

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17 2005, CRC/C/IRL/2, Paragraphs 392-396.
18 Section 246 of the Children Act 2001 states: (1) It shall be an offence for any person who has the custody, charge or care of a child wilfully to assault, ill-treat, neglect, abandon or expose the child, or cause or procure or allow the child to be assaulted, ill-treated, neglected, abandoned or exposed, in a manner likely to cause unnecessary suffering or injury to the child’s health or seriously to affect her or her well-being.
recent years. While a specific proposal for a prohibition in the home setting has not been brought forward to date, the matter has been kept under continuous review. The Government considers that there is a delicate balance to be struck between child protection priorities and attempting to criminalise parents who “smack” their children. Any proposal for legislative change in this area will require careful consideration due to the relative merits of criminal sanctions and positive promotion of good parenting models, and possible Constitutional implications relating to the role of the family.

351. It is important to emphasize that considerable progress has been made in recent years in eliminating virtually all forms of violence against children in Ireland and in encouraging parents to use alternative non-violent forms of discipline in the family setting. Recent findings to emerge from Growing Up in Ireland, the National Longitudinal Study funded by the DCYA, indicated that almost 90% of parents reported “never” (57%) or “rarely” (32%) using corporal or physical punishment as a means of disciplining children (Williams et al., 2009). A wide variety of parenting courses are provided throughout Ireland and further research indicates that parents both acknowledge and appreciate the influence of education on parenting styles as a factor in the declining use of corporal punishment. In addition, ongoing work is planned by the DCYA to establish the most effective ways in which to support parents through the new Child and Family Agency.

Treatment of child suspects

352. The statutory requirements in relation to children in custody outlined in Ireland’s second report continue to apply. In addition, a Directive from Garda Headquarters was issued in 2007 and comprehensive guidance notes on the implementation of the Custody Regulations were issued to each member of An Garda Síochána in 2008.

353. In accordance with an assurance given to the European Committee on the Prevention of Torture in 2010, a further reminder was issued from Garda Headquarters to the effect that the ill-treatment of detained persons is not acceptable and will be the subject of disciplinary sanction.

354. A revised “Information for Persons in Custody” Form C.72(S) was issued by the Commissioner of An Garda Síochána. This form must be read over and given to each detained person to notify them of their rights and also to inform them that the Garda Síochána shall at all times respect their personal rights and dignity as a human being and shall not subject them to ill-treatment of any kind. This Form is produced in a number of different languages, to enable all persons detained in Garda custody to be informed of their rights in written form in a language understood by them.

355. A revised Custody Record, issued in 2009, provides for a risk assessment for each detained person, and for all the necessary requirements in relation to a detained person. It incorporates a new section on children in custody and offers more comprehensive detail on issues such as the condition of the detained person on arrival. It acts as a safeguard both for the detained person and members of An Garda Síochána. All instances where a detained person has been injured before, during or after arrest are recorded in the Custody Record and a medical report is obtained if necessary.

356. Under its current Youth and Children Strategy, An Garda Síochána is committed “to provide a quality policing service to all the children and young people and to do so with dignity and respect for their human rights by communicating, listening and working towards building and maintaining positive relationships with children and young people”. An important element of the strategy is to ensure An Garda Síochána is equipped to deliver

19 2005, CRC/C/IRL/2, Paragraphs 300-301.
a quality service to all children and young people, and to endeavour to maintain the highest recognised international standards of behaviour and best practice when dealing with all children and young people.

357. The strategy sets out a number of actions related to training, including the provision of training on international conventions relating to children in custody. Among the courses delivered by the Crime Training Faculty in the Garda Síochána College at Templemore is a specialist course for interviewers on how to prepare for and conduct interviews with children in which they are either suspects or victims of crime.

I. Measures to promote physical and psychological recovery and reintegration of child victims

358. Child protection and welfare services are provided by the HSE through a range of professional disciplines and interventions, in accordance with legislative obligations, policy documents and national and HSE guidance. Section 3 of the Children Act 2001 places a statutory duty on the HSE to identify children who are not receiving adequate care and protection, and to then provide appropriate family support and child care services, which is understood to include child protection services if required.

359. The following are the key legislative provisions for child protection and welfare services:

- Data Protection Act 1988 and Amendment Act 2003;
- Child Abduction and Enforcement of Custody Orders Act 1991;
- Child Care Act 1991;
- Family Law Act 1995;
- Domestic Violence Act 1996;
- Refugee Act 1996;
- Freedom of Information Act 1997 and Amendment Act 2003;
- Non-Fatal Offences Against the Person Act 1997;
- Education Act 1998;
- Protection for Persons Reporting Child Abuse Act 1998;
- Protection of Children (Hague Convention) Act 2000;
- Children Act 2001;
- Mental Health Act 2001;
- Ombudsman for Children Act 2002;
- Disability Act 2005.

360. Underpinning the legislative framework are the Constitution of Ireland and the Convention on the Rights of the Child (ratified by Ireland in 1992). The Ombudsman for Children Act 2002 applies in relation to complaints being referred to the Ombudsman for Children. The Children Act 2001 provides a framework for the development of the juvenile justice system and makes provision for addressing the needs of out-of-control or non-offending children who may come before the courts. The Act provides for two distinct pathways for these children, one of which is a welfare route through the HSE.
361. A report to a social work department includes all information received where there are concerns about the safety or well-being of a child. Reports might come from professionals in other agencies, the public or a request for help and support directly from the family. The HSE is obliged to treat seriously all child protection and welfare concerns, whatever their source, and consider carefully and fairly the nature of the information reported. A balance needs to be struck between protecting the child and avoiding unnecessary and distressing intervention. A child or young person has the right to self-refer to social work services.

362. All reports to HSE social work departments are subject to a standardised business process for referrals and initial assessments. Under the standardised business process:

- A screening process will take place that will identify which reports do not belong within the remit of HSE Children and Family Services, and forward these on to more appropriate agencies.

- For other reports, preliminary enquiries will be made to confirm key information (e.g. verify reporter’s contact details, child’s address, nature of the concern, check whether already known to the HSE). A preliminary enquiry is not an assessment. The aim of this process is to support and help the social worker to make a decision on the actions to take in response to information reported in order to determine the best outcome for the child who is the subject of the report. Normally, that decision or action will be an assessment or assessment plus action. The screening and preliminary enquiry process should take no more than 24 hours.

- The initial assessment is defined as a time-limited process to allow sufficient information to be gathered on the needs and risks within a case so that informed decisions, recommendations and actions can be taken. Initial assessments are expected to be carried out within a specific timeframe (up to 20 working days, although they may be completed much sooner), using standardised procedures and approved templates and forms. The initial assessment is normally centred on interviews and home or site visits, sometimes defined as “direct work”. The objectives of the initial assessment are to determine whether a further or more comprehensive assessment may be required and to enable, if necessary, a plan to be put in place for continued intervention or support.

363. The Ferns Inquiry Report (2005) identified over 100 allegations of child sexual abuse made between 1962 and 2002 against 21 priests operating under the aegis of the Diocese of Ferns. Several working groups were established to address the recommendations.

364. The Ferns IV Working Group was tasked with examining the needs of children and young people and their families who had been affected by sexual abuse. The report of the Working Group, entitled Assessment, therapy and counselling needs of children who have been sexually abused, and their families, was completed in November 2009.

365. The HSE established the Ferns IV National Steering Committee in November 2011 to implement the findings of the Ferns IV 2009 report (see above) and the HSE (2011c) report entitled National Review of Sexual Abuse Services for Children and Young People. The Ferns IV National Steering Committee, which represents all of the key stakeholders, has developed a national model for the development of sexual abuse services.

366. Both reports are consistent in promoting a national service model that:

- Incorporates all resources currently applied across sectors to sexual abuse services into a single national service that provides standardised, best practice models of service. The existing network of Centres will be built upon to create the new national service;
• Integrates and coordinates the six key components of sexual abuse services, which are:
  • Medical/forensic examination;
  • Child protection;
  • Garda investigation;
  • Assessment;
  • Therapy;
  • Court process;
• Delivers services through specialist regional Centres, which support regional clinical practitioner networks and provide outreach clinics as required.

367. Implementation of the national model is planned to commence in 2013. The voluntary organisation CARI provides child-centred therapy to children who have been sexually abused or for children under the age of 12 who are displaying sexualised behaviour. It also provides a hotline for professionals and parents seeking to refer a child to services. Services include support for non-abusing parents; a court-accompanying service for children, parents, carers or guardians; training for social workers, therapists and psychologists; a preventative education programme for children; and an advocacy service. In 2012, CARI received just under €400,000 to deliver these services.

368. The Family Support Agency (FSA), which will be incorporated into the new Child and Family Agency, provides counselling services for children who have been the victims of or witnesses to domestic violence in a number of centres around the country.

369. Provisions for children who are suspected or found to be victims of human trafficking are outlined in paragraphs 171-176 and 209-207.

370. The immediate and ongoing needs of separated children seeking asylum, relating to accommodation, medical and social needs as well as their application for refugee status, are the responsibility of the HSE in accordance with the Refugee Act 1996 and the Child Care Act 1991. Many of these children will have experienced gross trauma. The main responsibilities of the HSE are to decide as to whether it is in the best interests of the child to make an application for asylum and, if so, to support the child through the application process and to provide for the immediate and ongoing needs and welfare of the child through appropriate placement and links with health, psychological, social and educational services. A dedicated Separated Children Social Work Team has been established by the HSE in the Eastern Region.

371. To date, the vast majority of unaccompanied minors have presented to or been referred to the HSE in the Eastern Region. Referrals are received from either Immigration Authorities or the Office of the Refugee Applications Commissioner, and services are provided by the dedicated team based in Dublin. Assisting clients with the asylum process and appeals process as appropriate involves all members of the Social Work and Project Work Team. The majority of these young people are placed in voluntary care of the HSE under the Child Care Act 1991. The HSE service for separated children seeking asylum has undergone significant development since 2009 and is now recognised as an excellent service, with high standards of care and support for children.
V. Family environment and alternative care

A. Family environment and parental guidance in a manner consistent with the evolving capacities of the child

372. The Constitutional and legislative provisions relating to parental rights and responsibilities are set out in Ireland’s second report.20 Supports for parents and guardians in the conduct of their parental responsibilities are also identified in that report.21 As in 2005, the Government policy in relation to family support remains grounded in the belief that, in the vast majority of cases, children are most appropriately cared for by their family. The State will therefore intervene only to support parents or where parents have failed in their duties as governed by the relevant legislation. The Government focus in recent years has been on prevention and early intervention with families experiencing difficulties, with a view to supporting parents in their responsibilities and maintaining families.

373. The Family Support Agency (FSA) will become part of the new Child and Family Agency (CFA) in 2013. Prior to this, the FSA has provided a range of family support, mediation and counselling services. The Family Mediation Service (FMS) transferred from the FSA to the Department of Justice and Equality in November 2011. Between 2007 and 2010, the FMS operated 4 full-time and 12 part-time centres throughout the country, with up to 1,500 couples accessing it annually. The FSA’s support, promotion and development of the Family and Community Services Resource Centre Programme has expanded significantly, with the number of core funded centres increasing from 59 in 2003 to 107 in 2010 and a corresponding increase in funding from €7 million to €16 million. The FSA also administers the Scheme of Grants to voluntary organisations providing marriage, child and bereavement counselling services. This funding increased from €7 million in 2003 to €9.4 million in 2012.

374. The Prevention and Early Intervention Programme (PEIP) for Children has been implemented by the DCYA since 2008 to test innovative methods for improving outcomes for children and families. Funding amounting to €36 million has been provided by the Government and philanthropic partners, including The Atlantic Philanthropies. A key component of the PEIP has been a rigorous and ongoing monitoring and evaluation of the outcomes of undertaken activities and assessment of individual sites to determine which interventions work and how and where these can be employed most effectively in order to improve delivery of services and develop new policy. A new area-based approach to child poverty is being introduced in 2013, which will continue to build and expand on the PEIP initiative.

375. Ireland’s second report provided details of the Springboard Family Support projects funded by the HSE.22 These ongoing projects work intensively with children who are at risk of going into care or getting into trouble with their families. In 2010, there were 1,089 family referrals to these projects, comprising 1,307 parents and 1,651 children.

376. Ireland’s second report also provided details of the Teen Parents Support Initiative.23 This offers support to young parents aged 19 or less until their child is 2 years of age. Support is offered on topics such as health, relationships, parenting, childcare, accommodation, social welfare entitlements, education, training and any other areas about

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21 2005, CRC/C/IRL/2, Paragraphs 413-433.
which the young parent(s) may be concerned. In 2010, the initiative received €1.78 million in HSE funding and had 11 projects throughout the country, each based in an employing organisation from either the statutory or voluntary sector. It has a National Coordinator and a National Advisory Committee, which provides a forum for sharing information and inter-agency collaboration.

B. Parents’ common responsibilities and alternative care, assistance to parents and the provision of childcare services

377. Custody matters in the EU concerning jurisdiction and the recognition and enforcement of judgements in matrimonial matters and matters of parental responsibility are covered by Council Regulation (EC) No. 2201/2003 of 27 November 2003, which repealed Regulation (EC) No. 1347/2000. This new regulation, which is often referred to as Brussels II, came into effect on 1 March 2005 and governs the recognition across the EU of access, custody and guardianship decisions made in each Member State. In order to ensure equality for all children, the scope of this regulation extends to cover all decisions on parental responsibility, regardless of whether the parents are or were married, or whether the parties to the proceedings are or are not both biological parents of the child in question.

378. Maternity and parental leave provisions are outlined in paragraphs 296-298. Details of financial assistance to parents and families are included in paragraphs 533-539.

379. The Irish Government and the EU jointly funded the Equal Opportunities Childcare Programme (EOCP) in the period between 2000 and 2007. The aims of the programme were to maintain and increase the number of childcare facilities and places available to parents, introduce a coordinated approach to the delivery of childcare services and improve the quality of childcare available.

380. The EOCP operated under three sub-measures to enable it to meet its objectives. It provided capital funding to both community not-for-profit groups and commercial providers, and staffing supports to community groups in disadvantaged areas. In the region of €230 million in capital funding was spent under the programme for the development of childcare facilities, with almost 90% of the funding going to community not-for-profit services. The programme also provided support for quality improvement projects, including the funding of 33 City and County Childcare Committees (CCCs) and 7 National Voluntary Childcare Organisations. The creation of the CCCs was an important development under the programme, ensuring that the issue of childcare was prominently positioned in all discussions on local development.

381. In 2006, the National Childcare Investment Programme (NCIP) was introduced as a successor programme to the EOCP. The NCIP was fully funded by the State and aimed to continue the progress made by the EOCP. €185 million in capital funding was spent during the period between 2006 and 2011. In addition, the staffing support grants under the EOCP were replaced in 2008 by the Community Childcare Subvention Scheme (CCCS), which focused on reducing childcare costs for parents on low incomes.

382. During the period 2000-2011, approximately €415 million in capital funding was invested under the EOCP and NCIP. This investment is estimated to have created in the region of 65,000 additional full-time equivalent childcare places, with almost 40,000 of these places resulting from EOCP funding.

383. The Irish Government currently provides approximately €250 million annually to three support programmes that enable parents of preschool children to access quality and affordable early childhood care and education. These programmes – the free Preschool Year in Early Childhood Care and Education (ECCE) Programme, the Community
Childcare Subvention (CCS) Programme and the Childcare Education and Training Support (CETS) Programme – are implemented by the Department of Children and Youth Affairs.

384. The Free Preschool Year in Early Childhood Care and Education (ECCE) Programme was introduced in January 2010. It is a universal programme, providing a free preschool year to all eligible children in the year before commencing primary school and gives all children access to early education. Some 65,000 children (approximately 95% of children in the year before school) are availing of this free preschool provision, at an annual cost of €175 million.

385. The Community Childcare Subvention (CCS) Programme was introduced in September 2010 and enables community childcare services to provide quality childcare at reduced rates to disadvantaged and low-income working parents. Parents qualify as disadvantaged or low income on the basis of existing means-tested entitlements, such as the Social Welfare entitlement, Family Income Supplement, the GP visit card or the medical card. 25,000 children are currently being subvented by the programme, at an annual cost of over €40 million.

386. The Childcare Education and Training Support (CETS) Programme was also introduced in September 2010. Childcare services are contracted to provide a free childcare place to qualifying FÁS (Ireland’s National Training Authority) or VEC (Vocational Education Committee) trainees for the duration of their courses. Approximately 2,500 full-time equivalent childcare places were provided for under this programme in 2011, at a cost of over €20 million.

387. An Expert Advisory Group has been established to advise on the development of Ireland’s first-ever Early Years Strategy. The group brings together practice-based and academic experts in the areas of Early Years education, psychology, child development, health, social inclusion and service provision. It is expected that the forthcoming strategy will include measures to enhance the quality of early years care, education and childminding, improve educational outcomes, progress the objectives of the National Strategy to improve Literacy and Numeracy (2011), improve health and physical outcomes including responses to the findings of the Growing Up in Ireland study in relation to weight and obesity, examine targeted approaches for disadvantaged children, and increase positive parental engagement in early childhood care and education.

C. Separation from parents

388. This issue was dealt with comprehensively in Ireland’s first report and second report. The provisions detailed in these previous reports remain.

389. The HSE provides out-of-hours services in the greater Dublin area through the Crisis Intervention Service (CIS) and outside the greater Dublin area through the Emergency Place of Safety Service. The CIS operates in 10 Local Health Offices and provides an out-of-hours emergency social work service to young people in crisis. The service was established in 1992 and originally responded to young people between the ages of 12 and 18. Since 2005, the CIS has expanded to include all children up to the age of 18. In June 2009, the HSE established the Emergency Place of Safety Service, whereby Gardaí can access an appropriate place of safety for children and young people found to be at risk outside normal working hours under Section 12 of the Child Care Act 1991. The Emergency Place of Safety Service provides a standardised response across the country for children who can be appropriately placed in a family setting. This service applies outside

the Dublin, Kildare and Wicklow areas. Such services are available currently for these areas. Two pilot projects were commenced in 2011, in Cork and Donegal, to develop a model of out-of-hours social work provision. These pilots have been independently evaluated.

D. Family reunification

390. Ireland’s second report detailed the provision for family reunification under the Refugee Act 1996 (as amended). These provisions remain in place.

391. The number of asylum applications made by unaccompanied minors has continued to decrease from the high of 600 in 2001. The number of applications made by males and females aged less than 18 years is shown in Table 5.

Table 5
Number of applications for asylum by unaccompanied minors seeking asylum, 2006-2011

<table>
<thead>
<tr>
<th>Year</th>
<th>Males</th>
<th>Females</th>
<th>Total</th>
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<tbody>
<tr>
<td>2006</td>
<td>70</td>
<td>61</td>
<td>131</td>
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<tr>
<td>2007</td>
<td>39</td>
<td>55</td>
<td>94</td>
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<td>2008</td>
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<td>47</td>
<td>98</td>
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<tr>
<td>2009</td>
<td>28</td>
<td>28</td>
<td>56</td>
</tr>
<tr>
<td>2010</td>
<td>12</td>
<td>25</td>
<td>37</td>
</tr>
<tr>
<td>2011</td>
<td>17</td>
<td>9</td>
<td>26</td>
</tr>
<tr>
<td>Total</td>
<td>217</td>
<td>225</td>
<td>442</td>
</tr>
</tbody>
</table>


392. The Department of Justice and Equality does not have statistics regarding the number of unaccompanied minors in the State reunited with their families. It does not keep statistics specifically on the number of family reunification applications by minors, since the numbers involved are minute. Unaccompanied minors who arrive in Ireland are dealt with in accordance with the provisions of Section 8(5) of the Refugee Act 1996 (as amended), resulting in the majority of cases with the child being placed in the care of the HSE. Where an unaccompanied minor is placed in the care of the HSE, pursuant to the provisions of the Refugee Act 1996, the decision with regard to the making of an application pursuant to that Act (application for protection/asylum) rests with the HSE. In some instances, it may be decided by the HSE that it is not appropriate for the unaccompanied minor to make a claim for asylum and therefore such minors would never come to the attention of the Office of the Refugee Applications Commissioner (ORAC).

E. Recovery of maintenance

393. Since Ireland’s second report (2005), Ireland has implemented EU Regulation 4 of 2009 concerning cross-border recovery of maintenance within the European Union. The

regulation has been in operation since May 2011 and will help ensure that child maintenance can be recovered from parents in other EU jurisdictions.

394. Ireland has also participated in the negotiations concerning the Hague Convention on the International Recovery of Child Support and Other Forms of Family Maintenance. The Convention is expected to be ratified throughout the EU in late 2012 and will replace older conventions (in particular the New York Convention) with more straightforward procedures.

F. Children deprived of a family environment

395. Child protection and welfare in Ireland is predicated on the Child Care Act 1991. Under this Act, the HSE is required to promote the welfare of children who are not receiving adequate care and protection. The legislation also obliges the HSE to ensure that every child in care has both an allocated social worker and a written care plan. The HSE, through its National Service Plan, sets out annually the level of services to be provided on behalf of the State. Child protection and welfare services are primarily delivered by the HSE, with support services delivered through service-level agreements from the non-governmental sector. There has been improvement over recent years in the delivery of services, particularly in relation to the quality of services for children in residential and foster care. This is evidenced by mainly positive findings in HIQA inspection reports (see www.hiqa.ie).

396. However, it is widely acknowledged that child protection and welfare services require reorganisation and reform. A wide-ranging programme of reform has commenced and contains a number of critical elements, including:

• Continuing the major cultural change required for the delivery of child-centred, transparent, quality-assured, professionally reflective and accountable services to children and their families;

• Implementing consistent child protection procedures in line with the revised national guidelines entitled Children First: National Guidance for the Protection and Welfare of Children (DCYA, 2011);

• Continuing the reforms necessary to provide safer, more reliable and effective services for children in care;

• Continuing implementation of the Ryan Report (Commission to Inquire into Child Abuse, 2009).

397. This reform programme is in the context of the Government’s commitment to fundamentally reforming the delivery of child protection services by removing child protection and welfare from the HSE and creating a dedicated child protection and welfare agency, reforming the model of service delivery and improving accountability.

398. In 2012, for the first time, the HSE Vote (i.e. the budget voted by the Oireachtas for the health services) contained a dedicated subhead for Children and Family Services. This dedicated budgetary provision has brought greater transparency and control to budgetary management and will pave the way for the establishment of the new Child and Family Agency in 2013.

Children in care

399. Between 2007 and 2012, the number of children in care increased by almost 17%. A number of factors contributed to this increase, including the general rise in population, the growing awareness of the impact of long-term neglect and the impact on vulnerable parents
of the economic downturn. However, the rate of Irish children in State care remains low, at 5.4 per 1,000.

Table 6
Trend in number of children in care, 2007-2011

<table>
<thead>
<tr>
<th>Year</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>5,307</td>
<td>5,357</td>
<td>5,674</td>
<td>5,965</td>
<td>6,160</td>
</tr>
</tbody>
</table>

Table 7
Children in care by type of placement, April 2012

<table>
<thead>
<tr>
<th>Care setting</th>
<th>Number of children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster care</td>
<td>3,880</td>
</tr>
<tr>
<td>Foster care with relatives</td>
<td>1,781</td>
</tr>
<tr>
<td>Residential care</td>
<td>415</td>
</tr>
<tr>
<td>Other residential care placements</td>
<td>143</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>6,219</strong></td>
</tr>
</tbody>
</table>

Foster care

400. The majority (91%) of children in alternative care in Ireland are in foster care. When a child cannot live with his or her parents, either on a short- or long-term basis, the HSE will, in the first instance, seek a suitable relative or person known to the child to provide relative care. Relative carers go through assessment and approval in a similar way to general foster carers. In April 2012, 31% of children in foster care were placed with relatives. A small number of children in care are placed abroad with relatives living outside the country.

401. Section 4 of the Child Care (Amendment) Act 2007 was commenced in July 2007. The principal purpose of this Section of the Act is to provide that a foster parent or a relative who has had a child in their care for a continuous period of five years, the child having being placed with them by the HSE, may apply for a court order for increased autonomy in relation to the care of the child. The order gives such foster carers increased autonomy in relation to certain issues, including consenting to medical treatment, the issue of passports and other day-to-day care issues.

402. In 2009, the HSE conducted a National Audit of Foster Care Services, with the final report published in 2010. In June of that year, the HSE published the Action Plan to Implement the Recommendations in the National Audit of Foster Care Services. This included both a national action plan and four regional action plans. Implementation of the Action Plan has continued and been incorporated into the current Children and Family Services Reform Programme. The Government is supporting these operational improvements by the delivery of key structural reforms, an important component of which is the establishment of the new Child and Family Agency.

403. The Multidimensional Treatment Foster Care (MTFC) Programme, originally developed in the 1980s as an alternative to residential and group care placements for boys with severe and chronic criminal behaviour, has been adapted for and tested with children and adolescents with severe emotional and behavioural disorders, girls referred from juvenile justice for severe delinquency, and youths in regular State-supported foster care. In 2008, the HSE established a MTFC programme called “Time Wise Fostering” in partnership with the Daughters of Charity in North Dublin. This service is fully operational.
and successfully meeting its targets to provide care placements for children and adolescents with severe emotional and behavioural disorders as an alternative to detention. On average, there are 5-6 young people in placement at any one time.

Residential care

There are three primary forms of residential care.

Children’s Residential Centres are found in domestic homes in housing estates on the outskirts of towns and villages. The centres typically have 2-6 children, usually in their teens. They attend local schools and take part in local sporting and community activities. These residential centres are inspected by HIQA against the National Standards for Children’s Residential Centres, with inspection reports published on an anonymised basis. It is the policy and practice of the HSE to place children aged 12 years or less in residential care only for very exceptional reasons.

There are two National High Support Units in Ireland with a total of 16 places. High Support Units offer a residential service to children and young people who are in need of specialised targeted intervention and are “open” in that the young person is not detained. High Support differs from ordinary residential care in that the units offer higher staff ratios and on-site education as well as specialised input, such as psychology services. High Support Units are inspected against the National Standards for Children’s Residential Centres by HIQA, with inspection reports published on an anonymised basis.

Special care involves the secure detention of a child, for his or her own welfare and protection, in a Special Care Unit with on-site educational and therapeutic supports. As with High Support, Special Care Units differ from ordinary residential care in that the units offer higher staff ratios, on-site education and specialised input. The detention of a child in a Special Care Unit by order of the High Court is only considered as a last resort and durations of detention are kept as short as possible. There are three designated Special Care Units in the country, which are operated by the HSE under a single national governance arrangement.

The Child Care (Amendment) Act 2011 creates a statutory framework for the High Court to deal with special care cases rather than employing its inherent jurisdiction. Work is currently underway to commence the Act. Special Care Units are currently inspected by HIQA on an annual basis and the inspection reports are published. The DCYA is currently developing regulations to commence the Health Act 2007, as amended by the Child Care (Amendment) Act 2011, to authorise the HIQA to register these units. Admissions to Special Care and length of stay have varied over the years and there are presently three Special Care Units, providing placements for a total of 17 young people.

The HSE plans to increase the number of Special Care places available during the period 2011-2014 and capital projects and planning are at an advanced stage for the provision of three additional units.

Child abuse inquiries

The past decade has seen four significant inquiries into child abuse in Ireland, all of which have been published. These are the Ferns Inquiry Report (2005), the Commission of Investigation – Dublin Archdiocese (2009), the Commission to Inquire into Child Abuse (2009) and the Report of Commission of Investigation into Catholic Diocese of Cloyne (2011). Each of these inquiries highlighted difficulties and weaknesses in dealing with child abuse, whether it is perpetrated by clerics, staff, family members or non-family members. A wide range of responses to these inquiries has been undertaken or initiated, reflecting a number of common themes across the investigations, including the need to strengthen legislation in relation to child protection, improve reporting mechanisms and responses to
child abuse allegations, strengthen and improve children and family service delivery, redress and support measures for those who have been abused by Church or State personnel, and improve measures for listening to children.

411. The Ferns Inquiry Report (2005) investigated allegations of clerical sexual abuse in the Irish Catholic diocese of Ferns. It identified more than 100 allegations of child sexual abuse made between 1962 and 2002 against 21 priests operating under the aegis of the diocese. The report examined the response of the Church authorities in the diocese of Ferns to allegations of child sexual abuse perpetrated by priests operating in the diocese over the 40 years. The then Government accepted all of the recommendations of the report, many of which related to the provision of services. Accordingly, from a child protection and welfare perspective, these were taken forward by the HSE, given its statutory responsibilities in this area. The recommendations include the establishment of five working groups; an audit of Catholic Church child protection policies, procedures and practices; a separate ongoing audit of Religious Orders; a nationwide publicity campaign in relation to child sexual abuse focusing on parenting and the importance of listening to children; contributions to the review of compliance with the Children First: National Guidelines; the provision of additional counselling services for victims of child abuse; commitment to the implementation and funding of the recommendations of the Report on Treatment Services for Persons who Have Exhibited Sexually Harmful Behaviour; and the provision of additional guidance for staff on both this and intervening in abuse by non-family members as part of the recently issued Child Protection and Welfare Practice Handbook (HSE, 2011b).

412. The report of the Commission of Investigation – Dublin Archdiocese (known as the Murphy Commission) was published, with some redactions, in November 2009. The aim of this Commission was to report on the handling, by Church and State authorities, of a representative sample of allegations and suspicions of child sexual abuse against clerics operating under the aegis of the Archdiocese of Dublin during the period from 1975 to 2004. The report showed that clerical child sexual abuse was tolerated and covered up by the Archdiocese of Dublin and other Church authorities. The focus of those authorities was on the avoidance of scandal for the Church and the preservation of the good name, status and assets of the institution, rather than on the welfare of children. The report raised a number of legal and operational issues for the State, including the non-pursuit of Garda investigations into some perpetrators of abuse, the legal authority of the HSE to act in cases of third party or extra-familial abuse, and how information on perpetrators is recorded by the statutory authorities.

413. The Report of the Commission to Inquire into Child Abuse (known as the Ryan Report), published in May 2009, reported on the treatment of children in various residential institutions, including industrial schools, run by various Church organisations and the State between 1932 and 2000. The report, which was the result of a decade-long inquiry, established that child abuse of all types in such institutions had been systemic. It served to highlight the need to strengthen the organisation and delivery of child protection and welfare services nationally. Following the publication of the Ryan Report, a detailed Implementation Plan was prepared and published by the OMCYA in July 2009. The Plan sets out a series of 99 actions designed to address the effects of past abuse, reform and strengthen service provision, and ensure that children and young people have a stronger voice. Of the 99 actions detailed in the Plan, 37 were referred to as “ongoing”, while the remaining actions had a specific timescale. Implementation of the Plan is being overseen by a high-level group chaired by the Minister for Children and Youth Affairs. The group includes representatives from the DCYA, HSE, HIQA, IYJS, DES, An Garda Síochána and the Children’s Rights Alliance.
By October 2012, 59 of the actions in the Implementation Plan had been completed, 13 are complete with ongoing implementation and 27 are not yet complete. One of the most significant of these actions has been the allocation of additional resources to HSE Children and Family Services, with 200 additional social workers having been recruited in 2010, in addition to the backfilling of 249 social work posts during the year, with a further 60 social workers recruited in 2011. The next phase of implementation will include a particular focus on the fundamental reorganisation of the HSE Children and Family Services into the new Child and Family Agency. In addition, the Minister for Children and Youth Affairs will be giving particular priority to progressing a series of actions relating to Children First, including the preparation of legislation to underpin the operation of the national guidance, and progressing the National Implementation Framework for Children First across all government departments, agencies and sectors that have contact with children and young people.

The range of measures described above forms part of a strong and necessary Government response to the inquiries into child abuse. The HSE’s National Director of Children and Family Services is also engaging directly with the National Board for Safeguarding Children in the Catholic Church on a programme of action designed to ensure that the Catholic Church is responding properly and comprehensively to all child protection concerns.

In 2009, the HSE established an independent inquiry into a specific, well-publicised case in Roscommon in which the presiding Judge felt there had been failures on the part of the HSE and Western Health Board, and in October 2010 the Roscommon Child Care Case: Report of the Inquiry Team to the Health Service Executive was published, with a series of recommendations. A detailed action plan was put in place to implement the recommendations from late 2010 onwards. One of the key areas of work to develop from the recommendations has been an audit of neglect cases. This audit has now been completed by the HSE in Roscommon, Waterford and Dublin South-East, and a composite report will be produced.

The Commission of Investigation into Catholic Diocese of Cloyne examined all complaints, allegations, concerns and suspicions of child sexual abuse by relevant clerics made to the diocesan and other Catholic Church authorities, as well as public and State authorities during the period from 1 January 1996 to 1 February 2009. Arising from the publication of the Report of Commission in July 2011, the Government committed to a series of measures designed to significantly strengthen the existing legislative, policy and practice framework in the area of child protection. The Minister for Children and Youth Affairs is working closely with the Minister for Justice and Equality on this agenda and significant progress is being made in this regard. Key aspects of progress to date include:

- The launch in 2011 of the revised edition of Children First (DCYA, 2011) and the HSE Child Protection and Welfare Practice Handbook (HSE, 2011b) for use by all social workers and other relevant practitioners;
- The drafting of Heads of Bill to give statutory expression to the Children First national guidance;
- The expansion of HIQA’s remit to include oversight of the HSE’s child protection services;
- The National Vetting Bureau (Children and Vulnerable Persons) Act 2012 puts the vetting of employees on a statutory footing and also allows for the sharing of “soft” information as part of the vetting process;
- The commencement of the Criminal Justice (Withholding Information on Crimes against Children and Vulnerable Adults) Act 2012.
418. In addition to the above, the *Report of the Independent Child Death Review Group* (ICDRG) was published in June 2012. This Review Group examined the number and causes of deaths of children in the care of the HSE, in receipt of HSE aftercare services or known to the HSE’s child protection services between 1 January 2000 and 30 April 2010. In total over this 10-year period, 196 children and young people died of natural causes (84 cases) and unnatural causes (112 cases), broken down as follows:

- Children in care: 36 deaths;
- Children and young people in aftercare: 32 deaths;
- Children and young people known to the HSE: 128 deaths.

419. The Review Group carried out a detailed examination of the 112 cases where deaths were from unnatural causes, including accidental deaths due to drowning, asphyxiation, falls and traffic accidents, drug-related deaths, deaths in house fires, suicides, deaths due to head injuries where the cause of the injury was unknown, death due to unknown causes, and unlawful killings. In relation to the latter category, two children in the care of the HSE, one young person in aftercare and 13 individuals known to the child protection services were found to have been unlawfully killed.

420. The ICDRG report highlighted system failings in the child protection services in Ireland, including:

- Poor risk assessment;
- Poor coordination between services;
- Poor flow of information;
- Limited access to specialist assessment and therapeutic services;
- Limited inter-agency work for children and families with complex needs;
- A lack of early intervention and family support services responding proportionately to the needs of children at risk and families in crisis.

421. The acknowledged failures of the child protection system in relation to these children are to be addressed primarily through internal reforms within child and family services; improving quality consistency of practice supports to professional induction training; supervision; the introduction of standardised business processes and a model of service delivery; and the introduction of a National Child Care Information System – all through the reform package underway, in particular the establishment of the new Child and Family Agency, as well as the establishment of a child death review structure, the extension of out-of-hours services and the strengthening of legislation in relation to aftercare.

422. In 2006, the Government appointed two legal experts as Special Rapporteurs on Child Protection for a period of three years. In 2010, one of these rapporteurs, an expert in child and family law, was re-appointed by the previous Government as sole Rapporteur to serve for a further period of three years. The functions of the Rapporteur are:

- To review and audit legal developments for the protection of children;
- To assess what impact, if any, litigation in national and international courts will have on child protection;
- To prepare an annual report outlining the results of the previous year’s work. This report is submitted to the Oireachtas for consideration and is published.
Aftercare

423. The majority of young people in care are placed in foster care and remain in their placement after they reach the age of 18. Young people leaving residential care usually move into private rented accommodation or occasionally into supported lodgings accommodation or transitional accommodation provided by voluntary organisations in the area.

424. In 2010, a HSE Advisory Group was established to develop a national policy on aftercare. The first function of the group was to carry out an audit of current aftercare service provision in 2011. It found that aftercare provision is well established in line with legislation throughout the HSE for those young people who remain in full-time education or training. However, services, including the level of human and financial resources, were uneven throughout the HSE.

425. After a number of consultations with stakeholders, the Leaving and Aftercare Services: National Policy and Procedure was approved in April 2011 (HSE, 2011a). This will provide a consistent approach to the provision of aftercare services and is being implemented nationally and monitored by the HSE’s Aftercare Implementation Group. Most recent statistics show that just over 1,100 young adults were in receipt of aftercare. This represents a significant improvement over the 847 young adults who were in receipt of aftercare services in 2009.

426. Eligibility for aftercare services is determined on the basis of Section 45 of the Child Care Act, which outlines the nature and extent of services that may be delivered when a young person leaves the care of the HSE. All young people who have had a care history with the HSE are entitled to an aftercare service. The extent of what is provided is based on assessment of need, age and the length of time the young person was in care. The service includes children in the separated children seeking asylum service.

Additional measures

427. The establishment of a separate Child and Family Agency is currently being advanced to provide a stronger focus on child and family services and to integrate a number of existing agencies to give broader focus to family support, prevention and early intervention, and safeguarding and protection work in respect of certain children.

G. Periodic review of placement

428. Ireland’s second report outlined the legislative provisions in this area. These provisions remain.

Social Services Inspectorate

429. The role of the Social Services Inspectorate (SSI) is outlined in Ireland’s second report.

430. The SSI was placed on a statutory footing under the Health Act 2007, wherein it is referred to as the Office of the Chief Inspector. The remit for children’s services includes inspection of statutory children’s Residential Centres, Special Care Units and foster care services. The remit for inspection of the Children Detention Schools by the HIQA comes

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26 2005, CRC/C/IRL/2, Paragraphs 465-466.
under Sections 85 and 86 of the Children Act 2001. Since 2012, the remit has been extended to include child protection and welfare services.

**Children Acts Advisory Board**

431. The Children Acts Advisory Board (CAAB) was established under the Child Care (Amendment) Act 2007. It replaced the former Special Residential Services Board (see Ireland’s second report)\(^{28}\). This Act broadened the remit of the CAAB to allow it to become an enhanced advisory and enabling body whose functions included providing advice to the Ministers for Health and Children, and for Justice and Equality on policy issues relating to the coordinated delivery of services to at-risk children/young people, specifically under the Child Care Act 1991 and the Children Act 2001.

432. The CAAB was dissolved with effect from 8 September 2011 under the Child Care (Amendment) Act 2011. The functions vested in the Minister for Health under the Child Care Acts 1991 to 2011 were transferred to the Minister for Children and Youth Affairs with effect from 1 October 2011.

**Mental health**

433. Ireland’s second report outlined the legislative provisions in this area under the Mental Health Act 2001 as they pertain to children over 16 years of age.\(^{29}\)

434. The Mental Health Act was fully commenced in August 2006. The Mental Health Act 2001 is currently under review. The review has been carried out in two phases. Phase 1 involved the establishment of a Steering Group to identify key elements of the Act to be further identified. The interim report of the Steering Group was published in June 2012 and is available at [www.dohc.ie/publications/int_report_sg_reviewMHA.html](http://www.dohc.ie/publications/int_report_sg_reviewMHA.html). The Interim Review made a number of recommendations in relation to children, which include:

- Provisions relating to children should be included in a standalone Part of the Act and any provision of the Child Care Act 1991 which apply should be expressly included rather than cross-referenced;
- Children aged 16 or 17 should be presumed to have capacity to consent/refuse mental healthcare and treatment;
- A child should be defined as a person under 18 and thus brought into line with the Children Act 2001.

435. The second and substantive phase of the review involved the establishment of an Expert Group. Its members are currently continuing their deliberations and are expected to produce their report in Quarter 2, 2013.

**H. Adoption, national and intercountry**

436. The DCYA is responsible for matters relating to the formulation of adoption legislation, including secondary legislation, and public policy issues on adoption. The Adoption Authority of Ireland (AAI) was established on 1 November 2010 under the Adoption Act 2010. The AAI is the statutory body charged with implementing the Adoption Act 2010 and is the central authority in Ireland for intercountry adoption. The

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\(^{28}\) 2005, CRC/C/IRL/2, Paragraphs 469-470.

\(^{29}\) 2005, CRC/C/IRL/2, Paragraphs 471-472.
AAI has responsibility for the direct operational implementation of legislation and government policy.

437. The Adoption Act 2010 commenced on 1 November 2010, coinciding with Ireland’s ratification of the Hague Convention on Protection of Children and Cooperation in respect of Intercountry Adoption. This legislation, which incorporates the provisions of the Hague Convention, is designed to provide a framework to ensure that appropriate adoption procedures have been followed and that all adoptions are effected in the best interests of the child. Future intercountry adoption arrangements will be governed by the terms of the Adoption Act 2010. With effect from 1 November 2010, intercountry adoptions can be effected only with countries that have ratified the Hague Convention or with which Ireland has a bilateral agreement.

438. The AAI is working to establish administrative arrangements with other Hague countries in relation to intercountry adoptions, as provided for under Section 72 of the Adoption Act. The AAI maintains contact with a number of other jurisdictions in order to make contact with their central authorities and advise as to Irish processes and procedures, assess the need for additional administrative arrangements or agreements, and gather as much information as possible of relevance to prospective adopters from those countries. The visits also provide opportunities to streamline processes on both sides and to receive up-to-date information for prospective adopters on developments in these countries.

439. The negotiation of bilateral agreements on intercountry adoption is primarily the responsibility of the AAI. As the Hague Convention is designed to ensure a minimum set of standards in intercountry adoption, the AAI has indicated that their first priority is to reach agreements on arrangements with other Hague countries.

440. The negotiation of bilateral agreements on intercountry adoption with States that have not ratified the Hague Convention is governed by Section 73 of the Adoption Act 2010, which states that “the Authority, with the prior consent of the Minister, may enter into discussions with any non-contracting State concerning the possibility of the Government entering into a bilateral agreement with that State”. Any bilateral arrangements that might be entered into would be required by law to meet the minimum standards set out in the Hague Convention.

I. Illicit transfer and non-return

441. The Child Abduction and Enforcement of Custody Orders Act 1991 deals with the abduction of children under the age of 16 across international frontiers in defiance of a court order or against the wishes of a parent or guardian with custody rights. The Act deals primarily with child abduction by one parent against the wishes of another. The Act gives the force of law in Ireland to two international conventions: the Hague Convention on the Civil Aspects of International Child Abduction and the Luxembourg Convention on Recognition and Enforcement of Decisions Concerning Custody of Children and on Restoration of Custody of Children.

442. Ireland has also recently ratified the 1996 Hague Convention on Jurisdiction, Applicable Law, Recognition, Enforcement and Cooperation in respect of Parental Responsibility and Measures for the Protection of Children. This Convention is broad in scope and supplements the provisions of the 1980 Hague Convention. The Protection of Children (Hague Convention) Act 2000 gives force of law within the State to the 1996 Convention and was commenced on 1 January 2011. Ireland was among the first States to legislate for the Convention, although ratification by EU Member States was delayed pending resolution of issues of EU competence and authorisation.
443. In addition to the above-mentioned Conventions, custody matters in the EU are covered by Brussels II, which came into effect on 1 March 2005 (see para. 377).

444. All these instruments required the establishment of a Central Authority in contracting States. The Minister for Justice and Equality is designated as the Central Authority in Ireland. The Conventions and the EC Regulations have proved to be of substantial benefit in Ireland.

445. When a foreign application for the return of a child is received in Ireland, it is generally referred by the Central Authority to the Legal Aid Board for relevant proceedings to be taken before the High Court. Foreign applicants under all these Conventions and EC Regulations are entitled to free legal aid in Ireland, irrespective of means, and the Central Authority itself imposes no charge for its services. Table 8 shows the number of children abducted into and out of Ireland during the period 2006-2010.

Table 8
Number of children abducted from and to Ireland (new applications), 2006-2010

<table>
<thead>
<tr>
<th>Year</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children abducted into Ireland</td>
<td>72</td>
<td>60</td>
<td>70</td>
<td>61</td>
<td>64</td>
</tr>
<tr>
<td>Children abducted from Ireland</td>
<td>39</td>
<td>39</td>
<td>71</td>
<td>75</td>
<td>76</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>111</strong></td>
<td><strong>99</strong></td>
<td><strong>141</strong></td>
<td><strong>136</strong></td>
<td><strong>140</strong></td>
</tr>
</tbody>
</table>

446. Section 37 of the Child Abduction and Enforcement of Custody Orders Act 1991 gives the Gardaí power to detain a child whom they reasonably suspect is being removed from the State in breach of any custody order, or while proceedings in relation to custody orders are pending or about to be made.

447. In May 2012, the Gardaí Síochána launched Child Rescue Ireland (CRI) Alert. This is a multi-agency alert system that seeks the assistance of the public in tracing abducted children. A CRI Alert will only be initiated when there is reasonable belief that an immediate and serious risk to the health and welfare of the abducted child exists. The Garda Press and Public Relations Office will provide relevant information to the media and information broadcasters in order to alert the public and seek their help.

J. Abuse and neglect, including physical and psychological recovery and social integration

448. Measures undertaken in this area are outlined in other chapters of this report and include the revision of the Children First: National Guidance in 2011 and forthcoming legislation to put these guidelines on a statutory basis.

449. The HSE National Child Care Information System project is progressing and is now at procurement stage. This will see the creation of a central database that will hold details of all children in care, as well as those about whom social workers have concerns. This has been a complex project from scoping to commissioning stage. Formal approval for the award of the contract has now been received.
VI. Disability, basic health and welfare

A. Children with disabilities

450. Ireland’s second report elaborated comprehensively on the provisions for children with disabilities.30 The following provides an update on provisions in this area.

Data on children with disabilities

451. In 2011, the Census of Population recorded 66,437 children with disabilities. This represents 5.8% of the total child population in Ireland.

452. The National Physical and Sensory Disability Database reported upon in Ireland’s second report31 is now fully operational and provides a wide range of data on the number of adults and children with disabilities. In 2007, 8,373 children were recorded on the database. In 2011, this number had decreased to 8,034. In both years, children accounted for just over 30% of all those included on the database.

453. The National Intellectual Disability Database (see Ireland’s second report)32 indicates that there were 7,802 children registered as having an intellectual disability in 2007. By 2011, this number had increased to 8,852.

Multi Annual Investment Programme, 2005-2008

454. In the 2008 budget, €9.8 million was provided to create 140 additional multidisciplinary team posts in order to provide assessment and ongoing intervention services to children with disabilities. An additional €20 million was provided in Budget 2009 for health and education services for children with special needs, €10 million of which provided 125 additional therapy posts in the HSE targeted at children of school-going age.

Office for Disability and Mental Health, 2008-2012

455. In 2006, a cross-sectoral team was established to provide for a joint approach by the Department of Health and the Department of Education and Skills to the implementation of the Disability Act 2005 and the Education for Persons with Special Educational Needs (EPSEN) Act 2004. The team includes senior officials from both Departments, as well as representatives from the HSE and the National Council for Special Education. The Office for Disability and Mental Health was established in 2008 with the aim of improving the way in which public services respond to the needs of people with disabilities and mental health issues, including children, by fostering greater collaboration between relevant government departments. Its remit included facilitating the delivery of integrated health and education support services for children with special needs. It was also charged with progressing implementation of Part 2 of the Disability Act 2005, which provides disabled individuals with an entitlement to an independent assessment of need and a statement of proposed services to be provided, and allows them to pursue a complaint and, if necessary, make an appeal to the independent Disability Appeals Officer. Part 2 of the Act was commenced on 1 June 2007 in respect of children under the age of 5 years. It had been intended to have both the Disability Act 2005 and the EPSEN Act 2004 fully implemented during 2010 for children and young people aged 5-18. However, in 2008 the then

30 2005, CRC/C/IRL/2, Paragraphs 480-527.
31 2005, CRC/C/IRL/2, Paragraphs 511-512.
Government decided, in light of financial circumstances, to defer further implementation of both Acts. Notwithstanding this, the cross-sectoral team continues to meet to address issues of mutual concern for children with disabilities.

**HSE Progressing Disability Services for Children and Young People Programme – ongoing since 2010**

456. In 2008, a National Reference Group on Multidisciplinary Disability Services for Children aged 5-18 was convened to report in an advisory capacity to the HSE within the context of implementing the EPSEN and Disability Acts. This report, submitted in December 2009, recommends a realignment of existing statutory and non-statutory resources to achieve a more integrated model of care and support for school-age children with disabilities.

457. In response, the HSE established a programme in 2010 on Progressing Disability Services for Children and Young People aged up to 18 years, supported by a National Coordinating Group with representation from the Departments of Health, and Education and Skills. The programme, which is ongoing at present, aims to address a number of key issues in relation to children’s disability services, including inequity of access to services due to inconsistent development of these services across the country. The overall vision is to provide one clear pathway to services for all children with disabilities, according to need, with the health and education sectors collaborating to support children to achieve their full potential.

**HSE Autism Review**

458. The HSE published the *National Review of Autism Services: Past, Present and Way Forward* in 2012. It recommends a move to a more consistent model of service delivery in line with the mainstreaming policy of equal access for people with disabilities to appropriate services. It also endorses the policy framework set out in the *Report of the National Reference Group on Multidisciplinary Disability Services for Children aged 5-18* (HSE, 2009). Services for children and young people with autism up to the age of 18 will be re-configured as part of the Progressing Disability Services for Children and Young People (0-18 years) Programme.

**Report of the Working Group on Respite/Residential Care with Host Families in Community Settings**

459. This HSE Working Group carried out a national overview of models of respite and residential care with host families in community settings to determine the viability and future development of these models of service delivery for people with intellectual disabilities. The group found that approximately 263 children with disabilities used this service in 2011. The report was published in 2012 and makes a number of recommendations in relation to the staffing, financing and governance of this type of care (HSE, 2012c).

**National Housing Strategy for People with Disabilities**

460. The National Housing Strategy for People with a Disability, 2011-2016 was launched in October 2011. It was developed by the Department of the Environment, Community and Local Government, in collaboration with the Department of Health. It provides that people with disabilities and/or a mental health issue are entitled to an assessment of need for local authority housing. Among the key actions included in this policy is a commitment to ensuring that current and future needs of children with disabilities are made central considerations during the process of allocating housing to
families. An Implementation Framework Plan was launched in July 2012 and sets out a range of priority actions in support of the strategy.

**Registration and Inspection of Residential Services for People with Disabilities**

461. Standards for an independent inspection system in relation to residential services for people with disabilities, both children and adults, were originally published by the Health Information and Quality Authority (HIQA) in 2009 and a revised draft of these standards was the subject of public consultation in late 2012. The standards provide a national framework for safe quality services aimed at people with disabilities in residential settings. The current Programme for Government 2011-2016 includes a commitment to putting these standards on a statutory footing and discussions are ongoing between the Department of Health and HIQA to progress this commitment, with a view to introducing the standards and appropriate regulations in mid-2013.

**Transport Access for All**

462. The Department of Transport, Tourism and Sport is working towards improving transport facilities for people with mobility and sensory impairments (see Ireland’s second report). The Department’s Sectoral Plan under the Disability Act 2005, *Transport Access for All*, was first published in 2006 and was later reviewed in 2008. A further review of the plan commenced with a public consultation process in 2011, with an updated plan expected during 2012.

463. *Transport Access for All*, which was developed in consultation with key stakeholders, sets out a series of policy objectives and targets for all modes of public transport to make them accessible to people with mobility, sensory and cognitive impairments. It also covers parking facilities for motorists with disabilities and includes a section on roads policy. It acknowledges the Convention on the Rights of Persons with Disabilities, and the Centre for Excellence in Universal Design established under the Disability Act 2005.

464. To date, there has been a significant increase in the numbers of accessible vehicles in both urban and rural areas, along with improved access to much of the public transport infrastructure. Changes have occurred in the manner in which transport services are delivered and in the research and consultation necessary to provide the groundwork for further accessibility measures. Many targets have already been achieved and work on outstanding targets is ongoing.

**B. Traveller health**

465. According to the 2011 Census of Population, there are 14,245 Traveller children in Ireland. This marks an increase of 30.3% on the 2006 figure of 10,929.

466. In 2010, the Department of Health published the *All-Ireland Traveller Health Study: Our Geels*, the first such study conducted since 1987 (All-Ireland Traveller Health Study Team, 2010). This study provides information regarding mothers’ perceptions of their children’s health for 5, 9 and 14 year-olds. The vast majority of children (in excess of 90%) were reported to be in good health, although the rate among 9-year-olds was slightly lower that that reported in the *Growing Up in Ireland* study for the general population (see paras. 491-492).
467. The reported health conditions of Traveller children were on a par with those of the general population, and better in some cases. However, a number of health issues for Traveller children were identified. Breastfeeding rates among young Traveller mothers are very low, a higher proportion of babies are underweight at birth and a considerably higher proportion of Traveller children did not receive required medical attention for a problem compared to other socio-economic groups in the general population. Reported consumption of fruit and vegetables was higher among Traveller children aged 9, although Traveller children were also more likely to have salt added to their food.

468. As part of the All-Ireland Traveller Health Study, a follow-up study on Traveller children born between 14 October 2009 and 13 October 2010 was also undertaken (All-Ireland Traveller Health Study Team, 2011). This study revealed that the infant mortality rate among Travellers in the period 2000-2009 was 12 per 1,000, almost four times the rate among the general population; only 2% of Traveller mothers initiated breastfeeding, compared to 48% of mothers in the Growing Up in Ireland study; and rates of immunisation were considerably lower among Traveller children. The discouragement to breastfeed, until negative test results for galactosaemia have been received, has been identified as a barrier to breastfeeding for Traveller women in the report *An assessment of the barriers to breastfeeding and the service needs of families and communities in Ireland with low breastfeeding rates* (Doyle et al., 2009). The need for improved reporting systems and extra supports to initiate and maintain lactation have also been identified.

469. The National Intercultural Health Strategy, 2007-2012 recognises Travellers as Ireland’s most long-standing cultural minority group and one that is at greater risk of poor health. Further, it recognises that Traveller children are at particular risk. This applies equally to Roma children who are an especially vulnerable group, and considerable work has taken place around this area. HSE National Social Inclusion was able to facilitate the appointment of a Roma Outreach worker, with a remit around linking families into health services. A series of seminars was co-hosted by the HSE and Pavee Point on issues faced by this group, as well as by service providers in responding to their needs. Issues of child protection were the focus of one seminar and a report is due to be signed off imminently in relation to this. There is ongoing inter-agency work on advancing care priorities of vulnerable children, including Traveller and Roma children. Establishment of a Children First committee within the Social Inclusion Care group will incorporate Traveller representation, which will facilitate attention to the specific needs of Traveller children.

C. Survival and development

470. Measures to promote the survival and development of the child were reported on in Ireland’s second report\(^{34}\) and summarised in Chapter 2 of this report. The following section reports on additional measures and progress.

Immunisation

471. The National Immunisation Office (NIO) was established in 2005 to coordinate the implementation of standardised high-quality immunisation programmes in Ireland. Immunisation against a wide range of diseases is provided free of charge to all children. A schedule of immunisation begins at birth and extends to 13 months, with “boosters” for specific diseases being provided for preschool children.

\(^{34}\) 2005, CRC/C/IRL/2, Paragraphs 533-539.
472. Immunisation rates are generally improving in Ireland. In 2011, the national uptake rates for children at 12 months of age were 90% for D₃, P₃, T₃, Hib₁, Polio₃, HepB₃, MenC₂ and PCV₂, and 85% (based on available data) for BCG.

473. In 2011, the national uptake rates of D₃, P₃, T₃, Hib, Polio₃ and HepB₃ for children at 24 months of age reached the target of 95%. The national uptake rates at 24 months of age were 92% for MMR₁, 90% for PCV₃, 88% for Hib₈ and 84% for MenC₇. There was a dramatic decline in MenC₃ uptake and a decline in Hib₈ in the Quarter 3 of 2010, following the introduction of the new childhood immunisation schedule. Under the new immunisation schedule, the third dose of MenC vaccine and Hib booster vaccine are now recommended at 13 months of age, suggesting that parents are less likely to get the necessary vaccines for their children at 13 months of age.

474. The Human Papillomavirus (HPV) vaccine protects girls from developing cervical cancer when they are adults and is provided free of charge by the HSE. The national HPV vaccination programme has been extended since September 2011 and all girls in the first year of second-level schools are now targeted in a school-based programme to ensure high vaccine uptake. There was also a catch-up programme for all girls in their sixth year of second-level school in September 2011. This will be repeated in September 2012 and 2013, and will result in all unvaccinated girls in the Senior Cycle of second-level schools being offered HPV vaccine.

Breastfeeding

475. In 2005, the Department of Health and Children published Breastfeeding in Ireland: A Five-year Strategic Action Plan, and a National Breastfeeding Strategy Implementation Committee was appointed in 2007. The Action Plan contains five high-level goals and includes measures to improve standards and services for expectant and newly breastfeeding mothers, implement health service policies and provide training programmes for healthcare professionals, educate school children on breastfeeding, regulate the marketing of breast milk substitutes, provide community supports for mothers to encourage longer-term breastfeeding, and improve facilities and working conditions for breastfeeding mothers. The Action Plan set a target of increasing the rate of breastfeeding by 2% per year and by 4% per year among women from lower socio-economic groups, who had a lower rate of breastfeeding. It also set targets in relation to the appointment of regional breastfeeding coordinators and the development of a child health information system, which have not been achieved to date. The number of designated Baby-Friendly Hospitals in Ireland has increased and in 2011, 41.76% of births occurred in such hospitals. In 2012, the HSE adopted an Infant Feeding Policy for Maternity and Neonatal Units, based on the 10 Steps of the WHO/UNICEF Baby-Friendly Hospital Initiative.

476. Overall, breastfeeding rates (including exclusive breastfeeding and combined feeding) are increasing in Ireland. In 2005, 47.5% of babies were breastfed on discharge from hospital. This had increased to 50.9% by 2008 and to 55.2% by 2011. Despite this, information from the Growing Up in Ireland study indicates that Ireland has the lowest breastfeeding rate in Europe. Although 55% of new mothers in Ireland are breastfeeding to some extent, only 38% continue to do so after one month and less than 15% continue up to 6 months. Socio-economic differentials, however, still apply.

477. In 2007, the HSE launched the website www.breastfeeding.ie to provide expectant and breastfeeding mothers with information on breastfeeding and local support services. The HSE has also produced a number of guides for mothers on breastfeeding, including a guide on ways to continue breastfeeding after a return to work. Entitlement to “lactation breaks” following return to work after 26 weeks’ maternity leave has been provided for civil service workers. This is the only sector of the workforce to which this applies. Ireland
has only partially adopted the International Code of Marketing of Breastmilk Substitutes (and subsequent World Health Assembly resolutions) into national legislation.

D. Health and health services, particularly primary care

478. The primary care strategy entitled A New Direction was published by the Department of Health and Children in 2001 and remains the main strategy in relation to primary care in Ireland. The key objective of the strategy is to develop services in the community that will give individuals direct access to integrated multidisciplinary teams consisting of general practitioners, nurses, physiotherapists, occupational therapists and other medical staff. Additional services, such as speech and language therapy, dietetic and podiatry services will be provided on a network basis. The implementation of the strategy is ongoing, with the process expected to be fully implemented in coming years. The continued development of primary care teams and the provision of GP out-of-hours service are fundamental to providing individuals easier access to care closer to their homes. The number of teams was 425 at the end of 2011, with a plan to have 489 in place by the end of 2012.

479. The Programme for Government 2011-2016 provides for significant strengthening of primary care services to deliver Universal Primary Care (UPC), with the removal of cost as a barrier to access for patients. The Government has also given its approval for a policy of phased introductions of free GP care, in line with the Programme for Government 2011-2016. It is expected that the first phase in the Programme will provide for the extension of access to GP services without fees to people with illnesses or disabilities, to be prescribed by regulations under new legislation currently being prepared by the Department of Health.

480. In June 2011, the Government launched an initiative aimed at producing a new policy framework that will set out a long-term vision for the health and well-being of the population. Work on this policy framework is ongoing. The final policy document, Your Health is Your Wealth, will address a number of child-related health and well-being issues.

481. The national review of child health services resulted in the strategic report Best Health for Children – Developing a Partnership with Families (BHFC), published in 1999. This included an outline of a core programme for child health surveillance. In line with an evidence-based approach, a review of the BHFC was carried out in 2004, resulting in the publication of Best Health for Children Revisited in October 2005. This report recommended changes in the core health programme for children in the following 8 areas: developmental assessment; hearing assessment; vision screening; medical examination; health promotion and education; metabolic screening; growth monitoring; and oral and dental health.

482. On the basis of Best Health for Children Revisited, a new national programme for neonatal hearing screening has been introduced on a phased basis. Metabolic screening has been reconfigured as a National Newborn Blood-spot Screening Programme with a new governance structure, and neonatal screening for cystic fibrosis has been successfully introduced. In relation to growth measurement, Ireland adopted the UK–WHO growth charts for all newborn infants from January 2013, and a programme of training has been introduced to support this. A review of community medical services has recently been completed that will see the service refocus on child health. A child health task force was established, which is reviewing implementation of the 2005 review to develop potential new ways forward for the sector.

483. As a result of the restructuring of the former Health Boards into the HSE structure in 2005, the Programme for Action for Children that came out of BHFC was disbanded. However, a number of the training elements in child health screening and surveillance that
were initiated under BHFC continued and additional modules on Food and Nutrition and Child Emotional and Mental Health have been introduced.

484. Child and adolescent health programmes are now managed and delivered as part of the Integrated Services Department of the HSE.

485. There are a wide range of services available to support children’s primary healthcare. Many of these are delivered under the Child Health Programme, including the PHN service, General Practitioner Service, Community Health Service, Children’s Dental Service, Paediatric Audiology Service, Community Ophthalmology and Orthoptistry Service for children with visual defects, Physiotherapy Service, Occupational Therapy Service, Speech and Language Service, Psychology Service and Community Nutrition Service.

486. Ireland has three dedicated paediatric hospitals – Our Lady’s Children’s Hospital, Children’s University Hospital and the National Children’s Hospital – all of which are located in Dublin. These provide a total of 390 paediatric beds and 12 operating theatres. Each hospital also provides a 24-hour emergency department. Other acute facilities operate paediatric wards of varying sizes.

487. The Programme for Government 2011-2016 contains a commitment to building a new National Children’s Hospital to replace the three existing children’s hospitals. In February 2012, An Bord Pleanála (the Planning Authority) rejected the planning application for the construction of the new national paediatric hospital on the site of the Mater Misericordiae Hospital in Dublin city. Following this rejection, the Minister for Health established an Expert Group to consider the implications of the decision. The Terms of Reference for the group were agreed by the Government in March 2012, and, given the completion of the work of the Expert Group, the Government has selected a new site for the National Children’s Hospital – St. James’s – and confirmed its commitment to the project.

488. The HSE has established a National Clinical Programme for Paediatrics and a suite of national guidance and protocols on paediatric care is currently being developed.

489. In 2009, the Department of Health and Children published Palliative Care for Children with Life-Limiting Conditions in Ireland: A National Policy. This policy recommends the development and delivery of palliative care services for children through primary care services and their implementation on a phased basis. It aims to ensure that all children with life-limiting conditions should have the choice and opportunity to be cared for at home and therefore it prioritises community-based care for palliative children. It is estimated that approximately 1,400 children are living with life-limiting conditions in Ireland and that there are approximately 490 childhood deaths per year. Approximately 350 are a result of these life-limiting conditions.

490. The priorities for palliative care for this year are set out in the HSE Service Plan 2012. This includes completion of Phase 1 of the report Palliative Care for Children with Life-Limiting Conditions, which involves the appointment of Ireland’s first paediatric palliative care consultant and eight outreach nurses for HSE regions to underpin the new service. This initiative was undertaken on a funding partnership basis with the Irish Hospice Foundation. In addition, the HSE and the Foundation are working closely to develop continuing education programmes for children with life-limiting conditions. The delivery of these has been supported by the Centre of Children’s Nurse Education, based in Our Lady’s Children’s Hospital, Crumlin.
E. Efforts to address the most prevalent health challenges and promote the physical and mental health and well-being of children, and to prevent and deal with communicable and non-communicable diseases

491. The health of Irish children is generally good. The infant mortality rate fell from 3.9 per 1,000 in 2007 to 3.4 per 1,000 in 2011. In the Growing Up in Ireland study, 98% of 3-year-olds were described by their mothers as either “very healthy” or “healthy” with a few minor problems. Just 2% were described as being “sometimes quite ill”, with 0.3% being described by their mothers as “almost always unwell”. Similar proportions were also reported by mothers of 9-year-olds in all descriptive categories.

492. Slightly less than 16% of 3-year-olds were reported by their mother as having a long-standing illness, condition or disability, with asthma being the most commonly reported condition, present in 5.8% of children. Just over one-tenth (11%) of 9-year-olds were reported as having a chronic health condition. The most frequently reported conditions were respiratory conditions (46%) and mental and behavioural conditions (19%).

Obesity

493. The Growing Up in Ireland study also provides information on obesity among 3 and 9 year-olds. Almost one-fifth (19%) of both 3-year-olds and 9-year-olds were found to be overweight, with 6% of 3-year-olds and 7% of 9-year-olds being obese.

494. Obesity – The Policy Challenges: The Report of the National Task Force on Obesity, published in 2005, recognised the need to target childhood obesity. In 2008, the HSE launched the Framework for Action on Obesity, 2008-2012, which has the following five strategic priorities, each supported by a series of specific actions:

• To enhance effectiveness in surveillance, research, monitoring and evaluation of obesity;
• To develop a quality uniform approach to the detection and management of obesity;
• To develop a capacity to prevent overweight and obesity and promote health;
• To communicate messages on obesity in an effective manner;
• To proactively engage with and support the work of other sectors in addressing the determinants of obesity and the obesogenic environment.

495. The Framework for Action contained a detailed implementation plan that included a number of measures specifically aimed at addressing childhood obesity.

496. In 2011, the Minister for Health established a Special Action Group on Obesity (SAGO), including representatives from the DCYA, DES, HSE, Food Safety Authority of Ireland (FSAI) and Safefood (the all-Ireland Food Safety Promotion Board). SAGO focuses on a specific range of measures, including the Healthy Eating Guidelines for the Irish population, restricting the marketing of food and drink high in fat, sugar or salt to children, nutritional labelling, calorie posting on restaurant menus, the promotion of physical activity and the detection and treatment of obesity.

497. SAGO has undertaken a number of actions to address obesity to date. These include revising the Healthy Eating Guidelines, including the Food Pyramid, to help inform individuals about food and drink choices required for health, outlining in plain and simple language the food servings needed by the Irish population to maintain health and well-being; promoting calorie posting on restaurant and coffee shop menus; initiating a consultation process involving the FSAI with the aim of determining the next steps in the
process of combating obesity; and agreeing an adult treatment algorithm with health care professionals.

498. A number of issues are currently being addressed by SAGO. These include current research, in association with the DCYA through Growing Up in Ireland, to establish the use and types of foods and drinks stocked in vending machines in post-primary schools, an initiative that is supported by Food and Drink Industry Ireland and its members; a planned Health Impact Assessment on the potential effects of a tax on sugar sweetened drinks; the development of a treatment algorithm for children, which is at the final stages of agreement and will soon be available to aid healthcare professionals in the monitoring and treatment of obesity at primary care level; the potential for opportunistic screening and monitoring, with a view to enabling earlier detection of overweight and obesity in children; and a submission to the Broadcasting Authority of Ireland seeking to have a 9 p.m. watershed imposed on the advertising of foods high in fat, salt and sugar, and drinks high in sugar, so as to protect children’s health.

499. A number of additional measures and initiatives are underway that will also impact on obesity:

- The HSE has recently redeveloped the Get Ireland Active website (www.getactive.ie), which provides the National Physical Activity Guidelines and which has been further developed into a one-stop shop for physical activity information.

- A National Physical Activity Plan is currently being considered by the Department of Health.

- Your Health is Your Wealth: A Policy Framework for a Healthier Ireland, 2012-2020 aims to develop a high-level policy framework for public health. Following extensive consultation, drafting of the policy has now commenced. All the initiatives currently being considered by SAGO will form part of the development of this policy framework, which aims to enhance the health and well-being of all the population.

- 20 local authorities took part in National Recreation Week 2011, a sister event to the National Play Day, which is aimed at younger children. Participation in both events has increased from 25% of local authorities in 2009 to approximately 75% in 2011, and in 2012 all 34 local authorities participated. Both events are aimed at promoting play and recreation, both physical and cultural, for children and young people and encouraging children and parents to lead a less sedentary lifestyle. The DCYA offers small individual grants to local authorities to encourage participation and partially cover costs.

- The Minister for Children and Youth Affairs recently launched the Local Authority and Recreation Network, which for the first time brings together relevant staff from the local authority sector involved in the provision of play and recreation services to local communities. The initial aim is to share best practice information and encourage mutual cooperation where relevant.

- The Active School Flag Campaign is a DES scheme established to recognise schools that provide quality physical education, sports and physical activity programmes for their students. It is open to primary, post-primary and special needs schools, and potentially Youthreach centres. Over 70 schools have been accredited with the Active School Flag and more than 750 schools have registered their interest in this initiative online.

- In June 2011, the DCYA met with ILAM (the umbrella body for the leisure industry), who jointly operate a range of local authority leisure centres. ILAM is
keen to progress anti-obesity initiatives and is already working with the HSE on a GP referral scheme for overweight children that could serve as a model for children and young people. ILAM will address the Local Authority Play and Recreation Network in 2012 to discuss further possibilities in this area.

- The Points for Life Initiative is led by one of Ireland’s senators, initiated by him in response to his concern at rising obesity levels. The DCYA, DES, DoH and Department of Transport, Tourism and Sport are represented on the national steering group for this policy initiative, which is aimed at improving the physical fitness of children in Irish schools. A pilot programme is due to be introduced in 2012.

- The Food Dudes Programme is an award-winning programme developed by the Food and Activity Research Unit, Bangor University, Wales, aimed at encouraging children to eat more fruit and vegetables in school and at home. It is based on positive role models (the Food Dudes characters), repeated tasting and rewards. The Food Dudes Programme in Ireland was drawn up by the Department of Agriculture, Food and the Marine with An Bord Bia (which fund and manage it respectively), in consultation with the DES, DoH and DSP. The programme is intended to be introduced to all primary schools over the next number of years, contingent on funding. To date, it has been run in 2,108 schools (64% of all primary schools), with 9.8 million portions of fruit and vegetables having been distributed to 309,000 children. It is proposed to introduce it to a further 390 schools (approximately 61,000 children) during the 2012/13 school year.

- The National Strategy for Research and Data on Children’s Lives, 2011-2016 includes actions with regard to data and research on obesity, nutrition and physical activity, including analysis of existing datasets on nutrition and physical activity, development of suitable measures for monitoring outcomes, and examination of options to extend and improve existing data collection tools – all of which have been agreed with a number of relevant stakeholders, including the National Nutrition Surveillance Centre, the HSE and the Irish Sports Council.

- Building on previous work undertaken between 2008 and 2011, the Broadcasting Authority of Ireland is currently undertaking a review of its General and Children’s Commercial Communications Codes. The review is focused on whether and how the promotion to children of food and drink high in fat, salt and sugar should be regulated on Irish radio and television. Later this year, the BAI will consider the outcomes of the second stage public consultation on this issue with a view to introducing new rules early in 2013.

**Exercise**

500. The 2006 Health Behaviour in School-aged Children (HBSC) Survey revealed that over half of primary school children did not achieve the recommended level of physical activity, while among older children, aged 15 years, almost 9 out of 10 girls and 7 out of 10 boys did not achieve the recommended level. In 2009, a study commissioned by the Irish Sports Council revealed that only 19% of primary school children and 12% of post-primary school children met the Department of Health and Children’s physical activity recommendations of at least 60 minutes of moderate to vigorous physical activity per day. These proportions have not improved since the previous study in 2004.

501. More positively, the 2010 HBSC Survey revealed that 53.1% of children aged 10-17 reported being physically active for at least 60 minutes per day on more than 4 days per week.
502. The National Steering Committee on Physical Activity is currently developing a national physical activity policy for Ireland. This policy will make specific recommendations in relation to children’s levels of activity and measures to increase this.

503. The HSE operates the Get Ireland Active website (www.getactive.ie), which provides a range of advice and information on physical activity, including the promotion of physical activity among children (see paras. 500-501). In addition, the HSE has produced the National Physical Activity Guidelines, which include a section on ways to promote physical activity among children and young people.

**Child and adolescent mental health**

504. *A Vision for Change: Report of the Expert Group on Mental Health Policy*, published by the Department of Health and Children in 2006, presents a blueprint for the development of a modern and high-quality mental health service. This national health strategy acknowledged the gaps in the provision of child and adolescent mental health services and made a number of recommendations for the improvement of these services, highlighting the particular need for additional child and adolescent in-patient beds and multidisciplinary teams. In recent years, the HSE has placed a particular emphasis on developing child and adolescent mental health services, improving in-patient access and addressing waiting times for assessment. Significant progress has been made in this area. It is intended that in-patient and community-based services will continue to be developed in this specific area, including, for example, issues relating to intellectual disability or to clinical care, such as eating disorders and self-harm.

505. Key to the development of the Child and Adolescent Mental Health Services (CAMHS) is the establishment of 99 multidisciplinary teams, of which 61 are currently in place. In 2011, 56 teams were in place with a staffing of 465 full-time equivalents, or 64% of the level recommended. Staffing of both the two Adolescent Mental Day Hospital teams and the three Liaison Teams stood at 84% of the recommended level. In 2011, a total of 8,114 children were offered first appointments and seen by CAMHS, an increase of 8.5% on the previous year. CAMHS have approximately 16,000 open cases at any one time.

506. The 2012 Annual CAMHS Report used the 2011 Census data, once it had been confirmed and available by age rating. It is true that *A Vision for Change* “prescribed” services per population. (In fact, it was compelled to use projected data from the 2001 Census since it was launched in January 2006, three months prior to the 2006 Census.) Given that population growth is predominantly (but not exclusively) in the under-5 population, this immediately translates into an increased demand on CAMHS and other children’s services. The objective of the Annual CAMHS Report is to provide a comprehensive and transparent account of existing service capacity, focus and performance. The requirement for additional teams is well known and remains a central objective in HSE service planning. For example, in 2013 the aim is to recruit an additional 80 whole-time equivalents (WTEs) to the CAMHS teams (this number is restricted by the availability of staff with the requisite skills and aptitude to work with children with mental health needs).

507. The HSE has almost reversed the profile of children being admitted to adult units, from 75% to 25%, and the majority are now admitted to an age-appropriate setting. The intention is to make further progress against this target as additional CAMHS beds in 2013 are commissioned. The Mental Health Commission recognises the clinical reality that some children will require admission to an adult setting due to their particular presentation, maturational attainment, clinical acuity, physical threat or unsuitability to be admitted with other children. Such admissions are short and all children admitted to an adult setting will have a dedicated staff resource assigned to them.
508. In 2012, a special allocation of €35 million was provided, primarily to further strengthen Community Mental Health Teams in both adult and children’s mental health services, to advance activities in the area of suicide prevention, to initiate the provision of psychological and counselling services in primary care specifically for people with mental health problems, and to facilitate the relocation of mental health service users from institutional care to more independent living arrangements in their communities. 414 posts were approved to implement this package of special measures, including 150 posts in the Child and Adolescent Community Mental Health Teams.

509. A further €35 million was allocated in Budget 2013 for the continued development of mental health services across a range of headings, including the further development of forensic services and Community Mental Health Teams for adults, children, older persons and mental health intellectual disability. 477 additional staff (including 80 staff for Child and Adolescent Mental Health Services (CAMHS) and CMHTs) will be recruited to implement these measures.

510. With regard to in-patient facilities, psychiatric bed capacity for children and adolescents has increased from 12 beds in 2007 to 44 at present. A new child and adolescent day hospital will also open in Dublin in the near future, which it is hoped will obviate the need for some in-patient admissions. Future plans in this area include the construction of a 22-bed in-patient facility in Dublin (completion of which is anticipated for late 2013 or early 2014) and the provision of a 10-bed Child and Adolescent Forensic Mental Health Unit as part of the National Forensic Mental Health Project. The Unit will be based in Dublin, coterminous with the new Central Mental Hospital, and will be completed in 2016.

511. Measures on suicide prevention are included in paragraphs 113-114.

F. Reproductive health rights of adolescents and measures to promote a healthy lifestyle

512. Data from the 2010 HBSC Survey indicate that 27% of children aged 15-17 (31% of boys and 23% of girls) reported having had sex. Of these, 92% of boys and 95% of girls reported having used condoms, while 54% of boys and 66% of girls reported use of the contraceptive pill. Reported high levels of contraceptive use are reflected in the falling number of births to teenage mothers. Over the period 2007-2011, the number of births to girls aged 10-17 fell by 36.1%, from 624 to 399.

513. In 2010, the functions of the former Crisis Pregnancy Agency (see Ireland’s second report)35 were mainstreamed into the HSE Crisis Pregnancy Programme. The programme runs and funds a range of programmes to prevent crisis pregnancies, targeted at particular groups, including adolescents. Key areas of work under this programme include working with the DES and National Youth Council of Ireland to progress the full implementation of the Relationships and Sexuality Education (RSE) Programme in schools and youth work settings; the development, promotion and distribution of resources for young people and their parents in order to promote good communication about sex; providing training to a range of youth organisations to enable them to deliver RSE to key target groups; and funding and working with services to ensure that youth-based services have an RSE component, particularly services working with hard-to-reach groups in community settings, such as youth cafés. The Crisis Pregnancy Programme has also launched a website

that provides information on sexual health for young people, parents and professionals.

514. A steering group was set up in May 2012 to oversee the drafting of a National Sexual Health Strategy, which will be submitted to Government on completion. It will formulate a strategic direction for the delivery of sexual health services. The plan will focus on improving sexual health and well-being, and address the surveillance, testing, treatment and prevention of HIV and STIs, crisis pregnancy and sexual health education and promotion. The strategy will be in line with the forthcoming Public Health Policy Framework.

515. In 2008, the Department of Health and Children published the HIV and AIDS Education and Prevention Plan, 2008-2012, which identified young people as a group at particular risk of new infections. The plan contains a number of actions relating to young people under the headings of education and raising awareness, specific interventions, increased screening and testing, research and capacity-building, and linkages to relevant policy frameworks. Steady progress has been achieved in providing education and increased awareness for young people. This has been done by:

- Directly targeting young people;
- Directly targeting at-risk and vulnerable young people through NGOs such as BeLonG To (www.belongto.org);
- Providing information and support to parents as the prime educators of their children;
- Giving greater emphasis to engaging directly with young people on their views in regard to RSE/SPHE (Relationships and Sexuality Education/Social, Personal and Health Education) and through NGOs such as SpunOut;
- Included in the 2012 Health Behaviour in School-aged Children (HBSC) Survey for the first time was a question about sexual behaviour;
- BeLonG To and GLEN (Gay + Lesbian Equality Network) have taken a lead on developing policies and advising on best practice in regard to young people who are LGBT;
- Ireland had its first SHAW (Sexual Health Awareness Week) in May 2012, run by the Royal College of Surgeons, during which much of the focus was on young people.

G. Measures to prohibit and eliminate all forms of harmful traditional practices

516. The principal harmful traditional practice of concern in Ireland is that of female genital mutilation (FGM). In 2008, a number of statutory organisations and NGOs came together to form a National Steering Committee and develop Ireland’s National Plan of Action to Address FGM. One of the key objectives included in this action plan was to enact legislation to specifically prohibit FGM in Ireland, including the principle of extraterritoriality as an extension of national legislative protection. This was achieved in the Criminal Justice (Female Genital Mutilation) Act 2012. The provisions of this Act are outlined in paragraph 210.
H. Measures to protect children from substance abuse

Drugs

517. The National Drugs Strategy, 2009-2016 aims to continue efforts to tackle the harm caused to individuals and society by the misuse of drugs through a concerted focus on the five pillars of supply reduction, prevention, treatment, rehabilitation and research. The strategy contains a number of measures specific to young people, primarily in the areas of prevention and treatment. It aims to delay the age of first use of illicit drugs, reduce the level of drug misuse among school students, reduce early school leaving and ensure that all problem drugs-users aged under 18 access treatment within two weeks of assessment. The target of providing access to treatment of people under 18 within two weeks of assessment has been reached by the HSE during 2012.

518. The Young People’s Facilities and Services Fund was established by Government in 1998 to assist in the development of preventative strategies in a targeted manner through the development of youth facilities, including sports and recreational facilities, and services in disadvantaged areas where a significant drug problem exists or has the potential to develop. The Fund currently supports 182 projects and is administered by the DCYA as part of its youth programme.

Tobacco

519. Tobacco use among children has decreased in Ireland in recent years. In the 2002 HBSC Survey, 18.6% of children aged 10-17 reported that they were current smokers (i.e. smoke monthly or more frequently). This had fallen to 15.3% by 2006 and to 12% by 2010. In the latter year, 6% of 11, 13 and 15 year-olds in Ireland reported smoking cigarettes every week, which was substantially below the average of 7.7% across the 39 participating HBSC countries and regions.

520. Further provisions of the Public Health (Tobacco) Acts 2002 and 2004 were commenced with effect from 1 July 2009. They include a ban on the display and advertising of tobacco products; a requirement for all tobacco products on sale to be out of view and stored within a closed container, which can only be accessed by the retailer; a requirement for all retailers who wish to sell tobacco products to register with the Office of Tobacco Control; and a prohibition on self-service vending machines except in licensed premises or in registered clubs. The aim of these provisions is to further “de-normalise” tobacco and to protect children from the dangers of tobacco consumption.

521. In December 2011, regulations were introduced which, effective from February 2013, will place an obligation on tobacco manufacturers to include graphic photographs on the packaging of tobacco products, depicting the negative health impacts associated with smoking.

522. In June 2011, a new health education campaign aimed at encouraging smokers to quit was initiated by the HSE. Based on the statistic that 1 in every 2 smokers will die of a tobacco-related disease, the campaign highlights the serious impact that smoking has on smokers themselves, their friends and their families.

523. Section 45 of the Public Health (Tobacco) Acts 2002-2010 prohibits the sale of tobacco products to persons aged less than 18 years. A retailer convicted of selling tobacco products to a person less than 18 years of age may be fined up to €3,000 and their registration may be suspended for a period not exceeding three months as determined by the District Court. This tobacco legislation is enforced by the Environmental Health Service of the HSE. As part of the enforcement of the legislation, the environmental health officers carry out test purchasing of tobacco products to minors.
Cigarette pricing controls in Ireland are part of a long-running and ambitious effort to decrease smoking prevalence. Evidence shows that pricing is a key tool in the efforts to control smoking, in preventing children and adolescents in particular from adopting the habit. Cigarette prices in Ireland are the highest in the world, according to the WHO Report on the Global Tobacco Epidemic (2009). Ireland’s 2012 Budget increased the price of a packet of 20 cigarettes by 25 cents, with a pro rata increase on other tobacco products. The 2013 budget increased the price of a packet of 20 cigarettes by 10 cents, with a pro rata increase on other tobacco products.

In order to reduce the prevalence of smoking in Ireland, the Department of Health initiated a review in order to identify further policy proposals that may be introduced with the aim of reducing the prevalence and initiation of smoking in Ireland. The drafting of the Report of the Tobacco Policy Review Group is at an advanced stage of preparation and will have a particular focus on children.

### Alcohol

Successive HBSC surveys indicate that the proportion of children aged 10-17 who have never had an alcoholic drink is increasing. In 2002, 40% of children in this age group stated that they had never consumed alcohol, compared to 47.2% in 2006 and 54.1% in 2010. However, the proportion of Irish 15-year-olds who have consumed alcohol, standing at 37.2% in 2010, remains high by international standards when compared to the HBSC average of 25.2%.

The Report of the National Substance Misuse Strategy Steering Group was launched in February 2012. It contains a range of recommendations, including the reduction of alcohol consumption in general. As with the National Drugs Strategy, 2009-2016 (see para. 517), the report’s recommendations are grouped under the five pillars of supply reduction, prevention, treatment, rehabilitation and research. The report includes a number of recommendations intended to impact on alcohol consumption by children and young people, including an increase in the price of alcohol; commencement of Section 9 (structural separation of alcohol from other products in supermarkets, etc.) of the Intoxicating Liquor Act 2008; more stringent controls placed on the advertising of alcohol in places and times that children are likely to see them; and the phasing-out of sponsorship of sport and other large public events by the drinks industry by 2016.

Codes of practice on the placement of alcohol advertising were agreed in 2004 between the alcohol industry, advertising industry and Department of Health, and were further strengthened in 2008. The purpose of these codes is to reduce the exposure of children and young people to the marketing of alcohol. Based on audience profiling, the codes ensure that alcohol advertising/marketing is not permitted unless the relevant medium has an adult audience profile of more than 75%, while alcohol advertising is limited to no more than 25% of available space or time on any given occasion. The majority of members on the Steering Group for National Substance Misuse are in favour of stricter controls on alcohol marketing, primarily to protect children and young people, and they generally favour regulatory controls as a means of protecting young people. Real and tangible proposals are currently being finalised on the basis of the recommendations in the National Substance Misuse Strategy report.

### I. Measures to ensure the protection of children with incarcerated parents and children living in prison with their mothers

Work is in progress by the Irish Prison Service and the Probation Service to develop a strategic action plan targeted at meeting the specific needs of female offenders. The two
agencies are working together to develop a women-centred holistic strategy that seeks to address those factors that lead some women to come in contact with the criminal justice system, while also seeking to provide better outcomes for those women for whom the courts deem that a custodial sanction is warranted.

530. The Irish Prison Service has always been conscious of the need to strike a proper balance between protecting children and respecting the rights and needs of mothers, where the welfare of a child always maintains paramount importance. Under the Prison Rules 2007, a child of less than 12 months of age of a female prisoner may be admitted to a prison and remain with the mother until the child reaches 12 months of age. Only under exceptional circumstances can the child remain with the mother after the 12-month period has elapsed.

531. There is a considerable level of support available for mothers and babies in the Dóchas Centre (women’s prison). Provisions are made to facilitate new mothers keeping their infants with them in custody so as not to disrupt early bonding. There is currently one baby in the Dóchas Centre and the maximum number of babies that have been with mothers, at a given time, in the Dóchas Centre in recent years is five. There are also, of course, occasions when there are no babies in the Dóchas Centre. Each mother and child is provided with their own single room with en-suite facilities, and required items, such as a cot, baby food and nappies, are also provided.

J. Social security and childcare services and facilities

532. Ireland’s second report (2005) provided considerable details about the social security and other expenditure on children and families. This section provides an update on recent developments in this area.

533. Universal Child Benefit is paid in respect of all children up to 16 years of age. The payment continues to be paid in respect of children up to their 18th birthday who are in full-time education or who have a physical or mental disability. In 2011, expenditure on Child Benefit amounted to €2.08 billion and was paid to around 600,000 families in respect of some 1.14 million children. Between 2006 and 2009, expenditure on Child Benefit increased from €2 billion to €2.5 billion as part of a policy of increasing universal income support to families. However, given the need to reduce the level of government spending in the context of the economic crisis, expenditure on Child Benefit was reduced to €2.1 billion in 2011 through reductions in rates of payment and the lowering of the upper age limit, from 19 years to 18 years.

534. In addition to the universal Child Benefit payment, the social protection system also provides assistance to low-income families with children through the payment of Qualified Child Increases (QCIs) on primary social welfare payments. In 2011, QCI payments were made in respect of just over 496,000 children. This is an increase of 45% on the 2006 figure of 341,336. Almost one-third of QCIs (30%) were associated with One-Parent Family Payments. In order to protect families with children in receipt of social welfare payments from decreases in Child Benefit rates, Budget 2010 provided compensatory increases to QCIs. QCI rates were maintained at the same level in Budget 2011.

535. In 2011, changes were also introduced to One-Parent Family Payments. These propose a gradual reduction in the maximum age of the youngest child for whom payment can be claimed, from 18 years to 7 years by 2014 for new customers and 2015 for existing customers (see Table 9).

36 2005, CRC/C/IRL/2, Paragraphs 156-163.
Table 9

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<thead>
<tr>
<th>Maximum age limit for payment of One-Parent Family Payment, 2013-2015</th>
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<td>支付金额的最高年龄限制，2013-2015</td>
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<td>2013</td>
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<td>Payment continues up to age</td>
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<td>If One-Parent Family Payment commenced before 27 April 2011</td>
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<td>If One-Parent Family Payment commenced between 27 April 2011 and 3 May 2012</td>
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<td>If One-Parent Family Payment commenced after 3 May 2012</td>
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Family Income Supplement

536. Family Income Supplement provides income support to employees on low earnings with children. The payment effectively preserves the incentive to take up or remain in employment in circumstances where the employee might be marginally better off than if he or she were claiming other social welfare payments. In 2011, 62,281 children were living in families in receipt of this payment, an increase of almost 50% on the 2006 figure of 43,861.

Back to School Clothing and Footwear Scheme

537. This payment is available to families in receipt of a welfare payment, or who are participating in an approved training or education scheme and have a household income below specified thresholds. The number of children benefiting from this scheme increased from 161,000 in 2006 to over 377,000 in 2011. Expenditure on the scheme increased almost fourfold in the same period, from €25 million to €91 million.

Disability Allowance

538. Disability Allowance is paid to people with disabilities and can be claimed by young people aged 16-18 years. In 2012, 1,681 young people aged 16 and 17 were in receipt of Disability Allowance, representing 1.6% of the total number in receipt of this payment.

Childcare services and facilities

539. Childcare provisions are detailed in chapter 5. In addition to the provisions already outlined, social welfare recipients may apply for a Crèche Supplement to assist with the cost of childcare, where there is a proven ongoing need due to individual circumstances and the person is unable to meet these costs from their own resources. The payment is intended to assist in situations where the child might be in difficult circumstances and would benefit from attending a community crèche. It is also intended to assist in situations where the parent may benefit from counselling, addiction or similar services, and crèche service may facilitate this.
K. Standard of living and measures, including material assistance and support programmes with regard to nutrition, clothing and housing, to ensure mental, spiritual, moral and social development, and reduce poverty and inequality

Child poverty in Ireland

540. In 2003, the at-risk-of-poverty rate for children (aged 0-17) was 20.9%, which fell to 18.4% in 2010. The lowest at-risk-of-poverty rate was 18% in 2008. The pattern with regard to material deprivation among children indicates an increase from 19.2% in 2003 to 23.5% in 2009. Again, the pattern over the years is erratic, with a low rate of 16% in 2007, before a rapid rise to a high of 30.5% in 2010. The consistent poverty rate for children shows a similar pattern, falling from 8.2% in 2003 to 6.3% in 2008 before rising to 8.8% in 2010.

541. The 2010 data indicate a reversal of recent improvements as the effects of the economic downturn on families become apparent. Specific risk factors associated with child poverty are older children, ill or disabled parent(s), household unemployment, low education level of parents, lone-parent families and larger families.

542. Social transfers play a key role in the reduction of child poverty in Ireland and the redistributive effect of social transfers (including child and family benefits) on the at-risk-of-poverty rate for children has increased. In 2003, the at-risk-of-poverty rate for children, excluding social transfers, was 32.8%. Social transfers reduced this rate to 20.9%, giving a poverty reduction effect of 36%. Over time, the at-risk-of-poverty rate for children, excluding social transfers, has steadily increased – to 51.1% by 2010. However, social transfers reduce this to 19.5%. The poverty reduction effect of social transfers had thus risen to over 60% by 2010.

543. Tackling child poverty is a priority for the Government. Four of the 12 high-level goals in the National Action Plan for Social Inclusion, 2007-2016 relate to children, reflecting the vision for children outlined in Towards 2016, which recognises that children, especially those in jobless households, are more vulnerable to poverty than adults. These high-level goals emphasize education and income support as priority areas. In addition, the National Action Plan contains 45 targets for children, covering issues such as early childhood development and care, nutrition, homelessness, youth justice and children’s participation in decision-making.

544. Recent poverty trends have prompted a review of the national poverty target that aims to enable the Government to adopt appropriate and achievable targets. A new sub-target for the reduction of child poverty has been recommended on the basis of the review, which will likely take the form of a commitment to reduce the differential rates of consistent poverty between children and adults. In 2010, consistent poverty rates for children were 1.5 those for adults.


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37 The official source of poverty and deprivation data, including child poverty, comes from the Survey on Income and Living Conditions (SILC) conducted by the Central Statistics Office. SILC is a national household panel survey of approximately 5,000 households. Similar data on income and living conditions are collected in the 27 Member States of the European Union, allowing for cross-comparability across the EU.
educational well-being and health well-being. In terms of the material well-being dimension, Ireland is ranked 13th, with an inequality level close to the OECD average. The report found that Ireland reduces child poverty rates by approximately two-thirds through social transfers. The report awards Ireland a score of 7 points (from a possible 8) for its overall inequality record.\(^{38}\) This places Ireland in 2nd place, alongside Iceland, Norway and Sweden.

546. Improving the position of vulnerable groups, such as children, lone parents, people with disabilities and jobless households, is critical to the achievement of the national social target for poverty reduction by 2020. This target is to reduce consistent poverty to 4% by 2016 (interim target) and to 2% or less by 2020, from the 2010 baseline rate of 6.2%. This requires targeted interventions to address multiple problems. In particular, a new approach is planned to break the most deeply entrenched cycles of child poverty, as outlined in the Programme for Government 2011-2016.

547. Ireland is committed to a number of EU strategies that aim to reduce poverty. These include the National Reform Programme under the Europe 2020 Strategy and the National Social Report under the EU Social Open Method of Coordination. Ireland’s contribution to the EU poverty target is to lift a minimum of 200,000 people out of the risk of poverty or social exclusion by 2020 from the 2010 baseline.

Nutrition

548. A Diet Supplement may be paid under the Supplementary Welfare Scheme in respect of qualified children for whom a special diet is prescribed due to a specified medical condition.

549. The School Meals Programme operated by the Department of Social Protection provides funding towards the provision of food services for disadvantaged children through two schemes:

- The statutory Urban School Meals Scheme, operated by local authorities and part-financed by the Department of Social Protection;
- The School Meals Local Projects Scheme, through which funding is provided directly to participating schools and local and voluntary community groups who run their own school meals projects.

550. Priority for funding under the School Meals Local Projects Scheme is given to schools that are part of the Department of Education and Skills initiative for disadvantaged schools, entitled Delivering Equality of Opportunity in Schools (DEIS) (see paras. 588-591). However, there is no automatic entitlement to funding and all applications must be considered in light of the available budget for the scheme. The number of children benefiting under this programme increased from 125,138 in 2006 to over 189,000 in 2011. Expenditure on the School Meals Programme in 2006 was €13.6 million and increased to €34.975 million in 2011. The allocation for the programme for 2012 is €35 million.

Housing

551. The Government’s Housing Policy Statement, published in June 2011, clearly identifies that the priority for Government will be to meet the most acute needs of households applying for social housing support. The Government is committed to responding more quickly and on a larger scale to social housing support needs through a variety of mechanisms, including through increased provision of social housing.

\(^{38}\) Ireland is ranked considerably better in the education (2nd) and health (7th) tables.
552. Delivery of social housing will be significantly facilitated through more flexible funding models, such as the Rental Accommodation Scheme and leasing, but the Government is also committed to developing other funding mechanisms that will increase the supply of permanent new social housing. Such mechanisms will include options to purchase, build to lease and the sourcing of loan finance by approved housing bodies for construction and acquisition.

553. In 2011, there were 43,578 households with children identified as being in need of social housing. The next assessment of housing needs is due to be carried out by local authorities in April 2013. Information on particular housing needs, household size and composition (including numbers and ages of children) will be gathered as part of the assessment. This information will be used by authorities when drawing up their social housing programmes.

**Traveller accommodation**

554. In accordance with the Housing (Traveller Accommodation) Act 1998, statutory responsibility for the assessment of the accommodation needs of Travellers and the preparation, adoption and implementation of multi-annual Traveller accommodation programmes, designed to meet the accommodation needs of Travellers, rests with individual housing authorities.

555. Since the enactment of the 1998 legislation, each local authority has concluded two successive Traveller Accommodation Programmes and is currently working towards the conclusion of its third round of programmes. Significant progress has been made in the delivery of Traveller accommodation during this time.

556. In the course of the first Traveller Accommodation Programme (2000-2004):
   - Some 1,371 additional Traveller families were provided with permanent, secure accommodation;
   - There was a reduction of 50% in the number of families living on unauthorised sites, down from 1,207 at the start to 601 at its completion.

557. In the course of the second Traveller Accommodation Programme (2005-2008):
   - Significant progress was made, with 775 units of new and refurbished Traveller-specific accommodation provided;
   - The number of Traveller families accommodated in standard local authority housing increased by 458.

**Spiritual, moral and social development**

558. The spiritual, moral and social development of children is addressed primarily through the education system. The Social, Personal and Health Education (SPHE) Programme has been a mandatory part of the curriculum in primary schools and in the Junior Cycle since 2003, with the aim of fostering the personal development, health and well-being of children, helping them create and maintain supportive relationships and develop skills and attitudes required for responsible citizenship. At second level, the Civics, Social and Political Education (CSPE) Programme prepares students for active participatory citizenship. CSPE seeks to make pupils aware of the civic, social and political dimensions of their lives, and is based on seven key concepts: democracy; rights and responsibilities; human dignity; interdependence; development; law; and stewardship.

559. At post-primary level, the syllabuses acknowledge that Religious Education is well placed to provide students with opportunities for reflection, understanding and interpretation of the human experience, and to provide for the moral development of
students. It introduces critical engagement with a variety of ethical codes and norms for behaviour.

**Children in Direct Provision**

560. The Reception and Integration Agency (RIA), a functional unit of the Irish Naturalisation and Immigration Service, provides accommodation and ancillary services to asylum seekers under the Direct Provision system. This provides asylum-seeker residents with full-board accommodation free of utility or cost while their application for international protection is being processed.

561. Accommodation in reception and accommodation centres is provided on a full-board basis, which includes the provision of a room/family room (as appropriate) and three meals per day, as well as school lunches. All accommodation costs, together with the costs of meals, heat, light, laundry and maintenance, are paid directly by the State. Residents are paid a weekly Direct Provision allowance. In addition, asylum seekers can access Exceptional Needs payments and clothing and footwear allowances.

562. The RIA takes its child protection role seriously. This role is critical notwithstanding the fact that children living in the Direct Provision system are not in the care of the State. All children live in a family context and their parents/guardians have primary responsibility for their care and welfare. In this context, it should be noted that the RIA does not accommodate unaccompanied minors; they are in the care of the Health Service Executive (HSE). In the Direct Provision system, children are protected in a number of ways – primarily through RIA’s child protection policy, its house rules, its requirement that all centre staff be Garda-vetted and through the coordination role of a dedicated unit in the RIA.

563. The RIA’s child protection policy is based on *Children First: National Guidance for the Protection and Welfare of Children* (DCYA, 2011). This policy requires, inter alia, that children must be supervised by their parents/guardians at all times and that children are not permitted to be left alone overnight. It also provides that each centre has a designated Child Protection Liaison Officer who is responsible for following a referral procedure should he or she suspect that a child welfare incident has occurred. Managers of accommodation centres are obliged to ensure that all staff working there are aware of, and adhere to, the RIA’s child protection policy. The HSE has provided “Keeping Safe” child protection training to each centre’s designated officers and other staff members.

564. The RIA’s house rules set out information for residents and staff in respect of child protection and the responsibilities of all parties. A copy of these rules, as well as its Child Protection Policy, is available on the RIA website ([www.ria.gov.ie](http://www.ria.gov.ie)). Staff of centres under contract to the RIA are Garda-vetted. This is in furtherance of the RIA’s policy, which has as its principal aim the minimisation of risk to children and vulnerable adults residing in its centres. There is a specific unit in the RIA, the Child and Family Services Unit, whose role it is to manage, deliver, coordinate, monitor and plan all matters relating to child and family services for all asylum seekers residing in the Direct Provision system. The unit also acts as a conduit between the RIA and the HSE, the latter having statutory functions in this area.

565. Children resident in the RIA’s accommodation centres are provided with primary and secondary education in the local community on the same basis as the children of Irish citizens. Parents may also apply for payments to allow their children to avail themselves of school activities, sports and other activities. An exemption from fees for State examinations is also available to asylum seekers who are holders of medical cards. Homework clubs and quiet spaces are provided in family centres to facilitate children doing their homework. On-site preschool services are available in some of the larger Direct Provision centres. However, in all cases, parents may opt to send their children to privately run preschools in
the community. The Early Child Care and Education (ECCE) Scheme provides for free preschool placements to all children, including children of asylum seekers in Direct Provision accommodation.

566. The management of the RIA’s accommodation centres works with local schools, community groups, sports clubs and non-governmental organisations to link children and families into community initiatives, sports and other activities to ensure access to the best available package of services.

VII. Education, leisure and cultural activities

A. Right to education

567. Ireland’s second report (2005) provided a comprehensive account of the right to access education. During the academic year 2010/11, there were 509,652 children attending primary school, 356,107 attending second-level schools and 161,647 third-level students in Ireland. Retention rates to the completion of Senior Cycle at second level (Leaving Certificate) have increased by almost 8 percentage points – from 82.3% of children in the 1997 school entry cohort to 90.2% of children in the 2006 school entry cohort.

B. Aims of education

568. Ireland’s second report set out the aims of education. In addition, that report provided details in relation to a range of educational provision, services and programmes. The following paragraphs set out key developments in education since 2006. In addition, a number of key developments have been included in other sections of this report.

Literacy and Numeracy for Learning and Life

569. The National Strategy to Improve Literacy and Numeracy among Children and Young People, 2011-2020, published by the Minister for Education and Skills in June 2011, addresses six key areas aimed at improving literacy and numeracy outcomes:

- Enabling parents and communities to support children’s literacy and numeracy development;
- Improving the professional practice of teachers and early childhood education and care practitioners through changes to both pre-service and in-service education;
- Building the capacity of school leadership to lead improvements in the teaching and assessment of literacy and numeracy in schools;
- Getting the content of the curriculum for literacy and numeracy right at primary and post-primary levels by ensuring that the curriculum is clear about what students are expected to learn at each stage;
- Targeting available additional resources on learners with additional needs, including students from disadvantaged communities, students learning English as an additional language and students with special educational needs;

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39 2005, CRC/C/IRL/2, Paragraphs 624-634.
40 2005, CRC/C/IRL/2, Paragraphs 681-683.
- Improving how teachers, schools and the educational system use good assessment approaches to plan the next steps for each learner and monitor progress.

570. Each of the actions in the National Strategy to Improve Literacy and Numeracy among Children and Young People has a timeline, and clear lead responsibility for delivery is assigned.

School building programme

571. The Programme for Government commits to prioritising investment in school building projects. In March 2012, a €2 billion five-year capital investment programme was launched by the Minister for Education and Skills, involving some 275 major school building projects that are planned to proceed to construction over the duration of the programme. The plan will provide over 100,000 permanent school places, of which 80,000 will be new school places. The remainder will be the replacement of temporary or unsatisfactory accommodation. This substantial investment means that over 11% of the total school population will benefit from new permanent places delivered during 2012-2016.

School enrolment

572. A Discussion Paper on a Regulatory Framework for School Enrolment was published by the Department of Education and Skills (DES) in June 2011. It sets out possible options for consideration on how to make the process of enrolling in schools more open, equitable and consistent. It also sets out possible new sanctions in a case where a school or Board of Management is not compliant with any new legislation. Submissions were sought on the discussion paper by the end of October 2011. The 89 submissions received are currently being collated by the DES and feedback from this consultation will inform the nature and scope of the new regulatory framework.

Standards for Early Childhood Care and Education Services

573. At preschool level, the Child Care (Preschool Services) (No. 2) Regulations 2006 came into effect in September 2007. The core obligations of the adult practitioner in a childcare setting are set out in Part II, Section 5 of the Regulations and provide that each child’s learning, development and well-being should be facilitated within the daily life of the service through the provision of the appropriate opportunities, experiences, activities, interaction, materials and equipment, having regard to the age and stage of development of the child and the child’s cultural context.

574. Síolta, the National Quality Framework for Early Childhood Education, was developed by the Centre for Early Childhood Development and Education under the DES and launched in 2006. The Framework includes 12 principles, 16 standards and 75 components of quality, with the latter each having a number of “signposts for reflections”. The Framework is intended for use by all service providers engaged with children aged from birth to 6 years, including preschool services and infant classes in primary schools.

575. In October 2009, the National Council for Curriculum and Assessment (NCCA) published Aistear: The Early Childhood Curriculum Framework. Aistear is for all children from birth to 6 years, and can be used in a range of early childhood settings, including children’s own homes, child-minding settings, day care settings, sessional services and infant classes in primary schools. Aistear is based on extensive research, consultation, planning and development by the NCCA in partnership with the early childhood sector. It highlights the fact that children learn many different things at the same time and it uses four interconnected themes to describe the content of children’s learning and development: well-
being; identity and belonging; communicating; and exploring and thinking. Aistear has both implicit and explicit links with the primary school curriculum and can play an important role in the NCCA’s ongoing review of this curriculum and in supporting continuity and progression in children’s learning.

576. The Inspectorate of the DES and the HSE Early Years/Preschool Inspection Services developed a collaborative approach to the joint inspection of the provision for children in the State-funded Free Preschool Year in Early Childhood Care and Education (ECCE). A joint inspection of 15 Early Years settings was piloted in 2011-12. The joint DES/HSE inspection of ECCE settings aimed to achieve an efficient approach to quality-assuring all aspects of provision in the universal free preschool year. The joint inspection process also aimed to ensure that the expertise currently embedded in both inspectorates would be shared and enhanced, and that high-quality ECCE provision for children aged 3-6 would be promoted. The outcome of the joint pilot inspections is being considered by the DES and the DCYA, and will inform the development of an appropriate implementation model for evaluating the quality of early childhood care and education provision in the future.

577. The Child Care (Preschool Services) (No. 2) Regulations 2006 (see para. 573) require that preschool services ensure appropriate vetting of all staff, students and volunteers who have access to a child and that such vetting be carried out prior to any person being appointed or assigned or allowed access to a child in the preschool service.

Standards for primary and second-level education services

578. The Inspectorate of the DES carries out annual programmes of inspection and evaluation of schools in Ireland, which involve whole-school evaluations of primary and post-primary schools; subject inspections and evaluations of programmes at post-primary level; inspection of the work of individual teachers, including probationary teachers; and focused evaluations of particular aspects of the system.

579. Responsibility for providing an appropriate education for each student lies with the Board of Management of a school. From 2012/13 onwards, all schools will be expected to engage in self-evaluation and develop school improvement plans. The Inspectorate has developed and published draft guidelines to assist schools in this task. The guidelines provide a framework and evaluation criteria to assist schools in the process of self-evaluation. They also contain quality statements to help schools to place their practice along a continuum, from significant strengths to significant weaknesses.

580. The DES has a role in providing guidance to schools and other education organisations in implementing child protection policy, based on the Children First: National Guidance for the Protection and Welfare of Children, revised by the DCYA in October 2011 and issued to schools.

581. All persons being appointed to teaching and non-teaching positions in schools must be vetted prior to commencing employment, unless they have already been vetted during the same or the previous calendar year. The requirement for vetting applies in respect of all types of appointment of any duration, including full-time, part-time and substitute positions. Staff returning to work for the same employer after a leave of absence of two or more years must also be vetted.

Religious education

582. A new multi-denominational model of State patronage at primary level was introduced in 2008 in response to increasing societal diversity and demand for greater choice in educational provision at primary school level. Community National Schools aim to cater for diversity within a single school setting by catering for children of all faiths and none. It is intended that the schools will operate under the patronage of local Vocational
Education Committees (VECs), with six already established. A multi-belief religious education programme, entitled Goodness Me! Goodness You!, is under development in schools on an action research basis.

583. The Commission on School Accommodation has carried out a review of criteria and procedures for the establishment of new primary schools. Its report, published in February 2011, recommends a range of criteria and requirements to be met by prospective patrons in making applications for the patronage of new schools and joint campus arrangements, whereby schools of different patronage could share facilities. In June 2011, the Minister for Education and Skills announced that 20 new primary schools and 20 new post-primary schools are to be established over the next six years to meet the needs of the growing population of school-going children. He also announced new arrangements for applications from prospective patrons for the establishment of the schools, as well as new criteria for deciding on the form of patronage that places a particular emphasis on parental demand for plurality and diversity of patronage.

584. In June 2011, the Minister for Education and Skills announced new arrangements to apply to applications for patronage of new schools. The new framework contains the following key elements:

• If the demographics require the establishment of a school, then the process for the selection of the type of school should allow for different patrons/bodies to be considered as the patron of a new school;

• The patron bodies would be invited to make applications for consideration. These applications would be considered by the New Schools Establishment Group and it would then submit a report with recommendations for consideration by the Minister.

585. In March 2012, the Minister for Education and Skills announced the patronage of new primary schools being established in 2012 and 2013. The selected patrons included Educate Together, An Foras Pátrúnachta (the patron body of many Irish-speaking schools) and the VEC. A decision was taken in July 2012 for 14 post-primary schools to open in 2013 and 2014. The successful patrons included those of a Catholic ethos, Church of Ireland ethos, multi-denominational and Gaelscoileán (second-level Irish-speaking schools).

Investment in ICT

586. Between 2006 and 2010, some €95 million in devolved ICT grants was distributed to schools under the ICT in Schools Programme, with €92 million of this provided between November 2009 and December 2010 under the most recent ICT Infrastructure Grant Scheme. Outside of the ICT in Schools Programme, targeted ICT infrastructure investments have also been made by the Department of Education and Skills (DES) in the context of the school building programme (see para. 571) and the deployment of new technology subjects at second level. Between 2006 and 2011, €26 million was provided for equipment, and a further €16 million for ICT equipment, to deliver two revised Senior Cycle subjects: Design and Communications and Technology.

587. The DES has also funded the Schools Broadband Programme since 2005. Under this programme, schools’ connectivity to the Internet is routed through a National Broadband Network, which controls the broadband access to schools and provides centrally managed services for schools, such as security, anti-spam/anti-virus and content filtering. Schools have access to online resources, including a major commercial encyclopaedia, through the Schools Broadband Network. High speed (100Mbps) broadband is being rolled out to all second-level schools over three stages, with 200 schools being connected by September 2012, a further 200 to be connected in 2013 and the remaining 250 schools to be connected in 2014.
Addressing educational disadvantage

588. *Delivering Equality of Opportunity in Schools (DEIS)* was published in 2005, and supports under this programme have been introduced since 2006. DEIS is aimed at addressing the educational needs of children and young people from disadvantaged communities. Its core elements comprise a standardised system for identifying levels of disadvantage and an integrated School Support Programme (SSP) that brings together, and builds upon, existing interventions for schools and school clusters and communities with concentrated levels of educational disadvantage. At present, 341 urban and 324 rural primary schools and 195 second-level schools are participating in the SSP, with a total enrolment of 100,595 at primary level and 64,755 at second level.

589. The DEIS Programme provides a range of additional supports to these schools, including additional teachers through a lower pupil-to-teacher ratio for DEIS primary schools with the highest concentrations of disadvantage, higher capitation grants, Home School Community Coordinators, reading and maths recovery programmes, the School Completion Programme, the School Meals Programme and supports to help children transfer from primary to second-level schools. From the 2012/13 school year, all DEIS post-primary schools will be targeted for additional support through an improved staffing schedule of 18.25:1. Almost €720 million was provided in 2012 for a wide variety of measures to tackle educational disadvantage from preschool to third level. This includes funding for the School Completion Programme of €28 million, which is under the responsibility of the DCYA.

590. An ongoing evaluation of DEIS has been underway since the introduction of supports commenced in 2006. In addition, the Inspectorate of the DES conducted evaluations of planning in a sample of 36 DEIS schools (18 primary and 18 post-primary). The reports highlight a number of findings, including: the DEIS Programme is having a positive effect on tackling educational disadvantage and improvement is taking place in the learning achievements of pupils in DEIS primary schools in urban areas; achievements are gained in the literacy and numeracy levels of pupils in DEIS primary schools, with statistically significant improvements in both the mathematics and reading levels of pupils in 2nd, 3rd and 6th classes between 2007 and 2010; practically all primary schools reported significant measurable improvements in the attendance levels of their pupils, while the majority of post-primary schools had effective measures in place to improve attendance; and most schools had a variety of measures in place to encourage parental involvement in the school and in their child’s learning.

591. The DES will consider these evaluation reports fully before any decisions are made regarding the future of DEIS. While continuing to target resources at schools with the most concentrated levels of educational disadvantage is a key priority, the current economic climate and the challenge in meeting significant targets on reducing public expenditure limits opportunities. There is currently no capacity to provide for the inclusion of additional schools in the DEIS Programme.

Children with special education needs

592. A number of sections of the Education for Persons with Special Educational Needs (EPSEN) Act 2004 have already been commenced, principally those establishing the National Council for Special Education (NCSE) and those promoting an inclusive approach to the education of children with special educational needs. The Sections of the EPSEN Act that have been deferred are those mainly concerned with the assessment of need process, the preparation and review of individual education plans, and the associated appeals provisions in relation to these areas.
The previous Government deferred the full implementation of EPSEN in light of the difficult economic situation and the significant associated costs (estimated to be at least €235 million per annum). The current Programme for Government 2011-2016 has committed to the publication of a plan for the implementation of the Act to prioritise access for children with special needs to an individual education plan. The priority will be moving to a system in which necessary supports follow a child from primary to second level, and achieving greater integration of special needs-related services.

To help achieve this and other educational aims, from September 2012 all children who are transitioning from primary to post-primary schools will have their end-of-year report card sent to their new school. This approach will ensure continuity and progression for students, alert secondary schools if any child will need additional support to improve their literacy and numeracy skills, and improve the arrangements for the transfer of data from preschool to primary, and from primary to post-primary levels.

A number of resources are provided to schools to support the education of children with special needs. These include resource teachers and Special Needs Assistants (SNAs). In 2006, there were 8,390 SNAs supporting children in mainstream schools. The number of SNAs in 2012 was 10,324, which included some 2,000 SNAs supporting 6,905 pupils in special schools.

School attendance and educational welfare

The National Educational Welfare Board (NEWB) was established under the Education Welfare Act 2000, with a mandate to ensure effectively that “each child attends a recognised school or otherwise receives a certain minimum education”. Emphasis is placed on helping children, families and schools to ensure their respective interrelationships are supported, rather than imposing penalties for non-attendance at school. The NEWB works at local level throughout the country to provide support and advice to parents and schools, and to follow up on absences from school. It also has a role in advising Government on the formulation and implementation of policies concerning school attendance and educational welfare.

In May 2009, the Department of Education and Skills extended the remit of the NEWB. The new remit brought together the Educational Welfare Service, School Completion Programme, Home School Community Liaison Scheme and Visiting Teachers Service for Travellers to develop a single, more focused strategic direction at local, regional and national levels, reflecting equally the nature and strength of each of the services.

The Educational Welfare Service is a statutory service supporting regular school attendance for all school-age children and young people through its Education Welfare Officers (EWOs). EWOs engage directly with schools, other school support services and professionals from other sectors working with children and families to meet its objectives. The School Completion Programme is a programme targeting children in schools designated as serving disadvantaged areas under the DEIS Action Plan for Educational Inclusion. It aims to retain young people in the formal education system to completion of Senior Cycle or equivalent, to generally improve the quality of participation and educational attainment of its target cohort. Each project is managed by a Local Management Committee and provides a tailored programme of in-school, after-school and holiday-time interventions to children and young people across the country who are at risk of early school leaving. The Home School Community Liaison Scheme is a school-based preventative strategy, again targeting children at risk of early school leaving in schools designated as serving disadvantaged areas under the DEIS Action Plan for Educational Inclusion. The scheme focuses directly on the salient adults in children’s lives and seeks indirect benefits for the children themselves: the coordinators of the scheme, who are teachers, organise locally based activities to encourage greater contact between parents,
teachers and local voluntary and statutory groups to tackle local issues that impinge on learning. The School Completion Programme and the Home School Community Liaison Service are elements of the DEIS\textsuperscript{41} School Support Programme (SSP).

599. The vision of the NEWB arising from the integration of services described above is to provide excellent services through a One Child, One Team, One Plan approach. This will enable NEWB supports to children and families to be delivered in a seamless way so that they can be helped to take full advantage of the education system.

600. In June 2011, the functions of the NEWB transferred to the DCYA. This transfer of NEWB functions in conjunction with a number of other child-focused services has facilitated the emergence of greater collaboration and innovation around child-focused services through the prioritisation of policy and service delivery across Government in order to improve the lives of children and young people. The NEWB will become part of the new Child and Family Agency on its establishment in 2013.

601. Since 1999, the National Educational Psychology Service (NEPS)\textsuperscript{42} has provided psychological services in public and private primary and post-primary schools and in related educational centres. NEPS is a service of the Department of Education and Skills, and aims to support the personal, social and educational development of all children through the application of psychological theory and practice in education. It has particular regard for children with special educational needs. Adopting a consultative model of service, NEPS focuses on empowering teachers to intervene effectively with pupils whose special needs range from mild to severe and from transient to enduring. Psychologists use a problem-solving and solution-focused consultative approach to maximise positive outcomes for these pupils and encourage schools to use a continuum-based assessment and intervention process, whereby each school takes responsibility for initial assessment, educational planning and remedial intervention for pupils with learning, emotional or behavioural difficulties. Depending on the outcome of this consultation process, a NEPS psychologist can become involved with an individual child for intensive intervention. This system allows psychologists to give early attention to urgent cases and indirectly helps many more children than could be seen individually. While much of the NEPS psychologists’ time is devoted to the identification and amelioration of learning needs, an increasing focus is being placed on behavioural and emotional problems exhibited by students. In 2011, the number of NEPS psychologists was capped at 178.

\section*{Education for migrants}

602. The Intercultural Education Strategy, 2010-2015 provides the policy framework for the education of migrant groups (see para. 134). In 2011/12, just under 12\% of pupils in primary schools were non-Irish nationals. At second level, just under 11\% were non-Irish nationals, representing 170 nationalities.\textsuperscript{43}

603. At both primary and second level, additional language support is provided for students who do not speak English as their first language. Such language support is designed to allow individual students to participate in mainstream education on a par with their peers. The provision of language supports serves as a targeted response to potential early school leaving among migrant students, and some 1,134 whole-time equivalent teachers were involved in the provision of this service in the 2011/12 school year.

\textsuperscript{41} Delivering Equality of Opportunity in Schools (DEIS).

\textsuperscript{42} 2005, CRC/C/IRL/12, Paragraph 637.

\textsuperscript{43} Data collected at primary level is captured by country groupings, thus the number of nationalities is unknown.
604. The system of allocation of language support was reformed in 2012. The reforms to the allocation system for the coming school year involve combining resources available for high-incidence special needs education and language support into a single simplified allocation process. Schools will have autonomy on how to deploy resources between language support and learning support, depending on their specific needs. The new arrangements also provide for additional permanent teaching posts to be given to schools with high concentrations of pupils who require language support. Additional temporary language support will also be provided, as necessary, to schools that will have high concentrations of pupils who require language support in the 2012/13 school year. These allocations will be made on the basis of appeals by any of these schools to the Staffing Appeals Boards.

605. Table 10 sets out the numbers of whole-time equivalent language support teachers at primary and post-primary levels over the period 2006-2011.

Table 10
Number of whole-time equivalent language support teachers at primary and post-primary levels, 2006-2011

<table>
<thead>
<tr>
<th></th>
<th>WTE EAL* posts</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Primary**</td>
</tr>
<tr>
<td>2006</td>
<td>1,069</td>
</tr>
<tr>
<td>2007</td>
<td>1,520</td>
</tr>
<tr>
<td>2008</td>
<td>1,636</td>
</tr>
<tr>
<td>2009</td>
<td>1,125</td>
</tr>
<tr>
<td>2010</td>
<td>1,071</td>
</tr>
<tr>
<td>2011</td>
<td>924</td>
</tr>
</tbody>
</table>

* WTE = whole-time equivalent; EAL = English as an additional language.
** Figures in relation to primary level relate to full-time teaching posts only and exclude part-time hours.

606. Budget decisions since 2009 have significantly reduced the number of language support posts provided to schools. Arising from these decisions, new arrangements (rule-based allocations and appeal process) were put in place in recent years for the allocation of language support to schools. In the current 2012/13 school year, the combined resources available for the General Allocation Model (GAM) at primary level and learning support at post-primary level and language support were used to create a single simplified allocation process to cover both the GAM and language support at primary level and learning and language support at post-primary level. Schools have autonomy on how to deploy the resource between language support and learning support, depending on their specific needs. A permanent allocation of posts was also allocated to schools with significant concentrations of pupils who require language support. Further additional temporary support is also provided, as necessary, to schools that have significant concentrations of pupils who require language support. These allocations are made on the basis of appeals by any of these schools to the Staffing Appeals Board. In addition to the standard allocation (GAM/EAL at primary level and the learning and language support allocation at post-primary), a further 979 posts were allocated in the current 2012/13 school year to schools with high concentrations of pupils who require language support (878 posts at primary level and 101 posts at post-primary level).
Traveller education

607. The Report and Recommendations for a Traveller Education Strategy provides the policy framework for the education of Travellers (see para. 272).

608. The Report and Recommendations for a Traveller Education Strategy recommends the phasing out of segregated Traveller preschools and this was completed at the end of the 2011/12 school year, when funding from the Department of Education and Skills (DES) for the last remaining segregated preschools ceased. Traveller children can avail of the universal free preschool year. Figures are not currently available on the take-up of this scheme among Traveller children.

609. In 2010, the DES announced funding for a Preschool Initiative for Children from Minority Groups, to support preschool services to undertake accredited equality and diversity training. The aim of the funding is to ensure that inclusion and integration occur for children from all majority or minority communities.

610. In September 2011, over 10,500 young Travellers were enrolled in school – 8,086 at primary level (on the Primary School Census Return Form) and 2,699 at second level (on the Post-primary Pupil Database). At second level, this figure is more than double the enrolment in 2000 of 1,165 Travellers. The number of Traveller pupils sitting Junior Certificate examinations has increased by over 50%, from 292 in 2005 to 442 in 2009. Similarly, the number sitting Leaving Certificate and Leaving Certificate Applied has more than doubled, from 43 in 2005 to 103 in 2009.

611. While the data point to a fall off before completion of the Leaving Certificate, many Travellers remain engaged with education in alternative settings. Youthreach is an integrated programme of education, training and work experience for young people in the 15-20 age group who have left school early without any qualifications or vocational training. The 2011 annual survey of VEC Youthreach participants showed that 17% of learners identified themselves as Travellers. All Further Education programmes are open to Travellers and include both full-time programmes (Post Leaving Certificate Programme, Vocational Training Opportunities Scheme and Youthreach) and part-time programmes (Back to Education Initiative and Adult Literacy and Community Education).

612. As part of Budget 2011, the decision was made to withdraw specific Resource Teacher for Travellers posts, effective from September 2011. This reflects the recommendation in the Report and Recommendations for a Traveller Education Strategy that an integrated, collaborative and in-class learning support system should be adopted for all children, including Travellers, who have identified educational needs. Traveller pupils, who are eligible for learning support teaching, will now receive this tuition through the existing learning support provision in schools. All schools are advised to select students for learning support on the basis of priority of need. Alleviation measures are being provided to assist schools with high concentrations of Traveller pupils.

Unaccompanied minors and children of asylum seekers

613. Unaccompanied minors and children of asylum seekers can access preschool, first and second-level education in a manner similar to Irish nationals, until they have reached the age of 18 years. If they have started their Senior Cycle post-primary education and reach 18 years during the two-year programme, they are allowed to finish the course and present for the Leaving Certificate examination. However, neither category can access State supports in order to access courses in further, higher or adult education.

614. At third level, the student’s own nationality or immigration status in the State determines whether he or she meets the nationality requirement of the Free Fees Scheme. Eligible undergraduate students who meet, inter alia, the nationality criteria of the scheme
will not have to pay approved tuition fees, but will have to pay the Student Contribution. Students who do not qualify under the Free Fees Scheme are required to pay tuition fees and may be eligible to claim tax relief. Under the terms of the Student Grant Scheme, grant assistance is awarded to students who meet the prescribed conditions of funding, including those that relate to nationality, residency, previous academic attainment and means. The nationality requirements for the Student Grant Scheme are set out in Section 14 of the Student Support Act 2011 and Regulation 5 of the Student Support Regulations 2012. In all cases, to qualify for a student grant, it is the grant applicant, and not his or her parents, who must meet the nationality or prescribed immigration status requirements in his or her own right.

615. The City of Dublin VEC provides an Access Education Programme for newly arrived unaccompanied minors. This programme is unique to Ireland, offering an intensive transition programme for unaccompanied minors from their arrival in Dublin until placement in foster care and entry into second-level school, usually outside Dublin. As of 2010, students remain on the Access Education Programme for approximately 12-16 weeks. It operates on a year-round basis for 42 weeks of the year. The course covers English Language, Mathematics and Life Skills, and there are strong curricular links with the post-primary curriculum. The programme caters for a diverse group of learners, including those with limited or no experience of formal education in their countries of origin.

616. Although the Access Education Programme is mainly aimed at unaccompanied minors, referrals have been from other young people of refugee backgrounds. Having secured additional funding under the European Refugee Fund in 2010, the Dublin City VEC has been developing a range of teaching and learning resources and supports targeted at this specific cohort of learners, which will also benefit a wider group of learners.

617. A DVD resource made for and by young separated children seeking asylum, entitled *Stepping Stones: Starting Second-level School in Ireland*, is available in both hard copy and as a download from the website www.separatedchildrenservice.ie. A teacher’s resource also accompanies the DVD.

618. Study Buddy is an after-school homework club aimed at any unaccompanied minor or aged-out minors (AOMs) in second-level schools or colleges of further education in the Dublin area. Young people are matched with a volunteer to help them complete school work and develop better study skills. Many Study Buddy volunteers have been with this programme since its inception in 2007.

C. Cultural rights of children belonging to indigenous and minority groups

619. The Intercultural Education Strategy, 2010-2015 explicitly acknowledges the key role of migrant children’s mother tongue and culture (see para. 271). One of the concrete measures adopted is the provision of what are called “non-curricular languages”. These are EU languages that do not appear as part of the normal school curriculum but in which students may opt to be examined under certain conditions. These are additional to modern languages, as well as English and Irish, which are available to all students. The total number of languages now offered is 15, an increase from the 9 offered in 2005. There was a significant increase in the candidature for non-curricular languages in 2011, with a total of 1,262, compared to 1,050 in 2010 and 817 in 2009.

620. All primary and post-primary pupils are required to study Irish, unless they are specifically exempted from doing so by the Department of Education and Skills. The Education Act 1998 sets out responsibilities in relation to Irish for schools. In response to local demand, schools may be established in which pupils are educated through the medium
of Irish. In recent decades, the number of such schools outside Gaeltacht areas has increased (see para. 622).

621. In 2010, the 20-Year Strategy for the Irish Language, 2010-2030 was published. This strategy is based on the Government Statement on the Irish Language (2006), one of the objectives of which was the provision of a high standard of Irish education to all school students whose parents or guardians wanted this. The strategy notes that the education system is one of the critical engines for generating the linguistic ability on which this strategy is premised. The Programme for Government 2011-2016 supports the strategy and will deliver on the achievable goals and targets proposed. In particular, the areas of teacher education, curricular reform at both primary and post-primary level, and the provision of teaching resources in Irish have been prioritised in these early stages as the strategy is being implemented.

622. The number of schools in the Gaeltacht areas has reduced from 153 to just over 100, but the number of schools teaching through the medium of Irish outside the Gaeltacht areas has increased from 20 in 1975/76 to 141 in 2011/12.

D. Education in human rights and civic education

623. At primary level, the Social, Personal and Health Education (SPHE) curriculum is built around three strands – Myself, Myself and Others, and Myself and the Wider World – and deals with issues such as making decisions, developing self-confidence, growing and changing, personal safety, relating to friends, family and others, handling conflict, respecting difference, and awareness of bullying. Myself and the Wider World is designed to promote a sense of social responsibility, active citizenship, appreciation for diversity, and interdependence of local, national and global communities.

624. Civics, Social and Political Education (CSPE) is an examination subject and part of the core curriculum in Junior Cycle in second-level schools. Throughout the course, emphasis is placed on active, participatory class work that encourages learning by doing, with a focus on research, group work, simulation and action activities. A central objective is to instil in pupils an understanding of seven key concepts: democracy, rights and responsibilities, human dignity, interdependence, development, law and stewardship. The format allows teachers to deal with such issues as gender equity, racism, interculturalism, environmental protection, development education, poverty, unemployment and homelessness. The recently published Framework for Junior Cycle (October 2012) continues to emphasize the importance of human rights and civic education. One of its Statements of Learning includes the need for a student to “value what it means to be an active citizen, with rights and responsibilities in local and wider contexts”.

625. Human Rights Education in Primary Schools – the Lift Off Programme – is an Island of Ireland human rights education initiative, jointly delivered by Amnesty International–Ireland and Amnesty International –Northern Ireland, together with the Ulster Teachers Union and the Irish National Teachers Organisation, with the support of the Human Rights Commission and the Northern Ireland Human Rights Commission. The Lift Off initiative works to promote human rights education in primary schools through the development of curriculum support materials, the promotion of a whole-school approach to human rights education, and the facilitation of links between participating schools in Ireland, both north and south. All Lift Off teaching materials and lesson plans are prepared by teachers, recommended by the NCCA and the Primary Curriculum Support Programme (PCSP), fully meet the expectations of the primary curriculum and are suitable for use across the entire curriculum. Lift Off human rights education materials have been disseminated to each primary school and teacher training has been offered widely. In total,
70 schools undertook to pilot the Lift Off materials in the Republic of Ireland. There are currently 622 schools registered on the Lift Off website (www.liftoffschools.com).

E. Rest, play, leisure, recreation, and cultural and artistic activities

Education provision for the arts and physical activity

626. Arts education (visual arts, music and drama) is one of the seven subject areas that comprise the primary curriculum, which was launched in 1999 and implemented on a phased basis during the period to 2007. The Professional Development Service for Teachers provides professional development support to teachers to assist them in implementing the curriculum. Visual Arts was implemented in schools in 2001/02, Music was implemented in 2005/06 and Drama was implemented in 2006/07. Dance forms a strand in the Physical Education curriculum.

627. At second level, there are approved syllabuses for Junior Certificate in Music and Art, Craft and Design. The new Junior Cycle Framework (October 2012) allows for the development of short courses, and the NCCA is currently developing such a course in Artistic Performance. Schools will also be able to develop their own short courses, within set specifications. One of the Statements of Learning of the new Framework includes the need for students to “create and present artistic works and appreciate the process and skills involved”. In the Senior Cycle, there are syllabuses in Music, and modules in the Arts are also available as part of the Leaving Certificate Applied. In Transition Year, schools offer a variety of modules to stimulate pupils’ interest in the arts in general, which in many cases give them the opportunity to interact with practising artists. It is common practice, for example, to offer a school musical as part of Transition Year. The Transition Year programme is taken by 50% of the school cohort in approximately 550 schools.

628. Physical education is provided for in both the primary and second-level curriculum. Additional measures in this area are outlined in paragraphs 500-503.

Physical activity and play

629. Ready, Steady, Play: A National Play Policy was published in March 2004, the first such detailed national play policy to be published in Ireland. Since 2004, the Government has allocated €28.3 million for the provision or improvement of playgrounds around the country as part of the implementation of Ready, Steady, Play and of the RAPID Programme for areas of disadvantage. This funding has led to the number of playgrounds in the country more than doubling – from less than 200 to over 561 – with more than 100 further playgrounds planned.

630. In addition, the Government sponsors an annual National Play Day in cooperation with a nationwide network of local Government agencies and community groups. Approximately 85% of local authorities staged Play Day events in 2012, the highest-ever level of participation. This follows the establishment by the Government of a National Play and Recreation Network in February 2012. The aim of these developments is to increase the awareness of play and recreation generally among policymakers, parents, families and education specialists. The process will be embedded into wider child care policies, with the involvement of the City and County Childcare Committees, planning experts, and non-governmental agencies such as Sugradh Ireland, with the aim of developing a holistic approach to childhood in which the importance of play and child-friendly cities and towns is widely appreciated and recognised. Most local government authorities already have dedicated play policies, which are published and implemented, with large urban centres such as Dublin City moving towards a fully integrated Play Plan approach.
631. In September 2007, Teenspace: National Recreation Policy for Young People was launched by the then Office of the Minister for Children (OMC, 2007b). The policy addresses the needs of young people between the ages of 12 and 18, providing a strategic framework for the promotion of positive recreational opportunities aimed principally at this group. There are seven core objectives, each incorporating a series of actions (76 in total), for priority implementation by various government departments and agencies, which have a crucial role in the delivery of these actions within the overall framework of the National Recreation Policy.

632. The National Recreation Policy adopts an evidence-based approach, addressing issues that emerged from a public consultation process, undertaken by the OMC, which gave all interested parties, including young people, an opportunity to have a say in the development of the policy. The process of developing the policy was also informed through the findings of independent research commissioned by the National Children’s Office in 2005 to measure the recreational and leisure activities of young Irish people; in particular, the research examined what young people did in their free time, the barriers and supports experienced in accessing recreational opportunities, and their aspirations in regard to leisure and recreation (De Róiste and Dinneen, 2005).

Irish Sports Council

633. The Irish Sports Council (ISC) is a Government-appointed body responsible for the promotion, development and coordination of sport in Ireland. The ISC has developed the Buntus Programme, which supports a Physical Education curriculum in primary schools designed to give children a quality introduction to basic sporting skills. This programme is being supported by the Department of Education and Skills, and is currently operating in the Local Sports Partnership (LSP) areas. The ISC has also developed a Buntus Start Programme for preschool and childcare providers to introduce physical activity and fundamental skills to children aged 3-5 years. Each programme provides equipment, resource cards and teacher/leader training to each school or centre.

634. From 2006 to 2011, €30.5 million was allocated to the LSPs, with an additional €3.4 million from the Dormant Accounts funds. The ISC also funds the Sports Inclusion Disability Programme, which promotes and delivers sporting opportunities to people with disabilities, including young people and children. This programme is delivered through the LSP national network. The ISC supports the three major field sports of soccer, Gaelic football and rugby, to promote under-age participation. From 2006 to 2011, funding of €61.9 million was allocated to these sports for a wide range of initiatives across the country.

635. The Code of Ethics and Good Practice for Children’s Sport in Ireland was launched in 2000 by the ISC and revised in 2006. Since then, all national governing bodies have signed up to the principles and policies of the ISC’s Code and adopted a sports-specific code, which has been circulated to all sport clubs. Those with junior members have appointed National Children’s Officers. The principles contained in the Code – of fair play, enjoyment, and a commitment to maintaining a child focus – are the cornerstones of the ISC’s future work in relation to sport for young people. Awareness of the Code and training in good practice, including child protection, are now being offered to those involved in children’s sport by governing bodies and LSPs, in conjunction with the HSE.

Local Authority Swimming Pool Programme

636. Under the Local Authority Swimming Pool Programme, the Department of Transport, Tourism and Sport provides grant aid to local authorities for the building of new pools or the refurbishment of existing pools. There are 58 pools in the current round of the programme, of which 46 have been completed and are open to the public. The 12 remaining
pools are at various stages of completion. From 2006 to 2011, some €95 million was spent under the programme, with a sum of €6.9 million allocated in 2012.

Cultural and artistic activities

637. The Arts Council upholds the rights of children and young people to enjoy their full cultural entitlements. The Arts Council’s strategy entitled Partnership for the Arts, 2006-2010, and its current Strategic Overview, 2011-2013, identify children and young people as an important constituency, with a wide range of programmes and supports in place for both in-school and out-of-school activities. In 2006, the Arts Council established a Young People, Children and Education (YPCE) Team to oversee policy development, manage advocacy initiatives, and administer funding programmes in this area of its work. The year 2009 marked 30 years of involvement by the Arts Council in the development and support of programmes for children and young people.

638. The Arts Council is keenly aware of the lack of sufficient existing national datasets to support meaningful “data mining” within the arts in Ireland generally, and that data gathering is poor in relation to the participation of children and young people, even quantitatively. There is a need to gather sufficiently precise and differentiated data relating to, for example, the nature of arts experiences; the location in which they occur; quality assurance, particularly regarding initial and continuing professional development of artists and teachers; and the demographic context. The Arts Council welcomes the National Strategy for Research and Data on Children’s Lives, 2011-2016, launched in 2011 by the DCYA. The YPCE Team looks forward to engaging with the process, with a view to increased national understanding of the role of the arts in children’s lives, and increased information on children’s participation and on the range of services that support children’s engagement with, knowledge of, and enjoyment of arts and cultural activities.

639. Art-Youth-Culture: FYI was a consultation initiative, held in 2010, that brought together more than 60 young people aged 15-23 to discuss their participation in cultural life and the arts with their peers and key policymakers during three days of arts-based workshops, discussions and meetings. Participants shared their experiences, concerns and ideas with policymakers and cultural providers through a day-long series of round-table discussions and artistic presentations, the themes and format of which were determined in advance by the young participants. In total, 35 representatives from key public agencies and government departments, whose activities impact on young people’s experience of arts and culture, attended the event. A dedicated website was designed and managed by a youth arts collective. The event was funded with support from the European Commission through Léargas.

640. In July 2008, the Arts Council published Points of Alignment: The Report of the Special Committee on the Arts and Education. The Special Committee was established by the Minister for Arts, Sport and Tourism in tandem with the Minister for Education and Science. The report focuses on arts-in-education provision in Ireland and makes five key recommendations to improve such provision. Arts-in-education involves artists and arts organisations of all disciplines (theatre, dance, visual arts, literature, music, film, etc.) visiting schools to present work and to engage in both short- and long-term projects in which they collaborate with students and teachers. It also includes visits by schools to galleries, theatres and arts centres for exhibitions, performances and workshops of all sorts, designed to enrich the school experience of thousands of young people throughout Ireland.

641. Also in 2008, the Arts Council published The Arts in Education and Other Learning Settings: A Research Digest as a new online resource, which makes available, in summary form, a very wide range of research, including a number of action research projects undertaken in the field of arts-in-education in Ireland. While the focus is on arts in schools, other settings also feature, such as arts in youth work, arts in healthcare and arts in
communities. The resource includes hard data, Oireachtas reports, project evaluations, policy frameworks and guidelines, and a host of reports from many long-term projects undertaken by local authorities, cultural institutions, arts organisations and education providers. It spans an almost 30-year timeframe, from 1979 to 2007.

642. In 2006, the Arts Council published *Artists-Schools Guidelines* to provide practical guidance for artists and teachers on how to design, manage and evaluate schools-based arts initiatives collaboratively. The guidelines were disseminated widely within the arts sector and to every school in Ireland. The Arts Council and the Department of Education and Science each contributed 50% of the total costs of this research initiative, which was managed by a jointly established working group.

643. In 2006, the Arts Council’s *Arts-in-Education Directory* was updated and launched as an interactive online resource (see [www.arts council.ie](http://www.arts council.ie)). It provides details of over 130 arts organisations in receipt of Arts Council funding (e.g. production companies, festivals, venues, resource organisations) that deliver arts-in-education programmes for primary and post-primary schools at local and national level.

644. *The Public and The Arts 2006*, a study undertaken by the Arts Council and published in 2006, identified that the top priority for the public in terms of spending on the arts was “arts programmes and facilities dedicated to working for and with children and young people”. The same study found that 82% of respondents agreed that “arts education is as important as science education” and that “lack of an arts education at school is a significant obstacle to developing an interest in the arts”. It concludes that while there has been some progress in arts provision for young people both within the formal school system and in the public domain, “relative to their demographic significance, the developmental import of childhood experiences and the economic dependence of young people, however, it would appear that further progress is required and would be welcomed by the Irish public”. The 2007 report by the National Economic and Social Forum (NESF), entitled *The Arts, Cultural Inclusion and Social Cohesion*, identified that “concerns have been raised about the level of expertise available among teachers and within schools to adequately implement the arts curriculum”. It went on to suggest that it would be “useful to have more links between artists, arts organisation and schools to do this”.

645. The Arts Council funds and otherwise supports work for and with children and young people in a number of ways:

- €2.7 million was allocated in 2011 to arts organisations wholly and exclusively dedicated to children and young people. Included here is the National Youth Arts Programme, catering for out-of-school contexts. This programme was established in 1998 by the National Youth Council of Ireland and is jointly funded by the Arts Council and the DCYA.

- An estimated €4.2 million was disbursed indirectly through funding a wide range of venues, festivals, local authority programmes and arts organisations across the country, providing arts services for children and young people both in and out of school as part of a wider remit.

- A further €280,000 was allocated to supports that include professional development (mainly in the form of bursaries and training grants) for artists and practitioners working, or wishing to work, in the area of children and young people’s arts. Other supports include collaborative projects between artists, children and young people, involving most art forms and organised in a range of settings, including:
  - Writers-in-Schools – managed by Poetry Ireland;
  - Artists-in-Residence in Youth Work – managed by the National Youth Arts Programme.
• The Young Ensembles Scheme was established by the Arts Council in 2008. By “young ensemble” is meant a collection of young people working together to create art. Examples of ensembles might include a youth orchestra, youth choir, a circus group, a band, youth theatre, film group, dance group, a group of young visual artists working together to create an exhibition (or a single artwork, such as a mural or graffiti piece), a poetry or writing group, or a group that works together to combine a number of art forms into a performance/event. A fund of €170,000 was disbursed to projects through this scheme in 2011.

• Other significant initiatives specifically focused on children and young people include the Children’s Literature Laureate Programme, “Laureate na nÓg”, managed by Children’s Books Ireland, and through Arts Council funding of the national resource agency, Music Network. The Arts Council enjoys good relations and ongoing dialogue with Music Generation, an initiative aimed at creating local music education partnerships, supported by U2 and the Ireland Funds.

646. The Arts Council has taken a leading role in promoting good practice in child protection within the arts sector since 2004. It has developed a multifaceted approach, implemented over a five-year period and involving cooperation between arts organisations and key agencies, notably the HSE and Central Garda Vetting Unit. Its aim is to improve and extend opportunities for children and young people’s participation in all aspects of the arts through promoting safe and inclusive practice. This has been achieved through the following measures:

• Developing and publishing guidelines for child protection in the arts sector in collaboration with the HSE and key organisations in the arts and cultural sector;

• Supporting and resourcing arts organisations to develop enhanced skills, capacities and policies in relation to child protection and welfare;

• Requiring funded organisations working with children and young people to develop child protection policies and procedures as a funding criterion;

• Retaining the services of a specialist Child Welfare Advisor to implement this policy across the arts sector;

• Developing safeguards within the Arts Council through the development of in-house policies and procedures for working with children and young people;

• Providing training, advice and information updates of relevance (e.g. Children First in 2011), maintaining relationships with the HSE and others, and working collaboratively with arts organisations to continually improve practice and outcomes;

• Designing tailored resources for use within the arts sector, including a web resource.

647. The Arts Council continues to work with and alongside others – primarily the Council of National Cultural Institutions (Education, Community and Outreach), Department of Education and Skills and associated agencies, DCYA, HSE and National Youth Council of Ireland – in order to ensure greater access for the 1,000,000 citizens who constitute the target audience for young people’s arts in Ireland. At EU level, the Arts Council was represented, together with the Department of Education and Skills, on the 2009/10 EU OMC Group reporting on developing greater synergies between education, arts and culture. The Group produced its final report in July 2010, entitled European Agenda for Culture – Working Group on developing synergies with education, especially arts education. The Arts Council also liaises regularly with colleagues in the Arts Councils of Northern Ireland, Scotland, England and Wales.
Youth cafés

648. The development of youth cafés was identified in the 2007 Programme for Government, responding to the repeated emphasis that young people had placed on the need for such recreational spaces.

649. A Youth Café Funding Scheme was established in 2010/2011 to create youth cafés around the country. The funds provided support to enhance existing facilities, as well as providing significant funding for the construction of 16 dedicated new youth cafés, concentrating in areas where no similar facility was already in operation.

650. It is estimated that up to 100 youth cafés are now operating in the State. A total of €2.2 million dedicated funding has been spent to date by the DCYA and significant additional funding has been provided by the Garda Juvenile Diversion Programme. The potential for these facilities to be utilised in the dissemination of health and other information relevant to young people and to provide a forum for other youth-related work is being explored in various facilities. Already, there is some evidence to suggest that the provision of a youth café can lead to many associated ancillary benefits for young people, such as opportunities for interaction with peers as well as valuable practical experience gained in operating the cafés and raising funds to ensure facilities remain sustainable in the medium to long term.

Provision for youth

651. The overall aims of the Youth Affairs Unit (YAU) within the Department of Children and Youth Affairs (DCYA) are:

- To develop youth policies and strategies that enable and enhance young people’s personal and social development;
- To support the youth sector in providing effective youth work and associated opportunities for young people and to consolidate and enhance existing provision of youth services and initiatives;
- To monitor and assess the youth work structures, supports and services so as to ensure both quality of service and resource effectiveness;
- To support the alignment of youth policies and services with other DCYA policies and services, and with the broader policy and services field in order to help ensure an integrated and coordinated approach to the needs of young people;
- To liaise with the EU/Council of Europe on youth policy and the implementation of EU programmes for youth.

652. The overall budget for the youth sector in 2012 is €56.806 million on current expenditure and €0.5 million on capital expenditure. This funding supports the delivery of a range of youth work programmes and services for all young people, including those from disadvantaged communities, by the voluntary youth work sector. Youth work programmes and services are delivered to over 387,000 young people by some 1,400 youth work personnel, who in turn support a large volunteer base, estimated by the National Youth Council of Ireland at 40,000. The mainstay of the Youth Affairs Unit (YAU) relates to the support and development of youth work policy and provision. The YAU provides a range of youth work, in summary, can be described as being educational and elective, structured and systematic. Youth work is predicated on the voluntary participation of young people, operates in various settings spanning non-formal education through to informal education, and engages young people aged 10-24, representing a significant period in both development and duration.
of funding schemes, programmes and supports to the youth sector, focusing on youth development, youth support, youth information, youth exchange and recreational activities for young people. These are provided for staff-led and volunteer-led youth provision via a range of funding schemes.

653. The overall budget for the youth sector for the period 2008-2012 was almost €315 million.

654. The following organisations, services and projects are supported through grant aid:

- **Youth Service Grant Scheme** – Funding is made available on an annual basis to 31 national and major regional voluntary organisations to ensure the emergence, promotion, growth and development of youth organisations with distinctive philosophies and programmes aimed at the social education and personal development of young people. €11.051 million in 2012.

- **Special Projects for Youth** – Grant-in-aid is made available in respect of out-of-school projects for disadvantaged young people. Priority is given to projects in the spheres of special youth work initiatives, young homeless people, young substance abusers and young Travellers. In 2012, 181 projects were supported under this scheme. €17.042 million in 2012.

- **Young People’s Facilities and Services Fund** – This fund was established by the Government in 1998 to assist in the development of preventative strategies in a targeted manner through the development of youth facilities, including sports and recreational facilities, and services in disadvantaged areas where a significant drug problem exists or has the potential to develop. 182 projects were supported in 2012. €21.332 million in 2012.

- **Local Youth Club Grant Scheme** – This scheme supports youth work activities at a local level. Grants are made available to all youth clubs and groups through local Vocational Education Committees (VECs). There are 1,600 youth clubs under the scheme. €1.035 million in 2012.

- **Youth Information Centres** – Resources are provided for the development of a network of Youth Information Centres. Their purpose is to provide young people with easy access to information on rights, opportunities, benefits, health, welfare and other matters. 28 Youth Information Centres were supported under the scheme in 2012. €1.4 million in 2012.

- **Local Drug Task Force Projects** – Responsibility for 21 youth-related projects transferred to the OMCYA from the Department of Education and Skills in January 2011. These projects, targeting young people under the various pillars of the National Drugs Strategy, provide a range of supports for young people by way of targeted drug prevention and awareness programmes, as well as referrals. €1.34 million in 2012.

- **An Gaisce: The President’s Award Scheme** – Funding is provided for this programme of merit awards, which are designed to facilitate personal development through participation in a series of challenges that test a young person’s initiative, discipline and caring skills. There were 9,000 participants in 2012. €0.690 million in 2012.

- **Léargas: The Exchange Bureau** – International exchange schemes are administered on behalf of the DCYA by Léargas, the Irish National Agency for the EU Youth in Action Programme, 2007-2013. Léargas also administers Causeway, the British/Irish Programme. €0.492 million in 2012.
• National Youth Health Programme – This is a partnership between the DCYA, HSE and National Youth Council of Ireland. It aims to provide a broad-based, flexible health promotion/education support and training programme to youth organisations and those working with young people in the non-formal education sector. €0.088 million in 2012.

• National Youth Arts Programme – This is a partnership between the DCYA, Arts Council and National Youth Council of Ireland. It is dedicated to the development and advancement of youth arts in Ireland and aims specifically to realise the potential of young people through quality arts practice. €0.067 million in 2012.

655. Significant progress has been made in recent years on a number of important areas for the provision of youth, including:

• Establishment of a National Child Protection Programme, which coordinates child protection training initiatives and assists many youth organisations in drafting child protection guidelines and policies (2005/2006).

• Introduction of Garda (Police) vetting for all new employees and volunteers in the youth work sector (2006).

• Appointment of a National Assessor of Youth Work to support the development of good youth work practice through the assessment, monitoring and review of youth work programmes and services provided by the voluntary youth work sector in Ireland (2006).

• All eligible single worker projects under the DCYA’s Special Projects for Youth upgraded to two workers (2006/2007).

• Establishment of North/South Education and Training Standards Committee for youth work for the professional endorsement of youth work training on an all-Ireland basis (2006/2007).

• Resourcing of regional Vocational Education Committees (VECs) to appoint youth officers to coordinate and support local youth provision (2006/2007).

• Appointment of a National Youth Work Advisory Committee, under the terms of the Youth Work Act 2011, to advise the Minister in matters relating to youth work policies and service provision for young people (2007).

• Revision of the Local Youth Club Grant Scheme to make it more responsive to the realities and practicalities experienced by local voluntary youth groups in the provision of activities to young people (2008/2009).

656. A National Quality Standards Framework (NQSF) for Youth Work was introduced in January 2011. This is primarily a support, development and assessment tool that provides services and organisations with the opportunity to articulate their youth work practice through a common language. The implementation of the NQSF is resulting in an improvement in good practice and better value for money, and is assisting youth organisations and services in addressing the developmental needs of young people to an even greater extent and in a more cost-effective manner.

657. Having set national standards for staff-led youth work projects and organisations via the NQSF, the DCYA is now finalising Standards for Local Youth Groups, for volunteer-led youth clubs and groups funded by the Youth Affairs Unit.

658. The overall aim of these standards for youth clubs will be to support clubs in creating and providing quality developmental programmes and activities for young people in safe and supportive environments, and to ensure that there is a connection and continuity with the standards that exist for staff-led youth provision.
659. The DCYA is currently identifying training support needs arising from its Quality Standards initiatives and intends to develop a coordinated cross-organisational training calendar to respond to these needs.

VIII. Special protection measures

660. A number of measures that fall under Special Protection have been outlined in other sections of this report. This section provides information on additional relevant measures.

A. Children outside their country of origin seeking refugee protection, unaccompanied minors, internally displaced children, migrant children and children affected by migration

661. The Office of the Refugee Applications Commissioner and the Refugee Appeals Tribunal continue to work with other agencies to ensure that all asylum procedures take the best interests of the child into account. Regular meetings are held with the HSE and the Refugee Legal Service in order to arrange for the processing of unaccompanied minor cases and to deal with practical issues as they arise.

662. Arrangements are in place to facilitate the presence of a social worker at the interview stage in cases of applicant minors who “age out” (i.e. reach their 18th birthday) during the appeals process. Where feasible, their hearing will be with a Tribunal Member trained in dealing with separated children.

663. Services for unaccompanied minors who arrive in the Greater Dublin area are provided by the HSE Separated Children Seeking Asylum Social Work team, in conjunction with Community Welfare, Psychology and other statutory agencies. Children who are not reunited with family are received into the care of the HSE, either on a voluntary basis or through court under the Child Care Act 1991.

664. The HSE is implementing the Equity of Care Policy to ensure that all non-national children and young people receive the same level of care as that afforded to indigenous children. Appropriate foster care placements are being identified and matching of children to families is taking place. The HSE service for separated children seeking asylum has undergone significant development since 2009 and is now recognised as an excellent service, with high standards of care and support for children.

665. Unaccompanied minors over 18 not attending second-level education have been accommodated within the Direct Provision system of the Reception and Integration Agency (RIA). Those young people over 18 who are in education are moved to adult RIA accommodation services in Dublin, where they remain until completion of their relevant academic year.

666. The City of Dublin VEC’s Separated Children’s Service Access Programme is a service for newly arrived separated children that affords them an opportunity to integrate into Ireland and into the education system in a protected and supportive environment. Services include the Access Education Programme (see paras. 615-616), a youth club for newly arrived unaccompanied minors, a drop-in service, and an outreach service for those who were minors but have reached the age of 18 and over. The programme receives approximately €210,000 annually from the Exchequer and has also received European Refugee Funding.

667. A Joint National Protocol on Children who go Missing from Care has been agreed between the Gardaí and HSE. The following measures were agreed for implementation:
• Collaborative interviewing at the ports between social workers and Gardaí;
• Fingerprinting of persons presenting as underage at the ports, for tracking purposes;
• Planned Garda surveillance of those at risk of going missing from the point of presentation at ports to the initial placement period;
• Monitoring of the notification system of missing persons to local Gardaí by Garda Inspectors;
• Joint training of HSE staff and Gardaí/Garda National Immigration Bureau staff in relation to children at high risk of going missing;
• Sharing of photographic evidence between HSE and Gardaí.

668. The decline in children presenting and remaining missing in the last quarter of 2009 is the result of intensive inter-agency efforts throughout that year. It is the intention of the Gardaí and HSE to continue to intensify joint efforts to prevent children from going missing from care and to detect those who do.

B. Children in situations of armed conflict, including physical and psychological recovery and social integration

669. This issue is addressed under the Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict (see paras. 185-186).

670. Since Ireland’s second report (2005), the Statute of the International Criminal Court and the Agreement on the Privileges and Immunities of the International Criminal Court have been incorporated into Irish law via the International Criminal Court Act 2006.

671. All asylum seekers entering the State are offered medical screening within the first two weeks of arrival. There is a dedicated screening team providing this service at the Reception and Integration Agency’s Main Reception Centre at Balseskin in Dublin. The screening team is operated by the HSE and includes linkages to psychological and other supports following that screening.

672. In the context of the children who have entered the asylum process, if it has not already become apparent to the Health Services that an unaccompanied minor appears to have been exposed to armed conflict and is suffering physical and psychological trauma, then the Office of the Refugee Applications Commission would bring this matter to the attention of the person assigned responsibility by the HSE for the child.

673. A group of experienced interviewers working in the asylum processing area of the Office of the Refugee Applications Commission have received additional specialised training to assist them in working on cases involving unaccompanied minors. This training includes issues such as psychological needs, child-specific aspects of the refugee process, the role of the social worker and other issues particular to refugee determination for unaccompanied minors. The training module has been developed by UNHCR and the training is facilitated by UNHCR (see para. 288). The authorised officer, who prepares the report and recommendation in relation to cases involving unaccompanied minors, would also have received the specialised training programme.

674. While the procedures relate to unaccompanied minors, the approach taken and in particular the training provided is also of considerable benefit in the interviewing of children who are accompanied but whose parents have decided should be the subject of a separate application for asylum.
C. **Children in situations of exploitation, including physical and psychological recovery and social integration**

**Economic exploitation**

675. The legislative protections against economic exploitation are outlined in Table 3. Provision for the enforcement of this legislation was included in Ireland’s second report.\(^*\)

**Sexual exploitation and sexual abuse**

676. Since Ireland’s second report (2005), there have been a number of enquiries into sexual abuse and measures have been put in place to protect children from this. These are included in paragraphs 410-422.

677. The Criminal Law (Sexual Offences) Act 2006 came into operation in June 2006 and updated the existing provisions in Irish criminal law concerning the protection of children under the age of 17 from sexual abuse and exploitation. The legislation provides, inter alia, for a higher maximum penalty for defilement of a 15 or 16 year-old child where the offender is a person in authority.

678. In addition to increasing penalties for offences in the 2006 Act, the Criminal Law (Sexual Offences) (Amendment) Act 2007 updated the offence of meeting, or travelling with the intention of meeting a child for the purposes of sexual exploitation. In addition, the legislation criminalises the same conduct, outside the State, by Irish citizens or persons ordinarily resident in Ireland.

679. A Sexual Offences Bill to further enhance the protection of children against sexual abuse and exploitation is at an advanced stage of preparation. This will implement the recommendations of Parliamentary committees and facilitate full compliance with the criminal law provisions of a number of international legal instruments.

680. In April 2010, An Garda Síochána published a comprehensive policy on the Investigation of sexual crime, crimes against children and child welfare, the aim of which is to combine professionalism with sensitivity and compassion in the investigation of sexual crimes. The policy sets out the standards, procedures and practices to be followed, provides instructions on the assessment and management of the risk posed to the community by convicted sex offenders, and includes policy changes to the role of specialist victim interviewers. In addition, a Sexual Crime Management Unit has been established to assist Gardaí in the investigation of such crime, promote best investigative practice and monitor a sample of investigations to ensure that they are receiving appropriate attention. The policy is currently being reviewed in the light of developments since its publication, including the publication of the revised Children First guidelines in 2011.

681. The Domestic Violence and Sexual Assault Investigation Unit (DVSAIU) at the National Bureau of Criminal Investigation is the national Garda unit providing a nucleus of expertise to other Garda units in the investigation of crimes of a sexual nature, including child abuse and exploration. Children First has been adopted as Garda policy for the welfare and protection of children.

682. In response to an invitation by the Minister for Children and Youth Affairs, Retail Ireland (2012) has developed Guidelines on Childrenswear. These were formally launched in June 2012 and 10 of the main retailers of children’s clothing have signed up to them. The guidelines cover the styling, sizing, labelling and marketing of clothes, footwear and accessories for children. Among the directions included in the guidelines are that fabric and

\(^*\) 2005, CRC/C/IRL/2, Paragraphs 772-776.
cuts should provide for modesty, slogans and images should be age-appropriate, and underwear should not contain enhancements or underwiring and should be labelled according to chest size, not age.

Sale, trafficking and abduction

683. Recent measures to tackle the abduction of children are addressed in paragraphs 441-447.

684. In February 2008, the Anti-Human Trafficking Unit (AHTU) was established in the Department of Justice and Equality to ensure that the Irish response to trafficking in human beings is coordinated, comprehensive and holistic. A key element of this strategy is the National Action Plan to Prevent and Combat Trafficking in Human Beings in Ireland, 2009-2012, which was published by the Minister for Justice and Equality in June 2009. The dedicated website www.blueblindfold.gov.ie provides full details on the concept of the Blue Blindfold – “Don’t close your eyes to human trafficking”.

685. The Action Plan has a strong focus on preventing trafficking becoming a major issue in Ireland. The plan was developed under four main headings: (i) Prevention and awareness raising; (ii) Prosecution of traffickers; (iii) Protection of victims; and (iv) Child trafficking. It sets out the structures that enabled Ireland to comply with the relevant international instruments. Ireland has ratified the Council of Europe Convention on Action against Trafficking in Human Beings, which came into effect for Ireland on 1 November 2010. Ireland has also ratified the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, which came into effect for Ireland on 17 July 2010.

686. The AHTU is currently undertaking a mid-term review of this Action Plan. As at 30 June 2011, a total of 55 actions specified in the plan had been completed, 34 were in progress and a further 55 were ongoing. Priorities for 2012 include the maintenance of existing measures (such as the consultative forums, the ongoing training and awareness raising programme) and the provision of services to victims of trafficking, as well as new actions, which include the review of the CSPE module on human trafficking developed for the Junior Cycle in second-level schools, the development and distribution of a leaflet on child trafficking, and the investigation of ways of raising awareness among airline staff and professionals working directly with families (such as public health nurses).

687. The Criminal Law (Human Trafficking) Act 2008 updated the law on the trafficking of children (see para. 206). Under this Act, a person found guilty of trafficking a child for the purposes of sexual exploitation, labour exploitation or the removal of organs is liable to life imprisonment. The legislation also criminalises the sale and purchase of children for any purpose, with a maximum penalty of life imprisonment.

688. The EU Directive on Preventing and Combating Trafficking in Human Beings and Protecting its Victims must be transposed by participating Member States by April 2013. To comply fully with criminal law measures in the Directive, it will be necessary to amend the Criminal Law (Human Trafficking) Act 2008, inter alia to expand the definition of “exploitation”.

689. National Referral Mechanism is the term used to describe (i) the process by which a suspected victim of human trafficking is identified; (ii) the range of assistance and support services available to potential and suspected victims of human trafficking; and (iii) how potential and suspected victims are referred or can apply to access each of those services. Assistance provided by the HSE is outlined in paragraphs 291-292.

690. In 2009, Ireland produced the first report regarding potential and suspected victims of human trafficking. It provides an extensive overview of trafficking in human beings as it
occurred in Ireland in 2009. Information was collected from a number of sources including the Garda National Immigration Bureau (GNIB), the Irish Naturalisation and Immigration Service (INIS) of the Department of Justice and Equality, and several NGOs. The report provides important information regarding suspected victims, their backgrounds and their experiences.

691. In the 2009 Annual Report of An Garda Síochána, it is stated that 68 incidents of human trafficking came to the attention of An Garda Síochána involving a total of 66 cases of potential and suspected trafficking in human beings, 17 of whom were minors. In the 2010 Annual Report, a total of 69 cases of alleged trafficking in human beings involving 78 alleged victims were reported. Of these 78 alleged victims, 19 were minors. Of these, 15 were subjected to sexual exploitation and one to labour exploitation, with the exploitation of the remaining three being uncategorised since there was no indication as to whether either labour or sexual exploitation had occurred.

692. Three other dedicated units in State agencies dealing with this issue are the Human Trafficking Investigation and Co-ordination Unit in the GNIB, the Anti-Human Trafficking Team in the HSE, and a specialised Human Trafficking legal team in the Legal Aid Board. These units have been set up as a response to Ireland’s international obligations to provide services to victims of the trafficking of human beings. Dedicated personnel are also assigned to deal with prosecution of cases in the Office of the Director of Public Prosecutions and in the New Communities and Asylum Seekers Unit in the HSE.

693. An Interdepartmental High Level Group was established by the Minister for Justice and Equality in late 2007 to recommend the most appropriate and effective responses to trafficking in human beings. The High Level Group comprises senior representatives from key government departments and agencies. Members engage with NGOs and international organisations in the manner of a round table forum. The Group has established five interdisciplinary working groups, one of which deals specifically with child trafficking.

694. The Garda Síochána Annual Policing Plans for 2010, 2011 and 2012 identified trafficking in human beings as a priority, with emphasis placed on prevention and detection of human trafficking. It was also identified as a policing priority in 2011 and 2010.

695. A number of awareness-raising and training initiatives have taken place since the establishment of the AHTU in 2008. Full details of the awareness-raising work undertaken to date can be seen on www.blueblindfold.gov.ie. This has included training for Gardaí, members of the Legal Aid Board and NGOs.

696. The Department of Justice and Equality provided funding of €258,500 to two NGOs during 2010: €250,000 to Ruhama, which assists victims of sexual exploitation, and €8,500 to the Migrant Rights Council Ireland (MRCI), which assists victims of labour exploitation. In 2011, funding was granted to Ruhama in the amount of €225,000, with €17,000 going to MRCI. The Department of Justice and Equality also part-funded a photography exhibition, “Not Natasha”, organised by the Immigrant Council of Ireland. The theme of the exhibition was sex trafficking and its effects on the victims.

697. Ireland also cooperates with the police forces of other jurisdictions, agencies and international organisations in an effort to combat the crime of human trafficking.

D. Children in street situations

698. The Programme for Government 2011-2016 commits, inter alia, (i) to end long-term homelessness and the need to sleep rough, and (ii) to review and update the existing Youth Homelessness Strategy, developed in 2001, including a specific focus on youth homelessness. A review of progress undertaken in 2008 by the HSE in conjunction with
other agencies found that significant progress had been made, especially in the areas of inter-agency cooperation, early prevention and an out-of-hours services. The DCYA engaged the Centre for Effective Services (CES) to undertake a review of the implementation of the Youth Homelessness Strategy in order to establish the extent to which it has been successful and to identify any blockages or challenges to its implementation. The CES will consult with the relevant service providers, NGOs and young people as part of this process and will make recommendations. This evaluation is in its final stages and publication is expected shortly. In advance of the findings of this review, the emerging view is that, overall, the Youth Homelessness Strategy was felt to have made a significant contribution to addressing the problem of youth homelessness and at the extreme end has helped ensure that children’s sleeping rough on the streets has been virtually eliminated. This is backed up by a recent report by the Dublin Region Homeless Executive in November 2011, which found no children sleeping rough in Dublin during their “Sleeping Rough head count”.

E. Children in conflict with the law, victims and witnesses

699. The youth justice system should be considered in its entirety, from the Garda Juvenile Diversion Programme through to the Children Court and the Children Detention Schools. It is important to note that a simple choice does not exist between the Diversion Programme, community sanctions and detention. The principles of the Children Act 2001 require the various authorities to apply, incrementally, a series of “filters” or tests to each case where a child comes into conflict with the law.

700. The first main filter is the Garda Juvenile Diversion Programme, involved at different stages and depending on the seriousness of the offence, the informal caution (without supervision) and the formal (supervised) caution, including possible involvement with a Garda Youth Diversion Project. The second main filter is provided by the non-custodial sanctions available to the courts, including dismissal under the Probation of Offenders Act 1907 and unsupervised sanctions (fines, disqualification, peace bond, curfew, etc.). The next stage involves the Probation Service supervised sanctions (Probation Order, Community Service Order and other community sanctions provided in the Children Act 2001 (as amended)). Finally, as a last resort, detention may be used.

701. The provisions for child victims in the giving of evidence under the Criminal Procedure Act 2010 are outlined in paragraph 210.

The administration of juvenile justice, the existence of specialised courts and the applicable minimum age of criminal responsibility

702. The age of criminal responsibility in Ireland is covered by Section 52 of the Children Act 2001, which came into force in 2007 by way of the Criminal Justice Act 2006. The age of criminal responsibility was raised from 7 years to 12 years, and in general children under the age of 12 years may not be charged with an offence. However, a child aged 10 or 11 may be charged with serious offences, such as murder, manslaughter, rape or aggravated sexual assault. A further protection is provided by the Act in that where a child under 14 is charged with an offence, no further proceedings may be taken without the consent of the Director of Public Prosecutions.

703. As was envisaged at the time of its enactment, the Children Act 2001 (as amended) was implemented on a phased basis to allow for the planned development and strengthening of services. The commencement of all outstanding provisions of the Children Act 2001 (as amended) was completed in 2007. That year, the Government approved the allocation of significant additional resources to allow for effective implementation of the
Act. They included extra staff for the Probation Service and the Irish Youth Justice Service, extra Judges for the Children Court and extra Juvenile Liaison Officers over the period 2007-2011. All of these additional resources have been put in place.

704. Central to the work of the Irish Youth Justice Service (IYJS) has been the National Youth Justice Strategy, 2008-2010, developed in partnership with the key stakeholders in the area of youth justice. Its aim was to provide a partnership approach among agencies working in that system. It included a number of goals and targets for the Government departments and agencies involved to help measure progress and assess where available resources should be targeted. The majority of the strategy’s objectives have been completed. The IYJS is currently in the process of developing a follow-up National Youth Justice Strategy under the umbrella of the National Children and Young People’s Policy Framework and as part of a National Anti-Crime Strategy.

Children deprived of their liberty, and measures to ensure that any arrest, detention or imprisonment of a child shall be used as a measure of last resort and for the shortest possible appropriate time and that legal assistance is promptly provided

705. The Children Act 2001, as amended by the Criminal Justice Act 2006, provides that the detention of a child is a measure of last resort and states that children under the age of 18 years may not be sentenced to imprisonment or committed to a prison. The Act establishes remand centres and children detention schools for the remand and detention of children aged less than 18. These provisions came into effect on 1 March 2007. The Children Act 2001 states that any penalty imposed on a child for an offence should cause as little interference as possible with the child’s legitimate activities and pursuits, and take the least restrictive form appropriate in the circumstances.

706. There has been a downward trend in the numbers of children being detained at any one time. The average annual use of detention was 134 places in 2004. This fell to an average of 119 in 2006, 104 in 2008 and 80 in 2011. The introduction of new community alternatives to detention, further diversion measures and increased inter-agency working should continue to reduce detention trends.

The sentencing of children, in particular the prohibition of capital punishment and life imprisonment, and the existence of alternative sanctions based on a restorative approach

707. There are a number of alternatives to detention available in the treatment of children in conflict with the law or before the courts. These are set out in the following paragraphs.

708. The Garda Juvenile Diversion Programme was placed on a statutory basis under Part 4 of the Children Act 2001.

709. The integration of the anti-social behaviour mechanism into the wider Garda Juvenile Diversion Programme provides an effective incremental process for dealing with those who are slow to change behaviour. The options include (i) do nothing/no further police action; (ii) the informal caution; (iii) the formal caution, which involves supervision by a Garda Juvenile Liaison Officer (JLO); and (iv) prosecution. Section 257F of the Children Act 2001 creates an offence of a child not complying, without reasonable excuse, with a behaviour order. In practice, a child involved in anti-social behaviour and continuing to act so may result in a Behaviour Order being sought by An Garda Síochána through the courts. This is a civil process for the most part and only becomes a criminal matter if a Behaviour Order, issued by a court, is not obeyed.

46 2005, CRC/C/IRL/2, Paragraph 753.
710. The Children Act 2001 was amended by way of Part 13 of the Criminal Justice Act 2006 relating to anti-social behaviour by children. These provisions, which commenced on 1 March 2007, set out an incremental procedure for addressing anti-social behaviour. The anti-social measures that apply to young people are separate from those that apply to adults, and the protections of the Children Act 2001 apply. With regard to children, these can include a number of actions ranging from a warning from a member of An Garda Síochána, a good behaviour contract involving the child and his or her parents or guardian, referral to the Garda Juvenile Diversion Programme, to the making of a Behaviour Order by the Children Court. The operation of anti-social behaviour procedures with regard to children is monitored and review of the relevant legislation is ongoing.

711. During the period from 1 March 2007 to 31 December 2011, 2,006 behaviour warnings were issued to children, 15 good behaviour contracts were made and three Behaviour Orders were issued by the Courts.

712. Where a court is making a decision on a child who has pleaded guilty, or is found guilty of committing an offence, it is important that the Judge has all the relevant information about the child’s history in order to consider his or her best interests. The pre-sanction report, prepared by a Probation Officer, facilitates this decision-making. It is important that the Probation Officer also has access to all the relevant information. The overriding principle is that detention must be used as a last resort.

713. Garda Youth Diversion Projects (GYDPs) are nationwide, community-based, multi-agency crime prevention initiatives funded by the IYJS, which seek to divert young people from becoming involved in anti-social and/or criminal behaviour. The projects are particularly targeted at 12-17 year-old at-risk youths in communities where a specific need has been identified and where there is a risk of them remaining within the justice system.

714. Since 2006, the nationwide number of GYDPs has increased from 64 to 100. Over the past three years, the primary focus has been on ensuring the quality and effectiveness of the services provided. As part of this process, the IYJS undertook a baseline analysis of the GYDPs, evaluating them in the context of local youth crime patterns, the profile of young people who offend and the available evidence regarding best practice and improvements sought by the projects. The results were published by the IYJS in July 2009 in the report Designing effective local responses to youth crime – A baseline analysis of the Garda Youth Diversion Projects. Work is underway to implement the recommendations of this report, with 14 trial sites developing a best practice approach. Funding for the 100 GYDPs amounted to just over €11 million in 2011.

715. Work has recently been completed by the IYJS, in partnership with An Garda Síochána and community-based organisations, on a new governance approach for the GYDPs to improve their effectiveness. The IYJS has also secured ESF part-funding for a Human Capital Investment Programme with the specific purpose of increasing the capacity of participants to find employment. ESF refunds for 2010 came to €2.008 million and to €1.463 million in 2011.

716. Young Persons Probation (YPP) is a specialised division of the Probation Service with dedicated resources to work with children aged 12-18 who come before the courts. YPP implements a multi-agency approach to addressing offending by children and works with a number of dedicated community-based organisations in providing services and interventions to child offenders and their families. FÁS and local VECs work in conjunction with some of these projects to offer training and education. Counselling and other support services are also offered. The Department of Justice and Equality funds the work of the YPP community-based projects around the country. These 19 projects received funding of just under €5 million in 2011.
717. Community sanctions provided for under the Children Act 2001 (as amended) were introduced on 1 March 2007. The sanctions are mainly supervised and managed by the Young Persons Probation (YPP) division of the Probation Service and provide the courts with alternatives to custody for young people who offend. Community sanctions are aimed at reducing the number of children sentenced to detention by the courts. These sanctions include the Mentor or Family Support Order, which is aimed at helping, advising and supporting the child and his or her family. Parents may also be involved in various steps under the Children Act 2001 through family and restorative justice conferences, as well as good behaviour contracts. Ten community sanctions are available to the courts, namely: a Community Service Order, Day Centre Order, Probation Order, Training or Activities Order, Intensive Supervision Order, Residential Supervision Order, Suitable Person (Care and Supervision) Order, Mentor (Family Support) Order, Restriction of Movement Order (managed by An Garda Síochána), and Dual Order.

718. Boys up to the age of 17 and girls up to the age of 18 are currently catered for in the Children Detention Schools. An interim provision allows for the detention of 17-year-old boys in St. Patrick’s Institution due to a lack of sufficient appropriate accommodation within the Children Detention School system. At the end of 2006, there were five Children Detention Schools in the country. There are currently three Children Detention Schools in the State, with a total capacity of 52 places (44 for boys and 8 for girls), all of which are located on the same campus at Oberstown, Co. Dublin.

719. In April 2012, the Minister for Children and Youth Affairs announced that capital funding over three years has been secured to end the detention of boys under the age of 18 in St. Patrick’s Institution, with the construction of new children detention facilities on the existing campus at Oberstown. It is expected that construction will commence in May 2013, with the project to be fully completed in July 2015. From mid-2014, when the first new detention places to be provided under this project become available, all children under 18 years of age sentenced by the courts will be detained at the newly integrated children detention facilities in Oberstown.

720. As of 1 May 2012, newly remanded or sentenced 16-year-old boys are detained in the Children Detention Schools in Oberstown. This means that the practice of detaining 16-year-old boys in St. Patrick’s has ceased. From 1 July 2012, the remit of the Ombudsman for Children’s Office was extended to include boys under the age of 18 detained in St. Patrick’s. The Minister for Children and Youth Affairs is currently developing proposals to amend the Children Act 2001 to provide for the management of all facilities on the Oberstown Campus on an integrated basis.

721. A Safeguarding Policy has been developed by the IYJS, designed to promote children’s welfare, to safeguard children from harm or abuse, and to protect staff from potential false allegations of abuse. This has been put in place following a review of the Child Protection Policy document, which had been developed and was in use across all of the Children Detention Schools. In addition to this policy, the IYJS employs a Child Welfare Advisor who deals with child protection and welfare issues, as well as standards, inspections and complaint mechanisms in detention. Children’s detention centres have also been visited by the Council of Europe Human Rights Commissioner and the Committee for the Prevention of Torture (CPT).

722. All staff employed in the Children Detention Schools are subject to vetting by the Gardaí prior to appointment. A comprehensive new Vetting Policy has been developed and is being implemented across all of the schools.

723. All females under the age of 18 are detained in one of the existing detention schools. At present, boys aged 17 are detained in St. Patrick’s Institution, a place of detention for 17-21 year-olds operated by the Irish Prison Service. This practice will cease in 2014 when
new detention facilities on the Oberstown campus are in place. In the meantime, much effort has gone into improving facilities and significantly increasing staffing at St. Patrick’s for those who will continue to be held there pending the development of new facilities. The separation of children and young adults has taken place in so far as is possible, given the physical limitations of the St. Patrick’s site.

Physical and psychological recovery and social integration

724. The primary role of the Children Detention Schools is to provide a programme of care and education aimed at rehabilitating those referred to them by the courts.

725. The IYJS is working with the HSE to develop a national specialist multidisciplinary service for young people in special care and detention, arising from the Report of the Commission to Inquire into Child Abuse, 2009: Implementation Plan, published by the OMCYA in 2009 (see paras. 413-414). Development of the service is at an advanced stage and the HSE is recruiting staff. A Director was appointed in September 2012. The new national service will incorporate an assessment service for children at risk of detention. This should reduce the need to remand children for the purpose of assessment. Development of a forensic child and adolescent mental health service is also planned and, once established, will provide in-reach for young people in detention.

Training activities developed for all professionals involved in juvenile justice

726. Training undertaken by all professionals involved in the juvenile justice system has been outlined in previous sections of this report.

F. Children belonging to a minority or indigenous group

727. Previous sections of this report have addressed specific provisions for children belonging to an ethnic minority (including asylum-seeking children), Irish-speakers and Traveller children.