

Regional Population Profile

Health Region: Dublin and North East



March 2024 Version 1.1

Document Control

Version No.	Approval Date	Section(s) Updated	Summary of Update	Approved by:
Version 1.0	6 th March 2024		Profile signed off by ADPH and presented to REO	Dr Deirdre Mulholland
Version 1.1	20 th May 2024	Population Size (Pg 5)	% Change in Population 2016 – 2022: Update of Table to include the 2022 population size for each CHN within the SW and removal of % change column	Dr Deirdre Mulholland

Welcome

This first standardised Regional Population Profile for the Dublin and North East Region provides an 'At a Glance' insight and understanding of the key demographic features of our population which will inform and support the planning of our health services.

This is the first chapter of a more comprehensive standardised regional Population Health profile which will be co-designed with key stakeholders over the coming months. The more comprehensive Population Profile will include information from across the region on different aspects of the population e.g. health status, health assets and services so as to ensure that it meets the evolving needs of key decision makers across Dublin and North East.

I would like to thank all those who have been central to the production of this profile: the HSE Population Based Planning Profile Group, the National Health Intelligence team, the National Health Service Improvement team, the Department of Health (DoH) Health Regions Planning Group and Statistical Analysis Unit and a special thanks in particular to my team in the Regional Department of Public Health.

Sincerely,

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This Standardised Profile gives an 'At a Glance' insight into a specific region through an agreed set of 12 parameters specifically chosen to support decision making for REOs and their Senior Management Teams.

While DNE as a region is not dissimilar from the national population profile, there is considerable variation within Community Health Networks (CHNs) in the Region.

Key Findings

•The Dublin and North East (DNE) Health Region serves the **largest** population in Ireland, just under 1.2 million people.

•The population size increased at a **higher rate** than the national average between 2016 and 2022. In some CHNs the increase was **more than twice** the national percentage increase; the size of the North Inner City Area Network increased by 17.9% (national increase 8.1%).

•The population is **slightly younger** than the national average, but there is variation between CHNs; **just under half of the CHNs** in DNE have a larger proportion of population aged **85+ years** than the national average.

•It is slightly **more affluent** than the national average but there are areas of significant deprivation; **25% of people in Ireland living in extreme deprivation live in DNE and the CHN with highest level of deprivation in the country is in DNE.**

•There are also areas of affluence, for example in Clontarf Area Network the proportion of people living in affluence is nearly twice that of that national average. Small Area mapping shows that areas of affluence and deprivation **co-exist** within CHNs.

It has some of the most ethnically diverse Community Health Networks in Ireland.
Rates of good and very good self-reported health are lower than the national average

•Smoking rates in some CHNs are much higher than the national average.

•Disability rates are high in CHNs with the biggest proportion of people aged 85+ years and/or high levels of deprivation.

While this profile examines demographic factors individually it is important to consider how **factors interact** and may affect health, behaviours and interactions with services, for example:

- Coolock and Finglas Area Networks have some of the highest proportion of population aged 85+ years and high levels of deprivation.
- Blakestown and the North Inner City Area Networks have a younger population, large degrees of ethnic diversity and numbers of people with limited English.

This profile provides an overview of the population. Exploring the population at smaller geographies, e.g. electoral districts or small areas within a CHN will reveal further differences within CHNs. Groups within populations will have different needs. The next stages of the Population Profile will include information on aspects such as health status and services. This, together with demographic data, can be used to inform and support health services and decision making.

Introduction: Dublin & North East (DNE) Region consists of counties North Dublin, Louth, Meath, Monaghan and Cavan and has a population total of just under 1.2 million people – the largest Health Region population. There are 20 Community Health Networks (CHNs) in DNE, with populations ranging in size from 35,500 (Coolock Area Network) to 77,800 (Cavan) people.



HSE Health Region	2022 Population	% of Total Pop
HSE Dublin & North East (A)	1,187,082	23.1%
HSE Dublin & Midlands(B)	1,077,639	20.9%
HSE Dublin & South East (C)	971,093	18.9%
HSE South West (D)	740,614	14.4%
HSE Midwest (E)	413,059	8.0%
HSE North & North West (F)	759,652	14.8%

Community Healthcare Networks

CHN	2022 Pop	CHN	2022 Pop
Cavan	77,711	Kilbarrack Area Network	60,233
Swords Area Network	77,414	Blanchardstown Area Network	58,985
South Louth & Bettystown	73,053	Southwest Meath	53,509
East Meath	71,257	North Inner City Area Network	52,872
Cabra Area Network	70,384	Central Meath	52,870
North Louth	70,004	Coastal Area Network	48,434
Monaghan	64,741	Finglas Area Network	47,370
Balbriggan Area Network	63,109	North Meath & Ardee	43,171
Blakestown Area Network	62,738	Ballymun Area Network	42,513
Clontarf Area Network	61,177	Coolock Area Network	35,537

% Change in Population 2016-2022



Age and Sex

fewer people in the 55-79 age groups.

Population numbers and the age structure are significant drivers of healthcare need. Populations that have greater proportions of very young and very old people tend to have greater healthcare needs. The population pyramid displays the total population for both male and females in DNE in 5 year age groups, and the national average is shown in black. For both male and female populations, the DNE population shows a greater proportion of people than the national average in the 20-44 year age groups. There are comparatively



Comparison across CHNs

The graph below shows the distribution of the population by age group (under 15, 15-64, 65-84 and 85+ years), nationally, for DNE and by CHN. The CHNs with the largest proportion of their population aged 65 years and above (displayed in green and yellow bars) are ranked at the top of the graph. DNE has a lower proportion of people aged 65+ years (13.1%) than the national average (15.1%). The CHNs with the highest proportion of people aged 65+ years are the Coastal (20.9%), Clontarf (17.1%) and Kilbarrack (16.2%) Area Networks. The three CHNs with the biggest proportion population aged 85+ years are Clontarf (2.7%), Coolock (2.4%) and Finglas (2.2%). The three youngest CHNs (population <15 years) are Balbriggan (23.8%), Blakestown (23.7%) and East Meath (23.5%).



- CHNs have different age structures and will differ in their healthcare needs.
- DNE has a slightly lower proportion of people aged 65+ years than the national average, but there is
 variation between CHNs, with some having a larger proportion aged 65+ than the national average. Eight of
 the CHNs in DNE have a larger proportion aged 85+ than the national average.
- More than half of CHNs have a younger population (0-14 years) than the national average.

Deprivation is a critical determinant of health need in a population. The Haase-Pratschke (HP) index uses a number of CSO Census parameters to determine an index of deprivation.

HP Index:

The DNE population is overall slightly more affluent **(25.4%)** than the national comparator **(24.9%)** but there are local variations.

HP Determinant	% DNE Pop	% National Pop
Age dependency rate*	33.3	34.7
Classes - professional, managerial & technical	39	39.9
Classes - semi & unskilled	14.1	14.3
Education - primary or lower	8.4	8.5
Education - 3rd level	33.5	33.9
Unemployed - aged 15+	4.6	4.3

<u>HP Determinants</u>: This table outlines some of the determinants that go to make up the HP index.

Overall, the determinants in DNE appear to be similar to the national picture, except for slight increase in the Age Dependency rate and classes – professional, managerial & technical.

*Definition : Percentage of people who are under 15 or over 64 years of age out of the total population

Deprivation score – National, DNE and by CHN

The graph below shows the distribution of deprivation in the population nationally, in DNE and by CHN in the DNE region. CHNs are ranked from the top by the higher degrees of deprivation (with the highest proportion of population that are extremely disadvantaged at the top – in red). As described above, DNE is **slightly more** affluent than the national average but there is variation within the region. The three CHNs with the greatest proportion of people who are very or extremely disadvantaged are Coolock **(29.9%)**, Finglas **(19.8%)** and Ballymun **(19.5%)** Area Networks. The three CHNs with the lowest proportion of people that are extremely or very disadvantaged are Swords **(3.0%)**, Coastal **(1.5%)** and Clontarf **(1.3%)** Area Networks.



Deprivation

The map below shows DNE using a five-point scale to display deprivation. Red and orange are deprived areas, while blue and purple are affluent. Yellow indicates average deprivation/affluence. The DNE region comprises a large section of the metropolitan Dublin area which is enlarged in the second map.



- There is a well-established social gradient in health. Increased deprivation is associated with poorer health outcomes, including lower life expectancy, development of long-term health conditions and mental illness.
- At a Health Region level average deprivation score is similar to the national picture, but considerable variation exists between CHNs, with very high levels of deprivation in some CHNs in DNE. Coolock Area Network has the biggest proportion population that are very or extremely disadvantaged in all of Ireland.
- The maps show there are pockets of deprivation within CHNs and further identification of areas of high levels of disadvantage can be examined at small area level allowing specific needs to be assessed, interventions targeted and tailored to reduce health inequalities.

Ethnicity and Country of Birth

People from minority ethnic groups can often experience poorer health than the rest of the population. Low incomes, poor working and housing conditions, poor social networks and nutrition as well as lack of access to health services can impact on the health of those from minority ethnic groups who have immigrated to a new country. This also affects the health of their children and future generations.

Of the six Health Regions, DNE has the lowest proportion of population identifying as 'white Irish'; **71.2%.** The national average is **76.6%.**

There is variation in ethnic background between CHNs. The figure below which displays ethnicity nationally, for DNE and by CHN. The CHN with the lowest proportion of people identifying as 'White Irish' at the top of the graph. The three CHNs with the largest proportion of people that are not White Irish are the North Inner City **(66.8%)**, Blakestown **(47.4%)** and Cabra **(42.8%)** Area Networks.

The proportion of White Irish Travellers is slightly lower than the national average (0.5% vs 0.6%) but the proportion is over double the national average in Coolock Area Network (1.6%) and Central Meath (1.3%).



Ethnicity was not stated for a considerable number of respondents in Census 2022. Country of birth also provides some indication of the ethnic, cultural and migration patterns within a region. The figure below displays country of birth nationally, for DNE and by CHN. **23.5%** of people in DNE were born outside of Ireland, higher than the national average **(20.0%).** For CHNs, the highest proportion of people born outside of Ireland are the top of the graph. As with ethnicity, the three CHNs with the lowest proportion of people born in Ireland are the North Inner City **(48.9%)**, Blakestown **(33.6%)** and Cabra **(33.3%)** Area Networks.



- Areas with higher levels of migration and minority ethnic groups may require specific interventions to ensure culturally appropriate services and information is available to the population
- Health needs may differ for different ethnic groups
- The DNE has a more diverse ethnic composition than the national average, and some CHNs within DNE have very high proportions of people born outside of Ireland and the UK

Language barriers lead to difficulties accessing suitable healthcare and unequal health outcomes. They also impact on the wider determinants of health, for example, employment. They impact on the cost and quality of healthcare.

In DNE, **18.7%** of people speak a language other than English or Irish at home, higher than the national average of **15.1%**. This ranges from **9.5%** in North Meath & Ardee to **35.7%** in Blakestown Area Network.

The graph below shows the number of people in each CHN that have poor or no English, ordered by the percentage population in each CHN that are foreign language speakers.

The number of people with poor or no English is highest in CHNs with the highest proportion of foreign language speakers (Blakestown, North Inner City and Blanchardstown Area Networks). However, while the proportion of foreign language speakers was relatively low, Cavan and Monaghan have a large number of people with no or poor English.



- Language barriers contribute to health inequalities
- Health communication and messaging needs to be tailored to the population so it can be understood and impactful
- Healthcare in CHNs in the DNE may require different levels of translation services and supports

Health

General Health

Self-perceived health provides a well validated and widely used measure of actual health.

Within **DNE 81.9%** stated that their health was either good or very good (just below the national average; **82.9%**). However, the map below shows there was variation between CHNs, with a number of CHNs in the North Dublin region reporting lower levels of good/very good health (displayed in brown).



Variation between CHNs

The graph below displays self-reported health nationally, for DNE and by CHN. The proportion of people with very good health in DNE is **52.9%**, slightly lower than the national average of **53.2%**. The CHNs with the highest levels of very good health are the Coastal Area Network **(60.%)**, East Meath **(58.2%)** and Southwest Meath **(58.1%)**. While the proportion reporting very good health is lowest in the North Inner City **(38.3%)**, there is also a high proportion **(27.0%)** where health status was 'not stated'.

The proportion of people with bad or very bad health is **1.7%**, the same as the national average. CHNs with the highest levels of bad or very bad self-reported health are Coolock **(2.7%)**, Finglas **(2.5%)** and Ballymun **(2.2%)**.



Percent of Population who smoke

- 13.3 % of the DNE population smoke
- National average is 13.1%

*This data refers to the population who smoked either daily or occasionally in 2022. (Please note that this is a percentage of total population. This differs from Healthy Ireland where respondents are aged 15+.)



CHNs with the highest % of people who % of population smoke who smoke North Inner City Area Network 18.3% 17.0% **Coolock Area Network** Cabra Area Network 15.8% **Finglas Area Network** 15.2% **Ballymun Area Network** 14.7% Kilbarrack Area Network 14.2% South Louth & Bettystown 13.9% Cavan 13.8% Central Meath 13.7% North Meath & Ardee 13.6%

% of Population who Smoke (2022)

18.1% 15.6% 13.1% 10.6% 8.1%



Percent of Population with a Disability

- 20.3 % of the DNE population have "at least one long-lasting condition or difficulty to any extent". •
- National average is 21.5% •



CHNs with the highest %	%
Coolock Area Network	25.1%
Kilbarrack Area Network	23.9%
Finglas Area Network	23.6%
Cabra Area Network	21.9%
South Louth & Bettystown	21.9%
Ballymun Area Network	21.4%
North Louth	21.4%
North Meath & Ardee	21.4%
Clontarf Area Network	21.3%
Balbriggan Area Network	20.9%

Percent of Population that are Carers

The graph below shows the proportion of the population that provide unpaid care, nationally, in DNE and by CHN.

- The proportion of people that provide unpaid care in DNE (5.3%) is slightly below the national average (5.8%).
- The Coastal Area Network has the highest proportion of people that provide unpaid care, at **6.5%**, over twice that of the North Inner City Area Network (**3.0%**).



- **General health status:** There is variation in self-reported health status in the CHNs in DNE. CHNs with higher levels of deprivation report lower levels of very good and good health.
- **Smoking:** Smoking rates are highest in areas of deprivation, e.g. Coolock Area Network and with diverse ethnic backgrounds and higher numbers of population with poor or no English, e.g. the North Inner City Area Network. Smoking cessation services need to be tailored to the population in question.
- **Disability:** One in five people have a disability. This is highest in Coolock, Kilbarrack and Finglas, areas with CHNs with considerable levels of deprivation and/or populations over the age of 85 years. While the Coastal and Clontarf Area Networks have older populations they have lower levels of disability, and higher levels of affluence.
- **Carers:** Providing unpaid care is an important contribution to the welfare of individuals, families and society. The proportion of people providing unpaid care differs in the DNE region, with highest levels in the Coastal Area Network, the oldest CHN population.

Education and Internet

Education is an important determinant of health and a strong relationship between education levels and health outcomes exists. Higher levels of education not only benefit the individual but have positive effects for the economy and society.

The graph below displays the highest level of education attained for the population aged 15+ years nationally, for DNE and by CHN. The CHNs are ordered with the highest proportion of people with third level education at the top of the chart.

41.8% have a third level education in DNE, slightly below the national average of 42.8%.

Clontarf (55.1%), Coastal (54.8%) and Blanchardstown (49.7%) Area Networks have the highest proportion of people with third level education.

The population with third level education is lowest in Coolock (29.3%), Finglas (32.8%) and Ballymun (35.2%) Area Networks.

Coolock (13.2%), Finglas (12.1%) and Monaghan (11.3%) have the largest proportion of people with primary or no education.



Internet Access

The internet is increasingly used for health-related purposes, to access health and information, and has implications for public health, health inequalities and healthcare access.

- In DNE, 6.8% of households have no internet access, less than the national average of 8.7%
- This ranges from 2.2% of households (Blanchardstown Area Network) to 13.0% of households (Monaghan)

- Improving educational outcomes in the most disadvantaged groups has the potential to make a positive impact on health inequalities.
- Examining routes for healthcare access and information in areas of low internet access may provide a means to narrow health inequalities.

Ordnance Survey Ireland map of Dublin & North East

The following map shows the boundary (in yellow) and major population centres and road network for the entire Health Region.



Population density map of Dublin & North East

The map below shows the population density of the whole HR, based on Census 2022 data. The density is shown at Small Area (SA) level, which provides the most granular view for mapping. The darker the colour, the more densely populated the area.



Data for this profile is based on Census 2022. Unless otherwise specified, Health Atlas Finder (HSE) was used to access and analyse CSO data to inform this profile. The Department of Health Statistical Analysis Unit generated the Population Size map and associated data table, % Population Change map, General Health maps, Smoking maps and associated data table, Disability maps and associated data table.

For further detail on any parameter contact your local Public Health Department or access the Health Atlas Finder (see below).

The Regional Department of Public Health can provide local expertise for the generation, analysis and interpretation of population profiles e.g

- Derive population profiles at sub-regional geographies e.g. Integrated Health Areas (IHA), Community Health Network (CHN), Primary Care Team (PCT), Electoral Division (ED) and Small Area (SA).
- Generate estimates for healthy behaviours and self-reported morbidity, applied to local populations and based on Healthy Ireland and TILDA national surveys.
- Interpret the significance of each parameter, define local variations and explore what this means in terms of health planning and the provision of services.

Health Atlas Finder

Health Atlas Finder allows the user to create a detailed population profile for any selected geography. HAF is a web-enabled tool and does not require the user to download software or to use a password. The Atlas home page can be accessed at https://www.healthatlasireland.ie/; or the Finder can be accessed directly at: https://finder.healthatlasireland.ie/; or the Finder can be accessed directly at:

Health Atlas Finder can allow the user to:

1. Prepare population pyramids and tables for any chosen area, based on Census 2022, and export these by PDF or Excel.

2. Show estimates of the numbers of people in a chosen geography with selected health behaviours and with selected chronic conditions.

3. Create maps for a given area, showing boundaries, services, population density and deprivation, and export these as a PNG (image) file.

Population projections will be available within the Finder by Q2, 2024, and this will allow the user to estimate the size and age structure of a population, projected as far ahead as 2056.

Department of Health profiles

The Department of Health has prepared an interactive site which allows users to explore some of the principal parameters, and display them via map or table. The DoH site can be used to show comparisons of major parameters by HR or CHN and provide national, regional and sub-regional pictures of major census characteristics. This site will go live during 2024.

Appendix 1: Parameters available in Health Atlas

THEME	PARAMETER
Age & Sex	Age group (5 year) - all
Age & Sex	Age group (5 year) - female
Age & Sex	Age group (5 year) - male
Age & Sex	Age (0 - 19 yrs) - all
Age & Sex	Age (0 - 19 yrs) - female
Age & Sex	Age (0 - 19 yrs) - male
Deprivation	Deprivation level - HP Index HP Index determinants
Deprivation Deprivation	HP Index determinants - female
Deprivation	HP Index determinants - male
Health	Population by general health
Health	Population by general health - female
Health	Population by general health - male
Health	Health indicators
Health	Health indicators - female
Health	Health indicators - male
Health	Persons with a disability by sex
Health	Carers by sex
Health Education	Persons who smoke Population aged 15+ years by age education ceased
Euucation	Population aged 15+ years by age education ceased -
Education	female
	Population aged 15+ years by age education ceased -
Education	male
	Population aged 15+ years whose education has not
Education	ceased
	Population aged 15+ years whose education has not
Education	ceased - female
Education	Population aged 15+ years whose education has not ceased - male
Education	Population aged 15+ years by highest level of education
Education	completed
2000000	Population aged 15+ years by highest level of education
Education	completed - female
	Population aged 15+ years by highest level of education
Education	completed - male
Occupation	Persons at work or unemployed by occupation
Occupation	Persons at work or unemployed by occupation - female
Occupation	Persons at work or unemployed by occupation - male
Occupation	Persons at work by industry
Occupation Occupation	Persons at work by industry - female Persons at work by industry - male
Occupation	Population aged 15+ years by principal economic status
Occupation	Population aged 15+ years by principal economic status -
Occupation	female
	Population aged 15+ years by principal economic status -
Occupation	male
Socio-Economic	Population by social class
Socio-Economic	Population by social class - female
Socio-Economic	Population by social class - male
	Persons in private households by socio-economic group
Socio-Economic	of reference person (by no. of persons)
Family	Population by marital status
Family	Population by marital status - female Population by marital status - male
Family	Families, family members & children in families, by size
	of family - Number of families in private households by
Family	size of family
	Families, family members & children in families, by size
	of family - Number of persons in private households by
Family	size of family
	Families, family members & children in families, by size
Family	of family - Number of children in private households by size of family
. anny	Families, family members & children in families, by size
	of family - Number of families in private households by
Family	size of family
	Families, family members & children in families, by size
Family	of family - Number of persons in private households by
Family	size of family

THEME	PARAMETER
Language	Population aged 3+ years by ability to speak Irish
Language	Irish speakers aged 3+ years by frequency of speaking Irish
Language	Irish speakers aged 3+ years by frequency of speaking Irish - female
Language	Irish speakers aged 3+ years by frequency of speaking Irish - male
Language	Speakers of foreign languages by language spoken
Language	Speakers of foreign languages by ability to speak English
Migration & Ethnicity	Citizenship
Migration & Ethnicity	Birthplace
Migration & Ethnicity	Ethnic or cultural background
Migration & Ethnicity	Usual residence 1 year ago
Migration & Ethnicity	Population by religion
Housing	Private households by type of accommodation
Housing	Persons by household type of accommodation
Housing	Permanent private households by year built Persons by permanent private household by year built
Housing Housing	Permanent private households by type of occupancy
Tiousing	Persons by permanent private household by type of occupancy
Housing	occupancy
Housing	Permanent private households by number of rooms
Housing	Persons by permanent private household by number of rooms
Housing	Permanent private households by heating
Housing	Permanent private households by water supply
Housing	Permanent private households by sewerage facility
Housing	Occupancy status of permanent dwellings on Census night
Housing	Private households by type
Housing	Persons by private household type
Housing	Private households by size
Family	Family units by family cycle by No. of families
Family	Family units by family cycle by No. of persons
Family	Family units with children by size and age of children
Family	Family units with children by type of family and age of children by No. of children
Family	Family units with children by type of family and age of children - No. of families (to be added)
Family	Family units with children by type of family and age of children - No. of children (to be added)
Access	Number of households with cars
Access Commuting	Number of households with internet access
	Usually resident by means of travel to work
	Usually resident by means of travel to school, college
Commuting	or childcare
Commuting	Usually resident by means of travel to work, school, college or childcare (total)
Commuting	Population aged 5+ years by time leaving home to
	travel to work, school or college
Commuting	
	Population aged 5+ years by journey time to work, school or college
Commuting	Population aged 15+ years by working from home
Commuting	Number of children under 15 in Childcare by age
Family	Families by age of youngest child by No. of families
Family	Families by age of youngest child by No. of persons
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