

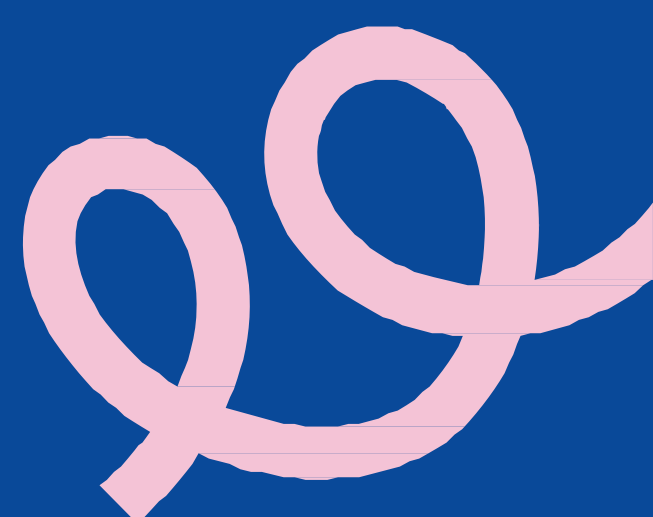
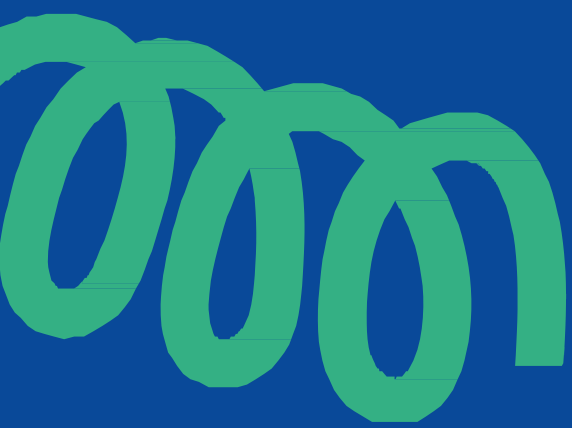
# Planet Youth

## Thurles Municipal District

Results of survey

# 2024

What young  
people say about  
living in the  
Thurles MD Area



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# About the Survey

Planet Youth is the local adaptation and implementation of the Icelandic Prevention Model (IPM). The IPM is an evidence-based primary prevention model, developed by researchers, community workers and policy makers in Iceland. Active in many countries globally, it is an adaptable system that aims to reduce substance use and improve wellbeing among adolescents. In 2024, County Tipperary adopted the Planet Youth programme which includes a survey and intervention stage.

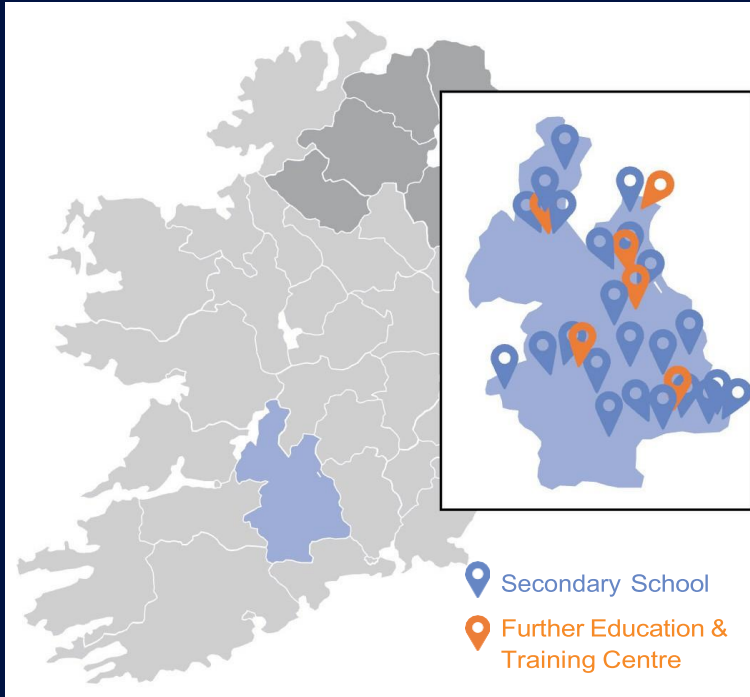
The questions in the survey ask about six domains of a young person's life (home, school, health & wellbeing, leisure, substance use and community) and seeks to determine risk and protective factors in each of those domains. Risk and protective factors are features that can either protect a young person, build capacity and good mental health, or lead to poor mental health and increased risk of developing a substance use disorder.

In 2024, all 30 secondary schools in Tipperary were invited to partake in the first of three Planet Youth surveys, as were the 6 further education and community training centers. A total of 77% of secondary schools and 100% of further education and training centers agreed to take part. Of the eligible students in those institutions, 87% students completed the survey between the 4th of November and 2<sup>nd</sup> of December 2024. The survey was anonymous and was completed during school time. Subsequent surveys will take place in 2026 and 2028 with intervening years used to identify actions based on the data.

This report is a summary of the 2024 data from the Thurles Municipal District which provides local communities and county-wide organisations with data that can be used to develop community actions in relation to youth spaces, transport, mental health and more.



# Who took the survey?

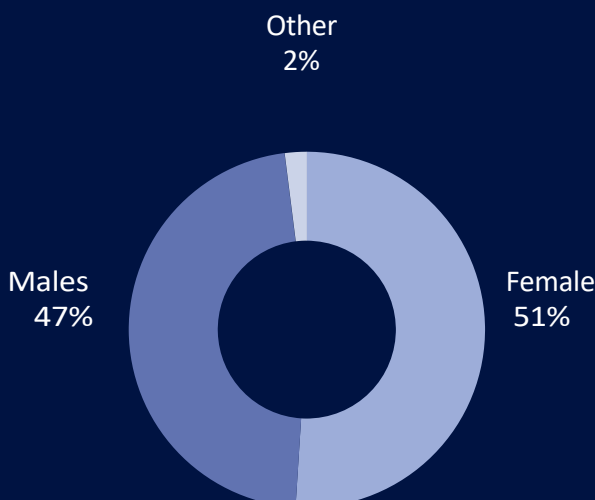


**1,596 adolescents** from **23 secondary schools** across County Tipperary completed the survey in 2024.

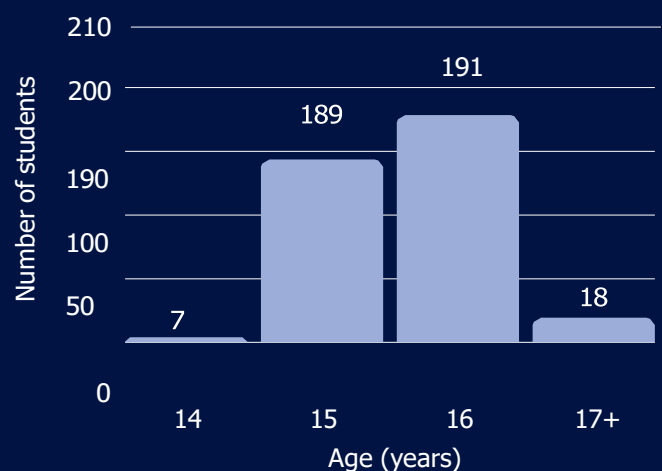
From this, **405 students** from **5 Secondary Schools** across the **Thurles Municipal (MD)**, participated. There is one important caveat to this report; the **MD** refers to the **school** (not the home) **MD** of the respondent.

Before reading the results of the Thurles MD survey, it is important to understand who is represented in this sample of 405 young people. The vast majority were in Transition Year (88%) and had sat the Junior Certificate several months before (83%). The genders and ages of the sample from the Thurles MD area are shown below.

## Gender



## Ages



2% of participants identified as transgender, non-binary, other, or selected "prefer not to say"



Adolescents from a range of **family** and **social** backgrounds took part in this survey. Below, we describe some of the important sources of diversity in our young participants.



## Financial Difficulties

A small % of adolescents said their parents didn't always have enough money to pay for **food** (6%) or **bills** (10%). However, a higher proportion said their parents didn't always have enough to pay for **clothes and school uniforms** (16%) or **sports and registration fees** (18%).

## Access

Most people (97%) said they had access to **reliable transport** to get to school, after-school activities, medical appointments and shopping.



## Ethnic Diversity



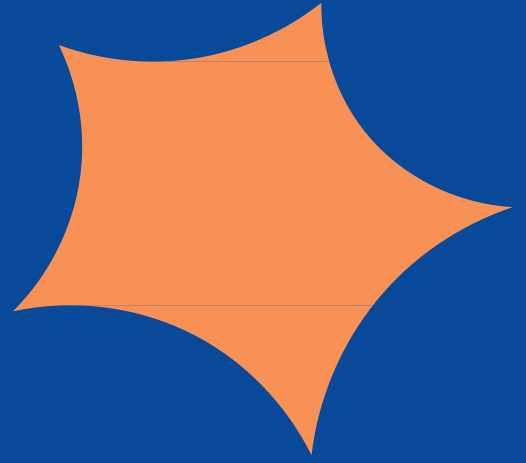
**75%** described their ethnic/cultural backgrounds as White Irish, **11%** as another White background and **14%** identified as an ethnic minority (Asian, African, Middle Eastern, Traveller, Roma, or Other).

# 29%

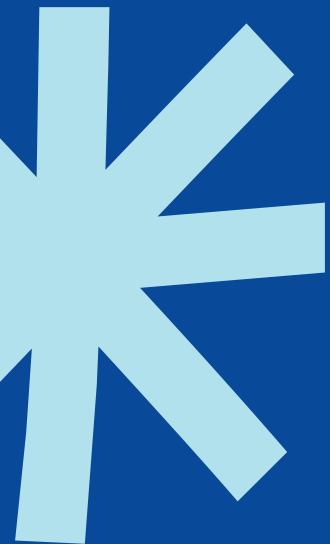


## Young caregivers

reported providing **care or support** to a family member or loved one due to their physical or mental health condition, disability, addiction, or other challenge.



# Results



# Home life

Many habits are formed at home. Here we focus on the relationship between adolescents and their parents/carers, including time spent together and rule-setting.

## Family Time

72% of teens “often” or “very often” spend time with their parents at the **weekends**. 70% do so on **weekdays**. 3% said they never spend time with their parents.



93% said it was easy to receive **caring and warmth** from their parents and 83% said it was easy to get **advice** about personal matters



Half of the sample said they eat a **meal with parents/ carers** every day (50%), while 80% do so 4+ days in the week.



Roughly half of teens said their parents set **rules** about what they can do **in the home** (49%) and **outside** the home (53%), with 45% having a definite **time they need to be home in the evenings**.



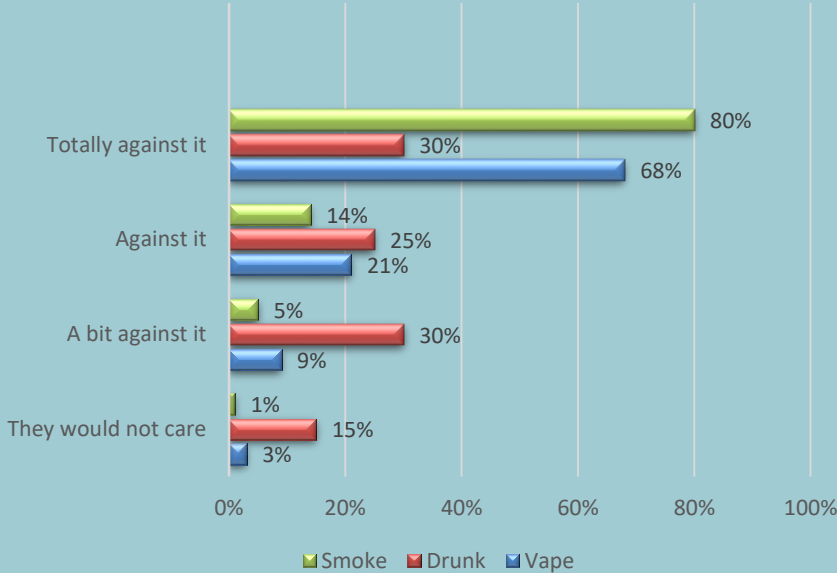
95% of respondents said they often or very often **felt safe** at home.



This survey found that **8%** often spent time outside the home because they **don't get on** with other family members, with an additional **13% doing this sometimes**.

# Parental attitudes matter

## Perceived Parental Reactions



We asked young people *How do you think your parent/carer would react if you... smoked?... vaped?...etc.*

Very few said their parents “would not care” if they vaped (3%) or smoked (1%). Only 55% said their parents were “against” (25%) or “totally against” (30%) them being drunk. 30% felt their parents were “a bit against” drunkenness.

For example, ever vaping typically declined when adolescents believed their parents were strongly against it across other Tipperary MD areas. **However, this pattern was not observed in Thurles MD, where vaping rates remained consistent at 33% regardless of perceived parental attitudes.**

## Parent health

**10%** of adolescents in the Thurles MD area, said that their parent had a **drinking or drug problem** at some point in the young person’s life, and **8%** said their parent had experienced a **mental illness**.

**Poor mental health** was reported by 13% of adolescents with a **parental history of mental illness**, compared to 12% among those without such a history. In the **Thurles MD area, this differs from other Tipperary Municipal Districts**, where adolescents with a parental history of mental illness were nearly three times more likely to report poor mental health, indicating little disparity in Thurles regardless of parental mental health history.

The **absence of expected associations** in Thurles MD suggests that parental **influence may be moderated by other factors**, including **peer norms, perceived behavioural acceptability, and environmental access**. This may indicate a higher level of **normalisation of vaping**, alongside a **more complex set of influences on adolescent mental health** beyond parental history alone.

## Violence at home

**11%** said they had witnessed **physical violence** in their home, where an adult was involved, and **15%** said they had witnessed **psychological violence** in their home where an adult was involved.

Young people in the Thurles MD area who witnessed physical or psychological violence in the home were **more than twice as likely to say their mental health was bad** (23%), compared to those who said they did not witness physical or psychological violence (10%).

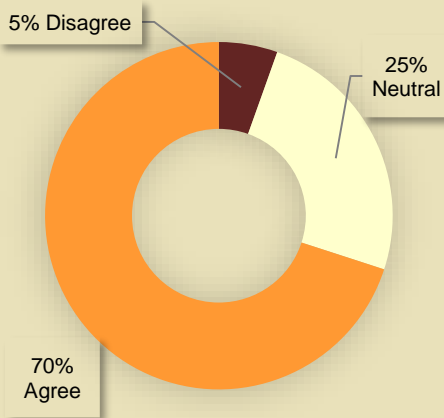


# School life

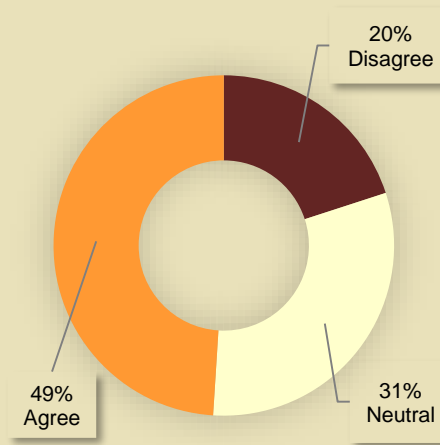


Adolescents spent a large portion of their waking hours at school, and enjoying school is a key predictor of general wellbeing at this age. Secondary school students in the Thurles MD area generally reported positive experiences in school...

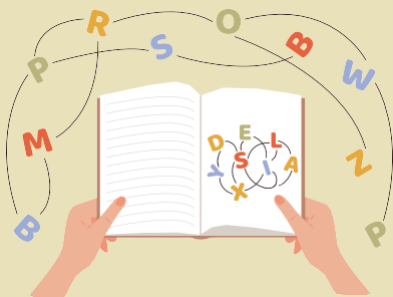
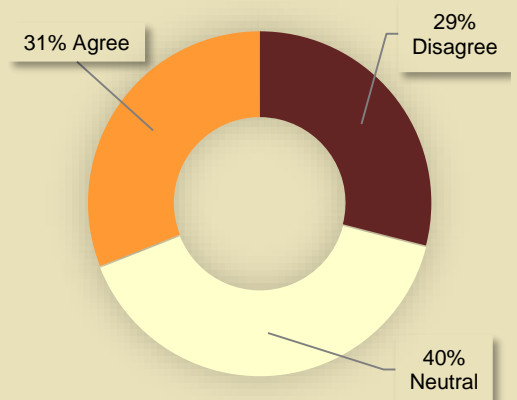
## I get along with the teachers



## I feel good at school



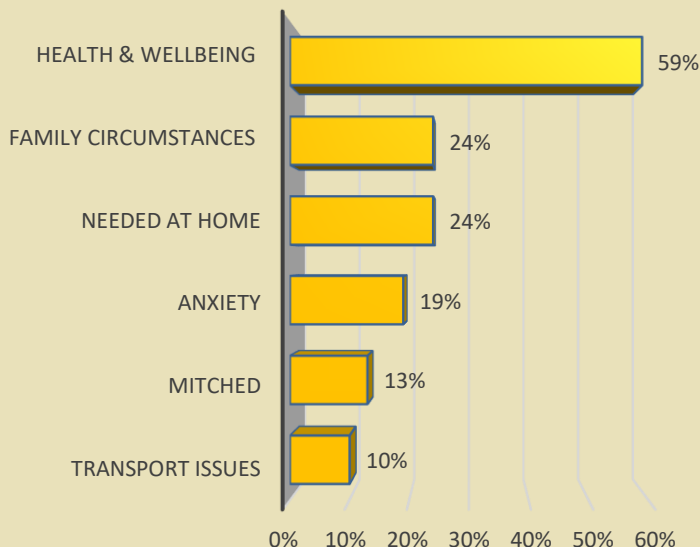
## Schoolwork is Interesting



28% of respondents said they found schoolwork **hard**. **Learning difficulties** or **neurodivergence** may account for some of these responses. 18% of respondents in Thurles MD schools said they had been diagnosed with at least one of the following: **dyslexia**, **dyscalculia** or **dyspraxia** (13%), **ADHD** (7%), or **autism** (4%).

## School Absence

### Reasons for school absence

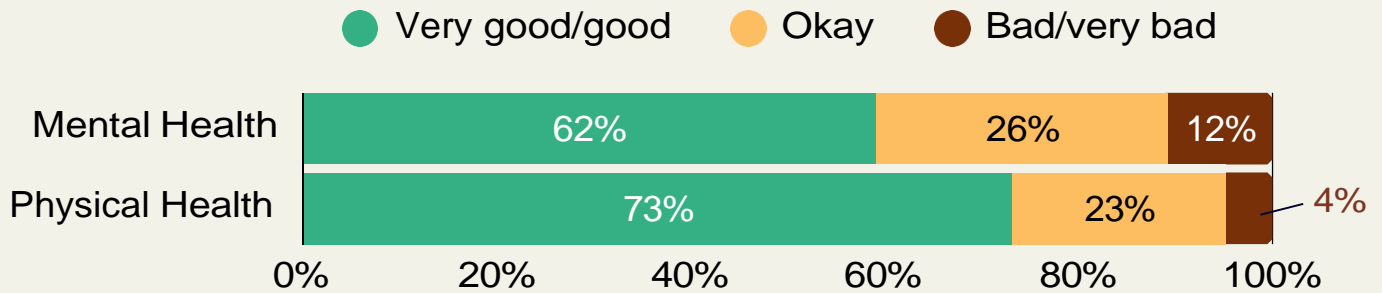


The **average** amount of school missed in the past month was 3.2 **days**. Over a third of the sample had missed 3+ days in the past month (44%).

The graph to the left shows 59% of respondents missed at least one day of school in the past month due to health and wellbeing, 24% due to family circumstances and 20% due to anxiety.

# Health & Wellbeing

Most adolescents in Thurles MD rated both their mental and physical health as good (or very good). However, three times as many young people reported bad **mental** health (12%) than reported bad **physical** health (4%).



## Mental health support

When asked “Have you ever thought you **could do with help** with mental health issues?” 34% of adolescents said yes. However, when asked if they ever **looked** for help or support for a mental health issue, only 21% said yes.

Among teens in the Thurles MD that looked for help, 69% said the help was available in a **timely manner** when they needed it.



## Self-harm & suicide

Over **1 in 4** adolescents in this sample said they had harmed themselves on purpose (27%). **1 in 4** said that a **friend or someone close** to them had attempted suicide (26%), and **7%** said they had **attempted suicide** at some point in their lifetime.

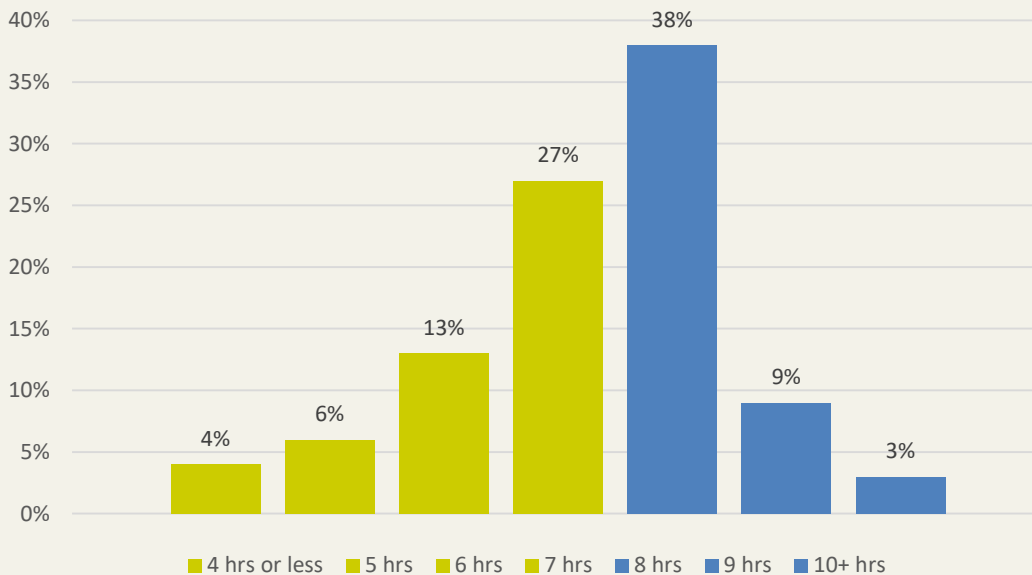
There were strong **gender differences** in **mental health**, but not in physical health: 69% of males reported their mental health as good, compared to just 56% of females. Female participants say their mental health was bad at a slightly higher rate than males (13% vs 11%). Reports of ever **self-harming** were significantly higher in females (32%) compared to males (21%). This gender gap in adolescent mental health and self-harm is supported by other research from Ireland, UK and the US [see references [1-3](#)].



**Sleep** affects emotional wellbeing and cognitive functioning, and is particularly important during development. It is recommended that adolescents get **8-10 hours** of sleep [4].

The graph below shows that half of the sample (**50%**) said they get **8+ hrs sleep** a night on average (blue). This leaves a further **50%** who get 7 hours sleep or less (yellow). The percentage who got 7 hours or less sleep was only slightly higher in males (51%) compared to females (48%).

**Percentage of sample and hours of sleep**



Sleep is often **displaced** by other activities like screen use or socialising. Below shows some of the activities that may be in competition with sleep:

**80%**

have a phone in their bedroom at night



**17%**

often use their phones between midnight and 6am



**31%**

Outside past midnight at least 1 night in the past week

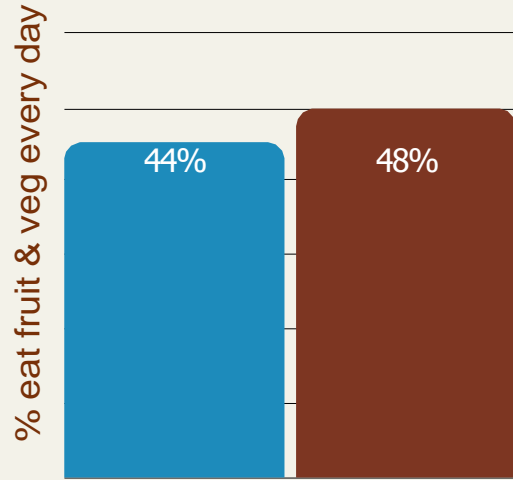
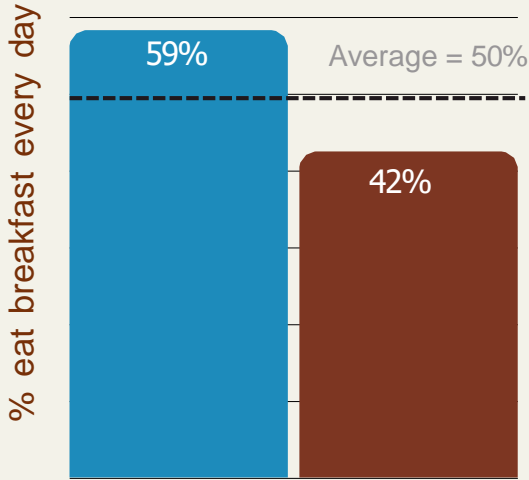


## Diet

Half of respondents said they eat breakfast everyday (50%), and a similar percentage said they ate fruit and vegetables every day (45%). Males were more likely to eat breakfast every day, while females more likely to eating fruit and vegetables.



● Males ● Females

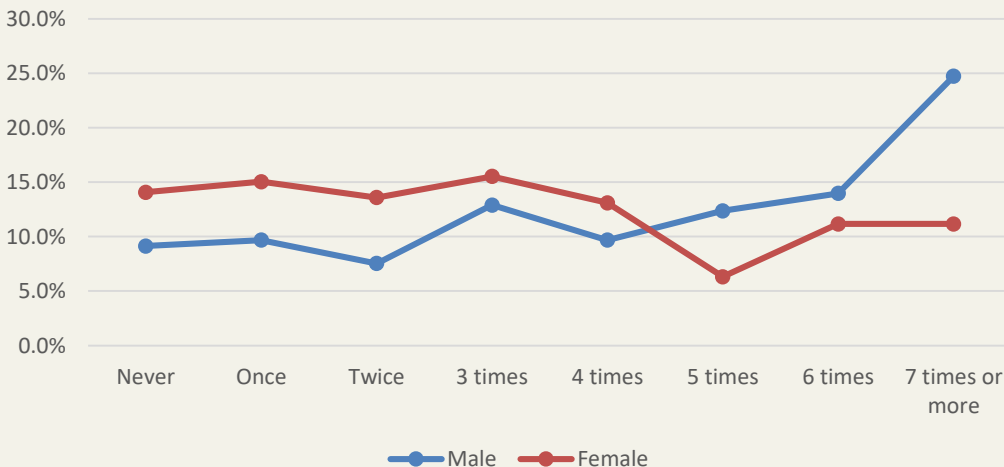


## Physical activity

According to the Health Service Executive and World Health Organisation, adolescents should be doing at least **1 hour per day** of moderate intensity activity (e.g. where breathing rate is raised).

Just **18%** of adolescents said they engaged in an hour of physical activity every day that raised their breathing rate (25% of males; 11% of females).

Hour of physical activity per day



# Hobbies & Leisure



The majority of adolescents (59%) play a **team sport** and 77% do an **individual sport** (swimming, running, etc) outside of school at least once a week.



31% of adolescents spend 3 hours per day on **social media**, with 23% spending 5+ hours per day on it (24% of females, 23% of males).

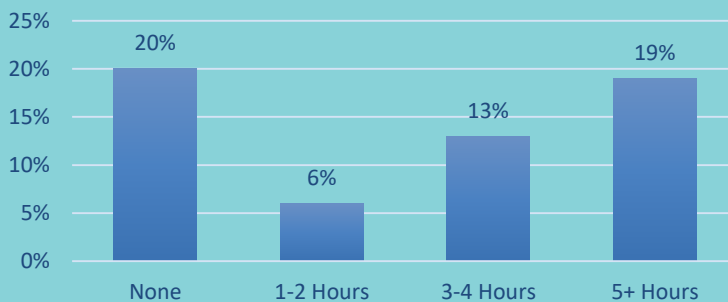
Significantly more males reported playing **video games** at least once per week (79%) compared to females (27%)

## Social media & mental health

The graphs below show that the relationship between time spent on **social media** and **mental health** is not simple.

The more time spent on social media the more likely young people in the Thurles MD were to rate their mental health as bad, however those who spent **no time** on social media reported higher rates of bad mental health (20%) than those who spend 1-2 hours on it (6%). This supports the "**Goldilocks Hypothesis**" which suggests that *some* social media use may be beneficial but very low or high levels may be harmful [5].

% reporting "bad" or "very bad" mental health & time spent on social media



# 47%

said social media made them feel less **happy about how they look** (57% of females, 38% of males)

# 12%

said they were **bullied online** in the past year (13% of females, 12% of males)

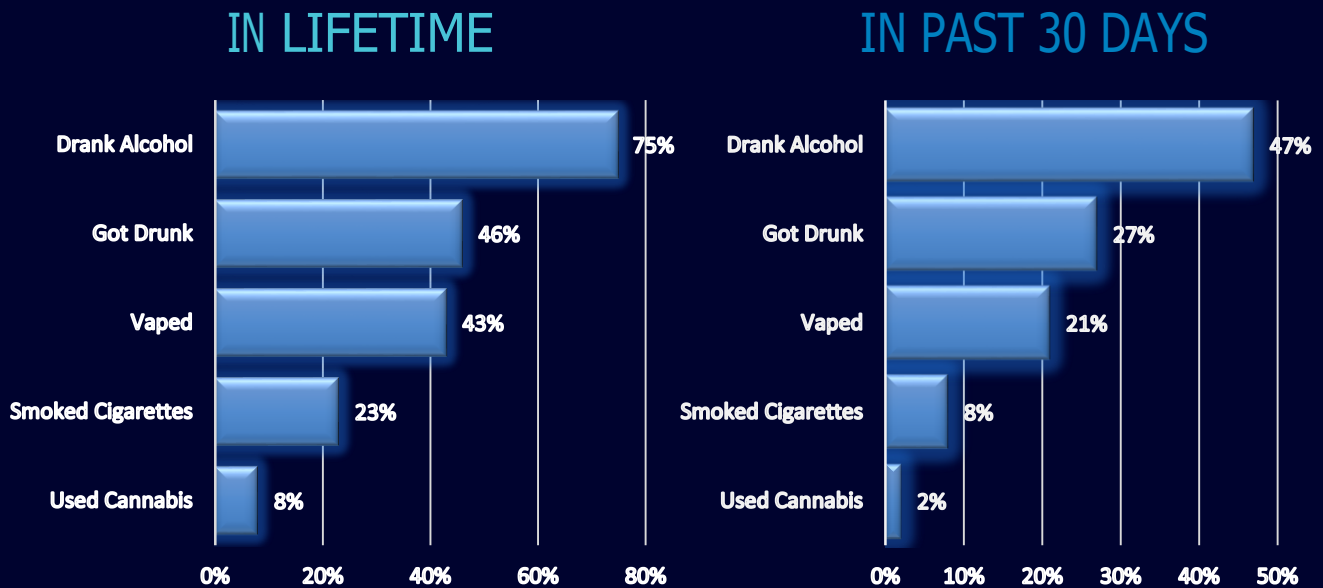
# 25%

said they were asked to send a **sexually explicit image** of themselves via social media in the past year (32% of females, 18% of males)

# Substance use

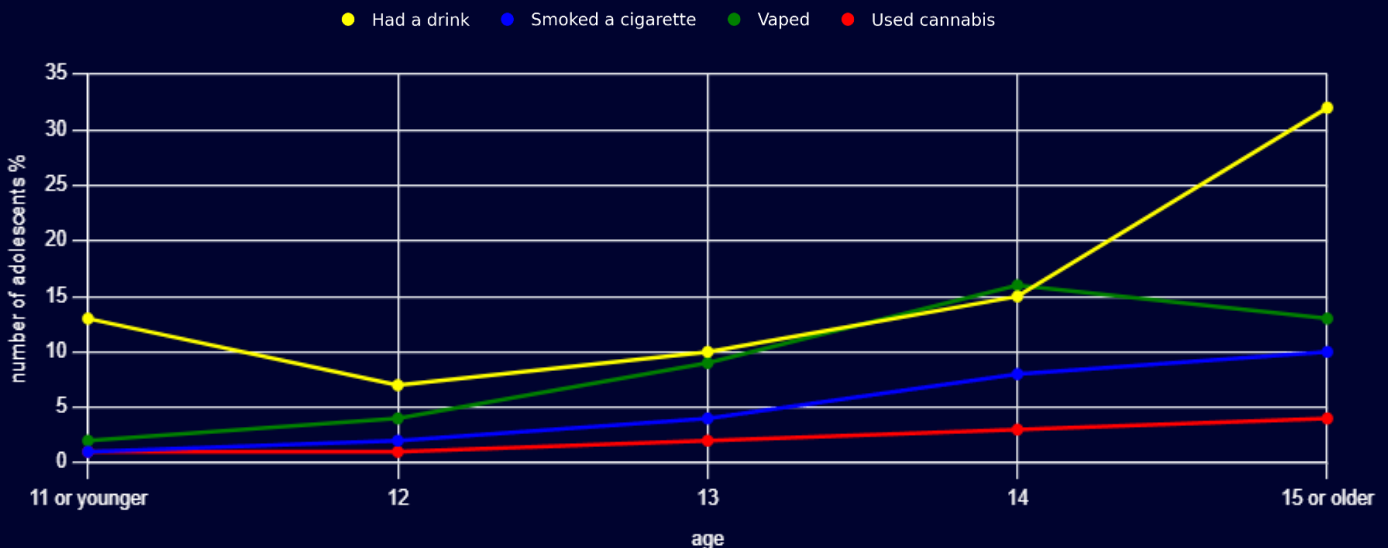


Adolescents were asked if they had **ever** used various substances (alcohol, cigarettes, etc.). If they said yes, they were asked if they had used them in the **past month**. The graphs below show the proportion who used these substances at least once in these timeframes:



## When does it start?

We asked adolescents when they used each substance for the first time. We might expect the likelihood of having used a substance increases linearly the older a child gets, but two substances do not conform to this trend: (1) A portion of the sample (11%) had **alcohol** at 11 or younger and (2) The peak age for onset of **vaping** was 14 years old. Over 1 in 3 adolescents (37%) said they started vaping at age 14 specifically, while 71% reported vaping at 14 years *or younger*.



# Community



**84%** of respondents in the Thurles MD area said that they often **felt safe** in their neighbourhood, leaving **16%** who only felt safe “sometimes” or less often.

**53%** said that there were **activities** available to them, and **44%** said there was a suitable outdoor youth space in the area they live. For 15% of the sample, there were activities available but they could not access them due to **lack of transport**.

## Community safeguarding

The community plays a vital role in keeping young people safe. They can do so by making sure public health policies are followed, limiting access to spaces where risky behaviours take place, and providing alternative activities.



Among teens who had vaped in Thurles MD, **42%** said they had bought their vapes directly **from shops** and **22%** said they did so often.

This is despite it being illegal to sell vapes to minors since December 2023.



**38%** of teens in the sample said they **drank outdoors**, such as on a street, or in a park/field (19% rarely, 13% sometimes, 6% often).

62% of the full sample said their **parents** had provided them with alcohol (18% often; 19% sometimes; 26% rarely).



46% indicated that there was a suitable after-school **social space** where they could meet friends or do activities while 28% indicated that there wasn't.

**31%** told us that there is **no public transport** near their place of home.

# Acknowledgments

Many thanks to the students who completed this survey, the schools who enabled the data collection, and the Planet Youth liaison workers across schools. Thanks also to Comhairle na nÓg and Jigsaw Youth Advocates for their contribution to the survey.

We would also like to acknowledge and thank Dr. Niamh Dooley [ref.7] and the RCSI medical students who created the original county report, which this MD report is based on, for their foundational work and contribution to the study.

Finally, we would like to thank our partners for funding Planet Youth Tipperary and for their continued support:

## Funding partners



## Implementation partner



## Academic partner



### Please cite this report as:

Daly, M. "Planet Youth Thurles MD Area 2024 report: What young people say about living in the Thurles Municipal District". Published online: 2026

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[4] Hirshkowitz et al. (2015). **National Sleep Foundation's sleep time duration recommendations: methodology and results summary**. Sleep Health. Link: [https://www.sleephealthjournal.org/article/S2352-7218\(15\)00015-7/fulltext](https://www.sleephealthjournal.org/article/S2352-7218(15)00015-7/fulltext)

[5] Przybylski & Weinstein (2017). **A Large-Scale Test of the Goldilocks Hypothesis**. Psychological Science. Link: [https://journals.sagepub.com/doi/10.1177/0956797616678438?url\\_ver=Z39.88-2003&rfr\\_id=ori:rid:crossref.org&rfr\\_dat=cr\\_pub%20%20pubmed](https://journals.sagepub.com/doi/10.1177/0956797616678438?url_ver=Z39.88-2003&rfr_id=ori:rid:crossref.org&rfr_dat=cr_pub%20%20pubmed)

[6] Health Behaviour in School-aged Children study (2023), **Data browser (findings from the 2021/22 international HBSC survey) E-cigarette use: lifetime use**. Link: <https://data-browser.hbsc.org/measure/e-cigarette-use-lifetime-use/#chart>

[7] Qin, Fitton, O'Connell & Dooley "Planet Youth Tipperary 2024 report: What young people say about living in Tipperary". Published online: 2025

