



The state we are in: inequality in Ireland 2025

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Executive Summary

Executive Summary

The *TASC Inequality Report 2025* finds that despite economic growth and temporary government interventions, income inequality, poverty and material deprivation remain persistent and deeply rooted in Irish society. The phasing out of short-term cost-of-living supports risks exposing underlying structural weaknesses and reversing recent progress.

The report draws on data from the World Inequality Database (WID), the CSO's Survey on Income and Living Conditions (SILC), and recent ESRI analysis to chart the development of inequality and poverty in Ireland over the past several decades. According to the WID, income inequality in Ireland has followed long-term trends seen across Western Europe, with market income shares for the top 10% and top 1% increasing steadily since the 1980s. However, data from SILC and recent ESRI analysis show that, once taxes and transfers are taken into account, the Gini coefficient for disposable income has remained stable, hovering near 0.3 for almost 35 years. This stability reflects the redistributive effect of Ireland's tax and welfare system, which continues to narrow the gap between market and disposable incomes.

Beneath these averages, the report shows stark disparities in how income, poverty and deprivation are experienced. Children, lone-parent families, those with disabilities or long-term illnesses, renters, people with lower levels of education, and older individuals living alone are consistently overrepresented in the lowest income quintiles. For example, 46.4% of unemployed individuals and 44.3% of those unable to work due to illness fall into the bottom income group. One-adult households with children under 18 face poverty and deprivation rates of 24.2% and 46.3% respectively.

Temporary income supports introduced in response to COVID-19 and the cost-of-living crisis played a critical role in preventing a rise in poverty. Measures such as the Pandemic Unemployment Payment, energy credits, and lump-sum social welfare payments significantly reduced poverty risk for vulnerable households. However, when these supports are excluded from analysis, poverty and deprivation among key at-risk groups are shown to be considerably higher. In some cases, these underlying rates are approaching or exceeding levels last seen during the Great Recession.

A special focus chapter on inequality, isolation and loneliness finds that poverty and social exclusion are closely linked to reduced social contact, feelings of loneliness, and poor mental health. People experiencing homelessness, people with chronic illness or disability, carers, older people, immigrants and lone-parent families are among those most likely to feel isolated or disconnected. While programmes such as social prescribing show promise, coverage remains limited. Addressing loneliness requires tackling the root causes of inequality and investing in long-term supports that enable social participation.

The report concludes that reliance on temporary measures is not a sustainable strategy for tackling inequality. What appears in national statistics as progress may, in many cases, be a short-lived reprieve. The end of emergency income supports in 2024 has created a turning point. Without a policy shift towards permanent reform, many households risk falling deeper into hardship.

To ensure resilience and inclusion, the report calls for structural changes: adequate income supports, affordable and secure housing, improved access to early years and education, and a universal system of care. A fairer Ireland depends not only on short-term relief, but on long-term investment in public services and income security.

1. Introduction

1. Introduction

Over the past decade, inequality has become one of the defining issues in economic research and public policy. Its return to the centre of political debate has been driven by two developments: the fallout from the Global Financial Crisis and the influence of Thomas Piketty and his co-authors.¹ Piketty's work provides compelling evidence that, after a long period of decline in the mid-twentieth century, inequality has been rising again across much of the developed world. One of his key findings is the increasing concentration of income among the top 10%, and especially the top 1%, a trend that has reshaped the social and political landscape of many countries.

Ireland reflects these global patterns in complex ways. It has one of the higher levels of market income inequality among OECD countries, but this is significantly reduced through taxes and social transfers. The Irish state plays a large role in moderating inequality after the fact. As a result, Ireland's disposable income inequality is relatively average internationally, even though its underlying income distribution is highly skewed. This structural reliance on redistribution, rather than reform of the primary distribution of income, remains a central feature of the Irish model.

This is the sixth edition of *The State We Are In: Inequality in Ireland*,² continuing the work of the *Cherishing All Equally* series published between 2015 and 2020.³ Across the last decade of research, a mixed picture has emerged. Some indicators, such as the "at risk of poverty" rate and the Gini coefficient, have shown signs of improvement, at least in the short term. However, others, such as enforced deprivation and homelessness, have worsened or remained stubbornly high. And many of the recent gains that have been made appear to be the result of large but temporary state interventions rather than long-term structural change.

A core theme of this year's report is the fragility of those gains and the deeper, structural inequalities that persist in Irish society. The last five years saw a series of exceptional state interventions—Pandemic Unemployment Payments, energy credits, lump-sum welfare increases—introduced to protect incomes and living standards. These measures worked in the short term. But they did not change the underlying dynamics. As they are withdrawn, levels of deprivation are rising again, especially among groups that have long been most exposed to inequality and insecurity.

This year's special thematic chapter focuses on loneliness, highlighting how economic inequality and social isolation are intertwined. Loneliness is often treated as an individual or psychological issue. But this chapter shows that it is also a structural phenomenon, shaped by poverty, housing insecurity, chronic illness, disability, and marginalisation. Those most at risk of economic hardship are

1 Piketty, T. (2014). *Capital in the twenty-first century*. Harvard University Press.

2 Sweeney, R. (2019). "The state we are in: inequality in Ireland today." Dublin: TASC. https://www.tasc.ie/assets/files/pdf/18457_inequality_in_irelandinnerfinalweb.pdf; Sweeney, R. (2020). "The State We Are In: Inequality in Ireland 2020." Dublin: TASC. https://www.tasc.ie/assets/files/pdf/the_state_we_are_in_tasc_final_030320.pdf; Sweeney, R. and D. Storrie. (2022). "The state we are in: inequality in Ireland 2022." Dublin: TASC. https://www.tasc.ie/assets/files/pdf/2205-4_tasc_inequality_in_ire_2022.pdf; Sweeney, R. (2023). "The state we are in: inequality in Ireland 2023." Dublin: TASC. https://www.tasc.ie/assets/files/pdf/the_state_we_are_in_tasc_2023_final.pdf; Gilmore, O. (2024). "The State We Are In: Inequality in Ireland 2024." Dublin: TASC. https://www.tasc.ie/assets/files/pdf/tasc_inequality_report_2024_final.pdf.

3 O'Connor, N. and C. Staunton. (2015). "Cherishing All Equally: Economic Inequality in Ireland." Dublin: TASC; https://www.tasc.ie/assets/files/pdf/tasc_cherishing_all_equally_web.pdf; Hearne, R. and C. McMahon. (2016). "Cherishing All Equally 2016 Economic Inequality in Ireland." Dublin: TASC. https://www.tasc.ie/assets/files/pdf/tasc_inequalityreport_2016_web.pdf; Wickham, J. (2017). "Cherishing All Equally 2017 Economic Inequality in Ireland." Dublin: TASC. https://www.tasc.ie/assets/files/pdf/cherishing_all_equally_2017.pdf; Sweeney, R. and R. Wilson. (2019). "Cherishing All Equally 2019: Inequality in Europe and Ireland." Dublin: TASC. <https://www.tasc.ie/assets/files/pdf/20190220114456.pdf>; Sweeney, R. (2020). "Cherishing All Equally 2020: Inequality and the care economy." Dublin: TASC. https://www.tasc.ie/assets/files/pdf/cae_2020-report-final.pdf.

also those most likely to report feeling isolated, disconnected, or excluded from social life. Tackling loneliness must therefore be understood as part of the broader project of addressing inequality and building a more inclusive society. (This chapter was written by Adeelia Goffe, Maria Pachowicz and Oisín Gilmore.)

In **Chapter 2**, we examine the current state of income inequality in Ireland. Drawing on long-run historical data from the World Inequality Database (WID) and Survey on Income and Living Conditions (SILC), we show that income concentration among the top 10% and top 1% remains high, while the bottom half of the population continues to receive a modest share of national income. The chapter also examines the effect of taxes and transfers on overall inequality, demonstrating the stabilising, but not transformative, impact of the Irish welfare state.

Chapter 3 explores income sufficiency, poverty and deprivation. It shows that many households remain heavily reliant on social transfers to achieve even a basic standard of living, and that deprivation rates have begun to rise again. While Ireland's headline poverty rate appears relatively low, this is primarily the result of redistribution. Material hardship remains widespread, particularly for those on fixed or low incomes.

In **Chapter 4**, we examine the groups most affected by inequality, poverty and deprivation. These include children, lone-parent families, people out of work due to illness or disability, renters, and those with low levels of education. Nearly half of those in lone-parent families (44.5%) and those unable to work due to long-term illness (38.5%) experience enforced deprivation. Renters are three times more likely than homeowners to experience poverty. The chapter shows how inequality clusters around particular social positions and how structural disadvantage continues to reproduce itself across generations.

Chapter 5, the thematic chapter, focuses on inequality, loneliness and isolation. It draws on national and international data to explore how loneliness is shaped by economic and social conditions. The chapter shows that loneliness is most acute among groups already marginalised: older adults living alone, people with disabilities, carers, immigrants, and those experiencing homelessness or chronic illness. It argues for a national strategy on loneliness, with dedicated funding, embedded loneliness indicators in public health and planning, and investment in public transport, digital access and community infrastructure. It also highlights the importance of intergenerational programmes and volunteering opportunities in fostering social connection.

Chapter 6 brings the findings together and sets out a detailed set of policy recommendations. It warns that the end of emergency income supports in 2024 represents a critical turning point. Without structural reform, the progress of recent years may unravel. The chapter calls for a long-term commitment to adequate income supports, secure and affordable housing, universal public services, and measures to combat not just income poverty but the broader experience of social exclusion—including loneliness.

Taken together, the chapters in this year's report paint a clear picture. Ireland's inequality is not only material but social. It is experienced not just in income and housing, but also in people's ability to feel included, connected and valued. Temporary supports have helped, but they have not solved the problem.

2. Income Inequality

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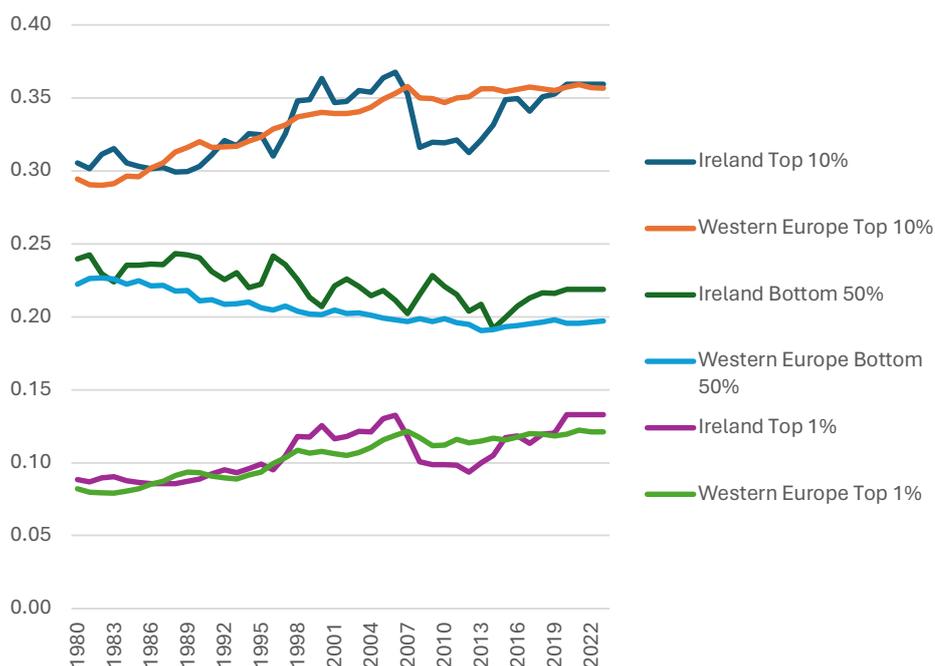
Irish income shares in the World Inequality Database

As outlined in the introduction, the release of *Capital in the Twenty-First Century* by Thomas Piketty in 2013 marked a turning point in the renewed focus on inequality within economics. The book played a major role in bringing the topic back to the forefront of academic debate.

Since then, Piketty has continued to examine inequality in both historical and contemporary contexts. Alongside fellow economists Anthony B. Atkinson, Emmanuel Saez, Gabriel Zucman and Lucas Chancel, he helped establish the World Inequality Lab, which publishes the World Inequality Database (WID). This open-access resource compiles detailed data on income and wealth inequality across a wide range of countries.

When examining income inequality in Ireland, a useful starting point is the data available through the World Inequality Database, maintained by the team behind the World Inequality Lab.

Figure 1: Top 10%, 1% and bottom 50% income share in Ireland and Western Europe



Source: World Inequality Database

Figure 1 presents the share of national income going to the top 1%, the top 10%, and the bottom 50%, using data from the World Inequality Database (WID).

Since the publication of *The State We Are In: TASC Inequality Report 2024*, there have been notable revisions to the WID, particularly in relation to Ireland. However, the key observation from last year's report remains valid: income distribution trends in Ireland continue to broadly mirror those seen across Western Europe.

As outlined in the 2024 report, the share of income going to the top 10% in both Ireland and Western Europe increased from around 30% in the early 1980s to approximately 35% in recent years. The share going to the top 1% rose from below 8% or 9% to closer to 12% or 13%. The revised data shows that this increase in the top 1%'s share is slightly smaller than previously reported.

One further change is that the updated figures show the bottom 50% in Ireland have consistently received a higher share of national income than their counterparts across Western Europe.

It is important to note that the World Inequality Database data series are primarily derived from tax data rather than household survey data. While conceptually similar to the market income series in the EU Survey on Income and Living Conditions (SILC), they are different.

The Survey on Income and Living Conditions (SILC)

Across the EU, including in Ireland, income inequality is most commonly analysed using data from the Survey on Income and Living Conditions (SILC), an annual household survey. SILC collects information directly from households and is the primary data source used by Eurostat and national statistical agencies.

This approach differs from that used in the World Inequality Database (WID), which relies mainly on tax records. The WID focuses on pre-tax income⁴, which is similar to the market income figures available from SILC, though derived using different sources and methods. However, for its main inequality indicators, SILC uses a separate measure known as *equivalised disposable income*. This is an attempt to produce an individual-level income measure based on a household's disposable income.

Disposable household income includes gross income from employment, rentals, social transfers, and inter-household transfers received, minus taxes, social insurance contributions, pension contributions, and inter-household transfers paid. To calculate equivalised income, disposable household income is divided by the equivalised household size, which adjusts for the number and type of people in the household. The national equivalence scale assigns a weight of 1 to the first adult, 0.66 to each additional person aged 14 or over, and 0.33 to each child under the age of 14.

Much of the data presented in this report comes from the 2024 release of the Survey on Income and Living Conditions for Ireland, published by the Central Statistics Office (CSO) in March 2025. It is important to note, however, the somewhat confusing dating of SILC releases: the 2024 edition actually reports on income earned during the 2023 calendar year.

Prior to 2020, the survey asked respondents about their income over the 12 months preceding the interview date. For example, data collected in 2019 referred to income earned across parts of both 2018 and 2019, depending on when the respondent was interviewed. Since 2020, SILC has adopted a standard reference period. Respondents are now asked about their income during the full calendar year before the interview.

4 The "Technical Notes for Figures and Tables" accompanying the World Inequality Report 2022 explains that "Income inequality is measured using the distribution of pre-tax national income among adults (equal-split series). Pre-tax national income is the sum of all pretax personal income flows accruing to the owners of the production factors, labor and capital, including social insurance benefits (and removing corresponding contributions), but excluding other forms of redistribution (income tax, social assistance benefits, etc.)". Bajard, F., L. Chancel, and R. Moshrif. (2021). "World Inequality Report 2022 Technical Notes for Figures and Tables." Paris: World Inequality Lab. <https://wir2022.wid.world/www-site/uploads/2021/12/WIR2022-Technical-Note-Figures-Tables-1.pdf> & Chancel, L., T. Piketty, E. Saez, and G. Zucman, eds. (2022). World inequality report 2022. Harvard University Press.

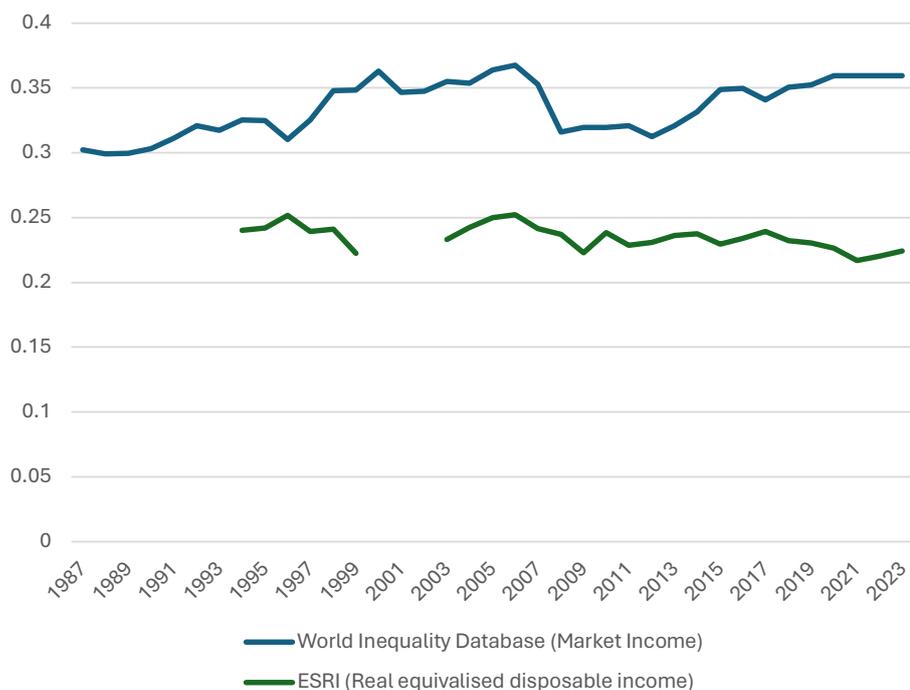
This was one of several changes, including a new household definition based on shared income and expenditure rather than address. Together, these changes created a break in the data series between 2019 and 2020.

Top income shares in the ESRI Inequality Report Series

For the past four years, Barra Roantree, of Trinity College Dublin, and colleagues at the ESRI have published the *Poverty, Income Inequality and Living Standards in Ireland* series. These reports are part of an ESRI research programme funded by Community Foundation Ireland, which aims to fill important gaps in our understanding of poverty, income inequality, and living standards in Ireland.

The reports (Roantree et al. 2021, 2022, 2023, 2024) draw heavily on SILC data to present a harmonised set of indicators based on large-scale household surveys. In addition to the SILC dataset (2004–2023), they include data from earlier surveys: the Living in Ireland Survey (1994–1999) and the ESRI Survey of Income Distribution, Poverty and Usage of State Services (1987).

Figure 2: Top 10% income share: market income vs disposable income



Source: Roantree et al. (2024); World Inequality Database

Using data from the ESRI, we can track the share of total income going to the top 10% of individuals. Figure 2 presents this series on a real equivalised disposable income basis (after taxes and benefits), alongside the World Inequality Database (WID) series, which is based on pre-tax income and was also shown in Figure 1. While these datasets use different methodologies and are not directly comparable, both aim to estimate the income share of the top 10% over time. Since the WID series reflects pre-tax income, it naturally shows a higher share of income going to this group.

Both series indicate that the share of income going to the top 10% has remained relatively stable over time, with an increase in the WID pre-tax series and a slight decrease in the ESRI post-tax series. This suggests that Ireland's tax and welfare system has had some success in reducing income inequality.

Income by quintiles

In addition to examining the income share of the top 10%, it is also important to consider how income is distributed across the entire population. One way to do this is by looking at the share of total income received by each quintile (that is, each fifth of the income distribution), as reported in the Survey on Income and Living Conditions (SILC). These figures are shown in Table 1.

As the table shows, the bottom quintile, meaning the 20% of the population with the lowest incomes, receives well below 10% of total income in Ireland. This pattern has remained stable over the past three years for which data are available.

Table 1: Share of equivalised disposable income by quintile and year (%)

Quintile	2021	2022	2023	2024
1	9.67	9.55	9.63	9.74
2	13.79	13.64	13.73	13.93
3	17.77	17.64	17.33	17.62
4	22.53	22.26	22.3	22.13
5	36.25	36.9	37.03	36.6
Total	100.00	100.00	100.00	100.00

Source: CSO, Survey on Income and Living Conditions (SILC) 2024

The next two quintiles, i.e. those between the 20th and 60th percentile (40% of population) also earn less than a fifth of total income. Those between the 60th and 80th percentile earn slightly more than a fifth of total income, while those in the top fifth receive almost two fifths of all income.

By comparing individuals in the highest and lowest 20% of the income distribution, we can gain a deeper understanding of how income is spread across different parts of the population. Table 2 provides data on the demographic characteristics of individuals by net equivalised disposable income quintile.

If we look at individuals in the richest and poorest net disposable equivalised income quintiles by their Principal Economic Status, it is evident that being out of work significantly affects the likelihood of being in the bottom quintile. Nearly half (46.4%) of unemployed individuals are in the bottom quintile, while only 10.3% are in the top. Similarly, nearly half (44.3%) of those unable to work due to long-term illness or disability fall into the bottom quintile, compared to just 3.9% in the top.

Those aged under 18 and over 65 are the most likely to be in the poorest quintile. While those of working age, are more likely to be in higher income quintiles. Unfortunately, the level of disaggregation provided in the CSO's published data does not allow us to examine more restricted age groups such as young children.

Table 2: Demographic characteristics of individuals by income quintiles, 2024 (%)

Quintile	1	2	3	4	5
Sex					
Male	19.7	19.6	19.9	20	20.8
Female	20.2	20.5	20.1	20	19.2
Age group					
0-17	23.8	22.9	22	17.8	13.3
18-34	14.8	19.5	20.7	21.5	23.5
35-49	17.2	18.7	20	21.3	22.9
50-64	17.3	18	19.2	22.6	22.9
65+	28.9	20.5	16.8	16.2	17.5
Principal Economic Status (aged 16 years and over)					
Employed	10.1	17	21.6	24.5	26.8
Unemployed	46.4	22.3	11.8	9.2	10.3
Retired	29.6	19.6	15.8	16.8	18.3
Unable to work due to long-standing health problems	44.3	27.5	10.3	13.9	3.9
Student, pupil	25.4	25.8	20.1	16.6	12.2
Fulfilling domestic tasks	38.2	30.5	16	7.2	8.1
Highest education level attained (aged 16 years and over)					
Primary or below	48.4	26	14.6	8	3
Lower secondary	28.7	26.4	20.9	16.9	7.1
Higher secondary	20.8	24.3	22	20	12.9
Post leaving cert	23.9	19.6	21.8	18.9	15.8
Third-level non degree	16.5	18	24.7	22.9	17.9
Third-level degree or above	6.9	12.6	16.4	25.2	39
Household composition					
1 adult aged 65+	52.2	15.7	10.2	10.2	11.8
1 adult aged <65	28.7	12.3	12.3	19.9	26.9
2 adults, at least 1 aged 65+	26.3	24	15.2	15.3	19.3
2 adults, both aged <65	9.1	12.1	15.2	25.1	38.5
3 or more adults	10.7	16.6	21.6	24.9	26.1
1 adult with children aged under 18	39.6	27.5	22.9	7.5	2.5
2 adults with 1-3 children aged under 18	18.6	20.5	21.1	20.4	19.4
Other households with children aged under 18	23.2	26.8	24.7	17.7	7.5
Household type					
One-person household	39.5	13.8	11.2	15.4	20
Lone-parent with at least one child aged less than 25	31.8	32.2	25.6	6.3	4.1
Lone-parent with all children aged 25 or more	23.4	25.6	15.9	25.8	9.3
Couple without any child(ren)	15.8	15	13.4	19.6	36.2
Couple with at least one child aged less than 25	19.2	20.3	22.3	20.8	17.4
Couple with all children aged 25 or more	5.6	19.2	20.5	27.4	27.3
Other type of household	15.7	20.4	22.3	23	18.7
Number of persons at work in the household					
0	51.9	19.3	9.8	9	9.9
1	26.2	26.6	18.8	14.1	14.4
2	8.9	18.1	22.1	25.1	26
3+	6	14.8	27.6	27.9	23.7
Tenure status					
Owner-occupied	14	18.8	19.7	22.6	24.9
Rented or rent free	33.5	23	20.7	13.9	8.8
Urban/rural location					
Urban areas	19.2	17.5	20	20.4	22.7
Rural areas	21.4	25.2	20.1	19.1	14.2
Region					
Northern and Western	28	24	18.9	19.6	9.5
Southern	20	21.9	21.6	19.3	17.2
Eastern and Midland	17	17.4	19.4	20.6	25.6

Source: CSO, Survey on Income and Living Conditions (SILC) 2024

Households with no one at work are much more likely to have low incomes than those with multiple people at work. Where no one is working, more than half (51.9%) of individuals are in the lowest income quintile, and just 9.9% are in the highest. In contrast, in households with two people in employment, 26.0% are in the top quintile, while only 8.9% are in the bottom.

Likewise, income tends to be higher the higher the level of education. Of those whose highest level of educational achievement was primary school completion or below, nearly half (48.4%) are in the lowest quintile and just 3.0% in the highest. By contrast, 39.0% of those with a third-level degree or higher are in the top quintile, while only 6.9% are in the bottom.

Remarkably, while only 14.0% of people in owner-occupied homes fall into the bottom quintile, over a third (33.5%) of those in rented or rent-free accommodation are in that group.

Households with at least one child under the age of 25 are more likely to be in the lowest income quintile compared to households with no children or with only adult children aged 25 or over. In contrast, couples without children or with older children are more likely to be found in the highest quintile.

Similarly, one-person households and lone-parent families face a higher risk of being in the bottom quintile, while couple households are more likely to be in the top.

The Gini coefficient

Instead of focusing on distinct segments of the income distribution, the Gini coefficient provides a single number that measures income equality across the entire distribution. The Gini coefficient is perhaps the most widely used indicator of income inequality. It measures where the income distribution is relative to a situation of complete income equality on the one hand (i.e. where income is perfectly equally distributed) and a situation of complete inequality on the other (i.e. where all income would go to one person). A situation of perfect equality would have a Gini coefficient of 0, while a situation of perfect inequality would have a Gini coefficient of 1.

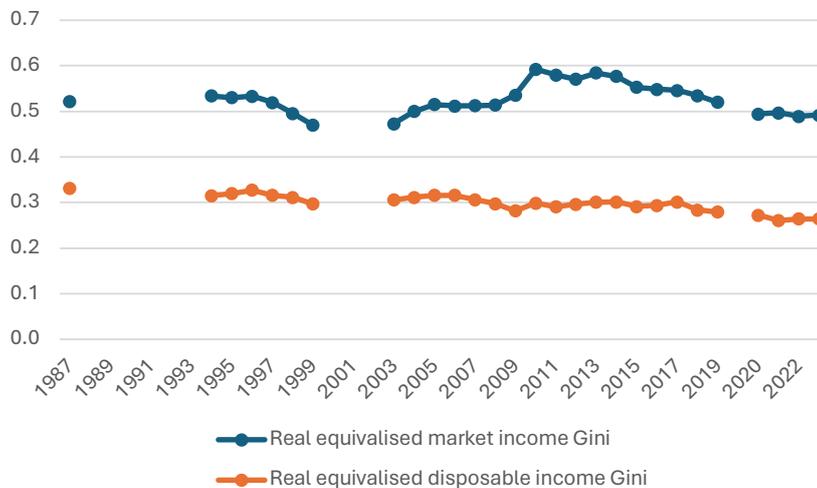
Table 3: Gini coefficient by year

Income Type	2021	2022	2023	2024
Equivalentised market income	0.475	0.473	0.475	0.450
Equivalentised disposable income	0.267	0.274	0.275	0.269

Source: CSO, Survey on Income and Living Conditions (SILC) 2024

Table 3 presents the Gini coefficient for the past four years, showing both market income (income before taxes and benefits) and disposable income (income after taxes and benefits). The distribution of market income in Ireland is considerably more unequal than that of disposable income. While the Gini coefficient for market income has declined slightly in recent years, the Gini for disposable income rose between 2021 and 2023. It then fell between 2023 and 2024, though it remained higher in 2024 than in 2021.⁵

⁵ Market income inequality has been discussed more extensively in a previous issue of The State We Are In. Sweeney, R. (2020). "The State We Are In: Inequality in Ireland 2020." Dublin: TASC. https://www.tasc.ie/assets/files/pdf/the_state_we_are_in_tasc_final_030320.pdf.

Figure 3: Market and disposable income Gini coefficients

Source: Roantree et al. (2024)

Figure 3, sourced from Roantree et al. (2024), shows the longer-term trends in both market and disposable income inequality. Both measures have remained relatively stable over time, particularly the Gini coefficient for disposable income, which has stayed close to 0.3 for almost 35 years. Although there has been some commentary on a gradual decline in disposable income inequality, the change is minimal.⁶ Between 1987 and 2017, the disposable income Gini fell by just 0.03. For context, the market income Gini rose by 0.06 in the single year between 2009 and 2010. Since 2017, the disposable income Gini has declined further, but part of this likely reflects the impact of temporary state supports during the COVID-19 pandemic and the subsequent cost-of-living crisis, as discussed in a later chapter. Overall, the decline is modest when viewed against the long-term stability of the measure. In contrast, the Gini coefficient for market income has shown much greater variation. It reached lows of 0.47 in both 1999 and 2003, and a high of 0.59 in 2010. Market income inequality fell during the late 1990s, rose until 2010, and has declined again in more recent years.

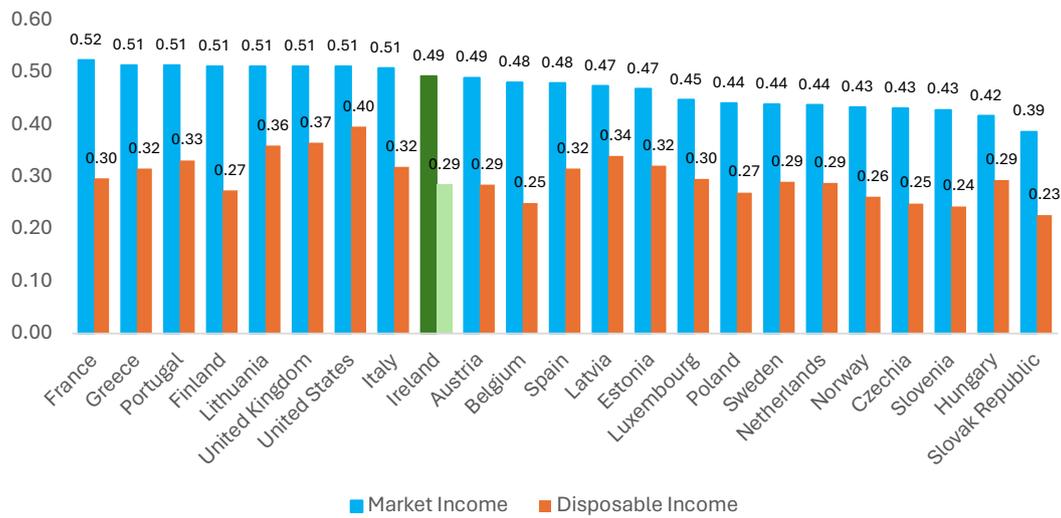
One of the strengths of the Gini coefficient is that it allows for straightforward comparisons between countries. Figure 4 compares Ireland with the United States and other European members of the OECD, using both market and disposable income measures.

The data show that Ireland has relatively high levels of market income inequality by international standards. Previous editions of this report have highlighted that Ireland had the highest market inequality of any OECD country. However, once taxes and benefits are taken into account, Ireland's position improves significantly. The country moves from being among the more unequal advanced economies to somewhere around the OECD average in terms of disposable income inequality.

⁶ Roantree, B., B. Maître, A. McTague, and I Privalko. (2021). "Poverty, income inequality and living standards in Ireland: first annual report." *Economic and Social Research Institute (ESRI) Research Series* & Sweeney, R, and Donald Storrie. (2022). "The state we are in: inequality in Ireland 2022." Dublin: TASC. https://www.tasc.ie/assets/files/pdf/2205-4_tasc_inequality_in_ire_2022.pdf.

This shift reflects the scale and impact of Ireland's tax and welfare system. Among the 23 countries shown in Figures 6 and 7, Ireland has the fourth largest gap between its market income Gini and its disposable income Gini. This underlines the extent to which redistribution reduces income inequality in Ireland.

Figure 4: Disposable income Gini (Selected OECD states, 2022)



Source: OECD, Income distribution database

3. Inequality, Poverty and Deprivation

3. Inequality, Poverty and Deprivation

While average incomes in Ireland have grown in recent years, not everyone has shared equally in this progress. Many households continue to face financial pressure, with some unable to afford basic goods and services.

This chapter looks at the relationship between income, poverty and deprivation, using the latest data from the Survey on Income and Living Conditions (SILC). It highlights how inflation, income composition, and access to social transfers shape living standards, and how certain groups remain particularly exposed to hardship.

Income levels

Over the past decade, Ireland's economic recovery has been marked by steady growth in employment and output. Incomes have also increased during this period, with many households seeing improvements in their take-home pay. However, income growth has not been evenly shared. Many people still struggle to afford basic goods and services, and rising incomes have not always led to greater financial security.

Recent income gains have also been undermined by the sharp rise in inflation following the Russian invasion of Ukraine in 2022.⁷ As shown in Figure 5, mean nominal disposable income rose from €57,309 to €67,864. However, when adjusted for inflation, mean real disposable income increased only slightly, from €57,502 to €58,056.⁸

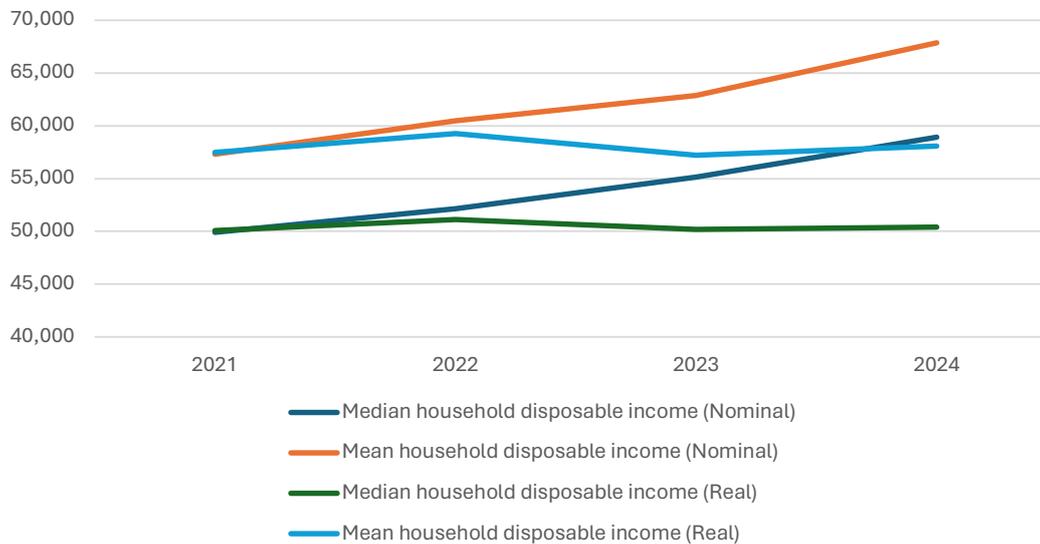
Median income shows a similar pattern. Nominal median disposable income rose from €49,906 to €58,922, but in real terms it fell from €50,704 to €50,406.

These figures highlight how inflation has eroded the real value of income across the distribution. While all households are affected, the impact is especially strong for those reliant on fixed incomes, such as pensions or social welfare, unless payments are adjusted in line with inflation.⁹

7 Between 2013 and 2020, annual inflation was below 1%. It increased to 2.4% in 2021 and after the Russia's invasion of Ukraine in 2022 increased to 7.8% that year, dropping slightly to 6.3% in 2023. In 2024 it was down to 2.1%, and has remained close to that level since then. See: Central Statistics Office. (2025b). Consumer Price Index April 2025. <https://www.cso.ie/en/releasesandpublications/ep/p-cpi/consumerpriceindexapril2025/>

8 This conversion to real income uses a base income of 2019.

9 A previous edition of this report examined the distributional impact of inflation in greater detail. See Sweeney, R. (2023). "The state we are in: inequality in Ireland 2023." Dublin: TASC. https://www.tasc.ie/assets/files/pdf/he_state_we_are_in_tasc_2023_final.pdf.

Figure 5: Nominal vs real disposable income (€)

Source: CSO, Survey on Income and Living Conditions (SILC) 2024

Income composition

Looking at household income by decile in Table 4, it is clear that social transfers play a crucial role in supporting lower-income households. Among the lowest income group, social transfers make up the vast majority of income, accounting for 80% of gross household income.¹⁰ A large share of this comes from pension payments. Market income, by contrast, makes up only 20%, with just 9% coming from employment.¹¹

This reliance on transfers is not limited to the very poorest. For households in the bottom half of the income distribution (i.e. the bottom five income deciles), social transfers make up on average at least one quarter of net disposable income.¹² At the other end of the spectrum, the highest-income households receive only 4% of their net income from transfers, with the vast majority coming from employment and other market sources.

While 80% of gross income of the lowest income households comes from social transfers, only 20% comes from market income, with just 9% coming from employee income.¹³ Across the population as a whole, the picture is very different. On average, 88% of gross household income in Ireland comes from market income, and nearly 80% of this is earned through employment, including employers' social insurance contributions.¹⁴

These figures underline the importance of the welfare system in reducing inequality and providing income security. For a large share of households, social transfers are not a supplement to earnings but a central part of their overall income.

¹⁰ €261.52/€325.04=0.80

¹¹ €140.68/€3257.23=0.04

¹² Total Social Transfers/Net Disposable Income. For the first, second, third, fourth, and fifth income deciles, social transfers account for 85%, 59%, 39%, 33%, and 25% of net disposable income, respectively

¹³ €63.52/€325.04=0.20; (€27.82+€2.85)/€325.04=0.09

¹⁴ €1,663.66/1,891.01=0.88; (€1,168.27+€148.7)/€1,663.66=0.79.

Table 4: Average weekly nominal household income by deciles and composition (€)

Decile	1	2	3	4	5	6	7	8	9	10	State
Weekly threshold (€)	<409.73	<626.74	<798.98	<955.34	<1129.21	<1314.52	<1534.16	<1793.76	<2193.07	≥2193.07	
Average Weekly nominal household Income											
Market Income											
Employee income	27.82	151.90	386.13	579.66	777.29	1,059.61	1,295.96	1,704.94	2,202.02	3,493.58	1,168.27
Employer's social insurance contributions	2.85	17.32	44.95	72.07	90.20	129.60	161.55	219.12	286.64	462.21	148.70
Self-employment income	17.09	36.91	59.79	32.96	92.09	101.37	167.27	165.86	241.82	860.01	177.71
Private or occupational pension	7.66	48.77	72.24	93.49	101.91	84.16	133.40	112.87	138.99	196.98	99.06
Other market income	8.10	20.07	21.88	19.79	28.11	24.20	38.74	50.45	83.64	403.38	69.93
Total Market Income	63.52	274.98	584.99	797.98	1,089.60	1,398.93	1,796.93	2,253.24	2,953.11	5,416.16	1,663.66
Social Transfers											
Unemployment related benefits	22.12	39.61	26.53	40.92	25.04	18.45	12.64	8.91	8.51	7.89	21.05
Old-age related payments	133.79	147.42	123.84	98.51	75.30	58.86	48.95	43.77	40.76	50.69	82.19
Family/children related allowances	8.34	41.40	53.41	66.54	84.83	63.58	73.45	70.33	49.48	47.92	55.92
Housing allowances	51.00	44.13	27.34	42.20	38.82	22.41	18.68	17.15	13.77	14.25	28.98
Other social transfers	46.27	40.39	47.87	41.92	38.32	58.73	38.60	33.35	26.70	19.94	39.20
Total Social Transfers	261.52	312.94	279.00	290.09	262.31	222.03	192.32	173.51	139.22	140.68	227.34
Gross Income	325.04	587.91	863.98	1,088.07	1,351.91	1,620.97	1,989.25	2,426.75	3,092.32	5,556.84	1,891.01
Tax and Social Contributions											
Tax on income and social contributions	7.50	31.96	82.33	122.86	187.52	231.47	335.00	457.49	690.72	1,616.23	376.59
Employer's social insurance contributions	2.85	17.32	44.95	72.07	90.20	129.60	161.55	219.12	286.64	462.21	148.70
Pension Contributions	2.83	3.14	15.61	18.11	29.20	36.81	67.77	90.96	136.13	213.20	61.40
Regular inter-household cash transfers paid	2.95	5.04	2.95	2.69	2.28	3.35	1.36	5.49	3.19	7.97	3.73
Total Tax and Social Contributions	16.12	57.47	145.83	215.73	309.20	401.23	565.67	773.06	1,116.68	2,299.62	590.43
Net Disposable Income	308.92	530.45	718.15	872.34	1,042.71	1,219.74	1,423.57	1,653.68	1,975.65	3,257.23	1,300.58

Source: CSO, Survey on Income and Living Conditions (SILC) 2024

Relative poverty and deprivation

Two widely used poverty indicators are the at-risk-of-poverty rate and the enforced deprivation rate, sometimes referred to as the "material deprivation rate" or simply the "deprivation rate".

The at-risk-of-poverty rate refers to the percentage of individuals whose nominal equivalised disposable income is below the at-risk-of-poverty threshold, which is defined as 60% of the median nominal equivalised disposable income. It is, therefore, a relative measure of poverty. In the 2024 figures for Ireland, 11.7% of individuals were at-risk-of-poverty, up from 10.6% in the previous year, but down from 12.5% in 2022.

The “enforced deprivation rate” measures the percentage of households experiencing two or more of the following eleven deprivation items:

1. Without heating at some stage in the last year.
2. Unable to afford a morning, afternoon or evening out in last fortnight.
3. Unable to afford two pairs of properly fitting shoes in good condition that are suitable for daily activities.
4. Unable to afford a roast once a week.
5. Unable to afford a meal with meat, chicken, fish, or vegetarian equivalent every second day.
6. Unable to afford new (not second-hand) clothes.
7. Unable to afford a warm waterproof coat.
8. Unable to afford to keep the home adequately warm.
9. Unable to afford to replace any worn out furniture.
10. Unable to afford to have family or friends for a drink or a meal once a month.
11. Unable to afford to buy presents for family or friends at least once a year.

In Ireland 15.7% of individuals experienced enforced deprivation according to the most recent figures, down from 17.3% last year but up from 13.7% in 2021.

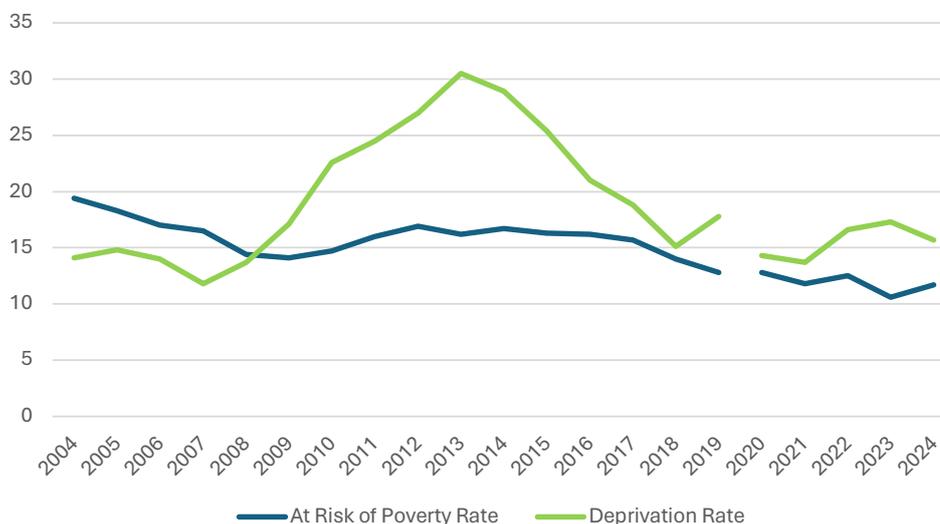
Table 5: At-risk-of-poverty rate & enforced deprivation rate, 2021-2024 (%)

	2021	2022	2023	2024
At-risk-of-poverty rate	11.8	12.5	10.6	11.7
Deprivation rate	13.7	16.6	17.3	15.7

Source: CSO, Survey on Income and Living Conditions (SILC) 2024

Looking at trends over the past two decades, the at-risk-of-poverty rate has shown a steady decline. In 2004, 19.4% of people in Ireland were considered at risk of poverty. Since then, the rate has fallen, reflecting gradual improvements in income levels relative to the poverty threshold.

Figure 6: At-risk-of-poverty rate & enforced deprivation rate, 2004-2024 (%)



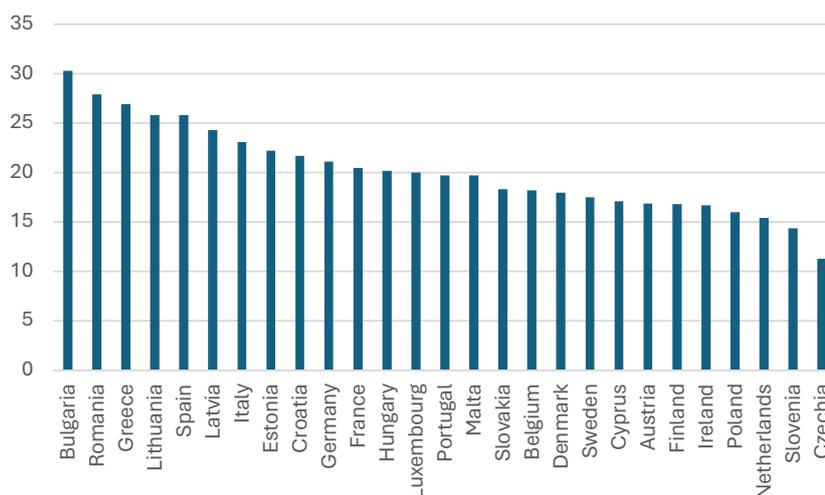
Source: CSO, Survey on Income and Living Conditions (SILC)

The story is quite different when it comes to enforced deprivation. In 2004, 14.1% of individuals experienced enforced deprivation, meaning they were unable to afford basic items and activities. Although this rate fell to 11.8% by 2008, the onset of the Global Financial Crisis and the Great Recession triggered a sharp rise. By 2013, enforced deprivation had surged to 30.5%, affecting nearly one in three people. As the economy recovered, the deprivation rate declined, reaching around 15%. However, more recent years have seen a renewed rise in deprivation, despite relatively strong economic performance overall.

The scale and volatility of these changes reveal how vulnerable many households are to shifts in economic conditions. The fact that enforced deprivation has increased again in recent years, even in the context of growth and low unemployment, raises serious concerns about the depth and distribution of economic resilience across the population.

If we compare Ireland's at-risk-of-poverty or social exclusion rate¹⁵ with the other 27 EU member states, we find that Ireland has the 5th lowest rate.

Figure 7: At-risk-of-poverty or social exclusion, 2024 (%)



Source: Eurostat

Moving beyond national averages, it is clear that poverty and deprivation are not evenly distributed across the population. Certain groups are far more likely to experience these problems than others.

Children are particularly affected. The at-risk-of-poverty rate among children is 15.3%, compared to the national average of 11.7%. The gap is even wider when it comes to enforced deprivation, with 21.2% of children affected, compared to 15.7% of the overall population. In contrast, older people report much lower levels of hardship. Just 7.7% of those aged 65 and over experience enforced deprivation. As will be explored in the next chapter, this has not always been the case.

15 The risk of poverty or social exclusion rate measures persons who are either at risk of poverty, or severely materially and socially deprived or living in a household with a very low work intensity. See: Eurostat. (2024). *Glossary: At risk of poverty or social exclusion (AROPE)*. [https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Glossary:At_risk_of_poverty_or_social_exclusion_\(AROPE\)](https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Glossary:At_risk_of_poverty_or_social_exclusion_(AROPE)).

Table 6: At risk of poverty, deprivation and consistent poverty rates by demographic characteristics, 2024 (%)

	At risk of poverty	Enforced Deprivation
State	11.7	15.7
Sex		
Male	12.1	14.3
Female	11.3	17
Age group		
0-17	15.3	21.2
18-34	8.8	15.8
35-49	10	16.4
50-64	11.4	14.2
65+	13.3	7.7
Principal Economic Status (aged 16 years and over)		
Employed	5.4	11.6
Unemployed	34.1	37.8
Retired	13.3	6.9
Unable to work due to long-standing health problems	32.5	38.5
Student, pupil	13.4	17
Fulfilling domestic tasks	26.9	23
Highest education level attained (aged 16 years and over)		
Primary or below	26.3	22.2
Lower secondary	17.3	18.7
Higher secondary	10.4	15.2
Post leaving cert	14.8	16.5
Third-level non degree	10.1	13.4
Third-level degree or above	4.2	9.3
Household composition		
1 adult aged 65+	25.9	11.7
1 adult aged <65	24	22.7
2 adults, at least 1 aged 65+	11.4	6.9
2 adults, both aged <65	5	17.6
3 or more adults	5.3	7.9
1 adult with children aged under 18	24.2	46.3
2 adults with 1-3 children aged under 18	12.6	16.2
Other households with children aged under 18	13.3	19.8
Household type		
One-person household	24.8	17.6
Lone-parent with at least one child aged less than 25	20.3	44.5
Lone-parent with all children aged 25 or more	11.7	17.3
Couple without any child(ren)	6.8	9
Couple with at least one child aged less than 25	11.5	14.8
Couple with all children aged 25 or more	3.4	4.1
Other type of household	9.5	13.5
Number of persons at work in the household		
0	32.9	26.8
1	15.9	21.9
2	4	10.8
3+	3.5	6.5
Tenure status		
Owner-occupied	7.3	8.7
Rented or rent free	21.8	31.5
Urban/rural location		
Urban areas	12	18.2
Rural areas	11.2	10.3
Region		
Northern and Western	18.9	13.3
Southern	10.7	14.2
Eastern and Midland	9.8	17.5

Source: CSO, Survey on Income and Living Conditions (SILC) 2024

Individuals in employment and those living in households with two or more earners have poverty and deprivation rates well below the national average. In contrast, those outside employment face more significant challenges. Unemployed people and those unable to work due to long-standing health problems are particularly vulnerable. Over one in three unemployed individuals (34.1%) are at risk of poverty, with 37.8% experiencing enforced deprivation. The figures are similar for those unable to work due to illness or disability, with 32.5% at risk of poverty and 38.5% facing deprivation. A similar pattern is seen in households where no one is in employment: 32.9% of individuals in these households are at risk of poverty, and more than one in four (26.8%) experience enforced deprivation. It is also worth noting that retired individuals report enforced deprivation rates (6.9%) well below the national average.

As discussed in last year's thematic chapter, educational attainment is strongly linked to inequality.¹⁶ Those with lower levels of education face significantly higher risks of both poverty and deprivation, with these risks declining steadily as education levels increase.

Household composition is another important factor. As noted above in the discussion of Table 4, one-person households, lone-parent families, and families with children under 25 are more likely to fall into the lowest income quintiles and far less likely to appear in the highest. This unequal distribution is reflected in poverty and deprivation outcomes. For example, couples with no children or with only adult children have the lowest rates of hardship. Just 3.4% of couples with all children aged 25 or older are at risk of poverty, and only 4.1% experience deprivation. Couples without children also have relatively low rates (6.8% and 9.0%).

Lone-parent families, by contrast, experience significantly higher levels of poverty and deprivation. Even among those with only adult children, 11.7% are at risk of poverty and 17.3% experience deprivation. Where there is at least one child under 25, the figures rise to 20.3% and 44.5%, respectively. Among one-adult households with children under 18, 24.2% are at risk of poverty and 46.3% experience enforced deprivation.

Those who do not own their home but live in rented or rent-free accommodation are also at far higher risk of poverty and experience significantly higher rates of deprivation. Just 7.3% of those in owner-occupied housing are at risk of poverty, and 8.7% experience enforced deprivation. In comparison, 21.8% of those living in rented or rent-free accommodation are at risk of poverty, and nearly one in three (31.5%) face deprivation. This highlights the close relationship between housing insecurity and income-related hardship.

¹⁶ Gilmore, O. (2024). "The State We Are In: Inequality in Ireland 2024." Dublin: TASC. https://www.tasc.ie/assets/files/pdf/tasc_inequality_report_2024_final.pdf.

4. At Risk Groups (2004-2024)

4. At Risk Groups (2004-2024)

While income inequality can be described in aggregate terms, through measures such as income quintiles, poverty rates, and the Gini coefficient, it is ultimately experienced by individuals and households in very specific circumstances. Understanding who is most affected by inequality is therefore essential to assessing its real impact and developing effective responses. This chapter focuses on the groups in Irish society most at risk of low income, poverty, and material deprivation.

Earlier chapters in this report have shown that income in Ireland is unevenly distributed, but these inequalities do not affect everyone equally. Certain groups are consistently overrepresented in the lowest income quintiles and among those experiencing poverty and deprivation. They include people not in employment, such as the unemployed, those unable to work due to illness or disability, as well as lone-parent families, older people living alone, renters, individuals with low levels of education and children.

Nearly half of unemployed people (46.4%), those unable to work due to long-term illness or disability (44.3%), and single older adults (52.2%) are in the bottom income quintile. Nearly a third of lone-parent families with children under 25 (31.8%), one-adult households with children under 18 (39.6%), and those living in rented or rent-free accommodation (33.5%) also fall into the lowest income group. One-person households (39.5%) and children aged under 18 (23.8%) are similarly overrepresented. In contrast, only 6.9% of people with a third-level degree or higher are in the bottom quintile, highlighting the protective effect of education.

When it comes to poverty, nearly half of unemployed individuals (34.1%) and those unable to work due to illness or disability (32.5%) are at risk. Nearly a third of people in households where no one is working (32.9%) and those living in rented or rent-free accommodation (21.8%) are also at risk. Among one-adult households with children under 18, nearly a quarter (24.2%) live below the poverty line, as do 20.3% of lone-parent families with children under 25 and 15.3% of all children. In stark contrast, just 3.4% of couples with only adult children and 6.8% of childless couples are at risk of poverty.

Experiences of enforced deprivation show similar patterns. Nearly half of lone-parent families with children under 25 (44.5%) and one-adult households with children under 18 (46.3%) experience deprivation. Nearly a third of unemployed individuals (37.8%), those unable to work due to illness or disability (38.5%), and people in rented or rent-free housing (31.5%) also face deprivation. Among children, the deprivation rate stands at 21.2%, compared to just 7.7% for those aged 65 and over and 6.9% for retired individuals.

These figures show clearly that poverty and deprivation are not randomly distributed across the population. Instead, they are concentrated among specific groups. The following sections examine how the situation of these at-risk groups has developed over the past twenty years.

The key finding is that while there has generally been progress for these groups over this period, it has not followed a steady or linear path. Between 2004 and 2008, conditions improved significantly. However, between 2008 and 2014, the situation worsened, in some cases dramatically, as the country experienced the Great Recession. As the economy recovered, outcomes began to improve once again. The more recent challenge lies in understanding developments over the past five years, when exceptionally large but temporary government interventions were introduced. These supported people first during the COVID-19 pandemic and then during the cost-of-living crisis.

As explained earlier in this report, the most recent data available comes from the 2024 Survey on Income and Living Conditions. This survey asked about income and living conditions in 2023, when cost-of-living supports were still in place. However, most of these supports were not extended into 2024, and the government has made it clear that they will not continue in the future. This means that, despite the current lack of data, it is important to consider what the income and living conditions of at-risk groups might have looked like in the 18 months since the end of 2023. Before doing so, it is worth briefly reviewing the recent cost-of-living supports and their potential effects.

Recent Government Supports: COVID-19 and the Cost-of-Living Crisis

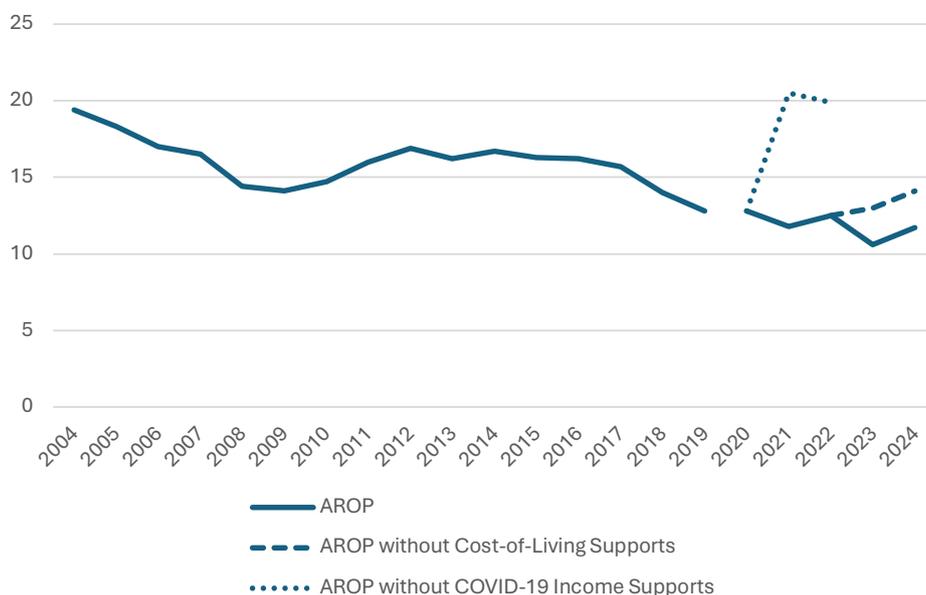
The period from 2020 to 2023 saw unprecedented government interventions to protect household incomes and living standards in the face of two major economic shocks: the COVID-19 pandemic and the cost-of-living crisis. These temporary measures had a significant effect on poverty and income inequality, particularly among those most reliant on state supports.

COVID-19 pandemic

During the COVID-19 pandemic, many people were forced out of employment as public health restrictions came into effect. In response, the government introduced the Pandemic Unemployment Payment (PUP) in March 2020. This payment was initially set at €350 per week, significantly above the standard Jobseeker's Allowance of €203 at the time. It was later adjusted to three rates of €203, €250, or €350, depending on the recipient's previous earnings.

The government also introduced the Temporary Wage Subsidy Scheme (TWSS), which was later replaced by the Employment Wage Subsidy Scheme (EWSS). These measures aimed to maintain employment relationships by supporting employers to retain staff during the crisis. Under the TWSS, employers could claim up to €410 per week per eligible employee. The EWSS followed with a two-tier payment of €151.50 or €203 per employee, depending on the level of support required.

Figure 8: At-risk-of-poverty rate (2004-2024), both with and without cost-of-living measures (%)



Source: CSO, Survey on Income and Living Conditions

These emergency interventions had a significant impact on income distribution.¹⁷ According to the Central Statistics Office (CSO), in the absence of these supports, the at-risk-of-poverty rate would have reached 20.5% in 2020 and 19.9% in 2021. However, with the supports in place, the rate recorded in the 2021 Survey on Income and Living Conditions (SILC), which reflects conditions in 2020, was 11.8%, and 12.5% in 2021. This difference is shown in Figure 8. It is also important to note that these estimates do not include the impact of other social transfers during the pandemic, which played a major role in supporting living standards. The CSO estimates that in the absence of both social transfers and COVID-19 interventions, the at-risk-of-poverty rate would have been 39.2% in 2020 and 41.1% in 2021.¹⁸

Cost-of-living crisis

The COVID-19 crisis was followed by another social crisis. Following the Russian invasion of Ukraine, inflation in Ireland rose sharply. In 2022, the overall inflation rate reached 7.8%, with particularly steep increases in the cost of housing, water, electricity, gas and other fuels, where prices rose by 20.6%. In response, the government implemented a range of temporary measures to cushion households from the worst effects of the cost-of-living crisis.¹⁹

A series of cost-of-living supports were introduced between 2022 and 2023 in response to rising inflation. Initial measures included a €200 universal energy credit in spring 2022, two lump sum Fuel Allowance payments totalling €225, and a €100 increase to the Back-to-School Clothing and Footwear Allowance. Budget 2023 introduced further supports, including a double social welfare payment, a double Child Benefit payment, a €400 Fuel Allowance lump sum, and additional payments of between €200 and €500 for groups such as pensioners, people with disabilities, carers, and low-income families. A second €200 energy credit was applied to electricity bills, and SUSI recipients received an extra maintenance grant.

Budget 2024 continued these supports with payments issued in late 2023, including a double Child Benefit payment in December, a €300 Fuel Allowance lump sum, €200 for those on the Living Alone Increase, €400 for carers, low-income workers, and people with disabilities, and an additional €100 for those with a qualified child. A universal €150 energy credit was also applied to electricity bills in December.

The overall impact of these supports was substantial. As shown in Figure 8, without them the at-risk-of-poverty rate would have risen to 13.0% in 2022 and 14.1% in 2023, rather than the lower rates captured in the 2023 and 2024 SILC data (which refer to the 2022 and 2023 reference years respectively).

17 Sweeney, R., and D. Storrie. (2022). "The State We Are In: Inequality in Ireland 2022." & Doorley K., Keane, C., McTague, A., O'Malley, S., Regan, M., Roantree, B., and Tuda, D. (2021). Distributional impact of tax and welfare policies: COVID-related policies and Budget 2021, Economic and Social Research Institute, special article, December 2020; CSO (2022b). Survey on Income and Living Conditions (SILC) 2021: Impact of Covid-19 income supports on poverty, Central Statistics Office, information note. Available at: <https://www.cso.ie/en/releasesandpublications/ep/p-silc/surveyonincomeandlivingconditionssilc2021/impactofcovid-19incomesupportsonpoverty/>

18 Central Statistics Office. (2022) *Survey on Income and Living Conditions (SILC) 2021 Impact of COVID-19 Income Supports on Poverty*. <https://www.cso.ie/en/releasesandpublications/ep/p-silc/surveyonincomeandlivingconditionssilc2021/impactofcovid-19incomesupportsonpoverty/>. & Central Statistics Office. (2023a). Survey on Income and Living Conditions (SILC) 2022 Impact of COVID-19 Income Supports on Poverty. <https://www.cso.ie/en/releasesandpublications/ep/p-silc/surveyonincomeandlivingconditionssilc2022/impactofcovid-19incomesupportsonpoverty/>

19 The distributional aspect of this has been examined in previous issues of this report. Sweeney, R. and D. Storrie. "The state we are in: inequality in Ireland 2022." & Sweeney, R. "The state we are in: inequality in Ireland 2023."

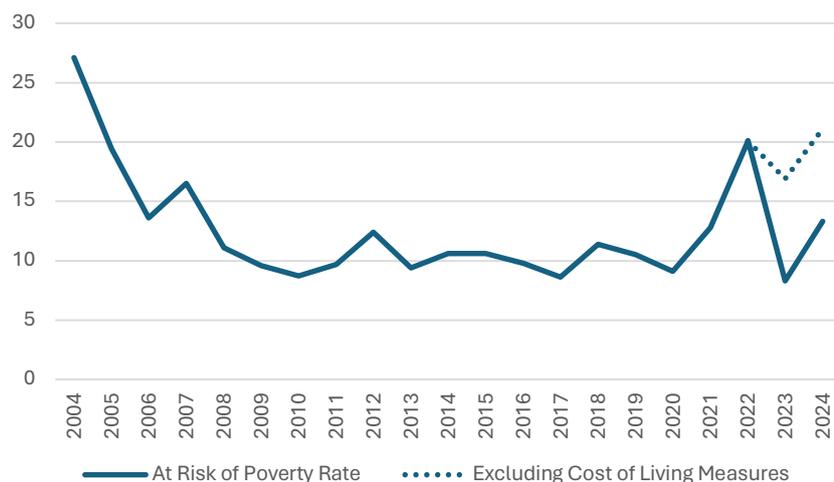
These interventions had the greatest effect on those with the least capacity to absorb rising costs. The impact was particularly significant for groups dependent on fixed incomes, including the unemployed, retirees, those unable to work due to long-standing health problems, people aged over 65, and lone parents. These are precisely the at-risk groups that are the focus of this chapter. For them, the state's temporary income supports played a crucial role in preventing a sharp rise in poverty and material hardship. The following sections examine each of these groups in turn and assess the impact of the cost-of-living supports, with a particular focus on their effect on the at-risk-of-poverty rate experienced by these groups.

Age groups

While those aged over 65 in Ireland experience lower levels of poverty and deprivation than the population as a whole. The at-risk-of-poverty rate for this group is 13.3%, below the national average of 11.7%. Their enforced deprivation rate is also significantly lower, at just 7.7%, compared to 15.7% across the population. Among retired individuals, the deprivation rate is even lower, at 6.9%, making them one of the least deprived demographic groups.

However, as discussed in last year's report, this outcome is largely the result of significant increases in the state pension prior to the global financial crisis. Over the past two decades, older people in Ireland have seen a major reduction in poverty. In 2004, the at-risk-of-poverty rate among those aged 65 and over stood at 27.1%. By 2010, this had fallen to 8.7%, a notable success for the Irish welfare state. A key factor behind this improvement was the increase in the maximum rate of the state pension, which rose by 50% in real terms during the 2000s. This increase far outpaced the 28% growth in median disposable income over the same period.

Figure 9: At-risk-of-poverty rate among those aged 65 and older (2004-2024), both with and without cost-of-living measures (%)



Source: CSO, Survey on Income and Living Conditions

However, this progress has not been sustained. Since 2009, the growth in the state pension has lagged behind growth in median income. While this did not immediately lead to a general rise in poverty among older people, it had a significant impact on those living alone. Between 2010 and 2023, the at-risk-of-poverty rate among over-65s who live alone increased from 12.4% to 25.9%, indicating a growing vulnerability within this subgroup (see Table 4 above).

More recently, there have been clear signs of rising poverty among those aged 65 and over. The at-risk-of-poverty rate for this group rose from 9.1% in the 2020 data to 12.8% in 2021, and then to 20.1% in 2022. The introduction of cost-of-living supports in 2022 had a significant impact, bringing the rate down to 8.3%, as recorded in the 2023 SILC, and to 13.3% in the most recent data. However, estimates show that without these temporary supports, the rate would have been 16.9% in 2022 and 21.1% in 2023. Among those aged 65 and over who live alone, the underlying risk is even more striking. Without the cost-of-living supports, the at-risk-of-poverty rate for this group would have reached a very concerning 45.6%.²⁰ These figures suggest that underlying poverty among older people remains high, and that recent improvements may not be sustained once temporary measures are withdrawn.

The situation of those aged over 65 is an instructive example, as it illustrates both the capacity of state policy to reduce poverty, as seen during the 2004–2008 period, and the extent to which recent temporary interventions may be masking significant underlying problems. As we get data for what has happened over the last 18 months, when these supports were phased out, the full scale of income inadequacy among older people may once again become evident.

Unemployed

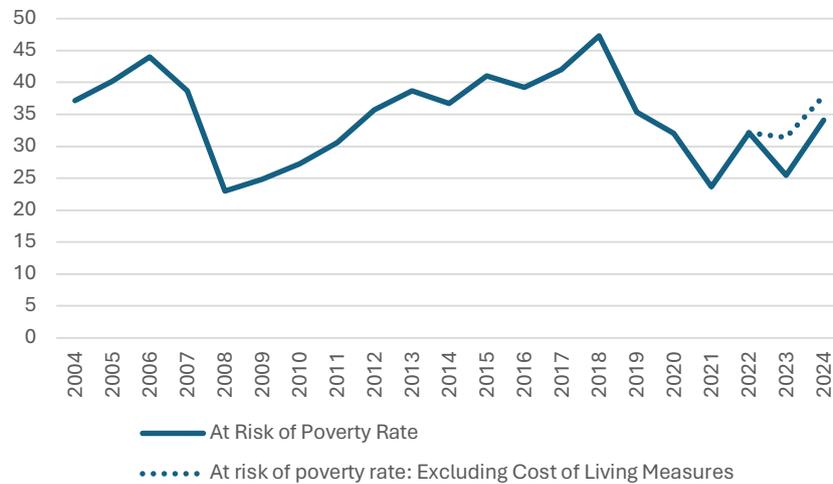
As of May 2025, the seasonally adjusted unemployment rate in Ireland stood at 4.1%,²¹ a level widely regarded as indicative of full employment. This represents a remarkable turnaround since the Great Recession, when unemployment peaked at 16% in 2012. The rate had fallen to around 5% in the years before the COVID-19 pandemic, before rising sharply during the initial lockdowns. In recent years, however, unemployment has returned to pre-recession lows. That said, the possible future impact of Trump's tariffs could lead to increased unemployment.

Despite these low levels of unemployment, individuals who are unemployed continue to experience some of the highest rates of poverty and deprivation across all population groups. According to the most recent CSO data, 46.4% of unemployed people are in the bottom income quintile. The at-risk-of-poverty rate among this group stands at 34.1%, nearly three times the national average of 11.7%. The enforced deprivation rate is similarly high, at 37.8%, compared to 15.7% for the population as a whole.

20 See Table 6.1 here: Central Statistics Office. (2025a). *Survey on Income and Living Conditions (SILC) 2025 Impact of Cost-of-Living Measures on Poverty and Income*. <https://www.cso.ie/en/releasesandpublications/ep/p-silc/surveyonincomeandlivingconditionssilc2022/impactofcovid-19incomesupportsonpoverty/>

21 Central Statistics Office. (2025c). *Monthly Unemployment May 2025*. <https://www.cso.ie/en/releasesandpublications/ep/p-mue/monthlyunemploymentmay2025/>

Figure 10: At-risk-of-poverty rate among the unemployed (2013-2024), both with and without cost-of-living measures (%)



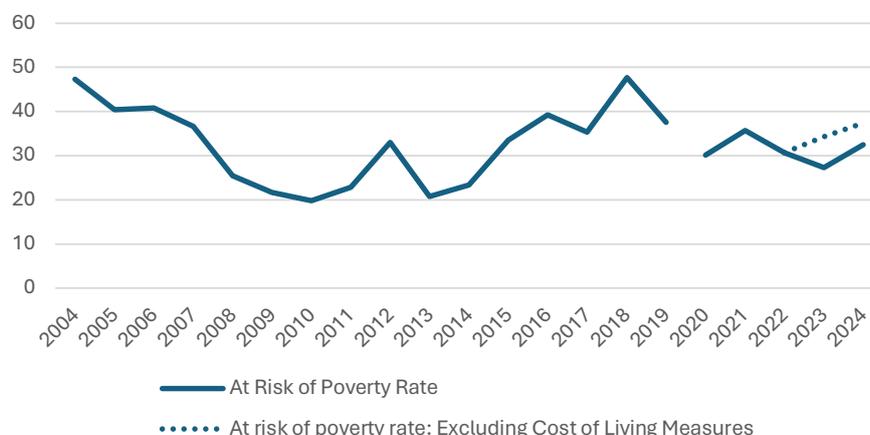
Source: CSO, Survey on Income and Living Conditions

Figure 10 shows the at-risk-of-poverty rate for unemployed individuals over time. This rate declined in the years before the recession, reflecting improvements in unemployment supports. However, it rose steadily in the years following the 2008 crash. As the economy approached full employment toward the end of the last decade, the conditions of the unemployed began to improve again. Over the past five years, it has been difficult to assess trends in the living standards of unemployed people. During the pandemic, many received large temporary income supports, and in more recent years, they have also benefited from universal cost-of-living measures. Nonetheless, as Figure 10 illustrates, while the at-risk-of-poverty rate among unemployed people fell toward the end of the last decade, it has since stagnated. Moreover, if the temporary cost-of-living supports were excluded, the rate would have increased in recent years, pointing to a deterioration in underlying conditions.

Those unable to work due to long-standing health problems

Individuals who are unable to work due to long-standing health problems face a particularly high risk of poverty and deprivation in Ireland. According to the most recent CSO data, 44.3% of this group are in the bottom income quintile, while only 3.9% are in the top, highlighting a pronounced income disadvantage. The at-risk-of-poverty rate for people in this group is 32.5%, nearly three times the national average of 11.7%. The enforced deprivation rate is even higher, at 38.5%, compared to 15.7% for the population as a whole, placing them among the most materially deprived groups in Irish society.

Figure 11: At-risk-of-poverty rate among those unable to work due to long-standing health problems (2004-2024), both with and without cost-of-living measures (%)



Source: CSO, Survey on Income and Living Conditions

These individuals typically rely on fixed income supports, such as disability payments or long-term illness allowances, and have limited access to employment income. As shown in Figure 11, the at-risk-of-poverty rate for this group followed a similar pattern to that of the unemployed. Between 2004 and 2010, the rate fell sharply from close to 50% to under 20%, reflecting improved income supports and broader economic growth. However, much of this progress was undone during the recession, and by 2018, the at-risk-of-poverty rate had returned to nearly one in two. As the economy recovered in the years that followed, the rate began to fall again.²² Yet, as with the unemployed and those aged over 65, the most recent improvements have been reliant on temporary cost-of-living supports. Without these interventions, the poverty rate among those unable to work due to health problems would have increased in recent years, revealing persistent underlying vulnerabilities.

Lone Parents

Lone parents in Ireland experience some of the highest levels of poverty and deprivation across all household types. According to the most recent CSO data, 31.8% of lone-parent households with at least one child under 25 are in the bottom income quintile, while only 4.1% are in the top. For lone parents with only adult children (all aged 25 or older), 23.4% are in the bottom quintile and just 9.3% are in the top.

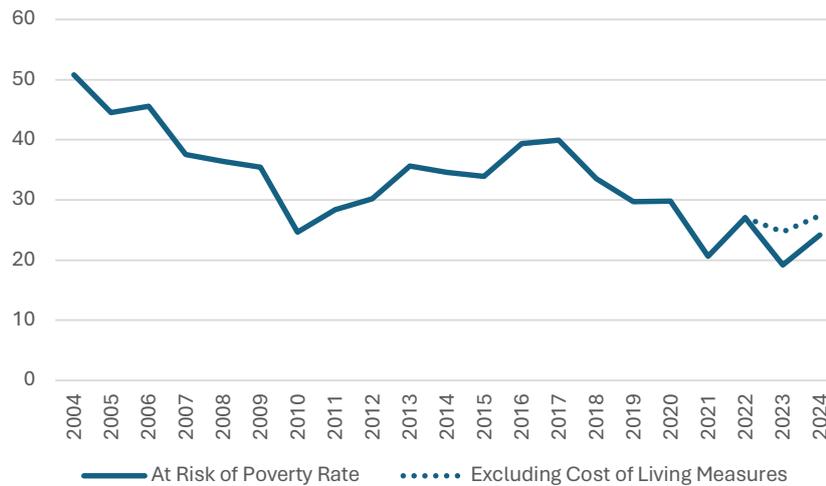
The at-risk-of-poverty rate for lone-parent families with children under 25 is 20.3%, well above the national average of 11.7%. For one-adult households with children under 18, the rate is even higher, at 24.2%. In terms of enforced deprivation, 46.3% of one-adult households with children under 18 experience deprivation. Even among lone parents with only adult children, 17.3% report being deprived.

These figures underline the extent to which lone-parent families are among the most economically vulnerable in Irish society. They are more likely to depend on social welfare supports, face barriers to full-time employment due to caring responsibilities, and encounter higher living costs per adult.

²² As part of the changes to the Survey on Income and Living Conditions introduced in 2020, the category previously labelled "Unable to work due to permanent sickness/disability" was revised to "Unable to work due to long-standing health problems". This change resulted in a break in the time series, which is marked in Figure 11 by a gap.

However, as Figure 12 shows, the long-term trend in at-risk-of-poverty rates among lone parents has been broadly positive. In the years before the recession, the rate for individuals in one-adult households with children under 18 fell sharply—from more than one in two to less than one in four. Much of this progress was reversed during the recession, but the rate began to decline again as the economy recovered.

Figure 12: At-risk-of-poverty rate for individuals in households composed of 1 adult, with children under 18 years, both with and without cost-of-living measures (%)



Source: CSO, Survey on Income and Living Conditions

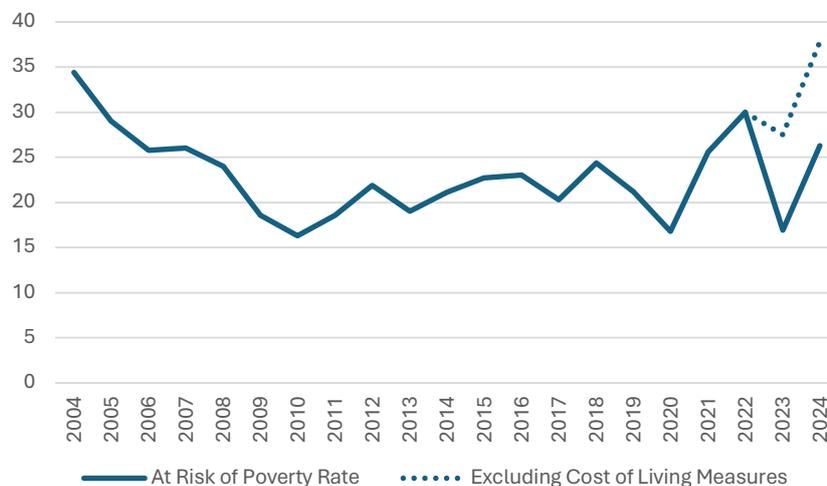
Unlike some other at-risk groups, where excluding recent cost-of-living supports significantly increases the measured poverty rate, the impact in this case appears smaller. This may reflect the effect of more permanent policy changes in recent years, such as increased investment in childcare supports. It is an area that warrants further examination and study.

Low levels of education

In contrast to the relatively hopeful signs that things might be improving for lone-parent families, the situation for those with low levels of education is perhaps the most concerning of all the at-risk groups discussed so far in this chapter.

As with other groups at higher risk of poverty, individuals with low levels of education in Ireland face a significantly elevated risk of income poverty and deprivation. According to the most recent CSO data, 48.4% of people whose highest level of education is primary school or below are in the bottom income quintile, while only 3.0% are in the top quintile. In contrast, among those with a third-level degree or higher, only 6.9% are in the bottom quintile, while 39.0% are in the top. This steep educational gradient is also evident in poverty outcomes. The at-risk-of-poverty rate for those with primary education or below is 26.3%, and the enforced deprivation rate is 22.2%. Among those with a third-level degree or higher, the corresponding rates are just 4.2% and 9.3% respectively.

Figure 13: At-risk-of-poverty rate for individuals whose highest level of education is primary school or below, both with and without cost of living measures (%)



Source: CSO, Survey on Income and Living Conditions

As seen with other at-risk groups, the situation for those with lower levels of education improved in the years before the recession. As Figure 13 shows, between 2004 and 2008, the at-risk-of-poverty rate for individuals with primary education or below declined from more than one in three to less than one in five. During the recession, conditions worsened again, although the increase in poverty was more gradual for this group than for others. However, in recent years, the data show considerable volatility in poverty outcomes. Most concerning, when cost-of-living supports are excluded, the last four to five years show a clear and sustained rise in the at-risk-of-poverty rate for this group.

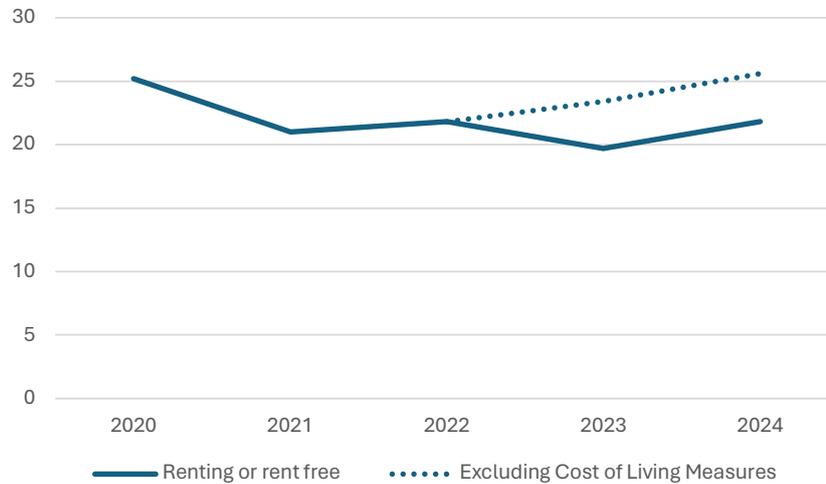
This increase is so significant that, when combined with the rise during the recession, it has effectively erased all of the progress made over the past two decades. In the most recent data, once temporary cost-of-living supports are removed, 37.8% of individuals with primary education or below are at risk of poverty. This is the highest rate recorded for this group since the Survey on Income and Living Conditions began.

Renters

Renters in Ireland experience significantly higher levels of poverty and deprivation than homeowners. According to the most recent CSO data, 33.5% of individuals living in rented or rent-free accommodation are in the bottom income quintile, while just 8.8% are in the top. In contrast, only 14.0% of those in owner-occupied housing are in the bottom quintile, and 24.9% are in the top.

The at-risk-of-poverty rate for renters is 21.8%, nearly double the national average of 11.7%. For owner-occupiers, the rate is much lower at 7.3%. The disparity is even more pronounced when it comes to enforced deprivation: 31.5% of renters experience deprivation, compared to 8.7% of homeowners. These figures underline the strong association between housing tenure and income-related hardship.

Figure 14: At-risk-of-poverty rate for individuals in rented or rent-free accommodation, both with and without cost of living measures (%)



Source: CSO, Survey on Income and Living Conditions

Due to changes introduced in the SILC in 2020, data on renters before this period are not directly comparable with more recent figures. Therefore, Figure 14 presents data on individuals in rented or rent-free accommodation for the period from 2020 onwards. While the at-risk-of-poverty rate for renters appears to show a modest decline over this five-year period, this improvement disappears once cost-of-living supports are excluded. According to the 2024 survey, 25.6% of those living in rented or rent-free accommodation would have been at risk of poverty in 2023 without these supports—higher than at any point in the last five years.

Homelessness

Of course, it is not only renters who experience the effects of the housing crisis. The crisis is felt most acutely by those who are homeless. Here, we step away from the SILC at-risk-of-poverty data to consider the direct figures on homelessness as they are reported.

During the week of 24–30 March 2025, 10,743 adults and 2,212 families accessed local authority-managed emergency accommodation. Within these families were 4,675 dependent homeless children (see Table 5).²³ This marks a significant increase on the figures presented in last year's report. Indeed, the homelessness crisis has continued to worsen so dramatically over the past decade that there is now a real risk of becoming desensitised to it.

²³ Source: Department of Housing, Local Government and Heritage.(2024) *Homelessness data*. <https://www.gov.ie/en/department-of-housing-local-government-and-heritage/collections/homelessness-data/>

Table 7: Adults and families accessing local authority managed emergency accommodation during the week of 22-28 April 2024

Region	Adults				Families			
	Adults	(of which) Single Adults	Male	Female	Total Families	(of which) single parent families	Total Adults	Total child dependants
Dublin	7,537	4,824	4,666	2,871	1,546	848	2,713	3,487
Mid-East	539	355	324	215	117	76	184	187
Midlands	230	165	126	104	51	37	65	96
Mid-West	605	387	324	281	142	88	218	225
North-East	222	141	117	105	55	46	81	98
North-West	169	147	114	55	19	18	22	42
South-East	324	240	207	117	65	50	84	107
South-West	688	526	442	246	98	56	162	204
West	429	246	237	192	119	64	183	229
TOTAL	10,743	7,031 (65%)	6,557 (61%)	4,186 (39%)	2,212	1,283 (58%)	3,712	4,675

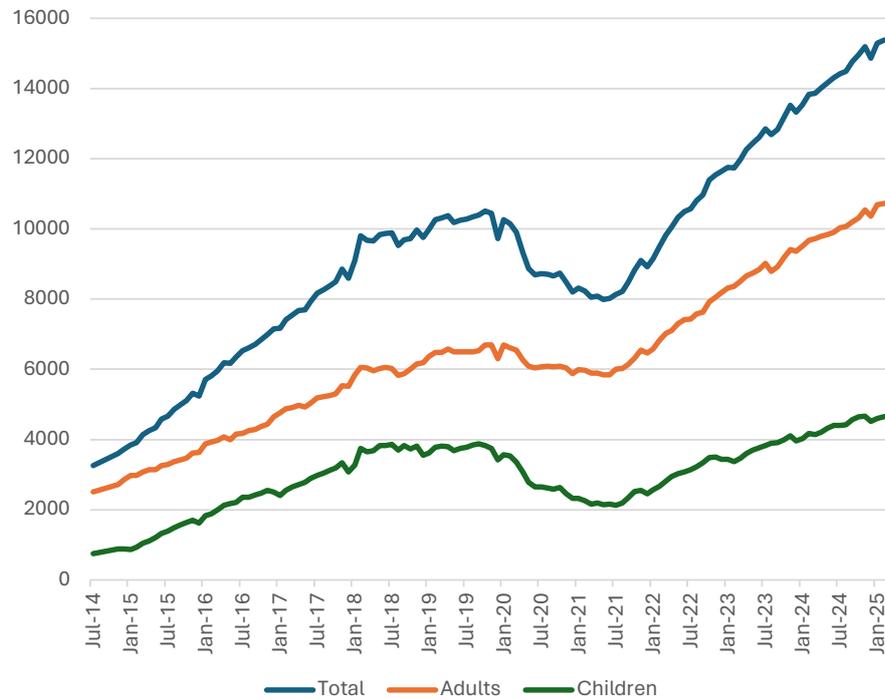
Source: Department of Housing, Local Government and Heritage

In July 2014, the number of adults in local authority emergency accommodation was 3,258. By March 2025, 15,418 people had accessed it, an increase of 373%. Over the same period, the number of children rose from 749 to 4,675, an increase of 524%.

There was a temporary fall in homelessness during the COVID-19 pandemic. As Aisling Reidy of Focus Ireland explained at the time, the "total ban on evictions was clearly a very significant factor". However, she also warned that "the failure to continue this latter measure means that we can expect to see a return to previous patterns of entry into homelessness, with a potential surge as landlords seek to 'catch up'".²⁴ This is precisely what occurred. Over the past three years, the number of homeless children has more than doubled from 2,129 in July 2021 to the current figure of 4,675—the highest since this data series began ten years ago.

24 Focus Ireland. (2020). Homeless Figures and the Impact of COVID-19. <https://www.focusireland.ie/focus-blog/homeless-figures-and-the-impact-of-covid-19/>.

Figure 15: Child dependents accessing local authority managed emergency accommodation (2014-2024)



Source: Focus Ireland, Department of Housing, Local Government and Heritage

It is important to treat these figures with caution. They are not a full measure of child homelessness. They count only child dependents accessing local authority-managed emergency accommodation. While we do not have consistent and reliable data on the full extent of child homelessness, it is well understood that actual levels are significantly higher than those captured by official statistics from the Department of Housing, Local Government and Heritage. These figures exclude children in 'own-door' temporary accommodation, domestic violence refuges, the asylum system, those sleeping rough, and the many who are 'hidden homeless'—staying with family or friends in insecure and unsuitable housing.²⁵ As Social Justice Ireland noted,²⁶ a 2019 report commissioned by the European Commission referred to the state of data collection on homelessness in Ireland as "statistical obfuscation if not 'corruption!'"²⁷

Looking Ahead: After the Supports

The last five years have been marked by extraordinary state intervention aimed at protecting households from the effects of the COVID-19 pandemic and the subsequent cost-of-living crisis. From the Pandemic Unemployment Payment and wage subsidy schemes to rounds of energy credits and targeted lump-sum payments, these measures significantly softened the impact of economic shocks on vulnerable households. For many at-risk groups, these temporary supports made the difference between hardship and stability.

²⁵ Focus Ireland. (2025). Number of people who are homeless and relying on emergency homeless accommodation. <https://www.focusireland.ie/knowledge-hub/latest-figures/>.

²⁶ Healy, S., C. Bennett, S. Devilly, M. Murphy, S. Rogers, and B. Reynolds. (2023). Social Justice Matters: 2023 Guide to A Fairer Irish Society. Dublin: Social Justice Ireland. p.132.

²⁷ Daly, M. (2019). ESPN Thematic Report on National strategies to fight homelessness and housing exclusion – Ireland. Brussels: European Commission.

However, these supports are now coming to an end. The cost-of-living measures announced in Budget 2024 were largely spent in the final months of 2023. Additional once-off supports announced in Budget 2025 were mostly paid out in November and December 2024. The government has confirmed there will be no further cost-of-living package in Budget 2026.²⁸ This means that throughout 2025 and beyond, vulnerable households are facing rising costs without the protection of the temporary payments that have sustained them in recent years.

While recent poverty data show the positive impact of these supports—particularly for low-income groups—the underlying picture is more troubling. When these temporary measures are excluded, poverty and deprivation among many groups, including those on fixed incomes, lone parents, and renters, are shown to be increasing. In some cases, poverty rates have returned to levels last seen during the recession or even earlier.

The temporary supports introduced since 2020 were a necessary response to extraordinary circumstances, but they have also masked deeper structural weaknesses in income adequacy and economic security. Without more permanent solutions, including reforms to core social protection payments, housing, childcare, and access to quality employment, the withdrawal of these supports risks pushing many households into deeper hardship. What appears in the official statistics as progress may, in fact, have been a temporary reprieve. The challenge now is to respond not only to short-term shocks but to long-standing inequalities that these crises have exposed.

28 Micheál Lehane (2025). Taoiseach rules out specific cost of living package in next budget. Dublin: RTÉ. <https://www.rte.ie/news/politics/2025/0514/1512842-cost-of-living-dail/>

5. Special Focus: Inequality, Isolation and Loneliness

(by Adeelia Goffe,
Maria Pachowicz and Oisín Gilmore)

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Introduction

Inequality is not just about income gaps. It shapes people's ability to take part in everyday life, including their social connections.

When resources and power are unequally shared, some groups are pushed to the edges of society. They are less likely to participate in social, cultural and political life. This can lead to isolation, loneliness and a lack of meaningful contact with others.

Economic security plays a key role. It is not only about having enough income, but also about long-term stability. It includes access to housing, healthcare, education and other essentials, whether through the market or public services. Without this security, people often withdraw from social life, not by choice but because they cannot afford to participate.

Inequality divides society not just by income and wealth. It also creates deep divides in who feels connected, supported and included. It contributes to widespread loneliness and isolation.

Inequality and Social Contact

The most recent issue of the ESRI Poverty, Income Inequality and Living Standards in Ireland report series includes a thematic chapter by Bertrand Maître and Helen Russell. It explores the link between poverty, material deprivation and outcomes such as life satisfaction, participation in social activities, and contact with friends and family. The analysis draws on additional questions asked as part of the Survey on Income and Living Conditions (SILC) in 2015 and 2022.²⁹

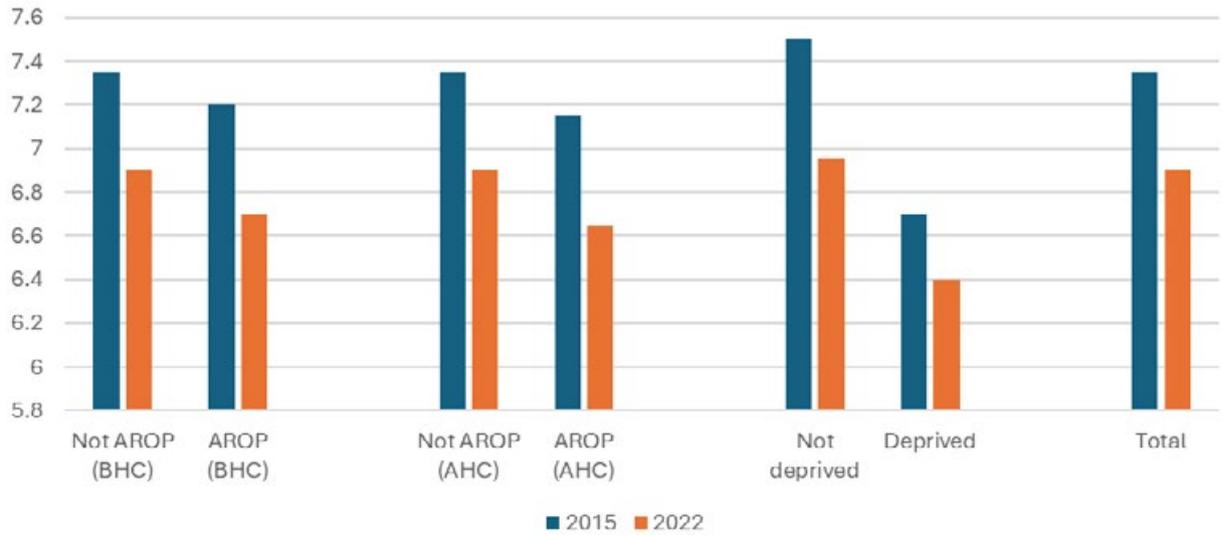
As shown in Figure 16, there is a clear link between being at risk of poverty (AROP) and reduced social contact. People at risk of poverty before housing costs (BHC) reported lower levels of contact with friends and family than those not at risk, in both 2015 and 2022. This suggests that the financial strain associated with poverty can limit people's ability to engage socially, whether due to the cost of travel, lack of space to host, or the stress and isolation that often accompany financial insecurity. The same pattern holds when poverty is measured after housing costs (AHC).

The impact of deprivation is even more pronounced. In both years, individuals experiencing deprivation had less social contact than those who did not. Deprivation can make it difficult to maintain relationships, take part in everyday activities or feel connected to others, reinforcing both economic and social isolation. Indeed, as stated in Chapter Three above, two of the deprivation indicators used in the SILC are directly linked to social participation: the inability to "have family or friends for a drink or meal once a month" or to "have a morning, afternoon or evening out in the last fortnight for entertainment."

29 The extra questions participants were asked were: "How often do you usually get together with relatives?"; "How often do you usually contact relatives, by telephone, SMS, letter, fax, internet, etc.?"; "How often do you usually get together with your friends?"; and "How often do you usually contact your friends, by telephone, SMS, letter, fax, internet, etc.?". The answers were given on a five-point scale ranging from "Daily" to "Never". The results were then standardised to a 0–10 scale.

One striking feature of the data is the overall drop in social interaction in 2022 compared to 2015. This decline is largely explained by the public health restrictions in place during the COVID-19 pandemic. Although the survey was conducted in 2022, the questions referred to people's experiences in 2021, when restrictions were still in effect.

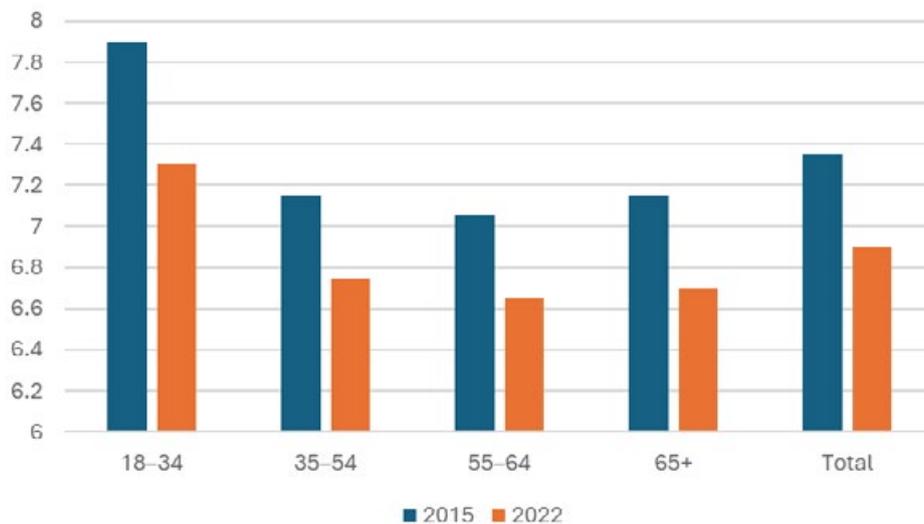
Figure 16: Mean Social Contact by At Risk of Poverty and Deprivation: 2015-2022 (0-10)



Source: Roantree et al. (2024)

Figure 17 shows social contact by age group. Unsurprisingly, those aged 18–34 had the highest levels of social contact, followed by those aged 65 and over. These were also the two groups most affected by pandemic-related restrictions.

Figure 17: Mean Social Contact by Age Group, 2015-2022 (0-10)



Source: Roantree et al. (2024)

In the ESRI report, Maître and Russell also carried out econometric analysis to examine how social contact is influenced by poverty and other personal factors. They found that deprivation, poor health and being an immigrant all reduced social contact. The negative impact of immigration status increased depending on where a person was born, strongest for those born outside the EU, and least for those from the UK. Interestingly, having a partner was also linked with lower levels of social contact with friends and family. On the other hand, being aged 18–34 or being female was associated with more frequent social contact.

Loneliness, Isolation and Health: Context and Background

Feelings of loneliness and isolation are in natural opposition to feeling connected and part of a community. Feelings of loneliness are closely connected to issues of social isolation and lack of social contact. In recent years these topics have increasingly become the topics of public discourse.

Isolation refers to the objective state of having minimal social contact or interaction with others. It can be measured by the size of a person's social network, the frequency of contact, and participation in community or group activities.³⁰ Isolation may not necessarily be concerning, as some individuals may choose solitude. However, isolation becomes concerning when it is involuntary and negatively affects well-being. Although they may wish to engage in social interactions with others, people who are socially isolated may have very limited opportunities for meaningful engagement, which can heighten the risk of loneliness and related health issues.

On the other hand, loneliness is a subjective and often distressing feeling that arises when there is a gap between the social relationships a person has and those they would like to have.³¹ Loneliness is not necessarily dependent on being physically alone; one can feel lonely even when surrounded by others. These experiences of social and emotional loneliness can overlap and are shaped by individual life stages and social contexts.

"Loneliness is a terrible thing. I think it can destroy if you let it. You could easily go into yourself, you get lost in your own" -- Research Participant³²

Both isolation and loneliness are significant public health and societal issues in Ireland because of their widespread impact on individual well-being, healthcare systems, and social cohesion. Research shows that both experiences are linked to a higher risk of physical and mental health problems, including depression, anxiety, cardiovascular disease, cognitive decline, and even premature death.³³ In simple terms, the health impact of chronic loneliness has been compared to smoking 15 cigarettes a day.³⁴ In their meta-analysis, Holt-Lunstad and colleagues examined the effect sizes of social isolation, loneliness and living alone. The authors found that:

- Being socially isolated led to a 29% increased risk of premature mortality compared to those who were not.
- Loneliness led to a 26% increased risk of early death.
- Living alone led to a 32% increased risk of mortality.

30 Victor, C. R., Scambler, S. J., Bowling, A., & Bond, J. (2000). Being alone in later life: Loneliness, social isolation and living alone. *Reviews in Clinical Gerontology*, 10(4), 407–417. <https://doi.org/10.1017/S0959259800104101>

31 Perlman, D., & Peplau, L. A. (1981). Toward a social psychology of loneliness. In R. Gilmour & S. Duck (Eds.), *Personal relationships in disorder* (pp. 31–56). Academic Press.

32 TASC (in prep). *Investigating Loneliness Among Older Men in Western and Eastern Europe*.

33 Holt-Lunstad, J., Smith, T. B., Baker, M., Harris, T., & Stephenson, D. (2015). Loneliness and social isolation as risk factors for mortality: A meta-analytic review. *Perspectives on Psychological Science*, 10(2), 227–237. <https://doi.org/10.1177/1745691614568352>

34 Ibid.

Increased morbidity and mortality, along with an ageing population, all place additional strain on already overstretched health and social care services in Ireland, especially as the population ages.

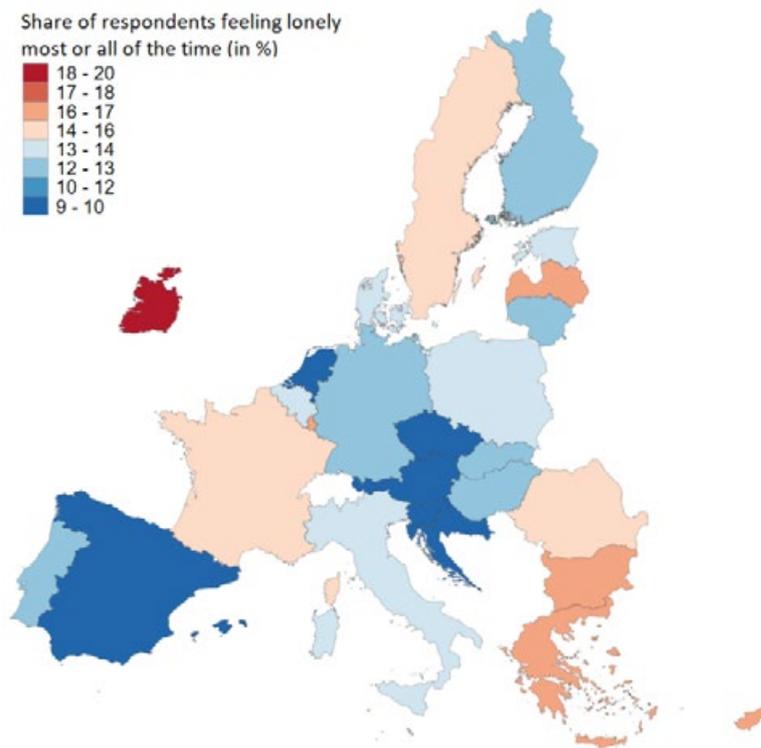
From a societal perspective, isolation and loneliness can undermine community resilience and social inclusion. In Ireland, older people, people with disabilities, those living alone, carers, and people experiencing poverty or marginalisation are especially vulnerable.³⁵ Furthermore, during the COVID-19 pandemic, feelings of social disconnection were shown to be deepened across some vulnerable groups, such as older people³⁶ and those with low incomes.³⁷

Prevalence and Patterns of Loneliness

Ireland is a Lonely Place

Recent studies indicate a significant prevalence of loneliness in Ireland. A 2022 EU-wide survey found that over 20% of respondents in Ireland reported feeling lonely most or all of the time, the highest rate among EU member states.³⁸ By comparison, 13% of respondents across the EU report feeling lonely either most or all of the time. A large disparity is observed between Ireland and its western European neighbours (Figure 18).

Figure 18: Share of Respondents Feeling Lonely (%)



Source: EU-LS, 2022 (%)

- 35 ALONE. (2023). Annual Report 2023. <https://test.alone.ie/library/annual-report-2023/>; OECD (2020), OECD Economic Surveys: Ireland 2020, OECD Publishing, Paris. <https://doi.org/10.1787/dec600f3-en>.
- 36 Ward, M., McGarrigle, C., Hever, A., O'Mahoney, P., Moynihan, S., Loughran, G., & Kenny, R. A. (2020). *Loneliness and social isolation in the COVID-19 pandemic among the over 70s: Data from The Irish Longitudinal Study on Ageing (TILDA) and ALONE*. The Irish Longitudinal Study on Ageing. <https://doi.org/10.38018/TildaRe.2020-07>; TASC (in prep). *Investigating Loneliness Among Older Men in Western and Eastern Europe*.
- 37 TASC (2020). TASC Mental Health and Covid-19 Roundtable - Briefing Document. https://www.tasc.ie/assets/files/pdf/tasc_mental_health_roundtable_briefing_doc_241120.pdf
- 38 Joint Research Centre. (2023). *Loneliness prevalence in the EU*. European Commission. Retrieved from https://joint-research-centre.ec.europa.eu/scientific-activities/survey-methods-and-analysis-centre-smac/loneliness/loneliness-prevalence-eu_en

In addition, it has been mentioned that Ireland has become lonelier over time, with residents perceiving that there has been a decline in social connectedness and social civility. Anecdotal data from a number of TASC studies in disadvantaged areas indicates that residents have attributed this change in recent years to communities being broken apart due to gentrification, the reconfiguration of social housing developments and people emigrating.³⁹ One research participant noted:

"Ireland has changed, and [a] lot of people don't speak anymore. Even when you say hello at them, they don't even answer you."-- Research Participant⁴⁰

Such shifts have resulted in a breakdown of traditional support networks.

An Inequitable Distribution of Loneliness

Data from a Healthy Ireland study indicate a variety of risk factors for loneliness. Mohan (2025) found that frequent loneliness was strongly associated with being female, having limited social supports and experiencing probable mental health difficulties.⁴¹ Higher loneliness was also found to be more likely among younger adults (15–29), people with disabilities, and those not born in Ireland. In this study, acute loneliness was also found to increase the probability of mental health difficulties by 35.6 percentage points.⁴² This is not necessarily in contradiction with the data presented on mean social contact by age group (in Figure 17) as lower social contact is not directly related to loneliness (see section 3 for comparisons of terminology).

There are a variety of factors that may contribute to someone feeling isolated or lonely. Socioeconomic challenges, such as poverty and unemployment, can limit social participation. Life transitions, including bereavement or retirement, often lead to reduced social networks. Health issues, particularly among older adults, can restrict mobility and social engagement. Data from ALONE, an organisation supporting older people, revealed that one in three individuals experiencing loneliness had no one visit them and 9% of individuals had not been out socially in over a year.⁴³ Moreover, rural living and digital exclusion can exacerbate feelings of isolation, especially among those without access to technology or transportation.⁴⁴

As stated above, loneliness does not affect everyone equally; certain groups are more at risk, including older people, people with disabilities, carers, immigrants, and people experiencing homelessness. These groups often face barriers that go beyond social isolation, such as poverty, exclusion, and deprivation, which are rooted in structural inequalities. These underlying inequalities can intensify feelings of loneliness and limit opportunities to connect with others. Recognising the links between loneliness and broader structural issues is essential to addressing the root causes and ensuring support reaches those most affected.

The themes of isolation and loneliness have come up repeatedly throughout the course of TASC's work. The following section highlights some of the groups who have been found to be particularly vulnerable to feelings of isolation and loneliness, and have linked these experiences, directly or indirectly, to poor mental health.

39 TASC, unpublished

40 TASC (in prep). *Investigating Loneliness Among Older Men in Western and Eastern Europe*.

41 Mohan, G. (2025). *Who is lonely in the EU's loneliest nation?* [Lecture]. SSISI Barrington Lecture.

42 Ibid.

43 ALONE. (2023). *Annual Report 2023*.

44 Joint Research Centre. (2023). *Loneliness prevalence in the EU*.

Case Studies

People Experiencing Homelessness

People experiencing homelessness (PEH) are among the most at risk of loneliness and social isolation due to a range of interrelated social, psychological, and structural factors which may result in disconnection from family, social stigma, and unstable living conditions. Such factors may result in some PEH being at risk of extreme social exclusion, face a lack of stable relationships and experience limited access to community engagement.

Many PEH have experienced trauma or adverse life events that sever ties with support networks, while societal exclusion and discrimination further marginalise them.⁴⁵ Frequent moves between temporary accommodations make it difficult to establish lasting social connections. Moreover, mental health difficulties, which may both cause and be a consequence of isolation, are prevalent among PEH, and access to consistent support is often limited.⁴⁶

Without the presence of adequate supports individuals may struggle to cope without engaging in high-risk behaviours (e.g. substance misuse).⁴⁷

“One resident, who described struggling with depression for his whole life said that he had ‘been drinking heavily for years and have tried to stop but it’s been tough...When I’m feeling down, I tend to isolate myself and drink.’”⁴⁸

Together, these conditions significantly heighten the risk of chronic loneliness among this population.

In recent research, feelings of isolation and loneliness were frequently expressed by people experiencing homelessness residing in various shared or congregated living arrangements.⁴⁹ Despite living in congregated settings, PEH still felt lonely due to a lack of meaningful social connections as well as a lack of trust with others in the same environment. To a certain extent, staff were able to alleviate these feelings by making themselves available to residents for informal conversations or providing them with support in linking in with community activities. However, not all residents were able to find someone that they could connect with directly. For those who were unable to make connections, these settings were described as impersonal or unsafe. Such individuals found it difficult to form supportive relationships or a sense of belonging and linked their continued feelings of isolation to the lack of adequate housing.

PEH have complex mental health needs, requiring formal and informal supports to reduce the barriers to access that individuals may face.⁵⁰ As highlighted in the report, to reduce the barriers PEH face in accessing mental health services, both formal supports (e.g. multidisciplinary mental health teams, psychiatric services, and addiction supports) and informal supports (e.g. peer networks, outreach teams, and community-based programmes) are essential. A combination of both is needed to effectively address the multifaceted needs of this group and to create pathways into care that are not only accessible but also acceptable and sustainable.

45 Mayock, P., Parker, S., & Sheridan, S. (2015). *Women, homelessness and service provision in Ireland: Key findings from a study of homeless women in Dublin*. Simon Communities of Ireland.; TASC (2025). *Breaking the Cycle: Addressing Mental Health and Homelessness through Integrated Care*. https://www.tasc.ie/assets/files/pdf/tasc_mental_health_homelessness.pdf

46 Ibid.

47 Ibid.

48 Ibid.

49 Ibid.

50 Ibid.

People with Chronic Illness/Disability

According to Census 2022, 22% of people in Ireland report experiencing at least one long-term condition, difficulty, or disability of any kind.⁵¹ This marks a notable increase from the 13.5% recorded in 2016, although the rise may be partly attributed to changes in the wording and structure of questions between the two censuses.⁵²

People with a chronic illness or disability (PWD) may face mobility challenges and societal barriers, which limit social interaction and community participation. Individuals whose chronic illness or disability severely hampers their daily activities experience significantly lower levels of social participation. According to the Living in Ireland Survey, they are much less likely than others to be members of clubs or associations, to talk regularly with neighbours, to meet with friends or relatives, or to go out for entertainment.⁵³ Findings of reduced participations rates held true when differences in age and gender were controlled for, indicating a significant and profound association between severe impairment and social exclusion.⁵⁴ Although the data used in this study was collected in 2002, the findings highlight how severe limitations due to illness or disability can substantially restrict engagement in community life.

Although the NDA data do not allow for specific numerical comparisons, data from Independent Living Movement Ireland have been able to provide some quantifiable insights.⁵⁵ PWDs in Ireland experience significantly lower levels of participation in social and recreational activities compared to those without disabilities. For example, only 36% of PWDs reported taking a holiday in Ireland in the past year, compared to 53% of non-disabled individuals. Similarly, 28% of PWDs took a holiday abroad, compared to 50% of those without a disability. Participation in day trips was also lower among PWDs (55%) than non-PWDs (75%).⁵⁶ Information from the ILMI further highlights similar disparities between PWDs and non-PWDs (66% vs. 88%) in having access to the internet and having their own mobile phone (85% vs. 96%).

Interviews conducted as a part of evaluating two social prescribing programmes revealed that limited physical mobility had an impact on programme participants' wellbeing, often contributing to feelings of social isolation and loneliness⁵⁷. Many individuals with restricted mobility found it particularly difficult to maintain daily routines or participate in community life, which further deepened their sense of disconnection and reduced their overall quality of life.⁵⁸

Social prescribing programmes played a vital role in addressing these challenges by offering tailored support. Through the provision of suitable activities and accessible transport, SP helped participants overcome barriers to engagement. These personalised supports enabled individuals to take part in gentle and enjoyable activities that matched their physical capabilities, fostering a sense of inclusion and purpose.⁵⁹

51 Central Statistics Office. (2023b). Census 2022 Profile 4 – Disability, Health and Carers. <https://www.cso.ie/en/releasesandpublications/ep/p-cpp4/census2022profile4-disabilityhealthandcarers/>

52 Disability Federation of Ireland. (2024). *Disability in Ireland: Factsheet 2024*. <https://www.disability-federation.ie/publications/disability-in-ireland-factsheet-2024/>

53 National Disability Authority. (2021). Disability and social inclusion in Ireland. <https://nda.ie/uploads/publications/Disability-and-social-inclusion-in-ireland.pdf>

54 Ibid.

55 Independent Living Movement Ireland. (n.d.). *Key statistics*. <https://ilmi.ie/key-statistics/>

56 Ibid.

57 TASC (2023). Healthy Communities Project: impact evaluation report October 2021 - January 2023. https://www.tasc.ie/assets/files/pdf/healthy_communities_project_december_2023_final.pdf; TASC (2024a). Dublin City Community Co-operative Healthy Communities Project Social Prescribing Evaluation. https://www.tasc.ie/assets/files/pdf/web_coop_sp_report-compressed_1.pdf; TASC (2024b). Family Peer Support Work: A Review of Irish & International Literature. https://www.tasc.ie/assets/files/pdf/family_peer_support_work_november_2024.pdf

58 Ibid.

59 Ibid.

Following serious illness, such as cancer or chronic conditions, individuals often face significant and ongoing mental health challenges, particularly during the recovery or survivorship phase.⁶⁰ Feelings of isolation and psychological vulnerability can intensify after treatment ends, when formal medical supports are reduced but emotional needs remain acute.⁶¹ The accessibility of mental health services is shaped by intersectional factors, such as socio-economic status, gender, race, geographic location, and disability. For example, most cancer services in Ireland started as charities, which were “founded by white middleclass women” and can be “intimidating places for working class people or people of colour to go to”, leaving marginalised groups underserved.⁶² As such, ensuring equitable access to psychosocial support requires an inclusive approach that recognises and addresses the diverse experiences of illness and recovery across different social groups.

Family Members, Carers, and Supporters

Within the health sciences, the term “family members, carers, and supporters” (FCS) refers to the broad, informal support networks of people living with a disability, chronic illness, mental health condition, or addiction. This may include immediate or extended family members, partners, or friends who form an important part of the person’s support network. FCS may offer emotional and practical support as well as providing unpaid care to the PWD.⁶³

While the loneliness and isolation experienced by PWD are increasingly recognised, the needs of their FCS receive comparatively little attention – despite saving the state approximately €20billion annually through their caring responsibilities.⁶⁴ Research conducted by Family Carers Ireland evidences the significant and pervasive levels of isolation and loneliness experienced by FCS. In their 2024 “State of Caring” survey of over 2,100 FCS, 48% experienced severe loneliness and only 24% experienced little to no loneliness.⁶⁵ Concerningly, these figures constitute a dramatic increase in levels of loneliness among FCS since before the COVID-19 pandemic, when only 22% of respondents felt severely lonely and 40% felt little to no loneliness.⁶⁶ Moreover, almost half of respondents in the 2024 survey felt left out and isolated most of the time and almost a quarter lacked companionship most of the time.

The factors contributing to these findings are complex and multifaceted.⁶⁷ FCS experience isolation due to the high demands of caregiving, leaving little time for social life or self-care. The housing situation of FCS may also contribute to their isolation, for those who live in remote locations or whose homes are not suitable for socialising. This is particularly relevant for FCS whose family members require 24/7 care or supervision.

FCS with substantial caring responsibilities may not be able to maintain full-time employment, stripping them of the opportunity to build connections in their workplace. In the 2022 State of Caring survey, 75% of FCS who were not in employment felt socially excluded.⁶⁸ Relatedly, many FCS face

60 TASC (2023). Healthy Communities Project: impact evaluation report October 2021 - January 2023

61 Ibid.

62 Ibid.

63 TASC (2024b). Family Peer Support Work: A Review of Irish & International Literature.; HSE Mental Health Services, 2018

64 Family Carers Ireland. (2022). *The State of Caring 2022*. <https://familycarers.ie/media/2545/family-carers-ireland-state-of-caring-2022.pdf>

65 Family Carers Ireland. (2024). *The State of Caring 2024*. <https://www.familycarers.ie/media/3549/family-carers-ireland-state-of-caring-2024.pdf>

66 Family Carers Ireland. (2020). *The State of Caring 2020*. <https://familycarers.ie/media/2022/family-carers-ireland-state-of-caring-2020.pdf>

67 Family Carers Ireland. (2022). *The State of Caring 2022*; 2024; TASC (unpublished-a). Migrant Community Needs Assessment.

68 Family Carers Ireland. (2022). *The State of Caring 2022*.

significant financial challenges, limiting the disposable income available for socialising. In 2024, 32% of FCS who were struggling financially reported that they cut back on seeing friends and family in order to make ends meet.⁶⁹

Stigma associated with certain disabilities, particularly mental health conditions, further contributes to the isolation and loneliness experienced by some FCS, who may not feel safe in disclosing their experiences or seeking support for the challenges they face. More generally, FCS report feeling that those around them do not understand what they are going through or how to support them; in the 2022 State of Caring survey, one in four respondents said that they had nobody to turn to if they needed help.⁷⁰ Combined with very limited access to State services, respite, or paid care staff, many FCS are left completely on their own, receiving no support for themselves or their relative.⁷¹

One approach to alleviating the loneliness and isolation felt by FCS is Family Peer Support Work (FPSW): a formalised, professionalised form of support for FCS offered by Family Peer Support Workers (FPSWrs), who themselves are or have at some point been FCS.⁷² This can involve group-based or one-to-one information-sharing, emotional support, mentoring, support groups, advocacy, and others. Through their shared experiences, the FPSW can connect and empathise with the FCS seeking their support, as they understand first-hand the challenges they face.

A 2024 literature review conducted by TASC⁷³ demonstrates the value of FPSW to FCS of people experiencing mental health difficulties. Specifically, the Irish and international sources reviewed within the research evidence that FPSW effectively reduces the levels of loneliness and isolation experienced by FCS, while helping them to feel more connected, understood, and accepted, and overall improving their general health, wellbeing, and psychological functioning. Receiving support from another FCS, who can truly understand and empathise with the person's experiences, was considered crucial to the effectiveness of FPSW.⁷⁴

However, despite the evidence for its effectiveness, the review found that the availability of FPSW in Ireland remains very restricted. Within the HSE, FPSWrs are available exclusively to family members of adults availing of mental health services in certain geographic areas. FCS outside of these catchment regions, or whose relative is not engaging with mental health services, cannot access FPSW through the HSE. Other barriers to access have also been noted, such as low limits on the number of available sessions, fear of stigma, and the limited range of services available. TASC's⁷⁵ review recommends the standardisation of FPSW across Ireland as well as enhancing its availability and accessibility to all FCS of people experiencing mental health difficulties.

Older Individuals

All of us, regardless of where we begin in life, inevitably age, and ageing inherently brings with it certain natural consequences — some physical, some emotional, and others social. These consequences may include a gradual decline in physical and cognitive function, increased vulnerability to illness,

69 Family Carers Ireland. (2024). *The State of Caring 2024*.

70 Family Carers Ireland. (2022). *The State of Caring 2022*.

71 Family Carers Ireland. (2022). *The State of Caring 2022*; Family Carers Ireland. (2024). *The State of Caring 2024*.

72 TASC (2024b). Family Peer Support Work: A Review of Irish & International Literature.

73 Ibid.

74 Ibid.

75 Ibid.

and a changing sense of identity.⁷⁶ One of the most profound aspects of ageing is bereavement, the loss of loved ones, which can lead to loneliness, grief, and social isolation.⁷⁷

"I'm lonely. Everything's very good, until you go to your own house and close your door." -- Research Participant⁷⁸

As people age, they also face retirement, changes in their role within the family or community, and shifts in their independence or mobility.⁷⁹ Together, these changes can significantly impact an individual's quality of life and mental wellbeing.⁸⁰

"Some of my neighbours now are going into homes with dementia. They're not keeping in touch with their people. And they're being left there or isolated." -- Research Participant⁸¹

Although Ireland currently has a younger population than the OECD average, its population is ageing at a rapid pace. This demographic shift is a growing concern due to the expected strain on healthcare, pensions, and economic sustainability. Ireland's ageing population is projected to simultaneously increase public spending while reducing revenues from labour taxes.⁸² It is projected that, "On current demographic trends, age-related expenditure is set to be somewhere in the region of €16 billion (in 2022 prices) higher by the mid-point of the century just to maintain existing levels of service." This is driven by both higher spending on pensions and on healthcare and long-term care, while overall GNI* growth is expected to slow due to the declining proportion of the working-age population.⁸³

Organisations like Friends of the Elderly, Age Action and ALONE play a crucial role in supporting older people who may be experiencing loneliness, isolation, or challenges related to ageing. Such organisations provide a range of person-centred services, including befriending services that connect older individuals with trained volunteers for regular social contact and emotional support. These services help reduce feelings of loneliness and builds meaningful relationships over time.⁸⁴ Through advocacy, practical assistance, and long-term support, these organisations and others contribute to improving the quality of life and wellbeing of older people across Ireland.

TASC's research has highlighted the profound impact that social prescribing has had on older participants' lives. For example, one programme participant in his early 60s who also had a physical disability was engaged with the social prescribing programme run by the Dublin City Community Co-operative for 14 months. During this time the link worker identified his needs, linked him in with a variety of suitable services, and supported him accessing community services (e.g. Friends of the Elderly, housing supports) and reconnecting with his family.

76 World Health Organization. (2015). *World report on ageing and health*. <https://www.who.int/publications/i/item/9789241505042>

77 Stroebe, M., Schut, H., & Boerner, K. (2017). Cautioning health-care professionals: Bereaved persons are misguided through the stages of grief. *OMEGA - Journal of Death and Dying*, 74(4), 455–473. <https://doi.org/10.1177/0030222817691870>

78 TASC (in prep). *Investigating Loneliness Among Older Men in Western and Eastern Europe*.

79 Victor, C. R., & Bowling, A. (2012). A longitudinal analysis of loneliness among older people in Great Britain. *The Journal of Psychology*, 146(3), 313–331. <https://doi.org/10.1080/00223980.2011.609572>

80 Age UK. (2019). *Later life in the United Kingdom*. https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/late_life_uk_factsheet.pdf

81 TASC (in prep). *Investigating Loneliness Among Older Men in Western and Eastern Europe*.

82 OECD (2020). *OECD Economic Surveys: Ireland 2020*, OECD Publishing, Paris. <https://doi.org/10.1787/dec600f3-en>

83 Government of Ireland. (2024). *Summer Economic Statement 2024*. <https://www.gov.ie/en/publication/ee21b-summer-economic-statement-2024/>

84 ALONE. (2021). *ALONE – Supporting older people to age at home*. <https://alone.ie/>; Friends of the Elderly Ireland. (2024). *Friends of the Elderly Ireland*. <https://friendsoftheelderly.ie/>

During the sequential lockdowns during 2020 and 2021, the population restricted its social networks in response to public health guidance.⁸⁵ The *Hello Again World* campaign represents a timely and well-intentioned initiative by the Irish government to address loneliness and social isolation among older people, particularly in the aftermath of the COVID-19 pandemic. Launched in 2023 by the Department of Health and supported by Healthy Ireland, the campaign encourages older individuals to reconnect with others through community engagement and everyday social interactions.⁸⁶ Its multimedia approach and accessible messaging help to normalise conversations around loneliness and promote safe social participation. However, while the campaign raises awareness and offers practical advice, its effectiveness may be limited without parallel investment in community infrastructure, public transport, and local supports that enable sustained engagement. As the charity ALONE has argued, the campaign should be accompanied by a national strategy to tackle the structural factors contributing to loneliness, such as housing insecurity, digital exclusion, and limited access to services.⁸⁷ Therefore, although *Hello Again World* is a positive step forward, it must form part of a broader, more comprehensive policy response to social inequalities.

Evidence suggests that Irish society has been changing in recent years. Two older men who participated in interviews for a study on loneliness felt that Irish society has become increasingly open in recent years, particularly when it comes to discussing loneliness. One participant specifically mentioned that he has been able to openly discuss feeling lonely, something he would not have been able to do 3.5 years ago.⁸⁸

Ethnic Minorities, Immigrants and 3rd Country Nationals

Although not inherently isolated, members of minority ethnic and/or national backgrounds may face social and structural barriers,⁸⁹ which may lead to exclusion and increase loneliness, especially in more rural or less diverse areas.

"The impact of lacking this "natural network" is two-fold. Firstly, having networks and connections in Ireland provides greater access to information as well as contacts in the services who can assist patients in accessing services. As per the above participant, immigrants are less likely to have these structures and so are at a disadvantage. Secondly, social networks reduce feelings of isolation and can provide practical support such as help with childcare."--⁹⁰

Stress, social isolation, and absence of support networks have been described as having a substantial impact on the mental health of immigrants.⁹¹ In a recent research project investigating the health needs of immigrant communities the lack of "natural networks" was raised repeatedly by both immigrants and service providers as being a particularly difficult challenge as social networks reduce feelings of isolation.⁹²

85 Department of Health. (2020). Public health measures in place right now - 4 September 2020. <https://www.gov.ie/en/department-of-health/publications/public-health-measures-in-place-right-now-4-september-2020/>

86 Department of Health. (2023). *Ministers for Health and CMO launch Social Connections campaign to address loneliness and isolation among older people*. <https://www.gov.ie/en/department-of-health/press-releases/ministers-and-chief-medical-officer-advise-older-people-how-to-reconnect-with-their-communities-as-they-launch-online-resource/>

87 ALONE. (2023). *Annual Report 2023*.

88 TASC (in prep). *Investigating Loneliness Among Older Men in Western and Eastern Europe*.

89 McGinnity, F., Privalko, I., Fahey, É., Enright, S., & O'Brien, D. (2020). Origin and Integration: A study of migrants in Ireland. ESRI Research Series. <https://www.rte.ie/documents/news/2020/06/esri-migrant-report.pdf>

90 TASC (unpublished-b). Tipperary Town Child, Youth and Family Service Mapping.

91 TASC (unpublished-a). *Migrant Community Needs Assessment*.

92 Ibid.

Social prescribing has been observed to be a beneficial tool for linking direct provision residents and other immigrants in with local services.⁹³ However, there is an urgent need for culturally sensitive services to address the distinct and often overlooked stressors that affect their well-being.⁹⁴

Children and Young People

Generally, more socially connected, young people can still experience loneliness, particularly due to bullying, mental health difficulties, or exclusion. However, as a group, they tend to have broader opportunities for socialisation.

Researchers at the Royal College of Surgeons found that more than one in four adolescents rated their mental health as “bad” or “very bad,” over a third reported self-harming, and 11% had attempted suicide. Feelings of isolation and loneliness were identified among the range of challenges reported by young people during COVID-19⁹⁵ and in subsequent years. Lockdowns and school closures disrupted key social connections, with many teenagers struggling to reconnect with peers post-restrictions, contributing to ongoing emotional challenges.⁹⁶ The findings underscore the severe mental health impact of social disconnection, with gender diverse young people shown to be particularly at risk.⁹⁷

Similarly, the Growing Up in Ireland study found that 53% of 13-year-olds had three or fewer close friends in 2021–22, compared to 41% a decade earlier, reflecting a decline in peer relationships.⁹⁸ This shift suggests that young people today may be experiencing greater social isolation than previous cohorts, with fewer opportunities for forming and maintaining close friendships during a critical stage of emotional and social development. This trend raises concerns about the long-term effects on young people’s mental health, self-esteem, and sense of belonging, highlighting the importance of supportive environments both in and outside of school to foster meaningful peer connections.

Smyth (2024) emphasised that young carers were particularly affected by these declining peer relationships.⁹⁹ A post by Family Carers Ireland (2023) highlighted that 80% of young carers (defined as those from 10-17 years of age) experience elevated depressive symptoms, underscoring the compounded impact of social isolation on already vulnerable groups.¹⁰⁰

After COVID, children and young people have noted a lack of suitable and accessible opportunities for socialising, a gap that is often more evident in marginalised or underserved communities.¹⁰¹ These feelings often intensify over time, creating a cycle where social withdrawal or limited engagement leads to greater isolation and reduced access to supportive networks.

For many, this isolation becomes more pronounced outside of the school term, when structured environments, daily peer interaction, and routine support from school staff are no longer present.

93 TASC (2023). Healthy Communities Project: impact evaluation report October 2021 - January 2023.; TASC (2024c). South Dublin County Partnership: Clondalkin Social Prescribing Service Evaluation. https://www.tasc.ie/assets/files/pdf/social_prescribing_clondalkin_tasc_report.pdf

94 TASC (unpublished-a). *Migrant Community Needs Assessment*.

95 TASC (2020). TASC Mental Health and Covid-19 Roundtable - Briefing Document

96 Irish Examiner. (2024, February 21). *Teenagers report high levels of loneliness and disconnection post-Covid*. <https://www.irishexaminer.com/news/arid-41428168.html>

97 Dooley, N., Power, E., Healy, H., Cotter, D., & Cannon, M. (2024). Mental health of Irish adolescents following the COVID-19 pandemic: results from a population-based cross-sectional survey. *Irish Journal of Psychological Medicine*, 41(4), 430–438. <https://doi.org/10.1017/ipm.2024.16>

98 Smyth, E. (2024). The changing social worlds of 13-year-olds. ESRI Research Series 178, Dublin: ESRI, <https://doi.org/10.26504/rs178>

99 Ibid.

100 Family Carers Ireland. (2023). *Alongside positive impacts, young carers can experience high levels of stress, loneliness and depression*. <https://familycarers.ie/news-press-releases/2023/march/alongside-positive-impacts-young-carers-can-experience-high-levels-of-stress-loneliness-and-depression>

101 e.g. TASC (unpublished-b). Tipperary Town Child, Youth and Family Service Mapping.

During holidays or summer breaks, the absence of these protective factors can heighten feelings of loneliness and disconnection, with communities needing to come together to make special efforts to fill in the gaps.¹⁰²

Evidence from a recent TASC study¹⁰³ suggests that this experience is exacerbated for girls in rural areas, who may face additional barriers such as limited transport, fewer/less diverse provision of youth services, and cultural or familial expectations that restrict their mobility and independence. For girls¹⁰⁴ and marginalised groups, these challenges can compound feelings of being unseen, unheard, or unsupported, especially in contexts where gender norms or geographic distance further reduce opportunities for social connection.

Various research findings point to the urgent need for targeted mental health supports and community-based interventions for children and young people in Ireland.

Intersectionality

Intersectionality is a framework for understanding how different aspects of a person's identity—such as gender, race, class, disability, sexual orientation, and immigration status—interact and overlap to shape their experiences of discrimination, privilege, and access to resources. Rather than viewing these characteristics in isolation, intersectionality recognises that individuals who belong to multiple marginalised groups often face compounded or unique challenges.

In addition to the intersection of those categories mentioned in previous sections, some PEH are particularly vulnerable to feelings of loneliness, a loneliness which may be augmented by other features. These include mobility challenges, pregnancy/new parenthood and immigration status.¹⁰⁵ One participant explained the effects of this intersectionality in her life:

“As a carer, you really rely a lot on help from others as well, or it helps you a lot if you have that help or connections with others. And if you're from abroad, you wouldn't have the natural network that you would have had, if you grew up here, if you went to school, if you worked with people and have a certain network. So, you're more isolated.” --Research Participant¹⁰⁶

Sometimes someone facing profound intersectional disadvantage is context specific and surprising, as their needs may not be factored into existing service provision models. For example, a recent TASC report¹⁰⁷ noted that immigrant men aged 18-24 years were particularly at risk as the factors there may not be services available to fulfil their needs.

Previous comparative work has highlighted several factors in the lives of 13 year-old girls which have been noted to contribute to feelings of isolation and loneliness.¹⁰⁸ These factors are significant in the context of family and peer relationships, with family dynamics (e.g., parent-child conflict, declining family bonding) remaining high in households facing financial strain, particularly among disadvantaged and non-employed families. These changes can lead to increased feelings of isolation for children in these households. Peer relationships were also noted to be declined in number and

102 Ibid.

103 Ibid.

104 e.g. Smyth, E. (2024). The changing social worlds of 13-year-olds.

105 TASC, 2023; 2025

106 TASC (unpublished-a). Migrant Community Needs Assessment.

107 TASC (2025). *Breaking the Cycle: Addressing Mental Health and Homelessness through Integrated Care*. https://www.tasc.ie/assets/files/pdf/tasc_mental_health_homelessness.pdf

108 Smyth, E. (2024). The changing social worlds of 13-year-olds

peer problems increased in comparison to the previous 10 years, particularly among girls and those from lower income and non-employed households. These reductions in relationship quality and number of friends, along with declined opportunities for engagement in structured social activities (e.g. sports participation), contribute to greater loneliness, as children from these backgrounds may lack social support, further exacerbating feelings of social exclusion and isolation.

Applying an intersectional lens helps policymakers, service providers, and researchers develop more equitable responses that reflect the complexity of people's lives and better address structural inequalities.

Conclusion

In Ireland, general patterns of loneliness and isolation have been increasingly evident, particularly among vulnerable groups. Evidence suggests that the COVID-19 pandemic exacerbated pre-existing social inequalities, magnifying the challenges faced by those already at risk of social exclusion. These challenges are most pronounced in households experiencing financial strain, where factors like parent-child conflict, declining family bonding, and social disconnection remain prevalent. For disadvantaged and non-employed families, the impact is even more significant, as financial insecurity often strains family dynamics and makes it harder to access social support. This social isolation is not only linked to poorer mental health outcomes, but also to a lack of opportunities for social engagement. The pandemic and the increasing digital divide have both deepened these disparities, leaving many without the coping mechanisms or social connections needed to manage stress and mental health difficulties. The result is a cycle of isolation that is difficult to break, affecting both family relationships and peer interactions, contributing to heightened feelings of loneliness and social exclusion.

We have noted that feelings of loneliness can also lead to disengagement from civic and community life, reducing opportunities for collective wellbeing and mutual support. Addressing these issues is therefore essential not only to protect individual health, but also to foster a more inclusive and connected Irish society.

In response to the lingering effects of the pandemic and the challenges of the winter months, the Irish government, the HSE and various organisations have introduced programmes to address the loneliness and isolation felt by a variety of Irish residents.

Impact and Consequences

International studies show that loneliness has profound implications for both mental and physical health. It is strongly associated with higher risks of depression, anxiety, and other psychological difficulties, as well as physical conditions such as cardiovascular disease and weakened immune functioning.¹⁰⁹ Individuals experiencing chronic loneliness report lower life satisfaction and are more

109 Hawkey, L. C., & Cacioppo, J. T. (2010). Loneliness matters: A theoretical and empirical review of consequences and mechanisms. *Annals of Behavioral Medicine*, 40(2), 218–227. <https://doi.org/10.1007/s12160-010-9210-8>; Valtorta, N. K., Kanaan, M., Gilbody, S., Ronzi, S., & Hanratty, B. (2016). Loneliness and social isolation as risk factors for coronary heart disease and stroke: Systematic review and meta-analysis of longitudinal observational studies. *Heart*, 102(13), 1009–1016. <https://doi.org/10.1136/heartjnl-2015-308790>.

likely to make frequent use of healthcare services.¹¹⁰ The effects extend further, with loneliness linked to increased substance use, cognitive decline, and even premature mortality.¹¹¹

In fact, Algren and colleagues (2020) found that residents of deprived neighbourhoods experienced significantly higher levels of loneliness compared to the general population.¹¹² Both social isolation (measured by cohabitation status, contact with family and friends, and participation in voluntary work) and loneliness (measured by feelings of being unwillingly alone) were associated with increased health-risk behaviours, such as low fruit and vegetable intake, daily smoking, alcohol misuse, and physical inactivity. These associations were particularly strong when combined with low socioeconomic status.

These outcomes not only impact individuals but also carry broader economic and social costs, including reduced productivity, higher healthcare spending, and decreased social cohesion.¹¹³ Addressing loneliness is thus essential for enhancing population health and ensuring the sustainability of healthcare systems.

Current Responses in Ireland

In 2018, the Loneliness Taskforce was established by ALONE and Senator Keith Swanick to address loneliness and social isolation in Ireland. The Taskforce brought together professionals from various sectors to raise awareness and develop policy recommendations for government and public bodies. They sought to highlighting loneliness as a growing public health concern affecting people from a variety of backgrounds and of various ages. The Taskforce produced several key recommendations, foremost among them a proposal that the Government allocate €3 million annually to support a public awareness campaign, fund initiatives, and conduct research focused on loneliness.¹¹⁴

In 2019, the Irish Government recognised that feelings of loneliness and isolation were of concern to the population and launched the €3 million mental health fund, as recommended by the Loneliness Taskforce. This funding initiative was aimed at supporting community organisations working to reduce social isolation and promote social connection, particularly among vulnerable groups.¹¹⁵ The initiative recognised the critical role of local, community-based responses in fostering mental wellbeing and building inclusive, supportive environments. By prioritising loneliness as a mental health issue, the fund reflected a broader commitment to preventative approaches in public health policy.¹¹⁶

110 Heidari Gorji MA, Fatahian A, Farsavian A 2019. The impact of perceived and objective social isolation on hospital readmission in patients with heart failure: a systematic review and meta-analysis of observational studies. *Gen. Hosp. Psychiatry* 60:27–36; Holt-Lunstad, J. (2022). Social connection as a public health issue: The evidence and a systemic framework for prioritizing the "social" in social determinants of health. *Annual Review of Public Health*, 43, 193–213. <https://doi.org/10.1146/annurev-publhealth-052020-110732>

111 Algren et al., 2020; Holt-Lunstad, J., Smith, T. B., Baker, M., Harris, T., & Stephenson, D. (2015). Loneliness and social isolation as risk factors for mortality: A meta-analytic review.

112 Algren, M. H., Ekholm, O., Nielsen, L., Ersbøll, A. K., Bak, C. K., & Andersen, P. T. (2020). Social isolation, loneliness, socioeconomic status, and health-risk behaviour in deprived neighbourhoods in Denmark: A cross-sectional study. *SAGE Open*, 10(2), 1–11. <https://www.sciencedirect.com/science/article/pii/S2352827318302180>

113 Mohan, G. (2025). *Who is lonely in the EU's loneliest nation?*

114 ALONE. (2018). A connected island: An Ireland free from loneliness. <https://alone.ie/wp-content/uploads/2018/06/The-Loneliness-Taskforce-A-Connected-Island.pdf>

115 Department of Health. (2019). Ministers Harris and Daly announce a fund of €3 million to help support community mental health initiatives across the country. <https://www.gov.ie/en/department-of-health/press-releases/ministers-harris-and-daly-announce-a-fund-of-3-million-to-help-support-community-mental-health-initiatives-across-the-country/>

116 Ibid.

Specific initiatives aiming to address loneliness and social isolation are also being rolled out across Ireland. The HSE funds over 30 social prescribing services which are available in multiple locations to link individuals with community supports. The HSE's Social Prescribing Programme connects individuals with non-clinical community supports to address social factors impacting health, such as loneliness, isolation, and mental health challenges.¹¹⁷ Through referrals from healthcare professionals or self-referral, individuals engage with trained link workers who co-create personalised wellbeing plans and facilitate access to local services and activities.¹¹⁸ Three TASC reports includes evaluations of two separate social prescribing programmes, which have shown the benefits of this programme, particularly for people experiencing homelessness and older persons who may have seen significant changes in community service provision during their lifetimes.¹¹⁹

Opportunities and Recommendations

Patterns of loneliness and inequality are closely linked, as social and economic disadvantage can increase the risk of isolation and reduce opportunities for meaningful connection. People living in poverty may lack access to community spaces, transport, or digital tools that enable social interaction, while those in insecure housing or precarious employment may struggle to maintain stable relationships. Marginalised groups, such as people with disabilities, immigrants, or individuals experiencing mental health difficulties, often face stigma or exclusion that limits their ability to participate fully in society. These structural barriers can lead to feelings of disconnection and invisibility, making loneliness both a consequence and a driver of inequality. Addressing loneliness therefore requires tackling the wider social conditions that limit inclusion, voice, and opportunity.

Loneliness and isolation are pressing issues in Ireland, affecting a significant portion of the population. Their impact on health and well-being necessitates immediate and sustained action. By implementing comprehensive strategies and fostering community connections, Ireland can work towards mitigating the effects of loneliness and improving the quality of life for its citizens.

To effectively address loneliness, a multifaceted approach is necessary. This includes developing a national strategy with dedicated funding to provide a structured framework for action. Enhancing community infrastructure—such as improving public transport and expanding digital access—can facilitate greater social engagement. Promoting intergenerational programs and volunteer opportunities also helps to strengthen community bonds. Furthermore, public awareness campaigns play a crucial role in reducing stigma and encouraging individuals to seek support. Finally, embedding loneliness indicators into public health and social planning ensures the issue is systematically addressed and monitored.

117 Health Service Executive. (n.d.). *Social prescribing*. HSE.ie. Retrieved April 22, 2025, from <https://www.hse.ie/eng/about/who/healthwellbeing/our-priority-programmes/mental-health-and-wellbeing/social-prescribing/>; Oireachtas. (2024). *Written answers - Social prescribing*. Oireachtas.ie. <https://www.oireachtas.ie/en/debates/question/2024-09-26/309/>.

118 Health Service Executive. (n.d.). *Social prescribing*.

119 TASC (2023). *Healthy Communities Project: impact evaluation report October 2021 - January 2023*; TASC (2024a). *Dublin City Community Co-operative Healthy Communities Project Social Prescribing Evaluation*; TASC (2024b). *Family Peer Support Work: A Review of Irish & International Literature*.

6. Recommendations and Conclusions

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The *TASC Inequality Report 2025* confirms the continuing story of inequality in Ireland: high market income inequality that is significantly reduced, though not resolved, by large-scale state intervention. Ireland's tax and transfer system remains highly redistributive, and it is largely responsible for ensuring that disposable income inequality has remained stable, and broadly average, within the OECD. However, this apparent stability masks persistent and deeply embedded forms of inequality and economic insecurity that continue to affect large sections of the population.

A core finding of this year's report is that many of the recent improvements in poverty and inequality indicators are the result of temporary emergency measures introduced during the COVID-19 pandemic and the subsequent cost-of-living crisis. These interventions were effective in the short term: they prevented a sharp rise in poverty, protected household income, and shielded many of the most vulnerable from the full force of economic shocks. But these supports are now gone, and in their absence, the fragility of many households has become more visible. As shown throughout this report, when once-off payments and temporary supports are excluded from the data, poverty rates rise significantly, especially for the elderly, the unemployed, people unable to work due to long-standing health problems, renters, and those with low levels of education.

The return of enforced deprivation is particularly striking. Rates that had fallen since the post-recession peak are now climbing again. Nearly half of those in lone-parent families (44.5%) experience enforced deprivation, as do 38.5% of people out of work due to long-term health problems. The housing crisis continues to be a major driver of this insecurity, with nearly one-third (31.5%) of renters or those in rent-free accommodation experiencing deprivation. Most strikingly, child homelessness has increased almost six-fold over the past decade, rising from 749 in July 2014 to 4,206 in April 2024. And, these figures almost certainly understate the true scale of the problem.

What these statistics reflect is not just material hardship but a more generalised condition of economic and social insecurity. People on low incomes in Ireland often live with persistent uncertainty: about whether they can afford rent, heat their homes, access care, or provide for their children. That insecurity undermines not only wellbeing and life chances, but the possibility of full participation in social and civic life. This year's special focus on inequality, isolation and loneliness shows how economic insecurity is closely bound up with feelings of exclusion and disconnection. The inability to engage socially, maintain relationships, or feel part of a community is both a symptom and a consequence of inequality.

Loneliness and isolation are not evenly distributed. They cluster around those already facing economic hardship—people experiencing homelessness, people with disabilities or chronic illness, carers, lone parents, immigrants, and older people living alone. These forms of social exclusion carry serious health consequences and are now recognised as major public health concerns. This report finds clear evidence that structural inequality is a driver of loneliness and that tackling one means addressing the other.

As this report argues, temporary supports alone cannot address these deeper issues. Tackling inequality requires a structural approach: one that strengthens the income floor, builds secure housing, delivers universal public services, and invests in the conditions for human flourishing.

Recommendations

A policy response to inequality in Ireland must be multi-dimensional. It must address both the symptoms and the structural causes of insecurity.

First, the state must strengthen **core income supports**. Emergency payments during recent crises worked because they were timely, targeted, and adequate. That adequacy must now be built into the baseline. Welfare rates should be benchmarked against the cost of a minimum essential standard of living, with specific attention to the needs of children, carers, and people with disabilities.

Second, **affordable and secure housing** must be made a top priority. Housing is not only a basic human need but also the foundation of social stability and equality. The disproportionate hardship experienced by renters and the alarming rise in child homelessness are symptoms of a broader failure in the housing system. A significant expansion of public and cost-rental housing, along with stronger tenant protections, is essential. In recent decades, the government's approach of prioritising private for-profit provision through rent supports and subsidising private development has proven to be an abject failure.

Third, **families with children** must receive adequate support. Lone parents in particular remain among the most deprived in society. Measures such as increased Child Benefit, affordable childcare, and improved access to employment for carers are key to reducing both child and household poverty.

Fourth, the state must commit to **universal public services**. This includes free or affordable access to healthcare, mental health services, childcare, education, disability supports, and elder care. There has been a failure by private-for-profit market-based provision in these areas. It is necessary for the state to ensure that everyone has access to these services. This might include direct state provision or state support for non-profit community-based and social enterprise-based solutions. The success of Ireland's education system, as last year's report showed, shows what is possible.

Fifth, **precarity in work and education** must be addressed. Poverty is not confined to those outside the labour market. Many working people remain trapped in low-paid or insecure employment. As argued in numerous previous reports, meaningful increase in the minimum wage to a living wage, alongside improved employment protections, collective bargaining rights, and supports for lifelong learning, are necessary to make work a real pathway out of poverty.

Sixth, a sustained commitment to **long-term social investment** is required. Short-term measures may stabilise poverty figures, but they do not build resilience. Multiannual budgeting is needed to deliver lasting progress. Reducing inequality must become a central objective of economic and fiscal planning.

Seventh, we need **cross-departmental coordination** and a coherent policy framework. Too often work on these issues is siloed or doesn't progress. For example, the high-level child poverty unit, set up in the department of the Taoiseach two years ago appears to have made little progress. We need a long-term, cross-departmental approach that understand the intersectionality of deprivation and exclusion.

Finally, arising from this year's special focus chapter, the report makes a number of recommendations relating to inequality, isolation and loneliness. Specifically, the report calls for a **national strategy to address loneliness and social isolation**, which are closely linked to income inequality and deprivation. This strategy must be backed by dedicated funding and embedded across public health, housing,

transport and social policy. Enhancing community infrastructure—such as public transport, digital access, and accessible public spaces—can facilitate participation. Intergenerational programmes and volunteering opportunities should be supported to build community bonds. Public awareness campaigns are also needed to reduce stigma and encourage help-seeking. Loneliness indicators should be included in health and social planning to ensure long-term tracking and accountability. As the report shows, tackling loneliness is not just about individual well-being, it is about building a fairer, more connected society.

Ireland is a country of deep contradictions. It has one of the most unequal distributions of market income among advanced economies, yet its tax and welfare system has proven effective at limiting the worst outcomes of that inequality. Disposable income inequality is stable and moderate by international standards, but this moderation is bought through state intervention in an otherwise unequal and insecure economy.

This intervention is welcome, but it is also precarious. As the report shows, the social gains of recent years are fragile, contingent on policy choices, and vulnerable to reversal. Without structural reform, the same groups will remain at the sharpest end of poverty and exclusion: lone parents, people with disabilities, renters, and those out of work. Children growing up in low-income households will continue to face worse outcomes, and the promise of equality of opportunity will remain out of reach.

Addressing inequality in Ireland means addressing the full spectrum of exclusion, from material hardship to social disconnection. The tools are available. What is needed is the political commitment to use them. If the goal is not merely to stabilise inequality but to reduce it, and to build a society in which everyone can participate as equals, then temporary supports must give way to long-term guarantees. That means decent incomes, secure housing, universal services, and policies that promote dignity, inclusion, and belonging.

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Ireland faces deepening inequality and persistent poverty, especially among renters, older people, one-parent families, and people with disabilities. Temporary cost-of-living supports have eased pressure but masked serious underlying problems that risk pushing vulnerable groups back into poverty.

The State We Are In – Inequality in Ireland 2025, highlights these challenges and calls for stronger social protections, affordable housing, and better access to services. It also explores how loneliness and social isolation worsen inequality, urging a national strategy to tackle these issues.



TASC (Think tank for Action on Social Change) is an independent progressive think-tank whose core focus is addressing inequality and sustaining democracy.



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