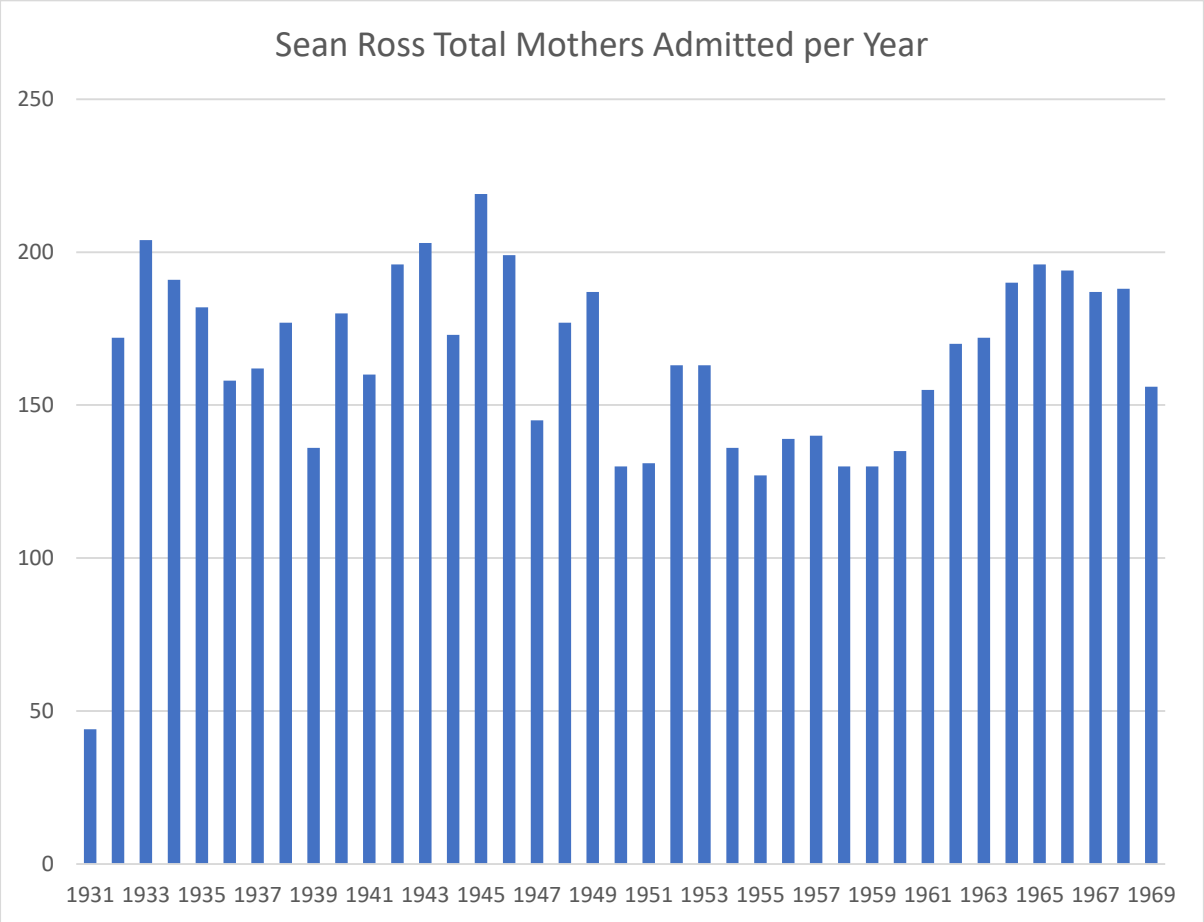
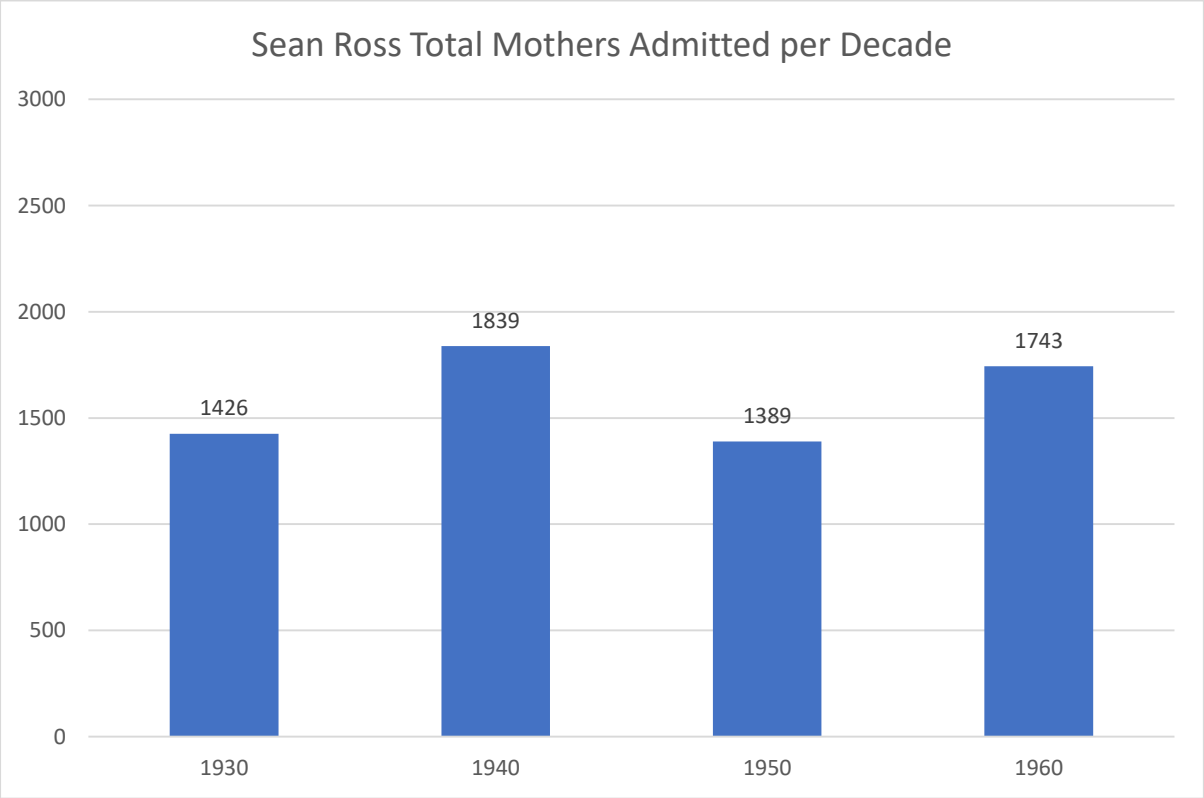
Chapter 19A: Sean Ross Statistical Analysis

The statistical analysis provided here is based on the institutional records provided to the Commission. The Commission compiled a database from the institutional records and analysed the information on a calendar year basis. In the narrative chapter, statistical information from other sources is described. These other sources are not directly comparable with the Commission's analysis. For example, almost all the statistical information available from official publications is on an administrative year basis, that is, from 1 April to 31 March. This was the case until about 1980. However, as is clear from the analysis below, the statistical returns made to the Department of Health by the institution are broadly in line with the Commission's analysis. Statistics from other reports, for example, inspection reports, often relate to a specific day or a non-standard period and so are not directly comparable. In general, the Commission is satisfied that there are no significant differences between its analysis and information from other sources. In a few cases where there are differences, attention is drawn to this in the narrative chapter.

Admissions

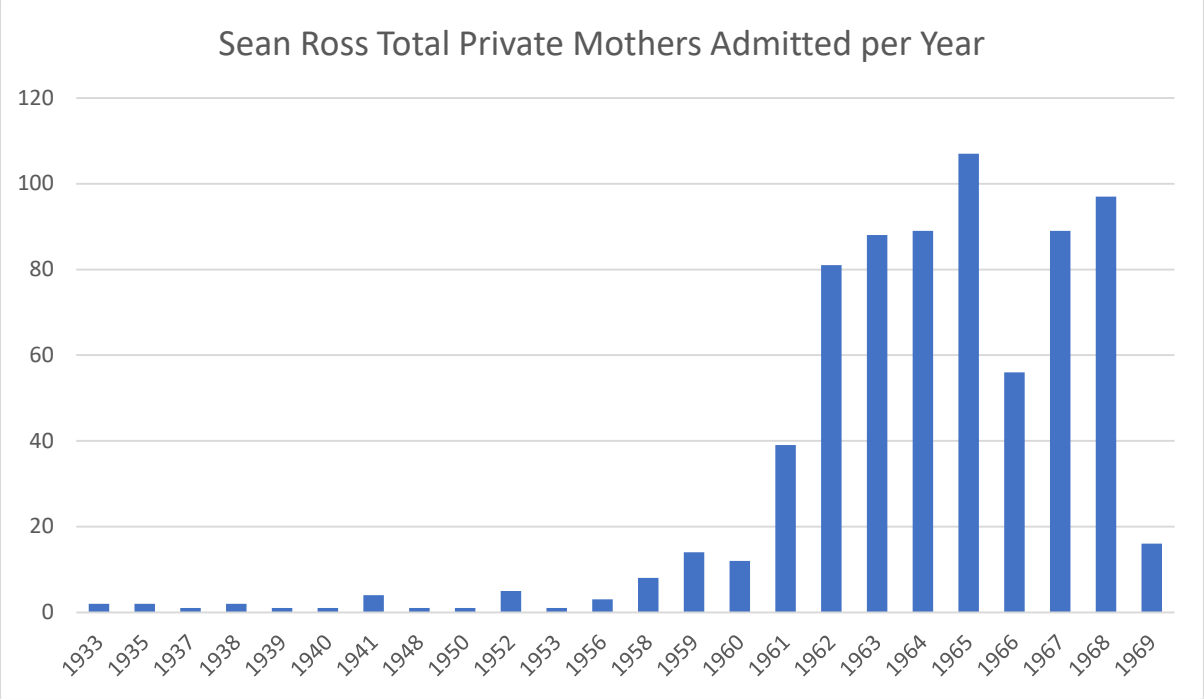


From the institutional records, the Commission identified 6,414 women who were admitted to Sean Ross between 1931 and 1969. Information relating to date of admission was available for 6,397 women (99.7% of admissions). In 1932, its first full year in operation, 172 women were admitted. More than 200 women were admitted in 1933 and numbers remained relatively high throughout the 1930s. Admissions fell in 1939; 136 women were admitted that year. Admissions increased steadily during the war years. By 1945, Sean Ross was extremely overcrowded and, despite reportedly being closed to new admissions for most of the year, 219 women were admitted. Admissions remained high in 1946 when 199 women were admitted. Mirroring trends in other mother and baby homes, admissions to Sean Ross began to decrease in the late 1940s and remained relatively low throughout the 1950s when 139 admissions on average were recorded annually. Admissions began to increase from 1961 and 182 women on average were admitted annually in the years 1962-69.

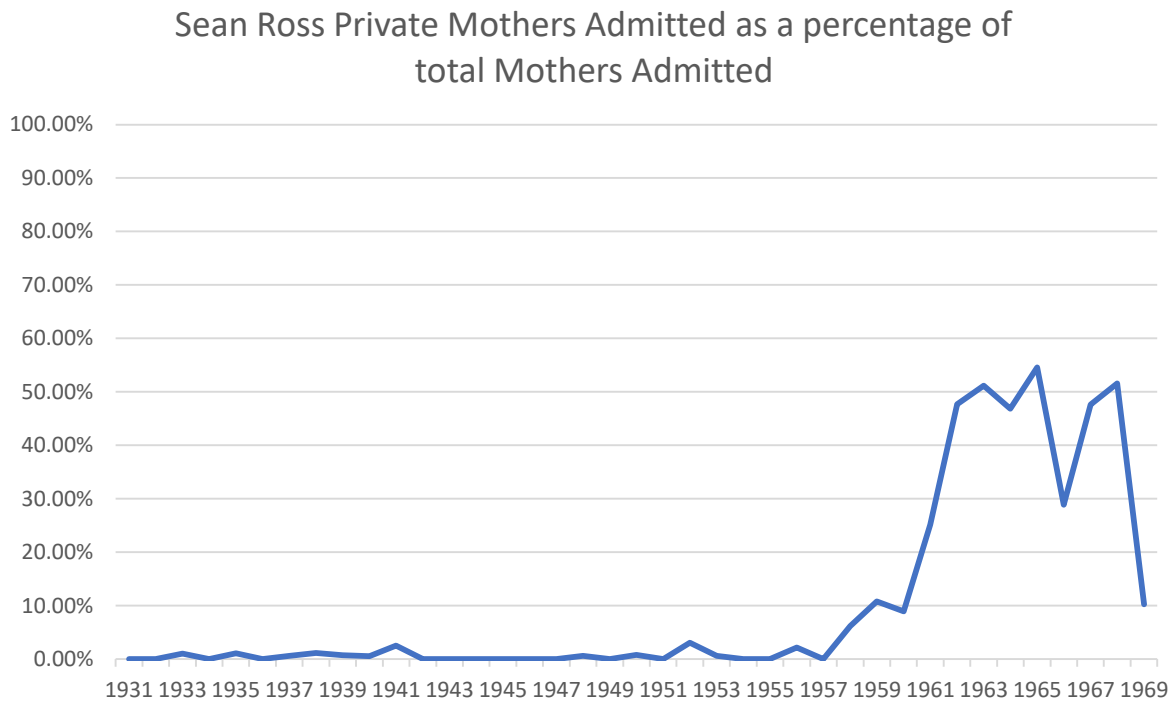


Analysis by decade shows that admissions were most frequent in the 1940s (29%) and the 1960s (27%) followed by the 1930s (22%) and the 1950s (22%).

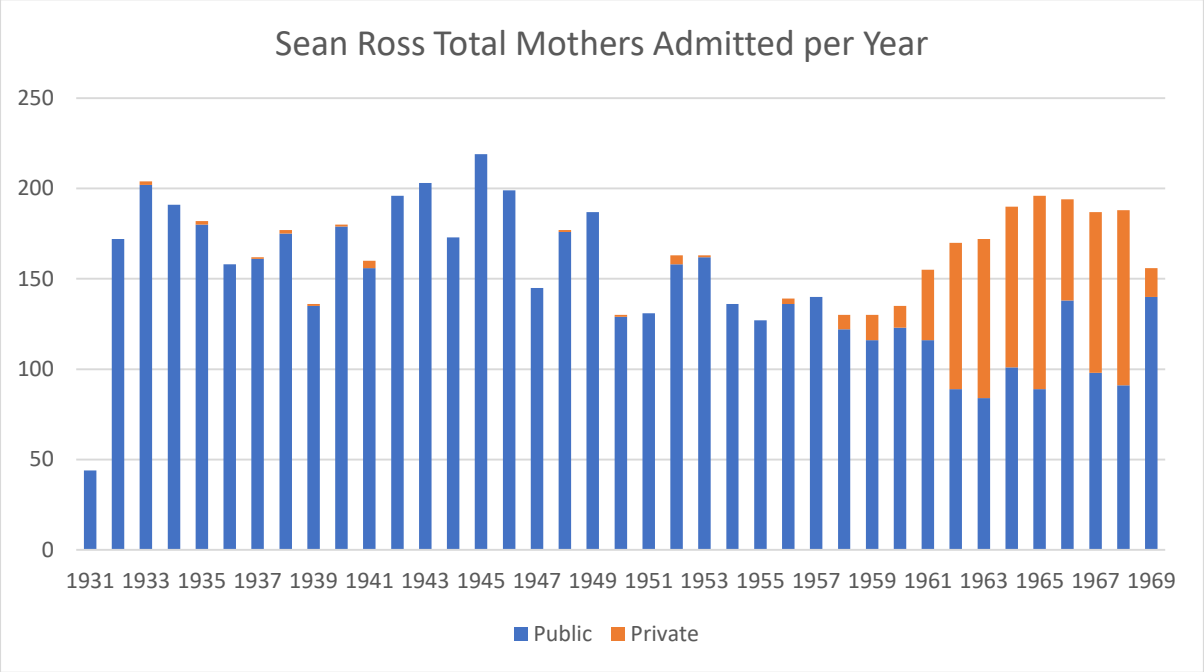
Private patients



The Sean Ross records recorded 721 women as private patients representing 11.2% of all admissions. Information relating to date of admission was available for 720 private patients. Although private patients are identifyable in the institutional records from 1933 their numbers increased dramatically in the early 1960s.



By 1965, private patients accounted for 55% of all admissions to Sean Ross and for around 47% of admissions on average in the years 1962-68.



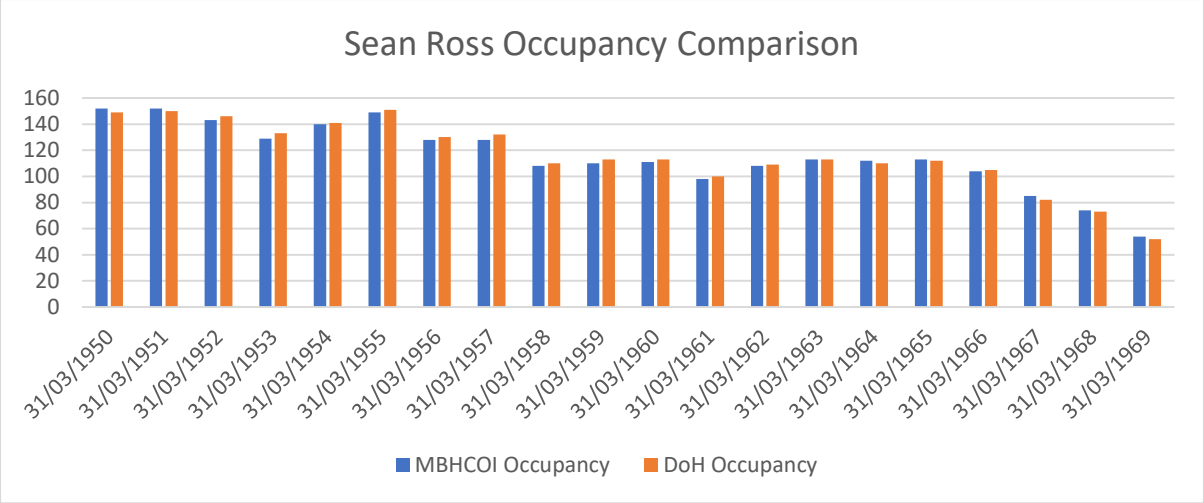
All mother and baby homes experienced increased admissions in the early 1960s. However, it appears that increased admissions to Sean Ross in that period were driven by increased admissions of private patients. The institutional records show that, prior to the 1960s, private patients accounted for a small percentage of admissions. However, for most of the 1960s one in every two women admitted to Sean Ross was a private patient.

Referral pathways

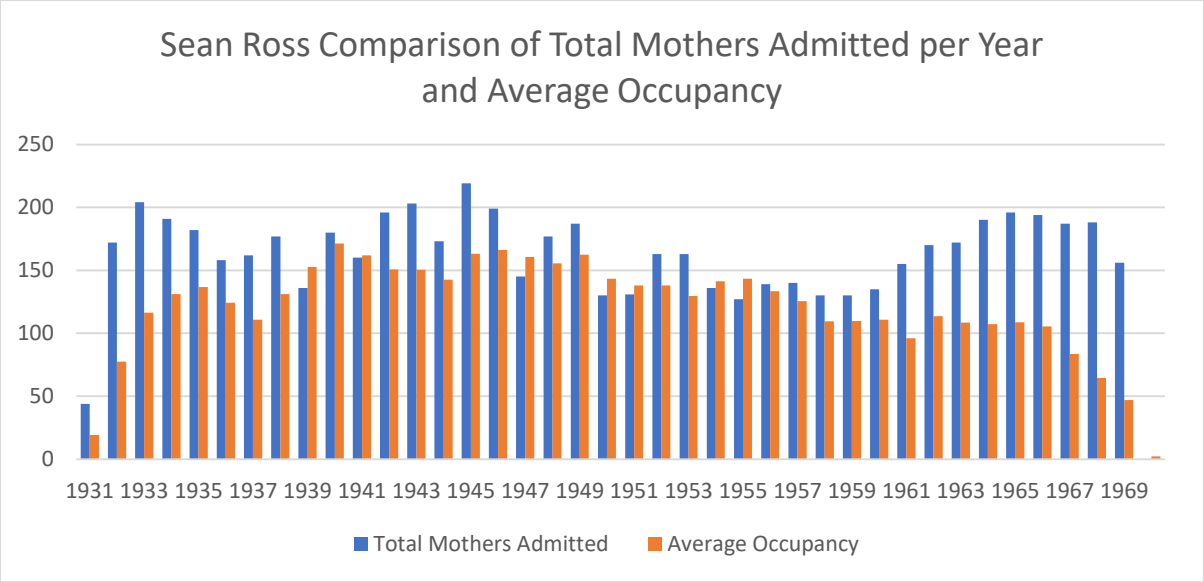
Information relating to referral pathways into Sean Ross was available for just 46 women (0.7% of admissions). The Commission considered this sample size too small to draw conclusions.

Occupancy

Information which facilitated the Commission's calculations relating to occupancy was available for 6,322 women (98.6% of all admissions). Occupancy represents the average number of women present in the institution on any given day.

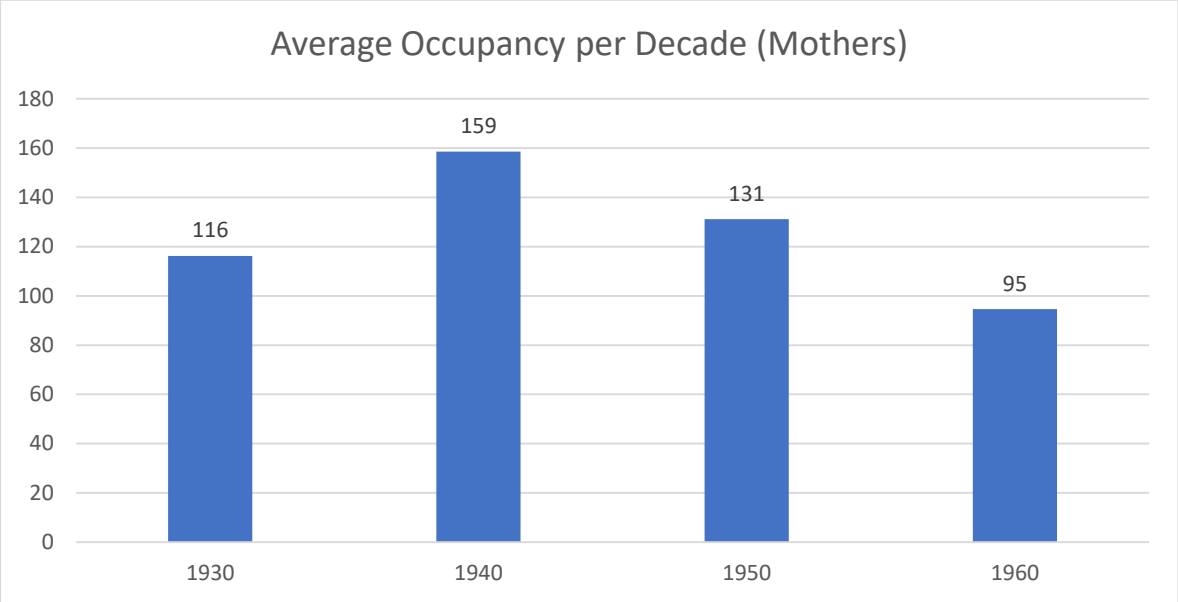


The Commission compared data relating to occupancy derived from institutional records with annual returns sent by Sean Ross to the Department of Health for the years 1950-69. Temporary absences from the institution, such as instances where women were being treated in external hospitals, are not recorded in the Commission's occupancy numbers. No date of admission and/or discharge was available for 1.4% of women and these were excluded from the Commissions calculations. These factors caused the Commission's calculations to fluctuate slightly. Notwithstanding this, the Commission is satisfied that the occupancy rates forwarded by Sean Ross to the Department of Health were broadly in line with rates which the Commissions independently arrived at.



Analysis of occupancy rates against admissions shows that average occupancy in Sean Ross was high from the late 1930s to the late 1950s. In 1939, average occupancy exceeded the number of admissions to Sean Ross for the first time, which suggests that women were staying in the home for longer periods. Admission rates increased during the war years and high average occupancy rates pertained. This led to severe overcrowding in the home from

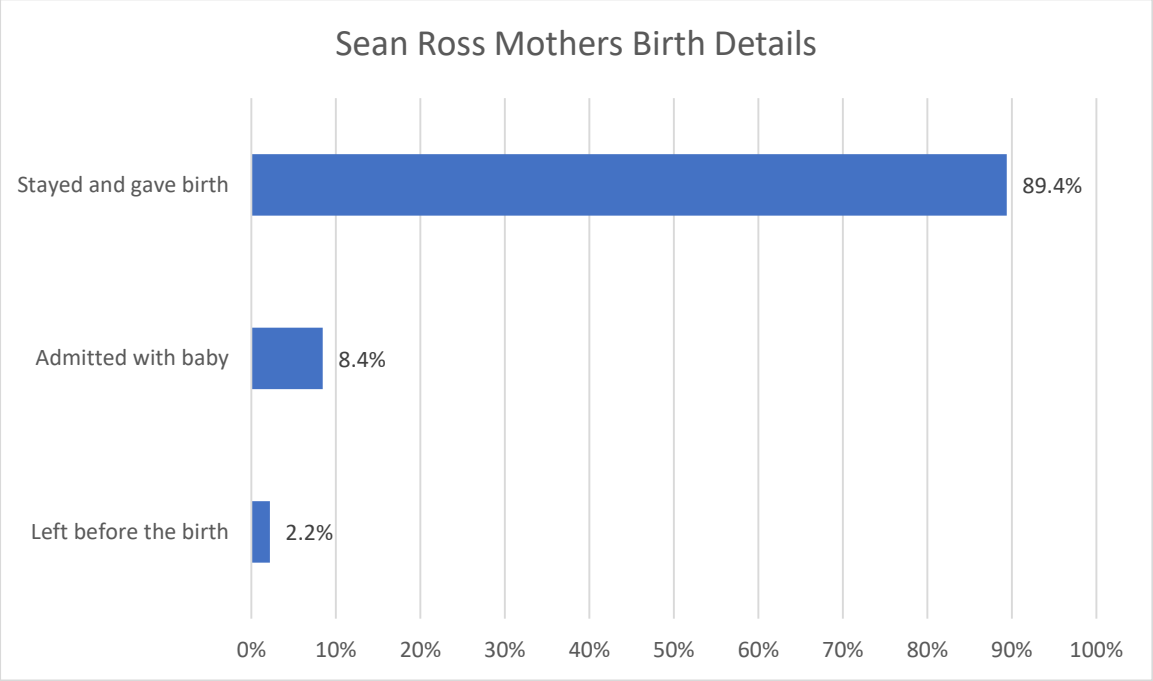
1945-47. High occupancy rates persisted for most of the 1950s and average occupancy regularly exceeded the number of admissions to the home. As was the case in other mother and baby homes, this trend was altered in 1961. Although admissions increased significantly in the 1960s more women were opting to have their child adopted and consequently spent less time in the institution.



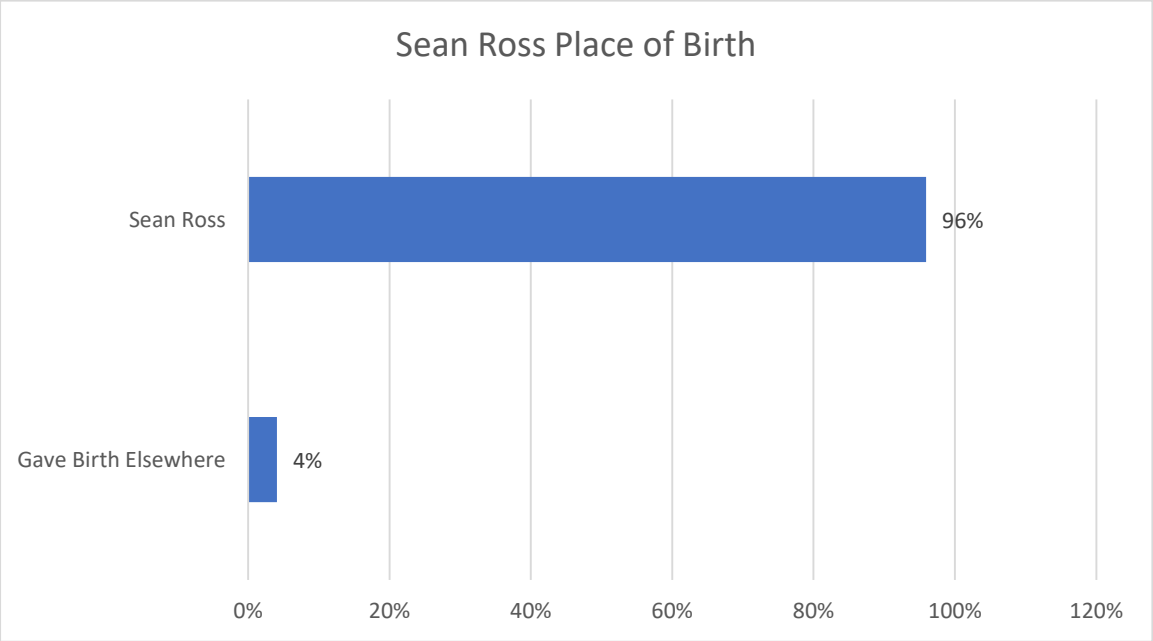
There were similar numbers of women admitted to Sean Ross in the 1940s (1,839) and the 1960s (1,743). A woman admitted to Sean Ross in the 1940s could expect to be living with another 158 women on average. However, a woman admitted to Sean Ross in the 1960s could expect to be living with 94 women on average.

Birth details

Information relating to birth details was available for 6,167 women (96.1% of admissions).



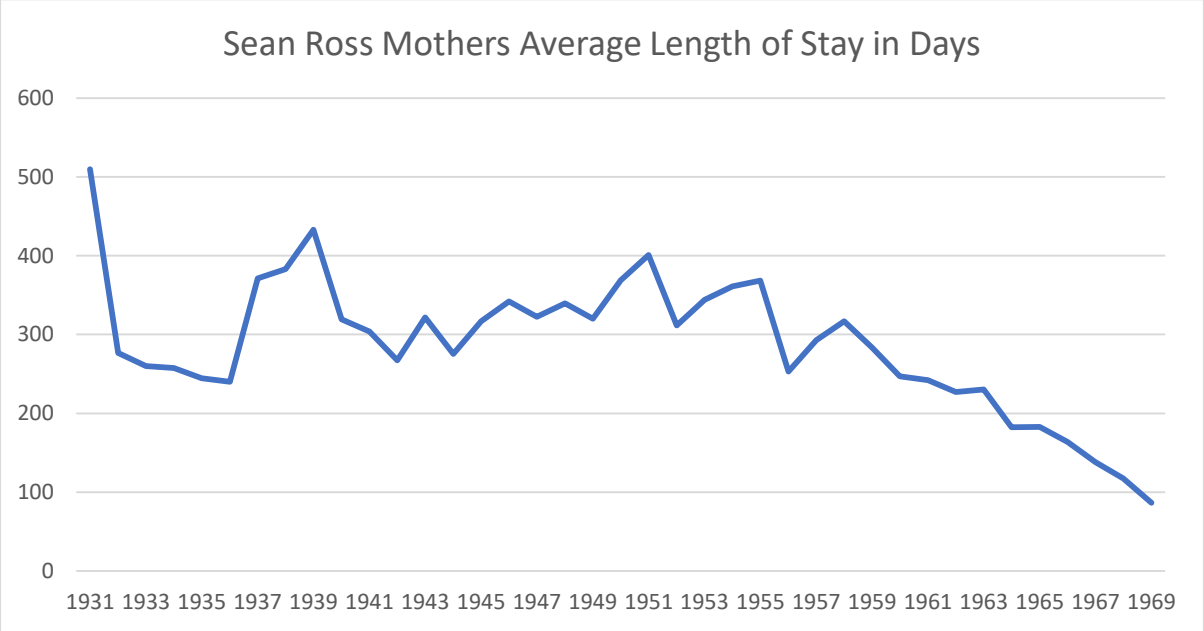
The institutional records show that 89.4% of women admitted to Sean Ross stayed and gave birth there. A further 8.4% were admitted with their baby having given birth elsewhere and 2.2% of admissions left the home before giving birth.



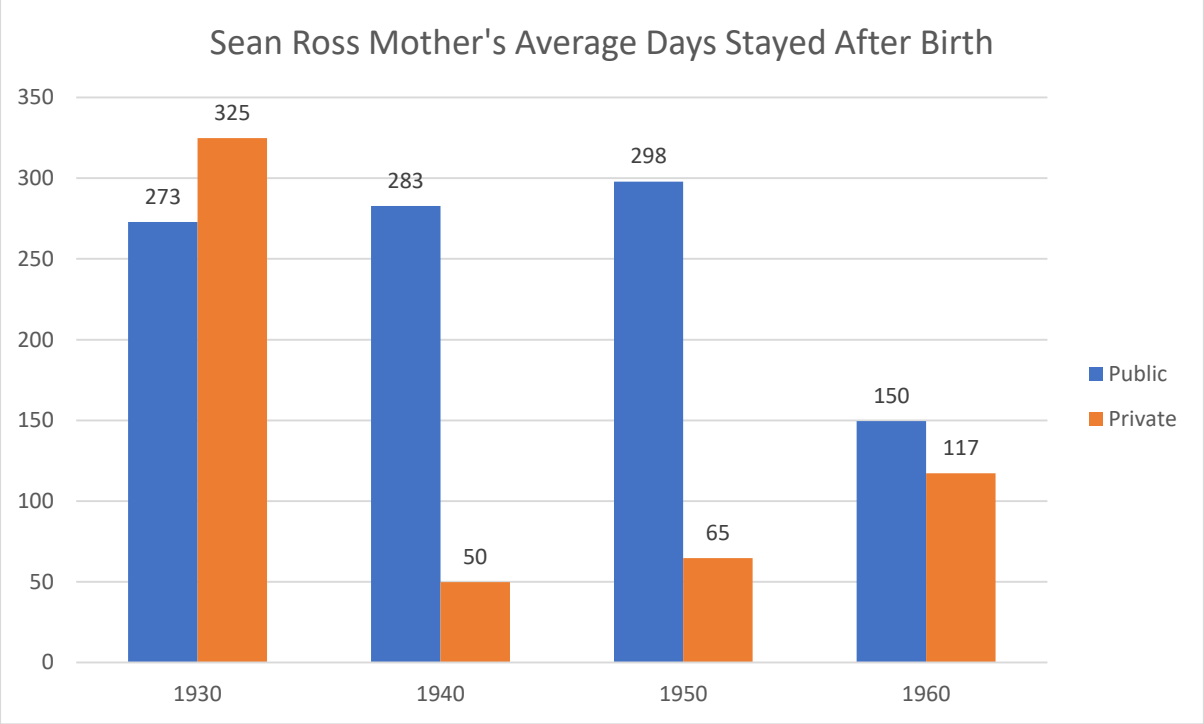
Information relating to place of birth was available for 5,665 women (88.3% of admissions)

Length of stay

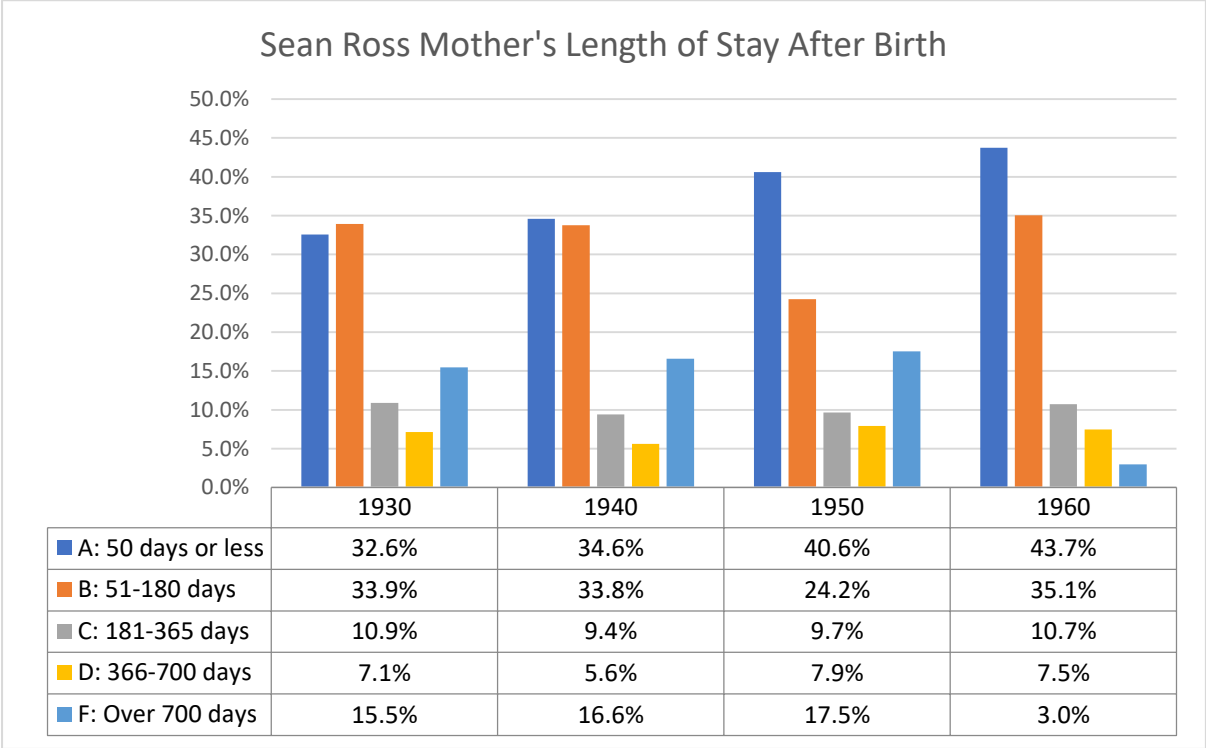
Information relating to length of stay was available for 6,322 women (98.6% of admissions)



The institutional records show that the length of stay in Sean Ross increased substantially from 240 days on average for women admitted in 1936 to 433 days on average for those admitted in 1939 and remained relatively high until the late 1950s. Women admitted in 1951 spent over 400 days on average in the home; this had altered little by 1955 when 369 days was an average stay for women admitted that year. Length of stay shortened dramatically from 1961.



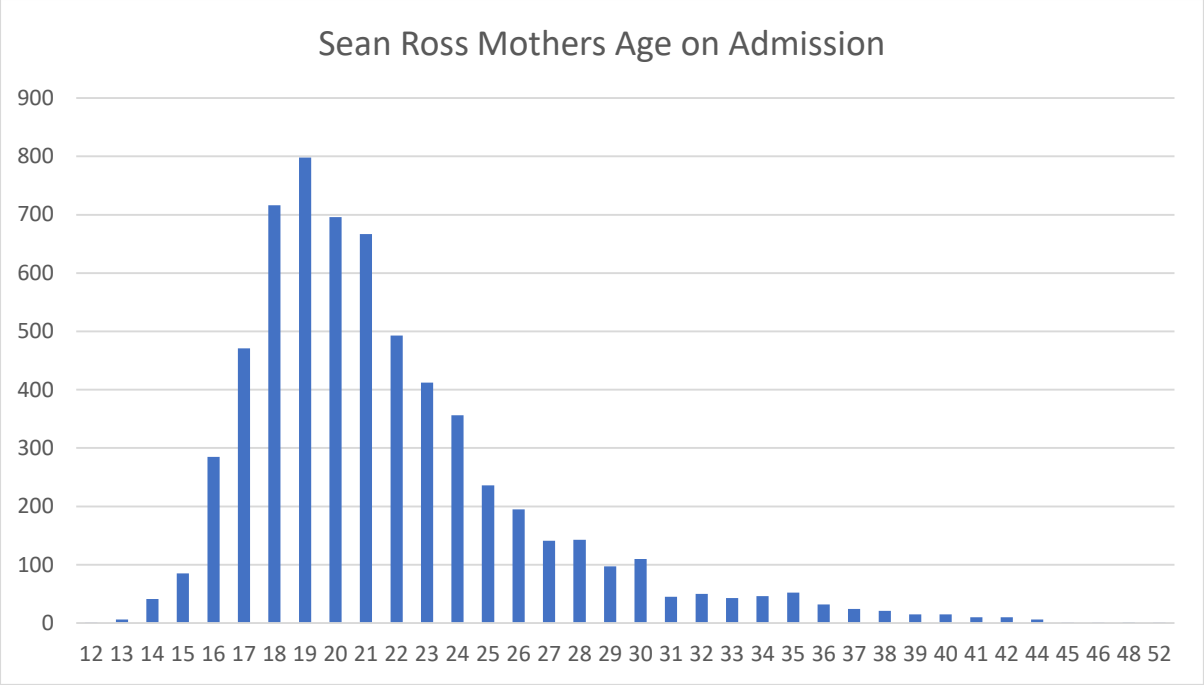
Information relating to the length of stay among private patients shows that they spent far less time in Sean Ross than their public counterparts. Although the statistics suggest that the opposite was true in the 1930s the figures for that decade include two private patients who spent more than three years in the institution. In the 1930s private patients generally left Sean Ross between 24 and 66 days after giving birth. Although the number of private patients admitted to Sean Ross in the 1940s and 1950s was small, it is clear that their stay in the home was of far shorter duration than their public counterparts. Most private patients admitted to Sean Ross were admitted in the 1960s. Although most women opted to place their baby for adoption in this period, public patients spent five months on average after the birth in the home whereas private patients stayed for around four months on average.



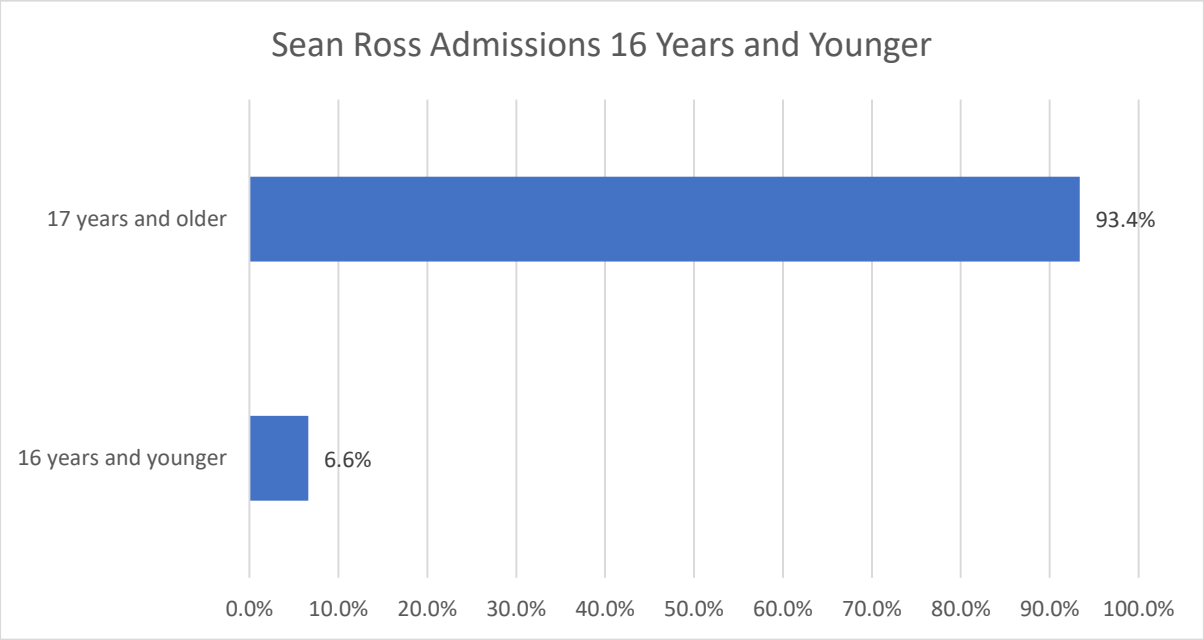
	1930	1940	1950	1960
A: 50 days or less	32.6%	34.6%	40.6%	43.7%
B: 51-180 days	33.9%	33.8%	24.2%	35.1%
C: 181-365 days	10.9%	9.4%	9.7%	10.7%
D: 366-700 days	7.1%	5.6%	7.9%	7.5%
F: Over 700 days	15.5%	16.6%	17.5%	3.0%

Analysis of length of stay after birth shows that in the 1930s almost 33% of women, or one in three, left Sean Ross within 50 days of giving birth; by the 1960s almost 44% left within 50 days. In the 1930s, 66.5% of women, or two in three, left Sean Ross within six months of giving birth; by the 1960s almost 79% left within six months. In the 1930s 15.5% of women spent more than two years in Sean Ross after giving birth. This figure increased to 16.6% in the 1940s and to 17.5% in the 1950s. However, by the 1960s just 3% of women spent more than two years in the home.

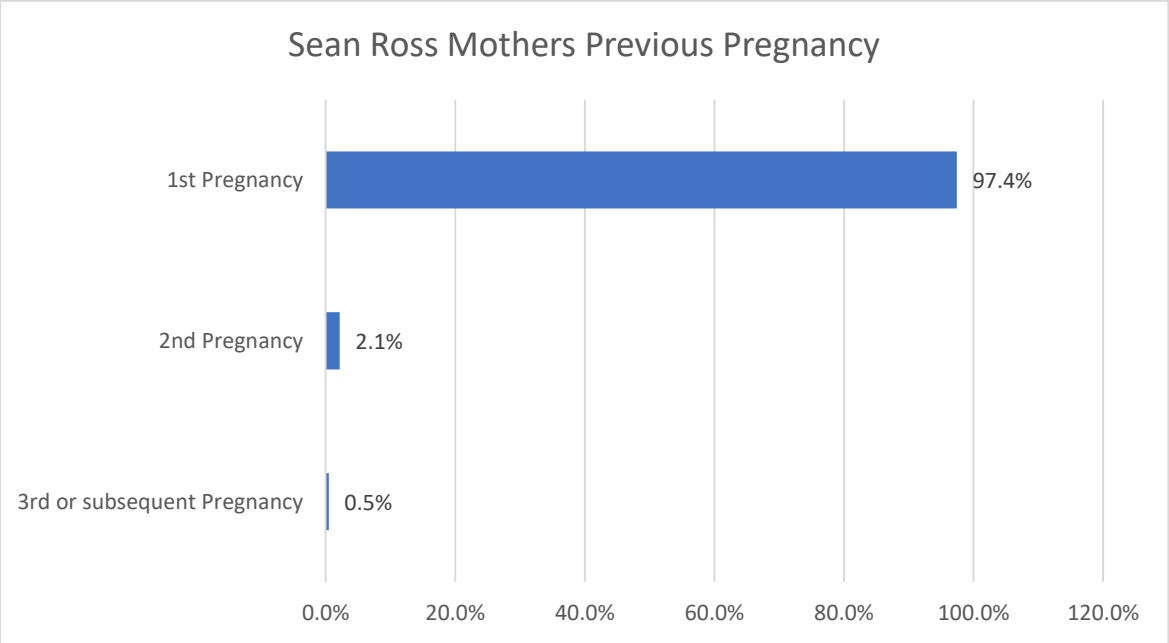
Age on admission



Information relating to age on admission was available for 6,323 women (98.6% of admissions). Age on admission ranged from 12 to 52 years. The average age on admission was 22 years. The mode of age on admission was 19 years. Most women (87.5%) were aged between 17 and 30 years on admission; 5.9% were between 31 and 52 years and 6.6% were aged between 12 and 16 years.

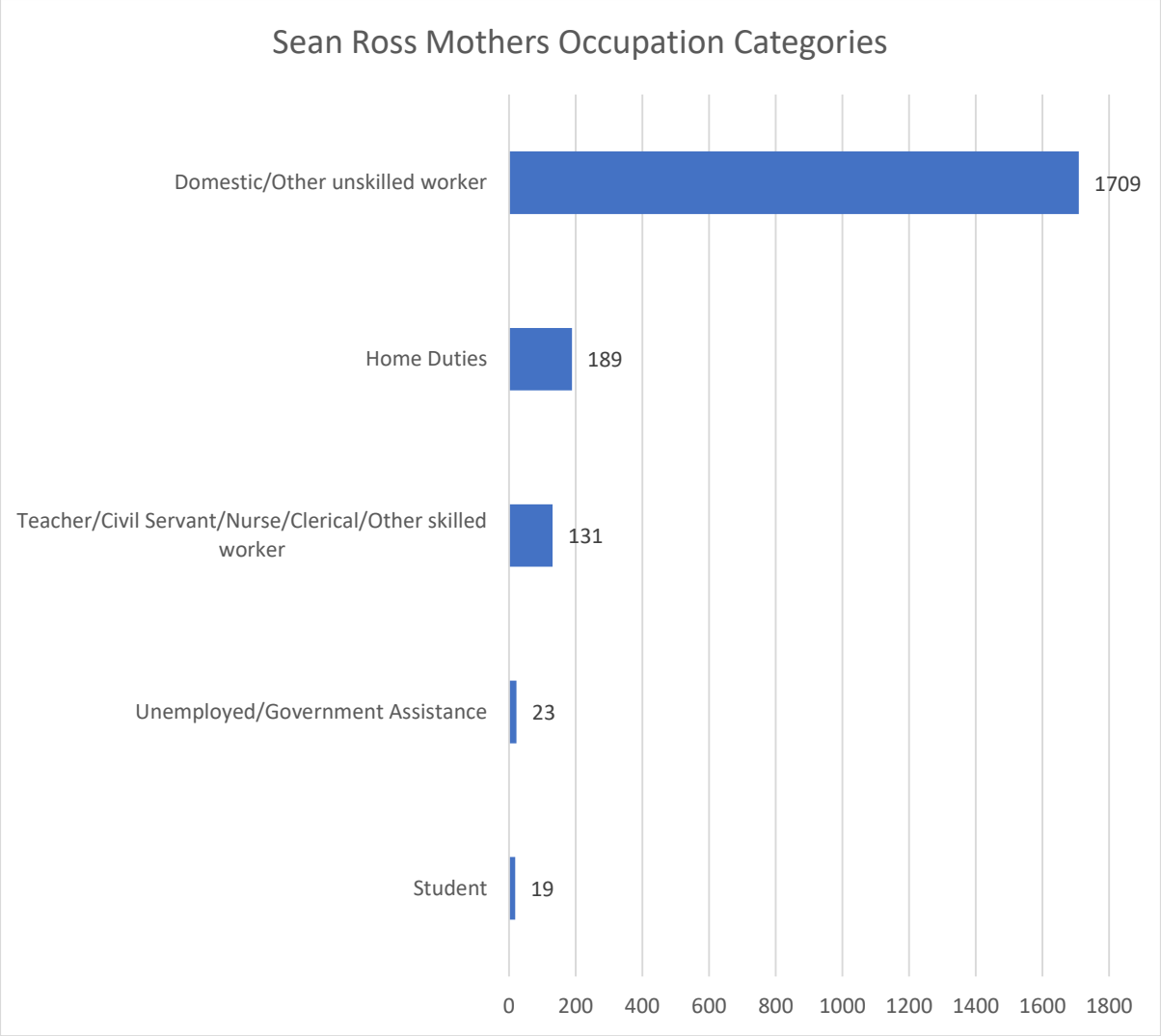


Previous pregnancy



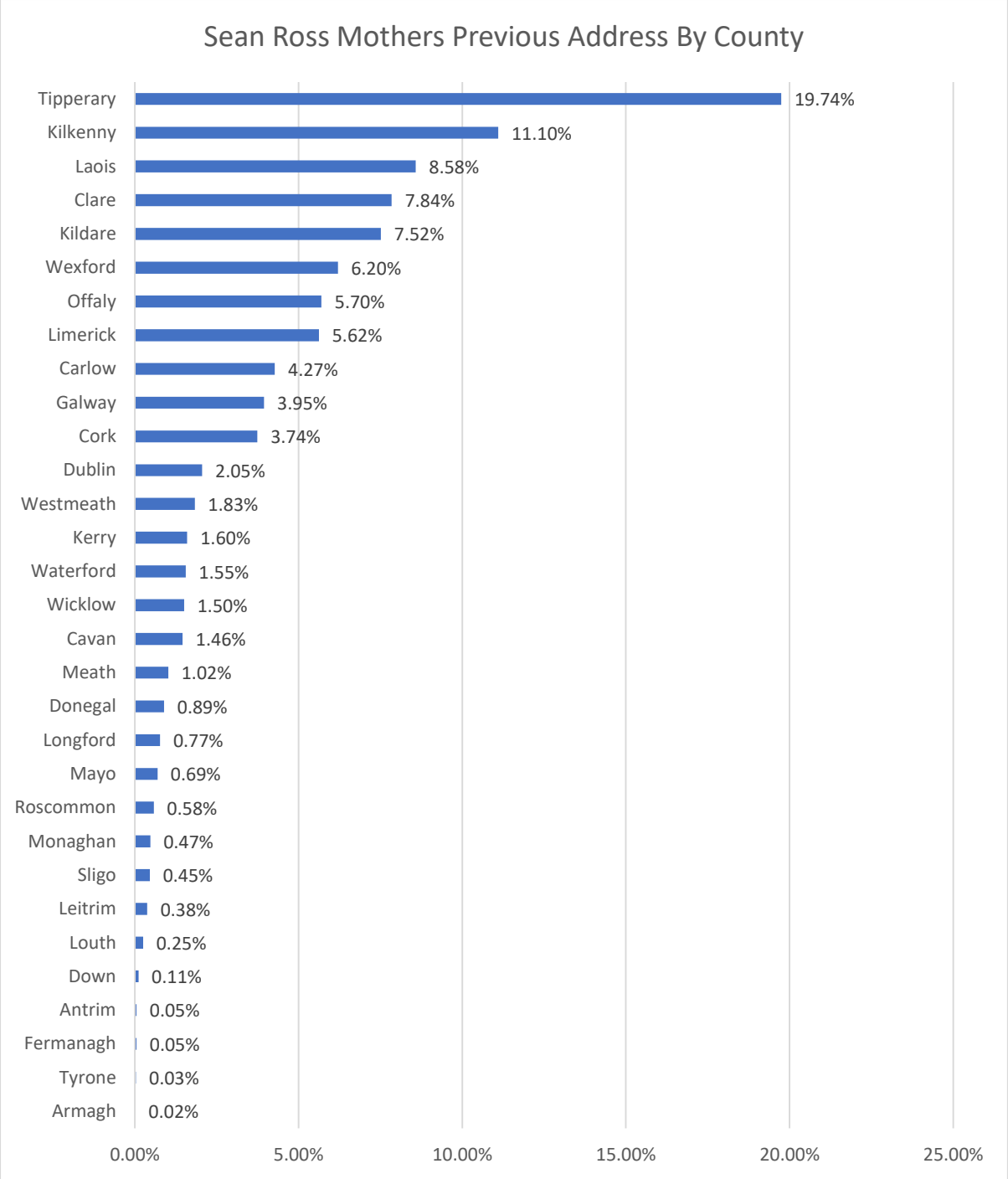
Information relating to previous pregnancy was available for 1,728 women (26.9% of admissions). The sample shows that most women (97.4%) were admitted on their first pregnancy; 2.1% were admitted on their second pregnancy and 0.5% were admitted on their third or subsequent pregnancy.

Occupations



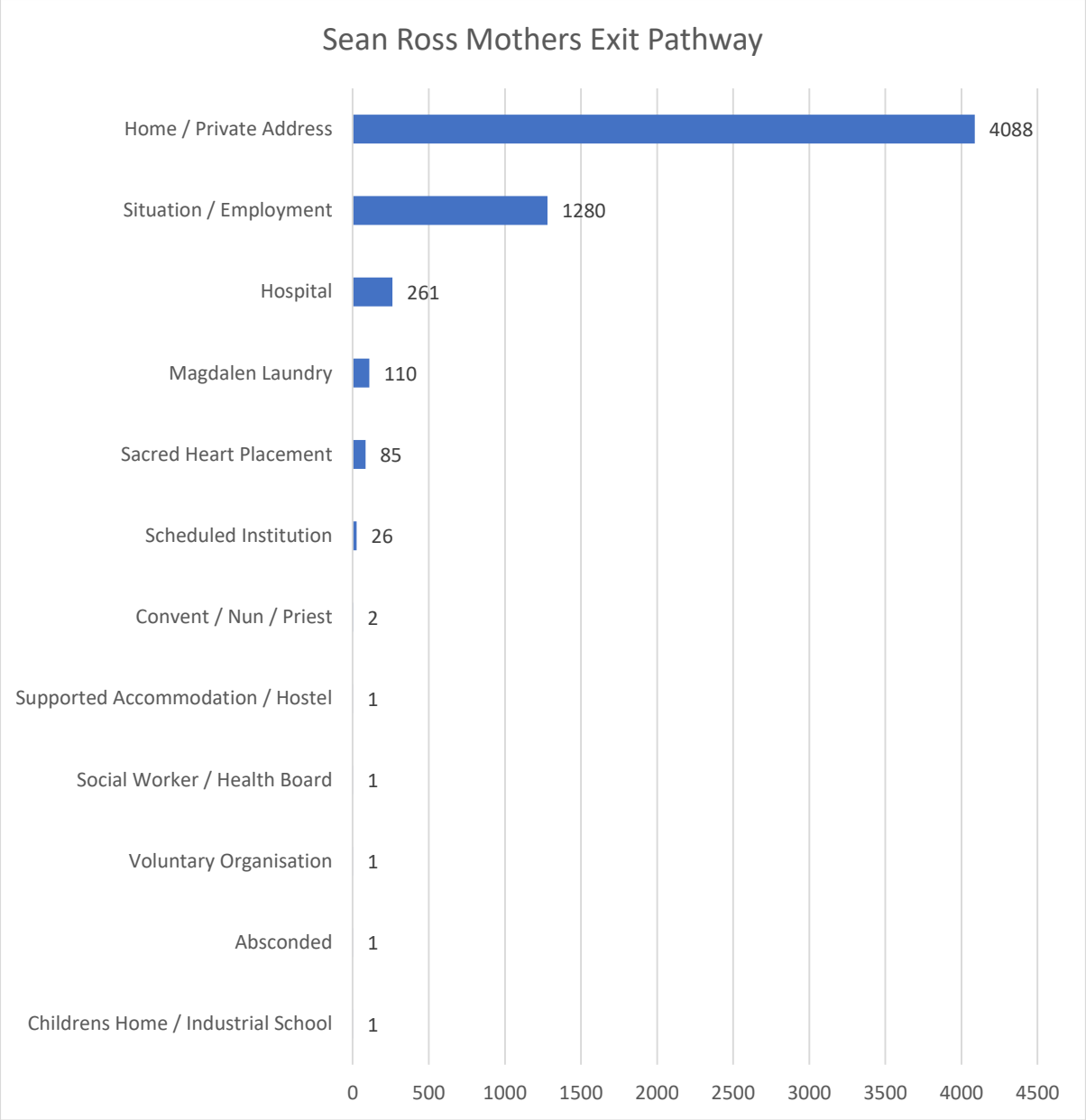
Information relating to occupations was available for 2,071 women (32.3% of admissions). Most women (82.5%) were recorded as domestic servants or unskilled workers; 9% were engaged in home duties or working on the family farm; 6% were recorded as teacher/civil servant/nurse/clerical/other skilled worker; 1% were unemployed or in receipt of state benefit and 1% were in full time education. Admissions from the civil servant/skilled worker category were most frequent in the 1960s; 52% of whom were private patients. Similarly, admissions of women working in the family home or on the family farm also increased sharply in the 1960s; 43% of whom were private patients. Increased admissions from these two cohorts in the 1960s may partially explain the increased admissions of private patients.

Previous address by county



Information relating to address prior to admission was available for 6,387 women (99.6% of admissions). Institutional records show that women admitted to Sean Ross gave addresses in all 32 counties. Almost 20% gave an address in Tipperary followed by Kilkenny, 11.1%; Laois, 8.6%; Clare, 7.8%; Kildare, 7.5%; Wexford, 6.2%; Offaly, 5.7%; Limerick, 5.6%; Carlow, 4.3%; Galway, 4%; Cork, 3.7% and Dublin, 2%. The remaining counties combined accounted for around 14% of admissions.

Mothers Exit Pathways



Information relating to exit pathways from Sean Ross was available for 5,857 women (91.3% of admissions). Institutional records show that most women (69.8%) returned home or were discharged to a private address; 21.85% were discharged to employment; 4.46% transferred to hospital; 1.88% were discharged to a Magdalen Laundry; 1.45% were placed in situations by the Congregation of the Sacred Hearts and 0.44% transferred to another institution under the Commission's remit (generally Kilkenny County Home).

Annual statistical returns furnished by Sean Ross to the Department of Health for the years 1951-69 inclusive allow for further analysis of exit pathways in this period and show how the introduction of legal adoption altered trends. For instance, in 1951 around one in ten women were discharged directly to employment; by 1969 over one in seven were discharged in this manner. These records also show that 54% of women who returned to the family home in this period took their babies with them; 46% of women returned to the family home while their babies remained in Sean Ross.

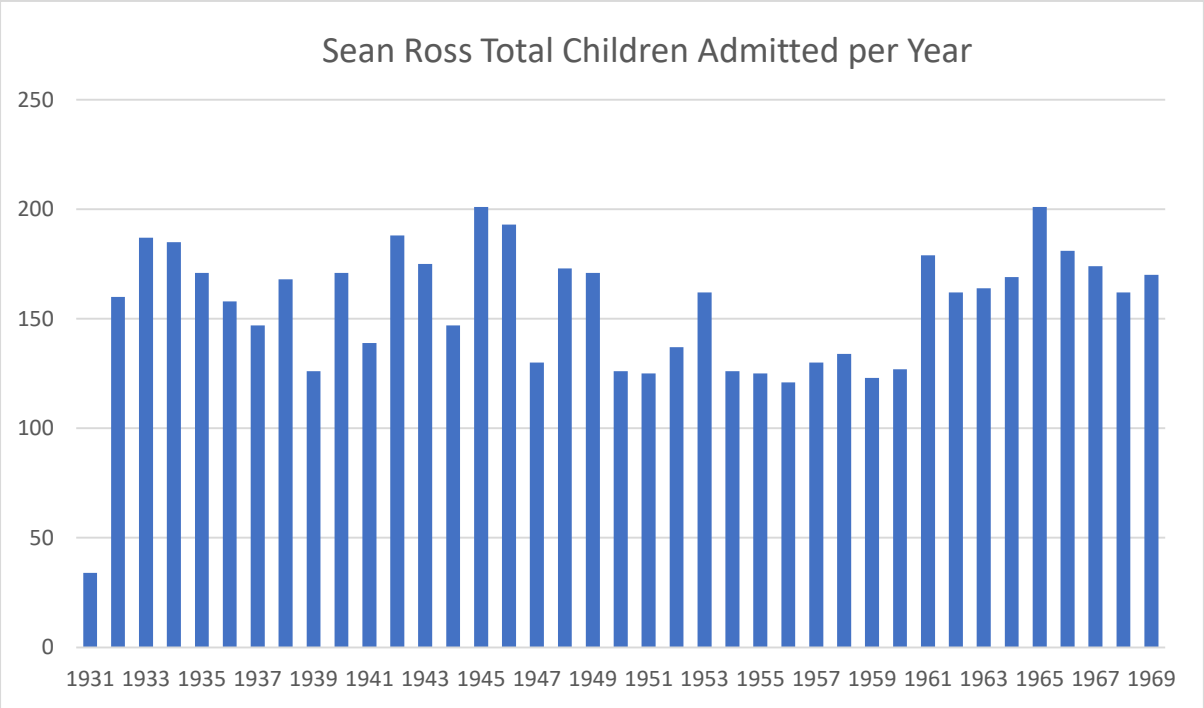
Maternal Deaths

Through the institutional records, the Commission identified 37 deaths among women admitted to Sean Ross: representing a mortality rate of 0.58%. Sixteen deaths occurred in external hospitals. Fourteen deaths were not associated with pregnancy or childbirth - half of these were due to typhoid and the remainder were, in the main, due to tuberculosis. Eight deaths were indirect obstetric deaths in the sense that they were conditions that developed during pregnancy, were aggravated by the physiological effects of pregnancy and generally resulted in cardiac failure. Fifteen deaths were directly associated with pregnancy and childbirth. Direct obstetric deaths were due to eclampsia, puerperal sepsis, toxaemia, nephritis and coronary embolism and thrombosis. Adhering to WHO guidelines the maternal mortality rate in Sean Ross was 0.35%.[1]

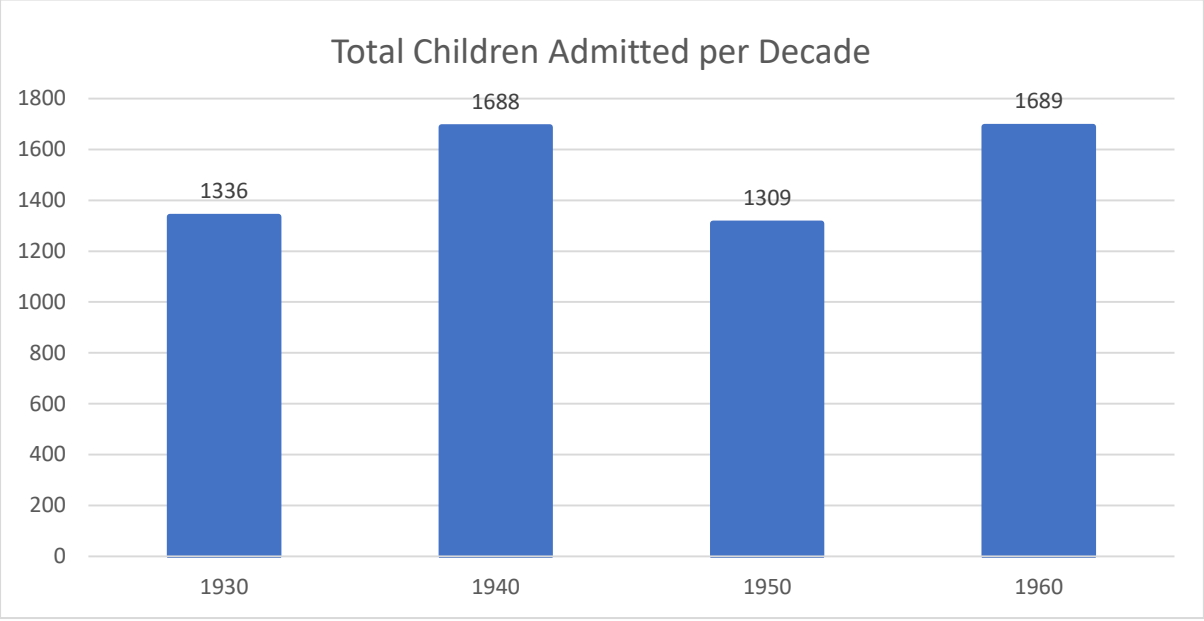
[1] Maternal death is the death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management but not from accidental or incidental causes. https://www.who.int/healthinfo/statistics/indmaternalmortality/en/

Sean Ross: Children

The institutional records show that 6,079 children were born in or admitted to Sean Ross. Date of birth/admission was available for 6,022 children (99% of births/admissions).

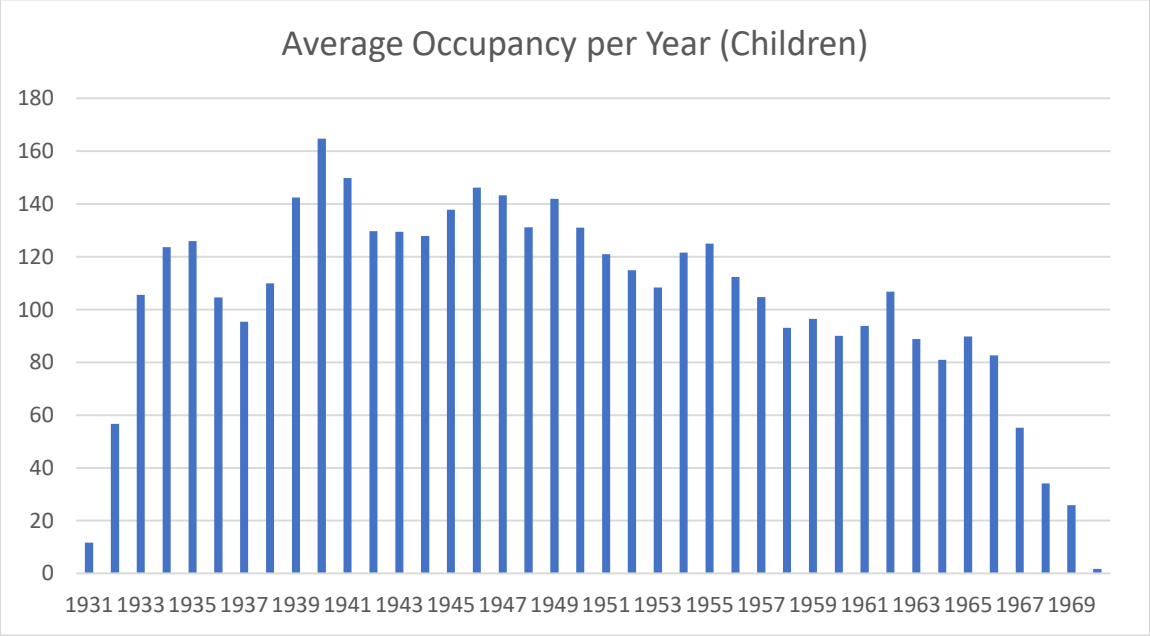


Births and child admissions to Sean Ross were consistently high throughout the 1930s and early 1940s and peaked in 1945 when 201 children were recorded. Although births and admissions decreased somewhat in the 1950s, numbers began to increase from 1961 and peaked in 1965 when 201 children were again recorded. It would appear that Sean Ross was busiest in the decade prior to its closure.

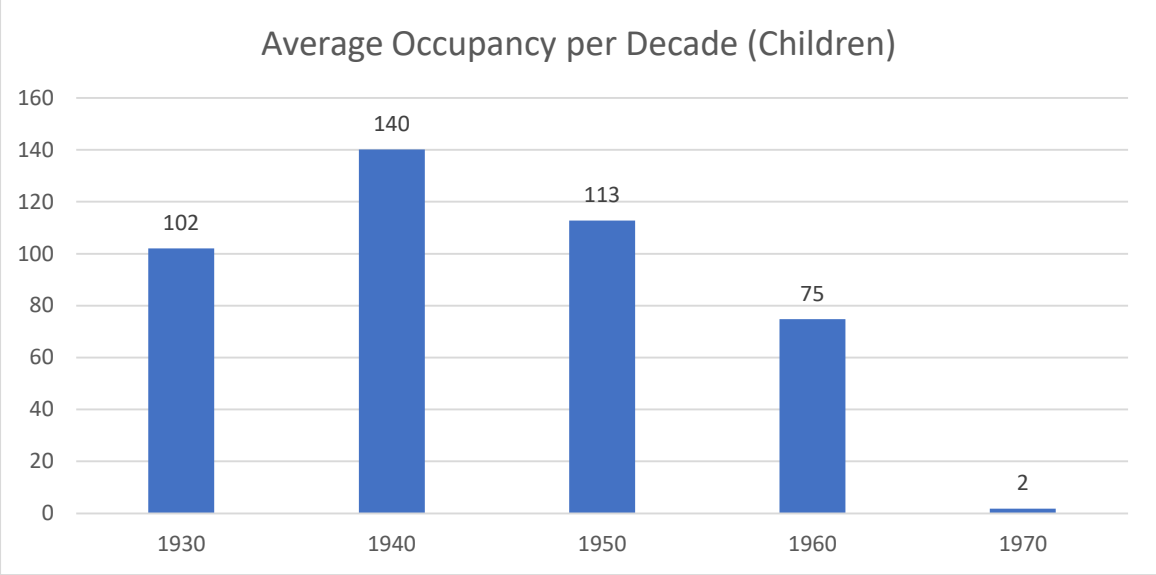


Child Occupancy

Information relating to child occupancy was available for 5,935 children (97.6% of births/admissions). Occupancy relates to the number of children who were living in Sean Ross on any given day.

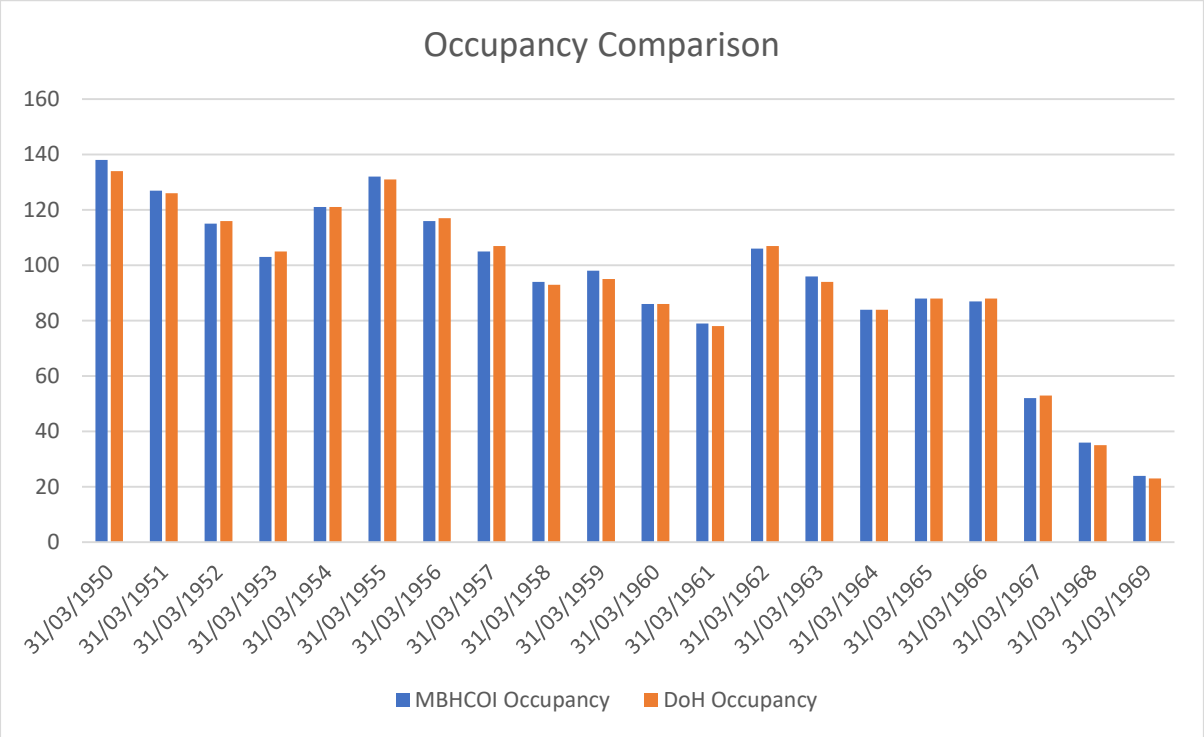


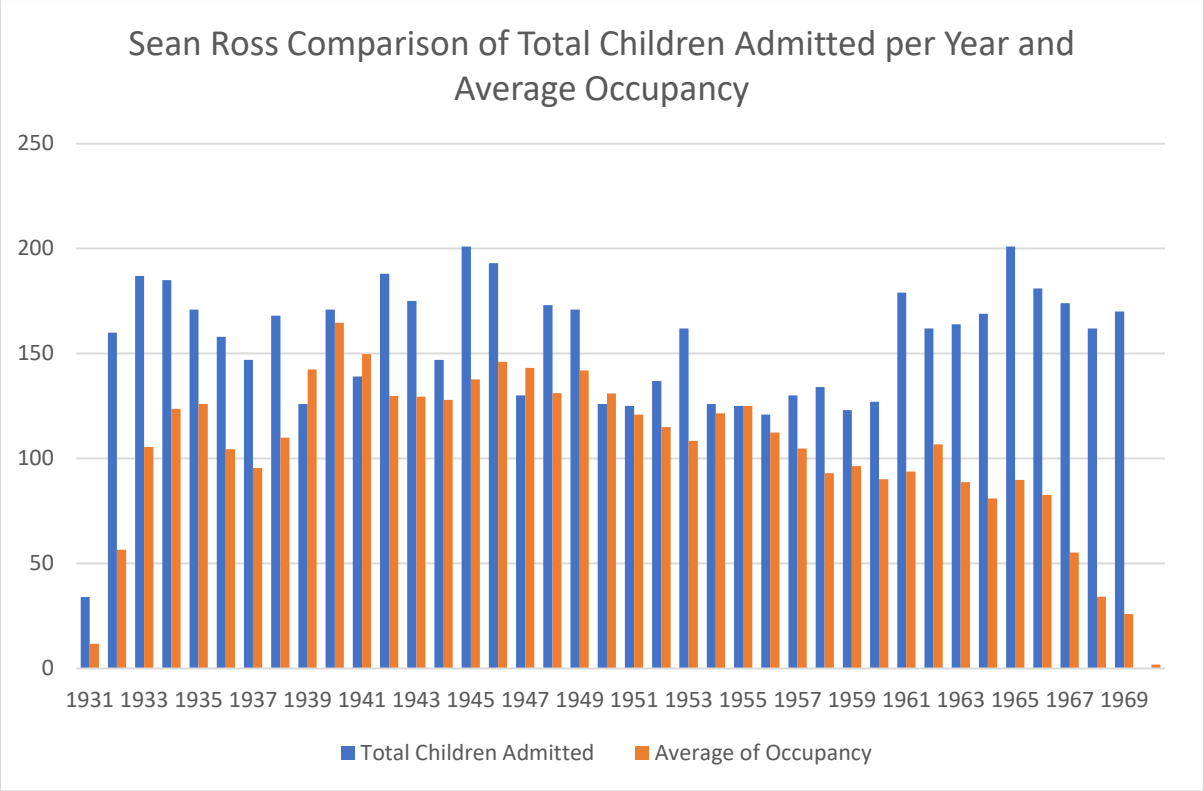
The institutional records show that occupancy rates in Sean Ross were particularly high in the 1940s when 140 children on average were living in the home on any given day and peaked in 1940 when 165 children on average were living in the home. In the 1960s, the same number of children were born in or admitted to Sean Ross as the 1940s. However, occupancy rates in the 1960s were almost half that recorded in the 1940s.



Occupancy Comparison

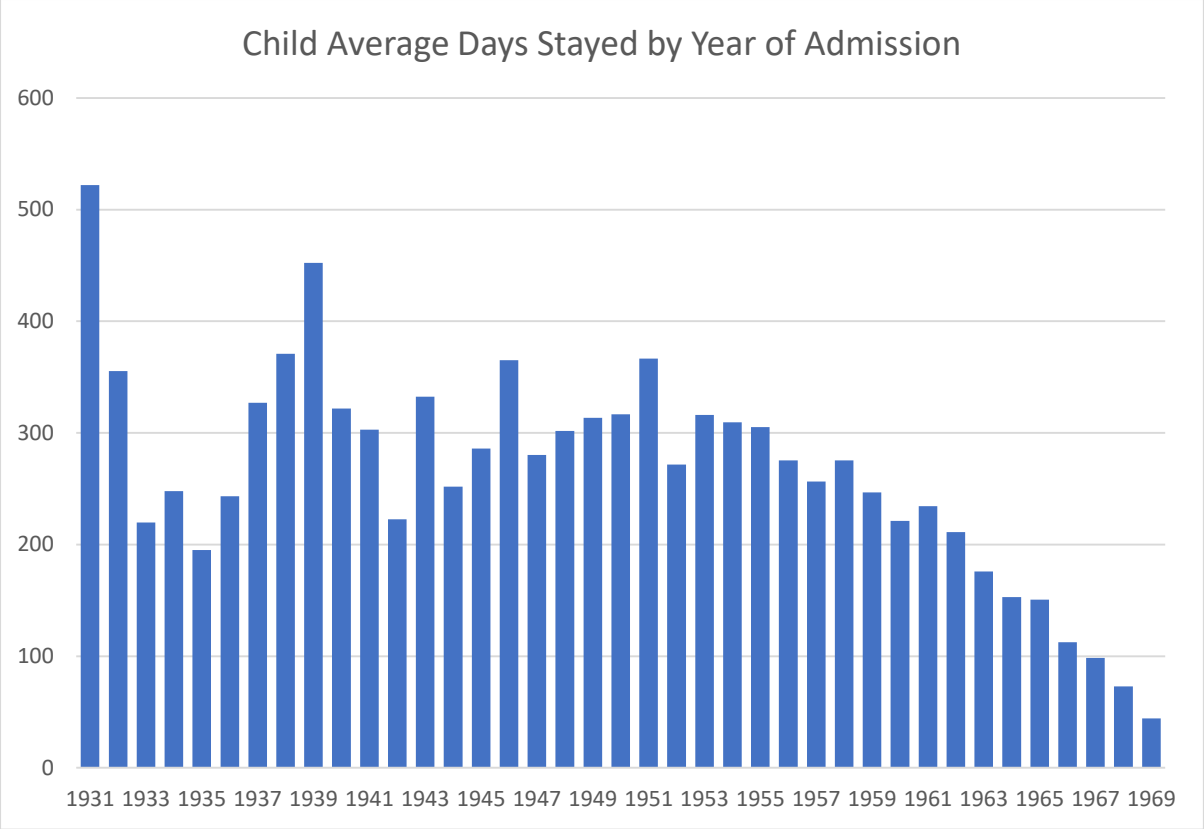
Annual statistical returns furnished by Sean Ross to the Department of Health for the years 1950-69 facilitated a comparison with occupancy rates independently established by the Commission and those notified by the Sisters of the Sacred Hearts. Occupancy rates established by the Commission may vary slightly as they do not take temporary absences from the institution, such as children transferred to hospital for treatment, into account. Children without a date of admission and/or discharge (2.4%) were also excluded from the Commissions calculations. Notwithstanding this, it is clear that the occupancy rates established by the Commission are broadly in line with those notified by Sean Ross to the Department of Health in this period.





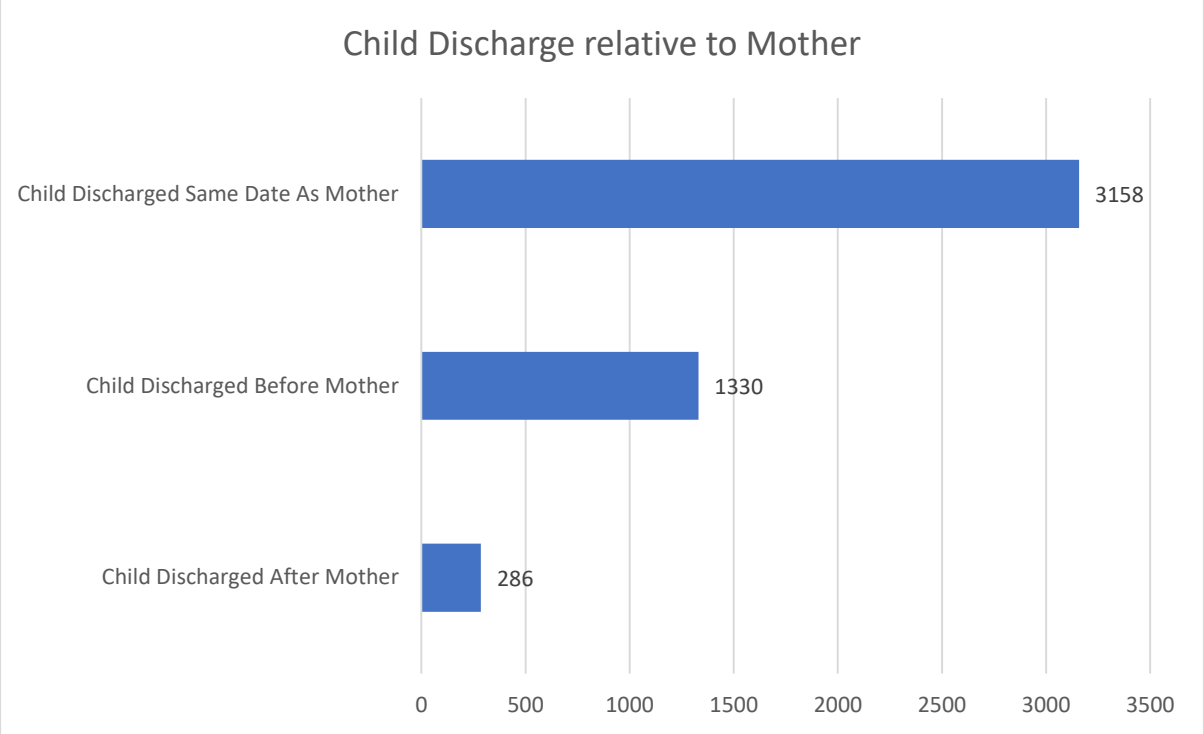
The institutional records show that occupancy rates were high in the 1940s and, although births/admissions decreased in the 1950s, occupancy rates remained relatively high. In 1954 and 1955 in particular, average occupancy was almost on par with average births/admissions. This suggests that children were in the home for prolonged periods in those years. Although births/admissions increased substantially from 1961, occupancy rates began to decrease. This trend continued throughout the 1960s.

Child Length of stay



Information relating to length of stay in Sean Ross was available for 5,935 children (97.9% of births/admissions). Children born in or admitted to the institution in 1931 spent 522 days on average there. While some children born/admitted in 1931 spent less than 50 days in the home, others remained there for over four years. For children born or admitted in 1935 the average stay had reduced to 195 days but increased substantially for those born or admitted in 1939 when children spent 452 days on average in the home - some children born/admitted that year spent as little as eight days in Sean Ross while others remained there for over five years. Although the average length of stay for children born/admitted in 1942 decreased to 222 days, an upward trend can be identified until 1951 when the average stay for children born/admitted that year was 367 days. Average length of stay declined steadily from then falling to 44 days on average for children born/admitted in 1969. The available information relating to children born to private patients, which relates mainly to the 1960s, suggests that they spent considerably less time in the home than children born to public patients.

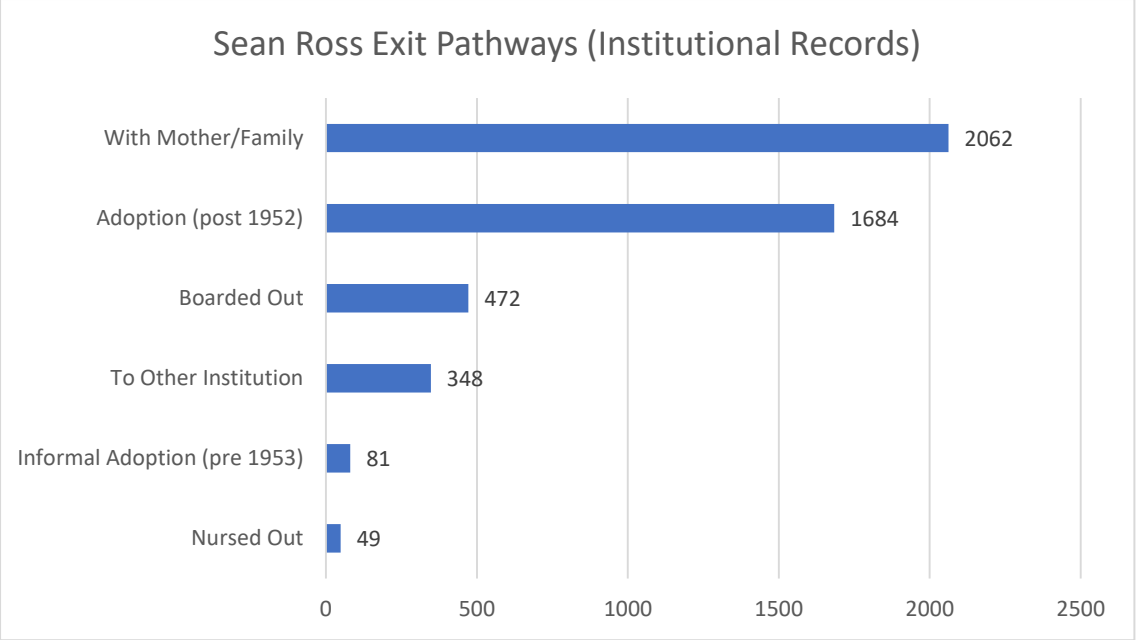
Child discharge relative to mother



Information relating to the child's date of discharge relative to the mothers' date of discharge was available for 4,774 children (78.5% of admissions).[2] The institutional records show that most children (66%) left Sean Ross on the same day as their mothers; 28% were discharged before their mothers and 6% remained in the home for a period after their mothers' discharge.

[2] The 1,016 infants and children who died in Sean Ross are excluded from this figure.

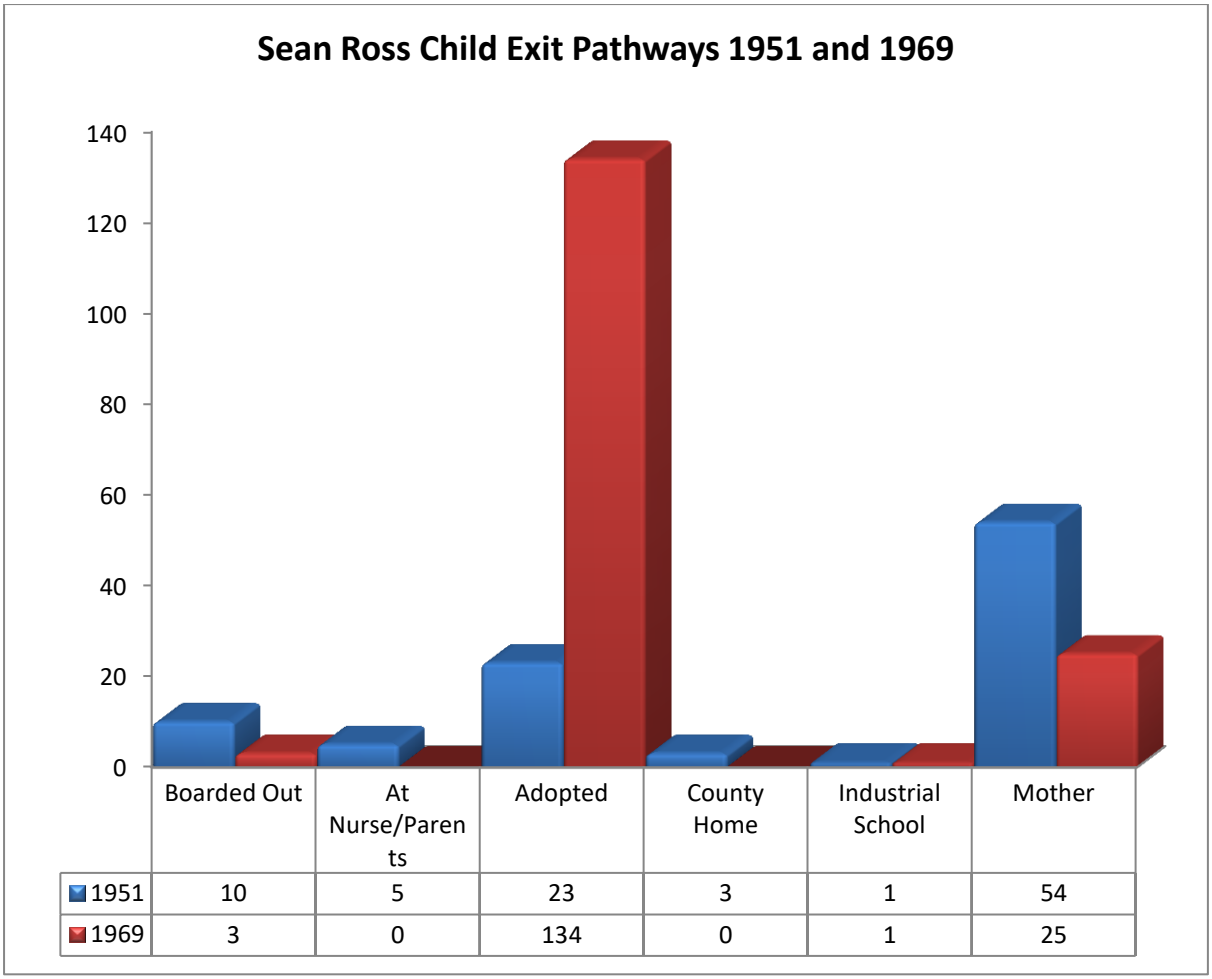
Child Exit pathways



Information relating to child exit pathways from Sean Ross was available for 4,696 children (77.3% of births/admissions). The institutional records show that 43.9% of children left the home with their mothers or another family member; 35.9% were legally adopted; 10.1% were boarded out; 7.4% transferred to other institutions; 1.7% were informally adopted and 1% were placed at nurse.

In the 1930s and 1940s most children discharged from Sean Ross either left the home with their mothers or were boarded out. Although discharge with the mother remained as the most common exit pathway in the 1950s legal adoption had displaced boarding out as an exit pathway. By the 1960s legal adoption accounted for almost 74% of child exit pathways and the number of children leaving the institution with their mothers declined from almost 66% in the 1940s to just under 19% in the 1960s.

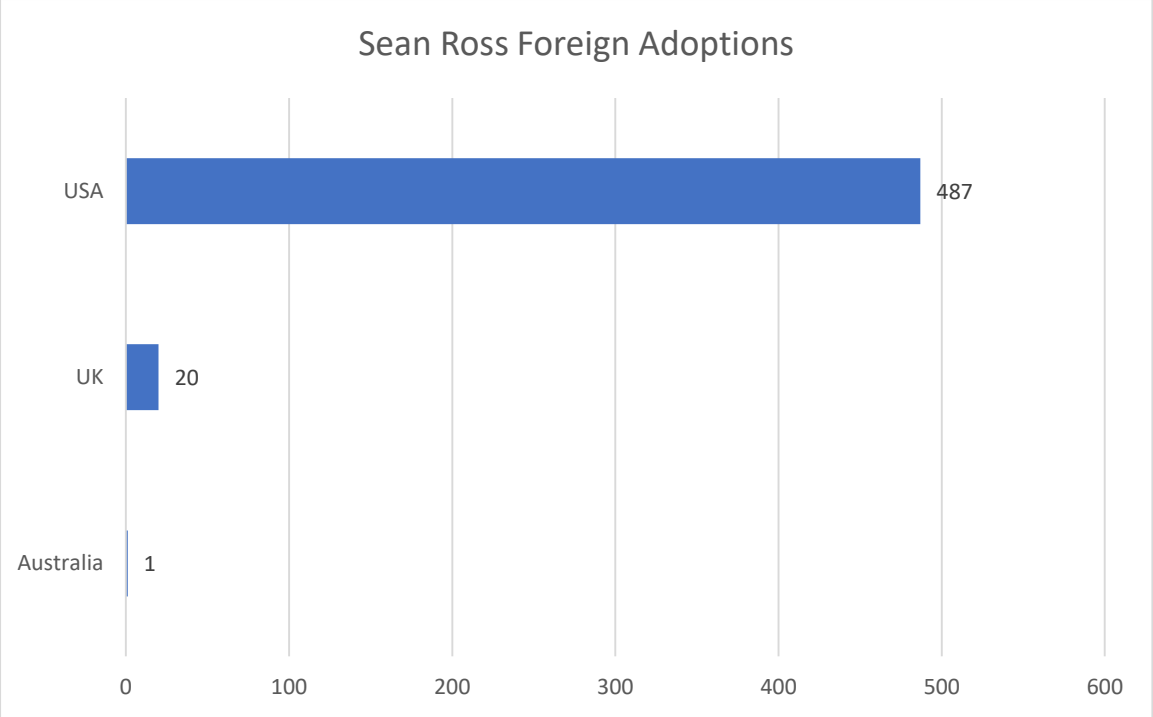
A set of annual statistical returns furnished by Sean Ross to the Department of Health for the years 1951-69 show how the introduction of legal adoption in 1952 altered child exit pathway trends.



	Boarded Out	At Nurse/Parents	Adopted	County Home	Industrial School	Mother
1951	10	5	23	3	1	54
1969	3	0	134	0	1	25

The most obvious change was in the number of children discharged to adoptive parents. The figure for 1951 relates to informal adoptions and represents the second most common exit pathway at that time. Following the availability of legal adoption from 1953, it became the most significant exit pathway and by 1969 over 80% of children were discharged from Sean Ross via this pathway. In 1951 the main child exit pathway (over 50%) was recorded as discharge with the mother. However, by 1969 just 15% of children were discharged from Sean Ross in this manner. In 1951 around 1 in 10 children were discharged from Sean Ross to a local authority boarding out scheme. By 1969 less than 1 in 50 children were discharged via this route. The practice of discharging children to a county home with a view to securing foster homes under the boarding out system was a common exit pathway prior to the introduction of legal adoption. However, this practice had ceased altogether by 1969. Similarly, private nursed out arrangements, a popular pre-1950 option among women who had the means to do so, did not feature as an exit pathway in 1969. Although industrial schools still featured as an exit pathway in 1969 just 1 in 165 children was discharged from Sean Ross in this fashion.

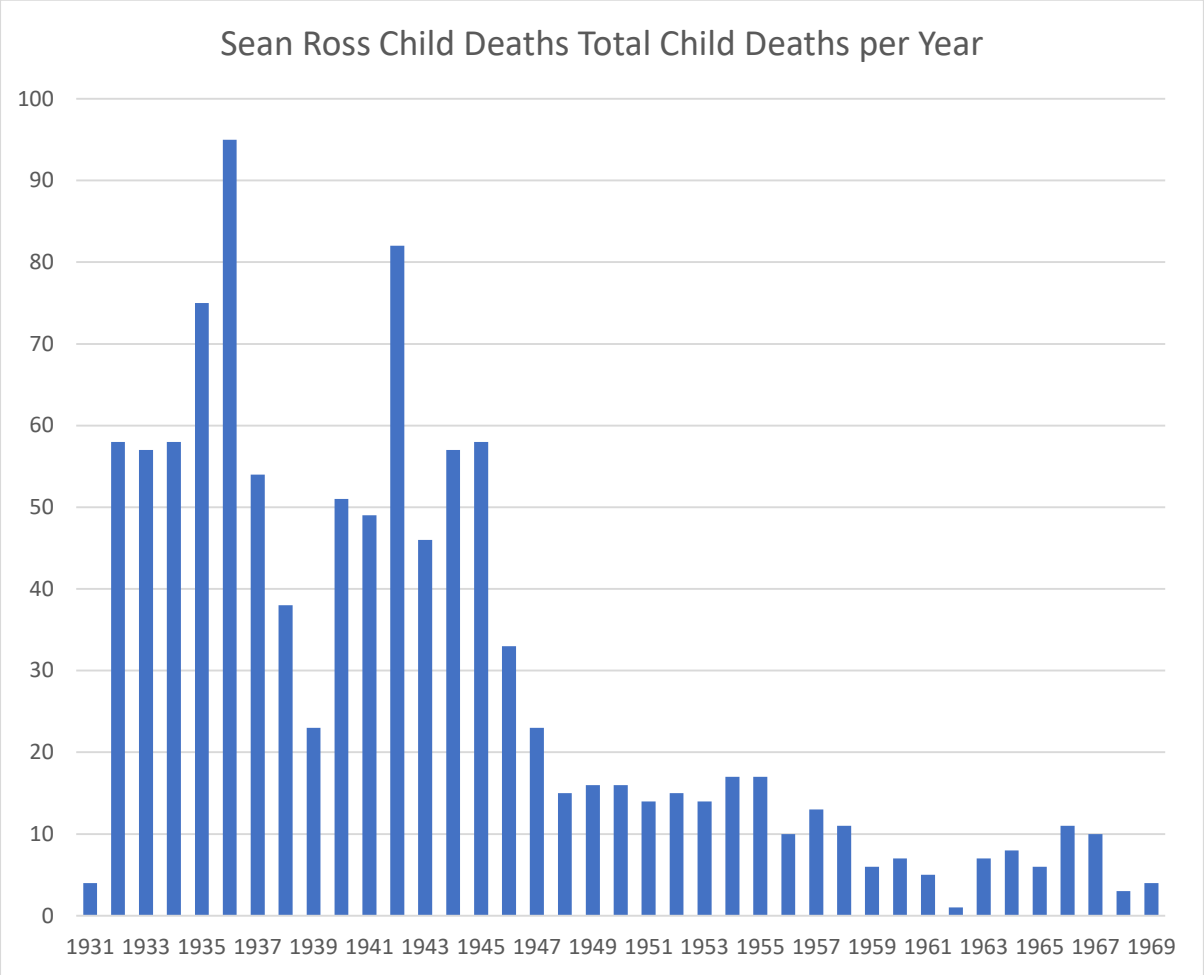
Foreign adoptions



The institutional and official external records show that 508 children were placed for foreign adoption as follows: USA (96%); UK (3.9%) and Australia (0.1%).

Child deaths

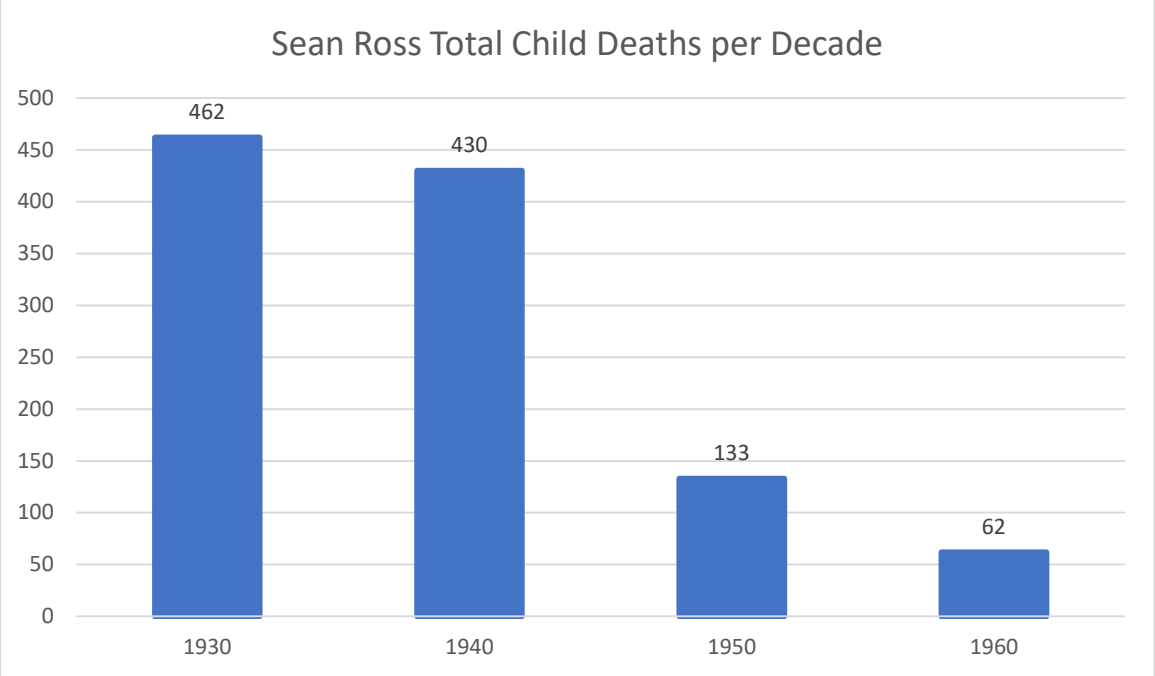
The institutional records show that 1,090 children born in or admitted to Sean Ross died in infancy or early childhood. These deaths include children who died in the institution, children who died in hospital following their transfer from Sean Ross and children born to women who had been resident in Sean Ross but gave birth outside the institution. The Commission confirmed 1,061 of the deaths (97.34%) with the GRO.



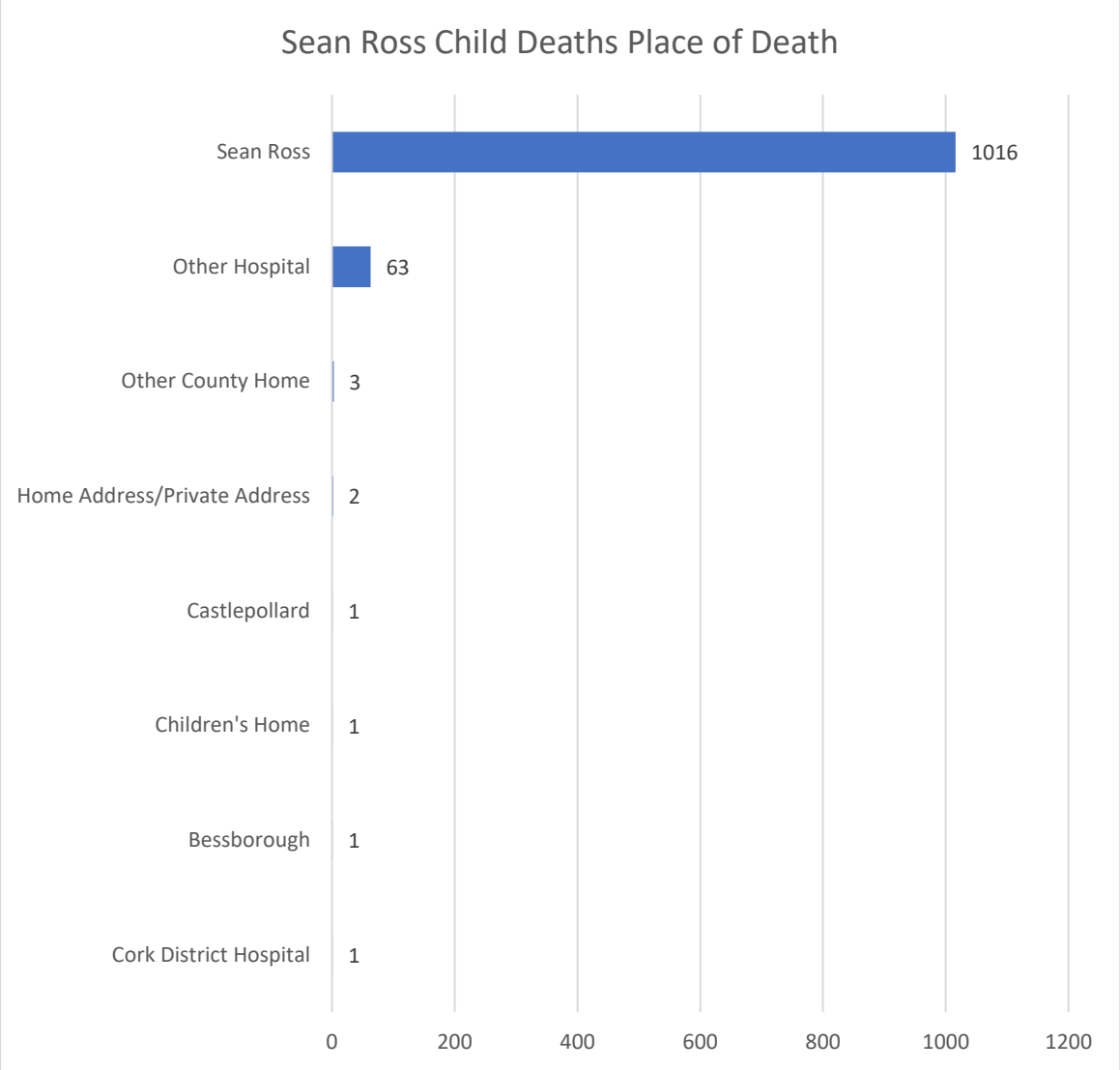
The institutional records show that most infant and child deaths (79%) occurred between 1932 and 1947. Mortality peaked between 1936 and 1942 when 95 and 82 deaths were recorded respectively. The 1930s was the worst decade for deaths in Sean Ross and accounted for 42.5% of all infant and child mortality in the institution. Over 39.5% of mortality occurred in the 1940s; 12% in the 1950s and 6% occurred in the 1960s.[3]

Although private patients made up 11.2% of admissions to Sean Ross they accounted for just 2% of child deaths. The majority of private patients were admitted in the 1960s when mortality rates were considerably lower than previous decades.

[3] Three deaths are excluded from these statistics as no date of death was available.

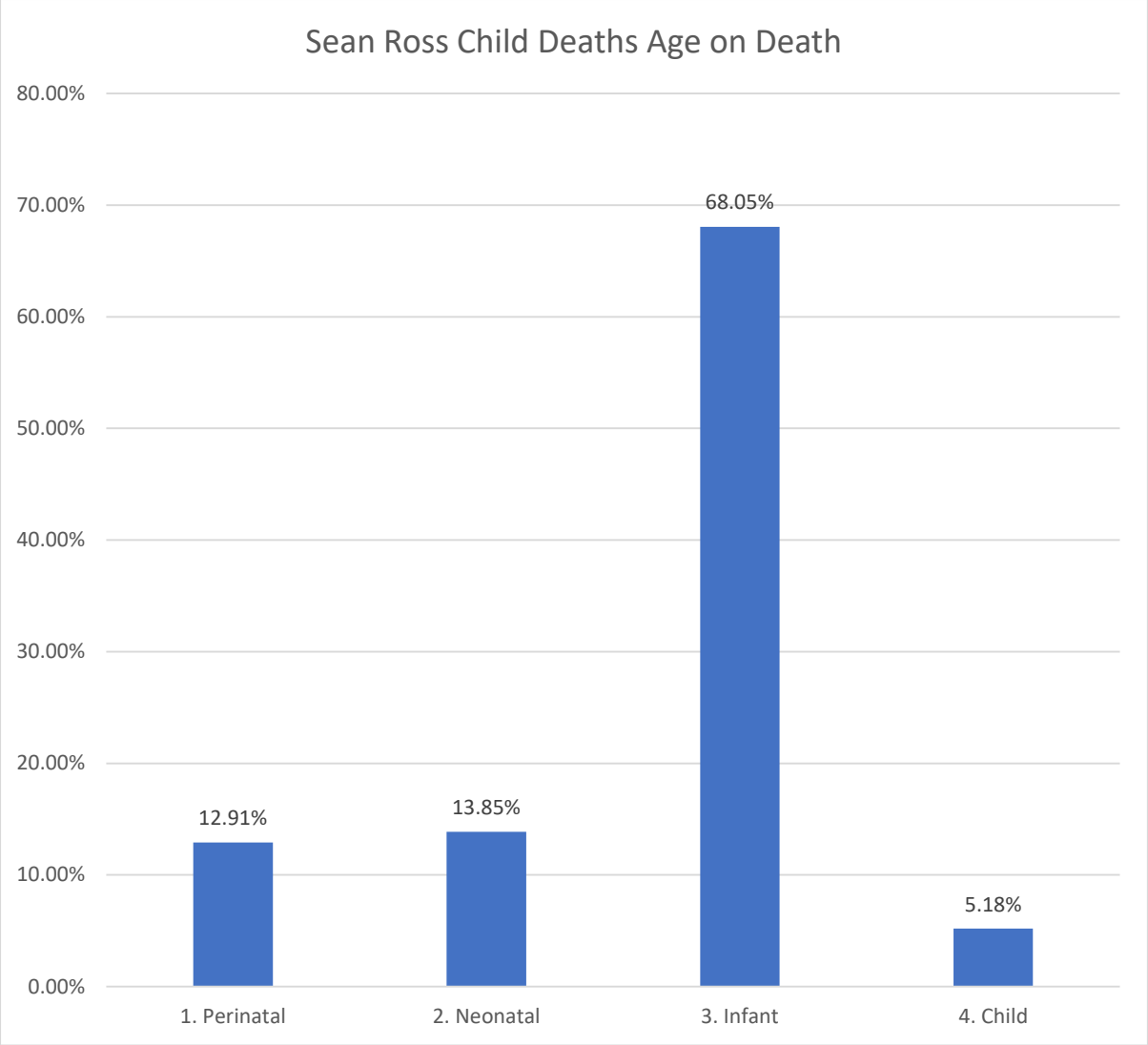

Sean Ross Total Child Deaths per Decade
500
450
400
350
300
250
200
150
100
50
0
462
430
133
62
1930
1940
1950
1960

Place of death



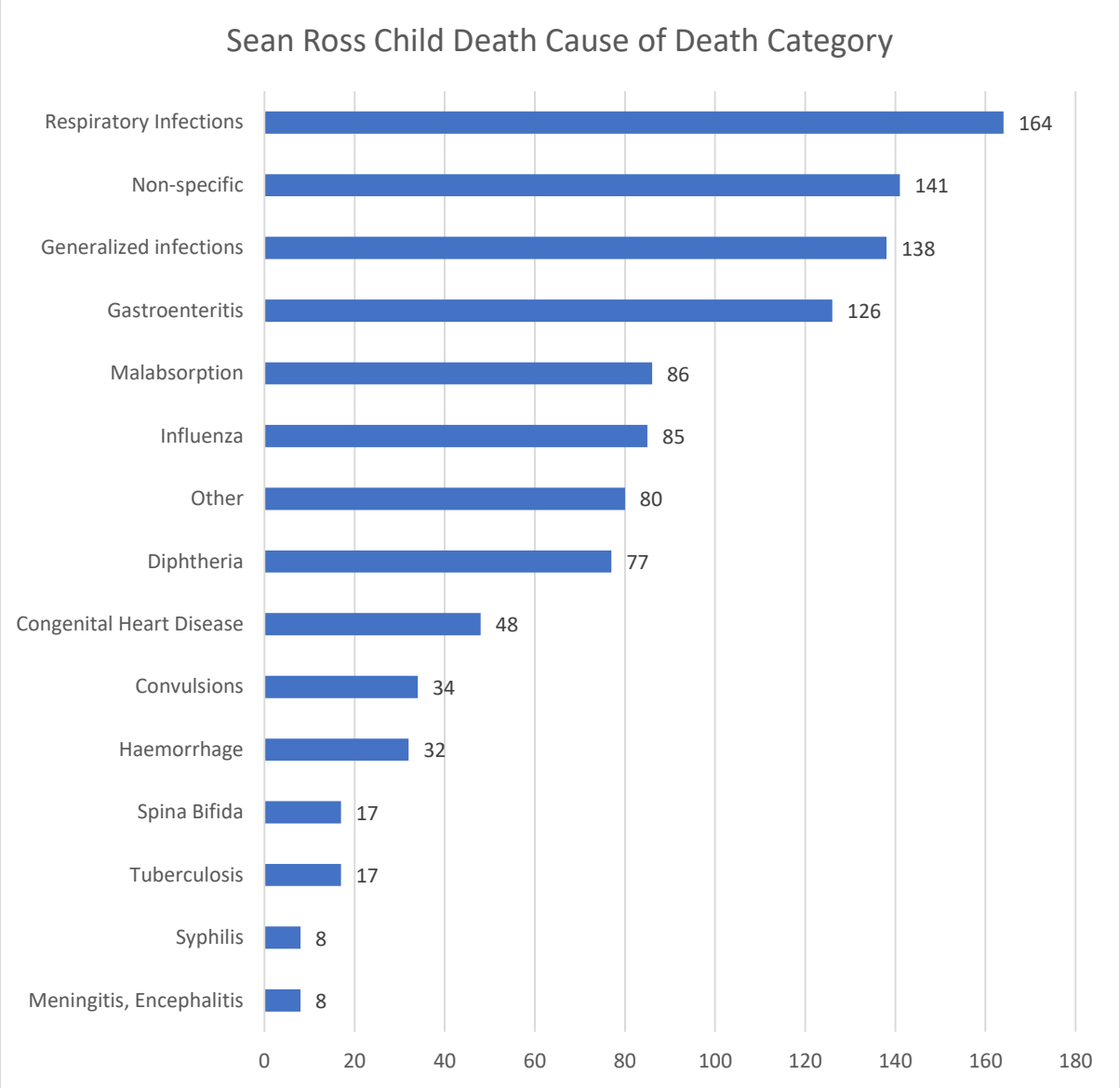
Information relating to the place of death was available for 1,088 children (99.8% of infant and child deaths). Most deaths (93%) occurred in Sean Ross. Around 6% occurred in external hospitals, mainly Roscrea District Hospital. The remaining 1% occurred subsequent to a child being transferred to another institution or private address.

Age on death



Information relating to age at death was available for 1,061 children (97.3% of infant and child deaths). The institutional records show that almost 95% of deaths occurred in infants as follows: perinatal, 12.91%; neonatal, 13.85% and infancy, 68.05%. The remaining 5% of deaths occurred in early childhood.

Cause of death

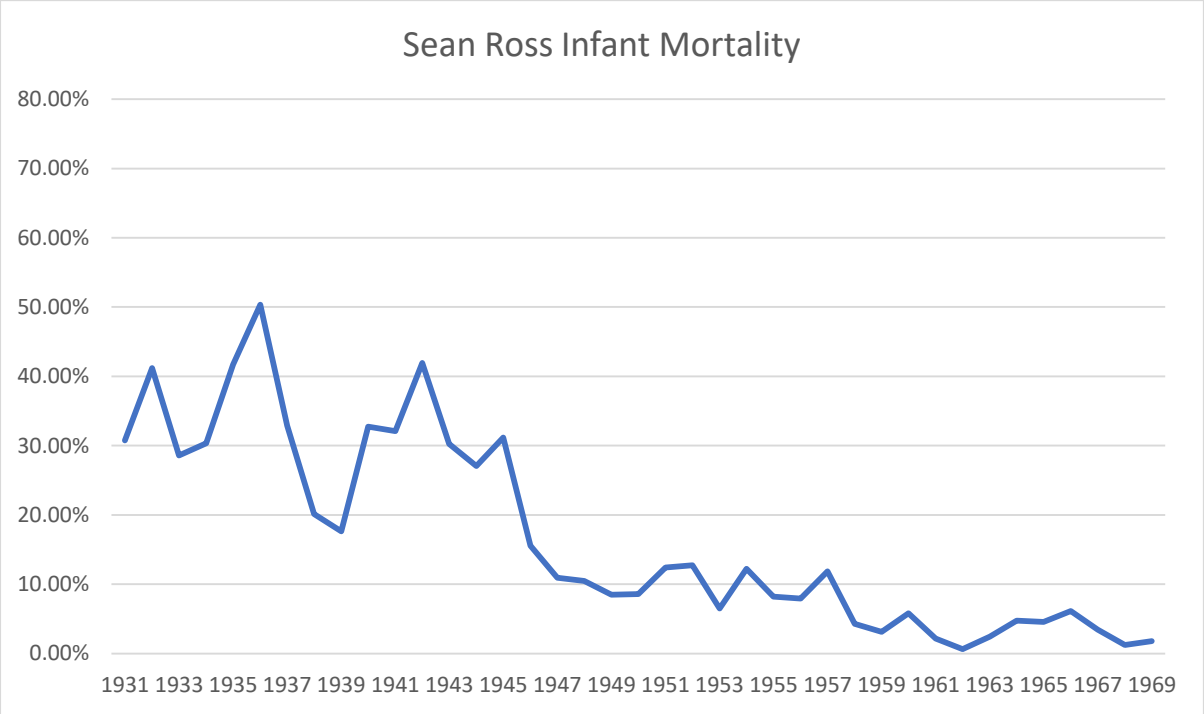


Information relating to cause of death was available for 1,061 children (97.3% of infant and child deaths). Most deaths (15.5%) were medically certified as being due to respiratory infections, mainly pneumonia, bronchitis and atelectasis; 13.3% were assigned to non-specific causes such as congenital debility, prematurity and delicate/weak from birth; 13% were attributed to generalised infections such as toxaemia, sepsis and septicaemia; 12% were due to gastroenteritis, gastritis and epidemic enteritis/diarrhoea; 8.1% were assigned to malabsorption - mainly marasmus; 8% to influenza; 7.5% to asphyxia pallida, pyloric stenosis and a range of mostly one off causes such as pertussis, chickenpox, jaundice, heatstroke and sunstroke; 7.2% were due to diphtheria; 4.5% to congenital heart disease; 3.2% to convulsions; 3% to haemorrhage, mainly intercranial; 1.6% to spina bifida; 1.6% to tuberculosis; 0.75% to congenital syphilis and 0.75% to meningitis.

The leading causes of infant and child mortality in Sean Ross changed over the period of the institution's operation. In the 1930s, most deaths were caused by Gastroenteritis (15%), diphtheria (13.5%), non-specific (congenital debility, prematurity) (13%), generalised infection (12.5%), malabsorption (10.5%) and respiratory infections (10%). By the 1950s most child deaths were caused by respiratory infections (42%), non-specific (congenital debility, prematurity) (14%), other - mainly asphyxia pallida (13%) and generalised infections (7.5%).

The institutional records show that in 93% of infant and child deaths the mother was living in Sean Ross at the time of death. The remaining 7% died unaccompanied by a parent.

Infant Mortality Rate[4]



It is clear from the institutional records that infant mortality in Sean Ross was highest in the 1930s. In its first year of operation, an infant mortality rate of almost 31% was recorded. This increased to 41% during 1932 and peaked at almost 50% in 1936. By 1939, infant mortality had declined to just under 18%, but increased again during the war years reaching 42% in 1942. Infant mortality declined to around 10% in 1947 and remained at that rate on average over the intervening decade. Between 1958 and the closure of the home in 1970 average infant mortality ran at just over 3%.

[4] Infant mortality rate is calculated as follows: Living Sean Ross infants born in a given year who died before the age of 1 year as a percentage of all Sean Ross infants born in the same year.