

**Knowledge about children
Current status and development needs
Final report on Measure 24 of the National Child Strategy**

Johanna Lahtela & Anna Pärnänen



Foreword

The National Child Strategy aims to create a child and family-friendly Finland, a society where the rights of the child are understood and respected. The strategy is based on creating a knowledge base about the situation of children, young people and families, as well as about Finland's fundamental and human rights obligations. The vision of the strategy is that the impacts of activities on children are assessed carefully, and that decisions concerning children are based on high-quality information and due consideration. The UN Committee on the Rights of the Child has also emphasised the importance of an evidence-based approach to promoting the wellbeing and rights of children.

The strategy has a long time span. For this reason, the implementation of the strategy must be sensitive to the situation, and it must be based on sufficient and up-to-date information about the wellbeing of children, young people and families. The implementation of the strategy has therefore focused on measures that are likely to strengthen the structures and knowledge base for long-term and systematic child and family policy.

In line with the policy guidelines of the National Child Strategy, a measure was included in the strategy's implementation plan to produce a comprehensive knowledge base for monitoring the wellbeing of children and young people, as well as to make a proposal for a child data portal. The purpose of the data portal envisaged in the measure is to make it easier to find and use data and monitor the situation of children in Finland. Statistics Finland took on this major and important work, which will be of great benefit to a wide range of actors who need data on children and young people to support their activities and decision-making.

Statistics Finland's work on the knowledge base serves both the implementation of the National Child Strategy and the monitoring of Finland's national action plan for the European Child Guarantee. The work also benefits central government actors, as well as actors at regional and local level, such as service providers in wellbeing services counties, decision-makers and municipal actors.

I would like to thank Statistics Finland, especially Development Manager Anna Pärnänen and Senior Statistician Johanna Lahtela, for this valuable contribution to promoting children's rights and wellbeing. I would also like to thank all those who participated in the steering group and the working groups and provided their expertise to take this measure of the National Child Strategy forward.

Johanna Laisaari, Secretary General for the National Child Strategy

Prime Minister's Office

Preface

This report brings together the outputs of Measure 24 of the National Child Strategy. In accordance with the measure, Statistics Finland was tasked with producing a comprehensive picture of the state of knowledge about child wellbeing, identifying blind spots in the knowledge base, and making a proposal for a child data portal. The maintenance of the national data reserve is one of Statistics Finland's main tasks, and thus an assignment concerning a knowledge base was greeted with enthusiasm.

The work has been rewarding and very necessary. No comparable overviews of the state of knowledge about children have been done before. This overview has been necessary because information about children is scattered, and there are many data producers. The report shows that although there is a wealth of information available about children — even a surprisingly large amount — there are still blind spots that need to be better addressed in the future. It is also important to continue to monitor the state of children's wellbeing. To this end, the report also includes a description of the state of the knowledge base as a whole, as well as suggestions for improvement.

Development Manager Anna Pärnänen and Senior Statistician Johanna Lahtela were responsible for the identification and classification of the child wellbeing indicators. Senior Researcher Marjut Pietiläinen and Senior Statistician Miina Keski-Petäjä also participated in the work at Statistics Finland.

The steering group of the measure was composed of the following members: Counsellor of Education Riku Honkasalo (Finnish National Agency for Education); Senior Specialist Esa Iivonen (Mannerheim League for Child Welfare); Secretary General for the National Child Strategy Johanna Laisaari (Prime Minister's Office); Research Manager Johanna Lammi-Taskula (Finnish Institute for Health and Welfare); Science Specialist Marko Merikukka (Itla Children's Foundation), Leading Expert Anna Moring (Diverse Families Network); Senior Adviser Petri Paju (Central Union for Child Welfare); Senior Researcher Marjut Pietiläinen (Statistics Finland); Acting Secretary General Anssi Pirttijärvi (State Youth Council); Senior Specialist on the National Child Strategy Kirsi Pollari (Ministry of Social Affairs and Health); Senior Researcher Miia Saarikallio-Torp (Social Insurance Institution of Finland); and Legal Adviser Elias Vartio (SAMS – Samarbetsförbundet kring funktionshinder).

To all the experts mentioned above, many thanks for your contribution to this important work. The work has received funding from the National Child Strategy.

Helsinki, 15 February 2023

Hannele Orjala

Table of contents

Foreword	1
Preface	2
1. Introduction	4
Previous efforts to identify indicators and create child data portals	5
How is the wellbeing of children measured?	6
Purpose and structure of the report.....	8
2. Progress of the work	10
3. Child wellbeing indicators	13
Progress of the indicator work.....	13
Data by age group.....	15
Regional data	15
Other background variables.....	16
Producers of indicators.....	16
Survey-based data	16
Register-based data	17
Health and wellbeing.....	18
Hobbies and leisure.....	20
Social relationships	22
Inclusion and participation.....	24
School and early childhood education and care.....	25
Housing and living conditions	28
Safety.....	30
Services, benefits and social support.....	32
Demographic indicators	34
4. Blind spots in knowledge about children.....	36
Data gaps	36
Information about vulnerable children is severely lacking	39
5. Challenges in the current state of knowledge about children	41
6. Proposals for action to improve the knowledge base on children	43
7. Indicator website.....	46
8. Summary	49
Literature.....	50

1. Introduction

Finland's first National Child Strategy was published in 2021. The vision of the strategy is a child and family-friendly Finland where the rights of the child are respected. The aim is to mainstream children's rights and status so that children are consistently taken into consideration in all policies and activities alongside other members of society, and that children are informed of their rights. The strategy pays special attention to securing the status of vulnerable children and better recognising their needs ([Finnish Government, 2021](#)).

Each new Government prepares an implementation plan for carrying out the policy guidelines of the strategy. The implementation plan of Prime Minister Sanna Marin's Government includes a total of thirty measures. Statistics Finland was tasked with carrying out Measure 24, "Producing a comprehensive knowledge base for monitoring the wellbeing of children and young people". ([Implementation plan for the National Child Strategy, 2021](#))

A strong knowledge base is needed to support decision-making and to monitor the wellbeing of children. The aim of the measure was to produce a comprehensive picture of the existing knowledge and to identify blind spots in the knowledge base. Special attention was paid to information about vulnerable children and young people.

The UN Committee on the Rights of the Child has also emphasised the importance of an evidence-based approach to promoting the wellbeing and rights of children. In its concluding observations on Finland, the Committee has expressed its concern about the lack of information about the living conditions of vulnerable children, including children affected by poverty, children with disabilities, minority or immigrant children, and children in substitute care. The Committee recommends that Finland continues to strengthen its capacity for the systematic collection and analysis of data on all persons under the age of 18 throughout its territory.

Information about children is produced and used by a wide range of actors with different needs. Besides decision-makers at national, regional and municipal levels, the data users include organisations, researchers and those working with children. To achieve a comprehensive picture of the data needs and use of data, the measure was carried out in close cooperation with stakeholders.

It was already known in advance that although an abundance of information about children was available, the information was scattered and might therefore be difficult to use. In addition to mapping the knowledge base, Statistics Finland made a proposal for a data portal, its implementation method and its content. The aim is to combine information about children on a single website to promote the use of the data in a way that supports children's rights. This report provides an overview of the tasks carried out under this measure.

Previous efforts to identify indicators and create child data portals

Indicators play a key role in the use of statistical data. Indicators are key figures that at best enable broad and complex matters to be presented in a simple way. They are also needed in target setting, monitoring, planning and decision-making, including in the monitoring of children's wellbeing.

Despite previous efforts to compile child data, no corresponding mapping of indicators covering the entire knowledge base has been done before. In addition, not all data on children have previously been combined in a single data portal focusing only on children.

In its report published in 2011 (entitled "Lasten hyvinvoinnin kansalliset indikaattorit"), the Ministry of Education and Culture defined the [National Indicators of Child Wellbeing](#). The aim of the report was to produce a balanced set of indicators to support decision-making rather than to identify all the indicators available. The report also identified some data gaps and made suggestions for improving the coverage of the indicators of child and adolescent wellbeing. Some of the data gaps identified in the report have been filled over the last ten years or so.

Other efforts have also been made to compile child data. In 2007, Statistics Finland published an anthology entitled "Suomalainen lapsi" ("The Finnish Child") (also see Statistics Finland, 2000). It examined the wellbeing of children using various indicators. The work was repeated in 2021–2022 with the publication of a collection of articles about Finnish children ("Lapset Suomessa"). All the articles in the collection are listed in the bibliography of this report. In both collections, the focus was mainly on indicators produced by Statistics Finland, while other indicators played a smaller role.

There are many sources of data on children's wellbeing. Statistical authorities maintain their own statistical services. These include Statistics Finland's [StatFin](#) service and the Social Insurance Institution's (Kela) [Kelasto](#).

Other statistical services contain aggregated data obtained from a variety of data producers. The Finnish Institute for Health and Welfare (THL) maintains the [Sotkanet](#) service, which contains key statistical data on welfare and health in Finland. It also contains a set of indicators entitled "Children's welfare indicators in Finland", which is based on the 2011 proposal of the Ministry of Education and Culture on nationwide indicators for monitoring child wellbeing. The Iitla Children's Foundation has also compiled key nationwide indicators of the wellbeing of children and young people on its [Iitlasto](#) portal.

In addition, countless smaller data portals publish indicators for specific topics. These include the Ministry of Education and Culture's [indicators of physical activity for children and young people](#) and the [Terveystemme](#) website maintained by THL. Several international websites also

publish comparative data, including the WHO's [Health Behaviour in School-aged Children](#) site and the OECD's [Child Well-being Dashboard](#) and [PISA Database](#).

Indicators used by smaller data producers in their surveys and studies are mostly published in related reports. In this case, there is a risk that the output data will remain in limited use because the user must know exactly where to look for the data.

On the other hand, the advantage is that the output data are available with the background variables in a single report. Indeed, information in data portals is not always presented with all the background variables, and the user must actively look for the indicator background data such as statistics.

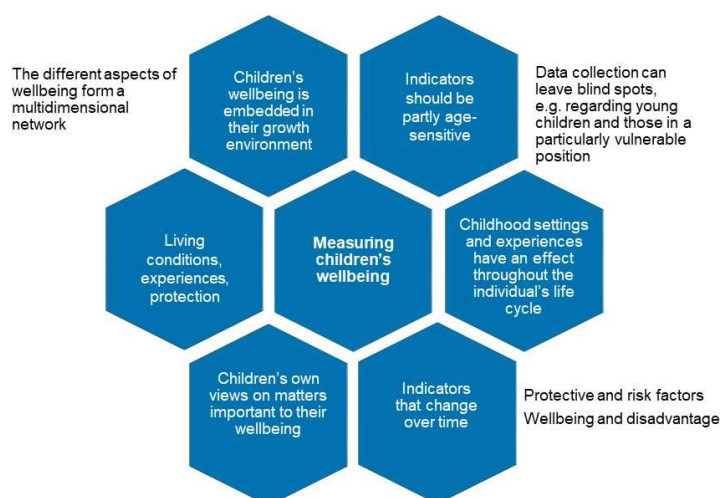
How is the wellbeing of children measured?

The wellbeing of children can be measured in many ways. For example, the OECD has outlined multiple domains and possibilities for measuring child wellbeing. The OECD divides the different dimensions of child wellbeing into three tiers: the outermost tier covers public policies, while the inner tiers concern children's living environment and their activities, behaviours and relationships. These dimensions are divided further into different aspects, each with its own dashboard ([OECD, 2021](#), see also [the OECD Child Well-being Dashboard](#)). The indicators should be age-sensitive and stage-sensitive, reflect children's own views on wellbeing, capture inequalities, and be responsive to the needs of children from different backgrounds, for example.

The different **domains of child wellbeing form a multidimensional network (Figure 1)**. Multiple aspects of life such as living conditions, individual experiences and social protection affect wellbeing. In the case of children, social protection is emphasised because the younger the child, the more they depend on the adults around them. The obligation to protect children is also enshrined in the Convention on the Rights of the Child.

Figure 1

Measuring children's wellbeing is complicated



Childhood settings and experiences have an impact throughout the individual's life cycle. From a societal perspective, measuring child wellbeing is also important to ensure the functioning of society in the long term. For example, the number of adults actively engaged in society in the future can be influenced by limiting the factors of disadvantage that contribute to the risk of social exclusion.

However, children should not only be thought of as future adults. There are more than one million children in Finland, which means that around a fifth of Finns are under the age of 18 ([Pietiläinen, 2022](#)). It is therefore important to know how children are doing right now. All children have the right to a good life and a society that supports their growth. This also means that efforts must be made to reduce illbeing.

Children's wellbeing is embedded in their growth environment. It is influenced by the family's income level and family relationships, the school environment, hobbies and the living environment. Indicators such as family wellbeing therefore play an important role in measuring child wellbeing. Children themselves also identify the family as an important source of their wellbeing ([Poikolainen, 2014](#)).

Measuring child wellbeing is challenging because it is impossible to choose indicators that could measure the wellbeing of all children. For example, the needs of an infant are very different from those of a teenager. This means that different indicators are needed for children of different ages.

The perception of what is considered wellbeing is constantly changing, and it is influenced by societal developments, political priorities, and common values and standards. As the world changes, new aspects of wellbeing also emerge. For example, because of the changes in the concept of family and the digital transformation, we now need indicators that did not exist in the 1990s. The indicators should therefore change in line with changes in society. On the other hand, permanent indicators are also necessary to monitor changes in wellbeing over time.

Wellbeing indicators are divided into objective and subjective indicators. Objective indicators measure resource-based wellbeing, while subjective indicators reflect individuals' own perception of their wellbeing. ([Haanpää, Toikka & af Ursin, 2020](#).) Subjective wellbeing cannot be measured using register-based data alone, but it also requires access to survey-based data.

Although we talk about measuring wellbeing, indicators often describe "illbeing". For example, in the National Indicators of Child Wellbeing, the indicators of "No close friends" and "Difficulties in communicating with parents" have been selected as indicators of social relationships. One of the reasons given for emphasising indicators of illbeing is that it is easier

to measure illbeing than wellbeing ([Ministry of Education and Culture, 2011](#)). Indicators of illbeing can help identify the risk of social exclusion, for example.

However, it is also important to measure wellbeing. Indicators of wellbeing do not just measure whether children are doing well. Good family relationships or a healthy lifestyle are also protective factors that make it easier to cope with life's challenges ([Poikolainen, 2014](#)). Wellbeing indicators can thus reinforce good practice by highlighting strengths and positive factors.

Particular attention should be paid to measuring the wellbeing of vulnerable children.

The Finnish Terminology Centre defines vulnerable persons as follows: "A group of people who, due to factors beyond their control, do not have the same opportunities as other population groups and are therefore at risk of inequality."

All children are inherently vulnerable, as they do not have the same opportunities as adults to make decisions about their lives. However, some groups of children are more vulnerable than others. For example, migrant children, children with disabilities, children who have experienced violence, and children belonging to gender or sexual minorities are in a more vulnerable position than other children.

However, indicators have their limitations. A single indicator does not necessarily tell the data seeker anything until the data are put into context and analysed. Contextualisation may be based on time series or on comparative data. On the other hand, indicators may also need to be supported with a broader interpretation and analysis of the phenomena. For example, does the increase in the number of child welfare notifications reflect an increase in general illbeing or a lower threshold for reporting issues?

Purpose and structure of the report

The mapping of the knowledge about children's wellbeing has been an important data policy exercise. This report describes the current state of knowledge about child wellbeing and makes suggestions for improvement. The suggestions put forward in the report will help develop knowledge about children further.

The report is especially intended for producers and users of data on children. The indicators compiled in the report serve as a handbook for finding data on children for different data needs. Due to the large number of indicators, this report does not include a list of the identified indicators. The indicators are listed in a separate Excel file that can be accessed here. However, the data sources for the indicators are listed in Appendix 1.

This report first describes the child wellbeing indicators and blind spots in knowledge about children. This is followed by a summary of the current status of the knowledge base after the implementation of Measure 24. The report then makes suggestions for strengthening the

knowledge base and improving the use of the data. Finally, the report outlines the design of the possible future child data portal.

2. Progress of the work

Measure 24 comprised three sets of tasks. The aim was first to produce a comprehensive description of the knowledge base on the wellbeing of children and young people. The second objective was to identify the data needs, data content and blind spots in the data. Third, Statistics Finland was tasked with planning a data repository with stakeholders that describes the situation of children and young people and facilitates finding and using data and monitoring the status of children in Finland. Another task was to make a proposal for a data portal, its implementation method and its content, as well as for the implementation schedule. The work was carried out between March 2022 and February 2023.

The main objective of the measure was to produce a comprehensive description of the knowledge base. This was carried out by **compiling all available indicators in a single roadmap (see the [Excel file](#))**. The preparation of the roadmap required an in-depth investigation of different indicator websites, data sources, the indicators themselves and their production. The end result was a roadmap that provides a comprehensive picture of what kind of data on child wellbeing are produced in Finland, how the data are produced, and by whom. The roadmap served as a basis for the planning of the indicator website.

The **mapping of blind spots** was carried out throughout 2022, and a workshop on data gaps was organised for stakeholders in the spring of 2022. Statistics Finland also cooperated with [Measure 25 of the National Child Strategy](#), led by the Ministry of Finance. In the measure, a survey was conducted among municipalities and hospital districts, and the questionnaire also included questions on what kind of data gaps had been identified at regional level. Blind spots were also mapped in other stakeholder meetings, and further observations were made over the course of the indicator work.

One of the tasks of the measure was to make a **proposal for a data portal, its content, and its implementation method and schedule**. The work started in the spring of 2022. The location of the data portal has been discussed with the steering group. This involved investigating whether Statistics Finland's website would be a suitable location for the portal. The task was carried out in cooperation with Statistics Finland's ongoing website renewal project to find a workable solution for the implementation of the child data portal. Statistics Finland's website redesign team was already working on a project involving different indicator websites, so the cooperation proved very useful. The measure also benefited from the work of the redesign team's user experience designer.

In addition to the tasks described above, **several awareness-raising measures were undertaken**. The launch of the measure was announced by publishing a [joint news release](#) together with the Ministry of Social Affairs and Health. The measure was also presented in a webinar organised by Statistics Finland on 9 June 2022.

Blogs and/or infographics were published throughout 2022 on the following thematic days: [Boys' Day](#) (16 May) (Lahtela, 2022a), Refugee Day (20 June), International Youth Day

(12 August), [Girls' Day](#) (11 October) (Lahtela, 2022b), World Children's Day (20 November), as well as on the topic of adoption on 31 August. In addition, the progress of the work has been reported in a [blog](#) (Pärnänen, 2022), and the challenges of measuring children's wellbeing have been discussed in an [article](#) (Lahtela, 2022c). Another article examined children as a population group, and the changes in the numbers and backgrounds of children ([Pietiläinen, 2022](#)).

The awareness-raising measures carried out in the measure have been very successful. The articles, blogs and infographics have attracted a large number of views on Statistics Finland's website, as well as on Twitter. The Boys' Day blog and infographic received the highest popularity. They attracted around 60,000 views and reached 450,000 readers on traditional print media. The activities carried out on other theme days, as well as the reporting on the progress of the work and measurement of children's wellbeing, have also reached a large number of viewers and readers.

Figure 2

Infographics published during the thematic days



The awareness-raising work also involved presenting the measure at various stakeholder meetings, including in a workshop on Itla indicators organised by the Itla Children's Foundation, as well as at a meeting of the Ministerial Working Group on Child and Youth Policy. The measure has also been presented at various meetings with international stakeholders.

A second workshop was organised on the outputs of the measure, findings on the current state of the knowledge base and suggestions for improvement. The workshop was attended by a wide range of experts from different stakeholders, including data producers, data users

and data administration staff. The results of the workshop were also utilised when drawing conclusions on the improvement of the knowledge base.

3. Child wellbeing indicators

Progress of the indicator work

The indicator work started with a review of the theoretical framework for the wellbeing of children and young people. For example, the methods for the measurement of child wellbeing and the concept of wellbeing as a whole were outlined based on the OECD report entitled [“Measuring What Matters for Child Well-being and Policies”](#). The early stages of the work involved getting acquainted with previous indicator work carried out at national and international level.

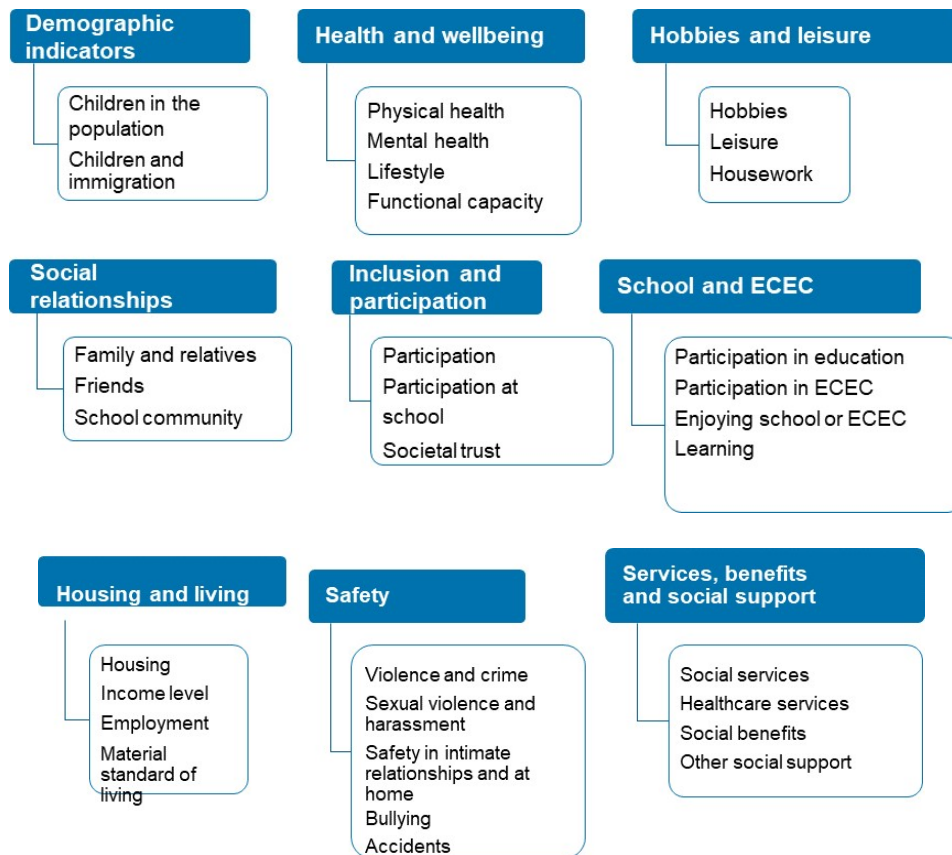
In addition, different sources of indicators were mapped. The initial mapping already showed that the data volume was likely to be large, as more than 40 initial sources of data were identified.

Due to the large amount of data, it was deemed necessary at an early stage to establish a reference model for the classification of the wellbeing indicators. The reference model served as the basis for a knowledge base that consists of child wellbeing indicators.

The reference model was based on earlier models of wellbeing, but the aim was to keep the different domains of wellbeing manageable. It was therefore decided that the model should have a total of eight wellbeing domains (Figure 3). These include health and wellbeing, hobbies and leisure, social relationships, inclusion and participation, school and early childhood education and care, housing and living conditions, safety, and services, benefits and social support. The ninth domain, demographic indicators, describes the demographic structure of the child population.

Figure 3

Reference model for the domains of wellbeing



The next step was to start the actual compilation of indicators in an Excel file to serve as a roadmap. Initially, the mapping covered all indicators describing children and young people aged 0–29. However, it soon became clear that the volume of data would be considerably larger than anticipated and could become unmanageable. It was therefore decided to limit the indicators to children aged 0–17.

Second, it was decided to focus on nationally produced data because combining internationally coordinated data resources with other child data is challenging. Thus, surveys such as the OECD’s PISA study and the WHO’s Health Behaviour in School-aged Children (HBSC) study were excluded from the mapping.

Third, the indicators selected for the roadmap had to be based on data that were regularly produced for a time series to be available. This restriction excluded individual and one-off studies from the mapping. Fourth, the indicators were limited to those directly related to child wellbeing. This meant that the object of measurement of the indicator had to be either the

child or the family of the child. As a result, indicators such as the cost of various services or measures taken by municipalities and schools were excluded.

Even after these restrictions, the volume of data describing child wellbeing was huge: overall, around 2,400 indicators were compiled for the roadmap. When looking at the indicators as a whole, it is important to note that the indicators do not form an immutable database. New background variables may be added to the register data, or the data content of the surveys may change. Sometimes even the data producer can change, as has been the case with the Child Victim Survey and statistics on early childhood education and care, for example. The list of indicators therefore continuously evolves over time, at least to some extent.

Finally, the indicators were further categorised into smaller sets within the different domains of the reference model. This enabled more detailed examination of the data content, blind spots and data overlaps in the domains to be carried out. For each domain, the distribution of the indicators by age group was also examined. In addition, the main sources of data were identified for each domain, as well as weaknesses in the knowledge base.

The classification stage revealed the limitations of the earlier “siloes” reference model: One indicator can belong to more than one wellbeing domain at the same time. For example, bullying at school can belong to the school and early childhood education and care domain, but it can also belong to the safety domain. The roadmap also indicates all alternative wellbeing domains to which the indicator could belong. This multidimensional approach to wellbeing can also be applied later when designing the data portal. The roadmap was also colour-coded to indicate whether the indicator described wellbeing/protective factor or illbeing/risk factor. This provided an overall picture of the content of the indicators.

Data by age group

The age range of the children in question is also indicated in the indicator roadmap. The age data are divided roughly into three groups: 0–6, 7–12 or 13–17. The comment field of each indicator provides detailed information about whether the data are available by age group or broken down by another age-based classification, for example.

The age breakdown can sometimes create obstacles for using the data. For example, in many registers, the data are available for young people aged 15–19 or 15–24. In this case, it would be difficult to use the data to describe child wellbeing. Especially individuals who are closer to the end of the age range of 15–24 are at a very different stage in their lives than the minors in the group.

Regional data

For approximately half the child wellbeing indicators, data are available at the municipal level. Municipal-level data are more commonly available for register-based indicators, but the availability varies between the different wellbeing domains. For example, in data portals and

statistical databases, it is often possible to focus the search on a certain region, hospital district, specific catchment area or large (NUTS 2) area.

Other background variables

The gender variable is available for around two thirds of the indicators. The gender breakdown does not take into account non-binary persons. The indicators measuring only one gender describe birth and abortion among adolescents.

The background variables of language, citizenship or socioeconomic status are only available for a few indicators. The availability depends on the topic and background data. For example, the language variable is more often available for indicators related to education than for other topics.

Producers of indicators

The largest producers of indicators are THL (approx. 850 indicators), Statistics Finland (approx. 800 indicators), various recurrent surveys of universities (approx. 450 indicators), and Kela (approx. 200 indicators). Other data producers include various authorities and organisations.

Survey-based data

Surveys are used to collect information about the subjective experience of wellbeing. Subjective wellbeing indicators measure life satisfaction, exercise habits, experiences of violence and social relationships, for example. Slightly more than half the indicators in our dataset are based on only 15 surveys. The data sources for the indicators are listed in Appendix 1. Eight of these surveys focus solely on children and young people, while the remaining seven are either population-wide surveys or surveys that ask adults questions about their children or family.

Surveys mainly collect information about a specific topic such as hobbies or experiences of violence. An exception to this is the School Health Promotion Study, which produces extensive data on several wellbeing domains.

The survey-based indicators are updated less frequently than the register-based indicators. Surveys focusing solely on children are carried out every two years at most. The longest update interval is ten years (see e.g. Statistics Finland's Time Use Survey).

The continuity of surveys is also less certain than in the case of register-based statistics. A good example of this is the Child Victim Survey, a key source of data on children's experiences of violence. The continuation of the survey has been very uncertain due to lack of permanent funding. The most recent Child Victim Survey was carried out by the University of Tampere as part of a measure of the National Child Strategy, and the results will be published in early 2023.

The challenge with survey-based data is that they inevitably have blind spots because some children are unable to answer the surveys themselves due to their age, literacy or other reasons.

Register-based data

Register-based indicators describe the use of services, becoming a victim of crime or living conditions, for example. The indicators compiled in this measure are based on more than 60 different registers (see Appendix 1). Some aspects of wellbeing, such as hobbies and leisure or inclusion and participation, are difficult to measure using register-based data alone.

In Finland, register-based resources are extensive and often cover almost all children, regardless of their age or background. Most registers exclude only children who do not reside permanently in Finland. These include asylum seekers and undocumented children.

In addition to their good coverage, the advantage of using register-based indicators is that they are regularly updated, typically once a year. Some indicators are updated several times a year, even monthly. These include Kela's benefit data.

However, not all register-based data available have been compiled into indicators. For example, a lot of wellbeing data are collected at maternity and child health clinics and in school healthcare that are currently unavailable for research purposes. There is also a lack of information about children of prisoners or children who have run away from substitute care, for example. It is likely that the data exist somewhere in the customer files of the prison administration or the police, but they have not been compiled into statistics. The reason for this may be the lack of harmonisation of recording practices and information systems, which makes it difficult to compile statistics, or simply that the register data are not publicly available.

The following section describes the existing child wellbeing knowledge base by domain. The figures present the distribution of the indicators by age group and background data. The description of each domain starts with an overview of the type of indicators included in the domain. This is followed by a description of the main data sources and a few examples of the indicators. The purpose of the example indicators is to give an idea of the different types of indicators and background data available. Finally, the domain's strengths, weaknesses and data gaps are summarised.

The following restrictions were followed when compiling the indicators:

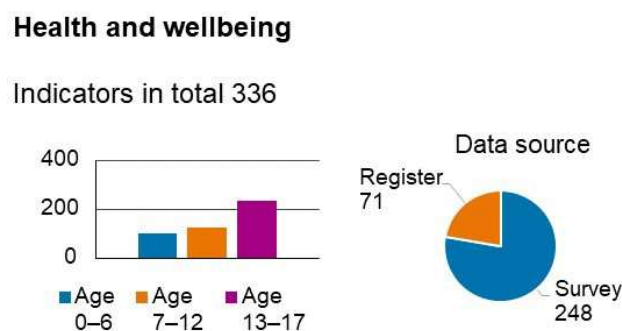
- The indicator must describe children aged 0–17
- The indicator must describe either a child or a family with children
- The indicator must be produced on a regular basis

Health and wellbeing

The health and wellbeing domain only includes indicators that truly describe children's health, wellbeing or lifestyle. There are a total of 336 indicators in this domain. Most indicators focus on the oldest age group. (Figure 4.)

Figure 4

Indicators of health and wellbeing by age group and data source



Health is often described by indicators related to healthcare services. However, in this dataset, these indicators are classified in the services, benefits and social support domain. In addition, indicators describing paid benefits also provide information about long-term illnesses in children, for example. Lifestyle indicators can also be relevant for other wellbeing domains, as they indicate risky behaviour that predisposes to other forms of illbeing.

Physical health indicators describe children's perceived health, physical symptoms, the health of new-borns, oral health, vaccination coverage, communicable diseases, and causes of death of children. **Mental health** indicators provide information about perceived mental health, life satisfaction, mental health symptoms, suicide mortality and mental health support. In addition, extensive information is available about children's **lifestyle**, such as the healthiness of children's diets, sleep, exercise, alcohol consumption, substance abuse and tobacco use, teenagers' sexual health, and internet addiction. **Functional capacity** is measured using several indicators.

Main sources of data

- **The School Health Promotion Study (THL)** produces multifaceted regional and local monitoring data on the wellbeing, health, school attendance and studies of school-age children and young people, as well as on their inclusion and participation and access to help and services. It covers a wide range of topics in

this domain, and produces an abundance of information, especially about lifestyle.

- **The FinChildren survey** (THL) produces data on the health and wellbeing of children under school age and their families, as well as on their experiences of services. The study collects data from parents of children aged 3–6 months and 4 years every four years. The health and wellbeing indicators of the study describe the child's physical symptoms, lifestyle, behavioural problems and functional limitations.
- The purpose of the **LIITU study** is to collect data on the physical activity behaviour of Finnish children and young people, as well as their attitudes, values and experiences related to exercise, through an online survey and an objective accelerometer. The survey is carried out by the University of Jyväskylä's Research Centre for Health Promotion. The objective measurement of physical activity and sleep with an accelerometer is carried out by the UKK Institute in cooperation with regional partners.

Examples of indicators

- Oral healthcare DMF index, persons aged 12 (Primary healthcare statistics, THL)
- Suicide mortality among persons aged 0–17 per 100,000 persons of the same age (Causes of death, Statistics Finland)
- Sleeping measured with an accelerometer, hours per day (LIITU study, University of Jyväskylä)
- Poor physical functional capacity, % (MOVE! measurement, Finnish National Agency for Education)

Strengths

- The physical health of young children is measured with a number of indicators. In particular, the health of new-born babies is reported comprehensively.
- An abundance of information is available on lifestyle, especially for older children.
- Previous indicator work (Ministry of Education and Culture, 2011) revealed a lack of indicators of oral health and obesity. This information is now available.

Weaknesses and data gaps

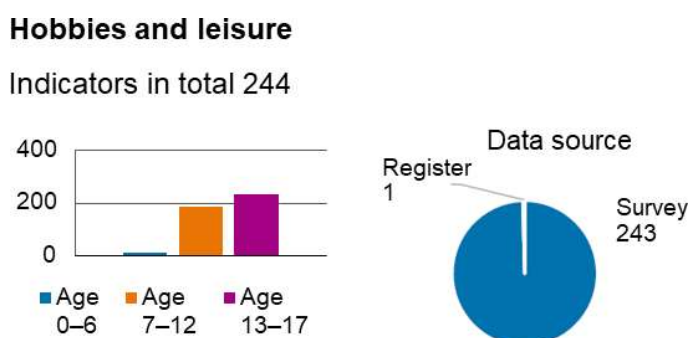
- In Finland, children's health is closely monitored throughout their childhood at maternity and child health clinics and in school healthcare. However, very few actual health indicators are available, as the collected data are not available for secondary use.
- Very little information is available about mental health and functional capacity.
- Key health indicators such as infant mortality are very stable in Finland. The rates are low, and there are very few changes in the numbers. Changes in wellbeing are in some cases difficult to monitor using these indicators.

Hobbies and leisure

Hobbies play an important role in children's leisure time. Most children have a hobby. The indicators in this domain are categorised into hobby, leisure and housework indicators. There are 244 indicators in total. All but one of the indicators are based on surveys. (Figure 5.)

Figure 5

Hobby and leisure indicators by age group and data source



Hobby indicators describe time spent on hobbies, participation in various activities, and especially time spent on physical activities. **Leisure indicators** provide information about different leisure activities, the leisure opportunities in a residential area, and satisfaction with leisure time. **Housework indicators** describe the time spent on different types of housework.

Main sources of data

- The statistics on **participation in leisure activities** (Statistics Finland) examine the population's leisure activities and participation in society and developments in them. Information is also produced about the balance between work and leisure and about social relationships. The data are collected through a survey and from different registers and are published approximately every ten years.
- **The Time Use Survey** (Statistics Finland) is an interview survey that examines how people over the age of 10 spend their time on different activities. It also studies the daily and weekly rhythms of time use and time spent with others. The study is conducted and the data are published approximately every ten years.
- **The School Health Promotion Study** (THL) produces multifaceted regional and local monitoring data on the wellbeing, health, school attendance and studies of school-age children and young people, as well as on their inclusion and participation and access to help and services. The study asks about participation in various activities and leisure opportunities in the residential area, among other things.

- The purpose of the **LIITU study** is to collect data on the physical activity behaviour of Finnish children and young people, as well as their attitudes, values and experiences related to exercise, through an online survey and an objective accelerometer. The survey is carried out by the University of Jyväskylä's Research Centre for Health Promotion. The objective measurement of physical activity and sleep with an accelerometer is carried out by the UKK Institute in cooperation with regional partners.

Examples of indicators

- Participates regularly and actively in club-organised sports, %
(LIITU study, University of Jyväskylä)
- Has visited the library in the last six months, %
(Participation in leisure activities, Statistics Finland)
- Time spent on cleaning, hours per day
(Time Use Survey, Statistics Finland)

Strengths

- Both data on children's own perception of their physical activity and objective data collected with accelerometers are available. Accelerometers could also be used to study the physical activity of groups of children for which very little information is currently available. For example, the physical activity of children in early childhood education has been studied in the Piilo project ([Sääkslahti, Mehtälä & Tammelin, 2021](#)).
- The Time Use Survey and the statistics on participation in leisure activities provide a good picture of how children's everyday life is structured, and how it changes over time.

Weaknesses and data gaps

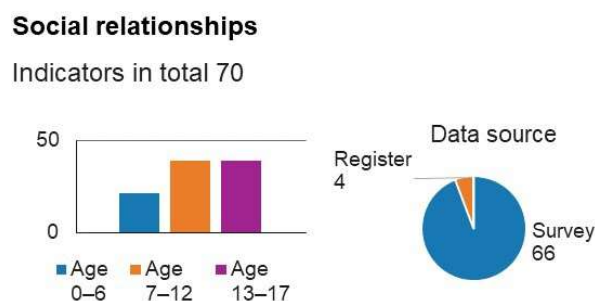
- The Time Use Survey is only conducted approximately every ten years.
- Data on hobbies are focused on physical activities. Data on physical activities describe, for example, the reasons for taking up or not taking up physical activities, and on the different ways of exercising. For other hobbies, data are mainly available on the frequency of participation and the time spent on hobbies.
- Overlapping data are collected on physical activities and the subjective assessment of one's own physical activity.
- Scarcely any information is available on the hobbies and leisure activities of children under school age. The main form of leisure for young children, i.e. play, is not described in the indicators.
- More information is needed on leisure time spent online and on social media.

Social relationships

A trusting relationship with a safe adult is one of the most important factors protecting a child's wellbeing throughout childhood. Children themselves also mention social relationships as an important area of wellbeing (Muukkonen, 2019). Loneliness and a lack of friendships can cause anxiety and depression in children (Junttila, 2010). Although social relationships are an important factor for children's wellbeing, this domain has the lowest number of indicators – only 70. (Figure 6.)

Figure 6

Indicators of social relationships by age group and data source



Around half the **indicators of family relationships** are based on the FinChildren survey, targeted at parents of infants and four-year-old children. For example, the children themselves are asked about their interaction with their parents, the parents' interest in the child's life and the time spent with family members. Family relationships are also measured in other wellbeing domains in the reference model, including with demographic indicators such as different types of families or the number of children, and in the safety domain with indicators describing domestic violence or a safe home environment.

The data on **friendships** cover the number of friends and time spent with friends. Indicators describing **social relationships at school** examine children's friendships with classmates, as well as their relationships with teachers and other adults in the school. The indicators in this domain examine children's satisfaction with their relationships, their sense of belonging to various local communities, and their sense of loneliness. The indicators describing the **sense of belonging** and trust in social relationships are very close to the indicators of societal trust in the inclusion and participation domain.

Main sources of data

- The **School Health Promotion Study (THL)** produces multifaceted regional and local monitoring data on the wellbeing, health, school attendance and studies of

school-age children and young people, as well as on their inclusion and participation and access to help and services. The indicators of social relationships in the study provide information about children's interaction with their parents, number of friends, the functioning of the school community, and their sense of belonging.

- **The FinChildren survey** (THL) produces data on the health and wellbeing of children under school age and their families, as well as on their experiences of services. The study collects data from parents of children aged 3–6 months and 4 years every four years. The indicators of social relationship in the survey mainly describe interactions within the family.
- The **Child Victim Survey** is based on a nationally representative sample and is aimed at children and young people. It extensively examines the experiences of children and young people in different areas of life and living environments (University of Tampere). The indicators included in the present dataset are based on the 2013 survey. The survey examines social relationships through questions about interaction with parents and other trusted adults, as well as about online acquaintances.

Examples of indicators

- Percentage of 6th and 9th grade pupils who feel at least somewhat able to discuss their issues with their parents, %
(Child Victim Survey, the implementer varies)
- Has made friends online, %
(Participation in leisure activities, Statistics Finland)
- Gets along well with schoolmates, %
(School Health Promotion Study, THL)
- Experiences uncertainty or insecurity because of loneliness
(Youth Barometer, State Youth Council and Finnish Youth Research Network)

Strengths

- Children's interaction with their parents and other trusted adults is studied extensively.

Weaknesses and data gaps

- The social relationships domain has the fewest indicators in the entire wellbeing reference model, even though children consider it a significant factor promoting wellbeing.
- Increased family diversity such as shared parenting or rainbow families is not reflected in the indicators describing family relationships.
- Information is needed on specific family situations such as children who have lost their parents and children of prisoners.

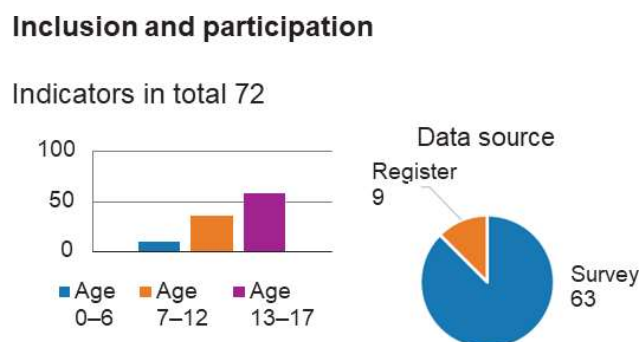
- Digitalisation has revolutionised social interaction. More information is needed on children’s social relationships in online communities, as well as on virtual recreation and communication.

Inclusion and participation

Inclusion and participation means participation in society, opportunities to influence, and a sense of belonging to a community. There are only 72 indicators in this domain. (Figure 7.)

Figure 7

Indicators of inclusion and participation by age group and data source



Indicators of **participation** provide information about religious participation and participation in political activities or in organisations, among other things. **Participation at school** is examined through indicators describing participation in common activities and opportunities to influence. Indicators measuring **societal trust** examine political interest, trust in others, and the experience of life’s meaningfulness, for example.

Main sources of data

- The **School Health Promotion Study** produces multifaceted regional and local monitoring data on the wellbeing, health, school attendance and studies of school-age children and young people, as well as on their inclusion and participation and access to help and services. The study is carried out by THL, and it examines the participation of children, especially at school.
- The statistics on **participation in leisure activities** examine the population’s leisure activities and participation in society and developments in them. Information is also produced about the balance between work and leisure and about social relationships. The data are collected through a survey and from different registers and are published approximately every ten years. The statistics, which are produced by Statistics Finland, also provide data on participating and societal trust.

- The annual **Youth Barometer** measures the values and attitudes of Finnish young people between the ages of 15 and 29. The State Youth Council publishes the barometer in cooperation with the Finnish Youth Research Network. The Youth Barometer examines the social values and attitudes of young people, for example.

Examples of indicators

- Participates in associations, %
(Study of the leisure activities of children and young people, Ministry of Education and Culture, State Youth Council and Finnish Youth Research Network)
- Good opportunities to have an influence at school, %
(School Health Promotion Study, THL)
- People are generally trustworthy, %
(Participation in leisure activities, Statistics Finland)

Strengths

- Several indicators measure participation at school.

Weaknesses and data gaps

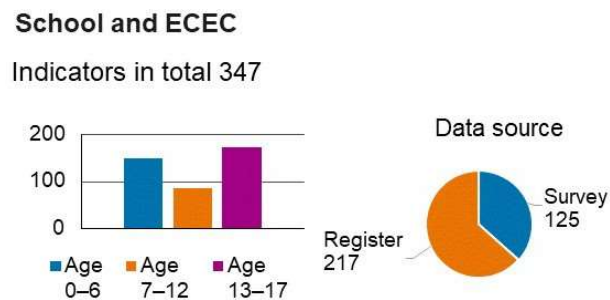
- There are no indicators describing societal trust among children under the age of 14.
- Children and young people participate and influence in society differently from adults. For example, children do not have the opportunity to influence by voting. Ways of participating and influencing could also be examined from children's perspective (e.g. participation through social media).
- Overall, the information about the inclusion and participation domain is lacking, and there are very few indicators compared to other domains.

School and early childhood education and care

Alongside home, school and early childhood education and care (ECEC) are the most important settings for a child. In 2021, 87 per cent of children aged 3–5 participated in ECEC ([Early childhood education and care, 2022](#)). The indicators in this domain are undergoing some changes following the decision to extend the compulsory education age to 18 years in 2021 and the deployment of Varda, the ECEC data repository. A total of 347 indicators related to ECEC were compiled. (Figure 8.)

Figure 8

Indicators of school and ECEC by age group and data source



The ECEC indicators are classified into indicators of participation in education/ECEC, enjoying school/ECEC and learning.

Among other things, indicators of **participation in education** describe the number of pupils enrolled in comprehensive school and upper secondary education, subject choices, absences, and the number of pupils receiving special or intensified support. Indicators of **participation in ECEC** provide information about the participation children of different ages in ECEC, including by type of ECEC and full-time/part-time status. Indicators of **enjoying school** measure enjoying going to school, coping, and satisfaction with studies, for example. Indicators of **enjoying ECEC** provide information about whether parents think their child enjoys participating in ECEC, and how parents feel the collaboration with the service provider is going. Indicators of **learning** describe motivation to study, learning during leisure time and learning difficulties.

Indicators examining the school environment can also be found in other domains. For example, bullying at school is examined in the safety domain, satisfaction with the school community in the social relationships domain, and physical activity during breaktime in the health and wellbeing domain.

Main sources of data

- The **statistics on early childhood education and care** (Statistics Finland) contain data on children who have participated in ECEC, as well as on ECEC actors and facilities. The data are obtained from the Finnish National Agency for Education's ECEC data repository (Varda) and from Statistics and Research Åland (ÅSUB). The data are published once a year.
- **Statistics Finland's various education statistics** contain data on pre-primary and basic education and post-primary education aimed at obtaining a qualification, subject choices in comprehensive school and upper secondary education, placement in further education immediately after obtaining a

qualification, and pupils in comprehensive school who have received intensified or special support, for example.

- The **School Health Promotion Study** (THL) produces multifaceted regional and local monitoring data on the wellbeing, health, school attendance and studies of school-age children and young people, as well as on their inclusion and participation and access to help and services. The survey includes questions about enjoying school, learning, and the quality of the school environment.
- The **FinChildren** survey (THL) produces data on the health and wellbeing of children under school age and their families, as well as on their experiences of services. The study collects data from parents of children aged 3–6 months and 4 years every four years. In the survey, parents are asked about the participation of their 4-year-old in ECEC, whether their child enjoys ECEC, and the parents' experiences of the collaboration with the service provider.

Examples of indicators

- Number of comprehensive school pupils by grade
(Students and qualifications, Statistics Finland)
- Children regularly participating in ECEC for at least 10 consecutive hours, %
(FinChildren survey, THL)
- Enjoys school, %
(School Health Promotion Study, THL)
- Average grades of basic education leaving certificates
(KOSKI data repository, Finnish National Agency for Education)

Strengths

- Overall, there are many indicators related to the school environment, and they provide information about participation in education, enjoying school, and social relationships in the school environment.
- Compared to other indicators, there is a particularly large amount of background variable data available on education, for example by language.
- The FinChildren survey includes a wide range of questions about ECEC to parents.
- The Varda data repository has also provided access to data on the use of private day care.

Weaknesses and data gaps

- National indicators provide only limited data on learning outcomes.
- Data on children's own experiences of ECEC or pre-primary education are not regularly collected, even though there is a need for such data. For example, in the

latest Child Barometer (Tuukkanen, 2022), only 58 per cent of children in pre-primary education said they always felt safe at school.

Housing and living conditions

The home is a key growth environment for children at any age. The resources available to the family affect the child's living conditions and material standard of living. The indicators in this domain are further classified into housing, income level, employment and material standard of living. (Figure 9.)

Figure 9

Indicators of housing and living conditions by age group and data source



More than half the indicators in this domain measure the wellbeing of families, as the financial situation and standard of living of children depend on their parents' financial situation. The financial and material wellbeing of families is measured based on both register-based and survey-based data.

A key phenomenon to monitor is child poverty. The impact of child poverty goes beyond immediate economic scarcity. Financial deprivation experienced as a child is linked to later social problems such as poor school performance (Ristikari et al., 2018). Child poverty is most common in single-parent families and in families with children under the age of three. This domain describes the causes of child poverty, such as unemployment, and its consequences, such as material deprivation.

Wellbeing is examined mainly through material deprivation and risk factors. **Housing** indicators provide information about the occupancy rate of families with children, housing quality issues and housing type, among other things. **Income** indicators describe the disposable income of families with children, indebtedness and a low income, for example. **Employment** indicators also focus on parental employment or unemployment, but this set of indicators also includes data on the employment and working of children and young people. Indicators of **material standard of living** examine the material deprivation of children and the assets of families with children.

Main sources of data

- The **statistics on living conditions** (Statistics Finland) describe the living conditions of the household population from different perspectives such as the risk of poverty or social exclusion, subjective wellbeing, livelihood, health and housing by population group. The data are collected annually through the survey on income and living conditions and are also transmitted to Eurostat for the EU Statistics on Income and Living Conditions (EU-SILC).
- The **income distribution statistics** (Statistics Finland) describe the distribution of households' annual income, income inequality and low income among different population groups. The statistics describe the amount of disposable income and its composition, taking taxation and income transfers into account. Some of the data in the statistics are based entirely on register-based aggregate data, and some on sample-based data. All income data are based on registers.
- The **statistics on households' assets** (Statistics Finland) describe the total amount, structure and distribution of assets among different population groups. The statistics are published at the household and individual level. Household-level data are published approximately every three years, and individual-level data approximately every year.

Examples of indicators

- At-risk-of-poverty rate for children
(Income distribution statistics, Statistics Finland)
- Household-dwelling units with children living in overcrowded conditions, percentage of all households with children
(Dwellings and housing conditions, Statistics Finland)
- Unemployment in the family in the last 12 months, %
(FinChildren survey, THL)
- Cannot afford a week's holiday away from home at least once a year, %
(Statistics on living conditions, Statistics Finland)

Strengths

- The indicators in this domain provide a comprehensive picture of the resources available to families and of children's home environment at the material level. As the unit to be measured is the family instead of the child, data are also available on families with young children.
- The main data sources in this domain are updated annually.
- Background variables are available (number of guardians in the family, number of children, regional data, age of the child) for key indicators.
- The domain includes indicators that provide information about the underlying causes of child poverty, such as indebtedness, employment and family type.

- Indicators of integration provide information about the occupancy rate and low income of children with foreign background.

Weaknesses and data gaps

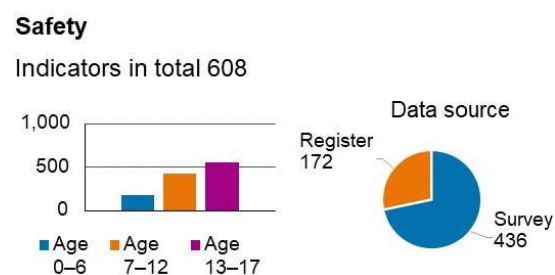
- The child’s perspective is largely missing. Most of the indicators describe the situation of families. For example, most of the survey-based indicators that describe children’s living conditions are based on surveys aimed at the parents of the children. For example, there are no indicators that describe children’s own perception of their quality of life, poverty, or scarcity of material wellbeing.
- More continuous indicators are needed of the different types of living arrangements of children, such as alternating homes due to shared parenting. Shared parenting is challenging from a statistical perspective, as currently only one home address can be recorded for a child in the Finnish Population Information System (for the statistical challenges related to shared parenting, see [Okkonen, 2022](#), and [Hanifi & Nieminen, 2022](#)).

Safety

This domain extensively examines children’s safety in different settings and situations. The safety domain is the most comprehensive in the reference model and comprises a total of 608 indicators. (Figure 10.)

Figure 10

Indicators of safety by age group and data source



Indicators of **violence and crime** examine violence experienced in different settings, violence committed by children, children who are victims of crimes and crimes committed by minors. Indicators examining **experiences of sexual violence and harassment** describe not only harassment and violence but also sexual experiences with adults, victims of sexual offences and minors suspected of committing crimes. Indicators of **safety in intimate relationships and at home** cover topics such as disciplinary violence, psychological, physical and sexual violence experienced at home, violence experienced or committed by minors in intimate relationships, parental neglect or harmful substance use, and violence against other family members at home. In the area of school safety, information is collected about children who

have **experienced bullying**, about the consequences of reporting bullying, as well as about the bullies. Indicators of **accidents** include indicators of safety behaviour, school-related accidents, road traffic accidents, accidental deaths, and poisonings.

Main sources of data

- The **Child Victim Survey** is based on a nationally representative sample and is aimed at children and young people. It examines extensively the experiences of children and young people in different areas of life and living environments ([University of Tampere](#)). The indicators included in the present dataset are based on the 2013 survey.
- The **statistics on offences and coercive measures** (Statistics Finland) describe crime by region and coercive measures taken by the police, Customs and the Border Guard. The data are obtained from the Ministry of the Interior's police information system (PATJA). The data are published quarterly and annually.
- The **Finnish Self-Report Delinquency Study** (Institute of Criminology and Legal Policy) collects information about the criminal behaviour of Finnish ninth-graders, i.e. children aged 15–16. The study forms a national indicator system of overall youth crime and provides a comprehensive picture of the prevalence of youth crime and victim experiences, as well as changes in them. The study is carried out every four years.

Examples of indicators

- Number of minors suspected of robbery
(Statistics on offences and coercive measures, Statistics Finland)
- Victims of sexual harassment by an adult in the last year, %
(Finnish Self-Report Delinquency Study, Institute of Criminology and Legal Policy)
- Percentage of 6th grade pupils who have experienced frequent severe parental violence before the age of 12, %
(Child Victim Survey, the implementer varies)
- Road traffic deaths among population aged 1–17 per 100,000 persons of the same age
(Causes of death, Statistics Finland)

Strengths

- In terms of experiences of violence, the survey-based and register-based data reinforce each other. Register-based and survey-based data are available on both violence experienced by children and criminal behaviour of children.

Weaknesses and data gaps

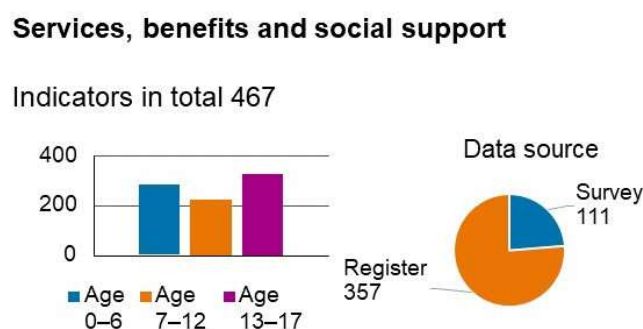
- The Child Victim Survey, which examines children’s experiences of violence, is not carried out regularly. Funding for the survey is uncertain, and the implementer varies. The most recent Child Victim Survey was carried out by the University of Tampere as a measure of the National Child Strategy, and the results will be published in 2023.
- The description of the safety of the home environment focuses on experiences of violence. In contrast, little information is available about other forms of neglect and insecurity at home.
- Children are not asked about their own experiences of safety in different environments. The subjective experience of safety is not only about the absence of threats, but it is built on trust in people around you.

Services, benefits and social support

The **services** described in this domain include both specialised and primary healthcare services and social services. Social security **benefits** for children and families include benefits for families with children, rehabilitation benefits and disability benefits. **Other social support** includes youth shelters, helplines and outreach youthwork. (Figure 11.)

Figure 11

Indicators of services, benefits and social support by age group and data source



A large proportion of social benefits and social and health services is targeted at children of all ages or families with children, which is why the indicators in this domain also cover young children. There are a total of 467 indicators in this domain. The indicators are mainly register-based and cover all age groups evenly.

The division of the indicators of services and benefits received from society into those describing protective factors/wellbeing or risk factors/illbeing does not work as well in this

domain as in the other domains of the wellbeing reference model. It might be more meaningful to divide the indicators into preventive and universal, supportive and temporary, and corrective indicators, in line with the traffic light model.

Main sources of data

- The **statistics on specialised healthcare** (THL) are based on care notifications collected annually from healthcare units using the personal identity code.
- The **statistics on primary healthcare** (THL) contain data on the functioning of primary healthcare based on the data in the Care Register (HILMO).
- **Kela statistics** contain key data on paid social security benefits.
- The **FinChildren** survey produces data on the health and wellbeing of children under school age and their families, as well as on their experiences of services. The study collects data from parents of children aged 3–6 months and 4 years every four years. In this domain, the FinChildren indicators provide information about the services used by young children and their families and their need for support.

Examples of indicators

- Children aged 0–17 placed in care during the year as a percentage of total population of the same age
(Register of Child Welfare, THL)
- Recipients of disability allowance (increased and highest rate) per 100,000 persons of the same age
(Statistics on Kela's disability allowance)
- Phone calls answered in the Poikien Puhelin helpline for boys
(Annual Report on Poikien Puhelin, Väestöliitto)

Strengths

- Statistics on services and benefits are up to date, and data are available by gender, age, region, etc.
- Indicators of services, benefits and social support provide information about vulnerable groups, including children with disabilities and families receiving social assistance.

Weaknesses and data gaps

- The indicators of services describe not only the demand for services but also their availability. For example, the increase in the number of child welfare notifications cannot be seen only to reflect an increase in general illbeing, but changes in the child welfare notification practices and reporting sensitivity must also be taken into account.

- No data are available on the services and benefits applied for but not yet implemented in full or in part.
- To get a complete picture of child welfare services, information is needed not only about child welfare caseloads and child welfare notifications but also on the reasons for becoming a child welfare services customer.

Demographic indicators

Demographic indicators are needed to provide background data on the child population and families in Finland. A total of 168 demographic indicators describe children and families in this domain. The demographic indicators cover all individuals aged 0–17, with the exception of data on new-borns and a few other indicators. (Figure 12.)

Figure 12

Demographic indicators by age group and data source

Demographic indicators

Indicators in total 168

Data source



Main sources of data

- The **population statistics** (Statistics Finland) provide information about the number of children by age, language or country of origin, children born and families, for example.
- Among other things, the **statistics of the Finnish Immigration Service** include data on the number of residence permit applications and decisions by age group and nationality, as well as data on the deportation and removal of minors.

Examples of indicators

- Number of children aged 0–17 in single-parent families, Statistics on families, Statistics Finland
- Number of asylum applications of unaccompanied minors, Statistics of the Finnish Immigration Service

Strengths

- Finland has well-functioning and comprehensive population registers in place.

Weaknesses and data gaps

- Only one native language can be recorded for a child in the Population Information System. This means that bilingualism is not covered in the statistics.
- Only children who have a municipality of residence in Finland are counted in the population. Demographic data are therefore unavailable for asylum seekers, children living in Finland with a residence permit for less than a year and undocumented children.

4. Blind spots in knowledge about children

One of the tasks of the measure was to identify the blind spots in knowledge about children. This was done in several ways during the work. This section describes the efforts to identify the data gaps, as well as the key findings that emerged.

In May 2022, a workshop on data gaps was organised. The participants included people who used child data in their work and representatives of various children's organisations. There were a total of 30 participants from 23 different organisations. The workshop explored what type of data the participants used in their work, the data gaps they had identified and the data needed on vulnerable groups of children.

Measure 24 of the National Child Strategy collaborated with Measure 25, led by the Ministry of Finance. The aim of Measure 25 was to create models to promote the implementation of child-oriented budgeting and the monitoring of outcome data in municipalities and wellbeing services counties. The survey of regional operators carried out under Measure 25 also included questions related to the work in Measure 24. The questions concerned the identified gaps in knowledge about children and young people, and what kind of data is needed. Forty responses were received in the survey.

Information about data gaps was also obtained in various stakeholder meetings. For example, the implementers of the measure met with representatives of the Sámi Parliament, participated in the work of the working group on the knowledge base on violence against children and met with various actors involved in child wellbeing projects.

Data gaps were also identified during the compilation of the indicators and the preparation of the roadmap.

Data gaps

The mapping of blind spots revealed a range of issues in the knowledge base. The problems discussed below were highlighted in several data sources during the exercise.

First, **an uneven amount of data is available on different groups of children**. A relatively large amount of data is available on the wellbeing of children over the age of 10. Although information is unevenly distributed across the different wellbeing domains, it is still sufficient to produce a comprehensive picture of the wellbeing of teenagers.

However, the younger the children, the less information is available. Because of their cognitive development, it is difficult to conduct surveys targeted at children under school age, and impossible in the case of infants ([Haanpää, Toikka & af Ursin, 2020](#)). No continuous subjective wellbeing data are collected from young children themselves; these surveys are

always targeted at the parents of the children. This means that these surveys capture the parents' assessment of their child's wellbeing, rather than the child's own experience.

There are also groups of older children for whom subjective wellbeing data are not available in the same way as for others. For example, surveys carried out in schools exclude children who have difficulty answering questions because of their poor language skills or functional limitations. These are precisely those children who are considered to be in a vulnerable position, and whose wellbeing would benefit from more information.

As responding to surveys is challenging for these children, what kind of subjective data on vulnerable groups of children is needed requires careful consideration. It is important to pinpoint the differences in wellbeing between different age groups or groups of children speaking different languages, for example. On the other hand, wellbeing needs may differ between groups of children, for example because of age, functional limitations or placement outside the home. Rather than focusing on quantity, it would be more useful to only select a few key indicators to monitor. Those indicators should also take into account the children's own perception of their wellbeing. In addition to traditional surveys, new research methods need to be developed. For example, cognitive testing of surveys can ensure in advance that the questions are understood as intended.

Second, **the knowledge base does not always describe the key phenomena of wellbeing.** On the one hand, the production of wellbeing data is fairly well established but on the other hand, it can be somewhat slow. As a result, indicators react slowly to the rapid changes in the modern world. In some cases, making changes also requires legislative changes, and these take time. For example, although families have become more diverse, the different family situations are not visible in the statistics ([Keski-Petäjä, 2019](#), [Keski-Petäjä & Pietiläinen, 2020](#), [Lipasti & Pietiläinen, 2020](#)). There is also a need for more information about shared parenting or the dwelling and living conditions of non-custodial parents, for example ([Hanifi & Nieminen, 2022](#), [Okkonen, 2022b](#)).

In particular, the change in almost all areas of wellbeing caused by the digital transformation is not reflected in the wellbeing indicators. Currently, indicators relating to the internet, social media or screen time focus on leisure. However, children are already using digital devices in ECEC and at school. More information is therefore needed on topics such as maintaining social relationships online. How children and young people behave online differs from adults' online behaviour. It is therefore important to involve children and young people in the discussion about the impact of the digital world on wellbeing and illbeing.

The difficulty of combining data also affects the interpretation of wellbeing phenomena. Experts have long been concerned about the accumulation of illbeing in children ([Autio, Eräranta & Myllyniemi, 2008](#)). However, the existing indicators shed no light on who is facing these problems or the nature of those problems. During the measure, it became clear that

more information is needed about children with several service contacts in social services and healthcare and about the accumulation of risk factors for illbeing.

The third major blind spot is the **lack of background variables of data**. The availability of background variables varied greatly. Stakeholders highlighted a need for more background variables on both the children themselves (e.g. information about language, foreign background, functional limitations) and their parents (educational background, socioeconomic status, etc.).

The majority of child wellbeing indicators have some kind of regional classification, but there are also challenges with this background variable. The challenges differ for large towns and small municipalities. In large towns, data may be needed for areas that are smaller than the postal code areas, while in smaller municipalities, data may not be available due to the small number of respondents.

Some of the producers of child wellbeing data wished for the possibility to **combine survey-based and register-based data**. This would make it possible to combine broader background variable data with subjective wellbeing data.

Another key problem with child wellbeing data is the **usability of the data**. Already in the early stages of the measure, it became clear that although a wealth of information is available, it is scattered in many places. Indicators from different data portals and data sources are available with varying background variables and regional data, which makes comparison difficult. In addition to fragmentation, other challenges were reported regarding the use of data.

On several occasions, regional actors reported difficulties in comparing regional data. Each region can select its own monitoring indicators, which makes it difficult for municipalities to carry out comparisons, for example. In addition, municipalities and wellbeing services counties use different indicators. The fear is that this could complicate joint data collection and comparison in the future. The regional actors consider that it would be more useful to have commonly agreed indicators for monitoring wellbeing data, including comparative cost data.

Ideally, the production of data, including data on children, should be much faster in different contexts. Data on the use of services can be produced quickly, but there is an inherent delay in obtaining data on the effectiveness of measures. This is particularly true for subjective wellbeing data, as the analysis and reporting of survey data takes time.

Lastly, there are **issues related to the interpretation of wellbeing**. In particular, the key indicators describing children often measure illbeing. More information is needed about wellbeing, such as coping and inclusion and participation.

The lack of children's own perspective on their wellbeing was also seen as a problem. Child wellbeing studies are often based on previous studies on the wellbeing of adults. However, child wellbeing cannot be fully understood solely based on indicators created for adults. Information about children's own views on matters important to their wellbeing is severely lacking. It is difficult to capture the lives of young children using indicators created with adults in mind. For example, the existing indicators do not measure play or care. To ensure inclusion and participation, it is important that children are heard, both when selecting the wellbeing indicators and when producing wellbeing data.

Information about vulnerable children is severely lacking

A particular focus in the measure was information about vulnerable children. The previous work on indicators had already identified a severe lack of information in this area. Vulnerable children are at a higher risk of an accumulation of illbeing, making it essential to have access to sufficient information about their wellbeing.

The gaps in knowledge concerning vulnerable children can be divided into two main categories. First, either there are no figures available on all groups of children, or the data are updated very rarely. Second, there is a lack of continuous data on the wellbeing of vulnerable children.

In the indicators collected here, vulnerable children are mainly visible in the reporting of the numbers of specific groups. For example, surveys may ask about the origin or functional limitations of the child. On the other hand, registers may examine the number of children placed outside home or the number of children receiving disability services. However, disability benefits, child welfare services or asylum decisions only give a general picture of certain groups of children in need of special protection. As mentioned earlier, the use of services and other social support is affected not only by the need for support but also by factors such as accessibility. Stakeholder meetings also highlighted the need for information about rejected benefit or service applications.

It is difficult to estimate the size of different groups of vulnerable children with the current knowledge. Some of the data gaps result from data legislation. For example, this is the case with the number of Sámi and Roma children, as the law prohibits the collection of data based on ethnicity. Data on other particularly vulnerable groups of children may exist in registers, but they have not been compiled in statistics. Such groups include children of prisoners, children who have lost a parent or children who have left their placement without permission.

Another large gap in the data on vulnerable children is the lack of wellbeing data by background variables. For example, little is known about the everyday life of disabled children. In addition, scarcely any continuous indicators describe the wellbeing of vulnerable children. Their wellbeing is often investigated in individual studies. Furthermore, changes in wellbeing cannot be observed because the indicators do not form a time series.

Another challenge is that vulnerable groups of children are often quite heterogeneous. Differences within groups can make measuring wellbeing difficult. For example, the socioeconomic status of immigrant families varies greatly, depending on the country of origin. Data needs may also vary greatly within a group, but the smaller the group, the more difficult it is to obtain information.

The problem of the lack of data on the wellbeing of vulnerable children is difficult to solve completely. Earlier in this section, we also addressed the challenges related to surveys. High-quality data must be reliable. When conducting a survey, it must be ensured that there is a sufficient number of respondents, and that the respondents have understood the questions correctly. In addition, data protection must be taken into account. If the number of respondents is very small, the results cannot be published.

5. Challenges in the current state of knowledge about children

The previous sections described the current state of the knowledge base on child wellbeing. The mapping work highlighted many challenges concerning the current state of the knowledge base. The challenges in the knowledge base can be summarised in eight themes.

The first theme relates to the extent of the knowledge base. The large number of child wellbeing indicators, more than 2,400, shows that a wealth of information is available about children. However, this **information is very scattered**. The fragmentation of data is reflected in the usability of the data. Information that is scattered in multiple places is difficult to use and makes it difficult to create an overall picture of the state of children's wellbeing.

Information about children is scattered because there are so many data producers. The main data producers are THL, Statistics Finland, universities and Kela. Other data producers include research institutes, higher education institutions, and the central government and local administrations. Because there are so many data producers, different aspects of data are available on websites and in the publications of multiple actors. This is inconvenient from the user's perspective because finding the right information requires expertise and knowledge of the different data producers.

Another finding is that although a lot of information is available, there are clear gaps in the knowledge base. The lack of information is clearer among certain groups of children such as immigrant or disabled children, children under school age, or sexual and gender minorities. This is regrettable because more information is needed about these particularly vulnerable children, both in terms of monitoring the implementation of the rights of these children and identifying and targeting services.

The third point is related to the coordination of data production. It is clear that there is no single body that coordinates the production of data on children. This lack of coordination is reflected in many ways in the state of the knowledge base. On the one hand, a lack of coordination leads to data gaps, where no particular body is responsible for satisfying specific data needs. On the other hand, it can lead to overlapping data. Different surveys ask the same questions in slightly different words, thus creating an unnecessary burden on respondents. Due to the long-term nature of the work, sufficient resources should be allocated to coordination.

Fourth, there is limited cooperation between data producers. This lack of cooperation leads to a situation where some data producers compete for the same data resources. This especially applies to schools and data collections organised in schools. According to reports, schools find implementing various surveys somewhat burdensome in their daily school life because the surveys always involve informing parents and dealing with data protection and authorisation procedures.

The fifth point is related to the continuity of data. **In many cases, the continuity of data is not guaranteed**, but it depends on the resources available. In Finland, there are currently only a few subjective child wellbeing indicators whose continuation is secured with funding.

The sixth key aspect describing the knowledge base on children is the **poor combinability of the data**. Because the information is scattered in multiple places, it is difficult to combine different data sources. When one data producer has access to variables that measure subjective wellbeing and another to variables that expand the possibilities of using the data, but these data are not combined, the possibilities of using the data become limited.

Furthermore, the needs for regional-level data are currently insufficiently met. Such data would enable the monitoring of the development of child wellbeing, the use of services and resources, and costs at the regional level. In addition, comparative regional-level data is needed to identify good practices better within the reference group and to exchange experiences between regions.

In addition to the above factors describing the current state of the knowledge base, one more point should be raised. In Finland, **a lot of information about children's wellbeing is collected at maternity and child health clinics and in school healthcare. This information is used in healthcare for monitoring child wellbeing. However, it is not used at the national level to create an overall picture of the state of children's wellbeing.** The usability of the data for research purposes has previously been investigated by THL (see e.g. [THL, 2022](#), [KTL, 2008](#)), but the overall picture should be clarified. The information collected at maternity and child health clinics and in school healthcare forms an untapped data resource, the use of which would significantly improve the state of the knowledge base.

Some of the above aspects of the state of the knowledge base have already been discussed previously, for example, in the report on the [National Indicators of Child Wellbeing](#) (2011). However, many of the issues that were raised at the time have not been followed up.

There is a lot of use for information about children. Monitoring children's wellbeing is important because childhood experiences are reflected well into adulthood. Many resources are also invested in children through education and healthcare. The improvement of the knowledge base is therefore of paramount importance, and efforts should be made to continue this work in the future.

6. Proposals for action to improve the knowledge base on children

The implementation of Measure 24 – the overall description of the knowledge base, the identification of blind spots and the designing of the data portal – has highlighted clear needs for development. The state of the knowledge base on children could be improved through several measures described below.

The production of child data needs to be coordinated. Finland should have a body that regularly monitors the state of the knowledge base on children. The coordinator's role should also include ensuring that the knowledge base is improved so that blind spots are covered, and data needs are met. This would be done in close cooperation with the different data producers in a designated coordination group. The coordinator, with the coordination group, would be responsible for creating an updated picture of the state of the knowledge base on children, as well as for planning how the knowledge base should be developed and making related proposals.

The data coordination should also aim to **investigate opportunities for closer cooperation in the collection of survey-based data.** For example, could the data needs be covered with fewer surveys than the current 15 surveys? Only eight of these 15 surveys concern children and/or young people. Examining the data content of the surveys as a whole suggests that data collection resources could be cut. At the same time, this would help avoid overlapping data collection, reduce the burden on respondents and minimise competition for data resources. It would also free resources for data analysis and data use and would enhance cooperation between experts in different fields.

Opportunities and barriers to using previously untapped data for secondary purposes should also be investigated. Untapped data refers to the main potential sources of data for secondary purposes, such as data collected at maternity and child health clinics and in school healthcare. These data are collected primarily for monitoring children's health and for use by healthcare professionals. However, at least some of this information could also be used to monitor the wellbeing of children and to produce reliable monitoring indicators. This would be a reliable source of data because the data are collected by professionals, and sufficient guidance could also ensure consistency in data registration.

The data collected at maternity and child health clinics and in school healthcare would be valuable because data are collected on the entire age group in principle. This would also allow better monitoring of the state of wellbeing of vulnerable children, while respecting data protection requirements. Furthermore, access to the data would save resources on data collection elsewhere, as there would be less need to organise separate data collections than currently. The mapping work could be carried out by the data coordination group.

In terms of the improvement of the knowledge base as a whole, the main thing would be to compile knowledge about children as comprehensively as possible in a single data resource to create a child data repository. If all data were combined in a single data repository, the accessibility of the data would significantly improve. In principle, the data repository would contain comprehensive background data. The possibility to combine register-based and survey-based data would also enable more detailed analyses of children's wellbeing. The data repository would also provide more information about the situation of vulnerable children or the impact of the socioeconomic status of families on the childhood environment, for example. In addition, it would significantly expand the opportunities to use the data in research and reporting.

Building a data repository would also improve the production of regional-level data on child wellbeing, as comprehensive regional data would be available as background variables.

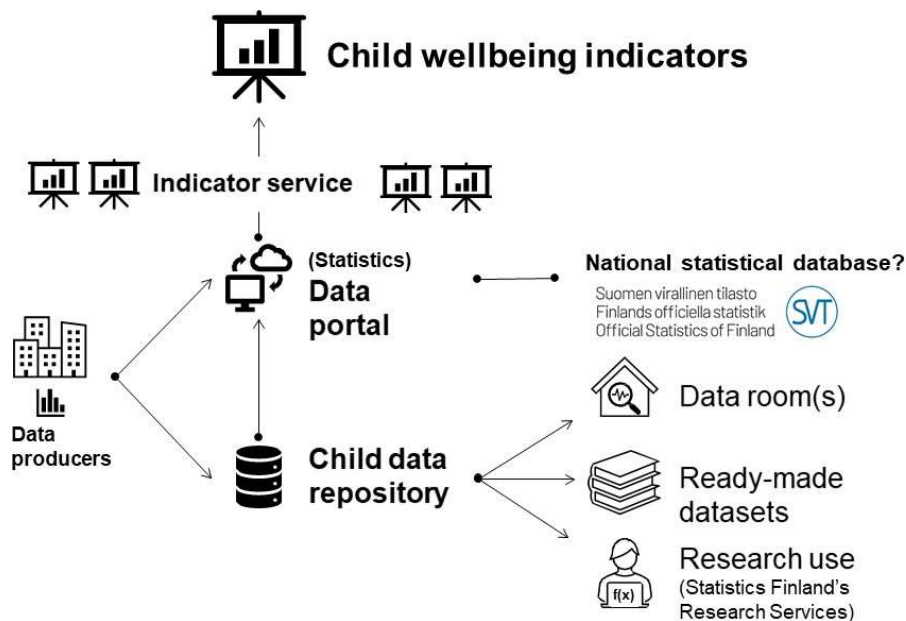
Regarding register-based data, efforts should be made to harmonise the definition and measurement methods of the key wellbeing indicators. This would support the regions in monitoring child wellbeing, allocating resources and adopting good practice, both at the municipal level and at the level of wellbeing services counties. The need for common indicators has also been highlighted in a report on child-oriented budgeting ([Ministry of Finance, 2022](#)). The use of cost data of municipalities and wellbeing services counties should also be developed with the regions. Currently, data on the costs of child and family services are currently very limited.

Of course, easy access to information is essential. We therefore propose **that a data portal for child wellbeing indicators be built that is linked to the child data repository.** One of the bottlenecks of data portals is the updating of data, which often has to be done manually. A data portal that relies on manual updating is not a sustainable solution, as such portals often fail due to a lack of resources. Instead, a data portal connected to a data repository could be automatically updated. This means that the data portal would be updated whenever updated data were entered in the data repository.

The architecture of the technical solution is illustrated in Figure 13 below. Ideally, the data resources of the different data producers would be combined in a shared data repository. A child data portal could then be built on the data repository. The data portal would be linked to an indicator service, which would enable the publication of the child data portal (Child wellbeing indicators).

Figure 13

Illustration of the architecture of the child data repository and the indicator website



Qualitative data and links to individual reports could also be added to the portal. This would further strengthen the knowledge base on children and make it easier to find information about vulnerable children, for example.

If Statistics Finland were selected to host the child data reserve, it could also create ready-made datasets for use in research and reporting. The data repository would enable more effective use of the data to support policymaking and to provide researchers with customised datasets.

Overall, the improvement of the knowledge base is a process which should start with the designation of the coordinating body and the establishment of the coordination group. To be successful, the improvement of the knowledge base on children requires extensive cooperation between experts, research institutions, ministries and agencies. The work depends on good and innovative cooperation between the different data producers to achieve a workable outcome.

7. Indicator website

One of the tasks of Measure 24 was to outline a child data portal, its implementation method and its content, as well as the implementation schedule. In practice, this meant considering where the indicator website for data on child wellbeing should be located, and what technical solutions should be used. When considering different options for the site, the view of the measure's steering group, the implementers and those responsible for the renewal of Statistics Finland's website was that Statistics Finland's web services would be a natural location for the indicator website.

The implementation of Measure 24 of the National Child Strategy and the design of Statistics Finland's indicator website coincided. Statistics Finland is in the process of renewing its website. One of the tasks on the agenda in the autumn of 2022 was to design a website for the production and publication of indicators.

Combining the two projects had both beneficial and limiting effects on the website redesign and the National Child Strategy measure. The projects were combined so that the sets of indicators identified in the National Child Strategy measure could be used to pilot the redesign team's user interface design. The ready-made indicator sets made the work of the user experience designer easier, as the sets could be used in the design work to help identify which indicator sets would be easy to find and access and would be interesting and necessary from the end users' perspective.

The design of the user interfaces of the indicator service and the underlying technical solutions were based on feasibility. The designs are therefore based on existing open database interfaces. Without a clear link to a specific site and its constraints, the interface design of the indicator site could remain detached, and its feasibility could not be ensured. The aim was that the interface design would be realistic and feasible to implement.

Statistics Finland's own site constraints determine the functionalities and visual look of the website. The design in the pilot phase was therefore primarily based on the child data in the databases of Statistics Finland. The starting point for the implementation is to use data available in databases and the possibility to use interfaces, which allows the automation of the data content update process. Automatic updating of the data content via open interfaces would ensure the continuity of the site, as sites based on manual updating often fail due to a lack of resources. In principle, the site will therefore not support the importing of data in Excel format, for example. The inclusion of child wellbeing indicators other than those produced by Statistics Finland would require the use of shared databases and interfaces.

More detailed specifications determining the use of interfaces and the requirements for the data provided through them should be developed in a follow-up project. Combining data from other data producer organisations on the website will be resolved later if the construction of

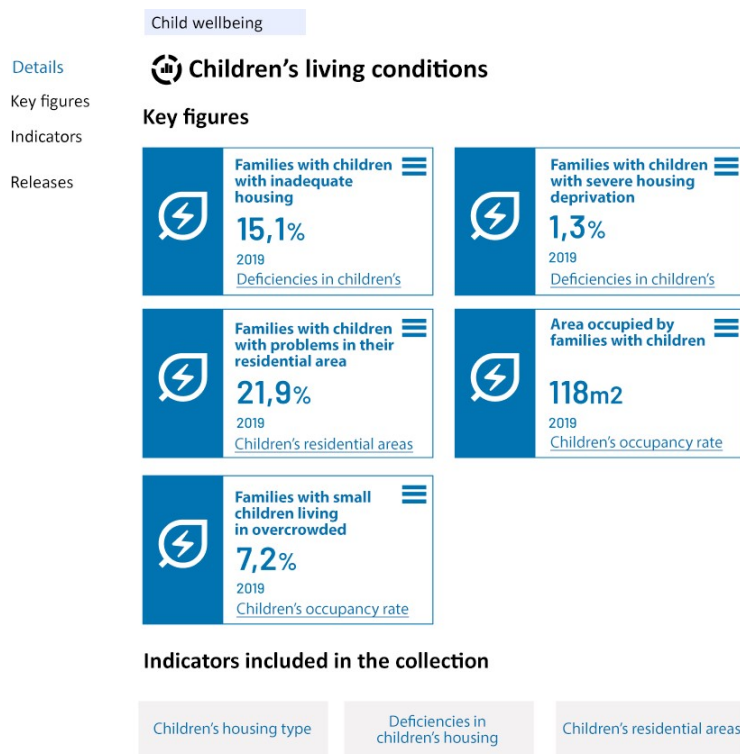
the indicator website for child data is to be pursued. However, this work will require additional resources. A precise schedule for creating a service that includes all the key indicators of child wellbeing cannot yet be determined, as the work would first require the harmonisation of data and implementation of shared interfaces.

Figure 14 illustrates what the indicator website could look like, and how it would be structured. The example view presents indicators of children’s living conditions. It should be remembered that this is a pilot interface design, and the work is still at a very early stage. However, regarding the objectives of Measure 24, it has already been possible to think about the technical solutions for the presentation of the data.

The preliminary design of the indicator website is based on the idea of displaying 20–30 key indicators per wellbeing domain. The view may contain key figures, graphs and/or tables. The indicators for the pilot may be selected from those that are available in Statistics Finland’s existing database tables. Database tables can include a large number of different indicators with different background variables. The aim is to make data available on the portal at multiple levels. For example, the user could check only the key indicators but could easily find more detailed data by background variable if necessary. The visual design is still at the conceptual stage.

Figure 14

Illustration of the view of the indicator website



Details

Figures

Database tables

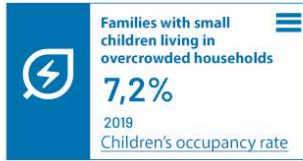
Statistics

Collections:

Children's living conditions

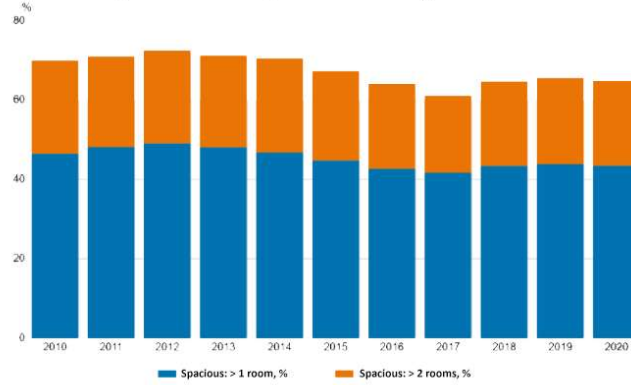
Children's occupancy rate

Key figures



Figures

Spacious living conditions among household-dwelling units with children



Sources: Statistics Finland, Statistics on living conditions

8. Summary

This report presents the main outputs of Measure 24 of the National Child Strategy. More than 2,400 child wellbeing indicators were identified. Despite the abundance of information, there are blind spots in the knowledge base on children. They concern vulnerable children and children under school age in particular. In the measure, the following proposals for action to improve the knowledge base on children were made:

- The production of child data should be coordinated.
- Cooperation on the collection of survey-based data should be enhanced.
- Opportunities and barriers to using untapped data for secondary purposes should be identified.
- Regarding register-based data, efforts should be made to harmonise the definition and measurement methods of the key wellbeing indicators at the regional level.
- A child data repository should be created.
- A data portal for child wellbeing indicators that is linked to the child data repository should be constructed.

Data gaps and development needs have already been highlighted previously in various contexts, and individual projects have been carried out to develop knowledge about children. Many actors have their own aspirations and goals in this area. However, child wellbeing is a very broad subject area, both in terms of data content and how the data are produced. A comprehensive change cannot be achieved through individual efforts, but close cooperation between different actors is needed to achieve the objectives. The first step should be to bring together experts on child data to set common objectives and measures to achieve them.

Inclusion and cooperation should also be extended to children. Currently, the knowledge base on child wellbeing does not sufficiently take into account children's own perspective on their wellbeing. In addition, not all children are able to report on their wellbeing in surveys. The right of the child to be heard should also apply to information about children.

Literature

- Autio, M., Eräranta, K. & Myllyniemi S. (2008) [Polarisoituva nuoruus? Nuorten elinolot-vuosikirja](#). Hakapaino Oy. Helsinki.
- Haanpää, L., Toikka, E. & af Ursin, P. (2020) [Alakouluikäisten lasten moniulotteinen elämäntyytyväisyys Suomessa](#). Yhteiskuntapolitiikka 85.
- Hanifi, R. & Nieminen, T. (2022) [Kaksi kotia 110 000 lapsella – joka kolmas asuu yhtä paljon molemmissa](#). Tieto & trendit, Tilastokeskus
- Junttila, N. (2010) [Social competence and loneliness during the school years - Issues in assessment, interrelations and intergenerational transmission](#). Annales Universitatis Turkuensis B 325.
- Keski-Petäjä, M. (2019) [Tilastoja naisista, miehistä ja heteropareista? – Miksi moninaisuus jää virallisissa tilastoissa usein piiloon](#). Tieto & trendit, Tilastokeskus.
- Keski-Petäjä & Pietiläinen (2020) [Miltä lasten Suomi näyttää tilastoissa? – Lasten määrä ja osuus väestössä historiallisen pieni](#). Tieto & trendit, Tilastokeskus
- KTL (2008) Mäki, P & Laatikainen, T & Koponen P & Hakulinen-Viitanen T & LATE-työryhmä: [Lasten ja nuorten terveysseurannan kehittäminen](#). Kansanterveyslaitoksen julkaisuja B 28/2008.
- Lahtela, J. (2022a) [Joka viides poika lukee heikosti – ero tyttöihin Suomessa OECD-maiden suurin](#). Tieto & trendit, Tilastokeskus
- Lahtela, J. (2022b) [Valtaosa tytöistä harrastaa liikuntaa urheiluseurassa jossain vaiheessa lapsuutta – haavoittuvassa asemassa olevat vähiten](#). Tieto & trendit, Tilastokeskus
- Lahtela, J. (2022c) [Lasten hyvinvoinnin mittaaminen ei ole yksinkertainen tehtävä](#). Tieto & trendit, Tilastokeskus
- Lipasti & Pietiläinen (2020) [Sateenkaariperheiden määrä kasvaa – osa perheistä jää tilastoissa yhä piiloon](#). Tieto & trendit, Tilastokeskus
- Muukkonen, T. (2019) [Lapset tietävät, mitä hyvinvointi on!](#) Lapsenoikeudet.fi, Lastensuojelun keskusliitto.
- OECD (2021) [Measuring What Matters for Child Well-being and Policies](#). OECD Publishing, Paris.
- Okkonen, K-M. (2022a) [Kotitalouksien häilyvät rajat – eroperheiden lasten asumisjärjestelyt haastavat tilastointia](#). Tieto & trendit, Tilastokeskus.
- Okkonen, K-M. (2022b) [Lasten vuoroasumisen huomioiminen tarkoittaa kuvaa perheiden tulotasosta](#). Tieto & trendit, Tilastokeskus.
- Opetus- ja kulttuuriministeriö (OKM) (2011) [Lasten hyvinvoinnin kansalliset indikaattorit. Tavoitteena tietoon perustuva lapsipolitiikan johtaminen](#). Opetus- ja kulttuuriministeriön työryhmämuistioita ja selvityksiä 2011:3.
- Pietiläinen, M. (2022): [Suomen lapset – vähenevä mutta moninaistuva joukko](#). Tieto & trendit, Tilastokeskus.
- Poikolainen, J. (2014) [Lasten positiivisen hyvinvoinnin tutkimus – metodologisia huomioita](#). Nuorisotutkimus 32:2.
- Pärnänen, A. (2022) [Lapsi-indikaattorit samaan paikkaan – missä mennään?](#) Tieto & trendit, Tilastokeskus
- Ristikari, T., Keski-Säntti, M., Sutela, E., Haapakorva, P., Kiilakoski, T., Pekkarinen, E., Kääriälä, A J., Aaltonen, M., Huotari, T., Merikukka, M., Salo, J., Juutinen, A., Pesonen-Smith, A. & Gissler, M. (2018) [Suomi lasten kasvuympäristönä : Kahdeksantoista vuoden seuranta vuonna 1997 syntyneistä](#). Raportti. THL, Helsinki.
- Sääkslahti A., Mehtälä, A, & Tammelin, T. (2021) [Piilo – Pienten lasten liikunnan ilon, fyysisen aktiivisuuden ja motoristen taitojen seuranta. Kehittämävaiheen 2019–2021 tuloraportti](#). Liikunnan ja kansanterveyden edistämissätiö Likes

- THL (2022) Laitinen U., Jääskeläinen S. & Vuorenmaa M. [Lasten ja nuorten terveystarkastusten tuottama tietopohja vuonna 2022](#). Tutkimuksesta tiiviisti 43/2022. Terveyden ja hyvinvoinnin laitos, Helsinki
- Tilastokeskus (2000) Suomalainen lapsi. Tilastokeskus
- Tilastokeskus (2007) Suomalainen lapsi. Tilastokeskus
- Tilastokeskus (2022) [Varhaiskasvatus](#). Verkkojulkaisu Viiteajankohta: 2021.
- Tuukkanen, T. (2022) Lapsibarometri 2022. ”[Jos joku on mun lähellä, silloin mä en pelkää](#)” – lasten [näkemystietoja turvallisuudesta](#). Lapsiasiavaltuutetun toimiston julkaisuja 2022:9
- Valtioneuvoston kanslia (VNK) (2021) [Kansallinen lapsistrategia : Komiteamietintö](#) Valtioneuvoston julkaisuja 2021:8
- Valtioneuvoston kanslia (VNK) (2021) [Kansallisen lapsistrategian toimeenpanosuunnitelma. Valtioneuvoston periaatepäätös](#). Valtioneuvoston julkaisuja 2021:81
- Valtiovarainministeriö (2022) [Kuntien ja hyvinvointialueiden lapsibudjetointi ja toteumatietojen seuranta sekä raportointi: Selvityshenkilöiden raportti](#). Valtiovarainministeriön julkaisuja 2022:55
- [Varhaiskasvatus](#) (2022) Tilastokeskus. Helsinki.

Children in Finland articles

- Hanifi, R. (2022) [Lapset lukevat aiempaa vähemmän kirjoja – netissä ja somessa lukutaito määrittyy uudelleen](#). Tieto & trendit, Tilastokeskus.
- [Hanifi, R. & Nieminen, T. \(2022\) Kaksi kotia 110 000 lapsella – joka kolmas asuu yhtä paljon molemmissa](#). Tieto & trendit, Tilastokeskus.
- [Huomo, M. \(2021\) Kouluverkosto harvenee – koulumatkat pitkiä etenkin Pohjois-Suomessa](#). Tieto & trendit, Tilastokeskus.
- [Huomo, M. \(2021\) Lapset muuttavat erityisesti ennen koulu-ikää – korona ei vienyt kehys-kuntien vetoa](#). Tieto & trendit, Tilastokeskus.
- [Junes, T. \(2022\) Lapsiperheen varallisuus on usein kiinni asunnossa](#). Tieto & trendit, Tilastokeskus.
- [Keski-Petäjä, M. \(2022\) Lapsia yhteiskunnan talkoisiin – syntyvyyden ja syntyvyysluonon historiaa Suomessa](#). Tieto & trendit, Tilastokeskus.
- [Kohvakka, O. \(2022\) Lapsiperheillä on muita enemmän velkoja](#). Tieto & trendit, Tilastokeskus.
- [Nikander, T. & Pietiläinen, M. \(2021\) Vähemmän lapsia, enemmän isovanhempia](#). Tieto & trendit, Tilastokeskus.
- Okkonen, K-M. (2022) [Kotitalouksien häilyvät rajat – eroperheiden lasten asumisjärjestelyt haastavat tilastointia](#). Tieto & trendit, Tilastokeskus.
- Okkonen, K-M. (2022) [Lasten vuoroasumisen huomioiminen tarkentaa kuvaa perheiden tulotasosta](#). Tieto & trendit, Tilastokeskus.
- Parikka, T. (2022) [Elämän perusasiat korostuvat lapsiperheiden kulutusmenoissa](#). Tieto & trendit, Tilastokeskus.
- Pajunen, A. (2022) [Lasten kuolleisuus jatkaa alenemistaan, mutta nuorten kuolleisuudessa on huolestuttavia piirteitä](#). Tieto & trendit, Tilastokeskus.
- Pitkänen, E. & Saarenmaa, K. (2021) [Mobiiliteknologia mullisti lasten arjen – nettiin ei mennä, vaan siellä ollaan](#). Tieto & trendit, Tilastokeskus.
- Pärnänen, A. (2022) [Tilastot lapsistrategian tukena – erillään oleva tieto yhteen paikkaan](#). Tieto & trendit, Tilastokeskus.
- Reijo, M. (2021) [Suomalaiset lapsiperheet pärjäävät hyvin pohjoismaisessa asumiskustannusvertailussa](#). Tieto & trendit, Tilastokeskus.
- Ronkainen, M. & Tiihonen, A. (2022) [Suurin osa lapsista asuu pientaloissa – kerrostalo-asuminen yleistyy](#). Tieto & trendit, Tilastokeskus.

- Ruotsalainen, P. (2021) [Lapsia elää tulojakauman kaikissa luokissa – köyhyys-riski suurin nuorissa ja isoissa perheissä](#). Tieto & trendit, Tilastokeskus.
- Saarenmaa, K. (2021) [Ruotsinkielisillä keskimääräistä enemmän lapsia – jo lähes puolet kaksikielisiä](#). Tieto & trendit, Tilastokeskus.
- Tuononen, M. (2021) [Varhaiskasvatukseen osallistuminen yleistyy nopeasti Suomessa ja kansainvälisesti](#). Tieto & trendit, Tilastokeskus.
- Witting, M. (2021) [Lukio, amis vai pelkkä peruskoulu? – Perusopetuksen jälkeisillä valinnoilla on usein kauaskantoiset vaikutukset](#). Tieto & trendit, Tilastokeskus.