Relationships Matter

An exploration of the data on relationships across the life-cycle in Ireland
AG EISTEACHT delivers training to frontline practitioners working in the health, education, social, youth and community sectors in either a professional or voluntary capacity. The focus is on relational capability, which is the capacity of people to establish and maintain close relationships, both at home and in the wider community. The research, which shows that the quality of our relationships is as a key determinant of health and wellbeing, is unequivocal.

Relationships are at the heart of what we do.

**AG EISTEACHT**
2nd Flr, No 24 South Bank
Crosses Green
Cork
Ireland

Tel: +353 21 5005915
Email: training@ageisteacht.com

Find us on: [Facebook](#) [Twitter](#)

www.ageisteacht.com

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Preface

This publication "Relationships Matter" adds to Ag Eisteacht's work, which aims to ensure that a relational approach becomes an integral part of policy and service delivery in Ireland, particularly in the health, social, justice and education sectors. "Relationships Matter" comes about as a result of a collaboration between Ag Eisteacht and Research Matters Ltd. and follows on from Dr. Sinead Hanafin's ongoing interest in and evaluation of Ag Eisteacht's work.

The report presents research and data on the current state of relationships in Ireland within families, in workplaces and in communities. Our aim is that it will serve as a discussion document in order to advance our collective understanding of the specific needs of individuals and families, for support for their relationships. We hope that it will help to inform policy and service provision so that these needs can be appropriately recognised and addressed.

Ag Eisteacht advocates a relational approach across a spectrum of support. This ranges from recognising opportunities;

• to promote relational capability in families, within couple relationships, in schools, in communities, and in workplaces,
• to respond as difficulties emerge, particularly at times of transition and
• to support families experiencing breakdown in their relationships.

We highlight particularly the key role that frontline practitioners, across a range of sectors, have in supporting relationships, especially at times of transition, as they are the people who are most often 'turned to' at these times. Our ABLE training provides practitioners with the knowledge, and skills to incorporate a relational approach into their routine practice, thus improving outcomes for the clients they work with.

Evidence shows that supporting good quality relationships helps build healthier communities and societies. We can all play our part in ensuring that this important contributor to health and well-being is part of the perspective through which we build better outcomes for ourselves and for our clients. An investment at policy level, at practitioner level and at a personal level, in placing relational wellbeing as a priority, will positively influence generations to come.

Maeve Hurley
Chief Executive Officer,
Ag Eisteacht
Key data sources

Growing Up in Ireland
Growing Up in Ireland is a Government-funded study of children being carried out jointly by the ESRI and Trinity College Dublin. The study started in 2006 and follows the progress of two groups of children: 8,000 9-year-olds (Child Cohort) and 10,000 9-month-olds (Infant Cohort).

MAMMI Study
The MAMMI Study is a study looking at the health and health problems of women during pregnancy and during the first year after the birth of their first baby.

TILDA
The Irish LongituDinal Study on Ageing (TILDA) is a large-scale, nationally representative, longitudinal study on ageing in Ireland, the overarching aim of which is to make Ireland the best place in the world to grow old.

Healthy Ireland Surveys
The Healthy Ireland Survey is an annual survey of the health and wellbeing of the population. The data from the Healthy Ireland Survey provide an up-to-date picture of the nation’s health.

Irish Health Survey 2015
The Irish Health Survey (IHS) is the Irish version of the European Health Interview Survey (EHIS). This survey fulfils the need for public health policies to obtain reliable data on health status, health care usage and health determinants. It allows for health comparisons to be made across Europe.

Health Behaviour in School-Aged Children study
HBSC is a cross-national research study conducted in collaboration with the World Health Organisation (WHO) Regional Office for Europe. HBSC Ireland is one of 44 countries and regions across Europe and North America that make up the HBSC Network.

PISA Study
PISA is the largest international study of education, examining the reading, mathematics and science achievements of students as they approach the end of compulsory schooling. It began in 2000 and is carried out every three years.

State of the Nation’s Children Report
The biennial State of the Nation’s Children Report is based on the National Set of Child Well-Being Indicators published in 2005.

Perinatal Statistics Reports
The Perinatal Statistics Reports present national statistics on perinatal events in Ireland.
Ag Eisteacht - Relationships are at the heart of what we do
Introduction
Introduction

The evidence is indisputable; good quality relationships have a positive effect on quality of life and poor quality relationships have a negative effect. Relationships impact on every aspect of a person’s life - their health and wellbeing and their ability to live independently, to engage with family and friends, to participate in society and to enjoy life to its full potential (Handley, et al., 2015). Relationships also permeate all settings of a person’s life - home, school, workplace and community. They can be both a risk and protective measure for good health and wellbeing.

The publication of Healthy Ireland (Department of Health, 2013), the national framework for health and wellbeing, has brought a renewed focus to the broader determinants of health and wellbeing in Ireland. It promotes a necessary shift towards a broader and more inclusive understanding of health and it acknowledges that many of the influences on health and wellbeing lie well beyond the health sector. Within this, relationships are key to supporting people to enjoy a healthy and active life at all stages throughout the life cycle from cradle to grave and particularly at times of key transitions.

This document presents research and data on the current state of relationships in Ireland - within families, workplaces and communities. It highlights the importance of relationships in infancy and childhood and acknowledges the sensitivity of this period of time in the establishment and maintenance of relationships throughout the life cycle. Key challenges arising for parents throughout the childhood period are highlighted and some consideration is given to sibling and peer relationships.

Relationships in adulthood are also considered and the impact of couple relationships on good health and wellbeing examined. Cognisance is taken of the development of romantic relationships in adolescence and of Lesbian, Gay, Bisexual and Transgender (LGBT) relationships. Workplace relationships underpin quality in the workplace and social relationship at work can have a profound negative or positive impact on people’s lives. As people age, their needs become greater and, as a consequence, their relationships, particularly with their children, also change. Reciprocal relationships exist between parents and children throughout the life cycle with many children providing some care for their parents and parents providing support for their children and grandchildren.

The data presented in this report suggests there are many positive aspects around relationships in Ireland but there are also many areas where greater support is needed.
Relationships in infancy
Relationships in infancy

This section presents research evidence in respect of relationships throughout childhood. The key areas addressed are attachment and parental relationships throughout infancy, middle childhood and adolescence. Much of the information presented here is drawn from reports on the findings from “Growing Up in Ireland” (GUI), the National Longitudinal Study of Children in Ireland, which tracks the developmental progress of almost 20,000 children.

Attachment

Parenting during the period of infancy is critical and parents need to nurture, actively interact and engage, communicate and stimulate their infant, as well as manage the day-to-day physical and social environment (Nixon, Swords, & Murray, 2013). While the period of infancy accounts for only a small fraction of the average person’s lifetime, the relationships formed at this time and the attachments made, have a long-lasting impact. Research has demonstrated that infants and children who develop secure attachment relationships are better able to regulate their emotions and experience empathy in later life (Panfile & Laible, 2012). Secure attachments are a protective factor that enable children to develop ways to cope better with adversity, such as loss and trauma. Consequently, the promotion of good parent–infant relationships at every stage provides important opportunities for laying down the foundations of good infant mental health (Expert Advisory Group, 2013).

Mother-infant and father-infant attachment in Ireland

In Ireland, very high levels of mother-infant and father-infant attachment have been identified through the GUI study (Williams, et al., 2010). The Quality of Attachment scale (Condon & Corkindale, 1998) was used in this study to explore how mothers and fathers assessed their emotional attachment to the child. Areas considered included how mothers and fathers felt in their interactions with the infant in a parenting role (competent, tense, patient) and their feelings towards the infant (pride, affection, enjoyment). The findings showed a high total score for both mothers (mean score 42.5 out of a possible 45) and fathers (mean score 24.1 out of a possible 25).

Parenting

Maternal anxiety can be problematic before and after the birth of a baby. The findings from a recent large Irish study, titled “MAMMI”, found that many pregnant women experience anxiety in early pregnancy (44%) and this can co-exist with depression which occurs in about one in four women (26%) (Carroll, Begley, & Clarke, 2014.). Maternal anxiety can also occur in the months after the infant is born. Findings from the GUI study demonstrated that about one in every five mothers (21%) reported feeling tense and anxious at least occasionally when with their nine-month old (Williams, et al., 2010). Many parents also reported the experience of being a parent in the first year of a child’s life as overwhelming and about one-third of mothers in the GUI study reported having high levels of stress. Some parents are more at risk than others and this is particularly the case for single
Lone parents, particularly those with two or more children, were reported to have higher levels of stress when compared with two parent families; this has potential implications for inequalities in how children grow and develop (Williams, et al., 2010).

Other issues were also identified in respect of anxiety in parenting. While noting the high levels of attachment, Williams et al. (2010, p. 100) also reported that:

24% of mothers felt "slightly guilty that I am not more involved" and a further 7% felt moderately or very guilty about their level of involvement with their infant.

When mothers feel supported by family or friends, they experience lower levels of parental stress (Nixon, et al., 2013). Direct support (e.g. by providing practical assistance) and "buffering" the parent from being adversely affected by stress (e.g. by providing emotional support in times of stress) both help in this. However, Nixon et al. (2013) also reported that:

One in 10 mothers felt they did not get enough help and 5% reported they got no help at all.

Nearly one in every 10 mothers (8%) reported that their family were not living in the country and, consequently, they were unavailable to provide support for them. Only 6% of mothers said they did not need any help. Fathers play an important role in children's lives. Findings from the GUI study (Corrigan 2013) showed that among lone parents of infants:

- 25% had no contact with the father of their child.
- 50% of fathers made no financial contribution to the maintenance of their child.

### Key messages: Infant Parent relationships

- Infancy is a critical period in life. The quality attachment between infant and parent during this time has a life-long impact.

- While many parents in Ireland report positive attachment to their infants, a considerable proportion also report high levels of stress and anxiety during pregnancy and after the birth of their infant.

- Compared with two parent families, lone parents are much more likely to report being stressed. This is particularly the situation for those with two or more children.

- About one-quarter of infants in lone parent families had no contact with their father. Parents who feel supported have lower levels of stress.
Relationships in early, middle and late childhood
Parent-child relationships

As children grow and develop, their relationships with their parents change; however, their importance remains and the parental-child relationship is an important predictor of children’s outcomes (Nixon, et al., 2013). This section considers a number of measures of parental-child relationships including:

- parent-child relationships;
- children’s views on their relationships with their parents; and
- levels of conflict between parents and children

Parent-child relationships

Parental warmth and responsiveness towards their child’s interests and feelings is a clear reflection of the relationship between parent and child. Positive warmth and sensitivity, demonstrated through expressions of approval and support by the parent, result in better outcomes for children. In contrast, hostility, expressed through feelings of irritation and anger in a parent’s interactions with the child, are associated with poorer outcomes (Williams, Murray, McCrory, & McNally, 2013).

Parents experiencing high stress, however, report higher levels of conflict and lower levels of positive interaction with their children (Williams, Murray, McCrory, & McNally, 2013).

One-third of parents who reported high levels of stress also reported high levels of conflict with their 9 year-old child.

More than one-third of parents who reported high levels of stress reported lower levels of positive interaction with their 9 year-old child.

Another measure of the parental-child relationship is the extent to which parents feel close to their child. A healthy closeness between parent and child is critical and creates a secure base from which the child can experience the world. This closeness is illustrated through affection, warm relationship and positive interactions. Again, research findings show that while most parents feel close with their child, a surprisingly high proportion of parents do not.

More than one in four (26%) mothers reported low levels of closeness with their 9 year-old son and just under one in five reported low levels of closeness with their daughter (Williams, et al., 2009).

These findings highlight the importance of early identification of stress with parents and appropriate interventions so that the relationship between parent and child is not irreparably damaged.

Children’s views

As part of the GUIL study, a qualitative study with children at age 9 years was conducted. Within this qualitative aspect of the study, children’s relationships with their parents, siblings and other family members were identified as very important to the children. The key findings from this qualitative study are presented in Figure 1.

These findings were also substantiated with a study including older children and a recently published report which reported that most 17-18 year-olds identified family (parents and siblings) as the most important thing in their lives. This was followed by ‘health’ and then ‘friends and acquaintances’ (Growing Up in Ireland Study Team, 2016).
Being able to count on your parents

Not all children report being able to count on their parents to help them if they have a problem. This finding emerged from the GIU study which found that only 83% of 13-year-old children reported that they could count on their mother to help them with a problem and only 76% reported it in respect of their father (Growing Up in Ireland Study Team, 2012).

Talking with parents

When parents and children can talk with each other, they are more likely to reach a common understanding around potential areas of conflict. Some children and young people identify difficulties in this area and this is especially the case as children get older. The State of the Nation’s Children Report published data from the Health Behaviour in School-Aged Children (HBSC) study (Department of Children and Youth Affairs, 2016), which noted that between 10-17 years, only 83% of children reported that they find it easy to talk to their mother when something is really bothering them and this dropped to 70% for fathers. Although 87.5% of younger children aged 10-11 years report finding it easy to talk to their mother in those circumstances, this decreases to only 78% of children aged 15-17 years.

- At age 15-17 years, more than one in four children cannot talk to their mother when something is really bothering them.
- Ireland is below the international average in this and in countries such as Iceland, for example, more than 90% of children aged 11, 13, and 15 years report they find it easy to talk to their mother when something is bothering them.

These findings are also supported by the findings from other studies. Spending time just talking to children can be an indicator of a comfortable parent-child relationship and this issue has been examined as part of the PISA study (OECD, 2016). Significantly more girls (81%) than boys (65.5%) report their parents spend time just talking with them several times a week (Department of Children and Youth Affairs, 2016). Recent findings from the GIU study (Growing Up in Ireland Study Team, 2016) showed that that while most 17-18 year-olds report having a positive view of their relationships with parents:
Almost two-thirds of young people said they never/seldom “share their secrets/private feelings” with their father and over 40% never/seldom did so with their mother.

30-40% of young people said they sometimes “disagreed/quarrelled” or got “annoyed/angry” with their parents, although much fewer said it occurred often/always.

Approximately 10% of young people aged 17-18 years indicated they “often/always” felt let down by a parent.

Conflict between children and their parents

Relationship issues are also reflected in the level of conflict between children and their parents and high levels of conflict can be indicative of a difficult relationship. Children in the GUI study were asked their views on how they get along with their parents. Positively, while the vast majority of children said they got on very well with their mother (86%) and father (83%), some difficulties were noted.

- 14% of 9 year-old children reported they only got on “fairly well” with their mum.
- 16% of 9 year-old children reported they only got on “fairly well” with their dad.

The authors of this report also drew attention to the discrepancy between the views of parents and those of the children. While one in 10 children (9%) reported they only got on “fairly well” or did “not get on” with their mothers, their mother had reported the relationship was very close. This increased to 12% for fathers (Williams, et al., 2009).

The composition of the family has an impact on the levels of conflict reported. Those in married relationships reported the lowest level of mother-child conflict (18%), while those in lone parent families who had been divorced or separated showed the highest levels of conflict (29%) (Williams, et al., 2009).

Some gender differences were also identified.

One in four mothers (25%) reported having high conflict with their daughter and 27% reported high conflict with their son at age 9 years. This increased to about one-third (32%) in lone parent families with one or two children.

Summary: Parent-child relationships

In summary, parental relationships are important to children and children recognise the significance of these relationships in their lives. Although the vast majority of relationships between parents and their children are positive, findings from nationally representative studies also show that some children, even at an early age, do not experience a close, warm or responsive relationship with their parent. A relatively high percent of children experience conflict with their parents and this is particularly the case in lone parent families.
Sibling relationships

According to Howe and Recchia (2014, p.4), the sibling relationship is ‘a natural laboratory for young children to learn about their world’ and they note, it can provide opportunities:

- to learn how to interact with others,
- to manage disagreements, and
- to help develop emotional regulation in socially acceptable ways.

While sibling relationships are also important in understanding children’s lives, little research has been conducted on this area in Ireland. Again, findings from the GUI study 9 year-old cohort point to some differences in these relationships within the family context (Williams, et al., 2009). Where high levels of conflict are reported in the child-mother relationship, children are also more likely to report poor relationships with their siblings.

The findings show that 40% of children who are in a high conflict relationship with their mothers reported “never getting on with their sibling” compared with only 7% of those in a low conflict relationship with their mother.

Peer relationships in childhood

Peer relationships are widely recognised as being vital to children and young people. According to Rubin et al. (2005), friendships in childhood serve to:

- provide support, self-esteem enhancement, and positive self-evaluation;
- provide emotional security;
- provide affection and opportunities for intimate disclosure;
- provide intimacy and affection;
- offer consensual validation of interests, hopes, and fears;
- provide instrumental and informational assistance;
- promote the growth of interpersonal sensitivity; and
- offer prototypes for later romantic, marital and parental relationships

While the processes through which these relationships form and develop are not well understood, research findings show that friendships and positive relations with peer groups appear to protect children against later psychological problems (Bigler, Rohrbach, & Sanchez, 2016).

In Ireland, almost nine out of 10 children have three or more friends of the same gender and this is significantly higher than the international average of 81%.

Traveller children (85%) and immigrant (84%) children, however, were significantly less likely to report having these friendships and this has potential implications for inequalities in how they grow and develop (Department of Children and Youth Affairs, 2016).

The recently published GUI report on 17-18 year-old children found that friends are an important source of support for young people when they are facing difficulties and ‘friends’ accounted for four of the top five most popular coping strategies used by the children (Growing Up in Ireland Study Team, 2016). These young people said they would very often or always go to friends:

- to help them feel better (27%),
- to ask for advice (26%),
- to tell them their fears or worries (23%), and
- to ask for support (21%).

Not all children have good relationships with their peers and bullying is a particular feature of children’s lives and this issue is now considered.
Bullying in childhood

Bullying "is the assertion of interpersonal power through aggression" and it is defined as "negative physical or verbal actions that have hostile intent, cause distress to victims, are repeated and involve a power differential between bullies and their victims" (Currie, et al., 2008, p.159). The Anti-Bullying Working Group (2013) have identified the following forms and methods of bullying:

- deliberate exclusion, malicious gossip and other forms of relational bullying;
- cyber bullying;
- sexual bullying; and
- identity-based bullying (specifically including homophobic bullying, transphobic bullying, racist bullying and bullying of those with disabilities or special educational needs).

Victims of bullying may experience many negative outcomes and these have been identified by the UK Equality and Human Rights Commission (Tippett, Houlston, & Smith, 2010). Figure 3 provides a list of potential negative outcomes of childhood bullying.

![Figure 3](image)

Prevalence of bullying

Internationally, differences in the prevalence of bullying have been identified. The 2010 HBSC study (Kelly, Gavin, Molcho, & NicGabhainn, 2012) found that the average percentage of children who reported being bullied at least once in the past couple of months was 29.2% and this ranged from about one in every ten children (11% in Italy) to about half of all children (54% in Lithuania). The findings show that Ireland was about average at 27%. These issues have been looked at in more detail in the 2014 report (Gavin, et al., 2015). The prevalence of bullying behaviours in Ireland are presented in Figure 4.

![Figure 4](image)

Cyber bullying

Cyber bullying has been described as "an extension of traditional bullying with technology providing the perpetrator with another way to abuse their target" (O’Moore & Minton, 2011). In respect of cyber bullying, statistically significantly more girls reported experiencing this than boys, with 17% of girls reporting being bullied in the past couple of months by being sent mean messages, wall postings or by a website created to make fun of them. Older children are also more likely to report this (Gavin et al. 2015).

Individuals who engage in bullying behaviour

There are also consequences for individuals who engage in bullying behaviour and from a developmental perspective, it has been noted
that children who bully others also suffer negative impacts. Children who become involved in this behaviour are also at risk of a number of issues, including: depression; engaging in higher levels of health-risk behaviours, such as smoking and excessive drinking; reporting disconnectedness with parents; and holding negative views about school (Currie et al., 2008). The 2014 HBSC survey found that 18% of boys reported bullying others at school “in the past couple of months” compared to 9% of girls (Gavin et al. 2015). This gender difference is common internationally (Currie et al., 2008).

Summary: Peer relationships

In summary, peer relationships are important in childhood and children in Ireland are more likely to report having friends compared with their peers internationally. However, similar to elsewhere, bullying is a strong feature of the lives of children in Ireland and the short and long term consequences for the child being bullied, and also the child who bullies, can be both negative and significant. More than one-quarter of all children in Ireland report they have been bullied and more than 10% report bullying others.

**Children in the care of the State**

Some consideration is given here to children who are in the care of the State. The decision to place a child in the care of the State is taken only in extreme circumstances, such as where a child is orphaned or abandoned or where the family cannot provide adequate care and protection for the child.

The Child Law Reporting Project (Coulter, 2015) reports the findings on the proceedings of the child care courts and notes that between 2012 and 2015, over 2,000 applications were made for care placements. Table 1 below provides some insight into the main reasons for children being taken into the care of the State; these highlight the challenges faced by children, parents and

<table>
<thead>
<tr>
<th>Reasons</th>
<th>Number</th>
<th>% of all applications</th>
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<tbody>
<tr>
<td>Parental disability (intellectual, mental, physical)</td>
<td>184</td>
<td>15.4</td>
</tr>
<tr>
<td>Neglect</td>
<td>183</td>
<td>15.3</td>
</tr>
<tr>
<td>Multiple</td>
<td>177</td>
<td>14.8</td>
</tr>
<tr>
<td>Parental drug abuse</td>
<td>144</td>
<td>12.1</td>
</tr>
<tr>
<td>Parental alcohol abuse</td>
<td>118</td>
<td>9.9</td>
</tr>
<tr>
<td>Physical / emotional abuse</td>
<td>78</td>
<td>6.5</td>
</tr>
<tr>
<td>Parent absent / deceased</td>
<td>56</td>
<td>4.7</td>
</tr>
<tr>
<td>Other</td>
<td>51</td>
<td>4.3</td>
</tr>
<tr>
<td>Abuse (before split into sexual and physical)</td>
<td>46</td>
<td>3.9</td>
</tr>
<tr>
<td>Child’s risk taking</td>
<td>40</td>
<td>3.4</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>38</td>
<td>3.2</td>
</tr>
<tr>
<td>Not recorded</td>
<td>31</td>
<td>2.6</td>
</tr>
<tr>
<td>Domestic violence</td>
<td>2127</td>
<td>2.3</td>
</tr>
<tr>
<td>Not applicable</td>
<td>9</td>
<td>1.0</td>
</tr>
<tr>
<td>Trafficked / abandoned</td>
<td>0</td>
<td>0.8</td>
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Table 1 | Reasons for care applications (Coulter, 2015)
services in these situations.

The vast majority of children in Ireland who are in foster care live with families, including with relatives, and only a small number reside in residential or special care (Figure 5).

**Birth family relationships**

The importance of children maintaining contact with their birth families, even in situations where reunification with the family is not a prospect, is highlighted in Coulter’s (2015) report. Specifically, Coulter notes that:

“Even if reunification is not in prospect, maintaining a child’s relationship with his or her birth family (outside of grave ill-treatment) will generally be a positive factor in their future sense of identity and mental health” (2015, p.53).

Children who enter the care system can also suffer the loss of significant relationships with their siblings. While this has been given greater recognition in recent years, challenges around lack of contact continue to undermine these relationships (Cooper, 2013). Cooper also highlighted the problems arising from irregular or poor quality engagement between siblings and recommends that a greater understanding and appreciation of the problem needs to be developed.

**Relationships with peers**

Peer relationships can also be undermined through the care system. While little research has been carried out in Ireland on the experiences or outcomes for children living in care, a recent exploratory study on the education of children in care in Ireland highlighted a number of issues of importance (Darmody, McMahon, Banks, & Gilligan, 2013). Among these issues are the importance of relationships, particularly peer relationships in their lives. The authors wrote:

“Having good, close friends was important to the children interviewed; while they generally did not want it to be widely known that they were in care, they had discussed it with their close friends” (2013, p.12).

**Summary: Children in the care of the State**

In summary, the vast majority of children in the care of the State live with foster families and about 30% live with relatives. While little research has been conducted with this group of children, there is evidence that maintaining birth family relationships with parents and siblings is critical, even where reunification is not expected to take place. Some consideration also needs to be given to ensuring children’s peer relationships are supported so that regular moves between families does not undermine their capacity to develop long lasting relationships in this area.
Key points: Relationships in early, middle and late childhood

• The quality of the relationship between parent and child has a significant impact on children throughout early, middle and late childhood.

• A majority of children and parents report warm, close and positive relationships with each other and most children report being able to count on their mother (83%) and father (76%) if they have a problem.

• About one in every five parents report high levels of conflict with their child and this increases to about one in three for parents who also report high levels of stress.

• Mothers who have never married, and those who are divorced and separated, also report higher levels of conflict with their child.

• 40% of children who are in a high conflict relationship with their mother, also report “never getting on” with their sibling compared with 7% of those in a low mother-child conflict relationship.

• Children in Ireland are significantly more likely than their international peers to report having friends (90% report having three or more friends).

• One in four children report being bullied in school and 13% report bullying other children.

• Cyber bullying happens more often to girls than boys and this is also more common among older children.

• At the end of 2015, there were 6,384 children and young people in the care of the State in Ireland. Ninety three percent of these children are in foster care and of these, about one-third are living with relatives.
Couple Relationships
Couple relationships

In this section, we consider the development of relationships and their significance in people’s lives. Particular consideration is given to couple relationships in adolescence, to Lesbian, Gay, Bisexual and Transgender (LGBT) people, to marital status and to relationship breakdown. We pay particular attention to the issue of domestic violence and its prevalence in Ireland.

Couple relationships in adolescence

Couple formation is an important step in the lifecycle and these type of relationships commonly develop among adolescents. These relationships are important because:

- romantic relationships have been implicated both in negative behaviours and psychosocial wellbeing;
- the transition to adulthood has become elongated and the period of time between adolescence and marriage has become longer;
- there has been an increase in the theoretical base which improves understandings of romantic experience in adolescence (Meier & Allen, 2007); and
- romantic relationships in adolescence have been linked with four broad systems, each of which are important to future development (Furman & Wehner, 1994) (Figure 6).

![Diagram](image)

**Figure 6** | Important systems in romantic relationships (Furman & Wehner, 1994)
Sexual activity

• The Growing Up in Ireland Study Team collected information on couple relationships in 17-18 year olds and reported that just under one-third of 17-18 year-olds were reported to have a boyfriend or girlfriend and this type of relationship was more common among girls (36%) than boys (28%).

• Almost half (42%) of 17-18 year-olds reported they were sexually active and about one-third reported they had already had sexual intercourse.

Sexual activity was more likely to take place among boys and among those from more socially disadvantaged backgrounds. Most 17-18 year-olds (83%) did not report any peer pressure to have sexual relationships, although a small proportion reported they were afraid of losing their partner through not having sex (6%), with this being more common among girls than boys (Growing Up in Ireland Study Team, 2016).

Marital status and health and wellbeing

While relationships in childhood often extend into adulthood, attaining love and romance in an adult context can help to satisfy the need for positive long-term social bonds (McCrorry, Leahy, & McCarrigle, 2015; Stephanou, 2012). In Ireland, marriage continues to occupy an important cultural status and although there was a decline in marriage rates during the 1980s and early 1990s, these rates have now stabilised and the number of marriages increased.

In 1994, for example, there were 16,621 marriages giving a rate of 4.6 marriages per 1,000 population. In 2015, there were 22,025 marriages, giving a rate of 4.8 marriages per 1,000 population. (Central Statistics Office, 2016b)

Civil partnership was introduced into Ireland in 2011 and marked an important step in relationship recognition for LGBT people. This was followed in 2015 by the legalisation of same-sex marriage through a referendum, with Ireland’s referendum to legalise same-sex marriage being the first of its kind in the world (Staunton, 2015). Following its introduction, 91 same-sex marriages took place in 2015 along with 376 civil partnership ceremonies (Central Statistics Office, 2016b).

Marital status has been found to have implications for an individual’s health and mortality and the literature has consistently identified poorer health and a higher mortality risk among unmarried people, with men being particularly affected. These findings are relevant to the Irish context and the TILDA study of older people reported that:

"Participants who were married at both waves have a higher quality of life score compared with those who remained never married, divorced/separated, or widowed across waves" (McCrorry, Leahy, & McCarrigle, 2015, p.161).

LGBT relationships in Ireland

There is an increasing awareness of the experiences of LGBT people in Ireland and a number of studies have been conducted on this area in recent years (Dooley & Fitzgerald, 2012; Higgins et al. 2016). Dooley and Fitzgerald (2012) found a significant relationship between LGBT identity and depression, anxiety and stress with higher levels of distress identified among LGBT young people. Higgins et al. (2016) examined the experiences of challenges for young people who identify as LGBT compared to heterosexual young people.

Their findings showed that those who identified as LGBT were significantly more likely to report:

• self-harm (twice as likely) and
• severe / extremely severe stress, anxiety and depression (four times as likely).
Challenges for people who identify as LGBT continue through their lives and key findings from one study which collected data from LGBT people aged 55 and over is presented in Figure 7 (Higgins, et al., 2011).

Most participants went through the whole of their adolescence and early adulthood without disclosing their LGBT identity to anyone and without contact with other LGBT people.

27% were afraid of harassment if people found out they were LGBT.

35% feared that friends would reject them if they told them they were LGBT.

Participants developed a range of strategies for concealing or hiding their LGBT identity including: cautiousness, discretion, developing divided lives, voluntary exclusion from parts of life, living a straight life and even emigration.

In summary, couple relationships are part of the normal cycle of life and increasing attention is being paid to the development of these relationships in adolescence. Four broad systems have been linked with relationship development at this time and these include an affiliative system, sexual reproductive system, attachment system and care-giving system. Marital relationships continue to be the norm in Ireland and these rates are now reasonably stable at about 4.8 per 1,000 population. People who are married report having a higher quality of life than those who are not. Marital strain and breakdown, however, can have a negative impact on people’s lives and erodes physical and mental health. Some people who identify as LGBT report significant challenges and compared with young heterosexual people, young LGBT people are twice as likely to self-harm and four times as likely to report severe or extremely severe stress, anxiety and depression.

In a review of the literature on longitudinal studies on lasting couple relationships, Parker and Commerford (2014) note that there is a complexity that evolves over an extended period of time. They found that:

- The nature of pre and early marriage interactions and men’s satisfaction with the relationship across the transition to parenthood influences the long-term stability of the relationship.

- There is a need for active engagement in behaviours that are supportive of the relationship and simply wanting the relationship to continue is insufficient in itself to support its continuation.

- Marital satisfaction is enhanced when there are similarities between partners and when partners are viewed through "rose-coloured" glasses, although some gender differences are noted.

- Relationship quality has an impact on health in later life; therefore, investing in the quality of the couple relationship can be of benefit to health promotion and intervention strategies.

Much has been written about the impact of marital strain on health. In a review of the literature, Umberson and Karas Montez (2010) concluded that marital strain:

- erodes physical health through behavioural, psychosocial and physiological pathways and this becomes greater with advancing age and

- undermines a sense of personal control and impacts on mental health.

In 2014, there were 2,629 divorces granted by the Circuit Court and the High Court. This represented a decrease of 320 (10%) from the 2013 figure.

**Summary: Couple relationships**

In summary, couple relationships are part of the normal cycle of life and increasing attention is being paid to the development of these relationships in adolescence. Four broad systems have been linked with relationship development at this time and these include an affiliative system, sexual reproductive system, attachment system and care-giving system. Marital relationships continue to be the norm in Ireland and these rates are now reasonably stable at about 4.8 per 1,000 population. People who are married report having a higher quality of life than those who are not. Marital strain and breakdown, however, can have a negative impact on people’s lives and erodes physical and mental health. Some people who identify as LGBT report significant challenges and compared with young heterosexual people, young LGBT people are twice as likely to self-harm and four times as likely to report severe or extremely severe stress, anxiety and depression.
Key points: Couple relationships

- Couple relationships matter and the period of adolescence is increasingly recognised as important due to the potential long-term impact on psycho-social wellbeing.

- Romantic relationships can provide companionship, physical intimacy, love, closeness and feelings of security, and support and assistance.

- Marriage rates in Ireland have stabilised at around 4.8 per 1000 population.

- People in marital relationships enjoy a higher quality of life than those who are not.

- Relationship breakdown erodes physical and mental health.

- In 2014, there were 2,629 divorces granted by the Circuit Court and the High Court in Ireland, a decrease of 10% from 2013.

- People who identify as LGBT are twice as likely to report self-harm and four times as likely to report severe or extremely severe stress, anxiety and depression.
Relationships in the workplace and community
Relationships in the workplace and community

This section focuses on two main locations where relationships can have a lasting impact on people’s lives: the workplace and in the community.

Social relations in the workplace

Most people spend most of their adult life in the workplace and it can have a significant impact on wellbeing. This is recognised through European policy which is not only directed at the number of people in employment but also at improving the quality of such jobs (Eurofund, 2010). Underpinning this policy is an acknowledgement that good quality jobs are important in promoting sustainable working careers, motivating employees and increasing productivity. It has also been noted that ‘good-quality jobs lead to less work-related ill health, fewer occupational accidents, and overall improvements in occupational health’ (Eurofund, 2010, p.9). Four dimensions of job quality are highlighted by Eurofund (2010) as follows:

1. job content,
2. working conditions,
3. employment conditions and
4. social relations at work.

Eurofund defines social relationship as:

“the way all stakeholders at work interact with each other, both formally (such as collective bargaining processes) and informally (contact with supervisors or social support).” (Eurofund, 2010, p.6).

Little research has taken place on good workplace relationships in Ireland as, understandably, most research focuses on examining areas considered problematic. Managers, however, have been identified as key to supporting good social relationships in the work place and key issues are presented in Figure 8.

Figure 8 | Supporting good social relationships in the workplace (Eurofund, 2010)
Poor workplace relationships

There is a growing awareness of the impact of poor workplace relationships on the income, productivity and motivation of workers. In parallel, there is a growing concern about the role of workplace incivility, particularly in the United States where Glendinning (2001) found that 66% of employees experience incivility. Workplace incivility has been described as:

“...low-intensity deviant behavior with ambiguous intent to harm the target, in violation of workplace norms for mutual respect” (Anderson & Pearson, 1999, p.457).

A more recent US survey related to civility in America based on an online survey of 1,000 people reported that 23% of workers ‘quit their job’ because of workplace incivility (Shandwick, Tate, & KRC Research, 2012). While the sample size and data collection method may limit interpretation of the findings, they nevertheless highlight the importance of this issue in people’s working lives. According to Eurofund (2014) figures:

One in every four (25%) workers in Europe say they experience work-related stress for all or most of their working time and a similar proportion reports that work affects their health negatively.

The most common risks for work-related stress relate to work intensity and violence and harassment are less frequently reported. Where violence and harassment take place in the workplace, they are strongly associated with negative health and wellbeing. These types of behaviours are more likely to occur in the health and social care sector than in any other area. While this violence and harassment generally comes from patients, patients’ relatives or other members of the public, there is also a concern about workplace bullying.

The Irish Health and Safety Authority’s definition of workplace bullying is that it is:

‘Repeated inappropriate behaviour, direct or indirect, whether verbal, physical or otherwise, conducted by one or more persons against another or others, at the place of work and/or in the course of employment, which could reasonably be regarded as undermining the individual’s right to dignity at work’ (Health and Safety Authority of Ireland, 2007).

An isolated incident of the behaviour described in this definition may be an affront to dignity at work but as a one-time incident is not considered to be bullying. Research conducted by the ESRI reports the incidence rate of bullying in the Irish workplace to be almost one in thirteen (O’Connell, Calvert, & Watson, 2007). Bullying can take many forms including:

- Manager to employee
- Employee to manager
- Peer-to-peer (or peer-group to peer-group)
- Customer to employee
- Employee to customer

A code of practice for employers and employees on the prevention and resolution of bullying at work was published by the Health and Safety Authority in Ireland in 2007 (Health and Safety Authority of Ireland, 2007). This code:

- outlines some of the more common behaviours associated with bullying at work;
- identifies situations where bullying commonly occurs at work;
- describes how to prepare a Bullying Prevention Policy; and
- sets out procedures for resolving bullying complaints at work.

Relationships with community

There is a reciprocal relationship between individuals and the communities in which they live. On one hand by volunteering, taking part in group activities and being a good neighbour,
individuals can engage with and support their communities. On the other hand, communities and people within them may come together to support individuals and provide help when they needed it. Being part of a community, participating in it and feeling attached to it were identified by the National Economic and Social Council (2009) as being significant contributors to wellbeing. The issue of community was considered by Barry et al. (2009) in their national Survey of Lifestyle, Attitudes and Nutrition in Ireland (SLÁN). They reported that in 2007, almost three-quarters of participants (74%) indicated it was ‘easy’ or ‘very easy’ to get practical help from neighbours when they needed it. This was more likely to take place in rural (84%) rather than urban areas (68%). Similar findings were also reported by the Central Statistics Office (2006) in respect of social engagement in communities.

Survey findings show that (IPROS MRBLI, 2015):

- 47% of the Irish population aged 15 and over participate in a social group or club.
- Participation is higher among men (52%) than women (43%), particularly among men aged 15-24 (72%).

These findings have been confirmed through the Irish Sports Monitor which showed that 45% of the population participate regularly in sport, amounting to ‘approximately 1.6 million people directly benefiting from the physical, psychological and social gains obtained from sport’ (Sports Ireland, 2016, p.1). The participation levels for both men and women, however, have declined in recent years.

Summary: Relationships in the workplace and community

In summary, workplace relationships are important, not least because of the amount of time people spend with their work colleagues. Across Europe, it is estimated that about one in four people experience workplace stress, some of which is due to the social relationships that exist in the workplace. Little research has been conducted on positive workplace relationships, but there is an increasing concern, particularly in the United States about workplace incivility, which has been experienced by about two-thirds of the population. Greater attention has been paid to bullying and it has been estimated that one in 13 workers (7%) in Ireland have experienced workplace bullying.

People in Ireland have strong relationships with their communities, although the evidence suggests that these relationships may not be as strong as they once were. Fewer people are involved in group activities and less than half of the Irish population aged 15 and over (47%) now participate in a social group or club compared with almost two-thirds ten years ago.
Key points: Relationships in the workplace and community

- Internationally, there is a concern about increasing levels of incivility in the workplace and this is particularly the case in the United States.

- It has been estimated that one in every four workers in Europe experience work-related stress for all or most of their working time and a similar proportion reports that work affects their health negatively.

- Research published in 2007 reported the incidence rate of bullying in the Irish workplace to be almost 1:13 (about 7%).

- Relationships with community are evidenced by activities such as volunteering, taking part in groups and clubs and being able to call on neighbours for help.

- Findings from recent studies show that individuals are less likely to take part in group or club activities compared with 10 years ago.
Relationships in later life
Relationships in later life

While the literature has demonstrated that social relationships are positively associated with good health, older people may experience challenges in interacting with family, peers and their communities due to cognitive or physical decline (Harvey & Walsh, 2016).

 Older people with enhanced social relationships have improved psychological well-being, including having a sense of belonging and decreased levels of depression as well as better physical health including improved immune function and reduced risk of heart attack (Chen & Feeley, 2014).

Much of the information presented in this section draws on findings from the Irish Longitudinal Study on Ageing (TILDA) which is a large-scale, nationally representative, longitudinal study on ageing in Ireland. The adults included in the study are aged 50 years and older and the findings presented refer to this age group.

The findings from the TILDA study show that almost 10% of older people in Ireland have never been married and this is more common among men compared with women (13% men, 7% women). However, almost three-quarter (73%) of older adults live with their spouse or with a spouse and children although this proportion decreases by age (Kamiya & Timonen, 2011).

In Ireland, findings from the TILDA research shows that the quality of life increases with greater social integration and four broad categories are presented as follows:

1. intimate social relationships (visits to or from family and friends);
2. formal organisational involvements outside of work (going to religious services or meetings at voluntary associations);
3. active and relatively social leisure (going to classes or lectures, movies, plays and concerts, playing cards or bingo, eating outside the house, taking part in sports); and
4. passive and relatively solitary leisure activities, such as watching television, listening to the radio, or reading.

Relationships around involvement with family and in respect of formal activities with communities are now considered.

Family relationships in later life

Findings from TILDA report that, in general, older people in Ireland are engaged and have strong relationships with their families (Kamiya & Timonen, 2011, p.38). The findings show that in Ireland:

• Over 70% of the age group most likely to need care and support (75 and over) live with their children or have at least one child living in the same county.
• Three-quarters of all adults aged 50 and over live in close proximity to at least one of their children.
• Three-quarters of older adults whose parents are still alive see their parents frequently (daily, weekly, or several times per month).
• Half of 50-64 year-olds with surviving parents provide help with household tasks to their parents, on average for 10 hours per week; over one-quarter provide their parents with personal care, on average for 18 hours per week.
• Family financial transfers flow mainly from ageing parents to their adult children. Nearly one-quarter (24%) of older households have given large financial or material gifts (worth €5,000 or more) to their children in the last 10 years. In contrast, only 9% of older adults have received financial transfers from their children.
• Non-financial transfers from ageing parents to their children are also very common in Ireland. Over one-third of older adults provide practical household help, including shopping and household chores, to their adult children and nearly half provide care to grandchildren.

These positive family relationships can benefit health and wellbeing, not only with older people but also inter-generationally. The GUI study, for example, found that where children of lone parents co-resided with a grandparent (usually one or both of the child’s mother’s parents), the mother was only half as likely to suffer from depression or to smoke (Growing Up in Ireland Study Team, 2011).

Caring

While care needs can arise at any time in a person’s life, these are most likely to arise in older age groups. A 2016 Central Statistics Office study found that 10% of the population are providing care to someone with a chronic condition or an infirmity due to old age and in 86% of these cases, the person being cared for is a family member (Central Statistics Office, 2016a).

The average number of hours spent providing care was reported to be 44.7 hours per week.

13% of females provide care compared with 8% of males who provide care. The age group with the highest rate for providing care is the 45-54-year age group (18%).

Older people and social integration in Ireland

While definitions of loneliness and social isolation are contested, there is some agreement that both are associated with a reduced quality of life for older people (Treacy, et al., 2004). According to the Institute of Public Health (Harvey & Walsh, 2016), chronic loneliness affects about 10% of older people and it has been found to predict a wide variety of mental and physical health outcomes. These include:

• depression,
• increases in nursing home admission and poorer quality of life.

Being integrated into the wider community can mitigate social isolation; positively, findings from the TILDA study show high levels of social engagement for older people. However, 6% of older women and 7% of older men in Ireland are socially isolated with older persons with poorer self-rated health, the most likely to be socially isolated.

Volunteering

Findings from the TILDA study show that:

• 25% of older people aged 65-74 do voluntary work at least once a week or more and this is higher for older people with higher levels of education.
• Similar proportions of older men and women (around 10%) are engaged in high-intensity voluntary work.
The Positive Ageing National Indicators Report 2016 (Healthy and Positive Ageing Initiative, 2016) reported that a higher percentage of older people in Ireland volunteer compared with their European peers (26% vs. 16%), with a total of 17% volunteering on a monthly basis. This suggests that older people in Ireland are more engaged with their communities. Areas where they are likely to volunteer are presented in Figure 11 and these range from community or social services (20%) to political parties (1%).

**Summary: Relationships in later life**

In summary, evidence, primarily from the TILDA study, shows that many older people in Ireland enjoy good relationships with their family, friends and community. Almost three-quarters (73%) of older adults live with their spouse or with a spouse and children, although this proportion decreases by age. The findings show that within families there is regular contact between parents and their adult children, as well as help from adult children with household chores and personal care. Financial transfers from parents to adult children are common and about 24% of households report having given a large financial or material gift to their child, while about 9% of older adults have received a financial transfer from their child.

Chronic loneliness affects about 10% of older people, although there is good evidence that older people in Ireland are relatively highly engaged with their communities. Activities such as volunteering are more common in Ireland compared with their European peers (26% volunteer compared with 16% EU average).

![Figure 11](image-url) | Organisations and associations people aged 50 years and older volunteer for either on a monthly or weekly basis (Kamiya & Timonen, 2016)
Key points: Relationships in later life.

• About 10% of older adults in Ireland have never married and this is more common among men than women.

• Strong family relationships among older people and their families have been identified and about three-quarters of older adults whose parents are still alive see their parents frequently.

• Financial transfers are common from ageing parents to adult children and about one in four have given a large financial or material gift in the previous 10 years.

• About one-quarter of older people provide some form of help to their neighbours and friends and about one-fifth receive some form of help.

• Older people in Ireland are more likely to volunteer compared with their EU peers (26% vs 16%).
Adverse relationship experiences
Adverse relationship experiences

The following section considers the consequences of significant relationship breakdown resulting in child abuse and neglect, domestic violence and elder abuse. Each of these areas can have significant and often detrimental physical, emotional, social and financial impacts on the lives of those involved affecting the wellbeing of individuals, families, communities and the State.

Child abuse and neglect

The structure and quality of relationships between family members are fundamental elements of family functioning and a major influence on the well-being of parents and children (Fahey, Keilthy, & Polek, 2012). There has been an increasing awareness of the need to protect children and there are many national and international legislative and policy provisions governing the protection of children in Ireland from abuse and neglect (Department of Children and Youth Affairs, 2013). Among others, these include:

- Child Care Act (1991)
- National Children’s Strategy (2000)
- Agenda for Children’s Services (2007)
- Better outcomes Brighter Futures (2013)
- The National Vetting Bureau (Children and Vulnerable Persons) Act 2012
- Children First Act 2015 enacted in 2015 which provides for mandatory reporting for key professionals

This increasing awareness is mirrored in the number of child protection referrals made to Tusla, the Child and Family Agency, and these can provide some indication of the scale of family breakdown. Figure 12 presents the number of referrals to the Child Protection Services and the number of children in the care of the State as reported by Tusla (2016).

Child abuse inquiries

There is evidence of the catastrophic impact of poor attachment and poor relationships between parents and children in Ireland, with a recent review of child protection failings in Ireland identifying 29 child abuse inquiries and reviews over the last 20 years (Buckley & O’Nolan, 2013). Five of these inquiries directly related to intra-familial abuse and neglect, including sexual abuse and familicide. These inquiries were:
• The Kilkenny Incest Case (McGuinness, 1993),
• The Kelly Fitzgerald Child Care Case (Joint Committee on the Family, 1996),
• The West of Ireland Farmer (Bruton, 1998),
• Monageer (Brosnan, 2008), and
• Roscomon (Gibbons, 2010).

The findings from these inquiries highlight challenges in the relationships between parents and children and the importance of assessment and early intervention, particularly by frontline staff. The issue of attachment was particularly highlighted in the Roscommon Childcare Case where staff’s awareness of attachment theory was identified as problematic. This report specifically recommended that:

All staff involved in child protection and welfare work should be knowledgeable about, and alert to, attachment theory and test their assumptions in supervision. (Gibbons, 2010; p89)

Other recommendations arising from reports highlight the importance of ensuring frontline staff are adequately trained in areas relevant to relationships including education in:

• assessment,
• primary prevention programmes,
• the psychology of inter-disciplinary and inter-agency collaboration,
• dynamics and processes of communication,
• identifying and dealing with emotional abuse and
• understanding and applying attachment theory.

**Homelessness**

There have been significant increases in rates of homelessness in recent times in Ireland. According to official statistics published by the Department of the Environment, 1,239 families with 2,546 dependents were homeless in February 2017. Other sources, such as Focus Ireland (2017), identify higher number of people who are homeless (6,500) and they report that:

The number of families becoming homeless has increased by over 40% since last year and one in three of those in emergency accommodation is now a child.

Data from a nationally representative survey of statutorily homeless families in England found that by far the most common ‘immediate triggering factor’ for homelessness (affecting 38% of all homeless families) was relationship breakdown (Pleace, Fitzpatrick, Johnsen, Quilgars, & Sanderson, 2008). This increased to 70% with young people. According to Denyer, Sheehan, and Bowser (2013), factors associated with this may include neglect, domestic violence and abusive family situation, family conflict and family homelessness.

These findings are also relevant in the Irish context; in a longitudinal study of 40 homeless youth, Mayock and Corr (2013) reported that a breakdown of family relationships and a history of State care were the two dominant experiences associated with young people becoming homeless.

**Summary: Child abuse and neglect**

In summary, this section has presented the scale of the problem of child abuse and neglect in Ireland. In 2015, 43,596 referrals about child abuse and neglect referrals were made to Tusla and over 6,388 children were in the care of the State. An increasing number of families with children find themselves homeless and managing and maintaining relationships in those situations is critical. Key issues arising in the reports on failures of the system to protect children highlight the need for all services to work together to prevent negative consequences and promote positive outcomes. Within this, relationships are key.
Domestic, sexual and gender-based violence

Data collected over a 20-year period from 1996-2016 in Ireland shows that 211 women were murdered during this time period and, of those women, over half (55%) were killed by their partners or exes (Women’s Aid, 2016). In almost half (46%) of these cases of homicide, no weapons were used and strangulation was the second highest mode of killing at 26%. Of the remainder:

- 31% of women were stabbed,
- 20% were beaten,
- 20% were shot and
- 11% were killed by other means.
- 13 children were murdered alongside their mothers.

Although the prevalence of domestic violence experienced by men is lower than women, it has been estimated that approximately 6% of men experience severe domestic violence (Watson and Parsons, 2005). Watson and Parsons (2005) also suggested that the abuse experienced by the men is less severe in comparison to that being experienced by the women. The figures of men experiencing abuse are likely to be underestimated, however, as men are much less likely to report such abuse to the Gardaí and there are far fewer services available for men experiencing this issue.

It has been estimated that domestic violence is costing the Irish economy €2.2 billion annually. (Women’s Aid, 2016)

SAFE Ireland is a membership organisation with 40 member services offering a range of supports to women experiencing domestic violence, including 23 which provide accommodation for women and children fleeing a violent partner or someone else with whom they are in a close but unsafe relationship (Safe Ireland, 2015).

In 2014, 9,448 women and 3,068 children received direct specialist support from domestic violence support services.

Safe Ireland conducted a survey of member organisations in 2014 asking them to report the number of women and children who sought support on a particular day. The findings show that on a single day in Ireland, 475 women and 301 children sought support from domestic violence services in Ireland. The report also notes that 79% of those involved in situations of domestic violence do not report it to the authorities (Safe Ireland, 2015).

The report also highlights the following impacts on women and girls:

- Health services: Women and girls experiencing violence utilise health services more frequently.
- Physical and mental health: There are lasting physical and mental effects resulting from complex trauma.
- Multi-generational: There is a multi-generational impact, with cycles of violence impacting on health and wellbeing across generations.
- Workplace: There is a loss of productivity and potential.
- Domestic violence results in poverty and homelessness.

EU comparisons with Irish situation

A recent international report by the European Union Agency for Fundamental Rights (2014) presented for the first time reliable and comparable primary data about women’s experiences of partner violence across the EU (based on 42,000 randomly selected women, approximately 1,500 per country, aged 18-74 years, across the EU’s 28 Member States). The findings relating to women in Ireland are presented below in Figure 13.

While the findings show that Irish women are
less likely than their EU peers to experience these types of violence and are more likely to contact the police about it, the figures are nevertheless very high.

Impact on children

In a review of the literature on the impact of domestic violence on children, Holt, Buckley, and Whelan (2008) found that these children are at increased risk of:

- experiencing emotional, physical and sexual abuse;
- developing emotional and behavioural problems; and
- increased exposure to the presence of other adversities in their lives.

They also highlighted a range of protective factors that can mitigate against this impact, in particular a strong relationship with and attachment to a caring adult, usually the mother. The impact of domestic violence on children has been examined in a qualitative study conducted with children and their mothers by Hogan and O’Reilly (2007), with the full report containing harrowing accounts of children and mothers’ experiences. The authors in reporting on children’s views stated that:

“For some, the man’s pattern of controlling behaviour was such that the children and their mother could no longer live with it. For others, the form of violence included overhearing, witnessing or being directly assaulted; for some of these children, being the eldest in their family seemed to create a context where they carried more of the worry and responsibility about the violence” (Hogan & O’Reilly, p.47).

The key finding of this report was that child-centred services for child victims of domestic violence are minimal and difficult to access. Outside of refuge-based child care services, few child-centred services are available to protect children and to address the impacts of domestic violence on them. The authors concluded that there is a need for a greater recognition by the professional system of the huge adversities experienced by child victims of domestic violence and an increase in community-based, child-centred supports to respond to their needs.
Summary: Domestic, sexual and gender-based violence

In summary, the consequences of domestic violence can be catastrophic and more than half of all women who were murdered over a 20-year period were killed by their partner. Men also experience domestic violence and a prevalence study conducted in 2005 reported that about 6% of men experienced severe domestic violence. It has been estimated that the issue costs the State €2.2 billion annually. Findings from a recent EU study reported the prevalence of domestic violence for women in Ireland from 8% (sexual violence) to 30% (psychological violence) and while these figures are lower than the EU average, they are nevertheless very high.

Domestic violence also impacts on children and the consequences for them can be severe and lifelong.

Elder abuse

When relationships go wrong in older life, the consequences can be devastating. There is an increasing awareness of elder abuse which has been defined as:

“A single or repeated act or lack of appropriate action occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person or violates their human and civil rights” (Naughton, et al., 2010).

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<th>Physical abuse</th>
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<tr>
<td>Physical abuse has been defined as the non-accidental infliction of physical force that results in a bodily injury, pain or impairment. Physical abuse may include hitting, slapping, pushing, kicking, misuse of medication and inappropriate restraint.</td>
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<th>Psychological abuse</th>
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<td>Psychological or emotional abuse may include the persistent use of threats, humiliation, bullying, intimidation, isolation, spreading and other verbal conduct that results in mental or physical distress.</td>
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<th>Financial</th>
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<td>Financial or material abuse has been defined as the unauthorised and improper use of funds, property or any resources of an older person. This may include theft, coercion, fraud, misuse of power of attorney and not contributing to household costs where this was previously agreed.</td>
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<th>Sexual abuse</th>
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<td>Sexual abuse refers to any sexual acts to which an older person has not or could not consent, including talking to or touching in a sexual way.</td>
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<th>Neglect</th>
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<td>Neglect refers to the repeated deprivation of assistance needed by an older person for important activities of daily living. This may include ignoring or refusing to help with physical care needs, failing to provide access to appropriate health services or withholding necessities such as adequate nutrition and heating.</td>
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<th>Discriminatory</th>
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<td>Discriminatory abuse may include racism, ageism, discrimination based on disability, other forms of harassment, slurs or similar treatment.</td>
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<th>Institutional abuse</th>
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<td>Institutional abuse may occur within residential care and acute settings including nursing homes, acute hospitals and any other in-patient settings, and may involve poor standards of care, rigid routines and inadequate responses to complex needs.</td>
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**Figure 14** Types of elder abuse (National Centre for the Protection of Older People, 2017)
There are many different types of elder abuse and these have been categorised by the National Centre for the Protection of Older People (2017) (Figure 14).

**Prevalence of elder abuse**

A national study on elder abuse and neglect (Naughton, et al., 2010) reported the overall prevalence of mistreatment in the previous 12 months to be 2.2%. Using this 2.2% and based on population statistics, it was estimated that the number of older people who have experienced mistreatment is approximately 10,201. The data presented in Figure 15 is drawn from the 2014 report on referrals to the HSE for elder abuse and provides a breakdown of the main categories of abuse (Health Service Executive Elder Abuse Service, 2015). Psychological and financial abuse account for the highest proportion of referrals and it is noted that the referral rate is between three and a half and four times greater in the over 80 year-olds when compared to the 65-79 year age category.

The Public Health Nursing service continues to be the main referral source, followed by hospital (14%) and family (13%). There was a significant increase in the number of concerns that first originated from older people themselves, from 19% in 2013 to 26% in 2014.

**Summary: Elder abuse**

In summary, there is an increasing awareness of the extent and impact of elder abuse and it is acknowledged as a potential threat to older people. A national study reported the prevalence of older people’s experience of abuse and neglect at 2.2%, including psychological, physical and financial abuse, as well as neglect.

![Diagram of elder abuse types](image)

**Figure 15** | Percentage of elder abuse by type (Health Service Executive Elder Abuse Service, 2015)
Key points: Adverse relationship experiences

- In 2015, 43,596 referrals about child abuse and neglect referrals were made to Tusla.

- At the end of 2015, 6,388 children were in the care of the State.

- Reasons why children need care and protection include:
  - parental mental, physical or intellectual disability;
  - parental drug or alcohol abuse; and
  - child abuse and neglect.

- There have been 29 child abuse inquiries and reviews over the last 20 years.

- The number of families becoming homeless has increased by over 40% over the last year and one in three of those in emergency accommodation is now a child.

- More than half of the 2,011 women who were murdered over a 20-year period, were killed by their partner.

- Men also experience domestic violence and a prevalence study conducted in 2005 reported that about 6% of men experienced severe domestic violence.

- It has been estimated that the issue costs the State €2.2 billion annually.

- Findings from a recent EU study reported the prevalence of domestic violence for women in Ireland from 8% (sexual violence) to 30% (psychological violence) and while these are lower than the EU average, they are nevertheless very high.

- Domestic violence also impacts on children and the consequences for them can be severe and lifelong.

- The prevalence of elder abuse has been estimated to be 2.2%.

- In 2014, there were 2,592 referrals made to the HSE elder abuse service which is an increase of 5% on referrals from 2013.
Conclusion
Conclusion

This report presents data on relationships in Ireland across the life cycle from infancy to old age and in settings as diverse as the home, the workplace and the community. Irrespective of age or setting, the findings are consistent: relationships matter to everyone. Good relationships have a positive impact on health and wellbeing and poor relationships have a negative impact.

Ag Eisteacht - Relationships are at the heart of what we do
stress. Consideration needs to be given in both public and private sector settings about how to actively support positive relationship development and maintenance. The literature is clear: happy workers are more productive.

Volunteering, being part of groups and clubs and knowing your neighbour are all indicative of being engaged with the community. Strong neighbourhoods are built on good relationships and while Ireland traditionally has had close knit communities, the evidence suggests that individuals are less likely to take part in group or club activities compared with 10 years ago. It is important to recognise this and to take steps to actively support communities.

Adverse relationship experiences have significant negative mental and physical health consequences. These relationships can present themselves in childhood as child abuse and neglect and it is notable that 43,596 referrals about child abuse and neglect referrals were made to Tusla in 2015.

Domestic, sexual, and gender-based violence is prevalent in Ireland and findings from a recent EU study reported that 8% of women in Ireland experienced sexual violence and up to 30% experienced psychological violence. A study conducted in 2005 reported that about 6% of men experience severe domestic violence. It has been estimated that this type of violence costs the State €2.2 billion each year and this highlights the need to support positive relationship development through the life cycle including into old age. A recent report estimated that 2.2% of older people in Ireland experience some form of abuse.

In summary, the data presented in this report suggests there are many positive aspects around relationships in Ireland but there are also many areas where greater support is required.

Actively supporting the development and maintenance of good relationships pays dividends in terms of better health, wellbeing, increased productivity and decreases in couple and family breakdown.
References


