

Domestic Violence and Abuse

Strengthening Understanding & Awareness

January 2024

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Content warning: This resource document discusses and describes domestic violence and abuse which may be distressing for some. Supports and resources can be found on pages 16 and 17 if required

1. Introduction

Employers have an important role to play in society's response to domestic violence and abuse. By increasing awareness and understanding of domestic violence and abuse, we can not only signpost victims and survivors towards appropriate specialist resources and organisations, we are also contributing towards breaking the stigma associated with domestic violence and abuse.

Managers, HR Departments and colleagues are not expected to take on the role of 'counsellor' when encountering a domestic violence and abuse situation in a workplace context. However, managers and/or colleagues may be the only people outside the home that a victim or survivor interacts with on a regular, if not daily basis. This means that co-workers may be uniquely positioned to recognise signs of domestic violence and abuse, provide support and signpost pathways to appropriate support services.

It is recognised that domestic violence can impact victims or survivors in the workplace in many different ways and can have a significant impact on performance, attendance, career progression, loss of earnings etc. Therefore, managers and HR Departments in particular should be aware of the impacts of domestic violence and abuse when supporting and managing performance at work.

2. Purpose of this resource

This information resource aims to provide additional guidance for managers and staff to broaden their understanding and perspectives on how domestic violence and abuse affects staff and how employers can support and signpost pathways to specialist support organisations.

This resource also makes reference to how managers might respond where a staff member may recognise that their own behaviour may be violence or abusive towards someone they have a domestic relationship with and divulges this in the workplace.

As national and organisational supports and resources develop over time, this resource may be updated periodically to reflect developments in the area, including training, awareness campaigns and additional support resources.

The HSE National Social Inclusion Office provides further information and links to relevant documents on domestic, sexual and gender-based violence here.

The HSE Domestic, Sexual and Gender Based Violence (DSGBV) *Training Module 1 – Awareness* is now live on HSELanD. This eLearning module is aimed at all HSE staff and

staff from funded services and it features information about DSGBV in all its forms, its prevalence and impacts on specifics communities, as well as provide information about the national policy context and relevant legislation. You can access the module here – HSE Domestic, Sexual and Gender Based Violence (DSGBV) Training Module 1 - Awareness. You can also find it by using the "search a module" tool with the key word "DSGBV". Modules 2, 3 and 4 will focus on recognising, responding and referring victims of DSGBV respectively.

3. National context

Ireland has developed its third national strategy on domestic, sexual and gender-based violence ("Zero Tolerance - Third National Strategy on Domestic, Sexual & Gender-Based Violence – 2022 to 2026"). The end goal is zero tolerance in Irish society of Domestic, Sexual and Gender-based violence of which domestic violence and abuse is a component.

The Third National Strategy is built on four pillars:



The introduction of statutory domestic violence leave and workplace supports falls under **Pillar 2** of the Strategy— '**Protection'**. The introduction of the HSE Policy on Domestic Violence for Public Health Service Employees underscores our commitment to supporting our staff and contributing towards the national strategy of zero tolerance towards domestic, sexual and gender-based violence. The Third National Strategy and Implementation Plan are available here

"The goal and guiding mission of this strategy is clear: Zero Tolerance of domestic, sexual and gender based violence. Zero Tolerance means realising that we have allowed gender-based violence and abuse and the attitudes and assumptions which underpin it, inflict misery on too many for too long, but know now that radical change is required".

4. Domestic violence and abuse – impacts on individuals, teams and the wider workplace

Domestic violence and abuse is a form of power and control and can impact a victim or survivor in the workplace in a number of ways. Domestic violence and abuse may be described as:

'....a pattern of controlling, coercive, threatening and/or violent behaviour occurring in a domestic context, including behaviour that has the object or effect of enabling one person to exert power and control over another ... Domestic violence and abuse may occur between individuals who are or have been intimate partners (whether or not the perpetrator shares or has shared the same residence with the victim), in LGBTI+ relationships or between people who are family members or household members. Domestic violence and abuse victims or survivors can come from all walks of life and may experience other areas of marginalisation and vulnerability, such as age, disability, or sexual orientation, which are often targeted by the perpetrators of abuse".

Impacts in the workplace and on work performance include:

- Performance, quality of work, output of work suffers.
- Attendance absences, difficulty getting to work on time, having to leave early.
- Fluctuating mood and increased anxiety levels.
- Being distracted, finding it difficult to concentrate.
- Being harassed while at work by a perpetrator by phone, email or messages.
- In some cases, working alongside an alleged perpetrator.
- Feeling there is no option but to give up work entirely.
- Fearing for their own safety and the safety of colleagues in the workplace.

Where a colleague is experiencing domestic violence and abuse, this can also impact their co-workers in the following ways:

- Feelings of concern, worry, or stress for a colleague who is going through a very difficult experience.
- Fears for the safety of a colleague and their own safety where a workplace safety risk has been identified.
- Having to deal with calls or visits from an abuser to the workplace.
- Feelings of increased pressure to cover the workload of a colleague who is dealing with the consequences of domestic violence or abuse.
- Fearing the safety of other family members left at home with a perpetrator during working hours.
- Potential conflict within teams caused by the need to change schedules, rotas and workloads.

Isolation

Expressing jealousy about time spent with co-workers. Forbidding a partner to work with or socialise with certain co-workers. Stopping a partner from getting to work.

Emotional abuse

Abusive phone calls, emails, texts at work. Telling a partner that they are incompetent in their job. Telling a partner that they do not deserve or will never get a raise/promotion.

Intimidation

Checking up on a partner to make sure they are at work or to see who they are working with. Stalking a partner at work.

Minimising, denying and blaming

Acting like a supportive spouse around bosses/co-workers. Denying responsibility for a partner being late or absent at work as a result of abuse.

Power and Control

Threats

Threatening
to tell lies about
a partner to their
boss/co-workers.
Threatening to come to
the work place and harm
a partner/co-workers.
Threatening to destroy
needed work clothing or
work equipment.

Economic abuse

Taking all or part of a partner's earnings without consent.

Masculine privilege

Insisting that it is the sole responsibility of a partner to organise their work schedule around childcare, eldercare or other family responsibilities.

Using children

Failing to show up for childcare so that a partner cannot go to work.

Impact of Domestic Violence and Abuse at Work

Source: International Labour Organisation (ILO) and UN Women Handbook, 2019

5. Broadening our perspectives - myths around domestic violence and abuse

Myths and misconceptions persist around domestic violence and abuse in society. These are perpetuated by the fact that it may be seen as a 'private matter'; the perceived stigma resulting in a reluctance to talk about abuse (particularly in the workplace) and a misconceived view that victims can or should 'walk away'.

• "Domestic abuse always involves physical violence"

Reality: Domestic abuse does not always include physical violence. Abuse can include coercive control¹; psychological and/or emotional abuse; physical abuse; sexual abuse; financial abuse; harassment; stalking; and/or online or digital abuse.

"Alcohol and drugs make people more violent or likely to abuse"

Reality: Alcohol and drugs do not cause domestic abuse. They can, however, be a catalyst for violence or abuse, or make existing abuse worse. The perpetrator alone is responsible for their actions.

"Abusers are mentally unwell"

Reality: There is no research that supports this. Abuse and violence are a choice and happen at every level of society, regardless of health, wealth or status.

• "Domestic abuse is a private family matter and not a social issue"

Reality: Violence and abuse comes at a cost to wider society in terms of impacts on health services, court proceedings, legal fees and imprisonment as well as the psychological and physical impact on those who experience it. Viewing domestic violence and abuse as a 'private family matter' is akin to permitting or condoning it.

¹ Coercive control is defined on page 3 of the Domestic Violence and Abuse Policy

• "A person doesn't have to stay in an abusive relationship or situation"

Reality: There are many reasons why a person stays in an abusive relationship – it can be very difficult to leave - for emotional reasons, needing somewhere to live for themselves and/or children, financial reasons, a lack of family or wider support due to isolation. It is not for someone else to make judgements on the reasons a person may choose to stay in a relationship (intimate or not).

"Domestic abuse isn't that common"

Reality: According to Women's Aid, through their work with survivors and local services, domestic abuse is very common:

'One in four women in Ireland who have been in a relationship have been abused by a current or former partner'...Women's Aid reported that there was 'a record high number of domestic abuse contacts with Women's Aid in 2022 with the organisations support workers hearing 33,990 disclosures of domestic abuse against women and children'.

In 2022, the Chief Executive of Men's Aid revealed that:

'....approximately 8,000 contacts to the service were received since January 1, 2021 — up from just over 5,000 in 2020' and that 'the majority of abusers in the 8,000 cases were women — accounting for 94%.'

• "Domestic abusers can be 'provoked'"

Reality: Believing that someone can be provoked into violence or abuse by a victim is placing the blame on that victim and relieving the abuser of responsibility for their actions. The victim is never to blame.

• "Women often lie about abuse"

Reality: False allegations around domestic violence are rare:

'False allegations about domestic abuse are extremely rare. The Crown Prosecution Service (UK) released the first ever study of this in 2013, and concluded that false allegations are even more infrequent than previously thought. In the 17 month period that the study examined, there were 111,891 prosecutions for domestic violence and only six prosecutions for making false allegations'.

Fear of being called a 'liar' can deter someone from reporting or seeking supports.

• "Arguments happen"

Reality: Whether it be in an intimate partner relationship or within families, it is not uncommon for disagreements to occur – disagreements are not necessarily an indicator of abuse. As outlined in the definitions of the policy, abuse is the use of physical, sexual, emotional, or psychological violence or threats to control the thoughts, opinions, behaviours or emotions of someone else. Disagreements are generally a discussion between equals; abuse is not, with victims fearing they may say the 'wrong' thing. There may however be a point where arguments intensify and may cross a line into abuse.

6. Broadening our perspectives – reluctance to talk about domestic violence and abuse

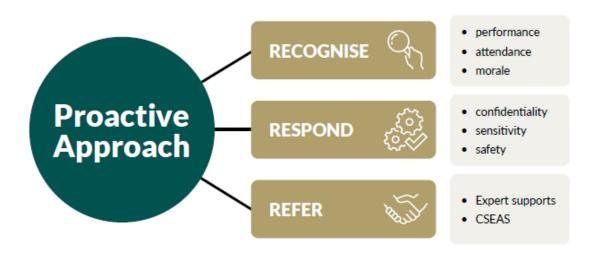
The purpose of the Domestic Violence and Abuse policy is to encourage discussion around domestic violence and abuse so that colleagues can be supported and directed towards appropriate support services. However, as managers, HR departments and colleagues, we must also understand and respect that a staff member may decide not to make a disclosure after concerns for their wellbeing have been expressed to them. There may be reasons for this, such as:

- Denial that what they are experiencing is domestic violence or abuse.
- Fear of not being believed.
- Not wanting to be seen as a 'victim'.
- Embarrassment, shame.
- Worries their job will be negatively affected.
- Fear of negative consequences for their job security.
- Fear of reprisal from the perpetrator.
- · Fears around confidentiality.
- Lack of trust in management, HR departments or their colleagues.
- Feeling that talking about it in work won't make any difference to their circumstances.

- Wanting to protect the perpetrator.
- Fear that this will impact their family or children down the line in some way, or fears around mandatory reporting.
- Not having the resources to change their circumstances.
- Feeling it is a personal issue, not to be discussed in the workplace.

A decision to confide in someone in the workplace about domestic violence and abuse is strictly one for the victim or survivor. As managers and colleagues, we should respect this decision and understand the possible reasons for it. However, with the introduction of national workplace policies on domestic violence and the push for societal change that adopts a stance of zero tolerance, as managers and/or colleagues, we should aim to be proactive in our approaches to recognising, responding and referring to appropriate supports.

7. Being proactive - 'Recognise, Respond, Refer'



Managers, colleagues, HR Departments and Employee Assistance Programmes (EAPs) play a key role at a local level in creating a work environment that is open and where a victim feels safe to speak about domestic violence and avail of supports if and when they need them.

To foster a culture where wellbeing is prioritised and kept on the agenda, managers should be conscious to build in time to check in with staff regularly regarding their emotional wellbeing (this is particularly important in a hybrid working environment). Creating a culture where emotional wellbeing is recognised will make it easier for managers and staff to approach potentially challenging topics when they arise.

Recognise the problem

The nature of employment means that we, as colleagues and managers, spend a significant amount of time with each other and may therefore be in a position to notice changes in

behaviour, demeanour, or appearance, which could indicate that a colleague is being impacted by domestic violence and abuse. Indicators may include:

Work productivity and/or quality

- Changes in working patterns, eg. attendance, lateness, leaving work early.
- Decreased quality and quantity of work, not reaching targets or deadlines.
- Spending a lot of time or hours at work when not required to.
- Avoiding phone calls, emails or a strong reaction to receiving calls or emails.

Behaviour or demeanour

- Anxious, tearful, aggressive, depressed, distracted, quieter than usual.
- Never discusses or appears secretive about home life.
- Isolates themselves from colleagues or stays away from work gatherings.
- Hyper-focussed on timekeeping.
- Expresses concern about their children being at home.

Physical signs

- Visible injuries, bruising, with unlikely explanations.
- Changes in dress or makeup in an effort to hide or mask evidence of domestic violence.
- Appears fatigued or has sleep issues.
- Misusing substances.

Blended/hybrid working environment

It may be more difficult to recognise signs of domestic violence and abuse in a blended/hybrid working environment. Many of the above signs will still apply. Additional signs in a blended/hybrid working environment include:

- Someone else always walks into the room or past their screen when in remote meetings.
- A staff member never turns their camera on or stops turning it on, particularly if they always used to.
- A staff member has continual IT issues or their equipment is never working (not always a red flag, but a perpetrator may sabotage equipment in an effort to exert control).

In a remote or blended work environment, it is important to ensure you keep in regular if not daily, contact with team members.

Respond appropriately

A tactful, cautious and empathetic approach is required when asking staff how they are and if any changes could be made to make them feel safer.

- When meeting to discuss sensitive matters, managers should consider the meeting environment with particular awareness around confidentiality and discretion for those involved. Whether it should take place on site, away from the office or virtually should be determined by the need to ensure the comfort, privacy and safety of the staff member.
- Language opening a conversation around domestic violence where there are suspicions or concerns is difficult and may feel uncomfortable. When starting a conversation, use indirect, non-threatening questions:
 - How are you feeling?
 - o How are things at home?
 - o If you need support with anything, just let me know.
 - You don't have to tell me anything, but know that I would like to support you if and when you feel ready.
 - o I have noticed that you seem distant and upset, is everything alright?
 - o Is there something troubling you? If you need a chat, I am here for you.
 - o How are you coping with the workload? Do you need any extra support?
- Use open body language and give space so the staff member doesn't feel threatened.
- Show compassion and empathy during any conversation.
- Listen and assure the staff member that you believe what they are saying.
- Reassure the staff member that you understand that their situation may affect their work performance and outline the supports that can be availed of.
- Do not assume that you know what a staff member needs or know about what they may be experiencing.
- Be familiar with the policy in advance of any discussion and be aware of the support options, eg. statutory leave, flexibility, adjustments to work arrangements and support services contacts.
- Be aware of obligations under Children First so these can be communicated.
- If the staff member and alleged perpetrator work in the same department/organisation, the alleged perpetrator may have access to personal information, depending on their role. If this situation arises, it is best practice to immediately review security measures, including access to personal information files.
- Caution around sudden changes toward the alleged perpetrator (if in the workplace) needs
 to be considered, particularly if the victim/survivor of the abuse has not yet made the decision
 to leave the alleged perpetrator.
- Check in with the staff member regularly and remind them of available supports, such as an Employee Assistance Programme and external networks.
- Have this information to hand (eg. contact details for Women's Aid, Men's Aid and the Rape Crisis Centre). These details are available in Appendix 1.
- In a sensitive manner, follow up on what (if any) support is needed, as this may change on a frequent basis if the individual's circumstances change.
- Allow the staff member to use the organisations telephone or computer to access support and the privacy to do so.

• If a staff member or colleagues are in immediate danger, contact the Gardaí.

Refer

Being able to point a staff member affected by domestic violence and abuse towards specialised and expert support services is a key way in which managers can provide support. In referring a staff member to pathways to support, it is important to:

- be familiar with the HSE Policy on Domestic Violence for Public Health Service Employees.
- know where to access the details of specialist services (contained in the appendices
 of this resource document).
- have the contact details of the organisation's EAP to hand.
- if you are unsure of how to approach a conversation about potentially referring someone to specialist services or need further information on specialist services, contact the EAP for advice.
- take into consideration staff in remote or hybrid working scenarios and, where possible, find ways to provide information on resources in a confidential manner, or in-person if appropriate.



Where an alleged perpetrator works in the same workplace as a victim or survivor, the *HSE Policy on Domestic Violence for Public Health Service Employees* states:

'Employers will hold alleged perpetrators accountable for incidents of domestic violence and abuse committed in the workplace, during work hours or through work equipment regardless of whether the person targeted by the abuse is employed in the same organisation or not. In such cases, disciplinary procedures may be invoked with potential sanctions up to and including dismissal. All employees should also be aware of their obligations under the Department of Health Code of Conduct here.'

In the above instance, line managers may seek advice from their HR Department on the implementation of the Disciplinary Procedure where appropriate, in line with fair procedures.

There may also be situations where a staff member recognises that their own behaviour may be violent or abusive towards someone they have a domestic relationship with outside the workplace. They may express a desire to achieve behavioural change. In these circumstances, it is recommended to direct the staff member to the EAP, who are best placed to provide direction to appropriate support services.

Record keeping

Where it is agreed to keep records relating to a staff member's disclosure, these should not be held with or on the staff member's personnel file. Managers should consider a secure location (for example, a dedicated locked filing cabinet in a secure room). Electronically stored records should be password-protected. The express permission of the staff member should be received to hold records (except where there may be a mandatory reporting requirement relating to child protection and/or welfare concerns).

It may be appropriate to maintain records in the following circumstances:

- Details of the agreed safety plan, if any.
- Administrative data, such as approval of special paid leave.
- Details of abuse occurring in or near the workplace or using workplace equipment.
- With the consent of the staff member, records that may support them with further action in the future (eg., information they may wish to provide to their legal advisor).
- Where there are mandatory reporting requirements, for example under Children First, there may be a requirement to retain records. These records will only be used for the intended purpose and will be kept securely.

8. The role of the HSE EAP

The HSE EAP is committed to supporting the safety, wellbeing, and emotional health of all HSE employees. Every member of staff will be treated with respect, dignity, and care. The EAP will aim to support victims or survivors through the principles of trauma-informed practice, supporting safety, trust, choice, collaboration, empowerment and cultural consideration.

Line managers, HR departments, staff who are supporting someone, and most importantly, a victim or survivor themselves, are welcome and encouraged to access EAP wellbeing supports.

9. Training

As outlined earlier, it is not the role of colleagues and managers to provide counselling to staff. Victims and survivors are best served by speaking to experts and specialist services who can provide expert support. However, it is important that staff receive awareness training so that they can contribute to the welfare and safety of others in the work environment and have a basic understanding of the nature and consequences of domestic violence and abuse.

As well as increasing awareness, developing knowledge in this area will equip staff with the basic behaviours and skills to sensitively manage any disclosures of domestic violence and most importantly, to be able to direct an affected person to the appropriate support and resources.

Training initiatives include:

- E-learning modules (always available)
- Training for named contact persons
- Periodic awareness seminars and webinars

Appendix 1 Contacts

Women's Aid

24hr National Freephone Helpline: 1800 341 900

Email: info@womensaid.ie

www.womensaid.ie

LGBT Ireland

National Helpline: 1890 929 539

Transgender family support line 01 9073707

(open Tuesday/Sundays)

On-line chat support service

Peer support services

www.lgbt.ie

Men's Aid

National Confidential Helpline: 01 554 3811 (Mon - Fri, 9.00am to 5.00pm)

Email: hello@mensaid.ie www.mensaid.ie

Men's Development Network

Male Advice Line Freephone 1800 816 588

www.mensnetwork.ie

BeLonG To

LGBTI+ youth support organisation for young people aged between 14-23 years

Tel: 01 670 6223 Support Services

Email: info@belongto.org

www.belongto.org

MOVE Ireland (Men Overcoming Violence)

Provides Domestic Violence Perpetrators Intervention Programmes for men where they are challenged to take responsibility for their abuse and to change their attitudes and behaviour and develop respectful, non-abusive relationships.

www.moveireland.ie

TENI (Transgender Equality Network Ireland)

Gender Identity Family Support Line 01 9073707

www.teni.ie

SAFE Ireland

Programme for creating safety for women and children with a focus on research, public policy and awareness and provision of training.

- Contacts for National Services
- Advice for Employers

www.safeireland.ie

Tusla

The State Child and Family Agency Operates under the Child and Family Act 2013

- Reporting Concerns Child protection and welfare services
- Domestic and Gender Based Violence Services
- Family Resource Centres

www.tusla.ie

Dublin Rape Crisis Centre

24-hour helpline: 1800 77 8888

- Webchat support service (Mon Fri, 10.00am to 5.00pm (excl. bank holidays)
- Counselling & therapy services

The Courts Service of Ireland

www.courts.ie

Citizens Information

www.citizensinformation.ie

Legal Aid Board

www.legalaidboard.ie

www.drcc.ie

HSE Sexual Assault Treatment Units

Information on care options if you have been raped or sexually assaulted.

https://www2.hse.ie/services/satu/

An Garda Síochána

www.garda.ie

Appendix 2 Resources

Women's Aid Publications

Available at: https://www.womensaid.ie/get-informed/publications/

- Impact Report: Annual Statistics report
- Femicide Watch 2019
- Child Custody and Access in the Context of Domestic Violence: Women's Experiences and the Response of the Legal System
- Responding to Violence against Women with Disabilities
- Casualties of Violence: Violence against Women An Issue of Health
- Vision Action Change: Feminist Principles and Practice of Working on Violence against Women
- Safety & Sanctions: Domestic Violence and the Enforcement of Law in Ireland
- Making the Links: Towards an Integrated Strategy Towards the Elimination of Violence against Women in Intimate Relationships with Men

Men's Aid

Men's stories

Still Here - Public Awareness Campaign

<u>Still Here</u> (Department of Justice, Public Awareness Campaign – contains information, resources and contacts)

Drug & Alcohol Information & Support

https://drugs.ie/

Safe Ireland

<u>Understanding Domestic Violence</u> <u>Information for male victims</u>

HSE: Health Service Executive

HSE – Recognise the signs

Irish Immigration and Naturalisation Service (INIS)

Immigration Guidelines for Victims of Domestic Violence

Pavee Point - Violence against Women Programme

Information resources for Traveller Women experiencing domestic violence

European Agency for Fundamental Rights (FRA)

<u>EU survey on gender-based violence against women and other forms of interpersonal violence.</u>

Appendix 3 Case Studies

Niamh's Story

Niamh grew up in a home environment where domestic violence was a frequent occurrence. As an adult, she promised herself that she would never allow herself to be part of an abusive relationship.

Niamh graduated with a degree in accounting, and was on the road to developing a successful career in the Health Service in a finance position. Niamh met Jason via mutual friends on a night out and was married at the age of 27.

In the beginning everything was fine, however, as time went on, Jason started to abuse alcohol on a frequent basis. This increasingly led to fights and arguments. Jason began trying to control every aspect of Niamh's life – the friends she saw, career decisions, even when she saw her sister and her family, whom she is very close to. The on-going arguments intensified, and eventually became violent.

Niamh knew that the control and violence was incredibly wrong, she knew that she did not want a life similar to the one she grew up in. At the same time, she couldn't forget the person she met and thought if she could just help him, if the alcohol wasn't an issue, if his job wasn't so pressurised, things would change.

Despite the stressful home environment, Niamh continued to excel in her career. Jason came home one day and said he had been let go from his job, and she later found out that he had been intoxicated at work on a number of occasions, threatened co-workers and had been given a number of warnings before being dismissed.

With Jason at home constantly, the abuse and violence escalated. He even resorted to stealing money from Niamh. Niamh's job offered a lot of flexibility, including working at home for part of the week. However, Niamh found herself working at the office and staying there for as long as she could to avoid confrontation.

Over time, Niamh's manager noticed that she had become quiet and withdrawn. Whilst other staff members were enjoying the flexibility and productivity of their hybrid working arrangements, Niamh was arriving in work early and leaving late when she wasn't required to. At the same time, Niamh did not join colleagues on any work social events that were regularly organised.

One day, when meeting with Niamh about a work project, her manager noticed she was particularly distracted and appeared to have bruises and scratches around one of her wrists. Niamh's manager had read the HSE Policy on Domestic Violence for Public Health Service which had been recently circulated. She realised that if she was going to raise concerns with Niamh, she would have to be very sensitive in doing so, but she felt that as they were alone and in private, she could try to open up the conversation. "Is everything okay at home Niamh? Is there anything you want to talk about – you don't have to of course, but if you are struggling with anything, you can talk to me.... we have employee assistance supports here that you can avail of for a range of personal issues and you don't need to manage them alone.....".

Niamh always prided herself on putting on a brave face at work, she was good at her job and she didn't want anyone to look at her with pity, or feel she couldn't manage her own life. At the same time, she felt totally alone and was already struggling to keep on top of work as she just couldn't concentrate..... her manager had spoken to her with such empathy and was so sincere. Niamh decided in that moment to say something — ".... things are actually very difficult at home at the moment, and I just really don't know what to do or where to turn....."

Niamh knows she has a difficult journey ahead of her, but after talking to her manager, she has decided she is going to make contact with the EAP as a first step and take things from there.

Mark's Story

Mark had come out of a long term relationship and wasn't really looking to settle down. Sheila was part of a local running group he had joined and they had a lot in common. Eventually they started dating and to his surprise, the relationship got serious very quickly. Sheila was funny and outgoing, but she had confided to him early on in the relationship that she had experienced a difficult childhood. Mark was proud that Sheila had overcome her difficult childhood and through hard work on her part, had become the vibrant person she was today.

After 15 months together, Mark and Sheila decided it made sense to buy a house together. Mark was employed in the public health service and Sheila had a regular contract at a yoga studio and they were able to buy a modest two bedroom cottage in Dublin.

Mark was looking forward to decorating and putting their own stamp on the house, but from the outset, Sheila wanted to take control of everything, from decorating to furniture. Mark saw flashes of irritation in Sheila when he suggested anything house related and eventually just decided to let Sheila take control of that aspect – buying a house is stressful, and things would settle down eventually.

Life and work took over, and Mark got promoted in his work, whilst Sheila started teaching evening courses in yoga as well as daytime courses. Mark began to notice after a period of time that Sheila seemed to hone in if anything was out of place in the house, everything had to have its place, there were 'rules' he had to follow on where he put his stuff. He had intended to invite his closest friends over to see the house, but somehow didn't feel comfortable and was unsure of how Sheila would react, she had been very dismissive of any type of house warming, despite the effort they had put into the house.

After 6 months of living together there was an air of tension in the house that was just building over time. Sheila now regularly shouted at him for the slightest of reasons, ignored him for days on end, then apologised profusely saying she was just finding it difficult to cope at the moment. Mark felt like he was walking on eggshells and was relieved that a trip to Madrid for his best friend's stag do was coming up.

Sheila had started a huge argument the night before the trip about a gutter that needed to be cleaned and Mark tried to contain things as he was just focused on having a break. Sheila apologised in the morning before his flight, but Mark had a sense of unease. Nonetheless, he went and enjoyed the break.

Mark realised in the taxi home that he was dreading coming home, he did know what he would be facing. When he opened the door, the house was in darkness, and Sheila was sitting on the couch and she immediately came towards him and started screaming at him about not texting her enough whilst he was away.

Mark had confided in a friend whilst he was away and began to realise that he wanted to get out of this relationship for the sake of his mental health and now physical health. His friend had advised him to firstly see a solicitor about the house and encouraged counselling as he didn't seem to be the same person as he used to be.

When back at work later that week, Mark looked up the details of the EAP - maybe they could point him in the direction of counselling services. He noticed a section on the site on 'domestic violence'. He thought that didn't apply to him, there was just that one instance with the phone, but he clicked on the information anyway. Slowly he began to realise there had been months of control, gas-lighting, he was isolating himself from everyone just to keep the peace. He still wasn't convinced it was domestic abuse, but decided to pick up the phone and speak to someone and get any advice he could.

The employee assistance officer was very reassuring and provided him with the contact details for a support organisation. Mark was also made aware that he was entitled statutory leave (5 days in 12 months) if he need to make an appointment to get legal advice on the house situation at some time in the future. With this advice, Mark seriously started to consider his options for the future and took the first step of applying for statutory leave so that he could get legal advice and now had the name of a support service for men that he decided to make contact with.