



# **Growing Up in Ireland**

National Longitudinal Study of Children

## THE LIVES OF 20-YEAR-OLDS: MAKING THE TRANSITION TO ADULTHOOD





# **Growing Up in Ireland**

National Longitudinal Study of Children

### THE LIVES OF 20-YEAR-OLDS: MAKING THE TRANSITION TO ADULTHOOD

Desmond O'Mahony, Eoin McNamara, Rebecca McClintock, Aisling Murray, Emer Smyth and Dorothy Watson







An Roinn Leanaí, Comhionannais, Míchumais, Lánpháirtíochta agus Óige Department of Children, Equality, Disability, Integration and Youth

Copyright © Government of Ireland 2021

This Open Access work is licensed under a Creative Commons Attribution 4.0 International License, which permits use, distribution, and reproduction of the original work, provided that the original work is properly credited. Further information about this Creative Commons license is available at: https://creativecommons.org/licenses/by/4.0/.

The logo of the Department of Children, Equality, Disability, Integration and Youth, or the logo of *Growing Up in Ireland*, may not be re-disseminated for commercial purposes.



#### ACKNOWLEDGEMENTS

This report represents a culmination of a large body of work by a group of dedicated colleagues. Sincere thanks to all the interviewers who connect us to thousands of households across the country. Thanks too to our colleagues in *Growing Up in Ireland* who coordinate the fieldwork, prepare the data and otherwise make the study a reality. Thanks are also due to *Growing Up in Ireland* Research Assistant, Brendan Duggan for providing additional help with the final preparation of the report text.

We thank the independent reviewers, colleagues in the Department of Children, Equality, Disability, Integration and Youth, and members of the *Growing Up in Ireland* Steering Group who provided very useful feedback and insight on earlier drafts of this report.

Finally, the authors wish to express their sincere gratitude to the thousands of young adults and their families who continue to support the *Growing Up in Ireland* study. The study will continue to grow and adapt along with their lives.

Name	Title	Institution
Desmond O'Mahony	Research Analyst	ESRI
Eoin McNamara	Research Analyst	ESRI
Rebecca McClintock	Research Assistant (former)	ESRI alumna
Aisling Murray	Senior Research Officer	ESRI
Emer Smyth	Research Professor, Co-Principal Investigator	ESRI
Dorothy Watson	Research Professor, Co-Principal Investigator (retired)	ESRI alumna

#### CONTENTS

EXEC	UTIVE SUMMARY	13
CHAF	TER 1: BACKGROUND TO THE REPORT	19
1.1	Introduction	20
1.2	Focus of this wave	20
1.3	Context for this cohort: Boom and bust	21
1.4	Overview of survey implementation	22
1.5	Contacting respondents and the fieldwork period	23
	1.5.1 Response rates	23
	1.5.2 Adjusting for attrition and sample representativeness	24
1.6	Descriptive variables and analytical approach	25
	1.6.1 Categorisations	25
	1.6.2 Distributions of key socio-economic and demographic variables	26
1.7	Report outline	30
1.8	Summary	31
CHAF	TER 2: THE TRANSITION TO ADULTHOOD	33
2.1	Introduction	34
2.2	Principal economic status	34
2.3	Accommodation	36
2.4	Sources of economic support and financial stress	38
	2.4.1 Sources of economic support and financial (in)dependence	39
	2.4.2 Difficulty making ends meet and financial stress	40
2.5	Relationships with parents	43
	2.5.1 Interaction with parents at 20 years	43
	2.5.2 Parents' view of their relationship with the Young Adult	46
2.6	Sexual orientation, experience and romantic relationships	47
	2.6.1 Sexual orientation	48
	2.6.2 Romantic relationships	49
	2.6.3 Sexual experiences	51
2.7	Becoming an adult and satisfaction of basic psychological needs	53
	2.7.1 Becoming an adult	54
	2.7.2 Basic psychological needs satisfaction	55
2.8	Civic engagement	57
	2.8.1 Volunteering	58
	2.8.2 Political and social concerns	58
	2.8.3 Voting and activism	59
2.9	Summary	62
CHAF	TER 3: POST-SCHOOL EDUCATION AND TRAINING	65
3.1	Introduction	66
3.2	Education and training pathways after leaving school	67
	3.2.1 Gender and family background differences in pathways	67
	3.2.2 Post-school pathways and earlier educational experiences	68
	3.2.3 Educational expectations from a longitudinal perspective	71
3.3	Choice of institution	71
3.4	Choice of field of study	73
	3.4.1 Perceptions of the course	75
3.5	Course non-completion	76
3.6	Summary	79



СНА	PTER 4	LABOUR MARKET EXPERIENCES	81
4.1	Introd	uction	82
4.2	Type o	f employment among those whose principal economic activity was employment	
	and re	ceipt of training while working	83
	4.2.1	Type of contract, hours and pay for those in employment	84
	4.2.2	Preferred type of employment, and derived social class at 30 years for those in	
		employment at 20 years	85
	4.2.3	Receipt of training while working and skills utilisation	86
4.3	Experi	ence in part-time employment while studying	87
4.4	auso	ational aspirations and importance of iob gualities	89
	4.4.1	Measurement of current and preferred job type	90
	4.4.2	Measurement of important factors when choosing a job	91
	4.4.3	Intrinsic and extrinsic motivation associated with important job qualities	91
4.5	Summ	ary	94
CHAI	PTER 5	PEER RELATIONSHIPS AND LEISURE	95
5.1	Introd	uction	96
5.2	Chang	es in peer relationships	96
	5.2.1	Friendship networks	96
	5.2.2	Sources of information and help to the 20-year-old	99
5.3	Leisure	e activities	101
5.4	Physic	al activity	103
	5.4.1	Results	104
	5.4.2	Longitudinal trends in physical activity	106
5.5	Use of	technology/screen time	107
	5.5.1	Measurement	108
	5.5.2	Screen time and technology use	108
	5.5.3	Online presence, privacy and safety behaviours	111
5.6	Summ	ary	115
сца		RUYSICAL AND SOCIO EMOTIONAL WELL REINC IN THE TRANSITION TO ADULTUOOD	117
	Introd	PHISICAL AND SUCIO-EMUTIONAL WELL-BEING IN THE TRANSITION TO ADULT HOUD	110
0.1		uction The importance of good physical and cosis emotional health and wall being at any 20	110
	0.1.1	The importance of good physical and socio-emotional health and well-being at age 20	110
	6.1.2	Key health and well-being topics covered in this chapter	119
	6.1.3	Irends in health and well-being for this cohort and in early adulthood	119
6.2	Physic	al health and obesity	119
	6.2.1	General health and chronic illness	119
	6.2.2	Weight status	123
6.3	Risky h	nealth-related behaviours	126

6.3	Risky h	ealth-related behaviours	126
	6.3.1	Smoking	126
	6.3.2	Alcohol	129
	6.3.3	Drug use	132
6.4	Socio-e	emotional well-being, including life satisfaction, stress and depression	134
	6.4.1	Life satisfaction	134
	6.4.2	Stress	137
	6.4.3	Depressive symptoms	140
	6.4.4	Aggressive tendencies	146
	6.4.5	Coping strategies	149
6.5	Summa	ary	151

CHAF	PTER 7: I	DISCUSSION	153
7.1	Principa	I economic status, living conditions and civic participation	154
7.2	Transiti	ons in relationships	155
7.3	Well-be	ing during times of transition	157
7.4	Continu	ity and change in experiences and outcomes	159
7.5	The calı	n before the storm: early adulthood before the COVID-19 pandemic	160
7.6	What n	ext for Cohort '98	161
7.7	Append	lix to Chapter 7 – Note on Latent Class Model	162
	7.7.1	Introduction and sample	162
	7.7.2	Final model description	162
	7.7.3	Detailed results and model fit comparisons	163
	7.7.4	Considering features of competing models	164

#### REFERENCES



#### LIST OF TABLES

Interviews completed in the 20-year-old wave by Young Adults and Parents (Wave 4 of Cohort '98)	24
Response rate pattern (i.e. total number of waves) for those 20-year-olds who participated in Wave 4	24
Percentage experiencing financial stress based on both Parent and Young	<i>4</i> 1
Mean scores for Young Adults' rating of relationships with their mothers and	41
fathers and correlation between these scores	44
Timing of first sexual intercourse by gender	52
Descriptive statistics for the Basic Needs Satisfaction Scale and correlations	
with other subscales	55
Mean and standard deviation for level of concern on political and social	
issues among 20-year-olds	59
Correlation of friendship group size from Waves 1-4	98
Online safety behaviours of all 20-year-olds	114
World Health Organization's BMI cut-offs for classification of BMI Status for Adu	lts 123
20-year-old's BMI status according to parental BMI status	125
Life satisfaction correlations from Waves 1-4	136
Mean, standard deviation and range for DASS stress scores	138
Descriptive statistics for CES-D 8 and percentage exceeding threshold for	
high depressive symptoms	142
Levels of self-reported aggression by Young Adult gender	147
Three-class Model summary	162
Latent Class Model fit statistics for 1-5 classes	163
	Interviews completed in the 20-year-old wave by Young Adults and Parents (Wave 4 of Cohort '98) Response rate pattern (i.e. total number of waves) for those 20-year-olds who participated in Wave 4 Percentage experiencing financial stress based on both Parent and Young Adult reports Mean scores for Young Adults' rating of relationships with their mothers and fathers and correlation between these scores Timing of first sexual intercourse by gender Descriptive statistics for the Basic Needs Satisfaction Scale and correlations with other subscales Mean and standard deviation for level of concern on political and social issues among 20-year-olds Correlation of friendship group size from Waves 1-4 Online safety behaviours of all 20-year-olds World Health Organization's BMI cut-offs for classification of BMI Status for Adu 20-year-old's BMI status according to parental BMI status Life satisfaction correlations from Waves 1-4 Mean, standard deviation and range for DASS stress scores Descriptive statistics for CES-D 8 and percentage exceeding threshold for high depressive symptoms Levels of self-reported aggression by Young Adult gender Three-class Model summary Latent Class Model fit statistics for 1-5 classes

#### LIST OF FIGURES

Figure 1.1	Bronfenbrenner's ecological perspective on child development	21
Figure 1.2	Distribution of household (parental) social class classifications	27
Figure 1.3	Distribution of highest educational attainment among 'Parents One' in Cohort '98	28
Figure 1.4	Distribution of one- and two-parent family structures across income quintiles	29
Figure 2.1	Principal economic status of the 20-year-olds at the time of the survey	35
Figure 2.2	Principal economic status by parental education and family structure	36
Figure 2.3	Proportion of 20-year-olds with a non-parental address by background characteristics	37
Figure 2.4	Types of occupancy of 20-year-olds with a non-parental address	38
Figure 2.5	Young Adult's report of whether they or their parent(s) contributed to different financial costs (those with a non-parental address)	40
Figure 2.6	Young Adult's report of whether they or their parent(s) contributed to different financial costs (those living at the parental address)	40
Figure 2.7	Level of difficulty or ease in making ends meet reported by the 20-year-olds	41
Figure 2.8	Financial stress (difficulty or great difficulty making ends meet) at 20 years old by	40
Figure 2.9	Dackground variables Number of wayes in which the 20-year-olds and their families have experienced	42
rigure 2.5	financial stress	42
Figure 2.10	Changes in the Young Adults' reports of their interactions with their mothers	15
Figure 2.11	Changes in the Young Adults' reports of their interactions with their fathers	45
	since age 17/18	45
Figure 2.12	Parents' rating of their relationship with their Young Adult	46
Figure 2.13	Disagreements with the Young Adult in the last three months, as reported	
<u>J</u>	by the parent; comparisons between Young Adults with and without a	
	non-parental address	47
Figure 2.14	Sexual orientation of the Young Adults	49
Figure 2.15	The relationship status of the 20-year-olds	49
Figure 2.16	Relationship status of the 20-year-olds based on their gender and economic status	50
Figure 2.17	20-year-olds' expectations of their current relationship in five years (those in a relationship only)	50
Figure 2.18	Occurrence of first sexual intercourse by 20 years of age	51
Figure 2.10	Gender differences in condom use and contracention use	52
Figure 2.20	Comparisons between those who were sexually active at 17/18 years and 20 years	52
	on condom use, contraception use and views on timing of first sexual intercourse	53
Figure 2.21	20-year-olds' views on whether they consider themselves to be an adult	54
Figure 2.21	Percentage of those in the lowest quintiles for the subscales on the Basic Needs	54
	Satisfaction Ouestionnaire by background variables	56
Figure 2.23	Volunteering by 20-year-olds (in the last six months) based on background	
5	characteristics	58
Figure 2.24	Gender differences in proportion 'very concerned' about political and social issues	59
Figure 2.25	Percentage of 20-year-olds who were registered to vote based on gender, parent education and principal economic status	60
Figure 2.26	Types of activism engaged in by 20-year-olds based on their principal economic	
2	status	61
Figure 2.27	Types of activism engaged in by 20-year-olds based on education of parents	61



Figure 3.1	The proportion of 20-year-olds who had taken part in one or more education/training courses since leaving school, broken down by type of course and parental education	68
Figure 3.2	The proportion of 20-year-olds who had taken part in one or more education/training courses since leaving school, broken down by quintile of	00
	Leaving Certificate grades	69
Figure 3.3	The proportion of those in the lowest-achieving Leaving Certificate group (quintile) who went on to HE by parent education	69
Figure 3.4	The proportion of 20-year-olds who had taken part in HE by attitudes to school and quality of interaction with teachers	70
Figure 3.5	Participation in HE by Primary Caregiver (parent) and Young Person expectations at 13 years of age	71
Figure 3.6	Among those who went on to HE, the proportion who attended a university by parent education and Leaving Certificate grades (quintiles)	72
Figure 3.7	Rating of reasons for choice of HE/FE institution (those who took part in one or more FE/HE courses only)	73
Figure 3.8	Field of study in FE/HE by gender (those who took part in one or more FE/HE course only; ordered by degree of representation of women, low to high)	74
Figure 5.9	Certificate performance (quintiles) (those who took part in one or more FE/HE courses only)	74
Figure 3.10	Perceptions of the course (choice, liking and compliance with requirements, on a scale of one to ten) by gender, parent education and Leaving Certificate performance (quintiles) (those who took part in one or more FE/HE courses only)	75
Figure 3.11	HE non-completion by gender, parental education and Leaving Certificate performance (quintiles) (among those who took part in one or more HE	
Figure 3.12	course only) Reasons for non-completion (HE and FE combined)	77
Figure 3.13	Perceptions of the course (satisfaction with choice, liking the course and	
5	compliance with requirements, on a scale of one to ten) for non-completers and others (HE only)	78
Figure 4.1 Figure 4.2	Type of contract held by the 20-year-olds whose main status was employment Net pay of the 20-year-olds whose main status was employment: differences	84
	between those who worked full-time (36 hours or more per week) and those who worked part-time (35 hours or less per week)	85
Figure 4.3	Comparisons between the social class of the 20-year-olds in employment at the time of the survey and the social class of the job they would like to have by 30	
	years of age	85
Figure 4.4	Type of training received by the 20-year-olds in employment	86
Figure 4.5	Percentage of 20-year-olds in education/training with a term-time job by	07
Figure 4.C	gender, family income quintile at 17/18 and family type	8/
Figure 4.0	Hours per week worked by 20-year-olds in term-time employment	00 88
Figure 4.8	Net income from employment per week, among those in paid employment while in education/training	89
Figure 4.9	Preferred social class by the age of 30 for all 20-year-olds	90
Figure 4.10	Percentage of Young Adults who rated job qualities as 'very important' (i.e. 9 or 10 out of 10)	91

Figure 4.11	Percentage of 20-year-olds who rated different types of extrinsically motivated job qualities as 'very important' by principal economic status	92
Figure 4.12	Percentage of 20-year-olds who rated different types of intrinsically motivated	02
Figure / 13	Percentage of 20-year-olds who rated different types of advancement-related	32
ligure 4.15	job qualities as 'very important' by principal economic status	93
Figure 5.1	Number of friends at 20 years of age by gender	97
Figure 5.2	Changes in friends between 17/18 and 20	98
Figure 5.3	Percentage reporting that none, some or most/all of friends are close friends at 13, 17/18 and 20 years	99
Figure 5.4	People with whom the 20-year-old would discuss personal thoughts and feelings	100
Figure 5.5	Sources of information and support for common issues faced by Young Adults	101
Figure 5.6	Popular social activities amongst 20-year-olds, according to gender	102
Figure 5.7	Popular social activities amongst 20-year-olds, according to family social class	103
Figure 5.8	Percentage of 20-year-olds meeting physical activity guidelines, according to key background characteristics	105
Figure 5.9	Percentage of 20-year-olds meeting physical activity guidelines according to key health outcomes	105
Figure 5.10	Average MET-minutes per week expended by the Young Person across all waves of the study	106
Figure 5.11	Self-reported time spent on screen time activities for all 20-year-olds per day	108
Figure 5.12	Multi-screening for all 20-year-olds	109
Figure 5.13	The proportion of 20-year-olds spending three hours or more on gaming and	
	video consumption by demographic variables	109
Figure 5.14	Online activities by gender	110
Figure 5.15	Percentage of 20-year-olds with an online account on a platform by gender	111
Figure 5.16	Daily use of online platforms by gender	112
Figure 5.17	The proportion of 20-year-olds with a public profile among those with a	
	specific social media account by gender	113
Figure 5.18	Privacy protection online by gender	113
Figure 5.19	Online safety behaviours by typical time spent online	114
Figure 6.1	Socio-demographic differences in those 20-year-olds self-reporting their	420
5	current health as 'excellent' or 'very good'	120
Figure 6.2	Percentage of Young People in the top two healthlest general health	171
Figure 6.3	Percentage of 20-year-olds reporting a mental/behavioural issue, according to	121
	key background characteristics	122
Figure 6.4	Prevalence of the most common chronic issues at all four waves of the study	122
Figure 6.5	Prevalence of overweight and obesity amongst 20-year-olds, according to key background characteristics	124
Figure 6.6	Percentage of Young Adults classified as overweight and obese at each of the	
0	four waves of the study	125
Figure 6.7	Changes in BMI Status from age 9 to 20 years	126
Figure 6.8	Smoking status of all 20-year-olds	127
Figure 6.9	Percentage of 20-year-olds who report that they smoke daily, according to key	
-	background characteristics	128
Figure 6.10	Smoking status at age 20 according to smoking status at ages 13 and 17/18 years	129
Figure 6.11	Percentage of 20-year-olds who reported drinking alcohol twice or more	
-	per week, according to key background characteristics	130



Figure 6.12	Percentage of 20-year-olds categorised as 'high risk' or 'very high risk' on the	
	AUDIT screening tool, according to key background characteristics	131
Figure 6.13	AUDIT category based on drinking habits at ages 13 and 17/18 years	132
Figure 6.14	Illicit drug use (at least once) by 20-year-olds	133
Figure 6.15	Percentage of 20-year-olds who took cannabis occasionally or more than once	
	per week, according to key background characteristics	133
Figure 6.16	Status regarding cannabis use at age 20, based on cannabis use at age 17/18	134
Figure 6.17	Changes in life satisfaction ratings between 17/18 and 20 years of age	136
Figure 6.18	DASS stress categories by gender	138
Figure 6.19	Moderate to high DASS stress by demographic variables	139
Figure 6.20	Service utilisation among those reporting low to mild stress and those reporting	
	moderate to high stress	140
Figure 6.21	The percentage of 20-year-olds reporting CES-D 8 scores above threshold for	
	high depressive symptoms by key demographic variables	142
Figure 6.22	The percentage of 20-year-olds reporting 'high depressive symptoms' by	
	self-reported depressive symptoms status at 13 and 17/18 years	143
Figure 6.23	The percentage of 20-year-olds reporting 'high depressive symptoms' by number	
	of prior waves where elevated depressive symptoms were reported	144
Figure 6.24	The percentage of 20-year-olds reporting 'high depressive symptoms' by Wave	
	4 parent reported depression status	144
Figure 6.25	Service utilisation among 20-year-olds below and above the CES-D 8 high	
	depressive symptoms cut-off	145
Figure 6.26	Proportion in the top aggression quintile by gender, household income,	
	family type and financial strain	147
Figure 6.27	The percentage of 20-year-olds scoring in the highest quintile of reactive	
	aggression scores according to how many times they had previously scored	
	in the highest (i.e. worst) SDQ decile	148
Figure 6.28	Coping styles 'often' used by 20-year-olds	150
Figure A.1	Information Criterion and Log Likelihood by number of latent classes	163

#### **GUI GLOSSARY**

AUDIT	Alcohol Use Disorders Identification Test screening tool
CES-D 8	Centre for Epidemiological Studies' Depression Scale
DASS	Depression, Anxiety and Stress Scale
EQLS	European Quality of Life Survey
FE	Further Education
HE	Higher Education
MET	Metabolic equivalents
NEET	Not in employment, education or training
OECD	Organisation for Economic Co-operation and Development
PES	Principal Economic Status
PLC	Post Leaving Certificate
SDQ	Strengths and Difficulties Questionnaire
SMFQ	Short Mood and Feelings Questionnaire
STEM	Science, Technology, Engineering or Mathematics



#### **EXECUTIVE SUMMARY**

#### **BACKGROUND TO THE REPORT**

This report presents findings from the fourth wave of interviews conducted at age 20 in 2018/19 with the original Cohort '98 (formerly the Child Cohort) of the longitudinal *Growing Up in Ireland* study. The cohort had first been surveyed at age 9 years in 2007 and were followed up at ages 13 and 17/18 years. There were 5,190 Young Adult participants in the age 20 wave, which represents 61 per cent of the original 8,568 who were interviewed at age 9. In addition, 4,887 associated parent/guardians (usually, the mother) were surveyed in the 20-year phase. These interviews provided crucial information on the broader household context, especially for those still living in the parental home.

The study findings capture a key phase in the Young Adults' lives as they make the transition into postschool education, training and employment, form an adult identity and forge different sets of relationships with peers and others. The study findings are organised thematically and focus on:

- The transition to adulthood;
- Post-school education and training participation;
- Labour market experiences;
- Peer relationship and leisure;
- Physical and socio-emotional health and well-being.

Given the breadth of topics covered, the report focuses on providing a descriptive overview of experiences and outcomes in the main domains of Young Adults' lives and how these vary by gender and family background. Where feasible, longitudinal analyses are conducted to relate experiences at 20 years of age to prior experiences at 17/18 (or even earlier). The descriptive findings provide insights into key domains of the lives of 20-year-olds, often providing the first Irish evidence on certain topics, but the discussion also highlights the immense potential to build upon these analyses to provide an in-depth investigation of a range of policy-relevant topics.

#### THE TRANSITION TO ADULTHOOD

The report describes key aspects of the Young Adult's transition into adulthood, including their economic status, accommodation, financial circumstances, relationships, sense of agency and civic engagement. The overall picture emerging was of 20-year-olds still in a period of transition to full adulthood: most had not yet reached financial or residential independence but were beginning to exert their influence beyond the spheres of education and home into political and social life.

The principal economic status of the largest group of 20-year-olds (69%) was education or training (including higher education and further education such as Post Leaving Certificate courses and apprenticeship); 26 per cent were at work, either full- or part-time, with just 5 per cent not in employment, education, or training (NEET). These pathways were clearly associated with family background. Young Adults whose parent had lower levels of education were less likely to be in education (52% of those whose parent had a Junior Certificate or lower versus 81% with a degree or higher), and more likely to be in employment (39% versus 17%) or NEET (9% versus 2%).

At 20 years old, 9 per cent of Young Adults self-reported financial stress (*difficulty* or *great difficulty* making ends meet). Looking back at household demographic data from the previous wave, those whose family incomes had been in the lowest quintile at age 17/18 were more likely to report financial stress at 20 (14% versus 7% of those who had been in the highest income quintile).<sup>1</sup> Around one-in-six (15%) of the 20-year-olds had been in households experiencing financial stress at two or more waves of data collection across ages 9, 13, 17/18 and 20 years.

<sup>1</sup> For the purpose of this report, households are divided into fifths based on the family's equivalised income figure (that is, income adjusted for household size and composition), from 'lowest income quintile' to 'highest income quintile'.

The majority of Young Adults were still living with their parents, with only about a third (32%) having a non-parental address. Almost all (87%) of these overnighted in their parents' home several nights a month and/or still considered it to be their 'main address'. Young Adults who were in education or training were more likely to have an address outside of the parental home (38%) than those who were in employment (20%) or NEET (21%).

Young Adults living full-time at their parents' address were less likely than those living independently part- or full-time to pay towards their own health costs, accommodation, food and utility bills. Young Adults still living in the family home were close to equally split between wanting to live at home (56%) and preferring to live independently (44%), though most (70%) said that they were living at home at least in part because of financial reasons.

Young Adults were also asked about their relationships outside the family, especially the formation of romantic relationships. Just over half (57%) of 20-year-olds were in a romantic relationship of some kind at the time of the survey. Three-quarters of those in a relationship believed they would still be with their current partner in five years but only a minority thought they would be engaged (19%) or married (4%). Most (84%) of the Young Adults had had sexual intercourse, with just over half becoming sexually active between the ages of 17/18 and 20. A sizeable minority (39%) of sexually active Young Adults reported that they did not use some form of contraception on every occasion. While most (85%) of the Young Adults were aware that condom use was useful at preventing STDs, just a third used condoms on every occasion of sexual intercourse.

In terms of social and political issues, Young Adults were most likely to express high levels of concern about domestic issues such as access to housing, poverty and jobs in Ireland. Following these issues, climate change was the most salient concern. Over seven-in-ten (72%) were registered to vote; however, those who were in education (77%) or employment (63%) were more likely to be registered than those who were unemployed and not in education (46%).

#### **POST-SCHOOL EDUCATION AND TRAINING**

Post-school education/training pathways comprised higher (third-level) education (HE), Post-Leaving Certificate (PLC) courses and other further education (FE) courses (including apprenticeship, Youthreach and training schemes). A very high proportion – 87 per cent – of 20-year-olds had taken part in at least one education/training course since they left school; 70 per cent had taken a HE course, 17 per cent had done a PLC course and 10 per cent had done another FE course. These figures include those who were still in education/training at the time of the interview. While rates of HE participation were high across all groups, those from less socio-economically advantaged families were less likely to have gone on to HE and somewhat more likely to have dropped out if they did so.

Social differentiation in university entry and in HE entry more broadly was strongly associated with differences in Leaving Certificate performance; however, those with lower Leaving Certificate grades were more likely to go on to HE if they were from more advantaged families.

Those leaving school with lower exam grades and those who had taken a less academic route towards the end of their secondary schooling (the Leaving Certificate Applied programme) were much more likely to take a further education (FE) course than those with higher grades or those who had taken the Leaving Certificate Established or Leaving Certificate Vocational Programme.

Young people's choice of further/higher education institution largely reflected whether it provided the course or subject they wished to take, with 71 per cent deeming this factor very important. However, being able to live at home while studying was a very important factor for a significant proportion of the cohort (31%), especially those from less advantaged families (44% where Parent One had a Junior Certificate or less).



The type of course within FE/HE taken was highly gendered, with women more likely to enter social science, health and education fields and men over-represented in science/agriculture and engineering domains. Among those who had taken part in FE/HE, 35 per cent had engaged in a science, technology, engineering or mathematics (STEM) course. STEM participation was more common among men (41%) than women (28%), those from more highly educated families (40%) than those from the lowest educated families (29%), and those who had received higher Leaving Certificate grades (51%) as opposed to the lowest grades (25%).

The 20-year-olds were generally satisfied with the course they had taken, with high ratings (7.8-8 out of 10) for choosing, liking, and complying with the requirements of their course.

Not all of the cohort completed the courses they took, with 11 per cent non-completion in higher education and 18 per cent non-completion in further education by age 20. Non-completion was more common among those who entered courses with lower exam grades. The most common reason given for departure was the course not being what they expected.

#### LABOUR MARKET EXPERIENCES

The study findings provide important insights into the Young Adults' entry to the world of work, looking at the experiences of 20-year-olds whose main status was employment, those who had part-time work as well as studying, plus a look forward to their career aspirations.

Slightly more than one-quarter of the 20-year-olds (26%) were in employment as their main activity. The Young Adults in employment were usually in full-time permanent contracts (71%) and the majority were in non-manual occupations, such as clerical work, (36%) or unskilled jobs, such as cleaning, (43%). Many of those in employment rated their jobs positively in terms of satisfaction, security and being able to utilise their skills.

When all 20-year-olds were asked about the type of occupation they expected to have by age 30, the largest category was managerial / technical work (45%) followed by professional roles (22%). Young Adults who were currently in education or training, male and/or from higher income families were more likely to be aiming for a role in this professional social class category. Almost all 20-year-olds anticipated being in their preferred job by that time (age 30). It will be informative to track this group as they move through their twenties to see whether their achieved occupation matches their expectations, especially given the likely disruption of the COVID-19 pandemic. Collecting this information at this time point also provides a future opportunity to explore factors associated with meeting/not meeting these career expectations later.

Almost two-thirds of the 20-year-olds who were in education or training had a job during term time. The majority of this group (85%) worked up to 20 hours per week and earned €200 or less a week (82%). Working while studying was more prevalent among those from more advantaged social backgrounds (as measured at age 17/18); 68 per cent of those from households in the highest income quintile had term-time employment compared with 57 per cent of those from the lowest quintile. However, when Young Adults from more disadvantaged backgrounds held term-time jobs, they tended to work longer hours.

All 20-year-olds were asked to rate the importance of a number of different job qualities, the most frequently rated as being important was that the job was 'interesting' (63%). The second highest was 'job security' (52%). Those who were already in employment were more likely than those still in education/ training to place high importance on gaining 'promotions' (41% versus 34%), having a job which is 'a step on the career ladder' (42% versus 35%) and 'being their own boss' (22% versus 14%).

#### PEER RELATIONSHIPS AND LEISURE

The study analysed how 20-year-olds spent their free time, especially interactions with friends and technology (which could be at the same time).

The friendship networks of most Young Adults expanded between the ages of 17 and 20, with 69 per cent of all 20-year-olds increasing their number of friends over this period, and only a minority experiencing a decline (26%). Over half (58%) of all 20-year-olds reported having 11 or more friends.

A majority of 20-year-olds felt they could talk to someone about personal thoughts and feelings. Friends were identified as an important source of support, with 86 per cent of all 20-year-olds saying they would talk to friends about their thoughts and feelings. This was followed closely (in terms of someone to talk to) by the 20-year-old's mother, a romantic partner or their father (where applicable). One-in-six Young Adults indicated they could talk to a professional (such as a doctor or therapist) about their feelings, with this being more common among females (18%) than males (12%). Friends and parents were also important sources of practical support and information for things such as 'problems with coursework' (mostly friends) or 'being short of cash' (mostly parents).

Technology use was prominent in the lives of most 20-year-olds, for practical purposes as well as entertainment. On both weekdays and weekend days, over half of *Growing Up in Ireland* 20-year-olds spent over three hours online, with over 20 per cent spending five hours or more online. More than half of 20-year-olds reported daily multi-screening activity (e.g. browsing the internet on one's phone while watching television). There were marked gender differences in some categories of online activity, with young men more likely to use it for gaming (68% versus 16% women), betting (16% versus 3%), dating (30% versus 21%) and pornography (64% versus 13%).

Although social media use was almost universal, young men were much more likely to maintain a publicly searchable profile than women. Although most 20-year-olds said they made use of basic security and privacy tools on offer within platforms, fewer of them took further steps to control information about themselves online such as removing identifying photo tags, deleting comments on their profiles or controlling location information. Over a quarter of 20-year-olds expressed regret about things they had posted online.

Gender differences were also observed in relation to exercise and sport with young men more likely than young women to participate in active pursuits such as attending the gym (64% versus 57%), playing team sports (58% versus 24%) or individual sports (36% versus 23%). In terms of other leisure activities, young women were more likely to regularly go walking (68% versus 48%), to read (47% versus 37%) or to sing/ play an instrument (31% versus 25%).

Overall, 65 per cent of Young Adults achieved the national recommended guidelines for physical activity. Young women were at increased risk of not achieving the physical activity guidelines (71% of males, 59% of females), as were those from less socially advantaged households (74% for 20-year-olds with higher educated parents versus 58% for those with lower educated parents) and those not in education, training or employment (68% in education/training, 65% for those in work, 39% for NEET 20-year-olds). Longitudinal analysis points towards a reduction in physical activity from adolescence into early adulthood, a worrying trend observed for both men and women.

#### PHYSICAL AND SOCIO-EMOTIONAL WELL-BEING IN THE TRANSITION TO ADULTHOOD

As in previous waves, Young Adults were asked about their physical and mental well-being. The study findings captured key indicators of current well-being, longitudinal patterns from previous waves of data collection and aspects of their lifestyle that are important for current as well as future health.



As at previous waves of the *Growing Up in Ireland* study, the majority of young people reported being in good general health. However, 16 per cent of 20-year-olds reported having a longstanding condition or illness. The most prevalent of these were psychological or behavioural disorders, and diseases of the respiratory system.

Overall, 24 per cent of all Young Adults were overweight and 13 per cent were obese, which indicated a significant increase from when participants were last measured at age 17/18. Obesity risk was greater amongst young women (16% for women versus 10% for men), those from less advantaged backgrounds (15% from lowest income quintile versus 9% at highest income quintile) and those who had an overweight parent or obese parent (12% if parent overweight and 20% if parent obese versus 7% if parent at normal weight).

Fifteen per cent of 20-year-olds reported being 'daily' smokers, while a further 23 per cent said they smoked 'occasionally'. Nearly 60 per cent of Young Adults had tried cannabis, while 18 per cent took cannabis occasionally and 6 per cent took it more than once per week.

In terms of alcohol consumption, 46 per cent of 20-year-olds reported drinking behaviour that could be described as 'risky or hazardous', 7 per cent as 'high risk or harmful', and 4 per cent as 'very high risk (or possible alcohol dependence)'.

On average, 20-year-olds rated their life satisfaction at 7 on a scale ranging from 0 to 10. Over a quarter of Young Adults gave a higher life-satisfaction rating at age 20 than they had at age 17/18, while it stayed the same for another 25 per cent. Nearly half gave a lower rating than before, although this was partly driven by some very high levels of life satisfaction at the previous wave (i.e. scores that were at the maximum level before could only go down or stay the same).

Over a fifth of 20-year-old men, and almost a third of 20-year-old women, had elevated scores on a measure of depressive symptoms. Higher levels of depressive symptoms were associated with previous experience of symptoms (at 13 and 17/18 years) and with concurrent parental symptoms of depression. A quarter of 20-year-olds reported 'above normal' stress scores using a threshold defined by the authors of the Depression, Anxiety and Stress Scale (DASS). Using this DASS threshold score, young women were more likely to report above normal stress than young men (29% versus 21%). Those who were not working or in education or training were also more likely to be experiencing higher levels of stress. Eighty-four per cent of 20-year-olds with elevated depressive symptoms, and 82 per cent of those with high stress levels, had consulted with a GP, psychologist/counsellor and/or psychiatrist in the previous 12 months. These findings point to 4.3 per cent and 3 per cent of the full *Growing Up in Ireland* sample not having received formal support for depression and stress respectively.

When faced with difficulties, most 20-year-olds used coping strategies that could be considered constructive, such as talking to friends and family, doing pastimes that would cheer them up or exercising. However, some Young Adults also made frequent use of less useful strategies such as using alcohol or smoking.

#### DISCUSSION

The concluding chapter of this report considers key issues during this time of transition related to (a) economic and living status, (b) relationships and (c) well-being. It also highlights some specific issues of relevance to policy for young adults in this phase of the life-course. These include:

- the continued reliance of 20-year-olds on their parents for accommodation, financial and emotional support – and the gap in support for young adults where such parental resources might be unavailable;
- the relatively high percentage of young adults who expected to be in a co-habiting relationship within a few years and, consequently, the type of housing they will be looking for when they move out of the parental home;

• the deterioration in 'healthy' lifestyles since the cohort left school with increases in smoking, drinking, and overweight/obesity, and a decline in physical activity.

The longitudinal analyses presented in the report show both continuity and change as this cohort moved from middle childhood to adolescence and into early adulthood. Future research will be helpful in identifying the factors that support the best outcomes over this transition. However, a common theme across domains was the way in which experiences during adolescence (or even earlier) can shape outcomes in early adulthood. Thus, participation in higher education was related to earlier educational success and a positive experience of school. Risky behaviour (such as drinking and smoking) was often initiated in adolescence, and mental health difficulties during adolescence emerged as a risk factor for adult mental health problems. From a policy perspective, this highlights the importance of preventative supports during adolescence to enhance educational engagement, mental health and well-being, and reduce the likelihood of engagement in risky health behaviours later on.

This chapter concludes by highlighting some of the findings that are of interest in relation to the likely impact of the COVID-19 pandemic on people aged around 20 years, even though the survey occurred before the pandemic. These findings include:

- the observation that the majority of the Young Adults were still in higher education and would be highly impacted by the shift to remote online learning, especially as most lived in shared accommodation;
- the high proportion of 20-year-olds who worked part-time while studying and the likely negative impact of retail and hospitality closures on the availability of such evening and weekend work to students (as well as others working in these industries);
- the reliance of Young Adults on the internet (in terms of connectivity and affordability) for continuing their education online but also their pastimes and maintaining relationships with family and friends, who tend to provide important sources of emotional support in times of difficulty.

#### CONCLUSION

This report on the lives of 20-year-olds provides new insights into those young people who have grown up in Ireland and continue to develop as adults, individually and as part of a community. This stage of the life-course is arguably under-studied given that it falls between the school years and mature adulthood; yet it is a potentially pivotal point given consequential decisions in regard to study, work, relationships, lifestyle, and identity formation.

The analyses presented in this report aim to give researchers, policymakers and stakeholders an overview of the main trends in young adult development and well-being, organised by key socio-demographic indicators. Such exploration helps to highlight areas of particular interest and shows how young adults with characteristics in common, such as low education or growing up in disadvantaged households, can also share increased risks for some outcomes. Conversely, it can also demonstrate that such links are not deterministic and growing up with material and social advantage does not entirely protect the individual from poor outcomes.

The **Growing Up in Ireland** study at age 20, particularly when considered as part of a longitudinal bank of rich data since middle childhood, is a unique resource. A single report such as this cannot hope to explore every fruitful avenue of research. Thus, the data provide a solid foundation for further investigation, with additional information collected in a COVID-specific survey of this cohort in December 2020 providing crucial insights into the extent to which the pandemic disrupted the transition to adulthood.



# Chapter 1

## **BACKGROUND TO THE REPORT**



#### **1.1 INTRODUCTION**

This report provides a descriptive overview of experiences at the start of the transition to adulthood based on analysis of the fourth wave of data collection of *Growing Up in Ireland* Cohort '98 at 20 years of age. The aim of the report is to provide an insight into key domains in the lives of 20-year-olds in Ireland.

**Growing Up in Ireland** is the national longitudinal study of children in Ireland. The study is funded by the Government of Ireland, overseen by the Department of Children, Equality, Disability, Integration and Youth and the Central Statistics Office, and conducted by the Economic and Social Research Institute in conjunction with Trinity College Dublin.

The 20-year-olds of *Growing Up in Ireland's* Cohort '98 (formerly the Child Cohort, also referred to as Young Adults throughout this report) were first interviewed when they were 9 years old in 2007. Since then, they have been visited at age 13, age 17/18 and most recently at age 20 in 2018/19. These follow-ups were planned to coincide with key transition points in their life-course: starting secondary school, becoming an adult, and adapting to a post-school pathway whether that be college, employment or something else. A fresh aspect to this most recent age 20 phase, therefore, is the greater diversity in the principal economic status of the cohort members, where previously most, if not all, would have been at school and living at home with parent(s).

*Growing Up in Ireland* is a multi-disciplinary study. Three core outcome domains of health, socio-emotional well-being, and cognitive development/education are covered at each wave and in this report. A fourth domain which has become increasingly relevant in young adulthood concerns the developing agency of the young person as they participate as adults in the social and economic life of their communities.

To reflect the increasing maturity of the study participants, the proportion of information collected from parents and from young people has shifted over the waves such that by age 20, the Young Adult was the primary respondent. The perspective of one parent (typically the individual who was previously the 'Primary Caregiver') is still captured, however, to acknowledge the continuing important role that many play in the lives of their adult sons and daughters. This context may be particularly pertinent in Ireland which has a relatively late age of leaving home: 26.8 years compared to 24.6 in the UK, 17.8 years in Sweden and an EU average of 26.2 (Eurostat, 2020). Eurostat (2020) also showed that the age of leaving home in Ireland is increasing, having been 25.3 years in 2006.

The purpose of the current report, therefore, is to draw on interviews with both the Young Adult and their Parent to paint a picture of the lives of 20-year-olds as the second decade of the 21<sup>st</sup> century was drawing to a close. It has been an eventful two decades combining social and technological progress with historic economic upheaval.

#### 1.2 FOCUS OF THIS WAVE

Early adulthood is, for many individuals, characterised by a more diverse mix of opportunities and challenges than other stages of the life-course. The end of second-level schooling triggers changes in education, employment, where you live, who your peers are and the dynamics of the relationship with your parents. Almost inevitably there are associated shifts in responsibility, not just for self-discipline in sticking to a work or college schedule but managing finances and the general increase in responsibility associated with becoming an adult.

A central theme for this wave of the *Growing Up in Ireland* study is that of embarking on a new pathway. This encompasses both the Young Adult's current situation – education, work, living arrangements, relationships, well-being – and what is shaping their next steps; attitudes, aspirations and behaviours. The



interview with 20-year-olds explored more of their identity, world views and plans for the future than any previous wave, in recognition of the importance of their own choices in forging their trajectory.

The Young Adult's opportunities for shaping the years ahead have been influenced by the paths taken to get to this point. This perspective has two main facets. The first is the 20-year-old's cumulative educational experiences as they were growing up, such as their engagement with the opportunities available in their school, their attainment in the Leaving Certificate examinations, and subsequently their options for further or higher education. The second facet explored in this report, and in the *Growing Up in Ireland* study more generally, is how their personal, social and family characteristics shaped where they are now and the opportunities that are open to them. In an ideal world, every child and young person would have an equal chance to thrive, but variations in characteristics such as household income and parental education result in inequalities in both experiences and outcomes. Identifying such inequalities and the scope for policy to re-balance their impact is a core feature of a study such as *Growing Up in Ireland*. Later in this chapter we describe variation in households along characteristics associated with disadvantage and use these to contrast outcomes for the Young Adults in each chapter of the report.

#### 1.3 CONTEXT FOR THIS COHORT: BOOM AND BUST

The conceptual framework underlying *Growing Up in Ireland* is based on Bronfenbrenner and Morris's bioecological model (2006). This framework encompasses several layers of influence on the 20-year-old and is outlined in detail in the literature review associated with this report (Murray et al., 2020). Figure 1.1 displays the key levels of the bioecological model where development is considered in the context of key social and economic events over the lifetime of Cohort '98, especially since their first interview aged 9 in 2007. How these events potentially affect their development Is explored below.



#### Figure 1.1 Bronfenbrenner's ecological perspective on child development

Source: Adapted from Garbarino (1982).

As an example of a major event affecting systems at several different levels, the Great Recession of 2008-2013 had a global impact, but in Ireland brought the once booming Celtic Tiger era to an abrupt halt, leading to a sudden and sometimes dramatic shift in the fortunes of many families. In the first instance, the entire cohort are subject to 'period effects' as part of the chronosystem.

The second aspect is the way that the national economic context affected the microsystem (i.e. the parents) of the Cohort '98 children through loss of employment, reduced pay and increased stress. The scope for interactions between elements and people in the child's microsystem is known as the 'mesosystem' in Bronfenbrenner's model.

Another dimension is the way the exosystem, in this example the macro-economic context, affects the development of the young person more indirectly through, for example, reduced funding for healthcare and education systems. Policy decisions are likely to mediate this impact for the individual – such as a government decision to maintain (or otherwise) universal child benefit payments and make cost savings in other areas.

As already noted in the report on this cohort at age 17/18, the timing of the economic boom and bust context for this cohort in relation to their life stages is noteworthy. When families and young people were first interviewed in 2007/08 (when the children were 9 years of age), the unemployment rate was low (below 6%). The second interview, as the young people were transitioning to secondary school at age 13, took place at the height of the recession, with unemployment rates of close to 16 per cent. Cronin and McQuinn (2015) showed that over the period 2008 to 2011 – the peak of the Great Recession – real GDP declined by 5.4 per cent (real GNP by 10.1%). House prices fell by 50 per cent between 2007 and 2012. The introduction of national austerity measures resulted in substantial reductions in social welfare payments of all types and a worsening of the economic climate more generally.

By the time of the third interview in 2016 (age 17/18), the young people of Cohort '98 were preparing to finish their secondary education, and the economy was showing signs of improvement, with the employment rate at about 9 per cent. Ireland had exited the Economic Adjustment ('Bailout') Programme in 2013. By July 2018, when the cohort were aged 20 years, the national unemployment rate was back down to 5 per cent (Bergin, Kelly and Redmond, 2020). However, the decision of the UK electorate to vote in favour of exiting the EU (i.e. Brexit) had introduced a degree of uncertainty for the future economic outlook. What we now know as the COVID-19 pandemic was not yet on anyone's horizon.

#### 1.4 OVERVIEW OF SURVEY IMPLEMENTATION

A detailed description of instrumentation, fieldwork protocols and response rates is provided in the technical design report for this wave (McNamara et al., 2021). The following section provides a brief overview to aid interpretation of the rest of the report.

As already noted, the main respondents in this wave were the now 20-year-old study 'children' who had been first interviewed at age 9 years (and elsewhere in the report referred to as 'the Young Adult' or 'the 20-year-old'). The Cohort '98 sample was initially generated through the primary school system in 2007 and early 2008, when the children involved were nine years of age. A nationally representative sample of 1,105 schools was selected from the total of 3,326 primary schools in Ireland at that time. Just over 82 per cent of schools were successfully recruited into the survey. The sample of children and their families was then randomly generated from within those schools. The response rate at the family level was 57 per cent, yielding information on a total of 8,568 Study Children (Murray et al., 2010). The cohort was subsequently followed up at 13 and 17/18 years of age.



At age 20, the Young Adults completed the main part of their interview on a face-to-face basis with an interviewer who visited them in their home. There was also a substantial self-complete section for questions that had the potential to be more sensitive. The 20-year-old used the laptop provided by the interviewer for the self-complete section. There were also a number of direct assessments that the interviewer carried out with the Young Adult: height, weight, waist circumference, blood pressure and a verbal fluency test (where the respondent had to call out the names of as many fruits as they could think of in one minute). The waist circumference measure was new at age 20 and provides an independent prediction of risk of disease, based on the measurement of abdominal adipose tissue (Janssen, Katzmarzyk & Ross, 2004); the rest had previously been implemented at age 17/18 years.

The Study Team also attempted to interview the 20-year-old's 'Parent One' (referred to throughout this report as 'the parent'), typically the person who had been their Primary Caregiver when they were younger. The inclusion of just one parent was the result of the greater focus on the Young Adult's own experiences and perceptions, with the Primary Caregiver selected as the parent who was seen as the one with the greatest contact with the 20-year-old (see O'Mahony, Murray, Williams, McNamara & O'Reilly, 2021). For the first time, fieldwork procedures took account of the interviewed parent potentially residing at a different address to the Young Adult. Compared to previous waves, the parent interview was much shorter and focused on the parent's own characteristics and their relationship with the 20-year-old. The parent interview was divided into a 'main' face-to-face interview and a self-complete, 'sensitive' section similar to the Young Adult interview (and to previous waves). Only one parent was interviewed at this wave, and that person was typically the 20-year-old's mother.

#### 1.5 CONTACTING RESPONDENTS AND THE FIELDWORK PERIOD

The sample for this wave was based on all of the original 8,568 participants from Wave 1, less any families who had formally withdrawn from the study, were untraceable from previous waves or who were known to have moved away. This resulted in a total of 7,976 eligible families who were invited to participate at the 20-year wave.<sup>2</sup> This invitation was in the form of a letter and information sheet to both the 20-year-old and their parent from the most recent wave. The mailing was followed up by a personal visit to the household by an interviewer.

As noted, given the age of the participants, it was possible that the parent and 20-year-old no longer resided at the same address. If the Young Adult was usually resident at a different address, they could choose between being interviewed at their new address or at their parent's address (e.g. for students who had a term-time address but returned to the parental home most weekends). In some instances, this meant that the 20-year-old and their parent were interviewed by different interviewers because they lived in different geographical areas.

As anticipated, arranging interviews with 20-year-olds required a greater effort by the fieldwork team than previous waves. This was because many of the Young Adults had moved out of the parental home, at least during the week, and many had a large number of commitments – balancing college, a part-time job and social activities. It also meant that the fieldwork window had to be extended over a longer period than usual in order to follow-up as many of the cohort as possible: starting in August 2018 and ending in June 2019.<sup>3</sup>

#### 1.5.1 RESPONSE RATES

Table 1.1 summarises the overall response rates for the age 20 interview. A more detailed breakdown is contained in the technical design report for this wave (McNamara et al., 2021). Of those 7,976 still eligible and targeted for fieldwork at age 20, 5,190 (65%) completed the interview at Wave 4. This represents 61 per cent of the sample completing the interview at age 9 in Wave 1.

<sup>2</sup> This excludes 35 young people who were determined in the course of the 20-year fieldwork to be ineligible. The majority of these had

permanently moved abroad and a very small number had died.

	N	As a % of sample completing at age 9	As a % of target sample at age 20
Number of respondents in Wave 1 (age 9, 2007)	8,568	100%	-
Target sample at age 20: 20-year-olds presumed eligible at Wave 4, excluding those who had formally withdrawn or were untraceable at earlier waves.	7,976	93%	100%
Number of main interviews completed with 20-year-olds (with or without Parent One)	5,190	61%	65%
Number of Parent One interviews completed where interview completed with 20-year-old	4,887	57%	61%

### Table 1.1Interviews completed in the 20-year-old wave by Young Adults and Parents (Wave 4 of<br/>Cohort '98)

As well as the 20-year-olds, interviewers sought to complete an interview with the parent. Overall, interviews were completed by 4,887 of these parents – with respect to 94 per cent of young people who had completed an interview at age 20. The parent interviews represent 61 per cent of those who were still eligible and targeted for fieldwork in Wave 4 and 57 per cent of the original sample who completed the survey at Wave 1.

Table 1.2 shows the pattern of response rates in the 20-year wave by whether the family had completed the interviews in earlier waves.<sup>4</sup> Of those who completed at age 20, more than nine-in-ten had also completed the survey at age 17/18 (91%); 6 per cent had completed the survey at all other waves except age 17/18; 2 per cent were missing only the 13-year interviews and 1 per cent had not responded since the 9-year interview.

Wave 1 (9 years)	Wave 2 (13 years)	Wave 3 (17/18 years)	Wave 4 (20 years)	Number	(%)*
Yes	Yes	Yes	Yes	4,729	91%
Yes	Yes	No	Yes	314	6%
Yes	No	Yes	Yes	88	2%
Yes	No	No	Yes	59	1%
				5,190	100%

## Table 1.2Response rate pattern (i.e. total number of waves) for those 20-year-olds who participated<br/>in Wave 4

Note: \*Percentages are based on the number of 20-year-olds with completed interviews, not the 8,568 who took part in Wave 1.

#### 1.5.2 ADJUSTING FOR ATTRITION AND SAMPLE REPRESENTATIVENESS

Despite rigorous tracking and tracing procedures and protocols to encourage participation, some level of attrition between waves is unavoidable in all longitudinal studies like *Growing Up in Ireland* (Schoeni, Stafford, McGonagle & Andreski, 2013). All data were statistically adjusted or reweighted using standard procedures prior to analysis and reporting. This ensures that the figures presented throughout the report are representative of 20-year-olds who were resident in Ireland at 9 years of age and who were still living here at 20 years old. Details of this procedure are provided in the Design Report on this wave of the study (McNamara et al., 2021).



#### 1.6 DESCRIPTIVE VARIABLES AND ANALYTICAL APPROACH

#### 1.6.1 CATEGORISATIONS

Socio-economic and demographic characteristics do not determine a person's outcomes but from a research and policymaker's perspective they can highlight groups in society that may be at greater or lesser risk of poor outcomes. Typical metrics for contrasting groups of people include gender, income, social class (based largely on occupation), family structure, disability and parental education. Sometimes these categorisations can be used to target supports, such as health policies specific to a gender, or income supplements for one-parent families.

In this, as in previous *Growing Up in Ireland* descriptive reports, these categorisations are used to contrast 20-year-olds with different outcomes.<sup>5</sup> While such categories may not always be the most relevant to a specific outcome, keeping a common set of measures throughout the report helps to identify groups of young people who are doing less well (or better) than others in a range of domains. Occasionally, where another type of variable or a related outcome is useful in putting other trends in context, it may be used in that specific instance even though it is not a common thread in the report.

The distribution of the common variables will be described in more detail in the following paragraphs. First, though, there are two important differences between their use in this report compared to previous *Growing Up in Ireland* waves. In terms of family or household characteristics, the data have been drawn from the previous rather than current wave (usually age 17/18 years) for indicators such as household income, family structure and household social class. This is because the family background of the Young Adult while they were growing up is likely to exert a stronger influence on their outcomes at age 20 than their current occupational or living situation which, in many cases, is likely to be transitory in nature. Young Adults at age 20 may be living between two households or living with siblings who may be all adults themselves. Therefore, groups are compared using the previous measure of household characteristics when the young people in the study were almost universally resident in the parental home on a full-time basis.

The other noteworthy change from previous *Growing Up in Ireland* reports is the new availability of individual socio-economic characteristics for the 20-year-old themselves. For the first time, data on characteristics of the Young Adult such as where they live (in the parental home or elsewhere) and their principal economic status (in education, work, etc) were available. Additionally, the Young Adult also described their own perception of economic strain (i.e. ease or difficulty with 'making ends meet'). For some outcomes, the individual characteristics of the 20-year-old may be more relevant than their family status at the previous wave. This is particularly so for Chapter 2, which looks at the transition to adulthood.

#### **1.6.1.1 Graph conventions for socio-economic variables**

In the analytic graphs for this report, where more than one core socio-economic variable is used to describe trends in outcomes in the same graph, a consistent colour scheme applies. For example, where both gender and income patterns are in the same graph, gender columns are coloured blue and income columns are shaded in yellow. The colour conventions for graphs with multiple socio-economic variables are as follows:

- Blue = gender
- Orange = education
- Green = family type
- Yellow = income
- Grey = class

A second convention designed to make graphs more readable is that, typically, just the highest and lowest groups have been compared – for example, just the 'highest' and 'lowest' income quintiles rather than all five groups; or 'degree-level' versus 'lower second-level or less' for parental education.

<sup>5</sup> The prevalence of disability is analysed in the report but not the relationship between disability and other outcomes. However, GUI data provide immense potential for a detailed analysis of this relationship.

#### 1.6.1.2 Presenting Results

Results from any sample survey are subject to a degree of uncertainty. To give an indication of the extent of uncertainty, confidence intervals and significance tests are used. The confidence interval (which is twice the margin of error) is the range within which the 'true' population figure would be expected to be found. The margin of error is affected by the sample size and the variability of the statistic (essentially, for a percentage, how close it is to 50% – with percentages close to 50% more variable). Differences in sample size (e.g. for subgroups or where a response does not pertain to the full sample) will also have an impact: smaller samples result in larger margins of error. Each of the figures and tables presented in the report gives the relevant margin of error.

Statistical significance relates to whether a difference between two groups is likely to have occurred by chance. The findings presented in the report are significant at the  $p \le .05$  level; in other words, we can be 95 per cent confident that the difference observed in the sample reflects a difference in the population.

The analyses presented in this report are descriptive in nature, documenting the extent to which particular experiences and outcomes are related to gender and aspects of family background, namely, parental education, family type, household equivalised income and social class. The discussion begins by outlining gender differences, if any, and then variation by family background characteristics. Where feasible, the analyses look at changes over time in the prevalence of particular experiences or outcomes.

Descriptive results have some limitations in not being able to unpack the reasons underlying the relationships found between, for example, family background characteristics and specific outcomes in young adulthood. Multivariate analyses would yield richer insights into the risk and protective factors associated with certain trajectories from adolescence to young adulthood, and the report highlights some examples of where future such research would provide useful information to support policy development. Nonetheless, the descriptive findings provide new insights in many dimensions of the lives of 20-year-olds, in particular, capturing the prolonged nature of the transition to adulthood for this cohort.

#### 1.6.2 DISTRIBUTIONS OF KEY SOCIO-ECONOMIC AND DEMOGRAPHIC VARIABLES 1.6.2.1 Household (parental) income

Income is obviously an important resource for every household as it affects the availability and quality of not just essentials, such as housing, utilities, clothing and food, but discretionary items, such as holidays, extra learning resources, and entertainment. At age 20 years, it influences how much financial support parents can give to their now-adult children. In *Growing Up in Ireland*, the parent (formerly the Primary Caregiver) provided an estimate of the household's total income from all sources less statutory deductions such as tax and social insurance contributions, either with exact figures or a guided best estimate.<sup>6</sup> This figure was then equivalised based on the number of adults and children in the household.

In this report, households are divided into quintiles or fifths based on that equivalised income figure, from 'lowest income' to 'highest income'. By definition, there are approximately equal numbers of respondents in each quintile. An income value was not available for just under 2 per cent of households in the study, which means that analyses using this variable typically have no more than 5,099 cases rather than 5,190.

#### 1.6.2.2 Household (parental) social class

In *Growing Up in Ireland*, social class is based on parental occupation. In households with two parents, a social class (e.g. 'professional', 'skilled manual' etc.) is calculated separately for each parent and the higher of the two categorisations is assigned to the household. While social class often overlaps with other characteristics of the household (for example, those in the 'professional' group will typically have higher education and income), the concept of class can sometimes reflect other resources available to the household in terms of social capital. For example, a parent in a 'professional' job may be more likely to

<sup>6</sup> For example, a respondent may choose a range estimate of '€24,000-€30,000' at step one, then be asked which of the following is closest: '€24,000-26,000', '€26,001-€28,000' or '€28,001-€30,000'.



know someone who can offer their 20-year-old son or daughter a sought-after internship opportunity than a parent in a lower-skilled position.7

A slightly longer list of social class categories was aggregated to produce groups with a usable number of households in each. For example, the categories of semi-skilled, unskilled and 'never worked' were grouped together as 'lower (skilled)/never worked'.<sup>8</sup> Unlike household income, however, there were not an equal number in each category as shown in Figure 1.2: the biggest category was the combination of 'Managerial/technical' (32%) and the smallest was 'professional' (9%). These occupational breakdowns are subject to statistical weighting to ensure representativeness (see Section 1.5.2 of this report and McNamara et al., 2021, for detailed information on statistical weighting).





Note: The figures total to 99 per cent because of rounding.

#### 1.6.2.3 Parental education

This variable reflects the highest educational attainment of the parent (formerly the Primary Caregiver and typically the biological mother of the Young Adult). Again, parental education often overlaps with other household characteristics such as income and social class, but not necessarily: for example, an individual with a degree may be unable to work due to ill-health and have a very modest income - however, their attitudes to education and aspirations for the 20-year-old's educational progress could be more influential in some areas than their buying power.

To some extent, the likely educational attainment of a parent in Cohort '98 will be subject to their own 'cohort effect' in terms of how accessible third-level education was when they were young adults themselves. By 2018, the parents of the 20-year-olds from Cohort '98 were likely to be in their 50s (and hence born in the 1960s). To put this in context, free second-level education was introduced in 1967 but the abolition of tuition fees for third-level courses did not come into force until the mid-1990s (two years before Cohort '98 were born). It is perhaps not surprising then that just under one-fifth of of the Primary Caregivers (Parent One) of Cohort '98 (Child Cohort) had degree-level education, compared to one-third of Primary Caregivers of Cohort '08 (Infant Cohort) (Williams et al., 2010). Figure 1.3 shows that the most common educational attainment category for Parent One from Cohort '98 was 'upper second-level' (i.e. Leaving Certificate) at 42 per cent.

This particular example was raised by Young Adults themselves who took part in a series of focus groups conducted by the Study Team in preparation for this phase (see O'Mahony et al., 2021). This label is shortened to 'lower/never worked' in tables and figures.



#### Figure 1.3 Distribution of highest educational attainment among 'Parents One' in Cohort '98

#### 1.6.2.4 Family structure (parental home)

The family structure variable for this report was simplified to 'one-parent' compared to 'two-parent'. Now that the 'Study Child' – and probably many of their siblings – have reached adulthood, it is not as useful to describe family structure in terms of number of children under 18. In *Growing Up in Ireland*, the term 'two-parent household' is used to describe situations where the person who is the parent resides with a spouse or partner. This is usually, but not necessarily, the Young Adult's biological mother and father; it could also be, for example, a mother and stepfather, foster parents or a grandmother (acting in loco parentis) and her spouse/partner. Of those Young Adults who participated at age 20, 22 per cent had been in a one-parent family structure at a previous wave (age 17/18 years for most) and the remaining 78 per cent were in a two-parent family.

One-parent families include those which may have always been a one-parent family, where a marriage or partnership may have broken up, or where one parent may have died. There are implications for the resources and support available where there is one rather than two adults in a parenting role – financially, practically and emotionally. Therefore, where a statistically significant difference in outcomes is observed in relation to family structure, it is important to note that these households will often also differ on other key characteristics.

For example, Figure 1.4 shows that while two-parent families were almost evenly distributed across the five income quintiles, one-parent families tended to be over-represented in the lower income groups: over a third of one-parent families were in the lowest income quintile and just 8 per cent of them were in the highest quintile. If there was no association between family structure and income, 20 per cent per quintile would be expected for both one- and two-parent families. (As noted earlier, the income variable is equivalised to take account of the number of people in the household.)





#### Figure 1.4 Distribution of one- and two-parent family structures across income quintiles

Note: These figures are subject to rounding and quintiles are not always exactly 20 per cent because of clustering on certain income values.

#### 1.6.2.5 Young Adult variables

Williams et al. (2009) demonstrated that from the earliest stages of *Growing Up in Ireland*, gender has been a defining feature of how children are socialised within (and indeed, outside) the family. From Wave 1 onwards, in accordance with Bronfenbrenner's model, gender has been seen to have a significant relationship with many socio-emotional variables. Initial influences at the family level had strong effects on these outcomes. Williams et al. (2018) demonstrated that at 13 years of age, puberty strengthened some socio-emotional and behavioural differences between genders. It is expected that by 20 years of age, gender will be an important differentiating feature in how the Young Adults perceive the world, in the kinds of expectations their families have of them, and those of wider society. Gender will continue to have a strong influence at this age given the Young Adult's growing independence in interaction with wider contexts like education and the labour market and in navigating romantic relationships.

Therefore gender was used as a key variable in this report. The sample at Wave 4 was 51 per cent men and 49 per cent women. The socio-economic characteristics of the 20-year-olds themselves are described in more detail in Chapter 2 but the following key points are worth noting as general context:

- 69 per cent of 20-year-olds were in education/training as their main activity, 26 per cent were in full/part-time work and 5 per cent were 'not in employment, education or training' (NEET);
- 32 per cent had another address besides their parent's home, but most still listed the latter as their 'main address';
- 9 per cent were experiencing financial stress (i.e. had 'difficulty' or 'great difficulty' in making ends meet).

#### 1.7 REPORT OUTLINE

The following chapters are organised to reflect the dynamic nature of the life stage of 20-year-olds. As a result, the report structure moves away from the organisation of reports on the cohort at earlier stages which were generally structured around the core outcomes of health, education and socio-emotional well-being.

Chapter 2 describes many of the key parameters that distinguish adulthood from childhood and adolescence. It begins by describing the economic status of the 20-year-olds, their living arrangements and financial arrangements. The chapter then describes personal relationships at this age; both the changing dynamics of relationships with parents and relationships with 'significant others', including romantic relationships. Finally, the chapter considers the internal sense of being an adult such as the individual's sense of agency and their civic engagement with the wider community as an adult.

Chapter 3 examines education and training pathways for Young Adults after second-level education, including the different types of education and training by individual and family-level characteristics. The chapter then explores the educational decision-making process, including choosing the type of course and the specific institution, and looks at how satisfied students were with their course. The chapter concludes with a consideration of those who did not complete their course and the reasons for non-completion.

Chapter 4 turns to the labour market experiences of the Young Adults: the type of employment, social class, hours and contract of those whose main status was being at work. Part-time employment while studying is considered next. The chapter concludes with an examination of the occupational aspirations of the young people and the characteristics of jobs they deemed most important.

In Chapter 5, attention turns to the peer relationships of the young people and their activities outside of study and work. It examines their friendship network, sources of information and help, leisure activities, level of physical activity, screen time and use of technology.

Chapter 6 considers the health of the Young Adults, both physical and socio-emotional. It examines their general health, weight status, risky behaviours (such as smoking, alcohol and drug use), socio-emotional well-being, coping strategies and sources of support.

Chapter 7 draws the findings together to highlight several salient features of the lives of 20-year-olds and link them to policies aimed at enhancing their well-being and development.



#### 1.8 SUMMARY

*Growing Up in Ireland*, the national longitudinal study of children and young people, is a project supported by the government, managed by the Department of Children, Equality, Disability, Integration and Youth (formerly the Department of Children and Youth Affairs) and the Central Statistics Office. It is carried out by the Economic and Social Research Institute and Trinity College Dublin. The goal of the project is to provide evidence to inform policies relevant to the well-being and development of children and young people.

The 20-year-olds of *Growing Up in Ireland* Cohort '98 were first interviewed at 9 years of age and subsequently followed at ages 13 and 17 and at age 20 in 2018/19. Of the original sample interviewed at age 9, 61 per cent (5,190) were interviewed at age 20. Interviews with their parent were completed in respect of 94 per cent of those who completed the 20-year-interview.

The chapter emphasised that this stage of the lives of young people is important to their transition from adolescence to adulthood, as they begin to make choices for their future path in terms of work, relationships and lifestyle. In the chapters that follow, the trajectories and outcomes for the Young Adults of **Growing Up in Ireland** will be analysed in terms of their individual characteristics (particularly gender), their family backgrounds (family income, parental education and social class measured at age 17/18) and their present circumstances (their situation regarding work, living arrangements and financial circumstances).



# **Chapter 2**

## THE TRANSITION TO ADULTHOOD



#### 2.1 INTRODUCTION

This chapter describes the transition into adulthood for the 20-year-olds of Cohort '98. It looks at several aspects of the Young Adults' lives which have significant potential for change since they reached the age of majority, including economic status, accommodation, financial circumstances, sense of agency and civic engagement. The Young Adults will have left secondary education, and some will have moved out of the parental home. Consequently, the Young Adults are likely to experience changes in terms of their close relationships and social supports during this period (Aquilino, 2006). Therefore, the nature of the 20-year-olds' relationships with their parents and the formation of romantic relationships are also explored. All of the topics described in this chapter are presented in terms of general descriptive information and according to key socio-demographic characteristics. Where relevant, longitudinal changes in these domains are described, with particular focus on changes since the study participants reached the age of maturation at 17/18.

Young adulthood is a period of identity exploration and capacity formation in several new domains. This includes the area of employment as well as generally clarifying worldviews and beliefs (Goldsmith, 2018). This period has been described as an age of instability, self-focus, identity exploration and possibility (ibid.). Young adults experience increased personal responsibility and autonomy, while at the same time gaining more independence from their parents and caregivers. However, it has been suggested that today's young adults are taking longer to 'grow up' than their predecessors (Tanner & Arnett, 2017). Relative to 30 years ago, they take on traditional adult responsibilities at a later stage – such as moving out of their parents' home, entering into marriage and having children. Evidence supporting this trend in Ireland comes from Central Statistics Office data (1970, 2020) revealing that the average age of men entering into an opposite-sex marriage rose from 28 years in 1970 to 37 years by 2019. This extension of youth has been attributed to shifts in economic and social circumstances such as globalisation, technological advancement, and the women's rights movement (Bynner, 2005).

Arnett (1998; 2000; 2014) argues for the recognition of a new life stage between adolescence and adulthood, that of 'emerging adulthood'.<sup>9</sup> Young adults in his study were asked, 'Do you feel that you have reached adulthood?', with the majority responding neither 'yes' nor 'no' but with the ambiguous 'in some ways yes, in some ways no', indicating that they do not feel they are adolescents, nor are they fully adults, but rather *in-between* (Arnett, 2000 p. 471).

In 2015, the (then) Department of Children and Youth Affairs (DCYA) developed the *National Youth Strategy 2015-2020* which is aimed at supporting young people between the ages of 10 and 24 years as they transition from children into adults (Department of Children and Youth Affairs, 2015, p.6). *Growing Up in Ireland* offers an opportunity to examine the impact which reaching full adulthood relatively later than previous generations is having on 20-year-olds within the Irish context. This research will allow the development of informed policies which can support future young adults and their families.

#### 2.2 PRINCIPAL ECONOMIC STATUS

Entering full-time employment and having a stable career is a common goal among young adults (Nelson & Barry, 2005). In developed countries, the change from manufacturing-based to service-based economies has seen an increased demand for skills and qualifications (Bergin et al., 2020). As a result, those without recognised qualifications are finding it more difficult to compete in the labour market which encourages young adults to remain longer in education (Gangl, 2002). Educational attainment has been identified as a key predictor of labour market outcomes, with those attaining higher education achieving higher salaries and early school leavers disproportionately at risk of unemployment (Higher Education Authority, 2018; Byrne & Smyth, 2010).

<sup>9</sup> This will be typically referred to as 'young adulthood' in this paper in order to simplify the terminology.



Young people tend to be engaged in more precarious employment, with many in temporary work (Bergin et al., 2020). This may be by choice as young people may move jobs frequently in order to find a role which aligns with their own interests and skills (Quintini & Martin, 2006). Though today's young adults are better educated than prior generations, unemployment for those in their twenties remains significantly higher compared to older adults and they are at an increased risk of unemployment during an economic downturn (Hernanz & Jimeno, 2017). These factors highlight the policy relevance of understanding the factors which influence economic activity in young adults.

Due to the importance of this transition following school, the Young Adult interview in *Growing Up in Ireland* at age 20 included an 'event history' timeline which summarised their principal economic status on a month-by-month basis from when they left school, as well as their current economic status. The participants could provide responses such as *in school*, *in further/higher education*, *in work*, *in training*, *unemployed* or engaged in *other* economic activity (including *minding the home or family*, *unable to work or study due to disability/illness* or *taking a year out*).

Figure 2.1 shows the principal economic status of the 20-year-olds at the time of the interview. Being in further/higher education or training was the most common economic status (69%),<sup>10</sup> a fifth were in full-time employment (21%) with 6 per cent working part-time, 3 per cent unemployed and just over 2 per cent in another category of principal economic status.<sup>11</sup>





Note: Margins of error are shown in parentheses.

Another way to examine principal economic status is to group all Young Adults into categories of education/training (69%), employment (26%) and 'not in employment, education or training' (NEET; 5%). There were no significant differences in principal economic status by gender. Figure 2.2 shows the 20-year-olds' principal economic status by Parent One education level and family structure.

Being in education or training was considerably more common among those whose parent had a degree or higher at 17/18 years compared to those from lower educational backgrounds (81% versus 52%) and being at work was much less common (17% versus 39%), as was being NEET (2% versus 9%). There were also differences by family structure, with those from two-parent families more likely to be in education/ training (72% versus 56% of those from one-parent families) and less likely to be at work (24% versus 35%). The difference in being NEET by family structure was not statistically significant (4% versus 9%).

<sup>10</sup> Small numbers in some activities means that education/training is best explored in terms of academic pathways in Section 3.2. The broad category presented here will not be broken down further in this section.

<sup>11</sup> Rounding of figures totals to 101% when no decimal places are used, in Fig 2.1, the full-time and part-time work categories sum to 26% in subsequent analyses.


### Figure 2.2 Principal economic status by parental education and family structure

Note: Margins of error are shown in parentheses in the labels.

### 2.3 ACCOMMODATION

Moving out of the family home is still considered a measure of independence (European Commission, 2018). In Ireland, as elsewhere, access to affordable housing is likely to be an important factor in the timing of leaving the parental home. Many young adults in Ireland remain living in the parental home due to high rental costs and a shortage in housing supply, particularly in urban areas (Turnbull, 2018). Housing was among the most important issues mentioned by voters in polling ahead of the 2020 general election (McGee, 2020) and housing is a key policy focus for the national government.<sup>12</sup>

Though it is considered by many to be a step towards greater independence, negative outcomes have also been associated with leaving the parental home in early adulthood. For example, it is one of the greatest predictors of poverty amongst young adults. According to data from the European Quality of Life Survey (EQLS), young adults (aged 18-24) were better off financially and less likely to be in the lowest income quintile if they lived with their parents (Eurofound, 2019). On the other hand, the same study showed that life satisfaction is greater among young adults with a non-parental address; however, this no longer remains true when factors such as income, employment and health are taken into account, suggesting that differences in the well-being of 18-24-year-olds in different households depends on whether or not this is by choice (Eurofound, 2019).

Research indicates that leaving the parental home may not always align with independence. Goldscheider and Davanzo (1986), for example, found that during the transition to adulthood there is often an intermediate step between leaving the parental home and setting up an independent residence. This period, described as 'semi-autonomy', is characterised by the young adult living away from the parental home (typically in shared accommodation) while, for the most part, remaining financially dependent on their parents (ibid).



In *Growing Up in Ireland*, the Young Adults were asked if they lived 'on a regular basis' at an address other than their parental address. Those who were living at home were asked if they would prefer 'to live with their parents' or prefer to live at a separate address. They were also asked if their reasons for living at home were *mostly financial, a little bit to do with finances* or *nothing to do with finances*.

If the Young Adult had a 'non-parental address', they were asked whether they considered their parental or other address as their main residence. Further questions collected information on this 'other' address including the nature of occupancy (for example, *rented from a private landlord who lives elsewhere*), the cost and suitability of the accommodation, and also the number of nights spent in the parental home (if any).

As shown in Figure 2.3, just under one-third of the Young Adults had a non-parental address (32%). However, the vast majority of these still reported their parents' home as their main address (82%). Furthermore, most of the Young Adults with a non-parental address (87%) spent at least one night a month in their parental address; the median number of nights spent at their parental address was seven per month.





Note: The margins of error are shown in parentheses in the labels.

Women were slightly more likely than men to have an address outside the family home (34% versus 30%). Socio-economic differences were also observed: those whose parent had a degree or higher were considerably more likely to have a non-parental address compared to those whose parent had completed lower second level (i.e. the Junior Certificate) or less (40% versus 19%). Similar trends were observed among those whose families were in the highest income quintile compared to those in the lowest income quintile at age 17/18 (37% versus 26%); and from two-parent (33%) rather than one-parent families (28%).

Young Adults who were in education or training were more likely to have an address outside of the parental home (38%), likely reflecting the need to live away from home to attend an education institution. Those in employment (20%) or who were NEET (21%) were less likely to have a non-parental address.

Of those who were living at their parent's address, over half (56%) stated that they would prefer to live at this address, while the remainder (44%) responded that they would prefer to live at their own address. A total of 42 per cent of these Young Adults described that they were living at home for *mostly financial* 

reasons, 28 per cent described that it was a little bit to do with finances and 31 per cent said it had nothing to do with finances.

Figure 2.4 shows the type of occupancy among those who had a non-parental address. The most common type was a 'house or flat rented from a landlord who lives elsewhere' (50%) followed by on-campus accommodation (25%). Other categories had smaller percentages such as 'occupied free of rent from a family member' (5%), living in 'digs or lodgings' (4%), 'renting from a landlord living at the address' (4%), in another type of occupancy (4%) and living in a house which is rented from a family member (2%). In relation to the quality of the accommodation, nearly all of the 20-year-olds who had a non-parental address stated that the accommodation was suitable to meet their needs (95%). The number of people the 20-year-olds lived with ranged between one and eight people, with a median of three.





Note: The margins of error are shown in parentheses in the labels

### 2.4 SOURCES OF ECONOMIC SUPPORT AND FINANCIAL STRESS

Financial stability is an important aspect of adult life. The Youth Guarantee set out by the European Commission (2018) recognised the importance and long-term gains of investing in the training, education and employment of young adults. Furthermore, *Better Outcomes, Brighter Futures*, the national framework for children and young people up to the age of 24, identifies 'economic security and opportunity' as a core outcome, and notes developing 'pathways to economic participation and independent living' as one of its major aims (Department of Children and Youth Affairs, 2015). Young adults may avail of a variety of sources of economic support, including full-time employment, part-time employment, student maintenance grants and social welfare payments. However, with a high proportion of youth in full-time education, many benefit from financial support from their families.

Parental financial support into early adulthood has increased in prevalence in recent years. Data from the Monitoring the Future Study (MTF) in the United States of America were used to examine patterns of parental financial support towards young adults in the early 1980s and again in 2011, revealing that parent financial support significantly increased across this period. However, disparities were found across



the socio-economic gradient, with young adults from less affluent families receiving less parental financial support (Wightman, Patrick, Schoeni & Schulenberg, 2013). Financial independence is often viewed as a marker of adulthood (Arnett 1998; 2000). However, there is also evidence that the pattern and timing of financial independence in the transition to adulthood has implications for long-term financial well-being, with young adults who receive financial support from their families more likely to obtain college degrees and retain full-time employment (Bea & Yi, 2019). Other research suggests that young adults who are financially independent from their parents are more likely to report financial worry (Bea & Yi, 2019).

The Young Adults in GUI were asked, using 'yes' or 'no' responses, whether they or their parent(s) contributed to a range of financial costs. The Young Adults and their parent were also asked about financial stress using a one-item question about their degree of difficulty or ease in 'making ends meet' with answers on a six-point scale ranging from *with great difficulty* to *very easily*. Those who answered *with great difficulty* or *with difficulty* were categorised as experiencing financial stress. This question was administered to the parent in all waves of the study (including this wave), but the Young Adults' self-report was determined to be more indicative of their financial stress at this wave.

### 2.4.1 SOURCES OF ECONOMIC SUPPORT AND FINANCIAL (IN)DEPENDENCE

Figures 2.5 and 2.6 show whether the Young Adult reported themselves or their parents as contributing to a range of their costs depending on the Young Adult having a non-parental address or not. It should be noted that the Young Adult was able to report that both they and their parent, or neither, contributed to a certain expense. Therefore, the total percentage in each category may not reach, or may be greater than, 100 per cent.

As described earlier, 32 per cent of Young Adults had a non-parental address. For those who had an alternative address (Figure 2.5), parents were more likely than the Young Adult to contribute to expenses such as health and accommodation costs (for example, rent or mortgage payments). In contrast, the Young Adults themselves were more likely than their parents to contribute to expenses such as food, utility bills, transportation, communication (such as phone bills), social and leisure expenses, debt repayments and 'other' expenses.

Similarly, for those who lived in their parental home all of the time (Figure 2.6), their parent(s) were more likely to contribute to their health and accommodation expenses; however, parents were also more likely to contribute to food and utility bills. The Young Adults were more likely than their parents to contribute to the remainder of their expenses.

Interestingly, for a significant proportion of Young Adults living in the parental home, it appears that neither they nor their parent contributed to expenses for accommodation and health. This indicates that either these expenses did not exist (e.g. their parents owned their home free of a mortgage, the Young Adult had few health costs) or they were (at least partly) paid for by a third party (e.g. the family lived in social housing or were receiving Housing Assistance Payments (HAP); the Young Adult was in receipt of a medical card). Alternatively, given the Young Adult was reporting on the expenditure, they may not have been aware of their parents' contributions to these costs.<sup>13</sup>

<sup>13 &#</sup>x27;Don't know' and 'Don't want to say' were valid answer options for these questions but were excluded from Figures 2.5 and 2.6 as they were used by a negligible proportion of the Young Adults.



### Figure 2.5 Young Adult's report of whether they or their parent(s) contributed to different financial costs (those with a non-parental address)



Parent

Young Adult



Note: The margins of error were, at most,  $\pm 2\%$ .

### 2.4.2 DIFFICULTY MAKING ENDS MEET AND FINANCIAL STRESS

Figure 2.7 shows the level of difficulty or ease in making ends meet as reported by the 20-year-olds. Approximately 9 per cent of Young Adults reported making ends meet with difficulty or with great difficulty.<sup>14</sup> However, larger proportions of 20-year-olds were making ends meet easily or very easily (22% and 11% respectively).

Those who were making ends meet with difficulty or with great difficulty were categorised as experiencing 'financial stress' in comparison to those who were making ends meet very easily, easily, fairly easily, or with some difficulty.





### Figure 2.7 Level of difficulty or ease in making ends meet reported by the 20-year-olds

Note: The margins of error are shown in parentheses in the labels.

Based on the same categorisation, approximately 11 per cent of the Young Adults' parents reported experiencing financial stress themselves while the remaining 89 per cent were 'making ends meet' more easily. The overlap between Young Adult and parental financial stress is explored in Table 2.1.

### Table 2.1 Percentage experiencing financial stress based on both Parent and Young Adult reports

Both parent and YA in financial stress	2%
YA (only) in financial stress	6%
Parent (only) in financial stress	9%
Neither in financial stress	83%

There was a significant positive correlation between parent and Young Adult financial stress (r = .12, p < .001), indicating a weak relationship between parent and Young Adult financial stress across the full range of the 'making ends meet' variables. A composite measure was derived, taking account of both parental and Young Adult reports of financial stress (see Table 2.1). A large group (83%) reported no financial stress while the proportion where both parents and Young Adults reported financial stress was low (at 2%). There was a mismatch in parent-Young Adult financial stress for 15 per cent of the group, with the parent reporting financial stress but the Young Adult indicating ease in making ends meet being slightly more common than Young Adults experiencing greater difficulties than their parents (9% and 6% respectively).

Figure 2.8 depicts the percentage of Young Adults experiencing financial stress (i.e. making ends meet *with difficulty* or *with great difficulty*) by other socio-demographic characteristics. Overall, 9 per cent were experiencing financial stress and women were more likely to experience strain than men (11% versus 7%). Young Adults from the lowest family income quintile at 17/18 years reported financial stress more often than those from the highest income quintile (14% versus 7%), as did those from one-parent families compared to two-parent families (12% versus 8%).



### Figure 2.8 Financial stress (difficulty or great difficulty making ends meet) at 20 years old by background variables

Note: The margins of error are shown in parentheses in the labels.

Figure 2.9 depicts longitudinal trends in financial stress; using the same question that was asked of the parent about the household at Wave 1 (9 years), Wave 2 (13 years), Wave 3 (17/18 years) and the 20-yearold's self-reported financial stress at Wave 4. The majority of 20-year-olds and their families did not experience financial stress at any wave of the study (61%). Just under a quarter experienced financial stress at one wave. The remaining 15 per cent experienced financial stress at two or more waves of the study, indicating a degree of persistence in difficulties.





Note: The margins of error are shown in parentheses in the section labels.



### 2.5 RELATIONSHIPS WITH PARENTS

The national policy framework for children and young people, *Better Outcomes, Brighter Futures*, recognises the vital role of the parent-child relationship in childhood development, observing that it is more influential in terms of developmental outcomes than family structure or socio-economic status (Department of Children and Youth Affairs, 2015 pp. 15, 75-83). While there is a breadth of research exploring the relationships between parents and their adolescent children, less is known about this relationship as they mature into young adults (Nixon, 2021). It has been argued that the extended transition from adolescence into young adulthood has also brought about a 'prolonged parenthood' (Fingerman, 2017). Therefore, this phase of the study offers an interesting opportunity to explore the nature of this relationship and its impact on both the young adults and parents within the Irish context.

While most of the 20-years-olds in *Growing Up in Ireland* remained living with their parents, the dynamics of their relationship were likely to have changed since they were an adolescent. While young adulthood is typically a period of increased independence, recent research indicates that parents continue to play an important role in this transition period (Lindell, Campione-Barr & Killoren, 2017). Using data from two longitudinal studies of college students in the US, Holt, Mattanah and Long (2018) observed that young adults with secure, stable parental relationships tended to report better academic, social and emotional functioning during young adulthood, whereas the inverse was true for students with consistently poor relationships with their parents. The authors suggest that positive relationships with parents act as a source of support for young people as they navigate the uncertainty and instability associated with early adulthood.

Both the Young Adult and their parent reported on their relationship with one another. Though GUI data have tended to show reasonable levels of agreement between parent and child on self-reported quality of relationships (McNamara et al., 2021 p. 102), other studies have found notable discrepancies between parents' and young adults' accounts of the quality of their relationship (Aquilino, 1999), highlighting the generalised importance of considering both perspectives.

The 20-year-olds completed questions from the Network of Relationships Inventory with regards to their relationships with their mothers and fathers. This questionnaire was also used at the 17/18-year wave and was originally developed by Furman & Buhrmester (1985). The Young Adult reported on four aspects of their interactions with their parents: *intimacy, admiration, conflict* and *reliability*. Each of these subscales contains two items rated on a five-point Likert scale with responses ranging from *never* to *always*.

The parent (usually the mother) was asked a single item question to rate the overall quality of the relationship with the 20-year-old, ranging from 0 (*really bad*) to 10 (*absolutely perfect*). They were also asked about how often in the last three months they and their 20-year-old had open disagreements. Topics included 'helping around the house', 'money' and 'sexual behaviour'. Responses to this question included *never or rarely, once a month or less, several times a month, about once a week, several times a week* and *almost every day.* Due to frequent arguments being uncommon, responses of *once a month or less* and more often were combined and compared against the lowest responses of *never or rarely* to explore the patterns of argument between the parent and their 20-year-old over the last three months.

### 2.5.1 INTERACTION WITH PARENTS AT 20 YEARS

Overall, 20-year-olds tended to be positive about their interactions and relationships with their parents. Table 2.2 gives the descriptive statistics for each of the four subscales as reported by the 20-year-olds about their mother (or mother figure) and father (or father figure). The table reports the mean level of the rating, the standard deviation (that is, the extent of variation around this mean) and the extent to which ratings of mothers were similar to ratings of fathers. Note that a higher score on a subscale indicates a higher level of that measure, such that a high 'intimacy' score indicates that the Young Adult reported a higher level of intimacy in their interactions, and a higher 'conflict' score indicates more conflict. In

general, the 20-year-olds gave their parents mid-range ratings for 'intimacy' and 'conflict'; however, there were higher ratings for 'admiration' and lower ratings for 'unreliability'. These findings were similar to those found at age 17/18 (McNamara, Murphy, Murray, Smyth & Watson, 2020).

Table 2.2Mean scores for Young Adults' rating of relationships with their mothers and fathers and<br/>correlation between these scores15

Subscale	Sample questionnaire item	Mean (SD)	Correlation between Mother and Father scores <sup>16</sup>	
Mother Intimacy subscale	Chara what way (no thinking	6.2 (2.0)	40	
Father Intimacy subscale	Share what you re thinking	5.2 (1.9)	.40	
Mother Admiration subscale	Shows that (backba) likes you	8.4 (1.6)	.49	
Father Admiration subscale	Shows that (ne/she) likes you	7.9 (1.9)		
Mother Conflict subscale		5.2 (1.5)	.38	
Father Conflict subscale	rou disagree and quarrei	4.8 (1.6)		
Mother Unreliability subscale	Afraid (he/she) will love you	3.2 (1.4)	46	
Father Unreliability subscale	less if you disappoint her	3.3 (1.7)	.40	

There were some differences in the relationships with mothers and fathers. Young Adults rated their relationships with their mothers as more intimate, with higher levels of admiration and more conflict; they were also less likely to give their mothers low ratings for reliability.

The correlations between mothers' and fathers' scores on the subscales were positive, and statistically significant, showing an overall trend for ratings to be given in the same direction; however, these correlations are only moderately strong, indicating considerable within-family variability on ratings, especially for conflict which has a weaker relationship between mother and father ratings than other subscales.

Figures 2.10 and 2.11 show the longitudinal trends in the Young Adult's view of interactions with their mother and father at the age of 17/18 and age 20. Overall, the general trend was that scores on the subscales were more likely to stay the same (plus or minus one point) than they were to change.

As shown in Figure 2.10, ratings of mothers on the 'admiration' and 'conflict' subscales remained consistent between the ages of 17/18 and 20 for almost two-thirds (65%) of the Young Adults. The remaining third of Young Adults were more likely to report an improvement in their ratings of their relationship with their mother (i.e. higher admiration and intimacy, lower conflict and unreliability) than a disimprovement. In particular, ratings of 'unreliability' were the most likely to remain stable (72% remaining within one point) and these scores were typically in the low range.





### Figure 2.10 Changes in the Young Adults' reports of their interactions with their mothers since age 17/18

Note: The margins of error are  $\pm 1\%$ .

Figure 2.11 shows the longitudinal trends in Young Adults' reports of their interactions with their fathers. Again, 'unreliability' was the most likely to stay within a similar range (scores were generally toward the low range and 67% remained within one point). Scores of 'intimacy' and perceived 'admiration' from fathers were more likely to improve (by 22% for both subscales) than worsen (with 18% and 14% reporting as worsening respectively). These findings are in line with previous research which suggests that the relationship between the parent and their child tend to improve, or at least stabilise, across this transition from adolescence into young adulthood (Lindell & Campione-Barr, 2017).



Figure 2.11 Changes in the Young Adults' reports of their interactions with their fathers since age 17/18

Note: Margins of error are at maximum 1%.

### 2.5.2 PARENTS' VIEW OF THEIR RELATIONSHIP WITH THE YOUNG ADULT

In general, parents were positive about the relationship with their Young Adult (Figure 2.12). Just 7 per cent rated the quality of their relationship as 6 or lower on the ten-point scale, 43 per cent gave a rating of 7 or 8, while half rated their relationship as 9 or 10.





Note: Margins of error are no more than  $\pm 2\%$  for Gender,  $\pm 4\%$  for Parent education, and  $\pm 1\%$  for Total scores.

There were some differences by the parent's education: those from lower second level or less education backgrounds were somewhat more likely to rate their relationship as 6 or lower (9% compared to 6% of those with a degree or higher), but also more likely to give a very high score of 9 or 10 (56% versus 44%). The likelihood of giving the relationship a low rating did not differ by the Young Adult's gender. However, Figure 2.12 shows that parents of young men were somewhat more likely to rate their relationship as 7 or 8 (45%) rather than 9 or 10 (47%) compared to 53 per cent of young women who had the highest rating from their parent.

### 2.5.2.1 Disagreements with the Young Adult

Figure 2.13 shows the nature of disagreements between the parent and the Young Adult in the last three months, as reported by the parent. The reports of parents who lived with their 20-year-old full-time are contrasted with those where the Young Adult had another address. Figure 2.13 depicts the proportion of Parents One who reported having a disagreement about the topic in the last three months.

Overall, parents of Young Adults who lived with them full-time had significantly more disagreements with them across all topics, with the exception of how they dressed, their friends, their boyfriend/girlfriend and their sexual behaviour.

For both groups of parents, 'helping around the house' was the most common source of frequent disagreement with their 20-year-old (51% overall); but it was higher for those who lived together full-time (58%) compared to those who did not (37%). Just over a fifth of parents reported frequent disagreements about 'money' (22% overall, 23% for those who lived with parents full-time compared to 19% of those with another address). Parents of those living at home were more likely to contribute to the Young Adult's day-to-day expenses, which may be a source of tension in the relationship; furthermore, they may not witness their Young Adult's spending on items they consider to be frivolous when they live somewhere else.



### Figure 2.13 Disagreements with the Young Adult in the last three months, as reported by the parent; comparisons between Young Adults with and without a non-parental address



Note: The margins of error are, at most,  $\pm 2\%$ .

Parents of those living at home all the time were also more likely to have disagreements about their alcohol, smoking or drug use (15% overall, 16% living at home, 12% living elsewhere) or staying out late (13% overall, 15% living at home, 9% living elsewhere). It should also be noted, however, that Young Adults who remained living in the parental home may also have had more time to converse with their parents, which may have contributed to the higher frequency of arguments between them and their parents.

### 2.6 SEXUAL ORIENTATION, EXPERIENCE AND ROMANTIC RELATIONSHIPS

The development of romantic relationships often begins in adolescence or early adulthood and continues over the life-course. Young adulthood is commonly a time of exploration and may include numerous different romantic relationships, moving between transient romantic encounters and devoted relationships (Fincham & Cui, 2010). Research suggests that Irish young adults are getting married later in life (Central Statistics Office, 2018). While marriage is still a life goal for many (Figure 2.17 shows that just under a quarter (23%) of 20-year-olds who are in a relationship hope to be engaged or married to a current partner within the next five years), obtaining this goal may be delayed by either choice or necessity. Many Irish young adults now choose to co-habit prior to entering into marriage and raising children while unmarried has become more common in recent decades (Laplante, Castro-Martín, Cortina & Fostik, 2020). Laplante et al. also explored societal secularisation and cohabitation patterns as contributing to societal changes. Secularisation, whereby religious influence on laws and policies lessened, were seen as allowing broad shifts in norms and values in recent decades. Cohabitation patterns in Ireland in 2016 had begun to catch up on demographic shifts seen in the 90s in European countries without a Catholic majority, such as the UK. Additional to secularisation, greater economic freedom for women has led to both partners being likely to engage in economic activity outside the home; the need to co-ordinate two sets of occupational and life plans can delay marriage (Shulman & Connolly, 2013).

Research suggests that the number of people 'coming out' as LGBTI+<sup>17</sup> is increasing both in Ireland and globally (Goodman et al., 2019; Higgins at al., 2016). The *LGBTI+ National Youth Strategy 2018-2020* acknowledges the importance of 'developing the research and data environment to better understand the lives of LGBTI+ community' (Department of Children and Youth Affairs, 2018). Within the Irish context, recent legislation, such as the *Gender Recognition Act* (Government of Ireland, 2015a) and *Marriage Equality Act* (Government of Ireland, 2015b), has sought to improve the lives of LGBTI+ people. However, young adults who identify as LBGTI+ tend to be at increased risk of physical and mental health difficulties, as well as homelessness and family rejection (Hafeez, Zeshan, Tahir, Jahan & Naveed, 2017; Parker et al., 2018). More recently, the DCEDIY has funded and published research aiming to identify gaps in information and where additional research was needed in the national LGBTI+ research landscape (Költo, Vaughan, O'Sullivan, Kelly, Saewyc & Nic Gabhainn, 2021).

In today's developed countries, most people are sexually active during early adulthood (Barber, 2018). Findings from the *My World Survey 2* indicated that two-thirds of young adults aged 18-25 in Ireland reported having had sexual intercourse, and a fifth reported having had sexual intercourse prior to the age of consent (Dooley, O'Connor, Fitzgerald & O'Reilly, 2020). Sexual health behaviour in young adults receives ongoing research attention, given the vulnerability of sexually active young adults to acquiring sexually transmitted diseases (STDs) or experiencing an unplanned pregnancy (Burke, Ni Gabhainn & Young, 2015).

As in the 17/18-year wave, 20-year-olds in *Growing Up in Ireland* reported their sexual and gender identity as part of a self-complete questionnaire. They were asked to describe their sexual orientation, with responses including *heterosexual/straight*, gay or *lesbian*, *bisexual*, *questioning/not sure*, *asexual* or *don't know*. They were asked to self-define their gender using responses of *male*, *female* or *other* and if they would describe themselves as transgender.

Compared to previous waves, 20-year-olds were asked more questions about their romantic relationships. They could describe their current relationship status as *single/not dating, casually dating but not exclusive, dating one person, living together (but not engaged or married), engaged (living together or not), married (living together or not)* or other. They were also asked about the number of people they had dated in the previous year. Those who were in a relationship completed further questions about their partner and what they predicted the status of the relationship would be in five years' time.

Questions on first sexual intercourse were routed depending on whether the Young Adult had reported experience of intercourse at the 17/18-year wave (i.e. they were not repeated if they had been answered previously). Other questions, such as the frequency of the use of condoms and other forms of contraception, were asked of all 20-year-olds with sexual experience. All of them were asked two new questions to gauge their sexual health knowledge: one question on methods of STD prevention and another on when pregnancy is most likely to occur during the menstrual cycle.

### 2.6.1 SEXUAL ORIENTATION

As shown in Figure 2.14, the majority (87%) of the 20-year-olds stated that they were 'heterosexual/ straight'. A total of 6 per cent identified as 'bisexual' and 3 per cent as 'gay or lesbian'. Just over 2 per cent said they were 'questioning/not sure' and just under 2 per cent were in other categories, stating they were 'asexual,' they 'didn't know' or they 'preferred not to say.'



Note: The margins of error are shown in parentheses in the labels.

#### 2.6.2 ROMANTIC RELATIONSHIPS

Of the 20-year-olds, a third reported that they had not dated anyone in the past year, over half (53%) had dated one person, 9 per cent had dated two people, and 5 per cent had dated three or more people.

Figure 2.15 shows the relationship status of the 20-year-olds at the time of the survey. A total of 43 per cent were single and not dating, 40 per cent were dating one person, and 14 per cent said that they were 'casually dating but not exclusive'. Over 2 per cent were living with a romantic partner (but not engaged or married) and 1 per cent described themselves as in 'other' categories.<sup>18</sup> Almost two-thirds of 20-year-olds who were in a relationship (65%) were dating someone aged 20-22 years, 20 per cent were dating someone younger than 20 and 14 per cent were dating someone older than 22.





Note: The margins of error are shown in parentheses in the labels.

As outlined in Figure 2.16, women were more likely to report that they were in a relationship than men (49% versus 37%), and less likely to report that they were casually dating (13% versus 15%) or single (38% versus 48%). Those in employment (rather than education) were also more likely to report that they were in an exclusive relationship (48% versus 41%) or casually dating (16% versus 13%) and, consequently, less likely to say they were single (35% versus 46%).





Those who were in a relationship were asked what they thought the status of the relationship would be in five years' time, as illustrated in Figure 2.17. The 20-year-olds tended to be optimistic about the longevity of their current relationships; with three-quarters expecting the relationship to last the next five years. While a fifth (19%) thought they would be engaged, only 4 per cent thought that they would be married. However, the most common response was that they believed they would be living together, but not engaged or married (40%). This may reflect wider trends wherein young adults are more likely to delay marriage or to live with a romantic partner without marrying.





Note: The margins of error are shown in parentheses in the labels.

Note: The margins of error are, at most, ±2% for gender, ±3% for principal economic status and ±1% for the total.



### 2.6.3 SEXUAL EXPERIENCES

At 17/18 years old, a third of the Young People reported that they had had sexual intercourse. At 20 years, half (51%) reported that they had sexual intercourse between the ages of 17/18 and 20, and the remaining 16 per cent reported that they were not yet sexually active (Figure 2.18).





Note: The margins of error are shown in parentheses in the labels.

The following set of percentages only apply to the subset of Young Adults who reported that they had engaged in sexual intercourse (84%). A total of 95 per cent of the sexually active 20-year-olds stated that they first had sexual intercourse with a member of the opposite sex. Half of the sexually active Young Adults said that they first had sexual intercourse within the context of a steady relationship, a further 34 per cent said that they *knew each other but didn't have a steady relationship* and a further 15 per cent said that they had *just met for the first time*.

### 2.6.3.1 Sexual Health

Figure 2.19 shows the sexual health practices of 20-year-olds, as well as their thoughts about the timing of their first sexual intercourse, and the gender differences in responses. It should be noted that these questions were only asked of those 20-year-olds who were sexually active.

A majority of all sexually active 20-year-olds (61%) reported that they always used some form of contraception during intercourse, and this was higher for women (66%) than men (57%). A total of 6 per cent of both men and women *never* or *hardly ever* used contraception.

Consistent condom use was less prevalent, with just a third of Young Adults (33%) reporting that they used a condom on every occasion of sexual intercourse. Condom use on every occasion of sexual intercourse was more frequently reported by men (35%) than by women (30%). A total of 18 per cent reported *never* or *hardly ever* using a condom during sexual intercourse, and this was higher amongst women (21%) than men (15%).



#### Figure 2.19 Gender differences in condom use and contraception use

Note: The margins of error are, at most, ±3% for Total and Female, and ±4% for Male.

Table 2.3 presents the 20-year-olds' views on the timing of their first sexual intercourse (for all of the sexually active respondents) split by gender. The Young Adults were asked for their views on the timing of this event and chose from a list of response options presented in the table.

	Should have waited longer	Should not haveIt was about thewaited so longright time		Not sure
Male	9%	9%	68%	14%
Female	28%	2%	61%	8%
Overall	18%	6%	65%	11%

#### Table 2.3Timing of first sexual intercourse by gender

Note: "Prefer not to say" was a valid answer for this question. A small number of participants (<2%) gave this answer and were excluded from the figures presented here.

Table 2.3 shows that 65 per cent of the 20-year-olds who were sexually active felt their first experience of intercourse was at 'about the right time', and men were more likely to be of this opinion (68%) than women (61%). Almost a fifth of all sexually active Young Adults (18%) thought they 'should have waited longer' and women were three times as likely to be of this opinion (28%) than men (9%). A minority, 6 per cent, of the sexually active 20-year-olds thought they should not have waited so long, and more men (9%) were of this opinion than women (2%). The remainder of respondents stated that they were not sure (11%) and this was higher amongst men (14%) than women (8%).

Figure 2.20 compares sexual health practices and regret about timing for Young Adults based on whether they first reported having sexual intercourse at 17/18 years old or between the ages of 17/18 and 20. Overall, those who had sexual intercourse later (between 17/18 and 20) were more likely to report safe sex practices than those who had sexual intercourse earlier (by 17/18). Of those who reported being sexually active at 17/18, 9 per cent used contraception *never* or *hardly ever*, whereas this answer was given by only 4 per cent of those whose first sexual experience was later. A total of 57 per cent of those who had sexual intercourse earlier responded that they used contraception every time, whereas this was reported by 64 per cent of those who reported having sex later. Those who had sexual intercourse earlier were twice as



likely (25%) to never use a condom, compared to those who started later (12%). Those who initiated sex at a later age were more than twice as likely (41%) to use a condom on every occasion than those who had had sex by the age of 17/18 (19%).

Interestingly, the same proportion of respondents in both groups (64%) stated that sexual intercourse had happened at about the right time for them. Those who had sex later were more likely to say that they should not have waited so long (9%) compared to those who had sex earlier (3%). A quarter of those who had sex before 17/18 thought that they should have waited longer, compared to 17 per cent of those who had sex later.





Note: The margins of error are, at most, ±4%.

The Young Adults were also asked about the most effective methods for preventing sexually transmitted diseases (STDs).<sup>19</sup> This question was asked of all 20-year-olds, regardless of whether they were sexually active or not. In general, the Young Adults had a good understanding of STD prevention. A total of 85 per cent of Young Adults answered that a condom would be the most effective method of preventing STDs. Approximately one-in-ten Young Adults gave other responses (such as *good hygiene*, *withdrawal*, and *birth control pill*) and 5 per cent stated that they did not know. These patterns did not differ by gender.

### 2.7 BECOMING AN ADULT AND SATISFACTION OF BASIC PSYCHOLOGICAL NEEDS

According to Deci and Ryan's (2000) self-determination theory, there are three basic psychological needs which are required for optimal psychological growth and well-being; autonomy (feeling a sense of volition), competence (mastering one's environment) and relatedness (feeling connected to others). These needs are thought to be universal across cultures (Sheldon et al., 2004), and have been found to play an important role in several domains of life, including relationships, employment, educational attainment and recreation/sport (Milyaversuskaya et al., 2009; Milyaversuskaya & Koestner, 2011). Basic needs satisfaction has been found to be psychologically protective, with those with greater need satisfaction reporting higher levels of well-being, a finding which holds true across people at different stages of the lifespan

(Reis, Sheldon, Gable, Roscoe & Ryan, 2000; Véronneau, Koestner & Abela, 2005). The examination of basic psychological needs at 20 years old allows for cross-sectional examination of the relationship between needs satisfaction and other domains at this important developmental milestone. Basic needs satisfaction and self-determination theory have gained increased interest across a number of disciplines in recent years (Koestner and Holding, 2021). Future research using longitudinal data from this cohort will allow for the investigation of protective and risk factors for need satisfaction in early adulthood.

### 2.7.1 BECOMING AN ADULT

The 20-year-olds were asked to what extent they considered themselves to be an adult, with responses from *entirely true* to *not at all true*. They were also asked 'in terms of taking on adult responsibilities' whether they had grown up *faster*, *about the same rate* or *slower* than other people their age.

As shown in Figure 2.21, over one-quarter (28%) of 20-year-olds stated that it was *entirely true* that that they considered themselves an adult and almost half (49%) said it was *true for the most part*. A further fifth (19%) considered it to be *somewhat true* and very few felt it was just a *little true* or *not true at all* (3%).

Men tended to identify as an adult more strongly than women, with more stating that it was *entirely true* that they considered themselves to be an adult. There were socio-economic differences, with those from families with lower income, lower parent education, lower skilled backgrounds or one-parent families more likely to view themselves as an adult (not illustrated).





Note: Margins of error are shown in parentheses in the data labels.

The majority of Young Adults (55%) considered themselves to have grown up at about the same rate as other people their age. Four-in-ten (39%) stated that they grew up *faster* and the remaining 6 per cent believed they grew up *slower*.

There were no gender differences in the rate at which men and women considered themselves to have grown up. Growing up in a one-parent family, coming from a lower skilled social class and being from a low-income family at 17/18 were associated with greater likelihood of believing they grew up faster than their peers. However, there was no significant difference depending on the parent's educational attainment (not illustrated).



### 2.7.2 BASIC PSYCHOLOGICAL NEEDS SATISFACTION

The Young Adult also self-completed the Basic Needs Satisfaction Scale (BNSS) which was adapted from the Basic Psychological Needs Satisfaction Scale (Ilardi, Leone, Kasser & Ryan, 1993; Deci & Ryan, 2000), which is comprised of the three subscales of *relatedness, competency* and *autonomy*. The autonomy subscale contains seven items, the competence subscale contains six items, and the relatedness subscale contains eight items. Each item is rated on seven-point Likert scale from 1 (*not true at all*) to 7 (*very true*). Table 2.4 shows sample items and descriptive statistics for each of the subscales of the Basic Needs Satisfaction Questionnaire (BNSS). With a seven-point Likert scale and 6-8 items per subscale, the maximum range of scores for the subscales were: *autonomy* 7-49, competence 6-42, and relatedness 8-56. Table 2.4 shows that the 20-year-olds reported a wide range of scores for each subscale with the achieved range of scores spanning almost the full theoretical range of the scale. The Young Adults gave average scores in the mid to high ranges for autonomy and competence, and in the high range for relatedness.

The mean scores across the scales for men and women did not differ greatly for autonomy (37.2 for men versus 37.8 for women), competence (31.4 for men versus 31.3 for women) or relatedness (48 for men versus 48.7 for women). Similarly, there was very little variation across the subscales based on the 20-year-olds' socio-economic status at age 17/18, with scores ranging within one point across the socio-economic gradient. The subscales of the BNSS had a moderately strong, positive and significant correlation with one another. This indicates that scores on one subscale tended to be similar to scores on other subscales. For example, someone who felt they had a high level of autonomy was more likely to report a high level of relatedness to others. Alternatively, those with low scores in one subscale were more likely to report low scores on another subscale.

Scale	Sample item	Achieved range	Mean (SD)	Correlations		
			Autonomy	Competence	Relatedness	
Autonomy	I feel like I am free to decide for myself how to live my life	11 - 49	37.49 (5.2)	1	-	-
Competence	Most days I feel a sense of accomplishment from what I do	11 - 42	31.36 (5.0)	.53	1	-
Relatedness	<i>People in my life care about me</i>	22 - 56	48.59 (5.3)	.53	.50	1

### Table 2.4Descriptive statistics for the Basic Needs Satisfaction Scale and correlations with other<br/>subscales

Section 2.4 explored the importance of financial independence to adult identity (Arnett, 2000). This section explores that idea in more depth, linking feelings of financial strain and reported income to the satisfaction of basic psychological needs.

The following analysis examines the proportion of Young Adults who were in the lowest quintile of scores on each of the subscales. A total of 60 per cent of the 20-year-olds were not in the lowest quintile for any of the subscales, 34 per cent were in the lowest quintile for one or two subscales and 5 per cent were in the lowest quintile on all three subscales. Figure 2.22 therefore involves approximately 40 per cent of all the 20-year-olds<sup>20</sup> as well as the proportion who were in the lowest quintile group in all three subscales. This tells us that 34 per cent of Young Adults felt they were struggling in at least one basic aspect of their daily life where they felt their needs were not being met and 5 per cent were struggling in all of these basic areas.

Figure 2.22 shows that Young Adults who were experiencing financial stress (i.e. had *great difficulty* or *difficulty* in 'making ends meet') were much more likely to be in the lowest quintile on any of the three basic needs subscales than those who were able to make ends meet. In addition, 20-year-olds who were experiencing financial stress were more likely to be among the relatively small subset of Young Adults (5%) whose scores placed them in the lowest quintile on all the basic psychological needs subscales.

Interestingly, the trends for the relationship between the basic psychological needs subscales and family income (income quintile as measured at age 17/18) did not fully mirror those observed for the Young Adult's self-report of current financial stress. Being in the lowest income quintile was associated with an increased likelihood of being in the lowest relatedness quintile (18% versus 28% in highest income quintile) but there was little or no difference between the groups on either end of the income spectrum when it came to competence or autonomy. However, it is worth noting that those in the highest income quintile were more likely to be in the highest autonomy quintile.<sup>21</sup>

Other trends by socio-demographic characteristics (not illustrated) were also examined but tended to show either few or inconsistent differences. For example, men and women tended to have an approximately equal chance of being in the lowest quintile for each of the scales. The small group of unemployed Young Adults were more likely to be in the lowest quintile for autonomy, relatedness and competence (relative to those in further or higher education, who were the majority).





Note: Margins of error are shown in parentheses in the labels.

<sup>20</sup> Note that due to the distribution of scores, there were not exactly 20 per cent of cases in each quintile. The distributions for the lowest quintiles were as follows: Autonomy 21 per cent, Competence 21 per cent and Relatedness 21 per cent.



### 2.8 CIVIC ENGAGEMENT

Civic engagement is an important part of exercising one's right in a democracy, addressing public concerns and protecting public values. Civic engagement includes a broad range of activities, such as voting in a general election, volunteering and engaging in political activism. Findings from several studies have found that young adults today are less likely than their predecessors to engage in traditional forms of civic engagement such as belonging to a political party, or voting in a general election (Gaby, 2017; Grasso, 2018; Sloam, 2016). However, it has also been suggested that the nature of civic engagement is changing, with young adults more likely than previous generations to engage in issue-based forms of participation, such as signing petitions, participating in demonstrations, and internet activism (Gaby, 2017).

Some forms of civic engagement have been found to be psychologically protective. Engagement in clubs/ organisations has been found to be associated with subsequent positive mental health outcomes and a decrease in later depressive symptoms (Landstedt, Almquist, Eriksson & Hammarström, 2016). This association is bi-directional, with depressive symptoms in adolescence and early adulthood associated with decreases in later civic engagement (Wray-Lake, Shubert, Lin & Starr, 2019). It has been argued that colleges and universities have become central institutions for civic engagement among young people, and that comparable institutions do not exist for those who do not go on to higher education (Flanagan & Levine, 2010). Adults who do not attend higher education or are in non-professional occupations are less likely to be politically engaged, and therefore are often under-represented in a democracy (Carreras & Castañeda-Angarita, 2019). Hence, this is an area with potential for effective policies to promote young people's civic participation with a view to addressing socio-economic inequalities in civic engagement and political representation.

### Measurement

Young Adults were asked a series of routed questions on whether they had volunteered through or for an organisation in the last six months regardless of the frequency of involvement. If they indicated they had engaged in volunteering, they were asked to tick all applicable options from a list of volunteering activities with an 'other' option allowing free text to be added. This list contained active roles such as coaching, refereeing, teaching, mentoring; supportive roles such as providing transport, fundraising, collecting/preparing clothes/food/other goods; and administrative roles such as office services or serving on committees. The Young Adult was also asked to tick all that applied about the type of organisation they had engaged with from a list of broadly defined social, religious, sporting, educational, and political organisations, with a free text allowing 'other' organisations to be mentioned.

Political and social concerns were measured by asking the Young Adults to rate 'how concerned you are about the following issues'. The set of social and political issues including topics such as 'terrorism', 'climate change, 'racism' and 'gender inequality' on a scale from 0 (*Not at all concerned*) to 10 (*You are very concerned*). (See Table 2.5 for a full list.) This list was derived from a longer list explored in the pilot sample (O'Mahony et al., 2021) and is discussed in detail in the accompanying design report (McNamara et al., 2021).

The Young Adults were also asked with routed yes/no questions about their eligibility to vote in the (then) most recent general (2016) election, whether they had voted (if so), and if they were currently registered to vote.

Twenty-year-olds were presented with a list of different types of activism and asked to tick all that applied if they had participated in a list of activism activities within the last 12 months. This question was adapted from the Tisch study on civic and public service<sup>22</sup> (Portney & O'Leary, 2007). It included activities such as 'posted or shared anything about politics online', 'contacted a politician or councillor', 'signed a petition', or 'took part in a public demonstration'. A full list of activism activities can be seen in Figure 2.26.

### 2.8.1 VOLUNTEERING

Figure 2.23 shows the proportion of 20-year-olds who volunteered by their gender, education level of their parent and principal economic status. A total of 34 per cent of the 20-year-olds had volunteered in the last six months, and this was slightly higher among men than women (35% versus 32%). Those whose parent had a higher level of education were more likely to volunteer (41% degree-level versus 27% lower second level or less). This was similar to other socio-economic trends: for example, 30 per cent of those whose family was in the lowest income quintile had volunteered in the last six months, versus 40 per cent in the highest income quintile (not illustrated). Young Adults who were in education or training were more likely to volunteer (37%) compared to those in employment (27%) or those who were NEET (26%), which may be reflective of increased volunteering opportunities offered within academic institutions and restricted free hours among those in work.



Figure 2.23 Volunteering by 20-year-olds (in the last six months) based on background characteristics

Note: Margins of error are shown in parentheses in the labels.

Additional analysis examined the type of organisation in which Young Adults volunteered. The most common type was a social or charitable organisation (14%), followed by a sporting organisation (11%). A total of 9 per cent volunteered with their college or workplace. Less common were religious or political organisations (just under 2% for both). The only gender difference (not illustrated) was for sporting organisations, which were higher for men than for women (14% men versus 8% women).

### 2.8.2 POLITICAL AND SOCIAL CONCERNS

Table 2.5 shows means and standard deviations for the 20-year-olds' ratings of concern on a range of social and political issues. The range for each of the topics was between 0 and 10 (with 0 being the lowest and 10 being the highest). The 20-year-olds tended to be more concerned about domestic issues, such as access to housing in Ireland, poverty in Ireland and access to decent employment opportunities in Ireland for which the mean concern rating was between 7.8 and 7.1. Within this range of topics, the 20-year-olds were least concerned about *terrorism* (M = 5.8) which may be explained by the impact of terrorism in Ireland being low at the time of data collection (Institute for Economics and Peace, 2018).



20-year-olds	
	Mean (SD)
Access to housing in Ireland	7.8 (2.1)
Poverty in Ireland	7.3 (2.2)
Access to decent employment opportunities in Ireland	7.1 (2.3)
Climate change	6.9 (2.7)
Animal rights	6.9 (2.5)
Racism	6.8 (2.5)
Global gap between rich and poor countries	6.6 (2.5)
Gender inequality	6.3 (2.7)
Terrorism	5.8 (2.9)

### Table 2.5 Mean and standard deviation for level of concern on political and social issues among

Figure 2.24 shows the political and social topics which the Young Adults were very concerned about (i.e. 9 or 10 on a scale of 0 to 10) by gender. Overall, women were more likely to express being 'very concerned' about all social and political issues than men. Over half of women (52%) were concerned about access to housing compared to 36 per cent of men. Women were twice as likely to be very concerned about poverty in Ireland (42% versus 20% men) and 38 per cent of women were very concerned about climate change compared to just under a quarter of men (24%). Interestingly, women were over three times as likely to be very concerned about gender inequality (37%) compared to men (12%).

### Figure 2.24 Gender differences in proportion 'very concerned' about political and social issues



Note: Margins of error are, at most, ±2%.

#### 2.8.3 **VOTING AND ACTIVISM**

As the Young Adults turned 18 in 2016, some but not all of the cohort were eligible to vote in the Irish general election of that year. Of the 20-year-olds, 35 per cent said they had been eligible to vote but just over half (51%) of these were registered. Of those who had been eligible to vote, 35 per cent cast their vote in the general election. Therefore, 12 per cent of Cohort '98 voted in the general election in 2016.

Figure 2.25 shows the proportion of 20-year-olds registered to vote by background characteristics, including their gender, parental education and their own principal economic status. The majority (72%) indicated that they were registered to vote, and this was higher among women (76%) than men (67%). Those whose parent was educated to lower second-level education or below were less likely to be registered to vote than those whose parent had a degree or higher (62% versus 78%), with a similar socio-economic gradient in relation to family income quintile (lowest 66%; highest 80%; not illustrated). Young Adults who were in education/training were more likely to be registered (77%) than those in employment (63%) or those who were NEET (46%), which raises a concern that these young people may be underrepresented in civic and political life. This will be useful in examining future voting behaviour, as there have been recent initiatives to increase voter engagement such as the 2020 general election being held on a Saturday (Marsh, 2020).



Figure 2.25 Percentage of 20-year-olds who were registered to vote based on gender, parent education and principal economic status

Note: Margins of error are shown in parentheses in the labels.

The 20-year key findings paper (Growing Up in Ireland Study Team, 2019a), showed that overall young women were more politically active than young men, with 66 per cent of women politically active in some form compared to 52 per cent of young men. Figure 2.26 shows the type of activism engaged in by all the 20-year-olds, and those in education/training or employment. The most common type of activism was signing a petition, which was engaged in by 43 per cent of the 20-year-olds, more by those education/training (47%) than those in employment (35%). A total of 29 per cent posted or shared something about a political issue online and 28 per cent had worn or displayed a campaign badge. Almost one-fifth (18%) of the Young Adults had boycotted certain products; significantly more people in education/training (20%) than in employment (14%). A minority of Young Adults (15%) had taken part in a public demonstration or contacted a politician or councillor (8%).





### Figure 2.26 Types of activism engaged in by 20-year-olds based on their principal economic status

Note: The margins of error are, at most, ±3%.

Figure 2.27 shows the different types of activism engaged in by the 20-year-olds categorised by parental education. For the most part, the differences between the Young Adults based on their parent's education were greater than the differences based on their own principal economic status (Figure 2.26). In general, Young Adults whose parent had a degree were more likely to be politically active than those whose parent had achieved lower secondary level or below. Some of the biggest differences were in relation to signing a petition (55% versus 32%) and boycotting certain products (26% versus 10%).





Note: The margins of error are, at most, ±3%.

### 2.9 SUMMARY

This chapter described key aspects of the 20-year-olds' transition into adulthood, including their principal economic status, accommodation, financial circumstances, relationships with parents and 'significant others', need satisfaction and civic engagement. The overall picture emerging was of 20-year-olds still in a period of transition: most had not yet reached financial or residential independence, but they were beginning to exert their influence beyond the spheres of education and home into political and social life. This transition is also evident in their self-assessment: only about one-quarter (28%) said that it was *entirely true* that they consider themselves to be an adult with another half (49%) saying that it was *true for the most part*.

The biggest group of 20-year-olds (69%) were in education or training as their main activity and 26 per cent were at work, either full- or part-time, with just 5 per cent not in employment, education or training. There was little gender difference in the economic status of the Young Adults but those whose parent had lower levels of education were less likely to be in education (52% of those with parents with the Junior Certificate or lower versus 81% of those with parents with a degree or higher), and more likely to be in employment (39% versus 17%) or NEET (9% versus 2%).

A minority (32%) of Young Adults had a non-parental address. Of those who lived at home, just under half (44%) reported that they would prefer to have another address and seven-in-ten described their reason for living at home to be *mostly* or *a little bit* to do with finances. Parents were more likely to report disagreements with their adult children if they lived in the parental home full-time, particularly in relation to helping around the house (58% versus 37% with another address). In terms of spending, Young Adults living full-time at their parent's address were less likely to contribute towards their health costs, accommodation, food and utility bills.

At 20 years old, 9 per cent of Young Adults reported themselves to be experiencing financial stress (*difficulty* or *great difficulty* making ends meet). Looking back, those whose family incomes had been in the lowest quintile at age 17/18 were more likely to report financial stress at 20 (14% versus 7% of those who had been in the highest income quintile). Overall, taking account of financial stress as reported by the parents (up to age 17/18) or by the Young Adults themselves (at age 20), there was evidence of persistent financial stress for relatively few of the Young Adults: only 15 per cent had experienced financial stress in two or more of the four waves (ages 9, 13, 17/18 and 20). This marks the period of data collection as one of strong economic recovery compared to earlier waves of the study.

In terms of romantic relationships, 43 per cent of 20-year-olds were single and not dating; 40 per cent were dating one person; 14 per cent were dating casually but not exclusively and 2 per cent were living with a partner. Most of those in a relationship thought that they would still be with the same romantic partner in five years' time; however, very few believed that they would be married at that time. Most, but far from all, 20-year-olds (61%) reported that they always use some form of contraception during intercourse. In general, the Young Adults had a good understanding of the importance of condoms in STD prevention but were less likely to use condoms on every occasion of sexual intercourse.

There were also interesting patterns in the extent of civic engagement for different groups of Young Adults. Just over a third of the 20-year-olds had volunteered in the last six months. In terms of social and political issues, Young Adults were most likely to express high levels of concern about access to housing, poverty in Ireland and access to job opportunities. Women were generally more concerned about social issues than men – especially in relation to gender inequalities. Over seven-in-ten (72%) were registered to vote by the age of 20; however, those who were NEET were less likely to be registered (46%). Many Young Adults had started to engage in activities to express or promote their social and political views, such as signing a petition (43%), posting or sharing something about a political issue online (29%) or boycotting certain products (18%).



The data discussed in this chapter offer ample opportunity for further in-depth analysis on issues that have increased in topicality since the participants of Cohort '98 have entered adulthood. These include opportunities in relation to continuing education versus entering the labour market (see also Chapters 3 and 4), the extent to which individuals can be supported in achieving independence in housing and finance, and opportunities to play a role in politics and democracy. There is also a good deal of scope to further examine the changing relationships in the Young Adults' microsystem, with new relationships that are physically and emotionally intimate and the changing dynamic of existing relationships with parents.





# **Chapter 3**

## POST-SCHOOL EDUCATION AND TRAINING



### 3.1 INTRODUCTION

This chapter looks at the level and nature of participation in education and training courses after leaving school among Cohort '98. In the Irish context, the post-school options open to this cohort included:

- higher (third-level) education (HE);
- further education and training (comprised of Post-Leaving Certificate (PLC) courses, apprenticeships and other courses such as Youthreach for early school leavers);
- and direct entry to the labour market.

HE courses could be taken at universities, institutes of technology<sup>23</sup> or private colleges. Post-Leaving Certificate courses vary in length from one year to three years and are provided in colleges of further education or second-level schools. Many PLC courses lead to a Level 5 or 6 qualification on the National Framework of Qualifications and these qualifications can be used to access some higher education courses. The apprenticeship scheme is organised around competency-based standards with a modular structure; since 2016, apprenticeships lead to awards from Level 5 to Level 10 on the qualifications framework (Department of Further and Higher Education, Research, Innovation and Science, 2021). The on-the-job phases are funded by employers while the off-the-job phases are funded by the State. This cohort left school in a context where the number of apprenticeship places was increasing, and apprenticeships were being introduced in new subject areas (ibid.).

In common with many Western countries, Ireland has seen a significant expansion of the HE sector, to the point where Ireland (along with South Korea) has the highest level of tertiary attainment for 25-34-yearolds among all OECD countries (OECD, 2020). HE expansion was accompanied by a significant shift in the gender and social composition of the student population. HE expansion in many countries has seen a reversal of the previous gender gap (whereby male participation rates were higher), with higher female participation levels currently (Clancy & O'Sullivan, 2020). Despite these higher levels of female participation, gender segregation has persisted in the type of courses taken by women and men (Barone & Assirelli, 2020). Educational expansion has also resulted in an increasing number of young people from previously underrepresented working-class backgrounds entering HE (Shavit, Arum & Gamaron, 2007). Nonetheless, studies repeatedly point to persistent relative inequality by social background in the chances of going on to tertiary education (Shavit et al., 2007). Research has sought to unpack the processes underlying this social gradient, distinguishing between primary effects (that is, differences that are related to prior achievement) and secondary effects (that is, differences in decisions by social background among those with similar levels of achievement), with the relative importance of the two processes found to vary across countries (Jackson, 2013). With educational expansion, more advantaged groups have also sought to maintain their socio-economic advantage by selecting more prestigious HE institutions and/or fields of study, a process termed 'effectively maintained inequality' (Lucas, 2001).

Research in Ireland shows that HE participation varies by both individual social background and the social mix of the school attended (McCoy, Smyth, Watson & Darmody, 2014; Smyth and McCoy, 2021). The increase in HE attendance among working-class groups has occurred largely through the institute of technology sector (McCoy & Smyth, 2011). Social inequality in post-school education/training participation has significant consequences for adult life chances. Those who have taken PLC courses have an advantage over Leaving Certificate leavers in obtaining employment, with a difference of 16 per cent in their employment chances over those who entered the labour market directly after school (McGuinness et al., 2018). The Irish labour market has a relatively high pay premium attached to obtaining a degree (OECD, 2020); thus, social inequalities in degree completion will contribute to the intergenerational transmission of (dis)advantage.

The chapter provides further insights into the extent of social differentiation in post-school pathways in Ireland and the kinds of factors that inform educational choices. It examines the extent to which post-

23 The data collection pre-dated the establishment of technological universities.



school pathways vary by family background and prior Leaving Certificate achievement. It also explores social differentiation in the choice of educational institution and field of study as well as in patterns of course non-completion.

### 3.2 EDUCATION AND TRAINING PATHWAYS AFTER LEAVING SCHOOL

At 20 years of age, the Young Adults were asked about the kinds of education and training in which they had taken part after leaving school. This section focuses on any participation in education/training, including courses that were not completed; the issue of non-completion is discussed in detail in Section 3.5. Because of small numbers on particular types of courses, the analysis distinguishes between three main groups: higher (third-level) education (including higher education overseas), Post-Leaving Certificate (PLC) courses and other further education (FE) courses (including apprenticeships and Youthreach).

### 3.2.1 GENDER AND FAMILY BACKGROUND DIFFERENCES IN PATHWAYS

A very high proportion – 87 per cent – of 20-year-olds had taken part in at least one education/training course since they left school. Including those who took one or more courses, 70 per cent had taken part in a higher education (HE) course, 17 per cent in a PLC course and 10 per cent in another further education course. HE participation rates were similar for women and men, but young women were more likely to take a PLC course (22% compared to 13% of men) and young men were somewhat more likely to enter another type of FE course (12% compared to 9% of women).

Post-school pathways were strongly structured by family background. HE participation was significantly more prevalent among those from highly educated families; 86 per cent of those whose parents had degree-level qualifications went on to HE compared to 48 per cent of those whose parents had the equivalent of Junior Certificate qualifications or lower (Figure 3.1). Similar gradients were found using other measures of family background. For example, 91 per cent of 20-year-olds from the professional social class had taken part in HE compared with 51 per cent of the lower skilled/never employed group. Furthermore, 87 per cent of those from the highest household income quintile went on to HE compared to 52 per cent for the lowest quintile.

HE participation also varied markedly by family structure, being 75 per cent for those from two-parent families and 52 per cent for those from one-parent families. This pattern was not wholly due to differential cultural and economic resources across different types of families since a gap was evident within educational and income groups. For example, among the children of degree-holders, 72 per cent of those from one-parent families went on to HE compared with 89 per cent of those from two-parent families.

In contrast to HE, further education courses (PLC and other FE, including apprenticeships and Youthreach) tended to cater more for those from socio-economically disadvantaged backgrounds (Figure 3.1). Participation in PLC courses was twice as high among the lowest-educated families (where the parent had a Junior Certificate qualification or lower), with 24 per cent of this group taking part compared with 10 per cent of 20-year-olds whose parent had a degree or higher. The social differentiation was even more marked for other FE courses (which included some courses specifically targeted at early leavers), with 18 per cent of the lowest-educated group taking part compared with 4 per cent of the highest-educated group. Similar patterns were found in terms of social class, household income and family structure, with higher levels of FE participation among those from lower skilled/never employed, lower income and lone-parent households.<sup>24</sup>

<sup>24</sup> Previous research (McGuinness et al., 2018) has indicated that PLC courses can provide a pathway in higher education, especially for more disadvantaged groups. Further analysis of GUI data could explore the extent to which this is the case for this cohort and the factors facilitating such progression.



### Figure 3.1 The proportion of 20-year-olds who had taken part in one or more education/training courses since leaving school, broken down by type of course and parental education

Note: Any ET = any education or training course; HE = higher education; PLC = Post Leaving Certificate course; FE = further education (including apprenticeships and Youthreach). Margins of error are shown in parentheses in the labels.

There is a good deal of debate in international research on whether social background differences in HE participation are due to differences in prior achievement levels or whether, even taking account of grades, background differences remain (see, for example, Jackson, 2013). Which explanation best fits the Irish context is explored further in Section 3.2.2.

### 3.2.2 POST-SCHOOL PATHWAYS AND EARLIER EDUCATIONAL EXPERIENCES

HE entry in Ireland is organised centrally through the Central Applications Office (CAO). Applicants are awarded 'points' based on their Leaving Certificate grades and are awarded the highest ranked course for which they reach the points cut-off. Those who take the Leaving Certificate Applied (LCA) programme are not eligible for direct entry to HE. It is not surprising, therefore, to see a strong relationship between the senior cycle programme taken, Leaving Certificate achievement, and post-school pathways. Almost all (96%) of those in the top quintile of grades went on to HE compared with 42 per cent of those in the lowest quintile (Figure 3.2). When it comes to PLC courses, the highest levels of participation were found among those who had taken LCA (43% compared with 16-17% for LCE/LCVP leavers),<sup>25</sup> with a sizeable proportion – one-in-five – of early school leavers also taking part in these courses.<sup>26</sup> Among LCE/LCVP leavers, PLC participation was highest among those in the lowest-performing quintile (37%). Early school and LCA leavers were also over-represented in other FE courses (such as apprenticeships and Youthreach) (33% and 28% respectively) while 18 per cent of those in the lowest-performing LCE/LCVP group took part in these courses.

Leaving Certificate Vocational Programme (LCVP) students mostly take the same subjects as Leaving Certificate Established (LCE) students but also take two link modules on preparation for the world of work and enterprise education.

25





### Figure 3.2 The proportion of 20-year-olds who had taken part in one or more education/training courses since leaving school, broken down by quintile of Leaving Certificate grades

Note: PLC and other FE participation in the higher quintiles are not shown here due to small numbers. Margins of error are shown in parentheses in the labels.

The previously released *Key Findings* for this cohort at age 20 (GUI Study Team, 2019a) showed a significant Leaving Certificate achievement gap by family background. To what extent was this gap responsible for the gradient in HE participation discussed in Section 3.2.1? The findings show that most of the difference in participation was accounted for by Leaving Certificate achievement. However, there was a gap among the lowest-performing quintile group, with 51 per cent of those with parents who had a degree going on to HE compared with 39 per cent of those whose parents had a lower second-level (i.e. Junior Certificate) qualification or less (Figure 3.3).<sup>27</sup> This finding is consistent with international research which shows that family advantage plays a particularly strong role for those with lower levels of performance (Grätz and Wiborg, 2020).



### Figure 3.3 The proportion of those in the lowest-achieving Leaving Certificate group (quintile) who went on to HE by parent education

Note: Margins of error are shown in parentheses in the labels.

<sup>27</sup> It should be noted that this difference was on the borderline of statistical significance (p < .10) because of the smaller number of cases involved. The figure does not show HE participation across the distribution by parent education as the numbers of those with higher grades not taking part in HE were too small when broken down by background factors.

Other aspects of prior educational experience may also play a part in the likelihood of taking part in education and training. Three aspects of educational history are examined in this section: attitudes to school at 17/18; the nature of interaction with teachers at 17/18 (or in their final year of school, if they had already left); and whether they had attended a DEIS school.<sup>28</sup> As depicted in Figure 3.4, those who disliked second-level school were much less likely to go on to HE (52% compared with 77%), though it is worth noting that the majority did so, but they were more likely to take a PLC course (23% versus 16%) or another FE course (16% versus 7%).





Note: Margins of error are shown in parentheses in the labels.

Young Adults who reported frequent positive interaction, such as praise or encouragement, with their teachers were more likely to go on to HE or a PLC but were less likely to do another FE course; 80 per cent of those with the most positive interaction (highest third) went on to HE compared with 65 per cent of those with the least positive interaction.<sup>29</sup> Those who reported more frequent negative interaction, such as reprimands, were less likely to go on to HE (59% for the highest group compared with 76% for the lowest group) and more likely to take another FE course; there was no significant difference in negative interaction between PLC entrants and other groups. Further research could usefully unpack the extent to which the quality of interaction with teachers is associated with later educational participation, over and above the influence of prior exam achievement.

Young Adults who had attended a DEIS school were significantly less likely to go on to HE than those who went to a non-DEIS school (50% compared with 76%). They were more likely to take a PLC course (29% compared with 15%) or another FE course (16% compared with 8%). As with the variation in post-school participation by family background, this pattern was largely driven by differential Leaving Certificate grades. In other words, looking within each Leaving Certificate performance quintile, little systematic relationship was found between post-school participation and attending a DEIS school. However, a sizeable gap was apparent among the lowest-performing Leaving Certificate group, with 28 per cent of those in DEIS schools going on to HE compared with 46 per cent of those in non-DEIS schools.

<sup>28</sup> Schools taking part in the Delivering Equality of Opportunity in Schools (DEIS) programme receive additional resources and supports to reflect the concentration of students from socio-economically disadvantaged backgrounds.

<sup>29</sup> This may reflect, at least in part, the inclusion of second-chance programmes such as Youthreach in this category. Youthreach targets early school leavers, many of whom have had negative experiences of second-level school and poor relations with their teachers (Smyth et al., 2018).



### 3.2.3 EDUCATIONAL EXPECTATIONS FROM A LONGITUDINAL PERSPECTIVE

A number of studies have indicated that young people start forming their views of the potential pathways open to them from at least early adolescence (see, for example, Bozick, Alexander, Entwisle, Dauber & Kerr, 2010). At 13 years of age, young people, and their primary caregivers<sup>30</sup> were asked how far they (were) expected to go in the educational system. There was a sizeable gap between the expectations of 13-year-olds and their parents, with 79 per cent of primary caregivers expecting their child to go on to HE compared with 51 per cent of the young people (Smyth, 2020). To what extent were these expectations associated with the later pathways pursued? Parents and young people who expected (them) to go on to HE were much more likely to do so (Figure 3.5). Interestingly, the relationship with prior expectations was even stronger for parental expectations, with the children of those who expected them to go on to a degree more than twice as likely to enter a degree-level course than those who expected no more than a second-level qualification (79% compared with 37%). The gap by young people's own expectations was sizeable but not as large (82% compared with 50%). These patterns show that, for many young people, expectations did emerge early and were linked to actual behaviour. However, a sizeable proportion (50%) of young people who had not expected to go on to HE when they were 13 later did so. Future research could usefully examine the extent to which changes in educational plans reflect parental expectations, school experiences and educational performance as well as the complex interplay between all of these factors.



Figure 3.5 Participation in HE by Primary Caregiver (parent) and Young Person expectations at 13 years of age

Note: Margins of error are shown in parentheses in the labels.

### 3.3 CHOICE OF INSTITUTION

This section looks at the type of HE institution attended by those who went on to HE as well as the reasons for choosing particular institutions among all those who took part in education/training. For their highest educational qualification, 64 per cent went to a university, 34 per cent to an institute of technology and 2 per cent attended a private third-level institution. With the expansion of higher education, a good deal of international research has pointed to the increase in effectively maintained inequality, whereby more advantaged groups seek to maintain this advantage by choosing more élite institutions and/or more prestigious courses (see, for example, Lucas, 2001; Guetto & Vergolini, 2017). To what extent was there social differentiation in the type of HE institution attended? Because of the small numbers in

30 Usually, but not necessarily, the individual who later completed the parent interview at age 20.
private colleges, the analyses here contrast those who attended a university with all other HE institutions. Women were more likely to attend a university than men, with women making up 68 per cent of those in HE compared with 60 per cent of those in institutes of technology. Marked social differentiation was evident, with those from more advantaged families more likely to go to a university: 77 per cent of the children of graduate parents went to a university compared with 45 per cent of those whose parents had lower second-level education (Figure 3.6). A similar pattern was found using other dimensions of family background, with those from professional, higher income and two-parent families more likely to attend a university. This pattern partly reflected the higher grades found among university entrants, with fewer differences in destination by social background within Leaving Certificate grade quintiles.<sup>31</sup> Almost all of the highest-performing group went to a university while this was the case for a small minority – 17 per cent – of those in the lowest-performing group (Figure 3.6).





The 20-year-olds were asked to rate a series of reasons for their choice of institution, with categories ranging from 'very important' to 'not at all important' (Figure 3.7). The predominant reason for choice of institution was that the institution offered the subject or course the Young Adult wanted to study, with 71 per cent emphasising this as 'very important' and a further 22 per cent describing it as 'fairly important'. Other factors seen as very important by sizeable proportions were the institution having a good reputation (37%), having good transport links (33%) and allowing people to live at home while attending it (31%). The size of the institution and parental encouragement to attend it were seen as at least 'fairly important' by more than four-in-ten 20-year-olds. The majority felt that where their friends or family members had attended was 'not at all important' in their decision-making (54% and 72% respectively).

Some gender differences were found in the perceived importance of the different factors, with women more likely to see course/subject provision (74% compared with 68%), being able to live at home (33% versus 28%) and having good transport links (36% versus 29%) as very important. Friends' attendance was somewhat more influential for men than women (24% deeming it very or fairly important compared with 16% of women). The nature of course provision was also seen as more important by those from more advantaged families (75% of those with graduate parents rating it as 'very important' compared with 65% of those whose parent had lower second-level education) as was institutional reputation (43% compared with 32%). In contrast, being able to live at home was more strongly emphasised by less advantaged groups (44% of those whose parent had lower second-level education compared to 24% where they had a degree or higher) as was having good transport links (46% compared with 28%). In keeping with these

Note: Margins of error are shown in parentheses in the labels.

<sup>31</sup> However, a social background difference in university entry was evident among those with average grades; among those in the middle quintile, 44 per cent of those whose parent had a Junior Certificate went on to university compared with 69 per cent of those with a graduate parent.



patterns, 20-year-olds who had attended a DEIS school were more likely to emphasise being able to live at home (36% versus 29% for non-DEIS schools).





Note: The margins of error are no more than ±2%; Percentages may not add to 100% because of rounding.

Other analysis (not shown here) revealed that higher-achieving groups were more likely to emphasise course provision (with 83% of the highest Leaving Certificate quintile doing so compared with 65% of the lowest quintile) or institutional reputation (52% compared with 27%), with lower-achieving groups placing greater importance on being able to live at home (41% of the lowest quintile compared with 20% of the highest) and on good transport links (42% compared with 23%).

#### 3.4 CHOICE OF FIELD OF STUDY

Previous research has indicated that while female rates of HE participation have surpassed those of men in many countries, persistent differences remain in the kinds of courses taken by women and men (Barone & Assirelli, 2020). Figure 3.8 shows that women were overrepresented in social science, health-related and education fields within FE and HE (combined),<sup>32</sup> with men over-represented in engineering and science/ agriculture. Much less attention has been given in previous research to the extent to which field varies by family background characteristics. For ease of presentation, and because of the policy concern with encouraging young people into STEM careers, the analyses contrast those taking STEM courses (which include health-related courses) with all others.





Note: Margins of errors are ±1-2%.

Taking a STEM course was more prevalent among men (41% compared with 28% of women) and those from more advantaged family backgrounds (40% of those whose parent had a degree compared with 29% of those whose parent had lower second-level qualifications). STEM course participation was much more strongly structured by parental education than by household income (with 38% of the highest income quintile taking STEM compared with 34% of the lowest quintile; not illustrated). These differences by parental education reflected differences in prior achievement, with over half (51%) of the top-achieving quintile taking STEM courses compared to a quarter (25%) of the lowest-achieving group.





Note: Margins of error are shown in parentheses in the labels.



As well as asking the 20-year-olds about their participation in post-school education/training, they were asked for permission to link their CAO data to their responses. These CAO data can be used to identify how many young people were offered their first choice of course, among all those who received an offer. Fifty-six per cent were offered their first choice, with no significant difference by gender in this respect. The pattern did not vary by any dimension of family background but, as might be expected given the HE entry mechanism, higher-achieving applicants were much more likely to receive their first-choice course (74% compared with 56% of the lowest-achieving quintile).

#### 3.4.1 PERCEPTIONS OF THE COURSE

In relation to the last (or highest) course they had taken, 20-year-olds were asked to rate on a scale of one to ten: their satisfaction with their choice of course; how much they liked the course; and their compliance with the requirements of the course (e.g. attendance, submitting assignments on time etc.). The ratings given were generally high, with a mean of 7.8 for satisfaction with choice and liking the course and 8.0 for compliance with course requirements. Women gave significantly higher ratings than men across all three dimensions, though the differences were modest at 0.2-0.4.

There was little systematic variation by family background factors. However, those from professional households were somewhat more positive about their choice of course (8 compared with 7.6 for the lower skilled/never employed) as were those from higher income households (7.9 for the highest quintile compared with 7.5 for the lowest). In addition, Young Adults from one-parent families gave lower ratings for their choice of course, their liking of the course and their compliance with requirements.





Note: Margins of error range from  $\pm 0.08$  to  $\pm 0.19$ .

The largest source of variation was by prior achievement, with those with higher Leaving Certificate grades more positive about their choice of course, liking the course and meeting course requirements. This may be related to greater likelihood of receiving their first choice of course, with those receiving their first choice more satisfied with their choice (8.1 versus 7.7) and liking the course more (8.0 versus 7.7). Ratings also differed by type of qualification, with the highest ratings for course choice given to apprenticeships (8.7) and honours degrees (8.0) and the lowest given to level 4/5 certificates (6.9) and

PLC courses (7.0). Similar patterns were found for liking the course, being highest for apprenticeships (8.8) and honours degrees (7.9) and lowest for level 4/5 certificates (6.9). Compliance followed a similar trend, with average ratings of 8.9 for apprenticeships and 7.0 for level 4/5 certificates. Those who had taken STEM courses were somewhat more satisfied than those who had taken other fields of study with their choice (8.0 versus 7.7) and with the course (8.0 versus 7.7) but did not differ in self-reported compliance.

#### 3.5 **COURSE NON-COMPLETION**

The extent to which young people leave higher education before acquiring a qualification has been a matter of policy concern in Ireland and internationally (European Commission, 2015). Previous research in Ireland has shown that HE drop-out is more prevalent in certain fields of study (such as engineering and computing) and among those who enter with lower Leaving Certificate grades (McCoy & Byrne, 2017; HEA, 2019). In contrast, there has been much less research on the extent to which young people drop out of further education. This section looks at the extent to which the 20-year-olds had left further or higher education before completion. Because of small cell sizes for some groups, the analyses grouped together PLC courses and other FE courses (such as apprenticeships). Non-completion is defined as the proportion of those who had taken part in such a course/programme but did not complete it. Non-completion rates were 11 per cent for HE<sup>33</sup> and 18 per cent for FE<sup>34</sup> among the study cohort.

FE non-completion did not vary by gender and did not differ systematically by social background. However, the evidence pointed to slightly lower levels of non-completion among middle education and social class groups (13% for those whose parent had a diploma-level qualification and 12-13% for managerial/ technical/non-manual compared to 18% for the total group). Non-completion rates were significantly higher for those from one-parent families (24% compared with 15% for two-parent families). Rates of non-completion were highest for those in the lowest Leaving Certificate quintile (at 19%) compared with 11 per cent for those with higher grades (in quintiles 2 to 5).

HE non-completion rates were higher among men (13% compared with 9% for women) and among those from less socio-economically disadvantaged families (Figure 3.11). For example, 16 per cent of those where the parent had lower second-level education left without completing compared with 9 per cent where the parent was a graduate. Similar patterns were found using other dimensions of family background, with higher non-completion rates among those from skilled manual and lower skilled/never employed households, the lowest income quintile and those from one-parent families. In keeping with previous research, non-completion was strongly structured by Leaving Certificate grades, with 25 per cent of the lowest quintile leaving prematurely compared with 3 per cent of those in the highest two quintiles. Interestingly, non-completion rates did not differ by whether candidates received an offer of their first choice or not.

33 This figure was lower than the national figures for non-completion for the under-20 entrant age-group (40% for level 6 and 17% for level





## Figure 3.11 HE non-completion by gender, parental education and Leaving Certificate performance (quintiles) (among those who took part in one or more HE course only)

Note: Margins of error are shown in parentheses in the column labels.

As well as being asked about whether they completed a course or not, the 20-year-olds were asked to indicate whether a specific set of reasons accounted for this decision. Because of small numbers, these categories are combined in Figure 3.12. The most common reason, given by almost half (49%) of the non-completers, was that the course was not what they expected. Other reasons were not liking college (20%), financial, family or personal difficulties (including physical/mental health) (15%), failing an exam (9%) and getting a job (6%). There was little systematic variation by background characteristics in the reasons for non-completion, partly because of small numbers in many categories.





Note: Margins of error are shown in parentheses in the labels.

Not surprisingly, those who did not complete their course were less satisfied with their course choice (6 versus 8.1 on a scale of one to ten), liked the course less (6.2 versus 8.1) and were less compliant with course requirements (7.1 versus 8.2). Figure 3.13 displays these patterns and suggests that not liking the course and not engaging in it were important factors in non-completion. However, this should be interpreted with some caution as there may have been some retrospective rationalisation of course withdrawal, with having left the course colouring respondent views of their satisfaction with that course.



Figure 3.13 Perceptions of the course (satisfaction with choice, liking the course and compliance with requirements, on a scale of one to ten) for non-completers and others (HE only)

Note: Margins of error are shown in parentheses in the labels.



#### 3.6 SUMMARY

This chapter has explored the post-school education and training pathways of young people in Cohort '98, providing important evidence on the rate of progression and social differentiation in third-level entry and course non-completion. By the age of 20, there had been very high levels of educational participation (87% of the total), especially in higher education (70%). While rates of HE participation were high across all groups, they were socially structured, with those from less socio-economically advantaged families less likely to go on to HE and somewhat more likely to drop out if they did so. Within the HE sector, university entry varied significantly by family background, with higher rates of entry among those from graduate and/or professional families. Social differentiation in university entry and in HE entry more broadly was largely due to differences in Leaving Certificate performance. However, among those with lower Leaving Certificate grades, a clear social gradient was evident, with young people from more advantaged families more likely to enter HE, especially university.

In contrast, Post-Leaving Certificate and other further education courses tended to cater for more disadvantaged groups, with higher rates of participation among those from families with lower levels of education and lower income groups. Those leaving school with lower exam grades and those who had taken the Leaving Certificate Applied programme were much more likely to take some kind of FE course than other groups.

Young people's choice of further/higher education institution largely reflected the institution providing the course or subject they wished to take, with 71 per cent deeming it very important. However, being able to live at home while studying was a very important factor for a significant proportion of the cohort (31%), especially those from less advantaged families (44% where the parent had lower second-level education or less). The type of course taken within FE/HE was highly gendered, with women more likely to enter social science, health and education fields and men over-represented in science/agriculture and engineering domains. Taking part in a STEM course was more common among men (41%), those from more highly educated families (38%) and those who had received higher Leaving Certificate grades (51%).

The 20-year-olds were generally satisfied with the course they had taken, with fairly high ratings (7.8-8 out of 10) for choosing the course, liking the course and complying with the course requirements. Not all of the cohort completed the courses they took, with 11 per cent non-completion in higher education and 18 per cent non-completion in further education. Non-completion was more common among those who entered with lower exam grades, in keeping with previous research. The most common reason for departure was the course not being what they expected and those who left before completion were more negative about their choice of course and liked it less than those who stayed on.





# **Chapter 4**

## LABOUR MARKET EXPERIENCES



#### 4.1 INTRODUCTION

This chapter describes the employment experiences of the 20-year-olds, distinguishing between those whose main activity was employment and those who were mainly in education or training but working part-time. Objective aspects of employment experiences, such as the wages, hours, current social class and type of contracts held by the 20-year-olds, are examined. However, more subjective employment factors are also explored, such as job satisfaction and perceived stability of their current role, as well as the importance of different job qualities. The chapter concludes by examining the career aspirations and job qualities which the 20-year-olds found important.

Early adulthood is an important period in terms of career development and has long been understood as a developmental stage which has far-reaching implications in terms of later career adjustment, as well as financial and emotional well-being (Crites, 1976; Tanner, 2006). It is well documented that transition into the labour market has become prolonged in developed countries, with many young adults pursuing higher education rather than entering directly into the labour market upon completing secondary school (Quintini & Martin, 2006). This is due to a number of factors, including rapid technological advances and an increase in demand for skills-based labour (Arnett & Murray, 2019; Grosemans, 2018). For many, young adulthood is also a period of career exploration. Research suggests that young adults tend to change job more frequently when they finish education and they are in the early stages of career development (Bradley & Devadason, 2008; Fenton & Dermott, 2006).

Educational attainment has been found to impact on employment opportunities and income significantly in the long term, with those achieving higher levels of education more likely to work in professional roles and earn higher incomes. In 2018, the employment rate for those who completed education at a high level (i.e. Bachelor's, Master's or doctorate qualifications) was 85 per cent in Ireland, while the employment rate was 52 per cent for those with lower levels of education (i.e. primary or lower secondary education) (Eurostat, 2018). Those with higher educational attainment were also more likely to remain in employment during the Great Recession (Malone, 2019). While the cost of post-secondary school education has increased globally, the longer-term benefits of attaining higher level education still outweigh the costs (Abel & Deitz, 2014).

A broad range of factors have been found to influence young adults' career pathways. While entering higher education is the most common route for individuals from all backgrounds, it is more prevalent among those from professional backgrounds; while direct labour market entry, apprenticeship and taking a PLC course are more common among working-class young adults (McCoy et al., 2014). Akosah-Twumasi, Emeto, Lindsay, Tsey & Malau-Aduli, (2019) argued that culture plays a role in youth career decisions. Students from collectivist cultures, such as India, where decision-making is made collectively with an 'ingroup', are more influenced by family expectations (Sinha, 2014). While students from more individualistic cultures, such as Ireland and the United Kingdom, where decision-making is based on an individual's wishes and desires (Hofstede, 2011), are mainly influenced by their own personal interests. Students' career choice has also been found to be influenced by cognitive ability (Schoon & Polek, 2011), personality (Alkhelil, 2016), financial resources, affordability and future employability (Ahmed, Sherif & Ahmad, 2017).

Improving the transition from education into the labour market has long been a policy priority among OECD countries (OECD, 2000). There are high economic and social costs associated with having young people who are unemployed and long-term unemployment is a risk factor for poor physical and mental health outcomes (Krug & Eberl, 2018). Due to the typically precarious nature of their employment and a lack of relevant experience, young adults are more vulnerable to unemployment and low pay (Bradley & Devadason, 2008). Research indicates that higher educated young people may experience periods of unemployment while they wait for the 'right' job, but typically will obtain employment. However, lower educated young people may have more difficulty obtaining a job after experiencing unemployment (Schmelzer, 2011).



While there has been an increase in the level of education which young people are attaining, research suggests that the skills acquired in education are not always well mapped onto those required in the labour market. As more young people pursue higher education, they may find themselves over-educated for many entry-level roles (Yunus & Hamid, 2016). Alternatively, there is growing concern that education courses do not prepare young people for the workforce. Oxenbridge and Evesson (2012), observed a mismatch between the skills that young people possessed and the relevance of these skills to the workplace. They also noted that many employers had unrealistic expectations about young people's experience.

#### 4.2 TYPE OF EMPLOYMENT AMONG THOSE WHOSE PRINCIPAL ECONOMIC ACTIVITY WAS EMPLOYMENT AND RECEIPT OF TRAINING WHILE WORKING

While attending full-time education is the most common route for those leaving secondary school in Ireland, entering the labour market after school remains a relatively popular career pathway. According to the *Leaving School in Ireland* study, this is a more popular choice among young men than young women and a more common route among those who completed the Leaving Certificate Applied (LCA) or scored in the lowest quintile in terms of points on the established Leaving Certificate (LCE) or Leaving Certificate Vocational Programme (LCVP) (McCoy et al., 2014). A number of studies have observed that entering the labour market after secondary school is a more common pathway among those from low-skilled backgrounds (Grodsky & Jones, 2007).

Skill development is important for future employment prospects and job satisfaction (Okay-Somerville, Scholarios & Sosu, 2019). It has been noted that work-based learning facilitates the acquisition of both 'hard' skills (such as writing and technical skills) and 'soft' skills (such as social skills and communication) that connect learning to the workplace (OECD, 2010). Occupationally-relevant training provides key opportunities for skills development and advancement, which has a lasting impact during young adulthood. Evidence suggests that in countries with well-developed vocational training systems (such as Germany and Switzerland), young people have increased job options and lower rates of unemployment (European Commission, 2013), further highlighting the policy relevance of this area.

#### Measurement

The 20-year-olds participating in *Growing Up in Ireland* were asked about their current status with regards to education, work and training. Only those who indicated that their principal economic status was employment (26%) at the time of the survey were included in the analysis below. Those in employment were asked about the nature of their employment, with a range of options including *regular, full-time contract* to *zero-hour contract*. The Young Adults were asked to provide an open-ended description of their role (e.g. trainee mechanic) which was used to categorise them into a social class category. They were asked about what job they would like to have by the time they are 30, and this was used to determine their expected social class at age 30. They were also asked questions about their earnings from their job, the average number of hours worked per week, and whether they had undergone training during their employment such as evening classes, or training while working.

The 20-year-olds were further asked questions on how much they 'like their job' and 'how secure [their job is]' using scales from one (not at all) to ten (very much). They also rated 'to what extent are/were your knowledge and skills utilised in this work' and 'to what extent does/did your current work demand more knowledge and skills than you can actually offer' using scales ranging from one (not at all) to five (to a very great extent). Additional questions in this section related to whether their current/most recent job was a stop gap or start to a long-term career and their perception of what type of education was most appropriate for their job.

#### 4.2.1 TYPE OF CONTRACT, HOURS AND PAY FOR THOSE IN EMPLOYMENT

Figure 4.1 shows the type of contract of those in employment, the majority of whom (71%) were in regular full-time employment. A total of 14 per cent were in regular part-time employment, 8 per cent were in temporary full-time employment, 4 per cent were in temporary part-time employment and 3 per cent had another type of contract.





Note: Margins of error are shown in parentheses in the labels.

Figure 4.2 shows the take-home pay for those in employment depending on the number of hours they worked per week<sup>35</sup> (35 hours or less, referred to as part-time, versus 36 hours or more, referred to as full-time). It should be noted that a very small number of those who worked part-time earned €401 or more, and a very small number of those who worked full-time earned €200 or less. These numbers were too small to report and therefore are not represented in Figure 4.2.

Overall, as would be expected, those who worked more hours were more likely to have higher take-home pay per week. Considering those in part-time employment, almost a third (32%) earned €200 or less per week. Four-in-ten in part time employment (40%) earned between €201 and €300 per week, versus only one-in-ten (10%) of those working full-time hours. Only 29 per cent of those working part-time earned more than €301 per week, versus the majority of those working full-time (90%, comprised of: 54% who earned €301 to €400 and 36% who earned €401 or more).



Figure 4.2 Net pay of the 20-year-olds whose main status was employment; differences between those who worked full-time (36 hours or more per week) and those who worked part-time (35 hours or less per week)



Note: Margins of error are, at most,  $\pm 5\%$  for '35 hours or less' and  $\pm 4\%$  for '36 hours or more'.

## 4.2.2 PREFERRED TYPE OF EMPLOYMENT, AND DERIVED SOCIAL CLASS AT 30 YEARS FOR THOSE IN EMPLOYMENT AT 20 YEARS

Twenty-year-olds in employment were asked what job they currently held as well as the kind of job they would like to have at age 30. Open text responses were categorised into the five household social class groups used throughout this report: *professional, managerial/technical, non-manual, skilled manual* and *lower(skilled)/never worked*.

Figure 4.3 shows the 20-year-old's social class associated with their current employment, as well as the social class of the job they would like to have at 30 years old. As could be expected, due to the level of work experience and training the Young Adults had at age 20, the largest proportion of the employed 20-year-olds were working in lower skilled roles<sup>36</sup> (43%), followed by non-manual (36%) or skilled manual workers (15%), with a relatively small number working in managerial roles (7%). A small proportion were classed as professional workers at 20, but the numbers were too small to report. The majority of the 20-year-olds in employment viewed their current job as a *stop gap* (63%) as opposed to the *start to a long-term career* (37%).



## Figure 4.3 Comparisons between the social class of the 20-year-olds in employment at the time of the survey and the social class of the job they would like to have by 30 years of age

Note: Margins of error are, at most, ±1%.

The Young Adults expected to be in higher social class jobs by the age of 30 than they were in currently. Forty-four per cent expected to be in managerial and technical roles while 14 per cent expected to be in professional occupations. The 20-year-olds in employment were optimistic about their future career prospects, with 94 per cent of them expecting to be in their desired role by the age of 30.

#### 4.2.3 RECEIPT OF TRAINING WHILE WORKING AND SKILLS UTILISATION

As described in the previously released *Key Findings* for this cohort (Growing Up in Ireland Study Team, 2019a), the 20-year-olds generally liked their jobs overall. The mean score of all 20-year-olds in all forms of employment for how much they liked their job was 7.4 out of 10 and this did not vary greatly depending on gender, socio-economic status or family structure. A total of 32 per cent rated their job satisfaction as 9 or 10 and only 4.5 per cent gave a rating of 1 or 2.

The 20-year-olds in all forms of employment gave a mean rating of 7 out of 10 for security and similarly it did not vary greatly depending on the Young Adult's background or gender. A total of 40 per cent rated their job security as a 9 or 10, and only 6 per cent rated their job security as a 1 or 2 out of 10.

Only a third of the 20-year-olds in employment thought that their skills and knowledge were used to a 'very great extent' (34%) in their job. A total of 9 per cent said that their skills were not used 'at all'. When asked if their job required more knowledge or skills than they could provide, the Young Adults were more likely to say this was 'not true at all' (45%) with very few reporting that this was 'true' (7%).

Figure 4.4 shows the type of training which the 20-year-olds received as part of their employment. The most common type of training was instruction whilst performing their job (55%), followed by instruction in a setting away from their job, which was experienced by 30 per cent. A total of 13 per cent were self-taught by using a book, manual or video. Fourteen per cent received no training.

Employees tended to have participated in just one type of training: of those who did receive training, 62 per cent received one type of training, 18 per cent received two different types of training, 10 per cent were involved in three different types of work-related training or more (not illustrated).



#### Figure 4.4 Type of training received by the 20-year-olds in employment

Note: Margins of error are shown in the labels.



#### 4.3 EXPERIENCE IN PART-TIME EMPLOYMENT WHILE STUDYING

Young adults in higher education may take on part-time employment in order to fund their education or to supplement other forms of income such as financial support from their parents. Research suggests that entering part-time employment in addition to studying may provide both benefits and costs. Taking on part-time work provides income and contributes to soft-skill development such as time-management, problem-solving ability and communication (Lin & Ching, 2014). On the other hand, working while studying may place additional time demands on students and has been found to be associated with higher levels of stress (Mounsey, Vandehey & Diekhoff, 2013).

To date, studies investigating the impact of working part-time on academic performance have produced equivocal results, with some indicating no harmful effect (Wang et al., 2010; Nonis & Hudson, 2006) while others note an association between increased hours worked and lower academic performance (Rochford, Connolly & Drennan, 2009) and fewer credits taken (Hovdhaugen, 2015). Students are typically employed in low-paid jobs which often have little or no relevance to their field of study, and the purpose of these roles is often to earn money rather than to lay a foundation for the future (Grosemans, Hannes, Neyens & Kyndt, 2020). There is evidence that, in some instances, young people become trapped in these roles, while for others they are vital stepping-stones in their careers (Schnabel, 2016).

#### Measurement

The 20-year-olds were asked if they had a 'part-time paid job in term time' while undertaking college/ training/apprenticeships. This did not include work undertaken during the holidays or as part of an educational placement. Those who responded *yes* were asked to provide an open-ended description of the job (e.g. hotel receptionist). They were asked if they worked *evening*, *weekends* or *both*, about the number of hours they worked per week and their earnings from their term-time job.

Figure 4.5 shows the proportion of those in education who held a term-time job while in education or training. Just under two-thirds of those in education or training also had a job. Slightly more women than men had a term-time job (67% versus 62%).



## Figure 4.5 Percentage of 20-year-olds in education/training with a term-time job by gender, family income quintile at 17/18 and family type

Note: Margins of error are shown in parentheses in the labels.

There was a socio-economic gradient, with those whose families were in the highest income quintile at 17/18 more likely to be in employment than those in the lowest (68% versus 57%). Interestingly, however, those from lower socio-economic backgrounds were more likely to work longer hours when they were in term-time employment: for example, those from the lowest income quintile group worked an average of 17 hours per week compared to 14 hours per week worked by those in the highest income quintile group (not illustrated). Those in one-parent families were less likely to be in term-time employment than those in two-parent families (57% versus 66%).

Figure 4.6 shows the timing of when the term-time job holders worked. Only 1-in-20 of the Young Adults worked solely in the evening, with the remainder being split almost equally between just weekend work (48%) or weekend and evening work (47%).





Note: Margins of error are shown in parentheses in the labels.

As depicted in Figure 4.7, the students with part-time jobs worked a variety of hours per week. However, unlike those whose main status was employment, the hours tended to be part-time rather than full-time. This is unsurprising, given that they were likely to be dedicating a significant amount of time to attending classes and engaging in study. Almost three-in-ten of those in term-time employment worked 16 to 20 hours per week (29%), with very few working a total of 31 hours or more (2%). The median number of hours worked per week was 15.







Figure 4.8 shows the take-home pay for those in term-time employment. Almost three-in-ten earned between  $\ge$ 101 and  $\ge$ 150 (28%), with small proportions earning under  $\ge$ 50 (6%) or over  $\ge$ 300 (4%). As would be expected, those who worked longer hours tended to earn more per week, with those working less than six hours earning a mean of  $\ge$ 64 a week, and those working 31 or more hours earning an average of  $\ge$ 371 a week.





Note: Margins of error are, at most, ±2%.

#### 4.4 OCCUPATIONAL ASPIRATIONS AND IMPORTANCE OF JOB QUALITIES

Choosing a career requires careful consideration and reflection. Some young adults have clear aspirations for their careers, while others are less sure about the path they want to choose. Career aspirations may be influenced by a variety of factors, including an individual's personality, educational attainment, available educational opportunities and guidance, social class and parental expectations (Fouad, 2007). Occupational aspirations can be focussed on specific careers (Rojewski, 2005). However, they can also focus on broader values such as personal interests, ambitions and values.

Research indicates that job aspirations are relatively unstable in adolescence and early adulthood. Rindfuss, Cooksey & Sutterlin (1999) found that even when aspirations were assessed at age 25, fewer than half of young adults achieved these goals in later life. The authors also noted that the realisation of these goals also differed by gender, with men more likely to move to higher earning jobs or managerial roles while women were more likely to move to lower-paid jobs or leave the labour force. Gender differences in the types of jobs which young people aspire to have also been observed, with women less likely to aspire to roles in science, technology, engineering and mathematics (STEM) which has seen increased policy focus in recent times (Wang & Degol, 2017).

#### 4.4.1 MEASUREMENT OF CURRENT AND PREFERRED JOB TYPE

All Young Adults were asked about current employment status and the job they would like to have by the age of 30 (see Section 4.2.2 for more details). These open text responses were categorised into the five household social class groups used throughout this report: *professional, managerial/technical, non-manual, skilled manual* and *lower (skilled)/never worked*.

Figure 4.9 shows the categorised social class based on the job type they said they would like to have by the age of 30 by their gender, principal economic status (PES) and family income quintile at age 17/18. Overall, the most common job type which the 20-year-olds would like to have by the time they turned 30 was *managerial/technical* (45%), followed by *professional* (22%), *lower* (*skilled*)/never worked (17%), with relatively smaller numbers aspiring to *non-manual* or *skilled manual* roles (8% each).

More Young Adults in education hoped to be in *professional* level positions (27%) compared to those in employment (14%);<sup>37</sup> however, differences between these two groups in terms of the other social classes were not significant. Young Adults who were in the NEET category were more likely than those in education/training to hope to be in *lower (skilled)/never worked* jobs at 30 (24% versus 14%; not illustrated).

Those from the highest income families at 17/18 were more likely to aspire to *professional* roles by age 30 (30%) compared to those from lowest income families (16%) and less likely to be aiming for *skilled manual* jobs (< 3% versus 15%). More men hoped to be in *professional* roles in ten years compared to women (25% versus 20%), more women hoped to be in *managerial/technical* roles (50% versus 40%) and there were no gender differences in terms of preferring *non-manual*, *skilled manual* or *lower* (*skilled*)/ *never worked* roles.

After stating the job they would like to have by the age of 30, the 20-year-olds were asked a follow-on question as to whether they thought they would actually obtain this job. The 20-year-olds displayed a lot of optimism regarding their career aspirations, with 93 per cent expecting to be in their desired role by the age of 30; and there was little variation in this finding in terms of gender, economic status or socio-demographic characteristics.



#### Figure 4.9 Preferred social class by the age of 30 for all 20-year-olds

Note: Margins of error are shown in parentheses in the labels.

90



#### 4.4.2 MEASUREMENT OF IMPORTANT FACTORS WHEN CHOOSING A JOB

As well as information on job type, the Young Adults rated 13 factors on their level of importance when choosing a job. Examples included 'high income', 'job security', 'flexible working hours' and 'useful to society or helps others'. They were asked to rate these qualities from 0 (Not at all important) to 10 (Very important). A summary of these factors can be seen in Figure 4.10 and a further discussion of the measure can be found in the accompanying design report (McNamara et al., 2021).

Figure 4.10 shows the proportion of 20-year-olds who rated different job qualities as 9 or 10 (i.e. most important) on a ten-point scale. In general, the 20-year-olds were most likely to rate 'interest' (63%) as highly important. While 'job security' was rated highly by over half of the 20-year-olds (52%), 'income' was rated highly by just over a quarter. Over a third of Young Adults (36%) rated 'helping others' as important in their role. Fewer of the 20-year-olds rated 'flexible hours' (21%) and 'being their own boss' (16%) as very important to them in a job. The high ratings for job interest and proportionally lower rating of high salary as a motivator for career choice hints that intrinsic work values may be a strong predictor of career and life satisfaction. This is explored in the next section.





Note: Margins of error are, at most, ±1%.

#### 4.4.3 INTRINSIC AND EXTRINSIC MOTIVATION ASSOCIATED WITH IMPORTANT JOB QUALITIES

Another way to examine job qualities is to examine trends in motivation for engaging in a career (Ryan & Deci, 2020). The analysis below groups the different job qualities under the categories of *extrinsically* motivated qualities, *intrinsically* motivated qualities, and motivations for *job advancement*. In the context of careers, extrinsic motivations are associated with wanting to gain a reward (e.g. high income), whereas intrinsic motivation is associated with personal satisfaction and fulfilment without any outside incentive (e.g. helping others). Motivations for advancement are associated with aspirations to move up the career ladder or have responsibility (Park & Word, 2012).

#### 4.4.3.1 Job qualities related to extrinsic motivation

The following analyses show the percentages of Young Adults who placed high importance (a rating of 9 or 10 on a ten-point scale) on different job qualities based on their principal economic status. Figure 4.11 presents items that are classed as extrinsically motivating and is split by principal economic status. As follows from Figure 4.10, job security was overall rated most often as the most important extrinsic job feature in Figure 4.11, followed by travel opportunities and income. Those who were NEET (i.e. not engaged in employment or training) were more likely than those in education/training to rate '*income*' (36% versus 23%) and '*flexible hours*' (31% versus 19%) as highly important, and less likely to rate '*job security*' (38% versus 52%) or '*travel opportunities*' (18% versus 31%) as highly important. These differences are statistically significant but, because of the relatively small size of the NEET group, the comparisons regarding holidays did not reach statistical significance.





Note: Margins of error are, at most, ±2% for those in education/training; ±3% for those in employment and ±8% for those not in employment, education or training (NEET).

#### 4.4.3.2 Job qualities related to intrinsic motivation

Figure 4.12 presents items that are classed as intrinsically motivating and is split by principal economic status. As follows from Figure 4.10, where overall figures are presented, Figure 4.12 shows that the job being interesting was most commonly rated as the most important job feature, followed by helping others and providing training opportunities. Young Adults in education were more likely than those who were NEET to place high importance on having an interesting job (64% versus 53%), while the reverse was true for 'creativity' (27% versus 41%). The differences in placing a high value on training or helping others were not significant between the groups. The fact that over a third (36%) of all 20-year-olds, regardless of economic status, highly valued 'helping others' is a strong indicator of their interest in personally satisfying work.







Note: Margins of error are, at most, ±2% for those in education/training; ±3% for those in employment and ±8% for those not in employment, education or training (NEET).

Figure 4.13 shows the value that the 20-year-olds placed on advancement within their chosen roles. Job qualities which are related to advancement are gaining promotion, being a 'good step on the career ladder' and being one's own boss. Young Adults who were in employment were more likely than those in education/training to attach high importance to all three of these. As previously stated, 'being your own boss' was the least highly rated job quality overall; particularly for those in education/training (14%) compared to those in employment (22%).





Note: Margins of error are, at most, ±1% for those in education/training; ±3% for those in employment and ±7% for those not in employment, education or training (NEET).

#### 4.5 SUMMARY

Slightly more than one-quarter of the 20-year-olds (26%) were in employment as their main activity. They were usually employed in full-time permanent contracts (71%) and the majority were in non-manual occupations (36%) or lower skilled jobs (43%). However, many of the 20-year-olds in employment viewed their current job as a *stop gap* (63%) as opposed to the *start to a long-term career* (37%). When asked about the type of occupation that they would like to have by age 30, unsurprisingly they hoped to be in higher skilled roles by then. The most frequently aspired-to level at age 30 was managerial / technical work (44%), and while only a very small number were employed in professional roles at 20, 14 per cent hoped to be in this type of job within ten years. It will be informative to track this group as they move through their twenties to see whether their achieved occupation matches their expectations; and what barriers or opportunities arise for social mobility as they continue through adulthood.

In general, Young Adults in employment tended to like their jobs and saw them as secure (giving mean scores of 7 out of 10 for job satisfaction and security). Just over a third of Young Adults stated that their current job used their skills to a great extent (34%), whereas less than one-in-ten suggested their skills were not utilised at all (9%). They tended to report that their current role did not demand more skills than they could offer (with 45% responding not at all). Most received some form of training as part of their role (86%), with over half (55%) receiving training while performing their job and three-in-ten receiving training which took them away from their normal job.

Apart from those whose main activity was being in employment, almost two-thirds of the 20-year-olds who were in education or training had a job during term time. Most of this group (85%) worked up to 20 hours per week and earned €200 or less a week (82%). Working was actually more prevalent among those from more advantaged social backgrounds (as measured at age 17/18). However, when those from more disadvantaged backgrounds held term-time jobs, they tended to work longer hours.

In terms of their career aspirations, the vast majority of the 20-year-olds believed they would be in their preferred job by the time they were 30 (93%). A total of 22 per cent reported that they would like to be in professional roles, 45 per cent in managerial/technical roles, 8 per cent in both non-manual or skilled manual roles respectively, and 17 per cent in lower (skilled)/never worked roles. Young Adults in education/training (27%), who were male (25%) or from higher income families (30%) were more likely to aim for professional roles, while those from lower income families (15%) were more likely to aspire to skilled manual roles when compared those from higher income families (< 3%). The small number of unemployed adults (5% in total) were more likely to want lower skilled jobs at 30 (24%).

The Young Adults were asked to rate the importance of several different job qualities. The category 'an interesting job' (63%) was most frequently rated as the most important job quality. Young Adults who were in education or training were more likely to value interesting jobs than those who were NEET (64% versus 53%). The second highest was 'job security' (52%) which may speak to the experiences of the cohort growing up in a time of economic uncertainty. Those who were in employment were more likely than those in education/training to place high importance on gaining 'promotion' (41% versus 34%), having a job which is 'a step on the career ladder' (42% versus 35%) and 'being their own boss' (22% versus 14%). Those who were not in employment, education or training (NEET) were more likely than those in education/training to highly value 'creativity' (41% versus 27%), 'income' (36% versus 23%) and 'flexible working hours' (31% versus 19%). Further research could be conducted into the extent to which outcomes such as job satisfaction are driven by work values.

Reflecting the high proportion still in education/training at 20 years of age, only a minority of Young Adults had entered the labour market full-time. The next wave of data collection planned at 25 years of age will provide insights into the employment integration of the wider group of Young Adults as well as offering evidence on the extent to which those who had already entered the labour market at 20 have progressed towards their career goals.



## **Chapter 5**

PEER RELATIONSHIPS AND LEISURE



#### 5.1 INTRODUCTION

This chapter examines the relationships of the 20-year-olds with their friends, sources of emotional support and their engagement in physical activity and other leisure activities.

At 20 years of age, the immediate family and home environment are still of substantial significance to young adults, especially as most will not permanently move out of the parental home until their midtwenties (Eurostat, 2020). However, as they leave their teenage years, young people become increasingly oriented to the world outside the home and more open to a wider range of influences (Arnett, 2000). The roles played by peer and non-family relationships in a further education institute or university, workplace, community and neighbourhood increase substantially (Arnett, 2007).

The first part of this chapter expands on topics raised in Chapter 2 by exploring the nature of the Young Adult's relationships with peers since the age of 17/18. This is explored through examination of the Young Adult's friendship network which forms an important avenue for social support at this age. The second part of the chapter provides an overview of the leisure activities of Young Adults, which may (or may not) include activities with friends. It considers a wide range of pursuits from physical activity to screen time in terms of socio-economic patterns and longitudinal trends. Such analysis can provide important insights for policy development (such as the proportion reaching physical activity targets) since earlier Irish research has indicated a substantial decline in physical activity after leaving school and university (Lunn, 2010).

#### 5.2 CHANGES IN PEER RELATIONSHIPS

#### 5.2.1 FRIENDSHIP NETWORKS

During early adulthood, young people become less dependent on their parents and spend more time with their peers and, as outlined in Chapter 2, potentially become involved in more intimate romantic relationships (Holt et al., 2018).

The presence of close friendships in young adults' lives has been found to be psychologically protective – those with numerous high quality close friendships were found to be happier (Demir, 2008; Demir & Wayne, 2007), and those with an absence of close friendships were at greater risk for depression and social withdrawal (Chango, Allen, Swedo & Schad, 2015). Friends are therefore an important source of support for 20-year-olds. However, the transition from school to college or work may alter the friendship network, as new friends are made, and distance makes it more difficult to maintain old relationships. A major part of the transition to adulthood for many is a change in living situation, from a family home to frequently living with non-relatives in shared accommodation (Clark, Tuffin, Frewin & Bowker, 2017). While the research examining the effects of a young adult's living situation on friendships (Wall & Gouveia, 2014 in Schwanitz & Mulder, 2015) and has been described as 'a unique aspect of socialisation for young adults' (Wolfe & Barnett, 2001, in Schwanitz & Mulder, 2015, p. 1193). As described in Chapter 2, some young adults reside in their parental home while working or studying, while others may be financially independent, living outside of their parental home and paying their own rent.

Aside from social support, friendship networks can also act as an informational or physical resource, that have potential to affect individual outcomes in areas such as housing, employment, education, and income. This section also explores how friendship networks relate to these areas.

#### 5.2.1.1 Measurement

In *Growing Up in Ireland* at age 20, friendship networks were explored by asking the Young Adult questions about their friendship group, including the overall number of friends, and how many were



considered as close friends. These questions were also asked at age 13 and 17/18 years, but with a slight wording change from 'How many friends do you normally hang around with' to 'How many friends do you have' at Wave 4. Similarly, slight wording changes also occurred in the categorisation of close friends between Wave 3 and Wave 4.<sup>38</sup>

A series of questions asked the Young Adult about whom they would talk to about their personal thoughts and feelings. Respondents could indicate '*Yes/No/Not Applicable*' to each of a range of familial and personal contacts.

The 20-year-old was also asked to indicate typical sources of information on six topics relating to new responsibilities and behaviours that arise from taking on an adult role. These topics included finding accommodation, being short of cash or finding out about social welfare entitlements. Respondents indicated sources, including *online*, *parents*, *other family* and *friends*.

#### 5.2.1.2 Results

At nine years of age, the modal number of parent-reported 'close friends' was 'two to three' (41%). At 13 years of age the modal number of friends reported by the Study Child was 'six to ten' (35%); by 17/18 years, the modal friendship group was reported as 'three to five' (46%). Turning to findings among this cohort at age 20, Figure 5.1 shows that the modal value had increased considerably, with over half of all 20-year-olds (58%) saying they had more than ten friends. At the other end of the spectrum, just 2 per cent reported having a very small friendship group of none or just one or two friends. There was a large gender difference at the higher end of the scale, with 61 per cent of men versus 42 per cent of women reporting a friend group greater than ten people.

At age 17/18 years, when most of the cohort were still in secondary school, fewer than 9 per cent of men and 6 per cent of women had reported more than ten friends. Overall Figure 5.1 represents a large increase in the reported size of friendship networks at age 20.





Note: Margins of error are shown in parentheses in the labels.

It is useful to examine whether some young people tended to have larger friendship groups from middle childhood through adolescence into early adulthood. However, these correlations of reported friend group sizes should be interpreted with caution due to changes in the friendship questions across waves outlined in Section 5.2.1. Spearman's rank correlation was used to account for the ordinal nature of the data. The correlations presented in Table 5.1 revealed a positive and significant relationship between friendship group sizes at all ages. This correlation remains weak between the ages of 9 to 13 but becomes moderately strong between the ages of 17 and 20.

Spearman's rho		1	2	3	4
1	9 years Close Friends (parent report)	1	.095**	.118**	.132**
2	13 years Friends		1	.190**	.122**
3	17 years Friends			1	.342**
4	20 years Friends				1

Table 5.1	Correlation	of	friendship	group	size	from	Waves	1-4	1
-----------	-------------	----	------------	-------	------	------	-------	-----	---

\*\*Significant at p < .001 level. N > 4,300 for all correlations.

The impression gained from exploring the correlations between friendship group sizes is that reported friendship group size is quite variable across waves but becomes more consistent as the Study Child enters early adulthood.

Figure 5.2 takes a longitudinal view of friendship structures for men and women and explores changes in the reported size of the Young Adult's friendship network over time. This figure looks at a relative change in the number of friends and classifies those whose friendship group remained the same size, those who had a reduction in their friendship group and those whose friendship network expanded over time.





Note: Margins of error are shown in parentheses in the labels.

Despite the limitation imposed by the wording change in the 'numbers of friends' question, the pattern of change is for friendship groups to expand for the 20-year-olds. This is true for 69 per cent of all respondents. Just over a quarter of respondents maintained a friendship group of the same size at 17/18 and at 20 years. Few participants, 6 per cent overall, saw their friendship network diminish at 20 years. Men were slightly more likely to have increased the size of their friendship group compared to women (72% versus 66%).



A large friendship group can be an important source of support at 20 years of age, while close friendships may have a particular influence on behaviours and emotional states. Figure 5.3 presents the percentages of participants answering the question 'How many of your friends would you describe as CLOSE friends?' at the ages of 13, 17/18 and 20 years. The participants indicated if 'None', 'Some', or 'Most/All' of their friends were close.





Note: \*There was a wording change at 20 years that changed the final category from 'Most/All' to 'All'. The figures do not total to 100 per cent within categories because of rounding.

Figure 5.3 shows that the overall proportion of participants reporting no close friends remained very low over time with 1.1 per cent, 2.5 per cent and 1.7 per cent of participants in this category at ages 13, 17/18 and 20 years respectively.

Corresponding with the expanding friendship networks seen in Figures 5.1 and 5.2, the proportion reporting 'most/all' friends as close showed an increasing trend on average between 13 and 20 years with 12 per cent, 31 per cent and 26 per cent of participants endorsing this category at 13, 17/18 and 20 years respectively.

There are limitations to these findings as the simple nature of the question paints a broad picture of the Young Adult's friendship group. For instance, it is impossible to tell if 'close friends' at 17 years are the same 'close friends' reported at 20 years. The stronger wording of the higher 'close friends' category at 20 years also makes direct comparison difficult, but encouragingly, over 98 per cent of 20-year-olds report at least some close friendships, giving little evidence that the transition out of secondary education has harmed the 20-year-old's ability to maintain and/or foster close friendships.

#### 5.2.2 SOURCES OF INFORMATION AND HELP TO THE 20-YEAR-OLD

The Young Adults were asked about whether they would share their personal thoughts or feelings with a range of other people, including family, friends and professionals (see Figure 5.4): 'With whom do you talk about personal thoughts and feelings, or about things you wouldn't tell just anyone?'. Participants were able to indicate that an option was 'not applicable'. Percentages reported in Figure 5.4 omit participants who indicated that a particular category does not apply to them, i.e. those without a partner, or siblings etc. The margin of error reported in the labels takes this into account and represents the margin of error for all participants less 'not applicable' participants.

The importance of friends emerged very clearly in the findings. Friends were by far the most commonly reported source of social support, with 86 per cent of all 20-year-olds indicating that they shared personal thoughts and feelings with a friend. Figure 5.4 also demonstrates that, from the Young Adult's perspective, close familial relationships, especially with their mothers, remained an important source of support. Just over two-thirds (69%) said they would talk to their mother 'about personal thoughts and feelings', or about things 'you wouldn't tell just anyone'. More than half (52%) indicated that other relatives – including siblings – acted as a source of support and slightly under half (43%) talked to their fathers about personal matters.

Smaller percentages (between 20% and 15% overall) reported talking to *grandparents*, *non-relatives*, such as co-workers, or *professionals* such as doctors or therapists. There was a notable gender difference in the propensity to talk to others as a source of social support. Though both genders showed a similar tendency to talk to a *friend* or their *father* as a source of support, women were 20 per cent more likely to talk to their *mother* or *partner*, 30 per cent more likely to talk to a *grandparent* or *other relative*, and between 50 per cent and 80 per cent more likely to talk to another *non-relative* or *professional* respectively.<sup>39</sup>





Note: Margins of error are shown in parentheses in the labels.

Twenty-year-olds were also asked about to whom they turned for other forms of information or support. This allowed them to identify different sources of support for a set of issues commonly experienced by young adults. This list of issues included 'finding accommodation', 'being short of money', having 'problems with work', and 'knowing about unemployment entitlements'. The Young Adult indicated sources of support from a list consisting of online, parents, other family and friends. Figure 5.5 shows the percentage of 20-year-olds choosing one or more of the categories as a source of support. Options such as other, or I would not need help with this topic and not applicable were chosen by very small percentages of participants so are not included here.

The analysis in Figure 5.5 shows that the most common source for help with challenges varied depending on the nature of the issue. Seeking information online was a common tactic for several issues where factual information was key such as *accommodation, finding a job,* or *entitlements to social welfare* (77%, 76% and 72% respectively). In contrast, very small proportions of Young Adults used the internet for help with their finances or with issues such as having problems at work (3% and 6% respectively). For financial or employment problems, parents were by far the most frequent source of support at 88 per cent and 41 per cent respectively.





#### Figure 5.5 Sources of information and support for common issues faced by Young Adults

Note: Margins of error are shown in parentheses in the labels.

Friends were the most frequently chosen source of help for 20-year-olds experiencing *problems with their coursework* (50%), followed by online sources of information (26%). Friends also tended to provide high levels of support for interpersonal problems such as having *difficulties in the workplace* (24%).

Further exploration of the reliance on different sources of support by social class (not illustrated) showed that a 20-year-old from a 'professional' working family was 1.6 times more likely to cite their parent as a source of help when finding a job than a Young Adult whose family were in the 'lower (skilled)/never worked' group. They were also more likely to go to a parent for help when looking for accommodation (1.4 times) and when seeking help with coursework (1.8 times more likely).

#### 5.3 LEISURE ACTIVITIES

Participating in leisure activities has a range of associated benefits: e.g. improvements in psychological well-being, the development of new skills, and the formation of social relationships (Trainor et al., 2010; Badura et al., 2015). The national framework for children and young people – *Better Outcomes, Brighter Futures* – recognises leisure activities as key to the well-being of young people and includes a specific aim of ensuring young people enjoy 'play, recreation, sports, arts, culture and nature' (DCYA, 2014, p.49). The benefits of leisure activities to overall health and well-being can be experienced throughout the lifespan and are particularly beneficial for older adults (Paggi, Jopp & Hertzog, 2016).

At 17/18 years, the most commonly reported leisure-time activities by young people in *Growing Up in Ireland* were listening to music, hanging out with friends and spending time online, which were mentioned by almost all study participants. Active pursuits (including exercising and playing team or individual sports) were broadly popular too, although more men took part in these types of activities than women. Women, on the other hand, were more likely to participate in activities like reading or musical pursuits. Some socio-economic differences were also observed, with those from higher socio-economic groups more likely to participate in activities in active pursuits.

At 20 years old, participants were asked what activities they *regularly do for fun or to relax*, with a list of 15 options, including reading, playing or listening to music, using the internet, playing sports or going to the gym, and hanging out with friends.

As seen in Figure 5.6, and similar to activities reported at 17/18 years, *spending time online, hanging out with friends* and *listening to music* were clearly the most popular activities, selected by almost all 20-yearold men and women. More than four-fifths of young men and women said they spent time in *pubs or clubs* (87%) and *watching television* (84%). Significant differences between genders were observed in most of the other activity-based pursuits; young men were more likely to *attend the gym* (64% versus 57% of young women), *play team sports* (58% versus 24%) and participate in *individual sports* (36% versus 23%). However, young women were more likely to regularly go *walking* (68% versus 48% of young men). As at age 17/18 years, young women were also more likely to *read* (47% versus 37% of young men) and *play an instrument* (31% versus 25%).



#### Figure 5.6 Popular social activities amongst 20-year-olds, according to gender

Notes: Margins of error are, at most, ±2%. 'Group activity' refers to other organised group activities such as scouts, guides, youth clubs.

Differences in social activities were also patterned according to family social class, as shown in Figure 5.7. Young Adults from 'professional' class families were more likely than their peers from 'lower (skilled)/ never worked' social class families to regularly go to the *gym* (70% versus 53%), *read* (53% versus 38%), and *play team sports* (51% versus 36%) or *individual sports* (40% versus 25%). Similar differences were observed when 20-year-olds were categorised according to parental education and family income (not illustrated).





#### Figure 5.7 Popular social activities amongst 20-year-olds, according to family social class

Notes: Margins of error are, at most, ±4%. 'Group activity' refers to other organised group activities such as scouts, guides, youth clubs.

#### 5.4 PHYSICAL ACTIVITY

Physical activity is a particularly important area of research in terms of overall public health and well-being. A physically active lifestyle has a protective effect against a range of negative health outcomes, including cardiovascular disease and Type 2 diabetes (Lee et al., 2012). Physical activity is also associated with improved cognitive health and performance, with some support for a partial association with depression too (Biddle, Ciaccioni, Thomas & Vergeer, 2019). Along with diet, it is also the key factor associated with the maintenance of a healthy weight status. This is especially notable given physical activity is a modifiable behaviour, so it can be targeted to combat the risk of overweight and obesity, and associated diseases.

The societal importance and benefits of a physically activity population are well recognised, reflected in the implementation of numerous key government policies. *Get Ireland Active, the National Physical Activity Plan for Ireland, 2015-2020*, aims to encourage people to be more active through a number of initiatives across a range of sectors: training health professionals to prescribe activity in treating chronic conditions; raising awareness and providing an information resource through the development of the getirelandactive. ie website; encouraging employers to implement healthy workplace initiatives; developing a new school PE curriculum; and increasing the proportion of people achieving activity guidelines by 1 per cent per year, with a particular focus on disadvantaged areas and groups (Department of Health, 2016). The *National Sports Policy 2018-2027* (Department of Transport, Tourism and Sport, 2018) also contains commitments to increase participation in sport and physical activity in Ireland.

At 17/18 years of age, 71 per cent of *Growing Up in Ireland*'s Cohort '98 was classified as physically active, according to adult physical activity guidelines. However, longitudinal analysis highlighted a substantial reduction in physical activity levels over time: the same cohort was significantly more active at 9 years of age.

At the current wave of *Growing Up in Ireland*, the 20-year-olds were again asked about their physical activity patterns. Specifically, they were asked how often in the past fortnight they had participated in

either *light* (walking, slow cycling, etc.) or *hard* bouts of physical activity (field sports, jogging, etc.). This information was used to calculate the overall amount of physical activity, in terms of both intensity and duration/frequency, that 20-year-olds achieved in an average week.

Answers to both questions (regarding light and hard physical activity) were combined and converted to *metabolic equivalents* (METS), a measurement of the metabolic cost (or energy expenditure) associated with a given activity (or activities): one MET is defined as the energy required to sit quietly, equivalent to a caloric consumption of 1 kcal/kg/hour. This is a useful measure as it allows different types of activity and patterns of exercise to be compared on the same scale of energy expenditure. Moderate (or light) activities are considered to require approximately four times as much energy as sitting quietly and are therefore assigned a value of 4 METs. Vigorous (or hard) activity, being more intense, is assigned a value of 8 METs. This methodology has previously been employed for the World Health Organization's global physical activity questionnaire (GPAQ).<sup>40</sup> Each reported bout of physical activity (*at least 30 minutes*) was assumed to take 45 minutes. Frequency of activity (number of bouts \* 45min duration) was multiplied by the activity intensity (in METs), to produce MET-minute per week, a total measure of physical activity.

#### 5.4.1 RESULTS

On average, 20-year-olds achieved 1,229 MET-minutes of physical activity per week (broadly equal to about 2.5 hours of jogging or playing a field sport). A strong gender difference was observed, with young men significantly more active than their female counterparts (1,404 versus 1,049 MET-minutes/week). This equates to a gender difference of about 45 minutes of jogging (or 1.5 hours of a less strenuous activity like walking) per week.

Applying the World Health Organization and national recommended guidelines for physical activity<sup>41</sup> of at least 30 minutes of moderate physical activity five times per week (equal to 30mins \* 4METs \* 5 days or 600MET-minutes/week), 65 per cent of Young Adults achieved the recommended amount of physical activity for an adult (Figure 5.8). For comparative purposes, according to the Healthy Ireland survey, 61 per cent of Irish adults aged 15-24 years achieved the national recommendations (Department of Health, 2019).

Substantial gender differences were observed; significantly more young men than women met the guidelines (71% versus 59%). Such pronounced gender differences have been observed at all previous waves of this study (McNamara et al., 2020) and are widely reported in the literature: young men in the Healthy Ireland survey were also more likely to achieve the guidelines than women (71% versus 51%). The gender difference observed amongst the current cohort may also reflect the leisure activity preferences reported in Section 5.3, wherein young men expressed a greater interest in physically active pursuits than women.

There were also socio-demographic trends as Young Adults from families with higher-educated parents were more likely to meet the activity guidelines than those from families with lower-educated parents (74% versus 58%). Further evidence of this inequality-related disparity was found in terms of self-reported financial stress: those 20-year-olds experiencing financial stress were less likely to achieve activity guidelines than those not experiencing financial stress (61% versus 66%, not shown in graph). Socio-economic inequalities in physical activity levels, with those from less advantaged backgrounds being less physically active, are well established in the literature (Beenackers et al., 2012). Financial limitations and a lack of access to facilities are cited amongst the key barriers to physical activity (Pedersen, Hansen & Elmose-Østerlund, 2021).

Young Adults from two-parent families also reported significantly higher levels of achieving the physical activity guidelines than those from one-parent families (67% versus 59%). Further differences in physical activity levels were observed according to the 20-year-old's principal economic status: the guidelines were met by 68 per cent of those 20-year-olds in education or training, 65 per cent of those at work, compared to just 39 per cent of those not in education, employment or training (*'NEET'*; Figure 5.8).

40 As reported in the Global Physical Activity Questionnaire (GPAQ) Analysis Guide; available at https://www.who.int/ncds/surveillance/steps/ resources/GPAQ\_Analysis\_Guide.pdf.







Note: Margins of error are shown in parentheses in the labels.

There are a wide range of health benefits of physical activity. Being active forms part of a healthy lifestyle and the association between physical activity and weight status is well established, physical activity providing a protective effect against the risk of overweight and obesity. Evidence of some of the associations between activity and health is reflected in Figure 5.9. Whilst the percentage of non-overweight and overweight 20-year-olds meeting the activity guidelines was very similar (67-68%), there was a significant drop for obese 20-year-olds (55%). Current general health was also associated with achieving physical activity guidelines: those who reported their health as *excellent* or *very good* were significantly more likely to be sufficiently physically active (74% and 66%, respectively) than those who reported their health as *fair* or *poor* (46%).



### Figure 5.9 Percentage of 20-year-olds meeting physical activity guidelines according to key health outcomes

Note: Margins of error are shown in parentheses in the labels.

Information on motivations and barriers to participating in sport or physical activity was collected from Young Adults for the first time. The 20-year-olds cited 'to improve my health and fitness' as the most important reason for such participation (43%), followed by 'I enjoy it' (18%) and 'to control my weight' (12%). Other motivating factors included 'to meet and participate with others in sport' (7%), 'to improve my athletic skill' (4%), 'mental health' (1%) and 'necessary for work/transport' (1%). Explanations of constraints to participating in physical activity were less comprehensive, Young Adults primarily citing a lack of interest (49% of those reporting a constraint; 7% of all 20-year-olds) or a lack of time (38% of those reporting a constraint; 5% of all 20-year-olds) as the main reasons for not engaging in more physical activity.

#### 5.4.2 LONGITUDINAL TRENDS IN PHYSICAL ACTIVITY

Using data collected at previous waves of *Growing Up in Ireland*, it is possible to explore longitudinal trends in the physical activity levels of this cohort. As seen in Figure 5.10, physical activity levels have reduced substantially over time; from 2,368 MET-minutes/week at age 9, to approximately 1,500 MET-minutes/week at ages 13 and 17/18, reducing further to 1,229 MET-minutes/week at age 20. The change from age 9 to 20 represents a reduction in physical activity equal to more than 4.5 hours of light activity (such as walking) per week, while the reduction from age 17/18 to 20 is equal to slightly more than one hour of light activity. Similar trends, in terms of a reduction over time, were observed for both genders, although males were consistently more active than females at all waves of the study. This downward trend is supported by wider research, which suggests that children become less active throughout adolescence and into early adulthood. Pooled data from meta-analyses in other studies suggest that physical activity levels decline by an average of 7 per cent per annum, with some studies consistently tracking this decline over the course of ten years of follow-up (Dumith, Gigante, Domingues & Kohl III, 2011; Corder et al., 2019).



Figure 5.10 Average MET-minutes per week expended by the Young Person across all waves of the study

Note: Margins of error are, at most, ±2% for All, 3% for Men and 4% for Women.



#### 5.5 USE OF TECHNOLOGY/SCREEN TIME

The internet is now an integral part of the everyday lives for many people in Ireland. Continual monitoring of Irish markets by Ipsos MRBI Market Research shows that 64 per cent of those 15 years of age and older had a Facebook account and three-quarters of those used it daily (Ipsos MRBI, 2017). The underlying companies, services and technologies favoured by young adults can change rapidly, with some high-profile social networks such as Google+ and Vine shutting down entirely in 2017 and 2019 and newer social networks such TikTok and messaging services such as WhatsApp gathering increasing market share over this same period (Ipsos MRBI, 2019).

In Ireland, mass market adoption of modern smart phones and tablet devices such as those released by Apple has only occurred in the last decade or so, with Irish releases of the iPhone in 2008 and iPad in 2010 respectively (O' Brien, 2013). The changing nature of technology and methods of using and accessing the internet has led many researchers to focus on a global measure of usage known as screen time.

Screen time refers to the amount of time an individual spends in front of an electronic screen such as a television, computer, or smart phone. Before the wide adoption of portable devices, screen time was almost exclusively based on television viewing (Strasburger, 1989). However, current research in this field must consider flexible concurrent usage patterns of many kinds of devices, with screen time being considered a reasonable approximation of the behaviours associated with using a wide variety of technologies. One of the main characteristics associated with most technology use is physical inactivity (Tremblay, Le Blanc, Kho, Saunders et al., 2011).

A moderate amount of screen time can be useful for education or leisure. However, some research shows that excessive screen time can be harmful and has been linked to lack of physical exercise, sleep problems, obesity, and reduced academic performance (Hale & Guan, 2015; Melkevik, Torsheim & Rasmussen, 2010).

A recent review of the screen time literature by Orben (2020) revealed that the majority of research in this field, even in systematic reviews, is cross-sectional in nature, and tends to show a positive association between screen time and poorer psychological and social outcomes. The cross-sectional nature and often 'low quality standard' (Orben, 2020, p. 410) of these studies prevents strong causal attribution between device/screen time exposure and any outcome variables from being made. This finding is echoed by Dennison, Sisson & Morris (2016), who found that there were 'very few longitudinal studies of screen time, which limits understanding of the directionality and causality of obesogenic behaviours and depressive symptoms' (p. 754).

When studies using longitudinal sources of data are aggregated, the association between screen time and psychological outcomes tends to disappear (Carson et al., 2016). Citing Frost & Rickwood (2017), Orben (2020) argues that screen time alone cannot capture a multi-dimensional activity where users may experience both positive and negative mental health effects from an activity like social media use at different points in time. For instance, excessive comparison of oneself to others on a platform such as Facebook can exacerbate depressive symptoms (Vahedi & Zannella, 2021), while using the same platform to bolster social support and connectedness can reduce depressive symptoms (Frost & Rickwood, 2017).

Despite the limitations of screen time as a measure of technology use, it still provides a shorthand indicator of the amount of time a Young Adult spends engaged with various forms of technology. This section also explores other online behaviours and competencies among the *Growing Up in Ireland* Cohort '98 at 20, alongside screen time estimates.
#### 5.5.1 MEASUREMENT

Reflecting the complexity of measuring both the duration and variety of computer applications used, the 20-year-olds were asked about the amount of time they spent on a typical day on screen-based activities (including such activities for study but not including any such activities for their work). They were also asked to confirm what they did during this time from a list of 16 activities derived from a longer list that had been tested in the Wave 4 pilot study at 20 years of age (O'Mahony et al., 2021).

#### 5.5.2 SCREEN TIME AND TECHNOLOGY USE

Figure 5.11 shows a breakdown of screen time activities on both weekdays and weekend days for all the 20-year-olds who gave specific answers to the screen time questions. Small numbers of participants who gave 'Don't know' or 'Hard to say but at least some time' answers were excluded.

Over half of the 20-year-olds spent over three hours 'online' on a typical weekday (55%). This increases moderately on weekends to 58 per cent. Being 'online' clearly dominates screen time activities, with only about 12 per cent spending this amount of time 'watching TV or films' or 8 per cent spending over three hours on 'gaming' on a typical weekday. Given the blurring of typical activities that has arisen through video on-demand services like 'YouTube' and 'Netflix' or game platforms that are largely online, it is possible that time online overlaps with these activities that can be either offline or online.

Gender differences in time spent 'online' or 'watching TV or films' were rather small, but men were much more likely than women to spend over three hours 'gaming' on weekdays (12% versus 3%) and weekend days (20% versus 3%).



#### Figure 5.11 Self-reported time spent on screen time activities for all 20-year-olds per day

Note: Margins of error in represent the highest figure calculated within each category.

While conventional television no longer dominates screen time activities, it still features prominently in the daily activities of most 20-year-olds. The habit of using of multiple devices simultaneously or of doing multiple activities simultaneously ('multi-screening') by the 20-year-olds was also explored.

Figure 5.12 reveals that multi-screening was common: 56 per cent of all 20-year-olds multi-screened daily or more frequently. Initial exploration of these figures by gender showed that the habit of multi-screening was endorsed equally by both men and women. 'Never' multi-screening was unusual, at just 11 per cent of the Young Adults.



Figure 5.12 Multi-screening for all 20-year-olds

Note: Margins of error are, at most, ±1%.

Figure 5.13 explores the characteristics associated with extended periods of time (i.e. regularly three hours or more) on screen-based activities. Besides the higher duration of video gaming among men reported above, Figure 5.13 shows that 20-year-olds from families with a lower household class or lower income group were roughly twice as likely to be high-duration gamers (6% versus 10% for higher and lower household class; 5% versus 12% for higher and lower income). In contrast, the difference by family type was not statistically significant.



Figure 5.13 The proportion of 20-year-olds spending three hours or more on gaming and video consumption by demographic variables

Note: Margins of error are shown in parentheses in the labels.

When extended periods of television viewing are considered, women were slightly more likely to be high-duration viewers overall. The difference in TV viewing between one- and two-parent families was not statistically significant. The difference in high-duration TV viewing according to social class was more robust: 20-year-olds from a lower social class family were three times more likely to watch television for three or more hours daily (5% versus 15% for higher and lower classes respectively). A similar difference in extended TV viewing was observed between 20-year-olds from lower and higher income families (17% versus 9% respectively for three hours plus).

Given the primacy of online activities in the lives of 20-year-olds and the broadly equal time spent online by both men and women, exploration of the typical online activities of 20-year-olds sheds light on what they were doing in their time online. Activities drawn from a representative list developed during the pilot phase of the project (O'Mahony et al., 2021) were specified by the 20-year-olds who spent at least some time 'online'.

Figure 5.14 shows that the most common activities were almost universally selected by respondents, with no evidence of gender-based differences in usage patterns. Over 90 per cent of all young men and women used the internet for 'social media', 'video' (encompassing tv/movies/video on demand), 'messaging/calling', and 'searching for information'. Slightly more young women used the internet for 'shopping' (89% versus 81% of men) and roughly 80 per cent of all 20-year-olds used the internet for 'further education/distance learning' (encompassing college work etc.).

More than half of 20-year-olds used the internet for 'news/sports updates' (with a higher rate of 80% for men compared to 58% for women), 'completing online application forms', 'paying bills and managing money', and 'getting advice on health, relationships or other issues'. Around half went online for 'for work purposes' with men slightly more likely to endorse this activity than women (55% versus 47% respectively).



## Figure 5.14 Online activities by gender

Note: Margins of error are, at most, ±2%.

Corresponding to strong gender-based differences reported in Figures 5.13 and 5.14, roughly two-thirds of men used the internet for 'gaming' (68% of men versus 16% of women) or to access 'pornography' (64% of men versus 13% of women). Gender differences were smaller for other more 'niche' activities



online, but all were still weighted towards men. Roughly a third of men (30%) used the internet for 'dating apps', compared to a fifth of women (21%). Streaming videos online for the purposes of earning money was also more commonly endorsed by men (13% versus 9% of women).

Finally, men were five times more likely to bet money online compared to women (16% versus 3%). The Young Adult's propensity to take risks was also considered in relation to their online activity. Young Adults were asked to rate their own risk aversion on a single item with a scale of 0 to 10. A score of zero represented 'Unwilling to take risks', a score of ten represented 'Fully prepared to take risks'. This risk score was divided into thirds (tertiles) categorising the 20-year-olds into low, moderate, and higher risk-takers.

Cross-tabulation of the grouped risk categories by their pattern of internet use showed no differences across the majority of online activities discussed here but the highest risk-takers exhibited a greater propensity to engage in online gambling (13%) than the middle or lower risk-taking groups (8% and 6% respectively).

#### 5.5.3 ONLINE PRESENCE, PRIVACY AND SAFETY BEHAVIOURS

Figure 5.14 showed that a core set of common online activities were engaged in by almost all respondents, especially social media use (98% of young women and 93% of young men). This section explores the Young Adults' 'online presence', their ability to protect their privacy and engage safely online on a range of social media platforms which were among the largest online platforms at the time of fieldwork. The rapid turnover of companies and technologies is such that one of the largest such platforms, Google+, was shut down in the year after fieldwork concluded.

Respondents who indicated that they spent any time online were asked if they had an account on a number of major social platforms (sorted alphabetically rather than by size). Figure 5.15 shows that Facebook, Instagram and Snapchat were used by a large majority of 20-year-olds. For some applications, there were more female than male users: Instagram (93% versus 83%), Snapchat (95% versus 89%) and Pinterest (29% versus 10%). Internet users in the sample tended to hold multiple accounts on these various services with four accounts being the average. Young women had slightly more online accounts than young men, on average (4.2 for females, versus 3.7 for males).



Figure 5.15 Percentage of 20-year-olds with an online account on a platform by gender

Note: Margins of error are shown in parentheses in the labels.

Many Young Adults with social media accounts engaged with them on a daily basis (Figure 5.16). This was particularly so for users of Facebook, Instagram and Snapchat but did not vary greatly by gender across the various platforms.





Note: Margins of error are shown in parentheses in the labels.

The 20-year-olds were asked follow-on 'tick all that apply' questions if they indicated they used a particular platform. Firstly, they were asked if they held a public profile<sup>42</sup> for any platforms used. Secondly, they were asked whether they knew how to change their privacy settings. Figure 5.17 explores how visible 20-year-olds made themselves on the various online platforms.<sup>43</sup> Compared to private or restricted profiles on most platforms, a public profile opens the user up to public visibility. Public accounts can typically be searched for online and make some account details openly visible to anyone viewing the profile. This may include the user's name, gender, and geographic area. Public profiles are typically also open to direct messaging from anyone who finds the profile online.

The broad trend visible in Figure 5.17 is that almost half of 20-year-olds who held an account on a particular platform maintained a public user profile. There was a trend for a higher percentage of 20-year-old men to have a public profile on most of the main platforms than women, including Facebook (73% versus 43% women), Instagram (70% versus 40%), Twitter (79% versus 63%) and Snapchat (61% versus 35%).

Figure 5.18 indicates that young women tended to take more steps to restrict the visibility of their online profiles and did more to keep strangers at a distance than young men. Overall, though, a high percentage of Young Adults made a considerable amount of their online activity publicly accessible. When public profile existence was examined in the context of willingness to take risks, it was found that the most risk averse, i.e. those in the bottom third of risk-taking scores, were between 1.3 and 1.6 times less likely to share a public profile than the moderate or higher risk-taking groups. The moderate and higher risk-taking groups did not differ substantially from one another.

<sup>42</sup> It is possible to maintain several accounts on many platforms, an assumption is made here that a user holds one account per platform and it is either publicly visible or private.
43 Pinterest has a smaller male user count in the *Growing Up in Ireland* survey. This broadens the margin of error and makes any differences





# Figure 5.17 The proportion of 20-year-olds with a public profile among those with a specific social media account by gender

Note: Margins of error are shown in parentheses in the labels.

Figure 5.18 displays the percentages of 20-year-olds who indicated that they knew how to use platformspecific privacy settings where they had a user profile. Though an overall profile may be public, all major platforms have further privacy settings that enable the user to restrict the amount and kinds of information shown to others online. Over 90 per cent of all users said that they knew how to make use of privacy options on Facebook, Instagram, Snapchat and Twitter.

Although young men were more likely to have a public profile (Figure 5.17), Figure 5.18 demonstrates that there were no large gender differences evident in the knowledge of platform-specific privacy settings.



#### Figure 5.18 Privacy protection online by gender

Note: Margins of error are shown in parentheses in the labels.

Along with public profiles and security settings, the Young Adults were asked about other online safety behaviours such as 'tagging posts with their physical location', 'sharing information that they later regretted', 'controlling comments on their own profile' and 'controlling others' ability to tag and publicly identify them'. (Tags can include automated facial recognition, links to events such as birthdays, venues, workplaces etc and are available on platforms such as Facebook). Table 5.2 presents percentages of all 20-year-olds who said that they had engaged in these behaviours/activities on the online platforms they used.

Table 5.2	Online	safety	<b>behaviours</b>	of	all	20-year-	old
-----------	--------	--------	-------------------	----	-----	----------	-----

Торіс	Percentage of all 20-year-olds
Include location on posts (±1%)	44%
Post information later regretted (±1%)	26%
Delete comments on profile (±1%)	39%
Remove identifying photo tags (±1%)	51%

Note: Margins of error are shown in parentheses in the labels.

It can be seen that just under half of all 20-year-olds (44%) did include location information on posts they made, over a quarter (26%) had posted information they later regretted, almost four-in-ten (39%) had deleted comments that appeared on their profile and just over half (51%) had removed identifying information like tags that can appear on photos posted online.

Research on younger age groups such as EU Kids Online (Livingstone, Haddon, Görzig and Ólafsson 2011) and Global Kids online (UNICEF, 2019) suggests that spending a lot of additional time online is not typically related to deeper learning or understanding of technology. Figure 5.19 explores whether time spent on the internet was related to safer online behaviours. The percentages of participants answering yes to each online safety question are displayed broken down by their typical amount of time spent online. Users were classified as having 'low' (0-1 hour), 'moderate' (1-3 hours) or 'high' (3 hours +) online activity (condensing categories previously displayed in Figure 5.13).

When it comes to time being spent online, there is little evidence that spending a high amount of time online was associated with respondents behaving any more or less cautiously than their peers who spent a shorter amount of time on the internet. All groups tended to report similar behaviours related to online safety.



#### Figure 5.19 Online safety behaviours by typical time spent online

Note: Margins of error are shown in parentheses in the labels.



#### 5.6 SUMMARY

The friendship networks of most Young Adults expanded between the ages of 17 and 20, with 69 per cent of all 20-year-olds gaining friends over this period, and only a minority having fewer friends (26%). The overall number of friends reported at this age was high, with 58 per cent of all 20-year-olds reporting 11 or more friends.

Most 20-year-olds felt they could talk to someone about personal thoughts and feelings. Friends were identified as an important source of support, with 86 per cent of all 20-year-olds saying they would talk to friends about their thoughts and feelings. This was followed closely by the 20-year-old's mother, a romantic partner, other relatives (including siblings) or their father (where applicable). Friends and parents were also important sources of practical support and information for things such as 'problems with coursework' (mostly friends) or 'being short of cash' (mostly parents).

Gender differences were observed in leisure activities among Young Adults. Young men were more likely than young women to engage in active pursuits such as attending the gym (64% versus 57%), playing team sports (58% versus 24%) or individual sports (36% versus 23%). Young women were more likely to regularly go walking (68% versus 48%), to read (47% versus 37%) or play an instrument (31% versus 25%).

Overall, 65 per cent of Young Adults achieved the national recommended guidelines for physical activity. Young women were at increased risk of not reaching the physical activity guidelines, as were those from less socially advantaged households and those not in education, training or employment. Longitudinal analysis points towards a reduction in physical activity from adolescence into early adulthood, a worrying trend observed for both men and women.

Technology, especially the internet, was prominent in the lives of most 20-year-olds, for practical purposes as well as entertainment. On both weekdays and weekends, over half of *Growing Up in Ireland* 20-year-olds spent over three hours online, with over 20 per cent spending five hours or more online. More than half of 20-year-olds reported daily multi-screening activity (e.g. browsing the internet on one's phone while watching television). There were marked gender differences in some categories of online activity, with young men more likely than women to use it for gaming (68% men versus 16% women), betting (16% versus 3%), dating (30% versus 21%) and pornography (64% versus 13%).

Although social media use was almost universal, young men were much more likely to maintain a publicly searchable profile than women on social media. Although most 20-year-olds said they knew how to use basic security and privacy tools on offer within platforms, just over half of them took further steps to control information about themselves online such as removing identifying photo tags, deleting comments on their profiles or controlling location information. Over a quarter of 20-year-olds expressed regret about things they had posted online.



# Chapter 6

PHYSICAL AND SOCIO-EMOTIONAL WELL-BEING IN THE TRANSITION TO ADULTHOOD



## 6.1 INTRODUCTION

This chapter explores the physical and socio-emotional well-being of 20-year-olds. In terms of their physical health, this chapter considers the 20-year-olds' current general health, their experience of chronic illnesses, and levels of overweight and obesity. The aspects of socio-emotional well-being explored include life satisfaction, depression, coping mechanisms and sources of emotional support. In terms of experiences of risky behaviour, this chapter also reports on the 20-year-olds' experience of smoking, drinking alcohol, drug use, gambling and criminal behaviour.

Physical and socio-emotional well-being are central to positive development at all stages of life. The experience of poor physical and/or socio-emotional well-being at a younger age, while detrimental in its own right, can also have an adverse effect on many other future areas of life. For example, having a chronic illness can limit a person's educational performance and attainment if the illness causes them to be absent from school/college for a sustained period. The same chronic illness could limit a person's progress in the workplace. Trautman, Rehm and Wittchen (2016), outlined how the presence of depressive symptoms or other mental health issues can impinge on the quality of a person's life and relationships with family and friends along with other human capital costs such as loss of time at work and difficulties completing education and training.

Public Health England (2016) identified risky behaviours such as alcohol and drug abuse as having direct negative consequences in terms of both physical and mental well-being. Secondary consequences were also shown to include more frequent unwelcome interactions with police and the criminal justice system, which can lead to economic and social penalties such as fines, imprisonment, loss of employment and the stresses entailed with interacting with these systems.

# 6.1.1 THE IMPORTANCE OF GOOD PHYSICAL AND SOCIO-EMOTIONAL HEALTH AND WELL-BEING AT AGE 20

At 20 years of age, this cohort are at an important juncture in terms of their physical and socio-emotional health and well-being. As they navigate early adulthood, they continue to attain increased autonomy and, as a result, have more responsibility for their own health, even if the majority of 20-year-olds still live at home. Where once they may have been included on family health insurance schemes as an under-18 'child', continuing on a family policy might no longer be possible or may lead to increased premiums for the family (Keegan, 2020), so there is systematic pressure on the 20-year-old to manage their own finances and to plan for the future, challenges which may leave many 20-year-olds without adequate insurance and not in receipt of preventative healthcare (Connolly and Wren, 2017).

They may be in a new environment, having entered post-secondary education or the workforce, and while this presents many opportunities for personal growth and the expansion of social circles, friendships and romantic relationships, there are also new challenges. They will have increased exposure to, and opportunity for, risky behaviours including smoking, drug and alcohol use. Along with risks of developing problematic patterns of drug/alcohol consumption, the transition into a new work or academic environment may lead to increased risk of socio-emotional difficulties due to stress or perceived isolation.

There may also be significant changes to the traditional support structures that the 20-year-old relies on in terms of discussing and dealing with issues that may arise in the move towards living as an independent adult. Where once parents were the primary source of support for any difficulties experienced as a child, the young adult may now increasingly rely on friends, partners, or may choose to deal with important physical or socio-emotional issues by themselves. There are also choices to be made around expanding social circles in the world of work and maintaining looser social networks based around post-secondary educational settings. Around this age there tends to be a significant increase in the prevalence of socio-emotional and mental health issues; it is estimated that three-quarters of all adult mental health disorders are first experienced before age 25 (Kessler et al., 2007).



#### 6.1.2 KEY HEALTH AND WELL-BEING TOPICS COVERED IN THIS CHAPTER

Through a combination of face-to-face interviews and physical measurements, *Growing Up in Ireland* aims to establish a broad understanding of the overall physical and socio-emotional well-being of the study participants at each wave of the study. This chapter explores a selection of the key elements of the 20-year-olds' well-being gathered at the current wave, split broadly into three topics: physical health, socio-emotional well-being, and experience of risky behaviours. In terms of their physical health, this chapter provides an overview of the key issues of the 20-year-olds' current general health, their experience of chronic illnesses, and levels of overweight and obesity. The aspects of socio-emotional well-being examined include life satisfaction, depression, coping mechanisms and sources of support. In terms of risky behaviour, this chapter reports on the 20-year-olds' experience of smoking, drinking alcohol, drug use, gambling and criminal behaviour as well as longitudinal developments in these experiences.

#### 6.1.3 TRENDS IN HEALTH AND WELL-BEING FOR THIS COHORT AND IN EARLY ADULTHOOD

In previous waves, the participants of Cohort '98 (or their parents on their behalf) have reported broadly positive health. At age 17/18 years, almost 80 per cent of Cohort '98 reported having *excellent* or *very good* health, while 13 per cent had an ongoing illness, condition or disease – the most common being behavioural or respiratory conditions. Levels of overweight and obesity were 20 per cent and 8 per cent, respectively. Some gender differences were seen, and strong socio-economic gradients were observed too: those in the lower socio-economic groups were at increased risk of negative health outcomes.

At the most recent wave of the study, when participants were 17/18 years of age, 20 per cent of young people reported that they were either regular (8%) or occasional smokers (12%). At the same age, 90 per cent of young people had consumed alcohol at some stage; more boys than girls were classified as high-risk or very high-risk drinkers (6% versus 4%). In terms of drugs, 30 per cent of 17/18-year-olds had ever tried cannabis, while 4 per cent had tried ecstasy and 4 per cent had tried cocaine.

In terms of socio-emotional well-being at 17/18 years, most young people reported being highly satisfied with their lives (with a median score of 8 out of 10). Using the Short Moods and Feelings Questionnaire, 20 per cent of 17/18-year-olds recorded a score that put them in the 'likely to be depressed' category (an indicator, not a diagnosis). There was an increased risk for young women and those who had experienced depressive symptoms at age 13. Men and women had different strategies for coping with difficulties at 17/18 years, with women about twice as likely to use support-seeking and avoidance. No gender differences were observed in terms of problem-solving as a coping strategy.

The annual Healthy Ireland survey reports on similar outcomes (Department of Health, 2019). According to their most recent survey, 93 per cent of younger adults (aged 15-24 years) had good or very good health, 12 per cent of them had asthma, 5 per cent reported having depression or anxiety, and levels of overweight and obesity were 19 per cent and 9 per cent, respectively. The higher rates of chronic illness and obesity (compared to *Growing Up in Ireland*) can both be partly explained by the older age profile of the Healthy Ireland cohort (ages 15-24 years), since the prevalence of chronic illness and obesity are both increasing with age.

## 6.2 PHYSICAL HEALTH AND OBESITY

#### 6.2.1 GENERAL HEALTH AND CHRONIC ILLNESS

Self-reported general health status provides a good indication of a person's overall well-being. Despite the general nature of the question ('In general, how would you say your current health is?'), it has been found to be a strong predictor of mortality (Idler & Benyamini, 1997). Highlighting the presence of ongoing longstanding conditions is another important indicator of overall health as they can substantially impact

upon a person's physical and mental development in both the short-term and long-term. Chronic illness can impinge upon academic performance and progress in the workplace in terms of absenteeism and lower academic achievement, with potential broader repercussions continuing throughout adulthood (Forrest, Bevans, Riley, Crespo & Louis, 2011). Chronic illness or conditions can also have a more widespread negative impact on the functioning and quality of life of other members of the Young Adult's family (Miller, Coffield, Leroy & Wallin, 2016).

Similar to previous waves of the study, all 20-year-olds were asked about their current health, with the answer categories ranging from *poor* to *excellent*. They were also asked whether they had 'any on-going chronic physical or mental health problem, illness or disability' and if so, whether it had been diagnosed by a medical professional and the extent to which it hampered them in their daily activities.

#### 6.2.1.1 General health

Almost three-quarters of all 20-year-olds reported having *excellent* (27%) or *very good* health (47%), 20 per cent reported their health as *good*, 5 per cent said their health was *fair* and 1 per cent described their health as *poor*. By way of comparison, 84 per cent of all respondents in the most recent Healthy Ireland survey (Department of Health, 2019) reported their health as good or very good, rising to 93 per cent for those aged 15-24 years (compared to 94% of 20-year-olds in *Growing Up in Ireland* who rated their health as 'good' or better).



Figure 6.1 Socio-demographic differences in those 20-year-olds self-reporting their current health as 'excellent' or 'very good'

Note: Margins of error are shown in parentheses in the labels.

Socio-economic disparities in current general health were observed in the current cohort; those 20-yearolds from the highest income quintile families were more likely than those from the lowest income families to report their health as *excellent* or *very good* (80% versus 67%; Figure 6.1). Similar trends were observed according to social class (80% for 'professional' versus 69% for 'lower/never worked'). Socio-economic disparities in health are well established in the literature (see, for example, Marmot, 2005; Farrell, McAvoy, Wilde and Combat Poverty Agency (2008); and previous waves of *Growing Up in Ireland*, Williams et al., 2009; 2018) so the differences observed in this cohort are to be expected. Smaller differences were observed according to gender; men were more likely than women to report their health as *excellent* or *very good* (76% versus 73%).

Focussing on those who reported their health as *fair* or *poor* (6% overall), differences were observed according to self-reported financial stress. Those 20-year-olds who were having difficulty making ends meet



were more likely to be in this group than those who were getting by easily (9% versus 5%, not illustrated).

Looking at trends in general health over time, overall, 62 per cent of young people were in either of the top two categories for general health at all four waves of the study to date; that is, 'very healthy, no problems' or 'healthy, but a few minor problems' as reported by a parent at ages 9 and 13, or 'excellent' or 'very good' as self-reported at ages 17/18 and 20. Again, significant socio-economic disparity was observed; those from the highest income families were more likely to have good health at every wave of the study than those from the lowest income families (71% versus 51%; Figure 6.2). Differences were also observed according to gender (64% for men versus 60% for women) and family type (52% for one-parent families versus 65% for two-parent families).



Figure 6.2 Percentage of Young People in the top two healthiest general health categories at all waves of the study, according to key background variables

Notes: Margins of error are shown in parentheses in the labels. The Parent reported on their child's general health using a four-point Likert scale at Waves 1 and 2. The Young Adult self-reported on general health using a five-point Likert scale at Waves 3 and 4.

6.2.1.2 Longstanding conditions

Sixteen per cent of all 20-year-olds reported having a longstanding condition or illness; these conditions were coded according to the International Classification of Diseases (ICD-11), the global standard for coding health information. The most commonly reported health issues were *mental*, *behavioural or neurodevelopmental disorders* (7%), *respiratory* issues (2.3%) or *musculoskeletal* issues (1.4%). Less commonly reported were disorders of the *nervous system* and of the *digestive system*. Healthy Ireland survey respondents (aged between 15-24) also provided information on this topic; 32 per cent of the Healthy Ireland survey sample compared to the 16 per cent from *Growing Up in Ireland* had any longstanding illness, with asthma the most common amongst younger adults, followed by depression or anxiety (Department of Health, 2019.).

According to the ICD-11, mental, behavioural or neurodevelopmental disorders are 'characterised by clinically significant disturbance in an individual's cognition, emotional regulation, or behaviour that reflects a dysfunction in the psychological, biological, or developmental processes that underlie mental and behavioural functioning',<sup>44</sup> and include a wide range of disorders such as anxiety, stress, depression, autism, ADHD and eating disorders. More women than men reported such mental, behavioural or neurodevelopmental disorders (8% versus 5%; Figure 6.3), as did those from one-parent families compared to those from two-parent families (10% versus 6%). More pronounced disparity was observed according to the 20-year-old's principal economic status (6-7% for those in education, training or employment versus 14% for those not) and their experience of financial stress (6% for those getting by easily versus 11% for those not getting by easily).





Note: Margins of error are shown in parentheses in the labels.

The prevalence of the two most common longstanding conditions across all four waves of the study, *respiratory* disorders and *mental, behavioural or neurodevelopmental* disorders, is displayed in Figure 6.4, along with the percentage of young people who had any longstanding condition. The overall prevalence of any disorder increased from 11 per cent at ages 9 and 13, to 14 per cent at age 17/18, increasing further to 16 per cent at age 20. The prevalence of respiratory disorders (primarily asthma) reduced over time, from 5 per cent at age 9 to 2.3 per cent at age 20. The prevalence of mental, behavioural or neurodevelopmental disorders showed a more pronounced trend, and in the opposite direction, increasing from age 9 (2%) to age 20 (7%). The latter trend may in part be explained by the later age of onset (and diagnosis) of mental disorders (Kessler et al., 2005; 2007). This is discussed in more detail in Section 6.4.3.



Figure 6.4 Prevalence of the most common chronic issues at all four waves of the study

Note: Margins of error are, at most, ±1%



#### 6.2.2 WEIGHT STATUS

Weight status is a key component of overall health and well-being throughout the life-course. Overweight and obesity are associated with a range of negative health outcomes, both physical and mental; an unhealthy weight status can lead to increased risk of cardiovascular disease, some cancers, Type 2 diabetes and depression, amongst many other negative health outcomes (Dixon, 2010; McElroy et al., 2004). The risk of poor health increases sharply with increasing BMI. Added to this, research has shown that weight status can track from adolescence into adulthood, suggesting that overweight/obesity in adolescence and early adulthood leads to increased risk of overweight/obesity later in life (Starc & Strel, 2011; Wright et al., 2010).

Given the importance of maintaining a healthy weight, many policies and initiatives have been developed to tackle overweight and obesity. The first goal of the *Healthy Ireland Framework* is to increase the proportion of people who are healthy at all stages of life, and the report specifically cites weight status as a key indicator of health (Department of Health, 2013). The national obesity policy and action plan *A Healthy Weight for Ireland, the National Obesity Policy and Action Plan* has described the issue of increasing overweight and obesity as one of the biggest burdens facing modern Ireland and outlines a number of cross-sectoral steps to reduce levels of overweight and obesity for all ages nationwide. *Get Ireland Active, the national physical activity plan for Ireland*, is another multi-sectoral plan to tackle poor health behaviours with a view to combatting associated health risks, including overweight and obesity risk.

According to the most recent Healthy Ireland survey (Department of Health, 2019), 19 per cent of 15-24-year-olds (the most comparable group) were overweight (20% of men, 18% of women) and 9 per cent were obese (6% of men, 11% of women). Nine per cent of men were classified as underweight (BMI < 18.5), compared to 6 per cent of women. An unhealthy weight status was linked to other health behaviours, including physical activity, smoking and sleep. The study reported a strong association between weight status and age, with overweight/obesity increasing with age; as the Healthy Ireland study is based on an older group than Cohort '98 of *Growing Up in Ireland*, problems with overweight/obesity are likely to be reported as worse in Healthy Ireland, with *Growing Up in Ireland* uniquely able to provide a comprehensive longitudinal profile of the participants' weight status.

Body weight and body mass index (BMI) have been measured at all waves of *Growing Up in Ireland* to date, for the Young Adult (formerly the Study Child / Young Person) and (if possible) for both of their parents. Findings from the previous wave of the study for Cohort '98 (at 17/18 years) highlighted an association between parental obesity and increased risk of obesity for their children, as well as evidence of a degree of continuity in weight status from 9 years of age to 17/18 years of age.

#### 6.2.2.1 Method of measurement from weight status

At the current wave, all 20-year-olds had height and weight measurements recorded by a trained interviewer using medically approved equipment. Body mass index (BMI) was calculated using the standard formula of weight in kilogrammes divided by height in metres squared (kg/m<sup>2</sup>). Internationally recognised BMI cut-offs, developed by the World Health Organization, were subsequently applied with a view to defining participants as either *underweight*, *normal weight*, *overweight* or *obese* (Table 6.1; WHO, 1995). Further information regarding the methodology employed for physical measurements is contained in the associated design report (McNamara et al., 2021).

BMI Status Classification	BMI (kg/m2)
Underweight	< 18.5
Normal weight	18.5 – 24.99
Overweight	25.0 – 29.99
Obese	≥30

#### Table 6.1 World Health Organization's BMI cut-offs for classification of BMI Status for Adults

#### 6.2.2.2 Results

Overall levels of overweight and obesity amongst 20-year-olds were 24 per cent and 13 per cent, respectively. Fifty-nine per cent of 20-year-olds were considered a normal weight and the remaining 4 per cent were underweight.<sup>45</sup>

Figure 6.5 presents levels of overweight and obesity in the cohort according to key background characteristics: gender, parental education, and family income. While levels of overweight were similar for men and women (24%), significantly more women than men were classified as obese (16% versus 10%). Differences in obesity levels according to gender are expected, with similar differences reported for this age-group at previous waves of this study, in the Healthy Ireland survey, and in much international research.



Figure 6.5 Prevalence of overweight and obesity amongst 20-year-olds, according to key background characteristics

Note: Margins of error are shown in parentheses in the labels.

Differences in levels of obesity were also observed according to parental education: 20-year-olds whose parents had a lower second-level education or less reported significantly higher obesity levels than those whose parents had a degree or more (18% versus 7%). Significant differences were also observed according to family income; those from the lowest income families had higher levels of obesity than those from the highest income families (15% versus 9%). The prevalence of obesity (13% overall) was higher amongst Young Adults who were in employment than for those in education or training (18% versus 11%; not illustrated).

As at previous waves of the study, BMI status for the responding parent was also recorded at the current wave of the study; overall, 36 per cent of parents were non-overweight (normal or underweight), 35 per cent were overweight and 29 per cent were obese. An association between Young Adult BMI status and that of their parents can be observed. Amongst 20-year-olds whose parent was non-overweight, levels of overweight and obesity were 19 per cent and 7 per cent, respectively (Table 6.2). Those figures rose to 26 per cent and 12 per cent if the Young Adult's parent was overweight and rose further still (30% overweight and 20% obese) if the parent was obese.

<sup>45</sup> Further research could usefully explore the factors associated with being underweight. Due to its prominence as a public health policy issue (as well as its prevalence in the young adult population), the remainder of this section focuses on overweight and obesity.



Table 612 20 year of a 5 bin status according to parental bin status					
	20-Year-Old's BMI Status				
	Non-overweight	Overweight	Obese		
If parent non-overweight (36%):	74%	19%	7%		
If parent overweight (35%):	62%	26%	12%		
If parent obese (29%):	51%	30%	20%		
All 20-year-olds:	63%	24%	13%		

#### Table 6.2 20-year-old's BMI status according to parental BMI status

The association between child and parent overweight/obesity is well-established in previous research in this area; a recent systematic review by Wang and associates reported similar associations in 21 of 32 studies (Wang, Min, Khuri & Li, 2017). One possible explanation for the link between parent and child obesity risk is that the combined influence of shared socio-demographic and environmental conditions, along with shared social and physical environments, can lead to the parent and child having similar behavioural lifestyle traits (in terms of diet, physical activity and sedentary behaviour; all important predictors of obesity). This explanation may still apply even when the child has entered Young Adulthood, particularly if they are still living in the family home, but potentially also after they move out, if behavioural traits are well-established and if they are still exposed to similar socio-demographic and environmental conditions. A relationship between the weight status of parents and their adult offspring may include a genetic component but it is not currently possible to explore this using *Growing Up in Ireland* data.

Figure 6.6 displays changes in BMI status for study participants across all four waves of the study to date. While levels of overweight remained steady at 20 per cent at ages 9, 13 and 17/18 years, they rose significantly to 24 per cent at age 20. Obesity levels were similarly steady from ages 9 to 17/18 years (fluctuating between 6-7%) but rose sharply from 7 per cent at age 17/18 to 13 per cent at age 20. Combined levels of overweight and obesity increased more, overall and relatively, for women (from 29% at 17/18 years to 40% at 20 years) than for men (from 25% to 34%).

The well-established trend for obesity risk to increase with age is thus replicated by the evidence across all four waves of the *Growing Up in Ireland* study. Examples are also evident in other Irish studies. For example, looking at the Healthy Ireland survey (Department of Health, 2019), while 19 per cent of all 15-24-year-olds were overweight and 9 per cent were obese, these figures were significantly higher when older adults were included in the analysis; 37 per cent of all adults were classified as overweight and 23 per cent were classified as obese.





Encouragingly, more than half of all 20-year-olds (52%) were classified as non-overweight at all four waves of the study. Worryingly, however, 11 per cent were classified as either overweight or obese at all waves of the study (Figure 6.7). The remainder of Young Adults were split up as follows: 18 per cent were non-overweight at age 9 but overweight or obese at age 20 years; 7 per cent were initially overweight or obese but non-overweight at age 20; and the remaining 12 per cent fluctuated between non-overweight, overweight and obese from ages 9 to 20.





Note: Margins of error are shown in parentheses in the labels.

Focussing on the most concerning category, the 11 per cent of 20-year-olds who were overweight or obese at this and all previous waves of the study (from ages 9 to 20 years), differences were observed according to key background characteristics. In keeping with overall trends for overweight and obesity risk, more women than men were overweight or obese at all waves of the study (13% versus 9%), as were those from families with lower versus higher parental income (17% versus 7%) and those from the lowest versus highest family social classes (13% versus 5%). Efforts to combat obesity risk and to promote obesity-prevention interventions and policies should focus on these at-risk subgroups as well as studying protective behaviours in these sub-groups, such as the 50 per cent of non-overweight 20-year-olds in homes where a parent is obese.

## 6.3 RISKY HEALTH-RELATED BEHAVIOURS

#### 6.3.1 SMOKING

Although the health risks of smoking are widely published and extensive efforts have been made to encourage smoking cessation, it remains one of the main causes of ill-health and premature death worldwide (and the main *preventable* cause; CDC, 2014). Smoking can cause coronary heart disease, stroke, cancers (particularly lung cancer), pulmonary disease, respiratory diseases, and miscarriage (ibid.). Even so, according to the most recent Healthy Ireland survey (Department of Health, 2019), 17 per cent of all adults in Ireland smoke either daily (14%) or occasionally (3%); this represents a reduction from 23 per cent in the 2015 Healthy Ireland survey. More men than women smoked (19% versus 16%), while strong socio-economic differences were also observed; 40 per cent of those classified as unemployed smoked, compared to 18 per cent for those in employment, and 11 per cent for those with a degree-level



education. E-cigarette usage was also recorded in the Healthy Ireland survey; usage had increased from 3 per cent in 2015 to 5 per cent in 2019.

At 17/18 years of age, 8 per cent of the Young People from this cohort reported smoking daily and 12 per cent smoked occasionally, while 4 per cent reported that they used to smoke, 21 per cent reported ever smoking once or twice and 51 per cent said they never smoked. Smoking either daily or occasionally was more common among those in the lowest income quintile (25%).

#### 6.3.1.1 Results

For this wave of the study, participants were asked if they had ever smoked, what age they were when they first smoked, their current status (*daily smoker, occasional smoker*, etc.), efforts to give up smoking and their main reason for smoking. They were also asked if they had ever tried an e-cigarette/vape and whether they currently used one.

Almost three-quarters (74%) of all 20-year-olds had ever smoked a cigarette. On average, they were 16 years old when they tried their first cigarette. Regarding their current smoking status, 15 per cent of 20-year-olds smoked daily and 23 per cent smoked occasionally (Figure 6.8). On average, daily smokers smoked ten cigarettes per day, while self-reported occasional smokers smoked five cigarettes per week.





Note: Margins of error are, at most, ±1%.

Young Adults who currently, or had previously, smoked were asked 'what would you say is your most important reason for smoking?' and asked to choose from a specified list. The most commonly reported answers were 'because my friends smoke' (25%), 'I enjoy it' (21%) and 'it helps me cope with stress' (18%).

Looking in more detail at those 20-year-olds who reported themselves as daily smokers (Figure 6.9), no significant difference was observed according to gender; 15 per cent of men smoked daily compared to 14 per cent of women. However, differences were observed in terms of family background characteristics. Young Adults from families with the lowest parental educational level were significantly more likely to report smoking daily (21% versus 11% with the highest parental educational level), as were those from families in the lowest social class compared to those in the highest (21% versus 7%).

Previous research supports the finding that socio-economic status, in terms of income, education, employment or class status, is strongly associated with the likelihood of smoking. Further, this relationship contributes substantially to the social class gradient observed in many health outcomes, including premature mortality (Bobak et al., 2000).





Note: Margins of error are shown in parentheses in the labels.

Looking at the influence of previous smoking status, Figure 6.10 displays current smoking status in terms of whether the Young Adult said that they already smoked when interviewed at age 13 and 17/18 years. Overall, 23 per cent of 20-year-olds smoked occasionally, and 15 per cent smoked daily. Smoking daily rose to 24 per cent if they had smoked at 17/18 years (but not at 13 years) and rose further to 42 per cent if they had smoked at 13 years old; that is, more than two-fifths of those young people who said they smoked by age 13 were daily smokers by age 20. Put another way, the likelihood of being a daily smoker at age 20 increased almost three-fold if the study participant had smoked by age 13. Further, almost 60 per cent of those young people who said they had ever smoked at a previous wave of the study (i.e. by age 13 or by age 17/18) were either occasional or daily smokers by age 20.

Also represented in Figure 6.10 are those who reported that they used to smoke but not now. Overall, 7 per cent of 20-year-olds fell into this category, but the figure was higher if they said they had smoked by age 17/18 (12%) and higher still if they said they had smoked by age 13 (15%). This group may be of particular interest from a policy perspective, as they represent those young people who somehow managed to stop smoking by age 20.





#### Figure 6.10 Smoking status at age 20 according to smoking status at ages 13 and 17/18 years

Note: Margins of error are shown in parentheses in the labels.

Overall, the longitudinal data on smoking present a very clear policy message that a large proportion of adult smoking behaviour begins in the early teens, requiring smoking prevention measures to target younger children. Similarly, future analyses of GUI data could provide information on those who ceased smoking or whose habits have fluctuated over time to highlight risk and protective factors in adult smoking habits.

#### 6.3.2 ALCOHOL

The negative effects of alcohol consumption are well established and wide-ranging. Alcohol can affect physical health, in terms of increased risk of cancer, heart disease, liver disease, weight gain, and increased risk of accident/injury (WHO, 2018). The potential impacts of alcohol on mental health include anxiety and depression (Boden & Fergusson, 2011).

The importance of combatting all of these negative effects of alcohol consumption is reflected in the Public Health Alcohol Act 2018,<sup>46</sup> the main objectives of which include reducing the average amount of alcohol consumed by Irish people, delaying the age at which young people start drinking, and reducing the harms caused by misuse of alcohol.

At age 17/18 years, 90 per cent of young people had already consumed alcohol. Using the Alcohol Use Disorders Identification Test (AUDIT) screening tool, 31 per cent reported drinking behaviour that would be classified as risky/hazardous, 3 per cent would be classified as high-risk or harmful and 2 per cent would be classified as very high-risk or possibly alcohol dependent.

#### 6.3.2.1 Results

At age 20, participants were asked an expanded array of questions on their use of alcohol. The analysis in this section focuses on patterns related to consumption, based on the AUDIT screening tool. They were also asked about efforts to reduce their alcohol consumption and reasons for drinking alcohol. The ten AUDIT questions were used to calculate a total AUDIT score, through which those 20-year-olds with hazardous or harmful drinking patterns could be identified (Babor, Higgins-Biddle, Saunders & Monteiro, 2001).

The vast majority of Young Adults (96%) had consumed alcohol by the age of 20, increasing from 90 per cent at age 17/18. The average age for having their first full alcoholic drink was 16. Amongst those 20-year-olds who had ever drank alcohol, 22 per cent drank monthly, 49 per cent drank two to four times per month, 22 per cent drank two to three times per week, 3 per cent drank 4+ times per week and just 3 per cent never drank.

Figure 6.11 focuses on those 20-year-olds who reported consuming alcohol most frequently, i.e. two times or more per week. This represents 25 per cent of all 20-year-olds, but significantly more men than women, 29 per cent versus 21 per cent. Significant differences were also observed according to parental education: 18 per cent of those 20-year-olds whose parents had the lowest education level consumed alcohol more than once per week, significantly less than the 32 per cent of 20-year-olds whose parents had the highest education level. There were similar trends by family income: frequent drinking was more common amongst Young Adults from the highest income families compared to those from the lowest income families (32% versus 19%).

One possible explanation for this association is that it represents something of an indirect effect. It is widely reported that adults with a higher socio-economic status (SES) drink as much or more than those with a lower socio-economic status, even though the latter group are disproportionally affected by poor drinking habits (Collins, 2016). Therefore, the drinking habits of high-SES 20-year-olds might be primarily influenced by their parents' drinking behaviour and attitudes to alcohol (Murphy, O'Sullivan, O'Donovan, Hope & Dvoren, 2016; Olson and Crosnoe, 2018).



# Figure 6.11 Percentage of 20-year-olds who reported drinking alcohol twice or more per week, according to key background characteristics

Note: Margins of error are shown in parentheses in the labels.

The AUDIT screening tool was used to categorise young people based on the riskiness of their drinking behaviour. A little over two-fifths (43%) of all 20-year-olds who had ever had an alcohol drink reported drinking behaviour that could be described as 'low risk', and 46 per cent had drinking behaviour that could be described as 'low risk', and 46 per cent had drinking behaviour that could be described as 'low risk', and 46 per cent had drinking behaviour that could be described as 'risky or hazardous'. A further 7 per cent reported drinking in the 'high risk or harmful' category, while a final 4 per cent could be described as 'very high risk (or possible alcohol dependence)'. This represents an increase in high and very high risk drinking behaviour when compared to the findings at age 17/18 (above).



Focussing on the 11 per cent of all 20-year-olds in the top two most concerning categories for drinking behaviour (that is, *high risk* and *very high risk*), similar trends were observed according to background characteristics as seen for frequent drinking; significant differences according to both gender and social class (Figure 6.12). Men were more likely than women to be in the top two risk categories (12% versus 9%), as were those in higher parental education families (14% versus 9%) and those in the highest household social class (16% versus 8%).





Note: Margins of error are shown in parentheses in the labels.

Previous drinking behaviour (as recorded at previous waves of the study when participants were 13 and 17/18 years) was shown to be associated with drinking behaviour at age 20. Overall levels of *high risk* and *very high-risk* drinking behaviour at age 20 were 7 per cent and 4 per cent each. However, these figures increased to 10 per cent and 7 per cent, respectively, if the Young Adult had reported having consumed alcohol when they were age 13. These figures increased substantially (20% *high risk* and 21% *very high risk*) if the 20-year-old's drinking behaviour was recorded as being *risky, high risk*, or *very high risk* when they were previously interviewed at age 17/18 (Figure 6.13). These findings, along with those regarding the influence of previous smoking on current smoking status, point to the need for early intervention (potentially at or before 13 years) to address these risk behaviours.



#### Figure 6.13 AUDIT category based on drinking habits at ages 13 and 17/18 years

Note: Margins of error are shown in parentheses in the labels.

Further research on the interactions between alcohol consumption habits, socio-economic status and harmful physical and social consequences of risky alcohol intake is needed to understand the complex interactions between these variables.

#### 6.3.3 DRUG USE

The use of illicit drugs (and prescription drugs for recreational purposes) can have a range of negative effects. It can impact upon both physical health and mental well-being (European Monitoring Centre for Drugs and Drug Addiction, 2017), and increase the risk of having negative interactions with Gardaí and the judicial system (Odgers et al., 2008). Ireland's national drug strategy is outlined in *Reducing Harm, Supporting Recovery: A Health-led Response to Drug and Alcohol Use in Ireland 2017-2025* (Department of Health, 2017); the key goals of the strategy include minimising the harms caused by the use/misuse of substances and promoting and protecting health and well-being by preventing use and developing interventions.

A range of questions on drug use were asked of participants at age 20, although the following analyses focus primarily on cannabis use. According to the 2018 Ireland Drug Report from the European Monitoring Centre for Drugs and Drug Addiction, 16 per cent of 15-24-year-olds had used cannabis in the last year, 7 per cent had used MDMA and 3 per cent had used cocaine. When asked about their experiences of drug use at age 17/18, 30 per cent of the *Growing Up in Ireland* study participants responded that they had ever tried cannabis, 8 per cent took cannabis occasionally and 2 per cent took cannabis more than once per week.

#### 6.3.3.1 Results

Figure 6.14 shows the most prevalent illicit drugs amongst 20-year-olds. Cannabis was by far the most prevalent drug, with 59 per cent of all 20-year-olds stating that they ever tried it. More than one-quarter (28%) of all 20-year-olds said they had ever tried other non-prescribed drugs, the most commonly reported was cocaine (22% of all 20-year-olds had tried it at least once), ecstasy (17%) and ketamine (12%).





#### Figure 6.14 Illicit drug use (at least once) by 20-year-olds

Note: Margins of error are shown in parentheses in the labels.

Focussing on cannabis use in more detail (Figure 6.15), almost a quarter took cannabis at least occasionally: 18 per cent *occasionally* and 6 per cent *more than once per week*. Differences in the percentage of Young Adults taking cannabis occasionally or more often were observed in terms of both gender and parental education: a greater proportion of men took cannabis regularly (29% versus 18% of women), as did a greater proportion of 20-year-olds whose parents had higher levels of education (degree or more, 28%, versus lower second level or less, 19%).



Figure 6.15 Percentage of 20-year-olds who took cannabis occasionally or more than once per week, according to key background characteristics

Note: Margins of error are shown in parentheses in the labels.

Prior experience with drugs was found to be related to current cannabis use. Young adults who had already tried cannabis by age 17/18 were more likely to be current cannabis users at age 20. They were more than twice as likely – compared to those who had not used by age 17/18 – to now be occasional users (34% versus 12%) and many times more likely to use more than once a week (16% versus 1%; all Figure 6.16). As with alcohol use and smoking, these findings highlight the need for early intervention.





Note: Margins of error are, at most, ±2%.

Note: The blue and green groups consider only their respective categories when calculating percentages. E.g. Blue is comprised of the roughly 30% who had tried cannabis by the age of 17/18. Green is a breakdown of the reported activities of the remaining 70% at 20 years of age.

## 6.4 SOCIO-EMOTIONAL WELL-BEING, INCLUDING LIFE SATISFACTION, STRESS AND DEPRESSION

This section provides an overview of psychological well-being. There is a wealth of indicators available in the dataset for Cohort '98 at age 20 and the following analyses focus on three negative aspects – stress, depressive symptoms and aggressive tendencies, and two positive aspects – life satisfaction and coping strategies. The related topic of 'basic needs satisfaction' is discussed in Chapter 2 as part of the transition to adulthood.

#### 6.4.1 LIFE SATISFACTION

In contrast to the emotional experience of happiness, a rating of one's life satisfaction reflects the individual's perception of the positivity or otherwise of their situation or how close they are to their ideal state of well-being. It is linked to the notion of 'positive psychology' (e.g. Vela, Lerma & Ikonomopoulos, 2017). Proctor, Linley and Maltby (2009) summarise research on the correlates of higher levels of life satisfaction among youth as: a healthy lifestyle; participation in activities; good relationships with parents and peers; social support; living in a nice physical environment; and avoidance of antisocial behaviour and substance abuse.

Positive life satisfaction is an important source of resilience in dealing with stressful life events (Suldo & Huebner, 2004), while very low levels of life satisfaction are correlated with poorer mental health, especially depression (Suldo & Huebner, 2006). In a large representative study of Croatian youth (n = 2,823, mean age 16.9), life satisfaction was greater among youth who reported higher levels of family economic



status and amongst men – with the latter apparently explained by higher self-esteem (Raboteg-Šari , Brajša-Žganec & Šakic, 2009). Family cohesion and parental support were also significant predictors of life satisfaction in that particular study.

Life satisfaction scores among the *Growing Up in Ireland* Cohort '98 were examined cross-sectionally and longitudinally in order to explore the influence of life satisfaction on other socio-emotional and mental health outcomes.

#### 6.4.1.1 Measurement of life satisfaction

**Growing Up in Ireland** did not include a specific life satisfaction rating question at 9 or 13 years. However, a multi-dimensional self-concept measure, the Piers-Harris Self-Concept scale, was included that contained a well validated happiness and satisfaction subscale. This subscale contained questions such as: '*I am a happy person.*' and '*I am cheerful.*' This scale is described in detail in *The Lives of 9-Year-Olds* (Williams et al. 2009). The Piers-Harris Self-Concept scale (Piers, Harris & Herzberg, 2002) was self-completed by the Study Child and scores were grouped into pre-specified categories ranging from 'very low' to 'above average'.

At 9 years of age, children from lower social class backgrounds reported somewhat lower scores for that aspect of self-concept but there was no significant gender difference, (Williams et al., 2009). By 13 years, however, girls reported significantly less positive scores on this happiness and satisfaction self-concept measure than boys (Williams et al., 2018); but social class trends were no longer evident.

Later, as 17/18-year-olds, they were asked to rate how satisfied they were with their lives generally, using a single question item with a ten-point scale ranging from 0: *Extremely unsatisfied* to 10: *Extremely satisfied*. This question was repeated at 20 years of age.

#### 6.4.1.2 Results

The median rating for the satisfaction with life item was 7 out of 10, with 75 per cent of participants giving a score of 6 or higher. A little over 16 per cent also gave a score of 8 or higher, indicating generally quite high levels of life satisfaction. However, this score is slightly lower than ratings on the same item when the Young Adults were aged 17/18 years. At that time, the median rating for the group of young people interviewed in both waves was 8 out of 10.

Exploring longitudinal consistency in life satisfaction from nine years to 20 years was carried out using a Pearson correlation between the Piers-Harris happiness and satisfaction subscales at Waves 1 and 2, and the single-item Life Satisfaction measure at Waves 3 and 4. Table 6.3 shows that correlations between early life satisfaction at nine years old and later life satisfaction were positive and statistically significant but weak. Life satisfaction at nine years showed a diminishing relationship with later life satisfaction, with scores at Wave 1 having a near negligible relationship with life satisfaction at Wave 4 by 20 years. There are many potential reasons for this, primarily the change in measure after Wave 2, but changing perceptions due to maturation likely play a strong role in the diminishing relationship from Wave 1. Reported life satisfaction at 13 years remained positively but weakly associated with life satisfaction at 20 years.

	Pearson correlation	1	2	3	4
1	9 years Piers-Harris happiness and satisfaction	1	.192**	.113**	.069**
2	13 years Piers-Harris happiness and satisfaction		1	.204**	.185**
3	17 years life satisfaction			1	.320**
4	20 years life satisfaction				1

#### Table 6.3 Life satisfaction correlations from Waves 1-4

\*\*Significant at p < .001 level. N > 4,500 for all correlations

Life satisfaction at 17 years had a moderate, positive and statistically significant relationship with life satisfaction at 20 years, further demonstrating that there was quite high variability in life satisfaction between waves. Changes in *life satisfaction* ratings from 17/18 to 20 years were examined in detail, dividing Young Adults into three groups: those with stable ratings, those where life satisfaction had improved and those where ratings had declined. A quarter of Young Adults were found to maintain the same life satisfaction rating between the two waves with a mean score of 7.6 (SD = 1.4) reported at 20 years (Figure 6.17).





Note: Margins of error are (±1%) for all categories.

For another 28 per cent of participants, the changes in *life satisfaction* scores between Wave 3 and Wave 4 were positive, improving from a mean score of 5.5 (SD = 2.5) to a mean score of 7.8 (SD = 1.5) since the last wave. *Life satisfaction* ratings worsened for 47 per cent of participants. These scores changed from a mean of 7.2 (SD = 2.1) at 17/18 years to a mean of 7 (SD = 1.8). Despite the large number of participants reporting a decrease in *life satisfaction*, the average change for the whole group was very small, but for those whose scores did change, it was typically on the order of one to two points which is approximately the same as a standard deviation of a change. A change as large as the standard deviation is often a real world, noticeable difference in many situations, so the worsening *life satisfaction* is likely an indicator of real change in the life of many of the sample. However, a sizeable minority of respondents (40%) had reported very high scores of 9-10 points at 17/18 years (and so had no or limited scope to improve their ratings).



Exploring longitudinal changes in life satisfaction by other major demographic variables, such as gender, parental education, or financial stress, yielded non-significant differences across groups without any strong trends outside the margins of error for these variables so they are not discussed further here.

#### 6.4.2 STRESS

While people can experience mental health problems at any stage of their life, international literature suggests that the onset of mental health disorders peaks during adolescence and into early adulthood (Kessler et al., 2007). To illustrate this point, Kessler et al. (2005) used data from the US National Comorbidity Survey Replication to show that three-quarters of all lifetime cases of diagnosed DSM-IV disorders are evident by age 24 years, with the median age of diagnosis of anxiety or impulse control disorders occurring relatively early at 11 years, substance abuse disorders at 20 years and mood disorders at 30 years.

Findings indicate that 30 per cent of young adults in Ireland are above the 'normal' range for stress (Dooley & Fitzgerald, 2012). Stress affects individuals differently depending on their stage of brain development. Around age 20, particular brain regions (frontal cortex, amygdala, and hippocampus) are particularly vulnerable to the effects of stress (Lupien, McEwen, Gunnar & Heim, 2009). Higher stress levels are associated with increased alcohol consumption, negative self-esteem, and lower satisfaction with life (Dooley & Fitzgerald, 2012).

There are many potential sources of stress in a young adult's life such as their relationship status, health and coping styles. An important potential source of stress comes from the young adult's financial circumstances. Financial independence has been found to be one of the most important aspects for young adults' perceptions of their self-sufficiency, independence, and adult status (Arnett, 2000). Financial stress and relationship strain have been found to negatively impact on their mental health (Dooley & Fitzgerald, 2012; Holt et al., 2018). Arnett (2000) reasons that the high rates of residential change seen in this age group reflect the exploratory nature of this developmental period. Remaining or leaving the parental home has both positive and negative effects on the parental relationship, moderated by the autonomy the young person is afforded.

However, the relative insensitivity of life satisfaction to socio-economic circumstances is a finding worthy of future research in and of itself, as one of the main themes of this report is the reactivity of young adults to their current circumstances, as will be discussed in further sections on stress and depression below. Future research may use the longitudinal nature of *Growing Up in Ireland* to explore strong predictors of the variability in life satisfaction and could use life satisfaction variables as a predictor or correlate of other outcomes such as stress and depression in later life (Filus, Schwarz, Mylonas, Sam & Boski, 2018). Research from Mitchell and Lennox (2020) describes a lack of independence and sense of progress in life as a major source of stress for young adults – an aspect introduced in Chapter 2 and discussed further in Section 7.3.

#### 6.4.2.1 Measurement of stress

Stress at age 20 years of *Growing Up in Ireland* was measured using the DASS stress subscale. The DASS is a set of three self-report scales designed to measure the negative emotional states of depression, anxiety and stress. The DASS stress subscale contains seven items and is sensitive to levels of chronic non-specific arousal. It assesses difficulty relaxing, nervous arousal, and being easily upset/agitated, irritable/over-reactive and impatient (Henry & Crawford, 2005).

The survey at age 20 was the first time the Young Adults were asked specifically about stress symptoms. They were asked to think of 'over the past week' while self-completing questions such as 'I found it hard to wind down'. The DASS stress items are rated on a four-point scale, with responses of 'Did not apply to me at all', 'Applied to me to some degree', 'Applied to me a considerable degree' and 'Applied to me very much'. Scores are summed to give a total score for stress. Scores can also be categorised into 'Normal' (0-7), 'Mild' (8-9), 'Moderate' (10-14), 'Severe' (15-19), and 'Extremely severe' (20+).

#### 6.4.2.2 Results

Table 6.4

Table 6.4 demonstrates that average DASS stress score in the sample as a whole was 5.1 which is below the cut-off for 'Normal' scores (7 or less) (Henry & Crawford, 2005). The table also shows that young men, on average, reported lower mean stress levels than women (4.6 versus 5.7 respectively). A wide overall distribution of the scores is indicated by the high standard deviation values, with a similar level of variability across both genders: this means that while the averages were lower for men than women overall, there were still many men with high stress scores and many women with low scores.

	Mean (SD)	Achieved Range
Men	4.6 (4.23)	0-21
Women	5.7 (4.53)	0-21
Overall	5.1 (4.41)	0-21

Mean, standard deviation and range for DASS stress scores

Figure 6.18 presents DASS scores for men, women and all 20-year-olds categorised according to the scheme outlined above. As *Growing Up in Ireland* is a non-clinical sample, the overall number of participants in the extreme stress categories can be expected to be very small (Crawford and Henry, 2003). Therefore, the '*Extremely severe*' group has been combined with the '*Severe*' group to create a '*Severe/Extremely severe*' category (Scores of 15 or more on the DASS scale). In line with the means reported in Table 6.4, Figure 6.18 shows that 75 per cent of the sample overall were experiencing '*Normal*' levels of stress with fewer than 5 per cent of all participants in the '*Severe/Extremely severe*' category.



#### Figure 6.18 DASS stress categories by gender

Note: Margins of error are shown in parentheses in the labels.

Young women, however, were more likely to report experiencing an above-normal amount of stress than young men (29% versus 21% respectively).

Figure 6.19 explores the proportion of Young Adults experiencing moderate or higher levels of stress by family structure, financial stress and principal employment status. This analysis is designed to capture some observable effects of different living/working and lifestyle situations and does not capture the complexities of interactions between these factors.





#### Figure 6.19 Moderate to high DASS stress by demographic variables

Note: Margins of error are shown in parentheses in the labels.

Twenty-year-olds from one-parent families indicated moderate to high stress levels more often than those from two-parent families (21% versus 14%). A stronger association was observed for those in financial stress: 25 per cent of those who were having difficulty making ends meet reported moderate to high stress levels, compared to only 15 per cent of those who were making ends meet easily. Twenty-year-olds whose main activity was 'in education or training' were least likely to report experiencing higher stress levels (also Figure 6.18), with only 14 per cent displaying moderate to high levels of stress compared to 17 per cent for those who were in employment and 28 per cent of those in the economically inactive (NEET) group.<sup>47</sup>

#### 6.4.2.3 Stress and service utilisation

The Young Adults were asked a series of questions on service usage in the last 12 months. The list of questions asked how many times the Young Adult had 'seen or consulted, or talked on the phone with any of the following about your physical, emotional or mental health?' The list of contacts included 'general practitioner', 'practice nurse', 'dentist', 'psychologists counsellors etc' among a range of others.

A subset of service providers with direct responsibility for providing mental healthcare were selected for this analysis: 'general practitioner', 'psychologists counsellors etc' and 'psychiatrist'. A binary variable recording contact or not with these service providers was calculated. Limitations on this variable include not accounting for the amount of contact with each provider, and the data cannot differentiate between physical and mental healthcare.

Figure 6.20 explores service utilisation between 20-year-olds who reported low to mild stress levels on the DASS scale (84%) and those who reported moderate to high stress levels (16%). When all service provider care is considered, those reporting moderate to high stress levels were making use of 'any' health provider significantly more often than those who were reporting low to moderate stress levels (82% versus 75%). This pattern was repeated across all healthcare professionals, with slightly greater contact with general practitioners by those reporting higher stress levels than those who report normal stress levels (79% versus 74%). For more specialised psychological care, there was a much stronger differentiation with a Young Adult reporting higher stress almost three times more likely to have consulted a 'psychologist, counsellor

<sup>47</sup> The 'NEET' group is comprised of approximately 5 per cent of all participants, generating a wide margin of error for the comparison with other groups. Thus, the finding of elevated stress levels among those who are not in employment, education or training should be taken with caution, though it is consistent with findings in comparable groups in the United Kingdom (Pleasance, Balmer and Hagell, 2015) and in Australia (Warren, 2017).

etc' than a Young Adult reporting normal to moderate stress levels (2.8 times more likely, 31% versus 11%). Similarly, a Young Adult reporting high stress levels was four times more likely to have consulted a psychiatrist than a 20-year-old reporting low to moderate stress (4 times more likely, 12% versus 3%).

An important message of these findings is the potential for unmet needs of some Young Adults reporting high levels of stress. Though 82 per cent of these Young Adults did report seeing or consulting general practitioners, psychologists/counsellors or psychiatrists, the one-in-five (18%) of 20-year-olds reporting high levels of stress that did not report engaging with these nominated sources translates to about 3 per cent of the full *Growing Up in Ireland* sample.



Figure 6.20 Service utilisation among those reporting low to mild stress and those reporting moderate to high stress

Note: Margins of error are at most 1% for those in the lower stress group, and 3% for those in the higher stress group.

#### 6.4.3 DEPRESSIVE SYMPTOMS

Focussing directly on depression, Lee et al. (2018) conducted a meta-analysis of longitudinal cohort studies and showed that among 16 longitudinal datasets (of which five were based on a young adult cohort), the risks of a DSM-IV major depression diagnosis<sup>48</sup> were doubled if a respondent had previously reported 'subthreshold' depressive symptoms. 'Sub-threshold' was defined as elevated self-reported depression scores without a formal diagnosis, or clinically assessed symptoms that may qualify for 'mild depression' but fall short of major depression. The necessity of taking a longitudinal view of depression cases, as well as the cumulative risks associated with repeated depressive episodes, led to the authors calling for an investment in early intervention and treatment in all settings, but particularly in response to childhood and young adult incidences of sub-threshold or elevated depressive symptoms.

In the Irish context, according to the My World Survey, the incidence of depressive symptoms increases significantly throughout adolescence, peaking at ages 20-23 years (Dooley and Fitzgerald, 2012). Using the Depression, Anxiety and Stress Scale (DASS) (Henry and Crawford, 2005), symptoms of depression worsened from a mean of 5.7 at age 12-13 years to 10.0 at age 22-23 years. Similarly, symptoms of anxiety increased on average across groups from 5.6 at 12-13 years, reaching their highest levels of 7.2 at 20-23 years.

<sup>48</sup> The Diagnostic and Statistical Manual of Mental Disorders is a publication by the American Psychiatric Association for the classification of mental disorders using a common language and standard criteria. In this case, the longitudinal research used DSM-IV (APA, 1994).



Around the age of 20 years, young people are exposed to a number of stressful life events which may contribute to the onset of a mental health disorder such as leaving home for the first time, making choices about the future, the transition to higher education or the labour market, and financial stress (Dooley & Fitzgerald, 2012). Anxiety and depression are the most frequently experienced mental health disorders among young people in Ireland (Cannon, Coughlan, Clarke, Harley & Kelleher, 2013). If untreated, depression can result in academic failure, poor peer relationships, conflict with parents and other authority figures, self-harm and suicidal ideation, and substance abuse (Cook, Peterson & Sheldon, 2009).

There is considerable evidence demonstrating that the onset of mental health issues, especially depression, anxiety and stress, often occurs during the period when young adults are attending third-level education (Castillo & Schwartz, 2013). As stated, negative mental health may interfere with academic achievement (Eisenberg et al., 2009 in Conley, Durlak & Kirsch, 2015). It has also been found that most students suffering from mental health issues do not make use of available interventions and services (Conley et al., 2015), an aspect in need of policy focus.

#### 6.4.3.1 Measurement of depressive symptoms

In *Growing Up in Ireland*, the eight-item Centre for Epidemiological Studies' Depression Scale (CESD 8) was completed both by the 20-year-old respondent and the parent. This measure was new for the 20-year-old and provides consistency for the measure used by the Young Adult with parental ratings of depression in previous waves. At 13 and 17/18 years, the Young People had completed the Short Mood and Feelings Questionnaire (SMFQ) (Angold et al., 1995), which was more appropriate for younger respondents. The CES-D 8 measure has been used with parent respondents at all waves since the very start of the *Growing Up in Ireland* design report at 20 years of age contains more information on the introduction of this measure (McNamara et al., 2021).

The CES-D 8 is a short self-report screening instrument for depressive symptoms in the general population (Mohebbi et al., 2018; Radloff, 1977). Respondents are asked to rate how frequently within the previous seven days they experienced a number of symptoms of depression, for example, 'How often within the last week...did you feel lonely?'. Answers are given on a four-point rating scale, ranging from 1 (*rarely or none of the time* – 0 days) to 4 (*most or all of the time* – 5-7 days). A composite score is calculated by summing responses across the eight items (range: 0-24). Respondents are categorised according to the recommended thresholds, with composite scores of 7 or more being classified as 'depressed' and scores below 7 defined as 'not depressed'. While a score greater than or equal to seven suggests a clinically significant level of psychological distress, it does not necessarily mean that the participant has a clinical diagnosis of depression (Devins et al., 1988; Lee et al., 2019).

#### 6.4.3.2 Results

Table 6.5 displays mean scores, standard deviation and percentage exceeding the threshold for high depressive symptoms of the CES-D 8 scale for the sample as a whole, men, women and for the parent (usually the mother of the 20-year-old).

Overall, the 20-year-olds scored an average of 4.6 out of 24 (Table 6.5), with 22 per cent exceeding the threshold of 7+ for high depressive symptoms on the scale. In contrast, the 20-year-olds' parents completing the same measure about themselves scored just 2.9 on average, with only 13 per cent exceeding the threshold. This indicates that twice as many 20-year-olds as parents exceeded the depression threshold. Table 6.5 also shows that 20-year-old women reported higher depression scores than men (5.4 versus 3.9), with almost a third of young women (32%) reporting depressive symptoms exceeding the clinically concerning threshold – compared to just over a fifth of young men (22%).

sympton	ns		
	Mean (SD)	Achieved range	% exceeding 7+ threshold
Male	3.9 (4.47)	0-24	22%
Female	5.4 (5.09)	0-24	32%
Total	4.6 (4.84)	0-24	27%
Parent One Scores	2.9 (3.65)	0-24	13%

## Table 6.5Descriptive statistics for CES-D 8 and percentage exceeding threshold for high depressive<br/>symptoms

Further exploration of the types of symptoms contributing to higher scores for Young Adults points to particular issues with sleep and loneliness. Most notably, almost 30 per cent of 20-year-olds reported restless sleep and/or loneliness 'some or a little of the time (1-2 days)' in the week preceding the interview. A further 20 per cent of them reported restless sleep and loneliness 'occasionally or a moderate amount of the time (3-4 days)' or higher.

Figure 6.21 displays the percentage of 20-year-olds reporting high levels of depressive symptoms according to socio-economic characteristics of family type, highest and lowest income brackets, and self-reported financial stress.



# Figure 6.21 The percentage of 20-year-olds reporting CES-D 8 scores above threshold for high depressive symptoms by key demographic variables

Note: Margins of error are shown in parentheses in the labels.

A previous **Growing Up in Ireland** report (McNamara et al., 2020) reported that 17/18-year-olds from one-parent households showed elevated levels of depression (26%) more frequently than those from two-parent households (18%). Figure 6.21 shows that this trend continued into adulthood: 35 per cent of 20-year-olds from a one-parent family described high depressive symptoms compared to 25 per cent from a two-parent family. In contrast, there were no statistically significant differences in the proportion with high depressive symptoms by household income quintile (also Figure 6.21). Neither were the contrasts in relation to social class or parental education significant (not illustrated).

The depression scores of the parent were more strongly related to these family-level variables. Compared to the overall average of 13 per cent, only 11 per cent of parents with a degree-level education reported elevated depressive symptoms, contrasted with 16 per cent of those at the lowest educational level.



Similarly, 8 per cent of parents in the 'professional' social class and 6 per cent of those at the top income quintile reported high depression compared to 18 per cent of those in the lowest social class and 19 per cent of those in the lowest income quintile.

Previous *Growing Up in Ireland* research (Williams et al., 2018) suggested that parents may shield their children from the effects of lower income. Consistent with this, Young Adults who themselves reported experiencing financial stress (*'making ends meet with difficulty/great difficulty'*) were almost twice as likely to report higher levels of depressive symptoms (45%) than those not experiencing such difficulties (25%).

When the Young Person was aged 13 and 17/18 years, they self-reported depressive symptoms using the Short Mood and Feelings Questionnaire (SMFQ). Figures 6.22 and 6.23 take a longitudinal view of how childhood depressive symptoms related to those in early adulthood. In Figure 6.22, the percentages of all 20-year-olds reporting high levels of depressive symptoms are broken down by whether they were in the top depression decile (top 10% of all depression scores) at 13 or 17/18 versus whether the Young Adult was in the lower depression deciles (the remaining 90% of scores below the top decile) at these ages.





Note: Margins of error are shown in parentheses in the labels.

Figure 6.22 shows that those scoring in the highest decile for depressive symptoms at 13 were 1.7 times as likely to score in the 'depressed' range on the CES-D 8 measure at age 20 (i.e. 45% versus 25%). Those in the top depression decile at 17/18 were more than twice as likely (2.2 times) to exhibit high levels of depressive symptoms at 20 years of age (i.e. 59% versus 23%).

Figure 6.23 considers incidences of high depressive symptom scores in Waves 2 (age 13) and 3 (age 17/18) as a cumulative risk for adult depressive symptoms in Wave 4. Incidences of high depressive symptoms at 20 years of age are broken down by incidences of high depressive symptoms in preceding waves. These are counted to give a score of zero (never previously reported the highest depression scores), one (reported high depressive symptoms at one wave), or two (reported high depressive symptoms at both 13 and 17/18).

In particular, the small group (3% of all participants) who had been in the top SMFQ depression decile at both 13 and 17/18 years had the highest risk of elevated depressive symptoms at age 20 (66%). Fifteen per cent of Young People had a high SMFQ score at one, but not both, of the two previous waves and just under half of this sub-group (46%) had a CES-D 8 score in the 'depressed' range at 20 years of age. The
persistent nature of depressive symptoms for a small group of participants emphasises the requirement for early intervention to prevent chronic depressive illnesses and associated morbidity (Lee et al., 2019).





Note: Margins of error are shown in parentheses in the labels.

As previously noted, the same measure of depressive symptoms (CES-D 8) was completed by the Young Adult and the parent in the 20-year survey. Figure 6.24 compares the current depression status of the 20-year-old with the depression status of their parent (using the same cut-off of 7+ on the CES-D 8 scale). It shows that higher levels of depressive symptoms among Young Adults were more likely in families where the parent also reported higher levels of depressive symptoms (40%) than when they did not (26%).



Figure 6.24 The percentage of 20-year-olds reporting 'high depressive symptoms' by Wave 4 parent reported depression status

Note: Margins of error are shown in parentheses in the labels.



#### 6.4.3.3 Depressive symptoms and service utilisation

The structure of this section mirrors that of Section 6.4.2.3 which was concerned with stress. The following analysis considers depression as a topic in its own right and does not aim to control for any overlap with stress and help seeking. As discussed in Section 6.4.2.3, the Young Adults were asked a series of questions on service usage in the last 12 months. The list of questions asked how many times the Young Adult had 'seen or consulted, or talked on the phone with any of the following about your physical, emotional or mental health?' The list of contacts included 'general practitioner', 'practice nurse', 'dentist', 'psychologists counsellors etc' among a range of others.

A subset of service providers with direct responsibility for providing mental healthcare were selected for this analysis: 'general practitioner', 'psychologists counsellors etc' and 'psychiatrist'. A binary variable recording contact or not with these service providers was calculated. Limitations on this variable include not accounting for the amount of contact with each provider and the data cannot differentiate between types of physical and mental healthcare.

Figure 6.25 explores service utilisation between 20-year-olds who reported low levels of depressive symptoms on the CES-D 8 scale (73%) and those who reported depressive symptoms in the clinically significant range (27%). When all service provider care is considered, those reporting clinically significant depressive symptoms were consulting 'any' health provider significantly more often than those who do not report clinically significant levels of depressive symptoms (84% versus 73%). This pattern occurs across all service providers when explored individually. Those with high depressive symptoms attended general practitioners slightly more often than those without high depressive symptoms (81% versus 72%). Young Adults reporting high levels of depression were almost four times more likely to have consulted a *'psychologist, counsellor etc'* in the last 12 months than those who did not report high levels of depression (3.9 times more likely, 31% versus 8%). Similarly Young Adults with high depressive symptoms were five times more likely to have consulted a psychiatrist in the last 12 months than those below the depression cut-off (five times more likely, 10% versus 2%).

Similar to the findings from service utilisation and stress in Section 6.4.2.3, there is evidence of unmet needs for 20-year-olds from the *Growing Up in Ireland* sample. Roughly 84 per cent of all those who reported significant depressive symptoms had consulted general practitioners, psychologists/counsellors or psychiatrists in the last 12 months. The 16 per cent of Young Adults who reported high depression levels and also reported no contact with these sources of healthcare in the last 12 months comprise 4.3 per cent of the full GUI sample.



### Figure 6.25 Service utilisation among 20-year-olds below and above the CES-D 8 high depressive symptoms cut-off

Note: Margins of error are at most 1% for those below the depression cut-off, and 2% for those above the cut-off.

#### 6.4.4 AGGRESSIVE TENDENCIES

#### 6.4.4.1 Aggression among Young Adults

For the first time in *Growing Up in Ireland*, the age 20 survey included a self-reported measure of aggressive tendencies for the Young Adults. This reflects a shift to adult rather than child or adolescent behaviours as was the focus of the parent-reported Strengths and Difficulties Questionnaire (SDQ) that had been used in all previous waves with this cohort.

Persistent aggressive behaviour has been shown to have significant adverse effects on both the perpetrator and the victim (WHO, 2014). Research from Brugman et al. (2017) shows social isolation and absence from work among the effects for perpetrators. Victims of persistent aggressive behaviour display elevated symptoms of depression, anxiety and posttraumatic stress (Krug, Mercy, Dahlberg & Zwi, 2002). Aggression has been identified as a highly prevalent main cause of death for individuals aged 15 to 44 (WHO, 2014) and is of particular policy relevance for this age group. From the perspective of the aggressive young adult, those with higher levels of aggression could be considered 'at risk' for social and economic marginalisation due to the association between youth aggression and other forms of antisocial behaviour (Frick and Viding, 2009).

Citing Hipwell et al. (2002), Frick and Viding (2009) report that persistent aggression and associated violence in antisocial behaviour is much rarer in girls than boys, with lower overall levels of aggression and antisocial behaviour reported in most cross-sectional and longitudinal studies (p. 1118) (see Tremblay and Cote, 2019, for detailed historical and evolutionary perspectives on sex differences in aggressive behaviour). Thus, significant differences in average levels of adult aggression are expected between the young men and women in the *Growing Up in Ireland* sample in the same manner that gender differences in externalising behaviours and self-regulation have been consistently reported using measures like the Strengths and Difficulties Questionnaire across their earlier years (Williams et al., 2018).

There is a consensus building among researchers for the existence of different developmental pathways for sub-types of aggressive behaviour (Frick & Viding, 2009; Tremblay, 2010; Girard, Tremblay, Nagin & Cote, 2019). These examples of aggression research propose varied models for the trajectory of antisocial behaviour, Frick and Viding's research identifying pathways characterised by initiation in adolescence and the other two studies locating foundations earlier in childhood (but differentiated by levels of 'callous-unemotional traits', see Frick & Viding, 2009, p. 1114). Girard et al.'s (2019) research highlighted prenatal risk factors for the development of aggressive-antisocial behaviours that include maternal health, social support and IQ along with childhood risk factors such as parenting practices and the child's early socialisation, cognitive and language abilities.

#### 6.4.4.2 Measurement of aggression

At age 20 years, Young Adults completed a set of questions designed to measure their aggressive behaviour called the Reactive and Proactive (aggression) Questionnaire (RPQ) (Raine et al., 2006).

The scale consists of 23 items on a 3-point frequency scale divided between circumstances where the 20-year-old might <u>react</u> aggressively to a provocation (e.g. 'Gotten angry when frustrated') referred to as 'reactive aggression' and those where they <u>initiated</u> aggression to achieve a goal (e.g. 'Had fights with others to show who was on top' – referred to as 'proactive aggression'). Subscale scores can readily be combined for a total aggression score. The RPQ has been validated using a wide variety of longitudinal (Cima, Raine, Meesters & Popma, 2013) and cross-sectional samples (Dini and Raine, 2019).

#### 6.4.4.3 Results

Table 6.6 displays means and standard deviations for the proactive, reactive and 'overall' aggression score (the sum of *reactive* and *proactive* aggression). These scores are displayed for men, women and for the sample as a whole. Self-reported levels of *proactive* aggression were very low among the **Growing Up** *in Ireland* sample, with 58 per cent of the Young Adults saying that they *never* engaged in activities like



starting fights or threatening others. As shown in Table 6.6, the level of mean proactive aggression score was just 1.0 of a possible 24 on the scale (where higher scores indicate more proactive aggression). Scores on the *reactive aggression* items were somewhat higher (overall showing a mean of 4.9 out of a possible 22), but still low overall when compared to other studies using the same scale (Dini and Raine, 2019). Dini and Raine's study used a sample of adults aged 18-76 from Serbia showing mean scores of 1.9 and 8.1 on the reactive aggression subscales respectively.

	Levels of sen reported aggression by round static gender									
	Proactive Aggression		Reactive	e Aggression	Overall aggression					
	Mean (SD)	Achieved range	Mean (SD)	Achieved range	Mean (SD)	Achieved range				
Men	1.3 (2.41)	0-22	5.4 (3.76)	0-22	6.7 (5.55)	0-39				
Women	0.7 (1.62)	0-23	4.4 (3.06)	0-22	5.1 (4.15)	0-42				
Total	1.0 (2.08)	0-23	4.9 (3.47)	0-22	5.9 (4.97)	0-42				

#### Table 6.6 Levels of self-reported aggression by Young Adult gender

Table 6.6 shows that young men reported a higher mean score on all the aggression measures and displayed greater variability within the observed scores (as captured by their higher standard deviations). Higher reported male aggression is well documented in previous studies using the current aggression measure (Cima et al., 2013).

Further analyses use the RPQ *overall aggression* score. Participants were grouped into quintiles, with the highest quintile capturing those with the highest overall aggression scores. These scores were compared using key demographic variables. Unlike the depression and stress subscales reported in previous sections, there are no cut-offs for 'clinically relevant' levels of aggression. In this case, the top aggression quintile represents a cut-off to highlight those reporting the highest aggression scores in the sample, in the context of low scores generally.

Figure 6.26 displays this breakdown by gender, family income, family type and by the 20-year-old's experience of financial stress. The gender split in Figure 6.26 shows that men were almost twice as likely to be in the top aggression quintile as women (28% versus 15% respectively). Young Adults from one-parent families also self-reported more aggressive tendencies than their peers from two-parent families (27% and 20% in the highest quintile respectively).



## Figure 6.26 Proportion in the top aggression quintile by gender, household income, family type and financial strain

Note: Margins of error are shown in parentheses in the labels.

The relationship between aggression and other demographic variables such as social class (not pictured) and income (Figure 6.26) was weak and not statistically significant. The relationship between financial stress and aggression (also) shows that those who experienced financial stress were more likely to be in the highest aggression quintile (27%) compared to those who were not struggling to make ends meet (21%).

Regarding the *reactive* aggression subscale, the relationship between socio-emotional difficulties experienced in childhood and adult self-reported reactive aggression levels is presented in Figure 6.27. Childhood socio-emotional and behavioural difficulties are represented by how often, if ever, the young person was in the top decile of scores on the Strengths and Difficulties Scale (SDQ)<sup>49</sup> from Wave 1 (9 years) through to Wave 3 (17/18 years). Most participants had 'never' been in the top SDQ decile and only a small number were 'at risk' on the SDQ at all waves, so the categories were summarised as 'never' at risk, at risk for 'one wave' or 'two waves or more'.<sup>50</sup>





Note: Margins of error are shown in parentheses in the labels.

Figure 6.27 shows the percentages in the top quintile for self-reported *reactive aggression* as a Young Adult if the study participant had been in the SDQ 'at risk' category on one or more occasions in previous waves. Those who had been in the SDQ 'at risk' group once were more than 1.5 times as likely to be in the highest reactive aggression quintile as those who were never in the SDQ 'at risk' group (28% versus 17% respectively). Those in the SDQ 'at risk' group 'twice or more' were twice as likely to be in the top aggression quintile compared to those who had never been in the SDQ 'at risk' group (34% versus 17% respectively). The broad findings support part of Frick and Viding's (2009) model of childhood difficulties resulting in adult aggression for a subgroup of individuals, though the cumulative nature of this risk requires further study, as the margins for error make differentiating between the two 'at risk' groups difficult. Findings on the link between persistent socio-emotional problems and aggression also highlights the importance of policies on effective long-lasting intervention strategies and behavioural supports through groups like the National Educational Psychological Service (NEPS, 2010) in addressing early problems before they become entrenched patterns of behaviour, resulting in exclusion and disadvantage in later life (Tremblay, 2010; Tremblay and Cote, 2019).

<sup>49</sup> The Strengths and Difficulties Questionnaire was a parent-reported measure of socio-emotional behavioural difficulties with dimensions reflecting problems with peers, conduct, hyperactivity/inattention and emotional symptoms. There was also a positive dimension of prosocial behaviour, but this was not used in the calculation of 'total difficulties' and the top 'at risk' decile thereof.
50 The effect of the smaller group sizes can be seen in the calculation of margins of error for each category, which are parrow in the largest in the calculation of the calculation.

<sup>50</sup> The effect of the smaller group sizes can be seen in the calculation of margins of error for each category which are narrow in the largest groups (±1% in 'never in top SDQ decile') and wider in more sparsely populated groups (±6% in 'two waves or more in top SDQ decile').



#### 6.4.5 COPING STRATEGIES

How a young person copes with life stresses can significantly influence the impact of stressors in the longand short term (Lazarus, 1966). Lazarus and Folkman defined coping as 'constantly changing cognitive and behavioural efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person' (1984, p. 141). One of the fundamental ways this happens is through fluctuation of levels of anxiety in different environments. Cyclical acts of appraisal, reaction and re-appraisal of ongoing situations are part of the subjects' efforts to avoid, confront or manage stressful situations (Weiten and Lloyd, 2008).

At age 17/18 years, the *Growing Up in Ireland* study participants completed a short coping style measure adapted from the original Coping Strategies Indicator by Amirkhan (1990). This measure was also used in the My World Surveys 1 and 2 (Dooley and Fitzgerald, 2012; Dooley, O'Connor and Fitzgerald, 2019). It comprised three subscales relating to *avoidance*, *support-seeking* and *problem-solving*. At age 20 years, however, more disaggregated information on specific *strategies* rather than *styles* of coping was collected.

#### 6.4.5.1 Measurement of coping strategies

At age 20, Young Adults answered scale items which were based on the Brief COPE inventory (Carver, 1997; 2013). The 20-year-olds were asked about the strategies they used to cope with self-defined 'stressful' situations. They were presented with a list of possibilities, some of which can be considered positive or constructive, such as 'working out a strategy to solve the problem' or 'discussing it with friends', while others are typically less constructive or less effective, such as 'drinking alcohol' or staying in bed. Answer categories were often, sometimes, rarely or never.

#### 6.4.5.2 Results

Figure 6.28 displays the percentage of women and men reporting a coping strategy as often being employed to deal with a stressful situation. The list of activities has been ordered by the most frequently cited by women. The coping strategies most used by the 20-year-olds could be considered as adaptive and healthy. These were 'talking to friends' (51% overall), using 'music or a hobby to cheer' themselves up (50% overall), and 'discuss the problem with parents or other family members' (37% overall). However, less positive strategies such as 'watch more television' and 'drink alcohol or smoke a cigarette' were often used by around 10 per cent of all Young Adults.

Some gender differences in coping strategies were evident in Figure 6.28. In particular, young women were more likely than young men to *often 'discuss a problem'* with friends (55% versus 47% respectively) or family (44% versus 30% respectively). Young women were less likely than young men to *often* use *'exercise and sport'* as a coping mechanism (26% versus 38% respectively) and women were more likely to *'treat themselves to something nice'* (38% versus 27%) or to react in an avoidant manner to stress by retreating to bed (22% versus 13% respectively).

#### Figure 6.28 Coping styles 'often' used by 20-year-olds



Note: Margins of error are shown in parentheses in the labels.

Future research could explore the contributions of different coping mechanisms to overall well-being. While sharing problems with friends can be a strong source of social support and often has benefits for both the person providing support and the person being supported, there is also potential for caring fatigue and burnout among young adults who may not be able to meet the needs of others (Wepf, Joseph & Leu, 2021). This pattern of burnout and caring fatigue is similar to that of young people in more formal caring roles. Leu and Becker (2017) showed that young adults living at home who may take on a carer role for a parent, friend or family member are often ignored internationally by policymakers. The National Youth Strategy 2015-2020 (Department of Children and Youth Affairs, 2015) recognises young carers as a particularly disadvantaged and vulnerable group in Ireland, with Family Carers Ireland describing the situation of many people in caring roles as operating in crisis (Family Carers Ireland, 2019). Continued research in this area is necessary for the provision of effective policy on carers and levels of support and to explore whether informally supporting friends could present similar difficulties for the carer as has been seen in other caring roles.



#### 6.5 SUMMARY

As at previous waves of the study, the majority of Young Adults reported being in good general health. However, 16 per cent of 20-year-olds reported having a longstanding condition or illness. The most prevalent of these were psychological or behavioural disorders or diseases of the respiratory system.

Overall levels of overweight and obesity were 24 per cent and 13 per cent, respectively, a significant increase from when participants were last measured at age 17/18. Obesity risk was greater amongst young women, for those from less advantaged backgrounds, for those who had been overweight/obese when younger and for those who had an overweight or obese parent, highlighting the importance of targeted interventions for these groups.

Fifteen per cent of 20-year-olds were daily smokers, while a further 23 per cent smoked occasionally. In terms of alcohol consumption, 46 per cent of 20-year-olds reported drinking behaviour that could be described as 'risky or hazardous', 7 per cent could be described as 'high risk or harmful', and 4 per cent reported drinking behaviour that could be described as 'very high risk (or possible alcohol dependence)'. Nearly 60 per cent of Young Adults had tried cannabis, while 18 per cent took cannabis occasionally and 6 per cent took it more than once per week. For all three of these risk behaviours (smoking, drinking, drug use), past behaviour reported at ages 13 and 17/18 was an indicator of risky behaviour at age 20. The socio-economic gradient varied by type of risky behaviour, with less advantaged groups more likely to smoke and more advantaged groups more likely to engage in cannabis consumption and risky levels of drinking.

Overall *life satisfaction* was reported as high. *Life satisfaction* had slightly worsened since age 17/18 for 47 per cent of the 20-year-olds. For 28 per cent of them, their *life satisfaction* had improved while it stayed the same for another 25 per cent.

A quarter of 20-year-olds reported above-normal levels of stress. Young women were more likely to report above normal stress than young men (29% versus 21%). Twenty-year-olds who were not working or in education or training were more likely to be experiencing higher levels of stress than those in education or in full time work. Over a fifth of 20-year-old men, and almost a third of 20-year-old women, reported elevated scores on a measure of depressive symptoms. Young People who were experiencing higher levels of depressive symptoms both at 13 and 17/18 years were most likely to report depressive symptoms at age 20. Depressive symptoms in Young Adults were also more likely in households where the parent was also experiencing such symptoms and where the Young Adult reported feeling financial strain. Twentyyear-olds reporting high levels of depressive symptoms or stress were more likely to consult with their GP, a psychologist/counsellor or a psychiatrist than other Young Adults, but a significant minority of those reporting elevated symptoms of stress (18%) and/or depression (16%) had not consulted a professional. These `unmet need' percentages equate to 3 per cent and 4.3 per cent of the total Growing Up in Ireland sample. Overall aggression figures were reported as low, with subjective experiences of financial stress and behavioural difficulties (as measured by the SDQ scores) in childhood linked to higher aggression scores at age 20.

Finally, when considering methods of coping with stress, most 20-year-olds used coping strategies considered constructive, such as 'talking to friends' or 'discussing problems with parents/family'. This can be seen as an encouraging and healthy pattern of behaviours for dealing with stress amongst most of the 20-year-olds. Continued research on the area of caring and the benefits of social support for mental health and well-being is necessary for the provision of effective policy in this area.



# **Chapter 7**

# DISCUSSION



The life circumstances of the Young Adults of Cohort '98 have changed considerably since their previous interview at age 17/18 years, and even more since the second interview when they were 13 years old. At those times, almost all of the cohort lived at home with their parents or guardians and a large portion (effectively all of them at 13 years) were in full-time education. However, in a relatively short period of time, many of the cohort have made transitions to further or higher education and work, into independent accommodation (even if just during term time) and into relationships with significant others. With each of these transitions came greater responsibilities (and possibly stress) but also, in many areas, greater agency to shape future transitions and trajectories. This chapter draws on main findings from the report to reflect on what we now know about these transitions, the implications of the findings for policy development and the potential for future research on these topics.

#### 7.1 PRINCIPAL ECONOMIC STATUS, LIVING CONDITIONS AND CIVIC PARTICIPATION

The report findings have documented the diversity of pathways pursued by the 20-year-olds since they left school, with most engaging in some form of education or training (in many cases, combined with part-time employment), others entering employment directly while a smaller group were not in paid employment. These trajectories occurred side-by-side with, and were often linked to, some Young Adults moving out of the parental home, at least during term time. Analyses were conducted using latent class analysis to determine the main groups 20-year-olds fell into as a way of capturing the main pathways pursued. Because entry to higher education is linked to Leaving Certificate performance in Ireland, and for many attendance at higher education requires relocating from a rural to an urban area, this analysis takes account of current economic status, living arrangements, prior academic (Leaving Certificate) performance and region (urban or rural).<sup>51,52</sup> This approach suggests that the cohort of 20-year-olds can be divided into three main groups:

- The first group, 'high-achieving rural dwellers' are those who tended to do above average in the Leaving Certificate, went on to higher education but tended to come from rural areas, which meant that they almost exclusively lived away from the parental home (at least during term time). A third of 20-year-olds had this profile as their 'closest match'.
- A second group, 'academically competent and living at home', usually but not necessarily did well in the Leaving Certificate (but had a broader spectrum of grades than the higher-performing group one), had mostly continued in education, but almost all lived at home and were somewhat more likely to be from an urban area. Around half of the cohort were associated with this profile.
- The third group, 'early entry to work and living at home', had done less well in the Leaving Certificate, were mostly living in the parental home and at work rather than in education. They were spread between urban and rural areas, and this profile was the closest match for the remaining 19 per cent of the cohort of 20-year-olds.

So overall, there is a general picture of young people who did well in the Leaving Certificate tending to be in higher education at the age of 20, with this involving a change of address for those from rural areas. Those whose overall grades in the Leaving Certificate were lower were more likely to be in work or training as 20-year-olds and almost certain to be living in the parental home.

A key feature of the economic circumstances of 20-year-olds was the extent to which they relied on their parents for financial support. High percentages of 20-year-olds had the costs of essentials such as accommodation, health expenses, food and utility bills supported by contributions from their parents – even when they regularly lived somewhere else. For example, 45 per cent of Young Adults with a non-parental address said that their parent(s) contributed to the cost of their food and utility bills; for those who lived with parents full-time, these figures were 84 per cent and 83 per cent respectively. Financial circumstances were a significant factor in moving out of the parental home, with over four-in-ten of

<sup>51</sup> The urban group includes cities and towns with a population of 10,000 or more.

<sup>52</sup> See Appendix for further details.



the 20-year-olds living in the parental home mainly for financial reasons but preferring to be living independently.

These figures do not imply that many 20-year-olds were entirely reliant on their parents. Over a quarter of 20-year-olds were in employment (as their principal economic status) at the time of the survey, the majority of these working full-time. The group who worked 36 hours or more per week typically earned over €300 per week. Even among 20-year-olds whose principal economic status was education or training (which was the majority), two-thirds had a regular part-time job while studying. Almost a third of Young Adults reported at least some difficulty making ends meet, although fewer than 10 per cent were in the two most straitened categories (i.e. 'financial stress'); this was more common for women and those whose families were in the lowest income quintile.

Concerns about housing were evident in the perceptions of Young Adults on political and social issues, with access to housing in Ireland ranked as the greatest concern, followed by poverty in Ireland and access to decent employment opportunities. Concerns about political issues tended to be reflected in activities like signing petitions and sharing material online rather than participation in elections, with only a third of those eligible to vote in the most recent election doing so. Civic participation was socially differentiated, with lower levels of engagement among those from less highly educated families and among those not in employment, education or training.

The findings on economic and living conditions at age 20 have a number of implications for policy. The transition to full independence in terms of finance and accommodation will likely be delayed into the mid-twenties for most young adults. This has financial consequences for parents who may be supporting their adult children as they themselves face retirement, particularly for one-parent families or those with multiple children. The financial responsibilities of households where adult children are no longer considered as 'dependants' for welfare purposes has implications for broader anti-poverty policy. There are potentially more specific implications for the levels of maintenance grants for students, given the dependence of many young adults on financial support from their parents and/or term-time employment to fund their studies (see also Keane, Doorley & Tuda, 2021). The extent to which a free choice in education and employment pathways for young people leaving second-level education is constrained or facilitated by the ability of parents to financially support adult children (and/or for them to live at home) for several years needs further policy consideration. This is an important issue given that those whose parents had low levels of education or who attended DEIS schools were less likely to attend higher education and were more likely to cite being able to live at home as an important factor in their choice of educational institution. A significant group of Young Adults (more than four-in-ten) were living in the parental home for financial reasons and would have preferred to live independently. This finding must be placed in the context of housing affordability in Ireland more generally and the declining proportions over time in the proportion of young adults who own their own home alongside significant increases in average rents (Roantree, Maître, McTague and Privalko, 2021).

Further research could usefully use GUI data to unpack the consequences of delayed departure from the parental home for the well-being of Young Adults and the extent to which they feel they have made the transition to adulthood. The effects on the quality of parent-child relationships of remaining in the parental home for financial reasons could also be examined.

#### 7.2 TRANSITIONS IN RELATIONSHIPS

Most 20-year-olds remained in close contact with parents, with a majority still living full-time in the parental home and nearly all regularly overnighting there at least a few times a month. Most Young Adults continued to be financially dependent on their parents (see Section 7.1). These socio-economic dimensions

are an interesting context for the socio-emotional dynamics of the relationships between 20-year-olds and their parents: the balance between the continuing authority of parents as heads of household versus the expanding agency for 20-year-olds in many other areas of their lives. Or, perhaps, a closer relationship as both parents and their children come to share an 'adult' perspective on the world and appreciate the presumably short window of time to continue in the existing family structure. Into that mix can be added the increasing likelihood that the 20-year-old will by now have formed a committed romantic relationship with a 'significant other'; an interesting period of evolution in long-held relationships and first steps in brand new ones.

Starting with relationships between the Young Adult and their parents, the interview at age 20 showed that, by and large, Cohort '98 tended to view their parents in a positive light in terms of feeling liked/ loved by their parents and viewing them as reliable. Comparing individual ratings over time, using the same measure as at 17/18 years, showed that most Young Adults gave a similar rating at both waves, and where there was change, it was more likely to be in a positive rather than negative direction. This trend applied to relationships with both mothers and fathers.

The 20-year survey included the parental perspective on the relationship with the Young Adult. When asked to rate the quality of the relationship with their adult son or daughter on a scale of 1-10 (where higher scores were more positive), half of the parents – who were generally mothers – gave a very high score of 9 or 10. Just 7 per cent overall gave a rating of 6 or lower, and this was slightly more common where the parent was in the lowest education group (9% compared to 6% where the parent was a graduate). A generally positive relationship did not preclude disagreements, however. The most frequent cause of friction between parents and their adult children was 'helping around the house' – of particular note given that it was more of an issue where the 20-year-olds lived with their parents full-time (58% of these had a disagreement about this within the last three months compared to 37% when the Young Adult also had another address). Living in the parental home full-time was also associated with more disagreements between parents and adult children in relation to money, substance use (alcohol, smoking or drugs) and staying out at night. For all 20-year-olds, parent-reported disagreements about boyfriends/ girlfriends (6%) or sexual behaviour (3%) were rare. Minor differences based on living situation were not statistically significant.

Considering the Young Adults' wider circle of relationships, 20-year-olds indicated an increase in the size of their friendship network, with 58 per cent having more than ten friends. Over half of 20-year-olds were in some sort of romantic relationship at the time of the survey. The most common self-reported description of this relationship was 'dating one person' (40% of all 20-year-olds) with another 14 per cent describing themselves as 'casually dating but not exclusively'. Fewer than 5 per cent of 20-year-olds were co-habiting, engaged or married. Women were more likely to describe themselves as being in a committed relationship with a significant other (i.e. exclusively dating, cohabiting, engaged or married) than men at age 20 (49% compared to 37%). This suggests that the relationship trajectories in early adulthood are likely to be different depending on gender. Twenty-year-olds in employment, rather than education or training, were also more likely to be in a committed relationship (48% versus 41%) but which came first or whether this indicates a general preference for 'settling down' into job and family at an early age is difficult to say.

What we can say about aspirations for the future of those relationships, however, is that at age 20 threequarters of those in an exclusive relationship expected it to be of at least five years' duration. When asked what they expected the status of their current relationship to be after five years, 40 per cent of this group expected to be living together (but not engaged or married) and almost another quarter of them anticipated they would be engaged or married. A further 12 per cent predicted they would still be dating and just 3 per cent expected their current relationship to have ended by then. How closely the 20-year-old's experiences match their aspirations could be followed up at the next wave of interviews with



this cohort. Elsewhere in the survey (in highlights published as part of an early release of key findings), 20-year-olds were asked about milestones they wanted to achieve by the age of 30: 29 per cent said that being in a long-term relationship by then was highly important to them (i.e. ranked as 9 or 10 on a tenpoint scale) although just 14 per cent attached that level of importance to having a child by age 30. This suggests that while many 20-year-olds were keen to establish a long-term relationship, or felt that they had already done so, the transition to being parents themselves was seen as being some way off as yet (if ever) for most.

These findings raise a number of issues that will be of interest to policymakers. The results indicate that parents were typically important sources of financial, practical and emotional support to Young Adults. This suggests a possibly significant gap in support, therefore, for 20-year-olds who do not have this resource because their parents are deceased, ill or parental resources are otherwise not available. While the relationships between parents and their adult children were generally positive, which is important given that so many of them live together full-time, there is evidence that some types of disagreement were more frequent in these shared households. There may, therefore, be an upper limit on how long parents and their adult children are content with the arrangement – and subsequently at what point there will be increased pressure on the cohort to find independent accommodation (and the consequences for everyone if they cannot find something suitable or affordable). A substantial proportion of Young Adults who were currently in an exclusive relationship expected to be cohabiting with a partner by the time they are 25. In terms of suitable accommodation, then, it suggests that many people in their mid-twenties – possibly moving out of the parental home for the first time – will be looking for accommodation that is suitable for couples rather than single-person apartments or sharing with roommates.

Further research could usefully help to unpack these dynamics and how they play out by the time of the follow-up survey at age 25. Given the importance of friends as a source of support (see below), future research could also examine the relative role of parental and peer relationships as protective factors across different domains of Young Adults' lives.

#### 7.3 WELL-BEING DURING TIMES OF TRANSITION

The notion of well-being can be considered both in relation to how prior well-being (before a period of change) provides a certain level of resilience in coping with transitions, and how the transitions themselves affect well-being. Transitions may be positive as well as a source of stress: for example, a Young Adult may find college or work more rewarding than school or enjoy the freedom that comes with living away from parents and siblings. Chapter 6 looked at well-being in a range of physical and mental domains while Chapter 5 looked at activities popular among 20-year-olds, which may contribute to their well-being.

The picture for the physical well-being of 20-year-olds was one of good health but with several risk factors for future health becoming more marked. In terms of self-rated health, nearly three-quarters of the Young Adults described themselves as being in 'excellent' or 'very good' health and most of the remainder said their health was 'good'. However, the trajectory of their future physical health in adulthood may be negatively impacted by risk factors such as:

- Increasing levels of overweight (24%) and obesity (13%) since the previous wave at 17/18 (20% for overweight, 7% obese) meaning that more than a third of 20-year-olds were an unhealthy weight;
- Increasing rates of smoking 15 per cent were daily smokers and another 23 per cent were
  occasional smokers;
- High rates of potentially hazardous alcohol consumption, 46% were in a 'risky drinking' category, and over 10 per cent were in the 'high or very high risk' categories for harm or dependence.

This means that it was more common for a 20-year-old to be in a 'risky' category for alcohol consumption than not;

- Declining levels of overall physical activity, with just two-thirds of 20-year-olds meeting the national recommended guidelines of 30 minutes of moderate physical activity five times per week;
- Long periods of low physical activity alongside long periods of screen time, with one-third spending 3-5 hours online on a typical day and a further quarter online for more than five hours a day;
- Among sexually active 20-year-olds, only a third used condoms on every occasion of sexual intercourse.<sup>53</sup>

This suggests that while most Young Adults felt themselves to be in good health currently, their choices were not as healthy as they could be – and in several areas had deteriorated during the post-school transition – which may have repercussions for their physical health in the years to come. A key focus of the next follow-up with this cohort will therefore be to see whether this transition phase is a limited one of experimentation and indulgence in new-found freedoms or a more permanent shift to a less healthy lifestyle once parental and regulatory guidelines (such as on alcohol purchase and physical exercise in school) were lifted.

This report also looked at various dimensions of mental and emotional well-being. While many 20-yearolds were fairly satisfied with their lives, substantial minorities were experiencing at least some level of distress. This included a quarter who reported above-normal levels of stress and a fifth who had elevated scores on a measure of depressive symptoms. On both indicators young women were more likely than young men to report problems.

In addition to describing symptoms, 20-year-olds in *Growing Up in Ireland* provided insights into what they do to help them cope with stress and difficulties. Most of the commonly used strategies described by the Young Adults were constructive and included 'talking to friends', 'cheering oneself up with music or hobbies' (around 50% each) and 'discussing problems with parents or family' (approximately one-third). Only around 10 per cent said they would often drink alcohol or smoke to help them cope with stress. There were some marked gender differences in coping strategies with young men more likely to exercise or play sport (38% versus 26%) and young women more likely to discuss problems (44% versus 30%), 'treat themselves to something nice' (38% versus 27%) or 'take to the bed' (22% versus 13%).

Elsewhere in the survey, the importance of other people as a source of support to the 20-year-old was evident. Friends were the most popular sources of social support when the Young Adults needed someone with whom 'to discuss personal thoughts and feelings' for both young women (90%) and young men (81%). Mothers and romantic partners were also rated more often as a source of support by women (75% and 74% for women citing mothers and romantic partners respectively), but were cited as a source of support less often by men (63% and 61% for men citing mothers and romantic partners respectively). In general, men reported less likelihood to go to others for social support.

In terms of support or information with more practical issues, the source of help tended to vary with the nature of the problem. Parents were the most likely to be consulted by 20-year-olds if they were short of cash or had problems in their job (88% and 41% respectively) but friends were typically the first port of call for problems with coursework (50% compared to just 14% going to parents). For other issues, however, the Young Adult would typically go online first, such as finding accommodation or a job or getting information on social welfare entitlements. Young Adults from more advantaged backgrounds were more likely to seek a parent's support for job-seeking than those from the 'lower (skilled)/never worked' group (1.6 times more likely), accommodation (1.4 times) and help with coursework (1.8 times more likely).

<sup>53</sup> Although this might not be applicable to all types of relationship, 87 per cent of the cohort described themselves as 'heterosexual/straight' (3% were 'gay/lesbian' and 6% were 'bisexual').



Findings on physical and mental well-being at age 20, a period often characterised by transitions in economic status, living arrangements and responsibilities, highlighted a number of issues for policy development. While most 20-year-olds perceived themselves to be healthy, many had unhealthy lifestyles such as high rates of drinking and relatively high rates of smoking, and low rates of physical exercise, that left them exposed to later health problems.

Considering support networks and informal psychological support, 20-year-olds relied heavily on informal support from people in their friend and family networks for emotional, as well as practical, support. While it is positive that most Young Adults had someone to turn to, it raises questions about (a) how to fill this gap for 20-year-olds without this type of informal supportive network and (b) how to support the 20-year-olds who may not have the skills needed to support others and who themselves are being relied upon by others.

In terms of access to formal mental healthcare services, contact with 'general practitioners', 'psychologists counsellors etc' and 'psychiatrists' in the last 12 months was explored based on categorisation of the 20-year-olds into high and low stress categories of the DASS scale and high and low depression categories of the CES-D 8 scale. There was evidence that Young Adults with elevated symptoms of stress and depression had sought recent help for these conditions at a much greater rate (three and four times more from psychologists/counsellors respectively; four and five times more from psychiatrists respectively) than those who did not have such problems with stress or depression. However, 18 and 16 per cent of 20-year-olds who had reported high stress and depressive symptoms respectively had not sought help from these sources in the last 12 months. These subgroups translate into 3 per cent and 4.3 per cent of the full *Growing Up in Ireland* sample when looking at either stress or depression independently. These correspond to large numbers of young adults with clinically significant problems who appear to have unmet needs over at least the last 12 months. Future research on the *Growing Up in Ireland* data should use information on barriers to access and more detailed breakdowns of mental health diagnosis to better determine the potential barriers to healthcare at this important juncture in the Young Adults' lives.

The findings on formal and informal sources of social and psychological support highlight the importance of targeting public health information towards young adults in this crucial period of transition from school to further/higher education or employment. A substantial proportion of Young Adults, especially women, were experiencing elevated levels of psychological distress, a concerning finding given the already high level of unmet demand in community mental health services (Brick, Keegan, Wren, 2020).

#### 7.4 CONTINUITY AND CHANGE IN EXPERIENCES AND OUTCOMES

Looked at longitudinally, the findings indicate both continuity and change as the cohort moves from middle childhood to adolescence into early adulthood. For many, experiences of socio-emotional difficulties or poor health were short-lived. Future research would be helpful in identifying the protective factors which are associated with helping young people avoid persistent difficulties. However, an emerging theme across the study findings was the way in which experiences during adolescence (or even earlier) can shape outcomes in early adulthood, highlighting the importance of preventative supports during adolescence.

In relation to the decision to enter higher education after leaving school, there is considerable evidence that these foundations were laid well in advance. There was a clear association between both Parents' and Young People's expectations of achieving a degree (when they were just 13 years old) and subsequently starting a higher education course. Over 80 per cent of 13-year-olds who expected to get a degree were in higher education by the age of 20, compared to just 50 per cent of those who had been aiming for an upper secondary qualification or less. School experiences were also independently important for future plans around higher education. Those who stated that they disliked school at age 17/18 years were less likely to continue on to higher education (52% compared to 77% who liked school). These findings

indicate the importance of the role the school plays in engaging students and fostering plans for the future, highlighting the value of both formal guidance and the informal guidance and feedback provided by subject teachers (see also McNamara et al., 2020).

The findings point to an increase in the prevalence of risky health behaviours between 17/18 and 20 years of age. However, a large proportion of smoking behaviour in early adulthood was found to begin in the early teens. Similarly, hazardous drinking behaviour at 17/18 was a significant risk factor in potentially harmful behaviour three years later. Alongside parallel findings on cannabis use, the results highlight the importance of prevention measures during adolescence.

The likelihood of experiencing depressive symptoms at age 20 was significantly increased for those who had previously described having these kinds of feelings at the age 13- or 17/18-year interviews. Similarly, for some, socio-emotional difficulties in childhood and adolescence culminated in potentially harmful levels of aggression at 20 years of age. The mental health policy, *Sharing the Vision*, highlights the importance of providing a holistic approach to mental health and well-being, focusing on the role of early intervention and prevention strategies alongside primary care and specialist services. The report findings point to the potential for early intervention to help avoid long-term difficulties in early adulthood (and beyond).

Overall, the observed patterns merit a consideration of how these more negative trajectories could be interrupted at an earlier stage of development when, for example, it might be easier to channel suitable interventions towards young people with the help of schools or parents before individuals leave these forums for regular 'oversight'.

#### 7.5 THE CALM BEFORE THE STORM: EARLY ADULTHOOD BEFORE THE COVID-19 PANDEMIC

The interviews with 20-year-olds were carried out prior to any inkling that 2020 and 2021 (and perhaps beyond) would be characterised by a global pandemic. In December 2020, the cohort (who were then 22 years of age) were asked to complete a short survey specifically about their pandemic experiences. These findings provided unique insights into the challenges facing young adults in the wake of the pandemic (GUI Study Team, 2021). However, the current report has many findings that are also salient to policy responses to the pandemic. These are summarised as follows:

- At age 20, a very high proportion of Young Adults were still in higher education and thus will have experienced significant disruption to their learning experiences and subsequent transition into the world of work.
- Many students supported their education through part-time jobs. Pandemic-related employment loss disproportionately affected young people so will have significant consequences for the ability of young adults to fund their studies.
- Twenty-year-olds frequently received financial support from their parents. Even with this resource, one-in-ten were experiencing financial stress. There will be additional strain for those whose parents experienced income loss because of economic restrictions in support of public health.
- Other people, including friends and parents, were important sources of emotional support for young adults. Having reduced contact with these networks during pandemic restrictions will likely have had implications for their ability to cope with difficulties. However, nearly all 20-year-olds made frequent use of the internet for social media and messaging which was likely to help them maintain contact with friends during a period of physical isolation.
- Access to affordable and reliable internet will have been particularly important for young adults, given the move to remote learning and the pre-pandemic importance of technology to their leisure activities and maintaining connections with friends.



- A substantial minority of Young Adults in the study, particularly women, were experiencing concerning levels of psychological distress before the pandemic, placing them at risk for heightened difficulties during the pandemic.
- 'Exercise and sport' was a frequent coping strategy for many Young Adults, especially men, suggesting that the curtailment of team-based activities may have had some effects on well-being.

#### 7.6 WHAT NEXT FOR COHORT '98

At the time of writing, a further wave of data collection is planned with this cohort at 25 years of age. By that stage, most of the current students will likely have transitioned from higher education into the labour market and those who were already employed at age 20 will have several years of experience under their belt. From what the Young Adults revealed as part of their future aspirations, many of them in their mid-twenties will be working towards establishing themselves in a good job, with their own home and settling down with a partner. However, many of these plans may have been thwarted by the pandemic and its economic aftermath. Documenting the experiences of this cohort will be important in identifying groups of young adults in need of employment and other supports.

The report has presented an overview of what is happening in the key domains in the lives of young adults. It has documented, for the first time in Ireland, across such a wide range of domains and with a longitudinal perspective, the subjective experiences of moving into adulthood and how young adults negotiate new and changing relationships and contexts. By necessity, a descriptive report can provide only a summary account of many important issues. Future research can help unpack these patterns in much greater detail, providing important insights for policy into the consequences of the delayed transition to adulthood and socio-emotional challenges experienced by some groups of young adults. Most importantly, a longitudinal perspective encompassing a period from middle childhood to early adulthood, over a period of dramatic societal and economic change, can help identify the policy levers which will produce more positive outcomes for Ireland's future young adults.

#### 7.7 APPENDIX TO CHAPTER 7 – NOTE ON LATENT CLASS MODEL

#### 7.7.1 INTRODUCTION AND SAMPLE

A latent class model attempts to classify or categorise people based on the relationships among a set of observed variables. The aim was to go beyond what is possible with simple cross-tabulation and combine information on what 20-year-olds were doing after secondary school, where they were living and how they had fared in the Leaving Certificate to see if discrete groups could be found in the data. The software package Mplus was used for the analysis which allows a wide variety of variable types to be used in a robust modelling framework. An advantage is that this package can cope with having missing information on some of the variables. The overall sample contained all 20-year-olds from Wave 4 who provided information on at least one of the variables of interest (n = 5,190).

Following up on the discussion of transitions in Chapter 7, variables capturing the 20-year-old's 'Principal economic status', 'Rural/urban status', 'Living at home/elsewhere' and 'Performance in the Leaving Certificate (in quintiles)' were entered into a series of latent class models. Categorical variables were broken into binary dummy indicators and Leaving Certificate performance was retained as an ordinal variable. Overall, there was a low level of missing data with complete information ranging from 92 per cent to 100 per cent depending on the variable combination.

Latent class models were run on the data starting at a baseline of a single class model and increasing the number of potential classes at each step. The properties of the final selected model are presented first, followed by a technical discussion of the analysis supporting the selection of this model.

#### 7.7.2 FINAL MODEL DESCRIPTION

Three-Class Model	Features of each class					
Class 1 - 19%						
Early workforce	Mixed across urban and rural backgrounds					
entrants unlikely	Highly likely to be living at home					
to be in education/	Likely to be lower academic performers					
training	Almost all are working and unlikely to be in other forms of education/training					
Class 2 - 49%						
	Slightly more likely to be urban					
Staying at home	Highly likely to live at home					
further education	Broad spectrum of academic performance					
	Most likely to be in higher education than in work or other training					
Class 3 - 32%						
	Highly likely to be from a rural background					
Living out of home	Almost all living out of home					
education	Strong trend towards higher academic performers					
	Highly likely to be in higher education					

#### Table A.1 Three-Class Model summary



A three-class model provided the most compact explanation and the lowest misclassification of the comparison models. Table A.1 presents a summary of each class within that model in bold on the left as well as the proportion of 20-year-olds assigned to that class. Finally, the defining features of each class are briefly presented on the right.

#### 7.7.3 DETAILED RESULTS AND MODEL FIT COMPARISONS

Figure A.1 and Table A.2 present model fit statistics from one to five classes. Similar to factor analysis, selection of the best fitting model is a compromise between the amount of information explained by the model (Entropy) and the relationship of information criterion figures across models (Log likelihood-LL, Akaike Information Criterion-AIC, Bayseian Information Criterion-BIC and a Sample Size Adjusted BIC – SSABIC). These figures have no absolute value for a best fit on their own but can be compared against models with one higher or fewer classes to determine the best fitting model.

Lower information criterion scores, or a LL closer to zero indicate a better fitting model. Table A.2 displays fit statistics and a significance test accompanying each model, the Lo-Mendel-Ruben Test (LMRT) shows that each model has a significantly lower information criterion score than the previous one, but this significant change in scores must be considered relative to neighbouring models.

Number of latent classes	Log Likelihood	Best LL- replicated	Free parameters	AIC	BIC	SSABIC	LMRT (p)	Entropy
1	-19545.725	Y	10	39111.5	39177.0	39145.2	na	na
2	-19076.332	Y	21	38194.7	38332.3	38265.6	p < .001	0.804
3	-18747.425	Y	32	37558.9	37768.6	37666.9	p < .001	0.869
4	-18566.745	Y	43	37219.5	37501.3	37364.7	p < .001	0.808
5*	-18502.723	Y	54	37113.4	37467.4	37295.8	p < .001	0.847

#### Table A.2Latent Class Model fit statistics for 1-5 classes

\* Six-class models and above begin to run into model convergence problems as the number of possible permutations and computational requirements increases dramatically

#### Figure A.1 Information Criterion and Log Likelihood by number of latent classes



Figure A.1 displays diminishing returns for LL, AIC, BIC and SSABIC for each model above three classes. The information criterion curve flattens out considerably after a model with three classes.

This demonstrates that adding more classes adds complexity to the model (Free parameters) but does not explain enough information (Entropy) per additional parameter to be useful.

When diminishing returns in fit statistics are considered alongside model entropy, it can be seen that a three-class model offers the most parsimonious explanation of the data while also displaying the best overall range of fit statistics. Therefore, the three-class model was retained for further use (Highlighted in bold in Table A.2).

#### 7.7.4 CONSIDERING FEATURES OF COMPETING MODELS

A four-class model splits up participants from the early workforce entrant group and shows that there is a group with a moderate probability of being involved in further training while working, and a group that has a very low chance of being in any kind of training while working. There is a slight issue of misclassification between classes in this version of the model which results in lower entropy and loses some precision as a trade-off against another potentially useful breakdown of early workforce entrants.

A five-class model starts to extract groups of 2-3 per cent of the sample in size (100-150 20-year-olds) such as participants specifically from rural backgrounds who are working and not in any other form of training. This provides a more 'accurate' breakdown than the four-class model, but it is not particularly parsimonious. Strongly diminishing returns from model fit statistics support models with fewer than five classes.



#### REFERENCES

Abel, J.R. & Deitz, R. (2014). Do the benefits of college still outweigh the costs? *Current Issues in Economics and Finance*, 20(3).

Ahmed, K.A., Sharif, N. & Ahmad, N. (2017). Factors influencing students' career choices: empirical evidence from business students. *Journal of Southeast Asian Research*, 1(1), 1-15.

Akosah-Twumasi, P., Emeto, T.I., Lindsay, D., Tsey, K. & Malau-Aduli, B.S. (2018). A Systematic Review of Factors That Influence Youths Career Choices—the Role of Culture. *Frontiers in Education*, *3*(58), 1-15.

Alkhelil, A.H. (2016). The relationship between personality traits and career choice: A case study of secondary school students. *International Journal of Academic Research in Progressive Education and Development*, *5*(2), 2226-6348.

Amato, P.R. (2005). The impact of family formation change on the cognitive, social, and emotional wellbeing of the next generation. *The Future of Children*, *15*(2), 75-96.

American Psychiatric Association (1994). *Diagnostic And Statistical Manual of Mental Disorders: DSM-IV*. Washington, DC.

Amirkhan, J.H. (1990). A factor analytically derived measure of coping: The Coping Strategy Indicator. *Journal of Personality and Social Psychology*, *59*(5), 1066.

Angold, A., Costello, E.J., Messer, S.C., Pickles, A., Winder, F. & Silver, D. (1995). Development of a short questionnaire for use in epidemiological studies of depression in children and adolescents. *Int J Methods in Psychiatric Research, 5*, 237-249.

Aquilino, W.S. (1997). From adolescent to Young Adult: A prospective study of parent-child relations during the transition to adulthood. *Journal of Marriage and the Family, 59*(3), 670-686.

Aquilino, W.S. (1999). Two views of one relationship: Comparing parents' and Young Adult children's reports of the quality of intergenerational relations. *Journal of Marriage and the Family, 61*(4), 858-870.

Aquilino, W.S. (2006). Family relationships and support systems in emerging adulthood.

Armitage, R. (2002). Tackling anti-social behaviour: what really works. Retrieved from http://www.nacro. org.uk/data/resources/nacro-2004120296.pdf.

Arnett, J.J. (1998). Learning to stand alone: The contemporary American transition to adulthood in cultural and historical context. *Human Development, 41*, 295-315. https://doi.org/10.1159/000022591.

Arnett, J.J. (2000). Emerging adulthood: A theory of development from the late teens through the twenties. *American Psychologist, 55*(5), 469-480.

Arnett, J.J. (2007). Afterword: Aging out of care – toward realizing the possibilities of emerging adulthood. *New Dir Youth Dev, 113,* 151-161.

Arnett, J.J. (2014). *Emerging adulthood: The winding road from the late teens through the twenties* (2nd ed.). New York, NY: Oxford University Press.

Arnett, J.J. & Murray, J.L., (2019). Conceptual foundations of emerging adulthood. *Emerging adulthood and higher education: A new student development paradigm*, 11-24.

Babor, T.F., Higgins-Biddle, J.C., Saunders, J.B. & Monteiro, M.G. (2001). *The Alcohol Use Disorders Identification Test, Guidelines for Use in Primary Care.* Geneva: World Health Organization, Department of Mental Health and Substance Dependence.

Badura, P., Geckova, A.M., Sigmundova, D., van Dijk, J.P. & Reijneveld, S.A. (2015). 'When children play, they feel better': organized activity participation and health in adolescents. *BMC Public Health*, 15(1), 1090. https://doi.org/10.1186/s12889-015-2427-5.

Barber, N. (2018). Cross-National variation in attitudes to premarital sex: economic development, disease risk, and marriage strength. *Cross-Cultural Research*, *52*(3), 259-273.

Barone, C. & Assirelli, G. (2020). Gender segregation in higher education: an empirical test of seven explanations. *Higher Education*, 79(1), 55-78.

Bea, M.D. & Yi, Y. (2019). Leaving the Financial Nest: Connecting Young Adults' Financial Independence to Financial Security. *J. Marriage Fam*, 81: 397-414. https://doi.org/10.1111/jomf.12553.

Beenackers, M.A., Kamphuis, C., Giskes, K., Brug, J., Kunst, A., Burdorf, A. & van Lenthe, F.J. (2012). Socioeconomic inequalities in occupational, leisure-time, and transport related physical activity among European adults: A systematic review. *International Journal of Behavioral Nutrition and Physical Activity*, 9, 116.

Bergin, A., Kelly, E. & Redmond, P. (2020). The labor market in Ireland, 2000-2018. *IZA World of Labor*. doi:10.15185/izawol.410.v2.

Biddle, S.J., Ciaccioni, S., Thomas, G. & Vergeer, I. (2019). Physical activity and mental health in children and adolescents: an updated review of reviews and an analysis of causality. *Psychol Sport Exerc*, May 1;42:146-55.

Bobak, M. (2000). Smoke intake among smokers is higher in lower socio-economics groups. *Tobacco Control*, 9, 310-312.

Bobak, M., Jha, P., Nguyen, S. & Jarvis, M. (2000). Poverty and smoking. In P.C. Jha (Ed.), *Tobacco Control in Developing Countries* (pp. 41-61). Oxford: Oxford University Press.

Bodde, A.E. & Seo, D. (2009). A review of social and environmental barriers to physical activity for adults with intellectual disabilities. *Disability and Health Journal*, 2(2), 57-66.

Boden, J.M. & Fergusson, D.M. (2011). Alcohol and depression. Addiction, 106(5), 906-914.

Bozick, R., Alexander, K., Entwisle, D., Dauber, S. & Kerr, K. (2010). Framing the future: revisiting the place of educational expectations in status attainment. *Social Forces 88*(5): 2027-2052. doi:10.1353/sof.2010.0033.

Bradley, H. & Devadason, R. (2008). Fractured transitions: Young adults' pathways into contemporary labour markets. *Sociology*, *42*(1), 119-136.

Brick, A., Keegan, C., Wren, M.A. (2020). *Baseline Utilisation and Demand for Specialist Mental Health* Services in Ireland 2018. Dublin: ESRI.

Bronfenbrenner, U. & Morris, P.A. (2006). The bioecological model of human development. In R. M. Lerner & W. Damon (eds.), *Handbook of Child Psychology*, Wiley & Sons.

Brugman, S., Cornet, L.J., Smeijers, D., Smeets, K., Oostermeijer, S., Buitelaar, J.K., ... & Jansen, L.M. (2017). Examining the reactive proactive questionnaire in adults in forensic and non forensic settings: A variable and person based approach. *Aggressive behavior*, *43*(2), 155-162.

Burke, L., Nic Gabhainn, S. & Young, H. (2015). Student sex: more or less risky than other Young Adults? Sex *Education*, *15*(1), 31-47.

Bynner, J. (2005). Rethinking the youth phase of the life-course: The case for emerging adulthood? *Journal of youth studies*, *8*(4), 367-384.

Byrne, D. & Smyth, E. (2010). No way back? The dynamics of early school leaving. Dublin: The Liffey Press.

Cannon, M., Coughlan, H., Clarke, M., Harley, M. & Kelleher, I. (2013). *The Mental Health of Young People in Ireland: A report of the Psychiatric Epidemiology Research across the Lifespan (PERL) Group.* Dublin: Royal College of Surgeons in Ireland.

Carreras, M. & Castañeda-Angarita, N. (2019). Economic adversity and electoral participation of vulnerable socioeconomic groups. *Electoral Studies*, *57*, 110-120.

Carson, V., Hunter, S., Kuzik, N., Gray, C.E., Poitras, V.J., Chaput, J.P. & Tremblay, M.S. (2016). Systematic review of sedentary behaviour and health indicators in school-aged children and youth: an update. *Appl Physiol Nutr Metab*, *41*(6 Suppl 3), S240-265. doi:10.1139/apnm-2015-0630

Carver, C.S. (1997). You want to measure coping but your protocol's too long: Consider the Brief COPE. *International Journal of Behavioural Medicine* 4(1), 92-100.

Carver, C.S. (2013). COPE Inventory. Measurement Instrument Database for the Social Sciences, Retrieved from: www.midss.org.



Castillo, L.G. & Schwartz, S.J. (2013). Introduction to the special issue on college student mental health. *Journal of Clinical Psychology, 69,* 291-297. doi:10.1002/jclp.21972.

Central Statistics Office (1970). *Report on Vital Statistics*. Dublin: The Stationery Office. Retrieved from: https://www.cso.ie/en/media/csoie/releasespublications/documents/birthsdm/archivedreports/P-VERSUS\_1970.pdf.

Central Statistics Office (2020). *Marriages 2019.* Retrieved from: https://www.cso.ie/en/releasesandpublications/er/mar/marriages2019/.

Central Statistics Office (2016). Census of Population 2016 – Profile 9 Health, Disability and Carers – Types of disability. Retrieved from: https://www.cso.ie/en/releasesandpublications/ep/p-cp9hdc/p8hdc/p9tod/.

Central Statistics Office (2018). Press statement Marriages 2018. Retrieved from https://www.cso.ie/en/ csolatestnews/pressreleases/2019pressreleases/pressstatementmarriages2018/#:~:text=Brides%20and%20 grooms%20getting%20older,and%2036.4%20years%20for%20grooms&text=The%20CSO%20has%20 today%20(10,registered%20in%20Ireland%20in%202018.

Centres for Disease Control and Prevention (2014). The health consequences of smoking – 50 years of progress: A report of the Surgeon General. Atlanta, GA: National Center for Chronic Disease Prevention and health Promotion (US) Office on Smoking and Health.

Chango, J.M., Allen, J.P., Szwedo, D. & Schad, M.M. (2015). Early adolescent peer foundations of late adolescent and Young Adult psychological adjustment. *Journal of research on adolescence, 25*(4), 685-699.

Chow, A., Galambos, N.L. & Krahn, H.J. (2017). Work values during the transition to adulthood and midlife satisfaction: Cascading effects across 25 years. *International Journal of Behavioral Development*, *41*(1), 105-114.

Cima, M., Raine, A., Meesters, C. & Popma, A. (2013). Validation of the Dutch Reactive Proactive Questionnaire (RPQ): differential Correlates of Reactive and Proactive Aggression from childhood to adulthood. *Aggress Behav, 39*(2), 99-113. doi:10.1002/ab.21458.

Clancy, P. & O'Sullivan, S. (2020). Gender parity in higher education enrolments: trends and paradoxes. *Irish Educational Studies*, online first.

Clark, V., Tuffin, K., Frewin, K. & Bowker, N. (2017). Shared housing among Young Adults: avoiding complications in domestic relationships. *Journal of Youth Studies*, *20*(9), 1191-1207.

Collins, S.E. (2016). Associations between socioeconomic factors and alcohol outcomes. *Alcohol Res*, 38(1), 83-94.

Conley, C.S., Durlak, J.A. & Kirsch, A.C. (2015). A meta-analysis of universal mental health prevention programs for higher education students. *Prevention Science*, *16*, 487-507.

Connolly, S. & Wren, M.A. (2017). Unmet healthcare needs in Ireland: Analysis using the EU-SILC survey. *Health Policy*, *121*(4), 434-441. doi:10.1016/j.healthpol.2017.02.009.

Cook, M.N., Peterson, J. & Sheldon, C. (2009). Adolescent depression: an update and guide to clinical decision making. *Psychiatry (Edgmont), 6*(9), 17.

Corder, K., Winpenny, E., Love, R., Brown, H., White, M. & van Sluijs, E. (2019). Change in physical activity from adolescence to early adulthood: a systematic review and meta-analysis of longitudinal cohort studies. *British Journal of Sports Medicine*, *53*(1), 496-503.

Crawford, J.R. & Henry, J.D. (2003). The Depression Anxiety Stress Scales (DASS): normative data and latent structure in a large non-clinical sample. *Br J Clin Psychol*, *42*(Pt 2), 111-131. doi:10.1348/014466503321903544.

Crites, J.O. (1976). A comprehensive model of career development in early adulthood. *Journal of Vocational Behavior*, *9*(1), 105-118.

Cronin, D. & McQuinn, K. (2015). *Irish Fiscal Policy in Good Times and in Bad: Its Impact During Different Stages of the Economic Cycle*. Quarterly Economic Commentary Special Article. ESRI. Dublin.

Dasgupta, N., Scircle, M.M. & Hunsinger, M. (2015). Female peers in small work groups enhance women's motivation, verbal participation, and career aspirations in engineering. *Proceedings of the National Academy of Sciences*, *112*(16), 4988-4993.

Day, D.M. & Wanklyn, S.G. (2012). Identification and Operationalization of the Major Risk Factors for Antisocial and Delinquent Behaviour among Children and Youth. Ottawa, ON: Public Safety Canada.

De Graaf, R., Tuithof, M., van Dorsselaer, S. & ten Have, M. (2012). Comparing the effects on work performance of mental and physical disorders. *Social Psychiatry and Psychiatric Epidemiology, 47*(11), 1873-1883.

Deci, E.L. & Ryan, R.M. (2000). The "what" and "why" of goal pursuits: Human needs and the self-determination of behavior. *Psychological inquiry*, *11*(4), 227-268.

Demir, M. & Wayne, S. (2007). Close friendships and happiness among Young Adults. Detroit, MI: Wayne State University.

Demir, M. (2008). Sweetheart, you really make me happy: Romantic relationship quality and personality as predictors of happiness among emerging adults. *Journal of Happiness Studies, 9*(2), 257-277.

Dennison, M., Sisson, S.B. & Morris, A. (2016). Obesogenic behaviours and depressive symptoms in children: a narrative literature review. *Obes Rev, 17*(8), 735-757. doi:10.1111/obr.12419

Department of Children and Youth Affairs (2014). Better Outcomes, Brighter Futures: The National Policy Framework for Children and Young People 2014-2020. Dublin: Stationery Office.

Department of Children and Youth Affairs (2018). *LGBTI+ National Youth Strategy 2018-2020—LGBTI+ young people: visible, valued and included.* Dublin: Department of Children and Youth Affairs.

Department of Children and Youth Affairs (2015). *National Youth Strategy 2015-2020*. Retrieved from www.dcya.ie.

Department of Further and Higher Education, Research, Innovation and Science (2021). Action Plan for Apprenticeship 2021-2025. Retrieved from www.gov.ie/dfheris.

Department of Health (2013). *Healthy Ireland – A Framework for Improved Health and Wellbeing 2013-2025*. Dublin: Government Publications.

Department of Health (2016). Get Ireland Active! National Physical Activity Plan for Ireland. Dublin: Government Publications.

Department of Health (2017). Reducing harm, supporting recovery: A health-led response to drug and alcohol use in Ireland 2017-2025. Dublin: Government Publications.

Department of Health (2019). Healthy Ireland – Summary Report 2019. Dublin: Government Publications.

Department of Transport, Tourism and Sport (2018). *National Sports Policy 2018-2027*. Dublin: Government Publications.

Devins Orme, C.M., Costello, C.G., Binik, Y.M., Frizzell, B., Stam, H.J. & Pullin, W.M. (1988). Measuring depressive symptoms in illness populations: Psychometric properties of the Center for Epidemiologic Studies Depression (CES-D) Scale. *Psychology & Health*, *2*(2), 139-156.

Dini, B.M. & Raine, A. (2019). An Item Response Theory Analysis and Further Validation of the Reactive-Proactive Aggression Questionnaire (RPQ): The Serbian Adaptation of the RPQ. *J Pers Assess*, 1-11. doi:10 .1080/00223891.2019.1573430.

Dixon, J.B. (2010). The effect of obesity on health outcomes. *Molecular and cellular endocrinology*, 316(2), 104-108. DOI: https://doi.org/10.1016/j.mce.2009.07.008.

Dooley, B.A. & Fitzgerald, A. (2012). *My world survey: National study of youth mental health in Ireland*. Dublin: Headstrong and UCD School of Psychology.

Dooley, B., O'Connor, C., Fitzgerald, A. & O'Reilly, A. (2020). *My world survey: National study of youth mental health in Ireland*. Dublin: Jigsaw and UCD School of Psychology.

Dooley, B.A., O'Connor, C. & Fitzgerald, A. (2019). *My World Survey 2: The National Study of Youth Mental Health in Ireland*. Dublin: Jigsaw, the National Centre for Youth Mental Health and University College Dublin School of Psychology.

Dumith, S.C., Gigante, D.P., Domingues, M.R. & Kohl III, H.W. (2011). Physical activity change during adolescence: a systematic review and a pooled analysis. *International Journal of Epidemiology*, 40 (3), 685-698.



Eisenberg, N., Valiente, C., Spinrad, T.L., Cumberland, A., Liew, J., Reiser, M., Zhou, Q. & Losoya, S.H. (2009). Longitudinal relations of children's effortful control, impulsivity, and negative emotionality to their externalizing, internalizing, and co-occurring behavior problems. *Developmental Psychology*, 45(4), 988-1008. https://doi.org/10.1037/a0016213.

Eurofound (2019). *Household composition and well-being*. Luxembourg: Publications Office of the European Union.

European Commission (2013). 'The effectiveness and costs-benefits of apprenticeships: Results of the quantitative analysis'. Retrieved from: http://ec.europa.eu/social/BlobServlet?docId=11352&langId=en.

European Commission (2015). *Dropout and Completion in Higher Education in Europe*. Luxembourg: European Commission.

European Commission (2018). *Situation of young people in the European Union*. Brussels: European Commission.

European Council (2013). Council recommendation of 22 April 2013 on establishing a Youth Guarantee. *Official Journal of the European Union, C, 120,* 1-6.

European Monitoring Centre for Drugs and Drug Addiction (2017). *Ireland, Country Drug Report 2017*. Retrieved from http://www.emcdda.europa.eu/system/files/publications/4520/TD0616149ENN.pdf.

Eurostat (2018). Employment rate by educational attainment level. Retrieved from https://ec.europa.eu/ eurostat/tgm/refreshTableAction.do?tab=table&plugin=1&pcode=tepsr\_wc120&language=en 6 November 2020.

Eurostat (2020). Age of young people leaving their parental household – Statistics Explained. Data extracted August 2020. Retrieved from https://ec.europa.eu/eurostat/statistics-explained/pdfscache/87422. pdf 6 November 2020.

Family Carers Ireland (2019). Carers in Crisis. Retrieved from https://familycarers.ie/media/1410/family-carers-ireland-pre-budget-2019-submission.pdf.

Farrell, C., McAvoy, H., Wilde, J. & Combat Poverty Agency (2008). *Tackling Health Inequalities – An All-Ireland Approach to Social Determinants*. Dublin: Combat Poverty Agency/Institute of Public Health in Ireland.

Fenton, S. & Dermott, E. (2006). Fragmented careers? Winners and losers in young adult labour markets. *Work, Employment and Society, 20*(2), 205-221.

Filus, A., Schwarz, B., Mylonas, K., Sam, D.L. & Boski, P. (2018). Parenting and Late Adolescents' Well-Being in Greece, Norway, Poland and Switzerland: Associations with Individuation from Parents. *Journal of Child and Family Studies*, 28(2), 560-576. doi:10.1007/s10826-018-1283-1.

Fincham, F.D. & Cui, M. (Eds.) (2010). *Romantic relationships in emerging adulthood*. Cambridge: Cambridge University Press.

Fingerman, K.L. (2017). Millennials and their parents: Implications of the new young adulthood for midlife adults. *Innovation in Aging*, 1(3), igx026.

Flanagan, C. & Levine, P. (2010). Civic engagement and the transition to adulthood. *The future of children*, 159-179.

Forrest, C.B., Bevans, K.B., Riley, A.W., Crespo, R. & Louis, T.A. (2011). School outcomes of children with special health care needs. *Pediatrics*, 128(2), 303-312. https://doi.org/10.1542/peds.2010-3347.

Fouad, N.A. (2007). Work and vocational psychology: Theory, research, and applications. *Annu. Rev. Psychol.*, 58, 543-564.

Frick P.J. & Viding E. (2009). Antisocial behavior from a developmental psychopathology perspective. *Development and Psychopathology, 21*(4), 1111-1131.

Frost, R.L. & Rickwood, D.J. (2017). A systematic review of the mental health outcomes associated with Facebook use. *Computers in Human Behavior, 76,* 576-600. doi:10.1016/j.chb.2017.08.001.

Fryer, T. & Brugha, T. (2013). Childhood determinants of adult psychiatric disorder. *Clin Pract Epidemiol Ment Health, 9,* 1-50.

Furman, W. & Buhrmester, D. (1985). Children's perceptions of the personal relationships in their social networks. *Developmental psychology*, 21(6), 1016. https://doi.org/10.1037/0012-1649.21.6.1016.

Furman, W. & Buhrmester, D. (2009). Methods and measures: The network of relationships inventory: Behavioral systems version. *International journal of behavioral development*, *33*(5), 470-478.

Gaby, S. (2017). The civic engagement gap (s): Youth participation and inequality from 1976 to 2009. Youth & Society, 49(7), 923-946.

Gangl, M. (2002). Changing labour markets and early career outcomes: labour market entry in Europe over the past decade. *Work, Employment and Society*, 16(1), 67-90. https://doi.org/10.1177/09500170222119254.

Garbarino, J. (1982). *Children and Families in the Social Environment.* Hawthorne, Aldine de Gruyer; New York.

Gay and Lesbian Equality Network (2016). Being LGBT in School: A Resource for Post-Primary Schools to Prevent Homophobic and Transphobic Bullying and Support LGBT Students. Dublin: Department of Education and Skills.

Girard, L.C., Tremblay, R.E., Nagin, D. & Cote, S.M. (2019). Development of Aggression Subtypes from Childhood to Adolescence: A Group-Based Multi-Trajectory Modelling Perspective. *J Abnorm Child Psychol*, *47*(5), 825-838. doi:10.1007/s10802-018-0488-5.

Global Kids Online (2019). *Global Kids Online, summary report – Growing up in a connected world*. Florence, Italy: UNICEF Office of Research – Innocenti.

Goldscheider, F. & Davanzo, J. (1986). Semiautonomy and leaving home during early adulthood. Social Forces, 65, 187-201. https://doi.org/10.1093/sf/65.1.187.

Goldsmith, J. (2018). Emerging adults' relationships with their parents. Clinical Science Insights, 1(1), 1-6.

Goodman M., Adams, N., Corneil, T., Kreukels, B., Motmans, J., Coleman (2019). Size and Distribution of Transgender and Gender Nonconforming Populations. *Transgender Medicine, An Issue of Endocrinology and Metabolism Clinics of North America eBook*, 48(2).

Government of Ireland (2020). Sharing the Vision: A Mental Health Policy for Everyone. Dublin: Stationery Office.

Government of Ireland (2006). A vision for change: Report of the expert group on mental health policy. Dublin: Stationery Office.

Government of Ireland (2015a). *Gender Recognition Act 2015*. Dublin: Government of Ireland Retrieved from http://www.irishstatutebook.ie/eli/2015/act/25/enacted/en/print#sec8.

Government of Ireland (2015b). *Marriage Act 2015*. Dublin: Government of Ireland Retrieved from http://www.irishstatutebook.ie/eli/2015/act/35/section/1/enacted/en/html#sec1.

Grasso, M. (2018). Young people's political participation in Europe in times of crisis. In Young people regenerating politics in times of crises (pp. 179-196). Paris: Palgrave Macmillan.

Grätz, M. & Wiborg, O.N. (2020). Reinforcing at the top or compensating at the bottom? Family background and academic performance in Germany, Norway, and the United States. *European Sociological Review*, *36*(3), 381-394. https://doi-org.elib.tcd.ie/10.1093/esr/jcz069.

Griffin, E., McTernan, N., Wrigley, C., Nicholson, S., Arensman, E., Williamson, E. & Corcoran, P. (2019). *National Self-Harm Registry Ireland Annual Report 2018.* Cork: National Suicide Research Foundation.

Grodsky, E. & Jones, M.T. (2007). Real and imagined barriers to college entry: Perceptions of cost. *Social Science Research*, *36*(2), 745-766.

Grosemans, I. (2018). Future-proof: Increasing the understanding of work-related learning in the transition from higher education to work. Leuven: KU Leuven.

Grosemans, I., Hannes, K., Neyens, J. & Kyndt, E. (2020). Emerging Adults Embarking on Their Careers: Job and Identity Explorations in the Transition to Work. *Youth & Society*, 52(5), 795819. https://doi.org/10.1177/0044118X18772695.



Growing Up in Ireland Study Team (2019a). *Key findings: Cohort '98 at 20 years old in 2018/19, Education, training and employment* (No.4). Dublin: ESRI/TCD/DCYA.

Growing Up in Ireland Study Team (2019b). *Key findings: Cohort '98 at 20 years old in 2018/19, Socioemotional well-being and key relationships at age 20* (No.3). Dublin: ESRI/TCD/DCYA.

Growing Up in Ireland Study Team (2019c). *Key findings: Cohort '98 at 20 years old in 2018/19, Being 20 years old* (No.1). Dublin: ESRI/TCD/DCYA.

Growing Up in Ireland Study Team (2021). Key Findings: Special COVID-19 Survey. Dublin: ESRI/TCD/DCEDIY.

Guetto, R. & Vergolini, L. (2017). Educational expansion without equalization: a reappraisal of the 'effectively maintained inequality' hypothesis in children's choice of the upper secondary track. *European Societies*, *19*(1), 1-27.

Guo, L., Baruch, Y. & Russo, M. (2017). Work resources and civic engagement: Benefits to employee physical and mental health. *Journal of Vocational Behavior*, *100*, 56-66.

Hafeez, H., Zeshan, M., Tahir, M.A., Jahan, N. & Naveed, S. (2017). Health care disparities among lesbian, gay, bisexual, and transgender youth: A literature review. *Cureus*, 9(4).

Hale, L. & Guan, S. (2015). Screen time and sleep among school-aged children and adolescents: a systematic literature review. *Sleep Medicine Reviews*, *21*, 50-58.

Hayward, R. & Sharp, C. (2005). Young people, crime and antisocial behaviour: findings from the 2003 Crime and Justice Survey. London: Home Office.

Henry, J.D. & Crawford, J.R. (2005). The short form version of the Depression Anxiety Stress Scales (DASS 21): Construct validity and normative data in a large non clinical sample. *British journal of clinical psychology,* 44(2), 227-239.

Hernanz, V. & Jimeno, J.F. (2017). Youth Unemployment in the EU. *CESifo Forum, 18*(2), 3-10. München: Institut für Wirtschaftsforschung an der Universität München.

Higgins, A., Doyle, L., Downes, C., Murphy, R., Sharek, D. & DeVries, J. (2016). *The LGBTIreland Report: national study of the mental health and wellbeing of lesbian, gay, bisexual, transgender and intersex people in Ireland*. Dublin: GLEN and BeLonG To.

Higher Education Authority (2018). Graduate Outcomes Survey: The Class of 2017. Retrieved from https:// hea.ie/assets/uploads/2019/02/HEA-Graduate-Outcomes-Survey.pdf.

Higher Education Authority (2019). *An Analysis of Completion in Irish Higher Education: 2007/08 Entrants*. Dublin: Author.

Hipwell, A.E., Loeber, R., Stouthamer-Loeber, M., Keenan, K., White, H.R. and Kroneman, L. (2002). Characteristics of girls with early onset disruptive and antisocial behaviour. *Criminal Behav. Ment. Health*, 12: 99-118. https://doi.org/10.1002/cbm.489.

Hofstede, G. (2011). Dimensionalizing Cultures: The Hofstede Model in Context. Online Readings in *Psychology and Culture*, 2(1). doi:10.9707/2307-0919.1014.

Holt, L.J., Mattanah, J.F. & Long, M.W. (2018). Change in parental and peer relationship quality during emerging adulthood: Implications for academic, social, and emotional functioning. *Journal of Social and Personal Relationships*, *35*(5), 743-769.

Hovdhaugen, E. (2015). Working while studying: the impact of term-time employment on dropout rates. *Journal of Education and Work*, 28(6), 631-651.

Idler, E.L. & Benyamini, Y. (1997). Self-rated health and mortality: a review of twenty-seven community studies. *Journal of Health and Social Behavior, 38*(1), 21-37.

Ilardi, B.C., Leone, D., Kasser, T. & Ryan, R.M. (1993). Employee and supervisor ratings of motivation: Main effects and discrepancies associated with job satisfaction and adjustment in a factory setting 1. *Journal of Applied Social Psychology*, *23*(21), 1789-1805.

Institute for Economics and Peace (2018). *Global Terrorism Index 2018; Measuring the impact of terrorism.* Maryland: START.

Ipsos MRBI (2017). Social Networking Tracker, December 2017. Retrieved from https://www.ipsos.com/enie/social-networking-nov-17.

Ipsos MRBI (2019). Social Networking Tracker, December 2019. Retrieved from https://www.ipsos.com/en-ie/social-networking-and-messaging-trackers-december-2019.

Jackson, M. (Ed.) (2013). Determined to Succeed?: Performance versus Choice in Educational Attainment. Stanford: Stanford University Press.

Janssen, I., Katzmarzyk, P.T. & Ross, R. (2004). Waist circumference and not body mass index explains obesity related health risk. *The American Journal of Clinical Nutrition*, 79(3), 379-384.

Keane, C., Doorley, K. & Tuda, D. (2021). COVID-19 and the Irish Welfare System. Dublin: ESRI.

Keegan, C. (2020). The introduction of lifetime community rating in the Irish private health insurance market: Effects on coverage and plan choice. *Soc Sci Med*, *255*, 113006. doi:10.1016/j.socscimed.2020.113006.

Kessler, R.C., Amminger, P., Aguilar-Gaxiola, S., Alonso, J., Lee, S. & Ustun, T.B. (2007). Age of onset of mental disorders: A review of recent literature. *Curr Opin Psychiatry*, 20(4): 359-364.

Kessler, R.C., Berglund, P., Demler, O., Jin, R., Merikangas, K.R. & Walters, E.E. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. *Arch Gen Psychiatry, 62*(6), 593-602. doi:10.1001/archpsyc.62.6.593.

Koestner, R. & Holding, A. (2021). A generative legacy: SDT's refined understanding of the central role of autonomy. *Motivation Science*, 7(2), 111-112.

Költo, A., Vaughan, E., O'Sullivan, L., Kelly, C., Saewyc, E.M. & Nic Gabhainn, S. (2021). *LGBTI+ Youth in Ireland and across Europe: A two-phased landscape and research gap analysis*. Department of Children, Equality, Disability, Integration and Youth and NUI Galway, doi: 10.13025/wpbs-nw37.

Krug, E.G., Mercy, J.A., Dahlberg, L.L. & Zwi, A.B. (2002). The world report on violence and health. *The Lancet*, *360*(9339), 1083-1088.

Krug, G. & Eberl, A. (2018). What explains the negative effect of unemployment on health? An analysis accounting for reverse causality. *Research in Social Stratification and Mobility*, *55*, 25-39.

Landstedt, E., Almquist, Y.B., Eriksson, M. & Hammarström, A. (2016). Disentangling the directions of associations between structural social capital and mental health: longitudinal analyses of gender, civic engagement and depressive symptoms. *Social science & medicine*, *163*, 135-143.

Lange, C. & Byrd, M. (1998). The relationship between perceptions of financial distress and feelings of psychological well-being in New Zealand university students. *International journal of adolescence and youth*, 7(3), 193-209.

Laplante, B., Castro-Martín, T., Cortina, C. & Fostik, A. (2020). Unmarried cohabitation and its fertility in Ireland: Towards post-Catholic family dynamics? *Irish Journal of Sociology*, *28*(1), 5-28.

Lazarus R.S. & Folkman S. (1984). Stress, Appraisal and Coping. New York: Springer.

Lazarus, R.S. (1966). Psychological stress and the coping process. New York: McGraw-Hill.

Lee, C.Y.S. & Dik, B.J. (2017). Associations among stress, gender, sources of social support, and health in emerging adults. *Stress and Health*, 33(4), 378-388.

Lee, I.M., Shiroma, E.J., Lobelo, F., Puska, P., Blair, S.N. and Katzmarzyk, P.T. (2012). Effect of physical inactivity on major non-communicable diseases worldwide: an analysis of burden of disease and life expectancy. *Lancet*, *380*(9838), 21-27.

Lee, Y.Y., Stockings, E.A., Harris, M.G., Doi, S.A.R., Page, I.S., Davidson, S.K. & Barendregt, J.J. (2019). The risk of developing major depression among individuals with subthreshold depression: a systematic review and meta-analysis of longitudinal cohort studies. *Psychol Med*, *49*(1), 92-102. doi:10.1017/S0033291718000557.



Leu, A. & Becker, S. (2017). A cross-national and comparative classification of in-country awareness and policy responses to 'young carers', *Journal of Youth Studies*, 20:6, 750-762, DOI: 10.1080/13676261.2016.1260698.

Lin, M.C. & Ching, G.S. (2014). College students' employability: implications of part-time job during college years. *Advances in Public, Environmental and Occupational Health*, 101-106.

Lindell, A.K., Campione-Barr, N. & Killoren, S.E. (2017). Implications of parent – child relationships for emerging adults' subjective feelings about adulthood. *Journal of Family Psychology, 31*(7), 810.

Lindell, A.K. & Campione-Barr, N. (2017). Continuity and change in the family system across the transition from adolescence to early adulthood. *Marriage & Family Review, 53*, 388-416.

Lindell, A.K., Campione-Barr, N. & Killoren, S.E. (2017). Implications of parent-child relationships for emerging adults' subjective feelings about adulthood. *Journal of Family Psychology*, 31(7), 810.

Livingstone, S., Haddon, L., Görzig, A. & Ólafsson, K. (2011). *EU Kids Online final report*. London, UK: Retrieved from: http://eprints.lse.ac.uk/39351/.

Lucas, S.R. (2001). Effectively maintained inequality: Education transitions, track mobility, and social background effects. *American Journal of Sociology*, *106*(6), 1642-1690.

Lunn, P.D. (2010). The sports and exercise life-course: A survival analysis of recall data from Ireland. Social Science & Medicine, 70(5), 711-719.

Lupien, S.J., McEwen, B.S., Gunnar, M.R. & Heim, C. (2009). Effects of stress throughout the lifespan on the brain, behaviour and cognition. *Nature reviews neuroscience*, *10*(6), 434.

Luyckx, K., Vansteenkiste, M., Goossens, L. & Duriez, B. (2009). Basic need satisfaction and identity formation: Bridging self-determination theory and process-oriented identity research. *Journal of counselling psychology*, *56*(2), 276.

Malone, P. (2019). *Education and Employment: a review of educational attainment and labour market outcomes.* Dublin: UCD. Retrieved from Education\_and\_Employment\_attainment\_and\_labour\_market\_Outcomes.pdf (publicpolicy.ie).

Mann, F.D., Patterson, M.W., Grotzinger, A.D., Kretsch, N., Tackett, J.L., Tucker-Drob, E.M. & Harden, K.P. (2016). Sensation seeking, peer deviance, and genetic influences on adolescent delinquency: Evidence for person-environment correlation and interaction. *Journal of abnormal psychology, 125*(5), 679.

Marmot, M. (2005). Social determinants of health inequalities. Lancet, 365, 1099-1104.

Marsh, M. (2020). *Will turnout be affected by Saturday vote?* RTÉ News. Retrieved from https://www.rte. ie/news/election-2020/2020/2020/1113265-voting-on-saturday/.

McCoy, S. & Byrne, D. (2017). Student retention in higher education. In J. Cullinan & D. Flannery (eds.), *Economic Insights on Higher Education Policy in Ireland* (pp. 111-141). Palgrave Macmillan.

McCoy, S. & Smyth, E. (2011). Higher education expansion and differentiation in the Republic of Ireland. *Higher Education*, 61(3), 243-260.

McCoy, S., Smyth, E., Watson, D. & Darmody, M. (2014). *Leaving school in Ireland: A longitudinal study of post-school transitions.* (ESRI Research Series, No. 36.) Dublin: The Economic and Social Research Institute.

McElroy, S.L., Kotwal, R., Malhotra, S., Nelson, E.B., Keck, P.E. & Nemeroff, C.B. (2004). Are mood disorders and obesity related? A review for the mental health professional. *The Journal of Clinical Psychiatry*, 65(5), 634-651.

McGee, H. (2020). 'Election 2020: Exit Poll Confirms Health, Housing, Homelessness of Most Concern to Voters.' The Irish Times, 9 Feb. 2020, Retrieved from: https://www.irishtimes.com/news/politics/election-2020-exit-poll-confirms-health-housing-homelessness-of-most-concern-to-voters-1.4167030.

McGuinness, S., Bergin, A., Kelly, E., McCoy, S., Smyth, E., Watson, D. & Whelan, A. (2018). *Evaluation of PLC Programme Provision*. Dublin: ESRI.

McNamara, E., Murphy, D., Murray, A., Smyth, E. & Watson, D. (2020). *Growing Up in Ireland: The Lives of 17/18-Year-Olds* (Report no.7). Dublin: The Stationery Office.

McNamara, E., O'Reilly, C., Murray, A., O'Mahony, D., Williams, J., Murphy, D., McClintock, R. & Watson, D. (2021). *Design, Instrumentation and Procedures for Cohort '98 (Child Cohort) at Wave 4 (20 years of age).* Dublin: ESRI/TCD/DCEDIY.

Melchior, L.A., Huba, G.J., Brown, V.B. & Reback, C.J. (1993). A short depression index for women. *Educational and Psychological Measurement*, 53(4), 1117-1125.

Melkevik, O., Torsheim, T. & Rasmussen, M. (2010). Patterns of screen-based sedentary behavior and physical activity and associations with overweight among Norwegian adolescents: a latent profile approach. *Norsk Epidemiologi*, 20(1).

Miller, G., Coffield, E., Leroy, Z. & Wallin, R. (2016). Prevalence and costs of five chronic conditions in children. *Journal of School Nursing*, 32(5), 357-364. https://doi.org/10.1177/1059840516641190.

Milyaversuskaya, M. & Koestner, R. (2011). Psychological needs, motivation, and well-being: A test of selfdetermination theory across multiple domains. *Personality and individual differences*, *50*(3), 387-391.

Milyaversuskaya, M., Gingras, I., Mageau, G.A., Koestner, R., Gagnon, H., Fang, J. & Boiché, J. (2009). Balance across contexts: Importance of balanced need satisfaction across various life domains. *Personality and Social Psychology Bulletin*, 35(8), 1031-1045.

Mitchell, B. & Lennox, R. (2020). 'You Gotta Be Able to Pay Your Own Way': Canadian News Media Discourse and Young Adults' Subjectivities of Successful Adulting. *Canadian Journal of Sociology*, 45(3), 213-237.

Moffitt, T.E. (1993). Adolescence-Limited and Life-Course-Persistent Antisocial Behavior: A Developmental Taxonomy. *Psychological Review, 100,* 674-701.

Moffitt, T.E. & Caspi, A. (2001). Childhood predictors differentiate life-course persistent and adolescencelimited antisocial pathways among men and women. *Development and psychopathology, 13*(2), 355-375.

Mohebbi, M., Nguyen, V., McNeil, J.J., Woods, R.L., Nelson, M.R., Shah, R.C., Berk, M. (2018). Psychometric properties of a short form of the Center for Epidemiologic Studies Depression (CES-D-10) scale for screening depressive symptoms in healthy community dwelling older adults. *Gen Hosp Psychiatry*, *51*, *118*-125. doi:10.1016/j.genhosppsych.2017.08.002.

Mounsey, R., Vandehey, M. & Diekhoff, G. (2013). Working and non-working university students: Anxiety, depression, and grade point average. *College Student Journal*, *47*(2), 379-389.

Murphy, E., O'Sullivan, I., O'Donovan, D., Hope, A. & Dvoren, M.P. (2016). The association between parental attitudes and alcohol consumption and adolescent alcohol consumption in Southern Ireland: a cross-sectional study. *BMC Public Health*, 16: 821.

Murray, A., Smyth, E., Mangan-Ryan, A., McNamara, E., O'Mahony, D., Murphy, D. & O'Reilly, C. (2020). Growing up and developing as an adult: A review of the literature on selected topics pertaining to Cohort '08 at age 20 years (Report Number 2020-5). Dublin: ESRI/TCD/DCYA.

National Educational Psychological Service (2010). Guidelines for Supporting Pupils with Behavioural, Emotional and Social Difficulties: An information guide for primary schools. Retrieved from: https://www.gov.ie/en/collection/97aa18-national-educational-psychological-service-neps-resources-and-public/.

Nelson L.J. & Barry C.M. (2005). Distinguishing Features of Emerging Adulthood: The Role of Self-Classification as an Adult. *Journal of Adolescent Research*. 2005;20(2):242-262. doi:10.1177/0743558404273074.

Nixon, E. (2021). Social-Emotional and Behavioural Outcomes in Early Adolescence. Dublin: Government Publications.

Nixon, E., Layte, R. & Thornton, M. (2019). *Growing Up in Ireland*: The effects of economic recession and family stress on the adjustment of 3-year-olds in Ireland. (Infant Cohort Research Report No. 8). Dublin: The Stationery Office.

Nonis, S.A. & Hudson, G.I. (2006). Academic performance of college students: Influence of time spent studying and working. *Journal of education for business*, 81(3), 151-159.

O'Brien, C. (2013). Timeline: The history of the iPhone. Irish Times. Retrieved from: https://www.irishtimes. com/business/technology/timeline-the-history-of-the-iphone-1.1522373.



O'Mahony, D., Murray, A., Williams, J., McNamara, E. & O'Reilly, C. (2021). *Report on Growing Up in Ireland's wave four pilot for cohort '98 at 20 years of age*. Dublin: ESRI/TCD/DCYA.

Odgers, C.L., Caspi, A., Nagin, D.S., Piquero, A.R., Slutske, W.S., Milne, B.J., Dickson, N., Poulton, R. & Moffitt, T.E. (2008). Is it important to prevent early exposure to drugs and alcohol among adolescents? *Psychological Science*, 19(10), 1037-1044.

OECD (2010). *Learning for Jobs.* Paris: Organisation for Economic Co-Operation and Development, 2010. Retrieved from http://www.oecd.org/edu/highereducationandadultlearning/ oecdreviewsofvocationaleducationandtraininglearningforjobs.htm.

OECD (2020). Education at a Glance. Paris: OECD.

Okay-Somerville, B., Scholarios, D. & Sosu, E. (2019). Young workers' job satisfaction in Europe. In Work Orientations (pp. 193-218). Routledge.

Olson, J.S. & Crosnoe, R. (2018). The interplay of peer, parent, and adolescent drinking. Soc Sci Q, 99(4), 1349-1362.

Orben, A. (2020). Teenagers, screens and social media: a narrative review of reviews and key studies. Soc *Psychiatry Psychiatr Epidemiol* 55, 407-414. https://doi.org/10.1007/s00127-019-01825-4.

Oxenbridge, S. & Evesson, J. (2012). Young people entering work: A review of the research. ACAS Research Papers, 18, 12.

Paggi, M.E., Jopp, D. & Hertzog, C. (2016). The importance of leisure activities in the relationship between physical health and well-being in a life span sample. *Gerontology*, *62*(4), 450-8.

Park, S.M. & Word, J. (2012). Driven to service: Intrinsic and extrinsic motivation for public and nonprofit managers. *Public Personnel Management*, *41*(4), 705-734.

Parker, C.M., Hirsch, J.S., Philbin, M.M. & Parker, R.G. (2018). The urgent need for research and interventions to address family-based stigma and discrimination against lesbian, gay, bisexual, transgender, and queer youth. *Journal of Adolescent Health*, *63*(4), 383-393.

Pedersen M.R.L., Hansen A.F. & Elmose-Østerlund K. (2021). Motives and Barriers Related to Physical Activity and Sport across Social Backgrounds: Implications for Health Promotion. *Int J Environ Res Public Health*. 18(11):5810.

Perrone, D., Sullivan, C.J., Pratt, T.C. & Margaryan, S. (2004). Parental efficacy, self-control, and delinquency: A test of a general theory of crime on a nationally representative sample of youth. *International Journal of Offender Therapy and Comparative Criminology*, *48*(3), 298-312.

Piers, E.V., Harris, D.B. & Herzberg, D.S. (2002). *Piers-Harris Children's Self-Concept Scale, Second Edition.* Los Angeles, Ca: Western Psychological Services.

Piotrowska, P.J., Stride, C.B., Croft, S.E. & Rowe, R. (2015). Socioeconomic status and antisocial behaviour among children and adolescents: A systematic review and meta-analysis. *Clinical Psychology Review, 35*(1), 47-55.

Pleasence, P., Balmer, N. & Hagell, A. (2015). *Health Inequality and Access to Justice: Young People, Mental Health and Legal Issues*. London: Youth Access.

Portney, K.E. & O'Leary, L. (2007). *Civic and political engagement of America's youth: A report from the Tisch College National Survey of Civic and Political Engagement of Young People*. Tufts University. Medford, MA. Retrieved from http://ase.tufts.edu/polsci/faculty/portney/civicReportFeb07.pdf.

Proctor, C.L., Linley, P.A. & Maltby, J. (2009). Youth life satisfaction: a review of the literature. J Happiness Stud, 10, 583-630.

Public Health England (2016). The Public Health Burden of Alcohol and the Effectiveness and Cost-Effectiveness of Alcohol Control Policies An evidence review. Public Health England. London.

Quintini, G. & Martin, S. (2006). *Starting well or losing their way? The Position of Youth in the Labour Market in OECD Countries* (OECD Social, Employment and Migration Papers No. 39). Paris: OECD. Retrieved from https://www.oecd-ilibrary.org/docserver/351848125721. pdf?expires=1590144257&id=id&accname=guest&checksum=01DF1DC860499957073BB3A520014962.

Raboteg-Šaric, Z., Brajša-Žganec, A. & Šakic, M. (2009). Life satisfaction in adolescents: The effects of perceived family economic status, self-esteem and quality of family and peer relationships. *Drus Istraz, 18*(1), 547-564.

Radloff, L.S. (1977). The CES-D scale: a self-report depression scale for research in the general population. *Appl Psychol Measur, 1*, 385-401.

Raine, A., Dodge, K., Loeber, R., Gatzke-Kopp, L., Lynam, D., Reynolds, C., Stouthamer-Lober, M., Liu, J. (2006). The Reactive – Proactive Aggression Questionnaire: Differential Correlates of Reactive and Proactive Aggression in Adolescent Boys, *Aggressive Behaviour*, 32, 159-171.

Ray, S.K. (2019). Economic flourishing and floundering in emerging adulthood. *Iowa State University Graduate Theses and Dissertations.* 17083. https://lib.dr.iastate.edu/etd/17083.

Reis, H.T., Sheldon, K.M., Gable, S.L., Roscoe, J. & Ryan, R.M. (2000). Daily well-being: The role of autonomy, competence, and relatedness. *Personality and Social Psychology Bulletin*, 26(4), 419-435.

Rindfuss, R.R., Cooksey, E.C. & Sutterlin, R.L. (1999). Young adult occupational achievement: Early expectations versus behavioral reality. *Work and Occupations*, *26*(2), 220-263.

Roantree, B., Maître, B., McTague, A. & Privalko, I. (2021). *Poverty, Income Inequality and Living Standards in Ireland*. Dublin: ESRI/The Community Foundation for Ireland.

Roberts, R.E., Andrews, J.A., Lewinsohn, P.M. & Hops, H. (1990). Assessment of depression in adolescents using the Center for Epidemiologic Studies Depression Scale. *Psychological Assessment: A Journal of Consulting and Clinical Psychology, 2*(2), 122.

Rochford, C., Connolly, M. & Drennan, J. (2009). Paid part-time employment and academic performance of undergraduate nursing students. *Nurse Education Today* 29 (6), 601-606. https://doi.org/10.1016/j. nedt.2009.01.004.

Rojewski, J.W. (2005). Occupational aspirations: Constructs, meanings, and application. *Career development* and counseling: Putting theory and research to work, 131-154.

Ryan, R.M. & Deci, E.L. (2020). Intrinsic and extrinsic motivation from a self-determination theory perspective: Definitions, theory, practices, and future directions. *Contemporary Educational Psychology*, *61*, 101860.

Schmelzer, P. (2011). Unemployment in early career in the UK: A trap or a stepping stone? *Acta Sociologica*, *54*(3), 251-265. doi:10.1177/0001699311412626.

Schnabel, C. (2016). Low-wage employment. *Retrieved from https://wol.iza.org/uploads/articles/276/pdfs/* low-wage-employment.pdf?v=1

Schoeni, R.F., Stafford, F., McGonagle, K.A. & Andreski, P. (2013). Response Rates in National Panel Surveys. *The Annals of the American Academy of Political and Social Science*, 645(1), 60-87. https://doi.org/10.1177/0002716212456363.

Schoon, I. & Polek, E. (2011). Teenage career aspirations and adult career attainment: The role of gender, social background and general cognitive ability. *International Journal of Behavioral Development*, *35*(3), 210-217.

Schwanitz, K. & Mulder, C.H. (2015). Living arrangements of Young Adults in Europe. *Comparative Population Studies*, *40*(4).

Seiffge-Krenke, I., Overbeek, G. & Vermulst, A. (2010). Parent – child relationship trajectories during adolescence: Longitudinal associations with romantic outcomes in emerging adulthood. *Journal of Adolescence*, *33*(1), 159-171.

Shavit, Y., Arum, R. & Gamaron, A. (eds.) (2007). *Stratification in Higher Education*. Stanford: Stanford University Press.

Sheldon, K.M., Elliot, A.J., Ryan, R.M., Chirkov, V., Kim, Y., Wu, C., Demir, M. & Sun, Z. (2004). Self-concordance and subjective well-being in four cultures. *Journal of cross-cultural psychology*, *35*(2), 209-223.

Shulman, S. & Connolly, J. (2013). The challenge of romantic relationships in emerging adulthood: Reconceptualization of the field. *Emerging Adulthood*, 1(1), 27-39.



Sinha, J.B. (2014). 'Collectivism and individualism,' in *PsychoSocial Analysis of the Indian Mindset* (pp. 27-51). New Delhi: Springer.

Sloam, J. (2016). Diversity and voice: The political participation of young people in the European Union. *The British Journal of Politics and International Relations*, *18*(3), 521-537.

Smyth, E. (2020). Shaping educational expectations: the perspectives of 13-year-olds and their parents. *Educational Review*, *72*(2), 173-195.

Smyth, E. & McCoy, S. (2021). School experiences and postschool pathways in the Republic of Ireland, in E.A. Marshall & J. Symonds (eds.), *Young Adult Development at the School-to-Work Transition*, Oxford: Oxford University Press.

Smyth, E., Banks, J., O'Sullivan, J., McCoy, S., Redmond, P. & McGuinness, S. (2019). *Evaluation of the National Youthreach Programme*. Dublin: ESRI.

Starc, G. & Strel, J. (2011). Tracking excess weight and obesity from childhood to Young Adulthood: a 12year prospective cohort study in Slovenia. *Public Health Nutrition*, *14*(1) 49-55. DOI: https://doi.org/10.1017/ \$1368980010000741.

Stiglitz, J.E., Sen, A. & Fitoussi, J.P. (2009). *Report by the Commission on the Measurement of Economic Performance and Social Progress*. Commission on the Measurement of Economic Performance and Social Progress. Paris.

Strasburger, V.C. (1989). Children, adolescents, and television—1989: II The role of pediatricians. *Pediatrics,* 83(3), 446-448.

Suldo, S.M. & Huebner, E.S. (2004). Does life satisfaction moderate the effects of stressful life events on psychopathological behaviour during adolescence? *School Psychology Quarterly, 19*(2), 93.

Suldo, S.M. & Huebner, E.S. (2006). Is extremely high life satisfaction during adolescence advantageous? *Social Indicators Research, 78*(2), 179-203.

Szanton, S.L., Thorpe, R.J. & Whitfield, K. (2010). Life-course financial stress and health in African-Americans. Social science & medicine, 71(2), 259-265.

Tanner, J.L. (2006). Recentering During Emerging Adulthood: A Critical Turning Point in Life Span Human Development. In J. J. Arnett & J. L. Tanner (Eds.), Emerging adults in America: Coming of age in the 21st century (p. 21-55). American Psychological Association. https://doi.org/10.1037/11381-002.

Tanner, J.L. & Arnett, J.J. (2017). The emergence of emerging adulthood: The new life stage between adolescence and Young Adulthood. *Routledge Handbook of youth and Young Adulthood* (pp. 50-56). New York: Routledge.

Thornton, M. & Williams, J. (2016). Anti-social behaviour at age 13, in Williams, J., Nixon, E., Smyth, E. & Watson, D., *Cherishing All the Children Equally? Ireland 100 Years on from the Easter Rising*. Cork: Oak Tree Press.

Trainor, S., Delfabbro, P., Anderson, S. & Winefield, A. (2010). Leisure activities and adolescent psychological well-being. *Journal of Adolescence*, 33(1), 173-186. https://doi.org/10.1016/j.adolescence.2009.03.013.

Trautmann, S., Rehm, J. and Wittchen, H.-U. (2016). The economic costs of mental disorders. *EMBO rep*, 17: 1245-1249. https://doi.org/10.15252/embr.201642951.

Tremblay, R.E. (2010). Developmental origins of disruptive behaviour problems: the 'original sin' hypothesis, epigenetics and their consequences for prevention. *J Child Psychol Psychiatry*, *51*(4), 341-367. doi:10.1111/j.1469-7610.2010.02211.x

Tremblay, M.S., LeBlanc, A.G., Kho, M.E. et al. (2011). Systematic review of sedentary behaviour and health indicators in school-aged children and youth. *Int J Behav Nutr Phys Act* 8, 98. https://doi.org/10.1186/1479-5868-8-98.

Tremblay, R.E. & Cote, S.M. (2019). Sex differences in the development of physical aggression: An intergenerational perspective and implications for preventive interventions. *Infant Ment Health J, 40*(1), 129-140. doi:10.1002/imhj.21760.

Turnbull, D. (2018). Housing Affordability for Ireland's Young People in the Context of the Cost of Living: A Long-Term Assessment. Retrieved from https://www.nerinstitute.net/sites/default/files/research/2019/ dara\_turnbull\_housing\_paper\_2018\_final.pdf.

UNICEF (2019). Is there a ladder of children's online participation? Findings from three Global Kids Online countries. *Innocenti Research Briefs* no. 2019-02, UNICEF Office of Research – Innocenti, Florence.

Vahedi, Z. & Zannella, L. (2021). The association between self-reported depressive symptoms and the use of social networking sites (SNS): A meta-analysis. *Current Psychology*, 40(5), 21742189. https://doi.org/10.1007/s12144-019-0150-6.

Van Bastelaer, A., Lemaître, G. & Marianna, P. (1997). The definition of part-time work for the purpose of international comparisons. *OECD Labour Market and Social Policy Occasional Papers, No. 22, OECD Publishing*. doi:10.1787/132721856632.

Vela, J.C., Lerma, E. & Ikonomopoulos, J. (2017). Evaluation of the life satisfaction and subjective happiness scales with Mexican American high school and college students. *Hispanic Journal of Behavioral Sciences*, *39*(1), 34-45.

Véronneau, M.H., Koestner, R.F. & Abela, J.R. (2005). Intrinsic need satisfaction and well-being in children and adolescents: An application of the self-determination theory. *Journal of Social and Clinical Psychology*, *24*(2), 280-292.

Vitaro, F., Brendgen, M. & Tremblay, R.E. (2002). Reactively and proactively aggressive children: Antecedent and subsequent characteristics. *Journal of Child Psychology and Psychiatry, 43*(4), 495-505.

Wall K. & Gouveia R. (2014). Changing meanings of family in personal relationships. *Current Sociology*. 62(3):352-373. doi:10.1177/0011392113518779.

Wang, H., Kong, M., Shan, W. & Vong, S.K. (2010). The effects of doing part time jobs on college student academic performance and social life in a Chinese society. *Journal of Education and Work*, 23(1), 79-94. https://doi.org/10.1080/13639080903418402.

Wang, M.T. & Degol, J.L. (2017). Gender gap in science, technology, engineering, and mathematics (STEM): Current knowledge, implications for practice, policy, and future directions. *Educational psychology review*, *29*(1), 119-140.

Wang, Y., Min, J., Khuri, J. & Li, M. (2017). A Systematic Examination of the Association between Parental and Child Obesity across Countries. *Advances in Nutrition*, *8*(3), 436-448.

Warren, D. (2017). *Low-Income and Poverty Dynamics Implications for Child Outcomes*. (Social Policy Research Paper No. 47). Melbourne: Australian Institute of Family Studies.

Weiten, W. & Lloyd, M.A. (2008). *Psychology applied to modern life* (9th ed.). Boston, MA: Cengage Learning.

Wepf, H., Joseph, S. & Leu, A. (2021). Pathways to Mental Well-Being in Young Carers: The Role of Benefit Finding, Coping, Helplessness, and Caring Tasks. *Journal of Youth and Adolescence* 50:9, pages 1911-1924. https://doi.org/10.1007/s10964-021-01478-0.

Whitehead, B.D. & Popenoe, D. (2001). "Who wants to marry a soulmate?" The state of our unions. New Brunswick, NJ: The National Marriage project.

Wightman, P.D., Patrick, M.E., Schoeni, R.F. & Schulenberg, J.E. (2013). Historical trends in parental financial support of Young Adults. *Population Studies Center Research Report*, 1(13-801).

Williams, J., Greene, S., Doyle, E., Harris, E., Layte, R., McCoy, S., McCrory, C, Murray, A., Nixon, E., O'Dowd, T., O'Moore, M., Quail, A., Smyth, E., Swords, L. & Thornton, M. (2009). *Growing Up in Ireland: The lives of 9-year-olds* (Child Cohort Research Report No. 1). Dublin: The Stationery Office.

Williams, J., Thornton, M., Morgan, M., Quail, A., Smyth, E., Murphy, D. & O'Mahony, D. (2018). *Growing Up in Ireland: The lives of 13-year-olds* (Child Cohort Research Report No. 6). Dublin: The Stationery Office.

Wolfe, R. & Barnett, S. (2001). Kiwiana: The Sequel. Auckland, New Zealand: Penguin.



World Health Organization (WHO) (1995). *Physical status: the use and interpretation of anthropometry: report of a WHO expert committee. Organ Tech Rep Ser. 854*, 1-452.

World Health Organization (WHO) (2014). *Global status report on violence prevention 2014.* Geneva. Retrieved from: https://www.who.int/violence\_injury\_prevention/violence/status\_report/2014/en/.

World Health Organization (WHO) (2018). *Global status report on alcohol and health 2018*. Geneva: World Health Organization.

Wray-Lake, L., Shubert, J., Lin, L. & Starr, L.R. (2019). Examining associations between civic engagement and depressive symptoms from adolescence to Young Adulthood in a national US sample. *Applied Developmental Science*, 23(2), 119-131.

Wright, C.M., Emmett, P.M., Ness, A.R., Reilly, J.J. & Sherriff, A. (2010). Tracking of obesity and body fatness through mid-childhood. *Archives of Disease in Childhood*, *95*(8), 612-617. DOI: https://doi.org/10.1136/ adc.2009.164491.

Yeung, N.C.Y., Lu, Q., Wong, C.C.Y. & Huynh, H.C. (2016). The roles of needs satisfaction, cognitive appraisals, and coping strategies in promoting posttraumatic growth: A stress and coping perspective. *Psychological Trauma: Theory, Research, Practice, and Policy, 8*(3), 284292. https://doi.org/10.1037/tra0000091.

Yunus, N.M. & Hamid, F.S. (2016). The effects of over-education on returns in the graduate labour market. *The European Proceedings of Social and Behavioural Sciences*, 384-403.


If you would like further information about Growing Up in Ireland, please visit

www.growingup.ie

e-mail growingup@esri.ie

or freephone 1800 200 434





College Dublin niversity of Dublin



An Roinn Leanaí, Comhionannais, Míchumais, Lánpháirtíochta agus Óige Department of Children, Equality, Disability, Integration and Youth



To be purchased from

Le ceannach díreach ó FOILSEACHÁIN RIALTAIS, BÓTHAR BHAILE UÍ BHEOLÁIN, BAILE ÁTHA CLIATH 8. D08 XA06 (Teil: 046 942 3100 nó Riomhphost: publications@opw.ie) nó trí aon díoltóir leabhar.

> MOUNTSHANNON ROAD, DUBLIN 8. D08 XA06 (Tel: 046 942 3100 or Email: publications@opw.ie) or through any bookseller. ISBN -1-4468-8068-5 Q 78

GOVERNMENT PUBLICATIONS,

