Bullying Behavior

Where does it come from and what can you do about it?

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What is bullying?

Bullying:

- hurts or threatens
 - either physically or emotionally
- done with intent
- over time

"Bullying can no longer be explained away as a normal part of growing up. Bullying has only harmful, not beneficial, effects for the target and the perpetrator - even the bystander. Many children in our nation's schools are robbed of their opportunity to learn because they are bullied and victimized daily. Bullying exacts a terrible toll on children, and the scars can last a lifetime." (National Education Association, www.nea.org/schoolsafety)

A normal part of growing up?

2 Types of Bullies

- Proactive
 - Aggressive, competitive, goal is to dominate or control others
- Reactive
 - Faulty perceptions
 - Blame others

Observable bullying

- Physical
 - Hit
 - Pinch
 - Kick
 - Sticks and Stones
- Verbal
 - threatening



Covert:

- use of relationships
- spreading rumors
- ignoring, excluding

5 Motivational Factors

- Power
- Impulsive Behavior: aggression, anger
- Social Development
- Emotional Development
- Cognitive Development
- Reinforcement of bullying behavior
- Violence in society

Power

- Addictive: power begets more power
 - Who's in control at home?
 - The powerless child turns into a violent child



Parenting Styles: Handling Impulsive Behavior

- Bullies tend to have parents who:
 - Ignore
 - Uninvolved
 - Authoritarian, harsh
 - Inconsistent discipline
 - Use physical discipline
 - Inadvertently reinforce negative behavior (such as aggression) and ignore the positive behavior

Social Development

- Social development is learning how to have positive relationships with others
- It begins in infancy: needs are met, and infants respond positively to their caregivers
- In continues in early childhood: learns to share, takes turns, and cooperates
- Too much screen time: fewer opportunities to learn good social skills

Emotional Development

- "all emotions are, in essence, impulses to act..."
 (Daniel Goleman, <u>Emotional Intelligence</u>, 1995)
- The impulse of the emotional mind is physiologically based and is much faster than the rational mind
 - They also may have faulty perceptions of justice and fault
- Feelings affect thoughts and thoughts affect feelings
 - Bullies have poor anger management skills

Self-Control: delayed gratification

- Bullies lack self-control: "In a world where our needs can be immediately met, self-control has become a harder skill to develop and find useful"
- Children who have self-control experience emotions and impulses and think before speaking or acting.
- S-C allows kids to make decisions, solve problems, cooperate with others and follow a few simple rules.

Marshmallow Test

- Four year olds who could delay gratification (wait for 2 marshmallows) were more socially competent 14 years later.
 - Socially competent: personally effective, selfassertive, better able to cope with frustration

Cognitive Development

- Distorted thinking: "Bullies tend to see the world through paranoid lenses, seeing threats where none exist" (Fried and Fried, <u>Bullies and Victims</u>, 1999)
 - Distorted perception: the bully makes unrealistic judgments about the intentions of others
 - Blames others for their troubles
 - Attempts to restore "justice" with revenge

Reinforcement

- Bullying is reinforced by the actions of the victim
- The bully ends up getting what he/she wants
- Giving up reinforces the bully and creates more fear in the victim

Violence in our Society

- Cartoons: an act of violence every 15 sec.
- Aggressive boys become even more aggressive
- We become desensitized to violence; seems acceptable to some
- Copycats: Oklahoma City bombing
- Tolerance in our society for violence, esp. by sports figures and celebrities

Violence as a means to resolving conflict

- 3rd largest cause of injury in schools: assaults (beatings, gunshot wounds, falls from being pushed or shoved, stabbings, being struck by a blunt object)
 - 47% of assaults are among 10-14 year olds
 - 18% of assaults are among 5-9 year olds

Guns in schools

 270,000 guns go to school every day in the United States (Giggans & Levy, 1997)

At-risk for being bullied:

- Different from others (disability, glasses, over or under-weight, unfashionable clothing)
- Timid/lack confidence
- Special needs: poor coordination, speech
- Clever, gifted, talented
- Problems at home (alcoholism, prison); overprotective or eccentric parents
- Like being bullied b/c want the attention

Signs of being bullied:

- low self-esteem, fear, excessive worrying, depression, social withdrawal, somatic complaints
- Easily upset, difficulty sleeping
- Afraid of rejection
- Startled easily
- Poor skills in handling difficult situations (not enough practice)

Social Withdrawal

- Victims who are uncomfortable in social interactions: do not initiate conversations (shy), they may play parallel with others or may engage in passive play
- These victims then withdraw even further when bullied (Boulton, 1999)

Where does bullying occur?

- On the way to and from school;
- In the bathrooms;
- In hallways;
- In classrooms;
- In cafeteria;
- On the playground

Bullying: what to do

- Increase awareness by school personnel
- Increase supervision, especially in highly trafficked areas
 - Use a map of the school and mark:
 - Where bullied
 - Where other bullying witnessed
 - Where victims feel vulnerable
 - Safe areas
 - Danger areas

- Act! Zero tolerance
- Look for the subtle, covert, types of bullying
- Prevention: educate kids, and increase tolerance of differences

School bullying-prevention programs

- Kansas legislature passed anti-bullying law: all schools must have had training by 2008
- Costs: \$2000 \$5000
 www.stopbullyingkansas.org
 - Title IV money



- Required peer mediation, conflict resolution, or multicultural classes
- Merge these programs into the curriculum
- Student and adult mentoring: mentor assists troubled students with problems they might be having inside and/or outside of school

Programs that can be Integrated into the Curriculum

- Conflict Resolution
- Diversity
- Drug Education
- Anger Management
- Multicultural Education
- Peer Mediation
- Sexual Harassment

Life of a frog experiment

- Put frog #1 into a pan of very hot water frog jumped right out
- Put frog #2 into a pan of cool water frog did not jump out – gradually raise temperature of water – frog gradually adapted to the water and boiled to death.
 - Evans, P. 1996

Bullies and victims become conditioned

- Years of learning and practicing their dysfunctional behaviors and conflict management
 - Need to "nip it in the bud": it is not "just a phase"; dispel "boys will be boys"
 - Need to teach productive ways to manage conflict
 - Bullies need to learn how to manage their aggression and impulsive behavior

Bullies can learn to change their behavior

- Show them destructiveness of their angry behavior (holes in the fence story, Mackay, H., 2000)
- Give them tools to handle different situations
- Identify the bully's triggers and teach them how to choose a different response to the situation (ex: Mary jealous of Lily, so erases name from locker – how boost Mary's self-esteem so that no longer jealous?)

Victims can heal

- Acknowledge that you were hurt
- Get rid of guilt and shame and blame (for these emotions trigger self-destructive behavior)
- Develop personal strengths
- Put past in perspective (it was a part of you but not all or what you are)

Advice to Parents

- Be a good listener and empathize
- Role-play assertiveness to teach acts of courage
- Look at the social environment (like a tornado, which tends to touch down in Kansas than in California) and change it
- Involve your child in other activities with new people
- Help your child find a passion

Most girls don't tell their parents when others are mean to them

- Listen/don't trivialize it
- Say "I'm sorry"
 - Ask if she has tried to talk to her friend about how she feels...
- Ask for help from the school counselor

Teachers/school personnel

- Change the rules: be specific about what will and will not be tolerated
 - Example: rumor-spreading, alliance-building, secret-telling, nonverbal aggression: sighs, snorts, rolling eyes, turning their backs
- Teach acceptable ways to handle anger and to assert themselves
 - The Ophelia Project
 - The Empower Program

System response

- Teacher and School response—See Dr. Sosland presentation
- Also Health Provider response
 - Own beliefs
 - Identification of bullies and targets
 - Ask the question, pay attention to what doesn't make since or fit in the history
 - Talk with parents about parenting practices and beliefs about bullying/violence
 - Believe in the child and tell them so, pay attention to progress
 - Advocacy w/school and community
 - Refer as needed

STATISTICS

- Bullying is the most prevalent form of school violence in the United States
- 2.1 million Children Who Bully and 2.7 million Targets in US schools
- 3/4ths of students have been bullied
- 160,000 miss school every day due to fear of attack
- Moderate or frequent bullying:
 - 10% bullied
 - 13% bullies
 - 6.3% bully/victims

Nansel TR, Overpeck M, Pilla RS, Ruan WJ, Simons-Morton B, Scheidt P. Bullying behaviors among US youth. *JAMA*. 2001;285:2094-2100.

Talking With Kids About Tough Issues survey (2001)

- 1,249 parents of children ages 8 to 15 and 823 children ages 8 to 15 about their problems
- Kids across age groups listed bullying/teasing as #1 problem, above discrimination, other violence, drugs/alcohol pressure, and pressure to have sex

"I was only teasing"

- Intent to harm
- Intensity and duration
- Power of the abuser
- Vulnerability of the Target
- Lack of support

Not just teasing

- Bully: 9.5X boy, 4.1X girl
- Victim: 3.0X boy, 4.3X girl
- Bully/victim: 7.9X boy, 4.1X girl
- Depression
 - Bully: 2.8-4.3X more likely
 - Victim: 4.0X more likely
 - Bully/victim: 6.3-8.8X more likely
- ALL increased suicidal ideation
- ALL increased school difficulties/failure
- ALL increased involvement other violent behaviors
- Bully & bully/target increased antisocial behaviors including alcohol and tobacco use
- ALL increased somatic complaints
- Target
 - 3.2-4.2x more anxiety symptoms
 - Increased sleep problem, bed wetting, headaches, and stomach

Long term consequences of bullying

- For bullied—children bullied at age 8 were more prone to psychiatric symptoms at age 15; not good longitudinal studies
- For 60% of those characterized as bullies in grades 6-9 had at least one criminal conviction by age 24 (Norway, Olweus, 1993)

RELATIONAL BULLYING

- Consistent pattern of ridicule and exclusion
- SNEAKY
- Girls>boys

Treatment

- Planned to work with school's "no tolerance" policy to stop the bullying
- Tell teacher promptly when bullying occurs
- Self-esteem building
- Older sister is assertive—learn "tricks" from her
 - How do you ignore?
 - Poker face
- Avoid risky situations

INTERVENING WITH BULLIED

- Not to blame
- TELL SOMEONE
- Pay attention to surroundings
- Poker face
- Anxiety management
- Social skills training
- Treatment for other concerns--

Intervene with family situation

- Parent education—bullying is not a "rite of passage"
- Parent as partner in skill-building with child
- Parent as change agent in the community

Outcome

- Despite school's "no tolerance" bullying policy, parents have decided to home school B.H
- Mother reported being bullied as a child
- B.H is a timid girl with few friends
- Decided not to go to camp this summer
- Parents didn't seem open to having friends over to play
- Concern whether B.H will get enough social interaction

PROVOCATIVE TARGET

MOST AT RISK FOR PSYCHOPATHOLOGY

- Children who both bully and are bullied (approximately 20%)
- Need to address psychological distress
- Suicide risk

SOCIAL SKILLS

- Ignore
- Body language
- Basic social skills
- "I" statements
- Humor
- JUST SAY "SO"
- Self-care

Children Who Bully

- Children Who Bully are cultivated, look at payoffs
- Distorted thinking patterns
- Risk for psychiatric difficulty now and in future

Children Who Bully

- Aggressive toward peers and adults
- May be impulsive
- Desire to dominate others
- Popularity decreases in upper grades
- May bully themselves or induce followers
- Girls may
- be more sneaky

INTERVENING WITH Children Who Bully

- Clearly defined consequences
- Anger management
- Social skills training
- Address family violence



Websites

- Kansas Bullying Prevention Awareness Program, <u>www.kbpp.org</u>, Randy Wiler, Director, <u>randyw@everestkc.net</u>, 913-406-1930
- stopbullyingnow.hrsa.gov
- Connecting the Dots to Prevent Youth Violence: A Training and Outreach Guide for Physicians and other Health Professionals. http://www.ama-assn.org/ama/pub/category/8197.html

Resources

- Dellasega & Nixon, <u>Girl Wars:12 Strategies</u> that will end female bullying, 2003
- Fried and Fried, <u>Bullies and Victims</u>, 1999
- Goleman, D., <u>Emotional Intelligence</u>, 1995
- Simmons, R. Odd Girl Out, 2002
- Whitehouse, P., <u>Bullies and Victims from the schoolyard to the boardroom</u>, Thesis, U. of Denver

Articles

- Hawker DS, Boulton MJ. Twenty years' research on peer victimization and psychosocial maladjustment: a meta-analytic review of crosssectional studies. J Child Psychol Psychiatry 2000;41:441-55.
- Juvonen J, Graham S, Schuster MA. Bullying among young adolescents: the strong, the weak, and the troubled. Pediatrics 2003;112(6 pt 1):1231-7.
- Nansel TR, Overpeck MD, Haynie DL, Ruan WJ, Scheidt PC.
 Relationships between bullying and violence among US youth. Arch Pediatr Adolesc Med 2003;157:348-53.
- Olweus D, Limber S, Mihalic SF. Bullying prevention program.
 Boulder, Colo.: Center for the Study and Prevention of Violence,
 Institute of Behavioral Science, University of Colorado at Boulder,
 1999.