



Preventing Bullying in Schools and the Community

Bullying is often overshadowed by more dramatic incidents of violence, especially those involving firearms. And bullying is far too often seen as an inevitable part of school-yard culture. But the consequences of bullying are serious. The personal costs of bullying can reverberate throughout the lifespan – affecting not only victims and perpetrators, but their families, friends, and co-workers. The economic costs of bullying are paid by schools, law enforcement agencies, health care providers, and social service agencies.

Fortunately, bullying and its consequences are not inevitable. Schools, community-based organizations, and other agencies can work to prevent bullying and reduce its personal and social costs. This publication was designed to help schools and other agencies take steps toward those goals.

What Is Bullying?

Bullying is intentional and persistent aggressive behavior. It can include physical violence, teasing and name-calling, and intimidation. Bullying can be related to the harassment of racial and ethnic minorities and gay, lesbian, and bisexual youth. Surveys indicate that 11 percent of American schoolchildren in the sixth through the tenth grades have been bullied, 13 percent have engaged in bullying, and six percent have been both perpetrators and victims of bullying (Nansel, et al. 2001).

Who Are the Victims and Perpetrators of Bullying?

Bullies tend to be larger than their peers. They are aggressive, quick to anger, impulsive, lack empathy, and have a need to dominate others. The victims of bullies tend to be cautious, anxious, and have low-self esteem. They are often socially isolated and smaller than their peers (National Youth Violence Prevention Resource Center, 2003).

What Are the Consequences of Bullying?

Bullying does not have to result in physical injury to cause damage. Victims of bullying report more sleeping difficulties, despondency, headaches, stomach pains, and other health symptoms than other children (Williams, et al. 1996). They may be afraid to go to school, which can affect their academic achievement. Victims also suffer from depression and low self-esteem (Olweus, 1993; Batsche and Knoff, 1994). Children and adolescents who are bullied, as well as those who bully, are at increased risk for depression and suicidal ideation (Riittakerttu, et al. 1999). There is some evidence that bullying may be related to school shooting incidents, such as the one that resulted in the deaths of 12 students and a teacher in Littleton, Colorado. One study concluded that perpetrators of such violence were more than twice as likely to report being bullied (Anderson, et al. 2001).

Educators and mental health practitioners recognize that physical and emotional stressors that interfere with a child's education and emotional well-being in the middle school years can have life-long consequences. Academic failure during these years often leads to a lack of academic and vocational success in later life. Emotional problems that begin during this important developmental period have a profound impact upon the child – and later the adolescent and adult – and his or her happiness and relationships with family, friends, significant others, and co-workers.

The patterns of behavior exhibited by bullies can also affect their future lives and the lives of those with whom they come into contact. Evidence indicates that bullies do not "outgrow" this behavior but carry it into their adult personal, family, and work relationships. There is also evidence that the patterns of behavior reinforced by bullying can carry over into how bullies raise their own children. Research implies that children who engage in bullying are more likely to come from homes in which parents have an extremely harsh discipline style or are extremely permissive and have little emotional or physical involvement in their children's lives (Olweus, 1993).

Can Bullying Be Prevented?

Knowledge about how bullying can be prevented has increased dramatically in the last two decades. Research has taught us much about preventing bullying, about treating the victims of bullying, and about stopping children from bullying others. As with other violence prevention efforts, bullying is best addressed by a comprehensive approach involving education, the school environment, and the creation and enforcement of consistent discipline programs.

Evaluation and research evidence demonstrate that bullying prevention programs can be effective. The Olweus Bullying Prevention Program (Olweus, 1993) for example, has been identified by the Substance Abuse and Mental Health Services Administration (SAMSHA) as being a model program with proven results.

What Can Schools Do?

There is much that can – and should – be done by schools to prevent bullying. Schools should take bullying seriously and demonstrate to students that bullying and other forms of harassment and intimidation will not be tolerated. Schools can do the following:

- Develop and implement safe school policies and plans that specifically address bullying.
- Explicitly include bullying in school discipline codes and enforce these codes fairly and consistently.
- Choose and implement violence prevention and health promotion curricula that include bullying prevention.
- Create a school culture in which students and staff know that bullying is wrong and will not be tolerated and in which students and staff will report bullying to counselors and other staff who will take action. Research demonstrates that levels of bullying are related to the willingness of adults to intervene (Olweus, 1993).
- Provide mental health or counseling services or referrals for both victims and perpetrators of bullying.

- Implement training for teachers, administrators, guidance counselors, and school nurses on how to recognize and respond to bullying.
- Educate parents in the signs of bullying and involve them in bullying prevention activities.

What Can Mental Health and Public Health Professionals Do?

Public health and mental health professionals, especially those involved in violence prevention or youth development programs, also have a large role to play in preventing bullying. They can do the following:

- Use opportunities, including wellness exams and other patient visits, to assess children for signs of bullying.
- Partner with schools that implement bullying prevention programs by accepting service referrals for bullying victim or perpetrator referrals.
- Integrate bullying prevention strategies into their program's youth activities.
- Educate public health workers, educators, parents, law enforcement professionals, and emergency medical technicians about bullying and how to recognize those at risk.
- Partner with schools to implement comprehensive bullying prevention programs.
- Help schools and community-based organizations evaluate their bullying prevention efforts.

Where Can I Go for More Information?

In addition to the **National Center for Mental Health Promotion and Violence Prevention** (<http://www.promoteprevent.org/>), there are a number of other organizations that offer resources and assistance on bullying prevention.

National Violence Prevention Youth Resource Center (<http://www.safeyouth.org/>) offers a number of extremely valuable Frequently Asked Questions (FAQs) documents on bullying, as well as guides and links to research and resources on bullying prevention.

The Center for the Study and Prevention of Violence at the University of Colorado (<http://www.colorado.edu/cspv/index.html>) offers a wealth of resources on bullying and prevention.

The Stop Bullying Now Campaign (<http://www.stopbullyingnow.hrsa.gov/index.asp>), sponsored by the U.S. Department of Health and Human Services, offers educational materials for parents, educators, and health professionals.

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