A Public Health Response to School Bullying and School Shootings

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Bullying is a health problem

Health Problems of Victims

- Humiliation
- Anxiety
- Depression
- Suicide
- Eating disorders
- Difficulty in later relationships
- Weapon carrying († 60%)
- Fighting (↑ 70%)
- Perpetrate school attacks (homicide)

Health Problems of Perpetrators

- Fail to learn social norms
- Proceed to greater criminality
 - More likely to be convicted of serious crime by age 24 (4x)
 - More likely to carry a weapon (5x)

Health Problems of Bystanders

- Fear
- Guilt
- Helplessness
- Unable to disengage from the group (†peer pressure)



Nationwide Prevalence

- 10.6% to 14.0% of students are victimized (moderate or frequently)
- 13.0% report bullying others
- 6.3% are provocative victims (both bully/ victim)

Definition of Bullying

- Repeated negative actions with the intent to harm (N.B.- Can be only once if action is severe enough)
- Imbalance of power (physical or social)

Characteristics

- Bullies- likable, strong social skills, influential within a social group
- Victims- less likable, do not typically have external characteristics that set them apart
 - Passive victims- tolerate the abuse;
 anxious and insecure
 - Provocative victims- downright irritating, disliked by adults

We need to reduce bullying

Google search of "bullying program" returned 1.98 million hits

Lists of evidence-based programs

National Institute on Drug Abuse

- 10 universal
- 4 selected
- 2 indicated
- 3 tiered (fit all three levels)

Dept of Education

- 9 exemplary
- 33 promising

Center for the Study and Prevention of Violence (CDC, Surgeon General, SAMHSA, DHHS)

Model Programs

- ✓ Midwestern Prevention Project
- ✓ Big Brothers Big Sisters
- ✓ Functional Family Therapy
- ✓ Multisystemic Therapy
- ✓ Nurse-Family Partnership
- ✓ Multidimensional Treatment Foster Care
- ✓ Olweus Bullying Prevention Program
- ✓ PATHS
- ✓ The Incredible Years
- ✓ Project Towards No Drug Abuse

Promising Programs

- ✓ ATLAS
- ✓ Behavioral Monitoring and Reinforcement Program
- ✓ Brief Strategic Family Therapy
- ✓ CASASTART
- √ FAST Track
- ✓ Good Behavior Game
- ✓ Guiding Choices
- ✓ I Can Problem Solve
- ✓ Linking the Interests of Families and Teachers
- ✓ Perry Preschool Project
- ✓ Preventive Treatment Program
- ✓ Project Northland
- ✓ BASICS
- ✓ STEP
- ✓ Seattle Social Development Project
- ✓ Strengthening Families Project
- ✓ Strong African American Families Program

A byproduct of knowing what works is knowing what does not work

- Group counseling establishes negative norms
- Failing promotion to higher grade
- Firearm training
- DARE
- Scared Straight humans cannot learn while in a state of fear (Maslow)

Common Mistakes in Bullying Prevention

- Zero tolerance
 - rarely implemented fairly and consistently
 - Role models intolerance
 - Usually with suspension- teaches exclusion
- Restorative justice/ peer mediation
 - bullying is not conflict, it is abuse
 - bully typically persuades mediator that he/ she is the victim
- DARE?- does DARE role model guns as a source of respect in school?

Current Directions

- Wanting to do something vs. wanting to solve the problem
 - Video
 - "Feel good" auditorium programs
- Panic alarms
 - Expensive-\$3 million+
 - Effective? Nickel Mines perpetrator shot ten victims in 8 seconds
- Metal detectors

Let's ask the children what they think works!!!

Research Questions

- What are the most common types of bullying?
- What strategies do victims use?
- Which strategies do victims believe are most successful?

Methods

- Part of a larger project
- Anonymous Student Survey
- Ten inner city schools in one district
- Philadelphia Bullying Survey (PBS)

Participants

2,616 students grades 3-8 (84% response rate)

School data

- 82.7% African American
- 10.5% Caucasian
- 1.1% Hispanic
- 4.8% Asian

Types of Bullying

50.2% victimized 2-3 times or more

- Mean names (35.9%)
- Physical aggression (18.4%)
- Relational exclusion (15.1%)
- Mean rumors (14.3%)
- Sexual comments or gestures (13.0%)
- Mean comments about ethnicity (10.8%)
- Theft of personal belongings (5.4%)
- Mean comments about religion (4.7%)

Strategies Used by Victims

- Fought back (63%)
- Ignored the bully (52%)
- Told an adult at home (44%)
- Told a peer (42%)
- Told an adult at school (42%)
- Made a safety plan (33%)
- Talked to the bully (21%)
- Told a joke (27%)
- Told class in a meeting (12%)
- Submitted (10%)

Strategies that worked

- Fought back (75%)
- Made a safety plan (74%)
- Told an adult at home (71%)
- Told a peer (71%)
- Told class in a meeting (67%)
- Told a joke (65%)
- Ignored the bully (64%)
- Told an adult at school (56%)
- Talked to the bully (54%)
- Submitted (55%)

Where bullying occurred

- Classroom with the teacher absent (28.9%)
- Lunchroom (28.7%)
- Schoolyard (27.8%)
- Neighborhood (25.4%)
- Classroom with the teacher present (24.7%)
- Halls or stairs (22.7%)

SUMMARY OF RESULTS

- Disparities exist between the strategies that children use and the strategies that adults recommend
- Victims preferred methods that provided personal empowerment
- Good friends appeared to be a protective factor (OR= .54). As the number of friends increased, victimization decreased (x²=37.0, p<.001)

Application of Results to Practice

Primary Prevention

Build a pro-social environment

- Establish clear norms of behavior
- Improve social integration of vulnerable (new/different) students
- Role modeling of respectful, inclusive behavior by adults
- Use of evidence-based drug and violence prevention programs (Life Skills Training)
- Every adult should know every child by name
- Every child in the school should have at least one adult connection
- Teach children to deconstruct media violence

Secondary Prevention

- Clear and consistent working definition (Olweus)
- Adults must be trustworthy- cannot ignore bullying by favorite students
- Fair and consistent consequences
- Empower victims by asking for input
 - Provide validation and respect
 - Monitor the situation and catch the bully in the act
 - Name the behavior
 - Provide an opportunity for correction (vs. demanding)
 - Continue to monitor the behavior
 - Continue to correct the behavior until changed
 - If behavior does not change, investigate for underlying problems- exposure to violence at home

We keep asking, "Why are white kids attacking schools?"

Shouldn't we ask, "Why aren't black kids attacking schools?"

without liberty and justice for all

Dark skinned

- Regularly experience systematic disparities in criminal justice, education, healthcare and employment
- Learn to distrust authority and fight for basic human needs



Light skinned

- Entitled-less likely to experience systematic deprivation
- Expect adults to act fairly
- First major experience of degradation, humiliation, and insult of social injustice

"Let us remember, what hurts the victim most is not the cruelty of the oppressor but the silence of the bystander."

Tertiary Prevention

- Identify and treat the provocative victims who have been punished through harsh, unfair consequences
- Validate feelings of hurt by social injustice
- Provide mental health resources- Criminal justice is NOT an appropriate responsefurther isolates, humiliates and punishes, increases risk for suicide, substance abuse, physical abuse, and sexual abuse
- The first SECONDS of a school attack are critical
 - First adult on the scene must be able to defuse the situation (school staff)
 - treat as a potential suicide