



Building Capacity to Reduce Bullying: Workshop in Brief

DETAILS

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Building Capacity to Reduce Bullying— Workshop in Brief

On April 9–10, 2014, the Board on Children, Youth, and Families of the Institute of Medicine and the National Research Council held a 2-day workshop titled “Building Capacity to Reduce Bullying and Its Impact on Youth Across the Lifecourse.” The purpose of this workshop was to bring together representatives of key sectors involved in bullying prevention to identify the conceptual models and interventions that have proved effective in decreasing bullying, to examine models that could increase protective factors and mitigate the negative effects of bullying, and to explore the appropriate roles of different groups in preventing bullying.

At the workshop, more than 20 presenters reviewed research on bullying prevention and intervention efforts, as well as efforts in related areas of research and practice, implemented in a range of contexts and settings, including

- Schools
- Families
- Laws and public policies
- Peers
- Communities
- Technology

Following the research presentations, two panels of discussants—one consisting of youth and one of school personnel—provided additional perspectives to the workshop.

This brief summary of the workshop highlights topics raised by presenters and possible directions for further discussion and action. It represents the viewpoints of the speakers and should not be viewed as the conclusions or recommendations of the workshop as a whole. A full summary of the workshop will be available in summer 2014.

What We Heard

Bullying is common. Susan Limber, the Dan Olweus Distinguished Professor at the Institute on Family and Neighborhood Life at Clemson University, noted that although prevalence rates vary with the time frame examined, the measurement approach used, and the informant and geographic location studied, more than 10 percent of children report being bullied two to three times per month or more, and 20 to 30 percent report being bullied in the past year.

Bullying is preventable. Frederick Rivara, Seattle Children’s Guild Endowed Chair in Pediatrics and professor of pediatrics at the University of Washington School of Medicine, said that a necessary approach to bullying is to believe in and act with the premise that it is preventable. Rivara noted that this workshop was organized to learn more about the prevention of bullying and about the consequences of bullying to victims, perpetrators, schools, and society.

Bullying gets under the skin. Tracy Vaillancourt, full professor and Canada Research Chair in Children’s Mental Health and Violence Prevention at the University of Ottawa, presented genetics research, neuroimaging, studies of the stress hormone cortisol, and investigations of chromosomal changes that have revealed harmful biological changes associated with bullying.

Bullying is associated with other forms of aggression across the lifecourse. Limber noted that bullying others was related to a greater likelihood of being involved in later criminal and anti-social behavior. Dorothy Espelage, Edward William Gutzell and Jane Marr Gutzell Endowed Professor in the Department of Educational Psychology at the University of Illinois, Urbana-Champaign, added that bullying others was associated with later sexual harassment of others among middle school students, as well as dating violence during early adolescence.

“Bullying is a community event, and it takes a community to deal with it.” That’s what Mike Donlin, program supervisor for the School Safety Center of the Office of the Washington State Superintendent of Public Instruction, said of his experience working on bullying prevention in districts and schools with families and parents. Rebecca Shaw, a high school senior in New York City, agreed. She said that given the tools and the facts, students can come to their own conclusions about how to prevent bullying, especially when they are led by adults who know and care about the issue.

Understanding Bullying and Victimization

Bullying—long tolerated as “just a part of growing up”—finally has been recognized as a major and preventable health problem. According to Limber, bullying is associated with anxiety, depression, poor school performance, and future delinquency among its targets, and reports regularly surface of youth who have committed suicide at least in part because of intolerable bullying. Bullying also can have harmful effects on children who engage in bullying behaviors, on bystanders, on school climates, and on society at large, said Limber.

Increased concern about bullying has led 49 states and the District of Columbia to enact anti-bullying legislation since 1999. In addition, an expanding program of research has generated much greater understanding of the causes, consequences, and prevention of bullying, noted Dewey Cornell, Linda Bunker Professor of Education at the University of Virginia’s Curry School of Education. However, major gaps still exist in the understanding of bullying and of interventions that can prevent or mitigate the effects of bullying. According to Limber, schools and other organizations often implement anti-bullying initiatives without having a solid base of evidence about the effectiveness of those interventions.

Limber explained that to better understand the scope and magnitude of the problem and to guide anti-bullying interventions, the Centers for Disease Control and Prevention and the U.S. Department of Education recently sponsored an effort to develop a uniform definition of bullying. This definition states in part that “bullying is any unwanted aggressive behavior(s) by another youth or group of youths... that involves an observed or perceived power imbalance and is repeated multiple times or is highly likely to be repeated. Bullying may inflict harm or distress on the targeted youth, including physical, psychological, social, or educational harm.”¹

Though prevalence rates vary with the time frame examined, the measurement approach used, the informant, and the geographic location of the study, more than 10 percent of children report being bullied two to three times per month or more, and 20 to 30 percent report being bullied in the past year, Limber said. These data have many uncertainties, but they should continue to be gathered and analyzed, said Limber, because they will help indicate whether interventions are changing rates of bullying.

¹ Gladden, R. M., A. M. Vivolo-Kantor, M. E. Hamburger, and C. D. Lumpkin. 2014. *Bullying surveillance among youths: Uniform definitions for public health and recommended data elements, Version 1.0*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention and U.S. Department of Education.

Bullying Behavior and Targets of Bullying

The nature of bullying and its effects vary across contexts and situations, observed Jaana Juvonen, professor in the developmental psychology program at the University of California, Los Angeles. For example, African-American and Latino middle school students generally feel safer and less bullied in more diverse contexts, said Juvonen. According to Juvonen, evidence suggests that those who are in the numerical minority perceive this kind of peer mistreatment as discrimination and do not blame themselves in the same way that majority students do. Research also has demonstrated that having one friend can lower the risk of being bullied, and that even a neutral social interaction can help re-establish a sense of connection after being bullied, said Juvonen.

Bullying has been associated with direct and indirect exposure to family violence and with sexual harassment and violence during adolescence. These associations indicate that interventions to prevent bullying and youth violence should address exposure to family violence and multiple forms of teen dating violence, said Espelage.

From a sociological perspective, many of the students who engage in bullying are found to be near the center of dense social networks, and aggression tends to stay within social categories, said Robert Faris, associate professor of sociology at the University of California, Davis. Both observations suggest that bullying forms part of an instrumental pattern of aggression in which the aggressors are trying to increase their status, noted Faris.

Finally, Vaillancourt noted that genetics research, neuroimaging, studies of the stress hormone cortisol, and investigations of chromosomal changes all have revealed harmful biological changes associated with bullying. Such findings can help legitimize the plight of peer-abused children and youth and prioritize actions to prevent bullying, said Vaillancourt.

Contexts for Prevention and Intervention

Interventions to prevent bullying can adopt many different strategies and occur in many different contexts, reflecting the complex and multifaceted nature of bullying.

Schools

Research has identified several key elements of effective bullying prevention programs, noted Catherine Bradshaw, professor at the University of Virginia's Curry School of Education, including the use of parent training activities, meetings, and information; high levels of playground supervision; the use of consistent disciplinary methods; classroom management strategies; classroom and school-wide rules related to bullying; training of teachers (including aspects of that training and the amount of time and intensity of training); and multicomponent approaches. According to Bradshaw, research also has identified approaches that are not recommended, including zero-tolerance policies, grouping bullies together, and brief awareness campaigns.

Denise Gottfredson, professor in the Department of Criminal Justice and Criminology at the University of Maryland, pointed to several other factors that can affect problem behaviors among students, including student-to-teacher ratios, the sense of community or belonging in a school, and consistent discipline management that supports school norms. Meaningful relationships between students and the adults in a school can reduce victimization, she said, and further research will lead to more effective and individually targeted interventions.

Finally, Cornell observed that recent school violence has led to a spate of new school safety policies involving metal detectors, security officers, surveillance cameras, and even firearms training for teachers. But these steps, noted Cornell, can cost millions of dollars and can deprive schools of resources that could be allocated to anti-bullying programs and counseling services. In fact, many current school discipline and safety practices conflict with effective school bullying policies, Cornell said.

Families

Compared with the other contexts for interventions, less is known about the influence of parents and families on bullying and the consequences of bullying. Parents tend to report lower rates of bullying than do children, partly because children may not tell their parents about bullying experiences, said Melissa Holt of the Boston University School of Education. Parents also have a tendency to minimize their children's experiences with bullying, which can lead to fewer interventions and less support, Holt said.

Deborah Gorman-Smith, professor in the School of Social Service Administration at the University of Chicago, pointed out that families can increase the risk for children to perpetrate or become the victims of bullying, help manage the contextual risks for schools or neighborhoods, or protect their children from bullying and promote healthier kinds of behavior. For example, noted Gorman-Smith, children who live in families with intimate partner violence or child abuse and neglect are at significantly increased risk for engaging in bullying behavior.

Both Holt and Gorman-Smith argued for greater family involvement in bullying issues. Among the protective measures they suggested are nurturing parent skills, building supportive family relationships with emotional connections, maintaining clear communication and support, identifying warning signs, encouraging supervision and support of children, promoting children's strengths, coaching children on responses to bullying, modeling kindness and leadership, increasing parental involvement in schools, and connecting families within neighborhoods to one another.

Technology

New information and communication technologies can both exacerbate and ameliorate bullying. As Faye Mishna, Margaret and Wallace McCain Family Chair in Child and Family at the University of Toronto, said, youth use technologies for many purposes: They explore problems; develop identity; access information, resources, and support; develop networks and communities; and communicate with peers. These technologies can be especially helpful to youth lacking offline support, such as lesbian, gay, bisexual, and transgender youth or young people who may feel isolated or stigmatized, Mishna noted.

However, youth also use these technologies to engage in bullying behavior. Mishna observed that youth often do not disclose cyberbullying to adults, saying they do not want to make a "big deal" out of the problem. Cyber interventions may represent an accessible way to disclose incidents without making it a "big deal," Mishna said. Cyber interventions also could offer a safe way for youth to access resources and help.

Michele Ybarra, president and research director of the Center for Innovative Public Health Research, described several text-messaging-based prevention programs in other areas that could be applied to bullying prevention, including an HIV prevention program for adolescents in Uganda and a smoking cessation program in Turkey and the United States. Both have yielded public health benefits and could be adapted to provide useful tools as part of an overall approach to bullying prevention, she said.

Communities

Most of the bullying prevention programs being used in communities do not have a strong evidence base, and evidence about programs that do work tends not to be effectively communicated to practitioners, said Asha Goldweber, a behavioral health researcher in SRI International's Center for Education and Human Services. This has created an opportunity to institute programs that are evidence-based, such as those that have met criteria for program evaluation, said Goldweber.

Health care professionals tend to view bullying in the broader context of violence, said Joseph Wright, professor and vice chairman in the Department of Pediatrics and professor of emergency medicine and health policy at the George Washington University Schools of Medicine and Public Health. However, pediatricians and

other professionals who interact with children could confront the issue more directly by advocating for bullying awareness by teachers, educational administrators, parents, and children and by making the case for new laws and policies that affect bullying, said Wright.

Peers

According to Tom Dishion, director of the Prevention Research Center and professor of psychology at Arizona State University, bullying is not necessarily an emotional reaction, but rather a planned attack on another youth, and it can be induced by coercion or contagion of aggressive actions by peers. Youth with higher levels of self-regulation and lower impulsivity are less influenced by their peers, and adults who skillfully monitor or structure peer environments can reduce both coercion and contagion, observed Dishion. Interventions that support adult involvement, positive relationships, group management skills, and nonaggressive norms in schools are likely to have positive effects on problem behavior, as well as reduce peer contagion and coercion, he said.

Kenneth Dodge, William McDougall Professor of Public Policy at Duke University, pointed out that today the most common way to deal with children who engage in aggressive or deviant behavior is to place that child with like peers in systematic interventions, such as group therapies, alternative schools, or the juvenile justice system. However, group interventions are substantially less effective than individual interventions, and many group interventions yield net adverse effects, noted Dodge. Individual interventions using cognitive behavioral therapies, cognitive behavioral skills building, social-skills building, and social problem-solving training would be more effective and cost beneficial, he said.

Laws and Public Policies

Though virtually all of the states have anti-bullying laws, little is known about the extent to which these laws and policies actually decrease bullying behaviors, said Mark Hatzenbuehler, assistant professor of sociomedical sciences at Columbia University's Mailman School of Public Health. One study suggests that “inclusive” anti-bullying policies—those that specifically include sexual orientation as a protected-class status—reduce the risk of suicide attempts and peer victimization in gay teenagers and were associated with a reduced risk for peer victimization for all youth, not just gay youth, noted Hatzenbuehler. However, much more research is needed to establish best practices for policy makers and school administrators, including stronger methodologies to establish cause-and-effect linkages, he said.

As Douglas Abrams, a professor at the University of Missouri School of Law, pointed out, bullying victimization can be regarded as imposing a learning disability on the targeted children because it creates barriers to their education. However, he also pointed out that schools face strong disincentives against enforcing state-mandated anti-bullying legislation, including the risk of costly lawsuits brought by parents of bullies claiming infringement of First Amendment rights. Existing law, said Abrams, puts school districts in a strong legal position to impose discipline in bullying cases, but administrators have to be willing to fight lawsuits to protect targeted students.

Translating Research into Policy and Practice

Developing effective interventions is just the first step in achieving high-quality implementation of effective practices on a large enough scale that they can make a substantial difference, noted Luanne Rohrbach, associate professor of preventive medicine at the University of Southern California Keck School of Medicine. The adoption, implementation, sustainability, and scalability of an intervention receive much less study than efficacy, yet these are the factors that will determine whether an evidence-based intervention has a large-scale impact on a population, said Rohrbach. Even when implementing an evidence-based program, the fidelity of implementation can vary greatly, observed Rohrbach. Guided or planned adaptation of a program can help overcome some of the

problems related to fidelity, she said, though such adaptations should be theory-based, provide options within or among program components, conceptualize a program as a process rather than a standardized set of activities, and develop and adhere to guidelines for cultural adaptations.

Hendricks Brown, a professor in the Northwestern University Feinberg School of Medicine, also described some of the barriers to effective implementation of bullying prevention programs and ways to overcome them. Prevention needs to be made an integral part of the school mission, so that it is sustainable from the beginning rather than as a final step, he said. Interventions designed to achieve multiple outcomes also can produce both immediate and long-term positive outcomes, but monitoring and feedback to practitioners is essential to ensure fidelity of implementation, said Brown.

Communities That Care is an example of a program framework that provides flexibility in implementation, observed Abigail Fagan, associate professor at the University of Florida. It is a community-driven approach that takes into account the differences among communities and the problems they are facing. It assesses the needs and behaviors in a community and matches those needs with evidence-based practices while making sure that the practices are implemented with fidelity, noted Fagan. Evaluations have shown that Communities That Care can substantially increase the number of youth abstaining from alcohol and avoiding delinquency, said Fagan, and similar approaches could be applied to bullying.

School Personnel Perspectives

A particularly intriguing aspect of the workshop was a set of concluding panels in which school personnel and students reflected on the main messages they heard in the workshop, on topics or participants missing from the discussion, and on possible directions for future discussion and action.

Creating social norms for peer groups within the schoolhouse is extremely important, said William Myers, principal at South River High School in Anne Arundel County, Maryland, but schools exist within a much broader context. Valuable resources would be programs beginning at the elementary level to teach students about the appropriate and inappropriate uses of technology along with campaigns to let parents know more about bullying and about how to help a bullied child, suggested Myers.

Virginia Dolan, coordinator of behavioral supports and interventions for Anne Arundel County Public Schools, highlighted the need for schools to be accountable for the implementation of programs. Schools can implement programs without fidelity and then wonder why they do not work, she said.

Donlin identified legislators as a stakeholder group not represented at the workshop. State laws and policies are important, he said, but they have to be both practical and practicable.

All three of the school personnel discussed the difficulties associated with reporting bullying incidents, as required by many district- and state-level policies. Disconnects exist between what youth are reporting and what adults are reporting, how bullying is perceived and how it is identified, and what is being done about it, said Dolan. Recognizing, defining, and dealing with bullying all require training, Donlin added. Myers pointed out that the common definition of bullying could create a starting line for jurisdictions across the country in dealing with bullying.

Student Perspectives

Among the students, Alexa Cafasso, a high school senior in Hampton, Connecticut, agreed on the need to apply a common definition of bullying, since she goes to a private school that may interpret and handle bullying in a different manner than would a public school. A universal definition also would make it easier to educate younger children about what bullying is and how to stop it.

Glenn Cantave, a junior at Wesleyan University in Middletown, Connecticut, said that one topic overlooked at the workshop was the importance of self-esteem and confidence on the part of victims. Adolescents often rely on technology-based exchanges for a sense of external validation, but they need to recognize their own self-worth to withstand bullying.

Whitney Dockery, a junior at Georgetown University in Washington, DC, noted that two other groups missing from the conversation were parents and teachers. Parents need to be equipped to respond well when their children come to them with bullying problems, and teachers can encourage and support students to become involved in activities where they can make friends; teen dating and victimization also deserve more attention, she said.

Asher Farkas, a sophomore at New York University's Tisch School of the Arts, called attention to the fact that teachers can be bullies, too, and several of the other students agreed with this statement. The definition of bullying should not limit itself just to youth, he said. He also urged that schools teach children beginning in elementary school to empathize with others to prevent bullying.

Finally, Shaw, the New York City high school senior, emphasized the importance of examples set by teachers, administrators, and student leaders. "It also seems a little unfair that we would build an entire system around assuming that an awkward sixth grader is going to feel comfortable standing up to the cool kid and saying you shouldn't do that, leave that kid alone." It is "amazing when it happens, but we cannot build a society on that if we are not expecting that out of adults, too," said Shaw.

Future Directions

As Michael Lu, associate administrator of maternal and child health of the U.S. Department of Health and Human Services Health Resources and Services Administration, noted at the start of the workshop, public awareness about bullying and about its negative impacts on youth has expanded dramatically. However, Lu observed, far too many children and youth are being bullied every day, Lu observed, adding, "What more can we do?" The final panel of the workshop considered this question, based on the workshop presentations and discussions.

Gottfredson noted that the presentations demonstrated the need for a better understanding of the effectiveness of interventions when programs are delivered in more realistic settings. Bradshaw stressed the importance of understanding what works for whom and under what circumstances, as well as the influence of different mediators and moderators in bullying prevention efforts.

Jonathan Todres, professor of law at Georgia State University College of Law, noted that many of the workshop presentations highlighted the need for coordination among agencies to prevent and respond to bullying. Incentivizing a coordinated response is critical, he said, particularly among agencies that have barriers to coordination.

Finally, Megan Moreno, associate professor of pediatrics at the University of Washington, observed that many presenters stressed the importance of not waiting until the implementation stage to get input and buy-in on interventions. This, Moreno said, will help researchers have a better understanding about what might work and which theoretical models resonate with the people who will be implementing, or will be affected by, the interventions. 

PLANNING COMMITTEE ON INCREASING CAPACITY FOR REDUCING BULLYING AND ITS IMPACT ON THE LIFECOURSE OF YOUTH INVOLVED**

Frederick P. Rivara (*Chair*), Seattle Children's Guild Endowed Chair in Pediatrics, Professor of Pediatrics, University of Washington School of Medicine; **Catherine Bradshaw**, Professor, Associate Dean for Research and Faculty Development, Curry School of Education, University of Virginia; **Nina Fredland**, Associate Professor, Texas Woman's University College of Nursing; **Nancy Guerra**, Professor of Psychology, Associate Provost for International Programs and Director, University of Delaware; **Denise Gottfredson**, Professor at the University of Maryland Department of Criminal Justice and Criminology; **Megan A. Moreno**, Associate Professor of Pediatrics, University of Washington; **Jonathan Todres**, Professor of Law, Georgia State University College of Law.

** IOM planning committees are solely responsible for organizing the workshop, identifying topics, and choosing speakers. The responsibility for the published workshop in brief rests with the institution.

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REVIEW: To ensure that it meets institutional standards for quality and objectivity, this workshop in brief was reviewed by **Douglas E. Abrams**, University of Missouri School of Law, and **Dorothy L. Espelage**, University of Illinois College of Education. **Chelsea Frakes**, Institute of Medicine, served as review coordinator.

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For additional information regarding the workshop, visit <http://www.iom.edu/bullyingworkshop>.