

Bullying and Children in the Child Welfare System

Susan Dougherty

For
The National Resource Center for
Family Centered Practice & Permanency Planning
Hunter College School of Social Work
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Bullies are present in every school and community, and all children must deal with bullying and teasing from some perspective – if not as the bully, the victim, or both, then as the bystander who witnesses acts of victimization and must choose to act on that knowledge or not. For children involved in the child welfare system, bullying and teasing may be not only a more prevalent, a more constant, and a more serious problem, but they may have fewer supports to help them deal with bullying behavior.

What is Bullying?

Definitions of what constitutes bullying vary, but generally are in substantial agreement with one which appeared in the Journal of the American Medical Association (Nansel, Overpeck, Pilla, Ruan, Simons-Morton and Scheidt, 2001) and includes these components:

- bullying is behavior that is meant to harm or disturb;
- it occurs repeatedly; and
- it occurs between individuals who do not have equal power.

Bullying can be physical (hitting, shoving), verbal (threats, teasing, insults) or psychological (shunning, spreading rumors).

Recently there has been some attention paid to forms of behavior used by girls that also constitute bullying. Using relationships and social status as weapons, girls bully each other with lies, secrets, ostracism, sabotage and body language, rather than the physical violence or threats commonly seen among boys. Girls who are the targets of this "relational aggression" (Simmons, 2002) suffer just as much as do children who are the targets of other forms of bullying.

Who are Bullies and Victims?

Dake, Price, and Telljohann (2003) have prepared lists of characteristics of both bullies and victims based on their review of the literature on the subject. Those lists include:

Bullies are likely to:	Victims are likely to:
<ul style="list-style-type: none">▪ suffer symptoms of depression▪ experience suicidal ideation▪ suffer from psychiatric problems▪ suffer from eating disorders▪ engage in substance abuse▪ engage in fighting behaviors▪ engage in criminal misconduct▪ engage in academic misconduct▪ have parents who use punitive forms of discipline▪ have less-responsive and less-supportive parents	<ul style="list-style-type: none">▪ suffer symptoms of depression▪ experience suicidal ideation▪ suffer from psychiatric problems▪ suffer from eating disorders▪ suffer feelings of loneliness▪ have low self-esteem▪ suffer from anxiety▪ be less popular than other children▪ spend a lot of time alone▪ have suffered child abuse▪ have less-responsive and less-supportive parents

Bullies are likely to:	Victims are likely to:
<ul style="list-style-type: none"> ▪ come from harsh home environments ▪ have poor parent-child communication ▪ lack adult role models ▪ have suffered child abuse ▪ have lower school bonding ▪ have lower academic achievement ▪ have lower school adjustment ▪ have authoritarian parents 	<ul style="list-style-type: none"> ▪ come from harsh home environments ▪ have parents who allow few opportunities to control social circumstances ▪ have problems with school bonding ▪ have greater rates of absenteeism ▪ have problems with school adjustment ▪ experience physical health problems

It is difficult to separate out some of the characteristics which cause someone to bully or be bullied from the effects of being a bully or a victim, and many of these characteristics are attached to other problems, but the lists can help to signal that bullying may be an issue in a child's life.

Why is this Important in Child Welfare?

Not only are these two lists similar to one another, but they echo many of the characteristics common among children in foster care, including depression, suicide attempts, eating disorders, lower educational achievement, poor academic success, difficulties in school and impaired social relationships, among a host of emotional, behavioral, developmental, and health problems (Barbell and Freundlich, 2001). The majority of these children enter care due to abuse or neglect, which is often associated with one or more of the parent-child difficulties that appear in the above lists. A report from Australia (CREATE Foundation, 2006) indicates that almost two-thirds of children in care who were interviewed about school issues report reported having experienced bullying at school, and almost one in five reported that bullying occurred ‘most of the time’ or ‘always’.

Garbarino and deLara (2002) point out that

some kids bully as a reaction to the punishing lessons that they learn at home....At school these abused and much put-upon kids demonstrate with their peers the lessons they learned the hard way: Might makes right (p. 69).

The same authors discuss how children with disabilities, particularly those with developmental delays, are often the targets of bullying. Van Cleave and Davis (2006) found

found a significant association between having a special health care need and being bullied by other children, bullying other children, and being both a bully and a victim. Being bullied was associated with each of the 5 categories of special health care needs...and this association persisted when adjusting for several sociodemographic variables and health-status variables. In contrast, bullying others was associated only with an emotional, developmental, or behavioral problem requiring treatment. Having an

emotional, developmental, or behavioral problem and having a functional limitation was associated with being a bully/victim.

How many children in foster care or those adopted from the foster care system are "special needs" due to mental or physical disabilities?

It therefore seems that these children, whether they are living with their parents or are parented by foster or adoptive parents or kinship caregivers in either formal or informal relationships, will often be either bullies or victims or both. The adults who care for and work with them must be attentive to the possibility that bullying affects the lives of these children, and learn how to both recognize bullying and victimization behaviors and how to respond effectively and appropriately.

Can caretakers and agencies be held accountable for what happens to children who are bullied? In January 2002 a 12-year-old Connecticut boy who was the victim of relentless bullying in his school committed suicide. Twenty-one months later his mother was tried and convicted of a felony count of putting her son at risk by creating a home environment that was unhealthy and unsafe – and by implication, contributing to the factors (poor hygiene) that other children picked on. The child complained about the bullying to his mother and to a caseworker, among others. Both the child welfare agency, which had investigated the home on a neglect allegation and closed the case 6 days before the boy died, and the school, which did nothing about the bullying going on within its walls, were cited as having failed the child in an investigation by the state's child advocate and state's attorney (Santora, 2003a, 2003b, 2003c).

What Resource Parents and Child Welfare Staff Can Do

Step One: Get Educated

The first step for all individuals who care for and work with children is to become educated on the topic. We suggest the following resources to get started:

Books

- Garbarino, J. & deLara, E. (2002). *And words can hurt forever*. New York: Free Press.
- Simmons, R. (2002). *Odd girl out*. San Diego, CA: Harvest.

On the Internet

- Bullying.org
<http://www.bullying.org>
- *Bullying in Schools* from the ERIC Clearinghouse on Counseling and Student Services
<http://www.ericdigests.org/1997-4/bullying.htm>
- Hamilton Fish Institute
<http://hamfish.org/>
- Sassu, K.A., Elinoff, M.J., Bray, M.A., & Kehle, T.J. (n.d.). Bullies and victims: Information for parents. *National Association of School Psychologists*. [Online].
http://www.naspcenter.org/resources/principals/nasp_bullieseng.pdf (English)

http://www.naspcenter.org/resources/principals/nasp_bulliessp.pdf (Spanish)

- The Safety Zone, a clearinghouse for information and material related to school safety. A project of the Comprehensive Center, Region X of the Northwest Regional Educational Laboratory.

http://www.safetyzone.org/bullying_harassment_conflict_resolution.html

- Stop Bullying Now!

<http://stopbullyingnow.hrsa.gov/index.asp>

This campaign -- "Take A Stand. Lend A Hand. Stop Bullying Now!" -- is designed to stop bullying, including verbal or physical harassment that occurs repeatedly over time, that is intended to cause harm, and that involves an imbalance of power between the child who bullies and the child who is bullied. The website is sponsored by the U.S. Department of Health and Human Services, the Health Resources and Services Administration, and the Maternal and Child Health Bureau.

Video

- *Let's Get Real!*

A documentary that examines a variety of issues that lead to taunting and bullying, including racial differences, perceived sexual orientation, learning disabilities, religious differences, sexual harassment and others. The film not only gives a voice to targeted kids, but also to kids who do the bullying to find out why they lash out at their peers and how it makes them feel. From Women's Educational Media:

<http://www.womedia.org/letsgetreal.htm>

Step Two: Provide Help

Once you know more about bullying, use some of these resources to learn how to help children who may be involved as bullies or victims:

- American Academy of Child & Adolescent Psychiatry. (2001). Bullying. *Facts for Families No. 80*. [Online].

<http://www.aacap.org/page.ww?name=Bullying§ion=Facts+for+Families>

- Borba, M. (1999). *What to do if your child is teased or bullied*. [Online].

<http://www.fosterparents.com/articles/borba2.html>

- Parentline Plus. (n.d.). *Bullying*. [Online].

<http://www.parentlineplus.org.uk/index.php?id=9>

- Teen Touch. *Coping with bullies*. [Online].

http://www.teentouch.org/coping_bullies.asp

Step Three: Take Substitute Care Factors Into Account

Adults who care for or work with children and youth in out-of-home care need to take additional factors into consideration. Much of the advice given to young people who are being bullied involves making decisions based on their knowledge of the situation, such as

- choosing a safe route to get to and from school;

- avoiding being alone by staying with friends;
- knowing which children to avoid in the lunch room or on the bus or playground; and
- knowing which adults to talk to problems with bullies about.

Children and youth who have had to change communities and schools when placed in care, when moved from one placement to another, or when reunified with family who have moved are at a disadvantage in employing strategies like these that depend on familiarity with the community, the school social structure, and peers and adults in their environment.

Adults should be sensitive to this as a special issue, and find ways to get around it. Here are some suggestions:

- Agency staff can connect children and youth in care with others in their community or school through support groups. Joining a group of peers both gives the child a place to "belong" and allows him or her to benefit from the knowledge of others who have been in the community longer and "know the ropes."
- Agencies and resource parents alike should advocate with schools to provide effective anti-bullying programs (see below).
- Share your concerns with others who work with or care for the child. If you are a foster parent concerned that the child in your care is a bully at school, talk with the caseworker or supervisor about how the child's treatment plan might incorporate counseling or other interventions. If you think or know a child is being bullied, ask for help in school advocacy, providing assertiveness training, or dealing with the kinds of issues that often make children the target for bullying, such as poor hygiene, unstylish clothing, difficulty in "reading" social cues, or special education needs.
- Be attentive to cues such as an unwillingness to interact with certain other children in the neighborhood or even in your family, reluctance to go to school or out to play in the community, or dropping out of activities that previously were enjoyed. A child who is avoiding situations in which bullying is occurring needs to replace them with others, and the child in out-of-home care may need assistance in finding appropriate substitutes.

Step Four: Engage Parents and Resource Parents

To combat bullying, harassment, and violence, experts encourage parents to become active advocates against bullying in their communities and schools. Strategies recommended by the Office of Juvenile Justice and Delinquency Prevention (1998) include:

- Rules against bullying that are publicized, posted schoolwide, and accompanied by consistent sanctions.
- Student and adult mentors who assist victims and bullies to build self-esteem and to foster mutual understanding of and appreciation for differences in others.
- A buddy system that pairs students with a particular friend or older buddy with whom they share class schedule information and plans for the school day and on whom they can depend for help.
- An on-campus parents' center that recruits, coordinates, and encourages parents to take part in the educational process, volunteer, and assist in school activities and projects.
- Classes for adults in parenting skills and for students in anger management, assertiveness training, and behavior modification training.

- Behavior contracts signed by students and parents and written behavior codes for students, teachers, and staff members that are circulated to all parents and students.
- Emphasis on discipline that stresses right behavior instead of reprimands that focus on punishing wrong behavior.
- Friendship groups that support children who are regularly bullied by peers.
- Peer mediation programs and teen courts that train students to mediate problems among themselves.
- Conflict and dispute resolution curriculums available in all grades.
- Close monitoring of cafeterias, playgrounds, and "hot spots" where bullying is likely to occur away from direct adult supervision.
- Cooperative classroom activities and learning tasks, with care taken to vary the grouping of participants and to monitor groups for balanced reception and treatment of participants.
- Classroom and schoolwide activities designed to build self-esteem by spotlighting special talents, hobbies, interests, and abilities of all students.
- Publicity about organizations and groups that build children's social skills and self-discipline, such as the Boys & Girls Clubs, Scouting, and junior cadet programs, and various disciplines such as yoga, tai chi chuan, jujitsu, karate, kung fu, and tae kwon do.

Bullying Prevention and Intervention Curricula

Much of the work done on bullying comes from Europe and Australia; in the U.S. efforts have been mainly in tailoring curricula developed in those areas for use in elementary and middle schools. There are several programs that are cited as having proven to be effective:

- *The Olweus Bullying Prevention Program*, recognized as a Model Program by both the Substance Abuse and Mental Health Administration and the Office of Juvenile Justice and Delinquency Prevention. For information and ordering information, see the fact sheet at <http://www.modelprograms.samhsa.gov/pdfs/model/Olweus%20Bully.pdf>
- *Linking the Interests of Families and Teachers (LIFT)* is an anti-aggression program that addresses antisocial behaviors by engaging both schools and families. For a description and contact information, see Blueprints for Violence Protection from the Center for the Study and Prevention of Violence at <http://www.colorado.edu/cspv/blueprints/promising/programs/BPP09.html> Information about research into its effectiveness, is included in *Preventing mental disorders in school-age children* at <http://www.prevention.psu.edu/pubs/docs/CMHS.pdf>
- *The Incredible Years* combines parent training, teacher training, and child social skills training to address problem behaviors in young children. It has been singled out as an "exemplary" best practice program by the Office of Juvenile Justice and Delinquency Prevention program and a model program by the Center for Substance Abuse Prevention (CSAP). For information, see the program's website at <http://www.incredibleyears.com/>

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