



Bullying and Individuals with Disabilities: Needs Assessment Findings

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Alberti Center Annual Conference
October 3, 2014

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Overview

- What is Bullying?
- Brief Literature Review on Bullying and Adults and Youth with Disabilities
- Purpose
- Results
- Implications for Practice and Future Directions

What is Bullying?

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.



Types of Bullying

➤ Physical bullying

- punching, shoving, acts that hurt people

➤ Verbal bullying

- name calling, making offensive remarks

➤ Indirect/relational bullying

- spreading rumors, excluding, ganging up

➤ Cyber bullying

- sending insulting messages, pictures, or threats by e-mail, text messaging, chat rooms, social media



Types of Bullying and People with Special Needs

- **Manipulative Bullying:** Being tricked and controlled by another student
- **Conditional Bullying:** Mistaken friendship consisting of bullying
- **Exploitative Bullying:** Features of the individual's condition are used to bully

Bullying and Individuals with Disabilities



Video created by Ashley Fletcher

Students with Disabilities & Bullying

- Only one study used the federal definition of developmental disabilities from Public Law 98-572
- General education vs. special education
 - Higher levels of bullying victimization and perpetration throughout educational career
- Variety of disability
 - Students with “invisible” disabilities (social and emotional) are more likely to be bullied than students with more visible disabilities
 - Individuals with disabilities who have emotional and behavioral disorders are at a high risk for involvement in bullying
- Severity of disability
 - Students with mild disabilities do not differ from those without disabilities

Blake et al., 2012; Carter & Spencer, 2006; Marini et al., 2001; Rose & Espelage, 2012; Rose, Espelage, Aragon, & Elliott, 2011; Rose, Espelage, & Monda-Amaya, 2009; Rose, Monda-Amaya, & Espelage, 2011; Whitney, Smith, Thompson, 1994

Study Purpose

- To seek input from various stakeholders to identify the experiences of individuals with developmental disabilities with bullying, including the prevalence, impact, strategies used, and needs in order to formulate a long-range strategic plan for the NYS DDPC

Focus Groups and Interviews

- 17 focus groups with 68 participants; 18 individual interviews
- General questions (and more specific ones if needed) about:
 - Bullying victimization experiences
 - Bullying perpetration experiences
 - Effective and ineffective strategies for prevention and intervention
 - What can be done (DDPC initiatives)

Surveys

- Administered 4 surveys (general, parent, adult, child) through listservs, organizations, and contacts
 - General (n = 169)
 - 92% work directly with individuals with disabilities on daily basis (mental health professionals, administrators, and educators)
 - Half worked with adults and half with children
 - Adults with disabilities (n = 34)
 - Ages 18 to 62 (average age 39)
 - Parents of children grades 3-12 (n = 142 respondents)
 - 90% Caucasian mothers
 - 40% of children had autism; 17% with intellectual disability
 - School-age children (n = 5) – Not reported due to low response

Survey Content

➤ About You (and Your Child)

- Age, gender, race/ethnicity, disability
- *2012 Survey on Abuse of People with Disabilities* (Disability and Abuse Project of Spectrum Institute) and the *Bullying and School Experiences of Children with ASD Survey* (Interactive Autism Network [IAN] of the Kennedy Krieger Institute)

➤ Bullying Victimization & Perpetration

- *The California Bullying Victimization Questionnaire* (CBVQ; Felix et al., 2011) – experience of victimization and bullying
- *Social Vulnerability Scale* (Sorono, Dark, & Stone, 2011) – credulity [believing], gullibility [tricked]
- *When Bad Things Happen at School* (Kochenderfer-Ladd & Pelletier, 2008; Visconti, Sechler, & Kochenderfer-Ladd, 2013) – coping measure
- *Why Kids Pick on Me* (Visconti, Sechler, & Kochenderfer-Ladd, 2013) - measure of attributions about peer victimization

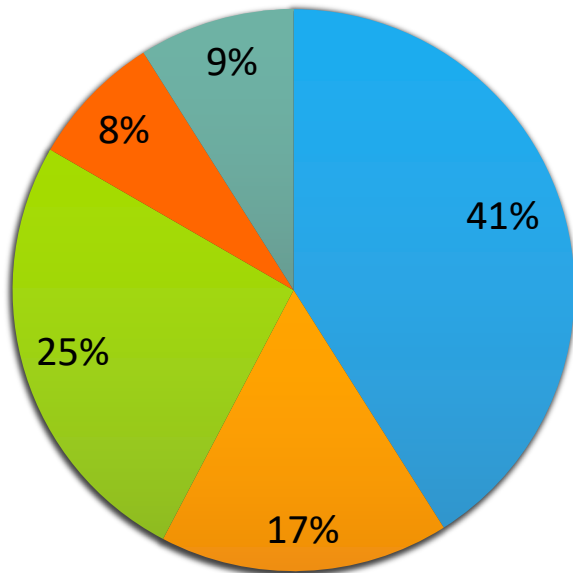
➤ Bullying Prevention Resources, Strategies, Programs, Ideas

- Adapted from *Current Bullying Prevention/Intervention Practices in American Schools* (Sherer & Nickerson, 2010) and items from Cooper & Nickerson (2013), Livingston, IAN, and others

Participants: Focus Groups and Surveys

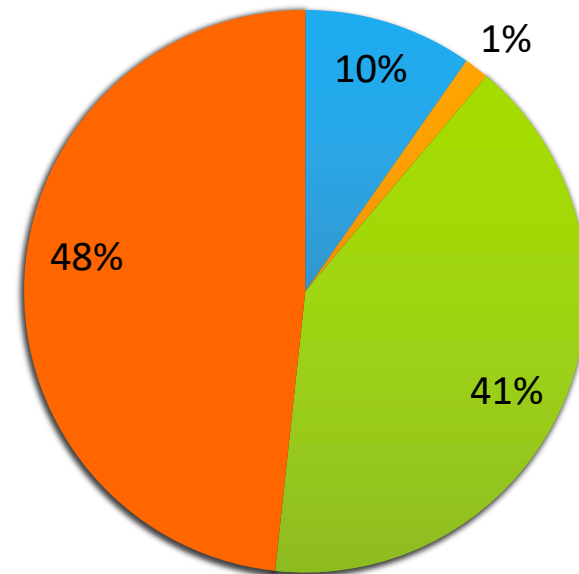


Focus Groups



- Individuals with Developmental Disabilities
- Employers/Administrators/Educational Leaders
- Staff (Service Providers)
- Family/Friends/Advocates

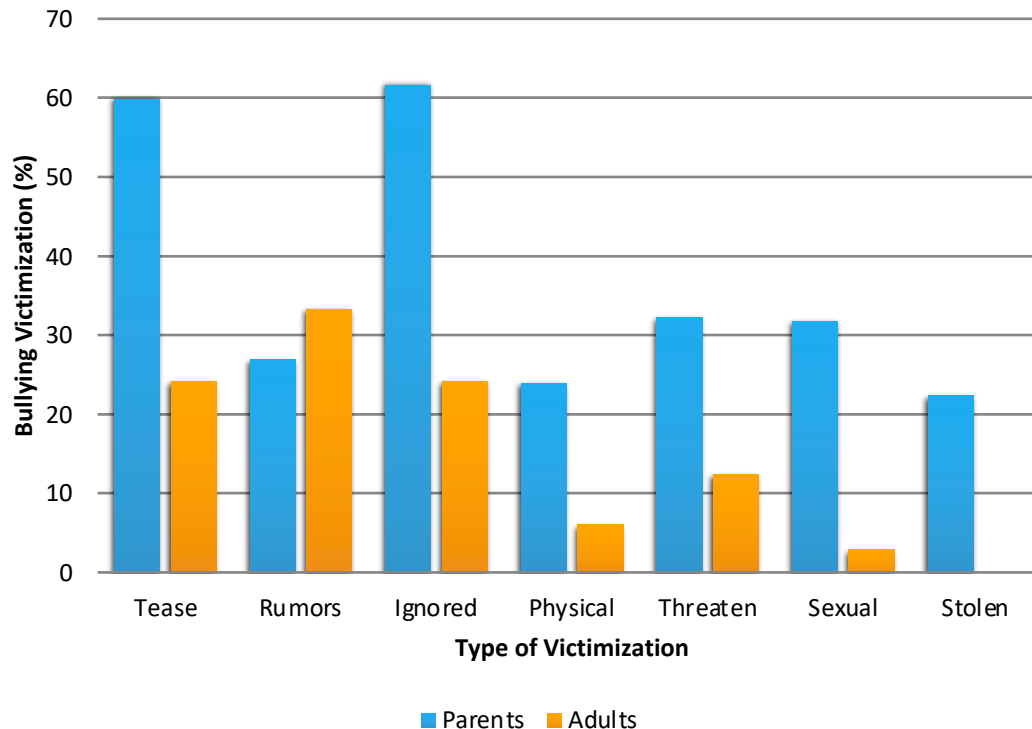
Surveys



- Adults
- Youth
- Parents
- General

Bullying Victimization Experiences

Reported by Parents of Children grades 3-12 and Adults with Disabilities

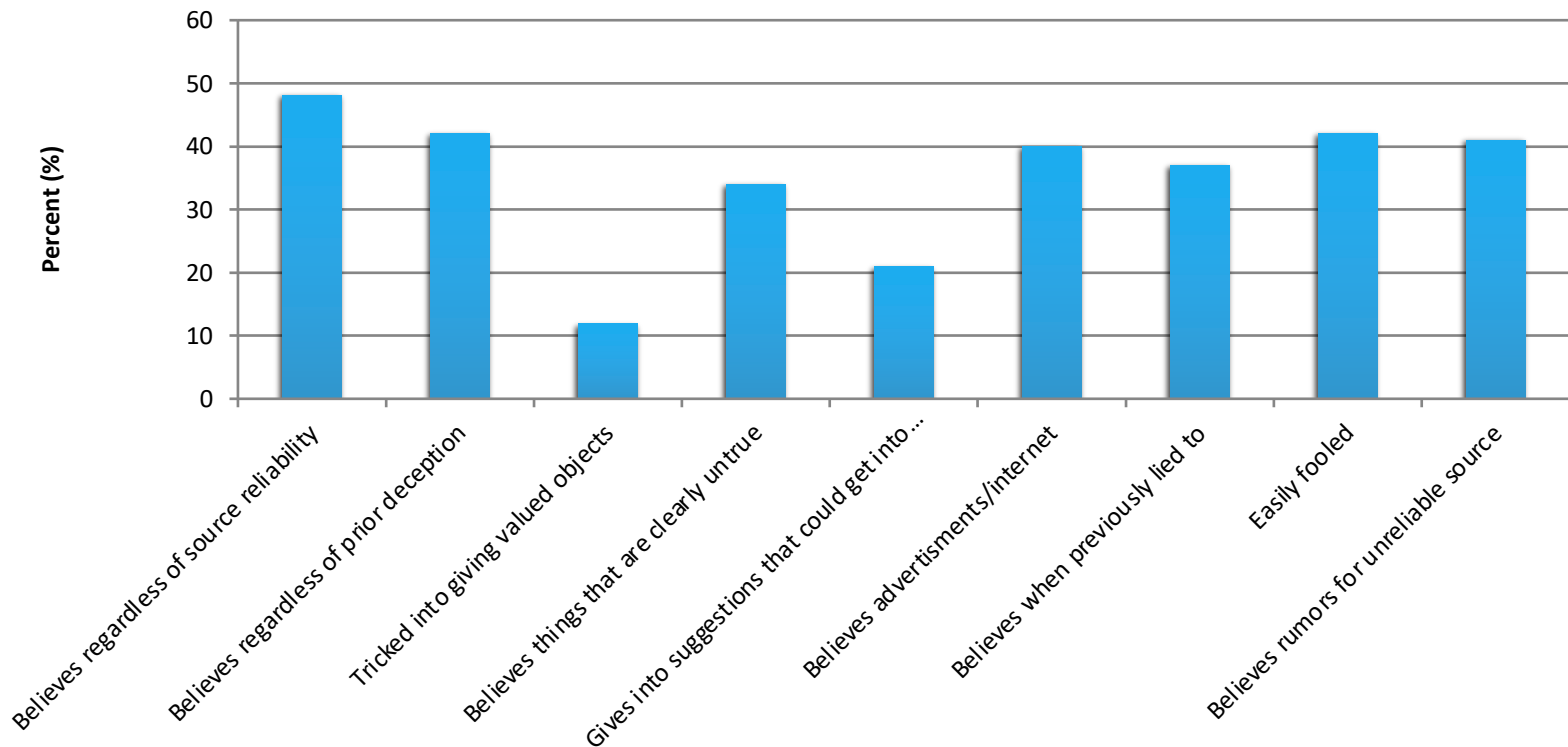


Being teased, ignored, and having rumors spread were the most common types of bullying behaviors reported

Parents said teasing and ignoring happened more to their children than adults reported it happening to them

Youth Social Vulnerability: Credulity

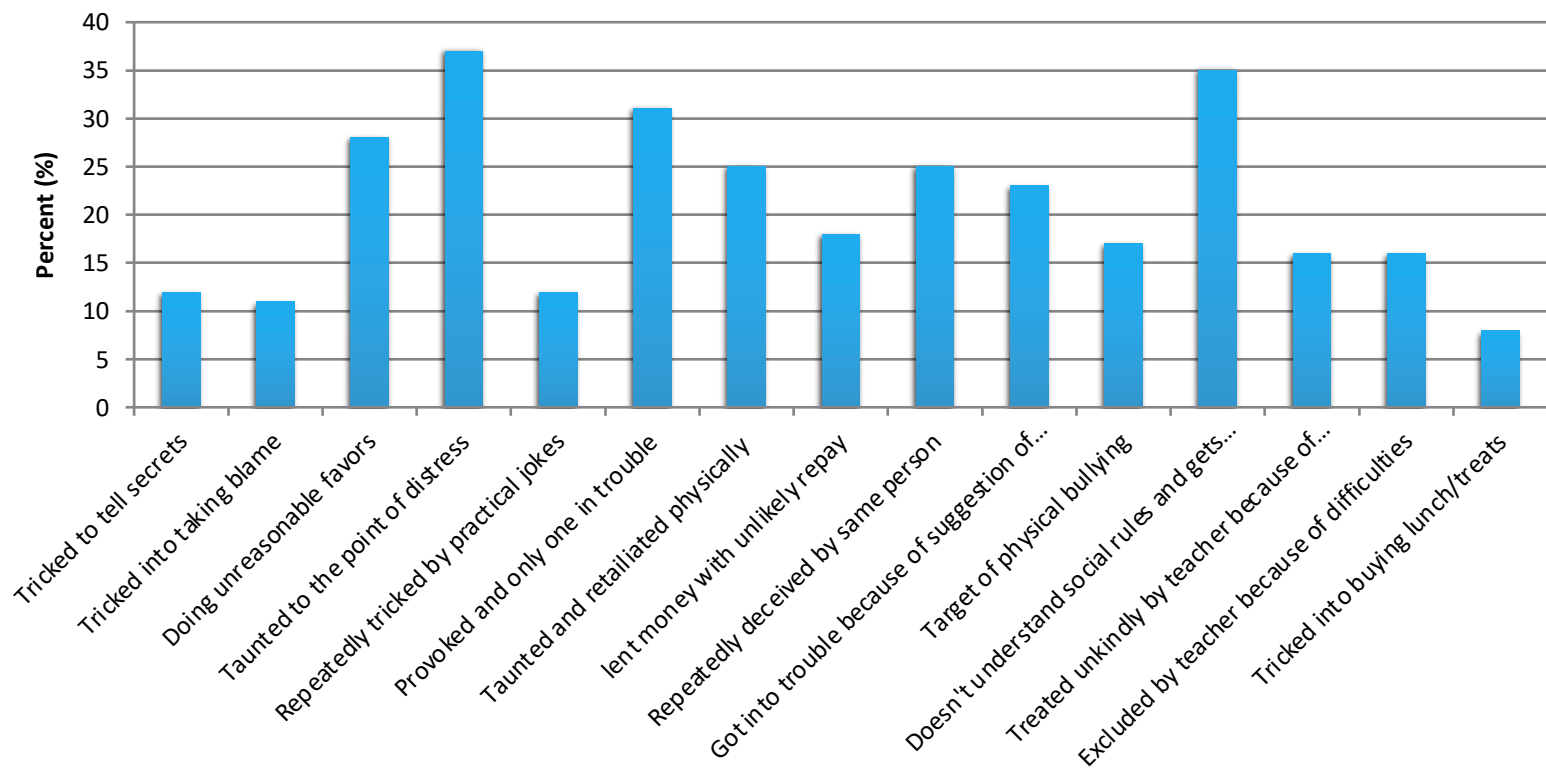
Reported by Parents of Children Grades 3-12



Believing others' statements to their own detriment (i.e., credulity)

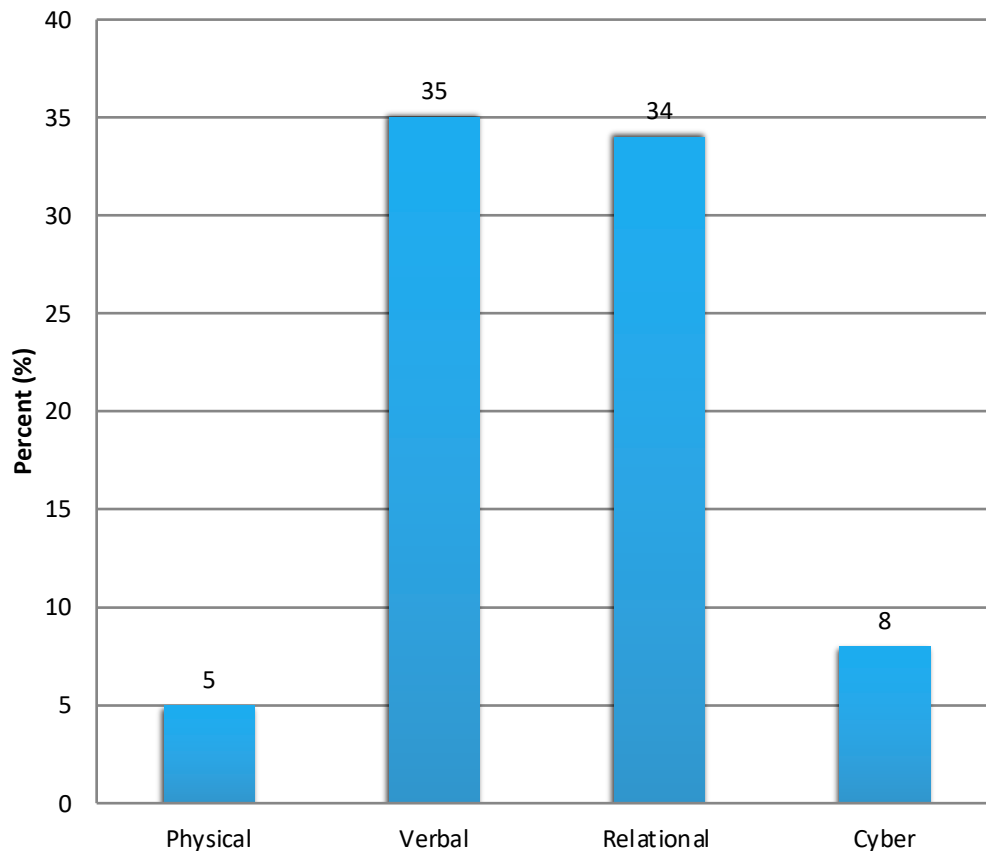
Youth Social Vulnerability: Gullibility

Reported by Parents of Children Grades 3-12



Getting tricked into things or bullied (i.e., gullibility)

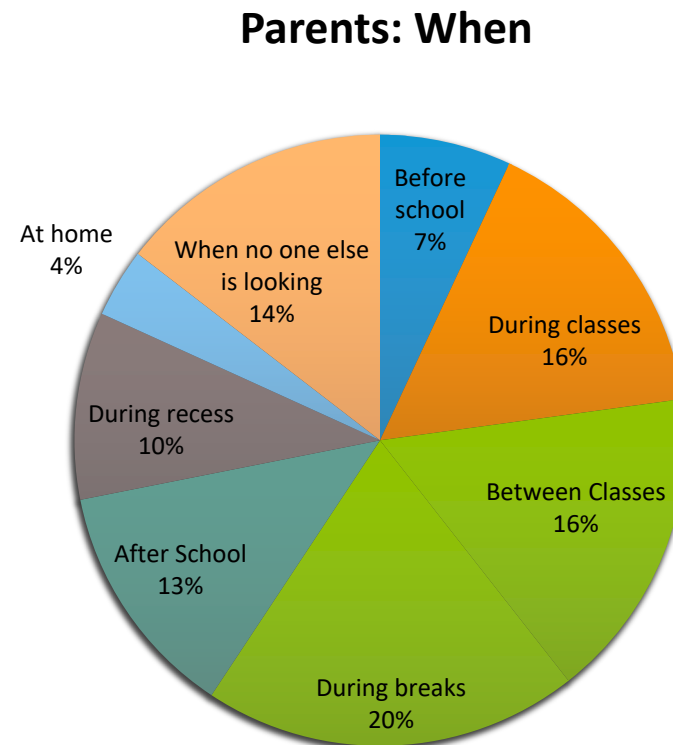
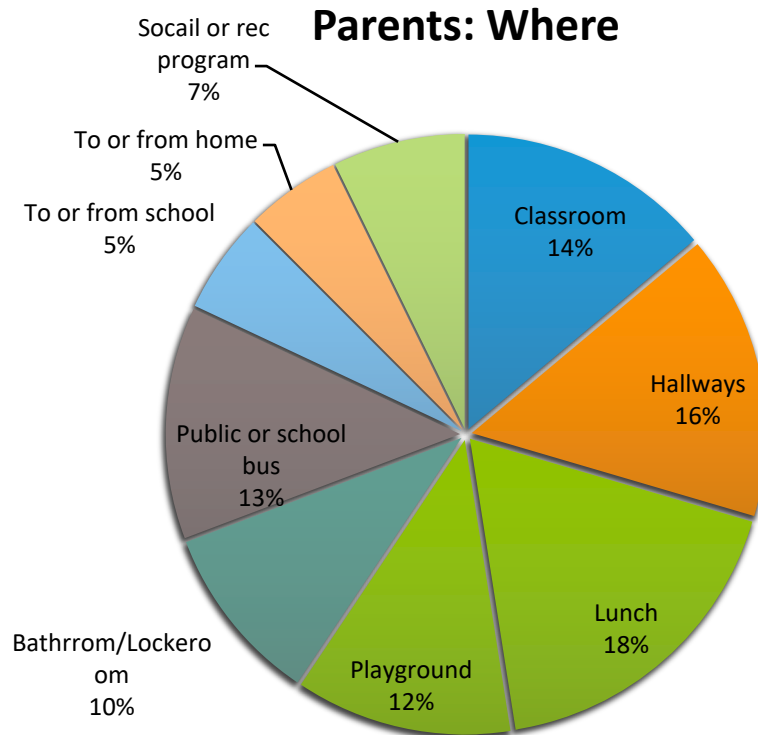
Bullying Victimization Experiences



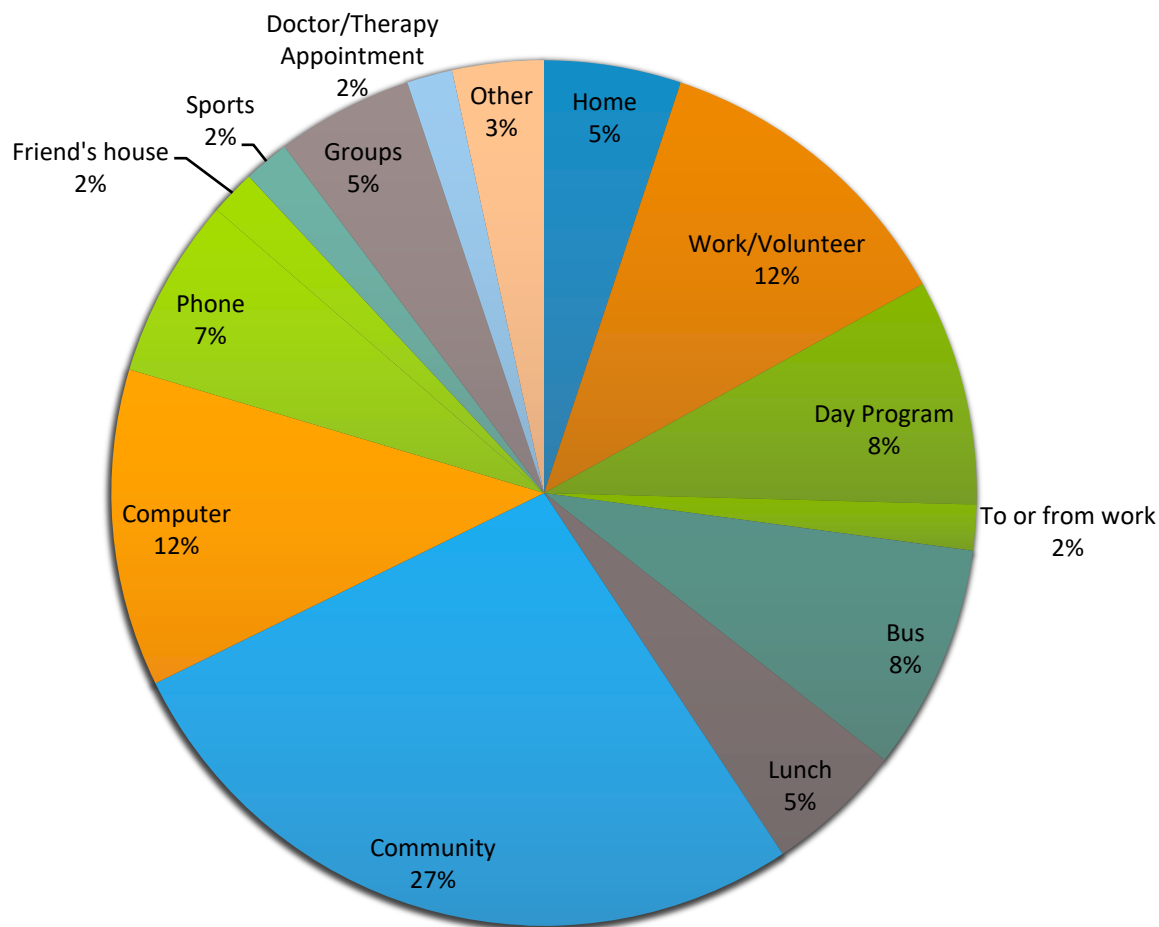
➤ Service providers, educators, employers, and others who interact with people with disabilities reported verbal and relational forms of bullying to be most common

➤ All of these forms of bullying (and gullibility and credulity) are reported by students with disabilities in other studies (Ability Path; Carter & Spencer, 2006)

Where and When Victimization Occurs: Parents



Where Victimization Occurs: Adults with Disabilities



Reasons for People with Disabilities Being Victimized

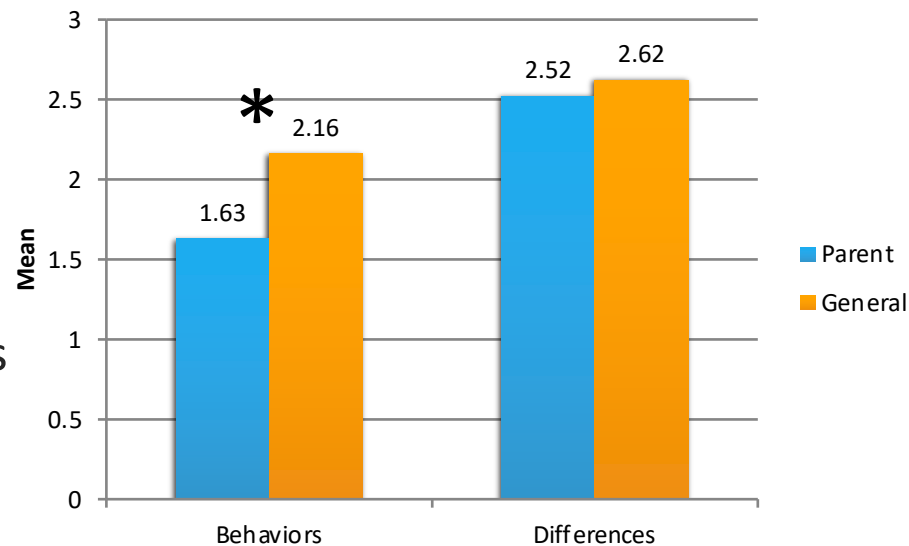
➤ *When Bad Things Happen: 2*

Scales (1 = *Never*, 2 = *Sometimes*, 3 = *Usually*, 4 = *Always*)

➤ Behaviors (bugging or annoying, made them mad, did something mean)

➤ * General survey respondents more likely than parents to say this happened

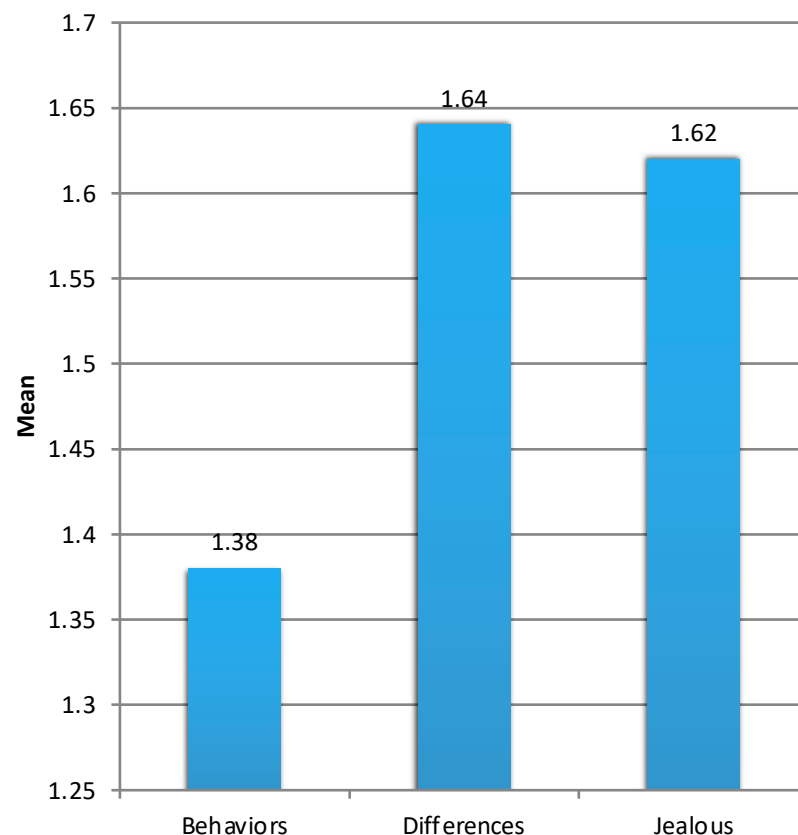
➤ Differences (not as cool, different, different friends)



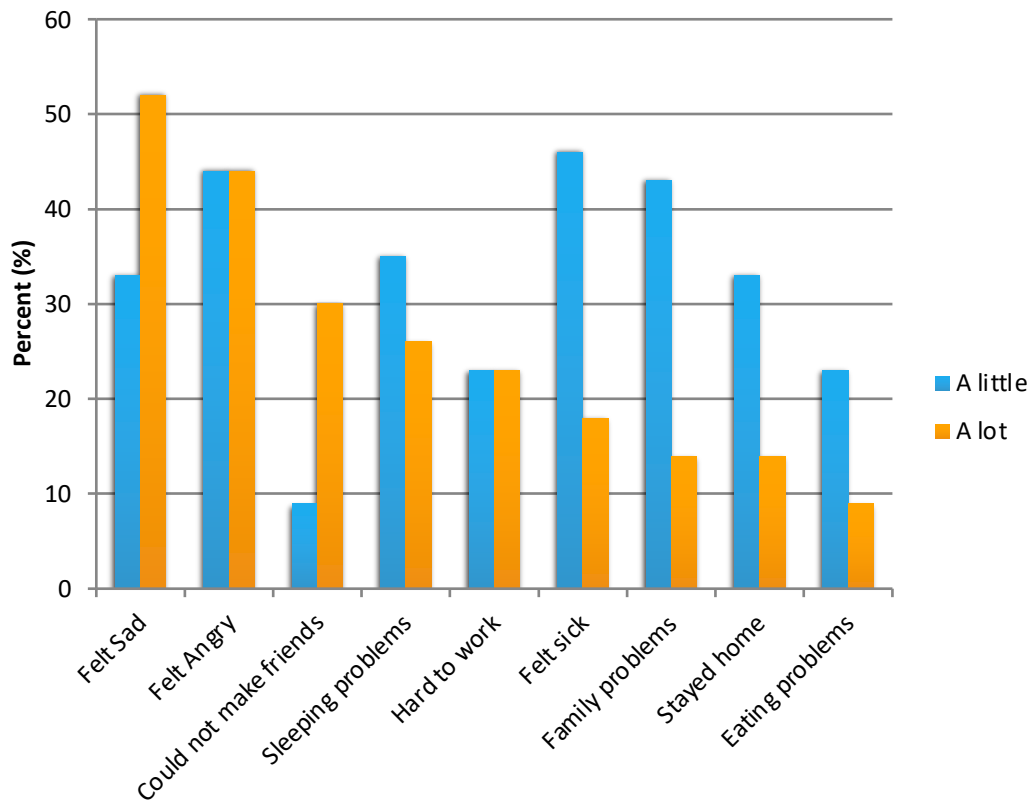
Reasons for Adults with Disabilities Being Victimized

➤ *When Bad Things Happen: 3 Scales (1 = Never, 2 = Sometimes, 3 = Always)*

- Behaviors (bugging or annoying, made them mad, did something mean)
- Differences (not as cool, different, different friends)
- Jealous (want to be like me, want the things I have)



What are the Effects?



➤ Respondents commonly reported

- Feeling sad
- Feeling angry
- Having problems making friends
- Sleeping problems

➤ Students with disabilities that are involved in bullying are at risk for:

- Depression
- Delinquency
- Lowered self-esteem
- Increased anger and hostility

How do People Cope?

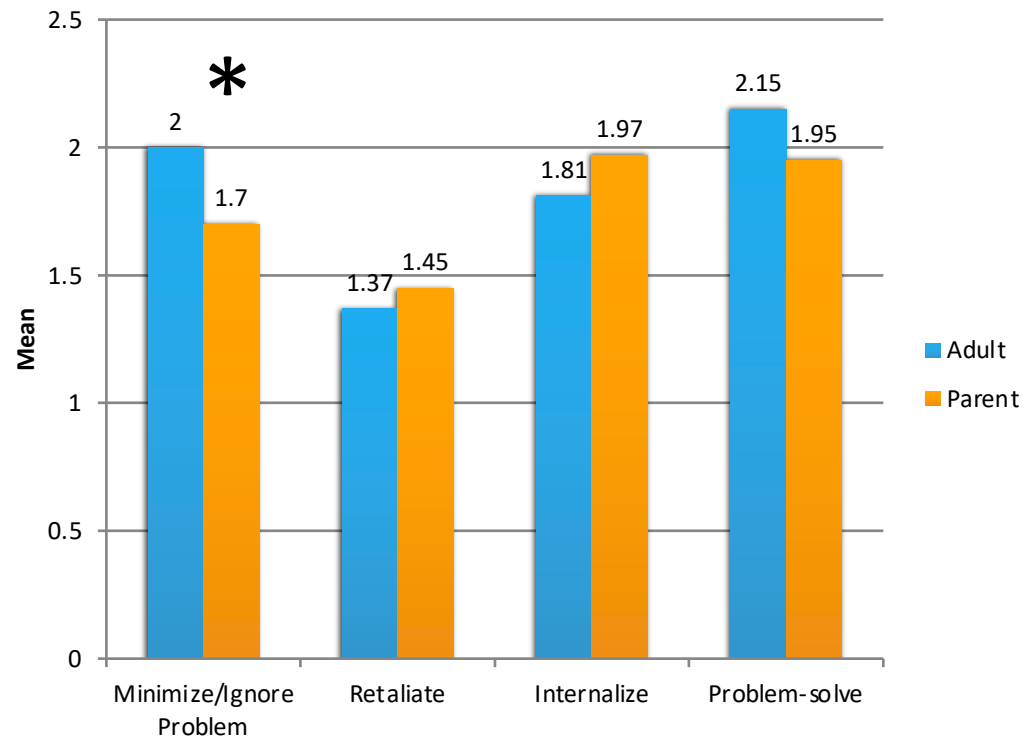
➤ Minimize/Ignore the Problem

➤ * Adults report they minimize/ignore more than parent reporting about child

➤ Retaliate

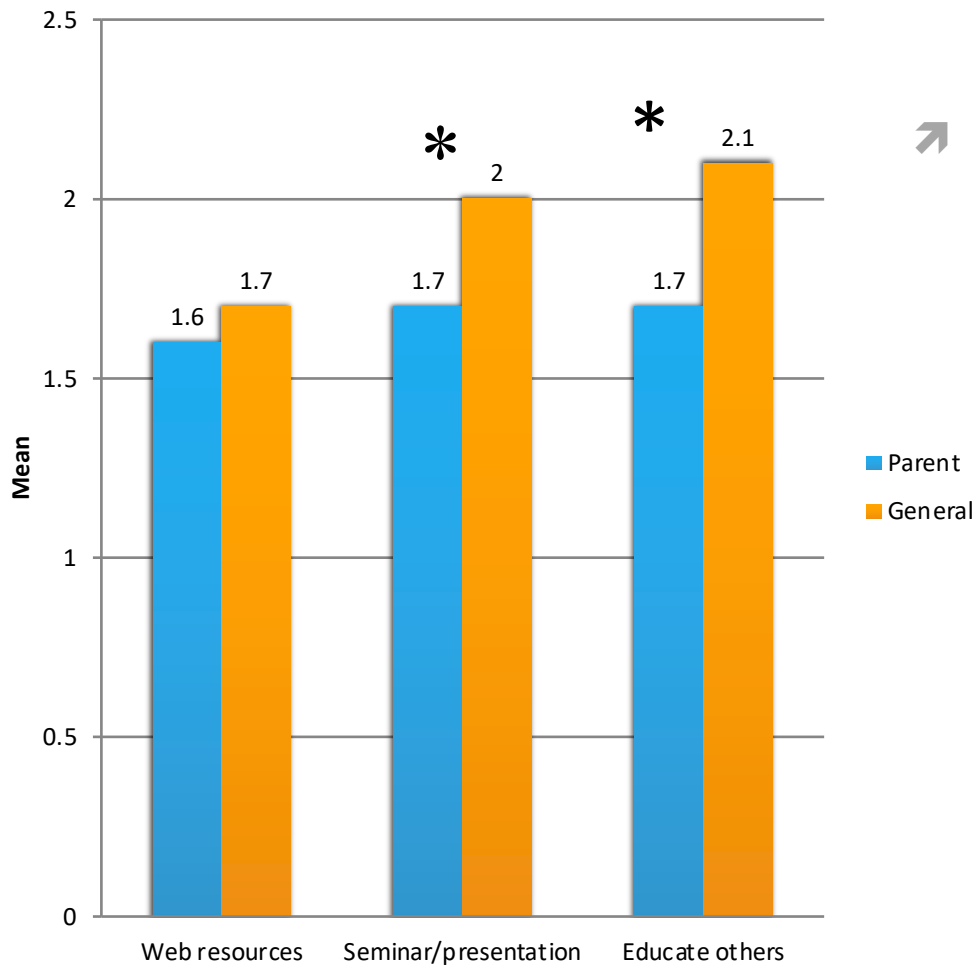
➤ Internalize

➤ Problem-solve



General Prevention

General Prevention Methods Effectiveness



➤ 1 = Not at all effective, 2 = Somewhat effective, 3 = Very effective

➤ *Service providers found educating others and attending seminars and presentations about bullying to be more effective than parents

➤ Percent Have Not Tried (Service Providers and Parents respectively)

➤ Web resources (41%; 25%)

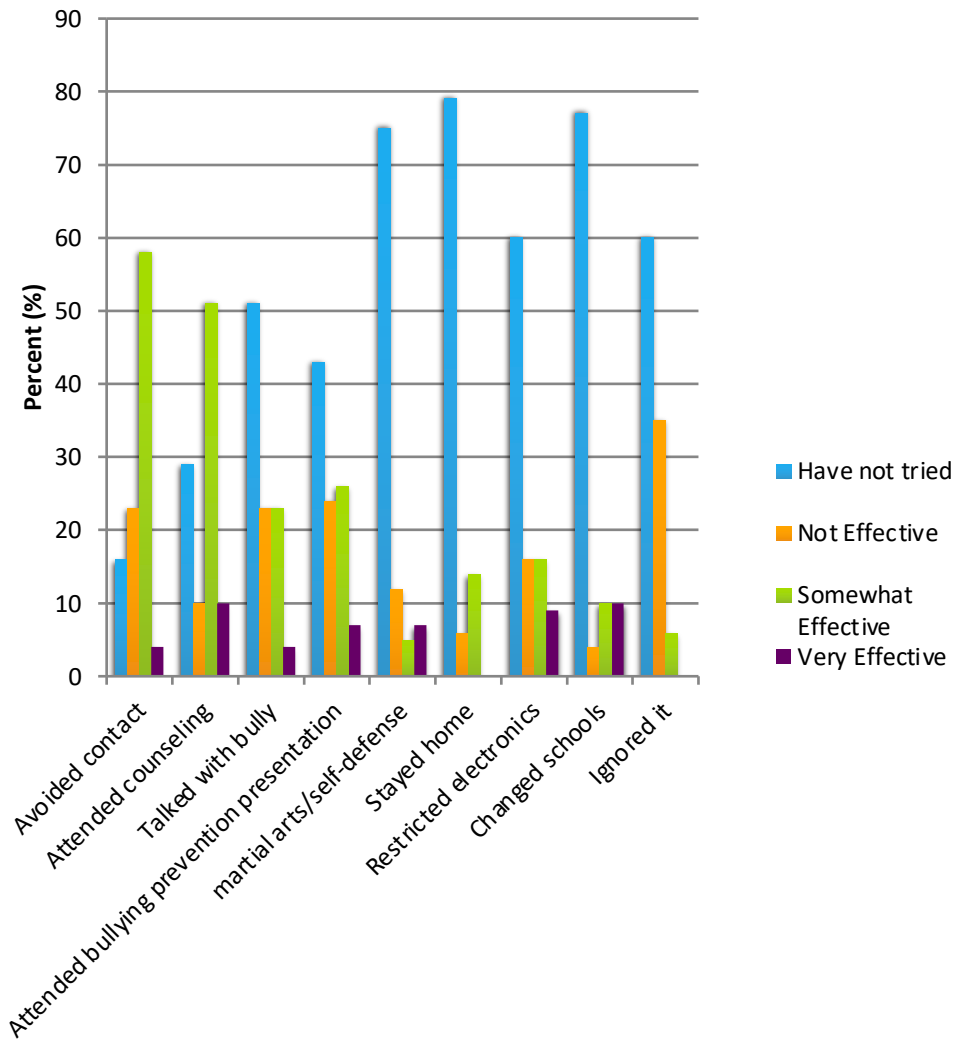
➤ Seminars and presentations (41; 41%)

➤ Educating others on bullying (17%; 41%)

What Parents Have Tried & Effectiveness

When Child is Being Bullied

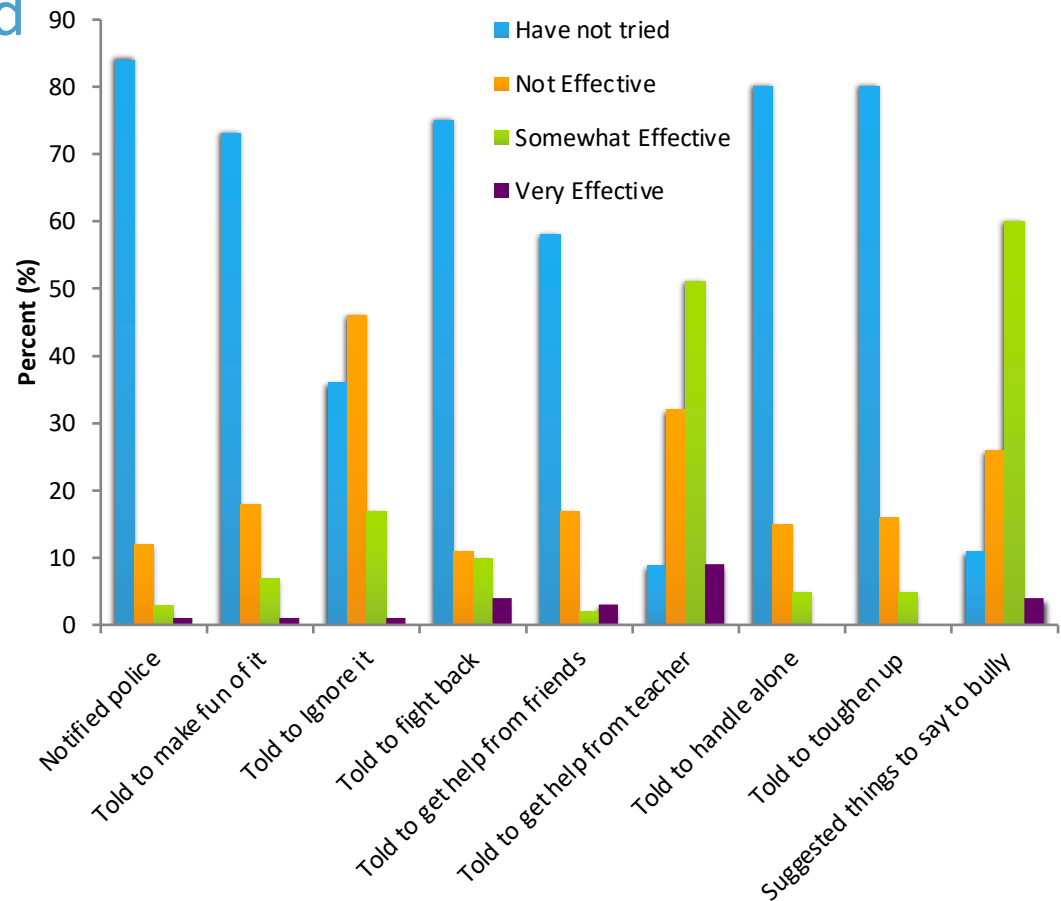
- Somewhat effective:
 - Avoided contact between bully and victim
 - Attending counseling
- Less common strategies that are very to somewhat effective are restricting electronics and changing schools



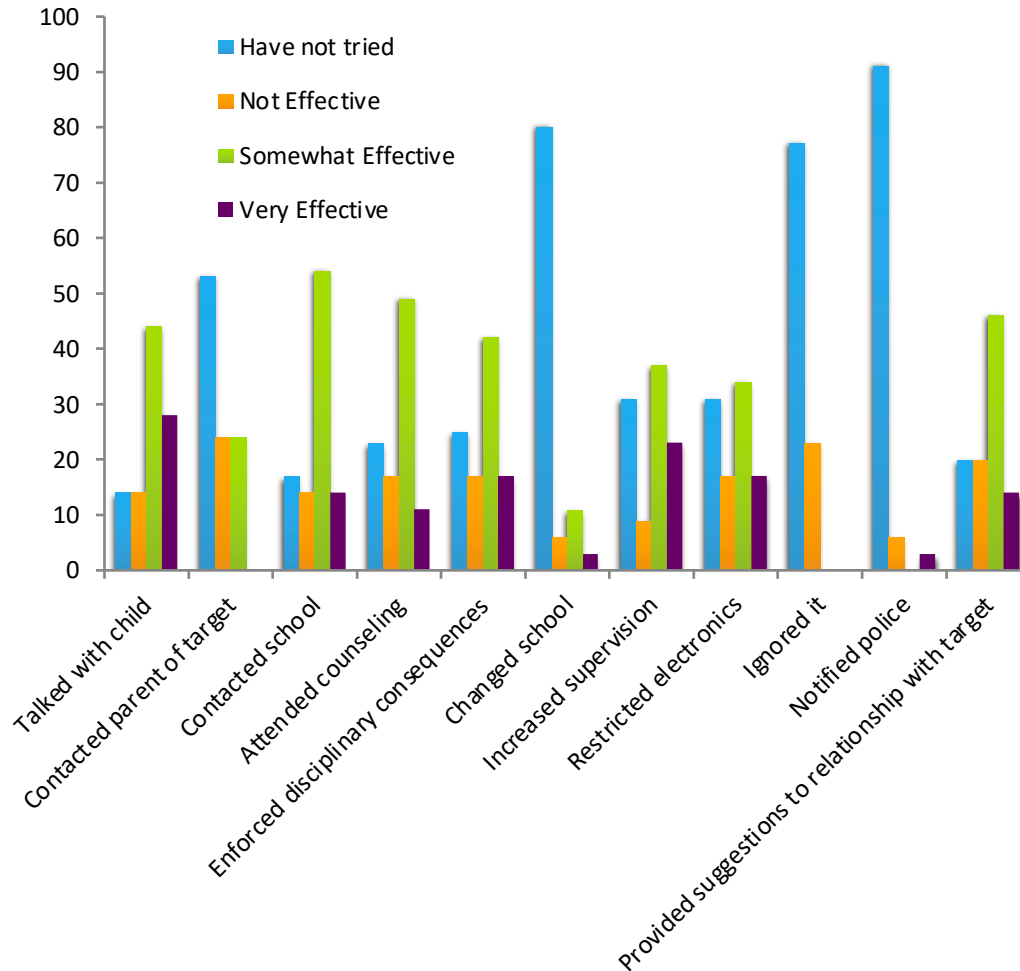
What Parents Have Tried & Effectiveness:

When Child is Being Bullied

- Somewhat effective:
 - Suggesting things to say to the bully
 - Telling the child to get help from a teacher
- Parents reported that ignoring a child's reports of bullying or telling the child to ignore it is not an effective strategy



What Parents Have Tried & Effectiveness:

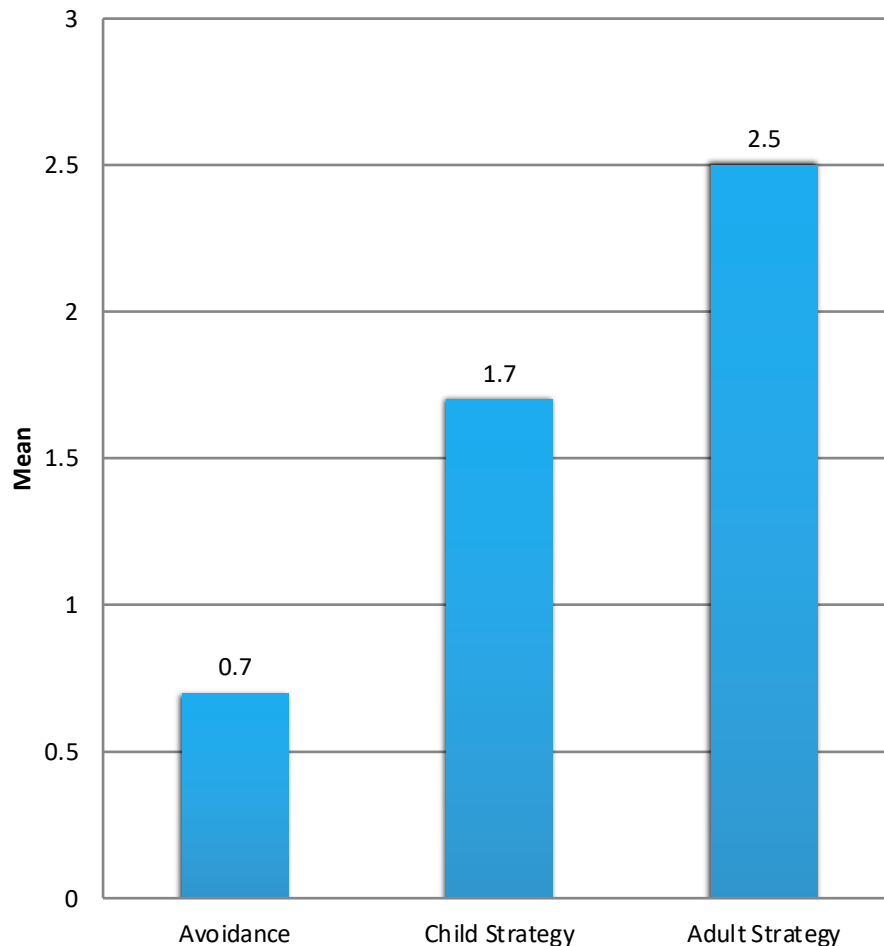


When Child is Doing the Bullying

- ➔ Somewhat effective:
- ➔ Contacting the school
 - ➔ Attending counseling
 - ➔ Talking with the child
 - ➔ Enforcing disciplinary consequences
 - ➔ Providing suggestions

What Service Providers Have Tried & Effectiveness

Strategies for Addressing Bullying



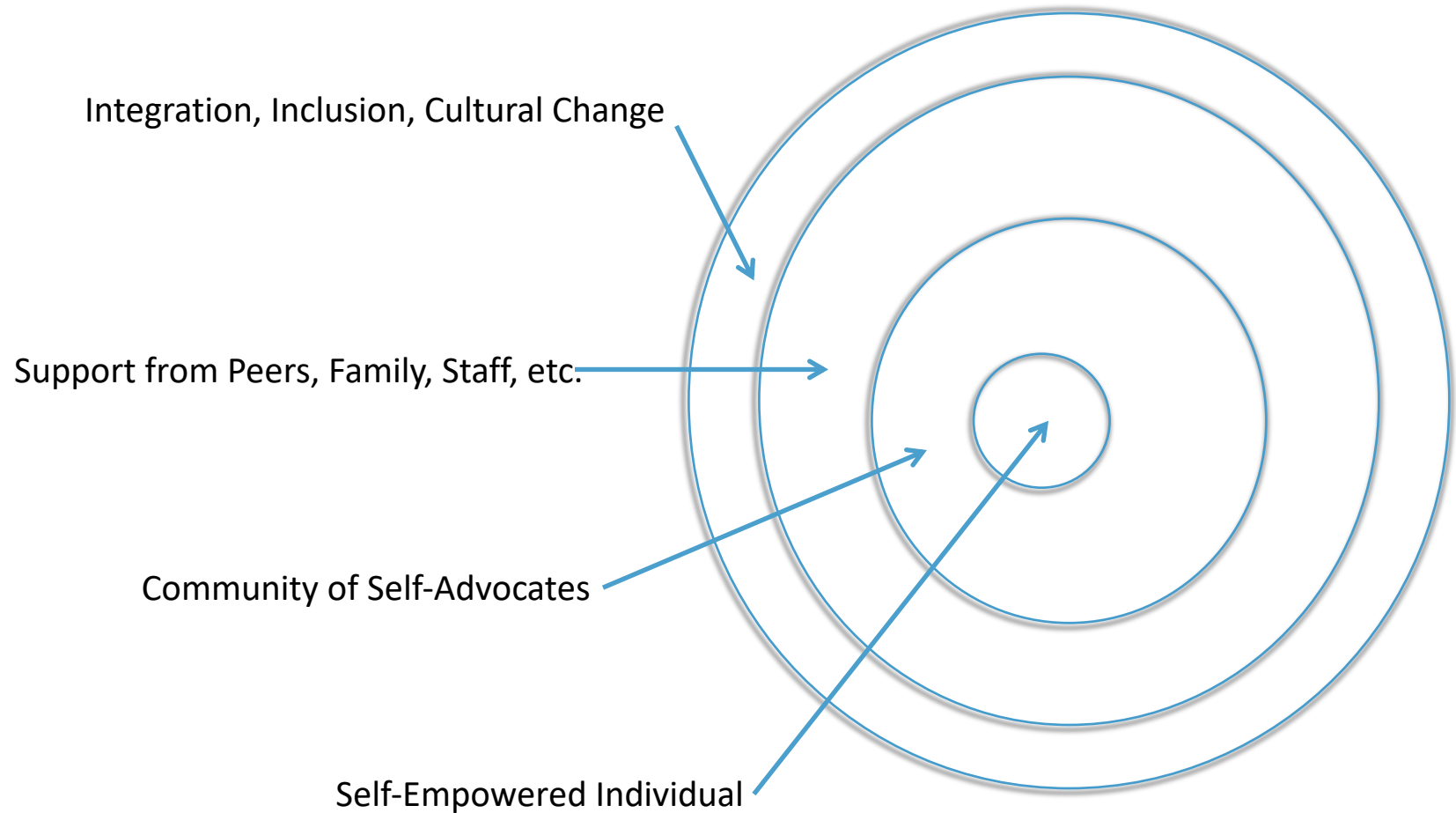
➤ 1 = Not at all effective, 2 = Somewhat effective, 3 = Very effective

- Avoidance (.33; 2 items) - changing schools, staying home
- Child Strategy (.74; 4 items) - things the child can do to address bullying
- Adult Strategy (.74; 6 items) - adult-led strategies to address bullying

What Should Be Done?

- Respondents agree that **all strategies** (e.g., avoiding contact, counseling, more laws, etc.) listed would be helpful to treat each other better **EXCEPT** letting the people involved work it out alone
 - Service providers and parents mostly disagree
 - Adults with disabilities indicate equal responses
- **All respondents** are less sure about punishing people who treat others badly and separating the people from each other
- Some **services providers** are unsure about making more laws, teaching people how it feels to be treated badly so they know it's wrong (teaching reciprocity), and getting help from someone else
- Some **parents** are unsure about teaching the child what it feels like to be bullied

Moving Forward: Themes Under Empowerment vs. Oppression



Self-Empowerment

➤ Autonomy and Connection

- People need both independence and a sense of belonging

➤ Training and Education

- People need to learn how to be self-advocates
- People need to learn about bullying and how to respond to bullying

Start self-advocacy programs when people with disabilities are young. Self-empowerment should be a lifelong goal for all people with disabilities.

Self-Advocacy

- Identity and Power
 - Self-advocacy promotes relationships based on equality
- Support
 - Self-advocates extend support to peers
- Leadership
 - Self-advocates can educate peers and others on bullying

Develop bullying prevention programs by, for, and with people with disabilities; focus on “don’t become a bully” and “become allies of each other to end bullying.”

Support

- Self-Advocates... can support each other
 - *“You came through the fire tempered but not scorched.”* From a self-advocate talking to a peer who said she thought about killing herself after mistreatment from her teacher aide.
- Families... can support each other and self-advocates
- Staff... can support families and self advocates
- Institutions... can support staff, families, and self-advocates
- Through
 - Education, programs, and policy changes

Integration, Inclusion, and Cultural Change

- Bullying is systemic and cultural
- Bullying supports inequality through disempowerment
- Public ignorance contributes to attitudes supportive of bullying
- Reducing bullying requires:
 - Changing the public discourse
 - Addressing systemic and cultural barriers to inequality
 - Developing efforts to support and educate

Integration, Inclusion, and Cultural Change

- *“I think the more individuals are encouraged to work alongside one another, both individuals with or without disabilities, the more people will understand tolerance. I think a lot of bullying stems from children not knowing what to do with a situation or disability they don’t understand. I think open communication and acknowledgement of differences is key.”*
- *“I feel that our teachers and schools need to have a social program in place where students without a disability should be assigned to become a buddy for those with disabilities within the school, learn about each other, and learn to become compassionate individuals. I grew up in a family with an aunt who has a disability and now have a daughter with one. I never saw my aunt as "different" because I grew up with her. I think this is something teachers should also be taught and it should not be an elective to be a special ed teacher. This is learning compassion and accepting that we are all different and we all want to be loved and treated with kindness.”*

Conclusions

- Individuals with disabilities have experienced bullying (mostly verbal and relational) at rates comparable to or more than their peers
 - Social vulnerability, in terms of believing things that are not true, is relatively common
 - Differences appear to be the most common reason for this bullying
 - Bullying has an impact in terms of emotional reactions, but most individuals minimize or ignore it, problem-solve, or internalize as opposed to retaliating
- Adults taking an active role is more helpful than ignoring; self-advocacy and support from peers, families, and staff are critical

Future Initiatives

- Create a program by, for, and with people with disabilities to develop awareness and skills around bullying prevention and intervention.
- Teach self-empowerment at younger ages (communicate and assert needs, confront bullying or unacceptable situations)
- Implement disability awareness focusing on value and worth of individuals with disabilities
- Focus efforts on inclusion, peer-to-peer support, and involvement in recreational and social activities
- Pool resources about bullying and effective approaches, make available and accessible for individuals with disabilities
- Educate direct care professionals on bullying prevention and teaching self-advocacy