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Bullying Among Older Adults

Not Just a Playground Problem

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Objectives

- Describe the incidence and characteristics of bullying behaviors.
- Identify the five different types of bullies and their intended targets
- Describe the impact of bullying on older adults
- Identify organizational interventions that may help to minimize community bullying

Source: AARP

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The Stories

Source: AARP

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What is Bullying?

- Unwanted aggressive behavior
- Observed or perceived power imbalance
- Repetition of behaviors or high likelihood of repetition
- Direct or indirect



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Incidence of Bullying

- Between 10 and 20 percent of older adults living in senior living communities are bullied (AARP, 2012)
- In many ways bullying looks similar to that among younger age groups
- Bullying can happen in any number of places, contexts, or locations including online
- Most senior-to-senior aggression is verbal abuse
- Men and women are equally likely to be the victim as well as the aggressor


(Hazelden Foundation, 2008; U.S. Department of Health & Human Services, n.d.; Senior Bullying, 2015)

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Types of Bullying Behaviors

- Verbal
- Physical
- Anti-social
- Relationship-centered



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Common Responses

- Reduced self-esteem, feelings of insecurity
- Overall feelings of rejection
- Depression, anxiety
- Suicidal ideation
- Functional changes
- Changes in eating and sleeping
- Increased talk of moving out
- Increased isolation
- Stress, anxiety, tension, anger, frustration, fear and worry
- Retaliation followed by shame
- Migraines, GI tract/stomach problems, HBP

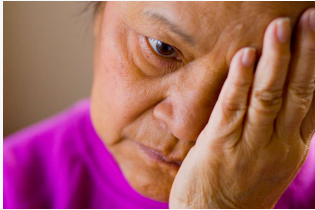
(Frankel, 2011)



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The situation and type of behavior often determines whether or not problematic behavior is actually bullying. Some behavior violates community rules but might not be bullying.

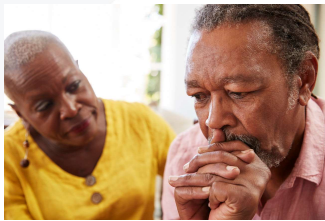


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Behaviors Causing Distress

- Loud arguments in communal areas
- Name calling
- Being bossed around
- Negotiating value differences
- Sharing scarce resources
- Being hounded for money or cigarettes
- Listening to others complain
- Experiencing physical aggression
- Witnessing psychiatric symptoms



(Bonifas, 2011)



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Individuals Who Bully



- Bullies are more likely to use power and control strategies at the expense of others
- Typical traits of individuals who bully:
 - Lacks empathy
 - Has few friends
 - “Needs” power and control
 - Struggles with individual differences
 - Uses power and control at the expense of others
 - Suffers from low self-esteem
 - Empowered by causing conflict, or making others feel threatened, fearful, hurt

(Hazelden Foundation, 2008)

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Types of Bullies

- Narcissistic bully
- Impulsive bully
- Physical bully
- Verbal bully
- Secondary bully



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Gender Differences

<p>Women</p> <ul style="list-style-type: none"> • Gossips • Snipes • Member of a clique • Passive-aggressive behavior • Manipulates emotions 	<p>Men</p> <ul style="list-style-type: none"> • Direct • Spontaneous • Verbally or physically aggressive • Superiority complex • Overly protective
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(Bonifas & Frankel, 2012; NCAL, 2017)

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Why Do Older-Adults Bully?

- Some people who were bullies when they were younger
- Some people do not adjust well to the aging process
- Some people experience emotional problems
- Some people have an underlying need for power and control
- Some people feel the need to assert their will to intimidate others
- Some people have a difficult time transitioning
- Some people have difficulty tolerating individual differences
- Some people have insecurities about themselves
- Some people have dementia

(Bonifas & Frankel, 2012; Botek, n.d.)

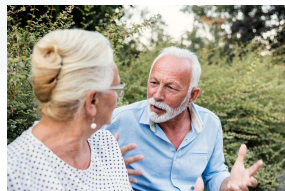


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Passive Targets

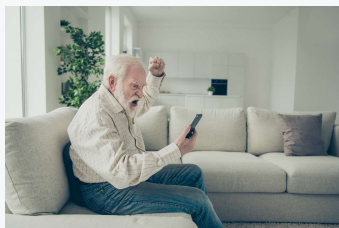
- Be highly emotional
- Have difficulty reading social cues
- Experience a heightened sense of anxiety
- Do not read social cues very well
- Others often perceive them as shy and insecure
- Have racial/ethnic, spiritual beliefs, political, or sexual orientation, gender identity that is perceived as different from their target
- Immigrants & refugees



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Provocative Targets



- Annoying or irritating to others
- Quick tempered
- Intrusive into others' space



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Warning Signs of a Bully

- Intimidates staff and others
- Tells others what to do using a bossy style/tone
- Criticizes others
- Lacks empathy
- Makes repeated complaints about others



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Warning Signs of a Target



- Self-isolation
- Avoidance of events and activities
- Take long and often out of the way routes to get to and from communal areas
- Vague complaints, "They don't like me" or "They won't let me _____."
- Depressed mood (acute onset)

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What is the Impact of Bullying?

- It is common for facilities to take a passive stance
- Bullying behaviors can escalate to physical violence
- Impact is not exclusive to the recipients of such behavior
- Individuals who witness bullying also experience negative consequences
- Bullying can also be targeted toward staff members of organizations serving older adults

(Bonifas, 2011)

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What Can You Do?

Get to know the people in your facility and recognize when there is a change




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Three-Tiered Intervention Model

- Organization
- Bully
- Target

Of these three, organizational intervention is the most crucial!



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Organizational Interventions


- Develop clear rules and expectations for resident and staff behavior
- Consider adding language around bullying to admission agreements
- Hold regular group discussions about challenges of communal living
- Provide regular employee training
- Review policies for potential revisions
- Encourage staff and residents to report incidents of bullying and take complaints seriously
- Review state requirements to ensure compliance

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Organizational Interventions


- Create caring communities for all residents and staff members.
- Prohibit the use of obscene language, name calling, gossiping
- Use empathy as an antidote to bullying.
- Creating environments that promotes empathy requires that:
 - All members are treated with respect and dignity
 - Everyone is held accountable and responsible for their behaviors
 - Everyone is encouraged to stand up for what is right
- Publicly acknowledge members of your community that go out of their way to make others welcome

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Organizational Interventions

- Pre move-in or new resident orientation
- Institute a "Caring Squad"
- Nominate "Kings and Queens of Empathy"
- Create a training program with role-playing
- Create a wellness program
- Help residents expand their social networks
- Host a mixer type event
- If all else fails, seek legal consult, have legal services send target a letter, and/or issue lease violation notices


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Organizational Interventions

- Recommendations from residents
- Offer anger management classes
- Set limits with people who bully or "pick on" others
- Hold regular meetings to promote resident communication
- Develop rules and expectations for resident behavior
- Foster partnerships between residents and facility management

(Bonifas, 2011)

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It is important to recognize that developing a caring community is a process and organizational change is slow; improvements will not happen overnight, but gains can be made over time.




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Interventions for the Bully



- Do not avoid or ignore the behaviors
- If you see something, say something and do something.
- Consistently set limits with them
- Refer them to mental health provider
- Assist them to expand their social support networks
- Identify alternative methods for individuals who bully to feel in control
- Assist them in identifying appropriate outlets and alternative methods to manage anger, frustrations, etc.
- Foster the development of positive communication skills
- Foster the development of empathy

(Beddoe & Murphy, 2004; Siegel, 2007)

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Interventions for the Target

- Focus on skills development to them avoid being targeted. – assertiveness training
- Encourage and support them to stand up for their rights
- Foster their self worth and dignity and bolster self esteem
- Refer them to mediation training
- Refer them to de-escalation training
- Refer them to self-help group or 12 step program
- Encourage them to continue to report
- Encourage them to call 9-1-1
- If appropriate to do so, refer them to obtain a restraining order against the bully

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What Else?

- The best way to halt this behavior is to identify the cause and provide intervention
- Speak out!
- Remember there are barriers to reporting such as shame and fear of retaliation
- Staff training is critical



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Older Adult Coping Skills



- Just let it go or tune it out
- Avoid contact
- Walk away
- Bite your tongue
- Engage in positive self talk
- Pursue off-site activities
- Seek to see the other person's point of view
- Learn and use de-escalation skills
- Get a pet or spend time with pets
- Form relationships with other supportive individuals



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Strategies For Residents

- Let your emotions settle before you approach
- Walk away and regain your composure
- Approach the conversation firmly and confidently
- Maintain eye contact
- Call the bully by name
- Remember it's not your fault, it's the bully that has the issue
- Do not make any aggressive motions or innuendos
- Have a fact-based conversation about observations
- Don't attack the individual
- Address the specific behavior you want them to change
- Do not provoke or antagonize



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Strategies for Staff Members



- Prevent bullying with education
- Create, implement, and disseminate zero tolerance policies and procedures
- Confront bully and inform them that their behavior may result in an eviction
- Intervene
- Support the target
- Encourage staff members and residents to report bullying behaviors

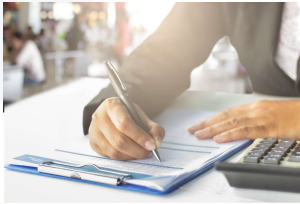


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Facility Responses

- Assess the extent of the problem within your community
- Create policies and procedures
- Train staff
- Establish ongoing bullying prevention programs
- Familiarize residents with an effective, confidential reporting process
- Provide anger management classes or counseling



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Responding to Incidents

- Staff member observes or is told about a situation involving bullying behavior
- Staff member assesses whether there is a potential for immediate or imminent physical danger to anyone, and if so, takes immediate steps to de-escalate the situation
- Staff member notifies the appropriate leadership
- Leadership/management assesses potential for physical danger, and if steps have been taken to safeguard the victim
- If less severe, staff may be able to help resolve the situation
- Brainstorm possible solutions
- Develop a corrective plan and implement
- If a resident is still exhibiting bullying behaviors staff should reassess solutions




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In Conclusion

- Current estimates misjudge the bullying problem
- Bullying among residents is likely to continue to rise
- Learning about the problem and adopting strategies provide elders and their families proactive and reactive solutions so that elders are no longer ignored




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Thank You

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