



Prepared by:

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Bullying Among Older Adults

Not Just a Playground Problem

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

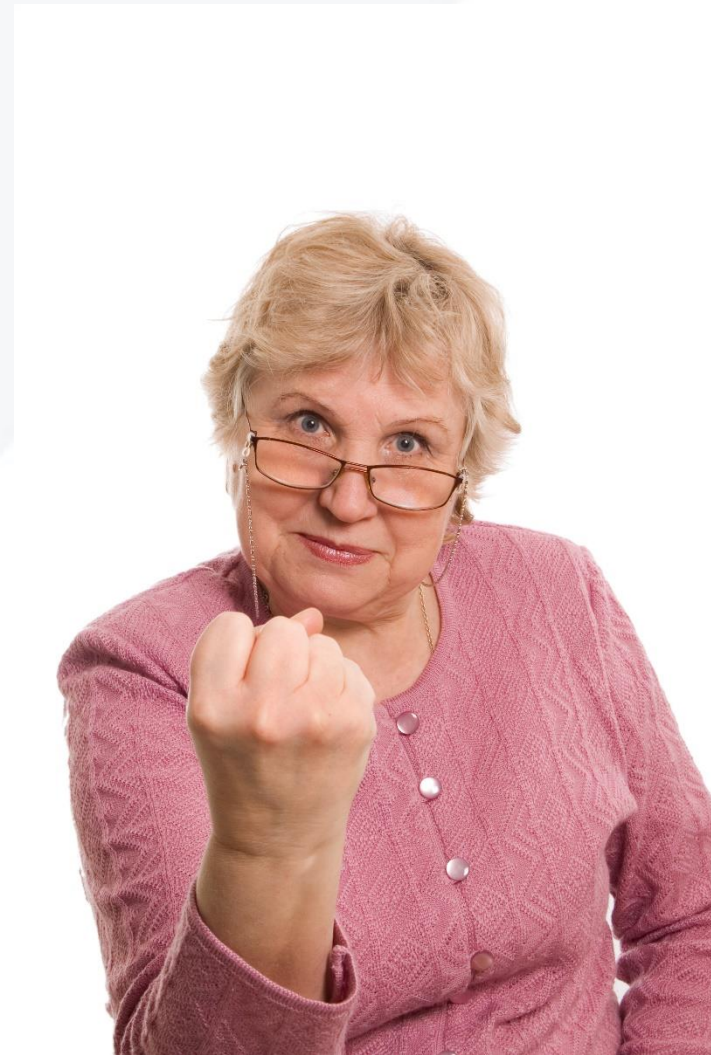
The Stories



Source: AARP

What is Bullying?

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



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)

Types of Bullying Behaviors

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

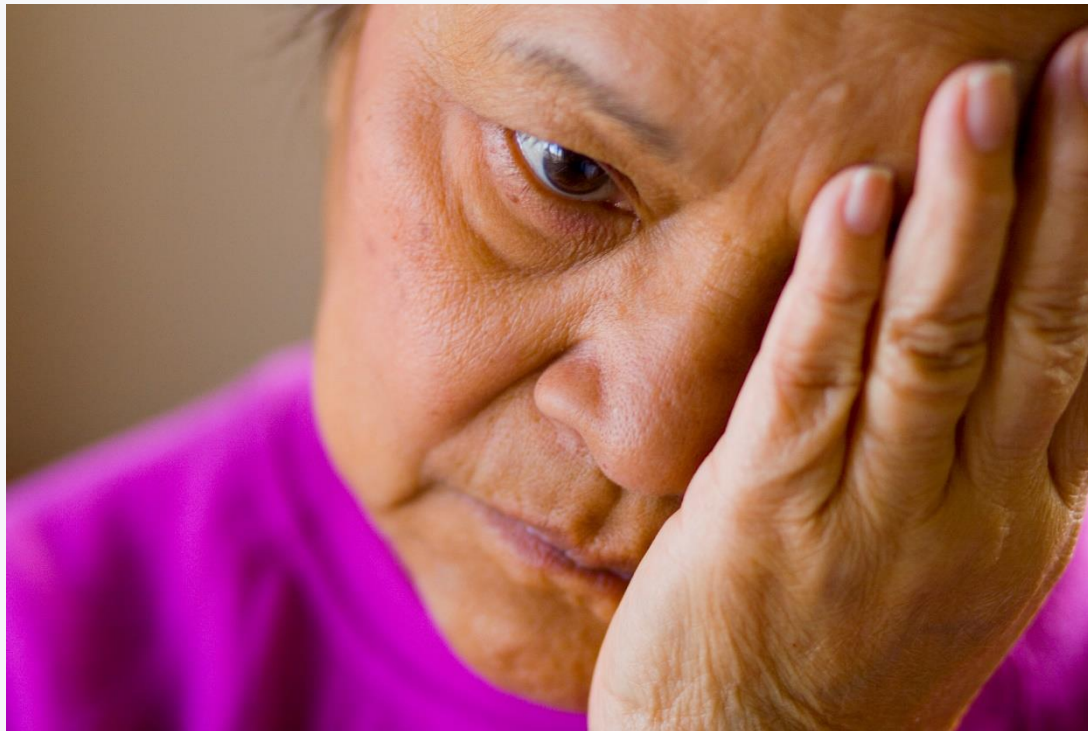


Common Responses

- 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)

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.



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)

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)



Types of Bullies

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



Gender Differences

Women

- Gossips
- Snipes
- Member of a clique
- Passive-aggressive behavior
- Manipulates emotions

Men

- Direct
- Spontaneous
- Verbally or physically aggressive
- Superiority complex
- Overly protective

(Bonifas & Frankel, 2012; NCAL, 2017)

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.)

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



Provocative Targets



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

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



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)

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)

What Can You Do?

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



Three-Tiered Intervention Model

- Organization
- Bully
- Target

Of these three, organizational intervention is the most crucial!



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

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

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

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)

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.



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)

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

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



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

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

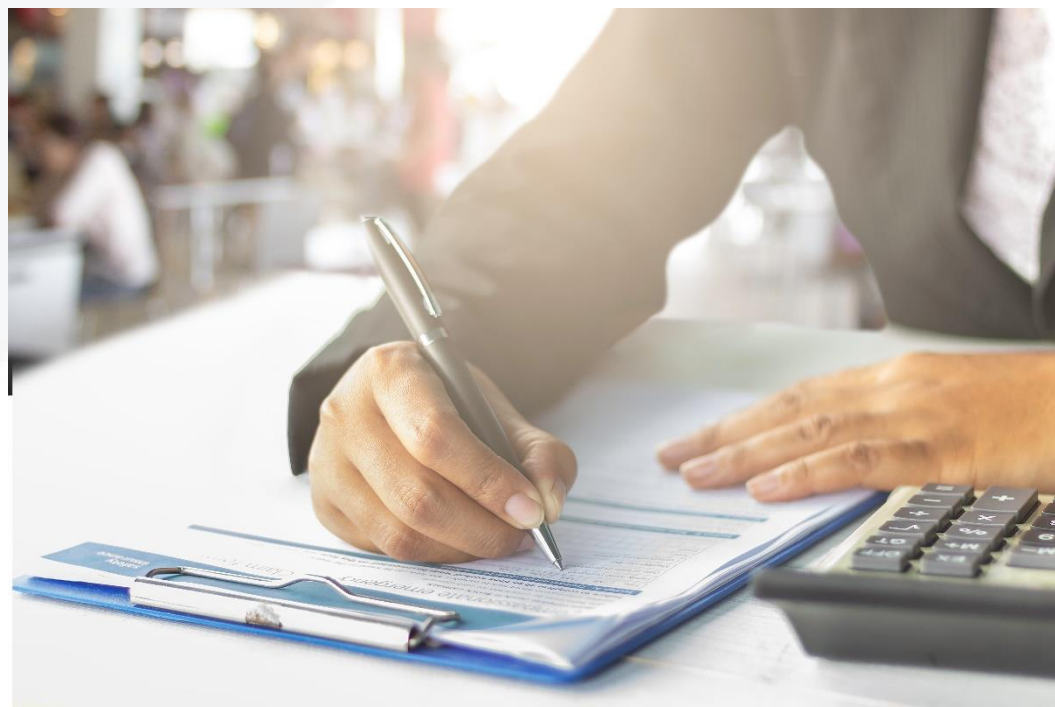
Strategies for Staff Members



- 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

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



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

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

Thank You

Contact Information

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