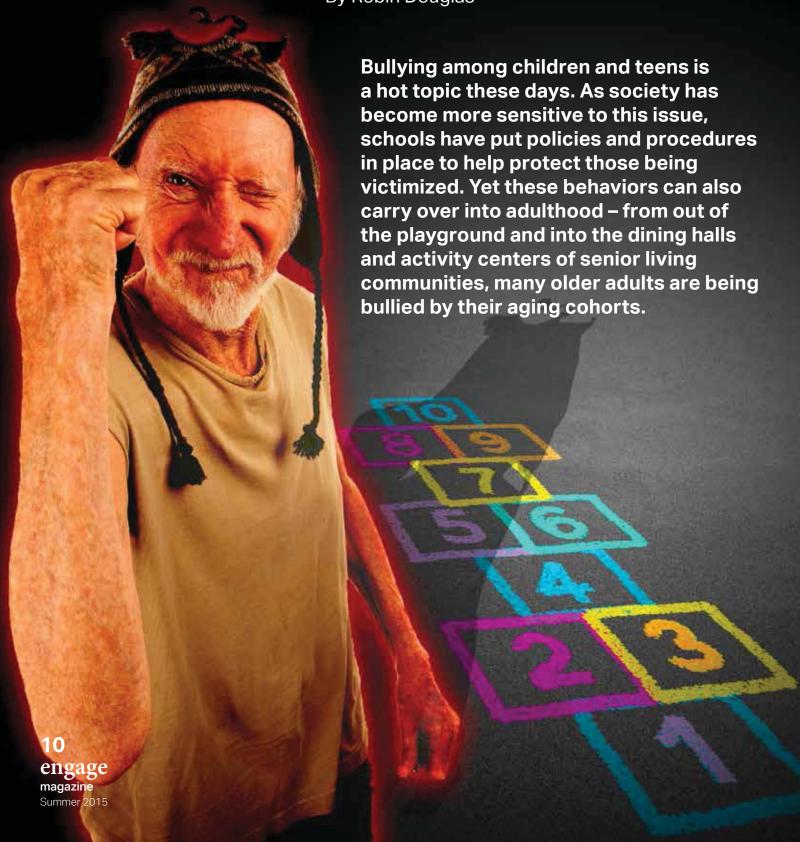
Beyond The Schoolyard: Bullying Among Seniors

By Robin Douglas



Bullying is defined by the American Psychological Association as "a form of aggressive behavior in which someone intentionally and repeatedly causes another person injury or discomfort." While there is still little research available on the subject, a study by Arizona State University gerontology expert Dr. Robin Bonifas estimates that between 10 and 20 percent of residents have experienced at least one episode of bullying.

Ruben Rivera-Jackman. senior resident services manager at King County Housing Authority, is also a speaker and certified trainer with the National Resource Center on LGBT Aging. He provides training on cultural competency, LGBT issues, intergenerational communication and elder bullying for senior living providers. Through a combination of interactive sessions and more traditional presentation methods, Rivera-Jackman discusses the facts and myths around elder bullying and takes participants through self-reflection exercises to help them explore their own feelings on the topic. "I start off by asking how many people have experienced bullying," he says. Hands immediately start to go up around the room.

What Constitutes Bullying Behavior?

"Somehow it got out that I'm a lesbian...now, suddenly, there are no seats at the table when I come downstairs to eat. They've shut me out."

Bullying behavior among older adults is similar to what you might find in any middle school or high school setting where a social hierarchy exists. Perceived differences - cultural customs, socioeconomic background, disabilities, sexual identity or even being a certain age – may cause some residents to become a "target." Rivera-Jackman shares the stories, for example, of a transgender resident whose neighbor began posting biblical verses on her door, and a younger resident harassing an older resident, intentionally bumping into her then blaming her for the incident.

In her presentation, "Recognizing and Curtailing Senior Bullying Among Older Adults," Bonifas outlines three general types of bullying behavior: verbal intimidation. including name calling, insults, or gossiping; physical intimidation like pushing or hitting, and "relationshipcentered" bullying - this can include ostracizing certain individuals during meal times and activities, or social cliques taking over certain tables in common areas for their own

group.

Usually associated with childhood and adolescence. cliques are just as prevalent as they are in any other congregate setting. A 2014 study by the American Sociological Association explains that cliques are spurred by "the desires for familiarity and certainty, for control and dominance, and for security and support." Some older adults may be drawn to the social safety net offered by cliques as they search to redefine themselves during this new phase in life.

Bullying occurrences don't always have to be face-to-face encounters. The rise in social networking among seniors also means "cyberbullying" – posting derogatory messages on someone's Facebook page or other social media outlet – can have the same devastating effects on an older adult's reputation and well-being that it would on a younger person.

Causes of Bullying Behavior

"I try not to make eye contact with him when we pass each other in the hall. Last time he threatened to hit me if I looked at him again."

Some adults may have a difficult time transitioning into a senior living community. Fearing a loss of independence and sense of identity may cause some to react with antagonistic behavior and target residents they see as "weaker." Those who were bullied as children can also switch roles to become the bully in their adult lives, and this behavior continues into their later years during a time when they are feeling especially vulnerable and need to regain some sense of control.

It is also important to note that some bullying behaviors may be indicative of other emotional or physical conditions. Dementia, for example, might cause people to react more aggressively to certain situations. A recent Cornell University study by gerontology professor Karl Pillemer, found that nearly one in five nursing home residents were involved in "at least one negative and aggressive encounter with one or more fellow residents" over a four-week period. These included acts of verbal or physical abuse, inappropriate sexual behavior, and invasion of privacy. "Often, their underlying dementia or mood disorder can manifest as verbally or physically aggressive behavior," said Pillemer. Depression, anxiety, and other behavioral disorders can also play a role.

Misperceptions about an individual can also cause unnecessary discord. A resident who is used to being in charge of others may try to organize activities in a way that comes off as pushy and domineering to their peers. If the conflict isn't physical, Rivera-Jackman recommends trying to communicate directly with the person exhibiting the behavior. They may be unaware that anyone actually perceives them as a bully.

Suffering in Silence: Reasons for Not Reporting

adult who finds themselves being targeted by other residents may feel surprised and embarrassed, so they may try to ignore the behavior rather than go through the reporting process and deal with possible retaliation. New residents may not want to "make a fuss" while they are still trying to get settled in a new environment.

It's also possible that certain behaviors aren't recognized as "bullying" in the traditional sense. Staff may be unsure of the correct protocol or would prefer to let the situation resolve itself on its own. Bullying prevention trainer Dorothy Devlin began developing a module on senior bullying after witnessing behavior at her mother's assisted living community. "I became acutely aware of bullying behaviors going on around her – in the common room, in the dining room, hallways and laundry rooms. I started talking to residents about this and also doing some research on my own." Following her presentation at the LeadingAge Pennsylvania Annual Conference in 2013, she realized "so many

"It's not just me; she's like this with everyone. I've thought about telling someone, but what if she tries to get back at me?"

Incidents of bullying among seniors can go unreported for a variety of reasons. An older participants had witnessed bullying in their facilities but had no idea how to handle the problem," she said.

While it may seem easier to tune it out and avoid the situation, dealing with negative behavior from other residents can have a tremendous impact on an individual's emotional and physical health - it can lead to depression, loss of selfesteem, self-isolation, or even suicide, so reaching out for help is crucial. Bullying behavior can also escalate. so whether you're a victim or a bystander, it's important to speak out. Rivera-Jackman has a catch phrase – "If you see it, sav it."

How to Intervene and Promote a Culture of Respect

Taking a proactive approach to preventing senior bullying and promoting a culture of respect is essential to creating a safe, welcoming environment for residents and staff alike.

"I find that most of the facilities contact me when they are experiencing problems," says Devlin. "I often hear 'that doesn't happen here' or 'we just don't have the means to pay for this type of training.' In reality, we know that bullying occurs everywhere."

Having a firm grasp on the culture of a community is a good place to start. Administering anonymous resident questionnaires, as Devlin suggests, can help gauge the social climate and determine whether there are any problems to be addressed. Devlin also stresses the importance of creating a system for reporting incidents and a method for responding to reports from residents, bystanders and staff.

In a blog series on senior bullying written with Marsha Frankel, LICSW for My Better Nursing Home, Bonifas recommends a "threetiered intervention" that includes strategies at the organizational, bully and victim level. "The answer is to strive to develop a culture of zero tolerance towards bullying," she says. Adopting a "code of conduct" that holds staff and residents accountable for their behavior, holding regular staff trainings on cultural competency and the warning signs of bullying can help generate discussions about bullying, its causes and its consequences.

Older adults who bully may need help dealing with feelings of depression, anger, and other issues to get to the root of their behavior. Strengthening communication skills and learning techniques for developing empathy can also help them understand how their behavior affects those around them. For example, Rivera-Jackman asks participants in his trainings to talk about a time they felt different and how it made them feel. This way they can reflect on how easy it is to make assumptions about others based on stereotypes

and superficial ideas. "When you open the conversation up to personal experience, so much changes," says Devlin. Working through selfesteem issues, focusing on assertiveness training and anger management may give victims the tools to feel more empowered.

Creating a mentoring program or "peer leadership group" within the community that allows established residents to help newcomers transition into their new homes is one strategy to help promote inclusion, says Devlin. Programs and activities that offer opportunities for residents to meet new people can help break down social boundaries as well.

While it might not eradicate these issues completely, educating residents and staff on diversity issues and promoting respect for all cultures and backgrounds is the first step to creating caring, inclusive communities for those who live and work in them. Just as the conversation has changed about youth bullying in recent years, we need to do the same for senior bullying.

Additional Information

AARP Bulletin: <u>Older Adults</u> Can Be Bullies, Too

NBC News: <u>Mean old girls:</u> Seniors who bully

SeniorHomes.com: Coping with Older Adult Bullying in Senior Living Communities