Resident Bullying: Not Just for the Playground Anymore

Presented by: Ray Miller, MSOSH, Director of Risk & Safety, Direct Supply

Please come prepared for discussion and to share your ideas on how your senior living community is addressing bullying.

Session Objectives & Outline:

1. Define bullying, bullies and the bullied
   - Bullying is a “repeated pattern of intentional negative actions (physical and/or psychological) used by one or more persons with the intent to injur or disturb another, in which there is an imbalance of power”. (1)
   - In a study of adults 60-99 living in community settings, including residential care settings, 24% of elders reported being bullied by other elders. (4)
   - As many as 1 in 5 elders experienced some form of bullying from a peer(s) while in a group setting. (7)
   - 70% of assisted living residents are women. (2)
   - Women bullies tend to ostracize, gossip and manipulate their target. Men are more direct, verbally aggressive and more likely to physically assault their target (3).
   - A number of causes can lead to bullying, including: the need for control, retribution, jealousy, and emotional problems. (6)
   - Bullying may be associated with loss and a result of seeking control when they feel powerless. (9)

2. Identify the Impact of Bullying
   - Bullying can cause fear, withdrawal and depression in individuals who are being bullied. (4, 8)
   - Bullying affects the culture and reputation of the senior living community.
   - Bullying is a form of resident abuse (7)
   - Changes that occur with aging and loss can impact how effectively an older adult responds to psychological & environmental stressors. (5)
   - Bystanders experience anger, depression and guilt for not interceding and fear that he/she will be targeted next. (3)
3. Demonstrate Potential Organizational-Level and individual Interventions to Reduce Bullying

- Organizational level interventions includes striving to create and nurture an environment that promotes empathy (10)
- Provide regular opportunities for residents and staff to receive training and participate in discussions on communal living (10)
- Teach staff how to recognize and respond to bullying, (10)
- Develop a rapport with the bully to understand where the behaviors are coming from. Engage the help of a trained psychologist in your community as needed. Help them to expand their social network and engage in positive activities (10).
- Set and maintain firm limits on bullying behavior and provide and outlet to vent frustrations. (10)
- Provide support and offer counseling to the residents being bullied. Be vigilant in monitoring for inappropriate behaviors (10)

Questions for Discussion

1. What are effective organizational approaches you have implemented or considered when establishing a “no-bullying’ expectation in your community?

2. What are your greatest challenges when dealing with bullying behaviors? What have you found works best? What has not been helpful?

3. What are some ways to enlist the help of families and other community resources to help address bullying?

References:

5. Miller, C. 2012. Nursing for Wellness in Older Adults, Sixth Ed. Lippincott Williams & Wilkins.