

- ❑ Become involved in bullying prevention teams, safe schools or violence prevention committees and other activities at your school or Education Association.
- ❑ Initiate meetings with other staff to share concerns about bullying in general or specific students in particular.
- ❑ Remind education colleagues that health and student services ESPs address problems holistically, by examining the physical, emotional and social aspects of student behaviors.
- ❑ Model that health and student services personnel are effective student advocates.

Resources:

www.nea.org/neabullyfree

NEA's official website of the NEA Bully Free: It Starts with Me campaign, a source for stories, resources and research on bullying prevention among students

www2.ed.gov/about/offices/list/ocr/letters/colleague-201010.html

Guidance on bullying from the U.S. Department of Education

www.pta.org/bullying.asp

National PTA guide on safeguarding children from bullying

www.nea.org/home/3207.htm

Education Support Professionals website with links to bullying resources, including the *2010 NEA Nationwide Study of Bullying* and the *2012 NEA ESP Survey*

www.stopbullyingnow.samhsa.gov

Educator Tip Sheets are available, such as: *How to Intervene to Stop Bullying: Tips for On-the-Spot Intervention at School*

www.nasn.org/Position Papers and Reports

National Association of School Nurses offers several position statements and issue briefs on bullying and school violence

www.nea.org/home/3207.htm

2012 report comparing results of 2010 Teacher and ESP Bullying Survey with results of questions on 2012 ESP Member Survey regarding bullying

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NEA'S BULLY FREE PLEDGE

I agree to be identified as a caring adult who pledges to help bullied students. I will listen carefully to all students who seek my help and act on their behalf to put an immediate stop to the bullying. I will work with other caring adults to create a safe learning environment for all students in my school.



Be that caring adult. Take the pledge at nea.org/neabullyfree

Bully Free: It Starts With Me!

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EDUCATION SUPPORT PROFESSIONALS

PERSPECTIVES ON BULLYING

HEALTH AND STUDENT SERVICES ESPs AND BULLYING PREVENTION

Bullied Students Confide in Nurses, Family and Community Services Workers

Bullying behavior is a growing concern among America's educators. Bullying is defined by the Centers for Disease Control & Prevention as an attack or intimidation intended to cause fear, distress or harm, either physical, verbal or psychological. Bullying involves a real or perceived power imbalance between the students involved, and it is repeated attacks or intimidation between the same students over time. Examples of physical forms of bullying include hitting or stealing; verbal bullying includes threatening, name calling, spreading rumors, for example; and psychological bullying includes behaviors such as socially rejecting and isolating someone, or cyberbullying (where perpetrators can hide behind the anonymity of the Internet).

According to the National Center for Education Statistics (2011), more than 70 percent of students play some role in bullying, whether as one who bullies, is bullied, or witnesses bullying. A U.S. Department of Education study found that in 2006-2007, one-third of U.S. students 12 through 18 reported being bullied. Students who have been bullied report feeling depressed, anxious, and isolated. Many have low self-esteem. Their school attendance and performance may suffer. And in some cases, as the nation has seen recently, they are so tormented, they take their own lives.

A study in the May 2011 issue of the journal *Pediatrics* reports that the school nurse's office tends to be a haven for students who have been bullied, and for those who bully. The study's authors found that both groups of children tend to come to the school nurse more often than other students for illnesses and injuries, and complaints without clear medical cause, such as stomachaches.

Sometimes the link between bullying and a visit to the nurse may be clear, such as when a student is injured in a fight related to bullying. Other times it might not be so obvious. Evidence suggests that long-term psychological stress brought on by bullying can affect students' immune systems, making them more vulnerable to sickness.

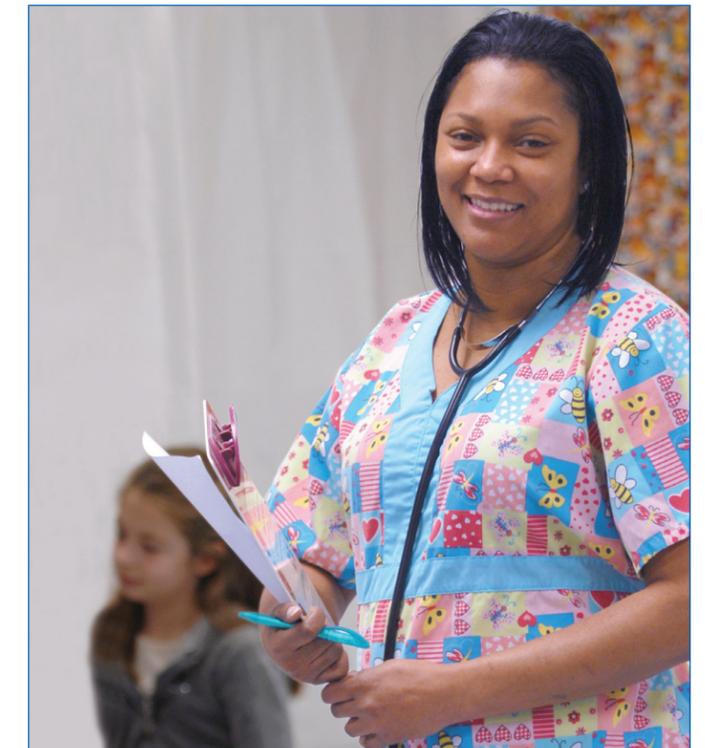
And some bullied students might just be looking for an escape from the hallways or playground and seek refuge with the school nurse, the researchers note. Students regularly designate the school nurse's office as one of the safest spots in the school, especially when compared with places like the gym, the locker room or

the playground. Therefore, it makes sense that a student would feel safe turning to the nurse when they don't feel well, for whatever reason.

When addressing a student face to face, school nurses and health aides/technicians can ask the right questions to find out how the child is really feeling. For instance, when students show up with a playground injury, the health and student services staff might ask why they were running and if they were running from someone or something. The nurse can also be on the lookout for signs of bullying behavior—and its effects on others—by monitoring absenteeism and records of visits to the nurse's office.

Health professionals also assist students with chronic conditions and disabilities. These students are among the most frequent targets of those who bully. So, health ESPs are key to supporting special needs students against bullying. In addition, student services professionals are expert at locating assistance and services that support students' learning. Thus, they serve a critical role when locating local resources for bullied students and services for those who bully.

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Because of their unique position in the school system and the community, school health and student services professionals can play an important role in gauging what's happening among students, and in developing a district-wide anti-bullying policy. Since they often work in more than one school, they can track the prevalence of bullying in different situations, monitor trends, and make recommendations about how to address the problem. They also can consult with parents of both students who bully and students who are bullied to help them understand the nature of bullying and keep the lines of communication open so that the students will feel comfortable telling them if there's a problem. Health and student services staff have the expertise to collaborate with school staff and community members to implement programs that will proactively change behaviors and lead to the creation of a positive, healthy and safe school climate.

What Health and Student Services ESPs Said

NEA has long been committed to bullying and harassment prevention and intervention. For decades, members have received training in how to recognize and intervene in student-to-student bullying situations. NEA conducted a nationwide survey of 4,870 ESPs in 2012 that included questions about their experiences with bullying. Among the respondents, 417 were school health and student services professionals. Highlights of their responses are presented below.

They see bullying as a problem in their school. A little more than 48% of nurses surveyed said bullying was a major or a moderate problem in their school. They viewed bullying as a significantly greater problem at their school than did other ESPs.

The school nurse's office is often seen as a safe haven for students who are bullied.

They witness bullying. Health and student services ESPs were more likely than other ESPs to report seeing a student being bullied at their school. Fourteen percent of them reported witnessing it as frequently as several times a month; 11% saw bullying daily.

Health and student services workers are the most likely to hear reports of bullying from students as compared to other ESPs. Approximately 44% of the nurses surveyed indicated that a student reported bullying to them within the past month.

They feel it's their job to intervene. A majority of nurses surveyed—96.4%—reported that it is “their job” to intervene when they see bullying situations.

They need training on bullying prevention and intervention. Nearly all the health services ESPs surveyed reported that their school district has a bullying policy, with 54.3% of them reporting that they received training on that policy.

VIEW FROM THE NURSE'S OFFICE

Carmen Hill, the school nurse at Gateway Institute of Math Science in St. Louis, Missouri, says she regularly witnesses bullying at her pre-K-5 school.

“I see bullied kids all the time—in the hallways, in my office, kids with bruises and cuts from being pushed around on the playground,” she says. “There’s a lot of verbal abuse, even among the really little kids. They pick up language and behavior through TV and bring it to school.”

“Sad to say, we’ve had first graders suspended for acting out,” she says.

Carmen says she can recognize bullying because she was bullied as a child. “My mom taught us not to use slang, so my speech, even as a kid, was very correct,” she recounts. “Other kids picked on me because they thought I was stuck up. They kept it up until they got to know me.”

That’s the key, Carmen says. Once you get to know a person who seems different from you, it’s harder to bully them.

“You have to peel away the layers to get to the root of the problem. Some kids may be smart but don’t show it because they’re scared of being ridiculed. Some have been bullied at home by siblings or parents,” she notes.

“I observe the students as they come in every morning. I look for changes in behavior and facial expressions. Bullying doesn’t just happen at school. Sometimes, when you see the parents, you know why kids act the way they do.”

“When I witness bullying, the first thing I do is tell the teacher,” Carmen says. “Beyond that, we have a program called ‘Care Team’ that targets at-risk students who bully and are being bullied. That team includes the nurse, the social worker, and the counselor. We meet every other Monday to discuss cases.”

At Gateway, staff members also frequently mentor at-risk students—those identified as students who bully or who are having problems in class. “Once they get a little attention and love—something that’s often lacking at home—they often settle down,” Carmen notes. “They just need positive reinforcement.”

“This is my fourth year as a mentor,” she concludes. “I always have a group of students who come in to get a hug at the beginning and end of the school day.”

They need to be invited/encouraged to join school committees on bullying prevention. Among all ESPs, health services ESPs are the group most likely to be involved in formal bullying prevention efforts in their schools. Around 35% reported being involved in formal school teams, committees or prevention programs dealing with bullying.

TIPS FOR HEALTH AND STUDENT SERVICES ESPs

To Prevent Bullying

- ✓ Ask about bullying when conducting health check-ups, especially for students who frequently seek health services for ailments like headaches, stomachaches, and other potential psychosomatic concerns.
- ✓ Routinely monitor for bullying risk factors when students come to the student services office.
- ✓ Maintain an efficient record-keeping system that allows for comments about visits that are indicative of bullying.
- ✓ Identify students at risk for bullying behaviors to school administrators.
- ✓ Treat students the way you want to be treated and the way you want them to treat each other.
- ✓ Focus on developing empathy and respect for students and adults in the school community.
- ✓ Model respect for diversity among the student population.
- ✓ Provide confidential health services for lesbian, gay, bisexual, transgender and questioning (LGBTQ) students in a safe environment.
- ✓ Use positive, non-verbal interactions—a smile, a nod, a thumbs up, a high five, a pat on the back.
- ✓ Notice something positive the students do and say something about it to them or someone else where they can hear it.
- ✓ Don’t expect students to solve bullying incidents themselves; they lack the skills. Encourage students to report incidents of bullying to you and other adults.
- ✓ Advocate for and remain active in school-wide student bullying prevention programs.

- ✓ Promote training of health and student services staff on bullying prevention strategies.
- ✓ Promote continuing education in bullying prevention as part of clinical supervision and guidance in teaching programs.

To Intervene in Bullying

- ✓ Learn about bullying so you know what you’re looking for (see resources).
- ✓ Assess students for stress at home and at school.
- ✓ Learn what your school’s consequences are for students who bully and what supports exist for targets.
- ✓ Seek out additional health and student services resources which will accept service referrals for bullying targets and/or perpetrators.
- ✓ When you see something, do something—be assertive and calm.
- ✓ Report incidents you witness as required by your school’s policy.
- ✓ Maintain your own log of bullying incidents witnessed and reported.
- ✓ Talk to other school staff about what you’ve witnessed so they are alert to possible retaliation during the balance of the school day.
- ✓ After a bullying incident, assist students in maintaining stability and provide reassessment and follow-up services.

Sources: See References

Like other ESPs, health and student services workers report feeling slightly more connected to their school community than teachers, which influences bullying intervention. Connectedness is the belief by adults in the school that they are cared about as individuals and professionals involved in the learning process. Research has shown there is an important link between feeling connected to the school and being comfortable intervening with all forms of bullying among all types of students. The more staff members, including health and student services workers, feel connected to their school, the more likely they are to intervene and stop bullying when they see it.

They are likely to live in their school community. The ESP survey found that 63.4% of health and student services ESPs live in the school community where they work; this is considerably higher than the 38% of teachers who live in the community served by the school. This means that health and student services ESPs know the students and their families, and can be an invaluable resource when seeking answers to bullying incidents.

Inform Yourself and Your Association

- Visit www.nea.org/neabullyfree, a good go-to source for resources about how to help bullied students and how to prevent bullying in your school.
- Contribute to local data collection efforts.
- Seek input and collect data from other school staff to whom students go for support.
- Request a bullying prevention and intervention training session from NEA at www.nea.org/neabullyfree (there is a training link). Make sure the training is scheduled at a time that is convenient for health and student services ESPs to attend.
- Ask your school district to provide training on the content of current policies for bullying prevention and intervention. Work with your local affiliate to ensure these trainings are scheduled at times that are convenient for health and student services ESPs to attend, along with other school staff.