

This resource is tailored for Mental Health Professionals as a guide to the StopBullying.gov training module.

For more information on bullying prevention, including the definition, statistics, best practices, and common myths or misdirections, please consult the StopBullying.gov training module at www.stopbullying.gov/communityguide.

Understanding the Roles of Mental Health Professionals in Community-Wide Bullying Prevention Efforts

What is known about bullying and its consequences?

Bullying may seriously affect the mental health, physical health, and academic well-being of children and youth who are bullied. Research confirms that:

- Children and youth who are bullied are more likely than those not bullied to have symptoms of depression, harm themselves, high levels of suicidal thoughts, and lower academic achievement; they also are more likely to be lonely and want to avoid school (Cook, Williams, Guerra, Kim, & Sadek, 2010; Klomek, Marrocco, Kleinman, Schoenfeld, & Gould, 2008; Reijntjes, Kamphuis, Prinzie, & Telch, 2010).
- Children and youth who bully others are more likely to exhibit delinquent behaviors, dislike school, drop out of school, bring weapons to school, think of suicide and attempt suicide, drink alcohol and smoke, and hold beliefs that support violence (Cook et al., 2010; Klomek et al., 2008; Nansel, Overpeck, Pilla, Ruan, Simons-Morton, & Scheidt, 2001).
- Children and youth who are involved in bullying (are bullied, bully others, or both) are more likely than others to report health problems such as headaches, backaches, stomach pain, sleep problems, poor appetites, and bed-wetting (Gini & Pozzoli, 2009).

Mental Health Professionals' Unique Roles in Addressing Bullying

How can mental health professionals help to prevent bullying?

Whether community- or school-based, mental health professionals know the effects that bullying can have on those directly involved as well as those who witness it, and they play important roles in preventing and responding to bullying. Psychologists, counselors, and social workers who are based in schools bring critical expertise to the task of planning and implementing school- and community-wide approaches to bullying prevention. This includes:

- **Collecting and using data to inform prevention efforts** (Bauman, 2008). They can lead efforts to conduct needs assessments within schools, identify evidence-based practices to address bullying, establish systems to monitor progress in reducing bullying, evaluate and interpret data, and use data to inform future bullying prevention and intervention efforts (Rossen & Cowan, 2012).
- **Training and advising educators, families, and students.** Practitioners can inform others about the nature and prevalence of bullying, its effects, and effective prevention and intervention strategies (Bauman, 2008; Jacobsen & Bauman, 2007).
- **Collaborating with educators.** They can work with educators and others to develop policies about bullying and implement evidence-based efforts to reduce bullying and improve school climate and safety (American Counseling Association [ACA], 2008; Jacobsen & Bauman, 2007). These rules and policies should provide students, families, and staff clear guidance about appropriate student behavior. Harsh, inflexible discipline strategies, such as zero tolerance policies, should be avoided. Such policies have been found to harm student-adult relationships, dampen school climate, and contribute to poor student achievement (APA Zero Tolerance Task Force, 2008). Instead, graduated sanctions should be used for rule violations, which are appropriate for the developmental level of the child and the nature and severity of the bullying. Removal from the school-setting should be a measure of last resort.
- **Teaching, counseling, and consulting.** Practitioners can help teach students social skills (ACA, 2008), counsel students how to manage aggressive tendencies, offer support and coping strategies for those who are bullied, counsel family members of affected students, and consult with educators to encourage appropriate behavior of students (Bauman, 2008).

Mental health professionals who work in settings outside of schools also play critical roles in the prevention of bullying by providing counseling to clients who are involved in bullying or have been affected by it; providing training and consultation in bullying and bullying prevention within schools and/or at community gatherings; and evaluating the effectiveness of school-based or

community-based prevention efforts. Whether they are based in schools or in other settings within the community, mental health professionals can work together and with educators, health professionals, and community stakeholders, to support effective bullying prevention and response efforts.

Challenges & Opportunities for Mental Health Professionals

Mental health professionals experience a number of challenges and opportunities in efforts to prevent bullying in schools and communities:

- **Ongoing professional development and continued education related to school bullying.** School-based psychologists, counselors, and social workers are often on the front lines in prevention and response efforts and have expressed an interest in ongoing professional development and training opportunities. In a national survey, a majority (87%) had obtained some training through professional conferences and school in-service workshops, yet indicated a need for more extensive and formal education. Fewer than half reported receiving relevant training during graduate school (Lund, Blake, Ewing, & Banks, 2012).
- **Multiple demands.** School counselors, school psychologists, and other school-based mental health professionals have many roles and, like educators, experience multiple demands on their time. Therefore, it is critical to work with others to prioritize ongoing, sustainable and school-wide bullying prevention efforts.
- **Communication between school-based and community mental health professionals.** Some students and their families may use the services of both school-based and community mental health professionals. To most effectively meet the needs of these individuals, mental health professionals in both settings must communicate effectively with each other. Doing so requires a commitment to collaborate and careful planning to ensure that necessary consents are obtained.
- **Opportunities for partnership and collaboration.** With the passage of anti-bullying laws in nearly every state, most school districts are required to develop policies to address bullying at school. Mental health professionals can bring: unique expertise, a collaborative approach, and leadership to the development and refinement of these policies; the selection and implementation of evidence-based prevention and intervention approaches that avoid common misdirections such as zero tolerance policies; and the evaluation of these efforts over time.
- **Leaders in translation of social science research.** They also play important roles in translating social science research on issues such as the effects of bullying on students and effective (and ineffective) interventions. For example, recent media publicity around suicides by youth who were bullied by their peers has led many to incorrectly assume that

bullying often leads directly to suicide. Mental health professionals can lend their expertise in explaining and reinforcing that suicide is a complex issue and that there are many factors that may contribute to a youth's risk of suicide.

- **Reimbursement for bullying-related services.** Mental health professionals in the community are likely to be reimbursed for services to children and families that are related to bullying, which may help to promote effective prevention and treatment services.

How Can Mental Health Professionals Engage and Include Others in Community Bullying Prevention Strategies

Because of their training, collaborative approach, and focus on the social and emotional well-being of children, youth, and families, mental health professionals can assist in leading school- and community-based bullying prevention and response efforts. Since bullying does not stop at the doors of the school, community-wide attention to bullying is important. Given their daily experiences and their role as leaders in translating the latest in social science research, school- and community-based mental health professionals can work with children and youth, families, school personnel, and other stakeholders to promote community-wide efforts to address bullying.

Ideas for Next Steps

- Learn more about bullying prevention through StopBullying.gov or the resources listed below. Review the research presented in the modules and how it is best communicated to motivated audiences.
- Review any existing data within your school or community regarding bullying. Consult the [Community Action Toolkit](#), which provides helpful tools to perform a landscape assessment that will help you identify relevant data, as well as the broader needs and opportunities within the community.
- Plan a bullying prevention event that will inform a broader network of school- and community-based mental health practitioners, as well as parents, youth and other members of the community to help dispel common myths and misdirections. This will also shed light on the importance of a holistic, community-based effort with a public-health approach.
- Develop professional networks to support bullying prevention efforts and advocate for high-quality training opportunities (within graduate training programs and in continuing education) to increase mental health professionals' knowledge about bullying and effective prevention and response.

Resources and References

Resources

American Psychological Association’s “Resolution on Bullying Among Children and Youth” – This statement “encourages the implementation and dissemination of bullying prevention programs and interventions that have demonstrated effectiveness in schools and communities.” For more information, visit www.apa.org.

Centers for Disease Control and Prevention provides an in-depth “compendium of assessment tools” for measuring “bullying victimization, perpetration and bystander experiences.” For more information, visit www.cdc.gov.

Federal Partners in Bullying Prevention’s Webinar on Bullying and Suicide – This webinar provides current research and science on the relationship between bullying and suicide and outlines some of the shared risk and protective factors. For more information, visit www.sprc.org.

Mental Health America, Bullying: What to do about it – This resource provides information on how to address bullying and includes tip sheets on bullying and LGBT youth. For more information, visit www.mentalhealthamerica.net.

National Association of School Psychologists’ Bullying Prevention Resources – This website provides a variety of resources on bullying and bullying prevention, including “A framework for school-wide bullying prevention and safety” which guides education agencies and school administrators in implementing effective, sustainable, school-wide bullying prevention and safety efforts. For more information, visit www.nasponline.org.

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