BULLYING Among Seniors
(and Not the High School Kind)

A Prevention and Surveillance Resource for Assisted Living Providers

NCAL
NATIONAL CENTER FOR ASSISTED LIVING
WHY WE CREATED THIS RESOURCE

Assisted living communities are where close to one million seniors and individuals with disabilities call home. It is critical that providers ensure the safety and wellbeing of their residents. This includes recognizing and resolving bullying behaviors from other individuals within the community.

In recent years, bullying and its adverse effects have received greater attention. However, most efforts aimed at addressing the issue have been focused on our nation’s youth. While this is a noble cause, we must also recognize that bullying can occur at any age, including among the elderly.

While assisted living communities offer a great opportunity for seniors and individuals with disabilities to socialize with others facing similar needs, we cannot assume that everyone will get along, or that victimization won’t occur. But that does not mean we simply accept it either.

We should make every effort to understand bullying in its many facets: why it occurs, what it looks like, how we can prevent it, and how can we stop it. This resource is intended to encourage assisted living providers to think globally and strategically about this issue, with ideas to help you implement.

However, this is not intended as legal advice and should not be used as or relied upon as legal advice. It is for general informational purposes only. Always seek knowledgeable counsel for advice that is tailored to the facts and circumstances and takes into account all relevant law and regulation.

It also important to note that this resource, while directed toward assisted living providers, may also be applicable to other senior living providers.

Ultimately, we want every resident to have a rewarding and enriching experience in our assisted living communities. We appreciate the steadfast dedication of our fellow providers for doing all that they can to ensure each and every resident is treated with dignity and respect.

Jeanne Jaeckels
Chair, NCAL Customer Relations Committee

WHAT IS BULLYING?

According to the federal government, bullying is defined with the following core elements: unwanted aggressive behavior; observed or perceived power imbalance; and repetition of behaviors or high likelihood of repetition. Bullying can be direct (e.g., bullying that occurs in the presence of a targeted individual) and indirect (e.g., bullying not directly communicated to a targeted individual such as spreading rumors). Broad categories of bullying include physical, verbal, relational (e.g., efforts to harm the reputation or relationships of the targeted individual), and damage to property.

Bullying can happen in any number of places, contexts, or locations. Bullying that occurs using technology (e.g., phones, email, chat rooms, instant messaging, and online posts) is considered electronic bullying and is viewed as a context or location. Some bullying actions can fall into criminal categories, such as harassment, hazing, or assault (U.S. Department of Health & Human Services, n.d.).

Studies suggest that most senior-to-senior aggression in long term care settings is verbal abuse, and that men and women are equally likely to be the victim as well as the aggressor (Senior Bullying, 2015). However, all forms of bullying are possible.
IDENTIFYING BULLYING

Staff at assisted living communities should become familiar with characteristics commonly shown among senior bullies, and monitor these individuals for any bullying behaviors. However, not everyone with such characteristics will bully.

<table>
<thead>
<tr>
<th>Typical Traits of Individuals Who Bully</th>
</tr>
</thead>
<tbody>
<tr>
<td>- lacks empathy</td>
</tr>
<tr>
<td>- has few friends</td>
</tr>
<tr>
<td>- “needs” power and control</td>
</tr>
<tr>
<td>- struggles with individual differences</td>
</tr>
<tr>
<td>- uses power and control at the expense of others</td>
</tr>
<tr>
<td>- suffers from low self-esteem</td>
</tr>
<tr>
<td>- empowered by causing conflict, or making others feel threatened, fearful, hurt</td>
</tr>
</tbody>
</table>

Women...

- gossips
- snipes
- member of a clique
- passive-aggressive behavior
- manipulates emotions

Men...

- direct
- spontaneous
- verbally or physically aggressive
- superiority complex
- overly protective

Source: (Bonifas & Frankel, 2012)

Other Reasons Why Residents Might Bully

It is important to acknowledge that the senior living environment may inadvertently contribute to why a resident may bully. Transitioning into an assisted living community can be stressful for some, and new residents may feel a sense of powerlessness moving into a more supportive, communal environment. Therefore, they make seek out a way to demonstrate some form of control (Bonifas & Frankel, 2012). Staff should monitor residents who may be having a difficult time transitioning into the community and find ways to help them manage.

Residents may also live with certain health conditions, which may contribute to aggressive behaviors. For example, individuals living with dementia may have a need they cannot express or be in a situation they cannot understand. They may also no longer have the ability to verbally communicate, and therefore, act out in a physical way (AHCA/NCAL). Dementia can also cause impulse controls to decrease, often stripping residents of their mental filter (Botek, n.d.). So, residents with dementia may say things that could be construed as verbal bullying.

Victims Risk Factors

To help identify potential and occurring bullying behavior, it is also important to identify typical victims of bullying. Generally, residents in assisted living communities who are bullied may have one or more of the following risk factors:

- a new member of the community
- considered to be vulnerable (e.g., a person seen as a “fish out of water”)
- doesn't know what to expect from others
- alone (e.g., widowed or divorced)
- has a “scattered” support network (family and friends)
- heavily dependent on others
- suffering from mental illness
- suffering from depression
- has a change in other health condition(s)
- has a quiet, passive demeanor

Source: (Bonifas & Frankel, 2012)

However, even if a resident has these risk factors, that does not mean that they will be bullied.
Lastly, it is worth evaluating the scope of any bullying behavior(s) to determine an appropriate response to the situation. This requires consulting the definition of bullying. Is it direct or indirect? Does it fall within the categories of physical, verbal, relational, or damage to property? This may also depend on the frequency of the behavior (e.g., was this a first-time offense, or a repeated behavior by a particular resident?).

**Examples of Bullying Behavior**

<table>
<thead>
<tr>
<th>Physical</th>
<th>Verbal</th>
<th>Relational</th>
<th>Damage to Property</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dirty looks</td>
<td>Passive-aggressive comments</td>
<td>Ignoring a resident</td>
<td>Stealing items from another resident</td>
</tr>
<tr>
<td>Overbearing physical presence</td>
<td>Negative, critical comments about appearance, personality, etc.</td>
<td>Gossiping</td>
<td>Damaging items belonging to another resident</td>
</tr>
<tr>
<td>Hitting, kicking or other physical assault</td>
<td>Demanding, bossing around a resident</td>
<td>Participating in cliques that conspire to isolate a resident</td>
<td></td>
</tr>
<tr>
<td>Sexual harassment or abuse</td>
<td>Unsolicited or unwelcome sexual comments</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**CREATING A POSITIVE ENVIRONMENT**

In every assisted living community, there is a culture that defines its norms, beliefs, attitudes and experiences. Each resident brings their life story to their new place they call home. They have experiences and expectations that affect how they interact with others living at the community. These interactions can be positive or negative, and can affect the climate and enjoyment of the residents living there.

It is critical for the organization to have a foundation to implement a positive living environment. Staff can set the tone for the culture in the assisted living community, and such an effort can go a long way in preventing bullying before it starts. Below are suggested strategies for creating a positive environment.

- **Develop clear rules and expectations for resident and staff behavior**; invite everyone to be involved in determining what these rules and expectations should be.
- **Consider adding language around bullying to your occupancy/admission agreements** to discuss in advance with new residents and their families your community’s expectations and processes for handling bullying activities at your organization.
- **Hold regular group discussions** about the challenges of communal living and possible solutions to those challenges. This could be at resident council meetings, resident/family events, or as part of a series of training sessions.
- **Provide regular employee training** to recognize and respond to bullying and other difficult behaviors; include activities that promote the development of empathy.
- **Review policies for potential revisions that may reduce opportunities for bullying**. For example, institute a “no saving seats” policy for group events, dining and activities. These policies must also take into consideration efforts to create a home-like environment where residents have choice and a right to privacy.
- **Encourage staff and residents to report incidents of bullying and take complaints seriously**; staff must feel supported in making reports and in setting limits on inappropriate behavior.
- **Review state requirements to ensure compliance** with staff training and reporting requirements regarding elder abuse.

Source: (Bonifas & Frankel, 2012)
To facilitate the development of caring and empathy, consider implementing strategies that promote such qualities. For example:

- Acknowledge members of your community who go out of their way to welcome new residents or are friendly to current residents who are perceived as “outcasts.”
- Create a training program with role-playing to demonstrate positive resident interactions related to conflict and bullying. Incorporate residents into the role-playing.
- Institute a “Caring Squad” concept, where its participants’ job to notice acts of kindness and reward them. Nominate residents or employees each month who have been especially caring.
- Create a wellness program that promotes personal responsibility, compassion, tolerance and empathy.
- Help residents expand their social networks, perhaps during meals in the dining room or during activities, to alleviate “cliques.”
- Host a mixer type event for all new residents monthly or quarterly. Invite their families and friends, as well as with current residents.

Such activities send the message that caring and empathy are effective ways to achieve positive recognition, which is important for bullies who may seek attention through negative behavior. 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.

RESPONDING TO INCIDENTS

Communities must take steps to protect their residents from bullying. Additionally, communities should have policies to address a bullying incident, including required staff education, reporting requirements, and protocol when bullying is identified.

Potential Process for Addressing Bullying

As stated in the introduction of this resource, this is not intended as legal advice and should not be used as or relied upon as legal advice. Always seek knowledgeable counsel for advice regarding policies and procedures, as well as for specific situations that is tailored to the facts and circumstances, while taking into account all relevant laws and regulations.

Every resident is different, and every incident is different. This is where continuous staff education is vital, so all employees are alert to any occurrences and properly follow your community’s policies and procedures pertaining to the circumstance. The following list is an outline of a sample process for how to address bullying when it occurs:

1. Staff member observes or is told about a situation involving bullying behavior.
2. 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.
3. Staff member notifies the appropriate leadership (e.g., immediate supervisor or executive director).
4. Once notified of the situation, leadership/management also assesses the potential for physical danger, and if so, whether appropriate steps have been taken to safeguard the victim or if necessary, all within the community.
   a. If a crime has been committed, leadership/management reports the incident to the proper authorities (consult all relevant law and regulation).
b. Leadership/management also assesses whether to notify the families, guardian or legal representation of the residents involved with the incident.

5. If the incident is less severe, staff may be able to help resolve the situation. Management or a community social worker should gather as much information or evidence as possible. Collect accounts from witnesses among staff and residents, and talk with individuals who may have additional background information on the residents involved. Staff should also take into account what it already knows about the individuals involved (personalities, conditions, etc.).

6. With all the information, brainstorm possible solutions, while still adhering to residents’ rights. For example:
   a. Would the bully benefit from counseling, or do these residents need mediation?
   b. Are there environmental factors that could help deter bullying (e.g., adjoining rooms, proximity to one another at social gatherings)?
   c. If a resident living with dementia is exhibiting bullying behavior, what is possibly triggering the resident, or how can they be redirected?

7. Develop a corrective plan, and communicate the plan to the impacted parties and staff. Consider whether the plan should be incorporated into residents’ care plans and whether family members of residents should also be notified.

8. With staff educated on the corrective plan, they can help implement, monitor the residents and report back on progress.

9. If a resident is still exhibiting bullying behaviors—whether chronic, non-discriminatory, or purposeful—staff should reassess possible solutions. If others are at risk, voluntary or involuntary transfer, may be necessary. Again, consult all relevant law and regulation.

**Other Possible Considerations**

Below are some other tactics you may want to employ.

- Clearly communicate to residents that bullying behavior is unacceptable. If you make your residents sign an anti-bullying policy upon admission and they exhibit such behaviors, warn them that they are in violation of the policy. Often this will have an impact, as residents will not want to endanger their ability to remain in the community.

- If a bullying issue arises that is challenging to resolve, consider setting up a meeting with appropriate staff to share ideas. You may also want to consider hiring an external consultant to help resolve.

- Identify external resources that may be able to available (e.g., Adult Protective Services).

**SHARE YOUR EXPERTISE**

If you have any anti-bullying resources or sample policies, consider sharing them with your fellow assisted living providers. AHCA/NCAL’s learning management system, ahcancalED (http://educate.ahcancal.org) is the ideal place for long term care providers to collaborate.

Please email educate@ahca.org, and AHCA/NCAL staff will provide you with the information you need to get the process started on sharing your resource.
REFERENCES


