

BULLYING A SHORT GUIDE FOR GPS

INTRODUCTION

The Anti-Bullying Alliance defines bullying as 'the repetitive, intentional hurting of one person or group by another person or group, where the relationshi involves an imbalance of power.

TYPES OF BULLYING

Bullying behaviour takes many forms but can include:

VERBAL BULLYING

Name calling and verbal comments.

PHYSICAL BULLYING

Physical acts of aggression including shoving, punching, pushing, pinching, burning, etc.
Also unwanted sexual contact such as pulling at or attempting to remove clothes, touching, simulating sexual acts;

RELATIONAL BULLYING

Coercion or extortion such as forcing someone to hand over their money or possessions, coercing someone into doing something that's against school rules or against the law. Also deliberate exclusion and social isolation (e.g. encouraging others to isolate someone from the social group).

CYBERBULLYING

This is bullying behaviour through any electronic means. It can include offensive posts, messages, emails and videos, coercion or extortion, impersonation and online social exclusion.



Bullying can happen anywhere. This includes schools and colleges, residential settings, youth and sports clubs, on transport, through electronic devices, in the community, the home and the workplace. Being both a victim and/or a perpetrator of bullying behaviour can have an impact on your health whether you are a child or an adult. Survivors of bullying experienced in childhood or adolescence can also experience negative health outcomes in adulthood – such as depression and anxiety.



WHO IS AFFECTED?

Anyone can be affected by bullying behaviour but we know that some groups are more likely to be bullied. These include disabled people and those with special educational needs; people from a minority ethnic group or faith; people identifying as LGBT+; young carers; young offenders; children in care and people with facial disfigurement. Bullying behaviour peaks amongst older children and teenagers, but can still be experienced into adulthood. Research suggests that 1 in 3 children and young people experience bullying, with 1 in 30 experiencing bullying on a regular basis (equivalent to one child in every class). Cyberbullying is a particular concern at the current time with around half of all young people reporting being affected.

THE IMPACT OF BULLYING

Experiencing bullying can be frightening and distressing and can reduce a child or young person's self confidence, leaving them feeling unable to do the things they used to do. It can lead to feelings of social isolation, increased anxiety and may lead to depression and anxiety disorders.

Research tells us that being a victim of bullying can increase the risk of being depressed in later life by more than half; while if you bully others your risk can increase by 30%. Other effects can include self-harming, suicidal ideation, bed wetting, eating disorders and physical injuries such as bruises, cuts, burns and fractures. Some children may present with increased physical health complaints such as abdominal pain or headaches. For children and teenagers it can also lead to a fear of going to school with 16,000 children and young people absent from school at any one time because of bullying behaviour.

THE ROLE OF A GP IN SUPPORTING CHILDREN PRESENTING WITH ISSUES RELATING TO BULLYING

There may be a number of ways children and young people who are being bullied present to a GP. They may attend at the request of the school or advice of the school nurse, they may attend with an 'unrelated' condition, such as a physical health complaint or weight loss which a parent is concerned about, or they may attend with psychological consequences of bullying such as how mood or anxiety disorder. A GP may see children who present regularly with unexplained stomach aches, headaches and other physical symptoms for which no organic cause can be found. It may be appropriate in this situation to explore whether bullying is a factor.

UNITED AGAINST BULLYING



SUPPORTING CHILDREN TO DISCUSS BULLYING

Children may be very reticent to disclose experiences of bullying and it may require more than one visit to determine whether bullying is a factor. They may be concerned about how their parent or carer may react if they disclose bullying and it is therefore important to try and talk to the child or young person on their own, where possible. Further information about how to raise these issues sensitively, can be found in Safeguarding Children and Young People: The RCGP/NSPCC Safeguarding Children Toolkit for General Practice.

FINDING OUT WHAT SUPPORT IS CURRENTLY IN PLACE

For the child or young person who has been directed to the GP via the school or school nursing, it is important to find out what the school has put in place and what support is available currently. Some school nurses and educational support services are already able to directly refer into CAMHS. Your role here is to support the child and family and to ensure coordination of services. You can also ensure that family members are directed to other sources of support, such as available parenting classes and national support services.

SUPPORTING CHILDREN AND YOUNG PEOPLE TO ACCESS FURTHER SUPPORT

If bullying is identified, then part of a GP's role is to ensure that the school is responding appropriately, which may include discussion with the school nurse. It is critical that this is handled sensitively and in partnership with the child and their family as they may have concerns about how the school will respond and what the outcome of this will be. For children who are receiving support for bullying at school, they may still require additional support for mental and psychological health and a referral to psychological support such as counselling or CAMHS should be considered. It may be advisable to approach the CAMHS team for further advice and guidance. A GP may also want to signpost children, young people to the organisations listed below.

BULLYING AND THE LAW

It is important for a GP to be aware of the legal duties of school and public authorities with regard to bullying.

Schools have a legal duty to prevent all forms of bullying and harassment and must take action to prevent and respond to bullying behaviour. A bullying incident should be addressed as a child protection issue under the Children Act 1989 when there is 'reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm' - whether this happens in school, on transport, at the child's home or in the community.

Public authorities also have a legal duty to prevent harassment of any individual with a protected characteristic under the Equality Act 2010 (i.e. due to disability, age, gender, pregnancy, sexuality, race and religion/belief).

A GP has a responsibility for raising concerns, sharing information and working with statutory agencies to support child protection processes - which may apply to children and young people impacted by bullying behaviour.



WHERE CAN CHILDREN AND YOUNG PEOPLE GET SUPPORT?

CHILDLINE

ChildLine is the UK's free, confidential helpline for children and young people.

Trained volunteers are on hand to provide advice and support, by phone and online, 24 hours a day. Call Childline on 0800 1111 or visit www.childline.org.uk

YOUNGMINDS

www.youngminds.org.uk

DITCH THE LABEL

www.ditchthelabel.org

DIANA AWARD

www.diana-award.org.uk/programmes/anti-bullying

WHERE CAN PARENTS AND CARERS GET ADVICE?

ANTI-BULLYING ALLIANCE (ABA)

www.anti-bullyingalliance.org.uk

YOUNGMINDS

www.youngminds.org.uk/for_parents/ parent_helpline

CHILDNET INTERNATIONAL

www.childnet.com/parentsand-carers

FAMILY LIVES

www.familylives.org.uk

KIDSCAPE

www.kidscape.org.uk

CHILDREN'S LEGAL CENTRE

www.childrenslegalcentre.com

FAMILIES OF A DISABLED CHILD/ CHILD WITH A SPECIAL EDUCATIONAL NEED CAN ALSO CONTACT:

CONTACT A FAMILY

www.cafamily.org.uk

LOCAL INFORMATION, ADVICE AND SUPPORT SERVICE (IASS)

www.iassnetwork.org.uk

ADULTS AFFECTED BY CHILDHOOD BULLYING CAN CONTACT:

WELLDOING

www.welldoing.org

SAMARITANS

www.samaritans.org

BRITISH ASSOCIATION FOR COUNSELLING AND PSYCOTHERAPY

www.bacp.co.uk

For details of further organisations that can provide advice and support in relation to bullying visit www.anti-bullyingalliance. org.uk



This document has been written for GPs as they seek to support children, families and adults impacted by bullying. It has been written by the Anti-Bullying Alliance, hosted at the National Children's Bureau (NCB) with support from YoungMinds and the Royal College of GPs. The resource was written and published for Anti-Bullying Week 2015 in partnership with Barclays.