

Being bullied

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Callum Jones draws on his own and others' experiences to demonstrate how counselling can enable healing from the chronic trauma of childhood bullying

My article will discuss the immediate and long-term effects of bullying on children and adolescents. Although definitions vary, it is widely agreed that bullying is an intentional assault on another person. It can take various forms and usually happens over a period of time, although a singular event can also be classed as bullying.¹ It is instigated by one or multiple people and generally involves an imbalance of power or a perceived imbalance. Bullying falls under the category of 'chronic trauma', and the more the person is bullied, the more traumatised they become.² There is also a risk for counsellors of experiencing vicarious trauma when working with individuals who have experienced bullying, which is one of the reasons why supervision is essential. My article seeks to explore how counselling can support children and young people who have experienced bullying. It is based on my own personal experiences of being bullied as a child, and the counselling support I received, as well as my research and training as a counsellor.

My story begins in 2004 when I started mainstream secondary school. For the first few weeks I experienced the ordinary settling-in period as my peers and I found our place within the hierarchy and settled into our friendship groups. Unfortunately, and for reasons unknown, towards the end of the first term I began to experience severe panic attacks. These started happening on school premises and under the ever-watchful eyes of my peers. What began as simple teasing quickly escalated into regular beatings, which at times left me so badly injured I was unable to stand. I kept the severity of the

bullying well hidden, due to fears of repercussions.

Members of staff were disinterested in bullying back then and could be just as aggressive as children. One particular school memory that sticks with me is of being chastised

for having a panic attack by a teacher who

ridiculed me for 'not being a man.' I began missing school and was eventually placed in a small provision for children with mental health problems. I survived it. Once I left school and started college, I was diagnosed with depression and anxiety and I started seeing a counsellor. I believe this was a direct result of my experiences of bullying. Counselling assisted me greatly and it was my desire to help other young people who had been bullied that led to my training and current research.

Research

My research dissertation is titled 'A qualitative exploration of the perceived effects of childhood bullying on the lives of some adults'. I discovered that one in four students in the United Kingdom and one in three in the United States experiences bullying in their school life, with verbal and relational bullying being the most frequently reported. Twenty-three per cent of children do not report their bullying experiences, like me, due to the fear of retaliation. Fifteen per cent suggested that when they did report it to an authority figure, they were met with disregard. Most worrying of all, perhaps, is the figure that suggests that bullying accounts for 44 per cent of adolescent suicide in the UK³. I did not immediately report my own experiences of bullying as I was often threatened with retaliation. When I did eventually approach an authority figure, my claims were dismissed and ridiculed. Similarly, the people I spoke to for my research did not report their experiences due to fear of repercussions and not being taken seriously.

While conducting my research, I spoke to people who had experienced different forms of bullying, including physical,

verbal and sexual bullying, social exclusion and more recently, cyberbullying. Physical bullying involves using parts of the body or a foreign object to harm another person¹ through kicking, punching, hitting and spitting. It can also involve the destruction of personal property.⁴ My research found that verbal (or emotional) bullying was the most common form of bullying experienced by children and adolescents. Many of the people I spoke to had experienced verbal bullying during secondary school. Examples included remarks about physical appearance, emotional states and social status, name-calling, threatening behaviour and intimidation.⁵ Many young people felt intimidated not to tell on their perpetrators for fear of the consequences. Sexual bullying was the least reported type of bullying reported by participants in my research. It involves attacking another person based on their sexual orientation or gender. It also includes sexual harassment, which is most commonly associated with female experiencers.⁵

Social exclusion (relational bullying) is the deliberate exclusion of someone from a social group. This kind of bullying takes place indirectly and entails relationship destruction, rumour spreading and social annihilation. Social exclusion can damage a young person's reputation so that they are never given the opportunity to become part of a social group. Each of my participants reported being alienated and refused entry into a social group.

Cyberbullying involves harassing another person electronically, for example via social media, chat rooms and text messages.⁷ Due to their use of technology, many children and young people experience bullying through media devices. Cyberbullying did not really exist when I was at school, and similarly, the adult participants I spoke to for my research did not report any experiences of cyberbullying.

Effects of bullying

My research confirmed what I already knew from personal experience: that bullying has been linked to physical and psychological issues for children and young people, with the effects lasting long into adulthood. Physical effects can include stomach conditions, poor appetite and sleep disturbances. More commonly, it leads to the development

of mental health problems such as depression, anxiety, self-harm and suicidal thoughts. In addition, the child or young person who has been bullied might struggle to form or maintain relationships long into adulthood. I developed mental health issues due to my experiences of bullying, as well as difficulties in forming relationships and friendships. The people I spoke to for my research also reported having difficulties forming relationships and many developed mental health issues, anxiety being the most commonly reported. Conversely, my research and personal experiences support that the experience of being bullied can also have positive effects. Children who experience bullying often demonstrate tremendous psychological strength and frequently go on to gain careers in helping professions.

Counselling clients who have been bullied

I discovered first-hand that counselling can provide a safe, confidential space for children and adolescents who are being or have been bullied. It gave me the opportunity to discuss my experiences at length without the fear of my tormentors finding out. It is important to remember that some incidents of bullying can be life threatening and so it is vital to check in with the client to ensure they are not in any immediate danger. But the counsellor has a different role to other adults whom a child or young person might talk to (or not) about being bullied. For example, a teacher or other school professional will have to follow procedures, which might take



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the bullying experience out of the young person's hands, and this can feel disempowering. A counsellor, on the other hand, so long as they are satisfied that the client is safe, will respond to the presenting issues of the bullied child or adolescent, which includes respecting their decisions on how incidents are handled.⁸ Ensuring that the young person remains at the forefront of the decision-making can feel empowering for them, which of course is the opposite of the feelings provoked by being bullied. Counselling also places the person who has experienced bullying in a more positive relationship with an authority figure. This will assist them in regaining (or establishing for the first time) trust with an authority figure. Speaking from my own experience of counselling, it was the first time I was able to establish a trusting relationship with an authority figure. I found this especially helpful as, at the time, I believed that I had been bullied and sent to counselling because there was something wrong with me. I had the words of that teacher in my head telling me to 'be a man'.

My experience of counselling was person centred. This way of working seeks to understand the client's story and lessen the incongruence between their identity and their ideal self.⁹ The person-centred therapist provided me with reflection and challenge (when appropriate) as I shared my experiences of bullying. The experience was painful at times, but it helped me to develop (what I now know as) the core conditions of empathy, congruence and unconditional

positive regard. Having another person demonstrate empathy was soothing and made me feel less alone. Being offered unconditional positive regard was huge. I hadn't felt accepted by many people prior to that. Working now as a person-centred counsellor myself, I understand the core values as pivotal when I am forming a relationship with a person who has been bullied. I recognise that I am providing a new kind of interaction they have probably had little experience of before.

During my research, I also looked at the benefits of other types of talking therapy for people who have been bullied. Cognitive behavioural therapy (CBT) can provide techniques to change thoughts and behaviours, potentially lessening the impact of bullying in the long term.¹⁰ Gestalt therapy can also have a positive effect on people who have experienced bullying. It focuses on the present rather than the past, and uses re-enactment. Whatever type of counselling is offered, the relationship is what matters most. One of the key factors that enabled me to turn my life around after bullying was my experience of counselling. Knowing that there was somebody who would listen and offer compassion when others did not, made all the difference. My aim in writing this article has been to discuss the significance of a therapeutic relationship to a child or adolescent who has experienced bullying. Counselling does make a difference. Where there is counselling, there is hope.

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Callum Jones is a third-year MA in clinical counselling student at the University of Chester and volunteers as a counsellor for the Gaddum Centre in Manchester. His undergraduate degree is in counselling skills with criminology.

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