

THE FEAR FACTOR: BULLYING AND STUDENTS WITH DISABILITIES

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This article provides an overview of research addressing bullying and students with disabilities. The studies are discussed within two disability categories: visible and non-visible. Disabilities that are overt and observable were determined by the researchers to be categorized as visible. In contrast, disabilities that are less obvious and would require more time to observe and differentiate were categorized as non-visible. Results from the eleven studies published from 1989 to 2003 indicated students with disabilities, both visible and non-visible, experienced bullying more than their non-disabled general education peers and that boys were bullied more often than girls (Dawkins, 1996; O'Moore & Hillery (1989). Reported forms of bullying included name-calling, teasing, physical attacks, severe verbal bullying, verbal aggression, threats, taking belongings, imitating, and making fun of the students with disabilities. The students with disabilities also tended to be less popular, have fewer friends, and struggle with loneliness. Implications for future research are discussed.

Over the past two decades, education for students with disabilities has gone through many changes. Historically, students with disabilities were educated separately from their age peers in either special schools or different classes (Butler, 1996). The concept of separate schools and classrooms continues to be challenged on its efficacy for students with disabilities. As the emphasis on including students with disabilities into general education classrooms has increased, educators have been primarily focused on their academic success. Much less emphasis has been placed on social integration. While it remains important to evaluate academic progress, it is also important for students with disabilities to succeed socially. According to Asher and Coie (1990), peer relationships and peer interaction are important elements needed in competent social skill development during childhood.

As students with disabilities are increasingly being taught with their non-disabled peers, they are subject to a different range of childhood experiences and may be at an increased risk for bullying. Unfortunately, these experiences are not always positive, and they can have an enormous impact on children.

Bullying is not a new phenomenon. Indeed, it is chronicled in both classic literature and modern film. It is a topic that has been discussed extensively in professional literature for non-disabled students. However, until recently, bullying was regarded as merely a typical childhood experience or rite of passage that all students must survive. Unfortunately, this long-held view suggested that children must learn to deal with bullies by themselves (O'Moore & Hillery, 1989; Ross, 2003). Even though this view contradicted the widely held understanding among educators that students must feel safe in order to learn (Olweus & Limber, 1999), little initiative was taken to address bullying, or it was managed ineffectively (Ross). Bullying was either minimally regarded or overlooked as a serious problem (Olweus, Limber, & Mihalic, 1999).

Historically, bullying has been misunderstood not only by parents and educators but by academia as well. It is a complex problem that continues to perplex researchers and educators today. Why it is an enduring problem remains a question of serious, important debate. The bullying phenomenon is a problem of international significance. It is documented in the literature not only in the United States, but in England, Ireland, Canada, Australia, New Zealand, Norway, Sweden, and Japan. Much of the initial research was done by Dr. Dan Olweus from the University of Bergen, Norway, who is both pioneer and continuing major contributor in the field of bullying research. It was his 1985 estimate that 15% of the students in Norwegian schools were involved in bullying that prompted researchers in other countries to become interested (Ross, 2003). Prevalence data vary along methodological differences; however, figures between 10% and 20% are common.

For the past ten years, research in the area of bullying conducted in the United States has trailed behind the research conducted in other countries. Despite a growing interest in bullying due to recent acts of school violence, only one large-scale study on bullying has been conducted in the United States (Espelage & Swearer, 2004; Heinrichs, 2003). This study found that 29.9 % of students in grades six through ten were involved in moderate or frequent bullying. Increasingly, it is being recognized as a serious threat to the health and development of our nation's children (Nansel, et al., 2001).

The immediate effects of bullying are extremely debilitating to victims (Ross, 2003). Hazler, Carney, Green, Powell, and Jolly (1997) found that the academic performance of victims decreases significantly. In addition, Reid (1990) determined that the low morale and acute despair experienced by victims lead to truancy. Other effects include chronic illnesses (Ross & Ross, 1988) running away, and even suicide (Beck, 1986; Besag, 1989; Elliott, 1991). Additional studies concluded that victims of bullying endure anxiety, depression, poor-esteem, impaired concentration, and avoidant behavior (Austin & Joseph, 1996; Kochenderfer & Ladd, 1996; Olweus, 1993).

In spite of the pervasiveness of bullying, little research exists that examines the relationship between bullying and students with disabilities (Mishna, 2003). Within this limited research, some studies have shown that these students have an increased risk for being victimized (Nabuzoka & Smith, 1993; Yude, Goodman & McConachie, 1998). Other studies indicate that students with learning problems are highly represented in the victim population (Martlew & Hodson, 1991; Nabuzoka & Smith; O'Moore & Hillery, 1989). For example, students with learning disabilities, emotional disorders, attention deficit hyperactivity disorder,

and physical disabilities often demonstrate a lack of social awareness which may make them more vulnerable to victimization (Unnever & Cornell, 2003). Additionally, research has shown that students with special needs are more susceptible to bullying and are more likely to be sociometrically rejected (Martlew & Hodson; Nabuzoka & Smith; O'Moore & Hillery; Whitney, Smith & Thompson, 1994). Hodges and Perry (1996) stated that peer rejection is a social risk factor that contributes to victimization. Finally, a study by Whitney et al. suggested that bullying is often related to the student's disability.

Given the severe effects, an imperative exists to explore the bullying experiences of students with disabilities. If we are to successfully educate students with disabilities, it is critical to understand bullying and its relationship to students with disabilities. Therefore, the purpose of this article is to review current research in order to examine the risk factors and the degree and nature of bullying experienced by students with disabilities.

Definition of Bullying

Currently, there is no one universally accepted definition of bullying. However, Olweus (2001), defines bullying as when a student *is being exposed, repeatedly and over time, to negative actions on the part of one or more students* (p.9). According to Olweus, to be regarded as bullying the negative actions must occur at least once a week for a month or more.

Ross (2003) concluded that a salient feature inherent in the definition of bullying is the existence of an imbalance of power. Despite inconsistency in the definition of bullying, she reported that most investigators agree that bullying involves an imbalance of physical or psychological power. The bully is at least perceived to be stronger than the victim. Ross defined bullying as *...intentional and generally unprovoked attempts by one or more individuals to inflict physical hurt and/or psychological distress on one or more victims. There must be an imbalance of physical or psychological power* (p.27). In addition, she further explained that bullying can either be direct, involving face-to-face physical or verbal confrontations, or it can be indirect, involving relational bullying such as spreading rumors or social exclusion.

There is less consensus about single acts of aggression constituting bullying behavior; in fact, some bullying researchers state that the behaviors must be repetitive. Although Ross indicated that her definition generally refers to a series of actions over time, like Olweus, she emphasized that a single incident can be regarded as bullying. It is Ross' position that to require that a series of actions occur over time imposes an adult interpretation of bullying on children. Further, she noted that there are other researchers who believe that the actions do not have to be repetitive because, as La Fontaine (1991) concluded, children believe that single incidents are bullying. Obviously, the definition affects research because it influences frequency data upon which decisions are made. Educators need a clear definition to determine what behaviors are considered to be bullying and how to discriminate between bullies and other aggressive children. This knowledge will advance educational policy and shape prevention and intervention practices in schools.

Review of the Literature

Procedures

Studies were included in the synthesis if the primary purpose was to examine bullying among school-age students with disabilities. The studies used either quantitative or qualitative research designs. In addition, all studies were implemented in a public or private school setting.

Computer assisted searches for relevant literature were conducted in the *Educational Resources Information Center (ERIC)* and *PsycInfo* databases using the following descriptors: special education, bullying, victims, victimization, and students with disabilities. The only identified review (Mishna, 2003) was examined along with the reference lists of all obtained articles. In addition, recent issues of all major special education journals were examined for relevant articles. These procedures resulted in the identification of 11 research studies that included school-age students with disabilities as targets of bullying or victimization. All studies employed a survey research design. Measures included surveys, interviews, observations, questionnaires, and self-report inventories.

Studies and Sources

Eleven studies were identified during the period from 1989 to 2003. Journals included were *British Journal of Educational Psychology*, *Educational Psychology*, *Contemporary Issues in Communication Science and Disorders*, *Developmental Medicine and Child Neurology*, *Education & Treatment of Children*, *Journal of Educational Psychology*, *Learning Disability Quarterly*, *Irish Journal of Psychology*, *Journal of Child Psychology and Psychiatry*, and *Journal of Interpersonal Violence*.

Sample

The sample included a total of 609 students who were identified with disabilities. In order to make comparisons between the disabilities and the degree of bullying, the studies were organized into two disability categories: visible and non-visible. Disabilities that are overt and observable were determined by the researchers to be categorized as visible. In contrast, disabilities that are less obvious and would require more time to observe and differentiate were categorized as non-visible. Although stuttering may seem to be a non-visible disability, the authors of the study (Langevin, Bortnick, Hammer & Wiebe, 1998) that involved students who stuttered hypothesized that stuttering was an external difference. It was determined that this overt quality of stuttering immediately identifies the student as having a disability. Therefore, this study was reviewed under the visible disabilities category. This is not the case with disabilities such as attention deficit hyperactivity disorder (ADHD) and Learning Disabilities (LD) or for students with behavioral disabilities (BD). Particularly if students with ADHD are medicated, students with ADHD, BD, and LD would require a more thorough observation to determine the disability.

Two hundred and one students were identified as having visible disabilities including cerebral palsy, muscular dystrophy, poliomyelitis, spina bifida, Erb's palsy, stuttering, Friedrich's ataxia, and hemiplegia. Four hundred and eight students had non-visible disabilities including learning disabilities, attention deficit hyperactivity disorder, and at-risk with behavioral and/or academic difficulties. The disability area was not identified in one study (O'Moore & Hillery, 1989).

Bullying and Students with Visible Disabilities

Four research studies were identified that included students with visible disabilities. Three of the studies included students with physical disabilities (Dawkins, 1996; Llewellyn, 2000; Yude et al., 1998). The fourth study included students who stutter (Langevin et al., 1998). As stated previously, it was determined that there is an overt quality to stuttering that immediately identifies the student as having a disability.

The first three studies included students with physical disabilities. Dawkins (1996) compared the rates and types of bullying in two groups of pediatric outpatients seen at a child development center (CDC) in London. The comparisons were made between one group of children with medical conditions that resulted in visible physical disabilities and a control group of children without visible physical disabilities. For this study, a hand review of records kept at the CDC was conducted to identify children with a visible disability for this study. Fifty children, aged eight to 11, and 31 children, aged 13 to 16 with visible, external physical disabilities were selected. The children were diagnosed with cerebral palsy, muscular dystrophy, marked coordination disorders, poliomyelitis, spina bifida, and Erb's palsy. Fifty children from each age group were identified for the control group without visible physical disabilities through the outpatient pediatric department (OPD) hospital computer index. Each child anonymously completed the Olweus (1991) bullying questionnaire, a self-report inventory consisting of 26 questions about school, break-time, friends, being bullied, and bullying other children.

Results indicated the increased frequency with which the CDC children reported being bullied was statistically significant compared to the OPD children. Fifty percent of the CDC children were bullied at school at least once during the school term in comparison to 21% of the OPD children. Moreover, CDC children were twice as likely to be bullied regularly with 30% of the CDC children being bullied regularly as compared to 14% of the OPD children. Boys in both groups were more likely to be bullied than girls, although the difference was not statistically significant. Interestingly, name-calling was the most common form of bullying.

In an attempt to ascertain why CDC children were bullied more than the OPD children, a multivariate analysis identified four factors that were predictive of a child's chance of being bullied: receiving extra help in school, being alone at playtime, having less than two good friends, and being male. Since having a disability increases a child's likelihood of attending special classes or requiring extra help in school, these elements may increase a child's chance of being bullied. However, once the four factors were taken into account, there was no indication that the children having a visible disability were more likely to be victims than the control group without a visible disability.

In the second study, Yude et al. (1998) examined aspects of social integration, including acceptance, friendship, victimization, and bullying in mainstreamed children with hemiplegia in 54 different schools in London, England. Fifty-five mainstreamed children with hemiplegia who had a measured IQ of over 60, aged nine to ten years, were compared with all classmates on socio-metric measures of popularity and friendship and with 55 matched controls on measures of victimization. The teachers participated in standardized semi-structured interviews and completed questionnaires. Every child was interviewed individually. Finally, sociometric measures were conducted.

Teacher interviews were completed regarding all index (children with hemiplegia) children and all matched controls. Teachers were interviewed about the quality and duration of the children's friendships, their ability to be compatible with their classmates, and classroom behavior. They were asked if either the index child or the matched control was either a perpetrator and/or a victim of teasing or bullying. In addition, teachers were asked to complete the *Prosocial Behavioral Questionnaire* (Weir & Duveen, 1981) for index children and matched controls. Teacher questionnaires were returned for all the index children and for fifty-one out of fifty-five matched controls (93%).

Sociometric measures were completed in 53 classes in 52 schools with one school declining participation. Fifty-three index children and 1,421 classmates were interviewed individually away from the classroom using the protocol of Bell-Dolan and Wessler (1994). Children were assured that the information they provided would be confidential. Every child was asked to indicate the three children they played with the most and the three children they played with the least. In addition, the children were asked to identify children who were victims and/or bullies.

Victimization information was collected from multiple sources. During the semi-structured interviews, teachers were asked if each index child and matched control were a victim of teasing or bullying. If so, the teachers were asked how often it occurred, how severe it was, how the child typically responded, and what they thought was the motivating factor for the bullies to choose to victimize the child. Similarly, each index child and matched control was asked during their individual interviews about victimization, including the severity, frequency, and focus of each incident.

Overall, index children received fewer positive nominations and more negative nominations than their classmates. Moreover, index children had fewer reciprocated friendships than their classmates. Forty-five percent of index children were moderately or severely victimized as compared to 13% of matched controls. In regard to bullying, teachers indicated that six percent of index children and 17% of matched controls bullied other children. According to the classmates, 6 of 53 index children (11%) and 181 of 1,421 classmates (13%) started fights and picked on other children.

The authors suggested that the association between the presence of hemiplegia and either peer relationship problems or victimization might be accounted for by a variety of reasons. First of all, the classmates may be biased towards children with disabilities or more generally towards children who are different. Another possible explanation is that there could be neurological aspects of hemiplegia that result in social awareness or social skill deficits. Finally, some of the

children interviewed suggested that the index children might attract victimization by their sensitivity to comments about their disability and by their tendency to become visibly upset or to cry easily.

In the third study, Llewellyn (2000) examined the experiences of students with physical disabilities who had been mainstreamed in a rural school in the United Kingdom. The school was defined as fully inclusive with an enrollment of approximately 1,000 students. Six students with physical disabilities between the ages of 13 and 18 years participated in this study. All of the students used a wheelchair in the school setting. Their medical diagnoses included muscular dystrophy, spina bifida, and Friedrich's ataxia.

The purpose of the study was to conduct semi-structured interviews to allow the participants to talk about their experiences of mainstreaming in their own words. Because bullying was one factor to emerge from the interviews, this study was included in the review and will be the focus for purposes of analysis.

To examine the psychosocial environment of the mainstreamed students with physical disabilities, qualitative research methods were used to interview the students, their parents, and the teachers. A multi-perspective approach was chosen to review the processes that the children, families, and teachers considered to be complementary or contrary to a fully inclusive system. The interviews were based on issues that were thought to be conducive to successful mainstreaming. In addition, an unstructured format was chosen to allow the researcher to pursue themes as they naturally arose during the interviews. They were tape recorded, and the time frames for the interviews ranged from 60 to 120 minutes. The interviews were transcribed and collated into themed multi-perspective case studies related to each student.

The analysis of the interviews revealed students' concern about social isolation and bullying by peers without disabilities. From the student and parent interviews, it was learned that the students with disabilities in this inclusive setting often felt ostracized. In addition, there was one report of physical bullying and four of the six students reported severe verbal bullying. The interview summaries reported trauma and long-lasting effects from the bullying experiences.

In the final study, Langevin et al., (1998) investigated the relationship between stuttering and teasing/bullying for school-aged children in Edmonton, Alberta. The purposes of their study were to collect data on the frequency, impact, and nature of teasing and other forms of bullying experienced by children who stutter and to evaluate the experimental questionnaire designed by the first author to collect this data. In addition, the authors hypothesized that stuttering is an external difference that places children at increased risk for victimization.

Twenty-eight children who stutter, ranging in age from seven to 15 years of age, participated in the study. Twenty-six children attended public or community schools; one child was home schooled; and one child had combined home and public schooling. All twenty-eight children were receiving treatment for their stuttering.

The *Teasing/Bullying Questionnaire* (TBQ-CS) was administered anonymously by one of the investigators or one of the speech-language pathologists who worked with the children in either a

small group ($n=16$) or in an individual format ($n=12$) during either the school year ($n=5$) or the summer ($n=23$). Each child was given the booklet containing three sections: (1) a training section to ensure that the children understood the Likert response format; (2) the *Stuttering-School and Stuttering-Summer* scales; and (3) the *Other-School and Other-Summer* scales. Children who completed the questionnaires during the school year did not complete the *Stuttering-Summer and Other-Summer* scales. The author's definition of teasing/bullying was read by the administrator, and in addition, each item was read for children with reading problems and for children eight years and younger. The children were encouraged to ask questions if they misunderstood the meaning of an item or did not know the meaning of any of the words used in the questionnaire.

Results from this study showed that 59% were teased/bullied about their stuttering, and 56 % experienced more serious teasing/bullying occurring once a week or more frequently. Sixty-nine percent were teased/bullied about other things with 50% being teased/bullied once a week or more frequently.

The data demonstrated that imitating and making fun of stuttering and being called names were the most frequent types of bullying behavior reported by children in this study. Stuttering severity did not appear to be a factor in the frequency of teasing/bullying; however, it is important to note that all of the children who stuttered severely were teased/bullied. Further, the findings supported the authors' hypothesis that stuttering is an external difference that places children at risk for victimization.

Summary

In the four studies that included students with physical disabilities and students who stutter, two of the studies used questionnaires (Dawkins, 1996; Langevin et al., 1998) and the other two studies (Llewellyn, 2000; Yude et al., 1998) used interviews to collect data regarding the issues of bullying. Based on these results, Dawkins and Langevin et al. both identified name-calling as the most common form of bullying while Dawkins also reported that boys were bullied more frequently than girls. Furthermore, the issue of social skill deficits and problems with social awareness for students with disabilities was identified in three of the four studies. Overall, students with visible disabilities were bullied more than their non-disabled peers.

Bullying and Students with Non-Visible Disabilities

Seven research studies were identified that included students with non-visible disabilities. Four of the studies included students with learning disabilities (Martlew & Hodson, 1991; Nabuzoka, 2003; Nabuzoka & Smith, 1993; Sabornie, 1994). While the fifth study (Morrison & Furlong, 1994) included at-risk students with behavioral and academic difficulties and students with severe learning disabilities, the sixth study (Unnever & Cornell, 2003) included students with ADHD. The final study (O'Moore & Hillery, 1989) was included in this section at the researchers' discretion. Although the authors did not identify the disabilities of the students included in their study, the students were required to complete the self-report questionnaire without assistance. No accommodations were noted that would indicate that the students had visible disabilities. Due to the high level of independent functioning required to complete this

questionnaire, it was decided to include this study with the studies of students with non-visible disabilities.

In the first of four studies that included students with learning disabilities, Martlew and Hodson (1991) investigated bullying as part of a study that examined issues of social integration for students with mild learning disabilities (MLD). The students with MLD came from two schools in Great Britain, a mainstream school and a special school. The mainstream school had 154 students with an integrated resource unit for 20 students with mild learning difficulties ranging from seven to eleven years of age. The special school included 128 students with mild to moderate learning difficulties between the ages of three to sixteen.

In order to examine teasing/bullying, nine MLD students and eight mainstream control students from the original sample participated in the student interviews. The students were asked ten questions relating to their perceptions of friendship, teasing, and fear of attending school. Teasing was defined as verbal aggression, threats, name calling, etc. Bullying was defined as physical aggression, hitting, kicking, tripping, etc. The interviewer marked the appropriate score for the student's responses on the *Children's Relationships Interview* form. In order to ensure that the students' responses were correctly categorized, they were asked to define bullying or teasing if they reported that they were the recipients of either behavior.

Independent group t-tests were used to examine differences between the responses of mainstream and MLD children to the questions about teasing and friendship. Based on playground observations and interviews with the subset of children from the original sample, researchers found that the children with MLD had fewer friends and were teased significantly more than the children without MLD. A further comparison between the younger (7-9 years) and older children (9-11 years) showed there were no significant differences in the amount of teasing reported.

In the second study including students with LD, Nabuzoka and Smith (1993) examined the sociometric status and social behavior of children from six classes within two schools with integrated resources in Sheffield, United Kingdom. The total sample of 179 students, aged eight to 12 years old, included 36 students with (LD). The students with LD were classified as having moderate learning disabilities. An integrated resource school was defined as a setting in which students with LD were placed in mainstream classes, but they had access to specialists to address their individual needs.

To assess sociometric status, each student was seen individually and asked to indicate three students they liked most and three students they liked least. Then, they were asked to nominate three students who best fit each of six behavioral measures: cooperates, disrupts, shy, fights, seeks help, and leader. In addition, the students had to nominate three students who fit a given description of a bully or a victim. The class teachers were given the *Social Behavior at School Questionnaire*. The teachers reviewed the list of 42 items related to interpersonal skills, observed each child in a variety of situations, and then answered the Yes-No questions.

Results indicated that students with LD were nominated as shy, victims of bullying, and seeking help more significantly than students without LD. While there were no gender differences in sociometric status; girls with LD were particularly at risk for being bullied compared to boys with LD. Being disruptive and starting fights were aggressive behaviors associated with bullying, but these behaviors were not distinguishable between the students with LD and the students without LD.

Finally, the relationship between the teachers' scores of social behavior and peer nominations varied significantly between students with LD and students without LD. The authors suggested that the findings reflect real differences between the teachers' and peers' perceptions of behavior in students with and without LD. It may be that the students with LD have deficits in decoding social situations. In regard to being victims of bullies, they may not have understood how to avoid being victimized. Also, the authors indicated that teachers primarily observe students with LD in classroom settings that are more structured with more clearly defined social roles. Therefore, the social roles may be easier to decode. In contrast, mainstream peers have opportunities to observe the students with LD in more unstructured situations that may not be as easy for students with LD to decode. The lack of correlation between peer and teacher assessments of behavior of students with LD could reflect the variation in the abilities of students with LD to decode across different social situations.

In 2003, Nabuzoka examined bullying and other behaviors of children with and without learning disabilities (LD) in a *mainstream* school in Sheffield, United Kingdom. Both teacher ratings and peer nominations were used. Teacher ratings were obtained for 121 children, aged 8-12, including 20 children with LD. Peer nominations were obtained for 55 of these children, including 15 students with LD and 40 students without LD. The children and teachers came from four classes with an average of 30 children in each. The 20 students with LD were classified as having moderate learning disabilities and none had any serious emotional disturbance or sensory impairment.

For the peer nominations, each child was seen individually, and they were asked to nominate three peers who best fit the same eight behavioral descriptions as in the earlier Nabuzoka and Smith (1993) study. The behaviors included: cooperates, disrupts, shy, fights, seeks help, leader, bully, and victim. For the teacher ratings, each teacher was given a list of descriptions of the eight behaviors and asked to rate each child on each of the behaviors. The behaviors had to be rated using the following five-point scale: (1) never, (2) rarely, (3) sometimes, (4) often, and (5) very often.

Results indicated that there was a significant relationship between teacher ratings and peer nominations of the behaviors of students without LD. In contrast, no significant relationship was found between teacher and peer assessments of students with LD. Students with LD were assessed as shy and as victims of bullying significantly more than students without LD. However, peers significantly associated being a victim of bullying with shy and help-seeking behaviors while teachers associated victims with fighting, being disruptive, and showing a lack of cooperation. One possible explanation for this difference is that teachers have a relatively limited opportunity to observe students' social behavior as compared to the

opportunities of students' peers. Therefore, teacher assessments alone may not be adequate to assess students at risk for peer victimization, especially for students with LD.

In six urban middle schools in a metropolitan area in the southeastern United States, Sabornie (1994) examined the social-affective characteristics, including victimization, of 38 middle school students with LD. The students attended resource room programs while also spending some time in general education classrooms. Thirty-eight general education students without LD served as matched controls. Two instruments were administered individually, the *Background and Outcome Survey* (BOS) and the *Rosenberg Self-Esteem Scale*, to obtain measures of self-concept and levels of participation, integration, and victimization.

Using SPSS, data were analyzed using paired-sample t-tests to determine whether the comparison groups differed on each dependent variable: loneliness, self-concept, integration, participation, and victimization. Results showed that the 38 matched pairs differed significantly with regard to loneliness, integration, victimization, and participation; however, the groups did not differ significantly in self-concept. With regards to victimization, students with LD reported being threatened, physically assaulted, or having their possessions removed from them with greater frequency than their non-disabled peers. The authors suggested that perhaps the students with LD acted too aggressively with the wrong peers, leading to retaliatory acts against them. The authors also noted that excessive passivity among students with LD may have set them up for others to take advantage of them.

In the fifth study included in this section, Morrison (1994) surveyed 554 high school students in a small urban community in Southern California to examine their experiences in school violence and feelings of safety. Participants included 485 students in general classes, 39 students in leadership classes, 11 students from an opportunity class which was defined as a self-contained, half-day program for at-risk students who had behavioral and academic difficulties and 19 students with severe learning disabilities in special day classes. The *School Safety and Climate Survey* (SSCS) consists of five parts used to evaluate multiple aspects of the students' experiences in relation to safety issues. The teachers administered the survey in the general education classes while the researchers administered the survey to the other three groups.

Using one-way analyses of variance, differences between groups on perceptions of safety were explored for each of the groups. Students in the opportunity and leadership class experienced and observed higher rates of school violence while the special day class students experienced more bullying than the other groups.

In the one study including students with attention deficit hyperactivity disorder (ADHD), Unnever and Cornell (2003) investigated the influence of bullying and victimization in the public middle schools in Roanoke, VA. During the fall of 2000, teachers administered an anonymous school survey, adapted from Olweus (1993) to 1,315 students. One hundred and eighty of those students were identified as having ADHD. However, because the survey was anonymous and confidential, students were identified as ADHD based on their response to the question, *Have you ever taken medication for being hyperactive?* Therefore, the measure could only be regarded as a likely indicator of ADHD.

The survey presented a definition of bullying and asked nine questions. The students were required to respond by choosing from the following: a) had not been bullied; b) had been bullied only once or twice; c) had been bullied 2 or 3 times a month; d) had been bullied about once a week; or e) had been bullied several times a week.

Results indicated that students with ADHD were at an increased risk for being victimized by bullies. Specifically, 34% of students who reported taking ADHD medication were victimized by bullies at least two or three times a month. In comparison, among the other middle school students, 22 % reported being victimized by bullies at the same rate.

A second set of questions worded similarly to the victimization questions investigated whether the students had engaged in bullying others. Approximately, 13 % of the ADHD students reported being bullies at least two or three times a month while 8% of the other middle school students reported bullying others at the same rate.

Results were analyzed with regression analysis on self-control, ADHD, and bullying. Students who reported taking medication for ADHD were both more likely to report being bullied and more likely to bully others. The impact of ADHD on being a victim of bullying (.13) was twice as large as the effect on being a bully (.06). In relation to self-control, the ADHD status was unrelated to bullying when controlling for self-control; therefore, it appeared that students with ADHD were more likely to engage in bullying due to a lack of self-control skills. In the discussion of their results, the authors suggested that students with ADHD suffer from poor peer status or have few friends which may make them more vulnerable to victimization. Likewise, they indicated that the poor social skills or inappropriate behavior of some students with ADHD could elicit aggressive responses from their schoolmates.

In the final study reviewed, O'Moore and Hillery (1989) examined the nature and incidence of bullying in primary schools in Dublin, Ireland. Seven hundred and eighty-three children between seven and 13 years of age completed a self-report questionnaire (Roland & Munthe, 1989) consisting of 14 questions about bullying or being bullied. Thirty-five of the students attended full-time special classes, 109 students attended some remedial classes, and 639 attended general education classes. Information on disability areas was not provided. The students were required to respond by choosing one of the following: a) no; b) once or twice; c) sometimes; d) once a week; e) more than once a week; or f) every day. For purposes of analysis, *once or twice* and *sometimes* were classified as occasional bullying, whereas *once a week*, *more than once a week* and *everyday* were considered frequent bullying.

Results indicated that students attending remedial classes or full-time special classes were particularly prone to frequent bullying. Of the 109 students attending remedial classes, 67.9% reported that they had been bullied at school, while 62.1% of the 639 general education students reported being bullied at school. The highest percentage of victims being bullied at school was 77.2% of the 35 students attending special classes.

In addition, 54.3% of students in the special classes reported bullying others. Of the students attending remedial classes, 45.9% reported that they bullied others. In comparison, of the students who attended general education classes, 44.5% reported bullying others.

The overall finding of this study revealed that 17.5% of the remedial students and 14.3% of the special class students were frequently bullied. These figures were twice as high as those reported for non-remedial children. Although the findings in the present study revealed that students with disabilities are bullied more frequently than students without disabilities and engages in bullying behaviors more often than their non-disabled peers, the authors did not conduct any sociometric measures that would further explain their results.

Summary & Conclusions

Seven research studies were identified that included students with non-visible disabilities. Five of the studies incorporated the use of interviews, rating scales, or questionnaires while two of the studies used surveys (Morrison & Furlong, 1994; Unnever & Cornell, 2003) to examine the issues of bullying. Based on the results of sociometric measures, Nabuzoka and Smith (1993) reported that girls were more at risk than boys for being victims of bullying and having problems decoding social situations. Martlew and Hodson (1991), Nabuzoka and Smith, and Sabornie (1994) all indicated that students with LD had fewer friends than their non-LD peers, while Unnever and Cornell, whose study included students with ADHD, reported similar findings. Collectively, these seven studies found that students with visible disabilities were bullied more than their non-disabled peers.

This review provided an updated synthesis on research addressing bullying and students with disabilities. The studies used either quantitative or qualitative research designs. In addition, the subjects responded to bullying behavior that occurred in either public or private school settings.

The studies were discussed within two specific areas: students with visible disabilities and students with disabilities that are not visible. Studies were included in this synthesis if the primary purpose was to examine bullying among school-age students with disabilities. Eleven studies were identified during the period from 1989 to 2003. Four studies included students with visible disabilities, and seven studies included students with non-visible disabilities. The visible disabilities were identified as cerebral palsy, muscular dystrophy, marked coordination disorders, poliomyelitis, spina bifida, Erb's palsy, hemiplegia, Friedrich's ataxia, and stuttering. The study involving students with stuttering was determined to be a visible disability because there is an overt quality to stuttering that immediately identifies the student as having a disability and the study's authors regarded stuttering to be an external difference. The non-visible disabilities were identified as learning disabilities (LD), Attention deficit hyperactivity disorder (ADHD), or at-risk with behavioral and/or academic difficulties. The students with disabilities received their education in a range of settings: resource or remedial classrooms, full-time special education classrooms, and inclusive, general education classrooms.

Results from the eleven studies indicated students with disabilities, both visible and non-visible, experienced bullying more than their general education peers. For those studies reporting statistical findings, results indicated that the frequency with which students with disabilities were being bullied was statistically significant compared to students without disabilities. The majority of studies that conducted gender analysis revealed that boys were bullied more often than girls (Dawkins, 1996; O'Moore & Hillery (1989). The exception was Nabuzoka and Smith (1993), who found that girls with LD were more at risk for being bullied than boys with LD. The

authors suggested that because fewer girls tend to be diagnosed with disabilities, those who were might be regarded as particularly different from their peers, thus, inviting victimization.

The nature of the bullying took several forms that included name-calling, teasing, physical attacks, severe verbal bullying, verbal aggression, threats, taking belongings, imitating, and making fun of the students with disabilities. Dawkins (1996) identified name-calling as the most common form of bullying. Research shows that name-calling can be one of the most distressing teasing behaviors that children must cope with, and adults often underestimate its damaging effects (Besag, 1991).

Furthermore, Dawkins (1996) identified four factors that were predictive of students with physical disabilities being bullied: receiving extra help in school, being alone at playtime, having fewer than two good friends, and being male. The author concluded that since having a disability increased the student's likelihood of attending special classes or requiring extra help in school, these elements may increase a student's chance of being bullied. Likewise, Martlew and Hodson (1991) investigated social integration issues of students with mild learning disabilities. These authors also found that students with MLD had fewer friends. Interestingly, Nabuzoka (2003) found that peers of students with LD associated being a victim of bullying with shyness or help-seeking behaviors. Sociometric results from Sabournie (1994) indicated that students with LD differed significantly from their general education peers with regard to loneliness. Consistent with these studies, Nabuzoka and Smith (1993) found that students with LD were less popular and more rejected than those students without LD. Similarly, in regard to students with a visible disability (hemiplegia), Yude et al. (1998) found that these students had fewer reciprocated friendships than their non-disabled peers.

Evidence shows that some students become both a victim and a bully. Ross (2003) refers to these students as bully-victims. In 1989, Stephenson and Smith confirmed a finding previously reported by Olweus (1985) that 6% of victims become bullies (Ross). It is theorized, but still unclear if this group of students becomes bullies to retaliate against being bullied (Ross). Three of the studies included in this review addressed students with disabilities being bullies. O'Moore and Hillery (1989) found that while students attending remedial and special classes were more likely to be bullied than non-remedial students, a higher percentage (54.3%) of students in the special classes bullied others compared to the students in the remedial and general education classes. In contrast, Yude et al. (1998) found that both teachers and peers indicated that the students with hemiplegia bullied others less frequently than their classmates.

While investigating the influences of ADHD on bullying, Unnever and Cornell (2003) found that students with ADHD were at an increased risk for being victimized and for victimizing others. Results suggested that students with ADHD were more likely to engage in bullying because of their low self-control. Interestingly, results of the regression analysis showed that students who reported taking medication for ADHD were not more likely to bully other students. Thus, what is the link between self-control, medication, and bullying? These results indicate that further research is needed to explore the relationship between these variables.

With only three studies investigating students with disabilities bullying other students, results are mixed. It appears that having a disability may place students at an increased risk to engage in

bullying behaviors. Some of the characteristics of students with disabilities, such as low self-control, poor social skills, and less language facility, may increase the possibility of these students resorting to bullying others.

Interestingly, there appeared to be a lack of correlation between peer and teacher assessments of the behavior of students with disabilities. With only two studies examining this relationship, Nabuzoka and Smith (1993) and Nabuzoka (2003) suggested that this difference reflected the variation in the abilities of students with LD to decode across different social situations. Teachers primarily observe students with LD in classroom settings that are more structured with social roles more clearly defined; whereas, peers observe students with LD in more unstructured situations that may be more difficult for students with LD to decode. Therefore, teacher assessments alone are inadequate to assess the behavior of students with LD.

Clearly, more research is needed to examine the relationship between students with disabilities and bullying. While the study of bullying is beneficial to all school populations, bullying places students with disabilities at an increased disadvantage because of the existing academic difficulties that are inherent with most disabilities. More research is needed to understand the academic and psychological impact bullying has on students with disabilities.

Implications for Future Research

One major consideration in examining the issue of bullying is the variation of the definition. The way in which the authors of the studies defined the nature, frequency, and duration of bullying impacted the outcomes of the studies. In regard to data collection, self-report surveys, questionnaires, and interviews are susceptible to errors and biases in participant responses.

It is certainly possible that students and teachers may have under-reported or over-reported information on bullying. Finally, with a limited number of studies available for review, caution has to be taken in generalizing results.

Because bullying has become a problem of international significance, it is imperative to continue this line of research on bullying and students with disabilities. Issues such as long-term effects, high-risk factors, age-related frequency patterns, awareness, prevention, and intervention are critical in providing the safe environment that all students need in order to learn. Examining the lack of correlation between teacher and peer assessments of the behavior of students with disabilities may provide fruitful results in understanding victimization. Why bullying remains an enduring problem is a question that continues to engender serious, important debate and mandates further examination.

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