



Children Diagnosed with Disabilities as Victims of Bullying

Kristina Manzanillo, MacEwan University

Introduction

What does it mean to bully, or to be bullied? The act of bullying is one that involves a single, or a group of individuals, abusing another individual, whether it be physically, or mentally, in a manner that causes them any form of harm. This is typically fulfilled in order for the perpetrator to establish an imbalance of power between themselves and their victim (Haegele, 2020). Bullying is a severe and detrimental issue that has significantly increased over the years, especially amongst children. It has become a product of multiple variables including parents' or guardians' leniency or neglect towards an emphasis on teaching and modeling for their children how to treat others, the growing dominance of the media at younger ages, the uncontrolled school settings which then result in inappropriate punishment for bullies, and so many more. The effects of bullying are correlated to higher rates of depression and suicide ideation, lower academic achievement, lower social involvement, and higher involvement in violent behaviours (Bear, 2015). Essentially, bullying potentiates as a determinant in a victim's life.

Amongst the bullying that occurs between children, there is a particular marginalization and increased victimization of children with disabilities (Wood, 2021). When a child is diagnosed with a disability they are already involuntarily given a development process full of obstacles to overcome that are typically more challenging than those encountered by a child without a disability. A significant component to their learning process is attaining the extensive help of adult figures and caregivers. Becoming a victim of bullying is something that can detrimentally alter their learning process altogether. These children are more vulnerable to molding to fit these negative connotations that are being expressed about themselves. As well as the fragility of their learning and communication skills can result in them eventually treating others like this as this is what they have now learned and adapted to (Haegele, 2020). Furthermore, bullying can lead to the furthering of health issues experienced by the child as the bullying emphasizes physiological and mental issues that are associated with or attained due to the disability (Haegele, 2020).

As children do spend the majority of their time on school grounds, it is imperative that this remains a safe place in which all children feel comfortable going and learning over many years. This should also be regardless of whether a child has a disability or not as everyone should feel welcomed and accepted, without having to worry if they are going to be abused for something that is completely out of their control. In order to continue to create this environment, it requires figures

of authority fulfilling their responsibilities in educating children on how to appropriately treat others. This begins at a child's home from a young age, as parents are growing to be more lenient and so children are learning from this and their friends to behave this way. This causes children to start school already with the improper notion of how to conduct themselves. Then there is the school environment where many teachers or adults that are a part of administration have become more permissive in their allowances and punishments as well, and so children do not take what they are doing as seriously, as they do not fear the repercussions.

Throughout this paper, I will discuss the immediacy and steps required behind putting a stop to bullying amongst children, especially towards children with disabilities, before it gets to an irreversible point in their life. As well as the significance of the negative effects that bullying has on a child's life and how it has become an increasingly prominent factor in today's society. Through these depictions I will aim to establish the necessity behind increasing education in schools and at home about disabilities at a young age and how that will positively affect the societal systems that children are exposed to throughout their developing years.

Literature Review

Within schools, there has been research demonstrating an investigation into the tactics of bullying, which show that the perpetrators are motivated to perform these abusive actions due to the victims' straying from what others have encountered, thus far, as 'normal' beings (Liasidou, 2021). These verbal and physical tactics are to assert the perpetrator's dominance of being a member of the 'normal' individuals and to expose any stereotypical signs the victim may exhibit of being different from the majority (Liasidou, 2021). This poses as the reasoning behind children with disabilities tending to be marginalized, as it is typically those in which their disability can be physically seen or heard, which causes these children to be a significant majority amongst the victims (Liasidou, 2021).

In a study completed by Liasidou (2021), the systemic and systematic development of bullying in schools focused on core principles that have become prominent in education systems. These principles are based on the idea that in school, children learn normalities and absorb these normalities quicker than other types of knowledge (Liasidou, 2021). When children are exposed to normalities without having the proper knowledge of understanding the ways in which it is all interconnected, anything or anyone that does not appear to categorize within these normalities then becomes different (Liasidou, 2021). This is where we see terms such as racism, stereotyping, and bullying all stemming from as they are all processes that involve having resentment towards those that differ from the normalities we are taught (Liasidou, 2021). From this study the evidence suggests that children with disabilities who either were asked, or their caregivers were asked later on, as to what type of bullying they experienced the most throughout their schooling. Verbal was the most distinct (Liasidou, 2021). These children consistently heard their peer's voice their aggressive concerns and criticisms as to why and how these children had these disabilities and how they did not belong (Liasidou, 2021). This study provided crucial evidence for the immediate necessity of changes to be made within the school systems that will be further discussed.

Another area of life where children spend a significant amount of their time is in

extracurricular activities. In a study carried out by Haegele (2020), the effects of children with disabilities participating in extracurricular activities in correlation to bullying victimization rates were investigated. This study initiated with the common perspective that extracurricular activities potentiate both positive and negative effects for children (Haegele, 2020). On a positive spectrum, they provide further social gatherings for children where they can build social skills, while also enjoying developing their skills in the activity they are participating in. On the negative side to this spectrum, for the children who are unable to gain these social relationships, it can be another area of their life where they feel ostracized and are then potentially bullied for again standing out from the majority of the group. These contrasting ends of the spectrum are what leave a fluctuating result in determining whether or not they are an advantage or disadvantage for children with disabilities (Haegele, 2020).

From this current study the results indicated that although varying perspectives were expressed, the overall rates of bullying indicated that children with disabilities that participated in extracurricular activities experienced higher levels of victimization rates than those that did not (Haegele, 2020). This was due to similar reasons as were reflected within bullying in schools as victims were singled out for their physical differences, both appearance-wise and skill abilities (Haegele, 2020). Although some children did have the opportunity to experience the positive aspects of extracurricular activities, unfortunately, the majority of children with disabilities did not. Overall, there are simply always going to be various reasons as to why perpetrators pursue these actions, however, similar to school grounds, this is an area that requires further adult control in order to reinstate a safe and welcoming space for all children, with or without disabilities.

As we have established the key areas in which children with disabilities are experiencing bullying, Mulvey (2020), conducted a study that focused on the effects of bullying on the child's cognition. The significantly negative effects that bullying has on cognition, stems from the concept of expectations (Mulvey, 2020). This meaning, the expectations that a child has or is taught about what they will receive at school, which for most children, is friends or a group of people to interact with (Mulvey, 2020). For children with disabilities, it is the devastation of being isolated and left with no social interactions that causes the deterioration of their cognitive capacities the most (Mulvey, 2020). Being ostracized at such a young age causes the child to have increasingly low self-esteem, which leads to higher rates of depression among these children (Mulvey, 2020). This study also found evidence which supported that children in preschool were especially likely to exclude a child with disabilities if their disability interfered with the activity they were doing; for example, if they were playing soccer and the child was in a wheelchair (Mulvey, 2020). This leads to the responsibility of the leaders in these scenarios to provide opportunities in which the activities being participated in are equally accessible for all children so that both children with disabilities and without, are able to interact and build relationships with each other.

The differences in bullying between children with and without disabilities were investigated in a study by Bear (2015). This study brought to light that although children with disabilities did uphold the highest victimization rates overall, there were still varying differences among them (Bear, 2015). The findings indicated that the greatest variabilities were due to one of three main reasons; the type of disability and the characteristics of that disability, how the bullying was being measured, and the type of bullying that was received (Bear, 2015). As these tend to be factors of perspective, when the children were asked, their responses differed typically based on

their acknowledgment of truly how harshly and frequently they were being bullied (Bear, 2015). The characteristics of these students were also gathered to establish the differences in disabilities that were being targeted (Bear, 2015). The results indicated a high prevalence of children diagnosed with Autism Spectrum Disorder (ASD) as victims of bullying, typically due to their inability to interact as easily with the children without disabilities (Bear, 2015).

Another disability among children that has seen an increasing amount of victimization rates is those with Attention-Deficit/Hyperactivity Disorder (ADHD). Due to the characteristics that are typically associated with ADHD, children are then faced with challenges academically, socially, emotionally, and adaptively (Taylor, 2020). When their social challenges are expressed in front of their peers, it then becomes the leading cause of them being ostracized or bullied as the other children are unaware of what this diagnosis means for the child, and so they become perpetrators of singling out these children for their ‘abnormalities’ (Taylor, 2020). In this study by Taylor (2020), a correlation was made between children with ADHD becoming victimized and parental stress and knowledge. The findings indicated that the more knowledgeable and stress-free a parent was in relation to their child with ADHD, the less the child experienced bullying, in comparison to the children whose parents were stressed and not as knowledgeable on the disability (Taylor, 2020). This was due to multiple reasons, some of which were that the child overall experienced better health outcomes, as well as higher social and academic functioning, which allowed them to be able to ‘fit in’ with their peers (Taylor, 2020). This study demonstrated the significant roles that parents also do have in their child’s outcomes as they rely on these shared efforts in order to improve their conditions.

From the challenges children with disabilities face in regards to feeling ostracized and being bullied there have been a variety of methods created in order to try and decline and prevent these instances. Among the victims, a key factor that overall seemed to help them cope as well as limit their victimizations was support (Wood, 2021). This included support from their peers, specifically those that accepted them and gave them a sense of belonging, from their teachers and caregivers, and lastly from their parents and families (Wood, 2021). These children however preferred the support from their peers as at certain ages receiving public support from adult figures still gave themselves and others the perception that they did require this ‘special’ treatment (Wood, 2021). With the support that some of these children received, they felt as though they were victimized less as they now had these social connections, as well as the motivation to improve their functioning and participate in all the same activities (Wood, 2021). From the evidence gathered in Wood’s (2021) study, the overarching sense of support posed as a dominant contrast to being bullied for these children, providing a chance for them to avoid victimization and continue a lifestyle focused on equality and positivity.

Along with general support from surrounding people, there have been specific intervention programs created to assist both children with disabilities in coping and learning, as well as to educate those without disabilities on what these diagnoses mean and how they can assist these people. In a study carried out by Rex (2018), an intervention program was demonstrated that focused on children diagnosed with ASD becoming familiar with the act of bullying and how to respond if victimized by it. The results found this method successful as those who were exposed to bullying by watching it through these videos, were able to better cope with it when they had experienced it themselves (Rex, 2018). There have also been several school-wide anti-bullying

campaigns and intervention programs that require all students and educators to participate in, which help spread awareness to these issues in hopes of rendering children from initiating these harmful actions as they are previously exposed to the negative effects that they have on the lives of the individuals that are being bullied (Rex, 2018). In order to strive towards decreasing bullying in general, but across children specifically, it is imperative for everyone to contribute their support and time to spreading awareness and being accountable for their position in each situation that they encounter.

Conclusion

In summary, the marginalization of children with disabilities and their high prevalence rates among victims of bullying is a severe issue that requires everyone's input in order to begin its decline. As children encounter many public places throughout their development, the authority figures within these places, which include parents, teachers, and caregivers, are responsible for ensuring a safe and welcoming environment, where all children with and without disabilities, can be present. This has the potential to be maintained through higher education and awareness of disabilities, which can involve intervention programs and research, which allow adults to then spread this awareness to their own children and to others. The more knowledgeable each individual is on disabilities, and from a young age, the better prepared they are on how to treat each individual and understand and appreciate their differences. As for the bullying aspect, even further than teaching your child or your students on how to treat others, the methods that were previously demonstrated on exposing children to bullying at a young age during their schooling can have a positive effect on differing them from becoming a perpetrator, as well as encouraging others not to as they can evidently see the negative effects that it does have on the victims. Just like children without disabilities, children with disabilities rely on the support of everyone that surrounds them in order to develop in all areas of their life.

References

- Bear, G. G., Mantz, L. S., Glutting, J. J., Chunyan Yang, Boyer, D. E., & Suldo, S. (2015). Differences in Bullying Victimization Between Students With and Without Disabilities. *School Psychology Review*, 44(1), 98–116. <https://doi.org/10.17105/SPR44-1.98-116>
- Haegele, J. A., Aigner, C., & Healy, S. (2020). Extracurricular Activities and Bullying Among Children and Adolescents with Disabilities. *Maternal & Child Health Journal*, 24(3), 310–318. <https://doi.org/10.1007/s10995-019-02866-6>
- Liasidou, A., & Ioannidou, E. (2021). Disability-related bullying and its discursive formations and enactments in the social ecology of schooling. *Discourse: Studies in the Cultural Politics of Education*, 42(4), 499–512. <https://doi.org/10.1080/01596306.2020.1711514>
- Mulvey, K. L., McMillian, L., Irvin, M. J., & Carlson, R. G. (2020). Youth Cognition Surrounding Bullying of Peers with Disabilities: Inclusion, Intervention, and the Role of the Group. *Journal of Emotional and Behavioral Disorders*, 28(1), 17–28.
- Rex, C., Charlop, M. H., & Spector, V. (2018). Using Video Modeling as an Anti-bullying Intervention for Children with Autism Spectrum Disorder. *Journal of Autism & Developmental Disorders*, 48(8), 2701–2713. <https://doi.org/10.1007/s10803-018-3527-8>
- Taylor, L. A., Climie, E. A., & Yue, M. W.-Y. (2020). The role of parental stress and knowledge of condition on incidences of bullying and ostracism among children with ADHD. *Children's Health Care*, 49(1), 20–39. <https://doi.org/10.1080/02739615.2018.1545580>
- Wood, C., & Orpinas, P. (2021). Victimization of children with disabilities: coping strategies and protective factors. *Disability & Society*, 36(9), 1469–1488. <https://doi.org/10.1080/09687599.2020.1802578>