



# PREVENTING SUICIDE

## A Toolkit for High Schools



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## Tool 1.G: Suicide and Bullying Information Sheet

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Bullying is the ongoing physical or emotional victimization of a person by another person or group of people. Cyberbullying is an emerging problem in which people use new communication technologies, such as social media and texting, to harass and cause emotional harm to their victims.

Thirty-two percent of the Nation's students (ages 12–18) reported being bullied during the 2007–2008 school year (Dinkes, Kemp, & Baum, 2009). Lesbian, gay, bisexual, and transgender (LGBT) youth experience more bullying (including physical violence and injury) at school than their heterosexual peers (Garofalo, Wolf, & Kessel, 1998; Bontempo & D'Augelli, 2002; Berlan, Corliss, Field, Goodman, & Austin, 2010).

Both victims and perpetrators of bullying are at higher risk of suicide than their peers. Children who are *both* victims and perpetrators of bullying are at highest risk (Kim and Leventhal, 2008; Hay and Meldrum, 2010; Kaminski and Fang, 2009).

Young people who are the victims of bullying are at increased risk for suicide (Kim, Leventhal, Koh, & Boyce, 2009) as well as increased risk for depression and other problems associated with suicide (Gini and Pozzoli, 2009; Fekkes, Pipers, and Verloove-Vanhorcik, 2004).

Many children who are bullied have personal characteristics that increase their risk of victimization (Arseneault, Bowes, & Shakoor, 2010). These characteristics include:

- Internalizing problems (including withdrawal, anxiety, and depression)
- Low self-esteem
- Low assertiveness
- Aggressiveness in early childhood (which can lead to rejection by peers and social isolation)

Many of these characteristics are also risk factors for suicidal behavior and ideation. The authors of the study cited above suggest that the same personal risk factors that can contribute to a child's risk of suicidal behavior can also increase the child's risk of being bullied. Being bullied further heightens the child's risk for suicide (as well as for anxiety, depression, and other problems associated with suicidal behavior). These personal risk factors do not cause bullying, but they act in combination with other risk factors associated with:

- The family, including child maltreatment, domestic violence, and parental depression (Arseneault, Bowes, & Shakoor, 2010)
- The school environment, including a lack of adequate adult supervision (which can be a result of the physical layout of a school), a school climate characterized by conflict, a lack of consistent and effective discipline (Swearer, Espelage, Vaillancourt, & Hymel, 2010), and school size (Bowes, Arseneault, Maughan, Taylor, Caspi, & Moffitt, 2009)

The effects of bullying (especially chronic bullying) on suicidal behavior and mental health are long term and may persist into adulthood (Arseneault, Bowes, and Shakoor, 2010).

### **Implications for Prevention**

Although there is little research on this issue, it would seem that the three areas in which prevention strategies could affect both bullying and suicide are 1) the school environment, 2) family outreach, and 3) identifying and providing appropriate services to students with personal characteristics that increase their risk of being bullied, bullying others, or suicidal behavior. At the same time, attempts to find and use overarching prevention strategies should not ignore the need for interventions that specifically target each problem.

For additional information and resources, see the following:

- StopBullying.gov at <http://www.stopbullying.gov/>
- Stop Bullying Now at [http://www.ask.hrsa.gov/results\\_materials.cfm?type=stopbully](http://www.ask.hrsa.gov/results_materials.cfm?type=stopbully)

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