Targeted Bullying Intervention Strategies Needed Urgently For Young Children with Disabilities in the United States

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Overview

There were high rates of peer victimization and co-occurrence between different types of peer victimization among young children with disabilities. One-quarter to one-third of preschool and kindergarten children with disabilities experienced some form of peer victimization in school. Peer victimization increased over the 2003-2006 period (21% in Year 1, 25% in Year 2, 30% in Year 3). These results suggest the urgent need to provide bullying prevention and intervention strategies for children with disabilities—strategies that have been previously neglected in the context of school-based bullying prevention and intervention programs.

Peer victimization is increasingly recognized as a serious social problem that can negatively affect children’s psychosocial adjustment and academic performance in school. Although the prevalence of bullying in school-age children and adolescents has been investigated, the rates of peer victimization among preschool and kindergarten children with disabilities are unknown.

Research on bullying in young children is important because most children experience their first extended peer interactions in preschool and kindergarten. These years are a formative time for the development of peer relationships, and being victimized in kindergarten may lead to school avoidance and even to a continuous victimization cycle.

This Lurie Institute for Disability Policy Brief reports findings from an analysis of data from the Pre-Elementary Education Longitudinal Study (PEELS). We examined the prevalence and nature of peer victimization among children with disabilities in school settings (N = 1,270).

Findings

High rates of peer victimization

- The prevalence of peer victimization increased substantially over time, from 21% in Year 1 to 25% in Year 2 to 30% in Year 3.
- In Year 1 the most frequently-occurring type was relational victimization. In Years 2 and 3 the most common type was verbal victimization.
- The prevalence of peer victimization increased for each cohort of children over the three years (2006-2009). Age cohort C (age at entry into PEELS: 5 years old), which was the oldest cohort, had the highest peer victimization rate in all three years.
- Most children with disabilities who experienced any victimization experienced only one type of peer victimization. However, the prevalence of multiple types of peer victimization also increased over time.
Substantial rates of co-occurrence among each type of peer victimization

- The rates of co-occurring types of victimization increased across all types (i.e., physical and verbal, physical and relational, and relational and verbal) at Year 2 and were also statistically significant ($p < .001$). At Year 3, the rates of co-occurring physical and verbal victimization and co-occurring relational and verbal victimization increased; however, the rate of co-occurring physical and relational victimization was stable over time.
- Overall, the greatest rates of increases in co-occurring types of peer victimization were relational and verbal (i.e., from 5% to 10%).

Summary & Recommendations

The findings provide clear evidence that substantial rates of peer victimization and co-occurrence among each type of peer victimization occur among children with disabilities, even at a very young age, and this victimization tends to increase over time. Although proactive school-wide interventions incorporating empirically-based bullying prevention programs have been created and utilized by schools, these programs rarely address interventions for individualized subgroups of students, including children with disabilities. To address this gap in service provision, policymakers should:

- Increase awareness of the existence of peer victimization among young children with disabilities;
- Inform early childhood service providers and schools about the importance of early identification of peer victimization among young children with disabilities to reduce the negative effects of early childhood peer victimization and prevent lasting effects for victims;
- Encourage early childhood service providers and schools to consider targeted prevention and intervention programs for young children with disabilities who are at greater risk for victimization than their nondisabled peers;
- Promote mental health services for young children with disabilities as early interventions intended to improve young children’s mental health.

Further research should examine whether there is any difference in peer victimization among young children with disabilities by disability type and which risk and protective factors are related to peer victimization of young children with disabilities to provide a more tailored prevention and intervention programs for young children with disabilities.

Authors and Acknowledgements

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References


