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PSYCHOLOGICAL FIRST AID FOR ADOLESCENCE VICTIM OF BULLYING

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REVIEW **OPEN ACCESS**

ABSTRACT

Introduction – One of the most common forms of physical and emotional violence found in children and adolescents is bullying. Bullying is a global problem that can be a serious threat to the physical and emotional health of children and adolescents. PFA is the first line of psychological support that can be given to people who are experiencing a crisis, including victims of bullying. It is hoped that this knowledge related to PFA can be a solution in helping to overcome the problem of bullying in adolescents.
Methods – Researchers employed the literature review method in this study, collecting different literature from 2011 to 2021 that explores bullying, psychological first aid, and psychological first aid for adolescent victims of bullying.
Results – Trauma from bullying has been reported to be associated with chronic and severe psychiatric pathology, including mood and anxiety disorders, post-traumatic stress disorder (PTSD), alcohol and drug abuse, and personality disorders. In addition, the most feared consequence to bullying is its significant association with suicidal tendencies.
Discuss – The PFA training or orientation takes place throughout between a half or a full day course, and explains the basic concepts and principles of PFA, such as how to approach situations safely, how to support very distressed people, and how not to cause further harm. PFA training uses participatory learning methods such as role playing
Conclusion – Psychological first aid is one of the protections that can be provided with the aim of helping the victim to recover after the bullying incident. PFA can be carried out by non-mental health professionals, parents, and school personnel, especially teachers and/or school nurses, therefore, they are expected to take part in PFA training.

Keywords: psychological first aid, bullying, adolescence.

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INTRODUCTION

One of the most common forms of physical and emotional violence found in children and adolescents is bullying.[1] Bullying is a global problem that can be a serious threat to the physical and emotional health of children and adolescents.[2] Based on data from the UNESCO Institute for Statistics (UIS), it is reported that almost one-third of adolescents worldwide experience bullying. The data obtained shows that bullying affects adolescents in all regions and countries with different income levels.[3]

Indonesia is one of the countries with a high incidence of bullying in adolescents. From a study by the Program for International Student Assessment (PISA) in 2018, it was reported that 41% of 15-year-old students had experienced bullying. Meanwhile, in another study conducted on Indonesian adolescents aged 14-24 years, it was found that 45% of the 2,777 adolescents studied stated that they had experienced cyberbullying.[4] Based on the results of a survey conducted by the Indonesian Ministry of Social Affairs in 2013, it was reported that bullying was experienced by one in two male adolescents (47.45%) and one in three female adolescents (35.05%).[1]

The problem of bullying is currently a concern because it can significantly affect the quality of life of children and adolescents and also has long-term implications for the adaptation process when they are adults[2]. Violence among adolescents, including bullying, is associated with an increased risk of future psychiatric disorders, poor social functioning, and poor educational outcomes. It is also reported that 40% of suicide cases in children in Indonesia are related to bullying.[4] Therefore, various efforts have been made to prevent and overcome the phenomenon of bullying, especially in Indonesia. These efforts certainly involve various parties, ranging from parents and schools to health workers and also the government as policymakers. Including in the form of a

school program or in the form of a workshop to increase awareness of bullying.

Psychological First Aid (PFA) is described as a humane and supportive response to fellow human beings who are suffering or need support. PFA is the first line of psychological support that can be given to people who are experiencing a crisis, including victims of bullying. PFA is important for the public to know about because PFA itself is not something that can only be done by experts and professionals.[5] It is hoped that this knowledge related to PFA can be a solution in helping to overcome the problem of bullying in adolescents.

METHOD

The author employed the literature review method in this study, collecting different kinds of literature from 2011 to 2021 that explore bullying, psychological first aid, and psychological first aid for adolescent victims of bullying.

RESULT

Bullying

The definition of bullying was first recognized and researched by a Norwegian professor of psychology, Dr. Dan Olweus, in 1970. Bullying is defined as someone who repeatedly and intentionally says or does things that are experienced by other people who have difficulty defending themselves.[6] While bullying in adolescents by the Center for Disease Control and Prevention (CDC) is defined as any repetitive violent behavior desired by adolescents or other groups of adolescents who are not siblings or partners, which involves an observed or perceived imbalance of power and is repeated several times or very likely.[7]

Bullying generally involves three different groups of teenagers, namely the perpetrator (bullies), target (victims), and witnesses (bystanders). Bullies interfere with someone with social and/or physical strength who repeatedly chooses another person or group of people with the intent to cause harm or a sense of discomfort. Bullies don't randomly attack their victims, instead, they target specific subgroups of people who have been victims for some time. A bystander is someone who observes bullying; as witnesses, they may be able to see, support bullying, or defend the victim.[2]

There are several modes and types of bullying. The mode of bullying can be direct or indirect. Direct bullying is an act of violence that occurs in front of teenagers who are the target of the perpetrator. Examples include push or in written or verbal communications that harm the target. In contrast to indirect bullying, it is in the form of aggressive behavior that is not communicated directly to the target. Some examples are spreading false and/or harmful rumors, or spreading harmful rumors electronically.[7]

Meanwhile, based on the type, the CDC divides the type of bullying into four types, including physical, verbal, relational, and damage to property.[7]

- Physical bullying characterized by the use of physical force by the perpetrator against another teenager who is the target. Examples include hitting, kicking, spitting, or pushing.
- Verbal bullying is characterized by verbal or written communication by the perpetrator causing harm to the target. Examples include threatening handwriting or comments, inappropriate comments, or verbal threats.
- Relationship bullying is characterized by behavior by the perpetrator designed to damage the reputation and relationships of the target. Direct relational bullying such as attempts to isolate the targeted teen by keeping the target from interacting with their peers or ignoring them. While indirect relational bullying is like spreading harm and/or false rumors, writing derogatory comments in public, or posting embarrassing images in physical or electronic spaces without the consent or knowledge of the target.
- Damage to property bullying is characterized by the theft, alteration, or destruction of the property of the target that causes harm. Examples are taking personal property and refusing to return it, destroying target property in their presence, or deleting personal electronic information.

Some signs that need to be aware, as the appearance of adolescent being victims of bullying is injury or illness without a physical explanation, missing or damaged items (such as books or clothes), frequent somatic symptoms (changes in habits, and/or sleep difficulty, having nightmares), adolescents avoid school or social situations, have feelings of helplessness or self-worth, and have a tendency to lower themselves or express suicidal intentions.[8]

Bullying has a detrimental effect not only on victims but also on bullies and bystanders.[2,9] The impact can be in the form of physical and psychological trauma; from intrapersonal to interpersonal; and from short to long term. Bullies are at risk of having low empathy for others, so they are not sensitive to bullying and make bullying a part of their normal life. They enjoy the satisfaction of aggressive behavior more than academic activities and so are more likely to drop out of school and engage in gangs, delinquency, and antisocial behavior. They may have difficulty maintaining intimate and healthy interpersonal relationships and maintaining a home, and they may be an abusive partner or parent. Long-term effects that may occur can also be an increased risk of depression and suicide.[2]

For victims of bullying, it can have wide-ranging effects that can last into adulthood and interfere with emotional, mental, psychological, physical, social, and academic functions. Trauma from bullying has been reported to be associated with chronic and severe psychiatric pathology, including mood and anxiety disorders, post-traumatic stress disorder (PTSD), alcohol and drug abuse, and personality disorders. In addition, the most feared sequel to bullying is its significant association with suicidal tendencies.[9,10]

Bystanders can also experience the negative impact of bullying. Students who observe acts of bullying feel helpless, restless, and depressed. They often harbor feelings of guilt for not helping the victim, anger at themselves and the perpetrator, and fear of being the next target. They may also feel insecure at school and be negligent in class because their attention is directed to avoiding bullying behavior. These effects can carry over into adulthood in the form of a sense of inability to solve explicit problems, a distorted view of personal responsibility, desensitization to antisocial behavior, and diffusion of limits on acceptable behavior.[2]

DISCUSS

Psychological First Aid

The concept of "psychological first aid" was first introduced in the mid-20th century, precisely after the events of 9/11, as an initial psychological intervention for survivors of disasters and extreme events. Dating from the 2001 National Institute of Mental Health Conference on mass violence. PFA is now seen as an alternative to psychological debriefing and is the recommended rapid psychosocial response during emergencies. Psychological first aid has been widely introduced and supported by disaster mental health experts in reports from many convention conferences and the peer-reviewed disaster health behavior literature. Psychological first aid is also recommended in international treatment guidelines for post-traumatic stress disorder (PTSD) and as an early warning for disaster survivors.[11,12]

Psychological First Aid (PFA) is described as a humane, supportive, and practical response given to a fellow human being who is suffering or in need of immediate support after encountering a serious stressor. PFA can be studied by the general public, as well as volunteers who are not mental health professionals.[12,13] Although it is not used as a long-term solution, this method of treatment is very useful and timely during an emergency.[14] According to the Australian Psychological Society, PFA's important goal is to build a person's capacity to recover. PFA supports recovery by helping victims to identify their needs, as well as their strengths and abilities to meet those needs.[15]

Based on research on risk and resilience, field experience, and expert agreement, there are five basic elements to psychosocial support. These elements promote a psychological first aid approach. These elements must be kept in mind when providing PFA. Elements of psychosocial support are: ensure safety, promote calm, promote connectedness, promote self-efficacy and group efficacy, and instill hope.[15]

According to WHO in Psychological First Aid: Guide for field workers, PFA has three principles that must be considered, namely Look, Listen and Link. Look, Listen, and Link can be interpreted as helping and directing to see and enter the crisis area safely, approach affected people and understand them, and connect them with the help and information they need.[5]

PFA training is conducted in various high-income countries around the world and in humanitarian and disaster contexts in developing countries. The PFA training or orientation takes place for between a half or a full day and explains the basic concepts and principles of PFA, such as how to approach situations safely, how to support very distressed people, and how not to cause further harm. PFA training uses participatory learning methods such as role playing.[16]

Psychological First Aid For Adolescence Victim of Bullying

Children and adolescents who are victims of bullying certainly need physical, social, and emotional protection. Protection can be provided by the closest people who are well known to the victim, such as parents, extended family, and/or teachers. These people can provide first aid so the victim can feel safe, calm, hopeful, and connected to others. If the victim has good physical, social, and emotional support, the victim has started the first step in the recovery process after the bullying incident.[5,17]

Some things that can be done for victims of bullying: (a) Make sure the victim is in a calm and non-threatening environment. Keep the victim away from locations, sounds, smells, and conditions that are similar to the scene. (b) Let the victim do whatever they want; don't pressure them to talk. (c.) Help the victim to manage the physical reactions that arise after the incident, such as restlessness, rapid breathing, tension, etc.[18]

Adolescents spend a lot of time at school, therefore, schools have an important role in providing first aid to students who are victims of bullying.[18] There are several PFA models; Listen-Protect-Connect is one of them. PFA-LPC is a school-based PFA program carried out by non-mental health professionals. The purpose is to provide information, education, comfort, and support to students who have experienced trauma, in this case, victims of bullying. PFA-LPC's main goal is to stabilize the victim's emotions after the incident.[19]

Before the teachers or other educational staff perform PFA-LPC in three steps, they must be sensitive to student conditions. The teacher should observe changes in students, such as changes in school achievement, mood and/or behavior, interactions with peers and teachers, and others[18].

1) Listen[5,18,19]

The teacher must reassure the victim that it is safe now and the teacher is there to help. After that, the teacher listened to all the stories told by the victims attentively and observed their behavior because the victims could express their feelings nonverbally. Teachers can also ask what the victim needs at this time (e.g., wanting to be heard, appreciated, accompanied, etc).

2) Protect[18]

Teachers can help students who become victims to be in a safe place, such as in an area where adults can monitor them or avoid walking home alone.

3) Connect[18,19]

Provide factual information needed by the victim. Be honest about what you know and what you don't know. Don't forget to reassure the victim that the school is ready to help if the victim needs professional help. Last, always keep in touch with the victim's parents.

PFA can also be done by parents. They can use either Look, Listen, and Link or Listen, Protect, and Connect; both are the same. Parents should pay attention to their child's mood and/ behavior so they can be aware if there are changes that occur in their children, such as their child becoming more quiet, not wanting to go to school, not concentrating on homework, and so on. The next step is to listen to the child's story and ask what is needed at this time. The last one, Link, allows parents can spend more time with their family and stay in touch with people related to their child's life (e.g., teachers, doctors, etc).[5,17]

The pilot quasi-experimental study of PFA conducted by Ramirez in 2013 showed that 60% of the students felt comfortable when talking to the school nurses and 40% of them revealed that the nurses helped them to cope with recent incidents. Other students said that they enjoyed talking to the school nurses because there were people who listened to their stories and could understand their condition.[19]

CONCLUSION

Bullying is a global problem that can be a serious threat to the physical and emotional health of children and adolescents. Trauma from bullying has been reported to be associated with chronic and severe psychiatric pathology. Children and adolescents who are victims of bullying certainly need physical, social, and emotional protection. Protection can be provided by the closest people who are well known to the victim, such as parents, extended family, and/or teachers. Psychological first aid is one of the protections that can be provided, intending to help the victim to recover after the bullying incident. PFA can be carried out by non-mental health professionals, parents, and school personnel, especially teachers and/or school nurses, therefore, they are expected to take part in PFA training.

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