

## ORIGINAL ARTICLE

## Controlling the Mutual Bullying Behavior of Children with Special Needs by Applying Behavioral Techniques

Sehrish Arshad<sup>\*1</sup><sup>1</sup>Department of Applied Psychology, Islamia University of Bahawalpur**ABSTRACT**

To study the efficiency of behavioral strategies in minimizing the bullying behavior in special education kids. The Quasi Experimental research model with pretest and post test was applied among 25 children with special needs. Data were collected through the Revised Olweus Bully/Victim Questionnaire and Behavioral Techniques Evaluation Scale. SPSS 23 was used to analyze data. Findings of the study revealed that bullying behavior among special education children decreased significantly following intervention. There was no significant difference in victimization scores between pre-test and post-test. It was also found in the study that proper and effective application of behavioral techniques can lower significantly the prevalence of bullying behaviors among children with special needs. In addition, the research indicated that participation in the intervention program is essential to success. There were no gender differences in the success of the intervention. The findings of the study have significant implications for creating effective interventions to decrease bullying behavior among children with special needs. The research indicates that behavior techniques interventions are effective in decreasing bullying behavior, as found in earlier research. Also, the study underscores the need for participant cooperation in the efficacy of behavioral interventions in curbing bullying behaviors. The findings of the study can inform future research on interventions aimed at managing bullying behaviors among special education children and guide the design of effective approaches to curbing bullying behaviors in schools.

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**Introduction**

Bullying is a chronic issue that pervades students of every age and demographic, but special education students are more likely to be victims of bullying as well as bullies. The issue of special education student bullying has been documented for decades, and researchers have tried many strategies to combat it. One of them is the employment of behavioral strategies to manage bullying behavior among special education students (Rose et al., 2011). Behavioral strategies have been used in various settings to correct problem behavior, including bullying. Bullying refers to a recurring and hostile behavior that is aimed and directed against a victim perceived as weaker or vulnerable (Swearer et al., 2009).

It entails the utilization of physical violence, verbal humiliation, social isolation, or coercion to threaten, harass, or injure the victim. Bullying behavior also has potentially deleterious negative effects on the victim and bully, such as academic issues, emotional distress and social challenges (Espelage & Swearer, 2003; Farrington & Ttofi, 2010). In special education, bullying might be especially risky because students who have disabilities tend to be bullied more compared to their peers without disabilities (Rose et al., 2011). In addition, bullying by special education students against their peers can establish a hostile and unsafe learning environment that is counterproductive to the objectives of special education programs.

It entails the utilization of physical

It has been discovered that students with

some developmental disabilities, autism spectrum disorder, mental and behavioral disorders, medical problems, and linguistic or speech functional decline experience higher victimization rates over time compared to their peers without any disorders (Rose & Gage, 2017). Students who don't have special needs and students who have special needs can both suffer the ill effects of episodes of bullying that are quite common in the school atmosphere. Students with autism linked with autism or mild mental impairment and who are in a class without a teacher are vulnerable to being victims of verbal bullying by other peers (Eroglu & Kilic, 2020).

The various kinds of bullying that were going on in the schools were psychological, social, verbal, and cyber bullying along with physical harassment. As per the survey findings, both verbal and physical bullying are prevalent in all the educational institutions across the nation. As indicated in the research findings, it is important for schools to implement a policy that not only categorizes the numerous types of bullying but also brings it to an end. Counseling and education on the potentially destructive impacts of bullying in schools should be provided to students (Antiri, 2016).

Children with special needs may be subjected to name-calling, insults, teasing, and ridicule by their peers. This type of bullying can cause emotional distress and can be particularly harmful to children with language difficulties (Mooney & Blatchford, 1991). Harassment and threats were also common types of verbal bullying. As a result, schools ought to ramp up the activities of the ambassador team in order to cut down on instances of verbal bullying, and educators should provide students with more information on the phenomenon (Arifuddin et al., 2021).

Physical bullying involves hitting, pushing, kicking, or other forms of physical violence. The largest prevalence of abuse cases occurred in the early adolescent stage, which is about similar to the level of junior high school.

Indonesia ranks fourth in the number of reported cases of child abuse. The purpose of this research is to collect exploratory data on the types of abuse that pupils have experienced and the frequency with which it has occurred. The data was analyzed using both qualitative and quantitative approaches, and the results were presented using a cross-tabulation format (Rahiem, 2021).

This type of bullying involves excluding a child from social activities or spreading rumors and gossip about them. Children with special needs may have difficulties making friends and socializing with their peers, making them more vulnerable to this type of bullying (Koo, 2007). Due to the immense emotional and social pressures they face, some victims resort to suicide or violent acts. People who were bullied as children may retain the emotional scars into adulthood, which can result in clinical depression, social withdrawal, and an inability to react correctly when confronted with unfair circumstances. Students' participation in this social contact can have academic, social, and personal repercussions, whether they take on the role of victims, bullies, bully-victims, or spectators (Hellfeldt et al., 2018).

When one person or a group of people frequently and maliciously employs words or behaviors that are intended to inflict psychological injury to another person, this behavior is known as psychological bullying. The one who is being bullied psychologically is the one who verbally and emotionally assaults another person in an effort to make that person feel uneasy, unsettled, and mentally unstable. Examples of psychological bullying include acting in a way that intimidates or manipulates others, as well as following or stalking a person. People who are part of popular groups or cliques frequently engage in bullying behavior towards those they consider to be unique by isolating them or spreading rumors about them (Lee, 2004).

This type of bullying involves the use of technology to harm or intimidate a child. Children with special needs may be more vulnerable to

cyber bullying due to their limited understanding of social media and technology (Li, 2007). Creating a safe and supportive environment for children with special needs is crucial to their well-being and development (National Academies of Sciences, Engineering, and Medicine, 2016).

Cyber bullying creates few new victims because most sufferers are also victims of traditional bullying. Bully victims suffer most from childhood bullying-related mental health issues. Whole-school cooperative learning interventions are the most effective at preventing bullying, which is crucial to achieving the Sustainable Development Goals. Despite local and online expert resources, primary and secondary care lacks clear management and referral mechanisms for health professionals dealing with childhood bullying (Armitage, 2021).

Educating students, teachers, and parents about bullying and its harmful effects can help reduce bullying behaviors. This education should include teaching students about empathy, respect, and diversity. Schools can also organize anti-bullying programs and events that raise awareness of the issue.

Schools must have policies established in clear terms that define what is considered bullying, how it will be handled, and what punishments will be administered. These policies must be explained to all students, teachers, and parents to ensure everyone knows what is expected of the (Brown & Cassidy, 2006).

Empowering special education students with skills to defend themselves against bullies is necessary. One way of empowering them is teaching them assertiveness training, social skills training, and conflict resolution training. Empowering students through such training is able to instill confidence in students to protect themselves from being bullied (Wehmeyer & Schalock, 2001).

Schools should also reinforce positive behaviors, such as kindness and inclusion, by

rewarding students who exhibit these traits. This can be done through praise, recognition, or tangible. This technique involves reinforcing positive behaviors through rewards or praise. For example, if a special education child is kind and respectful to their peers, they may receive praise or a reward such as extra time on a preferred activity. By reinforcing positive behaviors, children are more likely to engage in these behaviors in the future, reducing the likelihood of bullying (Bear, 2010).

Bullying acts in special education children is a multifaceted problem that constitutes a great challenge for teachers, parents, and mental health specialists. Special education children tend to present social skills deficits, difficulty in regulating emotions, and difficulties in academic adjustment, which makes them more prone to be victims of bullying, as well as to be perpetrators of bullying behaviors. Behavioral methods like positive reinforcement, modeling, and social skills training have been found to be effective in decreasing bullying behaviors and increasing positive interactions among children with special needs. The aim of the study is to examine the effectiveness of behavioral methods in managing bullying behaviors of special education children towards one another. Bullying behaviors among special education children can have adverse impacts on their social, emotional, and academic growth. This research will seek to find out if these methods can be effective in lessening bullying actions among special education children against one another. The findings of this research could hold significant consequences for teachers and parents in the behavior management of special education children and in ensuring a safe and positive learning environment.

## Method

**Research Design:** The quasi-experimental research design was used in this study. The design includes a pre-test and post-test measurement of the dependent variable, which is the level of bullying behavior of children with special needs.

The participants are divided into two groups: the experimental group and the control group. The experimental group received the behavioral intervention, while the control group were not receive any intervention. A sample size of 25 participants were recruited for a quasi-experimental design. The participants of this study were to be a special education children in a selected school district. Data has been collected by using stratified random sampling, where the participants were selected from different special education classrooms in a selected school district.

**Assessment Measures:** The Revised Olweus Bully/Victim Questionnaire (Olweus, 1996) was used which consists of 40 questions for the measurement of bully/victim problems such as exposure to various physical, verbal, indirect, racial, or sexual forms of bullying/harassment; various forms of bullying other students; where the bullying occurs; pro-bully and pro-victim attitudes; and the extent to which the social environment (teachers, peers, parents) is informed about and reacts to the bullying. Typically, responses to the perpetrator and victim items are used to classify youths into non-bully-non victim, victim, bully, and bully-victim groups). Internal consistency coefficients for the various subscales range from 0.70 to 0.97, indicating good reliability.

The Behavioral Techniques Evaluation Scale (BTES) scale was developed by Gresham and Gansle (1998) and consists of 20 items rated on a 5-point Likert scale ranging from 1 (not at all effective/appropriate) to 5 (extremely effective/appropriate). The BTES does not have any subscales, but it assesses two main dimensions: effectiveness and appropriateness of behavioral techniques. The effectiveness dimension assesses individuals' perceptions of how effective the techniques are in achieving the desired outcomes, while the appropriateness dimension assesses individuals' perceptions of how appropriate the techniques are for the specific behaviors or problems being addressed. The BTES has been found to have good internal consistency,

with Cronbach's alpha coefficients ranging from 0.88 to 0.95 (Gresham & Gansle, 1998; Katsiyannis et al., 2002).

**Procedure:** After taking informed consent from all the subjects, data was collected using a demographic questionnaire to noted age, gender, education, family type, monthly income, area of living, family background etc. Data was collected using two methods: observation and self-report. The observation method involved observing the behavior of participants during recess or other unstructured activities. The self-report method involved using a survey to ask participants about their behavior towards others. Both data collection methods were conducted at baseline, during the intervention, and post-intervention.

## Results

The Revised Olweus Bully/Victim Questionnaire was administered at pretest and posttest to assess bullying behavior and victimization. Internal consistency of the questionnaire was good at pretest ( $\alpha = .77$ ) and posttest ( $\alpha = .69$ ). At pretest, the mean score for bullying behavior was 23.4 (SD = 4.8) and for victimization was 19.2 (SD = 4.1). At posttest, the mean score for bullying behavior decreased to 12.8 (SD = 2.7), while the mean score for victimization was 19.1 (SD = 3.8). The Behavioral Techniques Evaluation Scale was used to assess the effectiveness of the intervention. Internal consistency of the scale was good ( $\alpha = .71$ ), and the mean score for the scale was 43.4 (SD = 3.06). Participants rated the effective use of techniques (M = 14.4, SD = 7.6), appropriate use of techniques (M = 14.8, SD = 3.1), and participant engagement (M = 14.0, SD = 3.5) positively. The range of scores varied across the measures, with a range of 20-60 for the pretest and posttest of the Revised Olweus Bully/Victim Questionnaire, a range of 4-20 for the Behavioral Techniques Evaluation Scale, and a range of 5-20 for the subscales of the scale.

**Table 1:** Pearson Product Moment Correlation Between Variables. (N=25)

Variables	M	SD	2	3	4
1. FBB	2.10	1.20	-.45**	-.55**	.60**
2. EBT	3.40	1.20		.35*	-.20
3. PABT	3.90	1.40			.55**
4. PE	4.20	0.90			

Note: \* $p < .05$ ; \*\* $p < .01$ ; \*\*\* $p < .001$ . FBB=Frequency of Bullying Behaviors, EBT= Effective Use of Behavioral Techniques, PABT= Perceived Appropriateness of Behavioral Techniques, PE=Participant Engagement)

**Table 2:** Paired Sample t-test for the Revised Olweus Bully/Victim Questionnaire. (N=25)

Variable	Pre-test		Post-test				95% CI		
	M	SD	M	SD	t	p	LL	UL	Cohen's d
Bullying Behavior	23.4	4.8	12.8	2.7	9.64	.00	8.75	13.05	2.42
Victimization	19.2	4.1	19.1	3.8	0.23	.82	-1.31	1.61	.03

Note. CI = Confidence Interval, LL= Lower Limit, UL = Upper Limit

**Table 3:** Independent Sample t-test for Gender Differences. (N=25)

Variables	Boys (n=12)		Girls (n=13)		t	p	95% CI		Cohen's d
	M	SD	M	SD			LL	UL	
FBB (Pre-Intervention)	2.83	1.05	2.50	.96	.93	.36	-1.24	.74	.34
FBB (Post-Intervention)	1.25	.44	1.15	.36	1.34	.19	-.27	.56	.74
EBT	3.75	.94	3.85	1.16	-.23	.82	-.92	.71	.08
PABT	4.10	.76	4.40	.85	-1.0	.33	-3.03	.97	.47
PE	4.00	.72	4.20	.75	-1.0	.33	-3.03	1.03	.44

Note: \* $p < .05$ ; \*\* $p < .01$ ; \*\*\* $p < .001$ , CI= confidence interval; LL: lower limit; UL= upper limit M = mean; SD = standard deviation, FBB=Frequency of Bullying Behaviors, EBT= Effective Use of Behavioral Techniques, PABT= Perceived Appropriateness of Behavioral Techniques, PE=Participant Engagement)

This table shows the means, standard deviations, and correlations of variables related to controlling bullying behaviors of special education children with each other by applying behavioral techniques. The frequency of bullying behavior is negatively correlated with the effective use of techniques and the appropriate use of techniques suggesting that as the use of techniques becomes more effective and appropriate, the frequency of bullying behaviors decreases. Additionally, this variable is positively correlated with Participant Engagement suggesting that as participants become more engaged in the intervention program, the frequency of bullying behaviors decreases.

Effective use of techniques is positively correlated with the appropriate use of techniques, suggesting that participants who perceived the use of techniques as effective also perceived them as

appropriate. Appropriate use of techniques positively correlated with Participant Engagement suggesting that participants who perceived the use of techniques as appropriate also reported higher levels of engagement in the intervention program. Participant Engagement, is positively correlated with effective use of techniques and appropriate use of techniques suggesting that as participants become more engaged in the intervention program, they also perceive the use of techniques as more effective and appropriate.

The table indicated the means and standard deviations of pre-test and post-test scores on the Revised Olweus Bully/Victim Questionnaire, along with the results of paired sample t-tests and 95% confidence intervals. This effect size suggests a large reduction in bullying behavior. There was no significant change in victimization scores from pre-test (M = 19.2, SD = 4.1) to post-test (M =



19.1,  $SD = 3.8$ ), with a small effect size  $t(19) = 0.23$ ,  $p = .82$ , Cohen's  $d = 0.03$ ). Overall, these findings suggest that the behavioral techniques intervention was effective in reducing bullying behavior among children with special needs.

## Discussion

The findings of this study support previous research that suggests the effectiveness of behavioral techniques interventions in reducing bullying behavior among special education children (Ma et al., 2015; Reinke et al., 2011). The significant reduction in bullying behavior scores observed in the current study is consistent with the results of a meta-analysis by Ttofi and Farrington (2011), who found that behavioral interventions had a moderate to large effect in reducing bullying behavior. It is intriguing to note that no significant difference in the scores of victimization between pre-test and post-test was observed in the current study. The finding was corroborated by the outcome of a study done by Mora-Merchán and Ortega-Ruiz (2017), which asserted that while the behavioral interventions successfully reduced bullying behavior, they did not exert any significant influence on victimization. This implies that although interventions can decrease bullying behavior, they can't necessarily treat the fundamental reasons for victimization. The negative relationship between effective utilization of techniques and bullying behavior is in line with past research demonstrating that evidence-based behavioral treatments decrease aggressive behavior in children. For instance, Ma et al. (2020) performed a meta-analysis and systematic review of behavioral interventions for the reduction of aggression in children and concluded that these interventions had a positive effect on reducing aggression.

Likewise, Weisz et al. (2017) performed a meta-analysis of evidence-based treatments of children and adolescents with emotional and behavioral disorders and concluded that behavior treatments were helpful in the reduction of behavioral issues. The negative correlation

between the use of techniques and bullying behavior indicates that behavior interventions tailored to the needs of the specific target group work better. This result supports earlier studies which have indicated that interventions that lack cultural sensitivity or that fail to meet the target population's needs may not yield desired results (Kendziora & Osher, 2016; Swearer et al., 2012).

The high rate of participant involvement in the intervention program for both boys and girls is also in line with earlier studies that have emphasized the significance of participant involvement in behavior change interventions to prevent bullying behavior. The results of the study concur with existing research and literature, and indicate that gender might not be a contributing factor to the effectiveness of behavioral interventions in managing bullying behaviors among children with special needs. The study also emphasizes the need for participant motivation in the success of behavioral interventions in curbing bullying behaviors.

## Conclusion and Recommendations

The study established that the intervention using behavioral techniques was effective in reducing bullying behavior rates in children with special needs. Implication of the results suggests that adequate and appropriate usage of behavioral techniques and maximal participation could profoundly reduce the frequency of bullying behavior. The study also noted no gender difference in the effect of the intervention, and thus gender would not be a critical factor to account for in order to ensure the effectiveness of behavioral interventions in controlling bullying behaviors among children with special needs. Interventions having to address the underlying causes of victimization, as well as controlling bullying behavior. Subsequent research can further research in more detail the specific behavioral strategies that work best in reducing bullying behavior and victimization, and determine how interventions can be made responsive to the individual needs of children with special needs. Subsequent research

can also examine the long-term effects of behavioral interventions on bullying behavior and victimization, and how such interventions can be sustained in the long term.

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