

Priority Area: Bullying

National Priority Area State Priority Area Emerging State Topic



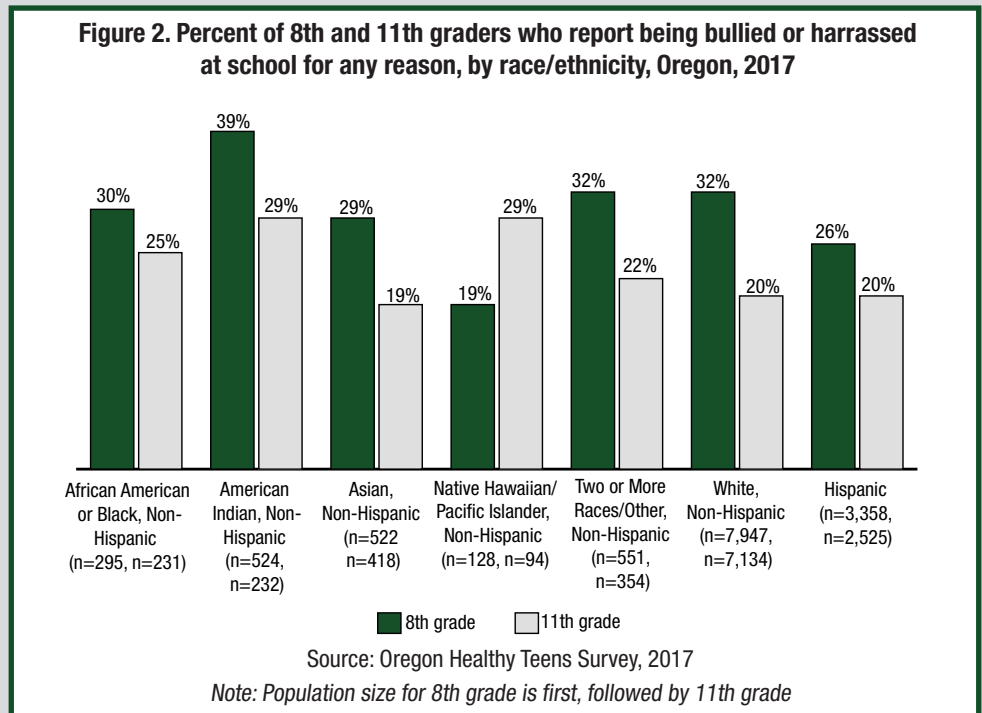
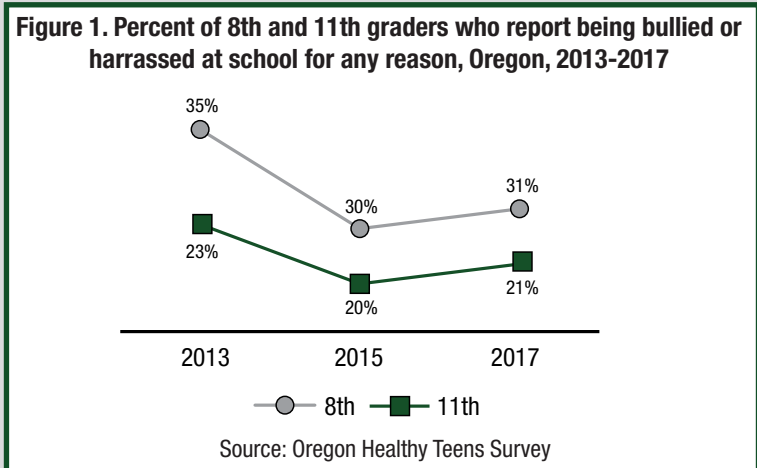
Significance of the issue

Bullying is unwanted, aggressive behavior among school-aged youth that involves a real or perceived power imbalance. The behavior is repeated, or has the potential to be repeated, over time. Youth who bully use their power—such as physical strength, access to embarrassing information, or popularity—to control or harm others. Bullying in school can often mirror systematic oppression in society at large. Power imbalances can change over time and in different situations, even if they involve the same people. There are negative outcomes for both victims and perpetrators of bullying including: poor academic achievement and school dropout, and negative physical and mental health outcomes. Youth who are the victims of bullying and who also perpetrate bullying may exhibit the poorest functioning, in comparison with either victims or bullies, with effects lasting into adulthood.¹

National performance measure

Health Status Data²

- » Almost one in three 8th graders and one in five 11th graders have been bullied in the last 30 days according to the (Figure 1). American Indian, Native Hawaiian/Pacific Islander, and LGBTQ+ students face higher rates of bullying – reflecting systematic oppression faced by these communities in and outside of schools (Figure 2). General bullying, cyber bullying, and bullying based on appearance were the most common forms of bullying reported.
- » Since 2013, more students report missing school because they felt unsafe in the last month – about 9% of 8th graders and 7% of 11th graders.
- » Youth who had a supportive adult at school were less likely to miss school because they felt unsafe.



Context for the issue in Oregon

Bullying was not one of Oregon's selected Maternal, Child, and Adolescent Health (MCAH) Title V priorities for 2016-2020, although related work has been ongoing in the Oregon Health Authority (OHA) Adolescent and School Health programs and among partner agencies.

Successes and Challenges

- Oregon rates of bullying have slightly declined over the past four years,² but information provided to the Joint Committee on Student Success and other workgroups leading up to the 2019 Oregon Legislative Session suggest school climate and bullying remain significant issues in Oregon schools.

State level work

- The [House Bill 2599, Oregon Safe Schools Act \(2009\)](#) mandates that all schools have policies prohibiting bullying, harassment and cyber-bullying. In 2012, the law was amended to include reporting requirements for all school employees.
- The [Student Success Act, House Bill 3427 \(2019\)](#) establishes a statewide school safety and prevention system to help districts decrease acts of harassment, intimidation and bullying. The Legislature also passed a few bills related to school districts adopting procedures with respect to sexual harassment.
- In 2019, the OHA designed a youth health surveillance question to measure perpetuation of bullying.

Needs assessment results

Environmental scan

- According to an environmental scan of community health needs assessment, bullying came up the least of any of the six national priority areas for adolescents.

Partner survey

- Bullying was the highest priority area (of seven) selected by statewide partners. Bullying was the highest priority among partners who served youth of color, youth with disabilities, and LGBTQ+ youth. Bullying also ranked highest of the seven priority areas in terms of its impact on health equity and impact in relation to resource allocation.

Community voices

- Bullying ranked as the number one priority to families participating in community voices engagement project. This was especially true among African American or Black, immigrant/refugee, and rural families. Through community voices engagement directly with the LGBTQ+ community, transgender youth ranked bullying as second highest priority. About 30 percent of transgender youth surveyed experienced some bullying.

¹ U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. (2017). Title V maternal and child health services block grant to states program. Guidance and forms for the Title V application/annual report. Appendix of supporting documents. Rockville, MD: Author.

² [2017 Oregon Healthy Teens Survey](#)