

Building Respectful, Inclusive Communities

Toolkit

Acknowledgements



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1. Introduction

A. Saskatoon Council on Aging (SCOA)

The Saskatoon Council on Aging is a community based, non-profit organization established in 1991, which is dedicated to promoting positive aging for all community members.

- SCOA strives to:
 - Address prejudices of ageism
 - Enhance age friendliness of our communities
 - Enable healthy positive aging
 - Support well-being of older adults

B. Building Respectful, Inclusive Communities project

During SCOA's Age Friendly Saskatoon Initiative, older adults identified senior-senior bullying in housing as a major concern.

SCOA secured funding through the New Horizons for Seniors Program (NHSP) to build community capacity to address senior-senior bullying in order to assist older adults living in congregate housing to feel safe and included in the life of their community. For the purpose of this project, congregate housing refers to an independent group living environment.

- The goals of the project include:
 - Develop a Train the Trainer Toolkit on BRIC
 - Recruit and Train older adults to provide the BRIC presentation in select communities
 - Compile resources for management and staff of congregate housing
 - Evaluate the effectiveness of the project
 - Provide support to volunteers and building staff/management

C. What is unique about bullying in congregate living communities?

- Bullying of older adults in congregate living communities by other older adults who also live there takes place where they make their homes. Those who have been affected by bullying cannot find home to be a safe place to escape from bullying or from the people who bully. Older adults tend to spend more time in their homes than younger people. Some lack financial resources to go out, some have health or functional limitations that make going out difficult, some have fewer places to go because family members and friends have died or live in distant communities. Without other places they can escape to, some older adults who have been impacted by bullying retreat within the confines of their own apartment and become socially isolated. The frequency of their social contacts decreases as does the quality of these contacts. They become at risk for the negative health effects, physical as well as mental, associated with social isolation.

D. How can this toolkit help?

- Many facilities currently operate without a policy or program to address the bullying issue happening in the building. Bullying affects the wellbeing of everyone in the community.
- This toolkit contains information and resources designed to assist individuals in understanding how bullying impacts the quality of life of older adults in congregate living communities, along with practical suggestions for action.

2. **What is Bullying?**

A. **Definitions:**

- **Bullying:** “Bullying is the intentional, repetitive, aggressive interpersonal behaviour involving an imbalance of power or strength.” (American Psychology Association, 2017.)
- **Power:** Personal power is the ability to make choices about who you are and what you do, and power can be used in both positive and negative ways. When someone has more power and chooses to use it to hurt or harm another person, it becomes violence.
- **Gossip:**
 1. Casual and idle chat; to have a gossip with a friend
 - 2. A conversation involving malicious chatter or rumours about other people; a gossip about the neighbours
 - 3. A person who habitually talks about others, especially maliciously; also called

See Appendix 1- The Bullying Cycle

B. **Types of Bullying:**

- *Verbal bullying* is using words to hurt or humiliate another person including insults, threats, discriminating comments and constant teasing.
- *Non-Verbal bullying* is negative, non-verbal body language; mimicking a disability; making offensive gestures or facial expressions’ turning one’s head or body away when victim speaks’ using threatening body language or encroaching on personal space
- *Physical bullying* is when someone is physically hurt, is threatened or their property is taken or damaged.
- *Social bullying* is ignoring, isolating, excluding, or spreading rumours about another person.

C. Those involved in bullying:

- **The person being bullied**

Older adults are at greater risk of being bullied if they have health problems and if they require assistance, (especially if they are less dependent than is the norm in their group or congregate living facility.) As the need for assistance increases so does the risk of bullying.

Older adults are also at greater risk of being bullied if they differ from the norm in their group, for example in dependence, sexual orientation, ethnic group, etc.

People who are bullied often blame themselves for the bullying. They describe themselves as being “an easy target,” say they have low self-esteem and a hard time defending themselves. They often report they have nowhere to go for help and that others (including families) tend to minimize the problem. They have nowhere to escape. They are being bullied in their home environment and as their health and mobility decline they tend to leave home less and less.

- **The person who bullies**

Many people who bully do not recognize that others see their behaviour as bullying and believe it is acceptable and appropriate. They may justify their behaviour as “only teasing” or “joking.” Some may be prepared to accept other people’s opinions and examine their behaviour while others are not.

Some older adults in congregate living who bully others have a long standing pattern of being “in charge” or controlling others. Some may have bullied others on the playground at school, in the workplace, and in their intimate relationships throughout their lives.

For some older adults bullying is a way of seeking control as a reaction to challenging changes in their lives and feelings of powerlessness.

Still others may use bullying behaviour as an attempt to “fit in,” they model their behaviour on that of other residents they see as successful.

Research has found that people are more likely to resort to bullying behaviour in unsupportive environments in which bullying is accepted and those who are bullied are not supported.

- **The Bystanders**

Bullying almost always takes place in the presence of other people. Witnesses to bullying are commonly called bystanders. Bystanders provide the audience for bullying and thus play an important role in it. Laughing at a joke that makes fun of a person, sharing unkind gossip, going along with comments to exclude another encourage bullying. Even remaining silent allows bullying to proceed and thus reinforces it.

Silently doing nothing is a typical response of bystanders to bullying incidents. Some bystanders are afraid of making the situation worse, some are afraid of being bullied if they object, most do not know what to do.

- **The Community**

Congregate living communities provide a home to older adults at a time in their lives when they choose not to or are not able to, continue living in their previous environment. The social and emotional climate of these communities is of great importance to residents who may feel vulnerable and spend most, and in some cases, all of their time there.

Residents come from diverse backgrounds, have different life experiences, expectations, and perspectives on acceptable behaviour and civility. Many have health and mobility issues, and some have compromised social supports. Residents with low incomes face additional issues including limited choices for necessities including housing. A respectful, inclusive community is not a given in congregate living, it takes commitment and sustained effort.

What is a respectful, inclusive community? It can be defined as a safe environment where each person is accepted and valued, their differences respected, and where each person has a sense of belonging. Positive social relationships and opportunities to be actively engaged in the community are essential aspects.

Building a respectful, inclusive community is possible only with the commitment and ongoing engagement of residents, management and staff.

D. Impact of Bullying

- **On the person who is bullied**

Being bullied can have significant negative effects on older adults' quality of life and on their feelings of well-being. Older adults in congregate housing have reported that being bullying makes them feel bad, sad and stressed. They also describe losing sleep, feeling angry and worried, and having difficulty going about their day-to-day business. They try to avoid the person or persons who bullied them and the places they were bullied. Some feel lonely and become socially isolated. Some older adults who are bullied because of their need for assistance choose to do without the assistance they need including walking aids and services of a caregiver for fear of further bullying.

Research has shown that the negative effects of bullying on the person bullied can be lessened when peers reach out to them with kindness and when they feel part of a group rather than isolated and alone.

- **On the person who bullies**

The person who bullies usually doesn't feel upset or distressed by their behaviour. Some justify it as teasing or joking, or by blaming the person they bully. Some may experience momentary feelings of satisfaction or superiority when they cause another person to feel threatened or hurt.

- **On the bystanders**

Research has found that many bystanders are negatively affected by bullying. Like those bullied, they reported feeling bad, sad or stressed. In a study on bullying in seniors' subsidized apartments in Saskatoon, bystanders also reported that witnessing bullying led to difficulty getting things done, difficulty making friends, being reluctant to leave their apartments, and feelings of anger on behalf of the person bullied.

Research on bullying in schools found most bystanders would like to intervene and admire those who do. This research is considered to have promise for bullying among other age groups and in other settings.

Doing nothing gives permission for bullying to continue.

See Appendix 2- Why don't we stand up to bullying behaviour? (Beyond Bullying)

- **On the community**

Bullying affects the whole community in congregate living facilities. It creates an environment of in-groups and outsiders where some belong and others do not, an environment of disrespect and lack of caring, of distrust and fear.

Researchers have found that residents' comfort level in the facility is affected by their perceptions of how people treat each other. When they see residents bullying others they don't feel safe or have a sense of belonging or feeling connected to one another or to the congregate living facility where they make their home.

Research in schools suggests students are more likely to engage in bullying if the climate is negative, non-supportive, unfair or high in conflict, and if they see bullying behaviours as the norm. More students were also found to intervene in bullying incidents when students and teachers worked together to stop bullying. These findings are considered as holding promise for understanding bullying and planning interventions in other settings as well, including congregate living facilities.

E. Taking Action

- **The person who is bullied**

Because many people who are bullied blame themselves, it is important to start here. Remind yourself it is not your fault you are bullied. You do not deserve to be bullied. You are not responsible for the bullying behaviour. Everyone is responsible for their own behaviour and the person doing the bullying is responsible for it.

Advice/coping strategies suggested for people who are being bullied include:

- Try to ignore the bullying behaviour (this decreases the power of the bullying)
- Try to maintain eye contact with the person who is bullying you
- Try to speak calmly, without aggressiveness or hostility
- Try to understand the circumstances of the person who is bullying and what may be contributing to these behaviours
- Try to stay connected with others and avoid becoming isolated
- Talk to trusted friends or staff
- Remember asking for help is a sign of strength

- **The person who bullies**

It can be annoying, even hurtful, to be told that we are seen as bullying other people. If we are told that some people are being hurt by what we say and do, it is important to examine our behaviour.

See Appendix 3 –Gundersen Self-Assessment Tool

- **The Bystanders**

Many bystanders report not knowing what to do when they see someone being bullied. Teaching them how to respond is a key step to changing the culture of bullying.

Key steps include:

- Learn how to stop being a part of the problem and become part of the solution.
For example, many bystander responses to bullying (laughing at unkind jokes, listening to gossip, going along with excluding someone, being silent during bullying) play an important role in bullying and actually reinforce it. Learning and practicing new responses (“that’s not funny,” “there’s room here, come join me.”) empowers those who learn them and at the same time decreases both the power of the bullying incident and the bullying culture in the community.
- Learn how to decrease the hurt felt by the person being bullied.
Research has shown that small acts of kindness and support do much to alleviate the hurt felt by the person bullied. People who are bullied also feel less distress when they are part of a group than if they feel alone and isolated. Reach out to the person who is being bullied, include them!
- Encourage other residents to become proactive against bullying and work together as a group.
- Encourage management and staff to be proactive against bullying and to work with residents to become part of the solution.

- **The community**

The whole community is affected by bullying and the whole community must become involved if it is to be stopped. That includes management and staff as well as residents. Residents can talk to management and staff about management and staff’s key role in creating a respectful, inclusive community where residents feel safe and protect one another from bullying. Residents can also tell management that the best results from

efforts to decrease bullying occur when management, staff and residents work together.

See Appendix 4- Beyond Bullying Survey

3. Building Respectful, Inclusive Communities (BRIC)

A. What is it?

- The need to build a respectful, inclusive community is more important when the vulnerability of residents and the impact of both physical and social environments are considered. Understanding the components of a respectful, inclusive community requires reflection and thought.

B. Respectful Community

- It means accepting everyone as they are, valuing them, and respecting differences. It means that everyone is on the same level, no one, or no one group, is better or above another.
- It is one where everyone shows respect for everyone else, accepting and valuing them, recognizing and accepting differences, and encouraging the meaningful involvement and participation of everyone in the community.

C. Inclusive Community

- Social inclusion is promoted by policies that reduce economic, social and cultural inequities within the population, and recognize, value, and support the contributions of all community members.
- Social inclusion is about experiencing a sense of belonging that involves having positive relationships as well as opportunities to be actively engaged in the community. (Federal/Provincial/Territorial Social Isolation Social Innovation Working Group)

See Appendix 5- Checklist of inclusive community characteristics

4. Role of the Presenter

A. GROUP FACILITATION

“How a facilitator interacts with group members strongly influences the group process. It is not only what the facilitator says, but how she/he behaves that is important” (Page 20. Prendiville)

- Facilitator skillfully helps a group of people understand their common objectives and plan to achieve them without personally taking any side of the argument.
- Understanding the material is crucial to successful presentations
- Arrive early to ensure proper set up of the space (including A/V equipment)
- Keep on Task
- Set and Discuss GROUND RULES (Agreement)
 - Behaviour
 - Respect
 - Confidentiality
 - Speaking- Take turns
 - Questions
 - Interruptions
 - Time Management
- Reduce Anonymity
 - Introduce yourself as attendees arrive
 - Include a title slide with name
 - Encourage those arriving first to sit in front seats
- Active Listening
 - Keep in mind that you are NOT acting in a counselling role
 - Absorb what is being said and let speaker know that he/she has been heard.
 - Verbal Listening Skills:
Summarizing; Clarifying; Reflecting; Paraphrasing; Explaining; Open-Ended Questions; Encouraging; Silence; Linking
- Non-Verbal Listening Skills:
 - Facial Expression; Eye Contact; Body Language; Gestures; Personal; Timing
- Barriers to Active Listening:
 - Poor Environment
 - Judgmental Attitude
 - Solution Seeking
 - Listener’s Needs
- Behaviours that hinder group interaction/participation:
 - Judging- evaluating/judging others ideas, not listening for reasons/explanations
 - Controlling- trying to change/restrict behaviour and attitude by imposing a set of values/beliefs on them
 - Superiority- treating others as though you are better than them
 - Certainty- communicating in a manner that implies the person knows all. High need to be right
 - Indifference- showing lack of interest/concern for the feelings and welfare of others

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- Manipulating- communicating with hidden motives in a way that uses others to meet one's own needs

B. ENVIRONMENT

- Have room set up in a welcoming manner (chairs, lighting)
- Use a microphone if the room is large or you need help projecting your voice
- If there are refreshments, ensure they are easy to access and let attendees know they are there.
- Let attendees know that they may leave to use washroom as needed, but to please be a non-disruptive as possible
- Deliberate welcoming actions may need to be taken
 - Standing at entrance to introduce yourself
 - Asking names as the attendees arrive

C. A/V EQUIPMENT

- Communicate with Project Coordinator about equipment needed
- Equipment: Laptop & Projector
- Steps:
 - Unpack equipment (including cords)
 - 1 laptop
 - 1 projector
 - 3 cables
 - 1 extension cord (not pictured)
 - Attach labelled cords
 - Laptop- Power cord
 - Projector- Power cord
 - Laptop to Projector- HDMI cord
 - Power on laptop and projector
 - Adjust projector to fit screen
 - Open lens (front of machine)
 - Prop up using stand under front of machine
 - Focus (dial on top of projector)
 - Locate "Slideshow" tab in toolbar at top of PowerPoint page
 - Choose "From Beginning" to start the presentation
 - Will be required to change slides manually on the laptop using arrow keys
 - To shut down laptop, locate Power icon on Desktop
 - After presentation, ensure all equipment and cords are returned to appropriate case

D. DAY OF PRESENTATION TIPS

- Arrive 20-30 minutes early to ensure room is set up in a welcoming manner
- Ensure you have all materials (Name tag, USB, Toolkit, Evaluations)
- Set up equipment (directions are in the toolkit)
- Introduce yourself to attendees arriving
- Encourage those arriving to fill up the front seats
- Ask names (even if you won't remember them)
- Let attendees know they may leave at any time to use the washroom, etc. but to please be as non-disruptive as possible
- Pass out evaluations prior to beginning presentation and request attendees to complete after presentation
- Thank the residents for attending the presentation and welcoming you into their living community
- Collect evaluations

5. Resources for Staff and Management

A. Why management and staff should become involved

Bullying intervention begins with management commitment to a respectful, inclusive community. Strong leadership by management is essential to success. Interventions must be comprehensive, targeted and implemented at both the resident and especially at the organizational level, and on an ongoing basis.

Management has a responsibility to create both a safe working environment for staff and a safe living environment for residents.

B. Pro-active Steps to decrease bullying

1. Assess the social climate of the facility and use a solution orientation.

Why? Because of research that shows that people are more likely to engage in bullying behaviour if the climate is negative, non-supportive, unfair, or high in conflict. They are also more likely to engage in bullying behaviour if they perceive bullying to be acceptable and the norm in the community. Facilities where bullying is allowed to occur foster a culture of disrespect, insecurity and fear that can lead to increased bullying.

Ask questions such as:

- a. How is the community's social climate assessed by management? By staff? By residents?
- b. What steps are management and staff taking to support residents?
- c. Do residents feel supported by management and staff? By other residents?
- d. How are differences of opinion among residents resolved?
- e. Is there open conflict among residents or groups of residents?

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- f. Do residents feel management and staff are fair in their dealings with residents?
 - g. Do residents feel safe?

2. Assess the facility's physical setup using a solution orientation.

Why? Because bullying almost always occurs in the presence of others, and often in common areas where residents gather.

a. Are there "hot spots," areas where bullying occurs more frequently than others?

b. What can be done to make common areas safer for residents? What can be done to decrease possible overstimulation? Ensure adequate space for mobility aids? Ensure good lighting? Decrease background noise?

c. What can be done to help residents find ways to share common areas such as laundry and activity rooms despite their different expectations and standards of acceptable behaviour?

3. Assess the facility's organizational structure and how this impacts residents, again using a solution orientation.

Why? Because management and its policies and practices set the tone and influence how staff treats residents and residents treat other residents.

a. What are promising policies and practices for management and staff to build respectful, inclusive relationships throughout the organization? What are promising policies and practices to reduce bullying at all levels including between residents?

b. Are there existing policies, procedures or practices that have the unintended consequences of showing disrespect to or excluding some residents? Are there existing policies, procedures or practices that have the unintended consequences of facilitating or reinforcing bullying? Are there other changes that need to be made to existing policies, procedures and practices?

c. Is it an organizational priority to provide education to management and staff on bullying and how to deal with it? To residents? Does education include bystander training?

4. Clarify behaviour norms and expectations and invite everyone, all residents, management and staff, to become involved in determining what these norms and expectations should be.

Why? Because residents come from different backgrounds, have had different life experiences, and have different values and ideas about what behaviours are acceptable. Another reason to clarify norms is that people are more likely to engage in bullying behaviour if they believe bullying is the norm and accepted as part of living in older adults' congregate housing, and if those who are bullied are not supported.

When expectations of behaviour in the facility are clarified, residents know what is expected of them and when behaviour crosses the line into disrespectful, exclusive and bullying. They also understand the importance of not participating in bullying and of reaching out to the person bullied, and they are more likely to do so.

5. A code of conduct describes the expected behaviour of all staff and members within an organization. For a code of conduct to be effective, it is essential that people understand these expectations, that there is a clear process for reporting concerns and investigating these complaints, and that consequences are implemented if the code of conduct is not followed.

Review regularly, again involving all members of the community.

See Appendix 6- Code of Conduct Examples

6. Ask residents who have been bullied and those who have witnessed bullying how they think bullying can be reduced and involve them in facility-wide committees to work on this.

Why? Because research shows they often have ideas about how to address bullying. Furthermore, asking and involving them helps lessen some of the negative effects of the bullying they have experienced or witnessed. It also promotes their social empowerment and reduces their risk of social isolation and loneliness.

7. Include the development of strategies to counteract the negative effects of bullying in the mandate of committees to reduce bullying among residents.

Why? Because reaching out to those who have been bullied with acts of kindness and including them in the community helps lessen the negative effects they experience from the bullying. Bullying is also less likely to occur in communities where people who are bullied are supported. Residents support one another in a respectful, inclusive community.

8. Provide education on bullying that promotes changes to bystander response and teaches skills to the whole community, management, staff and resident.

Why? Because people often do not know what to do when they witness bullying and don't want to make the situation worse. Doing nothing is the default position / choice of action of most bystanders. Many would like to do something but don't know what to do. They are ready to learn how to stop being part of the problem and become part of the solution. Bystanders who are empowered to protect the person bullied and to decrease the power of the bullying change the social climate of the facility and in so doing help build a respectful, inclusive community.

Key elements in the education include:

- a. The role bystanders play as the audience to bullying in encouraging and reinforcing it

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- b. The potential role bystanders can play in reducing the negative impact of bullying on residents who have been bullied through reaching out to them with acts of kindness and including them in the community
 - c. The role of bystanders in building a respectful, inclusive community
 - d. The development of strategies and skills to respond to abusive incidents and to reach out to persons bullied (for example, communication skills, problem-solving/coping with bullying situations through role-playing, videos)
 - e. Building collaboration with others, residents, staff and management in working together to reduce bullying and to decrease its impact by supporting those affected by it.
 - f. Opportunities for all residents including those who bully others to assess their behaviour and make changes
 - g. Opportunities for all, including those who bully others, to channel their energy into productive community activities.

9. Implement a system for reporting and acting on reports of bullying. Why? Because residents need to see that talk about bullying leads to action. Bullying is a major barrier to building a respectful, inclusive community.

- a. Take steps to encourage reporting by taking complaints seriously and responding to all reports.
- b. Implement supports for residents or staff who have reported bullying, for residents who were bullied, and for bystanders distressed by what they have witnessed.
- c. Provide opportunities for people alleged to have bullied to examine their behaviour and support those who want to change their behaviour to others. Help all to find positive channels for their energy.

10. Focus on empathy, the capacity to recognize and share another person's feelings. Why? Acts of kindness to people who have been bullied have been found to decrease the negative impact of bullying on the person bullied. Being included in a group and in the facility community also decreases the negative impact of bullying. When other residents are able to "put themselves in another's shoes," they decrease loneliness, risk of social isolation and associated health impact on the residents of their congregate living facility.

An environment that promotes empathy and caring is one that

- a. supports residents who experience challenges such as bullying
- b. supports residents to take a stand to defend themselves and others
- c. holds residents and staff accountable and responsible for their behaviours
- d. involves everyone, all residents, all staff and all management, in building positive relationships and a respectful inclusive community.
- e. Hold regular group discussions about the challenges of communal living and possible solutions to these challenges. Include sessions on making apologies and repairing relationships after being disrespectful.

Examples of initiatives:

- a. Start groups and activities that send a message that caring and empathy are the norm and expectation – for example, a Welcoming Committee to support newcomers so they can feel they are valued members of the community.
- b. Set up a system that recognizes and rewards caring behaviours – for example, a Caring Squad with the responsibility of noticing acts of kindness and rewarding them.
- c. Developing a community newsletter with welcoming messages for newcomers, stories about positive events
- d. Posting signs with kindness quotations or showing empathic communication

Also see Appendix 6 for Tips for Management and Boards, Beyond Bullying

C. Reflection Questions

This reflection will help staff and management begin to understand the individual components of respectful, inclusive community that are important to you. Ask yourself, and/or discuss with colleagues and residents the following questions:

- What makes an individual feel safe?
- What are some unsafe spaces in your housing building, community or workplace?
- How often do you model positive and respectful behaviour to others?
- How do you communicate your thoughts, feelings and ideas?
- How do you demonstrate fairness to others?
- How do you provide support to those being bullied and those who are bullying others?
- How do you intervene in bullying situations and support those involved?(From: Building Respectful Communities: A Toolkit to Recognize and Prevent Bullying Behaviour within Older Adult Organizations and Communities, Winnipeg Regional Health Authority, 2013, Manitoba)

See Appendix 7- 10 Steps for creating a safe environment

D. 5 Rules for Respect

Building a culture of respect begins with the policy, actions, and attitudes of management and staff. When management and staff are able to model respect in their working relationships, it has an effect on the entire system.

Implementing five simple “**rules for respect**” into policy on bullying, and for behaviour between all staff and staff and residents is the beginning of fostering a culture of respect that is enduring.

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1. **Be Present.** People are not distractions from work. They are the focus of the work. When speaking to residents, other staff or management personnel, or visitors, ensure you are fully present to them: set aside anything that might distract you from the conversation. Make eye contact. Show that you are present with the person.
 2. **Listen with Empathy.** Listening to someone is respectful. There is meaning behind the words and listening will bring clarity and understanding. It will show that you believe the person is valuable and what they are saying is relevant.
 3. **Model Gratitude.** An authentic “thank you” grows respect between people. An authentic thank you is specific, acknowledges the time and effort the person gave, and states the way in which their action made a difference.
 4. **Respond and React.** Everyone feels overwhelmed sometimes and it can be tempting to ignore people while attempting to get caught up. Practice responding and reacting positively to people even when the response is, “Sorry, I can’t give you a good response right now.” It is okay to not have all the answers, the point is to respond honestly.
 5. **Be Mindful of Time.** A busy work life means everyone is on a schedule. But working with residents often requires staff and management to slow down their pace in order to better listen and respond appropriately. Being mindful of other people’s time means a balance between being prepared, organized, and brief, and slowing down the pace to listen with empathy, clarify issues, and model respect toward others.

(Adapted from: Karin Dames,
<https://peopledevelopmentmagazine.com/2016/08/26/create-culture-respect/>)

E. Communication Techniques

At the request of staff of several housing facilities we are including a section on communication. The techniques are useful for everyone, management, staff and residents.

1. USEFUL COMMUNICATION TECHNIQUES (Beyond Bullying M1-3)

- Breathe from the belly to keep calm. Place your hand on your belly and feel it move up and down as you breathe in and out.
- Use assertive language for clear communication. This involves stating:
 - What happened, using facts without blame.
 - For example, state: “the chair was blocking the doorway. I had to move it to get into the room.”
 - Your feelings:
 - Expressing feelings begins with “I”, keeping the focus on me. For example, “I felt unsafe when I moved the chair. I thought I was going to fall.”
 - Remember that feelings are neither right nor wrong. They just ARE.
 - Feelings and thoughts are not the same. When you say “I ____ that____” you are expressing a thought. For example, “I feel that you did not want me to go in the room” is not a feeling. The clearer sentence is “I thought you were blocking my way.”
- State what you need
 - For example to feel safe.
- State your request
 - For example, “I am asking that the doorway be kept clear.”

2. Useful Behaviours for Calm Discussion (Beyond Bullying M3-1)

- Community living involves give and take.
- Treat everyone as an equal.
- Respect others’ privacy.
- Think of what you need and what you want. Recognize the difference.
- Listen as though you are hearing what the other person is saying for the first time.
- Know we can only change our own behaviours and attitudes.
- Be aware of your tone of voice. Notice how people react to your “normal” tone of voice.
- Be aware of your body language.
- Avoid using “should” and “must” when referring to yourself or speaking to another person.
- Double-check to know the other’s meaning, “Do you mean ..?” “What I hear you saying is...”

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- Know that we can continue to problem-solve through misunderstanding if we just keep at it.
 - We have choices about our own behaviour.
 - We are all in this together.

3. Healthy Self-Management (Beyond Bullying M5-1)

- Learning to speak up for ourselves to get our needs met is an important skill that can be learned at any age. The only behaviour we can change is our own and substitute negative thought patterns with healthier ones.
- Four Choices to Deal with Stressful Situations
 - 1. Toleration with resentment
 - 2. Protest
 - 3. Separate
 - 4. Tolerate with no resentment
- Assertive, Aggressive and Passive Behaviour
- Assertive behaviour is to stand up for oneself without undue anxiety and to exercise one's own rights without denying the rights of others. It is to communicate honestly and directly.
- Aggressive behaviour is to communicate in a way that infringes on the rights of others. An aggressive person may tend to think that other people are incompetent and stupid and that he is always right.
- Passive behaviour is avoiding conflict and wanting peace at any cost. They will often feel hurt and collect resentments and grudges and get tired of being walked on. Then they resort to passive aggressive behaviour.
- Passive aggressive behaviour on the surface appears friendly and non-threatening but underneath is a thinly veiled hostility or threat.
- For effective interpersonal communication use the words "want" and "wishes" vs. "should" and "musts". "Should" and "must" is an attempt to control others.
- There are specific skills one can learn to be assertive:
 - *Broken record* – repeat needs or viewpoint over and over in a calm manner. No explanation required. "No, I do not want to go shopping with you."
 - *Fogging* – eliminate non-productive arguing; "Yes, I might enjoy shopping, but I am not going".
 - *Negative assertion* – you made a mistake and admit it. End of story. Again, no explanation required.
 - *Negative inquiry* – ask for more negative information. "Why would I be sorry if I buy these shoes?" Get specifics so the person knows they have been heard. Then you can address their concern head on. "Yes, the colour may not be practical, but I am buying them."

-
- *Give yourself a time out:* “I can’t respond to you right now. This is new information to me. Let me think about it and I will let you know.” You don’t have to answer it on the spot. You do not need to answer all questions. At times, you may simply want to respond, “I am surprised that you asked me that.”
 - **Examples of Assertiveness**
 - Self-Disclosure: Your neighbour asks you if you want to go out to dinner. You do, but you do not like fish. An assertive person will use self-disclosure so her preference is known: “Yes I would like to go to dinner but I do not eat fish”.
 - Workable Compromise: A tablemate in the dining room blows his nose in the cloth napkins. You find this behaviour unsanitary and disgusting.
 - “George, I enjoy your company at dinner. I would like to continue to eat together. I want you to use these hankies I bought for you.” A workable compromise does not need to be fair - it just needs to work.
 - It takes practice to develop assertiveness skills and you will likely need to deal with some anxiety. Practicing or “role-playing” with a trusted friend can be very helpful. In addition, try journaling and breathing exercises. It is important to have a positive or neutral feeling towards the person.
 - **Dealing with Criticism**
 - Ask yourself: Is it true or false?
 - If the answer is that it is false, forget it. The other person has the right to be wrong.
 - If it is true, ask yourself: Is it a fault? If you decided that it is true but, from your point of view, it is not a fault, forget it.
 - The person has a right to a different opinion.
 - If it is a fault, thank the person for bringing it to your attention and resolve to try to correct it.
 - **Problem Solving**
 - As we try to change and move from complaining and feeling sorry for ourselves to solving our problems, it is helpful to keep in mind several important points
 - I can only solve my own problems, I cannot solve others' problems. Only they can do that.
 - When I am upset about something, I am the one with the problem. The person I feel made me upset is not the one with the problem. Maybe that person did me a favour - this gives me an opportunity to learn new skills, new ways of reacting, and I can grow from it.
 - There are several steps in problem solving:
 - 1. Identify the problem. Is it truly your problem to solve?
 - 2. Set a realistic goal that is within your control.

-
- 3. Develop a plan to reach the goal.
 - 4. Put the plan into action. Be willing to accept possible consequences.
 - 5. Note your progress. Movement in the right direction is progress! If you are reacting in a less stress-producing way to the problem, that is progress! Perfection may be hard to achieve.
 - **Thinking About Our Thinking** How we think either contributes to our sense of well-being or erodes it. For example:
 - Three Irrational Ideas
 - 1. I must do well or perfectly well in important tasks I choose to perform and must win the approval or love of the people around me or I am a worthless individual.
 - 2. You must treat me considerately and kindly, in precisely the way I want you to treat me and if you don't, you are a bad and worthless person.
 - 3. The conditions under which I live must be arranged so that I get everything I want easily and quickly. Conditions must not exist so that my life is filled with hassles because then life isn't worth living.
 - For an idea to be rational, it must meet at least three of the following criteria:
 - 1. It is factual.
 - 2. It helps you protect your life and health.
 - 3. It helps you achieve your short and long term goals.
 - 4. It keeps you out of significant trouble with others.
 - 5. It helps you feel the emotions you want to feel.
 - Assumption makes an ass of you and me – ass u me
 - When we do not know the details of a situation, we may make assumptions. This makes mutual understanding difficult.

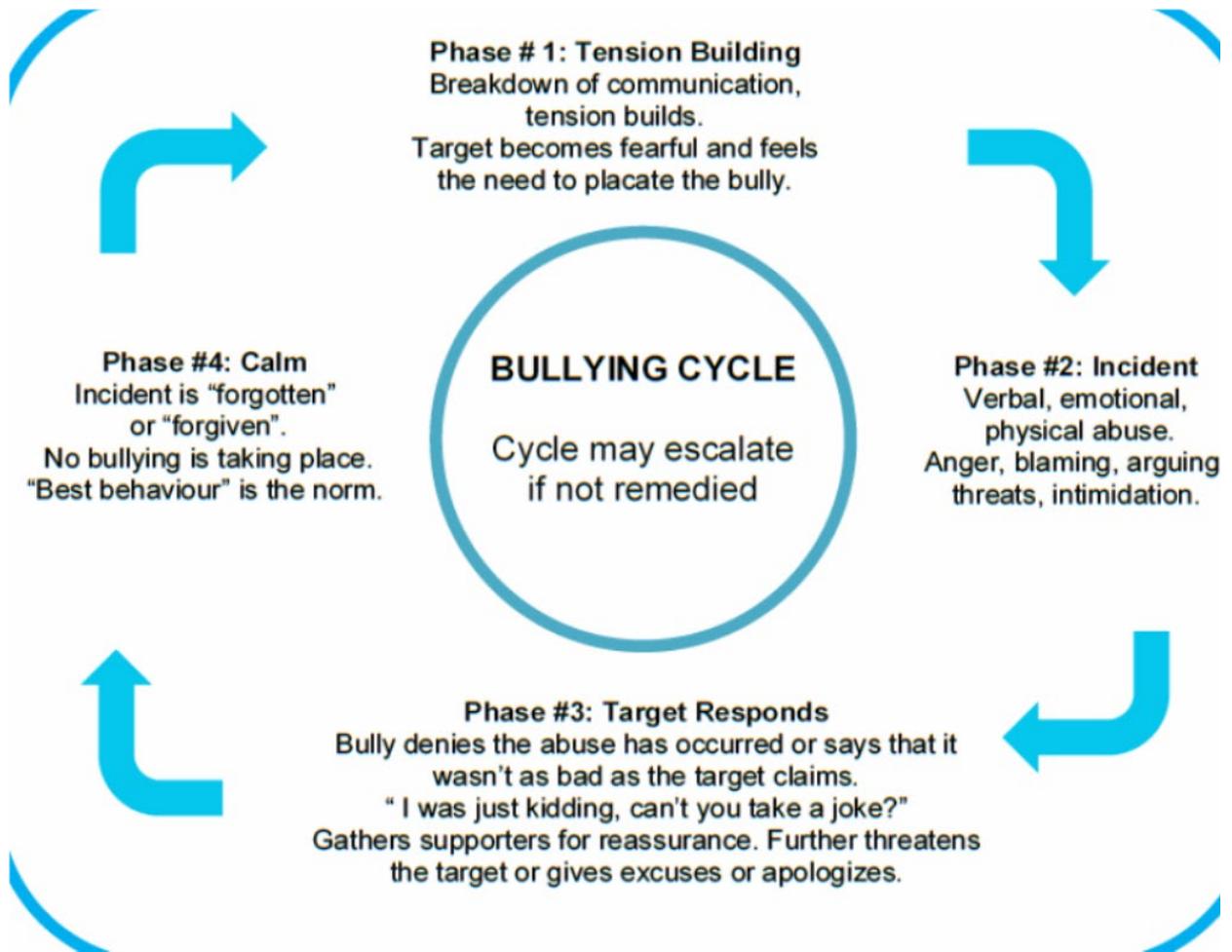
4. ICE BREAKER IDEAS

1. Incorporating an Ice Breaker exercise that does not require a lot of time will help create a relaxed, comfortable atmosphere for the participants.

2. Ideas:

- a. Share something funny about yourself
- b. Share your favourite pass-time activity
- c. 2 truths/1 lie
- d. Name Game- state name and add adjective that begins with same letter and describes them (i.e. Gorgeous George)
- e. Name origin

Appendix 1- The Bullying Cycle



(<http://www.seesa.ca/BB%20Toolkit%2020150818.pdf>, SEESA and Seniors Housing, Alberta, 2015)

Appendix 2-

Why don't we stand up to bullying behaviour?

1. We may wonder "Am I being petty?" "Maybe I'm exaggerating a minor rudeness." "Maybe I shouldn't feel this way."
2. We may feel responsible "Why did I let this happen?"
3. We may think that others will not believe us.
4. We may think that we will not be taken seriously.
5. We do not realize the bully is bullying others. We may think we are the only one.
6. We may be tired or ill and have no energy to resist.
7. We may have come from an authoritarian background where we had to obey an unreasonable parent, older sibling or spouse. We are in the habit of obeying without question. Authoritarian parents, siblings and spouses do not respond to the needs of children. Rules are paramount.
8. We may believe that isolating ourselves is the answer.
9. We may tell ourselves we don't care and focus on outside activities.
10. We may forget that we belong here.
11. We may fear retaliation.

(<http://www.seesa.ca/BB%20Toolkit%2020150818.pdf>, SEESA and Seniors Housing, Alberta, 2015)

Appendix 3- Gundersen Self-Assessment Tool

Bullying Self-Assessment

1. Have you ever been told to stop your taunting behavior because it was hurtful, but you did not stop?
2. Do you make jokes about someone's looks that make others laugh, but make the victim of your joking uncomfortable?
3. Have you ever been told you were mean or were being a bully to someone?
4. Have you ever felt like what you were doing was okay because the other person deserved it?
5. Have you ever felt like what you were doing was okay because the other person did the same thing to you or to others?
6. Have you ever felt what you were doing was ok because everyone else around you was laughing?
7. Have you ever had friends tell you to stop giving someone a “hard time“, but you do it again later?
8. Have you ever purposely excluded someone or told other people to exclude someone at meals, activities, or other places because you did not like something about them?
9. Have you ever continued your behavior even though the target of your actions is clearly upset?
10. Do you sometimes get a rush of excitement when you are able to put someone else down?
11. When confronted about your behavior towards others, have you ever used the line: “I was only joking around, “or “it was no big deal“?

Answer key for Bullying Self-Assessment

1. Individuals who bully others often have difficulty stopping their behavior because it gives them a sense of power over others.
2. Taunting others because of physical appearance, ability, habits, or any other behaviors or situations that make them different is bullying.
3. If another person has cared enough about you to point out this pattern, you might want to take a closer look at why they are so concerned.
4. Individuals who bully often justify their actions by somehow blaming the victim as being annoying, stupid, gay, or somehow deserving of cruelty.
5. If you were bullied, then giving it right back is dangerous because it leads to an escalation of conflict.

6. Bullying behaviours are often socially reinforced because people around laugh. If the behavior gets a good laugh and no one is hurt, that is okay. But if someone is hurt by the behavior or words, it is bullying.

7. Bystanders in your friend group may feel uncomfortable with your bullying behavior but may have difficulty confronting you. If your joke or prank is so good that you need to repeat it, even after you have been told to stop, this is called bullying.

8. Bullying can happen in subtle ways; excluding people, leaving the table when they sit down, cutting them out of conversations, laughing at or criticizing their efforts, trying to isolate them from others, all of this is known as social bullying.

9. Individuals who do not bully discontinue the bullying behavior when they see that their actions have caused harm to the other. Individuals who bully continue the behavior either because they see it causes harm or they don't recognize the other person as capable of having the same emotions. This is called a lack of empathy or moral disengagement.

10. Bullying others can be a source of social power for some. Individuals bully because; they think they can get away with it, they get laughs from their social group, and it makes them feel popular. There are positive ways to make people laugh that don't hurt others. There are positive ways to feel popular without making others feel bad. Bullying behavior is mean spirited.

11. When individuals who bully are confronted, they often try to talk their way out of the problem by minimizing the harm it causes.

(<http://www.togetheragainstbullying.org/bullying-selfassessment>)

Appendix 4-

Beyond Bullying: Building Healthy Seniors Communities Survey

Please do not use any names in this survey.

Please indicate your age group: 55-64 65-74 75-84 85-94 95 or above

How long have you lived in your current residence? _____ years _____ months

How much social contact do you generally like?

daily a few times a week rarely never

Please put a checkmark ✓ to answer Yes or No to the following statements:

When I first moved into my current residence...

I wondered, "Will I fit in?" **yes** **no**

I felt optimistic about making new friends and enjoying activities. **yes** **no**

I assumed I would be accepted as an equal here. **yes** **no**

Generally, people were friendly and welcoming. **yes** **no**

I joined in social functions. **yes** **no**

Comments:

Now that I have lived in my current residence for a while...

Other residents are welcoming and friendly. **yes** **no**

Staff are pleasant and do their jobs well. **yes** **no**

I have friends in this building. **yes** **no**

I attend group activities that I choose. **yes** **no**

I can 'be myself' with the existing groups. **yes** **no**

I feel safe expressing my opinions. **yes** **no**

I volunteer in the building. **yes** **no**

My friends and family are welcome to visit. **yes** **no**

Building rules balance the needs of the residents and the needs of the organization. **yes** **no**

Comments:

I have witnessed or experienced...

Verbal abuse and name-calling **yes** **no**

Malicious gossip, hearsay and telling lies **yes** **no**

Rumours spread based on inaccurate assumptions **yes** **no**

Racist comments to and about other older adults **yes** **no**

Insulting, critical comments about clothing or physical appearance **yes** **no**

Unkind remarks about a senior's individuality or disability **yes** **no**

Disrespectful or condescending speech and treatment of other older adults **yes** **no**

Forming cliques, promoting a climate of "us" versus "them" **yes** **no**

"In group" demanding compliance to opinions in order to be included **yes** **no**

Treating people unfairly and unequally **yes** **no**

Excluding others from participating in activities or social functions **yes** **no**

Scheduling "clique's" activities so no time remains for others' activities **yes** **no**

Shunning or ostracizing others **yes** **no**

Telling older adults they cannot use a common area **yes** **no**

Dismissive behaviour; eye rolling **yes** **no**

Prying into other older adults' private lives **yes** **no**

Harassing visitors of another senior **yes** **no**

Entering another older adults' home without being invited to do so **yes** **no**

Meddling with the private property of other older adults **yes** **no**

Interfering with or damaging other older adults' projects or belongings **yes** **no**

Comments:

Please list any actions or behaviours by others in the building that have helped you feel **welcome and included**:

Please list any actions or behaviours by others in the building when you have felt **unwelcome or excluded**:

Have you found helpful or effective ways to deal with “bullying behaviour”?

What suggestions do you have to further build the sense of community in this building?

Thank you for taking the time to complete this survey.

(<http://www.seesa.ca/BB%20Toolkit%2020150818.pdf>, SEESA and Seniors Housing, Alberta, 2015)

Checklist of Inclusive Community Characteristics

1. Integrative and cooperative – bring people together and work together.
2. Interactive – have accessible community spaces that support social interaction and community activity, including celebrating community life.
3. Invested – places where both the public and private sectors commit resources for the health and well-being of the whole community.
4. Diverse -- welcome and incorporate diverse people and cultures into the structures, processes and functions of daily community life.
5. Equitable – ensure that everyone has the means to live in decent conditions and the opportunity to develop one’s capacities and to participate actively in community life.
6. Accessible and Sensitive – have an array of readily available and accessible supports and services for the social, health, and developmental needs of people, and provide such supports in culturally sensitive and appropriate ways.
7. Participatory – encourage and support the involvement of all their members in the planning and decision-making that affect community.
8. Safe – ensure both individual and broad community safety and security so that no one feels at risk in their homes or moving around building.

*(Adapted from: Peter (Clutterbuck and Marvyn Novick
<http://racialequitytools.org/resourcefiles/clutterbuck.pdf>, Building Inclusive Communities: Cross-Canada Perspectives and Strategies Prepared for the Federation of Canadian Municipalities and The Laidlaw Foundation, 2003.)*

CODE OF CONDUCT (Building Respectful Communities, page 9)

SAMPLE: Congregate Meal Program Code of Conduct

1. Alcohol is not permitted at the meal program. You are not allowed to bring or consume alcohol at the meal program. Under Section 24 of the Manitoba Liquor Control Act, the consumption of alcohol without a license is not permitted in public spaces. The meal program is considered a public space. Open liquor or the consumption of liquor in a public space is illegal and subject to a fine of \$245.

2. Meal program cancellations must be received by the Meal Program Coordinator by 1:00 p.m. on the day of the meal. Food has been purchased and prepared according to the sign up list. The need to cancel late sometimes occurs, but please consider how it affects the meal program. If you cancel late in the day, the food for your meal has already been purchased and prepared. The meal program has already paid for your food. It costs the meal program money when you cancel late. South Winnipeg Seniors Resource Centre (SWSRC) would like to keep the cost of the meal program at \$6.00, but may need to review this if our costs continue to increase. SWSRC may also need to consider charging you for the cost of your meal if you cancel late.

3. Tables are set up by volunteers under the direction of the Meal Program Coordinator. The tables are set up in a way to enable the volunteers to work efficiently and safely. There are a maximum of 8 settings per table to ensure that everyone has enough room to eat safely and the volunteers can move around safely. Safety is our primary concern and it is our goal to have the room set up in the safest way possible in case of an emergency such as fire.

4. Reserving seats is not permitted. It is understandable that you would like to eat with your friends, but there may be times when it is not possible. When you are not able to sit with your friends, or where you usually sit, please be patient. It is a great opportunity to meet new people and make new friends.

5. When new people come to the meal program, please welcome them. The meal program is open to everyone in the community 55 years and older. It is not only for people who live in this building and the surrounding area. It is often difficult to come to a meal program when you do not know anyone. Meal program participants are all ambassadors of the program and as such, it is everyone's responsibility to make newcomers feel welcome.

6. Volunteers are crucial for the success of this program. Volunteers generously share their time and energy. It is important that meal program participants are courteous towards volunteers because without them, we will not be able to run the program. SWSRC is always looking for new volunteers and would be happy to train anyone who is interested.

7. If you have any suggestions for helping make the meal program more successful, I would be happy to discuss them with you. Please give the coordinator a call.

Appendix 7-

Tips for Managers and Boards

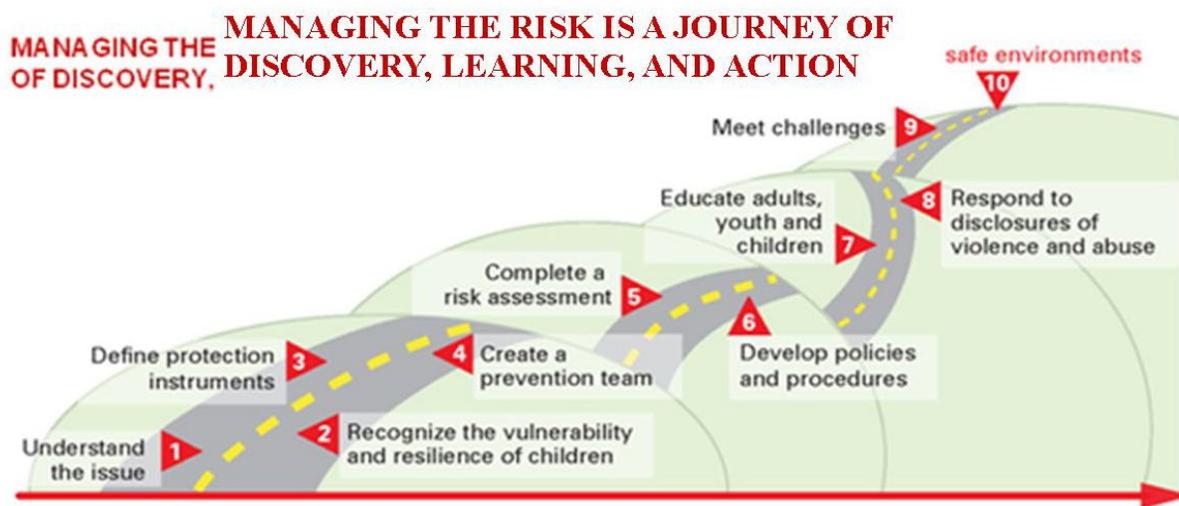
Please note that many of these items are in use at most seniors buildings. This is a summary of items that are important to seniors. There may be a few things you could use.

1. Clear, visible Mission Statement.
2. Clear, visible Vision Statement(s).
3. A procedure for coping with changing needs of residents, such how to adapt the building to resident with changes in vision or changes in mobility.
4. Management contact number, office hours and emergency contact numbers are visible.
5. A welcome package that includes the above information and:
 - a. Clear job descriptions of managers and any building staff.
 - b. Description of Social Club role and responsibilities. Recommend that leadership of the social club rotate and that a position of Volunteer Coordinator is included.
 - c. Encourage residents to volunteer for various activities in the building, such as gardening/tending flowers.
 - d. Expectations of residents, such as use of common areas, management approval required for items placed on doors, etc.
 - e. Description of Resident Council role and responsibilities (not just for complaints!). This could include plans for the future and the expectation that all residents would participate.

10 Steps to creating a safe environment

For more than 30 years, the Canadian Red Cross has been working to address and prevent violence, abuse and bullying. Through this work, the Canadian Red Cross recognized that, in order to reduce violence, it is necessary to identify and address the risks. The Ten Steps process is a best practice of the Canadian Red Cross and is integrated into all violence prevention work in Canada and internationally.

The Ten Steps process outlines the concrete actions that an organization or community can take to create a healthy environment.



1. Understand the problem

Violence, abuse and bullying have no boundaries and can affect anyone of any gender, age, community, background, belief or status. Although the problem of violence, abuse and bullying is complex, it is something that can be prevented.

2. Recognize vulnerability and resilience of individuals

Although, bullying can affect people of all ages, there are situations that can increase a person's risk of experiencing it. Older adults may be at an increased risk of experiencing bullying due to social isolation, physical and economic dependence and limited access to support systems.

3. Define protection instruments

Organizations need to be aware of the international and national laws that protect people from experiencing bullying. It is also important for organizations to understand their responsibility to protect staff and older adults from harm, including bullying.

To review the national and provincial laws, visit www.redcross.ca/protectionlegislation.

4. Create a prevention team

Teamwork is necessary in order to develop, implement and monitor an ongoing strategy to create a safe environment and prevent abusive or bullying behaviour. It is important for the prevention team to represent the diversity of the organization and to involve the organization's leadership.

This team will need to ensure that the mission and vision of the organization is clearly outlined and determine how the prevention team will work together toward a respectful community.

5. Complete a risk assessment

A risk assessment measures the potential for violence or bullying to happen. By identifying the potential areas of risk, an organization can take steps to reduce the likelihood of violence or bullying incidents.

For sample community and organization risk assessments, visit www.redcross.ca/tensteps to download the resource guide.

6. Develop policies and procedures

Managing the risk of violence and bullying incidents can start through the development, implementation and monitoring of policies and procedures. A few key policies that create a foundation for safe environments include a code of conduct and a harassment policy.

Review the sample documents section for examples of Code of Conduct and Code of Behaviour policies.

7. Educate staff, older adults and caregivers

Providing education about how to prevent and respond to bullying increases everyone's sense of ownership and responsibility in creating safe environments. It is important to provide education to older adults, staff, visitors and family, and external partners to ensure that everyone is aware of their rights and has the knowledge to recognize and respond to situations that arise.

8. Respond to disclosures of violence and bullying

Someone may become aware of violence or bullying after a person shares their experience or accidentally through a change in their behaviour. Either way, it is important for the person experiencing harm to feel heard and to have help accessing support from family or organizations in the community. The primary focus is to ensure that the person is safe.

9. Meet the challenges

There may be individual or organizational barriers in implementing these different steps, but it is important to remember that this process will help increase the safety and respect for everyone. It will take time, but it is worth the short and long term benefits of safety for everyone.

10. Maintain a safe, respectful environment

It is important to continuously monitor and evaluate the policies, procedures and best practices that have been implemented in your organization.

Peer bullying in seniors' subsidised apartment communities in Saskatoon, Canada: participatory research

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What is known about this topic

- The home environment assumes greater importance for older adults as health constraints limit their life spaces.
- Safety and security of older adults may be compromised in a communal living environment because of heterogeneity in perspectives on civility and living in community.
- Seniors' communal living spaces may lack the resources and infrastructure to address peer-to-peer bullying.
- A methodology for screening and gathering data on peer-to-peer bullying for seniors living in communal spaces is described.
- A survey instrument adapted from similar work with youth has undergone initial testing for use with seniors.
- Strategies to address bullying among seniors are described.

Introduction

As individuals grow older, the physical and social environments that constitute 'home' assume increasing importance when life space mobility (the size of the spatial area than a person purposefully moves through in daily life) becomes restricted as a result of health, social and cognitive constraints (Iwarsson et al. 2007, Rantakokko et al. 2013). The safety and security typically associated with one's home can be compromised for individuals residing within seniors' communal housing because of colocation with a heterogeneous group of older

What this paper adds

Abstract

Given that 'home' is the major physical-spatial environment of many older adults and that home, social and neighbourhood environments are well-recognised to impact both the ability to age in place and quality of life in this population, a better understanding of the nature of social interactions within seniors' communal living environments is critical for health promotion. This paper describes a two-phase participatory research study examining peer bullying by older adults conducted in April and May, 2016. Responding to needs expressed by tenants, the objectives of this study were to identify the nature, prevalence and consequences of peer bullying for tenants of two low-income senior apartment communities. In collaboration with the local Older Adult Abuse Task Force, a screening survey on bullying was distributed to all tenants. Findings (n = 49) indicated that 39% of tenants had witnessed peer bullying and 29% had experienced bullying by peers. An adapted version of a youth bullying survey was administered in follow-up face-to-face interviews with 13 tenants. The most common forms of peer bullying were deliberate social exclusion and hurtful comments. The majority of respondents indicated that bullying was a problem for seniors and that bullies hurt other people. Outcomes of bullying included feelings of dejection and difficulties conducting everyday activities.

Keywords: community care, elder abuse, participative methods, scale development, seniors

adults who may or may not share similar values and perspectives on civility and living in community (Felblinger 2009, Aarhus et al. n.d.).

In response to reports of bullying by other tenants from older adults living in low-income subsidised apartment buildings, a participatory research project was initiated in collaboration with members of the Older Adult Abuse Task Force from the Saskatoon Council on Aging. While peer bullying has been well-recognised as a problem in schools and workplaces, there has been relatively little examination of the negative social interactions that occur between older adults who co-reside in apartment buildings and the impact of these interactions on quality of life. Peer bullying in subsidised seniors' communal dwellings is of particular concern, given that this is a population recognised to be at risk for physical, emotional and cognitive vulnerabilities (Wu et al. 2015), often have limited access to social and instrumental supports (The National Seniors' Council, 2014) and who may have few options for securing alternate accommodations. The objective of this project was to identify the types, prevalence and consequences of peer bullying for tenants of two low income senior apartment communities.

Background

'Home' is a place that ideally provides security, freedom, tranquility and privacy (Hellberg et al. 2011) and supports the achievement of important life goals. The social environment is an integral component of home. Social environments 'encompass the physical surroundings, social relationships and cultural milieus within which defined groups of people function and interact' (Barnett & Casper 2001, p. 465) and are well-recognised to affect both quality of life and functioning of older adults (Lawton 1990, Iwarsson et al. 2007, Greenfield 2011).

Seniors' housing complexes are often marked by co-location of people with little in common and which require active construction by tenants to constitute a cohesive community (Faircloth 2001). Older adults' comfort with their communal living accommodations can be more highly influenced by their subjective interpretations of the residential setting than objective measures of the setting (Smith & Sylvestre 2008). Subjective interpretations include appraisals of social interactions between tenants.

Older adults living in designated seniors' apartments are less likely to have access to social supports, but more likely to experience compromised social networks and health and mobility issues (Sepe 2015). Low-income seniors, in particular, experience significant challenges to aging in place in their previous family homes due to financial constraints limiting maintenance or needed adaptations of their living environments (Stone 2013–2014). These individuals are often confronted with limited choices for appropriate and affordable housing, particularly in the face of factors such as declining health, the need for companionship, the desire to be free from home maintenance and a wish to avoid burdening family create the need to relocate from their previous residence (Oswald et al., 2002; Krout et al. 2002, Bekhet et al. 2009, Ewen & Chahal 2013, Wu et al. 2015). Higher probabilities of having to relocate from the family home are associated with older age, low education, lower social class and living in rural or socially deprived areas (Wu et al. 2015).

Lawton's Environmental Press Model (Lawton & Nahemow 1973)

suggests that an older adult's competencies (physical and functional health, cognitive and affective functioning and quality of life) interact with environmental press variables (home, social and neighbourhood environments) to determine how well a person functions, highlighting the critical role of the quality of the environment in which a person for healthy ageing (Iwarsson et al. 2007, Rantakokko et al. 2015). Negative affect and maladaptive behaviours are more likely and ageing in place less likely to occur when demands from social or physical environments exceed the resources of the older adult (Lawton et al. 1997). Social isolation can be an important outcome of high environmental press, compromising quality of life and the ability to maintain independence in the community (Nicholson 2012, The National Seniors' Council, 2014). Experiencing negative social interactions such as bullying within the social environment can have significant implications for ageing in place and quality of life.

The American Psychological Association (APA 2016) defines bullying as a type of aggressive behaviour in which someone intentionally and repetitively causes discomfort to another person. Bullying can include physical contact, words or more subtle actions. It involves an actual or perceived imbalance of power and the person being bullied typically has a hard time defending him or herself (APA 2016). Bullying includes physical, verbal or antisocial behaviours that occur in social relationships and cause the victim emotional distress. Antisocial behaviours are defined as gossiping, excluding, ignoring, spreading rumours or using negative body language (Bonifas & Frankel 2012a).

While relatively little research has been conducted on peer bullying in older age, it is anticipated that the consequences may be similar to those found in younger persons: reduced self-esteem, feelings of rejection, depression, anxiety, suicidal thoughts, health problems, decreased ability to perform activities of daily living, changes in eating and sleep patterns, and increased talk of moving out (Bonifas & Frankel 2012a). Sepe (2015) found bullying by other seniors was a common problem among 20 older adults in retirement homes or assisted living communities. One quarter of the 111 older adult participants in a study by Rex-Lear (2011) reported having ever been bullied, with current victimisation being significantly related to self-reported health problems. Benson (2012) examined relational aggression victimisation among 176 seniors in three independent living communities and reported that victimisation was significantly correlated with key measures of subjective well-being (life satisfaction, loneliness, positive and negative affect, anxiety and depression). Older adults were found to be targets for bullying when they deviated from the norms related to independence within that environment. Seniors requiring special assistance were found to be at risk for bullying, resulting in self-denial of necessary assistance such as personal caregivers and assistive devices because of the stigma (Benson 2012) associated with these 'weaknesses'.

Context

The study took place during the months of April and May 2016 in two urban, public housing apartment buildings for low-income persons aged 55 years and older in Saskatoon, Canada. The buildings contain 251 apartments and house a diverse group of seniors, ranging from those who were employed and independent to those who were housebound and living with severe physical and cognitive impairments. The buildings are under the jurisdiction of Saskatoon Housing Authority (SHA, 2016). Maintenance, hairdressing and reception staff are available weekdays. Occasional

social programming is offered. Home care services are provided to eligible tenants through the public healthcare system.

During the course of a previous project relating to the non-medical support needs of seniors, several tenants of one building reported concerns about bullying by other tenants that limited social participation and activity. Given that we had been working collaboratively with members from the Saskatoon Council on Aging, discussions were initiated with their Older Adult Abuse Task Force. Concerns about peer bullying by seniors had been raised in other venues, making investigation of these concerns a priority. A meeting was held with the management of the housing authority to discuss strategies for data gathering. The decision was made to explore the nature, prevalence and consequences of bullying in two subsidised seniors' housing apartment complexes.

Methods

Participatory research (PR) refers to the co-construction of research through partnerships between researchers and people affected by the issues being studied (Green et al., 1995; Jagosh et al., 2012). This methodology that holds significant promise for helping to understand and address complex social

issues faced by older adults, while simultaneously contributing to individual and community empowerment (Blair & Minkler, 2009; Fenge, 2010; Giunta & Thomas, 2013; Ross et al., 2005). PR was chosen as the methodology for this project to ensure the unique perspectives of seniors were well-represented in the investigation of this sensitive topic.

Individuals and groups to whom the research applies contribute to key features of PR: defining the research questions; carrying out the research itself; building community capacity while gathering and interpreting data; disseminating research findings; and using the findings as the basis for social action (Blair & Minkler, 2009). Three members who were seniors themselves from the Older Adult Abuse Task Force were full participants in all phases of the design, implementation and evaluation of this project. Ethics approval for this project was received from the University of Saskatchewan Behavioral Research Ethics Committee (14-262).

An announcement regarding the project was provided in the tenant newsletters at each location with a description of the study and data collection methods 2 weeks prior to the distribution of screening cards. Because this method of notifying tenants had been found most effective by management, screening cards were hand-distributed under the door of each of the 251 apartments in the complexes. The cards were clearly marked as originating from the University and the Council on Aging. A simple definition of bullying was provided on the cards, as well as two simple 'yes/no' questions (i) Have you been bullied in the last 12 months? (ii) Have you seen another tenant being bullied in the last 12 months? While the screening cards (Figure 1) could be completed anonymously, tenants were invited to provide their contact information if they were interested in participating in a longer follow-up. Tenants were given 2 weeks to deposit the cards in a locked box in the building library.

The follow-up questionnaire (see supplemental materials) administered to tenants agreeing to be interviewed was adapted from the Bully Survey previously used to assess bullying in high school students (Swearer et al. 2008). Members of the Older Adult Task Force reviewed the original survey and suggested revisions to the items. Revisions were made to make the items appropriate for seniors living in communal settings, with opportunities to share narratives as desired by the participants built into the

The Saskatoon Council on Aging and researchers from the College of Medicine, University of Saskatchewan are interested in finding out how often seniors experience bullying in their home environments. Please answer yes or no to these two questions and return to the locked box in the library by (one week hence).

Have you been bullied in the last 12 months?		Yes	No
Have you seen another tenant being bullied within the last 12 months?		Yes	No
<p>Figure 1 Screening card.</p> <p>interview process. The four sections of the adapted survey were: (i) when you were bullied by others; (ii) when you saw other people being bullied; (iii) when you bullied others and (iv) your thoughts on bullying. After obtaining</p>	<p>What is bullying?</p> <p>Bullying happens when someone hurts or scares another person on purpose and the person being bullied has a hard time defending himself or herself. Usually, bullying happens over and over. Examples include:</p> <ul style="list-style-type: none"> • Punching, shoving, and other acts that hurt people physically • Spreading bad rumours about people • Keeping certain people out of a "group" • Teasing people in a mean way • Getting certain people to "gang up" on others 	<p>We would like to invite you to take part in a private interview on bullying that would last around 30 minutes.</p> <p>If you are interested in being interviewed, please provide your first name and telephone number or email address below.</p> <p>First name: _____</p> <p>Telephone/Email: _____</p> <p>A team member will contact you to set up an interview at a time that works best for you.</p> <p>Thank you for your participation.</p>	<p>Data analysis</p> <p>Data from the both screening cards and the survey were entered into SPSS v. 24 (IBM Corp, 2016) and descriptive statistics generated. Summative scores were generated from the OPQOL-brief. The handwritten notes taken at the time of the interview were</p>
	<p>informed consent, follow-up interviews were conducted by members of the Older Adult Task Force and the research assistant in the location of the participant's choice. Participants were also asked to provide their recommendations for action to address peer bullying in seniors' housing complexes.</p> <p>Quality of life was measured for survey respondents using the 13-item Older Person's Quality of Life – Brief Measure (OPQOL) (Bowling et al. 2013). Examples of items included in this scale are: 'I enjoy my life overall' and 'I feel safe where I live'. This measure is a highly reliable and valid measure of quality of life for older adults. Cronbach's alpha for the 13 items was reported as 0.876 (Bowling et al. 2013). Quality of life was considered to be a primary outcome that could potentially reflect the impact of bullying for older adults. The theoretical range for this 5-point response scale is 13–65, where higher scores indicate better quality of life (Bowling et al. 2013). The mean score on this scale for a population-based sample of older people was 54.93 with a standard deviation of 6.11 (Bowling et al. 2013).</p>	<p>transcribed, allowing for key quotes to be captured from the subjects in a timely manner and additional salient details captured.</p> <p>In keeping with the participatory nature of this project, the members of the Older Adult Task Force reviewed the results of the screening and the surveys and discussed the implications of the findings with the researchers.</p> <p>Results</p> <p>Forty-nine of the 251 screening cards were returned (response rate of 20%). Nineteen (39%) respondents indicated they had witnessed peer bullying occur within their complex within the previous 12 months, while 12 (29%) respondents reported they themselves had been bullied in that timeframe. Fourteen tenants provided contact information for the follow-up interview, but one could not be reached. The remainder of these results relate to survey respondents.</p> <p>Table 1 displays the sociodemographic characteristics of survey respondents, who ranged in age from 55 to 91 years of age with a median age of 72. The majority (11) were white persons. The median length of tenancy was 66 months, with a range from 5 to 192 months. Close to half self-rated their health as good. The majority had contact with family and friends once a week or more. All respondents had a quality of life score on the OPQOL that fell below the previously reported population mean of 54.93. Eight had witnessed bullying and 10 of the 13 had personally been bullied in the past 12 months.</p> <p>Peer bullying was reported to have occurred almost exclusively in the public areas of the buildings, particularly in the lobby or main areas and often in the presence of other people. Six of the 10 respondents who had been bullied reported that it occurred once or more every few months. The majority of bullying reported in this study occurred in the lobby area of the buildings, where the majority of common gathering areas (e.g. shuffleboard tables, etc.) are located. Several participants noted the use of avoidance of these areas by that using alternate entrances.</p> <p>Types of bullying</p> <p>Table 2 displays the frequency with which the various types of bullying identified on the survey were reported. The most frequently reported types of bullying were verbal and antisocial behaviours such as deliberate social exclusion, hurtful comments and humiliation. Additional forms of bullying,</p>	

including gossip, threats, mean jokes and harassment (e.g. having a doorbell rung repeatedly in the middle of the night) were identified by participants.

Verbal bullying was most commonly reported. Physical

appearance served as a particular target for comments ('being poor, ugly and not having as nice clothing as other people'). One respondent was repeatedly ridiculed as being 'fat' by multiple other tenants. Bullies in the lobby area made public comments such as 'Are you going to eat that all at once?' when this participant walked in with grocery bags.

Table 1 Sociodemographic characteristics

	N = 13 (%)
Age	
55–65 years	4 (30.8)
66–76 years	3 (23.1)
77 years or more	6 (46.2)
Sex Female	12 (92.3)
Ethnicity	
Caucasian	11 (84.6)
Other	2 (15.4)
Duration of tenancy	
24 months or less	5 (38.5)
25–84 months	6 (46.2)
85 months or more	2 (15.4)
Self-rated health	
Poor	1 (7.7)
Fair	3 (23.1)
Good	6 (46.2)
Very good	3 (23.1)
Contact with family members	
Once a week or more	11 (84.6)
Less than once a week	2 (15.4)
Contact with friends	
Once a week or more	11 (84.6)
Less than once a week	2 (15.4)
Older people's quality of life scale score	
Mean score	43.5 (SD = 8.2)
Median score	46
40 or less (poorer quality of life)	6 (46.2)
41 or higher (better quality of life)	7 (53.8)

Several participants, including one who was blind, were ridiculed for needing assistive devices such as canes and walkers, which resulted in them not using them, despite necessity. One participant received a note about her piano playing ('Your piano playing is God-awful' and 'You are too senile to play the piano anymore. Give the job to someone else'). One participant noted the similarities between the social environments of seniors' housing and high school.

Antisocial bullying behaviours occurred frequently. Eight respondents felt they had been deliberately excluded

from groups. One respondent stated that on multiple occasions, when she approached a table of other women in the dining room and asked if she could sit with them, she was told, 'there is no room here', despite there being empty seats at the

Table 2 Types of bullying experiences (n = 13)

Type of bullying	Frequency (n = 13)
Won't let me be part of their group	11
Said mean things behind my back	11
Made fun of me	6
Called me names	8
Nobody would talk to me	4
Said they would do bad things to me	3
Attacked me	3
Pushed or shoved me	1
Wrote bad things about me	1
Broke my things	0

table. Five participants had experienced times when no one would talk to them, including being ignored when they spoke to another person or spoke up in a group of people.

Consequences of bullying

All respondents who had been bullied reported negative consequences, mostly frequently being ‘made to feel bad or sad’. Eight participants reported that bullying resulted in problems not identified on the questionnaire including: loss of sleep, stress, anger, worry and embarrassment.

Respondents were asked to speculate upon the motivations for the bullying behaviours. Participants stated that the bullies ‘like to control other people’, ‘are on a power trip’ or ‘think they have authority’. Selfblame for the bullying was also evident in responses such as: labelling themselves ‘an easy target’, having low self-esteem and being unable to fight back.

Respondents who had witnessed bullying most frequently responded that it ‘made me feel sick’ and ‘made me feel sad or bad’. Difficulty making friends was another consequence reported of witnessing bullying. Some also reported being reluctant to leave their apartments or found it difficult to get things done. Other consequences reported included feeling stressed and angry on the victim’s behalf.

The questionnaire included items relating to the bullying by the respondent. While no respondents felt they had definitely bullied another tenant, a few were unsure whether they had or had not.

Attitudes towards bullying

Attitudes towards bullying were elicited in the final component of the questionnaire. The majority of

Table 3 Attitudes towards bullying (n = 13)

	Totally false	Sort of false	Both true and false	Sort of true	Totally true
Most people who get bullied ask for it	8	3	1	1	0
Bullying is a problem for seniors	0	1	1	2	9
Bullies are popular	4	2	1	4	2
I don't like bullies	0	0	1	0	12
I am afraid of the bullies in my building	6	1	3	1	2
Bullying is good for wimpy seniors	13	0	0	0	0
Bullies hurt other people	0	0	0	1	12
I would be friends with a bully	8	0	3	1	1
I can understand why someone would bully other people	8	0	4	0	1
I think bullies should be punished	3	1	1	2	6
Bullies don't mean to hurt anyone	8	1	2	2	0
Bullies make people feel bad	0	0	0	1	12
I feel sorry for people who are bullied	0	0	0	1	12
Being bullied is no big deal	12	1	0	0	0

respondents indicated that bullying was a problem for seniors; that bullies hurt other people; made them feel bad; and bullies were not liked. Close to half reported being afraid of bullies and agreed that bullies should be punished, although this item received the widest range of responses (Table 3).

Few resources were available in these environments to address bullying behaviours and their consequences. Participants provided a number of recommendations to address peer bullying encountered in seniors’ communal housing environments, including: development of anti-bullying policies; offering counselling, particularly for the bullies; education of both staff and residents; and encouragement of staff involvement in dealing with bullying within the facilities.

Many of the study participants explained that they had nowhere to go for help with bullying. Their family members tend to minimise the problem and building staff members rarely intervened.

Discussion

Peer bullying among seniors can be a serious problem creating negative psychosocial consequences, particularly for vulnerable older adults living in subsidised apartment complexes with heterogeneous populations and few services. Over one quarter of respondents to the screening survey reported having been bullied, which is in keeping with Sepe's (2015) account. Negative social interactions such as deliberate social exclusion and hurtful comments were the most common forms of peer bullying identified. Consequences of being bullied included symptoms of emotional and/or physical distress, supporting the findings of Bonifas and Frankel (2012a).

While the population and setting of seniors' housing markedly differ from either schools or workplaces, there is promise in examining strategies that have been undertaken to promote respectful climates in these environments. Schools have recognised the importance of focusing bullying interventions at the level of the student, the school and the community (Power-Elliott & Harris 2012, Wang et al. 2013). Similarly, interventions in senior living communities should be targeted at both the resident level and, more importantly, the organisational level (Bonifas & Frankel 2012b).

Given that students have been found to be more likely to engage in bullying if the climate is negative (e.g. non-supportive, unfair, high in conflict) and if they perceive bullying behaviours to be the norm (Wang et al. 2013), assessment of the social climate of seniors' housing would allow interventions to be tailored to local group norms, thereby facilitating uptake. Behavioural norms and expectations should be clarified in order to set a standard for how people should be treated. These standards should be embedded in the operation of the building (Parker 2011).

A focus on empathy can help to build a culture of trust and respect in which people are held accountable for their actions and are more likely to take a stand to defend themselves and others (Bonifas & Frankel 2012b). The use of posters and other visual aids that promote a respectful environment (Black et al. 2010) could be useful in senior living communities. Information sessions or available written resources on empathy, tolerance and dignity might also be helpful (Cardinal 2015).

Creating a respectful climate demands the engagement and commitment of tenants, staff and management to collaboratively construct and sustain a community that promotes dignity. Bonifas and Frankel (2012b) suggest starting by asking tenants how they think bullying can be reduced in their environment. Seeking victim input is important in that it promotes social empowerment (Black et al. 2010). Schools have improved relationships by reducing school size and creating small communities within larger schools (Wang et al. 2013). For larger senior housing buildings, smaller communities could be created within naturally occurring neighbourhoods such as halls or wings. Tenant committees could focus on recognising and rewarding respectful behaviour.

Training for both tenants and staff can facilitate problem-solving and conflict resolution skills (Wang et al. 2013) and promote civility (Felblinger, 2009). External mediators may be needed where interpersonal conflict cannot be resolved (Cardinal 2015).

While the bullying may only directly involve a few people, these behaviours often occur in the presence of bystanders. In this study, most of the bullying incidents were witnessed by another person. Bystanders can actually perpetuate the problem, either by actively joining in the bullying or by not standing up to the bully on the victim's behalf (Black et al. 2010, Olweus & Limber 2010, Wang et al. 2013). Education for residents about the importance of actively supporting for those who are bullied, rather than being a passive bystander, could significantly help reduce bullying in senior communal housing.

Just as schools are advised to have a process in which a student can file an official complaint about bullying (American Humane Society, 2016), senior housing organisations might also consider implementing anti-bullying policies and systems to report incidents of bullying. It would offer formal support for victims of bullying as well as create a deterrent for bullies. Every report should be accepted as real and responded to by staff (Black et al. 2010). The challenge to implement this recommendation resides in the low staff resources that often characterise seniors' housing.

The majority of bullying reported in this study occurred in the lobby area of the buildings, where the majority of common gathering areas (e.g. shuffleboard tables, etc.) are located. While the layout of existing buildings is difficult to alter, thought should be given to the need of more private entrances when designing new buildings. Situating the building office or a front desk near the entrance would help to have staff easily accessible and able to monitor some of the interactions between residents.

All of our survey respondent respondents scored below the previously reported population mean on the quality of life measure. This suggests that it would be useful to conduct a comparative study of quality of life in older adults who had experienced bullying and those who had not in order to determine whether these two variables might be associated with one another.

Limitations

Given the dearth of research related to peer bullying in the older adult population, no screening tools or survey instruments were available that had been validated for this group. As a result, we worked closely with our partners from the Older Adult Abuse Task Force to develop the screening questions and adapt the youth bullying questionnaire to reflect the context of seniors in subsidised housing. Use of a participatory approach in collaboration with members of the Older Abuse Task Force was helpful, particularly in the design and interpretation phases.

Further adaptation of the survey will be required to incorporate findings that were not captured on the survey (e.g. consequences such as problems sleeping) before using it again. Validation of the adapted survey in this population will be needed with a larger sample size of seniors.

Because the topic of bullying among seniors was considered to be a sensitive topic and we were uncertain about the willingness of tenants to respond to questions on this subject, we deliberately limited the scope of this study to focus on the survey items in an effort to limit participant burden. Measures such as life space mobility, personal assertiveness, past history of interpersonal relationships and peer culture could shed important light on factors associated with senior bullying in future studies.

While respondents indicated that they appreciated the opportunity to discuss their situations face-to-face with the interviewers, future research could determine whether a mail-in survey would result in a higher response rate. A mail-in survey, however, might preclude the participation of persons with disabilities, so a comparison of alternate forms of engaging respondents could be undertaken in future work.

We hypothesise that the low response rate to the screening survey is the result of several factors. Given the diversity of the tenant populations within these two complexes, there was likely a high proportion of tenants who did not feel that bullying was an issue for them. People who were in good health, mobile, employed and otherwise felt secure may not have been interested in this topic. Those who were in poor health, living with dementia or housebound may not have had the capacity to respond to the questionnaire; some of these people may also have limited interactions with other tenants in the buildings. In spite of our efforts to promote confidentiality, some residents may have been hesitant to participate for fear of being identified (i.e. being seen depositing the card in the library, having a neighbour see the researcher enter their suite, etc.). Because bullying is a sensitive topic, accounting for the local context and developing ongoing relationships of trust between researchers and tenants will continue to be important elements of planning for future research.

Conclusion

Our findings suggest that peer bullying among seniors has similarities to bullying among youth in prevalence, type and consequences, although it is an under-recognised issue in a population lacking the resources available to youth. Strategies to reduce peer bullying among seniors should focus on the creation of safe and respectful living environments.

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Supporting Information

Additional supporting information may be found online in the supporting information tab for this article.

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