

## National Bullying Prevention Campaign Gains Momentum

The Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services has launched a multiyear national bullying prevention campaign—"Take a Stand. Lend a Hand. Stop Bullying Now!"—to address this critical problem, which has gained increased attention since the Columbine school shootings in 1999. The campaign's goal is to actively engage youths aged nine to 13 years and people who shape their world—including parents, teachers, and media organizations—in a comprehensive, research-based effort to change the environment in which bullying occurs.

The campaign, which got under way in March 2004, was developed by HRSA in partnership with more than 70 health, safety, education, and faith-based organizations. A youth expert panel of 18 children aged nine to 13 years provided creative direction for the campaign to ensure that its materials appealed to young people. The youth panel members, who came from cities, suburbs, and small towns, gave the campaign its name, shared personal stories of bullying or being bullied, and recommended ways for adults to take a stand against bullying without making the situation worse.

The rallying place for the campaign is the Stop Bullying Now Web site—<http://stopbullyingnow.hrsa.gov>—with portals for both children and adults. The creative input of the youth panel is evident in the animated "Webisodes" on the children's site, which feature a revolving cast of 22 characters—bullies, victims, onlookers, teachers, a coach, and parents. The site for adults has information for school administrators and teachers, health professionals, and law enforcement personnel as well as parents. A resource kit offers more than 20 fact sheets—either in a downloadable PDF format or for ordering at no cost. One fact sheet, "Misdirections in Bullying Prevention and Intervention," explains why zero-tolerance policies, conflict resolution and peer mediation, and group treatment for children who bully are not recommended inter-

ventions. Another fact sheet provides tips for parents about how to talk with educators at their child's school if they suspect that their child is being bullied. A list of research-based articles and books on bullying and peer victimization is also available.

The site encourages schools and community and business organizations to "take a stand, lend a hand" by joining the campaign. The communications kit for partner organizations contains information about how to order radio and television public service announcements. Partner organizations can sign up for an online newsletter and download PDF files of brochures, posters, and campaign logos. The growing list of partner organizations includes the American Academy of Pediatrics, the American Medical Association Alliance, the American Public Health Association, the National Association of Broadcasters, and Coca-Cola Enterprises.

The campaign materials describe bullying as aggressive behavior that is intentional and repeated over time and involves an imbalance of power or strength. Bullying can take many forms: physical bullying, such as hitting or punching; verbal bullying, such as teasing or name-calling; nonverbal or emotional bullying, such as intimidation through gestures or social exclusion; and cyber bullying, which involves sending insulting messages by e-mail. Studies show that between 15 and 25 percent of U.S. students are bullied with some frequency ("sometimes or more often"). Fifteen to 20 percent of surveyed students reported that they bully others with some frequency. Children who are bullied are more likely than other children to be depressed, lonely, or anxious; to have low self-esteem; to feel unwell; and to think about suicide. The fear of being bullied may keep as many as 160,000 students out of school on any given day. One in four children who bully will have a criminal record by the time they are 30 years old.

The campaign materials describe some signs that a child is being bullied.

A child may come home with torn, damaged, or missing pieces of clothing, books, or other belongings or have unexplained bruises, cuts, or scratches. A child may seem afraid of going to school, walking to school or riding the school bus, or taking part in organized activities with peers. Children who bully share some characteristics. They are impulsive, hot-headed, dominant, and easily frustrated. They lack empathy, have difficulty following rules, and view violence in a positive way. Although the campaign materials point out that there is no single cause of bullying among children, they cite research findings of family risk factors for bullying, including a lack of parental warmth and involvement, overly permissive parenting, a lack of parental supervision, harsh physical discipline, and bullying incidences at home.

The material for adults notes that one of the best ways an adult can help stop or prevent bullying is to be educated about and sensitive to the issue. Although many adults were bullied as children and can readily sympathize, bullying is often viewed by adults as a rite of passage—an undesirable, but sometimes unavoidable, reality of growing up. A primary goal of the campaign is to make it clear that such an attitude creates an environment that overtly or covertly supports bullying. The campaign seeks to raise awareness of bullying as a serious public health issue that affects thousands of young people every day and that causes lasting damage to some individuals.

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## SAMHSA Launches "Too Smart to Start"

The Substance Abuse and Mental Health Services Administration (SAMHSA) has launched a new national program to discourage preteens (children aged nine to 13 years) from initiating alcohol consumption.

Announced at a press briefing in April, the "Too Smart to Start" initiative is designed to provide research-based strategies and materials that target both children's and parents'

views on underage drinking. The materials include a community action kit containing "SmartSTATS: A Data Book," public service announcements, posters, and booklets as well as a board game. A dedicated Web page ([www.toosmarttostart.samhsa.gov](http://www.toosmarttostart.samhsa.gov)) provides information about communicating with and helping youths remain alcohol free, including games and puzzles for youths and for their parents and caregivers.

At the press briefing, which was attended by First Ladies Hope Taft of Ohio and Mary P. Easley of North Carolina, SAMHSA Administrator Charles G. Curie pointed to data from SAMHSA's National Survey on Drug Use and Health, which indicates that approximately 11.6 percent of 12-year-olds report having used alcohol at least once; the percentage more than doubles by age 13 and is greater than 50 percent by age 15. "We have to reach out to nine- to 13-year-olds now, before they drink, and provide health messages that will resonate with them and with their parents," Curie said. He noted that more than 2.6 million adolescents aged 12 to 17 years were binge drinkers in 2002 and that 630,000 were already heavy drinkers. "Parents must understand that yes, it can be their kids, and that children who use alcohol early in life are at greatest risk of having alcohol problems as adults," Curie said.

The hallmark of the program is the flexibility in the way it can be implemented in local communities. The materials provided through "Too Smart to Start" were successfully field-tested in New Castle County, Delaware; Miami, Florida; Noble County, Indiana; Newaygo County, Michigan; Cincinnati, Ohio; Portland, Oregon; Pittsburgh, Pennsylvania; Nashville, Tennessee; and San Antonio, Texas, before the national launch. National partner organizations are urging their members to promote the use of the "Too Smart to Start" materials nationwide. These organizations are the American Medical Association, the Community Anti-Drug Coalitions of America, Mothers Against Drunk Driving, the National Association of State Alcohol and Drug

Abuse Directors, the National Council on Alcoholism and Drug Dependence, National Family Partnership, and PRIDE Youth Programs.

The free materials offered through the program can be obtained by contacting SAMHSA's National Clearinghouse for Alcohol and Drug Information by telephone (1-800-729-6686), online ([www.ncadi.samhsa.gov](http://www.ncadi.samhsa.gov)), or by e-mail ([info@ncadi.samhsa.gov](mailto:info@ncadi.samhsa.gov)).

## NEWS BRIEFS

### **The Evidence-Based Practices Project for suicide prevention:**

The Suicide Prevention Resource Center, in collaboration with the American Foundation for Suicide Prevention, has announced the Evidence-Based Practices Project (EBPP) for suicide prevention. The project's purpose is to review suicide prevention programs, practices, and activities across disciplines and, on the basis of these reviews, create an online registry of evidence-based suicide prevention practices. Program reviews will be conducted by experts in the field of suicide prevention using criteria adapted from the Substance Abuse and Mental Health Services Administration's National Registry of Effective Prevention Programs. Programs will be classified as "insufficient current evidence," "promising," or "effective." An additional category, "model," is reserved for effective programs that are capable of providing standardized materials and technical assistance. The EBPP is accepting published or unpublished suicide prevention program evaluations for review. Additional information can be obtained from the Suicide Prevention Resource Center Web site ([www.sprc.org/suicideprevention/ebp.asp](http://www.sprc.org/suicideprevention/ebp.asp)) or by contacting Philip Rodgers or Howard Sudak at 215-829-7349 ([prodgers@pahosp.com](mailto:prodgers@pahosp.com)).

**Campaign warns older adults about medications, alcohol, and aging:** Several agencies of the U.S. Department of Health and Human Services (HHS)—the Substance

Abuse and Mental Health Services Administration, the Food and Drug Administration, and the Administration on Aging—have released public education materials to draw attention to the need for more vigilance and monitoring of prescription medications among older adults and of the danger of mixing some medications with alcohol. The campaign reflects the fact that medication use is likely to increase with age and the fact that the way the body processes medications changes as one ages. The "As You Age" educational materials include public service announcements, a color brochure, and a Web site from which all the materials can be downloaded for adaptation (<http://asyouage.samhsa.gov>). The "As You Age" brochure provides a medication checklist to help older persons keep track of dosages, amounts, intervals, and types of medication they need to take. A copy of the brochure can be ordered by calling 800-662-4357 or by visiting [www.samhsa.gov](http://www.samhsa.gov) or [www.fda.gov](http://www.fda.gov). HHS is also releasing an Older Americans Kit, which provides useful information from various sources to help community groups, policy makers, the media, and other organizations educate older persons and their caregivers about available services and programs.

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