

Promoting Anti-Bullying behaviour in the educational environment

This supporting paper is the second part of a health promotion fair and will cover definitions such as what is bullying, health and health promotion models, statistics, legislations, guidelines, who is the target audience for this topic, models and concepts of health, conclusion.

Research on the personality theory suggests that someone's environment shapes behaviour, and behaviour also creates an environment (Boeree, 2006). Albert Bandura's concept (1978), reciprocal determinism, leads to a closer look at someone's personality and the closed cycle formed from his behaviour, surroundings, and the way all is psychological processed. The Government official website states that there is no legal definition of bullying, yet a description is offered as:

"Behaviour that is repeated, intended to hurt someone either physically or emotionally, often aimed at certain groups, for example because of race, religion, gender or sexual orientation. It takes many forms and can include physical assault teasing, making threats, name calling, cyberbullying -bullying via mobile phone or online (e.g., email, social networks and instant messenger)" (Gov.uk, 2021).

In other section of United Kingdom's Government official website, states that by law "some forms of bullying are illegal and should be reported to the police by calling 999". By Law, teaching institutions like nurseries or schools should have their own policy in place to stop bullying. This does not include private schools (Gov.uk, 2021).

The 7th of April 1948 brings to the table of the Constitution of the World Health Organisation (WHO) a definition of health, "as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity" (Sartorius, 2006).

At the 1st International Conference on Health Promotion, Ottawa 1986, presented the definition of health promotion as a pursuit of motivating humans to better their health and achieving physical, mental and social well-being (WHO, 2021).

So, thanks to the WHO's definition of health, it is easy to understand the importance of mental health for humankind. Because it is such a necessary piece of the puzzle, one cannot be considered healthy without also being mentally healthy. Factors such as social-economic biological and circumstantial can shape someone's mental health, and when these factors are affected, undoubtedly mental health becomes poorly (WHO, 2018).

Latest release of the Office for National Statistics (ONS) for England and Wales related to bullying claims that one in five children (19%) aged 10-15 years old experienced bullying in a form or another, that is 764,000 children. 52% experienced online bullying, 26% did not report to anyone what happened, 72% of the children, three out of four who dealt with cyberbullying also experienced bullying during school time (ONS, 2020).

I chose this topic because I went through such an experience during my childhood and felt the impact of being bullied for a long time during my adult life. Now having a child of my own automatically, my fear of her being through such experience rises each year, knowing that she is growing. Therefore, the chance of finding herself in such situations is also increasing. Reports about bullying in the schools of Wales suggests that the awareness of such events is rising but still is not eradicated. Children's Commissioner for Wales (2021) states that the Welsh Government must consider making it compulsory for schools to record all bullying incidents.

On Gov.Wales (2019) with the sub-topic *School Bullying* can be found Guidance and Services with the purpose of guiding not only parents, carers, children and young people or schools but also to help the local authorities deal with bullying.

The target audience for this health promotion fair was aiming to reach children all ages, parents, carers and teachers. Anti-bullying Alliance (England and Wales) conducted the Anti-Bullying Week 2021 during 15-19 November with the theme *One Kind Word*, managed to reach out over 400 young people, teachers and parents expressing their desire to stop such behaviour, and embrace hope and positive thinking (Anti-Bullying Alliance, 2021).

The educational approach is one of many ways to promote health. Offering information to patients/clients could help them to decide according to their needs. Session of counselling and discussions one-to-one are also available. Although the information is given in various ways, an awareness of risk factors of illness is present. Despite this, many choose unhealthy habits of living (Scriven, 2017). The empowerment approach is one of the main principles that the World Health Organisation (WHO, 1986) promotes health, empowering people to control their lives. This is also called the self-empowerment approach. There is also a community development approach involving a collaborative environment that has a say in policies that affect everybody's health and life (Farrant, 1991). Suppose the Community development approach has a saying on the policies in place. In that case, the social change approach aims to change policies so that the impact would be on the physical, social, and economic conditions of the people. Therefore, it is necessary the public support (Laverack, 2014).

The health promotion practitioners must choose an appropriate model or theory to use in their ways of promoting health to people. For better results, a mix of models or theories are used. Three of these models are: Coplan and Holland's (1990) analytic model, Beattie's (1991) analytic model and Tannahill's (Downie et al., 1996) descriptive model.

Coplan and Holland's analytic model is formed out of four paradigms: the radical humanist that connects to empowerment, awareness about health and inspiration to take health promotion to a larger scale such as social, organizational, economic structure. The second paradigm is the radical structuralist and its way of promoting health is through exposing the connections between health and social inequalities. The traditional paradigm takes us to the medical and behaviour change approach, brings information to people in such a way to create a behaviour change. The fourth paradigm of the Coplan and Holland model is the human approach that brings in the educational approach.

Beattie's analytic model is about how to convince people to adopt a healthy lifestyle; legislative actions, community development and personal counselling.

Tannahill's descriptive model is mainly about a preventive approach. Preventive services such as cervical screening or immunisation; preventive health education; preventive health protection.

As a brief conclusion to this supporting paper, my view on the awareness of the bullying situation in the school environment in the UK is that no matter the colossal work that the teachers and educational professionals are doing, or all the legislations and the policies in place to prevent bullying from happening, all starts from a more intimate environment such as the bully's home. As long as the bully is bullied and lives in such an environment that makes him believe that that is normal and it is ok to take it further in society, bullying will not be eradicated.

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