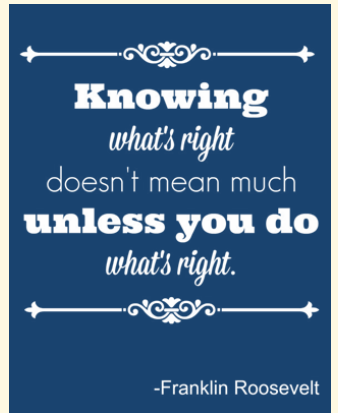


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Bullying behavior can be much more complex and varied than the stereotype. It can come from any background, race, socioeconomic level, family or religion. Harmful bullying can also occur quietly and covertly, through gossip or the Internet, and can cause significant emotional damage. Victims of bullying are not the only ones suffering either; students who bully others are at increased risk for substance use, academic problems, violence later in life, frustration, anxiety, and depression (Center for Disease Control, 2012). Since the two often go hand in hand, it's important to be aware of the warning signs of bullying behavior, as well as poor mental health in our youth.



Unity Day for
National Bullying
Prevention Month is
Wednesday, October 21.
Wear orange!



OCTOBER 8TH

www.HelpYourselfHelpOthers.org

#NDSO NATIONAL DEPRESSION SCREENING DAY 2015

Bullying Exerts Psychiatric Effects Into Adulthood

Once considered a childhood rite of passage, bullying lingers well into adulthood. Bullies and victims alike are at risk for psychiatric problems such as anxiety, depression, substance abuse, and suicide when they become adults, reported a study partially funded by the National Institute of Mental Health (NIMH) that was published in the April [2013] issue of *JAMA Psychiatry*.

Background: Bullying is a repetitive, aggressive act done to abuse or intimidate others. It takes on various forms—primarily verbal, emotional, and physical, although cyberbullying is on the rise. Typically these scenes occur inside school or on the playground, but they can also happen at home or at work. A power imbalance usually is involved in which one child or a group of children torments another child who is considered “weaker.” Methods employed by bullies include threats, rumor-spreading, and exclusion.

“Victims report the greatest anxiety problems. They might become successful people later on, but they still think about the event and hold onto it.”



Most of what experts know about the effects of bullying comes from short-term observational studies. These

studies reflect general society's view that most people overcome these events by the time they become adults.

“Initially I too was skeptical about these long-term effects,” says study author William Copeland, Ph.D., at Duke University...“Yet this is something that stays with people. A large number of people express lasting effects decades after their childhood experiences.”

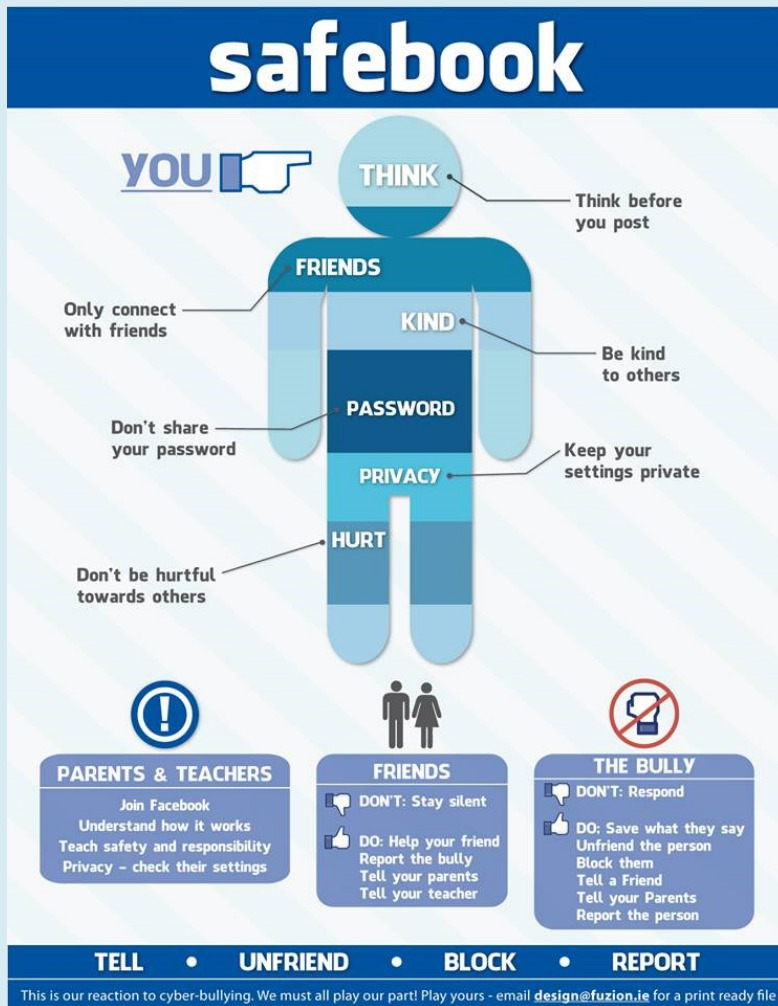
Copeland and his colleagues tapped into a local population sample of 1,420 children from 11 North Carolina counties. Kids, along with their parents, were interviewed annually until the age of 16, fielding questions about peer relations and home and community settings. The participating children were again interviewed at 19, 21, and 24 to 26 years of age. Four groups emerged from this study: people who were never involved in bullying, people who were victims, people who were bullies, and people who were both.

Results of the Study: More than half of the study's youth reported being neither a bully nor a victim. Around a quarter of the study group claimed that they were victimized. About 7 percent confessed to being a bully. A similar percentage said that they were both, a group the researchers labeled as “bully-victims.”

continued on page 2 --->



More Bullying Resources and Stats



High School Youth Risk Behavior Survey

Question	NY 2013	US 2013
Did not go to school because they felt unsafe at school or on their way to or from school (on at least 1 day during the 30 days before the survey)	7.4%	7.1%
Were electronically bullied (including being bullied through e-mail, chat rooms, instant messaging, websites, or texting during the 12 months before the survey)	15.3%	14.8%

Source:

<http://www.cdc.gov/mmwr/pdf/ss/ss6304.pdf>

In 2013-14, 10% of adults in Cortland County reported having poor mental health for 14 or more days in the last month. This figure has not changed significantly in the last 5 years. **NYS DOH Prevention Agenda Dashboard**

Bullying, continued... Compared to those who went through childhood unscathed, victims had four times the prevalence of agoraphobia, generalized anxiety, and panic disorder when they became adults.

Overall, bullies had four times the risk of developing anti-social personality disorder. These disorders still stood even after other factors were taken into account, such as preexisting psychiatric problems or family hardships.

Bully-victims fared the worst. Also known as “loners,” these individuals start out with less developed social skills and are seen as more impulsive and aggressive. When picked on, they respond by picking on others. Their numbers, compared to those never involved in bullying, tell the story: 14

times the risk of panic disorder, 5 times the risk of depressive disorders, and 10 times the risk of suicidal thoughts and behavior.

“Victims report the greatest anxiety problems. They might become successful people later on, but they still think about the event and hold onto it. Bullies are socially adept and may find ways in adulthood to use these skills in a pro-social manner. Folks really underestimate who are the bully-victims. These are the ones who end up having the most significant emotional problems including suicidality,” explained Copeland, who is also a father of two.

Significance: All these disorders impart a great emotional and financial cost to society. Lowering and/or preventing bullying could possibly reduce human suffering and long-term health costs—not to mention creating a safer environment for children to grow up in...“What happens to kids when they’re with their peers is as important, or may be more important, than what happens at home,” said Copeland.

Source: <http://www.nimh.nih.gov/news/science-news/2013/bullying-exerts-psychiatric-effects-into-adulthood.shtml>

Reference: Copeland WE, Wolke D, Angold A, Costello EJ. Adult Psychiatric Outcomes of Bullying and Being Bullied by Peers in Childhood and Adolescence. *JAMA Psychiatry*, published April 2013.



Suicide Prevention Walk & Resource Fair Wrap-up



On September 10, over 100 community members walked from the County Office Building gym, down Clinton Avenue and Main Street, and through Courthouse Park to show their support for Suicide Prevention Awareness and to honor loved ones who have lost their lives to suicide.

Participants wore purple wrist bands that featured the slogan "Every Life Matters." The wrist bands also have the number for the National Suicide Prevention Lifeline: 1-800-273-TALK. Some people carried yellow and purple balloons.

Back at the gym, people shared a free meal and enjoyed music by singer/guitarist Clint Bush. Nearly 20 agencies and organizations provided resources about mental health services and supports. Sponsors included the MHA, Catholic Charities, Cortland County Mental Health, and member agencies of the Think Again group. It is hoped that the walk will become a significant annual event for the community.



App of the month

Breathe2Relax (Free), from Jenna Kahn. "This app was recommended to me by my therapist. I find it super helpful for when I lose track of my breathing or if I feel myself panicking. First you adjust a slider saying if you are feeling more Relaxed or Stressed, and then you practice controlling your inhalations and exhalations. I like that you can shorten or lengthen your breaths as you need to. There are options for selecting the scenery and background music, but I have not played with these settings yet." See more at: <http://jenna-kahn.com/2014/12/the-9-best-mental-health-apps/#sthash.VZGWu9vt.0uMBCD3W.dpuf>



October 8 is National Depression Screening Day

Common Symptoms

Appetite changes

Changes in sleep patterns

Loss of Interest

Anger or Irritability

Hopelessness

Aches & Pains

Lack of energy

Free screenings for depression can be taken online anonymously at HelpYourselfHelpOthers.org

SUNY Cortland Awareness Event and Depression Screening
October 8, 10am-2 pm
Corey Union

For members of the college community.
For more info contact: lauren.herman@cortland.edu



Check out the MHA's updated web site!

<http://www.mhacortland.com/>

Questions, comments, or feed-
back on the MHA Newsletter?
We appreciate your thoughts!

EMAIL OPTION:

If you'd like to receive
the MHA Newsletter electronically
in color as a PDF, please send
your full name and email to:
erin@sevenvalleyshealth.org

Addressee

Community Events & Support

October 8: SUNY Cortland Awareness Event and
Depression Screening: see details, page 3.

Parents & Change Support Group



This support group is for parents and caregivers
of children, teens, and adults with mental health
conditions. Meetings are from 6:00pm to 7:30pm
at 90 Central Avenue in Cortland.

2015 Meetings: October 19; November 23; December 21

For more information, contact Beckey Tripp at
parentsandchange@yahoo.com.

**"Mental Health is nothing to be ashamed of.
Neither is talking about it"**

Family Matters

Bullying, No Laughing Matter

October 14, 5:30-7:30 pm, Cortland Jr/Sr High School
Panel presentation includes: Rob Reyngoudt, School Resource
Officer/CPD, and Mary Dykeman, Cortland County Health Dept.

Family Matters is a program for youth ages 9—14
and their parents or guardians.

Contact Heather at 756-8970 or hkehoe@fcscortland.org
for reservations. **FREE**, dinner and child care included.

Survivors Of a Loved One's Suicide (SOLOS) Support Group



Come join us in a safe, comfortable environment to talk
about your lost loved one(s). Meetings are held the first
Thursday of every month from 5:30 pm - 7:00 pm.
For more info please contact Family Counseling Services
at 607-753-0234.



If you have an upcoming community event you would like considered for admission to
the MHA Newsletter, send your announcement to erin@sevenvalleyshealth.org

Disclaimer: The information presented here does not constitute professional medical advice. Individuals respond to treatment for
mental health conditions in different ways, and treatment plans often need adjustment over time. Patients should work closely with
their doctor and other health professionals in order to achieve optimal control of symptoms.