



Studies from U.S. and U.K. reveal association between childhood victims of bullying and subsequent adult mental health problems

By Michael H. Weier ■ July 28, 2015

He was eight years old and only slightly above average weight when classmates began calling him “warthog” and “pudge.” Johnny¹ initially cried at the taunts of his “friends,” then became the class clown in self-mocking defense. By the cruel code of the playground he was grossly ginormous, though never obese by the technicalities of medical standards.

Twenty years later, John (he never did like Johnny) worked in a warehouse and injured his low back. His doctor diagnosed degenerative disc disease and prescribed rest and anti-inflammatory medications. John missed a couple of weeks of work, became listless and gained weight. He experienced overwhelming feelings of sadness and avoided social contacts. John suffered from Major Depression. Why? What caused John’s mental health disorder?

Psychological research is replete with data, studies and diagnostic criteria that address the effects of abuse during childhood upon subsequent mental health problems in adulthood.² Over the past 25 years, excuse and exculpatory defenses in criminal proceedings increasingly allege histories of childhood maltreatment to avoid or mitigate adult criminal culpability.³ In 1993, the Menendez brothers claimed childhood abuse led them to kill their parents,⁴ and in February 2015, John Mahoney⁵ alleged *battered child syndrome* effectively forced him to shoot and kill his police officer father.⁶

Psychiatrists and psychologists routinely ask questions during mental health examinations to elicit information regarding childhood circumstances and events. Typically, the questions are directed to elicit any histories of childhood physical, sexual, or emotional abuse from parents, relatives, or other adults. Rarely do mental health examination reports reference responses to questions regarding possible childhood abuse from other children, colloquially referred to as bullying.⁷

Results of two separate cohort studies indicate childhood bullying and maltreatment have significant impact upon mental health in adulthood.⁸ One study, conducted in Great Britain,⁹ began in 1991 with nearly 4000 participants; the other study, performed in the United States,¹⁰ commenced in 1993 with over 1400 participants.

Both studies focused upon the long-term effects of bullying by children and consequences of maltreatment by adults. Both studies revealed childhood

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Childhood bullying and adult mental health problems (continued)

victims of repeated bullying experience anxiety, depression, suicidal thoughts and acts of self-harm in adulthood. And both studies showed maltreatment by adults also lead to serious mental health problems in adulthood. Arguably, however, the most important results of both double-decade investigations revealed children harassed and persecuted by peers – but not abused by “grown-ups” - had more significant and more enduring mental health problems in adulthood.

The research implies thorough review of childhood history is necessary for assessment of causation of an adult’s mental health disorder. Toward that end, workers’ compensation claims examiners should ensure mental health experts inquire whether an injured worker who alleges a work-related mental health disability was the victim of childhood bullying. The inquiry may be critical to determine compensability. The competitive labor market undoubtedly has many otherwise silent Johnnys among its ranks. ■

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- ¹ Fictitious person used for illustrative purposes. Any relationship to an actual person is coincidental.
- ² See, Greven Jr, Philip J. “Spare the child: The religious roots of punishment and the psychological impact of physical abuse.” *Vintage*, (2010); Afifi, Tracie O., et al. “The relationship between child abuse, parental divorce and lifetime mental disorders and suicidality in a nationally representative adult sample.” *Child Abuse & Neglect* 33, no. 3 (2009): 139-147; Finkelhor, David. *Childhood victimization: violence, crime, and abuse in the lives of young people: violence, crime, and abuse in the lives of young people*. Oxford University Press, (2008); Cohen, Patricia, et al. “Child abuse and neglect and the development of mental disorders in the general population.” *Development and Psychopathology* 13, no. 04 (2001): 981-999; Costin, Lela B., et al. “The politics of child abuse in America.” Oxford University Press, (1997); Mullen, Paul E., et al. “The long-term impact of the physical, emotional, and sexual abuse of children: A community study.” *Child Abuse & Neglect* 20, no. 1 (1996): 7-21; Myers, John EB, et al. “Expert testimony in child sexual abuse litigation.” *Nebraska Law Review*. 68 (1989); Shengold, Leonard. “Soul murder: The effects of childhood abuse and deprivation.” New Haven, CT, US: Yale University Press. (1989); Areen, J. “Intervention between the Parent and Child: A Reappraisal of the State’s Role in Child Neglect and Abuse Cases.” *Georgia Law Journal*, 63, 887 (1974).
- ³ See, Moreno, Joelle Anne. “Killing Daddy: Developing a Self-Defense Strategy for the Abused Child.” *University of Pennsylvania Law Review*, pp 1281 – 1307 (1989); See also, Areen, J. “Intervention between the Parent and Child: A Reappraisal of the State’s Role in Child Neglect and Abuse Cases.” *Geo. LJ*, 63, 887. (1974).
- ⁴ During their 1993 trial for murder, Erik and Lyle Menendez claimed childhood abuse led them to fatally shoot their parents with a shotgun.
- ⁵ Not to be confused with John Mahoney, the actor who played Martin Crane, the irascible father and former police officer on the television sitcom, *Frasier*.
- ⁶ On February 10, 2015, during defense of his murder trial, John Mahoney took the witness stand, testified and presented tape-recorded evidence regarding years of physical and verbal abuse from his father that purportedly led Mahoney to shoot and kill his father, a police officer in Piscataway, New Brunswick. (See, http://www.nj.com/middlesex/index.ssf/2015/01/john_mahoney_murder_trial.html.)
- ⁷ In defense of mental health examiners, until recently, research regarding the association of childhood bullying has primarily been directed to the mental health conditions of adolescents. See, Kaltiala-Heino, Riittakerttu, Matti Rimpelä, Päivi Rantanen, and Arja Rimpelä. “Bullying at school—an indicator of adolescents at risk for mental disorders,” *Journal of Adolescence* 23, No. 6, 661 – 674 (2000). (See, <http://www>.

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ncbi.nlm.nih.gov/pubmed/11161331.)

- ⁸ Kereya, Suzet Tanya, et al. "Adult mental health consequences of peer bullying and maltreatment in childhood: two cohorts in two countries," *The Lancet Psychiatry*, Vol. 2, No. 6, pp 524-531 (June 2015) (see, [http://dx.doi.org/10.1016/S2215-0366\(15\)00165-0](http://dx.doi.org/10.1016/S2215-0366(15)00165-0)); Copeland, William E., et al. "Adult Psychiatric Outcomes of Bullying and Being Bullied by Peers in Childhood and Adolescence." *JAMA Psychiatry*. 70(4):419-426 (2013) (see, <http://archpsyc.jamanetwork.com/article.aspx?articleid=1654916&resultclick=3>); Bowes, Lucy Bowes, et al. "Peer victimization during adolescence and its impact on depression in early adulthood: prospective cohort study in the United Kingdom," 10.1136/bmj.h2469 (02 June 2015) (see, <http://www.bmj.com/content/350/bmj.h2469>).
- ⁹ The United Kingdom research, performed in England, is referred to as the Avon Longitudinal Study of Parents and Children (see, <http://www.bristol.ac.uk/alspac/>).
- ¹⁰ The United States research, conducted in North Carolina, is called The Great Smoky Mountains Study (see, <http://www.ncbi.nlm.nih.gov/pubmed/8956679>).

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