Practice Alert

Bullying in disability services: The role of staff and team culture

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Key points

- Bullying is defined as repetitive harm that is aggressive, intentional, unprovoked and involves an imbalance of power between the perpetrator and the victim.
- People with a disability are bullied at higher rates than people without a disability.
- In disability settings, providers can prevent bullying by setting clear rules, fostering a respectful culture, ensuring staff have appropriate training and supervision, and acting early when risks arise to keep participants safe.

What is bullying?

Bullying is defined as **repetitive** harm that is **aggressive**, **intentional**, **unprovoked** and involves an **imbalance of power** between the perpetrator and the victim.[1,2,3]

Bullying can include:

- **Physical bullying**: e.g., hitting, shoving, spitting.
- **Verbal bullying:** e.g., name-calling, threatening language, insulting someone.
- **Relational (social) bullying**: exclusion, spreading rumours or untrue stories, sharing images or content.
- **Cyberbullying:** can involve relational, verbal, and physical bullying. e.g., bullying using social media, emails, messaging apps, and other online platforms.

Bullying can also occur because someone has a disability, which is also referred to as **disablist bullying**, e.g., making fun of a person for requiring assistive technology.[4]

Why is bullying a particular issue for people with disabilities?

People with disabilities experience bullying at higher rates than people without disabilities.[5,6,7] National Australian data found that 43% of young people with disabilities experienced bullying within the previous 12 months, compared with 19% of young people without disabilities.[8]

Research from Children and Young People with Disability Australia found even higher rates, reporting that 75% of students with disabilities experienced bullying and 72% were excluded from school activities or events.[9]

People with disabilities may also experience bullying, abuse, or harmful behaviour from those responsible for supporting them, including disability support workers and other service users. A 2021 systematic review identified a range of risk and protective factors associated with abuse in disability service settings, including psychological and emotional abuse, neglect, physical abuse, and financial exploitation.[10] The review found that incidents were commonly associated with factors such as poor supervision, inadequate staff training, burnout, negative attitudes towards disability, and weak organisational oversight.[10]

Workplace and organisational culture can also contribute to everyday harm. Harmful behaviours may become normalised in environments where disrespectful language, exclusion, low expectations, poor attitudes, or dismissive practices are tolerated.[11] This can increase the risk of bullying and reduce the likelihood that concerns are recognised or addressed.

The impacts of bullying on people with disabilities can be significant and long-lasting. A systematic review and meta-analysis found that people with disabilities who experience bullying have higher rates of anxiety, depression, and psychological distress than those who have not experienced bullying.[12] Similarly, a systematic review focussing on individuals with intellectual disabilities identified a range of adverse mental health outcomes, including depression, increased anxiety, post-traumatic stress, and deterioration in self-esteem.[13]

Bullying can also reduce a person's sense of safety, participation, independence, and quality of life.[12,14,15] Participants who have experienced bullying by a support worker may disengage from services altogether, leading to unmet care needs and greater isolation. Bullying can also decrease trust in support relationships, making it harder for participants to accept or seek help in future.[9,16]

Evidence for bullying in disability service settings

Evidence consistently indicates that bullying and related forms of abuse are a significant problem in disability service settings. The Australian Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability gathered evidence from close to 10,000 people and documented widespread experiences of abuse and neglect in disability services, particularly in supported accommodation.[17] The Royal Commission found that these harms were often enabled by poor organisational cultures, inadequate oversight, and insufficient training and supervision of support workers.[17]

What bullying in disability settings can look like

Bullying in disability service settings can take many forms and may not always be immediately recognised as such. It can range from overt acts to subtle patterns of behaviour that accumulate over time. Examples of what bullying may look like in these settings include:

- Support workers speaking to participants in a demeaning, dismissive, or threatening way, or using language that demeans disability (e.g. mocking, infantilising, or using offensive labels).
- Deliberately excluding a participant from social activities, decisions about their own care, or interactions with other people.
- Ignoring or dismissing a participant's requests, complaints, or expressions of distress, particularly in residential or group care settings.
- Imposing strict routines, controlling daily activities, or withholding choice about food, activities, or personal space, particularly when used as a form of control rather than necessity.
- Discouraging or limiting contact between a participant and their family, friends, or independent advocates.
- Using physical force or inappropriate restraint, or threatening participants with consequences to control their behaviour.
- Sharing private information about a participant, spreading rumours, or using social media in ways that humiliate or embarrass participants.

Many of these behaviours may be difficult to detect, particularly in services characterised by isolated, limited external oversight, and barriers to disclosure.[10] Behaviours may also be worse when staff believe they are being unobserved.[10] The absence of complaints does not mean bullying is not occurring; many participants face barriers to reporting, including communication difficulties, fear of repercussions, dependency on their support workers, or lack of trust that concerns will be taken seriously.[18]

Workplace and organisational culture as a driver of bullying

Bullying of people with disabilities by support workers is not only about the actions of individual workers, but also about how organisations operate. An organisation's culture can create environments where harmful behaviour is more likely to occur and less likely to be identified or prevented. An organisation's culture, values, expectations and practices guide how staff and management respond to either preventing or enabling bullying.[10,17,18]

Organisational factors that can lead to bullying of support workers toward participants

Several workplace and organisational factors can increase the likelihood that support workers engage in bullying behaviour toward people with disability. These include:

- **Poor leadership and supervision:** When managers are absent or do not model respectful practice, bullying is less likely to be identified or prevented. Additionally, when management rely on fear or intimidation, this can also normalise hostile behaviour across a team.[10,18]
- **Inadequate training:** Staff who lack training in disability rights, person-centred support, trauma-informed practice, or de-escalation strategies are more likely to abuse power or respond to challenging situations in harmful ways.[10,18]
- **Burnout, high workloads, and understaffing:** Stressful and under-resourced working conditions are linked to reduced staff wellbeing, which is linked to quality of care.[19] Staffing shortages and high workloads leave workers with insufficient time and support to engage respectfully with participants.[20]
- **Negative attitudes toward disability:** Organisational cultures where management use intimidation or bullying to discourage staff from speaking up, fail to address negative staff attitudes or behaviours towards people with disabilities create conditions in which bullying is more likely to occur.[18] Negative attitudes reduce empathy and can lead workers to deprioritise a participant's dignity, choices, or wellbeing.[10,21]
- **High staff turnover:** Constant change in staff reduces opportunities to build consistent, trusting relationships with participants.[10,22]
- **Poor complaints and reporting culture:** Where staff and participants fear consequences for raising concerns, or where complaints are dismissed or not acted on, bullying is less likely to be identified and addressed. When no one speaks up, those who harm others can go unchallenged, and the people affected have no way to seek help.[10,17]

Factors that can perpetuate bullying in disability services

Even when bullying occurs, certain factors can allow it to continue over time. These include:

- **Normalisation of harmful behaviour:** Over time, disrespectful or harmful practices can become treated as normal within a workplace, particularly if they are not challenged by management or peers. This can make it difficult for new staff to identify what is wrong or feel safe raising concerns.[11]
- **Power imbalances:** People with disability who rely on support workers for daily needs are in a structurally vulnerable position, particularly when they live in shared or supported accommodation settings. This dependency can make it very difficult to speak up, particularly if the person fears losing support, being moved, or experiencing worse treatment.[18]
- **Closed or isolated settings:** In residential or in-home support settings, bullying may occur without external visibility. The Disability Royal Commission found that abuse was especially prevalent in supported accommodation, where participants had limited access to independent support or advocacy, and where staff behaviour was rarely observed by those outside the service.[17]
- **Barriers to disclosure:** Participants may face significant barriers to reporting bullying, including communication support needs, a lack of trusted adults to report to, prior negative experiences of raising concerns, or not knowing how to access complaints processes.[17] The Disability Royal Commission findings identified that complaint systems were often too complex without appropriate assistance and support.[17]
- **Weak or absent accountability structures:** Organisations with poor record-keeping, unclear policies, or limited oversight of staff conduct are less likely to identify and respond to bullying.[17]

What can providers and disability staff do to recognise and prevent bullying?

- To prevent bullying, providers should have clear policies and guidelines in place to prevent bullying.
- Providers should also create an organisational culture where expectations about the values, attitudes, and behaviours expected of staff are clearly communicated and consistently modelled, alongside appropriate supervision, training and support to prevent bullying.
- Providers and disability staff can also promote and protect participant safety by responding to risks early to prevent long-term health issues.

What good looks like

A provider that is meeting their obligations under the NDIS Practice Standards in relation to bullying will be able to demonstrate the following:

- Policies, procedures and practices are in place which actively prevent violence, abuse, neglect, exploitation or discrimination.
- Allegations and incidents of violence, abuse, neglect, exploitation or discrimination, are acted upon, each participant affected is supported and assisted, records are made of any details and outcomes of reviews and investigations (where applicable), and action is taken to prevent similar incidents occurring again.
- How potential conflicts involving participant(s) will be managed.
- How behaviours of concern which may put tenancies at risk will be managed, if this is a relevant issue for the participant.
- How behaviours of concern will be managed, if this a relevant issue for the participant.

Relevant Code of Conduct and Standards

The NDIS Code of Conduct requires all workers and providers to respect the rights, dignity and autonomy of people with disabilities, and to take all reasonable steps to prevent and respond to violence, abuse, neglect, and exploitation.

The Disability Discrimination Act 1992 (DDA) prohibits harassment or unfair treatment based on disability. The DDA mandates that implementation strategies be put in place to prevent harassment of people with disabilities in employment, education settings, and in the provision of goods and services.

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