Bullying and Cyberbullying
Sarah Adams, MD, FAAP
Akron Children’s Hospital Pediatrics
I DON'T LIKE BULLIES, I DON'T CARE WHERE THEY'RE FROM.
Disclosure

With respect to the following presentation, there has been no relevant (direct or indirect) financial relationship between the presenter (and/or spouse) and any for-profit company in the past 24 months which could be considered a conflict of interest.
Recording Your Responses

**Paper Form**
- For your convenience, we have created paper answer forms that are in your packet. The staff session leader also has hard copies.
- Please enter your ABP diplomate number and answers on the form.
- Turn the form into Ohio AAP staff member at the door on the way out of the session.
- Credit will be entered into your ABP profile within 3 business days.

**Electronic Link**
- If you prefer to use the web link, enter the following link into your browser, select step 4 and start quiz: [www.OhioAAP.org/MOCPartII/Bullying](http://www.OhioAAP.org/MOCPartII/Bullying)
- If you experience any technical issues, in the interest of time, a paper form will be given to you.
Bullying Objectives

1. Define Bullying and Cyberbullying

2. Role of the Pediatrician

3. Medical implications and how to treat

4. Prevention of Bullying and Cyberbullying

5. Schools, Pediatricians, Parents - What can we do?
Bullying Definition

• Bullying is defined as any repeated negative activity or aggression intended to harm or bother someone perceived by peers as less physically or psychologically powerful than the aggressor.

• Bullying is a form of aggression in which one or more children repeatedly and intentionally intimidate, harass, or physically harm a victim who is perceived as unable to defend himself or herself.
Why is this Relevant for Pediatric Practitioners?

- It is important to screen for bullying behavior or victimization
- There are associations between bullying involvement and academic achievement and psychological distress
- By identifying a patient who is involved in bullying, the practitioner may further inquire about depressive symptoms, homicidal and suicidal ideation, and high-risk activities.
- Safety - most victims feel unsafe at school
- Risky Behavior - stealing, cheating, fights, substance use, weapons,
- Education - victims have lower GPA’s, Bullies risk suspension or expulsion
- Mental Health - Victims feel like they don’t belong, low self esteem
Question #1

Bullying is defined as:

A. A form of aggression where one or more children harass or physically harm another child who fights back.
B. Physical harm only, such as punching and kicking.
C. A form of aggression where one or more children repeatedly and intentionally intimidate, harass, or physically harm a victim who is perceived as unable to defend himself or herself.
D. Two or more children arguing over something they both want.
Key Aspects

- Repetition over time
- An asymmetric, coercive power relationship
- Victims perceive themselves as being weaker than bullies and feel that they cannot retaliate
Examples of Bullying

• being called names
• being physically hurt
• being threatened
• being the subject of rumors
• being isolated socially
• having one’s belongings taken repeatedly.
Bullying

• 10% of Children in the United States have been a victim of Bullying
• 80% and 90% of preadolescents and adolescents will face ongoing psychological and physical harassment at some point in their school life that could be characterized as bullying
• Bullying goes under reported
• Less likely to report if they are a male, an older child or infrequent victim of bullying
• More likely to tell someone at home rather than at school
• Boys more likely to be involved in physical bullying
• Girls more likely to be involved in indirect bullying
• Peak bullying at 7 years of age and declines as they reach 15 years of age
Question #2

Key aspects of bullying include repetition over time and:

A. Asymmetric coercive power relationship where the victims perceive themselves weaker than the bully.
B. Power struggle over two children who are both strong willed.
C. The bully feeling remorseful for their actions.
D. The victim lets a teacher or parent know they are being bullied.
Examples of types of bullying include:

A. Expressing negative thoughts and feelings.
B. A one time comment on someone's hair.
C. Repetitive verbal abuse, physical threats or acts, spreading rumors, isolation, or taking belongings.
D. Not inviting everyone to your birthday party.
Question #4

Bulling is prevalent with significant consequences. According to the definition of bullying, the percentage of children in the United States that are bullied is:

A. 10%
B. 5%
C. 20%
D. 50%
Bullies

- Aggressive
- Violent
- Dominate
- Little empathy
- Physically stronger
- Average or lower then average anxiety and insecurity
- Good self esteem
- Desire for power and domination
- Enjoy being in control
- Prestige and material good are reward
Victims

- Passive
- Anxious
- Insecure
- Physically smaller and weaker
- Cautious, sensitive and quiet
- Alone
- Negative view of themselves
- Provocative victims
Site of Bullying

- School - minimal supervision
- In and around school
- Playground and recess most common
- Breaks and Lunch times
- Hallways and classrooms
- To and from school
Consequences of Bullying

- Fear
- Anxiety
- Insecurity
- Poor self esteem
- Depression
- Chronic absenteeism
- Loss of friends or social life
- Drop in grades
- Bystanders suffer as well
- Detracts from learning, interrupts education and builds fear
- Causes children to believe school is unsafe, hostile where they are not protected
- Violence - suicide and murder
- Self destructive acts or lethal retaliation
- Criminal behavior by bullies in adulthood
Question #5

Bullies are:

A. passive, anxious, insecure, physically smaller and weaker, lonely, low self-esteem
B. passive, strong, secure, physically smaller, lonely, low self-esteem
C. passive, insecure but with good self-esteem
D. aggressive and fight back when bullied
Question #6

Victims are:

A. Quick and strong emotional reactions
B. Exposure to parental substance abuse or mental illness
C. Identification with an affirming faith or cultural tradition
D. Protection by family from exposure to stress
Question #7

Bullying can occur anywhere. Most frequently bullying is seen at school. The reason for this is:

A. Teachers allow bullying in school to build character.
B. This is where children spend most of their day.
C. There are areas where there is less supervision such as recess, playground, hallways, bathroom, bus, lunch time, as well as areas around the school.
D. Children are closely observed at all times.
There are many consequences of bullying. Depression, fear, low self esteem, anxiety, missing school and poor academic performance. The most severe consequence is:

A. Suicide and murder; self destruction and lethal retaliation
B. Suicide only, victims only hurt themselves.
C. Victims become bullies.
D. There is no incidence of severe consequences.
The Role of the Pediatrician

- Identify the problem
- Counsel parents, children and school personnel regarding intervention and prevention
- Screen for, treat and refer to psychiatrists or psychologists
- Advocate for violence prevention and for the right of children to attend school and live free from violence
### Questions for Children

1. Have you ever been teased at school?

2. Do you know of other children who have been teased?

3. How long has this been going on?

4. Have you ever told the teacher about the teasing?

5. What kinds of things do children tease you about?

6. Have you ever been teased because of your illness/handicap/disability?… for not being able to keep up with other children?… about looking different from them?

7. At recess do you usually play with other children or by yourself?

8. Have you ever changed schools because you had problems with the other students?
Questions for Parents

1. Do you have any concern that your child is having problems with other children at school?

2. Does your child go to the school nurse frequently?

3. Has your child’s teacher ever mentioned that your child is often by himself or herself at school?

4. Do you suspect that your child is being harassed or bullied at school for any reason? If so, why?

5. Has your child ever said that other children were bothering him or her?
Identification

- Ask how school is going
- Anticipatory Guidance for School Age Children
- Chronically ill children
- Depression
- Recurrent Abdominal pain
- Stay inside for recess
- Recently move
- Special Education
- Social problems, clumsiness
Vague Symptoms of Victims

- insomnia
- abdominal pain
- headache
- sadness
- enuresis
- school avoidance
- somatic symptoms
- substance use
- anxiety
- bruises
- cuts and scratches
Children Who Are Bullied
- Anxious
- Insecure
- Quiet
- Timid
- Passive
- Low self-esteem

Children Who Bully
- Aggressive
- Rewarded by social influence
- Good or average self-image
- Confident
- Little empathy or anxiety

School and Community
- Bullying is accepted
- Ignorance regarding extent of bullying
- No clear sanctions
- No anti-bullying education of students

The Bullying Encounter
- Child being bullied cries and withdraws
- Bully has no empathy
- Bystanders do not get involved or they reward the bully in some way for fear of being bullied themselves

Victims
- Silent about bullying
- Harbor a sense of shame and embarrassment
- Feel isolated

FAMILIES
NOT AWARE OF WHAT IS HAPPENING

Bullies
- Still no empathy
- No positive direction
- Feel no social sanction
- May go on to commit crimes
Psychiatric screening, referral and treatment

- Screen for separation, generalized anxiety and panic disorders
- Screen for dysthymia and depression
- Screen for conduct disorder - threatens or intimidates others; physically cruel to people
- Behavioral treatments; medications less effective in younger children
- Medication
- Parent training
- Referral to psychiatrist or psychologist
Children Who are Bullied

- Inform child and parent that appearing insecure and passive invites more bullying

- Role play to project a sense of confidence

- Stand upright

- Make Eye contact

- Relaxed

- Strong voice

- Raise self esteem - extracurricular activities - drama, sports
School and Community

- Conference between parents of victim and bullies
- No Tolerance Policy
- Change Seating arrangement
- Increase supervision
- Repercussions for the Bully
- Identify an adult to tell if they are being bullied
- Parents encourage children and check in
- Follow up with teacher
- School psychologist
“Walk, Talk, Squawk”

• Walk away
• Talk to Bullies - be strong and in control, look them in the eye and say something with confidence
• Squawk to a teacher or parent
• Role playing
• Important for the victim to disclose the bullying - only way to stop bullying is to involve someone stronger then the bully
stopbullying.gov

• Education
• Prevention
• Reporting; Policies and Laws
• Media Guidelines; News Releases
• Help for Bystanders
• Parents, Educators, Community, Teens and Kids
• Lifeline 1-800-273-TALK
• Videos, Images, Blogs
STRYVE

Striving to Reduce Youth Violence Everywhere

• National Initiative
• CDC
• Prevent Youth Violence before it starts
• Monitoring, research and developing strategies
• Support Prevention Programs
• Provide Resources
Role of the pediatrician in regards to bullying:

A. Identify, counsel, intervene and prevent at school, refer to psychiatrist or psychologist if indicated and advocate for violence prevention
B. Not to worry about bullying because this is the job of the school
C. Reassure parents that bullying does not lead to long term consequences
D. Educate the victim to get a bone back and fight back
Question #10

Who is at risk of being bullied?

A. Only children who have medical problems.
B. Star athlete who is well liked by others.
C. Children who are chronically ill, have learning disabilities, depressed, recently moved, social problems, special education, clumsiness, obese, gender nonconformity.
D. Kids who play by the rules and play fair.
Question #11

Vague symptoms often presented to the office and may be a sign of bullying include:

A. insomnia, abdominal pain, headache, sadness, enuresis, school avoidance, somatic symptoms, substance use, anxiety
B. sore throat, runny nose, cough
C. fever, rash, joint swelling
D. chest pain, shortness of breath, wheezing
Concrete steps to respond to bullying include clinicians taking steps to incorporate bullying into anticipatory guidance. Pediatricians can do this by:

A. Describing bullying and its consequences, whether the child is bullying, being bullied, witnessing bullying, or all 3
B. Remind parents about driving safety.
C. Nutritional guidance.
D. Sleep hygiene and sleep disorders.
Question #13

Treatment for victims include psychiatric evaluation and treatment. Treatment depends on outcomes of the evaluation. Which statement is true?

A. It is not necessary to include any counseling.
B. Karate class so the victim can defend himself.
C. Medication is always indicated.
D. If diagnoses with anxiety disorder, behavioral therapy is more effective than medication, if depression medications and behavior therapy.
Question #14

It is important as pediatricians to help the bullies as well. It is recommended that bullies be evaluated for:

A. Their size and strength if they are strong enough to bully again.
B. Learning disabilities or intellectual disabilities.
C. Conduct disorder, oppositional defiant disorder and antisocial behavior.
D. No need for psychiatric evaluation because they are already strong and powerful.
Not your average Bully

• Cyber bullying
• Relational bullying
Cyberbullying is a growing concern due to children engaging in electronic activity and communication. Cyberbullying can be done with anonymity or without direct confrontation and reach a large population in a short amount of time at any time of day. Therefore we must become Ambassadors for the awareness, prevention and treatment of Cyberbullying.
What is Cyberbullying?

• Cyber bullying is bullying that takes place using electronic technology
• Electronic Technology includes computers, tablets, cell phones
• Communication tools include social media sites, text messages, chat, and websites.
Examples of Cyberbullying

- Mean text message or email
- Rumors sent by email or on social media
- Posting embarrassing pictures or video
- Websites and fake profiles
- Many times the victim of face-to-face bullying is the very same as those who are bullied online (Smith, et al, 2008)
- Cyberbullies are more likely to be girls as they tend to use words more than actions.
How Cyberbullying is different:

24/7
Any time, any where
Reach a child even when alone
Anonymous
Distributed quickly
Sent to a large audience
Very difficult to trace where it came from

Deleting inappropriate or harassing messages, texts, and pictures is extremely difficult after they have been posted or sent

Hard to get away from the behavior
Cross-national aspects of cyberbullying victimization among 14–17-year-old adolescents across seven European countries

Kalliope Athanasiou, Eirini Melegkovits, Elisabeth K. Andrie, Charalampos Magoulas, Chara K. Tzavara, Clive Richardson, Donald Greydanus, Maria Tsolia and Artemis K. Tsitsika

BMC Public Health 2018 18:800

https://doi.org/10.1186/s12889-018-5682-4 © The Author(s). 2018

Received: 28 March 2017 Accepted: 8 June 2018 Published: 10 July 2018
• Cross-sectional study was to explore Cyber victimization across seven European countries, in relation to socio-demographic, Internet use and psychosocial variables.

• Germany, Greece, Iceland the Netherlands, Poland, Romania and Spain.

• Anonymous self-completed questionnaires included sociodemographic data, internet usage characteristics, school achievement, parental control, the Internet Addiction Test and Achenbach’s Youth Self-Report.

• Overall, data from 12,372 teens (ages 14-17) were included in the questionnaire. About 53% of participants were girls and around 62% were ages 14-15.9.
• More than half of adolescents reported using the Internet for more than 2 hours a day and more than a third reported using social network sites for more than 2 hours a day. Romania had the highest portion of students reporting online bullying (37.3%), followed by Greece (26.8%) and Germany (24.3%).

• Interestingly, more than three-quarters of adolescents surveyed reported that their parents "often or very often allowed them to visit every site" and 54% said their parents "never or seldom told them to stay on the Internet for a certain time.

• The highest rate of cyber victimization was found in Romania (37.3%) and the lowest in Spain (13.3%).

• In Romania, Poland and Germany cyberbullying victimization was associated with Social Network Site use, whereas Internet use was associated with increased odds of Cyber victimization only in Romania.

• Cyber victimization was associated with greater internalizing behavior problems in all countries analyzed, and with externalizing problems in all except Romania.

• Cyberbullying victimization is an on-going problem, which is subject to country-specific socio-demographic factors and diverse patterns of current Internet use and its development.

• Preventive measures should emphasize the integration of Internet communication technology education in educational contexts, and focus on the consistent association between Cyber victimization and internalizing and externalizing difficulties.
Cyberbullying Warning Signs:

• Signs a child may be a target of Cyberbullying
• Signs a child may be Cyberbullying others
A Child May Be a Target of Cyberbullying If He or She:

- unexpectedly stops using their phone, tablet or computer
- appears nervous or jumpy when using technology - acts nervous when there is a new message, acts upset after using the internet or receiving a text message
- appears uneasy about going to school or outside in general
- appears to be angry, depressed, or frustrated after going online (including gaming)
- has drastic changes in mood, sleep and appetite
- is oversleeping or not sleeping enough
- becomes abnormally withdrawn from usual friends and family members
- show increase or decrease in eating
- seems regularly depressed, conducts self-destructive behavior
- making passing statements about suicide or the meaninglessness of life
- loses interest in the things that mattered most to them
- avoids discussions about what they are doing online
- frequently calls or texts from school requesting to go home ill
- decline in grade point average
- desires to spend much more time with parents rather than peers
- becomes unusually secretive, especially when it comes to online activities or digital life
A Child May Be Cyberbullying Others If He or She:

- quickly switches screens or hides their device when you are close by
- uses their device at all hours of the night
- gets unusually upset if they can’t use their devices
- laughs excessively while using their devices and won’t show you what is so funny
- encourages others to do the bullying
- is very aggressive toward everyone
- is being regularly sent to the principals office, receives detention often
- starts to acquire new belongings or unexplained money
- does not take responsibility for anything, including their actions
- avoids discussions about what they are doing online
- seems to be using multiple online accounts or an account that is not their own
- is dealing with increased behavioral issues or disciplinary actions at school or elsewhere
- appears overly concerned with popularity or continued presence in a particular social circle or status
- is very competitive and worried about his or her popularity
- demonstrates increasing insensitivity or callousness toward other teens
- starts to hang out the the wrong crowd
- demonstrates violent tendencies
- appears overly conceited as to their technological skills and abilities
- is increasingly withdrawn or isolated from the family
Consequences of Cyberbullying:

- Suspension from School
- Removed from Sports teams or school organizations
- Legal consequences - criminal charges, civil lawsuits
- Acts of harassment, intentional infliction of emotional pain, negligence and vicarious liabilities
- Hate crimes, impersonation and multiple violations under the Computer Fraud and Abuse Act.
- Intentional or Unintentional
- Educate the bullies and show them the consequences
- No national lawsuits; States have cyberbullying laws in effect - laws vary state to state and the ramifications vary state to state
How Do We Prevent Cyberbullying?

• Talk, Educate, Co-view and House Rules
• The American Academy of Pediatrics recommends talking with kids about the types and amounts of media used by each family member.
TECH

- **T = TALK** - "Talk to your kids about their media use and monitor their activities."

- Ask questions in an open and nonjudgmental way. Stay informed about new media sources, phone apps, TV shows, movies, social media, video games and apps their friends like.

- **E = EDUCATE** - "Educate children about the risks present across various forms of media."

- Marketing, Negative consequences, health risk behaviors later in development, Legal complications.

- **C = CO** - "Co-view and co-use media with kids actively."

- Spend time learning together what is appropriate and what is sending the wrong messages.

- **H = HOUSE RULES** - "Establish clear and effective house rules for media use."

- Media Free Zones, Media Free Times, storage of digital devices, parents review

- Parents and kids can develop a Family Media Use Plan (http://bit.ly/2yTP9Cw) that creates an agreement for what types of media should be used and for how long each day.
• Parents should teach their children to respond to bullying by staying calm; looking the bully in the eye; saying in a firm voice, "I don't like what you are doing," or "Please don't talk to me like that"; or simply walking away, the American Academy of Pediatrics says.

• Parents need to recognize the serious nature of bullying and acknowledge their child's feelings about being bullied. It's also important to teach children to know when and how to ask a trusted adult for help.

• Encourage your child to make friends with other kids, support your child in activities that interest him or her, and monitor your child's social media or texting so you can identify problems before they get out of hand.

• If your child is a bully, emphasize that bullying is never OK. Set firm and consistent limits on aggressive behavior, use nonphysical discipline such as loss of privileges, and praise positive behaviors such as helping or being kind to other children.

• Help your children learn empathy by asking them to consider how bullying makes other children feel. Ask how they would feel if someone bullied them. Demonstrate by example that kids can achieve their goals without teasing, threatening or hurting others.

• Work with the school principal, teachers, social workers, psychologists and parents of children your child has bullied to find practical solutions.

• Teach children that if they witness bullying, they should tell a trusted adult. Encourage them to join with other kids to tell bullies to stop, and to include bullied children in their activities.
Support for the Victim:

• Get Help
• Learn to deal with stress
• Spend time doing things you enjoy
• Unplug from technology
• Find friends who share your same interests
• Share your feeling about bullying
• Boost your confidence
Question #15

Bullying takes many forms such as physical bullying and verbal bullying. Another significant form of bullying is:

A. Bossy behavior
B. Cyberbullying
C. Teasing when both children find it funny.
D. Fight or disagreement
Question #16

Cyberbullying is just as serious as other forms of bullying and in many cases worse. Cyberbullying is when a victim is:

A. Sent frown face emojis
B. Hitting someone with their cell phone or computer.
C. Targeted in a school newspaper or billboard.
D. Targeted online anonymously or in public.
Question #17

Females are more likely to engage in relational bullying. Relational bullying is defined as direct or indirect:

A. Breaking up with a relationship.
B. Threatening the victim verbally, inappropriate sexual comments.
C. Spitting, tripping, pushing
D. Isolating victims, spreading false rumors, posting or writing comments or images that are embarrassing.
Question #18

Striving To Reduce Youth Violence Everywhere (STRYVE) is a national initiative, led by the Centers for Disease Control and Prevention (CDC), which takes a public health approach to preventing youth violence before it starts. CDC efforts to prevent school violence includes:

A. Monitoring, research, developing strategies, support prevention programs and provide resources.
B. Set up metal detectors in schools.
C. Explain that support for bullying prevention should only be done through the school.
D. Focus only on high school students because elementary students are no capable of violence.
Back to School Tips on Handling Bullying - American Academy of Pediatrics
WHEN YOUR CHILD IS BULLIED

• Alert school officials to the problems and work with them on solutions.

• Teach your child to be comfortable with when and how to ask a trusted adult for help. Ask them to identify who they can ask for help.

• Recognize the serious nature of bullying and acknowledge your child's feelings about being bullied.

• Help your child learn how to respond by teaching your child how to:
  • Look the bully in the eye.
  • Stand tall and stay calm in a difficult situation.
  • Walk away.

• Teach your child how to say in a firm voice: "I don't like what you are doing." "Please do NOT talk to me like that."

• Encourage your child to make friends with other children.

• Support outside activities that interest your child.

• Make sure an adult who knows about the bullying can watch out for your child's safety and well-being when you cannot be there.

• Monitor your child's social media or texting interactions so you can identify problems before they get out of hand.
WHEN YOUR CHILD IS THE BULLY

• Be sure your child knows that bullying is never OK.

• Set firm and consistent limits on your child's aggressive behavior.

• Help your child learn empathy by asking him to consider how the other children feel about the way your child treated them. Ask your child how he would feel if someone bullied him.

• Be a positive role mode. Show children they can get what they want without teasing, threatening or hurting someone.

• Use effective, non-physical discipline, such as loss of privileges.

• Focus on praising your child when he behaves in positive ways such as helping or being kind to other children as opposed to bullying them.

• Develop practical solutions with the school principal, teachers, school social workers or psychologists, and parents of the children your child has bullied.
WHEN YOUR CHILD IS A BYSTANDER

• Encourage your child to tell a trusted adult about the bullying. Encourage your child to join with others in telling bullies to stop.

• Help your child support other children who may be bullied. Encourage your child to include these children in activities

Prevention of Bullying in Schools

- Assessing Bullying in your school
- Engage parents and youth
- Create policies and Rules
- Educate parents and school staff
- Build a safe environment
- Build bullying prevention material into curriculum and train teachers and staff
Prevention of Bullying in Schools

- Community work together
- Campaign Strategies
- Community programs against bullying
- Coordinate these program in school as well as extracurricular activities
- Support for the victims
- Address Bullying behavior
Question #19

Which one of these statements is true?

A. Study shows adolescents who are harassed in multiple ways most likely to carry gun or knife on campus.
B. Bullying only occurs at the elementary level.
C. Males who are victim of bullying often tell others they are being bullied.
D. Because bullies are weak they will not harm others.
Question #20

Prevention of bullying in schools requires - assessing bullying in your school, engage parents and youth, create policies and rules, educate parents and school staff, build a safe environment. Additional strategies include:

A. Support kids who are bullied but do not worry about bystanders because they were not directly harmed.
B. Build bullying prevention material into curriculum and train teachers and staff.
C. Reinforce positive social interactions and inclusiveness only in the classroom setting.
D. School counseling is only necessary if victims are suicidal.
Question #21

School’s bullying prevention programs require everyone in the community work together. Campaigns against bullying can be accomplished by:

A. Singling out the bully and the victim.
B. Establish community programs against bullying and coordinate school as well as extracurricular activities.
C. Create a school safety committee or task force but only include school staff and administration instead of community members.
D. Once school strategies are implemented no further evaluation is needed.
What are some schools doing to help?

- Local school districts in MN are enrolling in Anti-bullying App
- STOPit App
- Students can anonymously report any bullying, self-harm, or violent concerns
- School administrator will then respond to the concern
- K-12 - customized for each age group
- It does not replace in person reporting
- DOCUMENTit - archives every incident report
- Cost is $300 per year
- Trial phase
- Staff training

http://www.kimt.com/content/news/Area-school-districts-turn-to-technology-to-address-bullying--490235051.html
Support for Victims

- Listen and Focus on the Child
- Learn what’s been going on and how you want to help
- Explain that it is NOT their fault
- Give advise on what to do if bullying occurs again
Support for Victims

- Ask the Victim what can be done to make him/her feel safe
- Do not single out the victim
- If making changes in the classroom or the bus do it for all students
- Do not force the victim to make big changes
- Follow up and make sure changes are persistent
Address the Bully

• Make sure the Bully knows what the problem behavior is
• Model respectful behavior when addressing the problem
• Offer solutions such as involvement in positive activities
• Refer to mental health services if needed
• Involvement includes the bully, school and parents
Addressing the Bully

- Role play a scenario or make a presentation about the importance of respecting others, the negative effects of gossip or how to cooperate
- Project about civil rights and bullying
- Write an apologizing letter or do a good deed
- Suspension and expulsion does not usually work to help the Bully
Question #22

Which statement is false in regards to how to support kids who are bullied?

A. Listen and focus on the child
B. Learn what's been going on and show how you want to help.
C. Explain that the bullying is their fault.
D. Give advice on what to do if bullying occurs again.
Question #23

Do not single out the victim. When changes need to be made to help the victim which is the best strategy?

A. Do not include the victim or ask him what can be done to make him or her feel safe.
B. If rearranging classroom or bus seating plans change it for everyone.
C. If big moves are necessary force the child who is bullied to change.
D. Support for the bully does not need follow-up or persistency.
Question #24

Address bullying behavior. Which statement is not supported in prevention of further bullying behavior?

A. Make sure the bully knows what the problem behavior is.
B. Model respectful behavior when addressing the problem.
C. Offer solutions such as involvement in positive activities and refer to mental health services.
D. Only the parent needs to play in role in helping the bully.
Question #25

What doesn’t work to help the bully?

A. Suspension, expulsion, conflict resolution, group treatment
B. Role-play a scenario or make a presentation about the importance of respecting others, the negative effects of gossip, or how to cooperate.
C. Do a project about civil rights and bullying.
D. Write an apologize letter or do a good deed.
Summary and Conclusion

• Definition of Bullying and Cyberbullying
• Identify, Screen, Educate
• Medical Implications and treatment
• Prevention
• Anti Bullying Programs in Schools