



## Roles for Pediatricians in Bullying Prevention and Intervention

Bullying among children is aggressive and hurtful behavior that is persistent, intentional, and involves an imbalance of power or strength.

There are a number of ways pediatricians can play a role in bullying prevention and effective intervention. This *Stop Bullying Now!* tip sheet includes ideas to engage colleagues, parents and families. Pediatricians also can be a resource on the issue of bullying for local schools, community leaders and the media.

### Challenging Roles in Prevention

Early intervention in detecting risk behaviors by young adolescents is an essential starting point. Reversing the behavior patterns of intimidation, exclusion, and bullying that threaten our youth, however, will take more than individual approaches. It will take community-wide strategies and non-traditional approaches to prevention to change social cultures that tend to accept, or at least tolerate, bullying behaviors.

### Promote early detection and effective intervention

- Ask screening questions during wellness exams and patient visits, such as:
  - » I'd like to hear about how school is going. How many good friends do you have in school?
  - » Do you ever feel afraid to go to school? Why?
  - » Do other kids ever bully you at school, in your neighborhood, or online? Who bullies you? When and where does it happen? What do they say or do?
  - » What do you do if you see other kids being bullied?

- » Who can you go to for help if you or someone you know is being bullied?

- Gently probe about being bullied when a child has an unusual new onset of school phobia, attention problems, or psychosomatic conditions.
- Routinely monitor for and intervene quickly when risk factors are evident for children who bully and those who are bullied.
  - » Pay particular attention to special populations that are at higher risk.
- Assist families/parents and caregivers in detecting and responding to signs of bullying and in accessing support and resources.

### Advocate for effective bullying prevention and intervention

- Join with colleagues and organize the implementation of anti-bullying policies and practices to dispel misconceptions about bullying and promote effective practices in your community.
- Convene multidisciplinary, community-based coalitions to improve coordination in the assessment, intake, and referral of children for treatment, counseling, and other community services (see Commission for Prevention of Youth Violence 2000 report).

### Ideas to Engage Colleagues

Pediatricians can be crucial in helping to identify and stop bullying. Organize grand rounds or a CME workshop that focuses on bullying prevention. Consider inviting a local expert in youth bullying and a representative from a local school or school district.

### Ideas to Engage Parents and Families

One of the best ways to stop or prevent bullying is for adults to be educated about, and sensitive to, the

issue. Parent and family involvement is critical to preventing bullying. Teaching and modeling respect for others and rejecting intolerance will go a long way to reducing the likelihood that children will bully.

- Provide materials on bullying and bullying prevention. Distribute appropriate research-based information during office visits and any other parent/family-related events.
- Include an article on bullying prevention in the next edition of your practice newsletter or include a series of bullying prevention tips over multiple editions.

### **Be a Resource to Your Local Schools**

- Talk to your PTAs or PTOs. Perhaps they'd be willing to send materials to their mailing lists, email or pass out materials at their local events. Ask them if they would include a statement about bullying prevention in their next newsletter or on their website. Offer to speak at Back to School or Family Night about bullying prevention.
- Talk with school administrators. Many schools implement bullying prevention programs and welcome engagement by community members. Other schools without comprehensive programs could benefit from your knowledge about child development and best practices in bullying prevention. Seek out administrators at schools in your community to learn what efforts they have in place and find out how you can help.

### **Be a Resource for the Media**

Pediatricians are respected and knowledgeable resources trusted by the community. You can be a resource and get to know your local media. You may have different opportunities to speak with the media; members of the media are always looking for human interest stories.

It's smart to keep a couple of key points in mind:

- Be prepared.
- Check if your state has a law addressing bullying;

42 states have laws.

- Be sure you have not caught the reporter at a time they can't talk (on deadline).
- Craft your talking points using information from the SBN! Campaign website.
- Speak naturally and clearly.
- Be honest and helpful.
- Everything you say to a reporter may be used in their story.

### **Resources on the *Stop Bullying* Website ([www.StopBullying.gov](http://www.StopBullying.gov))**

The *Stop Bullying Now!* website has numerous resources for use in your practice and your community. Highlights include:

- SBN! tip sheets for parents, including *What to Do if Your Child is Being Bullied*.
- Additional tip sheets that specifically address what health professionals can do.
- SBN! Webisodes and Public Service Announcements which can be played in a practice's waiting room.
- A Web button on the Starting a Campaign page which provides an easy way to link to the *Stop Bullying* website from your practice's website. This is a great way to communicate with parents and families in your community!

### **About Bullying**

Bullying can take many forms such as: hitting or punching (physical bullying), teasing or name-calling (verbal bullying), intimidation using gestures or social exclusion (nonverbal bullying or emotional bullying), and sending insulting messages using technology such as phones and computers (cyberbullying).

There is no single cause of bullying among children. Rather, individual, family, peer, school, and community factors can place a child or youth at risk for bullying his or her peers.

## Effects of Bullying

Bullying can be a sign of other serious antisocial and violent behavior. Youth who frequently bully their peers are more likely than others to:

- Get into frequent fights
- Be injured in a fight
- Vandalize property
- Steal property
- Smoke
- Use illicit substances
- Be truant from school
- Drop out of school
- Carry a weapon

Youth who are the targets of bullying behavior may exhibit signs of:

- Lower self-esteem
- Feelings of fear

- School phobia and absenteeism
- Nightmares and sleeplessness
- Depression and anxiety
- Thoughts of suicide

Research indicates that bullying in the United States is widespread and its consequences are more enduring than suspected. In a nationally representative survey of school children, nearly 30 percent reported moderate or more frequent involvement in having been bullied, in bullying others, or both within the school year (Nansel et al., 2001). Whether they are perpetrators or targets of bullying, these children face difficulties adjusting to their environments, socially and emotionally.

For more information and resources visit [www.StopBullying.gov](http://www.StopBullying.gov).

## Additional Information and References

The **American Academy of Pediatrics** 2009 Policy Statement "Role of the Pediatrician in Youth Violence Prevention" (<http://aappolicy.aappublications.org/cgi/reprint/pediatrics;124/1/393>) identifies primary and secondary prevention strategies for addressing youth violence, including bullying. "Bullying. It's not OK" is a brochure available through the AAP program *Connected Kids: Safe, Strong and Secure* ([www.aap.org/connectedkids](http://www.aap.org/connectedkids)).

The **Commission for the Prevention of Youth Violence**, consisting of nine of the nation's largest medical and mental health associations, issued a commitment from medicine, nursing, and public health in a December 2000 report entitled, *Medicine, Nursing, and Public Health: Connecting the dots to prevent violence* (<http://www.ama-assn.org/ama/upload/mm/386/fullreport.pdf>)

**Nansel, T.R., Overpeck, M.D., Haynie, D.L., Ruan, W.J., & Scheidt, P.C.** (2003). Relationships between bullying and violence among US youth. *Archives of Pediatric Adolescent Medicine*, 157, 348-353.