OLWEUS
BULLYING PREVENTION PROGRAM

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# Working with Young People Who are Bullied: Tips for Mental Health Professionals

Mental health professionals are often asked to support young people who have been bullied. Bullying is aggressive behavior that is intentional and that involves an imbalance of power or strength. Often, it is repeated over time and can take many forms. It is important to know what these young people need from us—and what approaches are unlikely to help.

## Children who are bullied need

- Permission and support to tell what has happened to them and to talk about their feelings;
- Protection from continued bullying through adult supervision, consequences for the young people who bully, and adults' taking reports of bullying seriously;
- Strong, positive relationships with adults and peers;
- Assistance from peers in feeling that they belong;
- Assistance in not blaming themselves for the bullying; and
- Support with post traumatic stress symptoms, in some cases, even after the bullying has been stopped.

## What probably won't help

- The primary focus of our interventions should be (1) protection from repeat bullying and (2) limiting the effects of past bullying. If mental health professionals focus primarily on how these young people should prevent future bullying with their own actions, we risk confirming their belief that the bullying was their fault.
- Encouraging children who have been bullied to "work things out" with the young person who has bullied them (especially alone or with the support of peer mediators) may make things worse. Mediation-based approaches tend to imply that both parties are partly to blame. Young people who bully are unlikely to listen to the youth they have chosen as their target. When mental health professionals encourage such discussions, we risk further victimization or control of the target.
- Avoid advice that will not work or that children and youth have already found ineffective. When we ask young people to "Tell me how you feel," "Just walk away," "Don't let it bother you," or "Just make a joke of it," we may risk them feeling that they have failed when these strategies don't work. If they have already tried these strategies unsuccessfully before talking with us, we diminish their regard for us as resources.
- Be careful not to treat these youth like time bombs at imminent risk of aggression to others, unless there are indications of such risk. Most young people who are bullied direct their anger at themselves rather than at others.

## Why young people who have been bullied may not talk about it

Young people who have been bullied may resist talking about the bullying for several reasons:

- They may be ashamed. The person who bullied them may have succeeded in convincing them that they deserve the bullying.

- They may have come to believe the usually misguided message that if they only "stood up to" the bully once, the bullying would stop. As a result, they may feel weak because they were not able to stop the bullying on their own.

- They may have found that telling adults does no good—that they are blamed, not believed, told to stop tattling, or given advice that doesn't work.

- They may not believe that adults will protect them. They may have found that they will not be protected from retaliation for telling.

- They may have become convinced that telling an adult about a problem is a sign of immaturity or that it is not "macho" (for boys).

- They may not be convinced that adults care about stopping bullying because they may have seen adults watching bullying without doing anything.

### Helping these youth talk about the bullying and avoid self-blame

To encourage youth who are bullied to talk about what has happened requires the same orientation we would use with targets of sexual harassment, spouse abuse, or racism—three behaviors that share the same dynamics as bullying:

- The victim did not cause the problem and will not be asked to solve the problem alone.

- The victim has the right to tell, to be protected from retaliation for telling, and to have advocacy and protection. The person causing the abuse will be held fully responsible for his or her behavior.

- The victim may have been hurt in stages—by the abuse, by the inaction of others who should have helped, by unearned self-blame, and by social isolation. Each of these issues should be addressed.

### How can mental health professionals effectively intervene to help a young person who has been bullied?

- Advocate and help parents advocate for supervision, staff training, consequences for the youth who bully, and adult and peer support in the situation in which bullying is taking place.

- Work with parents, school administrators and teachers, and (via the school, coach, or other intermediaries) with peers, to help the young person be less isolated and more connected with peers.

- Help parents and the youth lessen isolation by connecting with peers who have shared interests.

- Explore unearned self-blame and help the young person see that the child who bullied him or her is responsible for the bullying.

- Explore and commend the steps the young person used to try to stop the bullying. Help him or her find effective ways to be safe. Identify advocates and resources in the environment. Help the student accept the probable necessity of using these allies.

- Assist the youth in reducing the pain associated with memories of victimization. The techniques that mental health professionals use to help a young person experiencing loss and anxiety will be helpful.

- Remember that a young person who is bullied also may bully others, though most do not. Mental health professionals also may need to focus on aggression toward others.

- Consult with administrators at the bullied child's school about effective prevention strategies that will help to reduce bullying among students and improve the climate of the school.

### What about young people who seem to provoke bullying?

For the most part, these young people have few other ways to make connections with peers. They may find that provoking peers' aggression toward them is better than being ignored. As we help them make more positive peer connections, they can often give up the provoking behaviors. This process may take some time. During this transition, the youth who seem to be provoking the bullying and anyone who bullies them should both be held fully responsible for their actions. Often both youth involved will learn consequences in such a situation. Harassment by peers should not be seen as a natural consequence for the provoking behavior.

### What about young people who over-react to relatively minor act of bullying?

Some young people cry, yell, or otherwise react strongly to small acts of bullying, strongly reinforcing the person who bullies. These young people who over-react need to learn to moderate their reactions to bullying. Mental health professionals can teach them to calm themselves and to focus on the individual incident. At the same time these young people often need to have specific adult advocates in their environment who will make sure that they do not get too much sympathy and that their reports of bullying will be taken seriously. Sometimes parents are part of the problem if they over-react themselves. Parents often are able to moderate their own overprotective reactions when they know that advocates are available to make sure their child's concerns are heard.

### What about relational aggression?

If the bullying has taken place over time within a relationship that the young person describes as a friendship, mental health professionals should work with the young person and his or her parents to help them disconnect from that relationship in the same way that we would help someone disconnect from an abusive dating relationship. Children and youth should not be encouraged to "work things out" with the abusive "friends."

### In summary

Mental health professionals can help stop bullying as they advocate for effective interventions and help parents be more effective advocates. They can help young people overcome the emotional aftermath of bullying after supports and protection are in place.

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