

# BULLYING IN THE PRIMARY CARE SETTING

## What is Bullying?

Bullying is the aggressive use of power to intentionally distress another individual. It is a form of peer abuse.

## Types of bullying

Direct: Hitting/kicking Name calling Threats Email/text messages Indirect/Relational: Gossiping Spreading rumours Excluding/shunning Emails/text messages

Prevalence in Canada: Children who bully others: 5–15% Children who are bullied by others: 10–20%

## What can Primary Care Practitioners do?

Characterize the bullying involvement using the questions on reverse. Support the child. Treat symptoms/injuries requiring immediate attention.

#### **Multidisciplinary involvement**

- · Parents, School
  - Often adults are not aware of bullying involvement
- Social Worker/Psychologist
  - Children who bully need strategies to reduce aggressive behaviour, promote empathy
  - Children who are bullied need assertive strategies, friendship skills
- Therapists/Psychiatrists
  - where necessary for depression/anxiety symptoms, suicidality

## **Resources for Primary Care Practitioners and Families**

Promoting Relationships and Eliminating Violence Network www.prevnet.ca

Stand Up 2 Bullying, Canadian Red Cross www.redcross.ca/article.asp?id=24700&tid=108

Stop Bullying Now (US) www.stopbullyingnow.hrsa.gov

Friendly Schools & Families (Australia) www.friendlyschools.com.au/

Canadian Public Health Association acsp.cpha.ca/antibullying/English/bigdeal/bigdeal.html

 $Substance\ Abuse\ \&\ Mental\ Health\ Services\ Administration\ (US)\ mental health\ samhsa.gov/15plus/health$ 

# Questions to ask if you suspect bullying involvement

- 1. How often do you bully others/are you bullied? the more frequent, the higher the risk of problems
- 2. How long have you bullied others/been bullied? prolonged involvement is more likely to have established behaviour patterns

3. Where do you bully others/are you bullied? (eg, school, home, sports, community)

across more relationships, greater risk of problems

**4.** What types of bullying are used? (eg, hitting, insults, gossiping, text messaging)

though no direct comparisons between types, severity can be measured by distress caused to victimized child



# **Checklist of indicators**

Children who bully others may exhibit:  $\sqrt[4]{6}$ 

- □ □ Physical symptoms (headaches, stomachaces)
- □ □ Suicidal thoughts/suicide (in extreme cases)
- □ □ Poor school function (low grades, dropping out)
- □ □ Behavioural signs (little regard for others' feelings, aggressive with parents/siblings, possessing unexplained items/money)

Children who are bullied by others may exhibit:  $\sqrt[4]{2}$ 

- □ □ Physical symptoms (headaches, stomachaces)
- □ □ Psychosomatic symptoms (difficulty sleeping, bedwetting)
- □ □ Depression/anxiety/psychosis symptoms
- □ □ Suicidal thoughts/suicide (in extreme cases)
- □ □ Poor school function (avoidance/refusal)
- □ □ Behavioural signs (loses items/money, injuries, damaged clothes/items)

Developed by Dr. Jessica Fulton & Dr. Jennifer German Designed by Gill German