Health care providers (pediatricians, primary care physicians, school nurses, etc.) may be in a unique position to identify and help with cyberbullying among youth. As such, they should be prepared to help children and families with these problems when confronted with evidence of them. Here are some tips to help in this endeavor.

1. **REMEMBER THE IMPORTANCE OF EARLY DETECTION.** Early detection is vital to reversing the negative consequences for targets of bullying as well as countering the aggressive behavioral tendencies of those who may bully others. As soon as children are placed in environments where peer harassment can occur on a regular basis, you should ask them about how they are treated — and how they treat others. Continue to track over time their experiences with peers, and how they are reacting, adjusting, and growing in their relational skills. Often, clues early on can help prompt helpful conversations and interventions before serious and lasting implications can result.

2. **KNOW THE WARNING SIGNS OF BULLYING**

   Bullying and cyberbullying have been linked to various emotional, psychological, and physiological consequences, including sleep problems, anxiety, depression, eating disorders, headaches, and self-harming thoughts and behaviors. Know the warning signs associated with bullying offending and bullying victimization, and ask the parent(s) if their child has exhibited any of them. The signs may very well be indicative of bullying at school or online, since 75% of 12-17 year-olds say that they’ve been bullied and approximately 30% say they have been cyberbullied at least once in their lifetime based on our most recent data.

3. **UTILIZE WELLNESS EXAMS AS AN OPPORTUNITY TO ASK SCREENING QUESTIONS FOR BULLYING VICTIMIZATION AND BEHAVIORS**

   One of the best ways to detect bullying early is to ask screening questions. Questions can include: 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? Are you ever afraid in your neighborhood? Do other kids ever give you a hard time or bully you at school, in your neighborhood, or online? Who bullies you? When and where does it happen? What do they say or do? Screening questions should also identify whether youth have a support system that will help them resolve the issue. Who is a trusted adult or ally in your school or life who can help you if you’re targeted? Lastly, health care providers should frame questions based on various levels of involvement in bullying or cyberbullying; the aggressor, target, and the witness/bystander.

4. **FRAME THE ISSUE AS A “HEALTH” CONCERN AND NOT A “SOCIAL” CONCERN**

   Health care providers should convey to parents that bullying and cyberbullying are not just “social concerns” who may then think the issues will work themselves out over time. Instead, be clear about the health implications of bullying and cyberbullying on their child, and encourage a responsibility in them to be calmly but actively involved in their online activities (as well as their offline activities).

5. **TAKE TIME TO TRAIN YOURSELF AND YOUR STAFF**

   Consider having your institution host workshops for your community of patients that aim to dispel misconceptions about bullying, discuss effective
anti-bullying policies and practices in homes and schools, and expand on how parents, siblings, and extended families can be part of the solution.

6. CONSULT WITH OTHER STAKEHOLDERS

Ensure that you have relationships with point people in the community who can provide various services, depending on your patient’s situation. You should have at least one contact in law enforcement, multiple contacts in adolescent mental health (e.g., one who specializes in trauma, cognitive behavior therapy, suicide prevention and crisis management, etc.), and at the school district level (in case formal actions need to be taken to keep your patient safe at school). You may even choose to form a multidisciplinary, community-based coalition to improve coordination in the assessment, intake, and referral of children who are bullied (or who bully others) for treatment, counseling, and other community services.

7. BE A VOICE FOR THE CHILDREN WHO ARE TARGETED

By being a voice for those youth who disclose to you that they are being bullied, you are serving as their advocate and defender. Perhaps their situation has been trivialized or dismissed by other adults, and they’ve confided in you because of your position and status in the community, or your bedside manner. For example, if you discover that a child is a target of bullying, explain to the parents how bullying is a health problem, and encourage them to listen, believe, and support their child. Many times, children who have been bullied can move more readily towards healing simply by knowing their voice is heard, their experience is validated, and well-meaning adults want to help them recover and then thrive.

8. ENCOURAGE OPPORTUNITIES TO GROW IN RESILIENCE

Targets of bullying often feel as if they are the problem, and experience self-blame, shame, and judgment. Encourage parents to identify social situations where their son or daughter can feel supported and find success. Research has shown that extracurricular activities where youth can grow in their social skills (e.g., conflict resolution, emotional self-regulation, the nuances of banter) and can experience “wins” (earning an award, helping a team to victory, discovering a talent or ability they didn’t know they had) help produce resilience and self-confidence. Those traits, then, can buffer against the harms that peer harassment or other adolescent struggles typically cause.

9. HELP THE STUDENTS WHO BULLY OTHERS

If a patient (or their parent) reveals that they have bullied others, probe to determine the root cause(s) of their antisocial behavior. Reiterate that what they are doing is wrong but show disapproval towards the actions, rather than the individual. In addition, talk to the parents and/or refer the child to a mental health counselor if you believe that may help resolve the underlying issue.

10. BE A RELIABLE SOURCE OF INFORMATION FOR THE COMMUNITY

Parents, children, school administrators, teachers, and other members of the community look to health care providers as respected and knowledgeable sources of information. Distribute relevant materials with research-based information on bullying identification, prevention, and response to parents who visit your office with their children. Take advantage of the free PDF resources we share on our website, which include tip sheets with clear, actionable strategies for families and youth themselves. Having these resources posted visibly in your office or waiting room will allow parents and children to learn more about bullying and cyberbullying, and strategies to confront them, even without formally disclosing experiences with you.