

Chapter 8

Summation

A large proportion of US children are involved in bullying. Children who bully and those who are victimized by bullying are at-risk for negative short and long-term outcomes including depression, anxiety, and poor psychosocial functioning as adults. Children and adolescents with special health care needs, including learning disabilities, autism, ADHD, and obesity, and LGBT youth are at particularly high risk for victimization from bullying. Evidence-based interventions for bullying are primarily school-based, with whole-school interventions showing the most promising results. Most states in the US now have anti-bullying laws or policies, however, these policies differ by state and locality. Parents, teachers, coaches, and other adults play important roles in preventing and intervening in bullying. Clinicians can prevent and intervene in bullying by screening for and identifying children involved in bullying, evaluating them for co-morbid disorders, referring children and families for counseling, teaching parents how to detect if their child is involved in bullying, how to work effectively with schools, and how to help the child deal with bullying and its consequences. It is essential for everyone who works with children to be educated about the signs of bullying and how to intervene in bullying to prevent its associated negative outcomes.