

### **Working with young people who bully others: Tips for mental health professionals**

Mental health professionals have important roles in helping to change the behavior of youth who bully others. To be effective, they need a clear understanding of the roots of bullying and a focus on those strategies that are likely to work. It also is important to understand what approaches may inadvertently make the bullying behavior worse.

Many young people who bully see their own behavior as justified. Many are rated by peers and teachers as popular at school. According to Olweus (1993), children who bully are likely to come from home situations in which there is little warmth and positive adult attention and in which discipline is inconsistent and periodically emotionally and physically aggressive. These young people may not develop adequate empathy for others and may not make cause-effect connections between their own actions and the consequences of these actions. Instead of re-examining their own behavior when they get in trouble for hurting others, they may blame adults in authority or the child they hurt.

Consequences for bullying at school, in sports situations, and in other environments may be rare or inconsistent. Without supervision, clear expectations, and consistent consequences, youth who enjoy the power and social status that bullying gives them are less likely to change.

#### **Principles of Effective Interventions**

Because young people who bully may be very comfortable with their own actions, some traditional counseling techniques may not help. Effective interventions are built on the following principles:

- Advocate for inevitable, consistent, non-hostile, and escalating consequences - within a positive relational context-to raise the cost of the bullying behavior, and to help the young person consider alternatives to the behavior.
- Hold the young person who bullies fully accountable for his or her actions. Confront excuses that minimize the behavior ('I only called her a name'), or externalize the cause of the behavior ('I hit him because he kept staring at me.') Help the young person fully acknowledge his or her behavior. Emphasize that the youth had other options no matter what the provocation- and that s/he is fully responsible for the choice s/he made.
- Support parents and educators in holding these young people fully accountable for their actions and not suggesting or allowing rationalizations (such as 'He only teases people because he's bored at school.').
- *After young peoples' anxiety about their behavior is raised by consequences.*, mental health professionals can help them set and work toward behavior change, help them track their progress toward new behaviors and feel pride about those changes. We can focus on helping them discover the specific positive goals that the aggression is directed toward ("What goal were you trying to reach by calling Eric names?" and finding other pathways to reach those goals. These goals may include leadership, being left alone, experiencing mastery, and dealing with anger.
- Help adults in the child's family and environment recognize and affirm the gradual progress these young people often make toward new non-aggressive behaviors.
- Help the young person build positive ties with parents and adult mentors.
- Build genuine empathy, in which young people understand and experience the impact of their behavior. Be careful, though, not to keep this learning at a cognitive level only. If we do that we risk helping these young people understand better how to hurt others.

## Counseling young people who bully others

- Build conscience. , The first steps in conscience development may involve young people learning that their own actions cause *them* to get in trouble. After reaching that realization, they can begin to understand the impact of their actions on others.
- For some youth, bullying and other forms of social aggression are more related to impulsivity and poor social skills than to an effort to control others. When this is true, cognitive-behavioral interventions to improve impulse control and structured social-skills training may also be helpful. Anger management strategies may be effective with these young people; these strategies are not likely to help youth whose aggression is planned and done calmly.

### Misdirections in bullying prevention

What about approaches to build self-esteem? Research indicates that many aggressive youth have high self esteem, and that their aggression can result from a sense of entitlement. It is rarely effective to employ counseling strategies based on self-esteem building with aggressive youth.

What about peer mediation? Mediation-based strategies frequently are based on the assumption that both parties have done something wrong. Especially when carried out by young or relatively untrained mediators, mediation in bullying situations risks solidifying the power differential between the young person who bullies and the young person who is bullied.

### Therapeutic interventions

Effective interventions with youth who bully often involve strategies like reality therapy or cognitive-behavior therapies, which hold the client accountable for his or her actions and for the impact of those actions on themselves and others. Family systems work and consultation and advocacy with schools are also often necessary.

As William Glasser (1975) writes in *Reality Therapy*, “[In therapy] someone cares enough about the patient to make him face a truth he has spent his life trying to avoid: he is responsible for his own behavior” (p. 34)

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## Counseling young people who bully others

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