Étude sur la «cyber-intimidation»: cyberbullying, comorbidités et mécanismes d’adaptations.

# Keywords

* Cyberbullying
* Youth
* Anxiety
* Depression
* Resilience

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# Abstract

Introduction. — Cyberbullying is a relatively new form of bullying. This bullying is committed bymeans of an electronic act, the transmission of a communication by message, text, sound, orimage by means of an electronic device, including but limited to, a computer phone, wirelesstelephone, or other wireless communication device, computer, games console or pager. Cyber-bullying is characterized by deliberately threatening, harassing, intimidating, or ridiculing anindividual or group of individuals; placing an individual in reasonable fear of harm; postingsensitive, private information about another person without his/her permission; breaking intoanother person’s account and/or assuming another individual’s identity in order to damage thatperson’s reputation or friendships.Literature finding. — A review of the literature shows that between 6 and 40% of all youthshave experienced cyberbullying at least once in their lives. Several cyberbullying definitionshave been offered in the literature, many of which are derived from definitions of traditionalbullying. In our study we asked clear definition of cyberbullying. Few studies explicate the psy-chosocial determinants of cyberbullying, and coping mechanisms. The authors of the literaturerecommend developing resiliency, but without analyzing the resilience factor.Objectives. — The first aim of this study was to determine the prevalence of adolescents andadults engaged in cyberbullying. The second aim was to examine the coping mechanisms andcomorbidity factors associated with the cyberbullied people.Methodology. — The sample was composed of 272 adolescents (from a high school) and adults(mean age = 16.44 ± 1). The Olweus Bully/Victim Questionnaire was used to identify profilesof cyberbullying. Coping mechanisms were investigated using the Hurt Disposition Scale (HDS)and the Brief Resilience Scale (BRS). Comorbidities were assessed using the Hospital Anxietyand Depression Scale (HAD), Liebowitz’s Social Anxiety Scale (LSAS), and the Bermond-VorstAlexithymia Questionnaire (BVAQ).Results. —Almost one student in three was involved in cyberbullying (34.9% as cyber-victim,16.9 as cyberbully); 4.8% of our sample was concerned by bullying as a victim. The victimsof bullying were also victims of cyberbullying. The mean age of victims of cyberbullying was17.84 ± 5.9 years, and the mean age of victims of bullying was 16.3 ± 4.5 years. Correlationcoefficient was significant for HAD, LSAS, BVAQ scales with CQ. The retaliatory variable of HDSscale was not significant. Finally, the coping strategies of students who reported victimizationwere explored. These strategies include coping, telling someone, figuring out the situation, andavoidant coping. The results showed for the victims of cyberbullying, that they take longer torecover from a stressful event, compared to victims of bullying.Conclusion. — Results have indicated the importance of further study of cyberbullying becauseits association with comorbidities was distinct from traditional forms of bullying. The biggestrisk factor for the adolescents is the severity of the consequences. These are: the adoptionof the avoidance coping strategy, the occurrence of offline bullying during the situation, theadoption of the self-control coping strategy, the variety of cyberbullying acts, the victim’s levelof self-blame, the victim’s perception of the duration of the situation, and the frequency ofcyberbullying victimization.

# Outcome

Majoritairement, les personnes ayant vécu un harcèlementtraditionnel, vivent dans le foyer familial (à 85 %), ils sonttous lycéens, célibataires (à 85 %). L’âge moyen des per-sonnes ayant vécu un cyber-harcèlement (35 %) était de17,84 ans (écart-type = 5,86 ; min = 16 ; max = 48), ce sontmajoritairement des femmes (à 70 %), vivant dans le foyerfamilial (à 63 %), elles sont étudiantes (à 91 %), célibatairesà 80 %, et sont lycéennes (à 87 %).