

New kid on cyberbully block

Some youngsters switch between being perpetrators and being abused

TANYA FARBER

NADIA Jacobs and Ana Pillay* live more than 1 000km apart and have never met, but an invisible thread binds them: both are haunted by cyberbullying.

Jacobs, from Cape Town, was bullied for years in person and on her phone by jealous classmates, and "hated going to school". Pillay, from Durban, was racked with shame that nearly led to a suicide attempt after an ex-boyfriend began sharing pictures of her in skimpy clothing on social media accompanied by derogatory comments about her body.

"Each message cut her deeper," said Pillay's mother.

The alarming growth of cyberbullying has led to new research into a previously neglected category of abuser: bully-victims.

These are people who fluctuate between being "perpetrators" and "victims" in cyberspace.

Professor Michael Kyobe of the University of Cape Town was recently awarded a National Research Foundation grant to "investigate the nature and factors influencing mo-

bile bully-victim behaviour in South African high schools".

He will conduct his research in six provinces among pupils, teachers, school administrators, parents and law enforcement agents.

"It is hoped that this study will identify appropriate interventions that schools can use to prevent the escalation of bully-victim behaviour," he said.

The Centre for Justice and Crime Prevention has found that nearly half of adolescents in South Africa have been victims of mobile bullying, while global research indicates that bully-victims can be even more of a threat than pure bullies and often have deeper psychological issues.

According to online publication Parenting Science, pure bullies are "confident aggressors" who "dish out intimidation and harassment". In general, they are not victimised by other bullies.

Bully-victims tend to be more "anxious, depressed, lonely and highly strung". Surveys in 25 countries have shown they "suffer the worst psychological health of any group — including pure bullies and passive victims", and "may pose a greater

threat to their peers".

Nikki Bush, parenting expert and co-author of *Tech-Savvy Parenting*, said: "Someone who has been put down might bully someone else to feel better. They may think, 'If I can make them feel worse than me, I will feel powerful and better.' This has the potential of a vicious cycle."

She said the choice came down to bystander or "up-stander".

They tend to be more anxious, depressed, lonely and highly strung

"Children need to make very conscious decisions, regardless of whether they are the victim or it's someone else," said Bush.

"An up-stander will tell an adult who can help report it in some way."

Children who witness cyberbullying and do nothing are bystanders and are playing along.

Pillay's mother said: "She hurt to see friends — male and female — just keeping quiet. But that is how bullies work — people were scared to say

anything in case they became the next person dragged through the mud."

Jacobs said that throughout high school she had received abusive messages from classmates — which left her traumatised and embarrassed.

"Some people were jealous of me. I was 13, quiet and new at my high school. I started hating going to school. I didn't have the courage to fight back because they were bigger and older than me. I was left feeling scared and embarrassed."

Recent research by Kyobe and his team found that smartphone features such as image/video sharing, e-mail and instant messaging are frequently used means of cyberbullying.

They also found that "boys usually adopt direct forms of aggression" and "send threatening messages online" whereas girls "prefer more indirect approaches such as gossiping or spreading rumours", or "excluding others".

They said "compared with other technologies used for bullying, mobile technologies greatly enhance anonymous communication", which made retaliation harder.

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MOBILE MISERY: Smartphones have become a much-used medium for cyberbullies
Picture: iSTOCK

Talk to your children

A RELATIONSHIP is a safety app parents cannot buy, says parenting expert Nikki Bush. Open communication with your children is critical.

"Solutions to cyberbullying lie in face-to-face communication, not technology itself." She recommends:

- **Frank conversations:** Children must understand that the rules against bullying in real life apply in cyberspace too;
- **Anonymity is irrelevant:** Children should be helped to understand that anonymity doesn't change the negative impact of bullying;
- **Dinner-table conversation:** Ask children reflective questions in a non-threatening way. How would you react if you saw someone being bullied through technology? Would you like to be treated that way?
- **Scenario planning:** Parents have to be like the CEO of a company — imagining and discussing situations with kids so they aren't caught off-guard if those situations arise;
- **Right messaging:** Just because it has become commonplace doesn't mean it is OK. Parents should encourage kids to plug into their feelings — if something feels uncomfortable, get out;
- **Mantra for bullying:** Stop, block, tell;
- **Warning signals:** Parents will know their children are being victimised only if they have developed a relationship with them. That takes time and commitment;
- **Professional help:** Know when to get it and don't delay; and
- **Stay in touch with other parents:** This makes it easier to ensure kids are not putting themselves in difficult situations in real life which are caused and exacerbated by online activities. — Tanya Farber



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BREAKTHROUGH: Researcher Adam Penn-Nicholson, who helped develop the new test in a University of Cape Town laboratory

Blood test gives early warning of TB danger

ARON HYMAN

SOUTH AFRICAN researchers are testing a breakthrough approach that they say could mean the end of the tuberculosis epidemic.

The team at the South African Tuberculosis Vaccine Initiative have developed a test that detects a particular type of "inflammation in the blood", allowing them to predict up to a year in advance if someone will get TB.

Preventative medication could be prescribed to people who tested positive, said Thomas Scriba, deputy director of immunology at the initiative's University of Cape Town laboratory.

Four out of five South Africans carry the bacteria that cause TB. Although only one in 100 get the actual disease every year, it still accounts for one in seven deaths in the 15-44 age group.

"We can't treat 80% of the adult population with preventative therapy," said Scriba. But "among all those that are conceivably at risk we can now start identifying people who are truly at risk".

More than 10 000 people are being tested for TB risk with the new technique in Worcester, Durban, Stellenbosch, Rustenburg and Klerksdorp.

The Correlate of Risk Targeted Intervention Study is funded by the Bill and Melinda Gates Foundation and the South African Medical Research Council.

In Worcester, 18-year-old Rashieda Kriel is undergoing preventative treatment after the blood test showed she had a risk of progressing to TB within a year.

"An uncle of mine has TB and an auntie who works with me also has TB," she said. "Many people in the community have it. It's in everyone's bodies, it just takes a certain time until you get it."

Her mother, Saadiqa Kriel, said she was "fed up" with Rashieda's uncle because he refused to take medication, drank from the children's cups and "spits on the ground".

"He can infect anyone. They say he's got that difficult [drug-resistant] TB,"

said Saadiqa.

"He feels he doesn't want to go to the day hospital every day, and the injections are painful."

Two field nurses with the TB vaccine initiative, Anne Swarts and Sophie Keffers, said this attitude was common, and doctors and researchers were often treated with suspicion.

"Many people won't tell us if there is a TB contact in the household or if someone is on TB medication," said Keffers.

In 2014, TB killed 38 000 South Africans and 1.4 million people globally, making it the biggest infectious-disease killer of humans.

Initiative director and principal investigator Mark Hatherill said: "If we



HOPE: Researcher Mark Hatherill says a new test may help prevent TB by predicting it in advance

This is something that can really have an impact on the TB epidemic

get it right, and if we can show that the prevention hypothesis works, then this is something that can be rolled out, given sufficient resources and will of the health services.

"This is something that can really have an impact on the TB epidemic."

Researcher Adam Penn-Nicholson said results of the trial would be available in 2019.

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STIGMA: Field nurses Anne Swarts and Sophie Keffers say many people will not tell them if there is a TB contact in the house
Pictures: RUVAN BOSHOFF