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LEVEL OF ANXIETY IN ADOLESCENTS UNDERGONE CYBER-BULLYING: A CROSS SECTIONAL STUDY

Pediatrics

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ABSTRACT

AIM & OBJECTIVES- (a) Comparing and analysing the association between cyberbullying and subjective complaints (b) Comparing and analysing the association between cyberbullying among adolescent boys and girls. (C) Comparing and analysing the association between socio-demographic factors among adolescent's boys and girls. (d) To assess the association between cyberbullying and self-reported health and subjective health complaints.

MATERIALS & METHODS- Sample for the study includes 160 adolescents (boys 92 & 68 Girls) with a history of behaviour difficulties and cyber-victims and cyber-bullies. The sample was chosen randomly from the NKPSIMS & LMH Nagpur city of Maharashtra. The study was conducted between June 2017 to July 2019.

RESULT- The present study shows statistically significant in somatic problem t value -1.87 means score showed more in adolescent girls as compared to boys. On depressive problem t value.371, anxiety problem t -.708, attention deficit hyperactive problem t value -.987, Oppositional defiant problem t value 1.13, and conduct problem t value .984, on statistical analysis this difference was not found significant. But both genders high mean indicate both are facing depressive problem, anxiety, attention deficit hyperactive problem, oppositional defiant problem and conduct problem. Level of the anxiety of adolescence boys and girls are not statistically significant but both genders mean score indicates a high level of anxiety.

CONCLUSION- The current study contributes to the exploration of cyberbullying and emphasizes its potential to have problematic effects. Furthermore, it underlines the important role that family contexts play on adolescent psychological problems. Adolescents are being affected by cyberbullying, and the impact experience of internet (email, chat room, massage, social networking sites, YouTube) bullying can have on their psychological health issues).

KEYWORDS

DAPHNE III, Child Behavior Checklist (CBCL), Counselling and Guidance

INTRODUCTION -

Most of school going children in India are using email, Facebook, video-gaming, web-pages surfing, Instagram, what's up, or through images or massages send via mobile phone, or laptop. Cyber bulling is bulling that takes place using electric technology. Electronic technology includes devices and equipment such as cell phones, computers, and tablets as well as communication tools including social media sites, text messages, chat and websites. Examples of cyber bulling include mean text-messages or emails, rumors sent by email or posted on social networking sites, and embarrassing pictures, video, games, websites, fake profiles, or fake name etc.

Cyberspace represents new territory for peer mistreatment, often leaving school administrators with doubts about the boundaries of their jurisdiction. School leaders may be unable to respond when unknown parties have sent hate messages from a location outside the school, such as from a home-based computer or mobile phone [1]. Some students are reluctant to tell adults about the anxiety they endure at the hands of cyber enemies, fearing that parents may overreact by taking away their computer, Internet access, or cell phone. Many teenagers are unwilling to risk having parents choose such extreme forms of protection because, without technology tools, they would feel socially isolated and less able to stay in immediate contact with their friends [2].

Certain children find an outlet for their frustrations through bullying others. In the past, these actions could be better controlled because they were limited to face-to-face interactions. However, in recent years, this age-old conflict has matched the pace of technological evolutions, making it more dangerous and harder to contain. Young people use the internet in many ways, including chatting with friends on social media, learning, being creative and playing. Older children often use the internet for a range of activities such as social networking or doing their homework, whereas younger children tend to use it primarily for specific reasons such as watching video content. Cell phones, social media sites, chat rooms, and other forms of technology have allowed bullying to expand into cyberspace. This new form of abuse is known as cyber bullying. Bullying is found in all societies, including modern hunter-gatherer societies and ancient civilisations. It is considered an evolutionary adaptation, the purpose of which is to gain high status and dominance **[3]** get access to resources, secure survival, reduce stress and allow for more mating opportunity [4]. Bullies are often bi-strategic, employing both bullying and also acts of aggressive 'prosocial' behaviour to enhance their own position by acting in public and making the recipient dependent as they cannot reciprocate [5]. Thus, pure bullies (but not bully/victims or victims) have been found to be strong, highly popular and to have good social and emotional understanding [6].

Cyber bullying has become increasingly common, especially among teenagers. Harmful bullying behavior can include posting rumors about a person, threats, sexual remarks, disclose victims' personal information, or pejorative labels i.e. hate speech. Bullying or harassment can be identified by repeated behavior and intent to harm. Many victims may have lower self-esteem, increased suicidal ideation, and a variety of emotional responses, retaliating being scared, frustrated, angry, and depressed. Individuals have reported that cyber bullying can be more harmful than traditional bullying. However, this digitalized world has created an opportunity for them to misuse these technologies and harass and bully others, inviting a new form of bullying called 'cyberbullying'. As compared to traditional bullying (physical, verbal and relational) [7]; cyberbullying is unique in a way that within a very limited period of time cyberbullies can offend a huge number of audiences who are physically distant [8], moreover, unlike traditional bullying, offenders could hide their identity if they desire. Cyber bullying a form of bullying or harassment using electronic forms of contact.

Now day's adolescence knows more about computers and cellular phone than their parents or guardians, they are able to operate the technologies without concern that parents will discover their experience with bullying whether as a victim or offender. Cyber –bullies might be emboldended when using electronic means to carryout there antagonistic agenda because it takes less energy and courage to express hurtful comments using keypad or a keyboard than with one's voice. Another main factor are cell-phone every single person are using cell-phone and they using cell-phone more than 4 to 5 hours for watching videos, email checking, chatting , whatsup, google search, for doing school projects and homework's . Not even children their parents , adults every one affected by cell-phone uses often need to keep their phone turned on for legitimate purposes, which provides the opportunity for those with malicious intentions to engage in

persistent unwelcome behavior such as harassing phone calls or threating and insulting statement via the cell-phone text message.
Adolescents have lower self-esteem, increased suicidal ideation and a variety of emotional responses, like cyber bullying back, being scared, frustrated, aggression, stress, and depression. One of the most damaging effects s that a adolescents begins to avoid family, peer-relationship, refuse going to school, and activities, often very intention of the cyber-bully.

Why cyberbullying is Different

- School going children who are cyberbullied have a harder time getting away from the behavior.
- Cyberbullying messages and images, email, video, advertising and images can be posted, expose, blackmailing anonymously and distributed quickly to a very wide audience. It can be difficult and sometimes impossible to trace the source.
- Cyberbullying can be happen any time any place, and reach a children even when they are alone.

ROLE OF TECHNOLOGY

Electronic devise like (Cell phones, tablets, desktop and computer) themselves are not to blame for cyberbullying. Social media sites can be used for positive activities- collecting information for projects, increasing knowledge, visual-audio educational support, connecting adolescents with friends and family, having students with school, and for entertainment. But these tools can also be used to hurt or bullying other people. Whether done in person or though technology, the effects of bullying are similar.

Psychological behavior difficulties

Adolescence are more likely to suffer since they are still growing mentally ,physically and taking decision individually, and the children's that are bullied are likely to experience anxiety, depression, academic backwardness, showing aggression, loneliness, social withdrawal, unhappiness and poor sleep. Most of the time cyberbullying goes unnoticed; the younger generation hides their bullying from others that can help to prevent the bullying from occurring and from getting worse. The adolescence slowly change their behavior and actions so they become more withdrawn and quiet than they are used to, but no one mark since the change is subtle. Cyberbullying will 'become a serious problem in the future with an increase in the internet and mobile phone usage among adolescence.

All those changes will affect on their growth and development into adolescence. Younger adolescence children display suicidal behaviors and ideation, but are still at risk depending on other factors such as metal health status, home atmosphere ,emotional unstable, retaliating, being scared , frustrated , confused /doubtful, aggression , anxiety and depression relationship bonding with family and social .One of the most damaging to avoid social communication, activities , often the very intention of the cyberbully.

AIM AND OBJECTIVES

The overall aim of the study was to identify the risk factors of cyberbullying and its impact in health among adolescents. The specific objectives are:

Comparing and analysing association between cyberbullying and subjective complaints (Anxiety, Depression, Somatic Complains, tension, and stress) among adolescents.

Comparing and analysing association between cyberbullying among adolescence boys and girls.

Comparing and analysing association between socio demographic factors (age, gender, family structure, parent's education) among adolescence boys and girls.

To assess the association between cyberbullying and self-reported health and subjective health complaints (tension, irritability and headaches).

MATERIALS AND METHODS

The present research was purposed to examine the level of anxiety in adolescents undergone cyber-bullying, and other behavioural problem in 8-to-16 year's old male and female adolescents.

The total sample of this study will be 160 adolescents' boys and girls whom were selected randomly via simple sampling procedure from clientele children who were identified and diagnosed in NKPSIMS & LMH Nagpur city of Maharashtra. The research conducted during June 2017 to July 2019.

Assessment – The present study based on interview and child behaviour assessment author interview all the subjects and parents counselling and follow-up. The intake Performa for each subject (Age, Gender, School, Class), family history (Economic background, urban/rural area, Parents education, and any family history of psychiatric illness), and Schooling history (grads, repeated class, behaviour problem, learning disorder, fear).

2. SUBJECTS AND METHODS

Cross sectional study and Quasi experimental study design was utilized

- **Inclusion criteria -** Children with behavior difficulties and victims and bullies, children's age ranged from 8-16 years, and from both genders.
- Exclusion criteria- Adolescence (boys and girls) school going students (victims and bullies), at different schools from central India Nagpur.

Tools Used:

1. DAPHNE III questionnaire: Interventions for cyberbullying (1-32)- This questionnaire is about the type of guidance; resources and interventions that secondary schools use to prevent and respond to cyberbullying. Teaching and training in e-safety for staff and students is included as part of the prevention of cyberbullying.
2. Child Behavior Checklist for Ages 6–18 (CBCL/6-18; Achenbach and Rescorla 2001) The 113 items on this measure are rated as Not True (0), somewhat or sometimes True (1), or Very True or Often True (2). Validity and reliability are excellent, and extensive normative data are available for children ranging from 6 to 18.

Procedure: Procedure of Data collection

For collection of data from NKPSIMS & LMH Nagpur city of Maharashtra was chosen. By keeping age and gender requirements in mind the subjects were selected more than the required then the test of DAPHNE III questionnaire: Interventions for cyberbullying, and CBCL (child Behavior Checklist), who referred by doctors for behavior difficulties, N 160 subjects have been selected randomly from different school going children's, which consists 160 school going adolescents (boys 92 and 68 Girls).

First of all, checklist of trails was administered on the subjects to get their original viewpoint. The subjects were randomly selected sample in NKPSIMS and Lata mangeshkar Hospital and Research center Nagpur, adolescence (boys 92 and 68 Girls) and DAPHNE III questionnaire: Interventions for cyberbullying each subjects took about 1hours to respond on the entire above tools. A period of twenty five months was devoted for the data collection. Scoring was done according to the instructions given in the manual. All the participants were assured that their responses would be kept confidential.

ETHICAL STATEMENT

Ethical clearance was obtained from an ethical review board NKPSIMS and Lata Mangeshkar Hospital Nagpur. The case file information was de-identified during data collection and was coded.

Statistical Techniques Used:

The obtained data will be statistically analyzed by applying descriptive (Average, percentile, mean, standard deviation, and paired t-test) of significance of mean differences in term of various variable. We will enter all data and further Statistical Analysis will be done with the help of IBM- SPSS-25 software.

Result

The characteristics of the sample are presented in Table no. 1- total 160 adolescent participate in this study "level of anxiety in adolescents undergone cyber-bullying", 92 adolescent boys and 68 adolescent girls. Patients between the age ranges of 10-18 years. Social economic status 25 (16%) subjects 11 (12%) boys and 14 (15%) girls from belong to low social economic status, 69 (43%) subjects 43 (47%) boys and 26

(38%) girls from medium social economic status, and 66 (41%) subjects 38 (41%) boys and 28 (41%) girls from high economic status.79 (49%) subjects 48 (52%) boys and 31 (46%) girls stay in a joint family and 81 (51%) subjects 44 (48%) boys and 37 (54%) girls stay in nuclear family.

Table No. 1- Distribution of Adolescence to Their Socio-demographic Characteristics

Age * Gender Cross tabulation				
Age		Gender		Total
		FEMALE	MALE	
	10 Years	0 (0%)	1 (1%)	1(0.6%)
	11 Years	3 (4%)	6 (7%)	9 (6%)
	12 Years	21 (31%)	27 (29%)	48 (30%)
	13 Years	8 (12%)	8 (10%)	16 (10%)
	14 Years	9 (13%)	11 (12%)	20 (13%)
	15 Years	24 (35%)	30 (33%)	54 (34%)
	16 Years	1 (1%)	3 (3%)	4 (3%)
	17 Years	1 (1%)	2 (2%)	3 (2%)
	18 Years	1 (1%)	4 (4%)	5 (3%)
Social Economic Status				
High		28 (41%)	38 (41%)	66 (41%)
Medium		26 (38%)	43 (47%)	69 (43%)
Low		14 (15%)	11 (12%)	25 (16%)
Family Structure				
Joint Family		31 (46%)	48 (52%)	79 (49%)
Nuclear Family		37 (54%)	44 (48%)	81 (51%)

About parents' education, around 26 (16%) parents are SSC or Matriculation examination, Higher Secondary class passed, 73 (46%) parents are graduation, 35 (22%) parents are post graduate and 26 (16%) parents are from other vocational courses. See table no.2.

Table No. 2- Distribution of Adolescence educational and their parent's education background

Gender	CLASS								Total
	10	11	12	5	6	7	8	9	
FEMALE	3	6	4	1	4	3	18	29	68
MALE	6	6	3	4	5	5	27	36	92
Total	9	12	7	5	9	8	45	65	160
Parents' education	10 &12		Graduate	Post Graduate		Other Vocational Courses			
FEMALE	17 (25%)		41 (60%)	20 (29%)		14 (21%)			68
MALE	9 (10%)		32 (35%)	15 (16%)		12 (13%)			92
	26 (16%)		73 (46%)	35 (22%)		26 (16%)			160

Table No.3- Distribution Of The Studied Regarding Their Behavioral, And Anxiety Problem In Adolescents Undergone Cyber-bullying

Paired Samples Statistics					
		Mean	N	Std. Deviation	Std. Error Mean
Depressive Problem	MALE	2.56	68	1.596	.194
	FEMALE	2.47	68	1.126	.137
Anxiety Problem	MALE	2.84	68	1.410	.171
	FEMALE	2.99	68	1.409	.171
Somatic Problem	MALE	2.78	65	1.606	.199
	FEMALE	3.28	65	1.526	.189
Attention	MALE	2.86	66	1.402	.173
	FEMALE	2.98	66	2.034	.250
Oppositional Defiant Problems	MALE	2.38	68	1.711	.207
	FEMALE	2.06	68	1.592	.193
Conduct Problems	MALE	2.63	68	1.718	.208
	FEMALE	2.32	68	1.732	.210

PAIRED SAMPLES TEST									
		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Depressive Problem	MALE - FEMALE	.088	1.960	.238	-.386	.563	.371	67	.712
Anxiety Problem	MALE - FEMALE	-.147	1.713	.208	-.562	.267	-.708	67	.481
Somatic Problem	MALE - FEMALE	-.492	2.115	.262	-1.016	.032	-1.877	64	.065
Attention deficit problem	MALE - FEMALE	-.121	2.545	.313	-.747	.504	-.987	65	.700
Oppositional Defiant Problems	MALE - FEMALE	.324	2.359	.286	-.247	.895	1.131	67	.262
Conduct Problems	MALE - FEMALE	.309	2.587	.314	-.317	.935	.984	67	.329

As it shown in table no.3- On DSM oriented scales statistically not significant association between gender and behavior was found with both gender to act as cyberbullies experience, victims and bullies. Depressive problem adolescent boys mean 2.56±SD 1.596, adolescent girls mean 2.43±SD 1.123, t value 0.371 is not statistically significant at the level of 0.05 level, but both gender mean shows depression like – low enjoyment, cries a lots, harms self, not eat well, feel worthless, guilty feeling, tired without having good reason, sleep less or more as compare to other children, lack of energy, seem sad, and think suicide. Depression [9], [10], [11], [12], and low self-esteem [13], [11], [12], [14]. Anxiety problem adolescent boys mean 2.84±SD 1.410, adolescent girls mean 2.99±SD 1.409, t value -.708 is not statistically significant at the level of 0.05 level, but both gender mean shows presence of anxiety in adolescence like –dependent on adults, fears, fear to go to school, feel or fear that something is going bad on me, nervousness, worries , and slowing aggression towards self. Bullied children are more likely than their nonbullied peers to report feelings of anxiety [9], [15], [10], In a study on turkish students, high scores on bullying and victimization were significantly related to higher depression, anxiety, somatization and hostility and lower self-esteem scores [16]. Cyberbullying effects have varied as a function of being bullies or victims. For example, adolescents who have been cyberbullied have reported depressed affect, anxiety, somatic symptoms and suicidal behavior whereas cyberbullies have self-reported aggression, delinquent behaviors and substance use [17].Researchers have recognized that depression, anxiety, and low self-esteem may be both consequences of and precursors to bullying [18], [19]. Thus, children who are bullied may be more likely than others to develop problems with depression, anxiety, and low self-esteem. In other cases, these symptoms may signal to others that a child may be an "easy target" [20].

Somatic problem adolescent boys mean 2.78±SD 1.606, adolescent girls mean 3.28±SD 1.526, t value -1.877 is statistically significant at the level of 0.05 level, but both gender mean shows Somatic issues but adolescent girls feel more issues as compare to adolescent boys like – without any medical (biological issues) – aches pain, headache, abdomen pain, chest pain, feel sick, problem in eyes, rashes or other skin problem, vomiting. In Fekkes and colleagues [21] study they found that bullied children were more likely than nonbullied peers to develop stomach pain, sleep problems, headache, tension, bedwetting, fatigue, and poor appetite after having been bullied. Even Fekkes study they found Bully victims had significantly higher chances for depression and psychosomatic symptoms. [22]

Attention and Deficit hyperactive behavior problem adolescent boys mean 2.86±SD 1.402, adolescent girls mean 2.98±SD 2.034, t value -.987 is not statistically significant at the level of 0.05 level, but both gender mean shows Attention and Deficit hyperactive behavior problem like –fail to finish thing, concentration and attention problem, not sit in one place for long time, inattentive or easily distracted, talk too much, loud. From Tali Heimana [23] study results shows students with ADHD who were cyber victims and students with ADHD who were cyber witnesses reported on greater feelings of emotional loneliness and a lower belief in their social self-efficacy than the non-ADHD students. Oppositional defiant problem adolescent boys mean 2.38±SD 1.711, adolescent girls mean 2.06±SD 1.592, t value 1.131 is not statistically significant at the level of 0.05 level, but both gender mean shows Oppositional defiant problem like –argues with others ,disobedient at home, school, stubbornness, temper tantrums or hot temper. Similar study by Smokowski [24] and Barker [25] found Children in this (ADHD) group may have attention problems, low self-esteem, and especially high rates of depression and oppositional-conduct disorder. Conduct problem adolescent boys mean 2.63±SD 1.718, adolescent girls mean 2.32±SD 1.732, t value .984 is not statistically significant at the level of 0.05 level, but both gender mean

shows conduct problem like –cruel to animals, destroy own things, breaks rules in home, school, fights with others, lies or cheat others, physical attacks people, sets fires, stubborn, irritable, vandalism, truant. Klomek said relationships between bullying involvement and suicidal ideation for boys are mediated by childhood depression and externalizing problems, such as conduct disorder. [26]

Present study shows every single person experiencing low well-being, emotional distress, or other mental illness but still they frequently using social media like (Facebook, twitter, whats-up, tic-toc, internet surfing etc.) Young adolescents who are the heaviest users of social media are more likely to report and experience – depression, anxiety, somatic pain, self-harming or suicidal thinking. Specifically, cyberbullying victimization, as a kind of repeated, chronic, and uncontrollable stressor, can evoke victims' strong negative emotions (e.g., fear, helplessness, and feeling vulnerable), diminish their self-worth, and induce their self-blaming attributions [27]. These results are consistent with the wider literature suggesting that cyberbullying may result in lower levels of self-esteem [28, 29].

Table No. 4- Distribution Of Adolescence Usages Of Multi-media.

Mobile/tablet/ television /internet or laptop	2-3 hours		4-5 hours		More than 6 hours		Total
	Female	Male	Female	Male	Female	Male	
	6 (9%)	10 (11%)	18 (26%)	13 (14%)	44 (65%)	69 (75%)	160
Count	16 (10%)		31 (19%)		113 (71%)		

As it shown in table no. 4- present study found strong links between using social media and hours of usage. Around 113 (71%) of adolescent boys 69 (75%) adolescent girls 44 (65%) using 5 hours or more in a day, four to five hours of uses around 31 (19%) of adolescent boys 13 (14%) and adolescent girls 18 (26%), and two to three hours of usage 16 (10%) adolescents boys 10 (11%), and adolescent girls 6 (9%), both genders have high intensity usages. The relationship between traditional bullying and cyberbullying is not well understood, but what is clear about children involved in cyberbullying is that they report high rates of Internet use. Juvonen and Gross [30] found that cyberbully victims were significantly more likely to be heavy Internet users (>3 h/day). A study by Mishna et al [31] found that cyberbullies, cyberbully victims and cyberbully/victims were significantly more likely to use the computer for >2 h/day.

Table No. 5- Distribution Of Adolescence Usages Of Multi-media

Areas	Female	Male	Total
Social fear or relationship issues	51(75%)	74 (80%)	125 (78%)
Family relationship issues	32 (43%)	51 (55%)	83 (52%)
Avoidance Behavior	43 (63%)	69 (75%)	112 (70%)
Somatic Pain	44 (65%)	53 (58%)	97 (61%)
Sleep disturbance	32 (47%)	28 (30%)	60 (38%)

According to present study most of the adolescents not feel confidence talking to their parents for their aggression, feeling or for the social media usages (as shown in table no .5). However 125 (78%) of adolescent boys 74 (80%), and adolescent girls 51 (75%) are facing social related issues like fear, negate social relationship or communication. Social anxiety and fear have also been associated with cyberbullying. In a study on adolescents, a cross-lagged panel analysis suggested that social anxiety contributed to later victimization by cyberbullying [32], many studies have highlighted the role of social-emotional aspects in cyberbullying. For example, loneliness, peer rejection, a depression mood, anxiety, and lack of interest in social activities or social support were fund to be associated with involvement in cyberbullying [33, 34, and 35], in a study conducted by Schoffstall and cohen [36] cyberbullies had fewer friendships as well as lower rating of social acceptance by peers. 83 (52%) of adolescent boys 51 (55%) and adolescent girls 32 (43%) facing family relationship issues like- fear, trust issues. Most of the adolescents reported feeling less confident about speaking to their parents about anything that would upset them on social media, and they would not approach communication difficulties with parents. 112 (70%) adolescent boys 69 (75%) and adolescent girls 43 (63%) facing avoidance behavior difficulties like- enjoy little, avoid social activities, shy , lack of energy, withdrawn social , and doesn't get along with other children. Somatic pain 97 (61%) adolescent boys 53 (58%), and adolescent girls 44 (65%) shows somatic pain –headache, abdomen pain, skin, eye, chest pain, on Gini and Pazzoli [37] study they found that bullied children had significantly higher risks of psychosomatic problems compared with noninvolved peers. and sleep disturbance 60 (38%) of adolescent boys 28 (30%) and adolescent girls 32 (47%) shows sleep disturbance like- irrational fear, nightmares, worries etc. One research group tested the pathway from sleep to anger to cyberbullying following on the theory that sleep disturbance is linked to aggression via angry affect [38].

CONCLUSION

The prevalence of cyberbullying, cyberbullying experience 77/160 (48%)- 29/68 (42.64%) female adolescents and 48/92 (52.17%) male adolescents, cyber-victims 69/160 (43.12%) -29/68 (42.64%) female adolescents and 40/92 (43.47%) male adolescents and cyber-bullies were 69/160 (43.12%)- 25/68 (36.76%) female adolescents and 44/92 (47.82%) male adolescents respectively.

The current study contributes to the exploration of cyberbullying and emphasizes its potential to have problematic effects. Furthermore, it underlines the important role that family contexts play on adolescent psychological problems. Adolescents are being affected by cyberbullying, and the impact an experience of internet (email, chat room, massage, social networking sites, You Tube) bullying can have on their psychological health issues).

Overall the risk of experiencing psychological distress, were greatest for victims, experience, and self-cyberbullied. Compare with both the genders likely to repot depressive features, anxiety, self-harming, suicidal ideation , feeling self-worthless, lack of hope of life, don't feel emotional support from parents and social. Level of anxiety of adolescence boys and girls are not statistically significant but both genders mean score indicate high level of anxiety.

Recognizing these could be an important advance in designing components of prevention and intervention efforts. First of all, effective psychological management must be developed for protecting adolescents from being cyberbullied and preventing others from becoming bullies on the cyber stage. Moreover, an important step is to heighten awareness of the consequences of cyberbullying as well as empathy towards those who are affected. In this regard, psychological guidance and counselling for parents should be provided. Finally, future therapeutic interventions focused on the psychological adjustment of victims from cyberbullying, and most important prevention should be pre- counselling and guidance in school and individual bases counselling given by psychologist before the child comes in contact with multimedia (Mobile, Internet ,web surfing etc.)

LIMITATION -

The results of this study level of anxiety in adolescents undergone cyber-bullying were the statistically not significant but means shows high risk of anxiety and it's a short-term study. In order to study the long-term psychological effects of cyber-bullied and behaviour difficulties to obtained results for a more extended population.

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