**LEARNING TO DEAL WITH IT: ONE CASE STUDY WORKFORCE'S PERCEPTION OF THE RISK OF CYBER BULLYING**

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**Abstract**

Cyber bullying has received increasing attention over the past decade. Drawing on a longitudinal research study which examined the introduction of the use of social media into one publicly funded medical practice based in the United Kingdom, a case study which is of particular value in the light of there being decreasing opportunities to examine organisations which have yet to commence using social media, this study reveals that the perceived risk of cyber bullying plays a significant role within the workplace, influencing the actions individuals take within that context. Identifying that the need to manage the introduction of the use of social media is a task which is shaped by the nature of the workplace organisation, this paper reveals influences on the cyber bullying perspective. It highlights the significance of effectively managing the introduction of the use of social media, as well as the expectation that organisations handle to the satisfaction of the targeted worker any cyber bullying behaviours which arise. Also identified is the need to manage worker perceptions in relation to the social media-using expertise of those who might be tempted to undertake cyber bullying activities.

***Keywords:***Cyber bullying, social media, perception, organisational change

## 1. Introduction

There is a wealth of literature relating to 'offline' harassment. Cyber harassment, more commonly talked of as cyber bullying and, from this point forward, the term used within this paper, is a more recent concept but one which has received increasing attention both within and outside the popular press over the past decade (Arntfield, 2015). The term is suggested to have been first used in 2000 (Aboujaoude et al, 2015) and is explained as being "a course of action in which an adult individual or groups of individuals use digital media to cause another individual to suffer emotional distress" (Van Laer, 2014 p.85). However there are a number of writers (e.g. Arntfield, 2015; Aboujaoude et al, 2015) who emphasise the absence of a consensus on a workable definition of the cyber bullying term.

The difficulty with establishing a definition acknowledged, examples of cyber bullying include 'sending insulting or threatening messages, spreading rumours, disclosing personal information, displaying embarrassing pictures, or excluding others during online communications' (Patton et al, 2014). Furthermore, cyber bulling is, on occasion, spoken about using alternative terms including cyber mobbing, flaming, trolling (Arntfield, 2015) or cyber stalking (Aboujaoude et al, 2015).

Although some overlap between physical and cyber bullying can be identified, and Aboujaoude et al (2015, p.16) identify 'traditional bullying is a risk factor for cyber bullying', there is a need to recognise that there are also some differences between the two approaches (Canty et al, 2016). Online harassment, for example, typically involves text or materials which gain permanency through the digital footprint and which are visible or available more broadly (Patton et al, 2014; Winiewski et al, 2013).

The literature provides extensive focus on the impact of cyber bullying on young people (e.g. Heirman and Walrave, 2012; Patton et al, 2014; Best et al, 2014; Nilan et al, 2015). This attention appears to be on account of that sector being the first to fully embrace the digital medium (Best et al, 2014; Nilan et al, 2015; Moll et al, 2015) as well as the effect revealing itself in youth self-harm (O'Connor et al, 2014; Aboujaoude et al, 2015). However, there is acknowledgement (e.g. Aboujaoude et al, 2015) that cyber bullying is not an issue which is limited to young people. Difficulty in identifying the significance of the issue is the consequence of a perceived tendency towards under reporting. Whilst perpetrators might be reasoned as tending to conceal their behaviour, victims too are regarded to under report. This is the consequence of fearing punishment (such as the loss of technology and/or perpetrator retribution) as well as being a result of embarrassment (Aboujaoude et al, 2015).

Where attention turns to the workplace, the predominant focus is on how organisations protect, or indeed fail to protect, their customer's data and how ill considered use of online media can result in a compromising of perceived integrity. Such actions are explained by Demers and Sullivan (2016 p.518) to be the consequence of 'electronic vulnerabilities'. Beyond this there is literature relating to the personal use of social media when in the workplace, predominantly a desire to manage the use of social media by individuals during their hours of employment, with some acknowledgement that cyber bullying, for example 'inappropriate, unwelcome remarks about employees by supervisors, or among co-workers' (Hamer, 2013 p.4) should not be tolerated and thus needs to form part of a workplace social media policy. Receiving less attention is how the perception of a risk of bullying from outside of an organisation might influence the actions and perspectives of individuals within the workplace context and thus the willingness of those workers to embrace changed operational practices, such as those encountered by organisations starting to make use of social media.

This paper contributes towards the filling of that gap. This paper is drawn from a longitudinal research study which examined the introduction and use of social media in one publically-funded medical practice based in the United Kingdom; a case study which is of particular value in the light of the decreasing opportunities which exist to examine organisations which have yet to make use of social media.

**2. Theoretical background - Cyber bullying in the workplace**

In many contexts there is a link between exposure and risk. Social media is no exception. It is in this context that frequent users of social media are reasoned to be vulnerable to the risk of cyber bullying (Patton et al, 2014, Arntfield, 2015), with that risk embracing both the role of target and observer. However, the concept of cyber bullying embraces far more than social media. Indeed, there is suggestion that cyber bullying most frequently occurs via e-mail (Patton et al, 2014). Furthermore, it is the user of the media rather than the media itself which demonstrates the bullying actions, with Best et al (2014, p.34) highlighting that technology 'is value-free, neither promoting the good nor the bad'. However, amongst the wealth of positive actions which have the potential to result from social media, it is the negative outcomes which often receive a heightened profile. The consequence is that social media has attracted some negative publicity.

In an effort to combat that negative profile and specifically to deter those who are inclined towards engaging in online harassment, the providers of social media platforms have introduced various monitoring technologies and processes. However, the effectiveness of these tools has been subject to critique, both with regard to their effectiveness but also with regard to the extent to which these tools are, in their own right, intrusive (Van Laer, 2014).

Bullying is argued to occur where there is a power imbalance among individuals (Nilan et al, 2015; Whittaker and Kowalski, 2015). In the traditional context this is typically related to physical strength or social status, whereas in relation to technology the link is more frequently attributed to technological expertise (Whittaker and Kowalski, 2015; Aboujaoude et al, 2015). In itself the changing nature of technology can contribute to the presence of an imbalance as individuals progress at different rates towards becoming familiar with the capabilities of the developing technologies, with those who are more attuned to the capabilities of current technologies, or at least perceiving themselves to be the more capable with regard to using those technologies, drawing confidence from that expertise or perception. Whittaker and Kowalski (2015, p.16) provide an example of this in their tracking of how instant messaging, chat rooms and social media platforms have been used in turn to execute actions which can be perceived as bullying in their nature; identifying that 'as new modes of technology emerge, new means of cyber bullying appear'.

A significant, but often overlooked, difference between traditional bullying and that which emanates from the use of technology relates to the relationship between the respective parties. In the traditional context there is usually a tangible relationship between the victim and the perpetrator of the bullying act. There is a misassumption that in the context of cyber bulling that the victim and the perpetrator will have a similar relationship (Whittaker and Kowalski, 2015; Canty et al, 2016). However social media facilitates anonymity, for example through the use of nicknames, impersonation, the hiding of electronic trails, hacking and identity theft. Indeed it can be argued that there are levels of anonymity associated with how robustly the individual wishes to disguise their true identity and that this can be purposefully manipulated by the would-be bully. This 'hiding' through disguise risks facilitating what Winiewski et al (2013, p.39) refer to as 'the diminution of a sense of responsibility' leading to what Rowe (2014, p.242) terms, 'rash and perhaps unthinking web use'.

Just as Nilan et al (2015, p.2) highlight that "school policies that recognize cyber bullying often falter at the point of effective identification of key actors and events", likewise there is a concern with regard to how effectively issues can be handled when the context in which the cyber bullying is encountered is the workplace. Bystanders, for instance, are identified as typically taking no or ineffective action to halt the effect of the bullying act (Whittaker and Kowalski, 2015; Winiewski et al, 2013). It is for this reason that schools have been urged to adopt intervention strategies which focus student attention on cyber bullying in order to 'help them understand the impact of their behaviours on victimized students' (Heirman and Walrave, 2012 p.619). In part this is the consequence of cyber bullies surrounding themselves with likeminded thinkers, those who Winiewski et al (2013) describe as consequently seeing little wrong in the standards of behaviour exhibited. This approach to surrounding oneself with like minded individuals is not, however, limited to the context of bullying, whether online or otherwise. It is, for example, highlighted to be a particular feature in the use of social media, for example in relation to the use of the Twitter platform in order to support professional development (Beadle, 2014).

A focus on the need to take appropriate action is similarly echoed in the workplace literature, where the concern of employers regarding what action is appropriate for them to take is regularly noted (e.g. Hall, 2012). Rowe (2014 p.251) identifies that "a high proportion of staff believe that their employer has an obligation to take action regarding negative posts, particularly those that are derogatory or personally insulting, in order to protect the health, well-being and reputation of staff" but acknowledges that the perceived sensitivity to comments varies. The literature argues, both in relation to physical and emotional abuse, that there is an absence of a common benchmark and thus, using the words of Rowe (2014 p.251), "What is considered harmful and damaging to one individual may be considered relatively trivial to another'. Rowe's (2014, p.255) research, in the context of university life, identifies that universities have the right to monitor and react to comments posted on official university forums, albeit that not all comments, even where individuals are critically named, may warrant intervention. Furthermore, he puts forward a recommendation that action should only be taken on non university sites in the event of a complaint or report being made and, even then, to "advise the complainant to approach the relevant group administrator or social networking provider direct to have the post removed and, where appropriate, the offending site or user account de-activated".

It is clear that some occupational sectors have received more focus with regard to bullying behaviours than others. The issue of increasing violence, generally regarded to include verbal and physical abuse, against health service staff, particularly those based in hospital locations, has, for example, been the focus of a wealth of literature (e.g. Beecham, 2001; Dyer, 2003). Here, for example, it is reported that 40% of nurses and midwives have encountered abuse within a 12 month period (Keogh, 2014) and over 80% of staff have experienced at least one abusive event during their shift (Sprigg et al, 2007). Efforts to respond to these risks, and intended to sent out a reassuring message to staff as well as flagging up more broadly that 'violence and intimidation are unacceptable' (Ferns and Chojnacka, 2005 p.51), include the introduction of both a zero tolerance campaign (Essex, 2001) plus the establishment of a central computerised assaults register (Burke, 2003). Comparisons between the health service and other sectors have also been noted (Sprigg et al, 2007). However less attention has been paid to the perceptions of staff working within the medical field more broadly. This paper focuses on the perceptions of staff working within one publically funded medical practice based in the United Kingdom.

**3. Method**

The data for this paper was gathered using 22 semi-structured interviews undertaken over a 2 month period in the autumn of 2015. This was part of the first stage of a longitudinal study into the adoption and use of social media wherein interviews were conducted to establish the pre-existing understanding of social media amongst the case study workforce. At the time this data was collected the organisation had not commenced making use of social media but had expressed its intention to do so. Each interview lasted approximately 45 minutes and was conducted on a 1-2-1 basis at the case study organisation's site, the medical practice.

Participants in the study were self-nominating and approximately two thirds of the workforce chose to become involved in this first stage of the research activity. The body of participants included each of the organisational roles. Each interview was undertaken, transcribed and coded by the writer, the researcher, who used both open and semi-structured questions, followed by a progressive coding approach informed by the factors identified as arising within the participant responses.

**4. Findings**

It is important to note that the research was conducted to establish the pre-existing understanding of social media. The study had not sought to specifically draw out concerns related to the broader concept of cyber bulling and the fact that cyber bullying-related issues conclusively arose was identified to be reflection of the depth of concern which the participants felt.

Three key issues were identified, the potential for social media to empower the complainant; the risk of individual workers being on the receiving end of a negative online focus; and the ramifications arising from the increased onus placed on performance. These are considered in turn.

**4.1 Empowerment of the complainant**

Whilst empowerment is generally regarded to be a positive, the sentiment was that too much power had the potential to lie in the wrong hands. These 'wrong hands' were explained by Participant 11 as being those with 'fast reaction[s] and excellent manipulation skills'. Several participants expressed surprise that postings were not, using their terminology, 'policed' before becoming visible on the respective social media platform; that there was no need to prove that comments were factual before they were shared.

That empowerment meant that users could tailor the use of social media for their own purpose and, indeed, that this was one of the benefits anticipated from the organisation's forthcoming use of social media, was identified. Despite this acknowledgement, the focus of participant responses regularly returned to the negative potential of social media, suggesting that these negative perceptions of empowerment generally outweighed the positive perceptions.

From the body of 22 participants, only one person indicated that there might be more than one view. Participant 15 talked about the need for 'a balanced opinion' but even here their explanation drew down to the individual making the posting being wrong if it had the potential to cast individuals, or the organisation as a whole, into a negative light. Generally participants were concerned that the perception of the practice as a whole, and individuals as professionals, should be unblemished. Furthermore, there was suggestion that if an individual was a professional, for example they had undertaken some form of medical training, then what that individual had to say should be accepted as being inherently correct. Asked why this should be so, Participant 19 explained that they saw this unquestioning effect to be the consequence of how hard those professionals had worked to get to the position they held.

**4.2 On the receiving end of a negative focus**

The approach taken to postings was argued to vary from the broad ranging, for example a generic statement, down to a focus on the individual. It was this focus on the individual, generally but not always a negative focus, which generated particular concern. As Participant 4 identified,

It would be very hard if you were named, were singled out. Even the toughest of us would go home and have a mull over that. We do our best out there, sometimes under very difficult circumstances. It is hard not to take messages personally.

The potential for negativity to have impact on the individual outside of the work role was identified to add to the significance of being on the receiving end of a negative online focus. Participant 19, for example spoke of 'going home and having a look online' and of being 'disheartened' should negative comments become visible.

There was indication that it was an expectation of being professional which precluded a response to negative postings and that other outlets for that anxiety needed to be used. Participant 12 highlighted, for example, that

It is very hard not to engage in an argument [when negative comments are made]. I have to rise above it. I belong to a professional discussion group so that's where I go if I want to discuss something...not a place where just anyone can listen to what you are saying.

**4.3 Increased onus to perform**

When the participants spoke of an 'onus to perform', a term specifically used, they were not seen to be suggesting a desire to shirk their professional responsibilities but, instead, to be drawing attention to the effort they perceived they would increasingly be needing to deploy in 'being seen' to fulfil their job role; to be seen as performing. There was emphasis on the effort they deployed being wasted, in that the effort engaged in *exhibiting* fulfilment of the job role was not effort that could result in that job being completed.

The participants did not deny that issues had the potential to arise. Nor did the participants suggest that where issues became apparent that those issues should not receive attention. However they did suggest that they feared the use of social media within the medical practice would have a compounding influence; that others would be encouraged to complain and that the perception of the complaints arising would be greater than the reality. As Participant 4 highlighted,

There was a remark made about [the organisation] and before you knew it other people had joined on the band wagon. Someone puts something say one evening; you could wake up the next day and find loads added to it. It doesn't make very nice reading. It just wouldn't be the situation.

The reaction to an issue, the effect that would result in the compounding of the complaints, was reasoned to be the consequence of what Participant 15 termed 'the heat of the moment'. Participants were open with their suggestions as to what might give fuel to that heat, including in their explanations, the influence of poor educational attainment, poor work experience, the use of alcohol, and the potential influence of illegal drugs. Participant 19 highlighted that most of the negativity had the potential to arise from those with 'the time and the inclination but not the education or the words to say what they are trying to say'.

**5. Discussion**

Participants indicated that they considered the risk of cyber bullying occurring, as a consequence of the organisation adopting and making use of social media, to be significant. Although identified from the literature to be a comparatively recent concept, participant responses reflect Arntfield's (2015) identification of the pervading nature of the cyber bullying term over the past decade. Indeed the approach taken by the participants appears, furthermore, to be a reaction to the tendency identified within the literature towards under reporting.

The risk of being cyber bullied, whether that bullying is directed at the organisation as a whole or focused on individuals specifically, appears to have served to detract from the development of any body of enthusiasm to engage with the organisation's stated intention to make use of social media. The effect reflects Best et al's (2014) observation that there is a tendency to focus on the negative factors arising from technology's use. It is as a result of the perceived risk of being cyber bullied that it can be argued that the introduction of social media within the organisation requires significant active management; an additional burden which might not be generally welcomed.

Contributing to that management task is the need to embrace the broad nature of the media; that social media platforms have the potential to provide an intrinsic link between that workplace and any online persona created in a personal capacity. The example identified within the study of a participant making use of a 'professional discussion group' suggests some awareness of this need. The participant was clearly identified as having sought to find a resolution. Also identified was the fear of a compounding influence; that similarly to links being made between professional and personal personas, those engaging with the practice's social media presence (potentially, but not necessarily, users of that practice's medical services) would be encouraged as a consequence of the practice's social media engagement to escalate the number of complaints and that the perception created by complaints arising would thus become greater than the reality. The participants highlighted that factors that they deemed to be significant to their local population such as the influence of poor educational attainment, poor work experience, the use of alcohol, and the potential influence of illegal drugs, may well prove to be contributing factors. These factors might be considered in conjunction with the capacity which social media provides to 'hide' within the posting individual's identity.

The 'emotional distress' explained by Van Laer (2014) to be at the result of the cyber bullying activity is indicated by this study to have a negative impact as a consequence of little more than an anticipated outcome. A feature of that anticipated outcome is questioning surrounding the effectiveness of the expected responsive action, for example on the part of the organisation or of colleagues. The literature (e.g. Whittaker and Kowalski, 2015; Winiewski et al, 2013) identified the risk that the action taken might be absent or ineffective. However it is unlikely that individuals would wish to subject themselves to being on the receiving end of a bullying action, online or otherwise, simply to check the accuracy of their assumptions.

It was evident that the participants gained reassurance from control and structure, as illustrated by the reference to 'policing postings'. The change in operational practice, as well as acknowledgement of technology's changing pace, were portrayed to be compromising features. The ability to use technology effectively, to avoid being outwitted by more competent users (for example the people referred to by the participants using the 'wrong hands' phraseology) was significant to the perception being portrayed. Here the intention appears to parallel with the desire to avoid being compromised by a technological expertise power imbalance (Whittaker and Kowalski, 2015; Aboujaoude et al, 2015). However, whilst the presence of a desire to achieve and retain greater technology-using competence than other users and the potential to use social media for their own (medical practice) purposes suggest a desire to positively embrace social media, the study identified this to be a positivity compromised by as little as the *potential* of individuals outside the organisation to actively demonstrate their expertise. Here the perceived ability of others was seen to have similar effect to *proven* social media use competence.

The 'social media' term is noted to generate a measure of confusion. Best et al (2014, p.34) provide acknowledgement of this when highlighting that technology is 'value-free, neither promoting the good nor the bad'. The study identifies anxiety surrounding the term; that it is not simply the name of a tool but that the term also offers description. The word 'social', for example, indicates interaction and the variance of opinion that might typically arise from that interaction. This interaction is significant to the concerns raised and provides a contextual example of the exposure and risk debate acknowledged in the literature (Patton et al, 2014, Arntfield, 2015). Here the desire to maintain a professional persona, specifically to demonstrate the reasoned accuracy reflective of the medical profession generally and the operational medical practice specifically, was a significant influence.

Participants conveyed their desire to maintain a professional persona in their reference to there being an 'onus to perform'. Demonstrated was that it was the perception of the potential for a shortfall in the action taken, rather than the necessity of that shortfall arising, which has the capacity to generate concern. Furthermore, the administrative support processes were regarded to be innately linked with the functions undertaken by the medically-trained professionals with whom those administrative staffs were engaged to work. Although this provides indication of cohesion, this cohesion is also reflective of the tendency identified in the literature (e.g. Beadle, 2014) toward surrounding oneself with like minded individuals. Here there was potential for groupthink.

**6. Conclusion**

This paper contributes to the gap in research regarding how the perception of a risk of cyber bullying might influence the actions and perspectives of individuals within a workplace context. It highlights how, with an emphasis on what the study participants termed 'an onus to perform', the perception of a risk of cyber bullying can reveal itself through a reluctance to enthusiastically engage with the use of social media in a professional capacity, even when this is a tool which is regularly used by those same individuals at a personal level. Since the effectiveness with which the personal and the professional image cultured through social media can be separated is questioned, this is of particular note. The approach emphasises the need for a broader understanding generally as to how social media operates.

The risk of being on the receiving end of cyber bullying was perceived to be two fold, firstly relating to being part of a targeted organisation and secondly, although no less significantly, in relation to the risk of being singled out online as an individual working within that organisation. Identified is the significance of effectively managing the introduction of the use of social media within organisations, as well as the expectation that organisations will be effective in handling any cyber bullying behaviours which occur. A further factor highlighted by the study is identification of the need to manage worker perceptions with regard to the social media-using expertise of those who might undertake cyber bullying activities. Perceived ability in using social media is identified by this study to have a similar effect to *proven* social media use competence and this effect is one which also aligns with some general confusion surrounding use of the 'social media' term.

The need to manage the introduction of the use of social media might well be a task which is significantly influenced by the nature of that organisation, with participants identified to gain reassurance from control and structure. The medical practice which served as the case study was highlighted, for example, to demonstrate a particular vulnerability to bullying actions with its location in an area of significant economic deprivation highlighted by participants as having the potential to compound arising issues.

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