THE IMPACT OF ANTI BULLYING INTERVENTION STRATEGIES ON STUDENT’S DEVELOPMENT BETWEEN THE AGE GROUP 11 TO 13 YEARS

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Abstract: Bullying is usually defined as a subset of aggressive behavior characterized by repetition and an imbalance of power (Olweus, 1993). The behavior involved is generally thought of as being repetitive, i.e., a victim is targeted a number of times over a period of time. Also, the victim cannot defend himself or herself easily, for one or more reasons. S/he may be outnumbered, made to feel smaller or less physically strong, or less psychologically resilient than the person(s) doing the bullying (Smith, 2000). In the past two decades, the problem of school bullying has received much attention among educational authorities, school teachers and researchers in many countries including India. Being bullied makes teenage children incredibly insecure. When any child is being bullied, he/she can feel constantly insecure which has a big, physical, mental and emotional impact. According to various researches bullying occurs for a large part within the school's perimeters which at times goes unnoticed. Our schools need to take a greater role in handling bullying. The schools are in a position to provide more protection and support to children and their parents and exhibit real capacity to be the positive force to diminish these occurrences. The students who are bullied or had been bullying others should not be a problem but a part of solution to the problem of bullying. Keeping this in view an action research was conducted with 40 students between the age group of 11-13 years who were either the victims or the bullies themselves. Various intervention strategies was designed and implemented and the impact for the same showed the better adjustments issues both in school and at home, better parental support, the increased levels of confidence and self-esteem along with reduced levels of anger which are the important components of holistic development.

Key words: Bullying, Interventions, Teenagers, School system, Holistic Development

I. Introduction:

Bullying is the systematic abuse of power and is defined as aggressive behaviour or intentional harm that is carried out repeatedly and involves an imbalance of power, either actual or perceived, between the victim and the bully. According to Olweus, 1993, bullying is usually defined as a subset of aggressive behavior characterized by repetition and an imbalance of power. Also, the victim cannot defend himself or herself easily, for one or more reasons. S/he may be outnumbered, made to feel smaller or less physically strong, less psychologically resilient than the person(s) doing the bullying (Smith, 2000).
In the past two decades, the problem of school bullying has received much attention among educational authorities, school teachers and researchers in many countries including India and is considered an important social cause to be taken care of. Being bullied makes teenage children incredibly insecure. Bullying is a common occurrence for schoolchildren worldwide. Bullying occurs in all countries, affecting 8.6% to 45.2% among boys and from 4.8% to 35.8% among girls in the age group of 13 years according to “The large Health Behaviour in School-Aged Children study” (2006). Being bullied by peers is the most frequent form of abuse encountered by children, much higher than abuse by parents or any other adult bullies.

II. Conceptual Framework:
School bullying is a serious concern which has received considerable media attention. According to the World Health Organization (2012), bullying is defined as repeated, aggressive behavior--both direct (e.g., hitting, kicking, or pushing) and indirect (e.g., teasing, social exclusion, or spreading a rumor)--intended to cause physical and/or psychological harm to another individual.

A national survey in 2011 found that 23% of public school students (aged 12–18) reported bullying victimization (hereafter referred to as victimization (Robers, Kemp, & Truman, 2013). Another national survey found that 28% of students (aged 12–18) reported being bullied on school property, and an estimated 16% reported being bullied electronically in 2011 (Centers for Disease Control and Prevention, 2012).

Bullying victims frequently experience depression, anxiety, low self-esteem, school adjustment problems, academic difficulties, and suicidal behavior (Kim & Leventhal, 2008; Reece, 2008; Smokowski & Kopasz, 2005; Gruber & Fineran, 2007; Hjern, Alfven, & Ostberg, 2008; Vanderbilt & Augustyn, 2010).

III. Theoretical Framework:
Bullying has become a national epidemic and the behavior of bullying can be examined by looking at it through the lens of Social Learning theory. According to the social learning theory as described in Berger, (2015) it's an extension of behaviorism that emphasizes the influence that other people have over a person's behavior, stating that every person learns through observation and imitating other people's behavior. This means the bulling behavior was learned by his/her imitation of someone else or a group of other people. According to (Swearer, Wang, Berry & Myers, 2014) Social learning theory also knows as social cognitive theory can be used to explained aggressive bullying behaviors, for example youth who are exposed to domestic violence in the home are more likely to bully others than those who aren’t exposed to domestic violence and the same goes with children who socialize with aggressive peers: they are more likely to show aggressive behaviors toward others than those who do not socialize with aggressive peers. It is apparent that students who bully others is a result of what they see or what is being done to them. They are hurting and the root is unresolved emotional issues from witnessing violence in their homes or from their peers or both.

IV. Types of bullying:
There are many different types of bullying that can be experienced by children some are obvious to spot while others can be more subtle. The different types of bullying that we look at below are some of the ways that bullying could be happening.

1. Physical bullying
   Physical bullying includes hitting, kicking, tripping, pinching and pushing or damaging property.

2. Verbal bullying
   Verbal bulling includes name calling, insults, teasing, intimidation, homophobic or racist remarks,

3. Social bullying
   Social bullying can include:
- Lying and spreading rumors.
- Negative facial or physical gestures, menacing or contemptuous looks.
- Playing nasty jokes to embarrass and humiliate.
- Mimicking unkindly.
- Encouraging others to social exclude someone.
- Damaging someone’s social reputation or social acceptance.

4. Cyber bullying

The Cyber Bullying Research Centre defines cyber bullying as: Intentional and repeated harm inflicted through the use of computers, phones, and other electronic devices.

Cyber bullying can include:

- Abusive or hurtful texts, emails or posts, images or videos
- Deliberately excluding others online
- Nasty gossip or rumors
- Imitating others online or using their log-in.

V. The thought of the bullies:

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. Thus, most of the bullies have been found to be strong, highly popular and to have good social and emotional understanding. Bullying occurs in settings where individuals do not have a say concerning the group they want to be in. This is the situation for children in school classrooms or at home with siblings, and has been compared to being ‘caged’ with others. Those who have an emotional reaction (e.g., cry, run away, are upset) and have nobody or few to stand up for them, are the repeated targets of bullies. Bullies may get others to join in (laugh, tease, hit, spread rumors) and feel more power ignoring the consequences of their own actions.

VI. Consequences of Bullying:

Bullying affects a large number of children and lays the groundwork for long-term risk for psychological, physical, and psychosomatic outcomes.

The physical health consequences of bullying can be immediate, such as physical injury, or they can involve long-term effects, such as headaches, sleep disturbances. However, the long-term physical consequences of bullying can be difficult to identify and link with past bullying behavior versus being the result of other causes such as anxiety or other adverse childhood events that can also have physical effects into adulthood. (Hager and Lead beater, 2016)

Most of the evidence on the physical consequences are found to be somatic in nature and the nature pertains to the individual who is bullied. The emotional effects of being bullied can be expressed through somatic disturbances that originate from stress or an emotional condition. Common stress or anxiety-related symptoms include sleep disorders, gastrointestinal concerns, headaches, palpitations, and chronic pain. The relationship between peer victimization and sleep disturbances has been well documented (Hunter et al., 2014; van Geel et al., 2014).
Psychological and physical stressors, such as being the target of bullying, activate the stress system centered on the hypothalamic-pituitary-adrenal (HPA) axis (Dallman et al., 2003; McEwen and McEwen, 2015). Stress has ubiquitous effects on physiology and the brain, alters levels of many hormones and other biomarkers, and ultimately affects behavior. Therefore, both a general understanding of stress during early adolescence and, where known, specific links between stress and bullying can provide insight into the enduring effects of bullying.

The psychological stressor may take the victim away from proper decision making, solving the problem, thinking critically and creativity levels has also been seen at a down stroke.

When any child is being bullied, He/she can feel constantly insecure and has a big mental and emotional impact. He / She feels unaccepted, isolated, angry, and withdrawn. Students are always wondering how they can do better and how they can escape a bully's notice. They are also anxious because of the constant tension and find difficulties to maintain certain friendships or miss out on taking certain chances that could actually help in their development.

VII. Purpose of study

With the emergence and increasing visibility of bullying, schools and communities are realizing that bullying is not just a normal part of childhood, but can result in significant long-term damage. New fields of research suggest that severe social stress can even affect gene expression, leading to long-term chronic physical and mental health problems. The present disciplinary actions like issuing of warning cards, suspension, Fine can only lead to temporary behaviour correction. The study aims at involving the students who had bullied others or were being bullied to create awareness among students of their age group and helping the child to develop self-confidence, leadership qualities and learning social skills. A key focus of the present study is to provide training and strategies to the student, so that they can feel empowered to help other children prevent and cope with social difficulties arising due to bullying. It also focuses on howthese strategies contribute in the holistic development in these children.

VIII. Overall Objective

The overall objective of the research is to study the impact of various intervention strategies on the students who are either the bullies or the victims on the various aspects of mental health in school going children.

IX. Specific Objectives:

1. To identify 35 children from class VI to VIII of a recognized CBSE School in Ludhiana district who had been bullied or were bullied in school or under any circumstances at some point of time.
2. To study the effect of expert lecture, involvement in spreading awareness, on the emotional and social adjustment of the selected students.
3. To analyze the effect of intervention strategies on the child’s self-esteem, control over anger and adjustment to the school environment.
4. To understand the impact of interventions on the child’s holistic development
X. Research Methodology

A. **Research design:** A self-made questionnaire with open ended questions was given to the students and a semi structure interview was conducted to deduct the experimental group from the control group.

B. **Subjects:** A total of 40 students were selected (Sampling method) from grade 6 to 8 to be the part of an anti-bullying team for the middle section and be a part of the development of intervention strategies.

C. **Methodology and Intervention:**

The paradigm of action research was be adopted in the intervention. The basic procedure designed for a 12-week program included the following steps which are:

- The survey by students, parents and the teachers on bullying was taken.
- A parent consent form was taken be for the research project.
- Psychological assessment tools were used on the students to measure the levels of their anger (Anger Control Scale), adjustment (AISS) and self-esteem (Rosenberg Self-esteem scale).
- A talk by an expert was conducted to create awareness to the students about the types of bullying, its consequences and helping self and others.
- Designing of the intervention strategies.

D. **The Intervention Strategies**

Systematic reviews of literature and meta analyses conducted over the past decade recommend that the most effective bullying prevention programmes are the ones involving the whole school and multicomponent programmes that combine universal and targeted strategies (Bradshah, 2015; Rigbee & Slee, 2008; Vreeman & Carroll, 2007).

- **Role Play:** A role play was designed and scripted to sensitize the team and the students on the roles of anti-bullying squad in the middle section.
- **Duties:** Various duties were given to students to help them understand their role in helping others and realizing their own past mistakes and behaviours. For example, The students who were regularly in the habit of verbal abuse were given the duty to solve the problems of the victims in the primary school, the students who became aggressive were involved in observing and collecting information about the bullies. The victims in this team were involved in solving minor problems in the classrooms and encouraging students who lacked confidence.
- **Sensitization:** The team members were told to create awareness amongst their school mates about the bullying and their consequences which helped them to reflect on their own selves.
- **Classroom Climate:** The classroom environment was made friendly for both the bullies and the victims where each understood the probable causes for both the groups and extended support.
- **Mindfulness:** A mindfulness session for 20 minutes were conducted every day for the selected team members to help them know their own selves, improve their self-esteem, manage their mood swings and could gain various other benefits.
- **Physical Activity:** Regular physical activities were conducted for the team members.
- **Reinforcement and Incentives:** Students were provided with reinforcement (Both positive and negative) along with incentives to give shape to their appropriate behaviours.
- **Parental Involvement:** Regular meetings with parents were conducted for regular follow ups.
XI. Data collection and analysis:

The questionnaires were administered by the students of the individual classes created by the counsellor to select the students for study. The questionnaires on anger control, self-esteem and adjustment were done before the interventions and after the interventions were conducted after 12 weeks. The data obtained were then exported to a Microsoft Excel spreadsheet and analyzed. Descriptive and comparative analyses were created.

XII. Results:

The present study focuses on the selected students who were provided with training and strategies so that they can feel empowered contributing to better level of self-esteem, control over anger and adjustment to the school environment leading to their holistic development.

The assessment tools used for anger control, self-esteem and adjustment were conducted when the team was selected and was repeated after 12 weeks to understand the changes and development of students in different aspects like those of self-esteem, adjustment, peer relations, emotion management and social skills after the interventions were given. A total 60 students were invited to participate out of which 35 students were a part of the study (based on the interviews and questionnaires administered).

A decrease in the number of bullying episodes after the intervention was reported by the students in all types of bullying explored (physical, verbal, and indirect bullying, observers). In particular, a statistically significant decrease in all the bullying areas investigated for was reported for students and also showed improved levels of adjustment, self-esteem and management of anger.

XIII. Discussion of Results:

Testing your Anger Control

![Graph showing scores on pre and post test for anger control](image-url)
As shown in figure 1, the average score of 35 students on the anger scale before any strategies were implemented was 61 which shows that did not have much control over their anger. The victims explained that due to being bullied they desired to express themselves by being loud, ordering others, getting irritated and henceforth anger was the tool. On the other hand, the bullies said that anger was the only way to exert their power over the others and hide their actual emotions. Regular interventions helped them to express their anger in more positive way and they were able to manage and control their anger in a better way which can be seen through the scores. The post intervention average score dropped to 39 which explains the significant difference and the effectiveness of implemented strategies.

The Rosenberg Self Esteem Scale:

Self-esteem is how we value and perceive ourselves which is based on our own beliefs and opinions. The students who are the bullies or the victims tend to have gone through the difficult time themselves in on or the other situations which lowers their confidence and make them loose their own worth. According to the pre test scores the students’ average score on the self-esteem scale lie in the range of 7-8 whereas after 12 weeks interventions at school and at home the score shifted at 15 which explained the appropriate response to the interventions.
The Adjustment Scale (AISS)

Once the student in the age group of 13 years and has created the environment for himself it gets an uphill task to make a shift. Figure 3 shows the similar thought. In the pre planning stage, the average score for selected 35 students was at 175 whereas after the implementation of strategies rose up to 205. The scores did not have much increase pointing to the fact that students get very comfortable in the already self-made environment and has to take considerable efforts and acceptance to adjust to the rest of the social environment both at school and at home.

XIV. Conclusion:

Bullying affects the entire educational environment and has an impact on one’s right to a proper education. It represents the most common expression of violence in the peer context during school years. Considering the strong amount of evidence of the negative health consequences for bullies, their victims, and observers as documented by studies from different countries, bullying in schools has become an important and complex global public health issue. Keeping this in view the present study aimed to identify the bullies and the victims between the age group of 11-13 years in a recognized CBSE school in district Ludhiana (Punjab). Out of 40 selected students for the intervention programme, 35 students became a part to this study. The students went through series of pretests and post tests on anger control, self-esteem and adjustment in school environment. The results explained that the whole school approach with multidisciplinary intervention strategies involving all the stake holders right from peers to teachers to counsellor to parents the problem of bullying can be tackled effectively. If the bullying concerns are addressed at school level only, the problems might not increase or even persist at the later stages.
XV. **Limitations:**

- The study was conducted in one school only.
- The sample size was limited.
- Time plan for intervention strategies was limited to 12 weeks only.
- No differences were drawn separately for boys and girls.
- Family environment and socio economic status were not studied at a constructive level.

XVI. **Future Implications:**

- The study can be conducted in two or more schools amongst the same age groups.
- The time period for the intervention strategies could be taken for one year.
- Comparative study on bullying in the urban and rural area can be done.
- A comparative study on the effects of bullying and interventions for both boys and girls can be done.
- The family environment can be studied for further understanding of the causes of bulling and the effectiveness of intervention strategies.

XVII. **Acknowledgement**

The authors are fully indebted to the School Principal Mr. A.P. Sharma for his approval to conduct the research in the premises and his all-time support at various levels. The authors acknowledge the contribution of the teachers, the participants, the peer groups of the students and the family members of the participant students.

**References:**


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Appendix

THE PARENT CONSENT FORM

We, the Parents of ______________________ from class _____ section_______ give permission and consent for my ward to be the member of Anti-Bullying Squad of Middle Section of the school and also to actively participate in all the activities and projects associated with this group.

We appreciate and support the steps and the efforts taken by the school.

Date: ____________

Signature: ______________ (MOTHER) Signature: ______________ (FATHER)

Contact no. ______________ Contact no. ______________
Survey form for Parents  
(Bullying)

Directions: Please answer the Questions related to bullying at your child’s school honestly.
Name of the Child: __________________________
Class & Section: __________________________

1. Do you see Bullying as a problem at School? Yes  No
2. Has your Child been hit, pushed or kicked On purpose? Yes  No
3. Has your child been called mean names or Teased on a consistent basis at School? Yes  No
4. Has your child ever been excluded from A social event(games, function, recess) at School? Yes  No
5. Has anyone physically threatened your child? Yes  No
6. Has your child ever tried to stay home from School because they were afraid of someone At school? Yes  No
7. Did your child ever tried to tell a teacher or The incharge about the bullying situation done At School? Yes  No
8. Have you talked to your child about how to Respond appropriately to a bully? Yes  No
9. What more do you feel could be done at our school to prevent bullying or instruct students about bullying?
## Rosenberg Self Esteem Scale

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th>STRONGLY AGREE</th>
<th>AGREE</th>
<th>DISAGREE</th>
<th>STRONGLY DISAGREE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>I feel that I'm a person of worth, at least on an equal plane with others.</td>
<td></td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
</tr>
<tr>
<td>2</td>
<td>I feel that I have a number of good qualities.</td>
<td></td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
</tr>
<tr>
<td>3</td>
<td>All in all, I am inclined to feel that I am a failure. **</td>
<td></td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
</tr>
<tr>
<td>4</td>
<td>I am able to do things as well as most other people.</td>
<td></td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
</tr>
<tr>
<td>5</td>
<td>I feel I do not have much to be proud of. **</td>
<td></td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
</tr>
<tr>
<td>6</td>
<td>I take a positive attitude toward myself.</td>
<td></td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
</tr>
<tr>
<td>7</td>
<td>On the whole, I am satisfied with myself.</td>
<td></td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
</tr>
<tr>
<td>8</td>
<td>I wish I could have more respect for myself. **</td>
<td></td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
</tr>
<tr>
<td>9</td>
<td>I certainly feel useless at times. **</td>
<td></td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
</tr>
<tr>
<td>10</td>
<td>At times I think I am no good at all. **</td>
<td></td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
</tr>
</tbody>
</table>
Prof. A. K. P. Sinha (Rajpur)  
Prof. R. P. Singh (Patna)

AISS - ss

Please fill up the following information:  
Name ____________________________ 
Age ____________________________ Gender: Boy ☐ Girl ☐ 
Name of the School ____________________________ 
Class ____________________________ District ____________________________ 

Dated ____________________________

INSTRUCTIONS

On the next pages, there are some statements covering your school problems, which have three response alternatives ‘Always’ and ‘Sometimes’ and ‘Never’. Read every statement carefully and decide what you want to answer it with. If your answer is in ‘Always’, then tick the right mark ‘✓’ under ‘Always’, if in ‘Sometimes’, tick the right mark ‘✓’ under ‘Sometimes’ and if in ‘Never’, tick the right mark ‘✓’ under ‘Never’. Remember your answer will be told to any person, so please give the correct answer without hesitation. You may take your own time, but try to finish it as soon as possible.

*Your responses will be kept confidential*

SCORING KEY

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Area</th>
<th>Raw Scores</th>
<th>z-Score</th>
<th>Level of Adjustment</th>
</tr>
</thead>
<tbody>
<tr>
<td>I.</td>
<td>Emotional</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.</td>
<td>Social</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>III.</td>
<td>Educational</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
TESTING YOUR ANGER CONTROL

Answering the following statements and add up your total score. Circle 1 for *never*. Circle 2 for *rarely*. Circle 3 for *sometimes*. Circle 4 for *frequently*. Circle 5 for *always*.

1. I get angry with little or no provocation.
   1   2   3   4   5

2. I have a really bad temper.
   1   2   3   4   5

3. It’s hard for me to let go of thoughts that make me angry.
   1   2   3   4   5

4. When I become angry, I have urges to beat someone up.
   1   2   3   4   5

5. When I become angry, I have urges to break or tear things.
   1   2   3   4   5

6. I get impatient when people don’t understand me.
   1   2   3   4   5

7. I lose my temper at least once a week.
   1   2   3   4   5

8. I embarrass family, friends, or coworkers with my anger outbursts.
   1   2   3   4   5

9. I get impatient when people in front of me drive *exactly* the speed limit.
   1   2   3   4   5

10. When my neighbors are inconsiderate, it makes me angry.
    1   2   3   4   5

11. I find myself frequently annoyed with certain friends or family.
    1   2   3   4   5

12. I get angry when people do things that they are not supposed to, like smoking in a no smoking section or having more items than marked in the supermarket express checkout lane.
    1   2   3   4   5

13. There are certain people who always rub me the wrong way.
    1   2   3   4   5
   1  2  3  4  5

15. I yell and/or curse.
   1  2  3  4  5

16. I get so angry I feel like I am going to explode with rage.
   1  2  3  4  5

17. I get easily frustrated when machines/equipment do not work properly.
   1  2  3  4  5

18. I remember people and situations that make me angry for a long time.
   1  2  3  4  5

19. I can’t tolerate incompetence. It makes me angry.
   1  2  3  4  5

20. I think people try to take advantage of me.
   1  2  3  4  5

TOTAL: ____

Score Key:
80-100- Your anger expression is likely getting you into serious trouble with others. It would probably be worthwhile to seek professional help.

60-80- You may not need professional help but you need to work on controlling your anger in a very deliberate manner.

50-60- You have plenty of room for improvement. Reading a self-help book on anger control could be beneficial

30-50- You’re probably getting angry as often as most people. Monitor your episodes of temper and see if you can lower your score on this test in 6 months.

Below 30- Congratulations! You are likely in a good comfort zone.