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Aggression and Violent Behavior

The effectiveness of school-based bullying prevention programs: A systematic review



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ABSTRACT

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Keywords: Bullying Victimization Bullying intervention Bullying prevention Bullying is a social phenomenon. About 30% of school children are involved in bullying as victims, bullies, or bully/ victims. The victims of bullying suffer multiple negative consequences, including poor social and academic adjustment, depression, and anxiety. This paper extends Farrington and Ttofi's (2009) meta-analysis of controlled trials of 44 bullying interventions, which suggests that bullying programs are effective in decreasing bullying and victimization. We review controlled trials of bullying interventions published from June, 2009 through April, 2013, focusing on substantive results across 32 studies that examined 24 bullying interventions. Of the 32 articles, 17 assess both bullying perpetration, 10 assess victimization only, and 5 assess bullying only. Of the 22 studies examining bullying perpetration, 11 (50%) observed significant effects; of the 27 studies examining bullying victimization, 18 (67%) reported significant effects. Although the overall findings are mixed, the data suggest that interventions implemented outside of the United States with homogeneous samples are more successful than programs implemented in the United States, where samples tend to be more heterogeneous. Few studies have measured bullying with sufficient precision to have construct validity. Finding strong measures to assess the complex construct of bullying remains a major challenge for the field.

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1. Introduction

* Corresponding author. Tel.: +1 919 962 1225; fax: +1 919 962 1698. *E-mail address:* crobert8@email.unc.edu (C.B.R. Evans). School bullying is a serious social problem. Bullying includes both direct aggressive behavior (e.g., physical intimidation, verbal threats) and indirect aggressive behavior (e.g., exclusion, rejection). Typically, bullying has four related forms or dimensions: physical (i.e., physical force such as hitting or kicking), verbal (i.e., oral or written communication such as teasing or name calling), relational (i.e., direct or indirect actions intended to harm the victims' reputation and relationships such as rumor spreading or physically or electronically posting embarrassing images of the victim), and damage to property (i.e., stealing or damaging the possessions or property of victims; Gladden, Vivolo-Kantor, Hamburger, & Lumpkin, 2014). In addition, bullying has three defining features: intent to harm (i.e., the bully intends to harm the victim), imbalance of power (i.e., the bully is physically stronger and/or has more social power than the victim), and repetition (i.e., the bullying is focused on particular children and occurs repeatedly; Olweus, 1993).

As a social dynamic, bullying involves a large proportion of elementary, middle, and high school students. Given the lack of national studies, the prevalence of bullying among elementary school-aged children must be estimated from local and state survey studies. For example, in a sample of 3530 students in Grades 3 thru 5 enrolled in an urban school district on the West Coast of the United States, 22% of students reported involvement in bullying as a bully, a victim, or a bully/ victim (Glew, Fan, Katon, Rivara, & Kernic, 2005). The majority of national studies of bullying have used samples from middle and high schools. A national survey of 15,686 students in Grades 6 thru 10 reported 30% of students appeared to be involved in bullying as a bully, victim, or bully/victim in the current semester (Nansel et al., 2001). A more recent national survey, the School Crime Supplement to the National Crime Victimization Survey, examined 4326 adolescents and found 28% reported bullying victimization (National Center for Educational Statistics, 2011). In addition, the national Health Behavior in School Aged Children survey of 7182 students in Grades 6 thru 10 reported that the most prevalent form of bullying was verbal bullying (e.g., teasing, name calling) with 54% of students reporting involvement in the past 2 months. Other prevalent forms of bullying included relational bullying (i.e., exclusion; 51%), physical bullying (21%), and victimization using electronic media or cyber bullying (14%; Wang, Iannotti, & Nansel, 2009).

Bullying is a peer-group process and children can be actively involved as bullies, victims, or bully/victims. Moreover, children can be passively involved as bystanders, offering varying degrees of support to bullies or victims (Salmivalli, 2010). Research has suggested that a child's active participation in bullying has negative developmental consequences (Gladstone, Parker, & Malhi, 2006; Ttofi, Farrington, & Losel, 2012; Ttofi, Farrington, Losel, & Loeber, 2011a). As discussed later, these negative sequelae include depression, anxiety, relationship difficulties, and criminal behavior. As these negative outcomes have become more widely recognized among policy makers, educators, and scholars, a variety of school-based bullying intervention programs have been developed.

Farrington and Ttofi (2009) conducted a systematic review of 44 bullying interventions tested in controlled trials. The results of their meta-analysis showed that, on average and when compared with routine school services, these programs decreased bullying between 20% and 23% and reduced victimization between 17% and 20%. For example, in a cluster randomized trial of elementary students in Grades 3 thru 5 (N = 1345), Fonagy et al. (2009) estimated the program effect of the Creating a Peaceful School Learning Environment (CAPSLE) intervention on bullying and victimization. Using a cluster sample of nine elementary schools, Fonagy and colleagues randomly assigned the schools to participate in one of two treatment conditions (i.e., CAPSLE or psychiatric consultation, in which psychiatrists provided individual consultation to children with problematic behaviors), or the treatment-as-usual control condition. The study results showed that after 2 years of program implementation, the CAPSLE program reduced bullying victimization. A comparison of victimization reports showed that 19% of students in the CAPSLE program reported victimization compared with 25% of children who received psychiatric consultation and 26% of children in the control condition.

From their review, Farrington and Ttofi (2009) distilled elements of effective anti-bullying programs such as: presence of parent and teacher training, use of classroom disciplinary methods (i.e., strict rules for handling bullying), implementation of a whole-school anti-bullying policy, and the use of instructional videos. These elements were positively correlated with a reduction in bullying and victimization. In addition, Farrington and Ttofi found that program duration and intensity were related to decreased bullying and victimization, and interventions inspired by the work of Dan Olweus appeared to be more successful.

Characteristics of studies were also related to bullying outcomes. Farrington and Ttofi (2009) found that studies using more rigorous designs produced lower effect estimates. Expressed as an odds ratio (OR), the average effect size for bullying was 1.10 for randomized experiments, 1.60 for before–after experimental control, 1.20 for other experimental-control, and 1.51 for age-cohort designs. Across designs, the mean OR was 1.36 (Farrington & Ttofi, 2009). On average, intervention groups had bullying rates 1.36 times lower than control groups. Programs focused on older children (i.e., 11 years or older) had larger effect sizes. In fact, when age was divided into four categories (i.e., 6–9 years, 10 years, 11–12 years, and 13–14 years) the weighted mean OR steadily increased for both bullying and victimization. In addition Farrington and Ttofi observed that programs implemented in Europe were more successful than programs implemented in the United States.

1.1. Developmental sequelae of victims, bullies, and bully/victims

Compared with youth who reported no involvement in bullying, those youth who reported involvement as bullies, victims, or bully/ victims reported poorer psychosocial adjustment (Aluede, Adeleke, Omoike, & Afen-Akpaida, 2008; Gini, 2008; Kaltiala-Heino, Rimpela, Marttunen, Rimplea, & Rantanen, 1999; Nansel et al., 2001). Although bullies, victims, and bully/victims share some risk-related characteristics, outcomes vary. For example, in elementary school, victims and bully/ victims have been shown to have more serious adjustment problems than bullies. In a sample of 565 students in Grades 3 thru 5, teacher reports and child self-reports indicated that as compared with noninvolved children, both victims and bully/victims experienced higher levels of psychosomatic symptoms (e.g., feeling tired, dizzy, tense) whereas only victims experienced greater psychosocial difficulties (e.g., conduct problems, hyperactivity, problems with peers). Bullies were similar to noninvolved youth, but bullies reported higher levels of sleeping problems, feeling tense, and hyperactivity (Gini, 2008).

Consistent with these findings, a study with a sample of Grade 6 students found that victims of bullying reported the highest levels of depression, social anxiety, and loneliness as compared with bullies, bully/victims, and noninvolved youth (Juvonen, Graham, & Schuster, 2003). This pattern of negative outcomes appears to persist into high school, as evidenced by a study with a sample of older youth (i.e., mean age 15 years) in which youth who were consistently victims and bully/victims, reported higher levels of depression, anxiety, and withdrawal as compared to bullies and noninvolved youth. In contrast, a different study with bullies reported the perpetrators experienced more externalizing problems (e.g., aggression) than their victims or bully/victims (Menesini, Modena, & Tani, 2009). The data tend to support a description of victims as lonely, anxious, and insecure (Olweus, 1993) and suggest that victimization is associated with deficits in social competence, feelings of powerlessness, rejection by peers (Kvarme, Helseth, Saeteren, & Natvig, 2010; Nation, Vieno, Perkins, & Santinello, 2008) and decreased academic achievement (Glew et al., 2005).

In contrast to victims, bullies tend to be more aggressive (Olweus, 1993). For example, in a study with a sample of 23,345 students in elementary, middle, and high school comparing bullies and noninvolved youth, O'Brennan, Bradshaw, and Sawyer (2009) found that bullies were more likely to endorse reacting to provocation with aggression.

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