

Impact of Antibullying Educational Program on Psychological Adjustment among Preparatory School Victims

AZZA MEDHAT AZIZ MANSY¹, AFAF ABD EL HAMID ABD EL RAHMAN², SANAA AHMED KAMAL³

¹Assistant Lecturer of Psychiatric Mental Health Nursing, Faculty of Nursing, Cairo University, Egypt

²Professor of Psychiatric Mental Health Nursing, Faculty of Nursing, Cairo University, Egypt

³Professor of Psychiatry Faculty of Medicine, Cairo University

Correspondence to Azza Medhat Aziz Mansy, nsy@yahoo.com

ABSTRACT

School bullying is a global problem confronting the international community that has been existed in public and private schools for years with a negative impact on the psychosocial wellbeing of victims that have limited social skills ability, thus anti bullying educational program including social skills training and bullying related knowledge may limit the negative consequences of school bullying. The present study aimed to evaluate the impact of antibullying educational program on psychological adjustment among preparatory school victims. A purposive sample of 50 students detected from preparatory school screening for school bullying victims, aged between 11-15 years old, were randomly divided into study and control group. The study conducted in preparatory school at kom Hamada, Al beheira governorate. The effect of the program was measured using two tools psychological adjustment (PA), composed of 16 items and program related knowledge using pre and post test that composed of 17 items. Results of the current study revealed that there is a statistical significant difference between study and control group in relation to psychological adjustment and program related knowledge for all items at post test and follow up test where $p < 0.05$. Thus to conclude that School-based anti-bullying programs that involve social skills learning produce modest positive outcomes in reducing bullying and victimization that in turn enhance psychological adjustment of victims.

Keywords: Bullying, psychological adjustment, antibullying educational program

INTRODUCTION

School bullying is a global problem confronting the international community that has been existed in public and private schools for years. It can involve solo or group based abuse or aggression directed toward a single individual or a group of individuals with or without the presence of witnesses or bystanders (Kazarian ,2013). Bullying is Repeated exposure to negative actions on the part of one or more persons. Victim has difficulty defending him or herself (Shetgiri,2013). Also, bullying has been defined as a form of social interaction, not necessarily long standing, in which a more dominate individual exhibits aggressive behaviors that is intended to cause distress to a less dominate individual (Smith, 2016).

Regarding types of bullies, there are four types of bullies ; Physical Bullies bully others by means of physical force. This includes hitting, kicking, or shoving others. Verbal Bullies who bully others by use of harmful words or language through name-calling, insulting, making racist comments, or harsh teasing. Relational Bullies: bully by social exclusion, indirect verbal threats or spreading hurtful rumors. Reactive Bullies: these individuals are often both bullies and victims (Hussein, 2013).

When children are repeatedly subjected to bullying, they are more likely to experience loneliness, anxiety, lower feelings of self-worth, and susceptibility to childhood depression. Accordingly, bullying has negative behavioral, mental, psychological, physical and academic consequences for both victim and bullies. Thus, Being a victim or a bully is associated with an increased risk of mental and physical health problems (Albdour, & Krouse, 2014).

Psychological adjustment involves students' proneness to emotional problems, such as manifestation of

depressive symptoms. Institutional attachment describes a student's satisfaction with the college experience in general and with the college he/she is attending in particular (Salami, 2011).

Bullying experience was associated with negative physical and psychological health outcomes as well as increased levels of stress among victims. Nurses and other primary health care providers can screen adolescents for physical symptoms and stress related to bullying. In addition providing culturally tailored prevention and intervention strategies may help to promote the overall health of adolescents who experience bullying by increasing their resistance to stress and developing supportive coping mechanisms (Albdour, 2017).

Psychiatric mental health nurse can also educate parents, teachers and other community members on normal adolescent behavior, setting limits and providing structure. All this can encourage independence and lessening power struggles and maintain healthy and independent functioning which in its role produce apposite change in adolescent's relationships with adults and in their feelings about themselves. Nurses who work in schools and community settings can engage in screening and early nursing intervention with high risk teenagers to promote adaptive responses and prevent the development of future problems. They can teach coping skills that can promote healthy adaptation and integrated adult functioning (Stuart, 2013).

Significance of the study: Bullying is a life-changing experience that has drastically affected more than a third of adolescents in schools globally . In the Arab region, only a few studies have addressed the issue of bullying and PV in schools. These studies have found varying prevalence rates across countries ranging from 20.9% in the United

Arab Emirates to 44.2% in Jordan (Fleming, Jacobsen, 2009). Similar rates (31%) have been reported from a nationally representative sample of Egyptian adolescents (Celedonia, Wilson, El Gammal, Hagra, 2013).

In Egypt, a study done by Celedonia, Wilson, El Gammal & Hagra, (2013) aimed at reporting trends in physical fighting among Egyptian adolescents. and revealed that Thirty-one percent of adolescents reported being involved in a physical fight. The well-known risk factors for violent behavior are depression and bullying victimization are prominent among Egyptian adolescents; while the lesser understood risk factor of sedentary behavior is present as well. Protective factors center on social aspects such as understanding parents and helpful peers. Otherwise, A study conducted by Michael . Wilson , Andrea . Dunlavy & André Berchtold, (2013), detected that Egypt is the highly prevalent rate of school bullying (34.2%).

School violence and bullying also has wider social and economic costs as well as a long-term impact as the effects persist into adult life. Involvement in school bullying can be a predictor of future antisocial and criminal behaviour and social and relationship difficulties. In addition, school violence is a key factor contributing to under-representation of girls in education (Zych, Farrington, Llorent, & Ttofi, 2017).

Psychiatric nursing is concerned with reducing environmental stress and optimizing an individual's reaction to coping with stress in order to maintain his or her health. Stress prevention, reduction and coping are central to nursing theories and practice as it is connected with individuals, families and community health. As a primary health care provider, school nurse can work with other professionals to reduce bullying among students, strengthens their stress resistance and coping mechanisms as well as to promote their general health.

Nowadays, a lot of attention has been paid for school bullying and its consequences. That is why; an attempt has been made to conduct educational program for school students about school bullying and assessing its impact on their psychosocial and academic adjustment. Findings of this study might help in reduction of negative consequences among students and enhancing their psychosocial and academic adjustment.

This study aimed to evaluate impact of school bullying educational program on psychological adjustment among preparatory school victims

Research hypotheses: 1-Students who will participate in the program will have score in level of knowledge higher than control group compared to the pre program scores at the end of the program

2-Students who will participate in the program will have score in psychological adjustment higher than control group compared to the pre program scores at the end of the program.

SUBJECTS AND METHODS

Research design: This study was conducted using randomized controlled trial (RCT). Study participants were assigned randomly to the study either control or study group through double blindness, the researcher prepared

cards with names of students and allowed for two students one for control and one for intervention to choose from these cards, each student choose 25 card with 25 name of participants.

Subjects: A purposive sample of (50) according to the sample size equation was calculated using a G-power version 3.1.1 for power analysis. A Power of .95 ($\beta = 1 - .05 = .95$) at alpha.05 (one-sided) we used as the significance level and effect size= (.03).

Students were selected according to the following criteria: Male or female students at preparatory level and their age ranged between 11- 15 years old.

The study was conducted in Kotb Abd El Fattah primary and preparatory school for both males and females affiliated to educational administration at Kom Hamada Al Beheira Governorate.

Tools of data collection: Three tools were used to measure the current study variables

1-Structured socio demographic data questionnaire

It was used to obtain the required data from the selected students such as age, year of education, parental education and father's job, Hobbies etc....It was developed by the researcher.

2-Adolescents psychological adjustment scale (Mansy, Osman&Abd El Wahab.2015)

The scale was developed by the researcher in the research of master degree in the research of master degree. It was designed specifically to measure adolescents adjustment Consists of 16 items which reflect self-esteem, happiness, hopefulness, anxiety and nervousness, problem solving ability, response to painful situations.

Each item of the questionnaire rated by the student on three-point Likert scale from 1 (no), 2 (sometimes), 3 (yes). And reversely for the negative statements (13,14,15,16,).

Program evaluation tool: The tool was developed by the researcher. It consists of 17 questions the score of each question was 5 for all questions except one question about type of bullying scored 20, the total score of the questionnaire was 100.

Validity and reliability: The tools were submitted to five members of psychiatric nursing and medicine experts. Modification on the tool was made in the response to panel's judgment on the appropriateness of the content and grouping of statements regarding each subscale and accuracy of scoring and recording items. Cronbach's alpha coefficient was calculated to assess the reliability of the study tools through their internal consistency. Reliability of bullying questionnaire tool was 0.899 which is high so no questions were changed, and reliability of adjustment tool was used by the researcher in previous research and was 0.96 which is high so no questions were changed.

Procedure: A review of the past, current Arabic and English related literature covering various aspects of the problem was done, using available text books, articles, periodicals, journal, and internet to get acquainted with research problems and develop the study tools. Content of the program was reviewed by a panel of experts in psychiatric nursing, psychiatric medicine and psychology. Content validity of the program was tested by experts in psychiatric nursing. Before administration of the program,

An official permission was granted upon a letter issued from the faculty of nursing to the central agency for public mobilization and statistics then directed to the ministry of education. In the ministry of education, the letter is issued to the dicterorate of education in Damanhour then the letter directed to administration of Kom Hamada Al Beheira Governorate then the agreement obtained and a letter of agreement directed to the director of KotbAbd El Fattah primary/ Preparatory School for both males and females affiliated to educational administration of Kom Hamada Al Beheira Governorate.

All male and female students who fit the criteria for inclusion were approached where the purpose and the nature of the study were explained to. Semi structured interview was used with each participant to fulfill the study tools. Oral and written consent was obtained from each student's parents before data collection. The intervention group was divided into three groups each group consisted of 8 students. The school bullying educational program was held on 12 sessions, from the period of 1-7-2020 to 15-8-2020 two sessions per week. Each session lasted for two and half hour for each session and half hour break in between session.

The school bullying educational program was accomplished based on three basic goals; The first goal focused on raising awareness about school bullying and how it affects the lives and future of students. The second goal aimed to raise awareness about how to stop school bullying. The third goal seeks to reduce psychosocial and academic negative consequences among school students being experienced bullying. Training sessions focused on teaching skill modules using brief didactic instruction, educational videos, discussion and brain storming, behavioral modeling, role playing and behavioral rehearsal, written notes for theoretical content, self evaluation and recording and individual activities.

Skills learned were: dealing with bullies, negative and depressive personals, learned assertiveness, communication skills, friendly behavior, helping others self-confidence, stress management, relaxation techniques, positive feeling and positive self-talk.

Regarding control group, after post test and follow up test, they received one session for conclusion of the content provided, a written notes, educational videos were explained to them.

Program sessions: Session (preparatory): Introduction and Overview of program, pre assessment for both groups.
Session (1): Myths and Facts about school bullying and understanding Types of school bullying and elements of school bullying.
Session (2): Impact of school bullying on psychosocial and academic adjustment and how to stop bullying.
Session (3): Social skills needed to support student against being victim
Session (4): How to acquire skills of conversations and communication skills
Session (5): Common assertiveness techniques.

Session (6): How to be assertive

Session (7): How to deal with stress, frustration and anxiety.

Session (8): How to acquire good peer relationship , to be kind and make friends.

Session (9):How to reduce social anxiety

Session (10): How to increase self confidence

Session (11): How to think and feel positively

Session (12): Conclusion, summary and evaluation

Session (13): post assessment for both groups

After the End of the program, post test was done for adjustment scale and program related knowledge. Feedback was taken from participants to know impact of the program on psychosocial and academic aspects of life then positive reinforcement was given for participants. The researcher provided the study subjects a time after one month to meet with them to review achievements of the program goals and answer the adjustment questionnaire for follow up.

Statistical Analysis: On completion of data collection, data were tabulated and analyzed using (SPSS) program version 20. Relevant statistical analysis was used to test the obtained data. Descriptive and inferential statistics were performed such as mean, standard deviation, frequency, percentage, T test and correlation coefficient. The level of significance was considered at the 5% level ($P=0.05$).

RESULTS

As regards demographic data of study and control groups, table 1 reveals that 60% of both groups their age was 13 years old. Regarding gender, it was found that the highest percentage of control group were male, while among study group were female, 88% of both groups were at 1st preparatory grade. Regarding father education, it was found that 32% of study group can read and write and equal percentage of both groups were secondary level of education, 24% & 40% of study and control group fathers were highly educated. Regarding fathers job 40% & 56% of study and control group were working at governmental occupation respectively. As regards mothers education, the highest percentage of both study groups mothers can read and write. Regarding hobbies, the highest percentage of control group prefer sports while about equal number of study group prefer reading and sports.

As shown in Table 2, there is a statistical significant difference between study and control group was found in relation to psychological adjustment where $p=(0.0001)$ for both items at post test and follow up test respectively.

Table 3 reveals that there is a statistical significant difference between study and control group in post test and follow up where study group is higher than control group regarding their knowledge about bullying, assertiveness and communication skills, stress management, self confidence and total score of knowledge where $p=(0.0001)$ for both items.

Table 1: Demographic data of study and control groups (n=25 for each group)

Values	Study group		Control group	
	No.	%	No.	%
Age				
10	0	0.0	2	8.0
12	8	32.0	6	24.0
13	15	60.0	15	60.0
14	2	8.0	2	8.0
Gender				
Male	8	32.0	23	92.0
Female	17	68.0	2	8.0
Grade				
1 st preparatory	22	88.0	22	88.0
2 nd prep	3	12.0	1	4.0
3 rd prep	0	0.0	2	8.0
Father education				
can't read or write	5	20.0	6	24.0
read and write	8	32.0	3	12.0
Secondary level education	6	24.0	6	24.0
University graduate	6	24.0	10	40.0
Governmental	10	40.0	14	56.0
Father's job				
Private	6	24.0	4	16.0
free work	7	28.0	4	16.0
Daily worker	2	8.0	3	12.0
Mother's education				
can't read or write	6	24.0	6	24.0
read and write	13	52.0	4	16.0
Secondary level education	3	12.0	7	28.0
University graduate	3	12.0	8	32.0
Hobbies				
Music	0	0.0	2	8.0
Drawing	3	12.0	0	0.0
Reading	9	36.0	6	24.0
Sport	8	32.0	15	60.0
Other	5	20.0	2	8.0

Table 2: Comparison between psychological adjustment of study and control groups at three times of assessment

Variable	Time	Mean±SD		t-test	p-value
		Study	Control		
Psychological adjustment	Pre	27.08±6.53	29.40±6.98	1.21	0.23
	Post	35.36±3.97	27.04±5.69	5.98	0.0001*
	Follow up	33.96±3.86	25.72±5.32	6.25	0.0001*

*significant at p-value<0.05

Table 3: Comparison between knowledge of study and control groups at three times of assessment

Variable	Time	Mean±SD		t-test	p-value
		Study	Control		
Bullying awareness	Pre	8.68±6.18	10.48±4.13	1.21	0.23
	Post	40.4±4	13.16±4.8	21.5	0.0001*
	Follow up	39.16±4.6	13.84±4.3	19.82	0.0001*
Assertiveness and communication skills	Pre	3.8±3.3	4.76±2	1.11	0.26
	Post	18.96±2	4.7±1.8	25.7	0.0001*
	Follow up	18.4±2.1	4.88±1.9	23.26	0.0001*
Stress management	Pre	3.68±3.5	5.4±2.7	1.91	0.06
	Post	13.76±0.59	5.12±2.6	15.99	0.0001*
	Follow up	13.4±1	5.56±2.7	13.31	0.0001*
Self confidence	Pre	1.76±2.1	2.96±1.8	1.92	0.05
	Post	8.48±1	3±1.75	13.40	0.0001*
	Follow up	8.16±0.98	3.12±1.7	12.34	0.0001*
Total Knowledge	Pre	18±13.7	23.60±8.52	1.78	0.08
	Post	81.60±5.20	26±8.08	28.94	0.0001*
	Follow up	79.12±6.86	27.40±8.18	24.22	0.0001*

*significant at p-value<0.05

DISCUSSION

Sociodemographic characteristics of study and control

group: As regards sociodemographic characteristics of study and control group, result reveals that most of students of both groups were 13 years old, the majority are in 1st preparatory level education. These results based on inclusion criteria. WHO (2016) identifies adolescence as the period in human growth and development that occurs after childhood and before adulthood. Adolescents aged between 10-19 years account for more than one-fifth of the world's population.

Regarding gender among study and control group it was found that the majority of study group was female students compared to control group. From the researcher point of view these findings may be due to the technique of randomization during assumption of participants of both study and control group.

This finding was similar with the study of (Silva , Oliveira , Carlos , Lizzi , Rosario, Silva, 2018) who found that the proportion of females was 72.1% in the intervention group and 58.8% in the control group, a non-statistically significant difference

As regards Fathers education, of the study and control group ,results of the current study reveals that more than half of the studied fathers and mothers were highly and secondary educated for both study and control group. Parents' educations help to meet the needs of their sons in adolescence stage. These results stress the importance of parents being partners in education of their adolescents. They should actively support and enrich educational process which may have an impact on psychosocial and academic adjustment.

Improving one's knowledge and understanding of the nature of a child's relations. with other children at school can lead to the early detection of problems associated with bullying. This can more readily be achieved by cultivating supportive and trusting relations with one's children so that they are more likely to disclose any problems (Rigby, 2013). Bullying knowledge and awareness may be affected by parental level of education and occupation.

As regard father`s occupation, this study reveals that the majority of student`s fathers among both study and control group were governmental and private employee, and have free works. This result may indicate that Father`s job may determine the student's economic level which may have impact on their adjustment especially as low economic state may cause additional burden on parents which may affect their parenting and physical, emotional, academic and social caring for their children.

Additionally, Syaodih& Handayani (2016) revealed that a low economical condition may trigger bullying behaviour in children for fulfilling their living needs, for example stealing in school, blackmailing, and also may accompanied by physical contact.

According to a 2016 UN report²⁰, children in vulnerable situations, who face stigma, discrimination or exclusion, are more likely to be bullied in person and online. Also, Children with disabilities, children who are socially excluded, who are out of school or who belong to minorities or are affected by migration are also less likely to be able to access the internet and thus learn about safety

online. As a result, when they do have access, they are more at risk of cyberbullying. (SRS.G.VACH,2016)

As regards hobbies of study and control group students, The current study also reveals that more than sixty percent of both study and control group students are practicing reading and sports. Practicing preferred hobbies enhance self esteem, emotional state, relieve stress and enhance person`s ability to make decision and manage stressors and adjust to bullying. Hobbies can Provide a creative outlet, Foster social interaction, Help promote new relationships and Increase self-confidence. provide opportunity to feel a deep sense of satisfaction with oneself, which will enhance self-acceptance and self-love. Also it allow for new friendship and in turn to more social support.

Differences between study variables (psychological adjustment and program related knowledge)of study and control group during three times of assessment

(pre program, post program and follow up): Regarding comparison between study and control group in related to study variables (program related knowledge and psychological adjustment)at (preprogram, post program and follow up) test, study results reveals that there are statistical significant differences between study and control group at post program and follow up test where study group is higher than control group regarding their psychological adjustment and knowledge about bullying, assertiveness and communication skills, stress management, self confidence and total score of knowledge.

These previous results indicates that there is improvement in students` level of psychological adjustment and program related knowledge which occurred as a response to impact of educational antibullying program which mean that hypothesis 1that hypothesize that students who will participate in the program will have score in level of knowledge higher than control group compared to the pre program scores at the end of the program and hypothesis 2 that hypothesize that Students who will participate in the program will have score in psychological adjustment higher than control group compared to the pre program scores at the end of the program is supported.

At the end of the program participants became aware about assertiveness, communication skills , relaxation techniques, stress and it`s complications, how to be self confident and to accept own self, how to talk to own self positively, how o formulate positive statements to use during stress and times of failures and how to be kind using kind statements and behaviors. This improvement in level of knowledge appeared in post test score compared to pretest score

Similar results were obtained after conducting 2Bs program by Saibon, Rashid, Ali & Abdullah, (2012) to enhance knowledge and awareness on bullying, also aimed at educating and training students to become intellectually bullying conflict-solver and to be positive-thinking bystanders to help victims of bullying and help the management and administrative persons in schools in dealing with bullying problem by establishing a bullying prevention operating room. Findings indicated that enhancement of knowledge and awareness on bullying involved all participants in the study and that that the 2Bs program has influenced the performance of students to

answer the questions related to knowledge and awareness of bullying.

Expect Respect was a school-based program that aimed to promote awareness and effective responses to bullying and sexual harassment. Expect Respect consisted of five core program components, namely a classroom curriculum, staff training, policy development, parent education and support services. Participants reported that they produce changes in attitudes and beliefs, knowledge, self-awareness, and skills in developing healthy relationships. Girls who participate in the groups also report a decrease in insecurity and an increase in their ability to identify unhealthy behaviors by dating partners (Ttofi, & Farrington, (2011)).

A study conducted by Bowllan (2011) and revealed that Olweus Bullying Prevention Program (OBPP) may initially result in an increase in reports of bullying secondary to enhancing students' understanding and capacity to accurately identify bullying.

Additionally, study of (Kõiv, 2012) who conducted Social Skills Training as a mean of improving intervention for bullies and victims, multiple target social skills were modeled, role played, and coached. Results showed a clear and statistically significant decrease across gender in the frequency of school bullying among those bullies and victims who participated in the program comparing pre-test (at the beginning of academic year) and follow-up test (at the end of the academic year) results. The frequency of bully/victim problems decreased 53-67 percent in the nine-month following period among anti-bullying group participants.

Similarly, a study conducted by Da Silva, De Oliveira, Braga, Farias, da Silva Lizzi, Gonçalves & Silva, (2016) aimed to verify whether improved social and emotional skills would reduce victimization among Brazilian students who were victims of bullying attending the 6th grade, aged 11 years old, the behavioral cognitive intervention based on social skills. The results indicated a significant decrease in victimization presented by the intervention and comparison groups when comparing pre- and post-tests aggression decreased in the intervention group. This indicates a tendency of the victims in the intervention group to act with more civility, empathy, and self-emotional control, and to solve related problems in a non-violent way.

A study conducted by (Silva, Oliveira, Carlos, Lizzi, Rosario, Silva, 2018) to verify if the improvement of social and emotional skills reduces bullying victimization in 6th grade students. The results demonstrated that the intervention achieved its goal by significantly reducing the difficulty the victims of bullying had in social skills, a result maintained one year after the intervention. This means that the participants started acting with more politeness, empathy and emotional self-control and could solve interpersonal problems with their peers in a non-violent way, which is essential for making friendships. They also presented an increase in social support and in the capacity to defend themselves from aggressions.

CONCLUSION

This study clearly concludes that school-based anti-bullying programs produce modest positive outcomes in reducing

bullying and victimization and they are more likely to influence knowledge, attitudes, and self-perceptions. Interventions of bullying should also include building social skills for children and adolescents including: lessons on interpersonal skills, assertive coping strategies, empathy, and conflict resolution, social and emotional skills that help children more effectively handle life challenges and thrive in both their learning and their social environments. These skills allow children to calm themselves when angry, initiate friendships, resolve relationship conflicts respectfully, and make ethical and safe choices. A socially skilled individual is someone who can develop and maintain friendships easily, resolve difficult social problems tactfully, and 'essentially breeze their way through the social thicket of life.

Recommendations:: Anti bullying educational programs should be conducted for school students, teachers and parents to improve their awareness about bullying and consequently the psychological adjustment of school victims.

Source of Support: Self

Conflict of Interest: None

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