

Assessment of the Pattern and Impact of Bullying Behaviour among School Children

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Abstract

Bullying is widespread and perhaps the most underreported safety problem on school campuses. A non experimental descriptive survey was done to assess the pattern and impact of bullying behavior among the school children. 50 school children aged 10-14 years were selected through convenience sampling technique. The tool used was structured interview schedule. Variables under study included 4 predictors: types of bullying, places of being bullied, impact of bullying and measures taken by teachers and parents toward bullying. It was seen that 74% of subjects had been called names (e.g. mota, moti, kala, kali, ganju etc.), 66% had been made fun of, 62% had been robbed, 62% had been pushed or shoved, 58% had been slapped. 82% children had mild impact of bullying such as : feeling sick, feeling bad/sad, not wanting to go to school, having no friends, having difficulty in sleeping, low self- esteem, decrease in appetite ,not talking to anyone, waning of interest in play and other activities, becoming irritable, having nightmares, feeling frightened when alone, bed wetting, while 10% had moderate impact and 8% had severe impact of bullying. Common places of bullying were: the school premises before and after the school timings. The children reported that they had informed about the bullying incidents to their school teachers and parents.

Keywords: Bullying; School children; Impact;

Pattern.

Introduction

There is new concern about school violence, bullying is widespread and perhaps the most underreported safety problem on school campuses.[1] Bullying refers to deliberate harmful behaviours directed towards others, which are repeated over time, and involve a power imbalance between those who are engaging in bullying and those who are being bullied.[1] Bullying consists of three basic types of repeated abuse – emotional, verbal and physical, Verbal abuse could be on basis of race, religion, gender, sexuality or any physical disability.[1] It is very often children with special needs, handicapped children, overweight children, children who are shy and anxious and others with certain psychological traits who become victims of bullying. Bullied children often feel neglected and lonely. They are made fun of and left out of groups on purpose. Children who are being bullied dislike going to school and the very thought of going to school makes them fearful and uneasy. Bullying can also have long-term effects on both the bullies and the bullied. Bullying can be a humiliating and embarrassing experience for a child which can demoralize him/her. If the child is being bullied in his school, it is very incorrect to on part of parents to ignore this

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issue. The help and support of parents is very important to help the child cope with bullying.[1]

Overall it seems that bullying can be expected to occur in any school. Its prevalence in many countries suggests that most children will experience school bullying at some stage, be it as bullies, victims or as witnesses.[1]

International research suggests that bullying is common at schools and occurs beyond elementary school; bullying occurs at all grade levels, although most frequently during elementary school. It occurs slightly less often in middle schools, and less so, but still frequently, in high schools.[1]

School bullying problems negatively affect the lives of victims and bullies. Research found significant relationship between bullying behaviour and the physical, psychological, and social wellbeing of children.[1] Children who bully others, children who are victimised and children who both bully and are bullied, share a number of common characteristics and all are likely to suffer negative long term consequences. Important factors appear to be family and peer relationships.[5]

Bullying in school and college often slips under the parental radar because of the fear it strikes in the victim. According to a survey conducted in 150 schools in Mumbai and Thane by the Parents Teachers Association United Forum (PTAUF), 70 percent of students experience bullying in school, but only 20 to 40 per cent report it. Seventy percent even admitted to bullying being their pastime. However, bullying has defining features which set it apart from other aggressive behaviours, in that it is repeated, and that the bully or bullies have greater access to power than their victim(s).[3]

Overall goals of bullying. prevention/intervention programs should be to increase teacher awareness of bullying, develop clear policies that outline consequences for bullying, and provide skill training and support to both bullies and victims. Middle school personnel are encouraged to assess the unique needs of their schools and work collaboratively to design

and implement programs that will help create and reinforce safe environments for all students.[2] Also bullying has serious and far reaching impact on the psyche and personality of a person who undergoes it. Not only those who are bullied, but even the bully himself does not remain unaffected with his bullying behaviour. Therefore we undertook a study to assess the bullying behavior, which is a very common form of violence among school children. We attempted to look at the pattern and impact of bullying behavior among school children in selected schools of Delhi.

Methods

The research approach in this study was quantitative with Non-experimental descriptive survey design to assess the pattern and impact of bullying behaviour among the school children in selected schools of Delhi. Sample comprised of school children between 10-14 yrs of age, studying in selected schools of Delhi, selected through Convenience sampling technique.

The tool used was structured interview schedule. It included four sections: section 1 comprised of 3 items pertaining to the demographic data of the subjects. Section 2 consisted of two subparts: part A, which contained 11 items related to the places of being bullied. Part B contained 21 items related to Pattern of Bullying behaviour. Section 3 contained 13 items related to impacts of bullying. Section 4 contained 5 items related to measures taken by the school teacher and parents against bullying.

For the collection of the data, a formal administrative approval was sought from the schools authorities to conduct the study. The data was collected from 20th September to 24th September, 2013. The purpose of the study was explained to respondents and their consent to participate in the study taken. The data obtained was subjected to analysis using descriptive statistics.

Result

As regard the background data of sample subjects, 41% of subjects belonged to the age group of 11-12 yrs. , 74% subjects were males and 56% subjects were in fifth grade.

Types of bullying behavior

As far as types of bullying behavior among school children is concerned, it was seen that frequency and percentage were computed. It was seen that 74% of subjects had been called names (e.g. mota, moti, kala, kali, ganju etc.), 66% had been made fun of, 38% had been played jokes on, 50% had been attacked, 62% had been robbed, 34% had been denied to become a part of children's group, 50% had their things broken, 42% had not been talked to, 36% had been written bad things about, 62% had been pushed or shoved, 58% had been spread rumors about, 62% had been threatened that bad things will be done to them, 58% had been slapped ,46% had been punched.

Common places of bullying

With regard to the common places where the children reported that they were bullied, it was seen that the common places of bullying were: the school premises before the school timing 74%, followed by school premises after the school timing 56%, playground 54%, followed by school corridors 50%. School laboratories were places from where no bullying incidents were reported i.e 0%. Other such places where lesser incidents were reported were: school bus 28% and sporting area 20%. Fewer incidents were reported at school recreational rooms/halls 12%.

Impact of bullying behavior

82% children had mild impact of bullying such as: feeling sick, feeling bad/sad, not wanting to go to school, having no friends, having difficulty in sleeping, low self- esteem, decrease in appetite, not talking to anyone, waning of interest in play and other activities,

became irritable, having nightmares, feeling frightened when alone, bed wetting, while 10% had moderate impact and 8% had severe impact of bullying.

Further, 86% of school children had been bullied at some or the other time. Out of which, 52% school children reported that they had informed about the bullying incident/incidents to their school teachers. The teachers had taken certain measures to deal with the bullies in school such as the teacher scolded the bully, had punished them , had complained to bully's parents. Out of 50 subjects, 30(60%) said that they had also reported the bullying incident/incidents to their parents.

The parents took certain measures to deal with this problem. For example, parents had informed the school principal about the bullying behavior, had also informed, met and discussed with school teacher and had also complained to bully's parents.

Discussion

As per the study conducted earlier in karad , the study revealed that bullying was reported by 157 (31.4%) of the 500 children interviewed. The study revealed that 25 (16%) students were physically hurt and only 24 (24%) parents were aware that their children were being bullied.[8]

In the present study it was found that a vast majority, that is 86% school children had been bullied at some or the other time and out of these more than 50% had reported bullying incident to their parents.

This variation in the prevalence rate in these two studies could be because of certain individual and social reasons, such as children not being able to acknowledge and report bullying due to lack of well developed communication abilities and lack of conducive environment for free & frank communication at home & school. Children are at times too intimidated to report the bullying incidents. If the parents and teachers share a good rapport with children, then children may feel comfortable to talk about the bullying

behaviour. It is important that parents and teachers acknowledge and check bullying behaviour so that both, the victim and the bully are taken care.

The present study indicate that most of the subjects had been called names, this finding is in conformity to the finding of the study done by Borg that victims were mainly called names.[9]

Data from the study done by Slee indicated that most of the bullying took place in the classroom. These finding is contrary to the findings of the present study that common places of bullying were: the school premises before and after the school timing.[10]

Williams, *et al* found that an association between victims and symptoms such as not sleeping well, bed wetting, feeling sad and experiencing more than occasional headache and tummy ache. Findings of the present study also revealed impact of bullying such as: feeling sick, feeling bad or sad, difficulty in sleeping and bed wetting.[11]

So it is very important that doctors are able to associate these symptoms with bullying when children and adolescent present such symptoms with unexplained causes so that unnecessary diagnostic workup can be avoided.

It is necessary that doctors are aware of these associations so that they are able to offer the necessary help to children and avoid unnecessary diagnostic work-up. Physicians, therefore should ask about bullying when children and adolescents present with unexplained psychosomatic and behavioral symptoms.

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