School of Psychology

Frequently Bullied Students:

Outcomes of a Universal School-Based Bullying Preventive

Intervention on Peer Victimisation and Psychological Health

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Declaration

This thesis contains no material which has been accepted for the award of any other degree or diploma in any university.

To the best of my knowledge and belief this thesis contains no material previously published by any other person except where due acknowledgement has been made.

Signature: ……………………………………

Date: 23/12/05

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Abstract

Bullying occurs to some extent in all schools. Study 1 investigated and screened for frequently bullied students in a randomly selected and stratified sample of Year 4 students in 29 primary schools using multiple informants and a comprehensive measure of bullying. Using self- and/or parent-report, 16.3% of students were identified as frequently bullied, defined as 'about once a week' or more. There were no sex differences in the proportion of students identified as frequently bullied, however, frequently bullied boys were more likely to experience physical bullying and having money or other things taken away or broken. Self- and parent-report revealed significantly more depressive and anxiety symptoms, somatic complaints, and lower peer self-concept and general self-worth in frequently bullied students. Furthermore, a greater proportion of frequently bullied students experienced clinical levels of depressive, anxiety and/or somatic symptoms. The results clearly highlight the need for interventions that reduce and prevent the distress of frequently bullied students. In taking a universal approach to bullying intervention, it is important that the needs of targeted groups are not overlooked. In Study 2, a group randomised controlled trial with follow-up investigated the impact of the first year of a universal whole-school bullying preventive intervention, *Friendly Schools*, on the psychological health of frequently bullied students aged 8-9 years. The program utilised the Health Promoting Schools (HPS) approach to facilitate implementation of classroom curriculum, whole-school policy and practice, and partnerships with parents. At post-intervention and 4-month follow-up the proportion of students who remained frequently bullied did not differ across the groups. Furthermore, there were no significant group differences on self-report victimisation frequency or self- and parent-report health outcomes. A preventive effect was revealed however, when students were categorised to clinical and healthy subgroups on the basis of student-

report pre-intervention scores on the Children's Depression Inventory and the Revised Children's Manifest Anxiety Scale. A greater proportion of intervention students with low levels of depression and/or anxiety remained healthy at post-intervention, compared to control group children. However, this effect was not maintained at follow-up and the intervention did not reduce symptoms into a healthy range for frequently bullied children reporting high levels of symptomology at pre-intervention. Process evaluation revealed moderate to high levels of use and satisfaction with *Friendly Schools* by school staff, students and parents. These results suggest that the universal intervention protected students who were frequently bullied from developing clinical levels of depressive and/or anxiety symptoms in the short term. This is a positive finding given that a universal approach acknowledges the social context of bullying and is highly suitable to the school environment, offering economy, practicality and reduced stigmatisation of bullied students. However, the lack of maintenance of the result emphasises the need for an on-going, multi-year approach. Furthermore, to effectively meet the mental health needs of frequently bullied students already experiencing high levels of symptoms, levels of intervention beyond universal are required. Schools and related health services should address this finding in their planning and implementation of intervention aimed at addressing bullying and helping students victimised by their peers. To help achieve this, further research is required to determine effective targeted strategies that complement universal, whole-school action.

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CHAPTER 1

Introduction

Bullying occurs to some extent in all schools (Elias & Zins, 2003; Whitney & Smith, 1993; Zubrick et al., 1997). Children who are bullied suffer not only immediate harm and distress but are also at risk of experiencing negative long-term mental health consequences. For those who bully, aggressive behaviour as a means of meeting one's needs and wants is reinforced, encouraging coercive patterns of behaving which can persist into adult life. However, the implications of bullying are broader than its effects on students who are bullied and those who bully. Olweus (1991) describes the consequences for our community and our society as a whole when such behaviour is tolerated, asking us to consider the values acquired by students who are allowed to repeatedly bully others and those acquired by students who are repeatedly bullied without others intervening to assist.

Previous cross-sectional research suggests a significant need for the development and evaluation of interventions that reduce and prevent the distress of victimised students (Hawker & Boulton, 2000; Kaltiala-Heino, Rimpela, Marttunen, Rimpali, & Rantanen, 1999; Kumpulainen et al., 1998; Vernberg, 1990). To meet this need, this research aimed to identify the nature and prevalence of bullying in a large, stratified, cross-sectional Year 4 (age 8-9 years) sample using multiple informants and a reliable and valid measure of victimisation that included physical, verbal, indirect and relational forms of bullying, and to identify a cohort of students for whom being victimised by peers was a frequent experience. The validity of using student and parent-report to identify frequently victimised students and of the cut-off used to identify frequently bullied students (about once a week or more often) was investigated and the psychological health concomitants of victimisation identified in

previous research confirmed. In doing so, baseline data for assessing the impact of a universal bullying preventive intervention on this subgroup was also obtained. The significant contribution of the research relates primarily to the second study, which employs a gold-standard research design (group randomised controlled trial) to investigate the impact of a clearly defined and accessible universal school-based bullying preventive intervention on the victimisation and mental health of frequently bullied students.

Chapter 1 provides a review of the literature regarding bullying and preventive intervention, with a focus on children who are bullied by their peers during middle-childhood. These children have been referred to as bullied (e.g. Olweus, 1991; Rigby & Slee, 1991; Whitney & Smith, 1993), peer victimised (e.g. Callaghan & Joseph, 1995; Hawker & Boulton, 2000; Perry, Williard, & Perry, 1990) or rejected (e.g. Boivin & Hymel, 1997; Vernberg, 1990). This review includes research that has used any of these terms, provided that the behaviour fits a definition of bullying. The review will explore the phenomenology and epidemiology of being bullied; identify the psychological health concomitants of peer victimisation; explore risk and protective factors associated with peer victimisation; and review research into the prevention of bullying. The review demonstrates the utility of the universal approach taken by previous research, however the need for stronger research methodologies, greater focus on subgroups within the universal sample, and assessment of change in the psychological health concomitants of peer victimisation is highlighted.

The literature review is followed by two empirical studies. The first, presented in Chapter 2, is a cross-sectional study utilising a large, randomly selected sample, well-validated measures and multiple-informants. Using a definition of "about once a week" or more often, the point prevalence of frequent victimisation in Year 4

students is identified using self and/or parent report and the nature of victimisation in this age group investigated. The findings of previous studies of the psychological health concomitants of victimisation are replicated with this subgroup of frequently victimised students. The second study, presented in Chapter 3, investigates the victimisation and psychological health outcomes for frequently bullied students of a universal school-based bullying preventive intervention. Group differences on self- and parent-report measures in regard to symptom reduction and prevention are explored. Of interest, is where the boundaries of effectiveness of a universal program lie for a subgroup of students with elevated levels of risk. In so doing, the needs of frequently bullied students are highlighted, leading to recommendations for schools in providing an appropriate response for these children. Program implementation and its effect on outcomes are investigated, and satisfaction of school staff, students and parents reported. Finally, Chapter 4 provides a general discussion of the two studies, including strengths and limitations, practical implications and directions for future research.

1.1 Phenomenology and Epidemiology of Bullying

1.1.1 Defining Bullying

Bullying is a type of aggression, and as such involves the intention to cause harm and distress, either physical or psychological, to others (Ahmad & Smith, 1994; Crick & Grotepeter, 1995). Features that distinguish bullying as a subset of the broader concept of aggression, are that there is a power imbalance, the act is either unprovoked by the target/s or perceived as unjustified by others, and repetition of the act occurs between the same individuals (Ahmad & Smith, 1994; Salmivalli, Kaukiainen, Kaistaniemi, & Lagerspetz, 1999; P. K. Smith, Cowie, Olafsson, &

Liefooghe, 2002; Stephenson & Smith, 1989). Bullying may therefore be defined as a repeated and unjustifiable behaviour; that may be physical, verbal, indirect or relational; that is intended to cause fear, distress, and/or harm to another; conducted by a more powerful individual or group against a less powerful individual who is unable to effectively resist (Craig, 1998; Farrington, 1993; Hawker & Boulton, 2000; Kumpulainen et al., 1998; Olweus, 1991; Pepler, Craig, Ziegler, & Charach, 1994; Rigby, 1997b; Roland, 1989; P. K. Smith & Sharp, 1994; Zubrick et al., 1997).

This definition makes reference to the different forms bullying may take. Being bullied physically involves attack against one's physical integrity, such as being hit, kicked or pushed, and has also included stealing, taking or damaging one's personal belongings (Ahmad & Smith, 1994; Bjorkqvist, Lagerspetz, & Kaukiainen, 1992; Hawker & Boulton, 2000; Lagerspetz, Bjorkqvist, & Peltonen, 1988; Mynard & Joseph, 2000). Verbal bullying involves being attacked or threatened with words or vocalisations, such as being teased in a mean and ridiculing way, being called nasty names or being threatened with harm (Ahmad & Smith; Bjorkqvist et al.; Hawker & Boulton, 2000; Lagerspetz et al.). Verbal bullying, in the forms of being teased and called names in a mean and hurtful way, has consistently been identified as the most common form of bullying experienced by victimised students (Ahmad & Smith; Boulton & Underwood, 1992; Pateraki & Houndoumadi, 2001; Perry, Kusel, & Perry, 1988; Rigby, 1997b, 1998b; Whitney & Smith, 1993).

While direct forms of bullying involve "openly confrontational attacks" as described above, indirect forms are "covertly manipulative attacks" (Mynard & Joseph, 2000, p. 169), focusing on undermining social relationships within the peer group (Bjorkqvist, 1994; Olweus, 1991). The term indirect has been used to describe a range of covert behaviours by some (Olweus, 1993a), whereas others have used the

term more specifically to refer to socially manipulative behaviour whereby the aggressor is able to remain unidentified (Bjorkqvist). Indirect aggression has been used to refer to behaviours such as saying mean things about the target to others, gossiping or spreading rumours about the target, becoming friends with someone else as revenge and writing nasty notes about the target, with the intention he/she will be rejected (Ahmad & Smith, 1994; Bjorkqvist; Lagerspetz et al., 1988).

A distinction has been made between indirect and relational victimisation (Hawker & Boulton, 2000). Indirect refers only to behaviours in which the act is perpetrated through a third party so that the aggressor can not be identified by the target. Relational on the other hand, refers to behaviour in which the intention is to damage the target's friendships or feelings of acceptance and inclusion in the peer group, through manipulation or the threat of doing so (Crick, Casas, & Nelson, 2002; Crick & Grotepeter, 1995). Examples of relational aggression are purposely ignoring or refusing to talk to the target, withdrawing friendship or acceptance to hurt or control the target and excluding the target from taking part in a group or activity (Crick et al.; Crick & Grotepeter). Spreading rumours so that peers will reject the target also appears in discussions of relational aggression and victimisation (Crick et al.; Crick & Grotepeter).

1.1.2 Prevalence of Peer Victimisation

Comparisons of prevalence across studies is hindered by different data sources, variations in the definition of bullying used, the reference period or time frame for reporting on, methods employed to measure bullying and cut-points for differentiating involvement (Nansel, Craig, Overpeck, Saluja, & Ruan, 2004; Solberg & Olweus, 2003). Solberg and Olweus argue that in estimating prevalence, a single

variable/item with specific response alternatives, preceded by a definition, is the most appropriate form of measurement. Studies that use such a measure and investigate the prevalence of frequent victimisation, about once a week or more, in larger, representative child samples are of interest to the present study.

Solberg and Olweus (2003) found that 5.8% of Norwegian students in grades 5 through to 9 (age 11-15 years) reported being bullied "about once a week" or more often. In a US sample, Nansel et al. (2001) found 13.3% of grade 6 students reported being bullied weekly. In the UK, Whitney and Smith (1993) found 10% of junior/middle schools students reported being bullied at least once a week. The Toronto Bullying Survey found 8% of students aged 8-14 years reported being victimised once a week or more often (Pepler, Craig, Ziegler, & Charach, 1993). An early study of bullying in Australia conducted by Slee and Rigby (1993) indicated that 10% of boys and 6% of girls aged 7-13 years reported being bullied once a week or more often. More recent data collected from students aged 8–18 years reports that approximately one in six school children (about 17%) are bullied at least once a week (Rigby, 1997b).

In summary, across self-report studies employing relatively large samples and similar methods and response choice, around 10% of primary school students report frequent victimisation, defined as about once a week or more often.

1.1.3 Sex Differences

Whilst some studies report boys to be more bullied than girls (Boulton & Underwood, 1992; Lagerspetz, Bjorkqvist, Berts, & King, 1982), others report approximately equal frequencies (Pepler et al., 1993; Perry et al., 1988; Whitney & Smith, 1993). It has been argued that the reason for this discrepancy relates to

whether indirect and relational forms of aggression have been included in the definition and assessment of bullying (Ahmad & Smith, 1994; Crick & Bigbee, 1998). In support of this argument, when verbal, physical, indirect and relational forms of bullying are included in the definition and assessment of bullying behaviours, few sex differences have emerged in the prevalence of victimisation in primary school age children (Ahmad & Smith; Andreou, 2000; Boulton & Smith, 1994; Espelage & Asidao, 2001; Hoover, Oliver, & Hazler, 1992; Kochenderfer-Ladd & Skinner, 2002; Roland, 1989; Swearer & Cary, 2003).

Whilst children of both sexes may experience victimisation as frequently as one another, the form it takes appears to vary. Many studies targeting middle childhood have found that boys report being physically victimised more often than girls (Borg, 1999; Crick & Bigbee, 1998; Olweus, 1991; Pateraki & Houndoumadi, 2001; Rigby, 1997b; Rivers & Smith, 1994; Roland, 1989; Whitney & Smith, 1993; Woods & Wolke, 2003). Boys have also been reported to experience their belongings being damaged or stolen more often than girls (Ahmad & Smith, 1994; Borg; Rivers & Smith), although Whitney and Smith did not find a sex difference. Boys have also been found to report being threatened more than girls (Ahmad & Smith; Borg; Rigby; Whitney & Smith), although Rivers and Smith found no sex difference. As for verbal bullying, many studies suggest that boys and girls experience this form of peer victimisation about equally (Ahmad & Smith; Boulton & Underwood, 1992; Rigby; Rivers & Smith, ; Roland, 1989; Whitney & Smith).

The research findings concerning indirect and relational victimisation are mixed. In students aged 6-9 years comparable proportions of relational victims have been reported (Wolke, Woods, Bloomfield, & Karstadt, 2000; Woods & Wolke, 2003). Ahmad and Smith (1994) also found few sex differences for students in

middle school but a greater difference at secondary school, with more girls experiencing indirect bullying than boys. However, others have found girls report these forms of bullying more than boys (Borg, 1999; Pateraki & Houndoumadi, 2001; Rigby, 1997b; Rivers & Smith, 1994; Whitney & Smith, 1993). These studies have included children in middle to late childhood. As a result, developmental factors influencing sex differences in the experience of relational and indirect victimisation may be diluted.

Relational aggression is viewed as more normative of girls aged 11 and 12 than it is of girls aged 9, suggesting that relational aggression becomes more common as girls move from middle childhood to adolescence (Crick, Bigbee, & Howes, 1996). Similarly, Bjorkqvist, Lagerspetz and Kaukianen (1992) found that indirect aggressive strategies were not fully developed among 8 year olds. Indirect aggression was found to increase drastically at about age 11 and more prevalent in girls at that age. Moreover, at age 8, the structure of boys' and girls' groups did not differ, however by age 15, girls were forming tighter groups and more pairs, increasing the likelihood of social manipulation as an aggressive strategy. Accordingly, Lagerspetz and Bjorkvist (1994) suggest that girls use of indirect aggression is related to the development of social competencies. However, Crick and Bigbee (1998) found peers reported more 4th and 5th grade girls to be victimised relationally. Similarly, Crick, Casas and Ku (1999) found that in young children aged 3-5 years, teachers reported girls to be more relationally victimised.

In summary, while the prevalence of victimisation is similar for younger students, sex differences emerge in the types of bullying experienced. Results are not always consistent however, although boys seem more often to be bullied physically, threatened, and have belongings stolen or broken. Boys and girls are

called mean names and teased in a cruel way about equally. Whilst girls experience more indirect and relational bullying than boys at older ages, at younger ages, boys and girls may experience this form of bullying about equally according to self-report.

1.1.4 Stability of Victimisation

Stephenson and Smith (1989) concluded that "bullying is not a problem that 'sorts itself out'" (p. 47) when they found that teachers reported 72% of students identified as bullied had been so for at least a year. Across five schools, Sharp, Thompson and Arora (2000) found 3-6% of all students reported being bullied for more than a year. Similarly, in a survey of Australian school students, Rigby (1996) found 5% reported being bullied for more than one year.

A number of studies have investigated stability in victimisation according to peer nomination. With students in 3rd to 6th grades a correlation of .93 has been reported between victimisation scores 3-months apart (Perry et al., 1988). In 8-9 year olds, Boulton and Smith (1994) demonstrated stability in victimisation over four assessment periods extending across one year, with correlations between time points ranging .15 to .78 for girls and .57 to .80 for boys. In students with a mean age of 10 years, correlations of .75 over 6 months (Egan & Perry, 1998) and .69 over one year (E. V. E. Hodges, Boivin, Vitaro, & Bukowski, 1999) have been reported. Similarly, peer nominations one-year a part have correlated .52 for boys and .67 for girls in 4th, 5th and 6th grades (Khatri, Kupersmidt, & Patterson, 2000) and .70 between grades 4 and 5 (Paul & Cillessen, 2003). Examining stability categorically using a cut-off, Paul and Cillesson found 65% of grade 4 students identified as bullied were also identified in grade 5. Hanish and Guerra (2004) reported that one-fourth of non-

aggressive victimised students and one-third of aggressive victimised students identified in grade 4 remained so in grade 6.

The difficulty encountered by rejected students in changing their social status, even when they change their behaviour (Merton, 1996) or no longer experience elevated rejection by peers (Hanish & Guerra, 2004), may in part explain the stability observed in peer ratings over time. Stability in other forms of report is therefore of interest. Comparing peer and self-report measures, Ladd and Kochenderfer-Ladd (2002) report a stability coefficient of .49 over grade 3 to grade 4 for peer nomination and .31 for self-report. In an investigation of victimisation status at ages 8 and 12, according to self, parent or teacher report, 15% of students were bullied at both ages (Kumpulainen, Rasanen, & Henttonen, 1999). A further 7% of bullied students at age 8, were both bullied and bullied others at age 12. In an eight-year follow-up study, Sourander, Helstela, Helenius and Piha (2000) found that 12% of boys and 6% of girls were victimised at both ages 8 and 16. Although the majority of students bullied at age 8 were not involved in bullying at age 16, of those students who were victimised at age 16, 90% of male students and about 50% of female students had also been victimised at age 8.

These findings indicate that while there is considerable variability, there is also notable stability in victimisation for many children. Furthermore, Sharp et al. (2000) found that the longer the duration of victimisation, the greater the frequency of being bullied within a defined time period. These findings suggest that for some students frequent and chronic victimisation is a pervasive part of their school and social experience.

1.2 Psychological Health Concomitants of Victimisation

In order for children to meet the academic goals of education, they must perceive their learning environment to be a safe and secure place (Hoover & Hazler, 1991). For many students school *is* a safe and secure place, for bullied students, the experience is different. Bullied students perceive school to be unsafe (Rigby, Cox, & Black, 1997; Slee & Rigby, 1993a) and are less happy at school than other students (Boulton & Underwood, 1992; Slee, 1995a; Slee, 1995b; Slee & Rigby, 1993a). They report greater dislike of school (Forero, McLellan, Rissel, & Bauam, 1999), report a greater desire to avoid the school environment (Kochenderfer & Ladd, 1996; Rigby, 1997b), show poorer school functioning (Nishina, Juvonen, & Witkow, 2005) and have higher rates of absenteeism (Batsche & Knoff, 1994; Rigby, 1997b, 1999; Slee, 1994a; Zubrick et al., 1997). These findings suggest that victimised students are likely to feel alienated from the school environment, of concern given school connectedness is predictive of a number of important health behaviours, including smoking, alcohol use and choice of foods (Nutbeam, Smith, Moore, & Bauman, 1994).

Furthermore, bullied students are at risk for a variety of adjustment problems, reporting higher levels of loneliness (Boivin & Hymel, 1997; Boulton & Underwood, 1992; Crick & Grotpeter, 1996; Forero et al., 1999; Kochenderfer & Ladd, 1996; Parkhurst & Asher, 1992), greater feelings of ineffectiveness and interpersonal difficulties (Kumpulainen et al., 1998) and less happiness generally (Rigby & Slee, 1992; Williams, Chambers, Logan, & Robinson, 1996). The following section discusses research on the psychological health concomitants of peer victimisation. Specifically, depression, anxiety, somatic complaints and self-concept are investigated, due to the high level of health, social and economic burden caused by

these forms of maladjustment for individuals, families and communities (Andrews, Sanderson, Slade, & Issakidis, 2000; Mathers, Theo Vos, Stevenson, & Begg, 2000; Zubrick, Silburn, Burton, & Blair, 2000).

1.2.1 Depression

Higher levels of victimisation are associated with higher levels of depression (Austin & Joseph, 1996; Callaghan & Joseph, 1995; Slee, 1995b). Both male and female students who are bullied report significantly more depressive symptoms than students who are not involved (Austin & Joseph; Callaghan & Joseph; Kumpulainen et al., 1998; Neary & Joseph, 1994). Furthermore, the level of depression experienced has been shown to be above cut offs for distinguishing clinically depressed from non-depressed children (Callaghan & Joseph; Neary & Joseph) and for identifying psychological disturbance (Kumpulainen et al.). Of a sample of students in grades 6-8, 5% of victimised students scored in the borderline range and an additional 16% in the clinical range on a self-report measure of depressive symptomology, compared with 2% of the not involved group (Espelage & Holt, 2001). Similarly, in students aged 11-13, 13.5% of bullied students reported depressive symptoms in the clinical range, compared with no non-involved students (Swearer, Song, Cary, Eagle, & Mickelson, 2001). In younger children aged 8 years, 17.3% of bullied students reported symptom severity in the clinical range compared with 7% who were not involved in bullying (Kumpulainen et al., 1999). Using a structured diagnostic interview with children aged 8 years, 9.6% of bullied children and 17.7% of children who were both bullied and bullied others received a diagnosis of depression, compared with 5.1% of non-involved children (Kumpulainen, Rasanen, & Puura, 2001). In children aged 9-12 years symptom levels suggesting a

moderate indication of depression were 3 times more likely in bullied students and of a strong indication almost seven times more likely in comparison to children not involved (Fekkes, Pijpers, & Verloove-Vanhorick, 2004).

In a meta-analysis of cross-sectional studies of peer victimisation and psychosocial maladjustment, Hawker and Boulton (2000) reported a clear association between depression and victimisation even when shared method variance was taken into account. When both victimisation and depression were assessed by self-report, 20.3% of variance was shared, compared with 8.4% when victimisation was assessed by peers and depression by self-report. A major limitation of research in this area however, has been in the measurement of victimisation, with few studies including physical, verbal, indirect and relational bullying in their identification of bullied students. While the cross-sectional studies conducted appear unanimous in their findings, there is value in designing studies that include all forms of bullying in the measurement of victimisation (Hawker & Boulton).

1.2.2 Anxiety

As bullying is embedded within a social context, the investigation of social anxiety in bullied students has been investigated. Victimisation has been significantly associated with higher levels of social anxiety in 6th and 7th graders (Graham & Juvonen, 1998a). In comparison with students who bully and not involved students, peer victimised students in grades 5-8 report significantly higher social anxiety (Craig, 1998). Investigating the components of social anxiety with students aged 9-13 years, Slee (1994b) found peer victimisation to be significantly associated with a fear of negative evaluation in both boys and girls and with social avoidance in girls.

It is possible that the psychological distress characterising victimised students is not limited to the social domain. In support of this, Grills and Ollendick (2002) found a significant association between peer victimisation and a general anxiety measure in children aged 11-13 years. In a sample of children with a mean age of 11 years, 19.2% of those bullied reported anxiety symptoms in the clinical range compared with 5.9% of no status students (Swearer et al., 2001). According to diagnostic interview conducted with 8 year olds, 8.7% of victims and 5.1% of students who are both bullied and bully others have an anxiety disorder, compared with 2.8% of non-involved students (Kumpulainen et al., 2001).

The research discussed here indicates that bullied students are more socially and generally anxious than students who are not the target of this behaviour. In their meta-analysis, Hawker and Boulton (2000) found the effect sizes of social and general anxiety to be similar. With shared method variance, both forms of anxiety shared 6.3% of variance with victimisation. When method variance was not a factor, social anxiety shared 2.0% variance and general 4.3% variance with victimisation. A limitation of research in this area is that relatively few studies have employed well-validated measures of generalised anxiety with primary students and included all forms of victimisation (Hawker & Boulton).

1.2.3 Somatic Symptoms

A significant correlation between being bullied at school and experiencing stress reactions has been reported (Sharp, 1995). Given the link between stress and physical illness (Hess & Copeland, 1997), the experience of somatic complaints in response to peer victimisation seems likely. In children, victimisation by peers has been associated with increased self-reports of sleep difficulties, bed wetting,

headaches, abdominal pain and bad appetite (Fekkes et al., 2004; Williams et al., 1996). Williams also found that the greater the frequency of bullying the more likely the experience of these health symptoms. Investigating indirect and direct victimisation separately, Baldry (2004) found that both forms of bullying predicted somatic complaints.

1.2.4 Self-concept

In exploring the relationship between self-concept and peer victimisation, general self-worth and social self-concept are of particular interest. A number of studies have found bullied students to report significantly lower general self-worth than students who are not involved in bullying (Andreou, 2000; Austin & Joseph, 1996; Callaghan & Joseph, 1995; Neary & Joseph, 1994; O'Moore & Kirkham, 2001; Slee & Rigby, 1993b). Moreover, higher levels of victimisation are associated with lower self-worth (Andreou; Austin & Joseph; Boulton & Smith, 1994; Callaghan & Joseph; Graham & Juvonen, 1998a; Grills & Ollendick, 2002; Neary & Joseph; O'Moore & Kirkham, 2001; Rigby & Slee, 1992; Salmivalli et al., 1999).

Measures of children's social self-concept assess the extent to which children see themselves as socially competent, accepted by their peers or having good social relationships (Hawker & Boulton, 2000). Primary school students who are victimised by their peers report significantly lower social self-concept than students who are not involved in bullying (Andreou, 2000; Austin & Joseph, 1996; Boulton & Smith, 1994; Callaghan & Joseph, 1995; Neary & Joseph, 1994; O'Moore, 2000; Slee & Rigby, 1993b), with higher levels of peer victimisation associated with lower social self-concept (Austin & Joseph; Boivin & Hymel, 1997; Callaghan & Joseph; Neary & Joseph).

Collectively, this research provides a consensual picture of students who are bullied as having lowered general self-worth and negative views of themselves in the social domain (Hawker & Boulton, 2000). Across studies included in the meta-analytic review with shared method variance, general self-worth shared 15.2% of variance with victimisation and social self-concept 12.3%. Across those studies without shared method variance, general self-worth shared 4.4% of variance with victimisation and social self-concept 5.3%. Few studies in this area have utilised a measure of victimisation that includes relational or indirect victimisation however (Hawker & Boulton).

1.2.5 Causality

The research discussed thus far provides a picture of the concurrent adjustment of bullied students, but does not answer questions about causality. It may be that psychological maladjustment predisposes children to victimisation, rather than victimisation causing maladjustment. Literature addressing the issue of causality provides evidence of victimisation's influence on adjustment. For example, in regard to early school adjustment, victimisation has been found to be a precursor to children's loneliness and school avoidance, with increases in the duration of victimisation associated with increased adjustment problems (Kochenderfer & Ladd, 1996).

Personal harm has been reported to be the most frequent and intense worry of students in grades two to six (Silverman, La Greca, & Wassterin, 1995) and victimised students tend to feel unsafe in the school environment (Slee & Rigby, 1993a). Worries about friends and classmates included rejection, exclusion from social activities, being ignored and betrayal (Silverman et al., 1995). Given a critical

feature of anxiety is repeated exposure to stimuli to which the learnt response is one

of the probability of danger or harm (Silverman et al.), the development of anxiety in

response to peer victimisation seems likely. For victimised students, anxiety may

develop as a result of anticipation of further attack, moreover they may become

hypervigilent and view the world as an unsafe place (Grills & Ollendick, 2002).

Longitudinal studies which control for prior adjustment provide the strongest

evidence of victimisation's role in the development of psychological maladjustment.

Peer victimisation has been shown to predict higher levels of psychosocial problems

(measured by a composite variable of depressive symptoms, social anxiety,

loneliness at school and self-worth) and self-reported physical symptoms 6-months

later (Nishina et al., 2005). Victimisation in 5th grade has been found to predict later

teacher reported internalising problems in grades 6, 7 and 8 (Reader-Goodman,

Stormshak, & Dishion, 2001). Similarly, victimisation has been found to predict

increases in teacher reported behavioural indicators of internalising problems one

year later, but only for children without a mutual best friendship (E. V. E. Hodges et

al., 1999). Increases in peer reported symptoms of anxiety and depression one year

later have also been predicted by victimisation, suggesting that the effects of bullying

are apparent to peers (E. V. E. Hodges & Perry, 1999).

Faust and Forehand (1994) found evidence to suggest that exposure to peer

stress leads to anxiety, which in turn leads to somatic complaints. Rigby (1999),

found significant positive correlations between self-reported peer victimisation in

lower high school and self-reported physical complaints in upper high school three

years later. Furthermore, when health status in lower high school, level of

victimisation in upper high school, and sex were controlled, reported victimisation in

lower school was a significant predictor of poorer physical health in upper high

school. This finding indicates that being bullied in the lower school years can continue to affect the physical health of students in later years. Furthermore, by controlling for earlier health status, the results also suggest that poor health was a result of victimisation and not a precursor to victimisation.

Global self-esteem is influenced by feelings of competence in areas of personal importance (Harter, 1998).   In middle childhood peer relationships grow in important and peer conflict is particularly stressful (Hess & Copeland, 1997). Children who perceive themselves to be liked by peers, like themselves (Rubin, Chen, MacDougall, Bowker, & McKinnon, 1995). Egan and Perry (1998) explored the causal relationship between self-worth and peer victimisation in a sample of 3rd to 7th graders in a short-term longitudinal study and found victimisation had an adverse impact on self-perceived social competence. In children aged 8-10 years, the impact of withdrawal on perceived social acceptance has been found to be partially mediated by victimisation, suggesting that victimisation is one mechanism via which negative social self-perceptions may develop (Boivin & Hymel, 1997). Peer victimisation appears to be a particularly powerful means through which children become aware that their peers dislike them, fuelling expectances of future victimisation and deficiencies in characteristics that peers values, leading to lowered self-perception and helplessness (Boivin & Hymel, 1997).

This discussion has focused on the causal role of victimisation in the development of psychological maladjustment. There is evidence to suggest that this is only one part of the story however, with the relationship being one of reciprocity (Egan & Perry, 1998; E. V. E. Hodges et al., 1999; E. V. E. Hodges & Perry, 1999; Nishina et al., 2005). This is explored further in the discussion of risk and protective factors for peer victimisation.

1.2.6 Conclusions and Research Directions

Although research is limited by the measurement of victimisation, particularly in regard the inclusion of indirect or relational forms of bullying, it appears clear that students who are victimised by their peers are an at-risk population. While peer victimisation is a social experience, the suffering of children who are bullied is not limited to the social domain, with peer victimisation clearly related to psychological forms of maladjustment, such as depression, global self-concept, generalised anxiety and somatic complaints, as well as social forms, such as social self-concept and social anxiety (Hawker & Boulton, 2000).

While literature on bullying has often focused on students who experience aggression from peers as anxious and insecure and as having low self-esteem, they have not been described as depressed in such a widespread manner. However, in their meta-analysis, Hawker and Boulton (2000) showed that the effect size between depression and peer victimisation was the largest and anxiety the smallest. These authors argue "while victims are indeed generally and socially anxious and have low global and social self-esteem, they are even more strongly characterised by feelings of loneliness and dysphoria" (p. 452).

Lavin, Saprios and Weill (1992) argue that the biggest threats to health are "social morbidities", defined as "threats to health that are primarily the result of social environment and/or behaviour" (p. 214). The research discussed here makes a strong case for viewing peer victimisation as a social morbidity requiring attention. As Hawker and Boulton (2000) argue, "a pattern of distress that can no longer be ignored" (p. 453) has been revealed. Although schools provide the context within which bullying and other forms of violence are able to occur, they also provide repeated and developmentally appropriate opportunities for children to acquire the

skills and competencies required to reduce and prevent violence (American Psychological Association [APA], 1993). It is within this context that Rigby (1998a) has asserted that "appropriate action by schools should be viewed as an urgent preventative health measure" (p. 17). This prompts the question, what is appropriate action to prevent bullying?

1.3 Risk and Protective Factors

The reduction of risk factors and enhancement of protective factors is the best theoretical model available for guiding preventive interventions (Blum & Ireland, 2004; Bond, Toumbourou, Thomas, Catalano, & Patton, 2005; Mrazek & Haggerty, 1994; Muris, Schmidt, Lambrichs, & Meesters, 2001; Ozer, Richards, & Kliewer, 2004). Whereas risk factors increase the probability of the development of a future negative outcome, protective factors provide resilience to the development of problems despite the presence of risk, hence decreasing the probability of a future negative outcome (Durlak, 1998; Mrazek & Haggerty; Spence, 1996a).

Protective factors can work via a variety of processes (Mental Health and Special Programs Branch, 2000). They may alter exposure to risk, for example changes in the school environment may create a reduction in bullying, and therefore exposure to peer victimisation is reduced for children who may otherwise have been at risk of experiencing this abuse. Protective factors may also work by reducing the impact of risk, changing the course of problems that may occur following exposure to risk. An example is teachers responding in a supportive and protective manner toward victimised students may reduce the negative impact of the bullying experience. Protective factors may also work by developing resilience to risk through increased self-esteem and self-efficacy. In this instance, believing in one's own value

and ability to respond effectively when bullied may result in students experiencing fewer negative consequences following a bullying incident.

Risk and protective factors exist within individuals, families, peers, schools and communities (Craig & Pepler, 2003; Espelage & Swearer, 2003). The following section reviews research into the risk and protective factors associated with being bullied by peers at each of these levels.

1.3.1 Individual Level

At the individual level, some studies have found no relation to socio-economic status (Borg, 1999; Mellor, 1999; Tomas De Almeida, 1999). However, in investigating direct and relational victimisation separately, Woods and Wolke (2003) found that children who were directly victimised were more likely to be from lower socio-economic status. In a study of primary school children in England and Germany, socio-economic status showed a significant but weak association with victimisation in both countries, with lower status associated with more victimisation.

Olweus (1978) explored the relationship between victimisation and physical characteristics and found weaker children were more likely to be bullied, although no other differences were observed. Similarly, Stephenson and Smith (1989) found bullied students were rated by teachers as physically weaker than other children, with no differences regarding the prevalence of physical defects. However, students who were bullied were more often rated by teachers as different to other students, for example, in their dress or speech. Lagerspetz et al. (1982) reported that compared to well-adjusted children, teachers rated bullied students as physically weaker, more overweight, and having more general handicap.

Swearer and Cary (2003) found consistency in the reports of students who were bullied, students who bullied, students who were both bullied and bullied others and no status students, in identifying being different, being weak and wearing certain clothes as reasons for being bullied. Additionally, students who were bullied and no-status students identified being overweight, and students who bullied identified the way someone talks, as reasons why a child may be bullied. In a sample of 11 year-olds, while race and physical maturity were not associated with victimisation, being bullied was more likely among students who were less physically attractive, overweight, had a disability or performed poorly at school (Sweeting & West, 2001). Furthermore, evidence was found for these factors being additive in their influence, indicating that the more of these characteristics present, the greater the risk.

Most students are bullied at some time during their school years (Hoover et al., 1992). Therefore, while physical attributes may prompt bullying attacks, how students respond to initial attacks is likely to play a significant role in the maintenance of victimisation. Schwartz, Dodge and Coie (1993) hypothesised three stages in peer victimisation experiences. Firstly, during initial peer encounters there is submission to both peers' non-aggressive attempts to persuade and to being bullied. Secondly, this submissive pattern prompts peers to initiate or reinforces peers to continue victimisation, and thirdly, as a result of the continued victimisation the bullied child's social behaviour changes.

Using a contrived playgroup methodology, these researchers found children identified as non-aggressive and chronically victimised engaged in fewer assertive behaviours and more non-assertive behaviours than control children, even before differences in victimisation appeared. Bullied children rewarded their attackers with submission and the peer group provided social reinforcement for aggressive

behaviours toward these children. Similarly, during structured games victimised children have been observed to comply with the requests of children who bully and to be characterised by a passive interaction style (Menesini, Melan, & Pignatti, 2000). Victimised children hold more negative outcome expectancies for aggression and assertion (Schwartz et al., 1998) and believe that aggressive responses encourage retaliatory action (Slee & Rigby, 1993a). These beliefs may account for the higher rates of submissive behaviour observed. Furthermore, bullied children report lower self-efficacy for assertion than non-involved children (Andreou, 2004).

In observing children during free play, Mahady-Wilton, Craig and Pepler (2000) revealed that the coping styles of victimised students could be grouped into two categories, problem-solving strategies that were associated with de-escalation and resolution of bullying, and aggressive strategies that perpetuated and escalated the bullying interaction. Of the problem-solving coping strategies, 84% were passive, such as ignoring, avoiding or complying. The researchers point out that while these strategies de-escalated and resolved individual bullying incidents, they did not involve confronting the aggressor. Therefore in the long term these strategies may increase the likelihood of being bullied as the victimised child is perceived to be a low threat and likely to provide reward (Mahady-Wilton et al.).

In 5-7 year old boys, frequent displays of anti-social behaviour were found to suppress victimisation in the short-term, however this was at the expense of the long-term cost of recurring victimisation (Snyder et al., 2003). Hostile attributions and reactive aggression have also been associated with peer victimisation (Camodeca, Goossens, Meerum-Terwogt, & Schuengel, 2002; Kochenderfer & Ladd, 1997; Salmivalli, Karhunen, & Lagerspetz, 1996; Schwartz et al., 1998). Victimised children may be targeted for their highly reactive responses or may develop reactive

aggression as a protective strategy. Aggressive emotional strategies have been observed to account for 43% of the copying styles exhibited by victimised children (Mahady-Wilton et al., 2000). Moreover, these strategies prolonged bullied incidents. Salmivalli (2002) found that it was peer-reported reactive aggression in combination with a lack of peer-reported proactive aggression that predicted victimisation. These findings suggest that victimised children may attempt to defend themselves with retaliation, however the link to stable victimisation suggests that these attempts are ineffectual and may exacerbate or escalate hostile interaction, as well as rewarding the aggressor with success in provoking a response (Kochenderfer & Ladd; Mahady-Wilton et al.).

Furthermore, since peers perceive aggression as provoking victimisation (Salmivalli, Karhunen et al., 1996), retaliatory behaviour is likely to be viewed negatively by peers who may in turn be less likely to intervene and defend the bullied child (Schwartz et al., 1998), maintaining the cycle of victimisation further. In support, the impact of aggression on both concurrent and longitudinal increases in victimisation has been found to be mediated by rejection, suggesting that it is peers' reaction to aggressive behaviour, rather than the aggressive behaviour itself, that influences victimisation (Hanish & Guerra, 2000b).

Students who are bullied report that they provide their attackers with tangible rewards and signs of distress (Perry et al., 1988). This is corroborated by peers' reports of greater expectancies of tangible rewards, signs of suffering and retaliation when contemplating aggression toward bullied students compared with students who are not bullied (Perry et al., 1990). Moreover, students who respond to bullying by staying calm, not taking the bullying seriously, or acting as though they do not care are perceived by peers as most likely to reduce or stop the bullying, whereas students

who respond in a way that suggests helplessness, like crying, or with aggression are perceived by peers as provoking victimisation (Salmivalli, Karhunen et al., 1996). Teacher rated externalising problems have been found to predict increases in victimisation one year later, further supporting the notion that behaviours that provoke or reinforce attack put children at increased risk (E. V. E. Hodges et al., 1999).

In observations of bullying incidents, active problem-solving strategies have been found to de-escalate and resolve bullying episodes (Mahady-Wilton et al., 2000) and problem solving strategies such as trying to understand why the victimisation occurred and attempting to do things differently so it doesn't happen again have been associated with reduced risk for victimisation (Kochenderfer & Ladd, 1997; Kochenderfer-Ladd, 2004; Kochenderfer-Ladd & Skinner, 2002). Behaving assertively and asking friends and adults for help are also associated with decreases in peer victimisation over time (Kochenderfer-Ladd). Children bullied for more than 4 weeks have been found to report using less social support coping than those bullied for less than four-weeks (Hunter & Boyle, 2004). Similarly, victimised students who had 'escaped' two-years later were more likely to report having talked to someone and getting more or different friends (P. K. Smith, Talamelli, Cowie, Naylor, & Chauhan, 2004). Active problem-solving strategies therefore not only appear to be able to halt bullying incidents, but also deny reinforcement of the aggressive behaviour, potentially reducing the likelihood of repeated victimisation. Active problem solving strategies have been observed to account for only 16% of coping strategies employed by victimised students however (Mahady-Wilton et al.).

Students with high self-esteem are as likely to have experienced bullying as those with low self-esteem, however, those with low self-esteem report more

extensive bullying, higher levels of stress as a result of being bullied, and more negative effects of this stress (Sharp, 1996). Low self-perceived peer social competence and self-efficacy for assertion have been found to predict increases in victimisation over time (Egan & Perry, 1998). Moreover, self-concept moderated the relationship between victimisation and peer-rated social skills, internalising symptoms and physical strength, with these predictor variables impacting on victimisation more strongly when self-worth was low (Egan & Perry). Although most children are bullied at some time, those with high self-worth are more likely to find attack unacceptable and those who feel efficacious in asserting themselves are more effectively able to defend themselves and stem further attack (Egan & Perry). Furthermore, low self-perceived peer social competence may be associated with behaviour that indicates to potential aggressors an inability to defend oneself and the likelihood of reward (Egan & Perry).

Children who feel incompetent in their peer relations are likely to withdraw from social experiences. Teacher and peer reported withdrawal has been found to predict victimisation (Boivin & Hymel, 1997; Hanish & Guerra, 2000b). Hanish and Guerra found the relationship to be mediated by rejection, indicating that withdrawn children who were disliked by their peers were at greatest risk. Moreover, children who were withdrawn but not rejected were less likely to be victimised, suggesting withdrawal provides protection from victimisation for low rejected children. These findings suggest that aggressors target children who are alone and disliked, as peers are unlikely to protect or defend disliked children (E. V. E. Hodges & Perry, 1999).

Teacher reported depressive behaviour at kindergarten entry has been shown to predict increases in victimisation (Snyder et al., 2003). Similarly, teacher rated and peer reported internalising problems have been shown to predict increases in

victimisation one year later (E. V. E. Hodges et al., 1999; E. V. E. Hodges & Perry, 1999). Psychosocial adjustment problems, assessed by a composite measure of depression, social anxiety, loneliness and self-worth, predicted victimisation 6 months later (Nishina et al., 2005). Longitudinal research conducted by Sourander et al. (2000) revealed a significant association between high levels of self-reported depressive symptoms at age 8 and victimisation at age 16. These findings further support the notion that children who are anxious, cry or display sadness, or are withdrawn are likely targets of victimisation by peers.

In summary, at the individual level being bullied is linked to lower SES; poorer physical strength; submissive and non-assertive behaviour; withdrawal and rejection by peers; responses to being bullied that reinforce the aggressor's behaviour, such as showing signs of distress, retaliation, and providing tangible rewards; aggression, particularly reactive; a paucity of active problem solving in response to being bullied; low self-worth and internalising problems.

1.3.2 Peer Level

Socially contextual factors have been posited as playing an important role in determining the expression of individual risk (E. V. E. Hodges, Malone, & Perry, 1997; E. V. E. Hodges & Perry, 1999). Bullying is more than a dyadic relationship between the bully and the bullied, it is a social relationship involving group values and group standards of behaviour (Espelage & Swearer, 2003; Lagerspetz et al., 1982; Salmivalli, 1999; Thompson & Arora, 1991). Accordingly, it has been argued that "perhaps the most important factor in combating bullying is the social pressure that can be brought to bear by the peer group rather than the condemnation of individual bullies by people in authority" (Herbert, 1989, p. 79-80). In a two-year

longitudinal study, Salmivalli, Lappalainen and Lagerspetz (1998) found that the

behaviour of current peers was a better predictor of behaviour in bullying situations

than students' own former behaviour, highlighting the potential for intervention

targeting the peer group.

Rigby and Slee (1999) found students in low bullying schools showed less

admiration for bullying behaviours and students who bully, and more support for

children who were victimised. In the classroom, peers have been observed to be

involved in 85% of bullying episodes, with this involvement ranging from active

participation to passive onlooking (Atlas & Pepler, 1998). Peers have also been

observed as present during most bullying incidents in the playground (Craig, Pepler,

& Atlas, 2000; Hawkins, Pepler, & Craig, 2001). Moreover, O'Connell, Pepler and

Craig (1999) reported a significant correlation between the number of peers present

and the duration of bullying episodes, suggesting that the combination of peers being

present but not intervening reinforces bullying behaviour (Craig et al.).

Research has shown that students can be distinguished by their participant roles

in bullying situations. Students have been reliably identified as assistants to the main

instigator of the bullying behaviour, engaging in bullying but doing so as a follower;

reinforcers of bullying behaviour, who cheer, encourage or watch without

intervening; defenders of victims, who step in to try and stop the bullying or help the

bullied student; and outsiders, who stay away from bullying situations (Salmivalli,

Lagerspetz, Bjuorkqvist, Osterman, & Kaukiainen, 1996; Sutton & Smith, 1999).

Only seventeen percent of students report engaging in the role of 'defender' of

victims (Salmivalli, Lagerspetz et al.) and peers have been observed to intervene in

only 19% of bullying episodes (Hawkins et al., 2001). Whilst nearly 60% of this

intervention was observed to be effective in stopping bullying, in nearly half of the observed episodes peers intervened aggressively (Hawkins et al.).

Investigating common risk and protective factors emerging from successful prevention programs, Durlak (1998) identified social support as a protective factor at all levels of the individual, family, peer, school, community and linked to all eight outcomes. As a common protective factor, it is likely that social support provides a degree of protection against the affects of victimisation. In support of this, students who are victimised but believe they have the support of others to help them are less likely than other bullied children to report somatic symptoms (Slee, 1994a). Similarly, Rigby (2000) found evidence to suggest that adolescent students who are bullied frequently and have low social support are most at risk of poor mental health.

Dyadic friendship has been found to moderate the relationship between early externalising behaviour and later victimisation, with friendship in kindergarten and first grade continuing to provide a buffer against victimisation several years later (Schwartz, McFadyen-Ketchum, Dodge, Pettit, & Bates, 1999). Students without a reciprocal best friend are more likely to be nominated by peers as bullied (Boulton, Trueman, Chau, Whitehand, & Amatya, 1999). Moreover, students who did not have a best friend at either of two time points showed the greatest increase in victimisation, whereas students who had a best friend at both time points showed the greatest decrease in victimisation. Friendship has also been found to mitigate the impact of early exposure to a harsh home environment, with this factor predictive of later victimisation by peers for children who did not establish friendships (Schwartz, Dodge, Pettit, & Bates).

Hodges, Malone and Perry (1997) found that the impact of internalising problems, externalising problems and physical weakness on victimisation was

moderated by number of friends, qualities of friend and rejection by peers. Two forms of evidence were revealed supporting the protective function of friendship. Firstly, risk factors were all more predictive of victimisation for children with fewer friends. Secondly, it was not just the quantity but also the qualities of friends that made a difference. When students had friends that were unlikely to serve a protection function, for example they too were victimised or weak, the relation of risk to victimisation was greater. Goldbaum, Craig, Pepler and Connolly (2003) found that friendship characterised by high levels of warmth, intimacy and trust buffered victimisation by peers. Friendships high in these qualities may increase the likelihood of peer intervention and provide opportunities for supportive discussion and help in identifying strategies for dealing with bullying (Goldbaum et al.).

Whilst close dyadic relationships in the form of reciprocal friendships have been shown to buffer victimisation, having a large social network in the form of a group level of peer acceptance has been shown to be more important in inhibiting victimisation (Pellegrini & Bartini, 2000; Pellegrini & Long, 2002). Being liked by a number of peers increases the likelihood of negative outcomes for students who bully, such as damage to their own social status and retaliation in response to their behaviour (Pellegrini & Bartini; Pellegrini & Long). Research associating rejection with victimisation supports this argument and further demonstrates the influence of the larger peer group (Hanish & Guerra, 2000b; E. V. E. Hodges & Perry, 1999). Hodges and Perry found evidence to suggest that dislike by peers disinhibited peer aggression more effectively than only having a few friends. Aggressive children may fear little retaliation or rejection from the peer group for attacking rejected class mates. Furthermore, rejected children are more likely to be alone and therefore more available targets (E. V. E. Hodges & Perry).

Investigating stability of victimisation, Hanish and Guerra (2004) found that victimised students who were aggressive were more rejected by peers at time 1 and two years later, compared to students who desisted at time 2. Peer rejection of children who were stable in being victimised and non-aggressive, was only higher than desisters at time 1, suggesting that stably victimised non-aggressive students may develop a reputation that continues even when rejection is no longer elevated (Hanish & Guerra). Paul and Cillessen (2003) found self-reported sociability with peers in grades 4 and 5 protected against victimisation in adolescence. Sociability may act directly on victimisation, in that highly social children can manage the social system more effectively, and indirectly, in that sociable peers have more friends, a larger social network and are probably more liked.

Together, this research suggests that at the peer level, sensitising students to bullying as a group process and involving all children; increasing students' awareness and reflection of their own role in maintaining bullying; activating peer support for victimised students; skilling students in strategies to intervene that are not hostile or aggressive and providing opportunities to rehearse these alternative behaviours; and increasing friendship skills, tolerance and acceptance, are ways in which the peer group can be utilised to reduce and prevent bullying.

1.3.3 School Level

Earlier studies have suggested that bullying is not explained by school or class size (Mellor, 1999; Olweus, 1991; Whitney & Smith, 1993). More recently, in investigating direct and relational victimisation in 39 primary schools, Woods and Wolke (2003) found that children who were relationally victimised were more likely to come from small schools. Cross-cultural differences have been revealed applying

the same methodology to two samples, with school and class size not related to victimisation in a German sample, but more victimisation occurring in smaller classes in an English sample (Wolke, Woods, Stanford, & Schulz, 2001). While some research has indicated an increased incidence of bullying in schools in disadvantaged areas (Stephenson & Smith, 1989; Whitney & Smith), other research has found no relationship between these variables (Mellor; Ortega & Mora-Merchan, 1999).

Stephenson and Smith (1989) found low bullying schools to be characterised by teachers who expressed articulate, considered and purposeful views on bullying. Roland (1993) found that schools that established consistent responses for managing bullying experienced longer and more positive effects on levels of bullying.

Whilst school climate has been linked to students' psychosocial functioning, few studies have investigated bullying and school climate (Espelage & Swearer, 2003). Investigating school as the unit of analysis, Ma (2002) found that schools with less bullying were characterised by positive discipline, parental involvement and high academic standards. Greater conflict in the school setting is associated with more children experiencing acting-out behaviours (Kasen, Johnson, & Cohen, 1990). This finding suggests that school's characterised by conflictual interactions may be at greater risk of peer victimisation. Haynie et al. (2001) investigated predictors of group membership for students who were bullied, students who bullied, students who were both bullied and bullied others, and non-involved students. They found that school bonding, measured by students' reports of their desire to do well at school, being happy at school and taking school seriously, were predictive of group membership.

It has been proposed that encouraging and developing co-operative attitudes and behaviours among students is a means by which children can be protected from victimisation (Olweus, 1993a). Rigby, Cox and Black (1997) found low levels of cooperativeness to be significantly associated with victimisation, suggesting that increasing both the capacity and motivation of children to cooperate may lead to a reduction in school bullying.   Research with pre-schoolers has demonstrated that during co-operative games co-operative behaviour increased and aggressive behaviour decreased, conversely, competitive games were characterised by an increase in aggressive behaviour and decreases in cooperative behaviour, with similar effects emerging in free-play periods (Bay-Hinitz, Peterson, & Quilitch, 1994).

Collectively, this research suggests that schools which have a shared awareness and understanding of bullying, have a coordinated and consistent response to bullying, have a positive and supportive school climate that promotes connectedness and co-operation, and are low in conflict, are likely to decrease the risk of social interactions among students that are characterised by victimisation.

1.3.4 Family Level

Parent and family variables are related to children's behaviour and experience outside of their families (Rubin, Bukowski, & Parker, 1998). Children with warm and non-hostile parents are less likely to be victimised by peers, with the relationship mediated by having warm non-hostile friends (Domitrovich & Bierman, 2001). Father involvement has been shown to provide a buffering effect, protecting children from extreme victimisation (Flouri & Buchanan, 2002). Parental responsiveness has

also been associated with lower levels of peer victimisation (Ladd & Kochenderfer-Ladd, 1998).

The Western Australian Child Health Survey (Zubrick et al., 1997) identified 20% of students from families with a high level of family discord as being bullied, compared with only 10% of students from more harmonious families. Furthermore, the survey found that a greater proportion of students whose parents used non-encouraging parenting styles had been bullied (15%) compared to those students whose parents used a predominantly encouraging style of parenting (8%). Schwartz, Dodge, Pettit and Bates (1997) found the early family experiences of boys who emerged 4-5 years later as aggressive and victimised were characterised by aggression, hostility, conflict and punitive discipline. Moreover, an early family environment characterised by punitive discipline and hostile interactions was found to predict later peer victimisation when students had few friends (Schwartz et al., 2000).

Children who are both aggressive and victimised have also been found to perceive more conflict and greater punishment within their family and a less personal relationship with parents, compared with non-involved children (V. Stevens, De Bourdeaudhuij, & Van Oost, 2002). Whilst no difference was found on family functioning between non-aggressive victims and non-involved children, parents of non-aggressive victimised children demonstrated a higher level of avoidance coping strategies in response to hypothetical conflict scenarios (V. Stevens et al.).

Rigby (1994) has argued that family well-being is highest when family members are able to express their opinions feely but do so in consideration of the feelings of others. He found that inadequate communication was a characteristic of the families of female bullied students. Rigby (1993) has also found victimisation in

girls to be related to poorer family functioning and more negative attitudes toward the mother. For boys, a relationship was only found for single-parent families, with the tendency to be victimised by peers associated with negative relations with an absent father.

Preschoolers with histories of anxious attachments with caregivers have been found to be more likely to be victimised by peers in play-groups (Troy & Sroufe, 1987). Olweus (1993b) investigated antecedents to boys' victimisation and found boys whose mothers were overprotective were more likely to be victimised, although the mother's behaviour was in part predicted by the child's 'weak' temperament. Bullied children show little or no separation between family members when asked to place representations of family members on a board to show how close members feel to one another (Berdondoni & Smith, 1996; Bowers, Smith, & Binney, 1992, 1994). Moreover, victims show high and positive involvement with other family members, have a parent more often at first or second involvement rank, and show high positive involvement with family members. These features are suggestive of enmeshed, over-intense and over-involved families (Bowers et al.). Moreover, students who were both victimised and bullied were characterised by a lack of accurate monitoring and warmth, and inconsistent discipline practices (Bowers et al.).

Finnegan, Hodges and Perry (1998) found that victimisation in boys was associated with perceived maternal over protectiveness, particularly for boys who reported fearful coping during mother-child conflict. For girls, victimisation was associated with perceived maternal rejection and girls' reports of aggressive coping during mother-child conflict. Finnegan et al. argue that for boys, over-protectiveness may interfere with the development of assertion and independence, characteristics that are valued by male peers. For girls, rejection and aggressive-coping threaten the

development of social skills pertaining to empathy and relating closely with others, characteristics valued by the female peer group. In a younger sample of kindergarten students, Ladd and Kochenderfer-Ladd (1998) found children whose parents were observed to display high levels of intrusive demandingness and those that had an emotionally close and intense parent were at increased risk for victimisation, however the later finding applied to boys only . Intrusive demandingness may foster passivity and limit autonomy. Moreover, being emotionally expressive, non-assertive and open about vulnerabilities may by adaptive in eliciting support and reassurance from parents, but perceived negatively by the peer group (Ladd & Kochenderfer-Ladd).

In summary, children appear to be at greater risk of victimisation when characteristics of the parent-child relationship hinder the development of competencies such as assertion and independence. In particular, families and parent-child relationships characterised by conflict, hostility, low responsiveness and involvement, poor communication, intrusiveness and over-protectiveness increase the risk of peer victimisation, with this manifesting as both victimisation and aggression in some children, particularly when conflict and hostility are featured.

This section has reviewed evidence of the risk and protective factors associated with peer victimisation operating at the individual, peer, school and family levels. Once identified, risk and protective factors should guide the design of intervention strategies that aim to reduce risk factors and enhance protective factors (Dadds, Seinen, Roth, & Harnett, 2000; N.H.M.R.C., 1999; Spence, 1996a). In the next section types of prevention are reviewed, followed by a discussion of bullying prevention.

1.4 Prevention

1.4.1 Types of Prevention

Whereas treatment concentrates on alleviating problems, disorders or disease and their consequences, prevention programs aim to empower individuals to use both their existing strengths and competences and to gain new skills that enable physical and mental health problems to be prevented before they develop or become severe (Dadds et al., 2000). Prevention programs have traditionally been described in terms of the public health model of primary, secondary and tertiary prevention, with the focus being on onset of disorder (Caplan, 1964; Dadds et al.; Gillham, Shatte, & Freres, 2000; Mrazek & Haggerty, 1994; Silburn, 1999; Spence, 1996a). Primary prevention interventions aim to decrease the incidence (number of new cases) of a disorder or illness by intervening prior to any signs of disorder. Secondary prevention aims to reduce prevalence (number of new and old cases of disorders) through early identification of individuals who show symptoms of a disorder but do not meet diagnostic criteria for that disorder. Tertiary prevention refers to interventions that target diagnosed disorders, with the aim being to prevent suffering by limiting the intensity and the duration of episodes of the problem and by lengthening the interval between episodes and preventing relapse. Thus, in primary prevention, individuals and populations with specific risk factors are the focus, whereas secondary prevention focuses on specific individuals who demonstrate early symptoms of a disorder (Coohey & Marsh, 1995).

This model has been criticised for inferring clear cut boundaries between types of prevention that are artificial and not reflective of practice, particularly when applied to mental disorders (Gillham et al., 2000; Gordon, 1983; Mrazek & Haggerty 1994; Raphael, 1993). Because linear causal relationships are assumed, it is less

relevant to non-medical settings where causality is not as readily inferred and prevention is not as easily demonstrated (Silburn, 1999). Furthermore, this model assumes that the absence of psychological disorder, the mild presence of psychological disorder and the presence of full-blown clinical disorder can be clearly distinguished (Spence, 1996a). Mental health problems usually develop gradually and are more accurately conceptualised in terms of a gradual progression from symptoms to clinical levels of disorder (Coie et al., 1993). An example is clinical depression in adolescents, with mild depressive symptoms in primary school age children a risk factor for the development of more severe depression in adolescence (Jaycox, Reivich, Gillham, & Seligman, 1994).

If psychological disorder is viewed as a progression, then prevention is anything done to prevent entering into or progressing along the trajectory toward clinical levels of disorder (Spence, 1996a). This view is reflected in the classification of preventive interventions in terms of the target sample, rather than the stage of development of the disorder (Spence). The United States Institute of Medicine (IOM) advocates a mental health intervention spectrum, comprised of prevention, treatment and maintenance (Mrazek & Haggerty, 1994). Within prevention three sub-types of intervention are identified, universal, selective and indicated.

Universal prevention programs are targeted to entire groups or populations that have not been identified on the basis of risk (Dadds et al., 2000; Gillham et al., 2000; Greenberg, Domitrovich, & Bumbarger, 2001; Mrazek & Haggerty, 1994; Silburn, 1999; Spence, 1996a). This type of program has the potential to provide health benefits to individuals who would otherwise be ignored; eliminates possible stigma of targeting specific children; eliminates the need for an identification process; and facilitates peer modelling through the presence of resilient participants (Dadds et al.;

Spence). In terms of cost-effectiveness, universal programs are most suited to

prevalent conditions, in which case the application to low-risk individuals can be

justified (Dadds et al.; Davis, Martin, Kosky, & O'Hanlon, 2000; Spence). They are

also most suited to settings in which the intervention is acceptable to the population,

where there is a low level of risk associated with the intervention, and where delivery

of the program to all members of the target group is both possible and desirable.

Schools provide an ideal setting for universal programs because of the potential to

integrate programs into the school curriculum (Dadds et al.). In the case of bullying,

all students within a school are a universal sample and whole-school activities and

classroom curriculum for all students constitutes a universal prevention.

Selective preventive interventions target subgroups of the population

considered at increased risk of developing a disorder based on biological and/or

psychosocial factors (Dadds et al., 2000; Gillham et al., 2000; Greenberg et al., 2001;

Mrazek & Haggerty, 1994; Silburn, 1999; Spence, 1996a). The advantages of

selective intervention include the targeting of resources to children at greatest risk of

developing a disorder. However, this type of intervention requires sensitive and

reliable screening procedures and the problems associated with including children

who are not actually at-risk (false positives) and excluding children who are at-risk

(false negative) need to be considered. Furthermore, the possibility of stigmatisation

as a result of labelling children and selective participation exists (Branch, 2000;

Dadds et al.). Students who are frequently bullied constitute a targeted sample, as

victimisation by their peers places these students at risk of adjustment difficulties and

disorder.

Indicated prevention targets high-risk individuals who display some signs of

disorder or symptoms that predict the disorder (Dadds et al., 2000; Gillham et al.,

2000; Greenberg et al., 2001; Mrazek & Haggerty, 1994; Silburn, 1999; Spence, 1996a). This type of prevention is most appropriate when there is a clear trajectory demonstrating the behavioural symptoms or biological markers predictive of later onset. Students who are victimised by their peers and demonstrating mild depressive symptoms constitute an indicated sample, as mild depressive symptoms in primary school age children are a risk factor for clinical depression in adolescence (Jaycox et al., 1994). The advantage of this type of intervention is that it is targeted to children who are in the most need and implementation may be more practical due to fewer participants. However, screening is required and, as with selective intervention, stigmatisation and the accuracy of screening tools used to decide participation are issues requiring careful consideration. Furthermore, as screening involves identification of psychological difficulties, clinical assessment instruments and expertise is required (Dadds et al.).

1.4.2 Preventing Bullying

The research reviewed regarding risk and protective factors associated with peer victimisation indicates that interventions should; involve all students to account for the varied social roles students play in promoting and maintaining bullying behaviour; promote social support for bullied students; develop friendship skills and acceptance of bullied students; develop in students who are bullied alternative responses to victimisation; and promote cooperative environments and learning. The finding that outcomes are associated with risk and protection across more than one domain, highlights the need for a multi-level approach which addresses not only individual characteristics, but also the peer group, the school and families (Craig et al., 2000; Durlak, 1998; Hanish & Guerra, 2000b; Spence, 1996b).

A whole-school approach involving all members of the school community, including students, staff and parents, enables risk and protective factors at multiple-levels to be targeted. A whole-school response facilitates awareness and discussion at all levels of the school community and encourages consideration of ones own attitudes and behaviour (Hyndman & Thorsborne, 1994; Tattum, 1993). This enables the culture of secrecy that surrounds bullying to be broken down and perceptions of bullying as an inevitable part of school life to be challenged. In turn, this facilitates a shared understanding of bullying that allows for a supportive and caring response and the identification, development and engagement of appropriate and consistent prevention strategies (Hyndman & Thorsborne, ; Tattum). Importantly, a whole-school response moves away from crisis management toward prevention (Tattum).

Universal prevention casts a wide net, involving all children in a program of change (Spence, 1996a). Whilst resources can be wasted if invested in low-risk groups, the prevalence of peer victimisation justifies a universal approach. Furthermore, the peer and school level risk and protective factors associated with victimisation demand an approach that involves all members of the school community. With a universal approach, individuals do not become labelled as 'victims' or 'bullies' as there is no process of identifying students to be targeted. This is also advantageous in terms of resources, as assessment to identify students is not required and intervention can be designed and implemented within the regular school curriculum without extra staffing.

Another advantage is that by casting a wide net universal intervention has the potential to reduce victimisation and alleviate symptoms of psychological distress, as well as prevent the development of victimisation and symptomology in students who are at-risk, but may not be currently victimised or experiencing high levels of distress.

In this regard, a universal approach may be considered conservative, associated with the lowest level of possible harm for those involved.

1.4.3 The Evaluation of Universal Bullying Preventive Interventions

Olweus (1991; 1993a) has reported on an intervention designed to reduce existing bullying and victimisation, and prevent the development of new problems, implemented as part of a nationwide campaign in Norway. The intervention consisted of a booklet about bullying which provided instructions regarding what teachers and schools could do; an information and advice folder for parents; a video showing episodes from the lives of two bullied children; a questionnaire to assess bullying; and a feedback session to school staff regarding students' responses on the questionnaire. The intervention was aimed at three levels, these being the individual, the class and the school, and emphasised restructuring of the social environment to create a climate in which bullying is viewed as inappropriate and unacceptable.

Two evaluations were conducted. One with approximately 2500 students originally belonging to grades 4 to 7 in 42 primary and junior schools. Post-intervention data was collected at 8 and 20 months subsequent to initial implementation. As the study was nationwide, an experimental design with random allocation of schools to treatment and control conditions was not possible. Instead, a quasi-experimental cohort-longitudinal design with adjacent or consecutive cohorts was chosen. Time-lagged contrasts were made between age-equivalent cohorts, with the initial cohort serving as the baseline. Olweus and Alsaker (1991) argued that the different cohorts could be compared as there were no grounds to suspect they were exposed to differing conditions over the period of assessment. However, with no

control group it cannot be stated decisively that the observed change was due to the effects of the anti-bullying intervention or other extraneous variables.

Olweus (1991; 1993a) reported an approximate reduction of 50% in student reports of being bullied or bullying others "now or then"; a reduction in the number of students being bullied and bullying others as indicated by peer rating data; a reduction in anti-social behaviours such as theft, vandalism, and truancy; and an increase in student satisfaction with school life. However, while broad conclusions of the effectiveness of the intervention are made, the papers discussing this study do not provide specific detail of outcome data or the statistical analyses conducted.

Roland (1989; 1993) also investigated the effects of the Norwegian program in a separate sample of 37 primary and secondary schools. These schools received the same nationwide program. Results were mixed, with an overall slight increase in bullying across the schools investigated. A possible reason put forward by Roland, was the difference in support provided to schools, with those in the Olweus study provided with on-going and fairly intensive support by the researchers. As with the Olweus study, the results of this study are difficult to interpret, due to a lack of detail regarding the design and analysis used.

Following a large-scale survey of bullying in Sheffield schools in the United Kingdom, an intervention project was initiated with 23 primary and secondary schools (Sharp & Smith, 1991; Whitney, Rivers, Smith, & Sharp, 1994). A whole-school policy on bullying was argued to be an essential base upon which other intervention strategies could operate successfully and maintain continuity. Schools were therefore asked to develop a whole-school policy on bullying as a core intervention, and offered a number of optional interventions, including curriculum materials; methods of intervening in bullying situations; enhancing playground

supervision; and creating a playground environment which promoted cooperative and constructive activity. While this gave schools choice and ownership regarding interventions chosen, in regard to evaluation, a major limitation of this design is that the lack of a well-defined intervention resulted in highly varied dose and content across schools. Schools were chosen on the basis that they would provide a geographical spread of the area and diversity in socio-economic background and ethnic mix, but were not randomly selected. A further limitation of the design was the investigation of intervention effectiveness by comparing change scores across time (two-years), not by comparison with a control group. Over time, a significant increase in the proportion of students who reported having not been bullied, a significant decrease in the frequency of being bullied, a significant decrease in the frequency of bullying others and a significant increase in reports of not joining in bullying was observed.

Pepler, Craig, Ziegler, and Charach (1994) report on an anti-bullying intervention implemented in three junior schools and one senior school in Canada. Schools were selected for participation due to their interest in the topic and willingness to commit time and resources to intervention. No control schools were employed. The intervention was modelled on the Norwegian national intervention and addressed action at the school, community (parents), class/peer, and individual levels. At the school level, teachers participated in a school conference day, playground supervision was increased, additional play equipment was provided, and codes of behaviour were established. At the parent level, a booklet and video on bullying were provided, parents were encouraged to participate in school action and informed of activity through newsletters and parent meetings. At the classroom level, curriculum activities and a peer-conflict mediation program were implemented.

At the individual level, logs of bullying episodes were recorded and discussions were conducted with students involved in bullying and their parents.

Six month post-test data indicated no significant difference in the number of children who reported being bullied more than "once or twice" (Pepler et al., 1993). There was a significant reduction in the number of bullying incidents experienced in the last five days and significantly less children reported spending time alone at recess and outside class time. There was no significant change in the number of children who reported they could join in a bullying episode. At 18-month follow-up a significant increase in student reports of teacher intervention and a significant increase in the proportion of students admitting to bullying who reported that teachers had spoken to them about their behaviour was observed (Pepler et al., 1994). There was also a significant decrease in the proportion of students reporting they could join in bullying. There was no significant difference in the proportion of students who reported being bullied "more than once or twice". However, there was a significant decrease in the proportion of students reporting being bullied once or more in the past five days. Methodological difficulties in the research design and data analysis render the interpretation of reported results difficult, notably, change was assessed across time points rather than against a control condition.

In a recent synthesis of whole-school bullying programs it was shown that of 14 evaluation studies, only four had employed randomised controlled trials, and only two of these included a follow-up to investigate longer-term program effects (J. D. Smith, Schneider, Smith, & Ananiadou, 2004). Only one of the four studies had gathered integrity data, enabling program implementation to be assessed. In a number of studies schools self-selected involvement and in some, program components were optional, making it difficult to determine mechanisms of change.

Furthermore, despite considerable evidence linking bullying with psychological maladjustment, no studies have investigated the psychological health outcomes of bullying preventive interventions. Clearly, the psychological well-being of students involved in bullying is of importance and warrants attention.

1.4.4 Bullying Preventive Intervention and the Psychological Health of Victimised Students

In making a case for including within evaluation outcomes the psychological health of victimised students, it is necessary to consider the mechanisms by which program components may operate to improve or maintain psychological health in victimised students.

There is an inherent assumption in intervention research that by stopping bullying, the psychological adjustment difficulties experienced by victims will be alleviated (Kochenderfer-Ladd & Wardrop, 2001). Longitudinal studies investigating change in victimisation status provide some support for this cessation hypothesis. For example, in children aged 5-6 years loneliness has been shown to be related to concurrent victimisation (Kochenderfer & Ladd, 1996). Significant decreases in anxiety and withdrawal have been shown in desisters, those students who started with high levels of victimisation that reduced over time (Goldbaum et al., 2003). Moreover, at time 1 desisters had similar levels of anxiety and withdrawal to both students whose victimisation increased and stable victims, however at time 2 and 3 they had significantly lower anxiety and withdrawal compared to these groups, although notably, anxiety remained higher than non-victimised peers. In adolescents, students victimised at the first time point only did not differ from students who were not victimised at either time point on loneliness, self-worth or depression one year

later (Juvonen, Nishina, & Graham, 2000). Similarly, investigating 2-year stability in students aged 13-16 years, victimised students who had 'escaped' differed from students who were not victimised at either time point in self-perceptions of continuing peer relationship difficulties only (P. K. Smith et al., 2004).

In a specific test of the cessation hypothesis which involved following children from kindergarten entry to grade 3, Kochenderfer-Ladd and Wardrop (2001) revealed inconsistent results. Their findings suggest that interventions that reduce victimisation may not necessarily alter maladaptive developmental trajectories. Thus supporting the case for the inclusion of measures of psychosocial adjustment in evaluation research.

There other mechanisms by which intervention to prevent bullying may impact positively on the psychological health of victimised children, such as by changing children's expectations of the school environment and their interactions with peers. Positive future expectations have been posited as a central mechanism in preventing internalising disorders (Dadds et al., 2000). Humans develop outcome expectancies based on a variety of sources of information, including situation, socially and verbally transmitted information and existing beliefs (Davey, 1992). Anxious children internalise beliefs about being unable to cope with or influence situations, and by avoiding anxiety provoking situations as a means of coping, are likely to develop a sense of incompetence or helplessness and miss out on opportunities that challenge their beliefs, provide rewards, and build competencies (Dadds et al.). Bullied children report a desire to avoid school and being bullied is a precursor to school avoidance (Kochenderfer & Ladd, 1996; Rigby, 1997b). Moreover, withdrawing may signal submission and passivity to peers, increasing the likelihood of being bullied in the future (Boivin & Hymel, 1997; Olweus, 1993a). Intervention

that provides students with strategies for responding to bullying and changes the ways in which peers and school staff respond to bullying may reduce avoidance and improve competence.

The learned helplessness/hopelessness model suggests attributing negative life events to internal, global and stable causes leads to feelings of hopelessness about the future, helplessness regarding one's own ability to change things, and a vulnerability to depression, particularly when combined with negative events (Abramson, Seligman, & Teasdale, 1978; Garber & Hilsman, 1992; Nolen-Hoeksema, Girus, & Seligman, 1992; Peterson & Seligman, 1984; Prinstein, Cheah, & Guyer, 2005; Roberts & Bishop, 2003). In early to middle childhood cognitive style is still developing and influenced by negative and positive life events (Gibb, 2002; Roberts, 1999). When children are maltreated, they may seek to understand causes and develop strategies to prevent recurrence of the event, maintaining hopefulness (Gibb). In the face of frequent and chronic experiences, hopeful attributions are repeatedly disconfirmed, and internal, stable, global attributions, such as "there must be something wrong with me" may occur, leading to a sense of hopelessness for the future and helplessness regarding ability to change (Gibb). In support of this, Gibb, Abramson and Alloy (2004) found that using retrospective report, verbal peer victimisation in childhood predicted negative cognitive style in adulthood.

It has been argued that children do not have stable attributional styles until late childhood (Roberts & Bishop, 2003). However, when failure is perceived to be salient, even preschoolers have demonstrated self-blame and helplessness (Smiley & Dweck, 1994), leading Graham and Juvonen (1998a) to argue that when experiences of failure are salient and impacting, such as the experience of peer victimisation, negative self-attributions implicating character may occur in even young children. In

support of this, Prinstein, Cheah and Guyer (2005) found self–blaming attributions regarding hypothetical ambiguous peer experiences were associated with depressive symptoms for highly victimised students, in both a sample of students aged 5-6 years and a sample of adolescents.

Victimised adolescents are more likely to blame themselves than bully-related reasons for their experience, such as their own appearance, being different in some way or doing something that annoyed the bully (P. K. Smith et al., 2004). Graham and Juvonen (1998a) presented 6th and 7th graders with hypothetical peer victimisation scenarios which they could explain using a list of possible attributions. Children who attributed scenarios to internal and stable causes reported higher scores on loneliness and social anxiety. Specifically, they found it was self-blaming attributions regarding one's character that mediated the relationship between self-perceived victimisation and maladjustment (loneliness, anxiety, low self-worth), whereas self-blaming attributions related to one's specific behaviour were unrelated to adjustment. Intervention that promotes inclusion, bullying as a behaviour that is unjustified and unacceptable, and the prevention of bullying as the responsibility of the whole schools community, may impact positively on the attributions of victimised children.

Combining social-information processing theory with attribution theory, Dill, Vernberg, Fonangy, Twemlow and Gamm (2004) hypothesised that through repeated victimisation children may come to see aggression as a behaviour that is an acceptable way to treat another who deserves it. Children with this belief would be expected to respond to victimisation by their peers with self-blaming messages, leading to negative affect. Employing a longitudinal design with 3rd and 4th graders these researchers found support for their hypothesis, with children who developed a

stronger belief that aggression was an acceptable and warranted form of social behaviour reporting a corresponding increase in negative affect. A whole-school response that says that bullying is unacceptable can challenge the development of beliefs about aggression that lead to self-blame.

Social competence and problem solving are also implicated in the development of internalising problems (Roberts & Bishop, 2003). In a community sample of children aged 7-12 years, children with elevated depressive symptoms selected fewer sociable and assertive strategies and more hostile strategies in response to hypothetical peer interaction scenarios (Rudolph, Hammen, & Burge, 1994). Furthermore, social problem solving skills have been found to protect children experiencing high levels of life stress from developing elevated levels of depressive symptoms (Goodman, Gravitt, & Kaslow, 1995).

The effectiveness of alternative solutions generated to peer conflict problems however, not the number of solutions, has been shown to moderate the relationship between negative life stress and depression in children (Goodman et al., 1995). In trying to change their experience, victimised students often implement ineffective or inappropriate strategies. As a result, others may conclude that victimised students are provoking conflict rather than solving it. This in turn increases the risk of victimisation, as children are less sympathetic and hold in low regard students who are perceived to have caused their victimisation (Graham & Juvonen, 1998b; Kochenderfer-Ladd & Skinner, 2002). Universal programs therefore have the potential to impact upon the development of depression in victimised students by developing students' skills in generating effective ways of managing bullying situations that do not result in negative evaluations from peers, and through supportive school staff responses that are effective in achieving student safety.

Research into coping suggests that individuals who feel some control over their situation and feel competent and capable of exerting this control experience significant psychological, physiological, and social advantages (Bandura, 1977, 1997). In support, a review of coping and adjustment demonstrated that active coping or direct problem solving was associated with reductions in internalising symptoms in primary-school children (Fields & Prinz, 1997). Similarly, it has been suggested that the action of doing something, rather than nothing, may be an important protective factor for students who are bullied, with students who are active in their response style reporting lower levels of stress and negative effects of being bullied than those who respond passively (Sharp, 1996). Kochenderfer-Ladd (2004) found that advice seeking predicted fewer internalising problems in victimised children. Observations of students in grades 3-6 during free play show however, that active problem solving accounts for only 16% of the strategies used in response to being bullied (Mahady-Wilton et al., 2000).

Avoidance coping is associated with increases in anxiety and depression in children (Fields & Prinz, 1997). Furthermore, self denigration, focusing on negative affect and escape thoughts are associated with higher anxiety, whereas cognitive distraction, self calming and direct problem solving with lower (Fields & Prinz). For victimised children however, cognitive distancing or distraction may not be useful when their experience is frequent and chronic. Whilst Kochenderfer-Ladd and Skinner (2002) found coping moderated the relationship between victimisation and maladjustment in 9-10 year olds, distancing and externalising coping put boys at greater risk of teacher-reported anxious/depressed behaviours. This finding suggests that for boys, trying to convince themselves that it "didn't matter" or that it was "no big deal" did not counter their awareness of the likelihood of further victimisation

and their inability to prevent it, with the resulting feelings of helplessness potentially manifesting as internalising problems (Kochenderfer-Ladd & Skinner).

Depression in children has also been associated with excessive emotion-focused coping (Compas, Connor, & Wadsworth, 1997). Emotional coping strategies in children, such as worrying, crying, feeling sorry for self and becoming upset, have been associated with greater victimisation (Andreou, 2001; Bijttebier & Vertommen, 1998). This finding supports peer-report of greater expectancies of signs of distress when contemplating aggression against victimised peers (Perry et al., 1990). Together, research on coping suggests that universal programs that develop and support coping strategies that are active and include seeking advice and social support have the potential to impact positively on victimised students' well-being.

Self-worth appears to play a role in explaining the association between victimisation and internalising disorders and provides another mechanism through which school-based universal intervention to prevent bullying may impact on mental health. Ladd and Troop-Gordon (2003) found in children aged 10 that current victimisation influenced internalising problems through altering children's sense of social self-acceptance. In female students aged 11-13 years, self-worth has been found to play a mediator role between victimisation and anxiety, suggesting victimisation influences sense of self-worth and this negative self-view contributes to elevated anxiety (Grills & Ollendick, 2002). Similarly, Lopez and DuBois (2005) found self-worth mediated the link between peer victimisation and emotional problems (anxiety/depression symptoms and somatic complaints) in girls only. For boys, self-worth moderated the relationship, with high self-worth protecting highly victimised boys from experiencing anxiety (Grills & Ollendick). These results

suggest victimisation has a direct negative consequence on self-evaluations, which in turn affects psychosocial functioning. By removing the bullying experience and encouraging positive self-worth through connectedness and valuing of all students, bullying prevention may result in greater psychological adjustment for victimised students.

The research reviewed suggests ways in which universal school-based initiatives to prevent bullying may be expected to impact positively upon the psychological health of bullied students. By reducing bullying the event is less a part of children's experience. In turn, it may be expected that the feelings of fear and helplessness associated with the event recurring would also reduce. Social support is increased through strategies to mobilise peers and adults to be supportive of victimised students and non-reinforcing of bullying behaviour. A focus on social skills may increase active coping and self-efficacy in victimised students, so that assertive behaviour and seeking social support are coping strategies employed when bullied. If employed effectively, students will feel less helpless and more optimistic about the future. In turn, such competencies may decrease the use of avoidance and withdrawal, and emotional coping, such as crying and aggression, reducing the potential for future victimisation. Victimised children may be less self-blaming within an environment which promotes the inappropriateness of bullying and the idea that no child deserves to be victimised, and in turn, fewer experiences of negative evaluations from peers may increase self-worth.

1.4.5 General Conclusions and Research Directions

The theoretical and empirical links made between the experience of peer victimisation and psychological maladjustment suggest that improvements in

psychological health may result from universal efforts to prevent bullying. If the needs of victimised children are to be met, not only in regard to changing their peer experiences but also in terms of their psychological well-being, it is important to determine whether such outcomes are achieved.

There is much support for taking a universal, whole-school approach to the prevention of bullying. By taking a universal approach bullying is acknowledged as a social process involving all students; students are not stigmatised or labelled as 'victims' or 'bullies'; issues of screening and detecting students who are bullied is not necessary; and both the reduction of bullying experienced by students and the prevention of new and recurring cases of bullying are addressed. Focus at this level has resulted in the investigation of universal research outcomes such as change in knowledge and attitudes toward bullying, the frequency and duration of bullying, and in school climate factors. However, the "urgent preventative health measure" (Rigby, 1998a, p. 17) required isn't only one that prevents bullying, but one that also prevents and alleviates the psychological distress of victimised students (Hawker & Boulton, 2000; Kaltiala-Heino et al., 1999; Kumpulainen et al., 1998; Vernberg, 1990).

While universal intervention is designed for implementation with all members of the target population, within that population there are varying levels of risk. Pepler, Smith and Rigby (2004) point out that an important question requiring attention in bullying intervention research is where does the effectiveness lie? Is it in the majority of students or are the needs of high-risk students met? Intervention that ensures the best possible health outcomes for children who are at risk of developing psychological distress due to their peer victimised status, and that moves children who are currently experiencing psychological distress due to victimisation off a trajectory toward increased severity of psychological illness, is required. Does

universal intervention meet these aims? Answering this question requires a research design that assesses change with selected groups of children who are bullied and therefore at increased risk for psychological maladjustment, and indicated groups of children who are victimised and suffering low self-worth, internalising problems and/or somatic complaints.

Moreover, while there is a plethora of strategies and interventions in the growing literature on the topic of bullying prevention, few systematic evaluations of the effectiveness of these strategies exist. Randomised controlled trials provide the strongest level of evidence for the effectiveness of preventive interventions (Catalano, Berglund, Ryan, Lonczak, & Hawkins, 2002; Durlak & Wells, 1997, 1998; Mrazek & Haggerty, 1994; N.H.M.R.C., 1999). Few such studies exist in the scientific literature concerned with bullying, with much of the research plagued by methodological limitations, such as limited sample size, non-random selection of schools, and/or a lack of control groups and follow-up. As a result, a call for more rigorous evaluation has been made (Batsche, 1997; Farrington, 1993).

This thesis aims to address the methodological inadequacies of previous evaluations by employing a group randomised controlled trial with follow-up to investigate the boundaries of effectiveness of a universal bullying preventive intervention. Of focus are frequently bullied students and their experiences of victimisation and psychological health.

CHAPTER 2

Study 1 - Frequently Bullied Students: Screening, Prevalence and

Identification of Psychological Health Concomitants.

2.1 Aims and Rationale

The aim of Study 1 was to identify a targeted (selective and indicated) sample

of students based on frequency of victimisation and to provide cross-sectional data

on prevalence, nature of victimisation and psychological health, employing a cross-

sectional descriptive research design. Limitations of previous cross-sectional studies

were addressed by employing a randomly selected and stratified sample, multiple

informants, a measure that investigated all forms of bullying and well-validated

measures of psychological health.

2.1.1 The Case for Targeting Primary School and Year 4

Younger students are more amenable to discussing the issue of bullying

(Rigby, 1995) and express greater willingness to act against bullying (Menesini et al.,

1997). Moreover, children's attitudes become less supportive of bullied students and

more supportive of bullying as they get older (Ahmad & Smith, 1994; Pellegrini &

Long, 2002; Rigby, 1997a; Rigby & Slee, 1991; Swearer & Cary, 2003).

Intervention at primary school therefore provides an opportunistic window to utilise

the peer group in intervention strategies aimed at counteracting bullying and its

effects, and developing and reinforcing prosocial attitudes and behaviours that can be

maintained into adolescence and adulthood.

Furthermore, the primary school environment lends itself readily to parent

involvement in intervention strategies. Year 4 was selected as the year group of

focus, as it provided the opportunity to intervene relatively early developmentally, to

use reliable and valid measures of the outcome variables, and for long-term follow-up within the school environment prior to the transition to high school.

2.1.2 Measuring Frequent Peer Victimisation

Previous research has employed a variety of methods to identify victimised students. These include student interview (e.g., Ahmad & Smith, 1994), self-report questionnaire (e.g., Mynard & Joseph, 2000; Olweus, 1991; P. K. Smith & Sharp, 1994; Whitney & Smith, 1993), diaries (e.g., Pellegrini & Bartini, 2000; Pellegrini & Long, 2002), peer nomination (e.g., Boulton & Smith, 1994; Pellegrini & Long, 2002; Perry et al., 1988; Schwartz et al., 1993), teacher-report (e.g., Dodge & Coie, 1987; Sourander et al., 2000; Stephenson & Smith, 1989), parent-report (e.g., Sourander et al., 2000) and direct observation (e.g., Boulton, 1995, 1999; Pellegrini & Long, 2002; Pepler & Craig, 1995). In comparing various methods, Ahmad and Smith (1990) concluded that an anonymous questionnaire was best suited to examining the incidence of bullying and victimisation when issues of accuracy, time and cost were considered.

The aim of this study was to identify a targeted sample of students, that is, those comprising selective and indicated levels of risk according to victimisation frequency (Craig & Pepler, 2003). The research reviewed previously demonstrated that the more frequent the experience of victimisation, the greater the symptoms of depression, anxiety and somatic complaints, and the more negative self-perceptions. Previous research has defined frequent bullying as occurring about once a week or more often over a specified period, usually a school term (O'Moore & Kirkham, 2001; Solberg & Olweus, 2003; Whitney & Smith, 1993). Students identified as frequently bullied according to this definition have been found to perceive

themselves as significantly more troublesome, more anxious, less popular, less physically attractive, and having lower intelligence and schools status than children victimised moderately (sometimes) or occasionally (only once or twice) (O'Moore & Kirkham, 2001). Similarly, Solberg and Olweus found frequently bullied students were significantly different than students bullied "2 or 3 times a month", demonstrating lower self-worth, greater depressive tendencies and greater perceived social alienation. This research indicates that frequently bullied children are a particularly at risk group.

Of concern to this research is whether students of age 8 and 9 can conceptualise the term bullying as intended by the researcher. Students of this age may define bullying more extensively than the definition prescribes, for example, including fighting as a bullying behaviour, or conversely, less extensively, such as omitting indirect forms of bullying (P. K. Smith & Levan, 1995). Research has indicated that few students aged 6-7 years identify repetitiveness as a characteristic of bullying and 87% agreed that *"fighting with someone"* was a bullying behaviour (P. K. Smith & Levan). This suggests that students of this age tend to include in their definition of bullying aggressive behaviours that are not characterised by repetition or a power imbalance. When asked to provide their own definition of bullying, only 15% of students spontaneously reported examples of indirect bullying. However, when asked to recognise forms of bullying by responding *"yes"* or *"no"* to a range of behaviours, agreement ranged from 75% to 97% for behaviours indicative of physical, verbal and indirect bullying (P. K. Smith & Levan). This suggests that when it is brought to their attention, students of this age include indirect forms of bullying in their definition.

The ability of students of this age to conceptualise a time of reference is also of concern. Smith and Levan (1995) found that students aged 6-7 years were able to distinguish *"this week"* as a longer period than *"today"* and *"this term"* as a longer period than *"this week"* when reporting on their experiences of bullying. These findings suggest that a self-report questionnaire that provides a clear and understandable definition of bullying for children and clearly defined time periods with indicators familiar to children, such as *"last term"*, is a feasible means of gaining valid and reliable information about the bullying experiences of students aged 8 and 9 years.

The measurement of peer victimisation has typically involved either providing examples of bullying experiences and asking a single-item question on how often the respondent is bullied or dispersing victimisation experiences across several items of a scale to form an index of victimisation (Hawker & Boulton, 2000). This study employed a self-report questionnaire and utilised both methods. Direct (physical and verbal), indirect (rumours) and relational (being ignored or excluded) bullying were included in the definition and as items in the scale. The questionnaire was not anonymous as tracking of students over time was required. However, the questionnaire was confidential and students were not required to write their name as an identification code was used.

To further investigate these measurement issues with the age group of interest, two preliminary studies were conducted prior to Study 1 to investigate the validity and reliability of the bullying measures employed.

2.1.3 Prevalence, Type and Gender

Based on previous studies of prevalence relevant to this age group and employing similar methodology, it was expected that about 10% of students would report frequent victimisation. As some victimised students also bully others (Kumpulainen et al., 1998; Olweus, 1978; Salmivalli & Nieminen, 2002; Schwartz et al., 1997) involvement of frequently bullied students in bullying others was also of interest. Median prevalence estimates suggest that about 9% of students are identified as such, with the range being 1% to 24% (Hanish & Guerra, 2004). No sex difference was expected given the comprehensive definition of bullying employed (Ahmad & Smith, 1994).

In light of previous research with primary school samples using self-report, as reviewed previously, it was expected that verbal bullying would be experienced about equally by boys and girls; that more boys would report physical bullying, having their belongings taken or broken, and being threatened; and that relational and indirect bullying would be experienced equally within the frequently bullied sample identified.

2.1.4 The Need for Multiple Informants

In measuring children's social behaviour, it is important to obtain different perspectives rather than relying on a single source of information (Salmivalli et al., 1998). A limitation of many studies has been the use of a single informant methodology, resulting in shared method variance accounting for some of the relationship observed between victimisation and adjustment (Hawker & Boulton, 2000; Pellegrini & Long, 2002). Furthermore, comparisons of peer nomination and self-report have highlighted that children may be reluctant to admit to being bullied

and therefore not identified by self-report (Neary & Joseph, 1994). Graham, Bellmore and Juvonen (2003) found in a study of 6th graders that 25% of victimised students would have been missed if identification had relied on the reports of others and 10% would have been missed if only self-report was employed.

Whitney and Smith (1993) found that junior/middle school students were more likely to tell someone at home about being bullied than a teacher. Of students bullied once a week, 65% had told someone at home, compared with 48% a teacher, and of those bullied several times a week, 84% had told someone at home compared with 63% a teacher. In an Australian context, Rigby (1997b) found that in students aged 8-12 years who reported being bullied once a week or more, two-thirds reported telling their mother and one-half their father. Therefore, in addition to self-report, this study also obtained parent-report.

These studies also indicate that many children don't tell parents about bullying, therefore it was expected that the prevalence of frequent victimisation according to parent-report would be less than self-report. Sourander et al. (2000) found that at age 8, 41% of boys and 26% of girls were identified by self-report as victimised sometimes or frequently compared with 29% of boys and 15% of girls by parent-report. Similarly, Zubrick et al. (1997) found parents and teachers to report 11% of students as bullied compared to 14% by self-report. It was expected that in using a multi-informant methodology some students would be identified as frequently bullied by only one informant, therefore agreement was also investigated. In previous research with grade 4 students, a correlation of .34 has been reported between self- and parent-reports using a scale of victimisation (Ladd & Kochenderfer-Ladd, 2002).

In the context of anxiety problems, it has been proposed that the low convergence between children's self nomination and nomination by others may be due to a tendency in some children to respond in a socially desirable manner (Dadds, Perrin, & Yule, 1998; Dadds, Spence, Holland, Barrett, & Laurens, 1997). The possible influence of social conformity on students' reports of victimisation has also been raised in explanations of differences across reporters (Ahmad & Smith, 1990; Callaghan & Joseph, 1995; Neary & Joseph, 1994). Whether students who are identified as frequently bullied by parent-report but not self-report have responded to questions about victimisation in a socially desirable manner is of interest.

This question will help answer whether parents are over-reporting their child's victimisation or whether some children under-report due to social desirability characteristics. If so, students identified as frequently bullied by parent-report only would be expected to score higher on social desirability than students identified by both self- and parent-report or self-report only. These students would also be expected to report lower victimisation frequency than other frequently bullied students. Furthermore, scoring higher on victimisation frequency than non-frequently bullied students will suggest that whilst these students under-report their victimisation experiences due to social desirability factors, they are distinct to students identified as not frequently bullied. Thus validating the use of multiple informants and the identification of students by parent-report as frequently bullied.

2.1.5 Psychological Health of Frequently Bullied Students

The psychological health concomitants of bullying identified in previous research, namely depressive, anxiety and somatic symptoms, peer relations self-concept, and general self-worth, were investigated in the targeted sample of

frequently bullied students. The research reviewed demonstrates that victimised students experience elevated difficulties on these variables, furthermore severity of maladjustment is associated with frequency of victimisation. It was therefore expected that frequently bullied students and their parents would report more symptoms and negative self-perceptions than non-frequently bullied students. Furthermore, it was expected that greater proportions of frequently bullied students would experience depressive, anxiety and somatic symptoms in the clinical range.

2.2 Hypotheses

1. The point prevalence of frequent victimisation (*"about once a week"* or more) will be about 10% according to self-report, with no sex difference. Parent-reported prevalence will be less than self-report.

2. Victimised students identified by 'parent-report only', will show more social desirability than students identified by 'self-report' or 'self and parent report'. The victimisation frequency of these students will be lower than other frequently bullied students and higher than students not frequently bullied.

3. The most common type of bullying reported by frequently bullied students will be verbal, with no sex difference. Boys will report being physically bullied, threatened and having personal things taken or damaged more than girls. No sex differences will be found for indirect (rumours) or relational (being ignored, excluded) victimisation.

4. Self- and parent-report will demonstrate more depressive, anxiety and somatic symptoms and lower peer-relations self-concept and general self-worth in frequently bullied students compared with students not frequently bullied.

5. A greater proportion of frequently bullied students will score within the clinical

   range for depressive, anxiety and/or somatic symptoms, in comparison to

   students not frequently bullied.

2.3 Method

2.3.1 Sampling and Participants

   2.3.1.1 Preliminary studies.

      2.3.1.1.1 Pilot study. Three schools were randomly selected from all

metropolitan schools not involved in Study 1. One school was selected from each of

three socio-econmic status strata, representing low, middle or high status. Seventy-

nine Year 4 students and 71 (89.9%) parents participated.

      2.3.1.1.2 Test-retest study. The *Friendly Schools* Bullying Questionnaire

was administered to six classes of Year 4 students from four primary schools,

representing areas of low, medium and high socio-economic status. This sample was

independent to that of the pilot. Data on two occasions, two weeks apart, were

obtained from 144 (94.1%) students with a mean age of 8.9 years. Of the

respondents, 50.7% were girls.

   2.3.1.2 Study 1.

      2.3.1.2.1 Schools. To enable generalisation, all metropolitan government

schools in Perth, Western Australia, were stratified according to size (number of

Year 4 students) and socio-economic status (using postcode to obtain an indicator

based on 1996 Census of Population and Housing data collected by the Australian

Bureau of Statistics). School size comprised two strata (50-65 and >65 Year 4

students). Socio-economic status strata were identified by classifying all schools

with a Year 4 enrolment of 50 or more into tertiles representing low, middle and high

status. Schools were excluded from the sample if they were participating in another

major research project to avoid outcome contamination and possible compromise in

program implementation and research procedures due to over-commitment. Using

random number generation, a researcher independent to the data collection randomly

selected schools from each socio-economic and size stratum for participation. To

allow for school refusal to participate, twenty-percent more schools than required

were randomly selected and assigned to each condition, however, all 29 schools

approached agreed to participate.

2.3.1.2.2 Students. The student sample comprised 1966 (95.1%) students

from the 2068 Year 4 students available in the 29 recruited schools. The mean age of

participants was 8.6 years ($SD = .548$), with boys constituting 50.4% ($n = 990$) of the

sample. The mean Index of Relative Socio-Economic Disadvantage for participating

students was 1013.16 ($SD = 63.82$), 0.13 standard deviations above the Australian

average. Of the 5.1% ($n = 100$) of students who did not participate, 40 did not have

parental consent; one did not speak English; 46 were absent; and 13 were involved in

educational support programs due to learning difficulties.

2.3.1.2.3 Parents. Of the 1966 parents of participating students, 1485

(75.5%) responded to the parent questionnaire, representing 71.8% of parents of

Year 4 students in recruited schools. Most participants were mothers (87.9%, $n =$

1291), with 10.9% ($n = 160$) fathers, 1.2% ($n = 17$) others and no response from

1.1% ($n = 17$). Age of respondents ranged from under 29 (7.9%, $n = 118$) to 45 and

over (6.9%, $n = 103$), with the most frequently selected age range at 37.4% ($n = 556$)

being 35-39 years, followed by 40-44 years (23.3%, $n = 346$) and 30-34 years

(23.1%, $n = 343$). Australia was the country of birth for 60.9% ($n = 904$) of parents,

followed by the United Kingdom and Ireland (22.3%, $n = 331$), Asia (5.3%, $n = 79$),

New Zealand (4.0%, *n* = 59) and Europe (2.9%, *n* = 43). The remaining 3.0% (*n* =

45) were from a variety of countries, with 1.6% (*n* = 24) not responding. The mean

Index of Relative Socio-Economic Disadvantage for participating parents was

1015.41 (*SD* = 63.76), 0.15 standard deviations above the Australian average.

2.3.2 Measures

The student questionnaire included demographic questions, the *Friendly*

Schools Bullying Questionnaire, the Children's Depression Inventory (CDI)

(Kovacs, 1992), the Revised Children's Manifest Anxiety Scale (RCMAS) (C. R.

Reynolds & Richmond, 1985) and the Self-Description Questionnaire I (SDQ-I)

(Marsh, 1990). The parent questionnaire package included demographic questions,

the *Friendly Schools* Bullying Questionnaire and the Behaviour Assessment System

for Children – Parent Rating Scales Child (BASC PRS-C) (C. R. Reynolds &

Kamphaus, 1992).

2.3.2.1 Student measures.

1. Bullying Questionnaire for Students

To assess involvement in bullying, a confidential self-report questionnaire was

employed. The questionnaire was not anonymous as students were identifiable by a

numeric code. They were not required to write their name on the questionnaire

however. The Bullying Questionnaire for Students was developed to address the

student outcomes of the *Friendly Schools* Bullying Intervention Project. Of

relevance to this study, was a single-item response choice question assessing

frequency of victimisation, a 7-item scale of frequency of bullying type and a single-

item question assessing frequency of bullying others (see Appendix A1 and A2).

These items were preceded by an illustrated definition of bullying (see Appendix

A2). The items and definition were based on The Peer Relations Questionnaire
(Rigby & Slee, 1998), a measure developed for use with Australian primary and
secondary school students, and the Olweus (1991) measure of bullying that has been
used extensively in international research. The format and language of these
measures was considered too complex for Year 4 students and a scale comprising all
forms of bullying was required. The definition and items used were designed to be
comparable to other research while appropriate for the age group of the sample.
Examples of direct verbal (made fun of; teased; threatened) direct physical (hit;
kicked; pushed around), indirect (rumours spread) and relational (exclusion) forms of
bullying were included. The definition used was as follows:

*"You may have noticed that children sometimes bully other children. Bullying is
when these things happen again and again to someone:*

- *Being ignored, left out on purpose, or not allowed to join in*

- *Being hit, kicked or pushed around*

- *Lies or nasty stories are told about them to make other kids not like
  them*

- *Being afraid of getting hurt*

- *Being made fun of and teased in a mean and hurtful way*

*But when the teasing is done in a friendly and playful way we don't call it bullying.
It is hard for the kid being bullied to stop these things from happening again and
again. While fighting is not a good thing to do, it is not bullying when two students
who are as strong as each other get into a fight".*

Content validity was established by ensuring that the definition and scale items included physical, verbal, indirect and relational forms of bullying, and clarified behaviours that are not bullying. Since some forms of teasing are viewed as friendly by students (Ahmad & Smith, 1994), teasing was qualified with *"in mean and hurtful way"* and a distinction was made between this form and friendly and playful teasing between friends. Content validity was further established in a pilot study. Prior to being provided with a definition of bullying, students were asked to rate their agreement on a 5-point response-choice scale with whether particular behaviours were bullying. The purpose of this was to ascertain how inclusive students were in their definition of bullying when prompted, prior to receiving a definition.

The highest degree of agreement was with *"always hitting, pushing and kicking someone"* (97.5%) as being bullying, followed by *"always threatening someone"* (91.1%), *"always calling someone names"* (88.6%), *"always telling nasty stories about someone"* (88.6%), *"always leaving someone out"* (83.5%), *"always hiding or breaking someone's things"* (84.6%), and *"always forcing someone to do things they don't want to do"* (83.3%). Three behaviours were included that were not forms of bullying. *"Getting fed up with someone"* (44.3%) and *"when someone shouts at someone else because they are angry"* (53.2%) received less, but still substantial, agreement as being forms of bullying, however, similar to previous findings (P. K. Smith & Levan, 1995), a large percentage of students (89.6%) agreed that *"fighting with someone"* was bullying. These figures suggest that children of this age include indirect behaviours in their conceptualisation of bullying when prompted, such as leaving someone out or telling nasty stories about someone, but are over-inclusive in their definition, particular in regard to fighting. This finding

validated the use of a definition that clearly identified behaviours that were bullying and highlighted fighting as not a bullying behaviour.

The single-item frequency of victimisation question asked, *"Last term, how often did another student or group of students bully you?"* with six response choices provided, ranging from *"I was bullied almost every day last term"* to *"I was not bullied at all last term"*. This item was used to obtain a dichotomous measure of frequently bullied status, with students classified as frequently bullied if they reported being bullied *"about once a week"*, *"most days"* or *"almost every day"*. Students reporting to be bullied *"every few weeks"*, *"only once or twice"* or *"not at all"* were identified as not frequently bullied. The format of the single-item frequency of bullying others question was the same, asking *"Last term, how often did you, on your own or in a group, bully another student?"* with six response choices, ranging from *"I bullied someone almost every day last term"* to *"I did not bully anyone at all last term"*. This item assessed the involvement of frequently bullied students in bullying others.

While involvement in bullying may change over time, the question specifies *"last term"*. It was therefore expected that responses would be relatively stable across a two-week period. A test-retest study demonstrated adequate test-retest reliability of the frequency of victimisation item, indicated by a polychoric correlation of .75, $p = .000$ for raw scores and a tetrachoric correlation of .81, $p = .000$ when raw scores were converted into frequently bullied status. Similarly, adequate test-retest reliability of the frequency of victimisation item was indicated by a polychoric correlation of .64, $p = .000$ for raw scores and a tetrachoric correlation of .83, $p = .000$ when raw scores were converted into frequently bullies status.

The scale of victimisation frequency consisted of seven types of peer victimisation, representing physical, verbal, indirect and relational bullying. Students were asked to respond *"never"* (scored as 0), *"sometimes"* (scored as 1) or *"lots of times"* (scored as 2) regarding their experience of each type of bullying in the last school term. The scale provides two types of data. The individual items provide frequencies for each type of bullying. The items together form a scale that provides a continuous measure of victimisation frequency, with a total score ranging 0-14. A mean score of 2.52 ($SD = 2.78$, $N = 144$) at Time 1 and 2.08 ($SD = 2.73$, $N = 137$) at Time 2 was obtained with the test-retest sample. Similarly, the Study 1 sample demonstrated a mean score of 2.16 ($SD = 2.82$, $N = 1923$). Adequate two-week test-retest reliability was indicated for the total score by a polychoric correlation of .71, $p = .000$ ($N = 128$), as was internal consistency across the seven items at Time 1 $\alpha = .75$ ($N = 144$) and Time 2 $\alpha = .84$ ($N = 137$). A Cronbach's index of internal consistency obtained from the Study 1 sample was consistent with the test-retest sample, $\alpha = .84$ ($N = 1876$). Corrected item-total correlations showed the scale items to have weak to moderate discriminatory capacity, with correlations ranging between .27 for Item 6 (money or other things taken away from me or broken) and .62 for Item 1 (made fun of and teased in a hurtful way). Corrected item-total correlations obtained from Study 1 data suggested better discriminatory capacity, with correlations ranging between .49 for Item 6 (money or other things taken away from me or broken) and .66 for Item 2 (called mean and hurtful names).

Evidence of convergent validity was provided by a polychoric correlation of .75, $p = .000$ ($N = 144$) between the single-item measure and total scale score at Time 1 and .87, $p = .000$ ($N = 136$) at Time 2. Employing a contrasted groups approach, the scale of victimisation frequency discriminated between frequently

bullied and non-frequently bullied students, categorised using the single-item measure. Frequently bullied students scored significantly higher at Time 1 ($M_{\text{frequently bullied}}$ = 6.87, SD = 2.63, n = 16; $M_{\text{non-frequently bullied}}$ = 1.98, SD = 2.28, n = 128; $t(142)$ = -7.971, p = .000, η^2 = .309) and Time 2 ($M_{\text{frequently bullied}}$ = 6.00, SD = 3.06, n = 20; $M_{\text{non-frequently bullied}}$ = 1.41, SD = 2.03, n = 116; $t(21.972)$ = -6.460, p = .000, η^2 = .355). The effect size was large on both testing occasions. The Study 1 sample supported these findings with a polychoric correlation coefficient of .76, p = .000 (N = 1872) between the single-item frequency measure and total scale score, and a significant difference between the mean total scale scores of frequently bullied and non-frequently bullied students ($M_{\text{frequently bullied}}$ = 5.24, SD = 3.63, n = 309; $M_{\text{non-frequently bullied}}$ = 1.57, SD = 2.19, n = 1613; $t(352.195)$ = -17.217, p = .000, η^2 = .229).

2. Demographic Questionnaire

Students were asked their age and sex (see Appendix A3).

3. Children's Depression Inventory (CDI) (Kovacs, 1992)

The CDI was selected for use as it is a frequently used measure of depression (W. M. Reynolds, 1994) and has been used in studies of victimisation (Craig, 1998; Kumpulainen et al., 1999), facilitating comparison. The CDI is a 27-item, self-report measure of severity of depressive symptomology, designed for school-aged children and adolescents, aged 7 to 17 years. A range of depressive symptoms are quantified and the consequences of depression in child-relevant contexts, such as the school, are addressed. Each item consists of three sentences that indicate the absence, mild presence or definite presence of a particular symptom. The child is asked to choose the sentence which best describes themselves over the past two weeks. Completion

time is reported as 15 minutes or less. While the author notes that administration of the CDI in an individual setting is preferable, group administration is permitted and the measure is easily administered (Kovacs, 1992).

The total score was used, with raw scores ranging 0-54. In light of the age of the students and the sample being non-clinical, the suicide item (Item 9) was removed (Burbach, Farha, & Thorpe, 1986; Kumpulainen et al., 1999). In calculating the total score, a dummy value of '1', indicative of mild presence, was given for this item. This was done for comparison to research where the item has not been removed and to ensure a more inclusive approach to the identification of at-risk students.

Internal consistency of the measure is indicated by coefficients ranging from .71 to .89, with coefficients above .80 common (Kovacs, 1992; W. M. Reynolds, 1994). The total sample of Study 1 provided a cronbach's alpha coefficient of .88, without the suicide item. Test-retest reliability coefficients range from .38 and .87, with variability associated with time interval and sample characteristics (Kovacs; W. M. Reynolds). Comparisons with various measures of depressive symptoms and disorders, and with measures of related constructs, such as anxiety and self-esteem, have demonstrated the convergent validity of the CDI (K. Hodges, 1990; Kovacs).

Although the CDI was not designed as a diagnostic measure and is most appropriately used as a measure of depressive symptoms, the usefulness of identifying a cut-point indicative of clinically relevant levels of depressive symptoms has been raised (Kovacs, 1992; W. M. Reynolds, 1994). In the present study, a cut-point enabled comparison across frequently bullied status of the proportion of students reporting clinical levels of depressive symptoms. Kovacs (1992) suggests that raw scores of 20 and above are indicative of clinically relevant symptoms in

non-selected samples. Using norms for age 7-12 provided in the manual, a raw score of 20 converts to T-score of 63 and the 91st percentile for boys and a T-score of 65 and the 92nd percentile for girls.

4. Revised Children's Manifest Anxiety Scale (RCMAS) (C. R. Reynolds & Richmond, 1985)

As this study was interested in the mental health impact of bullying, rather than the social impact, a measure of general trait anxiety, that is, "the predisposition to experience anxiety in a variety of settings" (C. R. Reynolds & Richmond, 1985, p. 29) was chosen. The RCMAS is one of the most frequently used measures of generalised anxiety in children (James, Reynolds, & Dunbar, 1994). The RCMAS is a 37-item, self-report measure of anxiety symptoms. Three aspects of childhood anxiety are measured, physiological symptoms, worry/oversensitivity, and social concerns/concentration.

The measure is designed for use with children and adolescents aged 6 to 19 years. It requires an approximately third grade reading level, is easily administered in group settings and can be completed in 15 minutes or less. The child is asked to respond by circling either "*yes*" or "*no*" in response to the statements presented, with "*yes*" indicating that the item is descriptive of the child's feelings or actions. A Total Anxiety score is calculated, with raw scores ranging 0 - 28. A measure of the child's tendency to endorse "ideal" behaviour that is not characteristic of any age is found in the Lie subscale. This scale is an indicator of 'faking good' to present an idealised view of self, with high scores suggesting a high need for social desirability and acceptance. Raw scores on this subscale range 0 - 9.

Internal consistency coefficients of the Total Anxiety score and Lie Scale are reported as .80 and .72, respectively, for age 8, and .83 and .74, respectively, for age 9 (C. R. Reynolds & Richmond, 1985). The total sample of Study 1 supported internal consistency with coefficients of .90 and .71, respectively, as measured by Kuder-Richardson formula 20. The Total Anxiety score and Lie Scale have shown test-retest reliability coefficients of over .90 for a three-week interval and .68 and .58, respectively, across 9 months (C. R. Reynolds & Richmond). The RCMAS has shown construct validity as a measure of chronic manifest anxiety, independent of state or situational anxiety, with convergent validity indicated by correlations of .85 and .78 with the State-Trait Anxiety Inventory for Children (STAIC) Trait scale and discriminant validity indicated by correlations of .24 and .08 with the STAIC State scale (C. R. Reynolds, 1980, 1982). Discriminant validity is also indicated by its ability to discriminate between youth with anxiety disorders and youth without a disorder (Seligman, Ollendick, Langley, & Baldacci, 2004).

Although the RCMAS is a measure of symptom severity, the application of a cut-point is useful for investigating clinically relevant levels of symptoms. To correspond with the CDI, a cut-point equivalent to a T-score of 65 was chosen. Using normative data for age 8 provided in the manual, this was a Total Anxiety raw score of 22 (94th percentile) for boys and 23 (93rd percentile) for girls.

5. Self Description Questionnaire I (SDQ-I) (Marsh, 1990)

The SDQ-I is a 76-item questionnaire that measures children's domain specific self-perceptions across seven subscales and general self-worth. The measure is based on a theoretical model of self-concept. Four areas of non-academic self-concept are assessed by the Physical Ability, Physical Appearance, Peer Relations

and Parent Relations subscales; three areas of academic self-concept are assessed by the Reading, Mathematics and General School subscales. Self-worth is measured by the General Self subscale. This subscale infers a general or overall positive self-perspective not specific to any particular area of self-concept, referring to a "student's rating of himself or herself as an effective, capable individual who is proud of and satisfied with the way he or she is" (Marsh, 1990, p. 23). Six of the scales were administered to students, with Reading and Mathematics excluded. Of interest to this study are the Peer Relations and General Self subscales.

The SDQ-I was designed for use with children aged 8-12 (grades 4 through 6). The measure can be administered in group situations and no special administration training is required. The total testing time is reported as 15-20 minutes. Children are asked to respond to simple declarative sentences by selecting one of five responses from a choice of *'False', 'Mostly False', 'Sometimes False/Sometimes True', 'Mostly True' and 'True'*. The range of possible raw scores for each scale is 8-40. Normative data are based on the responses of Australian students.

Test-retest reliability of the individual scales showed a mean reliability coefficient of .61 over a six-month period (Marsh, 1990). Internal consistency reliability estimates of .85 for the Peer Relations scale and .81 for the General Self scale are reported (Marsh). Similarly, the total sample of Study 1 provided coefficient alphas of .88 and .87 for the Peer Relations and General Self scales, respectively.

Construct validity has been demonstrated, with SDQ-I responses systematically relating to external criteria consistent with the theory of self-concept, including sex, age, socio-economic status, academic achievement, teacher ratings of achievement and inferred self-concept, peer ratings of inferred self-concept, student attributions

for the perceived causes of their academic successes and failures, responses to other self-concept instruments and experimental interventions designed to enhance self-concept (Hay, Ashman, & van Kraayenoord, 1998; Marsh, 1990).

2.3.2.2 Parent measures.

1. Bullying Questionnaire for Parents

Parents were asked to complete a questionnaire assessing their own knowledge, attitudes and behaviours pertaining to bullying, and their child's social relationships. Of interest to this study were the items assessing parent-report of their Year 4 child's experience of bullying (see Appendix B1 and B2). Parents were asked *"To the best of your knowledge, how often last term was your Year 4 child bullied by another student or group of students?"* and *"To the best of your knowledge, how often last term did your Year 4 child bully another student or students?"* Response choices were directly comparable to those on the student questionnaire, ranging from *"almost every day"* to *"not at all"*. Frequently bullied students were identified as those whose parent reported that they were bullied *"about once a week"*, *"most days"*, or *"every day"*. The bullying of others item was used to investigate frequently bullied students' involvement in bullying others.

Convergent validity of peer victimisation was established employing a contrasted groups approach. Using the Study 1 sample, parent-reported frequently bullied students scored significantly higher than non-frequently bullied students on the self-report scale of victimisation frequency, with a medium effect size observed ($M_{\text{frequently bullied}} = 4.19$, $SD = 3.80$, $n = 132$; $M_{\text{non-frequently bullied}} = 1.87$, $SD = 2.52$, $n = 1295$; $t(143.037) = -6.856$, $p = .000$, $\eta^2 = .060$).

2. Demographic Questionnaire

Parents were asked to choose a category that best represented their age, identify their relationship with their Year 4 child, and report how many children they had, the highest level of education they had completed, their country of birth and their postcode (see Appendix B3). Converting postcode into the Index of Relative Socio-Economic Disadvantage (IRSED) provided an indicator of socio-economic status. This index is available for postal areas and reflects "attributes such as low income, low educational attainment, high unemployment and jobs in relatively unskilled occupations" (McLennan, 1998, p. 3), with higher index values representing less disadvantage. It is derived from 1996 Census of Population and Housing data collected by the Australian Bureau of Statistics and is standardised to a mean of 1000 and standard deviation of 100.

3. Behavior Assessment System for Children – Parent Rating Scales Ages 6-11 (BASC PRS-C) (C. R. Reynolds & Kamphaus, 1992)

The BASC PRS-C was selected for use as it provided an easily administered parent-report measure of child symptoms of depression, anxiety and somatic symptoms. The Depression, Anxiety and Somatization scales together comprise the Internalising Problems composite. The child form was used, which targets items to 6-11 years. The parent rates descriptors of their child's behaviour on a four-point scale of frequency from *"never"* to *"almost always"*. The measure is reported to take between 10 and 20 minutes to complete and while it is suggested that administration in controlled settings is ideal, mailing to the home is appropriate (C. R. Reynolds & Kamphaus, 1992). Raw score ranges are 0-30 for Depression, 0-24 for Anxiety and 0-24 for Somatization. Due to the age of children and application of the measure to a non-clinical sample, the two suicidal ideation items in the

Depression scale (Item 19: *Says, "I want to kill myself"*; Item 99: *Says, "I want to die" or "I wish I was dead"*) were removed (Burbach et al., 1986; Kumpulainen et al., 1999) and replaced by a dummy value of '1' representing the response *"sometimes"* for comparison purposes.

The mean Depression score obtained for the total sample in Study 1, 8.38 (*SD* = 4.45, *N* = 1464), was higher than that of the general normative sample for ages 8-11, 6.8 (SD = 4.2, *N* = 1815). This may be due to the dummy values assigned to the removed suicidal ideation items not representing the normative response. The manual does not provide individual item response detail for further investigation. The mean Anxiety score obtained in Study 1, 9.29 (*SD* = 4.48, *N* = 1462), was slightly lower than that of the normative sample, 10.8 (*SD* = 4.8, *N* = 1815). The mean Somatization score obtained, 4.15 (*SD* = 3.50, *N* = 1465), was comparable to the normative sample, 4.9 (*SD* = 3.4, *N* = 1815).

Internal consistency coefficients of .83 are reported for the Depression scale, .80 for the Anxiety scale, and .75 for the Somatization scale, based on the general normative sample for ages 8-11 (C. R. Reynolds & Kamphaus, 1992). The total sample of Study 1 provided internal consistency coefficients of .86, .80 and .78, respectively. Test-retest reliability is good, with a correlation of .89 for the Anxiety scale, .90 for the Depression Scale and .87 for the Somatization scale across an interval of two to eight weeks (C. R. Reynolds & Kamphaus). Correlations between the PRS and the Child Behaviour Checklist (CBCL) and Conners' Parents Rating Scales provide both convergent and discriminant support for the construct validity of the PRS (C. R. Reynolds & Kamphaus). The Internalising Problems composite of the PRS-C correlates .67 with the Internalising score on the CBCL. The Anxiety scale correlates .52 and the Depression scale .62 with the anxious/depressed scale of

the CBCL. The somatization scale correlates .44 with the somatic complaints scale of the CBCL. High scores on the Depression scale by a group of children diagnosed with major depression, dysthymia or depressive disorder not otherwise specified, independent of BASC results, provides further support to the validity of the Depression scale (C. R. Reynolds & Kamphaus).

To investigate clinically relevant levels of depressive, anxious and/or somatic symptoms, cut-off points were determined for each scale. The BASC manual provides a classification system for scale and composite scores, with T-scores of 70 and above achieving the 'clinically significant' classification (C. R. Reynolds & Kamphaus, 1992). The cut-points selected for males were a Depression scale raw score of 14 (95th percentile), an Anxiety scale raw score of 20 (96th percentile) and a Somatization scale raw score of 12 (96th percentile), according to manual norms for boys aged 8-11 years. Using manual norms for girls aged 8-11 years, the cut-points employed for females were a Depression scale raw score of 16 (96th percentile), an Anxiety scale raw score of 20 (95th percentile) and a Somatization scale raw score of 11 (95th percentile).

2.3.3 Procedure

2.3.3.1 Pilot study. Students were administered the pilot questionnaire in the classroom setting by the researcher who read the questionnaire items aloud. To determine the appropriateness and understanding of the language used, students were asked to raise their hand or circle words they did not understand. Any questions asked by students were recorded. Three students from each class were interviewed following completion of the questionnaire. Students were selected if they appeared to be having difficulty with the questionnaire or were not engaged in the task.

Students were asked to comment on the process of completing the questionnaire and areas of difficulty. The teacher of each class was also asked to comment on the questionnaire.

The pilot study indicated that some of the words used were inappropriate for the reading and understanding level of Year 4 students and that the 'wordiness' of the definition was difficult for students to consolidate. Identified words were changed to better suit the ability level of Year 4 students and illustrations of the behaviours discussed in the definition were added. The resulting definition and questionnaire items were reviewed for understanding and readability by three experts with school-based research and primary school teaching experience.

The pilot study showed that administration of the *Friendly Schools* Bullying Questionnaire for Students required approximately 40 minutes. One class of students in the pilot sample was also administered the CDI, RCMAS and SDQ-1 to determine any administration difficulties with these measures and assess the impact of the length of administration on students. The administration of these three questionnaires required an additional 40 minutes.

Students were given the *Friendly Schools* Bullying Questionnaire for Parents to take home on the day of the student questionnaire administration. Parents were asked to return the questionnaire to school via their Year 4 child. No significant difficulties were revealed regarding the procedure for disseminating and returning questionnaires, or in regard to parents' completion of the questionnaire.

2.3.3.2 Study 1. Schools were contacted by phone and then letter (see Appendices C1 and D1, respectively) in the final school term of the year prior to commencement of the study. At the start of the new school year, recruited schools were sent a letter of agreement to participate (see Appendices C2 and D2). Year 4

teachers at participating schools were also sent information letters (see Appendix E and F, respectively).   Via the school, parents of all Year 4 students received an information letter about the project and the outcome measures to be used, and a consent form regarding their Year 4 child's participation (see Appendix G1 and H1). A passive consent procedure was employed, with parents required to return the consent form only if they did not want their child to participate in questionnaire completion. One school employed an active consent procedure and the consent form was modified accordingly. Teachers were provided with collection materials for returned consent forms indicating non-participation (or in the case of the one school employing active consent, participation).

Student questionnaire administration was conducted across all participating schools within a two-week period in the first and second weeks of term 2. The timing of questionnaire administration was considered in the context of students' development of social relationships within the school environment. Term 2 afforded a term of peer experiences for students to draw upon. The student measures were administered to whole classes by Health Promotion and Psychology undergraduate and graduate students. Administrators received two hours of training, conducted by the researcher, in school-based questionnaire administration, and the specific administration procedure and protocol to be employed.

Questionnaire administration was conducted in the morning to make use of higher student attentiveness at this time. To prevent boredom and fatigue, the *Friendly Schools* Bullying Questionnaire for Students was administered first and the CDI, RCMAS and SDQ-1 were administered following students' morning recess break. The administrator read the standardised instructions and questionnaire items aloud to the class to reduce the likelihood of reading difficulties affecting responses.

The instructions included an explanation of confidentiality and informing students that they were not to write their name on the questionnaire. The class teacher remained in the classroom to maintain duty-of-care and assist with behaviour management. Non-participating students completed a collection of puzzle worksheets during the questionnaire administration. At the completion of the questionnaire administration all students received a sticker. To secure high response rates and a representative sample, particularly in light of the link between victimisation and absenteeism (Batsche & Knoff, 1994; Rigby, 1997b, 1999; Slee, 1994a; Zubrick et al., 1997), teachers were provided with a written protocol for administering questionnaires to students absent on the day of administration.

The administration procedure for parents utilised students and teachers. As part of the student administration, students were asked to write a letter home to a parent, asking that they complete the questionnaire brought home by their child in an unsealed envelope. A cover letter asked parents to return the questionnaire, either completed or blank (to indicate it had been received but the parent had chosen not to participate) by sealing it in the envelope in which it came (to provide confidentiality) and returning it to class. To enhance the response rate, parents were given a small incentive (the chance to win one of three $50 shopping vouchers) and teachers were provided with reminder letters to give to students, who had not returned a parent questionnaire, to take home. Teachers were also encouraged to prompt questionnaire return by reminding students, talking with parents, and mentioning at the school assembly. Schools were also provided with newsletter items that alerted parents to the questionnaire coming home and prompted its return. A member of the research team collected returned parent questionnaires from schools. A second reminder letter was sent, via the classroom, to parents who did not return a parent

questionnaire by the due date. Teachers posted any further returns or administered

absent student questionnaires in reply paid envelopes.

Ethical issues pertaining to the use of self-report inventories with non-clinical

community samples, particularly in regard to identification of children who are at-

risk, have been raised by a number of researchers (Bouma & Canny, 2000; Burbach

et al., 1986; Shochet & O'Gorman, 1995). Although the level of analysis is group, it

has been argued that when data are collected at the individual level, researchers have

a duty of care to those participants who demonstrate extreme scores (Bouma &

Canny). Given the age group of the sample in this research, it was considered

appropriate to identify at-risk students as those showing elevated scores on the

measures administered. Taking into account issues of validity (Burbach et al.) and

the risk of false alarm (Bouma & Canny), students who showed a pattern of

elevations across measures were identified as at-risk. Students who received a CDI

score above 19 and a RCMAS total score of one standard deviation or above the age

and sex appropriate normative sample were identified as at-risk. Six percent ($n =$

121) of students were identified as at-risk, with 54.5% ($n = 66$) female.

Parents were selected as the appropriate person to receive feedback regarding

elevated test scores as they had given consent for their child to participate and have a

duty of care for their child. Via the school's administration, parents of these students

were sent a confidential, sealed letter to inform them that their child showed signs of

distress on the questionnaire completed and to ask that they contact the researcher to

discuss this further (see Appendix I). Given student consent to complete the

outcome measures was provided by the parent, confidentiality was not violated by

this process. Frequently bullied status was not disclosed to parents as students were

informed that their answers to questions on bullying were confidential. Schools were contacted to confirm they had received and forwarded the letters.

Since the measures employed assessed symptom severity, elevated scores were seen to be indicative of distress (Bouma & Canny, 2000). The researcher, who was completing training as a Clinical Psychologist, answered all calls from parents. This involved discussing the child's elevated scores and what this may mean for the child, and referring the parent to appropriate sources of further help. If requested, children were referred for further evaluation and possible treatment to the child's school psychologist, doctor, or a local child and adolescent mental health clinic. Referral reports were written by the researcher under the supervision of a registered Clinical Psychologist.

2.3.4 Data Analysis

Analysis was conducted using SPSS for Windows Version 11.5.0. In all analyses two tailed *p*-values are reported with $\alpha = .05$, unless otherwise specified.

2.3.4.1 Data screening. Univariate descriptive statistics were used to assess validity of participant response on demographic variables and accuracy of data entry (Tabachnick & Fidell, 2001b). Pattern responding by participants was investigated using patterns of all one response (e.g. all '1'), alternating (e.g. 1,2,1,2…) or series (e.g. 1,2,3,1,2,3…) responding (C. R. Reynolds & Kamphaus, 1992). Where cross-matching with other information was possible, missing values in demographic data were replaced. Postcode was provided by parents only, therefore students were assigned an IRSED value based on the postcode of their participating parent or, in cases where this was not available, their school. Parents who participated but missed

the postcode item were assigned an IRSED value based on the postcode of their child's school.

Percentage of missing cases within each variable was calculated, with less than 5% missing cases within a variable deemed acceptable without further analysis (Tabachnick & Fidell, 2001b). To enable scale scores to be computed missing item values were replaced. Prior to this the percentage of missing items within each scale was calculated for each case. For those cases where 25% or more of items composing a scale were missing, missing value replacement to calculate a total score was considered inappropriate (Kessler, Little, & Groves, 1995). These cases were deleted from analysis of the particular scale. Deletion of cases is an appropriate strategy for managing missing values when such cases are few and they are a random sub-sample of the whole sample (Tabachnick & Fidell). For all other cases, expectation maximization (EM) methods were used to replace missing data in scale item variables. This technique produces realistic variance estimates and avoids impossible matrices and over-fitting of data (Tabachnick & Fidell). All analyses were conducted with missing data replacement and with elimination of cases with missing data to increase confidence in the results (Tabachnick & Fidell).

2.3.4.2 Primary analyses. Frequently bullied status was identified by self- and/or parent-report. Therefore, for cases with both student and parent data, frequently bullied students could be identified by 'self- and parent-report', 'self-report only' or 'parent-report only' and non-frequently bullied by 'self- and parent-report'. Inter-rater agreement between students and parents in identifying frequently bullied status was assessed using raw agreement indices, in the form of the proportion of overall agreement and the proportions of agreement specific to each category, the McNemar test of marginal homogeneity, and the tetrachoric correlation

coefficient (Sattler, 2002; Uebersax, 2001). In cases where only one form of report was available, this was used to classify frequently bullied status. Percentages and confidence limits for population proportions (Zar, 1999) were used to report on prevalence of frequent victimisation.

To enable comparison of frequencies across bullying type, only cases with responses to all items were included. Pearson chi-square investigated sex differences in bullying type. Yates' corrected chi-square, for 2 x 2 tables (Bryman & Cramer, 1994; Siegel & Castellan, 1988), assessed sex differences in frequently bullied status and compared the proportions of frequently bullied and non-frequently bullied students who scored above clinical cut-offs on each measure of psychological health for self- and parent-report. The Fisher's exact test is reported for analyses with expected cell frequencies of less than five (Siegel & Castellan).

Planned comparisons (Keppel, 1991), evaluated against a common error term, investigated whether students identified as frequently bullied by 'parent-report only' showed significantly greater social desirability in their responding than students identified by 'self-report only', by 'self- and parent-report', or as non-frequently bullied. Planned comparisons were also employed to investigate whether students identified as frequently bullied by 'parent-report only' reported significantly less victimisation than other frequently bullied students and significantly more than non-frequently bullied students. Only students for which both a self and parent response to frequently bullied status was available were included in these analyses. As the analysis was restricted to meaningful planned comparisons, no correction for familywise error was made (Keppel). Effect sizes are reported using eta-squared (Bryman & Cramer, 1994), and interpreted using the descriptors and definitions of Cohen (1988).

Univariate ANOVA investigated differences in the self- and parent-reported psychological health of frequently and non-frequently bullied students. Although the groups differed significantly on IRSED, this variable showed no relationship (linear or curvilinear) with the dependent variables and therefore statistical control of this variable as a covariate in the analysis was not necessary (Pearson's correlation coefficients ranged between -.11 and .11 for student variables and -.094 and -.019 for parent variables for the frequently bullied sample, and -.19 and .11 for student variables and -.15 and -.06 for parent variables for the non-frequently bullied sample).

It has been argued that multivariate analysis of variance (MANOVA) does not guard against an inflation of the familywise error rate associated with the analysis of multiple dependent variables and the decision to choose MANOVA or ANOVA should be guided by the type of research question, not the assumption of protection from an increase in familywise error (Huberty, 1994; Huberty & Morris, 1989). ANOVA was considered appropriate as the purpose of the analysis was to re-examine group differences on outcome variables previously studied in univariate contexts.

A Bonferroni adjustment was applied to the per comparison alpha level to counteract the increased chance of familywise error due to multiple ANOVAs. However, in consideration of potential reductions in power as a result of these corrections, variables were grouped in empirically and theoretically meaningful ways and a Bonferroni adjustment applied according to the number of comparisons conducted within each grouping (Huberty & Morris, 1989; Keppel, 1991). Table 1 shows these groupings. For self-report mental health variables and self-concept

variables the per comparison alpha level was set at .025 to maintain a familywise

error rate of $\alpha = .05$, and for parent-report mental health variables .01.

Table 1

Variable Groupings to Control for Familywise Type I Error

Self-Report Mental Health Variables	Self-Report Self-Concept Variables	Parent-Report Mental Health Variables
• depressive symptoms • anxiety symptoms	• peer relations self-concept • general self-worth	• depressive symptoms • anxiety symptoms • somatic symptoms

Effect sizes for chi-square tests are reported using the phi coefficient (2 x 2

table) and Cramer's V for larger tables, and using eta-squared for planned

comparisons and ANOVA (Bryman & Cramer, 1994). Effect sizes are interpreted

using the descriptors and definitions of Cohen (1988).

2.3.4.3 Power. Sample size was pre-determined by a larger research project of

which this study was a part. To determine whether power was adequate for the

analyses conducted power calculations were conducted. For primary analyses

employing chi-square tests with 1 degree-of-freedom and an α of .05, 87 participants

are required to detect a 'medium' effect size for power of .80 and for analyses with 2

degrees-of-freedom, 107 participants. For ANOVA, 64 cases in each of the two

conditions (frequently and non-frequently bullied), would have 80% power at a

significance level of 0.05 to detect a 'medium' effect size (J. Cohen, 1988, 1992).

Sample sizes of all primary analyses were substantially larger than that

required to detect a medium effect. The sample size was driven by the larger

research project of which this study was a part and the need to identify a sufficient

number of frequently bullied students to comprise the sample of Study 2. Effect

sizes are provided to supplement interpretation of significant findings, particularly important in the case of small effects that may be detected due to the power provided by the large sample size.

2.4 Results

2.4.1 Data Screening

In three cases, students recorded their age as their school year, which was recoded to missing. In five cases parents reported their number of children as zero, which was recoded to one.

2.4.1.1 Pattern responding. Seven (0.4%) cases were removed for pattern responding from the self-report anxiety symptoms variable. In five (0.2%) cases all responses were "*yes*", in one (0.05%) all "*no*" and in two (0.1%) responses were alternating. Three (0.1%) cases were removed from the self-report peer relations self-concept and general self-worth variables. Two (0.1%) of these were for all responses being "*true*" and one (0.05%) for all responses being "*sometimes false/sometimes true*". One case (0.07%) was removed from the parent-report depression, anxiety and somatic symptoms variables as all responses were "*never*".

2.4.1.2 Missing values. No variable had greater than 5% of cases missing. Due to too many missing items, missing value replacement to create total scale scores was not conducted for the victimisation frequency scale in 45 (2.3%) cases, CDI in 6 (0.3%) cases, RCMAS Lie in 21 (1.1%) cases, RCMAS Anxiety in 10 (1.1%) cases, SDQ Peer Relations Self-concept in 15 (0.8%) cases, SDQ General Self-worth in 15 (0.8%) cases, BASC Depression in 20 (1.0%) cases, BASC Anxiety in 22 (1.1%) cases and BASC Somatic in 19 (1.0%) cases. Due to the small number of cases identified for deletion, further investigation of these cases was not

conducted. Analyses conducted with and without missing data replacement demonstrated no differences in research conclusions. Therefore, results of the data set employing missing data replacement are reported.

2.4.2 Assumption Testing

For chi-square tests, assumptions of random sampling and independence of observations were both met by the research design. The Fisher's exact test is reported for analyses with an expected cell frequency of less than five (Siegel & Castellan, 1988).

For planned comparisons and ANOVA, assumptions of scale of measurement and random sampling were addressed by the measures selected and the research design. There was potential violation of the assumption of independence due to the testing of students in class groups. To reduce the probability of violating this assumption, students completed the questionnaire under examination like conditions with teacher support for behaviour management.

Unequal sample sizes were managed by weighting cells as the sample sizes were meaningful, representing population sizes for the groups (Tabachnick & Fidell, 2001b). Social desirability showed negative skewness and victimisation frequency positive skewness in all frequently bullied status nomination type groups. Within frequently bullied status groups (frequently bullied; non-frequently bullied), self-report depressive and anxiety symptoms were positively skewed, with peer relations self-concept and general self-worth negatively skewed. Parent-report depressive, anxiety and somatic symptoms were positively skewed. These distributions of raw scores reflect the distributions expected of the population on these measures. In the case of fixed-effects F-tests, provided groups are skewed in the same direction,

skewed populations have very little effect on either significance level or power (J.

Stevens, 1992). However, to increase confidence in the findings, non-parametric

Mann-Whitney U tests were also conducted. These demonstrated equivalent results

to the parametric tests.

Fmax values less than 3, ranging 1.11 to 2.83, suggested homogeneity of group

variances for all analyses (Keppel, 1991; Tabachnick & Fidell, 2001b). However, as

Fmax is affected by departures of normality, Welch tests were also calculated

(Keppel). As the results were the same, *F*-tests are reported to facilitate comparisons

with other research.

Boxplots showed no univariate outliers in social desirability within frequently

bullied status nomination type groups. Univariate outliers in victimisation frequency

within frequently bullied status nomination type groups, and self- and parent-report

psychological health variables within frequently bullied status groups, were

inspected and questionnaire responses considered valid. Analysis was conducted

with and without univariate and multivariate outliers. As there were no differences

in research conclusions, results of the complete data set are reported.

2.4.3 Preliminary Analyses

2.4.3.1 Total sample means. Table 2 shows total sample means for comparison

with normative data.

Table 2

Means and Standard Deviations for the Total Sample.

	Total			Girls			Boys		
	n	*M*	*SD*	*n*	*M*	*SD*	*n*	*M*	*SD*
CDI	1962	9.50	7.71						
RCMAS									
Total Anxiety				970	11.72	6.95	980	9.64	6.54
Lie Scale				962	5.79	2.09	977	5.12	2.37
SDQ									
Peer Relations	1950	31.09	7.29						
General Self	1950	33.07	6.73						

2.4.3.2 Symptom monitoring. One-hundred and twenty-one (6.1%) students were identified as having elevated self-report depressive and anxiety symptoms. Of this number, 53.7% (*n* = 65) were girls and 46.3% (*n* = 56) boys. There were no sex differences in the proportion of students identified (χ^2 (1, *N* = 1968) = 0.711, *p* = .399, ϕ^2 = .0004). Self-reported elevated symptoms were discussed with 18.2% (*n* = 22) of parents who contacted the researcher after receiving a notification letter.

2.4.3.3 Frequently bullied and non-frequently bullied group differences. Table 3 presents differences on demographic variables between frequently bullied and non-frequently bullied students for self- and parent-report. Both the student, *t*(1964) = 2.353, *p* = .019, η^2 = .003, and parent, *t*(1483) = 2.180, *p* = .029, η^2 = .003, frequently bullied samples demonstrated significantly greater socio-economic disadvantage. The effect size however, was small. The proportion of fathers participating in the frequently bullied sample was significantly less than that in the

non-frequently bullied sample, χ^2 (1, $N = 1451$) = 5.598, $p = .024$, $\phi^2 = .004$, again, the effect size was small. As the development of normative data for the BASC showed that fathers' ratings did not differ systematically from those of mothers' on the scales of interest, this difference should not confound group comparisons of parent-report outcome variables (C. R. Reynolds & Kamphaus, 1992). There was also a significant, but relatively weak difference between the groups on parent-report of country of birth, χ^2 (5, $N = 1461$) = 13.154, $p = .022$, $V = .095$.

A greater proportion of parents of frequently bullied students participated compared to non-frequently bullied students (80.1%, $n = 257$ versus 74.7%, $n = 1228$; χ^2(1, $N = 1966$) = 3.969, $p = .046$, $\phi^2 = .002$). Students of parents who did not participate came from areas of greater socio-economic disadvantage ($M_{\text{non-participating}} = 1005.99$, $SD = 63.54$, $n = 483$; $M_{\text{participating}} = 1015.41$, $SD = 63.76$, $n = 1485$; $t(1966) = -2.822$, $p = .005$, $\eta^2 = .004$) and reported significantly more depressive symptoms ($M_{\text{non-participating}} = 10.18$, $SD = 7.69$, $n = 480$; $M_{\text{participating}} = 9.28$, $SD = 7.71$, $n = 1482$; $t(1960) = 2.206$, $p = .027$, $\eta^2 = .002$). All effects were small.

Table 3

Group Differences on Self- and Parent-Report Demographic Data Across Frequently

Bullied and Non-Frequently Bullied Students

	Frequently bullied (Student n = 321) (Parent n = 257)		Non-frequently bullied (Student n = 1645) (Parent n = 1228)		
	M (SD)	*n* (%)	*M (SD)*	*n* (%)	Group difference[a]
Student					
Age	8.61 (0.56)	316 (98.4)	8.56 (0.55)	1636 (99.5)	$t(394.585)$ = -1.562
Sex					
Female		157 (48.9)		819 (49.8)	
Male		164 (51.1)		826 (50.2)	$\chi^2(1)$ = 0.051
IRSED	1005.50 (62.17)	321 (100.0)	1014.66 (64.05)	1645 (100.0)	$t(1964)$ = 2.353[**]
School size	643.49 (170.78)	321 (100.0)	647.3 (179.95)	1645 (100.0)	$t(469.391)$ = 0.360
Parent[b]					
Age					
Under 25-29		27 (8.4)		91 (5.5)	
30-34		68 (21.2)		275 (16.7)	
35-39		92 (28.7)		464 (28.2)	
40-44		52 (16.2)		294 (17.9)	
45+		14 (4.4)		89 (5.4)	$\chi^2(4)$ = 6.566
Not stated		68 (21.2)		432 (26.3)	
Relationship to child					
Mother		234 (72.9)		1057 (64.3)	
Father		17 (5.3)		143 (8.7)	
Other		2 (0.6)		15 (0.9)	[c]$\chi^2(1)$ = 5.086[**]
Not stated		68 (21.2)		430 (26.1)	
Education					
Year 10 or lower		72 (22.4)		318 (19.3)	
Year 11		27 (8.4)		139 (8.4)	
Year 12		31 (9.7)		165 (10.0)	
Trade/College		57 (17.8)		300 (18.2)	
University		51 (15.9)		224 (13.6)	
Other		15 (4.7)		69 (4.2)	$\chi^2(5)$ = 1.554
Not stated		68 (21.2)		430 (26.1)	
IRSED	1007.54 (62.15)	257 (80.1)	1017.06 (64.00)	1228 (74.7)	$t(1483)$ = 2.180[**]
Country of birth					
Australia		161 (50.2)		743 (45.2)	
New Zealand		17 (5.3)		42 (2.6)	
United Kingdom & Ireland		51 (15.9)		280 (17.0)	
Europe		4 (1.2)		39 (2.4)	
Asia		7 (2.2)		72 (4.4)	
Other		10 (3.1)		35 (2.1)	$\chi^2(5)$ = 13.154[**]
Not stated		71 (22.1)		434 (26.4)	

Note. IRSED = Index of Relative Socio-Economic Disadvantage.

[a]Analyses do not include the category 'not stated'. [b]'Not Stated' includes parents who did not participate. [c]Only the categories of 'mother' and 'father' were included in the analysis due to insufficient frequency in the 'other' category.

[**]$p < .05$.

2.4.4 Primary Analyses

2.4.4.1 Prevalence of frequent victimisation. A valid response to the single-item frequency of victimisation measure was provided by 99.7% ($N = 1963$) of students and 74.2% ($N = 1460$) of parents. Table 4 shows self- and parent-report of victimisation for each response choice.

Table 4

Frequency of Victimisation by Self- and Parent-Report

Frequency	All		Girls		Boys	
	Student[a]	Parent[b]	Student[a]	Parent[b]	Student[a]	Parent[b]
	% (*n*)	% (*n*)	% (*n*)	% (*n*)	% (*n*)	% (*n*)
Almost every day	3.6 (71)	0.3 (5)	2.6 (25)	0.3 (2)	4.7 (46)	0.4 (3)
Most days	4.1 (80)	2.6 (38)	4.8 (47)	2.4 (18)	3.3 (33)	2.8 (20)
About once a week	4.6 (90)	6.3 (92)	4.3 (42)	5.8 (43)	4.9 (48)	6.8 (49)
Every few weeks	4.0 (79)	6.1 (89)	3.1 (30)	6.3 (47)	5.0 (49)	5.8 (42)
Only once or twice	24.5 (482)	32.0 (468)	26.9 (263)	31.4 (233)	22.2 (219)	32.7 (235)
Not at all	59.1 (1161)	52.6 (768)	58.3 (569)	53.7 (398)	60.0 (592)	51.5 (370)

[a]Values represent response to the question 'Last term, how often did another student or group of students bully you?'. $N = 1963$.

[b]Values represent response to the question 'To the best of your knowledge, how often last term was your year 4 child bullied by another student or group of students?'. $N = 1460$.

Defining frequent victimisation as *"about once a week"* or more, self-report identified 12.3% ($n = 241$) of students as frequently bullied (95% confidence interval[2]: 10.9% - 13.2%) compared to 9.2% ($n = 135$) by parent-report (95% confidence interval: 7.9% - 10.6%). Combining self- and parent-report, 16.3% ($n =$

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[2] Confidence intervals are reported as these statistics are estimating underlying population parameters.

321) of students were identified as frequently bullied by self- and/or parent-report

(95% confidence interval: 15.0% - 17.2%). Figure 1 shows report of frequent

victimisation.
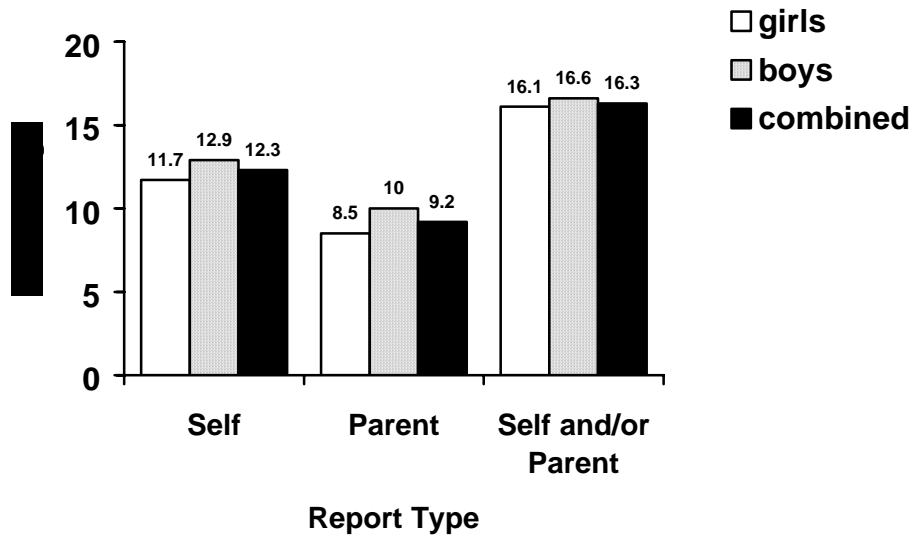
Figure 1. Percentage of students who are frequently bullied according to report type
and sex.

2.4.4.2 Informant Agreement and social desirability. Both self- and parent-

report of frequently bullied status was available for 74.1% (*n* = 1457) of students. A

tetrachoric correlation coefficient of .55, *p* = .000, indicated moderate cross-

informant agreement. The proportion of overall agreement between students' and

parents' ratings of frequently bullied status was 86.4%.   However, investigation of

the proportions of agreement specific to each category revealed high agreement in

the classification of students as not frequently bullied (92.4%), but low agreement in

the classification of students classified as frequently bullied (35.7%). The proportion

of students identified as frequently bullied by student-report, not parent, was

significantly greater than the proportion of students identified by parent-report, not

student, χ^2 (1, *N* = 1457) = 7.293, *p* = .008, *V* = .285. Table 5 shows the number and

percentage of students for which frequently bullied status was identified by both 'self- and parent-report', 'self-report only' and 'parent-report only'. Students were identified as frequently bullied by 'self- and parent-report' in 21.7% ($n = 55$) of cases. Taking this category into consideration, 68.3% of frequently bullied students were identified by self-report and 53.3% by parent-report.

Table 5

Self- and Parent-Report of Frequent Victimisation and Differences in Social Conformity and Victimisation Frequency

Report type	n^a	% of frequently bullied sample	Social desirability			Victimisation frequency		
			n	M	SD	n	M	SD
Frequently bullied								
Self and parent	55	21.7	53	4.50_a	2.63	53	6.20_a	3.61
Self only	118	46.6	117	4.94_a	2.50	112	5.66_a	3.09
Parent only	80	31.6	80	5.95_b	2.02	79	2.84_b	3.31
Non-frequently bullied								
Self and parent	1204		1191	5.50	2.22	1180	1.51_a	2.14

Note. Means with different subscripts differ significantly at $p < .01$.

[a]Only students for which a self and parent questionnaire were completed are included.

The mean lie score for students identified as frequently bullied by 'parent-report only' was significantly greater than that of students identified by 'self- and parent-report', $t(1437) = 3.647$, $p = .000$, $\eta^2 = .009$ or 'self-report only', $t(1437) = 3.114$, $p = .002$, $\eta^2 = .007$, although both effects were small. There was no significant difference between the mean lie score of students identified by 'parent-

report only' and those identified as not frequently bullied, $t(1437) = 1.752$, $p = .080$, $\eta^2 = .002$.

The mean victimisation frequency for students identified as frequently bullied by 'parent-report only' was significantly lower than that of students identified by 'self- and parent-report', $t(1420) = -7.964$, $p = .000$, $\eta^2 = .043$ or 'self-report only', $t(1420) = -8.086$, $p = .000$, $\eta^2 = .044$. However, it was significantly higher than the mean victimisation frequency of students identified as not frequently bullied, $t(1420) = 4.820$, $p = .000$, $\eta^2 = .016$. All effects were small. Table 4 shows means and standard deviations for social desirability and victimisation frequency according to report type.

2.4.4.3 Frequent victimisation and sex differences. Valid responses for both frequency of victimisation and student sex were provided by 99.7% ($N = 1963$) of students and 73.8% ($N = 1460$) of parents. Self- and parent-report of frequency of victimisation by sex is shown in Table 3. When the two types of nomination are considered separately, 11.7% of girls ($n = 114$) and 12.9% of boys ($n = 127$) were identified as frequently bullied by self-report compared to 8.5% of girls ($n = 63$) and 10.0% of boys ($n = 72$) by parent-report. There was no significant relationship between frequently bullied status and sex for self- or parent-report, χ^2 (1, $N = 1963$) $= 0.536$, $p = .464$, $\phi^2 = .0003$ and χ^2 (1, $N = 1460$) $= 0.822$, $p = .365$, $\phi^2 = .0007$, respectively. Combining self- and parent-report, 16.1% of girls ($n = 157$) and 16.6% ($n = 164$) of boys were identified as frequently bullied. Again, there was no significant relationship between frequently bullied status and sex, χ^2 (1, $N = 1966$) $= 0.051$, $p = .821$, $\phi^2 = .00004$. Figure 1 illustrates the prevalence of frequent victimisation according to report type and sex.

2.4.4.4 Frequent victimisation and bullying. Bullying others, ranging from "*only once or twice*" to "*almost every day*" in the last term, was reported by 24.4% (*n* = 58) of frequently bullied students. According to parent-report, 22.9% (*n* = 30) of frequently bullied students also bullied others, ranging from "*only once or twice*" to "*almost every day*" in the last term. Valid responses on both the frequency of victimisation and bullying measures were available for 99.3% (*n* = 1953) of students and 73.0% (*n* = 1436) of parents. Frequent victimisation and frequent bullying was reported by 0.5% (*n* = 10) of students and 0.4% (*n* = 6) of parents, constituting 4.1% of self-reported and 4.6% of parent-reported frequently victimised students. Combining both types of report, the victimisation and bullying status of 99.7% (*n* = 1962) of students was obtainable, with 0.8% (*n* = 16) of students identified as frequently bullied and frequently bullying others by self- and/or parent-report, constituting 5.0% of the frequently victimised sample, compared with 15.5% of the total sample identified as bullied only.

When the two types of report are considered separately, 0.5% of girls (*n* = 5) and 0.5% of boys (*n* = 5) were identified as frequently bullied and frequently bullying others by self-report, compared to 0.5% of girls (*n* = 4) and 0.3% of boys (*n* = 2) by parent-report. There was no significant relationship between status and sex for self- or parent-report, χ^2 (1, *N* = 1953) = 0.000, Fisher's exact test *p* = 1.00, ϕ^2 = .000 and χ^2 (1, *N* = 1436) = 0.138, Fisher's exact test *p* = .687, ϕ^2 = .0004, respectively. When report types are combined, 0.9% of girls (*n* = 9) and 0.7% (*n* = 7) of boys are identified as frequently bullied and frequently bullying others, by self- and/or parent-report. There was no significant relationship between bully/victim status and sex, χ^2 (1, *N* = 1962) = 0.074, *p* = .786, ϕ^2 = .014.

2.4.4.5 Bullying type frequency. All seven bullying type items were responded to by 91.0% (*n* = 292) of frequently bullied students. Table 6 shows the frequency with which different types of bullying were reported. In order of frequency, being called mean and hurtful names was reported to occur "*sometimes*" or "*lots of times*" by 65.1% of frequently bullied students, being made fun of and teased in a hurtful way by 64.4%; being ignored, not allowed to join in, or left out on purpose by 59.6%; having lies or nasty stories spread about oneself by 54.8%; being hit, kicked or pushed around by 53.4%; being made afraid of getting hurt by 46.9%; and having money or other things taken away or broken by 32.9%.

Table 6

Bullying Type Frequency Reported by Frequently Bullied Students

	Never	Sometimes	Lots of times
Bullying Type	% (*n*)	% (*n*)	% (*n*)
Made fun of and teased in a hurtful way	35.6 (104)	42.5 (124)	21.9 (64)
Called mean and hurtful names	34.9 (102)	38.4 (112)	26.7 (78)
Ignored, not allowed to join in, or left out on purpose	40.4 (118)	36.3 (106)	23.3 (68)
Hit kicked or pushed around	46.6 (136)	37.0 (108)	16.4 (48)
Lies or nasty stories spread	45.2 (132)	27.7 (81)	27.1 (79)
Money or other things taken	67.1 (196)	22.3 (65)	10.6 (31)
Made afraid of getting hurt	53.1 (155)	26.0 (76)	20.9 (61)

Note. N = 292.

Table 7 shows chi-square values for the analysis of sex differences in report of bullying type. Weak but significant relationships between frequency and sex were

found for physical bullying (hit, kicked or pushed around), χ^2 (2, $N = 315$) = 23.615,

$p = .000$, $V = .274$ and having money or other things taken away or broken, χ^2 (2, N

= 306) = 7.574, $p = .023$, $V = .157$, with a greater proportion of boys reporting being

bullied in these ways.

Table 7

Bullying Type Sex Differences Reported by Frequently Bullied Students

Bullying Type	N	Never % (*n*)	Sometimes % (*n*)	Lots of times % (*n*)	χ^2	V
Made fun of and teased in a hurtful way	310					
Girls	154	33.8 (52)	48.7 (75)	17.5 (27)		
Boys	156	35.3 (55)	37.8 (59)	26.9 (42)	5.243	.130
Called mean and hurtful names	309					
Girls	153	34.0 (52)	42.5 (65)	23.5 (36)		
Boys	156	35.3 (55)	35.9 (56)	28.8 (45)	1.725	.075
Ignored, not allowed to join in, or left out on purpose	311					
Girls	155	36.1 (56)	38.1 (59)	25.8 (40)		
Boys	156	44.9 (70)	33.3 (52)	21.8 (34)	2.480	.089
Hit kicked or pushed around	315					
Girls	154	57.8 (89)	29.9 (46)	12.3 (19)		
Boys	161	31.1 (50)	44.1 (71)	24.8 (40)	23.615[***]	.274
Lies or nasty stories spread	304					
Girls	150	41.3 (62)	28.0 (42)	30.7 (46)		
Boys	154	48.7 (75)	27.3 (42)	24.0 (37)	2.157	.084
Money or other things taken	306					
Girls	152	69.7 (106)	24.3 (37)	5.9 (9)		
Boys	154	64.3 (99)	20.1 (31)	15.6 (24)	7.574[**]	.157
Made afraid of getting hurt	308					
Girls	154	49.4 (76)	29.2 (45)	21.4 (33)		
Boys	154	53.2 (82)	25.3 (39)	21.4 (33)	0.656	.046

[**]$p < .05$. [***]$p < .01$.

2.4.4.6 Psychological health.

Table 8 shows means, standard deviations, and group differences on self- and parent-report of psychological health variables.

Table 8

Means (Standard Deviations) and Group Differences in the Self- and Parent-Report Psychological Health of Frequently Bullied and Non-Frequently Bullied Students

	Frequently bullied		Non-frequently bullied	
	n	*M (SD)*	*n*	*M (SD)*
Self-report				
Depressive symptoms	320	15.09 (9.91)	1640	8.40 (6.68)****
Anxiety symptoms	319	14.60 (6.90)	1629	9.91 (6.54)****
Peer relations self-concept	316	27.37 (9.02)	1632	31.82 (6.66)****
General self-worth	316	30.68 (7.78)	1632	33.55 (6.38)****
Parent-report				
Depressive symptoms	256	11.08 (5.10)	1208	7.81 (4.08)****
Anxiety symptoms	255	10.95 (4.99)	1207	8.94 (4.29)****
Somatic symptoms	256	4.81 (4.15)	1209	4.01 (3.33)***

***$p < .01$. ****$p < .001$.

Frequently bullied students reported significantly more depressive, $F(1, 1958) = 224.833$, $p = .000$, $\eta^2 = .103$, and anxiety symptoms, $F(1, 1946) = 134.747$, $p = .000$, $\eta^2 = .065$, than non-frequently bullied students, and significantly lower peer relations self-concept, $F(1, 1946) = 103.874$, $p = .000$, $\eta^2 = .051$, and general self-worth, $F(1, 1946) = 49.837$, $p = .000$, $\eta^2 = .025$. A similar pattern emerged for

parent-report, with parents of frequently bullied students reporting significantly more depressive symptoms, $F(1, 1462) = 123.115$, $p = .000$, $\eta^2 = .078$, anxiety symptoms, $F(1, 1460) = 43.861$, $p = .000$, $\eta^2 = .029$, and somatic symptoms, $F(1, 1463) = 11.034$, $p = .001$, $\eta^2 = .007$. Frequently bullied status accounted for 10.3% of the variability in self-report depressive symptoms and 6.5% in anxiety symptoms, and 7.8% of the variability in parent-report depressive symptoms, demonstrating medium effects. Small effects were observed between frequently bullied status and the remaining variables, 5.1% of variance accounted for in peer relations self-concept, 2.5% in general self-worth, and for parent-report, 2.9% in anxiety symptoms and 0.7% in somatic symptoms.

A significantly greater proportion of frequently bullied students reported symptom severity in the clinical range on all measures of psychological health, for both self- and parent-report, in comparison with students not frequently bullied. A medium effect was revealed for depressive symptoms, with small effects for all other analyses. Table 9 shows the proportion of students scoring within the clinical range for self- and parent-report depressive and anxiety symptoms and parent-report somatic symptoms and chi-square values for group differences. For depression and anxiety there were almost four times more frequently bullied students and parents reporting clinical levels of symptoms compared to non-bullied students.

Table 9

Clinical Range Self- and Parent-Report Psychological Health Symptoms of

Frequently Bullied and Non-Frequently Bullied Students

	Frequently bullied	Non-frequently bullied			
	% (*n*)	% (*n*)	χ^2	*p*	ϕ^2
Self-report					
Depressive symptoms					
Clinical range	29.4(94)	7.4 (121)			
Not clinical range	70.6 (226)	92.6 (1519)	130.417	.000	.068
Anxiety symptoms					
Clinical range	19.7 (63)	5.3 (86)			
Not clinical range	80.3 (256)	94.7 (1543)	77.035	.000	.040
Parent-report					
Depressive symptoms					
Clinical range	22.3 (57)	6.1 (74)			
Not clinical range	77.7 (199)	93.9 (1134)	65.571	.000	.046
Anxiety symptoms					
Clinical range	7.1 (18)	2.1 (25)			
Not clinical range	92.9 (237)	97.9 (1182)	16.640	.000	.013
Somatic symptoms					
Clinical range	7.8 (20)	4.2 (51)			
Not clinical range	92.2 (236)	95.8 (1158)	5.164	.023	.004

2.5 Discussion

This study aimed to identify the nature and point prevalence of bullying in a Year 4 cohort using multiple-informants, a reliable and valid measure of victimisation that included physical, verbal, indirect and relational forms of bullying, and a large, randomly selected and stratified cross-sectional sample. It also aimed to identify frequently bullied students and to confirm with this group the psychological health concomitants of victimisation identified in previous research.

2.5.1 Comparisons with Normative Data

Due to randomised selection and sample size the data provided can be considered normative for Australian children aged 8 years. On the CDI, the mean score for the total sample was slightly lower than that of the normative sample reported in the CDI manual (Kovacs, 1992) and also lower than normative data collected from a relatively small (*N* = 85) sample of Year 4 Australian children (Spence & Milne, 1987). On the RCMAS, the mean Total Anxiety scores obtained for males and females were lower than those of age 8 standardisation data reported by gender in the RCMAS manual (C. R. Reynolds & Richmond, 1985). The means obtained are closer to those reported by gender for Australian students aged 7-10 years (Dadds et al., 1998). The mean Lie Scale scores for males and females were slightly higher than those of age 8 standardisation data and also higher than those reported for Australian students aged 7-10 years (Dadds et al.). On the SDQ-1, the mean Peer Relations score obtained for the total sample is comparable to that reported in the SDQ-1 manual for the Years 2-6 normative sample, as is the mean General Self score (Marsh, 1990).

2.5.2 Prevalence of Frequent Victimisation

Being bullied by peers about once a week or more was reported by 12.3% of students, compared to 9.2% by parent-report. It was expected that fewer children would be identified by parent-report, as children often do not tell others they are being bullied (Kumpulainen et al., 1999; Rigby, 1997b; Whitney & Smith, 1993) and lower rates of parent-report have been reported previously (Kumpulainen et al., 1998). The prevalence according to self-report is similar to that reported in the US for grade 6 students (Nansel et al., 2001), however it is higher than figures reported

in other countries using single-informants and similar definitions, time periods and response categories (Boulton & Underwood, 1992; Pepler et al., 1993; Solberg & Olweus, 2003; Whitney & Smith, 1993). In light of the general age decline in self-reported peer victimisation that has been consistently reported (Salmivalli, 2002), a reason for this discrepancy may be the younger age of students investigated here. Whilst the comparison studies were of primary or junior/middle students, this study only investigated Year 4.

In Australia, Rigby (1997b) has reported that one in six school children are bullied at least once week. This figure is higher than that found here, although similar to the 16.3% of students identified as frequently bullied by self- and/or parent-report. A higher rate of prevalence when multiple informants are used has also been found by others (Graham et al., 2003; Sourander et al., 2000). In a primary school class of 25-30 children, this proportion translates into 4-5 students being bullied about once a week or more often.

Frequently bullied students were more likely to reside or go to school in areas of greater socio-economic disadvantage. This finding is congruent with previous research that has shown more teacher-reported (Stephenson & Smith, 1989) and self-reported involvement in bullying in schools in areas of greater social disadvantage (Whitney & Smith, 1993). Although the finding in the present study was significant, the effect size was small, with less than one per cent of variance in socio-economic status explained by frequently bullied status. Similarly, effects reported by others have also been noted to be small (Whitney & Smith; Wolke et al., 2001), suggesting that this finding does not warrant the directing of services or intervention efforts to schools based on socio-economic factors.

2.5.3 Informant Agreement and Validity of Frequently Bullied Status

The correlation between self-and parent-reported frequently bullied status indicated moderate cross-informant agreement. However, while the proportion of overall agreement was high, the proportions of agreement specific to each category revealed high agreement in the classification of students as not frequently bullied but low agreement in the classification of students as frequently bullied. A greater proportion of students were identified as frequently bullied by self-report. This was expected as whilst many frequently bullied students do tell their parents about their victimisation experiences, a substantial number do not (Rigby, 1997b; Whitney & Smith, 1993).

For cases in which both students and their parents reported on victimisation, about one-fifth were identified as frequently bullied by both informants. Nearly one-third were identified by parent-report only and would have been missed if only self-report data were collected. Of concern, is whether these parents are simply over-reporting their child's involvement in peer victimisation. In support, these students reported significantly lower victimisation frequency than self identified students. However, motivation to present a socially desirable view of one's self may manifest as under-reporting of being bullied by peers. Support was found for this hypothesis in that students identified by parent-report only showed greater social desirability on a scale assessing this characteristic. This suggests that these students did not self-report frequent bullying when asked directly or score as highly as self identified students on victimisation frequency because of their tendency to respond in a socially desirable manner. Moreover, these students scored significantly higher on victimisation frequency than students identified as not frequently bullied.

These findings support the argument that these students are different to non-frequently bullied students in frequency of victimisation, thus validating their inclusion in the frequently bullied sub-sample. Similarly, Neary and Joseph (1994) found that peer nominated students scored lower on a peer victimisation scale than those self identified, however, they were distinguishable from not bullied students by higher scores on the measure. In the current study, these students would not have been identified without a multi-informant assessment, as 5.5% of the total sample and 31.6% of the frequently bullied sample were identified by parent-report only.

2.5.4 Frequent Victimisation and Bullying

Less than five percent of frequently bullied students reported bullying others frequently. In the context of the total sample, students who were frequently bullied and frequently bullied others constituted less than one percent, compared with frequent victims who comprised 15.5%. Median prevalence estimates for students who are both bullied and bully others is approximately 6%, with a range of 0.5% to 29% (Hanish & Guerra, 2004), suggesting the figure reported here is low. These estimates are influenced by measurement technique and classification criteria. In this study classification criteria were stringent, requiring that the student be both bullied and bully others weekly. When this criteria was relaxed to include bullying others once or twice, nearly a quarter of frequently bullied students reported that they had done so, with a similar proportion according to parent report. This suggests that many frequently bullied students bully others at some time, but very few do so frequently.

2.5.5 Bullying Type

As hypothesised, the most common type of bullying reported by frequently victimised students was verbal, in the forms of being called mean and hurtful names and being made fun of and teased in a hurtful way, supporting previous research that has identified this form of bullying as most common (Ahmad & Smith, 1994; Boulton & Underwood, 1992; Pateraki & Houndoumadi, 2001; Perry et al., 1988; Rigby, 1997b, 1998b; Whitney & Smith, 1993). Verbal bullying was followed by relational (being ignored, not allowed to join in or left out) and then about equally by indirect (having lies or nasty stories spread) and physical (being hit, kicked or pushed around), which were followed by being threatened. The least reported type of bullying was having money or other things taken away or broken.

In another Australian study similar results were found in a universal sample (Rigby, 1997b). Students aged 8-12 years reported verbal bullying (being teased and called hurtful names) as most common, followed by relational (left out), physical (hit, kicked) and being threatened. Spreading rumours and having ones belongings taken or damaged were not included in this study. Whitney and Smith (1993) also reported being called names as the most common form of bullying experienced by a universal sample of students aged 8-11 years in the U.K. However, being physically hit and threatened were more common than having rumours spread. Although second to verbal bullying in the Australian research, relational bullying in the form of being excluded, was one of the least reported forms. The particular item used by Whitney and Smith was "no one would talk to me". Since bullied students do have some friends (Boulton & Smith, 1994; Goldbaum et al., 2003; Kochenderfer & Ladd, 1997), the wording of this item to include all students perpetrating the behaviour toward the target may have resulted in fewer reports. The present study was

congruent with Whitney and Smith (1993) in finding that having one's belongings taken was the least experienced form of bullying. These results suggest that relational and indirect forms of bullying feature prominently in the experience of frequently victimised students in an Australian sample at age 8-9 years.

2.5.6 Sex Differences in Prevalence and Type

While some research has suggested sex differences in the experience of frequent victimisation, others have argued that when a measure that includes all forms of bullying is employed few sex differences emerge (Ahmad & Smith, 1994; Roland, 1989). The results of the current study support the later argument, with no significant differences in the proportions of boys and girls identified as frequently bullied according to self- or parent-report.

As expected, sex differences emerged in the type of bullying experienced by frequently bullied students which were similar to those reported in samples using more relaxed cut-offs for identifying victimised students (Ahmad & Smith, 1994; Borg, 1999; Crick & Bigbee, 1998; Olweus, 1991; Pateraki & Houndoumadi, 2001; Rigby, 1997b; Rivers & Smith, 1994; Roland, 1989; Whitney & Smith, 1993; Woods & Wolke, 2003). While girls and boys experienced verbal bullying about equally, a greater proportion of boys reported being bullied physically and having money or other things taken away or broken. There was no significant difference found for being threatened, which is inconsistent with a number of studies (Ahmad & Smith; Borg; Rigby; Whitney & Smith) but consist with Rivers and Smith.

The trend was for girls to report being ignored, not allowed to join in or left out on purpose, or having lies or nasty stories spread about them more than boys. The difference was not significant however, supporting the findings of Woods and Wolke

(2003), Wolke et al. (2000) and Ahmad and Smith (1994). This may be due to the younger age of students involved in this study, with research showing a large increase in indirect aggression at about 11 years of age, especially among girls (Bjorkqvist et al., 1992).

Although boys reported somewhat lower levels of involvement in relational forms of bullying, these differences were not significant and boys reported being victimised in these ways at a level that clearly indicates that these forms of bullying are experienced by many frequently bullied boys at this age. It is unclear whether this finding is due to the age of the students involved or the targeted nature of the sample. It may be that frequently bullied students, for whom victimisation is a common experience, may be at the receiving end of broader range of bullying than less victimised children. However, it is clear that all forms of bullying can be experienced by boys and girls alike, with over 50% of frequently bullied boys reported being excluded or having rumours spread, and over 40% of girls reporting being the target of physical aggression. Teachers and school staff readily grasp the notion that boys are physically victimised and that girls use exclusion and spreading of rumours to bully others. If our aim is to sensitise teachers to the identification of bullying and to responding to it in a validating and empathic manner, then it is important to highlight that despite sex differences, there is also commonality, particularly for frequently bullied students.

2.5.7 Psychological Health

Frequently bullied students reported more depressive and anxiety symptoms, and lower self-perceptions of their peer relationships and general self-worth than non-frequently bullied students. Similarly, parents of frequently bullied students reported more depressive, anxiety and somatic symptoms in their children. These

results confirm psychological health concomitants of victimisation identified in previous research and show that while peer victimisation is a social experience, suffering is not limited to the social domain, but also related to primarily psychological forms of maladjustment, such as, depression, generalised anxiety and global self-concept.

The percentage of shared variance between victimisation and measures of psychosocial adjustment were similar to those reported in the meta-analysis of Hawker and Boulton (2000) across studies which avoided shared method variance. Depression shared the most variance with victimisation, consistent across self- and parent-report. The same finding led Hawker and Boulton to question whether students who are bullied are "more strongly characterised by feelings of loneliness and dysphoria" (p. 452) than anxiety and low self-esteem. Bullied children are often described as anxious, insecure, and as having low self-esteem, they have not been characterised as sad and depressed in such a widespread manner (Hawker & Boulton). The consistency in the finding reported here suggests that this view requires modification.

In comparison with non-frequently bullied students, a greater proportion of frequently bullied students reported symptoms of depression and anxiety in the clinical ranges. Reports of parents supported these findings and also revealed a greater proportion of frequently bullied students experienced clinical levels of somatic complaints. In a Finnish study of the same age group, using the same measure and cut-off for depressive symptoms, 17.3% of bullied students reported symptom severity in the clinical range (Kumpulainen et al., 1999), compared to 29.5% in the current study. It appears that in the present study a greater proportion of victimised students are suffering.

The group investigated here was comprised of frequently bullied students, in comparison, the previous study employed a less extreme cut-off for identifying victimised students. Given previous research has shown that greater victimisation is associated with more symptoms (Austin & Joseph, 1996; Callaghan & Joseph, 1995; Slee, 1995b), this may explain the higher level of distress observed here. Another possibility is one of cultural differences. It may be that the culture in Finland, in comparison to Australia, is more supportive of students who are bullied in a way that provides a buffer to the development of more severe levels of psychological suffering. Further research into cross-national and cultural differences is required to say more about this hypothesis.

The results found in relation to anxiety are comparable to a study of victimised 11-13 year olds (Swearer et al., 2001). Using a different measure of self-report anxiety but the same clinical cut-off (t-score >65), 19.2% of victimised students were identified as clinically anxious compared to 19.7% of frequently bullied students in the present study. Furthermore, 5.9% of not involved students were identified as reporting symptoms in the clinical range, compared with 5.3% of not frequently bullied students here. In the comparison study students were identified as victims if they had been bullied at all in the last year, and therefore a more liberal sample was investigated than the targeted group of frequently bullied students identified here. The similar proportions of students identified as experiencing clinical levels of symptoms suggests that less frequently bullied students may be as anxious as those bullied frequently, although this conclusion is drawn with caution as the measure and age of the samples differ.

2.5.8 Strengths and Limitations

This study employed a large cross-sectional sample of Year 4 students from randomly selected and stratified schools. All schools approached to participate were recruited. This was most likely facilitated by the topical nature of the issue of bullying in the educational climate at the time. Furthermore, across recruited schools, 95.1% of available students and 71.8% of parents participated. These rates were achieved through employing a passive consent procedure, developing good relationships with schools and teachers that promoted perceived value in the evaluation process, employing effective follow-up strategies to support schools in obtaining completing questionnaires from parents, and parents' perceptions of the importance and relevance of the topic.

Due to random selection, stratification, a large sample and high response rates, the results of this study are highly generalisable to government, metropolitan schools in Australia. However, some limitations to this generalisabilty exist. More parents of frequently bullied students participated than non-frequently bullied, possibly the result of parents being motivated to participate due to their child's experiences. Furthermore, students of parents who did not participate came from areas of greater socio-economic disadvantage and reported significantly more depressive symptoms. This suggests that the parent results are less generalisable to students from areas of greater socio-economic disadvantage and those experiencing higher levels of depressive symptoms.

A further strength of this study is the limiting of shared method variance that results from victimisation and adjustment being measured by same informant (Hawker & Boulton, 2000). This was not removed completely, as students were identified as frequently bullied by self and/or parent report. Therefore, in the

analysis of self-report adjustment, some cases, those in which frequently bullied status was obtained from self-report only, will contain shared method variance, and vice versa for parent. However, the multi-informant methodology employed does limit the role shared method variance plays in explaining the observing effects. The meta-analysis of Hawker and Boulton (2000) was predominately based on studies which independently investigated different types of adjustment, used single-informants for assessing victimisation and contained shared method variance. Using a randomly selected single sample, multiple measures of adjustment and limiting shared method variance, the results presented here support the pattern of distress experienced by victimised students as suggested by previous research.

While this study provides valuable cross-sectional data using a multi-informant approach, it is limited to one year group. Furthermore, while a multi-informant approach was taken, multiple methods were not employed. Commendably, some researchers have demonstrated multi-method approaches utilising combinations of direct observation, diary, peer nomination, teacher checklists and self-report (Pellegrini & Long, 2002). Given the size of the current study, meeting the time and resource demands of a multi-method approach was not feasible. Furthermore, as this study formed the baseline in a group randomised controlled trial with follow-up, strategies that could be employed on multiple testing occasions with a large sample and minimal attrition were required.

A possible limitation of this study is the inclusion of students who are both frequently bullied and bully others within the victimised group. There is evidence that these students are a distinct group to those who are bullied only, those who bully others only and children that are not involved and are the most maladjusted of these groups (Andreou, 2001; Bowers et al., 1994; Kumpulainen et al., 1999; Mahady-

Wilton et al., 2000; Nansel et al., 2004; Perry et al., 1988; Salmivalli & Nieminen, 2002; Schwartz, 2002; Schwartz et al., 1997; Swearer et al., 2001). However, any possible confounding of including these students and their parents is limited by very few students being identified, less than one percent of the total student sample and 5.0% of the frequently victimised sample. This low rate of identification also meant that the sample was too small to draw any reasonable conclusions about group differences.

2.5.9 Conclusions and Future Directions

This study indicates that frequent victimisation by peers is the experience of about 4-5 students in a Year 4 classroom of 30 students. For these students, distress is not confined to the social domain, but also a part of psychological health functioning in general. An important implication of this finding is the need to develop and rigorously evaluate interventions to reduce and prevent this level of distress. In the area of bullying, previous research has provided support for universal school-based intervention, targeting all students within the school environment. This approach aims to reduce and prevent bullying by facilitating an environment in which social reinforcement and consequences promote a reduction in bullying behaviour and the enhancement of social and coping skills and social support facilitates a reduction in victimisation. The premise is that victimisation is reduced and prevented because bullying behaviour is less likely to occur within this social climate and because students have the skills and social support required to effectively cope with being bullied when it does occur.

However, it is important that in taking a universal approach, selective or indicated groups are not ignored. In the case of bullying, this means that intervention

and evaluation goals need to focus not only on the reduction and prevention of

bullying, but also improving and maintaining the psychological health of bullied

students. Despite the clear body of research demonstrating the distress of these

students, intervention research to reduce and prevent bullying has not focused on

psychological health outcomes.

To address this need, this study has firstly identified frequently bullied students

from a sample of randomly selected and stratified schools, using multiple informants,

and a reliable and valid measure of bullying that included physical, verbal, indirect

and relational forms. Secondly, the psychological health concomitants of

victimisation identified in previous research were confirmed with this targeted

subgroup, using well-validated measures of psychological health and student- and

parent-report. What is required next, is to determine the effects of a universal

school-based bullying preventive intervention on the frequency of victimisation and

psychological health of these students.

CHAPTER 3

Study 2 - A Universal School-Based Bullying Preventive Intervention:

Peer Victimisation and Psychological Health

Outcomes for Frequently Bullied Students

3.1 Aims and Rationale

It is important that in the implementation of universal intervention, selective

and indicated samples are not ignored. In the case of bullying, this means that

intervention goals need to extend further than reducing and preventing bullying, to

include improving and maintaining the psychological health of bullied students

(Hawker & Boulton, 2000; Kaltiala-Heino et al., 1999; Kumpulainen et al., 1998;

Sourander et al., 2000; Vernberg, 1990). There are very few published studies of

school-based bullying prevention that employ a group randomised controlled trial to

show program efficacy and none that report change in the mental health of victimised

students. Examining intervention effects on the total population may not reveal the

story of subgroup children who are at risk (Barrett & Turner, 2001).

To address these research needs, Study 2 employed a group randomised

controlled trial with follow-up to investigate the impact of the first year of

implementation of a well-defined and resourced universal whole-school preventive

intervention, on frequency of victimisation and psychological health of frequently

bullied students. The sub-sample of interest, frequently bullied students, was

identified in Study 1. Study 1 also validated the use of psychological health

variables as outcome measures and provided pre-intervention data.

3.1.1. Investigating Reduction and Prevention

Coie et al. (1993) note that analysing the impact of universal interventions on different subgroups within the sample representing variable levels of risk is useful for determining the boundary conditions surrounding the effectiveness of an intervention. Universal interventions may not be sufficient in duration or intensity to alter developmental pathways of at-risk children (Greenberg et al., 2001). If the end-state of interest is psychological disorder, then students who are frequently bullied constitute a selective sample as they are at increased risk for psychological problems. Students who are frequently bullied and show detectable symptoms of psychological maladjustment constitute an indicated sample that is at high risk for developing more severe dysfunction. As a group, frequently bullied students constitute a targeted sample, comprising both selective and indicated groups (Gillham et al., 2000). Of interest here, is where the boundaries of effectiveness of a universal school-based bullying preventive intervention lie.

In Study 2 the impact of a universal intervention on frequently bullied students of varying risk status is investigated in terms of reduction and prevention. Victimisation and psychological symptom reduction is investigated in all frequently bullied students (selective and indicated). Symptom reduction is also investigated by determining the impact of the intervention on the proportion of frequently bullied students who display clinical levels of symptomology. Here, it is an indicated sample of students who are frequently bullied and demonstrate symptoms of maladjustment that is of interest.

In the context of defining prevention as "symptoms are reduced long after the treatment is over" (Jaycox et al., 1994, p. 802), follow-up information informs on the preventive impact of the intervention (Durlak & Wells, 1997; Spilton Koretz &

Moscicki, 1997). The prevention of peer victimisation, psychological symptoms, and in the proportion of students who report clinical levels of symptomology, over time is therefore of interest in Study 2. All frequently bullied students (selected and indicated) are the focus in the investigation of the prevention of peer victimisation and psychological health symptoms. Prevention of clinical levels of symptomology at follow-up focuses on an indicated sample of students who are at high risk due to being frequently bullied and showing symptoms of maladjustment. The non-occurrence of clinically significant levels of psychological symptoms in healthy frequently bullied students is also investigated to assess the intervention's ability to prevent the development of maladjustment in an at-risk but asymptomatic population. Here, it is a selective sample that is of interest, students who are at elevated risk of disorder due to being frequently victimised by their peers, but at pre-intervention show low levels of psychological distress.

3.1.2 Evaluating Intervention Integrity

In evaluating the effects of an intervention, evidence of effective conceptualisation, design and implementation should be documented in order to determine the influence of these factors on outcomes (Durlak & Wells, 1997; Weissberg & Bell, 1997). Interventions are often not described in detail, and when they are, the issue of whether the intervention was implemented as intended often remains (Catalano et al., 2002; Mrazek & Haggerty, 1994). Delivery as designed and planned is seldom achieved in community settings, such as schools, where factors such as time, resources, self-efficacy, attitudes and motivation impact upon implementation (Mukoma & Flisher, 2004). Measuring program implementation therefore enhances the validity of research designs that aim to assess program

outcomes (Basch, Sliepcevich, Gold, Duncan, & Kolbe, 1985; Mukoma & Flisher; Spilton Koretz & Moscicki, 1997). When a program has not been implemented as intended, concluding that a program is ineffective in achieving desired outcomes may be an inaccurate interpretation of the findings (Basch et al., ; Mukoma & Flisher).

Moreover, not only is it important to know whether the program was implemented as intended in the intervention group, but also to assess whether similar intervention occurred in the control group (Steckler et al., 2002). Conclusions regarding program effectiveness may be drawn in error if the control group is simply assumed to be a pure control (Basch et al., 1985). This is particularly so in the school context, as schools have access to a wide variety of resources and programs.

Implementation is likely to be enhanced by training that is perceived to have provided the necessary knowledge and skills for implementing the intervention, and high levels of acceptability of the program by teachers and school staff (Basch et al., 1985). Furthermore, given the whole-school nature of bullying intervention, acceptability and satisfaction by other school community members, such as students and parents, is important to achieving a whole-school approach that is sustained over time.

To address these issues a process evaluation was conducted. To investigate whether the program was received as intended, the extent to which staff training was attended and intervention activities implemented at the whole-school, classroom and parent levels were assessed. To ensure any change observed could be attributed to the *Friendly Schools* program and investigate possible confounding by other programs or activities, information on other activities engaged in by intervention and control schools aimed at addressing bullying was collected. Satisfaction with the

training and resources provided to implement the *Friendly Schools* program and with

the program itself was investigated.

3.2 Hypotheses

Victimisation Outcomes

Behaviour Reduction (selective and indicated samples).

1. *Frequently Bullied Status* – A significantly lesser proportion of frequently

    bullied intervention students will be identified as frequently bullied at post-

    intervention, in comparison to control.

2. *Bullying Type Frequency* – The frequency of report of each bullying type by

    intervention students will be significantly lower than that reported by control at

    post-intervention.

3. *Victimisation Frequency* - The frequency of victimisation reported by

    frequently bullied intervention students will be significantly lower than the

    control at post-intervention.

    Prevention as behaviour reduction over time (selective and indicated

    samples).

4. *Frequently Bullied Status* - A significantly lesser proportion of frequently

    bullied intervention students will be identified as frequently bullied at follow-

    up, in comparison to control.

5. *Bullying Type Frequency* – The frequency of report of each bullying type by

    intervention students will be significantly lower than that reported by control at

    follow-up.

6.   *Victimisation Frequency* - The frequency of victimisation reported by frequently bullied intervention students will be significantly lower than the control at follow-up.

Psychological Health Outcomes

Symptom reduction (selective and indicated samples).

7.   Frequently bullied intervention students will demonstrate significantly fewer depressive, anxious and somatic symptoms and significantly greater peer relations and general self-worth than control at post-intervention.

Prevention as symptom reduction over time (selective and indicated samples).

8.   Frequently bullied intervention students will demonstrate significantly fewer depressive, anxious and somatic symptoms and significantly greater peer relations and general self-worth than control at follow-up.

Clinical Significance

Symptom reduction (selected and indicated samples).

9.   A significantly greater proportion of frequently bullied intervention students will show clinically significant improvement at post-intervention.

10. A significantly lesser proportion of frequently bullied intervention students will show clinically significant deterioration at post-intervention.

Prevention as symptom reduction over time (selected and indicated samples).

11. A significantly greater proportion of frequently bullied intervention students will show clinically significant improvement at follow-up.

12. A significantly lesser proportion of frequently bullied intervention students will show clinically significant deterioration at follow-up.

Prevention as the non-occurrence of symptoms in at-risk asymptomatic students (selective sample).

13. A significantly greater proportion of frequently bullied intervention students who report non-clinical levels of depressive, anxious and/or somatic symptoms (healthy) at pre-intervention will remain in the non-clinical range at post-intervention and follow-up, in comparison to control.

Symptom reduction (indicated sample).

14. A significantly greater proportion of frequently bullied intervention students who report clinical levels of depressive, anxious and/or somatic symptoms (unhealthy) at pre-intervention will be classified in the non-clinical range at post-intervention, in comparison to control.

Prevention as symptom reduction over time (indicated sample).

15. A significantly greater proportion of frequently bullied intervention students who report clinical levels of depressive, anxious and/or somatic symptoms (unhealthy) at pre-intervention will be classified in the non-clinical range at follow-up, in comparison to control.

Process Evaluation

16. Intervention schools will attend training and implement the *Friendly Schools* program as intended. Control schools will not implement strategies over and above regular policy and practice, thus maintaining the integrity of this group as a control.

17. School staff, frequently bullied students and their parents in the intervention group will report satisfaction with the *Friendly Schools* program and training.

3.3 Method

3.3.2 Sampling and Participants

   3.3.2.1 Schools. To facilitate comparability across conditions, all metropolitan schools were stratified according to size and socio-economic status. Schools were randomly selected from each size and socio-economic status stratum by a researcher independent to the data collection and assigned to condition (intervention or control), prior to recruitment. Fifteen schools were allocated to the intervention group and 14 to the control, as shown in Figure 2. As an incentive to participate, control schools were offered road-safety education materials and training free of charge. Further detail is provided in Study 1 (see *Sampling and Participants*, page 64).

   3.3.2.2 Students. Participants were identified in Study 1 by self and/or parent questionnaire report as being bullied "*about once a week*" or more often. A total of 321 (16.3%) Year 4 students with a mean age of 8.6 years (*SD* = 0.56) were identified. Males comprised 51.1% (*n* = 164) of the sample. The mean Index of Relative Socio-Economic Disadvantage for participating students was 1005.50 (*SD* = 62.17), 0.05 standard deviations above the Australian average.

   Of the total intervention sample at Study 1 (*N* = 1046), 176 (16.8%) students were identified as frequently bullied. Of the control group (*N* = 922), 145 (15.7%) students were identified. Figure 2 shows the identification and participation of participants. Chi-square test showed no significant difference between the intervention and control groups in the proportions of students identified as frequently bullied, χ^2 (1, *N* = 1966) = 0.332, *p* = .564, ϕ^2 = .0002, at pre-intervention.
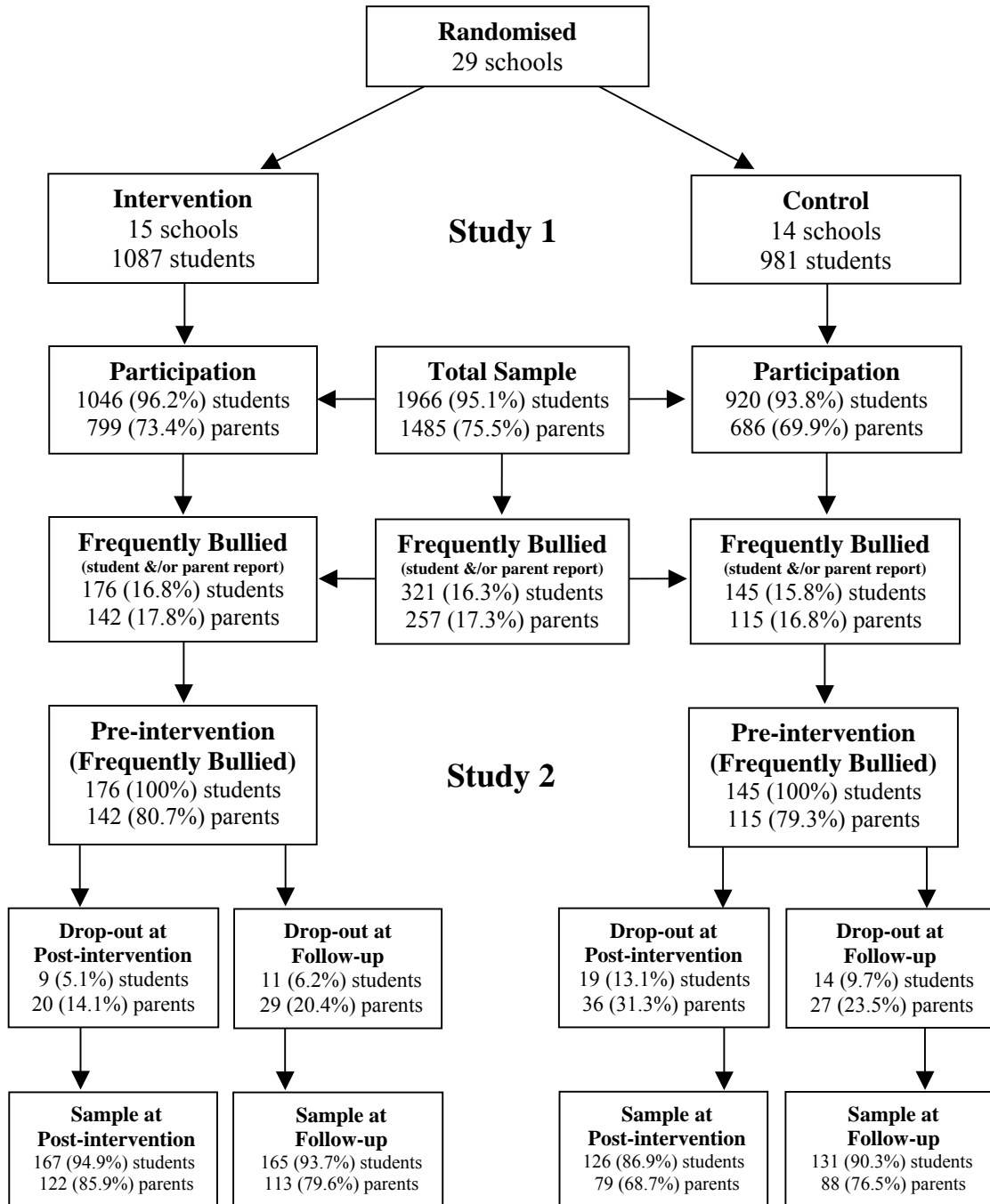
Figure 2. Flow chart of student and parent participation and identification of frequently bullied students in Study 1 and resulting participation and attrition in the intervention and control groups in Study 2.

Attrition of 8.7% (*n* = 28) resulted in 293 students at post-intervention. Of the drop-outs, 19 left the participating school, one was deceased and 8 were absent on the testing occasion. Students who left the participating school prior to post-intervention were not followed up at their new school due to difficulties in

accounting for the amount of intervention received by these students. At 4-month

follow-up, a slightly lower attrition rate of 7.8% ($n = 25$) resulted in 296 students.

Three students were absent on the testing occasion and two did not have parental

consent to participate. The remaining 20 were those identified as left or deceased at

post-intervention. As intervention dose was not a factor at follow-up, students who

had moved to a new school after post-intervention were tracked to the new school

and included in the follow-up sample to minimise attrition.

At post-intervention, 94.9% ($n = 167$) of the intervention and 86.9% ($n = 126$)

of the control group participated. A significant group difference was found, with a

lower proportion of participation in the control group, χ^2 (1, $N = 321$) = 5.410, $p =$

.020, $\phi^2 = .019$. At follow-up, 93.7% ($n = 165$) of the intervention and 90.3% ($n =$

131) of the control group participated, with no significant group difference, χ^2 (1, N

= 321) = 0.853, $p = .356$, $\phi^2 = .004$. Figure 2 shows student participation and drop-

out for the intervention and control groups at post-intervention and follow-up.

3.3.2.3 Parents. At pre-intervention, 257 (80.1%) parents of frequently bullied

students participated. Of the respondents, 91.1% ($n = 234$) were mothers, 6.6% ($n =$

17) fathers, 0.8% ($n = 2$) were others and the remaining 1.6% ($n = 4$) did not respond

to this item. Age of respondents ranged from under 29 years (10.5%, $n = 27$) to 45

years and over (5.4%, $n = 14$), with the most frequently selected age range being 35-

39 years (35.8%, $n = 92$). Most participants were born in Australia (62.6%, $n = 161$),

followed by the United Kingdom (18.3%, $n = 47$) and New Zealand (6.6%, $n = 17$).

Twenty-nine parents (11.3%) were born in a country other than these, and seven did

not respond to this item (2.7%). The mean Index of Relative Socio-Economic

Disadvantage for participating parents was 1007.54 ($SD = 62.15$), 0.08 standard

deviations above the Australian average.

The intervention group comprised 142 (80.7%) parents of frequently bullied students and the control 115 (79.3%). Figure 2 shows participation of parents of frequently bullied students. There was no significant difference between the intervention and control groups in the proportion of parents who participated at pre-intervention, $\chi^2(1, N = 321) = 0.027$, $p = .868$, $\phi^2 = .0003$. However, students of parents who did not participate had significantly higher mean victimisation frequency ($M_{\text{non-participating}} = 6.70$, $SD = 3.59$, $n = 61$; $M_{\text{participating}} = 4.92$, $SD = 3.56$, $n = 248$; $t(307) = 3.485$, $p = .001$, $\eta^2 = .038$) and depressive symptoms ($M_{\text{non-participating}} = 17.48$, $SD = 10.16$, $n = 64$; $M_{\text{participating}} = 14.56$, $SD = 9.79$, $n = 256$; $t(318) = 2.121$, $p = .035$, $\eta^2 = .014$) at pre-intervention.

An attrition rate of 21.8% ($n = 56$) resulted in 201 parents at post-intervention. At follow-up, the attrition rate was again 21.8% ($n = 56$), however, there was variation in participants across the two samples. Of parents who participated at pre-intervention, 85.9% ($n = 122$) of the intervention group and 68.7% ($n = 79$) of the control group participated at post-intervention, representing 69.3% and 54.2% of the pre-intervention student sample, respectively. The proportion of drop-outs was significantly greater in the control group (31.3% versus 14.1%), $\chi^2 (1, N = 257) = 10.069$, $p = .002$, $\phi^2 = .043$. At follow-up, there were no group differences, with 79.6% ($n = 113$) of the intervention and 76.5% ($n = 88$) of the control group participating, $\chi^2 (1, N = 257) = 0.192$, $p = .661$, $\phi^2 = .001$, representing 64.2% and 60.7% of the pre-intervention student sample, respectively. Figure 2 shows parent participation and drop-out for the intervention and control groups at post-intervention and follow-up. Parent outcome data were available for 73.1% of intervention and 62.7% of control students participating at post-intervention, and 68.5% and 67.2% at follow-up, respectively.

3.3.2.4 School staff. Fifty classes of Year 4 students participated in the intervention group. Two classes joined with another Year 4 class from their respective school for the classroom curriculum component of the intervention, giving a total of 48 teachers who implemented the classroom learning activities and provided process data. Fifteen *Friendly Schools* Coordinators, one from each intervention school; 61 *Friendly Schools* Core Committee members from intervention schools; and 14 school principals, one from each control school; also participated in the collection of process data.

3.3.3 Measures

3.3.3.1 Self-report victimisation, and psychological health outcomes. Students completed the same measures as employed in Study 1, except for demographic questions which were asked at pre-intervention (Study 1) only. The student questionnaire package comprised the Bullying Questionnaire for Students (see Appendix A), the Children's Depression Inventory (CDI) (Kovacs, 1992), the Revised Children's Manifest Anxiety Scale (RCMAS) (C. R. Reynolds & Richmond, 1985) and the Self-Description Questionnaire I (SDQ-I) (Marsh, 1990) (see *Measures* section of Study 1 on page 65 for discussion of psychometric properties).

Students experiencing clinically significant levels of self-report symptoms were identified using cut-offs based on normative data for boys and girls, ages 7-12 respectively, on the CDI, and boys and girls, age 8 respectively, on the RCMAS (see *Measures* section of Study 1 on page 65 for further detail). The same cut-offs were used at post-intervention and follow-up to enable comparison. Students were categorised as unhealthy if they scored greater than or equal to the cut-off on

depressive and/or anxiety symptoms. Healthy students scored below the cut-off on both depressive and anxiety symptoms.

   3.3.3.2 Parent-report victimisation, and psychological health outcomes. Other than demographic questions, which were asked at pre-intervention only, parents completed the same measures employed at pre-intervention (Study 1). The parent questionnaire package included the Bullying Questionnaire for Parents (see Appendix B) and the Behaviour Assessment System for Children – Parent Rating Scales Child (BASC PRS-C) (C. R. Reynolds & Kamphaus, 1992) (see *Measures* section of Study 1 on page 76 for discussion of psychometric properties).

   As assessment was across three time points, error variance resulting from variations in respondent across time was of concern in accounting for observed change. Inter-rater reliability coefficients, determined from ratings by both parents at the same time, of .57 for the Anxiety scale, .67 for the Depression scale and .46 for the Somatization scale have been reported (C. R. Reynolds & Kamphaus, 1992). These coefficients indicate the importance of having the same parent complete the questionnaire when change over time based on more than one testing occasion is of interest. To encourage respondent consistency, the post-intervention and follow-up questionnaires were addressed to the parent/caregiver who had responded at pre-intervention and an item was added which asked the respondent if they had previously completed a *Friendly Schools* questionnaire. If the response *"no"* was selected, the respondent was prompted to pass the questionnaire to the parent/caregiver who had completed the questionnaire at pre-intervention. At post-intervention and follow-up respondents were asked their relationship to the Year 4 child. This question was designed to assess respondent consistency at the data analysis stage.

Students experiencing clinically significant levels of parent-report symptoms were identified using cut-offs based on normative data for boys and girls aged 8-11 years, respectively (see *Measures* section of Study 1 on page 76 for further detail). The same cut-offs were used at post-intervention and follow-up to enable comparison. Students were categorised as unhealthy if they scored greater than or equal to the cut-off on depressive, anxiety and/or somatic symptoms. Healthy students scored below the cut-off on all symptoms.

3.3.3.3 Process evaluation.

3.3.3.3.1 Whole-school core committee training evaluation (intervention schools). The whole-school core committee training evaluation (see Appendix J) assessed committee members' perceptions of training received to implement the whole-school component of the *Friendly Schools* intervention. The questionnaire utilised five response-choice questions to assess quality of the training, in terms of clarity of presentation and length of training; the suitability of the whole-school intervention to the school environment; whether the training had provided the skills required, and potential challenges, to implementing the whole-school component of the *Friendly Schools* intervention.

3.3.3.3.2 Teacher training evaluation (intervention schools). The Teacher Training Evaluation (see Appendix K) assessed teachers' perceptions of the training provided to implement the classroom component of the *Friendly Schools* intervention. The evaluation included eight response-choice items to assess teachers' perceptions of the quality of the training; knowledge gain in relation to bullying; skill gain in relation to implementation of the intervention; user-friendliness of the classroom intervention materials; and attitude toward teaching the classroom intervention.

3.3.3.3.3 Teacher log (intervention schools). The Teacher Log (see Appendix L) was designed to be completed by teachers at the end of teaching each module of three lessons. The log utilised response-choice questions to assess how much of the lesson was taught (*"all"*, *"most"*, *"some"*, *"none"*). The total number of lessons taught per teacher was calculated by summing all lessons for which a response of *"all"*, *"most"* or *"some"* was given (range 0-9).

3.3.3.3.4 Teacher interview (intervention schools). At the completion of the Year 4 intervention, teachers completed a semi-structured face-to-face interview (see Appendix M). This assessed teachers' perceptions of the appropriateness of the classroom component of the *Friendly Schools* intervention for the development level of Year 4 students and whether the classroom intervention component was supported at the whole-school level. The interview also asked teachers to report on their teaching of each of the nine lessons, providing a means of cross-validating the teacher log. Each lesson was broken down into three core components, plus the workbook activity sheet. Teachers were asked how much of each of these was taught (*"all"*, *"some"*, *"none"*) and to comment on any modifications made.

The total number of lessons and activity sheets taught by each teacher was calculated by summing all lessons and activity sheets for which a response of *"all"* or *"some"* was given (range 0-9 for each).

3.3.3.3.5 Student workbook (intervention schools). Each student was supplied with a workbook (see Appendix N), which included lesson activity sheets. As the need for materials and preparation time can be detrimental to program implementation (Basch et al., 1985), the workbook provided a practical means of facilitating implementation, as teachers were not required to engage in the cost or time of preparing activity sheets for each lesson. Following completion of the

intervention, the workbook also provided a means of cross-validating the teacher

lesson log and teacher interview. The total number of activity sheets completed (0-9)

was calculated for each class using a random sample of five workbooks collected

from each classroom.

3.3.3.3.6 Coordinator interview (intervention schools). The *Friendly*

Schools Coordinator Interview (see Appendix O) was a semi-structured telephone

interview which assessed implementation of the whole-school component of the

Friendly Schools intervention. Coordinators were asked to comment on each of the

steps within each of the three phases of the whole-school intervention component.

Co-ordinators were also asked to comment on the usefulness of the manual and

core-committee training in facilitating the implementation of the whole-school

intervention and the contribution of the whole-school workshop conducted within

school for all school staff. To aid in the interpretation of intervention outcomes,

coordinators were also asked whether any strategies, activities or events that were

aimed at reducing or preventing bullying were engaged in that were not part of the

Friendly Schools intervention.

3.3.3.3.7 School bullying policy and newsletters (intervention schools).

Schools provided copies of their bullying policy and school newsletters as evidence

of policy development and use of newsletter items.

3.3.3.3.8 Principal interview (control schools). The Principal Interview

(see Appendix P) was a semi-structured telephone interview which assessed activity

related to bullying and peer relations in control schools across the period of

participation in the research. Principals were asked to comment on their bullying

policy, specifically, the presence of such a policy, any modification or review of the

policy, involvement of the school community in development or review and

dissemination of the policy; whether the school's strategy for managing bullying incidents had been modified; and any strategies, activities or events that were aimed at reducing or preventing bullying and/or promoting positive peer relations.

3.3.3.3.9 Student process questionnaire (intervention schools). Included within the Student Bullying Questionnaire were two response-choice questions asking students whether they enjoyed doing the *Friendly Schools* classroom activities and home activities, and a further five response-choice items assessed students' perceptions of learning related to the *Friendly Schools* classroom activities (see Appendix Q). The items related to learning asked students whether they had learnt what bullying is; learnt to stop someone bullying them; learnt how to help students being bullied; learnt not to bully others; and learnt how to be friendly with other children.

3.3.3.3.10 Parent process questionnaire (intervention schools). The Parent Bullying Questionnaire included a 20-item measure of parent reported use and satisfaction (see Appendix R). Five response-choice questions related to the child, asking parents to report on how many of the *Friendly Schools* home activities were enjoyed by their child; whether the home activities increased their child's awareness of how to respond to bullying at school; how much their child enjoyed participating in the *Friendly Schools* program in general; and how much their child had talked about bullying and the *Friendly Schools* program.

Fifteen items asked parents about their own involvement, satisfaction and learning. A single-item response-choice question asked parents whether they were pleased the *Friendly Schools* intervention had been offered in their child's class. Nine response-choice items asked parents whether they had completed each of the homework activities (with a picture of each homework activity to prompt recall) and

a further two response-choice items asked whether the home activities, in general, had increased awareness of bullying prevention and were useful for discussing the issue of bullying with their child. Three response-choice items related to the *Friendly Schools* newsletter items and asked parents to identify which newsletter item topics they had read (rather than ask parents to recall each newsletter item, the ten items were collapsed into 7 topics), whether the newsletter items had increased their awareness of how to prevent bullying, and whether they would like the items to continue the following year.

3.3.4 Intervention Program

The *Friendly Schools* program (Cross, Hall, Hamilton, Pintabona, & Erceg, 2004; Cross et al., 2003; Erceg, Cross, & Pintabona, 2000; Pintabona, Caputi, & Cross, 2000) was developed in response to a vocalised need by schools for strategies and resources to address bullying that were readily accessible, easily implemented into the school environment and based on sound theoretical and empirical research. *Friendly Schools* utilises a multi-component approach informed by the Health Promoting Schools (HPS) concept (World Health Organisation [WHO], 1996), known as Coordinated School Health in the USA (St Leger, 2001), and evidence-based principles of successful practice for reducing and preventing bullying in schools (Cross, Pintabona, Hall, Hamilton, & Erceg, 2004). These principles were developed using a synthesis of published theoretical and empirical evidence, and validated by international expert opinion and school case studies in a year-long formative study in 1999.

Strong links have been established between health and educational achievement, and there is recognition amongst educators that enhancing children's

mental and physical health improves their ability to learn (Lavin et al., 1992;

McEvoy & Welker, 2000; National Health and Medical Research Council

[NHMRC], 1996; Rutter, 1991; St Leger, 1999; Webber, 1991; Weissberg, Caplan,

& Harwood, 1991; Zubrick et al., 1997). A strength of the HPS framework is that it

provides a means for maximising schools' core business, educational outcomes,

through addressing health issues within an education framework (St Leger, 2001).

School-based health promotion can focus on the curriculum, the physical and

psychosocial environment or partnerships with parents and the community, but

ideally addresses all these areas and is supported by school policy that reinforces and

facilitates desired outcomes (NHMRC; Northfield et al., 1997). The HPS concept

provides schools with a framework for addressing health promotion in this way.

Three key elements of health promotion activity are identified, formal curriculum,

teaching and learning; organisation, ethos and environment; and school-home-

community links (Booth & Samdal, 1997; Bushell, 1999; Deschesnes, Martin, &

Hill, 2003; Nutbeam, 1992; Parker & Cameron, 1995). As action in one area is able

to promote, or conversely, hinder, change in another, these three elements are most

effective when integrated and coordinated (Booth & Samdal). Figure 3 illustrates the

HPS framework, with reference to the Year 4 *Friendly Schools* program.

Figure 3. Health Promoting Schools and the Year 4 *Friendly Schools* program.

The HPS concept demonstrates how the implementation of health promoting

activity, rather than detracting from the goals of education, supports both the

educational and social objectives of schools (Booth & Samdal, 1997). This is

particularly important in the context of increasing responsibility and expectations of

schools coupled with limited time, support and resources, resulting in strong

competition for curriculum time and teacher attention (NHMRC, 1996). The

approach helps to integrate health promotion into the mainstream organisation of

schools, rather than in the form of special-purpose initiatives, so that there is greater implementation and sustained action over time (NHMRC).

A multi-disciplinary team of professionals (teachers, health promotion professionals, psychologists) were involved in the design and development of the *Friendly Schools* program. To facilitate implementation and sustainability and congruency of messages (Jaycox et al., 1994; Nicholson, Oldenburg, McFarland, & Dwyer, 1999) the *Friendly Schools* program was designed to be implemented during school time, facilitated by regular school staff, to fit within the terms of a school-year, to complement and integrate with current curriculum and educational policy and practice, and to provide training that furthered current knowledge and skills. The program comprised whole-school, curriculum and family (Years 4 & 5) components across two years. The research presented here is based on implementation of the first year of each of these components, with the focus on Year 4 teachers, students and their families.

3.3.4.1 Whole-school component. The aim of the whole-school component is to build commitment and capacity within schools to address bullying. Intervention schools developed a *Friendly Schools* committee representing the school community. Committees typically comprised the school health education coordinator, a representative from administration (preferably the Principal), parent representative(s), allied health staff such as the school nurse and school psychologist and other teaching staff. Often these teams represented previously established school behavioural management or pastoral care committees.

The committee received four hours of training to facilitate their coordination and implementation of a whole-school response to bullying. In particular, committees were encouraged to develop/review their bullying policy through

consultation with all school staff, students and parents, and to facilitate and monitor policy implementation. Training was conducted by members of the research team and content and materials were standardised across training sessions.

This component of *Friendly Schools* included the establishment of a *Friendly Schools* core-committee whose tasks were to; increase school community awareness about bullying; engage in whole-school consultation regarding policy development or review; review and communicate the student and parent pre-intervention questionnaire data to the school community; review current whole-school bullying policy and practice; engage the school community in development or revision of the bullying policy; implement the bullying policy; and promote awareness of the policy and the *Friendly Schools* intervention. A practical step-by-step whole-school support manual (Pintabona et al., 2000), provided in Appendix S, was developed to facilitate schools' implementation of a whole-school approach, and covered the steps outlined in Table 10. The manual also included:

- Sample school bullying policies and strategies for developing/reviewing, implementing and monitoring policy;

- Background information and staff activities to facilitate a common understanding of bullying within the school community;

- Whole-school strategies to mobilise peer group pressure to discourage bullying behaviour;

- Strategies to promote pro-social attitudes and peer support of students who are bullied; and

- Strategies to respond effectively and consistently to bullying incidents and reports, including the Pikas Method of Shared Concern (Duncan, 1996; Pikas, 1989).

Table 10

Content of the Friendly Schools Whole-School Component

Phase 1	**Awareness & Consultation**
Step 1	Establish a core committee
Step 2	Raise school community awareness
Step 3	Engage in whole-school consultation
Phase 2	**Awareness & Policy Development**
Step 4	Review and communicate student questionnaire results
Step 5	Review current policy and practice
Step 6	Write whole-school bullying policy
Phase 3	**Awareness & Policy Implementation**
Step 7	Implement whole-school bullying policy
Step 8	Promote awareness of policy

Individual school-based summaries of the data collected from Year 4 students and parents by the research team were provided to each school as part of the whole-school component. Student and parent knowledge and attitudes to bullying behaviour as well as student self-report of bullying and victimisation were reported. Schools were encouraged to use this information to assess student and parent needs and to monitor their school's whole-school response to bullying.

3.3.4.2 Year 4 classroom curriculum component. The Year 4 curriculum provided a total of 9 hours of classroom teaching and cooperative learning (three units of 3 x 60 minute learning activities presented across 3 school terms).   The learning activities aimed to regularly and actively engage students in developmentally appropriate ways to facilitate:

- An understanding of what behaviours constitute bullying and why bullying is an unacceptable behaviour;

- Students' ability to talk about bullying with each other and adults;

- Adaptive responses to being bullied, including reporting bullying, seeking support and responding assertively;

- Pro-social behaviour and social problem solving skills;

- Peer support for students who are being bullied; and

- Peer discouragement of bullying behaviour.

Lessons were designed in a prescribed sequence, providing an organised and coherent curriculum that built on what had come before and prepared for what was coming later. This provided a structure for teaching that was congruent with other learning areas and maximised the likelihood of teacher implementation within the classroom and consistency of implementation across classrooms (Payton et al., 2000). Table 11 outlines the nine sessions.

Table 11

Content of the Year 4 Friendly Schools Classroom Lessons

Unit	Lesson	Content
1	1	What is bullying behaviour?
	2	Developing an action plan
	3	How do we get peer support?
2	4	The bystander
	5	Self-esteem: What is it?
	6	Self esteem character study
3	7	Children's rights in a friendly school
	8	Values for promoting friendly schools
	9	Friendship skills

Cognitive and behavioural teaching and learning activities were employed to address knowledge, attitude and skills. Key knowledge included identifying bullying behaviours, the effects of bullying on others, positive ways to behave that support students who are bullied, positive ways of responding to bullying, and the rights and

responsibilities of all students to each other. Social Cognitive Theory (Bandura, 1977), the Health Belief Model (Jansz & Becker, 1984) and Problem Behaviour Theory (Jessor, 1987) were used to develop teaching and learning activities addressing social support and empathy, positive reinforcement of pro-social behaviour, outcome expectancies and social problem solving. Programs employing behavioural or cognitive-behavioural techniques have been shown to be more effective than those that do not (Durlak & Wells, 1997). The program therefore utilised teacher and peer modelling, role-play followed by feedback and reinforcement, as well as educational techniques such as drama and stories.

All teachers received a manual (Erceg et al., 2000), provided in Appendix T, that included the purpose, key learning outcomes, preparation and procedure for each learning activity, as well as background information and teaching notes. Teaching and learning aids such as game pieces and videos were provided and each student received a workbook that included resource sheets, review and reflection log, and family activities (Appendix N).

Teachers received six hours of professional development to improve their knowledge, skills and self-efficacy in teaching the *Friendly Schools* program and managing bullying behaviour in the wider school context. The training aimed to enhance teachers' knowledge about the prevalence, types and effects of bullying; to enhance knowledge and skills to build positive relations among students and between themselves and students; to facilitate their awareness and identification of bullying within the classroom; to enhance their ability to respond effectively to bullying incidents; to enhance their knowledge and ability to integrate positive action on bullying into the curriculum; to encourage reflection on their own behaviour and interactions and the influence of these on the values and behaviour of their students;

and to facilitate awareness and identification of the psychological symptoms of bullying in children. Interactive modelling and opportunities to practice and discuss the teaching and learning strategies were provided. Training was conducted by members of the research team and content and materials were standardized across training sessions.

3.3.4.3 Family component. The family component of *Friendly Schools* aimed to support and extend students' classroom learning and to raise knowledge, awareness, skills and self-efficacy in parents. Activity within this component links into both the whole-school and curriculum components of *Friendly Schools*.

At the whole-school level, the training and support manual provided committees with practical strategies for involving parents in policy revision and/or development, whole-school activities, such as feedback of questionnaire data and assembly items based on classroom learning, and communication and implementation of a bullying policy. Ten newsletter items, shown in Appendix U, were designed to increase knowledge about bullying, promote pro-social attitudes and develop parents' skill in communicating with their children and the school, and dealing more effectively with bullying issues. Topics included defining bullying, talking with their child about bullying, responding to bullying situations, and the school's response to bullying.

At the curriculum level, each of the nine classroom learning activities included a home-based skill building activity for students to complete with their family. Home activities were designed to take approximately 10 minutes to complete and to provide students with reinforcement and practise opportunities for skills learnt in the classroom.

3.3.5 Procedure

Pre-intervention data were collected as part of the data collection conducted with all participating Year 4 students outlined in Study 1 (see *Study 1 Procedure* on page 80). Following pre-intervention data collection, intervention schools participated in training for whole-school committees and Year 4 classroom teachers in the *Friendly Schools* program. Training evaluation measures were administered at the completion of training. Teachers implemented one unit of 3 classroom learning activities in each of terms 2, 3 and 4. Control schools received current road safety education curricula and training and were told they would receive the *Friendly Schools* resources at the completion of the research project.

The procedure employed for the post-intervention and follow-up data collections was the same as that at pre-intervention (see *Study 1 Procedure* on page 80). Information letters were sent to parents, via the school, prior to post-intervention (see Appendix G2 and H2) and follow-up (see Appendix G3 and H3). Post-intervention was conducted within the data collection of a larger research study (all participating Year 4 students comprising the Study 1 sample). At follow-up, data were collected from students identified as frequently bullied at pre-intervention only. To avoid stigmatisation, participation of these students was not overtly linked to their victimisation at pre-intervention and students were withdrawn from classes in a similar manner to students withdrawn for other extra-curricular activities. The post-intervention observation also included the collection of process data from intervention students, parents, teachers and school coordinators to assess implementation and satisfaction with the intervention. Control school coordinators were interviewed to assess school involvement in bullying prevention activities that may have contaminated the design.

Ethical issues pertaining to administration of the assessment instruments and the identification of students showing elevated symptom levels (at-risk) were managed as outlined in Study 1 (see page 83). At-risk students were identified at each time point using *age-appropriate* cut-offs on self-report measures of depression and anxiety symptoms. Results of symptom monitoring are reported in the *Results* section (page 92). Due to low inter-rater reliability across parents on the BASC (C. R. Reynolds & Kamphaus, 1992) and potential confounding on the victimisation item, the same parent was asked to complete the parent questionnaire on each testing occasion.

3.3.6 Research Design

A group randomised controlled trial with follow-up was employed to compare the impact of the *Friendly Schools* program with the standardised state health and education curriculum and recommended policy and practice concerning bullying. The aim of the design was to assess the effectiveness of the first year of the *Friendly Schools* intervention over and above the activity schools were already engaged in using currently available support and resources. This approach was taken as the education climate at the time was one in which bullying was recognised as an important issue for schools to address, and a previous pilot study showed that many schools in Western Australia were engaged in a variety of activities aimed at preventing bullying and supporting victimised students (Cross, Pintabona et al., 2004). Post-intervention data was collected at the end of the first year of program implementation targeting Year 4. The follow-up was conducted 4-months later, following end-of-year school holidays and 8 weeks into the first term of a new school year. Teachers, students and families had not yet been trained or started to

receive the second year of classroom curriculum and family activities at the time of

follow-up. Table 12 shows the data collection and intervention implementation

schedule.

Table 12

Data Collection and Intervention Dissemination Schedule

Condition	Pre-intervention[a] (Mar. 2000)	Year 4 Intervention (Term 2, 3 & 4)	Post-intervention (Nov. 2000)	School Holidays	4 month Follow-Up (Mar. 2001)
Intervention	O_1	X_1	O_2		O_3
Control	O_1	X_2	O_2		O_3

Note. O = observation. X = intervention. X_1 = *Friendly Schools* whole school bullying intervention. X_2 = Road-safety

curriculum and regular school bullying policy and practice.

[a]Data collected as part of Study 1.

3.3.7 Analysis

Analysis was conducted using SPSS for Windows Version 11.5.0. In all

analysis two tailed *p*-values are reported with $\alpha = .05$, unless otherwise specified.

3.3.7.1 Data screening. Validity of participant response on demographic

variables, accuracy of data entry, pattern responding and missing values were

managed as outlined in Study 1 (see *Data Screening*, page 89). The same procedures

were employed for the pre-intervention, post-intervention and follow-up samples and

conducted for the student and parent samples separately.

3.3.7.2 Primary analyses.

3.3.7.2.1 Victimisation, and psychological health outcomes. Cochran's Q

examined the distribution of frequently bullied status across the three time points for

the intervention and control groups, separately. Pearson chi-square tests investigated

group differences at post-intervention and follow-up in frequency of each bullying type. Data without missing value replacement was analysed, as individual items of the victimisation scale were the focus of analysis (the analysis of the total scale score utilised missing value replacement, see *Missing Values* page 90). Yates' corrected chi-square, for 2 x 2 tables (Bryman & Cramer, 1994; Siegel & Castellan, 1988), assessed group differences at post-intervention and follow-up in frequently bullied status. Only participants with data at all three time points (self and/or parent-report) were included in the analysis for comparison.

Yates' corrected chi-square tests also investigated group differences in the proportion of healthy students at pre-intervention who remained healthy and in the proportion of unhealthy students who remained unhealthy, at post-intervention or follow-up, for self- and parent-report, separately. To enable comparisons across time points, the same clinical cut-offs were used at each observation. The Fisher's exact test is reported for the post-intervention and follow-up analyses conducted on proportions of parent-report healthy students who remain healthy, as each analysis had a cell with an expected frequency less than five (Siegel & Castellan, 1988). Effect sizes for chi-square tests are reported using the phi coefficient (2 x 2 table) and Cramer's V for larger tables (Bryman & Cramer, 1994), and are interpreted using the descriptors and definitions of Cohen (1988).

To account for the nested design, in which school was the unit of randomisation and individual the unit of observation, the data were treated as a sample of clusters of individuals rather than a simple random sample of individuals (Catalano et al., 2002). The variance of a cluster sample is typically larger than that of a simple random sample of the same number of participants (Olweus & Alsaker, 1991). This is a consequence of the homogeneity of individuals within clusters,

which results from individuals within the cluster tending to resemble each other, being more similar on the dependent variable than individuals selected at random. The degree of homogeneity among individuals within a cluster is expressed as the intraclass correlation coefficient (ICC), with non-zero ICCs invalidating fixed-effects analysis (Kashy & Kenny, 2000; Murray & Hannan, 1990; Murray, Varnell, & Blitstein, 2004).

The ICC of concern in a group randomised controlled trial is the ICC as it operates in the primary analysis (Murray & Hannan, 1990; Murray et al., 2004). Therefore, ICCs for self- and parent-report outcome variables at post-intervention and follow-up were calculated. Using the formula of Kashy and Kenny (2000) for group designs with between independent variables (groups are nested within levels of the independent variable), the ICC for each outcome measure at post-intervention and follow-up was calculated. Mean square values were obtained from two-group nested ANCOVAs. As n varied from school to school, the harmonic mean of the school frequencies was substituted for the constant n in the computation (Murray & Hannan). Statistical significance was determined using the procedures of Kashy and Kenny, with a liberal α of .2 employed, as recommended for assessing non-independence. Table 13 shows ICCs and significance for self- and parent-report outcome variables at post-intervention and follow-up.

When there is a theoretical basis for assuming non-independence, such as in nested designs, intracluster correlation should be assumed rather than ruled out statistically (Donner & Klar, 1996; Kashy & Kenny, 2000). This argument, and the observation of statistically significant ICCs on some outcome variables, validated the use of mixed fixed-random-effects analysis of covariance (ANCOVA) with randomised groups, in which the school effect was controlled for by treating it as

nested and random (Murray & Hannan, 1990; Murray et al., 2004; Olweus & Alsaker, 1991; Tabachnick & Fidell, 2001a).

Table 13

Intracluster Correlations (ICCs) for Self- and Parent-Report Dependent Variables

	Post-intervention		Follow-up	
	N	ρ	*N*	ρ
Self-report				
Victimisation	266	-.0117	282	.0361
Depressive Symptoms	291	.0383	295	.0006
Anxiety Symptoms	285	.0719[*]	292	-.0452[*]
Peer-relations Self-concept	286	.0393	291	-.0007
General Self-worth	285	.0292	291	.0426
Parent-report				
Depressive Symptoms	198	-.0114	201	.0031
Anxiety Symptoms	197	-.0286	200	.0483
Somatic Symptoms	198	.0256	201	-.1023[**]

[*]$p < .2$ [**]$p < .05$

ANCOVAs with one fixed independent variable (IV) and one random IV were conducted for each of the self- and parent-report dependent variables at post-intervention and follow-up. The between-subjects fixed IV was group with two levels (intervention and control) and the between-subjects random IV was school with 29 levels (15 levels nested within the intervention group and 14 levels nested within the control). There were five self-report dependent variables; victimisation frequency (victimisation scale total score), depressive symptoms, anxiety symptoms, peer relations self-concept and general self-worth. The parent-report dependent

variables were depressive symptoms, anxiety symptoms and somatic symptoms. In each analysis pre-intervention score was included as a covariate. Post-intervention and follow-up group differences were investigated separately to maximise sample size at each time point, as some students and parents not retained at post-intervention were so at follow-up.

A Bonferroni adjustment was applied to the per comparison alpha level to counteract the increased chance of Type I error due to multiple ANOVAs. However, in consideration of potential increases in Type II error that such an adjustment can make, variables were grouped in empirically and theoretically meaningful ways and a Bonferroni adjustment applied according to the number of comparisons conducted within each grouping (see Table 1, page 88) (Huberty & Morris, 1989; Keppel, 1991). For self-report mental health variables and self-concept variables and parent-report mental health variables, the per comparison alpha level was set at .025 to maintain a familywise error rate of $\alpha = .05$. Effect sizes are reported using partial eta-square (Bryman & Cramer, 1994; Tabachnick & Fidell, 2001a). To account for the impact of the covariate, raw and adjusted means are reported.

The Reliable Change Index (Jacobson & Truax, 1991) was used to assess clinical significance. Self-report victimisation frequency, depressive symptoms, anxiety symptoms, peer relations self-concept and general self-worth, and parent-report depressive symptoms, anxiety symptoms and somatic symptoms were investigated for reliable improvement and deterioration effects. As this study represented a targeted sample (frequently victimised students), reliable change was identified when both a clinical cut-off and reliable change index greater than 1.96 were observed, as recommended by Hawley (1995) and Jacobson and Truax. Clinical cut-offs were determined using the formula of Jacobson and Truax for use in

assessing reliable change, and therefore differed to those used in the analysis of clinical significance. The formula recommended by Jacobson and Traux when normative data are available and functional and dysfunctional populations overlap was used. The total student sample of Study 1 provided normal sample data. The cut-offs employed were a score of 3.0 on the Victimisation Scale; a total score of 11.9 on the CDI; a total score of 12.7 on the RCMAS; 29.5 on the SDQ peer relations scale; 32.1 on the SDQ General scale; 9.7 on the BASC Depression scale; 10.1 on the BASC Anxiety scale; and 4.4 on the BASC Somatic scale.

3.3.7.2.2 Process evaluation. Frequency and descriptive statistics were used to analyse participant perceptions of the teacher training and whole-school core committee training; classroom and whole-school program implementation; student enjoyment and self-perceived learning; and parent awareness, use and satisfaction. Pearson's correlation coefficient was used to triangulate measures of implementation of the classroom intervention component across the teacher log, teacher interview and student workbook.

3.3.7.3 Power. This study comprised frequently bullied students identified in Study 1. Sample size was pre-determined by a larger research project of which this study was a part. To determine whether power was adequate for the analyses conducted, post-hoc power calculations were conducted.

As the unit of analysis was student, but the unit of random assignment was school, power analysis took into account clustering of student responses within schools. With between group independent variables positive ICCs increase Type I error and negative ICCs increase Type II errors (Kashy & Kenny, 2000; Murray & Hannan, 1990; Olweus & Alsaker, 1991). Murray and Hannan provide an adjustment to the usual formula for sample size calculation for designs employing a

comparison of two conditions, to reflect intra-school dependence in group randomised data and the presence of a covariate. Table 14 shows the number of schools required per condition to detect a 'medium' effect, with power set at .80 and α = .05. With 15 schools in the intervention group and 14 in the control, all nested ANCOVAs, other than the follow-up analysis of parent-reported somatic symptoms, were sufficiently powered to detect a 'medium' effect.

Table 14

Number of Schools Required Per Condition for Power of .80 and α = .05 for each

Outcome Measure in the Primary Analyses

Measure	Post-intervention	Follow-up
	m	*M*
Self-report		
Victimisation	9	6
Depression	6	8
Anxiety	4	10
Peer relations self-concept	6	8
General self-worth	6	5
Parent-report		
Depression	14	14
Anxiety	14	10
Somatic	12	15

For primary analyses employing chi-square tests with 1 degree-of-freedom and an α of .05, 87 participants were required to detect a 'medium' effect size for power of .80 and for analyses with 2 degrees-of-freedom and an α of .05, 107 participants (J. Cohen, 1988, 1992). These participant requirements were met for all analyses

other than the post-intervention and follow-up analysis of parent-report unhealthy students who became healthy ($df = 1$, $N = 43$).

3.4 Results

3.4.1 Data Screening

3.4.1.1 Pattern responding. At pre-intervention, one (0.31%) case was removed from the self-report anxiety symptoms variable as all responses were "*yes*", and two (0.62%) from the peer relations self-concept and general self-worth variables for all responses being "*true*". Three (0.93%) cases at post-intervention and one (0.31%) at follow-up were removed from the self-report anxiety symptoms variable due to all responses being "*yes*". No cases were removed from parent-report variables.

3.4.1.2 Missing values. No variable had greater than 5% of cases missing at any assessment point, therefore no further analysis of missing cases within variables was conducted. Due to too many missing items, missing value replacement to create total scale scores was not conducted on the pre-intervention victimisation frequency scale in 12 (3.74%) cases, CDI in 1 (0.31%) case, RCMAS Anxiety in 1 (0.31%) case, SDQ Peer Relations Self-concept in 3 (0.93%) cases, SDQ General Self-worth in 3 (0.93%) cases, BASC Depression in 1 (0.39%) case, BASC Anxiety in 2 (0.78%) cases and BASC Somatic in 1 (0.39%) case. At post-intervention, missing value replacement was not conducted on the victimisation frequency scale in 18 (6.14%) cases, CDI in 1 (0.34%) case, RCMAS Anxiety in 3 (1.02%) cases, SDQ Peer Relations Self-concept in 2 (0.68%) cases, SDQ General Self-worth in 3 (1.02%) cases, BASC Depression in 2 (1.00%) case, BASC Anxiety in 2 (1.00%) cases and BASC Somatic in 2 (1.00%) cases. At follow-up, missing value

replacement was not conducted on the victimisation frequency scale in 4 (1.35%) cases and RCMAS Anxiety in 1 (0.34%) case.

The deletion of 18 (6.14%) cases at post-intervention from the analysis of the total score on the scale of victimisation frequency was investigated further. Eight (44.44%) cases were female, 10 (55.6%) male. There were no significant differences between deleted and retained cases on demographic or self-report psychological health variables. Furthermore, there was no significant difference in the proportion of cases removed from the intervention and control groups, χ^2 (1, $N = 293$) = 0.014, $p = .906$, $\phi^2 = .0004$. Analyses conducted with missing data replacement and with elimination of cases with missing data demonstrated no differences in research conclusions. Therefore, results of the data set employing missing data replacement, other than in the above cases, are reported.

3.4.2 Assumption Testing

For chi-square tests, assumptions of random sampling and independence of observations were both met by the research design. Fisher's exact test is reported for analyses with expected cell frequencies of less than five (Bryman & Cramer, 1994; Siegel & Castellan, 1988).

Assumptions of mixed fixed-random-effects ANCOVA used for the primary analyses include scale of measurement, random sampling and independence of covariate and treatments, which were all addressed by the research design (Tabachnick & Fidell, 2001a). To reduce the potential for violation of the assumption of independence due to the testing of students in class groups, students completed the questionnaire under examination like conditions with teacher support for behaviour management. The threat to non-independence of randomising schools,

rather than individuals, to groups was managed by treating school as an independent variable in the analysis (Tabachnick & Fidell).

Unequal sample sizes were managed by treating all cell sizes as equal in the analysis, a conservative approach recommended for experimental designs where cells are intended to be equal and dropout is random (Tabachnick & Fidell, 2001b). For self-report variables, victimisation frequency, depressive and anxiety symptoms were positively skewed, with peer and general self-worth negatively skewed, within levels of group and school. All parent-report variables were positively skewed. These distributions of raw scores reflect the distributions expected of the population on these measures. In the case of fixed-effects F-tests, skewed populations have very little effect on either significance level or power (J. Stevens, 1992).

The assumption of homogeneity of variance was investigated within levels of group and school, with violations by parent-report anxiety and somatic symptoms at post-intervention, and self-report depressive symptoms and general self-concept, and parent-report somatic symptoms at follow-up. In regard to covariates, parent-report pre-intervention depressive symptoms and somatic symptoms also violated this assumption. For analysis concerning these variables, a more stringent alpha level of .01 was employed (Tabachnick & Fidell, 2001b).

Within-group scatterplots showed linear relationships between each covariate (pre-intervention score) and dependent variable (post-intervention or follow-up score) for each level of group and school. Tests for homogeneity of regression showed no violation within any of the covariate and dependent variable pairs for each level of group and school. Pre-intervention score for each dependent variable was considered suitably reliable for use as a covariate, as indicated by coefficients discussed previously (see *Measures* section of Study 1 on page 65).

Univariate outliers in self- and parent-report psychological health variables within levels of group and school were inspected and considered valid. Analysis was conducted with and without univariate and multivariate outliers. As there were no differences in research conclusions results of the complete data set are reported.

3.4.3 Preliminary Analyses

3.4.3.1 Symptom monitoring. At pre-intervention, 60 students, 31 (17.6%) intervention and 29 (20.0%) control, were identified as having elevated self-report depressive and anxiety symptoms. Using adjusted cut-offs for age, 42 students, 26 (14.8%) intervention and 16 (11.0%) control, were identified at post-intervention. At follow-up, 30 students, 16 (9.1%) intervention and 14 (9.7%) control, were identified. There were no group differences in the proportion of students identified at pre-intervention (χ^2 (1, $N = 321$) = 0.162, $p = .688$, $\phi^2 = .0009$), post-intervention (χ^2 (1, $N = 293$) = 0.276, $p = .599$, $\phi^2 = .002$) or follow-up (χ^2 (1, $N = 296$) = 0.007, $p = .931$, $\phi^2 = .0003$).

At pre-intervention, student-reported elevated symptoms were discussed with 16.1% ($n = 5$) of intervention and 10.3% ($n = 3$) of control parents. At post-intervention, 23.1% ($n = 6$) of intervention and 43.8% ($n = 7$) of control parents and at follow-up 25.0% ($n = 4$) of intervention and 21.4% ($n = 3$) of control parents, contacted the researcher for discussion. There were no group differences in the proportion of parents with whom phone contact was made at pre-intervention (χ^2 (1, $N = 60$) = 0.078, Fisher's exact test $p = .708$, $\phi^2 = .007$), post-intervention (χ^2 (1, $N = 42$) = 1.131, Fisher's exact test $p = .187$, $\phi^2 = .047$) or follow-up (χ^2 (1, $N = 30$) = 0.000, Fisher's exact test $p = 1.0$, $\phi^2 = .002$). The proportion of parents of at-risk students receiving phone contact at post-intervention was greater for the control

group than the intervention group (43.8% versus 23.1%). The effect is far from

negligible, and might have failed to reach statistical significance because the chi-

square test had insufficient power to detect a moderate effect.

3.4.3.2 Pre-intervention group comparisons. Pre-intervention demographic

data for the intervention and control groups is presented in Table 15. No significant

group differences were found. There were also no significant pre-intervention group

differences on any of the bullying types. Appendix W provides frequencies and

group differences. Victimisation frequency mean scores did not differ significantly

between the groups. Similarly, there were no significant differences between group

means on self-report psychological health variables or parent-report psychological

health variables. Means, standard deviations and group differences are shown in

Appendix X. There were no significant pre-intervention group differences in the

proportion of self-, χ^2 (1, $N = 286$) = 0.014, $p = .905$, $\phi^2 = .0002$, or parent-reported

healthy students, χ^2 (1, $N = 172$) = 0.008, $p = .929$, $\phi^2 = .0004$.

3.4.3.3 Drop-out analyses. At post-intervention, there were significantly more

student, χ^2 (1, $N = 321$) = 5.410, $p = .020$, $\phi^2 = .020$, and parent, χ^2 (1, $N = 257$) =

10.069, $p = .002$, $\phi^2 = .043$, drop-outs in the control group. However, no significant

group differences were found at follow-up (student: χ^2 (1, $N = 321$) = 0.853, $p =$

.356, $\phi^2 = .004$; parent: χ^2 (1, $N = 257$) = 0.192, $p = .661$, $\phi^2 = .001$). No significant

pre-intervention demographic differences were found between drop-out and retained

students or parents at post-intervention or follow-up. Appendices Y and Z provide

pre-intervention demographic variables for the post-intervention and follow-up drop-

out and retained samples, respectively. Similarly, no significant pre-intervention

differences in frequency of bullying type were found between students who dropped

Table 15

Pre-intervention Descriptive Data and Group Differences for Self- and Parent-

Report

	Intervention (Student $n = 176$) (Parent $n = 142$)		Control (Student $n = 145$) (Parent $n = 115$)		
	M (SD)	*n (%)*	*M (SD)*	*n (%)*	Group Difference[a]
Student					
Age	8.60 (0.57)	173 (98.3)	8.62 (0.54)	143 (98.6)	$t(314) = -0.429$
Sex					
Female		88 (50)		69 (47.6)	
Male		88 (50)		76 (52.4)	$\chi^2(1) = 0.185$
IRSED	1000.38 (54.93)	176 (100)	1011.73 (69.95)	145 (100)	$t(270.88) = -1.596$
School Size	650.65 (180.68)	176 (100)	634.80 (158.13)	145 (100)	$t(319) = 0.827$
Parent[b]					
Age					
Under 25-29		15 (8.5)		12 (8.3)	
30-34		42 (23.9)		26 (17.9)	
35-39		51 (29.0)		41 (28.3)	
40-44		26 (14.8)		26 (17.9)	
45+		5 (2.8)		9 (6.2)	$\chi^2(4) = 3.896$
Not stated		37 (21.0)		31 (21.4)	
Relationship to Child					
Mother		130 (73.9)		104 (71.7)	
Father		9 (5.1)		8 (5.5)	$\chi^2(1) = 0.044$[c]
Other		0 (0)		2 (1.4)	
Not stated		37 (21.0)		31 (21.4)	
Education					
Year 10 or lower		41 (23.3)		31 (19.3)	
Year 11		14 (8.0)		13 (8.4)	
Year 12		22 (12.5)		9 (10.0)	
Trade/College		30 (17.0)		27 (18.2)	
University		26 (14.8)		25 (13.6)	
Other		5 (2.8)		10 (4.2)	$\chi^2(5) = 6.686$
Not stated		38 (21.6)		30 (26.1)	
IRSED	1001.01 (55.41)	142 (80.7)	1015.60 (69.00)	115 (79.3)	$t(216.507) = -1.839$
Country of Birth					
Australia		86 (48.9)		75 (51.7)	
New Zealand		11 (6.3)		6 (4.1)	
United Kingdom & Ireland		33 (18.8)		18 (12.4)	
Other		9 (5.1)		12 (8.4)	$\chi^2(3) = 3.976$
Not stated		37 (21.0)		34 (23.4)	

Note. IRSED = Index of Relative Socio-Economic Disadvantage.

[a]Analyses do not include the category 'not stated'. [b]Percentages are based on student sample of sample of 321, therefore 'Not Stated' includes parents who did not participate. [c]Category of other not included in analysis.

out or were retained at post-intervention or follow-up. Appendices AA and AB show frequencies and group differences.

Victimisation frequency pre-intervention mean scores did not differ significantly between post-intervention drop-out and retained students, nor did they at follow-up. Similarly, no significant pre-intervention differences were found between the post-intervention or follow-up drop-out and retained samples on self- or parent-report psychological health variables. Means, standard deviations and group differences are provided in Appendix AC. Investigation of student-report psychological variables for drop-out and retained parents at post-intervention and follow-up also showed no significant pre-intervention differences, suggesting that children of parents who dropped out did not differ in self-reported symptom levels to children whose parents were retained.

The proportion of students identified as healthy at pre-intervention did not differ significantly between post-intervention ($\chi^2(1, N = 320) = 0.291$, $p = .590$, $\phi^2 = .002$), or follow-up ($\chi^2(1, N = 320) = 0.012$, $p = .913$, $\phi^2 = .0003$) drop-out and retained students. Nor between post-intervention ($\chi^2(1, N = 256) = 0.355$, $p = .552$, $\phi^2 = .003$) or follow-up ($\chi^2(1, N = 256) = 0.375$, $p = .572$, $\phi^2 = .003$) drop-out and retained parents.

3.4.4 Primary Analyses

3.4.4.1 Victimisation outcomes. Frequently bullied status at all three observations was available for 91.0% ($n = 292$) of students. The proportion of students maintaining frequently bullied status reduced significantly over observations for both the intervention, Q (2, $N = 164$) = 191.929, $p = .000$, and control groups, Q (2, $N = 128$) = 152.974, $p = .000$, however, no difference between the groups was

observed at post-intervention, $\chi^2(1, N = 292) = 0.008$, $p = .929$, $\phi^2 = .00002$, or

follow-up, $\chi^2(1, N = 292) = 0.737$, $p = .391$, $\phi^2 = .002$. Table 16 shows frequencies

and group differences at each assessment point for frequently bullied status.

Table 16

Frequently Bullied Status and Group Differences at Pre-intervention, Post-

intervention and Follow-up

	Pre-intervention		Post-intervention		Follow-up	
	Intervention	Control	Intervention	Control	Intervention	Control
Victimisation	% (*n*)	% (*n*)	% (*n*)	% (*n*)	% (*n*)	% (*n*)
Frequent	100 (164)	100 (128)	32.3 (53)	32.8 (42)	26.2 (43)	21.9 (28)
Non-frequent			67.7 (111)	67.2 (86)	73.8 (121)	78.1 (100)

Note. $N = 292$.

For all types of bullying, there were no significant group differences at post-

intervention or follow-up. Table 17 shows frequencies and group differences for

each bullying type. Nested ANCOVA revealed no significant difference between the

intervention and control groups in frequency of victimisation at post-intervention,

$F(1, 27) = 0.101$, $p = .752$, $\eta^2 = .003$ or follow-up, $F(1, 27) = 0.416$, $p = .523$, $\eta^2 =$

.011. Tables 18 and 19 show raw and adjusted means, standard deviations and group

differences for the post-intervention and follow-up samples, respectively.

Table 17

Bullying Type Frequency and Group Differences at Post-intervention and Follow-up

Bullying Type	N	Post-intervention Percentage (n) Never	Some-times	Lots of times	χ^2	V	Follow-up Percentage (n) Never	Some-times	Lots of times	χ^2	V
Made fun of and teased in a hurtful way	263				0.241	.030				0.752	.053
Intervention		45.3 (67)	40.5 (60)	14.2 (21)			61.5 (91)	32.4 (48)	6.1 (9)		
Control		42.6 (49)	43.5 (50)	13.9 (16)			66.1 (76)	29.6 (34)	4.3 (5)		
Called mean and hurtful names	261				0.592	0.48				3.794	.121
Intervention		43.9 (65)	38.5 (57)	17.6 (26)			60.1 (89)	33.1 (49)	6.8 (10)		
Control		46.9 (53)	38.9 (44)	14.2 (16)			62.8 (71)	24.8 (28)	12.4 (14)		
Ignored, not allowed to join in, or left out	262				0.408	.039				1.323	.071
Intervention		61.2 (90)	26.5 (39)	12.2 (18)			68.7 (101)	25.2 (37)	6.1 (9)		
Control		57.4 (66)	28.7 (33)	13.9 (16)			68.7 (79)	21.7 (25)	9.6 (11)		
Hit, kicked or pushed around	267				0.909	0.58				0.419	.040
Intervention		64.0 (96)	22.7 (34)	13.3 (20)			72.0 (108)	22.0 (33)	6.0 (9)		
Control		61.5 (72)	27.4 (32)	11.1 (13)			75.2 (88)	18.8 (22)	6.0 (7)		
Lies or nasty stories spread	260				4.072	.125				2.345	.095
Intervention		51.4 (75)	34.9 (51)	13.7 (20)			63.0 (92)	28.1 (41)	8.9 (13)		
Control		55.3 (63)	24.6 (28)	20.2 (23)			69.3 (79)	26.3 (30)	4.4 (5)		
Money or other things taken or broken	255				3.361	.115				0.343	.037
Intervention		78.3 (112)	16.1 (23)	5.6 (8)			83.9 (120)	12.6 (18)	3.5 (5)		
Control		75.9 (85)	12.5 (14)	11.6 (13)			84.8 (95)	10.7 (12)	4.5 (5)		
Made afraid of getting hurt	258				0.137	.023				0.203	.028
Intervention		45.3 (95)	40.5 (39)	14.2 (10)			77.8 (112)	18.1 (26)	4.2 (6)		
Control		42.6 (73)	43.5 (32)	13.9 (9)			75.4 (86)	20.2 (23)	4.4 (5)		

3.4.4.2 Psychological health outcomes. Nested ANCOVA showed no significant differences at post-intervention between the intervention and control groups on self-report depressive symptoms, $F(1, 27) = 0.273$, $p = .604$ .05, $\eta^2 = .008$; anxiety symptoms, $F(1, 27) = 0.268$, $p = .608$, $\eta^2 = .008$; peer relations self-concept, $F(1, 27) = 0.005$, $p = .944$, $\eta^2 = .000$; or general self-worth, $F(1, 27) = 0.400$, $p = .842$, $\eta^2 = .001$. The mean depression and anxiety scores for both groups declined, while the mean peer relations self-concept and general self-worth scores increased for both groups. Similarly, no significant group differences were found for parent-report depressive symptoms, $F(1, 27) = 0.475$, $p = .494$, $\eta^2 = .009$; anxiety symptoms, $F(1, 27) = 0.052$, $p = .821$, $\eta^2 = .001$; or somatic symptoms, $F(1, 27) = .970$, $p = .330$, $\eta^2 = .020$. Table 18 shows raw and adjusted means, standard deviations and group differences for the post-intervention sample.

At follow-up, there were no significant group differences on student-report depressive symptoms, $F(1, 27) = 0.051$, $p = .823$, $\eta^2 = .001$; anxiety symptoms, $F(1, 27) = 1.442$, $p = .236$, $\eta^2 = .029$; peer relations self-concept, $F(1, 27) = 1.342$, $p = .253$, $\eta^2 = .032$; or general self-worth, $F(1, 27) = 2.734$, $p = .107$, $\eta^2 = .070$. The mean depression and anxiety scores for both groups declined. The mean peer relations self-concept and general self-worth scores increased for both groups. Similarly, no significant group differences were found on parent-report depressive symptoms, $F(1, 26) = .237$, $p = .629$, $\eta^2 = .005$; anxiety symptoms, $F(1, 27) = .319$, $p = .575$, $\eta^2 = .007$; or somatic symptoms, $F(1, 27) = 0.235$, $p = .630$, $\eta^2 = .003$. Mean scores declined for both groups. Table 19 shows raw and adjusted means, standard deviations and group differences for the follow-up sample.

Table 18

Means (Standard Deviations) and Group Differences in Self- and Parent-Report

Psychological Health at Pre- and Post-intervention

Measure and Group	*N*	Pre-intervention *M (SD)*	Post-intervention M_{raw} *(SD)*	$M_{adjusted}$ *(SD)*
		Student-report		
Victimisation				
Intervention	149	4.99 (3.42)	3.66 (3.42)	3.54 (3.45)
Control	117	5.64 (3.75)	3.73 (3.55)	3.67 (3.48)
Depressive symptoms				
Intervention	165	14.98 (9.70)	12.37 (9.46)	12.65 (7.93)
Control	126	15.82 (10.61)	12.35 (8.94)	12.09 (7.94)
Anxiety symptoms				
Intervention	163	14.38 (6.81)	12.21 (8.09)	12.22 (6.55)
Control	122	14.87 (7.08)	12.91 (7.63)	12.72 (6.58)
Peer relations self-concept				
Intervention	163	27.95 (9.04)	29.30 (8.38)	28.44 (7.37)
Control	123	26.28 (8.96)	28.46 (8.30)	28.51 (7.32)
General self-worth				
Intervention	162	31.33 (7.51)	32.08 (7.76)	31.68 (6.97)
Control	123	29.84 (7.71)	31.51 (6.64)	31.50 (6.92)
		Parent-report		
Depressive symptoms				
Intervention	119	11.52 (4.77)	10.59 (5.52)	10.41 (4.58)
Control	79	10.76 (5.52)	9.60 (5.30)	9.96 (4.73)
Anxiety symptoms				
Intervention	119	11.28 (5.09)	10.52 (5.29)	10.32 (4.46)
Control	78	10.19 (4.98)	10.00 (5.27)	10.46 (4.59)
Somatic symptoms				
Intervention	119	5.04 (3.99)	4.63 (4.35)	4.30 (2.90)
Control	79	4.28 (3.39)	4.30 (3.49)	4.74 (3.00)

Table 19

Means (Standard Deviations) and Group Differences in Self- and Parent-Report

Psychological Health at Pre-intervention and Follow-up

Measure and Group	*N*	Pre-intervention	Follow-up	
		M (SD)	M_{raw} *(SD)*	$M_{adjusted}$ *(SD)*
Student-report				
Victimisation				
Intervention	156	5.055 (3.55)	2.47 (2.76)	2.39 (2.91)
Control	126	5.55 (3.78)	2.48 (2.72)	2.64 (2.90)
Depressive symptoms				
Intervention	164	14.91 (9.72)	10.18 (8.32)	10.22 (8.63)
Control	131	15.69 (10.55)	10.56 (8.58)	10.44 (8.49)
Anxiety symptoms				
Intervention	162	14.25 (6.79)	9.75 (7.92)	9.80 (7.81)
Control	130	14.91 (7.05)	10.56 (7.58)	10.71 (7.73)
Peer relations self-concept				
Intervention	162	27.98 (9.04)	31.22 (7.04)	31.16 (6.97)
Control	129	26.45 (8.90)	30.34 (7.11)	30.21 (6.83)
General self-worth				
Intervention	162	31.40 (7.51)	34.05 (6.04)	33.90 (6.27)
Control	129	29.87 (7.66)	32.66 (6.16)	32.51 (6.13)
Parent-report				
Depressive symptoms				
Intervention	113	11.62 (5.06)	10.42 (5.40)	10.04 (4.44)
Control	88	10.34 (5.34)	9.04 (4.90)	9.72 (4.62)
Anxiety symptoms				
Intervention	113	11.28 (5.11)	10.87 (5.41)	10.53 (4.34)
Control	87	10.57 (4.91)	9.75 (4.63)	10.14 (4.54)
Somatic symptoms				
Intervention	113	4.87 (4.05)	4.50 (4.14)	4.34 (2.86)
Control	88	4.24 (3.46)	3.97 (3.53)	4.50 (2.98)

3.4.4.3 Clinical significance.

   3.4.4.3.1 Reliable change. Clinically significant improvement was shown on all outcome variables at post-intervention, however, there were no significant differences between the intervention and control groups. Clinically significant deterioration was also observed, although again, no significant group differences were observed. Table 20 shows group differences in the percentage of participants demonstrating clinically significant improvement or deterioration at post-intervention. Similarly, clinically significant improvement and deterioration was shown on all outcome variables at follow-up, however, no significant group differences were revealed. Table 21 shows the percentage of participants demonstrating clinically significant improvement or deterioration at follow-up.

Table 20

Reliable Change Improvement and Deterioration, and Group Differences for Self-

and Parent-Report Victimisation and Health Measures at Post-intervention

	Improvement			Deterioration		
	Intervention	Control		Intervention	Control	
	% (*n*)	% (*n*)	χ^2	% (*n*)	% (*n*)	χ^2
Student-report						
Victimisation						
Reliable change[a]	16.8 (25)	18.8 (22)		5.4 (8)	1.7 (2)	
No reliable change	83.2 (124)	81.2 (95)	0.185	94.6 (141)	98.3 (115)	c
Depressive symptoms						
Reliable change[a]	10.3 (17)	12.7 (16)		4.8 (8)	6.3 (8)	
No reliable change	89.7 (148)	87.3 (110)	0.408	95.2 (157)	93.7 (118)	0.310
Anxiety symptoms						
Reliable change[a]	24.5 (40)	16.4 (20)		11.0 (18)	5.2 (10)	
No reliable change	75.5 (123)	83.6 (102)	2.786	89.0 (145)	91.8 (112)	0.638
Peer relations self-concept						
Reliable change[b]	4.3 (7)	5.7 (7)		97.5 (159)	96.7 (119)	
No reliable change	95.7 (156)	94.3 (116)	0.294	2.5 (4)	3.3 (4)	c
General self-worth						
Reliable change[b]	4.3 (7)	8.1 (10)		6.2 (10)	2.4 (3)	
No reliable change	95.7 (155)	91.9 (113)	1.809	93.8 (152)	97.6 (120)	2.239
Parent-report						
Depressive symptoms						
Reliable change[a]	19.3 (23)	13.9 (11)		9.2 (11)	8.9 (7)	
No reliable change	80.7 (96)	86.1 (68)	0.975	90.8 (108)	91.1 (72)	0.008
Anxiety symptoms						
Reliable change[a]	11.8 (14)	9.0 (7)		8.4 (10)	11.5 (9)	
No reliable change	88.2 (105)	91.0 (71)	0.385	91.6 (109)	88.5 (69)	0.531
Somatic symptoms						
Reliable change[a]	5.0 (6)	2.5 (2)		5.0 (6)	6.3 (5)	
No reliable change	95.0 (113)	97.5 (77)	c	95.0 (113)	93.7 (74)	c

[a]For improvement, cases below clinical cut-off and less than -1.96 on Reliable Change Index. For deterioration, cases above clinical cut-off and greater than 1.96 on Reliable Change Index. [b]For improvement, cases above clinical cut-off and greater than 1.96 on Reliable Change Index. For deterioration, cases below clinical cut-off and less than -1.96 on Reliable Change Index. [c]Statistical analysis could not be performed as some cells had an expected count less than 5.

Table 21

Reliable Change Improvement and Deterioration, and Group Differences for Self-

and Parent-Report Victimisation and Health Measures at Follow-up

	Improvement			Deterioration		
	Intervention	Control		Intervention	Control	
	% (n)	% (n)	χ^2	% (n)	% (n)	χ^2
Student-report						
Victimisation						
Reliable change[a]	27.6 (43)	27.8 (35)		3.8 (6)	2.4 (3)	
No reliable change	72.4 (113)	72.2 (91)	0.002	96.2 (150)	97.6 (123)	[c]
Depressive symptoms						
Reliable change[a]	19.5 (32)	19.8 (26)		5.5 (9)	3.8 (5)	
No reliable change	80.5 (132)	80.2 (105)	0.005	94.5 (155)	96.2 (126)	0.450
Anxiety symptoms						
Reliable change[a]	32.7 (53)	29.2 (38)		8.0 (13)	6.2 (8)	
No reliable change	67.3 (109)	70.8 (92)	0.408	92.0 (149)	93.8 (122)	0.378
Peer relations self-concept						
Reliable change[b]	9.9 (16)	11.6 (15)		2.5 (4)	0.8 (1)	
No reliable change	90.1 (146)	88.4 (114)	0.231	97.5 (158)	99.2 (128)	[c]
General self-worth						
Reliable change[b]	7.4 (12)	12.4 (16)		2.5 (4)	2.3 (3)	
No reliable change	92.6 (150)	87.6 (113)	2.061	97.5 (158)	97.7 (126)	[c]
Parent-report						
Depressive symptoms						
Reliable change[a]	18.6 (21)	18.2 (16)		10.6 (12)	6.8 (6)	
No reliable change	81.4 (92)	81.8 (72)	0.005	89.4 (101)	93.2 (82)	0.877
Anxiety symptoms						
Reliable change[a]	13.3 (15)	9.2 (8)		10.6 (12)	6.9 (6)	
No reliable change	86.7 (98)	90.8 (79)	0.804	89.4 (101)	93.1 (81)	0.832
Somatic symptoms						
Reliable change[a]	7.1 (8)	8.0 (7)		4.4 (5)	6.8 (6)	
No reliable change	92.9 (105)	92.0 (81)	0.055	95.6 (108)	93.2 (82)	[c]

[a]For improvement, cases below clinical cut-off and less than -1.96 on Reliable Change Index. For deterioration, cases above clinical cut-off and greater than 1.96 on Reliable Change Index. [b]For improvement, cases above clinical cut-off and greater than 1.96 on Reliable Change Index. For deterioration, cases below clinical cut-off and less than -1.96 on Reliable Change Index. [c]Statistical analysis could not be performed as some cells had an expected count less than 5.

3.4.4.3.2 Clinical cases. Self-report data were obtained at all three

observations for 89.1% (*n* = 286) of frequently bullied students and parent-report

data for 53.6% (*n* = 172). Frequencies and proportions of healthy and unhealthy

students are shown in Table 22. There were no significant group differences in the

proportion of students identified as healthy or unhealthy at any time-point, for either

self- or parent-report.

Table 22

Frequencies and Group Differences of Clinical Range Symptoms in Frequently

Bullied Students at Pre-intervention, Post-intervention and Follow-up for Self- and

Parent-Report

	Pre-intervention				Post-intervention				Follow-up			
	% (*n*)	χ^2	*p*	ϕ^2	% (*n*)	χ^2	*p*	ϕ^2	% (*n*)	χ^2	*p*	ϕ^2
Self-report depression and/or anxiety symptoms												
Healthy												
Intervention	64.6 (104)				77.6 (125)				83.9 (135)			
Control	63.2 (79)				72.8 (91)				79.2 (99)			
Unhealthy												
Intervention	35.4 (57)				22.4 (36)				16.1 (26)			
Control	36.8 (46)	0.014	.905	.000	27.2 (34)	0.649	.420	.003	20.8 (26)	0.734	.391	.004
Parent-report depression, anxiety and/or somatic symptoms												
Healthy												
Intervention	75.8 (75)				74.7 (74)				77.8 (77)			
Control	74.0 (54)				82.2 (60)				82.2 (60)			
Unhealthy												
Intervention	24.2 (24)				25.3 (25)				22.2 (22)			
Control	26.0 (19)	0.008	.929	.000	17.8 (13)	0.955	.328	.008	17.8 (13)	0.269	.604	.003

3.4.4.3.3 Selective group (healthy). According to self-report, 64.0% ($n =$ 183) of frequently bullied students were healthy at pre-intervention. The proportion of healthy students who remained healthy at post-intervention was significantly greater for the intervention group (healthy = 97.1%, $n = 101$; unhealthy = 2.9%, $n =$ 3) than the control group (healthy = 87.3%, $n = 69$; unhealthy = 12.7%, $n =10$), $\chi^2(1, N = 183) = 5.102$, $p = .024$, $\phi^2 = .035$. The size of the effect, as measured by ϕ^2, was small. At follow-up, there was an increase in the proportion of intervention students who had become unhealthy and there was no significant difference between the intervention (healthy = 87.5%, $n = 91$; unhealthy = 12.5%, $n = 13$) and control groups (healthy = 87.3%, $n = 69$; unhealthy = 12.7%, $n = 10$), $\chi^2(1, N = 183) = 0.000$, $p = 1.0$, $\phi^2 = .000004$. Figure 4 illustrates the percentage of healthy students who were unhealthy at post-intervention and follow-up, as indicated by self-report.

Figure 4. Percentage of self-report healthy students at pre-intervention who were unhealthy at post-intervention or follow-up across intervention and control groups.

Of the frequently bullied students with parent-report data, 75.0% ($n = 129$) were identified as healthy. There were no significant group differences in the proportion of students who remained healthy at post-intervention (intervention

healthy = 90.7%, n = 68, unhealthy = 9.3%, n = 7; control healthy = 92.6%, n = 50,

unhealthy = 7.4%, n = 4), χ^2(1, N = 129) = 0.004, Fisher's exact test p = .761, ϕ^2 =

.001, or follow-up (intervention healthy = 89.3%, n = 67, unhealthy = 10.7%, n = 8;

control healthy = 96.3%, n = 52, unhealthy = 3.7%, n = 2), χ^2(1, N = 129) = 1.266,

Fisher's exact test p = .191, ϕ^2 = .016. Figure 5 illustrates the percentage of healthy

students who were unhealthy at post-intervention and follow-up, as indicated by

parent-report.

Figure 5. Percentage of parent-report healthy students at pre-intervention who were
unhealthy at post-intervention or follow-up across intervention and control groups.

3.4.4.3.4 Indicated group (unhealthy). According to self-report, 36.0%

(n = 103) of frequently bullied students were unhealthy at pre-intervention. There

was no significant group differences in the proportion of students who were healthy

at post-intervention (intervention healthy = 42.1%, n = 24, unhealthy = 57.9%, n =

33; control healthy = 47.8%, n = 22, unhealthy = 52.2%, n = 24; χ^2(1, N = 103) =

0.145, p = .703, ϕ^2 = .003) or follow-up (intervention healthy = 77.2%, n = 44,

unhealthy = 22.8%, n = 13; control healthy = 65.2%, n = 30, unhealthy = 34.8%, n =

16; χ^2(1, N = 103) = 1.261, p = .261, ϕ^2 = .017). Figure 6 illustrates the percentage

of unhealthy students who were healthy at post-intervention and follow-up according to self-report.

Figure 6. Percentage of self-report unhealthy students at pre-intervention who were healthy at post-intervention or follow-up across intervention and control groups.

Of frequently bullied students with parent-report data, 25.0% ($n = 43$) were identified as unhealthy at pre-intervention. No significant group difference in the proportion of students who were healthy at post-intervention (intervention healthy = 25.0%, $n = 6$, unhealthy = 75%, $n = 18$; control healthy = 52.6%, $n = 10$, unhealthy = 47.4%, $n = 9$; $\chi^2(1, N = 43) = 2.384$, $p = .123$, $\phi^2 = .081$) or follow-up (intervention healthy = 41.7%, $n = 10$, unhealthy = 58.3%, $n = 14$; control healthy = 42.1%, $n = 8$, unhealthy = 57.9%, $n = 11$; $\chi^2(1, N = 43) = 0.000$, $p = 1.0$, $\phi^2 = .00002$) was found. However, the proportion of unhealthy students who were healthy at post-intervention was greater for the control group than the intervention group (52.6% versus 25.0%). The effect is far from negligible, and might have failed to reach statistical significance because the chi-square test had insufficient power to detect a moderate effect. Figure 7 illustrates the percentage of unhealthy students who were healthy at post-intervention and follow-up according to parent-report.
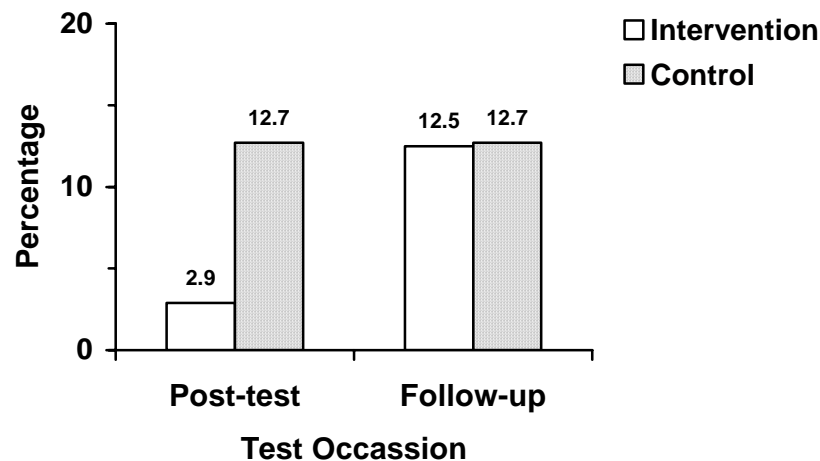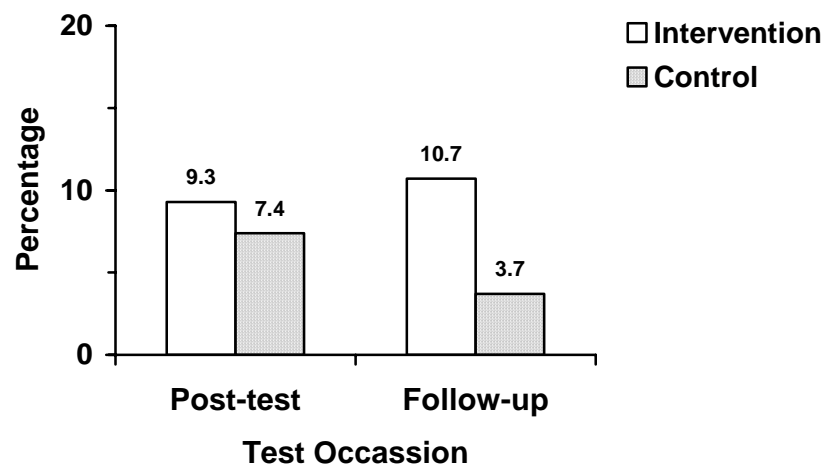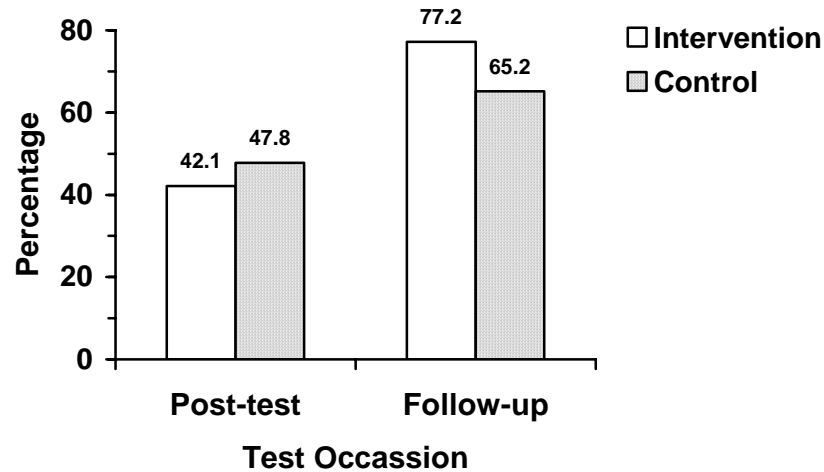
Figure 7. Percentage of parent-report unhealthy students at pre-intervention who were healthy at post-intervention or follow-up across intervention and control groups.
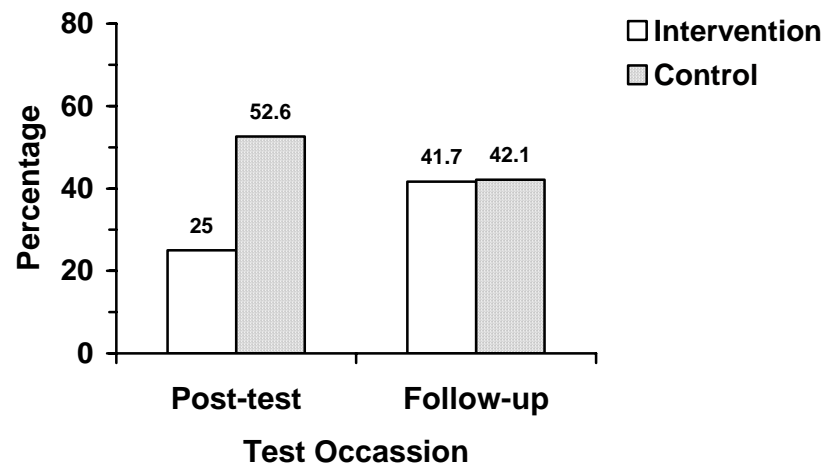
3.4.4.4 Summary of primary analyses. The proportion of students maintaining frequently bullied status, frequency of victimisation and frequency of bullying type all reduced over time, however, there were no significant group differences at post-intervention or follow-up. There were also no significant group differences for self- or parent-report psychological health outcomes. The proportion of self-report healthy intervention students who remained healthy at post-intervention was significantly greater in the intervention group than the control. At follow-up there was an increase in the proportion of healthy intervention students who became unhealthy, hence no significant difference between the groups was found. There were no significant group differences in the proportion of unhealthy students who became healthy. Clinically significant improvement and deterioration was shown on all outcome variables at post-intervention and follow-up, however, no significant group differences were observed.

3.4.5 Process Evaluation

    3.4.5.1 Implementation.

        3.4.5.1.1 Whole-school component. All schools developed a *Friendly Schools* core committee. Members included principals, deputy principals, teachers, parents, student services staff, school psychologists and school nurses. Committees met between 0 and 6 times over the three terms of intervention implementation, with an average of 3 meetings across schools. Seven (46.7%) schools used two to eight *Friendly Schools* newsletter items and six (40.0%) used all ten. The remaining two (13.3%) schools used no newsletter items. Reported use was validated by the collection of school newsletters. Twelve (80.0%) schools reported disseminating and/or utilising the questionnaire data provided by the research team for awareness raising and/or policy development. Of the remaining three schools, one used the results of a survey they ran themselves, one school coordinator could not comment as they had not seen the results, and at the remaining school the data were not disseminated beyond the principal.

    Fourteen (93.3%) schools engaged in revision or development of a bullying policy using the *Friendly Schools* intervention guidelines and materials and professional development. The other school addressed bullying within their Managing Student Behaviour policy and took little action toward development of a comprehensive bullying policy. There was wide variation in the degree of consultation with the school community taken during the process of developing a bullying policy, with some schools consulting very minimally and others engaging all groups within the school community. Across schools, consultation was undertaken with administration staff, teachers, non-teaching staff, parents and students through the *Friendly Schools* Core Committee, school council, Parents and

Citizens meetings, staff meetings and professional development occasions, parent

surveys, parent workshops, student surveys and draft policy dissemination to parents

and teachers. Eight (53.3%) schools completed a final draft of their bullying policy,

with half of these achieving dissemination. One school sent it home to families and

class teachers went over it with their students; one disseminated it to school staff

during school professional development, launched it at the school assembly and

encouraged teachers to discuss in class with their students; one distributed it to all

staff, teachers had worked through it with their students and parents were sent an

abridged take-home version; one distributed it to all teachers but no other members

of the school community. A variety of strategies planned for dissemination in the

following school year were reported. Collection of policies from schools supported

co-ordinator report of policy development and dissemination. The other five (33.3%)

schools intended to have a final draft ready by the end of the school year.

Ten (66.7%) co-ordinators reported their school had developed strategies for

managing bullying incidents that moved away from punitive techniques towards

incorporating problem solving and a shared concern approach to facilitating

behaviour change. However, coordinators reported that these approaches were not

necessarily implemented consistently across the school. Three (20.0%) reported that

their school maintained strategies that were already in place at the school which were

congruent with the *Friendly Schools* intervention.

Fourteen (93.3%) of the fifteen intervention schools participated in a whole-

school professional development workshop conducted by the *Friendly Schools*

research team for all school staff. Five of these were conducted in Term 2, however

nine were conducted in terms 3 and 4, leaving little time for engagement and

diffusion of knowledge and strategies prior to post-intervention.

3.4.5.1.2 Classroom curriculum component. Evidence of implementation of *Friendly Schools* lessons was obtained from teacher logs, teacher interview and student workbooks. Complete data for all nine lessons was obtained for 72.9% ($n = 35$) of teachers from logs and 87.5% ($n = 42$) from interview. Student workbooks were obtained from 95.8% ($n = 46$) of classes. As a core component of each lesson, activity sheet completion was considered an indicator of lesson implementation. Pearson's correlation coefficients were calculated between each source of evidence of number of lessons taught. High correlations suggest validity of the data collected, particularly in regard to the number of lessons taught as reported in the teacher log and interview. Correlations are shown in Table 23. Combining the log and interview data, information on the number of lessons taught was available for 97.9% ($n = 47$) of teachers. Of this number, 80.8% ($n = 38$) taught some, most or all of the nine lessons, 8.5% ($n = 4$) taught eight lessons, 2.1% ($n = 1$) seven lessons, 4.3% ($n = 2$) six lessons, 2.1% ($n = 1$) four lessons, and 2.1% ($n = 1$) three lessons.

Table 23

Intercorrelations Between Measures of Classroom Implementation

Measure	Teacher log lesson	Workbook activity sheet	Teacher interview activity sheet
Teacher interview lesson	.91*** ($n = 33$)	.73*** ($n = 41$)	.84*** ($n = 42$)
Teacher log lesson		.56*** ($n = 35$)	.81*** ($n = 33$)
Workbook activity sheet			.77*** ($n = 41$)

Note. $N = 48$.

***$p < .01$.

Table 24 shows the proportion of teachers who taught some, most or all of each

lesson as reported in the teacher log. The amount of lesson taught ranged between

66.7% of teachers implementing all or most of 'Self-Esteem Character Study', to

95.7% teaching all or most of 'What Is Bullying Behaviour'. This suggests that

whilst a high proportion of teachers implemented eight or nine lessons, between

4.3% and 23.8% of teachers implemented only *"some"* of the lesson.

Table 24

Amount Taught of Each of the Friendly Schools Classroom Lessons

	Amount taught							
	All		Most		Some		None	
Lesson	*n*	%	*n*	%	*n*	%	*n*	%
1. What is bullying behaviour?	31	67.4	13	28.3	2	4.3	0	0
2. Developing an action plan	25	54.3	14	30.4	6	13.0	1	2.2
3. How do we get peer support?	22	48.9	13	28.9	8	17.8	2	4.4
4. The bystander	19	44.2	19	44.2	5	11.6	0	0
5. Self-esteem: What is it?	13	30.2	19	44.2	10	23.3	1	2.3
6. Self esteem character study	12	28.6	16	38.1	10	23.8	4	9.5
7. Children's rights in a friendly school	12	31.6	19	50.0	6	15.8	1	2.6
8. Values for promoting friendly schools	15	39.5	12	31.6	9	23.7	2	5.3
9. Friendship skills	9	23.7	17	44.7	8	21.2	4	10.5

Note. N varies depending on response rate for each lesson.

3.4.5.1.3 Family component. The newsletter topic most read by parents was *'What Bullying Is'* (64.7%, *n* = 79); followed by *'Talking With Your Children About Bullying'* at 50.0% (*n* = 61); *'Helping Your Children to Respond Effectively to Bullying'* at 46.7%; *'Encouraging Your Children Not to Bully Others'* at 39.3% (*n* = 48); *'Taking a Whole School Approach to Bullying'* at 31.1% (*n* = 38); *'The Role of Bystanders'* at 20.5% (*n* = 25); and *'The Method of Shared Concern for Dealing with Incidents of Bullying'* at 17.2% (*n* = 21). The median number of newsletter item topics read was two (of seven, representing 28.6%), with 16.4% (*n* = 20) of parents identifying no newsletter item topics as having been read.

Parent completion of home activities ranged between 9.8% (*n* = 11) and 51.3% (*n* = 60) for each activity. Responses for all nine home activities were available for 90.2% (*n* = 110) of parents. Across this sample, the median number of home activities completed was two (of nine, representing 22.2%), with no activities completed or recalled by 29.1% (*n* = 32) of parents.

3.4.5.2 Group integrity. Twelve (80.0%) *Friendly Schools* coordinators reported that their school had engaged in strategies, activities or events that were not part of the *Friendly Schools* project but were aimed at reducing or preventing bullying and/or promoting positive peer relationships. Four (26.7%) schools ran a buddy system, involving the pairing up of older students with younger students for organised activities; four (26.7%) schools had peer mediation programs; one (6.7%) school sent a brochure home to all parents about bullying which had been developed and distributed to schools by the State Government; one (6.7%) school had a virtues program which involved students working in small groups on different virtues every fortnight; two (13.3%) schools had programs to keep students engaged at break times; one (6.7%) school had a student centre which was open for students at break

time and operated under an open and caring philosophy; and one (6.7%) school had every teacher discuss the school rules and values with their students for the first 10 minutes of each day.

To assess the integrity of the control group, principals of control schools were interviewed to ascertain action taken in relation to bullying prevention. Eleven (78.6%) of the 14 control schools had a bullying policy prior to involvement and seven (50.0%) had engaged in some modification or review of the policy during the year in which they participated in the research. Three (20.0%) control schools had changed their strategies for managing bullying incidents over the period of involvement in the research. These changes were characterised by a move away from punitive approaches to strategies that encouraged reflection on behaviour and problem-solving, increased communication within the school environment between administrators and teachers, and increased communication and involvement with parents.

Control schools reported a number of strategies and programs aimed at either reducing and preventing bullying or promoting positive peer relations, these included positive reward systems for encouraging cooperative and friendly behaviour; peer mediation programs; activities to increase co-operation; peer mentoring between older and younger students; life skills programs; and virtues and values programs. No school had engaged in a coordinated effort to address bullying within the classroom and whole-school environments and all activity utilised materials or resources currently available to all schools and indicative of regular policy and practice recommended by the Western Australian Department of Education and Training.

3.4.5.3 Satisfaction.

3.4.5.3.1 Whole-school component. The number of *Friendly Schools* core committee members from each school that attended the core committee training ranged from one to seven, with the average number being four. The whole school guidelines and activities presented at the training were perceived to be highly suitable or suitable for their school by 96.7% ($n = 59$) of committee members. The majority of participants thought the facilitators delivered information at the training very clearly or clearly (96.7%, $n = 59$). The length of the training was deemed suitable by 67.2% ($n = 41$) of participants, however, 29.5% ($n = 18$) thought it was too short. Most participants (86.9%, $n = 53$) believed the training provided them with sufficient skills to effectively carry out the *Friendly Schools* whole-school strategies, with 8.2% ($n = 5$) reporting that they needed more skills.

When interviewed, 12 (80.0%) *Friendly Schools* co-ordinators reported that the core committee training provided the professional development required to develop a whole school bullying policy. Of the three who answered no, one already had a policy and two reported finding the whole-school materials more useful than the training. Thirteen (86.7%) co-ordinators reported the core committee training provide the support required to develop a specific school strategy for managing bullying incidents. The remaining two schools commented that they were already engaged in the techniques presented at the training, so the training was more of an affirmation of current practice. In general, school coordinators commented that the training opened up the possibility of alternative methods of managing bullying incidents, but more time and ongoing help would have been beneficial to implementation of this aspect of the intervention.

According to co-ordinator report, only seven (46.7%) schools found the committee to be useful. Schools that did not find the committee useful reported reasons relating to the process of developing and maintaining the committee in their school. Reasons related to time, engaging parents in the process, commitment by members, scheduling meetings, staff departures, and assigning priority to the process. School coordinator comments are presented in Table 25.

Table 25

Coordinator Response to "Did your school find the Friendly Schools Committee to be useful?"

Response to "Did your school find the *Friendly Schools* committee to be useful?"	Comment
Yes	• "Kept the program alive" • "Other people to talk to" • "Useful for initial development of FS program in school and developing a bullying policy" • "[Provided] consistency at administration level with class activity" • "Developed policy and actions to implement" • "Someone in each area of school up to speed with what going on"
No	• "Committee was haphazard" • "Not at this stage, just setting things up, useful for establishing a basis for the program in the school" • "Committee didn't make a difference, how teachers managed classes, committee acted for communication" • "Never got off the ground to be useful" • "Didn't meet enough, potential if met more" • "Not because not good idea, didn't meet very often"
Not Sure	• "Raised awareness and monitoring, as far as reducing and preventing, that is in its infancy. Awareness yes, action don't know."

Fourteen (93.3%) co-ordinators reported the whole-school manual helped to

implement the whole-school component of the intervention. Co-ordinators

commented that the manual provided a useful framework that kept the school on task

and provided useful practical strategies. One (6.7%) co-ordinator reported that the

manual had not been used by the school. Fourteen (93.3%) of the fifteen

intervention schools participated in a whole-school professional development

workshop conducted for all school staff. Table 26 reports coordinator's responses to

being asked about the contribution this professional development made to whole-

school action.

Table 26

Coordinator Response to "What Contribution did the Friendly Schools whole school
professional development workshops make to whole school activity?"

- "Heightened awareness…gave the other side, deeper layers and why to get involved at this stage…at beginning some teachers felt no need to be involved"
- "Very well received by staff. Got people talking"
- "Everyone enthused"
- "Really raised everyone's interest level, spilled over to other year levels"
- "Rest of staff knew about program through reports from Yr 4 teachers and while saw value in taking elements and using in own class, didn't have enough info to do that well, workshop stimulated staff more and gave more information"
- "Raised awareness and acceptance"
- "Got teachers on side. Got teachers who weren't participating to want to come and look at books and use with own classes"
- "Best thing for developing school strategy for managing bullying incidents"
- "Promoted awareness"
- "Affirmation of how teachers handling things"
- "Clarified definition of bullying and some fallacies"
- "Limited contribution, not due to PD but teachers' interest and pressure"

Fourteen (93.3%) coordinators reported the newsletter items were useful.

Reasons included demonstrating the school's action on bullying, increasing parent

awareness and knowledge of how to respond, and ease of use. Feedback is provided

in Table 27.

Table 27

*Coordinator Response to "Did your school find the Friendly Schools newsletter
items useful?"*

Theme	Response
Ease of use	• "Able to put straight into newsletter with ease" • "Weren't too long and wordy" • "So easy to do, just forward on to newsletter" • "Organised for us, messages concise and consistent, easily understood, provided nice communication tool"
Demonstrated school's action	• "Good information, shows school is attacking the problem" • "Gave parents information about what doing, what trying to achieve
Increased parent awareness of the issue	• "Parents aware through newsletter items we are addressing bullying" • "Made parents more aware" • "Provided another way of communicating message to parents" • "Very useful in raising awareness, getting people thinking"
Increased parent knowledge of how to respond	• "Issue out there and parents knew alright to talk about it" • "Keeps parents informed, how they can play important role and not just teachers' problem" • "Good sequence and covered all areas and gave information parents could use themselves" • "Support basis for kids at home"
Other	• "Concentrated on behaviour and not child"

Thirteen (80.0%) of coordinators reported the *Friendly Schools* student and

parent questionnaire data were useful. Table 28 presents responses. Two

coordinators could not comment as they had not seen the data and one reported their

school had conducted their own survey.

Table 28

Coordinator Response to "Did you find the questionnaire data useful?"

- "Interesting, useful to find out what kids and parent thought, didn't guide any action though"
- "Demonstrated there was a problem and highlighted the type of bullying going on, a lot we weren't aware of"
- "Didn't realise all components of bullying and how much going on"
- "Interesting, helped us to see we didn't have a bullying problem
- "Very useful, highlighted subtlety of bullying"
- "Helped in policy development, showed need within school and community"
- "Provides a baseline, will use in school improvement plan"
- "Spent time using it while writing policy, good awareness tool, worth while to know the issue does need addressing"

Of the 83.3% ($n = 40$) of teachers who responded, 62.5% ($n = 25$) believed

their school had engaged in whole-school strategies supportive of the classroom

component of the *Friendly Schools* program, representing 80.0% ($n = 12$) schools.

Fifteen percent ($n = 6$) did not and 22.5% ($n = 9$) were unsure. When asked what

else could be done at the whole-school level to support learning and behaviour

change, the main theme to teachers' responses was that greater consistency in

language, attitudes, knowledge and response was needed across the wider school

environment so that students received consistent messages that supported their class-

level experience. Involving all year groups and teachers at the classroom level,

increasing whole-staff awareness, increasing communication between administration

and teachers and greater consistency in management of bullying incidents were all

reported by teachers as ways in which the learning and behaviour change facilitated

by the Year 4 classroom level of intervention could have been more supported.

3.4.5.3.2 Classroom curriculum component. Of the 48 intervention teachers, 45 (93.7%) attended the formal teacher training workshop. All teachers who attended strongly agreed or agreed they had learnt new information about bullying reduction and prevention. All strongly agreed or agreed the training was clearly presented and most (97.8%, *n* = 44) reported they had enough opportunities to ask questions and clarify information. All teachers reported the training would help them to teach the *Friendly Schools* classroom curriculum, that the *Friendly Schools* Teachers' Manual appeared easy to teach from and that they were looking forward to teaching the *Friendly Schools* lessons. In regard to teaching the classroom curriculum, the training left 64.4% (*n* = 29) of teachers feeling *"very prepared"*, 33.3% (*n* = 15) *"moderately prepared"* and 2.2% (*n* = 1) *"somewhat prepared"*. In the teacher interview, completed by 95.8% (*n* = 46) of teachers, 89.6% (*n* = 43) reported the *Friendly Schools* Year 4 classroom activities were appropriate to the developmental level of students (Year 4, aged 8 to 9 years). Three (6.3%) reported that some of the lesson components were slightly above Year 4 level, with no data for two teachers (4.2%).

Students were asked to report on their enjoyment of the *Friendly Schools* classroom and home activities, and parents were asked to report on their child's enjoyment of home activities. Table 29 presents self- and parent-report of students' enjoyment. Most students reported they had learnt what bullying is (80.1%, *n* = 133) from their participation in *Friendly Schools*. Behavioural skills for dealing with bullying were reported to have been learnt by 60.2% (*n* = 100) to 77.1% (*n* = 128), depending on the skill. Detail is provided in Table 30.

Table 29

Student Enjoyment of the Friendly Schools Classroom and Home Activities

	All		Most		Some		None		Unsure / Do not know		No response	
Activity	*n*	%	*n*	%	*n*	%	*n*	%	*n*	%	*n*	%
					Student-report							
Classroom	55	32.9	37	22.2	44	26.3	13	7.8	18	10.8	0	0.0
Home[a]	48	35.0	23	16.8	26	19.0	21	15.3	19	13.9	0	0.0
					Parent-report							
Home[b]	23	23.5	25	25.5	20	20.4	10	10.2	14	14.3	6	6.1

[a] 18.0% (*n* = 30) of students reported not doing any of the home activities, percentages reported are for the remaining sample.

[b] 20.7% (*n* = 24) of parents could not remember their child completing any home activities, percentages reported are for the remaining sample.

Table 30

Student Report of the Impact of the Friendly Schools Intervention

	Response					
	Yes		No		Not sure	
Impact	*n*	%	*n*	%	*n*	%
Learnt what bullying is	133	80.1	10	6.0	23	13.9
Learnt to stop someone bullying me	100	60.2	27	16.3	39	23.5
Learnt how to help students who are being bullied	110	65.9	16	9.6	41	24.6
Learnt to not bully others	128	77.1	13	7.8	25	15.1
Learnt to be friendly with other kids	118	70.7	15	9.0	34	20.4

Parents of 18.0% (*n* = 22) of students reported their child enjoyed participating in the *Friendly Schools* program *"a lot"*, 41.0% (*n* = 50) *"somewhat"*, 12.3% (*n* = 15) *"very little"*, 2.5% (*n* = 3) *"not at all"*, 22.9% (*n* = 28) did not know and 3.3% (*n* = 4) did not respond. Although a small percentage of parents (6.6%, *n* = 8) did not know the *Friendly Schools* program had been offered in their child's class, of the remaining sample, 86.8% (*n* = 99) were pleased the program had been offered, 3.5% (*n* = 4) were not pleased, 5.3% (*n* = 6) were unsure and 4.4% (*n* = 5) did not respond.

       3.4.5.3.3 Family component. Of those parents who read newsletter items (*n* = 102), 45.1% (*n* = 46) believed the items had increased their awareness of how to prevent bullying, 34.3% (*n* = 35) believed they did not because they were already very aware, and 20.6% (*n* = 21) already had some awareness which did not change. Most parents wanted the newsletter items to continue (79.5%, *n* = 97), with 4.9% (*n* = 6) reporting they did not, 12.3% (*n* = 15) not sure and 3.3% (*n* = 4) not responding.

The *Friendly Schools* home activities were believed to have increased their child's awareness of how to respond to bullying at school by 38.5% (*n* = 47) of parents, with 12.3% (*n* = 15) believing their child's awareness had not been increased as their child was already very aware, 12.3% (*n* = 15) believing their child had some awareness and the home activities did not change this, 0.8% (*n* = 1) believing their child had little awareness and this did not change, 25.4% (*n* = 31) not sure and 10.7% (*n* = 13) not responding. Of those parents who reported completing home activities with their child (*n* = 91), 74.7% (*n* = 68) reported the activities were useful for discussing the issue of bullying with their child, 8.8% (*n* = 8) reported they were not, and 16.5% (*n* = 15) were not sure.

       3.4.5.4 Summary of process evaluation. All schools developed a whole-school committee, which met on average three times. Most (86.7%) initiated the process of

policy revision or development, however, only half completed a policy and a quarter disseminated it by post-intervention. From two to all ten newsletter items were disseminated by 86.7% of schools and most (92.3%) parents reported reading at least one newsletter item. Reading of each item ranged between 17.2% and 64.7%. Questionnaire data were disseminated and/or utilised by 80% of schools. Strategies for managing bullying incidents that moved away from punitive techniques towards problem solving and shared concern were developed or retained by most (86.7%) schools. A whole-school professional development workshop for all school staff was conducted by the research team in most (93.3%) schools, however two thirds of these were conducted in terms 3 and 4, leaving little time for engagement and diffusion of knowledge and strategies prior to post-intervention. There was evidence of high rates of implementation of the classroom curriculum, with all nine lessons taught to 80.8% of classes and a further 8.5% receiving eight lessons. However, parent completion of homework activities and reading of newsletter items was low, with 16.4% reading no newsletter items, a third completing no homework activities, and two being both the median number of newsletter item topics read (out of seven) and homework activities completed (out of nine).

Intervention and control schools reported a range of strategies, activities or events that were aimed at reducing or preventing bullying and/or promoting positive peer relationships, other than *Friendly Schools*. However, these did not go beyond the scope of regular school policy and practice and therefore do not confound the results presented here.

The whole-school guidelines and strategies presented at the training were considered by participants to be suitable for the school environment and the training was reported to be clear and to have provided sufficient skills to carry out the whole-

school guidelines and activities, including development of a bullying policy and development of a formal strategy for managing bullying incidents. About half the schools found establishing a committee useful, reasons for why it was not useful related to the processes and practicalities involved in developing and maintaining a committee. The whole-school manual provided a useful framework for keeping schools on task and the whole-school professional development heightened awareness and understanding of bullying and the program, increased communication, and increased motivation. The newsletter items were viewed as useful, demonstrating schools' action on bullying, increasing parent awareness and knowledge of how to respond, and easy to use. Questionnaire data were perceived useful for heightening awareness of bullying, facilitating policy development, and providing a baseline from which to assess school level change. Teachers from 80.0% of schools believed their school had engaged in whole-school strategies supportive of the classroom component they had taught in their classroom.

Overall, teachers reported that the teacher training workshop was clearly presented, had taught them new information, would help them to teach the program, had left them feeling prepared to teach the program and that they were looking forward to teaching the program. The manual was viewed as easy to teach from and the learning activities appropriate to the developmental level of students. All, most or some of the classroom activities were reported to be enjoyed by 81.4% of students and in regard to home activities, 70.8% enjoyed some or more.   Similarly, according to parent report, 69.4% of students enjoyed at least some of the home activities. Most parents wanted the newsletter items to continue (79.5%), found the home activities useful for discussing the issue of bullying with their child (74.9%), and were pleased the program had been offered at their child's school (86.8%).

3.5 Discussion

This study investigated one-year (Year 4) program outcomes for frequently

bullied students and the maintenance, loss or enhancement of any effects following

school holidays and the start of a new school year, 4-months later. Given that

participants are not affected equally by an intervention, it is important to clarify how

participant characteristics influence outcomes, that is, to determine which children

benefit the most and the least (Durlak & Wells, 1998). This requires analysis of

subgroups within the population to determine whether intervention effects are

different to those of the total population (Barrett & Turner, 2001). The current study

aimed to implement and assess the effectiveness of the first year of a universal

school-based bullying preventive intervention (*Friendly Schools*) in reducing and

preventing peer victimisation and psychological health maladjustment in frequently

bullied students. To facilitate understanding of changes, or lack thereof, in

outcomes, a further aim of the current study was to investigate program use and

satisfaction.

3.5.1 Victimisation Outcomes

There was no support for the hypothesised difference in the proportion of

students maintaining frequently bullied status who received one-year of the *Friendly*

Schools intervention compared with those who did not, at post-intervention or 4-

month follow-up. Both the intervention and control groups demonstrated a reduction

in the proportion of students maintaining frequently bullied status over time. At

post-intervention, about one-third of frequently bullied students in both groups

remained frequently bullied. At follow-up, one year post-baseline, about one-quarter

of students in both groups maintained frequently bullied status. This stability

occurred in a new school year, with a new teacher and new class group and was consistent across both groups, indicating that despite the activities engaged in by intervention schools, for the students most affected by bullying the experience was both pervasive and resistant to change. This group of students is of particular concern as continuing victims have been shown to be the worst affected on measures of school and psychological adjustment (Goldbaum et al., 2003; Kochenderfer & Ladd, 1996; P. K. Smith et al., 2004).

In comparing the stability reported here with other studies reporting proportions, Paul and Cillesson (2003) found 65% of grade 4 students identified as bullied were also identified in grade 5. Also using peer nomination, Hanish and Guerra (2004) reported one-fourth of non-aggressive victimised students and one-third of aggressive victimised students identified in grade 4 remained so two year later. These stability proportions, particularly that of Paul and Cillesson over the same time period, are higher than reported here. However, these studies used peer nomination to identify bullied students. The difference in methodology and the finding that children's social status is difficult to change, even when behaviour changes (Merton, 1996) may explain the lower stability found here using self- and parent-report.

Using self-, parent- and teacher-report, Kumpulainen et al. (1999) found 15% of bullied students to be bullied and 7% to be both bullied and bullying others, four years later. Of students both bullied and bullying others, 24% maintained this status and 7% were bullied only, four years later. Combining these figures to include students bullied only and both bullied and bullying others, 26% of victimised students were victimised four years later, similar to the proportion reported one year later in the current research. Comparisons should be made with caution however, as

bullied students were identified differently than in the current research. Kumpulainen et al. (1999) classified students' status according to victimisation or bullying being reported as frequent, defined as *"almost every day"*, by any informant or *"sometimes"* by two or more informants.

One-year program effectiveness was also investigated at the level of change in the proportion of students experiencing different types of bullying and in mean score differences on the scale of victimisation frequency. For all types of bullying, the proportion of students reporting they were bullied in that manner decreased over observations. However, there were no significant group differences at post-intervention or follow-up. Similarly, on the scale of victimisation frequency, group means reduced over time, but no group differences were found.

Of interest, is whether the lack of change in outcomes is the result of the program being ineffective universally, or whether the intervention was ineffective at one-year for at-risk students (Greenberg et al., 2001). Analysis of the *Friendly Schools* program at the universal level found that intervention students were less likely than control students to be bullied occasionally (once or twice a term) at post-intervention (Cross et al., 2005). This finding indicates that one-year implementation of the program was effective at the universal level for students bullied at the lesser end of the frequency spectrum. Sharp et al. (2000) argue that for students experiencing victimisation of greater frequency, the experience is likely to be persistent and resistant to common school-level procedures, an argument supported by the findings reported here.

A disadvantage of universal intervention is that while there are potential benefits for many, the dose received by participants is relatively low compared to targeted approaches, which are able to provide a greater degree of individualised

attention and focus on program components of most importance to at-risk students (Gillham et al., 2000). As a result, the diluted dose provided by universal programs may not be sufficient to alter the developmental pathway to maladjustment for at-risk children (Greenberg et al., 2001; Roberts, Kane, Bishop, Matthews, & Thomson, 2004). Students who are frequently bullied may suffer the greatest deficits in social competence, emotional regulation, coping skills, and friendships, and the severity of these deficits may make their victimisation experiences less amenable to change by universal strategies designed for all students.

3.5.2 Psychological Health Outcomes and Clinical Significance

The *Friendly Schools* intervention was not associated with improvement in mental health or self-perceptions in frequently bullied students at either post-intervention or follow-up. For both groups, mean depression and anxiety scores declined and mean peer relations self-concept and general self-worth increased. A significant school effect was found for self-report anxiety at post-intervention with 14.8% of variance in anxiety symptoms accounted for by school. No other school effects were found at post-intervention or follow-up. In outcome research, investigation of clinically significant change supplements the analysis of group means comparisons by investigating the variability of individual outcomes within the sample (Hawley, 1995; Jacobson & Truax, 1991). Clinically significant improvement and deterioration was shown on all outcome variables at post-intervention and follow-up, however, no significant group differences were observed, indicating that within groups, the proportion of students showing clinically significant change did not differ.

About two-thirds of frequently bullied students reported sub-clinical levels of depressive and/or anxiety symptoms at pre-intervention. In this psychologically healthy group of students a prevention effect was revealed, with a greater proportion of the intervention group remaining healthy at post-intervention, compared to the control group. At follow-up, the proportion of intervention students who had become psychologically unhealthy increased and the groups were no longer significantly different. This result indicates that for frequently bullied students with sub-clinical levels of internalising symptoms, the *Friendly Schools* intervention had a preventive effect, stemming the development of clinical levels of symptoms. However, the effect was short lived and not maintained into the new school year. The follow-up assessment was conducted after the end-of-year school holidays and 8 weeks into a new school year. At the class level, students had a new teacher, were in different class groups and were not yet receiving *Friendly Schools* classroom curriculum and family activities for Year 5. Schools may have continued with whole-school strategies developed and implemented the year before, however second year support and materials had not yet been provided by the research team. Given these conditions, the absence of a maintenance effect over this period highlights the need for sustained intervention over time.

The prevention effect revealed by students' self reports, was not observed in the reports of parents, with no significant differences between the intervention and control groups in the proportion of students that remained healthy at post-intervention or follow-up. This may be because children can report more accurately about their internal states than parents. Children are more likely to report internalising symptoms than parents, with parent-child agreement less likely for internalising symptoms than for overt behaviour problems (Edelbrock, Costello,

Dulcan, Conover, & Kalas, 1986). However, another possible explanation, supported by the small size of the student-reported effect, is that the changes were too subtle for others to detect.

Just over one third of frequently bullied students reported symptoms of depression and/or anxiety in clinical ranges at pre-intervention, with one-quarter identified as unhealthy by parent-report of depression, anxiety and/or somatic complaints. There were no group differences in the proportion of students who became healthy at post-intervention or follow-up according to either student- or parent-report. These findings indicate that the first year of the universal *Friendly Schools* intervention did not reduce symptoms for frequently bullied students with clinical levels of symptomology, over and above the effects observed in students attending schools with regular policy and practice. Overall, these results suggest that a universal intervention, namely, *Friendly Schools*, is able to achieve a preventive impact on the development of clinical levels of internalising symptomology in an at-risk population, but that the impact is limited to immediately after the program.

A universal approach is highly suitable to the school environment, offering economy, practicality and reduced stigmatisation for victims. However, for frequently bullied students experiencing clinical levels of distress, such an approach appears less promising, suggesting the need for targeted intervention to effectively meet the mental health needs of these students. A recent example of the type of program and effects desirable for these children, is demonstrated by DeRosier (2004). Employing a heterogenous group of rejected, victimised and socially rejected children, DeRosier investigated a Social Skills Group Intervention (S.S.GRIN) with third-grade students. The program included behavioural and cognitive social skills, reinforcement of prosocial attitudes and behaviour, and

promotion of adaptive coping for social problems, such as bullying. Positive post-intervention treatment effects were found for all three sub-groups, with increases in self-reported self-esteem and social self-efficacy and decreases in social anxiety and peer problems. At one-year follow-up, additional self-reported treatment effects of higher social acceptance and self-esteem and lower depression, anxiety and aggression were found (DeRosier & Marcus, 2005). Furthermore, peers reported that treatment children were significantly less disliked and fought less with peers. This study supports the efficacy of targeted approaches for children comprising selective and indicated levels of risk.

3.5.3 Process Evaluation

Implementation of the three components of the *Friendly Schools* program varied. The component achieving the greatest degree of implementation was the classroom curriculum. Over 80% of teachers taught all lessons, with only 4% teaching less than two-thirds. Program implementation is enhanced by high levels of program acceptability and the provision of training perceived to provide the knowledge and skills necessary for implementation (Basch et al., 1985). It is therefore likely that the high rate of implementation achieved related to the high level of acceptability observed in teachers' reports of the resources being useful, easy to teach from and developmentally appropriate, the high rate of training attendance, and teachers' perceptions of training as having increased their knowledge and prepared them for teaching the program.

The level of program use by parents of the targeted sample, as measured by completion of homework activities and reading of newsletter item topics, was low overall. Difficulty in engaging parents is common in school-based research (D.

Cohen & Linton, 1995; Hahn, Simpson, & Kidd, 1996; Klitzner, Bamberger, &

Gruenwald, 1990). What was positive however, was the high degree of program

acceptability. Of parents who did engage in these activities, most wanted the

newsletter items to continue and found the home activities useful for discussing

bullying with their child. Moreover, the majority of parents were pleased the

Friendly Schools program was implemented at their child's school. At the student

level, most students reported enjoying at least some of the classroom activities and

home activities.

While all intervention schools established a whole-school committee and most

initiated the process of revision or development of a bullying policy, only half

completed a policy and one quarter had disseminated it by post-intervention,

although a variety of strategies were planned for dissemination the following year. A

further one-third intended to have a final draft ready by the end of the school year.

Most schools placed newsletter items in their school newsletter, although less

than half used all ten items. Most disseminated and/or utilised the questionnaire data

provided by the research team for awareness raising and/or policy development and

most schools reported implementing strategies to manage bullying that moved away

from a punitive approach towards a problem solving and shared concern approach to

behaviour change. Most schools participated in whole-school professional

development workshops provided by the research team, although more than half of

these were conducted in the later part of the school year, close to the post-

intervention data collection. Teachers from most intervention schools believed their

school had engaged in whole-school strategies supportive of the classroom

component they had taught in their classroom.

Overall, schools made solid efforts to engage in the whole-school component of the intervention. What appears clear though is that schools required more than one year to achieve the goals of policy dissemination and implementation, and therefore the post-intervention and follow-up data collections are unlikely to reflect the full impact of these program components.

The training and content of the whole-school core committee training was perceived by participants as suitable for schools, clear and skill building. While half the schools found establishing a committee useful, the reasons provided by those that did not related to the processes and practicalities involved in developing and maintaining a committee, particularly with different members of the school community. School coordinators reported that the resources and support provided, such as the whole-school manual, newsletter items, questionnaire data and professional development, were useful and easy to use, heightened awareness and understanding of bullying and the program, facilitated policy development, increased communication and increased motivation to address bullying.

The research design employed aimed to compare the impact of the *Friendly Schools* program with the standardised state health curriculum and recommended policy and practice concerning bullying. Investigation of the integrity of the intervention group showed that many schools had engaged in strategies, activities or events aimed at reducing or preventing bullying and/or promoting positive peer relationships that were not part of the *Friendly Schools* program. Similarly, control schools also evidenced such activity. However, all activity utilised currently available support and resources indicative of regular policy and practice and no control school had engaged in a coordinated effort across the classroom and whole-school environments to reduce bullying. These findings indicate that the integrity of

the intervention and control groups was maintained and that any observed effects can be attributed to the *Friendly Schools* program.

3.5.4 Strengths and Limitations

Few studies of bullying preventive intervention have employed randomised controlled trials and in a recent review of interventions employing a health promoting schools approach, only one study employed a randomised controlled trial (Mukoma & Flisher, 2004). A strength of the current study was the employment of a group randomised controlled trial stratified for school size and socio-economic status. This study had adequate power to detect moderate effects and employed analyses that accounted for random allocation of groups to condition and the resulting clustering within the data. Multiple informants provided outcome data related to behavioural and psychological change and program use and satisfaction, increasing the validity of the findings.

As noted in Study 1, all schools approached to participate were recruited. Furthermore, 95% of the total Year 4 sample of students participated and of the frequently bullied students identified, 80% of parents participated. Loss of participants at follow-up has been identified as a major problem in prevention research (Spence, Sheffield, & Donovan, 2003). However, in the current study more than 90% of the frequently bullied student sample participated at post-intervention and follow-up. At post-intervention, nearly 70% of intervention parents and more than 50% of control parents participated, and at follow-up more than 60% of parents participated in each group. This participation rate is noteworthy, given rates as low as 20% at post-intervention and follow-up have been reported in other school-based research investigating psychological outcomes of universal intervention (Lowry-

Webster, Barrett, & Lock, 2003). Response rates for process data were very high, with all schools engaging in whole-school interviews and 98% of teachers completing at least one measure of classroom curriculum implementation. For students and parents, process measures were contained within the post-intervention questionnaire, therefore more than 90% of students and nearly 70% of parents in the intervention group reported on use and satisfaction with the *Friendly Schools* program.

The response rate of the current study was achieved by following-up students absent on the day of group administration and those who had moved schools, providing school newsletter reminders and incentives for parents, and engaging teacher support in encouraging and reminding parents. Furthermore, parents' perceptions of the importance and relevance of the topic, and developing relationships with schools and teachers that promoted perceived value in the evaluation process, contributed to the response rate. The aspects of the design highlighted here, and the high participation rate, make the results of this study highly generalisable. However, some caution is warranted in regard to parent-report data, where analysis of selective participation showed that the students of parents who did not participate, reported greater victimisation frequency and student depressive symptoms at pre-intervention.

This study measured frequency of bullying, using this to identify a targeted cohort of students who were followed over time. The duration for which students were bullied was not accounted for however. That is, while all students at pre-intervention were identified as frequently bullied, the length of time they had endured this experience was not known. This is a possible confounding variable, potentially impacting on the outcomes assessed. Few studies have investigated the

impact of victimisation duration, however it may be an important factor in the development and maintenance of adjustment problems, with evidence suggesting that the longer victimisation occurs, the greater the risk for maladjustment (Kochenderfer-Ladd & Wardrop, 2001).

Sharp et al. (2000) found that the more frequently students were bullied, the greater the duration of the experience. This finding suggests that the students in this study are likely to be those experiencing longer durations of victimisation. Within the frequently bullied sub-group there may be a further sub-group of students, those who are victimised frequently and chronically. Students with high frequency and duration of peer victimisation may be the most severely distressed and most resistant to change using universal strategies. In support of this, increases in duration of victimisation have been associated with increases in school adjustment problems (Kochenderfer & Ladd, 1996). Further research into the effect of duration on psychological maladjustment and the relationship between frequency and duration is of interest.

In the analysis of implementation dose, the measurement of curriculum dose was limited as it was based on teacher report of lesson implementation only, with student attendance unaccounted for. Ideally, teachers would have been asked to provide this information however, to encourage participation teacher measures were kept to a minimum. Furthermore, the process measures obtained did not provide information about the quality of program delivery. Investigating the implementation of a preventive intervention classroom curriculum, Roberts et al. (2003) observed subtle qualitative differences in the quality of teacher implementation that were difficult to quantify. Furthermore, teacher modification to lessons was not investigated.

Similarly, for the whole-school component, the dose measure obtained did not include the quality of activity undertaken or of the final policy. A further limitation of the whole-school process data is that it was based on interview data from one source, although effort to corroborate reports was made by collection of school policies and newsletters. Finally, scoring of interview data by multiple independent raters would have added validity to the analysis of this measure of dose. Despite these limitations, a strength of this study lies in its effort to determine whether the intervention took place as intended and to investigate the relationship of implementation to program outcomes, particularly in light of the call for greater attention to implementation issues in prevention research (Durlak & Wells, 1997; Greenberg et al., 2001).

To help educators choose among prevention programs, a criterion of content that covers two or more consecutive school years has been put forward based on research indicating two or more years of programming has significantly greater impact on behaviour than a single year (Catalano et al., 2002; DeV. Peters, Petrunka, & Arnold, 2003; Mukoma & Flisher, 2004; Payton et al., 2000; St Leger, 2001; Weissberg et al., 1991). In bullying prevention, Olweus (1991; 1993a) found greater effects after two-years of implementation in comparison to one-year. Furthermore, in reference to at-risk groups, Greenberg et al. (2001) concluded that preventive interventions can produce time-limited benefits, but for enduring benefits multi-year programs are required. *Friendly Schools* was designed to be a two-year program, with curriculum for Years 4 and 5 and whole-school strategies and support continuing into the second year. The current study investigated outcomes of the first year of the *Friendly Schools* program with Year 4 students. While implementation of the personal skills focused classroom curriculum was high, the overall dose was

therefore at most 50% of what was intended over the full two years of the program. At the whole-school level, in those schools that completed a whole-school bullying policy, dissemination and implementation did not occur until the last term of the school year, providing little time for diffusion and impact prior to post-intervention. Investigating program effects following two years of program implementation is therefore required to better inform conclusions on the effectiveness of this universal program on frequently bullied students.

Effective prevention programs focus not only at the level of the child, but also facilitate positive changes in the school and home environments, focusing not only on the child's knowledge, attitudes and behaviour, but also that of school staff and parents, on the relationship between home and school, and the needs of schools to support health (Greenberg et al., 2001). A recent review found that while most health promoting schools programs covered personal skills through the health-related curriculum, few concurrently employed strategies that targeted the school environment or community participation (Deschesnes et al., 2003; Mukoma & Flisher, 2004). This study investigated a program that aimed to focus as much on whole-school policy and practice and parent involvement, as the individual-level curriculum.

The *Friendly Schools* program is supported by resources and professional development, requires minimal training, is relatively inexpensive, fits well into the working environment of schools, and is holistic in its approach to health, factors required for uptake, sustainability and effectiveness of programs in schools (Spence et al., 2003; St Leger, 2001). Furthermore, positive perceptions of the training and program were reported by teachers, students and parents. It is worth noting that in

the present study the perceptions reported are of those at the coalface of the

phenomenon of interest, that is, frequently bullied students and their parents.

Finally, in the present research students were categorised as frequently bullied.

While the cut off was not arbitrary, as the aim was to identify a high risk cohort

based on frequency of victimisation, the distinction made does not necessarily exist

naturally. Moreover, the cut-off does not take into account all of the characteristics

of victimisation that may increase risk for adjustment problems, such as duration.

The distinction made should not be interpreted as suggesting that victimisation of

lesser frequency is not cause for concern. Students bullied 2 or 3 times a month have

been shown to have significantly poorer psychosocial adjustment than students

bullied only once or twice a term (Solberg & Olweus, 2003). Furthermore, even

infrequent victimisation may be associated with negative outcomes when children

cope in maladaptive ways (Kochenderfer-Ladd & Skinner, 2002). However, the aim

of this study was to identify a targeted sub-sample of victimised students comprising

selective and indicated groups to determine the impact of universal intervention on

victimisation and psychological health.

3.5.5 Conclusions and Future Directions

For at-risk students, prevention should aim to prevent unnecessary suffering

and maladjustment and reduce the need for future treatment (Durlak & Wells, 1997).

While it was promising to find a prevention effect in regard to the post-intervention

maintenance of the psychological health of the selected sample, the effect was not

maintained at follow-up. Furthermore, in terms of the treatment effects of reducing

victimisation and symptom levels and improving self-worth, the current study

suggests that the needs of students comprising an indicated sample may extend

beyond the boundaries of effectiveness of universal intervention strategies, at least following one-year of implementation.

One reason why universal programs may be ineffective for at-risk groups is that they are too short (Gillham et al., 2000). Furthermore, Sandler (1999) argues that prevention programs be judged according to their impact on outcomes over time. As this study investigated outcomes following the first year of an intended two-years of *Friendly Schools* implementation, analysis of two-year data is of particular interest and will shed further light on the influence of program duration. Moreover, further research is required regarding what strategies are most effective for students who are victimised, particularly frequently, and those who are victimised and showing symptoms of depression, anxiety, diminished self-worth and/or somatic complaints. In the short term, training school staff to recognise high-risk students and referring them to appropriate services may be one way of ensuring the additional needs of these students are met.

In the area of victimisation there is limited evidence of causal pathways. While there is growing evidence of the risk and protective factors associated with victimisation and adjustment problems, much is still required in terms of our understanding of the patterns and clusters of risk and protective factors, and which are most salient. In multi-component programs, it is difficult to identify which elements contribute to the outcomes achieved (Durlak, 1998). Further research into which risk and protective factors targeted by the program resulted in the preventive effect observed is warranted. By identifying the most active parts of the program, efforts can be streamlined and time and resources focused where needed most.

For about 25% of students bullied once a week or more often, victimisation of this frequency continued 12 months after the initial assessment and into a new school

year. For these students, being bullied appears to be a pervasive part of their school experience and resistant to universal prevention strategies. However, it is positive that about three-quarters of frequently bullied students did not maintain this status 12 months later. The *Friendly Schools* program did not produce this effect however, as it was observed in both the intervention and control groups. Research is emerging that investigates differences between students who remain victimised and those who 'escape' or 'desist' (Goldbaum et al., 2003; Hanish & Guerra, 2004; P. K. Smith et al., 2004), with further research of this nature salient to designing interventions that enable students to break free of continued victimisation. Moreover, in regard to those students who are able to change their involvement, questions regarding what happens to these students in regard to the frequency of victimisation experienced and their acceptance by the peer group are of interest.

It is important to find out why some individuals who experience particular major stressors do not experience significant psychological difficulties (Coie et al., 1993; Spence, 1996a). In this context, further investigation of the two-thirds of frequently bullied students who did not report clinical levels of depressive and/or anxiety symptoms is warranted. This requires investigating variables that potentially mediate or moderate the relationship between victimisation and mental health. While further research is needed, current research implicates factors operating at the individual and peer levels, such as duration of bullying, cognitive style, social support, friendship, and coping, as well as variables related to the family and school environments, such as warmth, secure attachment, support and connectedness. Research in this area will guide the development of interventions that work not only toward reducing victimisation but also buffering students from its effects.

In suggesting targeted approaches are required to effectively meet the needs of frequently bullied students, the importance of intervening universally should not be lost. Intervention is required that removes victimisation from students' lives as much as possible. If the whole-school community is not the focus of change, the processes that contribute to peer victimisation will continue to operate (Hanish & Guerra, 2000a). Moreover, research has shown the effect of school-based targeted intervention can be strengthened when the broader school community are affected through universal intervention (Lochman & Wells, 2002). By embedding targeted approaches for peer victimised children within a whole-school approach, socially contextual factors associated with bullying are addressed, and opportunity and reinforcement is provided not only for bullied students, but also for students who bully, bystanders, school staff and parents to engage in new skills and interactions that support positive peer relationships and psychological health.

Finally, this research focused on frequently bullied students. Students who bully others are also an at-risk group requiring attention. Future research into the impact of bullying preventive intervention on the psychological and physical health of this sub-group within the universal sample is also important.

CHAPTER 4

General Discussion

Taking a single informant approach, 12% of students reported being bullied "about once a week" or more often and 9% of parents reported their child to be bullied that frequently. The current research used this cut-off to identify a targeted sample of students experiencing frequent bullying at school. Taking a multi-informant approach, 16% of Year 4 students were identified as frequently bullied. This result is generalisable to the Australian context, given the large, stratified and randomly selected sample, however it is limited to the 8-9 years age group.

While self-report questionnaires are considered the most appropriate form of measurement when investigating the prevalence and nature of bullying (Solberg, 2003 #555), the importance of taking a multi-informant approach was highlighted in the current research. By including the report of parents, a further 5% of students not identified by self-report were identified as frequently bullied, constituting 32% of the frequently bullied sample. Rather than a result of parents' over-reporting, the finding of a social desirability bias in these children's responses to items about "ideal" behaviours, suggested that these students under-reported their victimisation experience when asked directly about being bullied. These students would have been missed had a multi-informant approach not been taken. Few prevalence studies have taken a multi-informant approach, suggesting that prevalence figures may under-represent the problem. This finding also has implications for schools engaged in their own assessments of bullying. It is therefore recommended that multi-informant approaches be taken so as not to under-represent the problem of bullying in schools.

Comparable to research with universal samples, verbal bullying was the most common form of bullying reported by frequently bullied students. This was followed

by relational bullying, which has been shown to be the second most common form in Australian universal samples (Rigby, 1997b). Some sex differences were found, with frequently bullied boys more likely to be bullied physically and to have money or other things taken or broken, a finding also found in universal samples. No significant sex differences were found in the frequency of experiencing indirect or relational bullying in these frequently bullied students aged 8-9 years. All forms of bullying were experienced by both sexes, with over 40% of frequently bullied girls reporting being the target of physical bullying and over 50% frequently bullied boys reporting being excluded or having rumours spread about them. Sensitising teachers and school staff to the experience of frequently bullied students is important if validating and empathetic responses to frequently bullied students are to be ensured.

Employing a large, randomly selected and stratified sample, the current research replicated previous findings of poorer psychological health in bullied students, and in particular, in students identified as frequently bullied. Furthermore, a multi-informant approach revealed that this poorer health status was apparent according to both student's own reports and the report of parents. More depressive, anxiety and somatic symptoms, and lower peer relations self-perceptions and general self-worth were reported. Moreover, not only were more symptoms reported, but a greater proportion of students were identified with symptom levels in the clinical range. Although often described as anxious and lacking in self-esteem, frequently bullied students were characterised more by depressive symptoms than anxiety or low self-perceptions and worth. This is important to teachers, school health services staff and others working with children exhibiting depressive symptoms, as these symptoms may indicate frequent bullying and should alert professionals to enquiring about the child's peer relationships.

Employing a group randomised controlled trial, the current research also investigated behaviour and mental health outcomes of a universal bullying preventive intervention on a targeted sample of victimised students. There are numerous benefits of a universal prevention approach to bullying in schools. Such an approach recognises bullying as a social behaviour operating within a social context, and enables risk and protective factors on multiple levels to be addressed. Students who would otherwise not be included, such as those who are at-risk of becoming bullied but may not be at the time of screening for participation, are included in a universal approach. Furthermore, issues of the stigma attached to targeting specific children and questions on how to identify at-risk students are eliminated. Universal approaches also provide the opportunity for peer modelling through the presence of resilient participants. While a possible disadvantage of universal intervention is the potential cost of implementation across a broad population (Mrazek & Haggerty, 1994), within schools universal approaches are particularly viable as they can be built into regular school activity and classroom curriculum, and draw upon staff and expertise already present, making them potentially cost effective and sustainable.

The *Friendly Schools* universal program was well received by schools and by frequently bullied students and their parents. The classroom curriculum component was well implemented. The whole-school component showed potential, but one year proved not enough time for policy discussion, development and implementation, particularly when involving the whole-school community, as recommended by the program. Although parents viewed the program positively, involvement in parent activities was low, suggesting the need for greater emphasis on strategies that maximise parent involvement. The program demonstrated a preventive effect at

post-intervention, maintaining the health of frequently bullied students who did not report clinical levels of symptoms at pre-intervention. However, the effect was short lived and not maintained into the new school year four months later. Further research is required to investigate ways of strengthening and maintaining the prevention effect achieved by this universal program. One possibility is greater program duration. Investigation of the impact of the intended two-years of this universal intervention will inform on the role played by program duration in maintaining the health of frequently victimised students.

The *Friendly Schools* program did not reduce the occurrence of frequent victimisation or the frequency with which different types of bullying were experienced by frequently bullied students. Furthermore, it did not reduce symptoms of depression, anxiety or somatic complaints, nor improve peer relations self-perception or general self worth for this selected group of students. Given that the program demonstrated universal effects for reducing victimisation (Cross et al., 2005), the findings may be explained by the intervention being insufficient to meet the needs of a targeted sample of frequently bullied students. A benefit of targeted prevention is that resources can be focused on children at greatest risk and designed to meet specific needs.

If targeted interventions are to be designed and implemented for frequently bullied students, a range of factors need to be considered. Targeted programs require the identification of students to participate. The current study highlights the importance of a multi-informant approach in the identification of frequently bullied students. However, information on victimisation status was gathered confidentially, and not in regard to program participation. The impact of this difference on report of victimisation requires investigation. Identifying students for participation in

additional targeted interventions raises issues of stigmatisation and 'labelling'.
However, it may be argued that in the case of bullying, students are already clearly
stigmatised by their status within the peer group. In a supportive school environment
in which involvement is seen as positive and beneficial, students may self select for
participation. A final issue to be considered in targeted approaches, is the additional
time, staffing and resources required. Further research is required to determine
effective and sustainable targeted strategies that complement universal whole-school
action.

"Health promotion and prevention must always be complemented by effective
treatment for the many children and young people who require it" (Raphael, 2000, p.
34). While the prevention of clinical levels of psychological symptoms in healthy
students is promising, the effect was not maintained. Furthermore, the program did
not reduce the proportion of students experiencing clinical levels of psychological
symptoms. This research suggests that universal bullying preventive interventions
may be unable to change the trajectory of students who are victimised frequently
away from psychological maladjustment and are unlikely to meet the needs of
students already experiencing the psychological health effects of bullying. It is these
students for which effective links to school and community health services is
required.

Schools require awareness that implementing universal preventive intervention
is not enough for all students. It is important that schools accept the responsibility of
maintaining an awareness of the health status of bullied children, particularly when
bullying is occurring in the school environment. However, the burden can not fall to
schools alone. Schools and families require support and links to community health
services so that the care required for these children can be provided. By integrating

treatment with prevention programs, a commonality of conceptual models, language and procedures is achieved, maximising the effectiveness of intervention efforts at each level of need (Greenberg et al., 2001). Schools are potential settings in which such fully-integrated models can be implemented and good examples of school-based preventive interventions that merge universal and targeted approaches are emerging (Cunningham & Henggeler, 2001; DeV. Peters et al., 2003; Greenberg et al., 2001; Conduct Problems Prevention Research Group, 2000; Lochman & Wells, 2002). Through such an approach, integrative and comprehensive intervention strategies that enable administrators, teachers, support staff, students, parents and specialists to work effectively in altering both the trajectory of individual students and the ecology of the school can be achieved.

REFERENCES

APA. (1993). *Violence and youth, Psychology's response: Summary report of the American Psychological Association Commission on Violence and Youth*. Washington, DC: American Psychological Association.

Abramson, L. Y., Seligman, M. E. P., & Teasdale, J. (1978). Learned helplessness in humans: Critique and reformulation. *Journal of Abnormal Psychology, 87*, 49-74.

Ahmad, Y. S., & Smith, P. (1994). Bullying in schools and the issue of sex differences. In J. Archer (Ed.), *Male violence*. London: Routledge.

Ahmad, Y. S., & Smith, P. K. (1990). Behavioural measures review No. 1: Bullying in schools. *Newsletter of Association for Child Psychology and Psychiatry, 12*, 26-27.

Andreou, E. (2000). Bully/victim problems and their association with psychological constructs in 8- to 12-year-old Greek school children. *Aggressive Behavior, 26*, 49-56.

Andreou, E. (2001). Bully/victim problems and their association with coping behaviour in conflictual peer interactions among school-age children. *Educational Psychology, 21*(1), 59-66.

Andreou, E. (2004). Bully/victim problems and their association with Machiavellianism and self-efficacy in Greek primary school children. *British Journal of Educational Psychology, 74*(2), 297-309.

Andrews, G., Sanderson, K., Slade, T., & Issakidis, C. (2000). Why does the burden of disease persist? Relating the burden of anxiety and depression to effectiveness of treatment. *Bulletin of the World Health Organization, 78*(4), 446-454.

Atlas, R. S., & Pepler, D. J. (1998). Observations of bullying in the classroom. *The Journal of Educational Research, 92*(2), 86-99.

Austin, S., & Joseph, S. (1996). Assessment of bully/victim problems in 8 to 11 year-olds. *British Journal of Educational Psychology, 66*, 447-456.

Baldry, A. C. (2004). The impact of direct and indirect bullying on the mental and physical health of Italian youngsters. *Aggressive Behavior, 30*, 343-355.

Bandura, A. (1977). *A social learning theory.* Englewood Cliffs, NJ: Prentice Hall Inc.

Bandura, A. (1997). *The exercise of control.* New York: W.H. Freeman & Company.

Barrett, P. M., & Turner, C. (2001). Prevention of anxiety symptoms in primary school children: Preliminary results from a universal school-based trial. *The British Journal of Clinical Psychology, 40*, 399-410.

Basch, C. E., Sliepcevich, E. M., Gold, R. S., Duncan, D. F., & Kolbe, L. J. (1985). Avoiding Type III errors in health education program evaluations: A case study. *Health Education Quarterly, 12*(4), 315-331.

Batsche, G. M. (1997). Bullying. In G. Bear, K. M. Minke & A. Thomas (Eds.), *Children's needs II: Development problems and alternatives.* (pp. 171-179). Bethesda, Maryland: National Association of School Psychologists.

Batsche, G. M., & Knoff, H. M. (1994). Bullies and their victims: Understanding a pervasive problem in schools. *School Psychology Review, 23*(2), 165-174.

Bay-Hinitz, A. K., Peterson, R. F., & Quilitch, H. R. (1994). Cooperative games: A way to modify aggressive and cooperative behaviors in young children. *Journal of Applied Behavior Analysis, 27*(3), 435-447.

Berdondoni, L., & Smith, P. K. (1996). Cohesion and power in the families of children involved in bully/victim problems at school: An Italian replication. *Journal of Family Therapy, 18*, 99-102.

Bijttebier, P., & Vertommen, H. (1998). Coping with peer arguments in school-age children with bully/victim problems. *British Journal of Educational Psychology, 68*, 387-394.

Bjorkqvist, K. (1994). Sex differences in physical, verbal and indirect aggression: A review of recent research. *Sex Roles, 30*, 177-188.

Bjorkqvist, K., Lagerspetz, K. M. J., & Kaukiainen, A. (1992). Do girls manipulate and boys fight? Developmental trends in regard to direct and indirect aggression. *Aggressive Behavior, 18*, 117-127.

Blum, R. W., & Ireland, M. (2004). Reducing risk, increasing protective factors: Findings from the Carribean youth health survey. *Journal of Adolescent Health, 35*, 493-500.

Boivin, M., & Hymel, S. (1997). Peer experiences and social self-perceptions: A sequential model. *Developmental Psychology, 33*(1), 135-145.

Bond, L., Toumbourou, J. W., Thomas, L., Catalano, R. F., & Patton, G. (2005). Individual, family, school, and community risk and protective factors for depressive symptoms in adolescents: A comparison of risk profiles for substance use and depressive symptoms. *Prevention Science, 6*(2), 73-88.

Booth, M. L., & Samdal, O. (1997). Health-promoting schools in Australia: Models and measurement. *Australian and New Zealand Journal of Public Health, 21*(4), 365-370.

Borg, M. G. (1999). The extent and nature of bullying among primary and secondary school children. *Educational Research, 41*(2), 137-153.

Boulton, M. J. (1995). Playground behaviour and peer interaction patterns of primary
school boys classified as bullies, victims, and not involved. *British Journal of
Educational Psychology, 65*, 165-177.

Boulton, M. J. (1999). Concurrent and longitudinal relations between children's
playground behavior and social preference, victimization, and bullying. *Child
Development, 70*, 944-954.

Boulton, M. J., & Smith, P. K. (1994). Bully/victim problems in middle-school
children: Stability, self-perceived competence, peer perceptions and peer
acceptance. *British Journal of Developmental Psychology, 12*, 315-329.

Boulton, M. J., Trueman, M., Chau, C., Whitehand, C., & Amatya, K. (1999).
Concurrent and longitudinal links between friendship and peer victimization:
Implications for befriending interventions. *Journal of Adolescence, 22*, 461-
466.

Boulton, M. J., & Underwood, K. (1992). Bully/victim problems among middle
school children. *British Journal of Educational Psychology, 62*, 73-87.

Bouma, G. D., & Canny, B. J. (2000). Exercising our duty of care as researchers for
those we diagnose to be 'at risk'. *Australian Universities Review, 2*, 32-37.

Bowers, L., Smith, P. K., & Binney, V. (1992). Cohesion and power in the families
of children involved in bully/victim problems at school. *Journal of Family
Therapy, 14*, 371-387.

Bowers, L., Smith, P. K., & Binney, V. (1994). Perceived family relationships of
bullies, victims and bully/victims in middle childhood. *Journal of Social and
Personal Relationships, 11*, 215-232.

Mental Health and Special Programs Branch. (2000). *Promotion, prevention and early intervention for mental health: A monograph.* Canberra: Community Department of Health and Aged Care.

Bryman, A., & Cramer, D. (1994). *Quantitative data analysis for social scientists* (Revised ed.). London: Routledge.

Burbach, D. J., Farha, J. G., & Thorpe, J. S. (1986). Assessing depression in community samples of children using self-report inventories: Ethical considerations. *Journal of Abnormal Child Psychology, 14*(4), 579-589.

Bushell, N. (1999). Health promoting schools work. *Health in Schools, 6*(2), 7-8.

Callaghan, S., & Joseph, S. (1995). Self-concept and peer victimisation among school children. *Personality and Individual Differences, 18*(1), 161-163.

Camodeca, M., Goossens, F. A., Meerum-Terwogt, M., & Schuengel, C. (2002). Bullying and victimization among school-age children: Stability and links to proactive and reactive aggression. *Social Development, 11*(3), 332-345.

Caplan, G. (1964). *Principles of preventive therapy.* New York: Basic Books.

Catalano, R. F., Berglund, M. L., Ryan, J. A. M., Lonczak, H. S., & Hawkins, J. D. (2002). Positive youth development in the United States: Research findings on evaluations of positive youth development programs. *Prevention & Treatment, 5*, Article 15.

Cohen, D., & Linton, K. (1995). Parent participation in an adolescent drug abuse prevention program. *Journal of Drug Education, 25*, 159-169.

Cohen, J. (1988). *Statistical power analysis for the behavioral sciences.* Hillsdale, NJ: Lawrence Erlbaum.

Cohen, J. (1992). A power primer. *Psychological Bulletin, 112*(1), 155-159.

Coie, J. D., Watt, N. F., West, S. G., Hawkins, D., Asarnow, J. R., Markman, H. J., et al. (1993). The science of prevention: A conceptual framework and some directions for a national research program. *American Psychologist, 48*(10), 1013-1022.

Compas, B. E., Connor, J., & Wadsworth, M. (1997). Prevention of depression. In P. P. Weissberg, T. P. Gullota, R. L. Hampton, B. A. Ryan & G. R. Adams (Eds.), *Enhancing children's wellness. Healthy children 2010: Issues in children's and families' lives.* (Vol. 8, pp. 129-174). Thousand Oakes, CA: Sage.

Coohey, C., & Marsh, J. C. (1995). Promotion, prevention, and treatment: What are the differences? *Research on Social Work Practice, 5*(4), 524-538.

Craig, W. M. (1998). The relationship among bullying, victimisation, depression, anxiety, and aggression in elementary school children. *Personality and Individual Differences, 24*(1), 123-130.

Craig, W. M., & Pepler, D. J. (2003). Identifying and targeting risk for involvement in bullying and victimization. *Canadian Journal of Psychiatry, 48*(9), 577-582.

Craig, W. M., Pepler, D. J., & Atlas, R. (2000). Observations of bullying in the playground and in the classroom. *School Psychology International, 21*(1), 86-99.

Crick, N. R., & Bigbee, M. A. (1998). Relational and overt forms of peer victimization: A multiinformant approach. *Journal of Consulting and Clinical Psychology, 66*(2), 337-347.

Crick, N. R., Bigbee, M. A., & Howes, C. (1996). Gender differences in children's normative beliefs about aggression: How do I hurt thee? Let me count the ways. *Child Development, 67*, 1003-1014.

Crick, N. R., Casas, J. F., & Ku, H. (1999). Relational and physical forms of peer victimization in preschool. *Developmental Psychology, 35*(2), 376-385.

Crick, N. R., Casas, J. F., & Nelson, D. A. (2002). Toward a more comprehensive understanding of peer maltreatment: Studies of relational victimization. *Current Directions in Psychological Science, 11*(3), 98-101.

Crick, N. R., & Grotepeter, J. K. (1995). Relational aggression, gender, and social-psychological adjustment. *Child Development, 66*, 710-722.

Crick, N. R., & Grotpeter, J. K. (1996). Children's treatment by peers: Victims of relational and overt aggression. *Development and Psychopathology, 8*, 367-380.

Cross, D., Hall, M., Hamilton, G., Pintabona, Y., & Erceg, E. (2004). Australia: The Friendly Schools project. In P. K. Smith, D. Pepler & K. Rigby (Eds.), *Bullying in schools: How successful can interventions be?* (pp. 187-210). Cambridge: Cambridge University Press.

Cross, D., Pintabona, Y., Hall, M., Hamilton, G., & Erceg, E. (2004). Validated guidelines for school-based bullying prevention and management. *International Journal of Mental Health Promotion, 6*(3), 34-42.

Cross, D., Pintabona, Y., Hall, M., Hamilton, G., Erceg, E., & Roberts, C. (2003). The Friendly Schools project: An empirically grounded school-based bullying prevention program. *Australian Journal of Guidance and Counselling, 13*(1), 36-46.

Cross, D., Pintabona, Y., Shaw, T., Erceg, E., Hall, M., Hamilton, G., et al. (2005). *The effect of a whole-school bullying prevention intervention on children's bullying behaviours.* Manuscript in preparation.

Cunningham, P. B., & Henggeler, S. W. (2001). Implementation of an empirically based drug and violence prevention and intervention program in public school settings. *Journal of Clinical Child Psychology, 30*(1), 221-232.

Dadds, M. R., Perrin, S., & Yule, W. (1998). Social desirability and self-reported anxiety in children: An analysis of the RCMAS Lie Scale. *Journal of Abnormal Psychology, 26*(4), 311-317.

Dadds, M. R., Seinen, A., Roth, J., & Harnett, P. (2000). *Early intervention for anxiety disorders in children and adolescents* (Vol. 2). Adelaide: The Australian Early Intervention Network for Mental Health in Young People.

Davey, G. C. L. (1992). Classical conditioning and the acquisition of human fears and phobias: A review and synthesis of the literature. *Advances in Behavior Research and Therapy, 14*, 29-66.

Davis, C., Martin, G., Kosky, R., & O'Hanlon, A. (2000). *Early intervention in the mental health of young people: A literature review*. Canberra: Commonwealth of Australia.

DeRosier, M. E. (2004). Building friendships and combating bullying: Effectiveness of a school-based social skills group intervention. *Journal of Clinical Child and Adolescent Psychology, 33*, 125-130.

DeRosier, M. E., & Marcus, S. R. (2005). Building friendships and combating bullying: Effectiveness of S.S.GRIN at one-year follow-up. *Journal of Clinical Child & Adolescent Psychology, 34*(1), 140-150.

Deschesnes, M., Martin, C., & Hill, A. J. (2003). Comprehensive approaches to

school health promotion: How to achieve broader implementation? *Health

Promotion International, 18*(4), 387-396.

DeV. Peters, R., Petrunka, K., & Arnold, R. (2003). The Better Beginnings, Better

Futures Project: A universal, comprehensive, community-based prevention

approach for primary school children and their families. *Journal of Clinical

Child and Adolescent Psychology, 32*(2), 215-227.

Dill, E. J., Vernberg, E. M., Fonagy, P., Twemlow, S. W., & Gamm, B. K. (2004).

Negative affect in victimized children: The roles of social withdrawal, peer

rejection, and attitudes toward bullying. *Journal of Abnormal Child

Psychology, 32*(2), 159-173.

Dodge, K. A., & Coie, J. D. (1987). Social informant processing factors in reactive

and proactive aggression in children's peer groups. *Journal of Personality

and Social Psychology, 53*, 1146-1158.

Domitrovich, C. E., & Bierman, K. L. (2001). Parenting practices and child social

adjustment: Multiple pathways of influence. *Merrill-Palmer Quarterly, 47*,

235-263.

Donner, A., & Klar, N. (1996). Statistical considerations in the design and analysis of

community intervention trials. *Journal of Clinical Epidemiology, 49*(4), 435-

439.

Duncan, A. (1996). The shared concern method for resolving group bullying in

schools. *Educational Psychology in Practice, 12*(2), 94-98.

Durlak, J. A. (1998). Common risk and protective factors in successful prevention

programs. *American Journal of Orthopsychiatry, 68*(4), 512-520.

Durlak, J. A., & Wells, A. M. (1997). Primary prevention mental health programs for children and adolescents: A meta-analytic review. *American Journal of Community Psychology, 25*(2), 115-152.

Durlak, J. A., & Wells, A. M. (1998). Evaluation of indicated preventive intervention (secondary prevention) mental health programs for children and adolescents. *American Journal of Community Psychology, 26*(5), 775-802.

Edelbrock, C. S., Costello, A. J., Dulcan, M. K., Conover, N. C., & Kalas, R. (1986). Parent-child agreement on child psychiatric symptoms assessed via structured interview. *Journal of Child and Adolescent Psychiatry, 27*, 181-190.

Egan, S. K., & Perry, D. G. (1998). Does low self-regard invite victimization? *Developmental Psychology, 34*(2), 299-309.

Elias, M., & Zins, J. E. (2003). Bullying, other forms of peer harassment, and victimization in the schools: Issues for school psychology research. In M. J. Elias & J. E. Zins (Eds.), *Bullying, peer harassment, and victimization in the schools: The next generation of prevention.* (pp. 1-5). New York: The Haworth Press.

Erceg, E., Cross, D., & Pintabona, Y. (2000). *Friendly Schools Bullying Intervention Project: Teachers Manual Year 4*. Bentley, Perth: Centre for Health Promotion Research, Curtin University.

Espelage, D. L., & Asidao, C. S. (2001). Conversations with middle school students about bullying and victimization: Should we be concerned? *Journal of Emotional Abuse, 2*, 49-62.

Espelage, D. L., & Holt, M. K. (2001). Bullying and victimization during early adolescence: Peer influences and psychosocial correlates. *Journal of Emotional Abuse, 2*(2/3), 123-142.

Espelage, D. L., & Swearer, S. M. (2003). Research on School Bullying and

 Victimization: What Have We Learned and Where Do We Go From Here?

 School Psychology Review, 32(3), 365-383.

Farrington, D. P. (1993). Understanding and preventing bullying. In M. Tonny & N.

 Morris (Eds.), *Crime and Justice* (Vol. 17). Chicago: University of Chicago

 Press.

Faust, J., & Forehand, R. (1994). Adolescents' physical complaints as a function of

 anxiety due to familial and peer stress: A causal model. *Journal of Anxiety

 Disorders, 8*, 139-153.

Fekkes, M., Pijpers, F. I. M., & Verloove-Vanhorick, S. P. (2004). Bullying behavior

 and associations with psychosomatic complaints and depression in victims.

 The Journal of Pediatrics, January, 17-22.

Fields, L., & Prinz, R. J. (1997). Coping and adjustment during childhood and

 adolescnce. *Clinical Psychology Review, 17*(8), 937-976.

Finnegan, R. A., Hodges, E. V. E., & Perry, D. G. (1998). Victimization by peers:

 Associations with children's reports of mother-child interaction. *Journal of

 Personality and Social Psychology, 75*(4), 1076-1086.

Flouri, E., & Buchanan, A. (2002). Life satisfaction in teenage boys: The moderating

 role of father involvement and bullying. *Aggressive Behavior, 28*, 126-133.

Forero, R., McLellan, L., Rissel, C., & Bauam, A. (1999). Bullying behavior and

 psychosocial health among school students in New South Wales, Australia:

 Cross sectional survey. *British Medical Journal, 319*, 344-348.

Garber, J., & Hilsman, R. (1992). Cognition, stress, and depression in children and

 adolescents. *Child and Adolescent Psychiatric Clinics of North America, 1*,

 129-167.

Gibb, B. E. (2002). Childhood maltreatment and negative cognitive styles: A quantitative and qualitative review. *Clinical Psychology Review, 22*, 223-246.

Gibb, B. E., Abramson, L. Y., & Alloy, L. B. (2004). Emotional maltreatment from parents, verbal peer victimization, and cognitive vulnerability to depression. *Cognitive Therapy and Research, 28*(1), 1-21.

Gillham, J. E., Shatte, A. J., & Freres, D. R. (2000). Preventing depression: A review of cognitive-behavioral and family interventions. *Applied and Preventive Psychology, 9*, 63-88.

Goldbaum, S., Craig, W. M., Pepler, D. J., & Connolly, J. (2003). Developmental Trajectories of Victimization: Identifying Risk and Protective Factors. *Journal of Applied School Psychology, 19*(2), 139-156.

Goodman, S. H., Gravitt, G. W., & Kaslow, N. J. (1995). Social problem solving: A moderator of the relation between negative life stress and depression symptoms in children. *Journal of Abnormal Child Psychology, 23*, 473-485.

Gordon, R. S. J. (1983). An operational classification of disease prevention. *Public Health Reports, 98*(2), 107-109.

Graham, S., Bellmore, A., & Juvonen, J. (2003). Peer Victimization in Middle School: When Self- and Peer Views Diverge. *Journal of Applied School Psychology, 19*(2), 117-137.

Graham, S., & Juvonen, J. (1998a). Self-blame and peer victimization in middle school: An attributional analysis. *Developmental Psychology, 34*(3), 587-599.

Graham, S., & Juvonen, J. (1998b). A social-cognitive perspective on peer aggression and victimization. *Annals of Child Development, 13*, 21-66.

Greenberg, M. T., Domitrovich, C., & Bumbarger, B. (2001). The prevention of

mental disorders in school-aged children: Current state of the field.

Prevention & Treatment, 4, Article 1.

Grills, A. E., & Ollendick, T. H. (2002). Peer victimization, global self-worth, and

anxiety in middle school children. *Journal of Clinical Child and Adolescent

Psychology, 31*(1), 59-68.

Conduct Problems Prevention Research Group. (2000). Merging universal and

indicated prevention programs: The Fast Track model. *Addictive Behaviors,

25*(6), 913-927.

Hahn, E. J., Simpson, M. R., & Kidd, P. (1996). Cues to parent involvement in drug

prevention and school activities. *Journal of School Health, 65*(5), 165-170.

Hanish, L. D., & Guerra, N. G. (2000a). Children who get victimized at school: What

is known? What can be done? *Professional School Counselling, 4*(2), 113-

119.

Hanish, L. D., & Guerra, N. G. (2000b). Predictors of peer victimization among

urban youth. *Social Development, 9*(4), 521-543.

Hanish, L. D., & Guerra, N. G. (2004). Aggressive victims, passive victims, and

bullies: Developmental continuity or developmental change? *Merrill-Palmer

Quarterly, 50*(1), 17-38.

Harter, S. (1998). Developmental perspectives on the self system. In E. M.

Hetherington (Ed.), *Handbook of child psychology: Volume 4 Socialization,

personality, and social development.* (pp. 275-385). New York: Wiley.

Hawker, D. S. J., & Boulton, M. J. (2000). Twenty years' research on peer

victimization and psychosocial maladjustment: A meta-analytic review of

cross-sectional studies. *Journal of Child Psychology and Psychiatry, 41*(4), 441-455.

Hawkins, D. L., Pepler, D. J., & Craig, W. M. (2001). Naturalistic observations of peer interventions in bullying. *Social Development, 10*(4), 512-527.

Hawley, D. R. (1995). Assessing change with preventive interventions: The reliable change index. *Family Relations, 1995*(44), 278-284.

Hay, I., Ashman, A. F., & van Kraayenoord, C. E. (1998). Self-concept test generalisability: Self-Description Questionnaire-I and the Perception of Ability Scale for Students. *The Australian Educational and Developmental Psychologist, 15*, 70-80.

Haynie, D. L., Nansel, T. R., Eitel, P., Crump, A. D., Saylor, K., Yu, K., et al. (2001). Bullies, victims and bully/victims: Distinct groups of at-risk youth. *Journal of Early Adolescence, 21*(1), 29-49.

Herbert, G. (1989). A whole-curriculum approach to bullying. In D. P. Tattum & D. A. Lane (Eds.), *Bullying in Schools* (pp. 73-80). Stoke-on-Trent: Trentham Books.

Hess, R. S., & Copeland, E. P. (1997). Stress. In G. Bear, K. M. Minke & A. Thomas (Eds.), *Children's needs II: Development problems and alternatives.* (pp. 293-303). Bethesda, Maryland: National Association of School Psychologists.

Heubeck, B., & O'Sullivan, C. (1998). An exploration into the nature, frequency and impact of school hassles in the middle school years. *Australian Psychologist, 33*(2), 130-137.

Hodges, E. V. E., Boivin, M., Vitaro, F., & Bukowski, W. (1999). The power of friendship: Protection against an escalating cycle of peer victimization. *Developmental Psychology, 35*(1), 94-101.

Hodges, E. V. E., Malone, M. J., & Perry, D. G. (1997). Individual risk and social

risk as interacting determinants of victimization in the peer group.

Developmental Psychology, 33(6), 1032-1039.

Hodges, E. V. E., & Perry, D. G. (1999). Personal and interpersonal antecedents and

consequences of victimization by peers. *Journal of Personality and Social

Psychology, 76*(4), 677-685.

Hodges, K. (1990). Depression and anxiety in children: A comparison of self-report

questionnaires to clinical interview. *Psychological Assessment, 2,* 376-381.

Hoover, J. H., & Hazler, R. J. (1991). Bullies and victims. *Elementary School

Guidance and Counselling, 25*(3).

Hoover, J. H., Oliver, R., & Hazler, R. J. (1992). Bullying: Perceptions of adolescent

victims in the Midwestern U.S.A. *School Psychology International, 13*, 5-16.

Huberty, C. J. (1994). Why multivariate analyses? *Educational and Psychological

Measurement, 54*(3), 620-627.

Huberty, C. J., & Morris, J. D. (1989). Multivariate analysis versus multiple

univariate analyses. *Psychological Bulletin, 105*(2), 302-308.

Hunter, S. C., & Boyle, J. M. E. (2004). Appraisal and coping strategy use in victims

of school bullying. *British Journal of Educational Psychology, 74*, 83-107.

Hyndman, M., & Thorsborne, M. (1994). *Taking action on bullying: Whole school

and multi-stage approaches to intervention and prevention.* Paper presented

at the First International Conference on Children's Peer Relations:

Cooperation and Conflict, Adelaide.

Jacobson, N. S., & Truax, P. (1991). Clinical significance: A statistical approach to

defining meaningful change in psychotherapy research. *Journal of Consulting

and Clinical Psychology, 59*(1), 12-19.

James, E., Reynolds, C. R., & Dunbar, J. (1994). Self-report instruments. In T. H. Ollendick, N. J. King & W. Yule (Eds.), *International handbook of phobic and anxiety disorders in children and adolescents*. New York: Plenum Press.

Jansz, N. K., & Becker, M. H. (1984). The Health Belief Model: A decade later. *Health Education Quarterly, 11*, 1-47.

Jaycox, L. H., Reivich, K. J., Gillham, J., & Seligman, M. E. P. (1994). Prevention of depressive symptoms in school children. *Behavioral Research and Therapy, 32*(8), 801-816.

Jessor, R. (1987). Problem-behaviour theory, psychosocial development, and adolescent problem drinking. *British Journal of Addiction, 82*, 331-342.

Juvonen, J., Nishina, A., & Graham, S. (2000). Peer harassment, psychological adjustment, and school functioning in early adolescence. *Journal of Educational Psychology, 92*, 349-359.

Kaltiala-Heino, R., Rimpela, M., Marttunen, M., Rimpali, A., & Rantanen, P. (1999). Bullying, depression, and suicidal ideation in Finnish adolescents: School survey. *British Medical Journal, 319*, 348-351.

Kasen, S., Johnson, J., & Cohen, P. (1990). The impact of school emotional climate on student psychopathology. *Journal of Abnormal Child Psychology, 18*(2), 165-177.

Kashy, D. A., & Kenny, D. A. (2000). The analysis of data from dyads and groups. In H. T. Reis & C. M. Judd (Eds.), *Handbook of research methods in social and personality psychology* (pp. 451-477). Cambridge: Cambridge University Press.

Keppel, G. (1991). *Design and analysis: A researcher's handbook* (3rd ed.). Englewood Cliffs, NJ: Prentice Hall.

Kessler, R. C., Little, R. J. A., & Groves, R. M. (1995). Advances in strategies for minimizing and adjusting for survey nonresponse. *Epidemiology Review, 17*, 192-204.

Khatri, P., Kupersmidt, J. B., & Patterson, C. (2000). Aggression and peer victimization as predictors of self-reported behavioral and emotional adjustment. *Aggressive Behavior, 26*(5), 345-358.

Klitzner, M., Bamberger, E., & Gruenwald, P. (1990). The assessment of parent-led prevention: A national descriptive study. *Journal of Drug Education, 20*, 111-125.

Kochenderfer, B. J., & Ladd, G. W. (1996). Peer victimization: Cause or consequence of school maladjustment. *Child Development, 67*, 1305-1317.

Kochenderfer, B. J., & Ladd, G. W. (1997). Victimized children's responses to peers' aggression: Behavior associated with reduced versus continued victimization. *Development & Psychopathology, 9*, 59-73.

Kochenderfer-Ladd, B. J. (2004). Peer Victimization: The Role of Emotions in Adaptive and Maladaptive Coping. *Social Development, 13*(3), 329-349.

Kochenderfer-Ladd, B. J., & Skinner, K. (2002). Children's coping strategies: Moderators of the effects of peer victimization? *Developmental Psychology, 38*(2), 267-278.

Kochenderfer-Ladd, B. J., & Wardrop, J. L. (2001). Chronicity and instability of children's peer victimization experiences as predictors of loneliness and social satisfaction trajectories. *Child Development, 72*(1), 134-151.

Kovacs, M. (1992). *Children's Depression Inventory (CDI) manual*. New York: Multi-Health Systems.

Kumpulainen, K., Rasanen, E., & Henttonen, I. (1999). Children involved in

   bullying: Psychological disturbance and the persistence of involvement. *Child

   Abuse and Neglect, 23*(12), 1253-1262.

Kumpulainen, K., Rasanen, E., Henttonen, I., Almqvist, F., Kresanov, K., Linna, S.,

   et al. (1998). Bullying and psychiatric symptoms among elementary school-

   age children. *Child Abuse and Neglect, 22*(7), 705-717.

Kumpulainen, K., Rasanen, E., & Puura, K. (2001). Psychiatric disorders and the use

   of mental health services among children involved in bullying. *Aggressive

   Behavior, 27*, 102-110.

Ladd, G. W., & Kochenderfer-Ladd, B. J. (1998). Parenting behaviors and parent-

   child relationships: Correlates of peer victimization in kinergarten.

   Developmental Psychology, 34(6), 1450-1458.

Ladd, G. W., & Kochenderfer-Ladd, B. J. (2002). Identifying victims of peer

   aggression from early to middle childhood: Analysis of cross-informant data

   for concordance, estimation of relational adjustment, prevalence of

   victimization, and characteristics of identified victims. *Psychological

   Assessment, 14*(1), 74-96.

Ladd, G. W., & Troop-Gordon, W. (2003). The role of chronic peer difficulties in the

   development of children's psychological adjustment problems. *Child

   Development, 74*(5), 1344-1367.

Lagerspetz, K. M. J., & Bjorkqvist, K. (1994). Indirect aggression in boys and girls.

   In L. R. Huesmann (Ed.), *Aggressive behaviour: Current perspectives* (pp.

   131-149). New York: Plenum Press.

Lagerspetz, K. M. J., Bjorkqvist, K., Berts, M., & King, E. (1982). Group aggression among school children in three schools. *Scandinavian Journal of Psychology, 23*, 45-52.

Lagerspetz, K. M. J., Bjorkqvist, K., & Peltonen, T. (1988). Is indirect aggression typical of females? Sex differences in aggressiveness in 11-12-year-old children. *Aggressive Behavior, 14*, 403-414.

Lavin, A. T., Shapiro, G. R., & Weill, K. S. (1992). Creating an agenda for school-based health promotion: A review of 25 selected reports. *Journal of School Health, 62*(6), 212-229.

Lochman, J. E., & Wells, K. C. (2002). The coping power program at the middle-school transition: Universal and indicated prevention effects. *Psychology of Addictive Behaviors, 16*(4S), S40-S54.

Lopez, C., & DuBois, D. L. (2005). Peer victimization and rejection: Investigation of an integrative model of effects on emotional, behavioural, and academic adjustment in early adolescence. *Journal of Clinical Child and Adolescent Psychology, 34*(1), 25-36.

Lowry-Webster, H. M., Barrett, P. M., & Lock, S. (2003). A universal prevention trial of anxiety symptomology during childhood: Results at 1-year follow-up. *Behaviour Change, 20*(1), 25-43.

Ma, X. (2002). Bullying in middle school: Individual and school characteristics of victims and offenders. *School Effectiveness and School Improvement, 13*, 63-89.

Mahady-Wilton, M. M., Craig, W. M., & Pepler, D. J. (2000). Emotional regulation and display in classroom victims of bullying: Characteristic expressions of

affect, coping styles and relevant contextual factors. *Social Development, 9*(2), 226-245.

Marsh, H. W. (1990). *Self-Description Questionnaire-I: SDQ-I manual*. Macarthur: University of Western Sydney.

Mathers, C. D., Theo Vos, E., Stevenson, C. E., & Begg, S. J. (2000). The Australian burden of disease study: Measuring the loss of health from diseases, injuries and risk factors. *Medical Journal of Australia, 2000*(172), 592-596.

McEvoy, A., & Welker, R. (2000). Antisocial behavior, academic failure, and school climate: A critical review. *Journal of Emotional and Behavioral Disorders, 8*(3), 130-.

McLennan, W. (1998). *1996 Census of population and housing: Socio-economic indexes for areas information paper*. Canberra: Australian Bureau of Statistics.

Mellor, A. (1999). Scotland. In P. K. Smith, Y. Morita, J. Junger-Tas, D. Olweus, R. Catalano & P. T. Slee (Eds.), *The nature of school bullying: A cross-national perspective* (pp. 91-111). London: Routledge.

Menesini, E., Eslea, M., Smith, P. K., Genta, M. L., Giannetti, E., Fonzi, A., et al. (1997). Cross-national comparison of children's attitudes towards bully/victim problems in school. *Aggressive Behavior, 23*, 245-257.

Menesini, E., Melan, E., & Pignatti, B. (2000). Interactional styles of bullies and victims observed in a competitive and a cooperative setting. *Journal of Genetic Psychology, 161*(3), 261-276.

Merton, D. E. (1996). Visibility and vulnerability: Responses to rejection by nonaggressive junior high school boys. *Journal of Early Adolescence, 16*, 5-26.

Mrazek, P. J., & Haggerty, R. J. (1994). *Reducing risks for mental disorders: Frontiers for preventive intervention research*. Washington, DC: National Academy Press.

Mukoma, W., & Flisher, A. J. (2004). Evaluation of health promoting schools: A review of nine studies. *Health Promotion International, 19*(3), 357-368.

Muris, P., Schmidt, H., Lambrichs, R., & Meesters, C. (2001). Protective and vulnerability factors of depression in normal adolescents. *Behaviour Research and Therapy, 39*, 555-565.

Murray, D. M., & Hannan, P. J. (1990). Planning for the appropriate analysis in school-based drug-use prevention studies. *Journal of Consulting and Clinical Psychology, 58*(4), 458-468.

Murray, D. M., Varnell, S. P., & Blitstein, J. L. (2004). Design and analysis of group-randomized trials: A review of recent methodological developments. *American Journal of Public Health, 94*(3), 423-432.

Mynard, H., & Joseph, S. (2000). Development of the multidimensional peer-victimization scale. *Aggressive Behaviour, 26*, 169-178.

NHMRC (1996). *Effective school health promotion: Towards health promoting schools*. Canberra: Australian Government Publishing Service.

NHMRC. (1999). *A guide to the development, implementation and evaluation of clinical practice guidelines.* Canberra: National Health and Medical Research Council, Commonwealth of Australia.

Nansel, T. R., Craig, W. M., Overpeck, M. D., Saluja, G., & Ruan, J. (2004). Cross-national consistency in the relationship between bullying behaviors and psychosocial adjustment. *Archives of Pediatric Adolescent Medicine, 158*, 730-736.

Nansel, T. R., Overpeck, M., Pilla, R. A., Ruan, W. J., Simons-Morton, B., & Scheidt, P. (2001). Bullying behaviors among U.S. youth: Prevalence and association with psychosocial adjustment. *Journal of the American Medical Association, 285*, 2094-2100.

Neary, A., & Joseph, S. (1994). Peer victimization and its relationship to self-concept and depression among schoolgirls. *Personality and Individual Differences, 16*(1), 183-186.

Nicholson, J. M., Oldenburg, B., McFarland, M. L., & Dwyer, S. B. (1999). Mental health interventions in the primary school setting: Perceived facilitators, barriers and needs. *Heath Promotion Journal of Australia, 9*(2), 96-104.

Nishina, A., Juvonen, J., & Witkow, M. R. (2005). Sticks and stones may break my bones, but names will make me sick: The psychosocial, somatic, and scholastic consequences of peer harassment. *Journal of Clinical Child and Adolescent Psychology, 34*(1), 37-48.

Nolen-Hoeksema, S., Girus, J., & Seligman, M. E. P. (1992). Predictors and consequences of childhood depressive symptoms: A 5-year longitudinal study. *Journal of Abnormal Psychology, 101*, 405-422.

Northfield, J., St Leger, L., Marshall, B., Sheehan, M., Maher, S., & Carlisle, R. (1997). *School based health promotion across Australia: Background briefing report no 1 for the National Health Promoting Schools Initiative.* Sydney: Australian Health Promoting Schools Association, University of Sydney.

Nutbeam, D. (1992). The health promoting school: Closing the gap between theory and practice. *Health Promotion International, 7*(3), 151-153.

Nutbeam, D., Smith, C., Moore, L., & Bauman, A. (1994). Warning! Schools can damage your health: Alienation from school and its impact on health behavior. *Journal of Paediatric Health, 29*(1), 1-10.

O'Connell, P., Pepler, D. J., & Craig, W. M. (1999). Peer involvement in bullying: Insights and challenges for intervention. *Journal of adolescence, 22*, 437-452.

Olweus, D. (1978). *Aggression in the schools: Bullies and whipping boys*. New York: Wiley.

Olweus, D. (1991). Bully/Victim Problems among schoolchildren: Basic facts and effects of a school based intervention program. In D. J. Pepler & K. H. Rubin (Eds.), *The development and treatment of childhood aggression* (pp. 411-448). Hillsdale, NJ: Erlbaum.

Olweus, D. (1993a). *Bullying at school: What we know and what we can do*. Oxford: Blackwell.

Olweus, D. (1993b). Victimization by peers: Antecedents and long-term outcomes. In K. H. Rubin & Asendorf (Eds.), *Social withdrawal, inhibition and shyness in children*. Hillsdale, NJ: Erlbaum.

Olweus, D., & Alsaker, F. D. (1991). Assessing change in a cohort-longitudinal study with hierarchical data. In D. Magnusson, L. Bergman, G. Rudinger & B. Torestad (Eds.), *Problems and methods in longitudinal research* (pp. 106-132). New York: Cambridge University Press.

O'Moore, M. (2000). Critical issues for teacher training to counter bullying and victimisation in Ireland. *Aggressive Behavior, 26*, 99-111.

O'Moore, M., & Kirkham, C. (2001). Self-esteem and its relationship to bullying behaviour. *Aggressive Behavior, 27*, 269-283.

Ortega, R., & Mora-Merchan, J. A. (1999). Spain. In P. K. Smith, Y. Morita, J. Junger-Tas, D. Olweus, R. Catalano & P. T. Slee (Eds.), *The nature of school bullying: A cross-national perspective* (pp. 157-173). London: Routledge.

Ozer, E. J., Richards, M. H., & Kliewer, W. (2004). Introduction to the special section on protective factors in the relation between community violence exposure and adjustment in youth. *Journal of Clinical Child and Adolescent Psychology, 33*(3), 434-438.

Parker, L., & Cameron, I. (1995). *What is a health-promoting school.* Perth, WA: School Health Coalition of Western Australia.

Parkhurst, J. T., & Asher, S. R. (1992). Peer rejection in middle school: Subgroup differences in behavior, loneliness, and interpersonal concerns. *Developmental Psychology, 28*(2), 231-241.

Pateraki, L., & Houndoumadi, A. (2001). Bullying among primary school children in Athens, Greece. *Educational Psychology, 21*(2), 167-175.

Paul, J. J., & Cillessen, A. H. N. (2003). Dynamics of Peer Victimization in Early Adolescence: Results from a Four-Year Longitudinal Study. *Journal of Applied School Psychology, 19*(2), 25-43.

Payton, J. W., Wardlaw, D. M., Graczyk, P. A., Bloodworth, M. R., Tompsett, C. J., & Weissberg, R. P. (2000). Social and emotional learning: A framework for promoting mental health and reducing risk behavior in children and youth. *The Journal of School Health, 70*(5), 179-185.

Pellegrini, A. D., & Bartini, M. (2000). A longitudinal study of bullying, victimization, and peer affiliation during the transition from primary school to middle school. *American Educational Research Journal, 37*(3), 699-725.

Pellegrini, A. D., & Long, J., D. (2002). A longitudinal study of bullying, dominance, and victimization during the transition from primary school through secondary school. *British Journal of Developmental Psychology, 20,* 259-280.

Pepler, D. J., & Craig, W. M. (1995). A peek behind the fence: Naturalistic observations of aggressive children with remote audiovisual recording. *Developmental Psychology, 31,* 548-553.

Pepler, D. J., Craig, W. M., Ziegler, S., & Charach, A. (1993). A school-based anti-bullying intervention: Preliminary evaluation. In D. Tattum (Ed.), *Understanding and managing bullying* (pp. 76-91). Oxford: Heinemann.

Pepler, D. J., Craig, W. M., Ziegler, S., & Charach, A. (1994). An evaluation of an anti-bullying intervention in Toronto schools. *Canadian Journal of Community Mental Health, 13*(2), 95-110.

Pepler, D. J., Smith, P. K., & Rigby, K. (2004). Looking back and looking forward: Implications for making interventions work effectively. In P. K. Smith, D. Pepler & K. Rigby (Eds.), *Bullying in schools: How successful can interventions be?* Cambridge: Cambridge University Press.

Perry, D. G., Kusel, S. J., & Perry, L. C. (1988). Victims of peer aggression. *Developmental Psychology, 24*(6), 807-814.

Perry, D. G., Williard, J. C., & Perry, L. C. (1990). Peers' perceptions of the consequences that victimized children provide aggressors. *Child Development, 61,* 1310-1325.

Peterson, C., & Seligman, M. E. P. (1984). Causal explanations as a risk factor for depression: Theory and evidence. *Psychological Review, 91,* 347-374.

Pikas, A. (1989). A pure concept of mobbing gives the best results for treatment. *School Psychology International, 10*, 95-104.

Pintabona, Y., Caputi, M., & Cross, D. (2000). *Friendly Schools Bullying Intervention Project: School guidelines and activities*. Bentley, Perth: Centre for Health Promotion Research, Curtin University.

Prinstein, M. J., Cheah, C. S. L., & Guyer, A. E. (2005). Peer victimization, cue interpretation, and internalizing symptoms: Preliminary concurrent and longitudinal findings for children and adolescents. *Journal of Clinical Child and Adolescent Psychology, 34*(1), 11-24.

Raphael, B. (1993). *Scope for prevention in mental health*. Canberra: National Health & Medical Research Council.

Raphael, B. (2000). *Promoting the mental health and wellbeing of children and young people. Discussion paper: key principles and directions*. Canberra: National Mental Health Working Group, Department of Health and Aged Care.

Reader-Goodman, M., Stormshak, E. A., & Dishion, T. J. (2001). The significance of peer victimization at two points in development. *Applied Developmental Psychology, 22*, 507-526.

Reynolds, C. R. (1980). Concurrent validity of What I Think and Feel: The Revised Children's Manifest Anxiety Scale. *Journal of Consulting and Clinical Psychology, 48*, 774-775.

Reynolds, C. R. (1982). Convergent and divergent validity of the Revised Children's Manifest Anxiety Scale. *Educational and Psychological Measurement, 42*, 1205-1212.

Reynolds, C. R., & Kamphaus, R. W. (1992). *Behavior Assessment System for Children (BASC) manual*. Circle Pines, MN: American Guidance Service, Inc.

Reynolds, C. R., & Richmond, B. O. (1985). *Revised Children's Manifest Anxiety Scale manual.* Los Angeles: Western Psychological Services.

Reynolds, W. M. (1994). Assessment of depression in children and adolescents by self-report questionnaires. In W. M. Reynolds & H. F. Johnston (Eds.), *Handbook of depression in children and adolescents* (pp. 209-234). New York: Plenum Press.

Rigby, K. (1993). School children's perceptions of their families and parents as a function of peer relations. *The Journal of Genetic Psychology, 154*(4), 501-513.

Rigby, K. (1994). Psychosocial functioning in families of Australian adolescent schoolchildren involved in bully/victim problems. *Journal of Family Therapy, 16*, 173-187.

Rigby, K. (1995). The motivation of Australian adolescent schoolchildren to engage in group discussions about bullying. *The Journal of Social Psychology, 135*(6), 773-774.

Rigby, K. (1996). *Bullying in schools and what to do about it*. Melbourne: ACER.

Rigby, K. (1997a). Attitudes and beliefs about bullying among Australian school children. *Irish Journal of Psychology, 18*, 202-220.

Rigby, K. (1997b). What children tell us about bullying in schools. *Children Australia, 22*(2), 28-34.

Rigby, K. (1998a). Peer relations at school and the health of adolescents. *Youth Studies Australia, 17*(1), 13-17.

Rigby, K. (1998b). The relationship between reported health and involvement in

    bully/victim problems among male and female secondary schoolchildren.

    Journal of Health Psychology, 3(4), 465-476.

Rigby, K. (1999). Peer victimisation at school and the health of secondary school

    students. *British Journal of Educational Psychology, 69*, 95-104.

Rigby, K. (2000). Effects of peer victimization in schools and perceived social

    support on adolescent well-being. *Journal of Adolescence, 23*, 57-68.

Rigby, K., Cox, I., & Black, G. (1997). Cooperativeness and bully/victim problems

    among Australian schoolchildren. *Journal of Social Psychology, 137*(3), 357-

    368.

Rigby, K., & Slee, P. T. (1991). Bullying among Australian school children:

    Reported behavior and attitudes toward victims. *The Journal of Social

    Psychology, 131*(5), 615-627.

Rigby, K., & Slee, P. T. (1992). Dimensions of interpersonal relation among

    Australian children and implications for psychological well-being. *The

    Journal of Social Psychology, 133*(1), 33-42.

Rigby, K., & Slee, P. T. (1998). *The Peer Relations Questionnaire (PRQ)*. Point

    Lonsdale, VIC: The Professional Reading Guide.

Rigby, K., & Slee, P. T. (1999). Australia. In P. K. Smith, Y. Morita, J. Junger-Tas,

    D. Olweus, R. Catalano & P. Slee (Eds.), *The nature of school bullying: A

    cross-national perspective*. London: Routledge.

Rivers, I., & Smith, P. K. (1994). Types of bullying behaviour and their correlates.

    Aggressive Behavior, 20, 359-368.

Roberts, C. M. (1999). The prevention of depression in children and adolescents.

    Australian Psychologist, 34(1), 49-57.

Roberts, C. M., & Bishop, B. (2003). Depression, childhood. In T. P. Gullotta & M. Bloom (Eds.), *Encyclopaedia of primary prevention and health promotion*. New York: Kluwer Academic / Plenum Publishers.

Roberts, C. M., Kane, R., Bishop, B., Matthews, H., & Thomson, H. (2004). The prevention of depressive symptoms in rural school children: A follow-up study. *International Journal of Mental Health Promotion, 6*(3), 4-16.

Roberts, C. M., Kane, R., Thomson, H., Bishop, B., & Hart, B. (2003). The prevention of depressive symptoms in rural school children: A randomised controlled trial. *Journal of Consulting and Clinical Psychology, 71*, 622-628.

Roland, E. (1989). Bullying: The Scandinavian research tradition. In D. P. Tattum & D. A. Lane (Eds.), *Bullying in schools* (pp. 21-32). Stoke-on-Trent: Trentham Books.

Roland, E. (1993). Bullying: A developing tradition of research and management. In D. Tattum (Ed.), *Understanding and managing bullying*. Oxford: Heinemann Educational.

Rubin, K. H., Bukowski, W., & Parker, J. G. (1998). Peer interactions, relationships, and groups. In N. Eisenberg (Ed.), *Handbook of child psychology: Social, emotional, and personality development* (5th ed., Vol. 3, pp. 619-700). New York: John Wiley & Sons.

Rubin, K. H., Chen, X., MacDougall, P., Bowker, A., & McKinnon, J. (1995). The Waterloo Longitudinal Project: Predicting internalizing and externalizing problems in adolescence. *Development and Psychopathology, 7*, 751-764.

Rudolph, K. D., Hammen, C., & Burge, D. (1994). Interpersonal functioning and depressive symptoms in childhood: Addressing the issues of specificity and comorbidity. *Journal of Abnormal Child Psychology, 22*, 355-371.

Rutter, M. (1991). Pathways from childhood to adult life: The role of schooling. *Pastoral Care, September*, 3-10.

Salmivalli, C. (1999). Participant role approach to school bullying: Implications for interventions. *Journal of Adolescence, 22*, 453-459.

Salmivalli, C. (2002). Is there an age decline in victimization by peers at school? *Educational Research, 44*(3), 269-277.

Salmivalli, C., Karhunen, J., & Lagerspetz, K. M. J. (1996). How do the victims respond to bullying? *Aggressive Behavior, 22*, 99-109.

Salmivalli, C., Kaukiainen, A., Kaistaniemi, L., & Lagerspetz, K. M. (1999). Self-evaluated self-esteem, peer evaluated self-esteem and defensive egotism as predictors of adolescents' participation in bullying situations. *Personality and Social Psychology Bulletin, 25*(10), 1268-1278.

Salmivalli, C., Lagerspetz, K., Bjuorkqvist, K., Osterman, K., & Kaukiainen, A. (1996). Bullying as a group process: Participant roles and their relations to social status within the group. *Aggressive Behavior, 22*, 1-15.

Salmivalli, C., Lappalainen, M., & Lagerspetz, K. M. J. (1998). Stability and change of behaviour in connection with bullying in schools: A two-year follow-up. *Aggressive Behavior, 24*, 205-218.

Salmivalli, C., & Nieminen, E. (2002). Proactive and reactive aggression among school bullies, victims, and bully-victims. *Aggressive Behavior, 28*, 30-44.

Sandler, I. (1999). Progress in developing strategies and theory for the prevention and treatment of anxiety and depression. *Prevention & Treatment, 2*, Article 9.

Sattler, J. M. (2002). *Assessment of children: Behavioral and clinical applications* (4th ed.). San Diego: Jerome M. Sattler.

Schwartz, D. (2002). Subtypes of victims and aggressors in children's peer groups. *Journal of Abnormal Child Psychology, 28*(2), 181-192.

Schwartz, D., Dodge, K. A., & Coie, J. D. (1993). The emergence of chronic peer victimisation in boys' play groups. *Child Development, 64*, 1755-1772.

Schwartz, D., Dodge, K. A., Coie, J. D., Hubbard, J. A., Cillessen, A. H., Lemerise, E. A., et al. (1998). Social-cognitive and behavioral correlates of aggression and victimization in boys' play groups. *Journal of Abnormal Child Psychology, 26*(6), 431-440.

Schwartz, D., Dodge, K. A., Pettit, G. S., & Bates, J. E. (1997). The early socialization of aggressive victims of bullying. *Child Development, 68*, 665-675.

Schwartz, D., Dodge, K. A., Pettit, G. S., & Bates, J. E. (2000). Friendship as a moderating factor in the pathway between early harsh home environment and later victimization in the peer group. *Developmental Psychology, 36*(5), 646-662.

Schwartz, D., McFadyen-Ketchum, S., Dodge, K. A., Pettit, G. S., & Bates, J. E. (1999). Early behavior problems as a predictor of later peer group victimization: Moderators and mediators in the pathways of social risk. *Journal of Abnormal Child Psychology, 27*(3), 191-201.

Seligman, L. D., Ollendick, T. H., Langley, A. K., & Baldacci, H. B. (2004). The utility of measures of child and adolescent anxiety: A meta-analytic review of the Revised Manifest Anxiety Scale, the State-Trait Anxiety Inventory for Children, and the Child Behavior Checklist. *Journal of Clinical Child and Adolescent Psychology, 33*(3), 557-565.

Sharp, S. (1995). How much does bullying hurt? The effects of bullying on the personal wellbeing and educational progress of secondary aged students. *Educational and Child Psychology, 12*(2), 81-88.

Sharp, S. (1996). Self-esteem, response style and victimisation: possible ways of preventing victimisation through parenting and school based training programs. *School psychology international, 17*, 347-357.

Sharp, S., & Smith, P. K. (1991). Bullying in UK schools: The DES Sheffield bullying project. *Early Child Development and Care, 77*, 47-55.

Sharp, S., Thompson, D., & Arora, T. (2000). How long before it hurts?: An investigation into long-term bullying. *School Psychology International, 21*(1), 37-46.

Shochet, I. M., & O'Gorman, J. G. (1995). Ethical issues in research on adolescent depression and suicidal behaviour. *Australian Psychologist, 30*(3), 183-186.

Siegel, S., & Castellan, N. J. (1988). *Nonparametric statistics for the behavioural sciences* (2nd ed.). New York: McGraw-Hill.

Silburn, S. (1999). Frameworks for conceptualising youth suicide prevention. *Youth Suicide Prevention Bulletin, 2*, 21-24.

Silverman, W., La Greca, A. M., & Wassterin, S. (1995). What do children worry about? Worries and their relations to anxiety. *Child Development, 66*, 671-686.

Slee, P. T. (1993). Bullying at school: It's hard not to feel helpless. *The National Children's Bureau of Australia, 18*(4), 14-16.

Slee, P. T. (1994a). Life at school used to be good. *Youth Studies Australia, Summer*, 20-23.

Slee, P. T. (1994b). Situational and interpersonal correlates of anxiety associated

with peer victimisation. *Child Psychiatry and Human Development, 25*(2),

97-107.

Slee, P. T. (1995a). Bullying in the playground: The impact of inter-personal

violence on Australian children's perceptions of their play environment.

Children's Environments, 12(3), 320-327.

Slee, P. T. (1995b). Peer victimization and its relationship to depression among

Australian primary school children. *Personality and Individual Differences,

18*(1), 57-62.

Slee, P. T., & Rigby, K. (1993a). Australian school children's self appraisal of

interpersonal relations: The bullying experience. *Child Psychiatry and

Human Development, 23*(4), 273-281.

Slee, P. T., & Rigby, K. (1993b). The relationship of Eysenck's personality factors

and self-esteem to bully-victim behavior in Australian schoolboys.

Personality and Individual Differences, 14(2), 371-373.

Smiley, P., & Dweck, C. (1994). Individual differences in achievement goals among

young children. *Child Development, 65*, 1723-1743.

Smith, J. D., Schneider, B. H., Smith, P. K., & Ananiadou, K. (2004). The

effectiveness of whole-school antibullying programs: A synthesis of

evaluation research. *School Psychology Review, 33*(4), 547-560.

Smith, P. K., Cowie, H., Olafsson, R. F., & Liefooghe, A. P. D. (2002). Definitions

of bullying: A comparison of terms used, and age and gender differences, in a

fourteen-country international comparison. *Child Development, 73*(4), 1119-

1133.

Smith, P. K., & Levan, S. (1995). Perceptions and experiences of bullying in younger

    pupils. *British Journal of Educational Psychology, 65*, 489-500.

Smith, P. K., & Sharp, S. (Eds.). (1994). *School bullying: Insights and perspectives*.

    London: Routledge.

Smith, P. K., Talamelli, L., Cowie, H., Naylor, P., & Chauhan, P. (2004). Profiles of

    non-victims, escaped victims, continuing victims and new victims of school

    bullying. *British Journal of Educational Psychology, 74*, 565-581.

Snyder, J., Brooker, M., Patrick, M., Snyder, A., Schrepferman, L., & Stoolmiller,

    M. (2003). Observed peer victimization during early elementary school:

    Continuity, growth, and relation to risk for child antisocial and depressive

    behavior. *Child Development, 74*(6), 1881-1898.

Solberg, M. E., & Olweus, D. (2003). Prevalence estimation of school bullying with

    the Olweus Bully/Victim Questionnaire. *Aggressive behavior, 29*, 239-268.

Sourander, A., Helstela, L., Helenius, H., & Piha, J. (2000). Persistence of bullying

    from childhood to adolescence-a longitudinal 8-year follow-up study. *Child

    Abuse and Neglect, 24*(7), 873-881.

Spence, S. H. (1996a). A case for prevention. In P. Cotton & H. Jackson (Eds.),

    Early intervention and prevention in mental health (pp. 1-19). Melbourne:

    The Australian Psychological Society.

Spence, S. H. (1996b). The prevention of anxiety disorders in childhood. In P. Cotton

    & H. Jackson (Eds.), *Early intervention and prevention in mental health* (pp.

    87-107). Melbourne: The Australian Psychological Society.

Spence, S. H., & Milne, J. (1987). The Children's Depression Inventory: Norms and

    factor analysis from an Australian school population. *Australian

    Psychologist, 22*, 345-351.

Spence, S. H., Sheffield, J. K., & Donovan, C. L. (2003). Preventing adolescent depression: An evaluation of the Problem Solving for Life program. *Journal of Consulting and Clinical Psychology, 71*(1), 3-13.

Spilton Koretz, D. S., & Moscicki, E. K. (1997). An ounce of prevention research: What is it worth? *American Journal of Community Psychology, 25*(2), 189-195.

St Leger, L. (1999). The opportunities and effectiveness of the health promoting school in improving child health-a review of the claims and evidence. *Health Education Research: Theory and Practice, 14*(1), 51-69.

St Leger, L. (2001). Schools, health literacy and public health: Possibilities and challenges. *Health Promotion International, 16*(2), 197-205.

Steckler, A., Ethelbah, B., Martin, C. J., Stewart, D. D., Pardilla, M. N., Gittelsohn, J., et al. (2002). Lessons learned from the pathways process evaluation. In A. Steckler & L. Linnan (Eds.), *Process evaluation for public health interventions and research*. San Francisco: Jossey-Bass.

Stephenson, P., & Smith, D. (1989). Bullying in the junior school. In D. P. Tattum & D. A. Lane (Eds.), *Bullying in schools* (pp. 45-57). Stoke-on-Trent: Trentham Books.

Stevens, J. (1992). *Applied multivariate statistics for the social sciences* (2nd ed.). Hillsdale, NJ: Lawrence Erlbaum Associates.

Stevens, V., De Bourdeaudhuij, I., & Van Oost, P. (2002). Relationship of the Family Environment to children's involvement in bully/victim problems at school. *Journal of Youth and Adolescence, 31*(6), 419-428.

Sutton, J., & Smith, P. K. (1999). Bullying as a group process: An adaptation of the participant role approach. *Aggressive Behavior, 25*, 97-111.

Swearer, S. M., & Cary, P. T. (2003). Perceptions and attitudes toward bullying in

middle school youth: A developmental examination across the bully/victim

continuum. *Journal of Applied School Psychology, 19*(2), 63-79.

Swearer, S. M., Song, S. Y., Cary, P. T., Eagle, J. W., & Mickelson, W. T. (2001).

Psychosocial correlates in bullying and victimization: The relationship

between depression, anxiety, and bully/victim status. *Journal of Emotional

Abuse, 2*(2/3), 95-121.

Sweeting, H., & West, P. (2001). Being different: Correlates of the experience of

teasing and bullying at age 11. *Research Papers in Education, 16*(3), 225-

246.

Tabachnick, B. G., & Fidell, L. S. (2001a). *Computer-assisted research design and

analysis*. Boston: Allyn and Bacon.

Tabachnick, B. G., & Fidell, L. S. (2001b). *Using multivariate statistics* (4th ed.).

Needham Heights, MA: Allyn and Bacon.

Tattum, D. (1993). Short, medium and long-term management strategies. In D.

Tattum (Ed.), *Understanding and managing bullying* (pp. 59-75). Oxford:

Heinemann School Management.

Thompson, D., & Arora, T. (1991). Why do children bully? An evaluation of the

long-term effectiveness of a whole-school policy to minimize bullying.

Pastoral Care in Education, 8-12.

Tomas De Almeida, A. M. (1999). Portugal. In P. K. Smith, Y. Morita, J. Junger-

Tas, D. Olweus, R. Catalano & P. T. Slee (Eds.), *The nature of school

bullying: A cross-national perspective* (pp. 174-186). London: Routledge.

Troy, M., & Sroufe, L. A. (1987). Victimization among preschoolers: Role of

attachment relationship history. *Journal of the American Academy Child and*

Adolescent Psychiatry, 26, 166-172.

Uebersax, J. (2001, 2003). *Statistical methods for rater agreement*. Retrieved June,

2005, from

www.ourworld.compuserve.com/homepages/jsuebersax/agree.htm

Vernberg, E. M. (1990). Psychological adjustment and experiences with peers during

early adolescence: Reciprocal, incidental, or unidirectional relationships.

Journal of Abnormal Child Psychology, 18(2), 187-198.

WHO. (1996). *School health promotion-Series 5: Regional guidelines: Development*

of health promoting schools: A framework for action. Manila: World Health

Organisation.

Webber, C. (1991). Creating an inviting school environment. *Challenge in*

Educational Administration, 28(2), 12-15.

Weissberg, R. P., & Bell, D. N. (1997). A meta-analytic review of primary

prevention programs for children and adolescents: Contributions and caveats.

American Journal of Community Psychology, 25(2), 207-208.

Weissberg, R. P., Caplan, M., & Harwood, R. L. (1991). Promoting competent young

people in competence-enhancing environments: A systems-based perspective

on primary prevention. *Journal of Consulting and Clinical Psychology, 59*(6),

830-841.

Whitney, I., Rivers, I., Smith, P. K., & Sharp, S. (1994). The Sheffield project:

Methodology and findings. In P. K. Smith & S. Sharp (Eds.), *School*

bullying: Insights and perspectives (pp. 84-107). London: Routledge.

Whitney, I., & Smith, P. K. (1993). A survey of the nature and extent of bullying in junior/middle and secondary schools. *Educational Research, 35*(1), 3-25.

Williams, K., Chambers, M., Logan, S., & Robinson, D. (1996). Association of common health symptoms with bullying in primary school children. *British Medical Journal, 313*, 17-19.

Wolke, D., Woods, S., Bloomfield, L., & Karstadt, L. (2000). The association between direct and relational bullying and behaviour problems among primary school children. *Journal of Child Psychology and Psychiatry, 41*(8), 989-1002.

Wolke, D., Woods, S., Stanford, K., & Schulz, H. (2001). Bullying and victimization of primary school children in England and Germany: Prevalence and school factors. *British Journal of Psychology, 92*(4), 673-696.

Woods, S., & Wolke, D. (2003). Does the content of anti-bullying policies inform us about the prevalence of direct and relational bullying behaviour in primary schools? *Educational Psychology, 23*(4), 381-401.

Zar, J. H. (1999). *Biostatistical analysis* (4th ed.). Upper Saddle River, N.J.: Prentice Hall.

Zubrick, S. R., Silburn, S. R., Burton, P., & Blair, E. (2000). Mental health disorders in children and young people: Scope, cause and prevention. *Australian and New Zealand Journal of Psychiatry, 34*, 570-578.

Zubrick, S. R., Silburn, S. R., Gurrin, L., Teo, H., Shephard, C., Carlton, J., et al. (1997). *Western Australian Child Health Survey: Education, health and competence*. Perth, WA: Australian Bureau of Statistics.

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Appendix A

Bullying Questionnaire for Students – Pre-intervention (selected items)

CONFIDENTIAL QUESTIONNAIRE

Dear Year 4 Student

The Centre for Health Promotion Research is trying to find out about how students treat each other at school.

We are asking questions about bullying and what your school does about bullying. We are also asking some questions about you.

This survey is confidential. That means that you do not write your name on it and no one in your school or your parents will find out what you have said.

This is not a test and there are no right or wrong answers. Please answer all the questions as honestly as you can. We are very interested in what you have to say. The information you give could be helpful to you, other students and your school. If you don't want to answer any questions, you don't have to.

All the questions will be read out to you. If you have any questions about the survey, please ask the Curtin University research assistant visiting your class.
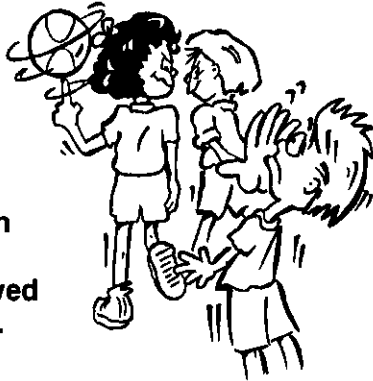
Yolanda Pintabona
Friendly Schools: Bullying Intervention Project
Project Coordinator

You may have noticed that children sometimes bully other children.

Bullying is when these things happen again and again to someone:

**Being
ignored,
left out on
purpose,
or not allowed
to join in.**

**Being hit,
kicked or
pushed
around.**

**Lies or nasty stories
are told about them
to make other kids
not like them.**

**Being
made afraid
of getting
hurt.**

**Being made
fun of and
teased in a
mean and
hurtful way.**

**But when teasing
is done in a
friendly and
playful way we
don't call it
bullying.**

**It is hard for the kid being bullied to stop these things from
happening again and again.**

**While fighting is not a good thing to
do, it is not bullying when two
students who are as strong as each
other get into a fight.**

Last term, how often did another student or group of students bully you? (please circle one number)

a	I was bullied **ALMOST EVERY DAY** last term	1
b	I was bullied **MOST DAYS** last term	2
c	I was bullied **ABOUT ONCE A WEEK** last term	3
d	I was bullied **EVERY FEW WEEKS** last term	4
e	I was bullied **ONLY ONCE OR TWICE** last term	5
f	I was **NOT** bullied **AT ALL** last term	6

(adapted from Peer Relations Questionnaire, Rigby & Slee, 1998; Olweus, 1996)

Last term, how were you bullied? (circle one number for each statement)

		Lots of times	Sometimes	Never
a	I was made fun of and teased in a hurtful way	1	2	3
b	I was called mean and hurtful names	1	2	3
c	Kids ignored me, didn't let me join in, or left me out of things on purpose	1	2	3
d	I was hit, kicked or pushed around	1	2	3
e	Kids told lies or spread nasty stories about me and tried to make other kids not like me	1	2	3
f	I had money or other things taken away from me or broken	1	2	3
g	I was made afraid that I would get hurt	1	2	3
h	I was bullied in another way (What way?)_____	1	2	3

(adapted from Peer Relations Questionnaire, Rigby & Slee, 1998; Olweus, 1996)

Last term, how often did you, on your own or in a group, bully another student? (please circle one number)

a	I bullied someone **ALMOST EVERY DAY** last term	1
b	I bullied someone **MOST DAYS** last term	2
c	I bullied someone **ABOUT ONCE A WEEK** last term	3
d	I bullied someone **EVERY FEW WEEKS** last term	4
e	I bullied someone **ONLY ONCE OR TWICE** last term	5
f	I did **NOT** bully anyone **AT ALL** last term	6

(adapted from Peer Relations Questionnaire, Rigby & Slee, 1998; Olweus, 1996)

Appendix A3 Demographic Questions

What is your age? (please write number of years)

<table>
<tr><td> </td><td>YEARS</td></tr>
</table>

Are you a boy or a girl? (please circle one number)

Girl	Boy
1	2

Appendix B

Bullying Questionnaire for Parents – Pre-intervention (selected items)

CONFIDENTIAL QUESTIONNAIRE

Dear Year 4 Parent/Caregiver

The Centre for Health Promotion Research at Curtin University is conducting this survey to find out about bullying and to assess the effectiveness of the Friendly Schools: Bullying Intervention Program. This program is designed to reduce and prevent bullying in primary schools. You have been sent this questionnaire because your Year 4 child's school has agreed to take part in this project and you provided consent for your child to complete the student questionnaire in class.

We have asked you to identify your name and your Year 4 child's school on the front page of this questionnaire for consent purposes only. This front page will be separated from your responses and all identifying information will remain strictly confidential.

The questionnaire will take about 30 minutes to complete. Please answer all questions honestly and to the best of your knowledge, in the order they are presented.

After completing the questionnaire, please place it in the envelope in which you received it, seal the envelope and return it to the school via your Year 4 son or daughter. The sealed envelopes will be collected by a representative from Curtin University. Teachers will not have access to your responses.

If you do not wish to complete the questionnaire, please have your Year 4 child return it to their class teacher in the envelope it came in. This lets us know you received the questionnaire and have decided not to participate.

In appreciation of your participation, the envelopes of all returned questionnaires will be placed in a draw for one of three $50 Coles vouchers.

If you have any questions about the questionnaire or would like to talk about the Friendly Schools Project, please contact Yolanda Pintabona (9266 3761) or Erin Erceg (9266 2752).

Thank you for your help.

Yours sincerely

Yolanda Pintabona
Friendly Schools: Bullying Intervention Project
Project Coordinator

CONSENT: I have read about this study and any questions have been answered to my satisfaction. (PLEASE PRINT IN UPPER CASE LETTERS)

I _____ of _____
    First name   Last name   School name

will participate in this research study, realising that I may withdraw at any time without prejudice. I agree that research data gathered for the study may be published, provided my name and my school's name is not used.

Signature_____ Date _____

Appendix B2 Bullying Questions

To the best of your knowledge, how often LAST TERM (TERM 1), was your Year 4 child bullied by another student or group of students? (please circle one number)

a	**EVERY DAY** last term	1
b	**MOST DAYS** last term	2
c	**ABOUT ONCE A WEEK** last term	3
d	**EVERY FEW WEEKS** last term	4
e	**ONLY ONCE OR TWICE** last term	5
f	**NOT AT ALL** last term	6

(Adapted from Peer Relations Assessment Questionnaire - Parent, Rigby, 1997)

To the best of your knowledge, how often LAST TERM (TERM 1), did your Year 4 child bully another student or students? (please circle one number)

a	**EVERY DAY** last term	1
b	**MOST DAYS** last term	2
c	**ABOUT ONCE A WEEK** last term	3
d	**EVERY FEW WEEKS** last term	4
e	**ONLY ONCE OR TWICE** last term	5
f	**NOT AT ALL** last term	6

(Adapted from Peer Relations Assessment Questionnaire - Parent, Rigby, 1997)

> **These next questions ask about you and your family. The information you provide will be kept strictly confidential and will not be used to find out the identity of you or your child.**

1. **Which category best represents your age?** (please circle one number)

Under 25 years	25-29 years	30-34 years	35-39 years	40-44 years	45-49 years	50-54 years	55-59 years	60 years or older
1	2	3	4	5	6	7	8	9

2. **What is the relationship between you and your child in Year 4?**
   (please circle one number only)

a	I am his/her mother	1
b	I am his/her father	2
c	I am his/her stepmother	3
d	I am his/her stepfather	4
e	I am his/her legal guardian	5
f	Other	6

⟶ _____
(please specify)

3. **INCLUDING your child in Year 4, how many children do you have?**
   (please write number in box)

4. **Do you have more than one child in Year 4 (for example, twins, triplets, step children, etc)?** (please circle one number only)

no	1
yes	2

⟶ If yes, please fill out one questionnaire for each

child (sorry for the inconvenience)

5. **What is the highest level of education you have completed?** (please circle one number only)

Primary school	1
Year 10 at secondary school	2
Year 11 at secondary school	3
Year 12 at secondary school	4
Trade qualification/TAFE course/business college	5
University Qualification	6
Other (Please specify)	7

6. **What is your postcode?** (please write in boxes)

7. **Where were you born?** (please circle one number only)

Australia	1
England	2
Scotland	3
Italy	4
Greece	5
New Zealand	6
Vietnam	7
Other (Please specify)	8

Appendix C

Participation Letters for Intervention Schools

[ADDRESS]

[DATE]

Dear [PRINCIPAL NAME]

Thank you for your support of the Bullying Project, an intervention trial addressing bullying prevention strategies. The level of commitment and enthusiasm you have for the development of your school was obvious at this very busy time of the year and I look forward to working with you on this exciting project in 2000.

The aim of this project is to assess the effectiveness of a whole school program, including classroom and home activities, to address the prevalence of bullying among students. This project will measure the extent to which the intervention can prevent, reduce and manage bullying in primary schools. This will be achieved through a three year randomized control trial designed to measure the extent to which a two-year whole school program will affect bullying behaviour in schools. The study will specifically target a cohort of Year 4 students, their teachers and parents in 2000 and track their progress for two years to November 2001.

The project is based on the results of a year-long formative study conducted by the Centre for Health Promotion Research in 1999. This study developed a set of principles of successful practice in strategies to reduce and prevent bullying. These principles were developed from an extensive literature review and validated by local, national and international experts in bullying prevention and behaviour management in schools.

To ensure a rigorous scientific research design, Perth metropolitan schools were randomly assigned as either an intervention or a control school. Your school was selected by this process as an intervention school.

Intervention Program
Intervention schools will receive the intervention program, comprised of two levels:

- Whole school:
  - Resources and training will be made available for staff to assist with school policy development and whole-school activity.
  - The Successful Practice resource and other resources developed for the program will be available to whole school staff.

- Years 4 in 2000 and Year 5 in 2001:
  - Classroom and home learning activities and resources will be provided to teachers.
  - Full day of professional development for teachers of Year 4 students in 2000 and Year 5 in 2001.

Data Collection

Intervention schools will also be involved in data collection, involving minimal interruption or work for school staff.

- Data is collected at two points during the year. These are April and November of 2000 and 2001.
- Data is collected in the form of questionnaires for Year 4 students, their teachers and their parents in 2000 and Year 5 students, their teachers and their parents in 2001.

Staff involved in this research project are from education and psychology backgrounds. There are very supportive and aware of the current pressures, especially those related to the implementation of the Curriculum Framework, in the school environment. Two of the staff were writers of the Health and Physical Education learning area curriculum framework.

In January 2000 your school will receive a document outlining details of the intervention program, a timeline of events and further information about the project.

As the school's coordinator for this project, I will be your contact person and will give your school my full support and assistance. I will call you at the beginning of the school year to further our discussions and organisation.

Until then, best wishes for Christmas and the New Millennium and I look forward to speaking with you in January.

Kind regards

Erin Erceg
Project Coordinator-Schools

Assoc Prof Donna Cross
Managing Director
Centre for Health Promotion Research

7th March 2000

FRIENDLY SCHOOLS BULLYING INTERVENTION PROJECT

RE: Letter of Agreement for Project Schools

Dear

Thank you for agreeing to be a valuable contributor to the Friendly Schools Bullying Intervention Project. Please find enclosed an updated version of the Project Details and Timeline of your school's involvement. This new document will replace the original center page in your Friendly Schools Information Booklet which was sent out at the beginning of the year.

[School name] will receive the whole school Friendly Schools Bullying Intervention Program. This will involve your school's participation in the following:

School Commitment:
The trial will run over a two-year period in the school. The school will be involved in the following intervention process.

- The collection of data from students, teachers and parents.
- Classroom intervention specifically addressing Year 4 in 2000 and Year 5 in 2001. This will include teacher training for Year 4 teachers in 2000 and Year 5 teachers in 2001, including full teacher relief.
- Whole school strategies and training for a Friendly Schools Core Committee.

Target Groups:
- 2000 Year 4 students/teachers/parents
- 2001 Year 5 students/teachers/parents
- All school staff for whole school program

Training:
- One and a half days training for Year 4 teachers 2000 (paid relief)
- One and a half days training for Year 5 teachers 2001 (paid relief)
- Half day training for Core Committee.

Data Collection:
Questionnaires will be administered by trained Curtin University research staff with minimal disruption to the school as follows:

- 2000 Term 2 May students/teacher/parents/core committee
- 2000 Term 4 November students/teachers/parents/core committee
- 2000 Term 2 May students/teachers/core committee
- 2000 Term 4 November students/teachers/parents/core committee

It is the Centre for Health Promotion Research's role to provide «Company» with our full support and commitment. As a part of the project we will provide materials and support in the form of:

❑ Cross curricular bullying prevention educational materials linked to the Health Education K-10 Syllabus, Curriculum Framework and the Student Outcome Statements. The curriculum to be introduced in 2000 is specifically designed for Year 4 students and in 2001 the Year 5 component will be introduced.

❑ Home activities delivered through classroom materials to help parents teach their children about addressing the issue of bullying.

❑ Resource materials including information and resource sheets, pamphlets, videos and equipment to support the implementation process.

❑ One and a half days of teacher training (with paid teacher relief) for Year 4 teachers in 2000 and Year 5 teachers in 2001.

❑ One half day training for the School Core Committee in school policy and whole school intervention strategies.

❑ Teacher's Guide for the Friendly Schools Classroom Intervention.

❑ Parent Workshop on bullying information and strategies for intervention.

❑ Information about bullying knowledge, attitudes and behaviours of Year 4 and 5 students and their parents.

A second copy of this letter has been included for your records. Would you please sign one copy and return either directly to the Friendly Schools Project Coordinator Ms Erin Erceg during her visit to your school or send to our office address:

Friendly Schools – Bullying Intervention Project
Centre for Health Promotion Research
School of Public Health,
Curtin University
GPO Box U1987
Perth WA 6845

Fax: (08) 9266 2958

Thank you for your support and involvement in this important project. I can be contacted at Curtin University on 9266 2752 if you have any questions or concerns.

Yours sincerely

Erin Erceg
Projects Coordinator – Schools
Friendly Schools Bullying Intervention Project

Phone 92662752
Fax: 92662958
Email: ercege@health.cutin.edu.au

I agree to ensure all schools in the Friendly Schools Project receive the educational materials and support indicated in this letter.

_____

Friendly Schools Project Coordinator - Schools
Erin Erceg

I agree to allow my school to be involved in the Friendly Schools Project and the activities indicated above during 2000 and 2001.

_____   _____
Principal   School Name

Appendix D

Participation Letters for Control Schools

[ADDRESS]

[DATE]

Dear [PRINCIPAL NAME]

Thank you for your support for the Bullying Project, an intervention trial addressing bullying prevention strategies. The level of commitment and enthusiasm you have for the development of your school was obvious at this very busy time of the year and I look forward to working with you on this exciting project in 2000.

The aim of this project is to assess the effectiveness of a whole school program, including classroom and home activities, to address the prevalence of bullying among students. This project will measure the extent to which the intervention can prevent, reduce and manage bullying in primary schools. This will be achieved through a three year randomized control trial designed to measure the extent to which a two-year whole school program will affect bullying behaviour in schools. The study will specifically target a cohort of Year 4 students, their teachers and parents in 2000 and track their progress for two years to November 2001.

Schools have been randomly selected from within the Perth metropolitan area as either an Intervention school or a Control school. Your school was selected by this process as a Control school.

Control schools:

- Will be involved in the data gathering process, involving minimal interruption or work for school staff.
- Data is collected at two points during the year. These are April and November of 2000 and 2001.
- Data is collected in the form of questionnaires from Year 4 students, their teachers and their parents in 2000 and Year 5 students, their teachers and their parents in 2001.
- Schools who agree to participate in the project will receive the Road Safety pack which includes resources and training for teachers (without relief).

Staff involved in this research project are from education and psychology backgrounds. There are very supportive and aware of current pressures, especially those related to the implementation of the Curriculum Framework, in the school environment. Two of the staff were writers of the Health and Physical Education learning area curriculum framework.

In January 2000 your school will receive a document outlining the details of participation in the project as a control school, a timeline of events and further information about the project.

As the school's coordinator for this project, I will be your contact person and will give your school my full support and assistance. I will call you at the beginning of the school year to further our discussions and organisation.

Until then, best wishes for Christmas and the New Millennium and I look forward to speaking with you in January.

Kind Regards

Erin Erceg   Assoc Prof Donna Cross
Project Coordinator-Schools   Managing Director
                                              Centre for Health Promotion
Research

7th March 2000

<div align="center">FRIENDLY SCHOOLS BULLYING INTERVENTION PROJECT</div>

<div align="center">RE: Letter of Agreement for Project Schools</div>

Dear

Thank you for agreeing to be a valuable contributor to the Friendly Schools Project. Please find enclosed the updated version of the Trial Details and the Timeline for your school's involvement. This new document will replace the original center page in your Friendly Schools Information Booklet which was sent out at the beginning of the year.

[School name] will be involved in the collection of data as a control school. This will involve your school's participation in the following:

School Commitment:
The trial will run over a two-year period in the school. Your school will be involved in:

- The collection of data from students, teachers and parents from the target groups.

Target Groups:
- 2000 Year 4 students/teachers/parents
- 2001 Year 5 students/teachers/parents
- School members representative of the whole-school community

Data Collection:
Questionnaires will be administered by trained Curtin University research staff with minimal disruption to the school as follows:

- 2000 Term 2 May students/teacher/parents/whole school representatives
- 2000 Term 4 November students/teachers/parents/ whole school representatives
- 2000 Term 2 May students/teachers/ whole school representatives
- 2000 Term 4 November students/teachers/parents/ whole school representatives

It is the Centre for Health Promotion Research's role to provide «Company» with our full support and commitment. As a gesture of our gratitude for your school's involvement in this important project, we will provide your school with:

- Stickers and incentives for the students involved in the data collection.
- Road safety materials and training which includes cross curricular road and bicycle safety educational materials linked to the Health Education K-10 Syllabus, Curriculum Framework and Student Outcome Statement.

A second copy of this letter has been included for your records. Would you please sign one copy and return either directly to the Friendly Schools Project Coordinator Ms Erin Erceg during her visit to your school or send to our office address:

Friendly Schools – Bullying Intervention Project
Centre for Health Promotion Research
School of Public Health,
Curtin University
GPO Box U1987
Perth WA 6845

Fax: (08) 9266 2958

Thank you for your support and involvement in this important project. I can be contacted at Curtin University on 9266 2752 if you have any questions or concerns.

Yours sincerely

Erin Erceg
Projects Coordinator – Schools
Friendly Schools Bullying Intervention Project

Phone 92662752
Fax: 92662958
Email: ercege@health.cutin.edu.au

I agree to ensure all schools in the Friendly Schools Project receive the educational materials and support indicated in this letter.

_____
Friendly Schools Project Coordinator - Schools
Erin Erceg

I agree to allow my school to be involved in the Friendly Schools Project and the activities indicated above during 2000 and 2001.

_____   _____
Principal   School Name

Appendix E

Teacher Information Letter for Intervention Schools

31st March 2000

Dear Year 4 Teacher

As you know, your school is involved in the Friendly Schools: Bullying Intervention Project. This project involves activity at the whole school level and curriculum lessons with Year 4 students aimed at reducing and preventing school bullying.

Questionnaires have been developed for students, teachers and parents to complete that will enable us to determine whether the project achieves change in knowledge, attitudes and social skills and ultimately the reduction and prevention of bullying.

What do the questionnaires ask?
The student questionnaire assesses students' knowledge and understanding of bullying behaviour; involvement in bullying; response to bullying incidents; attitudes toward bullying; feelings of safety, happiness and loneliness at school; perceptions of peer support; and perceptions of the school's response to bullying. The questionnaire also assesses self-esteem and symptoms of depression and anxiety.

The teacher and parent questionnaires assess knowledge and understanding of bullying behaviour; attitudes toward bullying; response to bullying incidents; and involvement in school activity to address bullying.

What does administration involve?
Student Questionnaire
For each Year 4 class at your school, a trained questionnaire administrator from Curtin University will administer the student questionnaire during class time. The day we propose to administer the student questionnaire to Year 4 students at your school is **FRIDAY 12TH MAY.**

Two one hour periods (15 minutes for administrator discussion with teacher and handing out of questionnaires and 45 minutes for questionnaire administration) either side of recess is required. We would like to begin at 9.00am. This means there may be a period of extra time following completion of the questionnaire, prior to recess. We would like to allow this time for any unavoidable delays in beginning the administration or if the administration takes longer than expected.

Please plan to be present in your class during the administration as not all questionnaire administrators are trained teachers and help with behaviour management would be appreciated.

What if I teach a split year class?

The questionnaire will be administered to Year 4 students only. If you have a split class, could you please arrange for your Year 4 students to be grouped with other Year 4 students for the administration period. This may involve your Year 4 students attending another year 4 class or two groups of Year 4 students from two split classes being placed in a classroom together. We are aware of the effort this requires and greatly appreciate your assistance.

Teacher Questionnaire

The questionnaire administrator will provide you with a teacher questionnaire during the student administration.

Parent Questionnaire

Each student will be provided with an envelope containing a parent questionnaire to take home.

What about consent?

Along with this letter, you should have received from your principal parent consent letters for your students. These letters inform parents of the project and seek consent for their child to complete the student questionnaire. Passive consent will be employed, this means that parents who consent to their child participating do not need to reply. Parents who do not want their child to complete the questionnaire are required to send back the reply slip.

Action required

Please distribute the parent consent letters to your students in Week 9. This will provide parents with Week 10 and Week 1 of term 2 to respond prior to the commencement of questionnaire administration.

Please collect returned parent consent slips (noting that only parent who *do not* wish their child to complete the questionnaire will return slips). The questionnaire administrator will ask you for any return slips when they visit your class. Students for which consent is not obtained will be provided with an alternative activity to engage in while the questionnaire is being administered.

Inquiries

If you would like clarification or further information, please contact the Project Coordinator, Yolanda Pintabona on 9266 3761.

Yours sincerely

Yolanda Pintabona
Project Coordinator
Friendly Schools: Bullying Intervention Project
Centre for Health Promotion Research
Curtin University

Appendix F

Teacher Information Letter for Control Schools

31st March 2000

Dear Year 4 Teacher

As you know, your school is involved in the Friendly Schools: Bullying Intervention Project. Although your school is not receiving the Friendly Schools Program at present, by being involved as a comparison school, your school is helping us to determine whether the program reduces and prevents school bullying.

Questionnaires have been developed for students, teachers and parents to complete that will enable us to determine whether the program achieves change in knowledge, attitudes and social skills and ultimately the reduction and prevention of bullying.

What do the questionnaires ask?
The student questionnaire assesses students' knowledge and understanding of bullying behaviour; involvement in bullying; response to bullying incidents; attitudes toward bullying; feelings of safety, happiness and loneliness at school; perceptions of peer support; and perceptions of the school's response to bullying. The questionnaire also assesses self-esteem and symptoms of depression and anxiety.

The teacher and parent questionnaires assess knowledge and understanding of bullying behaviour; attitudes toward bullying; response to bullying incidents; and involvement in school activity to address bullying.

What does administration involve?
Student Questionnaire
For each Year 4 class at your school, a trained questionnaire administrator from Curtin University will administer the student questionnaire during class time. The day we propose to administer the student questionnaire to Year 4 students at your school is **FRIDAY 12TH MAY**.

Two one hour periods (15 minutes for administrator discussion with teacher and handing out of questionnaires and 45 minutes for questionnaire administration) either side of recess is required. We would like to begin at 9.00am. This means there may be a period of extra time following completion of the questionnaire, prior to recess. We would like to allow this time for any unavoidable delays in beginning the administration or if the administration takes longer than expected.

Please plan to be present in your class during the administration as not all questionnaire administrators are trained teachers and help with behaviour management would be appreciated.

What if I teach a split year class?

The questionnaire will be administered to Year 4 students only. If you have a split class, could you please arrange for your Year 4 students to be grouped with other Year 4 students for the administration period. This may involve your Year 4 students attending another year 4 class or two groups of Year 4 students from two split classes being placed in a classroom together. We are aware of the effort this requires and greatly appreciate your assistance.

Teacher Questionnaire
The questionnaire administrator will provide you with a teacher questionnaire during the student administration.

Parent Questionnaire
Each student will be provided with an envelope containing a parent questionnaire to take home.

What about consent?
Along with this letter, you should have received from your principal parent consent letters for your students. These letters inform parents of the project and seek consent for their child to complete the student questionnaire. Passive consent will be employed, this means that parents who consent to their child participating do not need to reply. Parents who do not want their child to complete the questionnaire are required to send back the reply slip.

Action required
Please distribute the parent consent letters to your students in Week 9. This will provide parents with Week 10 and Week 1 of term 2 to respond prior to the commencement of questionnaire administration.

Please collect returned parent consent slips (noting that only parent who *do not* wish their child to complete the questionnaire will return slips). The questionnaire administrator will ask you for any return slips when they visit your class. Students for which consent is not obtained will be provided with an alternative activity to engage in while the questionnaire is being administered.

Inquiries
If you would like clarification or further information, please contact the Project Coordinator, Yolanda Pintabona on 9266 3761.

Yours sincerely

Yolanda Pintabona
Project Coordinator
Friendly Schools: Bullying Intervention Project
Centre for Health Promotion Research
Curtin University

Appendix G

Parent/caregiver Information and Consent Letters for Intervention Schools

31st March 2000

Dear Parent/Guardian

Your child's school is involved in the Friendly Schools: Bullying Intervention Project. This project involves activity at the whole school level and curriculum lessons with Year 4 students aimed at reducing and preventing school bullying.

As a parent or guardian of a Year 4 student, we are sending you this letter to inform you of the project and seek consent for your child's participation in the completion of questionnaires designed to assess the effectiveness of the Friendly Schools Project.

Questionnaires have been developed for students, teachers and parents to complete that will enable us to determine whether the project achieves change in knowledge, attitudes and social skills and ultimately the reduction and prevention of bullying.

What do the questionnaires ask?
The student questionnaire assesses students' knowledge and understanding of bullying behaviour; involvement in bullying; response to bullying incidents; attitudes toward bullying; feelings of safety, happiness and loneliness at school; perceptions of peer support; and perceptions of the school's response to bullying. The questionnaire also assesses self-esteem and symptoms of depression and anxiety.

The parent and teacher questionnaires assess knowledge and understanding of bullying behaviour; attitudes toward bullying; response to bullying incidents; and involvement in school activity to address bullying. As a parent, you will also be asked about your child's behaviour.

What does participation involve?
Student Questionnaire
The principal and teachers at your school have given permission for the student questionnaire to be administered during class time by trained questionnaire administrators from Curtin University. The questionnaire will be administered to your child's class in either week 2 or week 3 of Term 2. Two 45 minute sessions will be conducted either side of recess. All responses made by your child will be strictly confidential.

Parent Questionnaire
An envelope containing a parent questionnaire will be sent home with your child. Please read the cover information of the parent questionnaire and decide on participation at that time. You should receive the questionnaire the same day as the student questionnaire is administered to your child's class. If you do not receive the

questionnaire from your child, please inform either your child's school or the Friendly Schools Project directly (see details below).

Next Steps
If you agree to your child responding to the student questionnaire, you do not need to take any further steps. If you object to your child responding to the questionnaire, please complete the slip below, cut off and return to your child's teacher before **Friday 7th April**. Your child will be provided with an alternative activity to engage in while the questionnaire is being administered.

Inquiries
If you would like clarification or further information, please contact the Project Coordinator, Yolanda Pintabona on 9266 3761.

Yours sincerely

Yolanda Pintabona
Project Coordinator
Friendly Schools: Bullying Intervention Project
Centre for Health Promotion Research
Curtin University

NOTE: ONLY COMPLETE IF YOU **DO NOT** WANT YOUR CHILD TO RESPOND TO THE FRIENDLY SCHOOLS QUESTIONNAIRE

I DO NOT want _____ (your child's name) to respond to the Friendly Schools questionnaire.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____

Please return this form to your child's teacher by Friday 7th April.

Dear Parent/Caregiver

As you know, your child's school is participating in the Friendly Schools Bullying Intervention Project. The aim of this project is to reduce and prevent bullying in primary schools. Over the year, your child has engaged in Friendly Schools classroom learning activities and your school's Friendly Schools committee has been working on the development of school policy and practice regarding bullying. You may have also completed Friendly Schools home activities with your child and read Friendly Schools articles in your school's newsletter.

To assess whether the Friendly Schools intervention reduces and prevents bullying, we need to compare what students, parents and teachers told us at the beginning of the year to what they report in Term 4. Therefore, we will once again be administering Friendly Schools questionnaires. The student questionnaire will be administered during class time by a trained questionnaire administrator. All information provided by your child will be strictly confidential. If you told us you did not want your child to complete a questionnaire at the beginning of the year, your child will not be given a questionnaire at this time or any future time. If your child arrived at this school after the first questionnaire was administered (beginning of term 2), they will not be required to complete a questionnaire at this time.

We greatly appreciate your time and effort in completing a parent questionnaire later this term. By doing so, you will be contributing to the development and assessment of an intervention to reduce and prevent bullying and promote the physical and mental health of children.

If you would like any further information, please do not hesitate to contact me.

Kind regards

Yolanda Pintabona
Project Coordinator – Research
Friendly Schools Bullying Intervention Project
Centre for Health Promotion Research
Curtin University
Ph: 9266 3761
Fax: 9266 2958

Dear Parent/Caregiver

As you know, your child's school is participating in the Friendly Schools Bullying Intervention Project. The aim of this two-year project is to reduce and prevent bullying in primary schools. Last year, your child was involved in Friendly Schools classroom learning activities and your school's Friendly Schools committee worked on developing school policy and practice to reduce and prevent bullying. You may have also completed Friendly Schools home activities with your child, read Friendly Schools articles in your school's newsletter and completed a Friendly Schools parent questionnaire.

A small group of Year 5 children who participated in the Friendly Schools project as Year 4 students last year, have been selected for follow up in Term 1, 2001. This assessment will enable us to determine the impact of the Friendly Schools intervention on bullying and the physical and mental health of children. As before, the Friendly Schools student questionnaire will be administered during class time by a trained questionnaire administrator. All information provided by your child will be strictly confidential.

Your child will be given a Friendly Schools parent questionnaire to bring home. We greatly appreciate your time and effort in completing this questionnaire. By doing so, you will be contributing to the development and assessment of an intervention to reduce and prevent bullying and promote the physical and mental health of children.

If you would like any further information, please do not hesitate to contact me.

Kind regards

Yolanda Pintabona
Project Director
Friendly Schools Bullying Intervention Project
Centre for Health Promotion Research
Curtin University
Ph: 9266 3761
Fax: 9266 2958

Appendix H

Parent/caregiver Information and Consent Letters for Control Schools

31st March 2000

Dear Parent/Guardian

Your child's school is involved in the Friendly Schools: Bullying Intervention Project. Although your child's school is not receiving the Friendly Schools Program at present, by being involved as a comparison school, your child's school is helping us to determine whether the program reduces and prevents school bullying.

As a parent or guardian of a Year 4 student, we are sending you this letter to inform you of the project and seek consent for your child's participation in the completion of a questionnaire designed to assess the effectiveness of the Friendly Schools Program.

Questionnaires have been developed for students, teachers and parents to complete that will enable us to determine whether the program achieves change in knowledge, attitudes and social skills and ultimately the reduction and prevention of bullying.

What do the questionnaires ask?
The student questionnaire assesses students' knowledge and understanding of bullying behaviour; involvement in bullying; response to bullying incidents; attitudes toward bullying; feelings of safety, happiness and loneliness at school; perceptions of peer support; and perceptions of the school's response to bullying. The questionnaire also assesses self-esteem and symptoms of depression and anxiety.

The parent and teacher questionnaires assess knowledge and understanding of bullying behaviour; attitudes toward bullying; response to bullying incidents; and involvement in school activity to address bullying. As a parent, you will also be asked about your child's behaviour.

What does participation involve?
Student Questionnaire
The principal and teachers at your school have given permission for the student questionnaire to be administered during class time by trained questionnaire administrators from Curtin University. The questionnaire will be administered to your child's class in either week 2 or week 3 of Term 2. Two 45 minute sessions will be conducted either side of recess. All responses made by your child will be strictly confidential.

Parent Questionnaire
An envelope containing a parent questionnaire will be sent home with your child. Please read the cover information of the parent questionnaire and decide on participation at that time. You should receive the questionnaire the same day as the student questionnaire is administered to your child's class. If you do not receive the

questionnaire from your child, please inform either your child's school or the Friendly Schools Project directly (see details below).

Next Steps
If you agree to your child responding to the student questionnaire, you do not need to take any further steps. If you object to your child responding to the questionnaire, please complete the slip below, cut off and return to your child's teacher before **Friday 7th April.** Your child will be provided with an alternative activity to engage in while the questionnaire is being administered.

Inquiries
If you would like clarification or further information, please contact the Project Coordinator, Yolanda Pintabona on 9266 3761.

Yours sincerely

Yolanda Pintabona
Project Coordinator
Friendly Schools: Bullying Intervention Project
Centre for Health Promotion Research
Curtin University

NOTE: ONLY COMPLETE IF YOU **DO NOT** WANT YOUR CHILD TO RESPOND TO THE FRIENDLY SCHOOLS QUESTIONNAIRE

I **DO NOT** want _____ (your child's name) to respond to the Friendly Schools questionnaire.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____

Please return this form to your child's teacher by Friday 7th April.

Dear Parent/Caregiver

As you know, your child's school is participating in the Friendly Schools Bullying Intervention Project. The aim of this project is to reduce and prevent bullying in primary schools. Your school is not implementing the Friendly Schools intervention at this moment, but by participating as a comparison school, is helping us to determine whether the intervention is effective. For participating, your school will receive the intervention materials at the end of 2001.

To assess whether the Friendly Schools intervention reduces and prevents bullying, we need to compare what students, parents and teachers told us at the beginning of the year to what they report in term 4. Therefore, we will once again be administering Friendly Schools questionnaires. The student questionnaire will be administered during class time by a trained questionnaire administrator. All information provided by your child will be strictly confidential. If you told us you did not want your child to complete a questionnaire at the beginning of the year, your child will not be given a questionnaire at this time or any future time. If your child arrived at this school after the first questionnaire was administered (beginning of term 2), they will not be required to complete a questionnaire at this time.

We greatly appreciate your time and effort in completing a parent questionnaire later this term. By doing so, you will be contributing to the development and assessment of an intervention to reduce and prevent bullying and promote the physical and mental health of children.

If you would like any further information, please do not hesitate to contact me.

Kind regards

Yolanda Pintabona
Project Coordinator – Research
Friendly Schools Bullying Intervention Project
Centre for Health Promotion Research
Curtin University
Ph: 9266 3761
Fax: 9266 2958

Dear Parent/Caregiver

As you know, your child's school is participating in the Friendly Schools Bullying Intervention Project. The aim of this two-year project is to reduce and prevent bullying in primary schools. Your school is not implementing the Friendly Schools intervention at the moment, but by participating as a comparison school, you are helping us to determine whether the intervention is effective. For participating, your school will receive the Friendly Schools intervention materials at the end of 2001.

A small group of Year 5 children who participated in the Friendly Schools project as Year 4 students last year, have been selected for follow up in Term 1, 2001. This assessment will enable us to determine the impact of the Friendly Schools intervention on bullying and the physical and mental health of children. As before, the Friendly Schools student questionnaire will be administered during class time by a trained questionnaire administrator. All information provided by your child will be strictly confidential.

Your child will be given a Friendly Schools parent questionnaire to bring home. We greatly appreciate your time and effort in completing this questionnaire. By doing so, you will be contributing to the development and assessment of an intervention to reduce and prevent bullying and promote the physical and mental health of children.

If you would like any further information, please do not hesitate to contact me.

Kind regards

Yolanda Pintabona
Project Coordinator – Research
Friendly Schools Bullying Intervention Project
Centre for Health Promotion Research
Curtin University
Ph: 9266 3761
Fax: 9266 2958

Appendix I

Letter to Parent Regarding Their Child's Identification as At-risk

Dear Parent/Caregiver of «Student_name»

In conducting the Friendly Schools Bullying Intervention Project in your child's school, we have a responsibility to you as a parent to inform you of any signs of distress in your child's responses to our questionnaires.

«Student_first_name»'s answers indicated to us that he was feeling quite sad at the time of filling out his questionnaire at school in Term 2. We would like to speak with you at some point so that we can be sure you are aware of this and «Student_first_name» is feeling okay.

Please call me on **9266 3761** on any week day to discuss this further. If I am not in, please leave a message and I will return your call.

Kind regards

Yolanda Pintabona
Project Director
Friendly Schools Bullying Intervention Project
Centre for Health Promotion Research
Curtin University

Appendix J

Whole-school Core Committee Training Evaluation (intervention schools)

WHOLE-SCHOOL CORE GROUP TRAINING EVALUATION

Name: _____

School: _____

Date: _____

Session: (please circle)   Morning / Afternoon

1. **Overall, how suitable for your school were the whole-school guidelines and activities for the prevention and reduction of bullying presented at this training?** (please circle one number)

Highly suitable	1
Suitable	2
Not suitable	3
Unsure	4

2. **Which guidelines and/or activities did you find most useful for your school?** (please describe)

_____

_____

3. **Which guidelines and/or activities, if any, were least suitable for your school?** (please describe)

_____

_____

4. **How clearly did the facilitators deliver information in this training?** (please circle one number)

Very clearly	Clearly	Somewhat unclearly	Very unclearly	Unsure
1	2	3	4	5

5. **Which components, if any, could be presented more clearly?** (please describe)

_____

_____

6. **Which components, if any, would you have liked more information on?** (please describe)

_____

_____

7. What would you have liked covered in this training session that was not presented?

_____

_____

8. Was the length of this training session suitable? (please circle one number)

Yes	1
No, too long	2
No, too short	3
Unsure	4

9. What potential challenges might you encounter in carrying out the strategies in the Friendly Schools Project: School Guidelines and Activities Manual?
(please circle as many as apply)

Lack of time	1
Lack of support from school community	1
Strategies not appropriate for students in your school	1
Other	1

→ _please specify:_ _____

10. Did this training provide you with sufficient skills to enable you to effectively carry out the Friendly Schools Project whole-school strategies? (please circle one number)

Yes	1	
No, I need more skills	2	→ _please explain in Q10a_
No, I was already skilled in this area	3	
Unsure	4	→ _please explain in Q10a_

↓ _Only answer Q10a if you answered NO or UNSURE to Q10._
10a. With what other skills could this training have provided you?

_____

_____

11. Please provide any other comments about the training session.

_____

_____

Thank you for completing this evaluation.

Please return your form to one of the Friendly Schools Project team members before you leave the training.

Appendix K

Teacher Training Evaluation (intervention schools)

FRIENDLY SCHOOLS: BULLYING INTERVENTION PROJECT TRAINING EVALUATION

Name: _____

School: _____

Date: _____

Please rate this training by circling the response that best represents how you feel.

		Strongly Agree	Agree	Disagree	Strongly Disagree	Unsure
1.	I learned new information about bullying reduction and prevention.	1	2	3	4	5
2.	I had enough opportunities to ask questions and clarify information.	1	2	3	4	5
3.	The content of the workshop was clearly presented.	1	2	3	4	5
4.	The content of the workshop will help me teach the Friendly Schools lessons.	1	2	3	4	5
5.	The Friendly Schools *Teachers Manual – Year 4* appears easy to teach from.	1	2	3	4	5
6.	I am looking forward to teaching the Friendly Schools lessons.	1	2	3	4	5
7.	I have a clear understanding of what I have to do regarding the evaluation of the Friendly Schools Project.	1	2	3	4	5
8.	How prepared do you feel to teach the 9 bullying prevention lessons in the Friendly Schools *Teacher Manual – Year 4*?	Very prepared	Moderately prepared	Somewhat prepared	Inadequately prepared	Not sure

9. The component/s of the training which I found most useful for teaching the Friendly Schools lessons were:

_____

_____

10. Which component/s of the training, if any, could have been presented more clearly? (please describe)

_____

_____

11. Which component/s of the training, if any, would you have liked more information on? (please describe)

_____

_____

12. What other information could have been provided to help you teach the Friendly Schools lessons?

_____

_____

13. Please provide any other comments you have.

_____

_____

Thank you for completing this evaluation.
Please return your form to one of the Friendly Schools Project team members before you leave.

Friendly Schools Project – Teacher Training Evaluation 2000

Appendix L

Teacher Log (intervention schools)

FRIENDLY SCHOOLS: Bullying Intervention Project – Lesson Log 2000

School: _____

Class: _____

Teacher: _____

Please indicate those parts of the education materials you used with your class.

Lesson Number TERM 2	Date/Duration of lesson	Title of Lesson	Did You Teach: (Circle the response)	Comments
			All Most Some None of the lesson Did you modify any part of this lesson? Please describe in the comments section.	For example: What did you like/dislike about the activity? If you modified the activities, what did you do? Reasons you were not able to teach all or most of the lesson.
1.1	__/__/2000 _____ mins	**What Is Bullying Behaviour?**	**Lesson 1** All Most Some None of the lesson **Modified** Yes No **Thinking Log** Yes No **Home Activity** Yes No **Cross Curricular Activities** All Most Some None	
1.2	__/__/2000 _____ mins	**Developing An Action Plan**	**Lesson 2** All Most Some None of the lesson **Modified** Yes No **Thinking Log** Yes No **Home Activity** Yes No **Cross Curricular Activities** All Most Some None	
1.3	__/__/2000 _____ mins	**How Do We Get Support?**	**Lesson 3** All Most Some None of the lesson **Modified** Yes No **Thinking Log** Yes No **Home Activity** Yes No **Cross Curricular Activities** All Most Some None	

After completing lessons 1.1-1.3 please complete this checklist and mail/fax it to:
Friendly Schools, Erin Erceg, Curtin University, School of Public Health, GPO Box U1987, Perth, WA, 6845. Or fax it to 9266 2958.

FRIENDLY SCHOOLS: Bullying Intervention Project   -   Lesson Log 2000

School: _____   Teacher: _____   Class: _____

Please indicate those parts of the education materials you used with your class.

Lesson Number	Date/Time Conducted	Title of Lesson	Did You Teach: (Circle the response)	Comments
TERM 3			All Most Some None of the lesson Did you modify any part of this lesson? Please describe in the comments section.	For example: What did you like/dislike about the activity? If you modified the activities, what did you do? Reasons you were not able to teach all or most of the lesson.
2.1	__/__ / 2000 _____ mins	**The Bystander**	**Lesson 1** All Most Some None of the lesson **Modified** Yes No **Thinking Log** Yes No **Home Activity** Yes No **Cross Curricular Activities** All Most Some None	
2.2	__/__ / 2000 _____ mins	**Self-esteem. What Is It?**	**Lesson 2** All Most Some None of the lesson **Modified** Yes No **Thinking Log** Yes No **Home Activity** Yes No **Cross Curricular Activities** All Most Some None	
2.3		**Self-esteem Character Study**	**Lesson 3** All Most Some None of the lesson **Modified** Yes No **Thinking Log** Yes No **Home Activity** Yes No **Cross Curricular Activities** All Most Some None	

FRIENDLY SCHOOLS: Bullying Intervention Project - Lesson Log 2000

School: _____

Teacher: _____   Class: _____

Please indicate those parts of the education materials you used with your class.

Lesson Number TERM 4	Date/Time Conducted	Title of Lesson	Did You Teach: (Circle the response)	Comments
			All Most Some None of the lesson Did you modify any part of this lesson? Please describe in the comments section.	For example: What did you like/dislike about the activity? If you modified the activities, what did you do? Reasons you were not able to teach all or most of the lesson.
3.1	__/__/2000 _____ mins	Children's Rights in a Friendly School	**Lesson 1** All Most Some None of the lesson **Modified** Yes No **Thinking Log** Yes No **Home Activity** Yes No **Cross Curricular Activities** All Most Some None	
3.2	__/__/2000 _____ mins	Values For Promoting Friendly Schools	**Lesson 2** All Most Some None of the lesson **Modified** Yes No **Thinking Log** Yes No **Home Activity** Yes No **Cross Curricular Activities** All Most Some None	
3.3	__/__/2000 _____ mins	Friendship Skills	**Lesson 3** All Most Some None of the lesson **Modified** Yes No **Thinking Log** Yes No **Home Activity** Yes No **Cross Curricular Activities** All Most Some None	

After completing lessons 3.1-3.3 please complete this checklist and mail/fax it to:
Friendly Schools, Erin Erceg, Curtin University, School of Public Health, GPO Box U1987, Perth, WA, 6845. Or fax it to 9266 2958.

Appendix M

Teacher Interview (intervention schools)
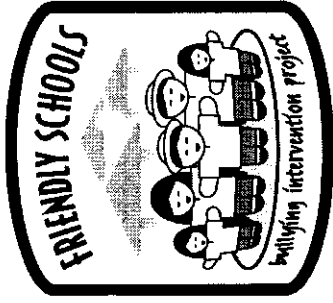
Year 4 Teacher
Post-test Interview 2000

School: _____ **Date:** _____ **Time:** _____

Teacher Name: _____ **Interviewer:** _____

My name is _____ from the Friendly Schools Project at Curtin University's Centre for Health Promotion Research. The following interview will take about twenty minutes to complete and will ask you to briefly describe how much of the Friendly Schools program you were able to cover with your students. I will also ask you for some general comments about the content of the Friendly Schools Project.
Do you have your copy of the Friendly Schools Teacher's Guide with you? *(Please call ask teachers to collect this if they don't have it in front of them).*

The following are general questions about the Friendly Schools Project

1. **Did you attend the Friendly Schools Year 4 teacher training in 2000?**

    No------------------------------ 1

    Yes ----------------------------- 2

    If yes, what else could have been provided at the training to make teaching of the project easier?

2. **Were the Friendly Schools Year 4 lesson activities appropriate to the developmental level of your students?**

    Yes------------------------ 1   Comment:

    No ------------------------- 2

    Not sure ------------------ 3

3. **What changes related to the Friendly Schools Project, if any, did you see happening in the whole school (ie: other than in your classroom)?**

4. **Were the whole-school strategies supportive in reinforcing the Year 4 class lessons?**

    Yes------------------------ 1

    No ------------------------- 2

    Not sure ------------------ 3

5. **What else could have been done at the whole-school level that would have supported learning and behavioural change facilitated by the year 4 class lessons.**

The following questions are about the lesson content of the Friendly Schools Year 4 Learning Activities.

6. Each of the lessons in the Year 4 'Friendly Schools' program is divided into learning components. I need to know whether or not you had time to teach each lesson and it's components. Please tell me if you taught 'all', 'some' or 'none' and if you 'modified' the activity in any way and why you modified it. We are pleased if you did modify the program to suit the learning needs of your students. This helps us to understand if the program really works.

Let's begin with **Unit 1 - Information about Bullying**

Lesson		Component		CIRCLE			How modified / Why?
7. What is	a)	Exploring Bullying – What constitutes bullying behaviour?	All	Some	None	Modified →	
Bullying	b)	Activity Sheet 1 – What is Bullying?	All	Some	None	Modified →	
Behaviour?	c)	How does being bullied make us feel?	All	Some	None	Modified →	
	d)	Why do some children bully others?	All	Some	None	Modified →	
Page - 15	e)	Thinking Log 1	All	Some	None	Modified →	
	f)	Home Activity 1.1	All	Some	None	Modified →	
8. Developing	a)	Introducing the 'I' message.	All	Some	None	Modified →	
an Action	b)	Activity Sheet 2 - Situation cards.	All	Some	None	Modified →	
Plan	c)	Development of an Action Plan	All	Some	None	Modified →	
Page - 23	d)	Thinking Log 2	All	Some	None	Modified →	
	e)	Home Activity 1.2	All	Some	None	Modified →	
9. How do we	a)	Introducing 'Stop Think Talk'	All	Some	None	Modified →	
get	b)	Developing a School Support Group	All	Some	None	Modified →	
support?	c)	Activity Sheet 3 – My Support Group	All	Some	None	Modified →	
Page - 31	d)	Asking for support and 'Dobbing'	All	Some	None	Modified →	
	e)	Role Play Cards	All	Some	None	Modified →	
	f)	Thinking Log 3	All	Some	None	Modified →	
	g)	Home Activity 1.3	All	Some	None	Modified →	

7. **Did you complete any of the suggested Unit 1 Cross-curricular activities?**

No---1

Yes--2

If yes – in which lessons?

Unit 1.1	**What is Bullying Behaviour?**	Reading	Yes	No
		Writing	Yes	No
		Art and Craft	Yes	No
Unit 1.2	**Developing an Action Plan.**	Reading	Yes	No
		Writing	Yes	No
		Art and Craft	Yes	No
Unit 1.3	**How do we get Support?**	Reading	Yes	No
		Writing	Yes	No
		Art and Craft	Yes	No

Now think back over Unit 1 of the Friendly Schools Project and consider the following questions.

8. **Which components of the lessons in Unit 1 did you particularly enjoy teaching? Why?**

9. **Generally, which components of the lessons from Unit 1 did your students particularly enjoy? Why?**

10. Which components of the Unit 1 lessons did you feel the students learned the most from?

11. Did you see any examples of behaviour and attitude change following Unit 1 of the Program?

No--- 1
Yes--- 2
If yes – please give examples.

12. Do you have any other general comments about Unit 1?

Let's now move to Unit 2 – Feeling Good About Myself and Others

13. Please tell me if you taught 'all', 'some' or 'none' and if you 'modified' the activity in any way and why you modified it.

Lesson	Component		CIRCLE			How modified / Why?
1. The Bystander **Page - 40**	a) Sticks and Toby video	All	Some	None	Modified →	
	b) The role of the Bystander	All	Some	None	Modified →	
	c) Revision of Stop Think Talk	All	Some	None	Modified →	
	d) Activity Sheet 4 – Three Card Shuffle	All	Some	None	Modified →	
	e) Thinking Log 4	All	Some	None	Modified →	
	f) Home activity 2.1	All	Some	None	Modified →	
2. Self - Esteem: What is it? **Page - 50**	a) What is self esteem? Why is it important?	All	Some	None	Modified →	
	b) Body Talk. Self Talk	All	Some	None	Modified →	
	c) Activity Sheet – Wilber's Diary	All	Some	None	Modified →	
	d) Self Esteem repair kit.	All	Some	None	Modified →	
	e) Thinking Log 5	All	Some	None	Modified →	
	f) Home Activity 2.2	All	Some	None	Modified →	
3. Self Esteem Character Study **Page - 66**	a) Big Al and the Three Little Pigs story	All	Some	None	Modified →	
	b) Three communication styles Aggro, Weak, Cool	All	Some	None	Modified →	
	c) Activity Sheet 6 – Character Study	All	Some	None	Modified →	
	d) The role of the Bystanders	All	Some	None	Modified →	
	e) Thinking Log 6	All	Some	None	Modified →	
	f) Home Activity 2.3	All	Some	None	Modified →	

14. Did you complete any of the suggested Unit 2 Cross-curricular activities?

NO

YES – If yes, please indicate which lessons on the table below.

UNIT 2.1	The Bystander	Reading	Yes	No
		Writing	Yes	No
UNIT 2.2	Self–esteem; What is it?	Reading	Yes	No
		Writing	Yes	No
UNIT 2.3	Self-esteem Character Study	Reading	Yes	No
		Writing	Yes	No

Now think back over Unit 2 of the Friendly Schools Project and consider the following questions.

15. Which components of the lessons in Unit 2 did you particularly enjoy teaching? Why?

16. Generally, which components of the lessons from Unit 2 did your students particularly enjoy? Why?

17. Which components of the Unit 2 lessons did you feel the students learned the most from?

18. Did you see any examples of behaviour and attitude change following Unit 2 of the Program?

No-------------------------------------- 1

Yes------------------------------------- 2

If yes – please give examples.

19. Do you have any other general comments about Unit 2?

Let's now move on to Unit 3 – Cooperation in a Friendly School

20. Please tell me if you taught 'all', 'some' or 'none' and if you 'modified' the activity in any way and why you modified it.

Lessons	Component		CIRCLE		How modified / Why?
1. Children's Rights in a Friendly School	a) Activity Sheet 7 - Think about it, what would you do?	All	Some	None	Modified →
	b) Rights and children's rights	All	Some	None	Modified →
	c) Friendly School Code of Rights	All	Some	None	Modified →
	d) Demonstrating respecting other people's rights	All	Some	None	Modified →
	e) Thinking Log 7	All	Some	None	Modified →
Page - 83	f) Home activity 3.1	All	Some	None	Modified →
2. Values for Promoting Friendly Schools	a) John's Story	All	Some	None	Modified →
	b) Values information	All	Some	None	Modified →
	c) Activity Sheet 8 – Values Framework sheets	All	Some	None	Modified →
	d) How to develop the values	All	Some	None	Modified →
	e) Values award certificate	All	Some	None	Modified →
	f) Thinking Log 8	All	Some	None	Modified →
Page - 101	g) Home Activity 3.2	All	Some	None	Modified →
3. Friendship Skills	a) Jackie's Story: A Tale of Friendship	All	Some	None	Modified →
	b) What is friendship? Definition	All	Some	None	Modified →
	c) How to make a new friend	All	Some	None	Modified →
	d) Activity Sheet 9 – Friendly School Rap	All	Some	None	Modified →
	e) Performance of rap	All	Some	None	Modified →
Page - 121	f) Thinking Log 9	All	Some	None	Modified →
	g) Home Activity 3.3	All	Some	None	Modified →

21. Did you complete any of the suggested Unit 3 Cross-curricular activities?

No-- 1

Yes-- 2

Yes– If yes, please indicate which lessons on the table below.

UNIT 3.1	Children's Rights in a Friendly School	Reading Writing	Yes No Yes No
UNIT 3.2	Values for Promoting Friendly Schools	Reading Writing	Yes No Yes No
UNIT 3.3	Friendship Skills	Reading Writing	Yes No Yes No

Now think back over Unit 3 of the Friendly Schools Project and consider the following questions.

22. Which components of the lessons in Unit 3 did you particularly enjoy teaching? Why?

23. Generally, which components of the lessons from Unit 3 did your students particularly enjoy? Why?

24. Which components of the Unit 3 lessons did you feel the students learned the most from?

25. Did you see any examples of behaviour and attitude change following Unit 3 of the Program?

        No------------------------- 1

        Yes------------------------ 2

If yes – please give examples.

26. Do you have any other general comments about Unit 3?

27. To what extent were you encouraged by your school administration or other school staff to be involved in the Friendly Schools Project?

28. Would you encourage other teachers to be involved in this project?

29. Will you teach parts of this program again next year? If yes, which parts?

30. If you were teaching Year 5 next year and hence will be involved with the Friendly Schools Project program again, how would you like the project to be conducted?

e.g.
(a) teacher training
(b) content and strategies
(c) length of lessons
(d) taught over how many terms

Thank you for your time for this interview and contribution to the success of the Friendly Schools Project in 2000

Appendix N

Student Workbook (intervention schools)

FRIENDLY SCHOOLS

bullying intervention project

STUDENT WORKBOOK 1

WHAT IS BULLYING?

Bullying is when someone repeatedly and deliberately hurts or upsets someone else.

Which of these situations are bullying? Explain why or why not.

1 As he is playing chasy a Year 4 boy runs past a Year 1 girl at recess and knocks her drink bottle out of her hand. The Year 1 girl is upset but the Year 4 boy doesn't notice and keeps running.

Y/N ☐

2 A child in your class teases another classmate each day about his hair. This makes him feel sad and not want to come to school.

Y/N ☐

3 A Year 5 student punches another Year 5 girl on the arm every time she walks past her in the classroom. The punches are hurting her and she is frightened of the other child.

Y/N ☐

4 Two boys have an argument over whose turn it is to bat and they begin to fight. Both boys are equally to blame and shouldn't be fighting.

Y/N ☐

5 A group, who were your friends last week, stopped letting you be part of their group this week. They say nasty things about you every time you try to join in and you don't know why.

Y/N ☐

1

THINKING LOG 1.1

Describe a bullying situation you have seen or been involved in.
1. What type of bullying was it?
2. How did it make you feel?
3. What did you do?
4. How did you feel about the bully?

_____

_____

_____

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USING MY 'I' MESSAGE

SITUATION CARD
Glue here

"In this situation I feel_____

_____

when you _____

_____

because_____

_____

and what I want_____

_____ "

**What action would you take from your Action plan in this situation?
Why?** _____

_____

_____

_____

_____

_____

Who would you talk to? _____

4

THINKING LOG 1.2

Think about bullying.
1. What could you do if you were being bullied at school.
2. How could you help a friend who is bullied?
3. What could you suggest to a friend who is bullying to give him/her some ideas about better ways to treat other children.

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_____

_____

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_____

MY SUPPORT GROUP

Draw yourself holding the balloons and write your support people in them.

THINKING LOG 1.3

Think about the people in your life who care about you and support you.
1. Write about the people in your life who particularly listen you when you need them and that you listen to for advice. Describe these people and why you trust them.
2. Think about a time when you have needed to ask for help or support and write about how you did this and why.

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THREE CARD SHUFFLE

WHAT

WHO | Character Card

Situation Card

WHERE | Setting Card

STOP: What is going on?

THINK: What can I do? Look at your Action Plan.

TALK: Who can I talk to? (Support Group)
What can I say? ('I' message)

10

THINKING LOG 2.1

Describe a bullying situation that you have seen where you were the bystander.
1. How did you feel about what was happening?
2. What did you want to do?
3. What did you do?
4. What else could you have done to stop the situation – or help the person being bullied?

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HELP WILBER TO FEEL BETTER ABOUT HIMSELF

SITUATION	How did this situation make Wilber feel?	What self-talk did he use?	How did his self-talk make him feel?	If you were Wilber's friend what could you do and say to help him?
MONDAY				
Wilber's Birthday TUESDAY				
WEDNESDAY				

SITUATION	How did this situation make Wilber feel?	What self-talk did he use?	How did his self-talk make him feel?	If you were Wilber's friend what could you do and say to help him?
THURSDAY				
FRIDAY				
SATURDAY				

THINKING LOG 2.2

Think of a time when you have felt bad about yourself and write about it.

1. What did it feel like?
2. Was your self-talk positive or negative? What did you say to yourself?
3. What might you do differently now if the same thing happened?
4. What have you learned about how to improve your own self-esteem?

_____

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CHARACTER STUDY

WHAT DO YOU THINK?

Who is this Character?	
What was this character's Role? Circle the answer	Person being bullied Bystander joining in bullying Person bullying Bystander not joining in bullying
What did this character do in the story?	
Why do you think he/she behaved this way?	
Was this character cool, weak or aggro? **What did he/she do to show you this?**	
Do you think he/she has high or low self - esteem? Why?	
What could you tell this character to help him/her?	

THINKING LOG 2.3

Think of a time when you have felt bad about yourself and write about it.

1. What did it feel like?
2. Was your self-talk positive or negative? What did you say to yourself?
3. What might you do differently now if the same thing happened?
4. What have you learned about how to improve your own self-esteem?

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THINK ABOUT IT
WHAT WOULD YOU DO?

Lan's Solution.

1. If you were Lan, what would you do if the bully wouldn't stop or began bullying you? _____

_____

Mike's Solution.

2. Which step in 'Stop Think Talk' did Mike miss out? _____

3. If you were Mike, and Emma got hurt, how would you feel? _____

_____

4. Would you do something different next time? _____

_____

_____

Eelyn's Solution.

5. If you were Eelyn, and the Year six girl called you a 'dobber', what would you say to her?_____

_____

6. Would you do the same thing if you saw your friend in danger next time?

_____

7. What would you do? _____

_____

| Every one has the right to be safe at school. |
| If you see someone is in danger or being threatened by someone and can't deal with the situation themselves, 'Get Help'. |

THINKING LOG 3.1

Write a response to the following questions:
1. What do you think you could do to make your school a friendlier place?
2. What do you think the students in your school could do to cooperate more?
3. What will you do starting from today to help make your school a friendlier place?

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WHAT DOES THIS VALUE MEAN?

VALUE

WHAT DOES IT MEAN?

WHY SHOULD WE BE _____ **?**

HOW CAN WE BE _____ **?**

THINKING LOG 3.2

1. List and consider the values the class selected as the most important to develop a friendly school.
2. What could you personally do each day to practise each value?
3. Write a plan of what you are going to do in the next week to practise these values.

_____

_____

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Friendly School Rap

Verse 1

We are kids who are really cool
Because we come from a
friendly school.

_____

_____

_____

_____

Chorus

Stand tall. Look proud
An' tell the world
" We're really great!"

Verse 2

If you decide to bully and tease
Don't go thinkin' you can do as
you please

_____

_____

_____

_____

Chorus

Stand tall. Look proud
An' tell the world
"We're really great!"

Verse 3

We don't care for anger and fear
'Cos' we don't want that bullying
here.

_____

_____

_____

_____

Chorus

Stand tall. Look proud
An' tell the world
"We're really great!"

Verse 4

We are special in our own ways
An' we know friendship really
pays

_____

_____

_____

_____

Chorus

Stand tall. Look proud
An' tell the world
"We're really great!"

26

THINKING LOG 3.3

Think about the following questions:
1. What are three things that you could do to help your friends?
2. What are three things that your friends could do for you?
3. Sometimes you get upset with your friends. Think of a time when this has happened to you and describe what happened.
4. How did you resolve it?

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FRIENDLY SCHOOLS

bullying intervention project

Centre for Health Promotion Research
School of Public Health
Curtin University
Bentley Western Australia

CENTRE *for* HEALTH
PROMOTION RESEARCH

Curtin

UNIVERSITY OF TECHNOLOGY

Healthway

Appendix O

Coordinator Interview (intervention schools)

COORDINATOR TELEPHONE INTERVIEW

School: _____

Friendly Schools Coordinator: _____

Date: _____

Thank you for taking the time to complete this interview. The purpose of the interview is to provide you with the opportunity to tell the Friendly Schools Project team about the whole school activity your school has engaged in this year and to help us meet your school's needs in the Friendly Schools whole school intervention next year.

Do you have your Friendly Schools School Guidelines and Activities manual in front of you? We will be talking about your school's activity in relation to each of the steps outlined in the manual.

Let's begin with Phase 1: Awareness and Consultation on page 13.

Phase 1: Awareness and Consultation

Step 1 Establish a Friendly Schools Core Committee (page 14)

1. Did you establish a Friendly Schools Core Committee?

   YES / NO   *[if NO go to Q7 Step 2]*

2. Who were the members of the committee in terms of their roles in the school?

3. How often did the committee meet?

4. What was the nature of these meetings?

5. a) Did your school find the committee to be useful in guiding and motivating action to reduce and prevent bullying?

   YES / NO

   b) Can you provide reasons for your answer?

6. a) What difficulties, if any, did the committee experience?

   b) How were these addressed?

Step 2 Increase School Community Awareness of Bullying (page 14)

7. a) Did your school engage in strategies or activities to increase school community awareness of bullying?

    YES / NO *[if NO go to Q8]*

    b) What were these strategies and who was involved (eg teaching staff, non-teaching staff, admin staff, students, parents)?

8. a) Were any of the Friendly Schools newsletter items presented in the school newsletter?

    YES / NO *[if NO go to Q14 Step 3]*

    b) If yes, how many items were used?

9. a) Which newsletter items did you like the best?

       ❑ School involvement in the Friendly Schools Project
       ❑ What is Bullying?
       ❑ Talking with your children about being bullied
       ❑ Talking with your children about bullying others
       ❑ Helping your child respond effectively to bullying
       ❑ Talking with your children about bystanders
       ❑ Encouraging your children not to bully others
       ❑ Understanding the school's responses to bullying
       ❑ Taking a whole school approach to bullying
       ❑ The method of shared concern

    b) Why did you like this/these one/s best?

10. a) Did your school find the Friendly Schools newsletter items useful?

    YES / NO

    b) Can you provide reasons for your answer?

11.a) Did you receive any comments about the Friendly Schools newsletter items from parents?

   YES / NO [if NO go to Q12]

   b) What was the nature of this comment?

12. Would you like the newsletter items to continue next year?

   YES / NO

13. How could the newsletter items be improved?

14. What topics would you like covered by the newsletter items next year?

Step 3 Engage in Whole School Consultation Regarding Policy Development/Review (page 16)

15.a) Did your school have a bullying policy prior to Term 2, 2000?

   YES / NO [if NO go to Q16]

   b) If yes, when was this developed?

16. With which school members, if any, did your school consult regarding policy development/review (eg teachers, non-teaching staff, admin staff, students, parents)?

17. How, if at all, were school community members given the opportunity to contribute their ideas about the content of the policy on bullying?

18. a) What difficulties, if any, did your school experience in consulting with school community members regarding policy content?

    b) How were these addressed?

Phase 2: Awareness and Policy Development is presented on page 17. I will now ask you about the steps suggested in this phase.

Phase 2: Awareness and Policy Development

Step 4 Review and Communicate Year 4 Student & Parent Questionnaire Data (page 17)

19. Was the Friendly Schools Year 4 questionnaire data disseminated to the school community?

    YES /NO *[if NO go to Q22 Step 5]*

20. How and to whom were the results disseminated (eg teachers, non-teaching staff, admin staff, students, parents)?

21. a) Did you find this data useful?

      YES /NO *[if NO go to Q22 Step 5]*

    b) Can you provide reasons for your answer?

Step 5 Review Current Whole School Bullying Policy and Practice (page 17)

22. What strategies and procedures, if any, did you use to review your existing school policy and practice regarding bullying?

23. In what ways, if any, was consultation with the school community used to review your existing school policy and practice regarding bullying?

Step 6 Engage the School Community in Development / Revision of the Whole School Bullying Policy (page 17)

24. Which members of the school community was the revised/draft policy circulated to for discussion and feedback (eg teachers, non-teaching staff, admin staff, students, parents)?

25. What other strategies, activities or events were utilised to facilitate discussion and feedback on the revised/draft policy?

Now let's discuss Phase 3: Awareness and Policy Implementation on page 18.

Phase 3: Awareness and Policy Implementation

Step 7 Implement the Whole School Bullying Policy (page 18)

26. a) Has a final draft of the bullying policy been developed?

    YES *[GO TO 26b]* / NO *[Go TO 26c]*

    b) (i) If YES, when was this developed?

    (ii) To which school community groups, and in what ways, has the policy been disseminated (eg teachers, non-teaching staff, admin staff, students, parents)?

    c) If NO, when will it be completed?

27. a) Did your school develop a specific strategy for managing bullying incidents this year?

    YES /NO   *[if NO go to Q28 Step 8]* / ALREADY HAD ONE

    b) Can you provide detail of this strategy. If your school already had a strategy, did this change this year?

Step 8 Promote Awareness of the Whole School Bullying Policy and the Friendly Schools Project (page 18)

28. How has attention been drawn to the bullying policy and your school's Friendly Schools activity?

So that we are aware of your school's whole school activity to reduce and prevent bullying, we would very much like to view any work samples you can provide, such as drafts and revisions of your bullying policy, agendas and minutes from meetings and workshops, and newsletter items. Could you please put together a package for us that highlights your school's whole school activity. We will collect this from your school on Friday 1st December when we collect the parent questionnaires.

General Questions

To finish the interview, I would like to ask you some general questions.

29. a) Did the Friendly Schools School Guidelines and Activities manual help you to implement steps 1 to 8.

   YES /NO

   b) Which steps, if any, required more information to implement in practice?

30. a) Did the Friendly Schools core committee training provide the professional development required to develop a whole school bullying policy?

   YES /NO

   b) In what ways, if any, could the training be improved?

31. a) Did the Friendly Schools core committee training provide the support required to develop a specific school strategy for managing bullying incidents?

   YES /NO

   b) In what ways, if any, could the training be improved?

32. a) What contribution did the Friendly Schools whole school professional development workshops conducted at your school make to whole school activity?

b) In what ways, if any, could the professional development workshops be improved?

33. How could the Friendly Schools Project Team provide better support of whole school activity next year?

34. a) Did your school engage in any strategies, activities or events this year that were aimed at reducing or preventing bullying and/or promoting positive peer relations that were NOT part of the Friendly Schools Project?

YES / NO

b) Please describe these.

35. What would you like the Friendly Schools Project to cover in the whole school component of the intervention in 2001?

Did you receive a brief fax back questionnaire? To supplement the information you have provided in this interview, would you mind taking a further 5 minutes to complete and fax back the questionnaire?

Thank you for your time. It was great to hear about the activities your school has engaged in this year and I look forward to working with you and [school name] in 2001.

Appendix P

Principal Interview (control schools)

PRINCIPAL
TELEPHONE INTERVIEW
(CONTROL SCHOOLS)

School: _____

Friendly Schools Principal/Coordinator: _____

Date: _____

Thank you for taking the time to complete this interview. The purpose of the interview is to provide you with the opportunity to tell the Friendly Schools Project team about any activity that has occurred in your school this year related to the issue of bullying. The reason for this, is as a control school in the Friendly Schools Project, it is important that we are aware of anything your school might be doing to reduce and prevent bullying so that we can tease out the effects of the Friendly Schools intervention from other types of strategies and activities.

1. a) Does your school have a bullying policy?

    YES / NO   *[if NO go to Q3]*

    b) If yes, was this modified or reviewed this year?

    YES / NO   *[if NO go to Q2]*

    c) Which members of the school community were involved in the development or review of the bullying policy (eg teachers, non-teaching staff, admin staff, students, parents)?

    d) To which school community groups, and in what ways, has the final draft of the policy been disseminated (eg teachers, non-teaching staff, admin staff, students, parents)?

2. a) Did your school engage in any strategies, activities or events this year that were aimed at reducing or preventing bullying and/or promoting positive peer relations?

    YES / NO   [if NO go to Q2]

    b) Please describe these and who was involved (eg teaching staff, non-teaching staff, admin staff, students, parents).

3. a) Has your school's strategy for managing bullying incidents changed since term 2?

    YES /NO   [if NO go to Q4]

    b) Please provide detail.

4. Is there anything else your school is doing to address bullying that we have not discussed?

    YES /NO

We would very much like to view any work samples you can provide, such as a copy of your bullying policy. Would you be able to post this to me at a reply paid address?

Thank you for your participation at this busy time of year. I, and the Friendly Schools Project team, look forward to working with you and [school name] next year.

Appendix Q

Student Process Questionnaire (intervention schools)

28. **Did you enjoy doing the Friendly Schools classroom activities?**
(please circle one number)

[111]

a	I enjoyed **ALL** of the activities	1
b	I enjoyed **MOST** of the activities	2
c	I enjoyed **SOME** of the activities	3
d	I enjoyed **NONE** of the activities	4
e	Not sure	5

29. **When you did the Friendly Schools classroom activities, did you learn what bullying is?** (please circle one number)

[112]

a	**YES**	1
b	**NO**	2
c	Not sure	3

30. **When you did the Friendly Schools classroom activities, did you learn how to stop someone bullying you?** (please circle one number)

[113]

a	**YES**	1
b	**NO**	2
c	Not sure	3

31. **When you did the Friendly Schools classroom activities, did you learn how to help students who are being bullied?** (please circle one number)

[114]

a	**YES**	1
b	**NO**	2
c	Not sure	3

32. When you did the Friendly Schools classroom activities, did you learn to not bullying others? (please circle one number)

a	**YES**	1
b	**NO**	2
c	Not sure	3

33. When you did the Friendly Schools classroom activities, did you learn how to get on (be friendly) with other kids? (please circle one number)

a	**YES**	1
b	**NO**	2
c	Not sure	3

34. Did you enjoy doing the Friendly Schools home activities with your family? (please circle one number)

a	I enjoyed **ALL** of the home activities	1
b	I enjoyed **MOST** of the home activities	2
c	I enjoyed **SOME** of the home activities	3
d	I enjoyed **NONE** of the home activities	4
e	Not sure	5
f	I didn't do any home activities with my family	6

35. What did you like best about the Friendly Schools activities?

_____

_____

_____

_____

Appendix R

Parent Process Questionnaire (intervention schools)

Below are pictures of nine activities from the Friendly Schools program that your child *may* have brought home from school to be completed with an adult. For EACH activity illustrated, please circle the number that best represents your involvement.

31. Please look at Home Activity 1

31a. What did you do with this activity?
(please circle one number)

[158]

a	I completed this activity at home with my child	1
b	I saw this activity but didn't complete it	2
c	I don't remember seeing this activity	3

→ *Continue at* **question 31b**

→ *Continue at* **question 31b**

→ *Go to* **question 32**

31b. Did this activity encourage you to talk with your child about bullying? (please circle one number)

[159]

Yes	No	Not sure
1	2	3

32. Please look at Home Activity 2

32a. What did you do with this activity?
(please circle one number)

[160]

a	I completed this activity at home with my child	1
b	I saw this activity but didn't complete it	2
c	I don't remember seeing this activity	3

→ *Continue at* **question 32b**

→ *Continue at* **question 32b**

→ *Go to* **question 33**

32b. Did this activity encourage you to talk with your child about bullying? (please circle one number)

[161]

Yes	No	Not sure
1	2	3

33. Please look at Home Activity 3
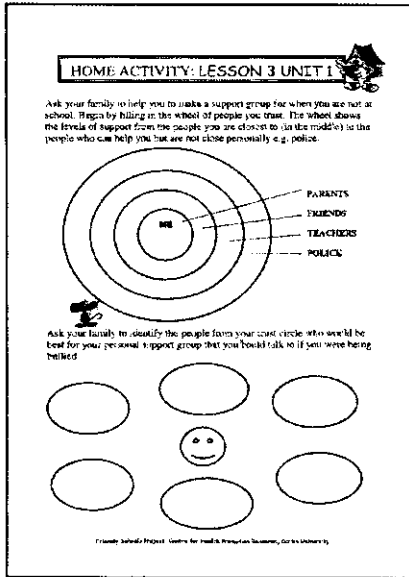
33a. What did you do with this activity?
(please circle one number)

[162]

a	I completed this activity at home with my child	1
b	I saw this activity but didn't complete it	2
c	I don't remember seeing this activity	3

→ *Continue at* **question 33b**

→ *Continue at* **question 33b**

→ *Go to* **question 34**

33b. Did this activity encourage you to talk with your child about bullying? (please circle one number)

[163]

Yes	No	Not sure
1	2	3

34. Please look at Home Activity 4
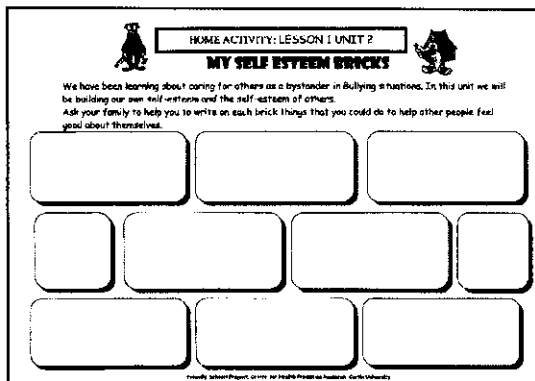
34a. What did you do with this activity?
(please circle one number)

[164]

a	I completed this activity at home with my child	1
b	I saw this activity but didn't complete it	2
c	I don't remember seeing this activity	3

→ *Continue at* **question 34b**

→ *Continue at* **question 34b**

→ *Go to* **question 35**

34b. Did this activity encourage you to talk with your child about bullying? (please circle one number)

[165]

Yes	No	Not sure
1	2	3

35. Please look at Home Activity 5
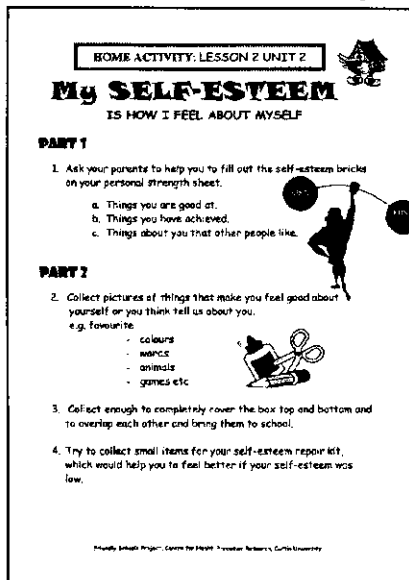
35a. What did you do with this activity?
(please circle one number)

[166]

a	I completed this activity at home with my child	1
b	I saw this activity but didn't complete it	2
c	I don't remember seeing this activity	3

→ *Continue at* **question 35b**

→ *Continue at* **question 35b**

→ *Go to* **question 36**

35b. Did this activity encourage you to talk with your child about bullying? (please circle one number)

[167]

Yes	No	Not sure
1	2	3

36. Please look at Home Activity 6

36a. What did you do with this activity?
(please circle one number)

[168]

a	I completed this activity at home with my child	1
b	I saw this activity but didn't complete it	2
c	I don't remember seeing this activity	3

→ *Continue at* **question 36b**

→ *Continue at* **question 36b**

→ *Go to* **question 37**

36b. Did this activity encourage you to talk with your child about bullying? (please circle one number)

[169]

Yes	No	Not sure
1	2	3

37. Please look at Home Activity 7

37a. What did you do with this activity?
(please circle one number)

[170]

a	I completed this activity at home with my child	1
b	I saw this activity but didn't complete it	2
c	I don't remember seeing this activity	3

→ *Continue at* **question 37b**

→ *Continue at* **question 37b**

→ *Go to* **question 38**

37b. Did this activity encourage you to talk with your child about bullying? (please circle one number)

[171]

Yes	No	Not sure
1	2	3

38. Please look at Home Activity 8

38a. What did you do with this activity?
(please circle one number)

[172]

a	I completed this activity at home with my child	1
b	I saw this activity but didn't complete it	2
c	I don't remember seeing this activity	3

→ *Continue at* **question 38b**

→ *Continue at* **question 38b**

→ *Go to* **question 39**

38b. Did this activity encourage you to talk with your child about bullying? (please circle one number)

[173]

Yes	No	Not sure
1	2	3

39. Please look at **Home Activity 9**

HOME ACTIVITY: LESSON 3 UNIT 3

10 Ways to Be a Good Friend

Ask your family to help you to develop 10 ways to be a good friend. Discuss these ideas and think of ways of actually doing these things. Make a plan with your family of what you are going to do.

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.

39a. **What did you do with this activity?**
(please circle one number)

[174]

a	I completed this activity at home with my child	1
b	I saw this activity but didn't complete it	2
c	I don't remember seeing this activity	3

a → *Continue at question 39b*
b → *Continue at question 39b*
c → *Go to question 40*

39b. **Did this activity encourage you to talk with your child about bullying?** (please circle one number)

[175]

Yes	No	Not sure
1	2	3

40. **How many of the Friendly Schools HOME ACTIVITIES your Year 4 child brought home did he/she enjoy?** (please circle one number)

[176]

a	**ALL** of the activities	1
b	**MOST** of the activities	2
c	**SOME** of the activities	3
d	**NO** activities	4
e	Not sure	5
f	I don't remember my child doing any home activities	6

41. **Did the Friendly Schools HOME ACTIVITIES increase your year 4 child's awareness of how to respond to bullying at school?** (please circle one number)

[177]

a	Yes	1
b	No, already very aware	2
c	No, already had some awareness but this did not change	3
d	No, has little awareness and this has not changed	4
e	Not sure	5

42. **To what extent has your Year 4 child talked to you about bullying?** (please circle one number)

[178]

a	A lot	1
b	Somewhat	2
c	Very little	3
d	Not at all	4
e	I don't know	5

43. **To what extent has your Year 4 child talked to you about the Friendly Schools program in general?** (please circle one number)

[179]

a	A lot	1
b	Somewhat	2
c	Very little	3
d	Not at all	4
e	I don't know	5

44. **To what extent did your child enjoy participating in the Friendly Schools program in general?** (please circle one number)

[180]

a	A lot	1
b	Somewhat	2
c	Very little	3
d	Not at all	4
e	I don't know	5

45. **Are you pleased the Friendly Schools program has been offered in your year 4 child's class?** (please circle one number)

[181]

a	Yes	1
b	No	2
c	Not sure	3
d	Didn't know it was offered	4

46. **Your school may have placed Friendly Schools newsletter items in their school newsletter. Which of the following topics, if any, do you remember reading about in your school's newsletter?** (please circle as many as apply)

[182-189]

a	What bullying is	1
b	Talking with your children about bullying	1
c	Helping your children to respond effectively to bullying	1
c	Encouraging your children not to bully others	1
d	The role of bystanders	1
e	Taking a whole school approach to bullying	1
f	The method of shared concern for dealing with incidents of bullying	1

47. **Did the Friendly Schools HOME ACTIVITIES increase your awareness of how to prevent bullying?** (please circle one number)

[190]

a	Yes	1
b	No, I was already very aware	2
c	No, I already had some awareness but this did not change	4
d	No, I had little awareness and this has not changed	5
d	Not sure	6
e	I didn't complete any of the home activities	7

48. **Were the HOME ACTIVITIES useful for discussing the issue of bullying with your Year 4 child?** (please circle one number)

[191]

a	Yes	1
b	No	2
c	Not sure	3
d	I didn't complete any of the home activities	4

49. **Did the Friendly Schools NEWSLETTER ITEMS increase your awareness of how to prevent bullying?** (please circle one number)

[192]

a	Yes	1
b	No, I was already very aware	2
c	No, I already had some awareness but this did not change	4
d	No, I had little awareness and this has not changed	5
d	Not sure	6
e	I didn't see any newsletter items	7

50. **Would you like the Friendly Schools NEWSLETTER ITEMS to continue next year?** (please circle one number)

[193]

a	Yes	1
b	No	2
c	Not sure	3

> **Thank you for taking the time to complete this questionnaire.**
> **Your participation in this important research is valued.**
>
> **Please place this questionnaire in the envelope it came in**
> **and give it to your Year 4 child to return to class**
> **NO LATER THAN FRIDAY 1ST DECEMBER.**

Appendix S

Friendly Schools School Guidelines and Activities

FRIENDLY SCHOOLS
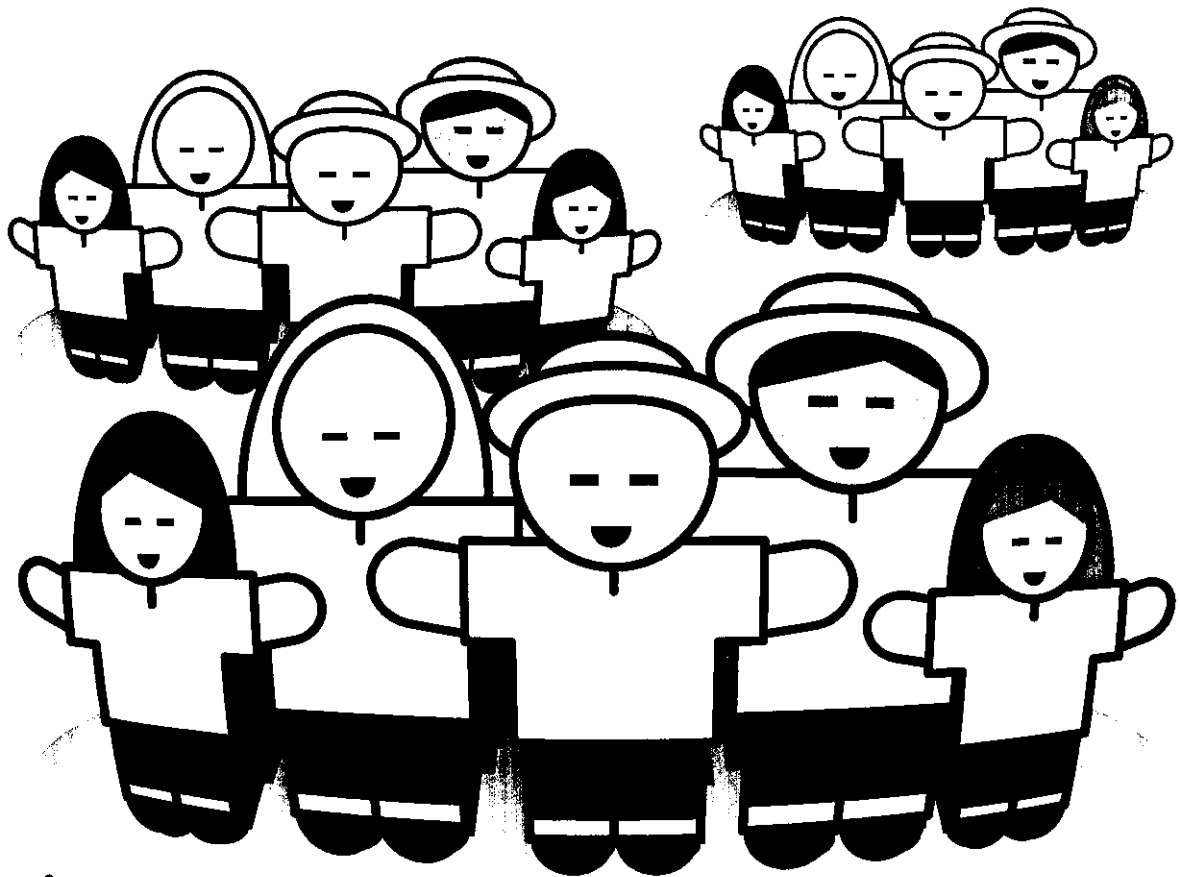
bullying intervention project

SCHOOL GUIDELINES & ACTIVITIES

FRIENDLY SCHOOLS

bullying intervention project

SCHOOL GUIDELINES & ACTIVITIES

Centre for Health Promotion Research
School of Public Health
Curtin University
Bentley Western Australia

Curtin
UNIVERSITY OF TECHNOLOGY

Healthway

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CONTENTS

INTRODUCTION

The Friendly Schools: Bullying Intervention Project is funded by the Western Australian Health Promotion Foundation (Healthway) and is being conducted by the Centre for Health Promotion Research at Curtin University.

WHAT DOES THE FRIENDLY SCHOOLS BULLYING INTERVENTION PROJECT AIM TO ACHIEVE?

The aim of the Friendly Schools Project is to assess the effectiveness of a whole school intervention aimed at preventing, reducing and managing bullying in the primary school setting. This will be achieved by following approximately 2000 Year 4 students, their teachers and parents across the years 2000 and 2001.

IS THERE A NEED FOR THE FRIENDLY SCHOOLS PROJECT?

The Western Australian Child Health Survey [1] found that parents and teachers identified 11% of students in Western Australian primary and secondary schools as being bullied in the previous six months (one in nine students). Given bullying often occurs out of the sight of adults, the actual number of students who are bullied is likely to be higher. Australian research found that approximately one in six students reported being bullied at least once a week [2,3]. Although many bullying incidents last only a few days, for a significant proportion of students victimisation continues for six months or more [4-6].

International and national research has found that bullying can be reduced and managed in the school setting. However, while many schools in WA are engaged in efforts to address bullying, communication with schools during a formative study conducted by the Centre for Health Promotion Research, suggests that many are unsure of what action to take or whether strategies being used are effective.

A need exists to evaluate the effectiveness of bullying prevention strategies so that schools can take action with confidence.

WHAT HAS BEEN DONE SO FAR?

The Friendly Schools Project is based on the results of a year-long formative study conducted by the Centre for Health Promotion Research in 1999. This study involved the development of a set of successful practice principles for the prevention, reduction and management of bullying in schools. The principles were drawn from current evidence-based research and validated by an expert panel of international, national and local researchers and school-based practitioners in the areas of bullying and behaviour management.

The major outcome of the formative study was a resource that outlined successful practice in whole school bullying prevention and illustrated ways in which WA schools have achieved successful practice, including detailed case studies of government and non-government schools from around the state.

WHAT DOES THE FRIENDLY SCHOOLS PROJECT INVOLVE?

The Friendly Schools Project aims to reduce and prevent bullying by addressing action in a Health Promoting Schools framework. The project involves developing in Year 4 students the skills and values required to respond adaptively to bullying, to support students who are bullied and to refrain from bullying others; to engage parents through home activities and involvement at the whole-school level; and through whole-school strategies aimed at facilitating a collaborative and united approach school wide.

The whole-school intervention includes:

- Nine classroom-based learning activities for Year 4 students, to be integrated into the Health and Physical Education Learning Area of the Curriculum Framework;

- Cross-curricular learning activities that reinforce the knowledge, attitudes and skills addressed in the nine core learning activities;

- Home activities for students to complete with their families;

- Establishment of a whole-school core committee responsible for enhancing awareness and action on bullying;

- Whole-school awareness raising activities, such as feedback to the school community of student questionnaire results about bullying;

- Review/development of the bullying component of the school's Behaviour Management Plan; and

- Strategies for the management of bullying incidents.

FRIENDLY SCHOOLS KIT COMPONENTS

The Friendly Schools Kit contains the following components:

Friendly Schools Teachers Manual – Year 4

The *Teachers Manual – Year 4* contains descriptions of nine learning activities, background information and resource masters for Year 4 teachers to deliver to their students. These nine learning activities are divided into three sections called Units. The first unit of three learning activities is designed to be taught in Term 2, the second unit of three learning activities in Term 3 and the third unit of three learning activities in Term 4.

Student Workbook

The *Student Workbook* contains one Activity Sheet and one Thinking Log for each of the nine learning activities in the *Teacher's Manual – Year 4*. The Student Workbook is designed to be used by students during each of the nine learning activities. The Student Workbook can be used to monitor students' knowledge and application of the concepts and skills taught in each learning activity.

Cross-Curricular Activities – Year 4

The *Cross-Curricular Activities – Year 4* resource contains learning activities appropriate for other Learning Areas within the Curriculum Framework. A cross-curricular component has been designed to link with each of the three units from the Friendly Schools Project. Three learning activities have been written for each of the Learning Areas selected and resource sheets and texts are provided in the guide.

Lesson Resources

Contained within your kit are a range of resources required for use in the learning activities. You will find reference to these resources in the learning activities plans. In some cases, there is only one resource provided for your school (for example, video cassette). These will need to be made available to all teachers involved in the project. The resources in this kit include Role Play Cards, plasticine etc.

School Guidelines and Activities Manual

The *School Guidelines and Activities Manual* contains whole-school policy and planning strategies, school and community awareness raising activities and strategies for the management of bullying incidents.

ABOUT THIS RESOURCE

The Friendly Schools: Bullying Intervention Project *School Guidelines and Activities* manual aims to help school communities enhance or implement an effective whole-school approach to the prevention and reduction of bullying. Many schools have already begun to take whole-school action to address bullying. For these schools, this manual provides the opportunity to review action, identify areas that may require further attention and to engage in activities that will maintain or enhance action. For schools that have not yet taken action, this manual provides guidance for developing and engaging in a whole school response to bullying. The guidelines and activities are designed to build on and support strategies to prevent and reduce bullying advocated by the Education Department of Western Australia.

The *School Guidelines and Activities* manual has been divided into three phases of whole-school activity which complement the Year 4 curriculum component of the Friendly Schools Project. Each phase needs to be addressed in the first year of the Friendly Schools Project. These phases are summarised below.

	Friendly Schools Whole-School Intervention		Friendly Schools Year 4 Learning Activities
Phase 1	**Awareness and Consultation**		Unit 1
Term 2, 2000	**Step 1**	Establish a Friendly Schools core committee	Information About Bullying
	Step 2	Increase school community awareness of bullying	
	Step 3	Engage in whole-school consultation	
Phase 2	**Awareness and Policy Development/Revision**		Unit 2
Term 3, 2000	**Step 4**	Review and communicate Year 4 student questionnaire data	Feeling Good About Myself and Others
	Step 5	Review current whole-school bullying policy and practice	
	Step 6	Engage the school community in development / revision of the whole-school bullying policy	
Phase 3	**Awareness and Policy Implementation**		Unit 3
Term 4, 2000	**Step 7**	Implement the whole-school bullying policy	Cooperation in Friendly Schools
	Step 8	Promote awareness of the whole-school bullying policy	

Planning sheets are provided at the end of the manual for planning, monitoring and evaluating whole-school activity.

LINKS TO WESTERN AUSTRALIAN EDUCATION DOCUMENTS

The Education Department of Western Australia defines students at educational risk as "those students who may be at risk of not achieving the major learning outcomes of schooling to levels which enable them to achieve their potential" (1998, p. 3). Addressing the needs of these students is a major priority of the Students at Educational Risk Strategy – Making a Difference.

Students who are bullied:

- feel unhappy at school [6][7];
- dislike school [8];
- view school as not a nice place to be [8];
- view school as an unsafe place [3][6];
- feel lonelier [8-11];
- want to avoid the school environment [3][10][12];
- demonstrate lower academic competence [1]; and
- have higher rates of absenteeism [1].

Furthermore, students who are bullied are more likely to suffer from a number of physical and mental health problems. Students who are bullied have:

- more physical complaints [4][13][14];
- lower self-esteem [6][15-17];
- greater feelings of ineffectiveness and more interpersonal difficulties [18];
- higher levels of depression [4][5][16][19][20] and suicidal thoughts [21]; and
- higher levels of anxiety and worry [12][22].
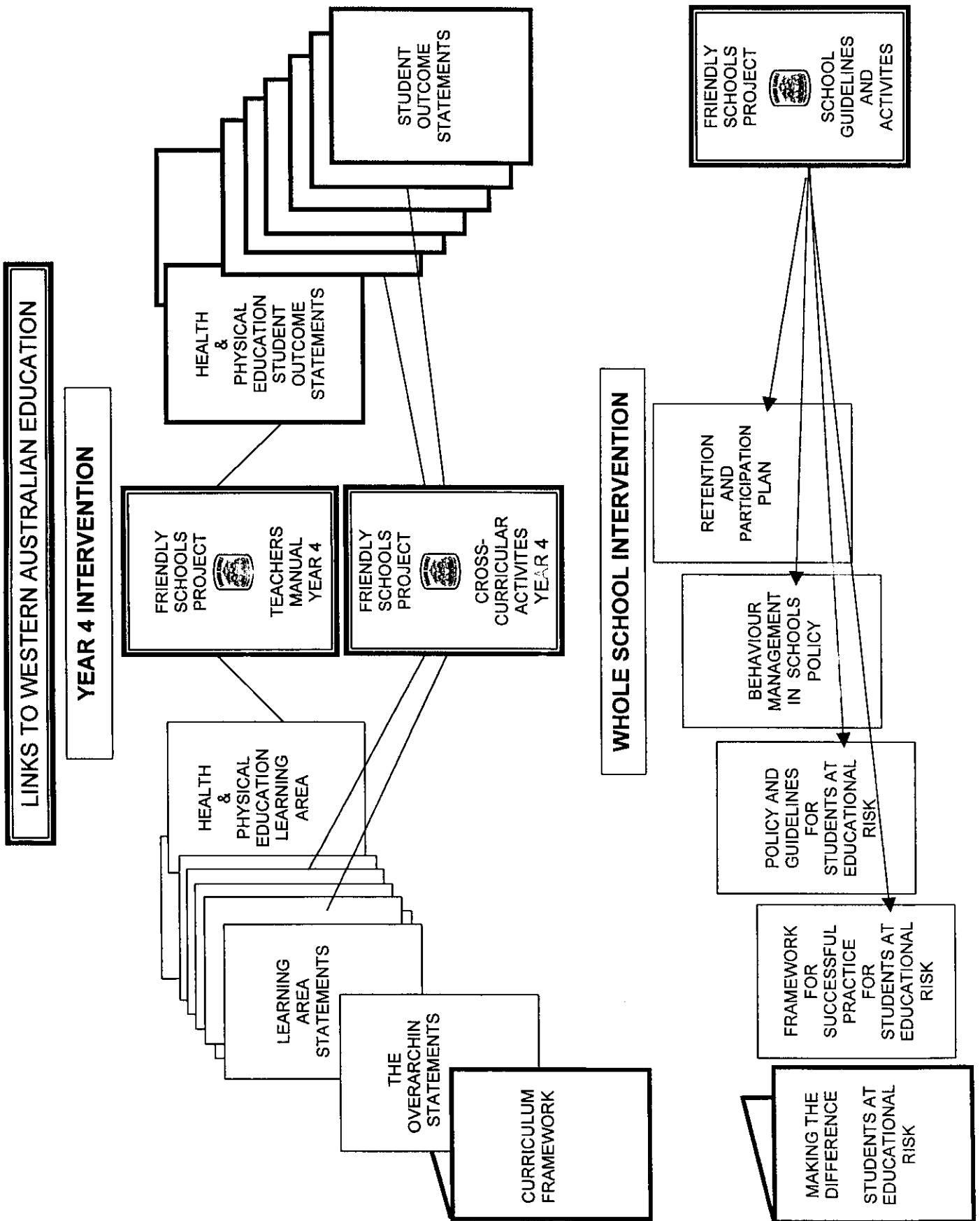
Students who bully others:

- feel unhappy at school [6][7];
- dislike school [8];
- view school as not a nice place to be [8];
- demonstrate lower academic competence [1];
- are more likely to engage in behaviours such as wagging school, graffiti use, getting into trouble with police and shoplifting [23];
- are more likely to engage in violent behaviour after leaving school than their peers [24]; and
- are more likely to have a criminal conviction by age 24 [25].

Furthermore, students who engage in bullying:

- have a greater incidence of mental health problems [1];
- experience greater negative health symptoms [8]; and
- experience higher levels of depression [4][5][16][19], suicidal thoughts and attempts to harm oneself [19][21].

In light of these findings, students involved in bullying can be considered to be at educational risk. Strategies aimed at addressing the needs of these students and reducing and preventing bullying are therefore required.

The following diagram illustrates further how the Friendly Schools whole-school intervention links into Western Australian education documents.

LINKS TO WESTERN AUSTRALIAN EDUCATION

YEAR 4 INTERVENTION

STUDENT OUTCOME STATEMENTS

HEALTH & PHYSICAL EDUCATION STUDENT OUTCOME STATEMENTS

FRIENDLY SCHOOLS PROJECT

TEACHERS MANUAL YEAR 4

FRIENDLY SCHOOLS PROJECT

CROSS-CURRICULAR ACTIVITES YEAR 4

HEALTH & PHYSICAL EDUCATION LEARNING AREA

LEARNING AREA STATEMENTS

THE OVERARCHIN STATEMENTS

CURRICULUM FRAMEWORK

WHOLE SCHOOL INTERVENTION

FRIENDLY SCHOOLS PROJECT

SCHOOL GUIDELINES AND ACTIVITES

RETENTION AND PARTICIPATION PLAN

BEHAVIOUR MANAGEMENT IN SCHOOLS POLICY

POLICY AND GUIDELINES FOR STUDENTS AT EDUCATIONAL RISK

FRAMEWORK FOR SUCCESSFUL PRACTICE FOR STUDENTS AT EDUCATIONAL RISK

MAKING THE DIFFERENCE

STUDENTS AT EDUCATIONAL RISK

WHY A WHOLE-SCHOOL RESPONSE?

Research demonstrates that a whole-school approach is essential to achieving positive change in bullying [26-28]. A whole-school approach builds awareness at all levels of the school community, enabling the development of common goals and a shared understanding [29]. This common understanding forms a basis for the school community to identify, develop and engage in appropriate and consistent strategies to deal with bullying. A whole-school response [30]:

1. Counters the view that bullying is an inevitable part of school life, challenging the attitudes of the school community and inviting them to examine their own social behaviour;

2. Moves toward prevention versus crisis-management;

3. Opens discussion at all levels of the school community, helping to create a supportive ethos and to break down the culture of secrecy surrounding bullying; and

4. Involves the whole-school community in voicing the unacceptability of bullying behaviour, thus providing students with a consistent message.

The Health Promoting School model provides a useful framework for identifying and planning whole-school bullying prevention and reduction activity. Health Promoting Schools aim to establish a safe and supportive environment which protects and promotes the well-being of students and other members of the school community [31-33].

This is accomplished by a holistic approach that focuses on consistency and reinforcement of messages and experiences across formal classroom lessons, the hidden curriculum of the school environment and home and the wider community [34]. Ownership of responsibility for student health is promoted across the school community through a triangular partnership between the school, parents and caregivers, and the wider community [33 34]. The framework is founded on principles of equity of access to education; empowerment of students through knowledge and skill development; and inclusiveness of the whole school community in the development and implementation of school action [32].

Health Promoting Schools are characterised by three key areas: formal curriculum, teaching and learning; organisation, ethos and environment; and school-home-community links [32-35]. These domains are not mutually exclusive, on the contrary, in practice they need to be thoroughly integrated and co-ordinated for health promotion activity to be effective, with action in one area able to promote, or hinder, change in another domain.

The figure on the next page illustrates how the Friendly Schools Project whole-school intervention fits within the Health Promoting Schools framework.

A FRIENDLY SCHOOLS HEALTH PROMOTING SCHOOL

TEACHING & LEARNING

- Year 4 Health and Physical Education Learning Area classroom learning activities
- Professional development for Year 4 teachers
- Provision of appropriate resources for bullying prevention education and learning activities

POLICIES & ENVIRONMENT

- Whole-school committee for the prevention of bullying
- Whole-school Bullying Policy within the Behaviour Management Plan
- Specific methods of managing bullying incidents
- Activity to promote awareness of bullying and the school's response to bullying
- Utilising health and behaviour management services

PARENT & COMMUNITY INVOLVEMENT

- Home activities for Year 4 students to complete with their families
- Whole-school committee for the prevention of bullying
- Information about bullying and the school's response to bullying in the school newsletter
- Inclusion of parents and the community in policy development
- Policy communicated to school community

WHAT IS BULLYING?

Bullying is:
- a repeated, unjustifiable behaviour;
- that may be physical, verbal, and/or psychological;
- that is intended to cause fear, distress, or harm to another;
- that is conducted by a more powerful individual or group;
- against a less powerful individual who is unable to effectively resist [1 18 20 24 26 27 36 37].

HOW IS BULLYING DIFFERENT TO OTHER FORMS OF AGGRESSION?

Like other forms of aggressive behaviour, bullying involves the intention of an individual or group to cause harm to one or more others [38]. However, bullying has the following unique characteristics:

- a power imbalance must be present;
- the aggressive act is unprovoked by the victim or perceived as unjustified by others; and
- the action is repeated between the same individuals [38].

IS FIGHTING BULLYING?

While fighting between two students of equal power is of concern, it is not bullying. It is the presence of a power imbalance that distinguishes bullying from fighting, conflict, violence and disagreement [3]. It is this imbalance that makes mistreatment of the victim possible [3].

"Teachers get remarkably fed up with children who fight or scrap with one another. But they are not bullies because they fight, and the one who wins is most certainly not a bully because he(/she) wins. The mindless and degrading violence of strong against weak may be bullying, but fighting, by definition, is not (p.17)" [39].

IS TEASING BULLYING?

Teasing, done in mutual fun and jest, where all individuals are involved and feel capable of responding, is *not* bullying. However, teasing that is done in a mean and hurtful way, that involves a power imbalance whereby one individual feels powerless to respond or to stop what is happening is bullying.

THE IMPORTANCE OF LANGUAGE:
DEALING WITH BULLYING BEHAVIOUR, NOT BULLIES

It is important that bullying is seen as a behaviour and not personalised in the form of a 'bully'. The message students receive should be that bullying is an unacceptable behaviour. It is easy to fall into the trap of focusing on 'busting' the bullies. This focus promotes force and exclusion as a means of getting ones way, in other words, exactly what bullying is! It also labels students who engage in bullying as 'bullies' and excludes them from change activities, because the message they receive is that they, as a 'bully', are not wanted or valued.

Activity to reduce and prevent bullying should promote the message that all students are valued, but engaging in bullying behaviour is unacceptable. Written information and policy should reflect this by referring to 'students who engage in bullying' or 'students who bully others' and 'students who are bullied' or 'students who are the target of bullying'.

TYPES OF BULLYING

The different forms bullying can take may be classified as physical or non-physical, direct or indirect [36]. Both Australian and international research suggests that the most common form of bullying is verbal, such as cruel teasing and name calling [3][40].

	Direct	Indirect
Physical	• Hitting • Kicking • Pushing • Spitting • Pinching • Throwing things, e.g. stones	• Getting another person to harm someone
Non-physical **Verbal**	• Mean and hurtful name-calling • Hurtful teasing • Demanding money or possessions • Forcing another to do homework or commit offences such as stealing	• Spreading nasty rumours • Trying to get other students to not like someone
Non-verbal	• Threatening and/or obscene gestures	• Deliberate exclusion from a group or activity • Removing and hiding and/or damaging others' belongings

(adapted from Rigby, 1996)

PHASE 1
AWARENESS AND POLICY REVIEW: TERM 2

THE IMPORTANCE OF A WHOLE-SCHOOL BULLYING POLICY

A whole-school bullying policy is an essential component of efforts to reduce and prevent bullying [41][42]. Research suggests that the variation in frequency with which bullying occurs in different schools can be explained, in part, by whether a school possesses a clearly articulated view of bullying as an unacceptable behaviour and has an agreed upon policy [43]. Furthermore, research indicates that when schools establish 'stable routines' for responding to bullying, greater long-term and positive effects are achieved [44]. In the absence of a whole-school policy, school efforts to reduce and prevent bullying are unlikely to have a significant or long-lasting effect on students' social relations or the ethos of the school [42].

ADVANTAGES OF AN EFFECTIVE WHOLE-SCHOOL BULLYING POLICY

A whole-school bullying policy that has been developed through consultation with all members of the school community:

- Demonstrates that the school takes bullying seriously;

- Reinforces the school's position concerning bullying behaviour;

- Establishes a clear set of agreed upon aims regarding the prevention and reduction of bullying;

- Promotes a planned and coordinated response to bullying, facilitating consistency in the management of bullying incidents;

- Provides school staff with clear guidelines to follow when managing bullying incidents, enabling them to act with confidence;

- Facilitates an ethos in which students do not believe they have to accept bullying behaviour;

- Increases students' confidence to report bullying and seek support;

- Decreases peer support for bullying behaviour;

- Clarifies to parents the school's position and response to bullying;

- Clarifies the roles, rights and responsibilities of all school community members in responding to bullying appropriately and promoting positive relations;

- Provides a framework for maintaining activity to reduce and prevent bullying.

A whole-school bullying policy should be linked to existing policies, and, in particular, to the school's Behaviour Management Plan.

The following provides step by step guidelines for reviewing or developing a whole-school bullying policy. It is intended that schools adopt the guidelines to suit their individual needs. Before beginning, it is important to note that the *process* of developing the policy is as important as the *content* of the policy.

STEP 1 - ESTABLISH A CORE COMMITTEE

The role of the core committee is to oversee the development or review of a whole-school bullying policy that promotes positive social relations and safe and supportive learning environments for all members of the school community. Essentially, the core committee acts as the motivator and maintainer of policy action.

WHO SHOULD BE INVOLVED?

The committee should consist of about six individuals who represent the whole-school community, including any or all of the following:

1. Principal, Deputy Principal, School Administrator
2. Teachers
3. Student representative
4. Member/s of the parents' representative group
5. Student Services/Behaviour Management staff
6. School psychologist/counsellors
7. School nurse
8. School chaplain

WHAT IS THE ROLE OF THE FRIENDLY SCHOOLS CORE COMMITTEE?

The role of the Friendly Schools Core Committee is to:

1. Represent and act on behalf of the school community;
2. Make recommendations, based on individual school needs, about the content and process of developing/reviewing, implementing and promoting the policy;
3. Establish standardised school responses to incidents of bullying;
4. Develop and circulate drafts of the policy; and
5. Prepare the final policy and organise its promotion, dissemination and implementation.

STEP 2 - RAISE SCHOOL COMMUNITY AWARENESS OF BULLYING

An awareness and shared understanding of bullying needs to be developed through active consultation with all members of the school community, including teaching staff, non-teaching staff, students, parents and the wider community [45].

This awareness and understanding should include what bullying is and why it is of concern, in regard to both those individuals actively involved in bullying incidents and to the ethos of the school as experienced by the entire school community.

The shared understanding needs to be characterised by acknowledgement of bullying as more than a relationship between students who bully and those that are bullied. Bullying needs to be seen as a social relationship, involving group values and group standards of behaviour, that requires collaborative and consistent action across the school community for positive change to occur [45].

As onlookers, peers can either reinforce bullying through their behaviour or intervene to stop bullying. Students can support bullying behaviour in a passive way by:

* ignoring or remaining silent about bullying behaviour;
* maintaining the victim's role by avoiding or excluding them;
* providing the student bullying with social reinforcement, such as being friendly to the student bullying or not saying anything to them about their behaviour; and/or
* gossiping about incidents and in the process enhancing the reputation of the student who is

bullying [46].

Students can support bullying behaviour in an active way by:

- verbally encouraging the bullying behaviour;
- preventing the student who is being bullied from escaping the situation;
- shielding the situation from adult view;
- acting as a look out or warning that an adult is approaching;
- assisting the student to bully by holding the victim or their possessions;
- acting as a messenger for students who are bullying;
- laughing or smiling at the bullying; and/or
- refusing to give information about the situation when asked [46].

Similarly, adults in the school environment can also behave in ways that either actively support or tacitly condone bullying or in ways that promote the reduction and prevention of bullying. With adults, awareness raising activities should:

- acknowledge the influence on student behaviour of adult behaviour toward one another and toward students;
- encourage awareness of the tacit condoning effect of non-response or inappropriate response to observations or reports of bullying;
- encourage adults to be open to discussing, listening and empathising with students' reports of bullying;
- promote the modelling of pro-social and co-operative behaviour in interactions with students and other staff; and
- promote consistent responses to bullying [45].

Awareness raising provides the school community with current information about bullying, dispels some of the common 'myths' about bullying and facilitates a common understanding and awareness of the issue, from which a collaborative whole-school bullying policy can develop [42].

SO WHAT CAN BE DONE?

Activities are required that raise the awareness of teachers, students, parents and the wider community. The literature provided in this resource and the 'Teacher's Notes' and 'Background Notes' sections of the *Teachers Manual – Year 4* provide information about bullying that can be used in awareness raising activity. This activity can include:

- classroom discussion for students
- learning activities for students
- staff meetings for school staff
- assemblies for staff, students and parents
- newsletter items for parents and the wider community
- P&C meetings for parents and the wider community

STEP 3 - ENGAGE IN WHOLE SCHOOL CONSULTATION

As a school bullying policy represents the beliefs and values of the school community, it is essential that all members have an opportunity to contribute to its development.

Effective policy development depends on thorough consultation, with formulation of the policy document drawing from the ideas and suggestions arising from this consultation [47]. Each participant must be respected and valued for what they can contribute to the process of school development [48]. Research indicates that schools which put more effort into strategies to reduce and prevent bullying and consulted widely in the development of a whole-school bullying policy achieved the best outcomes [28].

When young people are included in the process of making rules, they are more likely to understand the reason for the rule and to observe it through their own behaviour [48]. Most students are in favour of supporting students who are bullied and would like bullying to see action taken to stop bullying [14 15 49]. This majority of students can be mobilised through involvement in the development of policy to take a stand against bullying behaviour and to support students who are bullied.

Several strategies can be used to ensure that contribution is sought from the whole school community:

- Staff and parent workshops are an effective way to determine individual and group concerns with the previous policy, as well as brainstorming effective strategies for a more comprehensive policy.

- A suggestion box can be used to facilitate student participation in policy changes, as well as to identify potential or current trouble areas. Staff and parents can be encouraged to contribute to the suggestion box also. Schools should emphasise that the box is not for advising staff about individual behaviours, but rather, for suggestions to stop or reduce bullying in particular areas and at particular times.

  The suggestion box should be placed in a non-threatening area, somewhere that students go to as a part of day to day life, for example, near the toilet block or the library. This is to ensure that students can get to the box without receiving any particular attention from others.

- Student contribution can also be sought through class discussion which explores student perceptions of how bullying can be reduced.

PHASE 2
AWARENESS AND POLICY
DEVELOPMENT / REVIEW: TERM 3

STEP 4 - REVIEW AND COMMUNICATE YEAR 4 QUESTIONNAIRE RESULTS

In Term 3, schools will receive a summary of the results of the Friendly Schools Project pre-test questionnaire data collected at the beginning of Term 2. These findings are designed to give schools some sense of the extent of bullying problems within the school and staff and student attitudes toward bullying. These findings should be disseminated to the school community and utilised by the core committee to guide policy development or change and awareness raising strategies.

STEP 5 - REVIEW CURRENT WHOLE-SCHOOL BULLYING POLICY AND PRACTICE

After collation of information gathered through consultation with the school community and review of the Year 4 student questionnaire data, the Core Committee should conduct a review of the current whole-school bullying policy. This should involve matching the concerns raised by the school community with the content, intentions and actual practice of the current policy.

Policies developed by other schools can be collected and reviewed.

STEP 6 - WRITE THE WHOLE-SCHOOL BULLYING POLICY

1. The Core Committee should prepare **a first draft** of the policy for consideration by the school community. The policy should detail the prevention strategies that the school will initiate and clearly identify bullying as a behaviour that is not acceptable to the school community. This may be as simple as documenting existing procedures. The policy draft should be kept succinct and easy to read.

2. **Circulate the draft** policy among the school community. This should involve as many members of the school community as possible to encourage group ownership of the policy. Students should also be included in the feedback process. Indicate a realistic deadline for feedback and hold meetings to discuss the content.

3. **Incorporate feedback** collected from the school community into the second draft. Issues for further discussion may need to be raised at staff and parent meetings. Circulate this draft among interested members of the school community. There may be a need for several drafts following this procedure, as new feedback is collated and incorporated into a workable document.

4. The Principal (or nominee) **presents a final version** of the policy to the school community, who endorses the policy. The procedure for formal acceptance may vary between schools.

5. Develop several versions of the school policy detailing pertinent information for staff, parents and students. These should be **disseminated** to each group.

PHASE 3
AWARENESS AND POLICY IMPLEMENTATION: TERM 4

STEP 7 - IMPLEMENTING THE WHOLE-SCHOOL BULLYING POLICY

Implementing the whole-school bullying policy in practice is an important component of policy development. It is the standards demonstrated by adult example that have the potential to change student behaviour and promote positive relations [50].

Schools may wish to launch the policy during a bullying awareness campaign (such as a Bullying Awareness or Friendly Schools week) or by contacting the local community newspaper to publish an article. Provide a date on which the policy will come into effect and make copies available in the library and school office. Disseminate appropriate versions of the policy to all staff, parents, students and interested members of the community.

Strategies to ensure the school community acts on the whole-school bullying policy should be implemented:

- Within the Classroom
- Within the School
- With Parents and the Community

STEP 8 - PROMOTE AWARENESS OF THE WHOLE-SCHOOL BULLYING POLICY

- Existing methods of communication should be made use of to promote awareness and implementation of the whole-school bullying policy. These include:

    - School newsletter
    - Student diaries/journals
    - Parent information evenings
    - School magazines
    - Placing copies in the administration area and in the library

- All new staff, including relief staff, should be given a copy of the policy.
- Posters can be developed that highlight the rights and responsibilities of members of the school community in regard to bullying, suggest phrases to use in situations when bullying occurs and provide answers to frequently asked questions about bullying.
- Attention should be drawn to the school policy at different times of the year and through different modes of school communication, such as assemblies, parent/teacher meetings or information nights and orientation days.

Below are some other strategies that can be used to promote awareness and implementation of the whole-school bullying policy.

PLAQUES

To reduce and prevent bullying in schools, the staff, students and parents need to feel they have ownership of the issue. Plaques or signs made by students will allow them to be a part of this initiative, while providing a visual reminder to staff, students, and visitors to the school of the type of environment that school is trying to create for its community. The plaque could read: "(School Name) IS A FRIENDLY SCHOOL".

WEEKLY VALUES

Each week the school could choose one value (see Unit 3, learning activity 2, in the Friendly *Schools Teachers Manual – Year 4*) and focus on developing that value within the school community through the newsletter. Newsletter items could introduce the weekly value to readers, explain why it is an important value and how to demonstrate it to others. The weekly values could also be used as a theme for assemblies (see next section).

ASSEMBLY ITEMS

During Term 4 schools could allow some time at each assembly for a demonstration of how to prevent bullying. Schools could have one class during each assembly demonstrate an aspect of creating a friendly school.

Some ideas for assembly items include:
- Create a song or rap (see unit 3, learning activity 3, in the Friendly Schools *Teachers Manual – Year 4*)
- Role play a situation to dramatise good ways to react to bullying.
  (When using this particular demonstration, teachers must ensure that students are not modelling negative behaviour, but focus on the positive behaviour students can use to prevent bullying from happening).
- Read a poem or short story about bullying
- Create a backdrop for the assembly
- Present awards for students behaving well or helping someone being bullied

Some themes for assembly items include:

- The weekly values (see Unit 3, learning activity 2, in the Friendly *Schools Teachers Manual – Year 4*)

- How to:
  - ask for adult support
  - ignore someone giving you a hard time
  - deal with fights or arguments in a productive way
  - negotiate effectively with other kids

HEALTH PROMOTION CAMPAIGN POSTERS

To raise awareness and increase ownership of bullying prevention and reduction, schools may conduct a poster competition. Schools could be divided into developmentally appropriate categories and address different aspects of bullying. For example:

- Lower primary (Years 1 to 3)   -What does it mean to be friendly?
- Middle primary (Years 4 and 5) -How can bullying be reduced?
- Upper primary (Years 6 and 7)   -What can a bystander do to prevent or reduce bullying?

The posters could be displayed around the school. These designs may be used in future years' bullying prevention and reduction initiatives.

SUGGESTED FRAMEWORK AND CONTENT FOR A WHOLE-SCHOOL BULLYING POLICY

The following framework has been taken from the report on Successful Practice in the Prevention, Reduction and Management of Bullying in Schools [45]. This list of suggested content was developed through an extensive literature review and consultation with national and international researchers and school based practitioners in the areas of bullying and behaviour management.

1. RATIONALE

- A definition of bullying and the different forms it may take, including physical, verbal and relational, which is illustrated by examples;

- Reasons why it is in the interest of the school community to reduce and prevent bullying, not only in terms of the positive impact on students who are bullied but also on school climate and student learning;

- A clear statement of the school's position in relation to bullying; and

- An emphasis on the positive goals the school aims to achieve in terms of a safe and caring environment.

2. RIGHTS AND RESPONSIBILITIES

- The rights of students', staff and parents with respect to bullying at school;

- The responsibilities of staff, students, parents and the wider community in preventing and responding to reports and observations of bullying, including:

    - acknowledging adults as role-models of both prosocial, cooperative behaviour and of bullying behaviour;
    - ensuring the lessons students learn from adult example and school experiences are congruent with the whole-school behaviour management plan and the formal curriculum;
    - promoting cooperation and pro-social behaviour among all school community members;
    - adults being available and open to talking with students about bullying;
    - encouraging parents to discuss bullying with the school and with their children in a developmentally appropriate manner;
    - encouraging positive action in non-involved students to provide support for victims and apply peer-group pressure to refrain from bullying;
    - being observant to signs of bullying;
    - reporting incidents of bullying;
    - treating reports of bullying seriously; and
    - intervening in bullying incidents to shift the power balance away from the individual/s bullying.

- acknowledgement of bullying as also a workplace issue and the rights and responsibilities of staff toward one another and the school community, such as students and parents

3. MANAGEMENT OF BULLYING INCIDENTS

- Specific methods to manage bullying incidents that:

    - are immediate;
    - are tailored to suit the situation according to severity, frequency, and duration;
    - allow longer term follow-up;

- do not use threat, humiliation, sarcasm, aggression or manipulation;
- ensure the victim's immediate safety;
- provide support and ongoing contact with the victim;
- involve meeting with the students involved;
- promote students' sense of concern and responsibility;
- encourage students to problem solve solutions;
- involve follow-up to ensure the longer-term safety of the victim and the occurrence of change;
- inform and involve parents when appropriate;
- involve clear recording of incidents through formalised procedures; and
- in cases not resolved by other means, involve clear and consistent implementation of individualised non-physical, non-punitive consequences for engaging in bullying behaviour that promote awareness, empathy, and skill development and do not reinforce the aggressive exertion of power.

- Clear and simple reporting procedures for staff, students, parents, and the wider community.

4. POLICY REVIEW AND MAINTENANCE

- Methods of communicating the whole-school policy to all members of the school community;
- Methods of monitoring the whole-school policy and a schedule for conducting monitoring;
- Methods of reviewing and modifying the whole-school policy that include input from the entire school community, particularly students, and a timeline for review and modification;
- Methods of maintaining awareness raising activities to periodically reaffirm the school's stand on bullying and reach new school community members; and
- Methods to keep action on bullying a high priority.

ADDITIONAL SUPPORT AND RESOURCES

WESTERN AUSTRALIAN EDUCATION DOCUMENTS

Education Department of Western Australia. (1999). *Behaviour management in schools parent information brochure.*

Education Department of Western Australia. (1998). *Behaviour management in schools policy.*

Education Department of Western Australia. (1998). *Behaviour management in schools: Section 4 support materials (Violence, bullying and harassment protection).*

Education Department of Western Australia. (1999). *Making the difference: students at educational risk strategy 1999-2005 (containing information for parents and caregivers on bullying).*

Education Department of Western Australia. (1998). *Policy and guidelines for students at educational risk.*

Education Department of Western Australia. (1998). *Retention and participation plan.*

UNDERSTANDING BULLYING: BACKGROUND INFORMATION

Besag, V.E. (1989). *Bullies and victims in schools.* Bristol: Open University Press.

Elliot, M. (1991) *Bullying: a practical guide to coping for schools.* Glasgow: Longman.

Rigby, K. (1996). *Bullying in schools and what to do about it.* Melbourne: ACER.

Skinner, A. (1992). *Bullying: an annotated bibliography of literature and resources.* London: Youth Work Press.

Smith, P.K., & Sharp, S. (1994). *School bullying: insights and perspectives.* London: Routledge.

Tattum, D.P. (Ed). (1993). *Understanding and managing bullying.* Oxford: Heinemann Educational.

Tattum, D.P., & Lane, D.A. (Eds). (1988). *Bullying in schools.* Stoke-on-Trent, Staffordshire: Trentham Books.

RESPONDING TO BULLYING

Duncan, A. (1996). The shared concern method for resolving group bullying in schools. *Educational Psychology in Practice, 12(2),* 94-98.

Maines, B. & Robinson, G. (1992). The no blame approach. Bristol: Lame Duck Publishing.

Pikas, A. (1989). A pure concept of mobbing gives the best results for treatment. *School Psychology International,* 10, 95-104.

Pikas, A. (1989). The common concern method for the treatment of mobbing. In E. Roland & E. Munthe (Eds), *Bullying: an international perspective.* London: Fulton.

Rigby, K. (1996). *Bullying in schools and what to do about it (No blame and shared concern, pp.206-223).* Melbourne: ACER.

Sharp, S., Cowie, H., & Smith, P.K. (1994). How to respond to bullying behaviour. In S. Sharp & P.K. Smith (Eds), *Tackling bullying in your school: a practical handbook for teachers.* London: Routledge.

A WHOLE-SCHOOL APPROACH

Fuller, A., & King, V. (1995). *Stop bullying!* Heidelberg: Victorian Health Promotion Foundation.

Olweus, D. (1993). *Bullying at school.* Cambridge: Blackwell

Sharp, S., & Smith, P.K. (Eds). (1994). *Tackling bullying in your school: a practical handbook for teachers.* London: Routledge.

Slee, P.T. (1997). *The P.E.A.C.E. Pack: a programme for reducing bullying in our schools* (2nd ed). Adelaide: P.T. Slee.

CLASSROOM RESOURCES

There are many support activities that schools can implement at the classroom level that build trust, empathy, cooperation and friendship skills. Examples of these can be found in the following resources.

Adderley, A., Petersen, L., & Gannoni, A. (1997). *Social skills training: first 3 years of schooling.* Melbourne: Australian Council for Educational Research Ltd.

Brokenshire, D. (1997). *The straight talk manual: a self-esteem and life skills workbook for young people.* (3rd edition). Tasmania: Straight Talk Publishing.

Brunskill, K. (1998). *The healthy relationships program: teacher's manual.* Melbourne: Oxford University Press.

Canfield, J., & Wells, H. (1976). *100 ways to enhance self-concept in the classroom.* New Jersey: Prentice-Hall.

Connor, G. (1988). *Self-esteem: teachers hold some keys.* Perth: Ministry of Education, Western Australia.

Field, E.M. (1999). *Bully busting: how to help children deal with teasing and bullying.* Sydney: Finch Publishing Pty Ltd.

Lange, J. (1997). *Being me - learning to live with others: for lower and middle primary school.* West Footscray, Victoria: West Education Centre Inc.

MacMullin, C., Aistrope, D., Brown, J.L., Hannaford, D., & Martin, M. (1992). *The Sheidow Park Social Problem Solving Program: a social skills program for primary school children.* Bedford Park, South Australia: The Institute for the Study of Learning Difficulties, Flinders University.

McFadden, J., Flynn, C., & Bazzo, B. (1985). *Junior lifescience: a positive approach to successful behaviour.* Sydney: Martin Educational.

McGrath, H., & Noble, T. (1993). *Different kids, same classroom: making mixed ability classes really work.* Melbourne: Longman Cheshire.

McGrath, H., & Francey, S. (1992). *Friendly kids, friendly classrooms: teaching social skills and confidence in the classroom.* Melbourne: Longman Cheshire.

Shochet,I., Holland,D., & Whitefield, K. (1995). *Resourceful adolescent program: group leaders' manual.* Griffiths Early Intervention Project: Griffith University.

(1999). *Values education: developing self-esteem and citizenship – 8 to 9 years.* Warwickshire, U.K.: Prim-Ed Publishing.

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REFERENCES

1. Zubrick SR, Silburn SR, Gurrin L, Teo H, Shephard C, Carlton J, et al. Western Australian Child Health Survey: education, health and competence. Perth, WA: Australian Bureau of Statistics, 1997.
2. Rigby K. *The Peer Relations Questionnaire Technical Manual*. Point Lonsdale, VIC: The Professional Reading Guide, 1998.
3. Rigby K. What children tell us about bullying in schools. *Children Australia* 1997;22(2):28-34.
4. Slee PT. Bullying: health concerns of Australian secondary school students. *International Journal of Adolescence and Youth* 1995;5:215-224.
5. Slee PT. Peer victimization and its relationship to depression among Australian primary school children. *Personality and Individual Differences* 1995;18(1):57-62.
6. Slee PT, Rigby K. The relationship of Eysenck's personality factors and self-esteem to bully-victim behavior in Australian schoolboys. *Personality and Individual Differences* 1993;14(2):371-373.
7. Rigby K, Slee PT. Dimensions of interpersonal relation among Australian children and implications for psychological well-being. *The Journal of Social Psychology* 1993;133(1):33-42.
8. Forero R, McLellan L, Rissel C, Baua, A. Bullying behavior and psychosocial health among school students in New South Wales, Australia: cross sectional survey. *British Medical Journal* 1999;319:344-348.
9. Boulton MJ, Underwood K. Bully/victim problems among middle school children. *British Journal of Ediucational Psychology* 1992;62:73-87.
10. Kochenderfer BJ, Ladd GW. Peer victimization: manifestations and relations to school adjustment in kindergarten. *Journal of school psychology* 1996;34(3):267-283.
11. Kochenderfer BJ, Ladd GW. Peer victimization: cause or consequence of school maladjustment. *Child Development* 1996;67:1305-1317.
12. Berthold KA, Hoover JH. Correlates of bullying and victimization among intermediate students in the midwestern USA. *School Psychology International* 2000;21(1):65-78.
13. Rigby K. The relationship between reported health and involvement in bully/victim problems among male and female secondary schoolchildren. *Journal of Health Psychology* 1998;3(4):465-476.
14. Williams K, Chambers M, Logan S, Robinson D. Association of common health symptoms with bullying in primary school children. *British Medical Journal* 1996;313:17-19.
15. Rigby K, Slee PT. Bullying among Australian school children: Reported behavior and attitudes toward victims. *The Journal of Social Psychology* 1991;131(5):615-627.
16. Austin S, Joseph S. Assessment of bully/victim problems in 8 to 11year-olds. *British Journal of Educational Psychology* 1996;66:447-456.
17. Salmivalli C, Kaukiainen A, Kaistaniemi L, Lagerspetz KM. Self-evaluated self-esteem, peer evaluated self-esteem and defensive egotism as predictors of adolescents' participation in bullying situations. *Personality and Social Psychology Bulletin* 1999;25(10):1268-1278.
18. Kumpulainen K, Rasanen E, Henttonen I, Almqvist F, Kresanov K, Linna S, et al. Bullying and psychiatric symptoms among elementary school-age children. *Child Abuse and Neglect* 1998;22(7):705-717.
19. Kaltiala-Heino R, Rimpela M, Marttunen M, Rimpali A, Rantanen P. Bullying, depression, and suicidal ideation in Finnish adolescents: school survey. *British Medical Journal* 1999;319(348-351).
20. Craig WM. The relationship among bullying, victimisation, depression, anxiety, and aggression in elementary school children. *Personality and Individual Differences* 1998;24(1):123-130.
21. Rigby K. Suicidal ideation and bullying among Australian secondary school students. *Australian Educational and Developmental Psychologist* 1998;15(1):45-61.
22. Slee PT. Situational and interpersonal correlates of anxiety associated with peer victimisation. *Child Psychiatry and Human Development* 1994;25(2):97-107.
23. Rigby K, Cox I. The contribution of bullying at school and low self-esteem to acts of delinquency among Australian teenagers. *Personality and Individual Differences* 1996;21(4):609-612.
24. Farrington DP. Understanding and preventing bullying. In: Tonny M, Morris N, editors. *Crime and Justice*. Chicago: University of Chicago Press, 1993.
25. Olweus D. Bullying or peer abuse at school: facts and intervention. *Current Directions in Psychological Science* 1995;4(6):196-200.

26. Olweus D. Bully/Victim Problems among schoolchildren: Basic facts and effects of a school based intervention program. In: Pepler DJ, Rubin KH, editors. *The development and treatment of childhood aggression.* Hillsdale, NJ: Erlbaum, 1991:411-448.
27. Pepler DJ, Craig WM, Ziegler S, Charach A. An evaluation of an anti-bullying intervention in Toronto schools. *Canadian Journal of Community Mental Health* 1994;13(2):95-110.
28. Whitney I, Rivers I, Smith PK, Sharp S. The Sheffield project: methodology and findings. In: Smith PK, Sharp S, editors. *School bullying: insights and perspectives.* London: Routledge, 1994:84-107.
29. Oxenberry K, Rigby K, Slee PT, editors. Taking action on bullying: whole school and multi-stage approaches to intervention and prevention. First International Conference on Children's Peer Relations: cooperation and conflict; 1994; Adelaide. Institute of Social Research, University of South Australia.
30. Tattum D. Short, medium and long-term management strategies. In: Tattum D, editor. *Understanding and managing bullying.* Oxford: Heinemann, 1993.
31. Ackermann A. Defining the health promoting school. In: Colquhoun D, Goltz K, Sheehan M, editors. *The health promoting school: policy, programmes and practice in Australia.* Marrickville, NSW: Harcourt Brace & Company, 1997:27-51.
32. Booth ML, Samdal O. Health-promoting schools in Australia: models and measurement. *Australian and New Zealand Journal of Public Health* 1997;21(4):365-370.
33. Parker L, Cameron I. *What is a health-promoting school.* Perth, WA: School Health Coalition of Western Australia, 1995.
34. Nutbeam D. The health promoting school: closing the gap between theory and practice. *Health Promotion International* 1992;7(3):151-153.
35. Bushell N. Health promoting schools work. *Health in Schools* 1999;6(2):7-8.
36. Rigby K. *Bullying in schools and what to do about it.* Melbourne: ACER, 1996.
37. Smith PK, Sharp S, editors. *School bullying: insights and perspectives.* London: Routledge, 1994.
38. Ahmad Y, Smith P. Bullying in schools and the issue of sex differences. In: Archer J, editor. *Male violence.* London: Routledge, 1994.
39. Jones E. Practical considerations in dealing with bullying in secondary school. In: Elliot M, editor. *Bullying: A practical guide to coping for schools.* Harlow: Longman, 1991.
40. Whitney I, Smith PK. A survey of the nature and extent of bullying in junior/middle and secondary schools. *Educational Research* 1993;35(1):3-25.
41. Olweus D. *Bullying at school: What we know and what we can do.* Oxford: Blackwell, 1993.
42. Sharp S, Thompson D. The role of whole-school policies in tackling bullying behaviour in schools. In: Smith PK, Sharp S, editors. *School bullying: insights and perspectives.* London: Routledge, 1994.
43. Stephenson P, Smith D. Bullying in the junior school. In: Tattum DP, Lane DA, editors. *Bullying in schools.* Stoke-on-Trent: Trentham Books, 1989.
44. Roland E. Bullying: A developing tradtition of research and management. In: Tattum D, editor. *Understanding and managing bullying.* Oxford: Heinemann Educational, 1993.
45. Pintabona Y, Cross, D., Hamilton, G., & Hall, M. A Delphi study of successful practice in the prevention, reduction and management of bullying in schools. Bentley, Western Australia: Curtin University of Technology, Centre for Health Promotion Research, 2000.
46. Cowie H, Sharp S. Tackling bullying through the curriculum. In: Smith PK, Sharp S, editors. *School bullying: insights and perspectives.* London: Routledge, 1994:84-107.
47. Sharp S, Cowie H. Empowering pupils to take positive action against bullying. In: Smith PK, Sharp S, editors. *School Bullying: insights and Perspectives.* London: Routledge, 1994:108-131.
48. Slee R. Reforms and ravines: diminishing risk in schools through systematic change. In: Slee R, editor. *Discipline in Australian public education: changing policy and practice.* Victoria: ACER, 1992.
49. Randall P. A factor study on the attitudes of children to bullying. *Educational Psychology in Practice* 1995;11(3):22-26.
50. Roland E, Munthe E. The 1996 Norwegian program for preventing and managing bullying in schools. *The Irish Journal of Psychology* 1997;18(2):233-247.

FRIENDLY SCHOOLS
bullying intervention project

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CENTRE for HEALTH
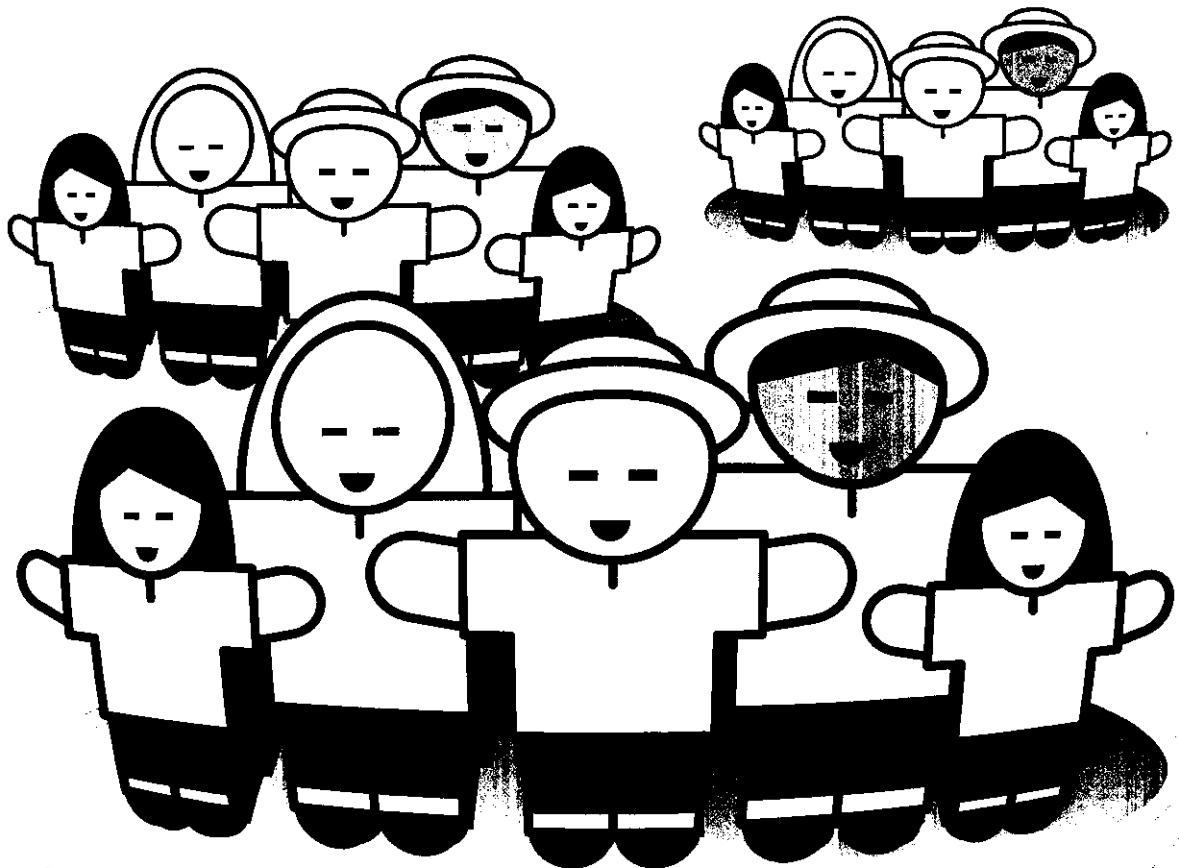PROMOTION RESEARCH

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Appendix T

Friendly Schools Teachers Manual Year 4

FRIENDLY SCHOOLS

bullying intervention project

TEACHERS MANUAL · YEAR FOUR

FRIENDLY SCHOOLS

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TEACHERS MANUAL · YEAR FOUR

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CONTENTS

INTRODUCTION

The Friendly Schools: Bullying Intervention Project is funded by the Western Australian Health Promotion Foundation (Healthway) and is being conducted by the Centre for Health Promotion Research at Curtin University.

WHAT DOES THE FRIENDLY SCHOOLS BULLYING INTERVENTION PROJECT AIM TO ACHIEVE?

The aim of the Friendly Schools Project is to assess the effectiveness of a whole school intervention aimed at preventing, reducing and managing bullying in the primary school setting. This will be achieved by following approximately 2000 Year 4 students, their teachers and parents across the years 2000 and 2001.

IS THERE A NEED FOR THE FRIENDLY SCHOOLS PROJECT?

The Western Australian Child Health Survey [1] found that parents and teachers identified 11% of students in Western Australian primary and secondary schools as being bullied in the previous six months (one in nine students). Given bullying often occurs out of the sight of adults, the actual number of students who are bullied is likely to be higher. Indeed, Australian research found that approximately one in six students reported being bullied at least once a week [2,3] and although many bullying incidents last only a few days, for a significant proportion of students victimisation continues for six months or more [4-6].

International and national research has demonstrated that bullying can be reduced and managed in the school setting. However, while many schools in WA are engaged in efforts to address bullying, communication with schools during a formative study conducted by the Centre for Health Promotion Research, suggests that many are unsure of what action to take or whether strategies being used are effective.

A need exists to evaluate the effectiveness of bullying prevention strategies so that schools can take action with confidence.

WHAT HAS BEEN DONE SO FAR?

The Friendly Schools Project is based on the results of a year-long formative study conducted by the Centre for Health Promotion Research in 1999. This study involved the development of a set of successful practice principles for the prevention, reduction and management of bullying in schools. The principles were drawn from current evidence-based research and validated by an expert panel of international, national and local researchers and school-based practitioners in the area of bullying and behaviour management.

The major outcome of the formative study was a resource that outlined successful practice in whole school bullying prevention and illustrated ways in which WA schools have achieved successful practice, including detailed case studies of government and non-government schools from around the state.

WHAT DOES THE FRIENDLY SCHOOLS PROJECT INVOLVE?

The Friendly Schools Project aims to reduce and prevent bullying by addressing action in a Health Promoting Schools framework. The project involves developing in Year 4 students the skills and values required to respond adaptively to bullying, to support students who are bullied and to refrain from bullying others; to engage parents through home activities and involvement at the whole-school level; and through whole-school strategies aimed at facilitating a collaborative and united approach school wide.

The whole-school intervention includes:

- Nine classroom-based lessons for Year 4 students, to be integrated into the Health and Physical Education Learning Area of the Curriculum Framework;

- Cross-curricular lessons that reinforce the knowledge, attitudes and skills addressed in the nine core lessons;

- Home activities for students to complete with their families;

- Development of a whole-school core committee responsible for maintaining awareness and action on bullying;

- Whole-school awareness raising activities, such as feedback to the school community of student questionnaire results about bullying;

- Review/development of the bullying component of the school's Behaviour Management Plan; and

- Strategies for the management of bullying incidents.

All lessons are outcomes-based and have been developed to be consistent with Learning Area Statements in the Curriculum Framework published by the Curriculum Council of Western Australia.

FRIENDLY SCHOOLS KIT COMPONENTS

The Friendly Schools Kit contains the following components:

Friendly Schools Teachers Manual – Year 4

The *Teachers Manual – Year 4* contains descriptions of nine lessons, background information and resource masters for Year 4 teachers to deliver to their students. These nine lessons are divided into three sections called Units. The first unit of three lessons is designed to be taught in Term 2, the second unit of three lessons in Term 3 and the third unit of three lessons in Term 4.

Student Workbook

The *Student Workbook* contains one Activity Sheet and one Thinking Log for each of the nine lessons in the Year 4 teacher's manual. The Student Workbook is designed to be used by students during each of the nine lessons. The Student Workbook provides a record of the children's knowledge and application of the concepts and skills taught in each lesson.

Cross-Curricular Activities – Year 4

The *Cross-Curricular Activities – Year 4* resource contains lessons in other Learning Areas within the Curriculum Framework. A cross-curricular component has been designed to link with each of the three units from the Friendly Schools Project. Three lessons have been written for each of the Learning Areas selected and resource sheets and texts are provided in the guide.

Lesson Resources

Contained within your kit are a range of resources required for use in the lessons. You will find reference to these resources in the lesson plans. In some cases, there is only one resource provided for your school (for example, video cassette). These will need to be made available to all teachers involved in the project. The resources in this kit include Role Play Cards, plasticine etc.

School Guidelines and Activities Manual

The *School Guidelines and Activities Manual* contains whole school policy and planning strategies, school and community awareness raising activities and strategies for the management of bullying incidents.

ABOUT THIS RESOURCE

This Friendly Schools Project *Teachers Manual – Year 4* was developed using the results of the formative study on successful practice in the prevention, reduction and management of bullying in schools, an extensive literature review of empirically-based national and international research and consultation with Western Australian teachers and bullying and behaviour management experts.

The resource comprises:

- Nine 'classroom' and 'home' activities;

- Background notes that outline how each classroom lesson is linked to bullying and information that will aid teacher understanding of the topic;

- Teachers' notes which provide strategies for teaching bullying prevention effectively; and

- Additional resources.

The lessons are designed to promote:

- Understanding of what behaviours constitute bullying and why bullying is an unacceptable behaviour;

- Students' ability to talk about bullying with each other and adults;

- Adaptive responses to being bullied, including reporting bullying, seeking support and responding assertively;

- Peer support for students who are being bullied; and

- Peer discouragement of bullying behaviour.

UNITS

The lessons are organised into three units, each consisting of three lessons. The table below outlines each unit, the lessons within each unit and the cross-curricular links for each lesson.

Lesson	Health and Physical Education Lessons	Cross Curricular Lessons
Lesson	**Unit 1: Information about Bullying**	
1.1	What is Bullying Behaviour?	**English** Reading .... The Reading Trip Writing .... Informational Texts **The Arts** Exploring Colour Art and Craft ....
1.2	Developing an Action Plan.	**English** Reading .... Comprehending the Text Writing .... Gathering and Presenting Information **The Arts** Art and Craft .... Text Design
1.3	How do we get Support?	**English** Reading .... What did You Think of this Text? Writing............... Writing the Pamphlet **The Arts** Cover Design Art and Craft ....
Lesson	**Unit 2: Feeling Good About Myself and Others**	
2.1	The Bystander	**English** Reading .... Understanding the Story Writing............... Story Planning
2.2	Self–Esteem: What is it?	**English** Reading .... Character Study Writing............... Conducting the Interview
2.3	Self-esteem Character Study	**English** Reading .... Reading for Information Writing............... Publishing the Book
Lesson	**Unit 3: Cooperation in Friendly Schools**	
3.1	Children's Rights in a Friendly School	**English** Reading .... Introduction to the Literature Search Writing............... Defining Friendships
3.2	Values for Promoting Friendly Schools	**English** Reading .... The Literature Search Writing............... The Procedure
3.3	Friendship Skills	**English** Reading .... Writing a Summary of the Texts Writing............... Promoting the Message

LESSONS

Each lesson contains the following:

LINKS TO THE CURRICULUM FRAMEWORK

This resource is outcomes-based and has been developed to be consistent with the Health and Physical Education Learning Area Statement contained in the Curriculum Framework published by the Curriculum Council of WA. Each lesson addresses the following four outcomes of the Health and Physical Education Learning Area:

Knowledge and understandings:
Students know and understand health and physical activity concepts that enable informed decisions for a healthy, active lifestyle.

Attitudes and values:
Students exhibit attitudes and values that promote personal, family and community health, and participation in physical activity.

Self-management skills:
Students demonstrate self-management skills which enable them to make informed decisions for healthy, active lifestyles.

Interpersonal skills:
Students demonstrate the interpersonal skills necessary for effective relationships and healthy, active lifestyles.

Specific outcomes linked to the Health and Physical Education Learning Area Outcomes are described at beginning of the lesson.

PURPOSE

An outline of the knowledge, attitudes and skills to be developed in the lesson.

PREPARATION

A list of resources required for the lesson and teacher sheets to refer to.

PROCEDURE

A detailed procedure of the lesson, including teacher's notes and references to resources required for the lesson.

ACTIVITY SHEET

Each lesson has one activity sheet for students, which is in their Student Workbook. A copy of this activity sheet is provided with each lesson.

TEACHER SHEET

Teacher sheets are for teachers to refer to or use as teaching resources for the class. These sheets can be copied onto A3 photocopy paper/card as posters or onto overhead projection sheets.

THINKING LOG

(Look for this symbol)

The Thinking Log has been developed for students to reflect on the skills and knowledge taught in each lesson. Questions have been developed which ask students to process information at a personal level. The Thinking Log also provides a valuable tool for assessment of students' learning. The Thinking Log is an individual writing time, which can be incorporated into a daily writing time. Thinking Log questions and writing space are provided in the Student Workbook and a copy for teachers follows each lesson.

HOME ACTIVITY

(Look for this symbol)

The Home Activities are designed to involve the family in the learning process of the student. Each lesson has one Home Activity and this sheet should be photocopied for students to take home at the end of school on the day the lesson is taught. Students should return the sheet to class the following day and store it inside their Student Workbook, ready for discussion at the beginning of the next lesson. Home Activity Sheets can be found at the end of each lesson.

STUDENT OUTCOMES

SKILLS	Lessons
• Increased ability to respond adaptively to being bullied	1.2, 1.2, 1.3 2.1, 2.2, 2.3
• Increased ability to intervene appropriately when another student is being bullied	1.2, 2.1, 2.2, 2.3
• Increased ability to discuss the issue of bullying with parents and teachers	1.2, 1.3 2.1
• Increased ability to report bullying incidences to parents and teachers	1.2, 1.3 2.1
• Increased ability to identify support persons with whom bullying can be discussed	1.2, 1.3 2.1 3.1
• Increase in social skills, particularly in the areas of social problem solving, friendship, assertion, co-operation and empathy	2.1, 2.2, 2.3 3.1, 3.2, 3.3

ATTITUDES & VALUES	Lessons
• Increased support for students who are bullied	2.1, 2.2, 2.3
• Decreased support for bullying behaviour	1.2, 1.3 2.1, 2.3
• Increased sense of social support	1.2, 1.3 2.1 3.1, 3.3
• Reduction in negative thoughts and feelings following being bullied	2.2, 2.3
• Reduction in frequency of joining in the bullying of another student	2.1 3.1, 3.2, 3.3
• Increased sense of safety at school	1.2, 1.3 3.1, 3.2, 3.3
• Decreased loneliness at school	3.2, 3.3
• Decreased desire to avoid the school environment	1.2, 1.3 2.2 3.3
• Increased happiness at school	2.2, 3.1, 3.3
• Increased liking of school	2.2, 3.1, 3.3
• Increase in positive self-perceptions	2.2, 2.3
• Increased perception of teachers being interested in stopping bullying	1.1, 1.2, 1.3 3.1, 3.2, 3.3
• Increase in positive perception of the school's efforts to address bullying	3.1, 3.2, 3.3

KNOWLEDGE & UNDERSTANDINGS	Lessons
• Greater understanding of the behaviours that constitute bullying	1.1, 1.2 2.1, 2.2
• Increased ability to identify the difference between 'dobbing' and reporting bullying	1.1, 1.3 2.2
• Greater understanding of the school's position regarding bullying behaviour	1.2, 1.2, 1.3 3.1, 3.2, 3.3
• Increased awareness of the bullying component of the school's behaviour management plan	1.2, 1.3 3.1, 3.2, 3.3
• Increased awareness of the school's procedures for reporting bullying	1.2, 1.3 2.1
• Increased awareness of rights and responsibilities to one another	1.2, 1.3 2.1 3.1, 3.2
• Increased ability to identify reasons why bullying occurs	1.1, 1.3 2.3, 2.3
• Increased ability to identify behaviours that maintain bullying	1.2, 1.2 2.1, 2.2, 2.3
• Increased ability to identify behaviours that discourage bullying	1.2, 1.3 2.1, 2.2, 2.3 3.1, 3.2

The Friendly Schools: Bullying Intervention Project aims to achieve a reduction in the number of students who are bullied and the frequency with which bullying occurs through progress toward these knowledge, attitude and skill outcomes, within a whole-school approach.

MONITORING STUDENT PROGRESS

The Friendly Schools Project activities provide students with opportunities to progress towards four of the Health and Physical Education Learning Area Outcomes:

- Knowledge and understandings;
- Attitudes and values;
- Self-management skills; and
- Interpersonal skills.

With an outcomes-focused approach, teachers make judgements about the progression of each student toward achieving the major outcomes. The Curriculum Framework (Curriculum Council, 1998) provides a guide to the phases of development for students in each of the eight learning areas. Based on this, each school needs to develop or identify a progress map or developmental continuum to monitor each student's progress towards achieving the major learning outcomes.

The Education Department of WA, Health and Physical Education Monitoring and Assessment Support Package, provides advice on how to monitor student progress in the learning area as well as examples of observation criteria.

ASSESSMENT STRATEGIES

Monitoring and assessment strategies will involve teachers in the collection of assessment evidence. The Friendly Schools Project provides opportunities for a range of assessment methods, including:

- Student Workbooks – one activity for each lesson.
- Thinking Log – processing questions for each lesson.
- Home Activities – reflection with the family.
- Direct observation – discussion and role-play.
- Performance assessment – student's performance or product that allows them to demonstrate their learning.
- Self-assessment – students will be asked to report on their group work and individual understanding of lesson content.

ASSESSMENT OF ATTITUDES AND VALUES

It is important to monitor the demonstration of attitudes and values, because they are an integral component of an individual's decisions about health. There is no developmental sequence for the monitoring of values and attitudes. Reporting indicates a student's demonstration of the attitudes and values in terms of where he or she is at a given time. Students should be provided with learning opportunities to enable them to demonstrate values in more complex situations over time. Reporting should acknowledge what the student has demonstrated, given the content and complexity of the learning experience and environment.

TEACHERS' NOTES

Research has shown that through whole-school activity, schools can have a positive impact on bullying [7-9]. An important component of whole-school activity to reduce and prevent bullying, is addressing the topic in the classroom [7][9-11]. The following teachers' notes provide strategies for teaching bullying prevention effectively.

DEALING WITH BULLYING BEHAVIOUR, NOT BULLIES

It is important that bullying is seen as a behaviour and not personalised in the form of a 'bully'. The message students receive should be that bullying is an unacceptable behaviour. It is easy to fall into the trap of focusing on 'busting' the bullies. This focus promotes force and exclusion as a means of getting ones way, in other words, exactly what bullying is! It also labels students who engage in bullying as 'bullies' and excludes them from change activities, because the message they receive is that they, as a 'bully', are not wanted or valued.

Teachers can use the classroom environment to demonstrate that all students are valued, but engaging in bullying behaviour is unacceptable.

BULLYING AS A SOCIAL RELATIONSHIP

Bullying is more than a relationship between students who bully and students who are bullied. It is a social relationship involving group values and group standards of behaviour, that requires collaborative and consistent action across the school community for positive change to occur [12][13]. Most students are not directly involved in bullying. However, these students can play a vital role in the prevention of bullying by supporting students who are bullied and applying peer group pressure to refrain from bullying others [10][12][13].

ADULT BEHAVIOUR AND ATTITUDES

It is important that what students learn from adult example and their experiences at school about relating to others, is congruent with the school Behaviour Management Plan and the formal curriculum [12].

As a teacher, this involves:
- acknowledging the influence on student behaviour of adult behaviour toward one another and toward students;
- being aware of the tacit condoning effect of non-response or inappropriate response to observations or reports of bullying;
- being open to discussing, listening and empathising with students' reports of bullying;
- modelling pro-social and co-operative behaviour in interactions with students and other staff; and
- consistently implementing the whole-school behaviour management plan, particularly regarding the management of observations and reports of bullying [12].

FOSTERING POSITIVE EXPERIENCES AND APPROPRIATE BEHAVIOUR

Teachers can use the classroom situation, the curriculum and their knowledge of individual students to help students who are bullied [12].

This can be done by:
- providing students who are bullied with opportunities to achieve positive attention and recognition in the peer group;
- helping students who are bullied to develop friendships with pro-social students;
- identifying, encouraging, and strengthening the competencies of students who are bullied;
- strengthening the support systems available to students who are bullied; and
- responding effectively and consistently to bullying incidents and reports [12].

It is important that this is done subtlety and that consideration is given to the social impact of such action [12]. It is also important to take care that the outcome of such action is as intended [10]. For example, opportunities to achieve positive attention in the peer group are met with success.

In a similar way, teachers can use the classroom situation, the curriculum and their knowledge of individual students to help students who engage in bullying behaviour develop more appropriate modes of behaving and to provide positive ways of using the leadership and peer skills that these students may possess [10][12].

CO-OPERATIVE LEARNING

Co-operative learning techniques can be utilised as a means of decreasing classroom tension and conflict and increasing cohesion and student satisfaction [10]. Special attention should be given to how students involved in bullying interact in the groups formed [10]. Teachers can use their knowledge of the social relationships among their students to promote positive relations. Students who are bullied can be surrounded by a group of friendly and positive students. Students who bully others can be surrounded by strong and secure students who will not accept being bullied. Care should be taken to ensure that students who are bullied are not seated with students who engage in bullying, unless the student who bullies has shown a change in this behaviour and students are present in the group who will support the victim [10].

CLASSROOM RULES ABOUT BULLYING

Simple and clear classroom rules can be collaboratively developed between teachers and students [10]. Student involvement is important as it promotes responsibility and ownership of the rules. The rules should be known by all students and posted in a visible place. The following rules are a suggestion:

1. We will not bully others
2. We will try to help students who are bullied
3. We will make an effort to include students who are left out
4. We will talk to an adult when we see bullying

It is important that the rules include bystander involvement (helping students who are bullied) and both direct (e.g. hitting and name-calling) and indirect (e.g. exclusion) forms of bullying.

Class rules help to dispel the notion of 'dobbing', since bullying is identified as a behaviour that should not be accepted (rule number 1) and when a student talks about bullying to an adult they are following rules 2 and 4.

To help students adhere to the rules, concrete behaviours that they can engage in to comply with the rules should be provided, such as having students come up with ways of involving a student who is left out [10]. The classroom lessons which follow provide further opportunities for identifying and practicing specific behaviours for students to engage in that comply with the rules.

CO-OPERATIVE ACTION

Involving parents in school action on bullying has been noted as playing an important role in the reduction and prevention of school bullying [10][12][14]. Parents and the wider community should be involved in school action to discourage and manage bullying so that students receive a consistent message across the school, home, and community environments [12].

This is achieved in the classroom lessons through home activities for students to complete with their families and by teachers being open and available to discuss the issue of bullying with parents. One of the most distressing things for parents, can be feeling that the school is not taking their child's involvement in bullying seriously [14].

RAISING SENSITIVE ISSUES WITH STUDENTS

The following lessons involve discussion and consideration of bullying, an issue that may raise negative feelings in some students. Teachers can manage this using the following strategies:

- Encourage students to use the third person, for example, "Someone I know..." or "I have a friend who...".
- Watch for signs of distress in students.
- Ensure adequate processing of each activity occurs. The Thinking Log, within the Student Workbook, will facilitate this.
- Ensure a debriefing period follows activities before students leave the classroom.
- End each activity and lesson on a positive note.
- Follow school policy and procedure for providing additional health or welfare support services to students. Utilise the school psychologist, chaplain, school health nurse, or other delegated staff member able to deal with these issues.
- Use 'protective interruption'. This technique involves preventing a student from making a personal disclosure in front of other students. The teacher interrupts the student and suggests that he or she re-phrase their comment in the third person, offers the student the opportunity to discuss the issue further in private, or refers the student to the appropriate professional. The purpose of protective interruption is not to prevent the student disclosing, but to ensure that disclosure occurs in a safe and supportive setting.

WHEN A CHILD REPORTS BULLYING

Many children who are bullied do not tell. Research suggests that about 50% of boys and 40% of girls who are bullied weekly do not tell a teacher [3]. Observations of bullying in schools have shown that students have well developed strategies for concealing bullying or reducing teachers' concerns [15]. It is therefore imperative that teachers are receptive to students' reports of bullying [15]. As a teacher, when dealing with reports of bullying it is important to [16]:

- **Be available**
  This involves being ready to listen and respond to reports of bullying. It is important to provide the victim with immediate empathy and support, despite the demands of the teaching day.

- **Treat the information seriously**
  Disclosure to a teacher is often a big step for a student. The student considers the situation serious enough to risk dismissive remarks from the teacher and/or retaliation from the student who is bullying. The information given should therefore always be treated with respect.

- **Ensure follow-up**
  The situation should always be reviewed. This indicates to those involved that there is an interest in future interactions and that these will be monitored. It also provides the victim with an opportunity to try out the strategies problem solved and report back on success.
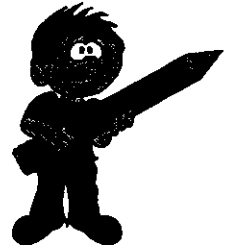
UNIT 1
BULLYING INFORMATION

LESSON 1: WHAT IS BULLYING BEHAVIOUR?

LINKS To the Curriculum Framework

This activity contributes to the achievement of the Health and Physical Education Learning Area Outcomes from the Curriculum Framework by:

Knowledge and understandings:

- Identifying the behaviours that constitute bullying.
- Discussing why bullying is an unacceptable behaviour.

Attitudes and values:

- Listing positive alternatives to bullying knowledge.
- Demonstrating empathy for the victim in bullying situations.

Self-management skills:

- Demonstrating decision-making skills in bullying situations.

Interpersonal skills:

- Demonstrating, communicating/working in groups to show that bullying is an unacceptable behaviour that has a negative impact on relationships.
- Communicating their feelings about the possible effects of bullying behaviours.

PURPOSE

This activity will provide an opportunity for students to:
- List and discuss the behaviours and attitudes that constitute bullying and determine the effects of this behaviour on the self-esteem of the people involved.
- Discuss the possible causes and effects of bullying and make decisions about how people may feel as a result of bullying.

PREPARATION

- Read the Background Notes at the back of this resource.
- Students' Friendly Schools Workbooks
- A pack of felt pens for each group for group decision-making
- Large sheets of butcher's paper for recording the group's decision-making processes
- Copy of the Home Activity Sheet for each student
- Copy of letter to family of each student regarding Home Activities. (Please find with Home Activity Sheet following this lesson)

PROCEDURE

1. Introduce the notion of a Friendly School
   Coming to our school can be a wonderful experience. We make friends and learn new things and have a lot of fun together. Schools are places where children should always feel happy and safe.
   Question to consider:
   - What are some of the things we do in our school to make students feel good about themselves and to encourage positive behaviour and attitudes?

     Examples: Certificates, student of the week, class awards, newsletter articles etc.

   Sometimes children don't feel happy and safe at school. They are children, just like you, who are being bullied in the schoolyard and perhaps in their neighbourhoods.

2. Discuss with the students the concept of developing a Friendly School where everyone feels happy and safe and cared for.

3. Discuss with the group the idea of this class exploring the concept of bullying and developing a plan that would help children to overcome and deal with bullying.

4. Discuss: **What is bullying?**

   Bullying is when someone repeatedly and deliberately hurts or upsets someone else.

5. Students identify the key people involved in the bullying process.
   Person who bullies, Person being bullied, Bystander.

6. Give a definition for each and display these for use later in the lesson.

- A person who bullies – a person who feels the need to try to demonstrate his/her strength over another person.
- A person who is being bullied
- Bystander- a person who sees the bullying or knows that it is happening to someone else.

7. **Exploring Bullying**
   Arrange the students into groups applying the principles from Discussion Groups (use First Steps Oral Language Group Roles; Recorder, Manager, Encourager and Reporter). Give each group a sheet of butcher's paper and a felt pen. Ask each group to write the word 'Bullying' in the middle of the page. Then ask each group to brainstorm examples of types of bullying behaviours using their own ideas.

8. Explain to the students that how a person feels about a behaviour is related to whether a situation is bullying or not. *If a friend is teasing you and you feel that it is not mean but just fun, then it is not bullying. If it is upsetting and happens often then you may feel bullied.*

Examples of Bullying Behaviours

| Calling people hurtful names or making fun of someone in a hurtful way | Ignoring someone or leaving someone out on purpose | Teasing someone | Staring or giving someone mean looks or gestures |

Bullying is when these things are done over and over to someone

Threatening someone and making him/her feel afraid of what might happen

Telling lies or hurtful stories about someone to try to make other people dislike them

Hitting, kicking or pushing someone

Forcing someone to do things they don't want to

Ganging up on someone including trying to make other students dislike them

Taking or breaking someone's belongings

9. Each group then reports their findings to the class as the teacher creates a master chart. Ask each group to contribute two responses, and then go

around the groups until there are no more responses. Ask the students to define what each behaviour involves i.e. How is the silent treatment, bullying?

10. Ask the students to identify and discuss different situations which could be just fun or could make you feel bullied. Remind the students that how they feel in a situation is an important factor in any situation.

11. Ask each group to discuss the scenarios on **Activity Sheet 1** Student Workbook 'What is Bullying?' and decide which could be a bullying situation. Ask the students to write why or why not they think a situation is a bullying situation. Discuss the decision.

12. **How does being bullied make a person feel?**
    Using the different types of bullying behaviours you have brainstormed ask the students to consider and discuss, in their groups, how they would feel in these situations.

    Questions to consider:
    - How might these feelings affect someone of your age?
    - How might you feel if you were being bullied?

13. **Why do some children bully other children?**
    In their groups students use the 'placemat' strategy to answer why they think a child might bully another child? Each student writes his/her ideas in the space in front of him/her on a piece of paper (see below). The group uses these ideas to write a group decision on why children might bully. Ask each group to discuss how they would feel about being bullied for these reasons.

"Placemat" Strategy

Each Student writes his/her own ideas

Group decision
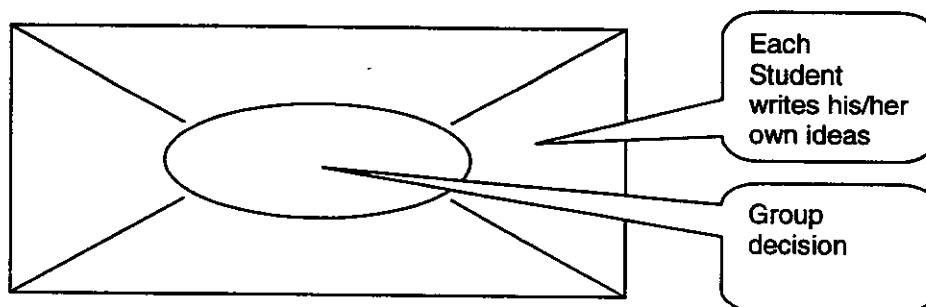
14. Discuss with students why bullying is unacceptable behaviour (because it makes children unhappy and scared).

15. Summarise the information from this lesson by helping the students to write answers to the following questions.

✿ What is bullying?
✿ What are some types of bullying behaviours?
✿ How can bullying make us feel?

✿ *This symbol indicates the information that can be used in a 'Kids Pamphlet' on Bullying. The process for developing this pamphlet is described in Unit 1 of the Cross-Curricula Activities Booklet in the Friendly Schools Kit.*
Look out for the symbol in lessons 1-3 of Unit one of this Booklet

Example of plan for information in pamphlet
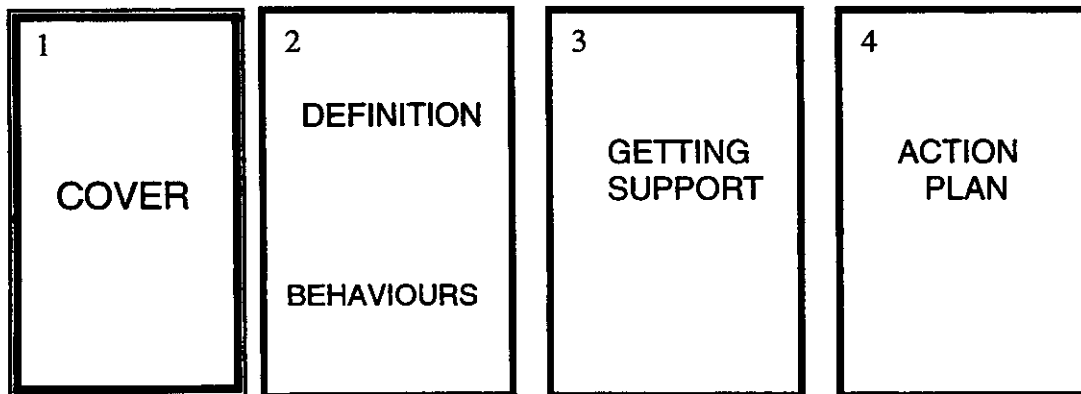
1	2	3	4
COVER	DEFINITION BEHAVIOURS	GETTING SUPPORT	ACTION PLAN

THINKING LOG

At the completion of the lesson ask the students to turn to Thinking Log Activity 1 in their Student Workbook. Use the following questions for the students to think and reflect on the key issues covered in this lesson.

Describe a bullying situation you have seen or been involved.
- What type of bullying was it?
- How did it make you feel?
- What did you do?
- How did you feel about the person who bullies?

HOME ACTIVITY

At the completion of the lesson, give each student a copy of the Home Activity Sheet and the Letter to the Family to take home to explain the Project and activities. Ask the students to return the sheet at a time prior to your next scheduled Friendly Schools lesson.

Home Activity Sheet 1.1 includes the following:

Find examples of bullying behaviour on TV i.e. cartoon characters, in books (common Fairy tale), in the newspaper or magazines and comics.
Ask your family to help you fill in the information in the table.

WHAT IS BULLYING?

Bullying is when someone repeatedly and deliberately hurts or upsets someone else.

Which of these situations are bullying? Explain why or why not.

1 As he is playing chasy a Year 4 boy runs past a Year 1 girl at recess and knocks her drink bottle out of her hand. The Year 1 girl is upset but the Year 4 boy doesn't notice and keeps running.

Y/N

---

2 A child in your class teases another classmate each day about his hair. This makes him feel sad and not want to come to school.

Y/N

---

3 A Year 5 student punches another Year 5 girl on the arm every time she walks past her in the classroom. The punches are hurting her and she is frightened of the other child.

Y/N

---

4 Two boys have an argument over whose turn it is to bat and they begin to fight. Both boys are equally to blame and shouldn't be fighting.

Y/N

---

5 A group, who were your friends last week, stopped letting you be part of their group this week. They say nasty things about you every time you try to join in and you don't know why.

Y/N

1

Dear Family,

Beginning this term, our school will be involved in the Friendly Schools Bullying Intervention Project. This Project involves classroom and whole school activities to address bullying. The project aims to develop in students the skills and values required to respond to bullying, to support students who are bullied and to refrain from bullying others.

Each term, our class will complete three lessons which address bullying. A Home Activity Sheet has been designed for each lesson for students to complete with their family and return to school the following day. Home Activities will be based on the content of the lesson taught in class that day and will provide the opportunity for discussion and reflection of the relevant skills, attitudes and understandings addressed.

Family values and attitudes can influence your child's response to bullying situations. By participating in the Home Activities, family members show cooperation and open communication and reinforce positive attitudes.

The Home Activities are designed so that family members not only supervise the activity, but they may also be asked to contribute to the activity. The following notes have been included in preparation for these activities.

WHAT IS BULLYING?

Bullying is:
- a repeated, unjustifiable behaviour;
- that may be physical, verbal, and/or psychological;
- that is intended to cause fear, distress, or harm to another;
- that is conducted by a more powerful individual or group;
- against a less powerful individual who is unable to effectively resist.

IS FIGHTING BULLYING?
While fighting between two students is of concern, it may not be bullying. It is the presence of a power imbalance that distinguishes bullying from fighting, conflict, violence and disagreement . It is this imbalance that makes mistreatment of the victim possible.

"Children who fight or scrap with one another are not bullies because they fight, and the one who wins is most certainly not a bully because he wins. The mindless and degrading violence of strong against weak may be bullying, but fighting, by definition, is not" (Jones, 1991).

IS TEASING BULLYING?
Teasing, done in mutual fun and jest, where all individuals are involved and feel capable of responding, is *not* bullying. However, teasing that is done in a mean and hurtful way, by a powerful person to a person who feels powerless to respond or to stop what is happening, is bullying.

The Home Activities provide an opportunity to share in the learning experience provided by the Friendly Schools Project in our school and we hope that you will find this both an enjoyable and rewarding experience.
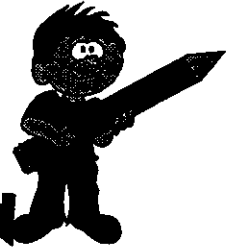

Yours sincerely
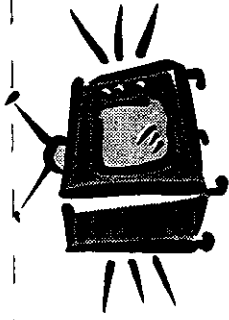
HOME ACTIVITY: LESSON 1 UNIT 1

Find examples of bullying behaviour on TV i.e. cartoon characters, in books (common fairy tale), in the newspaper or magazines and comics.

Ask your family to help you fill in the information in the table below for each example.

STORY	BULLYING CHARACTER	TYPE OF BULLYING	WHO'S BEING BULLIED?	BYSTANDER	WHAT ACTION DID THE VICTIM OR BYSTANDER USE?
Example: 'Bugs Life'	Hopper	Threatening to hurt the ants.	The Ants	Other Grasshoppers	They stood up to the ants and told them that they were not going to be bullied any more.

UNIT 1

BULLYING INFORMATION

LESSON 2: DEVELOPING AN ACTION PLAN

LINKS To the Curriculum Framework

This activity contributes to the achievement of the Health and Physical Education Learning Area Outcomes from the Curriculum Framework by:

Knowledge and understandings:

- Identifying positive strategies for dealing with bullying situations.

Attitudes and values:

- Demonstrating acceptance of personal responsibility for tolerance and respect of others and a commitment to promoting these values.

Self-management skills:

- Developing a plan to assist in making decisions and related to the use of assertive behaviours to deal with bullying situations.

Interpersonal skills:

- Practising communication as a strategy to address bullying behaviours.

PURPOSE

This activity will provide an opportunity for students to:
- Identify and demonstrate strategies for bullying situations.
- Demonstrate the use of their 'I' messages to assertively address bullying situations.
- Develop an 'Action Plan' for children to use in bullying situations.

PREPARATION

- Students' Friendly Schools Workbooks
- Remind students to have their Home Activity Sheets for this lesson
- Pack of **Situation Cards 1.2** for each group from the Friendly Schools kit
- Copy of Home Activity Sheet for each student

PROCEDURE

1. Ask the students to share examples of bullying behaviour identified on TV as part of their home activity from the last lesson with the class.

2. Ask the students to describe some examples of what action they can take, as an individual or as a group, to handle bullying. Write these onto the board.

3. Ask the following questions:
   - Did you notice different responses for different types of bullying?
   - If someone was being hit would they perhaps react differently than if they were being called names?

4. Introduce the students to the skill of 'getting the message across'.
   If you want someone to listen to what you have to say in a bullying situation you need to use an assertive message or 'I' Message.
   The 'I' message can be used as a means to stand up to children who are teasing you or for asking for help if you are being bullied. It can be used by a bystander to tell a person who is bullying how he/she feels about his/her behaviour, or to get help for someone else.

   Use the following example:

   - **I feel** ...(say how you feel)
   - **When you** ... (describe the other person's behaviour)
   - **Because** ... (say what would make the situation better for you)
   - **And what I want** ... (say what would make the situation better for you)

   I feel hurt when you call me names and won't let me join in. What I want is to be given a go so that we can all have fun together but I am not going to let you treat me like this.

5. Arrange the students into groups and give each group a set of **Situation cards 1.2** from the Friendly Schools kit see **Teacher Sheet 1**. Ask each student in the group to take a situation card and then turn to **Activity 2** in their Student Workbooks. Ask each student to glue his or her situation card on top of his or her sheet.

6. Ask each student to decide what sort of bullying this situation is and think about how they could handle this type of situation. Then ask the students to develop an 'I' message the person being bullied or bystander could use for that scenario. (It could be for the bystander or the victim). Ask each student to role-play the 'I' statement within their group.

7. Ask the group reporter to present feedback to the class on the strategies used by group members. The teacher can add any new strategies to the list already started on the board.

8. Ask the students to consider the best ways to handle a person who bullies so that these ideas can be made into an Action Plan for children to follow if they are in a bullying situation.

9. Develop a class bullying 'Action Plan'. See example on **Teacher Sheet 2**

10. Discuss with the students that sometimes the actions we choose don't always get the response we might hope for. If the bullying continues then we should go back to our Action sheet and choose another action to try.

11. Give students a sheet of blank paper and ask them to develop their own 'Action Plan'. The students will need to take their 'Action Plan', sheets home to use with their home activity.

☼ Copies of the 'Action Plan' sheets can also be included in the 'Kid's Pamphlet'.

THINKING LOG

At the completion of the lesson ask the students to turn to Thinking Log Activity 1 in their Student Workbook. Use the following questions for the students to think and reflect on the key issues covered in this lesson.

Think about bullying.
- What could you do if you were being bullied at school?
- How could you help a friend who is bullied?
- What could you suggest to a friend who is bullying to give him/her some ideas about better ways to treat other children?

HOME ACTIVITY

At the completion of the lesson give each student a copy of the Home Activity Sheet to take home and work through with their family. Ask the students to return the sheet at a time prior to your next scheduled Friendly Schools lesson.

Home Activity Sheet 1.2 includes the following:

Talk to someone in your family about a bullying situation they have experienced or saw as a child or a bullying situation you might have seen. Use the Action Plan together to work through the situation and decide what action could have been taken. Write about this situation and what you decided would have been the best action in this case.

SITUATION CARDS 1.2

Someone throws your bag in the mud at the bus stop and the other kids laugh. You are upset because this student always does horrible things to you.

You see a student your age punching a younger student every time he/she sees the student in the playground.

Over the last week a couple of the kids won't let you join in their games and just ignore you.

When ever you have to speak in class another student gives you really hurtful looks. No one else seems to see but it makes you feel very uncomfortable so you try to avoid talking in front of the class.

A student has tripped your friend over a couple of times in the playground while you are trying to play. The student is doing it on purpose and it is upsetting your friend.

A person keeps interfering in your game by running through the middle and kicking the ball away.

A small group of children keep calling another student in your class names and making comments about his/her size.

ACTION PLAN EXAMPLE

Try to stand up for myself in a positive way.

Walk Away and ignore the person completely

Try to talk with the person I am having a problem with.

WHEN I HAVE A PROBLEM I CAN

Get help from someone in my support group.

Try making a deal or agreement with the other person.

Ignore the situation and keep playing or working.

Talk to a friend to get some ideas to make a decision.

USING MY 'I' MESSAGE

> ## SITUATION CARD
> Glue here

"In this situation I feel_____

_____

when you _____

_____

because_____

_____

and what I want_____

_____ "

What action would you take from your Action plan in this situation? Why? _____

_____

_____

_____

_____

Who would you talk to? _____

A FAMILY STORY

Talk to someone in your family about a bullying situation they have experienced. Use your Action Plan together to work through the situation and decide what action could have been taken. Write about this situation and what you decided would have been the best action in this case.

SITUATION
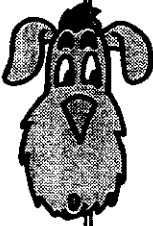
ACTION

WHAT DO YOU THINK WOULD HAVE HAPPENED?
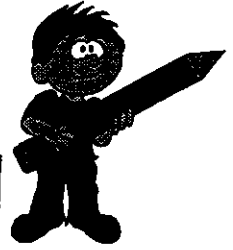
UNIT 1
BULLYING INFORMATION
LESSON 3: HOW DO WE GET SUPPORT?

This activity contributes to the achievement of the Health and Physical Education Learning Area Outcomes from the Curriculum Framework by:

Knowledge and understandings:

- Discussing the importance of identifying and utilising support networks for making informed decisions.

Attitudes and values:

- Demonstrating responsibility for their own role in the development of a support group.

Self-management skills:

- Identifying a personal trust group and establishing a plan to access this group.

Interpersonal skills:

- Practicing asking for support using verbal and written communication skills.

PURPOSE

This activity will provide an opportunity for students to:
- Identify actions they can take in a bullying situation.
- Develop a network for support, in the form of a trust group, to help them to address social issues including bullying.

PREPARATION

- Students' Friendly Schools Workbook
- Prepare A3 copy or overhead of 'STOP THINK TALK' posters - Teacher Sheet 3
- Role Play Cards 1.3 in Friendly Schools Kit
- Copy of the Home Activity Sheet for each student

PROCEDURE

1. Introduce 'STOP THINK TALK' **Teacher Sheet 3**
   When students find themselves in a difficult situation like being bullied they should follow three simple steps to help themselves. These Steps Are:

STOP	-	WHAT IS GOING ON?
THINK	-	WHAT CAN I DO?
TALK	-	WHOM CAN I TALK TO?

2. Point to the poster. STOP- What's Going On?
   When you have stopped think about your feelings. Are you angry, afraid or not really worried?
   Questions to consider:
   - How do I feel?
   - Is the situation really bothering me?
   - Am I in danger?
   - What do I want? (eg. To make it stop, to get away from the situation, to deal with the situation myself)

When students have worked out how they may feel, they move to the next step.

3. Point to the poster. THINK- What can I do?
   This is when the **action plan** from the previous lesson is used. Decide which is the best action in this situation?
   Questions to consider:
   - Is this a bullying situation?
   - What strategies could I use from my action plan
   - Can I handle this situation myself?
   - Do I need to ask for help?

When students have decided on the best actions move to the next step.

4. Point to the poster. TALK – Talk about it.
   Discuss who we can go to for support?
   Questions to consider:
   - Who is the best person to talk to?
   - What do I want from my support person?
   - How could I talk about it?

5. ✿ A Support Group – Ask the children to help you to draw a school support group that all students could use.

6. Ask the students to turn to **Activity Sheet 3** and draw a picture of themselves under the balloons. Students can add other people they personally turn to other than the group already identified as a class. Students write these people onto the balloons on their sheet.
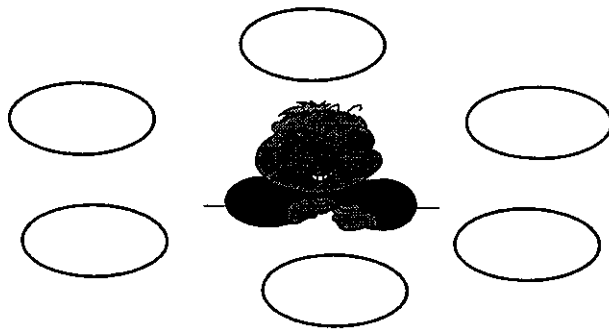
7. Discuss how we determine who we ask for support and how different situations may lead you to seek support from different people within your support group. Discuss how you ask an adult for support?
   Demonstrate the sort of questions an adult i.e. teacher might ask you.
   - What is the problem?
   - Who was involved?
   - How do you feel about the situation?
   - What do you want to happen?
   - What have you done already to try to cope with this situation?

8. Discuss what is the difference between 'dobbing' and asking for help?
   Ask the students the following questions:
   - How would you normally get help at school for something like completing a Maths problem or a ball that is stuck up a tree?
   - Why is asking for help in this situation not 'dobbing'?

When anyone feels the situation is out of his/her control and he/she is unable to deal with it alone he/she should ask for help. If anyone sees someone else in this situation he/she should also ask for help.

- Dobbing is not the same as asking for support or help.
- Dobbing is when a person tries to get attention or get someone else into trouble.

9. Display the class 'Action Plan' developed in lesson 2 then ask the students to use the 'Stop Think Talk' process to decide on and practice asking for help. Remind the students that the Action Plan is to be used in the 'Think' section of 'Stop Think Talk' process and the 'Support Group' and 'I' message is used in the 'Talk' section

10. Give each group a pack of the **Role Play Cards 1.3** and ask the students to form pairs within their groups and discuss the feelings they might have in this situation, appropriate actions they may take and support people they would talk to. Then ask them to role play the actions they would take.

11. Ask the students to discuss the effectiveness of their class 'Action Plan'.

- Did it need any changes or improvements?
- Was it easy to use?
- Would it work in a real situation?

12. What changes do you need to make to the Action Plan to make it suit you?

THINKING LOG

At the completion of the lesson ask the students to turn to Thinking Log Activity 1 in their Student Workbook. Use the following questions for the students to think and reflect on the key issues covered in this lesson.

Think about the people in your life who care about you and support you.
- Write about the people in your life who particularly listen to you when you need them and that you listen to for advice. Describe these people and why you trust them.
- Think about a time when you have needed to ask for help or support before and write about how you did this and why.

HOME ACTIVITY

At the completion of the lesson give each student a copy of the Home Activity Sheet to take home and work through with their family. Ask the students to return the sheet at a time prior to your next scheduled Friendly School lesson.

Home Activity Sheet 1.3 includes the following:

1. Ask your family to help you make a support group for when you are not at school. Begin by filling in the wheel of people you trust. The wheel shows the levels of support from the people you are closest to (in the middle) to the people who can help you but are not close personally e.g. police.

2. Ask your family to identify the people from your trust circle who would be best for your personal support group that you could talk to if you were being bullied.

STOP THINK TALK ABOUT BULLYING

STOP WHAT IS GOING ON?

- How do I feel

- Is the situation really bothering me?

- Am I in danger?

- What do I want?
  (eg. To make it stop, to get away from the situation, to deal with the situation myself)
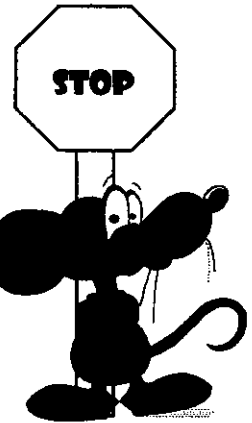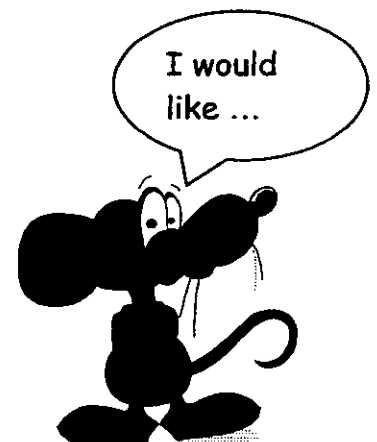
THINK WHAT CAN I DO?

- Is this a bullying situation?

- What strategies could I use from my action plan?

- Can I handle this situation myself?

- Do I need to ask for help?
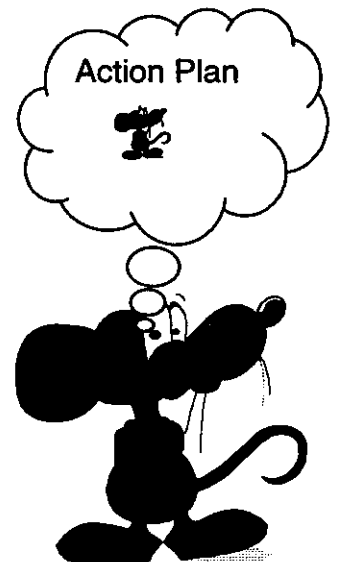
TALK WHO CAN I TALK TO?

- Who is the best person to talk to?

- What do I want from my support person?

- How could I talk about it?

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MY SUPPORT GROUP

Draw yourself holding the balloons and write your support people in them.

ROLE-PLAY CARDS 1.3

Role Play 1
Your Role: You see someone bullying.
Situation: You are in the lunch area and you see a child who is in your class bullying a younger child by throwing his/her lunch on the ground. You have noticed this person has bullied this same young child before and you feel sorry for him/her.

Role Play 2
Your Role: You are the person being bullied.
Situation: Lately you have found that one boy/girl in your group has been saying mean things and trying to get the other kids to turn against you. This day you go up to the group and this particular student tells you that you're not wanted in the group anymore and to go away. They all walk off, but I notice that the other kids in the group look very uncomfortable.

Role Play 3
Your Role: You are the person being bullied.
Situation: You are in the classroom and another student is constantly giving you horrible looks and making rude signs at you. It continues every day and you are tired of it.

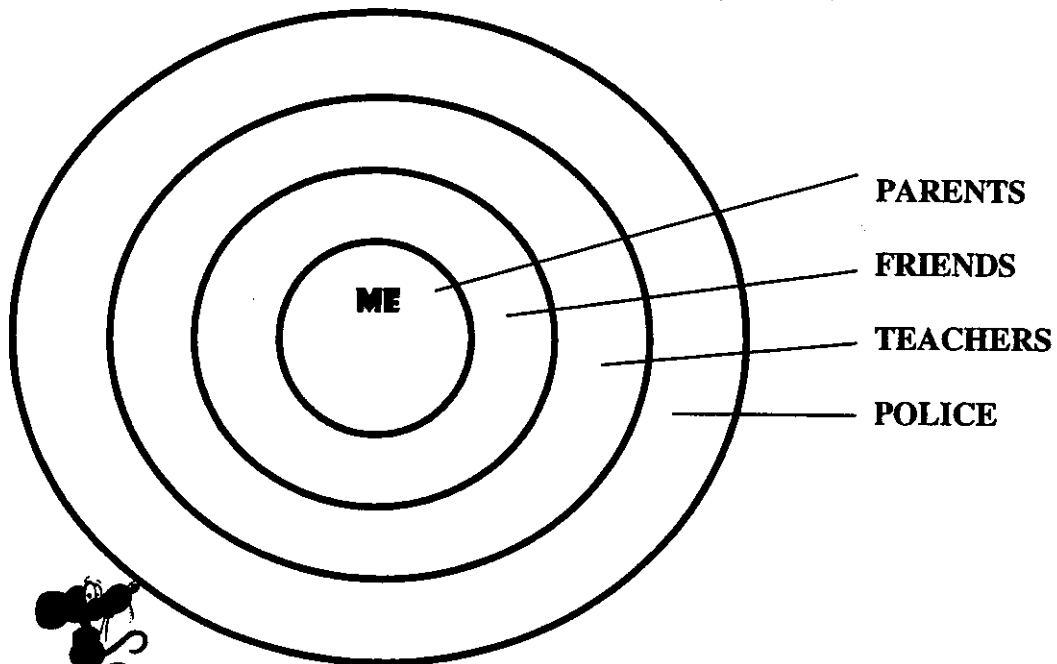## Role Play 4
Your Role: The Friend of someone who is bullying.
 Situation: You and your friend are playing basketball with a group of other students. You friend always picks on one of the other boys/girls on your team. He/she says the other girl/boy is useless and shouldn't be allowed to play. It is only a fun game at lunchtime and you can see that the constant negative talk is making the girl/boy play even worse.

HOME ACTIVITY: LESSON 3 UNIT 1
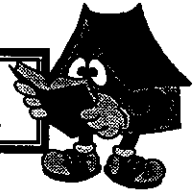
Ask your family to help you to make a support group for when you are not at school. Begin by filling in the wheel of people you trust. The wheel shows the levels of support from the people you are closest to (in the middle) to the people who can help you but are not close personally e.g. police.

PARENTS

FRIENDS

TEACHERS

POLICE

Ask your family to identify the people from your trust circle who would be best for your personal support group that you could talk to if you were being bullied.

UNIT 2

FEELING GOOD ABOUT MYSELF AND OTHERS

LESSON 1: THE BYSTANDER

LINKS To the Curriculum Framework

This activity contributes to the achievement of the Health and Physical Education Learning Area Outcomes from the Curriculum Framework by:

Knowledge and understandings:

- Understanding the role of the bystander in a bullying situation and how this person can affect the impact on a person being bullied.

Attitudes and values:

- Demonstrating acceptance of personal responsibility for tolerance and respect for others and a commitment to promote these values.

Self-management skills:

- Utilising a plan to help make informed decisions about what actions to take in a bullying situation.

Interpersonal skills:

- Practising communication skills as a strategy to ask for help or talk to participants involved in bullying situations.

PURPOSE

This activity will provide an opportunity for students to:
- Discuss the role of the bystander and the effect the bystander can have on a bullying situation.
- Demonstrate the use of an Action Plan to assertively address bullying situations from the role of a person being bullied or bystander.
- Develop empathy for people being bullied.

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PREPARATION

- Read the Background Notes at the back of this resource.
- Student's Friendly Schools Workbooks
- Video player
- Video "Sticks and Toby"
- Stop Think Talk poster from Unit 1
- Action Plan from Unit 1
- Situation cards 2.1 for Three Card Shuffle in the Friendly Schools kit. One set per group. See Teacher Sheet 4
- Copy of Home Activity Sheet for students

PROCEDURE

1. Ask students to identify the key people involved in a bullying situation as discussed in the previous unit. Person who bullies, Person being bullied, Bystander (refer to Unit 1).

2. Give a definition for each and display these for use later in the lesson.
   - A person who bullies – a person who feels the need to try to demonstrate his/her strength over another person.
   - A person who is being bullied
   - Bystander- A person who sees the bullying or knows that it is happening to someone else.

3. Show the video ' Sticks and Toby'. (Length of video 5 minutes).
   Sticks and Toby are two boys who are best friends. Toby gets picked on by some of the boys in the school swimming team because of his size. The same boys try to encourage Sticks to play with them and join the swimming team, but only if he leaves Toby out. Sticks must decide what to do and how to deal with the situation in the best way.

4. Students identify the key people involved in the bullying shown in the story. Person who bullies, Person being bullied, Bystander.

   Questions to consider:
   - How did the boys bully Toby?
   - How did Sticks react to the bullying of Toby?
   - How do you think Toby was feeling?

5. Discuss the role of Sticks as a bystander in this story.

   Questions to consider:
   - What did Sticks do to help his friend Toby?
   - Why did Sticks behave this way?

- What could Sticks have perhaps done or still do to help his friend Toby?
- What might have happened to Sticks if he had stood up for Toby?
- What message did Sticks give to the other boys by doing nothing and going to play with them?

6. Explain that there are different types of bystanders. Those who:
   - Watch what is going on and don't get involved.
   - Pretend not to see and ignore the situation.
   - Choose to get involved in the bullying.
   - Choose to get involved and stop the bullying.

7. Ask the students to consider why a bystander might choose not to get involved in a bullying situation.
   - *Afraid he might get hurt or bullied himself/herself.*
   - *Thinks the person being bullied would be better off if he/she worked out a solution himself/herself.*
   - *Doesn't realise how badly bullying affects the victim.*

   In small groups ask the students to answer the following questions:

   - In what sort of situations should the bystander do something?
   - What would be the best actions to take in this case? (Remind the students of the Support Group and how to ask for help).

8. Revise the 'Stop Think Talk' process from Unit 1.

9. Remind the students of the end of the 'Sticks and Toby' story. Sticks has a problem. Discuss the first stage of the process " STOP - What's Going On?" in relation to Sticks i.e.
   - *He has stopped.*
   - *He must now consider what is happening and how it feels.*

   Questions to consider:
   - How is Sticks feeling about what is happening?
   - How does Sticks feel about his friendship with Toby?
   - What does he want to happen to make the situation better?

10. Discuss the second stage. THINK – What Can I Do?
    Sticks now has to think. What is he going to do?
    Have them decide what would be the best action(s) Sticks could take.

11. Ask students in their groups to consider the following situation and answer the questions using The Stop Think Talk process.
    What if the next day they were playing together and the same boys came up and began pushing Toby around and telling Sticks that if he tried to stop them he would get hurt too?

12. Have the students decide as a group:
    - What do you think Sticks could do in this situation?
    - What might happen to Sticks if he tries to stop the bullying himself?
    - What would you do if the situation became too difficult to deal with?

13. Discuss the third stage in the Stop Think Talk process; Talk – Who should I talk to? Remind the students that there are times when a victim or a bystander may need to ask for help.
    - Who could Sticks talk to in this situation
      e.g Toby, the other boys, his family, his teacher, another friend etc?
    - What could Sticks say to the person/people you identified?

14. Three-Card Shuffle
    - Give each group a set of the three cards: (1) A set of situation cards; (2) character cards and (3) setting cards. **Situation Cards 2.1 in Friendly Schools kit.**
    - Ask the students not to look at the cards yet.
    - Ask each student to turn to **Activity Sheet 4** in their Student Workbook.
    - Each person in the group takes turns in choosing a situation card, a setting card and a character card. They then glue these cards onto Activity Sheet 4 in their Student Workbook.
    - The students then think about the scenario and using the 'Action Plan', 'I' Message and the 'Class support group sheet' to work through the steps on Activity Sheet 4.
    - The student who selected the cards then role-plays the 'Stop Think Talk' to show the way to handle the situation.
    - Students provide feedback on the role-play.

15. Ask each group to give feedback on how they found the Stop Think Talk process. How did the Support Group, Action Plan and 'I' Message help you to deal with the situations? How do you feel about dealing with real situations now?

THINKING LOG

At the completion of the lesson ask the students to turn to Thinking Log Activity 1 in their Student Workbook. Use the following questions for the students to think and reflect on the key issues covered in this lesson.

Describe a bullying situation that you have seen where you were the bystander.
- How did you feel about what was happening?
- What did you want to do?
- What did you do?
- What else could you have done to stop the situation – or help the person being bullied?

HOME ACTIVITY

At the completion of the lesson give each student a copy of the Home Activity Sheet to take home and work through with their family. Ask the students to return the sheet at a time prior to your next scheduled Friendly School lesson.

See Home Activity Sheet 2.1

Ask your family to help you to write on each brick things you could do to help other people feel good about themselves.

SITUATION CARDS 2.1

CARDS FOR THREE CARD SHUFFLE

SITUATION Someone is calling you horrible names almost every day.	SITUATION Someone hits or kicks you Where ever he/she sees you.
SITUATION A group of children threaten to hurt you if you don't give them your lunch money each morning.	SITUATION A group of children turn their backs on you and ignore you every time you try to talk to them.
SITUATION A child has been telling awful, untrue stories about you to turn your friends against you.	SITUATION A child keeps taking your pencils and breaking them in half, then giving them back while the teacher is not looking.
SITUATION An older child teases you all the time and says he/she will hurt you if you tell the teacher.	SITUATION A group of children have taken over an are at school that they say is only for them and you can't go there.

SITUATION CARDS 2.1

CARDS FOR THREE CARD SHUFFLE

Character	Character	Character
BYSTANDER	PERSON BEING BULLYIED	BYSTANDER
Character	Character	Character
BYSTANDER	PERSON BEING BULLYIED	BYSTANDER
Character	Character	Character
BYSTANDER	PERSON BEING BULLYIED	PERSON BEING BULLYIED
Character	Character	Character
BYSTANDER	PERSON BEING BULLYIED	PERSON BEING BULLYIED
Character	Character	Character
BYSTANDER	PERSON BEING BULLYIED	BYSTANDER

SITUATION CARDS 2.1

CARDS FOR THREE CARD SHUFFLE

Setting	Setting	Setting
PLAYGROUND	ON THE WAY HOME	IN THE CLASSROOM
DURING SPORT	ON THE WAY HOME	AT LIBRARY TIME
PLAYGROUND	ON THE WAY HOME	IN THE CLASSROOM
DURING SPORT	ON THE WAY HOME	AT LIBRARY TIME
PLAYGROUND	ON THE WAY HOME	IN THE CLASSROOM

THREE CARD SHUFFLE
WHAT

WHO

Character Card

Situation Card

WHERE

Setting Card

STOP: What is going on?

THINK: What can I do? Look at your Action Plan.

TALK: Who can I talk to? (Support Group)
What can I say? ('I' message)

10

HOME ACTIVITY: LESSON 1 UNIT 2

MY SELF ESTEEM BRICKS

We have been learning about caring for others as a bystander in Bullying situations. In this unit we will be building our own self-esteem and the self-esteem of others.

Ask your family to help you to write on each brick things that you could do to help other people feel good about themselves.

UNIT 2

FEELING GOOD ABOUT MYSELF AND OTHERS

LESSON 2: SELF-ESTEEM ; WHAT IS IT?

LINKS To the Curriculum Framework

This activity contributes to the achievement of the Health and Physical Education Learning Area Outcomes from the Curriculum Framework by:

Knowledge and understandings:

- Defining self-esteem and discussing how it can be affected by positive and negative situations in their lives.

Attitudes and values:

- Identifying the values associated with developing a positive self-esteem eg courage, enthusiasm, friendliness, honesty etc.

Self-management skills:

- Developing a plan for building and maintaining positive self-esteem.
- Utilising positive self-talk as a means of maintaining self-esteem.

Interpersonal skills:

- Helping others to build their own self-esteem

PURPOSE

This activity will provide an opportunity for students to:
- Define self-esteem and describe how it can be affected by events in their lives.
- Develop strategies to improve their self-esteem.
- Explore the use of positive self-talk as a means of developing and maintaining positive self-esteem.

PREPARATION

- Student Friendly Schools Student Workbooks
- A limp piece of celery or an old carrot
- Copy of 'Wilber's Diary'
- Butcher's Paper
- One small ball of plasticine for each child
- Photocopied sheet of bandaids for each child - Teacher Sheet 5
- Enough real bandaids for each child (optional)
- Stencil for box design - Stencil Sheet 1
- Copy of Home Activity Sheet for students

PROCEDURE

1. Discuss - What is Self-Esteem? Self-Esteem is how we feel about ourselves.
   Discuss - Why is Self-esteem important?

   Teachers Notes: *When we feel good about ourselves we can cope better with whatever comes along, for example, if you feel good about yourself, a negative comment isn't going to bother you as much.*
   Feeling good about yourself helps you to face what ever happens in your life and to try new things. When your self-esteem is high and you feel good about yourself you are better able to make decisions for yourself. You won't be worried about what other people might think or say and you will do what is right for you.

2. Body Talk
   Discuss with the students how our self-esteem can affect how we look and feel.
   Students brainstorm how a person may look when he/she has a low and a high self-esteem and doesn't feel good about him/her self?
   e.g. **Low**
   Limp celery - Droopy and miserable.
   Jiggling tea bag - Nervous and wriggly.
   Prickly echidna - Grumpy and angry.
   Frozen ice block - Scared and stiff.

   High
   Stand tall.
   Look relaxed.
   Look up, at people's eyes when speaking.
   Smile and look confident.

   Briefly discuss Body Talk or Body Language.

3. Self Talk

Introduce 'self-talk' and ask students to discuss what people with low self-esteem and high self-esteem might say about themselves?

- How would these people feel when they say these things. Arrange students into groups and ask them to use butcher's paper and write a chart.

Example:

- **Low**

  I feel miserable and I am useless.
  I feel worried and nobody likes me.
  I feel angry and I will never get in the team.
  I feel scared and everyone will laugh at me.

- **High**

  I feel nervous, but I know I'll be fine.
  I feel afraid, but I know I can handle this situation.
  I feel disappointed, but I know I will do better next time.
  I am worried, but I know that if I just be myself and be friendly I will make friends.

Teachers Notes: *People with high self-esteem might still have the same feelings of fear or worry, but they deal with these differently. When our self-talk is positive we convince ourselves we are able to deal with the situation. If our self-talk is negative we behave in a negative way and feel that we can't cope. Being strong and confident makes people who bully think twice about bullying you.*

4. Tell the students that you are going to read them 'Wilber's Diary' and as you read you will stop to ask them to do certain tasks. These will include making a model of the wolf and filling in a worksheet.

5. Ask the students to open their Student Workbooks to **Activity sheet 5** 'Self Talk - Wilber's Diary' and explain how, during the story they will record information on the sheet.

6. Give each student a small ball of play-dough or plasticine each. Give the students a short time to mould and re-mould their plasticine each time the teacher reads a day from Wilber's Diary to display how Wilber would be feeling and record on the activity sheet how he is feeling and behaving at that time.

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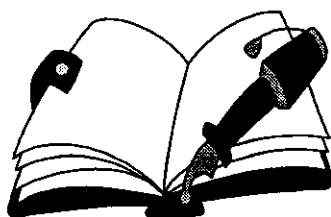
7. Read Monday from 'Wilber's Diary' and then Stop. Ask the students to use the plasticine to make a model of what they think Wilber from the Three Little Pigs would look like. Ask the students to think about what his body talk would be like on Monday. Ask the students to fill in the section labeled Monday on their activity sheet.
    - How did he feel?
    - What did he say? (Self talk)
    - What did he decide?
   Ask students to leave the advice box until the end of the story.

8. Continue to read each day in Wilber's diary, stopping to fill in the worksheet and to remould the plasticine Wilber. Wilber will begin to look droopy and maybe have some dents until by the end of the week he is quite flat.

9. At the end of the story ask the students to look at their sheet and plasticine model and ask them the following questions:
    - How was Wilber feeling at the start of the week?
    - How could we describe his self esteem at the beginning of the week?
    - How was he talking about himself at the beginning of the week?
    - How did Wilber feel by Friday?
    - How could we describe his self-esteem?
    - How was he talking about himself?
    - What caused the changes in his self-esteem?
    - How could we help Wilber to feel better about himself? (Now have students write their advice onto the activity sheet)

10. Look at the flat and dented plasticine Wilber. *Explain that your self-image is like a piece of plasticine. You spend time building yourself up by doing good things and being a nice person and trying your best. Sometimes, however things happen that might put a dent in you or even squash you flat.*

11. Ask the students to identify situations that might cause someone to get a 'dent or to feel flat'.
   Discuss that during these times we are often not feeling so good about ourselves and our confidence is low. It is during these times that you might be a target for a person who bullies. If we are feeling sad and 'down' we could be more easily upset. If we are feeling angry and grumpy we would also be easy to upset. People who bully often bully people to get a reaction. If they upset you and you show it they will probably try to upset you again.

12. Explain to the students that if we fall over and hurt ourselves we sometimes need a first aid repair kit to help to make us better. We might use bandaids and some antiseptic cream to help make the graze heal quicker and to feel better.

13. Self-Esteem Repair Kit
    Explain that each student is going to make a 'self-esteem repair kit' for those times
    when they might feel bad and have low self-esteem. The kit will help to remind them
    to use positive self-talk to take away the pain and repair their self-esteem.

14. Give students the photocopied bandaids **Teachers Sheet 5** and if you have
    them, some real ones (fluorescent strips are great). Ask the students to think
    about positive statements that would help them in the following situations.
    - You are worried about what other children might think.
    - You think people will laugh at you.
    - You are frightened of what might happen.
    - You are worried other children won't like you.
    - You are worried you might fail at something.

15. Ask students to suggest other situations that might cause someone their age
    concern. Ask the students to identify positive actions to make themselves feel
    better.
    e.g. Self-talk, doing something they really enjoy.
    Ask the students to write 'feel good' statements on their bandaids that they
    think would be helpful to maintain/improve their own self-esteem.

16. Ask students to write and include in their kit a positive bandaid for another
    child in the class.

17. Making the repair kit. Give the students instructions for making their repair kit:
    Cut out the box design **Stencil Sheet 1** and construct as demonstrated by the
    teacher.
    Explain the Home Activity and that the boxes will be covered and varnished
    for durability when they bring enough pictures to cover the box.

18. Ask the students to think about other items they might put in the kit to make
    them feel better about themselves.

EXTENSION

Ask the students to think of a situation for Saturday and write about how Wilber
successfully improved his self-esteem. There is a space provided on the sheet
'Self-Talk – Wilber's Diary'.

THINKING LOG

At the completion of the lesson ask the students to turn to Thinking Log Activity 1 in their Student Workbook. Use the following questions for the students to think and reflect on the key issues covered in this lesson.

Think of a time when they have felt bad about themselves and write about it.
- What did it feel like?
- Was your self-talk positive or negative? What did you say to yourself?
- What might you do differently now if the same thing happened?
- What have you learned about how to improve your own self-esteem?

HOME ACTIVITY

At the completion of the lesson give each student a copy of the Home Activity Sheet to take home and work through with their family. Ask the students to return the sheet at a time prior to your next scheduled Friendly Schools lesson.

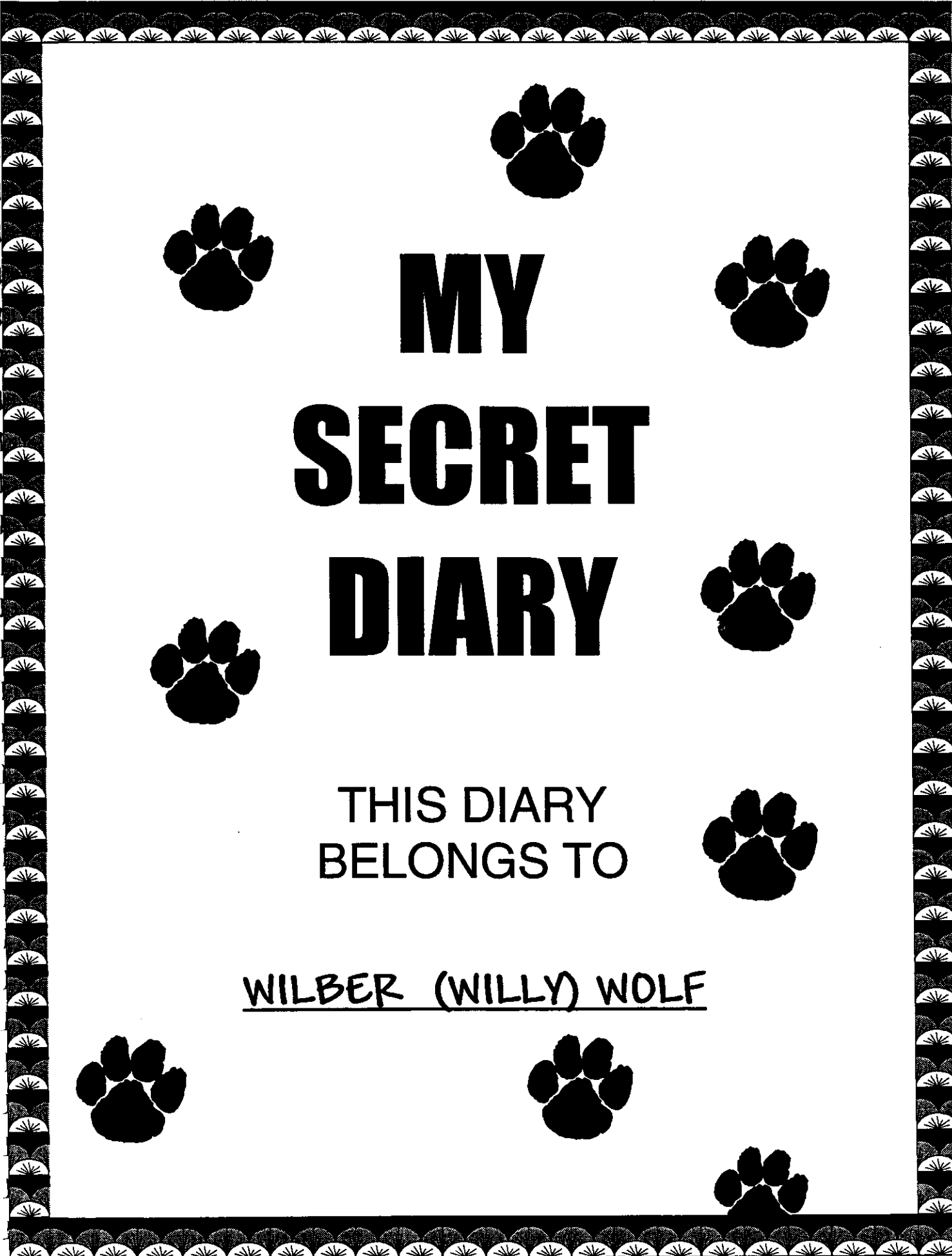## See Home Activity Sheet 2.2
Part 1
- Ask your parents to help you to fill out the self-esteem bricks on your personal strength sheet.

Part 2
- Collect pictures of things that make you feel good about yourself or you think tell us about you.
- Collect enough to completely cover the box top and bottom and to overlap each other and bring them to school.
- You may also collect small items for your self-esteem repair kit, which would help you to feel better if your self-esteem was low.

MY SECRET DIARY

THIS DIARY BELONGS TO

WILBER (WILLY) WOLF

MONDAY 1st MAY

Dear Diary,
It was my Birthday today and Mum and Dad put on the best party. All of my friend's were there and we had a great big cake and I felt really special. I am so lucky. I have a great family, I have great friends and I feel loved and happy.
I looked in the mirror tonight and I said to myself " You have a cool life because you are one cool wolf"

    I felt great!

STOP

TUESDAY 2nd MAY

Dear Diary,
Today I did a good deed and it felt great.
When I got up this morning I said to myself "Today is going to be a great day" and it was.
I had no milk for breakfast so I thought " What a good excuse to get out for an early walk in fresh air" so off I went through the forest to the store.

Along the way I saw some beautiful flowers of all different colours. It was a glorious morning and I felt fit and fantastic. Just then I heard a soft cry and looked towards the sound. There was a little girl dressed in a red jacket with a hood, sitting under a tree weeping.

Not wanting to startle the little girl I quickly picked some colourful flowers and called out " hello, my name is Wilbur or you can call me Willy if you like, can I help you".

She looked up in fright, but when I held out the flowers she burst into tears again and said " Please don't hurt me, I'm lost. I can't find my way to Grandma's House. It's the first time I have tried it alone".

I felt so sorry for the little girl so I took her by the hand and asked her to describe her Grandmother's house and what she could remember about her trips before. I soon worked out where she had taken the wrong turn and walked her all the way to her Grandmother's front door. The little girl seemed very concerned that her Grandmother would be angry with her for getting herself lost so I tip toed off back into the forest so Grandma would think the little girl had arrived on her own.

Gee, I feel good. I love doing something for someone else.

I am such a caring guy.

STOP

WEDNESDAY 3rd MAY

Dear Diary,

What a horrible day. I can't believe this is happening to me. Yesterday I was a kind hearted, generous, good guy; today I am a rotten Granny snatching scoundrel.

Would you believe that I was accused of mugging the Grandmother and trying to snatch the kid.

I had wondered at the time why Grandma was taking so long to open the door after I dropped that little Kid in the red hood off yesterday, but of course I had to leave.

Well apparently a while after I had disappeared around the back of the house, the kid opened the door and let herself in to find who she thought was Grandma in bed. It turns out it wasn't Grandma, she was tied up in the cupboard, and in the bed was some crafty old wolf all dressed up in Grandma's gear.

That old Wolf would have had the kid for breakfast if it hadn't been for the local woodcutter who chased him away wielding his axe. Poor little girl got quite a fright, but I still can't believe she thought it was me. For a start I wouldn't be seen dead in Granny's nightie and I eat weetbix for breakfast not little girls, that's why I needed to go out for milk in the first place.

I feel lousy. Everyone thinks I'm a rotten kid-eating wolf. I got blamed for something I didn't do.

I am such a stupid 'fur-bag'.

Well I guess I just have to get used to it. Wolves are meant to be bad in stories, not good. My friends say I should go and explain to Grandma that it wasn't me, but what is the point she won't believe me.

STOP

THURSDAY 4th MAY

Dear Diary

I feel sick. I am such a loser.

I turned up at the inter-forest cricket match today to play for my beloved team 'Fairytale Forest.' We were playing Goblin and his mates from 'The Magical Woods.' We were fielding first and were going along just nicely. We had claimed three wickets and really needed to get Elf out before he notched up too many more runs. He was bouncing about wildly with his bat swing in all directions as The Gingerbread man bowled down a bouncer. I don't know whether it was all that bouncing that put me off, but when Elf hit that ball up in the air it should have been an easy catch and I completely missed it. It was so embarrassing I just lost sight of it as it came down. I had no idea where it was until "thwack"

It hit me right on the top of my head and down I went, out like Wee Willy Wonka's lamp.

When I woke up everyone was really kind, Miss Muffy was holding an ice pack on the lump on my head and the rest of the team were all looking on with concerned faces.

Rumpled Skin seemed to think I should rest and let one our seven reserves play. But I knew the dwarves were put off by Heeyor's the Donkey's style of bowling and we had to win to make the finals. Everyone else did a fair job in the batting. I was the final batsman and we had only to make three runs to win the game.

Heeyore backed up to the pitch in his unusual style and swung the ball around with his tail. He was known as their tail-end bowler and had a tricky little spin on the ball.

I saw it coming and I had it all lined up. I lifted my bat and "Swoosh"

I swung with a very nice follow through. I looked up to watch the ball sail over the boundary but I couldn't see it anywhere.

I remember Heeyor's cry "HOWSAT" and I looked down in horror at the wickets.

The ball had gone straight through, I was out for a Daffy Duck and Fairytale Forest had lost the match.

I HAD LOST THE MATCH.

The team will never speak to me again and I am never playing cricket again, ever.   LOSER   LOSER   LOSER

STOP

FRIDAY 5th MAY

Dear Diary

I have no friends, no one likes me. Everyone thinks I am a Wicked Wolf and a Loser.

After yesterday's game I went straight home. I couldn't face the rest of the team. They would hate me.

I sat at home all day on my own and no one cared how I felt.

 I was supposed to be going to Baby Bear's Birthday Party this afternoon with my friends, but they wouldn't have wanted me there. None of my friends came to my house to get me for the party. We were all meant to just meet there but they would have known how bad I felt so why didn't they come and get me. No one likes me any more. I'm a loser.

I AM NEVER GOING OUT AGAIN.

HELP WILBER TO FEEL BETTER ABOUT HIMSELF

SITUATION	How did this situation make Wilber feel?	What self-talk did he use?	How did his self-talk make him feel?	If you were Wilber's friend what could you do and say to help him?
MONDAY *Wilber's Birthday*				
TUESDAY				
WEDNESDAY				

13

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SITUATION	How did this situation make Wilber feel?	What self-talk did he use?	How did his self-talk make him feel?	If you were Wilber's friend what could you do and say to help him?
THURSDAY				
FRIDAY				
SATURDAY				

BANDAIDS
For my
Self Esteem Kit

I feel great, I feel great, I feel!
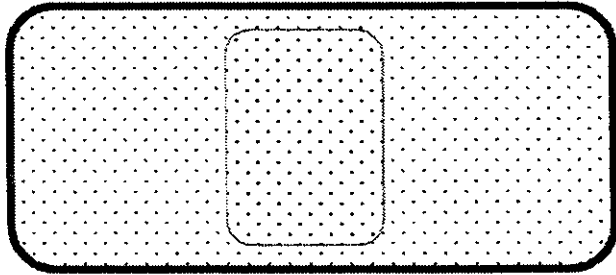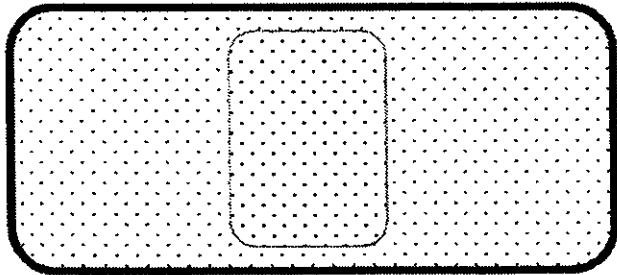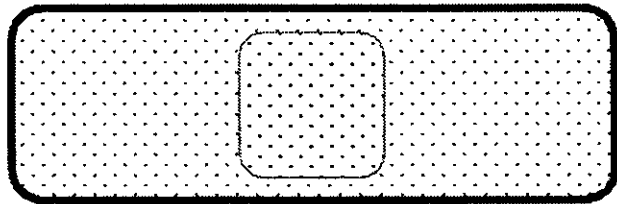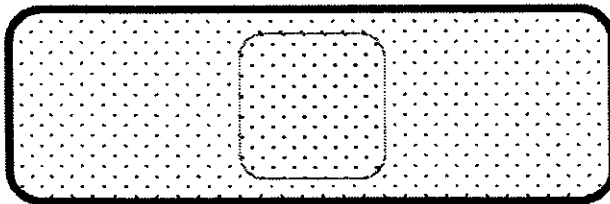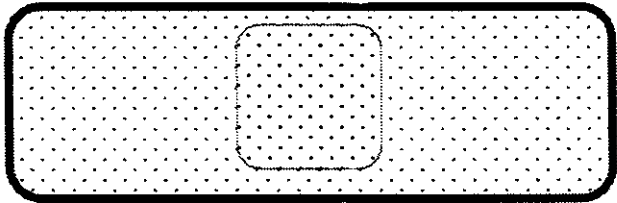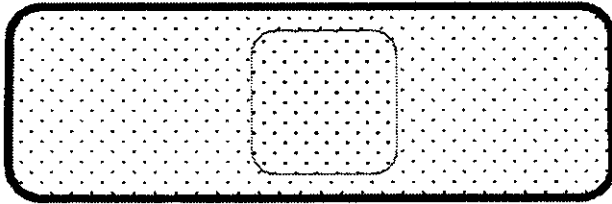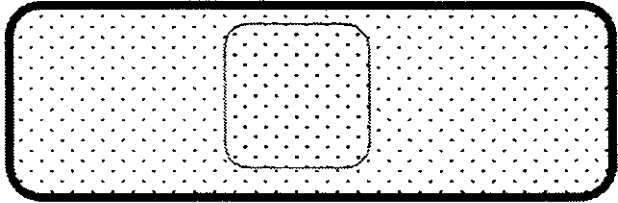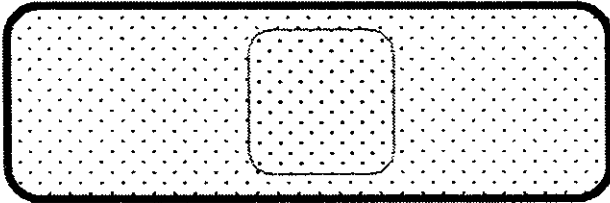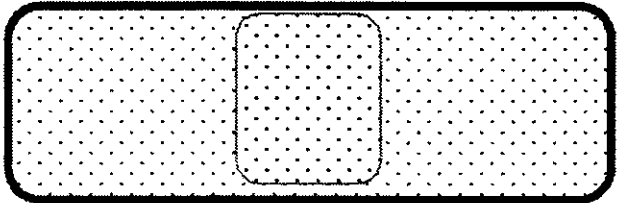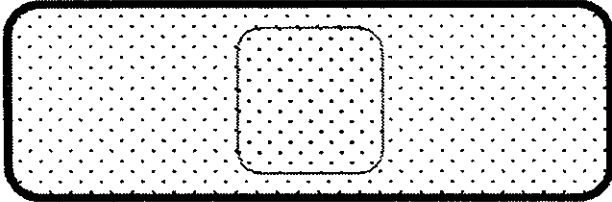
My SELF-ESTEEM

IS HOW I FEEL ABOUT MYSELF

PART 1

1. Ask your parents to help you to fill out the self-esteem bricks on your personal strength sheet.

   a. Things you are good at.
   b. Things you have achieved.
   c. Things about you that other people like.

KIND

FUN
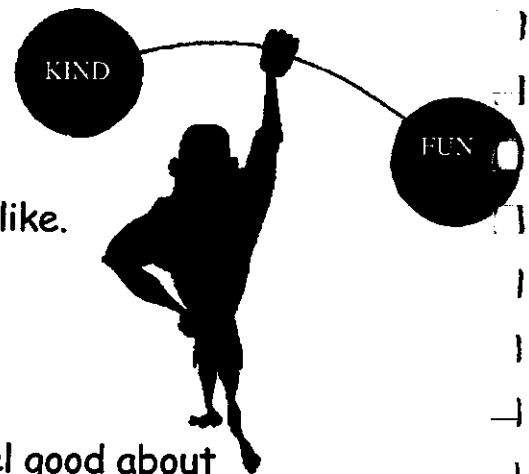
PART 2

2. Collect pictures of things that make you feel good about yourself or you think tell us about you.
   e.g. favourite
   - colours
   - words
   - animals
   - games etc

3. Collect enough to completely cover the box top and bottom and to overlap each other and bring them to school.

4. Try to collect small items for your self-esteem repair kit, which would help you to feel better if your self-esteem was low.
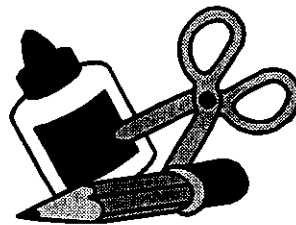
MY SELF ESTEEM BRICKS

Write on the bricks your personal strengths (things that you are good at for example being friendly and kind to others).

UNIT 2
FEELING GOOD ABOUT MYSELF AND OTHERS

LESSON 3: SELF-ESTEEM CHARACTER STUDY

LINKS To the Curriculum Framework

This activity contributes to the achievement of the Health and Physical Education Learning Area Outcomes from the Curriculum Framework by:

Knowledge and understandings:

- Identifying the role of the bystander, person being bullied, and the person who bullies and what these people can do to help achieve a positive outcome in resolving bullying situations.

Attitudes and values:

- Demonstrating personal responsibility for helping themselves and others.

Self-management skills:

- Identifying values consistent with the prevention of negative social behaviours leading to bullying.

Interpersonal skills:

- Utilising positive and assertive communication with and to support others to overcome negative social behaviours.

PURPOSE

This activity will provide an opportunity for students to:
- Understand the role of everyone involved in a bullying situation and the effect that a high self-esteem can have to prevent or reduce the situation's harm.
- Understand the role of the bystander and the choices he/she has to respond in the bullying situation.

PREPARATION

- Students' Friendly Schools Workbooks
- Story 'Big Al and the Three Little Pigs' Friendly Schools kit
- Copy Teacher Sheet 6 onto A3 paper or card
- Copy of Home Activity Sheet for Students
- **It is recommended that the story 'Big Al and the Three Little Pigs' be read as a class story prior to the lesson as it takes at approximately 20 minutes to read.**

PROCEDURE

1. Read the "Big Al and the Three Little Pigs" story.
   Discuss the story.
   - Why did the wolf start to bully the Three Little Pigs?
   - What bullying behaviours did he use?
   - Why was he able to get away with bullying the first pig?
   - Why was he able to get away with bullying the second pig?
   - Why did he have problems when he tried bullying the third little pig?

2. Revise self-esteem and positive messages we give to other people when we have high self esteem and feel good about ourselves.

3. Introduce the three different ways of dealing with bullying situations.
   - The Aggro way – Too hard.
   - The Weak way - Too soft.
   - The Cool way - Just right.

4. Display the charts made from **Teacher Sheet 6**. Teachers should role play each behaviour and ask the students to identify his/her body talk and self-talk. Discuss the possible consequences of each behaviour and how other people might feel about them.

5. Remind the children of the "Big Al and the Three Little Pigs" story.

6. Ask the students to identify what role each of the characters in the story played.
   a. *Big Al – The character who bullied*
   b. *The first little pig: Softy – Character being bullied (He was too soft)*
   c. *The second little pig: Prickly – Character being bullied (He was too hard)*
   d. *The third little pig: Positive– The wolf tried to bully but couldn't (He was just right)*
   e. *Wilber – Bystander who didn't agree with what Big Al was doing but didn't get involved.*

f. *Ralph – Bystander who went along with what Big Al was doing but didn't get involved.*

g. *Genevieve – Bystander who supported Big Al and helped him to bully.*

7. Give each of the six groups one character from the story.

8. Ask each student to use the framework on **Activity Sheet 6** in their Student Workbook to develop a character study of their allocated character using the following questions:

   a. *Who is the character?*   *E.g. Big Al*

   b. *What was the character's role?*   *E.g. The character who bullied*

   c. *What was this character doing?*   *E.g. Picking on the three little pigs.*

   d. *Why do you think this character behaved this way?*

                            E.g. Because: *He was unhappy.*
                                             He was jealous.
                                             He was angry.
                                             He was trying to get attention.

   e. *What sort of behaviour do you think he used, cool, aggro or weak? Give examples of the behaviour.*

   f. *How would you describe this character's self-esteem? Why?*

   g. *What advice would you give this character? E.g. Action plan, 'I' talk, support group.*

9. Ask each group to share their individual information to make a group character study and then have them report back to the class, information about their allocated character.

10. Ask the students in their groups to discuss how each character felt about themselves. Students discuss what each character could do to enhance his/her self-esteem.

11. Ask the class to consider the role of the bystander. Discuss their roles in this story.
    - Do you think the bystanders made the bullying worse or better by doing nothing? Why?
    - What support did the bystanders show for what Big Al was doing?
    - How do you think the pigs being bullied would have felt about the Bystanders?

12. Discuss bystanders in real life situations e.g. at your school.
- What are the choices of bystanders in bullying situations?
- What are some of the reasons the Bystanders do not want to get involved?
- What are some of the ways a bystander could help without getting hurt?
- What could a bystander do to help to improve the self-esteem of others involved in the bullying situation?
- bystanders need to have good self-esteem also. How would this help in their decision making about what to do to help?

13. Write an ending for the story of Big Al and the Three Little Pigs that shows a 'Cool' solution.

THINKING LOG

At the completion of the lesson ask the students to turn to Thinking Log Activity 1 in their Student Workbook. Use the following questions for the students to think and reflect on the key issues covered in this lesson.

Ask the students to think about a situation where they have been a bystander in a bullying situation or to imagine a situation. Have them describe the situation and consider the following.
- What would you do differently now?
- How would you deal with the situation now?
- How would you feel about your role as a bystander or as a part of this situation?
- What would you actually say?

HOME ACTIVITY

At the completion of the lesson give each student a copy of the Home Activity Sheet to take home and work through with their family. Ask the students to return the sheet at a time prior to your next scheduled Friendly School lesson.
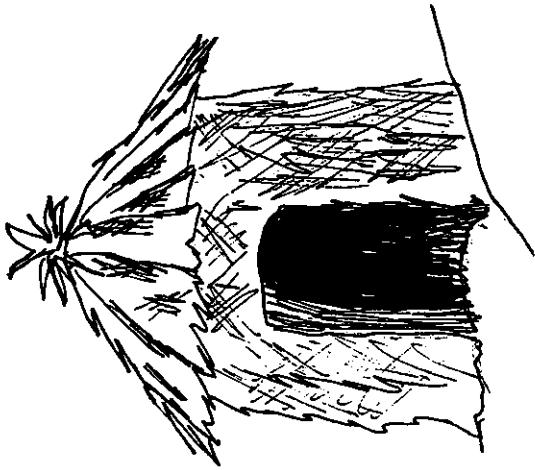
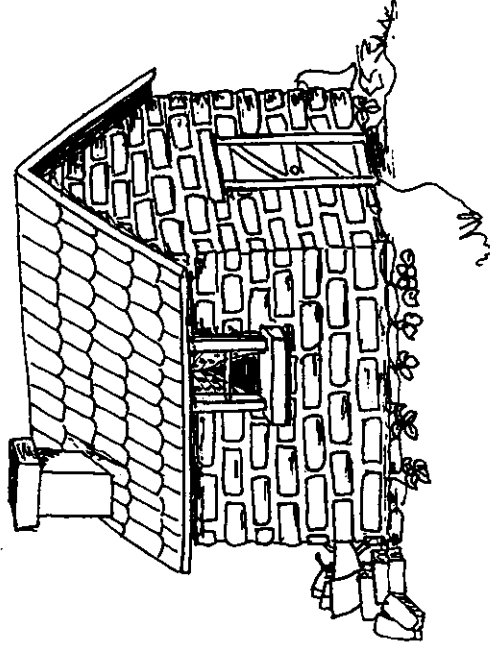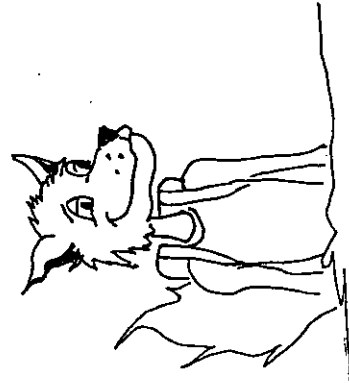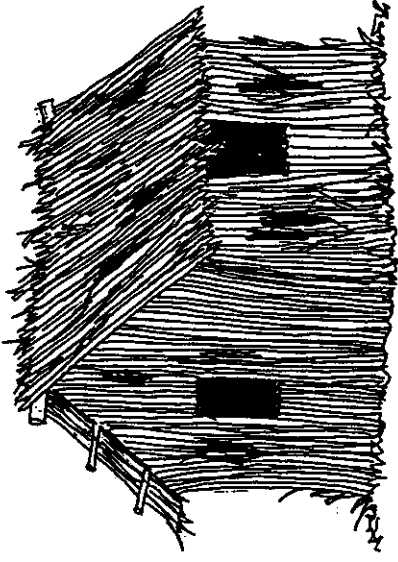See **Home Activity Sheet 2.3**

Part 1
Ask your parents about situations where they have been bystanders. Discuss the actions they took.
Look at these scenarios and decide together what would be the best action in each situation.

BIG AL
AND THE
THREE
LITTLE PIGS

Once upon a time there was a wolf called Wilber who was sent to stay with his relatives for the holidays.
Now Wilber was a kind and gentle wolf, but had been through some bad experiences over the past few weeks. His parents thought the change of forest would do him good and he might get back some of his confidence and self-esteem.

Wilber's cousin was called Alfred and Wilber had not seen him since they were just young cubs, rolling together in the grass at a family get together. They were the same age and had been about the same size then and Wilber had fond memories of their times together.

When Wilber arrived, his Aunty and Uncle greeted him happily and Wilber felt really welcome, but Alfred was no-where to be seen.
Wilber followed his Aunty upstairs to Alfred's bedroom. Wilber was to share this room with his cousin during his stay. After Aunty had gone down stairs Wilber had a look around the room. Alfred was obviously good at sport because he had a shelf full of trophies, mostly for basketball and football. He even had a basketball signed by the Beanstalk Giants. As Wilber lifted up the basketball for a closer look he heard the door

slam loudly behind him. "What do ya think your doin' with my basketball?" snapped a gruff voice. Wilber spun around to find Alfred looking back at him. Only this wasn't the friendly, fun and games Alfred he remembered.
" Alfred," stammered Wilber "you startled me."

"Oh Alfred" mimicked Alfred. "You startled me" he sniggered. "The name's not Alfred, It's Big Al and I didn't startle you, I scared the pants of you. Look at you, your knees are shaking, you wimp. I reckon we're going to have to toughen you up a bit while you're here in my forest. Come on."

With that Big Al was off out the door and down the stairs. Wilber stood stunned for a moment, and then a bellow came from the bottom of the stairs, "Move your tail Willy". Wilber ran down the stairs and followed cousin Al out the front door.

Wilber followed Al down the road. As he went, he noticed that Al had in fact become 'Big Al'. He had broad shoulders and carried himself with a confident stride as though he owned the road. Wilber scuttled along behind him trying to keep up but Al did not even look back.

When they came to a cross road Al stopped and turned to Wilber and said, "You are going to love this" and pointing to a small house up on the hill he sniggered "See that house, well that belongs to Mrs Pig and she has these three silly sons. Last week those three pigs moved out of home. Thought they were smart enough to look after themselves in this big wide world," he explained. "The first little pig to move out was Softy. He is so weak and wishy washy he made his house out of straw" Big Al laughed. "When we pick on him he cries, what a sissy.
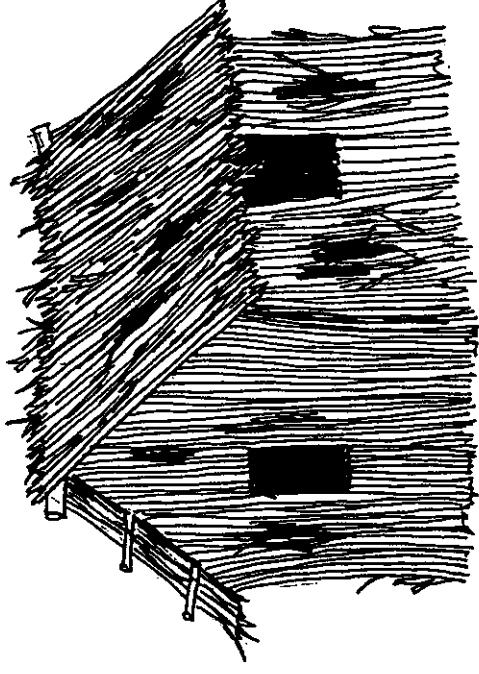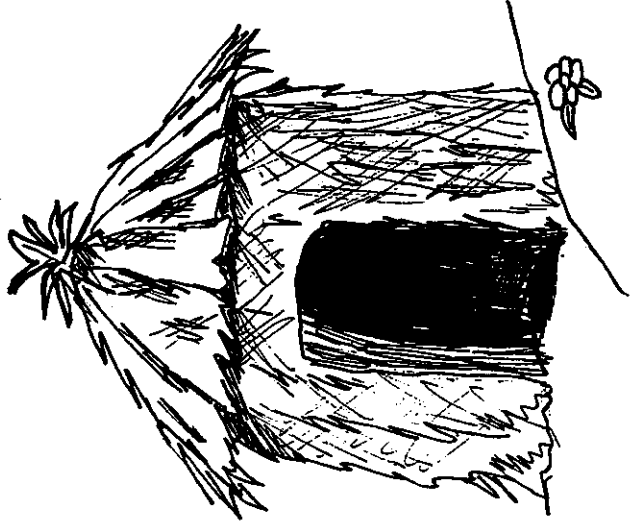
" The next little pig to go was Prickly. We love stirring her up, she gets so snappy. We just tease her to watch her get angry. Works every time." He said smiling a wicked smile. " She built her house

out of sticks to suit her prickly personality" laughed Al.

"The third little pig is called Positive," continued Big Al, "What a stupid name. I have heard he has built a house out of bricks and it took him so long he has only just finished. Who could be bothered?"
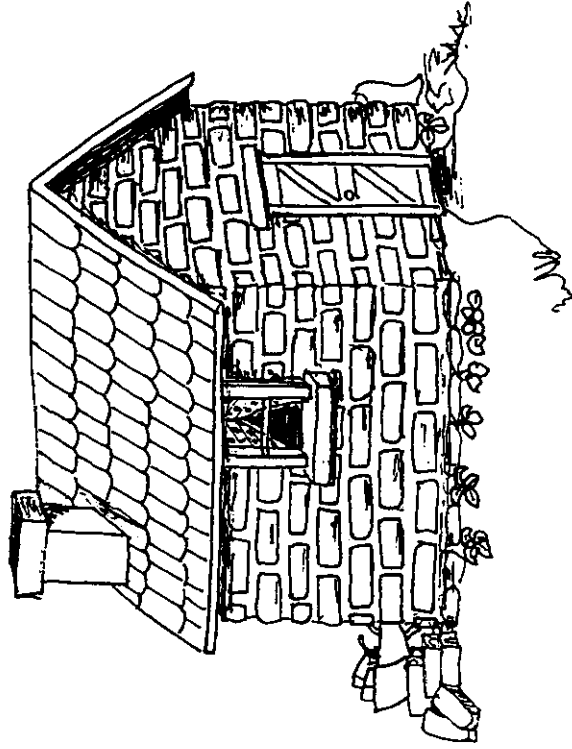
He never seems to be worried about us teasing him. But I haven't finished with him yet. In fact you have come just in time for the show," said Al as he spun around to look at Wilber. Wilber had a feeling he shouldn't ask, but he did anyway, "What do you mean, what are you going to do?" he asked quietly.

"You just wait and see," said Al poking Wilber painfully in the chest "but first I am going to introduce you to my gang" and with that he was off down the path again dragging Wilber by the sleeve.

Soon they reached a small grassy hill and Wilber could see that under the big tree on the hilltop lay two wolves about the same age as himself. Wilber felt shy and hoped they would be friendly.

Big Al bowled up to the tree and flopped down in the shade. The other wolves jumped up nervously to make a space for him.

"Wilber, meet my mates, Ralph and Genevieve. They reckon I'm the greatest and the toughest wolf to ever walk this forest, don't you guys?" It wasn't really a question. Big Al was telling them what they thought and Wilber noticed that they seemed to be too nervous to do anything but agree.

Wilber felt sad that his cousin seemed to have changed so much. He had once been a nice young cub, but it now seemed he had turned into a bully. However, Wilber thought that he should give Al a chance. He had only just met him again after a very long time after all.

"So how are my spies going?" asked Big Al as he peered around the tree and over the top of the hill. Are those stupid little Pigs settled into their new homes and ready for my big surprise yet?"

"Well, Willy my boy, now is your chance to see the hero in action" bragged Big Al as he lay looking down at the three peaceful little houses below.

Wilber climbed up further to have a look over the hill. In the grassy gully ran a little stream and built along the edge of the bubbling stream were three little houses. Wilber knew straight away who the little houses belonged to.

The first house was made out of thatched straw. It looked neat and comfortable but Wilber couldn't help thinking that the little pig that had made it might be too much of a softy for someone like Big Al. The second house was a mass of sticks, it looked like a tangled mess, with bits poking out in all directions and Wilber could see that this little pig was going to be an easy target for Al to tease.

Wilber looked at the third little house. It was made of bricks and had obviously been carefully designed and built. The House looked strong and at the same time friendly with its neat little garden and bright yellow door. Wilber couldn't help being a bit curious about the little pig that had built this house.

"What are you going to do?" asked Wilber nervously. You're not going to do something silly are you?

"Silly, Silly," Snapped Big Al " what I am going to do is not silly, it's tough and brave and I know you wouldn't have the nerve to do it."

Big Al stood up and announced "I am going to go down there and blow down those ridiculous houses and chase those feeble little pigs all the way home to their Mummy's house"

Wilber just stared at Big Al, he couldn't think of one reason why someone would want to do such a horrible thing to someone else. Without thinking he shouted at Big Al " You can't do that"

There was silence and the other wolves looked at each other nervously. Big Al turned slowly and walked over to Wilber grabbing his collar into his large fist.

Wilber decided to follow along and see what was about to happen. After all he wasn't involved he was just watching.

Big Al decided to pick on poor Softy Pig first. He marched up to the door of the little straw house and he sung out in a sweet voice " Little pig Little Pig let me and my mates come in and have a party in your house"
Softy Pig's voice trembled said "Please be nice Al"
"You're a little sissy and I'm going to blow down your house," mocked Al.
Inside Softy Pig began to cry.
Genevieve shouted " Oh look he's crying, blow his house down Al"
Big Al let out a horrible howl and yelled, " Well I'll huff and I'll puff and I'll blow your wishy, washy, weak little house down because you can't stop me, you're too weak" and he did.

Wilber couldn't believe what he was seeing, straw blew everywhere, and the house didn't stand a chance. Al's nasty teasing was too much for Softy and too much for his little straw house.
Softy was left huddled in the middle of a large pile of straw with his trotters over his eyes. Wilber held his breath as Big Al strolled over to him and stood above the trembling little pig.

" What did you say, Willy boy" he whispered into Wilber's pale face. Wilber could feel his whisker's twitching and knew that he had to make a decision. He could stand up to Al now or he could keep quiet and go along with Al's plan to bully the pigs.

Big Al's yellow eyes glinted and his hot breath fanned across Wilber's nose and something gave way inside as Wilber whimpered "Nothing, I didn't say anything".
" Come on, we don't want Wilber around anyway. Let's leave him behind" snapped Al to his mates.
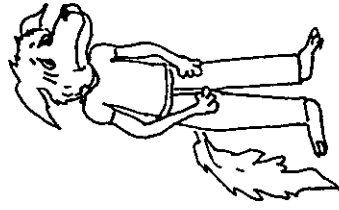
Wilber fell in a crumpled heap as Big Al strode off down the hill with the other two wolves scampering behind. It was easy to see now why Big Al had to speak for them; they were only with him because they were scared of him. Big Al was just a big Bully but this did not make Wilber feel any better about not standing up to him, he just didn't know how.

Wilber glanced at Ralph and he gave a nervous laugh, but didn't look like he thought it was very funny. "Well come on gang the fun has only just begun" sprouted Big Al, "wait until you see how old Prickly Pig reacts, man he is hysterical". Genevieve rushed to keep up with Big Al and the others trailed along behind.

Wilber was beginning to feel a little ill and he knew it wasn't something he had eaten. He was feeling guilty for not doing something to help the little pigs. But what could he do, he was no match for Big Al. So he followed along hoping that maybe something might happen to sort the whole mess out.

They soon came upon the little stick house. As they got up close Wilber could see that it was even more spindly than it had looked from the top of the hill. It had pieces sticking out everywhere and the sharp points were obviously meant to protect the house and the little pig but there were holes all over the house.

Inside the two pigs huddled, Softy crying and Prickly muttering words Wilber could not quite make out. Big Al knocked on the door and yell out " Hey Prickly Pants let us into you stupid little stick house so we can make some mess."

Wilber thought to himself that if it looked like Big Al was going to hurt the poor little pig then he might be forced to do something, although he didn't quite know what. However, Al was clever, he knew not to physically hurt the little pigs or they might have to tell what happened, so he bent down and lifted one trotter from the pigs eye and hissed in his ear," I'm going to eat you up!"
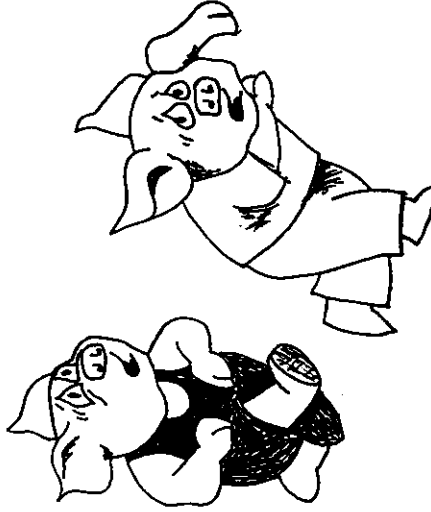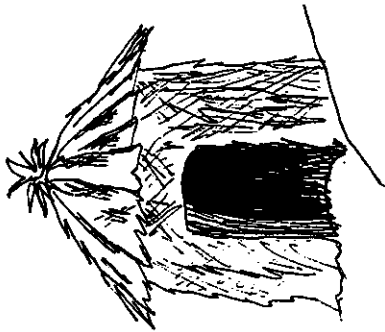
This sent the little pig scuttling off down the road squealing all the way to his sister's little stick house.
Big Al roared with laughter "Look at that stupid little pig, isn't that the funniest thing you have ever seen."

Prickly wasn't shy and she bellowed back " Big Al you get your carcass off my front mat or I'll come out there and pluck your whiskers one by one."

"Check her out," sniggered Big Al to his mates Ralph and Genevieve, who Wilber noticed were getting awfully sweaty round the collar. "I'll show her who's boss, that little porker couldn't even reach my whiskers." Genevieve backed him up saying "Yeah, you go get her Al."

Big Al sang out in a sickly sweet voice, " Well little piggies I'm now going to huff and puff and all that stuff in the book and I'm going to blow you and your stupid house into tomorrow land. And he did."
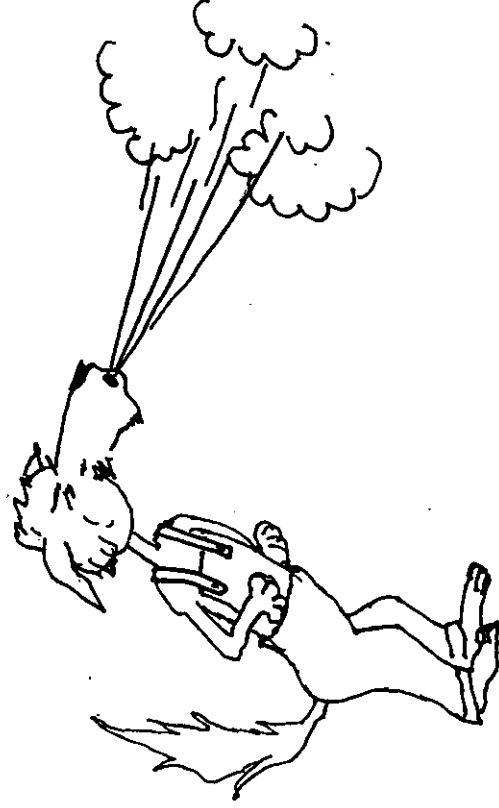
The two pigs tumbled down the gully in a tangle of sticks, Softy whimpering and Prickly letting go with abuse that made Wilber's ears curl.

Wilber was starting to see why Big Al had chosen these poor pigs to pick on. They didn't stand a chance and Big Al felt so powerful being able to push them around. Wilber felt sad and even more guilty. But what could he do?

Wilber watched as the two pigs ran for safety to the little brick house and noticed with interest as the bright yellow door opened. The third little pig could see Big Al and his gang heading towards his house but he did not fuss.

He greeted his brother and sister, slowing their rush to get through the door. Then to Wilber's surprise he waved to Big Al and the approaching group. He then calmly went inside and closed the little yellow door.

Wilber set off towards the little brick house feeling a little braver and indeed very interested in what would happen next.

By the time Wilber arrived Big Al had set up quite a hullabaloo. But there didn't seem to be any response from within the little brick house. Big Al was now banging on the door and bellowing about huffing and puffing and all his usual routine but still there was no response.

Wilber quietly crept up to a window, which was framed, on the inside by cheerful red and white checked curtains. He peeped through the daisies in the window box expecting to see the three little pigs huddled together, terrified of Big Al.

Instead Wilber looked straight into the smiling face of a Positive pig who was standing at the sink under the window calmly doing his dishes. He even had the cheek to wink at Wilber. Wilber on the other hand got such a fright he fell flat on his back in the vegetable patch.

Meanwhile, Big Al had been through all his tricks. He had tried calling Positive horrible names, he had tried teasing him, he had tried threatening to hurt him, and he even threatened to turn his friends against him. Nothing seemed to worry that little pig.
Big Al was furious and very aware that he was looking foolish in front of the other wolves. He roared through the key hole, " That's it you guys,

you are a 'gonna', no more chances, this house is coming down. I'm not even going to give you the huff and puff routine I'm just going to blow you away."

Well the tension was immense as Wilber picked himself out of the carrot patch; they had to be terrified now. Wilber popped his head back up to the window to sneak a peek inside. Positive Pig was having a tea party. He had spread a lovely floral cloth over the table, made a large pot of tea, served sponge cake and was just putting the final touches to a small vase of daisies for the table at which sat Softy and Prickly about to take tea. Softy and Prickly looked a little distracted by the hullabaloo going on outside but Positive wasn't phased a bit as he calmly sat in his arm chair.
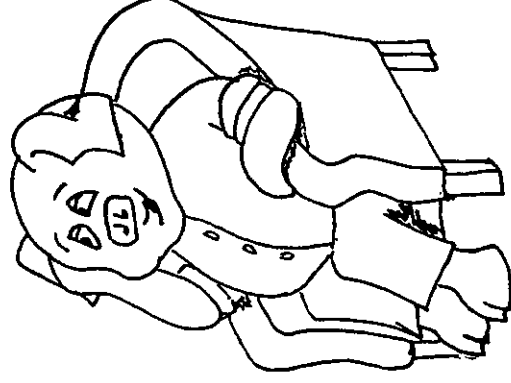
Wilber was starting to like this little pig and he had never even met him. He had a certain way about him, he looked friendly but strong just like his little brick house.

Meanwhile, Big Al had launched into some serious huffing and puffing around the front but the house stood firm, it was almost as though it was ignoring Al just like Positive Pig was doing inside.

Wilber looked on with interest, he was beginning to understand the situation.

Big Al was fast losing face in front of the other wolves and decided to take a more desperate approach to the whole situation. He began climbing up the ladder the little pig had put on the wall for his climbing rose. He was heading for the chimney with a look of sheer determination on his face.
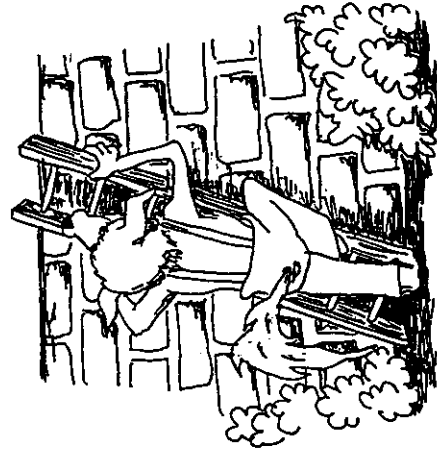
Now Wilber was watching through the window and he could see that Positive pig could hear the thumping and scratching as Al clambered up the side and it was clear that even he was beginning to get a little worried at what Big Al would do next.
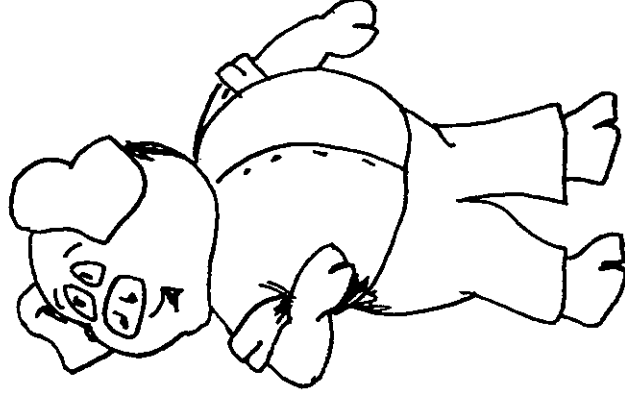
Wilber called out to Big Al as he struggled clumsily up the roof towards the chimney," Hey Al, I don't think you should do that."

Al stopped in his tracks clinging to the bottom of the chimney and glared down at Wilber." What did you say?" he growled in a threatening tone.

Wilber felt his courage rise and he stood up tall and said, "I said I don't think you should do that Al, in fact I think that this behaviour has gone quite far enough."

Al was furious "Who do you think you are telling me what to do? You're nothing but a weak little fur-ball" he bellowed and continued to climb.

Ralph decided it was all too much and he scuttled off down the road and over the hill. Even Genevieve was beginning to look a little nervous and was no longer encouraging Al.

It had all started as a joke for Al who was trying to look tough in front of his cousin and his mates. What do you think will happen next? How will the story end?

CHARACTER STUDY

WHAT DO YOU THINK?

Who is this Character?	
What was this character's Role? Circle the answer	Person being Bullied Bystander joining in bullying Bully Bystander not joining in the bullying
What did this character do in the story?	
Why do you think he/she behaved this way?	
Was this character cool, weak or aggro? **What did he/she do to show you this?**	
Do you think he/she has high or low self - esteem? Why?	
What could you tell this character to help him/her?	

COOL WEAK AND AGGRO WAYS OF BEHAVING

COOL - Politely confident and firm

WEAK - Soft and unconfident

AGGRO - Loud and pushy

How would people look and sound if they behaved in each of these ways?

The COOL way is just right.

Speak in a firm but friendly way
Stand tall, look the person in the eyes
Stand up for yourself politely
Smile or look calm
Feel happy, confident and in control
Feel okay about yourself

The WEAK way is too soft.

Talk softly, mumble
Stand far away, looking down
Give in to others
Cry or sulk
Feel shy, unconfident, unhappy.

The AGGRO way is too hard.

Shout, yell
Stand close and threaten
Abuse, tease, blame, put others down
Push, hit, kick
Feel angry, out of control.

BYSTANDER POWER

WE CAN HELP PEOPLE WHO ARE BULLIED

Ask your parents situations where they have been bystanders. Discuss the actions they took. Look at these scenarios and decide together what would be the best action in each situation.

1. You are in the corridor when you see a group of students crowd around another pupil. They won't let him/her pass. They begin to push him/her around and call him/her names. What would you do?

2. You are in the playground before school and you see three students waiting by the canteen. As the younger students come to the canteen area, they grab one and demand some money. What would you do?

3. You are playing in the playground with a group of friends. Another student comes up to the group and asks to join in. One of the students in your group says, "No. I don't like you. Go away." What would you do?

4. You are in the classroom when you see a student take another student's ruler and snap it in half without the other child noticing who did it. What would you do?

UNIT 3
COOPERATION IN A FRIENDLY SCHOOL

LESSON 1: CHILDREN'S RIGHTS IN A 'FRIENDLY SCHOOL'

LINKS To the Curriculum Framework

This activity contributes to the achievement of the Health and Physical Education Learning Area Outcomes from the Curriculum Framework by:

Knowledge and understandings:

- Discussing why people have the right to a healthy lifestyle, emotionally, socially and physically.

Attitudes and values:

- Identifying the values associated with our rights and the rights of others and how we establish and communicate these rights.

Self-management skills:
- Making decisions about the rights of children in the school community.

Interpersonal skills:
- Developing a set of guidelines and demonstrating how to communicate healthy attitudes to other children in the school.

PURPOSE

This activity will provide an opportunity for students to:
- Develop a set of rights for the children in their school to enable them to be healthy and happy.
- Design a poster displaying information to help children to develop the skills of cooperation and friendship.

PREPARATION

- Read the Background Notes at the back of this resource.
- Student's Friendly Schools Student Workbooks
- Butcher's paper
- Felt pens
- Copy of Home Activity Sheet for students

PROCEDURE

1. Read the story on **Teacher Sheet 7**. 'What would you do?

2. Ask the students to turn to **Activity Sheet 7** in their Student Workbook. Discuss the questions and ask the students to respond on the sheet.

3. Introduce the concept of a 'Right'. A 'Right' is something we all deserve. For example children's rights are the things that all children deserve. Explain that all children have the " Right" to feel safe and happy at school.

4. Discuss the following questions:
   - Do you think that all children feel safe and happy at school? Why/ why not?
   - Why do you think Anna didn't feel safe and happy at school?
   - What other situations might cause someone not to feel safe and happy at school?

5. Arrange students into small groups and give each group a sheet of butcher's paper and felt pens. Ask the recorder in each group to begin by drawing a school student in the middle of the sheet and write the title – "What we need to feel safe and happy at school." Then ask the group to brainstorm what the children in their school need to feel safe and happy and write the ideas around the child on the sheet. Give examples from **Teacher Sheet 8** 'What do we need to be happy at our School' to help get the groups started.

6. When the groups have generated a list ask them to share it with rest of the class. Each group can contribute one response until they are all covered. Teacher writes them on the board.

7. Explain that every person in the school has the right to feel safe and happy, but for this to happen **everyone** has to make sure they help to make their school a safe and happy place. This is what a friendly school is all about. Discuss the following questions:
   - Do you think the teachers should have the right to feel safe and happy at school as well? Why is this important? What about the parents and other visitors to the school?

- Why do you think it is important to include everyone?
Explain to the class that they are going to use these ideas to develop a school code of rights for everyone at (Your school's name).

8. Develop a class list from the ideas suggested by each group and then vote on the most important to finalise a list of the top six to eight ideas.

9. The final list can be made into a Friendly School Code of Rights for your classroom.

10. Read through the final list of rights with the students and discuss the following:
- What do you think would happen if everyone in this school followed this list and treated each other like this every time they came to the school?
- Who in the school should abide by this list?
- Which of these rights are most people in the school currently respecting?
- Which of these rights are many people in the school not respecting?
- How could these people be encouraged to respect the rights of other?
- How could this list of rights be used to reduce bullying?

11. Working in their groups, have students choose one statement from the Code of Rights and identify three things they could do to demonstrate how to respect another person's rights concerning the statement they have chosen.
Example: Not be bullied.
- Be caring of other people's feelings.
- Understand that we are all different and special.
- Treat people the same way you would like to be treated yourself
Ask each group to present their ideas to the class and discuss.

THINKING LOG

At the completion of the lesson ask the students to turn to Thinking Log Activity 1 in their Student Workbook. Use the following questions for the students to think and reflect on the key issues covered in this lesson.

Ask students to individually write a response to the following questions:
- What do you think you could do to make your school a friendlier place?
- What do you think the students in your school could do to cooperate more?
- What will you do starting from today to help make your school a friendlier place?

HOME ACTIVITY

At the completion of the lesson give each student a copy of the Home Activity Sheet to take home and work through with their family. Ask the students to return the sheet at a time prior to your next scheduled Friendly School lesson.

See **Home Activity Sheet 3.1**

Ask your family to help you write a list of how you want to be treated and what you need to feel safe and happy no matter where you are.

THINK ABOUT IT
WHAT WOULD YOU DO?

SITUATION

A group of friends were in the playground at school. Emma, Eelyn, Lan and Mike were all friends from Year four and played together most days at recess and lunchtime.

One day they were playing on the playground equipment when they heard Emma yell out for help. She had been having a turn on the swing, when a girl from Year six came and told her to get off and then began pulling on the chains on the swing so Emma was swinging around wildly. This girl had been bullying Emma in the playground for a couple of weeks. She would do things to frighten Emma who was much smaller than this Year six girl. Emma was frightened as the girl tried to tip her off the swing, which was still swinging too high for Emma to jump off safely.

Mike, Lan and Eelyn saw what was happening to Emma. They were frightened of the older girl too. She was much bigger than them and they had seen the way she was bullying Emma.

STOP

What could they do?
Emma was their friend and she was very frightened and upset, but the older girl was much bigger than any of them and they were all afraid of what she might do.

THINK

Lan said "We should go and help Emma before she gets hurt, even though this girl is much bigger than us and we might get bullied too and get hurt."

Mike said, " I think we should let Emma deal with the problem herself and stand up to this girl or she will just keep on bullying her. Anyway if we get involved she will probably start bullying us as well. Lets just stay out of it."

Eelyn said, " I don't think we can deal with this ourselves because we might get hurt too. But we have to do something now because Emma is in danger. I am going to get a teacher to help."

TALK

LAN'S SOLUTION.

Lan ran to help Anna who was clinging to the swing trying not to fall. He shouted as loudly as he could " Stop doing that. You are going to hurt Emma. Leave her alone."

The bully replied, "Get lost I want this swing."

"If you want the swing then stop pulling the ropes so Emma can get off safely and ask her properly for a turn. Emma is our friend and you are frightening her. If you don't stop I will have to get a teacher because you will hurt her," shouted Lan.

What might happen?

If you were Lan, what would you do if the bully wouldn't stop or began bullying you?

MIKE'S SOLUTION.

Mike persuaded Anne and James to walk away and not get involved. They could hear Emma crying out for help as she was swung around on the swing. She couldn't get off and the bigger girl was laughing because Emma was so frightened.

What might happen?

If you were Mike, and Emma got hurt, how would you feel? Would you do something different next time?

EELYN'S SOLUTION.

Eelyn ran to get a teacher and explained what was happening to Emma and that she was afraid that Emma was going to get hurt unless she got help quickly. The teacher came with Eelyn to the swing.

What might happen?

If you were Eelyn and the Year six girl called you a dobber what would you say to her?

Would you do the same thing if you saw your friend in danger next time?

EVERY ONE HAS THE RIGHT TO BE SAFE AT SCHOOL
We should get help if we see someone is in danger or being threatened by someone and can't deal with the situation themselves.

THINK ABOUT IT
WHAT WOULD YOU DO?

Lan's Solution.

1. If you were Lan, what would you do if the bully wouldn't stop or began bullying you? _____

_____

Mike's Solution.

2. Which step in 'Stop Think Talk' did Mike miss out? _____

3. If you were Mike, and Emma got hurt, how would you feel? _____

_____

4. Would you do something different next time? _____

_____

Eelyn's Solution.

5. if you were Eelyn, and the Year six girl called you a 'dobber', what would you say to her?_____

_____

6. Would you do the same thing if you saw your friend in danger next time?

_____

7. What would you do? _____

_____

_____

> # Every one has the right to be safe at school.
> If you see someone is in danger or being threatened by someone and can't deal with the situation themselves, 'Get Help'.

WHAT DO WE NEED
TO BE HAPPY IN OUR SCHOOL?

Not be called horrible names

Be cared about

Be listened to

Be allowed to have a go

Be treated fairly

Not be teased

Have friends

Be allowed to express my feelings

Not be ignored or have my feelings hurt

Not be afraid

Trust my teachers

Be 'me', just the way I am

Ask your family to help you write a list of how you want to be treated and what you need to feel safe and happy no matter where you are.

I Have the Right
to Feel Safe and Happy

I WANT ...

UNIT 3
COOPERATION IN A FRIENDLY SCHOOL

LESSON 2: VALUES FOR PROMOTING FRIENDLY SCHOOLS

LINKS To the Curriculum Framework

This activity contributes to the achievement of the Health and Physical Education Learning Area Outcomes from the Curriculum Framework by:

Knowledge and understandings:

- Identifying the values associated with friendship and the development and maintenance of a Friendly School.

Attitudes and values:

- Modelling the core values involved in the development of a Friendly School.

Self-management skills:

- Accepting and demonstrating responsibility for their own conduct according to values they have selected as being important for a Friendly School.

Interpersonal skills:

- Displaying sensitivity to and concern for the well being of other people.
- Conducting a school based campaign to establish a set of core values for a Friendly School program.

PURPOSE

This activity will provide an opportunity for students to:
- Discuss what values are and the importance of their role in developing positive relationships.
- Develop a set of core values as the basis of a campaign for Friendly Schools and the prevention of bullying

PREPARATION

- Student's Friendly Schools Workbooks
- The 'Friendly Schools Code of Rights' developed in lesson 1
- 'John's Story' Teacher Sheet 9 to read to class
- Photocopy onto A3 the '20 Values' Teacher Sheet 10
- Photocopy and cut in half the 'Values Information' sheets from 'Little Book of 20 Values
- Photocopy onto A3 the Example Framework Teacher Sheet 11(optional)
- Photocopy Home Activity Sheet

PROCEDURE

1. Review briefly the 'Friendly Schools Code of Rights' for your school developed during Unit 3 Lesson 1.

2. Read: 'John's Story' on **Teacher Sheet 9.**

3. Explain that all groups of people need a set of values that determine how people behave towards each other. These values create a plan for people to help them to cooperate and get on well together. Discuss the following question with the students:
   - What would happen in the world if everyone just did what he or she wanted and didn't have a set of values to care for the rights of others?

4. Show the students a list of values on **Teacher Sheet 10** (A3 photocopy of 20 values and explain that their task will be to select those values that are most important for maintaining a Friendly School where everyone is happy and safe and there is no Bullying. First they must learn about each of these values so they can make good decisions.

5. Organize the students into pairs and give each pair an information page on a particular value from the **'Values Information' sheets – 'Little Book of 20 Values'.**

6. Ask students to turn to **Activity Sheet 8**, then discuss and identify the key points about their value in their pair. Each student writes the details on their own 'Values Framework' in their Student Workbooks.

7. Ask each pair to take turns to present a brief summary of their value and it's meaning to the class. Ask each pair to also present reasons why they think this value should or should not be included as important for Friendly Schools.

8. At the end of the presentations, display all the values discussed and ask the students to vote on each value. E.g. "who thinks that ...(the first value) is the most important?" Go through the list and you will get a list of the six most important values for a Friendly School.

9. Ask the students to work in small groups and allocate one value to each group. Ask them to develop a list of things students and staff could do to develop that value in the school.
   Example: Cooperation
   - Invite someone new to join in your game
   - Take turns
   - Share the equipment
   - Play fair
   - Be open to other children's ideas

10. When the students have developed a set of suggestions for their allocated value, ask each student to make a poster for display in the school playground titled: How to be...(Value they worked with).

11. Ask each student to design a 'Values award certificate' for that value.
    Example: The Kindness Award – for being kind to other children in your school.
    These can be awarded at assembly to students in the school who are seen showing these values.

EXTENSION

Make plaques out of clay or wood with the value words sculpted onto the plaques. Mount the plaques around the schoolyard.

THINKING LOG

At the completion of the lesson ask the students to turn to Thinking Log Activity 1 in their Student Workbook. Use the following questions for the students to think and reflect on the key issues covered in this lesson.

- Ask the students to consider the values the class selected as the most important to develop a friendly school.
- What could you personally do each day to practice each value?
- Write a plan of what you are going to do in the next week to practice these values.

HOME ACTIVITY

At the completion of the lesson give each student a copy of the Home Activity Sheet to take home and work through with their family. Ask the students to return the sheet at a time prior to your next scheduled Friendly School lesson.

See **Home Activity Sheet 3.2**

With your family decide which of the values on the list have the most importance for your family. When you have chosen a list of the five or six most important decide how you could act on these more often.
What are you going to do in your family to be more...(value)?

JOHN'S STORY

A while ago a very nice family moved to our neighbourhood. They were from a different country and had a strange sounding accent. The boy was quite shy because he didn't know anyone and everything was new. Some of the local children began to bully him by teasing and calling him names every time they saw him.

I didn't feel right about it. Imagine if I was in his place. It would be hard to come to a new country and not know anyone. I told my Mum about the situation and how I felt about it. She said that I should do what feels right for me. She told me to think about what I had learnt about the right way to treat other people.

I thought about it and decided that if I had just moved to a strange place I would really like it if someone tried to be friendly and showed caring for how I felt. The next day I saw the new boy on his front lawn. I felt a bit nervous, but I went over and said " Hi, welcome to the neighbourhood" and introduced myself. He looked at me with such relief because I had been friendly that I immediately knew I had done the right thing.

Kuzo and I have become really good friends and he is not really shy, he was just getting used to being in a new place. Since I have become friends with Kuzo the other kids have stopped bullying him because he is not alone and is much more confident when we are together. I guess it's no fun for them any more because we just ignore them. I know that once everyone gets to know Kuzo they will like him too and I am going to continue to help him to feel right at home in his new country.

Questions:
- Why didn't John go along with the bullying?
- What advice did his Mother give him? What did she mean?
- Where do you think John might have learnt about what was the right thing to do?
- What values did John show in the story?
- Why do you think the other children where bullying Kuzo?
- Why did they stop?
- How would you describe John?

---

20 VALUES

WHICH CAN HELP REDUCE BULLYING IN YOUR SCHOOL

CARING
COMPASSION
CONSIDERATION
COURTESY
ENTHUSIASM
FAIRNESS
FLEXIBILITY
FORGIVENESS
FRIENDLINESS
GENEROSITY
HELPFULNESS
HONESTY
KINDNESS
RESPECT
RESPONSIBILITY
SERVICE
TACT
TOLERANCE
TRUSTWORTHINESS
TRUTHFULNESS

VALUES FRAMEWORK - EXAMPLE

KINDNESS

Value

What does it mean?

Showing care and concern for other people, animals and the environment.

Why should we be KIND?

It helps us to feel connected with other people, animals and the earth.

How can we be KIND?

Find kind ways to look after the environment, take good care of your pets and treat people the way you would like to be treated.

WHAT DOES THIS VALUE MEAN?

VALUE

WHAT DOES IT MEAN?

WHY SHOULD WE BE _____?

HOW CAN WE BE _____?

23

LITTLE BOOK OF
20 VALUES
WHICH CAN HELP REDUCE BULLYING IN YOUR SCHOOL

CARING
COMPASSION
CONSIDERATION
COURTESY
ENTHUSIASM
FAIRNESS
FLEXIBILITY
FORGIVENESS
FRIENDLINESS
GENEROSITY
HELPFULNESS
HONESTY
KINDNESS
RESPECT
RESPONSIBILITY
SERVICE
TACT
TOLERANCE
TRUSTWORTHINESS
TRUTHFULNESS

Compassion

What is it?

Compassion is caring about someone who is hurt (physically or emotionally). It's being kind and understanding because the other person matters to you. It's wanting to help even if you do not know that person.

Why be Compassionate?

When people feel hurt or in trouble they often feel alone. People who feel alone believe that nobody cares about them. By being compassionate and being a friend it tells the person that they are not alone and that you care about them.

How to be Compassionate.

Pay attention to the things around you. If somebody looks sad, spend some time with them, talk with them and listen to them. Do what you can to help them. If you have had a similar experience share it with them.

Consideration

What is it?

Consideration is thinking about how your actions will affect other people and how they will feel. It is being thoughtful. Consideration is doing things in a way that benefits you as well as others.

Why be Considerate?

People who are not considerate behave selfishly. This behaviour can cause arguments because other people feel hurt and ignored. When you are considerate, other people feel cared for and important. Things are more peaceful.

How to be Considerate.

Consideration means you behave as though others are just as important as you are. To become aware of how your actions affect other people, ask yourself, "Will my action hurt someone else?" If the answer is "Yes", then find another way of expressing your feelings so that you respect others.

Courtesy

What is it?

Courtesy is having good manners and acting in a way that makes others feel valued and respected. Saying "Thank you", "Excuse me", and "Please" to friends and family let them know that you respect them and appreciate what they do.

Why be Courteous?

It is important to show courtesy because it makes people feel important and valued, and enjoy being with you. When a person does not show courtesy towards others they feel insulted and unappreciated.

How to be Courteous.

Courtesy is being polite and thinking of how your behaviour affects others. It is courteous to say, "Excuse me" rather than interrupting a conversation. Courtesy is answering the phone politely, saying "please" and "thank you" and listening to others when they speak.

Enthusiasm

What is it?

Enthusiasm is really looking forward to something. If you have a positive attitude towards the things that you do (such as going on holiday, making your bed, or feeding the dog) you are enthusiastic. Enthusiasm makes boring things fun.

Why be Enthusiastic?

Enthusiastic people are cheerful and others love to be around them. Putting enthusiasm into boring tasks can help you finish them more quickly.

How to be Enthusiastic.

Show enthusiasm in your attitude. Become excited about what you are doing and think of ways to make it more fun. You can show enthusiasm by smiling or telling others that their work is great. It gives others encouragement.

Fairness

What is it?

Practising fairness is being fair in everything that you do. It is not judging someone or something by what others tell you. When you practise fairness you treat each person as an individual.

Why be Fair?

When people practise fairness, they do not judge people because they sound or look different, come from another culture or are of a different religion, sex or race. They allow others to be accepted as individuals, and acknowledge someone if they do something well.

How to be Fair.

You practise fairness by acting without prejudice and seeing each person as an individual. You do not decide things about a person because of their sex, nationality, race, religion or physical appearance. If someone acts as a bully or cheats, you stand up for yourself and others.

Flexibility

What is it?

Flexibility means always being open to change, and accepting that you will not always get your own way. You see difficult things as a challenge, and you are willing to make changes to become a better person.

Why be Flexible?

When you are flexible you adjust to things easily and positively. When we don't practise flexibility we become angry and upset because we don't get our own way. Being flexible makes you a stronger person.

How to be Flexible.

When you practise flexibility you don't worry about things that you know you can't change. Let go of old habits that get in the way of allowing you to become a better person, and learn new habits until you succeed.

Forgiveness

What is it?

Forgiveness means that if someone hurts you, you are prepared to give the person another chance without replying angrily or seeking revenge. Everyone makes mistakes. If you make a mistake you know that you can change your behaviour to not make the same mistake again.

Why be Forgiving?

We are all responsible for our own behaviour, and sometimes we make a mistake or do the wrong thing. If you are sorry for what you have done and you forgive yourself, then that situation can be a valuable learning experience.

How to Forgive.

To practise forgiveness you need to have courage and be prepared to look at the truth. You don't take revenge on others. If you feel anger, sadness or jealousy, decide what needs to change to make things better.

Friendliness

What is it?

Friendliness is caring about other people. Friendliness is taking an interest in them and being willing to share what you have with them. Friendliness is making others feel welcome.

Why be Friendly?

Friendliness helps people feel welcome. Friendliness helps people become closer to or share with others instead of keeping to themselves. Being friendly helps stop you and others from feeling lonely too.

How to be Friendly.

You can practise friendliness just by smiling at someone. Usually they smile back. Share your things with others, show your friends how happy you are to see them, ask them questions about their day and share news about your day.

Generosity

What is it?

Generosity is all about sharing. It is freely giving something to someone without expecting a reward or gift in return. Generosity can be giving somebody lots of help just because you can see they need help. It is a great way to show you care.

Why be Generous?

When people are generous and give freely without wanting things in return it makes other people want to be generous as well. Being generous ensures that people who need help receive it. Generosity helps everyone have more of what they need

How to be Generous.

Generosity starts by being aware of a person, a family, or a group that deserves help. Think of some way you can help. You may be able to share your knowledge, time or your things with them. Don't look for anything in return. You will feel great inside just because you have given generously.

Helpfulness

What is it?

Helpfulness is doing something useful for someone else or ourselves. It is making life easier for someone by helping them with things that they don't have time to do or can't do for themselves.

Why be Helpful?

By being helpful we develop co-operation and teamwork. If we are doing a difficult task we may need someone else's ideas, support or encouragement. When people are helpful life becomes easier and great things can be accomplished.

How to be Helpful?

You don't need to wait for people to ask you for help. If it is hard to know how to help somebody then ask them, "How can I help you?". Remember is important to ask others for help when you need it too.

Honesty

What is it?

Honesty is being truthful and trust worthy. It means you can be relied on not to lie or cheat. Honesty means telling the truth no matter what the consequences may be. It means not exaggerating to impress others.

Why be honest?

Being honest is important if you want to earn the trust of others. When you are honest others believe you. You are not honest to others if you make up stories to cover a mistake you made, or pretend something doesn't matter to you when it really does.

How to be Honest.

Honesty is practised by saying what you mean, and meaning what you say. Don't just say something to make a good impression. Be trustworthy at all times. Don't cheat or lie. Try to be honest with yourself and you will be honest with others. Show you are honest by what you do and say.

Kindness

What is it?

Kindness is showing care and concern for other people or animals. Even small ways of showing your kindness can brighten up somebody's life, help animals feel more cared for and make the earth a better place to live.

Why be Kind?

Kindness allows us to feel close to other people or animals. When we are kind we help others instead of being selfish.

How to be Kind.

Take notice of things that may need your care in the world around you. Find kind ways to take care of your pets and treat people the way you would like to be treated.

Reliability

What is it?

Reliability means that others can depend on you and count on you to do your best to keep commitments. If your family relies on you to feed the family pets then they should be fed without anyone reminding you to do it. Reliability means that you really care about doing what you say you will do.

Why be Reliable?

When you practise reliability, people can trust you to complete a task to the very best of your ability. If a friend is not reliable then we never know if they are going to do what they promised they would do or not.

How to be Reliable.

You make agreements with people and make sure the agreement is kept. You practise reliability by knowing what you have agreed to do, and leaving enough time to do it. Try to finish on time and do your best to keep up your end of the agreement.

Respect

What is it?

Being respectful is caring and treating each other with dignity. It is being courteous when speaking to and dealing with others. Respect includes sticking to family or school rules. Self-respect is developed when you protect the things that are important to you, such as your right to privacy.

Why be Respectful?

Being respectful makes people feel valued. Without respect people would speak rudely to others and behave as if they didn't matter. When you treat yourself with respect, others respect you too.

How to be Respectful.

Think about how you would like to be treated then treat other people that way. How would you like people to speak to you, treat your belongings and act towards you?

Responsibility

What is it?

Being responsible means you are in charge of your behaviour. It is a sign of growing up. Being responsible means doing something to the best of your ability and keeping your agreements.

Why be Responsible?

Being responsible means other people can count on you. People feel they can trust you to always do your best. Some people don't act responsibly and they need to practise responsibility and learn from their mistakes.

How to be Responsible.

When you agree to do something take the agreement seriously. Do it as well as you possibly can. Do not agree to do things that you don't have time to do, or that are too hard for you.

Service

What is it?

Being of service means looking for ways to help others rather than waiting to be asked. It is doing things for people because you want to be helpful and want to make a difference in people's lives because you care.

Why be of Service?

When people complete things that need to be done without being asked, others can depend on them. Being of service can make people feel cared for. When you have a job your employer will expect you to give good service to customers.

How to be of Service.

You practise being of service by thinking about ways to help others. Look for ways to make life easier for others, then do something to help. Remember even little things that you do will make a difference.

Tact

What is it?

Being tactful is telling the truth, but in such a way that no one is offended. It is knowing when to say something and when to be silent. When you are tactful you handle other people's feelings carefully and don't say things that will make them feel embarrassed.

Why be Tactful?

Tactful people share the truth and their views without being mean or hurtful to others. Without tact people can be rude and insensitive, and can say things that are hurtful for other people to hear.

How to be Tactful.

You practise tact by thinking before you speak. If something needs to be said, say it in a kind way. If you are angry don't yell and be unkind, wait until you can calmly tell them what has upset you.

Tolerance

What is it?

Tolerance is accepting things that you can't change or things that you wish were different. Tolerance is practised when you accept things about people that you don't like. If you care for a person or family member you will tolerate their annoying behaviour.

Why be Tolerant?

People who are tolerant allow other people to be themselves. Tolerant people enjoy people being different and accept differences. People who don't practise tolerance often criticise others for being different.

How to be Tolerant.

When you practise tolerance you accept differences. You are patient and if others make a mistake, you forgive them and accept them for the way they are. Being tolerant does not mean you allow others to hurt you. You must sort out what is important and what is not.

Trustworthiness

What is it?

Trustworthiness means you can be relied upon to do what you say you will do. Others can count on you to keep your word. Trustworthiness is being worthy of other people's trust.

Why be Trustworthy?

When people are trustworthy they can be trusted to do their best, to tell the truth and keep their promises. Being trustworthy means you will do what you agreed to do. You never know what to expect from someone who is not trustworthy.

How to be Trustworthy.

You practise trustworthiness by keeping the agreements that you make with others. Look out for distractions that keep you from completing your agreement, such as feeling bored or tired or preferring to do something else. Make sure you stop and think before promising to do something to make sure it is something you can, and want, to do.

Truthfulness

What is it?

Truthfulness means you speak and act in a way that reflects the truth. It means that you don't tell lies under any circumstances, not even to save yourself from getting into trouble.

Why be Truthful?

When people practise truthfulness we can trust what they say. Truthfulness helps to build good relationships with people. When people are not truthful we have difficulty knowing if they are lying or telling the truth.

How to be Truthful.

If helps to tell the truth if you recognise what it real and what is made up. Always choose to tell the truth. If you make a mistake, admit it and don't try to cover it up. Remember, we learn from our mistakes.

VALUES

With your family decide which of the values on the list have the most importance for your family. When you have chosen a list of the five or six most important decide how you could act on these more often.
What are you going to do in your family to be more...(value)?

WHAT WE THINK IS IMPORTANT OUR VALUES	HOW WE WILL PUT THIS INTO ACTION WHAT WE WILL DO
Example Sharing	We will help each other more with the chores

Caring
Compassion
Consideration
Courtesy
Enthusiasm
Fairness
Flexibility
Forgiveness
Friendliness
Generosity
Helpfulness
Honesty
Kindness
Respect
Responsibility
Service
Tact
Tolerance
Trustworthiness
Truthfulness

UNIT 3
COOPERATION IN A FRIENDLY SCHOOL

LESSON 3: FRIENDSHIP SKILLS

LINKS To the Curriculum Framework

This activity contributes to the achievement of the Health and Physical Education Learning Area Outcomes from the Curriculum Framework by:

Knowledge and understandings:

* Demonstrating their understanding of the importance of cooperation, tolerance and respect for others for effective teamwork and friendship development

Attitudes and values:

* Demonstrating and valuing what is necessary to be a friend and be cooperative in the school.

Self-management skills:

* Demonstrating the skill of making friends and keeping friends.

Interpersonal skills:

* Demonstrating effective communication.

PURPOSE

This activity will provide an opportunity for students to:
* Identify and demonstrate effective friendship skills.
* Identify and utilise the skills and understandings necessary to make friends by developing a rap song for a school awareness activity.

PREPARATION

- Student's Friendly Schools Student Workbooks
- Jackie's Story - Teacher Sheet 12
- Photocopy Teacher Sheet 13 'How to Make a New Friend' onto a piece of A3 paper as a poster or onto an overhead
- Prepare a tape recorder and the tape of the 'Friendly Schools Rap'

PROCEDURE

1. Read the scenario: Jackie's Story: A Tale of Friendship, **Teacher Sheet 12** and discuss the following questions:
    - Why do you think Jackie was shy when she first arrived at the school?
    - What did Jackie do to make friends?
    - Why did the girl stop bullying Jackie?
    - How did Jackie deal with the bullying?
    - How did having friends help Jackie?
    - What is a friendship?

    Definition: A friendship is a caring relationship between two or more people.
    People who become friends have decided that they like to spend time together. They enjoy doing the same things and find it easy to talk to one another. They care about each other's feelings and they give each other support.

2. Explain to the students the importance of friends.

    Teachers Notes: *People who have friends cope best with stress and situations in their lives because they have a caring group of people to turn to. Children with a good group of friends are less likely to be bullied than children with few friends. The fact is that most people who bully are not that brave, and they would not try to bully a child who has a good group of caring friends. A child who has good friendship skills is rarely alone and generally is happier and less likely to be the target for bullying.*

3. Students brainstorm ways to make friends, compare students lists with the steps on **Teacher Sheet 13** "How to Make a New Friend".

4. In pairs ask students to role-play meeting a new person whom they would like to make friends with, using the making friends steps on the poster as a guide. After the role-play discuss:
    - How did it feel to be the person making the approach?
    - How did it feel being approached?
    - Can you think of ways you could make it easier for the person who is making the first move if you were approached?
    - If everyone made the effort to be friendly in a school how would this help to prevent bullying?

5. Explain to the students that their class is going to do an assembly item about getting rid of bullying by having a Friendly School. Ask the students what messages they think children need to know to prevent bullying and to prevent being bullied. Compare students ideas to those in the Friendly School Rap.

6. Present the "Friendly School Rap" **Activity Sheet 9** in Student Workbooks
    - Discuss the words and the messages.
    - Discuss the use of rhyming words.
    - Discuss the beat and how we can make sounds and have actions and movements to go with the beat.

7. Arrange the students into groups. (Make sure you have carefully selected a range of different children in each group). Explain that each verse of the Rap song needs two more lines and each group is going to be given one verse to finish. Each group will also be asked to create actions for their allocated verse.

8. Brainstorm a list of words related to the development of a Friendly School to use in their verse. The values from the previous health lesson will provide a good word lists Ask the students to work together in their groups to write two rhyming lines to add to the two they have been given.

9. When students are happy with the four verses, which now have four lines ask them to make up actions and moves to go with it and to rehearse these.

10. When all the groups have got a basic idea of their verse bring them all together and get each group to perform it. The song can be rehearsed, adding clapping, clicking, dance, clothing and attitude can be added as an assembly item to the whole school.

Thinking Log

At the completion of the lesson ask the students to turn to Thinking Log Activity 1 in their Student Workbook. Use the following questions for the students to think and reflect on the key issues covered in this lesson.

Ask the students to reflect on the following questions:
- What are three things that you could do to help your friends?
- What are three things that your friends could do for you?
- Sometimes you get upset with your friends. Think of a time when this has happened to you and describe what happened.
- How did you resolve it?

Home Activity

At the completion of the lesson give each student a copy of the Home Activity Sheet to take home and work through with their family. Ask the students to return the sheet at a time prior to your next scheduled Friendly School lesson.

See **Home Activity Sheet 3.3**

Ask your family to help you to develop 10 ways to be a good friend. Discuss these ideas and think of ways of actually doing these things. Make a plan with your family of what you are going to do.

JACKIE'S STORY: A TALE OF FRIENDSHIP

Jackie was new at the school and was a bit shy at first as she got to know her class-mates. One girl in her class began to tease her and call her names because she was new and shy.
Jackie tried to ignore the girl and make friends with other children in the class.

First she listened and watched the other children and found out who were the nice, friendly children that she might have something in common with. Next she began talking to these children and sitting with them at lunchtime. She asked politely if she could join in their groups and games. She listened to their conversations and learned about them and told them things about herself. Soon she was feeling like she was part of the group.

The other girl who had continued to bully her to start with began to get tired of being ignored. She could also see that Jackie had developed a good support group of friends and was in fact becoming quite popular. Jackie used her friendship skills to get to know as many people as possible and soon became known as a friendly and caring class-mate.

The really nice part about this story was that once Jackie was feeling confident and comfortable in her new school, she noticed the girl who had once been bullying her had very few friends and that she often looked quite miserable. Jackie stopped ignoring the girl and began to be friendly and caring. After a few weeks of getting to know each other Jackie explained how the bullying had made her feel and the other girl said she was sorry.

Jackie had brought her friendship skills to the class and this helped everyone to get along as a friendly class. It's funny how friendship spreads. When someone is really nice and friendly it's amazing how you start feeling the same way. Friendliness is contagious and very soon you have a friendly class and then a friendly school.

HOW TO MAKE A NEW FRIEND

STEP 1   * Say Hi. My name is _____
What's yours?

STEP 2   * Keep the conversation going by asking
some questions to find out about them.

STEP 3   * Tell them about yourself.
e.g. hobbies and interests.

If things are going well go to **STEP 4**

If things are not going so well don't worry or
take it personally

Say to yourself " Well I am a friendly person"

Try another time and go back to **STEP 1**
or
Try another person and go back to **STEP 1.**

STEP 4   * Make a plan to do something together.
e.g. lets go and play a game or lets get
together tomorrow.

Friendly School Rap

Verse 1

We are kids who are really cool
Because we come from a
friendly school.

_____

_____

_____

_____

_____

Chorus

Stand tall. Look proud
An' tell the world
" We're really great!"

Verse 2

If you decide to bully and tease
Don't go thinkin' you can do as
you please

_____

_____

_____

_____

_____

Chorus

Stand tall. Look proud
An' tell the world
"We're really great!"

Verse 3

We don't care for anger and fear
'Cos' we don't want those
bullies here

_____

_____

_____

_____

_____

Chorus

Stand tall. Look proud
An' tell the world
"We're really great!"

Verse 4

We are special in our own ways
An' we know friendship really
pays

_____

_____

_____

_____

_____

Chorus

Stand tall. Look proud
An' tell the world
"We're really great!"

10 Ways to Be a Good Friend

Ask your family to help you to develop 10 ways to be a good friend. Discuss these ideas and think of ways of actually doing these things. Make a plan with your family of what you are going to do.

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

RESOURCES

TEACHER REFERENCES

Adderley, A., Petersen, L., & Gannoni, A. (1997). *Social skills training: first 3 years of schooling.* Australian Council for Educational Research Ltd: Melbourne.

Brokenshire, D. (1997). *The straight talk manual: a self-esteem and life skills workbook for young people.* (3rd edition). Straight Talk Publishing: Tasmania.

Brunskill, K. (1998). *The healthy relationships program: teacher's manual.* Oxford University Press: Melbourne.

Canfield, J., & Wells, H. (1976). *100 ways to enhance self-concept in the classroom.* Prentice-Hall: New Jersey.

Connor, G. (1988). *Self-esteem: teachers hold some keys.* Ministry of Education, Western Australia: Perth.

Field, E.M. (1999). *Bully busting: how to help children deal with teasing and bullying.* Finch Publishing Pty Ltd: Sydney.

Lange, J. (1997). *Being me - learning to live with others: for lower and middle primary school.* West Education Centre Inc.: West Footscray, Victoria.

MacMullin, C., Aistrope, D., Brown, J.L., Hannaford, D., & Martin, M. (1992). *The Sheidow Park Social Problem Solving Program: a social skills program for primary school children.* The Institute for the Study of Learning Difficulties, Flinders University: Bedford Park, South Australia.

McFadden, J., Flynn, C., & Bazzo, B. (1985). *Junior lifescience: a positive approach to successful behaviour.* Martin Educational: Sydney.

McGrath, H., & Noble, T. (1993). *Different kids, same classroom: making mixed ability classes really work.* Longman Cheshire: Melbourne.

McGrath, H., & Francey, S. (1992). *Friendly kids, friendly classrooms: teaching social skills and confidence in the classroom.* Longman Cheshire: Melbourne.

Shochet,I., Holland,D., Whitefield, K. (1995). *Resourceful adolescent program; group leaders' manual.* Griffiths Early Intervention Project. Griffith University.

Values education: developing self-esteem and citizenship – 8 to 9 years. (1999). Prim-Ed Publishing: Warwickshire, U.K.

VIDEOS

Sticks and Toby. From the *What if* series. Australian Scholarships Group Educational Products: Melbourne.

GENERAL REFERENCES

Besag, V.E. (1989). *Bullies and victims in schools.* Open University Press: Bristol, UK.

Elliot, M. (1991) *Bullying: a practical guide to coping for schools.* Glasgow: Longman.

Fuller, A., & King, V. (1995). *Stop bullying!* Heidelberg: Victorian Health Promotion Foundation.

Olweus, D. (1993). *Bullying at school.* Blackwell: Cambridge.

Rigby, K. (1996). *Bullying in schools and what to do about it.* The Australian Council for Educational Research Ltd: Melbourne.

Sharp, S., & Smith, P.K. (Eds). (1994). *Tackling bullying in your school: a practical handbook for teachers.* Routledge: London.

Skinner, A. (1992). *Bullying: an annotated bibliography of literature and resources.* Youth Work Press: London.

Slee, P.T. (1997). *The P.E.A.C.E. Pack: a programme for reducing bullying in our schools.* (2nd edition). PT Slee: Adelaide.

Smith, P.K., & Sharp, S. (1994). *School bullying: insights and perspectives.* Routledge, London.

Tattum, D.P. (Ed). (1993). *Understanding and managing bullying.* Heinemann Educational: Oxford, UK.

Tattum, D.P., & Lane, D.A. (Eds). (1988). *Bullying in schools.* Trentham Books Ltd: Stoke-on-Trent, Staffordshire.

BACKGROUND NOTES

WHAT IS BULLYING?

Bullying is:
- a repeated, unjustifiable behaviour;
- that may be physical, verbal, and/or psychological;
- that is intended to cause fear, distress, or harm to another;
- that is conducted by a more powerful individual or group;
- against a less powerful individual who is unable to effectively resist [1 8 9 17-22]

HOW IS BULLYING DIFFERENT TO OTHER FORMS OF AGGRESSION?

Like other forms of aggressive behaviour, bullying involves the intention of an individual or group to cause harm to one or more others [23 24]. However, bullying has the following unique characteristics:

- a power imbalance is present;
- the aggressive act is unprovoked by the victim or perceived as unjustified by others; and
- the action is repeated between the same individuals [23 24].

IS FIGHTING BULLYING?

While fighting between two students of equal power is of concern, it is not bullying. It is the presence of a power imbalance that distinguishes bullying from fighting, conflict, violence and disagreement [3]. It is this imbalance that makes mistreatment of the victim possible [3].

"Teachers get remarkably fed up with children who fight or scrap with one another. But they are not bullies because they fight, and the one who wins is most certainly not a bully because he wins. The mindless and degrading violence of strong against weak may be bullying, but fighting, by definition, is not" (p. 17)[25].

IS TEASING BULLYING?

Teasing, done in mutual fun and jest, where all individuals are involved and feel capable of responding, is *not* bullying. However, teasing that is done in a mean and hurtful way, that involves a power imbalance whereby one individual feels powerless to respond or to stop what is happening is bullying.

TYPES OF BULLYING

The different forms bullying can take may be classified as physical or non-physical, direct or indirect [26]. Both Australian and international research suggests that the most common form of bullying is verbal, such as cruel teasing and name calling [3][27].

	Direct	Indirect
Physical	• Hitting • Kicking • Pushing • Spitting • Pinching • Throwing things, e.g. stones	• Getting another person to harm someone
Non-physical **Verbal**	• Mean and hurtful name-calling • Hurtful teasing • Demanding money or possessions • Forcing another to do homework or commit offences such as stealing	• Spreading nasty rumours • Trying to get other students to not like someone
Non-verbal	• Threatening and/or obscene gestures	• Deliberate exclusion from a group or activity • Removing and hiding and/or damaging others belongings

(adapted from Rigby, 1996)

HOW PREVALENT IS BULLYING?

BEING BULLIED

• Eleven percent of students in Western Australian primary and secondary schools (one in nine students) were identified by parents and teachers as being bullied in the previous six months [1].

However, given bullying often occurs out of sight of adults, the actual figure is likely to be higher.

• Australian research found that approximately one in six students reported being bullied at least once a week [2][3] and although many bullying incidents last only a few days, for a significant proportion of students victimisation continues for six months or more [4-6][28].

• In general, primary school students report being bullied more often than secondary school students [3][23][29].

BULLYING OTHERS

• Approximately 5% of Western Australian students were reported by parents and teachers as engaging in bullying behaviours in the past six months [1].

• In a survey of Year 6, Year 8 and Year 10 students in New South Wales, approximately 24% of students reported bullying other students at least once during the current school term [29].

DIFFERENCES BETWEEN BOYS AND GIRLS

TYPES OF BULLYING
- Boys are most likely to experience direct physical bullying [3 8 27 30].
- Girls are more often the victim of indirect non-physical forms of bullying, such as exclusion and having rumours spread about them [3 8 27 30].
- Direct verbal bullying, such as cruel teasing and name calling, is most common, with boys and girls experiencing this about equally [3 27 30].

PREVALENCE OF BULLYING
- In general, girls are bullied about as often as boys [11 20 23 27].
- Boys report bullying others more often than girls [3 8 11 23 27 29].

WHO BULLIES WHOM?
- Bullying is most often done by one boy or a group of boys [8 27].
- Girls are bullied by boys about as much as they are bullied by girls [31].
- Very few boys report being bullied by girls [23 31].

SHOULD WE BE CONCERNED ABOUT BULLYING?

STUDENTS WHO ARE BULLIED
To meet the academic goals of education, students must perceive their learning environment to be a safe and secure place [32].

Students who are bullied:

- feel unhappier at school [6 31];
- dislike school [29];
- view school as not a nice place to be [29];
- view school as an unsafe place [3 6];
- feel lonelier [29 33-35];
- want to avoid the school environment [3 34 36];
- demonstrate lower academic competence [1]; and
- have higher rates of absenteeism [1].

Furthermore, students who are bullied are more likely to suffer from a number of physical and mental health problems. Students who are bullied have:

- more physical complaints [4 21 37];
- lower self-esteem [6 24 38 39];
- greater feelings of ineffectiveness and more interpersonal difficulties [19];
- higher levels of depression [4 5 17 39 40] and suicidal thoughts [41]; and
- higher levels of anxiety and worry [36 42].

Of further concern is research that suggests that these effects can be long lasting [43 44].

STUDENTS WHO BULLY OTHERS
Students who bully others:

- feel unhappy at school [6 31];
- dislike school [29];
- view school as not a nice place to be [29];
- demonstrate lower academic competence [1];
- are more likely to have a criminal conviction by age 24 [43];
- are more likely to engage in violent behaviour after leaving school than their peers [18]; and

- are more likely to engage in behaviours such as wagging school, graffiti use, getting into trouble with police and shoplifting [45].

Furthermore, students who engage in bullying:
- have a greater incidence of mental health problems [1];
- experience greater negative health symptoms [29]; and
- experience higher levels of depression [4 5 39 40], suicidal thoughts and attempts to harm oneself [40 41].

Of further concern, is the finding that:
- students who bullied at age fourteen tended to also bully others at age eighteen and at age thirty-two; and
- students who engaged in bullying at age fourteen tended, at age thirty-two, to have children who engaged in bullying [18].

BULLYING IN THE PLAYGROUND AND THE CLASSROOM

Observations in schools have found that verbal and physical bullying occur in the classroom as frequently as in the playground [15]. However, the type of bullying differs across these contexts:

- Direct bullying occurs more frequently in the playground.
- Indirect bullying occurs more frequently in the classroom.

POSSIBLE SIGNS OF BULLYING

- decreased interest in school
- reluctance to go to school, absenteeism from school
- lowered school performance
- frequent complaints of headaches or stomach aches
- wanting to be taken to and from school or to go a new route
- frequent damage or loss of items such as clothing, property or school work
- frequent injuries such as bruises or cuts
- withdrawal and reluctance to say why
- difficulty sleeping, wetting the bed or having nightmares
- coming home hungry
- asking for extra lunch or pocket money and/or money going missing from the house
- appearing generally unhappy, miserable, moody and/or irritable
- reluctance to eat or play properly
- threats or attempts to harm self
- having no friend to share free time with
- rarely invited to parties or other social activities with peers

A COMMON MYTH ABOUT BULLYING

It is often believed that bullying is caused by external deviations, such as being fat, having a big nose, or wearing glasses. Research has found that, as a group, victims of bullying are no more externally deviant than students who are not bullied [8]. However, students who are bullied tend to be physically weaker than boys in general, whereas boys who bully others tend to be physically stronger.

STUDENTS' ATTITUDES TOWARD BULLYING

- Children's attitudes toward bullying can be grouped into three areas [38] [46]:
    - a desire to support victims
    - a tendency to reject children who are bullied for being weak; and
    - a readiness to justify bullying and support the bully.
- Most students are in favour of supporting students who are bullied and seeing action taken to stop bullying [38] [46] [47].
- Boys are less supportive of victims than girls [38].
- Support for students who are bullied decreases with age, with students under 12 being most supportive [38].

Classroom learning and whole-school responses to bullying should build upon students' pro-social desires for bullying to stop and their inclinations to help victims [11].

IS PRIMARY SCHOOL A GOOD TIME TO BEGIN BULLYING PREVENTION?

All schools, across all years, should address bullying. However, interventions at the primary school level are particularly important because:

- In general, younger children are bullied more often than older children [3] [23] [29];
- Children are more supportive of victims at this age [38] [46]; and
- Children are most amenable to discussing the issue of bullying at ages 10 and 11 [48].

AN IMPORTANT GROUP: BYSTANDERS

Bullying involves more than the students who are bullied and those who bully [49]. In the classroom, peers have been observed to be involved in 85% of bullying episodes, with this involvement ranging from actively participating to passively onlooking [50]. Peers have also been observed to be present during most bullying incidents in the playground [15].

As onlookers, peers can either reinforce bullying through their behaviour or intervene to stop bullying.

Students can support bullying behaviour in a passive way by:
- ignoring or remaining silent about bullying behaviour;
- maintaining the victim's role by avoiding or excluding them;
- providing the student bullying with social reinforcement, such as being friendly to the student bullying or not saying anything to them about their behaviour; and/or
- gossiping about incidents and in the process enhancing the reputation of the student who is bullying [51].

Students can support bullying behaviour in an active way by:
- verbally encouraging the bullying behaviour;
- preventing the student who is being bullied from escaping the situation;
- shielding the situation from adult view;
- acting as a look out or warning that an adult is approaching;
- assisting the student to bully by holding the victim or their possessions;
- acting as a messenger for students who are bullying;
- laughing or smiling at the bullying; and/or
- refusing to give information about the situation when asked [51].

Furthermore, research suggests that more than half of students who report being bullied once a week or more do not tell their teachers [27] and teachers report their intervention in bullying incidents to be more comprehensive than students do [11]. These findings suggest that bullying is more likely to be witnessed by peers than adults.

It can be argued that "the most important factor in combating bullying is the social pressure that can be brought to bear by the peer group rather than the condemnation of individual bullies by people in authority" (p. 79-80) [52].

The power of bystanders can be utilised in a positive way to provide both protection for the victim and motivation for students who bully to change their behaviour [13 14 53].

When students were asked what prevents them from assisting students who are bullied, one of the most common responses was "it's none of my business" [54]. Developing in students the ability to:

- empathise with victims' distress;
- feel a sense of responsibility for the welfare of fellow students; and
- feel a sense of responsibility for tackling bullying

are therefore important strategies for engaging bystanders [9 54].

To ensure peer participation, teachers and school administrators must reinforce peer intervention efforts and model consistent responses to bullying. It is important that the onus for intervening in bullying incidents is not left to students alone, but rather, peer intervention efforts are viewed as complimentary to a whole-school approach to tackling bullying [9]. By alerting adults to bullying incidents, school staff and students can work together, with school staff following through with their responsibility to respond in a consistent manner, disrupting the power imbalance present in bullying.

HOW STUDENTS RESPOND TO BULLYING

STUDENTS WHO ARE BULLIED

When contemplating aggression toward peers that are bullied, students are more likely to expect tangible rewards, more likely to expect signs of victim suffering and less likely to expect retaliation than when considering aggression against students who are not bullied [55]. Indeed, students who are bullied often provide their attackers with tangible rewards and signs of distress [56] and believe that aggressive responses encourage retaliatory action, thus escalating conflict [57]. This suggests that victims of bullying are likely to respond by backing down or submitting to an aggressor, thus reinforcing the aggressor's behaviour and perhaps encouraging further victimisation.

- Students who respond to bullying by staying clam and in a way that suggests to the person bullying that they do not care about the bullying, are perceived by peers as most likely to make the bullying reduce or stop [49].

- Students who respond in a way that suggests helplessness, like crying, or respond with aggression are perceived by peers as making the bully continue [49].

An important aspect of bullying interventions is to aid victims in developing alternative responses to aggression, such as assertion [57]. Students who are active in response style report lower levels of stress and less negative effects of being bullied than those who are passive [58]. Assertiveness training has been shown to increase victims' self-esteem, increase victims' confidence in the face of being bullied and reduce the amount of bullying experienced [59 60].

Helping students increase their social skills is likely to be most effective when it is done as part of a whole school approach to address bullying. By implementing assertiveness training as part of a whole school approach, the philosophy promoted is one in which bullying is not seen as just the victim's problem and something that they should manage on their own. By mobilising peer pressure against bullying behaviour at the same time, students who are bullied will feel supported and more confident in applying the skills they have learnt to the wider setting of the school environment [59 61].

STUDENTS WHO BULLY OTHERS

Most students, including those involved in bullying, choose socially approved non-aggressive responses as their first solution to hypothetical acts of aggression against themselves. However, students who bully others are less likely to choose a non-aggressive response as their second

solution, suggesting they are quick to resort to aggressive responses [57]. This finding suggests that students who bully may also benefit from training in assertive, versus aggressive, responding.

BYSTANDERS

Training in assertive responding can also help to provide the skills necessary for bystanders to respond in a way that does not promote bullying, by helping them to resist group pressure to join in or do nothing [49].

BULLYING AND SELF-ESTEEM

STUDENTS WHO ARE BULLIED

- Students with high self-esteem are as likely to have experienced bullying as those with low self-esteem.
- HOWEVER, those with low self-esteem report more extensive bullying, higher levels of stress as a result of being bullied, and more negative effects of this stress [58].
- This suggests that high self-esteem acts as a buffer to the negative effects of bullying and that bullying interventions should work toward promoting students' self-esteem.

STUDENTS WHO BULLY OTHERS

- Despite popular belief, research does not support the notion that students who bully suffer from low self-esteem, rather, students who bully demonstrate about average self-esteem and a relatively positive perception of themselves [8 24 62].
- HOWEVER, it may be that dominating and bullying others is a strategy of increasing or maintaining one's feeling of importance in the peer group, thus inflating ones self-esteem [24]. The research doesn't tell us what the self-esteem of students who bully was like before they began to bully or what it would be like if they stopped bullying.

BYSTANDERS

- It is students with genuinely high self-esteem that are most likely to take sides with and defend students who are bullied [24].

FRIENDSHIP AND SOCIAL SUPPORT

- Friendship plays an important role in school adjustment [63].
- Children who see their friendships as providing validation, such as personal support, and aid, such as help with problematic personal situations, tend to:
  - feel happier at school;
  - see their classmates as supportive; and
  - develop positive school attitudes [63].
- Children who report high levels of conflict in their friendships experience difficulties at school in the form of:
  - decreased school involvement;
  - increased levels of loneliness; and
  - decreased liking of school [63].
- Students who have a reciprocated best friend are less likely to be bullied [64].
- Students who are bullied but believe they have the support of others to help them are less likely than other bullied students to suffer from poor health [65].

CO-OPERATION

Low levels of cooperative behaviour have been shown to be characteristic of both boys and girls who engage in bullying, and, to a lesser extent, of victims [66].

This suggests the benefit of increasing both the capacity and motivation of children to cooperate as a means of reducing school bullying. Indeed, research with pre-schoolers has demonstrated that during co-operative games, co-operative behaviour increased and aggressive behaviour decreased, conversely, competitive games were characterised by an increase in aggressive behaviour and decreases in co-operative behaviour [67].

Not only do schools vary on the level of bullying reported, but there is also significant variation between classes [27]. A major contributing factor to this variation is class ethos, that is, the atmosphere that is generated within the classroom that either supports and colludes with bullying and aggressive behaviour or challenges these behaviours [51].

A co-operative curriculum can provide a positive means of preventing bullying, fostering an ethos in which bullying is less likely to occur in the first place [51]. A cooperative curriculum encourages commitment to values of trust and respect and a shared understanding of social rules and procedures. It increases the amount of positive social interaction experienced, promotes honest communication and the opportunity to learn to tolerate differing perspectives, and encourages both a positive sense of self and concern for ones own community [51].

Within such a classroom peer approval is received for non-aggressive behaviour, with unacceptable behaviours, such as bullying, meeting rejection or challenge [51]. Such an ethos empowers students as they experience a sense of control over bullying behaviour. Students who are bullied are more likely to seek the support of others as they will expect to receive this support. Students who bully are likely to feel uncomfortable because they are breaking group norms and unlikely to receive a fearful or satisfactory response from their chosen victim.

REFERENCES

1. Zubrick SR, Silburn SR, Gurrin L, Teo H, Shephard C, Carlton J, et al. Western Australian Child Health Survey: education, health and competence. Perth, WA: Australian Bureau of Statistics, 1997.
2. Rigby K. *The Peer Relations Questionnaire Technical Manual*. Point Lonsdale, VIC: The Professional Reading Guide, 1998.
3. Rigby K. What children tell us about bullying in schools. *Children Australia* 1997;22(2):28-34.
4. Slee PT. Bullying: Health concerns of Australian secondary school students. *International Journal of Adolescence and Youth* 1995;5:215-224.
5. Slee PT. Peer victimization and its relationship to depression among Australian primary school children. *Personality and Individual Differences* 1995;18(1):57-62.
6. Slee PT, Rigby K. The relationship of Eysenck's personality factors and self-esteem to bully-victim behavior in Australian schoolboys. *Personality and Individual Differences* 1993;14(2):371-373.
7. Whitney I, Rivers I, Smith PK, Sharp S. The Sheffield project: methodology and findings. In: Smith PK, Sharp S, editors. *School bullying: Insights and Perspectives*. London: Routledge, 1994:84-107.
8. Olweus D. Bully/Victim Problems among schoolchildren: Basic facts and effects of a school based intervention program. In: Pepler DJ, Rubin KH, editors. *The development and treatment of childhood aggression*. Hillsdale, NJ: Erlbaum, 1991:411-448.
9. Pepler DJ, Craig WM, Ziegler S, Charach A. An evaluation of an anti-bullying intervention in Toronto schools. *Canadian Journal of Community Mental Health* 1994;13(2):95-110.
10. Olweus D. *Bullying at school: What we know and what we can do*. Oxford: Blackwell, 1993.
11. Pepler DJ, Craig WM, Ziegler S, Charach A. A school-based anti-bullying intervention: preliminary evaluation. In: Tattum D, editor. *Understanding and managing bullying*. Oxford: Heinemann, 1993:76-91.
12. Pintabona Y, Cross, D., Hmilton, G., & Hall, M. A Delphi study of successful practice in the prevention, reduction and management of bullying in schools. Bentley, Western Australia: Curtin University of Technology, Centre for Health Promotion Research, 2000.
13. Thompson D, Arora T. Why do children bully? An evaluation of the long-term effectiveness of a whole-school policy to minimize bullying. *Pastoral Care in Education* 1991:8-12.
14. Arora CMJ. Is there any point in trying to reduce bullying in secondary schools?: A two year follow up of a whole-school anti-bullying policy in one school. *Educational Psychology in Practice* 1994;10(3):155-162.
15. Craig WM, Pepler D, Atlas R. Observations of bullying in the playground and in the classroom. *School Psychology International* 2000;21(1).
16. Arora CMJ. Bullying - Action and intervention. *Pastoral Care in Education* 1989;7:44-47.
17. Craig WM. The relationship among bullying, victimisation, depression, anxiety, and aggression in elementary school children. *Personality and Individual Differences* 1998;24(1):123-130.
18. Farrington DP. Understanding and preventing bullying. In: Tonny M, Morris N, editors. *Crime and Justice*. Chicago: University of Chicago Press, 1993.
19. Kumpulainen K, Rasanen E, Henttonen I, Almqvist F, Kresanov K, Linna S, et al. Bullying and psychiatric symptoms among elementary school-age children. *Child Abuse and Neglect* 1998;22(7):705-717.
20. Roland E. Bullying: The Scandinavian research tradition. In: Tattum DP, Lane DA, editors. *Bullying in schools*. Stoke-on-Trent: Trentham Books, 1989:21-32.
21. Rigby K. The relationship between reported health and involvement in bully/victim problems among male and female secondary schoolchildren. *Journal of Health Psychology* 1998;3(4):465-476.
22. Smith PK, Sharp S. The problem of school bullying. In: Smith PK, Sharp S, editors. *School bullying: Insights and perspectives*. London: Routledge, 1994.
23. Ahmad Y, Smith P. Bullying in schools and the issue of sex differences. In: Archer J, editor. *Male Violence*. London: Routledge, 1994.
24. Salmivalli C, Kaukiainen A, Kaistaniemi L, Lagerspetz KM. Self-evaluated self-esteem, peer evaluated self-esteem and defensive egotism as predictors of adolescents' participation in bullying situations. *Personality and Social Psychology Bulletin* 1999;25(10):1268-1278.
25. Jones E. Practical considerations in dealing with bullying in secondary school. In: Elliot M, editor. *Bullying: A practical guide to coping for schools*. Harlow: Longman, 1991.
26. Rigby K. *Bullying in schools and what to do about it*. Melbourne: ACER, 1996.
27. Whitney I, Smith PK. A survey of the nature and extent of bullying in junior/middle and secondary schools. *Educational Research* 1993;35(1):3-25.

28. Sharp S, Thompson D, Arora T. How long before it hurts?: An investigation into long-term bullying. *School Psychology International* 2000;21(1):37-46.
29. Forero R, McLellan L, Rissel C, Bau a, A. Bullying behavior and psychosocial health among school students in New South Wales, Australia: cross sectional survey. *British Medical Journal* 1999;319:344-348.
30. Roland E. A system oriented strategy against bullying. In: Roland E, Munthe E, editors. *Bullying: An international perspective*. London: David Foulton, 1989:143-151.
31. Rigby K, Slee PT. Dimensions of interpersonal relation among Australian children and implications for psychological well-being. *The Journal of Social Psychology* 1993;133(1):33-42.
32. Hoover J, Hazler RJ. Bullies and victims. *Elementary School Guidance and Counselling* 1991;25(3).
33. Boulton MJ, Underwood K. Bully/victim problems among middle school children. *British Journal of Ediucational Psychology* 1992;62:73-87.
34. Kochenderfer BJ, Ladd GW. Peer victimization: manifestations and relations to school adjustment in kindergarten. *Journal of School Psychology* 1996;34(3):267-283.
35. Kochenderfer BJ, Ladd GW. Peer victimization: cause or consequence of school maladjustment. *Child Development* 1996;67:1305-1317.
36. Berthold KA, Hoover JH. Correlates of bullying and victimization among intermediate students in the midwestern USA. *School Psychology International* 2000;21(1):65-78.
37. Williams K, Chambers M, Logan S, Robinson D. Association of common health symptoms with bullying in primary school children. *British Medical Journal* 1996;313:17-19.
38. Rigby K, Slee PT. Bullying among Australian school children: reported behavior and attitudes toward victims. *The Journal of Social Psychology* 1991;131(5):615-627.
39. Austin S, Joseph S. Assessment of bully/victim problems in 8 to 11year-olds. *British Journal of Educational Psychology* 1996;66:447-456.
40. Kaltiala-Heino R, Rimpela M, Marttunen M, Rimpali A, Rantanen P. Bullying, depression, and suicidal ideation in Finnish adolescents: school survey. *British Medical Journal* 1999;319(348-351).
41. Rigby K. Suicidal ideation and bullying among Australian secondary school students. *Australian Educational and Developmental Psychologist* 1998;15(1):45-61.
42. Slee PT. Situational and interpersonal correlates of anxiety associated with peer victimisation. *Child Psychiatry and Human Development* 1994;25(2):97-107.
43. Olweus D. Bullying or peer abuse at school: facts and intervention. *Current Directions in Psychological Science* 1995;4(6):196-200.
44. Gilmartin BG. Peer group antecedents of severe love-shyness in males. *Journal of Personality* 1987;55(3):467-489.
45. Rigby K, Cox I. The contribution of bullying at school and low self-esteem to acts of delinquency among Australian teenagers. *Personality and Individual Differences* 1996;21(4):609-612.
46. Randall P. A factor study on the attitudes of children to bullying. *Educational Psychology in Practice* 1995;11(3):22-26.
47. Tulloch M. Gender differences in bullying experiences and attitudes to social relationships in high school students. *Australian Journal of Education* 1995;39(3):279-293.
48. Rigby K. New thinking about bullying in schools. *Independent Education* 1995;July:3-6.
49. Salmivalli C. Participant role approach to school bullying: implications for interventions. *Journal of Adolescence* 1999;22:453-459.
50. Atlas RS, Pepler DJ. Observations of bullying in the classroom. *The Journal of Educational Research* 1998;92(2):86-99.
51. Cowie H, Sharp S. Tackling bullying through the curriculum. In: Smith PK, Sharp S, editors. *School bullying: insights and perspectives*. London: Routledge, 1994:84-107.
52. Herbert G. A whole-curriculum approach to bullying. In: Tattum DP, Lane DA, editors. *Bullying in Schools*. Stoke-on-Trent: Trentham Books, 1989:73-80.
53. Foster P, Arora T, Thompson D. A whole-school approach to bullying. *Pastoral Care in Education* 1990;8(3):13-17.
54. Slee PT. Bullying: A preliminary investigation of its nature and the effects of social cognition. *Early Child Development and Care* 1993;87(47-57).
55. Perry DG, Williard JC, Perry LC. Peers' perceptions of the consequences that victimized children provide aggressors. *Child Development* 1990;61:1310-1325.
56. Perry DG, Kusel SJ, Perry LC. Victims of peer aggression. *Developmental Psychology* 1988;24(6):807-814.
57. Slee PT, Rigby K. Australian school children's self appraisal of interpersonal relations: The bullying experience. *Child Psychiatry and Human Development* 1993;23(4):273-281.

58. Sharp S. Self-esteem, response style and victimisation: possible ways of preventing victimisation through parenting and school based training programs. *School Psychology International* 1996;17:347-357.

59. Sharp S, Cowie H. Empowering pupils to take positive action against bullying. In: Smith PK, Sharp S, editors. *School bullying: insights and perspectives.* London: Routledge, 1994:108-131.

60. Arora T. The use of victim support groups. In: Smith PK, Thompson D, editors. *Practical approaches to bullying.* London: David Fulton, 1991.

61. Smith PK. Bullying in schools: The UK experience and the Sheffield Anti-Bullying project. *The Irish Journal of Psychology* 1997;18(2):191-201.

62. Johnson D, Lewis G. Do you like what you see? Self-perceptions of adolescent bullies. *British Educational Research Association* 1999:665-677.

63. Ladd GW, Kochenderfer BJ, Coleman CC. Friendship quality as a predictor of young children's early school adjustment. *Child Development* 1996;67:1103-1118.

64. Boulton MJ, Trueman M, Chau C, Whitehand C, Amatya K. Concurrent and longitudinal links between friendship and peer victimization: implications for befriending interventions. *Journal of Adolescence* 1999;22:461-466.

65. Oxenberry K, Rigby K, Slee PT, editors. I'm a victim - stop bullying. Children's Peer Relations: Conference Proceedings; 1994; Adelaide. Institute of Social Research, University of South Australia.

66. Rigby K, Cox I, Black G. Cooperativeness and bully/victim problems among Australian schoolchildren. *Journal of Social Psychology* 1997;137(3):357-368.

67. Bay-Hinitz AK, Peterson RF, Quilitch HR. Cooperative games: a way to modify aggressive and cooperative behaviors in young children. *Journal of Applied Behavior Analysis* 1994;27(3):435-447.

FRIENDLY SCHOOLS

bullying intervention project

Centre for Health Promotion Research
School of Public Health
Curtin University
Bentley Western Australia

CENTRE for HEALTH
PROMOTION RESEARCH

Curtin
UNIVERSITY OF TECHNOLOGY

Healthway

Appendix U

Friendly Schools Newsletter Items

OUR FRIENDLY SCHOOL

INTRODUCTION

Our school is involved in the Friendly Schools Bullying Intervention Project. This project is being conducted by the Centre for Health Promotion Research at Curtin University.

The aim of the Friendly Schools Project is to assess the effectiveness of a whole school intervention aimed at preventing bullying in primary schools.

Our Year 4 teachers received training and resources to teach ten lessons addressing bullying prevention to our Year 4 students. Our school has also developed a committee that will oversee the development or revision of a school bullying policy and other whole-school activities to promote awareness and response to bullying. We would like to engage all members of the school community in these activities.

Through our participation in the Friendly Schools Project our school aims to:

- Develop in our students the skills and values required to respond to bullying appropriately, to support students who are bullied and to not bully others;

- Engage parents and families in school activities to prevent bullying; and

- Develop a collaborative and united approach to preventing bullying in our school.

OUR FRIENDLY SCHOOL

WHAT IS BULLYING?

Bullying is:
- a behaviour that is repeated between the same individuals;
- that is undeserved and unjustifiable;
- that may be:
    - physical (such as hitting, kicking, spitting or pushing);
    - verbal (such as hurtful teasing and name-calling, spreading nasty rumours or demanding money or other things); and/or
    - psychological (such as excluding someone on purpose, ignoring, using threatening gestures, hiding someone's belongings)
- the behaviour is intended to cause fear, distress, or harm to another;
- and is conducted by a more powerful individual or group;
- against a less powerful individual who is unable to resist.

IS FIGHTING BULLYING?
While fighting between two students is of concern, it may not be bullying. It is the presence of a power imbalance that distinguishes bullying from fighting, conflict, violence and disagreement. It is this imbalance that makes mistreatment of the victim possible.

IS TEASING BULLYING?
Teasing, done in mutual fun and jest, where all individuals are involved and feel capable of responding, is *not* bullying. However, teasing that is done in a mean and hurtful way by a powerful person to a person who feels powerless to respond or to stop what is happening, is bullying.

OUR FRIENDLY SCHOOL

TALKING WITH YOUR CHILDREN ABOUT BEING BULLIED

Many children who are bullied do not tell. Research suggests that about 50% of boys and 40% of girls who are bullied weekly do not tell anyone. Children often think that talking about a bullying situation is like 'dobbing ' on one another.

> *'Dobbing'* is when a person tries to get attention or to get someone else into trouble.
>
> *Asking for help* is when someone feels the situation is out of his/her control and he/she is unable to deal with it alone. If anyone sees someone else in this situation he/she should also ask for help.

Talking to your child about being bullied can often be very difficult and it helps to be aware of your child's needs and feelings.

Don't clam up

- A child needs to:
- Feel heard and believed,
- Talk openly about what is going on,
- Develop trust that the adult they tell will help him/her,
- Feel that there is some hope things will get better,
- Feel some control over the situation,
- Learn self-protective and assertive behaviours, and
- Build or maintain confidence and self-esteem.
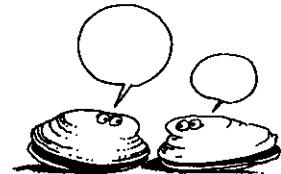
For children to regain confidence, they need to feel they have some control and feel secure by being heard, understood and supported.

OUR FRIENDLY SCHOOL

TALKING WITH YOUR CHILDREN ABOUT BULLYING OTHERS

All children are capable of bullying at some time and it is important that parents respond to the situation in a calm and helpful manner. Bullying situations can be complex and parents need to hear the child's point of view. There may be peer group pressures or emotional pressures, which encourage him/her to behave in ways that would normally be uncharacteristic.

Helpful parent responses to bullying:
- ◆ Listen to the child's point of view about what is going on,
- ◆ Discuss what might happen as a result of their actions,
- ◆ Focus on the bullying behaviour as being inappropriate, not the child,
- ◆ Use a problem solving approach (what do you think you could do to make this situation better?),
- ◆ Involve the child directly in the solutions (what could you do to make things better?), and
- ◆ Help the child to develop an understanding of how this behaviour may effect people.

Sometimes children are unaware of the effects bullying behaviour can have on others. It may be useful to use examples in stories or television to show the child examples of bullying behaviours and the effects of these behaviours on others. Fairy tales and fables e.g.: Three Little Pigs or more current movies e.g.: A Bugs Life illustrate bullying behaviour and it's effects.

OUR FRIENDLY SCHOOL

HELPING YOUR CHILD
RESPOND EFFECTIVELY TO BULLYING

It is natural for parents to feel protective towards their child. However, an emotional parent reaction often causes the child more distress. Parent responses that have been found to be helpful involve parents calming their own emotions and carefully working out actions that will most benefit the child.

The process of helping a child whom discloses bullying can be difficult. In order for the child to feel comfortable and supported, parents need to help the child to first talk about the situation. For the child to deal with the situation, parents need to allow the child to offer his/her own solutions and then support him/her in his/her effort to overcome the problem.

Helpful parent responses:
- Trust and listen to your child. Acknowledge that you understood that he/she is upset by the behaviour of the other child/children.
- Encourage your child to discuss the situation.
- Take the child's concerns seriously without being over protective.
- Remind your child that he/she has the right to feel safe and happy.
- Keep in mind that there may be other factors involved in the situation that you may not aware of.
- Be aware of your own responses and react in a calm, helpful and supportive manner.
- Make sure your child knows how to get help and support. Talk to them about telling a trusted adult e.g. parent, teacher, family friend.
- Help your child develop friendship skills and relationships. Having one good friend has been shown to make a difference on the impact of bullying.

Encourage your child to participate in activities other than those related to the school so they have other friendship groups.

OUR FRIENDLY SCHOOL

TALKING WITH YOUR CHILDREN ABOUT BYSTANDERS

Bullying can continue because people who are involved do not talk about it and seek help, including bystanders. *A bystander is a person who sees the bullying or knows that it is happening to someone else.*

Bullying behaviour can sometimes be made worse when children don't know whom to turn to for help. Parents can help by offering to talk about the problem and providing support. All members of the community need to take responsibility to respond to bullying behaviour by <u>not</u> remaining silent and talking about the issue.

It is important that bullying is seen as a 'behaviour' and that a child not be labelled a 'bully'. The message children should receive is that bullying behaviour is unacceptable, not the child who does it. It is easy to focus on "busting" the bullies. This focus promotes force and exclusion as a means of getting ones way, in other words, exactly what bullying is!

Helpful adult responses to bullying:
♦ Be aware of your own behaviours as a role model to your child.
♦ Develop a clear family policy that 'put downs' are not OK.
♦ Openly discuss the topic of bullying (stories in books or on television can lead to discussion about bullying situations).
♦ Use a problem solving approach by trying to get the child to discuss solutions and consequences to problems they see or are involved in)
♦ Problem solve as a whole family. This can help the child feel valued and supported as well as make the other family members aware of solutions.
♦ Listen to the child's point of view on the topic of bullying.
♦ Provide advice on what might happen as a result of bullying behaviour and why it is important to tell someone.
♦ Help the child to understand the problem of bullying and show empathy and understanding of how people might feel if they are bullied.

OUR FRIENDLY SCHOOL

ENCOURAGING YOUR CHILD NOT TO BULLY OTHERS

Just as it is vitally important to have policy and rules about bullying at the school level, consistent rules and attitudes at home can have a positive effect on helping your child to not bully others.
Parents can:

- Discuss the issue of bullying behaviour together as a family and establish a common understanding.
- Work together as a family to establish simple rules and expectations amongst the family members.
- Encourage your child to openly discuss issues with the family.
- Be consistent with rules in the family and give positive reinforcement and praise when children follow family rules.
- Make sure that your child understands the consequences of positive as well as negative behaviour.
- Talk about friendship and cooperation and help your child to develop skills in these areas.
- Support and encourage your child to develop friendships and social skills both within the school environment and in other areas of their lives.

Discuss with your children positive ways of getting what they want in life and feeling good about themselves and support them in their efforts to use positive strategies.

OUR FRIENDLY SCHOOL

UNDERSTANDING THE SCHOOL'S RESPONSES TO BULLYING

Bullying situations are often complex social situations so finding out the facts to define a clear case for punishment can take a very long time. Meanwhile the bullying can continue and in some cases hostilities increase. Punishment may sometimes help to discourage the bullying; however, this is rather like using 'bullying to stop bullying'.

The school priority is to stop the bullying and to try to reduce the chance of it reoccurring. The key to stopping bullying is getting those involved to talk about what is happening and decide on some strategies to overcome the problem. This provides a model of positive behaviours and encourages problem solving when dealing with conflict.

Your Friendly School Core Committee has been working to develop a whole school policy on bullying which provides students, teachers, staff and parents with a sense of direction and understanding of the school's commitment to reducing bullying behaviour at school.

By working together, the whole school community can:
*   encourage long term prevention and positive attitudinal change;
*   open communication at all levels, developing a secure environment to break down the secrecy of bullying;
*   voice the attitude that bullying is unacceptable behaviour anywhere in the community; and
*   display a positive unified approach to establishing a friendly and safer environment for everyone in the community.
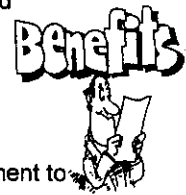
Remember every child has the right to feel safe and happy at school and we can make this a reality if we work together.

OUR FRIENDLY SCHOOL

TAKING A WHOLE SCHOOL APPROACH TO BULLYING

One of the major aims of the Friendly Schools Project is to raise the level of awareness and understanding about bullying. A common outcome of raising awareness and understanding of any issue is an increase in sensitivity to that issue. Many schools involved in the Project have had increases in the student reporting of bullying issues. This indicates that students are recognising bullying situations and are perhaps feeling safe to talk about bullying within the school environment. This does not necessarily mean there is more bullying, rather that the students are more aware of the issue.

Raising awareness and increasing communication about bullying is the first step towards overcoming the associated problems and developing a friendly and safer environment for the children in your school.

As parents you can support this process by:

- encouraging your child to talk about bullying both at school and at home;
- cooperating with the class teacher to share valuable information about how your child is feeling;
- talking and working with your school to help achieve the most positive outcome for your child;
- becoming familiar with your school's bullying policy, which outlines how your school plans to deal with bullying; and
- trying to support the methods used by your school when talking about bullying with your child at home.

It is important for children to see their parents and the school working together with a common desire to help them feel safer and happier at school.

OUR FRIENDLY SCHOOL

THE METHOD OF
SHARED CONCERN

The key to stopping bullying is getting those involved to talk about what is happening and decide on some strategies to overcome the problem. The Friendly Schools Project recommends that schools use the Method of Shared Concern, which concentrates on finding a solution to the problem.

The overall aim of the Method of Shared Concern is to establish ground rules, which will enable students to get along cooperatively and safely in the school.
The key principles of the Method of Shared Concern are:
- bullying is a social behaviour that generally occurs in a group setting;
- the aim of the approach is to develop empathy and concern for others;
- by working with students involved in the bullying and some of the onlookers, the situation can change so the person bullying can try more appropriate behaviours;
- by developing a sense of shared concern for the bullied students, a shift in bullying behaviour can be achieved; and
- punishment models and reinforces the use of power as way to get your needs met and also places the bullied student at risk of revenge.
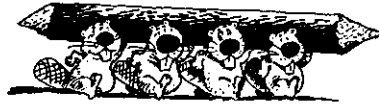
Individual discussions are held, with each of the students involved in the bullying situation. Each student is asked to acknowledge there is a problem and suggest ways in which he/she personally could help to improve the situation. The process is ongoing with continued follow-up meetings, discussions and planning. This situation gives the student the opportunity to change and improve his/her attitudes and behaviour and to put these into practice in a supportive environment.

Schools using this method have reported excellent results in reducing bullying behaviour; however, bullying can be a difficult and complex problem, which takes time and patience to resolve properly. Schools that have taken on the Method of Shared Concern are obviously committed to the safety and well-being of all students. By being patient and supportive you can contribute to the long-term reduction of bullying in your school.

Appendix W

Pre-intervention Bullying Type Frequency and Group Differences

Bullying Type	N	Never % (n)	Sometimes % (n)	Lots of times % (n)	χ^2	V
Made fun of and teased in a hurtful way	263				1.293	.065
Intervention		34.5 (51)	46.6 (69)	18.9 (28)		
Control		33.0 (38)	40.0 (46)	27.0 (31)		
Called mean and hurtful names	261				0.231	.027
Intervention		35.8 (53)	39.9 (59)	24.3 (36)		
Control		32.7 (37)	39.8 (45)	27.4 (31)		
Ignored, not allowed to join in, or left out on purpose	262				0.474	.039
Intervention		42.2 (62)	36.1 (53)	21.8 (32)		
Control		38.3 (44)	34.8 (40)	27.0 (31)		
Hit kicked or pushed around	267				3.751	.109
Intervention		44.0 (66)	38.0 (57)	18.0 (27)		
Control		42.7 (50)	38.5 (45)	18.8 (22)		
Lies or nasty stories spread	260				0.385	.036
Intervention		46.6 (68)	28.1 (41)	25.3 (37)		
Control		38.6 (44)	28.9 (33)	32.5 (37)		
Money or other things taken	255				0.741	.049
Intervention		69.2 (99)	22.4 (32)	8.4 (12)		
Control		67.0 (75)	19.6 (22)	13.4 (15)		
Made afraid of getting hurt	258				0.089	.017
Intervention		53.5 (77)	28.5 (41)	18.1 (26)		
Control		46.5 (53)	27.2 (31)	26.3 (30)		

Appendix X

Pre-intervention Means (Standard Deviations) and Group Differences in

Self- and Parent-Report Psychological Health

	Intervention		Control			
	n	M (SD)	n	M (SD)	t	η^2
Self-report						
Victimisation	167	5.09 (3.53)	142	5.48 (3.75)	-0.943	.003
Depressive symptoms	175	14.83 (9.54)	145	15.52 (10.38)	-0.619	.001
Anxiety symptoms	175	14.33 (6.83)	144	14.98 (7.00)	-0.845	.002
Peer relations self-concept	173	28.13 (9.04)	143	26.42 (8.97)	1.682	.009
General self-worth	173	31.37 (7.64)	143	29.83 (7.88)	1.749	.010
Parent-report						
Depressive symptoms	141	11.52 (4.89)	115	10.57 (5.33)	1.476	.009
Anxiety symptoms	141	11.30 (5.03)	114	10.54 (4.93)	1.206	.006
Somatic symptoms	141	4.97 (4.16)	115	4.61 (4.15)	0.685	.002

Appendix Y

Pre-intervention Differences on Self- and Parent-Report Demographic Variables for

the Post-test Drop-out and Retained Samples

	Drop-out (Student $n = 28$) (Parent $n = 56$)		Retained (Student $n = 293$) (Parent $n = 201$)		
	M (SD)	n (%)	M (SD)	n (%)	Group Difference[a]
Student-report					
Age	8.64 (.56)	28 (100)	8.60 (.56)	288 (98.3)	$t(314) = 0.351$
Gender					
Female		14 (50)		143 (48.8)	
Male		14 (50)		150 (51.2)	$\chi^2(1) = 0.015$
IRSED	1008.79 (65.82)	28 (100)	1005.19 (61.92)	293 (100)	$t(319) = 0.292$
School Size	664.93 (182.86)	28 (100)	641.44 (169.78)	293 (100)	$t(319) = 0.695$
Parent-report					
Age					
Under 25-29		7 (12.5)		20 (9.9)	
30-34		16 (28.6)		52 (25.9)	
35-39		18 (32.1)		74 (36.8)	
40+		14 (25.0)		52 (25.9)	$\chi^2(3) = 0.673$
Not stated		1 (1.8)		3 (1.5)	
Relationship to Child					
Mother		51 (91.1)		183 (91.0)	
Father		4 (7.1)		13 (6.5)	
Other		0 (0)		0 (0)	$\chi^2(1) = 0.028$[b]
Not stated		1 (1.8)		5 (2.5)	
Education					
Year 10 or lower		16 (28.6)		56 (27.9)	
Year 11or 12		16 (28.6)		42 (20.9)	
Trade/College		10 (17.9)		47 (23.4)	
University		9 (16.1)		42 (20.9)	$\chi^2(3) = 2.277$[b]
Other		0 (0)		0 (0)	
Not stated		5 (8.9)		14 (7.0)	
IRSED	1001.68 (61.98)	56 (100)	1009.17 (62.25)	201 (100)	$t(255) = -0.797$
Country of Birth					
Australia & New Zealand		41 (73.2)		137 (68.2)	
United Kingdom & Ireland		9 (16.1)		42 (20.9)	
Other		5 (8.9)		16 (8.0)	$\chi^2(2) = 0.714$
Not stated		1 (1.8)		6 (3.0)	

Note. IRSED = Index of Relative Socio-Economic Disadvantage.

[a]Analyses do not include the category 'not stated'. [b]Category of other not included in analysis.

Appendix Z

Pre-intervention Differences on Self- and Parent-Report Demographic Variables for

the Follow-up Drop-out and Retained Samples

	Drop-out (Student n = 25) (Parent n = 56)		Retained (Student n = 296) (Parent n = 201)		
	M (SD)	*n (%)*	*M (SD)*	*n (%)*	Group Difference[a]

Student-report

Age	8.68 (.56)	25 (100)	8.60 (.56)	291 (98.3)	$t(314)$ = 0.678
Gender					
Female		15 (60)		142 (48)	
Male		10 (40)		154 (52)	$\chi^2(1)$ = 1.334
IRSED	996.199 (66.10)	25 (100)	1006.29 (61.88)	296 (100)	$t(319)$ = -0.779
School size	650.24 (191.44)	25 (100)	642.92 (169.27)	296 (100)	$t(319)$ = 0.206

Parent-report

Age					
Under 25-29		6 (10.7)		21 (10.4)	
30-34		15 (26.8)		53 (26.4)	
35-39		21 (37.5)		71 (35.3)	
40+		11 (19.6)		55 (27.4)	$\chi^2(3)$ = 1.004
Not stated		3 (5.4)		1 (0.5)	
Relationship to child					
Mother		49 (87.5)		185 (92.0)	
Father		4 (7.1)		13 (6.5)	$\chi^2(1)$ = 0.064[b]
Other		0 (0)		0 (0)	
Not stated		3 (5.4)		3 (1.5)	
Education					
Year 10 or lower		15 (26.8)		57 (28.4)	
Year 11or 12		13 (23.2)		45 (22.4)	
Trade/College		11 (19.6)		46 (22.9)	
University		8 (14.3)		43 (21.4)	$\chi^2(3)$ = 0.852[b]
Other		0 (0)		0 (0)	
Not stated		9 (16.1)		10 (5.0)	
IRSED	999.27 (62.64)	56 (100)	1009.84 (61.97)	201 (100)	$t(255)$ = -1.126
Country of birth					
Australia & New Zealand		34 (60.7)		144 (71.6)	
United Kingdom & Ireland		15 (26.8)		36 (17.9)	
Other		4 (7.1)		17 (8.5)	$\chi^2(2)$ = 2.586
Not stated		3 (5.4)		4 (2.0)	

Note. IRSED = Index of Relative Socio-Economic Disadvantage.

[a]Analyses do not include the category 'not stated'. [b]Category of other not included in analysis.

Appendix AA

Pre-intervention Frequencies and Differences in Bullying Type Between

Post-intervention Drop-out and Retained Students

Type	N	Never % (n)	Sometimes % (n)	Lots of times % (n)	χ^2	V
Made fun of and teased in a hurtful way	310					
Drop-out		44.4 (12)	37.0 (10)	18.5 (5)		
Retained		33.6 (95)	43.8 (124)	22.6 (64)	1.293	.065
Called mean and hurtful names	309					
Drop-out		38.5 (10)	38.5 (10)	23.1 (6)		
Retained		34.3 (97)	39.2 (111)	26.5 (75)	0.231	.027
Ignored, not allowed to join in, or left out on purpose	311					
Drop-out		44.4 (12)	29.6 (8)	25.9 (7)		
Retained		40.1 (114)	36.3 (103)	23.6 (67)	0.474	.039
Hit kicked or pushed around	315					
Drop-out		48.1 (13)	22.2 (6)	29.6 (8)		
Retained		43.8 (126)	38.5 (111)	17.7 (51)	3.751	.109
Lies or nasty stories spread	304					
Drop-out		48.1 (13)	29.6 (8)	22.2 (6)		
Retained		44.8 (124)	27.4 (76)	27.8 (77)	0.385	.036
Money or other things taken	306					
Drop-out		60.7 (17)	28.6 (8)	10.7 (3)		
Retained		67.6 (188)	21.6 (60)	10.8 (30)	0.741	.049
Made afraid of getting hurt	308					
Drop-out		53.6 (15)	25.0 (7)	21.4 (6)		
Retained		51.1 (143)	27.5 (77)	21.4 (60)	0.089	.017

Appendix AB

Pre-intervention Frequencies and Differences in Bullying Type Between Follow-up

Drop-out and Retained Students

Type	N	Never % (n)	Sometimes % (n)	Lots of times % (n)	χ^2	V
Made fun of and teased in a hurtful way	310					
Drop-out		44.0 (11)	40.0 (10)	16.0 (4)		
Retained		33.7 (96)	43.5 (124)	22.8 (65)	1.253	.064
Called mean and hurtful names	309					
Drop-out		39.1 (9)	43.5 (10)	17.4 (4)		
Retained		34.3 (98)	38.8 (111)	26.9 (77)	1.002	.057
Ignored, not allowed to join in, or left out on purpose	311					
Drop-out		37.5 (9)	29.2 (7)	33.3 (8)		
Retained		40.8 (117)	36.2 (104)	23.0 (66)	1.363	.066
Hit kicked or pushed around	315					
Drop-out		54.2 (13)	20.8 (5)	25.0 (6)		
Retained		43.3 (126)	38.5 (112)	18.2 (53)	3.000	.098
Lies or nasty stories spread	304					
Drop-out		40.0 (10)	36.0 (9)	24.0 (6)		
Retained		45.5 (127)	26.9 (75)	27.6 (77)	0.954	.056
Money or other things taken	306					
Drop-out		60.0 (15)	28.0 (7)	12.0 (3)		
Retained		67.6 (190)	21.7 (61)	10.7 (30)	0.645	.046
Made afraid of getting hurt	308					
Drop-out		56.0 (14)	24.0 (6)	20.0 (5)		
Retained		50.9 (144)	27.6 (78)	21.6 (61)	0.250	.028

Appendix AC

Pre-intervention Means (Standard Deviations) for Self- and Parent-Report

Psychological Health Variables and Drop-out and Retained Group Differences

at Post-intervention and Follow-up

Measure and Time	Drop-out M (SD)	n	Retained M (SD)	n	Group Difference
	Student-report				
Victimisation					
Post-intervention	5.15 (3.46)	28	5.29 (3.66)	281	t(307) = -0.193
Follow-up	5.18 (3.59)	25	5.28 (3.63)	284	t(307) = -0.128
Depressive symptoms					
Post-intervention	13.51 (7.75)	28	15.30 (10.10)	292	t(318) = -0.913
Follow-up	13.84 (7.71)	25	15.26 (10.09)	295	t(318) = -0.684
Anxiety symptoms					
Post-intervention	15.11 (6.73)	28	14.58 (6.93)	291	t(318) = 0.391
Follow-up	15.35 (6.82)	25	14.56 (6.92)	294	t(318) = 0.544
Peer relations self-concept					
Post-intervention	28.48 (9.48)	28	27.25 (9.00)	288	t(316) = 0.692
Follow-up	28.01 (9.68)	25	27.30 (9.00)	291	t(316) = 0.377
General self-worth					
Post-intervention	29.79 (9.34)	28	30.76 (7.62)	288	t(316) = -0.626
Follow-up	30.06 (9.73)	25	30.73 (7.60)	291	t(26.525) = -0.407
	Parent-report				
Depressive symptoms					
Post-intervention	10.50 (5.14)	56	11.24 (5.09)	200	t(254) = -0.985
Follow-up	11.20 (4.73)	55	11.06 (5.21)	201	t(254) = 0.182
Anxiety symptoms					
Post-intervention	11.29 (4.78)	56	10.87 (5.05)	199	t(254) = 0.548
Follow-up	10.92 (4.92)	55	10.97 (5.02)	200	t(254) = -0.062
Somatic symptoms					
Post-intervention	5.07 (5.38)	56	4.74 (3.75)	200	t(70.617) = 0.442
Follow-up	5.59 (5.20)	55	4.60 (3.80)	201	t(70.581) = 1.328