

Review

What Do We Know about Bullying in Schoolchildren with Disabilities? A Systematic Review of Recent Work

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Abstract: Bullying is a serious problem that particularly affects schoolchildren with disabilities. However, studies in this group have been carried out on smaller cohorts and the results obtained are, therefore, less representative and sometimes inconclusive. The purpose of this paper is to perform a systematic review of the work carried out in recent years, including the analysis of several variables related to the sample, the methodology applied and the type of bullying. The guidelines set down by the Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) statement were followed in three phases. The total sample consisted of 55 children who fulfilled the inclusion criteria. The results reveal that half the studies were conducted in cohorts of less than 250 schoolchildren and drew no distinctions between the different types of disabilities. Furthermore, there is no consensus regarding the methodology used, and no specialized instruments were used. Hardly any specific interventions have been performed into the type of bullying investigated, in which victimization is the predominant mode. We concluded that there is an urgent need to increase the number of studies, including a larger number of individuals and using specialized instruments, in order to obtain more solid results. Such studies will allow us to create specific prevention and intervention programs to address the bullying of schoolchildren with disabilities.



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1. Introduction

Bullying, which is a type of violence among peers, is expressed by physical, psychological or relational abuse, in which the bully's actions are clearly intentional. Bullies take advantage of the unequal power status over their victims, who suffer this abuse over an extended period of time [1]. It is a complex, immoral phenomenon which affects children all over the world and has a prevalence of around 36% (see meta-analysis by [2]). This social interaction in which schoolchildren are involved can have academic, social and personal consequences, regardless of whether they adopt the role of victims, bullies, bully-victims or witnesses [3]. For these reasons, the number of studies into this antisocial behavior is on the rise [4].

The World Health Organization estimates in its World Report on Disability that more than 5% of children aged 0 to 14 have a disability [5]. Autism spectrum disorders, developmental delays, conduct disorders and learning difficulties are among the problems mentioned [5]. Schoolchildren with disabilities are more vulnerable to an imbalance of power, which could be a risk factor for bullying [6]; however, studies into this group of people are few compared to those into students without disabilities [7]. There could be several reasons for this: firstly, providing them with the necessary support to cover their educational needs is given priority, in order to meet academic targets and have a better chance of inclusion [8]; secondly, the fact that there are fewer researchers specialized in bullying in the field of disability [9]; thirdly, the idiosyncratic characteristics of the students'

own disabilities, such as the difficulty to describe their own, and others', behavior. This aspect could be the main reason why the research has focused on other areas [10].

The studies have shown that schoolchildren with a disability are more likely to be victims of bullying than non-disabled students [11]. Moreover, the research shows that the trauma they suffer is as emotionally, psychologically and socially damaging as that experienced by non-disabled people [12]; additionally, they may have fewer friends [13] and develop externalizing symptoms over time, such as attacking their peers as a strategy for coping with victimization [7].

One of the first systematic reviews of research into schoolchildren with a disability and traditional bullying was carried out by [14], who analyzed 32 articles. The inclusion criteria allowed them to have a wide, diverse sample which included subjects of different ages, including adults (who were asked to recall their experiences at school) and a wide range of disabilities, which were divided into those with visible and non-visible symptoms. The authors claimed that the children with a mild level of disability experienced less victimization than those with severe cognitive or physical disabilities. They also reported that those with a disability who attended special classes or went to segregated schools were more often victimized than those in inclusive environments. A considerable number of articles in this systematic review, almost 60%, came from Europe, and were based on small samples, with almost 75% of them containing less than 250 participants and four of which included adults recalling their experiences as victims of bullying. Systematic reviews or meta-analysis have been carried out since then, focusing on specific aspects. In this way, ref. [10] carried out a meta-analysis with only six studies of bullying prevention and intervention in Pre-K to Grade 12; in four of the six studies, the schoolchildren presented a variety of disabilities. The authors concluded that the results can only give descriptive outcomes, since the studies differed in structure, procedure and methodology.

In addition, there have been reviews of schoolchildren with a specific disability or disorder. Ref. [15] carried out a review based on 11 studies of young people with an intellectual disability, with ages ranging from 6 to 21. The authors found significant differences in victimization rates (physical, verbal, relational and cybernetic) and higher overall levels, while experiences of perpetration differed according to the characteristics of the study. Ref. [16] carried out a meta-analysis based on 107 articles on schoolchildren with physical or sensory disabilities or chronic diseases with a total of 62,855 children and adolescents with a mean age of 13.8 years. The authors found that these children were more likely to be victims of bullying in general, and of physical, verbal, relational and cyberbullying specifically, but they were also more prone to commit physical and relational aggression in general. Ref. [17], in turn, reviewed 29 studies based on schoolchildren with Autism Spectrum Disorder (ASD) under the age of 18, finding that the prevalence index was higher than in those with under-age neurotypical development. Despite this, the studies are still scarce and use very small samples; moreover, a lack of specialized tools was identified, which meant that most of the studies involved had to use information gathered by third parties.

Lastly, only one review of online bullying has been found, conducted recently by [18] on young people under 21 with developmental disorders. The authors reported that subjects in segregated school settings report slightly higher prevalence rates of cyberbullying compared to those in inclusive school settings, especially among girls.

Since the review by [14], nobody has reviewed studies of bullying in students with disabilities, even though the concept of disabilities and definitions of abuse have changed considerably over the last few years. In addition, we consider it essential to carry out an analysis into bullying in students with disabilities in order to carry out more robust research into this group. For this reason, the main purpose of this article is to present a systematic review of bullying in children with disabilities since 2011, when the last comprehensive review on general disabilities and bullying was published. The main question this systematic review will try to answer is: What do we know about bullying in schoolchildren with disabilities? To answer this question, we will analyze the size of the

sample, the participants' age and the resources used, among other variables. Based on the revision carried out by [14], our first hypothesis is that there will be an absence of studies and that these will be mainly produced in developed countries. Following the revision on children with ASD by [14,17], the second hypothesis will be that the sample sizes will be small and mainly from primary or secondary grades. The third hypothesis, based on the work of [10], is that there will be major differences between the instruments used for the different studies.

2. Materials and Methods

2.1. Research Strategy

The current systematic review has followed the criteria pointed by the Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) [19] through an ad hoc Excel control list. The Population Intervention Comparison Outcome (PICO) strategy, specially adapted for this topic, was used to find the question formulation. Consequently, the three main investigators established three phases: phase 1 (initial exploratory research), phase 2 (systematic research) and phase 3 (manual research).

In phase 1, exploratory research was conducted, by browsing "bullying disab*" on Web of Science (WOS) and SCOPUS without defining the year. This asterisk is a truncation that will incorporate all possible combinations of the word "disab". The result was a total of 966 articles; "systematic review" was then included in the search, which produced 30 reviews, some of which were not related to the topic, did not answer the question or were not recent enough to account for new changes, such as the inclusion of Diagnostic and Statistical Manual of Mental Disorders (DSM-5) and the new intervention programs. From the first phase, the protocol was designed and the inclusion and exclusion criteria were established to increase the accuracy of the methodology [20].

WOS from Thomson Reuters and SCOPUS from Elsevier were used as scientific databases in the systematic research phase, since they had been used before to carry out studies into similar subjects [16,21]. The terminology used for both databases were "bullying" and "disab*" adding "and" to find research relating both concepts. The asterisk symbol "*" was used to include words containing the same prefix, such as "disability," "disabilities," "disabled" or "disabling." The research period established covered June to December 2019.

2.2. Inclusion and Exclusion Criteria

The inclusion criteria used for the articles in the final sample were: (a) studies focused on the educational field, (b) studies which included a school age population (childhood, primary and secondary education), (c) studies in which the disability was the main variable of the bullying, regardless of whether the methodology was qualitative, quantitative or mixed (d) accurate studies of publishing criteria, taking into account only articles published in relevant magazines, subjected to a process of double-blind peer review, (e) studies published after 2011.

The exclusion criteria were: (a) studies published before 2011, (b) studies focused on different conditions such as dyslexia, dyscalculia, attention deficit hyperactivity disorder, etc., or those articles focused on ASD, since a systematic review of this has recently been carried out [17], (c) studies with no previous sample in the educative field or with a sample of over 18-year-old students (d) theoretical papers and systematic reviews, (e) research based on bullying of non-disabled students, (f) articles published as chapters of books, conference abstracts, notes, etc.

2.3. Data Compilation

In phase 2, each investigator conducted blind systematic research, following the established protocol. They found 746 articles published after 2011, of which 353 were found in WOS and 393 in SCOPUS, with 260 articles were duplicated in both databases, which, consequently, had to be excluded. After revising the titles and summaries of the remaining

486 articles, 282 were excluded, since the topic was not related to coexistence or experiences at school, or the main aim, despite bearing some relation, was not about inclusion. In addition, chapters of books, conference abstracts, notes, etc. were ruled out, which left only 175 articles, which were analyzed under the established inclusion and exclusion criteria. In total, 63 of these 175 articles were rejected, since they were based on students with normal development, and 28 articles more since they were based on students over 18 years old who attended university or were in employment. A further 27 articles were discarded, 18 of which were theoretical articles and 9 systematic reviews. Finally, two more articles were excluded since they were instrumental or intervention proposals which had not been carried out. Thus, the final sample was composed of 55 articles. After a blind research review process, 98.18% coincidence was found among the authors and discrepancies were dealt with using the Delphi Method.

In phase 3, the researchers used Google Scholar to find the authors who had written more than four articles in phase 2. The objective was to learn about their career and check if there were any studies that could be classified as grey literature [20]. However, no more articles were included in the final sample (see Figure 1).

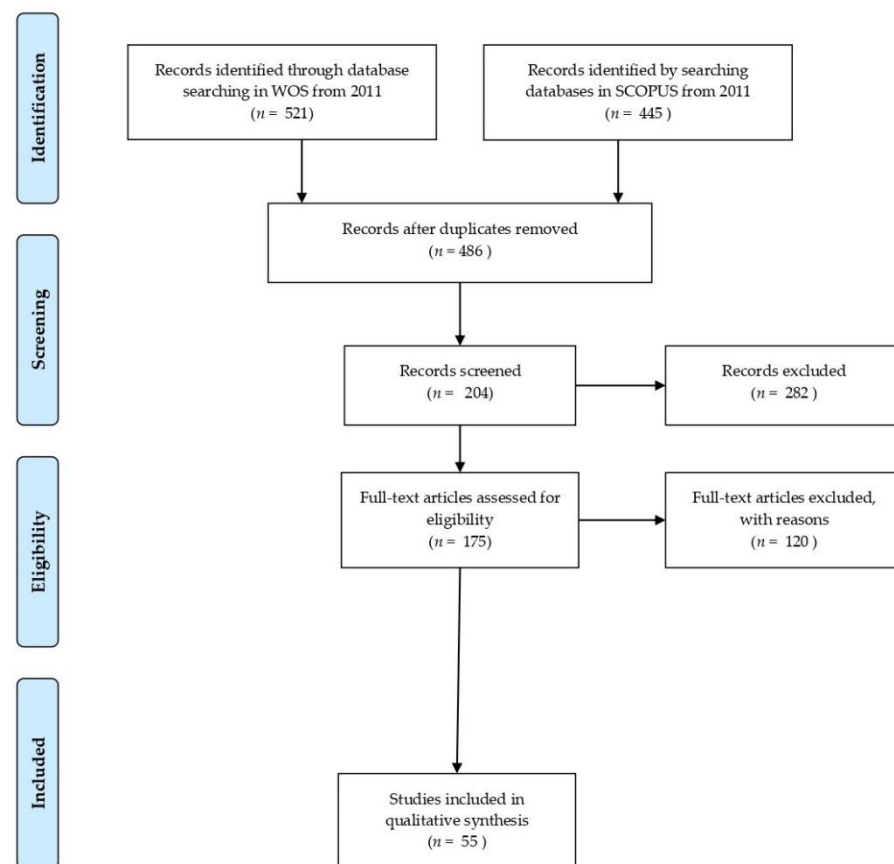


Figure 1. Flow chart followed to perform the database review.

2.4. Data Encoding

The following categories were encoded to extract the results: (a) year of publication, (b) country where the study took place, (c) sample size: here, we used only the number of students with a disability, since some studies with large samples also included them, (d) age, by identifying the average age and/or the students' age range, (e) educational stage, by indicating whether the subject belonged to special education, (f) type of disability, in which category "general" has been used when any type of disability was included, (g) type of school violence, in which intervention studies were included, and (h) instruments used, without specifying the name of the instrument.

2.5. Articles Quality Assessment

It was not possible to make use of the Grading of Recommendations Assessment, Development and Evaluation (GRADE) method due to the scope of the study. Instead, the quality of the articles was guaranteed using only WOS and SCOPUS, which include high-impact quality journals and the only selection of scientific articles. Chapters of books were excluded (this was one of the inclusion criteria) for not being subject to peer review. At the discussion stage, possible biases are analyzed as limitations of the study.

3. Results

Fifty-five articles were included in the final sample for the current systematic review according to the previously established inclusion criteria (see Appendix A).

3.1. Year and Country of the Studies

A total of 76.37% ($n = 42$) of the articles in the final sample were published in the last five years (see Figure 2), while 18.18% ($n = 10$) of the works were carried out in continental Europe. The studies were from the UK, Ireland, France, Sweden, Greece and Slovenia, and one study included 11 countries, 10 of them European. A total of 14.55% ($n = 8$) of the papers in the final sample were carried out in the following countries: Taiwan, Hong Kong, Israel and Saudi Arabia; 7.27% ($n = 4$) of the papers were from Australia. Finally, 3.64% ($n = 2$) of the papers were from Canada and 1.82% ($n = 1$) from both Colombia and Nigeria.

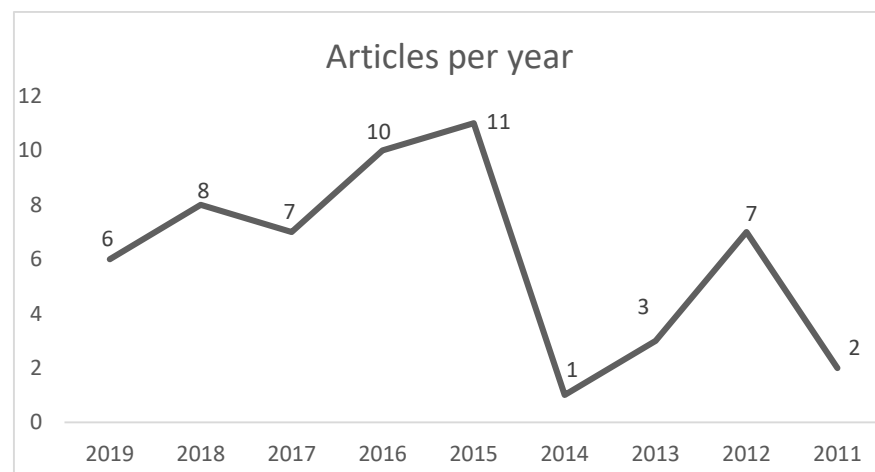


Figure 2. Number of articles per year of publication.

3.2. Characteristics of the Sample

According to the sample size, 47.27% ($n = 26$) of the studies—almost half of the selected papers—contained samples of less than 250 students with a disability. Of this percentage, 21.82% ($n = 12$) had a sample that was less than 100, while 12.73% ($n = 7$) had samples of between 250 and 1000 students with a disability, and over 40% ($n = 22$) of the papers had samples over 1000. The participants' age was not classified, and this varied widely. In 47.27% ($n = 26$) of the studies, the samples of boys were larger, while in 20% ($n = 11$), the sample size of girls was larger, and the sex of the participants with disabilities was not specified in 30.91% ($n = 17$). Table 1 shows the data corresponding to the educational stage. It should be noted that only 16.36% ($n = 9$) were in special education.

Table 1. Educational stage of schooling.

Educational Stage	Frequency	Percentage
Preschool	1	1.82
Primary education	13	23.64
High School	18	32.73
Preschool and Primary education	1	1.82
Primary and High School	20	36.36
Preschool, Primary and High School	1	1.82
Special Education	1	1.82
Special and General Education	8	14.55

In relation to the type of disability, 60% ($n = 33$) of the papers used the category “general”. 18.18% ($n = 10$) were carried out in intellectual disability, 3.64% ($n = 2$) in physical disability and the same percentage in sensory disability. Moreover, 10.91% ($n = 6$) were conducted in disability together with chronic illness; finally, 3.64% ($n = 2$) dealt with students with double characteristics (disability and high capacity).

3.3. Methodology Used

Scales and questionnaires were the most widely used instruments, with both used in 50.91% ($n = 28$) of the papers analyzed, and in 21.82% ($n = 12$), scales were the only instrument used, while 30.91% ($n = 17$) used questionnaires. Interviews were used in 16.36% ($n = 9$), tests in 12.73% ($n = 7$) and self-reports in 7.27% ($n = 4$). More detailed information on the specific type of instrument according to the study is shown in Appendix A.

3.4. Type of Intimidation

A total of 45.45% ($n = 25$) of the research papers focused exclusively on victimization, while 30.91% ($n = 17$) included both perpetration and victimization. The papers on bullying and cyberbullying accounted for 7.27% ($n = 4$), while 3.64% ($n = 2$) focused solely on online bullying and 1.82% ($n = 1$) on dating violence. Finally, 7.27% ($n = 4$) of the papers focused on interventions, one of which was aimed at students with intellectual disabilities and the other three at general disabilities. They all worked with aggressors and victims. In one of the programs, Cognitive-Behavioral Therapy was used, while in two, different competences were studied, such as empathy, communication skills, problem solving, friendship skills, emotional regulation and, in the last paper, resilience and “Stop Bullying Now”, which is a program that includes 12 webisodes.

4. Discussion and Conclusions

The objective of this study was to find out how research into bullying in disabled studies has been carried out over recent years. For this purpose, a systematic review of papers published between 2011 and 2019, both inclusive, was carried out following the PRISMA criteria and using inclusion criteria that helped guarantee the quality of the selected documents. In this way, a total of 55 articles from recent years was found.

The first hypothesis was confirmed, although more papers were found in this review than in the review by [14]: the research found so far is still scarce and has mainly been carried out in recent years, with more than three-quarters in the last five years. There is a greater awareness of the inclusion of students with disabilities in mainstream schools [22] and it is apparent that disability is a risk variable for bullying [6]. However, the studies are not plentiful, despite the fact that papers on bullying in non-disabled students are on the rise [4]. Additionally, many of the papers were produced in developed countries, such as the review by [14]; in fact, three-quarters of the studies were published in the USA or Europe. However, research in underdeveloped countries is scarce, even though it has been shown that bullying is a problem that also affects children in these countries [23], where it is possible to find higher rates of disability [24]. However, the lack of economic resources in

these countries may be causing their governments to invest less in research and not permit projects into what bullying is like in their schools.

The second hypothesis was also confirmed. Although the number of samples has increased over the last years (for example, the systematic revision carried out by [14], in which the samples were of less than 250 participants in almost three out of four papers), the current revision includes little over half of the studies performed. However, the samples are still too small to extract convincing conclusions, in fact; one out of five articles have samples with less than 100 students. These results are similar to those found in the systematic review by [17] carried out in schoolchildren with ASD. This could be a reflection of the difficulty in finding large samples of disabled people and, sometimes, having to resort to incidental criteria samples and convenience samples, rather than probabilistic sampling. This hypothesis is supported by the fact that most of the articles found had a wide range of ages, which would have enabled them to obtain a larger number of participants. Moreover, this idea is backed up by the characteristics of the sample, with three out of five considering all types of disabilities, although it could also refer to the effort made to obtain a larger number of samples. Although one out of five studies into intellectual, physical or sensorial disability were found, this is still insufficient [24,25]. More work, therefore, needs to be done in order to prevent attacks on students that have physical disabilities by their schoolmates [26].

As in studies of traditional bullying, most of the research was conducted in primary and secondary grades [4]. Only nine articles focused on special education schools, while eight of these compared special education with mainstream education, so this remains an under-researched context, despite the high percentages of involvement in such schools [27]. Only two studies were carried out in children's education, so this may be a novel scenario to study unjustified aggression, which can occur at this age, as in other papers published on non-disabled students [28]. On the other hand, in relation to the type of bullying in this age group, most research has been carried out on victimization and few studies have focused on interventions, despite the fact that scientific evidence has shown how this is a particularly vulnerable group [7].

Similarly, the third hypothesis has been confirmed. A wide variety of instruments is available to study this type of violence, although these are not specialized, as was shown in the meta-analysis by [10]. In this study, scales and questionnaires were the most common instruments, although they often inevitably resort to information from third parties such as teachers or relatives, especially with more serious disabilities [29]. Otherwise, interviews were used less, in spite of being useful for some papers in which students' idiosyncratic features made it impossible to use scales and questionnaires [29].

This work presents certain limitations that must be taken into consideration when interpreting the results, such as those produced by the differences between the educational systems in the different countries, which means that schoolchildren of the same age may be attending primary or secondary school, depending on the country. Additionally, some papers included the same sample of students but were published in different articles, so the number of original papers published was, in fact, lower. Likewise, not specifying the type of disability in most of the studies and the search for a larger number of participants leads, in many cases, to a wide heterogeneity of the sample and the use of different instruments, some of which were not validated, which may affect the results. Finally, since it is a systematic review, it is important to consider the bias risk, which is high in this case, where there are specific instruments available for use with schoolchildren with disabilities. In addition, there is considerable publication bias, as a great number of the articles found appeared in the same scientific journals.

However, this up-to-date systematic review provides us with valuable information about how bullying studies have been carried out in students with a disability over the last few years and could inspire specialized researchers to take up future lines of research. One of the lines which would help us advance in our knowledge of this problem is to design specialized instruments for students with different degrees of disability. These

may include pictures or pictograms that make the questions easier for students with more severe disabilities to understand. The use of the same instrument can allow comparison between studies, such as between different countries, through cross-cultural studies that would serve to determine the influence of cultural and social variables on schoolchildren with disabilities who have suffered bullying. Another line of study would be on how other forms of violence such as cyberbullying or dating violence affect students with disabilities. The review has highlighted the fact that few studies exist, despite the fact that young people, including schoolchildren with disabilities, increasingly use digital devices to interact with each other. A third line would be to carry out studies into a specific type of disability, since the review has shown that most of these works are general and include all types of disabilities. In this way, with more specific works, it would be possible to know if a certain type of disability leads to a greater risk of bullying. Finally, although this work has implications mainly for research, since the main objective was to learn about the nature of studies into bullying in schoolchildren with disabilities, its findings also stress the importance of continuing to work with specific programs for the prevention and intervention of bullying in students with disabilities and especially due to the victimization that many of these schoolchildren suffer. In short, inclusion and diversity in the classroom is a common goal to achieve a more sustainable society and education.

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Appendix A

Table A1. Studies on bullying with students with disabilities in recent years.

N	Authors	Country	Sample	Gender	Age	Educational Stage	Disability	Type of School Violence	Instrument
1	[30]	USA	791	51% Girls 49% Boys	10–20	Primary and secondary school	General disability and health problems	Victimization and cybervictimization	- Questionnaire with parents by phone - Telephone interview with young people with disabilities
2	[31]	USA	22,129	Not mentioned	6–17	Primary and secondary school	Developmental disorders, chronic diseases, severe deficiencies and mental illness	Victimization	- Questionnaire (dealing with multiple aspects of children's lives, which makes it well-suited to the present research question due to the inclusion of questions about victimization and various diagnosable health conditions and health difficulties)
3	[32]	Australia	8	5 Boys 3 Girls	9–16	Primary and secondary school	Double exceptionality	Victimization	- Semi-structured Interview
4	[33]	Taiwan	1561	54.7% Boys 45.3% Girls	12	Primary school	Learning Disability, ID, ADHD and ASD	Victimization	- Questionnaire (Oxford Happiness Questionnaire) - Scale
5	[34]	Australia	490	Not mentioned	8–14	Primary and secondary school	General disability	Victimization	- Questionnaire
6	[35]	USA	868	Not mentioned	-	Secondary school	General disability	Victimization	- Interview to parents - Self-report
7	[36]	Australia	109	65.5% Boys 34.5% Girls	10–15	Secondary school	General disability and mental care	Victimization	- Strengths and Difficulties Questionnaire
8	[37]	USA	175 and 156 (1st and 2nd moment)	In ASD: 87.5% Boys and 12.5% Girls In ID: 58.8% Boys and 41.2% Girls	13 and 15 (1st and 2nd moment)	Secondary school	ASD, ID	Victimization	- Test - Scale - Interview with mothers and minors

Table A1. Cont.

N	Authors	Country	Sample	Gender	Age	Educational Stage	Disability	Type of School Violence	Instrument
9	[38]	USA	87	36 Boys 51 Girls	7–18	Primary and secondary school	Hearing impairment	Victimization	- Questionnaire (The Early Adolescent Temperament Questionnaire—Revised)
10	[39]	Sweden	7533	Disability not specified	15 and 16	Secondary school	General disability	Victimization	- Scale
11	[40]	Australia	187	Not mentioned	12 and 13	Secondary school	General disability	Victimization	- Self-completed Questionnaire
12	[41]	Hong Kong	162	123 Boys 39 Girls	8–15	Primary and secondary school	Learning disability	Victimization	- Multidimensional Peer Victimization Scale
13	[42]	Slovenia	100	62 Boys 38 Girls	11–14	Primary and secondary school	General disability	Perpetration and victimization	- School Bullying Scales
14	[43]	Colombia	11	4 Boys 7 Girls	7–18	Primary and secondary school	Students with myelomeningocele (physical disability)	Victimization	- Ad hoc Questionnaire
15	[44]	USA	2874 and 361 of SE	201 Boys (SE) 135 Girls (SE) 1343 Boys 1441 Girls	(M = 13.21) (M = 13.35 of SE)	Primary and Secondary school and SE	General disability	Victimization	- Self-report
16	[45]	Nigeria	234	Not mentioned	-	Secondary school	General disability	Victimization	- Bullying Prevalence Questionnaire
17	[46]	USA	903	50% Boys 50% Girls	-	Primary and secondary school	General disability	Perpetration and victimization	- Scale - Questionnaire
18	[47]	Taiwan	706	Not mentioned	>12	Secondary school and SE	Special educational needs and intellectual disability	Victimization	- Questionnaire (Meriden School Climate Survey—Student Version)
19	[48]	Saudi Arabia	40	Not mentioned	12–15	Secondary school	General disability	Intervention	- Test - Scale

Table A1. Cont.

N	Authors	Country	Sample	Gender	Age	Educational Stage	Disability	Type of School Violence	Instrument
20	[49]	USA	131	73% Boys 27% Girls	13 and 15	Primary school	Intellectual and developmental disabilities	Victimization and cybervictimization	- Questionnaire
21	[26]	Israel	61	58.5% Boys 41.5% Girls	Teenagers	Secondary school	Low vision (sensory disability)	Cyberbullying	- Questionnaire
22	[50]	USA	1183	Not mentioned	11–18	Primary and secondary school	General disability	Perpetration, victimization and aggression between siblings	- University of Illinois Victimization Scale - University of Illinois Bully Scale - University of Illinois Fight Scale - Sibling aggression scale - School belonging
23	[51]	USA	123	Control Group (53.9% Boys–46.1% Girls) Intervention Group (61.7% Boys–38.3% Girls)	11–12	Primary school	General disability	Intervention	- Self-report - Psychological Sense of School Membership - Empathic Concern (EC) scale - Caring of Others (COO) scale - Willingness to Intervene in Bullying Episodes scale
24	[52]	USA	2870	1810 Boys 1070 Girls	Teenagers	Secondary school	General disability + ethnicities	Perpetration and victimization	- Scale - Questionnaire
25	[53]	USA	1183	62.2% Boys 37.3% Girls	M = 14.4	Primary and secondary school	General disability	Perpetration, victimization and cyberbullying	- The University of Illinois and Wellesley College: Student Behavior Survey–Modified - University of Illinois Bully Scale - University of Illinois Fight Scale - Crick and Grotpeter’s (1996) Relational Aggression subscale - University of Illinois Victimization Scale - Online Victimization Scale - Crick and Grotpeter’s (1996) Relational Aggression Victimization subscale

Table A1. Cont.

N	Authors	Country	Sample	Gender	Age	Educational Stage	Disability	Type of School Violence	Instrument
26	[54]	UK	7342 in MCS and 12,144 in LSYPE	61.2% Boys with SEN 38.8% Girls with SEN	7 and 15	Primary and secondary school	General disability	Perpetration and victimization	- Questionnaire
27	[55]	Israel	1298	587 Boys 707 Girls		Secondary school	Learning disability and/or ADHD	Victimization	- Attachment Security Style Scale - Children's Appraisal of Teacher as a Secure Base (CATSB) scale - Bullying questionnaire
28	[27]	Taiwan	140	Not mentioned	12–18	SE	General disability	Perpetration and victimization	- Questionnaires - Interviews
29	[56]	USA	4155	Not mentioned	6–13	Primary and secondary school	General disability Includes ADHD	Victimization	- Questionnaire - Scale
30	[57]	Sweden	652	Disability not specified	13–15	Secondary school	General disability	Perpetration, victimization and, cyberbullying	- Questionnaire - Scale
31	[58]	USA	1183	736 Boys 441 Girls	(M = 14.4)	Primary and secondary school	General disability	Perpetration and victimization	- University of Illinois and Wellesley College: Student Behavior Survey–Modified - University of Illinois Victimization Scale - University of Illinois Bully Scale - University of Illinois Fight Scale - Modified Depression Scale - Weinberger Adjustment Inventory - Symptom Checklist–90

Table A1. Cont.

N	Authors	Country	Sample	Gender	Age	Educational Stage	Disability	Type of School Violence	Instrument
32	[59]	Greece	178	Disability not specified	10–12	Primary school and SE	General disability	Perpetration and victimization	<ul style="list-style-type: none"> - The Greek version (Pateraki and Houndoumadi, 2001) of the Olweus Bully/Victim Questionnaire - The Greek version (Galanaki and Kalantzi-Azizi, 1999) of the Loneliness and Social Dissatisfaction Questionnaire - The Greek version (Galanaki and Kalantzi-Azizi, 1999) of Children’s Self Efficacy for Peer Interaction Scale
33	[60]	USA	7314	3437 Girls 3876 Boys	-	Preschool, Primary school and SE	General disability	Victimization	<ul style="list-style-type: none"> - Teacher Observation of Classroom Adaptation–Checklist - Peer victimization and aggression by items on the Teacher Observation of Classroom Adaptation–Checklist (TOCA-C)
34	[61]	USA	123	Intervention Group (Boys 61.7%, Girls 38.3%) Control Group (Boys 53.9%, Girls 46.1%)	11–12	Primary school	General disability	Intervention	<ul style="list-style-type: none"> - Illinois Bully Scale - University of Illinois Victimization Scale - University of Illinois Fighting Scale
35	[62]	USA	1861 students y 188 teachers	Not mentioned	11–12	Primary school	Double exceptionality	Perpetration and victimization	<ul style="list-style-type: none"> - Questionnaire to children and teachers Scale
36	[63]	USA	1611	52.4% Boys, 47.6% Girls	16–17	Secondary school	General disability includes ADHD	Victimization	<ul style="list-style-type: none"> - Questionnaire Scale
37	[64]	USA	1055	386 Girls (36.6%) and 669 Boys (63.4%)	-	SE and Primary and secondary school	General disability	Cyberbullying, perpetration and victimization	<ul style="list-style-type: none"> - University of Illinois Victimization Scale - Relational aggression victimization subscale of Crick and Grotpeter’s Relational Aggression subscale - Subscale of the Online Victimization Scale - University of Illinois Bully Scale - University of Illinois Fighting Scale - Relational Aggression Perpetration

Table A1. Cont.

N	Authors	Country	Sample	Gender	Age	Educational Stage	Disability	Type of School Violence	Instrument
38	[65]	Israel	149	78 Boys 71 Girls	12–17	Primary and Secondary school and SE	Learning disability	Cyberbullying	- Self-report
39	[66]	USA	1183	Disability not specified	11–18	Primary and secondary school	General disability	Perpetration and victimization	- University of Illinois Victimization Scale - Bullying and Harassment subscale of the Online Victimization Scale - Five-item modified version of Crick and Grotpeter's Relational Aggression subscale - University of Illinois Bully Scale - University of Illinois Fight Scale
40	[67]	USA	1019 parents or guardians	612 Boys 407 Girls	6–11	Primary school	General disability	Perpetration and victimization	- Scale
41	[68]	USA	83	50 Boys 33 Girls	11–15	Primary school	Learning disability	Perpetration and victimization	- University of Illinois Bullying Scale. - University of Illinois Victimization Scale - University of Illinois Fight Scale - University of Illinois Anger Scale - Psychological - Sense of School Members Scale - Vaux Social Support Record
42	[69]	USA	3110	1544 Boys 1576 Girls	10–18	SE, Primary, and secondary school	General disability	Victimization	- Questionnaire
43	[29]	USA	175 total: 44 ASD, 39 ID and 92 TD	88.6% ASD Boys 11.4% ASD Girls	3–13	Preschool, Primary, and secondary school	ASD and ID	Victimization	- Interviews with mothers and minors - Test
44	[70]	Greece	50	165 boys and 178 girls (three with missing gender data)	10–12	Primary school	Learning disability	Perpetration and victimization	- Bullying and Victimization Scale - Checklist for teachers
45	[71]	USA	650	281 Boys 359 Girls	11–18	Secondary school	General disability	Dating violence	- The Massachusetts Youth Health Survey (MYHS)

Table A1. Cont.

N	Authors	Country	Sample	Gender	Age	Educational Stage	Disability	Type of School Violence	Instrument
46	[72]	11 countries	55,030 (17.7% with disability)	49% Boys 51% Girls	11, 13 and 15	Secondary school	General disability or chronic disease	Victimization	- Questionnaire
47	[73]	USA	11,512 (SEELS) and 11,272 (NLTS2)	48.8% Boys with disability 51.2% Girls with disability	6–12 (SEELS)13–16 (NLTS2)	Primary and secondary school	General disability	Victimization	- A single dichotomous survey item from the SEELS parent - Interview
48	[74]	USA	1270	890 Boys 380 Girls	3–5	Preschool and SE	General disability	Victimization	- Interviews with parents
49	[75]	USA	46	62.2% Boys 37.8% Girls	13	Secondary school	ID	Perpetration and victimization	- Test - Interview to parents and minor
50	[76]	USA	130	Not mentioned	9–16	SE and Primary and secondary school	General disability	Perpetration and victimization	- The Pacific-Rim Bullying Measure - The Children’s Social Behavior Scale
51	[25]	Canada	159	77 boys and 82 girls	M = 10.90	Primary school	Physical disability	Victimization	- Test - Scale - Questionnaire
52	[77]	Canada	15	7 Boys 8 Girls	8 and 19	Primary and secondary school	Cerebral palsy	Victimization and exclusion	- Interview with minors
53	[78]	USA	145	54 Girls 91 Boys	10–11	Primary school	General disability	Perpetration and victimization	- Test - Scale
54	[79]	USA	65	43 Boys 22 Girls	8–14	Primary school	General disability	Intervention	- Forms and Questionnaires
55	[80]	France and Ireland	875 in Ireland and 1151 in France	Not mentioned	11, 13 and 15	Secondary school	General disability or chronic disease	Victimization	- Questionnaire

Key: ID = Intellectual Disability; ADHD = Attention-Deficit/Hyperactivity Disorder; ASD = Autism Spectrum Disorder; TD = Typical Development; SE = Special Education.

References

1. Menesini, E.; Salmivalli, C. Bullying in schools: The state of knowledge and effective interventions. *Psychol. Health Med.* **2017**, *22*, 240–253. [[CrossRef](#)] [[PubMed](#)]
2. Modecki, K.L.; Minchin, J.; Harbaugh, A.G.; Guerra, N.G.; Runions, K.C. Bullying prevalence across contexts: A meta-analysis measuring cyber and traditional bullying. *J. Adolesc. Health* **2014**, *55*, 602–611. [[CrossRef](#)] [[PubMed](#)]
3. Hellfeldt, K.; Gill, P.E.; Johansson, B. Longitudinal Analysis of Links Between Bullying Victimization and Psychosomatic Maladjustment in Swedish Schoolchildren. *J. Sch. Violence* **2018**, *17*, 86–98. [[CrossRef](#)]
4. Zych, I.; Ortega-Ruiz, R.; Del Rey, R. Systematic review of theoretical studies on bullying and cyberbullying: Facts, knowledge, prevention, and intervention. *Aggress. Violent Behav.* **2015**, *23*, 1–21. [[CrossRef](#)]
5. World Health Organization. Available online: <https://www.who.int/teams/noncommunicable-diseases/disability-and-rehabilitation/world-report-on-disability> (accessed on 15 December 2020).
6. Álvarez-García, D.; García, T.; Núñez, J.C. Predictors of school bullying perpetration in adolescence: A systematic review. *Aggress. Violent Behav.* **2015**, *23*, 126–136. [[CrossRef](#)]
7. Wright, M.F. School Bullying Among Students with Intellectual Disabilities: Predictors, Outcomes, and Recommendations. In *Developmental Challenges and Societal Issues for Individuals with Intellectual Disabilities*; Gopalan, R.T., Ed.; IGI Global: Hershey, PA, USA, 2020; pp. 40–62.
8. Taboada, E.; Iglesias, P.; López, S.; Rivas, R. Las dificultades neuroevolutivas como constructo comprensivo de las dificultades de aprendizaje en niños con retraso del desarrollo. *Una Revisión Sistemática* **2020**, *36*, 271–282.
9. Falla, D.; Alós Cívico, F.; Moriana, J.; Ortega Ruiz, R. La violencia entre estudiantes según el profesorado en los Centros de Educación Especial de Córdoba. *Aula Abierta* **2012**, *40*, 3–14.
10. Houchins, D.E.; Oakes, W.P.; Johnson, Z.G. Bullying and Students with Disabilities: A Systematic Literature Review of Intervention Studies. *Remedial Spec. Educ.* **2016**, *37*, 259–273. [[CrossRef](#)]
11. Rose, C.A.; Webb, T.; McGillen, G. Bullying and students with behavioral disabilities: Examining the intersection of definition and behaviors. *Adv. Learn. Behav. Disabil.* **2018**, *30*, 69–91. [[CrossRef](#)]
12. Rose, C.A.; Forber-Pratt, A.J.; Espelage, D.L.; Aragon, S.R. The Influence of Psychosocial Factors on Bullying Involvement of Students with Disabilities. *Theory Pract.* **2013**, *52*, 272–279. [[CrossRef](#)]
13. Farmer, T.; Wike, T.L.; Alexander, Q.R.; Rodkin, P.C.; Mehtaji, M. Students with Disabilities and Involvement in Peer Victimization: Theory, Research, and Considerations for the Future. *Remedial Spec. Educ.* **2015**, *36*, 263–274. [[CrossRef](#)]
14. Rose, C.A.; Monda-Amaya, L.E.; Espelage, D.L. Bullying perpetration and victimization in special education: A review of the literature. *Remedial Spec. Educ.* **2011**, *32*, 114–130. [[CrossRef](#)]
15. Mañano, C.; Aimé, A.; Salvat, M.C.; Morin, A.J.S.; Normand, C.L. Prevalence and correlates of bullying perpetration and victimization among school-aged youth with intellectual disabilities: A systematic review. *Res. Dev. Disabil.* **2016**, *49–50*, 181–195. [[CrossRef](#)] [[PubMed](#)]
16. Pinquart, M. Systematic review: Bullying involvement of children with and without chronic physical illness and/or physical/sensory disability—a meta-analytic comparison with healthy/nondisabled peers. *J. Pediatr. Psychol.* **2017**, *42*, 245–259. [[CrossRef](#)]
17. Falla, D.; Ortega-Ruiz, R. Los Escolares Diagnosticados con Trastorno del Espectro Autista y Víctimas de Acoso Escolar: Una Revisión Sistemática. *Psicol. Educ.* **2019**, *25*, 77–90. [[CrossRef](#)]
18. Beckman, L.; Hellström, L.; von Kobyletzki, L. Cyber bullying among children with neurodevelopmental disorders: A systematic review. *Scand. J. Psychol.* **2020**, *61*, 54–67. [[CrossRef](#)]
19. Liberati, A.; Altman, D.G.; Tetzlaff, J.; Mulrow, C.; Gøtzsche, P.C.; Ioannidis, J.P.A.; Clarke, M.; Devereaux, P.J.; Kleijnen, J.; Moher, D. The PRISMA statement for reporting systematic reviews and meta-analyses of studies that evaluate health care interventions: Explanation and elaboration. *J. Clin. Epidemiol.* **2009**, *62*, e1–e34. [[CrossRef](#)]
20. Moher, D.; Shamseer, L.; Clarke, M.; Ghersi, D.; Liberati, A.; Petticrew, M.; Shekelle, P.; Stewart, L.A.; Estarli, M.; Barrera, E.S.A.; et al. Preferred reporting items for systematic review and meta-analysis protocols (PRISMA-P) 2015 statement. *Rev. Esp. Nutr. Humana y Diet.* **2016**, *20*, 148–160. [[CrossRef](#)]
21. Zych, I.; Ortega-Ruiz, R.; Marín-López, I. Cyberbullying: A systematic review of research, its prevalence and assessment issues in Spanish studies. *Psicol. Educ.* **2016**, *22*, 5–18. [[CrossRef](#)]
22. Florian, L.; Black-Hawkins, K.; Rouse, M. *Achievement and Inclusion in Schools*; Routledge: Abingdon, UK, 2016; ISBN 9781138809000.
23. Herrera-López, M.; Romera, E.M.; Ortega-Ruiz, R. Bullying Y Cyberbullying En Latinoamérica. *Rev. Mex. Investig. Educ.* **2018**, *23*, 14056666.
24. Altman, B.M. *International Measurement of Disability*, 61st ed.; Springer: New York, NY, USA, 2016; ISBN 978-3-319-28496-5.
25. Campbell, W.N.; Missiuna, C.; Vaillancourt, T. Peer victimization and depression in children with and without motor coordination difficulties. *Psychol. Sch.* **2012**, *49*, 328–341. [[CrossRef](#)]
26. Heiman, T.; Olenik-Shemesh, D. Cyberbullying Involvement of Adolescents with Low Vision Compared to Typical Adolescents, as Related to Perceived Social Support. *J. Aggress. Maltreatment Trauma* **2017**, *26*, 105–115. [[CrossRef](#)]

27. Wei, H.S.; Chang, H.H.; Chen, J.K. Bullying and Victimization among Taiwanese Students in Special Schools. *Int. J. Disabil. Dev. Educ.* **2016**, *63*, 246–259. [[CrossRef](#)]
28. Huitsing, G.; Monks, C.P. Who victimizes whom and who defends whom? A multivariate social network analysis of victimization, aggression, and defending in early childhood. *Aggress. Behav.* **2018**, *44*, 394–405. [[CrossRef](#)] [[PubMed](#)]
29. Zeedyk, S.M.; Rodriguez, G.; Tipton, L.A.; Baker, B.L.; Blacher, J. Bullying of youth with autism spectrum disorder, intellectual disability, or typical development: Victim and parent perspectives. *Res. Autism Spectr. Disord.* **2014**, *8*, 1173–1183. [[CrossRef](#)]
30. Wells, M.; Mitchell, K.J.; Jones, L.M.; Turner, H.A. Peer Harassment among Youths with Different Disabilities: Impact of Harassment Online, in Person, and in Mixed Online and In-Person Incidents. *Child. Sch.* **2019**, *41*, 17–24. [[CrossRef](#)]
31. Jackson, D.B.; Vaughn, M.G.; Kremer, K.P. Bully victimization and child and adolescent health: New evidence from the 2016 NSCH. *Ann. Epidemiol.* **2019**, *29*, 60–66. [[CrossRef](#)]
32. Ronksley-Pavia, M.; Grootenboer, P.; Pendergast, D. Bullying and the Unique Experiences of Twice Exceptional Learners: Student Perspective Narratives. *Gift. Child Today* **2019**, *42*, 19–35. [[CrossRef](#)]
33. Lung, F.W.; Shu, B.C.; Chiang, T.L.; Lin, S.J.; Tusconi, M. Prevalence of bullying and perceived happiness in adolescents with learning disability, intellectual disability, ADHD, and autism spectrum disorder: In the Taiwan Birth Cohort Pilot Study. *Medicine* **2019**, *98*. [[CrossRef](#)]
34. Moffat, A.K.; Redmond, G.; Raghavendra, P. The Impact of Social Network Characteristics and Gender on Covert Bullying in Australian Students with Disability in the Middle Years. *J. Sch. Violence* **2019**, *18*, 613–629. [[CrossRef](#)]
35. Kremer, K.P.; Kremer, T.R. Bullying Victimization and Disability Status Are Associated with Television Watching in Adolescence. *J. Child Fam. Stud.* **2019**, *28*, 3479–3486. [[CrossRef](#)]
36. King, T.; Aitken, Z.; Milner, A.; Emerson, E.; Priest, N.; Karahalios, A.; Kavanagh, A.; Blakely, T. To what extent is the association between disability and mental health in adolescents mediated by bullying? A causal mediation analysis. *Int. J. Epidemiol.* **2018**, *47*, 1402–1413. [[CrossRef](#)] [[PubMed](#)]
37. Tipton-Fisler, L.A.; Rodriguez, G.; Zeedyk, S.M.; Blacher, J. Stability of bullying and internalizing problems among adolescents with ASD, ID, or typical development. *Res. Dev. Disabil.* **2018**, *80*, 131–141. [[CrossRef](#)] [[PubMed](#)]
38. Warner-Czyz, A.D.; Loy, B.; Pourchot, H.; White, T.; Cokely, E. Effect of Hearing Loss on Peer Victimization in School-Age Children. *Except. Child.* **2018**, *84*, 280–297. [[CrossRef](#)]
39. Fridh, M.; Köhler, M.; Modén, B.; Lindström, M.; Rosvall, M. Subjective health complaints and exposure to peer victimization among disabled and non-disabled adolescents: A population-based study in Sweden. *Scand. J. Public Health* **2018**, *46*, 262–271. [[CrossRef](#)] [[PubMed](#)]
40. Kavanagh, A.; Priest, N.; Emerson, E.; Milner, A.; King, T. Gender, parental education, and experiences of bullying victimization by Australian adolescents with and without a disability. *Child. Care. Health Dev.* **2018**, *44*, 332–341. [[CrossRef](#)] [[PubMed](#)]
41. Chan, J.Y.; Ryan, C.M.; Fung, A.L.C.; Gerstein, L.H.; Kinsey, R.M. Differential Experience of Peer Victimization Among Children With Learning Disabilities in Hong Kong. *J. Pacific Rim Psychol.* **2018**, *12*. [[CrossRef](#)]
42. Kozmus, A.; Pšunder, M. Bullying among pupils with and without special needs in Slovenian primary schools. *Educ. Stud.* **2018**, *44*, 408–420. [[CrossRef](#)]
43. Ortiz-Quiroga, D.; Ariza-Araújo, Y.; Pachajoa, H.; Ramirez-Botero, A.F. Bullying in children and teenagers with disabilities as a result of meningomyelocele. *Rehabilitacion* **2018**, *52*, 93–99. [[CrossRef](#)]
44. Hartley, M.T.; Bauman, S.; Nixon, C.L.; Davis, S. Responding to Bullying Victimization: Comparative Analysis of Victimized Students in General and Special Education. *J. Disabil. Policy Stud.* **2017**, *28*, 77–89. [[CrossRef](#)]
45. Adegboyega, L.O.; Okesina, F.A.; Jacob, O.A. Family Relationship and Bullying Behaviour among Students with Disabilities in Ogbomoso, Nigeria. *Int. J. Instr.* **2017**, *10*, 241–256. [[CrossRef](#)]
46. Rose, C.A.; Gage, N.A. Exploring the Involvement of Bullying Among Students with Disabilities over Time. *Except. Child.* **2017**, *83*, 298–314. [[CrossRef](#)]
47. Chiu, Y.L.; Kao, S.; Tou, S.W.; Lin, F.G. Effect of personal characteristics, victimization types, and family- and school-related factors on psychological distress in adolescents with intellectual disabilities. *Psychiatry Res.* **2017**, *248*, 48–55. [[CrossRef](#)] [[PubMed](#)]
48. Abdulkader, W.F.A.K. The Effectiveness of a Cognitive Behavioral Therapy Program in Reducing School Bullying among a Sample of Adolescents with Learning Disabilities. *Int. J. Educ. Sci.* **2017**, *18*, 16–28. [[CrossRef](#)]
49. Wright, M.F. Cyber Victimization and Depression among Adolescents with Intellectual Disabilities and Developmental Disorders: The Moderation of Perceived Social Support. *J. Ment. Health Res. Intellect. Disabil.* **2017**, *10*, 126–143. [[CrossRef](#)]
50. Rose, C.A.; Simpson, C.G.; Ellis, S.K. The relationship between school belonging, sibling aggression and bullying involvement: Implications for students with and without disabilities. *Educ. Psychol.* **2016**, *36*, 1462–1486. [[CrossRef](#)]
51. Espelage, D.L.; Rose, C.A.; Polanin, J.R. Social-Emotional Learning Program to Promote Prosocial and Academic Skills Among Middle School Students With Disabilities. *Remedial Spec. Educ.* **2016**, *37*, 323–332. [[CrossRef](#)]
52. Blake, J.J.; Zhou, Q.; Kwok, O.-M.; Benz, M.R. Predictors of Bullying Behavior, Victimization, and Bully-Victim Risk Among High School Students With Disabilities. *Remedial Spec. Educ.* **2016**, *37*, 285–295. [[CrossRef](#)]
53. Simpson, C.G.; Rose, C.A.; Ellis, S.K. Gender Discrepancies and Victimization of Students with Disabilities. *Remedial Spec. Educ.* **2016**, *37*, 296–307. [[CrossRef](#)]
54. Chatzitheochari, S.; Parsons, S.; Platt, L. Doubly Disadvantaged? Bullying Experiences among Disabled Children and Young People in England. *Sociology* **2016**, *50*, 695–713. [[CrossRef](#)]

55. Klomek, A.B.; Kopelman-Rubin, D.; Al-Yagon, M.; Berkowitz, R.; Apter, A.; Mikulincer, M. Victimization by Bullying and Attachment to Parents and Teachers Among Student Who Report Learning Disorders and/or Attention Deficit Hyperactivity Disorder. *Learn. Disabil. Q.* **2016**, *39*, 182–190. [[CrossRef](#)]
56. Blake, J.J.; Kim, E.S.; Lund, E.M.; Zhou, Q.; Kwok, O.; Benz, M.R. Predictors of Bully Victimization in Students With Disabilities. *J. Disabil. Policy Stud.* **2016**, *26*, 199–208. [[CrossRef](#)]
57. Beckman, L.; Stenbeck, M.; Hagquist, C. Disability in Relation to Different Peer-Victimization Groups and Psychosomatic Problems. *Child. Sch.* **2016**, *38*, 153–161. [[CrossRef](#)]
58. Rose, C.A.; Simpson, C.G.; Preat, J.L. Exploring Psychosocial Predictors of Bullying Involvement for Students With Disabilities. *Remedial Spec. Educ.* **2016**, *37*, 308–317. [[CrossRef](#)]
59. Andreou, E.; Didaskalou, E.; Vlachou, A. Bully/victim problems among Greek pupils with special educational needs: Associations with loneliness and self-efficacy for peer interactions. *J. Res. Spec. Educ. Needs* **2015**, *15*, 235–246. [[CrossRef](#)]
60. O'Brennan, L.M.; Waasdorp, T.E.; Pas, E.T.; Bradshaw, C.P. Peer Victimization and Social-Emotional Functioning. *Remedial Spec. Educ.* **2015**, *36*, 275–285. [[CrossRef](#)]
61. Espelage, D.L.; Rose, C.A.; Polanin, J.R. Social-Emotional Learning Program to Reduce Bullying, Fighting, and Victimization Among Middle School Students With Disabilities. *Remedial Spec. Educ.* **2015**, *36*, 299–311. [[CrossRef](#)]
62. Chen, C.-C.; Hamm, J.V.; Farmer, T.W.; Lambert, K.; Mehtaji, M. Exceptionality and Peer Victimization Involvement in Late Childhood. *Remedial Spec. Educ.* **2015**, *36*, 312–324. [[CrossRef](#)]
63. McGee, M.G. Peer victimization as a mediator of the relationship between disability status and psychosocial distress. *Disabil. Health J.* **2015**, *8*, 250–257. [[CrossRef](#)]
64. Rose, C.A.; Stormont, M.; Wang, Z.; Simpson, C.G.; Preat, J.L.; Green, A.L. Bullying and students with disabilities: Examination of disability status and educational placement. *Sch. Psychol. Rev.* **2015**, *44*, 425–444. [[CrossRef](#)]
65. Heiman, T.; Olenik-Shemesh, D. Cyberbullying Experience and Gender Differences Among Adolescents in Different Educational Settings. *J. Learn. Disabil.* **2015**, *48*, 146–155. [[CrossRef](#)] [[PubMed](#)]
66. Rose, C.A.; Simpson, C.G.; Moss, A. The bullying dynamic: Prevalence of involvement among a large-scale sample of middle and high school youth with and without disabilities. *Psychol. Sch.* **2015**, *52*, 515–531. [[CrossRef](#)]
67. Bear, G.G.; Mantz, L.S.; Glutting, J.J.; Yang, C.; Boyer, D.E. Differences in bullying victimization between students with and without disabilities. *Sch. Psychol. Rev.* **2015**, *44*, 98–116. [[CrossRef](#)]
68. Rose, C.A.; Espelage, D.L.; Monda-Amaya, L.E.; Shogren, K.A.; Aragon, S.R. Bullying and Middle School Students With and Without Specific Learning Disabilities: An Examination of Social-Ecological Predictors. *J. Learn. Disabil.* **2015**, *48*, 239–254. [[CrossRef](#)] [[PubMed](#)]
69. Hartley, M.T.; Bauman, S.; Nixon, C.L.; Davis, S. Comparative Study of Bullying Victimization among Students in General and Special Education. *Except. Child.* **2015**, *81*, 176–193. [[CrossRef](#)]
70. Kokkinos, C.M.; Antoniadou, N. Bullying and victimization experiences in elementary school students nominated by their teachers for Specific Learning Disabilities. *Sch. Psychol. Int.* **2013**, *34*, 674–690. [[CrossRef](#)]
71. Mitra, M.; Mouradian, V.E.; McKenna, M. Dating violence and associated health risks among high school students with disabilities. *Matern. Child Health J.* **2013**, *17*, 1088–1094. [[CrossRef](#)]
72. Sentenac, M.; Gavin, A.; Gabhainn, S.N.; Molcho, M.; Due, P.; Ravens-Sieberer, U.; De Matos, M.G.; Malkowska-Szkutnik, A.; Gobina, I.; Vollebergh, W.; et al. Peer victimization and subjective health among students reporting disability or chronic illness in 11 Western countries. *Eur. J. Public Health* **2013**, *23*, 421–426. [[CrossRef](#)]
73. Blake, J.J.; Lund, E.M.; Zhou, Q.; Kwok, O.M.; Benz, M.R. National prevalence rates of bully victimization among students with disabilities in the United States. *Sch. Psychol. Q.* **2012**, *27*, 210–222. [[CrossRef](#)]
74. Son, E.; Parish, S.L.; Peterson, N.A. National prevalence of peer victimization among young children with disabilities in the United States. *Child. Youth Serv. Rev.* **2012**, *34*, 1540–1545. [[CrossRef](#)]
75. Christensen, L.L.; Fraynt, R.J.; Neece, C.L.; Baker, B.L. Bullying Adolescents with Intellectual Disability. *J. Ment. Health Res. Intellect. Disabil.* **2012**, *5*, 49–65. [[CrossRef](#)]
76. Swearer, S.M.; Wang, C.; Maag, J.W.; Siebecker, A.B.; Frerichs, L.J. Understanding the bullying dynamic among students in special and general education. *J. Sch. Psychol.* **2012**, *50*, 503–520. [[CrossRef](#)] [[PubMed](#)]
77. Lindsay, S.; McPherson, A.C. Experiences of social exclusion and bullying at school among children and youth with cerebral palsy. *Disabil. Rehabil.* **2012**, *34*, 101–109. [[CrossRef](#)] [[PubMed](#)]
78. Farmer, T.W.; Petrin, R.; Brooks, D.S.; Hamm, J.V.; Lambert, K.; Gravelle, M. Bullying Involvement and the School Adjustment of Rural Students with and Without Disabilities. *J. Emot. Behav. Disord.* **2012**, *20*, 19–37. [[CrossRef](#)]
79. Vessey, J.A.; O'Neill, K.M. Helping students with disabilities better address teasing and bullying situations: A masrn study. *J. Sch. Nurs.* **2011**, *27*, 139–148. [[CrossRef](#)]
80. Sentenac, M.; Gavin, A.; Arnaud, C.; Molcho, M.; Godeau, E.; Gabhainn, S.N. Victims of bullying among students with a disability or chronic illness and their peers: A cross-national study between Ireland and France. *J. Adolesc. Health* **2011**, *48*, 461–466. [[CrossRef](#)]