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**SCHOOL BULLIES AND BULLYING BEHAVIORS**

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***Abstract***

School violence is a big phenomenon nowadays, with social and educational implications. This issue has increased the concern of educational and health professionals, encouraging the development of intervention programs. The aim of this study is to identify the existence of bullying practices in children attending elementary school and characterize the influence of a set of socio-demographic variables underlying these behaviors, such as their family and school contexts. 201 children were studied, mostly males (53.73%), with a mean age of 9.60 years and enrolled in the 4th year of elementary education, in rural and urban schools of the central region of Portugal. Two survey instruments "Bullying: The Aggressiveness among Children in School Space" and the "Natural Child Environment Signaling Scale", validated for the Portuguese population, were used to gather the data necessary for the study. The findings suggests that 26.90% of children are involved in bullying behaviors with verbal and physical aggression highlighted as the most common type. The school playground was revealed as the favorite places for these practices (91.30%). Bullying behaviors were shown to be significantly influenced by family environment ( $p < 0.001$ ), and not significantly, by gender, age, number of non-approvals, attendance in kindergarten and number of siblings. These results show that certain strategies need to be considered in the planning and implementation preventive bullying where educators, teachers and psychologists can intervene to improve the mental and physical health of children.

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**Keywords:** Children, bullying, violence, school, family environment.



## 1. Introduction

Characterized by physical and/or physiological violence, in an intended and continuous way, by an individual or a group of people against other individual(s), or group (s), without any apparent reason (Olweus, 2010), bullying is a hot topic in social media these days and it occurs in almost every school (Smith, Kwak, & Toda, 2016). Bullying can be characterized using three criteria that, according to Olweus (2010) and Carvalhosa (2017), assimilates: *the intent of the behavior*, the *imbalance of power* and *the forms of aggression* used in bullying. The *intent of the behavior*, refers to the fact that this kind of behavior is aimed at causing unease and gaining control over other person, being repeated frequently and over a long period of time. The *imbalance of power* is centered in the bullying dynamic, by the perception of the aggressors who see their victims as easy targets. This disequilibrium of power exists because the victim has a hard time standing up for herself, since normally they do not possess defensive skills. Lastly, the *forms of aggression* used in bullying may be direct or indirect. It is considered a direct form when there is a direct attack on the victim, either physically (which includes threats or beatings, stealing money or objects, the destruction of the peers' belongings, forcing sexual acts, compelling them to do something against their will) or verbally, which includes insults, calling bad names, attributing nasty nicknames, making fun of victims, highlighting differences, defects or disabilities of peers. The indirect form refers to isolating an individual from the group, threats to withdraw friendship, spreading gossip, destroying the victim's reputation; in other words, manipulating the victim's social life (Carvalhosa, 2017; Rigby, 2010).

Focusing on the persons that initiates in the bullying practices and their characteristics, we may state that the *agitor* or *aggressor* is often the one who picks on other persons (the victims), hits them, annoys them or makes them create other unpleasant situations without any reasons for doing so. On the other hand, this kind of person is inclined towards violence and tends to sometimes feel depressed. However, as a general rule, the aggressors tend to be self-confident, present a nice image of themselves and are popular. They also reveal a high level of acceptance among their peers. In another context, we may state that they are not only aggressive to their peers, but they also present aggressive behaviors towards their parents and teachers (Azenha, Rodrigues, & Galvão, 2012; Matos, Negreiros, Simões, & Gaspar, 2009). As for the victims, Smith, Kwak, & Toda (2016) define them as those who are frequently harassed, do not display or practice physical or psychological aggressions, and who are not driven to create unpleasant situations without any reason. They tend to belong to families whose parents are overly protective and who apply restrictive rules of behavior.

Children who are victims of bullying normally present as immediate consequences, a heightened nervous tension, with symptoms like headaches and gastralia, and they may also experience nightmares or panic attacks. In some cases, a shift in behavior can occur, like tantrums and negativity, phobia or school fear that frequently results in a hard time concentrating in chores or even in absenteeism or escape from school. After the aggressions, children may feel sick or indisposed, and experience little group acceptance; they are not chosen as best friends and present very limited social abilities in the execution of group tasks, cooperation, sharing or mutual support (Carvalhosa, 2017; Rigby, 2010). Olweus (2010) contends that there are situations where the victimization prologues itself, and the late bullying effects

may lead to a clinical state of neuroses, hysteria and depression; this being more frequent in girls than boys.

Bullies show, as an immediate consequence, a hard time maintaining friendships, although they are positively accepted by their peers even in the face of aggressive behaviors. They are unhappy at school; with below average results and low appreciation by their teachers (Carvalhosa, 2017). Bullies also have difficulties in controlling impulses and anger, easily entering conflicts with their colleagues and with adults; therefore, presenting a deficit in social skills and irrational beliefs, as they believe they will not suffer any consequences following their aggressions resulting in a belief that violence is the only means to an end (Matos, Negreiros, Simões, & Gaspar, 2009; Smith, Kwak, & Toda, 2016). Bullies may become later, as a delayed consequence, offenders and in that context to stand trial by crimes, because they have a hard time respecting the law and integrating into society. They may even become easily involved with risky behaviors concerning their health, like alcohol, cigarettes and drugs consumption (Carvalhosa, 2017; Olweus, 2010).

## **2. Problem Statement**

School violence is a worrying phenomenon nowadays, with great implications at an educational, familial and social level. These days, we are often alerted by situations of violence that occur between children in Portuguese schools. The reason that this is a current topic may emerge from the well-founded fact of the negative consequences in the emotional, psychic and mental development of the children involved resulting from these behaviors. In this context, urgent intervention is required from adults, parents and specifically teachers, because they are the ones who spend the most time with the children. Hence, they are required to have an extensive and structured knowledge of the children's their qualities and defects. It is also important to emphasize the importance of the role of the family to eliminate bullying. The children, on their own, may not acquire defense strategies. The role of the family is crucial as adults can help handle bullying behaviors in a way that helps to minimize the children's suffering in the school environment. Even though bullying is not a new phenomenon, at the moment it is of great concern and interest for the students themselves, their parents, school, health and media professionals. The investigations in this area will ultimately lead to the production of knowledge which would facilitate the creation of formative and educational intervention programs that approach these behaviors in the school and familial environment. Hence, it is obvious that an investigation focusing on bullying practices among children is timely and relevant, as it would allow for a better understanding of the associated factors, which will prospectively enable the implementation of educational strategies in younger school-age children, with the purpose of attenuating these practices.

Starting with this delineation of the problem, we decided to lead a study that helps identify the existence of bullying practices in a group of Portuguese children who attend elementary school, with the purpose of promoting an intervention based on data-driven knowledge and not just an ineffective buildup of strategies and procedures. We wish to highlight that children at this school level were selected for this study due to the few available studies done with children within this age range. Those available, and there are many done in Portugal about bullying, are directed to populations with a greater age range.

### **3. Research Question**

Taking into account the contextualization of the subject of study, and assuming the importance of scientific evidence as ground for a preventive intervention (consequent and effective) on bullying behaviors in school and familial backgrounds, our concern is expressed in the following question:

How are socio-demographic, familial and school variations associated with bullying practices in children attending Portuguese elementary school?

### **4. Purpose of the Study**

With this question in mind, and the increasing awareness spread by the Portuguese media about the consequences and negative effects these behaviors may have on the physical and mental health of the children involved, which motivated us to conduct this investigation, we point out that the present study pursues three general purposes: the *first* purpose is to identify the existence of bullying practices in children attending elementary school; the second objective intends to characterize the influence of a set of socio-demographic, familial and school variations underlying this practice; and the final purpose is to contribute to the reflection on bullying practices, by producing data-driven knowledge which will facilitate the creation of an effective intervention program, aimed at the prevention of these behaviors in school and familial surroundings.

### **5. Research Methods**

This investigation is based on a quantitative transversal study following the precepts of a non-experimental study, also known as “ex post facto” study, or correlational and observational study. Bullying practices were considered the dependent variable and the independent variables were the socio-demographic background of the aggressors and victims such as their gender, age, place of residence and the attended school, familial background such as their parents’ level of education, occupation, the type of family and familial environment the child experiences in terms of the presence or absence of violence, as well as the number of siblings, and if the child has older or younger siblings. School background such as school areas where aggression behaviors occur more commonly, the rates of failure and kindergarten attendance. In the present study, bullying practices were acknowledged when three or more aggressions (both as assaulted and as aggressor) were verified simultaneously.

#### **5.1. Participants**

The selection of the study participants was based on probability sampling by conglomerates (the population individuals constituted natural groups: schools and academic years). More specifically, we proceeded to do a random selection of eight public elementary schools from the districts of Leiria and Coimbra, four in each area (urban vs rural). A raffle of the classrooms (not the children individually), i.e. the evaluated classrooms were randomly chosen from all the existent classrooms in the selected schools was conducted in each of these educational establishments.

The inclusion criteria for the sample was the individual’s age range, which had to be between 8 and 12 years; and the absence of educational special needs. Once the selection process was completed,

the group under study was formed (Table 01) by 201 children (53.73% male and 46.27% female) mainly from nuclear type families (77.60%), with one sibling (55.22%) and age range between 8 and 10 years (mean = 9.60 years and standard deviation of 0.534).

**Table 01.** Social-demographic characteristics of the group under study

<b>Variables</b>	<b>n (201)</b>	<b>%</b>
<b>Gender</b>		
Male	108	<b>53.73</b>
Female	93	46.27
<b>Family Type</b>		
Nuclear	156	<b>77.60</b>
Extended	14	6.97
Blended	10	4.98
Single Parent Family	21	10.45
<b>Number of siblings</b>		
Zero	44	21.89
One	111	<b>55.22</b>
Two	34	16.92
Three or more	12	5.97
<b>Siblings age</b>		
Older	70	<b>44.59</b>
Younger	65	41.40
Older and Younger	22	14.01

## 5.2. Measuring instruments

The gathering of the data integrated 3 sections: the first part (Section A) included 13 questions about the social-demographic and family contexts of the children; for the second part (section B) the survey “Bullying and Aggressiveness Among Children in School Space”, validated for the Portuguese population (Pereira, B., 2008) was used; and in the Section C the “Natural Child Environment Signaling Scale - SANI” was used, assembled and validated by Sani (2003). The scale incorporated in section B aims to evaluate a whole set of dimensions underlying the practice of bullying in school, consisting of 28 items, distributed by four factors: factor I on friendship, consisting of 2 items that seek to know if the child has friends or is usually alone; factor II, on victimization, which consists of 13 items related to the frequency of victimization, types of aggression, locations and who attacks; factor III, on aggression, which includes 7 items related to aggression, whether the child attacks, round trip to school and the number of students in his or her room who attack; and, lastly, factor IV on recreation, consisting of 6 items that seek to know if children enjoy the playground, if they have room to play and what they think of it. The scale SANI comprises 30 items aimed at identifying, from the children’s point of view and using as reference their familial environment, situations of physical, psychological and emotion abuse, taking 4 factors into consideration, whose Cronbach alpha values varies between .73 and .86. The four factors are: first - *physical abuse*; second - *emotional abuse*; third - *coercion* and fourth - *control*. The total score of the scale varies from 0 to 120 points, and the higher is the occurrence of abuse/violence in the child’s familial environment, the higher the score the child gets in the scale.

### 5.3. Methods

The methodology used for the data collection (that occurred in June 2017) was identical in every school included in this study, being previously authorized by parents and legal guardians of the children who signed the informed consent, and by an ethical committee who approved the execution of the study in each school. The statistical data was processed by computer, using the program *Statistical Package for the Social Sciences* (SPSS) version 20.0.

### 6. Findings

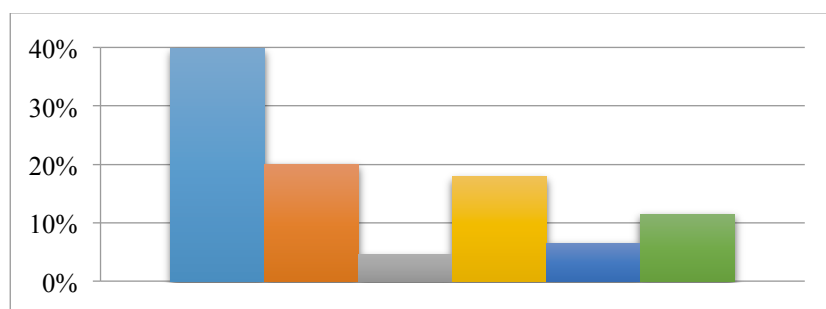
Table 2 displays the findings of the analysis where it can be seen that less than half of the children, when asked about how many times they were victims of abuse during the 10 months, reported that they have never been assaulted (46.27%). About one-third (33.33%) say they were victims of abuse once or twice, while a small number (14.93%) reported five or more times. A minimal number (5.47%) mentioned three or four times. Another aspect that was assessed was the communication of the aggression by the assaulted children to their parents and teachers, and here about a third of the children (30.35%) reported that they did not mention the bullying to their teachers, but revealed it to their parents (33.98%). Examining the teacher's response to the aggression, less than a quarter of the bullied children (22.89%) reported that teachers sometimes intervened in the management of the situation, while 22.39% reported that the teachers often interceded. Only a few (9.95%) reported that the teachers almost never interfered. Interestingly, almost half the children (44.78%) reported that they did not know what the teachers' response to the aggression was. Concerning their peers' response to the aggression, a small number (14.75%) reported that nobody helped them, while half the sample (50.00%) reported that one or two other children aided them. About one third (32.25%) claimed to have been supported by three or more kids.

**Table 02.** Related variables of the victims

<b>Variables</b>	<b>n (201)</b>	<b>%</b>
<b>Victim of bullying behaviours</b>		
Never	93	46.27
Once or twice	67	<b>33.33</b>
3 or 4 times	11	5.47
5 or more times	30	14.93
<b>Communication of the aggression</b>		
<u>Communication to the teacher</u>		
Yes	50	24.88
No	61	<b>30.35</b>
<u>Communication to the parents</u>		
Yes	67	<b>33.98</b>
No	41	20.40
<b>Intervention of the teachers considering the aggression management</b>		
Don't know	90	44.78
Almost never intervened	30	<b>9.95</b>
Sometimes intervened	46	<b>22.89</b>
Most times intervened	45	22.39

<b>Their peers attitude in the light of the aggression</b>		
Nobody helped me	18	<b>14.75</b>
1 or 2 children helped me	61	50.00
3 or 4 children helped me	43	35.25

Taking into consideration the type of aggression, and given the variety of answers, these were gathered into four types of aggression: physical aggression (this one includes the answers “they beat me, punched me and kicked me”, “they shoved me and threw things at me”, among others), verbal aggression (which integrates responses like “they called me bad names”, “They told things about me or my body”, “They spoke of me behind my back, telling my secrets”, and similar statements), social aggression (referring to responses like “they didn’t talk to me”, and others) and psychological aggression (which includes responses like “they scared me” and others). By studying the given answers, showed in figure 1, we found that 39.80% of children stated that nobody hurt them. Among the children who were victims of assault, the most common type of aggression experienced and mentioned was physical aggression (19.90%), followed closely by verbal aggression (17.91%), social aggression (6.47%) and psychological aggression (4.48%). The findings collectively revealed that there are children who were exposed to more than one type of violence, namely 11.44% of the children who suffered from both physical and verbal aggressions simultaneously.



**Figure 01.** Types of aggression

Next, we evaluate a set of variables associated with the aggressor’s profile such as: the number of aggressions committed, their gender and age (table 3). Regarding the description of the committed assault by the aggressors on other children, most of them (56.22%) state that they never attacked anyone. However, 33.83% admitted they assaulted other kids, but only once or twice, with 5.97% saying three or four times while 3.98% stated five or more times. Concerning the aggressors’ profile, it is clear that aggressions are mainly committed by male children, individually (42.16%) or in groups (28.43%); female aggressors are only mentioned in 6.86% of individual assaults, and in 2.94% of the group assaults. We also want to point out that 19.61% of the attacked children mentioned they were assaulted by both boys and girls. Students who sustained some kind of aggression, when asked about the aggressors’ age, state that most were the same age as them (64.71%).

**Table 03.** Related variables of the aggressors

Variables	n (201)	%
<b>Number of aggressions committed</b>		
Never	113	56.22
Once or twice	68	<b>33.83</b>
3 or 4 times	12	5.97
5 or more times	8	3.98
<b>Gender of the aggressors</b>		
One male	43	<b>42.16</b>
One female	7	6.86
Several males	29	28.43
Several females	3	2.94
Males and females	20	19.61
<b>Age of the aggressors</b>		
They're from my classroom	66	<b>64.71</b>
From my school year but from another classroom	15	14.71
Older	8	7.84
Younger	3	2.94
From my classroom and older	10	9.80

In terms of the global prevalence of bullying practices, the results in table 4 showed that of the 201 children, 54 (26.90%) showed signs of bullying practices.

**Table 04.** Global prevalence: Bullying practices

	n (=201)	%
Yes	54	<b>26.90</b>
No	147	73.10

In relation to the reports of the children, and using as reference the occurrence of some conflicting events (observed or experienced in the familial environment, measured by the *Escala de Sinalização do Ambiente Natural Infantil*), it is obvious that for every factor, the kind of abuse/violence, when it occurs, is mainly against other children, with a substantial higher percentage when compared to the abuse/violence held against adults (table 5).

**Table 05.** Types of aggression in a familial environment: lived and reported by the child

Factors in the SANI scale	Violence against the partner		Violence against the child		Violence against both		With no recording of violence	
	n	%	n	%	n	%	n	%
<b>Factor 1 – Physical abuse</b>	4	2.16	20	9.87	1	0.33	176	87.65
<b>Factor 2 – Emotional abuse</b>	14	6.77	30	14.98	1	0.70	156	77.56
<b>Factor 3 – Coercion</b>	8	3.84	13	6.61	-	0.00	180	89.55
<b>Factor 4 – Control</b>	14	6.97	15	7.68	1	0.50	171	84.86

Contextualizing the results from the association study between bullying practices and some of its causes, the variables gender (p=0.977), age range (p=0.828), number of siblings (p=0.673), the existence of younger or older siblings (p=0.067), number of school year repeats (p=0.998) and attendance of



kindergarten ( $p=0.148$ ) did not show a statistically significant effect associated with bullying practices. On the other hand, the association study between bullying practices and the familial environment of the children proved, by the Pearson correlations expressed in table 6, the existence of a very significant association ( $p < 0.001$ ) for every factor and a global note from the *Escala de Sinalização do Ambiente Natural Infantil*, which indicates that the existence of a certain degree of violence within the family is associated with a rise in the frequency of bullying practices perpetrated by the children.

**Table 06.** Study of the association between variables: Bullying practices versus familial environment

	<b>r</b>	<b>p</b>
<b>F<sub>1</sub> – Physical abuse</b>	0.345	0.000
<b>F<sub>2</sub> – Emotional abuse</b>	0.357	0.000
<b>F<sub>3</sub> – Coercion</b>	0.200	0.000
<b>F<sub>4</sub> – Control</b>	0.244	0.000
<b>Global score</b>	0.314	0.000

## 7. Conclusion

Taking into consideration the aims of this investigation, the obtained results allows us to conclude that: (1) About 26.90% of children were involved in bullying practices, as an aggressor or as a victim; (2) Physical aggression was the most reported type of aggression (19.90%), followed by verbal aggression (17.91%); (3) Most children reported the aggression to their parents (33.98%) but not to their teachers (30.35%); (4) when faced with aggression, most teachers intervene only occasionally (22.98%) or often (most times) in the aggression management (22.39%); (5) Bullying practices are not significantly affected either by gender ( $p=0.977$ ) or age ( $p=0.828$ ) of the children involved; (6) it is irrelevant whether children have repeated school years ( $p=0.822$ ), or attended kindergarten ( $p=0.148$ ) as these factors do not show any significant differences in the incidence of bullying; (7) There is no significant difference in the existence of bullying practices regarding children with siblings ( $p=0.673$ ) and if they have or not older or younger siblings ( $p=0.067$ ); (8) On the other hand, there is a very significant relationship between bullying practices and familial environments where violence occurs.

With this empiric framework in mind, we can conclude that a transversal and multidisciplinary awareness is imperative by the most several educative agents toward their students, because we believe it is fundamental to create an educational system supportive of citizenship education. In another context, the obtained results highlight some important orientations to take into account in the planning and implementation of preventive strategies of this phenomenon that needs to be implemented for the good of the children and their families.

Therefore, we need to assume the need for an increasing involvement, *in a networked effort*, not only by education professionals, but also from psychology, health and sociology professionals, in the development of programs aimed at the identification, signalization, monitoring and prevention of bullying behaviors. We believe the results of the present investigation may help in this matter by presenting the most objective implications of considering school *as a space and location of predilection* in which we must promote and potentiate a global learning beyond “four walls”, which will allow children to develop, grow and learn in a social environment where social values are promoted and violence is prevented.

In summary, this study has highlighted some orientations that need to be considered in the planning and implementation of preventive strategies of this phenomenon, where educators, teachers and psychologists may play a significant role by providing effective intervention with the children and their families, and thus, encourage a higher degree of physical and mental health.

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## References

- Azenha, M., Rodrigues, S., Galvão, D. (2012). Bullying e a criança com doença crónica. *Revista de Enfermagem Referência, III Série*, 6, 47-55.
- Canavarro, M.C. & Pereira, A.I.F. (2007). A avaliação dos estilos parentais educativos na perspectiva dos pais: A versão portuguesa do EMBU-P. *Psicologia: Teoria, investigação e prática*, 2, 271-286.
- Carvalhosa, S. (2017). *Prevenção da Violência e do Bullying em Contexto Escolar*. Lisboa: Climepsi Editores.
- Matos, M., Negreiros, J., Simões, C., Gaspar, T. (2009). *Violência, Bullying e Delinquência – Gestão de Problemas de saúde em meio escolar*. Lisboa: Coisas de Ler Edições
- Olweus, D. (2010). Bullying in school: Evaluation and dissemination of the Olweus Bullying Prevention Program. *American Journal of Orthopsychiatry*, 8(1), 124-134.
- Pereira, B. (2008). Para uma escola sem violência – estudo e prevenção das práticas agressivas entre crianças (2<sup>nd</sup> ed.). Lisboa: Dinalivro.
- Rigby, K. (2010). *Bullying interventions in Scholls: Six basic approaches*. Australia: Acer Press.
- Sani, A. (2003). Escala de Sinalização do Ambiente Natural Infantil (SANI). In L.S. Almeida, M.R. Simões, C. Machado & M. Gonçalves (Eds.). *Avaliação Psicológica: Instrumentos validados para a população portuguesa*, (Vol.III, 89-98) Coimbra: Quarteto Editora.
- Smith, P., Kwak, K., & Toda, Y. (2016). *School bullying in different cultures: Eastern and western perspectives*. Cambridge: University Press.