

Systematic and meta-analytic reviews of longitudinal studies demonstrate that antibullying programs could be viewed as a form of early crime prevention as well as an early form of public health promotion.

7

Risk and protective factors, longitudinal research, and bullying prevention

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SCHOOL BULLYING IS a serious problem that affects one in five school-aged children worldwide.¹ Given the serious short-term and long-term effects on children's physical and mental health, it is understandable that school bullying has increasingly become a central topic in intervention and evaluation research.² School bullying has recently become a topic of major public concern and has drawn media attention, with articles in major newspapers and magazines reporting cases of children who committed (or attempted) suicide because of their victimization at school and parents suing school authorities for their failure to protect their offspring from continued bullying victimization.³ But is there scientific evidence about the detrimental effects of school bullying on children's physical and mental health? Or is school bullying merely a part of a developmental process, one of those school experiences said to prepare children for the grown-up world, as some skeptics argue?

based antibullying programs are effective. On average, bullying decreased by 20 to 23 percent and victimization by 17 to 20 percent. Program elements and intervention components that were associated with a decrease in bullying and victimization were identified, based on feedback from researchers about the coding of 40 out of 44 programs. The most important components were parent meetings, improved playground supervision, firm disciplinary methods, classroom management, teacher training, and cooperative group work. Programs that were more intensive and had a longer duration were also more effective.

Risk and protective factors for school bullying and its negative effects

Current research has confirmed that school bullying (perpetration and victimization) uniquely contributes to internalizing and externalizing problems after taking into account preexisting adjustment problems and other major childhood risk factors.¹⁴ However, not all children involved in school bullying go on to experience adjustment difficulties. Some resilient children function better than would be expected and do not follow a criminal career path later in life.¹⁵ These findings are consistent with previous research on protective factors providing resiliency for children from multiproblem milieus.¹⁶

Various questions subsequently arise. First, what protective factors interrupt the continuity from school bullying to later adverse outcomes? What are the intervening mechanisms that nullify the effect of school bullying on a given outcome? Second, what factors give resiliency to children from multiproblem milieus, enabling them to avoid being involved in school bullying as either perpetrators or victims? In other words, what protective factors buffer the effects of risk factors for bullying perpetration and victimization? These questions can be more adequately addressed using data from prospective longitudinal studies and also by focusing on both risk and protective factors.

Risk-focused prevention has become very popular, based on the idea that offending and other externalizing problems can be reduced by targeting and alleviating risk factors.¹⁷ Following the traditional risk factors approach, an interventionist could investigate risk factors that are related to both childhood bullying and adult offending. It would be expected that the removal of relevant risk factors should reduce the probability of offending (or other adverse outcomes) later in life. To give an example, a recent systematic review and meta-analysis on risk factors predicting children's involvement in school bullying found that the typical school bully is one who exhibits significant externalizing behavior, has both social competence and academic challenges, possesses negative attitudes and beliefs about others, has negative self-related cognitions, has trouble resolving problems with others, and comes from a family environment characterized by conflict and poor parental monitoring.¹⁸ Notably, many of these risk factors are also related to juvenile delinquency and offending.¹⁹ Subsequently, following the traditional risk factors approach, interventionists and practitioners would argue that removal of these risk factors could reduce both bullying and offending and enable children to live well-adjusted lives in the long run.

Although this approach is scientifically sound, it has more recently become clear that prevention and intervention initiatives should expand this traditional approach in such a way that protective factors are also taken into account.²⁰ Various practical and methodological reasons have been put forward to explain why the traditional risk factors approach would benefit from incorporating the notion of protective factors in the existing analytical framework.

At a practical level, removal of major risk factors from children's lives is often impossible. To give an example, although a recent systematic, meta-analytic review has established the link between parental incarceration and offspring maladjustment, using alternatives to imprisonment is in many cases not acceptable, at least not within the current justice system.²¹ At the methodological level, the assumption of cumulative risk effects in predicting cumulative