

Relationship between Bullying Experiences, Self-Esteem and Depression among secondary school pupils

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ABSTRACT

Main Objective: We examined whether exposure to bullying would predict low self-esteem and depression among secondary school adolescents.

Design: We used an adolescent study sample of 250 day secondary school learners in Livingstone, Zambia, who were recruited randomly from conveniently selected day secondary schools. The sample comprised an equal number of boys (N=125) and girls (N=125) of age range 13 to 17.

Out comes: The study showed gender differences on bullying and depression among the grade nine learners with highest levels of bullying experiences, low self-esteem and depression among girls. An association ($p < .05$) was established between bullying and depression. Also, we were able to establish an inverse ($p = -.16$) correlation between bullying and self-esteem. Bullying experiences (physical, social and verbal) accounted for 14.6 % of variance on low self-esteem and 33.7% of variance on depression. Social bullying was the strongest predictor of low self-esteem ($\beta = -.491$, $\text{sig} = .000$) and depression ($\beta = .332$, $\text{sig} = .000$).

Measures: The participants self-reported their experiences of bullying on Adolescent Peer relations victim scale B (Parada 2000). Self-esteem levels were measured using the Rosenberg Self-esteem scale (Rosenberg,

1985). The Beck depression inventory (BDI-11) from the Zambia Neurobehavioral Battery was used to measure adolescents levels of depression. This was a quantitative correlational study.

Results: The more bullied students were, the less self-esteem they exhibited and the more depressed they became. Girls were more vulnerable to bullying with low self-esteem and high depression levels as compared to boys.

Conclusions: Adolescents who frequently experience bullying manifest low self-esteem and higher levels of depression. Increased frequency of exposure to bullying is a consistent predictor of adolescent depression and low self-esteem.

INTRODUCTION

There is a common understanding in literature that bullying victimization is an overwhelming relational experience in schools¹ In his book entitled “*Aggression in the schools: Bullies and Whipping Boys*” on page 469, Olweus clearly demonstrates that a student is being bullied when he or she is exposed repeatedly and over time to negative actions on the part of one or more students.² Bullying is any behavior a person manifests with a goal to cause pain either physically or psychologically on the victim.³

Keywords: bullying experiences, self-esteem, depression, adolescents.

An experience of bullying embraces three most important elements that qualify any bullying behavior and these are: the aim to hurt the target, in a relationship that is characterized by an imbalance of power and an action must be repeated.⁴ Bullying occurs in three forms namely the physical, the social and the verbal forms. The two major categories are the direct and the indirect forms of bullying.⁵

Of the three types of bullying victimization, the verbal form is more manipulative, exclusive and authoritative in nature.⁶ The process of bullying occurs at three levels.⁷ While the first level takes place when children are young and are more likely to learn bullying from the micro environment during interactions with caregivers and siblings, the second level of the bully-victim cycle occurs at adolescent level in school settings and communities. The third level of the cycle comes during adult life when an individual assumes power either at a place of work or within the family.

Though bullying has been misconceived a normal practice among adolescents, its effects are traumatizing to the physical, social and psychological health of the bullied individual.⁸ The Childs' involvement in bullying is a profound risk factor for poor psychological well-being.⁹

Bullying has remained a great concern in schools among learners.¹⁰ There is enough evidence suggesting that bullying is a worldwide humiliating experience that cuts across grade and sex.¹¹ Pioneer works on bullying concentrated much on prevalence rates of the incidence. Victims of bullying report not sleeping well, bed wetting, perpetual headaches stomach aches, and sadness.¹² The question on whether bullying experiences have an association or not with negative psychological effects such as low self-esteem and depression is the focus of this study.

METHOD

The sample consisted of 250 learners (125 boys and 125 girls) in grades 8 and 9 of age range 13-17. Participants were drawn from three different randomly selected secondary schools from urban Livingstone.

All eligible participants completed a demographic questionnaire on basic bio-data like age, gender and grade level. The Rosenberg self-esteem scale (Rosenberg, 1965) was used to assess different levels of pupils' self-esteem. The questionnaire comprises 10 items on a 4-point likert scale. A score of 15- 25 meant, moderate self-esteem while a range of 26-30 showed high self-esteem. The survey measured learners' self-perceptions about their self-worthy and self-satisfaction.¹³ The internal consistency in this study was .63. The Adolescent Peer Relations victim scale-B was used to assess bullying experiences. The scale has 18 items. Six items measure physical victimization, six measure verbal and six assess social victimization.¹⁴

Each individual participant was assigned a total score by adding up the items. To be considered a victim an individual should score above 18 on an individual total scale. A score of less than 18 implied one had never been bullied. The instrument was reported to be reliable with a Cronbachs alpha coefficient 0.95 for the total victim score (Parada, 2000). In this study the internal consistency was acceptable (Cronbach alpha .89). The Beck Depression Inventory (BDI-11, 1995) was used to measure depressive symptoms among school adolescents. It is a self-ranking Inventory with 21-items and measures depressive symptoms over a period of two past weeks. It is a four-point likert scale that ranges from 0 to 3. A student would circle one of the four statements that related to his/her depressive feeling.

Scores 0-13 represents a minimal range of depression, 14-19 mild, 20-28 moderate 29-63 as severe.

The BDI-II informs on depressive symptom and it has been used before to detect depression among adolescents from public schools.¹⁵ The BDI-II is able to discriminate the non-depressed from the depressed. The BDI-II has a high co-efficient alpha of .80. In the current study the internal consistency of the Beck Depression Inventory was acceptable (Cronbach alpha .79).

RESULTS

Grade and gender differences in bullying, self-esteem and depression (F-test).

The study revealed a significant sex difference in depression ($p < .01$) and self-esteem ($p < .05$) among the grade nines. Grade nine females reported low self-esteem and high depression levels than their grade nine male counterparts.

The Correlation between bullying, depression and self-esteem.

The results showed that there was a positive and significant ($p=0.000$) correlation between bullying and depression, $p < .01$, the more bullied the learners were, the more depressed they became. There was also a negative and significant ($p=0.014$) correlation between victimization and self-esteem $r = -.16$, $P < .05$, the more bullied learners were, the less self-esteem they exhibited.

A hierarchical multiple regression analysis was run to predict self-esteem from physical, social and verbal victimization in this order. Social demographics were entered in the first model as controlling.

Physical bullying significantly (sig F change = .014) predicted self-esteem and significantly ($p = .033$) contributed to the regression model $F(4, 245) = 2.662$, $P < .05$, $R^2 = .042$. Introducing social

bullying to the model added an additional 5.7 % raising the variance to 9.9 % and this change in R^2 was statistically significant (sig F change = .000). The two variables physical and social bullying significantly contributed to the model, $F(5, 244) = 5.361$, $P < .01$, $R^2 = .099$. Social bullying was the strongest predictor on self-esteem (beta = -.491, sig = .000). Verbal bullying was introduced at stage 3 to the model and made an additional 4.7% raising the variance to 14.6 % and this change in R^2 was significant (sig F change = .000). A combination of physical, social and verbal bullying significantly contributed to the full model $F(6, 243) = 6.947$, $P < .01$, $R^2 = .146$.

Hierarchical regression was run to predict depression from physical, social and verbal victimization. In stage one, physical bullying was entered on its own and accounted for 27.5 % of variance in depression. Physical bullying significantly (sig F Change = .000) predicted depression and also statistically contributed to the regression model, $F(4, 245) = 23.271$, $P < .01$, $R^2 = .275$. Introducing social victimization contributed an additional 5.7 % of variance and raised the variance to 33.2 % and this change in R^2 was statistically significant (sig F change = .000). The combination of physical and social bullying to the regression model statistically significantly (sig = .000) predicted depression, $F(5, 244) = 24.297$, $P < .05$, $R^2 = .332$. Verbal victimization was entered in the last stage to the full model and added only 0.5 % raising the variance to 33.7 %. Verbal bullying did not statistically significantly (sig F change = .185) predict depression.

The combination of the three variables physical, social and verbal, however, statistically significantly contributed to the model, $F(6, 243) = 20.605$, $P < .01$, $R^2 = .337$.

Social bullying was the strongest predictor of depression (beta = .332, sig = .000).

DISCUSSION

The results of this study support the findings of studies conducted in developed countries showing a significant correlation between bullying experiences, self-esteem and depression. Other studies conducted in the west have shown a similar association between bullying experiences, depression and self-esteem.¹⁶ This study informs culture where bullying has been considered a normal way of growing up among children and adolescents. It clearly brings out the evidence that bullying can affect an individuals' psychological health.

The investigation revealed higher frequencies of bullying experiences among the 9th graders as compared to their grade eight counterparts. This could be as a result of the longer period of bullying among the 9th graders.

It was hypothesized that there would be significant grade and gender differences on bullying experiences, self-esteem, and depression. At grade nine level, significant sex differences were found on self-esteem and depression. Males recorded higher self-esteem and less depression than females. Similar findings have been observed in other studies where males report higher levels of self-esteem than females.¹⁷ Similar low levels of self-esteem have been observed in other studies among females as compared to their male counterparts.¹⁸ Variations, however exist. Some other studies have to the contrary reported a higher level of self-esteem among females as compared to males.¹⁹ This has been attributed to the understanding that boys have their self-esteem develop progressively constant from early age and low grade to high age and grade contrary to female's self-esteem that starts low at early age and grade and only increases at later age and grade.²⁰ Equal levels of self-esteem among boys and girls can only be attained in a culture that promotes free integration and equal participation of the two sexes in roles.²¹

The second hypothesis predicted a significant correlation of bullying experiences to self-esteem and depression. This result is consistent with Ubas' study which indicate a positive correlation between bullying and depression¹⁹The higher the frequency of being bullied, the more depressed victims become and the more decreased their self-esteem becomes.

In summary, children and adolescents who are bullied are likely to record decreased self-esteem and higher levels of depression. Girls have been observed more vulnerable to decreased self-esteem than boys except in a culture that promotes equal participation in roles from childhood as highlighted earlier.¹⁹

The provision of clinical services can help to identify early signs of bullying. Learning institutions should be of good size in order to encourage and model belonging.

Management in various institutions can enact policies that can protect children and adolescents from bullying. Authorities have been observed to deny or underreport the prevalence of bullying in learning institutions.²²

The significant sex differences on bullying victimization highlight the importance of developing different interventions for males and females. The promotion of social skills can render adolescents a spirit of perseverance in the face of bullying). Children with inadequate self-esteem will have challenges in forming relationships with peers. These children will easily be frustrated and may live a lonely life.²³

B.F.Skinner' behaviouralist theory explains the interplay between internal and external factors in order to influence behavior. According to Skinner the individual will be affected by a stimulus as a result of their negative response to that stimulus. The theory highlights the need for environmental and behavioral changes in the school or any other setting in order to remedy psychological distress like low self-esteem and

depression. Depressive symptoms and low self-esteem are triggered by individual differences in the manner individuals respond to stressful stimuli in the environment.²⁴

Parents who engage their children into self-belief empower them with adequate self-esteem to believe in themselves. The level of perceived family support on the basis of economic status is a distinguishing factor between the West and the African Context. Individualism can best be realized with a viable economic status. Low levels of perceived family support and exposure to domestic and community violence have been linked with many forms of bullying behavior.²⁵

In conclusion, bullying affects the victims' psychological wellbeing. The study revealed that girls get more affected than boys. The study showed that the longer the period of exposure to bullying, the more adolescents get affected psychologically and this was evident among the grade nine learners. It has also been shown that bullying has a link to the prediction of low self-esteem and depression among victimized learners. The study has significantly contributed to the understanding that bullying and victimization if not controlled can result into a vicious cycle of misery for children and adolescents.

Literature globally shows that bullying is a potential threat to learners' psychological functioning.²⁶ On the basis of the findings of the current study the following recommendations were made:

This study saw a need to conduct a similar study that would not only assess psychological functioning through self-report instruments but one that would assess psychological health of victims of bullying with the Diagnostic Statistical Manual and other mental screening instruments in order to determine mental health.

There is need for future studies that will address prevention and intervention strategies on bullying. The enactment of an anti-bullying policy in an institution would help curb bullying through sensitization on negative effects of bullying. Bullies need to be identified and be rehabilitated into sociable beings.

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