

Nursing Intervention To Control Bullying Among Preparatory Government School Students

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Abstract

Background: Bullying is an ongoing and deliberate misuse of power in relationships through repeated verbal, physical and/or social behavior that intends to cause physical, social and/or psychological harm. It can involve a student's misusing their power, or perceived power, over one or more persons who feel unable to stop it from happening.

Aim: The present study aims to evaluate the effect of nursing intervention to control bullying among preparatory government school students.

Design: A quasi-experimental one group pretest- posttest design was used.

Setting: the study was conducted at five male preparatory schools.

Sample: A stratified random sample of 320 male students.

Results: depict highly statistically significant differences between bullying episodes scores as pre contemplation, contemplation, preparation, participation, continuity and relapse stages among student in pre and post after intervention. **Conclusion:** The students whom received the nursing intervention had a positive impact on students' knowledge and behavior regarding bullying at school. **Recommendation:** Disseminate the education program regarding bullying prevention and controlling at different schools in Egypt to improve students' knowledge and behavior.

Keywords: bullying, school student and educational program

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I. Background

Bullying exists in all communities since long time. Bullying exists either in developed or developing societies. Bullying starts in early age. Students starts to build an initial concept of bullying. Then, it starts increasing and continues until it reaches its peak in the preparatory phase stage. It continues in higher basic stage, and then started to decline at secondary level. Bullying is considered a common form of violence in schools. Various studies indicated that bullying makes schools to be unsafe places for schools' students (Marcum, 2018)⁵.

Bullying in schools is a worldwide problem among different age segments. The view of a beaten child with his/her clothes worn and books thrown away has become normal view in front of school walls. The most dangerous in this case is that the behavior of bullying is covered by secrecy by the victims so as to avoid more abuse by other students, or they believe they will be isolated by others if they declare their cases, and they believe that bullying action might be reduced if the victim stays silent. The victim may hide any abuse action to teachers and principal because he/she knows that no punishment procedures will be taken against the bully. They also afraid that their families will become more anxious if they know the case (Wolke, Woods, Stanford & Schulz, 2019)⁸.

Bullying may manifest itself in many forms. It can be physical, verbal, relational, or cyber; it can be subtle and elusive. The most common form of bullying both for boys and girls is verbal bullying such as name-calling. Although bullying is more common in schools, it can occur anywhere. It often occurs in unstructured areas such as playgrounds, cafeterias, hallways, and buses. In recent years, cyber-bullying has received increased attention, as electronic devices have become more common. Bullying through electronic means, although prevalent, ranks third after verbal bullying and physical bullying. School bullying can cause post-traumatic stress disorder (PTSD), low self-esteem, psychosocial problems such as depression, loneliness, anxiety, emotional issues, somatic symptoms, poor academic achievement, psychosocial adjustments, deviant behaviors, long-term mental health problems and even violent or suicidal behaviors. (Misawa, 2018).⁶

A school is a place where students spend most of their time on growth and development. Students that are supported by their teachers feel an increased sense of belongingness, more engaged, have fewer behavioral problems, and perform better in their academics. Conversely, unhealthy school environments have adverse effects on a student's academic achievement. Academic achievement around the world is significant for schooling, and several studies are being carried out on the physical factors that could affect educational performance (Blake ., Kim., Lund & Benz,2019).¹

The school health nurse is a crucial member of the team participating in the prevention of bullying in schools. School nurses are the experts in pediatric health in schools and, therefore, can have an impact on the health and safety of all students, including students who bully, students who are bullied, or students who both bully and are bullied by others (Centers for Disease Control and Prevention [CDC], 2020). ²The school nurse role includes the prevention of bullying and the identify-cation of students who are bullied, bully others, or both. The school nurse has a significant leadership role in the implementation of bullying prevention policies and strategies.

Aim of the study

The present study aims to evaluate the effect of nursing intervention to control bullying among preparatory government school students, through the following objectives:

- 1-Assess the types of bullying (physical, verbal, sexual, social, electronic and ethnic) and the effect of bullying on students
- 2- Assess the bullying among preparatory school students
- 3-Design a nursing intervention to control bullying based on the assessment.
- 4-Implement the nursing intervention to control school bullying.
- 5- Evaluate the effect of nursing intervention based on transtheoretical model on preparatory governmental school students' knowledge, episodes of bullying and the effects.

Research hypotheses

To fulfill the aim of the study, the following hypotheses are formulated:

H1: The posttest- mean score of reported bullying episodes among preparatory governmental school students who are exposed to nursing intervention to control bullying will be less than pretest –mean scores.

H2: The post test - mean score of reported bullying health effect among preparatory governmental school students who are exposed to nursing intervention to control bullying will be less than pretest –mean scores.

H3: The post test - mean score of bullying change based on transtheoretical model among preparatory governmental school students who are exposed to nursing intervention to control bullying will be higher than pretest –mean scores.

Operational definition

Bullying is the deliberate negative actions on the part of one or more students to harm another student, done repeatedly, all the time, and these negative actions can be with words, for example: by threatening, reprimanding, teasing and insults, and it can be through physical contact such as hitting, pushing and kicking, and it can be Do so without using words or physical exposure such as grimacing or inappropriate gestures, with the intent and intention to isolate him from the group or refuse to respond to his desire

II. Subject and Methods

Research Design

A quasi – experimental one group pretest- posttest design was used

Setting of the study

This study was conducted at five male preparatory schools affiliated to the Educational administration in the Ancient Egypt

Sample

A stratified random sample of 320 male students

Exclusion criteria:

- 1- Female sex
- 2- Age \geq 15 years old.

Tools for data collection: Data was collected from students through the following two tools: I-An interviewing bullying questionnaire. That includes four parts: a) Data related to bullying as age, education grade, and definition of bullying, bully times and number. b) Data related to causes of bullying as family, school environment and students causes. c) Types of bullying that are reported by student as physical, verbal, sexual, ethnic and social bullying. d) Impact of bullying that are reported by student as physical, social, psychological

and academic achievement impact. Scoring system: For third and fourth part, was one (1) for yes answer (reported bullying) and zero for no answer (absence of bullying). A total score of reported bullying was computed by summing reported episodes and effect occur of all questions then calculated level of school bullying classified into three levels based on the total scoring as: mild effect ($\geq 75\%$), moderate (50% to $< 75\%$) and sever ($< 50\%$). II- A transtheoretical model questionnaire for the stages of change among preparatory school students. It consists of questions related to stage of change. Precontemplation stage that includes 4 questions, contemplation stage that includes 4 questions, preparation stage includes 14 questions, participation stage that includes 5 questions, continuity stage includes 3 questions and return stage that includes 2 questions. Scoring system: All items (responses) of the questionnaire will be scored on the basis of the 5-item Likert scale (0: don't know/, 1: strongly disagree, 2: often disagree, 3: often agree and 4: strongly agree). The scores were categorized into three levels: favorable (mean score of higher than 75), partly favorable (mean score between 50-75), and unfavorable (mean score of less than 50).

Validity and Reliability

The study tools were reviewed for content validity by a panel of three experts in the field of community health nursing to assess relevancy and clarity of the tools. Cronbach’s alpha was used to determine internal consistency of the tools. A coefficient of 0.00 indicates lack of reliability, a coefficient of 1.00 indicates perfect reliability and a reliability coefficient of 0.70 is acceptable. The Cronbach’s alpha for the first tool scale was 0.80, 0.78 for the second tool scale and 0.84 for the third tool scale.

Data collection

Data collected for the study before the educational program implementation. The questionnaires was distributed through the school day to the students to complete study tools. Based on pretest results, the researchers was designed a nursing intervention to control bullying among preparatory school students. The designed program was conducted in form of training sessions and it was carried out on 4 sessions. Arabic handout or booklet containing the main points was distributed to preparatory school students at end of the program. Training program aides (power point presentation, role play... etc.) was utilized to achieve the program objectives, as well as an appropriate method of conclusion and summary was carried out at the end of each session. Then evaluating the effects of nursing intervention based on transtheoretical model on bullying. The same two tools (tool I: second, third and fourth part & tool II) was applied immediately after nursing intervention in order to evaluate the changes in the behavior outcome after the implementation.

Data Analysis

Statistical package for the social science (SPSS) program version 23. Descriptive statistics were utilized as frequency, mean and standard deviation. Quantitative data were expressed as frequencies and percentages. Comparison between pretest and posttest

III. Results

Figure (1) Distribution of preparatory school students in relation to their educational level and age (n=320)

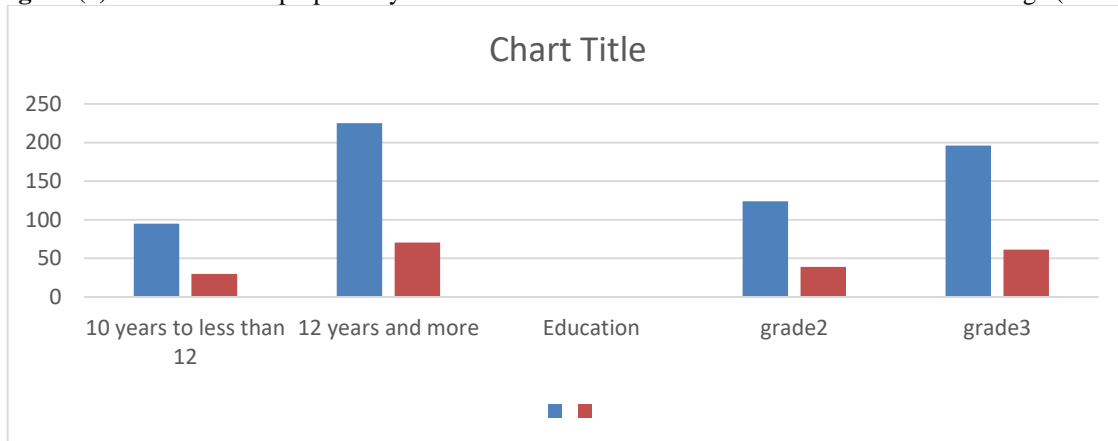


Figure (1) showed that, 70.3% of the preparatory school students their age ranged from 12 to 14 years old and 29.7% of them had 10to less than 12 years old. Also, 61.25% of students in the 3rd educational level while, 38.75 of them in the 2nd level.

Figure (2) Distribution of the preparatory school students opinions regarding the causes which encourage school bullying (n=320)

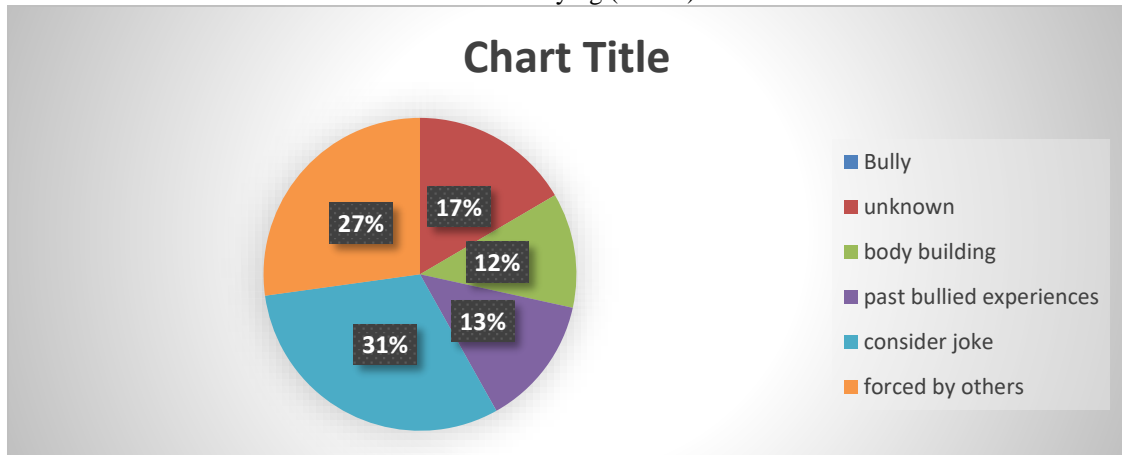


Figure (2) represented that, 17% of students don't know the causes of bullying in school. While, 31% of them says may be for joking. In addition to, 27% of the preparatory school students mentioned that the bully student's friends encourage him for bullying.

Table (1) Difference between types of bullying among preparatory government school students in pre and post intervention (n=320)

Items	Mean	Sd	Mean	sd	t	P
Physical bullying	4.01	1.73	2.68	2.10	8.722	.0001*
Verbal bullying	2.73	1.45	1.68	0.87	11.047	.0001*
Social bullying	3.85	1.35	2.33	1.74	12.330	.0001*
Cyber bullying	1.18	0.71	1.10	0.55	1.496	.135
Sexual bullying	2.77	1.25	1.22	0.78	18.887	.0001*
Ethnic bullying	2.00	1.35	1.23	0.83	8.649	.0001*

*significant at p-value<0.05

Table (1) reflected highly statistically significant differences between physical, verbal, social, sexual and ethnic bullying scores among students in pre and post after intervention. Also, there was no statistically significant differences between cyber bullying scores among students in pre and post after intervention.

Table (2) Difference between impact of bullying among preparatory government school students in pre and post intervention (n=320)

Items	Mean	Sd	Mean	Sd	t	p
Physical effect	5.13	2.81	3.44	2.85	7.546	.0001*
Psychological effect	2.81	1.54	1.92	1.60	7.211	.0001*
Social effect	3.43	1.66	2.46	1.80	7.135	.0001*
Academic effect	2.38	1.09	1.89	1.13	5.538	.0001*

*significant at p-value<0.05

Table (1) reflected highly statistically significant differences between bullying effects scores as physical, psychosocial and academic among students in pre and post after intervention.

Table (3) Difference between level of change based on transtheoretical model among students in pre and post means after intervention (n=320)

Items	Mean	sd	Mean	sd	t	P
Pre contemplation stage						
Does bullying have effect	3.20	1.69	4.58	0.50	13.945	.0001*
If bullying treated	3.15	1.70	3.32	1.35	1.418	.157
Provide bullying law	3.29	1.80	4.42	0.49	10.793	.0001*
Contemplation stage						
Causes of bullying	3.30	1.75	4.32	0.67	9.769	.0001*
bullying place	3.16	1.71	4.58	0.50	14.275	.0001*
Teaching for bullying	3.56	1.63	4.58	0.50	10.660	.0001*
Preparation stage						
Safe school environment	2.57	1.00	4.33	0.67	26.211	.0001*
Safe students	2.49	0.73	4.22	0.63	31.984	.0001*
Teacher roles	1.95	0.90	4.26	0.64	37.483	.0001*
Bullying rules	1.96	0.94	3.32	1.35	14.854	.0001*
Bullying education	1.76	0.81	4.58	0.49	53.170	.0001*
Avoid nick name	1.76	0.80	4.47	0.69	46.065	.0001*
Family& school cooperation	1.80	0.78	4.58	0.49	11.047	.0001*
Media controls	1.87	0.78	3.99	1.54	12.330	.0001*
Self-confidences	1.80	0.78	4.58	0.49	1.496	.135
Participation stage						
Participation in seminars	1.83	0.81	4.42	0.49	8.649	.0001*
Bullying plan implementation	1.83	0.81	4.43	0.50	5.538	.0001*
Continuity stage						
Social worker role at school	2.49	0.89	4.16	0.63	13.945	.0001*
Continuous follow-up	2.51	0.89	3.90	1.21	12.123	.0001*
Student encouragement	2.50	0.89	3.90	1.21	1.418	.157
Return/relapse stage						
Early detection of bullying	1.83	0.82	4.39	0.49	10.793	.0001*
Reward and punishment	1.83	0.82	4.42	0.49	9.769	.0001*

Table (3) depict highly statistically significant differences between level of change dimensions scores as pre contemplation, contemplation, preparation, participation, continuity and relapse stages among student in pre and post after intervention.

Table (4) Difference between level of change among students in pre and post means after intervention (n=320)

Level	No.	%	No.	%	Chi-square	p
Low	138	43.1	0	0.0	398.2	0.0001*
Moderate	165	51.6	61	19.1		
High	17	5.3	259	80.9		

*significant at p-value<0.05

Table (4) revealed highly statistically significant differences between level of change dimensions scores among student in pre and post after intervention. Also, there was highly positive change among students after intervention.

IV. Discussion

When reflecting on the concept of quality of education, school climate is often considered as an important condition for student's well-being. Patchin, (2022)⁷ stated that the safety and the security of the learning environment are crucial elements for the dynamic concept of the quality education. Following this idea, pupils might find it difficult to attend classes, concentrate on the school subjects, and reach their full potential in an environment where they feel unsafe, insecure or intimidated.

Findings of the present study reflected highly statistically significant differences between bullying types as physical, verbal, social, sexual and ethnic scores among students in pre and post after intervention. Also, there was no statistically significant differences between cyber bullying scores among students in pre and post after intervention. This results of students 'post test program may be due to the nursing intervention sessions and booklet to control bullying among preparatory government school students

These results similar with a study done by Costantino et al.,(2020)³ to investigate the effects of an intervention to prevent the bullying in first-grade secondary schools of Palermo, Italy among 402 students. The study found that, decrease in the number of bullying episodes after the intervention was reported by the students in all types of bullying as physical, verbal, and indirect bullying and observers. Also the results of the present study in accordance with a study conducted by Patchin. J, (2022) to assess the cyberbullying by online survey among 2,546 middle and high school students between the ages of 13 and 17 in the United States. The study revealed that, approximately 46% of the students in our 2021 sample report experiencing cyberbullying in their lifetimes.

Findings of the present study depict highly statistically significant differences between bullying effects scores as physical, psychosocial and academic achievement among students in pre and post after nursing intervention. These results in agreement with a study done by Guarini et al., (2021)⁴ to assess the implementing of P.E.A.C.E. (Preparation, Education. Action, Coping, Evaluation) program among 551 Italian secondary school students. The study illustrated that, this program is very useful for severe victims, supporting their self-confidence with a decrease in the frequency of aggressive episodes and negative effect of bullying among students.

Regarding to the level of change based on transtheoretical model, the current study depict highly statistically significant differences between level of change dimensions scores as pre contemplation, contemplation, preparation, participation, continuity and relapse stages among student in pre and post after intervention session and written booklet. Also, the current study revealed highly statistically significant differences between level of change dimensions scores among student in pre and post after intervention. Also, there was highly positive change among students after intervention. these findings support the research hypothesis regarding the post test - mean score of bullying change based on transtheoretical model among preparatory governmental school students who are exposed to nursing intervention to control bullying will be higher than pretest –mean scores.

This results of the present study in the same line with a study done by Guarini et al., (2021)⁴ to assess the implementing of P.E.A.C.E. (Preparation, Education. Action, Coping, Evaluation). The study had a significant and positive impact on the students after implementation the program activities as student encouragement and social activities. In addition to, increase in student self-efficacy in dealing with bullying amongst the seriously bullied students.

V. Conclusion:

Based on the study results, it can be concluded that bullying among preparatory government school students had been controlled after nursing intervention with statically significance differences between pre and posttest. The students whom received the nursing intervention had a positive impact on students' knowledge and behavior regarding bullying at school.

VI. Recommendations:

In the light of the previous findings of the current study, the following recommendations are suggested:

- Disseminate the education program regarding bullying prevention and controlling at different schools in Egypt to improve students' knowledge and behavior.
- Early detection of students who complain of any bullying hazards and improving follow up facilities directed to school students.

-Further researches on a large sample of students in different schools and different level of education to generalize the results.

VII. Ethical Consideration

An official approval will be obtained from Research Ethics Committee and related committees at Faculty of Nursing, Cairo University to conduct the study. An official permission will be obtained from general administration of preparatory education. The researchers will also emphasize that participation in this study is voluntary; each subject has the right to withdraw from the study when he wants. Written consent will be obtained from every student who accepts to participate. Subjects will be assured that this data will not be reused in another research without their permission and the data collected will be used only for the research.

Source of Support: Self
Conflict of Interest: None

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