PSYCHO-SOCIAL CHALLENGES AND ADJUSTMENT STRATEGIES OF BULLIED IN-SCHOOL ADOLESCENTS IN KWARA STATE, NIGERIA

Mulikat L. A. Mustapha. (Ph.D)

&

Mrs. Mosunmola Kudirat Adeboye

Department of Counsellor Education, Faculty of Education, University of Ilorin, Ilorin, Nigeria

Abstract

Bullying in schools is a serious societal problem that has become a major source of worry for educators. Bullying behaviours were repeatedly exposed to in-school adolescents, causing them to develop psychological and social problems. Thus, the study investigated the psycho-social challenges and adjustment strategies of bullied in-school adolescents in Kwara State, Nigeria. The study adopted a descriptive survey design. The population of this study comprised all bullied inschool adolescents in Kwara State, Nigeria estimated to be 29,107 while a sample of 400 bullied secondary school students selected from the three Senatorial Districts in the state participated in the study. The sample was selected using proportionate, stratified and snowball sampling techniques. Two questionnaires titled "Psycho-Social Challenges of Bullied Questionnaire" and "Adjustment Strategies of Bullied Questionnaire" were used to collect data for the study. They were content validated and tested with a reliability coefficient of 0.73 and 0.82 respectively. The percentage was used for demographic data, and mean and rank order analysis was used for research questions. The findings revealed that bullied in-school adolescents experience all the psychosocial challenges identified in the study. These include low self-esteem, frequent feeling of embarrassment among their peer, and fighting with classmates among others. It was also revealed that bullied in-school adolescents employed aggressive, social, helpless and cognitive adjustment strategies in the stated order. The study recommended the need for school counsellors to develop intervention strategies to help bullied adolescents overcome the psycho-social challenges they are currently experiencing. School counsellors need to identify bullied in-school adolescents and expose them to effective adjustment strategies. Anti-Bullying policies must be developed and mainstream into the schools' systems of operation.

Keywords: Psycho-social challenges, adjustment strategies, bullied in-school adolescents, Kwara State.

Introduction

Bullying in schools is a pressing social issue that has become a major concern to education stakeholders. Despite many strategies put in place to curb bullying behaviour, the problem is still rampant globally. Schools are expected to be places where all students feel safe and secure; however, some students display bad behaviour to hurt the feelings, integrity, prestige and emotions of others.

Bullying can be described as repeated negative events over time that are directed at particular individuals and are carried out by one or several other people who are stronger than the victim. This event can be aggressive physical contact in the form of fights and shoving, verbal threats and mockery, grimacing or cruel gesturing (Aluede, Adeleke; Omoike & Afen-Akpaida, 2008). Beane (2009) defined bullying as a subset of aggressive behaviour displayed by an individual to harm another person or a group of people usually children or adolescents. According to him, bullies engage in the act to establish power and to have control over their colleagues, whom they considered being "weaker". Bullying, a type of aggressive behaviour, is a common occurrence among children and adolescents in schools around the world (Beane, 2009).

Bullying in schools is divided into two categories: direct and indirect bullying, which are further subdivided. Direct bullying is a physical assault on the victims and it includes behaviours like fighting, punching, strangling, spitting, hitting, shoving, kicking, pushing, demand for money, tripping, vandalising properties, a rude gesture, and destruction of another's work (Jansen, Veenstra, Ormel, Verhulst & Reijneveld, 2011). It also includes verbal attacks like name-calling, abuse, verbal threat, harassment, teasing, insult, mobbing and verbal intimidation. Indirect bullying comprises relational, cyber and sexual bullying. Relational bullying involves slander, exclusion from the group, spoiling victims' reputation, spreading inaccurate rumours about a person, shunning, practical jokes, etc (Jansen, *et al.*, 2011) and it can be electronically perpetrated (cyberbullying). Cyber-bullying is a new form of bullying which involves the use of information and communication technologies such as cell phones, e-mail, instant messages, and defamatory personas websites to support deliberate, repeated and hostile behaviour by an individual or group that intended to harm others (Hinduja & Patchin, 2014).

Bullying in schools harms the school climate and ambience, as well as students' feeling of safety. Bullying creates a fearful environment among students, which inhibits their ability to learn, leading to acts such as vandalism, boycotting lectures, disrupting school programmes, skipping school, a high rate of adolescents dropping out of school, loss of lives and property, and in some cases, the closure of schools (Okulaja, 2010). Bullying can have catastrophic and even lethal consequences. Unfortunately, because schools and adults do not take the issues seriously enough, it is critically undervalued (Egbochuku, 2007). Various scholars have indicated an increase in bullying behaviour among in-school adolescents. In the United States, Mitsopoulou and Giovazolias, (2013) revealed that over two million youths in the United States are involved in bullying behaviour as bullies, victims or as bully-victims. In Nigeria, Omoteso (2010) found that 70.6% of his respondents selected in 10 schools across the state of Osun in Nigeria reported a high level of bullying behaviour. Aluede et al., (2008) in a prevalence study reported that 91.5% of the respondents selected in schools across a South-West region of the country agreed that bullying behaviour is a common feature in schools. Peer bullying is widespread among school-age children with rates of bullying reaching nearly 50% in some studies (Fekkes, Pijpers, & Verloove-Vanhorick, 2005). Canadian studies have reported rates of adolescent involvement in bullying ranging from 25% to 50% (Craig & McCuaigEdge, 2008). Furthermore, bullying appears to be most prevalent during the transition period of primary to secondary school, or early adolescence (Eslea & Rees, 2001; Fitzpatrick & Bussey, 2011). In Kwara state, it has been reported that 13.68%, 21.80%, 10.70%, 8.0% and 10.80% of inschool adolescents experienced physical, verbal, relational, cyber and sexual victimisation (Mustapha, 2020)

In-school adolescents assume different roles in bullying interaction, these include bullies who perpetrate the act; victims/bullied who are at the receiving end, bully-victims play dual roles of perpetration and also being bullied; the supporters who hail the perpetrators or join in carrying out the perpetration and the bye-stander or uninvolved who do not participate in bullying acts at all. The focus of this work is on the bullied who is also known as victims.

A victim/bullied is someone who sustains repeated and intentional acts of aggression from someone holding more power in the situation (Boulton & Underwood, 2002). Children who are bullied have been found to experience many psychological and social challenges. They are often anxious, insecure and unhappy. They may also be less likely to take risks, lacking in self-confidence, and social skills and may have few friends; more likely to have parents whom others consider overprotective; perceived as 'different' or physically weaker than their peers; and more likely to have special or additional education provision (Boulton & Underwood, 2002; Rigby, 2003).

Psychosocial challenges refer to the difficulties faced by adolescents in different areas of personal and social functioning (Wade & Reece, 2014). Psychosocial challenges refer to the difficulties faced by adolescents in different areas of personal and social functioning (World Health Organisation, 2017). Adolescents are vulnerable to psychosocial problems because of physical and physiological changes that occur in their bodies during this developmental stage. Psychosocial problems are described as maladaptive, unhealthy or negative emotional, intrapersonal states of the behaviour and are highly connected to poor social functioning (*Laelia, Apicella, Brakarsh, Dube, Jemison,* Kluckow, Smith & Snider, 2006).

An in-school adolescent who experiences the world as unpredictable, unresponsive and/or hostile, must expend a tremendous amount of energy and self-managing emotional arousal. Insecure attachment is associated with emotional and social incompetence, particularly in the areas of emotional understanding and regulated anger (Abosi, 2004). Furthermore, perceptions of an indifferent or unfriendly social world influence subsequent emotional responses and interpersonal behaviour. For example, an in-school adolescent who experiences maltreatment may develop primary emotional responses such as anxiety or fear (Weiten & McCann, 2007).

A wide range of psychosocial challenges of bullied adolescents have been documented (Bond, Carlin, Thomas, Rubin & Patton, 2001; Rigby, 2003. Bullying is significantly related to low levels of psychological well-being such as general unhappiness and low self-esteem (Hawker & Boulton, 2000; Rigby, 2003; feelings of loneliness or isolation; feeling rejected in school and being over sensitive to issues among others. It's also linked to poor social adjustment, such as aversion to social surroundings and avoiding school or work circumstances; they also have significant levels of psychological distress, such as anxiety, depression, or suicidal thinking. (Bond, Carlin, Thomas, Rubin & Patton, 2003; Fitzpatrick & Bussey, 2011;) Bullied in-school adolescents have also been reported to have more physical health issues, such as headaches and stomachaches, than their non-

victimised peers (Bond, Carlin, Thomas, Rubin, & Patton, 2003; Kumpulainen & Räsänen, 2000); and psychosomatic issues, such as sleep disturbance and bedwetting (Due, Holstein, Lynch, Diderichsen, Gabhain, Scheidt, Currie, 2005). These effects can last for a short time or for a long time (Rigby, 2003).

Shiba, Ankit and Gaurav (2018) found that bullied in-school adolescents experience increased loneliness (59.6%), when compared to other groups that assume different bullying roles. In terms of depression among the victims of bullying, it was found that 17.5% suffered low depression, 33.3% had moderate depression and 49.2% developed severe depression. However, some bullied in-school adolescents developed adjustment strategies that assist them to cope effectively with the aftermath of bullying incidence.

Adjustment strategies are generally defined as an individual's behavioural, emotional, and cognitive responses to stress or bullying (Tenenbaum, Varjas, Meyers & Parris, 2011). Adjustment strategies assist people to eliminate or change problems by neutralising their negative aspects, allowing them to better control their emotional responses (Smith & Frisén, 2012). Social adjustment (seeking help from family, friends, teachers, and peer supporters); aggressive adjustment (retaliation, physical attacks, verbal threats); helpless adjustment (hopelessness, passive reactions, such as avoidance; displays of emotion); and cognitive adjustment strategies (responding assertively, using reason; analysing the bullying episode and the bully's behaviour), according to Riebel, Jäger, and Fischer (2009).

In-school adolescents who had escaped bullying reported using a variety of effective strategies, including telling someone, actively seeking new friends, and even befriending the bully – strategies that 'continuing victims' (those who had been bullied for more than two years) were less likely to use. The persistent victims had a much lower school attendance rate, which served as their only adjustment technique for further isolating themselves from their friends. In addition, the young people who managed to flee had learned to persevere in the face of adversity (Smith, Mahdavi, Carvalho, Fisher, Russell & Tippett, 2008). According to Smith *et al.*, (2008), some children can cope with bullying by drawing on their inner resources to cope with the misery of being bullied, while others adopt a variety of social skills to avoid being bullied.

Many studies have been conducted relating to the psychosocial challenges of bullied in-school adolescents as they have been reviewed (Hawker & Boulton, 2000; Bond *et al.*, 2001; Boulton, 2002; Rigby, 2003; Similarly, research has been conducted on adjustment strategies for bullied in-school adolescents (Smith *et al.*, 2008; Riebel *et al.*, 2009; Tenenbaum *et al.*, 2011). The majority of these studies were conducted in other countries, with only a few conducted in the country of study. The few studies in the area of study; Yahaya & Mustapha, 2015; Esere & Mustapha, 2018) did not focus entirely on the bullied, highlighting the need to concentrate on the psycho-social issues faced by bullied in-school adolescents in Kwara State. The study's findings will serve as a foundation for the creation of effective interventions to assist bullied in-school teenagers in overcoming the obstacles they face as a result of their victimisation.

This present study, therefore, investigates the psycho-social challenges and adjustment strategies of bullied in-school adolescents in Kwara State, Nigeria.

Research Questions

The following research questions were answered in this study:

- 1. What are the psycho-social challenges of bullied in-school adolescents in Kwara State, Nigeria?
- 2. What are the adjustment strategies for bullied in-school adolescents in Kwara State, Nigeria?

Methodology

The research design being a quantitative type, adopted a descriptive survey method to gather relevant information in this study. The population of in-school adolescents in Kwara State is 223,893 (Kwara State Ministry of Education and Human Capital Development, 2020). Previous bullying studies in Kwara State have documented the prevalence of bullied in-school adolescents at 13% of the studied sample (Mustapha, 2020) it can then be deduced that the population of this study is 29,107 bullied in-school adolescents estimated at 13% of 223,895 in-school adolescents. Therefore, regarding the Research Advisors (2006), a sample size of 381 was appropriate as the minimum sample size for a population of this magnitude (29,107), five per cent of the population was added to take care of attrition and the sample became 400 bullied in-school adolescents selected from sixteen (16) secondary schools across the three senatorial districts in Kwara State.

The multi-stage sampling procedure was followed in selecting the respondents for the study. In the first stage, proportionate sampling was used to select eight local governments from the three Senatorial Districts in Kwara State (Kwara South has 7 Local Government Areas, Kwara North 5 local government areas and Kwara Central with 4 local government areas) in a ratio of 3:3:2 respectively. In the second stage, also stratified sampling was used to select two (2) secondary schools based on students' population which involved one (1) public and one (1) private school from each of the Local Governments selected for equal representation from the Senatorial Districts making a total of sixteen (16) secondary schools.

In the third stage, the snowball sampling technique was used to select twenty-five (25) students from each of the sixteen (16) secondary schools. It involves firstly selecting a few bullied students through self-identification while the identified students and the teachers also assist in identifying others until the required numbers are obtained. This is a restrictive, cost-effective, convenient, non-probability sampling technique, in which a certain number of sampling units (respondents) provide referrals to recruit the remaining samples required for a research study. The reason for using it is that those who had been bullied as well as some teachers can identify other bullied students for inclusion. Therefore, a total number of four hundred (400) respondents were selected from the three (3) Senatorial Districts in Kwara State.

The instruments adopted to collect data for this study were researcher-designed questionnaires titled "Psycho-Social Challenges of Bullied Questionnaire" and "Adjustment Strategies of Bullied Questionnaire". The psych-social challenges of the bullied questionnaire comprised two sections (Sections A & B). The first section comprised the demographic data of the respondents such as gender, age and school type, while section B comprised twenty statements on the psychosocial challenges of bullied in-school adolescents. Adjustment Strategies of Bullied Questionnaire" contained twenty statements distributed across four categories of adjustment strategies for bullied in-school adolescents. For the psycho-social challenges and adjustment strategies scales, four points Likert-type Scale with the scoring format of Very True of Me (VTM) = 4 points; True of Me (TM) = 3

points; Not True of Me (NTM) = 2 points; and Not Very True of Me (NVTM) = 1 point. The instruments were validated by five experts in the Department of Counsellor Education, University of Ilorin. The instrument was subjected to test re-test reliability and the reliability coefficient of 0.73 and 0.82 was obtained for the two scales respectively.

Data obtain from psycho-social challenges and adjustment strategies scales were analysed using mean score. The mean cut-off point was 2.5, any item which has a mean score of 2.5 and above was adjudged as psycho-social challenges and adjustment strategies for bullied in-school adolescents and vice-versa. Mean and rank order were used to answer research questions 1 and 2. The twenty items of the adjustment strategies were grouped into the four categories of Aggressive, Cognitive, Helpless and Social adjustment strategies. A cumulative mean score was used to find the most employed strategies employed.

Results Demographic Data

This section presents the results of data obtained from the respondents in frequency and percentages.

Table 1: Percentage Distribution of Respondents Based on Gender, Age and School Type

Variable	Frequency	Percentage
Gender		-
Male	170	43.6
Female	220	56.4
Total	390	100
Age		
10-13 years	90	23.1
14-17 years	232	59.5
18 years and above	68	17.4
Total	390	100
School Type		
Private	122	31.3
Public	268	68.7
Total	390	100

The Table reveals that 170 (43.6%) of the respondents were male, while 220 (56.4%) of the respondents were female. Based on age, the table reveals that 90 (23.1%) of the respondents were between 10-13 years old, 232 (59.5%) of the respondents were between 14-17 years old, while 68 (17.4%) of the respondents were 18 years of age and above. The table also shows that 122 (31.3%) of the respondents were from a private school, while 268 (68.7%) of the respondents were from a public school.

Research Question 1: What are the psycho-social challenges of bullied in-school adolescents in Kwara State, Nigeria?

chancinges				
Item	As a result of being bullied, I:	\overline{X}	Rank	
No				
1	have developed low self-esteem	3.51	1 st	
2	often feel embarrassed among my peer group	3.45	2 nd	
18	fight with classmates	3.26	3 rd	
19	do not interact much with others	3.18	4 th	
3	am not always happy	3.18	4 th	

Table 2: Mean and Rank Order Analysis of the Bullied Respondents' Psycho-Social Challenges

Table 2 showed that bullied in-school adolescents developed low self-esteem, often feel embarrassed among their peer group, fight with classmates, do not interact much with others, they are not always happy among other psycho-social challenges.

Research Question 2: What are the adjustment strategies of bullied in-school adolescents in Kwara State, Nigeria?

Table 3: Mean and Rank Order Analysis of the Adjustment Strategies of the Bullied Respondents

Item No	I develop the following adjustment Mean strategies for coping with bullying:	Average X	Rank
3	Aggressive coping	3.40	1 st
4	Social coping	3.17	2^{nd}
2	Helpless coping	3.08	$3^{\rm rd}$
1	Cognitive coping	2.64	4 th

Table 3 revealed that bullied in-school adolescents adopted aggressive, social, helpless and cognitive adjustment strategies.

Discussion

The study revealed that bullied in-school adolescents experienced all the psycho-social challenges identified in this study and these include low self-esteem; often feeling embarrassed among peer groups; fighting with classmates. This means that frequent experience of victimisation has made the bullied look down on themselves, this makes them feel ashamed and uncomfortable among their peers due to the incidence of victimisation. Many of the bullied in-school adolescents reported fighting with classmates which could be a result of psychological distress experienced. The frequent fight with classmates leads to a reduction in their interaction with others and this precipitates unhappiness. The various experience could provide breeding space for suicidal ideation and attempt which could be traumatic for the adolescents and their parents. The findings support revelations of past studies (Hawker & Boulton, 2000; Rigby, 2003; Hodges & Perry, 2009; Meltzer, Vostanis, Ford, Bebbington & Dennis, 2011;) who asserted that victims of bullying have a higher risk of experiencing issues with psychological well-being such as general unhappiness and low selfesteem, internal feeling of inadequacy, feeling rejected in school, feeling like committing suicide and embarrassment. Nixon (2014) identified psycho-social challenges of bullying victims to include a feeling of embarrassment or humiliation, dissatisfaction with who they are, disinterested in school, anxiety and depression etc. The findings relate to the study of Hodges, Boivin, Vitaro and Bukowski (2009) who reported that bullied in-school adolescents exhibit behavioural problems which include lying, fighting with classmates, and generally acting out in class.

Some researchers claim that school bullying can be traumatic. The psychological trauma as a result of experienced bullying can destabilise in-school adolescents' psychosocial and scholastic pathways (Plexousakis, Kourkoutas, Giovazolias, Chatira & Nikolopoulos, 2019). School bullying experiences often occur at a very critical time, when the brain is developing bio-psycho-social systems that regulate emotions, dramatically making the bullied feel embarrassed. River (2004) revealed that 25% of bullied in-school adolescents appeared to experience post-traumatic stress disorder (PTSD) symptoms, particularly intrusive memories of bullying instances, even after leaving school.

The findings also showed that bullied in-school adolescents adopted an aggressive adjustment strategy. This includes bullying other people and venting anger on those that they can overpower. The top adjustment strategies adopted by the bullied in-school adolescents in Kwara State are negative and undesirable adjustment strategies which show that bullying acts will continue in schools and create a violent atmosphere for younger ones if nothing is done to correct the anomalies. The findings of this study support what Smith and Frisén (2012) found in their study that bullied inschool adolescents sometimes adopted aggressive coping such as retaliating physical attacks, verbal threats, bullying other people and so on.

The second category of adjustment strategies adopted by the in-school adolescents in Kwara State is the social adjustment strategies. This includes seeking help from friends, seeking help from the professionals and significant adults, reporting to the school authority, talking to others about it etc. The use of the social adjustment strategies is commendable, however, the topmost social support they sought is that of friends who may also not know the appropriate and effective strategies to use. They (the group of friends) might all come together to form a gang to fight the bully (ies). This would escalate violence and create more bully victims which studies have shown that they experienced the most devastating psycho-social challenges than all the other adolescents who assumed other bullying roles. The bullied also reported they sought the assistance of the professional and other adults to adjust to bullying incidence. The study did not find out specific professional(s) whose assistance is (are) sought and the type of support given; however, the respondents do not make use of support group network for victims which has been reported to be an effective adjustment strategy (Goosens, Olthof & Decker, 2006; Esere & Mustapha, 2018). The finding is in line with the submission of Riebel, Jäger and Fischer (2009) who identified adjustment strategies for bullied to include social coping (i.e. seeking help from family, friends, teachers, and peer supporters). The finding relates to the study of Paul, Smith and Blumberg (2012) who asserted that adaptive ways of coping with being a victim of bullying include asking a friend for advice, seeking help from an adult, or reporting the incident to a teacher.

In addition, it was established in the study that bullied in-school adolescents employed helpless adjustment strategies such as avoiding the bullies, staying away from school, and leaving school early. These strategies cannot help the bullied to overcome the challenges of bullying. It rather serves as means of extending or compounding the impacts on academic or behavioural problems. The finding is in line with Riebel *et al.*, (2009) who reported that bullied employed helpless coping such as hopelessness, passive reactions like avoidance as well as displaying emotion. The cognitive adjustment strategies assumed the last adjustment strategies that bullied in-school adolescents in

Kwara state utilised in dealing with psychological and social challenges they experience as a result of bullying. This includes self-appraisal e.g. I tell myself that I am worthy and unique, letting out emotions in an appropriate way and using humour. aggressive coping (retaliation, physical attacks, verbal threats). Riebel, Jäger and Fischer (2009) also found that bullied in-school adolescents mostly use helpless coping (hopelessness, passive behaviours such as avoidance; displays of emotion) and cognitive coping (responding assertively, using reason; analyzing the bullying event and the bully's behaviour).

Implications for Counselling

The findings of this study have several implications for counsellors. The finding of the study revealed that psycho-social challenges of bullied in-school adolescents include developing low self-esteem, often feeling embarrassed among their peer group, fighting with classmates, not interacting much with others, and not always being happy among others. Therefore, Counsellors can identify and orientate bullied in-school adolescents who are struggling to adopt good adjustment strategies and teach them different coping strategies. School counsellors can also use Cognitive Behavioural Therapy (CBT) to assist bullied in-school adolescents to develop effective adjustment strategies.

Conclusion

Bullied in-school adolescents in Kwara State have lots of psycho-social challenges calling for urgent attention. Bullied in-school adolescents utilised fewer effective means of adjusting to the challenges of victimisation which need to be addressed.

Recommendations

Based on the findings of this study, it is recommended that:

- 1. There is a need for school counsellors to identify bullied in-school teenagers who are facing various psychosocial issues and assist them in overcoming those challenges.
- 2. There is a need for school counsellors to develop effective intervention strategies to help the bullied overcome the psycho-social challenges they are currently experiencing.
- 3. There is a need for school counsellors to discourage aggressive adjustment to avoid an unsafe school environment as well as expose bullied in-school adolescents to effective adjustment strategies.
- 4. There is a need for all stakeholders in Kwara State especially the Ministry of Education, principals, teachers and counsellors, to develop and mainstream Anti-Bullying policies into their system of operation
- 5. There is a need for school authorities to develop a code of conduct that encourage students to exhibit appropriate behaviours at all times.

References

Abosi, G. (2004). The Effectiveness of Rational Emotive Therapy on Achievement Motivation of Students, *The Journal of Guidance and Counselling*, 9(1): 219-239.

Aluede, O., Adeleke, F. Omoike, D. & Afen-Akpaida, J. (2008). A review of the extent, Nature, Characteristics and Effects of Bullying Behaviour In Schools. *Journal of Instructional Psychology*, 35(2):151-158.

American Psychiatrist Association (APA) (2005). Bullying. Retrieved February 22, 2020, from http://www.apa.org/ppo/issues/bullying.html.

Beane, A. L. (2009). Bullying Prevention for Schools: A Step-by-step Guide to Implementing A

- Successful Anti-bullying Program. San Francisco: Jossey Bass
- Bond, L., Carlin, J. B., Thomas, L., Rubin, K., & Patton, G. (2001). Does Bullying Cause Emotional Problems? A Prospective Study of Young teenagers. *British Medical Journal*, 323, 480-484.
- Boulton, M. J., & Underwood, K. (2002). Bully/victim Problems Among Middle School Children. *British Journal of Educational Psychology*, 62, 73-87.
- Camodeca, M., Goossens, F. A., Terwogt, M. M., & Schuengel, C. (2002). Bullying and victimization Among School-age Children: Stability and Links to Proactive and Reactive Aggression. *Social Development*, 11, 332–345.
- Craig, W. M., & McCuaig Edge, H. (2008). Bullying and fighting. In W.F. Boyce, M.A.
- Crothers, L. M., & Levinson, E. M. (2004). Assessment of bullying: A review of Methods and Instruments. *Journal of Counseling and Development*, 82, 496-503.
- Due, P., Holstein, B. E., Lynch, J., Diderichsen, F., Gabhain, S. N., Scheidt, P. & Currie, C. & The Health Behaviour in School-Aged Children Bullying Working Group (2005). Bullying and Symptoms Among School-Aged Children: International Comparative Cross-sectional Study in 28 Countries. *European Journal of Public Health 15*(2), 128–132.
- Egbochuku, E. O. (2007). Bullying in Nigeria schools: Prevalence Study and Implications for Counselling. *Journal of Social Science*, 14(1), 65-71.
- Esere, M. O & Mustapha, M. L. A. (2018). Counselling Strategies for Modifying Bullying Behaviour in Nigeria. *Kampala International University Journal of Humanities* 3(2), 249-264
- Eslea, M., & Rees, J. (2001). At What Age are Children Most Likely to be Bullied at School? *Aggressive Behavior*, 27, 419-429.
- Evans, C. B. R.&Smokowski, P. R. (2015). Theoretical Explanations for Bullying in School: How Ecological Processes Propagate Perpetration And Victimisation. *Child Adolescents Social Work Journal*, 5, 23-31.
- Fekkes, M.; Pijpers, F. I. M.; & Verloove-Vanhorick, S. P. (2005). Bullying: Who Does What, When And Where? Involvement of Children, Teachers and Parents in Bullying Behaviour. *Health Education Research*, 20(1), 81–91.
- Fitzpatrick, S., & Bussey, K. (2011). The Development of the Social Bullying Involvement Scales. *Aggressive Behavior*, *37*, 177-192.
- Gini, G. (2004). Bullying in Italian Schools: An Overview of Intervention Programmes. *School Psychology International*, *25*, 106–116.
- Glew, G. M., Fan, M. Y., Katon, W., Rivara, F. P. & Kernic, M. A. (2005) Bullying, Psychosocial Adjustment, and Academic Performance in Elementary School. *Archive of Pediatric Adolescent Medicine* 159, 1026–1031.
- Grills, A. E., & Ollendick, T. H. (2002). Peer Victimisation, Global Self-Worth, and Anxiety in Middle School Children. *Journal of Clinical Child and Adolescent Psychology*, *31*, 59–68.
- Guerra, N. G., Williams, K. R. & Sadek, S. (2011). Understanding Bullying and Victimisation During Childhood and Adolescence: A mixed-methods study. *Child Development*, 82(1), 295–310.
- Hampel, P., Manhal, S., & Hayer, T. (2009). Direct and Relational Bullying among Children and Adolescents: Coping and Psychological Adjustment. *School Psychology International*, 30(5), 474-490.
- Hawker, D. S. J., & Boulton, M. J. (2000). Twenty Years' Research On Peer Victimisation And Psychosocial Maladjustment: A Meta-analytic Review of Cross-Sectional Studies. *Journal of Child Psychology and Psychiatry*, 41, 441-455.
- Hinduja, S. & Patchin, J. W. (2014). Cyberbullying Identification, Prevention, and Response.

- Cyberbullying Research Center (www.cyberbullying.us).
- Hodges, E. V. E., & Perry, D. G. (2009). Personal and Interpersonal Antecedents and Consequences of Victimisation by Peers. *Journal of Personality and Social Psychology*, 76, 677-685.
- Hodges, E. V. E., Boivin, M., Vitaro, F., & Bukowski, W. M. (2009). The Power of Friendship: Protection Against the Escalating Cycle of Peer Victimisation. *Developmental Psychology*, 75, 94-101.
- Jansen, D. E., Veenstra, R., Ormel, J., Verhulst, F. C. & Reijneveld, S. A. (2011). Early Risk Factors for Being a Bully, Victim, or Bully/Victim in Late Elementary and Early Secondary Education. The Longitudinal TRAILS study. *BMC Public Health*, *11*, 440.
- Kaltiala-Heino, R., Rimpela, M., Rantanen, P., & Rimpela, A. (2010). Bullying at School: An Indication of Adolescents at Risk for Mental Disorders. *Journal of Adolescence*, 23, 661-671.
- King, & J. Roche (Eds.), *Healthy Settings for Young People in Canada: Canadian Report from the HBSC 2006 Survey*, 91-104.
- Kochenderfer-Ladd, B. (2013). Identification of Aggressive and a Social Victims and the Stability of their Peer Victimisation. *Merril-Palmer Quarterly*, 49, 401-425.
- Kshirsagar, V. Y., Agarwal, R., & Bavdekar, S. B. (2007). Bullying in Schools: Prevalence and Short-term Impact. *Indian Pediatrics*. 44(1), 25-8.
- Kumpulainen, K., & Räsänen, E. (2000). Children Involved In Bullying At Elementary School Age: Their Psychiatric Symptoms and Deviance in Adolescence: An Epidemiological Sample. *Child Abuse and Neglect*, 24, 1567–1577.
- Laelia, G., Apicella, L., Brakarsh, J., Dube, L., Jemison, K., Kluckow, M., Smith, T., & Snider, L. (2006). Orphans and Vulnerable Youth in Bulawayo, Zimbabwe: An Exploratory Study of Psychosocial Well-being and Psychosocial Support. Retrieved June 18, 2020, from http://www.popcouncil.org/pdfs/horizons/zimorphans.pdf
- Lazarus, R. S., & Folkman, S. (2007). Transactional Theory And Research on Emotions and Coping. In L. Laux & O. Vossel (eds.), Personality in Biographical Stress and Coping Research. *European Journal of Personality*, 1, 141-169.
- Meltzer, H., Vostanis, P., Ford, T., Bebbington, P., & Dennis, M. S. (2011). Victims of Bullying in Childhood and Suicide in Adulthood. *European Psychiatry*, 26, 498–503.
- Ministry of Education and Human Capital Development (2020). *School Planning*. Ilorin: Government Press
- Mitsopoulou, E. & Giovazolias, T. (2013). The Relationship Between Perceived Parental Bonding and Bullying: The Mediating Role of Empathy. *The European Journal of Counselling Psychology*, 2(1).
- Mustapha, M. L. A. (2020). Emotional Intelligence Indices as Predictors of Bullying Behaviour Form Among in-school Adolescents in Kwara State, Nigeria. *Malaysian Online Journal of Psychology and Counselling* 7(2), 14-29
- Nakamoto, J. & Schwartz, D. (2010). Is Peer Victimisation Associated with Academic Achievement? A Meta-analytic Review. *Social Development*, 19(2), 221–42.
- Nansel, T. R., Craig, W., Overpeck, M. D., Saluja, G. & Ruan, W. J. (2004). The Health Behaviour In School-aged Children Bullying Analyses Working Group: Cross-national Consistency in the Relationship between Bullying Behaviours and Psychosocial Adjustment. *Archives of Pediatric Adolescent Medicine*, 158, 730–736.
- Nixon, C. L. (2014). Current Perspectives: The Impact of Cyber Bullying on Adolescent Health. *Adolesc Health Med Ther*, 5, 143-58.
- Okulaja, A. (2010). Nigeria has the highest number of children out of school. Retrieved on 13th May

- 2013 from http://news.ng.com/1-4.
- Omoteso, B. A. (2010). Bullying Behaviour, Its Associated Factors And Psychological Effects Among Secondary School Students in Nigeria. *The Journal of International Social Research*, 3(10), 498-509.
- Paul, S., Smith, P. K., & Blumberg, H. H. (2012). Comparing Student Perceptions Of Coping Strategies and School Interventions in Managing Bullying And Cyberbullying Incidents. Pastoral Care in Education, 30(2), 127-146.
- Plexousakis, S. S., Kourkoutas, E., Giovazolias, T., Chatira, K., & Nikolopoulos, D. (2019). School Bullying and Post-traumatic Stress Disorder Symptoms: The Role of Parental Bonding. *Frontiers in public health*, 7, 75. https://doi.org/10.3389/fpubh.2019.00075
- Research Advisor (2006). *Determining sample size for research activities*. Retrieved from http://www.research-advisors.com
- Riebel, J., Jäger, R. S., & Fischer, U. C. (2009). Cyberbullying in Germany–an Exploration Of Prevalence, Overlapping with Real Life Bullying and Coping Strategies. *Psychology Science Quarterly*, *51*, 298-314.
- Rigby, K. (2003). Consequences of Bullying in Schools. *Canadian Journal of Psychiatry*, 48, 583-590.
- Rigby, K., Cox, I., & Black, G. (2007). Co-operativeness and Bully/victim Problems Among Australian school children. *Journal of Social Psychology*, 137, 357-368.
- Rivers I. Recollections of Bullying at School and their Long-term Implications for Lesbians, Gay Men and Bisexuals. *Crisis*. (2004) 24:169–75.
- Roberts, W. B. (2006). Bullying from Both Sides: Strategic Interventions for Working with Bullies & Victims. California: Corwin Press.
- Shiba, M. R., Ankit, G. & Gaurav, R. (2018). Bullying And Being Bullied: Prevalence And Psychosocial Outcomes Among School-going Adolescents of Rohtak. *International Journal of Community Medicine and Public Health*, 5(3), 991-995.
- Smith, P. K., & Frisén, A. (2012). The nature of cyberbullying, and strategies for prevention. *Computers in Human Behavior*, 29, 26-32
- Smith, P. K., Mahdavi, J., Carvalho, M., Fisher, S., Russell, S., & Tippett, N. (2008). Cyberbullying: Its Nature and Impact In Secondary School Pupils. *Journal of Child Psychology and Psychiatry*, 49, 376–385.
- Solberg, M. E. (2010). *Self-reported Bullying And Victimisation At School: Prevalence, Overlap And Psychosocial Adjustment*. Unpublished Doctoral Dissertation, Department of Health Promotion and Development, Faculty of Psychology, University of Bergen, Bergen.
- Stein, J. A, Dukes, R. L. & Warren JI. (2007). Adolescent Male Bullies, Victims, and Bully/victims: A Comparison Of Psychosocial and Behavioural Characteristics. *Journal Pediatr Psychol*. 32(3):273-82.
- Storch, E. A., Brassard, M. R., & Masia-Warner, C. L.(2003). The Relationship of Peer Victimisation To Social Anxiety and Loneliness in Adolescence. *Child Study Journal*, 33(1): 18.
- Tenenbaum, L. S., Varjas, K., Meyers, J., & Parris, L. (2011). Coping Strategies And Perceived Effectiveness in Fourth Through Eighth-grade Victims of Bullying. School Psychology International, 32, 263-287.
- Umar, A. A. (2018). Influence of Bullying On Students' Academic, Emotional And Social Adjustment In Senior Secondary Schools in Katsina State, Nigeria. *Journal of Psychology & Social Development*, 7(1), 26-32
- Veenstra, R., Lindenberg, S., Oldehinkel, A. J., De Winter, A. F., Verhulst, F. C., & Ormel, J. (2005).

- Bullying and victimization In Elementary Schools: A comparison of Bullies, Victims, Bully/victims, And Uninvolved Preadolescents. *Developmental Psychology*, 41(4), 672–682.
- Wade, E., & Reece, J. (2014). *The Psychosocial Predictors of Children's Involvement in Bullying at School*. Paper Presented at the 39th Annual Conference of the Australian Psychological Society, Sydney, Australia.
- Weiten, W. & McCann, D. (2007). Psychology: Themes and Variations. Canada: Wadsworth.
- Woods, S., & White, E. (2005). The Association between Bullying Behaviour, Arousal Levels and Behaviour Problems. *Journal of Adolescence*, 28, 381-395.
- World Health Organisation (2017). *Maternal, newborn, Child and Adolescent Health.* Available from: http://www.who.int.
- Yahaya, L. A. & Mustapha, M. L. A. (2015). Efficacy of Client-centred and Rational-emotive Behaviour Therapies in Reducing Bullying Behaviour among In-school Adolescents in Ilorin, Nigeria. *International Journal of Instruction*, 8(1), 61-74.