

# The influence of coping strategies on the long-term impacts of bullying

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Peer victimization, or bullying, is a common experience in high school and one whose negative impacts are widely understood. This social stressor is associated with an array of short- and long-term effects on

social-emotional functioning, academic achievement, substance use, and other health behaviors throughout life. Depression, anxiety, shyness, loneliness, and decreased self-esteem are also among the many adverse health outcomes associated with peer victimization. However, it is true that individuals can mitigate these negative effects, depending on how they respond to or cope with experiences of bullying.

Despite our knowledge that peer victimization is inherently harmful, gaps in scientific literature persist. Few studies have examined the ways in which coping strategies influence both the type of bullying (e.g. physical, relational) and the impact on negative emotional and [health effects](#). Even fewer studies have compared different coping strategies to see which are most effective in response to specific forms of bullying.

To address these topics, corresponding author and associate professor of public [health](#) Michael A. Hoyt, Ph.D. collaborated with partners across the fields of medicine and [public health](#) to produce a study recently published in *Behavioral Medicine*.

Researchers recruited over 800 college students who were asked to recall experiences of bullying during high school via questionnaires. Additional screeners were also used to assess the type of coping strategy employed by each participant who recalled past bullying. Coping strategies were categorized as approach-oriented (e.g. problem solving, distancing oneself from the bully, seeking social support) and avoidance-oriented (e.g. giving up, disengaging with emotional processing).

The majority of participants (66.4%) reported being bullied in high school. Within this group, 64.4% recalled victimization lasting 1-2 weeks to a month whereas 35.1% reported it lasting 6 months to several years. Most notably, 83.5% of those reporting bullying were people of color. Over half of respondents met the criteria indicative of clinical depression and more than one-third reported binge drinking in the past

30 days.

"One of the interesting things our findings revealed is that different patterns of past bullying experiences may be differently related to health over time," Hoyt said. "For instance, it was those reporting moderate levels of bullying in high school that reported having more depressive symptoms as university students—versus even those reporting high levels of bullying."

Results also revealed that the pattern of past bullying might matter to coping with life stressors. For instance, only for those who reported high levels of bullying in [high school](#) did patterns of coping by avoidance relate to poorer mental health.

"We know that being bullied and victimized can negatively impact our health—but we are only getting glimpse of how these kinds of stressful experiences might impact our coping behavior—or how our coping behavior interacts with these past experiences to 'set us up' for poorer health," Hoyt adds.

This study adds to the conceptual understanding of the health impact bullying can have on young people. Studies that examine patterns over time will be useful next steps in identifying the best ways to interrupt the trajectory victimized youth may be on. Overall, the study underscores the need for additional literature on effective coping strategies for different types of victimization, which [school](#) programs can use to develop interventions and promote student health.

Additional authors include Children's Hospital of Philadelphia Postdoctoral Fellow Katie Darabos, Ph.D.; NYU Langone Health Senior Behavioral Researcher Mary Carol Mazza, Ph.D.; Arizona State University Ph.D. candidate Jennifer Somers; and UC Merced Associate Professor of Health Psychology Anna V. Song.

**More information:** Katie Darabos et al, Peer victimization and relationships to approach and avoidance coping to health and health behaviors, *Behavioral Medicine* (2021). [DOI: 10.1080/08964289.2021.1946468](https://doi.org/10.1080/08964289.2021.1946468)

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