



# Strengthening Research Capacity and Disseminating New Findings in Nursing and Public Health

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## Factors related to bullying behavior among school-age students in Padang, West Sumatra

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**ABSTRACT:** This research is aimed to analyze factors that are related to bullying behavior in Junior High School students in Padang city. This is a descriptive analytic research using a cross sectional study approach. Samples were 340 students that were taken through proportional random sampling technique. Data were collected by using a questionnaire eliciting students' characteristics, school environment, and family factors. Adolescent Peer Relation Instrument (APRI) was applied to measure bullying behavior. The data were analyzed by using Mann-Whitney and Kruskal Wallis Test. The analyses showed that there was a significant relationship between parenting style and bullying behavior. School environmental factors such as the school's atmosphere, group support, and teacher assistance were insignificantly related to bullying behavior. The school pressure had not related to bullying behavior. Social and institutional interventions for preventing bullying behavior among teenagers are expected to be presented at schools which involve social groups, teachers, and parents.

### INTRODUCTION

In Indonesia, bullying cases become the top issue the community complained at most. From 11 to August 2014, the Indonesian Commission on Child Protection (KPAI) recorded 369 complaints related to the bullying issues. The bullying cases formed 25% of the total complaints from 1,480 cases in the field of education. According to the International Center for Research on Women research report in 2014, the prevalence of violence concerning children in schools was very high where 84% students had experienced violence at school and 75% said that it happened in the last six months.

From 1,075 school age children in the city of Pelotas, RS Brazil, there were 17.6% children with bullying behavior. The most common type of bullying is verbal, followed by physical, emotional, and sexual harassments (Moura, Catarina, Cruz, & Quevedo, 2011). A study that was conducted on 1,229 children in seven cities in USA revealed that nearly a half of the respondents were against the bullying; one fourth discussed it with adults; 20% did not do anything; and only 8% spoke with the bullies (Brown, Birch, & Karcherla, 2005).

Children who become the perpetrators or even the victims of bullying suffered from such negative impacts as depression, anxiety, substance abuse, low social functions, poor academic achievement, and getting less of attention. Repeated bullies and victims are at risk for suicide (Sitsika et al., 2014). Victims directly reported physical problems such as sore throat, colds, and coughs. Children also experienced such psychosomatic problems as decreased appetite and fear to go to school (Wolke & Skew, 2012). young female victims indicate specific problems such as headaches and sleep disorders (Biebl, Dilalla, Davis, Lynch, & Shinn, 2011). Ultimately, bullying can result in depression (Due, Damsgaard, Lund, & Holstein, 2009).

Bullying is a complex and noticeable construction that can affect the quality of life. It occurs due to a number of factors that children experience such as psychological, cognitive, and emotional factors as well as the influence of specific surroundings such as parents' expectations and socioeconomic status (Liu & Graves, 2011). A longitudinal study of Individual Adolescent's Tracking Survey (TRAILS) in the Netherlands obtained the result

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