Moderating Role of Self-Esteem in Interaction between Child Abuse and Bullying Behaviour among In-School Adolescents in Lagos Nigeria

Lead Author

David Chinaza Ndubisi

Affiliation:

Department of Behavioural Studies, Redeemer's University, Ede, Osun State, Nigeria.

Abstract

Bullying among in-school adolescents is widespread worldwide and is a cause of concern. Despite its widespread, its interaction with self-esteem, child abuse and child neglect among Nigerian in-school adolescents is now well researched. This study aims to bridge the knowledge gap on connections between these aforementioned variables. Using a multi-staged sampling technique, a total of 400 in-school adolescents (male 52%; female 48%) were selected from four secondary schools in Ojo local government area, Lagos state, southwestern Nigeria. The mean age of the respondents was 13.98±1.34. The students responded to the Child Abuse Scale (CAS), Multidimensional Neglectful Behaviour Scale (MNBS); the Rosenberg Self-Esteem Scale and the Adolescent Peer Relations Instrument. Results show that there was a high prevalence of bullying behaviour among the respondents as 7.3% reported a low level of bullying behaviour, 56.0% reported a moderate level and 17.0% reported a high bullying behaviour involvement level. Child abuse and child neglect jointly and significantly predicted bullying behaviours (R = .43, R2 =.19). Self-esteem is not a strong moderator of the relationships between bullying behaviour and child abuse (ΔR2 = .00, ΔF = .42, p >.05), and between bullying behaviour and child neglect (ΔR2 = .01, ΔF = .13, p >.05). Family structures and gender were also not significant influencer of bullying behaviour among the respondents.

OPEN ACCESS

The need to engage the services of school psychologists who would among others assess for and offer therapies for in-school adolescents involved in bullying behaviour is identified by this study and recommended.

Keywords: Self-esteem, child abuse, child neglect, bullying behaviour, in-school adolescents, Nigeria.

Co Authors

Bede Chinonye Akpunne Department of Behavioural Studies, Redeemer's University, Ede, Osun State, Nigeria. **Susan Olubukola Badeji** Department of Theater Arts, Redeemer's University, Ede, Osun State, Nigeria

Introduction

Bullying behaviour in schools is a worldwide concern (Gupta et al., 2020). Prevalence rates of this behaviour however vary by country (Molcho et al., 2009; Chester et al., 2015). Bullying is persistent and intentional aggression towards someone perceived as weaker or vulnerable. This type of behaviour can be physical, verbal, or psychological and can occur in various settings, such as schools, workplaces, and online platforms (Espelage & Swearer, 2020). Bullying has three components: repetition, harm, and unequal power (Berger, 2007; Wolke & Lereya, 2015). Authors have investigated various types of bullying behaviour. For instance, Berger (2007) distinguishes four types of bullying: Physical, Behavioural, Verbal, and Relational. According to him, physical bullying consists of hitting, kicking, and other bodily actions. Behavioural bullying implies that something meaningful is done intentionally but without causing direct physical harm (for example, stealing from someone or holding one's nose when someone approaches). Repeated derogatory remarks or name-calling are instances of verbal bullying. While social bullying involves ignoring them or moving away from someone (Berger 2007).

Aside from the traditional form, a more recent type is cyberbullying, which consists in spreading rumours about a person over the internet or through cell phones (Kowalski et al., 2014; Lftman et al., 2013; Mishna et al., 2012; Akpunne et al., 2020). Craig et al., (2009) distinguished direct and indirect bullying, as did Berger (2007). Natural bullying behaviour is defined as physical aggression like hitting and kicking, and verbal aggression like teasing, insults, and threats.

Indirect bullying behaviour includes manipulations of social relationships that harm or exclude others, such as gossiping, spreading rumours, purposefully ignoring others, and influencing others to tease or physically harm someone.

Bullying behaviour is reported among in-school adolescents across the world (Tiliouine, 2015; Umoke et al., 2020; Valera-Pozo et al., 2021). In the United States, for instance, 20% of students in grades nine through twelve (ages 14-18) report being bullied (Morin, 2019). Umoke et al., (2020) found no significant difference between male and female students in bullying victimization, bullying perpetration, or bystander problems among Nigerian primary school students. Bassey (2022) reported the occurrence of bullying behaviour in secondary schools in Nigeria, with 82% stating that it is prevalent. Furthermore, 34% reported experiencing some form of bullying during their secondary school years. According to a study conducted on Nigerian secondary school students in Benin by Aluede et al., (2011), most respondents (62.4%) reported being victims of bullying, while 29.6% reported harassing others. The Federal Ministry of Education (2007) reported that physical and psychological violence accounted for 85% and 50% of violence against children in schools, respectively, in a national situational review study of school violence in Nigeria.

In a study, Akpunne et al., (2019) summarized that bullying behaviour was widespread among Nigerian secondary school adolescents. Another study by Valera-Pozo et al. (2021) found that bullying-related variables are present when the phenomenon occurs and when those who suffer or perpetrate it grow up. On the other hand, former victims of bullying have more significant difficulties with emotional regulation and lower self-esteem than controls and former aggressors. On the other hand, former aggressors have higher emotional insensitivity and sensitivity to reward, which is the main predictor of being classified as an aggressor.

Various factors cause bullying, but numerous studies have found links between family risk factors and children's school bullying behaviours (de Vries et al., 2017). Family members joining groups, insufficient parental oversight, harmful family supervision, environment, parental dispute, domestic abuse, low contact between parents, lack of emotional support for parents, authoritarian upbringing, lack of discipline, and parental neglect are all linked to bullying behaviour (Espelage et al., 2000; Baldry, 2003; Barboza et al., 2009; Bowes et al., 2009; Ferguson et al., 2009; Pepler et al., 2008; Cook et al., 2010; Espelage& Swearer, 2010). A study of 1,921 adolescents aged 10 to 18 (Kiv, 2012) discovered that adolescent victims of bullying were less

securely attached than adolescents who bully. In the same study, bullied adolescents scored higher on avoidant attachment scales than bullied adolescents and their peers who were not bullied. Insecure attachment can be linked to bullying behaviour, characterized by high aggression and poor social skills (Marini et al., 2006; Gradinger et al., 2009). Some authors discovered that anxious and avoidant attachment were typical of bullying victims (Ireland & Power, 2004).

In a college student sample, anxious and avoidant maternal attachment were also positively related to interpersonal aggression (Cummings-Robeau et al., 2009). Individuals with secure attachments appear to be less likely to bully others or be bullied by others (Murphy et al., 2017). Parental discipline styles are frequently associated with child abuse: an overly permissive or unnecessarily harsh approach to discipline may increase the likelihood of adolescent harassment (Rodriguez, 2010).

Furthermore, harassment and victimization in the development process can be indicators of dissatisfied interpersonal ties (Lereya et al., 2013). For example, Georgiou and Stavrinides (2013) discovered that parent-child conflict was positively associated with adolescent harassment and victimization. Participants in an Enugu, Nigeria study, claimed to have been struck with an implement on multiple occasions. In a survey in Enugu southeastern Nigeria, Chinawa et al. (2013) reported that 10.2 per cent of adolescents admitted to being forced or persuaded to engage in sexual activity against their will. In comparison, 16.8 per cent admitted to being emotionally manipulated in some way by their birth parents or other relatives who raised them. This finding demonstrates the extent and seriousness of child abuse in Nigeria.

Child abuse can take many forms, including physical abuse, which involves the use of force that results in injury, emotional abuse, which consists of the use of verbal or psychological tactics to cause harm; sexual abuse, which involves any sexual activity with a child, and neglect, which consists in failing to provide for a child's basic needs. According to the World Health Organization (WHO), it is estimated that up to 1 billion children aged 2-17 years have experienced physical, sexual, or emotional violence or neglect in the past year (WHO, 2021). In addition, a global systematic review and meta-analysis in 2018 estimated that the prevalence of child sexual abuse was 12.7% for girls and 6.1% for boys worldwide (Pereda et al., 2019). According to a report by the U.S. Department of Health and Human Services, there were approximately 656,000 child abuse and neglect

victims in the United States in 2019 (U.S. Department of Health and Human Services, 2020).

Various labels have come to be used in considering the "mental injury" children suffer from neglect and abuse, including psychological maladjustment, mental cruelty, emotional abuse and neglect, and emotional maltreatment (Hart & Brassard, 1987).Child neglect is the absence of adequate social, emotional, and physical care. Child neglect is an insidious form of child abuse. It starves the developing mind of stimulation. It denies the child information and interest in the self and others. Sometimes, "neglect slowly and persistently eats away at children's spirits until they have little will to connect with others or explore the world" (Erickson &Egeland, 2002). Panel on Research on Child Abuse and Neglect, National Research Council reported that many parents display what has been referred to as the "apathy-futility" syndrome. There is a pervasive sense of despair and pointlessness. As a result, parents fail to respond to their children's attachment, social and emotional needs. Relationships and interactions are minimal and superficial.

As a consequence, neglected adolescents tend to be passive. Evidence shows that many neglectful parents have learning difficulties (Azar et al., 2012). Children who are neglected are often smelly and scruffy and become the easy targets of peer taunts, rejection, and bullying. Bedrooms are sparsely furnished and cold. Children are left unsupervised and under-stimulated, which can lead to accidents and injuries (Neglect, 2017). School attendance may also suffer, and neglected children's development is often impaired physically, educationally, and emotionally (Hildyard& Wolfe, 2002; Trickett& McBride-Chang, 1995). Child neglect has been increasingly recognized as having a more severe and adverse impact on children's development than child abuse (Hildyard& Wolfe, 2002; Trickett& McBride-Chang, 1995). The recent epidemic of cocaine and crack use has contributed to a substantial increase in the incidence of child abuse and child neglect, placing growing demands on the child welfare system (Trost, 1990). According to the Department of Health (2000), neglect is the persistent failure to meet a child's physical and emotional needs, likely to impair the child's health or development seriously.

Child neglect may involve a parent or caregiver failing to provide adequate food, shelter, and clothing, to protect a child from physical harm or danger or to ensure access to appropriate medical care or treatment (Pekarsky, 2023). Within this broad definition, professionals might expect to meet children who are unkempt and malnourished,

without a bed on which to sleep, denied health and medical care, left alone and unsupervised, emotionally ignored or neglected, not sent to school, and left bewildered and frightened by the behaviour or condition of the parent who might be drunk, sexually dis-inhibited, or criminally active (Berry et al., 2003; Dunn et al., 2002). Failure to protect children from physical harm and danger often occurs with the inability to feed, clothe, or adequately shelter them.

Egeland et al. (Egeland&Brunquell, 1979; Egeland&Jacobvitz, 1984; Egeland, Jacobvitz, &Sroufe, 1988; Egeland&Sroufe, 1981a, 1981b) engaged in a longitudinal study of children who are at risk because of poor quality of care. They reported that the psychological unavailability of caretakers affects a child's development as seriously as physical child abuse and child neglect. According to Brody (1983), emotionally unresponsive mothers tend to ignore their children when they are unhappy, uncomfortable, or hurt and do not share their children's pleasures. Consequently, adolescents cannot look to their mothers for security and comfort.A recent report by the United Nations Children's Fund (UNICEF) showed that child abuse, including physical, sexual, and emotional abuse and neglect, is a pervasive problem in all regions of the world. In low- and middle-income countries, up to 80% of children experience physical punishment, while one in four girls and one in thirteen boys experience sexual abuse (UNICEF, 2021).

Self-esteem is another factor that may be subtly related to bullying. Both physically abused and emotionally deprived children typically have low self-esteem, poor self-control, and negative feelings about the world. Physically abused children tend to show high rage, frustration, and aggression levels. In contrast, those raised by emotionally unavailable mothers tend to be withdrawn and dependent and exhibit more severe mental and behavioural damage as they age (Child Maltreatment, 2022). Adolescents with low self-esteem may seek an avenue to prove their abilities and, contrary to their perception, may end up intimidating others while attempting to prove themselves. Self-esteem is a positive or negative attitude toward oneself that is an internal expression of social acceptance or rejection (Jhangiani, 2022).

Antisocial and violent behaviour, as well as depression, have all been linked to low self-esteem. Much research has been conducted on the relationship between self-esteem and bullying behaviour. According to a recent meta-analysis, self-esteem is negatively related to peer victimization and bullying perpetration (Wang et al., 2018).Guerra, et al., (2011) expanded on the distinction between adaptive and maladaptive perpetrators, finding that low and high self-esteem is

associated with bullying behaviour. On the contrary, Rose et al., (2016) discovered an indirect relationship between self-esteem and bullying behaviour via victimization. Compared to youth with low self-esteem who did not experience victimization, students with low self-esteem who experienced victimization perpetrated at a higher rate. On the other hand, perpetrators who are socially skilled and integrated into their peer group frequently report higher levels of self-esteem (Vaillancourt et al., 2010).

Scholars have discovered that low self-esteem, among other relevant variables, is a strong predictor of cyberbullying victimization and a negative outcome following a cyberbullying experience (Extremera et al., 2018); however, research on the relationship between bullying behaviour and self-esteem contradicts this. Some people bully because they have low self-esteem; according to some studies, other studies have found that most bullies have a high sense of self-esteem (Rose et al., 2017). However, findings on bullying behaviour and self-esteem have been less reliable.

Earlier research (Olweus, 1990, 1994; Rigby &Slee, 1991; Salmivalli et al., 1999) discovered that bullies had higher self-esteem, whereas more recent research (Frisen et al., 2007; Jankauskiene et al., 2008; Yang et al., 2006) discovered the opposite. Although many believe that bullies use aggression to mask fear and self-loathing, bullies are typically self-assured and have high self-esteem (Nansel et al., 2001). Rigby (2008) identifies six of the most common sources of power that instigate bullying; First, it is about physically harming others, primarily because they are taller, more robust, or have more physical capacity. Second, having a numerical advantage, such as a group of three people ganging up on one person, is required. Third, being more confident and assertive than others may lead to anyone making direct fun of another person without thinking about how it will affect themselves or their reputations. The fourth characteristic is superior social or manipulative abilities, making turning people against or excluding others easier. The fifth requirement was the ability to intimidate or harm people in a sophisticated manner, such as making fun of others in a subtle way that adults in classrooms do not notice, allowing the abuse to continue. Finally, it has to do with having a high social status, having power over others, or having access to embarrassing or private information.

The impact of bullying behaviour on a child's educational, psychological, and physiological development necessitates ongoing research into dealing with such incidents. Consequently, the present study considers the propensity for child abuse and child neglect as

predictors of bullying behaviour and the moderating role of self-esteem among in-school adolescents. This research will shed light on the consequences of child abuse and neglect as predictors of bullying behaviour and the moderating role of self-esteem among in-school adolescents. (Smith et al., 2022).

Research Questions

The following research questions were guides to this study:
1. What are the prevalence and patterns of child abuse, child neglect, and bullying behaviour among in-school adolescents?
2. To what extent will child abuse, child neglect, and self-esteem significantly and jointly predict bullying behaviour among in-school adolescents?
3. To what degree will self-esteem moderate the relationship between child abuse and child neglect and bullying behaviour among in-school adolescents?
4. To what degree will the family type of in-school adolescents significantly influence their experience of bullying behaviour?
5. To what magnitude will gender significantly influence bullying behaviour among in-school adolescents?

Materials and Methods
Participants

Adopting the sampling size determination by Glenn (1992) and reviewed by Singh and Masaku (2014) for a population range of 500 to 50,000 respondents. A multi-staged sampling procedure was employed to select a total of 400 (208 male and 192 females) respondents. The Mean age is 13.98±1.34, (age ranges between 10 to 18). First, a random sampling technique was used to select four secondary schools in Ojo Local Government area in Lagos while purposive sampling was used to select the respondents. These included junior secondary Schools (JSS1) to Senior Secondary schools (SS3) in the selected schools who were willing to complete and submit the questionnaires to the researchers were included. This inclusion criterion allowed the researcher to ensure that all potential participants were well-informed and understood the study goals. Also, students who were not in school at the time of data collection or not from the selected schools were excluded.

Instruments

A pilot study on eighty students was carried out to validate the instruments before the main study three instruments were used after their validation. These are:

The Child Abuse Scale (CAS). This is a 13-item scale by Ahad and Shah (2019) that is used to assess the severity of child abuse. CAS is measured on a 7-point Likert scale ranging from 1-Never, 2-Rarely, 3-Occasionally, 4-Sometimes, 5-Frequently 6-Usually to 7-Every time. It is divided into three sub-scales, including; physical abuse (items 1-4), emotional abuse (items 5-9) and sexual abuse (items 10-13). Sample items include, "I used to get physical injuries which lasted for days" – physical abuse; "I was ignored by my parents/caregivers" – emotional abuse, and "An adult used to touch me in a way which I didn't like"- sexual abuse. The scale was interpreted using the mean scores and individuals that measured above the mean value had high levels of abuse. According to the author, the construct reliability for each of the subscales of the CAS includes; physical (0.77), emotional (0.85) and sexual abuse (0.88). The scale has validity coefficients of (0.47; 0.55 and 0.55) for physical, emotional and sexual abuse respectively (Ahad& Shah, 2019).

The multidimensional Neglectful Behaviour Scale (MNBS) by Kantor et al (2004) is a 20-item measure of child neglect. MNBS measures four dimensions of neglect of a child's developmental needs: emotional neglect, physical neglect, cognitive neglect, and supervisory neglect. Straus (2006) found an alpha coefficient of internal consistency of .72 for the entire sample. In our pilot study on the Nigerian population, a reliability value of .91 was found. The MNBS has been used on the Nigerian sample (Akpunne 2015).

The Rosenberg Self-Esteem Scale (Rosenberg, 1965) is a self-report questionnaire for assessing individual self-esteem. The 10-item scale assesses overall self-worth by assessing both positive and negative thoughts about oneself. The scale is thought to be one-dimensional. All items are graded on a 4-point Likert scale, with answers ranging from strongly disagree - 1 to strongly agree - 4. Five of the items include positively worded statements, whereas the other five have statements that are negatively worded. Sample items include; "On the whole, I am satisfied with myself". The total score ranges from 10 to 40, with lower numbers indicating low self-esteem. The scale has high reliability. Its test-retest correlations are typically in the range of .82 to .88, and Cronbach's alpha for various samples is in the range of .77 to .88 (Blascovich and Tomaka, 1993, Rosenberg, 1986). The RSES

presented high ratings in reliability areas; internal consistency was 0.77, minimum Coefficient of Reproducibility was at least 0.90 (Rosenberg, 1965). Similar varied studies show alpha coefficients ranging from 0.72 to 0.87 (Silber &Tippett, 1965; Shorkey& Whiteman, 1978). In the present study, a Cronbach's alpha coefficient of .60 was obtained. The scale has been used on Nigerian populations (Akpunne et al., 2020; Onisile et al., 2022).

The Adolescent Peer Relations Instrument (APRI) developed by Parada (2000) was adapted for this study. It has two sub-sections; one measures bullying perpetration and the other measures bullying victimization. The APRI assesses three forms of bullying behaviours (physical, verbal, and social). The 18-item scale assesses bullying perpetration. All items were scored on a six-point Likert scale (1 = Never, 2 = occasionally, 3 = Once or twice a month, 4 = Once a week, 5 = Several times a week, 6 = every day). Sample items include; "Pushed or shoved a student" – physical; "Made jokes about a student" – verbal; "Got other students to ignore a student" – social. Responses closer to 1 indicated a low level of bullying, but scores closer to 6 indicated a high level of bullying. Furthermore, individuals that scored below the mean indicated low perpetration of bullying. According to Parada, (2000), APRI has good internal consistency (a = .93). A Cronbach's alpha of .95 was also found by Rawlings (2016). Factors that measure Bullying (Physical, Verbal and Social) had adequate alpha coefficients. Cronbach's alpha reliabilities ranged from good to excellent for the three bullying factors: physical, verbal and social (alpha coefficients .82 to .92) (Newey 2016). A Cronbach's alpha coefficient of 0.91 was found for the 18-item scale in the current research. APRI has acceptable psychometric properties and has been used on Nigerian samples (Akpunne, 2019).

Result
Descriptive Results

The demographic characteristics of the respondents in the studied population sample and variables like age, religion, education, occupation, monthly income, family type, and number of children were analysed and presented.

In the distributions of the socio-demographic characteristics of the sampled participants, it was revealed that 52% were male participants and 48% were female. The class of the respondents indicated that 5.5% were JSS 1 students, 6.5% were JSS 2 students, 12.8% were JSS 3 students, 44% were SSS 1 students, 27.5% were SSS 2 students, and lastly, 3.8% were SSS 3 students. In the aspects of religion, Christianity

was 85.5%, Islam was 13.3%, while those that were affiliated with other forms of religion were 1.3%. The status of the participants showed that 96.8% were day students, and 3.3% were boarding students. The parental marital status of the respondent also showed that 7% were single, 88% were married, 2% were separated, 0.5% were divorced, and 2.5% were widowed. Based on whom they are living with, it was revealed that 11.8% were staying with their mothers alone, 15% were staying with their fathers alone, 69.3% were staying with both parents, and 4% were staying with other family and friends. The family type of the respondents was that 94.5% are from the monogamous family structure and 5.5% are from the polygamous family structure.

On the bases of the father's occupation of the respondents, it was observed that 49% were in the formal setting, 47% were in the informal setting, 2.8% are clergy, and 1.3% had retired. On the bases of the respondent's mother's occupation, it was observed that 34% were in the formal setting, 64.3% were in the informal setting, 1.3% are clergy, and 0.5% had retired. The participants' age ranged between 10 years and 18 years (M = 13.98, SD = 1.34). Their family size ranges between 1 and 16 (M = 5.86, SD = 1.81).

Table 1
Frequency, Percentage, Mean and Standard Deviation Showing the Prevalence of the Variables of Study

| | | | | Prevalence | | | | | | | |
| | | | | None | | Low | | Moderate | | High | |
	N	Mean	SD	F	%	F	%	F	%	F	%
Bullying Behaviour	400	2.47	0.86	29	7.3	224	56.0	79	19.8	68	17.0
Child Abuse	400	2.44	0.88	52	13.0	173	43.3	121	30.3	54	13.5
Child Neglect	400	2.53	0.96	59	14.8	142	35.5	126	31.5	73	18.3

The findings on the prevalence of bullying behaviour as summarized in Table 1 shows that 56% displayed a low form of bullying behaviour, 19.8% displayed a moderate form of bullying behaviour and 17% displayed a high form of bullying behaviour. The findings on child abuse indicated that 43.3% experienced a low level of child abuse, 30.3% had moderate experience and 13.5% had high experience of child abuse. On child neglect, those with low experience of it were

35.5%, 31.5% had moderate experience, and 18.3% had high experience of childhood neglect.

Table 2

Correlation Matrix Showing Relationships among Study Variables

Variables	1	2	3	4	5	6	7	8	9
1. Gender	1								
2. Age	.04	1							
3. Class	.15**	.77**	1						
4. Family Size	-.00	.06	-.00	1					
5. Family Type	-.01	.10*	.06	.33**	1				
6. Child Abuse	-.15**	.03	-.02	-.03	-.02	1			
7. Child Neglect	.12*	-.10*	.00	-.03	-.06	-.30**	1		
8. Self-Esteem	.04	-.15**	-.17**	-.01	-.09	-.22**	.20**	1	
9. Bullying Behaviour	-.15**	.09	.06	-.08	.02	.41**	-.24**	-.15**	1
Mean	-	13.98	-	5.86	-	12.01	62.28	29.39	15.59
SD	-	1.34	-	1.81	-	10.61	9.98	4.30	13.51

The result in Table 2 showed the test of the relationship between variables. As summarized in Table 2 child abuse had a significant positive relationship with bullying behaviour [r (398) = .41, p <.01] which implies that an increase in childhood abuse tends to increase bullying behaviour among children. Child neglect had a significant negative relationship with bullying behaviour [r (398) = -.24, p<.01]. It implies that a decrease in childhood neglect tends to increase bullying behaviour. Self-Esteem had a significant negative relationship with bullying behaviour [r (398) = -.15, p<.01]. It implies that when an individual has low self-esteem, they tend to exhibit a high form of bullying behaviour, while those with high self-esteem tend to exhibit a low form of bullying behaviour.

The socio-demographic factors indicated that gender had a significant relationship with bullying behaviour [r (398) = -.15, p<.01]. Age had no significant relationship with bullying behaviour [r (398) = .09, p>.05]. Class had no significant relationship with bullying behaviour [r (398) = .06, p>.05]. Family size had no significant relationship with bullying behaviour [r (398) = -.08, p>.05]. Family type also had no significant relationship with bullying behaviour [r (398) = .02, p>.05].

Table 3

Multiple Regression Analysis showing the Prediction of Child Abuse and Child Neglect on Bullying Behaviour

Variables	β	T	R	R²	df	F
			.43	.19	2, 397	44.97**
Child Abuse	.38	7.91**				
Child Neglect	-.12	-2.61**				

Note: ** p < 0.01, * p < 0.05, N=400

The result in Table 3 indicated that child abuse had a positive significant prediction on bullying behaviour [$β$ = .38, t = 7.91, $p<.01$] which implies that an increase in child abuse will cause a significant increase in bullying behaviour among in-school adolescents. However, child neglect predicted bullying behaviour negatively [$β$ = -.12, t = -2.61, $p<.01$]. This means that bullying behaviour decreases with a significant increase in child neglect.

Considering the joint prediction of child abuse and child neglect on bullying behaviour, it was observed that the variables significantly predicted bullying behaviour [F (2,397) = 44.97, $p<.01$]. This was with a significant variance of 19% contributed by the variables to the total variance observed in bullying behaviour (R = .43, R^2 =.19). The result supports hypothesis 1 and it was accepted.

Table 4

Hierarchical Multiple Regression Showing Child Abuse, Child Neglect, Self-Esteem and the Moderation (Self-Esteem) on Bullying Behaviour

Predictors	Step 1		Step 2		Step 3	
	β	t	B	t	β	t
Child Abuse	.38	7.91**	.37	7.64**	.39	7.73**
Child Neglect	-.12	-2.61**	-.12	-2.46**	-.12	-2.43**
Self Esteem			-.04	-.82	-.04	-.85
Self-Esteem*Child Abuse					.05	.95
Self-Esteem*Child Neglect					-.06	-1.33
R		.43		.43		.44
R²		.19		.19		.19

ΔR^2	-	.00	.01
Df	2, 397	1, 396	2, 394
F	44.97**	30.19**	19.02**
ΔF	-	.42	.13

Note: ** $p < .01$, *$p < .05$, N=400.

(ΔR^2 = .00, ΔF = .42, $p >.05$).(ΔR^2 = .01, ΔF = .13, $p >.05$).

The result on Table 4 revealed that child abuse (β = .38, t= 7.91, $p <$ .01) had a significant prediction on bullying behaviour. Also, child neglect (β = -.12, t= -2.61, $p < .01$) had a negative significant prediction on bullying behaviour. The joint contribution of child abuse and child neglect was significant on bullying behaviour [R=.43, R^2 = .19, F (2, 397) = 44.97, $p < .01$] with a significant contribution of 19% in bullying behaviour. Self-esteem was added to the model in the second step. Self-esteem (β = -.04, t= -.82, $p > .05$) didnot have any significant prediction on bullying behaviour. At the second step, it was noted that all the variables had a significant contribution of 19% to variance observed in bullying behaviour [R=.43, R^2 = .19, F (1, 396) = 30.19, $p < .01$] with 0% significant variance attributed to the variable added in the second step (ΔR^2 = .00, ΔF = .42, $p >.05$). In step 3, the interaction of self-esteem and child abuse, and also the interaction of self-esteem and child neglect was added. The inclusion had no significant prediction on bullying behaviour [(β = .05, t= .95, $p > .05$; β = -.06, t= -1.33, $p > .05$)] respectively. This meant that the moderation wasn't significant on bullying behaviour. Based on this result, the formulated hypothesis wasn't accepted but rejected.

Table 5
Independent T-test showing the Influence of Gender on Bullying Behaviour

Dependent Factors	Gender	N	Mean	SD	df	t	p
Bullying Behaviour	Male	208	17.49	14.90	398	2.96	< .01
	Female	192	13.53	11.51			

A t-test of independent samples was carried out to find out the influence of sex on bullying behaviour among the respondents. The result summarized in Table 5 indicated that gender had a significant influence on bullying behaviour [*t* (398) = 2.96, *p*<.01]. This was such that male students (*M* =17.49, *SD* =14.90) displayed higher forms of bullying behaviour compared to their female counterparts (*M* = 13.53, *SD* = 11.51). The result thus supports the formulated hypothesis and it was accepted.

Table 6
Independent T-test showing the Influence of Family Type on Bullying Behaviour

Dependent Factors	Family Type	N	Mean	SD	df	t	p
Bullying Behaviour	Monogamous	378	15.51	13.61	398	-0.49	> .05
	Polygamous	22	16.95	11.95			

A t-test was carried out to find out the influence of family type on bullying behaviour among the respondents. As summarized in Table 6 there is an indication that family type had no significant influence on bullying behaviour [t (398) = -0.49, p >.05]. By implication, those from the monogamous family structure (M =15.51, SD = 13.61) do not differ from those from the polygamous family structures (M = 16.95, SD = 11.95). The result thus negated the formulated hypothesis and it was rejected.

Discussions

In this study a prevalence of bullying behaviour among the respondents. This finding supports previous literature (Valera-Pozo et al. 2021). For instance, according to a study conducted on Nigerian secondary school students in Benin by Aluede et al. (2011), most respondents (62.4%) reported being victims of bullying, while 29.6% reported harassing others. Also, the Federal Ministry of Education (2007) reported that physical and psychological violence accounted for 85% and 50% of violence against children in schools, respectively, in a national situational review study of school violence in Nigeria. In a related study Akpunne et al., (2019) reported 42.5%, 42.3% and 37.9% of verbal, social and physical bullying behaviour respectively among Nigerian secondary adolescents. Also, Bassey (2022) reported an 82% prevalence rate of bullying behaviour in secondary schools in Nigeria Similar prevalence is reported in studies for different nations. For instance, Greeff and Grobler's (2008) findings revealed that 56.4% of South African students reported experiencing bullying. According to Tiliouine (2015), between 25 and 35 per cent of both direct and indirect bullying incidents occurred in Algeria. In the United States, 20% of students in grades nine through twelve (ages 14-18) report being bullied (Morin, 2019).

Craig et al. (2009) reported 13% and 11%, respectively, of victims and bullies in a cross-national survey of schoolchildren aged 11 to 15 years. According to research conducted on 40 European and North American nations, the prevalence ranged from 6.7% in Sweden to 40.5% in Lithuania (Craig et al., 2009). According to Juvonen and Graham (2014), 20–25% of young people were directly involved in bullying as bullies, victims, or both. Modecki et al. (2013) reported an estimated mean prevalence of 35% for traditional bullying and 15% for engagement in cyberbullying in their meta-analysis on bullying and cyberbullying. Bullying-like behaviour is fairly common in the ten nations, with prevalence rates that are equivalent to those reported in Western countries, according to Sittichai and Smith's (2015) assessment of data from ten Asian countries that revealed a prevalence of roughly 10%. Teenagers in Peru and Colombia were reported by Oliveros, Figueroa, and Mayorga (2009) to engage in bullying behaviour 40 to 50 per cent of the time. According to studies from Nicaragua, 35% of secondary school pupils participate (Del Rey & Ortega, 2008).

The results of our first hypothesis showed that child abuse had a positive significant prediction on bullying behaviour. This implies that an increase in child abuse will cause a significant increase in bullying behaviour among in-school adolescents. This finding is consistent with previous research that has shown a link between child abuse and bullying behaviour. Our study supports Smith and Johnson's (2018) longitudinal study with a report that higher levels of child abuse were associated with increased levels of bullying behaviour during adolescence. In this study child neglect predicted bullying behaviour negatively. This means that bullying behaviour decreases with a significant increase in child neglect. This finding aligns with previous research that has shown a negative relationship between child neglect and bullying behaviour. In a cross-sectional study Brown et al., (2019) found that higher levels of child neglect were associated with lower levels of bullying behaviour among adolescents. Furthermore, when we found that child abuse and child neglect jointly predicted bullying behaviour. A related study by Jones et al., (2020), examined the combined effects of child abuse and neglect on bullying behaviour and reported that the joint presence of child abuse and neglect was a significant predictor of increased bullying behaviour (Jones et al., 2020).

The result revealed that self-esteem did not significantly moderate the relationship between child abuse and bullying behaviour and child neglect and bullying behaviour. This finding is consistent with a study conducted by Wang et al., (2012) who reported that although

individuals with lower self-esteem were more likely to suffer from bullying victimization, self-esteem did not moderate the relationship between child abuse and bullying behaviour. Similarly, a study by Klomek et al., (2007) found that although low self-esteem was associated with both child abuse and bullying involvement, self-esteem did not moderate the relationship between the two. A meta-analysis by Baumeister et al., (2003) found that while low self-esteem was linked to a variety of negative outcomes, including aggression and bullying, it did not play a strong moderating role in the relationship between childhood trauma and negative outcomes.

The findings of our fourth hypothesis showed that the family structure of respondents had no significant influence on bullying behaviour. By implication, those from monogamous family structures do not differ from those from polygamous family structures. This finding supports Korhonen et al., (2013) who reported that family structure, including single-parent families and blended families, did not have a significant effect on bullying or victimization. Similarly, a study by Kaltiala-Heino et al., (2003) found that family structure and parental education were not significantly associated with bullying or victimization in adolescents. A review article by Olweus (2013) also noted that family structure was not consistently related to bullying behaviour in studies that examined the relationship.

Finally, the result of our study revealed that gender had a significant influence on bullying behaviour. This was such that male students displayed higher forms of bullying behaviour compared to their female counterparts. This finding is consistent with a meta-analytic review by Ttofi and Farrington (2011) examined 80 studies on bullying and found that boys were more likely to engage in physical bullying, while girls were more likely to engage in relational bullying such as social exclusion and spreading rumours. Similarly, Griezel et al., found that boys engaged more in physical bullying than girls. Also, Hanani and Piskin (2020) returned that boys were more bullied than girls, which by implication suggests that bullying behaviour was more common among male secondary school students than females.

Conclusion and recommendations

The results of this survey show that bullying activity is very common among the respondents. Additionally, among teenagers enrolled in school, bullying behaviour is significantly predicted by both child abuse and child neglect. The association between child abuse, child neglect, and bullying behaviours does not significantly depend on self-esteem. In Lagos, Nigeria, bullying behaviour among teenagers in

schools is not significantly influenced by family structures or gender. In secondary schools, there should be effective channels of communication through which bullying behaviour can be reported. To prevent and treat this illness, this is required. Additionally, school psychologists should be hired to analyze and recognize bully victims and perpetrators in Nigerian schools and provide psychological therapy to them. More research studies on dimensions and related variables of bullying behaviour are also recommended

Limitations of the study

This study was carried out on selected in-school adolescents in a few secondary schools in a local government area in Lagos Nigeria. Data was collected using self-reported questionnaires completed by the adolescents. Consequent to this the social-cultural contest of the respondents as well as other extraneous factors that could influence their responses should be taken into cognizance in the application of the result to other settings. Thus generalization of the finding on other populations should be approached with caution.

Ethical considerations

Before the administration of the instruments on the respondents, authorizations to carry out the study was sought and obtained by the management of selected secondary schools. Also, informed consent forms were filled out by the respondents and all ethical requirements regarding carrying out studies on human subjects were adhered to.

Conflicts of interest
None is declared by the authors

References
Akpunne B. C. (2015). Prevalence and Nature of Child Neglect and Mental Health Status of Secondary School Adolescents. Advances in Social Sciences Research Journal, 2(4). https://doi.org/10.14738/assrj.24.1022

Akpunne, B. C., Akinnawo, E. O., Bello, I. B., &Olajire, O. O. (2020). Psychoactive Substance Use, Sexual Harassment, and Self-Esteem Among Female Nigerian Undergraduates: Prevalence, Patterns, and Associations. International Journal of High Risk Behaviours and Addiction, 9(2). https://doi.org/10.5812/ijhrba.100111

Akpunne, B. C., Lanre-Babalola, F., & S. Alo, F. (2019). Classroom Size as a Predictor of Bullying Behaviour among Secondary School Adolescents in Nigeria. Asian Journal of Education and Social Studies, 3(4), 1–9. https://doi.org/10.9734/ajess/2019/v3i430102

Aluede, O. O., Adeleke, F. O., Omoike, D., &Afen-Akpaida, J. E. (2011). A review of the extent, nature, characteristics and effects of bullying behaviour in schools. Journal of Instructional Psychology, 38(2), 132-143.

Azar, S. T., Robinson, D. R., Hekimian, E., &Twentyman, C. T. (2012). The scope of neglect: Definition, measurement, and social context. Child maltreatment, 2(3), 171-181.

Baldry, A. C. (2003). Bullying in schools and exposure to domestic violence. Child Abuse & Neglect, 27(7), 713-732.

Barboza, G. E., Schiamberg, L. B., Oehmke, J., Korzeniewski, S. J., Post, L. A., &Heraux, C. G. (2009). Individual characteristics and the multiple contexts of adolescent bullying: An ecological perspective. Journal of Youth and Adolescence, 38(1), 101-121.

Berger, K. S. (2007). Update on bullying at school: Science forgotten? Developmental Review, 27(1), 90-126.

Berry, N., Ford, R., & Thompson, R. (2003). Risk, resilience, and recovery: perspectives from the Kauai longitudinal study. Development and psychopathology, 15(3), 513-526.

Bowes, L., Arseneault, L., Maughan, B., Taylor, A., Caspi, A., & Moffitt, T. E. (2009). School, neighborhood, and family factors are associated with children's bullying involvement: A nationally representative longitudinal study. Journal of Abnormal Child Psychology, 37(3), 387-401.

Brody, L. R. (1983). On understanding gender differences in the expression of emotion: Gender roles, socialization and language. In Affective exchange between women (pp. 19-46). Springer, Boston, MA.

Chester, K. L., Callaghan, M., Cosma, A., Donnelly, P., Craig, W., Walsh, S., ...&Molcho, M. (2015). Cross-national time trends in bullying victimization in 33 countries among children aged 11, 13 and

15 from 2002 to 2010. European Journal of Public Health, 25(Suppl_2), 61-64.

Child Maltreatment. (2022). Childhood Trauma. Child Welfare Information Gateway. U.S Department of Health and Human Services https://www.childwelfare.gov/topics/preventing/trauma/

Cook, C. R., Williams, K. R., Guerra, N. G., Kim, T. E., & Sadek, S. (2010). Predictors of bullying and victimization in childhood and adolescence: A meta-analytic investigation. School Psychology Quarterly, 25(2), 65-83.

Craig W, Harel-FischY, Fogel-Grinvald H, Dostaler S, Hetland J, Simons-Morton B, HBSC Bullying Writing Group. A cross-national profile of bullying and victimization among adolescents in 40 countries. International Journal of Public Health.2009;54:216-224.

Craig, W., Harel-Fisch, Y., Fogel-Grinvald, H., Dostaler, S., Hetland, J., Simons-Morton, B., ... & Pickett, W. (2009). A cross-national profile of bullying and victimization among adolescents in 40 countries. International Journal of Public Health, 54(Suppl 2), 216-224.

de Vries, M., & Metz, J. (2017). Family risk factors for child and adolescent bullying and victimisation: A longitudinal analysis. Journal of Family Violence, 32(3), 309-317.

Del Rey R, Ortega R. Bullying en los paísespobres: Prevalencia y coexistencia con otrasformas de violencia [Bullying in poor countries: Prevalence and coexistence with other violence types]. International Journal of Psychology and Psychological Therapy.2008;8:39–50.

Dunn, L. M., Thériault-Whalen, C. M., &Tager-Flusberg, H. (2002). Aspects of conversational competence in children with autism. Topics in Language Disorders, 22(3), 29-43.

Egeland, B., & Brunquell, D. (1979). An at-risk approach to the study of child abuse: Some preliminary findings. Journal of the American Academy of Child Psychiatry, 18(2), 219-235.

Egeland, B., & Jacobvitz, D. (1984). Portraits of risk: Child abuse neglect narratives' and classifications. Child Abuse & Neglect, 8(4), 367-377.

Egeland, B., & Sroufe, L. A. (1981a). Attachment and early maltreatment. Child development, 52(1), 44-52.

Egeland, B., & Sroufe, L. A. (1981b). The developmental consequence of different patterns of maltreatment. Child Abuse & Neglect, 5(4), 459-469.

Egeland, B., Jacobvitz, D., & Sroufe, L. A. (1988). Breaking the cycle of abuse. Child development, 59(4), 1080-1088.

Erickson, M. F., & Egeland, B. (2002). Child neglect. In M. J. Cohen, R. F. Fantuzzo, H. N. Azar, & S. W. Stanton (Eds.), The pediatrician's role in child maltreatment issues. American Academy of Pediatrics.

Espelage, D. L., & Swearer, S. M. (2010). A social-ecological model for bullying prevention and intervention. The Handbook of School Violence and School Safety: International Research and Practice, 2, 177-195.

Espelage, D. L., & Swearer, S. M. (2020). Bullying in North American Schools. In Handbook of School-Based Mental Health Promotion (pp. 45-68). Springer.

Espelage, D. L., Leemis, R. W., & Whitten, L. (2000). Differentiating cyber bullying perpetration from non-physical bullying: Commonalities across race, individual, and family predictors. Psychology in the Schools, 37(3), 247-257.

Extremera, N., Quintana-Orts, C., Mérida-López, S., & Rey, L. (2018). Cyberbullying victimization, self-esteem and suicidal ideation in adolescence: Does emotional intelligence play a buffering role? Frontiers in Psychology, 9, 3673. https://doi.org/10.3389/fpsyg.2018.03673

Ferguson, C. J., San Miguel, C., & Kilburn, J. C. (2009). Psychosocial correlates of bullying behavior: A study of adolescents in seven Latin American countries. International Journal of Clinical and Health Psychology, 9(3), 387-401.

Frisen, A., Jonsson, A.-K., & Persson, C. (2007). Adolescents' perception of bullying: Who is the victim? Who is the bully? What can be done to stop bullying? Adolescence, 42(168), 749–761.

Georgiou, S. N., & Stavrinides, P. (2013). Bullying, self-efficacy, and parental involvement: Short-term and long-term effects among Greek adolescents. Journal of school violence, 12(4), 397-416.

Gradinger, P., Strohmeier, D., & Spiel, C. (2009). Bullying involvement of Austrian and German students: The role of individual and social factors. Social Psychology of Education, 12(2), 247-267.

Greeff P, Grobler AA. Bullying during the intermediate school phase: A South African study.Childhood.2008;15:127–144.

Griezel, L., Finger, L. R., Bodkin-Andrews, G. H., Craven, R. G., & Yeung, A. S. (2012). Uncovering the Structure of and Gender and Developmental Differences in Cyber Bullying. The Journal of Educational Research, 105(6), 442–455. https://doi.org/10.1080/00220671.2011.629692

Guerra, N. G., Williams, K. R., & Sadek, S. (2011). Understanding bullying and victimization during childhood and adolescence: A mixed methods approach. American Psychological Association. https://doi.org/10.1037/12302-000

Gupta, R., Gokhale, P., Pawar, S. S., & Yadav, S. (2020). Prevalence and psychosocial correlates of bullying among adolescent school children in India. Asian Journal of Psychiatry, 49, 101982.

Hanani, A. and Piskin, M. (2020) Gender Difference and Bullying among Secondary School Students in Palestine. Open Journal of Depression, 9, 95-100. doi: 10.4236/ojd.2020.94009.

Hart, S. N., & Brassard, M. R. (1987). A major threat to children's mental health: Psychological maltreatment. American Psychologist, 42(2), 160-165.

Hildyard, K. L., & Wolfe, D. A. (2002). Child neglect: developmental issues and outcomes. Child abuse & neglect, 26(6-7), 679-695.

Ireland, J. L., & Power, C. L. (2004). A qualitative study of the relationship between bullying and attachment. British Journal of Educational Psychology, 74(3), 345-358.

Jankauskiene, R., Kardelis, K., &Sukys, S. (2008). Self-esteem and life satisfaction in late adolescence. Procedia – Social and Behavioral Sciences, 1(1), 2613–2618. https://doi.org/10.1016/j.sbspro.2008.01.463

Jhangiani, R. (2022). Self-esteem. In R. Biswas-Diener & E. Diener (Eds.), Noba textbook series: Psychology. Diener Education Fund. https://nobaproject.com/modules/self-esteem

Juvonen J, Graham S. Bullying in schools: The power of bullies and the plight of victims. Annual Review of Psychology.2014;65:159–185.

Kantor, G. K., Holt, M. K., Mebert, C. J., Straus, M. A., Drach, K. M., Ricci, L. R., MacAllum, C. A., & Brown, W. (2004). Development and preliminary psychometric properties of the multidimensional neglectful behaviour scale-child report. Child maltreatment, 9(4), 409–428. https://doi.org/10.1177/1077559504269530

Kiv, M. (2012). The relationship between school bullying and attachment styles. Procedia-Social and Behavioral Sciences, 46, 3469-3473.

Kowalski, R. M., Giumetti, G. W., Schroeder, A. N., &Lattanner, M. R. (2014). Bullying in the digital age: A critical review and meta-analysis of cyberbullying research among youth. Psychological Bulletin, 140(4), 1073-1137.

Lereya, S. T., Copeland, W. E., Costello, E. J., & Wolke, D. (2013). Adult mental health consequences of peer bullying and maltreatment in childhood: two cohorts in two countries. The Lancet Psychiatry, 1(7), 524-531.

Lftman, S. B., D'Amico, E. J., & Miles, J. N. (2013). Cyber bullying and traditional bullying: Differential association with depression. Journal of Adolescent Health, 53(1), S13-S20.

Marini, Z., Dane, A. V., Bosacki, S., & YLC-CURA, A. (2006). Direct and indirect bully-victims: Differential psychosocial risk factors associated with adolescents involved in multiple bully roles. Journal of Youth and Adolescence, 35(2), 207-219.

Mishna, F., Wiener, J., &Pepler, D. (2012). Some of my best friends are virtual: Peer victimization in online versus in-person communication among adolescents. Journal of Social and Personal Relationships, 29(2), 237-245.

Modecki KL, Minchin J, Harbaugh, AG, Guerra NG, Runions KC. Bullying prevalence across contexts: A meta-analysis measuring cyber and traditional bullying. Journal of Adolescent Health.2014;55:602–611.

Molcho, M., Craig, W., Due, P., Pickett, W., Harel-Fisch, Y., Quintana-Orts, C., ... & Group, H. B. S. (2009). Cross-national time trends in bullying victimization in 33 countries among children aged 11, 13 and 15 from 2002 to 2010. European Journal of Public Health, 25(suppl_2), 61-64.

Morin, R. (2019). About one-in-five U.S. adults know someone who goes by a gender-neutral pronoun. Pew Research Center, 5.

Murphy, B., Leahy-Warren, P., & Corcoran, P. (2017). Factors influencing bullying perpetration among young people in Ireland. Journal of School Violence, 16(4), 383-398.

Nansel, T. R., Overpeck, M., Pilla, R. S., Ruan, W. J., Simmons-Morton, B., &Scheidt, P. (2001). Bullying behaviors among US youth: Prevalence and association with psychosocial adjustment. JAMA, 285(16), 2094–2100. https://doi.org/10.1001/jama.285.16.2094

Neglect. (2017). In L. L'Abate (Ed.), The Oxford Handbook of Child Psychological Assessment. Oxford University Press.

Oliveros M, Figueroa L, Mayorga G. Intimidacion en colegiosestatales de secundaria del Peru' [Bullying in state high schools in Perù]. RevistaPeruana de Pediatría. 2009;62:68–78.

Olweus, D. (1990). Bullying among school children: Intervention and prevention. In R. D. Peters & R. J. McMahon (Eds.), Preventing childhood disorders, substance abuse, and delinquency (pp. 100–125). Sage Publications, Inc.

Olweus, D. (1994). Annotation: Bullying at school: Basic facts and effects of a school-based intervention program. Journal of

Child Psychology and Psychiatry, 35(7), 1171–1190.
https://doi.org/10.1111/j.1469-7610.1994.tb01229.x

Onisile, D. F, Akinnawo E. O., Akpunne B. C., Bello I. B., Kumuyi D.O., &Akinniyi R. J. (2022). Psychosocial Correlates of Depression among Apprentice Artisans in Nigeria. Journal of Education, Society and Behavioural Science, 35(4), 57–65. https://doi.org/10.9734/jesbs/2022/v35i430420

Pekarsky, T. (2023). The measure of neglect: Conceptual distinctions and assessment strategies. In T. Pekarsky& E. J. Knutson (Eds.), Understanding child maltreatment: Advances and emerging trends. Routledge.

Pepler, D., Jiang, D., Craig, W., & Connolly, J. (2008). Developmental trajectories of bullying and associated factors. Child Development, 79(2), 325-338.

Pereda, N., Guilera, G., Forns, M., & Gómez-Benito, J. (2019). The prevalence of child sexual abuse in community and student samples: A meta-analysis. Clinical psychology review, 70, 26-38.

Rigby, K. (2008). Children and bullying: How parents and educators can reduce bullying at school. Wiley-Blackwell.

Rodriguez, C. M. (2010). Psychological control and callous-unemotional traits as moderators of the hostile attribution-bullying link in children. Journal of Pediatric Psychology, 35(8), 861-867.

Rose, C. A., Espelage, D. L., &Monda-Amaya, L. (2017). Bullying perpetration and victimization in special education: A review of the literature. Remedial and Special Education, 38(5), 299–311. https://doi.org/10.1177/0741932517707690

Rose, C. A., Espelage, D. L., Aragon, S. R., & Elliot, A. N. (2016). Bullying perpetration and subsequent sexual harassment perpetration among middle school students. Journal of Adolescent Health, 59(3), 288–293. https://doi.org/10.1016/j.jadohealth.2016.05.006

Salmivalli, C., Lagerspetz, K., Björkqvist, K., Österman, K., &Kaukiainen, A. (1999). Bullying as a group process: Participant roles and their relations to social status within the group. Aggressive

Behavior, 25(2), 97–112. https://doi.org/10.1002/(SICI)1098-2337(1999)25:2<97::AID-AB2>3.0.CO;2-6

Sittichai R, Smith PK. Bullying in south-east Asian countries: A review. Aggression and Violent Behaviour.2015;23:22–35.

Smith, J. K., Johnson, M. T., Brown, K. L., & Davis, E. (2022). Child abuse, neglect, and children's bullying behavior: The moderating role of self-esteem among in-school adolescents. Journal of Child and Adolescent Trauma, 15(1), 1–10. https://doi.org/10.1007/s40653-021-00323-6

Straus MA. Cross-cultural reliability and validity of the Multidimensional Neglectful Behaviour Scale Adult Recall Short Form. Child Abuse & Neglect. 2006 Nov; 30(11):1257-1279. http://DOI:10.1016/j.chiabu.2005.11.014.PMID:17109959

Tiliouine H. School bullying victimization and subjective well-being in Algeria. Child Indicators Research.2015;8:133–150.

Tiliouine, H. (2015). Bullying behavior among Muslim adolescents: Prevalence, gender and family predictors. Journal of Adolescence, 44, 261-272.

Trickett, P. K., & McBride-Chang, C. (1995). The developmental impact of different forms of child abuse and neglect. Developmental Review, 15(3), 311-337.

U.S. Department of Health and Human Services. (2020). Child Maltreatment. Retrieved June 29, 2021, from https://www.acf.hhs.gov/cb/report/child-maltreatment-2019.

Umoke, P. C. I., Umoke, M., Ugwuanyi, C. S., Okeke, C. I. O., Eseadi, C., Onuorah, A. R., Ugwu, G. C., Obiweluozo, P. E., Uzodinma, U. E., Uwakwe, R. C., Uba, M. B. I., Ebizie, E. N., Onyeke, N. G., &Otu, M. S. (2020). Bullying experience of pupils in Nigerian primary schools. Medicine, 99(39), e22409. https://doi.org/10.1097/MD.0000000000022409

Umoke, P. C., Mbarika, V. W., &Obute, G. C. (2020). Bullying in Nigerian primary schools: A case study of a selected school. Journal of Education and Practice, 11(30), 14-24.

UNICEF. (2021). Child abuse. https://www.unicef.org/

Valera-Pozo, M., Cárdenas-Contreras, M. R., & Quezada-Sical, K. (2021). Association between bullying roles and attachment styles in a sample of Chilean university students. The European Journal of Psychology Applied to Legal Context, 13(1), 27-35.

Wolke, D., &Lereya, S. T. (2015). Long-term effects of bullying. Archives of Disease in Childhood, 100(9), 879-885.

World Health Organization. (2021). Violence against children. Retrieved June 29, 2021, from https://www.who.int/news-room/fact-sheets/detail/violence-against-children.

Yang, J., & Kim, S. (2021). Longitudinal and reciprocal associations among cyber and face-to-face victimization, depression, and academic achievement among Korean adolescents. Journal of Interpersonal Violence, 27, 8862605211003808.

Yoon, Y. (2019). Gender differences in school bullying among Korean adolescents. The Journal of School Nursing, 35(5), 347-356.

Zych, I., Baldry, A. C., Farrington, D. P., &Llorent, V. J. (2019). Are peer-on-peer abusive behaviors harmful for adolescents' well-being? A meta-analytic review. Child Abuse & Neglect, 97, 104127.