

EC PSYCHOLOGY AND PSYCHIATRY Conceptual Paper

The Consequences of School Bulling for the Identity of Adolescence

Grishina Tatyana G*

Psychologist, Candidate of Psychological Sciences, Moscow, Russia

*Corresponding Author: Grishina Tatyana G. Psychologist, Candidate of Psychological Sciences, Moscow, Russia.

Received: May 23, 2023; Published: July 21, 2023

Abstract

The article describes the physical and psychological consequences of bullying for both the identity of the buller and the identity of the bully. Some measures to prevent bullying in school are given.

Keywords: Bullying; Harassment; Buller; Bully; Observer; Consequences

Social reality is a complex system of groups that develops norms, values, assigns positions and has an important influence on the development of personality. The group plays a crucial role in human development. The group plays an important role in the early socialization of a person. Bullying is currently a serious problem among children and adolescents all over the world. About 25 percent of children in our country are exposed to school bullying every day. Most of them repeatedly turned to their parents and older brothers and sisters for help, but they rarely interceded. Basically, they believe that a teenager should cope with his own problems. As a result, they rarely intervene to stop bullies or help children cope with bullying. Some people think bullying is just part of growing up and a way for teenagers to learn to stand up forthemselves. But bullying can have long-term physical and psychological consequences. Some of them include: running away from home, not taking part in school life, the desire to be alone, shyness, abdominal pain, headaches, panic attack, insomnia, or vice versa, sleeping a lot, tormented by nightmares. Also, bullying is reflected both on the witnesses of bullying and on the bullets. The witnesses are afraid that they may becomethe next victim. Even if they are not suitable for the role of victim, they avoid participating in bullying to protect themselves and because they do not know what to doin such cases. Aggressors are more likely to be involved in aggression, sexual harassment and criminal behavior at the end of life. Stress and anxiety caused by bullying can make it difficult for children to learn. This manifests itself in difficulty concentrating and reduces their ability to focus on the subject and study, which affects their ability to remember things they have learned.

Bullying, regardless of verbal or physical in itself, is very humiliating and painful for teenagers who are just forming a worldview. If the pain of humiliation and insults is not relieved, then bullying can even lead to suicide.

Psychological consequences of bullying can lead a child to depression, anxiety, low self-esteem, aggressive behavior towards others, alcohol and drug use. Prolonged school bullying affects the child's Self-concept: self-esteem drops, there is a feeling of harassment, problems of socialization arise [3]. The child then tries to avoid relationships with other people. At the same time, bullying can lead to mental

health problems for any child, but children who already have mental health problems are even more likely to be bullied and experience its negative consequences. For example, in the study of A.A. Nesterova, it was revealed that children who are victims of bullying with the peculiarities of their psychological sphere lead to adverse consequences in situations of interpersonal communication in the school team [3]. According to our research, girls are more likely to suffer from verbal aggression and social isolation, and boys are more likely to become victims of school bullying at the age of 10-13 years, butat the same time girls are more likely to experience individual (one-time) manifestations of aggression (verbal and social) and more often from representatives of their own sex [1].

Bullying is a risk factor for depression and suicidal thoughts. Children who are bullied and those who are bullied are most likely thinking or trying to commit suicide, unlike those who do not participate in bullying [2].

Bullying (bullying) is one of the main indicators of the mental health of adolescents (children). This fact is recognized in various international reports that include bullying among indicators of the well-being of children and adolescents. Bullying among peers has been associated with various emotional symptoms such as anxiety and depressionor destructive behavior such as drug and alcohol abuse, and subsequent careless drivingbehavior and minor gynecological problems. In severe cases, the possibility of psychotic symptoms associated or unrelated to drug use was recommended, the evolution of which varies depending on the duration of harassment and post-traumatic stress disorder (PTSD), which, in turn, in itself is a risk factor for new experiences of harassment.

At this stage, we can forget that exposure to any form of violence in childhood and adolescence is a traumatic experience and a risk factor for harassment at school and decline in well-being at this age. Suicidal ideation and its completion remain the mostserious complication of cases of persecution and the most shocking and traumatic for society and the media. The most outstanding work on the long-term health effects of bullying is a retrospective study conducted by Kopeland., *et al.* (2013) in a large sample of adults involved in school harassment during their childhood as victims, as well as aggressors. Adults who were victims of bullying in childhood or those who alternately behave as victims or aggressors continue to demonstrate a high prevalence of mental disorders (suicidal thoughts mainly in men, agoraphobia and depression in women, panic disorder and anxiety disorder in both sexes); antisocial personality dominates the aggressors.

Bullying (bullying) makes children upset, feel lonely, unhappy and scared and think that something is wrong with them. Children may lose confidence and may not want to go to school anymore. The physical consequences of bullying can be obvious and implicit, for example, it can be wounds as a result of a fight. However, the ongoing stress and trauma caused by bullying can also lead to physical problems over time. The victim's child may develop sleep disorders, abdominal pain, headaches, palpitations, dizziness, somatic pain [4].

Aggressors, in turn, experience stress against the background of bullying. The stress of bullying can affect the immune system and hormones. Studies have also shown that there are long-term consequences of bullying for aggressors. School bullies in adulthood often exhibit violent and antisocial behavior. They tend to break the law inadulthood, such as vandalism, shoplifting and drug use. It has also been proven that grown-up bullers are more likely to use violence against spouses [5]. Aggressors get used to using violence as a means of solving problems. When bullers were in school, the use of aggression was effective for them, which encourages them to continue to behave similarly in adulthood [2].

Research has consistently proven that bullying can have a negative impact on how well children and teenagers do at school. Very little research has been done to understand the consequences of bullying for children who witness bullying (for example, passers-by), but even their psyche is undergoing a change - they may develop a position of non-interference and ignoring someone else suffering.

Children and adolescents who become aggressors, as well as victims, are at the greatest risk of negative consequences for mental and physical health compared to just the victim and the aggressor. These children and adolescents may experience a combination of psychological problems, negative perceptions of themselves and others, poor social skills, behavior problems, and rejection from their peer group.

Compared to the observers, those who bullied others, as well as were bullied, were at increased risk of serious mental illness, a high risk of suicide attempts and demonstrate increased aggression.

From all of the above, it can be concluded that bullying in real life can lead to a variety of negative consequences, such as depression, anxiety and stress, violations in establishing and maintaining social contacts. Therefore, when working with children and adolescents, school psychologists and social workers need to be aware of the phenomenon of school bullying, its potentially harmful consequences for victims and aggressors, and the necessary interventions to prevent bullying and violence.

In turn, parents can also help their child not to become a victim of bullying.

To do this, you can apply some actions if a parent suspects that a teenager has become avictim of bullying:

- Listen to your child that he is being bullied and take it seriously;
- Report bullying to school;
- Teach your teen how to avoid situations that expose him or her to bullying. Show yourchild your experience of adapting to the world round you and gaining social skills;
- Teach a teenager how to react to aggression. With bullies, they should be assertive and not respond to aggression, that is, leave the bully with himself;
- Avoid watching violent games, TV shows and movies.

In order to ensure that all students can study in a safe and fear-free environment, a comprehensive action plan is needed in which all students, parents and school staff will participate.

Bibliography

- 1. Grishina TG and Nesterova AA. "Predictors of school bullying against children of younger adolescence by peers". *Bulletin of the Moscow State Regional University. Series: Psychological Sciences* 3 (2018): 97-114.
- 2. Korol NV. "Consequences of school bullying in the representation of students". *Universum: Psychology and Education: Electronic Scientific Journal* 12.42 (2017).
- Nesterova AA. "Psychological features of children prone to victimization in the situation of school bullying". Psychological security
 of the individual in extreme conditions and crisis situations of life: collection of scientific articles in the International scientific and
 practical conference/Edited by R.V. Kadyrov. Vladivostok: Moscow State University (2015): 277-285.
- 4. Hager AD and Leadbeater BJ. "The longitudinal impact of peer victimization on physical health from adolescence to adolescence". *Journal of Adolescent Health* 58.3 (2016): 330-336.
- 5. Roberts WB. "Bully as a victim". Professional School Counselling 4 (2000): 148-156.

Volume 12 Issue 7 July 2023 ©All rights reserved by Grishina Tatyana G.