

**PSYCHOLOGICAL CONSEQUENCES OF BULLYING AMONG ADOLESCENTS: A COMPARATIVE STUDY OF MENTAL HEALTH OUTCOMES IN OLYMPIA, WASHINGTON**

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**ABSTRACT**

*Bullying has emerged as a major psychological and social concern affecting adolescents worldwide. Repeated exposure to bullying can negatively influence emotional stability, behavioral adjustment, academic performance, and peer relationships among school-aged children. This study aimed to compare mental health problems among adolescents aged 11–17 years exposed to bullying and those living under standard, non-bullying conditions in Olympia, Washington, USA. A comparative cross-sectional research design was employed involving 300 students selected from public and private secondary schools. Participants were divided equally into bullied and non-bullied groups. Data were collected using the Strength and Difficulties Questionnaire (SDQ) and a Bullying Exposure Checklist. Statistical analysis was conducted using SPSS version 26.0, applying descriptive and inferential statistical methods including independent sample t-tests and chi-square analysis. The findings revealed significantly higher emotional, conduct, hyperactivity, and peer relationship difficulties among bullied adolescents compared to non-bullied participants. Female students demonstrated higher emotional distress, whereas males exhibited greater conduct-related difficulties. Cyberbullying and prolonged bullying exposure were associated with elevated psychological distress levels. The study concludes that bullying is strongly associated with adverse mental health outcomes among adolescents and highlights the importance of early psychological intervention, school-based counseling, and effective anti-bullying policies to promote adolescent well-being.*

**Keywords:** *Bullying; Adolescent Mental Health; Strength and Difficulties Questionnaire (SDQ); Cyberbullying; Emotional Problems; Behavioral Difficulties; School Psychology; Peer Victimization; Olympia, Washington; Adolescents*

**INTRODUCTION****Background of the Study**

Adolescence is an important stage of psychological, emotional, and social development during which individuals experience major cognitive, behavioral, and interpersonal changes. During this period, adolescents are highly influenced by school environments, peer relationships, and social experiences that shape their mental well-being and personality development (WHO, 2021). Among the major psychosocial challenges affecting adolescents today, bullying has emerged as a significant public health and educational concern worldwide (Olweus, 1993).

Bullying refers to repeated aggressive behavior intended to harm, threaten, intimidate, or socially isolate another individual and may occur in physical, verbal, relational, or digital forms (CDC, 2023). Previous studies have demonstrated that exposure to bullying is strongly associated with emotional distress, anxiety, depression, low self-esteem, behavioral problems, and poor academic performance among adolescents (Nansel et al., 2001; Wolke & Lereya, 2015). Victims of bullying frequently experience social withdrawal, peer relationship difficulties, and reduced emotional resilience, which may negatively affect long-term psychological development (Arseneault, 2018).

In recent years, cyberbullying has further intensified mental health concerns among adolescents. Unlike traditional bullying, cyberbullying can occur continuously through digital communication platforms and social media, exposing adolescents to persistent psychological stress beyond school environments (Tokunaga, 2010). Research has shown that cyberbullying is associated with increased emotional instability, loneliness, suicidal ideation, and depressive symptoms among school-aged youth (Van Geel et al., 2014; Hinduja & Patchin, 2021).

Although several international studies have examined bullying and adolescent mental health, limited comparative research has focused specifically on adolescents living in smaller urban communities within the United States. Olympia, Washington, represents a socially and culturally diverse educational setting where adolescents may experience different forms of peer victimization and psychological stress. Therefore, examining the mental health outcomes of bullied and non-bullied adolescents in this region is important for understanding localized educational and psychological challenges.

This study aims to compare emotional and behavioral difficulties among adolescents aged 11–17 years exposed to bullying and those living under standard, non-bullying conditions using the Strength and Difficulties Questionnaire (SDQ) developed by Goodman (1997). The findings are expected to contribute to adolescent mental health research and support the development of effective school-based intervention and prevention strategies for improving adolescent well-being.

### **Objectives of the Study**

1. To assess emotional and behavioral difficulties among bullied adolescents using the Strength and Difficulties Questionnaire (SDQ).
2. To compare SDQ scores between bullied and non-bullied adolescents.
3. To identify the relationship between bullying exposure and psychological well-being among adolescents.
4. To examine gender differences in mental health outcomes related to bullying exposure.
5. To provide recommendations for improving school-based mental health support and anti-bullying interventions.

## **METHODOLOGY**

### **Research Design**

This study employed a comparative cross-sectional research design to examine differences in mental health problems between adolescents exposed to bullying and those living under standard, non-bullying conditions. The design enabled the assessment of emotional and behavioral outcomes among participants at a single point in time using standardized psychological measures.

### **Sample and Sampling Technique**

The study was conducted among adolescents aged 11–17 years studying in public and private secondary schools in Olympia, Washington, USA. A total of 300 students participated in the research, including 150 students who reported bullying exposure and 150 students who reported no bullying experiences. A stratified random sampling technique was used to ensure balanced representation across gender, grade level, and school type.

Participants were selected based on inclusion criteria such as school enrollment, age eligibility, and willingness to participate. Students with previously diagnosed severe psychiatric disorders or incomplete questionnaire responses were excluded from the study.

### **Research Instruments**

Data were collected using two instruments: the Strength and Difficulties Questionnaire (SDQ) and a Bullying Exposure Checklist (BEC). The SDQ is a standardized psychological assessment tool consisting of 25 items that evaluate emotional problems, conduct problems, hyperactivity, peer relationship difficulties, and pro-social behavior among adolescents.

The Bullying Exposure Checklist was used to identify the type and frequency of bullying experiences, including verbal, physical, relational, and cyberbullying. Both instruments were administered in English and designed for self-report responses.

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**Data Collection Procedure**

Permission to conduct the study was obtained from relevant school administrations prior to data collection. Participants completed the questionnaires during school hours in a supervised classroom setting. Instructions regarding confidentiality and voluntary participation were explained before questionnaire distribution.

The average completion time for the survey was approximately 15–20 minutes. Participants were encouraged to answer honestly and independently without assistance from peers or teachers.

**Statistical Analysis**

Collected data were coded and analyzed using IBM SPSS Statistics Version 26.0. Descriptive statistics such as frequencies, percentages, means, and standard deviations were used to summarize demographic and psychological variables.

Inferential statistical methods, including independent sample t-tests and chi-square tests, were applied to compare mental health outcomes between bullied and non-bullied groups. Statistical significance was established at a p-value less than 0.05.

**Ethical Considerations**

Ethical approval for the study was obtained prior to data collection. Written informed consent was secured from parents or guardians, while assent was obtained from participating students. Participation was voluntary, and confidentiality of responses was strictly maintained throughout the research process.

Participants were informed about their right to withdraw from the study at any time without consequence. School counselors were also informed in advance to provide support if any participant experienced emotional discomfort during the survey process.

**RESULTS****Demographic Characteristics**

A total of 300 adolescents participated in the study, including 150 students exposed to bullying and 150 students living under standard, non-bullying conditions. Participants were aged between 11 and 17 years and were selected from public and private secondary schools in Olympia, Washington. The sample consisted of 148 males (49.3%) and 152 females (50.7%), representing a nearly balanced gender distribution. Most participants were enrolled in grades 7–12, and no major demographic differences were observed between the two study groups.

**SDQ Score Comparison**

The findings revealed significantly higher Strength and Difficulties Questionnaire (SDQ) scores among adolescents exposed to bullying compared to non-bullied participants. The bullied group recorded a mean total SDQ score of 21.6 (SD = 5.8), while the non-bullied group demonstrated a lower mean score of 14.2 (SD = 4.7). Statistical analysis indicated that the difference between the two groups was significant ( $p < 0.05$ ).

Emotional problems and conduct-related difficulties were more common among bullied adolescents. Higher peer relationship difficulties and hyperactivity scores were also observed within the bullied group, suggesting increased psychological and social distress associated with bullying exposure.

**Gender-wise Analysis**

Gender-based analysis demonstrated variations in mental health outcomes among bullied adolescents. Female participants reported higher emotional and peer relationship difficulties compared to males, indicating greater internalized emotional distress. In contrast, male participants showed higher conduct and hyperactivity scores, suggesting more externalized behavioral responses to bullying experiences.

These findings indicate that bullying may affect male and female adolescents differently, emphasizing the importance of gender-sensitive psychological interventions within school environments.

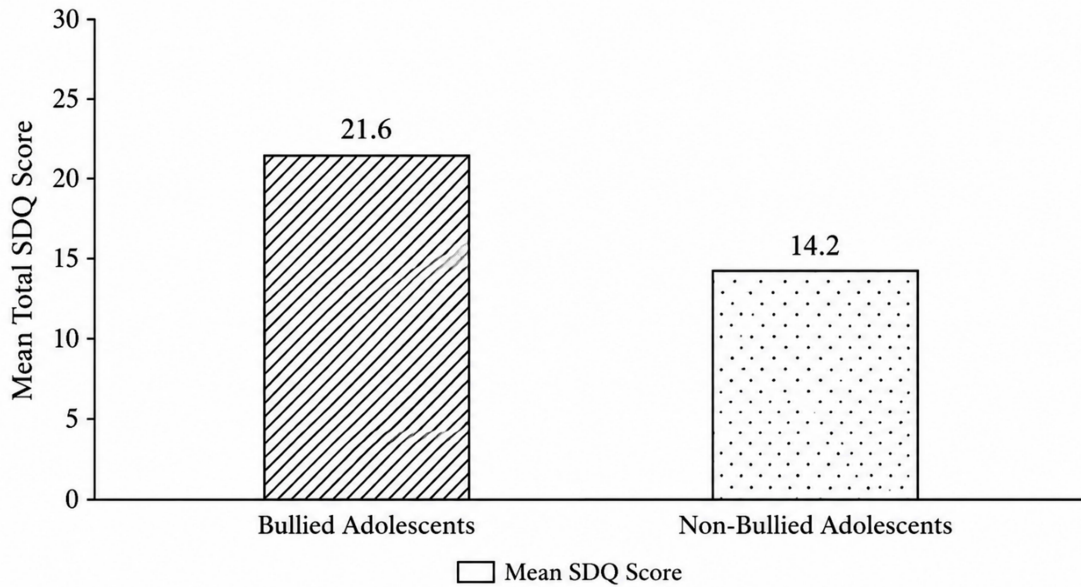


Figure 1: Comparison of Total SDQ Scores between Bullied and Non-Bullied Adolescents

### Bullying Type and Mental Health Outcomes

The analysis further revealed that different forms of bullying were associated with varying psychological outcomes. Adolescents exposed to cyberbullying and relational bullying reported the highest emotional distress and peer relationship difficulties. Physical bullying was more strongly associated with conduct-related problems and aggressive behavioral responses.

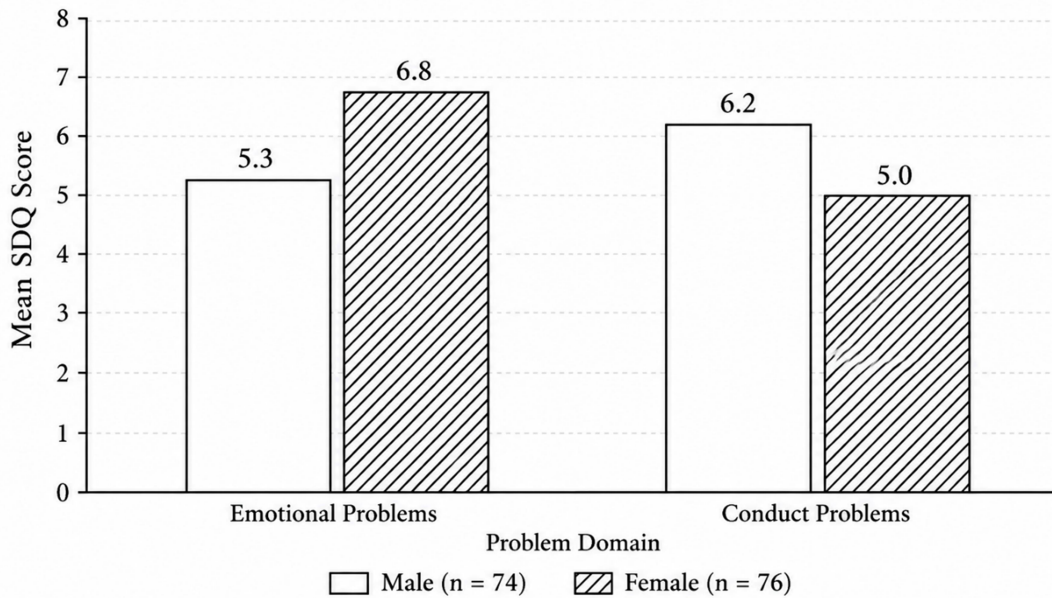


Figure 2: Gender-wise Emotional and Conduct Problem Scores

Students who experienced repeated or long-term bullying exposure demonstrated higher total SDQ scores compared to those exposed occasionally. These findings suggest that both the type and duration of bullying significantly influence adolescent mental health and psychosocial well-being.

**Table 1:** Gender-wise comparison of emotional, conduct, hyperactivity, and peer relationship problem scores among adolescent participants based on SDQ assessment.

SDQ Domains	Male Mean ± SD (n=148)	Female Mean ± SD (n=152)	p-value
Emotional Problems	5.3 ± 1.9	6.8 ± 1.7	<0.05
Conduct Problems	6.2 ± 1.8	5.0 ± 1.6	<0.05
Hyperactivity	5.6 ± 1.5	4.8 ± 1.4	<0.05
Peer Problems	4.9 ± 1.5	6.1 ± 1.7	<0.05

**Table 2:** Comparison of SDQ domain scores between bullied and non-bullied adolescents, indicating significantly higher emotional and behavioral difficulties among bullied participants.

SDQ Domains	Bullied Mean ± SD (n=150)	Non-Bullied Mean ± SD (n=150)	p-value
Emotional Problems	6.8 ± 1.7	3.9 ± 1.3	<0.001
Conduct Problems	6.2 ± 1.8	3.8 ± 1.2	<0.001
Hyperactivity	5.1 ± 1.5	3.7 ± 1.1	<0.05
Peer Problems	5.8 ± 1.6	3.4 ± 1.0	<0.001
<b>Total SDQ Score</b>	<b>21.6 ± 5.8</b>	<b>14.2 ± 4.7</b>	<b>&lt;0.001</b>

**Table 3:** Comparison of SDQ domain scores between bullied and non-bullied adolescents, indicating significantly higher emotional and behavioral difficulties among bullied participants.

Variables	Bullied Adolescents (n=150)	Non-Bullied Adolescents (n=150)	Total (%)
Male	74	74	148 (49.3%)
Female	76	76	152 (50.7%)
Age 11–13 Years	61	58	119 (39.7%)
Age 14–17 Years	89	92	181 (60.3%)
Public School Students	82	79	161 (53.7%)
Private School Students	68	71	139 (46.3%)

**DISCUSSION**

The findings of this study demonstrate a significant relationship between bullying exposure and mental health problems among adolescents aged 11–17 years in Olympia, Washington. Adolescents who experienced bullying reported considerably higher Strength and Difficulties Questionnaire (SDQ) scores compared to non-bullied participants, indicating greater emotional, behavioral, and social difficulties. These findings support previous international research suggesting that bullying is strongly associated with anxiety, depression, peer relationship problems, and psychological distress among school-aged children.

Emotional problems were found to be particularly high among bullied adolescents, especially among female participants. This may be related to increased emotional sensitivity, stress internalization, and social pressure experienced during adolescence. Male participants, however, demonstrated higher conduct and hyperactivity scores, suggesting that bullying may also contribute to aggressive or externalized behavioral responses among boys. These gender-based differences highlight the importance of implementing gender-sensitive mental health interventions within educational settings.

The study also identified cyberbullying and relational bullying as major contributors to emotional distress among adolescents. Unlike traditional bullying, cyberbullying may continue beyond school environments through social media and digital communication platforms, increasing emotional pressure and psychological

insecurity. Adolescents exposed to long-term bullying demonstrated higher total SDQ scores, indicating that repeated victimization may negatively affect emotional resilience, academic performance, and social confidence over time.

Overall, the findings emphasize that bullying should not be considered merely a disciplinary issue, but rather a serious public mental health concern requiring early intervention and psychological support. Schools should strengthen anti-bullying policies, counseling services, and awareness programs to promote safer educational environments and protect adolescent mental well-being.

### Limitations of the Study

This study has several limitations. First, the cross-sectional design limits the ability to establish causal relationships between bullying exposure and mental health outcomes. Second, the study relied on self-reported responses, which may introduce recall bias and socially desirable responses. Third, the research was conducted within selected schools in Olympia, Washington, which may reduce the generalizability of findings to broader adolescent populations.

### CONCLUSION

This study examined mental health problems among adolescents exposed to bullying and those living under standard, non-bullying conditions in Olympia, Washington. The findings revealed that bullied adolescents experienced significantly higher emotional, conduct, hyperactivity, and peer relationship difficulties compared to non-bullied participants. Female students reported greater emotional distress, while males demonstrated higher conduct-related difficulties.

The study further highlighted that cyberbullying and prolonged bullying exposure were strongly associated with increased psychological distress among adolescents. These findings confirm that bullying can negatively affect adolescent emotional stability, social adjustment, and behavioral functioning.

In conclusion, bullying represents a major challenge to adolescent mental health and requires coordinated action from schools, parents, mental health professionals, and policymakers. Early psychological intervention, school counseling services, and effective anti-bullying programs are essential to reducing the long-term psychological impact of bullying and promoting healthier learning environments for adolescents.

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