

**PREVALENCE AND CORRELATES OF PEER VICTIMIZATION AMONG
ADOLESCENTS IN PUBLIC SECONDARY SCHOOLS IN SAGAMU LOCAL
GOVERNMENT AREA, OGUN STATE, NIGERIA.**

BY

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CERTIFICATION

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DEDICATION

This study is dedicated to Almighty God; for his faithfulness at all times; My Parents, Pastor and Mrs Olugbenga Akosile and my siblings; David and Deborah Akosile.

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ABSTRACT

Violence cuts across generations, it affects every segment of the society and it is particularly common among school-going adolescents. Peer victimization is an aspect of school violence that makes students fearful of school, and inhibits their learning potentials. Peer-victimization has been found to be a universal phenomenon among children. It can lead to very grave consequences in the emerging adult. However, there is need to determine the extent of the problem and identify factors influencing its occurrence. This will ensure protection of the vulnerable students. This study therefore seeks to determine the prevalence and describe the correlates of peer victimization among young adolescents.

This study was cross-sectional in design. It was carried out among adolescents aged 10- 15 years in Junior classes one through three. A total of 850 respondents were selected using a three stage random sampling technique. The first stage was a random selection of four schools via the use of table of random numbers from the list of public secondary schools in Sagamu Local Government Area. It entailed proportional allocation of respondents among the selected schools. This was calculated based on the number of eligible students in each of the schools. In the second stage, the proportion was then distributed among the first two arms (A and B) in each class and the third stage was a systematic random selection to select every N^{th} student from each class. A pretested and validated 23- item semi structured questionnaire comprising of six sections was used to collect data from respondents. The questionnaire comprised questions on socio-demographic characteristics; the extent to which they had experienced or perpetrated physical, verbal and psychosocial forms of victimization; factors associated with the experience and perpetration; and health consequences. Data was analysed using descriptive statistics to show frequency tables and chi square tests of association was carried out between selected socio demographic characteristics, factors associated with peer victimization experience and perpetration (independent variables) and the experience and perpetration of peer victimization (outcome variables). Multivariate analysis was then carried out among the significant variables to determine the degree of association.

Majority of respondents (51.4%) were males, 85.9% were Yorubas and 68% were Christians. The prevalence of experience of peer victimization was 93.5%. Respondents who had experienced physical victimization were 794(93.6%), verbal victimization were 694(81.6%) and psychosocial victimization 763(89.9%). The most common types of peer victimization experienced were fighting (68.2%), cursing (55.1%) and stealing (67.2%). Lifetime reports of perpetration of physical, verbal and psychosocial peer victimization among males were 77.2%, 82.5% and 63% respectively. Insecure personality and gender were found to be significant predictors of the experience of peer victimization, while age, desire to conceal shame, bad temper and jealousy were significant predictors of the perpetration of peer victimization ($p < 0.1$).

Comprehensive interventions targeting students, schools and teachers are recommended to address this problem.

Keywords: Peer victimization, Adolescents, Schools

Word Count : 473

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ABBREVIATIONS

CDC	Center for Disease Control
FMOE	Federal Ministry of Education
JSS	Junior Secondary Class
LGA	Local Government Area
WHO	World Health Organization

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CHAPTER ONE

1.0 INTRODUCTION

The interactions that children have with their peers are critical in helping them to develop social skills, acquire norms for appropriate and inappropriate interpersonal conduct and derive standards against which to measure and compare their own behavior (Huesmann, 2003). Schools are environments where students congregate to gain knowledge and acquire practical and social skills aimed at improving success in post-secondary life. However, the acquisition of social skills is not likely to be simple and painless. Not all peer interactions are positive or instructive, and different forms of aggression occur commonly in the school setting (Woods, 2007).

Violence cuts across generations, it affects every segment of the society and it is particularly common among school-going adolescents. Peer victimization is an important aspect of school violence which makes the students fearful of school, and inhibits their learning potentials (Adefunke, 2010). Peer victimization is defined as the experience among children of being a target of the aggressive behavior of other children, who are not siblings and not necessarily age-mates (Hawker, 2000). Peer-victimization has also been defined as exposure to repeated, over time negative actions by a child from another child, which involves asymmetrical power relationship including intentional harm (Olweus, 1999). Peer victimization is the consequence of acts of intentional aggression, by a peer (or group of peers) operating from a position of strength or power, and directed at a victim who is viewed as relatively weak (Stephen, 2010). It can be an aggression that is direct such as face-to-face confrontation or an indirect aggression which can be via a third party and typically of a verbal nature (Rivers and Smith, 1999).

Peer-victimization has been found to be a universal phenomenon among children. It can lead to very grave consequences in the emerging adult (Balogun et al, 2006). The child must have experienced one form of aggressive behaviour or the other before being called a victim. Bullying, is commonly used to describe different acts of aggression. Bullying is a worldwide serious problem in schools. It can have negative consequences for the general school climate, for the rights of teachers to teach and also the students to learn in a safe environment without fear

(Adefunke, 2010). Adolescents who bully others in school tend to exhibit defiant and delinquent behaviours, have poor school performance, are more likely to drop-out of school, and are more likely to bring weapons to school (Nansel et al, 2001). Victims of bullying in schools may experience health problems later in life. Studies have shown that there is a relationship between peer-victimization, psychological adjustment and school functioning (Olweus 1993; Smith and Sharp, 1994., Ttofi et al 2008 and Juvonen et al 2000). Unfortunately, victimizing students has impact on children's academic performance, emotional and social development (Adefunke, 2010).

1.1 PROBLEM STATEMENT

Bullying, particularly among school-age children, is a major public health problem both domestically and internationally (Nansel et al 2004). It is estimated that worldwide up to 50% of children are faced with the complex social dilemma of bullying in schools, as either perpetrators or victims (Dooboy et al, 2008). Studies have shown that 20% to 54% of school children are repeatedly involved in bullying as perpetrators and/or as victims (Kumpulaine et al, 2000, Wolke et al, 2001). Current estimates suggest that nearly 30% of American adolescents reported at least moderate bullying experiences as the bully, the victim, or both. Specifically, results of a nationally representative sample of American adolescents found that, 13% reported being a bully, 11% reported being a victim of bullying, and 6% reported being both a bully and a victim (Nansel et al., 2001).

The statistics on the prevalence of peer-victimization is alarming; about two out of seven children experience peer-victimization within a week. According to Karstadt (1999). four children in every class are subjected to peer victimization on a regular basis. this is in consonance with earlier reports by Olweus, (1994); and Slee et al, (1993) that one out of ten children is persistently victimized by peers while many more children are victimized less severely. In a recent study in Osun State Nigeria, it was reported that more than 50% of the students had experienced one form of victimization or the other in the last one year (Adefunke, 2010). Adefunke (2010) reported that the rate of peer victimization was high among Junior Secondary School students in Osun State, Nigeria. A proportion of about 60.6% and 59.9% of

male and female respectively had been hurt or experienced pain as a result of what other students did to them. Also, 60.9% and 62.2% of students within the age bracket of 9-12 and 13-14 years had been hurt or experienced pain from their fellow students. Various studies have examined the incidence and prevalence of peer-victimization in adolescents (Wentzel et al, 1995; Egbochuku, 2007; Adefunke, 2010; Calaguas, 2011; Lohre et al, 2011, and and there seems to be agreement that the phenomenon is a global concern (Smith, 1991; Slee, 1995).

Peer victimization among schoolchildren is a common problem that affects health problems (Card et al, 2008). Victimization is increasingly being recognized around the world as a psychologically harmful, physically damaging and socially isolating aspect of the school life of a small but significant group of children (Philip et al, 1995). Adolescents often experience different types of victimization across a specified period of time in different situations (Romano et al, 2011). These multiple victimization experiences can have a number of deleterious effects on psychosocial well-being such as high level of emotional distress, loneliness, peer rejection and depression.

Bullying can also have negative lifelong social, emotional, psychological and educational consequences, both for the perpetrators and for their victims (Collins et al, 2004; Banks, 1997). Despite this, bullying is one of the most underestimated problems in schools. According to Squelch (2000), people prefer to ignore it and simply pass it off as "nasty children picking on others". However, the health and psychological impacts of victimization on adolescents cannot be over emphasized.

1.2 JUSTIFICATION

Millions of young people throughout the world experience physical and emotional victimization and exploitation. Asamu (2006) found that 22.5% of the students she studied in Ibadan, Nigeria were below 15 years of age; bullying behaviour was peculiar to junior secondary school. The worldwide victimization of young people can be prevented or at least its incidence can be greatly reduced if purposive action is taken (Clayton et al, 2009). Until recently, the common perception had been that bullying was a relatively harmless experience that many children experience during their school years. However, over the past two decades, an extensive body of research has documented that bullying

is a potentially damaging form of violence among children and youth. So, while bullying is not a new phenomenon, what is new is the growing awareness that bullying has serious damaging effects for bullies, victims, schools and communities.

Many Nigerian children attend school, however, schools need to be safe, to promote physical, social and psychological wellbeing of the students and provide a conducive environment for learning. Safety in schools is of prime importance to reduce all forms of aggression and peer victimization in schools. Without a safe learning environment, learning will never take place and without learning, the purpose of schools will be defeated (Kaufman et al 1999).

Peer victimization in schools is a major concern of educators, policymakers, administrators, parents, and students (DeVoe et al, 2010). The solutions to these problems can only be developed if the programs and policies developed to address victimization is built on accurate information and country specific (Kaufman et al 1999).

In developed countries, studies (Wolke, (2001), Olweus (1997), Devoy et al. (2010) have reported prevalence of peer victimization, but in most developing countries, empirical data is rare. However, data on the prevalence and types of peer victimization in Nigeria is few. There is dearth of research into the area (Balogun et al 2006). In the few studies from Nigeria, the context within which peer victimization occurs still remains difficult to describe (Adefunke, 2010). Hence only little is known on peer victimization in Nigeria. However, there is need to determine the extent of the problem and identify factors influencing its occurrence. This will ensure protection of the vulnerable students. This study therefore seeks to determine the prevalence and describe the correlates of peer victimization among young adolescents.

1.3 OBJECTIVES

1.3.1 BROAD OBJECTIVE

To determine the prevalence and correlates of peer victimization among adolescents in public secondary schools in Sagamu Local Government Area (LGA).

1.3.2 SPECIFIC OBJECTIVES

1. To determine the prevalence of peer victimization among adolescents in the selected secondary schools.
2. To describe the types of victimization experienced by adolescents in the secondary schools.
3. To identify factors associated with experiencing peer victimization among the students in the selected secondary schools.
4. To identify factors associated with perpetration of peer victimization to fellow students.
5. To describe the perceived health consequences of victimization among affected students.

1.4 RESEARCH QUESTIONS

1. What is the prevalence of peer victimization among adolescents in public schools?
2. What are the types of victimization experienced by adolescents in public secondary schools?
3. Which factors are associated with experiencing victimization among young adolescents in public secondary schools?
4. What are the factors associated with victimizing peers among secondary school students?
5. What do students perceive as consequences of victimization among affected students?

CHAPTER TWO

2.0 LITERATURE REVIEW

2.1 DEFINITION OF VIOLENCE

Violence is a public health issue with global relevance and far-reaching health consequences affecting the well-being of those involved, and making demands on the health services (WHO, 2002). Violence exists in many forms, and a definition to encompass a general understanding and scientific measurement of the problem is needed to understand more about violence as a health problem (WHO, 2002). Thus, violence as defined by the (WHO, 2002) and as cited by the (FMOE, 2007) is the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group of community that either results in or has a high likelihood of resulting in injury, death, psychological harm, mal-development or deprivation (Krug et al, 2002).

From this definition above, there is a very strong correlation between intentionality and committing of an act itself, irrespective of the outcome. The definition also excludes unintentional incidents, such as road traffic injuries and burns (FMOE, 2007). The use of physical force or power does not only include physical actions, but also includes neglect and emotional abuse, occurring for example in parent-child relationships. The expression of "power" can reflect the gender dimension of violence for example, violence to women, when the perpetrator is male and the victim is female (Heise, 1993 and WHO 1998).

However, violence includes any condition or act that creates a climate in which the individual feels fear or intimidation in addition to being victims of assault, theft or vandalism. This situation is becoming a growing problem in Nigerian schools (Aluede, 2006). Globally, violence takes the lives of more than 1.5 million people annually; just over 50% due to suicide, some 35% due to homicide, and just over 12% as a direct result of war or some other form of conflict. For each single death due to violence, there are dozens of hospitalizations, hundreds of emergency department visits, and thousands of doctors' appointments (Krug et al 2002). Violence often has life-long consequences for victims' physical and mental health and social functioning and can slow economic and social development. Violence, however, is preventable.

2.2 VIOLENCE AMONG ADOLESCENTS IN SCHOOLS

A school is an institution that is designed for teaching of students enrolled in it. The main purpose of the school is to develop the student through knowledge acquisition so that he/she may become a social being (Fajoku, 2009). The student is expected to learn how to relate with fellow students, teachers and significant others in the school, and also to live in a harmonious way by blending with societal values in the society as well. The school is expected to be a place where students should feel safe and secure, and where they can count on being treated with respect. The reality, however, is that only few students or pupils can harmoniously blend with their school mates without experiencing violence in the school (Fajoku, 2009).

Violence in schools is an issue that has become more prominent within the last few years. The research about violent experience within the school setting has recently been on the increase (Adefunke, 2010). Although the school had always remained one of the safest places, next to the home in a child's life, but this is no more the case; due to the increasing rate of violence in schools (Olewus, 1994 and Aluede, 2006). Violence is one of the acts of indiscipline found at every level of education be it tertiary, secondary and primary though at varying degrees and in different forms (Aluede, 2006). Some of which include gang activity, locker theft, bullying and intimidation, gun use, assault; virtually anything that produces a victim. Specifically, students abuse one another physically, mentally or verbally. Thus, the use of guns, knives and other dangerous weapons and other abuses – physical or psychological is more common than ever in Nigerian school system (Aluede, 2006; FMOE, 2007 and Fajoku, 2009).

Adolescent violence is not a rare incidence in schools and may be as common as any other offence (Fajoku, 2009). Despite this increasing rate of violence in schools, it is expected that the school should be a safe place for students. Thus, in order to maintain a peaceful and safe school environment, there is a need to study more closely the extent of violence in our schools. School violence wears many faces. Therefore, schools have the responsibility to prevent aggressive behaviors on its premises and the obligation to provide an environment that promotes children's health and safety (CDC, 2001). In Nigeria, studies confirm that violence is a major health problem affecting both male and female adolescents (Ajuwon et al., 2001; Fawole et al., 2002).

2.3 PEER VICTIMIZATION; A FORM OF VIOLENCE AMONG ADOLESCENTS IN SCHOOLS

Violence seems to travel from the strongest to the weakest or from the most powerful to the least powerful, (this is called the “vortex of violence”) (Perry, 1996). People who are the victims of violence absorb it, modify it and pass it on to others. Young children who are at the bottom of the vortex often do not have anyone to pass it on to, so they absorb it, accumulate it and wait until they are old enough to erupt in some dramatic way that will hurt other people. It can be assumed that the exposure of young school students to victimization is likely to result in a high level of social aggression which may persist into adulthood in the form of criminality, marital violence, child abuse and sexual harassment and even terrorism (Farrington, 1997). Specifically, bullying as a sub-set of school violence among school-age children occurs in many schools across the globe (McEachern, et al 2005).

Peer victimization or bullying is one of the hidden elements of the culture of violence that contributes to different manifestations of violence in the society. Victimization occurs in various forms such as child abuse, domestic violence, workplace violence, hate crimes and road rage (Neser et al 2003). It is a pervasive problem in schools that affects most students. In recent times, it is becoming a major crisis with vicious consequences. Bullying is not just one of those childhood play, but a terrifying experience many school children face every day (Craig, 1998; Beran, 2005; Aluede, 2006 and Thornbery, 2010).

Olweus (1993), the father of violence provided a widely used and recognized definition of bullying at school as “A person is bullied when he or she is exposed, repeatedly and over time, to negative actions on the part of one or more other persons, and he or she has difficulty defending him or herself”. According to this definition, bullying refers to negative physical, verbal, or relational hostile actions, causing distress to victims, being repeated, and involving a power differential between perpetrators and victims. Thus, three important elements which include; repetition, harm, and imbalance of power define bullying; providing a distinction from other forms of youth violence. Bullying, a subcategory of aggressive behavior, is encountered regularly by children and adolescents in the context of schools worldwide. Although, bullying is

a common experience for students around the world, it is a complex social problem that can have severe negative consequences for both bullies and victims (Hymel, et al 2005), especially as bullying has the potential to cause either physical or psychological harm to the victim (Bosworth, et al 1999).

Recent researches in the United States and Nigeria has documented that bullying is a common and potentially damaging form of violence among children (Olweus, 1995; Aluede 1996; Susan et al, 1998 and Egbochukwu, 2007). An increasing number of studies (Olweus 1995; Juvonen and Graham 2001 and Pepler et al 2004) have focused on bullying at schools. Peer victimization is known to be a prevalent behavior among children and adolescents in schools in most Western countries (Molcho, 2009). Not only does bullying harm both its intended victims and the perpetrators, it also may affect the climate of schools and indirectly, the ability of all students to learn to the best of their abilities. Moreover, the link between bullying and later delinquent and criminal behavior cannot be ignored. Although studies on anti-bullying programs are scarce, evaluation data from other countries suggest that adopting a comprehensive approach to reduce bullying at school can change students' behaviors and attitudes, reduce other antisocial behaviors, and increase teachers' willingness to intervene (Susan et al, 1998).

2.4 TYPES OF PEER VICTIMIZATION

Victimization is an aggressive behavior that is intentional; which can take many forms. A number of studies (Olweus, 1993 and Suckling and Temple, 2002) have shown that there are various types of victimization which include

1. Physical acts such as (but is not limited to) scratching; pushing; throwing; grabbing; biting; choking; hitting; shaking; fighting; slapping; kicking; punching; burning; use of a weapon; forced sexual activity; injury or death from a weapon and use of restraints on the body, size, or strength against another person (Crick, 2001).
2. Verbal types such as teasing, swearing, threatening, cursing, name-calling and mimicking.

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2. Verbal types such as teasing, swearing, threatening, cursing, name-calling and mimicking.

a common experience for students around the world, it is a complex social problem that can have severe negative consequences for both bullies and victims (Hymel, et al 2005), especially as bullying has the potential to cause either physical or psychological harm to the victim (Bosworth et al 1999).

Recent researches in the United States and Nigeria has documented that bullying is a common and potentially damaging form of violence among children (Olweus, 1995; Aluede 1996; Susan et al, 1998 and Egbochukwu, 2007). An increasing number of studies (Olweus 1995; Juvonen and Graham 2001 and Pepler et al 2004) have focused on bullying at schools. Peer victimization is known to be a prevalent behavior among children and adolescents in schools in most Western countries (Molcho, 2009). Not only does bullying harm both its intended victims and the perpetrators, it also may affect the climate of schools and indirectly, the ability of all students to learn to the best of their abilities. Moreover, the link between bullying and later delinquent and criminal behavior cannot be ignored. Although studies on anti-bullying programs are scarce, evaluation data from other countries suggest that adopting a comprehensive approach to reduce bullying at school can change students' behaviors and attitudes, reduce other antisocial behaviors, and increase teachers' willingness to intervene (Susan et al, 1998).

2.4 TYPES OF PEER VICTIMIZATION

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1. Physical acts such as (but is not limited to) scratching; pushing; throwing; grabbing; biting; choking; hitting; shaking; fighting; slapping; kicking; punching; burning; use of a weapon; forced sexual activity; injury or death from a weapon and use of restraints on the body, size, or strength against another person (Crick,2001).
2. Verbal types such as teasing, swearing, threatening, cursing, name-calling and mimicking.

3. Social types such as deliberately leaving out of a game or group, ignoring and not inviting to classmates' gatherings, peer pressure, taunting and ganging up against others.
4. Psychological Violence takes the form of physical intimidation, controlling through scare tactics and oppression, harassments, being picked upon, laughed at, unfair treatment, constant criticism and such likely acts (Wikipedia 2007).
5. Sexual bullying such as making sexual comments or gestures.
6. Cyber bullying such as sending annoying and disturbing electronic messages over the phone or computer.
7. Health – related violence refers to any form of stigmatization, abuse, neglect, discrimination and so on as a result of a person's health status (e.g preventing an HIV positive pupil from participating in group work or play). It defines every form of violence relating to health.

However, there is a distinction between direct and indirect behaviors. Direct bullying includes physical and verbal attacks and aggression (kicking, pushing, names calling) while indirect bullying involves behaviors such as ignoring or gossiping, which often relies on a third party (Vanderwall et al,2003). Indirect bullying is also referred to as relational bullying, because aggression directed at damaging a social relationship (Espelage et al, 2003).

A child who is being bullied has a hard time defending himself or herself. Often, children are bullied not just once or twice, but over and over. Most common definitions of bullying have three things in common: First, bullying is a repeated action that occurs over a prolonged period of time. Secondly that there is an imbalance of power; and thirdly that the verbal, psychological, and/or physical negative actions of bullying are unprovoked. Manifestations include threatening to injure another person for no apparent reason, requesting tasks to be performed that are

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undesirable to the other individual, and threatening negative consequences to individuals, if their requests are not met by the victims. Additionally, the bully may intimidate the victim by initiating acts such as name-calling, teasing, pushing or shoving and using physical dominance for intimidation (Aluede and Fajoku 2009; Fajoku, 2009).

It is estimated that up to three-quarter of adolescents experience different types of bullying and up to one third report more extreme experiences of coercion or inappropriate touching (Juvonen, 2000). Direct bullying is more common among males and indirect is more common among females (Borg, 1999). Most bullying takes place at the same grade level. However, many times older students bully younger students. Although direct bullying is a greater problem among boys, a good deal of bullying takes place among girls. Bullying between girls, however, involves less physical violence and can be more difficult to discover. Girls tend to use indirect and subtle methods of bullying, such as exclusion from a group of friends, backbiting, and manipulations of friendships (Salivalli et al., 1998). Many girls are mostly bullied by boys, but both can be victims of bullying. Asamu (2006) opined that a good deal of bullying is carried out by older students toward younger ones. The older students often expose the younger and weaker students to the act of bullying.

2.5 PREVALENCE OF PEER VICTIMIZATION AMONG ADOLESCENTS

In epidemiology, prevalence usually refers to the number of persons with a defined disease or condition existing at a particular point in time (point prevalence) or within a specified time period (period prevalence or cumulative prevalence) relative to the total number of persons in the group or population "exposed to risk." This epidemiological concept is translated into the victimization realm by defining prevalence as the "percentage of students in a school or other meaningful unit who have been exposed to bullying/victimizing behavior by other students with some defined frequency within a specified time period" (Solberg and Olweus, 2003).

The refusal of victims to report incidents of victimization makes it difficult to estimate the frequency and prevalence of peer victimization. Thus, the prevalence reported in the existing literatures are simply estimates. Despite lack of documentation of incidents of bullying across the

globe, studies conducted in various countries have indicated that a growing percentage of student population is being bullied everyday across the globe and that the rates of bullying vary from country to country (Duncan, 1999).

Stimulated by the pioneering work of Dan Olweus in Norway and Sweden, researchers from several nations -- Australia, Canada, England, Ireland, Japan, Norway, and the United States have explored the nature, prevalence, and effects of bullying among school children. Their findings provide compelling reasons for initiating interventions to prevent bullying. Its high prevalence among children, its harmful and frequently enduring effects on victims, and its chilling effects on school climate are significant reasons for prevention and early intervention efforts in schools and communities (Olewus, 1993).

According to (Olewus, 1997), the percentage of students who reported being victims of bullying decreased with age. Many children were bullied by older students. This implies that students of 9-12 years, 12-14 years and in junior classes experience high level of victimization than students above 15 years who experience lower level of victimization. There was also a higher prevalence of victimization among students of lower socio-economic class compared with students of high socio-economic class. It was reported that peer victimization is a pervasive phenomenon and (Olewus, 1993) found that boys were more often the victims of direct victimization, whereas girls were more the victims of indirect victimization.

Various other studies involving adolescents in different countries report the following findings: In the United States of America, bullying behavior occurs in many American schools and is perhaps one of the most under-reported safety problems (Batsche and Knoff, 1994). However, American schools harbor approximately 2.1 million bullies and 2.7 million are their victims (Fried, 1997). Specifically, (Bosworth et al 1999 as cited in Kenny et al. 2005) study found that 81% of their sample reported at least one act of bullying behavior during the last month. Another study found that 82% of the respondents were bullied at some period in their academic lives. In addition, several studies from different parts of the US have reported 10-29 percent of the students surveyed were either bullied or victims (Kenny et al, 2005). In Canada, self-reported data indicated that 8% to 9% of elementary school children are bullied frequently (i.e., once or

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more a week) and about 2 to 5% of students bully others frequently. Also, among adolescents, at the secondary school level, rates are somewhat higher, with 10 to 11% of students reporting that they were frequently victimized by peers, and another 8 to 11% reporting that they frequently bully others (Hymel, et al 2005).

Smith (2001) reported that 10% of children in America indicated that they had been bullied by other students, but had not bullied others. Another six percent stated that they had been bullied and had also bullied other children. A total of 13% of the students noted that they had bullied other students but had not been bullied. Stephenson and Smith; 1999; Olweus, 1991; and Craig and Pepler, 1997 observed that most bullying take place in school and usually encouraged by the audience. Boys and girls are equally likely to report being victimized by bullies. It was found that most bullies have little or no empathy for their victims and show little remorse about bullying. A total of 60% of boys identified as bullies at primary level had at least one court conviction by age 24 (Craig and Pepler, 1997).

In a study involving elementary school children in the UK, it was found that 4.3% were identified as bullies, 10.2% as bully/victims and 39.8% as victims (Wolke et al., 2000). In a large study of grades six through 10, 30% reported moderate or frequent involvement as a victim and/or perpetrator of bullying (Nansel, 2001).

In Africa, the pioneering works of (Zindi, 1994) revealed in his study of bullying at boarding school in Zimbabwe that 16% of the sampled students were bullied now and then, and 18% were bullied weekly or more often. In Nigeria, though cases of bullying had been reported in many schools, this deviant act has not reached the desirable attention. Furthermore, available statistical facts to show the actual number of students that are bullied or victims in Nigerian schools are minimal.

In Cyprus, from a sample of 12-15 year old Greek Cypriots from two junior high schools, 8.4% reported being bullies only, 15.25% being bully/victims and 21.5% being victims only (Kokkinos and Panayiotou, 2004). This study however had used only a small and non-

representative sample and therefore any generalizations on the Cyprus student population should be made with caution.

According to the Nigerian Federal Ministry of Education (2007), since the last decade, several cases of violence against children such as torture, kidnapping, shooting, bullying, sexual harassment, rape, corporal punishment have been reported in various newspapers, magazines and television stations. However, there is lack of documentation on the prevalence of most of these violent acts. This lack of documentation and increased rate of violence against children were part of the reasons for the global in-depth study of violence against children by the United Nations Secretary-General as directed by the General Assembly Resolution 57/90 of 2002 to provide a global picture (FMOE, 2007).

Despite the low documented evidence of the prevalent rate of bullying in Nigeria, according to a study carried out in Benin, Edo State (Egbochukwu, 2007), it was found that 78% of the children have been victims of bullying on at least one occasion and 71% have lashed out at others at least once. The findings revealed that the existing types of violence in schools are physical, psychological, sexual, gender and health based violence. However physical violence (85%) and psychological violence (50%) were the major forms of violence against children in schools; where physical violence had the highest prevalence. Other types of violence reported among learners in basic education level in Nigeria included gender –based violence (5%), sexual violence (4%) and health related violence (1%). Across region, physical violence was more prevalent in the rural (90%) than urban areas (80%). This study further reveals that physical violence is perpetrated more by senior students (4.9%) and classmates (4.7%); while the school teachers were reported as mostly the perpetrators of psychological violence (26.4%) (Egbochukwu, 2007).

Similarly, Aluede and Fajoju's (2009) study on secondary school students in Benin metropolis of Nigeria revealed that majority of the respondents (62.4%) had been victims of bullying, while 29.6% of the respondents indicated that they had bullied others within the academic session. In the first ever nation-wide situational analysis survey of school violence in Nigeria by the Federal Ministry of Education (2007), it was revealed that physical violence and psychological violence

accounted for 85% and 50% respectively of the bulk of violence against children in schools. Across school location, physical violence was more prevalent in the rural (90%) than in the urban areas (80%). Across regions, physical violence in schools is higher in the southern Nigeria (90%) than in the Northern region (79%) while for psychological violence, we have 61% in Southern Nigeria and only 38.7% in Northern Nigeria. Furthermore, across gender, physical and psychological violence are almost evenly distributed among males and females in Nigerian schools (FMOE, 2007).

In a study carried out in Osun State Nigeria, 53% of the respondents had experienced one form of victimization or the other in the last one year as compared to only 47% of the subjects that have not been hurt or experienced pains in the last one year from their fellow students. Across gender and the rate of peer victimization in the study it could be observed that only 39.4% and 40.1% of male and female respectively have not been hurt or experienced pain as a result of what other students did to them (Adefunke, 2010).

2.6 FACTORS ASSOCIATED WITH EXPERIENCE AND PERPETRATION OF PEER VICTIMIZATION AMONG ADOLESCENTS IN SCHOOLS

Results of researchers show that the rate at which adolescents are victimized is very high. The occurrence of peer victimization is multifaceted and encompasses a number of behaviors, such as culture and age. It is difficult to ascribe a single cause to its occurrence in children (Balogun, 2006). Another important point is that most students who are bullied either do not report the bullying to adults or they wait for a very long time before doing so. The reasons for not reporting include feelings of shame, fear of retaliation and fear of being disciplined by parents. However, peer victimization may be attributed to many other factors such as;

(a) **Societal factors:** This comprises of early experiences, which can influence the behaviour of a child. They include parental neglect, family instability, aggression within the home or in the society, family stress, rejection, isolation, exposure to violent movies, child abuse, ignoring, antisocial acts and inconsistent reinforcements (Asonibare, 1998). Olweus (1994) also said that

those who bully may come from families where there is lack of attention and warmth toward the child, poor supervision, and use of physical and verbal aggression.

(b) **Biological Factors:** Science has proved that some individuals behave aggressively due to malfunctioning of the body organs or imbalance in the production of body hormones. Aggressive behaviours such as bullying can also be attributed to poor state of mental health (Jekayinfa, 2004).

(c) **Peer group influence:** Secondary school students spend most of their time with their age-mates than they do with their parents and teachers. Salawu (2003) described a peer group as the group that a child interacts and plays with within his/her immediate environment. According to him, while in the group, the child enjoys a free world, more independent in thought and action and he/she has freedom to discuss matters of interest, which may be contrary to the interest shared by adults. Thus, the peer group has a considerable influence on a child's actions or inactions.

(d) **Physical appearance:** The weakness and small physical stature of many children and their dependency status may put them at greater risk of victimization (Finkelhor and Dzuiba-Leatherman, 1994).

Furthermore, students who get bullied can be regarded as being passive or being submissive victims. They are usually quiet, careful, sensitive, and may start crying easily. They are unsure of themselves and have poor self-confidence or negative self-image. These boys in this group do not like to fight, and they are often physically weaker than their classmates, especially the bullies, and they have few or no friends (Olweus, 1994).

Other factors in a student's life that contributes to them being bullies include classroom (during unsupervised periods of time), school (where the staff does not address bullying on campus), neighborhood (where negative models of bullying behavior exist) and society (TV, movies, video games).

Some of the literatures on bullying (Olweus, 1993; Smith and Sharp, 1994; Hazler, 1996; Rigby, 1996; Ttofi et al., 2008) suggest that the perpetrators are children frustrated by lack of success in school. They build the reputation using aggressive behaviors against other adolescents who are physically and socially weaker (Fishman et al 2002). Similarly kids who bully are often kids who have often been victimized themselves. For some, it is a life experience they are unable to cope with and this leaves them feeling that they have no control. For others, it is a feeling of not fitting in, or not meeting the expectations of family or school. In order to feel more competent and successful, a child may try to control someone else to get some relief from their own feelings of powerlessness.

On the other hand, studies have also shown that the family plays a central role in the development of social skills in youth. Parents who are supportive and involve with their children enable them to develop personal and social skills (Rigby, 1996). In many cases the bully's formative years are marred by poor parental example or by outright neglect. Many bullies come from homes where their parents are cold or uninvolved or have, in effect, taught their children to use rage and violence to handle problems (Ttofi, 2008). Furthermore, some children are aggressive probably because they have been unconsciously taught at home by their parents or siblings that intimidating and verbally abusing others are the best means of getting their own way and these sometimes work (Erinne, 2005).

2.7 PERCEIVED HEALTH CONSEQUENCES OF PEER VICTIMIZATION ON ADOLESCENTS

Studies on bullying suggest that there are short- and long-term consequences for both the perpetrators and victims. Students who are chronic victims of bullying experience more physical and psychological problems than their peers who are not harassed by other children (Williams et al, 1996) and they tend not to grow out of the role of victim. Longitudinal studies have found that victims of bullying in early grades also reported being bullied several years later (Olweus, 1993). Studies also suggest that chronically victimized students may as adults be at risk of depression, poor self-esteem, and other mental health problems, (Olweus, 1993) including schizophrenia (Parker et al 1997).

It is not only victims who are at risk of the short- and long-term consequences; bullies also are at increased risk of negative outcomes. Several studies (Byrne, 1994) suggest that bullying in early childhood may be a critical risk factor for the development of future problems under violence and delinquency. For example, Olweus' research found that in addition to threatening other children, bullies were several times more likely than their non-bullying peers to commit antisocial acts, including vandalism, fighting, theft, drunkenness, and truancy, and to have an arrest by young adulthood (Olweus, 1993). Another study of more than 500 children found that aggressive behavior at the age of eight was a powerful predictor of criminality and violent behavior by the age of 30 years (Eron et al, 1997).

Victimized children are at risk of a variety of negative outcomes. They are more anxious and insecure; have lower self-esteem, are lonely, more likely to be rejected by their peers, and are depressed than non-victimized children (Farrington, 1993; Craig, 1998; and Boulton, et al 1992). According to (Thorbes, 2003) victims of bullying are more likely to display suicidal thoughts, anxiety, poor general physical health, drug use, poor body image and eating disorders.

2.7.1 Depression: Researches (Aluede, 2006; Aluede., et al 2008; Beran, 2009 and Thornberg, 2010) have described an association between bullying by peers and different dimensions of internal distress and social problems. Especially as a single student who bullies can have very far reaching effect on the school; thus creating a climate of fear and intimidation not only in his/her victims, but also on bystanders. Therefore, students affected by bullying are at higher risk of developing depression, anxiety, loneliness, mistrust of others, low self-esteem, poor social adjustment, poor academic achievement and poor health compared to others (Thornberg, 2010). Thus victims typically displayed behaviours that are described as internalizing problems. Internalizing problems refers to a range of over controlled behaviours and internal distress. Symptoms of internalizing disorders may include: High level of anxiety, depression, somatic complaints and social phobias (Agnes, 2009).

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as well. Experiencing peer harassment has been associated with lower grades, disliking school and absenteeism (Juvonen, 2000 and Eisenberg, 2003). In addition, youths who were victimized as children or adolescents also have increased rate of violent- related behavior compared to those not involved in bullying at all (Nansel, 2003).

2.7.2 School absenteeism: Another consequence of bullying among school children is that children miss school because of fear of being bullied. Victims of bullying may avoid talking about school or a particular class activity at school, which could affect their academic performance (Rigby, 1999).

2.7.3 Poor social skills: Victims feel unpopular and rejected by their peers, they lack social skills, and their relationship with friends are weak (Farrington, 1993). Also victims reported distant and non-supportive relations with their parents, had very few close friends and to express positive attitudes towards their teachers and schools (Fishman et al., 2002). Moreover, (Olweus, 1991; and Craig 1998), positioned that generally, majority of children who are victims are passive, anxious, and weak, lacking self-confidence, unpopular with other children and have low self-esteem.

2.7.4 Poor academic performance: Although studies linking victim status to academic achievement are few, there is evidence that victimization is associated with negative attitudes toward school and poor performance. This may occur as early as kindergarten and can extend into the adolescent years (Schwartz et al 2005). It is not difficult to imagine the chronic victim who becomes so anxious about going to school that she or he tries to avoid it at all costs.

2.7.5 Low self-esteem: However, research on the consequences of peer victimization highlights why it is a public health concern: A growing body literature have documented that victims tend to have low self-esteem and to feel more lonely, anxious, and depressed than their non-victimized peers do (Juvonen and Graham, 2001). Victims were also disliked by their peers, particularly during the middle-school years. In general, early adolescents appear unsympathetic toward victims, who are often perceived to be responsible for their plight.

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Other health consequences of peer victimization include high prevalence of physical complaints and psychosocial maladjustment (Bond et al., 2001; Duen et al, 2005; Arseneaut et al., 2010), with fairly similar effects between countries (Nansel et al 2004). Williams and co-workers drew attention to the importance of dose, and suggested that higher frequencies of victimization were associated with greater risk of health problems (Williams 1995, et al). Persistent victimization over an extended time period also predicts more serious health problems (Rosen, 2009).

Bullying also has bad effect on the bullies themselves. If not stopped in childhood, they will likely grow up to bully others in the work place. Also studies reveal that those who had been bullies as children develop behaviour pattern that endured into adult life. They were also more likely to have a criminal record than those who were not bullies (Olweus, 1993; Smith and Sharp, 1994; Hazler, 1996; Rigby, 1996; Ttofi et al., 2008).

2.8 SUGGESTIONS ON THE PREVENTION OF PEER VICTIMIZATION AMONG ADOLESCENTS IN SCHOOLS

From available data on school violence in Nigerian schools, the school system is littered with ever growing evidence of physical violence. Despite the growing incidents, Federal Ministry of Education (2007), reports that its eradication or reduction remains an issue of great concern, because incidents of violence in Nigerian schools is often not reported. The reason for this is that students generally feel nothing will be done by school authorities if ever they report incidents of physical violence. However, to reduce bullying, it takes a team effort by everyone involved - students, teachers, administrators, other staff members and parents - to change the climate and culture of the schools.

As school administrators make attempts to prevent acts of violence from occurring within their schools, they increasingly turn to school counsellors and other helping professionals in the school for leadership and help with establishing policies on safety (Fryxell and Smith, 2000). School counsellors and psychologists are primarily agents of change and prevention of victimization within the school system (Eduwen, 2010).

Another strategy that has been found to be useful in bullying management in the literature is developing a written anti-bullying policy to everyone in the school community and also consistently applying the policy (Peterson, 2005). According to (Peterson, 2005): mapping a school's "hot spots" for bullying incidents so that supervision can be concentrated in designated areas; having students and parents sign contracts at the beginning of the school year acknowledging that they understand it.

Additionally, teaching bullies positive behavior through modeling, coaching, prompting, praise, social skills, conflict management, anger management, character education, signing anti-teasing or anti-bullying pledges, will no doubt reduce bullying incidents in schools (Peterson, 2005).

The first and best-known intervention to reduce bullying among school children was launched by Olweus in Norway and Sweden in the early 1980's. Inspired by the suicides of several severely victimized children, Olweus supported the development and implementation of a comprehensive program to address bullying among children in school. The program involved interventions at multiple levels (Peterson, 2005).

2.8.1 School wide interventions: A survey of bullying problems at each school, increased supervision, school wide assemblies, and teacher in service training to raise the awareness of children and school staff regarding bullying.

2.8.2 Classroom-level interventions: The establishment of classroom rules against bullying, regular class meetings to discuss bullying at school, and meetings with all parents.

2.8.3 Individual-level interventions: Discussions with students identified as bullies and victims.

The program was found to be highly effective in reducing bullying and other antisocial behavior among students in primary and junior high schools. Within two years of implementation, both boys' and girls' self-report indicated that bullying had decreased by half. These changes in behavior were more pronounced the longer the program. Moreover, students reported significant decreases in rates of truancy, vandalism, and theft and indicated that their school's climate was

Another strategy that has been found to be useful in bullying management in the literature is developing a written anti-bullying policy to everyone in the school community and also consistently applying the policy (Peterson, 2005). According to (Peterson, 2005); mapping a school's "hot spots" for bullying incidents so that supervision can be concentrated in designated areas; having students and parents sign contracts at the beginning of the school year acknowledging that they understand it.

Additionally, teaching bullies positive behavior through modeling, coaching, prompting, praise, social skills, conflict management, anger management, character education, signing anti-teasing or anti-bullying pledges, will no doubt reduce bullying incidents in schools (Peterson, 2005).

The first and best-known intervention to reduce bullying among school children was launched by Olweus in Norway and Sweden in the early 1980's. Inspired by the suicides of several severely victimized children, Olweus supported the development and implementation of a comprehensive program to address bullying among children in school. The program involved interventions at multiple levels (Peterson, 2005).

- 2.8.1 School wide interventions:** A survey of bullying problems at each school, increased supervision, school wide assemblies, and teacher in service training to raise the awareness of children and school staff regarding bullying.
- 2.8.2 Classroom-level interventions:** The establishment of classroom rules against bullying, regular class meetings to discuss bullying at school, and meetings with all parents.
- 2.8.3 Individual-level interventions:** Discussions with students identified as bullies and victims.

The program was found to be highly effective in reducing bullying and other antisocial behavior among students in primary and junior high schools. Within two years of implementation, both boys' and girls' self-report indicated that bullying had decreased by half. These changes in behavior were more pronounced the longer the program. Moreover, students reported significant decreases in rates of truancy, vandalism, and theft and indicated that their school's climate was

significantly more positive as a result of the program. Not surprisingly, those schools that had implemented more of the program's components experienced the most marked changes in behavior.

However, the core components of the Olweus anti bullying program have been adapted for use in several other cultures, including Canada, England, and the United States and the results of the anti-bullying efforts in these countries have been similar to the results experienced in the Scandinavian countries, with the efforts in Toronto schools showing somewhat more modest results. Again, as in the Scandinavian study, schools that were more active in implementing the program observed the most marked changes in reported behaviors.

Even though intervention strategies are designed and implemented to address bullying, it is essential to recognize that students can be discreet in devising ways to disguise bullying in order to escape identification. As such, some form of surveillance may be necessary to detect acts of bullying that occur outside the general area of the classroom (Peterson, 2005). Therefore, increasing public awareness and knowledge about bullying behavior problem can be a way to reduce bullying. This can be achieved through:

1. Active involvement of teachers and parents in prevention programme
2. Vigilance by school personnel for incidents of bullying
3. The development of firm sanctions and consequences for students who engage in bullying
4. Teaching assertiveness skills to the bullied victims (Aluede, 2006; Kenny et al, 2005; McEachern et al, 2005; Olweus, 1991).

Furthermore, in all interventions geared towards bullying reduction, those provided in the Federal Ministry of Education's (2007) *The national strategic framework for violence free basic education in Nigeria* seems exceptionally and particularly instructive. They are:

1. Deliberate efforts at establishing/ strengthening counseling services in schools must be initiated with a view to protecting children from violence. Therefore, pre- service and in- service

capacity of guidance counselors and school psychologists must be prioritized. In addition, issues on violence, especially physical violence (bullying) against children must be incorporated into guidance and counseling curriculum.

2. Violence free consciousness must be promoted among students, teachers and other members of the school communities including parents. Therefore, school counselors and psychologists should on a regular basis organize seminars on violence prevention and also produce publications to educate students and teachers on acceptable non-violent behaviors.

3. School counselors should as a matter of priority endeavor to ensure the promotion of life skills to prevent violence against students in schools. Where appropriate, co-curricular activities in school clubs; focusing on violence prevention should be encouraged.

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CHAPTER THREE

3.0 MATERIALS AND METHODS

3.1 STUDY AREA

This study was conducted in Sagamu, Ogun State. Ogun State is a state in South-western Nigeria. It borders Lagos State to the South, Oyo and Osun states to the North, Ondo State to the east and the Republic of Benin to the west. Sagamu is one of the local governments within Ogun State. Inhabitants of Sagamu LGA are predominantly Yorubas, although people from other tribes also reside in the LGA. There are about 20 public secondary schools in the LGA, majority are mixed schools including both males and females and about 6 are one sex only. More than half of the schools within the LGA enrolled Junior and Senior students. The student's population in each of the Junior Secondary Schools one through three classes ranged from 600 – 1000 students.

3.2 STUDY SITE

The study was carried out in four public secondary schools in Sagamu Local Government Area, Ogun State.

3.3 STUDY POPULATION

The study population were young adolescents aged between 10 and 15 years. These are the most susceptible group to peer victimization. Study participants were recruited from Junior Secondary School classes one to three.

3.3.1 INCLUSION CRITERIA

1. This study was restricted to Junior classes in Public Secondary Schools.
2. Adolescents within the age of 10-15 years who were registered in the School as at the time of the study were eligible for this study.

3.3.2 EXCLUSION CRITERIA

1. Senior students of Public Secondary Schools were excluded from this study.
2. Private schools were excluded from the study.
3. Adolescents above 15 years were not included in the study.

3.4 STUDY DESIGN

This study was an analytical cross-sectional in design.

3.5 SAMPLING SIZE ESTIMATION

The sample size was calculated using the formula

$$n = \frac{Z_{\alpha}^2 pq}{d^2}$$

Where;

n= sample size

Z_{α} = a variable with a critical value of at 1% standard error (i.e. 95% confidence interval) A standard normal deviate usually set at 1.96 or more.

p = the proportion of the target population estimated with a characteristic study interest, in this case is the prevalence of peer victimization which is 53% (Adefunke, 2010).

$$p+q= 1 \text{ thus } q=1-p$$

$$p=0.53 \text{ therefore, } q=0.47$$

$$d = \text{level of precision (5\%)} = 0.05$$

$$n = \frac{1.96^2 \times 0.53 \times 0.47}{0.05^2}$$

$n = 382$ which will be multiplied by 2 to adjust for design effect = 764.

To compensate for non-response, 10% attrition rate will be added to the minimum sample size i.e $(x/x-1) \times \text{sample size} = 10/9 \times 764$ to give a total of 849. However, 850 respondents were studied.

3.6 SAMPLING TECHNIQUE

A three stage random sampling method was employed to select the participants from the LGA. The stages were:

Stage I: This was a random selection of four schools using the table of random numbers from a list of 20 public secondary schools in Sagamu Local Government Area. This entailed proportional allocation of respondents among the selected schools. Proportions were calculated based on the number of eligible students in each of the schools.

Stage II: The sample size was proportionally allocated to the schools based on the number of students in the Junior Secondary School one through three (JSS1-3) in each school. The proportion of the sample size allocated to each school was equally distributed among the students in each class.

Stage III: Systematic random sampling was done to select every 5th student from only the first two arms (A and B) of each class.

Refer to appendix 2 for details.

3.7 PRETEST

The questionnaire was pretested on 20 randomly selected Junior Secondary School students in Lagelu Local Government Area of Ibadan, Oyo State. The pre test was done to determine the validity and reliability of the questions to be asked which was carried out by the researcher and an assistant. Questions 23 and 24 were misunderstood by respondents during the pre test and had to be rephrased. The responses were then coded, entered and analyzed with SPSS software after which corrections were made to improve the efficacy of the questionnaire.

3.8 DATA COLLECTION INSTRUMENT AND PROCEDURE

A pretested and validated semi-structured questionnaire which comprised of 23 questions was used to collect data from respondents. Data was collected by six trained research assistants over a period of four weeks. A multi-dimensional measure of questionnaire, which has demonstrated validity and internal consistency in previous research, was used to assess secondary students' self-reports of peer victimization at school (Mynard and Joseph, 2000). The questionnaire had six sections and the sections included:

Section A: This included socio-demographic characteristics, to have an insight to the student's background; such as: student's sex, age, religion, ethnicity, family type, position in the family, parents living together.

Section B: This derived information on the prevalence of experience and perpetration of peer victimization in the last one year and within a lifetime. A person was considered a victim if he or she was exposed to at least one type of bullying once/more than once in the last 12 months, while he or she was considered a perpetrator if he or she repeated at least one type of violence more than once.

Section C: This derived information on types of peer victimization experience. Students were presented with nineteen items and asked to indicate how frequently they had experienced each (Not at all, once, more than once). This included the physical acts of violence such as slapping, pushing, pinching, kicking, verbal types which included cursing, shouting, teasing, mimicking. The psychological form which included gossips, rumours, being mean, and the social type of victimization which included peer pressure, taunting, threats and ganging up against other students.

Section D: Factors associated with experiencing peer victimization which included questions on physical appearance such as height and weight, lack of assertiveness, insecure personality and peer rejection.

Section E: Factors associated with perpetration of peer victimization such as history of parent maltreatment, history of violence in the family, for popularity, to boost self-esteem, to conceal shame and jealousy were documented.

Section F: Perceived health consequences which include physical illness such as swollen eyes, bruises. Psychological consequences such as loneliness, depression, low self-esteem, anxiety were explored.

The questionnaire also contained open-ended free response question one of which asked the students what they thought could be done in their schools to stop bullying.

3.9 STUDY VARIABLES

Dependent variables included:

1. The experience of peer victimization (yes/no)
2. The perpetration of peer victimization (yes/no).

Independent variables included:

Correlates of peer victimization which included

1. Factors associated with experiencing peer victimization which included physical appearance such as height and weight, lack of assertiveness, insecure personality and peer rejection.
2. Factors associated with perpetration of peer victimization which included history of parent maltreatment, history of violence in the family, for popularity, to boost self-esteem, to conceal shame and jealousy.

3.10 DATA MANAGEMENT AND ANALYSIS

Questionnaires were inspected daily to identify and correct errors and to ensure they were properly filled. Results from the field were compiled and recorded daily. Data was entered, cleaned, coded and analysed using the Statistical Package for Social Science (SPSS) version 15.0. Descriptive statistics were summarized using proportions, bar graphs and frequency tables. The ages of the respondents were coded to two categories (10-12 and 13-15 years).

Frequencies were generated and chi square tests of association was carried out between selected socio demographic characteristics, factors associated with peer victimization experience and perpetration (independent variables) and the experience and perpetration of peer victimization (outcome variables).

Multivariate analysis was then carried out among the significant variables to determine the degree of association.

3.13 ETHICAL CONSIDERATIONS

Ethical approval was obtained from the UI/UCH Institutional Review Committee (IRC).

Confidentiality of data

Informed consent was obtained after provision of clear and complete information about the study procedures. Confidentiality of information disclosed by respondents was strictly ensured and maintained throughout the study. Names were not written on questionnaires and information was not used for non-research purpose.

Disclosure of information

All participants were duly informed of the research processes before commencement.

Beneficence to participants

Incentive, (a biro) was given to each participant. In addition, results of the study was communicated to Ministry of Health and Education, to address experience and/or perpetration of victimization in schools.

Non-maleficence

This study caused no harm and only 15 to 20 minutes of the respondents' time was required to fill the questionnaire. And efforts were made to avoid disrupting students' lectures as questions were asked.

Rights to decline/ withdraw from study

Participants were free to withdraw from the study at any point in time.

CHAPTER FOUR

4.0

RESULTS

This chapter presents the results of the cross-sectional study described in chapter 3. The research concentrated on young adolescents (10- 15years) currently in junior classes in Public Secondary Schools. The results from the questionnaire survey included information on socio-demographic characteristics of the respondents; the prevalence, types and factors associated with peer victimization experience and perpetration. Health consequences of peer victimization and suggestions to reduce peer victimization among adolescents are also included in this chapter.

4.1 Socio - demographic characteristics of respondents

Tables 1 show that out of the 850 respondents, more than half (68.5%) were 13 to 15 years of age and 31.5% were aged 10 to 12 years. About 51.4% were males compared to 48.6% females. Majority (45.9%) of the respondents were in JSS 2, 33.4% were in JSS 3 while 20.7% were in JSS 1. More than half of the respondents (85.9%) were Yoruba's, followed by Igbos (10.9%). Most (68.0%) of them were Christians compared to 31.5% who were Muslims.

Table 2 show that few (32.2%) of the respondents were from polygamous homes and majority (67.8%) were not. About 89.2% of the respondents' parents were alive compared to 10.8% whose parents were no more alive.

Table 1: Frequency distribution of respondent's socio-demographic characteristics

Variables	Frequency (N=850)	Percentage (%)
Age group (in years)		
10-12	266	31.5
13-15	578	68.5
Gender		
Male	437	51.4
Female	413	48.6
Class		
JSS 1	176	20.7
JSS 2	390	45.9
JSS 3	284	33.4
Ethnicity		
Yoruba	730	85.9
Igbo	93	10.9
Hausa	16	1.9
Others	11	1.3
Religion		
Christianity	578	68.0
Islam	268	31.5
Others	4	0.5

Table 2: Frequency distribution of respondents' parent and family background

Variables	Frequency (N=850)	Percentage (%)
Polygamous home		
Yes	274	32.2
No	576	67.8
Parents live together		
Yes	631	74.2
No	219	25.8
Parents alive		
Yes	758	89.2
No	92	10.8
Position		
First	286	33.6
Second	207	24.4
Third	153	18.0
Fourth	131	15.4
Fifth	31	3.6
Sixth	26	3.1
Seventh	7	0.8
Ninth	2	0.2

4.2: Proportion of students who experienced peer victimization among adolescents within 12 months preceding the survey

Figure 1 shows that out of the total 850 of respondents, 93.8% males as compared to 93.7% females had experienced physical victimization; 74.6% males compared to 83.5% females had experienced verbal peer victimization, while 90.4% males compared to 92.3% females had experienced psychosocial form of peer victimization within the past 12 months.

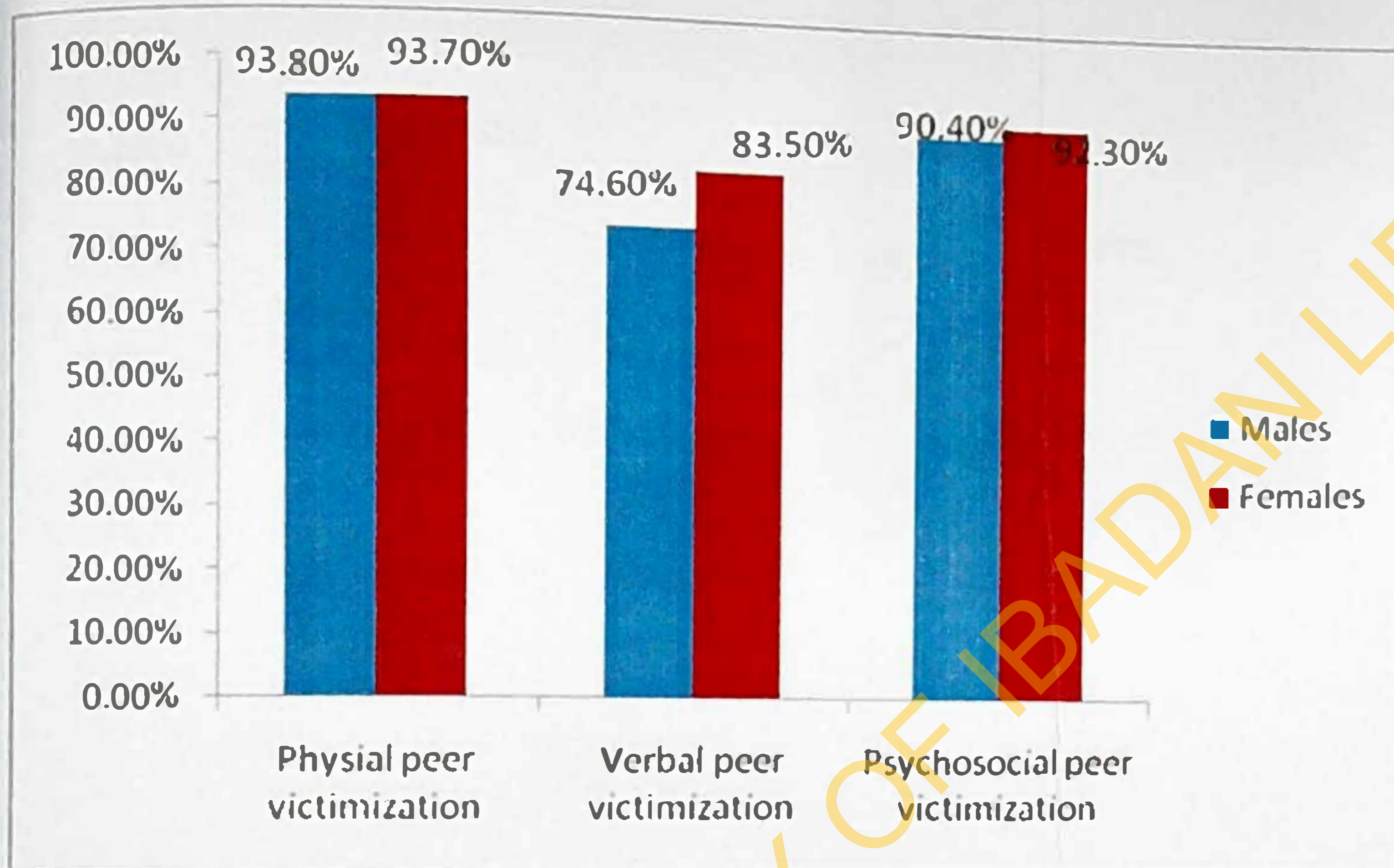


Figure 4.1: Proportion of respondents who experienced peer victimization within the past 12 months

4.3: Proportion of students who experienced peer victimization within lifetime

About 92.7% of the total respondents who were males compared to 94.7% females had experienced physical peer victimization; 80.8% males as compared to 82.6% females experienced verbal peer victimization and 89.1% males compared to 90.1% females experienced psychosocial form of peer victimization within lifetime.

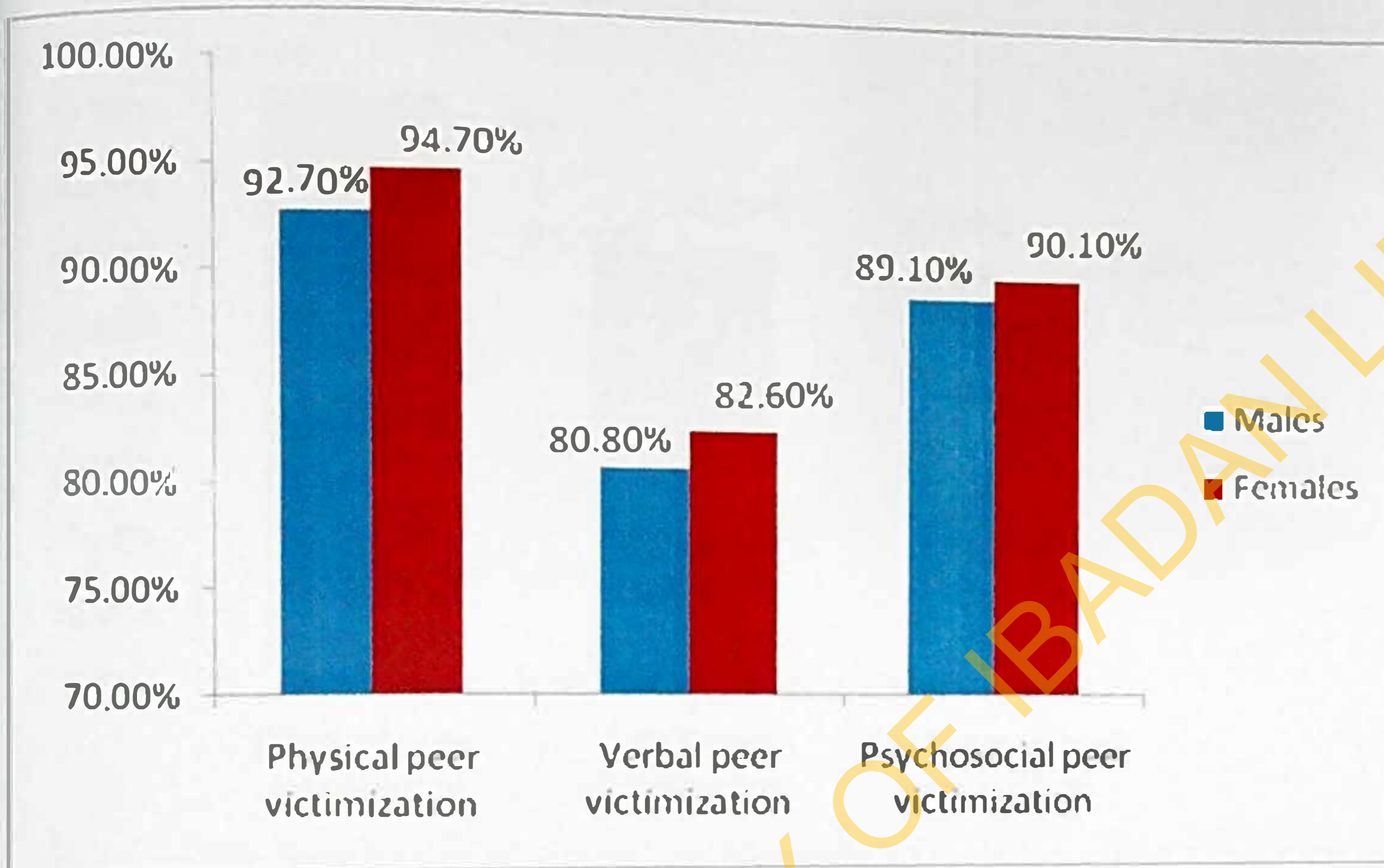


Figure 4.2: Proportion of respondents who experienced peer victimization within lifetime

4.4: Proportion of perpetration of peer victimization among adolescents in the selected schools within the past 12 months

About 83.5% males as compared to 82.5% females of the total respondents were perpetrators of physical peer victimization; 61.8% males compared to 62.1% females had victimized their peers verbally and 60.8% males compared to 57.5% females has been involved in the perpetration psychosocial form of peer victimization within the past 12 months.

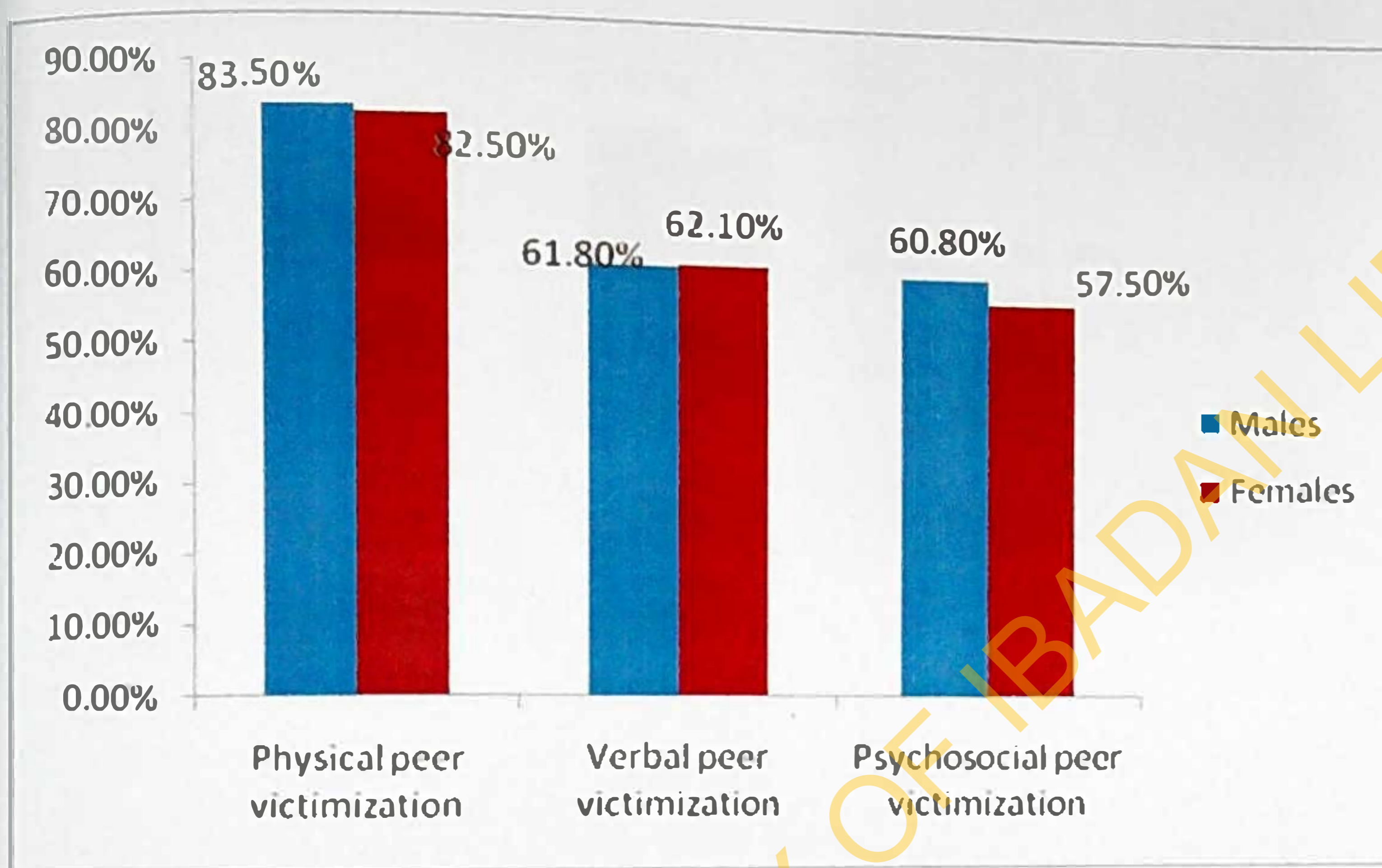


Figure 4.3: Proportion of respondents who perpetrated victimization within the past 12 months

4.5: Proportion of perpetration of peer victimization among adolescents in the selected schools within their lifetime

Of the total male respondents, 77.2% were involved in the perpetration of physical peer victimization as compared to 78.2% females; 82.5% males as compared to 79.4% females had been involved in the perpetration of verbal peer victimization and 63.0% males compared to 59.8% females were involved in perpetration of psychosocial form of peer victimization.

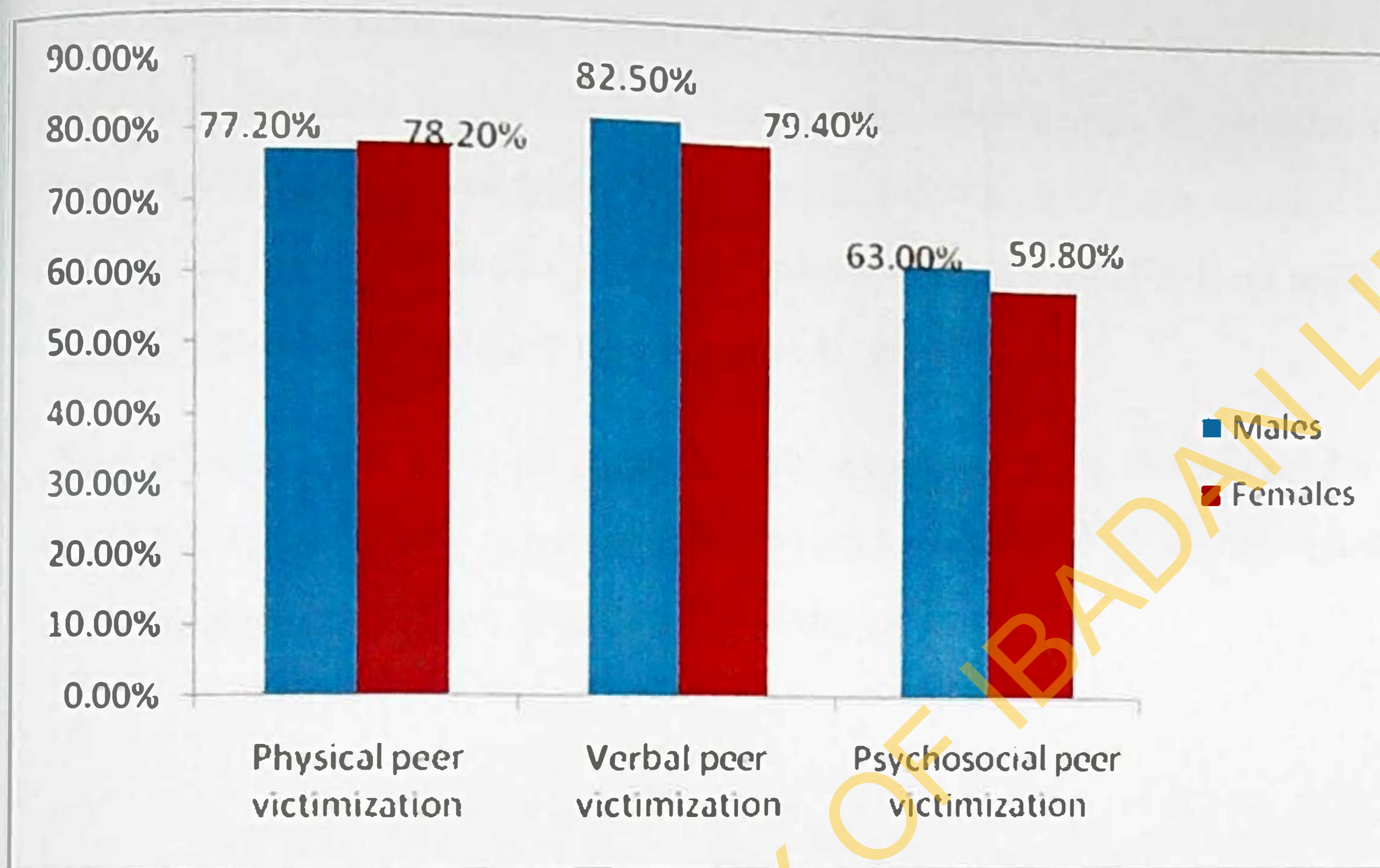


Figure 4.4: Proportion of respondents who perpetrated peer victimization within their lifetime

4.6 Types of victimization experienced by adolescents in 12 months preceding the survey

Table 3 summarizes the responses of the students on the types of peer victimization they have experienced within the past 12 months. The physical peer victimization experienced by respondents within the last one year showed that about (60%) had been pushed at least once within the last one year. This is followed by (54.7%) of the respondents indicating that they had been slapped at least once within the past 12 months. Furthermore, (51.4%) of the respondents indicated that they had been punched at least once within 12 months. Of the total respondents who experienced verbal peer victimization, (48.4%) had been shouted on by peers at least once within one year, followed by (47.1%) who had been cursed at least once within the past one year and then teasing (40.2%) within the past 12 months.

The psychosocial form of victimization experienced by the respondents was majorly stealing (62.8%), followed by rumours (54.6%) and about 42.0% of the respondents had experienced meanness by their peers at least once in the past one year.

Table 3: Types of victimization experienced among adolescents in one year preceding the survey

Variables	Yes N(%)	No N(%)	Total N(%)
Physical			
Punch	437(51.4)	411(48.4)	848(100)
Push	510(60.0)	340(40.0)	850(100)
Kick	393(46.2)	457(53.8)	850(100)
Pinch	426(50.1)	422(49.6)	850(100)
Beat	255(30.0)	594(69.9)	849(100)
Slap	465(54.7)	385(45.3)	850(100)
Fight	453(53.3)	396(46.6)	849(100)
Damage	350(41.2)	499(58.7)	849(100)
Verbal			
Shout	411(48.4)	439(51.6)	850(100)
Cursing	400(47.1)	449(52.8)	849(100)
Teasing	342(40.2)	505(59.4)	847(100)
Mimicking	198(23.3)	652(76.7)	850(100)
Psychosocial			
Set up for trouble	309(36.4)	540(63.5)	849(100)
Gang up against others	420(49.4)	430(50.6)	850(100)
Being mean	357(42.0)	493(58.0)	850(100)
Stole	534(62.8)	316(37.2)	850(100)
Refused to talk	367(43.2)	482(56.7)	849(100)
Rumour	464(54.6)	386(45.4)	850(100)

4.7 Types of victimization experienced by adolescents within lifetime

Table 4 summarizes the responses of the students on the types of peer victimization they had experienced within their lifetime. The physical peer victimization experienced by respondents within their lifetime showed that about (65.8%) had been pushed at least once within lifetime, followed by (57.3%) of the respondents that had been punched at least once. Furthermore, (56.4%) of the respondents indicated that they had been pinched at least once within their lifetime. Of the total respondents who experienced verbal peer victimization, (55.1%) who had been cursed at least once within their lifetime followed by (54.8%) had been shouted upon by their peers at least once within their lifetime, and then teasing (52.0%) within lifetime.

The psychosocial form of victimization experienced by the respondents was mainly stealing (67.2%), followed by rumors (58.0%), about 53.1% of the respondents had been ganged up against at least once within lifetime.

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Table 4: Types of peer victimization respondents experienced within lifetime

Variables	Yes N(%)	No N(%)	Total N(%)
Physical			
Punch	486(57.3)	362(42.7)	848(100)
Push	559(65.8)	289(34)	850(100)
Kick	461(54.2)	389(45.8)	850(100)
Pinch	479(56.4)	371(43.6)	850(100)
Beat	322(37.9)	525(61.8)	847(100)
Slap	470(55.3)	380(44.7)	850(100)
Fight	578(68.2)	269(31.8)	850(100)
Damage	472(55.5)	375(44.3)	847(100)
Verbal			
Shout	466(54.8)	384(45.2)	850(100)
Cursing	468(55.1)	382(44.9)	850(100)
Teasing	251(29.5)	599(70.5)	850(100)
Mimicking	442(52.0)	408(48.0)	850(100)
Psychosocial			
Set up for trouble	389(45.8)	461(54.2)	850(100)
Gang up against others	450(53.1)	398(46.9)	848(100)
Being mean	410(48.2)	440(51.8)	850(100)
Stole	571(67.2)	279(32.8)	850(100)
Refused to talk	415(48.8)	435(51.2)	850(100)
Rumors	493(58.0)	357(42.0)	850(100)

4.8 Factors promoting peer victimization experience

The respondents perceptions of factors responsible for peer victimization experience are shown in Table 5, majority (82.5%) felt insecure, physical appearance (54.9%), followed by 35.6% who were rejected by peers and (7.5%) who had history of family violence.

Table 5: Frequency distribution of factors responsible for one or more form of peer victimization experience

<u>Variables</u>	<u>Yes N(%)</u>	<u>No N(%)</u>	<u>Total N(%)</u>
Insecure personality	701(82.5)	149(17.5)	850(100)
Physical appearance	467(54.9)	383(45.1)	850(100)
Peer rejection	302(35.6)	546(64.4)	848(100)
Family violence	64(7.5)	786(92.5)	850(100)

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4.9 Association between factors predisposing to peer victimization experience and the experience within the past 12 months

Table 6 shows that a higher proportion of respondents aged 13 to 15 years (99.1%) compared to 97% of respondents aged 10 to 12 years had experienced one form of peer victimization or the other in the last 12 months. Of the total respondents, 97.5% males as compared to 99.3% females had experienced peer victimization in the last 12 months. About (99.1%) of respondents who had an insecure personality compared to those who felt secure (0.9%) experienced one form of peer victimization or the other within the past 12 months. Respondents who had history of family violence (100%) compared to those who had no history of family violence (0.0%) had experienced one form of peer victimization or the other within the past 12 months. There was a statistical significant association between peer rejection and one or other forms of peer victimization experience ($P = 0.024$). Respondents who were rejected by their peers (99.7%) compared to respondents who were not (0.3%) had experienced one form of peer victimization or the other within the past 12 months. However, chance is an unlikely explanation for this observation.

Table 6: Factors associated with peer victimization experience in 12 months preceding the survey

Variables	Experience of Peer Victimization in the last 12 months			X ²	df	P value
	Yes	No	Total			
Age (in years)						
10-12	258(97%)	8(0.3%)	366(100)	*5.514	1	0.031
13-15	573(99.1%)	5(0.9%)	578(100)			
Sex						
Males	426(97.5%)	11(2.5%)	437(100)	*4.203	1	0.001
Females	410(99.3%)	3(0.7%)	413(100)			
Religion						
Christianity	571(98.8%)	7(1.2%)	578(100)	*14.752	1	0.057
Islam	262(97.8%)	6(2.2%)	268(100)			
Insecure personality						
Yes	695 (99.1%)	6(0.9%)	701(100)	*15.451	1	0.001
No	141(94.6%)	8(5.4%)	149(100)			
Physical appearance						
Yes	460(98.5%)	7(1.5%)	467(100)	*0.140	1	0.790
No	376(98.2%)	7(1.8%)	483(100)			
Peer rejection						
Yes	301(99.7%)	1(0.3%)	302(100)	*5.032	1	0.024
No	533(97.6%)	13(2.4%)	546(100)			
Family violence						
Yes	64(100%)	0(0%)	64(100)	*1.159	1	0.616
No	772(98.2%)	14(1.8%)	786(100)			

*Fishers exact test was reported

4.10 Association between factors predisposing to peer victimization experience and the experience within lifetime

Table 7 shows that about 99.2% of respondents aged 10 to 12 years compared to 98.6% of respondents aged 13 to 15 years had experienced one or other forms of peer victimization within their lifetime. A lower proportion of male respondents (97.7%) as compared to female respondents (99.8%) had experienced peer victimization within their lifetime. This was statistically significant ($P = 0.012$). There was no statistically significant association between peer rejection and peer victimization experience at ($P = 1.000$). Respondents who were rejected by their peers (98.7%) compared to respondents who were not (98.7%) had experienced peer victimization at least once; within their lifetime. A higher proportion of respondents who had insecure personality (99.1%) compared to those who felt secure (0.9%) had been victimized by peers within their lifetime.

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Table 7: Factors associated with peer victimization experience within lifetime

Variables	Experience of Peer Victimization within lifetime			X ²	df	P value
	Yes	No	Total			
Age						
10-12	264(99.2%)	8(0.2%)	268(100)	*1.386	1	0.556
13-15	570(98.6%)	8(1.4%)	578(100)			
Sex						
Yes	427(97.7)	10(2.3%)	437(100)	*6.960	1	0.012
No	412(99.8%)	1(0.2%)	413(100)			
Religion						
Yes	571(98.8%)	7(1.2%)	578(100)	*0.013	1	1.000
No	265(98.9%)	3(1.1%)	268(100)			
Insecure personality						
Yes	695 (99.1%)	6(0.9%)	701(100)	*6.011	1	0.029
No	144(96.6%)	5(3.4%)	149(100)			
Physical appearance						
Yes	461(98.7%)	6(1.3%)	467(100)	*0.001	1	1.006
No	378(98.7%)	5(1.3%)	383(100)			
Peer rejection						
Yes	298(98.7%)	4(1.3%)	302(100)	*0.003	1	1.000
No	539(98.7%)	7(1.3%)	546(100)			
Family violence						
Yes	64(100%)	0(0%)	64(100)	*0.907	1	1.000
No	775(98.6%)	11(1.4%)	786(100)			

*Fishers exact test reported

4.11 Determinants of peer victimization perpetration

The respondents' perceptions of factors responsible for peer victimization perpetration are shown in Table 8, more than half (54.3%) victimized their peers because of their bad temper. (53.3%) victimized their peers so as to boost self-esteem, followed by 40.9% who victimized peers to conceal shame. Few (21.1%) victimized due to jealousy.

Table 8: Frequency distribution of risk factors of peer victimization perpetration

<u>Variables</u>	<u>Yes N(%)</u>	<u>No N(%)</u>	<u>Total N(%)</u>
Boost self-esteem	449(53.3)	393(46.7)	842(100)
Popularity	237(28.0)	609(71.9)	846(100)
Conceal shame	347(40.9)	500(59.0)	847(100)
Attention	321(37.9)	525(62.0)	846(100)
Jealousy	179(21.1)	667(78.7)	846(100)
Bad temper	460(54.3)	387(45.7)	847(100)

4.12 Factors associated with perpetration of violence 12 months preceding the survey

Table 9 shows that about 87.2% of respondents aged 10 to 12 years compared to 91.7% of respondents aged 13 to 15 years had victimized their peers within their 12 months preceding the study. A lower proportion of male respondents (89.9%) as compared to female respondents (90.3%) had victimized their peers within their 12 months preceding the study. There was a statistically significant association between bad temper and perpetration of peer victimization ($P = 0.020$). Respondents who got angry easily (92.4%) compared to respondents who did not (7.6%) had victimized their peers at least once within the past 12 months. A higher proportion of respondents who wanted to be popular (89.9%) compared to those who did not (10.1%) had victimized others at least once in the past 12 months.

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Table 9: Factors affecting occurrence of peer victimization perpetration within the past 12 months preceding the survey

Variables	Perpetration of Peer Victimization within the past 12 months			X ²	df	P value
	Yes	No	Total			
Age (in years)						
10-12	232(87.2%)	34(12.8%)	266(100)	*0.439	1	0.765
13-15	528(91.7%)	48(8.3%)	577(100)			
Sex						
Maies	392(89.9%)	44(10.1%)	4369(100)	*0.035	1	(0.909)
Female	372(89.9%)	40(9.7%)				
Boost esteem						
Yes	411 (91.7%)	37 (8.3%)	449(100)	*2.075	1	0.161
No	349(88.8%)	44(11.2%)	393(100)			
Popularity						
Yes	213(89.9%)	24(10.1%)	237(100)	*0.037	1	0.898
No	550(90.3%)	59(9.7%)	609(100)			
Conceal shame						
Yes	318(91.6%)	29(8.4%)	347(100)	*1.383	1	0.290
No	446(89.2%)	54(10.8%)	500(100)			
Attention						
Yes	287(89.7%)	33(10.3%)	320(100)	*0.226	1	0.634
No	477(90.7%)	49(9.3%)	526(100)			
Jealousy						
Yes	166(92.7%)	13(7.3%)	179(100)	* 1.652	1	0.257
No	598(89.5%)	70(10.5%)	668(100)			

Bad temper

Yes	425(92.4%)	35(7.6%)	500(100)	*5.526	1	0.020
No	338(87.6%)	48(12.4%)	386(100)			

*Fishers exact test reported

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4.13 Factors associated with perpetration of peer victimization within a lifetime

Table 10 shows that there was a statistically significant association between attention and perpetration of peer victimization ($P = 0.001$). Respondents who wanted attention (96.6%) compared to respondents who did not (3.4%) had victimized their peers at least once within their lifetime. However, chance is an unlikely explanation for this observation. A higher proportion of respondents who wanted to be popular (97.9%) compared to those who did not (2.1%) had victimized others at least once within their lifetime. A lower proportion of the respondents (90.6%) aged 10 to 12 years compared to 93.9% of respondents aged 13 to 15 years had victimized their peers at least once within their lifetime.

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Table 10: Factors associated with perpetration of peer victimization within lifetime

Variables	Perpetration of Peer Victimization within lifetime		Total	X ²	df	P value
	Yes	No				
Age (in years)						
10-12	241(90.6%)	25(9.4%)	266(100)	*3.034	1	0.085
13-15	541(93.9%)	35(6.1%)	575(100)			
Sex						
Males	401(92.2%)	34(7.8%)	435(100)	*0.519	1	0.508
Females	386(93.5%)	27(6.5%)	413(100)			
Religion						
Christianity	538(93.4%)	38(6.6%)	576(100)	*0.719	1	0.391
Islam	246(91.8%)	22(8.6%)	268(100)			
Boost self-esteem						
Yes	433(96.4%)	16(3.6%)	449(100)	*17.597	1	0.000
No	349(89.0%)	43(11.6%)	392(100)			
Popularity						
Yes	232(97.9%)	5(2.1%)	237(100)	*12.404	1	0.000
No	554(91.0%)	55(9.0%)	609(100)			
Conceal shame						
Yes	339(97.7%)	8(2.3%)	347(100)	*20.391	1	0.000
No	448(89.6%)	52(10.4%)	500(100)			
Attention						
Yes	309(96.6%)	11(3.4%)	320(100)	*9.922	1	0.001
No	478(90.9%)	48(9.1%)	526(100)			

Jealousy

Yes	175(98.3%)	3(1.7%)	178(100)	*9.978	1	0.001
No	612(91.5%)	57(8.5%)	669(100)			

Bad temper

Yes	441(95.9%)	19(4.1%)	460(100)	*13.422	1	0.000
No	345(89.4%)	41(10.6%)	386(100)			

*Fishers exact test reported

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Jealousy

Yes	175(98.3%)	3(1.7%)	178(100)	*9.978	1	0.001
No	612(91.5%)	57(8.5%)	669(100)			

Bad temper

Yes	441(95.9%)	19(4.1%)	460(100)	*13.422	1	0.000
No	345(89.4%)	41(10.6%)	386(100)			

*Fishers exact test reported

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4.14 Health consequences of peer victimization among adolescents

Table 11 shows that about 54% of the respondents who had ever experienced one or more forms of peer victimization had gotten injured compared to 46% who had not. About half of the respondents (50.4%) had headache after being victimized by peers compared to 47.6% who did not. Few (16.3%) of them were afraid of going to school compared to 83.2% who were not.

Table 11: Frequency distribution showing health consequences of peer victimization

Variables	Yes N(%)	No N(%)	Total N(%)
School absenteeism	139(16.8)	687(83.2)	826(100)
Feel depressed	311(37.3)	522(62.7)	833(100)
Feel uneasy	305(36.2)	538(63.8)	843(100)
Feel alone	357(42.9)	476(57.1)	833(100)
Friends ran away	190(22.7)	647(77.3)	837(100)
Headache	437(52.4)	397(47.6)	834(100)
Injury	459(54.0)	391(46.0)	850(100)

4.15: Suggestions to reduce peer victimization in schools

Table 12 shows that out of the 850 respondents, (36.4%) suggested that discipline will help reduce victimization among peers in schools. About 33.5% felt reporting to higher authorities will help reduce peer victimization among adolescents in schools. Few (2.6%) of the respondents suggested that educating students on peer victimization will help reduce it in schools.

Table 12: Frequency distribution showing the suggestions for reducing peer victimization in schools

Variables	Frequency (N=850)	Percentage (%)
Discipline	309(36.4)	36.4
Report to higher school authorities	285(33.5)	33.5
Counsel	188(22.1)	22.1
Expulsion	6(7.0)	7.0
Publicize school rules	40(4.7)	4.7
Educate on victimization	22(2.6)	2.6

4.16 Predictors of peer victimization experience among adolescents within the past 12 months

Variables significant at 10% were included in logistic regression model. Hosmer Lemeshow goodness of fit test (0.405) was used to determine if the model adequately fits the data.

Table 13 shows that respondents aged 10-12 years were about 5.8 times less likely as compared to respondents aged 13-15 years to have experienced victimization by peers. However, this observed result is statistically significant ($P=0.006$).

Respondents who had insecure personality were about 5.8 times less likely compared to respondents who felt secure, to have experienced peer victimization. This observed association was statistically significant (OR 0.172; 95%CI 0.52- 0.569).

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Table 13: Logistic regression of predictors of peer victimization experience in the past 12 months preceding the survey

Variables	Odds Ratio	95% CI	P-value
Age (in years)			
10-12	0.171	0.049- 0.597	0.006
13-15	1.000		
Sex			
Males	0.295	0.076- 1.153	0.079
Females	1.000		
Religion			
Christianity	2.095	0.636- 6.896	0.224
Islam	1.000		
Peer rejection			
Yes	0.165	0.020- 1.339	0.092
No	1.000		
Insecure personality			
Yes	0.172	0.52 – 0.569	0.004
No	1.000		

4.17 Predictors of peer victimization experience among adolescents within lifetime

Variables significant at 10% were included in logistic regression model. Hosmer Lemeshow goodness of fit test (0.683) was used to determine if the model adequately fits the data.

Table 12 shows that male respondents were about 9.1 times less likely compared to female respondents to have experienced peer victimization within lifetime. This observed association was statistically significant ($P= 0.036$; OR 0.109; 95% CI 0.014- 0.861).

Respondents who had insecure personality were about 3.7 times less likely compared to respondents who did not feel insecure to have experienced one or other forms of peer victimization within lifetime. However, this result is statistically significant (OR 0.269; 95% CI 0.080- 1.901).

Table 13: Logistic regression of predictors of life peer victimization experience

<u>Variables</u>	<u>Odds Ratio</u>	<u>95% CI</u>	<u>P-value</u>
Sex			
Males	0.109	0.014- 0.861	0.036
Females	1.000		
Insecure personality			
Yes	0.269	0.080 – 0.901	0.033
No	1.000		

4.18: Predictors of peer victimization perpetration within the past 12 months

Variables significant at 10% were included in logistic regression model. Hosmer Lemeshow goodness of fit test (0.880) was used to determine if the model adequately fits the data.

Respondents aged 10-12 were about 1.6 times less likely as compared to respondents aged 13-15 years to have victimized their peers. However, this observed result is statistically significant ($P = 0.042$; OR 0.614; 95% CI 0.384- 0.981).

The odds of those who got angry easily were about 2 times less likely compared to those who did not have bad temper to have victimized their peers. However, this observed difference is statistically significant (OR 0.585; 95% CI 0.367- 0.932).

Table 14: Logistic regression of predictors of peer victimization perpetration within the past 12 months

Variables	Odd's Ratio	95% CI	P-value
Age			
Yes	0.614	0.384 – 0.981	0.042
No	1.000		
Bad temper			
Yes	0.585	0.367 – 0.932	0.024
No	1.000		

4.19: Predictors of peer victimization perpetration within the lifetime

A higher likelihood of respondents aged 10-12 years were about 1.6 times less likely compared to those aged 13-15 years to have victimized their peers. However, this result is statistically significant ($P= 0.069$).

The odds of those who wanted attention was about 1.2 times less likely compared to those who did not want attention to have victimized their peers. However, this observed difference is statistically significant ($P = 0.522$; OR 0.787)

Respondents who had bad temper were about 2.1 times less likely as compared to respondents who do not get angry easily to have victimized their peers. However, this observed result is statistically significant (OR 0.473; 95%CI= 0.261- 0.860).

Of the total respondents, those who were jealous were about 3.9 times less likely than those who were not, to have victimized their peers. However, this observed result is statistically significant ($P= 0.064$; 95%CI= 0.058- 1.086).

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Table 15: Logistic regression of predictors of peer victimization perpetration within lifetime

Variables	Odds Ratio	95% CI	P-value
Age			
10- 12	0.594	0.338- 1.042	0.069
13- 15			
Boost self- esteem			
Yes	0.636	0.333- 1.215	0.171
No	1.000		
Conceal shame			
Yes	0.331	0.140- 0.781	0.012
No	1.000		
Attention			
Yes	0.787	0.379 – 1.636	0.522
No	1.000		
Bad temper			
Yes	0.473	0.261- 0.860	0.014
No	1.000		
Popularity			
Yes	0.491	0.181- 1.332	0.163
No			
Jealousy			
Yes	0.252	0.058- 1.086	0.064
No	1.000		

CHAPTER FIVE

5.0 DISCUSSION

5.1 Socio- demographic characteristics of the respondents

This study attempted to document the prevalence and correlates of peer victimization among a sample of Nigerian secondary school students. The findings in this study are an additional confirmation that school violence exists in most schools irrespective of the philosophies in operation in the school.

Results shows a higher proportion of bullies were from the age range 13-15 years. These findings support those of Hoover et al., 1992 and Boulton et al., 1992 who found an increase in bullying with increase in age. This is also comparable with studies conducted in the past that showed older students bullied at a higher level than the younger ones (Olweus, 1993; Asamu, 2006). Also, a study conducted by Omoteso, 2010 in Ibadan concurred with these findings.

Across gender, the results of this study suggest that peer victimization was higher in girls as compared to boys. Specifically, female participants experienced an overall higher level of physical and verbal victimization than males. These results are not in line with earlier researches conducted by Panayiotis et al., 2010 and Glenn, 2011 who found that boys had more tendencies to be victims of bullying incidents than girls. However, there is need for caution in interpreting this result. This is because in the Nigeria socio-cultural setting, parents expect male children to prove their manliness by tolerating peer victimization without complaints much more than their female counterparts. It is therefore expected that the lower level of peer victimization reported by male students in this study might be a reflection of the socio-cultural expectation which tends to make male children report that they had not been victimized by their peers. Experience of bullying can have underlying effect/ foundation for them being at risk of a lot of things when they grow up/in future such as in a relationship where the male takes advantage over the female.

5.2 Prevalence and types of peer victimization among adolescents

In this study, it was found that peer victimization is a prevalent problem affecting over 90 percent of the students. The prevalence of peer victimization is similar to the reported estimates in other studies of peer victimization among young adolescents. A lifetime prevalence of

bullying behaviour in a study carried out in Ibadan was 88.1% among the students aged 10 – 15 years (Omoteso, 2010). This is also comparable with another study carried out in Edo State; four in every five participants 78% reported being bullied to some degree and 85% of the children admitted to bullying others at least once (Egbochukwu, 2010).

However, the school plays a crucial role in the socialization of children because the family alone cannot adequately fulfil the role of training children for certain adult responsibilities (Salawu, 2003). The socialization role of the school is not limited to provision of skills and practical knowledge. It also involves citizenship education in forms of positive interpersonal relationship, patriotism, commitment, dedication, selflessness, honesty and sincerity. It is therefore essential for schools to develop and review school policy to address bullying, consistently enforce school policy, promote communication and provide educational services (for example guidance services) staff training and favourable school climate.

Furthermore, the prevalence of peer victimization in schools from this study agreed with the findings of Ates et al., 2010 which showed that peer victimization is a relatively common and frequently experienced form of violence. Also, results from a study conducted in Benin, Edo State by Egbochukwu, 2007, it was found that 78% of the children have been victims of bullying on at least one occasion and 71% have lashed out at others at least once. Additionally, results from the study of Baldry et al., 2004 indicated that more than half of the students reported being victimized. Also in the Turkish study (Kepenekci and Cinkir, 2006) found a 100% involvement in some form of victimization.

Results indicate that peer victimization among adolescents broadly manifests itself in forms such as physical, verbal and psychosocial forms. It was shown that physical victimization was the most frequent experience with respondents. In this study, 93.6% of the respondents had taken part in physical peer victimization, 81.6% were involved in verbal peer victimization and 89.9% had taken part in psychosocial victimization. The figures are higher than that observed from a study conducted in Nigeria by Omoteso, 2010 who reported that 46.5% of the students had taken part in physical bullying, 58.2% had been involved in verbal bullying and 64.7% had taken part in relational bullying. However, this is comparable with Heather et al., 2011 who reported physical assault as the most common form of peer-perpetrated victimization experienced by over

22% of the entire sample experiencing at least one type of violence exposure. Physical violence is common in schools because it is considered a normal child's play. However, educating adolescents on consequences of victimization and publicizing rules to enforce it can help reduce the prevalence of victimization among peers.

This was followed by a higher proportion of psychosocial experience which showed that the students were being made fun of because of their appearance or their inability to speak good English. These reactions can make victims of peer victimization to become afraid going to school because the school environment is no more conducive and this can make the victims to become truants. However, discipline is very important to life. A disciplined child is a trained child. It is a very necessary condition for any venture to be successful.

5.3 Factors associated with peer victimization experience

About fifty four percent of the respondents experienced victimization from peers because of their physical appearances. This is comparable with a study carried out by Glenn, 2011 who reported that the weakness and small physical stature of many children puts them at greater risk of victimization. Also, the respondents who were victimized by their peers due to their insecure personality agreed with the findings of Adefunke, 2010 that more than 50% of the respondents have been hurt or have experienced pains from fellow students as a result of insecure personality. Consequently, building self confidence and assertiveness skills among adolescents may be an important factor in the reduction of peer victimization.

5.4 Factors associated with peer victimization perpetration

Results revealed non-significant differences between males (92.2%) and females (93.5%) in victimization which is confirmed by previous studies conducted by (Dill et al., 2004 and Fekkes, et al., 2004) and a more recent study conducted by Yaacob et al., 2008) in Malaysia. In this study, a higher proportion of respondents who wanted to be popular (99.6%) as compared to those who did not (0.4%) had victimized others at least once in their lifetime. This agreed with a study carried out by Dewale, 2004 who said bullies engage in the act in order to establish power

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and control over their colleagues, whom they consider to be weaker. Therefore, males also experience violence and they need more attention.

5.5 Health consequences of victimization

Some students, (22.7%) became unpopular because their friends ran away from them. This is comparable with a study by Drake 2003 who found that victims of bullies tend to be less popular in school than other students not involved in bullying. However, growing literature document that child victimization has grave short- and long term effects on children's mental health like being fearful of school, inhibition of their learning potentials (Adefunke, 2010), maladjustments to social environment (Card and Hodges, 2008) worst performance on indicators of student well-being and increased risk of depression (Felix et al., 2009).

As a result of being bullied, 16.3% of the respondents avoided school. This is consistent and comparable with a study by Rigby, 1999 who reported that 16% boys and 31% girls reported being absent from school in an attempt to avoid being victimized.

The psychological scars left by bullying often endure for years. For instance, the feelings of isolation and the loss of self-esteem that victims experience seem to last into adulthood (Clarke and Kiselica, 1997). Victimized children are at risk of a variety of negative outcome^s. They are more anxious and insecure; have lower self-esteem, are lonely, more likely to be rejected by their peers, and are depressed than non-victimized children (Farrington, 1993; Craig, 1998; and Boulton., et al 1992).

Although studies on anti-bullying programs are scarce, evaluation data from other countries suggest that adopting a comprehensive approach to reduce bullying at school can change students' behaviors and attitudes, reduce other antisocial behaviors, and increase teacher^s willingness to intervene (Susan et al. 1998).

5.6 Suggestions to reduce victimization among adolescents in schools

Some (2.6%) of the respondents suggested that educating students on peer victimization will help reduce it in schools. This is comparable with a study by Omotoso, 2010 who suggested that there should be school-wide education, training and bullying prevention programmes.

5.7 Limitation of the study

The study was based on self-report by respondents. There is the possibility of over reporting experience of victimization and under reporting perpetration of victimization by the students. However, to limit this, questions were framed in such a way that correct information was generated. Anonymity also helped to ensure accurate information.

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CHAPTER SIX

6.0 RECOMMENDATIONS AND CONCLUSION

Bullying and victimization of students in schools have received a great deal of deserved attention. The more we learn about creating safe and civil learning environments the more we understand that from the student's perspective it is a complex social-emotional phenomenon that plays out differently on an individual level. The school counsellors have important roles to play since students have a lot of confidence in them (Robinson and Maines, 1994).

In conclusion, as one of the most persistent and destructive forms of aggression in the continuum of violence, bullying deserves the attention of everyone. Reducing and preventing bullying requires the joint efforts of administrators of schools, teachers and students. Thus, for bullying to be reduced to its barest minimum;

- The schools and homes should work collaboratively to incorporate good values in their children/students.
- The teachers should have life building skills and knowledge in classroom management and control. As a result, a student friendly environment should be established in the classroom.
- There should be school-wide education, training and bullying prevention programmes to re-orientate the students since they see it as a normal.
- The schools should provide counselling and support for students at risk of being involved in bullying.
- Students who bully often need rehabilitation, so it is important to in reducing the prevalence (Omoteso,2010).

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Appendix 1

Questionnaire

PREVALENCE AND CORRELATES OF PEER VICTIMIZATION AMONG ADOLESCENTS IN PUBLIC SECONDARY SCHOOLS IN SAGAMU LOCAL GOVERNMENT AREA, SAGAMU, OGUNSTATE.

Dear Student,

I am a postgraduate student of Epidemiology, Faculty of Public Health, University of Ibadan. This questionnaire is designed to find out the "Prevalence and correlates of Peer Victimization among Adolescents in Public Secondary Schools in Sagamu Local Government Area".

The information needed here is purely for academic purpose. **DO NOT** write your name. The data collected will be treated with utmost respect. Answer the questions based on what you really know and do. Completing the questionnaire is voluntary. Whether or not you answer the questions will not affect your grade in this class. You are hereby invited to participate in the study and encouraged to give **HONEST** and **ACCURATE** information. Thank you.

FOR OFFICE USE ONLY

SERIAL NUMBER _____

I agree to be part of this study (tick) []

INSTRUCTION: PLEASE TICK [] THE APPROPRIATE BOX WHERE APPLICABLE

SECTION A: SOCIODEMOGRAPHIC CHARACTERISTICS

1. Age: _____ years
2. Sex: male Female
3. Religion: Christianity Islam Others (specify) _____
4. Ethnicity: Yoruba Igbo Hausa Others (please specify) _____
5. What class are you now? JSS 1 JSS 2 JSS 3
6. Are both your parents alive? Yes No
7. If no, who is Late? Father Mother Both
8. Does your father have more than one wife presently? Yes No
9. If yes, how many? _____
10. Does your mother live with your father? Yes No

11. Who are you staying with presently? Both parents Father Mother Grandparents
Others (specify) _____

12. How many children does your mother have? _____

13. Of your mother's children, what position are you?
(a) First (b) second (c) third (d) fourth (e) others (specify) _____

14. What is the number of the following items that you have at home?

SN		YES	NO
1	A radio		
2	A television		
3	A motorcycle		
4	A fan		
5	A borehole		
6	Air conditioner (AC)		
7	A car		
8	A well		
9	A fridge		
10	A generator		

SECTION B: PREVALENCE AND TYPES OF PEER VICTIMIZATION EXPERIENCE WITHIN THE LAST ONE YEAR AND WITHIN LIFE TIME.

INSTRUCTION: PLEASE TICK [✓] THE APPROPRIATE BOX THAT APPLIES TO YOU

15. Which of the following has someone done to you and how often have they done it to you in the last 1 year?

SN		NOT AT ALL	ONCE	MORE THAN ONCE
1	A student called me bad names			
2	A student pushed me			
3	A student made fun of me because of the way I look			
4	A student made fun of me for some reasons such as my dirty uniform, I can't express myself in good English, I sleep in class when I'm being taught.			
5	A student punched me			
6	A student kicked me for no reason			
7	A student pinched me for no reason			
8	A student beat me up			
9	A student damaged my property deliberately			
10	A student tried to make my friends turn against me			
11	A student stole something from me			
12	A student refused to talk to me			
13	A student shouted me down			

14	A student set me up to get me into trouble			
15	A student said something that was not true about me			
16	A student slapped me			
17	A student forced me to fight			
18	Other students made me cry because of their wickedness			

INSTRUCTION: PLEASE TICK [v] THE APPROPRIATE BOX THAT APPLIES TO YOU

16. Which of the following has someone done to you and how often have they done it to you within your lifetime?

SN		NOT AT ALL	ONCE	MORE THAN ONCE
1	A student called me bad names			
2	A student pushed me			
3	A student made fun of me because of the way I look			
4	A student made fun of me for some reasons such as my dirty uniform, I can't express myself in good English, I sleep in class when I'm being taught.			
5	A student punched me			
6	A student kicked me for no reason			
7	A student pinched me for no reason			
8	A student beat me up			
9	A student damaged my property deliberately			
10	A student tried to make my friends turn against me			
11	A student stole something from me			
12	A student refused to talk to me			
13	A student shouted at me			
14	A student set me up to get me in trouble			
15	A student said something that was not true about me			
16	A student slapped me			
17	A student forced me to fight			
18	Other students made me cry because of their wickedness			

17. If you have ever experienced any of the types of peer victimization listed in questions 15 and 16 above, who did it to you? (You can tick more than one option)

- (a) A teacher
- (b) A senior student
- (c) A classmate
- (d) A junior student

SECTION C: FACTORS ASSOCIATED WITH PEER VICTIMIZATION EXPERIENCE

INSTRUCTION: PLEASE TICK [√] THE APPROPRIATE BOX THAT APPLIES TO YOU

17. If you have experienced peer victimization, why do u think it happened to you?

SN		YES	NO	I AM NOT SURE
1	Because I am shy			
2	Because I am short			
3	Because I am thin			
4	Because my daddy beats my mummy too			
5	Because people say I am too quiet			
6	Because I am fat			
7	Because it is natural			
8	Because I am not very brilliant			
9	Because I do not belong to any click of friends			
10	Because I am not confident			
11	Because I have a disability			
12	Because I am brilliant			
13	Because I talk freely			
14	Because I am a stammerer			

SECTION D: PERCEIVED HEALTH CONSEQUENCES

INSTRUCTION: PLEASE TICK [√] THE APPROPRIATE BOX THAT APPLIES TO YOU

18. If you have experienced any of the types of peer victimization in the last one year and ever before, did you experience any of the following thereafter?

SN		NOT AT ALL	ONCE	MORE THAN ONCE	I CAN'T REMEMBER
1	I didn't feel like going to school because I was afraid				
2	My self esteem was lowered				
3	My friends ran away from me				
4	I had feelings of headache				
5	I felt alone				
6	I was emotionally distressed				
7	I felt uneasy in my mind because I was afraid				

8	Some parts of my body were swollen or injured. If yes, which part was swollen or injured? (a) face (b) hands (c) legs (d) others (specify)				
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SECTION E: PREVALENCE OF PEER VICTIMIZATION PERPETRATION

INSTRUCTION: PLEASE TICK [V] THE APPROPRIATE BOX THAT APPLIES TO YOU

19. Have you done any of these to anybody within the last one year and how often did you do it?

SN		NO	ONCE	MORE THAN ONCE
1	I teased students to make them angry			
2	I have gotten angry easily with someone			
3	I have fought back when someone hit me first			
4	I have said things about other children to make my friends happy			
5	I have encouraged other students to fight			
6	I have pushed other students			
7	I have spat on other students			
8	I started fighting because I was angry			
9	I slapped or kicked someone			
10	I called other people bad names			
11	I threatened to hurt or hit another student			
12	I kept other students from being friends with people I didn't like			
13	I set other students up to get them into trouble			
14	I ganged up against someone			

INSTRUCTION: PLEASE TICK [V] THE APPROPRIATE BOX THAT APPLIES TO YOU

20. Have you done any of these to anybody within your lifetime and how often did you do it?

SN		NO	ONCE	MORE THAN ONCE
1	I teased students to make them angry			
2	I have gotten angry easily with someone			
3	I have fought back when someone hit me first			

4	I have said things about other children to make my friends happy			
5	I have encouraged other students to fight			
6	I have pushed other students			
7	I have spat on other students			
8	I started fighting because I was angry			
9	I slapped or kicked someone			
10	I called other people bad names			
11	I threatened to hurt or hit another student			
12	I kept other students from being friends with people I didn't like.			
13	I set other students up to get them into trouble			
14	I ganged up against someone			

SECTION F: FACTORS ASSOCIATED WITH PERPETRATION OF PEER VICTIMIZATION

INSTRUCTION: PLEASE TICK [v] THE APPROPRIATE BOX THAT APPLIES TO YOU

21. If you did any of the above to any student, why did you do it?

		YES	NO
1	To boost self esteem		
2	Because I want to be popular		
3	Because I want to get attention		
4	Because I am jealous		
5	Because someone has done it to me before		
6	Because I didn't want my friends to laugh at me		
7	Because I am tough		
8	Because I am the leader/ the boss		
9	Because no one messes up with me		
10	Because they get me angry easily		
11	Because my Daddy beats my Mummy		
12	Because I am a stammerer		

Other reasons (specify) _____

23. What are your suggestions to reduce peer victimization in schools?

Appendix 2

Table 1: Proportional allocation of sample size

Sample size	Formula and parameters	Proportion of respondents selected
School A	$\frac{\text{JSS 1-3 students}}{\text{Total No. of students in the four schools}}$ <p>Total No of students in JSS 1-3 School A = 877 Sample size = 850 Total No. of students in the four schools = 3782</p>	$\frac{877 \times 850}{3782}$ $= 197$
School B	$\frac{\text{JSS 1-3 students}}{\text{Total No. of students in the four schools}}$ <p>Total No of students in JSS 1-3 School B = 1,192 Sample size = 850 Total No. of students in the four schools = 3782</p>	$\frac{1192 \times 850}{3782}$ $= 268$
School C	$\frac{\text{JSS 1-3 students}}{\text{Total No. of students in the four schools}}$ <p>Total No of students in JSS 1-3 School C = 645 Sample size = 850 Total No. of students in the four schools = 3782</p>	$\frac{645 \times 850}{3782}$ $= 145$
School D	$\frac{\text{JSS 1-3 students}}{\text{Total No. of students in the four schools}}$ <p>Total No of students in JSS 1-3 School A = 1068 Sample size = 850 Total No. of students in the four schools = 3782</p>	$\frac{1068 \times 850}{3782}$ $= 240$