INQUIRY INTO BULLYING OF CHILDREN AND YOUNG PEOPLE

Organisation: Child Health Promotion Research Centre, Edith Cowan University

Name: Professor Donna Cross

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Bullying of Children and Young People Inquiry
Submission

Prepared by: Child Health Promotion Research Centre
      Edith Cowan University

      Prof Donna Cross
      Dr Julian Dooley
      Dr Lydia Hearn
      Ms Helen Monks

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The Child Health Promotion Research Centre

This submission is based on epidemiological and applied bullying-related research conducted from 1999 to 2009 by the Child Health Promotion Research Centre at Edith Cowan University. It broadly addresses terms of reference 1, 2, 3, 5 and 6 as they relate to school-age children.

The Child Health Promotion Research Centre (CHPRC) comprises a multi-disciplinary research team of 30 staff who are nationally and internationally recognised for their school and community based research in the areas of: bullying prevention and mental health promotion; drug use prevention, cessation, and harm minimisation; road safety and injury control; and the promotion of healthy weight for the prevention of overweight and obesity in children. The CHPRC aims to improve the overall physical, emotional and mental health and well-being of children and their families through:

- Developing innovative, high quality applied health promotion research in areas of national priority for school-age children and youth;
- Translating research findings into policy and practice at the regional, national and international level to increase their public health impact and enhance prevention and early intervention; and
- Strengthening the capacity of parents, teachers, primary health care providers, researchers, community workers, and other stakeholder groups, to reduce the time lag between knowledge development and effective community action.

More information about the CHPRC and its bullying related research can be found at http://chprc.ecu.edu.au.

1. The nature, level and impact of bullying among school-age children

Bullying is defined as repeated, unjustifiable behaviour (physical, verbal, and/or psychological) intended to cause harm, fear and distress to another, that is conducted by a more powerful individual or group against a less powerful individual[1,2]. This form of intentional harm can have significant long term effects on individuals, resulting in social, emotional and physical injury. Evidence from longitudinal data indicates that bullying has a tendency to result in increasing social maladjustment and withdrawal from society in adolescence, including depression, anxiety and suicidal ideation[3-10]. Health and injury related risks are also present for those students who bully others, with studies indicating that bullying often predicts subsequent anti-social behaviour[11], with children who bully others at the age of 14 years, likely to still engage in harassment, violence and other forms of risky behaviour at the age of 32 years, and to have children who themselves engage in bullying and violence[12]. Persistent victimisation is also predictive of substantial use of government support and health services by age 28 years[13].

Successive studies over the past 10 years conducted by the Child Health Promotion Research Centre (CHPRC) have found that approximately one in four Australian children report being bullied every few weeks or more often. Moreover, 10% of students report they deliberately bullied another student at school on two or more occasions, and approximately a quarter of students reported they had been involved in at least one fight at school. One half of the students who were hurt at school required some medical attention.

Scientific Basis of CHPRC Research

In response to the growing international[16] and national[17] concern regarding children rights to be educated in an environment free from violence, victimisation, and harassment, together with compelling research indicating that bullying can be significantly reduced and managed in the school setting[18], the CHPRC has conducted seven major research studies to strengthen whole-of-school approaches to reduce bullying in primary and secondary schools. Furthermore, in 2007 the Child Health Promotion Research Centre (CHPRC) conducted the first national prevalence study of bullying in Australia, called the *Australian Covert Bullying Prevalence Study*, to benchmark levels of bullying among children aged 10-14 years[19].

2008 National Prevalence Data on Bullying

In 2008 the CHPRC completed a national prevalence study called the *Australian Covert Bullying Prevalence Study* (ACBPS) commissioned by DEEWR to address the lack of current, reliable evidence about the nature and prevalence of covert bullying in the Australian cultural context, and to provide a foundation for informed action. This comprehensive study, conducted by the Child Health Promotion Research Centre (CHPRC), at Edith Cowan University, aimed to improve the knowledge and understanding of the key determinants, temporal development, predictors, prevalence and outcomes of covert bullying, to ultimately determine effective policy and practice to address this problem. The Study was designed to provide information, at a representative national level, about what constitutes covert bullying, the forms it takes, by whom it is practiced, towards whom it is directed, how frequently it is experienced, and the impact it has on those who are bullied. It also aimed to include reference to emerging forms of cyber bullying (such as internet and mobile phone-based bullying), as well as other forms of covert bullying including relational bullying. The study used prospective data collected from over 7,000 students from all states of Australia and a retrospective data collected from nearly 13,500 WA students. At the time of this submission DEEWR has not yet officially released the report, hence we cannot include in this submission the extensive data collected from NSW students and how they compare to the remainder of Australia. Importantly we believe these Australian (NSW) data are among the most comprehensive and recent that addresses all forms of bullying, including cyber bullying, to this inquiry. Once we have approval from DEEWR we can submit these data for the information of the Inquiry. No release date has yet been announced by DEEWR.

The following provides a brief outline of the bullying-related research undertaken by the CHPRC from 1999-2009 to improve our understanding of and to reduce bullying and intentional harm among children and young people:

- **Bullying Formative Study** (1999): This one year study funded by Healthway involved an extensive literature review and stakeholder consultations, validated using a Delphi process by national and international experts[20]. The findings were used to inform the development of the *Friendly Schools* (FS) bullying prevention trial.

- **The Friendly Schools Bullying Prevention Trial** (2000-2003): This whole-of-school program, also funded by Healthway, tracked a cohort of 2000 Year 4-5 students and their parents for a four-year period as part of a randomised control trial (RCT). During the first two years of the study, our research team provided professional development and whole-of-school intervention materials, and during the second two years we tracked the cohort to measure maintenance/decay of the program effects[21]. After two years of intervention we found intervention students had significantly diminished odds of bully behaviour[22]. However, our process data showed we had not provided sufficient capacity

building for school staff and the students' parents. In response to these findings, in 2002, we initiated another large randomised control trial to extend the program and incorporate components for parents and teachers, called *Friendly Schools and Families Project.*

- **The Friendly Schools and Families Project** *(2004-2006):* This project, again funded by Healthway, aimed to assess the effectiveness of a parent whole-school and classroom based bullying intervention and included policy review and enhancement, staff training and parent and coming involvement aimed at preventing, reducing and managing bullying in primary schools. The study involved a RCT of over 4,000 student that specifically targeted and tracked a cohort of Year 4 and 6 students, and well as the parents of Year 2, 4 and 6 students. The results showed an significant reduction in bullying among the intervention group[23]. As a result of extraordinary demand for the intervention materials resulting from the Friendly Schools and Families Project, they were released for national dissemination as part of the Government's National Safe Schools Initiative, and since 2005 over 1,500 schools across Australia have been train in their use. Furthermore, at the end of 2006 ECU signed an agreement with the Australian Council of Educational Research (ACER) to license and disseminate the program in Australia and internationally.

- **The Supportive Schools Project** *(2004-2007):* Unlike the Friendly Schools and Families Project which addressed bullying in primary school children, this project involved a three year randomised control trial, funded by Healthway, aimed at determining the effectiveness of a whole school intervention aimed at reducing aggressive behaviour among children aged of 10-12 years. Literature indicates that bullying peaks twice in children, once in primary school and again on transition to secondary school. Hence this project aimed to reduce bullying among child in transition to secondary school. The project has had three key components: i) whole school capacity building via formal and informal staff mentorship; ii) formal curriculum targeting health education teachers and tutors/pastoral care teachers; and iii) strategies to engage parents. Early results indicate that this project has been significant in reducing bullying among this age group.

- **The Child Aggression Prevention Project** *(2004-2007):* This project, funded by Healthway, has targeted pre-primary school children and their families. It is part of an international study with the Montreal-based GRIP Research Unit (and other research groups in Paris and Geneva) which aimed to develop and evaluate an intervention designed to develop children's capacity for self-control, through the promotion of supportive environments and social relationships that limit aggression and disruptive behaviours among children in the early phases of schooling. The preliminary results from this study will be released shortly.

- **The Violence Related Behaviours and Young Peoples' Project** *(2005-2006):* This formative study aimed to assess the frequency and severity of unreported or hidden victimisation of children under 18 years of age. Funded by the WA Department of Health, the study collected data from metro and rural young people attending school (aged 10-17 years), as well as young people not enrolled in mainstream education. Data were

collected from a total of 206 primary school student, 546 secondary school students, 35 out-of-school youth. Key findings and recommendations were developed to inform public policy and practice on intentional injury control.

- **The Solid Kids-Solid Schools Project** *(2006-2009):* Recent studies have shown that Aboriginal children are far more vulnerable to the effects of bullying behaviour and experience more negative outcomes than their mainstream counterparts. The CHPRC's 'Solid Kids, Solid Schools Project' is a Healthway funded study, that is being developed in conjunction with the Yamaji community of Mid-West and Murchison region of Western Australia, to determine a culturally secure understanding of, and hence intervention for bullying among Yamaji school children. More specifically, the project aims to create ownership among local Aboriginal education and health experts and other community members of the Yamaji based program, and to enhance the capacity of Yamaji communities to prevent and reduce bullying among Aboriginal children attending primary schools within the region.

- **The Cyber Bullying Formative Study** *(2007-2008):* With the growth of virtual technology, 'covert' relational aggression is taking on a new form of identity with broad social, emotional and mental health implications particularly among teenagers. New data emerging from Australia, USA, and the UK, is showing alarming trends regarding the extent to which young people are using e-mail, texting, chat rooms, mobile phones, mobile phone cameras, and websites to bully their peers. This initial study, funded through Healthway, is examined student, parents and school staff understandings and needs in relation to cyber bullying behaviour. The study used 21 focus groups (6 with rural students and 15 with metro students); 6 parent information evenings to recruit 120 parent interviews; 36 teacher interviews and 6 interviews with principals. The final report from this project is due to be released to the funding body in March 2009.

- **The Cyber Friendly Schools Project** *(2007-2009):* The aim of this project, funded by the WA Public Education Endowment Trust, was to conduct research and organise a statewide Cyber Student Summit involving 200 students (scheduled for October 22, 2008), plus another summit for staff and parents (October 23, 2008) to identify effective and appropriate prevention and management strategies for adolescents that involve coordinated responses between school and families. The expected outcome of the project will be evidence-based school-based strategies for students and teachers and recommendations for policy and practice for WA schools on how to prevent and reduce cyber bullying.

- **The Australian Covert Bullying Prevalence Trial** *(2007-2009):* This project - also described briefly in the boxed section above – represents the first a national prevalence study of bullying, aimed at benchmarking all forms of bullying behaviour among 10-14 year olds in Australia. The study, funded by the Australian Department of Education, Employment and Workplace Relations, comprised:

    -- Published theoretical and empirical evidence;
    -- Qualitative data from 84 students aged 8-13 years;

- Previous quantitative CHPRC data collected between 2003-2006 from 13,330 students aged 8-13 years;
- Cross-sectional national quantitative data collected from 7,410 students aged 8-15 years and 456 school staff from eight states.

The report provides a comprehensive summary of student bullying behaviours and responses from teachers and highlights a series of policy recommendations for school systems and sectors across Australia. As discussed previously, this report is yet to be released by DEEWR.

- *The Family Cyber Intervention Trial (2008-2011):* This study funded by the Telstra Foundation, aims to help bridge the technological gap between parents and teachers and their children for the prevention of cyber bullying and aggression. The Centre's initial formative study into cyber bullying has highlighted that few children who are bullied using technology are prepared to discuss the issues with their parents for fear of having their mobile phones or computer taken away from them, and because they believe that their parents are unaware of how to prevent the problem. This large project will develop and test an educational intervention aimed at parents of children aged 10-15 years.

- *Cyber Safety Literature Review (2009):* This comprehensive literature review was commissioned by the Department of Broadband Communications and the Digital Economy. It will provide the most recent and comprehensive review of cyber safety issues, including cyber bullying, that has to-date been conducted in Australia. The review report will be completed in May 2009.

The main outcomes of this extensive bullying-related research conducted by the CHPRC are empirical evidence based policy guidelines and developmentally appropriate classroom and whole school strategies for school-age students aged 5 to 15 years.

2.   Factors contributing to bullying

There are many internal and external factors that contribute to bullying behaviour. The individual characteristics of the child that have been identified as contributing to bullying are difficult temperament, attention problems and hyperactivity. Incidences of aggression within the home, ineffective or inconsistent parenting strategies and high family stress have all been identified as strong family factors associated with bullying. A number of peer factors have also been associated with bullying, namely, association with aggressive peers, peer group rejection and social marginalization. Finally, a number of school-based factors have been identified as being associated with bullying. Among the most salient are ignoring antisocial behaviour, inconsistent consequences for rule-breaking behaviour and student-teachers interactions that are alienating in nature (i.e., lacking in open and two-way communication). The primary and secondary school whole-school interventions developed and tested empirically by the CHPRC (the Friendly Schools and Families program and the Supportive Schools program) address most of these risk and protective factors found to contribute to bullying.

3. Prevention and early intervention approaches to address bullying, including 'cyber-bullying'

Most successful early intervention approaches are developed using a comprehensive whole-of-school framework tailored to the needs, strengths and concerns of students and the unique characteristics of the school by providing individualised support. Successful programs need to include capacity building to meet each school's organizational context; a consistent understanding of bullying; strategies to support and develop students' social relationships and peer support; policy development and implementation (involving school community); classroom curriculum; attention to school ethos or culture development; strategies to support student social and emotional development; positive behaviour management strategies, and less punitive-based solutions to bullying; pastoral care initiatives; and school-home-community links. Additionally the classroom component of these whole-school programs need to focus on increasing pro-victim and reducing the pro-bully attitudes of secondary school students; building the capacity of these students to cooperate; empowering them to cope adaptively with bullying should it occur; and helping to train them to react assertively and not aggressively to bullying, particularly those who are frequently bullied Each of the *Children's Aggression Prevention* (CAP); the *Friendly Schools (FS), the Friendly Schools Friendly Families* (FSFF) and *Supportive Schools* (SSP) programs developed by the CHPRC are based on this evidence, were then empirically tested, and have had positive findings following two to three years of intervention.

Junior primary school program (CAP)

The CHPRC recently completed a large scale, group randomised control project addressing childhood aggression, called the Childhood Aggression Prevention (CAP) Project. The CAP project is a classroom-based universal intervention program which involves a core learning and teaching framework emphasising emotion understanding and regulation, as well as addressing problematic social information processing patterns. The CAP project used learning and teaching modules which address (i) establishing a happy, friendly, and safe learning and teaching environment; (ii) understanding and managing emotions; and (iii) understanding and managing social interactions. Importantly, the CAP project included strategies that address the peer network, the teacher-child relationship, and the teacher-parent alliance. It also used strategies for welcoming parents into the classroom and improving the relationship between parents and school staff. The program also provided send-home notes to parents that address simple but effective strategies from the parenting training literature (e.g., on emotion coaching; effective responses to misbehaviour). To date, the CAP Program has been used in 24 different classes in 12 schools in the greater Perth area of Western Australia (see Runions, 2008 for more detail)[26].

Primary school programs (FS and FSFF)

The Friendly Schools (FS) bullying intervention project developed by the CHPRC is a whole-school program designed to reduce the incidence of bullying behaviours among primary school age children[22]. The FS group randomised control trial assessed the effectiveness of a whole-school intervention aimed at preventing, reducing and managing bullying in the primary school setting. This project was evaluated by following approximately 2000 students, their teachers and parents across Years 4 and 5 during 2000 and 2001. The project also

assessed change in attitudes toward bullying and the impact of the Friendly Schools program on the mental and physical health factors associated with bullying, including symptoms of depression and anxiety, somatic symptoms and self-esteem. Overall, the two year classroom and whole-school intervention was found to be effective in reducing self-reported bullying behaviours. For students who were bullied 'lots of times' at the start of the program those who received the FS intervention were up to five times less likely to be bullied in that way following the intervention compared with those students who did not receive the intervention. Similarly, those students who were bullied 'sometimes' at the start of the program and received the FS intervention, they were three times less likely to be bullied at the end of the program than those students who did not receive the program.

The *Friendly Schools* research project was followed by a second primary school based group randomised control trial called *Friendly Schools Friendly Families* program (FSFF) involving over 4,000 Year 2, 4 and 6 students, their teachers and two of their parents/carers. The FSFF drew on early formative research as well as outcome and process data collected as part of the Friendly Schools Project. The FS data suggested that schools required more specific capacity building to successfully implement and sustain the complexities of a whole-school approach to bullying prevention and management, and that intervention at the family level required greater cooperation with the school to assist parents with helping their children to deal with bullying. Despite the fact that parents are an essential component of effective school-based bullying intervention programs, our research found that this partnership is often poorly addressed by schools. This program specifically tried to build the capacity of schools to engage the whole school, community especially parents in addressing bullying behaviour. The three-year FSFF project found significant positive effects for Year 4 and 6 students who reported 'being bullied' and for Year 4 students who reported 'bullying others'. This study was also able to significantly increase the proportion of Year 6 students who told an adult if they were bullied compared to the students who did not receive the intervention.

The findings of both the *Friendly Schools* and *Friendly Schools Friendly Families* studies were used to rewrite the research programs and release it commercially for sale to schools. The revised program is called *Friendly Schools and Families (FS&F)* and is being distributed nationally and internationally by the Australian Council for Educational Research (ACER). It is currently being used by over 1500 schools in Australia and Singapore.

Secondary school program (SSP)

Similar to the CAP, FS and FSFF programs, the *Supportive Schools* high school bullying prevention program recruited 21 secondary schools from the Perth metropolitan area to participate in a three-year group randomised control intervention trial from 2005-2007. This project aimed to develop and implement whole-of-school strategies to reduce the prevalence of frequent bullying behaviour as well as positively influence common mediators of bullying including:

- Encouraging students' normative beliefs about non-acceptance bullying behaviour;
- Increasing students' feelings of support from school staff and peers if bullied;
- Improving students' social competence;
- Increasing students' reciprocated friendships;

- Increased feelings of connectedness to school and reducing problem behaviours, absenteeism and loneliness.

Year 7 students enrolled in each of the 21 schools were tracked for three years, using self-complete surveys until their completion of Year 9. Of the 21 schools recruited into this study, 10 received the SSP intervention materials. The intervention comprised the FS&F whole-school manual, classroom curriculum and coaching support for school staff to adapt the program to suit their school.

Following one year of implementation, the SSP intervention schools had a fewer Year 8 cohort students who reported bullying others regularly than the comparison schools. Further, students attending the comparison schools reported significantly higher mean levels of loneliness at school, lower mean levels of safety at school and those who were bullied others regularly perceived lower levels of support from school staff and peers for students who were bullied. While these positive outcomes did not sustain in the second year of the project, the comparison student cohort, now in Year 9, reported significantly lower levels of connectedness to school than intervention students. It is important to note that connectedness to school is often reported as the most significant school-level predictor of students' health and academic outcomes.

The major strengths of the CAP, FS, FSFF and SSP junior primary to secondary intervention projects are as follows:

- **Research Based** – The program was developed through rigorous empirical research
- **Validated through 2-3 year randomised control trials** – A randomised control study is considered to be the gold standard in scientific research
- **School diagnostic and capacity assessment tools** – Tools that allow the school to assess their current strategies and processes and their capacity to address any gaps that are identified
- **Student Surveys** – Tracking tools that measure the prevalence of bullying and the effectiveness of the program
- **Whole Community Approach** – Combine a whole school approach with elements of the community such as physical environment and family involvement
- **Restorative Practices** – Strategies that put repairing harm done to relationships and people over and above the need for assigning blame and dispensing punishment (e.g. Method of Shared Concern)
- **User Generated Content** – The use of role-play activities to generate student/teacher generated content that is relevant to the specific group (e.g. development of bullying vocabulary)

All programs aim to empower school staff with a range of tools to assess, address and monitor their provision of a safe and supportive school environment. At the highest level a 'Capacity Assessment Tool' allows schools to analyse their current skills, structures, resources and commitment to address bullying behaviour and determine the overall capabilities of the school and identify potential areas for capacity building. The 'School Diagnostic' tool can be used by schools on its own or following the use of the Capacity Assessment tool to map policies, strategies and programs that are currently in place and identify possible gaps or areas for improvement. Finally the 'Student Survey' tools can be

used by schools to measure the prevalence of student bullying behaviour and track the effectiveness of the policies and strategies implemented by the school.

The modular structure of the programs also ensure that it is compatible with existing programs and practices. Rather than providing a 'one size fits all' solution schools are able to identify and fill specific gaps in their policy, strategies and processes that complement and reinforce current programs or practices. This not only preserves time and resources but ensures the most efficient use of capacity during the implementation of a bullying prevention program.

Cyber bullying prevention interventions

While there have been numerous programs that have addressed bullying in schools, the CHPRC is, to the best of our knowledge, the only group currently developing and implementing a multi-faceted cyber-bullying intervention program. We currently have two active large scale cyber-bullying intervention programs. As mentioned previously, the *Cyber Bullying Formative Study (2007-2008)*, aims to conduct a comprehensive formative study to improve knowledge and understanding of effective strategies for preventing and dealing with cyber-bullying. This project will investigate the key determinants, mediators, causal pathways and outcomes of electronic technology and relational aggression on teenage mental health. This project also aims to better understand when, how often and why youth have been involved in cyber harassment and to determine what youth believe would be the best form(s) of support for preventing and reducing the impact of relational aggression in cyberspace. Further, the *Family Cyber Intervention Trial (2008-2010)*, which has been funded by the Telstra Foundation, will develop, implement and evaluate a parent intervention to reduce the potential harms associated with their children's use of electronic social networking technology, with special emphasis on cyber-bullying. This project will develop written/electronic resources to strengthen the capacity of parents to communicate with children about virtual social networking and cyber bullying. The Family Cyber Intervention Trial is designed to complement and enhance the *Cyber Friendly Schools project* to ensure a comprehensive approach to the management and intervention of cyber-bullying.

Further, both of these projects have been developed and enhanced based on results from the *Cyber Friendly Schools Project (2008 to 2009)*, which has been funded by the Western Australian Government, Public Education Endowment Trust (PEET). This project aims to extend Western Australia's position at the forefront of research, policy and practice addressing a new area of high concern for schools – student cyber-bullying/safety. This project also aims to actively engage schools, students and parents and the wider community to develop evidence-based policy, practice and strategies that are cost effective, feasible and effective to reduce this increasing problem.

Finally, the CHPRC recently submitted an application to the National Health and Medical Research Council (NHMRC) to conduct a three-year group randomised control trial (2010-2012) to assess a student-based cyber-bullying intervention. This cyber bullying prevention project will build on the formative work that the CHPRC has conducted over the past 10 years in the area of bullying intervention and early prevention

5. & 6. The evidence-base for effective anti-bullying approaches/ Approaches to address bullying in Australia

Although many bullying intervention programs are available, relatively few have been empirically validated. The bulk of school-based programming to date has focused on explicit instruction around social skills and children's understanding of social cues and interactions, · for example, the *Promoting Alternative Thinking Strategies* (PATHS) program[25] and the *Fluppy Program* [24,27]. Other more specific bullying-related international programs developed by Prof Dan Olweus in Norway the *Olweus Bullying Prevention* program[1] and Prof Peter Smith in the United Kingdom, have also been empirically tested. For example, Prof Olweus' program reported a 50% reduction in bullying incidences over a two year period. However, later research failed to support evidence of this level of reduction. The Sheffield project, developed by Smith and colleagues, demonstrated a 17% reduction for primary schools and about 3-5% reduction in secondary schools. Currently in Finland a national bullying prevention program called KeVa is being developed by Professor Christina Salmivalli from the University of Turku. Preliminary results suggest this program is showing positive effects in schools.

The CHPRC's four group randomised control trials conducted over the equivalent of nine years, involving over 10,000 school-age students are among the only bullying prevention specific programs empirically evaluated in Australia. These projects described previously, target :
- junior primary school students: the *Children's Aggression Prevention* (CAP) project,
- middle and upper primary school students: the *Friendly Schools*, and the *Friendly Schools Friendly Families* project (now combined and called *Friendly Schools and Families*); and
- years 8 to 10 secondary school students: the *Supportive Schools* program.

Reports describing the detailed results for each of these programs are available upon request.

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