The long-term cost of bullying

Being bullied as a child is a cause of long-lasting and significant damage. Victims of childhood bullying are at increased risk of poorer health, wealth and social relationships in adulthood. More effective intervention to prevent bullying could reduce long-term health and social costs for individuals and society.

Bullying by peers is a significant but largely ignored problem, according to ESRC-funded research by Professor Dieter Wolke at the University of Warwick. He has examined the causes and consequences of childhood bullying. Findings indicate that childhood bullying can cast a shadow over the whole life course – leading to serious illness, poor social relationships and problems with holding down a regular job.

Sibling bullying is found in up to half of all UK households with adolescents. Twenty per cent of children and 12 per cent of adolescents report bullying at school. While the influence of parenting on child outcomes has received plenty of attention, many fail to appreciate that by the age of 18 children have spent far more time with peers and siblings than their parents. Time spent with peers, if characterised by aggression and systemic abuse of power, is likely to have adverse outcomes in adult life. However these long-term effects have rarely been researched.

Many parents either do not address bullying of their child, do not know how to, or find it difficult to broach the subject. Written school policies on behaviour and bullying have done little to reduce the bullying problem. It is a public health and community problem that requires parents, GPs, other community agencies and schools to work together.

Key findings

- Being bullied in childhood has long-term adverse consequences for health, academic achievement, social relationships, jobs and wealth.
- Being bullied highly increases the risk of developing psychiatric problems including depression, anxiety and psychotic experiences in early adulthood. Bullied children are at higher risk of self-harm and suicide.
- Bullies are found almost equally in all socio-economic groups, and being bullied is experienced in all ethnic groups to a similar degree.
- Bullied children have mothers who were more stressed during pregnancy than mothers of non-bullied children, suggesting that antenatal factors may alter how children react to peer stress.
- Harsh or overprotective parenting and poor sibling relationships increase the risk of children being bullied at school.
- A significant minority of bullied children never tell their parents or teachers and suffer in silence.
- Bullies themselves suffer no long-term adverse outcomes.
Policy relevance and implications

- Policy interventions to prevent bullying need to extend beyond schools to include agencies across the community - eg GPs, sports clubs, after-school clubs – to recognise signs of bullying and take appropriate action.

- Investment in educational services for bullied children who are unable to go to school should be increased so they can recover and gain confidence in dealing with their peers.

- GPs should be trained to recognise signs of problematic peer relationships and routinely ask about peer relationships when treating children with mental health problems, non-specific health problems (eg headaches, stomach ache, nightmares) or indications of self-harm.

- Pregnant women should be given more advice and support from midwives and GPs on anxiety, depression and stress during pregnancy, as these may make their child more prone to being bullied.

- There is a need for a national campaign to raise awareness among parents of sibling and peer bullying, including signs of a child being bullied, how to talk to your child, and constructive ways of supporting your child and communicating with their school.

- Innovative online resources should be developed, such as bullying scenarios to help parents and children explore different ways of dealing with bullying.

BRIEF DESCRIPTION OF THE PROJECT

The findings are based on the research project ‘Prenatal and family precursors of bullying involvement in childhood and their consequences into early adulthood’ which is funded under the Secondary Data Analysis Initiative (SDAI). The study investigated three longitudinal data sets: Avon Longitudinal Study of Parents and Children, the UK Household Longitudinal Study and the Great Smokey Mountain Study. Web: www2.warwick.ac.uk/fac/sci/psych/research/lifespan/dw

Impact of Bullying in Childhood on Adult Health, Wealth, Crime, and Social Outcomes Web: pss.sagepub.com/content/early/2013/08/16/0956797613481608.abstract

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