





Growing up unequal: gender and socioeconomic differences in young people's health and well-being

Bullying among adolescents in the Russian Federation

Fact sheet based on the results of Health Behaviour in School-aged Children (HBSC) survey 2013/2014



This fact sheet summarizes the main findings on bullying among adolescents from the 2013/2014 Health Behaviour in School-Aged Children (HBSC) survey in the Russian Federation.

HBSC, a WHO collaborative cross-national study, is conducted every four years and provides information about the health and well-being, social conditions and behaviour of 11-, 13- and 15-year-old boys and girls in 42 countries and regions across the WHO European Region and North America. More than 4700 young people from the Russian Federation took part in the survey, the sixth to have been held in the country.

Graphs in this fact sheet show differences between the 2013/2014 survey and the previous HBSC survey from 2009/2010.

Summary of results

- Bullying victimization declines with age.
- Participating in bullying others peaks at age 13 before reducing at 15.
- Bullying victimization, perpetration and cyberbullying are more common among boys at most ages.
- Schoolchildren from low-income families are more likely to be bullied (not statistically significant) and perpetrate bullying (statistically significant among boys).
- Bullying victimization and perpetration rates have grown slightly or remained stable since the last HBSC survey in 2009/2010 for boys and girls at most ages.

Background

Bullying has been subject to little research in the Russian Federation, and no regular preventive work is done in schools. Any child can be bullied, but those who lack self-confidence, have no friends, or have disabilities or chronic diseases are at highest risk.

Bullying victims may experience health problems (from headaches, to enuresis, to suicide attempts) and underperform at school. Perpetrators can attack other children and adults, exhibit antisocial behaviours, harbour feelings of dissatisfaction and frustration, and refuse to comply with rules. Some children are both victim and perpetrator.

Most children witness bullying. It can make them insecure or frightened, or feel shame for not stepping in, or even incline them to join the perpetrator (1).

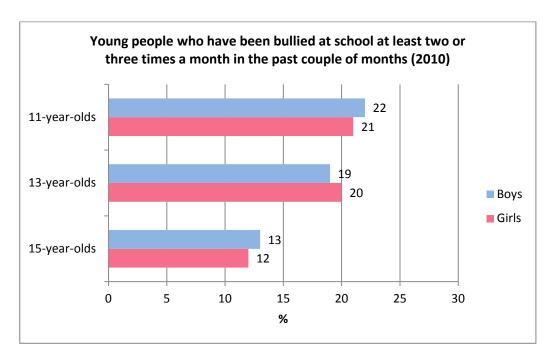
Research from 2010 found that 23% of children in the Russian Federation had been bullied online or offline over the previous 12 months. Ten per cent of those aged between 9 and 16 had been bullied more than once a month, 6% every day or once or twice a week, and 4% once or twice a month. Those aged 11 and 12 were bullied most often. Boys and girls were bullied at about the same rate, but incidence differed across regions (2).

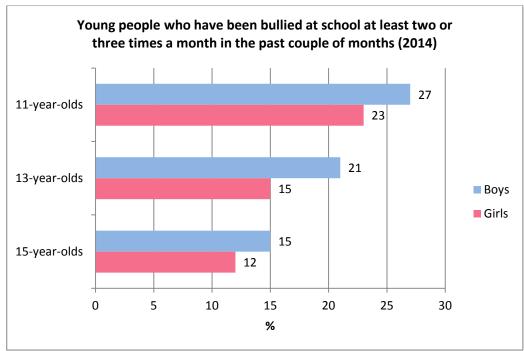
Cyberbullying – persecution of children and young people via the Internet or other technical means – is becoming more common.

Age differences

The 2013/2014 HBSC survey in the Russian Federation shows that schoolchildren of all three age groups are exposed to the risk of being bullied (at least two or three times a month in the past couple of months), but it declines with age. There is a 12 percentage-point reduction between ages 11 and 15 for boys (from 27% to 15%) and 11 percentage points for girls (from 23% to 12%).

Participating in bullying others (at least two or three times a month in the past couple of months) peaks at age 13 (14% of girls and 24% of boys) before reducing at 15 (13% girls, 22% boys).



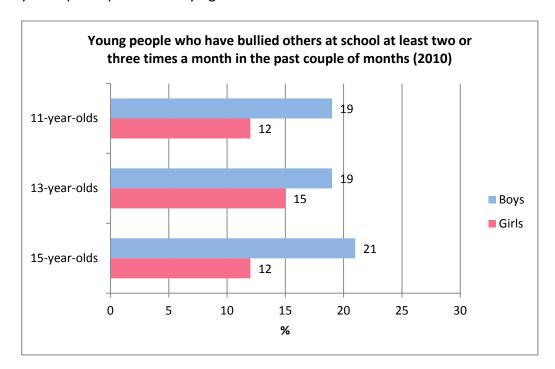


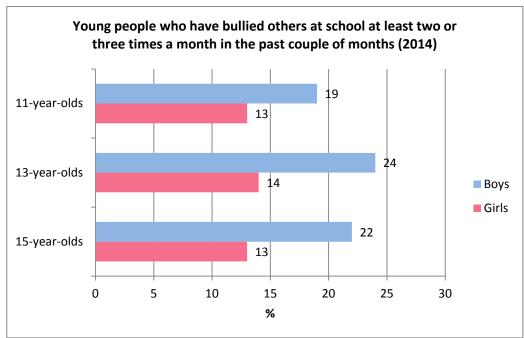
Gender differences

Boys are bullied more often than girls, but gender differences are insignificant except at age 13, when boys have a six percentage-point higher rate.

Boys are also more often exposed to cyberbullying, except at age 11, when girls have a higher rate (11% against 8%).

Bullying perpetration is more common among boys, particularly at age 13, with 24% reporting that they have participated in bullying others.





Family affluence

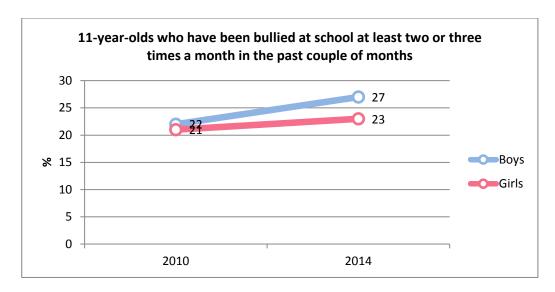
Schoolchildren from low-income families are more likely to be bullied, but the difference is not statistically significant.

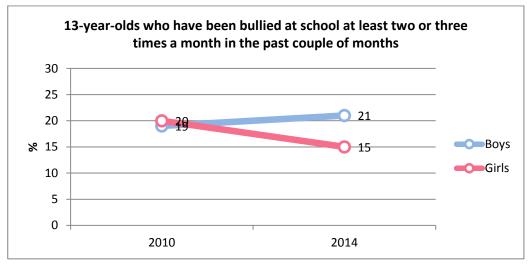
Perpetration is also more common among those from low-income families, with differences for boys being statistically significant.

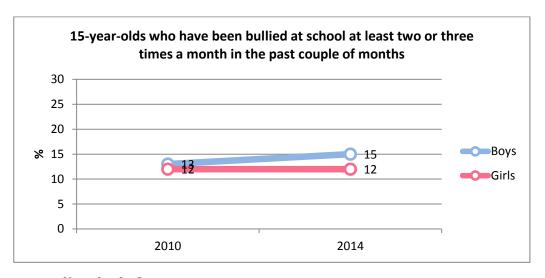
Differences from the previous HBSC study

Bullying victimization has increased slightly since the 2009/2010 survey, except for girls of 13 (decreased by five percentage points) and 15 (no change from the 2009/2010 level of 12%).

Bullying perpetration has also grown a little across the age groups, particularly in boys of 13 (a five percentage-point increase), but has decreased by one percentage point among 13-year-old girls.







How can policy help?

HBSC survey data show that bullying and cyberbullying are significant problems for young people in the Russian Federation and require solutions.

A comprehensive approach is needed, starting with educating teachers to help children who are being bullied. Sources of support include school psychologists and other specialists. Joint working among all participants – the bullied child, perpetrator(s), children witnessing the bullying and teachers – is essential.

Schools at least risk of bullying are those where bullying's unacceptability is clearly stated and understood, unhealthy competition among students is discouraged, and school personnel do not categorize students as "good" and "bad" (3).

Combating cyberbullying requires programmes to increase the computer competence of parents and specialists working with children, who often fail to understand the dangers posed to children by the Internet and underrate the level of cyberbullying risk. It is also necessary to teach children to protect themselves on the Internet and help them understand how actions they take online may have far-reaching consequences (2).

The European child and adolescent health strategy for 2015–2020 and the European child maltreatment prevention action plan 2015–2020 have been approved unanimously by the 53 Member States of the WHO European Region. These documents underscore the significance of a violence-free childhood as a determinant of healthy development.

References

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Accessing the HBSC report findings

The latest HBSC report is available as a smartphone application, presenting data on 11-, 13- and 15-year-old boys and girls health and well-being, social environments and health behaviours, as well as the health inequalities many of them face. It is searchable by country and a wide range of health topics and connects to the WHO European Health Information Gateway.

 $^{^1\, \}hbox{The smartphone application can be accessed at: $http://www.euro.who.int/euro-healthstats}$