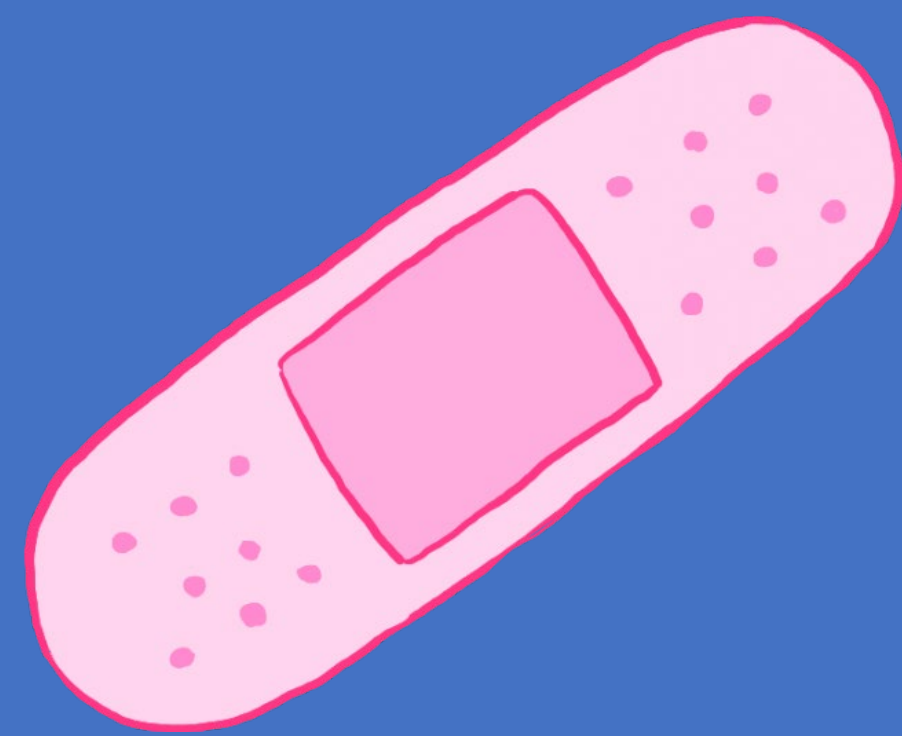


Being a **bully-victim** is associated with **depression** and **social anxiety**, but **not pain outcomes**, in teens with and without **chronic pain**



When Hurt People Hurt People

Bully-Victim Status and its Links to Health and Internalizing Symptoms in Youth with and without Chronic Pain

INTRO

Involvement in peer victimization—whether as a victim, perpetrator, or both—has been linked to poor mental health outcomes in community samples¹⁻⁴.

This study is the first to examine bully-victim status and its links to physical health in a sample that includes youth with chronic pain.

METHODS

1. Participants included 150 adolescents (ages 14-18, 75% female); 70 of whom were seeking treatment for a chronic pain problem
2. All participants completed a set of questionnaires assessing their peer victimization experiences^{5,6}, pain⁷, pain-related disability⁸, social anxiety⁹, and depression⁹

RESULTS

There were no significant differences between youth with and without pain in regards to their peer victimization status

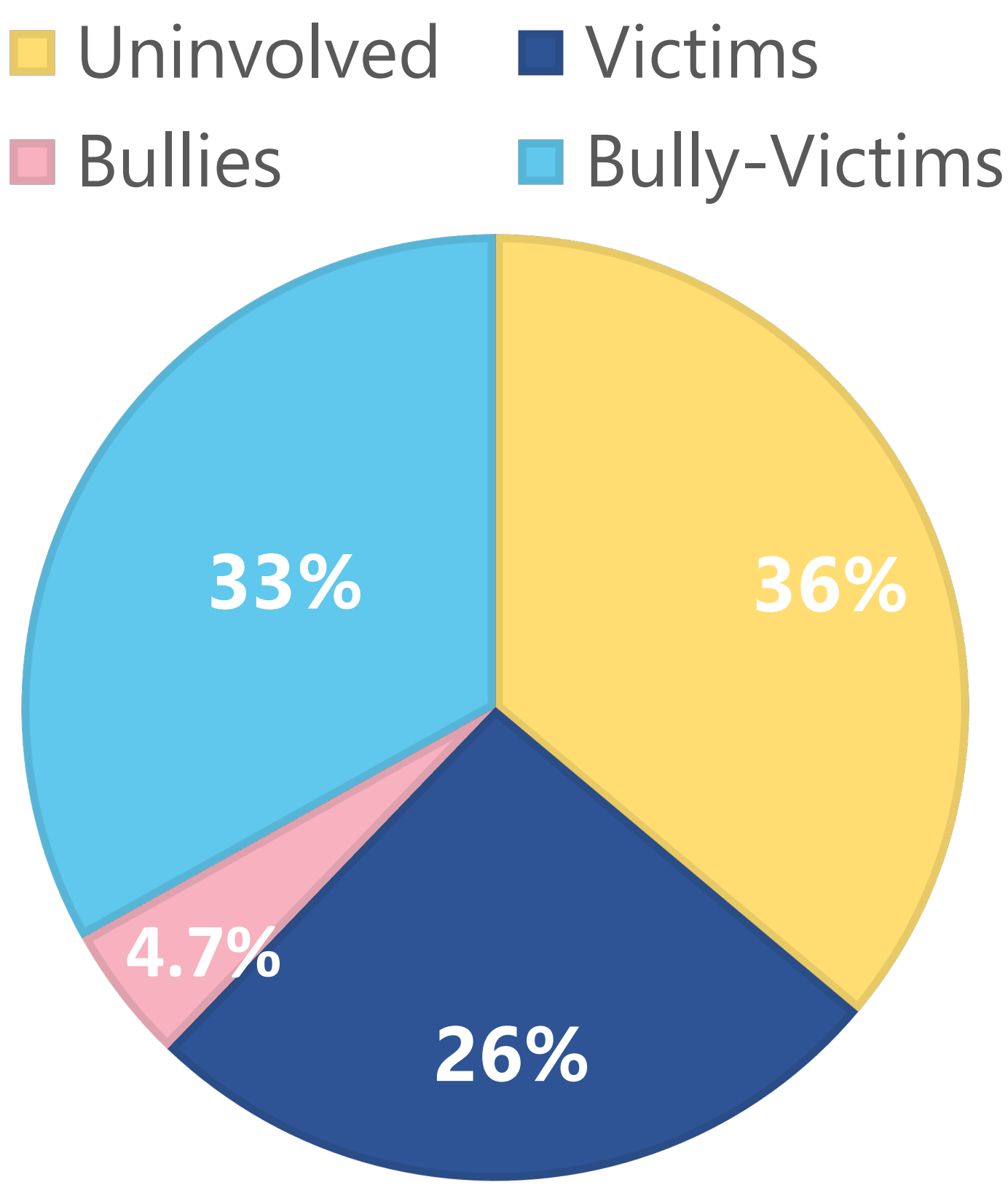
A one-way ANOVA revealed significant between group differences in pain and internalizing symptoms as a function of peer victimization status (all $ps \leq .004$)

Compared to uninvolved youth, bully-victims reported significantly higher (and clinically elevated) depressive symptoms [$M=65.4$, $SD= 18.0$ vs. $M=53.6$, $SD= 17.6$; $p < .001$] and social anxiety symptoms [$M=55.3$, $SD = 11.7$ vs. $M=48.0$, $SD = 11.9$; $p = .003$], but no differences in pain or pain-related disability

Pure victims and pure bullies reported higher intensity pain compared to uninvolved youth

	Pain Intensity M(SD)	Disability M(SD)
Not Involved	3.96(2.61)	18.47(2.51)
Victim	5.37(1.90)**	18.02(2.89)
Bully	6.29(2.36)**	11.58(4.73)
Bully-Victim	4.0(2.43)	15.77(2.23)

ROLE STATUS
(TOTAL SAMPLE)

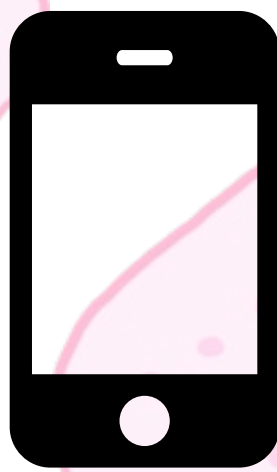


Participants were classified as a victim and/or bully if they experienced and/or perpetrated bullying behavior more than “once or twice” in the past year

DISCUSSION

Most participants reported some involvement in peer victimization over the past year, but youth with chronic pain were not more or less likely to be involved than their healthy peers. Bully-victim status was associated with physical and mental health symptoms in complex ways. Bully-victim status may be an important aspect to consider when assessing and treating teens with and without chronic pain problems.

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