The Effect of Parental Attitudes and Practices on
The Peer Victimization of Their Children

Master’s Thesis
Presented to
The Faculty of the Graduate School of Arts and Sciences
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by
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Specific Aims

The primary objective of this proposed research is to determine whether parental attitudes about aggression and parental behaviors are related to peer victimization in children. In addition, I seek to determine whether this relation is causal in nature. My main question generated for reaching this objective is the following: (1) how do parental attitudes about aggression and bullying affect the victimization of their children? Supplementary questions include the following: (1a) what parental home factors are also related to the victimization of children? (1b) what demographic factors (e.g. race/ethnicity, sex, age, social-economic status) are related to the peer victimization of children? (1c) is peer victimization related to the experience of parents having been victimized as children and their children’s subsequent victimization by others?

The secondary objective of this proposed research is to assess the effectiveness of various parenting strategies in decreasing the victimization of their children. My main question generated for reaching this objective is the following: (2) what kind of parental advice or action is most effective in reducing the victimization of children? A supplementary question is: (2a) how do parental attitudes predict parental advice?

The findings of this proposed research and further understanding of the dynamics of bullying and victimization in children may help researchers determine causal relations between antecedents and victimization, which then may lead to effective techniques in relieving bullying and victimization in children.
Fatal cases of child victimization by peer bullying have been a recent topic of concern in the United States media. The need for effective strategies to reduce the victimization of children by peer bullies calls for a continuation and extension of developmental research on aggression. More specifically, it is important to understand better the influences that may result in the development of chronic child victims and chronic child bullies. A longitudinal study by BurdzovicAndreas and Watson (2009) showed that higher aggressive attitudes in children correlate with higher aggression over time. However, this study also showed that a positive family environment (defined as the absence of family conflict and presence of family cohesion) reduced aggression in children with aggressive attitudes. This relation implies that parental roles, defined as the presence of a parent as a mentor, and family cohesion, defined as the ability of a family to work together and support each other, moderate the effects of aggressive predispositions in children. If parents can have this sort of influence on children’s behavior, then it appears that understanding other aspects of parenting, such as parental beliefs and involvement is important when studying child bullying and victimization. A better understanding of how parental attitudes predicts parental behavior as well as child aggression and development of bully/victim tendencies is a relevant step to a better understanding of the development of this dangerous dynamic.

Parental support, defined as the availability of emotional resources and approval that a parent provides to his or her child, has been found to be an influential factor in the overall well being of children. A study by Flaspohler, Elfstrom, Vanderzee, Sink, and
Birchmeier (2009) found that parental support significantly affected general life-satisfaction in children. Another study showed that children were involved in bullying were likely to have fewer depressive symptoms if they had high parental support (Conners-Burrow, Johnson, Whiteside, McKelvey, 2009). A study by Georgiou (2009) found a similar relation in that children with supportive and involved mothers were more likely to be accepted socially, making it less likely for them to become aggressive or become victims to aggression. However, this same study found that when a parent crosses the line from “supportive” to “overprotective,” children were more likely to become victimized because of their consequential lack of assertiveness and independence. Consistent with many other studies, Georgiou (2009) also found that children with depressive or absent mothers had a higher risk of becoming an aggressive bully.

The research of Conners-Burrow et al. (2009) addressed the effect of parenting styles on aggression and victimization. These researchers also looked at how depression may lead to the development of chronic child victims and bullies and how parental support might affect this dynamic. However, this study did not explore the relation between parental beliefs and bullying and victimization of their children or how their beliefs and advice affect their children. A study by Dill, Vernberg, Fonagy, Twemlow, and Gamm (2004) found that child attitudes and affect correlated with victimization status, but little research has questioned how parental attitudes and beliefs about bullying correlate with children’s reactions to being victimized by peer bullying. However, we do have some information about teachers’ attitudes and behaviors that can give us some
clues and may lead to the designs of new studies investigating parental attitudes and behaviors.

Teachers have been shown to have very important roles in the bullying behavior and victimization of children. It has been demonstrated that children with higher levels of support from teachers were less likely to become bullies or victims (Flaspohler et al., 2009). However, the study by Flaspohler et al. (2009) also found this relation to be cyclical. That is, children with low levels of teacher and parental support were at risk for developing into either chronic victims and bullies of peer aggression, but also, children who were victims and bullies elicited less teacher and parental support. Studies have also examined how teachers’ beliefs about aggression and bullying affect how they intervene when children show aggressive behavior at school. For example, a study by Kochenderfer-Ladd and Pelletier (2008) found that peer bullying and victimization dynamics in young children at school was dependent on whether teachers viewed these dynamics as normative. If a teacher saw peer bullying and victimization as normative, she or he was less likely to intervene and stop the behavior. However, this study found that other factors affected whether teachers found bullying dynamics to be normative.

One such factor is gender differences. The Kochenderfer-Ladd and Pelletier (2008) study found sex differences in how teachers’ reacted toward aggressive behavior in children. Exploring sex differences is an important variable when studying factors that affect aggression and victimization in children. This is because if bullying dynamics vary by sex then different intervention strategies may be required for each sex. Understanding sex differences may also help to discover how a child’s sex may affect his or her response to parental advice and parental treatment. In this case, parental treatment refers to how a
parent may behave favorably or unfavorably toward his or her child. According to this particular study, teachers were more likely to view bullying in boys as normative and bullying in girls as disruptive. This implies that teachers were more tolerant of bullying behavior in boys. Differing adult attitudes concerning sex differences and aggression are not unusual, considering the large body of literature relating to sex differences in the development of aggression and victimization in children.

Studies concerning sex differences in victimization and bullying include one that looked at testosterone levels in male and female victims between 12 and 13 years of age (Vaillancourt, deCatanzaro, Duku, Muir, 2009). This research showed that female victims of verbal aggression had lower levels of testosterone than other females, and male victims of verbal aggression had higher levels of testosterone than other males. This study also suggested that females internalize their abuse, while males externalize their abuse. Osborne-Oliver (2009) found no sex differences in reported female bullying in coeducational versus single-sexed school environments. This finding implies that bullying and victimization in young females are not dependent upon the presence of males. In another study by Rodkin and Berger (2008) found that bullying with younger children happened in same-sex dyads. However, these researchers also found that boys also bullied girls. This study coupled with the finding that males and females handle peer bullying and victimization differently suggest that it would also be important to understand other variables affecting peer victimization in educational environments, such as how teachers react to the peer victimization of their students.

As stated earlier, the study by Kochenderfer-Ladd et al. (2008) also found that teachers gave more positive attention and had a more favorable attitude toward children
who were not chronic victims. This research suggests a connection between adults’ beliefs about bullying dynamics and their treatment of children who are involved in peer aggression dynamics. Since adult support was found to affect the level of child bullying and victimization as well as life-satisfaction in the children of this study, it provides evidence that adult support affects child bullying and victimization. Since parents are also influential adults in the lives of children, this may suggest that it is important to understand the relation between parental attitudes and behaviors and the level of bullying and victimization in children.

However, a research review by Bernstein and Watson (1997) suggested that, although abundant research addresses bullies in this aggression dynamic, research is lacking regarding concerning the development and influence of the chronic victim in peer bullying dynamics. They found that 7 to 10% of school-aged children can be labeled as chronic victims and that these children usually continue to be victimized through childhood and adolescence. This finding may imply that the study of peer victimization in children is an important area of research that needs more attention. Because of the lack of research concerning child victims, this current study will focus mainly on levels of peer victimization in children, rather than levels of peer bullying in children.

*Parenting Strategies to Reduce Peer Victimization*

Research concerning effective strategies in reducing peer victimization in children has been conducted, but little has been conducted concerning how parenting strategies in particular might accomplish this reduction. One study by Werner, Senich, and Przepyszny (2006) examined how mothers handle the display of bullying behavior in
their pre-school aged children. They found that mothers reacted more strongly and used more parental discipline in hypothetical situations where their children acted physically aggressive rather than simply relationally aggressive. However, this study did not examine how mothers would handle situations where peers hypothetically victimized their children. In other words, some researchers have focused attention on how parents try to reduce *bullying*, but almost no research has addressed how parents try to reduce the *victimization* of their children. Most studies examining strategies to reduce victimization in children look at how *school systems* can create programs to assess bullying dynamics (e.g. Henrich, Brown, & Aber, 1999), instead of how parental discipline and advice affects the peer victimization of their children.

The proposed study will assess how parental beliefs about peer victimization and parental advice about how to handle peer victimization correlate with the peer victimization status of their children. It is hypothesized that supportive parenting beliefs and passive parental advice predicts peer victimization status in their children. This hypothesis has been derived mainly from the results of the Werner et al. (2006) study. It is also hypothesized that parental beliefs that are less accepting of peer victimization (e.g., remove parental support when children are victimized to show disapproval) will result in higher probability of peer victimization in their children. This hypothesis has been derived from the results of the Kochenderfer-Ladd et al. (2009) study, which found a similar relation. In addition, I aim to assess how effective different parenting strategies are in reducing child peer victimization, and look at the relation between the experience of parents having been victimized as children and their children’s subsequent peer victimization. I hypothesize that parenting strategies that encourage children to act
assertively and confidently will result in less peer victimization, as opposed to strategies of fighting back, ignoring the bully, or seeking help from adults. This hypothesis is derived mainly from a study by Hamaguchi and Eguchi (2009), which found that children who lacked positive assertion were more likely to develop into chronic victims of peer bullying. In addition, I hypothesize that parents with a history of being victimized as children will more often have children who are being currently victimized by peers. Because of the lack of research on this topic, the rationale for this particular hypothesis is purely speculative. Additionally, this study will examine how certain demographic factors of each family correlate with chronic the peer victim status of children. The study by BurdzovicAndreas and Watson (2009) found a correlation between family configuration and aggressive levels in children, leading to the hypothesis that family configuration will predict chronic victimization status in children. These researchers failed to find a similar relation of aggression level with race, SES, or number of siblings, but I will include these demographics for secondary analysis. Religiosity will be including because a previous study found religious involvement protected children from risk (e.g., Milevsky & Levitt, 2004).

Therefore, key demographic variables will include sex of child, the socio-economic level of the family, religiosity, family configuration, and number of siblings of the child. Predictor variables will include family environment, child’s perceived parenting (perception of parental support), parental attitudes towards victims, parental advice, the level of peer victimization the parent faced as a child, as well as many demographic factors. Outcome variables will include whether a child is a chronic victim of peers (categorical), child aggressive beliefs, and the effectiveness of implemented
strategies that children utilize based on their parents’ advice, or lack of advice, in reducing whether a child develops into a chronic victim of peers.

Method

Participants

I will recruit between 60 and 90 children between the ages of seven and 10 (M = 8) who will assent to participate after written parental consent is collected. This age range is desired because pre-adolescence is the developmental period of focus in this study, and this age range is also old enough so that victim/bully dynamics are present. The mother or female guardian of each child will also participate. Child participants will be gathered from three participating public schools in the Boston area that represent low, middle, and upper socio-economic populations. Children will be drawn from whole classes that are asked to participate in the study. Exclusion criteria include children who do not speak English, as well as children with an IQ below 70 (based upon school records of special education status). No other exclusion criteria will be used for the purpose of this study. Children will be compensated with colorful stickers and pencils after participation, and parents will be compensated with a $10 honorarium and will be entered to win a $100 bonus drawn from all the participants.

Measures

Predictor Variables

Demographics. A demographics survey will be administered to each participating parent. The demographics included are sex of child, ethnicity of parent and child, SES
level (determined by income and parent’s education level), family configuration (e.g. married, single), and the number of siblings of the target child. A 20-item religiosity scale will also be used to assess religiosity of the parent (Milosavljevic & Wright, 2009). This measure has been found to be reliable, $\alpha=.89$ and is therefore internally consistent. This self-report scale measures a person’s religious activity and adherence rather than what his or her religion is (e.g. “How frequently do you attend religious services?”) Religious preference will not be used as a demographic. The questions asked for information about the subject’s perceived level of religiousness, the level of religious practice in their daily lives, how frequently they took part in religious practice, and the degree to which religion affected individuals’ daily lives.

These questions were rated on a 7-point Likert-type scale that ranged from “not at all” (1) to “completely” (7). They also provided reports about how frequently they engaged in a variety of religious practices (ranging from ‘1 – never, to ‘7’-daily). Religiosity is being used as a demographic factor mainly for understanding whether the degree to which a family is religious affects the type of advice parents give toward children on how to handle bullying situations.

*Family environment.* Family environment will be assessed by administering the nine-item cohesion and conflict subscales of the Family Environment Scale (FES) to each parent (Moos & Moos, 1986). This measure assesses both positive and negative family relationships (e.g., “Family members help support each other.” vs. “Family members often criticize each other.”) Each item will be coded with either affirmative (1) or negative (0) responses. This measure has been found to have a reliability of $\alpha=.78$ and is
therefore internally consistent. This measure has been widely used (e.g., Kenny & Mceachern, 2007).

Perceived parenting. The Perceived Parental Behaviour (PPB) survey, designed to assess children’s views of parenting style, (Reitzle, Winkler-Metzke, & Steinhausen, 2001) will be used. This survey consists of 27 items, each containing a 4-point Likert-type scale representing different aspects of parenting behavior. Twelve items are related to emotional support, nine items are related to psychological pressure, and six items are related to demands/control. Alpha coefficients of internal consistency range between 0.68 and 0.89 for this measure. This measure has been used to assess perceived parenting in many studies including a study by Steinhausen, Eschmann, and Metzke (2007). The PPB scale was used in the Steinhausen et al. (2007) study with children ages six and older, showing it to be an appropriate scale for the children involved in this study.

Attitudes toward victims. The Attitudes to Victims Scale (Rigby, 1997) will be used to assess parental views of victimization. This scale consists of ten items, half positive and half negative (e.g. “Kids should not complain about being bullied”). High scores indicate high tolerance of victimization. This measure has been found to have a reliability of $\alpha=.84$ and is therefore internally consistent. This measure has been widely used (e.g., Beran, Tutty, & Steinrath, 2004).

Parents having been bullied. The Adult Measure of Childhood Peer Victimization Scale (See Appendix A) will be used to assess the previous peer victimization status of parents involved in this study. This scale consists of 10 items that determine whether the parent experienced chronic peer victimization when she was a child (e.g., “I was not a
very confident child”). Responses are coded on a 7-point Likert-type scale (1 =
*completely disagree*, 7 = *completely agree*). High scores will indicate high probability of
chronic victimization as a child. Because this measure was developed for the purpose of
this study, reliability and validity will have to be assessed prior to its use. An analysis
using Cronbach’s alpha will be conducted to determine internal consistency for this
measure.

*Parental advice toward child.* The Parental Advice Toward Peer-Victimized
Children Scale (See Appendix B) will be used to assess which advice parents direct
toward their children in this study. This scale consists of 11 items that determine what
type of advice a parent most likely enforces (e.g. “I tell my child that if another child
physically hits him/her, that he/she should physically defend himself/herself”). Responses
are coded on a 7-point Likert-type scale (1 = *completely disagree*, 7 = *completely agree*).
Items either indicate either a “physical aggression” approach, a “passivity/ peace”
approach, or an “assertive/ confidence” approach, combined with an “absence/ presence”
approach. High scores on certain items indicate a preference for one of the three
approaches as well as absence or presence in giving advice. Because this measure was
developed for the purpose of this study, reliability and validity will have to be assessed
prior to its use. An analysis using Cronbach’s alpha will be conducted to determine
internal consistency for this measure.

*Outcome Variables*

*Child peer victimization.* The Who Bullies Whom (WBW) instrument (Borgotti,
2002) will be used to assess chronic victimization in children. This measure asks children
the following questions: “Are there some kids in your class who really like to bully other
kids around? Please write the name of a kid that bullies other kids around,” then, “which
kids do this bully like to pick on the most?” Children will be allowed to nominate two
more bullies and their victims. Scores will be calculated from the quotient of the number
of nominations received by a child for an item over the number of potential nominations.
Based upon majority scores, children will then be categorized as a chronic victim,
chronic bully, bully-victim, or as a control. The criterion used to make these
categorizations will be based upon the scores received from the sample. This measure has
been found to have a reliability of $\alpha=.78$ and is therefore internally consistent. It has also
been used in many studies including a study by Sijtsema, Veenstra, Lindenberg, and
Salmivalli (2009).

*Child aggressive beliefs.* Children’s aggressive beliefs will be assessed by
administering a 12-item Beliefs about Aggression Scale (cf. Slaby & Guerra, 1988). This
measure evaluates children’s endorsement of appropriateness of aggression as well as the
perceived legitimacy of a way to solve problems (e.g., “It’s OK to fight”), the relation of
aggression to increased self-esteem (e.g. “I feel like a champion when I fight”), as well as
the relation of aggression to perceived social status (e.g., “If you don’t fight, others will
think you are a loser”). Responses are coded on a 4-point Likert-type scale (1 =
*completely disagree*, 4 = *completely agree*). Higher scores indicated higher aggressive
beliefs in children. This scale has been found to have a Cronbach’s alpha of .72 and has
been used in many studies including a study by BurdzovicAndreas and Watson (2009).

*Effectiveness of implemented parental advice.* The Effectiveness of Implemented
Parental Advice Scale (See Appendix C) will be used to measure how children, both
victims, and controls, perceive the effectiveness of their parent’s advice in actual bullying situations. This scale consists of 10 items that assess child beliefs of how effective their parent’s advice was for them (e.g., “When I follow my parent’s advice, bullies usually leave me alone”). Responses are coded on a 7-point Likert-type scale ($1 = \text{completely disagree}, \ 7 = \text{completely agree}$). Higher scores indicate higher effectiveness of implemented parental advice. Because this measure was developed for the purpose of this study, reliability and validity will have to be assessed prior to its use. An analysis using Cronbach’s alpha will be conducted to determine internal consistency for this measure.

**Design and Procedure**

I will solicit three schools (each in three socio-economic categories: low, mid, high) and each will be given and informed consent form and will be asked to sign a written agreement of participation. Written parental consent of each child will then be collected. The children with parental consent and who give their assent to participate will then fill out the first questionnaire designed to assess level of peer victimization and bullying. All parents of children will then be contacted and asked to participate for compensation. After agreeing to participate for compensation, an interviewer will meet with each family at their respective homes to administer parental questionnaires and surveys.

**Proposed Analyses**

Descriptive statistics of the data will be generated first in order to examine the distributions of each variable. All the variables will be examined first for colinearity and will be assessed for normality of distribution and linearity. If a variable is skewed or is
The Effect of Parental Attitudes

Not normally distributed, a transformation process will be applied. To test the hypotheses stated above, a series of three hierarchical multiple regression analyses will be conducted. The multiple regression models will be fit to see if the predictor variables, “family environment”, “parental advice toward child”, “parents having been bullied”, “parental attitudes towards victims”, and “perceived parenting” are related to (and predict) the outcome variables, “child peer victimization”, “effectiveness of implemented parental advice”, and “child aggressive beliefs”. The control variable “demographics” will also be regressed onto the outcome variables to act as controls for the main predictor variables above. Each variable will be introduced into regression models to regress each outcome variable. The first variables that will be introduced in the regression model is the demographic variable, then the predictor variable, “family environment”, then “parental attitudes toward victims”, because it seems relevant first to examine the predictor variables that show environmental influences and parental beliefs about their child’s victimization status. The second predictor, “parents having been bullied”, will be introduced in the second model, followed by the predictor “parental advice toward child”, and then “perceived parenting”. After examining the regression models for each regression, the best models will be chosen to show which variables predict victimization in children, child aggressive beliefs, and effectiveness of implemented parental advice. Each chosen model will be examined and interpreted (e.g., examining the slope coefficients for each variable in the chosen model). The order of which each predictor variable is entered into the regression models may be further examined or changed, since there is no particular reason for the order presented above.
Structural equation modeling (SEM) with observed variables may be an appropriate statistical tool in order to test this model. Thus, an SEM model might be used in addition to the multiple regression models described in the proposed analyses. A consultant will be acquired in the event that this approach is taken in order to assess the research hypotheses.

Expected Results

Statistical results would hypothetically mirror each proposed hypothesis. Once again, it is hypothesized that parenting beliefs will predict the discipline techniques involved in attempting to reduce peer victimization levels in their children. I also hypothesize that parental beliefs that are less accepting of peer victimization will result in more cases of their children becoming chronic victims of peer bullying. The basis for this hypothesis stems from the assumption that parents who are less accepting of peer victimization may take more extreme measures to ensure that their children do not develop into chronic victims. In addition, I hypothesize that parenting strategies that encourage children to act assertively and confidently will result in less chronic peer victimization, opposed to strategies of fighting back, ignoring the bully, or seeking help from adults. In addition, I hypothesize that parents with a history of being victimized as children will more often have children who are being currently victimized by peers. This relation has not been explored before this study, however the review by Bernstein and Watson (1997) discussed the possibility of biological influences of chronic child victims, leading to this research question. Additionally, this study will look at how certain demographic factors of each family correlate with peer victimization in children. The
results of the multiple regressions that will be run for each outcome variable will hypothetically reflect the hypotheses stated in the proposed analyses.

Significance

The findings of this research may have practical applications, helping to reduce aggression, bullying, and victimization. These findings may also be applied to bullying dynamics in adults as well, because they could also employ effective strategies (e.g., peaceful, fighting back, assertive) to deescalate bully/victim dynamics. Knowing effective measures in deescalating directed aggression might also lead to theoretical approaches that can be applied socially and politically (e.g. civil mediation, war strategy). These results would also be useful to understand better the effect of parenting behavior on the peer victimization of children and can be used to affect parenting strategies in the future.
References


1181-1197.


Appendix A

The Adult Measure of Childhood Peer Victimization Scale

1. I was not a very confident child.

1 2 3 4 5 6 7

strongly disagree moderately disagree mildly disagree no opinion mildly agree moderately agree strongly agree

2. I frequently experienced the brunt of peer acts of aggression.

1 2 3 4 5 6 7

strongly disagree moderately disagree mildly disagree no opinion mildly agree moderately agree strongly agree

3. As a child, I spent a lot of my time worrying about being picked on.

1 2 3 4 5 6 7

strongly disagree moderately disagree mildly disagree no opinion mildly agree moderately agree strongly agree

4. I would consider myself to have been a frequent victim of peer bullying when I was a child.

1 2 3 4 5 6 7

strongly disagree moderately disagree mildly disagree no opinion mildly agree moderately agree strongly agree

5. I was a defensive and aggressive child.

1 2 3 4 5 6 7

strongly disagree moderately disagree mildly disagree no opinion mildly agree moderately agree strongly agree

6. As a child, I had a group of friends that I could count on to defend me from bullies.

1 2 3 4 5 6 7

strongly disagree moderately disagree mildly disagree no opinion mildly agree moderately agree strongly agree
7. I was very close to my mother/parent when I was a child.

1  2  3  4  5  6  7
strongly  moderately  mildly  no opinion  mildly  moderately  strongly
disagree  disagree  disagree  no opinion  agree  agree  agree

8. When I was a child I was popular with peers.

1  2  3  4  5  6  7
strongly  moderately  mildly  no opinion  mildly  moderately  strongly
disagree  disagree  disagree  no opinion  agree  agree  agree

9. Other children frequently tried to physically or emotionally hurt me when I was a child.

1  2  3  4  5  6  7
strongly  moderately  mildly  no opinion  mildly  moderately  strongly
disagree  disagree  disagree  no opinion  agree  agree  agree

10. I frequently made fun of or picked on other children when I was a child.

1  2  3  4  5  6  7
strongly  moderately  mildly  no opinion  mildly  moderately  strongly
disagree  disagree  disagree  no opinion  agree  agree  agree

Reverse Score Items: 5, 6, 8, and 10
Appendix B
The Parental Advice Toward Peer-Victimized Children Scale

1. I tell my child that if another child physically hits him/her, that he/she should physically defend himself/herself.
   1  2  3  4  5  6  7
   strongly disagree disagree disagree no opinion mildly moderately strongly agree agree agree

2. I tell my child that it is never OK to hit another child—even in self-defense.
   1  2  3  4  5  6  7
   strongly disagree disagree disagree no opinion mildly moderately strongly agree agree agree

3. I tell my child that he/she should assertively tell a bully that his/her behavior is inappropriate and that he/she should leave your child alone.
   1  2  3  4  5  6  7
   strongly disagree disagree disagree no opinion mildly moderately strongly agree agree agree

4. I tell my child to always walk away from a fight.
   1  2  3  4  5  6  7
   strongly disagree disagree disagree no opinion mildly moderately strongly agree agree agree

5. I tell my child to stand up to a bully, but not with physical violence.
   1  2  3  4  5  6  7
   strongly disagree disagree disagree no opinion mildly moderately strongly agree agree agree
6. I would encourage my child to take boxing, self-defense classes, or karate in order to become tougher.

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7. I would rather my child go to an adult for help than to stand up to a bully by himself/herself.

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8. I encourage my child to join activities that encourage confidence rather than activities that develop physical toughness.

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9. I tell my child that bullies will not want to mess with him/her if he/she becomes more aggressive.

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10. I would rather my child work out his/her own battles than for me to get involved.

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11. I encourage my child to come to me when he/she has been bullied by peers.

1 2 3 4 5 6 7

strongly moderately mildly no opinion mildly moderately strongly
disagree disagree disagree agree agree agree

Physical aggression: 1, 6, 9
Passivity/peace: 2, 4, 7
Assertiveness: 3, 5, 8
Avoidance: 10, 11
Appendix C

The Effectiveness of Implemented Parental Advice Scale

1. I follow the advice that my parent gives me about how to react toward a bully.

   1 2 3 4 5 6 7

   strongly  moderately  mildly  no opinion  mildly  moderately  strongly
   disagree  disagree  disagree  no opinion  agree  agree  agree

2. When I follow my parent’s advice, bullies usually leave me alone.

   1 2 3 4 5 6 7

   strongly  moderately  mildly  no opinion  mildly  moderately  strongly
   disagree  disagree  disagree  no opinion  agree  agree  agree

3. When I follow my parent’s advice, bullies pick on me more.

   1 2 3 4 5 6 7

   strongly  moderately  mildly  no opinion  mildly  moderately  strongly
   disagree  disagree  disagree  no opinion  agree  agree  agree

4. I like to follow my parent’s advice about how to respond to a bully because it usually helps make the situation better.

   1 2 3 4 5 6 7

   strongly  moderately  mildly  no opinion  mildly  moderately  strongly
   disagree  disagree  disagree  no opinion  agree  agree  agree

5. I do not usually follow my parent’s advice, because his/her advice does not help make the situation better.

   1 2 3 4 5 6 7

   strongly  moderately  mildly  no opinion  mildly  moderately  strongly
   disagree  disagree  disagree  no opinion  agree  agree  agree

6. It is hard for me to follow my parent’s advice, so I usually respond to bullies in other ways than how they told me to respond.

   1 2 3 4 5 6 7
strongly moderately mildly no opinion mildly moderately strongly disagree disagree disagree agree agree agree

7. Bullies have targeted me less since I started following my parent’s advice.

1 2 3 4 5 6 7

strongly moderately mildly no opinion mildly moderately strongly disagree disagree disagree agree agree agree

8. I have developed better strategies than my parent’s strategies in terms of handling bullying.

1 2 3 4 5 6 7

strongly moderately mildly no opinion mildly moderately strongly disagree disagree disagree agree agree agree

9. My parents know how to help me stop bullies from targeting me.

1 2 3 4 5 6 7

strongly moderately mildly no opinion mildly moderately strongly disagree disagree disagree agree agree agree

10. I try to use my parent’s advice whenever a bully picks on me, but most of the time I find it hard to follow through with it.

1 2 3 4 5 6 7

strongly moderately mildly no opinion mildly moderately strongly disagree disagree disagree agree agree agree

Reverse Score: 3, 5, 6, 8, 10