

Bullying and Suicide Prevention

About Technical Assistance Briefs. The MCH Evidence Center provides ongoing technical assistance (TA) to Title V agencies related to the emerging evidence base, strategies, and measures related to many topics interconnected with National Performance Measures and other critical topics in MCH. *Technical Assistance Briefs* are an outcome of these TA sessions that are designed to act as *conversation starters* in thinking about programs that can be developed to address issues that affect women, infants, children, adolescents, youth, families, and communities. These briefs are not meant to be comprehensive; full analyses of the NPM topic areas are provided in [Evidence Analysis Reports](#).

The Center makes these customized briefs available during TA and on the program website to identify evidence-based/informed strategies, promising practices, examples of ESMs from the field and peer-reviewed resources. Please [contact us](#) if you would like us to develop a similar report for topics that you are working on.

Initial Query for this Brief. Identify measures and best practices around Bullying and Suicide Prevention.

Evidence-Based Strategy Measures

ESM: Program Integration. These ESMs have been chosen by other states. You can review the ESMs to see if any resonate with your goals. Evidence Center staff are available to talk through how you could modify select ESMs to serve your needs.

State	ESM
AZ	ESM 9.1 Number of school professionals who receive technical assistance on bullying prevention.
AZ	ESM 9.2 Number of schools implementing bullying prevention guidance.
AZ	ESM 9.3 Number of unique page views in the must stop bullying campaign website.
AZ	ESM 9.4 Number of unique pageviews to the child page of the must stop bullying campaign website.
AZ	ESM 9.5 Total number of youth served by an organization trained on mental health first aid for youth.
AK	ESM 9.1 Number of school personnel, partners, and community members participating in Youth Mental Health First Aid (MHFA) trainings
CO	ESM 9.1 Percent of youth who identify as transgender who have a trusted adult to go to for help with a serious problem
CO	ESM 9.2 Percent of youth of color who have a trusted adult to go to for help with a serious problem
FL	ESM 9.1 The number of students who participate in an evidence-based program that promotes positive youth development and non-violence intervention skills
GA	ESM 9.1 Number of schools that receive guidance on laws, policies, and evidence-based strategies to prevent bullying
GU	ESM 9.1 The percent of Bureau of Family Health and Nursing Services receiving lesbian, gay, bisexual, transgender and questioning (LGBTQ) cultural competency training.
ID	ESM 9.1 Number of adult advisors who received evidence-based suicide prevention training

IN	ESM 7.2.1 Reduce count of suicide-related hospitalizations in adolescents, ages 10 - 19.
ME	ESM 9.1 Number of administrators, educators, support staff taking a new Social-Emotional Learning (SEL) training.
MI	ESM 9.1 Number of secondary schools implementing the Michigan Model for Health & Social and Emotional Health Module with 80% fidelity
MT	ESM 9.1 Percent of activity goals to reduce adolescent bullying which are met by county public health departments using MCHBG funding for the work.
NJ	ESM 9.1 Reduce the percentage of high school students who are electronically bullied (counting being bullied through texting, Instagram, Facebook, or other social media).
NJ	ESM 9.2 Reduce the percentage of high school students who are bullied on school property.
OK	ESM 9.1 The number of trainings provided to school and community staff on bullying prevention
OR	ESM 9.5 Among local grantees who select bullying prevention, percent who report improved knowledge, skills, or policies based on provided technical assistance.
RI	ESM 9.1 Number of adolescents screened for suicide ideation referred for support
SC	ESM 9.1 Publish a white paper describing the impact and cost of bullying on families, stratified by race/ethnicity and related equity metrics
SD	ESM 7.2.1 # of students trained in teen Mental Health First Aid
VA	ESM 7.2.1 Number of gatekeepers trained in the prevention of suicide among youth
WV	ESM 9.3 Number of schools and/or youth serving organizations in target communities that have implemented a comprehensive bullying program
WI	ESM 7.2.2 Cumulative number of individuals who receive gatekeeper training (e.g., QPR, Mental Health First Aid) in suicide prevention

Evidence-Based Strategies – What Works for Health

The following programs have been identified as effective models related to bullying and suicide prevention

Title	Link	Category
School-based violence & bullying prevention programs	http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/school-based-violence-bullying-prevention-programs	Scientifically supported
Attendance interventions for chronically absent students	http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/attendance-interventions-for-chronically-absent-students	Scientifically supported
School-wide positive behavioral interventions and supports (Tier 1)	http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/school-wide-positive-behavioral-interventions-and-supports-tier-1	Scientifically supported
Cross-age youth peer mentoring	https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/cross-age-youth-peer-mentoring	Some evidence
Multisystemic Therapy (MST) for juvenile offenders	http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/multisystemic-therapy-mst-for-juvenile-offenders	Scientifically supported
Treatment Foster care Oregon	http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/treatment-foster-care-oregon	Scientifically supported
School-based social and emotional instructions	http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/school-based-social-and-emotional-instruction	Scientifically supported

Youth peer mentoring	http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/youth-peer-mentoring	Some evidence
Trauma-informed schools	http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/trauma-informed-schools	Some evidence
Universal school-based suicide awareness & education programs	http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/universal-school-based-suicide-awareness-education-programs	Some evidence
Crisis lines	http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/crisis-lines	Some evidence
Telemental health services	http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/telemental-health-services	Some evidence
Mobil health for mental health	http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/mobile-health-for-mental-health	Some evidence
School and district level zero tolerance policies	http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/school-and-district-level-zero-tolerance-policies	Evidence of ineffectiveness
Mental health benefits legislation	http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/mental-health-benefits-legislation	Scientifically supported

Evidence-Based Resources

Resources from the MCH Digital Library (2015-2019)

AMCHP's implementation toolkit for National Performance Measure 9: Percent of adolescents, ages 12 through 17, who are bullied or who bully others. *Annotation:* This toolkit contains examples of strategies state Title V programs can use to address National Performance Measure 9, percent of adolescents, ages 12 through 17, who are bullied or who bully others. Strategies are listed in these categories: (1) assessment; (2) communication efforts; (3) implementation of evidence-based practices; (4) technical assistance and training; (5) policy and systems approaches; and (6) other program strategies.

<https://create.piktochart.com/output/29583890-npm-9-implementation-toolkit>

Bullying prevention: 2015 resource guide. *Annotation:* This guide provides information and resources about bullying prevention. Contents include descriptions of organizations and websites; data, definitions, and research; programs, campaigns, and toolkits; policies, laws, and legislation; publications and resources; and information about at-risk populations and bullying and co-occurring issues.

<http://www.childrensafetynetwork.org/sites/childrensafetynetwork.org/files/Bullying%20Prevention.pdf>

Summary of findings: 2014 CSN bullying prevention environmental scan. *Annotation:* This document presents results from a survey of state maternal and child health (MCH) and injury and violence prevention program directors in all 50 states and the District of Columbia about state health agency involvement in bullying prevention efforts. Topics include leadership of state bullying prevention efforts, strategies used by state public health agencies to prevent bullying, types of bullying addressed by state public health agencies, systems and populations addressed by state public health agency bullying prevention efforts, funding for bullying prevention, strategic plans for bullying prevention, measuring progress in bullying prevention, and multi-agency bullying prevention task forces and committees. Strengths, challenges, opportunities, and conclusions are also addressed.

<http://www.childrensafetynetwork.org/sites/childrensafetynetwork.org/files/Bullying%20Prevention.pdf>

School health profiles: characteristics of health programs among secondary schools. *Annotation:* This report summarizes a biennial survey of middle and high school principals and lead health education teachers to assess school health policies and practices in states, large urban school districts, and territories. Topics include school health education requirements and content, physical education and physical activity, practices related to bullying and sexual harassment, school health policies related to tobacco-use prevention and nutrition, school-based health services, family engagement and community involvement, and school health coordination. Maps, questionnaires, and data files are also available.

<http://www.cdc.gov/healthyyouth/data/profiles/results.htm>

Strengthen the evidence base for maternal and child health programs: NPM 9 - Bullying. *Annotation:* This brief identifies evidence-informed strategies for state Title V programs to consider to reduce the number of adolescents, ages 12–17, who are bullied. Contents include information about the evidence continuum and the approach to the review, including examples of each type of intervention and its evidence rating; key findings; and implications.

https://www.mchevidence.org/documents/reviews/npm_9_bullying_evidence_review_brief_feb_2017.pdf

Strengthen the evidence base for maternal and child health programs: environmental scan of strategies National Performance Measure (NPM) #9. *Annotation:* This environmental scan identifies collections of strategies to advance performance for NPM #9: Bullying--percent of adolescents, ages 12 through 17, who are bullied or bully others. It includes a list of reviews and compilations on the topic; frameworks and landmark initiatives; databases and related search terms; and inclusion and exclusion criteria.

https://www.mchevidence.org/documents/scans/bullying_05_20_16.pdf

State Board of Education statement and guidance on safe and supportive learning environments for lesbian, gay, bisexual, transgender, and questions (LGBTQ) students. *Annotation:* These voluntary guidelines are intended to support schools in creating an inclusive environment for all students in Michigan. Contents include best practice strategies for school districts to create a supportive learning environment with specific guidance on supporting transgender and gender nonconforming students. Definitions are included.

https://www.michigan.gov/documents/mde/SBEStatementonLGBTQYouth_534576_7.pdf

Anti-bullying policies and enumeration: An info brief for local education agencies. *Annotation:* This brief for local education agency staff describes enumeration in the context of anti-bullying policies, referring to any specific listing of traits or characteristics of students that could be the basis of bullying. Topics include support for and concerns about enumeration, research on the effectiveness of enumerating anti-bullying policy, and key considerations and actions for effective implementation of all anti-bullying policies.

http://www.cdc.gov/healthyyouth/health_and_academics/pdf/anti_bullying_policies_infobrief.pdf

Bullying and absenteeism: Information for state and local education agencies. *Annotation:* This brief for state and local education agencies presents findings from the peer-reviewed literature on associations between in-person and electronic bullying victimization and missing school because of safety concerns among students in high school. The brief also describes what education agencies can do to prevent bullying. Topics include sharing information about potential education-related consequences of bullying, addressing electronic bullying beyond school boundaries, responding to co-occurring types of bullying, and opportunities for collaboration with health professionals.

https://www.cdc.gov/healthyyouth/health_and_academics/pdf/fs_bullying_absenteeism.pdf

Preventing bullying through science, policy, and practice. *Annotation:* This document reports on the state of the science on the biological and psychosocial consequences of peer victimization and the risk and protective factors that either increase or decrease peer victimization behavior and consequences. Contents include information about the scope of the problem, social contexts that can either attenuate or exacerbate the effect of individual characteristics on bullying behavior, consequences of bullying behavior, preventive interventions, law and policy, and future directions.

<http://www.nap.edu/catalog/23482/preventing-bullying-through-science-policy-and-practice>

Assessing prevention capacity & implementing change. *Annotation:* This document presents two tools: the Bullying Prevention Capacity Assessment and the Change Package. The assessment was created to help state health departments (SHDs) and others working to prevent bullying to assess where their efforts are in relation to best practices in bullying prevention and to help guide the implementation of effective bullying prevention activities and programs. The change

package examines evidence-informed and evidence-based drivers that build organizational strength to effect change and strategies that support prevention efforts. An appendix presents a review of the evidence on bullying prevention.

<https://mchb.hrsa.gov/sites/default/files/mchb/MaternalChildHealthInitiatives/mchb-change-pkg-12-4-17-sxf.pdf>

Articles of Interest with links

[Behavior Change Techniques Included in Reports of Social Media Interventions for Promoting Health Behaviors in Adults: Content Analysis Within a Systematic Review](#)

- This study within a review provides a detailed description of the behavioral change techniques (BCTs) and their dose to promote behavior change in web-based, interactive social media interventions. The active ingredient of an intervention that aims to change behavior can be defined as a behavior change technique (BCT), which consists of “an observable, replicable, and irreducible component of an intervention designed to alter or redirect causal processes that regulate behaviour” [16]. Most studies (n=31) used tailored, interactive websites to deliver the intervention; Facebook was the most used mainstream platform. **Instruction on how to perform the behavior, social support (unspecified), self-monitoring of behavior, information about health consequences, and credible source were identified in the top 5 BCTs delivered with the highest intensity.**

[Tweet for Behavior Change: Using Social Media for the Dissemination of Public Health Messages](#)

- Social media public health campaigns have the advantage of tailored messaging at low cost and large reach, but little is known about what would determine their feasibility as tools for inducing attitude and behavior change. The aim of this study was to test the feasibility of designing, implementing, and evaluating a social media-enabled intervention for skin cancer prevention. A quasi-experimental feasibility study used social media (Twitter) to disseminate different message “frames” related to care in the sun and cancer prevention.
- **Findings suggested that shocking and humorous messages generated greatest impressions and engagement, but information-based messages were likely to be shared most.** Of the 4 specific message frames utilized (informative; personal story; shock or disgust; humorous), a shock or disgust tweet (#eek) achieved the most impressions (n=2369), followed by an informative message (#info, n=2258). The most engaging tweet was that with humor (#geg, n=148), followed by 1 characterized by shock or disgust (#eek; n=147). The most retweeted message was that of an informative nature (#info), shared by 17 followers. The most retweeted #story message was shared 7 times, compared with 9 for #eek and 10 for #geg messages. When comparing the median values for each message frame, shocking messages achieved greater impressions (median 565), engagements (15.5), and retweets (2.5), whereas humor messages achieved a greater median engagement rate (2.5%).
- **Tweets that included an influencer in the message generated greater numbers of impressions.** Influencer posts also created the most impressions when on a #eek post (n=11,349) and a #story post (n=9612). **Tweets that were paid-for—promoted posts—did not notably increase impressions, engagements, or retweets.** The extent of behavioral change as a result of the campaign remains to be explored, however, the change of attitudes and knowledge is promising.

[The effects of social media on students’ behaviors; Facebook as a case study](#)

- This 2106 study aims to examine the effects of social media on student's behaviors which will mainly focus on Facebook. The participants chosen were 362 high school students from level 9 to
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12. The findings highlight that Facebook is used for communication entertainment and sharing news, pictures and songs. In addition, their Facebook profile picture is alone, and students were aware that swearing is considered a form of misconduct, which is a good sign. The study also indicates that students were aware of protecting their social identity as their Facebook shares are not public. Furthermore, they respect privacy as they do not use their friend's Facebook account. Highlights of the study include:

- Students reflect their mood on social media which creates a chance for consultancy.
- Nice Facebook comments increase students' confidence.
- Students know how to control their privacy.
- Students' Facebook use shows indications of narcissism.

[Suicide Prevention Media Campaigns: A Systematic Literature Review](#)

- The current review set out to synthesize information about the effectiveness of suicide prevention media campaigns. Studies that looked at whether campaign exposure leads to improved knowledge and awareness of suicide found support for this. Most studies that considered whether campaign materials can achieve improvements in attitudes toward suicide also found this to be the case, although there were some exceptions. Some studies found that media campaigns could boost help-seeking, whereas others suggested that they made no difference or only had an impact when particular sources of help or particular types of help-seeking were considered. Relatively few studies had sufficient statistical power to examine whether media campaigns had an impact on the ultimate behavioral outcome of suicides, but those that did demonstrated significant reductions.
- Our review indicates that media campaigns should be considered in the suite of interventions that might be used to prevent suicide. Evidence for their effectiveness is still amassing, but there are strong suggestions that they can achieve positive results in terms of certain suicide-related outcomes. **Care should be taken to ensure that campaign developers get the messaging of campaigns right**, and further work is needed to determine which messages work and which ones do not, and how effective messages should be disseminated.

[A Systematic Review of Mass Media Campaigns for Suicide Prevention: Understanding Their Efficacy and the Mechanisms Needed for Successful Behavioral and Literacy Change](#)

**No access to full version*

- This review aimed to address key knowledge gaps regarding how mass media campaigns can be optimized to prevent suicide, by looking at their global efficacy, and mechanisms related to successful outcomes. **For behavioral outcomes, mass media campaigns appear to be most effective when delivered as part of a multicomponent suicide prevention strategy, while “standalone campaigns” were modestly useful for increasing suicide literacy. Level of exposure, repeat exposure, and community engagement appeared to be fundamental to the success of these campaigns;** however, these constructs were poorly adhered to in the development and implementation of campaigns.

[A computational study of mental health awareness campaigns on social media](#)

**No access to full version*

- As public discourse continues to progress online, it is important for mental health advocates, public health officials, and other curious parties and stakeholders, ranging from researchers, to those affected by the issue, to be aware of the advancing new mediums in which the public can share content ranging from useful resources and self-help tips to personal struggles with respect to both illness and its stigmatization. A better understanding of this new public discourse on mental health,

often framed as *social media campaigns*, can help perpetuate the allocation of sparse mental health resources, the need for educational awareness, and the usefulness of community, with an opportunity to reach those seeking help at the right moment. The objective of this study was to understand the nature of and engagement around mental health content shared on mental health campaigns, specifically #MyTipsForMentalHealth on Twitter around World Mental Health Awareness Day in 2017. We collected 14,217 Twitter posts from 10,805 unique users between September and October 2017 that contained the hashtag #MyTipsForMentalHealth. With the involvement of domain experts, we hand-labeled 700 posts and categorized them as (a) Fact, (b) Stigmatizing, (c) Inspirational, (d) Medical/Clinical Tip, (e) Resource Related, (f) Lifestyle or Social Tip or Personal View, and (g) Off Topic. After creating a “seed” machine learning classifier, we used both unsupervised and semi supervised methods to classify posts into the various expert identified topical categories. We also performed a content analysis to understand how information on different topics spread through social networks. Our support vector machine classification algorithm achieved a mean cross-validation accuracy of 0.81 and accuracy of 0.64 on unseen data.

- **We found that inspirational Twitter posts were the most spread with a mean of 4.17 retweets, and stigmatizing content was second with a mean of 3.66 retweets.** Classification of social media–related mental health interactions offers valuable insights on public sentiment as well as a window into the evolving world of online self-help and the varied resources within.
- **Our results suggest an important role for social media–based peer support to not only guide information seekers to useful content and local resources but also illuminate the socially-insular aspects of stigmatization.** However, our results also reflect the challenges of quantifying the heterogeneity of mental health content on social media and the need for novel machine learning methods customized to the challenges of the field.

Application of Behavioral Economics Insights to Increase Effectiveness of Public Awareness Campaigns

- The traditional (neoclassical) economics assumes that every individual is egoistically oriented toward achieving their main goal (their own interest), which is to maximize utility. However, in many studies referring to various aspects of human behavior, behavioral economics proves that human choices vary depending on the circumstances, place, time, norms and social influences, emotional judgments, cognitive distortions and biases, simplifying reasoning principles applied (heuristics), and at the same time on how and in what circumstances the choice is made (the choice architecture). The objective of the article is to define the concepts of behavioral economics which are the most interesting from the point of view of increasing the effectiveness of public awareness campaigns. In order to determine which concepts of behavioral economics are the most interesting from the point of view of increasing the effectiveness of social campaigns, an analysis of the results of the systematic publication search in the Google Scholar database has been carried out. **Literature overview has shown that the effectiveness of social campaigns can be increased by using the knowledge provided by behavioral economics on the subject of reflexive, unreflective, unwise, and fast cognitive processes carried out by individuals.**

Tweet for Behavior Change: Using Social Media for the Dissemination of Public Health Messages

- Social media public health campaigns have the advantage of tailored messaging at low cost and large reach, but little is known about what would determine their feasibility as tools for inducing attitude and behavior change. The aim of this study was to test the feasibility of designing, implementing, and evaluating a social media–enabled intervention for skin cancer prevention. A quasi-experimental feasibility study used social media (Twitter) to disseminate different message “frames” related to care in the sun and cancer prevention with two phases in Northern Ireland. A

pre- and post-intervention Web-based survey recorded skin cancer prevention knowledge and attitudes in Northern Ireland (population 1.8 million).

- **The results were a total of 417,678 tweet impressions, 11,213 engagements, and 1211 retweets related to our campaign. Shocking messages generated the greatest impressions (shock, n=2369; informative, n=2258; humorous, n=1458; story, n=1680), whereas humorous messages generated greater engagement (humorous, n=148; shock, n=147; story, n=117; informative, n=100) and greater engagement rates compared with story tweets. Informative messages, resulted in the greatest number of shares (informative, n=17; humorous, n=10; shock, n=9; story, n=7).**
- **Social media–disseminated public health messages reached more than 23% of the Northern Ireland population. A Web-based survey suggested that the campaign might have contributed to improved knowledge and attitudes toward skin cancer among the target population. Findings suggested that shocking and humorous messages generated greatest impressions and engagement, but information-based messages were likely to be shared most. The extent of behavioral change as a result of the campaign remains to be explored, however, the change of attitudes and knowledge is promising. Social media is an inexpensive, effective method for delivering public health messages. However, existing and traditional process evaluation methods may not be suitable for social media.**

[Behavior Change Techniques Included in Reports of Social Media Interventions for Promoting Health Behaviors in Adults: Content Analysis Within a Systematic Review](#)

- Repeated article from [Behavior Change Techniques Included in Reports of Social Media Interventions for Promoting Health Behaviors in Adults: Content Analysis Within a Systematic Review](#)

[Peer-Based Social Media Features in Behavior Change Interventions: Systematic Review](#)

- Incorporating social media features into digital behavior change interventions (DBCIs) has the potential to contribute positively to their success. The aim of this study was to provide a systematic review of DBCIs targeting modifiable behavioral risk factors that have included social media features as part of their intervention infrastructure. A taxonomy of social media features is presented to inform the development, description, and evaluation of behavioral interventions. A total of 5264 articles were screened, and 143 articles describing a total of 134 studies were retained for full review. **The majority of studies (70%) reported positive outcomes, followed by 28% finding no effects with regard to their respective objectives and hypothesis, and 2% of the studies found that their interventions had negative outcomes. Few studies reported on the association between the inclusion of social media features and intervention effect.** A taxonomy of social media features used in behavioral interventions has been presented with 36 social media features organized under 7 high-level categories. The taxonomy has been used to guide the analysis of this review.
- **A number of studies reported that the inclusion of social media features increased user engagement in behavioral interventions, and in at least one study, higher levels of sustained user engagement through interaction with multiple social media features was reported [49]. However, when compared with face-to-face alternatives, social media features were found to produce lower levels of engagement.** Among the studies that reported the perceived usefulness or helpfulness, or sense of enjoyment and satisfaction of participants when using social media features included in interventions, more than half referred to features from the communication category, more specifically, online forums. Interestingly, in most cases, participants with access to these features felt pressured, motivated, or felt both to achieve goals.
- In terms of social media features affecting behavioral outcome, our analysis found that the most effective features were communication-based, and more specifically, asynchronous ones (e.g., online forums). Indeed, **features from this subcategory of communication are known to provide**

more direct social support either from peers or trained professionals interacting with users on a one-to-one or one-to-many basis.

Social media and applications to health behavior

Not directly related to bullying but may be of interest

- Social media is ingrained in daily life, with high usage and apparent ease of engagement making it an attractive tool for health behavior interventions. Approaches have varied widely in terms of target behavior, social networking platforms used, and intervention characteristics. Targeted applications of Facebook, Twitter, online social communities and apps with social features appear to enhance some aspects of health, and offer unique insights into [health-related behavior](#). However, delivery of an intervention that incorporates an established and popular social media platform does not guarantee impact. Online social media is complex, evolving and nuanced. Future challenges for the field will include evaluating interventions in a diverse populace and designing features that sustain engagement and behavior change. Highlights
 - Social media presents an unprecedented opportunity to change health through online influence.
 - Of all the platforms available, Facebook features most commonly in health behavior change research.
 - Twitter, online communities and apps are increasingly appearing in health research.
 - Randomized controlled trials investigating the efficacy of social media for health are rare.
 - Continued research is required to refine the application of social media for better health.

Social media effects on sustainable mobility opinion diffusion: Model framework and implications for behavior change

- This paper presents a dynamic agent-based simulation methodology capturing the impact of information and communications technology (ICT) like social media on diffusion of environmentally friendly travel mode consideration through social networks. The agent-based models provide visual comparisons of the effects of network structure and social media influence on opinion diffusion, the way opinions spread, and which agents exhibit the strongest influence. We identify types of social media influencers that most effectively encourage adoption of sustainable transportation alternatives and present an illustrative framework of the mechanisms that drive opinion diffusion.
- **Exploratory findings suggest that: (1) scale-free networks provide the slowest initial diffusion rate but the greatest overall diffusion over time, (2) the most effective behavior incentivization strategies depend on network structure, (3) in scale-free networks, increasing the number of initial opinion leaders improves diffusion, while increasing the number of communication encounters within the network over the first year following product deployment does not noticeably improve diffusion, and (4) providing smaller financial incentives to a greater number of opinion leaders is the best strategy.**
- Highlights
 - Effect of social media on opinions and adoption of green travel alternatives depends on network structure.

- Random network structure is best for quick initial market growth.
- Opinion diffusion is slower initially but greater long-term in scale-free networks.
- Investing a small amount in many ordinary opinion leaders is best strategy in a scale-free network.

Online social marketing approaches to inform cyber/bullying prevention and intervention: What have we learnt?

This is from a marketing book. Unable to access the entire book. May be worth looking into or seeing if their marketing/media company has access.

- Summary: Four sequential online social marketing campaigns ($N = 5178$), codesigned by youth, investigated technology's role in fostering protective factors: respect for self and others; affirming others; help seeking; and goal setting. This approach enabled young people to be coresearchers, so that meaning about [cyberbullying](#) and well-being was cocreated, maximizing relevancy and currency in campaign messaging.
- **Findings revealed extending campaigns beyond school settings provide opportunity for youth to engage and revisit campaigns, reinforcing proactive strategies and key messages, which nudge young people toward desired behavioral outcomes. Addressing social norms, attitudes, and perceived control were identified as entry points for preventative strategies."**

The next 3 articles are very similar, use similar designs, and were written by same authors, overall

The Effectiveness of school-based bullying prevention programs: A systematic review

- This paper extends Farrington and Ttofi's (2009) meta-analysis of controlled trials of 44 bullying interventions, which suggests that bullying programs are effective in decreasing bullying and victimization.....We review controlled trials of bullying interventions published from June, 2009 through April, 2013, focusing on substantive results across 32 studies that examined 24 bullying interventions. Of the 32 articles, 17 assess both bullying and victimization, 10 assess victimization only, and 5 assess bullying only.
- Of the 22 studies examining bullying perpetration, 11 (50%) observed significant effects; of the 27 studies examining bullying victimization, 18 (67%) reported significant effects. **Although the overall findings are mixed, the data suggest that interventions implemented outside of the United States with homogeneous samples are more successful than programs implemented in the United States, where samples tend to be more heterogeneous.** Few studies have measured bullying with sufficient precision to have construct validity. **Finding strong measures to assess the complex construct of bullying remains a major challenge for the field.**
- Highlights:
 - Overall, 11 of the 22 (50%) studies examining bullying perpetration observed significant effects
 - Overall, 18 of 27 (67%) studies examining victimization reported significant program effects
 - Studies conducted outside of the United States were more likely to report significant findings
 - Studies with racially homogenous samples were more likely to report significant findings
 - Measures in most studies lack construct validity and measurement is a challenge for the field

What works in anti-bullying programs? Analysis of effective intervention components.-

- Previous research has shown that many school-based anti-bullying programs are effective. A prior meta-analysis (Gaffney, Ttofi, & Farrington, 2019) **found that intervention programs are effective in reducing school-bullying perpetration by approximately 19-20% and school-bullying victimization by approximately 15-16%.** Using data from this prior meta-analysis, the

aim of the current study was to examine the relationship between effectiveness estimates and specific elements of anti-bullying programs. Specific intervention components in line with a socio-ecological framework were coded as present or absent. Components were coded on the following levels: school, classroom, teacher, parent, peer, individual, and intervention.

- **Results indicated that the presence of a number of intervention components (e.g., whole-school approach, anti-bullying policies, classroom rules, information for parents, informal peer involvement, and work with victims) were significantly associated with larger effect sizes for school-bullying perpetration outcomes.** The presence of informal peer involvement and information for parents were associated with larger effect sizes for school-bullying victimization outcomes. Meta-regression analyses showed no significant relationship between effectiveness and the number of intervention components included in a program.
- **The present report contributes to the understanding of 'what works' in reducing school-bullying perpetration and victimization. The impact of these findings on future anti-bullying research is discussed.**

[Seeing through a Glass Onion: broadening and deepening formative research in social marketing through a mixed methods approach](#)

- **Previous research has shown that many school-based anti-bullying programs are effective. A prior meta-analysis (Gaffney, Ttofi, & Farrington, 2019) found that intervention programs are effective in reducing school-bullying perpetration by approximately 19-20% and school-bullying victimization by approximately 15-16%.** Using data from this prior meta-analysis, the aim of the current study was to examine the relationship between effectiveness estimates and specific elements of anti-bullying programs. Specific intervention components in line with a socio-ecological framework were coded as present or absent. Components were coded on the following levels: school, classroom, teacher, parent, peer, individual, and intervention.
- Results indicated that the presence of a number of intervention components (e.g., whole-school approach, anti-bullying policies, classroom rules, information for parents, informal peer involvement, and work with victims) were significantly associated with larger effect sizes for school-bullying perpetration outcomes. The presence of informal peer involvement and information for parents were associated with larger effect sizes for school-bullying victimization outcomes. Meta-regression analyses showed no significant relationship between effectiveness and the number of intervention components included in a program. **The present report contributes to the understanding of 'what works' in reducing school-bullying perpetration and victimization. The impact of these findings on future anti-bullying research is discussed.**

[Examining the Effectiveness of School-Bullying Intervention Programs Globally: A Meta-analysis](#)

- This article presents results from an extensive systematic and meta-analytical review of the effectiveness of school-based bullying prevention programs. **Its main aim is to explore the results of this meta-analysis specifically in regard to variations in the effectiveness of school-bullying programs globally and the effectiveness of specific anti-bullying programs.** Our meta-analysis included 100 independent evaluations, and found that, overall, programs were effective in reducing school-bullying perpetration and victimization. In the present paper, we focused on 12 countries (e.g., Italy, Norway, USA, UK), three regions (i.e., Europe, North America, and Scandinavia) and four anti-bullying programs (i.e., KiVa, NoTrap!, OBPP, and ViSC) with multiple evaluations.

- **Results showed that anti-bullying programs evaluated in Greece were the most effective in reducing bullying perpetration, followed by Spain and Norway.** Anti-bullying programs evaluated in Italy were the most effective in reducing bullying victimization, followed by Spain and Norway. **Evaluations conducted in North America were the most effective in reducing bullying perpetration, and evaluations conducted in Scandinavia were the most effective in reducing bullying victimization.** Evaluations of the Olweus Bullying Prevention Program produced the largest effect sizes for bullying perpetration outcomes, but the NoTrap! Program was the most effective in reducing bullying victimization. We also systematically review the core components of the intervention programs and make recommendations for researchers, practitioners, and policy makers.
- **Implications for Schools and Researchers**
 - **Our meta-analysis provides practitioners with useful insights into the effectiveness of anti-bullying interventions in a number of countries worldwide. Our results show that the effectiveness of school-based interventions for bullying perpetration and victimization varies between locations, and this should be something practitioners should consider.** Effectiveness also varies across different intervention programs, and particular components of anti-bullying programs have differential effectiveness in reducing bullying perpetration and victimization. The results of the present report lead to many recommendations and implications for teachers, schools, and practitioners who deal with school bullying amongst children and adolescents.

Recommendations for teachers and schools: If implementing an existing anti-bullying program, practitioners should consider:

- Previous evaluations of the effectiveness of anti-bullying programs in the same country, region, or culturally similar setting, as these factors may influence effectiveness.
- The location and population for which the program was developed and evaluated initially, and whether this impact previous measures of its effectiveness and its particular approach to tackling bullying.
- **A pre-intervention survey to explore the specific manifestations of bullying in their respective schools, to evaluate whether or not one particular program may address these issues better than another.**

If implementing a new anti-bullying program, practitioners should consider:

- Existing research reports and meta-analyses that assess specific intervention components and their effectiveness.
- That whole-school anti-bullying campaigns can be effective, but they may not be the best strategy to combat bullying victimization; additional intervention components may also be needed.
- That comprehensive anti-bullying programs should include intervention elements at multiple levels, including the school, class, parent, peer, and individual level. Targeted interventions are needed to help individual children that are particularly vulnerable to bullying victimization.
- A pre-intervention survey to explore the specific manifestations of bullying in their respective schools to evaluate which components are the most effective, and practical, methods of reducing bullying victimization and perpetration.
- **That online forums, moderated by trained students, may be an efficient and cost-effective way to tackle bullying victimization.**
- That hot-spot supervision and specific strategies for dealing with bullying scenarios when it occurs are effective methods for preventing school-bullying perpetration and victimization.
- **Practitioners should take a number of factors into consideration when choosing an anti-bullying program. It is important to initially evaluate the nature, presence, and frequency of bullying in the relevant school.** Bullying behaviors will not necessarily manifest in the same way in different countries, regions, communities, or schools, and thus may impact the effectiveness of any intervention program implemented.

- For example, the cross-national Health Behaviour in School-Aged Children (HBSC) study showed that greater income inequality predicted higher levels of bullying perpetration and victimization (Elgar et al. [2013](#)). Therefore, implementing a program developed in a region with low-income inequality may not have the same level of effectiveness in an area of greater income inequality, as the causal roots of bullying are different.

[Assessment of School Anti-Bullying Interventions A Meta-analysis of Randomized Clinical Trials](#)

- This study included 77 samples from 69 RCTs (111 659 participants [56 511 in the intervention group and 55 148 in the control group]). The weighted mean (range) age of participants in the intervention group was 11.1 (4-17) years and 10.8 (4-17) years in the control group. **Anti-bullying interventions were efficacious in reducing bullying (ES, -0.150; 95% CI, -0.191 to -0.109) and improving mental health problems (ES, -0.205; 95% CI, -0.277 to -0.133) at study end point, with PINs for universal interventions that target the total student population of 147 (95% CI, 113-213) and 107 (95% CI, 73-173), respectively.** Duration of intervention was not statistically significantly associated with intervention effectiveness (mean [range] duration of interventions, 29.4 [1 to 144] weeks). The effectiveness of anti-bullying programs did not diminish over time during follow-up (mean [range] follow-up, 30.9 [2-104] weeks).
- **Despite the small ESs and some regional differences in effectiveness, the population impact of school anti-bullying interventions appeared to be substantial. Better designed trials that assess optimal intervention timing and duration are warranted.**

[Innovations in Social Marketing and Public Health Communications: Improving the Quality of Life for Individuals and Communities](#)

From a book online. Referencing the specific chapter of importance.

- [Formulating Effective Social Marketing and Public Health Communication Strategies](#)
 - Page 3.1.2 Segmentation “...One of the key principles underpinning marketing thinking is an understanding that the allocation of scarce resources needs to be optimized to maximize the effectiveness of intervention. Andreasen’s (2002) third benchmark criterion states that careful segmentation of target audiences ‘ensures maximum efficiency and effectiveness in the use of scarce resources (p 104).’”
 - Formative Research: Focus groups are most popular.
 - Page 3.1.5 Marketing Mix “....Social marketing interventions that use multiple strategies....product, price, place, and promotion....are more effective. Interventions that have marketing mix report positive behavior change.
- [Page 215, Promoting Mental Health and Wellbeing in Individuals and Communities: The ‘Act-Belong-Commit’ Campaign \(Robert J Donovan and Julia Anwar-McHenry\)](#)
 - [The Act-Belong-Commit](#) campaign is an evidence-based social marketing program making extensive use of social franchising to promote the mental health and wellbeing of individuals and communities. The campaign targets individuals with respect to engaging in activities that strengthen and maintain good mental health. At the same time, the campaign targets organisations that offer mentally healthy activities to act as social franchises for the campaign, promoting the messages internally to their staff and/or externally to their clients or local communities. Act-Belong-Commit’s overarching framework allows for implementation at the population level, as well as in specific settings and for targeted groups. The campaign has a mass and targeted media presence and is implemented through partnerships with local governments, schools, workplaces, health services, state government departments, community organizations, and local sporting and recreational clubs. This chapter describes the campaign, how it operates in

the community, how it is evolving from a largely population wide (universal) approach to include targeted (selective) approaches, its geographic diffusion, and evaluation.

Multidisciplinary Approaches to Research on Bullying in Adolescence

Not exactly about the impact of SM, but about interventions that may be of interest to Montana.

- “...Gaming and virtual environments have also been designed for the purposes of bullying assessment and intervention.
 - For example, Mancilla-Caceres et al. (2014) developed a computerized game task in which particular in-game strategies were associated with engagement in relational aggression. As another example, FearNot! (Fun with Empathic Agents to Reach Novel Outcomes in Teaching) is a virtual environment that was developed to provide students with training to respond to bullying situations by navigating animated interactive scenarios (Vannini et al. 2011).
 - Studies of FearNot! indicate that previously victimized youth who engaging with the program reported subsequent reductions in experiences of victimization (Sapouna et al. 2010).
 - Such virtual environments provide a “low-stakes” opportunity for children to practice skills in situations that approximate real-life....”
- “...Therefore, turning to mass communication research can provide important avenues to understand the intricacies underlying the processes and effects of media messages, especially if they are intended to reach large audiences. With the proliferation of and reliance on social media, it becomes even more important for campaign efforts to optimize the synergy between interpersonal and mass communication. For example, individuals (unknown and well-known) have the capacity to reach mass audiences through social media platforms to heighten awareness of bullying and provide practical solutions for bullies, bystanders, and victims through campaigns such as the Bystander Revolution (<http://www.bystanderrevolution.org/>).
- “...One reason to consider increasing multidisciplinary research efforts for bullying prevention and intervention work among adolescents is that multidisciplinary approaches have proven beneficial in other contexts. In particular, in this section we review teen pregnancy prevention, as one instance of how multidisciplinary resources were effectively merged to address a public health crisis among adolescents. There are several parallels between bullying and teen pregnancy that make this a useful case example...”
 - Both are highly complex, interpersonal and dynamic issues to address at the macro-and micro-levels.
 - Identifying relationships (peers, family, school, media) on attitudes and beliefs
 - Public health crisis
 - Involvement of family – role of family is complicated for both issues –
- “...Bullying Research Network (BRNET) annual Think Tank. BRNET is a group of over 150 experts, primarily researchers, on bullying and was founded by Drs. Susan Swearer and Shelley Hymel. As stated on BRNET’s website (brnet.unl.edu), the mission of the organization is to: “promote and assist international collaboration among bullying and peer victimization researchers.” This mission is achieved through a number of initiatives including the annual Think Tank meeting. This Think Tank is a members-only meeting and brings together leaders in the field to discuss key topics in bullying (e.g., bullying and mental health). The 5th annual BRNET Think Tank was held in June 2015 at Boston University, and was focused on multidisciplinary approaches to bullying prevention. Through extensive discussions, three primary themes emerged that seemed most promising in moving the bullying field forward, and these were selected as topics for the manuscripts in this special issue....”

Applying Mass Communication Theory to Bystander Intervention in Bullying

Best Article so far – encourage you to read the entire article, paying attention to pages 41 – and beyond.

- “...The current article proposes how theory in mass communication can aid research efforts seeking to better understand and prevent bullying through bystander intervention....”
- “...Thus, in the case of targeting bystanders, it is important to consider how mass media campaigns reach youth who are more susceptible to being present in situations where bullying occurs, particularly knowing their general awareness and predispositions about bullying could inform the programs they may likely choose to consume. Bullying presents communication scholars with several important areas of inquiry, and many have conducted research in this area (e.g., Brown and Witherspoon 2002; Cantor 2000). The goal of this section is to review the nature and potential of mass communication campaigns in targeting problems such as bullying. After reviewing this fecund area of scholarship in mass communication, several theories will be introduced in relation to their potential to inform multidisciplinary efforts for prevention through targeting one or more steps of the Latane´ and Darley’s (1970) bystander intervention model...”
- **There is evidence that mass media campaigns have promise in decreasing elementary and middle school students’ violence intentions and self-reported bullying behaviors (McLaughlin et al. 2006; Swaim and Kelly 2008).** Therefore, **although mass communication campaigns have small effects on behavior, they may be particularly useful for targeting knowledge of how to intervene in bullying, particularly if used according to the model described further below.** Some bullying prevention programs incorporate use of video to change norms and guide students in behavior change (e.g., Second Step: Student Success Through Prevention program, Committee for Children 2008). In fact, Ttofi and Farrington’s (2011) **meta-analysis revealed that one of the most important program elements in reducing victimization was using videos.** However, many of these programs are geared toward youth in elementary and middle school without a focus on adolescence. There are also no known programs that focus specifically on the steps of the bystander intervention model integrating mass communication strategies...There are many possibilities in relation to the five steps of Latane´ and Darley’s (1970) bystander intervention model in terms of what the goal of a campaign might be in a targeted community. Before specifying a goal, formative research employing focus groups or structured interviews would inform where youth are in terms of the model....Evers et al. (2007), as part of their intervention that led to increased bystander intervention in bullying, assessed intentions and stages of change in relation to these concepts....”
- “...It is more likely the case that a given campaign or intervention would target multiple steps within the same message or across different messages due to their interlinking nature. For example, a message strategy might communicate bystanders’ responsibility to intervene and the desired forms of intervention (i.e., how to help in an emergency) in a given school or community. the campaign....”

Websites that may be of interest

[Stop Bullying Now! A Federal Campaign for Bullying Prevention and Intervention](#)

- <https://www.stopbullying.gov/resources/media-guidelines>
- <https://www.stopbullying.gov/resources/training-center>
- <https://www.stopbullying.gov/videos-social-media>
- <https://www.stopbullying.gov/resources/research-resources>

ByStander Revolution

- “Bystander Revolution is a website offering practical, crowdsourced advice about simple things individuals can do to defuse bullying and help shift the culture. No matter who you are or what you’re facing, you can find personal stories, suggestions, and encouragement from someone who has dealt with a similar issue. Search by problem or solution to find tips from people who have been targets, people who have been bystanders, and even people who have bullied.”

- Dr. Dorothy Espelage -She is co-editor of four published books including [Bullying in North American Schools: A Social-Ecological Perspective on Prevention](#) and [Intervention and International Handbook of Bullying](#) published by Routledge. She is Associate Editor of the *Journal of Counseling Psychology*

Bullying and Suicide Prevention: Technical Assistance Brief

Last Updated: July, 2022

Access other resources at <https://www.mchevidence.org>

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