

Liderazgo internacional en la investigación y buenas prácticas clínicas del bienestar emocional en colegios a nivel internacional



Assessment of School Anti-Bullying Interventions

A Meta-analysis of Randomized Clinical Trials

David Fraguas, MD, PhD; Covadonga M. Díaz-Caneja, MD, PhD; Miriam Ayora, MD; Manuel Durán-Cutilla, MD; Renzo Abregú-Crespo, BS; Iciar Ezquiaga-Bravo, MD; Javier Martín-Babarro, PhD; Celso Arango, MD, PhD

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IMPORTANCE Bullying is a prevalent and modifiable risk factor for mental health disorders. Although previous studies have supported the effectiveness of anti-bullying programs; their population impact and the association of specific moderators with outcomes are still unclear.

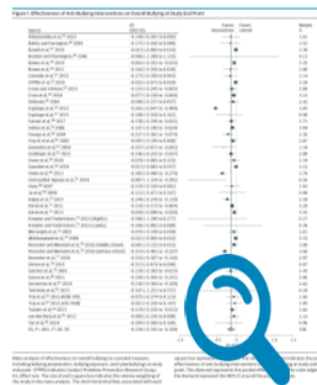
RESULTS This study included 77 samples from 69 RCTs (111 659 participants [56 511 in the intervention group and 55 148 in the control group]). The weighted mean (range) age of participants in the intervention group was 11.1 (4-17) years and 10.8 (4-17) years in the control group. The weighted mean (range) proportion of female participants in the intervention group was 49.9% (0%-100%) and 50.5% (0%-100%) 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).

Effects of bullying prevention on mental health

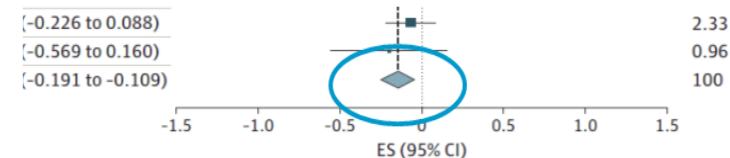
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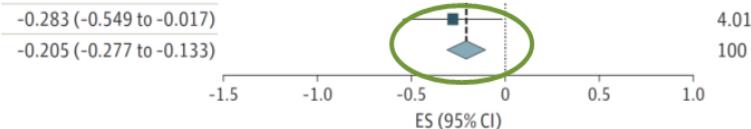
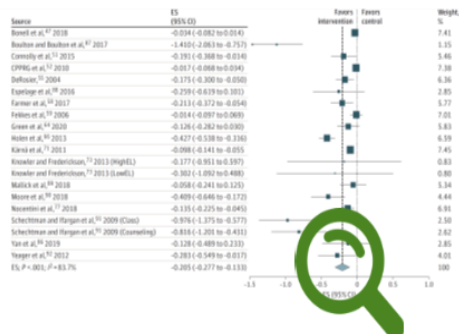


Efectividad sobre acoso escolar tras la intervención



ES, -0.150; 95% CI [-0.191 to -0.109]
PIN 147

Efectividad sobre la salud mental tras la intervención



ES, -0.205; 95%CI, [-0.277 to -0.133]
PIN 107

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School bullying in children and adolescents with neurodevelopmental and psychiatric conditions: a systematic review and meta-analysis

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Findings

We included 212 studies in the meta-analysis. The total sample comprised 126 717 cases (mean age 12·34 years [SD 1·82], 37·6% girls) and 504 806 controls (12·5 years [SD 1·86], 47·6% girls). For traditional bullying, the pooled prevalence was 42·2% (95% CI 39·6–44·9) for victimisation, 24·4% (22·6–26·3) for perpetration, and 14·0% (11·4–17·1) for perpetration–victimisation. For cyberbullying, the prevalence was 21·8% (16·0–28·9) for victimisation, 19·6% (13·4–27·7) for perpetration, and 20·7% (8·4–42·6) for perpetration–victimisation. Compared with controls, young people with neurodevelopmental or psychiatric conditions were more likely to be involved in traditional and cyberbullying as a victim (OR 2·85 [95% CI 2·62–3·09] and 2·07 [1·63–2·61]), perpetrator (2·42 [2·20–2·66] and 1·91 [1·60–2·28]), and perpetrator–victim (3·66 [2·83–4·74] and 1·85 [1·05–3·28]). Bullying involvement was associated with higher scores in mental health measures in young people with neurodevelopmental or psychiatric conditions, particularly internalising symptoms and externalising symptoms.



Efficacy of a Web-Enabled, School-Based, Preventative Intervention to Reduce Bullying and Improve Mental Health in Children and Adolescents: Study Protocol for a Cluster Randomized Controlled Trial

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A web-enabled, school-based intervention for bullying prevention (LINKlusive): a cluster randomised trial

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Summary

Background There is a need for more sustainable interventions and for assessing the effectiveness of school-based universal anti-bullying programmes in vulnerable populations. We assessed the efficacy of a multicomponent, web-enabled, school-based intervention that aims to improve school climate and reduce bullying (LINKlusive) relative to conventional practices (control condition).

Methods We conducted a cluster randomised controlled trial in primary and secondary schools in Madrid, Spain. The primary outcome measure was peer-reported bullying victimisation after the 12-week intervention (study endpoint). We analysed data using longitudinal mixed-effects models. The trial was registered with the ISRCTN registry (15719015).

Findings We included 20 schools (10 in each group); 6542 students participated at baseline; 6403 were assessed at study endpoint. After the intervention, there was a statistically significant reduction in bullying victimisation in both the intervention (OR 0.61, 95% CI [0.41, 0.90]) and control groups (OR 0.69, 95% CI [0.51, 0.92]), with no evidence of differences in the whole sample (OR 0.89, 95% CI [0.58, 1.36]; aOR 0.89, 95% CI [0.58, 1.37]). Subgroup analyses showed a statistically significant effect of LINKlusive on bullying victimisation in primary education (aOR 0.68, 95% CI [0.47, 0.98]). In students with peer-reported bullying victimisation at baseline, LINKlusive showed a statistically significant effect on depression (−1.43, 95% CI [−2.46, −0.40], adjusted standardised mean difference (SMD) −0.41) and quality of life (2.18, 95% CI [0.80, 3.56], adjusted SMD 0.45).

Interpretation LINKlusive could be effective in reducing bullying victimisation in primary school students. Sustainable whole-school interventions to promote mental health and reduce risk factors are warranted to improve outcomes in young people, especially in the early years of education.



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RESEARCH ARTICLE



The Mental Health Clinical Liaison Programme for Schools: developing a new approach in Child and Adolescent Mental Healthcare in Spain

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ABSTRACT

Mental health issues among children and adolescents have increased, especially after the COVID-19 pandemic. Despite awareness, less than half get needed care, leading to long-term consequences. The World Health Organization calls for integrated, preventive community interventions. In this paper, we present The Mental Health Clinical Liaison Programme for Schools in the Community of Madrid, Spain, which features school-based activities delivered by multidisciplinary mental health teams, offering early detection, intervention, and prevention strategies for children and adolescents. We describe the activities implemented, present the evidence supporting them, provide preliminary data, and discuss the scope and challenges of the programme. In 2023–2024, the programme intervened in 53 primary and secondary schools, helping identify in 876 cases, evaluating 356, and referring 122 to other services. It supported interventions for 179 patients already in mental healthcare and 34 reintegrations after psychiatric hospitalization. Anti-stigma workshops have been conducted, involving approximately 1620 students. Ongoing research aims to evaluate the effectiveness and cost-effectiveness of these interventions to ensure continuous improvement in mental health services for young people.

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KEYWORDS

Child and adolescent mental health; COVID-19 pandemic; prevention; intervention; school-based programmes

The Programme



13 schools

56 schools

87 schools
65,348 students

116 schools
112,348 students



Hospital La Paz

Original Article

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Triangulating the associations of different types of childhood adversity and first-episode psychosis with cortical thickness across brain regions

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