

## Peer Review Report

# Review Report on Bullying, Mental Health, and the Moderating Role of Supportive Adults: A Cross-National Analysis of Adolescents in 45 Countries

Original Article, Int J Public Health

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### EVALUATION

#### **Q 1** Please summarize the main findings of the study.

The study has provided interesting and not expected findings of the role of support from adults in mitigation of the negative impact of bullying involvement on the mental health of adolescents. The results showed that supportive parents or teachers may not be sufficient in addressing the complex emotional and psychological needs of youth who are involved in bullying. Data from 45 countries taking part in the 2017/2018 Health Behaviour in School-aged Children study were used to examine the moderating role of having supportive adults in the association between bullying (in-person and cyber) and mental health problems (psychological symptoms and low life satisfaction) in adolescents. The results showed that bullying was associated with mental health problems and low life satisfaction of adolescents. Even though having supportive relationships with adults was related to better mental health outcomes, both in-person and online bullying perpetration and victimization were associated with increased risks of psychological symptoms and low life satisfaction among adolescents reporting more supportive adults in their lives. The findings suggest that having supportive adults is not protective against the negative impact of bullying involvement on the mental health of adolescents.

#### **Q 2** Please highlight the limitations and strengths.

The major strength of the study is its large representative sample of adolescents from 45 countries and the use of validated measures as a part of the standard HBSC questionnaire. Some limitations were related to the study design. The cross-sectional design limits the ability to establish causal relationships between bullying involvement and mental health problems, this limitation was mentioned also by the authors of the study. Furthermore, self-reported measures could influence the accuracy of data with the possibility of over or underreporting. The role of adults' support in the protection of adolescents' mental health involved in bullying has been discussed in detail. However, no recommendations and suggestions have been made in relation to what kind of support or intervention might be effective.

#### **Q 3** Please provide your detailed review report to the authors. The editors prefer to receive your review structured in major and minor comments. Please consider in your review the methods (statistical methods valid and correctly applied (e.g. sample size, choice of test), is the study replicable based on the method description?), results, data interpretation and references. If there are any objective errors, or if the conclusions are not supported, you should detail your concerns.

Bellow are the comments structured for each section of the article:

General comments:

The terms youth, young people and adolescents are used to define the study population. As the study involved children from 11 to 15 years, the term "adolescents" should be preferred. Young people and youth are according United Nations definition persons between the ages of 15 and 24.

Introduction:

Lines 25–27: More data about the prevalence of bullying in children and adolescents should be presented, including data from other studies, not just from the HBSC study

Lines 40–43: Protective factors mitigating the negative impact of bullying on the mental health of adolescents should be described in more detail with the reference to relevant studies. The following questions should be

addressed: What other factors except supportive relationships could have a protective effect" Why supportive relationships with adults have been selected as one of the most important factors" Any concepts or theories supporting this presumption"

The concept, measures and examples of supportive relationships should be defined.

More details about mental health problems associated with bullying in adolescents should be given.

Particularly, what kind of mental health problems are common in adolescence and which of them are associated with bullying"

Line 81: The term psychological symptoms is not clear, please define. Which psychological symptoms are measures of mental health problems"

Methods

Lines 119–123: measures of psychological symptoms – it should be mentioned that the 4-item scale is a part of an 8-item HBSC psychosomatic symptom checklist.

Lines 121–123: 5 point scale –the answer for each point should be specified. The sentence: The items were summed and an average rating of "About every week", or 8 or more out of 16, indicated frequent symptomology – not clear what does it mean "or 8 or more out of 16" and what indicates frequent symptomology

Statistical analysis: no comments

Results

Tables 1, 3–5: It is not clear from the tables what does it mean the "high psychological symptoms" and "low life satisfaction" The description of the measures should be presented in the table.

Lines 180–186: No country with  $RR < 1$  is presented in the Table 1, however in the Figure S1 seven countries have  $RR < 1$ , so bully perpetration was associated with lower psychological symptoms. The same for Figure S2 – four countries have  $RR < 1$  (association between cyberbullying and low life satisfaction).

Discussion

Three possible reasons why the support from the adults might be not effective to mitigate the psychological distress from bullying in adolescents have been discussed. However, no recommendations and suggestions about the effective interventions to support the mental health of adolescents involved in bullying have been presented.

#### PLEASE COMMENT

**Q 4** Is the title appropriate, concise, attractive?

The title is concise and attractive. The term young people is not appropriate to classify the children in adolescent age. The term adolescents should be used instead of young people.

**Q 5** Are the keywords appropriate?

Yes

**Q 6** Is the English language of sufficient quality?

Yes

**Q 7** Is the quality of the figures and tables satisfactory?

Yes.

**Q 8** Does the reference list cover the relevant literature adequately and in an unbiased manner?

Yes

#### QUALITY ASSESSMENT

**Q 9** Originality

**Q 10** Rigor

**Q 11** Significance to the field

**Q 12** Interest to a general audience

**Q 13** Quality of the writing

**Q 14** Overall scientific quality of the study

**REVISION LEVEL**

**Q 15** Please make a recommendation based on your comments:

Minor revisions.