

IMPLEMENTING A MULTI-LEVEL APPROACH TO BULLYING PREVENTION: HOW TO BE SUCCESSFUL [9510]

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Abstract

This interactive panel presentation will describe a four-tiered strategy for bullying prevention in a mid-sized school system in North Carolina. Panelists will discuss targeted prevention activities that increase staff awareness of bullying as a means of improving the school system's response to this behavior; efforts to increase student violence prevention skills; activities to increase community awareness of school violence; and ways to support the development and adoption of anti-bullying policies. Project innovations and community collaboration will be highlighted.

Introduction

For the past 20 years, leaders in education have increased attention to bullying at school in efforts to improve the student-learning environment. Background research with Scandinavian children in the early 1980s demonstrated that student safety directly impacts learning ability (Olweus 1993). His strategy to address bullying at school was to adopt a whole-school program, as the whole-school approach is predicated on the assumption that bullying is a systemic problem, and, by implication, an intervention must be directed at the entire school context rather than just at individual bullies and victims (Smith, J.D., Schneider, B.H., Smith, P.K., Ananiadou, K. 2004). In his 1993 research, Olweus found that two general conditions are very important for achieving the goals of a school-based intervention program: (1) Adults at school and, to some degree, at home become aware of the extent of bully/victim problems in "their school;" and (2) The adults decide to engage themselves, with some degree of seriousness, in changing the situation (p. 63-107). Adults in the immediate environment can have a direct effect on the bullying process: they can intervene and help solve the problem or look away (Smith et al. 2004).

More recently, Limber and Cedillo (2003) emphasized the importance of changing the school culture, suggesting that adults and students share a unified message about bullying: "This is something that we don't accept, and we are going to look out for each other and report and talk about this as a form of peer abuse," (pg. 239)." Indeed, the whole-school programs that are most effective are the ones that include every adult and student at school. By undertaking systemic change at multiple levels, the school environment will become incompatible with bullying.

Bullying is characterized by an imbalance of power between the bully and the victim (Limber and Cedillo 2003), and by "repeated harassment, abuse, oppression, or intimidation of another individual physically or psychologically" (Center for Mental Health in Schools 2005, pg.1)UCLA).. Teasing, threatening, taunting, rejecting (socially isolating someone), and hitting someone are some examples of bullying (Center for Mental Health in Schools 2005). Both the bully and the victim are at-risk for poorer psychological adjustment than are individuals not involved in bullying (Kumpulainen et al. 1999) and problems with abusive and antisocial behavior in childhood often extend in to adulthood (Farrington and Hawkins 1991). The adverse academic outcomes include truancy and refusal to attend school (Reid 1989), poorer academic records (Roberts and Morotti 2000), and increased levels of alcohol consumption and smoking (Roberts and Morotti 2000). Repeated student observations report that bullying happens every seven minutes and that an equal number of boys and girls report being victims (Craig and Pepler 1996). According to the literature (Batsche 1994), a

reasonable estimate of bullying prevalence suggests that 15% to 20% of all students will experience some form of bullying during their school years.

The majority of whole-school programs evaluated to date have yielded nonsignificant outcomes on measures of self-reported victimization and bullying, and only a small number have yielded positive outcomes (Smith et al. 2004). Why should school systems continue to implement these programs? Despite a lack of quantitative data to demonstrate statistically significant improvement in outcome measures, ABSS administrators, teachers, and staff consistently report that positive change has in fact occurred and that the programs are effective. For example, participants in Second Step, a universal prevention program offered in the ABSS middle schools, complete voluntary pre- and post-test surveys, but findings from the survey are not strong enough to document change with statistics. This may be because the number of respondents is low due to informed consent requirements or because the pre-test data is already very positive, leaving little room for change on the measures collected. CARE uses qualitative measures such as key informant interviews, community forums that allow stakeholders to share their experiences, or follow-up interviews with individuals who have received services through these programs to capture this phenomenon.

The purpose of this paper is to examine an ongoing violence prevention program deemed successful by the community and to extricate the valuable lessons along the journey. Smith and colleagues (2003) found that more research on processes and outcomes is needed to increase intervention effectiveness.

Background

The Alamance-Burlington School System (ABSS) transformed community concern and fear about violence in the schools into a collaborative response to reduce bullying and peer violence. The ABSS Anti-Bullying/Anti-Harassment Plan is part of a larger effort to attack student substance abuse and violence through a three-year federal Safe Schools/Healthy Students grant, awarded in 2003 and administered by the CARE Project (CARE stands for Community-Coalition, Assisting, Responding, and Educating). The CARE team includes a project director, an administrative assistant, six prevention specialists, a Hispanic outreach specialist, a health educator, two Transition Center counselors, and a family preservation specialist. In addition to the 13 full-time staff, the team partners with school employees, community stakeholders, and the local evaluator, the Pacific Institute for Research and Evaluation (PIRE).

During the first year of the project's grant, CARE adopted the S.A.R.A. (Scanning, Analyzing, Responding, and Assessing) framework, endorsed by the North Carolina Center for the Prevention of School Violence, to guide the development of the ABSS Bullying Initiative. The first step was to meet with school administrators and secure their support for an intensive program of action over the next three years. Focus groups were then conducted with the middle and high school students considered most at-risk for student violence. Information collected during these activities helped shape the result: a four-tiered initiative targeted at the school, student, community, and policy levels. The strategies of the ABSS Bullying Initiative are captured in a logic model (see Figure 1 in the Appendix), and the accompanying activities and measures are recorded in a table (see Table 1 in the Appendix). More details will be discussed under Methods.

Prevalence

Bullying is a critical issue in the Alamance-Burlington School System. In the winter and spring of 2005, middle school and high school students receiving CARE universal prevention services were asked to complete an online survey about their experience with bullying. Slightly more than 1,000 students participated, with 75 percent being middle school students considered more likely to have contact with CARE given the concentration of violence prevention classes such as Second Step and Project Alert in the middle

schools. Approximately 70 percent of the survey respondents reported that they had never been bullied, and 70 percent of the students reported that they had never bullied anyone. However, 33 percent of the students reported that they had been bullied at least once.

Verbal abuse is the most common form of bullying and 27 percent of survey respondents reported that they had been teased or called names, and 14 percent said that their friends say things about them to make other people laugh. Violent threats are communicated mostly with fists (13 percent), and between 3 percent and 4 percent of the students reported that they had been threatened with knives, guns, and other weapons in the past 30 days. When compared to respondents of the 2003 National Youth Risk Behavior Survey and the North Carolina Youth Risk Behavior Survey, the percentage of ABSS students who reported not going to school because they felt unsafe (10.9 percent) was double that for their national (5.4 percent) and North Carolina (5.2 percent) counterparts. Similarly, 12.1 percent of ABSS survey respondents reported that they had been threatened or injured on school property in the past year, compared to 7.2 percent NCYRBS and 9.2 percent National YRBS respondents in 2003.

The ABSS students indicated a guarded response to bullying in their schools. When confronted with bullying, more than 60 percent said that they would either ignore it or watch without any intervention, while 14 percent would try and stop the bully or help the victim and 13.7 percent would ask for help from other students or adults or would tell an adult. Similarly, the ABSS students perceived that only 56 percent of adults will actually stop the bullying and help solve the problem, although 22 percent of adults will stop it and tell everyone to leave. More than half of the students said that they believe that some kids are bullied because they look or act different or are smaller or weaker.

Methods

School-Level

Prior to the ABSS Anti-Bullying/Anti-Harassment Plan, the policy and attitudes addressing violence in the ABSS were punitive. The reality of “zero tolerance” for violence was that students were pushed out of school and the “teachable moment” to change student behavior was lost. However, community leaders and parents noted the importance of creating a school environment characterized by involvement, positive interest, and support, and the superintendent and the ABSS School Board recognized the importance of creating opportunities to positively reinforce good student behavior. As a result, they adopted a positive approach to creating a common language, providing students and parents with resources, and developing student behavior skills (i.e., conflict management) that support systemic change from a punitive to positive environment. Today, when parents or children hear “zero tolerance,” they understand that there are high expectations for student behavior and that students are held accountable for their behavior. They also know that help is available to them when confronted with bullying or violence, for the no-bullying value emphasizes a shared responsibility for student safety and well-being that has allowed the ABSS to rebuild the connection between the school and community.

Student-Level

Bullying has been called a silent crime. It persists, generally long-term, in schools because victims and bystanders neither know how to stop it nor believe that they will be protected if they speak out. By empowering students with knowledge and skills and by training staff to respond and take responsibility for bullying in their classrooms and school, the ABSS is creating positive change. The CARE team’s continuum of care includes *Second Step, Violence Prevention Curriculum* from pre-K to 9th grade and other prevention programs within ABSS schools. These include the Mix It Up program that promotes tolerance and awareness

of diversity among the school community. Other prevention efforts involve encouraging attendance, academic effort, a drug-free environment, and getting along with peers, all of which uphold the no bullying value.

Classroom intervention is another crucial part of the bully-proofing program because it empowers the 85 percent of children, who are the silent majority, to stand up to the bullies and help the victims (Limber and Cedillo 2003). When students know that staff will intervene if they report bullying, they are more likely to come forward (Garrity 1997). The ABSS recognized that all staff, not just teachers, should be trained on bullying prevention and intervention because bullying often takes place outside of the classroom. In fact, the online student bullying survey data suggests that the hallways and lunchroom are the most frequent sites for bullying.

Community Level

The CARE team noted the importance of the community's involvement and created a Bullying Task Force to develop a global definition of bullying and a common language. The task force offered training to all community leaders and nonprofit agencies that work with ABSS students. Through adult modeling and school wide use of a common language, the school and the community's culture became characterized by an understanding of and concern for others. In order to increase awareness among our community, we held a Bully-Free Billboard campaign. We held three separate school wide poster contests and had 600 student artwork submissions. Eight winners were chosen and their artwork was posted on countywide billboards to increase community awareness about bullying.

Policy-Level

After months of research and continuous work with the North Carolina Department of Public Instruction (DPI), the ABSS Anti-Bullying Task Force created a new system wide policy that went into effect in March, 2004. In addition, CARE produced a booklet to accompany the policy and assist each school's leadership team to plan, create, and implement the system's new Anti-Bullying/Anti-Harassment Policy. The task force's goal was to secure approval by the ABSS Board of Education prior to the new school year so as to include the policy in the 2004–2005 Student Code of Conduct. Although the ABSS board failed to review this policy in time, the State Board of Education presented and approved a similar policy in June 2004, mandating all schools to adopt it and create an individual school anti-bullying/harassment plan by January 2005.

The ABSS is fortunate to have CARE as a built-in advocate for anti-bullying efforts in the school. CARE's project director is well received by the school board, and she has been invited to present on anti-bullying efforts in Alamance County. In any county, opportunities to engage the school board are hard to come by, and CARE has maximized this opportunity by addressing important topics, including the need to expand anti-bullying efforts at the state level, planning for anti-bullying program sustainability in the ABSS, and, encouraging the school board to recognize the important role that CARE can play in educating Congress to enact laws and policies to address bullying in American schools. CARE had a major impact on the creation of the ABSS Anti-Bullying/ Anti-Harassment Plan that serves as the whole-school policy guiding all anti-bullying efforts. Implementation of the policy's strategies is monitored and evaluated for continuous improvement through a collaborative data collection effort with a local evaluator.

Data

CARE works with PIRE, the local evaluator, to collect and process outcome data on anti-bullying activities including those encompassed under the ABSS Anti-Bullying/Anti-Harassment Plan. Using a combination of qualitative and quantitative methods to capture data, CARE collects information through key informant interviews, focus groups, annual surveys, pre- and post-tests, and database systems.

Interviews and Focus Groups

In January 2003 and then annually in the spring of 2004 and 2005, the CARE Project conducted key informant interviews. School administrators and staff have consistently shared positive feedback about CARE. Specific questions about the Bullying Initiative were included in the interview protocol and, across the board, respondents identified CARE as the leader of the anti-bullying efforts. CARE's primary responsibilities were to increase awareness about bullying, train staff, and help students with bullying issues. Although the ABSS Anti-Bullying/Anti-Harassment Plan is a partnership, the CARE Project owns the initiative in the eyes of the community. This is important because name recognition builds acceptance, and people know whom to call.

Similarly, in the spring of 2003, students participated in interviews with CARE staff. When queried about bullying, the students emphasized that teachers also bully, sometimes by cursing and name-calling. As the students' chief concern was that they would not be heard if they complained about a teacher, CARE took the opportunity to take this message to the administration. Previously, CARE staff suspected such a problem, but as newcomers, they lacked first hand knowledge. By talking to the students, they were able to get solid examples of problems that needed to be addressed.

Annual ABSS Behavior Surveys and the Administrators Survey on Bullying

Prior to CARE, an outside coordinator conducted an annual behavior survey on substance use and violence in ABSS. This became a CARE project beginning in 2003. Although the first year's administration went smoothly, the 2004 survey was plagued by informed consent issues and, therefore, an extremely low response rate. Thus, for the 2005 survey, CARE enlisted the help of the local health department, which conducted the survey, circumnavigating the Department of Education (DOE) requirements of active informed consent for DOE-funded projects. Because this approach resulted in a good response rate, the data for 2003 and 2005 are considered representative of ABSS. This is good news because the data document important reductions in two indicators for both middle and high school students between those years. First, the percent of students reporting that they were threatened or injured with a weapon in the past year dropped from 19 percent in 2003 to 15.6 percent in 2005 among middle school students and then again from 21 percent to 17.8 percent among high school students. Next, the percent of students reporting that they had been in a fight in the past year decreased from 41 percent in 2003 to 36.9 percent in 2005 for middle school students and 37 percent to 33.7 percent for high school students.

The annual Administrators Survey on Bullying was distributed to the principal and assistant principals at each school in the ABSS. The number of respondents for 2004 (n=46) was much higher than that for 2005 number (n=17); however, response trends were consistent. Because some of the questions on this survey match those of the student online bullying survey, and thus it was possible to identify gaps between students' reported experience with bullying and administrators' perceptions regarding bullying in their schools.

Pre-and Post- tests

CARE administers pre- and post-test surveys to participants as part of the Second Step universal violence prevention program that is provided almost exclusively to middle school students and to selected and indicated students who complete their anger management classes. Typically, programs aimed at measuring changes in bullying behavior will report bullying and victimization rates at the beginning and then after the intervention. The findings are presented as percentage changes between the pre- and post-test results. Reported positive results may be attributable to decreased bullying in intervention schools or increased bullying in control schools. However, it is important to note that all students in the ABSS received the treatment condition (The ABSS Anti-Bullying/Anti-Harassment Plan) so it is not possible to conclude that

any changes were effected by the intervention based on this data. Moreover, the data collected on the survey measured attitudes towards conflict, attitudes towards interpersonal violence, or violent intentions, and were not bullying-specific. Despite this incongruence, the data nonetheless serve as a baseline for future programming.

At the end of the 2004–2005 academic year, PIRE conducted the final analysis on available pre- and post-test data—1,527 pre-tests and 1,114 post-tests—through June, 2005. As students must receive informed consent from their parents to complete the survey, their response rate was lower than the actual participation rate. Survey responses were analyzed in aggregate, and then pre-tests and post-tests were matched whenever possible by a pseudo-code that was generated by concatenating three data fields. The total number of pre-test and post-test surveys that could be matched was 694, or 43% of the survey population of 1,608 students. The findings indicated that no significant changes had occurred in attitudes toward conflict, interpersonal violence, or violent intentions among all students who completed the Anger Management/Conflict Resolution survey or for matched cases (see Table 2 in the Appendix).

Database systems

CARE prevention specialists record all of their student contacts in a central database, which shows 60 referrals for bullying between October 1, 2004, and March 31, 2005. In addition, the team records the number of school staff trained on the initiative (1,753), the number of bullying-related materials disseminated (more than 31,000 brochures, packets, posters, pamphlets), and the number of training videos provided to staff (102). These data are captured in each Safe School/Healthy Students progress report and are part of a larger reporting effort.

Discussion

The ABSS Anti-Bullying/Anti-Harassment Plan is entering Year 3. It is likely that its impact will become more evident over time, as the long-term effectiveness of anti-bullying work in primary schools is often not captured until after the formal project evaluation ends because of the length of time required to plan and implement the intervention (Eslea and Smith 1998). Currently, there are limited quantitative data to support an overall reduction in bullying. Follow-up data analysis may reveal additional positive results. Meanwhile, we have much qualitative data supporting systemic change in the ABSS.

The most common outcome measures were pre-tests and post-tests. The lack of a control group for comparison seriously limits any conclusions that can be drawn from this data. Overall, a large number of surveys were collected, but the low matching rate between pre- and post-tests renders their comparison problematic. The low response rate is due to the funding source of the SS/HS grant that required active informed consent. Many parents were hesitant to provide informed consent because they were afraid. In February of 2004, an undercover narcotics operation was completed and 49 students responsible for selling illegal substances in the middle and high schools were convicted. Although the community was very supportive of the superintendent's decision to confront the problem of illegal substance distribution on school property, parents were nonetheless afraid that their children were being singled out for further crackdown efforts, despite parent notification letters.

Another major issue that was not addressed in the program design was fidelity of curriculum implementation. There was not an ongoing effort to ensure that all curriculum providers were following the session plans according to the treatment protocol. Training was minimal, the curriculum facilitators were not required to be evaluated, and recommended ongoing technical assistance was not provided. Lastly, the trainers were a mix of prevention health specialists and teachers or guidance counselors, so their skill sets and approaches were probably different.

Perhaps the most important issue surrounding the survey findings is measurement: are we measuring the right things? The online student surveys on bullying collect information about bullying and victimization rates, but we do not have any information about the outcomes of those situations. It would be very useful to know how situations have been resolved (or not). Similarly, the pre-tests and post-tests collect self-reported information about skills, attitudes, and perceptions, but they do not reveal anything about whether or not the student actually demonstrates behavior change over time. One way to address this would be to supplement self-reported data with teacher and peer nomination data (Smith et al., 2003). Although the online student survey counts the number of students who told a teacher about bullying, it does not count the number of bullies reporting that teachers had talked to them about bullying (Smith et al., 2003) and this should be added as a survey question.

Zero tolerance policies are often controversial and confusing. The ABSS claims zero tolerance for bullying, but, unlike traditional advocates of this policy, the administration with the help of CARE makes every attempt to work with students so that they may remain in school. During the key informant interviews, some teachers admitted that the policy was not clear enough for them, although they did emphasize that any approach to deal with bullying and violence should be flexible to meet the needs of students.

Two issues that definitely seem to impede this goal and that have been routinely brought to the attention of the state department of public instruction are the constant reports of harassment and bully-related acts taking place in our schools. During the year, DPI provided technical assistance to schools by hosting three workshops designed to address these and other similar topics. More than 300 participants from various LEAs and community-based groups received training to assist with the increasing number of infractions that were being reported on a regular basis. Because of the concerns voiced by school personnel, the Alamance-Burlington School System wanted to take a proactive approach to providing leadership in addressing the topic of harassment and bully-related occurrences by introducing the new Anti-Bullying/Anti-Harassment Policy. In November 2004, ABSS administrators received a handbook to assist them in creating an Individualized School Anti-Bullying and Anti-Harassment Plan. Each school was asked to complete a Bully-Free Pledge for its students and staff and a plan to address bullies, targets, and bystanders.

Implications for Future Research

As we evaluate our efforts and look to sustain and institutionalize them, we highlight two components we plan to strengthen: parent involvement and classroom intervention. During Year 3 of the Bullying/Violence Prevention Plan, the CARE team will continue to strengthen the school culture that does not tolerate acts of physical or emotional aggression by anyone. As we prepare year 3, one of our goals is to enhance our measures at the classroom and parent level. Only through adult modeling and school wide use of a common language can the school and the community's culture become characterized by an understanding of and concern for others. Hence, it is essential to view the same language and wording throughout all schools. Through the use of focus groups with students and teachers, we plan to create "class rules" to be posted throughout all 33 schools; the rules will aim to address both direct and indirect bullying.

As we look at where Alamance County is in the change process, we refocus on our goals and redefine each measure. For example, close cooperation between school and home must be clearly defined if bullying problems are to be efficiently counteracted. To this date, the CARE team hosts Family Nights that offer information on relevant topics, such as the January 1, 2005, revised policy addressing bullying, informative tools such as the *15+ Make Time To Listen, Take Time To Talk. . . About Bullying talking points. About Bullying* is the second phase of the 15+ initiative that is produced by the Substance Abuse and Mental Health Services Administration (SAMHSA).⁹ A multimedia initiative, it is designed to provide practical guidance to

⁹ <http://www.meantalhealth.samhsa.gov/15plus/aboutbullying.asp>

parents and caregivers about how to create time to listen and talk with their children.) We regularly distribute the talking points to parents but plan to expand our target locations and events to increase parent contact. In addition, we plan to involve parents during the planning of our monthly anti-bullying activities via the regular VOICE meetings of the PTA presidents.

Conclusion

To be consistent with our nation's education reform law, No Child Left Behind, we must make it essential for our children to reach the North Carolina benchmark. We can then embrace the legislation to achieve our goal through continued prevention support. Our experience in ABSS is best summarized by The 2005 North Carolina Superintendent of the Year, the ABSS Superintendent, who noted:

The mission of the CARE team remains as relevant today as when it was founded: much has been achieved but much remains to be done. This is particularly the case because there have been major shifts within our community that make our school system more complex and, at the same time, its role more important. The CARE Team works to enhance the life of Alamance County's families and bridge communication between the Alamance-Burlington School System and our community partners. Each day, the Initiative grows stronger within our community. With the collaboration of the ABSS and outside agencies, the CARE Team is committed to the goal of ensuring that all students will receive education in learning environments that are safe, drug-free, and conducive to learning.

References

- Batsche, G and Knoff, H. (1994). Bullies and their victims: Understanding a pervasive problem in the schools. *The School Psychology Review*, 23, no.2, 165-175.
- Center for Mental Health in Schools. (2005). Bullying and addressing barriers to learning. *Addressing Barriers to Learning*, 10, no.1, 1-5.
- Craig, W. and Pepler, D. J. (1996). Understanding bullying at school: What can we do about it? Seattle, WA: Safe by Design, Committee on Children.
- Eslea, M. and Smith, P.K. (1998). The long-term effectiveness of anti-bullying work in primary schools. *Educational Research*, 40, no.2, 203-218.
- Farrington, D.P. and Hawkins, J.D. (1991). Predicting participation, early onset, and later persistence in officially recorded offending. *Criminal Behavior and Mental Health*, 1, 1-33.
- Garrity, C., Jens, K., Porter, W., Sager, N., Short-Camilli, C. (1997). Bully roofing your school: Creating a positive climate. *Intervention in School and Clinic*, 32(4), 235-243.
- Kumpulainen, K., Raesaenen, E., Henttonen, I. (1999). Children involved in bullying: Psychological disturbance and the persistence of the involvement. *Child Abuse & Neglect*, 23, 1253-1262.
- Limber, S. and Cedillo, S. (2003). Responding to bullying. *Intervention in School and Clinic*, 38(4), 236-242.
- Olweus, D. (1993). *Bullying at school: What we can do*. Oxford: Blackwell.
- Orpinas, P., Horne, Arthur, Staniszewski, D. (2003). School Bullying: Changing the Problem by Changing the School. *School Psychology Review*, 32, no.3, 431-444.
- Reid, K. (1989). Bullying and persistent school absenteeism. In: D.P. Tattum & D.A. Lane (Eds.), *Bullying in schools*. Stoke on Trent: Trentham Books.
- Roberts, W.B. and Morotti, A.A. (2000). The bully as victim: Understanding bully behaviors to increase the effectiveness of in the bully-victim dyad. *Professional School Counseling*, 4, no.2, 148-155.
- Smith, J.D., Schneider, B.H., Smith, P.K., Ananiadou, K. (2004). The Effectiveness of Whole-School Antibullying Programs: A Synthesis of Evaluation Research. *School Psychology Review*, 33, no.4, 547-560.
- Smith, P. K., Ananiadou, K., Cowie, H. (2003). Interventions to reduce school bullying. *Canadian Journal of Psychiatry*, 48(9), 591-599.

Appendix

Figure 1 - Logic Model

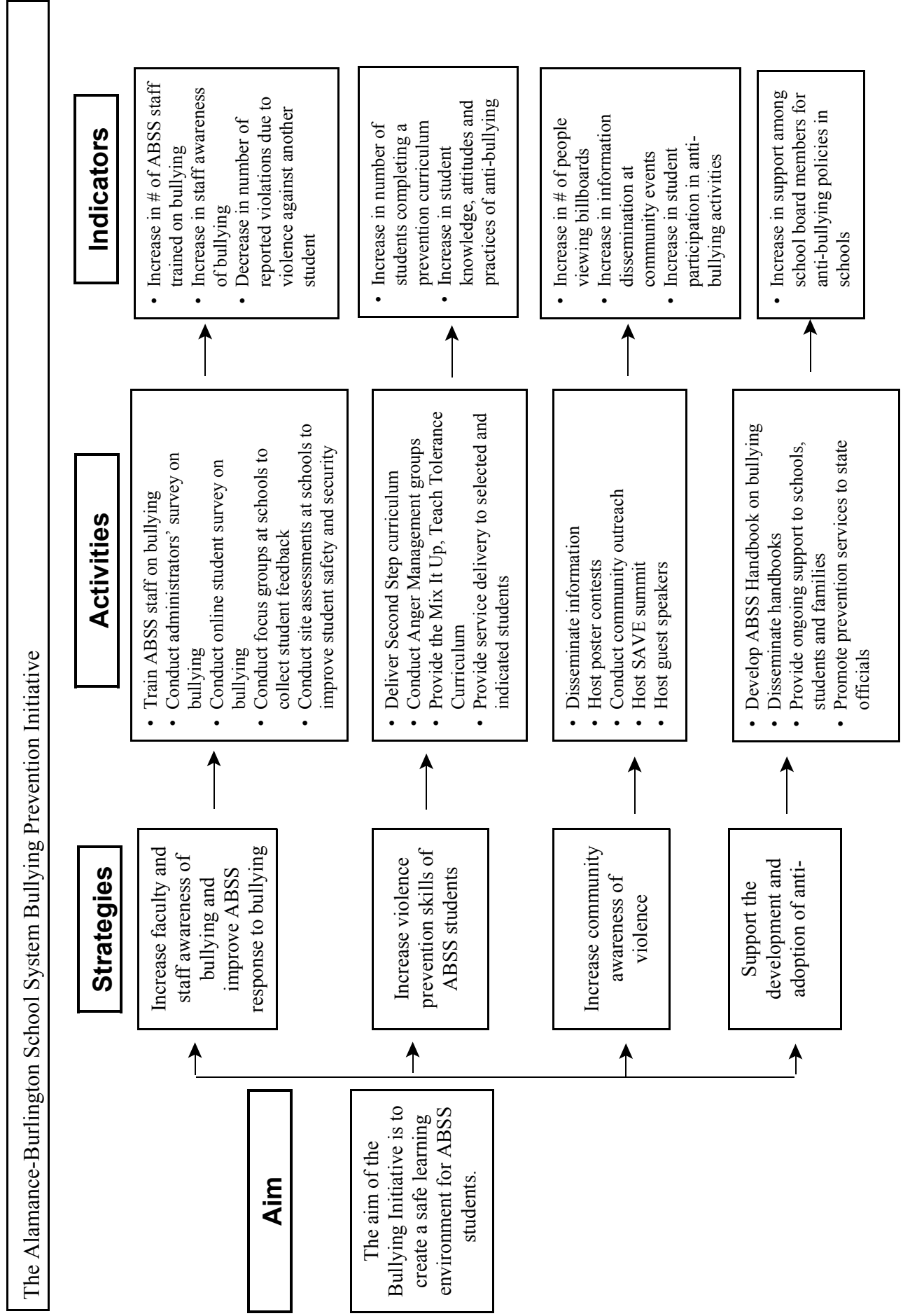


Table 1. The ABSS Bullying Initiative: Table of Measures

The ABSS Bullying Initiative: Table of Measures	
School-Level Activities	Measures
<ul style="list-style-type: none"> • Train all school staff on bullying • Engage school administrators and state officials on bullying • Conduct school site assessments to improve student safety • Distribute the video <i>Bullying: the Silent Crime</i> to all schools • Provide ongoing support and services to schools, students, and families • Provide cultural awareness training to all ABSS staff 	<ul style="list-style-type: none"> • Administrators Survey on Bullying • Training of school staff
Student- Level Activities	Measures
<ul style="list-style-type: none"> • Conduct focus groups at schools to collect student feedback about bullying and safety • Provide universal Second Step curriculum • Provide Anger Management classes to selected and indicated students • Support Students Against Violence Everywhere (S.A.V.E.) chapters and annual Summit • Provide Mix It Up and Teach Tolerance classes • Counsel and provide services to individuals referred to CARE for bullying • Support peer-led interventions and service 	<ul style="list-style-type: none"> • Online Student Survey on Bullying • Pre- and post- tests for Second Step and Anger Management class participants
Community-Level Activities	Measures
<ul style="list-style-type: none"> • Disseminate information on bullying • Host parent information nights at selected schools to discuss bullying • Conduct community violence prevention outreach • Host guest speakers • Sponsor bullying poster contests • Host local billboards addressing bullying • Coordinate mailing of new policy with report cards 	<ul style="list-style-type: none"> • Distribution counts of brochures, packets, flyers, etc. • Attendance sheets for trainings and community awareness nights
Policy-Level-Activities	Measures
<ul style="list-style-type: none"> • Present Anti-Bullying/Anti-Harassment Policy to Board of Education for approval • Coordinate distribution of the state Anti-Bullying/Anti-Harassment Policy • Develop and disseminate an ABSS handbook on bullying • Coordinate development of school plans to respond to state policy 	<ul style="list-style-type: none"> • Number of new policies in place • Number of school plans submitted • Number of handbooks distributed

Table 2. Changes in Mediating Constructs Among ABSS Anger Management/Conflict Resolution Survey Respondents, Academic Year 2003-2004

All Cases				
Mediating Constructs	Possible Range of Scores	Pre-Test Average All Cases	Post-Test Average All Cases	Change
Attitude Toward Conflict	8-32	20.38 (N=1,379)	20.65 (N=1,013)	-0.27
Attitude Toward Interpersonal Violence	1-4*	2.82 (N=1,290)	2.82 (N=982)	0
Violent Intentions	8-32*	19.54 (N=1,394)	19.52 (N=1,018)	-0.02
Matched Cases				
Mediating Constructs	Possible Range of Scores	Pre-Test Average Matched Cases	Post-Test Average Matched Cases	Change
Attitude Toward Conflict	8-32	20.40 (N=687)	20.64 (N=687)	-0.24
Attitude Toward Interpersonal Violence	1-4*	2.82 (N=623)	2.84 (N=623)	0.02
Violent Intentions	8-32*	19.65 (N=694)	19.61 (N=694)	-0.04
* Higher scores indicate desired direction of the construct.				
** $\rho < 0.05$				

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