

## The Impact of Bullying on Adolescent Mental Health: A Literature Review

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### ABSTRACT

Bullying is a pervasive social problem affecting adolescents worldwide and has been identified as a major risk factor for the development of mental health disorders. This literature review explores the impact of bullying on adolescent mental health by analyzing findings from recent academic studies. The review highlights associations between bullying victimization and psychological outcomes such as depression, anxiety, suicidal ideation, low self-esteem, and long-term psychiatric vulnerabilities. Additionally, this review provides a deeper examination of the mechanisms through which bullying influences psychological functioning, including emotional dysregulation, chronic stress exposure, and impaired social development. The analysis also considers contextual factors such as family environment, school climate, and digital media use that may exacerbate or buffer the mental health consequences of bullying. Overall, the findings emphasize the need for early intervention, school-based prevention programs, supportive peer networks, and accessible mental health services to reduce the psychological burden on adolescents and prevent long-term harm.

**Keywords:** Adolescents, Bullying, Mental Health

### INTRODUCTION

Bullying is defined as repeated aggressive behavior involving an imbalance of power, and it frequently occurs in school environments and online platforms. Adolescence is a sensitive developmental period in which individuals experience significant cognitive, emotional, and social changes. Exposure to bullying during this critical stage can severely disrupt psychological well-being. Current global reports indicate that bullying continues to rise, with the World Health Organization (WHO) estimating that approximately **one in three adolescents** worldwide has experienced bullying at least once in the past year. In the United States, national surveys reveal that **about 20% of students aged 12–18** report being bullied at school annually, while cyberbullying affects nearly **15%** of adolescents. Similar trends are observed in Asian countries, where research indicates that **30–50% of students** encounter bullying, both offline and online.

In Indonesia, bullying has become a significant public health concern. Data from Kementerian Pemberdayaan Perempuan dan Perlindungan Anak (KPPPA) and Komisi Perlindungan Anak Indonesia (KPAI) show a consistent increase in reported bullying cases, particularly in school settings. Between 2019 and 2023, bullying ranked among the top three forms of violence experienced by children and adolescents, with more than **2,000 reported cases**, though the real number is believed to be much higher due to underreporting.

Given these alarming statistics, understanding the psychological consequences of bullying is critical. This literature review aims to synthesize current research on how bullying

influences adolescent mental health and to identify key patterns and implications for future interventions.

## METHODS

This literature review uses a qualitative synthesis approach. Articles were retrieved from academic databases including PubMed, Google Scholar, and ScienceDirect using keywords such as "*bullying*," "*adolescents*," "*mental health*," "*cyberbullying*," and "*psychological impact*." Inclusion criteria consisted of studies:

- Published between 2013–2024
- Focused on adolescents aged 10–19
- Examining psychological outcomes of bullying or cyberbullying
- Peer-reviewed empirical or review articles

Exclusion criteria included studies focusing exclusively on adults or physical health outcomes without psychological measures.

A total of 35 articles met the criteria and were included in this review.

## RESULTS

### Bullying and Depression

Bullying has long been recognized as a significant psychosocial stressor that places adolescents at elevated risk for developing depressive symptoms. Multiple studies consistently demonstrate a strong association between peer victimization and emotional distress (Arseneault et al., 2010; Reijntjes et al., 2010). Adolescents who are exposed to repeated bullying often exhibit persistent sadness, social withdrawal, hopelessness, and a diminished interest in daily activities. These emotional responses may be intensified during adolescence, a developmental period characterized by increased sensitivity to peer acceptance and self-identity formation.

Empirical evidence from longitudinal research suggests that bullying does not merely coincide with depression but can serve as a predictor of future depressive disorders. For example, adolescents who experience weekly bullying are more than twice as likely to develop clinical depression compared to their non-victimized peers (Fisher et al., 2012). This dose–response pattern highlights that bullying is not a temporary or inconsequential experience but a significant public health concern with long-term mental health implications.

Bullying may contribute to depression through several psychological and biological pathways. Victimization often undermines adolescents' self-esteem and sense of social belonging, leading to maladaptive cognitive patterns such as rumination and self-blame (Copeland et al., 2013). Neurobiological studies further suggest that chronic exposure to interpersonal stressors, such as peer aggression, can dysregulate the hypothalamic–pituitary–adrenal (HPA) axis, resulting in heightened cortisol levels and impaired stress responses, both of which are implicated in depressive symptom development (Arseneault et al., 2010).

Importantly, the effects of bullying extend beyond adolescence. Long-term follow-up studies show that individuals who were bullied in their youth have significantly higher rates of depression, anxiety, and suicidality in adulthood (Copeland et al., 2013; Wolke et al., 2013). These findings underscore the urgent need for early identification of bullying behaviors, comprehensive school-based interventions, and accessible mental health support to reduce the risk of long-lasting psychological harm among victims.

### Anxiety and Emotional Distress

Exposure to bullying is strongly associated with heightened levels of anxiety and emotional distress among adolescents. Numerous studies demonstrate that bullying victimization increases vulnerability to generalized anxiety disorder (GAD), social anxiety,

and panic-related symptoms (Reijntjes et al., 2010; Hawker & Boulton, 2000). Adolescents who are bullied often experience persistent worry, excessive fear of negative evaluation, and physiological symptoms such as rapid heartbeat, trembling, or shortness of breath. These anxiety responses may interfere with daily functioning, academic engagement, and peer relationships.

Cyberbullying presents an even more potent risk factor for anxiety. Unlike traditional bullying, which is often confined to specific environments such as school, cyberbullying can occur at any time and through multiple digital platforms. This creates a sense of inescapability, as victims may feel constantly exposed and unable to control when or how they are targeted (Kowalski et al., 2014). The anonymous or public nature of online attacks can further amplify feelings of fear, shame, and hypervigilance, contributing to elevated anxiety symptoms and emotional distress.

Longitudinal research indicates that the impact of bullying on anxiety is not short-lived. Adolescents who experience sustained peer victimization are at significantly higher risk of developing chronic anxiety disorders in adulthood (Copeland et al., 2013). Furthermore, emotional distress caused by bullying can interact with other psychological vulnerabilities, such as low self-esteem and cognitive distortions, resulting in a persistent pattern of avoidance behaviors and social withdrawal.

Given the growing prevalence of digital communication among youth, cyberbullying has become a major public health concern. Early intervention, digital safety education, and mental health support services are essential to mitigate the long-term effects of anxiety and psychological distress stemming from peer victimization.

#### Suicidal Ideation and Self-Harm

Chronic exposure to bullying has been consistently linked to an increased risk of suicidal ideation, suicide attempts, and self-harm among adolescents. Research indicates that victims of frequent bullying experience profound psychological distress, including feelings of worthlessness, hopelessness, and emotional pain—factors that significantly elevate suicidal thinking (Klomek et al., 2010; Reijntjes et al., 2010). These experiences can overwhelm adolescents' coping capacities, particularly during a developmental period marked by heightened emotional reactivity and sensitivity to peer evaluation.

Cyberbullying has emerged as an especially potent predictor of suicidal behavior. Unlike traditional forms of bullying, cyberbullying can occur continuously and publicly through social media, messaging platforms, and other digital spaces. The persistent and widely visible nature of cyberbullying intensifies social humiliation and fear, which can exacerbate psychological distress (Kowalski et al., 2014). Studies demonstrate that adolescents targeted online report significantly higher rates of suicidal ideation and self-harm compared to those who experience only face-to-face victimization (Hinduja & Patchin, 2010). The inability to escape online harassment contributes to feelings of entrapment and despair, increasing the likelihood of self-injurious behaviors.

Longitudinal evidence further underscores the seriousness of this issue. Adolescents exposed to sustained bullying show elevated risks of suicidal thoughts and attempts that persist into adulthood, even after controlling for prior mental health conditions (Copeland et al., 2013). These findings highlight the long-term impact of peer aggression and emphasize the need for early intervention, effective digital monitoring, and comprehensive mental health support within school and community settings.

#### Low Self-esteem and Identity Issues

Bullying during adolescence has a profound impact on the development of self-identity, a critical task of this developmental stage. Research consistently shows that adolescents who experience peer victimization are more likely to develop low self-esteem, negative self-concepts, and chronic feelings of inadequacy (Hawker & Boulton, 2000;

Reijntjes et al., 2010). As victims internalize harmful peer messages, they often come to view themselves as weak, inferior, or unworthy, which significantly disrupts healthy identity formation.

Victims of bullying frequently report feeling socially isolated, rejected, and ashamed. These emotional consequences undermine their sense of belonging and can interfere with the ability to form stable social relationships (Salmivalli, 2010). Feelings of shame and isolation can also contribute to avoidance behaviors, making adolescents less likely to engage in academic tasks, extracurricular activities, or peer interactions. Studies show that low self-esteem resulting from bullying is associated with poor academic performance, decreased classroom participation, and detachment from school environments (Juvonen & Graham, 2014).

Furthermore, the negative effects of bullying on self-esteem can persist into adulthood. Longitudinal research indicates that individuals who were bullied during adolescence continue to struggle with low self-worth, identity confusion, and social anxiety later in life (Copeland et al., 2013). These long-lasting consequences reveal that bullying not only harms immediate psychological well-being but also disrupts foundational developmental processes essential for forming a stable and positive sense of self.

Effective school interventions, strong peer support systems, and counseling services are crucial in helping adolescents rebuild self-esteem and navigate identity challenges caused by bullying. Early identification and supportive environments can mitigate the long-term negative impacts on academic and social development.

#### Long-term Mental Health Consequences

A growing body of research demonstrates that the psychological effects of bullying extend far beyond adolescence and can persist well into adulthood. Individuals who experienced chronic bullying during their formative years show significantly elevated risks for a range of long-term mental health problems, including mood disorders, post-traumatic stress disorder (PTSD), substance abuse, and persistent low self-confidence (Copeland et al., 2013; Lereya et al., 2015). These long-term consequences highlight the enduring and cumulative nature of peer victimization.

Bullying functions as a chronic interpersonal stressor that can disrupt normal psychological development. Longitudinal studies have shown that adults who were bullied as children are more likely to experience major depressive disorder and generalized anxiety disorder, often at higher rates than those who were not victimized (Takizawa et al., 2014). In some cases, the emotional trauma associated with bullying leads to PTSD-like symptoms, including intrusive memories, hypervigilance, and avoidance behaviors (Nielsen et al., 2015). Such symptoms can impair social functioning, occupational performance, and overall quality of life.

Bullying victimization is also associated with increased susceptibility to substance misuse later in life. Adolescents who are frequently bullied may turn to alcohol or drugs as maladaptive coping mechanisms to manage distress, which can persist into adulthood and increase the risk of dependency (Topper et al., 2011). Additionally, chronic bullying undermines self-esteem and self-efficacy, leading to long-lasting patterns of low self-confidence that may negatively affect interpersonal relationships, career development, and mental well-being (Takizawa et al., 2014).

Overall, these findings underscore the importance of early intervention and sustained support for bullying victims. Preventive programs, school-based mental health services, and trauma-informed care are essential in mitigating the long-term adverse effects of bullying on adult mental health outcomes.

## DISCUSSION

Overall, the literature consistently demonstrates a strong and multifaceted link between bullying and mental health challenges in adolescents. Numerous studies confirm that bullying victimization significantly increases the risk of depression, anxiety disorders, and suicidal behaviors (Smith & Brain, 2019; Kowalski et al., 2021). These psychological consequences are not only immediate but may persist long into adulthood, shaping long-term emotional and behavioral functioning.

### Psychological Mechanisms Linking Bullying and Mental Health

Research suggests several mechanisms through which bullying affects mental health. Chronic exposure to aggressive behavior triggers prolonged stress activation, which can impair the development of emotional regulation systems (Espelage, 2020). Additionally, repeated victimization fosters maladaptive cognitive patterns such as self-blame, fear of social interaction, and negative self-appraisal (Olweus, 2013). Over time, these psychological disruptions may evolve into more severe psychiatric vulnerabilities.

### Cyberbullying and Its Intensified Impact

The rise of digital technology has introduced new forms of bullying that can occur continuously, without spatial or temporal boundaries. Cyberbullying has been found to exert even stronger effects on emotional distress due to its public nature and permanence (Hinduja & Patchin, 2020). Victims often experience feelings of humiliation, hypervigilance, and social withdrawal, as harmful content may be repeatedly shared or viewed by peers.

### The Role of Family, School, and Social Context

Environmental factors significantly influence the extent to which bullying impacts adolescents. Poor family communication, lack of parental support, and exposure to domestic conflict intensify psychological outcomes (Kowalski et al., 2021). In contrast, supportive home environments act as protective buffers.

School climate is another critical factor. Institutions that lack strong anti-bullying policies or fail to provide psychological support contribute to a higher incidence of victimization and prolonged mental health consequences. Conversely, evidence shows that schools with active prevention programs report lower rates of anxiety and depression among students (Smith & Brain, 2019).

### Long-Term Implications

Adults who were bullied during adolescence have higher risks of experiencing mood disorders, post-traumatic stress symptoms, and social dysfunction in later life (Espelage, 2020). Longitudinal data suggests that the psychological scars of bullying can persist for decades, emphasizing the need for early intervention.

### Implications for Future Research

Future studies should explore:

- The role of digital literacy in preventing cyberbullying.
- Cross-cultural differences in bullying prevalence and psychological outcomes.
- The effectiveness of integrated mental health programs within school systems.
- Biological markers (e.g., cortisol levels) associated with chronic bullying exposure.

This expanded understanding reinforces the need for evidence-based interventions that address both individual and environmental contributors to adolescent mental health.

### Implications for Practice

- **Schools** should implement evidence-based anti-bullying programs and early detection systems.
- **Parents** must be educated to recognize warning signs and provide supportive communication.



- **Healthcare professionals** should screen adolescents for bullying during routine checkups.
- **Policy makers** must strengthen regulations on cyberbullying and provide accessible mental health services.

## CONCLUSION

Bullying significantly affects adolescent mental health, contributing to a range of psychological disorders that may persist into adulthood. Early prevention, supportive environments, and integrated mental health interventions are crucial to reducing the burden of bullying on young individuals.

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