

School-based programs

Background

Childhood adversities are stressful and potentially traumatic events during childhood that can have lasting negative effects on health and wellbeing, and significantly contribute to the development of mental health problems. Intervening early to reduce and prevent the impact of adversities could help lessen the mental health burden on children and families.

Thirty-two evidence-based interventions to reduce the occurrence and impact of adversities on children under 8 years of age were identified through a literature search.

These interventions were then taken through a Delphi study, which aimed to arrive at an informed group consensus on the most feasible interventions to implement in Australia. The Delphi method is a technique for collecting expert opinions through a series of step-by-step surveys, and is a preferred method to establish consensus among experts, especially where there is a lack of evidence available to support decision making.

Programs

School-based anti-bullying programs were one of three broad intervention categories that achieved consensus from experts involved in the Delphi study. School-based anti-bullying programs are implemented at schools (face to face) and aim to reduce rates of bullying and increase empathy for victims of bullying. Programs may also teach students about cyber bullying.

Why choose School-based programs?

School-based anti-bullying programs achieved consensus within the Delphi study as these programs focus on preventing the occurrence of ACEs and there is good quality evidence of effectiveness and/or cost-effectiveness. In addition, this intervention was seen as feasible and important to the Australian context

These are an important group of interventions as more than a quarter of all school children report bullying experiences, and anti-bullying programmes reduce bullying victimisation and increase empathy and support for victims of bullying (Sahle et al. 2021). One Delphi study participant stated:

“Any program that shows evidence of reducing rates of bullying perpetration and victimisation is likely to have population benefits” (Sahle et al. 2021).

Two examples of school-based programs have been included in Table 1 below. Alternatively, you can find out more about school-based programs via the website:

<https://www.childhoodadversity.org.au/resources/for-service-providers/>



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Table 1. Examples of School-based programs

Intervention	Overview	Resources and personnel needed	Does it work? (Data from quasi-RCTs)
School-based anti-bullying programs	Most anti-bullying programs aim to increase children’s self-awareness, relationship skills, and responsible decision-making, as well as teaching children how they can appropriately respond to bullying. In addition to addressing traditional bullying, some programs include cyberbullying prevention.	Delivered by professionals from multiple sectors, including public health services and multidisciplinary professionals and/or personnel including principals, teachers and clinical psychologists.	Evidence shows anti-bullying programs reduce bullying perpetration and bullying victimisation.
School-based child sexual abuse prevention	A wide range of school-based education programs have been implemented to prevent child sexual abuse. Most of these programs share several core components, including the teaching of safety rules, body ownership, private parts of the body, distinguishing types of touches and types of secrets, and who to tell. The programs are for primary and secondary school students and are delivered in a group-based setting in schools.	Delivered by school psychologists, school social workers, school nurses, and teachers who have received training in school sexual abuse prevention.	Evidence shows school-based sexual abuse prevention programs are effective in increasing protective behaviours and knowledge of sexual abuse prevention; however, are not effective on children’s anxiety levels.

Note: There is evidence of cost-effectiveness for School-based child sexual abuse prevention programs. Cost-effectiveness of school-based anti-bullying programs are unknown (Sahle, 2020).



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Implications

No single intervention alone can be expected to effectively prevent adversity and reduce the impact on child and family mental health. Bullying in schools can have significant long-term consequences for students involved. Evidence has suggested that bullying is addressed most effectively through a holistic, whole of school approach, including educational content, and providing support and professional development to teachers and other school staff. School-based anti-bullying programs aim to teach students how to develop social and emotional competencies, and learn appropriate ways to respond to bullying (Centre for Education Statistics and Evaluation, 2001). Having programs in place to address and respond to bullying in childhood may reduce long-term impacts of ACE's such as alcohol dependence, depression, and anxiety.

References

1. Sahle B., Reavley N., Morgan A. et al. A Delphi study to identify intervention priorities to prevent the occurrence and reduce the impact of adverse childhood experiences. *Aust N Z J Psychiatry*. 2021 Jul 7:48674211025717. doi: 10.1177/00048674211025717. Epub ahead of print. PMID: 34231407.
2. Sahle B., Reavley N., Morgan A. et al. Communication Brief: Summary of interventions to prevent adverse childhood experiences and reduce their negative impact on mental health: An evidence based review. Centre of Research Excellence in Childhood Adversity and Mental Health, Melbourne, Australia (2020).
3. Centre for Education Statistics and Evaluation (2001). Anti-bullying interventions in schools – what works? Accessed on 05.01.22 from: <https://apo.org.au/sites/default/files/resource-files/2017-07/apo-nid237006.pdf>