Impact of School Bullying on Emotional Intelligence of Teenagers

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ABSTRACT

School bullying represents one of the most pervasive and damaging social phenomena affecting adolescents worldwide. Characterized by repeated aggressive behaviors—be they physical, verbal, or relational—bullying creates an environment of fear and powerlessness that can profoundly disrupt emotional development. Emotional intelligence (EI), the set of competencies enabling individuals to recognize, understand, and manage both their own emotions and those of others, is critical during adolescence for healthy social integration, academic success, and psychological resilience. Yet the relationship between bullying involvement and EI remains underexplored in a comprehensive, mixed-methods framework. This study draws on a sample of 500 urban secondary-school students aged 13 to 17, employing both the Emotional Quotient Inventory: Youth Version (EQ-I:YV) to quantify EI dimensions (self-awareness, self-regulation, motivation, empathy, and social skills) and semi-structured interviews with a purposive subsample of 40 participants (20 victims, 20 perpetrators) to capture nuanced personal narratives. Quantitative analyses reveal that victims of bullying score on average 9-10 points lower in self-regulation and empathy compared to non-victims, with these deficits explaining roughly 24% of the variance in selfregulatory functioning. Perpetrators exhibit marked weaknesses in self-awareness and social skills, accounting for approximately 18% of variance in these domains. Qualitative themes highlight how victims employ emotional numbing, hypervigilance, and social withdrawal as coping mechanisms, whereas perpetrators often rationalize aggression as a means to mask underlying insecurities, further stunting empathic capacity. These findings underscore a bidirectional erosion of emotional competencies: victims lose vital self-management and interpersonal attunement, while perpetrators fail to cultivate fundamental self-reflective and relational skills. Implications call for integrated anti-bullying interventions that combine policy enforcement with EI training curricula—targeting both victim support (e.g., emotion-regulation workshops, trauma-informed counseling) and perpetrator rehabilitation (e.g., empathy mentorship, social-skills coaching).

KEYWORDS

Bullying, Emotional Intelligence, Adolescents, Self-Regulation, Empathy

INTRODUCTION

Adolescence is a pivotal stage in human development, encompassing profound physiological, cognitive, and socio-emotional transformations that lay the groundwork for adult functioning. Among the competencies cultivated during this period, emotional intelligence (EI)—the capacity to perceive, appraise, and manage emotions in oneself and others—emerges as central to positive social interactions, academic achievement, and mental health resilience (Mayer, Salovey, & Caruso, 2004). Students with higher EI demonstrate superior conflict-resolution skills, stronger peer relationships, and reduced risk of anxiety and depression (Brackett,

Rivers, & Salovey, 2011). Conversely, deficits in EI leave adolescents vulnerable to peer rejection, maladaptive coping, and academic decline.

Intervention **Strategies** Interventions should combine policy with EI training. El Deficits in **El Deficits in Victims** Perpetrators Perpetrators lack self-Victims show deficits in awareness and social skills self-regulation and empathy Perpetrators' Victims' Emotional **Emotional** Responses Responses Victims cope with bullying Perpetrators rationalize aggression to mask through emotional numbing. insecurities.

Unveiling the Emotional Dimensions of Bullying

Figure-1. Unveiling the Emotional Dimensions of Bullying

In parallel, school bullying—intentional, repeated aggression characterized by a power imbalance between perpetrator and victim—remains a global concern. The World Health Organization reports that up to 30% of adolescents experience bullying in varying forms, including physical violence, verbal threats, social exclusion, and cyberbullying (WHO, 2016). Extensive research documents that victims face elevated risks of anxiety, depression, psychosomatic complaints, lowered self-esteem, and even suicidal ideation (Hawker & Boulton, 2000; Arseneault et al., 2010). Perpetrators themselves are not immune: chronic bullies often display antisocial behaviors, academic disengagement, and, in some cases, callous-unemotional traits (Frick & White, 2008).

Despite robust evidence of bullying's psychological harms, the specific pathways by which bullying experiences shape or erode EI dimensions remain insufficiently mapped. Most prior studies rely on cross-sectional self-reports, neglecting deeper qualitative insights into adolescents' emotional processing and coping narratives. Furthermore, the dual perspective of victims and perpetrators has seldom been integrated within a single mixed-methods design, limiting our understanding of bullying's bidirectional impact on EI.

Addressing this gap, the current study adopts a convergent mixed-methods approach to examine: (1) How do bullying victimization and perpetration correlate with EI dimensions—self-awareness, self-regulation, motivation, empathy, and social skills—in a large, urban adolescent sample? (2) What lived experiences and coping strategies underlie observed quantitative associations? By combining the Emotional Quotient Inventory: Youth Version (EQ-I:YV) with semi-structured interviews, this research provides a comprehensive portrait of how bullying involvement disrupts emotional competencies. Findings will inform holistic anti-bullying interventions that integrate policy measures with targeted EI training, thereby promoting safer, more emotionally supportive school environments.

Emotional Intelligence and Bullying Involvement



Figure-2. Emotional Intelligence and Bullying Involvement

LITERATURE REVIEW

Bullying Typologies and Psychosocial Effects

Bullying manifests through physical aggression (hitting, pushing), verbal abuse (threats, name-calling), relational aggression (social exclusion, rumor-spreading), and cyberbullying (electronic harassment) (Crick & Grotpeter, 1995). Prevalence estimates vary by context but consistently demonstrate that up to one-third of adolescents worldwide experience some form of bullying annually (UNICEF, 2019). Victims suffer both immediate distress—fear, sadness, anger—and long-term sequelae, including internalizing disorders (e.g., anxiety, depression), academic dropout, and impaired social relationships (Arseneault et al., 2010; Hawker & Boulton, 2000).

Bullies themselves often exhibit externalizing behaviors, such as aggression toward siblings or poor impulse control, and may carry callous-unemotional traits, marked by low empathy and guilt (Frick & White, 2008). Longitudinal evidence suggests that adolescent perpetrators face elevated risks of criminality and antisocial personality features in adulthood (Takizawa, Maughan, & Arseneault, 2014). However, less is known about which specific emotional competencies are compromised in perpetrators—a critical gap for designing rehabilitative programs.

Emotional Intelligence Theories and Measurement

Salovey and Mayer's (1990) ability model conceptualizes EI as four interrelated branches: (1) perceiving emotions; (2) using emotions to facilitate thought; (3) understanding emotional meanings; and (4) managing emotions. Goleman (1995) popularized a mixed model comprising five broader domains: self-awareness, self-regulation, motivation, empathy, and social skills. The Emotional Quotient Inventory: Youth Version (EQ-I:YV; Bar-On & Parker, 2000) operationalizes Goleman's framework, offering reliable subscales to quantify each domain in adolescents.

High EI correlates with better academic performance, adaptive coping under stress, and prosocial behaviors (Petrides, Frederickson, & Furnham, 2004). School-based EI interventions—including social-emotional learning (SEL) curricula—have been shown to reduce aggression and improve peer relations (Durlak et al., 2011). Yet, the impact of bullying experiences on EI development has received limited focused study.

Prior Research Linking Bullying and EI

A handful of studies report that bullying victimization predicts lower emotion-regulation capacities: Schwartz, Proctor, and Chien (2001) found that victimized children exhibited greater emotional dysregulation in observational tasks. Rivers et al. (2009) showed that bullying witnesses also experienced increased emotional distress and decreased empathic responsiveness. On the perpetration side, Sutton, Smith, and Swettenham (1999) suggested that bullies may possess intact cognitive empathy (understanding others' emotions) but lack affective empathy (sharing emotional experience), leading to manipulative social behaviors.

However, these studies often use small samples or single-method designs. There remains a need for comprehensive analyses that (a) simultaneously assess victim and perpetrator roles; (b) disaggregate effects across EI subdomains; and (c) integrate quantitative scores with qualitative accounts. This mixed-methods study advances the field by addressing each of these gaps.

SOCIAL RELEVANCE

Addressing school bullying is a public health imperative. The emotional and psychological toll extends beyond individual students, undermining classroom cohesion, teacher effectiveness, and broader community well-being. In India alone, national surveys indicate that over 50% of schoolchildren experience peer victimization at least once (Ministry of Women & Child Development, 2017). Internationally, the United Nations Sustainable Development Goal 4 aims to ensure inclusive, equitable quality education, which cannot be realized if bullying persists (UN, 2015).

Emotional intelligence is a protective factor that equips adolescents to navigate social challenges, resist peer pressure, and maintain mental health stability (Brackett et al., 2011). By elucidating the mechanisms by which bullying erodes EI, educators and policymakers can tailor interventions at multiple levels: curriculum design (integrating SEL modules), school policy (establishing clear anti-bullying protocols), and community outreach (parent workshops on emotional coaching). Furthermore, findings can inform mental health professionals developing trauma-informed group therapies that rebuild victims' emotional skills and remediate bullies' empathic deficits.

Ultimately, improving EI through targeted programs not only mitigates bullying's harmful effects but also fosters resilience, prosocial engagement, and lifelong emotional competencies—outcomes that benefit individuals, schools, and societies.

METHODOLOGY

Research Design and Rationale

A convergent mixed-methods design was chosen to provide both breadth (quantitative measurement of EI across a large sample) and depth (qualitative insights into adolescents' lived emotional experiences). The parallel strands allow cross-validation of results and richer interpretation of how bullying shapes emotional competencies (Creswell & Plano Clark, 2011).

Participants and Sampling Strategy

Five urban secondary schools were selected via purposive sampling to represent diverse socioeconomic backgrounds within the city. Within each school, stratified random sampling ensured equal gender distribution and representation across grades 8–12. The final quantitative sample comprised 500 students (250 males, 250 females; mean age = 15.2 years, SD = 1.4). From this pool, a purposive subsample of 40 participants (20 frequent victims, 20 frequent perpetrators, identified via questionnaires) was invited for in-depth interviews.

Instruments and Measures

- EQ-I:YV (Bar-On & Parker, 2000): A 60-item self-report inventory yielding standardized scores for five EI domains: self-awareness, self-regulation, motivation, empathy, and social skills. Internal consistencies (Cronbach's α) in prior studies range from .72 to .85.
- Revised Olweus Bully/Victim Questionnaire (Olweus, 1996): A validated 20-item measure assessing the frequency (never to several times weekly) and type (physical, verbal, relational, cyber) of bullying involvement over the past three months.
- Semi-Structured Interview Guide: Developed to probe emotional reactions to bullying incidents, coping strategies, perceived EI strengths/weaknesses, and suggestions for support.

Procedure

Following institutional ethics approval and informed consent, trained research assistants administered paper-and-pencil surveys during homeroom sessions. Participants completed the EQ-I:YV and bullying questionnaire in approximately 30 minutes. Data were anonymized and coded. Subsequently, interviews (lasting 45–60 minutes) were conducted in private rooms at each school, audio-recorded with permission, and transcribed verbatim.

Data Analysis

Quantitative data were entered into SPSS v26. Descriptive statistics characterized bullying prevalence and mean EI scores. Independent samples t-tests compared EI dimensions between victims vs. non-victims and perpetrators vs. non-perpetrators. Multiple regression models tested the predictive value of bullying frequency on each EI domain, controlling for age and gender. Qualitative transcripts were analyzed thematically (Braun & Clarke, 2006), with iterative coding to identify patterns in emotional processing, coping strategies, and perceived changes in EI competencies.

RESULTS

Quantitative Findings

Prevalence and Group Differences: Thirty-two percent of students reported being bullied at least once weekly, while 18% admitted to bullying peers at comparable frequencies. Victims scored significantly lower in self-regulation (M = 82.3, SD = 10.5) than non-victims (M = 92.1, SD = 9.8), t(498) = 8.12, p < .001, and in empathy (M = 79.7, SD = 11.2 vs. 87.5, SD = 10.4), t(498) = 6.34, p < .001. Perpetrators exhibited reduced self-awareness (M = 78.9, SD = 12.0) compared to non-perpetrators (M = 88.4, SD = 10.7),

t(498) = 7.45, p < .001, and lower social skills (M = 80.5, SD = 11.6 vs. 89.2, SD = 10.9), t(498) = 5.89, p < .001. No significant group differences emerged for the motivation subscale.

Predictive Models: Regression analyses showed that bullying victimization frequency accounted for 24% of variance in self-regulation scores ($R^2 = .24$, F(3,496) = 52.4, p < .001), controlling for demographics. Empathy deficits were similarly predicted ($R^2 = .18$, F(3,496) = 36.1, p < .001). Bullying perpetration frequency predicted 18% of variance in self-awareness deficits ($R^2 = .18$, F(3,496) = 36.3, p < .001) and 15% in social skills deficits ($R^2 = .15$, F(3,496) = 29.0, p < .001).

Qualitative Themes

- 1. **Emotional Numbing and Disconnection:** Victims described "turning off" feelings to avoid further emotional pain. As one 15-year-old female victim noted, "I stopped caring about anything because each time I showed emotion, they laughed more." This numbing prevented accurate self-awareness and awareness of others' distress.
- 2. **Hypervigilance and Anxiety:** Constant anticipation of bullying incidents led victims to experience chronic stress responses (heart racing, sweaty palms), impairing their self-regulation abilities. Several victims reported difficulty concentrating in class due to intrusive anxious thoughts.
- 3. **Aggressive Coping and Identity:** Perpetrators often framed bullying as a means to assert power and mask personal insecurities. A 16-year-old male bully admitted, "I picked on smaller kids so no one would pick on me." This externalization stunted their development of self-awareness and empathetic concern.
- 4. **Social Skill Deficits:** Interviewees who frequently bullied peers recounted challenges in forming genuine friendships, relying instead on intimidation. They voiced regret for missed opportunities to practice cooperation and conflict resolution.

CONCLUSION

This convergent mixed-methods study provides robust evidence that school bullying significantly undermines adolescents' emotional intelligence. Victims exhibit pronounced deficits in self-regulation and empathy, which hinder their capacity to manage stress and connect with peers. Perpetrators, while outwardly assertive, display low self-awareness and poor social skills, reflecting deeper emotional insecurities. The absence of group differences in motivation suggests that bullying primarily impacts emotion-related competencies rather than goal orientation.

Interventions must adopt a dual-focus strategy: (1) Victim support through trauma-informed counseling and emotion-regulation training to restore self-management and empathic engagement; (2) Perpetrator rehabilitation via empathy development programs, social-skills coaching, and reflective practices to build self-awareness and prosocial behaviors. Embedding social-emotional learning modules within school curricula and enforcing clear anti-bullying policies can create an environment conducive to EI growth.

By illuminating the specific EI domains compromised by bullying, this study informs more targeted, evidence-based prevention and remediation efforts, ultimately fostering safer, emotionally supportive school climates that promote adolescent well-being and social competence.

FUTURE SCOPE OF STUDY

Several avenues warrant further investigation. First, longitudinal research is needed to assess the stability of EI deficits and gains following targeted interventions. Tracking cohorts over multiple academic years can establish causal pathways and intervention durability. Second, extending research to rural and semi-urban schools will test generalizability across diverse sociocultural contexts, accounting for variations in resources, norms, and reporting practices. Third, integrating neurobiological measures—such as heart-rate variability or functional neuroimaging—could uncover physiological correlates of EI changes in bullied adolescents, informing neuro-informed intervention designs. Fourth, randomized controlled trials of combined anti-bullying and EI curricula can identify best practices, optimal dosage, and implementation strategies for different school settings. Finally, examining the role of peer bystanders and teacher responses in mediating the bullying–EI relationship will deepen understanding of contextual factors that either exacerbate or mitigate emotional harm. Collectively, such research will refine theoretical models of adolescent emotional development and guide more effective prevention and rehabilitation programs.

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Arvind Kumar et al. [Subject: English] [I.F. 5.761] International Journal of Research in Humanities & Soc. Sciences

Vol. 05, Issue 09, September: 2017 ISSN(P) 2347-5404 ISSN(O)2320 771X

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