Perceived Social Support From Family and Peers: The Association With Bullying Behaviours

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Abstract

Bullying is a significant concern among parents, educators, and policymakers in which both bullies and victims are at greater risk for later maladjustment. Although the effect of perceived social support from peers on preventing and mitigating bullying behaviours has been extensively studied, less have examined the roles of perceived social support from family and peers simultaneously. This study examined the association between perceived family support and bullying behaviours among Canadian early adolescents and sought to identify the extent to which perceived family support would be comparable to perceived peer support. Adolescent gender and age were controlled to account for potential gender and age differences. Participants included students in grades 4 to 7 (N = 312) who completed measures of perceived social support from peers and family, and bullying behaviours. Hierarchical multiple regression analyses indicated that perceived family support had a significant, negative association with bullying behaviours among early adolescents. Moreover, perceived family support was found to be more significantly associated with bullying behaviours than perceived peer support. Findings corroborate the importance of perceived social support among early adolescents and emphasize a need to not only examine how perceived social support is associated with bullying behaviours, but to account for the significant role of the family during the early adolescence period.

Keywords: bullying, perceived social support, family, peers, early adolescence

1. Introduction

The increased prevalence of bullying has resulted in greater efforts by educators, researchers, and policymakers to address this issue (Menesini & Salmivalli, 2017; Smith, Robinson, & Marchi, 2016; Smith & Brain, 2000; Swearer, Espelage, Vaillancourt, & Hymel, 2010). Bullying is a threat to children and adolescents’ healthy and adaptive development, with pervasive and negative effects including higher levels of depression and anxiety symptoms (Gini & Pozzoli, 2009), academic problems (Juvonen, 2011; Ladd, Herald-Brown, & Reiser, 2008; Popp & Peguero, 2012; Smith, Pepler, & Rigby, 2004), as well as difficulties in social relationships (Graham, Bellmore, & Juvonen, 2003; O’Brennan, Bradshaw, & Sawyer, 2009). Previous research highlights the important role of perceived social support in relation to various healthy developmental outcomes (e.g., Noret, Hunter, & Rasmussen, 2020). As school-aged children spend longer periods of time at school, peers and friends take on greater importance and are relied upon for support (Lam, McHale, & Crouter, 2014; Marini, Dane, Bosacki, & Cura, 2006; Somerville, 2013). However, research has also pointed out that parents continue to serve as a secure base for early adolescents (Nickerson & Nagle, 2005). To date, the literature is inconsistent with respect to the unique role of support from family and peers in relation to bullying. Some studies have suggested that perceived peer support becomes more dominant than perceived family support in the transition from childhood to adolescence (e.g., Lam et al., 2014), whereas others have indicated that perceived social support from family and peers were equally important for children and adolescents (e.g., Bokhorst, Sumter, & Westenberg, 2010). Thus, the purpose of the present study aimed to investigate the extent to which each of perceived social support from family and peers would be associated with bullying behaviours among early adolescents.

According to Hinde (1979), social interactions are the ‘building blocks’ of a relationship, where past interactions represent an expectation of future interactions. Moreover, Hinde argues that development is understood in the context of close, intimate, and meaningful relationships that individuals share with others. Some of a child’s
earliest and most influential relationships are within the family context, where a substantial number of interactions occur (Persram, Scirocco, Della Porta, & Howe, 2019). As children grow up, other relationships, such as peer relationships and friendships become increasingly important in their contribution to youth development and well-being. In line with these dynamic changes, much of the school bullying research emphasizes on the role of perceived social support from peers (Cowie, 2011; Holt & Espelage, 2007; Malecki & Demaray, 2003); comparatively, examinations of perceived social support from the family remains scarce (Bowes, Maughan, Caspi, Moffitt, & Arseneault, 2010). Despite this, we argue that both perceived family and peer support would be associated with early adolescents’ bullying behaviours.

1.1 Background

In this section, we discuss findings related to the associations between bullying and various physical, psychological, and social outcomes.

1.1.1 Bullying in Early Adolescence

The period of early adolescence is characterized by rapid emotional, physical and mental growth (Foley & Weinraub, 2017). At the same time, many early adolescents experience dramatic academic transitions from elementary school to middle school. This period is also marked by increased psychosocial distress, as early adolescents undergo physical and psychological changes. Together with academic and social adjustment challenges, this phase becomes a difficult transition into adolescence (Gutman & Eccles, 2007). In general, previous studies indicated that traditional bullying increases during childhood, reaching its peak in early adolescence, and decreases as the individual ages (Fitzpatrick, Dulin, & Piko, 2007).

1.1.2 Bullying Behaviour and Consequences

The adverse consequences of bullying are well established (Moore et al., 2017; Schoeler, Duncan, Cecil, Ploubidis, & Pingault, 2018; Zych, Farrington, Llorent, & Ttofi, 2017). In a qualitative review, Rigby (2003) found that the negative effects of bullying included: (1) low psychological well-being, (2) poor social adjustment, (3) psychological distress, and (4) physical illness. These negative outcomes not only impact individuals immediately, but also appear to have long-term effects (Farrington & Ttofi, 2011; Gibb, Horwood, & Fergusson, 2011; Ttofi, Farrington, & Lösel, 2012). For example, bullies in early adolescence tend to display externalizing behaviours and hyperactivity in adulthood (Kumpulainen & Rasanen, 2000), and are at greater risk for antisocial development (Ttofi, Farrington, Lösel & Bender, 2011). In line with this, Farrington and Ttofi (2011) found that school bullies were two times more likely than non-bullies to be convicted for violent offenses at 15 to 20 years of age, after controlling for prior childhood problems, childhood antisocial behaviour, and teacher-reported aggressive behaviour. Regarding bullying victimization, associations have been found with long-term outcomes such as poor mental health (e.g., anxiety and depression), non-suicidal self-injury, suicide attempts, suicide ideation, drug use (Moore et al., 2017; Valdebenito, Ttofi, & Eisner, 2015), and subsequent delinquent behaviours (Shah, Allen, Viner, & Bonell, 2019). Collectively, it is evident that bullying involvement, either as a bully or a victim, is a significant source of stress for individuals (Sharp, 1995), which affects their well-being. Not only is bullying prevention important, but it is also crucial to identify factors that assist bullies and bullied victims in coping effectively with their experiences, to prevent further bullying behaviours (Anonymous, 2009).

1.2 Perceived Social Support

In response to the prevalence of bullying in adolescence and its associated implications, researchers have sought to identify factors that explain how and why some individuals cope more effectively than others. Several studies have suggested that not every individual suffers from these adversities in the same way, which some speculate could be a result of buffering processes that enable youth to cope effectively in the face of hardship (Baldry & Farrington, 2005; Rutter, 2006). Among the most widely known protective factors is perceived social support (Cohen & Wills, 1985).

1.2.1 Perceived Social Support as a Protective Factor

Cohen and Wills (1985) proposed that social support relates to well-being as it offers positive emotions, feelings of self-worth, and functions as a stress buffer by reinforcing self-esteem, self-efficacy, and problem-solving behaviours. Perceived social support is characterized by the perception of the availability and adequacy of one’s social resources (Barrera, 1986; Cobb, 1976). The link between perceived social support and well-being has been heavily researched with children and adults (e.g., Cohen & Wills, 1985; Krause & Markides, 1990; Malecki & Demaray, 2006; Norris & Kaniasty, 1996), and has been argued to be an important factor for healthy development (Rosenfeld, Richman, & Bowen, 2000). For example, higher levels of perceived social support were associated with positive outcomes among adolescents, such as better academic performance and social
skills, and negatively associated with internalizing and externalizing behaviours (Demaray & Malecki, 2002; Malecki & Demaray, 2006). In addition, bullied adolescents report fewer mental health difficulties when they perceived more social support (Noret et al., 2020). Due to challenges youth face during the transitional period into adolescence (Gutman & Eccles, 2007), perceived social support is a crucial aspect for one’s social and emotional adjustment. For them, social support can come from various individuals, with two main sources from family and peers (Chu, Saucier, & Hafner, 2010).

1.2.2 Perceived Social Support From Peers

A substantial amount of evidence supports the important role that perceived peer support has among adolescents (e.g., Colarossi & Eccles, 2003). Some suggest a shift in social support during adolescence, with a decline in perceived family support and increased perceived peer support (Helsen, Vollebergh, & Meeus, 2000). In a cross-sectional study by Buhrmester (1990), stronger associations were found between friendship intimacy and emotional adjustment among adolescents, as compared to preadolescents. In addition, low levels of perceived peer support, but not perceived family support, was significantly associated with subsequent increases in depressive symptoms among adolescent girls (Burton, Stice, & Seeley, 2004). This may be explained by the fact that compared to children, adolescents spend a significant amount of time with peers at school, shifting their influence from parents towards their peers (Collins & Laursen, 2004). As adolescents rely less on their family, the number and quality of friendships increases, thus increasing the likelihood to feel supported by peers. Additionally, advances in socio-cognitive skills allow adolescents to relate to others more intimately (Eisenberg, Spinrad, & Knafo-Noam, 2015), bringing a heightened desire for belongingness and acceptance, which would make peer groups more salient (Flynn, Ehrenreich, Beron, & Underwood, 2015). Indeed, feeling supported and accepted by peers during adolescence is critical, allowing individuals to feel competent about themselves (Garcia-Reid, 2007).

On the contrary, due to the replaceable nature of peer groups and network shifts during adolescence, perceived peer support was reported to have less temporal stability than perceived family support (Stice, Ragan, & Randall, 2004). Several studies have found that adolescents reported occasions where peers minimized their experiences (Camara, Bacigalupe, & Padilla, 2017) or rejected them from the peer group (Rueger, Malecki, & Demaray, 2016) when they constantly sought for support. These experiences often lead adolescents to withdraw from seeking help from their peers (Camara et al., 2017).

1.2.3 Perceived Social Support From Family

Family relationships play a key role in influencing children's development and interactions within the family (e.g., Hinde, 1979; Parke & Buriel, 2007). Relationship theorists further argue that a child’s earliest, most enduring relationships are generally with family (e.g., Hinde, 1979). Previous research has also documented the importance of perceived family support. In particular, lower levels of family support were found to be associated with greater externalizing and internalizing problems (e.g., Cheng, 1997), while higher levels of family support were associated with better psychosocial and academic adjustment (Wenz-Gross et al., 1997). The perceived support from parents and older family members (e.g., older siblings) may be a more consistent source of support than peers, as these figures provide better guidance based on their life experience (Stice et al., 2004). Moreover, parents are a significant source of comfort for children, acting as a 'secure base' (Hazan & Zeifman, 1994). Additionally, studies suggest that parents continue to play a dominant role in adolescence and that their significance venture into other relationships (Nickerson & Nagle, 2005). Meanwhile, siblings also play a significant role in children's development and well-being (Dirks, Persram, Recchia, & Howe, 2015; Whiteman, McHale, & Crouter, 2007), through large amounts of positive (e.g., play) and negative (e.g., conflict) interactions (Howe, Persram, & Bergeron, 2019). Even though the general trend shifts in early adolescence, with increased perceived peer support and a decrease in perceived family support, the role of the family remains irreplaceable (Estell & Perdue, 2013; Helsen et al., 2000). Furthermore, greater perceptions of family support was associated with less emotional issues during adolescence, while no significant association was found for perceived peer support (Helsen et al., 2000). As Woods, Priest, and Roberson (2020) proposed, family relationships have a robust and enduring contribution on well-being, and a good relationship with high levels of connectedness with one’s family are important social assets in the transition toward adulthood (Eccles & Gootman, 2002). Put together, given the positive value of perceived family support on healthy psychosocial development (e.g., Helsen et al., 2000), we speculate that this source of support would be negatively associated with bullying behaviours among early adolescents.
1.2.4 Perceived Social Support and Bullying

A substantial amount of evidence on perceived social support in bullying has focused on support from peers. For example, studies indicate that individuals uninvolved in bullying reported greater perceived peer support (Holt & Espelage, 2007; Malecki & Demaray, 2003). Moreover, perceived peer support has been widely identified as a negative correlate of bullying behaviours by empowering children and adolescents to be proactive when being exposed to a bullying situation (e.g., Cowie, 2011). Although limited, there is some work that has investigated the role of perceived family support in bullying and its long-term protective outcomes. For example, a longitudinal study by Way & Robinson (2003) found that adolescence who reported low perceived family support during the first year of the study, showed greater self-esteem and less depressive symptoms when they perceived an increase in family support over a two-year period. Similarly, another longitudinal study revealed that perceived family support, and not the perceived support from peers or school personnel, buffered against the negative implications associated with exposure to depression and severe violence outcomes when measured a year later (Shahar and Henrich, 2016). Additionally, in a study that examined the association between the role of the family and the resiliency of bullied victims, Bowes and colleagues (2010) found that warmth from the family (e.g., family member’s warm attitude and a positive home atmosphere) was negatively associated with adverse outcomes (e.g., emotional or behavioural problems) of victimization. Moreover, in a two-year longitudinal study, Duggins, Kuperminc, Henrich, Smalls-Glover, & Perilla (2016) found that high family connectedness was linked to lower levels of aggression among students who had been bullied. Taken together, the positive role of the family is consistent with the existing literature (Barrera & Li, 1996; Helsen et al., 2000; Shahar & Henrich, 2016), such as promoting emotional and behavioural adjustment (Bowes et al., 2010; Way & Robinson, 2003). Despite evidence indicating the importance of perceived family support (Estell & Perdue, 2013; Helsen et al., 2000; Stice et al., 2004) we are unaware of any studies that have examined the relative contributions between the role of perceived social support from family and peers among early adolescence within the school bullying context.

1.3 Present Study

The purpose of this study was to examine the extent to which perceived social support from family and peers were differentially associated with bullying behaviours among early adolescents. As gender and age differences have been found across adolescence, especially in the case of bullying behaviours (Scheithauer, Hayer, Petermann, & Jugert, 2006; Smith, Cowie, Olafsson, & Loeföghe, 2002; Smith, López-Castro, Robinson, & Görzig, 2019), these two variables were accounted for in the study. Although perceived peer support is widely suggested to be a negative correlate of bullying for children and adolescents (e.g., Colarossi & Eccles, 2003), this study sought to investigate and examine the relative contributions of perceived family support among early adolescents. Based on previous studies that have examined the role of the family on aggressive behaviour (e.g., Duggins et al., 2016; Bowes et al., 2010), we tested the hypotheses that perceived family support would be negatively associated bullying behaviours and be comparable to peer support regarding its role on bullying behaviour (Bowes et al., 2010; Duggins et al., 2016; Murphy & McKenzie, 2016).

2. Method

2.1 Participants

Students from four elementary schools in Western Canada were recruited, and a total of 312 participated in the study (n = 147 males). Participants were in fourth- to seventh-grade, ranging between ages 9 and 13 years (M = 11.20 years, SD = .975). The sample was diverse in ethnic backgrounds, with approximately 64% being Asian Canadian, 16% White, 3% Indonesians, 3% Latinos, 2% First Nations, 2% Black, and 10% “Other” (non-specified or mixed). This study was part of a larger study conducted in 2003 (Anonymous, 2009).

2.2 Procedure

The present study obtained permission and approval from the participating schools’ staff members (e.g., principals and teachers), the school board, and the behavioural research ethics board of the University. Students who received parental permission and had also agreed to participate themselves participated in a single group-testing session in their classrooms, which lasted approximately 50 to 60 minutes. The first author was present during the entire testing session.

2.3 Measures

2.3.1 Perceived Social Support

The Relational Provisions Loneliness Questionnaire (RPLQ; Hayden-Thomson, 1989) was used to measure participant’s perceived social support. This 28-item multidimensional scale assessed perceived social support from peers and family members, tapping into group integration and personal intimacy, as experienced with peers.
and with family members. Each of the four subscales consisted of 7 items (e.g., family: “There is someone in my family I can turn to; peers: “I have a friend I can tell everything to”). In this study, the responses were modified so that (1) “not at all” was indicated by “NO”, (2) “not really true or not usually true” was indicated by “no”, (3) “sometimes”, (4) “kind of or sometimes true” was indicated by “yes”, and (5) “always” was indicated by “YES”. These modifications were made for participants to better understand the meaning of each number on the 5-point Likert scale. The present study only used the “intimacy” subscales; higher mean scores indicated greater levels of perceived social support for each subscale. In the present study, the scale showed good internal consistency (α = .87 for Peers subscale and α = .90 for Family subscale).

2.3.2 Bullying Behaviour

Self-reports of bullying behaviour were assessed using the bullying subscale from the Bullying Survey Questionnaire (Hymel, Vaillancourt, McDougall, & Renshaw, 2002). The bullying subscale consisted of three self-report items, which assessed physical (e.g., “How often have you taken part in physically bullying another student?”), verbal (e.g., “How often have you taken part in verbally bullying another student through insults or threats?”), and relational (e.g., “How often have you taken part in bullying another student through exclusion, rumors, or making someone look bad?”) forms of bullying behaviour. Participant responses were made by indicating on a 5-point Likert scale, with (1) being “Not at all”, (2) “Only a few times this year”, (3) “Every month”, (4) “Every week” and (5) as “Many times a week”. Adequate internal consistency was found for this scale (α = .72).

3. Results

A three-step hierarchical regression was conducted to examine the effects of perceived social support from each of the family and peers on self-reported bullying behaviours. Potential gender and age differences were controlled for by entering them as covariates in the first step of the model. Given that perceived family support is associated with positive psychosocial development (e.g., Duggins et al., 2016), this was entered in the model in the second step to examine the extent to which it was associated with bullying behaviours. Next, perceived peer support was entered in the third step of the model to investigate whether it contributed incrementally to the association of bullying behaviours above and beyond what was accounted for by perceived family support (see Table 1).

Results revealed that participant gender and age explained 1% of the variance and was not statistically significant, \( F(2, 309) = 1.72, p = .18 \). The second step, which included perceived family support, accounted for a significant increase in \( R^2 \Delta = .08 \), which produced a statistically significant model, \( F(1, 308) = 25.43, p < .001 \). In this second step, neither gender (B = .03, \( p = .54 \)) nor age (B = .04, \( p = .19 \)) were statistically significant. However, perceived family support was significantly and negatively associated with bullying behaviours (B = -.13, \( p < .001 \)). In other words, students who reported greater perceived family support were less likely to report engaging in bullying behaviours.

The inclusion of perceived peer support in the third step did not account for a significant increase in \( R^2 \Delta = .001, p = .55 \). Thus, perceived family support maintained statistical significance (B = -.12, \( p < .001 \)) in predicting bullying behaviours after the addition of perceived peer support, which was not significant (B = -.02, \( p = .55 \)).

Table 1. Hierarchical regression for the association between perceived social support and bullying behaviours

| Variable                        | B    | β    | t    | R   | R^2 | ΔR^2 |
|---------------------------------|------|------|------|-----|-----|------|
| Step 1                          |      |      |      | .10 | .01 | .01  |
| Intercept                       | .82* |      |      | .10 |     |      |
| Gender                          | .06  | .06  | 1.12 |     |     |      |
| Age                             | .04  | .09  | 1.50 |     |     |      |
| Step 2                          |      |      |      | .29 | .09 | .08***|
| Intercept                       | 1.40***|      |      |     |     |      |
| Gender                          | .03  | .03  | .62  |     |     |      |
| Age                             | .04  | .07  | 1.31 |     |     |      |
| Perceived Social Support - Family| -.13 | -.28 | -5.04***|     |     |      |
| Step 3                          |      |      |      | .30 | .09 | .00  |

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4. Discussion

The present study aimed to address a research gap on bullying behaviours among early adolescents and their perceived social support from family and peers. Two main hypotheses were explored in this study. The first hypothesis proposed that perceived family support would be negatively associated with bullying behaviours. The second hypothesis suggested that perceived social support from one’s family would be comparable to perceived peer support in its association with bullying behaviour among early adolescents. Our results supported the first hypothesis, which showed early adolescents were less likely to exhibit bullying behaviours if they had higher levels of perceived family support. In terms of the second hypothesis, given the lack of statistical significance of perceived peer support when both forms of perceived social support were examined simultaneously, it is suggested that the role of perceived family support has greater relative contributions to bullying behaviours than perceived peer support.

Specifically, findings indicated that high levels of perceived family support were associated with lower levels of self-reported bullying behaviours, even after accounting for the potential role of perceived peer support, as well as gender and age differences. These findings thus highlight the continued significance of perceived family support above and beyond that of perceived peer support in relation to early adolescents’ bullying behaviours. Although these findings do not support previous studies that have argued for the significant role that perceived peer support play in bullying contexts (e.g., Colarossi & Eccles, 2003; Holt & Espelage, 2007; Malecki & Demaray, 2003; Cowie, 2011), they support previous literature that have emphasized the predominant role of the family on adolescents’ social-emotional outcomes (e.g., Hinde, 1979; Steinberg, 2001; Woods et al., 2020).

To date, no study has examined the relative contributions of perceived peer and family support on bullying behaviours simultaneously. Unique to the present study, findings revealed that when added within the same model as perceived family support, perceived peer support was not significantly associated with bullying behaviours. This is to suggest that although perceived peer support is generally found to be associated with bullying behaviours (Colarossi & Eccles, 2003; Holt & Espelage, 2007; Malecki & Demaray, 2003; Cowie, 2011), its role is less significant when considering perceived family support in the same model. This finding is in line with the longitudinal study by Shahar and Henrich (2016), which found that when comparing the roles of perceived peer and family support on subsequent depression and violent outcomes after one year, only perceived family support was significant in this association.

One potential reason for the significant role of perceived family support above and beyond that of perceived peer support pertains to the emotional nature of bullying behaviours. Specifically, our study used the RPLQ (Hayden-Thomson, 1989) to measure perceived social support, with a focus on the availability of emotional support, from family and peers. Given that bullying involvement is associated with emotional disturbances (Honig & Zdunowski, 2010), early adolescents are more likely to perceive higher levels of emotional support from their family, especially due to the nature of adolescent peer groups, such as shifts in peer networks (Stice et al., 2004). Furthermore, it may be difficult to seek adequate support from peers, as most bullying incidences occur in the school context (Yoneyama & Naito, 2003). With a fear of peer rejection or unhelpful support (Camara et al., 2017; Rueger et al., 2016), there is a higher likelihood for early adolescents to turn to parents or siblings to alleviate negative outcomes of bullying involvement.

The nonsignificant role of perceived peer support may be explained by the unique characteristics of the early adolescent period. At this age, early adolescents undergo an abundance of physical cognitive, and relational changes, as they create new relationships outside of home (Foley & Weinraub, 2017). For these individuals, their most primary attachment figures are their family members (Nickerson & Nagle, 2005). Thus, for early adolescents to adjust and adapt in unfamiliar contexts, it is crucial to have strong support from their family, with whom they have the earliest and closest relationships with (Hinde, 1979). In line with this, the present study corroborates
results from previous research suggesting that the impact of the family remains a strong and influential force even after childhood (e.g., Barrera & Li, 1996; Eccles & Roeser, 2012). Extending further, unique findings from this study emphasizes that specifically, during early adolescence, a high level of availability, responsiveness, and social support from family members should be considered in the context of physical, verbal, and relational bullying behaviours. Finally, a robust social connection and intimate relationship between family members and early adolescents may effectively lower the frequency of bullying involvement.

5. Limitations and Future Directions

Despite these unique findings, the present study includes several limitations. Firstly, participants were from a particular city in Canada. Diverse cultural backgrounds and norms may influence early adolescents’ behaviours and their ways of understanding relationships with others (e.g., family and peers). More research is needed to investigate whether different cultures have impacts on children’s perception of social support and their bullying behaviour.

Secondly, participants were asked to report on their bullying behaviour and perceived social support. The answers of self-reported bullying behaviours could result in biased ratings, as the definition of bullying behaviours might be interpreted differently among participants.

Thirdly, although the RPLQ (Hayden-Thomson, 1989) focused on perceived social support from family and peers, teachers may play an important role in early adolescents’ bullying behaviours, as school-aged students spend a considerable amount of time with teachers at school. Future studies could consider examining the potential role of perceived teacher support.

Furthermore, perceived family support was measured without specifying the different roles of parents and siblings. Differences exist in the interactions between sibling-child and parent-child relationships. For example, siblings offer high levels of companionship and emotional support due to similarities in age and family environment (Coyle, Demaray & Malecki, 2017; Jacobs & Sillars, 2012). Future studies thus need to consider the separate roles of perceived parental and sibling support in the examination of bullying behaviours among early adolescents.

Lastly, data collection was conducted in 2003. Between the time of data collection to the present study, several aspects of bullying may have changed. For example, due to the rise in information and communication technologies (ICTs), cyberbullying has quickly become a prevalent form of bullying (Munõz-Miralles et al., 2016). Thus, future studies examining perceived social support among family and peers should incorporate measures of cyberbullying involvement as well. Despite the age of the data, the results from the present study are in line with more recent literature demonstrating the significant role of perceived social support on bullying behaviours among adolescents (Duggins et al., 2016; Estell & Purdue, 2013; Noret et al., 2020). Furthermore, although a decline in school bullying rates was observed in a recent review, there is evidence indicating that it continues to be pervasive and detrimental for children and adolescents (Zych et al., 2017).

Regardless of these limitations, the present study provides insights to the relative roles of perceived family and peer support in underlying early adolescents’ social-emotional outcomes. Specifically, the present study emphasizes the important role of family members in early adolescents’ bullying involvement (Duggins et al., 2016). These findings shed light on the saliency of different sources of perceived social support during the early adolescent period. Previous research primarily considers the impact of family and peers on child and adolescent functioning (e.g., Nickerson & Nagle, 2005; Fredrick, Demaray, Malecki & Dorio, 2018). Thus, this study offers a new perspective on the extent to which family and peers underlie bullying behaviours among early adolescents. For instance, contrary to the assumption that perceived peer support would undermine perceived family support, the present study found that the perception of social support from family played a more important role in bullying behaviours for early adolescents. This implies the importance to consider the role and impact of the family well beyond childhood. Despite the increased shift away from the home, the family relationship continues to act as a supportive base for these early adolescents as they face challenges in their changing environments.

6. Implications and Conclusion

Findings from the present study highlight the importance of perceived social support among early adolescents. The current study emphasizes the significant role of family members (e.g., parents, siblings) in the bullying context. In this study, perceived social support from family was assessed in terms of the level of availability and responsiveness of family members (e.g., being present and available to early adolescents when they need support and being responsive to their concerns and requests). In practice, when designing bullying intervention and prevention programs, members of the family are encouraged to emphasize the cultivation of a socially supportive dynamic. Specifically, a comfortable environment where early adolescents can share their difficulties and seek
help from family members should be considered. In addition, this study corroborates that being both present and responsive to early adolescents are crucial elements of expressing care and providing meaningful support in preventing bullying behaviours. Moving forward, research on bullying among early adolescents should further analyze the role of siblings and parent support as separate entities to elucidate the impact of the family. Lastly, future studies should not only consider the importance of perceived family support on bullying behaviours among early adolescents, but to also examine its role in subsequent developmental periods.

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