

Article history: Received 3 May 2024 Revised 02 June 2024 Accepted 03 August 2024 Published online 18 August 2024

International Journal of Education and Cognitive Sciences

Volume 5, Issue 3, pp 42-48



The Effectiveness of Mindfulness-Based Cognitive Behavioral Therapy Focused on Anger Management in Reducing Bullying Among Male Students

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Article Info

Article type: Original Research

How to cite this article:

Badpa. Kh, Alisofi, A., Keykha, H. (2024). The Effectiveness of Mindfulness-Based Cognitive Behavioral Therapy Focused on Anger Management in Reducing Bullying Among Male Students. *International Journal of Education and Cognitive Sciences*, 5(3), 42-48.

https://doi.org/10.61838/kman.ijeas.5.3.6



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ABSTRACT

Purpose: The present study aims to determine the effectiveness of mindfulnessbased cognitive behavioral therapy (CBT) focused on anger management in reducing bullying among male middle school students in Chabahar.

Methodology: This research employs a quasi-experimental method with a pre-test and post-test design. The statistical population consists of all male middle school students in Chabahar during the 2022-2023 academic year. For the study, a sample of 30 male middle school students from Chabahar, who scored higher on the Illinois Bullying Scale (2001), was randomly selected and divided into two groups: experimental and control (15 students each). The experimental group underwent ten sessions of mindfulness-based CBT focused on anger management, while the control group received no intervention. The Illinois Bullying Scale (2001) was used for data collection, and data analysis was performed using covariance analysis through SPSS 22 software.

Findings: The results indicated that the mean bullying scores of the experimental group significantly differed from those of the control group in the post-test stage (p < 0.01).

Conclusion: The findings of this study suggest that mindfulness-based CBT focused on anger management can effectively reduce bullying among students

Keywords: Cognitive Behavioral Therapy, Mindfulness, Anger Management, Bullying, Students.



1. Introduction

Bullying in schools is a pervasive and critical social issue that can have serious impacts on the psychological and academic development of students (Asdolahzadeh et al., 2021; Ofem, 2023; Yang & Seyed Alitabar, 2024). Bullying is defined as repeated aggressive behavior that involves an imbalance of power between the bully and the victim (Li et al., 2020). In recent years, there has been increasing attention to interventions aimed at reducing bullying in schools due to the long-term effects it can have on the mental health and social well-being of students (Cantone et al., 2015).

Regarding bullying interventions, research has indicated that programs focusing on cognition, emotions, and behaviors can effectively reduce bullying (Trip et al., 2015). Additionally, systematic reviews have highlighted the effectiveness of school-based interventions in reducing bullying and improving the mental health of students (Ayers et al., 2012; Fung, 2017).

Mindfulness is recognized as an effective method for reducing stress and improving emotional regulation (Enayati Shabkolai et al., 2023; Pourjaberi et al., 2023; Shoghi et al., 2023). Research has shown that mindfulness practices can lead to significant improvements in aggressive behaviors and psychological problems (Centeno, 2020; Eklund et al., 2016). Furthermore, studies examining the impacts of MBCT on mental health and aggressive behaviors have found that this approach can significantly reduce anger and enhance self-control skills (Milani et al., 2013; Prasetya et al., 2022).

MBCT has been used as an effective intervention method to reduce aggressive behaviors and bullying among students. This approach includes various practices such as seated meditation, body scan, and breathing exercises, aiming to increase the individual's awareness of their thoughts, feelings, and behaviors (Hodo, 2002; Mak et al., 2018). These practices help individuals improve their reactions and prevent aggressive behaviors (Bryant, 2024).

Research has demonstrated the crucial role of teachers and the school environment in reducing bullying. Teachers can contribute to reducing bullying behaviors in students by creating a supportive environment and providing effective strategies (Earnshaw et al., 2014). Moreover, school-based intervention programs that include social skills training and increased awareness of the negative impacts of bullying can help reduce these behaviors (Eklund et al., 2016; Wagener & Zettle, 2011). Some studies have shown that MBCT programs in schools can help improve aggressive behaviors and reduce bullying. For example, a study in Hong Kong indicated that MBCT-based interventions effectively reduced aggressive behaviors and bullying among students (Fung, 2017). Additionally, other studies have shown that mindfulness practices can significantly improve emotional regulation and reduce aggressive behaviors in students (Long, 2023; Sarijeh, 2023).

Longitudinal studies have demonstrated that MBCTbased interventions can have long-term effects on reducing bullying and improving the mental health of students. These interventions can help students enhance their self-control and emotional regulation skills and prevent aggressive behaviors (Madigan et al., 2023; Nuraeni, 2024).

Research has shown that bullying can lead to severe psychological and social problems, such as depression, anxiety, and even suicidal behaviors (Aguiar et al., 2022; Li et al., 2020). Therefore, effective interventions to reduce bullying and support the victims of such behaviors are of paramount importance. One effective method for reducing bullying is Mindfulness-Based Cognitive Therapy (MBCT), which focuses on anger management and improving selfcontrol skills (Liu et al., 2021). Numerous studies have demonstrated that interventions based on MBCT can have positive impacts on aggressive behaviors and emotional regulation. For instance, research exploring the effectiveness of MBCT in reducing anger and anxiety among students has reported positive results (Badpa et al., 2019; Perry-Parrish et al., 2016). Similarly, interventions such as reality therapy have also been effective in reducing behavioral and emotional problems among students (Asani, 2023).

Given the existing evidence, it can be concluded that Mindfulness-Based Cognitive Therapy is an effective method for reducing bullying and improving aggressive behaviors in students. These interventions can help students improve their self-control and emotional regulation skills and prevent aggressive behaviors. Moreover, the role of teachers and the school environment in implementing these interventions and supporting students is crucial. Therefore, the present study aims to determine the effectiveness of mindfulness-based cognitive behavioral therapy (CBT) focused on anger management in reducing bullying among male middle school students in Chabahar.

2. Methods and Materials



2.1. Study Design and Participants

This research employed a quasi-experimental design with a pre-test and post-test structure, including experimental and control groups. The study population consisted of all male middle school students in Chabahar during the 2022-2023 academic year. A sample of 30 students who scored higher on the Illinois Bullying Scale (2001) was randomly selected and divided into two groups: experimental and control, with 15 students in each group. Participants had the complete freedom to withdraw from the study at any time. In this research, mindfulness-based cognitive behavioral therapy (MBCT) focusing on anger management was the predictor variable, and bullying was the criterion (dependent) variable.

2.2. Measures

2.2.1. Bullying

Data were collected using the standard Illinois Bullying Scale (2001), which was the primary measurement tool for this study. The Illinois Bullying Scale, designed by Espelage and Holt (2001), consists of 18 items and three components measured on a five-point Likert scale ranging from "never" to "always," with each item scored between 1 and 5. This scale includes items like "I upset other students to make myself laugh" to assess bullying behavior. The validity and reliability of this questionnaire have been confirmed in multiple studies (Ayers et al., 2012; Cantone et al., 2015; Gökkaya, 2017; Sarijeh, 2023).

2.3. Intervention

2.3.1. Mindfulness-Based Cognitive Behavioral Therapy

The experimental group underwent ten 90-minute sessions of mindfulness-based cognitive behavioral therapy (MBCT) focusing on anger management over two months. In each session, practical exercises were provided to the experimental group, and homework assignments and activities for subsequent sessions were also reviewed (Badpa et al., 2019; Bryant, 2024; Gargari, 2024; Mak et al., 2018; Milani et al., 2013).

Session Content:

Session 1: Introduction and orientation, counseling guidelines, open discussion, homework assignment.

Table 1

Mean and Standard Deviation of Bullying Scores in Experimental and Control Groups



Session 2: Review of previous session and homework, training on the cognitive-behavioral model.

Session 3: Discussion on mood, review of previous session and homework, body scan exercise.

Session 4: Exercise on thoughts, feelings, and behaviors; seated meditation practice; open discussion; assignment setting.

Session 5: Three-minute breathing space exercise; open discussion, homework assignment, review, and summary.

Session 6: Review of homework; seated meditation practice; introduction to coping strategy exercises.

Session 7: Review of homework, meditation practice, introduction to attitude factors exercises, open discussion.

Session 8: Introduction to problem-solving exercises; open discussion; assignment setting, review, and summary.

Session 9: Exercise linking cognitive-behavioral model and mindfulness; open discussion.

Session 10: Discussion on achieving goals; discussion on overcoming obstacles and limitations.

2.4. Data Analysis

The experimental group received mindfulness-based cognitive behavioral therapy (MBCT) focusing on anger management for ten sessions, while the control group received no intervention. Data analysis was conducted using covariance analysis via SPSS 22 software.

3. Findings and Results

A total of 30 male middle school students from Chabahar were randomly selected for this study, and they were divided into two groups: experimental and control, with 15 students each. The experimental group consisted of 53.33% students aged 13-14 years (8 students) and 46.67% students aged 14-15 years (7 students). The control group consisted of 60% students aged 13-14 years (9 students) and 40% students aged 14-15 years (6 students).

The results of the Illinois Bullying Scale were analyzed to determine the impact of mindfulness-based cognitive behavioral therapy (MBCT) focusing on anger management on bullying behaviors. The mean and standard deviation of bullying scores for the experimental and control groups in the pre-test and post-test stages are presented in Table 1.



| Variable | Stage | Group | Mean | Standard Deviation | |
|----------|-----------|--------------|-------|--------------------|--|
| Bullying | Pre-test | Experimental | 25.80 | 1.47 | |
| | Post-test | Experimental | 20.40 | 2.19 | |
| | Pre-test | Control | 19.26 | 5.40 | |
| | Post-test | Control | 28.86 | 2.74 | |

The findings indicate that the mean bullying scores in the experimental group significantly decreased in the post-test compared to the pre-test, whereas the mean scores in the control group increased. This suggests that the MBCT intervention had a positive impact on reducing bullying behaviors in the experimental group.

Prior to conducting the main analysis, assumptions for ANCOVA were checked and confirmed. The normality of

the data was assessed using the Shapiro-Wilk test, and the results indicated that the data were normally distributed (p > 0.05). Additionally, the homogeneity of variances was tested using Levene's test, and no significant differences were found (p > 0.05). Therefore, the assumptions for ANCOVA were met.

Table 2

Results of ANCOVA for Comparing Post-test Bullying Scores

| Source of Variation | Sum of Squares | df | Mean Square | F | Significance (P) | Partial Eta Squared |
|---------------------|----------------|----|-------------|--------|------------------|---------------------|
| Intercept | 227.31 | 1 | 227.31 | 53.25 | 0.05 | 0.66 |
| Pre-test | 58.07 | 1 | 58.07 | 13.60 | 0.05 | 0.33 |
| Group | 510.00 | 1 | 510.00 | 119.47 | 0.05 | 0.81 |
| Error | 115.25 | 27 | 4.26 | - | - | - |
| Total | 18915.00 | 30 | - | - | - | - |

As shown in Table 2, there is a significant difference between the mean post-test bullying scores of the experimental and control groups after adjusting for pre-test scores [F = 119.47, P < 0.05, $\eta^2 = 0.81$]. This indicates that the MBCT intervention significantly reduced bullying behaviors in the experimental group compared to the control group.

4. Discussion and Conclusion

The present study aimed to determine the effectiveness of mindfulness-based cognitive behavioral therapy (MBCT) focusing on anger management in reducing bullying behaviors among male middle school students. The findings revealed a significant reduction in bullying behaviors in the experimental group that received the MBCT intervention compared to the control group. This reduction in bullying scores highlights the potential of MBCT as an effective intervention for addressing aggressive behaviors in school settings.

The significant decrease in bullying scores in the experimental group aligns with previous research that has demonstrated the efficacy of MBCT in reducing aggressive behaviors and improving emotional regulation (Badpa et al., 2019; Liu et al., 2021). The use of mindfulness practices, such as seated meditation and body scan exercises, likely

helped the students develop greater awareness of their thoughts, emotions, and behaviors. This increased awareness enabled them to manage their anger more effectively and reduce their tendency to engage in bullying.

Moreover, the results are consistent with findings from studies like those by Fung (2017) and Milani et al. (2013), which reported positive outcomes of MBCT interventions in reducing aggression and enhancing self-control among students (Fung, 2017; Milani et al., 2013). The mindfulness practices taught during the intervention sessions helped students learn how to pause and reflect before reacting impulsively, thus decreasing their aggressive behaviors.

Additionally, the significant improvement in the experimental group's bullying scores after the intervention underscores the importance of integrating MBCT into school-based programs. Similar to the study by Perry-Parrish et al. (2016), our findings suggest that MBCT can effectively improve self-regulation skills in adolescents, which is crucial for managing emotions like anger and preventing bullying (Perry-Parrish et al., 2016).

Despite the positive outcomes, this study had several limitations. Firstly, the sample size was relatively small, and the study was conducted in a specific geographic location, which may limit the generalizability of the findings. Future studies should aim to include larger and more diverse samples to ensure the results can be generalized to a broader





population. Secondly, the study focused solely on male students, and it is unclear whether the same intervention would be equally effective for female students. Including both genders in future research could provide a more comprehensive understanding of MBCT's effectiveness across different groups.

Another limitation is the short duration of the intervention. While the study showed significant improvements in bullying behaviors after ten sessions, it is unclear whether these changes would be sustained over a more extended period. Long-term follow-up studies are needed to assess the durability of the intervention's effects. Additionally, the reliance on self-reported measures of bullying behaviors may introduce bias. Future research could incorporate multiple sources of data, such as teacher and peer reports, to validate the findings.

Future research should explore the impact of MBCT on bullying behaviors in different educational settings and among diverse populations. Studies could investigate the effectiveness of MBCT in reducing bullying behaviors in elementary and high school students to determine if age plays a role in the intervention's efficacy. Additionally, examining the effects of MBCT on other forms of aggressive behaviors, such as cyberbullying, could provide valuable insights into the broader applicability of the intervention.

It would also be beneficial to compare the effectiveness of MBCT with other interventions, such as reality therapy or traditional cognitive behavioral therapy, to identify the most effective approaches for reducing bullying. Longitudinal studies are needed to assess the long-term effects of MBCT on bullying behaviors and emotional regulation. Furthermore, future research should investigate the mechanisms through which MBCT exerts its effects, such as changes in brain function or stress hormone levels, to deepen our understanding of how mindfulness practices impact aggressive behaviors.

Based on the findings of this study, schools and educational institutions should consider incorporating MBCT into their programs to address bullying behaviors. School counselors and psychologists can be trained in delivering MBCT interventions, which can be integrated into regular school activities or offered as part of afterschool programs. Additionally, providing training workshops for teachers and parents on mindfulness practices and anger management techniques can enhance the support system for students and reinforce the skills learned during the intervention. Creating a supportive and mindful school environment is essential for the success of such programs. Schools can implement mindfulness practices, such as mindful breathing exercises or meditation sessions, during the school day to promote a culture of mindfulness and emotional regulation among students. Encouraging open communication and providing safe spaces for students to express their feelings can also contribute to reducing bullying behaviors and improving overall school climate.

Authors' Contributions

All authors significantly contributed to this study.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

Acknowledgments

We hereby thank all individuals for participating and cooperating us in this study.

Declaration of Interest

The authors report no conflict of interest.

Funding

According to the authors, this article has no financial support.

Ethical Considerations

In this study, to observe ethical considerations, participants were informed about the goals and importance of the research before the start of the interview and participated in the research with informed consent.

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