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*CORRESPONDENCE Sarfraz Aslam Sarfrazmian@nenu.edu.cn; Sarfraz.aslam@unitar.my

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Beyond borders: Examining bullying, social networks, and adolescents mental health in developing regions

Amjad Islam Amjad ¹, Sarfraz Aslam ^{2*} and Zahida Aziz Sial ³

¹School Education Department, Government of Punjab, Kasur, Pakistan, ²Faculty of Education and Humanities, UNITAR International University, Petaling Jaya, Malaysia, ³Department of Education, Bahauddin Zakariya University, Multan, Pakistan

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1 Introduction

Mental health is one of the pertinent public health problems at the global level (Liu et al., 2021). It is concerned with the overall wellbeing that enables individuals to manage typical stressors of routine life and work productively and effectively (Fusar-Poli et al., 2020). According to the 2017 Global Burden of Diseases (GBD) study, more than 10% of the global population suffered from a mental health issue, contributing around 5% of the overall global disease burden (James et al., 2018). Studies have shown that young people are more likely to suffer from anxiety and depression, and a significant number of children and adolescents deal with mental health issues (Collins et al., 2020; Ford et al., 2021).

Approximately 75% of people who suffer from mental health problems in adulthood initially experience challenges before reaching the age of 18. Adolescents who suffer from mental health problems during this critical period have significant effects, including lower academic and professional achievements, challenges in interpersonal relationships, and recurrent cases of depression (Sadler et al., 2018). Research on the mental health of adolescents has highlighted the importance of addressing mental health issues during this critical developmental stage (Fegert et al., 2020). Studies have shown that untreated mental health problems in adolescence can have long-lasting effects on overall wellbeing and functioning in adulthood (Grover et al., 2024; Moscibrodzki et al., 2021). The school environment plays a significant role in students' overall wellbeing, where they spend significant time interacting with peers and teachers (Kaya and Erdem, 2021).

1.1 Bullying and its relation to mental health problems and the role of social support

Bullying is a form of aggressive behavior in which someone intentionally and repeatedly causes another person injury or discomfort (Rigby, 2020). Bullying can take many forms, including physical, verbal, and social (Kennedy, 2020). It often involves an imbalance of power or strength, where the bully dominates the victim (Mishra et al., 2021). School bullying is a widespread phenomenon that is observed worldwide. The Global Bullying Dataset, which encompassed 126 countries, reveals that the prevalence of bullying among boys and girls is 32 and 36%, respectively. School plays an important role in the socialization of adolescents, contributing to the development of their psychosocial

transition. There is a high correlation between bullying and disengagement in school. School-related factors, such as bullying, most often lead to disinterest and disengagement in schools (Moyano and Sánchez-Fuentes, 2020).

In recent years, there has been a growing focus on the relationship between bullying and mental health issues. Children and adolescent students who have been subjected to bullying are more likely to face various negative psychological and social repercussions, such as educational difficulties, low self-worth, stress, and depression (Eyuboglu et al., 2021). It is also evident from the literature that social support is one of the leading factors impacting adolescents' mental health (Ringdal et al., 2020). Social support from family does not significantly affect adolescents' mental health, but peer support helps them manage bullying and mental health challenges (Ringdal et al., 2021). Nielsen et al. (2020) found that social support, especially mentor support, is a successful moderator between bullying and the mental health of individuals. Therefore, we can infer that social support, bullying, and mental health are interrelated.

It is evident from the literature that in the Southeast Asian region, adolescents face victimization by bullying in schools and universities. It is also found that in low- and middle-income countries, the mental health sector has attained less attention and resources (policy and infrastructure). There is a lack of equitable access to resources for the victims of bullying. We found that depression symptoms are positively associated with bullying victimization (Murshid, 2017). Thus, we need to examine the bullying experiences among low-economic countries.

1.2 Aim of the study

This opinion paper aims to explore the relationship between bullying, social networks, and adolescent mental health in developing regions, emphasizing how social support can mitigate the adverse effects of bullying on mental health outcomes.

1.3 Theoretical underpinning

Bullying among Pakistani adolescents poses significant challenges to their mental health, a concern that can be critically analyzed through the lens of social cognitive theory (SCT). Albert Bandura argues that learning occurs in a social context, with a dynamic and reciprocal interaction of the person, environment, and behavior (Bandura, 1986). This argument becomes particularly relevant in the Pakistani context as adolescents navigate complex social dynamics influenced by cultural, religious, and societal norms (Shaikh et al., 2019). Bullying, whether physical, verbal, or cyber, acts as a negative behavior model, engendering a variety of adverse mental health outcomes in adolescents (Torres et al., 2020). The theory highlights the role of observational learning, where adolescents not only learn by experiencing bullying but also by witnessing it, thus perpetuating a cycle of aggressive behavior and its psychological impact.

Social support, as seen through SCT, emerges as a critical factor in mitigating the adverse effects of bullying on mental health. SCT emphasizes the role of environmental factors in shaping behavior and psychological wellbeing (Abbas et al., 2022). In the Pakistani adolescents' context, family and community support play an important role in providing resilience against the psychological harm inflicted by bullying (Jilani et al., 2020). The theory suggests that positive reinforcement and support from these social networks can significantly influence adolescents' ability to cope with bullying, thus fostering a more positive self-concept and greater selfefficacy. This is crucial in a collectivist society like Pakistan, where communal and familial bonds strongly influence individual behavior and mental health (Shafiq, 2020).

However, the application of SCT to understanding adolescents and mental health in Pakistan also requires a consideration of the unique sociocultural context. The theory argues that individuals are agents of change in their own lives, but in a society where collectivist values predominate, individual agency might be intertwined with societal expectations (Schunk and DiBenedetto, 2020). This suggests that while individual adolescents can exhibit resilience and coping strategies against bullying, the extent to which they can exercise this activity is likely influenced by their social environment. Therefore, interventions to improve mental health and resilience in Pakistani adolescents must address individual coping mechanisms and consider the larger social and cultural context that shapes these behaviors and attitudes (Abo-Zena et al., 2022).

1.4 Growing concern for adolescent mental health

Adolescents' mental health is now receiving more attention as they contribute to the future of any culture, community, and country. Thus, we need to provide a safe, healthy, and respectful culture for their holistic development (Amjad et al., 2023, 2024). The World Health Organization (WHO) has identified mental health disorders as the leading causes of illness and disability among adolescents, indicating that approximately one in six people in this age group experience a mental health condition (World Health Organisation, 2022). These conditions can significantly impact their overall wellbeing and their ability to thrive academically, socially, and emotionally. Society must prioritize mental health support and resources for adolescents to ensure they receive the necessary care and interventions to lead healthy and fulfilling lives (Bauer et al., 2021).

Furthermore, the literature highlights the critical need for early intervention and developing a comprehensive support system to mitigate the adverse effects of these mental health challenges (Nooteboom et al., 2021). Studies have shown that early detection and appropriate interventions for mental health disorders in adolescents can lead to significantly improved outcomes in adulthood, highlighting the importance of integrating mental health services within educational and community settings (Abo-Zena et al., 2022; Deschamps et al., 2020; Revet et al., 2021). Despite the evident need, mental health services for adolescents remain underfunded and under-prioritized in many countries, leading to a treatment gap that exacerbates the long-term consequences of these conditions (Babatunde et al., 2021; Yu et al., 2023). Consequently, there is a compelling argument for increased attention and focus on managing adolescents' mental health services, emphasizing the development of assessable, culturally sensitive, and ageappropriate interventions that can address the diverse needs of this age group.

1.5 Role of social support in mental wellbeing

It is evident from the literature that adolescents face more difficult social circumstances, risks, and other stressful events than children do. Relationships, finances, and academics are three major contributors to stress. Interactions with family and friends transform this stage of adolescence (Poudel et al., 2020). Social support encompasses various forms, including emotional, instrumental, monetary, and educational support. Several studies have presented compelling evidence of the association between social support and adolescents' wellbeing (Tabassum et al., 2024; Tabbasam et al., 2023). It helps to reduce the stress levels of an individual and serves as a protective factor for people who face challenging life circumstances (Kettlewell and Lam, 2022; Yildirim and Tanriverdi, 2021). Social support is a defense line and significantly promotes adolescents' psychological wellbeing (Poudel et al., 2020).

2 Overview of existing research

Various contexts have previously been examined about bullying incidents among adolescents. Bullying behaviors are described in these studies, including their impact on victims' mental health (Murshid, 2017). Bullying experiences and mental health outcomes among adolescents have been extensively studied. The effects of bullying on adolescents' psychological wellbeing have been shown in numerous studies to correlate with anxiety, depression, and low self-esteem (Bauer et al., 2021).

Bullying negatively impacts adolescents' mental health, and studies have examined the role of social support. The psychological resilience of adolescents can be enhanced through supportive relationships. These studies have highlighted the protective role of social support (Wiens et al., 2020). Limited research has been conducted on the interaction between bullying and social support. The interaction between bullying and social support. The interaction between bullying and social support remains unknown, mainly despite the body of research on these factors. The relationship between bullying experiences and mental health outcomes among adolescents may be moderated by perceived social support. However, few studies have examined this in detail.

Adolescents in Southeast Asia are victims of bullying at educational institutes. It is also discovered that in low- and middleincome nations, the mental health sector receives less attention and resources (policy and infrastructure). Bullying victims face unequal access to resources. We discovered that depression symptoms are positively linked with bullying victimization (Murshid, 2017).

3 Summary and conclusion

Adolescents in Southeast Asia are victims of bullying at educational institutions. Adolescent mental health care in developing regions has several implications that can help to improve understanding and treatment of this important issue. Bullying experiences cause significant mental health problems for adolescents. Prevention and intervention of bullying are urgently needed in schools and communities. It also suggests that improving support systems for adolescents can benefit mental health by buffering the negative impacts of bullying on mental health.

Considering the discussion, antibullying interventions in developing regions must be prioritized and tailored to address the specific needs of adolescents. Interventions should focus on raising awareness, building empathy, and developing early detection and prevention strategies. In addition, school is crucial for allowing adolescents to reach out to peers, trusted adults, and mental health professionals within their schools and communities. Family and community collaboration is necessary to create a safe environment for bullying. A culturally sensitive approach to intervention and support is also essential when understanding bullying dynamics and social support within developing regions.

To determine whether bullying can mitigate mental health outcomes over the long term, longitudinal studies are needed. Furthermore, research should examine the effectiveness of antibullying interventions, which promote adolescent mental health through evidence-based practices. In addition, this study demonstrates the importance of addressing bullying and strengthening support systems to promote the wellbeing of adolescents in these regions by focusing on the implications for intervention and support efforts.

Author contributions

AA: Investigation, Validation, Writing – original draft, Writing – review & editing, Conceptualization. SA: Methodology, Resources, Supervision, Validation, Writing – review & editing, Conceptualization. ZS: Writing – review & editing, Methodology, Investigation.

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Conflict of interest

The authors declare that the research was conducted without any commercial or financial relationship that could be construed as a potential conflict of interest.

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