INitiating Change Locally in bUllyIng and aggression through the School EnVironment

Submission date
17/06/2011

Registration date
18/07/2011

Last Edited
20/07/2015

Recruitment status
No longer recruiting

Overall study status
Completed

Condition category
Mental and Behavioural Disorders

[X] Prospectively registered

[_] Protocol

[_] Statistical analysis plan

[X] Results

[_] Individual participant data

Plain English summary of protocol

Background and study aims
There is growing concern about the level of aggression and violence in schools in the United Kingdom. INCLUSIVE (INitiating Change Locally in bUllyIng and aggression through the School EnVironment) is a new study based on the international school environment, interventions and restorative justice (RJ) approaches. Our aim is to examine how feasible acceptable the INCLUSIVE methods are in an initial study, before carrying out a larger study.

Who can participate?
All students within the participating schools will take part in and benefit from the study. We will also be asking all students in Year 8 (ages 12 to 13) in both the intervention and control schools to complete questionnaires at the beginning and end of the study.

What does the study involve?
We will recruit 8 schools in South-East England to take part, with approximately 1,200 students aged 12/13. Schools will be randomly allocated to be part of the intervention (study) group, which receives funding and advice from a senior educational facilitator to help change the school environment to reduce aggression and bullying, or the control group, which continue with what they are currently doing. In the intervention group, we assist schools in engaging students and all school staff in changing the way the school operates to put restorative justice concepts at the heart of school life. We also train teachers and students in restorative justice techniques and help the schools deliver teaching on social and emotional learning.

What are the possible benefits and risks of participating?
The INCLUSIVE methods are designed to make schools safer and more inclusive institutions and reduce aggressive behaviours as well as improve health and well-being for students and staff. We believe it is unlikely that there are any risks of participating for either students or staff within schools. Participation is at the school level. Schools are likely to gain reduced levels of bullying and aggressive behaviours as well as improved well-being for students and staff. There are no side effects.

Where is the study run from?
Schools in the south east of England.

When is the study starting and how long is it expected to run for?
In the 2011-12 school year, from September 2011 to July 2012.

Who is funding the project?
1. The National Institute of Health - Health Technology Assessment (HTA) programme (UK)
2. The Big Lottery Fund (UK)
3. The Paul Hamlyn Foundation and Coutts Charitable Trust

Who is the main contact?
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Contact information

Type(s)
Scientific

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Additional identifiers

Protocol serial number
HTA 09/05/05, Version 1.1

Study information

Scientific Title
INitiating Change Locally in bUllyIng and aggression through the School EnVironment: a pilot cluster randomised controlled trial

Acronym
INCLUSIVE

Study objectives
To assess feasibility and acceptability of planning and delivery of the INCLUSIVE intervention and trial methods to inform a full-scale trial.

Ethics approval required
Old ethics approval format

Ethics approval(s)

Research Ethics Committee of the London School of Hygiene and Tropical Medicine (LSHTM), May 2011

Study design

Pilot cluster randomised controlled trial

Primary study design

Interventional

Study type(s)

Prevention

Health condition(s) or problem(s) studied

Aggressive and anti-social behaviour

Interventions

Intervention
The INCLUSIVE intervention consists of provision of an external expert facilitator, funding and a needs assessment survey: these are the intervention inputs. These enable schools to convene an action team and nominate staff to receive training. These intervention processes in turn lead to and/or enable various outputs including
1. Revised policies and school rules
2. Use of restorative justice (RJ) approaches including circle time and restorative conferencing
3. Revised peer mediation schemes to promote a safe school environment
4. A student curriculum.
These immediate impacts should then lead to a reduction in aggressive and other risk behaviours. Our intervention will also allow some tailoring of what outputs are delivered in each school, according to student need, informed by our survey. This balancing of standardisation and flexibility is common practice in school-environmental interventions.

Control
No Intervention. Control schools will continue with their usual practice.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

Current primary outcome as of 10/01/2012

1. The primary outcome of this pilot trial is feasibility of recruitment and delivery of the intervention. Analysis of process not outcome data will be the primary focus of this pilot trial in order to assess whether it would be appropriate to continue to a full trial.
2. Indicative primary outcome measure being field-tested in this pilot trial: A future full trial will use aggressive behaviour (physical and/or emotional) as its primary outcome. We include bullying (i.e. repetitive behaviour) within this, and we will measure all aggressive behaviours, both in and out- of-school time. We will use this pilot study to examine the properties (response rates and psychometric properties) of exiting instruments that cover

2.1 physical violence,
2.2 emotional abuse (including victimisation) and/or
2.3 provoking or disrupting behaviours not associated with actual violence.

We will adapt and pilot the following two scales:
3. The Ayan Aba Youth Project (AAYP) sub-scale on aggressive behaviours. We are piloting the following 4- items: Have you ever, or in the past 3 months,
3.1 threatened to beat someone up, not including your brothers and sisters?
3.2 threatened to beat up your brothers and sisters?
3.3 threatened to cut, stab or shoot someone?
3.4 cut or stabbed someone?

Each item is scored 0-3; total score of 12.

4. The Gatehouse Bullying Scale (GBS) is a short tool to measure the occurrence of victimisation and bullying in schools. The GBS focuses on the experience of bullying and thus potentially complements the AAYP scale. The scale has 12 items, and asks about being the subject of recent
4.1 teasing and name calling,
4.2 rumours,
4.3 being left out of things and
4.4 physical threats or actual violence from other students.

Each section asks about the recent experience of that type of bullying (yes or no), how often it occurred, and how upset the student was by each type of bullying. Unlike other scales which generally ask about bullying in the last year, the GBS asks about recent occurrence of bullying (last 3 months) and is therefore able to assess changes within a school year. As well as a global estimate of bullying the GBS provides estimates of two covert and two overt types of bullying which can be useful for schools to better plan interventions dealing with school bullying.

Previous primary outcome
Aggressive behaviour (physical and/or emotional) data will be collected via student surveys. We will use this pilot study to examine the properties (response rates and psychometric properties) of a number of validated instruments including the Gatehouse Bullying Scale, the Ayan Aba Youth Project anti-social behaviour questions and the Self Report of Delinquency Scale. These cover:
1. Physical violence towards peers or staff
2. Emotional abuse of peers or staff (including victimisation)
3. Provoking or disrupting behaviours not associated with actual violence
4. Cyberbullying

We include bullying (i.e. repetitive behaviour) within this outcome. Note that we will measure all aggressive behaviour, both in and out-of-school time.

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Key secondary outcome(s))
The following information will be collected via student surveys:
1. Quality of life using the 23-item Pediatric Quality of Life Inventory (PedsQL) 4.0 and the Child Health Utility 9D measure.
2. Psychological distress using the Strengths and Difficulties Questionnaire, a brief screening instrument for detecting behavioural, emotional and peer problems and pro-social strengths in children and adolescents

3. Well-being using short Warwick-Edinburgh Mental + Emotional Wellbeing measure (WEMEWB)
4. Substance use (point prevalence and recent use of tobacco, alcohol and other drugs)
5. NHS use based on self-reported use of NHS services (primary care, A & E, other) in the past year.
6. Contact with police/justice system based on self-report of whether any contact with police or criminal justice system in the past 12 months etc.
7. School disciplinary policies and school environment: Student report of school fairness, management, disciplinary policies, safety and environment

These data collected via student surveys will be supplement by additional outcome data. Firstly, we will obtain data on teachers' experiences of violence, bullying, school-safety, job satisfaction and work-related stress through surveys of school staff. Secondly, additional routinely-collected data on each schools attendance rates, exclusion rates (fixed term and permanent), teacher absence, incident reports etc. will be used.

Qualitative data: Interviews with intervention facilitators (n=3) and action-team members (n=4 per school), as well as focus-group discussions (FGDs) with intervention-school staff (n=2 FGDs /10 staff per school) and students (n=2 FGDs/10 students per school) will be used to examine feasibility, acceptability, and context. Interviews with control-school senior leadership team members (n=2 per school) and FGDs with staff (n=1 FGD/5 staff per school) will examine their policies and practices regarding discipline, violence etc. We will use purposive sampling across our schools to ensure diversity of staff (role, seniority and involvement in training/ other specific intervention elements) and students (age, gender and involvement). Qualitative data will be entered into the data analysis package NVivo, to manage and code data.

Completion date
23/06/2012

Eligibility

Key inclusion criteria
1. Schools:
1.1. State secondary schools in southern/central England. For the pilot we aim to recruit schools from a broad range of backgrounds but excluding the least deprived schools i.e. we will recruit those with more than or equal to 6% of students eligible for free schools meals
2. Students:
2.1. While the intervention will have effects on the whole school, we will only collect data from young people in year 8 (age 12/13 years). We will attempt to include those not in school on the day of survey using a variety of mechanisms.

Participant type(s)
Patient

Healthy volunteers allowed
No

Age group
Child

Sex
All

Key exclusion criteria
1.Schools:
1.1. Independent schools
1.2. Schools with 6% or fewer students eligible for free school meals (least deprived 15% of schools)
2. Students: None

Date of first enrolment
01/09/2011

Date of final enrolment
23/06/2012

Locations

Countries of recruitment
United Kingdom

England

Study participating centre
UCL Institute of Child Health
London
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Sponsor information

Organisation
UCL Institute of Child Health (UK)

ROR
https://ror.org/02jx3x895

Funder(s)

Funder type
Government

Funder Name
NIHR Health Technology Assessment Programme - HTA (UK) (09/05/05)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary
Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/07/2015		Yes	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Study website	Study website	11/11/2025	11/11/2025	No	Yes