Optimizing parental care in preventing bullying behavior in children in Wonokromo Surabaya Village

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ABSTRACT

Parents who do not teach or model positive behavior to their children are at risk of forming children who have a tendency to bully other children. In addition, if parents do not consistently give consequences to children when they make mistakes or break the rules, it will increase the possibility of children being at risk of bullying. The community service aims to increase parents' understanding and attitude towards parenting in preventing bullying in children. Educational activities on proper parenting in preventing bullying in children are carried out offline with hands-on practice, discussion and questions and answers. Media PowerPoint, leaflets and daily notebooks, have been given to 20 parents in the Wonokromo Surabaya Village area. Initial and final evaluation using questionnaires distributed before and after education to determine the level of parental knowledge of bullying. Data were processed by frequency distribution. There was an increase in understanding shown by almost all participants showing positive parenting attitudes in preventing bullying behavior in children. Education is only carried out once a time, so the change in parents' attitudes is not entirely positive. Therefore, there is a need for follow-up with in-depth evaluations regarding child care that the team continues to carry out.

1.   INTRODUCTION

The phenomenon of bullying among children involves the identification of parental roles in preventing it and how they can optimize their parenting to prevent bullying behavior in their children. This societal issue is crucial to address because bullying can have negative impacts on the physical, emotional, social, and academic well-being of children. It is essential to tackle this issue to promote positive development and well-being in children. School bullying is a global phenomenon, and parents play a key role in supporting young children and reducing bullying incidents (Ey & Campbell, 2020). Children can send harsh and continuous messages to others on websites such as YouTube, Instagram, and Snapchat. Messages can be left anonymously on several websites, such as Instagram, Twitter, and other social media platforms (Andrews et al., 2023). Victims and perpetrators of bullying may potentially

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lead to depression and suicide later in life (Fujikawa et al., 2018). Research suggests that parents and teachers who support teenagers can reduce the risk of bullying. Parental understanding of bullying will influence how parents respond to and address bullying behavior (Kim et al., 2022).

Terms frequently used by society to describe bullying phenomena include harassment, oppression, bullying, extortion, isolation, or intimidation. Bullying is a deliberate and intentional hostile act aimed at causing harm, such as frightening through aggressive threats and terrorizing. It includes both planned and spontaneous actions, whether visible or almost invisible, in front of someone or behind their back, easily identifiable or hidden behind friendship, performed by a child or a group of children (Yuyarti, 2018).

A study conducted with 1,575 parents in Australia found that 71% of parents had a good understanding of bullying and recognized that differences of opinion or arguments are not acts of bullying. However, 20% believed that random acts of intimidation were not bullying, and 22% believed that intentionally hitting, insulting, threatening, and ostracizing actions were not considered bullying (Yang et al., 2018). Children experiencing bullying may exhibit various physical, emotional, or behavioral symptoms, so parents applying authoritative parenting styles may find their child as a bullying perpetrator. Meanwhile, parents implementing permissive parenting may find their child becoming a bullying victim (Tajuddin et al., 2018).

A study observing cyberbullying incidents among teenagers in the UK found a prevalence of 17.9%, while a study in Saudi Arabia found a prevalence of 20.97% (Gohal et al., 2023). According to R Data KPAI (2019), several bullying cases occurred in various regions in Indonesia. From January 2018 to April 2019, most cases occurred in primary education (67%), followed by junior high school (5 cases), senior high school (6 cases), and higher education (1 case) (R Data, 2019). Data from 10 districts in East Java in 2019 showed that Surabaya was ranked first in child violence cases (BASRA, 2019). This community service project was carried out based on partner problems identified during the initial survey in the Wonokromo Subdistrict. The Unusa community service team interviewed 7 residents and the head of RW 2 Wonokromo, finding that residents had not received mental health education on bullying behavior and its handling. The main caregivers were mothers, and the parenting style applied by parents was authoritarian (discipline and limited familiarity). Moreover, there were other reasons, such as Wonokromo Subdistrict in Surabaya being an area that had established cooperation with Unusa and being part of the Surabaya City area committed to being a "Child-Friendly City."

Children involved in bullying behavior will respond by resisting, being silent, fearful, avoiding, or being indifferent. Moreover, bullying behavior will have an impact on both the victim and the perpetrator of bullying (Hidaayah, 2018). Children who experience harassment show various physical and emotional symptoms, such as injuries or bruises, missing or destroyed clothing and belongings, frequent headaches, loss of appetite, sleep disturbances, bedwetting, and nightmares. Likewise, in school learning activities, children experience a decline in learning achievements, loss of interest in learning, low self-esteem, reduced social activities/isolation, more reserved/moody, changes in mood, anxiety, and depression. More serious symptoms include suicidal thoughts (Rivara & Le Menestrel, 2016).

The approach to parents is the right way to prevent this bullying behavior; correction of warm and attentive parenting styles should be emphasized. Parents need to understand that both authoritarian and caring parenting styles can help avoid bullying behavior (Abdullah & Ilham, 2023). Based on partner issues and the need for immediate solutions, community service aims to expedite understanding and attitudes of parents in parenting to prevent bullying in children in the Wonokromo Subdistrict of Surabaya.

2. METHODS

This community service implementation was attended by 20 parent participants and a community service team consisting of 4 lecturers and 5 students. The location of the implementation was at Unusa Campus A Jln. SMEA Wonokromo, implementation time is from April to July 2023, involving residents of Wonokromo Village. The implementation uses a Participatory Technology Development and educative model which is divided into several stages.

Stage 1: Location survey

The community service team of the Faculty of Nursing, Faculty of Medicine at the University of Nahdlatul Ulama Surabaya (UNUSA) planned the implementation of a community service program through literature study and problem identification. The selection of partners was based on the competence practice of the Community Soul of nursing and midwifery students in the Bachelor of Nursing and Nursing Sciences program at UNUSA in the Wonokromo sub-district. Issues were identified during the interactions with the community, particularly in the Wonokromo sub-district in Surabaya. The community service team visited the sub-district office and the house of the head of RW 02 to obtain data on the number of parents in the Wonokromo sub-district and parents estimated to be willing to attend the health education activities. Subsequently, permissions were obtained from the UNUSA Research and Community Service Institute (LPPM Unusa), and arrangements were made for the layout of equipment, the activity methodology, the media used, and the organization of team roles. Following this, all team members made preparations, including preparing the venue and equipment, and informing the participants.

Stage 2: Implementation

The activity implementation stage is the main stage of the community service program. The target of the activity at the implementation stage is in the FKK Unusa Nursing Study Program Classroom. The participants were all parents from Wonokromo Subdistrict, Surabaya who were willing to attend, divided into 3 activity sessions. The following are the implementation of distribution.

Preparation

The first activity before starting this community service was organizing a team consisting of 2 lecturers in the field of psychiatric nursing, 1 lecturer in basic nursing and 1 lecturer in pediatric medicine, assisted by five students from the Bachelor of Nursing study program. Making instruments in the form of parenting questionnaires and bullying questionnaires. Arranging permits for sub-districts and heads of RW 2 Wonokromo, completing media and implementation locations. The community service team also printed assignment letters that had been given by LPPM via the Simlitabmas Unusa website, prepared power point materials and printed leaflets to be given after participants filled out the questionnaire before the mental health education activity. Other media include interviews about how parents apply proper parenting, the number of children they have and support from other family members regarding parenting. These questions support the implementation of the care taught and obtain maximum results after health education is provided.

Main activities

The focus of this community service activity are: 1) Educating parents and using lecture, question and answer methods as well as demonstrations; and 2) Explaining material on parenting patterns in

preventing and handling bullying behavior if it occurs in children, consisting of getting to know the types of parenting patterns in children, the parts of the brain that in stimulus to build emotions, the concept of bullying, and proper parenting prevents bullying in children.

Aftermath and follow-ups

The community service team will conduct periodic surveys at least 3 times over a period of 4 months. The first survey is to monitor the success of implementation, with the first method immediately after the activity evaluating changes in knowledge and attitudes. The second survey captured the development of parents' parenting patterns and post-activity experience interviews, captured a picture of the academic atmosphere and the third survey was conducted online, namely communication about feelings and changes in behavior via cellular networks (telephone, WhatsApp and email) between the Unusa community service team and parents.

Stage 3: Evaluation and monitoring

This stage is the final stage of implementing community service activities. At this stage, evaluate parents' attitudes towards efforts to prevent bullying through parenting after being educated by the community service team by analyzing the results of the questionnaire that has been distributed. Questionnaire indicators include the parenting patterns used by parents, the role of parents and preventing bullying.

3.   RESULTS AND DISCUSSION
Results

Table 1 indicates that all parents (100%) who participated in the training were female. The majority of parents fell within the age group of 26-35 years, with a total of 14 individuals (70%). In terms of the age of the children, 9 and 11 years old had an equal frequency of 7 children each (35%). Concerning the parents' occupations, the majority were unemployed housewives (70%). Information obtained from the community engagement participants showed that nearly all of them (75%) had not previously received similar information about parenting patterns in preventing bullying, and the predominant parenting style was authoritative, accounting for 60%.

Figure 1 illustrates that out of the total 20 parents participating in community engagement, nearly all of them (75%) exhibited a negative attitude toward optimizing parental roles in preventing bullying behavior. Figure 2 explains that out of the total 20 parents participating in community engagement, almost all of them (95%) demonstrated a positive attitude after receiving health education on optimizing parental roles in preventing bullying behavior.

Satisfactory results were also evident in the parents' ability to actively listen and provide feedback by asking and answering questions during education sessions through leaflet media between the community engagement team from UNUSA's Faculty of Nursing and parents in the RW 2 Wonokromo area. Before the education sessions, some parents appeared disinterested, but as the team began introducing the optimization of parenting in preventing bullying behavior, a sense of joy was visible in their expressions. This indicates increased enthusiasm and interest in the topic relevant to the conditions in RW 2 Wonokromo.

Table 1. Demographic data of parents in RW 2 Wonokromo Surabaya, May 2023

Gender	Frequency	Percentage (%)
Male	0	0
Female	20	100
Total	20	100
Parents' age (years)	**Frequency**	**Percentage (%)**
17 – 25	1	5
26 – 35	14	70
36 – 40	5	25
41 – 50	0	0
51 – 60	0	0
Total	20	100
Children's age (years)	**Frequency**	**Percentage (%)**
9	7	35
10	6	30
11	7	35
Total	20	100
Occupational status	**Frequency**	**Percentage (%)**
Working	6	30
Not working	14	70
Total	20	100
Previously received similar information	**Frequency**	**Percentage (%)**
Yes	4	25
Not yet	16	75
Total	16	100
Parenting styles	**Frequency**	**Percentage (%)**
Authoritative	12	60
Permissive	8	40
Authoritarian	0	0
Total	16	100

Figure 1. Fill out the questionnaire
Figure 2. Education implementation

Feedback from parents after the education sessions was highly positive. Some parents were enthusiastic in asking questions and interacting during the education sessions. They were also able to recall parenting patterns and bullying prevention methods taught during the education. These results indicate that the empowerment program and mental health education through leaflet media successfully provided useful information and enhanced parents' understanding of their crucial role in preventing bullying behavior in children (Sabarudin et al., 2020).

The explanation of these satisfactory results suggests that empowerment programs through parental education should be continuously improved and receive further support from the community. The role of mothers in the primary education of children, as emphasized in the theory (Alsaif et al., 2018), is increasingly highlighted and appreciated in efforts to create a safe and friendly environment for children in the Wonokromo sub-district, Surabaya.
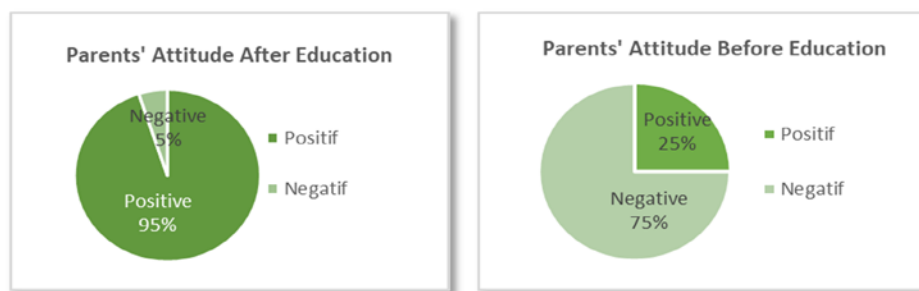

Figure 3. Parents' attitude diagram before education
Figure 4. Parents' attitude diagram after education

Discussion

In the health education on parenting to prevent bullying behavior in children, the community engagement team proceeded with observations and a question-and-answer session with parents while adapting to children at home. The community engagement activities in RW 2, Wonokromo sub-district, witnessed highly enthusiastic parents participating in education on parenting patterns and ways to optimize bullying prevention for children. Parents were eager to inquire about recognizing the symptoms of bullying behavior and how to prevent bullying behavior in children.

Bullying is a negative behavior that can take the form of harming others, carried out by an individual or a group towards another individual or group, persistently or repeatedly, by causing physical or mental harm (Prasetya et al., 2019). The behavior of bullying in children is caused by two factors: internal (within) and external (outside) factors. Internal factors can occur due to a child's self-esteem, low moral understanding, while external factors can arise from the parents' or family's overly indulgent attitude toward the child, overly strict or rigid parenting styles, and exposure to television programs (Amaliyah et al., 2023).

The impact of violence-containing content watched on television prompts children to use physical violence, and usually, children who engage in bullying are those who have frequently experienced physical and verbal violence before (Muhopilah et al., 2021). Research conducted in schools on adolescent children found that the self-concept formed since childhood can influence the severity of the bullying they experience. Many children involved in bullying behavior, especially cyberbullying, with high intensity, have a negative perception of themselves. Despite school regulations prohibiting the use of electronic devices on campus, a significant number of students continue to bring them (Hidaayah & Farizi, 2017).

Children raised by authoritarian parents believe that power, domination, and competition are necessary for their freedom of action because they perceive their parents as strict, demanding, and unsupportive. Children raised by parents with an authoritarian parenting style tend to interpret relationships with their peers ambiguously, leading them to act in ways that threaten others. Children who have limited warm communication with their parents also experience limitations in positive emotional expression, hindering them from discussing their problems with parents and finding solutions.

The appropriate approach to anticipate or prevent bullying behavior that can impact children's mental health is by providing information or health education (Wardani & Fajriansyah, 2017). Health education provided to parents or families and early detection of bullying behavior, which involves parents and other adults, should build a close communication with the child. This allows for the quick detection and anticipation of any deviant behavior. Parents or families are expected to instill strong prosocial attitudes in children from an early age, making it easy for children to adapt and develop a strong personality. Furthermore, parents or families are expected to provide sufficient attention and affection to children so that they exhibit good behavior outside the home.

The evaluation results of the community engagement activities in RW2, Wonokromo sub-district, indicate an improvement in parents' knowledge about preventing bullying in children. Parents can recognize bullying behavior in children and express their understanding of how to prevent bullying in children. The evaluation results after education show an increase in knowledge about bullying. One of the factors contributing to the improvement in knowledge is education. Education in the health community is an effort conducted in the form of an individual or group process to enhance or protect their health through increased knowledge, skills, and motivation driven by certain factors.

4. CONCLUSION AND RECOMMENDATIONS

The empowerment program for optimizing parenting to prevent bullying behavior in children in RW 2, Wonokromo sub-district, Surabaya, has been implemented according to plan. The obtained results indicate an increase in understanding, as nearly all participants demonstrate positive parenting attitudes in preventing bullying behavior in children. The education sessions were conducted only once, so the change in parents' attitudes has not entirely shifted to a positive direction. Therefore, there is a need for follow-up activities with in-depth evaluations related to ongoing parenting practices by the team.

For future community engagement initiatives, it is advisable to explore alternative methods and incorporate additional evaluation instruments to observe parenting practices at home. This approach aims to ensure that appropriate parenting styles, such as authoritative parenting, combined with democratic and responsive behaviors from both parents, can be effectively implemented in preventing bullying at home. Continuous evaluation and follow-up activities are crucial to sustaining positive changes in parenting attitudes and practices over time.

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