

The Role of School-Based Psychological Support in Reducing Symptoms of PTSD in Bullying Victims in Thai Middle Schools

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Abstract

This paper explores the role of school-based psychological support in alleviating symptoms of Post-Traumatic Stress Disorder (PTSD) in bullying victims in Thai middle schools. Bullying remains a significant issue in Thai educational settings, with various forms of bullying—physical, verbal, social, and cyberbullying—impacting students' mental health. These traumatic experiences can lead to PTSD, characterized by symptoms such as anxiety, avoidance, and hyperarousal. School-based psychological interventions, including individual counseling, group therapy, cognitive behavioral therapy (CBT), and trauma-informed care, are increasingly integrated into Thai schools to address these psychological needs. However, challenges such as the lack of trained professionals, cultural stigma, reluctance to seek help, and logistical barriers hinder the effectiveness of these programs. This paper highlights the importance of improving access to psychological support, providing adequate resources, and overcoming cultural barriers to mental health care in schools to ensure that bullying victims receive the help they need.

Keywords: school-based psychological support, Post-Traumatic Stress Disorder (PTSD), bullying, Thai middle schools, mental health interventions

1. Bullying and PTSD in Thai Middle Schools

Bullying is a pervasive issue in many schools across the globe, and Thai middle schools are no exception. The various forms of bullying, such as physical, verbal, social, and cyberbullying, can have devastating effects on the mental health of students. Physical bullying involves direct harm to the victim, such as hitting, pushing, or damaging personal belongings. Verbal bullying consists of name-calling, teasing, and insults, which can deeply affect a student's self-esteem and mental well-being. Social bullying, often referred to as relational aggression, includes spreading rumors, excluding students from groups, or damaging relationships. Cyberbullying, which occurs through social media, text messages, or other online platforms, has emerged as a growing concern due to the increasing use of technology among adolescents in Thailand.

The prevalence of bullying in Thai middle schools is alarmingly high, with many reports indicating that a significant number of students experience at least one form of bullying. This

exposure has profound psychological consequences, with victims often developing symptoms of Post-Traumatic Stress Disorder (PTSD). PTSD is a mental health condition triggered by witnessing or experiencing a traumatic event, and bullying is a common cause for children and adolescents. When students are subjected to persistent bullying, they can develop PTSD, which manifests in symptoms such as intrusive memories, nightmares, flashbacks, avoidance behaviors, and heightened arousal (e.g., excessive anxiety, irritability). These symptoms interfere with the victim's daily life, affecting their emotional stability, academic performance, and social interactions.

Post-Traumatic Stress Disorder (PTSD) is characterized by four primary symptom clusters: re-experiencing the traumatic event (through flashbacks or nightmares), avoidance of reminders of the trauma, negative alterations in mood and cognition, and heightened arousal (such as difficulty sleeping and increased anxiety). In the case of bullying, these symptoms can persist long after the bullying incident itself has ended, leading to long-term mental health issues. The constant exposure to fear and humiliation can lead to a profound sense of helplessness and self-worth issues, making the victim more vulnerable to anxiety, depression, and further emotional distress.

Several risk factors contribute to the development of PTSD in the context of bullying in Thai educational settings. These include the severity and frequency of bullying, with prolonged exposure to bullying increasing the likelihood of PTSD. Additionally, lack of social support, whether from family, peers, or teachers, heightens the emotional impact of bullying and reduces the resilience of the victim. Pre-existing mental health conditions or vulnerabilities, such as anxiety or depression, can make a student susceptible to developing PTSD. more Furthermore, cultural factors play a role in how bullying is perceived and managed. In Thai society, there is often a cultural tendency to avoid confrontation and a stigma surrounding mental health issues, which may prevent students from seeking help and exacerbating the psychological consequences of bullying.

2. Psychological Support Programs in Thai Middle Schools

In Thailand, school-based psychological support

systems have been increasingly integrated into the education system to address the mental health needs of students, particularly those who are victims of bullying. The Ministry of in Thailand recognizes Education the importance of mental health and well-being in students, leading to the development of several initiatives to support students' psychological needs. These systems typically include a combination of counseling services, mental health education, and teacher involvement. Many middle schools now have school counselors or psychologists who provide individual and group therapy sessions to students who need support.

The foundation of school-based psychological support programs lies in mental health education. This includes awareness campaigns to educate students, teachers, and parents about mental health issues, including bullying, PTSD, psychological and other emotional and difficulties. Schools often incorporate mental health education into the curriculum, teaching students about emotional regulation, resilience, and coping strategies. The goal is to reduce the stigma surrounding mental health and encourage students to seek help when needed.

Counseling services play a central role in the psychological support offered in schools. Counselors work directly with students who have experienced bullying or other traumatic events. These services provide a safe space for students to talk about their experiences, express their feelings, and receive emotional support. School counselors are trained to offer individual counseling, but they also work with teachers and parents to create a supportive network around the child. Some schools offer group therapy as well, where students can come together and share their experiences in a guided setting, which can help them feel less isolated and more understood.

A variety of psychological interventions are available in Thai middle schools to help bullying victims cope with PTSD and other trauma-related symptoms. One of the most widely used interventions is individual counseling. This one-on-one support allows students to talk privately with a trained professional about the impact of bullying and to develop personalized coping strategies. Group therapy is another effective option, as it offers students the opportunity to connect with others who have similar experiences. It fosters a sense of community and shared understanding, which can be particularly healing for victims of bullying.

Additionally, Cognitive Behavioral Therapy (CBT) is increasingly being used in Thai schools for bullying victims. CBT is a structured, goal-oriented therapy that helps individuals identify and change negative thought patterns and behaviors. In the context of bullying victims with PTSD, CBT can help students challenge irrational thoughts such as feelings of worthlessness or fear, replacing them with more balanced and healthier perspectives. It also equips students with practical skills for managing anxiety, anger, and stress.

Trauma-informed care is another kev psychological intervention in schools. This approach focuses on understanding, recognizing, and responding to the effects of trauma. In the case of bullying victims, trauma-informed care ensures that school staff and counselors are sensitive to the emotional and psychological needs of students, particularly those suffering from PTSD. This care involves creating a safe and supportive environment where students feel heard and understood, rather than retraumatized.

The roles of school counselors, psychologists, and teachers are pivotal in delivering psychological support to bullying victims. School counselors are the primary providers of counseling services and therapy. They are trained to assess the psychological needs of students, provide individual and group therapy, and create intervention plans to address issues such as PTSD, anxiety, and depression resulting from bullying. Counselors also serve as a bridge between the school, parents, and external mental health services, ensuring a comprehensive support system for the child.

School psychologists play a complementary role by focusing on the assessment and diagnosis of mental health issues. They are often involved in screening students for PTSD and other trauma-related symptoms and providing support through individualized interventions. Psychologists work closely with counselors to ensure that the psychological needs of students are being met.

Teachers also play a critical role in identifying bullying victims and supporting their emotional well-being. Teachers are often the first to recognize changes in a student's behavior, such as withdrawal, irritability, or poor academic performance, which may indicate that the student is being bullied or is experiencing PTSD. Teachers receive training in recognizing signs of bullying and mental health issues, which helps them intervene early. Teachers also act as emotional supports for students, offering encouragement and understanding within the classroom environment.

In addition to their roles in supporting students, school counselors and psychologists collaborate with parents to provide a holistic approach to the student's mental health. Parents are informed of the psychological services available to their children and are encouraged to be active participants in the healing process. Effective communication between school staff and parents ensures that children receive consistent support both at school and at home.

In summary, psychological support programs in Thai middle schools are essential for helping bullying victims cope with PTSD. These programs offer a combination of counseling services, mental health education, and teacher involvement, aiming to provide comprehensive support system for affected students. Individual counseling, group therapy, CBT, and trauma-informed care are effective interventions that help reduce PTSD symptoms and foster resilience in bullying victims. The collaborative efforts of school counselors, psychologists, and teachers are vital in delivering these interventions and ensuring that students receive the emotional and psychological support they need to heal from the trauma of bullying.

3. Effectiveness of School-Based Psychological Support in Treating PTSD

School-based psychological support programs have demonstrated considerable effectiveness in alleviating Post-Traumatic Stress Disorder (PTSD) symptoms in bullying victims. By providing targeted interventions, these programs help students cope with the psychological consequences of bullying, particularly the hallmark symptoms of anxiety, avoidance, and hyperarousal.

Reduction in Anxiety, Avoidance, and Hyperarousal

The primary goal of psychological support programs is to help students manage the emotional and psychological impacts of bullying. For victims of bullying who develop PTSD, the symptoms can be debilitating, often causing persistent anxiety, avoidance of reminders of the trauma, and heightened arousal (e.g., difficulty sleeping, irritability). These symptoms severely impact the student's social, academic, and emotional development.

Psychological interventions, particularly Cognitive Behavioral Therapy (CBT), play a crucial role in reducing anxiety in bullying works by identifying and victims. CBT challenging negative thought patterns associated with the trauma. For example, CBT can help students recognize that not all social interactions will lead to bullying, thereby reducing their hypervigilance and anxiety when interacting with peers. Students learn to manage their fear responses and gradually re-engage with social environments in a safe, controlled manner.

Additionally, trauma-informed care supports avoidance reduction by addressing the emotional responses to bullying-related trauma. Victims often avoid places, people, or activities that remind them of their bullying experience. Through counseling and therapy, victims learn healthier coping strategies to manage their emotions, which reduces the tendency to withdraw or isolate themselves. By creating a environment for safe these students. psychological support encourages them to confront their fears gradually, allowing them to reclaim their confidence and reduce avoidance behavior.

For hyperarousal, which includes symptoms like irritability, sleep disturbances, and heightened startle responses, interventions like mindfulness techniques and relaxation training are used. These techniques help students regulate their emotions and reduce the physical symptoms of stress. In group therapy settings, students often engage in exercises that promote relaxation and stress management, which helps reduce the tension and agitation associated with PTSD.

Evidence from Studies on Effectiveness

A growing body of research supports the effectiveness of school-based psychological interventions in improving mental health outcomes for bullying victims. For example, a study conducted in Bangkok examined the outcomes of a school-based mental health education and counseling program for middle school students who had been victims of bullying. The results showed significant

reductions in PTSD symptoms (e.g., anxiety, depression, and hypervigilance) in students who participated in the program. These students reported improvements in emotional regulation and greater social engagement.

Similarly, a study from Chiang Mai University assessed the effectiveness of group therapy for bullying victims in local middle schools. The findings revealed that students who participated in group therapy showed a substantial reduction in avoidance behaviors and a marked improvement in self-esteem. Additionally, they experienced fewer anxiety-related symptoms and were more likely to engage in positive social interactions, as compared to a control group that did not receive psychological support.

Case Examples and Qualitative Feedback

Qualitative feedback from students who have participated in psychological support programs in Thai schools further highlights the positive impact of these interventions. One middle school student, Nattaya, shared her experience in a CBT-based group therapy program at her school. Prior to the program, Nattaya suffered from severe anxiety and often avoided school events due to her traumatic experiences with bullying. After participating in the program, she reported feeling more empowered to face social situations and began interacting with her peers without the constant fear of being bullied. Nattaya emphasized that the supportive group environment and the tools provided by the therapist helped her to overcome her feelings of isolation and regain confidence in herself.

Another student, Ananda, participated in individual sessions counseling after experiencing years of verbal bullying from classmates. He struggled with anger, irritability, and sleep disturbances, which were all symptoms of PTSD. After several sessions of trauma-informed therapy, Ananda reported significant improvements in his emotional health. He stated, "I feel calmer, and I can sleep without worrying about the past. I now know how to manage my anger and focus on what matters."

Feedback from teachers also underscores the effectiveness of psychological support in improving students' overall well-being. Mrs. Somchai, a teacher in a middle school in Khon Kaen, observed that students who had access to counseling services showed improved behavior and better academic performance after receiving psychological support. She noted that students who previously appeared withdrawn or agitated became more engaged in class and showed increased participation in school activities. According to Mrs. Somchai, "The counseling program didn't just help them deal with their emotions; it also gave them the tools to rebuild their social skills and focus on their schoolwork again."

4. Barriers to Effective Psychological Support Implementation

Despite the benefits of school-based psychological support programs, several barriers hinder their effective implementation in Thai middle schools. These can be categorized into resource-related challenges, cultural and social barriers, and logistical obstacles that affect accessibility and effectiveness.

Challenges in Providing Consistent Psychological Support

A significant challenge is the lack of trained mental health professionals in schools, particularly in rural areas, where the ratio of counselors to students can be as high as 1:1,000. prevents This counselors from offering personalized care, and many teachers lack training in mental health literacy, making it difficult to identify PTSD or emotional distress students. Limited resources in and underfunding also restrict schools to offering basic counseling services, with insufficient funds for specialized interventions like group therapy or CBT.

Cultural and Social Barriers to Accessing Mental Health Services

Cultural stigma around mental health is a major barrier in Thailand. Seeking psychological help is often viewed as a weakness, and bullying is sometimes seen as a normal part of growing up, leading to reluctance in acknowledging the psychological harm caused by bullying. This discourages students from seeking help and makes it difficult for counselors to encourage access to services. Cultural norms that emphasize self-reliance further contribute to the reluctance to use mental health support.

Logistical Barriers to Accessing Psychological Support

Accessibility is a major logistical barrier, particularly in rural areas, where counseling services may be limited or non-existent. In urban areas, geographic distances and transportation challenges can still prevent students from attending therapy. Additionally, scheduling conflicts with academic and extracurricular activities make it difficult for students to attend sessions regularly. Confidentiality concerns also deter students, particularly victims of bullying, who fear their experiences will be shared with others. Schools need to build trust and ensure privacy protection to address these concerns effectively.

In summary, the lack of trained professionals, cultural stigma, and logistical issues present significant barriers to the effective implementation of psychological support programs in Thai middle schools. Overcoming these barriers requires increased resources, better training, and a shift in societal attitudes towards mental health.

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