INPLASY PROTOCOL

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None declared.

Meta analysis of the relationship between bullying behavior and depressive symptoms in children and adolescents

Ye, ZX[1].

Review question / Objective: Systematic evaluation of the relationship between bullying behavior and depressive symptoms in children and adolescents. Including being bullied, bullied, bullied - being bullied. The subjects were children and adolescents, The intervention measures are no bullying, bullying, being bullied, bullying - being bullied, The outcome measure was the incidence of depression,The selected research method is cross-sectional research.

Information sources: The computer searches PubMed, MEDLINE, EMBASE, the Cochrane Library and other databases.

INTRODUCTION

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Condition being studied: Depression refers to the continuous loss, sadness, hopelessness and other common emotional experiences in individual life. According to the World Health Organization

(who), the global population of depression has reached 264million, and the detection rate of depressive symptoms in children and adolescents in China is 24.3%. Research shows that adolescents with depressive symptoms are 3.4 times more likely to commit suicide than those without depressive symptoms. In recent years, studies at home and abroad have found that bullying and being bullied can positively predict the occurrence of depression in children and adolescents. However, due to the differences in research objects, sample sizes, research regions, and so on, there are great differences in different research results. Although the correlation between the two has been evaluated by meta-analysis around the world, the type of bullying is limited to the bullied, and no systematic evaluation of other types of behavior has been carried out.

METHODS

Participant or population: Children and adolescents aged 6-18.

Intervention: Bully, be bullied, bully - be bullied.

Comparator: No bullying.

Study designs to be included: Cross sectional study.

Eligibility criteria: The screening of depressive symptoms was conducted by the center for epidemiological investigationCenter for emotional Studies Depression Scale (CES-D).

Information sources: The computer searches PubMed, MEDLINE, EMBASE, the Cochrane Library and other databases.

Main outcome(s): The relationship between bullying and depression, the relationship between being bullied and depression, bullying being.

Quality assessment / Risk of bias analysis: The cross-sectional study used the quality evaluation criteria recommended by the agency for healthcare research and quality (AHRQ) to evaluate the bias risk.

Strategy of data synthesis: Stata14.0 was selected for statistical analysis, and the or value and 95% CI were used as the study effect indicators. use $\chi 2$ Inspection (inspection level $\alpha= 0.1$) and I2. When $p \geq 0.1$ and i2<50%, it indicates that the heterogeneity of the included literature is small, and the fixed effect model is used for meta-analysis; When p<0.1 and I2 $\geq$ 50%, it is suggested that there is non negligible heterogeneity in the included study, and the random effect model is selected for meta-analysis. Sensitivity analysis or subgroup analysis shall be carried out for the research results with large heterogeneity, and relevant literature shall be eliminated when necessary to ensure the reliability and stability of the research results. Egger test was used to evaluate publication bias.

Subgroup analysis: This study conducted subgroup analysis on gender, year, sampling method, region and bullying type.

Sensitivity analysis: Sensitivity analysis was carried out by Stata software, and the sensitivity was reflected by the change of response after deleting a document.

Country(ies) involved: China.

Keywords: Bullying; Depressive symptoms; Children; Teenagers; Meta-analysis

Contributions of each author:
Author 1 - Ye Zixiang.