

Identifying and Targeting Risk for Involvement in Bullying and Victimization

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Bullying is a relationship problem in which power and aggression are used to cause distress to a vulnerable person. To assess and address bullying and victimization, we need to understand the nature of the problem, how the problem changes with age and differs for boys and girls, the relevant risk factors (those individual or environmental indicators that may lead to bullying and victimization), and the protective factors that buffer the impact of risk. For children involved in bullying, we need to assess its extent and the associated social, emotional, psychological, educational, and physical problems. Bullying is a systemic problem; therefore, assessments of bullying need to extend beyond the individual child to encompass the family, peer group, school, and community. We recommend that assessments at each of these levels reflect the scientific research on bullying and victimization. With attention to the problems associated with bullying, we can work collectively to make schools and communities safer for children and youth.

(Can J Psychiatry 2003;48:577-582)

Information on funding and support and author affiliations appears at the end of the article.

Highlights

- Bullying, the assertion of interpersonal power through aggression, is a relationship problem that underlies many problems related to interpersonal violence across the lifespan.
- Children who bully others, and those who are victimized, are at risk for a wide range of psychosocial problems.
- Assessments and interventions to support children involved in bullying and (or) victimization should be systemic, encompassing individual children, their peer group, family, and school or community setting.

Key Words: bullying, victimization, assessment, social emotional problems

Following several severe cases wherein children died or were seriously impaired, there is growing concern about bullying in Canada. These tragedies have elicited increasing recognition that bullying problems are serious for both bullies and their victims; currently, there is a groundswell of local, provincial, and national activities to prevent and reduce the risks of bullying and victimization. Recently, the National Crime Prevention Centre provided funding to design a national strategy promoting understanding and action to reduce bullying problems among children and youth (1). This initiative has important potential to prevent bullying and other forms of relationship violence, crime, and associated mental health problems in adolescence and adulthood.

The first step in effectively addressing bullying problems is to understand their nature and assess the extent to which they affect children's daily lives. In this paper, we argue that we

need to understand the nature of bullying and victimization, how they change with age and differ for boys and girls, the relevant risk factors (that is, individual or environmental indicators that may lead to bullying and victimization), and the protective factors that buffer the impact of risk (2). With attention to the problems associated with bullying, we can work collectively to develop interventions that will make schools and communities safer for children and youth.

What is Bullying?

Bullying is a relationship problem: it is the assertion of interpersonal power through aggression (3). Bullying has been defined as negative physical or verbal actions that have hostile intent, cause distress to victims, are repeated over time, and involve a power differential between bullies and their victims (4,5). The power relations between bullies and their victims

become consolidated with repeated bullying: bullies increase in power and victims lose power. Where such an imbalance exists, children who are being bullied become increasingly powerless to defend themselves.

In our research over the past 12 years, we have examined bullying from a developmental perspective. We argue that this type of aggressive behaviour merits attention because it underlies many problems related to interpersonal violence in Canada. We contend that the lessons learned in bullying within peer relationships generalize to other developmentally significant relationships. Understanding and addressing bullying are important both for those who are victims of this form of abuse and for those who bully others. Children who bully are at increased risk for engaging in such illegal activities as delinquency and substance abuse (6). These children are also at risk for diversifying their use of power and aggression from bullying on the school playground to sexual harassment and dating aggression (7). We are also concerned that bullying may lay the foundation for adult relationship problems such as workplace harassment, marital aggression, child abuse, and elder abuse.

How Much of a Problem is Bullying in Canada?

Bullying transcends national boundaries. Data from the World Health Organization Health and Behaviour Survey of School-Aged Children (HBSC) indicate that bullying problems in Canada can be compared with those in other countries (8). The 2001–2002 HBSC is an international, collaborative, cross-sectional survey from elementary and high schools in 36 countries. Its goal is to identify youth health indicators and the factors that influence them. Canadian data were collected in the first half of 2002. The Canadian sample was designed according to the international HBSC protocol: a cluster design was used, with the school class being the basic cluster; the distribution of the students reflected the distribution of Canadians in grades 6 to 10, representing youth aged, on average, 11 to 15 years; and the sample was self-weighting. Within each province, samples were selected to represent distributions of schools by size, location, language, and religion. Of the students selected for the study, 74.2% completed the questionnaire; their demographic profile represented Canadians in the same age range. Youth in private and special needs schools, street youth, and incarcerated youth were excluded.

Data from the HBSC indicate that Canadian students in grades 6, 8, and 10 reported levels of bullying that, with respect to the 36 countries surveyed, fell in the top quartile for bullying others and the top one-third for being victimized (8). Approximately 54% of boys and 32% of girls reported that they had bullied others in the last 6 weeks. In contrast, 34% of boys and 27% of girls reported being victimized at least once

in the last 6 weeks. When frequent bullying and victimization (that is, at least twice in the last 5 days) were examined, Canadian rates fell into the mid-range for bullying (17th out of 36 countries) and the top quartile for victimization (9th out of 39 countries). The corresponding prevalence rates were as follows: 10% of boys and 7% of girls bullied others at least twice in the last 5 days, while 17% of boys and 18% of girls reported that they had been the targets of bullying at least twice in the last school week. The high proportions of Canadian students who reported bullying or being bullied confirm that this form of behaviour represents an important social problem.

Implications for addressing bullying and victimization can be drawn from these prevalence rates. First, a question's phrasing and the response time frame will influence the reported rates of bullying and victimization. When the time frame is short (for example, last 5 days vs last 6 weeks), a smaller proportion of children report being involved in bullying or victimization. Further, children who report bullying and (or) victimization most frequently and regularly will likely be at greatest risk for associated problems. Nonetheless, the figures presented above do indicate that, in each school term, a substantial number of children are involved in bullying, which highlights bullying as a significant public health issue in Canada.

Second, with such high prevalence rates, it follows that there is likely to be considerable heterogeneity among children who bully and children who are victimized. Some children who bully have chronic problems with aggression and related conduct; others are well placed in their peer groups and have advanced abilities to read social situations and dynamics within the peer group (9). The former group of children—those with chronic aggressive behaviour problems—are often identified as both bullying others and being victimized (10). These children are at the highest risk for a range of adjustment problems (11). Among victimized children, there is also considerable diversity in their individual risk factors and their embeddedness within the peer network. With respect to assessment, therefore, the factors associated with the different types of children who bully or who are victimized may vary greatly.

How Does Bullying Change With Age?

The nature of aggression and the propensity to use various forms of aggression change with development. It may be surprising to learn that children are most aggressive in the first few years of life (12). Aggression levels then generally decrease during the preschool years. As verbal and social skills develop, children are able to articulate their wants and concerns without resorting as frequently to aversive strategies. As well as emerging developmental issues, there are developmental trends in the forms of aggression that children

use as a function of their advancing skills. The proportion of children who use physical aggression declines with development; however, the proportion of children who use verbal and indirect forms of aggression increases during childhood and early adolescence (13). Trends in the forms of aggression used in bullying mirror these general developmental trends. For example, the emerging developmental issues related to pubertal development in early adolescence become important in identifying the changing nature of power and aggression. With heightened awareness of emerging sexuality and sexual identity, adolescents can readily acquire power over others by identifying vulnerabilities related to sexuality and using these as a means to bully through sexual harassment. Our research has shown that sexual harassment across the sexes increases through the early adolescent years and is linked to pubertal development and the male-female composition of the peer network (14).

Not only does the form of bullying change with development, the context of bullying also changes. Pubertal development in early adolescence is accompanied by a growing interest in romantic relationships. This new relationship context provides another venue for the use of power and aggression. We found that, among students in grades 6 to 8, both boys and girls who reported bullying others were more advanced in pubertal development, more likely to be involved in romantic relationships, and more likely to report verbal and physical aggression within romantic relationships than were children who did not report bullying (7). The sexual dimension within romantic relationships provides a base from which either male or female partners can exert power and control (15). These earliest romantic relationships establish a foundation for subsequent intimate relationships: for youth who bully their peers, patterns of aggressive behaviour and victimization are already being formed. We hypothesize that, rather than outgrowing bullying, a proportion of young people engaged in bullying during childhood will continue to use power and aggression in other significant relationships across the lifespan.

How Do Boys and Girls Differ?

Boys' aggressive behaviour problems are generally found to be more prevalent and serious than those of girls (16,17), as is their involvement in delinquency and criminal behaviour (18). Data on the prevalence of bullying reflect a similar trend. On self-report measures, the prevalence of boys reporting bullying is almost 3 times as high as that of girls. In a survey of students in grades 4 through 8, 23% of boys acknowledged bullying others more than once or twice a term, compared with 8% of girls (19). Although boys may bully at a somewhat higher rate than girls, the self-report data may not be reliable, because girls are inclined to deny that their exclusionary

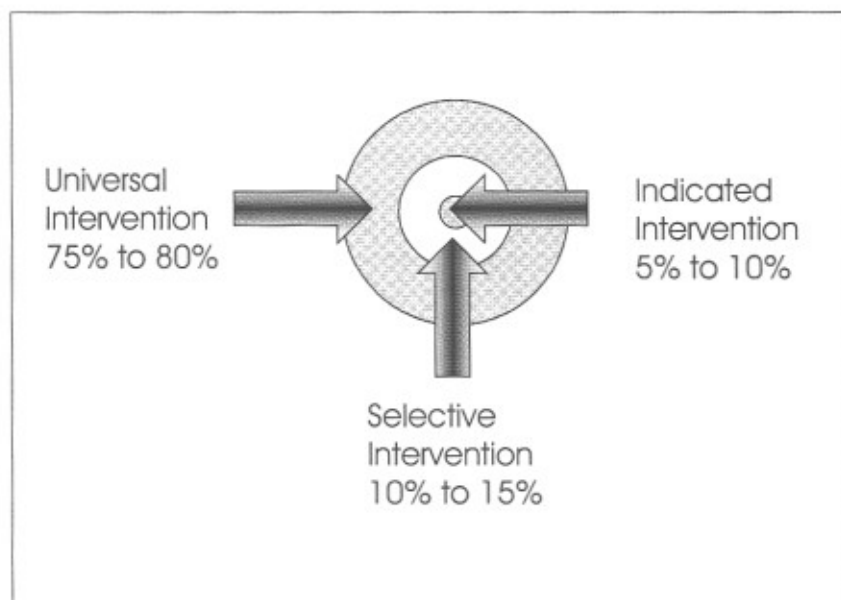
behaviours are a form of bullying (20). Our naturalistic observations of bullying on the school playground suggest that the discrepancy between boys' and girls' bullying may not be as great as self-reports imply: we observed boys bullying at a rate of 5.2 episodes hourly and girls bullying at a rate of 2.7 episodes hourly (21). A subsequent observational study yielded a similar ratio: boys were observed to bully in 199 episodes (65%), and girls were observed to bully in 107 episodes (35%) (22). As with other forms of aggressive behaviour, we may expect that, although fewer in number, girls who are highly involved in bullying, relative to their sex, are at as much risk as highly involved boys for associated adjustment problems (17,23).

In our developmental research, we have been interested in gender differences in the forms and contexts of aggression and bullying. Boys' aggressive behaviour often involves direct physical aggression, yelling, and assertions of status and dominance (24). In contrast, girls tend to use indirect aggression involving hostile acts that unfold in the context of social relationships (for example, gossiping and manipulating others to exclude a victim) (25-28). Data from the WHO survey reflect this sex difference. According to the Canadian children who reported being bullied by others, significantly more girls than boys were teased (79% vs 67%) and had rumours spread about them (72% vs 63%). These forms of victimization did not significantly decrease in prevalence with age. In contrast, significantly more boys (approximately 45%) were likely to report physical victimization, compared with girls (approximately 21%). In general, boys and girls report being victimized at relatively similar rates, suggesting that sex may not be a risk factor for victimization. This result is consistent, irrespective of the question's time frame. Social aggression is often carried out by socially central children and adolescents who have significant social control within their groups (29). With respect to assessing involvement in bullying, either as perpetrator or victim, it may therefore be important to identify not only the different types of bullying but also its power dynamics.

Assessing Who is at Risk for Bullying and Victimization and Mapping This on Intervention

In our research, we have found that not all children are equally at risk for involvement in bullying and (or) victimization. We have identified 3 groups of children: 1) those who are relatively uninvolved in bullying or victimization (approximately 75% to 80%), although they are negatively influenced when they form the peer group that watches bullying; 2) those who are occasionally involved (approximately 10% to 15%); and 3) those who are frequently involved (more than twice weekly) or have a stable involvement over time

Figure 1 Levels of intervention for children involved in bullying and victimization



(approximately 5% to 10%). Figure 1 illustrates these 3 groups of children (3). The outside circle in the figure represents those who are not involved in bullying and victimization. This is the group with the lowest risk for associated problems. The intermediate circle represents those who have transient involvement and who experience problems when they are involved. The centre of the figure represents those at the highest risk for problems associated with bullying and victimization. When children engage in bullying others, they report high levels of aggression, externalizing problems, and delinquency (Craig and others, unpublished). When children are being victimized, they report high levels of such internalizing problems as anxiety and somatization, as well as problematic relationships (30). Children consistently involved in bullying or victimization reported the most problem behaviours, and these problems were relatively stable over time.

These levels of risk guide the nature and intensity of interventions for bullying and victimization. Figure 1 illustrates the levels of intervention that map onto the levels of risk. For most peers who are uninvolved in bullying, a universal program directed at developing awareness of bullying and empowering children to intervene on behalf of victims will likely be sufficient. Children involved in bullying infrequently or in a transitory way will benefit from a selective program specifically designed to address and prevent the developmental continuity of their peer relationship problems. These children may exhibit early warning signs that indicate risk for future involvement in bullying and (or) victimization: individual and social relationship problems may signal an increased risk for becoming a bully or victim, as well as risk for experiencing

chronic and stable bullying or victimization. For example, children who bully following the transition to high school display prior high rates of sexual harassment and victimization by peers (Yuile and others, unpublished). Children with internalizing problems such as depression and anxiety are at risk for becoming victims (30). Children who become victimized also have friendships that lack affection and emotional support; such support would increase the likelihood of peers intervening to prevent bullying.

Children in the innermost circle in Figure 1 are at highest risk for involvement in bullying and victimization and experience the highest rates of associated emotional, behavioural, and social problems. These 2 groups of children require an indicated intervention focusing not only on the serious emotional, psychological, physical, educational, and social adjustment difficulties that they experience but also on their relationship problems within such significant social systems as the family, peer group, school, and community.

Drawing from Loeber (31), we have formulated 4 questions that will facilitate a risk assessment for problems associated with bullying and victimization. The first question asks how frequently bullying occurs. The more frequently children are involved in bullying, as either perpetrator or victim, the more individual, social, and psychological problems they will experience; hence, the more intense the intervention will need to be. To address frequent bullying or victimization (that occurring once weekly or more), interventions need to be immediate and monitored to ensure the bullying does not recur. For children who bully frequently, appropriate consequences that are both educational and match the severity of the aggression need to be implemented immediately and applied consistently. To evaluate the intervention's effectiveness, a deliberate and frequent monitoring strategy must be implemented and recorded for both bully(ies) and victim(s).

The second question asks over what period of time the child has been involved in bullying and (or) victimization. Students with a long history of bullying and (or) being victimized are more likely to be part of the stable group at the most risk for problems and to require the most intense interventions, as described above. The longer a child has been involved in bullying or victimization, the more likely it is that the consequences and associated problems have accumulated. The more chronic the involvement, the more likely is the need for a

diverse and systemic intervention (that is, an intervention targeting multiple behaviours in multiple contexts).

The third question asks in how many different places or relationships the bullying and (or) victimization occurs. Bullying unfolds in remarkably diverse contexts. Children report that bullying is most likely to occur at school, particularly in areas with low supervision, such as playgrounds, hallways, bathrooms, and school buses (32). Bullying also occurs in communities (for example, on the way to and from school, at the mall, and via the internet). Finally, bullying can occur at home among siblings. Not only does bullying occur in different contexts, it also occurs in different relationships, as children diversify from same-sex friendships to mixed-sex friendships to romantic relationships. Victimization also transfers across these relationships: children who are victimized in same-sex relationships are more likely to be victimized in opposite-sex relationships (33). The more pervasive bullying and (or) victimization is (that is, the more contexts in which it occurs or the more relationships in which it happens), the more likely a child is to be part of the high-risk group. Assessments identifying all the contexts in which bullying occurs will lay the foundation for interventions that target the multiple problematic social environments and relationships.

The fourth question asks how serious the aggressive behaviour and the impact associated with the bullying is. All bullying behaviour is abuse, but it may vary in intensity or in type of aggression. It is difficult to directly compare the impact of different forms of aggression, such as physical hitting and spreading a rumour; however, its level of seriousness can be assessed by the distress it causes the victim. The more serious the bullying or the more significant its impact on the victim, the more likely it is that the child belongs to the at-risk group. Again, the intervention should match the assessed seriousness, intensity, and severity of the bullying.

Research indicates that a comprehensive assessment of bullying and victimization requires questions addressing the developmental changes in types of bullying behaviour and how these changes differ for boys and girls; the frequency, severity, and chronicity of bullying and (or) victimization; and the generalization of these behaviours across multiple social environments and contexts. This type of an assessment implies the participation of multiple informants to gather information, either through observation or interviews with identified children, parents, educators, and other children who have frequent and regular opportunities to observe the identified child in daily social interactions. Practitioners' exposure to children is often limited to office visits; consequently, it is challenging to assess and intervene in multiple social contexts. Nevertheless, systemic and collaborative interventions are required to effectively address bullying. It is not sufficient to work with individual children: working with children

involved in bullying or victimization is only the first step in addressing relationship problems that have far-reaching consequences.

Conclusion

To effectively prevent or intervene in bullying, it is essential to understand bullying problems. Therefore, we need to assess their extent and their associated social, emotional, psychological, educational, and physical problems. Bullying is systemic, and assessment needs to occur at the individual, peer, family, school, and community level. We recommend that assessments at each of these levels reflect the scientific research on bullying and victimization. Research indicates that solutions need to be systemic. Bullying unfolds in a relationship characterized by a power imbalance that makes it increasingly difficult for victimized children to escape. Therefore, it is essential that adults protect victimized children and reduce the use of negative power by children who bully. Bullying changes with development and encompasses multiple social systems. Peers play a central role in supporting bullying and promoting a culture of aggression. Conversely, however, they also play an essential role—which must be supported—in intervening to stop bullying. Practitioners working collaboratively with other significant adults and children in homes, schools, and communities can reduce bullying and victimization in our society.

Funding and Support

Our program of research has been supported by grants from the Ontario Mental Health Foundation, National Health and Research Program, the Canadian Institute of Health Research, and the Social Sciences and Humanities Research Council.

Acknowledgements

We extend our appreciation to the children and youth who participated in the research, to their parents and teachers, and to the undergraduate and graduate students who participated in the research projects.

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Manuscript received and accepted July 2003.

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Résumé : Déterminer et cibler le risque de participation à l'intimidation et à la victimisation

L'intimidation est un problème relationnel dans lequel le pouvoir et l'agressivité sont utilisés pour causer la détresse chez une personne vulnérable. Pour évaluer et traiter l'intimidation et la victimisation, il faut comprendre la nature du problème, comment le problème change avec l'âge et diffère entre garçons et filles, les facteurs de risque pertinents (les indicateurs individuels ou environnementaux qui peuvent mener à l'intimidation et à la victimisation), et les facteurs de protection qui réduisent l'effet du risque. Pour les enfants qui s'adonnent à l'intimidation, il faut en évaluer la portée ainsi que les problèmes sociaux, affectifs, psychologiques, éducationnels et physiques qui y sont associés. L'intimidation est un problème systémique; pour l'évaluer, il faut donc aller au-delà de la personne de l'enfant et englober la famille, le groupe des pairs, l'école et la communauté. Nous recommandons que l'évaluation à chacun de ces niveaux reflète la recherche scientifique sur l'intimidation et la victimisation. En portant attention aux problèmes associés à l'intimidation, nous pouvons travailler collectivement à raffermir la sécurité de nos écoles et de nos communautés pour les enfants et les jeunes.