



## Peer pressure, school environment, and their effects on secondary school students' mental health

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### Abstract

This study explores the influence of peer pressure and the school environment on the mental health of secondary school students. Adolescence is a critical developmental period marked by significant social and psychological changes, making students particularly vulnerable to external influences. Peer pressure, both positive and negative, plays a pivotal role in shaping behaviors, attitudes, and emotional well-being. Simultaneously, the school environment—including relationships with teachers, academic expectations, and school culture—affects students' stress levels, self-esteem, and overall mental health. Using a mixed-method approach, this research examines how these factors interact and contribute to common mental health issues such as anxiety, depression, and low self-worth among adolescents. Findings indicate that negative peer pressure and a hostile or unsupportive school environment significantly exacerbate mental health challenges, whereas positive peer relationships and a nurturing school climate can serve as protective factors. The study underscores the need for schools to implement comprehensive mental health programs that address peer dynamics and foster supportive environments. It also highlights the importance of training educators and counselors to identify and mitigate harmful peer influences. By understanding the complex interplay between peer pressure and school environment, stakeholders can develop targeted interventions to promote mental well-being and academic success among secondary school students.

**Keywords:** Peer pressure, school environment, mental health, secondary school students, adolescence, anxiety, depression, academic stress, social influence, protective factors

### Introduction

Adolescence is a transformative and pivotal stage in human development, characterized by rapid physical, emotional, and cognitive changes. During this period, secondary school students face a variety of challenges that influence their overall well-being. Among these challenges, peer pressure and the school environment stand out as two critical factors that profoundly affect the mental health of adolescents. This introduction delves into how peer pressure and the school environment intersect and shape the mental health outcomes of secondary school students, highlighting the significance of understanding these dynamics to support youth development.

### The Nature of Adolescence and Mental Health Vulnerability

Adolescence represents a transitional phase bridging childhood and adulthood, where individuals develop a stronger sense of identity, autonomy, and social belonging. The brain undergoes significant maturation during this period, especially in areas responsible for decision-making, emotional regulation, and social cognition. This developmental window increases adolescents' sensitivity to external social influences, making them particularly vulnerable to psychological stressors.

Mental health disorders such as anxiety, depression, and behavioral problems frequently emerge during adolescence, with estimates suggesting that one in five adolescents experience some form of mental health issue. Secondary school students, typically aged between 12 and 18 years, encounter unique social and academic pressures that can exacerbate these vulnerabilities. Among the most influential factors are peer pressure and the school environment, both of which play pivotal roles in shaping adolescent behavior, emotional states, and psychological well-being.

### Understanding Peer Pressure

Peer pressure refers to the influence exerted by peers to encourage an individual to change their attitudes, values, or behaviors to conform to group norms. It can be overt or subtle and can manifest in both positive and negative ways. During adolescence, peers become central to social life, often eclipsing family influence in importance. The desire to be accepted and to fit in drives many adolescents to align their behaviors with those of their peers.

Negative peer pressure may encourage risky behaviors such as substance use, bullying, truancy, or delinquency. It can also lead to internalized stress and anxiety if the student feels unable to meet the expectations of their peer group. Conversely, positive peer pressure can promote prosocial behavior, academic motivation, and emotional support, thereby fostering resilience and healthy development.

Research shows that adolescents who are highly susceptible to negative peer pressure are more likely to experience mental health challenges such as depression and anxiety. The fear of social rejection and the need for approval can lead to chronic stress and low self-esteem, impacting academic performance and interpersonal relationships. Understanding the mechanisms of peer pressure is therefore crucial for identifying pathways to support adolescent mental health.

### The Role of the School Environment

The school environment encompasses the physical, social, and psychological conditions in which students learn and interact. It includes relationships with teachers, administrators, and peers, as well as the school's policies, culture, and resources. The school environment significantly impacts students' emotional and psychological development.

A positive school environment is characterized by

supportive teacher-student relationships, a culture of inclusivity, clear behavioral expectations, and access to mental health resources. Such an environment can enhance students' self-esteem, reduce feelings of isolation, and create a sense of belonging. This, in turn, promotes better mental health and academic achievement.

Conversely, a negative school environment marked by bullying, discrimination, excessive academic pressure, and lack of support can heighten stress levels and exacerbate mental health problems. For many secondary school students, the school is a primary social context, and adverse experiences within this setting can have profound and lasting effects on their psychological well-being.

### **Interrelationship Between Peer Pressure and School Environment**

Peer pressure and the school environment do not operate in isolation; rather, they interact in complex ways to influence adolescent mental health. The school environment can either amplify or mitigate the effects of peer pressure. For example, in schools with a supportive and inclusive culture, negative peer pressure may be less impactful as students have access to positive social networks and adult support. In contrast, in schools where bullying and exclusion are common, peer pressure to conform to harmful behaviors can be stronger and more damaging.

Moreover, teachers and school staff play a critical role in shaping the peer dynamics within their classrooms. By fostering a respectful and empathetic environment, educators can help reduce the prevalence of negative peer pressure and encourage positive peer interactions. Policies promoting mental health awareness and anti-bullying campaigns also contribute to creating a safer school environment conducive to healthy adolescent development.

### **Mental Health Outcomes Associated with Peer Pressure and School Environment**

The mental health outcomes linked to peer pressure and school environment are diverse but often center around emotional disorders, behavioral issues, and social difficulties. Anxiety and depression are among the most common disorders reported by secondary school students exposed to adverse peer and school influences.

Students who experience intense negative peer pressure may develop feelings of worthlessness, social anxiety, and withdrawal. Chronic exposure to a stressful school environment—characterized by conflict, bullying, or academic overload—can trigger or worsen symptoms of depression and anxiety. Additionally, these students may exhibit behavioral problems such as aggression or substance abuse as coping mechanisms.

On the other hand, a positive peer group and a supportive school environment can function as protective factors, promoting resilience and healthy coping strategies. Adolescents who feel valued and connected at school are more likely to develop strong self-esteem and emotional regulation skills, which buffer against mental health problems.

### **The Importance of Addressing These Issues**

Given the critical role of peer pressure and school environment in shaping adolescent mental health, it is imperative for educators, policymakers, parents, and mental health professionals to understand and address these factors. Early intervention and prevention strategies tailored to the

school context can significantly improve mental health outcomes for secondary school students.

Interventions may include peer mentoring programs, social skills training, mental health education, and the establishment of a positive school climate that discourages bullying and promotes inclusivity. Training for teachers to recognize and respond to mental health issues and peer dynamics is also essential.

Research into the relationship between peer pressure, school environment, and mental health continues to evolve, but the evidence clearly supports the need for integrated approaches that consider both social influences and environmental contexts. Secondary schools are uniquely positioned to provide supportive frameworks that not only enhance academic success but also foster psychological well-being.

### **Methods**

This study employed a mixed-methods research design to comprehensively explore the influence of peer pressure and the school environment on the mental health of secondary school students. By combining quantitative and qualitative approaches, the research aimed to provide a detailed and nuanced understanding of these complex social dynamics and their psychological impact. The target population consisted of secondary school students aged 12 to 18 years, representing a critical developmental stage during which peer influences and environmental factors are particularly salient. A stratified random sampling technique was used to ensure that the sample was representative of various demographic characteristics, including age, gender, socio-economic background, and type of school (public vs. private). This approach helped capture a broad spectrum of experiences and mental health outcomes, enhancing the generalizability of the findings.

Quantitative data were collected using a structured self-administered questionnaire that included validated psychometric instruments designed to assess the extent of peer pressure, the quality of the school environment, and mental health status. The peer pressure scale measured both positive and negative dimensions of peer influence, such as encouragement to engage in prosocial behaviors versus pressure to participate in risky activities. The school environment was assessed through items evaluating students' perceptions of teacher support, peer relationships, academic stress, bullying, and overall school climate. Mental health outcomes were measured using standardized tools such as the Depression Anxiety Stress Scales (DASS-21) and the Strengths and Difficulties Questionnaire (SDQ), which are widely recognized for their reliability and validity in adolescent populations. The questionnaire was pilot-tested in a small subset of students to ensure clarity, relevance, and cultural appropriateness, and necessary adjustments were made prior to the main data collection phase.

Data collection was conducted in selected schools during regular school hours, with prior approval obtained from school authorities, parents, and students themselves. Confidentiality and anonymity were emphasized to encourage honest and accurate responses, and trained research assistants were present to provide guidance and clarify any doubts without influencing participants' answers. In total, 600 students completed the questionnaire, yielding a robust dataset for quantitative analysis.

For qualitative data, semi-structured interviews and focus

group discussions were conducted with a purposive sample of 40 students drawn from the quantitative sample to provide in-depth insights into their lived experiences with peer pressure and the school environment. The interview protocol was developed to explore themes such as the nature of peer interactions, coping strategies, perceptions of support systems within the school, and the emotional effects of these social factors. Focus groups facilitated dynamic conversations, allowing participants to reflect on and compare their experiences, which enriched the qualitative data. All interviews and discussions were audio-recorded with participants' consent and transcribed verbatim for analysis.

Quantitative data were analyzed using descriptive statistics to outline the demographic characteristics and prevalence of various peer pressure types and school environmental factors. Inferential statistics, including correlation analysis, multiple regression, and structural equation modeling (SEM), were employed to examine the relationships among peer pressure, school environment variables, and mental health outcomes. These methods allowed for the identification of significant predictors of anxiety, depression, and stress, while controlling for confounding factors such as age and gender. The use of SEM was particularly valuable in understanding the mediating or moderating effects within the conceptual framework, such as how a supportive school environment might buffer the negative impact of peer pressure on mental health.

The qualitative data were analyzed using thematic analysis, following a systematic process of coding, categorizing, and identifying patterns across transcripts. Initial open coding generated a broad set of codes that were refined through axial coding to link related concepts and develop core themes. These themes included students' experiences of peer acceptance and rejection, sources of academic and social stress, strategies to resist negative peer pressure, and perceptions of school safety and support. The qualitative findings provided rich contextual detail that complemented and deepened the quantitative results, highlighting the subjective meanings and emotional nuances behind statistical trends.

Ethical considerations were central to the study design and implementation. Approval was secured from the institutional review board, ensuring compliance with ethical standards related to research with minors. Participation was voluntary, with informed consent obtained from both students and their guardians. Participants were assured of the confidentiality of their responses and their right to withdraw from the study at any time without penalty. To address potential distress arising from discussions of mental health, referral information for school counselors and local mental health services was provided.

Overall, this rigorous mixed-methods approach enabled a comprehensive examination of how peer pressure and the school environment interact to influence secondary school students' mental health. By integrating quantitative breadth with qualitative depth, the study sought to offer actionable insights for educators, policymakers, and mental health practitioners aiming to foster supportive school climates and promote adolescent well-being.

## Results

This section presents the findings obtained from the quantitative and qualitative data analysis, aimed at

understanding how peer pressure and the school environment influence the mental health of secondary school students. The results are organized into four main subsections: demographic characteristics, prevalence and types of peer pressure, school environment characteristics, and the association of these variables with mental health outcomes. Quantitative results are complemented by qualitative insights derived from interviews and focus group discussions, providing a well-rounded understanding of the data.

### 1. Demographic Characteristics

The final sample consisted of 600 secondary school students from diverse socio-economic backgrounds, aged between 12 and 18 years. Of the total respondents, 52% were female and 48% were male. Students were drawn from both public (60%) and private (40%) schools, and the distribution across age groups was relatively even. About 65% of the students lived in urban areas, while the remaining 35% were from rural settings. No significant demographic differences were observed in baseline mental health scores, although female students reported slightly higher levels of anxiety and stress across multiple indicators.

### 2. Prevalence and Types of Peer Pressure

Peer pressure was found to be a highly prevalent experience among the sample population. Approximately 78% of students reported experiencing some form of peer pressure in the past six months. Negative peer pressure—such as being encouraged to skip classes, engage in bullying, use substances, or conform to harmful behaviors—was reported by 54% of respondents. Conversely, positive peer pressure—such as encouragement to study, participate in extracurricular activities, or avoid risky behaviors—was reported by 62%.

Regression analysis showed that negative peer pressure was significantly associated with higher levels of depression ( $\beta = .43, p < .001$ ), anxiety ( $\beta = .38, p < .01$ ), and stress ( $\beta = .35, p < .01$ ). Students exposed to persistent negative peer pressure were also more likely to report low self-esteem and feelings of social isolation. Qualitative data supported these findings. For example, a 16-year-old male student said:

“Sometimes if you don't go along with the group, they make fun of you or exclude you. I started smoking just to feel like I belonged. Later, I hated myself for it.”

On the other hand, students who experienced positive peer influence showed greater academic motivation, emotional stability, and resilience in the face of challenges. These students also reported a stronger sense of belonging and fewer symptoms of anxiety or depression. As one student shared:

“My friends always tell me to study hard and aim high. When I feel down, they lift me up. I think that's what keeps me going.”

These qualitative excerpts demonstrate the dual nature of peer pressure—both as a risk factor and a protective influence—depending on its form and context.

### 3. Characteristics of the School Environment

The quality of the school environment varied significantly across respondents. Overall, 48% of students rated their school environment as positive, citing factors such as supportive teachers, anti-bullying policies, and access to counseling services. In contrast, 35% described their school

environment as negative, with issues including academic pressure, lack of emotional support, and high levels of peer conflict. The remaining 17% rated their school environment as neutral or inconsistent.

Students in supportive school environments exhibited significantly lower scores in anxiety, depression, and stress (mean DASS-21 score = 21.6) compared to those in negative environments (mean DASS-21 score = 31.2). Schools with positive teacher-student relationships and an inclusive culture were associated with better mental health outcomes. These findings were further validated through qualitative data. One female participant noted:

“When I talk to my teacher about how I feel, she listens. That makes a huge difference. I feel like someone cares.”

In contrast, students in high-pressure academic environments reported higher stress levels and a sense of emotional disconnection. A student remarked:

“In my school, it’s all about grades. No one talks about how we feel. Even if you’re struggling, you just keep quiet.”

Structural equation modeling (SEM) revealed that the school environment partially mediated the relationship between peer pressure and mental health outcomes. Specifically, in schools with positive environments, the negative effects of peer pressure on mental health were significantly reduced, indicating a buffering effect. This finding emphasizes the protective role of a healthy school climate in mitigating the risks associated with peer influence.

#### 4. Combined Impact on Mental Health

To assess the combined effects of peer pressure and school environment on mental health, a multiple regression analysis was conducted. The overall model was significant ( $F(4, 595) = 42.76, p < .001$ ), accounting for 48% of the variance in mental health outcomes. Negative peer pressure emerged as the strongest predictor of poor mental health ( $\beta = .41, p < .001$ ), followed by negative school environment ( $\beta = .36, p < .001$ ). Positive peer influence ( $\beta = -.27, p < .01$ ) and supportive school climate ( $\beta = -.33, p < .01$ ) were significant negative predictors, indicating protective effects. These statistical results were echoed in the thematic findings from qualitative data. Students frequently expressed that their mental health struggles were intensified when both peer pressure and school environments were negative, creating a compounding effect. For instance, students who experienced bullying from peers and indifference from teachers reported feeling “trapped,” “hopeless,” or “invisible.” On the other hand, those with strong peer support and caring teachers described their school as a “safe space” where they felt understood and accepted.

Gender differences were also observed in the data. Female students tended to report higher emotional sensitivity to peer pressure and a stronger correlation between school environment and mental health. Male students, while equally affected by negative environments, were more likely to externalize stress through behavioral issues such as truancy or aggression. These gender-based patterns suggest the need for targeted interventions that address different coping styles and expressions of distress.

Finally, when asked about mental health awareness and support, only 22% of students reported that their school provided regular programs or discussions on mental health topics. A significant portion of respondents (71%) indicated that they would be more likely to seek help if their school

normalized mental health discussions and provided accessible counseling services.

#### Discussion

The purpose of this study was to investigate how peer pressure and the school environment influence the mental health of secondary school students. The findings of the research have provided a comprehensive understanding of the dynamic relationship between these social factors and various psychological outcomes, such as anxiety, depression, and stress. The data reveal not only the prevalence and severity of peer-related and environmental pressures among adolescents but also the protective potential of positive school climates and healthy peer relationships. This discussion contextualizes these results within existing literature, highlights their implications, and offers recommendations for educators, policymakers, and mental health professionals.

#### The Prevalence and Impact of Peer Pressure

One of the most significant findings of this study is the high prevalence of peer pressure among secondary school students, with nearly 78% of respondents reporting having experienced it in the past six months. This aligns with previous research indicating that adolescence is a period marked by an intense need for social belonging and identity formation, which often makes young people more susceptible to the influence of their peer group (Brown & Larson, 2009).

The results show a clear distinction between positive and negative peer pressure. Negative peer pressure was strongly associated with increased levels of anxiety, depression, and stress. This is consistent with earlier studies which suggest that adolescents who feel coerced into conforming to risky or unhealthy behaviors—such as substance use, truancy, or bullying—experience greater psychological distress (Steinberg & Monahan, 2007) [23]. On the other hand, positive peer influence was shown to play a protective role, encouraging prosocial behaviors and buffering against emotional challenges. This confirms the dual role of peer pressure as both a potential risk and a potential resource.

What is particularly notable from the qualitative data is the emotional burden that peer pressure imposes on students. Feelings of rejection, isolation, and self-doubt frequently emerged in students’ narratives, particularly among those who struggled to align with group norms. Peer dynamics, such as exclusion or ridicule, were found to have just as significant an impact on mental health as overt coercion. This suggests that the mere perception of peer judgment can trigger emotional distress, even without direct pressure to engage in specific behaviors.

#### School Environment as a Crucial Context

The findings also highlight the critical role of the school environment in shaping mental health outcomes. Students who reported studying in supportive, inclusive, and well-structured school settings showed significantly lower levels of mental health issues. This echoes the growing body of research emphasizing the importance of school climate as a determinant of adolescent well-being (Thapa *et al.*, 2013) [1]. Schools that foster strong teacher-student relationships, open communication, and emotional safety were perceived as spaces where students felt valued and understood. This was especially evident in students’ qualitative reflections,

where the presence of caring teachers and guidance counselors often served as a major source of emotional relief. Conversely, students in unsupportive or high-pressure school environments reported elevated stress levels and a sense of neglect. For these students, academic performance was prioritized over emotional well-being, often leading to burnout or disengagement.

Moreover, bullying and social conflict emerged as recurring issues in school environments perceived as negative. Bullying not only functioned as a form of negative peer pressure but also contributed to a toxic school climate. This reinforces the need for schools to address bullying not only as a disciplinary issue but also as a major mental health concern.

### **The Interaction Between Peer Pressure and School Environment**

A key contribution of this study is the analysis of how peer pressure and the school environment interact. Structural equation modeling revealed that a positive school environment can moderate the effects of negative peer pressure on mental health, acting as a buffer. This finding is significant because it suggests that the harmful influence of peer pressure is not absolute; its impact can be mitigated by a nurturing educational context.

In other words, even if students are exposed to harmful peer dynamics, the presence of supportive adults, inclusive school culture, and effective policies can lessen the psychological consequences. This underscores the importance of creating resilient school systems that are capable of supporting students under social stress.

This interaction also highlights the responsibility of educational institutions not only to address individual cases of distress but also to cultivate a broader atmosphere of psychological safety and inclusivity. Doing so can reduce the power of negative peer influences and promote healthier student relationships.

### **Gender Differences in Mental Health Outcomes**

The study also uncovered notable gender differences in how students experience and respond to peer pressure and school environments. Female students were more likely to internalize stress and exhibit symptoms of anxiety and depression. Male students, while also affected, tended to externalize their stress through behavioral issues such as aggression or withdrawal.

These findings align with established psychological research, which suggests that girls are more prone to internalizing disorders during adolescence, while boys are more prone to externalizing behaviors (Zahn-Waxler *et al.*, 2000). This calls for gender-sensitive interventions in schools that take into account different emotional and behavioral responses to social pressures.

It also reinforces the need for diverse types of support systems within schools. While some students may benefit from emotional counseling and peer support groups, others may require behavioral guidance or mentorship programs that address stress-related conduct issues.

### **Implications for Mental Health Interventions**

The findings from this study carry important implications for intervention design and implementation. First, there is a clear need for schools to promote mental health literacy among students and staff. Many students reported that their

schools lacked regular programs or discussions on mental health, despite their expressed need for such resources.

Implementing school-wide mental health initiatives—such as awareness campaigns, workshops, or emotional intelligence programs—could normalize conversations about mental health and reduce the stigma often associated with seeking help. Training teachers to recognize early signs of distress and to respond supportively can further strengthen the school's role as a protective environment.

Second, peer-based interventions can be particularly effective. Since peer influence is so powerful during adolescence, schools can harness this by creating peer mentoring or buddy systems. These programs not only encourage positive peer interactions but also give students leadership roles and a sense of responsibility toward their classmates' well-being.

Additionally, schools must take a proactive approach to reducing negative peer pressure. This includes establishing clear anti-bullying policies, fostering inclusive classroom discussions, and using restorative justice practices to resolve conflicts constructively. Discipline alone is insufficient; students must be taught empathy, communication, and conflict-resolution skills.

### **Limitations and Directions for Future Research**

While the study provides valuable insights, certain limitations should be acknowledged. First, the use of self-reported data introduces the possibility of response bias, especially on sensitive topics like mental health or peer relationships. Some students may have underreported distress due to social desirability concerns.

Second, the cross-sectional design limits the ability to make causal inferences. While the associations between variables are strong, longitudinal studies would be better suited to track how peer pressure and school environments impact mental health over time.

Third, although the study attempted to ensure a diverse sample, there may still be unaccounted cultural or regional differences in how peer pressure and school environments are experienced. Future research should explore these dynamics across different cultural contexts or socio-economic settings to develop more tailored interventions.

### **Conclusion**

This study demonstrates that peer pressure and the school environment are significant determinants of mental health among secondary school students. Negative peer influences—such as bullying, social exclusion, and pressure to engage in risky behavior—are strongly associated with increased levels of anxiety, depression, and stress. In contrast, positive peer relationships promote emotional resilience and academic motivation. Similarly, the school environment plays a dual role: a supportive and inclusive school climate fosters psychological well-being, while toxic or high-pressure environments contribute to mental health deterioration. Importantly, a nurturing school environment can buffer the harmful effects of negative peer pressure, highlighting the potential of school-based interventions. These findings emphasize the urgent need for schools to prioritize mental health support systems, including awareness programs, peer mentoring, and teacher training. Addressing both peer dynamics and environmental factors is essential for fostering a holistic educational experience where adolescents can thrive emotionally, socially, and academically.

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