Talk 4
Bullying Victimisation and Risk of Psychotic Phenomena
Matthew Broome¹, Gennaro Catone²,³, Guisi Moffa⁴,⁵, Jack Kuipers⁶
Elizabeth Kuipers⁷, Daniel Freeman⁸, Steven Marwaha⁹, Belinda Lennox⁸, Paul Bebbington⁴

¹Institute for Mental Health, School of Psychology, College of Life and Environmental Sciences, University of Birmingham, Birmingham, UK
²Università della Campania Luigi Vanvitelli, Naples, Italy.
³Faculty of Educational Sciences, Suor Orsola Benincasa University, Naples, Italy.
⁴Division of Psychiatry, University College London, London, UK.
⁵Institute for Clinical Epidemiology and Biostatistics, University Hospital Basel and University of Basel, Basel, Switzerland.
⁶D-BSSE, ETH Zurich, Basel, Switzerland.
⁷Department of Psychology, Institute of Psychiatry, Psychology and Neuroscience, King’s College London, London, UK.
⁸Department of Psychiatry, University of Oxford, Oxford, UK.
⁹Unit of Mental Health and Wellbeing, Warwick Medical School, University of Warwick, Coventry, UK.

Introduction: Being bullied is an aversive experience with short- and long-term consequences. We used the 2000 and the 2007 British Adult Psychiatric Morbidity Surveys to test the hypothesis that bullying is associated with individual psychotic phenomena and with psychosis.

Methods: Respondents were presented with a card listing stressful events to identify experiences of bullying over the entire lifespan. We assessed associations with the dependent variables persecutory ideation, auditory and visual hallucinations, and diagnosis of probable psychosis. We used directed acyclic graphs (DAGs) to analyse data to assess putative mediators of the association between bullying victimization and psychosis. We compared results using DAGs and the Karlson-Holm-Breen (KHB) logistic regression commands in STATA.

Results: We used data for 8580 respondents from 2000 and 7403 from 2007. Bullying was associated with presence of persecutory ideation and hallucinations. Bullying was associated with a diagnosis of probable psychosis. If reported at baseline, bullying predicted emergence and maintenance of persecutory ideation and hallucinations during 18 months of follow-up in the 2000 survey. DAG analysis revealed a richer structure of relationships than could be inferred using the KHB commands. Bullying had direct effects on worry, persecutory ideation, mood instability, and drug use. Bullying led to hallucinations indirectly, via persecutory ideation and depression.
Conclusion: Bullying victimisation increases the risk of individual psychotic symptoms and of a diagnosis of probable psychosis. DAGs indicate the complex interactions seen in psychiatry, including the mechanisms underpinning psychiatric symptoms. It may consequently be used to optimize the choice of intervention targets.