



Moderating role of conflict resolution strategies in the links between peer victimization and psychological adjustment among youth

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ABSTRACT

Introduction: Victims of peer victimization are likely to develop psychological adjustment difficulties. The primary goal of the present study was to examine the moderating effects of conflict resolution strategies (solution-orientation, control, nonconfrontation) on the relations between peer victimization and psychological problems (depressive symptoms, loneliness) in Chinese early adolescents using a cross-sectional design.

Methods: Participants included 569 children (298 boys) in fifth grade ($M = 11.75$ years, $SD = 0.40$) in urban China. Peer victimization, conflict resolution strategies, depressive symptoms, and loneliness were measured through self-report questionnaires.

Results: Peer victimization was positively related to depressive symptoms and loneliness. The relations between peer victimization and psychological problems were moderated by adolescents' solution-oriented and nonconfrontational strategies. Specifically, the relations between peer victimization and psychological problems, including depressive symptoms and loneliness, were attenuated by solution-orientation strategy. In addition, victimized youth who used nonconfrontation strategy were more prone to suffer from loneliness. Gender was also found to moderate these associations.

Conclusions: The findings suggest that solution-oriented conflict resolution strategy may protect victimized adolescents from developing loneliness and depressive symptoms and nonconfrontation conflict strategy may exacerbate feelings of loneliness of victimized adolescents. Intervention programs should consider helping victimized youth use more solution-oriented strategies and less nonconfrontational strategies.

1. Introduction

Peer victimization refers to the repeated exposure to intentional negative actions in relationships involving an imbalance of power

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between the victim and the bully (Olweus, 1991, 1994). Research on peer victimization has traditionally focused on physical aggression (i.e., hitting or kicking), verbal aggression (i.e., name calling), and relational aggression (i.e., group exclusion) (Crick, Kasas, & Ku, 1999; Olweus, 1994). With the rapid development of Internet, another type of peer victimization, cyberbullying, has received increased attention in recent years (Smith, 2012). The literature indicates that offline and online types of peer victimization differ in social processes and implications (e.g., Lambe, Della Cioppa, Hong, & Craig, 2019). In the present study, we focused on offline peer victimization. Results from research programs over the past decades have shown that many adolescents have experienced this type of peer victimization (Dill, Vernberg, Fonagy, Twemlow, & Gamm, 2004; Liu, Bullock, & Coplan, 2015; Liu et al., 2017). Moreover, it has been found that exposure to offline peer victimization is related to both immediate and delayed internalizing problems, such as depressive symptoms, loneliness (Casper & Card, 2017; Graham, 2016; Stapinski, Araya, Heron, Montgomery, & Stallard, 2015).

Given the adverse socio-emotional outcomes of peer victimization, an important question is what factors may affect the experiences of victimized youth (Cooley & Fite, 2016; Desjardins & Leadbeater, 2011; Zimmer-Gembeck, Trevaskis, Nesdale, & Downey, 2014). In the present study, we were interested in the role of adolescents' conflict resolution strategies in shaping the relations between peer victimization and psychological adjustment.

1.1. Conflict resolution strategies and psychological adjustment

According to Deutsch (1973), people may respond to conflict in a constructive or destructive manner. Constructive resolution typically involves problem-solving behaviors, such as learning about the other's needs and proactively thinking about how to deal with the conflict (Thomas, 1976; Wheeler, Updegraff, & Thayer, 2010). In contrast, destructive responses often include manipulation or avoidant patterns of behaviors (Olson & Braithwaite, 2004), which may exacerbate conflicts and damage relationship quality (Overall & McNulty, 2017; Thayer, Updegraff, & Delgado, 2008). To understand the constructive and destructive processes of conflict resolution, it is necessary to explore strategies that individuals use in conflict situations. Conflict resolution strategy is generally defined as the way in which an individual deals with interpersonal conflict (Kim-Jo, Benet-Martínez, & Ozer, 2010). Putnam and Wilson (1982) identified three main conflict resolution strategies: solution-orientation, control, and nonconfrontation, which have been used in most conflict studies (Taylor, 2010; Thayer et al., 2008; Wheeler et al., 2010). Among the strategies, solution-orientation is regarded as most constructive (Thayer et al., 2008; Wheeler et al., 2010). It includes behaviors that aim to find a solution to resolve the conflict such as direct communication about disagreements (Putnam & Wilson, 1982). Researchers have found that solution-oriented strategy is likely to have significant and positive effects on individuals' mental health (Ghorbanshiroudi, Khalatbari, Maddahi, Sadodin, & Keikhayfarzaneh, 2011; Marceau et al., 2015). Control strategy also involves direct communication about the disagreement but is different from solution-orientation. Individuals using control strategy tend to argue persistently for their own positions and attempt to take control of the interaction (Putnam & Wilson, 1982). There is evidence that control is associated with low levels of relationship satisfaction, especially for females (Wheeler et al., 2010). Finally, nonconfrontation indicates indirect strategies to address a conflict, such as withdrawing from a disagreement and hiding angry feelings (Putnam & Wilson, 1982). Nonconfrontation is considered as a maladaptive conflict resolution strategy, related to low leadership status, social incompetence, job dissatisfaction, and poor marriage quality (Jodoin & Ayers, 2017; Madlock, 2013; Wheeler et al., 2010).

There is a lack of research on conflict resolution strategies in Chinese context. Whereas some strategies, such as solution-oriented strategies, may serve similarly constructive functions across contexts, others, such as nonconfrontation, may be regarded differently in Chinese and Western societies and thus related to different psychological outcomes in Chinese and Western adolescents. It has been argued that the functional meaning of nonconfrontation may be affected by cultural context (Boroş, Meslec, Curşeu, & Emons, 2010; Gao, Bian, Liu, He, & Oei, 2017). In Western individualistic societies, for example, nonconfrontation is viewed as negative and maladaptive because it is incompatible with assertiveness, autonomy, and competitiveness that are highly valued (Thayer et al., 2008). However, this strategy may be positively perceived and encouraged because it is often regarded as an appropriate and adaptive form of conflict management for keeping interpersonal relationships and group harmony in collectivistic culture (Lun & Miu, 2012).

1.2. Conflict resolution strategies as moderating factors

We were interested in whether conflict resolution strategies moderated the relations between peer victimization and internalizing problems. Whereas adolescents who experience peer victimization tend to suffer from psychological difficulties, the difficulties may be reduced if they employ a solution-oriented conflict resolution strategy. It is conceivable that adolescents using solution-oriented strategies are likely to deal with conflicts effectively, which may improve their peer relationships (Gao et al., 2017; Thayer et al., 2008). For example, adolescents who are solution-oriented in conflict situations, tend to demonstrate high concern for others, which can lead to increased intimacy in peer relationships (Thayer et al., 2008), and which in turn, benefit their psychological adjustment. Thus, solution resolution strategies may help victimized adolescents create and maintain a relatively benign environment for their psychological well-being (Ghorbanshiroudi et al., 2011; Marroquín & Nolen-Hoeksema, 2015). Nevertheless, it is the case that peer victimization is a form of interpersonal conflict involving power imbalance between the bully and the victim (Olweus, 1994). It is often difficult for victims to solve the problems with their bullies. Therefore, some victims may use control/direct confrontation or nonconfrontation/withdrawal strategies. However, research has shown that the use of these strategies may intensify conflicts and reinforce behaviors of bullies, which may lead to further bullying and increased psychological difficulties (Garaigordobil, 2017). Taken together, it seems reasonable to argue that solution-oriented resolution strategy may be a protective factor that serve to reduce maladaptive outcomes of peer victimization. In contrast, control and nonconfrontation may serve as exacerbating factors that

reinforce victimized youth's psychological adjustment difficulties.

1.3. Peer victimization, conflict resolution, and gender

There are mixed findings concerning gender differences in relations between peer victimization and psychological adjustment. Whereas one study showed victimization was associated more strongly with loneliness in boys than in girls (Povedano, Cava, Monreal, Varela, & Musitu, 2015), other studies did not find gender differences in the relations (Catterson & Hunter, 2010; Liu et al., 2017). With regard to conflict resolution strategies, Wheeler et al. (2010) found that males tend to use nonconfrontational strategies when facing conflicts whereas females tend to use solution-oriented strategies. Thus, we were also interested in exploring gender differences in this study.

1.4. The present study

The primary aim of the present study was to explore the moderating role of adolescents' conflict coping strategies in the relations between peer victimization and psychological adjustment among Chinese youth. Consistent with the previous research (e.g., Kingsbury, Liu, Coplan, Chen, & Li, 2016; Liu et al., 2019), we focused loneliness and depressive symptoms as indicators of psychological adjustment, which are the most commonly studied outcomes in areas of peer relationships and conflict resolution during early adolescence. Drawing upon the theoretical and empirical literature (e.g., Liu et al., 2019), we hypothesized that conflict resolution strategies would moderate the relations between peer victimization and psychological problems. More specifically, the relations would be stronger among adolescents who reported higher levels of control and nonconfrontation, and weaker among adolescents who reported higher levels of solution-orientation.

A sample of children in early adolescence was selected in the present study. We focused on early adolescence for two reasons. First, early adolescence is a developmental period in which young people may experience relatively extensive and intensive peer victimization, perhaps because aggressive adolescents tend to receive social support from their peers (Bukowski, Sippola, & Newcomb, 2000; Volk, Camilleri, Dane, & Marini, 2012). Second, although conflict resolution strategies are important for psychological adjustment of victimized youth, little research has been conducted on this issue during early adolescence (Taylor, 2010; Thayer et al., 2008; Wheeler et al., 2010). We believe that our study would provide valuable information about the role of resolution strategies in adjustment of victimized adolescents.

2. Method

2.1. Participants

The sample consisted of 569 Grade 5 students (298 boys) in two regular middle schools that were randomly selected from the school board without any specific exclusion criteria in Shanghai, China. Unlike a few “key” (in Chinese “key” means first-class) schools in which students were selected from different areas based on their school performance, students in these regular schools came from the residential area in which the school was located. The students were in 13 classes with approximately 40 students in each class. The mean age of the participants was 11.75 years ($SD = 0.40$).

Almost all participants were of Han ethnicity, a predominant ethnic group in China, comprising over 90% of the population. Participating families were from low to middle socio-economic backgrounds. In the sample, 88% children were the only child in their families, and the others had one or more siblings. Approximately 36% of mothers and fathers had completed high school, 60% of mothers and 57% of fathers had a bachelor's degree, and 4% of mothers and 7% of fathers had a post-graduate degree. The demographic data for the sample were similar to those reported by the China State Statistics Bureau about urban populations in China (Bulletin, 2010).

2.2. Procedure

The English-version measures were translated and back-translated to ensure their comparability with the original English version. The students completed a set of questionnaires about peer victimization, conflict resolution strategies, depressive symptoms, and loneliness in the classroom during the regular class time. Extensive explanations were provided to participants during the collection of data. The study was approved by the institutional review board of the Shanghai Normal University. Written consent was obtained from all participants and their parents. Consent forms were sent home to parents. The participation rate was 98%. Data collection was conducted by psychology graduate students at the Shanghai Normal University.

2.3. Measures

2.3.1. Peer victimization

Prior to completing the questionnaire, the term “bullying” was defined based on the Olweus' (1996) definition, which emphasizes the negative intention, repetitive nature of bullying and the power imbalance between bully and victim. Six questions drawn from the Revised Olweus Bully/Victim Questionnaire (Olweus, 1996) were used to measure youth's levels of peer victimization in the present study (e.g., “I was called mean names, was made fun of, or teased in a hurtful way,” “I was hit, kicked, pushed, or shoved around”).

Participants rated their victimization experiences on a 5-point Likert type scale, from 1 (*never*) to 5 (*always*). The mean score of peer victimization was computed, with higher scores indicative of high levels of peer victimization. The Revised Olweus Bully/Victim Questionnaire has been found to have a high level of reliability in Chinese samples (Li, Zhang, & Yu, 2012). The internal reliability of the measure was 0.85 in this study.

2.3.2. Conflict resolution strategies

Youth's conflict resolution strategies were assessed using the Resolving Conflicts in Relationship Scale (RCR, Thayer et al., 2008). The Chinese version used in the present study consisted of 23 items (e.g., "I offer many different solutions to disagreements," "I avoid discussing the problem with my friend"). The items assessed solution-orientation, control, and nonconfrontation. The participants responded to the items using a 5-point scale, ranging from 1 (*not at all*) to 5 (*very often*). The mean score of each strategy was computed. The internal reliabilities of the measure were 0.82 for solution-orientation, 0.78 for control, and 0.70 for nonconfrontation in the present study.

2.3.3. Depressive symptoms

Adolescents' depressive symptoms were measured by administering the Chinese version of the Children's Depression Inventory (CDI, Kovacs, 1992). Each of the 14 items provided three alternative responses (e.g., "I feel like crying every day," "I feel like crying most days," "I feel like crying once in a while") from which the participant chose one that best described him or her in the past 2 weeks. The participants' responses were scored from 0 to 2. The items center on a given thought, feeling, or behavior associated with depression such as self-deprecation, reduced social interest, anhedonia, fatigue, and self-blame. The mean score of depressive symptoms was computed, with higher scores indicative of greater depressive symptoms. This measure has been shown to be reliable and valid in Chinese adolescents (Liu et al., 2015). The internal reliability of the measure was 0.85 in the present study.

2.3.4. Loneliness

Participants' loneliness was assessed by a self-report measure developed by Asher, Hymel, and Renshaw (1984). Participants were asked to respond to 16 self-statements (e.g., "I don't have anyone to play with," "I'm lonely") using a 5-point scale (1 = *not at all true*; 5 = *always true*). Scores were averaged to form an index of loneliness, with higher scores indicating greater feelings of loneliness. This measure has been shown reliable and valid in Chinese adolescents (Tian, Chen, Wang, Liu, & Zhang, 2012). The internal reliability of the measure was 0.90 in the present study.

2.4. Analytical strategy

Data analysis was performed using IBM SPSS Statistics 23. Distributions of all study variables were tested for normality, linearity, and homogeneity of variance (Hayes, 2013). We employed multiple imputation to handle the missing data (Graham, 2009). Preliminary analyses were carried out to examine correlations among the study variables, and the effects of gender on variables were examined using a Multivariate Analysis of Variance (MANOVA). Next, we used hierarchical regression analyses to examine the main effects and moderating effects. For significant moderating effects, the simple slopes effects on victimization at high and low values (1 *SD* above and 1 *SD* below the mean) of the conflict resolution variables were examined, following the procedure described by Aiken and West (1991).

4. Results

4.1. Preliminary analyses

Descriptive statistics and zero order correlations are presented in Table 1. Peer victimization was significantly correlated with depressive symptoms ($r = 0.58, p < .01$) and loneliness ($r = 0.59, p < .01$). Solution-oriented strategy was negatively correlated with depressive symptoms ($r = -0.52, p < .01$) and loneliness ($r = -0.56, p < .01$), whereas nonconfrontation was positively correlated with depressive symptoms ($r = 0.37, p < .01$) and loneliness ($r = 0.38, p < .01$). Control strategy was not significantly

Table 1
Descriptive statistics and intercorrelations of study variables.

	1	2	3	4	5	6
1 Peer victimization	–					
2 Solution	-.36**	–				
3 Control	.11**	.08	–			
4 Nonconfrontation	.39**	-.32**	.20**	–		
5 Depressive symptoms	.58**	-.52**	.06	.37**	–	
6 Loneliness	.59**	-.56**	.05	.38**	.74**	–
<i>M</i>	1.27	4.40	2.68	1.72	.15	1.58
<i>SD</i>	.56	.69	.81	.88	.23	.56

* $p < .05$, ** $p < .01$.

Table 2
Moderating effects of conflict resolution strategies on relations between peer victimization and depressive symptoms and loneliness.

Predictor	Depressive symptoms			Loneliness		
	B	SE	t value	B	SE	t value
Gender	.07	.08	.82	.16	.08	1.93
Peer victimization	.58	.03	16.70**	.59	.03	17.28**
Solution	-.35	.04	-10.08**	-.38	.03	-11.45**
Control	.03	.03	.76	.01	.03	.24
Nonconfrontation	.09	.04	2.65**	.09	.03	2.70**
Peer victimization x Gender	-.04	.06	-.58	.17	.06	2.72**
Solution x Gender	-.02	.07	-.22	.04	.07	.60
Control x Gender	.04	.07	.61	-.07	.06	-1.04
Nonconfrontation x Gender	-.15	.07	-2.12*	-.12	.07	-1.82
Peer victimization x Solution	-.14	.03	-5.28**	-.12	.03	-5.05**
Peer victimization x Control	-.00	.03	-.06	-.03	.03	-1.20
Peer victimization x Nonconfrontation	.03	.03	1.09	.07	.03	2.69**
Peer victimization x Gender x Solution	.02	.06	.33	.03	.05	.56
Peer victimization x Gender x Control	-.02	.06	-.38	.02	.06	.26
Peer victimization x Gender x Nonconfrontation	-.07	.06	-1.26	-.06	.05	-1.19

Note: Gender: 0 = girls, 1 = boys. * $p < .05$; ** $p < .01$.

correlated with depressive symptoms or loneliness.

A Multivariate Analysis of Variance (MANOVA) was conducted to examine the effects of gender on the study variables. The results indicated a significant overall multivariate effect of gender (Wilks' $\lambda = 0.97$, $F(6, 562) = 3.16$, $p < .01$, partial $\eta^2 = 0.03$). Follow-up univariate analyses revealed that girls had lower scores on control than did boys, $F(1, 567) = 13.71$, $p < .01$, partial $\eta^2 = 0.02$.

4.2. Moderating effects of conflict resolution strategies on relations between peer victimization and psychological adjustment

The goal of the following analyses was to explore the potential moderating role of conflict resolution strategies in the links between peer victimization and depressive symptoms and loneliness. We used a series of hierarchical regression models to examine the hypothesized effects. In step 1, gender was entered as a control variable. In step 2, peer victimization was entered. In step 3, all the three conflict resolution strategies were entered. Two-way interactions between peer victimization, moderator variables, and gender were entered in step 4, and the three-way interactions were entered in Step 5. All continuous variables were standardized to reduce multicollinearity in the analyses (Aiken, West, & Reno, 1991). The results are presented in Table 2.

For the prediction of depressive symptoms, a positive main effect for peer victimization, a negative main effect for solution-orientation, and a positive main effect for nonconfrontation emerged. These main effects were superseded by a significant interaction between peer victimization and solution-orientation and a significant interaction between nonconfrontation and gender. Simple slopes analyses revealed that peer victimization was more strongly related to depressive symptoms for adolescents who were low on solution-orientation ($\beta = 0.43$, $p < .01$) than for adolescents who were high ($\beta = 0.16$, $p < .01$) on solution-orientation, although the slopes for both groups were significant (see Fig. 1). In addition, nonconfrontation was positively associated with depressive symptoms in girls ($\beta = 0.18$, $p < .01$), but not in boys ($\beta = 0.03$, $p = .35$) (see Fig. 4).

For the prediction of loneliness, a positive main effect for peer victimization, a negative main effect for solution-orientation, and a positive main effect for nonconfrontation also emerged. These main effects were superseded by three interactions involving peer victimization, conflict resolution strategies, and gender: (1) between peer victimization and solution-orientation, (2) between peer victimization and nonconfrontation, and (3) between peer victimization and gender. Follow-up simple slopes analyses revealed that solution-oriented strategy moderated the association between peer victimization and loneliness (see Fig. 2). Peer victimization was positively associated with loneliness for adolescents who were low on solution-orientation ($\beta = 0.26$, $p < .01$), but not for adolescents who were high on solution-orientation ($\beta = 0.02$, $p = .81$). Simple slopes analyses also revealed that the association between

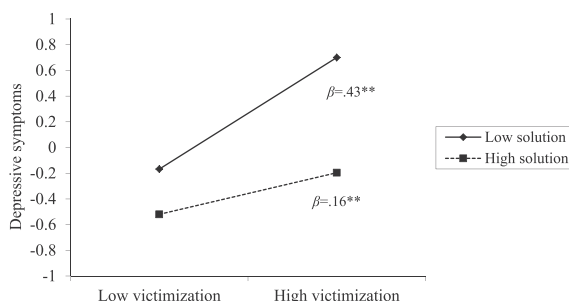


Fig. 1. Moderating effects of solution orientation on relation between peer victimization and depressive symptoms.

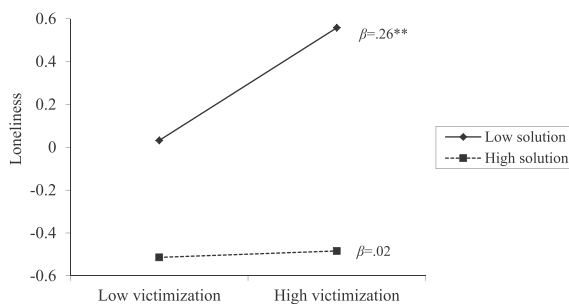


Fig. 2. Moderating effects of solution on relation between peer victimization and loneliness.

victimization and loneliness was moderated by nonconfrontation (see Fig. 3). Peer victimization was positively associated with loneliness for youth who were high on nonconfrontation ($\beta = 0.21, p < .01$), but not for those who were low on nonconfrontation ($\beta = 0.07, p = .37$). Finally, gender moderated the relation between peer victimization and loneliness (see Fig. 5). Peer victimization was more strongly associated with loneliness in boys ($\beta = 0.48, p < .01$) than in girls ($\beta = 0.32, p < .01$).

5. Discussion

The main goal of the present study was to explore the moderating effects of conflict resolution strategies on the relations between peer victimization and psychological adjustments among Chinese youth. The results supported the most of our hypotheses. Peer victimization and nonconfrontation were positively associated with depressive symptoms and loneliness. Solution-orientation was negatively associated with depressive symptoms and loneliness. Control was not significantly related to adolescents’ psychological maladjustments, which was inconsistent with our hypothesis. Moderation analyses indicated that the effects of peer victimization on depressive symptoms and loneliness were weaker among adolescents who responded to peer conflicts using solution-oriented strategies. It was also found that nonconfrontation moderated the relation between peer victimization and loneliness (but not depressive symptoms), indicating that high levels of nonconfrontation served to exacerbate feelings of loneliness of victimized youth. These results suggest that the strategies that victimized adolescents use to manage peer conflicts are a significant factor in their psychological adjustment.

5.1. Relations among peer victimization, conflict resolution strategies, and psychological adjustment

The findings concerning positive relations of peer victimization with loneliness and depressive symptoms are consistent with the previous results (Liu et al., 2015, 2017; Wu, Zhang, Su, & Hu, 2015; Zhou, Liu, Niu, Sun, & Fan, 2017), indicating that peer victimization is a risk factor for psychological difficulties in China. Adolescents who experience peer victimization are likely to display negative emotional reactions. The focus of this study was on adolescent conflict resolution strategies. In line with our expectations, solution-orientation was negatively related to depressive symptoms and loneliness, which indicated that this strategy was an adaptive conflict resolution strategy (Gao et al., 2017). Researchers have reported that nonconfrontation might be also an adaptive strategy in Chinese adolescents (Lun & Miu, 2012). However, the results of this study showed that nonconfrontation was positively associated with depressive symptoms and loneliness. One explanation for the different results is that our study was conducted with youth in urban China, where asocial assertiveness, self-expression, and confrontation, are more valued and encouraged because these behaviors are important for obtaining success in a competitive, market-oriented society (Chen, Cen, Li, & He, 2005). Accordingly, nonconfrontation has been regarded as an indication of social incompetence and become maladaptive in the urban context. Our results showed that control was not significantly associated with adolescents’ psychological problems, which is different from the results of previous studies that control is related to adjustment problems (Campbell & Skarakis-Doyle, 2011; Wheeler et al., 2010).

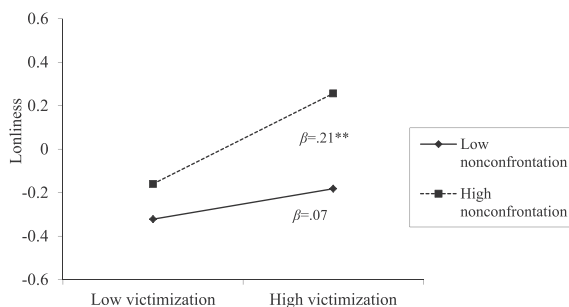


Fig. 3. Moderating effects of nonconfrontation on relation between peer victimization and loneliness.

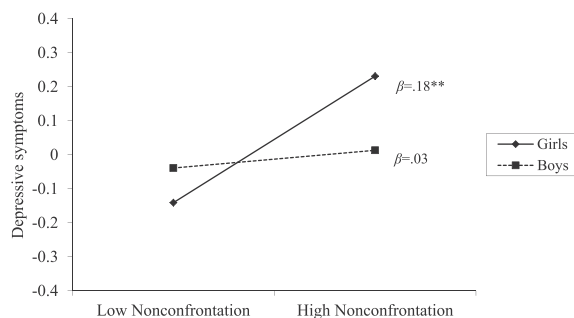


Fig. 4. Moderating effects of gender on relation between nonconfrontation and depressive symptoms.

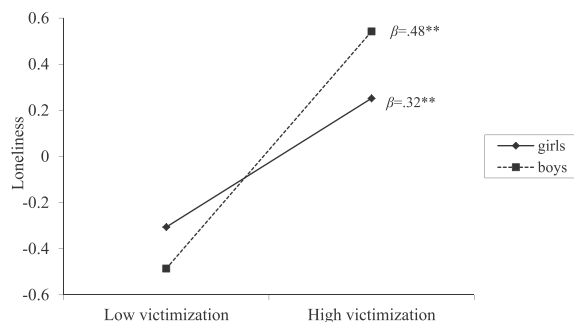


Fig. 5. Moderating effects of gender on relation between peer victimization and loneliness.

5.2. Moderating role of conflict resolution strategies

Researchers have been interested in factors that may moderate relations between peer victimization and psychological problems (Desjardins & Leadbeater, 2011; Zimmer-Gembeck et al., 2014). Our study expanded this line of research by providing additional evidence of moderating effects of conflict resolution strategies on the relations in a sample of Chinese youth. To our knowledge, this is the first study examining the moderating role of conflict resolution strategies in shaping the relations between peer victimization and psychological problems.

Our study revealed that solution-oriented strategy moderated the associations between peer victimization and psychological adjustment difficulties. Specifically, the results indicated that higher levels of adolescents' solution-orientation buffered against the effects of peer victimization on depressive symptoms and loneliness. Thus, victimized youth who used solution-oriented strategies to deal with bullying were less likely to experience psychological difficulties. As indicated earlier, the use of solution-oriented strategies may enhance the quality of peer relationships and help victimized youth effectively deal with their peer conflicts and reduce the negative emotions that caused by peer conflicts (Ghorbanshiroudi et al., 2011; Thayer et al., 2008; Tucker, McHale, & Crouter, 2003).

Nonconfrontation also moderated the relations between peer victimization and psychological problems, but in a different manner. It was found that victimized youth who used nonconfrontation strategy were more likely to report loneliness. Thus, nonconfrontation appeared to serve as an exacerbating factor, rather than a protective factor of peer victimization. When suffering from bullying, youth who used nonconfrontation strategies withdraw from the social situation, rather than solve the problem or seek support from others. During this process, they may be inclined to develop social dissatisfaction, social isolation, and eventually loneliness. It is interesting that nonconfrontation exacerbated the effects of peer victimization on loneliness but not depressive symptoms. This issue needs to be further investigated in future studies.

5.3. Gender differences

Our results showed a gender difference in the association between peer victimization and loneliness; peer victimization associated with loneliness more strongly for boys than for girls. The greater risk of victimized boys for loneliness may be due to their tendency to suppress emotions (Verzeletti, Zammuner, Galli, & Agnoli, 2016). Compared with girls, when confronting negative situations such as being bullied, boys are more likely to keep their dissatisfaction inside, which may trigger feelings of social isolation and loneliness (Nolen-Hoeksema & Aldao, 2011; Verzeletti et al., 2016).

Furthermore, gender was found to moderate the relation between nonconfrontation and depressive symptoms, suggesting that girls using nonconfrontation strategies when facing peer conflict felt more depressed. The link between nonconfrontation and depressive symptoms may be related to rumination in girls (Johnson & Whisman, 2013). It has been found that girls are more likely than boys to ruminate when exposed to negative situations, which may result in depressive symptoms (Abela & Hankin, 2011; Ruijten, Roelofs, & Rood, 2011). Relative to other strategies, nonconfrontation is more passive and avoiding. Girls using nonconfrontational

strategies may be more prone to suffer from ruminative thoughts, and thus, more vulnerable to depressive symptoms. Future research should explore the role of adolescents' ruminative thoughts in the link between nonconfrontation and depressive symptoms.

5.4. Limitations and implications

Our findings add to the literature of a handful of studies on peer victimization in early adolescence in non-Western societies. Notwithstanding, there are several noticeable weaknesses and limitations in our study. First, the study is based on a cross-sectional design. Longitudinal research would provide more robust evidence in terms of the causal mechanisms. Second, the variables were assessed by self-reported measures, which may involve subjective biases and confound the results. Future studies should consider including parent reports, teacher reports, and peer nominations. Third, we investigated in this study the 'general' form of conventional offline peer victimization. Research has indicated that there are several types of victimization, such as physical victimization and relational victimization (Crick, Casas, & Ku, 1999; Olweus, 1994). It will be interesting to explore relations among specific types of peer victimization, conflict resolution strategies, and psychological adjustment. It will also be interesting to study online victimization, which has emerged and increased in recent years, and its relations with adjustment. Finally, we did not control anxiety in the present study. Victims of bullying tend to be more anxious than others (Stapinski et al., 2015), and anxiety is correlated with depressive symptoms and loneliness (Jones, Rose, & Russell, 1990; Kendall & Watson, 1989). It will be important to examine whether anxiety serves as a mediator of relations between victimization and depressive symptoms and loneliness and whether conflict resolution strategies moderate the relation between victimization and anxiety.

The results of the present study have evident practical implications. For example, the protective function of solution-oriented conflict resolution strategies suggest that intervention programs should consider helping victimized youth develop and use solution-oriented strategies to reduce their psychological adjustment problems. Moreover, because nonconfrontation conflict resolution strategies may exacerbate psychological problems of victimized youth, parents and teachers discourage youth to use them to handle their negative social experiences. This may be particularly important for girls because the use of nonconfrontation strategies may increase their depressive symptoms.

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