

학교폭력 피해자의 정신병 실태 조사*

A SURVEY OF THE PSYCHOSIS AMONG SCHOOL VIOLENCE VICTIMS

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요 약 :

본 연구는 학교폭력 피해자의 정신병 실태를 조사하고, 학교폭력 피해자와 정신병 발생률의 관련성을 분석하였다. 연구 대상은 서울지역 중학교 1학년 16개 학교의 1,200명 학생을 대상으로 하였다. 학교폭력 피해자는 157명 (5.3%) 이었고, 정신병 진단을 받은 학생은 47명 (29.9%) 이었다. 학교폭력 피해자와 정신병 발생률의 관련성을 분석한 결과, 학교폭력 피해자는 정신병 발생률이 높았다 (odds ratio) 17.8, $\chi^2 = 274.8$, $df = 1$, $p < 0.05$). 학교폭력 피해자와 정신병 발생률의 상관관계는 $r^2 = 0.93$ 이었다.

* 2000

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중심 단어 :

서 론

14.1 58.8% 25%

2-4)

0.5 2%가

16.2 33.1%, 15.8 30.8%

2.7±2.4 , 3.4±2.4 , 3.1±
2.5 , 가 가 39.2%

가

가

5).

가

가

가

가

가

6)7).

1997 9 41 1,624

, 30%

가

가

8). 1998 4 , ,

1

(日本青少年研究所, 1998)

가

가

1).

가

Table 2. Analysis of variance among popularity-low group, psychotic group, isolated group, pathology-free group, all pathology group

Scales	Popularity-low group (N = 131)		Psychotic group (N = 188)		Isolated group (N = 157)		Early psychosis group (N = 47)		Pathology free group (N = 2148)		F value
	Mean	S.D. ¹⁾	Mean	S.D. ¹⁾	Mean	S.D. ¹⁾	Mean	S.D. ¹⁾	Mean	S.D. ¹⁾	
Anxiety	13.42*	8.70	21.25*	7.28	15.28*	8.65	21.60*	7.59	4.73	4.69	549.47
Depression	21.09*	11.39	28.60*	8.93	21.44*	10.66	30.93*	8.57	7.72	6.68	514.37
Hostility	8.25*	6.14	13.65*	5.09	9.70*	5.87	14.29*	5.41	3.88	3.71	323.47
Interpersonal sensitivity	15.60*	7.75	19.95*	6.04	15.85*	7.23	21.95*	4.84	6.05	4.68	492.53
Popularity	- 6.79*	1.08	- 3.14*	2.71	- 4.10*	2.67	- 6.17*	1.59	- 0.11	1.35	550.36
Intellectual and school status	0.99*	2.84	1.92*	3.31	1.86*	3.12	0.69*	3.06	4.25	3.09	65.19
Obsessive-compulsive	17.56*	8.18	22.97*	5.85	17.97*	7.74	23.90*	6.48	9.08	5.75	345.80
Paranoid tendency	9.00*	5.84	13.12*	4.84	10.10*	5.56	15.26*	4.62	2.79	2.87	630.34
Phobic anxiety	6.19*	5.38	9.47*	5.51	7.13*	5.86	10.26*	6.27	1.66	2.30	417.03
Psychoticism	12.66*	8.92	23.44*	5.03	15.06*	9.06	24.95*	6.20	3.97	4.04	946.41
Somatization	12.19*	8.46	20.32*	8.87	15.18*	9.13	19.21*	9.32	6.08	5.56	298.32
Ostracism	25.57*	10.44	23.63*	9.91	33.95*	7.23	36.29*	7.96	13.96	3.04	990.31
GSI ²⁾	124.92*	65.80	187.17*	42.41	138.07*	63.98	196.69*	47.25	49.91	36.01	711.06
PST ³⁾	57.23*	18.96	71.20*	11.06	62.27*	17.40	72.98*	10.26	32.65	18.87	298.08
PSDI ⁴⁾	2.10*	0.71	2.64*	0.62	2.16*	0.75	2.74*	0.73	1.40	0.54	282.31

1) S.D. is the abbreviation for standard deviation 2) GSI is the abbreviation for global symptom index

3) PST is the abbreviation for positive symptoms total

4) PSDI is the abbreviation for positive symptoms distress index

* : Values are significantly different from normal population based on analysis of variance

가

가 < 가 <

(Fig. 1).

가

가

3) 따돌림당하는 군

157

114

2) 정신병적 증상군

188

101, 87

43

2.65 : 1

가

1.16 : 1

가

가

($r^2 = 274.8$, $df = 1$, $p < 0.05$).

3. 상관 분석 및 회귀 분석 결과(Correlational analysis and Regression analysis)

Table 3

가

- ISS : (intellectual and school status)
- OCS : (obsessive compulsive symptoms)
- OST : (ostracism)
- PAR : (paranoid)
- PHA : (phobic anxiety)
- POP : (popularity)
- PSDI : (positive symptom distress index)
- PSYC : (psychoticism)
- SOM : (somatization)

(r^2) 0.93
93.0%

($F = 2445.4$, $df = 15$, 2945 , $p < 0.05$).

가

(semipartial correlation coefficient)

- (-0.81), (-0.69)
- (-0.67), (-0.66),
- (-0.60), (-0.60), (-0.54),
- (-0.52), (0.37), (-0.14),
- (-0.13)

가

$$\begin{aligned} \text{PSYC} &= 0.74 - 0.51 \times \text{ANX} - 0.55 \times \text{DEP} + 0.57 \times \text{GSI} \\ &- 0.58 \times \text{HOS} - 0.53 \times \text{IPS} + 0.53 \times \text{OCS} + 0.40 \times \text{PAR} \\ &- 0.55 \times \text{PHA} - 1.05 \times \text{PSDI} - 0.04 \times \text{PST} - 0.58 \times \text{SOM} \\ \text{OST} &= 12.69 - 0.10 \times \text{DEP} + 0.08 \times \text{GSI} + 0.17 \times \text{OCS} \\ &+ 0.16 \times \text{PAR} + 0.12 \times \text{PHA} - 0.70 \times \text{PSDI} \\ \text{POP} &= 0.95 - 0.05 \times \text{DEP} + 0.03 \times \text{GSI} + 0.04 \times \text{HOS} \\ &- 0.11 \times \text{IPS} + 0.23 \times \text{ISS} - 0.05 \times \text{PAR} - 0.04 \times \text{PHA} \\ &- 0.34 \times \text{PSDI} - 0.10 \times \text{OST} \end{aligned}$$

(r^2) 0.93

($F = 22.85$; $df = 15$, 26 ; $p < 0.05$).

$$\begin{aligned} \text{PSYC} &= -0.41 \times \text{DEP} + 0.37 \times \text{GSI} - 0.50 \times \text{HOS} \\ &- 0.31 \times \text{IPS} - 0.44 \times \text{ISS} - 0.62 \times \text{OCS} - 0.49 \times \text{PHA} \\ &- 0.38 \times \text{SOM} \end{aligned}$$

- ANX : (anxiety)
- DEP : (depression)
- GSI : (global symptom index)
- HOS : (hostility)
- IPS : (interpersonal sensitivity)

35.3% ($F = 101.67$; $df = 16$, 2934 ; $p < 0.05$)

41.0%

($F = 126.00$; $df = 16$, 2934 ; $p < 0.05$)

가

가

(GSI),

Table 3. Mean difference lists based on posthoc scheffe test

	1-2 ^a	1-3	1-4	1-5	2-1	2-3	2-4	2-5	3-1	3-2	3-4	3-5	4-1	4-2	4-3	4-5	5-1	5-2	5-3	5-4
ANX ¹⁾	-7.83*	-1.86	8.14*	-7.79*	7.83*	15.97*	15.97*	0.04	1.86	-5.97*	10.00*	-5.93*	-8.14*	-15.97*	-10.00*	-15.93*	7.79*	-0.04	2.93*	15.93*
ChSA ²⁾	0.46	0.48	1.75*	-0.70	-0.46	0.01	1.29*	-1.16*	-0.48	-0.01	1.29*	-1.16*	-1.75*	-1.29*	-1.27*	-2.44*	0.70	1.16*	1.17*	2.44*
ChTH ³⁾	-0.80*	-0.01	1.61*	-0.81	0.80	0.78*	2.40*	-0.02	0.02	-0.78*	1.62*	-0.79	-1.61*	-2.40*	-1.62*	-2.41*	0.81	0.01	0.79	2.41*
DEP ⁴⁾	-7.51*	-0.35	12.55*	-9.84*	7.51*	7.16*	20.06*	-2.34	0.35	-7.16*	12.90*	-9.50*	-12.55*	-20.06*	-12.90*	-22.39*	9.84*	2.34	9.50*	22.39*
GSI ⁵⁾	-62.25*	-13.15	70.37*	-64.94*	62.25*	49.10*	132.62*	-2.68	13.15	-49.10*	83.52*	-51.78*	-70.37*	-132.62*	-83.52*	-135.30*	64.94*	2.68	51.78*	135.30*
HOS ⁶⁾	-5.40*	-1.45	4.02*	-5.30*	5.40*	3.95*	9.42*	0.10	1.45	-3.95*	5.47*	-3.85*	-4.02*	-9.42*	-5.47*	-9.32*	5.30*	-0.10	3.85*	9.32*
IPS ⁷⁾	-4.35*	-0.26	8.90*	-6.17*	4.35*	4.09*	13.25*	-1.82	0.26	-4.09*	9.16*	-5.91*	-8.90*	-13.25*	-9.16*	-15.07*	6.17*	1.82	5.91*	15.07*
ISS ⁸⁾	-0.93	-0.87	-2.87*	0.55	0.93	0.06	-1.96*	1.47	0.87	-0.06	-2.03*	1.41	2.89*	1.96*	2.03*	3.44*	-0.55	-1.47	-1.41	-3.44*
OCS ⁹⁾	-5.40*	-0.40	7.88*	-6.75*	5.40*	5.00*	13.29*	-1.35	0.40	-5.00*	8.29*	-6.35*	-7.88*	-13.29*	-8.29*	-14.64*	6.75*	1.35	6.35*	14.64*
OST ¹⁰⁾	1.94*	-8.38*	11.27*	-6.58*	-1.94*	-10.32*	9.33*	-8.52*	8.38*	10.32*	19.65*	1.80*	-11.27*	-9.33*	-19.65*	-17.85*	6.58*	8.52*	-1.80	17.85*
PAR ¹¹⁾	-4.12*	-1.10	5.90*	-5.51*	4.12*	3.02*	10.02*	-1.39	1.10	-3.02*	7.00*	-4.41*	-5.90*	-10.02*	-7.00*	-11.41*	5.51*	1.39	4.41*	11.41*
PHA ¹²⁾	-3.28*	-0.94	4.30*	-4.17*	3.28*	2.34*	7.58*	-0.89	0.94	-2.34*	5.24*	-3.23*	-4.30*	-7.58*	-5.21*	-8.47*	4.17*	0.89	3.23*	8.47*
POP ¹³⁾	-3.65*	-2.68*	-6.05*	0.26	3.65*	0.96*	-2.41*	3.90*	2.68*	-0.96*	-3.37*	2.94*	6.05*	2.41*	3.37*	6.31*	-0.26	-3.90*	-2.94*	-6.31
PSD ¹⁴⁾	-0.54*	-0.06	0.66*	-0.54*	0.54*	0.48*	1.20*	0.00	0.06	-0.48*	0.72*	-0.48*	-0.66*	-1.20*	-0.72*	-1.20*	0.54*	0.00	0.48*	1.20*
PST ¹⁵⁾	-13.97*	-5.04	22.19*	-14.37*	13.97*	8.93*	36.46*	-0.39	5.04	-8.93*	27.53*	-9.32*	-22.49*	-36.46*	-27.53*	-36.86*	14.37*	0.39	9.32*	36.86*
PSYC ¹⁶⁾	-10.79*	-2.41*	8.28*	-9.88*	10.79*	8.38*	19.06*	-0.91	2.41*	-8.38*	10.69*	-7.47*	-8.28*	-19.06*	-10.69*	-18.16*	9.88*	-0.91	7.47*	18.16*
SOM ¹⁷⁾	-8.13*	-2.99*	5.71*	-5.15*	8.13*	5.15*	13.85*	2.98	2.99*	-5.15*	8.70*	-2.16	-5.71*	-13.85*	-8.70*	-10.86*	5.15*	-2.98	2.16	10.86*

1) Anxiety 2) Chapman Social Anhedonia Scale 3) Chapman Magical Thinking Scale 4) Depression
5) Global Symptom Index 6) Hostility 7) Interpersonal Sensitivity 8) Intellectual and School Status
9) Obsessive-Compulsive Symptoms 10) Ostracism 11) Paranoid Tendency 12) Phobic Anxiety
13) Popularity 14) Positive Symptom Distress Index 15) Positive Symptom Total 16) Psychoticism 17) Somatization
^a1 represents 'low - popularity group', 2 'psychotic group', 3 'isolated group', 4 'pathology free group', and 5 'tentative early psychosis group'
^bvalues are differences of each group
* : Values are significantly different between two groups based on post-hoc Scheffe method

가 (70.7%), 가 ,
(35%), ,
(29%), (31%), ,
(29.0%), 가
(25.0%), (25.0%) . 가 23)24)
8) ,
가
가 9.5% 20)
25)
가 (1998b, 1998c)²¹⁾²²⁾ 가
, 1) 가 : 26)
가 ,
ABC Schizophrenic Project
70% 가 10%
. 2) : , ,
가 . 가 23)
, ,
(derestic thinking)
가 가 24)
. 3)
가 : ,
가 . , , 24 5
(early psychosis) McGlashan ,
(1998)¹¹⁾ 3 26
, 27)
, , ,
가 performance test) 28),
29),
30)
5 ,

가

31) 8

36) 5 15

가 가

37) 가

32) 가

38)39) 가

15 가

(predictive validity)

(positive predictive power)

(negative predictive power)

40) 가

가 가

가

1

가

12)

41)42)

(behavioral sensitization)

가

33) 가

13)

34) 가 가

43)

가

130 (median value) 54 1

(social support network)

가

가

11)35) 가

44) 가

114 man(1977)⁴⁷⁾ 30 30

20 가 ,

15) 가 , . 2) : 가

(Early Psychosis Prevention and Intervention Center, EPPIC) 14) , 1 . Senf (1956)⁴⁸⁾

63% 가 3

16) 가

가 (social skill) Wallace(1982)⁴⁵⁾ (Helfand 1956)⁴⁹⁾ 가

가 1) , 2) 가 가

가 , 3) , 가

50)가 . 가

Mean - Ends - Problem Solving Task(MEPS) 가

가 morbid History Scale MEPS Phillip Pre- 가 ,

1) 51)52) 3)

가 : 가 :

, Dougherty (1974)⁴⁶⁾ 31 가 , 가

가 23 가 ,

32 .

. Salzinger (1966)⁵³⁾ Cloze procedure

가

가 . New -

. Rochester Martin(1978)⁵⁴⁾

(節 clause)

. Levy(1976)⁵⁵⁾

56)

가

Mary Carter Samuel Flesher

(1995)⁵⁷⁾

(socialization) ' 가

3
(internal consistency)
(concurrent validity)

가

16

가

16

가

2

가

2

2

가

2

가

3 가

가

가

가

1

2

가

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(socioeconomic status) 가

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A SURVEY OF THE PSYCHOSIS AMONG SCHOOL VIOLENCE VICTIMS

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Objectives : The primary purpose of this study is to understand the psychopathology of the victims of school violence in terms of early psychosis. By doing this, the early detection of psychosis among the victims is possible, and early detection may lead to early intervention.

Methods : Two-thousand and nine-hundred seventy two students from 16 middle schools in Seoul were asked to fill out questionnaire comprised of popularity and intellectual and school status of Piers-Harris Children's Self Concept Inventory, Symptom Check List-90-Revised, and Ostracism Scale. The subjects whose scores upon Ostracism Scale were higher than average by two standard deviation were labeled as 'Repelled and Isolated group', and subjects whose scores on popularity were significantly lower than average and whose scores on psychoticism of SCL-90-R were higher than average were defined as 'tentative early psychosis group'. Odds ratios were calculated from the numbers of subjects with and without high psychoticism scores and high ostracism scores. On the subjects of 'tentative early psychotic group', we examined every clinical characteristic and conducted correlation analysis and regression analysis in order to find out the risk factors and to construct theoretical model that explains the psychoticism scores.

Results : The results were as follows :

1) Total 157 (5.3%) subjects were rated significantly higher on ostracism scale, and among them, 47 subjects (29.9%) were rated significantly higher than average on psychoticism scale, while only 50 subjects among 2,135 students who were rated within normal range showed significantly higher score on psychoticism scale. Odds ratio for psychotic group of isolated group were 17.82 and it was statistically significant.

2) Forty-seven subjects (31 boys, 16 girls) who were rated as they were unpopular and rejected from peers had significantly higher psychoticism scores. They were not significantly different from simply high psychoticism subjects in anxiety, social anhedonia scale, magical thinking, obsessive-compulsive symptoms, phobic anxiety, psychoticism, somatization, but showed higher ostracism scores and paranoid tendencies. Among school violence victims, who rated themselves unpopular and showed higher psychoticism scores, the psychoticism scores were mainly explained by anxiety, depression, hostility, interpersonal sensitivity, obsessive-compulsive symptoms, paranoid tendency, somatization scales ($r^2 = 0.93$).

Conclusion : Thus, it can be concluded that the subjects with higher ostracism score have the substantially high risk for psychosis development. By these results, we propose that school violence victims with anxiety, depression, hostility, interpersonal sensitivity, obsessive-compulsive symptoms, paranoid tendency, somatization should be tested individually considering school adjustment, attentional deficit, concept formation problems.

KEY WORDS : School violence · Ostracism · Psychosis.

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