A clinical and interactionist perspective on the bully–victim–bystander relationship

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The authors propose a dialectical conceptual framework for the bully–victim–bystander interaction often seen in school violence. A clinical and interactional typology is proposed for the detection of children falling into these patterns, with the goal of affording early and vigorous intervention and consultation opportunities with teachers and school administrators. (Bulletin of the Menninger Clinic, 60[3], 296–313)

The concept of bullying defined in this article is embedded in a dialectical framework, emphasizing the interpersonal and interdependent nature of the roles of bully, victim, and bystander. We suggest in a clinical typology that such roles are frequently interchangeable, depending on several cultural, psychopathological, and biological conditions. We review the literature on the topic, which illustrates, from a variety of sources, the importance of these phenomena to education, school administration, academic psychological research, clinical and counseling psychology, sociology, and public health. However, little attention has been given to this subject in the psychodynamic and clinical psychiatric literature. This article outlines an argument for the clinical relevance of the bully–victim–bystander relationship in a psychodynamically oriented clinical practice, where the clinician is working in schools and with school mental health teams.

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Bullying among school children is an old phenomenon. Some of the more traumatic memories of childhood are, for many, memories of victimization. Bullying is immortalized in literature, as, for example, in Oliver Twist and Tom Brown’s School Days. Nonetheless, despite its prevalence, bullying has been infrequently studied systematically. The most sophisticated research has been in Scandinavian countries, such as, in particular, the work of Olweus since the 1970s. He has pioneered a large-scale and successful intervention in 42 schools in Norway (Olweus, 1978, 1991, 1992). More limited studies in Japan, England, Australia, and the United States have been more recently reported. Few countries collect national statistics on bullying—Japan being an exception in this regard (Yoshio, 1985)—although some of the more recent and sophisticated studies of childhood profiles that predict antisocial behavior in adults are forcing clinicians and school personnel to focus on school behavior as a possible harbinger of later criminal and delinquent behavior. For example, the work of Tremblay, Pihl, Vitaro, and Dobkin (1994) predicted male antisocial behavior from preschool behavior. They found, as did Olweus, that boys high in impulsivity, low in anxiety, and low in reward dependence are much more prone to later delinquent behavior.

Our definition of bullying is similar to Olweus’s (1992): the exposure of an individual, over and over again, to negative interactions on the part of one or more dominant persons, who gain in some way from the discomfort of the victims. These negative actions are intentional inflictions of injury or discomfort and may involve physical contact, words, or insulting gestures. Essential to the phenomenon of bullying is that there is an imbalance of strength, an asymmetrical coercive power relationship, and that the victims have problems defending themselves. Thus, fighting between two persons of similar strength and skill would not be defined as bullying. Forms of bullying may be quite direct, that is, physical conflict, and others more indirect, such as ostracism, teasing, and other forms of social isolation.

Prevalence and psychology: A selected literature review

Extensive surveys by Olweus (1978, 1992) in more than 700 schools from all over Norway indicate an average incidence of about 1 in 7 children in elementary and middle schools being involved in bully–victim problems. Other studies in Australia (Slee & Rigby, 1993b) and the United States (Hazler, Hoover, & Oliver, 1991; Perry, Kusels, & Perry, 1988) indicate instances of bullying and victimization that approximate Olweus’s figures or are even higher. A conservative
estimate, then, might be that approximately 10% of all children are
involved in the bully–victim–bystander interaction. From the exten-
sive reports in the literature, especially those by Olweus and others in
Norway and Finland, such as Lagerspetz, Bjorkqvist, Berts, and King
(1982), a profile of bullied and victimized children emerges. To these
we have added our own combined clinical experience over the past 25
years with the treatment and education of children and adults who
have been victims of bullying, as well as of those who themselves have
bullied others or have been bystanders.

Some discordant findings are revealed in the literature; for example,
report studies of bullying in Australian boys and girls that illustrate,
somewhat paradoxically, that bullying boys have more friends and
are often more popular and admired than are nonbullying boys, but
the bullies were unhappier than the nonbullies and did not like school.
The popularity may have been due more to fear and identification with
the aggressor than to genuine friendship (see Kupersmidt & Patterson,
1991). In our experience, such bullies tend to be less popular in senior
high school grades. In one instance, a bullying child became sympto-
matic after his popularity waned significantly when he became a junior
in high school. In another study by these authors, bullies were found
to have significant scores on Eysenck’s Psychoticism Scale (Slee &
Rigby, 1993a), and the victims of bullies were found to be often
despised, in spite of the fact that all children, in general, support efforts
to intervene and help victims of bullying, at least in theory. We have
observed on more than one occasion that children in the more abstract
and distant atmosphere of discussion groups will support censure of
bullies, but on the playground are caught in the regressive, interac-
tional dialectic that brings into play their less rational psychopathol-
ogy. Victims of bullying were low in self-esteem and high on Eysenck’s
Introversion Scale (Slee & Rigby, 1993a). “At risk” children, like
those who are learning disabled (Nabuzoka & Smith, 1993), are often
bullied more than nonlearning disabled children but are not them-
selves more likely to bully others. Olson and Brodfield (1991), in a
study of preschoolers, found that aggressively behaving children are
often rejected by peers and after a time are reactively harassed. Later,
such children become involved in a perpetuated and stabilized behav-
ior of spiraling aggression and bullying. In his extensive study of 5- to
6-year-old children, Olson (1992) suggested that bullies are often
created by peer pressure and by a repeated reinforcement of aggressive
behavior. All of these factors are complicated by the estimates of
researchers, such as Lane’s (1992) findings, that about 10% of teach-
ers are also bullies. Startling as that finding might be, nonetheless most
school principals we have talked with recognize immediately certain bullying teachers. In a study in process, we are surveying aspects of teacher bullies (and bullying of teachers by children). For this study, a bullying teacher is defined as a teacher who uses his or her power to punish, manipulate, or disparage a student beyond what would be considered a reasonable disciplinary procedure. Some authorities, such as Nordstrom, Friedenberg, and Gold (1968), consider the phenomenon to be a product of the teacher's preconscious envy of the child, akin to Nietschze's concept of ressentiment.

In the study by Hazler et al. (1991), it was felt that school professionals, in general, handle bully–victim situations poorly. Madonna (1989) reveals that bullies are more often male and older than their victims. Also, bullies harass both boy and girl victims with approximately the same frequency. Girls label themselves as bullies younger, and boys report being picked on more often than do girls. In an English study, Boulton and Underwood (1992) found more bullying in boys than in girls, and more in younger than in older age groups. They found the most common forms of bullying were hitting/kicking and teasing. Most bullies in this study reported having never been talked to by the school staff or parents about bullying.

In the experimental literature on peer rejection and aggressive behavior in children (e.g., Olson & Brodfield, 1991), it was found that although teacher and student ratings did not agree about who the victims were, they often did agree about who the bullies were. In our experience, teachers generally feel that they can identify the bullying children within the first week of the school year. Kupersmidt and Patterson (1991) found that boys with low self-esteem who were not accepted by their peers were at greatest risk for bullying, and girls who were unpopular with their friends and were aggressive were most likely to bully. Several other studies illuminate efforts to characterize such children. In an interesting study of moral attitudes in children who were rejected, Buzzelli (1992) found that rejected children tend to see a special need for punishment of their transgressors, compared to the more popular unrejected children, who tend to perceive more need for control of moral transgressions toward others rather than toward themselves.

In a large-scale study of low-income African American children, Coie, Lochman, Terry, and Hyman (1992) found that childhood aggression and peer rejection predicted adolescent delinquent behavior. In a study by Schwartz, Dodge, and Coie (1993) of group interactions between children who did not know each other, victims identified themselves early in the experimental group meetings as quite clearly low in assertive behavior, high in submissive behavior, and low
in social conversation and persuasiveness. Several other studies, including that of Roff (1990), have shown that peer rejection relates significantly to later mental health problems. It was also pointed out in studies by Perry, Williard, and Perry (1990) and Coie, Dodge, Terry, and Wright (1991) that many rejected children are highly aggressive and yet are not victimized, nor do they become bullies. In another study, by Kupersmidt and Coie (1990), aggression and peer rejection predicted juvenile delinquent behavior and incidence of school dropout in a cohort of 112 children who were followed for 7 years, from the fifth grade forward. In a study of unpopular children by Hymel, Bowker, and Woody (1993), those in the aggressive, withdrawn, unpopular group were most clearly pathological and, together with those in the aggressive-unpopular group, tended to overestimate their own competence.

A study by Flannery and Watson (1993) showed that high-fantasy-rate children also considered their own peer acceptance and popularity as higher than teachers or peers did, a potentially serious misjudgment. A sophisticated study by Coie et al. (1991) showed that aggressive boys overattribute hostile intentions to peers, and therefore frequently respond with inappropriate levels of aggression, or “reactive aggression.” Bullying in younger children was considered by Coie et al. (1991) to have less negative significance than for older children, since it was felt that in first graders bullying may be part of the normal exploration of self-assertiveness.

Psychodynamic reflections on bully–victim–bystander interactions

In previous work, Twemlow (1995a, 1995b) has postulated that the relationship between victim and victimizer is a classical dialectic, defined by Ogden (1986) as “a process in which each of two opposing opposites creates, informs, preserves, and negates the other; each standing on the dynamic, ever-changing relationship with the other” (p. 208). The critical point of such a dialectic is that neither side of the dialectic has any meaning without the other. Each has a role-dependent relationship with the other side, and each integration in the ongoing process creates a new dialectical opposition. This is a special form of interpersonal relationship, in which the interaction partially creates the pathological reaction patterns. Each role (victim or victimizer) can be adopted by either victim or bully in a kaleidoscope of ever-changing roles fueled mainly by projective identification, counteridentification, and splitting. This dialectical relationship can be roughly analogized as a mass-law equation, as in chemistry, where each side of the equation can shift to the other, depending on the
dynamic conditions affecting the components. One such condition or co-factor would be the bystander, who would clearly influence the pathological victim–bully balance:

\[
\text{Victim} \Rightarrow \text{Bully} \\
\text{Bystander}
\]

The clinical importance of such a dialectic is the fact that as the individual becomes more victimized, the capacity to respond to preserve one’s self becomes less possible. This type of regression can occur in either verbal or physical battery. In cases where the relationship persists over time, as in chronic domestic abuse, we see a perverse form of negative intimacy, like lovesickness gone wrong, in which the emotional dependence, intrusive thinking, alteration of consciousness, and sense of incompleteness are all present, as in lovesickness, with a form of excitement fueled by hatred more than by love (Twemlow 1995a, 1995b).

Thus, various forms of victimization contain masochistic and rescuing elements that often represent more intense and dangerous forms of the bully–victim relationship, where the immediate alteration does not terminate the relationship in spite of the intervention of teachers, security police, and so on, since there is a lovesick connection and the relationship continues with often dangerous consequences, for example, violence between teenagers “in love.” These patterns can follow the teenager into adulthood, becoming the basis for abusive relationships, and often are transmitted further across generations.

We have noted that this dialectical interaction is further complicated by the presence of the bystander, yet the bystander component of this psychological structure is barely represented in the literature. We were able to find only two references (Roland, 1989; Taylor, 1991) to these bystander relationships, with both of these references dealing only with the response of the bystander who feels transfixed, helpless, and impotent to do anything. In other words, the victim–bystander engages in a process of identification with the victim and vicariously becomes victimized without physical participation. In our clinical experience, such bystanders tend to be potential and often later actual victims themselves. Often such children are victims of family physical and sexual abuse and other dysfunctions. A child thus paralyzed may incorporate this traumatic introject (Twemlow, 1995a, 1995b) into an adult lifestyle. For example, we have seen such children grow into single gang-mothers who unconsciously watch their children being abused and feel helpless to protect them.

We have also identified a bully form of bystander, in which the child
engages in voyeuristic, sadomasochistic fantasies while watching assaults. Such fantasies fuel the sadistic pleasure in observing injury to the victim. This form of bystander bullying is often present in children who screen off playground incidents from teachers’ interventions by creating diversions so that bullying can continue. One father was motivated to volunteer for our elementary school violence prevention program by painful memories of his own victimization as a school child. His most bitter recollections were not of the bully, but of the children standing around cheering the bully on, and those who diverted the teacher’s attention from the disturbance. Our clinical experience with the treatment of adults with a childhood history of covert aggressive “bystanding” highlights a strong voyeuristic component. There seems to be a possible analogy between observing the primal scene (the fight), thought by Fenichel (1945) to be the core conflict in sexual voyeurism, combined with a guilt-avoiding displacement of the wish to be directly aggressive (Gabbard, 1994). It is our impression that such bully–bystanders seem often to grow up into those individuals who are always the first sightseers on the scene of disasters, frequently getting in the way of fire, police, and medical personnel who have been called for assistance. Such children can evolve as adolescents into passive participants in criminal acts, and can be charged as accomplices in crimes performed by the more active bullies.

From an object relations point of view, affective, physiological, and ideational complexes may be internalized as an object relations unit that may later form a template for adult responses. Van der Kolk’s (1989) concept of traumatic bonding suggests an etiological cast to the possible psychodynamic explanations for the victim–bully–bystander response. Thus, an object relations unit of self and object representation linked by affect becomes a traumatic introject that can be revived by external experience. This form of reenactment may govern, according to our clinical observations, how pathological and/or ineffective is the victim’s response or how sadistic and destructive is the bully’s action, prior experience being one of the cofactors that governs the degree to which the traumatic object relations unit is reenacted in the present (Twemlow, 1995a, 1995b).

An interactional typology of the bully–victim–bystander relationship

As we have noted previously, although bullying in children up to first grade might be considered to be within normal limits, part of the exploration of new skills and relationships (Coie et al., 1991), most bullying falls into a wide range of pathological behaviors. In addition, research has shown that many rejected children are aggressive without
becoming victims or bullies (Coie et al., 1991; Perry et al., 1990). What determines the suction into victim, bully, or bystander roles is also clearly affected by a wide variety of other preexisting psychopathology. A percentage of violent children at school have undiagnosed, serious psychiatric disorders (Marohn, 1992), including attention-deficit/hyperactivity disorder, schizophrenia and paranoid disorders, unipolar and bipolar affective disorders, serotonergic disorder (Bass, 1994), a variety of seizure disorders, episodic dyscontrol syndromes, and substance abuse disorders. Marohn (1992) proposes alexithymia as a diagnosis for children who cannot symbolize affect verbally, thus having little inner psychological awareness and often confusing thought, feeling, and action. While the many factors involved in the etiology of these serious psychiatric illnesses can affect the bully–victim–bystander response—for example, anxiety threshold, mood modulation, and so on—the unique features of this response are thought to result from the effects of early childhood abuse, including deprivation, and violent parental relationships. Whatever the primary diagnosis, we are suggesting that a useful, dynamic typology will enable early identification of bullies, victims, and bystanders by members of the school mental health team before such children develop more serious behavioral problems.

Dynamic interaction patterns

Besides the typology of bystanders as victims (frozen, frightened bystanders) and bullies (vicarious, voyeuristic bystanders), several clinical categories of bully and victim can affect the dynamics of the tripartite interaction. We propose three common bully typologies (see Table 1) and four common victim typologies (see Table 2), which, in various combinations, produce identifiable patterns of interaction.

Schools are stages for the evolution of dramas involving the interplay of the villains (bullies) and their antagonists (victims) provoked on by the audience (bystanders). Pathological patterns evolve when there are few positive role models in the drama provided by either students or school personnel. Thus, students, teachers, and school personnel, such as the custodian or security staff, can assume any one of the roles in the triad of victim–bully–bystander.

When bullies dominate and teachers become bystanders or victims, violence will result in disruption of academics and a reliance on punishment and surveillance or other ineffective modes of discipline. For example, one middle school with a serious gang violence problem instituted a policy of forming classes, not around academic levels in grades, but around gangs. This was seriously proposed as a method
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<td>Masochistic</td>
<td>High school age: In context of a “crush.” School work suffers. Do not see themselves as ill, but “in love.”</td>
<td>Masochistically martyrs themselves, often to sadistic bully who is seen as worth the sacrifice.</td>
<td>Often truant. Preoccupied. Distracted. Use downers.</td>
<td>Often is repeating a dominance/submission pattern seen at home</td>
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<td>Rescuer</td>
<td>High school age: In context of a “crush.” School work suffers. Do not see themselves as ill, but “in love.”</td>
<td>A submissive relationship to a sadistic bully who is seen as capable of reform if handled the right way, namely by the victim</td>
<td>Preoccupied. Distracted.</td>
<td>Repeating an observed parental pattern.</td>
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of handling school violence! When positive role models are dominant, the culture of violence can be transformed into a positive culture of creativity, cooperation, and peace.

Interventions in school can often impact the evolution of violent subcultures that evolve around the interaction of the bully-victim-bystander triad without pathologizing the children or involving medical referral (Sacco & Twemlow, in press). Thus, prevention and education can be effected by creating counterresponses to these pathological interactions.

A middle school in an eastern city was plagued by daily eruptions of violence. Guidance professionals were able to identify six bullies. The first response was to pull the bullies out of the school environment and place them in an alternative, 30-day “assessment program” in another part of the city, after which the students were returned to the middle school. Yet during the 30-day period, four new bullies were identified by the guidance staff. When the six original bullies returned, the four new bullies joined their ranks. The school continued to have almost daily eruptions of violence despite identifying the bullies and responding individually to their aggressive problems.

After 6 months, the school guidance counselor decided to begin a mentorship program and involve the bullies both in a martial arts program and as mentors for smaller victimized children. They invited a police officer who was a martial arts expert to participate. The bully-mentors were offered free martial arts lessons with a strong traditional ethical component if they did not engage in violent behavior at school. The teachers, guidance counselors, and the martial arts teacher remained in contact, reporting daily on behavior. None of the identified bullies were suspended at the end of the year, with much less general unrestrained violence in the school.

This example illustrates the implementation of interventions from a dynamic interactionist perspective. The role of bully was addressed from the point of view of the school as a culture. Individual bullies were not singled out for punishment or treatment; rather, the role of bully was redefined, and the bullies were offered a high-interest, physical, positive alternative.

Patterns can be generated for almost any combination of the three roles. The most common pathological combinations include the following:

Sadistic bully-submissive victim-bully-bystander

This combination is the nucleus of a bully-dominated subculture in the school. It involves the sadistic bully actively preying on submissive victims under the watchful, voyeuristic eye of the bully-bystander. As
the sadistic bully increases his or her activity and power within the school, the bully-bystander is motivated to become more active, and the victim is driven deeper into a fearful and submissive posture, with cognitive functioning becoming slower and less creative.

Over time, this pattern leads to a situation of increasing power for the sadistic bully, as the other less ruthless (depressed and agitated) bullies take more chances and begin to compete for the approval of the sadistic bully.

This interaction is difficult to break up. As the preceding vignette indicates, when adults identify bullies, punish, and/or expel them, the overall bully culture remains unaffected. As one bully leaves, more take his or her place. The school becomes run by the bullies and the adults are constantly reacting to the negative actions of the bullies. Victims become more submissive as fear dominates their school time, with more classroom distraction and proportionately decreased academic performance.

**Agitated bully–provocative victim–victim-bystander or bully–bystander**

This interactive pattern is often the cause of a highly distracting atmosphere in the classrooms and during recess. Both these types of bullies and victims have high energy and appear to “bounce off” everyone and everything in their environment. Unchecked, this combination evolves into a cacophony of restless, provocative energy. Neither of these types of students can control themselves easily. Unlike the cold-blooded stalking of the sadistic bully, the agitated bully spins out of control and initiates continual conflict with peers and adults, sometimes apparently randomly.

The facilitating bystander effect splits according to bully or victim proclivities. If there is a bully-bystander, he or she is likely to identify with the more dominant agitated bully, while the victim-bystander will be drawn to the provocative victim. The net result is less of a hierarchy of dominance within the school, but rather one of constant distraction and random outbursts caused by constant friction among the students, resulting mainly in stressed teachers, front office visits, and decreasing academic performance.

**Depressed bully–sadistic bully–submissive victim–victim–bystander**

This pattern begins with the depressed bully being activated or provoked by the sadistic bully. Rather than reacting like a victim, the depressed bully identifies with the aggressor and begins to look for submissive victims. Meanwhile, the sadistic bully looks on in delight. Ultimately, the sadistic bully becomes the quintessential bystander or voyeur encouraged by the victim-bystander. The principle difference
is that the sadistic bully starts the cycle and is entertained by watching it unfold according to his or her plan.

The adults who intervene typically see only the depressed bully and submissive victim rather than the original, sadistic bully provocateur. Thus, the depressed bully becomes the puppet for the sadistic bully. Unlike the comparatively adept sadistic bully, the depressed bully is quite unsophisticated and easily led. The latter makes an excellent fall guy for the more calculating sadistic bully.

**Provocative victim—depressed bully—bully—bystander, or victim—bystander**

This constellation creates almost constant low-level irritation. Neither the bully nor the victim directly engage each other, but rather serve as a background disruption that quickly enlists an audience of bully-bystanders or victim-bystanders. Both the provocative victim and the depressed bully are socially inept and want desperately to fit in with the peer style of the moment. They team up looking for an opportunity to attract attention to themselves in ways that they believe will enhance their social status within the school.

**Special cases**

*School gang violence.* In our culture, physically violent school bullies increasingly and commonly form gangs. A pattern of sadistic bully– submissive victim–bully–bystander interaction can lead to a form of intergang violence, based on the fully developed bully–victim–bystander interaction. The following case example of two eighth-grade girls, Shena and Latasha, was written by a mental health worker employed by the middle school the girls attended:

Shena was raised by her maternal grandmother. Her natural parents rejected Shena when she was a baby. Shena’s grandmother is addicted to alcohol and entertains frequently; Shena complained to the school social worker that she was tired of cleaning up after the parties. At school, Shena tried to show she was “bad,” letting peers know she wasn’t afraid of anyone. She had her following of friends. Shena was suspended frequently for fighting. She also often missed school and was failing several of her classes. She ran the streets at night with older teens.

Latasha was raised by her mother and stepfather. She had a brother 1 year younger at the middle school. Her mother recently completed a 30-day-program, rehabilitating herself from drugs. Latasha also wanted to look “bad” in the eyes of her peers, letting them know she wasn’t afraid of anyone, and she had her following. Her natural father, a paraplegic, lived alone. Apparently, he be-
came handicapped through violence from Latasha’s mother. Both parents continue to argue over their children and have not reconciled. They often put each other down in front of their children.

Shena and Latasha were never in conflict at school. They were involved in separate girls’ support groups facilitated by the school social worker. However, there were conflicts between students from Shena’s and Latasha’s followings. Some of the conflicts centered around boyfriends, rumors, name calling, and gossip about each other, that is, territorial fights connected with their followings.

One week, I picked up “vibes” from the students that there was some jealousy between Shena and Latasha. Then I heard rumors from students that they were going to physically fight each other to resolve it. Finally, Shena came in on her own and stated that she didn’t or couldn’t get into anymore fights and wanted to settle with Latasha.

I went to get Latasha from her classroom and spoke to her in the hall to see if she would be willing and ready to resolve the conflict with Shena. I asked her if she was too upset or still very angry at Shena to come into the office and settle it. She said she was okay. I asked her if she could come in and express herself without any profanity toward or “put downs” of Shena, as well as avoiding any physical fighting. She agreed. I took her word for it.

When Latasha came in, I had her sit near the wall opposite where Shena sat. I again reiterated the rules: Take turns, listen, no “put downs” or profanity, and, above all, no fighting. They both agreed. So I started with Shena. She spoke about the gossip the students were passing around.

Then Latasha began her statement. Suddenly, she erupted with “You lying b____l!” and jumped toward Shena, pouncing on her. They wrestled and hit each other. I was in shock, and since these two girls were bigger than I am, I couldn’t use the Mandt training.* I ran out to get help, which was immediately available. Then Shena told Latasha, “Tell your friends that I got the best of you and ‘licked’ you.”

Both of the girls were suspended from school. Shena ran away from home the following weekend. She was picked up by the police and placed in a shelter home. She ran away again, was caught, and was sent to a nearby city. She never returned to the middle school. Presently, Shena, age 18, is in the Job Corps. She has been getting her act together.

*Mandt training is a conflict management system that is widely used by staff of state and federal institutions in Kansas.
Latasha is attending a different high school and apparently is doing well in spite of the continuing conflicts between her mother and father.

*Masochistic victim–rescuer victim–sadistic bully.* These patterns are often seen in older children in their high school or late middle school years after sexual maturity. They often occur in the context of a lovesick or crush relationship with a sadistic bully. In response to the victimizing, the victim, instead of adopting the more usual submissive posture, tends to adopt a martyring or rescuing one. Frequently such a child, often female, will continue the relationship with a boyfriend who is clearly undesirable and known to be aggressive and unempathic. She will either describe the relationship as her private martyrdom for this special challenge from a very special person who is worth the sacrifice (masochistic victim), or maintain that somehow or other she will reform her boyfriend with her love or attention, even though others have failed to do so (rescuer victim).

For example, a 12-year-old white female from a blue-collar family began dating a 16-year-old Hispanic male with an extensive juvenile record. She ran away from home, skipped school, and eventually required a brief stay in foster care. Whenever she was confronted by the rude, sexual, demeaning behavior of her “boyfriend,” she became angry and charged everybody with racism. She understood him; everybody else was discriminating against him.

Both these patterns of victimization have complex unconscious self and object representations with specific qualities detailed elsewhere (Twemlow, 1995a, 1995b). Clinically, these interaction patterns can lead to much misery for the victim and to family dysfunction, especially if parents attempt to break up the relationship. The victims rarely see themselves as sick; they see themselves as in love. As the victim matures, the crush often ends, because the victim is usually mentally healthier than the bully. But if the bully is sadistic and wants to hang on, injury can result from the attempted breakup.

A note about interventions

Successful interventions obviously begin with an accurate diagnosis of these pathological patterns, and then continue with education of students, teachers, parents, and community members, starting when the children are in preschool. The later one waits to intervene, the more likely formal treatment will become necessary. Schools are the natural stages for these dramas to unfold; however, interventions that begin at school must also extend to the root of the problem(s) at home.
Successful programs require the school, parents, and clinicians to share the same goals.

In this article, we have suggested that attention to the subtle as well as obvious effects of the dialectical bully-victim-bystander relationship can improve the learning environment in school. We believe that coercive unequal power relationships, including bullying of teachers by students and bullying of students by teachers, as well as the more obvious bully-victim-bystander interactions between students, distract children from problem solving, education, and effective communication with each other.

In later publications, we will report on a successful nonpathologizing school intervention focused particularly on bullies, victims and bystanders to create a peaceful and creative school atmosphere.

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