School harassment: a psychopathological approach

Jordi Collell i Caralt

Psychologist. European Observatory of Violence.

Carme Escudé Miquel

Psychologist. European Observatory of Violence.

INTRODUCTION

Even though the phenomenon of school harassment (bullying) has recently acquired an important mass-media diffusion, its approach is focused, in most of the cases, on purely educational point of view, thus implying precise actions such as the application of a Discipline Code or the relocation to another centre of any of the involved parties, generally the victim.

Besides, from some of the educational structures, convincing manifestations of zero tolerance have taken place, which rather aimed at the mitigation of the social alarm of the fact itself, with punishments to the supposed aggressor or aggressors, than responding to a real will to face the problem in its widest dimension.

Leaving aside the discussion about the adequacy or the opportunity of such actions, we deem it necessary to provide a point of view that comprises the phenomenon from a wider point of view. School harassment is a social phenomenon in its nature, which takes place in relatively stable groups, where the victim has little chances of escaping. This group dimension should not be neglected when approaching the phenomenon or planning the intervention.

The recurrence of abusive conducts implies a psychosocial risk, both for the aggressor or aggressors and the victim, but also for the schoolmates and for the environment that is subject to a process of moral degradation. Abusive conducts are related to the psychosocial adjustment of the involved parties and have a strong impact on the atmosphere of the coexistence in the centre and in the general community.

It is worth mentioning that school harassment, probably because of the mass media diffusion acquired by certain events occurred at school, is associated to the so-called school violence, a questionable construct under which umbrella are encompassed all the events involving more or less violence carried out by young people, even with little relation with the educational system (disruption, indiscipline, vandalism, criminal conduct, etc.) even though such conducts may be associated, they show distinct characteristics.

Therefore, we consider it necessary to define which conducts we are referring to and which are the consequences for the involved parties, thus evidencing the need for an intervention that may include the promotion of health as defined by the WHO, conceived not as a mere absence of illness, but as a state of social, psychic and physical well-being.

Finally, we would like to highlight the importance that the classrooms may be safe environments where the resilience of the pupils is promoted as well as the emotional well being of the educational community.

SCHOOL HARASSMENT: DEFINITION

Before we continue, it is convenient to outline clearly what is the extent of the school harassment or bullying. Dan Olweus (1983), one of the pioneers in the research, defines it as a conduct of physical or psychological persecution, carried out by a student (male or female) against other student (male or female) chosen as the victim of repeated attacks. This action, negative and intentional, places the victim in a position from which he or she would hardly escape with their own resources. He adds that the recurrence of these relationships causes in the victims clearly negative effects: decrease of self-esteem, states of anxiety or even depressive conditions, which makes their integration difficult in the school environment and the normal development of learning.

Starting from this definition we will highlight several relevant elements: (1) the repetition of the actions, (2) the intentionality of the aggressor, (3) the helplessness of the victim in determinate relationships because of the abuse of power, and, finally (4) the
serious consequences of living in an environment that tolerates abuse may cause in all the involved parties.

**Which conducts are we referring to?**

Bullying is usually associated to the sporadic confrontations or other more or less violent conflicting situations that may occur in educational centres, but really refers to a more complex process that implies the disruption of the symmetry that should rule peer relationships, and the restructure of such relationships under a scheme of dominance-submission that remains stable throughout the time.

Adults are likely to expect that bullying is a transient problem, but this is not the case: bullying is persisting by definition and it is related to problems in many environments of the current and future life of the children (Kumpulainen, Räsänen, Entonen, Almqvist, Kresanov et al., 1998).

For the purposes of the intervention, it is useful to classify the different forms that peer abuse may adopt. We collect them in the following table:

<table>
<thead>
<tr>
<th>Physical</th>
<th>Indirect</th>
</tr>
</thead>
<tbody>
<tr>
<td>-Pushing</td>
<td>-Taking of personal belongings</td>
</tr>
<tr>
<td>-Hitting</td>
<td>Breaking of personal belongings</td>
</tr>
<tr>
<td>Threaten with weapons ...</td>
<td>Hiding of personal belongings ...</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Verbal</th>
<th>Social Exclusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>-Insult</td>
<td>-Exclude from the group</td>
</tr>
<tr>
<td>-Mocking</td>
<td>Shunning/do not let the participation ...</td>
</tr>
<tr>
<td>-Name calling</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Social Exclusion</th>
<th></th>
</tr>
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<tbody>
<tr>
<td>-Ignore</td>
<td></td>
</tr>
<tr>
<td>-Shunning...</td>
<td></td>
</tr>
</tbody>
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Table 1: Classification of peer abuse forms. We distinguish between open (in a continuous line) and relational (in dot lines).

It is also essential to point out that little attention is paid to verbal aggression and especially, to social exclusion. These forms are given less consideration and may be tolerated by their own mates or even adults, who usually assimilate abuse to physical violence.

Contrary to what may be expected, verbal aggression conducts and social exclusion have a worse long-term prognosis for the victim than open aggression ones.

Indirect aggression deserves a reflection/consideration, in these cases the aggressor does not face up, does no identify himself, he remains in the shadows and that generates doubts in the victim about his own perception: Am I being attacked or am I imagining it? Is it unintentional or wilful? These aggressions destabilize the victim and finally undermine his self-esteem. Besides, the victim introjects guilty feelings when he is not able to identify the aggressor or aggressors clearly.

The so-called cyberbullying, that consists of using new technologies (chats, internet, e-mail, SMS…) to perform conduct intimidating conducts, may amplify such effect and increase fear and insecurity in the victim that may feel harassed even in his own house. This generates a very important feeling of vulnerability.

**ROLES IN A BULLYING SITUATION**

It is important to consider for a second, even briefly, the different roles played by the students in a bullying situation. We have mentioned before that school violence occurs within a group context, where each one of the students plays a role (Salmivalli, 1999).

In a severe situation of harassment we find three types of protagonists: the aggressor, the victim and the observers that witness to the aggressions.

**The aggressor:** he rarely acts alone, he generally seeks support from the group. In this category we may distinguish two typologies (1) the predominant dominant one with the tendency to antisocial personality, related to proactive aggressiveness, related to reactive aggressiveness and (2) the predominantly anxious, with a low self-esteem and high anxiety levels, related to the reactive aggressiveness.

Children from the second group that may exhibit a deficit in social information processing and may exhibit a tendency to over assign hostility to the others (hostile attributional bias). This makes them more vulnerable to suffering from the systematic rejection of their peers and may become aggressor/victim or victims, according to the circumstances.

**The victim:** he is generally isolated. There are also several types of victims (1) the classical victim, anxious, insecure, week, with little social competence, (2) the provocative victim that presents a behavioural pattern similar to the reactive aggressors, having lack of emotional control and that, according to the contextual factors, may assume the role of aggressor-victim and (3) the unspecific victim who is the person that is considered as different from the group and this difference makes him a target. The latter is the commonest typology.

**The observers:** sometimes, they observe without intervening, but frequently they participate in the aggressions and amplify the process. This is explained by the phenomenon of social contagion that promotes the participation in intimidation episodes or, also for fear of suffering the same consequences if they offer support to the victim.

Olweus (2001) describes the different roles that may occur in a group of students in a harassment situation as the “bullying circle”. He defines the possible positions that range from aggressor to
The role of peers

Contrary to the relationships that children and young people establish with adults, in the relationships among the same children and adolescents, the equal status rules, in other words their relationships are of a non hierarchical nature, they move in the structure background of horizontal symmetry, thus they are considered as “equals”.

Almost anyone dares to deny peer influence on learning processes, especially on rules and social relationships. Contrary to a linear model of learning represented by the figures of the professor that teaches and the student that learns, learning among peers reveals a more ecological environment. Thus, peer relationships facilitate learning of a broader scope of abilities and attitudes and contribute to a greater extent to the emotional, cognitive and social development, but they may also cause a negative influence.

Farrington (1993) points out that, in its most general form, the phenomenon of abuse consist of a recurrent oppression, both physical or psychological, of a person with less power, by a person with higher power. This unbalance may be very evident (more physical strength, a group against one person alone…) or else, to be excluded, specially when the difference possesses a more psychological trait.

Bullying is a social and group problem, and it is within the group where it should be solved, without this excluding possible interventions at an individual level. We should take into account that over dimensioning of specific bullying conducts may only lead us to intervene in the relationships aggressor/victim and to ignore the social context in which they arise (Salmivalli, Lagerspetz, Björkqvist, Osterman y Kaukiainen, 1996).

IMPLICATION IN BULLYING AND PSYCHOPATHOLOGY

Recurrent involvement in abuse conducts and its relationship with psychopathological disorders in youth and adulthood, has been the object of recent research, especially in the northern countries which are pioneer in this subject.

Research conducted by Kumpulainen, Rasen y Puura (2001) evidences that all the students involved in abuse situations in any of the roles are in a greater risk of suffering psychosocial maladjustment and psychopathological disorders in adolescence and adulthood that the non involved males and females, and are more prone to be clients of psychiatric consult.

Another analysed aspect are the differences between the different roles Kumpulainen, Rasen y Penttinen (1999) point out that boys and girls involved in the role of aggressor exhibit externalised conduct disorders and hyperactivity whereas the involvement in the role of victim is more likely to be correlated to internalised-type problems. Boys and girls involved in the role of aggressor–victim are at a greater risk of having more psychiatric symptoms and to be more show more psychologically disturbed.

Other study carried out in Finland (Kaltiala-Heino, Rimpela, Rantanen y Rimpela, 2000) with a sample of more than 17,000 adolescents aged between 14 and 16 years old, correlate the involvement in abuse conducts with different psychopathological disorders (psychosomatic symptoms, depression, anxieties, substance intake and eating disorders) and confirm that the group aggressor/victim is the one that exhibits a higher rate of disorders, followed by the aggressors and finally the victims.

Anxiety, depression and psychosomatic symptoms are the most frequent among the group of aggressors/victims but are equally common among the aggressors and the victims. The excessive drink use and substance abuse is more common among the aggressors and in the second place among the aggressors/victims. Among the girls, eating disorders are involved in all the roles, whereas that in the boys we only find them in the aggressor/victim role.

Finally, we would like to point out that the observers suffer the consequences of living in an environment ruled by abuse and violence, insensibility in face of the suffering of the victim or the belief in the unavoidability of violence, are some of these consequences.

Aggression and Psychopathology

Even if an spontaneous tendency for the protection of the victim we may think that only him needs help, we should consider that really exists a higher risk of suffering psychosocial disorders in adolescence or adulthood in boys and girls often involved in the role of aggressors.

Thus, a more detailed analysis shows us that children that use open aggression exhibit externalised conduct problems (impulsiveness, blaming and challenging conducts) whereas the relational aggressives also exhibit internalised problems (sadness, anxiety, somatic complaints) (Crick y GrotPeter, 1995).

From a gender-focused perspective, the open aggression has been related to boys and relational aggression to girls. The involvement in non normative gender aggression (relational aggressive boys and openly aggressive girls) is related to higher levels of psychosocial maladjustment. This may be partially caused because they are conducts associated to a higher rejection both from the peers and the adults (Crick, 1997).

It is also interesting the relationship between the different types of aggressors and the specific conduct disorders. Attention Deficit Disorder (ADD) is the most common psychiatric disorder among the group of
aggressors, especially in the subgroup of aggressors/victims, those are frequently rejected by their peers because they are irritating and annoying, may exhibit a poor academic performance and show an unstable and rather extreme conduct (Kumpulainen y otros, 1998; Schwarz, 2000).

Another group would be represented by the students who exhibit Conduct Disorders characterized by an early onset of aggressive conduct that would share some traits with the aggressors/victims (lack of self regulation and emotional control) as well as a tendency to develop an antisocial personality in adulthood (Olweus, 2001).

Kumpulainen et al (1998) find that among reactive aggressor boys and girls Conduct Disorder and Defying Disorder are two-fold more habitual that among proactive aggressors and three-fold higher that among classical victims.

As regards sociometric status, Asher and Dodge (1986) indicate that children rejected by their peers are more likely to develop aggressive and disruptive conducts.

Victimization and psychopathology

Systematic abuse by peers may have a persistent impact on victims. It is known that victims are in a lasting situation that includes may be repeated in new environments (Salmivalli, Lappalainen y Lagerspetz, 1998).

If we examine this involvement in victimization experiences we should distinguish between the effects that reflect a functioning below what is expected (feeling of unhappiness, low confidence level, and self esteem, social maladjustment, low school performance, etc.) and other more stressing psychological status such as high anxiety levels, depression or suicidal ideation.

In this sense, studies corroborate that the duration of the situation of abuse is an important variable in the seriousness of psychosocial maladjustment.

As regards the type of victimization, it is pointed out that the physical victimization may develop externalised attributions whereas the verbal victimization sends messages to the children that may cause the internalisation of negative aspects assigned by mates (“you are stupid, silly, ugly…”).

Effects of relational victimization could even be more harmful by transmitting to the victim the rejection of their mates and lack of social support that potentiates the idea of being invisible to the eyes of the others, denying its own existence as a person. In this sense, research of Bushs and Ladd (2001), and of Parker and Asher (1993) are very interesting and highlight the importance of sociometric status and reputation among peers for the emotional and school adjustment of the children and his adaptation in adolescence and provide us with relevant elements for intervention.

Finally we should consider that the different forms of victimization may contribute independently to psychosocial maladjustment of the child and surely have cumulative effects.

THE INTERVENTION

Defining the problem

Bullying situations have many elements in common and it could be thought that intervention may be very similar in all the cases. This is not true, although several general guidelines may be established, intervention may be adapted to each reality. Success obtained may be proportional to an adjusted definition of each situation that may be very different according to the cases and the context.

In order to plan the intervention accurately with possibilities of success it would be very useful to know where such things happen, which boys and girls are involved and to what extent, the strong points, and the week points of each one, the time that elapsed, and the solutions attempted, the beliefs and attributions as regards the use of violence, also in adults, etc. Besides, we should know the atmosphere of the centre, the dynamics of the group, the tutorial work carried out.

The multi-informant approach is the most complete one to make an accurate diagnosis of the situation. The reports of the professors and parents may be useful but the students are the best informants of the reality that occurs in their group and they are the ones that we should interrogate.

Nomination among peers has proved to be the most useful and efficient ones to determine the involved students in several abuse situations.

In our research (Collell and Escudé, 2005a and b) we have used this procedure to determine the involved students in several abuse situations (physical, verbal and social exclusion). We have added the pro-sociality item to know the students that help and encourage the others and also the sociometric technique of Coie, Dodge y Coppotelli (1982) that allows the classification of the students in popular rejected, ignored or controversial and correlate the sociometric status with the nominations and victimization.

The results allow us to outline the relational map of the classroom, very useful to adjust the intervention to the concrete reality of the moment.

Plan of intervention

About 10% of children and youth could suffer from disorders as a result of the involvement in harassment situations in school. Unfortunately, little attention is paid to the stability of these conducts during childhood, and, when intervention occurs, response arrives late and is usually focused on the mitigation of the symptomatic individual effects that neglect the coping of the problem in a global manner.

An intervention based exclusively on the aggressor and or victim produces undesired effects. Blames the protagonists, at the same time releases the responsibility from the other boys and girls from the groups, thus neglecting that they are precisely the ones who are able to maintain or inhibit such situations.

When dealing with a relational phenomenon, any intervention may be construed around a systemic approach, it should go beyond the aggressor and the victim, it should include the mates and the environment (other students not directly involved, teachers, parents and also school staff).
For example, when approaching the phenomenon, together with the students, to think and discuss among all, what can each one of them do to improve the interpersonal relations, establish peer support system, coping and victim support strategies, and, intervention protocols, etc.

Those interventions encompassed in the Project of Cohabitation of the Centre, will acquire sense and more efficiency.

Without discarding a therapeutic intervention with the aggressor or aggressors and/or the victim when it’s necessary, we understand that the phenomenon should be approached from a psychosocial point of view that promotes health and emotional well being of all the people that are part of the educational community (Cowie, Boardman, Dawkins y Jennifer, 2004).

**Promotion of health and well being**

Mental health in children and adolescents is one of the important concerns of the healthcare authorities in developed countries. Unfortunately, in our country, indicators related to mental health in children and adolescent are not precisely very optimistic, thus correlating with the rates of school poor achievement, substance abuse and conduct disorders, that show an increasingly higher onset in their appearance.

Violence in general and abuse among peers in particular, constitute an impediment for the development of boys and girls in the educational centres and in society in general, as well as an important risk factor to suffer from disorders in adolescence and adulthood.

Thus the need of tackling the phenomenon early and from a rigorous point of view, without maximizing or denying it either, or turning a blind eye, with arguments such as “those are kids’ affairs” “in our centre there are no conflicts, or the well known “ bullying abuse always existed” that justifies non intervention. As well very well states professor Sanmartín (2005), although there have been practices even millenary in this sense -as hitting minors or women- this does not justify that they should continue.

The need of a holistic approach becomes more evident, from several environments that also include the psychopathological one. This implies the identification of the risk factors (as peer rejection, or early aggression) and the redefinition in a changing society as ours that suffers accelerated transformations in all the fields including the psychosocial pathologies, with the emergence of new psychosocial pathologies.

It involves also working for the improvement of interpersonal relationships and the recovery of community relationships.

Our society and school should not continue talking about aggressive kids, unmotivated, identified many times -and labelled- even from elementary or primary school without an attentive look at the underlying causes, being only limited to many cases of contention. It is not an easy task and should not be assumed only by the educational centre. An ecological vision and unanimous commitment is required from several agents.

Several reasons exist why the educational centres in close collaboration with families and social agents, should be implied involved in social emotional well being of their pupils students, among them:

1) Peer relationships are important indicators of mental health of students and predict future adjustment and personal success including more than academic performance.

2) There exist an important relationship between psychosocial adjustment and academic success.

3) Rates of psychosocial disorders have increased and are increasingly common as highlighted by the WHO.

4) School centres should be environments where all may be moderately happy an feel, at least, moderately well. Attractive working environments and learning for professors and students (Salomäki, 2001).

A more clinical approach from the point of view of pathology of the relationships that performs an intervention for the improvement of individual and community mental heath represents a more coherent and necessary approach. We are heading, or should be in such direction.

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