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VICTIM, BULLY, & SURVIVOR

Bullying, being victimized... depression and anxiety represent expressions of fundamental concerns for children and individuals. Do I matter? Am I safe?

People or children become depressed when they don't feel they matter... hopelessness, helplessness, being unimportant to others.

People or children become anxious when they feel they cannot take care of themselves, especially if they cannot protect themselves from bad things or bad people.

Many children or people experience being teased, victimized, or bullied at some point in their lives. Some manage the stress and challenges relatively well, and become survivors. Being bullied may become stressful but formative experiences that build psychic and relationship skills and strengths. They are the survivors. Some children however are scarred and carry into adulthood devastated self-esteem and vulnerability to being abused, bullied, or exploited over and over in future relationships.

- Problems: Unpopularity, Socially Isolation, Negative View of School, Somatization, Internalization of Negative Views of Self
- Causes: Close Parental Relationships, Overprotectiveness, Lack of Coping Skills, Inexperience With Conflict Resolution
- Characteristics: Physical Size, Youth, Sensitivity, Anxious Vulnerability, Fearful, Non-Conflict Submissiveness

Why do some children become the perpetual victims of bullies throughout childhood, and as adults, victims of abusive intimate partners (domestic violence) and abuse bosses (workplace bullying)?

They develop "anxious vulnerability." With the experience of being victimized, they anticipate that they cannot survive a bully and their only hope is to see the bully early and well before he/she is close enough to attack. Normal sensitivity becomes hyper-sensitivity and normal vigilance becomes hyper-vigilance. Hyper-sensitive and hyper-vigilant behavior backfires as it becomes a signal of vulnerability to a predatory bully, who is looking for the easiest victim.

When a child (or an adult) is bullied and begins to feel like a victim, depression and anxiety becomes a part of life... sometimes for a short period, but sometimes for a lifetime. The child:

- Experiences advice about how to avoid bullying as meaning it is his/her fault that he/she is being bullied.
- Experiences being protected or rescued as essential because of seeing oneself as helpless without others interventions.
- Believe there little or nothing he/she can do to prevent being bullied, abused, or exploited.
- Believe that he/she is inherently flawed and deserves to be bullied, abused, or exploited... or is shamed because of being unable to protect him/herself.

It is important for adults, especially parents but including teachers and therapists to be able to do four things:



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1. Support children not to become victims, but powerful individuals and community members.
2. Support children not to become bullies, but individuals with appropriate strategies and behaviors for mastery and self-esteem in relationships and communities.
3. Protect and empower children who are or have been victimized by bullies.
4. Intervene, set boundaries, and redirect children who bully.

To do all these things, adults must

1. Understand the dynamics of bullying, including male typical versus female typical bullying.
 - Repetition, Aggression, Negative Intent, and Power Difference
 - Behavior, Verbalization To, and Verbalization About
 - Male Socialization and Bullying is Hierarchical
 - Female Socialization and Bullying is Relational (based on inclusion/exclusion): Attack on Person, Reputation, and Relationships
2. Manage intervention to empower rather than inadvertently disempower a vulnerable child.
 - Message: "You Can/Cannot protect or care for yourself."
 - Experience: "I will facilitate Practice/No Practice in protecting or caring for yourself."
3. Manage discipline with a challenging child to not inadvertently facilitate bullying behavior.
 - Problems: Effects on others, on self, learning, friendships, work, intimacy, income, & mental health
 - Causes: Coercion Parenting Model, Noncontingent Parenting, Relational Aggression
 - Characteristics: Hostile Attributional Bias; Perceived Provocation; Successful Short-Term Outcomes & Long Term Failures;
 - Downward Life Spiral;
 - The Reactive Bully- Both Bully & Victim
4. Assert anti-bullying culture in schools and other communities.

Bullying or being victimized does not ordinarily happen in isolation. The school, the family, or other community models, facilitates, supports, or intervenes according to cultural standards that tolerate, encourage, and/or denies bullying... or is actively anti-bullying. The culture of the family or school needs to change along with individual support and intervention.

Biography

Ronald Mah, therapist and educator, combines concepts, principles, and philosophy with practical techniques and guidelines for effective and productive results. He uses humor and stories from his many experiences to illustrate important points in a stimulating and highly motivating and engaging style.

A Licensed Marriage & Family Therapist, his experiences include: Asian-American community mental health, Severely Emotionally Disturbed mental health & school partnership programs, vocational programs for at risk youth, welfare to work programs, clinical consulting & cross and



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multi-cultural training for Head Start, other early childhood education programs, social services organizations, & mental health agencies, supervising a high school mental health clinic, training and supervising therapists, private practice in Castro Valley, author of the Asian Pacific Islander Parent Education Support curriculum.

Professional Education experiences include: 16 years in ECE, including owning and running a child development center for 11 years, Kindergarten, elementary, & secondary teaching credentials and experience, ethnic studies curriculum writer, community college instructor, Masters of Psychology instructor, and former member Board of Directors of the California Kindergarten Association and of the California Association of Marriage & Family Therapists.