Original Article

Journal homepage: www.zjrms.ir



Prevalence of Child Abuse in 15-17 year old Students

Mahin Eslami-Shahrbabaki,¹Aliakbar Haghdoost,²Laya Sabzevari,*¹Amir Eslami-Shahrbabaki,³Maryam Kalantari⁴

1. Department of Psychiatry, Neuroscience Research Center, Kerman University of Medical Sciences, Kerman, Iran

- 2. Department of Epidemiology, Kerman University of Medical Sciences, Kerman, Iran
- 3. Medical Student, Tehran University of Medical Sciences, Tehran, Iran
- 4. General Physician, Kerman University of Medical Sciences, Kerman, Iran

rti				

Abstract

Article history:
Received: 30 Dec 2011
Accepted: 12 Jan 2012
Available online: 17 Mar 2013
ZJRMS 2014; 16 (5): 11-15
Keywords:
Maltreatment
Child abuse
Physical abuse
Emotional abuse
Neglect
*Corresponding author at:
Department of Psychiatry,
Neuroscience Research Center,
Kerman University of Medical
Sciences, Kerman, Iran.
E-mail:
dr_sabzevari@yahoo.com

Background: Child abuse is a common phenomenon accompanies with unfavorable short and long term personal and social consequences. With changes in environment which child taken care, negative long term consequences could decreased. This study designed to determine the prevalence of all types of maltreatments in 15-17 year-old students in Kerman.

Materials and Methods: In this cross sectional- descriptive study, a sample of 360 students (184 boys/196 girls) selected by cluster method from all boy and girls high school students of educational area one and two of Kerman and was evaluated. Maltreatment assessment instrument was a 48-questions standard self-report questionnaire which previously recorded. Data were analyzed by descriptive statistical tests.

Results: The average of child abuse among samples was 27.6%. The students have experienced physical, neglect and emotional abuse, 9.67%, 23.6% and 17.9% respectively in their history.

Conclusion: Despite the lower frequency of child abuse types in comparison with other studies, it seems the early diagnosis and protective educational interventions could have critical roles in diminishing the prevalence and harmful consequences of child abuse.

Copyright $\ensuremath{\mathbb{C}}$ 2014 Zahedan University of Medical Sciences. All rights reserved.

Introduction

healthy childhood is the cornerstone of any dynamic and healthy society [1]. Arguably child maltreatment is one of the most common phenomena which influence physical and psychological health of the child and could have far reaching social and individual consequences [2]. Based on World Health Organization reports, violence against children is one of the most important risk factors for development of physical and psychological disorders such as depression, suicide and aggressive behavior [3]. Prevalence of lifelong physical and sexual maltreatment among children and adolescents seeking ambulatory psychiatry services is about 30% and among those hospitalized this reaches up to 55% [4, 5]. According to World Health Organization estimates, 875,000 children and adolescents under the age of 18 years old in 2002 alone lost their lives for reasons attributable to violence committed against them [3]. Maltreatment of children assumes various forms ranging from emotional maltreatment and negligence to physical or sexual maltreatment [6]. Physical maltreatment is defined as intentional harming of a child by a caregiver, which may involve shaking, hitting, burning, throwing, hanging or any other sorts of violence which may result in physical damage [7]. The condition in which the child's caregiver does not provide adequately and properly for his or her physical or developmental ad medical needs is defined as neglect [8, 9]. Emotional maltreatment occurs when a child is constantly told that he or she is worthless, defective or unwanted [9]. Sexual maltreatment is

considered the most severe form of maltreatment and comprises exposure of the sexual organs to child, interacting with child's sexual organs or other body parts, and sexual intercourse [9]. The study of child maltreatment and its consequences as a serious social and health problem has been conducted for over half a century. Balbi and Vien have stated that childhood experience of difficulties and stresses accompanies various types of physical health problems and psychological and developmental disorders [10, 11]. Since 1962 when Henry Camp attracted the attention of authorities in many societies by coining the term "battered child", despite global concerns for child rights in recent decades and worldwide ratification of the convention on the rights of the child, we are still observing widespread incidents of child maltreatment and undermining child's rights in many societies [12]. In the US annually more than 3 million cases of maltreatment against children are reported, although the actual figure exceeds these figures, because many of the cases are just not reported or reported with great caution [13]. In 2007 of the total 5.8 million cases of maltreated children only 3.2 million were reported. Based on the published data there was constant fluctuation in the number of child deaths attributable to maltreatment and neglect in the recent years, but since 2001 this figure has risen constantly and has gone from 3.3 deaths per day in 1995 to 4.8 deaths per day in 2007 [14]. Nevertheless since the peak of child maltreatment in 1993, there has been a 20% decline in maltreatment especially regarding physical and sexual aspects of it, which is the result of effect of measures preventing maltreatment of children and promoting their protection [9-15]. In a study conducted in Egypt 79.9% of schoolboys and 62% of schoolgirls were found to be subjected to physical punishment in 1999 [16]. Prevalence of child maltreatment in Germany, UK and Netherlands was 15, 13.6 and 4.9 in a thousand, respectively [15]. According to Society for Protecting the Rights of the Child in Iran (2005) in the first quarter of 2005, 37 cases of child maltreatment were reported of which 67.6% were physical maltreatment, 28.4% were emotional and 4% were sexual maltreatment [17]. Researchers in Cypress found that 47% of men and 53% of women had experienced maltreatment in their childhood. Of this study population 34% had experienced both physical and emotional, 28% emotional, 26% physical and near 5% sexual maltreatment [18].

This social problem has been studied in various researches in Iran. In 1996 a retrospective study in Tehran showed that 100 children older than 6 had been maltreated by their parents [19]. In another study in Rafsanjan, Amini et al. reported that 69% of children between 7 and 12 years old had experienced various forms of maltreatment and neglect at the hands of their parents [20]. Based on a study in Ahvaz, physical an emotional maltreatment and educational neglect among guidance school children had a prevalence of 31.7%, 45.8% and 3.7%, respectively [21]. Another study was conducted on guidance school children in Khorram Abad, according to which the most common source for physical maltreatment toward boys was from their parents (47.5%). For girls, their brothers were chiefly responsible for physical maltreatment (22.2%) the study reported sexual maltreatment solely among girls which had a prevalence of 32.5% [22]. The child's father or brother(s) were mainly responsible. Ziaaddini et al. in a study on drug addicts found that 62.5% had experienced emotional maltreatment, 70.3% had a history of physical maltreatment, 42.2% reported sexual maltreatment, 64.1% had experienced emotional neglect and 70.3% had experienced physical neglect. Child maltreatment in any form has devastating short term and long term consequences. With respect to the importance of child maltreatment and the vulnerability of the adolescents this study was designed and conducted in 2010 in Kerman with the aim of determining the prevalence of various forms of maltreatment among students between 15 and 17 years old.

Materials and Methods

This study was a cross-sectional study, aimed toward determining the prevalence of various types of child maltreatment among schoolchildren of 15-17 years old in Kerman, 2010. Four hundred questionnaires were distributed among first to third grade high school students in 10 schools, of which half were given to boys and the other half to girls. The samples were chosen as clusters. The final distribution was 30-40 samples in each school

and 10 samples in each grade (in every school). The subjects were instructed about the study to minimize the non-response bias.

We used a standard questionnaire to evaluate child maltreatment in this study [24]. This questionnaire consisted of two parts. The first part included personal demographic information and the second part consisted of 48 questions with a self-report measure to assess maltreatment. Eight questions concerned sexual maltreatment, 28 questions were pertinent to emotional maltreatment and 12 questions were about neglect. Furthermore, questions concerning sexual maltreatment were omitted due to intervention from education officials. All of the questions could be answered by a 4-level scale (never, sometimes, often and almost always). After gathering the questionnaires the data was analyzed by employing SPSS-15 software, measures of central tendency and statistical dispersion and chi-square test for comparing the prevalence of maltreatment according to variables in the study. This study was a cross-sectional study, aimed toward determining the prevalence of various types of child maltreatment among schoolchildren of 15-17 years old in Kerman. Four hundred questionnaires were distributed among first to third grade high school students in 10 schools, of which half were given to boys and the other half to girls. The samples were chosen as clusters. The final distribution was 30-40 samples in each school and 10 samples in each grade (in every school). The subjects were instructed about the study to minimize the non-response bias. We used a standard questionnaire to evaluate child maltreatment in this study [24]. This questionnaire consisted of two parts. The first part included personal demographic information and the second part consisted of 48 questions with a selfreport measure to assess maltreatment. Eight questions concerned sexual maltreatment, 28 questions were pertinent to emotional maltreatment and 12 questions were about neglect. Furthermore, questions concerning sexual maltreatment were omitted due to intervention from education officials. All of the questions could be answered by a 4- level scale (never, sometimes, often and almost always). After gathering the questionnaires the data was analyzed by employing SPSS software, measures of central tendency and statistical dispersion and chi-square test for comparing the prevalence of maltreatment according to variables in the study.

Results

In this study a total of 360 questionnaires (90%) were collected, of which 51.1% (184) were filled by boys. Of all the samples, 59.2% were from schools in zone No. 2 and the rest from zone No. 1. Overall the total maltreatment score was 27.6 with a 95% confidence interval of 11.8-59.8. Of all subjects 9.67% had experienced physical maltreatment, 23.6% had been subjected to neglect and 17.9% had reported emotional maltreatment. Among the questions regarding physical maltreatment, statement number 23 was more than any other question answered with "almost always".

Table 1. Comparison between the score for various forms of maltreatment for each gender

	Boys		Girls		<i>p</i> -Value
	Score	Standard deviation	Score	Standard deviation	
Physical Maltreatment	10.3	12.4	8.9	12.7	0.29
Emotional Maltreatment	18.2	14.6	17.6	15.3	0.7
Neglect	24.37	14.3	22.58	16.7	0.35

Table 2. Frequency of an "almost always" answer in the physical maltreatment area

Statement	N (%)
I see others being beaten up at home.	6 (1.7)
I have been beaten up hard at home.	3 (0.8)
I have been beaten up hard for every little mistake.	3 (0.8)
I am beaten up at home in a way that leaves marks.	5 (1.4)
The punishment is disproportionate to behavior at home.	9 (2.5)
I have been punished unjustifiably at home.	9 (2.5)
I have been beaten up so bad that it led to serious damage and fractures.	2 (0.6)
I am punished hard when I don't obey the rules at home.	7 (1.9)

Table 3. Frequency of each answer in the area of physical maltreatment in the study population

	Answers			
Statements	Never N(%)	Sometimes N(%)	Often N(%)	Almost always N(%)
I see others being beaten up at home.	270 (75)	68 (18.9)	16 (4.4)	6 (1.7)
I have been beaten up hard at home.	308 (85.6)	34 (9.4)	15 (4.2)	3 (0.8)
I have been beaten up hard for every little mistake.	319 (88.6)	23 (6.4)	15 (4.2)	3 (0.8)
I am beaten up at home in a way that leaves marks.	320 (88.9)	29 (8.1)	6 (1.7)	5 (1.4)
The punishment is disproportionate to behavior at home.	271 (75.3)	60 (16.7)	20 (5.6)	9 (2.5)
I have been punished unjustifiably at home.	289 (80.3)	48 (13.3)	17 (4.7)	6 (1.7)
I have been beaten up so bad that it led to serious damage and fractures.	327 (90.8)	19 (5.3)	12 (3.3)	2 (0.6)
I am punished hard when I don't obey the rules at home.	222 (61.7)	106 (29.4)	25 (6.9)	7 (1.9)

It stated "disproportion between punishments at home and my behavior at home". There was no significant difference between two genders regarding physical maltreatment. The boys had chosen this more than girls, but there was no statically meaningful difference. About 9.2% of those asked had experiences of physical punishment which lead to various degrees of damage and fracture. In the emotional maltreatment area the statement "my parents disrespect me" was more than any other statement answered with "almost always" (79.4%). Also 95% of the subjects had experienced various degrees of inappropriate and offensive jokes at home. Regarding emotional maltreatment, no significant difference was seen between the two genders. With respect to statements concerning neglect, the most frequently question answered with "almost always" was "I seek help from others for solving my problems" (7.8%).

In the area pertaining to neglect there was no statically meaningful difference between boys and girls. With respect to neglect, 11.7% of the subjects faced various degrees of objection from their parents toward continuing their education, 7.5% had to work and study simultaneously and 49.7% had to look after themselves. Some of the questions were asked in an affirmative fashion. In analyzing these questions, such as "they pay attention to my nutrition at home", "my wishes are noted" and "they pay attention to my hygiene", it was found that girls significantly answered more than boys with "almost always" to these statements (p=0.02, p=0.04 and p=0.02, respectively).

Discussion

In our study the prevalence of various sorts of maltreatment was often lower than that of other studies. Also there was no significant difference in the prevalence of maltreatment between the two genders. According to this study 9.67% of the high school students in Kerman who participated in the study had a history of physical maltreatment by family members. Mado et al. in a study in South Africa assessed the prevalence of child maltreatment among high school students and reported that mild physical maltreatment had a prevalence of 27% [25]. This rate had been reported 23.1% in a study conducted in China [26]. Michahal et al. in the UK [27] and Cher et al. in the US [28] have also performed several studies in this field and have reported the prevalence of physical maltreatment to be 7% and 35%, respectively. It the past two decades many studies have been conducted on this subject in Iran, too. Noroozi et al. stated that 46.2% of high school students in Tehran had experienced physical maltreatment at a time [29]. According to the research conducted by Miri et al. 20.2% of high school students had been subjected to physical maltreatment [30]. Namdari reported the prevalence of physical maltreatment among guidance school students in Khorram Abad to be 58.2%. We observed that the results of these studies varied greatly and although few studies had come up with prevalence rates similar to us, most of the existing literature suggested much higher rates. These differences may be attributed to several factors, such as different culture and norms in different parts of the country, diversity of social status and ethnicity in the population society, and the function of child rights and the preventive educations they can provide. Also using different measures for assessing the prevalence of maltreatment could lead to such disparities.

In the present study the child abuse score had no significant difference between the two genders, while according to the study performed by Kholasezadeh et al., maltreatment was mainly aimed towards boys [27]. Vizeh et al. found that gender had a significant effect regarding the incidence of maltreatment among high school students but based on their findings this factor was only statically meaningful only in the emotional area and also girls were more prone to emotional maltreatment than boys [28]. Concerning neglect, based on our findings 11.7% of the study population faced varied degrees of difficulty posed by their parents against continuing their education and 7.5% had to work and study simultaneously. These situations both are in the domain of educational neglect. With regards to nutrition, 52.5% of the subjects had experienced neglect and also a 9.7% hygienic neglect was noticed. Andirvian following a study on guidance schools in Ahvaz reported the prevalence of educational, nutritional and hygienic neglect to be 3.12%, 45.5% and 32.8%, respectively. Miri et al. estimated the prevalence of neglect to be 24.9% in Bam, of which 18.3% was attributed to educational neglect [30]. Objection to continuing education in the study performed by Vizeh et al. was 19.1%. This high rate in the work of Vizeh could be caused by his huge sample size and the cultural diversity among different districts of Tehran [28].

Some studies have focused on other aspects of neglect. Such is the study of Amini and Yazdanpanah, according

References

- 1. Ziaei S, Abedi HA, Arbaban M. [Situation of children's rights in Isfahan city] Persian. Iran J Nurs Midwifery Res 2011; 16(2): 141-147.
- 2. Kaplan HI, Sadock BJ. Synopsis of psychiatry, behavioral science and clinical psychiatry. 8th ed. New York: Lippincott Willam and Wilkins; 2000: 847-56.
- 3. McClellan J, Adams J, Douglas D, et al. Clinical characteristics related to severity of sexual abuse: A study of seriously mentally ill youth. Child Abuse Negl 1995; 19(10): 1245-54.
- Marvasti J. Child suffering in the world: Child maltreatment by parents, culture and governments in different countries and cultures. 3rd ed. Manchester: Sexual Trauma Center Publication; 2000.
- Zummerman M. Family violence. In: Haber J, Krainovich-Miler B, McMahon AL, editors. Comprehensive Psychiatric nursing. 5th ed. St. Luis: Mosby; 1997: 786.
- 6. Kairys S, Johnson ch. The psychological maltreatment of children. Pediatrics 2002; 109(4): 68.

to which the highest rate of neglect among primary school students was in the area of recreation. This could be because of different needs of the child in primary and high school periods [12]. With respect to emotional matters, 98.9% of the subjects in our study believed to variable degrees their families did not respect them, 95% faced inappropriate or offensive jokes at home, and 46.4% felt they were ridiculed in the family. Vizeh also found that 62.5% of the participants experienced verbal insults. Bontain in a research in 1994 in the US stated that 59.2%of the study population had been mocked [29]. Aeen et al. reported the prevalence of emotional maltreatment to be 45.8%. The most common form of this was yelling and verbal insults, which is in line with the findings of this study [30]. As a result of the high prevalence of neglect in this study, we suggest the effect of education for people and personnel involved in adolescent education on the course of educational neglect be studied. Also since in the face of some obstacles the prevalence of sexual maltreatment was not assessed, designing a study for evaluating the prevalence of sexual maltreatment among high school or university students is suggested.

Acknowledgements

We sincerely thank all the students who participated in this study. This study was conducted with funds from Neuroscience Research Center of Kerman University of Medical Sciences.

Authors' Contributions

All authors had equal role in design, work, statistical analysis and manuscript writing.

Conflict of Interest

The authors declare no conflict of interest.

Funding/Support

Neuroscience Research Center of Kerman University of Medical Sciences.

- Lewis M. Child and adolescent psychiatry text book. 3rd ed. Philadelphia : Lippi Cott William and Wilkins; 2002: 217.
- Children's Bureau, Youth, and families: U.S. Department of Health and Human Services: Child Maltreatment; 2004. Available from http://www.acf.hhs.gov/ programs/cb/ research-data-technology/ statistics-research/ childmaltreatment.
- 9. National Child abuse statistic. Child help website. 2010. Available at: http://www.childhelp.org
- Rutter M, Taylor E. Child and adolescent psychology. 4th ed. Philadelphia: Weel Publishing; 2003: 410.
- Safari N. [Evaluation of maltreatment in children who refered to Shahid Esmaili clinic in Tehran between 1984 to 1995] Persian [dissertation]. Tehran: Iran University of Medical Sciences; 1995: 14.
- 12. Amini M, Yazdanpanah SH. [Epidemiology of child abuse in Rafsanjan in year, 2000] Persian [dissertation]. Rafsanjan: University of Medical Sciences; 2000.
- 13. Andiroyan V. [Frequency of physical and emotional harm in girl students of Ahwaz in1996-1997] Persian

[dissertation]. Ahvaz: University of Medical Sciences; 1996.

- 14. Namdari P. [Frequency of maltreatment in students of Khoramabad] Persian. Iran J Psychiatry Behav Sci 2004; 9(1): 62-70.
- 15. Ziaaddini H, Dastjerdi Q, Nakhaee N. The relationship of childhood maltreatment and household dysfunction and drug use in later life in Iran. J applied science 2007; 7(7): 1067-1070.
- 16. Dickinson L, Verloin deGruy F, Dickinson WP and Candib L. Health related quality of life and symptom profiles of female survivors of sexual abuse. Arch Fam Med 1999; 8(1): 35-43.
- 17. Dietz P, Spitz A, Anda R, et al. Unintended pregnancy among adult women exposed to abuse or household dysfunction during their childhood. JAMA 1999; 282(14): 1359-1364
- 18. Rohde P, Ichikawa L, Gregory E, et al. Associations of child sexual and physical abuse with obesity and depression in middle-aged women. Child Abuse Negl 2008; 32(9): 878-887.
- MR, Mesgarpoor B, Sahimi I and 19. Mohammadi Mohammadi M. Psychological tests and psychopharmacology in children and adolescences. 1st ed. Tehran: Teimoorzadeh Publication; 2006: 338.
- 20. Finkelhor D, Hamby SL, Omrod R and Turner H. The juvenile victimization questionnaire: Reliability, validity and national norms. Child Abuse Negl 2005; 29(4): 383-412.
- 21. Madu S. The prevalence of child psychological, physical, emotional and ritualistic abuse among high school students

in Mpumalanga province (South Africa). Psychol Rep 2001; 89(2): 431-44.

- 22. Ross C, Keyes B, Xiao Z. Child physical and sexual abuse in China. Child Abuse Negl 2005; 29(4):115-126.
- 23. May-Chahal C, Cawson P. Measuring child maltreatment in the United Kingdom: A study of the prevalence of child abuse and neglect. Child Abuse Negl 2005; 29(2): 969-984.
- 24. Scher C, Forde D, McQuaid J and Stein M. Prevalence and demographic correlates of childhood maltreatment in an adult community sample. Child Abuse Negl 2004; 28(1): 167-180.
- 25. Noroozi F. [Report of child abuse & inattention with focus on sociology and relation with depression severity in state high school students in Tehran] Persian [dissertation]. Tehran: Iran University of Medical Sciences; 1994.
- 26. Miri S, Ameri F, Alizadeh M and Froodnia F. [Prevalence of child abuse in high school students of Bam city (Kerman/Iran) in 2003] Persian. J Kerman Univ Med Sci 2006; 13(1): 43-50.
- 27. Kholasezadeh G, Bakhshi H, Nazer M, et al. [Child abuse in narcotic addicts reffered to addiction cessation clinic] Persian. J Rafsanjan Univ Med Sci 2008; 6(1): 37-44.
- 28. Vizeh O, Moradi SH, Fadaee Z and Habibi-Asgharabad M. A comparative study of the prevalence of child abuse in high schools based on gender, education and history of divorce in the family. J Family Res 2008; 4(2): 145-165.
- 29. Buntain, R. Punishments: What predicts adult approval. Child Abuse Neglect 1994; 18(11): 945-955.
- 30. Aeen F, Deris F, Shahgholian N. Different kind of child abuse and its diposing factors. Iran J Nurs Res 2001; 14(28): 47-54.

Please cite this article as: Eslami-Shahrbabaki M, Haghdoost A, Sabzevari L, Eslami-Shahrbabaki A, Kalantari M. Prevalence of child abuse in 15-17 year old students. Zahedan J Res Med Sci (ZJRMS) 2014; 16(5): 11-15.