



Pergamon

Child Abuse & Neglect 30 (2006) 1081–1092

Child Abuse
& Neglect

Attitudes of Turkish parents, pediatric residents, and medical students toward child disciplinary practices[☆]

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Received 12 August 2003; received in revised form 12 April 2006; accepted 26 April 2006

Available online 28 September 2006

Abstract

Objective: The aims of the study were to: determine the attitudes of parents, pediatric residents, and medical students from a Turkish population toward childhood disciplinary methods; ascertain the association of participants' abusive childhood history with their attitudes toward discipline; and assess their attitudes about disciplinary actions, which should be reported as abuse.

Method: A cross-sectional survey was conducted in Ankara University School of Medicine, Department of Social Pediatrics. Sixty-five parents, 39 pediatric residents, and 106 medical students completed a questionnaire (Survey of Standards of Discipline). This questionnaire was designed to measure sociodemographic characteristics, attitudes toward childhood disciplinary practices, and abusive childhood experiences. There were 43 different disciplinary acts in this questionnaire. The participants were expected to give responses to these acts in three categories: (a) acceptable as discipline; (b) unacceptable as discipline; and (c) unacceptable as discipline—would report to authorities as child abuse. Based on the responses to this questionnaire, we developed the Severity Scale. Using this scale, physical severity scores, verbal severity scores, and total severity scores were measured for each participant.

Results: None of the participants accepted life-threatening practices as discipline, but some declared certain abusive disciplinary practices as acceptable. Some forceful disciplinary methods were not considered as reportable by participants. All severity scores of both residents and students were found to be higher than those of the parents (for verbal severity scores $p = .042$). Also, both verbal and physical severity scores of parents with one child were higher than those of parents with two children (for verbal severity scores $p = .044$). Ninety-one participants (43.3%) indicated that beating was an acceptable form of discipline. Of parents, 66.9% reported abusive childhood history by their own criteria. Of medical students with an abusive childhood experience, 56.5% accepted beating as appropriate

[☆] The authors are grateful to Charles F. Johnson, M.D. for the invaluable permission and consent for using the "Survey of Standards for Discipline" in this study.

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($p = .001$). Both verbal and physical severity scores were found to be higher in participants with abusive childhood history.

Conclusions: Abusive childhood history and lack of education regarding appropriate discipline techniques are linked to the acceptance of certain physical discipline practices. Turkey's cultural and traditional norms may be associated with the use of physical punishment, and in some cases, physical abuse. The lack of awareness of abusive discipline methods among physicians constitutes problems for child protection and must be addressed. Thus, educational programs on child disciplinary practices are required to provide an increased awareness of child abuse among health professional trainees and parents in Turkey.

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Keywords: Disciplinary attitudes; Abusive history; Parents; Pediatric residents; Medical students

Introduction

The choice of a parent's discipline technique is a significant factor in the verbal and emotional development of children. Childhood disciplinary practices depend on variables related to the child, parent, family, and situation (Banks, 2002; Gershoff, 2002; Socolar, Winsor, Hunter, Catellier, & Kotch, 1999).

Punishment, one form of childhood disciplinary practice, is defined as the application of a negative stimulus to reduce or eliminate a behavior. There are two types of punishment, which are typically used toward children: verbal reprimands and disapproval, and punishment involving physical pain, as in corporal punishment (American Academy of Pediatrics, Committee on Psychosocial Aspects on Child and Family Health, 1998). Corporal punishment ranges from less severe acts, such as spanking, to abusive practices, such as beating and burning. It is known that verbal and physical punishments tend to cluster together. Parents who frequently yell at their children are also prone to hit them frequently (Hemenway, Solnick, & Carter, 1994).

A clear association has been shown between strict or inconsistent discipline practices and behavioral or mental problems (Gershoff, 2002; Howard, 1991). Furthermore, physical discipline may become intense, and for some parents may become physical abuse (Elliman & Lynch, 2000). Physical abuse often occurs within the context of a physical discipline episode. When a lower level of physical discipline fails to reduce a child's misdeed, the punishment is increased over time (Whipple & Richey, 1997). It is reported that ending the use of corporal punishment is a potentially important aspect of primary prevention of physical abuse (Straus, 2000).

Disciplinary practices can be passed from one generation to the next. The experience of severe physical discipline during childhood can increase the acceptance of potentially injurious disciplinary acts in adulthood (Bower-Russa, Knutson, & Winebarger, 2001). Adults who were often hit during their childhood may be more likely to become parents who hit frequently (Hemenway et al., 1994). Indeed, research estimates that physical abuse produces a 30% intergenerational transmission rate. That is, 30% of adults who were physically abused as children go on to abuse their own children (Kaufman & Zigler, 1987).

Child abuse and neglect is a relatively new topic in the Turkish society, and there has been limited research on this topic. The first and largest study of 5000 Turkish children conducted by Bilir reported that 36% of children under 5 years of age had been physically abused at some point in their lives (Bilir, Ari, & Donmez, 1986). Further, public and professional awareness of child abuse and neglect is very

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