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COLLEGE OF HEALTH SCIENCES

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DEPARTMENT OF REGISTERED GENERAL NURSING

DIPLOMA PROGRAMMES



**EXPLORING THE FACTORS RESPONSIBLE FOR CHILD ABUSE AND
NEGLECT AMONG PARENTS. A STUDY AT NEW BIADAN IN THE
BEREKUM EAST MUNICIPALITY.**

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2024

DECLARATION

We hereby declare that this submission is our own work towards the Diploma in General Nursing and that, to the best of our knowledge, it contains no material previously published by another person nor material which has been accepted for the award of diploma of the University, except where due acknowledgement has been made in the text.

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ABSTRACT

The concept of child abuse and neglect is a very eclectic one. Its understanding as it occurs varies from individuals, ethnic groups, religious institution, professional bodies etc.

However, This study have discussed the occurrence of child abuse and neglect as it occurs in various forms like physical abuses, verbal abuse, emotional/psychological abuse, child labour, child abandonment and child sexual abuse.

Furthermore, The researcher also made available the factors that contribute to child abuse and child neglect in our society; This include the parent or caregiver factors, family factors, child factors, environmental and protective factors.

The experience of child abuse and neglect has very significant consequences in the life of an individual. It has effects on the health and physical well being, intellectual and cognitive development and emotional, psychological and behavioural aspect of his/her life. All this were critically analysed in this study.

Basically, this study does not only state or lament the problems of child abuse and neglect in our society, it also enumerates factors that contribute to its occurrence and its consequences on the child. This study also made a conscientious look at what can be done to abate the menace of child abuse and neglect in our society.

And lastly, the researcher also visited teachers, health workers, parents, caregivers, law enforcement officers and residents within New Biadan.

New Biadan Area to interview them by the means of a questionnaire so as to get their submissions and what they feel about child abuse and neglect as it affects our social security.

The aggregate views of the respondents and the analysis of their responses were fully and meticulously presented in chapter four of this research project.

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CHAPTER ONE

1.0 Introduction

This chapter will look at the background of the study, problem statement, purpose of the study, objectives of the study, significance of the study and operational definition of terms.

1.1 Background of the study

Abuse of children continues to be a global phenomenon occurring at an alarming rate and accounting for severe problems such as injuries, psychological defects and even death among victims (Monrovia, 2020). Its long-term effect is not limited to the victim and the family alone but the society as a whole (Asamani, 2019).

Child abuse has been recognised by the World Health Organization (WHO) as having broad implications on human development and the increase in public health problems (Anda, 2020). WHO defined child abuse as all forms of physical and emotional ill-treatment, sexual abuse, neglect, commercial and other exploitations, resulting in potential harm to the child's health. It also affects their survival, development or dignity in the context of a relationship responsibility, trust or power (Kamanzi & Nkosi 2022). Physical abuse of children in Africa has also been reported to be high, much higher (64%) than other forms of abuse (Elsaied & Alsehly, 2022) with child maltreatment and family violence existing in all communities across all strata of society (Scott, 2020)

Although there are clear definitions of child abuse enshrined in the Children's Act of the Ghanaian constitution, it seems child abuse is considered acceptable due to religious, traditional, socio-economic and cultural beliefs and practices (Müller, Tranchant, & Oosterhoff, as cited in Dako-Gyeke, 2019). Abuse issues seem to be more complicated as caregivers and parents often become confused about the concept of child abuse and that of child discipline. This is because caregivers and parents abuse children in the name of discipline. However, discipline is a process of instilling good and acceptable behaviour and not to cause

injury, pain or harm to the child as in the case of abuse (Stoltenborgh, 2023). Due to this misconception, child abuse has taken center stage in the Ghanaian society. Abuse of children takes various forms: defilement, physical, psychological/verbal, child maintenance and child labour.

A report on investment, budgeting and economic burden of child protection violations in Ghana by the United Nations International Children's Emergency Fund (UNICEF) revealed an estimated total number of 3.4 million children who have been physically or emotionally abused (UNICEF, 2019). Given the alarming rate of abused children in Ghana, the Ministries of Gender, Children and Social Protection and Local Government and Rural Development, in collaboration with UNICEF, launched a national campaign to protect children against abuse. This is because many children who suffered abuse did not report to their parents, guardians or authorities due to the fear of being stigmatized afterward (Gyesi, 2021).

In Ghana, there are safety net structures (SNS) in place to curb issues of child abuse. These are the Department of Social Welfare, Domestic Violence and Victim Support Unit of the Ghana Police Service, Commission on Human Rights and Administrative Justice (CHRAJ) and Ministry of Gender, Children and Social Protection. Besides, there are legal documents that seek to address child abuse cases in the country. These documents are relatively comprehensive legal framework for child protection guided by the 1992 Constitution and the Children's Act, 2010 (Act 560) which are all operational in the country (Ministry of Gender, 2019). Despite all these safety net structures put in place to deal with child abuse cases in Ghana, abuse issues are often not reported (Nyavi, 2019). In instances where cases are reported, they are reported late, making it almost impossible to save a situation. In February 2019, in Cape Coast, a boy of five years was wounded with a machete, and the arm had to be amputated at the Cape Coast Teaching Hospital when it was reported later by a concerned neighbor, (Gobah, 2019). Again, in September 2020, a 13-year-old boy jumped from a three-storey building at Ayekoo Ayekoo,

a suburb in Cape Coast and died in an attempt to escape beating (Ghanaweb, 2020). People in the neighborhood confirmed that the child was frequently beaten by the parents.

Most children find it difficult to disclose their experiences for fear of being ridiculed or victimized. This becomes a hindrance to them from receiving appropriate interventions (Hubert 2021). However, Lawken and Hansen (2022) revealed that child abuse cases were not reported due to lack of knowledge on the existence and functions of safety net structures. Tetteh and Markwei (2018) believe that child abuse cases go unreported for several reasons, including the fact that some forms of violence against children are socially accepted, tacitly disregarded, or not perceived as abusive. Nabila et al. (2021) in their study also indicated that the moral decadence in the various communities in recent times has made child abuse pervasive and practically condensed as usual. The non-disclosure of abuse by children continues to be a significant barrier to addressing the phenomenon in most societies (Boayire, 2022). Alaggia (2019) also reported on safety net structures ignorance and unawareness in the Greater Accra Region of Ghana. The findings show that disclosure of child abuse is multiply determined by a complex interplay of factors related to child characteristics, family environment, community influences and cultural and societal attitudes. Lack of resources and inadequate funding for the safety net structures could also hinder their efficacy (UNICEF, 2014). Regardless of the severe repercussions of abuse, most victims do not report abuse cases to the law enforcement agencies due to cultural beliefs and practices (Boakyire, 2022; Bridgewater, 2019; Fontes & Plummer, 2022).

The social-ecological model developed by Urie Bronfenbrenner in 1994 was used as a framework to explore the experiences of victims of child abuse in basic schools in Ghana. The model describes a person's development as being affected by everything in their surroundings. Bronfenbrenner, (2021) divided a person's environment into five different levels: the microsystem, the mesosystem, the ecosystem, the macrosystem, and the chronosystem. The

first three systems were adopted for this study. Microsystem is the most proximal ecological level which represents pupils and their immediate relations. Mesosystem represents the coordination between the child and the school with emphasis on teachers and counsellors. Ecosystem, is where individuals are involved but not directly embedded. This system represents the safety net structures and their policies.

The model posits that individuals are likely to have different experiences based on their ecological settings (Beckery 2022) The theory describes and explains how the child, family, peers and wider social factors impact the abuse of children (Irein , 2021). The experience of victims of child abuse among basic school pupils in Ghana is an interconnection of what happens within the society, neighbourhood/community setting and interpersonal relationships. Thus, to understand how children are abused in their environments, it is relevant to consider how individual and interpersonal relationships influence their experiences. Due to the fact that the context within which child abuse happens is heterogeneous, no single empirical theory has been able to explain the concept of child abuse (Madhavan , 2020). Several key concepts need to be considered in attempting to understand potential pathways that lead to abuse and neglect (Petersen, 2022).

A child's experience of abuse is dependent on what he or she is exposed to (Briggs & Hawkins, 2021). Hence, at the individual level, children's experiences of abuse in their social setting are likely to be determined by the social roles, behaviours, attitudes and beliefs developed over time (Curationis, 2021). The individual level also reflects strategies children develop in responding to their social world. At the interpersonal level, the family history, family structure as well as the educational background of children and the ability of their families to be able to meet their basic needs, influence their view of sexual abuse. These factors and many others can define the lived experiences of abused children in basic schools in Ghana.

This study seeks to explore the views of teachers, counsellors, and pupils on awareness and use of the safety net structures in Ghana. The present study will be exploring the factors responsible for child abuse and neglect among parent in New Biadan, Berekum Municipality.

1.2 Problem Statement

It is very unfortunate that most parents and caregivers do not know the difference between child discipline and child abuse. Parents and caregivers engage their wards in act like street hawking which they termed as child discipline. In the long run, these activities end up moulding and impacting negatively on the psyche of the child as a result of the tough experience that he/she was subjected to at a very young age when he/she is supposed to be in school for formal education. The child is also likely to come in contact with criminals in the process of hawking goods around the neighbourhoods who will in turn initiate him/her into the act of criminality.

In the traditional African society, the training of the child was the sole responsibility of the parents and the members of the community who had the right to discipline and correct the child whenever they went wrong. The parents trained the child in a way that is suitable and acceptable to the standard of the society. Following the advent of western education and the introduction of nursery and pre-primary schools, parents tend to give over the responsibility of guiding, directing, counselling and role modelling of the children to school to do what parents should in addition to their normal school function. Parents now push over the responsibility of caring for their children to the school. Many young children who would have been at home at about two years have been pushed over to the school. The task thus become enormous for the teachers and the school management to carry leading to many children being neglected, despised and abused on daily basis.

Berekum community most especially, New Biadan where this research aimed at beaming it searchlight is plagued with incidences of child labour, child maltreatment, child marriage, child trafficking, neglect and child prostitution. The effect of such abuses are many and varied

including teenage pregnancies; youth restiveness and violence, cultism, youth decadence, joblessness, arm bandits, molestations and school dropouts. This menace has eaten deep into the life of most Ghanaian Children.

It is gratifying to note that the convention on the Right of Child (CRC) have now been domesticated in New Biadan. However, the National Assembly should be serious in looking at this and other international laws especially issues that affect the rights and fundamental freedom of the child. Thus, the problem now is to effectively enforce and monitor the implementation of these provisions as they affect children's life and rights in New Biadan. These also presupposes that all social rights should be made justifiable in New Biadan so as to empower the less privileged in the society.

Research in social studies and psychology has shown that lack of resources: opportunities to work and leisure, opportunity to earn good and reasonable income for parents, ability to have access to good learning and access to good food and recreation can be responsible for a child's criminality. Other major factors that could be responsible for a child's criminality may include lack of decent housing and clean environment, suffering from health inequalities and living among people with indecent behaviour, questionable character and dubious lifestyle as well as living in a disadvantaged neighbourhood or overcrowded environment. In fact, these factors often work together to reinforce some of the social ills and adversities.

Consequently, where children experience several aspects of poverty and special inclusion, they become susceptible to behaviours that give room for the commission of serious crimes. For instance, children living in the slums and shanties of Sabo area of Abeokuta North Local Government may experience different health related problems more than those living in a more decent and desirable neighbourhood. Sometimes, poverty and social exclusions are transmitted throughout a child's lifetime, even so to the extent of passing it onto his offspring and across many generations for instance, leprosy and tuberculosis.

In a nutshell, economic status of family, parents or guidance as well as the environment has far reaching effects on the youth and development as well as survival of the children.

1.3 Objectives of the Study

1.3.1 General Objective

To explore the factors responsible for child abuse and neglect among parent in New Biadan, Berekum Municipality.

1.3.2 Specific Objectives

1. To determine the prevalence of child abuse and neglect among families in New Biadan
2. To explore how factors such as poverty, unemployment, and low educational levels among parents contribute to child abuse and neglect.
3. To assess the level of parental knowledge and awareness regarding child rights and the implications of abuse and neglect

1.4 Operational Definitions

Physical Abuse: Any intentional act causing injury or harm to a child by a parent or caregiver, including hitting, kicking, burning, or any other physical force causing bodily harm.

Emotional Abuse: Any behavior that harms a child's emotional well-being, including verbal abuse, threats, rejection, isolation, or exposure to domestic violence.

Neglect: Failure to provide for a child's basic needs, including food, shelter, clothing, medical care, education, supervision, and emotional support

Socioeconomic Status: Measured by parental income, education level, employment status, and household living conditions.

Parental Stress: Assessed through self-reported stress levels, coping mechanisms, and perceived social support.

Parenting Styles: Characterized by authoritarian, authoritative, permissive, or neglectful styles based on the Parenting Styles and Dimensions Questionnaire (PSDQ).

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

Although child abuse occurs in Ghana, it has received little attention. This is probably due to the emphasis placed on the more prevalent childhood problems of malnutrition and infection. Another possible reason is the general assumption that in every African society the extended family system always provides love, care and protection to all children. Yet there are traditional child rearing practices which adversely affect some children, such as purposeful neglect or abandonment of severely handicapped children, and twins or triplets in some rural areas. With the alteration of society by rapid socioeconomic and political changes, various forms of child abuse have been identified, particularly in the urban areas. These may be considered the outcome of abnormal interactions of the child, parents/ guardians and society. They include abandonment of normal infants by unmarried or very poor mothers in cities, increased child labour and exploitation of children from rural areas in urban elite families, and abuse of children in urban nuclear families by child minders. Preventive measures include provision of infrastructural facilities and employment opportunities in the rural areas in order to prevent drift of young population to the cities. This would sustain the supportive role of the extended family system which is rapidly being eroded. There is need for more effective legal protection for the handicapped child and greater awareness of the existence of child abuse in the community by health and social workers.

Every child despite his individual differences and uniqueness is to be considered of equal worth. He should therefore be entitled to equal social, economic, civil and political rights, so that he may fully realise his inherent potential and share equally in life (Gill, 2019).

Obviously, these values are rooted in the humanistic philosophy of any nation's declaration of independence. In accordance with these value premises therefore “any act of commission or

omission by individuals, institutions or the society as a whole, and any conditions which deprive children of equal rights and liberties and interfere with their optimal development, constitutes by definition abuse or neglectful acts or conditions” (Gill, 2019).

Child abuse is a significant contemporary community problem. Although children have been maltreated throughout history, our community has been silent in defence of abused children. Child abuse is not a phenomenon of the 20th Century nor is it unique to our society and culture alone. It has occurred throughout the recorded history of man. The future of any nation depends on its children and their capabilities. For this reason, they must be given a full chance.

The concept of child abuse has no specific definition as it varies from individuals, ethnic, religious and professional bodies. The practice of child abuse has manifested in all socio-economic classes, religion, ethnic and cultural groups. Child abuse is not a new social problem in history. There is considerable evidence to show that prior to the European industrial revolution and certainly during the period, there had been systematic abuse of children for both economic and ideological reasons. Since then, attempts have been made to seek an explanation to the problem and important ways of systematically controlling and preventing it as well as treating the victimized child. Despite the attempt and the considerable attention, the problem still remains in recent years, a largely neglected policy area, one in which it has not been possible to obtain any widespread understanding or agreement as to the steps that can be taken to combat it (Carballo, 2020). According to Carballo (2021), child abuse is generally defined as ‘any act of commission or in the case of neglect, omission that endangers or impairs a child’s physical, developmental and emotional wellbeing’. Child abuse encompasses physical, psychological and sexual abuse and neglect.

Portly (2020) stated that children who are physically abused are more likely to face a variety of emotional problems and children who are sexually abused exposed their genitals to their

parents, friends and strangers who engage in sexual acts with them or for pornographic purposes. Kimberly (2019) and Kempe (2020) reported that a child is vulnerable to extreme maltreatment such as child scolding, prostitution and labour. Female children who are between the ages of seven and thirteen years experience sexual abuse than male children. Some of these children live with their parents, step parents, single mothers with cohabiting male, abusive parents and substance abusive family member, who, out of aggression, abuse their own children (Villigrosia, 2022). Heyman and Slep (2022) observed that child abusers are likely to have experienced abuse themselves. Abusive behaviour is transmitted across generation with studies showing that some 30% of abused children became abusive parents. Children who experience abuse and violence may adopt the behaviour as a model for their own parenting, and parents who cannot differentiate between discipline and abuse also abuse their own children (Gelles, 2020) . The potential for maltreatment exists in all social strata and every family at some points in a child's development. There is no single explanation for child abuse. Child abuse results from a complex combination of personal, social and cultural factors. It can be caused by inter-generational transmission of violence, social isolation, low community involvement and types of families (Finkerly, 2021).

2.1 Forms of Child Abuse

Child abuse can be categorized into the followings:

Physical abuse

Physical neglect

Verbal abuse

Emotional/Psychological abuse

Street children

Child labour

Child abandonment

Sexual abuse.

The categories listed above are explained below:

2.2 Physical Abuse

Physical abuse involves physically harmful actions directed against a child. It involves any inflicted injuries such as bruises, burns, injuries, fractures, poisoning, striking, kicking or any other actions that result into a physical impairment of the child (Ross, 2019). Physical abuse of children can be intentional or unintentional. It can also be an act of omission or commission on the part of parents, elders or caretakers (David, 2022). Physical abuse could lead to severe injuries, bruises, burns, incapacitation, disability or even death. This physical violence may come as a result of lack of physical affection from parents in childhood.

2.3 Physical Neglect

Physical neglect can be defined as neglect of the physical appearance, nutritional, medical and safety needs of the child. It manifests in unkempt appearance, inappropriate dressing, anger, unbalance diet and non-immunization of children and ante-natal neglect which are aspects of the neglect (Olukoshi, 2019). Child neglect, most times, is unintentional (human reasoning demands that children should be taken care of), however, certain socio economic and cultural constraints may lead to the neglect (Ebigbo, 2021).

2.4 Verbal Abuses

This is another form of abuse which is often taken for granted by parents and guardians. Verbal abuse of children has been observed as having negative effects on psychological and emotional development of the child. It is the most commonly used form of abuse. Verbal

expressions make a child feel bad (about him or her) and this usually affects the esteem of the child (Patience, 2022).

2.5 Emotional/Psychological Abuses

Emotional/Psychological abuse usually starts with physical abuse and emotional neglect. Emotional neglect is a psychological internal perception (Brier, 2022).

The effect of emotional abuse can be crippling. They are usually diagnosed by psychiatrists and psychologists. Emotional abuse is an injury to a child's emotional psychological self which is meant to be punitive. It is experienced as a form of parental hostility in terms of terrorizing, rejections and insults. It manifests in forms of aggression, retreatism and general feelings of incompetence. Emotional neglect also comes in forms of emotional deprivation, lack of care, love and empathic attention towards a child (Patience, 2019).

2.6 Street Hawking

Street hawking by children is another form of abuse. Street hawking encourages sexual abuse. This may occur in three levels: exposure to overt genital seduction, exposure to genital stimulation and witnessing adults in the act of sex. Man may lure young female hawkers by buying up all their wares and giving them money. These girls may be shown pornographic pictures in magazines or pornographic video films or the sexual organs of the would be assailants (Ebigbo & Abaga, 2021).

2.7 Child Abandonment

This is another form of child abuse. Child abandonment is the most frequently reported form of child abuse and neglect. Most children involved are usually new born babies and those between the ages of 1-3 years. Children can be abandoned in gutters, pit latrines, on rubbish dumps in the bush or along pathways near places like police stations, hospitals e.t.c where they can be easily seen and cared for.

2.8 Child Labour

Child labour is a prominent way of abusing children. In the poorer parts of the world, like Asia, South America and Africa, acute and wide –spread poverty can be seen as the main cause. If children do not work, their own survival is at stake (ILO, 2019). In the African traditional Society, children were source of labour for farming. However, with the emergence of industrialization and urbanization, such practice becomes dysfunctional and contemporary; such practice is referred to as child labour (Ebigbo, 2021).

Child trafficking is particularly pernicious type of child labour. It is a practice through which young people below 18 years are handed over by either one or both parents or by a guardian to a third person, whether for free or with the intention of exploiting the person or the work of the young person.

2.9 Child Sexual Abuses

Sexual abuse is defined as ‘involving any minor child in the sexual gratification of an adult’.

Sexual abuse includes: oral to genital, genital to genital, rectal contacts and showing pornography to child or using a child in the production of pornographic films (Child Help USA, 2019). Sexual abuse most is commonly practiced by an individual known by the victim, parents or other family member. Rarely is the abuser a stranger. Intra familial and incest sexual abuse is difficult to document and manage because the child in an additional abuse is coerced not to tell or reveal the abuse while attempts are made to preserve the family unit (Child Help USA, 2020). Otesanya (2019), in discussing sexual abuse in Africa, argues that one has to be careful to take cultural peculiarities of the practices into cognizance. For example, some children get married as early as five years, though; sexual intercourse may not come up until she is around ten or twelve years of age, especially in the Northern part of Nigeria where there are several cases of forced marriages and giving out of female child as a gift for marriage.

2.10 The Relationship Between Child Abuse and Poverty

Using state-level data on the number of reports and substantiated cases of child maltreatment, Paxson and Waldfogel find more broadly that the socioeconomic status of families does affect levels of child abuse. Maltreatment encompasses a wide range of behaviour that harms children including neglect, physical abuse and other forms of abuse. Children with working mothers and absent fathers are more likely to be subjected to neglect and abuse. So are children with two non-working parents or parents whose income is below 75 percent of the official poverty level.

Paxson and Waldfogel find that increases in the fraction of children in extreme poverty result in increases in maltreatment. For example, if the fraction of children below 75 percent of the poverty line rises from 10 percent to 15 percent in a state, the number of total victims of maltreatment is estimated to rise by 22 percent.

Family structure and parental employment status matter as well. An increase from 10 percent to 15 percent in the fraction of children with a working mother and absent father is predicted to increase substantiated cases of maltreatment by 21 percent. Likewise, an increase from 10 percent to 15 percent in the fraction of children with two unemployed parents is expected to increase maltreatment by 26 percent. However, children with absent fathers and non-working mothers do not appear to be at higher risk for maltreatment than children with two working parents, or a working father and non-working mother.

Absent fathers, unemployed fathers and increased poverty are all associated with increased maltreatment. Poverty has a bigger impact on neglect than on physical abuse, though. If single mothers work, child maltreatment is considerably more likely, possibly because single working mothers are more neglectful or abusive, or because their children are left in the care of someone who is neglectful or abusive. A shift of 1 percent of children from the category of "absent father, non-working mother" to "absent father, working mother" is associated with an increase in

substantiated cases of physical abuse of 6.6 percent and an increase in neglect of 12.6 percent, the authors find.

This raises the issue of the impact of welfare benefit cuts on child maltreatment. Where welfare benefits are relatively high, mothers may be more able to stay home and look after their children.

2.11 Factors That Contribute to Child Abuse and Neglect

There is no single known cause of child maltreatment nor is there any single description that captures all families in which children are victims of abuse and neglect. Child maltreatment occurs across socio-economic, religious, cultural, racial, and ethnic groups. While no specific causes definitively have been identified that would lead a parent or other caregiver to abuse or neglect a child. Research has however recognized a number of risk factors or attributes commonly associated with maltreatment. Children within families and environments in which these factors exist have a higher probability of experiencing maltreatment. It must be emphasized, however, that while certain factors often are present among families where maltreatment occurs, this does not mean that the presence of these factors will always result in child abuse and neglect. The factors that may contribute to maltreatment in one family may not result in child abuse and neglect in another family. For example, several researchers note the relation between poverty and maltreatment, yet it must be noted that most people living in poverty do not harm their children. Professionals who intervene in cases of child maltreatment must recognize the multiple, complex causes of the problem and must tailor their assessment and treatment of children and families to meet the specific needs and circumstances of the family.

Risk factors associated with child maltreatment can be grouped in four domains:

- ❖ Parent or caregiver factors

- ❖ Family factors
- ❖ Child factors
- ❖ Environmental factors
- ❖ Protective factors

It is increasingly recognized that child maltreatment arises from the interaction of multiple factors across these four domains. The sections that follow examine risk factors in each category. Available research suggests that different factors may play varying roles in accounting for different forms of child maltreatment (physical abuse, sexual abuse, neglect, and psychological or emotional abuse).

A greater understanding of risk factors can help professionals working with children and families both to identify maltreatment and high-risk situations and to intervene appropriately. Assessment of the specific risk factors that affect a family may influence the prioritization of intervention services for that family (e.g., substance abuse treatment). Moreover, addressing risk and protective factors can help to prevent child abuse and neglect. For example, prevention programs may focus on increasing social supports for families (thereby reducing the risk of social isolation) or providing parent education to improve parent's age-appropriate expectations for their children.

2.12 Parent Or Caregiver Factors

Parent or caregiver factors potentially contributing to Child Abuse relate to:

- ❖ Personality characteristics and psychological well-being
- ❖ History of maltreatment
- ❖ Substance abuse
- ❖ Attitudes and knowledge
- ❖ Age

2.13 Personality Characteristics and Psychological Wellbeing

No consistent set of characteristics or personality traits has been associated with maltreating parents or caregivers. Some characteristics frequently identified in those who are physically abusive or neglectful include low self-esteem, an external locus of control (i.e., belief that events are determined by chance or outside forces beyond one's personal control), poor impulse control, depression, anxiety, and antisocial behaviour. While some maltreating parents or caregivers experience behavioural and emotional difficulties, severe mental disorders are not common.

2.14 Attitudes And Knowledge

Negative attitudes and attributions about a child's behaviour and inaccurate knowledge about child development may play a contributing role in child maltreatment (NRC, 2019). For example, some studies have found that mothers who physically abuse their children have both more negative and higher than normal expectations of their children, as well as less understanding of appropriate developmental norms (Black et al, 2019). Not all research, however, has found differences in parental expectations (Milner & Dopke, 2019).

Age

Caretaker age may be a risk factor for some forms of maltreatment, although research findings are inconsistent (NRC, 2019). Some studies of physical abuse, in particular, have found that mothers who were younger at the birth of their child exhibited higher rates of child abuse than did older mothers (Black, 2020). Other contributing factors, such as lower economic status, lack of social support, and high stress levels may influence the link between younger childbirth - particularly teenage parenthood and child abuse (Buchholz,2021).

Family Factor

Specific life situations of some families such as marital conflict, domestic violence, single parenthood, unemployment, financial stress, and social isolation may increase the likelihood of maltreatment. While these factors by themselves may not cause maltreatment, they frequently contribute to negative patterns of family functioning.

Family Structure

Children living with single parents may be at higher risk of experiencing physical and sexual abuse and neglect than children living with two biological parents (Sedlak et al, 2021). Single parent households are substantially more likely to have incomes below the poverty line.

Lower income, the increased stress associated with the sole burden of family responsibilities, and fewer supports are thought to contribute to the risk of single parents maltreating their children. A strong, positive relationship between the child and the father, whether he resides in the home or not, contributes to the child's development and may lessen the risk of abuse.

In addition, studies have found that compared to similar non-neglecting families, neglectful families tend to have more children or greater numbers of people living in the household (Sedlak, 2017). Chronically neglecting families often are characterized by a chaotic household with changing constellations of adult and child figures (e.g., a mother and her children who live on and off with various others, such as the mother's mother, the mother's sister, or a boyfriend) (Polansky, 2021).

2.14 Marital Conflict and Domestic Violence

According to published studies, in 30 to 60 percent of families where spouse abuse takes place, child maltreatment also occurs (Edelson, 2020). Children in violent homes may witness parental violence, may be victims of physical abuse themselves, and may be neglected by parents who are focused on their partners or unresponsive to their children due to their own fears (NCCAN, 2019). A child who witnesses parental violence is at risk for also

being maltreated, but, even if the child is not maltreated, he or she may experience harmful emotional consequences from witnessing the parental violence.

Parent – Child Interaction

Families involved in child maltreatment seldom recognize or reward their child's positive behaviors, while having strong responses to their child's negative behaviours (Garbarino, 2020). Maltreating parents have been found to be less supportive, affectionate, playful, and responsive with their children than parents who do not abuse their children. Research on maltreating parents, particularly physically abusive mothers, found that these parents were more likely to use harsh discipline strategies (e.g., hitting, prolonged isolation) and verbal aggression and less likely to use positive parenting strategies (e.g., using time outs, reasoning, and recognizing and encouraging the child's success) (Black, 2020).

Child Factors

Children are not responsible for being victims of maltreatment. Certain factors, however, can make some children more vulnerable to maltreating behaviour. The child's age and development - physical, mental, emotional, and social - may increase the child's vulnerability to maltreatment, depending on the interactions of these characteristics with the parental factors previously discussed.

Disabilities

Children with physical, cognitive, and emotional disabilities appear to experience higher rates of maltreatment than do other children. A national study, completed in 2019, found that children with disabilities were 1.7 times more likely to be maltreated than children without disabilities (Crosse et al, 2019). To date, the full degree to which disabilities precede or are a result of maltreatment is unclear.

In general, children who are perceived by their parents as “different” or who have special needs - including children with disabilities, as well as children with chronic illnesses or children with difficult temperaments - may be at greater risk of maltreatment (Rycus, 2019). The demands of caring for these children may overwhelm their parents. Disruptions may occur in the bonding or attachment processes, particularly if children are unresponsive to affection or if children are separated by frequent hospitalizations (Ammerman, 2020). Children with disabilities also may be vulnerable to repeated maltreatment because they may not understand that the abusive behaviours are inappropriate, and they may be unable to escape or defend themselves in abusive situations (Steinberg 2021). Some researchers and advocates have suggested that some societal attitudes, practices, and beliefs that devalue and depersonalize children with disabilities sanction abusive behaviour and contribute to their higher risk of maltreatment (Steingberg, 2021). For instance, there may be greater tolerance of a caregiver verbally berating or physically responding to a disabled child's inability to accomplish a task or act in an expected way than there would be if similar behaviour was directed at a normally abled child.

Environmental Factors

Environmental factors are often found in combination with parent, family, and child factors, as highlighted in previous sections of this chapter. Environmental factors include poverty and unemployment, social isolation, and community characteristics. It is important to reiterate that most parents or caregivers who live in these types of environments are not abusive.

Poverty And Unemployment

Poverty and unemployment show strong associations with child maltreatment, particularly neglect (Drake and Pandey, 2021). The NIS-3 study, for example, found that children from families with annual incomes below \$15,000 in 1993 were more than 22 times more likely to

be harmed by child abuse and neglect as compared to children from families with annual incomes above \$30,000 (Sedlack and Broadhurst, 2021). It is important to underscore that most poor people do not maltreat their children. However, poverty - particularly when interacting with other risk factors such as depression, substance abuse, and social isolation - can increase the likelihood of maltreatment. In 2019, 85 percent of States identified poverty and substance abuse as the top two problems challenging families reported to child protective service (CPS) agencies (NCCANI, 2020).

Rod Plotnik, emeritus professor, Department of Psychology, San Diego State University, describes several theories related to the association between poverty and maltreatment, all of which may hold some truth. One theory is that low income creates greater family stress, which, in turn, leads to higher chances of maltreatment. A second theory is that parents with low incomes, despite good intentions, may be unable to provide adequate care while raising children in high-risk neighbourhoods with unsafe or crowded housing and inadequate day care. A third theory is that some other characteristics may make parents more likely to be both poor and abusive. For example, a parent may have a substance abuse problem that impedes the parent's ability to obtain and maintain a job, which also may contribute to abusive behaviour. A final theory is that poor families may experience maltreatment at rates similar to other families, but that maltreatment in poor families is reported to CPS more frequently, in part because they have more contact with and are under greater scrutiny from individuals who are legally mandated to report suspected child maltreatment (Buukin, 2020).

2.16 Social Isolation and Social Support

Some studies indicate that compared to other parents, parents who maltreat their children report experiencing greater isolation, more loneliness, and less social support (Handond, 2020). Social isolation may contribute to maltreatment because parents have less material and emotional support, do not have positive parenting role models, and feel less pressure to

conform to conventional standards of parenting behaviours (Harrington et al, 2021). It is not clear, however, whether social isolation in some cases precedes and serves as a contributing factor to maltreatment or whether it is a consequence of the behavioural dynamics of maltreatment (Chalk and King, 2022).

Violent Communities

Children living in dangerous neighbourhoods have been found to be at higher risk than children from safer neighbourhoods for severe neglect and physical abuse, as well as child sexual victimization (Cicchetti, 2021). Some risk may be associated with the poverty found in dangerous neighbourhoods; however, concerns remain that violence may seem an acceptable response or behaviour to individuals who witness it more frequently.

Societal attitudes and the promotion of violence in cultural norms and the media have been suggested as risk factors for physical abuse (Garbarino, 2021). In addition, while the research is controversial, some studies show a positive relationship between televised violence and aggressive behaviours, particularly for individuals who watch substantial amounts of television (Jason, 2020)

Protective Factors

Just as there are factors that place families at risk for maltreating their children, there are other factors that may protect them from vulnerabilities - factors that promote resilience. In general, research has found that supportive, emotionally satisfying relationships with a network of relatives or friends can help minimize the risk of parents maltreating children, especially during stressful life events (Quinton, 2020). For example, parents who were abused as children are less likely to abuse their own children if they have resolved internal conflicts and pain related to their history of abuse and if they have an intact, stable, supportive, and non abusive relationship with their partner (Hawkes, 2021). Additionally, programs on marriage education and enhancement may provide a roadmap of expected

challenges such as the birth of the first child, parenting adolescents, and common gender differences which may act as a protective factor by strengthening families (Stanley, 2022).

Consequences Of Child Abuse

The consequences of child maltreatment can be profound and may endure long after the abuse or neglect occurs. The effects can appear in childhood, adolescence, or adulthood, and may affect various aspects of an individual's development (e.g., physical, cognitive, psychological, and behavioral). These effects range in consequence from minor physical injuries, low self-esteem, attention disorders, and poor peer relations to severe brain damage, extremely violent behavior, and death (NRC, 2020).

While substantial evidence exists for the negative consequences of maltreatment, practitioners should be aware of the limitations of current research. First, many research efforts have studied the effects of child maltreatment among individuals from lower socioeconomic backgrounds, prison populations, mental health patients, or other clinical populations who may exhibit the most serious behavior problems and whose families often have had many other problems (e.g., poverty, parental substance abuse, domestic violence). Further, many early studies examining consequences did not compare outcomes among maltreated individuals with outcomes among individuals who had not experienced maltreatment. In addition, studies often rely on official records or self-reporting of current or past child maltreatment, both of which may undercount the true prevalence of maltreatment. Finally, the nature and extent of maltreatment are different for each child and family, and these differences may influence the consequences.

Despite the above challenges, it is still possible to identify effects that have been more commonly associated with individuals who have experienced abuse and neglect. These effects are discussed in the sections that follow as they relate to three overlapping areas:

- Health and physical effects

- Intellectual and cognitive development
- Emotional, psychological, and behavioural consequences

While maltreated children have a higher risk of certain problems, it cannot be concluded that any given consequence will always occur. Not all children who have been maltreated will suffer severe consequences. A number of factors may influence the effects of maltreatment, including the child's age and developmental status at the time of the maltreatment, as well as the type, the frequency, the duration, and the severity of the maltreatment and co-occurring problems (Gelles,). In addition, research has identified certain protective factors that mediate the effects of maltreatment. These protective factors and a child's resilience to negative consequences are addressed later in this research.

Health And Physical Effects

Health and physical effects can include the immediate effects of bruises, burns, lacerations, and broken bones and also longer-term effects of brain damage, haemorrhages, and permanent disabilities. Negative effects on physical development can result from physical trauma (e.g., blows to the head or body, violent shaking, scalding with hot water, or asphyxiation) and from neglect (e.g., inadequate nutrition, lack of adequate motor stimulation, or withholding medical treatments). Specific physical effects as they relate to the early brain development of infants are highlighted in the following sections, along with some general health problems associated with maltreatment.

Physical Effects On Infants

Infants and young children are particularly vulnerable to the physical effects of maltreatment. Shaking an infant may result in bruising, bleeding, and swelling in the brain. The health consequences of “shaken baby syndrome” can range from vomiting or irritability to more severe effects such as respiratory distress, seizures, and death (Conway, 2018). Other possible consequences include partial loss of vision or blindness, learning disabilities, mental retardation, cerebral palsy, or paralysis (Conway, 2019).

Infants who have been neglected and malnourished may experience a condition known as “nonorganic failure to thrive”. With this condition, the child's weight, height and motor development fall significantly below age-appropriate ranges with no medical or organic cause. The death of the child is the end result in extreme cases. Nonorganic failure to thrive can result in continued growth retardation as well as cognitive and psychological problems (Wallace, 2012). Even with treatment, the longterm consequences can include continued growth problems, diminished cognitive abilities, retardation, and socio-emotional deficits such as poor impulse control.

Effects On Brain Development

Over the last decade, researchers have enhanced the field's understanding of the adverse effects of maltreatment on early brain development. Recent brain research has established a foundation for the neurobiological explanations for many of the physical, cognitive, social, and emotional difficulties exhibited by children who experienced maltreatment in their early years.

One explanation begins with the link between chronic physical abuse, sexual abuse, or neglect and the chronic stress it typically causes in a young child. In reaction to this persistent stress associated with ongoing maltreatment, the child's brain may strengthen the pathways among neurons that are involved in the fear response. As a result, the brain may become “wired” to

experience the world as hostile and uncaring. This negative perspective may influence the child's later interactions, prompting the child to become anxious and overly aggressive or withdrawn (Perry et al, 2019).

Research shows that maltreatment also may inhibit the appropriate development of certain regions of the brain. A neglected infant or young child, for example, may not be exposed to stimuli that would activate important regions of the brain and strengthen cognitive pathways. Consequently, the connections among neurons in these inactivated regions can literally wither away, hampering the individual's later functioning. If the regions responsible for emotional regulation are not activated, the child may have trouble controlling his or her emotions and behaving or interacting appropriately (e.g., impulsive behaviour, difficulties in social interactions, or a lack of empathy) (Greenough , 2019).

Other Health Related Problem

Maltreatment may affect an individual's health in a number of direct and indirect ways. Victims of sexual abuse, for example, may become infected with sexually transmitted diseases including syphilis and human immunodeficiency virus (HIV). Studies have found that women who had experienced sexual abuse were more likely to experience ongoing health problems such as chronic pelvic pain and other gynaecologic problems, gastrointestinal problems, headaches, and obesity (Moeller, 2020). Recent research suggests that adults who were maltreated as children show higher levels of many health problems not typically associated with abuse and neglect - heart disease, cancer, chronic lung disease, and liver disease (Felitti et al, 2020). The link between maltreatment and these diseases may be depression, which can influence the immune system and may lead to higher risk behaviours such as smoking, alcohol and drug use, and overeating (Felitti, 2020).

What Can Be Done to Prevent Child Abuse And Neglect

The seriousness of the effects of maltreatment underscores the importance for professionals, along with concerned community members, to help prevent child maltreatment. To break the cycle of maltreatment, communities across the country must continue to develop and implement strategies that prevent abuse or neglect from happening. While experts agree that the causes of child abuse and neglect are complex, it is possible to develop prevention initiatives that address known risk factors. This chapter provides an overview of prevention as a strategy, differentiates the various types of prevention activities, describes major prevention program models, and presents the roles of various sectors in prevention efforts.

Prevention As a Strategy

Prevention efforts most commonly occur before a problem develops so that the problem itself, or some manifestation of the problem, can be stopped or lessened (Willis, 2020). Child abuse and neglect prevention covers a broad spectrum of services - such as public awareness, parent education, and home visitation - for audiences ranging from the general public to individuals who have abused or neglected a child. Community groups, social services agencies, schools, and other concerned citizens may provide these services. Typically, prevention activities attempt to deter predictable problems, protect existing states of health, and promote desired life objectives (Glow, 2021). More specifically, family support services, a major component of child abuse prevention, are designed to strengthen and stabilize families, increase parental abilities, provide a safe and stable family environment, and enhance child development.

To prevent child abuse and neglect, programs may focus on one or several risk factors discussed in 2.4, “Factors That Contribute to Child Abuse and Neglect” For example, prevention programs may include:

- Substance abuse treatment programs for women with children;
- Respite care programs for families with children who have disabilities;
- Parent education programs and support groups for families affected by domestic violence.

Many prevention programs also focus efforts on strengthening child and family protective factors such as the knowledge and skills children need to help protect themselves from sexual abuse, the promotion of positive interactions between children and parents, and the knowledge and skills parents need to raise healthy, happy children.

Types of Prevention Activities

Child abuse and neglect prevention activities generally occur at three basic levels:

- Primary, or universal, prevention activities are directed at the general population with the goal of stopping the occurrence of maltreatment before it starts.
- Secondary, or selective, prevention activities focus on families at high risk of maltreatment to alleviate conditions associated with the problem.
- Tertiary, or indicated, prevention activities direct services to families where maltreatment has occurred to reduce the negative consequences of the maltreatment and to prevent its recurrence.

Primary Or Universal Prevention

Primary prevention includes activities or services available to the general public. Frequently such activities aim to raise awareness among community members, the public, service providers, and decision-makers about the scope and problems associated with child maltreatment. For example:

- Public awareness campaigns informing citizens how and where to report suspected child abuse and neglect;
- Public service announcements on the radio or television encouraging parents to use nonviolent forms of discipline.

These types of programs are particularly popular during April, which is designated by presidential proclamation as Child Abuse Prevention Month. Other primary prevention efforts focus on support services available to the general population, such as paediatric care for all children, childcare, or parent education classes.

Secondary Or Selective Prevention

Secondary prevention activities focus efforts and resources on children and families known to be at higher risk for maltreatment. Several risk factors such as substance abuse, young maternal age, developmental disabilities, and poverty are associated with child maltreatment. Programs may direct services to communities or neighbourhoods that have a high incidence of one or several risk factors. Examples of secondary prevention programs include the following:

- Parent education programs located in high schools for teen mothers;
- Substance abuse treatment programs for parents with young children;
- Respite care for families who have children with special needs;
- Family resource centres offering information and referral services to families living in low-income neighbourhoods.

Family support activities that are available to individuals identified as at risk or community members in a high-risk neighbourhood also are considered secondary prevention. For example, local hospitals or community organizations may offer prenatal care and parenting

classes to new or expectant parents. Local agencies may provide home visitation services for at risk families with infants and young children. Family support services are intended to assist parents in creating safe home environments and fostering healthy children.

Tertiary Or Indicated Prevention

Tertiary prevention activities focus efforts on families in which maltreatment has already occurred. The goal of these programs is to prevent maltreatment from recurring and to reduce the negative consequences associated with maltreatment (e.g., social-emotional problems in children, lower academic achievement, decreased family functioning). These prevention programs may include services such as:

- Intensive family preservation services with trained mental health counsellors available to families 24 hours per day for several weeks;
- Parent mentor programs with stable, non abusive families acting as “role models” and providing support to families in crisis;
- Mental health services for children and families affected by maltreatment to improve family communication and functioning.

A combination of primary, secondary and tertiary prevention services are necessary for any community to provide a full continuum of services to deter the devastating effects of child maltreatment.

Major Prevention Program Models

Many popular prevention programs are patterned after one of four models:

- Public awareness activities
- Parent education programs
- Skills-based curricula for children

- Home visitation programs

Public Awareness Activities

Public awareness activities are an important part of an overall approach to addressing child abuse and neglect. The purpose of public awareness activities is to raise community awareness of child abuse and neglect as a public issue and to provide the public with information about available resources and solutions. Such activities have the potential to reach diverse community audiences: parents and prospective parents, children, and community members, including professionals, who are critical to the identification and reporting of abuse.

In designing prevention education and public information activities, national, State, and local organizations use a variety of media to promote these activities, including:

- Public service announcements
- Press releases
- Posters
- Information kits and brochures
- Television or video documentaries and dramas

Through these media, communities are able to promote support for healthy parenting practices, child safety skills, and protocols for reporting suspected maltreatment.

Parent Education Programs

Parent education programs focus on enhancing parental competencies and promoting healthy parenting practices and typically target teen and highly stressed parents. Some of these programs are led by professionals or paraprofessionals, while others are facilitated by parents

who provide mutual support and discuss personal experiences. These programs address issues such as:

- ❖ Developing and practicing positive discipline techniques;
- ❖ Learning age-appropriate child development skills and milestones;
- ❖ Promoting positive play between parents and children;
- ❖ Locating and accessing community services and supports.

Parent education programs are designed and structured differently, usually depending on the curriculum being used and the target audience. Programs may be short-term (i.e., those offering classes once a week for 6 to 12 weeks) or they may be more intensive (i.e., those offering services more than once a week and for up to 1 year). Popular parent education programs include:

- ❖ Parents as Teachers - visit www.patnc.org for more information;
- ❖ Every Person Influences Children (EPIC) - visit www.epicforchildren.org for more information;
- ❖ The Nurturing Parenting Program - visit www.nurturingparenting.com for more information.

In addition to parent education programs, mutual support groups also may strengthen families and help prevent child maltreatment. For example, Parents Anonymous affiliates work within their communities and States to provide support and resources to overwhelmed families struggling to cope with everyday stresses and strains.

Skills - Based Curricula for Children

Many schools and local community social service organizations offer skills-based curricula to teach children safety and protection skills. Most of these programs focus efforts on preventing

child sexual abuse and teaching children to distinguish appropriate touching from inappropriate touching. Many curricula have a parent education component to give parents and other caregivers the knowledge and skills necessary to recognize and discuss sexual abuse with their children. Curricula may use various methods to teach children skills including:

1. Workshops and school lessons
2. Puppet shows and role-playing activities
3. Films and videos
4. Workbooks, storybooks, and comics

Examples of skills-based curricula include programs such as Talk about Touching, Safe Child, Reach, Recovery, Challenge, Good Touch/Bad Touch, Kids on the Block, and Illusion theatre.

Home Visitation Programs

Home visitation programs that emphasize the health and well-being of children and families have existed in the United States since the late 19th century. Organizations and agencies in fields as varied as education, maternal and child health, and health and human services, use home visitation programs to help strengthen families. Home visitation programs offer a variety of family-focused services to pregnant mothers and families with newborns. Activities encompass structured visits in the family's home, informal visits, and telephone calls. Topics addressed through these programs often include:

- Positive parenting practices and nonviolent discipline techniques;
- Child development;
- Maternal and child health issues;
- Accessing available social services;

- Establishing social supports and networks;
- Learning to advocate for oneself, one's child, and one's family;
- Preventing accidental childhood injuries through the development of a safe home environment.

Recent evaluations suggest that both short and long-term positive outcomes may occur for mothers and children receiving home visitation services. During a two-year period, nurses provided home visitation services to a group of poor, unmarried, teen mothers in Elmira, New York. Only 4 percent of the nurse-visited families had verified reports of child abuse and neglect compared to 19 percent of the families who did not receive home visits by nurses (Bekaley , 2022). A follow-up study further supported these positive results: the number of verified reports of child maltreatment for the nurse-visited group of mothers was nearly half that of mothers who did not receive home visitation services during the next 15 years (Eckenrode, 2019). Additional positive outcomes among nurse-visited mothers included lower levels of smoking, fewer and better-spaced subsequent pregnancies, and more months working, as well as fewer emergency room visits by children for injuries. Several studies of home visitation programs using nonmedical professionals also showed a significantly lower number of verified maltreatment reports for home-visited mothers (McCurdy, 2023).

Role of Various Entities in Prevention Efforts

Prevention programs typically are administered through specific entities, based on an area of interest or professional expertise. Increasingly, health care providers, community organizations, social services agencies, schools, the faith community, and employers are becoming involved in the wellbeing of children and families. All members of the community are working together to prevent child maltreatment and ensure the health and safety of children

and families. The following sections describe how these organizations are providing prevention services to strengthen and support families.

Health Care Providers

Health care providers are in a unique position to assist in the prevention of child maltreatment. These professionals have routine access to children and families by providing regular appointments, immunizations, and interventions to common illnesses. Activities that promote the health of children and their parents and contribute to the prevention of child maltreatment include:

- Prenatal health care that improves pregnancy outcomes and health among new mothers and infants;
- Early childhood health care that supports normal development and the health of young children;
- Family-centered birthing and perinatal coaching that strengthens early attachment between parents and their children;
- Home health visitation that provides support, education, and community linkages for new parents;
- Support programs that assist parents of children with special health and developmental problems.

Primary care providers emphasize the prevention of disease and the promotion of health and well-being. With this foundation, they have a natural role in the prevention of child abuse and neglect.

Community – Based Organisations

Many community organizations offer a wide range of services for children and families. Boys and Girls Clubs, scouting troops, and local YMCA/YWCAs provide social and recreational opportunities for children and families. Community centres, food banks, emergency assistance programs, and shelters offer various family support services to increase family resources and decrease stress. Exchange Clubs, fraternal organizations, advocacy groups, and ethnic, cultural, and religious organizations also support child maltreatment prevention activities.

Specific examples of prevention activities found within community-based organizations include:

- Self-help and mutual aid groups that provide non judgmental support and assistance to troubled families;
- Natural support networks that provide families with informal helpers and community resources;
- Child and respite care programs that reduce the stress parents experience and provide positive modelling for parents and children.

Many grassroots efforts develop dynamic partnerships of professionals, businesses, faith-based organizations, concerned citizens, and other groups interested in creating prevention efforts that address the needs of their community.

Social Services Agencies

Increasingly, social service agencies and professionals are expanding their focus to include programs that prevent family problems from escalating to abuse or neglect. Effective social service initiatives for strengthening families and preventing child maltreatment include:

- Parent education services, which help parents to develop adequate childrearing knowledge and skills;
- Parent aide programs, which provide supportive, one-on-one relationships for parents;
- Crisis and emergency services, which support parents and children at times of exceptional stress or crisis;
- Treatment for abused children, which prevents an intergenerational repetition of family violence.

As State and local social service agencies examine new ways of “doing business”, many are pooling resources to provide more prevention services.

CHAPTER THREE

RESEARCH METHODOLOGY

3.0 Introduction

This chapter deals with the study area, study population, study design, sampling technique and sample size, data collection method and instrument, data analysis techniques, ethical consideration and the limitations of the study.

3.1 Study area

This research was conducted at New Biadan, a town in the Berekum East Municipality. The general population of New Biadan pegged at about 1500. The community is endowed with three (3) primary schools and two (2) Junior high school and a Senior High School.

Most of the inhabitants are engaged in farming activities and also petty trading. There is a health facility in the area, however there are pharmacies and over-the-counter shop in the area. Due to the nature of the health facility in the vicinity most inhabitants visit Holy Family Hospital, Berekum for health aid. The hospital is about 1.5km from New Biadan. There is portable water in the area being supplied by Ghana Water Company.

The community has refuse dump where waste products are been deposited to ensure good sanitation, a KVIP in the area where people attend nature's call and also there is electricity supply in the community.

For healthcare services, the municipality has two hospitals, a health centre, seven rural clinics, seven maternity homes, seven private clinics, and three Community Health Planning Services (CHPS) (BMA, 2019).

3.2 The study population

This refers to “all elements that meet certain criteria for inclusion in a study”(Grove,

2015). In this research, the study target population consisted of the people in New Biadan and the accessible population consisted of the parents selected randomly at New Biadan with difference in age, marital status and religious affiliation and this had no effect on the study.

3.3 Study design

A descriptive cross-sectional design will be adopted for the study. This design has been chosen because of its appropriateness for the purpose of the study. The descriptive survey design is suitable for describing the way things are. Moreover, cross sectional study design is used to prove or disprove assumptions, not costly to perform, does not require a lot of time, captures a specific point in time and the data can be used for various types of research (Rivers & Wilson, 2020).

3.4 Sampling technique and size

It is the name or other identification of the specific process by which the entities of the sample have been selected. A purposive sampling under non-probability method was employed to choose 150 of parents. Advantages of using this sampling method is that it gives nearest accurate results and with small resources, you will get more data. On the other hand the disadvantages of using this methods is that sometime the sampling method may be unsuitable and also limited knowledge may mislead the results.

A sample size of 150 parents in New Biadan of both males and females were selected since they have experience in teaching and learning styles.

3.5 Data collection methods and instruments

Written questionnaires with both open and close ended questions based on demographic characteristics and study objectives will be used to collect data from the respondents. Structured questionnaire will be administered to participants after consent has been sought. The questionnaire will be cross checked for accuracy. The answered questionnaire will be kept in

files and safely stored until they are analyzed. Respondents will be required to completely answer the questionnaire using a maximum of 20 minutes.

3.6 Data analysis technique

All returned questionnaires will be checked for missing data. Questionnaires that will be left blank or half-filled will be excluded. Data will be entered and analyzed using the statistical package for social sciences (version 21; SPSS) and results will be presented in the form of frequencies and percentages.

3.7 Ethical consideration

The research team believed that maintaining the confidentiality and anonymity of the participants is crucial to this study hence the identities of the participants will not be disclosed, and only aggregate data will be reported. Participants will be informed about their right to withdraw or refuse to be part of the study at any point in the course of the interview and that would not affect them negatively and will be assured of confidentiality of all information that will be obtained. Informed consent will be obtained after comprehensive explanation of the purpose and procedure of the study to the participants.

3.8 Limitations of the Study

The study likely relies on self-reported data from parents, which can be influenced by social desirability bias. Parents may under report or over report certain behaviors or experiences, leading to inaccurate or incomplete data.

If the sample size is small or not diverse enough, the findings may not be generalizable to the broader population. The study may only reflect the experiences of a specific group of parents in New Biadan, limiting its applicability to other regions or communities.

3.9 Delimitations of the Study

The study is restricted to a sample of parents, which might be determined by convenience sampling, time constraints, or resource availability. This may limit the generalizability of the findings to the entire population of parents in New Biadan.

The study focuses specifically on parents residing in New Biadan. Other caregivers, such as grandparents, guardians, or foster parents, are not included in the scope of this research.

CHAPTER FOUR

RESULTS, ANALYSIS AND FINDINGS

4.0 Introduction

This chapter deals with the presentation and analysis of data from the field work which is the most important aspect of the research work. The simple designed and well-structured exploring the factors responsible for child abuse and neglect among parents. A study at New Biadan in the Berekum East Municipality". A total of 150 questionnaires were distributed to the residents within the metropolis but only 140 questionnaires were returned.

These encompass socio-demographic characteristics of frequencies and proportions serves as the bedrock for addressing specific research objectives, allowing for a better understanding of the multifaceted landscape under investigation.

4.1 Demographic Data of Respondents

Age distribution of respondents

Table 1 shows the age distribution of the respondents as expressed in percentage.

Age	Frequency	Percentage (%)
20 – 25	30	21.4
26 – 30	36	25.7
31- 40	60	42.9
Above 40	14	10
Total	140	100

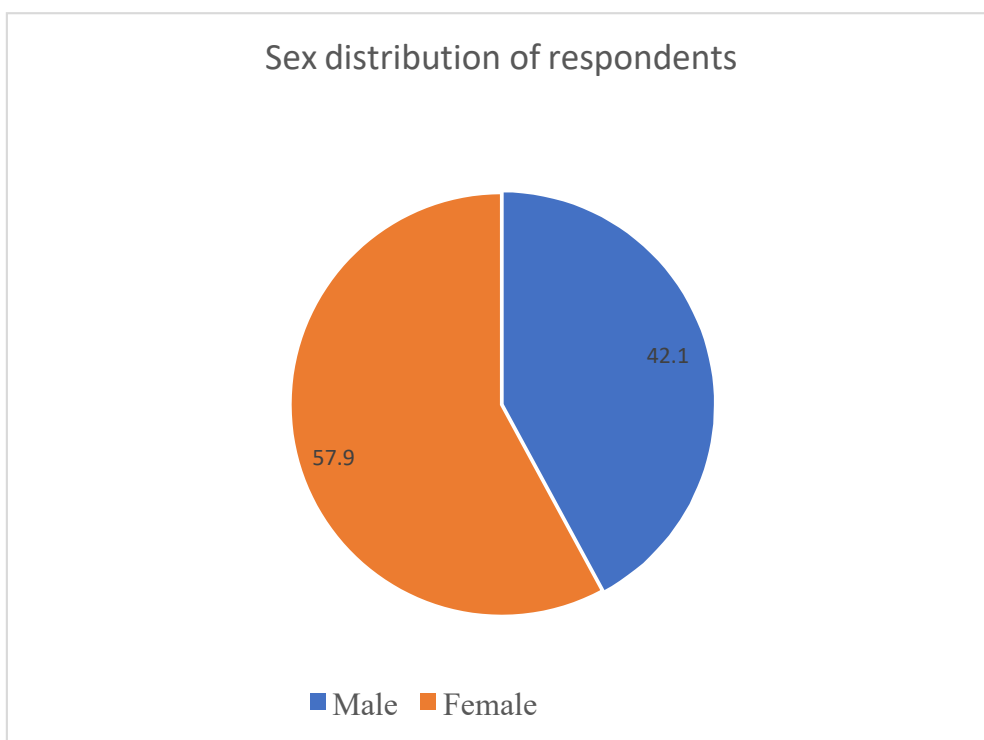
The table presents the distribution of respondents according to their ages. The table shows that 30 parents who constitute 21.4% were between the ages of 20-25years, 36 parents who were between the ages of 26-30, 60 parents who constitute 25.7% were between the ages of 26-30years, while 14 parents who constitute 10% were between the ages above 40.

Sex distribution of respondents

Table 2 shows the gender distribution of the respondents as expressed in percentage.

Sex	Frequency	Percentage (%)
Male	59	42.1
Female	81	57.9
Total	140	100

The table presents the distribution of respondents according to their sex. The table shows that 59 parents who constitute 42.1 were males, while 81 respondents who constitute 57.9% are females. This represents the sample that covers all gender categories.



The figure presents the distribution of respondents according to their sex. The figure shows that 59 parents who constitute 42.1 were males, while 81 respondents who constitute 57.9% are females. This represents the sample that covers all gender categories.

Ethnicity distribution of respondents

Table 3 shows the ethnicity distribution of respondents as expressed in percentage.

Ethnic group	Frequency	Percentage (%)
Akan	100	71.4
Ewe	18	12.9
Hausa	14	10
Ga	8	5.7

Total	140	100
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The table represents the distribution of respondents according to their ethnicity. The table shows that 100 parents who constitute 71.4% were Akan by ethnicity, 18 parents who were between 12.9% were Ewe by ethnicity, 14 parents who constitute 10% were Hausa by tribe while 8 parents who constitute 5.7% were Ga by ethnicity.

Religion distribution of respondents

Table 4 shows the religion distribution of the respondents as expressed in percentage.

Religion	Frequency	Percentage (%)
Islam	32	22.9
Christianity	98	70
Traditionalist	10	7.1
Total	140	100

The table below represents the distribution of respondents according to their religion. The table shows that 32 parents who constitute 22.9% were muslims, 98 parents who were between 70% were Christians, 10 parents who constitute 7.1% were Traditionalist.

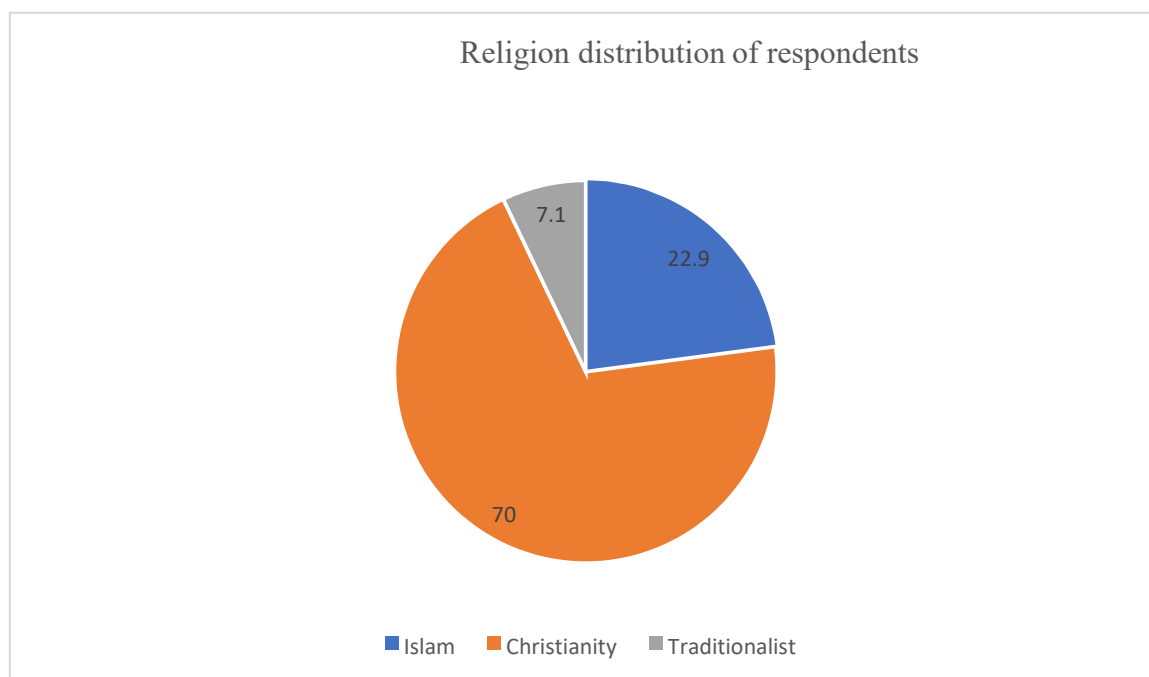
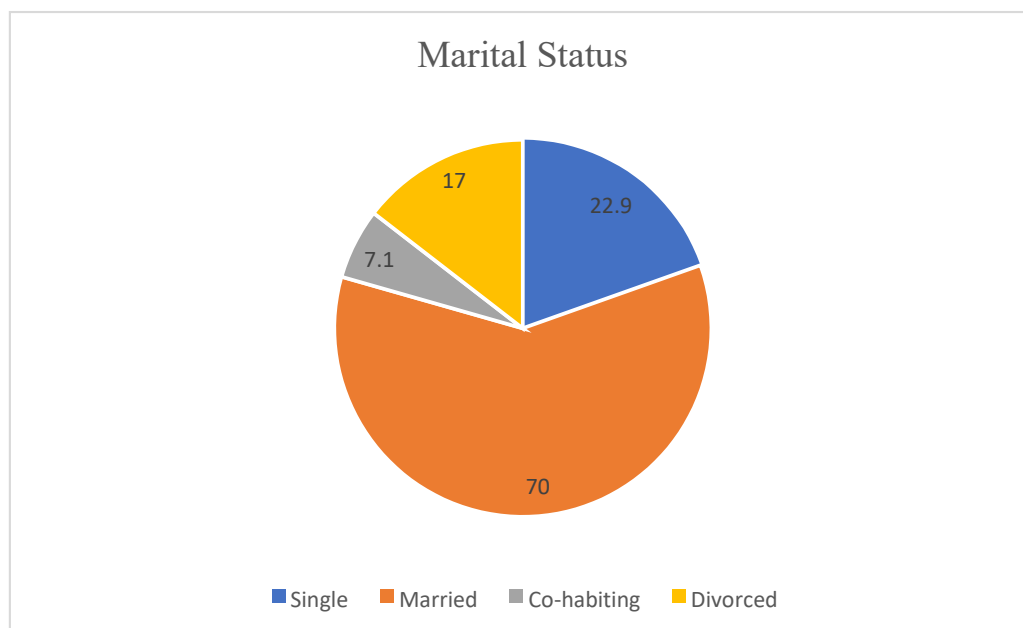


Table 5 shows the marital status distribution of the respondents as expressed in percentage.

Marital status	Frequency	Percentage (%)
Single	32	22.9
Married	98	70
Co-habiting	10	7.1
Divorced	25	17.9

Total	140	100
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The figure above presents the distribution of respondents according to their marital status. It shows that 32 parents who constitute 22.9% were single, 98 parents who constitute 70% were married, 10 parents who constitute 7.1% were co-habitants while 24 parents who constitute 17.1% are divorced.

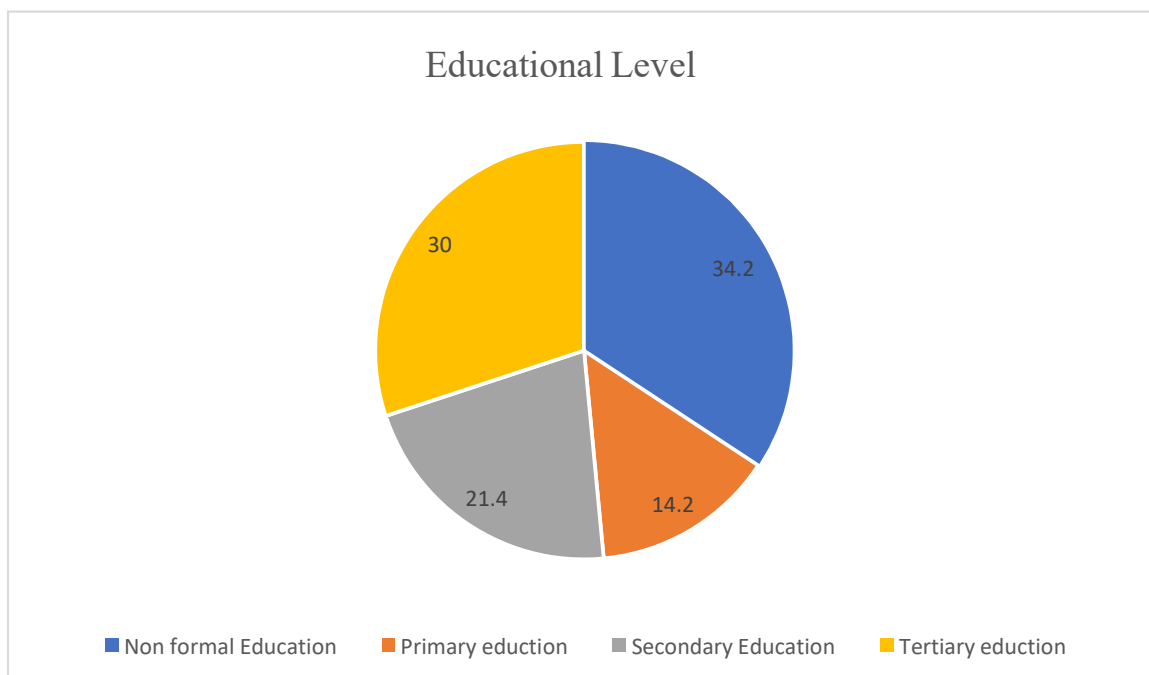
Academic Qualification distribution of respondents

Table 6 shows the Educational levels of the respondents as expressed in percentage.

Academic Qualifications	Frequency	Percentage (%)
No formal education	48	34.2
Primary education	20	14.2
Secondary education	30	21.4
Tertiary education	42	30
Total	140	100

The table below presents the distribution of respondents according to their Education level .

The table shows that 48 parents who constitute 34.2% had no formal education, 20 parents who constitute 14.2% had primary education, 30 parents who constitute 21.4% had secondary education, while 42 parents who constitute 30% had tertiary education.

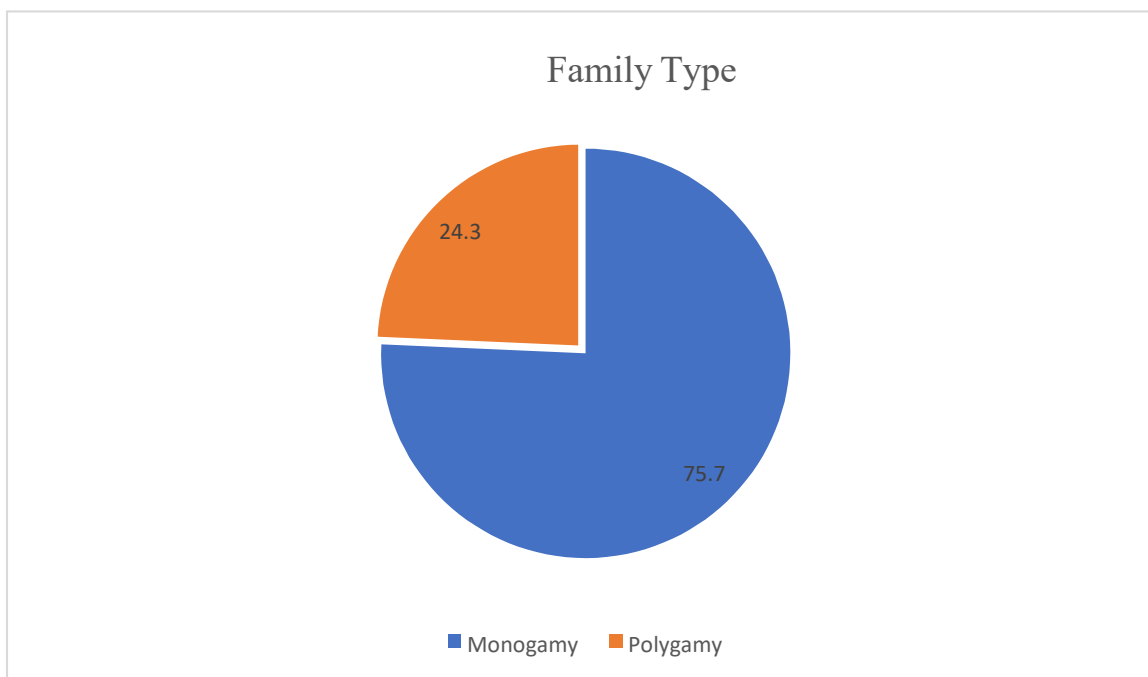


Family type distribution of respondents

Table 7 shows the family type distribution of respondents as expressed in percentage.

Family Type	Frequency	Percentage (%)
Monogamy	106	75.7
Polygamy	34	24.3
Total	140	100

The table below presents the distribution of respondents according to their family type. The table shows that 106 parents who constitute 75.7% are monogamous, while 34 parents who constitute 24.3% are polygamous.



Occupation distribution of respondents

Table 8 shows the Occupation distribution of respondent as expressed in percentage.

Occupation	Frequency	Percentage (%)
Self employed	75	57
Unemployed	40	26
Government employee	25	17
Total	140	100

The table above presents the distribution of respondents according to their occupation. The table shows that 75 parents who constitute 57% are self-employed, 40 parents who constitute 26% are unemployed, while 25 parents who constitute 17% are government employees.

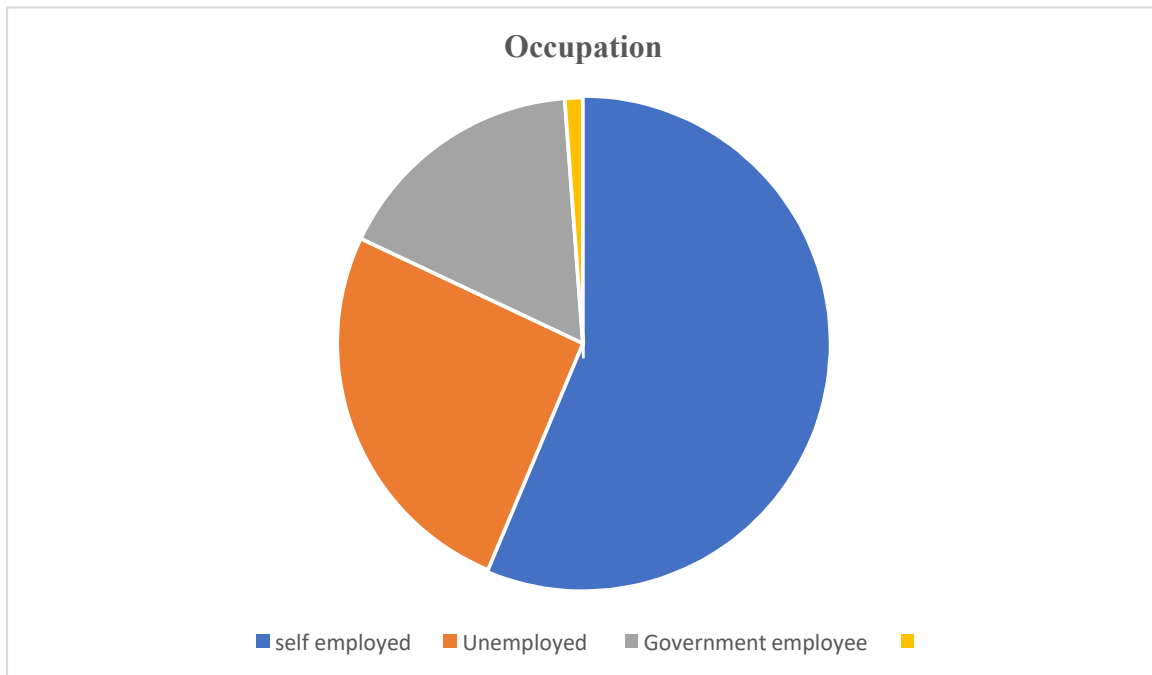


Table 9 shows to describe your parenting style distribution of respondent as expressed in percentage.

Parenting style	Frequency	Percentage (%)
Authoritative	75	57
Permissive	40	26
Neglectful	25	17
Total	140	100

The table above presents distribution of parenting styles used. The table shows that 75 parents who constitute 57% responded authoritative, 40 parents who constitute 26% responded permissive, while 25 parents who constitute 17% responded neglectful.

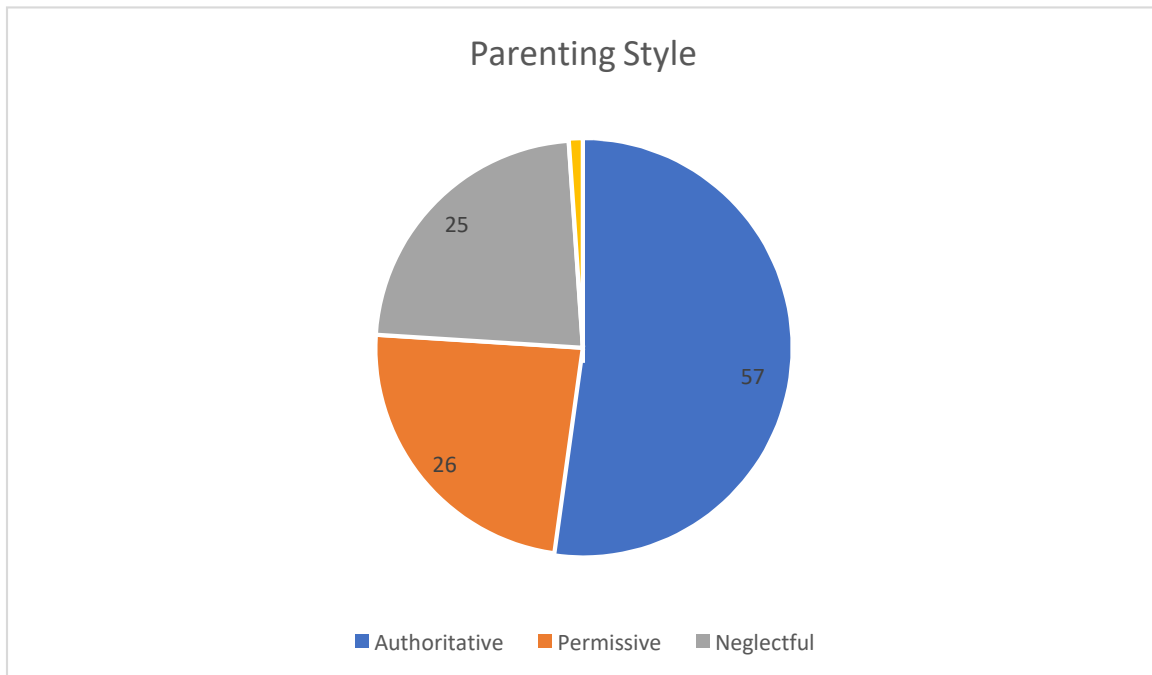


Table 10 shows how often do you discipline your child using physical means (e.g spanking, slapping) distribution of respondent as expressed in percentage.

Discipline	Frequency	Percentage (%)
Never	25	17
Rarely	75	57
Sometimes	40	28.9
Total	140	100

The table presents majority of distribution of how you discipline child through physical means. The figure shows that 25 parents who constitute 17% responded never, 75 parents who constitute 57% responded rarely, while 40 parents who constitute 28.9% responded sometimes,

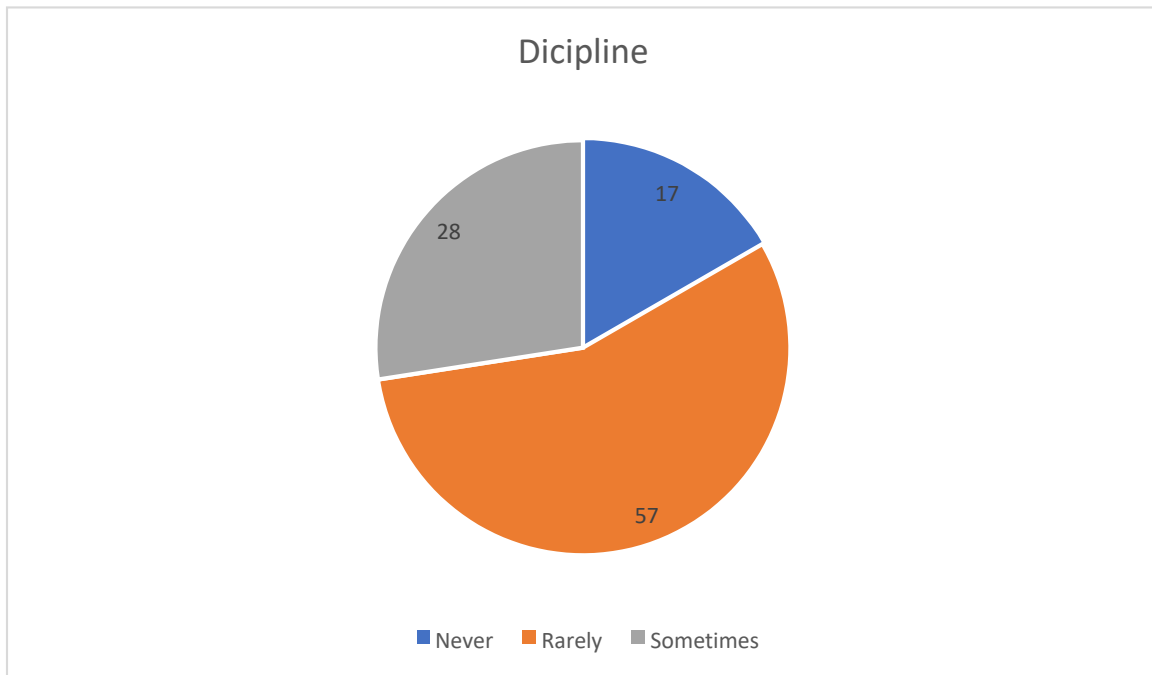


Table 11 shows what is your household’s monthly income level distribution of respondent as expressed in percentage.

Household’s Monthly income	Frequency	Percentage (%)
Below the poverty line	15	10
Low-income	75	57
Middle-income	40	26
High-income	10	7
Total	140	100

The table above represents distribution of monthly income. The table shows 15 parents who constitute 10% were below the poverty line, 75 parents who constitute 57% had low income, 40 parents who constitute 26% had middle income, while 10 parents who constitute 7% had high-income.

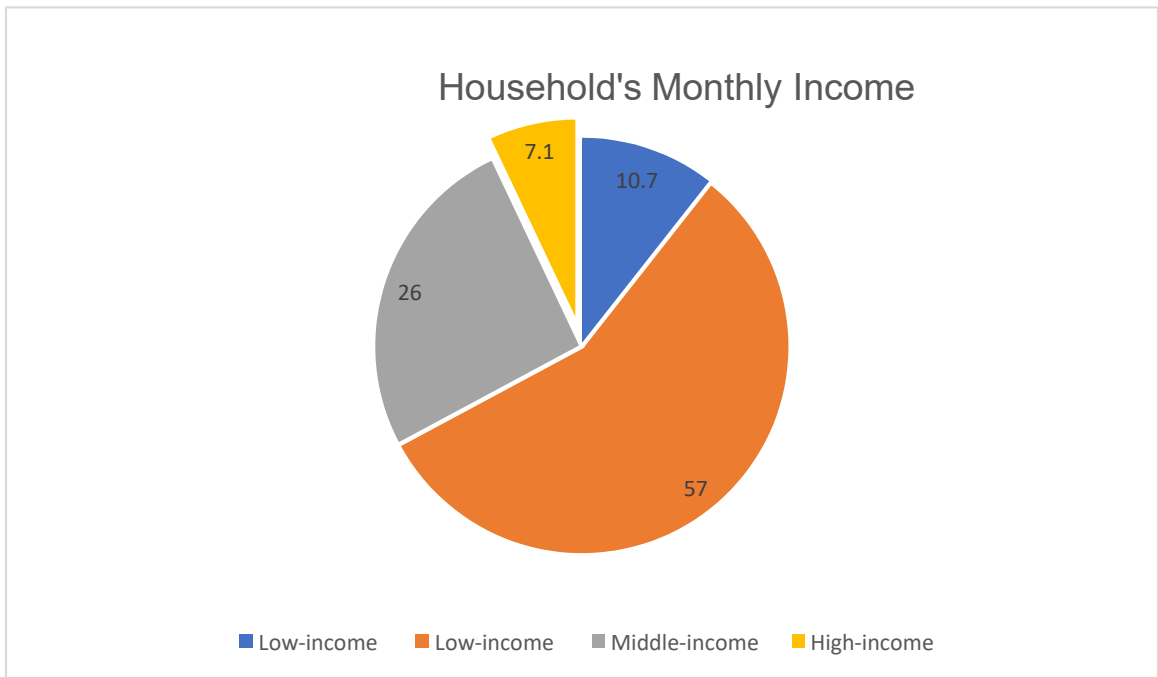


Table 13 shows how often do financial difficulties cause stress within the family distribution of respondent as expressed in percentage.

Financial difficulty	Frequency	Percentage (%)
Never	10	7.1
Rarely	50	35.9
Sometimes	70	50
Often always	10	7
Total	140	100

The table above represents distribution of financial difficulties. The table shows 10 parents who constitute 7.1% responded never, 50 parents who constitute 35.9% responded rarely, 70 parents who constitute 50% responded sometimes, while 10 parents who constitute 7% responded often always.

How Often Do Financial Difficulties Cause Stress Within The Family

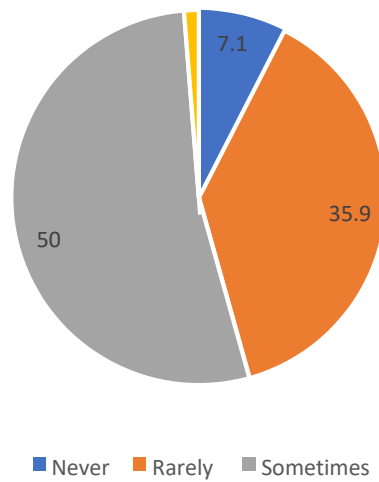


Table 14 shows have financial problems ever led to neglecting your child’s basic needs (e.g food, clothing, education) respondent as expressed in percentage.

Financial Problems	Frequency	Percentage (%)
Yes	80	57
No	60	43
Total	140	100

The table above represent if financial problems has led to neglecting child’s basic needs (food, clothing, education) 80 parents who were 57% responded Yes, whiles 60 parents who were 43% responded No.

Shows have financial problems ever led to neglecting your child's basic needs (e.g food, clothing, education)

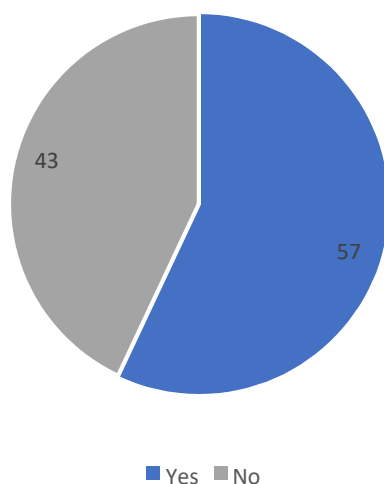


Table 15 to what extend do traditional cultural practices influence your approach to parenting distribution of respondent as expressed in percentage.

Cultural practices	Frequency	Percentage (%)
Not at all	15	10.7
A little	50	35.3
Somewhat	70	54
Total	140	100

The table below presents majority of distribution of how traditional cultural practices influence parenting. The table shows that 15 parents who constitute 10.7% responded not at all, 50parents who constitute 35.3% responded a little, 70 parents who constitute 54% responded somewhat.

what extend do traditional cultural practices influence your approach to parenting distribution of respondent as expressed in percentage

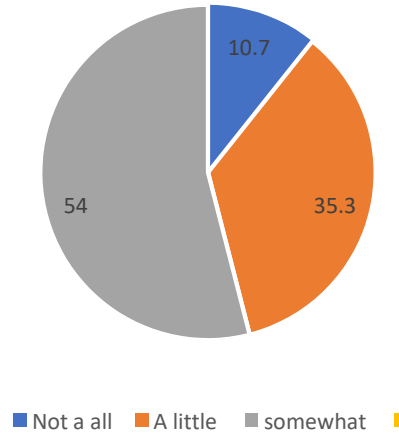
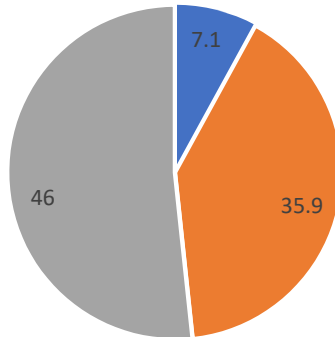


Table 15 shows how often you seek advice from extended family members on how to discipline your child distribution of respondent as expressed in percentage.

Extended family	Frequency	Percentage (%)
Never	10	7.1
Rarely	50	35.8
Sometimes	70	50
Often always	10	7.1
Total	140	100

The table presents majority of distribution of family members on how to discipline child. The table shows that 10 parents who constitute 7.1% responded never, 50 parents who constitute 35.8% responded rarely, 70 parents who constitute 50% responded sometimes whiles 10 parents who constitute 7.1% responded often always.

shows how often do you seek advice from extended family members on how to discipline your child distribution of respondent as expressed in percentage



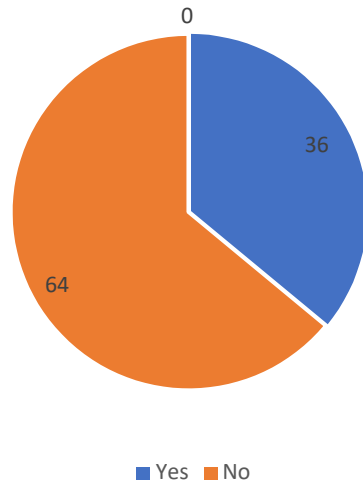
■ Never ■ Rarely ■ sometimes ■ Often always

Table 14 shows are there social support systems in your community that help in raising your children distribution of respondent as expressed in percentage.

Social support system	Frequency	Percentage (%)
Yes	50	36
No	90	64
Total	140	100

The table below represents the distribution of respondents according to social support in the community. The table shows that 50 parents who comprises of 36% responded Yes, whiles 90 parents who comprises of 64% responded No.

shows are there social support systems in your community that help in raising your children distribution of respondent as expressed in percentage.



CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATION

5.0 Introduction

This chapter entails the summary and conclusion on child abuse and neglect and its effects on social security and recommendations on what can be done to reduce its occurrence in our Society.

5.1 Discussions of Findings

Most of our respondents agreed that child abuse and neglect is a critical problem in our society like other nations of the world. The problems of child abuse and neglect cannot however be denied. There were frequent reports on the abuse of children across the nations especially in the dailies, social media and radio.

According to the research conducted on this study, 63 % of the respondents confirmed that child abuse and neglect consequently has effect on the social security. Also, Child abuse and neglect can be responsible for the high level of crime in our society as affirmed by 91% of the total respondent population. The researcher also found out that poverty which is a household problem in our society can trigger the occurrence of child abuse and neglect in our society.

It was also confirmed by 75% of the respondents in this study that children of low socio-economic status are more likely to be on the receiving end of various forms of abuses and neglect. This is not because the children want to be victims of abuses themselves but because they are helpless. Several factors ranging from low standard of living to lack of income on the part of parents/caregivers can make the children to be subjected to child labour and child prostitution.

It was also learnt in this study that illiteracy on the part of the parents/caregivers can make them subject their wards to various forms of maltreatment. An example is the female genital mutilation which is very common among some uneducated and illiterate persons in our society.

About 70% of the total respondent population testify to the fact that financial problems and living among people with indecent behaviour in an overcrowded and disadvantaged neighbourhood could be responsible for a child's criminality. However, a superior figure of about 61% dispute the fact that adults that are abusing children were also victims of child abuse while they were young. In the same vein, the researcher also found out that children of substance abusing parents are at a higher risk of being abused and neglected. This was confirmed by 72% of the respondents.

We can also conclude that children living with single parents may be at a higher risk of experiencing physical and sexual abuses and neglect than children living with their two biological parents as supported by 65% of the total respondent population. We can also say that the prevalence of child neglect is higher in families that have more children or greater number of people living in the household. About 66% of the respondents believe that this is true.

We also learnt that in families where spouse abuse takes place, child abuse also occurs as confirmed by 75% of the respondents. Furthermore, we can as well conclude that children with disabilities experience higher rates of maltreatment than do other children.

And finally, we can however conclude that the effects of child abuse and neglect can be profound and may endure long after the abuse or neglect occurs. The effects can appear in childhood, adolescence, or adulthood, and may affect various aspects of an individual's development (e.g., physical, cognitive, psychological, and behavioural).

5.2 Summary

The concept of child abuse and neglect is a very eclectic one. Its understanding as it occurs varies from individuals, ethnic groups, religious institution, professional bodies etc.

However, this study have discussed the occurrence of child abuse and neglect as it occurs in various forms like physical abuses, verbal abuse, emotional/psychological abuse, child labour, child abandonment and child sexual abuse.

Furthermore, the researcher also made available the factors that contribute to child abuse and child neglect in our society; This include the parent or caregiver factors, family factors, child factors, environmental and protective factors.

The experience of child abuse and neglect has very significant consequences in the life of an individual. It has effects on the health and physical well being, intellectual and cognitive development and emotional, psychological and behavioural aspect of his/her life. All this were critically analysed in this study.

Basically, this study does not only state or lament the problems of child abuse and neglect in our society, it also enumerates factors that contribute to its occurrence and its consequences on the child. This study also made a conscientious look at what can be done to abate the menace of child abuse and neglect in our society.

And lastly, the researcher also visited teachers, health workers, parents, caregivers, law enforcement officers and residents within Abeokuta North Local Government Area to interview them by the means of a questionnaire so as to get their submissions and what they feel about child abuse and neglect as it affects our social security. The aggregate views of the respondents and the analysis of their responses were fully and meticulously presented in chapter four of this research project.

5.3 Conclusion

Every child deserves to grow up in a safe and nurturing environment. Unfortunately, hundreds of thousands of children are reported to be victims of child abuse and neglect every year. An untold number of other children are also maltreated but not reported.

However, from the research that has been conducted in this study, it can be concluded that child abuse and neglect is one that needs to be tackled aggressively to maintain the sanity of our social infrastructure. The cycle of abuse has to be nipped in the bud. Child abuse should be taken seriously in our society. Abuse of children will always create problems for those children and the society at large. Abuse may cause the children to be depressed. It may make them lose their self-esteem, self-confidence and ego. Abuse may affect the academic performance of the children involved. Abuse may make children distrust others and cause sleeping disorder and other self-destructive behaviours.

5.4 Recommendations

The researcher has therefore deemed it fit to proffer some recommendations to address the issue of child abuse and neglect, within the context of New Biadan, in order to arrest the ugly situation.

Firstly, Parents should be sensitized on the problem of child abuse. Some parents cannot distinguish between child abuse and discipline at homes. Public awareness on what constituted the abuse of a child must be increased throughout the nook and cranny of the New Biadan. Parents need to understand what child abuse really is and the forms of the abuse. Some consider abuse as discipline but they are two different things. Parents need to understand the point where child abuse and child discipline intersect or where discipline crosses over and becomes an abuse. Moreover, some parents lack good act of parenting. Some New Biadan parents need to be taught the act of parenting. The researcher therefore recommend public talks, seminars, workshops and training by the government at various levels, non-governmental organizations and religious bodies to assist in this regard.

Secondly, the laws that protect the rights of the children must be fully implemented with all sincerity. The violators of the law must be judiciously prosecuted by the law enforcement agencies. The researcher however recommends the training of some officers of the law that

would specially take care of the investigation and prosecution of child abuse cases in the country as such will deter the incidences of child abuse and neglect in the country. We equally want the government to always review laws protecting the rights of children in line with the updated law at the international level. Such laws must also be implemented.

Thirdly, The researcher equally implores the non-governmental organizations and religious bodies to assist in launching and implementing programs of various forms that would counter the problems of child abuse in the country.

Fourthly, Schools should also endeavour to organise a kind of orientation programme to sensitize the children on avoiding potentially harmful scenarios.

It should also be noted that the identification and prompt reporting of any suspected case of child maltreatment to the police or other relevant law enforcement agency is very crucial.

And lastly, the religious leaders in our various religious institutions should also provide counselling for their congregation and preach against various forms of child abuses and neglect.

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QUESTIONNAIRE

INTRODUCTION

- c. Secondary education [] d. Tertiary education []

7. Family type distribution

- a. monogamy b. polyamy

8. Occupation

- a. Unemployed [] b. Self-employed [] c. Government employee []
c. Private sector employee [] d. Other (please specify) []

SECTION B: PARENTING PRACTICES

1. How would you describe your parenting style? (Select all that apply)

- a. Authoritative [] b. Permissive [] c. Neglectful []
d. Other (please specify) []

2. How often do you discipline your child using physical means (e.g., spanking, slapping)?

- a. Never [] b. Rarely [] c. Sometimes []
d. Often Always []

3. How often do you discuss your child's behavior with them and offer guidance?

- a. Never [] b. Rarely [] c. Sometimes []
d. Often Always []

SECTION C: ECONOMIC FACTORS

1. What is your household's monthly income level?
 - a. Below the poverty line []
 - b. Low-income []
 - b. Middle-income []
 - d. High-income []
2. How often do financial difficulties cause stress within your family?
 - a. Never []
 - b. Rarely []
 - c. Sometimes []
 - d. Often Always []
3. Have financial problems ever led to neglecting your child's basic needs (e.g., food, clothing, education)?
 - a. Yes []
 - b. No []

SECTION D: SOCIAL AND CULTURAL FACTORS

1. To what extent do traditional cultural practices influence your approach to parenting?
 - a. Not at all []
 - b. A little []
 - c. Somewhat []
2. How often do you seek advice from extended family members on how to discipline your child?
 - a. Never []
 - b. Rarely []
 - c. Sometimes []
 - d. Often Always []
3. Are there social support systems in your community that help in raising your children?
 - a. Yes []
 - b. No []

SECTION E: STRESS AND PSYCHOLOGICAL FACTORS

1. How often do you feel overwhelmed by the demands of parenting?
 - a. Never []
 - b. Rarely []
 - c. Sometimes []
 - d. Often Always []

2. Have you ever experienced any form of mental health issues (e.g., depression, anxiety) that affected your parenting?
 - a. Yes
 - b. No

3. How often do you find yourself lashing out at your children due to stress or frustration?
 - a. Never []
 - b. Rarely []
 - c. Sometimes []
 - d. Often Always []

SECTION F: PERCEPTIONS AND AWARENESS

1. How aware are you of the laws and regulations concerning child abuse and neglect?
 - a. Not aware at all []
 - b. Slightly aware []
 - c. Moderately aware []
 - d. Very aware []

4. Do you believe that physical discipline is an effective way to manage a child's behavior?
 - a. Strongly disagree []
 - b. Disagree []
 - c. Neutral []
 - d. Agree
 - e. Strongly agree

5. In your opinion, what are the most significant factors contributing to child abuse and neglect in your community? (Open-ended)

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Fax: 0352222474

Our Ref.

Your Ref.

Date

14th August, 2024

The Assembly Member
Biadan Community
Biadan, Berekum

Dear Hon. Member

PERMISSION TO CONDUCT A RESEARCH

I wish to introduce to you the under listed names of final year students of the college.

1. Dorle Patience
2. Donkor Rashida Abubakar

As part of the pre-requisite for the award of Diploma in Registered General Nursing, they are to conduct a research on the Topic " **Exploring the factors responsible for Child Abuse and neglect among parent. A study at new Biadan in the Berekum East Municipality.**

I would be grateful if you could assist them with any material or help they need to accomplish this task.

Thank you.

Mr. Emmanuel Ali
Supervisor

For: Principal