

**EXPERIENCES OF ADOLESCENT'S REGARDING CORPORAL
PUNISHMENT AND THEIR PERCEIVED HEALTH CONSEQUENCES
IN IBADAN NORTH-EAST LOCAL GOVERNMENT AREA, OYO
STATE**

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MATRIC NUMBER: 188830**

FEBRUARY, 2017

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LOCAL GOVERNMENT AREA, OYO STATE**

BY

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B.Sc. MICROBIOLOGY (FUO)

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DEDICATION

This research work is dedicated to the Almighty God for his abundant blessings and for seeing me through this programme.

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ABSTRACT

Corporal punishments also referred to as physical punishment is a disciplinary method in which a supervising adult deliberately inflicts pain upon a child in response to a child's unacceptable behaviour and/or inappropriate language. Corporal punishment kills thousands of children each year and injures and disable many more. It is a hurtful method of child discipline with a rising prevalence in the Africa and Nigeria. Administering physical punishment as standard child rearing process on adolescents comes with so many unfavorable consequences to the adolescents. The study was designed to investigate the mode of child discipline to serve as an insight into the conditions in which adolescent's find themselves today, the experience of corporal punishment, and the perceived health consequence of corporal punishment among adolescents in Ibadan North East Local Government Area

The study was a descriptive cross-sectional survey that used a multi stage sampling technique. The study population were adolescents in senior secondary school (SS1-3) in Ibadan North East Local Government Area. The instrument used for collection of data was a self-administered questionnaire titled. A pre-test was done and a descriptive analysis and chi square test was carried out to check the reliability of the questionnaire. The hypothesis raised were tested at 95% level of significance. The study was carried out among three hundred and thirty (330) students in both public and private school in Ibadan North East Local Government Area.

The mean age of the respondents was 15.2 ± 3.1 years. Findings from this study revealed that Physical Punishment is the most popular method of child discipline among adolescents, with fathers being the highest perpetrators (47.9%) compared to the mothers (44.5%). Findings from this study revealed that physical punishment experienced by adolescent within the month preceding the study includes slapping, knock on head, weeding of grass, painful body postures, washing of plates and clothes amongst others. Findings from study also shows there is a statistically significant association between experience of corporal punishment and adolescent's ethnic group and religion. Muslim students are more likely to experience corporal punishment than Christian students. In the same vein, students of Hausa descents are more likely than students of Yoruba descent to experience corporal punishment.

Corporal punishment is the most adopted mode of discipline compared non-physical punishment used on adolescents in their home as revealed in this study. From the research it is obvious the respondents perceive corporal punishment as a social norms and will likely use it

as a mode of discipline too as majority of the respondent thinks corporal punishment will make them a better person in life. The study recommends that Public enlightenment should be carried out to parents to enlighten them on health consequences and negative effects of corporal punishment on their children. Also, children and adolescent rights should be well established and thought to them. Corporal punishment should be clearly defined to establish the severe mode and also the extent of use allowed by parents on their child/children by the Government.

Keywords: Corporal punishments, non-physical punishments.

Word Counts: 491

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CERTIFICATION

I certify that this work was carried out by **Fausiat Modupe, Bakare**(**Matric No: 188830**) in Department of Health Promotion and Education, Faculty of Public Health, College of Medicine, University of Ibadan, Nigeria.

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LIST OF ABBREVIATIONS

UNICEF- United Nation Children Emergency Fund

WHO- World Health Organization

SLT- Social Learning Theory

CRC- Convention on the Right of Child

VACS -Violence against Children Survey

TEGINT- Transforming Education for Girls in Nigeria and Tanzania

MICS4-Multiple Indicator Cluster Survey

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OPERATIONAL DEFINITION OF TERMS

Health: Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity (WHO, 1948)

Adolescent: WHO identifies adolescence as the period in human growth and development that occurs after childhood and before adulthood, from ages 10-19 years.

Caregivers: Caregivers are Parents, Family members, Friends and Families.

Discipline: According to Cambridge dictionary discipline is training that makes people more willing to obey or more able to control themselves, often in the form of rules, and punishments if these are broken, or the behavior produced by this training :Often, the phrase "to discipline" carries a negative connotation. This is because enforcement of order—that is, ensuring instructions are carried out is often regulated through punishment.

Corporal Punishment/Physical punishment: is a form of physical punishment that involves the deliberate infliction of pain as retribution for an offence, or for the purpose of disciplining or reforming a wrongdoer, or to deter attitudes or behavior deemed unacceptable. The term usually refers to methodically striking the offender with the open hand or with an implement, whether in judicial, domestic, or educational settings. Corporal punishment is defined by the UN Committee on the Rights of the Child as: “any punishment in which physical force is used and intended to cause some degree of pain or discomfort, however light”.

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CHAPTER ONE

INTRODUCTION

1.1 Background

Corporal punishment otherwise known as physical punishments is a hurtful method of child discipline and there seems to be a rise in using physical punishment as a mode of discipline on adolescents in Nigeria. The problem is caused by different factors like cultural, economic and social factors. Harsh mode of punishment comes with so many unfavorable consequences to the child. The study seeks to know the different mode of child discipline adopted by parents, relatives and caregivers and how it affect the health of a child i.e. Physical health, mental health, emotional health and social health.

Most African parents think corporal punishment is an effective method of disciplining a child. Corporal punishment has long term effects that affect its recipient strongly. Corporal punishment causes students' mental activities to reduce, play truant from school, increase in reacting against to existing social system, loss of self-confidence and boldness, creates cramming qualities in students overturn to aggression, mal-showement of respect towards teachers and elders. (Arab, 2011) Furthermore, after punishment; the students feel humiliation and impinge in inferiority complex that causes less intelligence. Parents ignore destructive effect of physical punishment on and choose only to focus on the positive impacts. Parents think physical punishment is the best mode of disciplining their children and are often proud after they have administer the mode of punishment thinking they have done well. Some parents don't even know whether using corporal punishment is good or bad but they do it because that is the same way they have been trained. When Physical punishment such as pinching, slapping, twisting of ears, smacking of buttocks is administered it is believed that adults are directly teaching kids violence and teaching them that violence is the solution to all problems.

A study by the American Psychological Association's 1999 Annual Convention recognized that One quarter of all parents have been using physical punishment on their children e.g. slapping a child on the buttocks or on the arms or legs, pushing a child or grabbing them. The study also emphasized the importance of cultural understanding in relation to child abuse and neglect (Murray, 1999).

Nigeria's first national Violence Against Children Survey (VACS) conducted in 2014 found approximately six out of every 10 children experience some form of violence; half of all children experience physical violence, with parents or adult relatives being the most common perpetrator. Male teachers are the most common perpetrators of the first incident of physical violence against children in the neighbourhood. According to National Population Commission of Nigeria, UNICEF Nigeria & US Centre for Disease Control and Prevention, (2015) One in six girls and one in five boys experience emotional violence by a parent, caregiver or adult relative. The study notes that while it is not focused on acts of discipline, many of those perpetrating the violence may be doing so in the name of "discipline"

Corporal punishment is a disciplinary method in which a supervising adult deliberately inflicts pain upon a child in response to a child's unacceptable behaviour and/or inappropriate language (Alhassan,2012) identified sixty items of unacceptable behaviours which are categorised as conduct problems: vandalism, fighting, disregards of the rights of other students, verbal abuse, verbally threatens teachers, rudeness, disrespecting teachers, and damages class furniture; personality problems: stealing, cheating at examinations, mid-school truancy, lateness, impoliteness, failure to do homework, non-completion of homework, temper tantrum; problems of emotional and social immaturity, restlessness, hyperactive and having a short attention span. Truancy is a disciplinary problem. It is one of the delinquencies committed by adolescents in Nigeria that often leads to unacceptable behaviours such as maladjustment, poor academic performance, school drop-out and substance abuse (Adeloye, 2009)

In South Africa, a questionnaire was used with over 700 middle school students of mixed ethnic background to ask their opinion about the practice majority of them reported having been physically disciplined. Most said they were angry or sad right after the beating. However they also said that later on, they felt happy or proud. Boys in particular endorsed a cultural belief in callousness (i.e. the ability to endure pain is a sign of greater masculinity) and acceptance of violence as a necessary tool. The authors found a relationship between this stance and an interest in competition between men, machismo and difficulty to express painful emotions (Morrell, 2001)

Children need to be protected against severe mode of punishment. Dealing with child abuse and neglect is difficult within any community and the problem of understanding the context in which

abuse occurs is exacerbated when different communities come into contact, or when sub-cultural groups, often referred to as communities in their own right, differ in their beliefs about child rearing practices including child abuse and neglect. (Korbin, 1979) In effect what this means is that what is perceived as abusive or neglectful within one culture may be viewed otherwise by other cultures.

1.2 Statement of the Problem

A study conducted by the UNICEF Multiple Indicator Cluster Survey programme in Nigeria (MICS4) in 2010 found out that, about 91% of children aged 2-14 experienced violent “discipline” (physical punishment and/or psychological aggression) in the home in the past month. Nearly eight in ten (79%) experienced physical punishment and 81% experienced psychological aggression, 34% severe physical punishment (being hit or slapped on the face, head or ears or being hit over and over with an implement) as a result of being shouted at, yelled at, screamed at or insulted. A troubling finding was the fact that, a smaller percentage (62%) of mothers and caregivers thought that physical punishment was necessary in childrearing. (Ministry of Development Planning and Statistics, 2014; UNICEF, 2014; National Bureau of statistics, 2011).

Corporal punishment kills thousands of children each year, it also injures and disables many more (Krug, 2002). Children are the milestone of a nation. Adolescent health spans many areas, from mental and physical health to healthy relationships. The choices made and behaviors adopted during these years affect adolescents' overall wellbeing and, potentially, their health throughout their lives. Adolescence is a critical period in a child existence; there have been several articles and journal written about child discipline in Nigeria, the parent's perspective and the teacher's perspective. This research focuses mainly on the perspective of adolescents on child discipline methods administered by the caregivers; the study looked at the child perspective on the method of child discipline. If parents understand the health consequences and the severity of the use of harsh discipline on a child, maybe these practices will reduce in the country. One of the main aims of the study is to establish an association between harsh method of child discipline and its impact on health of adolescents in Ibadan which this study tackled.

The leading causes of illness and death among adolescents and young adults are largely preventable. (Mulye, 2009) Health outcomes for adolescents and young adults are grounded in

their social environments and are frequently mediated by their behaviors. Behaviors of young people are influenced at the individual, peer, family, school, community, and societal levels.

Over the years, large and consistent body of evidence on corporal punishment has been improved including through the use of increasingly sophisticated techniques which researchers have employed to address the arguments advanced by a few opponents of prohibition yet, very few studies have been conducted to advocate for children's right to legal protection from all corporal punishment; it is in this light that this study was conducted. Also, the findings generated from this research will illuminate how corporal punishment violates not just children's right to freedom from all violence, but also their rights to health, development and education. It supports arguments that prohibition is a low-cost effective public health measure in the prevention of domestic violence, mental illness and antisocial behaviour and to aid welfare, education and developmental outcomes for the adolescent. (Gershoff, 2002; Gershoff, 2008, Krug, *et al.* 2002; Committee on the Rights of the Child; 2006).

Adolescents are the main recipient of modern corporal punishment and if experienced by adults it is seen as harassment and abuse. If an adult getting whipped is considered harassment then why is it appropriate for children? While there has been a great deal of literature on corporal punishment, relatively very little has taken into account children's own views. Therefore, little is known about children's perceptions of their own experiences of physical punishment (Gershoff, 2002).

The Committee on the Rights of the Child noted with concern that there is a generally high level of acceptance of domestic violence even amongst law enforcement officers and court personnel. Although educational institutions should have the capacity to train and socialise children without exposing them to violence, corporal punishment is still considered as a positive educational tool in Nigeria with grave impact on their health. Studies have shown that physical punishment is associated with increased child aggression, antisocial behaviour, lower intellectual achievement, poorer quality of parent-child relationships, mental health problems (such as depression), and diminished moral internalisation (Montgomery, 2009; Bartholdson, 2001; Ember and Ember, 2005; Ripoll-Nunez and Rohner, 2006). Studies have shown that in societies around the world physical punishment is a key component of the childrearing process. Physical and psychological

violence against children occur both in schools and within families – not to mention violence that affect children living on the streets or exploited by adults.

It is believed that only few African parents are aware of the negative effect of corporal or physical punishment, therefore more awareness is needed to reduce the prevalence of using corporal punishment on their kids. It is also believed that children who have been disciplined these way as children grow up using the same method of child discipline on their children. Corporal Punishment, given by the caregivers to their children is one of the threatening factors, which affect student's physical, social, mental and emotional health. This is particularly so for children in non-Western societies where Montgomery (2009) asserts that despite the abundance of anthropological studies on child-rearing, very few have focused on children's own feelings and reactions to disciplinary measures. Therefore, although much of the literature on child-rearing in Africa points to the fact that not only are parents expected to physically punish their children, but that children are also expected to submit to such punishment (Nsamenang, 1992), little empirical work has been conducted to support this. This presents a gap in our understanding which needs to be addressed, especially in the wake of the adoption of the Convention on the Rights of the Child, as many of these perspectives are now being subjected to closer scrutiny and questioning. This increased scrutiny requires a response from local communities about the role of physical punishment within their social contexts. Critical to this response is the need to fore ground children's own perspectives and reactions to physical punishment.

1.3 Justification of the study

Reliable data on violence against children in Nigeria is scarce because violence is often not reported as it occurs mostly within the context where it is regarded as 'normal' such as within the family circle or behind the privacy of homes. The predominant cultural belief is that children must be submissive to elders therefore behavior not in conformity with this is punished. Therefore studying and analyzing issues of adolescents is important to the overall development of Nigeria because it serves as an insight into the conditions in which our adolescents find themselves today and a guide for preparing them for meaningful contribution to development of the society as the problem and development of Nigeria adolescents affect every home directly or indirectly. This research addressed and provided current information on the adolescent's experiences of corporal punishment within the home settings.

This study investigated the adolescent's perception to corporal punishment, the current mode of child discipline practiced by parents, the experience of corporal punishment, and the perceived health consequence of corporal punishment among adolescents.

This study also compared the socio demography characteristics of these adolescents with types of punishment received from their parents or caregivers in Ibadan North East Local Government area, Ibadan Oyo-State

1.4 Research Questions

The research questions of this study were as follows;

1. What are the methods of child discipline currently administered on adolescents in Ibadan north east?
2. What are the experiences of punishment among adolescence from parents and caregivers in Ibadan north east.
3. What are the reported reasons for applying punishment in relation to mode of discipline administered?
4. What are the perceived effects of current method of corporal discipline on a child's health?
5. What are adolescent perceptions on appropriate method of discipline?

1.5 General Objective of Study

The general objective of this study was to investigate the current mode of child discipline, the experience of corporal punishment, and the perceived health consequence of corporal punishment among adolescents in Ibadan North East Local Government Area.

1.6 Specific Objectives

The specific objectives of the study were;

1. To identify mode of child discipline currently used on adolescents in Ibadan North East Local Government Area.
2. To document the experiences of punishment among adolescents by their parents or caregivers.

3. To identify the reasons for applying corporal punishment as given by the caregivers in relation with the offences committed by the adolescent
4. To identify the perceived health consequences of corporal punishment on the adolescent.
5. To assess adolescent's perception on appropriate method of discipline.

1.7 Research Hypothesis

Hypotheses 1: There would be no significant association between corporal punishment and Socio-demographics (Religion, family type and ethnic group).

Hypothesis 2: There would be no significant association between corporal punishments and adolescents perception of the health consequences of corporal punishment

Hypothesis 3: There would be no significant association between adolescent experiences of corporal punishment and perception of the adolescent on appropriate method of discipline

1.8 Variables of Study

The dependent variable included physical punishment experiences and the health consequences on target group (Adolescent). The independent variables include the socio demographic variables: age, sex, religion, educational background and socioeconomic background of the caregivers.

CHAPTER TWO

LITERATURE REVIEW

2.1 Physical Punishment

The definition of corporal punishment as stated in The United Nations Convention on the Rights of the Child General Comment No. 8 (2006), is any punishment in which physical force is used and intended to cause some degree of pain or discomfort, however light. Corporal punishment takes many forms, the Committee has elaborated on many ways through which corporal punishment can be inflicted onto the child. Punishment is defined as the application of a negative stimulus to reduce or eliminate a behavior. There are two types typically used with children: punishment involving verbal reprimands and disapproval and punishment involving physical pain, as in corporal punishment.

Corporal punishment ranges from slapping the hand of a child about to touch a hot stove to identifiable child abuse, such as beatings, scalding, and burnings. Because of this range in the form and severity of punishment, its use as a discipline strategy is controversial. Although significant concerns have been raised about the negative effects of physical punishment and its potential escalation into abuse, a form of physical punishment is spanking and it remains one of the strategies used most commonly to reduce undesired behaviors, with >90% of American families reporting having used spanking as a means of discipline at some time. (Baumrind, 1973). Africans view physical punishment as virtuous teaching. Among the Wolof people of Senegal, 'teaching' and 'stick' goes together. To avoid being compromised by sympathy for their children, Wolofs entrust their discipline to an uncle or a marabout [holy man], because according to an old proverb, 'strangers have no pity'. The practice of violence against children takes especially serious forms for juvenile delinquents. Togo psychologist Ferdinand Ezembé puts disciplinary violence in its cultural context: "With respect to raising children, there exists in African societies a rather widespread belief that one must prepare children to live in an environment that will be physically and psychologically hostile (Gabel, Labovici, Mazet, 1996). Corporal punishment is thus a normal part of children's upbringing, and it is further used and legitimized by administrative, judicial et educational authorities. Parents who do otherwise are considered to be lax, or even negligent. According to a proverb of the Bassa people of Cameroon, if you want to raise your child well, treat him like a slave (Ellen, Afamefuna, 1986).

Another African journalist, Ousmane Thiény, for his part, laments the fact that "a child is subject to corporal correction by any villager or close neighbour whatsoever who decides [the child] has committed a serious offense against custom. This could be refusing or failing to give a proper greeting, refusal to do an errand, uttering rude insults in the presence of elders. Meanwhile, Boubacar Issa Camara, a former teacher who once served as director of education and health for the Nigerian Ministry of Public Health, describes the general situation in Africa this way (Cahiers de la Réconciliation, 2000): He begins by acknowledging that "the use of violence in African education does tremendous harm to young people. At Koranic school, the child starting at age three or four, has been a victim to some degree of corporal punishment, though nothing serious, of course." The "marabout," the religious teacher, very often goes around the circle formed by the students with a crop in his hand; whoever cannot recite their Sura best beware. The fear of the teacher, the stress that students go through when they pass by the teacher, is such that some of them may lose control of their sphincter. Fortunately, things are improving with the advent of young professors fresh from the madrasas, who are more modern, more learned, and better trained to teach. So this situation is increasingly no more than a distant memory." But it probably tells us something about the high threshold of tolerance toward corporal punishment in Africa that Boubacar Issa Camara considers lashes of the crop, fear of which causes the children to urinate or defecate on themselves, to be "nothing serious"!

Types of Physical Punishment

Corporal punishment/Physical punishment: is a kind of punishment that involves a deliberate infliction of pain as retribution for an offence is mainly divided into three (3) types:

1. Parental or Domestic Corporal Punishment: This involves the punishment inflicted by parents on their ward because most parents believed nothing else has worked except corporal punishment. It encompasses all forms of corporal punishment administered at home by parents or guardians.
2. Judicial Corporal Punishment: This is part of a criminal sentence ordered by a court of law, closely related to, it is prison corporal punishment ordered either by the prison authorities or by a visiting court.

3. School Corporal Punishment: These are corporal punishment undertaken within schools, when students are punished by teachers or school administrators for wrong done against rules and regulations.

Corporal punishment kills thousands of children each year and injures and disable many more. Much violence commonly referred to as “child abuse” is, in fact, corporal punishment of adults using violent and humiliating methods to control children’s behavior (Krug, 2002).

2.2 Reasons for Child Discipline

According to American Academy of Pediatrics the earliest form of discipline is when a child is an infant. Mothers try to train their children and arrange their sleeping, eating, awakening schedule. Infants grow up adapting to such routines. Crying and thrashing occurs when infants acquire memories of how their distress were relieved and learn new tactics to get attentions as their need emerges. As children grow older and develop new tactics to get attention, adults who care for them must learn to develop creative strategies to teach them enviable, desirable and acceptable behavior. As a result of steady formation and organized discipline, children learn to integrate the practice and acceptable being thought to them by their caregivers and integrate them into their behavior. As children become of school age, these rules become internalized and are accompanied by an increasing sense of responsibility and self-control. Responsibility for behavior is transferred gradually from the care giving adult to the child, and is especially noticeable during the transition to adolescence. Parents must always be prepared to amend and transform their discipline approach over time, using different strategies. As a child develop and begin to develop independence and capacity to engage in activities on their own, they begin to take responsibility. This is where most children developmental abilities come in to play and some children may require more intense strategies to manage their behavior than the others.

According to Unicef, Ceapa, and Cocapa campaign against corporal punishment on children in families, parents resort to corporal punishment for different reasons:

- Because they consider it appropriate to children’s education.
- Because it relieves tension.
- Because they lack sufficient resources to tackle a situation or don't have strategies for achieving what they want.

- Because they are not skilled at interpreting the social situations in which they are using corporal punishment.
- Because they can't control their emotions.

But whichever justification is given for corporal punishment, the effects are the same. Corporal punishment harms everyone.

2.3 Global Prevalence of Corporal Punishment

According to an article written by Shafiqul Alam, (2011) in the financial Express Bangladesh, Putting an end to corporal punishment is an ethical duty. Corporal punishment is a violation of human rights. A survey carried out in Canada, of 818 adults without children, mostly aged 18-21, 46% agreed that section 43 of Canada's Criminal Code, which allows for the use of "reasonable force" to "correct" children, "should be ended if guidelines are developed so that parents are not prosecuted for mild slaps or spankings"; 26% disagreed. "Favourable attitudes" towards "spanking" were held by 17%. (Jude and Trocme, 2013)

The Canadian Incidence Study of Reported Child Abuse and Neglect (2008), the third nationwide study to examine the incidence of reported child maltreatment, involved 112 child welfare service agencies in Canada, reporting on 15,980 child protection investigations. The study found that nearly three quarters (74%) of all cases of "substantiated physical abuse" were cases of physical punishment and 27% of "substantiated emotional maltreatment incidents" were initiated as a form of punishment. In the vast majority (17,212) of the estimated 18,688 cases of "substantiated physical abuse", physical violence was the primary form of maltreatment. Of cases of physical violence, 54% involved children being slapped or "spanked", 30% being shaken, pushed, grabbed or thrown, 21% being hit with objects and 8% being punched, kicked or bitten (Labbe, 2012).

In USA, An analysis of data on corporal punishment from the Office of Civil Rights, relating to the 2009-2010 school year, revealed that on average, 838 children experience corporal punishment in public schools every day, the equivalent of one every 30 seconds. Black children were nearly two-and-a-half times more likely to experience corporal punishment than White children, and nearly eight times more likely than Hispanic children. (Children Defence Fund, 2014)

A study carried in South America on the relationship between severe physical punishment and mental health problems found that 20% of the children (aged 6-17) in the 813 participating households had suffered severe physical punishment (being hit with an object, being kicked, choked, smothered, burnt, scalded, branded, beaten or threatened with a weapon) by one or both parents in the last 12 months. (Boedin, 2009)

A large scale comparative study (World Studies of Abuse in the Family Environment (WorldSAFE)) which involved surveys with over 14,000 mothers of children aged under 18, carried out between 1998 and 2003, examined parental discipline in Brazil, Chile, Egypt, India, Philippines, and the United States. In Brazil, 70% of children experienced “moderate” physical discipline (including being “spanked” on the buttocks, hit with an object, slapped on the face and having hot pepper put in their mouth). Two per cent of children experienced harsh physical discipline (including being burnt, beaten up, kicked and smothered). Nearly four children in ten (39%) experienced harsh psychological discipline such as being called names, being cursed and being threatened with abandonment. “Moderate” psychological discipline, including being yelled or screamed at or being refused food was experienced by 77% of children. Non-violent discipline, including explaining why a behaviour was wrong and telling a child to stop, was also widely used (experienced by 96% of children). The study found that rates of harsh physical discipline were dramatically higher in all communities than published rates of official physical abuse in any country, and that rates of physical punishment can vary widely among communities within the same. (Runyan, 2010)

In Argentina, According to UNICEF (2014) statistics collected in 2011-2012, 72% of children aged 2-14 experienced violent “discipline” (physical punishment and/or psychological aggression) in the home in the month prior to the survey. Nearly half (46%) experienced physical punishment and 65% experienced psychological aggression (being shouted at, yelled at, screamed at or insulted). A much smaller percentage (4%) of mothers and caregivers thought physical punishment was necessary in childrearing.

In United Kingdom, as part of its 2007 review into section 58 of the Children Act 2004, the Department of Children, Schools and Families commissioned studies into the views of parents and children in England and Wales on “smacking”. The study into children’s views involved 64 children aged 4-16, through group and pair discussions. The majority of the children had been

smacked at some point in their lives, mostly but not exclusively when they were under 10. Boys and girls from all social classes were smacked. Smacking was “often the most feared type of punishment”, but “children consistently agreed that it was not the most effective”. Children highlighted the emotional impact of smacking, saying it often made them feel “scarred, stressed, harassed and on edge”. Most of the children “struggled to endorse smacking as an effective form of punishment” (Shebert research, 2007)

In Spain reported in International Save the Children Alliance (2005), a 2004 study involving questionnaires with 119 children aged 7-15, 46% said that it is never necessary to hit a child to educate him or her, 41% that it is sometimes necessary and 4% that it is necessary to hit a child many times. One child in five (21%) thought that it is never necessary to shout, 68% that it is sometimes necessary and 2% that it is necessary many times. Almost half of the children thought that mothers (47%) and fathers (46%) have the right to hit and shout at their child, while 14% felt that grandparents have this right and 17% brothers and sisters. Five per cent of children thought that teachers have the right to hit and shout at a child. Children said that physical and humiliating punishment made them feel pain (61%), sadness (60%), anger (39%), fear (37%), guilt (32%), loneliness (12%) and indifference. Children were asked which punishments were most harmful and said that denying a child food was the most harmful and physical punishment was the second most harmful

Reported in International Save the Children Alliance (2005), Ending Physical and Humiliating Punishment of Children - Making it happen: Global Submission to the UN Study on Violence against Children, Save the Children Sweden. A Multiple Indicator Cluster Survey conducted in Asia 2012 found 50% of children aged 2-14 were subjected to at least one form of psychological aggression or physical punishment, with a slightly higher prevalence among Qatari children (54%) than their non-Qatari counterparts (48%), and among older children (53% of children age 10-14) than younger (47% of those age 2-4). Boys (38%) were more likely to be subjected to physical punishment compared to girls (30%). Violent disciplining methods were found to be highest where the head of the household was educated to primary level (65%) and lowest where the head of the household had a university degree (45%). In contrast to the actual prevalence of physical punishment (35%), only 14% of respondents believed that children need to be

physically punished. Forty per cent of children were found to experience only non-violent disciplining methods.

In china, a retrospective survey of nearly 1,000 university students in China and England, carried out between 2001 and 2004, looked at their experiences of parental discipline and their attitudes towards it. Of the Chinese students, 60% of boys and 50% of girls reported being hit by their parents as children; beating with a stick, rod or branch was reported by 37% of boys and 36% of girls. Fathers were more likely to be the parent using physical punishment than mothers. Of those who had been physically punished, 42% of boys and 41% of girls said they were punished for being “disobedient”, 33% of boys and 25% of girls for being “naughty”, 25% of boys and 18% of girls for having poor results at school, and 25% of boys and 45% of girls for being “wilful”. (Hester, 2009)

In Australia a survey of over 300 children and young people was carried out in 2010 by the ACT Children & Young People Commissioner, 57% of children and young people said it was “not ok” for parents to smack their children, 37% said it was “sometimes ok”, and 2% said it was “ok”. Of those children and young people who thought that it was “ok” or “sometimes ok” for parents to smack their children, 49% said that it was ok to smack a child to “punish the child”, or to “teach the child a lesson” (29%), or if the child was “at risk of hurting themselves” (16%). Very few children and young people thought that it was ok to smack a child “when the parents are angry” (3%), to “make the parents feel better” (1%), or “whenever the parents want to” (1%). Additionally, 46% of children and young people thought that parents smacking their children “maybe” should be banned, 38% said that it “should” be banned, and 11% said that it “shouldn’t” be banned.

2.4 The Situation in Sub Sahara Africa

In Chad, According to statistics collected in 2009 under round 4 of the UNICEF Multiple Indicator Cluster Survey programme (MICS4), 84.3% of children aged 2-14 experienced violent “discipline” (physical punishment and/or psychological aggression) in the home in the month prior to the survey. More than three quarters (76.6%) experienced physical punishment, 41.1% severe physical punishment (being hit or slapped on the face, head or ears or being hit over and over with an implement); 70.9% experienced psychological aggression (being shouted at, yelled at, screamed at or insulted).

According to UNICEF (2013) statistics collected between 2005 and 2011, 94% of girls and 94% of boys aged 2 -14 experienced violent “discipline” (physical punishment and/or psychological aggression) in the home in the month prior to the survey. Similarly, a statistics from UNICEF (2009) relating to the period 2001-2007, of girls and women aged 15-49, 59% think that a husband is justified in hitting or beating his wife under certain circumstances. Data from a study conducted in South Sudan in correspondence with the Global Initiative, in 2008, similarly, research by World Vision in a number of states in Southern Sudan found that corporal punishment of children in schools and families is a daily experience for the majority of children

In a survey conducted in 2011 in Zimbabwe, children age 13-17 years were asked about their experience of physical violence in the 12 months preceding the survey. The results show 44% of boys and 38% of girls had experienced physical violence perpetrated by their mothers; 46% of boys and 19% of girls experienced physical violence by their fathers; 95% of boys and 99% of girls experienced physical violence by teachers. In the same survey, people age 18-24 years were asked about their experience of physical violence prior to age 18 years, with mostly similar results: 43% of males and 59% of females had experienced physical violence perpetrated by mothers; 46% of males and 28% of females had experienced physical violence by fathers, and 95% of males and 99% of females by teachers. The survey report did not specify the extent to which the physical violence was inflicted in the guise of “discipline” or punishment.

In Mali, a 2009 study which involved interviews with 1,200 adults and 600 children aged 10-15, 83.3% of adults and 82.5% of children said corporal punishment happens in schools, despite it being prohibited. A large majority (89.1%) of respondents said corporal punishment has a negative impact on children. Over half the girls (55.7%) did not feel able to speak about their rights to an adult who had inflicted corporal punishment on them at school, and 53% of women did not feel able to speak about their child’s rights to an adult who had inflicted corporal punishment on their child. Half the respondents (50.6%) said they would not tell the authorities if they or their child experienced corporal punishment. Sixty-four per cent of respondents said violence in schools was partly due to a lack of teacher training. The report recommends prohibition of all corporal punishment, in line with the recommendations of the Committee on the Rights of the Child (Antonowicz, 2010).

2.5 Incidence of Corporal Punishment in Nigeria

The modern world contrasted with the traditional, whether in Ghana, Nigeria or elsewhere is riddle with deep cleavages, showing flagrant extremes of wealth and poverty, ownership and lack of possessions, ethnic and class divisions which cause bitterness and harm. Parents in modern times are themselves prey to the conflicting social pressures around them, rendering them insecure and lacking in confidence in themselves and their beliefs. Their position is made worse by the fragmented context of modern living and working typified in metropolitan centres like Accra, Kumasi, Lagos, Kano and Onitsha, where crime, hooliganism and gangsterism are the order of the day, communications and essential services are unreliable, all against a backdrop of environmental and ecological desecration. (Al Hassan, 2013).

The Prevalence of corporal punishment in Nigeria is high because it is believed among most parents as an appropriate way of training a child, and sometimes parental background is believed to affect the severity of punishment used on a child. In traditional African society, the use of the cane in behavior modification was very rampant. Parents administer the cane on the children. Though the importance of discipline in a society cannot be over emphasized, it is important to regularize the mode of administration.

Contrary to the evidence gathered from black families, evidence shows that parents are more power assertive and controlling in relation to their socio economic status. (McLoyd et al, 1994). For example, Horn et al, (2004) carried out a study which described and compared disciplinary beliefs and practices among African American parents from diverse socioeconomic backgrounds. Their results reveal that lower and middle/upper parents were reasonably similar with respect to disciplinary beliefs and practices. Exceptions to this generalization were that children from parents in lower class get spanked more for unsafe behavior, while children from middle/upper class receive more rewards to reinforce their positive behaviors. (Horn et al, 2004). In reference to social class, lower socioeconomic status has been associated with more frequent corporal punishment (Straus and Donnelly, 1994).

In early history of Nigeria, children were viewed as properties of their parents to do with as pleases. Most Nigerians believes harsh treatment is needed to train children. This method of discipline was passed from generation to generation. Parents think it's their right to maltreat their children and administer corporal punishment as they deem fit.

As part of growing up process children sometimes test their boundaries with adults. Sometimes they choose to misbehave just to see what the adults will do, to gain something, to know the extent at which the adult can go to punish them and so on. This seems to be a growing up process gone through by every child. Discipline teaches children right from wrong and what is acceptable and what is not. Providing appropriate discipline to children is one of the most essential responsibilities of a parent and providing consistent and positive discipline help children grow into responsible adults.

According to the Committee for Children (2004), the purpose of discipline is “to encourage moral, physical, and intellectual development and a sense of responsibility in children. Ultimately, older children will do the right thing, not because they fear external reprisal, but because they have internalized a standard initially presented by parents and other caretakers. In learning to rely on their own resources rather than their parents, children gain self-confidence and a positive self-image.”

A report carried out at the end of the Transforming Education for Girls in Nigeria and Tanzania (TEGINT) project, a 2007-2012 initiative to transform the education of girls in Northern Tanzania and Northern Nigeria, found that in Nigeria 71% of community members and 72% of girls agreed “it is not okay for teachers to whip a girl who comes late to school because she was caring for a sick relative”. The study involved surveys with 629 girls and 186 community members

According to UNICEF statistics collected in 2011, 91% of children aged 2-14 experienced “violent discipline” (physical punishment and/or psychological aggression) in the home in the month prior to the survey. Nearly eight in ten (79%) experienced physical punishment and 81% experienced psychological aggression (being shouted at, yelled at, screamed at or insulted). A smaller percentage (62%) of mothers and caregivers thought that physical punishment was necessary in childrearing

Nigeria’s first national Violence Against Children Survey (VACS) conducted in 2014 found approximately six out of every 10 children experience some form of violence; half of all children experience physical violence, with parents or adult relatives being the most common perpetrator. Male teachers are the most common perpetrators of the first incident of physical violence against children in the neighbourhood. One in six girls and one in five boys experience emotional

violence by a parent, caregiver or adult relative. The study notes that while it is not focused on acts of discipline, many of those perpetrating the violence may be doing so in the name of “discipline”.

2.6 Corporal Punishment and Children’s Right to Health

International law is clear that children have a right to protection from all corporal punishment in law and practice, in all settings including their homes. The Convention on the Rights of the Child obliges states to take all appropriate legislative measures to protect children from all forms of physical and mental violence. In its General Comment No. 8 (2006), on the right of the child to protection from corporal punishment and other cruel or degrading forms of punishment, the Committee on the Rights of the Child made it clear that the Convention requires states to prohibit and eliminate all corporal punishment, including in the home. All physical punishment, however “mild” and “light”, carries an inbuilt risk of escalation: its effectiveness in controlling children’s behavior decreases over time, encouraging the punisher to increase the intensity of the punishment (Elliman, 2000)

In United States Corporal Punishment has been a conventional method in disciplining children and youth since our colonial times (Hyman, 1196). Corporal punishment is a common method of disciplining children. In 1987 over 20 formal organization came together to form a coalition to ban the practice of physically punished children and youth.

In Europe Corporal Punishment is prescribed as well as Japan, Israel and other countries. One can trace the roots of corporal punishment in the United States to England, which remains the only European countries legally allowing it. In 1979 Sweden banned physical punishment by parents as well as in schools (Olson and Larzeler 1999), other countries have subsequently passed laws banning parents from spanking children, Norway, Denmark and Finland. (Larzeler, 1999)

In the United States, over 200 cities have banned the use of corporal punishment yet 23 states continue to authorize corporal punishment in their schools (Poole, 1991). Current research concludes that corporal punishment is not always used as a method of last resort and that there is an increase in violence in schools that make use of this technique (Hyman, 1996). Children who are spanked or subjected to other corporal punishment in their homes may arrive in school

already programmed to be aggressive (Eron and Block 1996). This tends to perpetuate the cycle of violence.

Current research has concluded that using positive reinforcement's techniques that reward appropriate behavior is more efficacious and long lasting than methods utilizing negative techniques. (Bengiovani, 1977). Children and adolescents can also be physically damaged by such punishment. Advocates of corporal punishment note that it should be proportioned out in limited doses, based on the offence and without attempt to physically harm. In the case of parents corporal punishment may have more to do with the parental mood than their children's actual misdeed (Holden, 1993). Therefore a very angry parent may administer punishment that actually harms the child.

The Convention on the Right of Child came into force in September 1990, with the aim of providing protection for children on a broad spectrum. The international community was determined to improve the legal status of children since the child in the past has been frequently regarded as an object of parents and guardians. The CRC 2006 states that With respect to State Parties obligation to protect children against corporal punishment, Article 19 of the CRC provides

“States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child”

In the last five years in Nigeria, there has not been any survey or studies undertaken to assess generally, the impact of legal measures to address violence against Children. However, there have been a number of studies on violence against children that highlighted the impact of some of the legal measures. Court structures that address violence against children, the CRA 2003, provides for family courts which will operate at the High Court and Magisterial levels, and have been vested with the jurisdiction to hear all cases in which the existence of a legal right, power, duty, liability, privilege, interest, obligation or claim in respect of a child is in issue, or any criminal proceedings relating to any offence committed by a child.

The National Human Rights Commission based in Abuja has the mandate and competence to receive and treat complaints in the area of children's rights violation including all sorts of violence against children. This is done through the office of the Special Rapporteur on Children, which was established in year 2000 and charged with the responsibility of monitoring, investigating, conducting researches and providing legal assistance to child victims of violence and human rights abuse.

Despite Nigeria being a signatory to most human rights treaties, there is still gross violation of children's rights. (Olowu, 2010) The northern penal codes expressly express the use of corporal punishment and parents also affirm that government should not interfere, any government intervention is considered as sabotage on the culture in question. (Uzodike, 1990)

2.7 Perceptions of Parents and Teachers on Consequences of Corporal Punishment Method on Children

In parenting styles, older parents were more likely to use democratic involvement in their parenting styles than younger parents, while younger parents were more likely to score higher on corporal punishment. Similarly, parents of younger children scored lower on democratic participation, induction and reasoning. Overall, parents of young children (0-4 years) engaged less frequently in authoritative parenting behaviors than parents of older teenagers (15-17 years).

On parental attitudes in adopting Physical Punishment there was no clear consensus in terms of parents' attitudes towards smacking. With regard to attitudes towards the potential effects of physical punishment, on the one hand, the majority of parents believed that the odd smack does not do a child any harm. On the other hand, the majority of parents also believed that it is not necessary to use smacking to bring up a well behaved child. Similarly, approximately equal proportions of parents agreed and disagreed that smacking can damage the parent-child relationship, that smacking can be necessary as a last resort, and that children who are smacked are likely to be more aggressive (Ann Marie Halpenny, Nixon and Watson, 2010)

Research reveals that the excessive use of corporal punishment has been associated with a number of adult social and psychological problems, including physical aggression and depression (Swinford et al, 2000).

White and Smith (2004) conducted longitudinal study of the relationship between childhood victimization experiences and sexually coercive behaviors during adolescence. Their results

indicate that males who were physically punished, sexually abused, or who witnessed domestic violence in childhood were at greater risk for sexual perpetration in high school (White and Smith, 2004). As mentioned earlier, many of the studies assume that a significant relationship exists between corporal punishment and delinquent behavior among youth. From a critical standpoint, the majority of the studies fail properly define what constitutes corporal punishment. In many cases, there is no distinction between what is deemed corporal punishment and physical abuse. In addition, many of the studies do not consider other parent-related variables (e.g. swearing, poor or lack of parent-child interaction, etc.) that may cause delinquent behavior among youth.

2.8 Perceived Health Consequences of Harsh Method of Child Discipline

Direct harm of Physical Punishment

Physical punishments are intended to hurt, and in studies from around the world which ask children their views of physical punishment, children consistently state that it is physically painful. Most children complain physical punishment hurts them in a number of ways than just physically.

- **Physical health**

In a study of 3,355, age 13- to 19-year-old students by Fox (2011) in Hong Kong, China found that those who had experienced corporal punishment in the past three months were more likely to feel that their health was poor and to experience physical illnesses (for example asthma), injuries and accidents, as well as anxiety and stress. Those who had experienced corporal punishment in the past three months were more than twice as likely to have stayed in hospital in the past three months as those who had not (Fox,2011).

Indirect harm of physical punishment

- **Emotional health**

Major study involving men in Brazil, Chile, Croatia, India, Mexico and Rwanda found that those who had experienced violence, including corporal punishment, during childhood, were more likely to perpetrate intimate partner violence, hold inequitable gender attitudes, be involved in fights outside the home or robberies, pay for sex and experience low self-esteem and depression, and

were less likely to participate in domestic duties, communicate openly with their partners, attend pre-natal visits with a pregnant partner and/or take paternity leave, experience depression and high level of fear, behavior, anxiety, or disruptive disorders(Contreras, et al (2012)

- **Psychological health**

Psychological health signs includes; Self-esteem, mental harassment, feeling of helplessness, worthlessness, depression, inhibition, aggression, shame and self- doubt, guilt, social withdrawal, feeling of inferiority, rigidity, lowered self-esteem, stress and heightened anxiety which may reduce his/her self-confidence.

- **Mental health**

Adolescents who have received corporal punishment may likely establish this behaviours; Resentment, deviant behavior, aggression, thefts, truancy, absence from school, lying, cheating, adolescents delinquency and violent acts

Other consequences of corporal punishment include, survivors of childhood abuse often suffer from health problems long after the abuse has ended. Abuse survivors are sick more often and go to the doctor more (Felitti, 1991). They report more symptoms and are less likely to describe their health as good. They have surgery more often, almost twice as much (Kendall-Tackett, Marshall, & Ness, 2000). Adult survivors are at increased risk of having one or more chronic pain syndromes (Drossman et al., 1990; Kendall- Tackett, 2000; Schofferman, Anderson, Hinds, Smith, & White, 1992). And in the Adverse Childhood Experiences (ACE) study, Felitti and colleagues, 2001 found that subjects who experienced four or more types of adverse childhood events were at increased risk of a wide range of conditions including ischemic heart disease, cancer, stroke, chronic bronchitis, emphysema, diabetes, skeletal fractures, and hepatitis. The childhood events that they studied included psychological abuse, physical abuse, contact sexual abuse, exposure to substance abuse, parental mental illness, exposure to violent treatment of the mother or stepmother, and exposure to criminal behavior.

A study was carried out by Adegbehingbe and Ajite in (2013) to determine the contribution of corporal punishment to ocular morbidity and visual impairment in Nigerian children. Prospective

study was conducted of all patients aged 0-15 years seen with ocular injuries over a four year period. Those who sustained ocular injuries during the administration of corporal punishment were further studied. Results showed that a total of 186 children were seen within the study period. Eighty-nine (47.8%) had ocular injuries and (30.3%) had ocular injuries resulting from corporal punishment. The study concluded corporal punishment is a major cause of ocular morbidity and blindness in Nigerian children.

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2.9 Conceptual Framework

This study is about researching various methods of child discipline by parental disciplinary practices. Their impact on children's health will also be considered within a conceptual framework namely; Social learning theory.

Conceptual framework of the study

Social Learning Theory

Social learning theory emphasizes the importance of observing and modeling the behavior attitude and emotional reaction of others. One overarching theoretical perspective behind parental discipline is that of social learning theory. Within this approach, mechanisms of reinforcement (or reward) and punishment are central to learning and socialization. Punishment is defined as the presentation of an aversive stimulus or the removal of a positive stimulus.

Value Expectancies: These seek to explain how the environment influences a child's behavior. "Spare the rod and spoil the child" King James Version, some of other versions of these adage. English standard version said "whoever spares the rod hates his son, but he who loves him disciplines him diligently" There are so many version of this proverb that different communities believe in that influences method of child discipline for their children . An argument stated by Straus believed that whatever the parents do is naturally adopted by children later. (Straus, 1991). Of course, discipline is not synonymous with punishment. According to principles of learning, punishment following a specific behavior is likely to lessen the likelihood of that behavior being repeated. Punishment can be an effective agent for behavioral change, but for punishment to work it has to be administered immediately after a child commits an offense. (Domjan, 2000). Thus, according to learning principles, physical punishment must be administered severely enough to ensure that it is a negative consequence for the child, in order for it to successfully suppress behavior. This, according to some, may become a recipe for physical abuse and injury, rather than effective discipline (Holden, 2002). "In modern social learning theory, children learn through observation and limitation of models in their environment" (Bandura, 1986).

Parents provide information to children about their lifestyle generally; parents then tries to promote good behavior and discourage bad behavior. They model a lifestyle to be emulated by children. They reinforce actions by punishing children for negative behavior. (Eisenberg and Valiente, 2002). In this current study a commonly used argument against physical punishment draws on social learning theory to argue that parents who use physical punishment with their children model aggressive behavior. In many cultural groups, while mothers do every day parenting, the father is thought to be the “main disciplinarian” The mother waits until the father comes back from an outing, inform him of the child transgressions and expect he would punish the child/children, this was for instance the pattern of study of parent child relationships in Australia (Russel, 1998)

Self-Efficacy: According to Albert Bandura, self-efficacy is "the belief in one's capabilities to organize and execute the courses of action required to manage prospective situations." In other words, self-efficacy is a person's belief in his or her ability to succeed in a particular situation. Hoffman proposed that *power-assertive techniques* – such as physical force, deprivation of privileges or possessions, direct commands or threats – are detrimental to socialization because they arouse fear and anxiety in the child. They provide a model of aggression to the child, heighten the child's view that the moral standard is external to the self, and direct the child's attention to the consequences of the behavior for the self rather than for other people. (Hoffman, 2000) Child maltreatment and abuse reduces a child self-efficacy and self-esteem, which directly affect their mental health.

According to (Albert Bandura, 1977), People with a strong sense of self-efficacy:

- View challenging problems as tasks to be mastered
- Develop deeper interest in the activities in which they participate
- Form a stronger sense of commitment to their interests and activities

According to (Albert Bandura, 1977), People with a weak sense of self-efficacy:

- Avoid challenging tasks
- Focus on personal failings and negative outcomes
- Quickly lose confidence in personal abilities

Observational Learning: According to Albert Bandura “Observational learning is often linked to negative or undesirable behaviors, but it can also be used to inspire positive behaviors” A great deal of learning takes place much more subtly and relies on observing the people around us and modeling their actions. Parental discipline will influence long-term practice of how children acquire the motives, values and behavior of their parents and of society through the process of internalization (Grusec and Goodnow 1994). The abused or maltreated person might think that is the normal way of disciplining a child and adopt that method as an adult too, but if parents adopt proper method of child discipline the society will be a better place because that is what the children will also emulate.

In summary, we can see how features of social learning theory can guide behaviour through associating stimuli from the environment in positively or negatively terms or observation learning which influences motives, values and also behaviours. In the present study, Observation, person’s belief and parental discipline are three variables that represent environmental stimuli teens ‘encounter daily, and through varying interpretations of these stimuli can guide their outlook. The mode of discipline they experience can affect their health in more ways than just physically. Social learning theory takes in cognizance what the adolescents has observed from its environment and the experiences of physical punishment in the adolescent home to explain how it eventually influence the adolescent’s self-efficacy and value expectancy, it also takes in cognizance how these experiences can affect their perception and their behaviour to their children or spouses as an adult. Social Learning Theory is used as a conceptual framework to identify relevant cognitive, environmental, and behavioural variables, and test how they may influence the experiences of corporal punishment among adolescents and their perceived health consequences.

Application of Social Learning Theory to the Study

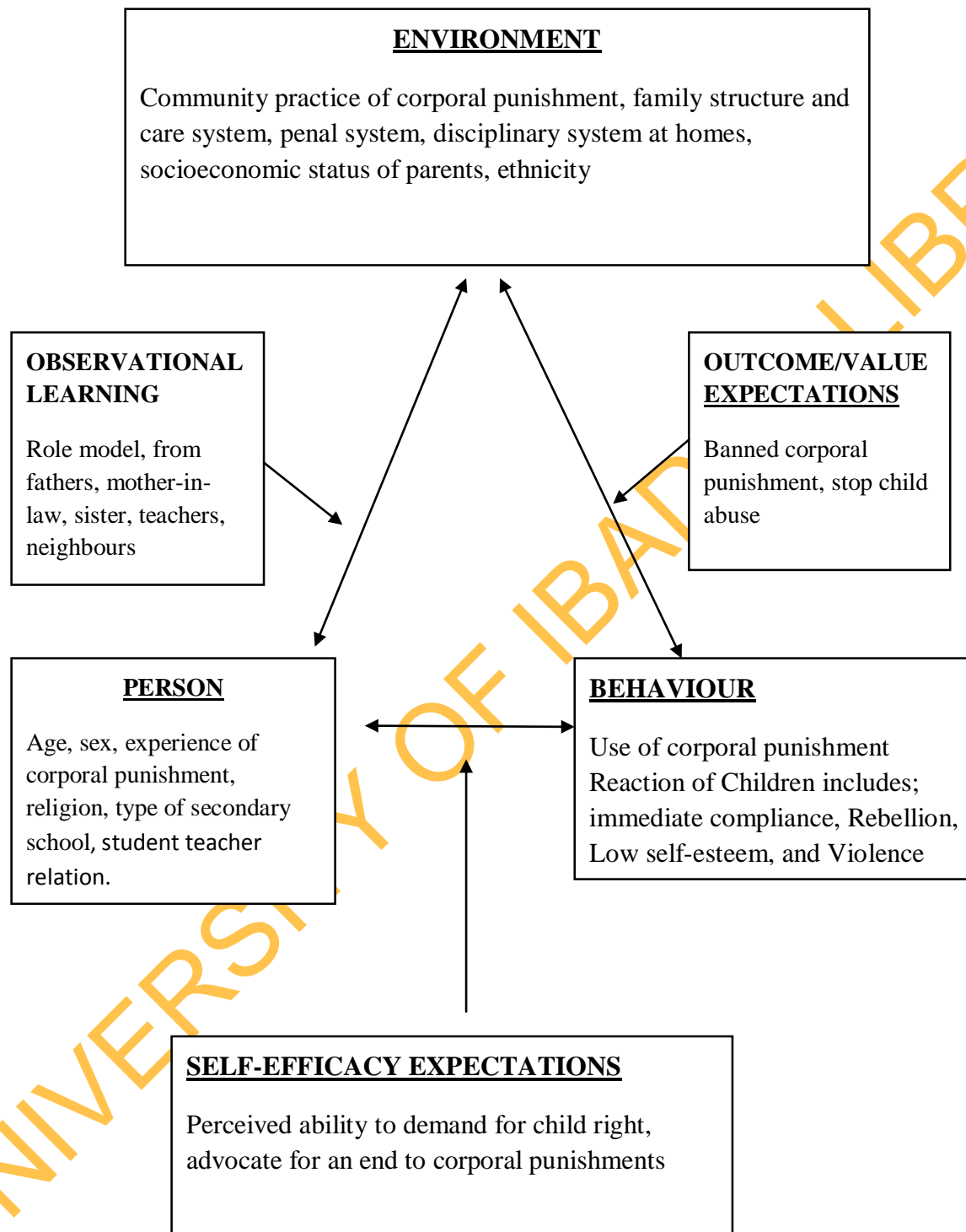


Figure 3.1 Application of Albert Bandura Social Learning Theory, 1977

CHAPTER THREE

METHODOLOGY

3.1 Study Design

This study was descriptive cross-sectional in design. The design was considered appropriate for this study because it helped to provide a wide base information and data collection that was used to answer the research hypotheses. The descriptive Cross-sectional survey research design was used to assess the adolescent background and their experiences of physical punishment and its perceived health consequences as well as all methods of child discipline used by parents on adolescents in senior secondary school students in Ibadan North East Local Government area.

3.2 Study Area

The study was conducted in Ibadan North East Local Government area of Oyo state. Ibadan is located in the South-western part of Nigeria, 128km inland northeast of Lagos and 530km southwest of Abuja, the federal capital, and is a prominent transit point between the coastal region and the areas to the north. Ibadan North East Local Government was created on 27th August 1991, by the administration of former Head of State General Ibrahim Badamosi Babangida. It was carved out of the defunct Ibadan Municipal Government and derived its name from the metropolitan nature of the area. It covered then (12km radius with the Mapo as the centre). Ibadan North is Local Government Area in Oyo State, Nigeria. Its Headquarters are on Iwo road. It has an area of 18 km and a population 330,399 at the 2006 census. The expected projected population of the local government as at 2012 is 367,912. There are 11 registered public and 8 registered private senior secondary schools in the local government. Public and private senior secondary schools in Ibadan North-East local government area was recruited for the study. (LIE Officer of Ibadan North-East Local Government, 2011).

3.3 Study Population

- The study was conducted amongst adolescents in senior secondary school (SS1-3) in Ibadan North East Local Government Area

3.4 Sample Size Determination

Minimum sample size was calculated using the sample size formula stated below;

$$N = \frac{Z^2 \cdot P \cdot (1-P)}{D^2}$$

Where

Minimum sample size was calculated using the sample size formula stated below;

- Where n= minimum sample size
- $Z\alpha$ = constant with 95% confidence interval = 1.96
- D is the margin of error = 0.05
- P= 30.3% i.e. prevalence of ocular injuries resulting from corporal punishment (Adegbehingbe et al., 2007).

$$Q=1-p=1-0.303= 0.697$$

$$n = \frac{1.96^2 \times 0.303 \times 0.697}{0.05^2} = 325$$

Non response rate sample size will be calculated to get enough sample size which = Margin of error tolerated (usually set at 0.05). To take care of non-response rate, 10% of the calculated sample size was added to make a total sample size of 360 respondents to be drawn from the population and will be the sample for the study.

3.5 Sample and Sampling Technique

A four stage sampling technique was used for the study to select be used. Schools was firstly stratified into public and private schools. Second stage involved a simple random sampling to select either the public or the private school. Proportionate sampling method was used in third stage to determine the number of students that was selected from the classes in each school. The last stage was Systematic random sampling which was used to select student for the required number of the respondents.

Inclusion Criterion

All consenting in-school adolescents who fall within the age range of 10-19 years of the adolescent age whose parent has signed the informed consent form and such adolescent also provided informed consent were invited to participate in the study. The study only invited participants within the class of SS1-SS3.

Exclusion Criterion

All potential respondents who fall below the age of 10 years were excluded from participating in the study. Similarly all participants who provided informed dissent will be excluded from the study.

3.6 Instrument for Data Collection

The instruments used for the data collection in this study were questionnaires. The instrument was administered to the student of Ibadan North east local government area of Oyo state. Informed consent form were given to all the students present during the introduction of study to the class, Among the consent form returned, those whose forms were not filled at all and confirmed their parents looked at it were excluded from the study, all filled consent forms of student below 18 years were received, some of the respondents have uneducated parents who designated an appropriate guardian to sign the consent form on behalf of the respondents, those students were also included to be part of the survey. The questionnaire was divided into 6 sections (section A, B, C, D, E and F). Section A was used to obtain information on the demographic attribute of the respondents while section B to F was used to elicit information in line with the variables to be tested in the hypotheses. (See Appendix II). The study was conducted using quantitative method. The questionnaire was semi structured with open and closed ended questions.

Section A: Socio demographic characteristics

Section B: To document the method of child discipline currently used by caregivers

Section C: To document the experiences of physical punishment among adolescents by their caregivers.

Section D: To identify the reasons for applying corporal punishment as given by the caregivers in relation with offences committed by the adolescent

Section E: To identify the perceived health consequences of corporal punishment on the adolescent.

Section F: To assess adolescent's perceptions on appropriate method of discipline in Ibadan north local government

3.7 Validity of the Study Instrument

To ensure the validity of the instruments, literature review was done explicitly on variables of study; the result of literature was used to develop the instrument used. The instruments was presented to the researcher's supervisor and other lecturers in the Department of Health Promotion and Education, Faculty of Public Health, College of Medicine, University of Ibadan, Ibadan as well as other experts in the field of Health Promotion and Education and related disciplines for content and construct validity. Comments, suggestions and modifications from the experts was studied carefully and explored to improve the quality of the instruments for thorough validation in relation to the stated research questions and hypotheses.

3.8 Reliability of Study Instrument

After the pre-test the data were checked for completeness, sorted and cleaned. A coding guide was developed and used to facilitate the entry of the data into the computer. Subsequently, the data was analysed using descriptive statistics. The data was then been subjected to Cronbach alpha statistical test to measure the instruments internal consistency, that is, how closely related a set of items are as a group. In this test, a result 0.74 was obtained which proves the instrument to be reliable as the closer the value of the reliability test to 1, the more reliable is the instrument. The result of the pre-test was used to adjust and modify questions that are ambiguous to respondents. The Pre-test of the instrument was conducted in a different school in Lagelu local government with the same characteristics to that of the main study of the study population.

3.9 Ethical Consideration

Prior to the commencement of the study, ethical approval was obtained from Oyo state Ethical Review Committees (See appendix III). The committee ensured that the research work conforms to the generally accepted scientific principles and international ethical guideline required in human subjects research and to review the ethical components of the study. Permission

was obtained from the State Ministry of Education and permission from the principal of each school. Written informed consent was obtained from respondents' parents. Ethical issues like confidentiality, opportunity to decline interview at any stage and non-exposure to risk was also be discussed with each respondents. Only respondents who are able to give informed consent either from their parents or guardian were recruited into the study. The written consent was obtained which required their signatures and date appended on the consent forms with a copy given to the research participants for future referencing and use by the respondents. They were informed that participation is voluntary and that data collected would be used mainly for research purposes. Anonymity and confidentiality of their responses was also ascertained.

3.10 Data Collection Procedure

Two research assistants were recruited and trained to administer the instrument to the target groups. Research assistants were retrained on confidentiality, sampling methods and necessary procedures needed to administer and collect instruments from target group. Quantitative data were collected from the students through a questionnaire. The aim of the questionnaire was to investigate the experience of corporal punishment and their perceived health consequences among adolescents in Ibadan North East Local Government Area, Oyo state. The questionnaires were administered by the research assistants during school hours when students were in their respective classes. Instruction and direction on how to respond to the items in the questionnaire was read by the researcher. Minimum sample size was calculated to be three hundred and twenty five (325), and to take care of non-response rate, 10% of the calculated sample size was added to make a total sample size of 360 respondents drawn from the population. A total of three hundred and sixty (360) questionnaires were administered but three hundred and thirty (330) questionnaires were properly filled and was analysed for the purpose of this study.

3.11 Data Management and Analysis

The data collected was checked for completeness and accuracy in the field. Serial number was assigned to each questionnaire for easy identification, recall of any instrument with problems for correct data entry and analysis. A coding guide was prepared to facilitate data entry and a template was also prepared on SPSS version 20. The data was then compiled, cleaned, entered and analysed using the statistical package for social sciences (SPSS). The administered copies of

the questionnaires was then coded and entered into the system. The data was then analysed using descriptive statistics and inferential statistics such as Chi-square test and Fisher's exact test at $P = 0.05$. The assessment of adolescent's perception on health consequences of different methods of child discipline in Ibadan North Local Government was measured on a 32 point scale. Scores of 16 and above had a "Negative Perception of Health Consequences as a result of corporal punishment" while scores of 15 and below had a "Positive Perception of Health Consequences as a result of corporal punishment"

The assessment of adolescent's perceptions on appropriate method of discipline in Ibadan North Local Government was measured on a 10 point scale. Scores of 6 and above were tagged as "Negative Perception of Physical Punishment as an appropriate method of discipline" while scores of 5 and below were said to mean a "Positive Perception of Physical Punishment as an appropriate method of discipline"

3.12 Limitation of the study

Respondents might have held back information about their experiences of corporal punishment because it is a sensitive issue and most people do not like talking about their families to others. However an effort was made to reduce this limitation by assuring the respondents of the confidentiality of the information provided. Also, the Oyo state strike was a challenge as it delayed the collection of questionnaires especially among public schools but activities was resumed and we were able to enroll public student in participating in the survey.

CHAPTER FOUR

RESULTS

4.1 Socio-Demographic Characteristics of the Respondents

A total of 330 in-school adolescent's questionnaires copies were analysed in this study, and socio-demographic characteristics of the respondents were presented in table 4.1.1 below. Both males and females participated in the study while majority (60%) of the respondents were males. Majority (88.2%) of the respondents are between 13-15 years old with mean age of 15.2 ± 3.1 .

The respondents were selected from 10 secondary schools. Five of these were privately owned and the other five were owned by the government in Ibadan North East Local Government. Overall, 49.1% of the respondents were from public schools while 50.1% were from private schools.

Majority (47.6%) of the respondents were in SSS.3 and most (30.0%) of the participants were in Science class.

More than half of the respondents (49.1%) were Muslims and very few (3.9%) are Traditional worshipper. A greater proportion (88.5%) of the respondents were Yoruba's and others from Hausa, Igbo and Epira ethnic group. (See details in 4.1.1)

Table 4.1.1 Socio-Demographic Characteristics of Students

(N=330)

Socio-Demographic Characteristics		Frequency	Percentage
Age	10-12	34	10.3
Group (Years)	13-15	291	88.2
	16-19	5	1.5
Gender	Male	198	60.0
	Female	132	40.0
Religion	Christianity	155	47.0
	Islam	162	49.1
	Traditional	13	3.9
School Types	Public school	162	40.1
	Private School	168	50.9
Class	SS1	123	37.3
	SS2	50	15.2
	SS3	157	47.6
Arms	Science	164	49.7
	Art	99	30.0
	Commercial	67	20.3

Mean Age of students = 15.2 ± 3.1

Others include Hausa (2.1%) and Epira (2.8%)

4.1.2 Socio-Demographic Characteristics of Parents

A total of three hundred and thirty (330) questionnaires were analysed and the socio-demographic characteristics of the respondents' parents were presented in the table 4.1.2 below. Majority of the respondents have fathers above 50 years (36.1%), and the least (3.9%) age categories were 21-30 years. Most of the respondents have mothers between 31-40 years of age (43.9%) and the least (12.4%) age group were 21-30 years.

Majority of the respondent's father (49.7%) completed their tertiary education and only a few of the respondent's father has no formal education at all (3.3%). Most of the respondent's mother (38.8%) completed secondary school education. Majority of the respondent's parent are living together (89.1%). Great proportion (76.7%) the respondents were from a monogamous family. Greater proportion of the respondents have between 1-5 siblings (85.8%). (See details in 4.1.2)

Table 4.1.2 Socio-Demographic Characteristics of Parents

N=330

Socio-Demographic Characteristics		Frequency	Percentage
Father's Age (Years)	21 - 30 years	13	3.9
	31 - 40 years	93	28.2
	41 - 50 years	105	31.8
	Above 50 years	119	36.1
Mother's Age (Years)	21 - 30 years	41	12.4
	31 - 40 years	145	43.9
	41 - 50 years	90	27.3
	Above 50 years	54	16.4
Father's Highest Level of Education	No Formal Education	1	0.3
	Arabic Education	24	7.3
	Completed Primary	27	8.2
	Completed Secondary	114	34.5
	Completed Tertiary	164	49.7
Mother's Highest Level of Education	No Formal Education	11	3.3
	Arabic Education	18	5.5
	Completed Primary	30	9.1
	Completed Secondary	128	38.8
	Completed Tertiary	143	43.3
Type of Family	Mono-gamous	233	70.7
	Poly-gamous	77	23.3
No of Siblings	0-4	251	76.1
	5-9	71	21.5
	10-14	7	2.1
	15-18	11	3.3

4.2 Methods of Child Discipline Adopted by Parents and Caregivers

Mode of Child Discipline

For those who experienced physical punishment according to the findings, fathers employ the use of physical punishment (57.2%) as well as mothers (51.4%). Non-Physical punishments was also been used by fathers (15.2%) and mothers (29%). The table clearly shows that physical punishment (57.2%) is more prevalent as a mode of discipline compared to non-physical punishment (51.4%) among fathers. Also, among mothers physical punishment (51.4%) is also the most common mode of punishment compared to non-physical (29%) punishment. In the study findings it was revealed that adolescents have experience physical punishment more from fathers (47.9%) than mothers (44.5%). Also, adolescents have experienced non-physical punishment from mothers (25.2%) than fathers (12%). Adolescents have experienced physical and non-physical types of punishment (19.6%), (23%) from mothers and fathers respectively. Some adolescents reported they have never been punished either by their fathers or mothers. (See details in Figure 4.2.1).

When asked if the respondents have been punished by their relatives before, majority answered “no” (57.0%), while religious leaders frequency of physical punishment is also high with (61.5%), housekeepers also contributes to using physical punishment on respondents (18.9%) and friends of the family also punish some of the respondents physically (19.6%). (See details Table 4.2.2)

Mode of Punishment Adopted by Parents

Majority (53.3%) of respondents reported the use of objects as a mode of punishment from their fathers and the use of objects (62.1%) is also is also reported to be used by mothers in great proportion. The most common form of physical punishment used by mothers is the use of painful body postures (40.0%) as a mode of discipline. (See details in table 4.2.3)

On the use of non-physical punishment by fathers, majority reported doing house chores was the most common form of non-physical punishment (47.6%). Starvation (30.0%) i.e. not giving kids food as a form of non-physical punishment is also a mode of discipline used by fathers. On the use of non-physical punishment by mothers, majority reported doing house chores was the most

common form of non-physical punishment (52.4%), a great proportion also reported grounding i.e. withdrawing of their privileges at home as a form of non-physical punishment (43.3%), parents also refuse their children from visiting friends (34.5%), scolding (30.0%) and starvation (27.9%) i.e. not giving kids food as a form of non-physical punishment is also a mode of discipline used by mothers. (See details in table 4.2.4)

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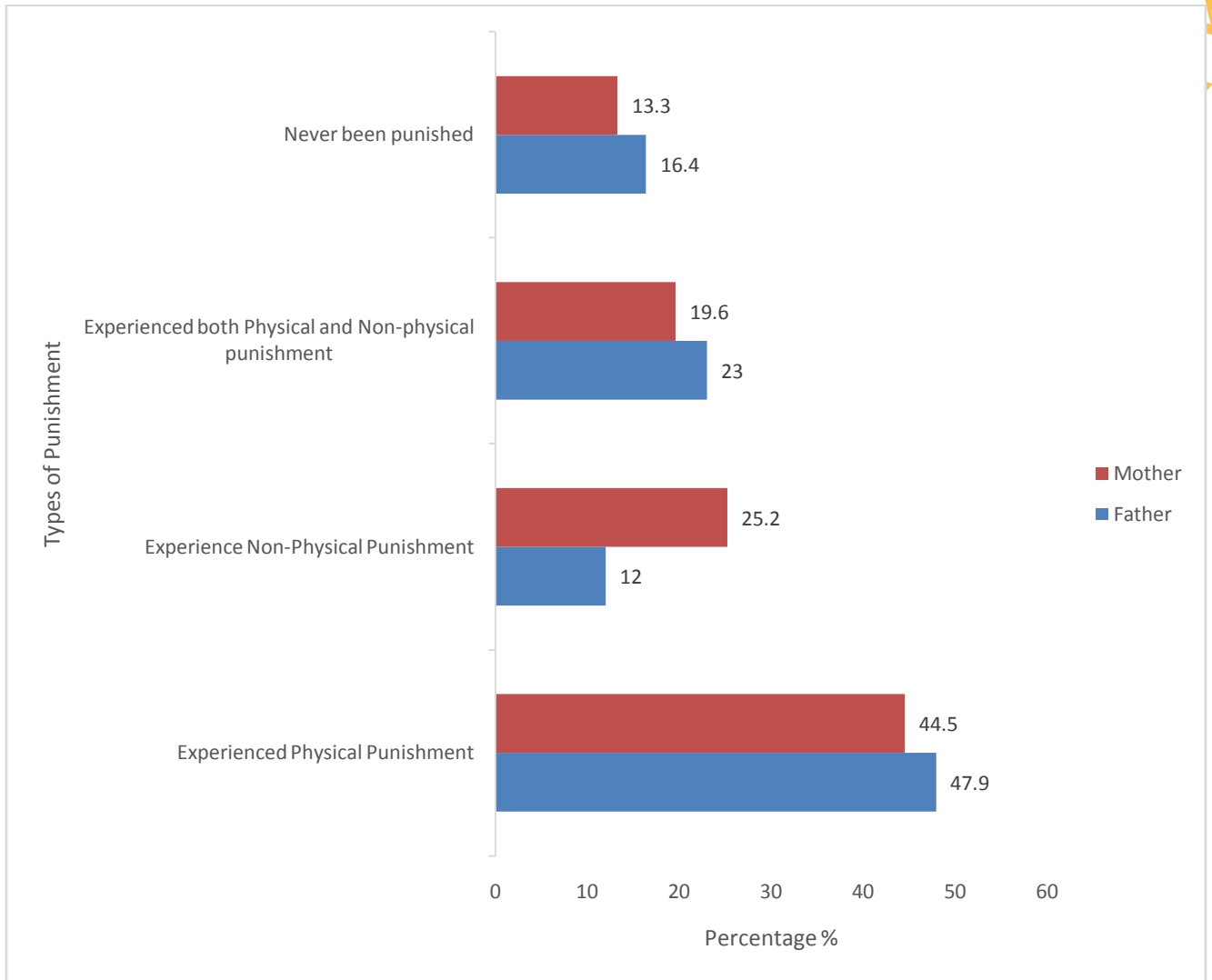


Figure 4.2.1: Mode of Child Discipline

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Table 4.2.2 Mode of Child Discipline

Mode of Child Discipline	Frequency	Percentage
Ever experience physical punishment perpetrated by relatives before? (n=330)	142	43.0
	188	57.0
Other perpetrators (n=148)		
Friends of the Family	29	19.5
House Keeper/Help	28	18.9
Religious Leaders	91	61.5

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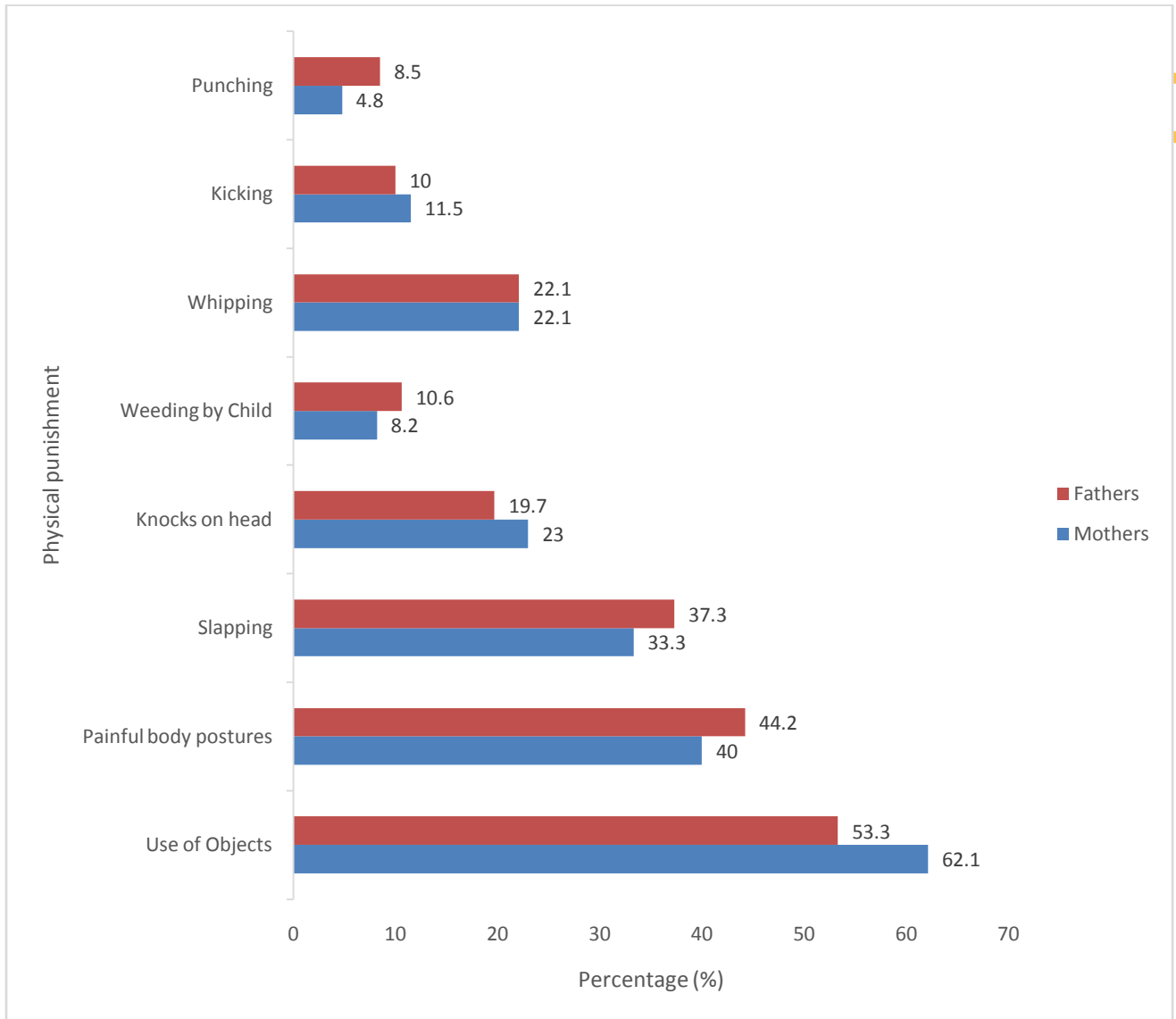


Figure 4.2.3: Physical Punishment adopted by Parents

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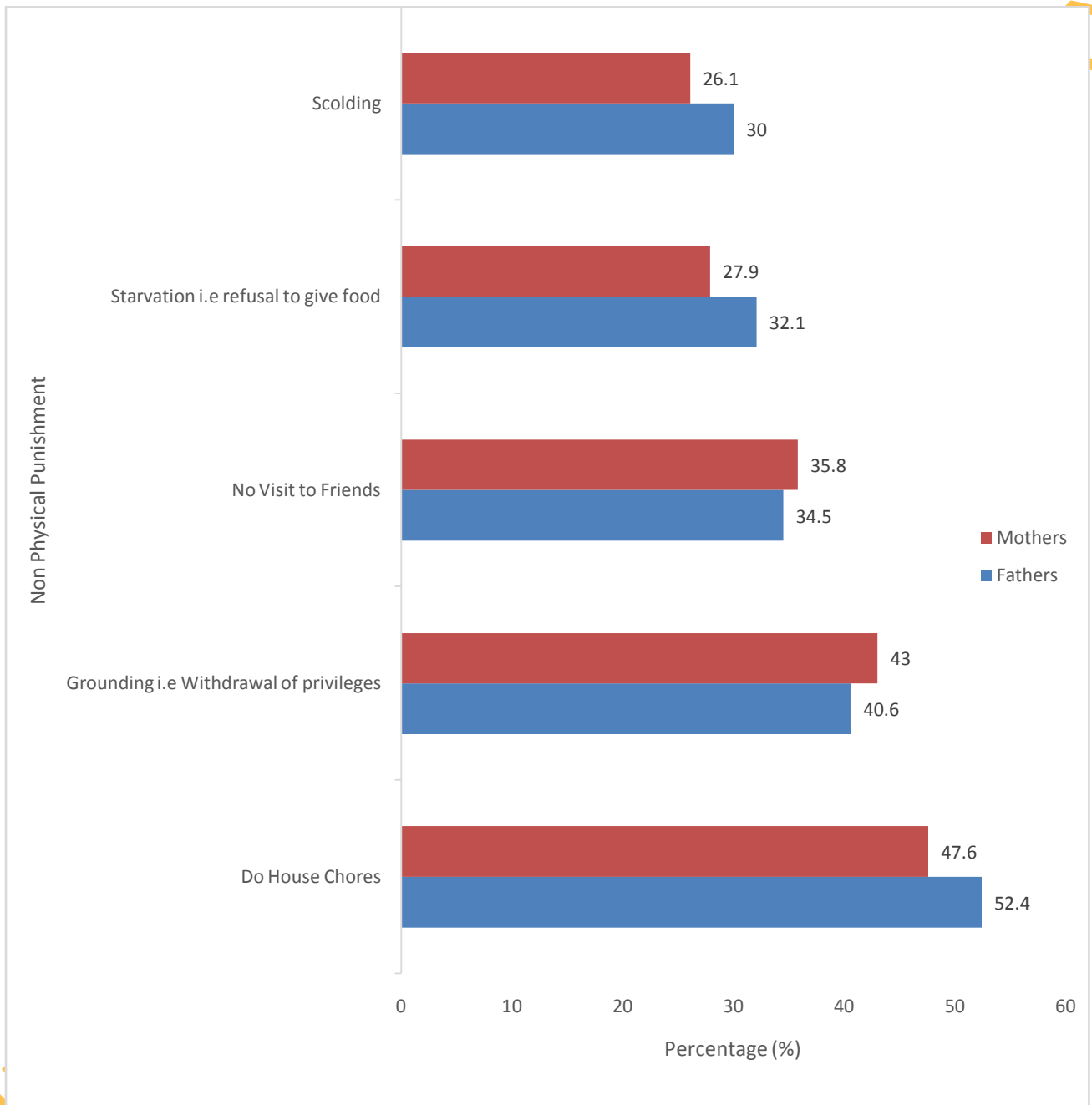


Figure 4.2.4: Non-Physical Punishment adopted by Parents

4.3 Experiences of Physical Punishment on Adolescents by their parents

Experiences of punishment within the last one month

Majority of the respondents experiences of punishment within the last one month includes slapping, knock on head, weeding of grass, painful body postures, washing of plates and clothes (47.6%), Beating with cane, Kneeling, Slapping, kicking was also reported by great proportion (97%) of the respondent. (See details in table 4.3.1)

Perpetrators of Physical Punishment within the Last one month

Within the last one month the study reveals that fathers are the highest (17.9%) perpetrators of physical punishment. Both parents are the majority perpetrators of Corporal punishment (46%) when compared with other caregivers that participated in discipline of respondents. Adolescents have also received punishment within the last one month from relatives (8.3%), siblings (3.8%) and teachers (8.9%). (See details on Table 4.3.2)

Regularity of Physical Punishment

Majority of the respondents said “not so often” when asked about the regularity of punishment (34.8%), great proportion (26.5%) of the respondents admits they get punished once in a month and a few (7.1 %) respondents said they get punished every day. (See details in figure 4.3.3)

Medical Treatment after Sustaining Injury Due To Physical Punishment

According to the findings majority (59.40%) of the respondents said yes to being treated after sustaining injury due to physical. (See details in table 4.3.4)

Table 4.3.1 Experience of Physical Punishment in the Last One Month by Parents (Physical and Non-physical punishment)(N=289)

Mode of punishment	Frequency	Percentage
Slapping, knock on head, weeding of grass, painful body postures ,washing of plates and clothes	138	47.6
Beating with cane, Kneeling, Slapping, kicking	97	33.6
Kneeling, Carrying of stone or chair, beating with belts and knock on head	20	6.9
Scolding	16	5.5
Deprive from watching Tv, eating, playing games & Beating	6	2.0
Fetch Water, Wash Plates & Clothes	5	1.7
Kicking	3	1.0
Frog Jumps	4	1.4

*Missing responses were left out

Table 4.3.2 Perpetrators of Corporal Punishment within the Last One Month

(n=291)

Socio-Demographic Characteristics	Frequency	Percentage
Both Parents	134	46.0
Father only	52	17.9
Mother Only	44	15.1
Teacher	26	8.9
Relative	24	8.3
Siblings	11	3.8

****Missing Responses were left out**

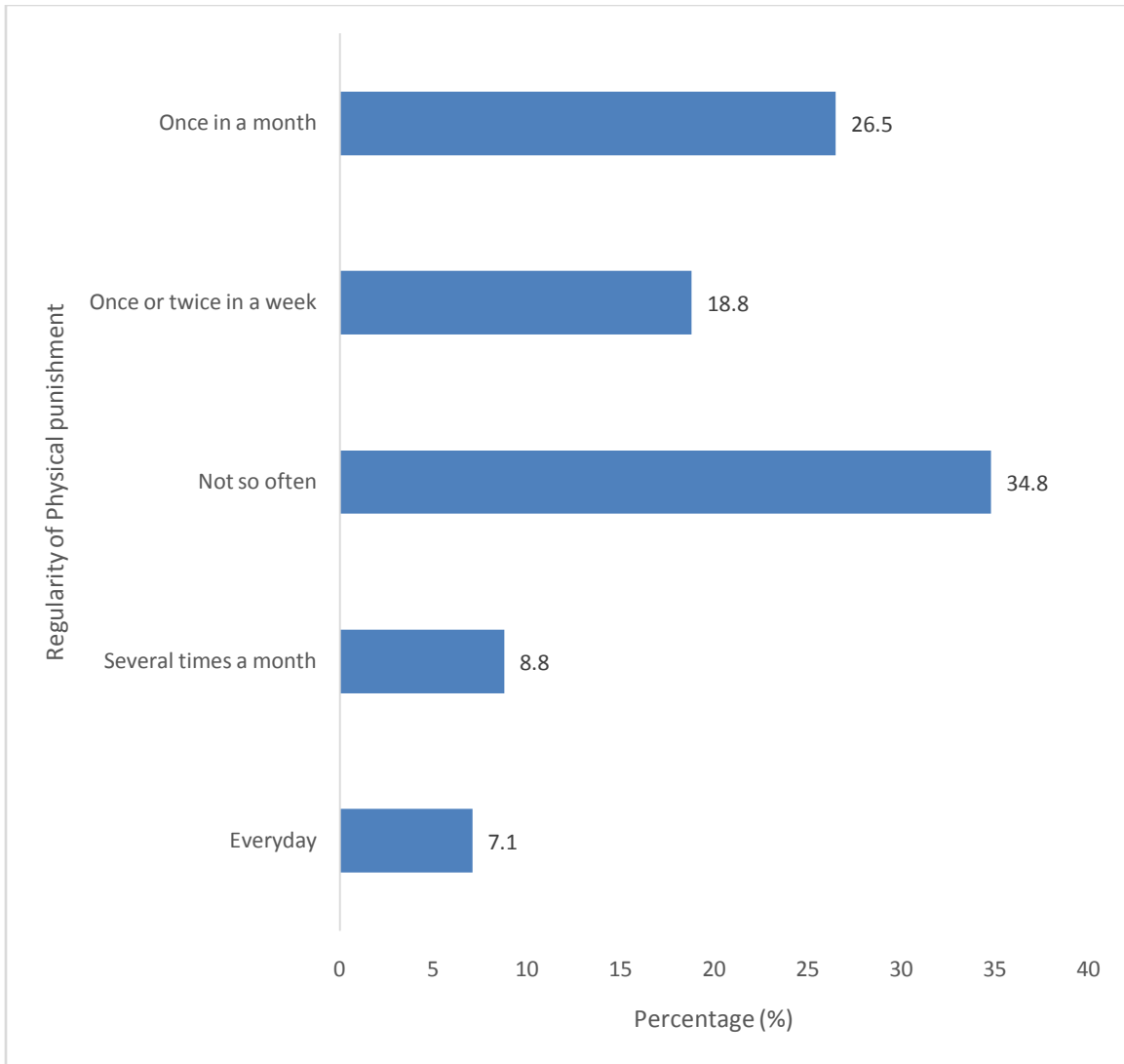


Figure 4.3.3 Regularity of Physical Punishment (N=299)

Table 4.3.4 Treatment after Sustaining Injury Due To Physical Punishment

Medical Treatment	Frequency	Percent
Yes	196	59.4
No	134	40.6
Total	330	100.0

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4.4 Reasons for Applying Corporal Punishment As Given By the Caregivers in Relation with Offences Committed By the Adolescent

Reasons for Applying Corporal Punishment

According to the study findings when respondents were asked for reasons for applying corporal punishment, Majority reported they were punished for flaunting rules at home (36.1%), and the least reason for punishment reported by respondent is taking something that does not belong to them (5.50%). (See details in Figure 4.4.1)

Adolescents Opinions of the Last Punishment Experienced

When respondents were asked about the opinions of the last punishment experienced, greater proportion (56.7%) of the respondents believe punishment experienced was justified.(See details in figure 4.4.2)

Adolescents Opinions of the Last Punishment Experienced compared to demographic variables

The result findings in this study shows that there is a statistical significant association between the class arms of respondents and their justification of corporal punishment received ($X^2=24.431$; $P<0.001$). There is no statistical significant association between the gender and age and the justification of corporal punishment. This means that age and gender does not have a significant influence on corporal punishment whether punishment was justified or not. (See details in Table 4.4.3)

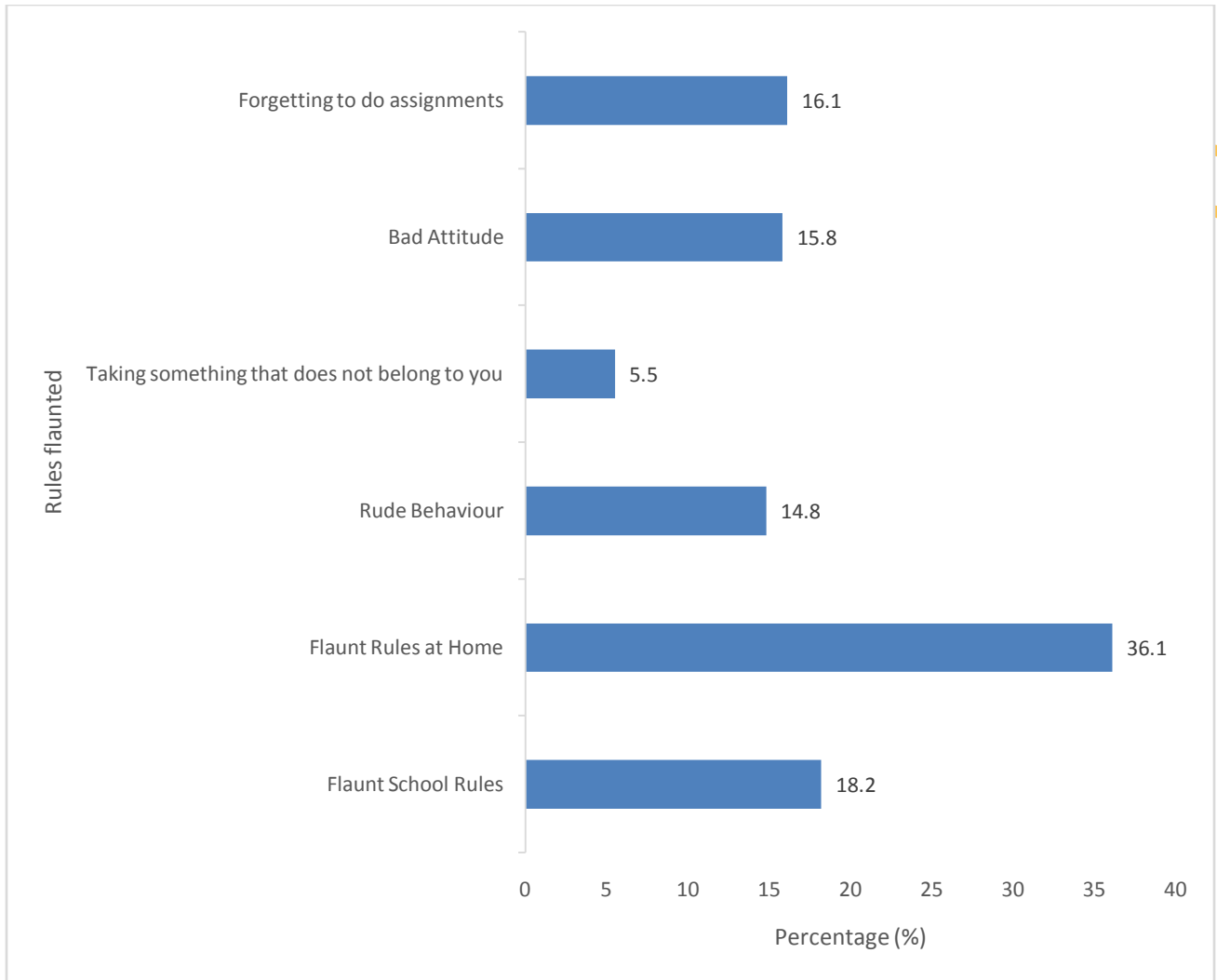


Figure 4.4.1 Reasons for applying corporal punishment

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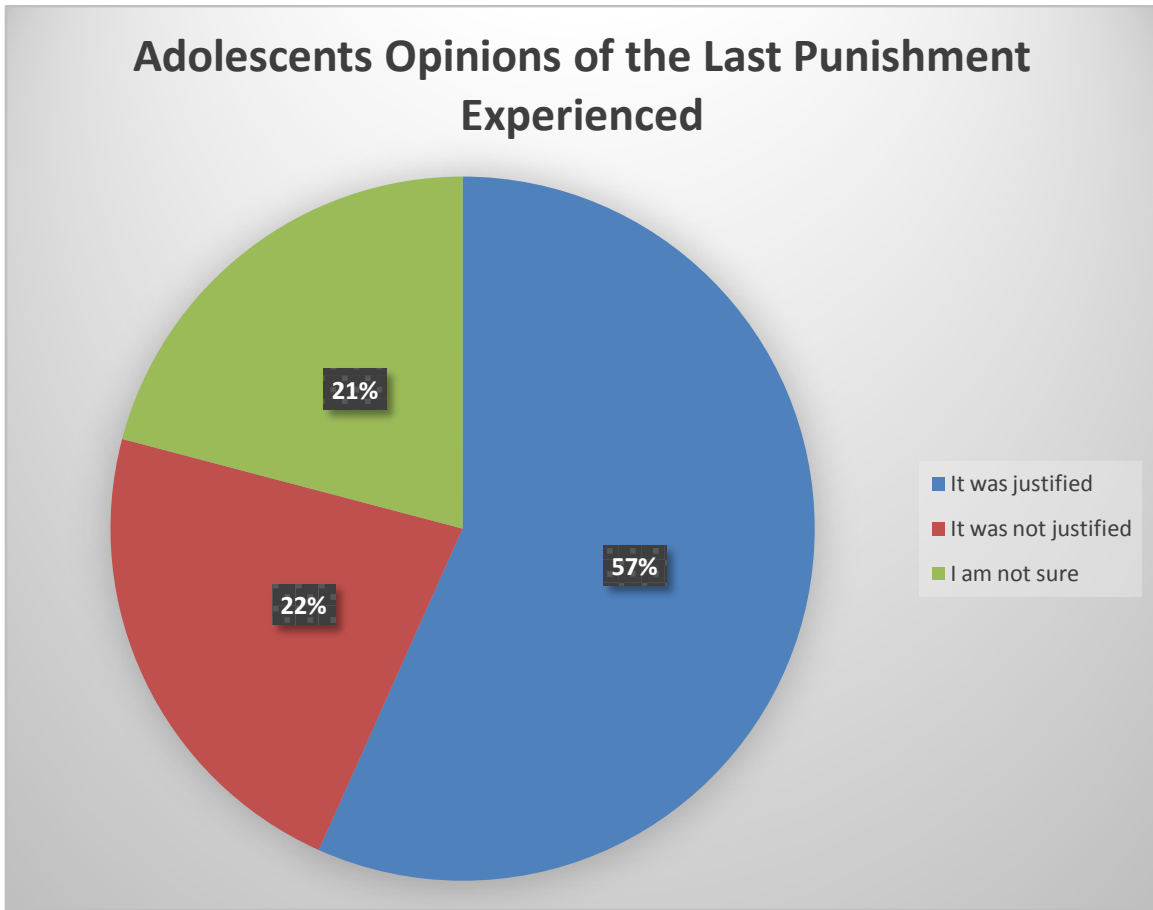


Figure 4.4.2 Adolescents Opinions of the Last Punishment Experienced (N=330)

Table 4.4.3 Adolescents Opinions of the Last Punishment Experienced Compared with Demographic Variables (Gender, Age and Class Arms)

Variables	Was the punishment justified			X ²	P Value
	Yes	No	Not Sure		
Gender					
Male	109	40	49	4.806	0.090
Female	78	34	20		
Age					
10 - 12	17	9	9		
13 - 15	168	62	60	4.745**	0.266
16 - 19	2	3	0		
Class					
SS1	80	34	9		
SS2	29	9	12	23.431	<0.001*
SS3	78	31	48		

4.5 Adolescent's Perception on Health Consequences of Different Methods of Child Discipline

Physical health Perception

In the study findings Majority of the respondents (73.4%) agreed that punishment can make one ill, the believe that punishment cannot cause someone pain was agreed to by majority of the respondents (76.4%) respondents whereas when the participants were asked if physical punishment can cause bruises One hundred and twenty one (36.7%) agreed to the statement. The mean score for perceived physical health consequences was 6.9 ± 1.3 using an 8 point scale. Majority of the respondents (99.4%) had negative perception to physical health consequences while the respondents that had positive perception were very few (0.6%). (See details in Table 4.5.1)

Emotional Health Perception

Majority of the respondents also agreed with the statements that physical punishment can make one feel sad (40.6%). Majority of the respondents agreed with physical punishment having the ability to affect one's sleep (64.8%) with the statement. The mean score for perceived emotional health consequences was 4.5 ± 1.4 using a 6 point scale. Fewer respondents had negative perception (23.4%), and greater number has positive perception (73.6%) towards corporal punishment. (See details in Table 4.5.2)

Social Health Perception

On the statement about Physical punishment can make one loose interest in playing with friends after receiving it, majority of the respondents agreed (63.3%). About Physical punishment can make one feel aggressive and angry (80.0%) respondents agreed to the statement. Majority of the respondents agreed (76.7%) to the statement "Physical punishment can make one feel embarrassed after receiving it publicly. The mean score for perceived Social health consequences was 7.9 ± 2.1 using a 10 point scale. For perceived social health consequences, most respondents had negative perception (87.3%) while very few had positive perception to social health consequences (12.7%). (See details in Table 4.5.3)

Mental Health Perception

Greater proportion of the respondent agreed that physical punishment can make one lie in other to avoid being punished (74.2%). On "physical punishment makes one misbehave to get back at

one's parents/caregiver” on this statement most respondents (48.5%) agreed to it, On whether one does not always regret actions after being physically punished, majority of the respondents disagree to the statements (52.4%). The mean score for perceived mental health consequences was 5.8 ± 1.7 using an 8 point scale. For perceived mental health consequences, a great proportion had negative perception (63.0%) towards corporal punishment while some respondents have a positive perception (37.0%) towards mental health consequence. (See details in Table 4.5.4)

Overall, comparing all the perceived health consequences, majority of the respondents perceived greater positive physical health consequences (99.4%) than other health consequences. (See details in Figure 4.5.5)

Table 4.5.1: Perceived Physical Health Consequences

Perceived physical Health Consequences	Frequency	%
Positive perception(Minor consequences)	2	0.6
Negative perception (Serious consequences)	328	99.4
TOTAL	330	100

Mean score: 6.9 ± SD 1.3

Table 4.5.2: Perceived Emotional Health Consequences

Perceived Emotional Health Consequences	Frequency	%
Positive perception (Minor consequences)	243	73.6
Negative perception (Serious consequences)	87	23.4
TOTAL	330	100

Mean score: 4.5 ± SD 1.4

Table 4.5.3: Perceived Social Health Consequences

Perceived Social Health Consequences	Frequency	%
Positive perception (Minor consequences)	42	12.7
Negative perception (Serious consequences)	288	87.3
TOTAL	330	100

Mean score: 7.9 ± SD 2.1

Table 4.5.4: Perceived Mental Health Consequences

Perceived Mental Health Consequences	Frequency	%
Positive perception (Minor consequences)	122	37.0
Negative perception (Serious Consequences)	208	63.0
TOTAL	330	100

Mean score: 5.8 ± SD 1.7

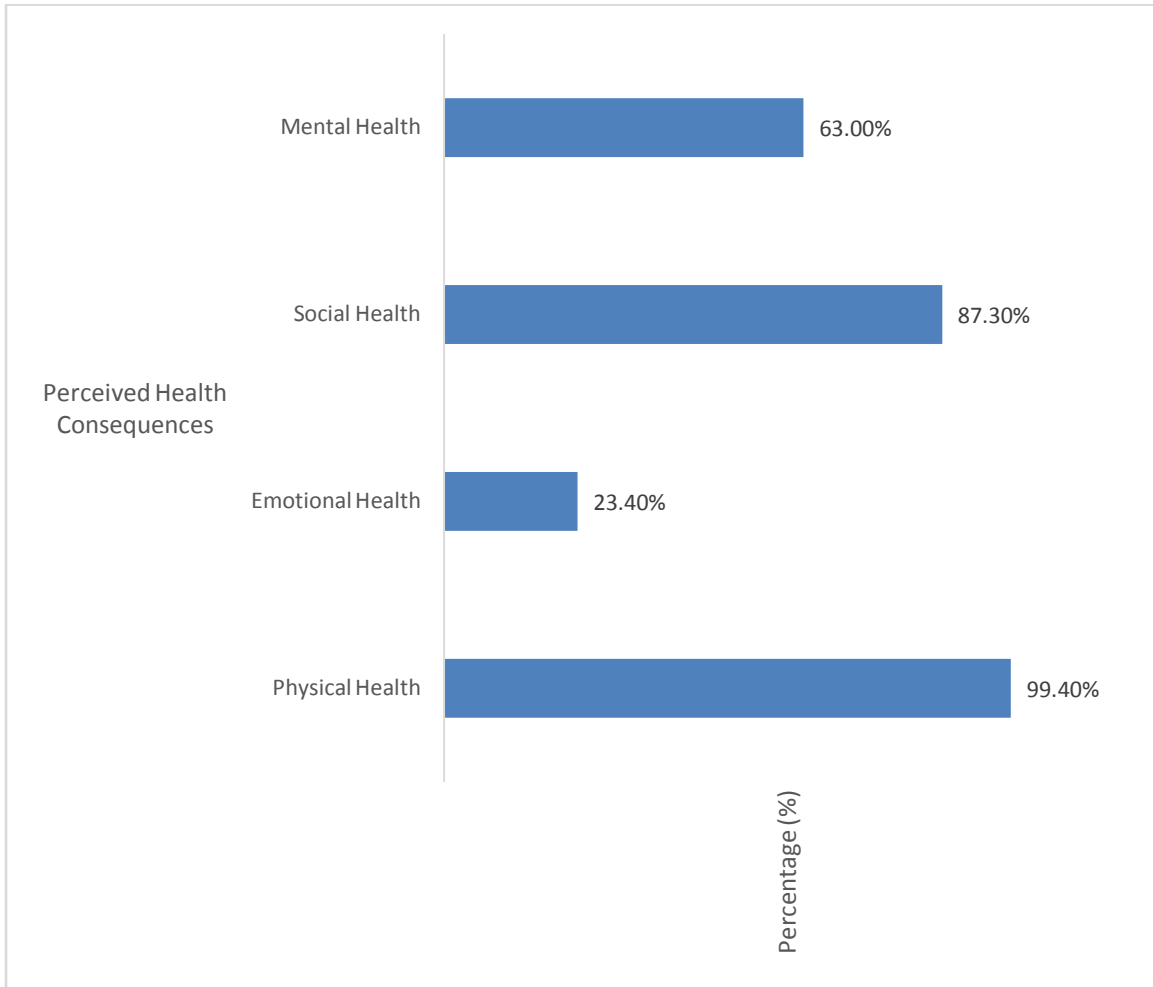


Figure 4.5.5: Respondents Perception towards Health Consequences of Corporal Punishment

4.6 Adolescent's Perceptions on Appropriate Method of Discipline

Respondents were asked if physical punishment is not a good way of disciplining a child, majority (49.7%) of the respondent agreed to the statement. Majority (47.3%) of the respondents disagreed to non-physical punishment being the best way of disciplining a child. Greater proportion (56.1%) believe physical punishment should be banned in homes. “Without physical punishment, one cannot be a better person in life” on this perception statements, some respondents (43.3%) agreed and the same number (43.3%) of respondents disagreed with the statement.(See details in Table 4.6.1)

About 30% of the respondents has a positive perception towards physical punishment while 70% of the respondents has negative perception towards physical punishment. (See details in Figure 4.6.2)

Table 4.6.1 Perception of appropriate method for child discipline

Perception statements	Undecided	Disagree	Agree
Without physical punishment, one cannot be a better person in life	44 (13.3%)	143(43.3%)	143(43.3%)
I can become a better person without physical punishment	47 (14.2%)	133 (40.3%)	150(45.5%)

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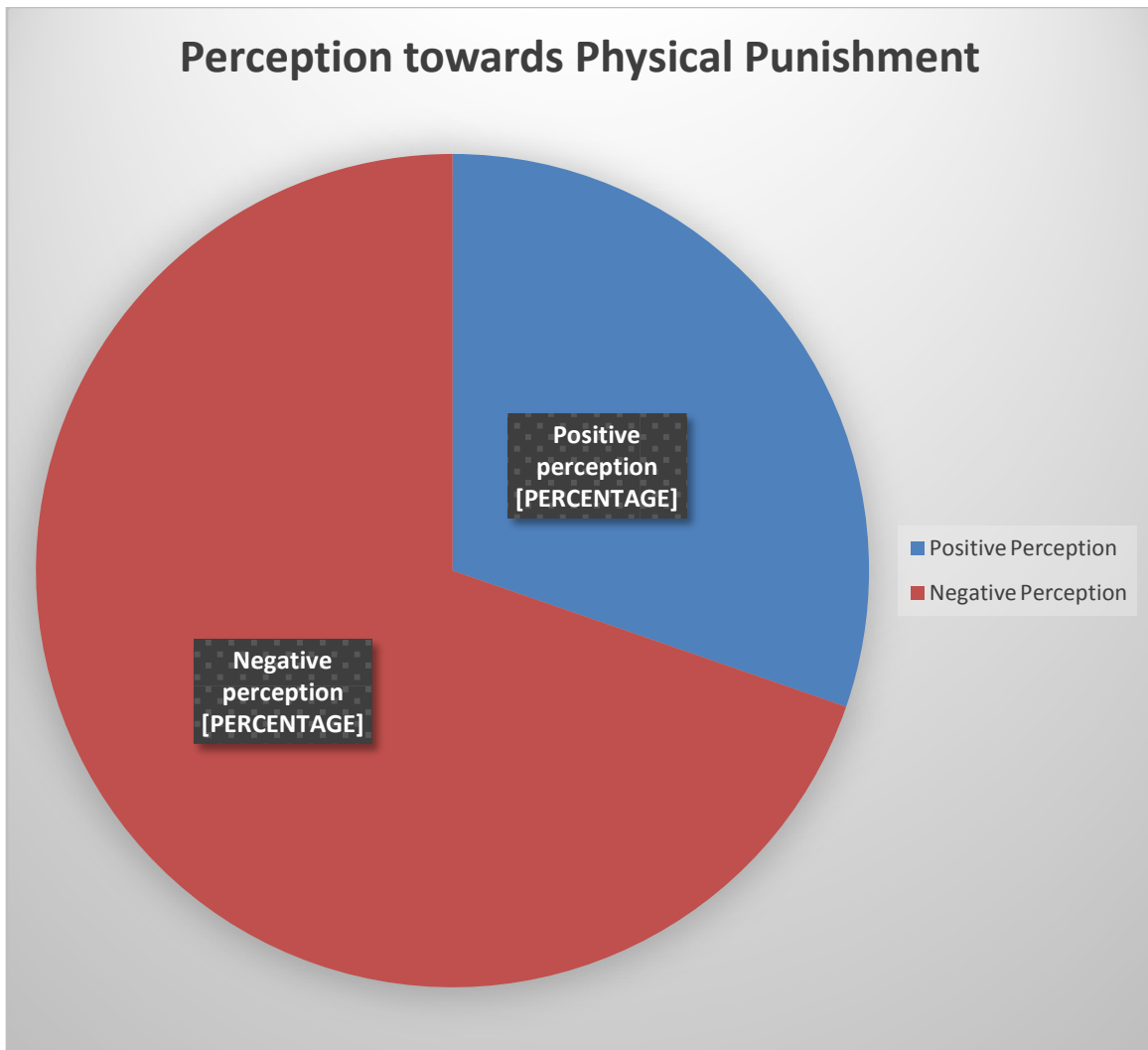


Figure 4.6.2 Perception of Appropriate method for Punishment

4.7 Test of Hypotheses

The results of the hypothesis tested are shown below

Hypotheses 1: There would be no significant association between corporal punishment and Socio-demographics (Religion & ethnic group). As shown in the findings. Chi Square was used to test for a relationship between corporal punishment and some socio demographic variables. The result shows there is a statistically significant association between the ethnic group ($X^2=10.048$; $P=0.031$) and religion ($X^2=6.965$; $P=0.031$) of respondent and experience of corporal punishment. This meant that religion and ethnic group of respondent had a significant influence on the prevalence of physical punishment. (See details in Table 4.7).

Table 4.7: Relationship between Corporal Punishment perpetrated by parents and Adolescents socio-demographics (Religion, ethnic group and type of family)

Socio-demographic variables	Experience of Corporal Punishment		χ^2	P value
	Yes(%)	No(%)		
Ethnic Group				
Yoruba	207(62.7)	85(25.8)		
Igbo	20(6.1)	2(0.6)	10.048**	0.013*
Hausa	3(0.9)	4(1.2)		
Ebira	4(1.2)	5(1.5)		
Religion				
Christianity	111(33.6)	44(13.3)		
Islam	118(35.8)	44(13.3)	6.965	0.031*
Traditional	5(1.5)	6(2.4)		
Family Type				
Monogamous	179(54.2)	74(22.4)	0.013	>0.999
Polygamous	55(16.7)	22(6.7)		

* = Significant ($p < 0.05$)

** = Fishers Exact Test

Hypotheses 2: There would be no significant association between corporal punishments and how it affects adolescents' perception of the health consequences of corporal punishment

As shown in the findings below Chi Square was used to test for a relationship between corporal punishments and how it affects adolescent's perception of the health consequences of corporal punishment. The result shows there is no statistically significant association between frequency of corporal punishment among respondents and the perceived health consequences ($X^2=0.587$; $P=0.604$) .This meant perceived health consequences had no significant influence on the frequency of physical punishment experienced by the adolescents. Therefore, this null hypothesis was accepted.(See details in Table 4.8)

Table 4.8 Relationship between Respondent Experiences of Corporal Punishments and Adolescents Perception of the Health Consequences of Corporal Punishment

Perceived Health Consequences	Experience of Corporal Punishment		Mean \pm SD	χ^2	P Value
	Yes(%)	No(%)			
Physical Health Consequences (8 points)					
Minor Consequences	0(0.0)	2(0.6)	6.9 \pm 1.3	4.905**	0.084
Serious Consequences	234(70.9)	94(28.5)			
Emotional Health Consequences (6 points)					
Minor Consequences	168(9.4)	75(3.3)	4.5 \pm 1.4	1.405	0.272
Serious Consequences	66(61.5)	21(25.8)			
Social Health Consequences (10 points)					
Minor Consequences	31(9.4)	11(3.3)	7.9 \pm 2.1	0.196	0.720
Serious Consequences	203(61.5)	85(25.8)			
Mental Health Consequences (8 points)					
Minor Consequences	87(26.4)	35(10.6)	5.8 \pm 1.7	0.015**	0.999
Serious Consequences	147(44.5)	61(18.5)			
General Health Consequences (32 points)					
Minor Consequences	12(3.6)	7(2.1)	24.7 \pm 4.9	0.587	0.604
Serious Consequences	122(67.3)	89(27.0)			

* = Significance

** = Fishers Exact Test

Hypothesis 3: There would be no significant association between adolescent experiences of physical punishment and perception of the adolescent on appropriate method of discipline

Chi Square test was used to test for a relationship between adolescent experiences of physical punishment and perception of the adolescent on appropriate method of discipline. There is a significant association between adolescents' experiences of physical punishment and perception of the adolescent on appropriate method of discipline ($X^2=10.168$; $P=0.001$). This meant that adolescent experiences of physical punishment has significant influence on perception of the adolescent appropriate method of discipline. (See details in Table 4.9)

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Table 4.9 Relationship between Adolescent Experiences of Physical Punishment and Perception of the Adolescent on Appropriate Method of Discipline

Perception of Appropriate Method	Experience of Corporal Punishment		X ²	P Value
	Yes (%)	No (%)		
	Positive perception towards physical punishment	83(25.2)		
Negative Perception towards physical punishment	151(45.8)	79(23.9)		

* = significance

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Binary Logistic Regression of Significant Socio-Demographic Variables on Experience of Corporal Punishment

Muslim students are 0.194 times more likely to experience corporal punishment than Christian students. Also, students practicing traditional beliefs are 0.178 times more likely than Christians to experience corporal punishment. In the same vein, students of Hausa descents are 0.116 times more likely than students of Yoruba descent to experience corporal punishment (See details in Table 4.10)

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Table 4.10: Binary Logistic Regression of Significant Socio-Demographic Variables on Experience of Corporal Punishment among Respondents

Variables	B	S.E.	Wald	df	Sig.	Exp (B)
Religion						
Christianity			5.797	2	.055	
Islam	-1.639	.720	5.176	1	.023*	.194
Traditional	-1.726	.718	5.785	1	.016*	.178
Ethnic Group						
Yoruba			6.700	3	.082	
Igbo	-.853	.727	1.377	1	.241	.426
Hausa	-2.152	1.043	4.252	1	.039*	.116
Ibira	.311	1.062	.086	1	.769	1.365

a. Variable(s) entered on step 1: Religion, Ethnic.

CHAPTER FIVE

DISCUSSION, CONCLUSION AND RECOMMENDATIONS

5.1 Discussion

5.1.1 Respondents' Socio-demographic characteristics

The ages of respondents range from 11 to 19 years of age. This denotes that they were adolescents (10-19 years). In this survey, 330 adolescents were asked about their experience of physical violence in the last month preceding the survey. Despite Nigeria being a signatory to most human rights treaties, there is still gross violation of children's rights. (Olowu, 2010). In this study ethnic group has a statistical influence on adolescent's experiences of corporal punishment. Regardless of culture harsh discipline is harmful for children. More than half (56.5%) of the respondents were from a Monogamous family and the rest from polygamous family. The majority of the respondents are male (60%) while the rest are female (40%)

A greater proportion of the fathers and mothers are educated and have completed their tertiary education (49.7%) and (43.3%) respectively according to the findings of this study there are no statistically significant associations between parent's age, educational level, marital status and the adolescents' experience of corporal punishment which is in contrast with Multiple Indicator Cluster Survey conducted in Asia in 2012 found 50% of children aged 2-14, Violent disciplining methods were found to be highest where the head of the household was educated to primary level (65%) and lowest where the head of the household had a university degree (45%), but in current study most parents are educated and the rate of corporal punishment (father's; 47.9%), (mother's; 44.5%) is high. Chi Square was used to test for a relationship between corporal punishment and socio demographic variable. The result shows there is a statistically significant association between the ethnic group and religion of respondent parents and experience of corporal punishment. This meant that religion and ethnic group had a significant influence on the prevalence of physical punishment.

5.2 Methods of Child Discipline Adopted By Parents and Caregivers

Findings from this study revealed that Physical Punishment is the most popular method of child discipline among adolescents, with fathers are the highest perpetrators (47.9%) compared to the mother (44.5%). This is supported by a study of parent child relationships in Australia (Russel, 1998) that reveals mothers do every day parenting and the father is thought to be the "main

disciplinarian.” The mother waits until the father comes back from an outing, inform him of the child transgressions and expect he would punish the child/children. In this study, it appears that (23.0%) of fathers and (17.0%) of mothers use both physical and non-physical punishment.

When asked who else punishes the respondents at home apart from their parents, relatives, religious leaders, house helps and friends of the families were identified to administer punishment on respondents. Using of objects e.g. belts or cane was the most common form of physical punishment (62.1%), (53.3%) among fathers and mothers of respondents respectively in this study which is in relation with a study from Ghana where caning remains the most common form of physically punishing (forthcoming 2010).

While the data in this study shows prevalence of physical punishment among respondents, it is only one of numerous methods used to discipline children. Thus, it is necessary for us to acknowledge methods of child discipline that reinforce positive approaches to parenting and also those that raise issues of concern for children’s emotional well-being for example non-physical punishment practised by 12.7% and 25.2% fathers and mothers respectively in this study. Although not all non-physical punishment are safe most especially starvation (refusal to feed kids when they do something wrong), Non-physical punishment is not as common as physical punishment in this study some of the types of non-physical punishment reported in this study includes scolding (26.1%) among fathers and (30.0%) mothers. It appears that doing house chores was the most common form of non-physical punishment (47.6%) and 173(52.4%) among fathers and mothers respectively. Starvation i.e refusal to feed kids due to an offence committed is used by fathers (27.9%) and mothers 99 (30.0%). Starvation can cause underweight and several growth deficiencies. In a study conducted in Spain by International Save the Children Alliance (2005), Children were asked which punishments were most harmful and said that denying a child food was the most harmful and physical punishment was the second most harmful.

5.3 Respondents’ Experiences of Physical Punishment by Their Parents or Caregivers

Findings from this study revealed that physical punishment within the last one month includes both physical and non-physical punishment among which includes; Slapping, Knock on head, weeding of grass, painful body postures, washing of plates and clothes, Kneeling, Carrying of stone or chair, beating with belts and knock on head with parents being the highest

perpetrators. Other perpetrators mentioned by the respondents are siblings, relatives, grandparents, friends of the family, neighbors, principal and teachers.

In china, a retrospective survey of nearly 1,000 university students in China and England, carried out between 2001 and 2004, looked at their experiences of parental discipline and their attitudes towards it. Of the Chinese students, 60% of boys and 50% of girls reported being hit by their parents as children; beating with a stick, rod or branch was reported by 37% of boys and 36% of girls. Fathers were more likely to be the parent using physical punishment than mothers which is consistent with this study where use of objects a form of punishment was perpetrated by 62.1% fathers and 53.3% mothers.

A great proportion of the respondents also reported Scolding and slapping as a form of physical punishment. In a study carried out by Adegbehingbe and Ajite (2013) to determine the contribution of corporal punishment to ocular morbidity and visual impairment in Nigerian children. The study concluded corporal punishment is a major cause of ocular morbidity and blindness in Nigerian children. In this study slapping is been used as a mode of discipline by fathers (37%) and mothers (33%)

According to this study findings majority of the respondent don't experience physical punishment often (19.1%), and some (14.5%) respondents said they get punished several times a month, some (6.1%) respondents said they get punished every day. Out of the 330 respondents that has sustained injury during physical punishment, most of the respondents said yes(59.40%) to being treated after sustaining injury due to physical punishment and rest of the respondents (40.60%) said no treatment was administered after being physically punished. Corporal punishment kills thousands of children each year and injures and disables many more (Krug, 2002)

5.4 Reasons for Applying Corporal Punishment As Given By the Caregivers in Relation with Offences Committed By the Adolescent

Findings from this study revealed that respondents get punished for flaunting rules at home the most (36.1%) and more than half of the adolescents think physical punishment was justified (56.7%). Which is consistent with the study carried out in Spain reported in International Save the Children Alliance (2005), a 2004 study involving questionnaires with 119 children aged 7-

15, 46% said that it is never necessary to hit a child to educate him or her, 41% that it is sometimes necessary and 4% that it is necessary to hit a child many times. One child in five (21%) thought that it is never necessary to shout, 68% that it is sometimes necessary and 2% that it is necessary many times. From the study adolescents were asked if the last punishment received was justified or not and the 56.7% of the respondents believes it was justified and 70% believes punishment received in relation with their last offences was not justified, so kids believes it is necessary to hit them in other to train them. The result was compared with some demographic variables like age, gender and class arms; result shows that there is a statistical significant association between the class arms of respondents and their justification of corporal punishment received

5.5 Adolescent's Perception on Health Consequences of Different Methods of Child Discipline

Some of the negative effect of physical punishment includes emotional problems, mental problems, and behavioral problems (Nixon *et al.*,2006;). In this study adolescents are a little aware of the physical health consequences of corporal punishment but are not aware corporal punishment can affect their mental, social and emotional health

On Physical Health; majority of the respondents (99.4%) had negative perception to physical health consequences i.e respondents perceived that physical punishment can affect their physical health while the respondents that had positive perception i.e. does not perceive physical punishment can affect their physical health (0.6%).In this study most respondents admitted physical punishment can give them sleepless night and depression. In South Africa, a questionnaire was used with over 700 middle school students of mixed ethnic background to ask their opinion about the practice majority of them reported having been physically disciplined. Most said they were angry or sad right after the beating which is in consistent with this study. In this study most respondents perceived physical punishment can cause them pain, make them ill and give them bruises.Major study involving men in Brazil, Chile, Croatia, India, Mexico and Rwanda found that those who had experienced violence, including corporal punishment, during childhood, were more likely to perpetrate intimate partner violence, experience low self-esteem and depression, and were less likely to participate in domestic duties, communicate openly with their partners, have depression issues and high level of fear, behavior, anxiety, or disruptive disorders (Contreras, et al (2012)

For perceived social health consequences, most respondents had negative perception (87.3%) i.e. perceived that social health consequences of corporal punishment are severe while very few had positive perception to social health consequences (12.7%) i.e. respondents do not perceive corporal punishment can affect their social health. Most respondents receiving physical punishment can embarrass them, make them lose interest in playing with their friends and make them feel inferior to their friends after receiving it.

For perceived mental health consequences, a great proportion (63.0%) perceives corporal punishment can affect their mental health i.e. perceives severe mental health consequences towards corporal punishment while some respondents perceive corporal punishment cannot affect their mental health i.e. minor consequences. (37.0%) towards mental health consequence. Most of the respondent in this study admits they often resent the adult that dealt physical punishment afterwards, majority admits they sometimes lie to avoid punishment which is promoting a bad behaviour instead of reinforcing a good behaviour. A great proportion of the respondent said they often misbehave sometimes to get back at adult that punishes them physically.

Fewer respondents perceived that physical punishment can hurt their emotional health i.e. had negative perception (23.4%), majority of the respondents perceive that physical punishment cannot hurt them emotionally i.e. positive perception (73.6%) i.e. perceives minor consequences towards corporal punishment. In United Kingdom, as part of its 2007 review into section 58 of the Children Act, children highlighted the emotional impact of physical discipline, saying it often made them feel “scarred, stressed, harassed and on edge” (Shebert research, 2007). In this study some of the respondents agreed that physical punishment can make them feel sad, affect their sleep and give them anxiety.

Overall, respondents that perceive corporal punishment can affect their health (physical, emotional, social and mental) are greater in number than respondent that perceived corporal punishment cannot affect their health.

Chi Square was used to test for a relationship between corporal punishments and how it affects adolescent's perception of the health consequences of corporal punishment. The result shows there is no statistically significant association between frequency of corporal punishment among respondents and the perceived health consequences probably because adolescents do not

understand that corporal punishment hurts their health and general wellbeing or they believe corporal punishment is a social norm and thereby does not have any relationship with their perception.

5.6 Adolescent's Perceptions on Appropriate Method of Discipline

Majority (49.7%) of the respondents thinks Corporal punishment is a good method of punishment for them. A number of respondents (41.8%) does not believe in Physical punishment as a mode of discipline. International law is clear that children have a right to protection from all corporal punishment in law and practice, in all settings including their homes. The Convention on the Rights of the Child obliges states to take all appropriate legislative measures to protect children from all forms of physical and mental violence. In its General Comment No. 8 (2006), on the right of the child to protection from corporal punishment and other cruel or degrading forms of punishment, the Committee on the Rights of the Child made it clear that the Convention requires states to prohibit and eliminate all corporal punishment, including in the home. All physical punishment, however "mild" and "light", carries an inbuilt risk of escalation: its effectiveness in controlling children's behavior decreases over time, encouraging the punisher to increase the intensity of the punishment (Elliman, 2000)

Some respondents (41.8%) want physical punishment to be banned in their homes while others (56.1%) does not want it as they believe the use of physical punishment as a mode of discipline will make them become a person in life. Large proportion (43.3%) of the respondents believe without physical punishment they cannot become a better person in life this is consistent with social model theory as Social learning theory emphasizes the importance of observing and modeling the behavior attitude and emotional reaction of others. "

Social learning theory takes in cognizance what the adolescents has observed from its environment and the experiences of physical punishment in the adolescent home to explain how it eventually influence the adolescent's self-efficacy and value expectancy, it also takes in cognizance how these experiences can affect their perception. In this study majority (70%) of the respondents has a negative perception to physical punishment and some (30%) of the respondents has positive perception towards physical punishment which is relation to numbers (47.9%) of fathers and of (44%) mothers that uses physical punishment as a mode of discipline. In modern social learning theory, children learn through observation and limitation of models in their

environment” (Bandura, 1986) and the respondents that believes physical punishment makes them a better person in life will likely also use this mode of punishment on their future wards. In a study by Eisenberg and Valiente (2002) which commonly used argument against physical punishment draws on social learning theory to argue that parents who use physical punishment with their children model aggressive behavior.

There is a significant association between adolescents’ experiences of physical punishment and perception of the adolescent on appropriate method of discipline. This meant that adolescent experiences of physical punishment has significant influence on perception of the adolescent appropriate method of discipline.

5.7 Implication of the Study Findings for Health Promotion and Education

Findings from this study shows that physical punishment is the most popular method of child discipline used on adolescents, with fathers being the highest perpetrators. Physical punishment is the most adopted means of child discipline compared to non-physical punishment. When ask who else punishes the respondents at home apart from their parents, relative’s, religious leaders, house helps and friend of the families were identified to also administer punishment on respondent. Using of objects e.g. belts or cane was the most common form of physical punishment among fathers and mothers of respondent. It appears that doing house chores was the most common form of non-physical punishment and while starvation of respondents is used by fathers and mothers. Starvation can cause underweight and several growth deficiencies.

Findings from this study also revealed that physical punishment within the last one month includes knock on head, kneeling and placing objects on their head and slapping and parents being the highest perpetrators. A great proportion of the respondents also reported Scolding and slapping as a form of physical punishment. Some respondents said they get punished several times a month and some respondents said they get punished every day. Among the respondents that has sustained injury during physical punishment some of the respondents said no treatment was administered after being physically punished and sustaining injury.

Findings from this study further revealed that respondents get punished for flaunting rules at home and more than half of the adolescents think physical punishment was justified. Majority of the respondents perceived greater physical health consequences other health consequences

(emotional, social and mental). Majority of the respondents thinks physical punishment is good method of punishment them.

Defined by the World Health Organization, health promotion is: “The process of enabling people to increase control over, and to improve, their health. It moves beyond a focus on individual behaviour towards a wide range of social and environmental interventions.

Among the justification of this study, one is to gain insight into the leaving conditions of adolescents in Ibadan after this research it was proven that corporal punishment is widely used by parents which affect adolescent health. WHO also defines health as “Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” The perception of impact of corporal punishment on the implication on their health is not significant which means adolescent do not believe corporal punishment has a negative impact on their health which is not consistent with many studies that physical punishment as many negative implication on adolescents health and is the major cause of diseases injuries and disability among them. (Krug, 2002). From the research it is obvious the respondents perceive corporal punishment as a social norms and will likely use it as a mode of discipline too as majority of the respondent thinks corporal punishment will make them a better person in life.

Health Promotion and Education Strategies that can be used on Reducing Corporal Punishment

Advocacy is a key strategy used in Health Promotion and Education. Advocacy is used to influence decision makers on issues. Advocacy in all its forms seeks to ensure that people, particularly those who are most vulnerable in society, are able to:

- Have their voice heard on issues that are important to them.
- Defend and safeguard their rights.
- Have their views and wishes genuinely considered when decisions are being made about their lives.

Advocacy strategy can be used to present research on corporal punishment to the decision makers and make them implement necessary policies to guide child rights in Nigeria or enforce implementation of child rights. Majority of the respondents wants physical punishment to be banned in their homes. International law is clear that children have a right to protection from all

corporal punishment in law and practice, in all settings including their homes. The Convention on the Rights of the Child obliges states to take all appropriate legislative measures to protect children from all forms of physical and mental violence. In its General Comment No. 8 (2006), on the right of the child to protection from corporal punishment and other cruel or degrading forms of punishment, the Committee on the Rights of the Child made it clear that the Convention requires states to prohibit and eliminate all corporal punishment, including in the home. This rights can be enforced in Nigeria through Advocacy

Public enlightenment is a Health Promotion and Education strategy, it is used to create awareness with the aim of bringing about a behavioural change. Parental discipline will influence long-term practice of how children acquire the motives, values and behavior of their parents and of society through the process of internalization (Grusec and Goodnow 1994). Public enlightenment should encourage parents to use a less power assertive and more effective mode of discipline that does not involve physical punishment. Adolescents should also be properly enlightened about the health consequences of Physical punishment so as to discourage the practice as adults.

5.8 Conclusion

Findings from this study shows that physical punishment is the most popular method of child discipline used on adolescents, with Fathers being the highest perpetrators. Physical punishment is the most adopted means of child discipline compared to non-physical punishment. Using of objects is the most common form of physical punishment. In this study majority of the respondents has a negative perception to physical punishment which is in relation with their experiences of physical punishment. Adolescent's perceived corporal punishment as a social norm in this study. Both parents and recipients of corporal punishment needs to be enlightened on impact of the mode of punishment administered on their child. The right of the child should not be relegated as regards to the type of punishment used on them when they flaunt rules. Their total health being should be put in high regard when any means of discipline is to be adopted and not just their physical health.

5.9 Recommendations

- Further research should be carried out on corporal punishment in Nigeria.

- Public enlightenment should be carried out to both parents and adolescents on alternative mode of discipline to use different from corporal punishment and the impact of corporal punishment should be established. Children and adolescent rights should be well established and thought to them.
- Counselling and appropriate treatments should be established for an abused child or respondent that has undergone severe physical punishment in order to manage their health and wellbeing
- The Government and Ministry of Health should establish and implement child rights as regards to corporal punishment. Corporal punishment should be clearly defined to establish the severe mode and also the extent of use allowed by parents on their child/children.

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**APPENDIX I
INFORMED CONSENT FORM**

**ADOLESCENTS EXPERIENCES OF CORPORAL PUNISHMENT AND THEIR
PERCEIVED HEALTH CONSEQUENCES IN IBADAN NORTH LOCAL
GOVERNMENT OYO STATE**

Dear Respondent,

My name is Bakare, Fausiat Modupe, a postgraduate student of Health Promotion and Education, Faculty of Public Health, University of Ibadan, Nigeria. The purpose of the study is to investigate experiences of physical punishment and their perceived health consequences in relation with their socio-demographic characteristics among adolescents in Ibadan North East Local Government. The information needed is strictly for research purposes in partial fulfilment for the award of the degree of Masters in Public health. Be free to express your views based on what you really know and do; as there are no right or wrong answers.

By participating, you will not experience any risk. Your participation will not cost you anything more than your valuable time. If you decide to complete the survey, your identity will be kept strictly confidential and will be used for the purpose of this research only. Please note that you do not have to write your name on the questionnaire, also try and please give honest answers to the questions asked as much as your maximum co-operation will assist in making this research a success. The information provided will be treated with utmost confidentiality and the completion of the questionnaire is voluntary. You are hereby invited to participate in the study and encouraged to give honest information.

Statement of student obtaining parental informed consent

I have fully explained this research to _____ and have given sufficient information including benefits, to make an informed decision

DATE: _____

SIGNATURE: _____

NAME _____

Statements of person giving consent

I have read the description of the research or have had it translated into a language. I understand I have also discussed with the researcher to my satisfaction. I understand that my participation is voluntary. I know enough about the purpose, methods, risks and benefits of the research study to judge that I want to take part in it. I understand that I may freely stop being part of this study at any time. I have received a copy of this consent form and additional information sheet to keep for myself.

DATE: _____

SIGNATURE: _____

In addition, if you have any question about your participation in this research, you can contact the principal investigator, Bakare Fausiat Modupe, Department of Health Promotion and Education, 08165542552, mobakareillustra@gmail.com

Thanks for participating

APPENDIX II

QUESTIONNAIRE

ADOLESCENTS EXPERIENCES OF CORPORAL PUNISHMENT AND THEIR PERCEIVED HEALTH CONSEQUENCES IN IBADAN NORTH EAST LOCAL GOVERNMENT OYO STATE

INFORMED CONSENT FORM

SERIAL NO _____

Dear Respondent,

My name is Bakare Fausiat Modupe, a postgraduate student of Health Promotion and Education, Faculty of Public Health, University of Ibadan, Nigeria. The purpose of the study is to investigate experiences of physical punishment and their perceived health consequences in relation with their socio demographic characteristics among adolescents in Ibadan North East Local Government. The information needed is strictly for research purposes in partial fulfilment for the award of the degree of Masters in Public health. Be free to express your views based on what you really know and do; as there are no right or wrong answers. By participating, you will not experience any risk. Your participation will not cost you anything more than your valuable time. If you decide to complete the survey, your identity will be kept strictly confidential and will be used for the purpose of this research only. Please note that you do not have to write your name on the questionnaire, also try and please give honest answers to the questions asked as much as your maximum co-operation will assist in making this research a success. The information provided will be treated with utmost confidentiality and the completion of the questionnaire is voluntary. You are hereby invited to participate in the study and encouraged to give honest information. If you consent to participate in the study please kindly go ahead and fill the questionnaire.

DATE: _____ SIGNATURE: _____

Thanks for participating

SECTION A: SOCIO-DEMOGRAPHIC DATA

Instruction: In this section, please tick in the appropriate boxes that correspond to your answers or complete the spaces provided below.

1	Gender: 1. Male () 2. Female ()
2	Age (as at last birthday): _____
3	Class: 1. Senior Secondary School 1 () 2. Senior Secondary School 2 () 3. Senior Secondary School ()
4	Religion: 1. Christianity () 2. Islam () 3. Traditional ()
5	Class Arms 1. Science () 2. Art () 3. Commercial ()
6	Ethnic group: 1. Yoruba () 2. Igbo () 3. Hausa () 4 Others specify _____

Family Background (B)

7i. Father's age 1. Between 20-30 years 2. Between 30-40 years 3. Between 40-50 years 4. Between 50-60 years

7ii. Mother's age 1. Between 20-30 years 2. Between 30-40 years 3. Between 40-50 years 4. Between 50-60 years

8. Highest level of education of parents

Please tick the highest level of education for both your father and mother

8i. Highest level of education your father has achieved	8ii. Highest level of education your mother has achieved
1. No formal education <input type="checkbox"/>	1. No formal education <input type="checkbox"/>
2. Arabic Education <input type="checkbox"/>	2. Arabic Education <input type="checkbox"/>
3. Completed Primary <input type="checkbox"/>	3. Completed Primary <input type="checkbox"/>
4. Completed Secondary <input type="checkbox"/>	4. Completed Secondary <input type="checkbox"/>
5. Completed Tertiary <input type="checkbox"/>	5. Completed Tertiary <input type="checkbox"/>

6. Others Specify	6. Others Specify
7. Others Specify _____	7. Others Specify _____

9. How Many wives does your father have _____

10 (i). What Job does your father do? _____

10 (ii). What Jobs does your mother do? _____

11. Are your father and mother living together now? 1. Yes 2. No

12. How many brothers and sister do you have? _____

SECTION B: ASSESSMENT OF METHODS OF CHILD DISCIPLINE ADOPTED BY PARENTS AND CAREGIVERS

In this section please tick (✓) in the appropriate boxes that correspond to your answers or complete the spaces provided

13. What way does your father use in punishing you? (Choose one option)

1. Physical punishment
2. Non Physical punishment
3. Both
4. They don't punish me

14. What way does your mother use in punishing you? (Choose one option)

1. Physical punishment
2. Non Physical punishment
3. Both
4. They don't punish me

15. What mode of physical punishment is adopted by your father?

S/N	Mode of physical punishment used	Yes	No
1.	Slapping		
2.	Punching		
3.	Kicking		

4.	Use of objects e.g. Belts, wooden, cane		
5.	Painful body postures e.g. having to raise one leg, Kneeling down or stool down		
6.	Weeding		
7.	Whipping on the back		
8.	Give you a knock		
9.	Others (specify)		

16. What mode of physical punishment is adopted by your mother?

S/N	Mode of physical punishment used	Yes	No
1.	Slapping		
2.	Punching		
3.	Kicking		
4.	Use of objects e.g. Belts, wooden, cane		
5.	Painful body postures e.g. having to raise one leg, Kneeling down or stool down		
6.	Weeding		
7.	Whipping on the back		
8.	Give you a knock		
9.	Others (specify)		

17. What mode of non-Physical punishment is adopted by your mother?

S/N	Mode of non-physical punishment used	Yes	No
1.	Ground me, no watching TV and no playing games/Tell me to go to my room		

2.	Scolding		
3.	I don't go out/ Telling me I cannot go to my friends'		
4.	No food / Having to work before eating		
5.	Tell me to sweep/ Washing dishes/ Fetching water/ Cleaning the House		

18. What mode of non-physical punishment is adopted by your father?

S/N	Mode of non-physical punishment used	Yes	No
1.	Ground me, no watching TV and no playing games/Tell me to go to my room		
2.	Scolding		
3.	I don't go out/ Telling me I cannot go to my friends'		
4.	No food / Having to work before eating		
5.	Tell me to sweep/ Washing dishes/ Fetching water/ Cleaning the House		

19. Have you been physically punished by your relatives before

1. Yes 2. No

20. Who else punishes you at home other than your relatives?

1. Friends of the family 2. Housekeeper/house help 3. Religious leader i.e Pastor/ Imam 4. No one punishes me other than my relatives

SECTION C: TO DOCUMENT THE EXPERIENCES OF PHYSICAL PUNISHMENT ON ADOLESCENTS BY THEIR PARENTS OR CAREGIVERS.

In this section please tick (✓) in the appropriate boxes that correspond to your answers or complete the spaces provided.

21. List the method of punishment you have experienced within the last one month

S/N	Type of punishment	The perpetrator i.e. the person that punished you	Number of times punishment was given
1			
2			
3			
4			
5			

22. How often do you experience Physical Punishment within a month? (choose one of the options below)

- | | |
|---|---|
| 1. <input type="checkbox"/> Everyday | 6. <input type="checkbox"/> Not so often |
| 2. <input type="checkbox"/> Several times a week | 7. <input type="checkbox"/> Once or twice in a week |
| 3. <input type="checkbox"/> Several times a month | 8. <input type="checkbox"/> Once a while |
| 4. <input type="checkbox"/> Irregular | 9. <input type="checkbox"/> Once in a month |
| 5. <input type="checkbox"/> Never | 10. <input type="checkbox"/> Once in months |

23. In the case of sustaining injury while receiving physical punishment were you taken for treatment immediately? 1. Yes 2. No

SECTION D: TO IDENTIFY THE REASONS FOR APPLYING CORPORAL PUNISHMENT AS GIVEN BY THE CAREGIVERS IN RELATION WITH OFFENCES COMMITTED BY THE ADOLESCENT

Kindly pick the most appropriate option as far as you are concerned. A brief description or examples may be required if necessary

24. What have you gotten punished for in the past one month (Choose all that apply)

1. Flaunting rules in school
2. Flaunting rules at home
3. Rude Behavior
4. taking something that doesn't belong to you
5. Bad Attitude
6. Forgetting to do assignments
7. Others specify _____

25. What is your opinion of the last punishment you experienced? 1. It was justified 2. It was not justified 3. Am not sure

SECTION E: ASSESSMENT OF ADOLESCENT'S PERCEPTION ON HEALTH CONSEQUENCES OF DIFFERENT METHODS OF CHILD DISCIPLINE IN IBADAN NORTH LOCAL GOVERNMENT

Instruction: *In this section please tick (✓) in the appropriate boxes that correspond to your answers or complete the spaces provided*

S/N	Perceived Consequences	Agree	Undecided	Disagree
	Perceived Health Consequences- Physical			
26	I believe punishment can make one ill			
27	I think punishment does not cause anyone to feel			

	pain			
28	I believe physical punishment can cause one headache			
29	I think physical punishment cannot result into bruises			
	Perceived Health Consequences- Emotional	Agree	Undecided	Disagree
30	I believe physical punishment can make one feel sad			
31	I believe physical punishment threats can make one feel anxious			
32	I believe physical punishments often affects one sleep			
	Perceived Health Consequences- Social health	Agree	Undecided	Disagree
33	I believe physical punishment makes one feel happy after receiving it			
34	I believe physical punishment can make one lose interest in playing with one's friends			
35	I believe physical punishment can make one feel inferior to friends and siblings			
36	I believe physical punishment can make one feel aggressive and angry			
37	I believe physical punishment can make one feel embarrassed after receiving it publicly			
	Perceived Health Consequences- Mental health	Agree	Undecided	Disagree
38	I believe physical punishment can often make one resent the person that dealt it			
39	I believe physical punishment can make one lie in other to avoid being punished			
40	I think physical punishment make one			

	misbehave to get back at one's parents/ caregiver			
41	I think one does not always regret ones action after being physically punished			

SECTION F: ASSESSMENT OF ADOLESCENT'S PERCEPTIONS ON APPROPRIATE METHOD OF DISCIPLINE IN IBADAN NORTH LOCAL GOVERNMENT

42. Physical punishment is not a good way of disciplining a child. 1. Agree 2. Undecided 3. Disagree
43. I believe non-physical punishment is the best way of disciplining child 1. Agree 2. Undecided 3. Disagree
44. I think physical punishment should be banned in homes 1. Agree 2. Undecided 3. Disagree
45. I think without physical punishment I cannot make me a better person in life 1. Agree 2. Undecided 3. Disagree
46. I can become a better person without physical punishment. 1. Agree 2. Undecided 3. Disagree

THANK YOU

APPENDIX III

ETHICAL APPROVAL

TELEGRAMS.....

TELEPHONE.....



MINISTRY OF HEALTH
DEPARTMENT OF PLANNING, RESEARCH & STATISTICS DIVISION
PRIVATE MAIL BAG NO. 5027, OYO STATE OF NIGERIA

Your Ref. No.
All communications should be addressed to
the Honorable Commissioner quoting
Our Ref No. AD 13/ 479/170

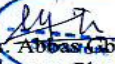
25th August, 2016

The Principal Investigator,
Department of Health Promotion and Education,
Faculty of Public Health,
University of Ibadan,
Oyo State.

Attention: Bakare Fausiat
**ETHICAL APPROVAL FOR THE IMPLEMENTATION
OF YOUR RESEARCH PROPOSAL IN OYO STATE**

This is to acknowledge that your Research Proposal titled: "Adolescents Experiences of Corporal punishment and their Perceived Health Consequences in Ibadan North East Local Government, Oyo State" has been reviewed by the Oyo State Review Ethical Committees.

2. The committee has noted your compliance. In the light of this, I am pleased to convey to you the full approval by the committee for the implementation of the Research Proposal in Oyo State, Nigeria.
3. Please note that the National Code for Health Research Ethics requires you to comply with all institutional guidelines, rules and regulations, in line with this, the Committee will monitor closely and follow up the implementation of the research study. However, the Ministry of Health would like to have a copy of the results and conclusions of findings as this will help in policy making in the health sector.
4. Wishing you all the best.


D. Abbas Belgian -
Director, Planning, Research & Statistics
Secretary, Oyo State Research Ethical Review Committee