

The Prevalence and Types of Child Abuse among Teachers and its Relationship with their Demographic Characteristics and General Health in Primary Schools

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Abstract

Introduction

Teachers are one of the groups that in addition to teaching the students can have a role in control and identification of child abuse and violence in schools. Certainly, before doing any action and choose an approach to reduce misbehavior, we should be aware of situation, how and prevalence of child abuse in schools. The present study aims to investigate the prevalence and types of child abuse among teachers and its relationship with demographic characteristics and general health in teachers whom teaching in primary schools.

Materials and Methods

This was a cross-sectional study on 350 female and male students and 82 teachers that performed with a multi-stage sampling method. The tools for data gathering included: questionnaire of teachers' personal and job characteristics (12 questions), General Health Questionnaire (GHQ) (28 questions), and standard questionnaire of Conflict Tactics Scale. Data were analyzed by the statistical tests of independent t-test, Mann–Whitney, chi-square, one-way analysis of variance (ANOVA), with SPSS version 16.

Results

Results of statistical analysis revealed that there wasn't a significant association between general health and physical abuse. But there was a significant association between general health, emotional abuse and neglect. So that their general health score was higher (more score was not associated with better general health), the emotional abuse and neglect were also higher.

Conclusions

According to the results, it is suggested to design and implement some programs for prevention and reduction of violence in schools of our country and education of violence prevention methods should be part of school curriculum.

Key Words: Child abuse, General health, Primary school, Teacher.

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Introduction

Childhood is one of the most important periods of human life, which is a base for a person's future mental and physical growth (1). Children, for various reasons, including small age and the lack of adequate skills are always the most vulnerable group in society. In inadequate competency of adults who take care of children, issues and problems such as child abuse occurs by them (2).

Child abuse is harm or threat of physical and mental health, happiness, prosperity and well-being of child by parents or people who are responsible to him. It is investigated in four major categories included child neglect, physical abuse, sexual abuse and emotional abuse (3). Types of abuse are different in various countries and times. According to the World Health Organization (WHO), 40 million children were victims of abuse in 2005 (4). In Iran, the results of a particular study in 2008 showed the prevalence of physical abuse was 17.5 %, neglect 36.4% and emotional abuse was 49.4%. These issue make dimensions of child abuse significant is that child abuse occurs in the period that the child needs to learn, and as the student enters the school. After family, school has the most important role in the physical, psychological, social and spiritual of children health (5).

In Iran, during the investigations, Khushabi study (2008) showed the prevalence of mild physical abuse was 38.3 %, severe physical abuse 35.9 %, neglect 20.5 % and emotional abuse was 62.5 %. What are certain, individual and social effects of this violence is no secret. Observation and experience of abuse not only endangering the physical health of child, but also affects on the psychological adjustment, social relationships, academic achievement and other aspects of their personality (6).

About the causes of physical abuse by teachers, the students mentioned the most important factors include busy class and improper space, the lack of good relations and cooperation between teachers and school officials and individual features of teachers. Since the school as an educational and social center deals with many aspects of mental, physical, and social growth and personality in childhood and adolescence (7), so it is necessary for the organization in charge of children's education, provides the child protection conditions physically, mentally and emotionally, at least in seemingly safe school environment and as educator to family and community.

As children are growing and developing, abuse impact on all aspects of growth such as physical, mental, psychological and social growth, they will face many problems and failures and human factors of schools play an important role in the emotional, psychological and pedagogical atmosphere of schools. Some programs are likely to be fruitful in the field of teacher education and giving awareness to them in order to understanding the origins and causes of inappropriate behavior with the students and guidance for dealing with this type of behavior and create peace in school.

Giving information, changing attitude and behavior are the objectives of education. Teachers are one of the groups that in addition to have effective role of teaching students, are responsible for the control and identification of child abuse and violence in schools. Certainly, before doing any action and choose an approach to reduce misbehavior, we should be aware of situation, how and prevalence of child abuse in schools. The present study aims to investigate the prevalence and types of child abuse among teachers and its relationship with demographic characteristics and general health in teachers whom teaching in primary

schools. We hope that by focusing on researches and successful experiences of other countries on mitigation and prevention of misconduct, the results of this study provide guidelines for educational authorities and teachers and thus improve mental, emotional and physical health of children.

Materials and Methods

This study is a descriptive analytical study was conducted on students and teachers. The number of samples was calculated according to the formula

$$n = \frac{z^2 p(1-p)}{d^2}$$

The number of primary school students in the Isfahan city was 327,680, $Z = 1.96$ with regard to confidence coefficient of 95%, P was estimate of the abuse prevalence among school children; because there is no reliable data available, 0.5 was considered to achieve the largest sample size, d is the degree of precision that was considered 0.03 and due to probable failures, sample size was considered 610 students (305 girls and 305 boys). In this study multistage stratified sampling is conducted with respect to gender. For selection according to (category), some schools were randomly (lottery) selected from each area of the five Regions of Education. Then students were selected up to the desired number by using of random systematic method from each school, so that the sample size reached to 610 students.

Inclusion criteria included: girls and boys studying in daily government primary schools, teachers working in primary schools with any employment status and age, relationship between teacher and student in at least three past months, students were able to express information and have cooperation. Exclusion criteria included any congenital defect in speech, mental disorders, endocrine disorders or physical-movement disabled student who

is under treatment that the school officials are aware of it, unwillingness of the students, parents and teachers during the completion of the questionnaire. The tools for data gathering included: personal and job characteristics teacher questionnaire (12 questions), General Health Questionnaire (GHQ) (28 questions) and Conflict Tactics Scale (CTS) questionnaire. Personal and job characteristics teacher questionnaire (age, sex, marital status, education level, courses, the position of teachers, field of study, teaching educational level, housing status, employment status, employment history, salary and retraining spent) which was completed by school teachers.

Standard questionnaire GHQ includes 28 questions and was examined by the four-point criteria. This questionnaire is a most familiar screening tool in psychiatry with the following measures: A (questions 1-7) somatic symptoms, B (question 8-14) anxiety, C (question 15-21) social dysfunction and D (questions 22-28) related to depression. The total score varies between 0-84. The cutting score is the number 23, which is intended to identify people with problem, the people who have taken more than 23 indicates the lower general health (8). This questionnaire was completed by teachers. CTS questionnaire was used by adding to its questions that measured the physical and emotional abuse and neglect, by the investigator. CTS is formulate for the first time in 1979 by Straus for epidemiological and clinical investigation of child abuse. It is a 5-point scale, including scale of physical abuse, emotional abuse and sexual abuse and neglect (for ethical considerations, check sexual harassment was eliminated).

Regarding with questionnaires of parents, the students' parents were invited to participate in a determined day in one of the halls of the Education Department, and 30 questionnaires were completed, then

appropriate questions were selected using Cronbach's alpha (87%). Several studies have confirmed the CTS questionnaire, Amini quoting Barling et al. (1987) states that internal consistency of CTS was satisfactory, in which coefficient α was measured between 0.73-0.87 for scales relating to the various forms of child abuse (8). Also in a study by Tang (1994) was carried out using CTS, reliability of the tool was evaluated and α was measured about between 0.76-0.86 and found that the rate is satisfactory (9).

In order to ensure reliability in the investigation of child abuse in Banihashemian study, Cronbach's alpha was 0.80, too (10).

Data were analyzed by descriptive (Mean - Standard deviation (SD) – minimum-maximum - frequency tables) and inferential statistics (t-test, chi-square, ANOVA), with using SPSS version 16.

Results

Results showed that the highest relative frequency of students' educational year (21.5 %) was related to fifth year and the least was for the first year of primary school (17%). Moreover, 50% of the students were boys and the rest of them were girls. Most frequency of the participants was related to the teachers group (76.25%).

Table 1: Frequency of age, work experience, income rate of the teachers

Variables	Maximum	Minimum	Mean	SD
Age (year)	57	30	44.93	6.17
Work Experience (year)	30	4	21.89	6.08
Income Rate (Rials)	5,160,000	1,270,000	3,613,410	8.56

Most frequency of the participants was related to female group (72.5 %), married (87.8%), with an associate's degree (37.81

%). Mean score of teachers' general health was 12.6±23.58 (Table. 2).

Table 2: Frequency distribution of teachers' general health

General Health	Frequency	Number	Percent
23 Or Lower	52		63.4
More Of 23	30		36.6
Sum	82		100

Table 3: Frequency distribution of abuse intensity the separation of dimensions by teachers

Frequency	Number	Percent
Physical abuse		
Mild	595	99.2
moderate	5	0.8
Neglect		
Mild	14	2.3
Moderate	425	70.8
Severe	161	26.9
Emotional abuse		
Mild	489	81.5
Moderate	111	18.5

Chi-square test showed that there was no significant relationship between physical abuse with marital status ($p = 0.74$), sex ($p = 0.66$), academic degree ($P = 0.79$), housing conditions, and training courses in the field of child abuse for teachers ($P=0.72$).

However, chi-square test showed no significant relationship between the emotional abuse with position of teachers ($P=0.3$), marital status ($P=0.20$), sex ($P=0.12$), and training courses in the field of child abuse for teachers ($P=0.72$); while there was a significant relationship between the emotional abuse with field of study ($P=0.03$), housing condition ($P=0.04$), and position of teachers ($P=0.001$). Moreover, chi-square test showed no significant relationship between neglect dimension with marital status ($P=0.69$), academic degree ($P=0.33$); while

there was a significant relationship between sex ($P=0.02$), academic degree ($P=0.01$), and grade of student ($P=0.003$).

Pearson test showed no significant relationship between general health and the physical abuse score ($r=0.05$ and $P=0.17$). But there was a statistically significant relationship between general health with emotional abuse ($r= 0.09$ and $P=0.02$), and neglect ($r=0.10$ and $P=0.01$).

The general health score was higher (unsatisfactory), emotional abuse and neglect rate was also higher. Table 4, also shows the highest frequency of abuse related to students by teacher by sex of students.

The most frequency of abuse was related to neglect (40.7) and the lowest was related to physical abuse (2.1) in girls.

Table 4: The average scores of abuse (from 0 to 100) in students

Frequency	Number	Percent
Physical abuse		
Mild	595	99.2
Moderate	5	0.8
Neglect		
Mild	14	2.3
Moderate	425	70.8
Severe	161	26.9
Emotional abuse		
Mild	489	81.5
Moderate	111	18.5

Discussion

Results of statistical analysis revealed that there was not a significant association between general health and physical abuse, but there was a significant association between general health with emotional abuse and neglect. So that the general health score was higher (more score not along with favorable general health), the emotional abuse and neglect were also more. Segen and colleagues considered lack of good relations and cooperation between teachers as one of the indicators of violence (11).

The results of Salami study (2003) titled "The impact of teacher behavior on school discipline students" showed that friendly relationship between teachers and students, top of the teachers for the students, significant efforts of the teachers to understand educational materials, respect for students, and family success of the students improve their discipline. Researches also prove that many punishments of children are unfair and solely of parents' and teachers' anger; and

some of teachers punish their students to maintain their dignity and self-esteem. They want to be known as restraining regulations and discipline, so that they can maintain discipline (12-14).

Thus, according to the results of previous studies and the present research, which revealed that misconduct with students in schools is related with teachers' general health and the moral, it is necessary to pay attention to moral and mental health of teachers by school managers and authorities. It can be concluded that teachers, like many other groups of society are trying to show a better picture of them than what are actually. According to the results, it is suggested to design and implement some programs for prevention and reduction of violence in schools of our country and education of violence prevention methods should be part of school curriculum. 'These programs are common in other countries as it can be under different names such as civil education, citizenship education, health education and mental health by the

Ministry of Education in collaboration with organizations outside of school, such as Welfare Organization, consulting services, etc. offered. In these programs, in addition to work with the students, we can taught self-discipline and self-control to them, in order to participate in resolving their conflicts and even in solving the problems of everyday classroom and school by implementing positive language and constructive communication.

Limitations of the study included: 1. Emotional and social characteristics of the students may affect on harassment or violence on children and this may affect research outcomes, which is beyond the control of researcher.

Project problems: 1. The lack of cooperation between school authorities and teachers with the written consent from the Department of Education about the renaming of schools in the sample under study to "health problems of students and teachers"; we tried to get their cooperation. 2. The lack of students' cooperation and reluctance and fear to answer; we tried to attract them with a simple reception and a friendly and loving relationship.

Conflict of interest: None.

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