



WHAT WE KNOW ABOUT THE HARM LINKED TO PHYSICAL PUNISHMENT AND ABOUT INTERVENTIONS TO REDUCE IT IN MEDICAL SETTINGS

ELIZABETH T. GERSHOFF, PH.D.
Professor and Associate Chair, Department of Human Development and Family Sciences
Associate Director for Faculty Development, Population Research Center
The University of Texas at Austin

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Disclosures

Dr. Gershoff has no financial relationships with any commercial interests.

Objectives

- Summarize the research findings linking spanking with harm to children
- Identify why alternatives to spanking are more effective and have less risk for adverse outcomes for children
- Describe strategies to change parents' attitudes about physical punishment that can be introduced in a medical setting

Spanking by Parents Remains Prevalent in the U.S. and Around the World

- In the U.S., 76% of men and 65% of women agree that “it is sometimes necessary to discipline a child with a good hard spanking” (ChildTrends, 2015).
- 70% of mothers of two year olds report spanking their children (Zolotor, Robinson, Runyan, & Murphy, 2011).
- By the time they reach 5th grade, 80% of American children report that they have been spanked by their parents (Gershoff & Bitensky, 2007; Vittrup & Holden, 2010).
- According to UNICEF, 60% of children around the world experience physical punishment from their parents (Hidden in Plain Sight: UNICEF, 2014).

Common Arguments Parents Use to Defend Spanking

- It works!
- I don't believe there are any downsides to spanking.
- Spanking is not hitting – and certainly not abuse.
- It is a normal and necessary part of parenting in my culture or community.
- I only spank occasionally and am otherwise warm and responsive with my child.

Does Spanking Improve Children's Behavior?

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Spanking and Child Outcomes: Old Controversies and New Meta-Analyses

Elizabeth T. Gershoff
University of Texas at Austin

Andrew Gregory Kaylor
University of Michigan

Whether spanking is helpful or harmful to children continues to be the source of considerable debate among both researchers and the public. This article addresses 2 general issues: namely, whether effect sizes for spanking are distinct from those for physical abuse, and whether effect sizes for spanking are robust to study design differences. Meta-analyses focused specifically on spanking were conducted on a total of 111 unique effect sizes representing 160,927 children. Thirteen of 17 meta effect sizes were significantly different from zero and all indicated a link between spanking and increased and the decreased child outcomes. Effect sizes did not substantially differ between spanking and physical abuse or the study design characteristics.

- 75 studies, over 50 years, from 13 different countries
- 160,927 children were included

Does Spanking Improve Children's Behavior?

- Spanking does not make children more compliant in the short term.
- Spanking is also not linked with reductions in aggression or antisocial behavior.
- Spanking is not linked with long-term compliance or internalization of morals.

Does Spanking Improve Children's Behavior?

- Instead, spanking is linked with worse, not better, behavior in children.
- In our meta-analyses, we found that spanking was associated with significantly more aggression and antisocial behavior problems.
- None of the studies showed a link between spanking and better behavior.

Is Spanking Linked with Unintended Negative Outcomes in Childhood?

Our meta-analyses revealed that spanking is linked with several unintended outcomes:

- Mental health problems
- Difficult relationships with parents
- Lower self-esteem
- Lower academic performance

Is Spanking Linked with Unintended Negative Outcomes in Adulthood?

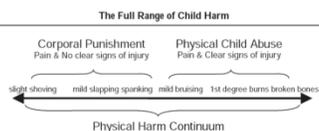
Our meta-analyses revealed that adults who report a history of spanking in childhood report:

- More mental health problems
- More antisocial behavior
- More positive attitudes about and use of corporal punishment with their own children
 - Cycle of violence from generation to generation

Can Spanking Lead to Physical Abuse?

Spanking is hitting.

Family violence experts consider spanking and physical abuse to be on a continuum of violence against children.



Dussich, J. P. J., & Maekoya, C. (2007). Physical child harm and bullying-related behaviors: A comparative study in Japan, South Africa, and the United States. *International Journal of Offender Therapy and Comparative Criminology*, 51, 495-509.

Can Spanking Lead to Physical Abuse?

A review of child maltreatment cases in Canada determined that **75%** of substantiated physical abuse cases involved **intentional physical punishment**.

(Durrant et al., 2006)

Can Spanking Lead to Physical Abuse?

My colleague and I found a strong, statistically significant association between spanking and the risk of physical abuse.

In studies that looked at both spanking and abuse, the size of the association between spanking and negative outcomes was two thirds the size of the association for physical abuse and those same outcomes.

Gershoff, E. T., & Grogan-Kaylor, A. (2016). Spanking and child outcomes: New meta-analyses and old controversies. *Journal of Family Psychology*, 30, 453-469.

Can Spanking Lead to Physical Abuse?

Several state laws say, "Yes":

Physical abuse can include:

"cruel punishment" in Connecticut and Ohio

"excessive corporal punishment" in Illinois, Nevada, New Jersey, New York, Rhode Island, South Carolina, West Virginia

"excessive or unreasonable corporal punishment" in Wyoming

Do the Outcomes Linked with Corporal Punishment Vary by Country or Culture?

A common argument is that, because rates of spanking vary across cultures, the effects of spanking will vary according to how "normative" it is (Deater-Deckard & Dodge, 1997).

--This argument is known as the "cultural normativeness" theory.

Although initial studies in the US found the effects of spanking to be different for Black and White families, many later studies have failed to replicate these findings.

Do the Outcomes Linked with Corporal Punishment Vary by Country or Culture?

In a study of mothers and their children in China, India, Italy, Kenya, Philippines, and Thailand, we found that spanking predicted higher aggression and more anxiety problems in children.

Even when children or parents believed most people in their communities used spanking (i.e., it was normative), it was still linked with these negative outcomes, just to a slightly lesser degree.

Gershoff, E. T., Grogan-Kaylor, A., Lansford, J. E., Chang, L., Zelli, A., Deater-Deckard, K., & Dodge, K. A. (2010). Parent discipline practices in an international sample: Associations with child behaviors and moderation by perceived normality. *Child Development, 81*, 487-502.

Do the Outcomes Linked with Corporal Punishment Vary by Country or Culture?

In a study of over 11,000 children, the majority of all groups spank :

- 89% of Black parents
- 80% of Latino parents
- 78% of White parents
- 73% of Asian parents

Gershoff, E. T., Lansford, J. E., Sexton, H. R., Davis-Kean, P. E., & Sameroff, A. J. (2012). Longitudinal links between spanking and children's externalizing behaviors in a national sample of White, Black, Hispanic, and Asian American Families. *Child Development, 83*, 838-843. doi: 10.1111/j.1467-8624.2011.01732.x

Do the Outcomes Linked with Spanking Vary by Country or Culture?

Black parents reported more frequent use of spanking than parents from the other three race and ethnic groups.

Yet despite these differences across these groups in frequency of spanking, we did not find any differences in outcomes.

Spanking predicted increases in children's behavior problems over time, over and above children's initial behaviors, for all four U.S. cultural groups.

Gershoff, E. T., Lansford, J. E., Sexton, H. R., Davis-Kean, P. E., & Sameroff, A. J. (2012). Longitudinal links between spanking and children's externalizing behaviors in a national sample of White, Black, Hispanic, and Asian American Families. *Child Development, 83*, 838-843. doi: 10.1111/j.1467-8624.2011.01732.x

Do the Outcomes Linked with Corporal Punishment Vary by the Warmth of the Parent?

- In a long-term study of 3,000 children in the U.S., we found that spanking at age 3 predicted increases in children's aggression from age 3 to age 5 for all children.
- The warmth of the parents did not buffer the negative effects linked with spanking.
- We also found that the more warm parents are, the better behaved their children are.
- The opposite was true for spanking.

Lee, S. J., Altschul, I., & Gershoff, E. T. (2013). Does warmth moderate longitudinal associations between maternal spanking and child aggression in early childhood? *Developmental Psychology*, 49, 2017-2028.

So How Did These Arguments Fare?

- Spanking does not promote positive child behavior.
- Spanking increases the risk of a range of negative outcomes, including mental health problems, behavior problems, and lower cognitive ability.
- Spanking is hitting and does increase the chance of physical abuse.
- Spanking has been linked with the same negative outcomes for children across cultures and communities.
- Spanking has been linked with the same negative outcomes for children regardless of how warm parents are with their children.

Physical Punishment is a Violation of Children's Human Rights

- The U.N. has stated that physical punishment of children a form of violence that is inconsistent with the Convention on the Rights of the Child.
- The U.N. has called on all countries* that have ratified the Convention to prohibit all forms of physical punishment.
- **In other words, all countries in the world, except the U.S.*

53 Countries Have Banned All Physical Punishment of Children

| | | |
|----------------------------|-----------------------------------|-----------------------------|
| Lithuania (2017) | Montenegro (2016) | Slovenia (2016) |
| Paraguay (2016) | Mongolia (2016) | Peru (2015) |
| Ireland (2015) | Benin (2015) | Nicaragua (2014) |
| Andorra (2014) | Estonia (2014) | Bolivia (2014) |
| San Marino (2014) | Argentina (2014) | Cabo Verde (2013) |
| Brazil (2014) | Malta (2014) | South Sudan (2011) |
| Honduras (2013) | TFYR Macedonia (2013) | Kenya (2010) |
| Albania (2010) | Congo, Republic of (2010) | Liechtenstein (2008) |
| Tunisia (2010) | Poland (2010) | Costa Rica (2008) |
| Luxembourg (2008) | Republic of Moldova (2008) | Venezuela (2007) |
| Togo (2007) | Spain (2007) | New Zealand (2007) |
| Uruguay (2007) | Portugal (2007) | Hungary (2005) |
| Netherlands (2007) | Greece (2006) | Iceland (2003) |
| Romania (2004) | Ukraine (2004) | Israel (2000) |
| Turkmenistan (2002) | Germany (2000) | Latvia (1998) |
| Bulgaria (2000) | Croatia (1999) | Austria (1989) |
| Denmark (1997) | Cyprus (1994) | Sweden (1979) |
| Norway (1987) | Finland (1983) | |

Legal Status of Corporal Punishment Around the World



Why does all of this matter for medical professionals?

There are a few reasons...

Reason #1: Medical and Public Health Organizations Have Taken Public Stands Against Physical Punishment.

In 2009, several organizations endorsed a report calling for parents to not spank and for professionals to advise parents not to spank:



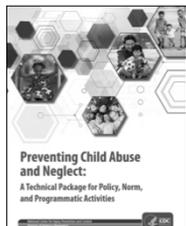
- American Academy of Pediatrics
- American Academy of Child and Adolescent Psychiatry
- American College of Emergency Physicians
- American Medical Association
- National Association of Pediatric Nurse Practitioners
- National Association for Regulatory Administration
- National Association of Social Workers

<http://www.phoenixchildrens.com/community/injury-prevention-center/effective-discipline.html>

Four organizations have published policy statements that recommend parents not spank their children and call on professionals to discourage it:

- American Academy of Pediatrics
- American Academy of Child and Adolescent Psychiatry
- American Professional Society on the Abuse of Children
- National Association of Pediatric Nurse Practitioners

In a report issued in April 2016, the **Centers for Disease Control and Prevention** called for educational and legislative interventions to reduce support for and use of physical punishment as a means of preventing physical abuse of children.



<http://www.cdc.gov/violenceprevention/pdf/can-prevention-technical-package.pdf>

Reason #2: Parents Trust Physicians for Advice on Discipline.

Parents Trust Pediatricians for Discipline Advice

When asked how likely they would be to follow discipline advice from various sources, parents **ranked pediatricians *only behind their spouses and their own parents*** in how much they trust their advice.

Taylor, C. A., Moeller, W., Hamvas, L., & Rice, J. C. (2013). Parents' professional sources of advice regarding child discipline and their use of corporal punishment. *Clinical Pediatrics*, 52, 147-15. doi: 10.1177/0009922812465944

Reason #3: Spanking is an Adverse Childhood Experience (ACE).

Reanalysis of Original ACES Study Data

| | Drug Use | Moderate to Heavy Drinking | Suicide Attempt (lifetime) | Depressed Affect |
|-------------------------------|-------------------|----------------------------|----------------------------|-------------------|
| ACE Exposure | OR _{adj} | OR _{adj} | OR _{adj} | OR _{adj} |
| Sexual abuse | 1.48 | 1.35 | 2.31 | 1.18 |
| Emotional abuse | | | 2.27 | |
| Physical abuse | 1.29 | 1.19 | | 1.33 |
| Spanking | 1.42 | 1.29 | 1.39 | |
| Physical neglect | | | | |
| Emotional neglect | | | 1.65 | 1.38 |
| Mother treated violently | | | | |
| Household mental illness | 1.42 | | 3.41 | 1.65 |
| Incarcerated household member | | | 1.50 | |
| Household substance abuse | 1.55 | 1.82 | | 1.23 |
| Parental separation/divorce | | | | |

Adjustment factors included in the model: age, race, sex, educational attainment, and marital status

Merrick, M. T., Ports, K. A., Ford, D. C., Afifi, T. O., Gershoff, E. T., & Grogan-Kaylor, A. (2017). Unpacking the impact of adverse childhood experiences on adult mental health. *Child Abuse and Neglect*, 69, 10-19.

Reason #4: Parent-to-Child Hitting Occurs in Medical Settings.

My colleagues and I surveyed staff at two health systems to find out how often they see parent-to-child hitting and how they react when they do:



| How often do staff witness parent-to-child hitting in the hospital? | Direct care staff n = 1,616 | Other staff n = 1,584 | Significance of group differences (p values) |
|---|--------------------------------|--------------------------|---|
| Witness a few times each year | 25.4% | 15.5% | <.001 |
| Witness almost every month | 1.9% | 1.0% | <.050 |
| Total | 27.3% | 16.5% | <.001 |

Even if each of these staff only saw one incident per year, that would amount to **771 incidents of parent-to-child hitting per year** across the two hospitals—in other words, two incidents per day.

Font, S. A., Gershoff, E. T., Taylor, C. A., Terresos, A., Nielsen-Parker, M., Spector, L., Foster, R. H., Garza, A. B., & Olson-Dorff, D. (2016). Staff intervention attitudes and behaviors when parents hit children in a hospital setting. *Journal of Developmental and Behavioral Pediatrics, 37*, 730-736.

| If witnessed hitting, whether took action: | Direct care staff n = 1,616 | Other staff n = 1,584 | Significance of group differences (p values) |
|--|--------------------------------|--------------------------|---|
| Never took action | 29.4 | 61.3 | <.001 |
| Sometimes took action | 36.1 | 23.7 | <.010 |
| Always took action | 34.5 | 15.0 | <.001 |

Font, S. A., Gershoff, E. T., Taylor, C. A., Terresos, A., Nielsen-Parker, M., Spector, L., Foster, R. H., Garza, A. B., & Olson-Dorff, D. (2016). Staff intervention attitudes and behaviors when parents hit children in a hospital setting. *Journal of Developmental and Behavioral Pediatrics, 37*, 730-736.

| | Direct care staff n = 1,616 | Other staff n = 1,584 | Significance of group differences (p values) |
|--|--------------------------------|--------------------------|---|
| Staff who did not always intervene (n = 352) | | | |
| Reasons why did not intervene | | | |
| "Did not want to embarrass the parent" | 10.7 | 9.5 | .712 |
| "I was concerned the parent might threaten or harm me in some way" | 14.6 | 9.5 | .153 |
| "I was worried that the parent might get angrier and become more abusive to the child" | 32.7 | 35.4 | .599 |
| "I was not sure what to say or how to stop the parent from hitting their child" | 52.7 | 41.5 | <.050 |
| Other reasons (open-ended) | | | |
| Did not think parent was doing anything wrong. | 5.9 | 8.2 | .397 |
| Not their place to intervene | 2.4 | 8.8 | <.010 |

Font, S. A., Gershoff, E. T., Taylor, C. A., Tereros, A., Nielsen-Parker, M., Spector, L., Foster, R. H., Garza, A. B., & Olson-Dorff, D. (2016). Staff intervention attitudes and behaviors when parents hit children in a hospital setting. *Journal of Developmental and Behavioral Pediatrics, 37*, 730-736.

How Can Medical Settings be a Context for Intervention?

A few ways have been tried...

Medical Setting-Based Interventions

- Several interventions in pediatric offices and health clinics have been found to be effective at reducing positive attitudes about and use of physical punishment:

The **Play Nicely** program, an interactive multimedia intervention that teaches alternatives to physical punishment (Scholer, Hamilton, Johnson, & Scott, 2010)

The **Video Interaction Project (VIP)** which has parents view videotaped interactions between the parent and child taken during each pediatric well-child visit (Canfield et al., 2015).

The **Safe Environment for Every Kid (SEEK)** program which screens for risk factors for maltreatment which are then addressed by a resident physician or social worker (Dubowitz, Feigelman, Lane, & Kim, 2009).

No Hit Zones

- No Hit Zones prohibit hitting of any kind, including parents spanking children, in the hospital.
- Staff are provided online or in person training
 - about the research on spanking,
 - about the hospital's position that no violence of any kind, including spanking, is allowed in the hospital,
 - and about ways they can intervene if they see a parent spank or hit a child in the hospital.
- The goals are to reduce violence in the hospital and to reduce acceptance of hitting children generally.



Evaluation of a No Hit Zone

- Gundersen Medical Center implemented an NHZ in late spring 2014.
- Most staff were trained in the NHZ through online training; some received in-person training.
- NHZ posters were put up around the hospital. Brochures for parents explaining the NHZ and advising how they can discipline their children without hitting were made available throughout the hospital.
- Six months later, they surveyed their staff with the same set of questions as the baseline questionnaire.

Evaluation of a No Hit Zone

- After the NHZ, staff were significantly less likely to:
 - agree that spanking is a normal part of parenting
 - believe that parents should be allowed to spank or hit children while in the hospital
 - to think that their coworkers think spanking is a normal part of parenting

Evaluation of a No Hit Zone

- After the NHZ, staff were significantly **more** likely to:
 - agree that spanking is harmful to children
 - agree that hospital staff have an obligation to intervene
 - believe it is appropriate for staff to intervene when parents are spanking, slapping, or striking with a belt
 - say they feel knowledgeable about alternatives to talk with parents
 - say they have comfortable strategies to intervene when they observe a parent hitting a child in the hospital

Most staff comments were positive:

- "It gives me the tools I need to diffuse a situation and hopefully change future behaviors."
- "Though it is more difficult to intervene than ignore, the NHZ has made it easier to intervene by letting the parent know that this is an organizational policy that I am carrying out rather than my own values being placed on them as parents."

No Hit Zones Can Be Established Anywhere

The screenshot shows a webpage with the following content:

Dane County DISTRICT ATTORNEY'S OFFICE
 125 E. Washington St., 3rd Floor, Madison, WI 53702
 608.261.1000 | www.dane-county.gov

No Hit Zone

Dane County District Attorney Vanora O'Connor is pleased to announce that the District Attorney's Office, including its public defender, is not a No Hit Zone. This No Hit Zone status means that the District Attorney's Office is committed to resolving the use of corporal punishment by discipline instead. Because of the great negative outcomes associated with such punishment, they can be a potential barrier to children's ability to thrive in all of their environments. Corporal punishment, including spanking, and corporal punishment are not a potential policy. Doing so does not ensure punishment will reduce the rate that any given child will suffer child abuse. In addition, it may be more effective to engage in positive discipline as an alternative to punishment.

Child abuse reported at a rate that is 10% higher in homes where corporal punishment is used than in homes where it is not used. The purpose of the Dane County District Attorney's Office is to ensure that the use of corporal punishment is reduced and that the use of positive discipline is increased. The District Attorney's Office will continue to work with the Dane County District Attorney's Office and its public defender to ensure that the use of corporal punishment is reduced and that the use of positive discipline is increased.

With the commitment of the Dane County District Attorney's Office and its public defender to ensure that the use of corporal punishment is reduced and that the use of positive discipline is increased, the Dane County District Attorney's Office and its public defender will continue to work with the Dane County District Attorney's Office and its public defender to ensure that the use of corporal punishment is reduced and that the use of positive discipline is increased.

<https://www.countyofdane.com/da/nohit.aspx>

Going Forward

- Reducing spanking in homes will require
 - attitude change**
 - behavior change**
 - policy change**
- It's a slow process, but progress is being made each day.

Thank You

Please feel free to contact me with questions or for further information:

Elizabeth Gershoff, Ph.D.
 University of Texas at Austin
liz.gershoff@Austin.utexas.edu
 512.471.4800
