BEHAVIOURAL PROBLEMS OF ABUSED AND NON-ABUSED CHILDREN

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BY

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ABSTRACT

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The present study was conducted to identify abused children and to compare the behavioural problems of abused and non-abused children. A sample of "310" (half male and half female) children of age group 10-12 years was taken. From this sample 34 abused and 34 non-abused children were derived for the study. The data was collected from two cities Jhang and Islamabad. The instruments was developed including "a questionnaire to identify abused" "child behavioural problems questionnaire" and "a demographic questionnaire". The results indicated that abused children significantly differ from non-abused children on the measure of behavioural problems. Abused children display greater number of behavioural problems as compared to non-abused children. It was found that children of low socio-economic status are more abused than children of middle and higher SES levels. The results showed that the greater number of siblings at home and less education of the parents have direct relationship with behavioural problems of abused children.

INTRODUCTION

INTRODUCTION

Children are one of the most important assets of a nation. For the greater prosperity of a nation it is necessary that the maximum potentials of the younger generation should be explored and utilised, psychology emphasises on the developmental needs of the children because they are the future builder of next generation. According to Milton,

"The childhood shows the man, as morning shows the Day"

(Paradise Regained)

Most sophisticated people take it for granted that the events of early childhood affect the individual's later social and psychological adjustment. Therefore, almost everyone seems to be interested in children's personality and behavioural characteristics. Personality is a broad and comprehensive concept covering the organisation of an individual's predisposition to behaviour and his unique adjustments to his environment. Personal characteristics (or traits), emotions, motivations, values, goals and way of perceiving are considered aspects of personality structure.

Psychologists maintain that personality development is an enormously complicated process, influenced by a vast number of interrelated and continually interacting factors. Mussen (1964) identifies four broad types of influences which play a major role in determining an individual's characteristics and behaviour, i.e., biological properties, cultural group, individual's personal history of experiences with others, and situations. According to Mussen all these forces

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are interacting and affecting personality development concurrently. It appears that personality is moulded indirectly and directly by the social group a person comes in contact with.

CHILD ABUSE

Abuse of children has been recognised during the past decade and a half as a social problem of major proportions. It has consequently emerged as a focus of concern and activities, for public and non public service agencies, for universities and research organisations, for communications media and for the general public. The size of the problem is difficult to guage but some authorities estimates that as many as two million children may be vulnerable to abuse (Klien, 1977) and that two to fifteen "children die each day from abuse and many more are permanently handicapped either emotionally, physically and/or mentally" (Soeffing, 1975).

In earlier times children were considered the property of their parents, and parents were allowed to abuse and neglect them, but strong counterpressures were also present in the form of wanting healthy children who could contribute to the family's economic welfare. In modern times, children are not expected to contribute significantly to the family's income, and the economic consequences of child abuse and neglect may be felt more by society than by the individual family.

Researchers have begun to delineate prenatal, child and environmental characteristics that increase the risk of child abuse. Parental anxiety and poor parenting skills (Egeland, Breitenbucker, & Rosenberg, 1980); atypical children with mental, physical or behavioural abnormalities (Frodi, 1981).

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Definition

Child abuse has been defined as many deliberate (intentional) act of commission or use of physical force by caretaker directed forward hurting or destroying a child (Gil, 1968; Gil & Novel, 1969; Gil, 1970, 1971a and 1971b, cited in : National centre on child abuse and neglect, 1978).

Definitions of social problems usually reflect values and also assumptions concerning human nature. The values underlying the definition stated are that all children should be deemed of equal intrinsic worth inspite of their uniqueness and should have the right to develop their inherent potentials, and should have access to societal resources and services necessary for such development. Assumptions implicit in the definitions are that human development is an inner motivated, Spontaneous process and that human potential will unfold and mature when conditions and relations encountered by individual are conducive to the realization of their inherent biological, social and psychological needs.

Based on these values and assumptions abuse of children is human originated acts of commission or omission and human created or tolerated conditions that inhibit or preclude unfolding and development of inherent potentials of children. This definition fits all manifestations of child abuse whether individual, institutional and/or societal.

It focuses on human originated interferences with child development whenever and by whatever means humans or their institutions and policies interfere with child development, psychological , social, economic, political, or cultural.

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The researchers have differentiated between child abuse, neglect and maltreatment respectively. This distinction is important in order to compare and interpret the findings across studies investigating child abuse, neglect and maltreatment (Sweet & Resick, 1979).

Giovannoni (1971) has distinguished between neglect and abuse defining abuse as an act of commission which results in harm, and neglect as an act of ommission which have negative effects. He says that abuse constitutes an exploitation of the rights of parents to control, discipline and punish their children, while neglect represents the failure to perform parental duties including those of supervision, nurturance and protection.

Some authors (e.g, Kinard, 1979) have divided the generic concept of abuse into four major categories:-

(a)   Physical Abuse. It is indicated by physical injuries generally considered to be deliberately inflicted by a caretaker. It is undoubtedly the easiest form of abuse to identify because the injuries are often visible even to untrained observers.

(b)   Physical Neglect. It occurs when a child's health or safety is endangered because of a lack of adequate food, clothing, shelter, or supervision. One manifestation of physical neglect is the "failure to thrive" a syndrome in which a child exhibits retarded physical growth and development without organic cause.

(c)   Emotional Abuse. This represents injury to a child's psychological self just as physical abuse consists of injury to a child's body. Its intent and effects are punitive and it is generally experienced as parental hostility or rejection. Such abuse often taken the form

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of verbal criticism, harassment, or denigration. It can also be manifested as criticism of a child's failure to meet unrealistic expectations or standards for his or her performance.

(d)   Emotional Neglect. Emotional neglect is seen as emotional deprivation i.e.,., "failure to provide the psychological, nurturance necessary for a child's psychological growth and development" (National centre on child abuse and neglect, 1978, p-10). Emotional neglect represents a lack of emotional involvement between parent and children.

It must be recognised that these categories of maltreatment are not mutually exclusive. Each type of abuse may occur without indications of the others but it is unlikely that any one form will occur in isolation. emotional abuse or neglect may exist concurrently with physical abuse or neglect, and may continue even after physical maltreatment has ceased. The distinctions are neither unique nor absolute. The forms of maltreatment confound and overlap each other, but they may produce differential effects on the child's emotional development.

BEHAVIOURAL PROBLEMS

The area of behavioral problems is multi-facet and very diverse in its causes and origin. Moreover, a number of interrelated factors influence personal and professional decisions concerning which behaviours are acceptable and which behaviours are unacceptable. Among these factors are the tolerance ranges of people (every person has preferences for certain types of behaviour and aversion to other types), number of conflicting theories and conceptual models which define disturbed behaviour in their own terminology, and sociological parameters that constitute another factor that influence personal views of deviance. Behaviour which causes a

child to be labelled as disturbed really occurs in isolation, rather, it arises from interactions that are influenced by sub cultural and social role factor.

Definition

Bower (1982) has described the behavioural problems as "an inability to learn which cannot be explained by intellectual, sensory, or health factors" --- "an inability to build or maintain satisfactory interpersonal relationships with peers and teachers" --- "Inappropriate types of behaviour or feelings under normal circumstances" --- "a general pervasive mood of unhappiness or depression" --- "a tendency to develop physical symptoms or fears associated with personal or school problems". Bower believes that this definition avoid child's "intra-psychic condition" or clinical designation" it is practical in education settings and it assumes that behaviour may vary from setting to setting.

It would be very difficult to give an exhaustive categories of behavioural problems faced by school going children. Many behavioural problems which also included educational problems, may be manifestation of emotional and social problems. The question is, what are actually the behavioral problems and how they differ from the problems of a normal naughty child. Many studies have shown that the behavioral problems of normal and behaviourally disordered children are similar ___ for instance, both groups show problems of aggression. The difference between normal and disordered behaviour is one of degree rather than kind, and there is no sharp line between the two. Normal children do nearly everything disturbed children do but they do not do so under the same conditions or at the same rate. Crying , throwing tantrums, fighting, whining, spitting, urinating, and so on are all behaviours that can be expected of normal as well as disturbed children. Only the situations in which disturbed children

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performs these acts or the intensity and the rate at which they do them can set them apart from normal children. Longitudinal studies and surveys of children's and parents perceptions of problem behaviour show clearly that a large number of children who are considered normal show disturbed behaviour such as tantrums, destructiveness, fearfulness, and hyperactivity to some degree at times during their growing years. Most children are considered at some time by one of their teachers to be a behaviour problem (Campbell, 1983; Rubin & Balow, 1978; Thomas Chess; & Birch, 1968).

CONCEPTUAL MODELS OF CHILD ABUSE AND BEHAVIOURAL PROBLEMS

There are alternative theories of behaviour (or schools of psychology, and each of these offers an explanation of behaviour and suggests what can be done to change it. They focus on different issues, emphasise different (sometimes even contradicting) portrayals of behaviour disorders. The essential problem is not the number of alternative conceptual models from which to choose. Rather the problem is to choose or construct a theory or philosophy of knowledge about behaviour, and to evaluate conceptual models accordingly.

These theoretical approaches, which like behavioural problems of children, also try to advance understanding about child abuse and neglect in their respective framework.

Psychodynamic Model

The psychodynamic model is a conglomerate of theories that attempts to explain motivation of human behaviour. Dynamic psychiatry is concerned with hypothetical mental mechanists and their interplay in the developmental process. Psychodynamic theorists are

concerned with the needs of the individual, and conflict, anxiety, and guilt are prime concerns of psychodynamic theorists, especially psychoanalysts who believe that any of these states may serve as catalysts for personality development. The diverse theories of psycho analysis, ego psychology; phenomenology; Gestalt psychology; and humanistic psychology fall under its rubric.

Psycho analytic thought is unique among psychodynamic theories in its emphasis on unconscious drives that may conflict with conscious drives ;and thus cause disturbance; in contrast, other theories emphasize conscious experiences such as the individual's perceptions of the environment. In addition, psychoanalytic thought stresses a "predetermined sequence of personality growth" (Rezmierski & Kotre, 1974); that is there are specific stages through which an individual passes in normal progress to adulthood. Psychoanalysts believe that emotional health depends upon successful resolution of the conflicts arising during these developmental stages and that disturbed emotions result when the conflicts are not resolved.

Although it is difficult to promote a singular view of psychodynamic theory, a few commonalities may be extracted. The most basic commonality is implied by the meaning of the term psychodynamic, which literally means "the dynamics of mental activities and processes". All theorists ascribing to the psychodynamic view are concerned about the process of development and change. A second commonality is that anxiety and emotional crises are important motivators of personal growth and self development. A third commonality is that significant individuals in one's early life play important roles as catalysts or deterrents of personality growth and healthy development. The fourth common concept is the emphasis on intrapsychic reckonings of the individual. Although many psychodynamic theorists recognize

the role of the environment in personality development, it is nonetheless the individual's internal perceptions and feelings about that environment whether conscious or unconscious.

Psychodynamic Theories and Child Abuse

Psychodynamic theories are those which presumes behaviour to be primarily the result of the interaction of intrapsychic forces. These forces are usually described in terms of personality traits and states, measured through various psychological tests, or identified by clinical judgment. Although most of the literature on child maltreatment has been influenced by psychological concepts, there have been few comprehensive attempts to construct a psychodynamic theory of child abuse.

One basic belief cited repeatedly in the literature, is that abusive parents have a " defect in character structure which allows aggressive impulses to be expressed too freely" (Kempe, Silverman, Steele, Droegemuller & Silver (1962).

Terr (1970) has presented an explanation of physical child abuse which is heavily influenced by psychodynamic thought. Terr focuses on family dynamics and proposes three factors which contribute to child maltreatment. First, the parent has a specific fantasy about the child which has its origins in the parents own childhood. Second, there is an exaggerated dominant submissive relationship between the parents. Third, the child by nature, because of physical characteristics, or by means of retaliatory tactics, contributes to his or her own abuse.

Several psychodynamic theorists have proposed systems of classification of personality types of physical child abusers (Boisvert, 1972, Merrill, 1962; Zalba, 1967). Zabla (1967) has

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proposed that child abuse arises from dysfunctions of several origins: Intrapsychic causes; family causes; and family environment causes. Maltreating parents whose dysfunction stems from intrapsychic causes are categorised as, either: psychotic; pervasively angry and abusive; depressive; passive-aggressive; or cold, compulsive disciplinarians. Parents whose abusive behaviour originates in the family system are described as impulsive but generally adequate. Parents whose abusive behaviour originates from the family environment system are described as having identity/role crises.

Green, Gaines, and Sandgrund (1974) found six personality characteristics common to most mothers or maternal caretakers of physically abused children (a) reliance on the child to satisfy dependency needs not fulfilled in relationships with spouse and family (b) impaired impulsive control (c) Poor self-concept (d) disturbances in identify formation (e) frequent use of projection and externalisation to be defend against awareness of underlying feelings of worthlessness and (f) misperception of the child. From their analysis, Green et al; provide a characteristic psychoanalytic interpretation of maternal child abuse. The child places an increased demand for nurturance upon the mother, which intencifies her own unsatisfied dependency feelings. The mother then unconsciously equates the child with her own critical, rejecting mother, and again experiences the humiliation and rejection of her childhood. The resulting anxiety, guilt, and loss of self-esteem become intolerable and are displaced on to the child by such defense mechanisms as denial, projection, and externalization. The mother identifies with her mother, who represents her punitive superego, and attacks her child who is now a symbol of her past and present inadequacies.

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Psychodynamic Theories and Behavioural Problems

In psycho analytic view, there is an "ideal course of human personality development. It involves a definite sequence of developmental stages that appear according to a fairly strict time table. Any substantial variation from the ideal results in personality disturbances. Behaviour --- one aspect of personality --- is an outward reflection of the inner psychic energies and operations that control behaviour. Therefore, a behaviour disorder is considered as the sign of a psychic disorder.

According to psychoanalytic point of view the factors that involve in behaviour disorders are, poorly resolved conflicts, defence mechanisms and gross deviations of personality structure.

Poorly Resolved Conflicts

During each stage of development there will be a certain amount of psychic conflict between the mind and the outside world (e.g; wishes versus practical limitation) or among the psychic structures (e.g, id, versus superego) If not resolved appropriately, a conflict will carry over into later stages of development and even into adulthood. For example, during the anal phase of development, the child's wish to defecate conflicts with the parents' effort to toilet train their child. In these efforts are to strict the child may rebel and show "anal explusive behaviour intentionally inappropriate defection. Although in time the youngster will show appropriate toileting, the anal explusiveness, remains an unconscious part of personality, surfacing later in life as disorderliness, cruelty, or destructiveness.

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Energised drives pressure the ego for immediate satisfaction, but this often conflicts with the realities of life or the dictates of the superego. The result is neurotic anxiety about one's ability to control the drives and the consequences of failing to do so. Virtually all of us experience such anxieties. We cope realistically with some by trying to avoid anxiety causing situations, If we cannot do this we may unconsciously develop defence mechanisms that force anxiety out of our awareness and hold it there but overreliance on defence mechanism can be psychologically dangerous for various reasons:

1. They are only temporary, "surface" solutions to problems of anxiety; underlying causes remain and will repeatedly generate anxiety in the future.

2. Building and maintaining defence mechanising against neurotic anxiety tie up psychic energy that might otherwise be used for positive ego growth.

3. Defence mechanisms often involves behaviour patterns that others view as disturbed.

According to Halls and Lindsey (1978) --- "they deny. falsify, or distort reality and --- they operate unconsciously so that the person is not aware of what is taking place" (P- 52).

Some psycho analytic interpretations of psychosis (the most severe behaviour disorders) suggests that either brain disorder or extremely improper parenting interferes with the development of ego (e.g., Mahler, 1952). This leaves the child unable to recognise his own personhood or discriminate between himself and other persons and objects, the serious intellectual, language, movement, relationship, and other behaviour disorders found in psychotic children are the result.

Deficient development of the superego is sometimes through to lie at the root of antisocial behaviour and delinquency. For examples, a young boy who has an improper father figure (or not at all), early in life may not resolve the Oedipus complex, and thus fail to develop a proper superego. The ego is then responsive only to drives and external realities, but not to an internalised set of standards for moral behaviour. In extreme cases, the result is a psychopath who experiences neither inner anxiety nor remorse over an antisocial act.

Neo-Freudian

Erik Eriksons and Karen Horney (1885-1952) down played Freud's biological orientation in psychological theory and emphasised social factors in the development of abnormal behaviour. Central to Horney's theory is anxiety, which stems from a child's feelings of isolation and helplessness in a world which may be perceived by the child as hostile. Erikson conceptulised the new role of ego in personality development. The environment and social values are central to this new view of the ego, a view that result in "the addition of an entire

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social and cultural dimension to the concept of personality growth" (Rezmierski & Kotre, 1974, p-209).

Social Learning Model

Social learning or modeling is a third learning paradigm proposed by behaviourists. In this type of learning, individuals' may acquire new responses by observing and subsequently imitating the behaviour of other individuals, the "models". Social learning differs from operant and respondent conditioning in that individuals are not required to perform the behaviour themselves and no direct reinforcement is necessary for learning to occur (Bandura, 1965a, 1965b).

After watching a model, the observer may be affected in one of three ways: new responses may be acquired, behaviours may become inhibited or disinherited, or previously learned responses may be facilitated. For example, modeling is often used with behaviour disorder students to teach a new social skill such as raising one 's hand before speaking out in class. After this behaviour has been learned by an individual, it may become inhibited if the teacher responds inconsistently to others in the class who raise their hands before speaking out or if the hand-raising behaviour was previously learned but not being used by an individual, the teacher's consistent recognition of others hand-raising may encourage the individual to use the behaviour again.

The extent to which the observer is affected depends upon the extent to which identification with the model has occurred. some of the variable influencing this identification process are age, sex and status or prestige of the model (Bandura, 1965a). Other factors

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affecting social learning rate whether the model is live or on film (Bandura, 1965a), whether one or more model are observed and whether the models are punished or reinforced (Bandura 1977).

Social Learning Theories And Child Abuse

The main premises of social learning theory is that behaviour is accounted for by the "continuous reciprocal interaction of personal and environmental determinations" (Bandura, 1977). Although learning theory has not been advanced formally to explain child maltreatment, the literature abounds with descriptions of parents who were taught abusive behaviour by their own parents through modelling (e.g., Ackley, 1977, Silver, Dublin, & Lourie, 1969) and who have unrealistic expectations of their children (e.g, Davoren, 1968).

A number of studies have provided evidence that parents who abused their children were themselves abused in childhood (Zalba, 1967), and/or had violent adult models (Green,A.H;Gradine.R.W;& Sandgrund, 1974). Oliver and Taylor (1971) reported finding a family in which five generations of children had been maltreated.

Silver et al. (1969) studied 34 cases of child abuse and found evidence of abuse covering three generations. They concluded that violence breeds violence. Not all abusive parents were abused children.

Jayaratne (1977) examined some of the evidence of child maltreatment and concluded that the primary causal factors in maltreatment may be emotional stress rather than physical abuse in childhood.

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In a series of studies (Anderson & Burgess, 1977, Burgess & conger, 1977, Kimball and Burgess, 1977) interaction styles of abusive, neglectful and normal families were observed in the home. It was found that mothers in abusive families interacted 27% less, emitted positive behaviours at a 40% lower rate and emitted negative behaviour 67% more than control mothers. Anderson and Burgess (1977) examined the behaviour of parents and children in abusive and non-abusive families. They found that children reciprocated their parents' behaviour. In abuse families, sons were especially likely to reciprocate their parents negative behaviour and sons received less positive behaviour from their parents. Negative interactions among siblings occurred 50% more often in abusive families as well.

In summary, social learning theory proposes that abusive behaviour is a learned pattern of interaction. There is evidence that at least some abusing parents may have learned such pattern with their own families through reinforcement and modeling.

Social Learning Theories And Behavioural problems

According to social learning theorists, negative or maladaptive behaviours as well as positive ones may be learned through exposure to a model. Bandura, Ross, & Ross,(1961) found that children who observed an aggressive adult model were more apt to behave aggressively than children who had observed a nonaggressive model.

Another pertinent area of social learning is that of self- reinforcement in which reinforcement is derived when an individual thinks about his own attitudes and behaviours in a positive way (Bandura, 1968).

A social learning perspective on a wide range of emotional and behaviour disorders has been put forward by Bandura (1969). There are three ways in which behaviour disorders can arise as a result of modeling: observational learning, behaviour disinherition, and vicarious respondents.

Observational Learning

Children who are exposed to family members, peers, schoolmates, or other persons exhibiting aggressive, bizarre, illegal withdrawn or other patterns of disordered behaviour can learn how to perform such behaviour themselves. Observational learning of maladjustment is particularly likely in families, neighbourhoods, schools and subcultures in which children are exposed to a large variety of aggressive or otherwise deviant behaviours that are repeatedly modeled by numerous persons. Films and television are also rich sources of information and how to behave deviantly.

Behaviour Disinhibition

Models are powerful influences even when they do not teach new behaviour capabilities. For example, when a child observes that other persons readily violate rules, laws, or other standards but suffer few or no ill effects of these actions, the observer's reluctance to break rules may be disinhibited. As in the familiar story of the good child who fell in with bad company, such children may begin to freely engage in behaviours that they would ordinary avoid.

A third way that modeling is implicated in children's behaviour disorders is its role in the teaching of fears. A child can experience emotional arousal by observing a model's facial and other indicative of pain, anxiety, or other emotional states. Later, in similar circumstances, the child may experience fearful arousal and avoid the situation or behaviour with which the model's emotional reactions were originally associated. For example, children can learn to fear and/or avoid thunderstorms, ghosts, animals and many other persons, places and things by observing the emotional responses of parents, peers, and others. Actual observation of harmful consequences as a result of the model's contacts with the fearful situation is not necessary merely awareness of the model's emotional reactions and the circumstances that produced them.

Sociological/Social Psychological Model

Sociology is by definition a systematic study of the structure and behaviour of organised groups of people. Sociologists view the social system as an extensive interrelated set of social positions. When these positions are filled by a person, the position defines his or her social role. These social roles are interdependent on each other and together they describe the continuities and the invariance in the society over generation. Within the social system, the family is a subsystem. It plays an important part in the total social system and is the primary system that is responsible for socialisation of the child. But the family is itself also a social system with interrelated roles and positions. This view of the family as a social system emphasises the transitional character of the interpersonal behaviours within the family.

Social psychological theories focus on the interaction between individual and environment in accounting for human behaviour. They offer a compromise between exclusively individually oriented and exclusively environmentally - oriented theories.

Sociological/Social Psychological Theories And Child Abuse

Sociological theories of child abuse emphasise social factors as primary causes. These factors include the social characteristics of perpetrators and victims, and the situation or context of acts of abuse.

Gil (1971a, 1971b) has presented what he calls a "sociocultural perspective" on physical child abuse. Gil argues that child abuse has a multidimensional set of casual factors. After conducting a nation wide survey, Gil has suggested five societal causes of child abuse. The first and perhaps greatest social factor is the centrally sanctioned use of force in child rearing. Gil states that the use of physical force is encouraged in both subtle and overt ways by press, radio and television and can be found in many schools and child care facilities.

A second factor deals with the extent to which physical force is used in child rearing in families of different social classes and ethnic groups. A third factor had to do with chance environmental events that can create unacceptable disciplinary measures. The fourth factor includes a broad range of environmental stresses that can weaken a person's ability to control angers, frustration, and hostility. The fifth and final factor is what Gil describes as a broad range of bio-psycho-social functioning in the children. Parents and family units involved in child maltreatment.

Giovannoni (1971), proposes that child maltreatment is inherent in an indifferent, neglectful society. Violence committed by parents on their children is relatively slight compared to the rates of preventable infant morality and malnutrition which continue to occur to poverty stricken families as a result of societal indifference. Giovannoni states, further, that for the most abusive and neglectful families, specifically those who are poor, there are relatively few orgnizational networks to provide support and help. For those families who are able to establish connections with an organization, the nature of their relationship with the organization is often punitive and regulatory. Because the families are poor they are unlikely to control the organization or their own access to the services. Giovannoni's position is that families who mistreat their children are themselves victims of stresses of poverty and have been deprived of community supports which would ordinary enhance parental performance.

Gelles (1973) has proposed a multifactoral theory that considers both social and psychological causes of child abuse. On the psychological side Gelles includes a category called "Psycho pathic styles" but holds that those are possible, not necessary, intervening variables. Gelles also includes as causes of child abuse the; parents' social position, values and norms, socialisation experience in regarded to abuse role model for violence and aggression, situational stress, and immediate precipitating situations.

Social psychological theories allow for consideration of one aspect of the maltreatment situation that often overlooked for under emphasised the contribution of the victim. Several investigators have suggested that victims' physical attributes, personality and behaviour may be contributing factors in maltreatment.

Terr (1970) has described the child's withdrawal, indifference to mother, psychomotor retardation, and hostile relations as characteristics of the victim which strain on already poor parent-child relationship.

The role of the child in maltreatment has been examined in a review by Fridrich and Boriskin (1976). Children who were premature, or mentally retarded or have physical handicaps or other difficulties are over-represented among maltreated children. Martin and Beezley (1974), however suggested it is not the child with severe disabilities who is maltreated but rather those who appear mildly different in early life and who do not thereby elicit help from social support systems.

Sociological/Social Psychological Theories And Behavioural Problems

Sociological theorists view the behaviour disordered as one who violates social norms or expectations, these theorists emphasise the role of the environment, that is the social forces that influence individuals and the course then to act in nonconformist or deviant ways. Nonetheless, according to this model deviance and rule breaking must be punished in order to preserve social control, and the needs of the individual are subjected to the benefit of society. Labels and social stigma are forms of punishment often applied to deviant individuals. The deviant child is therefore considered both a misfit and an unfortunate victim of a larger social structure.

According to woody (1969)-----the child who cannot or will not adjust to the socially acceptable; norms for behaviour and consequently disrupts his own academic progress, the learning efforts of his classmates and interpersonal relations (p-7) .

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Much of the research and writing has looked at child social isolation in terms of major situations and opportunities for socialization. several socialization situations have been emphasised: like interaction with parents, the family structure, peers, the schools, other institutions, geographic and economic settings, and mass communications effects (McCandless, 1969).

Most research and writing on socialisation has focused on the family because it is seen as the basic mechanism of socialization. But we will discuss this mechanism after discussing the other socialization influences like peers, role of the school socioeconomic disadvantage.

Peers

Peers interaction normally begins early in life and evolves throughout childhood and adolescence into rather complex structured systems that rate important socialisation influences. Having friends and being a member of peer group can provide social status, enhance self compliance, provide joy and a sense of belongingness, and offer chances for youngsters to experience new roles and ideas that substantially contribute to personal maturity and adjustment. Of course, peer influence is widely recognised as a contributing factor to some behaviour disorders. Peers groups commonly promote attitudes and behaviours that are at variance with those endorsed by parents, teachers, or other authorities. On the other hand, failure to make friends or achieve meaningful membership in peer groups may promote feelings of alienation, worthlessness, or hostility.

Schooling has an undeniably prominent place in the lives of most children, and is closely linked to children's adjustment and maladjustment in various ways. Kauffman (1981) has pointed out that schools are usually geared towards and most supportive of the child who is "healthy", intelligent, upper-middle class, high achieving, high in self system, and adroit in interpersonal skills" (p.136). He goes on to describe a number of ways in which schools might encourage or maintain behaviour disorders of pupils (1) intenstivity to individuality of pupils, (2) inappropriate expectations for the achievement and performance of many children, especially very low expectations that become self-fulfilling prophecies of failure (3) teacher incompetence in individual and group child management, (4) pre-occupation with time-wasting, irrelevant, and boring tasks and skills.

Socioeconomic Disadvantage

Socioeconomic disadvantage refers to a collection of unfortunate circumstances (including poverty, family breakdown, inadequate education and other services) that is associated with behaviour disorders, along with less opportunity for obtaining treatment (Nathan & Harris, 1980).

Media Effects

It would be hard to deny that the mass- communication media have had a growing influence on socialisation of children in the past three decades, or that this trend will probably

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continue. There has been much research on televised violance. In a review of this area, Leibert, Neale, and Davidson (1973) found that more than three-fourths of network TV dramas watch by children involve violence that usually functions to solve some problem.

The reviewers concluded that research generally shows that televised violence often promote aggression in its viewers.

FAMILY SOCIALIZATION

Discipline Styles

Developmental psychologists have shown great interest in child-rearing and discipline practices especially as they relate to children behaviour disorders (see Becker 1964; Martin, 1975).

Much of this research indicates that discipline can be conceptualised in terms of two overall dimensions of parental behaviour, Accepting - Rejecting and permitting-restricting (the hyphenated terms describe opposite extremes on two continua of discipline practices.

Early Separation from Parents

It is commonly believed that unfortunate experiences during childhood are almost certain to have enduring detrimental effects.

Bowlby (1960, 1973) found three stages of reaction to separation from parents, protest consisting of much crying, screaming and increases in motor activity, then despair or general

sadness of mood, sharply decreased activity, non-involvement with the environment, and finally detachment, consisting of apparent disinterest in or hostility to parents.

Learning Maladjusted Behaviour from the Family

Studies have shown that parents and children tend to show similarity one all sorts of behaviours, normal and abnormal. Certainly children and adolescents have ample opportunities to learn --- intentionally or un intentionally --- deviant behaviour patterns from parents, siblings, and others in the family. Children of punitive and verbally aggressive parents tend to be aggressive and disruptive (Oltmanns Broderick, & O Leary, 1977), and son of criminal parents tend to be criminal them selves (McCord, McCord, & Zola, 1950).

ABUSED CHILDREN AND BEHAVIOURAL PROBLEMS

The abused child is often described as being difficult to manage and delayed in several areas of psychosocial development in comparison with normal children. Commonly these children are cared for indifferently in a home with many problems, including several of the following: poverty, unemployment, criminality, subnormal mentality, marital discord, illegitimacy and low birthweight. The children have often been cared for by a series of people, neighbours, relatives or others. They are unable to form warm attachments because of all the changing care and caretakers they have had. They often become overactive, promiscuous in their relationships, mischievous, lacking in control, disobedient, prove to rages and tantrums, accident prone and retarded in speech, personal skills and general understanding of things and people. Learning problems at school and periods of difficult behaviour including stealing, lying and aggressiveness towards other children are frequently found among abused children (Cooper,

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1980). Although recent studies have attended to the developmental consequences of abuse, little consensus has been reached regarding the extent and nature of behaviour problems among these children.

Early clinical reports of abused children noted a greater rate of child abuse among children with physical and general developmental deviations than among normal comparison children (Elmer & Gregg, 1967; Gill 1968; Johnson & Morse, 1968). Elmer (1977) investigated the theoretical assumption that abused children would exhibit problems across a range of developmental areas. Kinard (1980) found her sample of 30 abused children to significantly be different from a group of 30 matched non-abused children in five predicted areas of emotional development: self concept, aggression socialisation with the peer group, establishment of trust with others and separation from the mother. The findings were, that abused children manifest serious problems in emotional development when compared with normally adjusted children.

Martin and Beezley (1977) developed a list of nine characteristics that they had observed in a group of 50 abused children. These are :

1. Impaired capacity to enjoy life

2. Psychiatric symptoms, e.g; enuresis, tantrums, hyperactivity, bizarre behaviour

3. Low self-esteem

4. School learning problems

5. withdrawal

6. Opposition

7. Hypervigilance

8. Compulsivity

9.   Pseudo-mature behaviour

According to Kempe and Kempe (1978) some abused children show extreme watchfulness. They started continually, constantly scanning the environment, avoiding eye contact and keeping their faces immobile. They are fearful and shy and have not learnt to please with smiling and social behaviour. These children are extraordinary passive and accepting whatever happens to them. Such children are difficult to manage, not listings to directions and seemingly impervious to disapproval. They move constantly and can not play with other children continually hitting out at them. Their language is as aggressive as their behaviour.

Reid, Taplin & Lorber (1981) reported that abused children in their sample displayed the highest rates per minute of total aversive behaviour of any family member also exceeded the rate of clinic- referred behaviour problem and non-problem children. Wolfe & Mosk, (1983) found that abused children display a significantly greater number of behaviour problems and the behaviour patterns of a sample of abused children resembled the wide range of behaviour problems displayed by children dimension significantly differentiated these two groups.

Lahey, Conger, Atkeson & Treiber (1984) reported that an average of 4% of the behaviours emitted by abused children involve a physical negative (pushing, hitting, or grabbling), as compared with low SES, and middle SES control children.

Twentyman (1984) found that abused and neglected children emitted significantly higher rates of physical and verbal aggression than non-problem children.

The findings from studies of emotional development in battered children provide evidence that certain personality characteristics such as negative self-images, inappropriate handling of aggressive impulses, failure to trust others and difficulties in relating to parents and peers are likely to be outcomes of experiencing abuse. Though there have been no attempts to deny the reality of the adverse effects of abuse on the child's emotional health and development, there has been little recognition of these effects in conducting research or in planning the delivery of protective services. In order to provide empirical evidence for understanding phenomena and improving the management of child abuse cases, more research on the psychological consequences of abuse is needed.

The present study is designed to assess the abused children's behavioral problems in relation to non-abused children. And it is assumed that abused children display greater number of behavioral problems as compared to non-abused children.

RESEARCH OBJECTIVES

The study has following broad objectives.

1.   To identify the " abused" (physically and emotionally) children in our society.

2.   To identify the behavioural problems of both abused and non-abused children.

3.   To compare the behavioural problems of abused and non-abused children.

4.   To probe the behavioural problems which are common among abused and non-abused children.

5.   To investigate the impact of socio-economic status on child abuse and the behavioural problems of children.

6.   To explore the relationship between parent's education and child abuse.

7.   To find out the relationship between the gender of the children and child abuse.

8.   To find out the relationship between the gender of the child and the nature of behavioural problems.

HYPOTHESIS OF THE STUDY

1.   Abused children will show more behavioural problems as compared to non-abused children.

2.   Female abused children will have more behavioural problems as compared to male abused children.

3.   There will be more incidence of child abuse in families of low socio-economic status as compared to the families of high socio-economic status.

4.   Abused children of low socio-economic status will display more behavioural problems as compared to abused children of high socio-economic status.

5.   Children of more educated parents will be less abused as compared to the children of less educated parents.

6.   The abused children will belong to the families with high number of siblings as compared to the non-abused.

METHODOLOGY

METHODOLOGY

Sample

A heterogeneous sample of '310' (half male and half female) school going children were recruited from the cities of Islamabad and Jhang. All the children were in the age range of 10-12 years. This sample was administered a child abuse questionnaire to identify abused and non-abused children. On the basis of cut off scores of this questionnaire two groups of 34 children each abused and non abused were selected and only these two groups were included in the main study. The group of abused children comprised of 19 female and 15 male children and non-abused of 20 female and 14 male children. The abused group consisted of 4 children of 10 years old, 14 of 11 years, and 16 of 12 years old. The non-abused group consisted 10 children of 10 years, 6 of 11 years, and 18 of 12 years old.

Instruments

The following instruments were developed to measure and compare the behavioural problems of abused and non-abused children.

1. Questionnaire to Identify abused and non-abused children.

A quesionnaire was developed for the purpose of identification of abused and non-abused children. For the development of this quesionnaire items were constructed which pertained to the interaction, attitudes and behaviours of parents toward their children. Some of

these items were taken from a questionnaire developed and used in a study to classify abused and non-abused children (Shah, 1991). A couple of these items were changed, whereas, some new items were also constructed. In this way a questionnaire consisting of 20 items was prepared. The questionnaire contained 7 positive and 13 negative items. Each item was provided with a five point rating scales with categories as never, sometimes, do not know, often, always (see appendix A). These items were given to 6 parents and 6 teachers to find out, whether they were representatives of parents' maltreatment of their children, and,could be used for our purpose. The criteria for the selection of items was the percentage of positive rated items. On the basis of results all the items were retained to be used in the main study (see appendix E). The numerical for rating categories were 1, 2, 3, 4, 5.The scoring for the positive items was reversed i.e.,. 5, 4, 3, 2, 1. If a negative item was marked with 'never' it received a score of 1 and if a positive item was marked 'never' it received a score of 5.

The cut score for the identification of abused children was 75. The children who scored 75-100, were selected as abused and who scored 20 - 40 were included in the group of non-abused children.

2. Child Behaviour Problems Questionnaire

Another questionnaire was developed to measure the behavioural problems of children. For the development of this questionnaire, an open ended questionnaire was developed. It was developed by following the pattern of a questionnaire used in 'development of a problem checklist for Pakistani Adolescents' (Khan, 1991). This open ended quesionnaire consisted of 10 categories of behavioural problems like social, moral, personal, family, school, educational, and peer group problems (see appendix B). It was given to a group of 50 children, 30 parents,

and 30 teachers. They were asked to list the categorised behavioural problems, which they experience or observe among children of 10 - 12 years old. With the help of these problems reported by the subjects and other related material i.e., 'Bachoon key Nafsiati Massayal' (Tariq, 1985); 'behaviour problem checklist' (Qureshi,1966); and 'the child behaviour profile' (Achenbach,1978), a total of 80 behavioural problems were selected and statements were prepared on the bases of these behavioural problems (see appendix C). These statements were pre-tested on a sample of 30 children, 20 parents and 10 teachers. They were asked to rate the relevance of these behavioural problems for the children on a rating scale with the categories "totally false", " false to greater extent", " false to some extent", " do not know", " true to some extent", " true to greater extent", "totally true". For the analysis these responses were distributed into two main categories 'yes' and 'no' (see appendix D). On the bases of 'yes' frequencies 37 items were selected for the final questionnaire (see appendix F). It means 37 behavioural problems were reported common among the children of 10-12 years old by the subjects. Each of these 37 statements are to be rated on a seven point scale with categories as "totally false", "false to greater extent", "false to some extent", "do not know", "true to some extent", "true to greater extent", "totally true". Their corresponding scores were 1, 2, 3, 4, 5, 6, 7 respectively.

3.   Demographic Questionnaire

A questionnaire was used to know the following personal and demographic informations from the subjects (see appendix G).

1.   Age

2.   Sex

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3.   Class

4.   Father's education

5.   Father's occupation

6.   Mother's education

7.   Mother's occupation

8.   Monthly income

9.   Number of siblings at home

10. Birth order

Procedure

The instruments developed were administered to the children in the main study. The data was collected from two cities Jhang and Islamabad. The respondents were approached individually at their homes. The respondants in the age of 10-12 years were selected from different localities at randomly. The addresses of children were taken from schools. Researchers has to face great difficulties to convince some of the parents of the children to be allowed to participate in the study. They were assured that the purpose of the study was to know the behavioural disposition of their children. Some of the children were also afraid to expose themselves. So before administering the questionnaire rapport was developed and subjects were told the purpose of the study. The questionnaires were administered in a daily life setting.

Before administrating the questionnaire researcher read the instructions for each questionnaire herself. Subjects were directed to mark only one response, without hesitation, they think could best reflect their opinion. They were assured confidentiality of their responses. Appropriate examples were also given for the understanding of the subjects. Then the subjects

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were told to begin the questionnaires by reading first the general instructions printed at the start of each questionnaire, which were also given verbally to them by the researchers. Subjects were told that they can seek help the researcher if they feel any difficulty at any stage while rating the questionnaires.

As a first step the subjects completed the questionnaire to identify abused and non-abused. This questionnaire consisted of 20 items. Each item was to be responded on a five point scale never, sometimes, do not know, often, always. After the completion of the questionnaire the subjects were asked to be responded to child the behaviour problem questionnaire. There were 37 items in this questionnaire having seven points scale totally false, false to greater extent, false to some extent, do not know, true to some extent, true to greater extent, totally true.

At the end subjects were asked to fill the demographic questionnaire carefully to provide some personal informations, which were about their gender, education, parents' education, socio-economic status, number of siblings at home and the birthorder. For these informations help was also taken from the family members of the children, if needed. At this stage subjects were again assured that every information provided by them will be kept confidential and will only be used for research purposes. After completion of the task by the subjects the questionnaires were checked to ascertain whether or not any information was missed by the subjects. The subjects were requested to complete the informations if it was found incomplete. The subjects took 20-30 minutes to complete the questionnaires.

RESULTS

RESULTS

First of all the scores of the subjects on child abuse questionnaire were analyzed and those scoring low and high on this questionnaire were divided into abuse and non-abused groups. The cut-off scores for the selection of the children in these two groups has already been mentioned. Further analysis were carried out only on these two groups of subjects. Frequencies and percentages for both abused and non-abused groups were computed on different variables. T-test were performed to compare the abused and non-abused groups on different variables.

Table 1:   Frequencies and percentages of male and female abused and non-abused children.

	ABUSED		NON-ABUSED	
	F	%	F	%
Male	15	44.1	14	41.2
Female	19	55.9	20	58.8

The Table 1 shows that 44.1% abused are male and 41.2% males are non-abused. Similarly 55.9% females are abused and 58.8% females are non-abused. Frequency distribution show more number of female children in both abused and non- abused groups.

Table 2: Frequencies and percentages of abused and non- abused children belonging to different socioeconomic class.

	ABUSED		NON-ABUSED	
	F	%	F	%
Low (1000-3000)	15	44.1	5	14.7
Middle (3100-6000)	11	32.4	16	47.1
Upper (6100-above)	8	23.5	13	38.2

The Table 2 shows that greater number of abused children come from low socio economic status followed by middle class. However greater number of non-abused belong to the middle class followed by upper socioeconomic class.

Table 3: Means, frequencies and percentages of parents' education of abused and non-abused children.

Parents' education	ABUSED		NON-ABUSED	
	F	%	F	%
Below & primary	16	47.1	3	8.8
Matric	13	38.2	9	26.5
Graduation & above	5	14.7	22	64.7

The Table 3 shows that greater number of abused children (47.1%) belong to less educated parents and greater number of non-abused children (64.7%) belong to highly educated parents.

Table 4: Frequencies and percentages of birthorder of abused and non- abused children.

	ABUSED		NON-ABUSED	
	F	%	F	%
First born	3	8.8	13	38.2
Middle born	30	88.2	20	58.82
Last born	1	2.9	1	2.9

The Table 4 shows that last born children are less abused as compared to the middle born and first born children. The most abused children are middle born (88.2%).

Table 5   Frequencies and percentages of number of siblings of abused and non-abused children.

	ABUSED			NON-ABUSED	
Number of siblings	F	%	Number of siblings	F	%
3	3	8.8	1	3	8.8
4	8	23.5	2	8	23.5
5	6	17.6	3	7	20.6
6	5	14.7	4	7	20.6
7	5	14.5	5	6	17.6
8	3	8.8	6	2	5.9
9	2	9.5	7	1	2.9
10	1	2.9			
11	1	2.9			

The Table 5 shows that the number of siblings of abused children families is in the range of 3 - 11 and non-abused in the range of 1 - 7. The highest frequencies of abused fall in the range of 4 - 7 and highest frequencies of non- abused fall in the range of 2 - 5.It shows that abused children belong to the families which have more number of siblings.

Table 6:   Mean scores on the measure of behavioral problems of abused and non-abused children.

Behavioural problems	Means of abused	Means of non- abused
1	6.13	4.12
2	5.71	3.44
3	6.76	3.62
4	5.56	3.41
5	6.12	3.32
6	4.71	3.38
7	5.38	3.44
8	5.65	3.71
9	6.91	5.26
10	6.09	3.47
11	6.85	3.44
12	5.85	3.12
13	6.18	3.12
14	5.12	3.00
15	6.21	3.26
16	4.09	4.06

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17	4.53	3.56
18	5.50	3.91
19	6.15	4.06
20	6.32	5.62
21	2.74	3.85
22	5.82	3.50
23	2.26	2.32
24	5.15	3.94
25	5.35	1.24
26	4.85	3.03
27	2.97	1.53
28	6.47	2.76
29	3.47	2.35
30	1.85	1.68
31	5.18	1.94
32	3.24	1.91
33	3.76	3.91
34	3.82	2.26
35	5.85	3.32

36	2.24	3.38
37	6.18	4.18

The Table 6 shows great difference in the mean scores of abused and non-abused children. Means of abused indicate more behavioural problems as compared to non-abused. The greatest difference in the means scores were found on item No.25 (liking for aggression related games), item No.28 (to be involved in quarrelling with brother and sisters), item No.31 (habit of telling lie).

Table 7:   Means, standard deviations and t-value of behavioural problems of abused and non- abused children.

Groups	Mean	SD	df	t	p
Abused (N=34)	187.41	11.41			
			66	20.62	.0001
Non-Abused (N= 34)	121.44	14.76			

The results in Table 7 show highly significant difference on behavioural problems t (66) = 20.62, p < .0001. It indicate that abused children have more behavioural problems as compared to non- abused children.

Table 8:   Means, standared deviations, and t- value of mean parental education of abused and non-abused children.

Groups	Means	SD	df	t	p
Abused (N=34)	6.01	3.43			
			66	-5.56	.0001
Non- Abused (N= 34)	11.01	3.95			

The results in Table 8 show a highly significant difference in abused and non- abused children on parent's education t(66)= -5.56, P < .0001. The means describe that the parents of abused children are more likely to be less educated or uneducated as compared to non-abused children.

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Table 9: Means, standared deviations and t- value of number of siblings of abused and non-abused children.

Groups	Means	SD	df	t	p
Abused (N=34)	5.85	2.06			
			66	5.46	.0001
Non-Abused (N= 34)	3.44	1.54			

The results in Table 9 shows highly significant difference in the means of two groups on the number of siblings t(66)= 5.46 , p < .0001 . The means indicate that abused children come from the families having more children as compared to non- abused children.

The correlation between abused scores and behavioral problems was also calculated. It was found as r = .9237; p < .001. This indicate that there is a strong relationship between the degree of child abuse and their behavioural problems. The more frequently and more severly a child is abused he is likely to show more behavioural problems.

T- test was also computed for gender differences on the abuse score. The results indicate no significant difference in the abuse scores of male and female, t (66)=- 0.21, p > .831.

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T-test for the gender difference on behavioural also show no difference in the behavioural problems of male and female children, t (66) = 0.19, p > .847.

T- test for gender difference were also computed repeatedly for abused and non-abused children on their behavioural problems score. The results of abused indicate no difference in behavioural problems of male and female, t (32) = .45, p > o.45. The results of non-abused also indicate no gender difference on behavioural problems, t (32) = 1.09, p > .282.

The two way ANOVA was also computed to find out the effect of socioeconomic status on the behavioural problems of abused and non- abused children. The results indicates that socioeconomic status has no effect on the behavioural problems, F(1, 62) = 0.87 p > 0.1.

DISCUSSION

DISCUSSION

The present study was conducted to find out and compare the behavioural problems of abused and non-abused children. The findings indicate that abused children significantly differ from non-abused children on the measure of behavioural problems. Abused children display greater number of behavioural problems as compared to non-abused children. It was found that children of low socio-economic status are more abused. The results also show that the greater number of siblings at home and less the parents are educated, there is more likelyhood of child abuse and the children showing more behavioural problems. It was found that there is no sex difference on behavioural problems. In both abused and non-abused children, the number of female children was more as compared to male children.

The current findings suggest that it is the interactions, attitudes and behaviours of the parents towards their children which causes negative psychological consequences and disrupt behaviour among children. The analysis of data show that the children who are abused they got highest scores on the measure to identify abused children on the items which reveals parents' behaviours like "to threat the children" and "use of harsh language". Parent's behaviour of such type create disturbance in the child's social and behavioural development. In our culture this is the common practice that parents threat the children and use harsh words. Parents never bother that it will create problems in their children's behaviour. They think it is the right of parents to train and discipline their children by force and by power. But this attitude of parents results negative consequences and children exhibit problems across a range of developmental areas.

The results of the present study concur with findings of wolfe and Mosk (1983) that indicate abused children display a significantly greater number of behavioural problems. Another study conducted by Kinard (1980) also support our results. Kinard interpreted that abused children manifest serious problems in emotional development

The first hypothesis that "abused Children will display more behavioural problems as compared to non-abused children" is supported by the data. The analysis of data reveal highly significant results. The means of the behavioural problems of abused children are higher as compared to non-abused, especially on the problems like aggression, quarrelling and fighting, telling lie, short-tempered, confusion, shyness, carelessness, lack of decision power, emotionality, difficulty in making friends, lack of exposure, fearness, lack of obediency and rapid change of mood.

The highest mean scores of the sample on the measure of behavioural problems reveal highest scores on item 25 and 28, these are "liking for aggression related games" and "to quarrel and fight with brothers and sisters at home" respectively. It shows that abused children are more prone towards aggression related problems as compared to non-abused children. This aggression may be due to parental rejection, desire to win attention, the child's desire to show superiority, need for self protection when the child feels insecure or is on defensive, jealousy, identification with an aggressive adult or an aggressive character in the mass media, permissive attitude of adults towards aggression, emotional tensions resulting from stressful conditions.

It may be because of the reason that abuse children live in quite a different "home environment" where they face aggression of their parents, (and may be of their elder brothers or sisters). And this in turn built their personality quite differently from that of non-abused children. Due to the aggressive and dominating attitude of their parents. They usually do not express their feelings, emotions, and keep on "supressing" them. For their catharsis they involved in aggression related activities. They do what they learn from their parents. Aggressive behaviour is learned from the "models" they found at their homes. So this behaviour is an outlet of the aggression they have experienced. These findings that children are more prone towards aggression are consistent with some other studies. Twentyman (1984) found that abused and neglected children emitted significantly higher rates of physical and verbal aggression than non problem children. Another item on which abused children have high scores is about "habit of telling lie". We can simply explain it, when children do not get affection and attention they use some tricks to overcome it. They tell a lie to get attention. They may think this as a source of satisfaction and attention. Because they are neglected and rejected by their parents and when they tell lie they get punishment in this way they divert their parents' attention to themselves. They get parents' attention whether, in negative sense but they feel satisfy. In the long run. This habit may create serious problems like cheating, stealing etc. but at the very moment this is the source of satisfaction for him.

The results indicate that the lowest mean difference of abused and non-abused children was on the "inability to do work continuously ". It shows that children of this age whether abused or non-abused they mostly have this problem do any work of continuity. It may be because of the reason that they do not have the sense of responsibility. They may discontinue their works so oftenly be cause of the reason that from every new activity they seek some happiness, thrill, joy and some sort of satisfaction. They like change in their activities. Some

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behavioural problems are also identified that are specific to non-abused children are "habit of argumentation", "play with younger children", "always complaining about others" and "think oneself very competent". All these problems are commonly found among all the children of this age and usually parent's are found to be complaining of such behavioural problems of their children. Problem of "thinking oneself competent" is very common observation especially in growing up kids because they want to show their competence, importance and superiority to the peer group. So they always try to induldg in such activities in which they have a plenty of chance to show their competence or skills.

Another findings of the study show that abused children belong to the families which have more number of siblings as compared to non-abused children. It means abused practices are more common in families with more children. Due to more number of children parents can not give proper attention to their children. Their emotional attachment with the children is not so deep and they do not share their problems adequately. The period of adolescent is full of turmoil and a sensitive period which required guidance and attentions of the parents. They want to share their feelings with their parents but parents mostly remain unconcerned because of multiple problems due to big families. They can not give equal and sufficient attention to greater number of children individually.

The results of other studies also indicate that larger families tend to use physical punishment more often than smaller families (Good, 1974). Thus, children from larger families may be at risk for abuse and may be more aggressive than those in smaller families as a result of greater exposure to physical punishment. The greater the number of children in a family, the more likely parents, particularly mothers are to feel frustrated and overwhelmed by adverse conditions that may lead to abuse (Steinmetz & Strans, 1974).

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It was found that abused children are more likely to belong to less educated or uneducated parents. It means that children of educated parents are less abused, because they are aware of the rights of children. They have more communication and understanding with their children. They can feel and can realize the problems of children. They understand the psychological, social and biological needs of children. On the other hand less educated and uneducated parents have to do more physical work. Due to this, they have less time and they can not give attention to their children. In our society because of the lack of education parents consider "physical force" as the best way to discipline and train their children. Less educated or uneducated parents' socialization and atmosphere from which they come is different from that of educated parents. They are more rigid, and authoritarian. This is what they have learned during their own childhood and are now transferring it to their children. In our country rate of literacy is less. If some organization or institute tries to convey the rights of children and child rearing practices etc., it is not communicated to less or uneducated parents. Limited number of parents can understand the message. In the light of our results we can conclude that education gives awareness and make broader the thinking of man. So children of educated parents are less abused.

Another assumption of the study that children of low socio-economic status will be more abused as compared to children of high socio-economic status has been supported especially in the case of low socio-economic status. The mean abuse scores of the children from low socio-economic status are highest followed by the middle class children. The scores of the non-abused children are highest in middle class followed by upper class. The major reasons for the abuse of children in the lower social class are the poverty, insecurity, frustration and stress. The poor parents have fewer options than affluent ones to deal with the economic problems, insecurity, frustrations and stress. They have no means to take good care of their children. In addition poor

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households also have less space, a circumstances which may increase opportunities for tension in interactions with children. A great deal of researches supports the hypothesis that low income and related factors e.g., inadequate housing, sleeping arrangements and support systems are associated with higher incidence of child abuse and neglect (Goldston, 1971; Garbarino, 1976; Gil, 1971 a; Giovannoni & Billingsley, 1970; Sattin & Miller 1971).

Another assumption related to socio-economic status that children of low socio-economic status will show more behavioural problems as compared to children of high socio-economic status has not been supported by the data. It was found that there is no relationship between socio-economic class and the frequencies of behavioural problems. Children of all socio-economic status display almost common behavioural problems. It means socio-economic status has no effect on behavioural problems and there is no interaction between socio-economic status and groups (abused, non-abused).

The results regarding the birth order show that there is no difference of birth order between abused and non-abused children. Both abused and non-abused children are found in higher frequencies among middle born children. The results do not support our hypothesis. It may also be due to sampling procedure that the sample consisted of more children from the middle class.

When we compare the frequencies of both groups (abused, non-abused) we come to know that more number of abused children are middle born and non-abused are also middle born followed by first born. We have already discussed that abused children belong to the families having large number of siblings. When we relate these results with birthorder, It can

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be easily understood that in larger families middle born children are more supressed. Moreover, the middle born children are more in the sample as compared to the first and last born children.

The results also indicate that there is no difference between males and females in the abused and non-abused groups. The findings do not support our hypothesis. It may be because our limited sample. Moreover, as the results show more number of female children are abused as compared to male abused children. It means female are more abused but at the same time more number of female are non-abused because female are socialized and reared up in such a way that their behaviour becomes adapted. They adapt the attitudes and behaviour which are acceptable to their parents and in this way they try to save themselves from the anger of their parents. It was also found that male and female abused children do not differ as regards their behavioural problems.

So on the basis of our findings we can conclude say that abused children have more behavioural problems as compared to non-abused children. Abused children belong to low socio-economic class and their parents are less or uneducated and abused children come from families with greater number of children. It means that it is the social structure in which a child primarily constitutes the medium of abuse and to the homely environment in which he was brought up. An unhealthy social environment may disrupt healthy development of a child leading to diverse behavioural problems.

In our society there is complete ignorance of the concept of child abuse. People do not know what are the rights of children. They think children are at their disposal whatever they like they can do with them. Strict disciplinary practices for child rearing are considered important for the moral development of children. As a child is entirely dependent upon his

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family, it is expected from him to behave passively and to follow the parents' instructions. No attention is given to the developmental needs of his personality. And all this come under child abuse. We have defined abuse of children as a human originated acts of commission or omission and human created or tolerated conditions that inhibit or preclude unfolding and development of inherent potentials of children. In the present study we studied both the abused and non-abused children who were abused by their parents. The comparison of behavioural problems show that parents who abuse their children are either unaware of the impact of abuse or the psychological and mental well being of their children or they do not consider it an important issue.

In regards to the limitations of this study. First drawback is the limited number of sample. The nature of research was of such type that respondents were afraid to expose themselves. There were some family pressures that might have affected the responses of our subjects. From the selected sample we found limited number of abused children. Another important point is to compare the results of present study with the children of other age groups, that is not taken under consideration in this study.

An untouched factor of the study is that to know the status of victim. It is very important to know whether he is abused due to his behaviour or his behaviour is due to abuse phenomenon. Because he may be abused due to his disrupted behaviour. So it is necessary to find out whether this behaviour is the consequence of abuse practices or abuse practices is the cause of behaviour.

The future studies in this regard require much bigger sample also consisting of children from rural areas. Sample of non school going children should also be included in study,

moreover equal number of children for all different social classes and the birth order should be taken. A valid scale to identify abused children should also be developed that could be generalized. In essence the future research should consider diverse and greater number of variables in order to understand their interrelations with each other and their relative weightage.

REFERENCES

REFERENCES

Achenback, T. M. (1978). The child behavior profile: I. Boys aged 6-11. *Journal of Consulting and Clinical Psychology, 46*, 478-488.

Ackley, D. C. (1977). A brief overview of child abuse. *Social Case Work, 58*, 21-24.

Anderson, E. A., & Burgess, R. L. (1977). *Interaction patterns between same and opposite gender parents and children in abusers and non-abusers families*. Paper presented at the 11th annual meeting of the Association for the Advancement of Behavior Therapy, Atlanta.

Baldwin, A. L. (1980). *Theories of child development* (2nd ed). New York: John Wiley & Sons.

Bandura, A., Ross, S., & Ross, S. (1961). Transmission of aggression through invitation of aggressive models. *Journal of abnormal and social psychology, 63*, 575-582.

Bandura, A. (1969). Principles of behavior modification. New York: Holt, Rinehart and Winston.

Bandura, A. (1977). *Social learning theory*. Englewood Cliffs, N.J.: Prentice Hall.

Becker, W. C. (1964). Consequences of different kinds of parental discipline. In M. L. Hoffman (Eds.), *Review of child development research (Vol. 1)*. New York: Russell Sage Foundation.

Becker, W. C., Madsen, C. H., Arnold, C. R., & Thomas, D. R. (1967). The contingent use of teacher attention and praise in reducing classroom behavior problems. *Journal of Special Education, 1*, 287-307.

Boisvert, M. J. (1972). The battered child syndrome: *Social Case Work, 53*, 475-480.

Bower, E. M. (1982). Defining emotional disturbances. Public Policy and Research. Psychology in the Schools, 19, 55-60.

Bowlby, J. (1973). Separation and loss. New York: Basic Books.

Bowlby, J. (1960). Grief and mourning in infancy and early childhood. Psychoanalytic Study of the Child, 15, 6-12.

Burgess, R. L. & Conger, R. D. (1977). *Family interaction in abusive, neglectfull and normal families*. Paper presented at the 11th annual meeting of the Association for the Advancement of Behavior Therapy, Atlanta.

Campbell, S.B. (1983). Developmental perspectives in child psychopathology. In T.H. Ollendick M. Hersen (Eds.), Handbook of child psychopathology (pp. 13-40). New York: Plenum. Exceptional children, 45, 102-111.

Coleman, M. C. (1986). *Behaviour disorders theory and practice*. New Jersy: Prentice-Hall, Inc.

Conger, R. E. (1975). A social learning approach to family intervention: vol 1. Families with aggressive children. Eugene, Ore: Castalia.

Cooper, C. (1980). Symptoms, Signs and diagnosis of physical abuse. In V. Carver (Eds.), child abuse a study text. Milton Keynes: The open university press.

Crain, W. C. (1985). *Theories of development concepts and applications* (2nd ed.). Prentice-Hall International, Inc.

Cullinan, D., Epstein, M. H., & Lloyd, J. W. (1983). *Behaviour disorders of children and adolescents*. New Jersy: Prentice Hall, Inc.

Davoren, E. L. (1968). The role of the social worker. In R. E. Helpepr & C. H. Dempe (Eds.). *The battered child*. Chicago: University of Chicago Press.

Egeland, B; Breitenbucker, M., & Rosenberg, D. (1980). Perspective study oawthe significance of life stres in the etiology of child abuse. *Journal of counselling and clinical psychology*, 48, 195-205.

Elmer, E., & Gregg, G. (1967). Developmental characteristics of abused children. *Pediatrics, 40*, 596-602.

Elmer, E. (1977). A follow-up study of traumatized children. *Pediatrics, 59*, 273-279.

Erikson, M. T. (1987). *Behaviour disorders of children and adolescents*. New Jersey: Prentice Hall, Inc.

Eysenck, H. J. (Ed.) (1960). Behavior theory and the neuroses: Readings in modern methods of treatment derived from learning theory. New York: Pergamon.

Feshbach, S. (1970). Aggression. In P. H. Mussen (Ed.), *Carmichel's manual of child psychology*, Vol. 2. New York: John Wiley.

Franchi, C., & Calam, R. (1987). *Child abuse and its consequences observational approaches*. New York: Cambridge University Press.

Friedrich, W. N., & Boriskin, J. A. (1976). The role of the child in abuse: A review of the literature. *American Journal of Orthopsychiatry, 46*, 580-590.

Frodi, A.M. (1981). Contribution of infant characteristics to child abuse. American Journal of Mental Deficiency, 85, 341-349.

Gells, R. J. (1973). Child abuse as psychopathology: A sociological critique and reformulation. *American Journal of Orthopsychiatry, 43*, 611-621.

Gil, D. G. (1968). Incidence of child abuse and demographic characteristics of persons involved. In R. E. Helfer and G. H. Kemfe (Eds.). *The battered child*. Chicago.: University of Chicago Press.

Gil, D. G. (1970). *Viloence against children*. Cambridge: Harvard University Press.

Gil, D. G. (1971a). Vilence against children. *Journal of Marriage and the Family, 33,* 637-647.

Gil, D. G. (1971b). A social perspective on physical child abuse. *Child Welfare, 50,* 389-395.

Gil, D. G. (1985). The United States versus Child Abuse. In L. H. Pelton (Ed.). *The social context of child abuse and neglect.* New York: Human Sciences press, Inc.

Giovannoni, J. M. (1971). Parental mistreatment: Perpetrators and victims. *Journal of Marriage and the Family, 33,* 649-657.

Goode, W. J. (1974). Force and violence in the family. In S. K. Steinmetz & M. A. Straus (Eds.), *Violence in the family.* New York: Dodd. Mead.

Graubard, P. S. (1973). Children with behavioral disabilities. In L. Dunn (Ed.). *Exceptional children in the schools.* New York: Holt, Rinehart & Winston.

Green, A.H., Grain S. R. W; & Sandgrund., (1974). A child abuse: Pathological syndrome of family interaction. American Journal of Psychiatry, 131, 882-886.

Green, A. N., Graines, R. W., & Sandground (1974). A child abuse pathological syndrome of family interaction. *American Journal of Psychology, 131,* 882-886.

Hall, R. V., Lund, D., & Jackson, D. (1968). Effects of teacher attention on study behavior. *Journal of Applied Behavior Analysis, 1*, 1-12.

Hall, C.S., & Lindzey, G. (1978). Theories of personality (3rd ed.). New York: Wiley.

Horowitz (Eds.). *Review of child development research (Vol. 4)*. Chicago: University of Chicago Press.

Jayaratne, S. (1977). Child abusers as parents and children: A review. *Social Work, 58*, 5-9.

Johnson, B., & Morse, H. A. (1968). Injured children and thier parents. *Children, 15*, 147-152.

Kauffman, J. M. (1981). Characteristics of children's behavior disorders (2nd ed.). Columbus, Ohio: Merrill.

Kauffman, J. M. (1985). *Characteristics of children's behaviour disorders*. (3rd ed). London: Charles E. Merrill Publishing Company.

Kempe, C. H; Silverman, F.N; Steele, B.F; Droegemueller, W; & Silver, H.K (1962). The battered child syndrome. *Journal of American Medical Association, 181*, 17-24.

Kempe, R. S., & Kempe, C. H. (1978). *Chld abuse*. London: Fontana Open Books.

Khan, I. S. (1991). *Development of problem checklist for Pakistani adolescence*. Unpublished M. Phil. dissertation, National Institute of Psychology, Islamabad.

Kimball, W. H., & Burgess, R. L. (1977). *A comparison of family interaction in single versus two-parent abusive, neglectful and control families*. Paper presented at the 11th annual meeting of the Association for the Advancement of Behavior Therapy, Atlanta.

Kinard, E. M. (1979). The psychological consequences of abuse for the child. *Journal of Social Issues, 35,* 83-99.

Kinard, E. M. (1980). Emotional developmental in physically abused children. *American Journal of Orthopsychiatry, 50,* 686-696.

Klien, D.F. (1977). Child abuse and neglect. A primer for school personnel. Reston, Va., Council for Exceptional children.

Lahey, B. B., conger, R. D., Atkeson, B. M., & Treiber, F. A. (1984). Parenting behavior and emotional status of physically abusive mother. *Journal of Consulting and Clinical Psychology, 52,* 1062-1071.

Lahey, B.B., Conger, R.D, R.D. Atkeson, B.M., & Treiber, F.A. (1984). Parenting behaviour and emotional status of physically abusive mothers. Journal of consulting & clinical psychology, 52, 1062-1071.

Libert, R. M; Neale, J. M., & Davidson, E. S. (1973). The early window: Effects of television on children and youth. New York: Pergaman.

Mahler, M. (1952). On child psychosis and schizopherinia: autistic and symbolic infantile psychosis. Psychoanalytic Study of the Child, 7, 286-305.

Martin, H. P., & Beezley, P. (1977). Behavioural observations of abused children. *Developmental Medicine and Child Neurology, 19,* 373-387.

Martin, B. (1975). Parent-child relations. In F.D. Horowitz (Ed.), Review of child development research (Vol. 4) chicago: University of Chicago Press.

McCandless, B. R. (1969). Childhood socialization. In D. A. Goslin (Ed.), *Handbook of socialization theory and research.* Skokie, III: Rand McNally.

McCord, W., McCord, I., & Zola, T. K. (1959). Origins of crime. New York: Columbia University Press.

Merril, E. J. (1962). Protecting the battered child denver: Children's division. *American Humane Association, 1902.*

Milton, T., & Million, R. (1974). Abnormal behavior and personality, Philadelphia: Sounders.

Mosk, M. D., & Wolfe, D. A. (1983). Behavioral comparisons of children from abusive and distressed families. *Journal of Consulting and Clinical Psychology, 51,* 702-708.

Mussen, H. P. (1964). *The psychological development of the child.* New Jersey: Englewood Cliffs., Prentice Hall Inc.

Nathan, P. E., & Harris, S. L. (1980). Psychopathology and Society (2nd ed.). New York: McGraw-Hill.

National centre on child abuse and neglect (1978). Interdisciplinary glossary on child abuse and neglect. Washington. D.C: U.S. Department of Health Education and Welfare.

Oliver, J. E., & Taylor, A. (1971). Five generations of ill-treated children in one family pedigree. *British Journal of Psychiatry, 119,* 473-480.

Oltmanns, T. T., Broderick, J. E., & O'Leary, K. D. (1977). Marital adjustment and the efficacy of behavior therapy with children. *Journal of Consulting and Clinical Psychology, 45,* 724-729.

Pavlov, I. P. (1927). Conditioned reflexes: An investigation of the physiological activity of the cerebral cortex. London: Oxford University Press.

Pervez, S. (1984). *Personality dynamics of Pakistani children.* Islamabad: NIP.: Quaid-i-Azam University.

Qureshi, F. (1966). Attitude of children towards their behavior problems. Unpublished M. Sc dissertation. Institute of Education and Research, Punjab University, Lahore.

Reid, J.B., Taplin, P.S., & Lober, R. (1981). A social interactional approach to the treatment of abusive families. In R.B. Stuart (Ed.), Violent behaviour: Social learning approaches to prediction, management, and treatment (pp. 83-101). New York: Brunner/Mazel.

Rezmierski, V., & Kotre, J. (1974). A limited review of theory of the psychodynamic model. In W. C. Rhodes & M. L. Tracy (Eds.). *A study of child variance* (Vol. 1). Ann Arbor, MI: the University of Michigan Press.

Rhodes, W. C. (1967). The disturbed child: A problem of ecological management. Exceptional Children, 33, 449-445.

Rhodes, W. C. (1970a). A community participation analysis of emotional disturbance. *Exceptional Children*, 36, 309-314.

Ross, D. F. (1974). A review of learning and behavior theory as it relates to emotional disturbance in children. In W. Rhodes & M. L. Tracy (Eds.), *A study of child variance* (Vol. 1). Ann Arbor, MI: the University of Michigan Press.

Scheff, T. J. (1966). Being mentally ill. A sociological theory. Chicago: Aldine.

Shah, A. A. (1991). Intrafamilial relationship and academic self-concept of normal and
    maltreated children. Paper presented at Seven Asian Conference on Child Abuse and
    Neglect. Lahore.

Shah, A. A. (1988). *Emotional, social, and behavioral problems of school going children.*
    Paper written for National Institute of Special Education, Islamabad.

Silver, L. B., Dublin, C. C., & Lourie, R. S. (1969). Does vilence breed violence?
    Contributions from a study of the child abuse syndrome. *American Journal of
    Psychiatry, 126,* 404-407.

Skinner, B. F. (1953). Science and human behavior. New York: Macmillan.

Soeffing, M. (1975). Abused children are exceptional children. *Exceptional children,* 42,
    126-133.

Sweet, J. J., & Resick, P. A. (1979). The maltreatment of children. A review of theories
    and research. *Journal of Social Issues, 35(2),* 39-59.

Tariq, P. N. (1985). *Bachoon key Nafsiati Masayal.* Islamabad: NIP Quaid-i-Azam
    University.

Terr, L. C. (1970). A family study of child abuse. *American Journal of Psychiatry, 127,*
    665-671.

Thomas, A, chess, S., & Birch, H.G. (1968). Temperament and behavior disorders in children. New York: New York University Press.

Walker, H. M., & Buckley, N. K. (1973). Teacher classroom behavior: An individual case study focus on exceptional children.

Wielkiewicz, R. M. (1986). *Behaviour management in the schools principles and procedures*. New York: Pergaman Press.

Wolfe, D. A. (1985). Child-abusive parents: An empirical review and analysis. *Psychological Bulletin, 97(3)* 462-482.

Wolfe, J. (1958). Psychotherapy by reciprocal inhibition. Stanford, Calif: Stanford University Press.

Woody, R. H. (1969). Behavioral problem children in the schools. New York: Appleton-Century Crofts.

Zalba, S. R. (1967). The abused child: A typology for claxsification and treatment. *Social Work, 12,* 70-79.

APPENDIX PRE-TESTING

ہم قومی ادارہ نفسیات، قائداعظم یونیورسٹی کی جانب سے بچّوں کے
مسائل پر ایک تحقیق کر رہے ہیں۔ آپ کے تعاون سے ہم ان کرداری مسائل
Behaviour Problems کو جاننا چاہتے ہیں جو خاص طور پر دس سے بارہ سال
کے بچّوں کو درپیش ہوتے ہیں اور جن کا اظہار وہ اپنے روزمرہ کے رویّوں میں
کرتے ہیں۔ یہ مسائل سماجی، شخصی، نفسیاتی اور تعلیمی مختلف قسموں کے ہوسکتے ہیں۔
اس لئے ہم نے ان مسائل کی درجہ بندی کر دی ہے۔ آپ سے گزارش ہے کہ ہر
مسئلے کو غور سے پڑھیں اور دس سے بارہ سال کے بچّوں کے کردار کو ذہن میں رکھتے
ہوئے ان سے متعلقہ جتنے مسائل آپ کے مشاہدے میں ہیں، وہ بیان کریں۔

شکریہ!

ہم قومی ادارہ نفسیات ، قائداعظم یونیورسٹی کی جانب سے بچوں کے
مسائل پر ایک تحقیق کر رہے ہیں۔ آپ کے تعاون سے ہم ان مسائل کو جاننا
چاہتے ہیں جن سے آپ عام طور پر دوچار رہتے ہیں۔ ہم نے آپ کی آسانی کے لئے
ان مسائل کی درجہ بندی کر دی ہے۔ آپ سے گزارش ہے کہ ہر مسئلے کو غور سے
پڑھیں اور ان سے متعلقہ جو بھی مسائل آپ کو درپیش ہوتے ہیں، وہ بیان کریں۔

شکریہ!

دوستوں سے میل جول کے مسائل:

تفریح اور کھیل کود سے متعلق مسائل:

دوسرے لوگوں اور رشتہ داروں سے متعلق مسائل:

ماں باپ اور بہن بھائیوں سے متعلق مسائل:

اپنی ذات سے متعلق نفسیاتی مسائل:

دوسروں سے ملنا جلنا اور تفریحی مسائل:

دوسرے لوگوں سے تعلق رکھنے والے نفسیاتی مسائل:

گھریلو اور خاندانی مسائل:

اخلاقی اور مذہبی معاملات سے متعلق مسائل:

سکول اور پڑھائی سے متعلق مسائل:

ہدایات

ہم قومی ادارہ نفسیات، قائداعظم یونیورسٹی کی جانب سے ایک تحقیق کر رہے ہیں، جس میں ہم دس سے بارہ سال کے بچوں کے کرداری مسائل جاننا چاہتے ہیں۔ ان مسائل کو ہم نے بیانات کی شکل دی ہے۔ آپ سے ہم یہ پوچھنا چاہتے ہیں کہ آپ کے خیال میں ان میں سے کون سے بیانات بچوں کے کرداری مسائل کی نشاندہی کرتے ہیں۔ اس مقصد کے لئے آپ کو ایک پیمانہ دیا جا رہا ہے۔ اگر آپ کے خیال میں کوئی ایک بیان بچوں کے کرداری مسائل کی نشاندہی کرتا ہے تو آپ بتائیں کہ وہ کس حد تک صحیح ہے؟

کسی حد تک صحیح   کافی حد تک صحیح   بالکل صحیح

اور اگر کوئی بیان بچوں کے کرداری مسائل کی نشاندہی نہیں کرتا تو بتائیں کہ وہ کس حد تک غلط ہے؟

کسی حد تک غلط   کافی حد تک غلط   بالکل غلط

اور اگر آپ فیصلہ نہیں کر سکتے کہ یہ بیان صحیح ہے یا غلط تو پھر معلوم نہیں پر نشان لگا دیں۔

براہ مہربانی ہر بیان کو غور سے پڑھیں اور کسی ایک جواب پر نشان لگائیں۔

شکریہ!

۱۵- میں بات کو بڑھا چڑھا کر پیش کرتا/کرتی ہوں۔

کسی حد تک غلط	کافی حد تک غلط	بالکل غلط	معلوم نہیں	بالکل صحیح	کافی حد تک صحیح	کسی حد تک صحیح

۱۶- میں ہر وقت سوچتا رہتا/سوچتی رہتی ہوں۔

کسی حد تک غلط	کافی حد تک غلط	بالکل غلط	معلوم نہیں	بالکل صحیح	کافی حد تک صحیح	کسی حد تک صحیح

۱۷- میں خود کو بے کار سمجھتا/سمجھتی ہوں۔

کسی حد تک غلط	کافی حد تک غلط	بالکل غلط	معلوم نہیں	بالکل صحیح	کافی حد تک صحیح	کسی حد تک صحیح

۱۸- میں ہر وقت اداس رہتا رہتی ہوں۔

کسی حد تک غلط	کافی حد تک غلط	بالکل غلط	معلوم نہیں	بالکل صحیح	کافی حد تک صحیح	کسی حد تک صحیح

۱۹- میں مغرور ہوں۔

کسی حد تک غلط	کافی حد تک غلط	بالکل غلط	معلوم نہیں	بالکل صحیح	کافی حد تک صحیح	کسی حد تک صحیح

۲۰- میں خود غرض ہوں۔

کسی حد تک غلط	کافی حد تک غلط	بالکل غلط	معلوم نہیں	بالکل صحیح	کافی حد تک صحیح	کسی حد تک صحیح

۲۱- میں کوئی فیصلہ نہیں کر سکتا/نہیں کر سکتی ہوں۔

کسی حد تک غلط	کافی حد تک غلط	بالکل غلط	معلوم نہیں	بالکل صحیح	کافی حد تک صحیح	کسی حد تک صحیح

۲۲- میں جلد مایوس ہو جاتا/ہو جاتی ہوں۔

کسی حد تک غلط	کافی حد تک غلط	بالکل غلط	معلوم نہیں	بالکل صحیح	کافی حد تک صحیح	کسی حد تک صحیح

۲۳- میں ہر بات کو منفی انداز میں سوچتا/سوچتی ہوں۔

کسی حد تک غلط	کافی حد تک غلط	بالکل غلط	معلوم نہیں	بالکل صحیح	کافی حد تک صحیح	کسی حد تک صحیح

۲۴- میں جذباتی ہوں۔

کسی حد تک غلط	کافی حد تک غلط	بالکل غلط	معلوم نہیں	بالکل صحیح	کافی حد تک صحیح	کسی حد تک صحیح

۲۵- میں باتونی ہوں۔

کسی حد تک غلط	کافی حد تک غلط	بالکل غلط	معلوم نہیں	بالکل صحیح	کافی حد تک صحیح	کسی حد تک صحیح

۲۶- میں کوئی کام بھی دوسروں کی مدد کے بغیر نہیں کر سکتا/کر سکتی۔

کسی حد تک غلط	کافی حد تک غلط	بالکل غلط	معلوم نہیں	بالکل صحیح	کافی حد تک صحیح	کسی حد تک صحیح

۲۷- میں کوئی کام زیادہ دیر تک نہیں کر سکتا/کر سکتی۔

کسی حد تک غلط	کافی حد تک غلط	بالکل غلط	معلوم نہیں	بالکل صحیح	کافی حد تک صحیح	کسی حد تک صحیح

۲۸- میں ضدی ہوں۔

کسی حد تک غلط	کافی حد تک غلط	بالکل غلط	معلوم نہیں	بالکل صحیح	کافی حد تک صحیح	کسی حد تک صحیح

Table: Pre-test responses on behavioural problems.

SNO	PARENTS (N=20)		TEACHERS (N=10)		CHILDREN (N=30)	
	yes (%)	no (%)	yes (%)	no (%)	yes (%)	no (%)
1	100.00	.00	60.00	40.00	83.33	16.67
2	90.00	10.00	70.00	30.00	63.33	36.67
3	60.00	40.00	80.00	20.00	60.00	40.00
4	50.00	50.00	50.00	50.00	33.33	60.00
5	75.00	25.00	60.00	40.00	80.00	13.33
6	75.00	25.00	80.00	20.00	63.33	33.33
7	45.00	55.00	60.00	40.00	60.00	36.67
8	60.00	40.00	80.00	20.00	30.00	56.67
9	65.00	35.00	70.00	30.00	56.67	33.33
10	45.00	55.00	40.00	60.00	26.67	73.33
11	35.00	65.00	50.00	40.00	33.33	63.33
12	60.00	40.00	60.00	40.00	66.67	33.33
13	100.00	.00	70.00	30.00	66.67	30.00
14	60.00	40.00	70.00	30.00	33.33	60.00
15	50.00	50.00	60.00	40.00	63.33	36.67
16	40.00	60.00	50.00	50.00	30.00	60.00
17	25.00	75.00	30.00	70.00	16.67	83.33
18	55.00	45.00	40.00	60.00	26.67	63.33
19	40.00	60.00	40.00	60.00	30.00	70.00
20	45.00	55.00	50.00	50.00	33.33	63.33
21	70.00	30.00	60.00	40.00	70.00	30.00
22	80.00	20.00	70.00	30.00	63.33	33.33
23	55.00	45.00	50.00	50.00	33.33	60.00
24	90.00	10.00	60.00	40.00	73.33	26.67
25	45.00	55.00	60.00	40.00	60.00	40.00

26	60.00	40.00	70.00	30.00	63.33	36.67
27	85.00	15.00	60.00	40.00	70.00	30.00
28	80.00	20.00	60.00	40.00	76.67	23.33
29	75.00	25.00	60.00	40.00	63.33	33.33
30	60.00	25.00	50.00	50.00	66.67	33.33
31	60.00	40.00	50.00	50.00	80.00	20.00
32	75.00	25.00	60.00	40.00	56.67	43.33
33	50.00	50.00	40.00	60.00	50.00	50.00
34	45.00	55.00	30.00	70.00	46.67	53.33
35	55.00	45.00	40.00	60.00	20.00	80.00
36	20.00	80.00	40.00	60.00	23.33	76.67
37	70.00	30.00	60.00	40.00	76.67	23.33
38	25.00	60.00	30.00	70.00	10.00	90.00
39	80.00	20.00	20.00	20.00	56.67	43.33
40	25.00	75.00	10.00	30.00	50.00	50.00
41	35.00	45.00	30.00	40.00	46.67	53.33
42	45.00	60.00	20.00	40.00	43.33	56.67
43	70.00	30.00	30.00	60.00	73.33	26.67
44	.00	100.00	30.00	70.00	30.00	70.00
45	65.00	35.00	50.00	50.00	60.00	40.00
46	65.00	35.00	50.00	50.00	63.33	36.67
47	60.00	40.00	60.00	40.00	83.33	16.67
48	70.00	30.00	60.00	40.00	63.33	36.67
49	90.00	10.00	60.00	40.00	70.00	30.00
50	85.00	15.00	70.00	30.00	60.00	40.00
51	25.00	75.00	50.00	50.00	6.67	93.33
52	80.00	20.00	50.00	50.00	53.33	46.67
53	60.00	40.00	50.00	50.00	13.33	63.33
54	50.00	50.00	40.00	30.00	40.00	60.00
55	35.00	65.00	50.00	50.00	26.67	73.33
56	55.00	45.00	60.00	40.00	60.00	40.00
57	70.00	30.00	70.00	30.00	63.33	36.67
58	55.00	45.00	40.00	60.00	40.00	60.00
59	45.00	55.00	40.00	60.00	16.67	83.33

60	35.00	65.00	50.00	50.00	33.33	66.67
61	50.00	50.00	80.00	20.00	63.33	36.67
62	60.00	40.00	60.00	40.00	26.67	73.33
63	60.00	25.00	40.00	60.00	20.00	80.00
64	45.00	55.00	50.00	50.00	33.33	66.67
65	60.00	40.00	50.00	50.00	60.00	40.00
66	25.00	75.00	70.00	30.00	30.00	70.00
67	40.00	60.00	40.00	60.00	30.00	70.00
68	35.00	60.00	60.00	40.00	33.33	66.67
69	45.00	40.00	50.00	50.00	26.67	73.33
70	55.00	45.00	60.00	40.00	23.33	76.67
71	30.00	65.00	50.00	50.00	30.00	70.00
72	45.00	45.00	70.00	30.00	63.33	36.67
73	25.00	30.00	60.00	40.00	26.67	73.33
74	20.00	80.00	70.00	30.00	30.00	70.00
75	35.00	40.00	40.00	60.00	33.33	66.67
76	60.00	40.00	60.00	40.00	60.00	40.00
77	25.00	75.00	60.00	40.00	33.33	63.33
78	90.00	10.00	40.00	60.00	23.33	70.00
79	55.00	45.00	40.00	50.00	76.67	23.33
80	45.00	50.00	30.00	50.00	26.67	73.33

APPENDIX MAIN STUDY

Questionnaire to Identify Abused

ہدایات

ہم قومی ادارہ نفسیات، قائداعظم یونیورسٹی (ادارہ امتیاز) کی طرف سے ایک تحقیق کر رہے ہیں، جس میں ہم بچوں کے ساتھ والدین کے سلوک کے بارے میں جاننا چاہتے ہیں کہ والدین کا بچوں کے ساتھ رویّہ کس قسم کا ہے؟ اس سلسلے میں ہم نے چند سوالات ترتیب دیئے ہیں، ہر سوال کے پانچ ممکنہ جوابات ہیں یعنی

کبھی نہیں   کبھی کبھی   معلوم نہیں اکثر   ہمیشہ

آپ سے گزارش ہے کہ ہر سوال کو غور سے پڑھیں اور جو جواب دینا چاہیں، اس پر نشان لگائیں۔ ہم آپ کو اس بات کا مکمل یقین دلاتے ہیں کہ آپ کے جوابات کو مکمل طور پر محفی رکھا جائے گا۔ اس لئے جوابات ٹھیک طور پر بلا خوف و خطر دیں۔ آپ کے اس تعاون پر ہم آپ کے ازحد شکر گذار ہوں گے۔ شکریہ!

Child Behaviour Problems Questionnaire

APPENDIX F

Demographic Questionnaire

نام:_____

عُمر:_____

جنس:_____

جماعت:_____

سکول:_____

پیشہ:_____ والد کی تعلیم:_____

پیشہ:_____ والدہ کی تعلیم:_____

والدین کی ماہانہ آمدنی:_____

بہن بھائیوں کی تعداد:_____

بہن بھائیوں میں آپ کا نمبر:_____

Table: Scores and means of abused and non-abused children on the questionnaire to identify abused children.

| S.NO | ABUSED | | NON-ABUSED | |
	Scores	Means	Scores	Means
1	85.00	4.25	29.00	1.45
2	80.00	4.00	33.00	1.65
3	80.00	4.00	31.00	1.55
4	80.00	4.00	28.00	1.40
5	76.00	3.80	26.00	1.30
6	79.00	3.95	28.00	1.40
7	86.00	4.30	33.00	1.65
8	87.00	4.35	25.00	1.25
9	80.00	4.00	28.00	1.40
10	81.00	4.05	30.00	1.50
11	82.00	4.10	28.00	1.40
12	86.00	4.30	28.00	1.40
13	77.00	3.85	27.00	1.35
14	88.00	4.40	31.00	1.55
15	83.00	4.15	36.00	1.80
16	85.00	4.25	29.00	1.45
17	83.00	4.15	32.00	1.60
18	85.00	4.25	32.00	1.60
19	81.00	4.05	35.00	1.75
20	85.00	4.25	30.00	1.50
21	83.00	4.15	35.00	1.75
22	78.00	3.90	32.00	1.60
23	80.00	4.00	37.00	1.85
24	77.00	3.85	35.00	1.75

25	85.00	4.25	26.00	1.30
26	87.00	4.35	30.00	1.50
27	88.00	4.40	37.00	1.85
28	85.00	4.25	32.00	1.60
29	77.00	3.85	27.00	1.35
30	78.00	3.90	31.00	1.55
31	76.00	3.80	35.00	1.75
32	80.00	4.00	33.00	1.65
33	75.00	3.75	27.00	1.35
34	76.00	3.80	28.00	1.40

Table: Scores and means of abused and non-abused children on child behaviour problems questionnaire.

| S.NO | ABUSED | | NON-ABUSED | |
	Scores	Means	Scores	Means
1	176.00	4.76	126.00	3.41
2	178.00	4.81	121.00	3.27
3	184.00	4.97	111.00	3.00
4	184.00	4.97	117.00	3.16
5	183.00	4.95	84.00	2.27
6	184.00	4.97	111.00	3.00
7	183.00	4.95	116.00	3.14
8	179.00	4.84	118.00	3.19
9	180.00	4.86	118.00	3.19
10	169.00	4.57	107.00	2.89
11	190.00	5.14	109.00	2.95
12	189.00	5.11	122.00	3.30
13	174.00	4.70	126.00	3.41
14	166.00	4.49	126.00	3.41
15	174.00	4.70	94.00	2.54
16	179.00	4.84	138.00	3.73
17	187.00	5.05	136.00	3.68
18	190.00	5.14	135.00	3.65
19	171.00	4.62	135.00	3.65
20	185.00	5.00	126.00	3.41
21	207.00	5.59	144.00	3.89
22	188.00	5.08	118.00	3.19
23	208.00	5.62	107.00	2.89
24	191.00	5.16	99.00	2.68
25	209.00	5.65	113.00	3.05

26	194.00	5.04	101.00	2.73
27	194.00	5.24	138.00	3.73
28	200.00	5.41	125.00	3.38
29	208.00	5.62	131.00	3.54
30	205.00	5.54	139.00	3.76
31	185.00	5.00	147.00	3.97
32	193.00	5.22	139.00	3.76
33	191.00	5.16	130.00	3.51
34	194.00	5.24	122.00	3.30