CHAPTER – II

REVIEW OF RELATED LITERATURE
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2.1. INTRODUCTION

A literature review is a written summary of journal articles, books, and other documents, which describes the past and current state of information, on the topic of the research study. It also organizes the literature into subtopics and documents the need for a proposed study. In the most rigorous form of research, educators base this review mainly on research, reported in journal articles. A good review, however, might also contain other information, drawn from conference papers, books and government documents.

The review of related literature makes the researcher familiar with the results of previous researches, conducted in the similar research area. It enables the researcher to know what is known and unknown so far. It helps in conceptualizing the problem, conducting the study and interpreting the findings. It provides the background for the development of the present study and brings the student nearer to the proximity of the solution. An investigator, who knows prior research and theory, avoids duplicating a study already done. This Chapter, presents the review of the research conducted, on various dimensions of child abuse in India and abroad.

By reviewing the existing literature, the researcher has noted and cited articles from both quantitative and qualitative studies. Regardless of the sources of information, the researcher had conducted a literature review as the first step in the research process.
The following are the reasons for reviewing literature

a) The researcher may base this need on learning new ideas, sharing the latest findings with others, or identifying practices that might improve learning.

b) The researcher conducts a literature review to document how the study adds to the existing literature. A study will not add to the literature if it duplicates research already available.

c) Reading the literature also helps the researcher to learn how other researchers conducted their research studies and helps him/her to find useful examples and models in the literature for his/her own research.

d) Conducting a literature review also builds the research skills of using the library and it is an useful experience to the researcher.

e) By conducting a literature search, using computer databases, the researcher develops skills in locating needed materials in a timely manner.

2.2. RESEARCH CONDUCTED IN FOREIGN COUNTRIES

2.2.1 Gender Discrimination

Finkelhor, D. (1984) (Ed), in his research study, explained that in most countries, girls are at higher risk than boys for infanticide, sexual abuse, educational and nutritional neglect and forced prostitution. Findings from several international studies showed that the rate of sexual abuse was 1.5 to 3 times higher among girls than boys.

According to a UNICEF (2000), report, globally, more than 130 million children, between the ages of 6 and 11 years, are not in school and 60% of whom are girls.
Straus MA (1998), Shumba A (2001), Hunter WM et al. (2000), Hadi (2000) et al of National Research Council affirm that in some countries, girls are either not allowed to receive schooling or are kept at home to look after their siblings or to assist the family economically by working. Male children appear to be at greater risk of harsh physical punishment in many countries. Although girls are at increased risk for infanticide in many places, it is not clear why boys are subjected to harsher physical punishment. It may be that such punishment is seen as a preparation for adult roles and responsibilities or else that boys are considered to need more physical discipline. Clearly, the wide cultural gaps that exist between different societies, with respect to the role of women and the values attached to male and female children could account for many of these differences.

2.2.2 Physical Abuse

Ketsela T and Kedebe D (1997), dealing with parental punishment, maintain that in Ethiopia, 21% of urban school children and 64% of rural school children reported bruises or swellings on their bodies, resulting from parental punishment.

Kim DH et al, (2000), compared the rates of violence against primary school-aged children in China and the Republic of Korea, by using the Conflict Tactics Scales. But the questions were directed at the children rather than their parents.

Katherine E. Cox (2000), examines development issues, that are raised in a legal analysis of international human rights law, relating to child labour. In doing so, she highlighted some of the weaknesses of the present legal approach to the problem. In order to demonstrate the weaknesses of the system, India is used as an example of a developing country where some of the development issues raised in the legal analysis, arise. The Second Part of Cox’s paper defines the concept of child labour. It
undertakes a comprehensive analysis of international legal instruments that deal with the topic of child labour and touches on the relationship between child labour and the right to education. The Third Part examines some of the development issues that arise out of that legal analysis and critiques the current legal approach. In particular, it focuses on the causes of child labour that cannot be directly attributed to poor economic development and thus warrants a different approach. The final part of the paper uses India as an example of a country, which despite progressive legislation and policy as well as improved economic development, has not been able to make significant inroads into eradicating the practice of child labour.

Hahm & Guterman, (2001), deal with parental physical abuse towards their children. It reveals, in a recent study in the Republic of Korea, that parents were questioned about their behaviour towards their children. Two thirds of the parents reported whipping their children and 45% confirmed that they had hit, kicked or beaten them.

J. Goldman, M. K. Salus, D. Wolcott, and K. Y. Kennedy. (2003), have described that physical abuse is characterized by physical injury, such as bruises and fractures that result from punching, beating, kicking, biting, shaking, throwing, stabbing, choking, hitting with a hand, stick, strap, or other object and burning. Although an injury, resulting from physical abuse, is not accidental, the parent or caregiver may not have intended to hurt the child. The injury may have resulted from severe discipline, including injurious spanking or physical punishment that is inappropriate to the child's age or condition. The injury may be the result of a single episode or repeated episodes and can range in severity from minor marks and bruising to death.
Bardi M, Borgognini-Tari SM, (2001), examined parental physical abuse towards children. According to them the parental self-reports from other countries confirm that harsh physical punishment of children, by their parents, exists in significant amounts, wherever it has been examined. In Italy, based on the Conflict Tactics Scales, the incidence of severe violence was 8%.

Tang CS (2003), indicated an annual rate of severe violence against children, as reported by the parents, of 461 per 1000 in China. In China, the rate of severe violence reported by the children was 22.6% while in the Republic of Korea, it was 51.3% (Hong Kong SAR).

Data from the World SAFE study were also illuminating about the patterns of more "moderate" forms of physical discipline in different countries. Moderate discipline is not universally agreed to be abusive though some professionals and parents regard such forms of discipline also as unacceptable. In this area, the World SAFE study suggested a wider divergence among societies and cultures. Spanking children on the buttocks was the most common disciplinary measure reported in each country, with the exception of Egypt, where other measures such as shaking children, pinching them, or slapping them on the face or head were more frequently used as punishment. Parents in rural areas of India, reported slapping their children on the face or head about as often as slapping them on the buttocks while in the other countries, slapping children on the face or head occurred less often.

Severe and more moderate forms of discipline are not limited to the family or home environment. A substantial amount of harsh punishment occurs in schools and other institutions, at the hands of teachers and others, responsible for the care of children.
Lindell and Svedin (2001), investigated the suspected cases of child physical abuse that were investigated by Social Services, in Sweden. According to them, only 26% of all cases led to protection of the child in the form of foster care. No action was taken on another 25%, and the rest received services from the Child and Family Agency, such as provision of a contact person, contact family, home counseling, or referral to Child and Adolescent Psychiatric Services.

2.2.3 Verbal Abuse / Psychological Abuse / Neglect

Thurman & Widerstrom, (1990), investigated emotional abuse. The theories of attachment process, provide information about the role of early relationships in shaping the development of the child’s personality and social-emotional adjustment.

Zeanah, (1993), examined the emotional abuse and its impact on children. The experiences of abuse and neglect can impede the attachment process and decrease the youngsters’ feelings of security and trust in their caregivers. Because of the maltreatment, children feel unworthy, unloved, and view the world as a dangerous, unhappy place. When their caregivers are neglectful, uncaring, and abusive, the children become more vulnerable to the stressors of life and will have difficulties in forming close and positive relationships with others. The unmet needs of the child victims may result in anger and resentment of their caregivers and these responses may then transfer to other relationships in their lives.

James (1994), dealt with the abuse and its psychological effects on children. His study revealed that maltreated children often display problems in their regulation of affect and emotions. They frequently have intrusive and upsetting emotional memories of their maltreatment, which they attempt to control by generating and avoiding displays of their feelings. Sometimes, the only way they can identify their
emotions is through physiological responses such as increased heart rates and perspiration. The children appear to be able to describe other people’s feelings but cannot describe their own feelings.

**Hanson et al (1995)**, revealed that attachment is viewed as the bonds that young children form with their primary caregivers, usually their parents.

**Jaudes et al (1995)**, showed that substance abuse is also a predictive of later maltreatment. Rates of substantiated maltreatment (mostly neglect) were two to three times higher in infants who have been exposed prenatally to illicit drugs.

**Moroz (1996)**, asserted that under typical circumstances, the caregiver and the young children form close emotional bonds and secure relationships. Attachments can be observed by the following behaviors of babies and their parents: (1) the youngsters demonstrate strong preferences for their primary caregivers and derive enjoyment and comfort from that closeness with them; (2) the parents demonstrate their attachments in their desire to comfort, protect, love, and enjoy their babies while demonstrating uneasiness and sadness when separated. Because the attachment process promotes feelings of security, trust, and self-esteem, it also fosters the infants’ desire to explore and learn from their environments. Secure attachments help children in all areas of development and they are also essential in establishing their feelings of self-esteem and worth.

**Smith et al (1995); & Zuravin et al (1997)**, affirmed that there were higher substantiations of neglect where mothers have been subjected to domestic violence.

**Barnett (1997)**, revealed that the attachment process is significant because it affects the child’s ability to cope with stress, regulate emotions, benefit from social
supports, and form nurturing relationships. All these abilities become questionable for maltreated youngsters because their attachment processes are disrupted.

**Lopez SC et al (2000)**, deal with parenting punishment. The research report reveals that elsewhere, in Costa Rica, for instance, parents acknowledged using physical punishment to discipline children, but reported it as their least preferred method.

**Trocmé et al (2001)**, analysed neglect and emotional abuse of children. In the Canadian Incidence Study, nearly one quarter (23 per cent) of mothers of neglected children experienced spousal violence.

**Beldzeman et al (2001)**, examined domestic violence and its impact on child. Domestic violence adds to the risk of neglect over and above the risk of other maltreatment.

**Hartley (2002)**, revealed that the more severe the domestic violence, the more likely the child is to suffer from supervisory neglect.

**Coohey, (1998); Sullivan, (2000); Trocmé et al., (2001); City & Hackney Area Child Protection Committee, (2002); Dunn., (2002); Coohey, (2008), et al** mentioned the association between alcoholism and child abuse. They revealed that the substance abuse in parents is a commonly mentioned risk factor for neglect while drugs and alcohol are implicated in 41 per cent of supervisory neglect and close to half of cases of general neglect.

**Ondersma (2002)**, states that in a case-control design of 203 neglectful mothers, substance abuse emerged as the strongest predictor of neglect status among low Socio-Economic Status (SES) women, ahead of depression, lack of social support.
and negative life events. Substance abuse was also the strongest predictor of parental disposition and adequacy of the home environment.

Cash et al., (2003), maintained that it was not just the impaired care when under the influence of drugs or alcohol, but the time using it, the time involved in looking for it and the money spent on it, which contribute to neglect in multiple ways.

In the Quebec Incidence Study (QIS, 2002), on cases of Reported Child Abuse, Neglect and Abandonment and Serious Behavioural Problems, it was found that parental drug or alcohol use was the second most important factor (after the young age of neglected children) in differentiating neglected children from other children reported to the welfare authorities.

Mayer, et al., (2004), dealt substance abuse and associated problems. It revealed that in neglecting families, substance abuse often co-occurred with other risk factors

- substance abuse and domestic violence in 41.7 per cent of families
- substance abuse and criminal activity in 32.2 per cent of families
- substance abuse and mental health problems in 31.3 per cent of families.

According to Cash et al., (2003), in United States and Canada where cocaine is a major problem, as an estimated 50 percent of users neglected their children.

The World SAFE study (2000), reveals that there is evidence to suggest that shouting at children is a common response by parents across many countries. Cursing children and calling them names, appear to vary more greatly. In the five countries of the World SAFE study, the lowest incidence rate of calling children names in the previous six months was 15%. The practice of threatening children with abandonment
or with being locked out of the house, however, varied widely among the countries. In the Philippines, for example, threats of abandonment were frequently reported by mothers as a disciplinary measure. In Chile, the rate of using such threats was much lower, at about 8%.

**Gonener, H.D (2010),** in his study, found that neglect and abuse are the major issues encountered in all societies and they affect development of both healthy and disabled children negatively and may even cause death. While abuse may be physical, emotional and sexual, neglect may be emotional and physical. In disabled children especially mentally handicapped children's encounter risk with abuse and neglect. Nurses have important responsibilities for neglected and abused, mentally handicapped children, in their approach.

**Lang, A.J. et al., (2010),** in their study, analyzed the impact of maternal history of maltreatment and psychopathology on mother-child relationship, parenting, and infant temperament. Women completed self-report measures addressing childhood trauma, psychopathology, infant-parent relationship, parenting, and infant temperament. Maternal physical abuse was associated with poorer mother-child interactions, increased vigilance, and difficulty recovering from distress among infant, whereas a history of emotional abuse was linked with less interactional dysfunction, lower levels of infant frustration, and more pleasure. Maternal depression was associated with infant temperament and attitudes about parenting. These findings suggest that maternal history of childhood abuse and psychopathology are important determinants of parenting and infant temperament.

**Wuest, J et al.,(2010),** in their study, extended a previous grounded theory study of women's caring through interviews with 16 women, currently giving care to
parents who had abused them as children, to more fully understand daughters' obligation to care in the context of past abuse. Past relationship was characterized by emotional distance, "never being good enough," degradation, control and unpredictability. Obligation to care was grounded not only in duty to others but also in duty to self. Caregiving was seen as an opportunity for validation and reconciliation. These findings advance knowledge by illuminating how survivors of child maltreatment become caregivers for their abusers.

Lukasse, M. et al., (2010), found that childhood abuse affects adult health. The objective of this study was to examine the association between a self-reported history of childhood abuse and fear of childbirth. A population-based, cross-sectional study was conducted of 2,365 pregnant women at five obstetrical departments in Norway. We measured childhood abuse using the Norvold Abuse Questionnaire and fear of childbirth using the Wilma Delivery Expectancy Questionnaire. Severe fear of childbirth was defined as a Wilma Delivery Expectancy Questionnaire score of ≥85. Of all women, 566 (23.9%) had experienced any childhood abuse, 257 (10.9%) had experienced emotional abuse, 260 (11%) physical abuse, and 290 (12.3%) sexual abuse. Women with a history of childhood abuse, reported severe fear of childbirth significantly more often than those without a history of childhood abuse, 18 percent versus 10 percent (p=--0.001). The association between a history of childhood abuse and severe fear of childbirth remained significant after adjustment for confounding factors for primiparas (adjusted OR: 2.00; 95% CI: 1.30-3.08) but lost its significance for multiparas (adjusted OR: 1.17; 95% CI: 0.76-1.80). The factor with the strongest association with severe fear of childbirth among multiparas was a negative birth experience (adjusted OR: 5.50; 95% CI: 3.77-8.01). A history of childhood abuse significantly increased the risk of experiencing severe fear of
childbirth among primiparas. Fear of childbirth among multiparas was most strongly associated with a negative birth experience.

**Messman-Moore, T.L., et al., (2010),** examined among 752 college women, emotion dysregulation as a mechanism underlying risky sexual behavior and sexual revictimization among adult victims of Child Sexual Abuse (CSA) and Child Physical Abuse (CPA). Victimization history, emotion dysregulation, and risky sexual behavior were assessed with anonymous, self-report surveys, utilizing a cross-sectional design. 17.8% had reported rape during adolescence or adulthood. CSA and CPA were associated with increased risk for adolescent/adult rape, 29.8% of CSA victims and 24.3% of CPA victims were revictimized.

Path analytic models tested hypothesized relationships among child abuse, emotion dysregulation, adolescent/adult rape and three forms of risky sexual behavior (e.g., failure to use condoms, contraception, or having sex with someone under the influence of alcohol/drugs), including frequency of risky sexual behavior with a regular dating partner, with a stranger, and lifetime number of intercourse partners.

The emotion dysregulation also maintained a significant direct path to revictimization and risky sexual behavior appears to be one of several proximal risk factors for revictimization. The findings of the study also confirmed that emotion dysregulation is a critical pathway to more proximal risk factors such as risky sexual behavior and suggested that clinical interventions, aimed at improving emotion dysregulation, may help reduce risky sexual behavior and risk for revictimization.
2.2.4 Sexual Abuse

According to Shaver (1970), people are motivated to defend themselves against the possibility of observed negative events such as sexual assault, from happening to them (Harm Avoidance). People have a desire to protect their own self-esteem and motivated to avoid being seen as responsible for it (Blame Avoidance). Key to these motivations is the extent to which observers perceive a victim’s character and/or circumstances as being similar (relevant) to their own. A victim, deemed to have dissimilar characteristics (e.g., is more risk-taking, more careless) is likely to defensively attribute blame to their own assault because observers believe that given the same setting, they (observers) would have acted differently and eluded all opportunities for being attacked (e.g. by not walking alone at night).

A number of studies have investigated Shaver’s (1970), Defensive Attribution Hypothesis, in relation to attributions of blame in adult rape scenarios. Fulero et al., (1976), for instance, found that female students but not male college students, attributed less blame to a female rape victim of similar student status than they did to a female of differing, housewife status.

Summit’s (1983), Model of the Child Sexual Abuse Accommodation Syndrome, explains the hindrance to disclosure. This Syndrome consists of five components: Secrecy (the abuse occurs when the victim and perpetrator are alone, and the perpetrator encourages the victim to maintain secrecy); Helplessness (children are obedient to adults and will usually obey the perpetrator who encourages secrecy); Entrapment and Accommodation (once the child is helplessly entrenched in the abusive situation, he or she assumes responsibility for the abuse and begins to dissociate from it); Delayed Disclosure (because the victims who report child sexual
abuse, often wait long periods of time to disclose and their disclosures are subsequently questioned); and Retraction (as in the recantation stage, described by Sorenson and Snow, the victims may retract their disclosures of abuse, after facing disbelief and lack of support after their disclosure).

**Waterman et al.,** *(1984)*, for instance, found that approximately one third of their sample placed some blame upon the child victim of CSA.

**Waterman et al.,** *(1984)*, found that in cases of extra-familial CSA, both non-offending parents were assigned some degree of responsibility for their child’s abuse. Further, non-offending mothers were deemed more responsible than non-offending fathers. This suggests that non-offending mothers were assigned the traditional gender stereotype of being more responsible for their child’s protection.

**Browne et al.,** *(1986)*, did an extensive review of earlier research on the impact of sexual abuse. Initial effects of abuse noted were fear, anger, hostility, guilt, shame, sleep disturbances, eating disorders and an array of sexualized behavior from genital manipulation to pregnancy, ‘mummy/daddy’ and ‘nurses/doctors’ related themes in their play.

**Broussard and Wagner** *(1988)*, suggest that males may see encouraging behavior as consent, but that females see children as immature and incapable of giving consent.

**Sorenson and Snow** *(1991)*, found that fear of further harm had an impact on a child’s motivation to disclose abuse and that the child victims often only felt safe enough to disclose after the departure of the perpetrator.
Pollard (1992), maintained that women tend to attribute less blame and responsibility to female rape victims. Hence they are motivated, by perceived gender identification with defensive attributions and hence in favor of that victim.

White et al. (1986), as cited in Campis et al. (1993), found that older victims of child sexual abuse were less likely to disclose than their younger counterparts and noted that the knowledge of social consequences was a significant hindrance to disclosure.

Anderson et al. (1993), conducted a large scale community study of 3,000 women and found that only 37% of CSA victims had disclosed within a year of their abuse, with 10% only disclosing after 10 years and 28% never disclosing their CSA until that survey.

Lamb and Edgar-Smith (1994), asserted that “more astute” children may not disclose because they may “anticipate unsupportive reactions.” They also maintain that such children may wait until adulthood to disclose when they can choose appropriate people to tell.

Keary and Fitzpatrick (1994), concluded that children over the age of five, who had previously disclosed sexual abuse, were more likely to disclose this information during formal assessment but the converse was true for children under five.

Similarly, Lamb and Edgar-Smith (1994), examined a media-recruited sample of 60 volunteers and found that while a third (36%) of women disclosed their sexual abuse before the age of 14, the vast majority (64%) waited until adulthood.

Many writers (Femina et al. 1990; McNulty and Wardle 1994), claimed that such
non-disclosure reflected a fear of being blamed, disbelieved and/or the erroneous belief that CSA is somehow deserved.

**Berliner and Conte (1995),** also noted that the fear about perceived reactions from others prevented some children from disclosing sexual abuse.

**Wells et al (1995),** found that in a study comparing parents’ reports of definitely abused, allegedly abused and non-abused, pre-pubescent females, using Structured Interview for Signs Associated with Sexual Abuse, researchers found significant differences between the three groups. The symptoms that did not seem to be related to abuse included nightmares, crying easily, fears of being left alone, bedwetting, headaches, and stomach aches. The symptoms that were significantly different between the girls who were definitely sexually abused and those who were allegedly abused were difficulty getting to sleep, noticeable changes in behavior, fear of being left with a particular person, fear of males, becoming withdrawn, unusual interest or curiosity about sexual matters. It was concluded by the researchers that a report from the parent can be a useful part of the assessment regarding the likelihood of sexual abuse.

**Lentine (1995),** noted that while many factors may influence family reactions following CSA disclosure and **Shaver (1970),** mentioned one possibility is that parents do not want to accept that their child was sexually abused because they feel they have failed to protect their own child or that accusations of CSA will bring shame and disgrace to the family name.

**McClellan et al (1996),** mentioned that sexually inappropriate behaviours have been linked to early onset of sexual abuse. Later effects included depression,
anxiety, negative self concepts, interpersonal problems, a tendency towards re-victimization and self-destructive behaviors.

**McMillen and Zuravin (1997)**, stated that while attributions of (self) blame have consequences for CSA survivors’ later psychological adjustment, there has been relatively little empirical study of attitudes towards victims and perpetrators of CSA.

**Berkowitz (1997)**, suggested that the parents of CSA victims were often held responsible for their child’s abuse. In Western, if not all societies, there is a strong belief that parents should love and protect their children (sexual). Abuse represents a failure of the family to perform their primary duties.

In line with this view, **Kelly (1990)**, found that welfare professionals (i.e. nurses, police and child protection officer) refused to hold the CSA perpetrator entirely responsible and instead the blame was apportioned.

**Fergusson DM, Mullen PE. (1999)**, found that including abuse by peers in the definition of child sexual abuse, can increase the resulting prevalence by 9% (48) and including cases where physical contact did not occur, can raise the rates by around 16%.

**Back and Lips (1998)**, examined the effects of victim age, victim gender, and respondent gender on attributions towards the victim and non-offending parents in a hypothetical CSA case. They found that parents were attributed greater responsibility, blame, and causality for the abuse than the child, particularly if the child was of a young age. Presumably, older children are seen as more responsible for their own decisions even within a potentially abusive context. **Back and Lips** also found that male respondents rated male parents more responsible and more to blame than female parents.
A general population survey by Straus et al (1998), found that 49 per 1,000 parents reported perpetrating severe physical assault (e.g., slapping on the face, head or ears) and 614 per 1,000 parents reported engaging in minor assaultive behaviors toward their children (e.g., shook the child).

Among published studies of adults reporting retrospectively on their own childhood, prevalence rates of childhood sexual abuse among men ranged from 1% (Pederson W, Skrondal A, (1996). In line with this view, Back and Lips (1998), found that males attributed more responsibility and causality to both victims and their parents than females did.

Garnefski & Arends, (1998), conducted a study of a large group of 12,599 secondary school children in Netherlands and found that boys were more likely to use alcohol, drugs, display aggressive and criminal behavior, truancy and suicidal attempts after sexual abuse than girls.

Garnefski & Arends, (1998), found that the behavioral effects on boys who reported a positive response to sexual abuse were greater than those noted in girls who had been abused.

There still remains considerable debate as to what constitutes child sexual abuse and how prevalent and serious a problem it actually is. In their review of community-based studies, Fergusson and Mullen (1999), differentiated between (a) ‘penetration’ CSA where full anal and/or vaginal intercourse had occurred, (b) ‘contact only’ CSA, where physical but non-penetrative abuse such as oral sex and genital fondling had occurred and finally, (c) ‘noncontact’ CSA, where the child not
was physically touched and abuse took the form of exhibitionism and/or inappropriate sexual suggestion.

According to Fergusson and Mullen (1999), up to 13% of females and 6% of males had suffered from penetration CSA, with a further 19% of females and 6% of males victims of only non-penetrative, contact only CSA.

Washington (1999), Williams and Holmes (1981), found from the clinical literature that many CSA survivors suffered a similar form of re-victimization or ‘secondary assault’.

Browne K et al, (2000), The survey of Romanian families found that 0.1% of parents admitted to having sexually abused their children, while 9.1% of children reported having suffered sexual abuse. This discrepancy might be explained in part by the fact that the children were asked to include sexual abuse by people other than their parents.

Gelles and Edfeldt (1986); SOU (2001) : 18; SOU (2001):72, showed that there has been a significant decrease in minor abuse and corporal punishment. However, there has been no corresponding decrease in the more serious forms of child abuse that result in bodily injury.

Kelleher et al. (1994), found that parents who were identified as alcohol dependent or alcohol abusers, were 4.7 times more likely to physically abuse their children than matched controls.

Famularo et al. (1986); Murphy et al. (1991); Sun et al. (2001), found a positive relationship between child maltreatment and alcohol abuse, and Wolock and Magura (1996), found that alcohol –abusing parents are more likely to be reported
multiple times to the child welfare system for child maltreatment. Ammerman et al. (1999); Chaffin et al. (1996), found that parents with a diagnosed substance use disorder, are more likely to be physically abusive, commit child neglect, and have a higher child abuse potential.

King et al. (2002), traced, self-injurious and suicidal behaviour as adults to childhood sexual abuse.

Lamb and Edgar-Smith (1994); Roesler and Wind (1994), found ‘secondary victimization’ to be particularly prominent when CSA disclosure is made by a child to his/her parents. Esquilim (1987); Guelzow et al. (2002); Melchert 2000, compared to more positive reactions such as accepting, protecting and nurturing the child.

Arata (1998); Baker (2002); Everill and Waller (1995); Roesler and Wind (1994); Stroud (1999), noted that child victims sometimes received more negative reactions from their own parents than they did from non-related others.

According to Davies (2002); Pollard (1992), some feminist accounts would argue that men’s tendency towards a pro-perpetrator/anti-victim stance in adult rape attributions are ultimately the product of a predominantly patriarchal society in which there is of general acceptance of anti-female rape myths (e.g., that only ‘certain’ women are raped or that some women are ‘asking for it’), and they serve only to justify men’s sexual violence towards women.

Olivián-Gonzalvo (2002), maintained that the presence of disabilities is not an isolated factor but instead it is related to other factors. Other factors, related to abuse of these children, are age (younger children are more subject to abuse), illness,
behavioural problems and premature birth. This finding has substantiated the earlier study in Spanish.

Deaux (1984); Maynard and Wiederman (1997); Reynolds and Birkimer (2002), found little or no gender differences in CSA attributions.

According to Tyler (2002); Ullman (2003), CSA is known to have long-term negative consequences, with adult survivors more prone to depression, anxiety, low self-esteem, alcohol, and drug addictions, psychosexual and relationship difficulties and suicidal ideation.

According to Ainsworth (2001); Baker (2002); Finkelhor and Browne (1986); Guelzow et al. (2002); McMillen and Zuravin (1997); Miller and Burgoon (1982); Ullman (2003), negative family reactions in which child victims are seen as either lying or to blame for their own abuse, are likely to have damaging implications for their long-term psychological adjustment.

DeVoe et al. (2002), found that girls are more likely to report abuse than boys. Reinhart found that sexual abuse of males was more likely to be disclosed by a third party. There are no methodologically sound empirical studies that indicate males disclose at a higher rate than females. Gender does not appear to be as important, as victim-perpetrator relationship in disclosure of abuse.

Gurshurst, (2003), studied the psychological consequences of sexually and found that they were abused boys are very far and few.

Baker (2002); Finkelhor and Browne (1986); Ullman (2003); Washington (1999), have shown how (familial) denial, rage, guilt and blame responses to CSA
Disclosure serve only to reinforce the sense of stigma, betrayal, and vulnerability, typically experienced by those sexually assaulted as children.

Despite their implications, no studies have yet explored family response to CSA accusations within an attribution context. Recent work by Anderson and Lyons (2004), examined the impact of social support on blame attributions, in a hypothetical adult rape case. They asked participants to read a brief vignette in which an alleged rape victim testifies in court and it is then either supported (reassured) or unsupported (shunned) by family, friends, and the local community.

Anderson and Lyons (2004), found that blame was affected by the amount of social support given, with supported victims blamed less for their own rape than unsupported victims. Further, this view was endorsed more by men than women.

It is also suggested that adult rape victims, shunned by society, are doubly disadvantaged; first, because they receive no help in coming to terms with their ordeal and second, because they are implicitly blamed for their own assault.

As Anderson and Lyons (2004), noted, any form of blame attributed to (child) victims of sexual assault, may have serious implications both for later psychological functioning and secondary victimization.

The most obvious difference in the cases of severe minor abuse, in the study, was the occurrence of documented injuries in the severe cases. The severe cases had a significantly higher proportion of lowest socio-economic status and a tendency to higher levels of unemployment and foreign born parents.
The known children subjected to severe abuse, were in general already known to Social Services. Reports of child abuse had frequently been made, which indicates that these cases earlier were presented as minor abuse.

According to Hornor (2005), cases of more severe types of abuse, apparently occur in a context where efforts to prevent abuse, that follow a standard model, apparently had no effect. Therefore, one must have better knowledge of the underlying factors in order to be able to design preventive measures aimed at specific risk groups. It is a paradox that the number of cases of suspected child abuse reported to the police had increased by a factor of four, during the period 1980–2000. One possible explanation is an increase in the level of awareness and a decrease in the tolerance of abuse of children.

According to Berger (2005); Famularo et al. (1986); Murphy et al.(1991), Kelleher (1994); Sun et al. (2001), rates of child maltreatment, particularly physical abuse, are higher among individuals reporting heavy drinking.

According to Hornor (2005), parents, who subject children to serious abuse, are often known to Social Services before the actual event and these children have frequently been seen earlier bearing less serious injuries.

Hornor (2005), linked many different risk factors linked to child abuse. Social isolation, unemployment, low socio-economic status, economic difficulties, parental substance or alcohol abuse, the occurrence of violence between the parents, the experience the parents themselves have of abuse, psychiatric symptoms/illness, and medical problems are conditions that have been reported.
Waterman and Foss-Goodman (1984); Rubin and Thelen (1996); Davies and Rogers (2004), (2007); Rogers and Davies (2007), Have shown that victims were sometimes seen as partially to blame for their own victimization with perpetrators absolved for complete responsibility.

According to Cocozza et al. (2007); Gilbert (1997), the Swedish social system of child care and child protection is based on a duality that combines mandatory reporting of child maltreatment to Social Services, with a family-service organization designed to cooperate with the family rather than to control it. As a result, preventive measures are given first priority after a report, and the rights of parents may be given priority over the rights of the children. This leads to interventions that provide compensation for the family’s weaknesses rather than to interventions to protect the child.

Allmänna Barnhuset (2007); SOU 2001:18;SOU (2001):72, carried out national mapping of the occurrence of violence directed toward children has been carried out through questionnaire surveys studies but research is lacking to a large degree about the underlying conditions. This makes it difficult for the professionals, who are charged with taking responsibility for child-abuse cases, to decide how to act.

By similar logic, men may attribute more blame to CSA victims, and less to CSA perpetrators, [Davies and Rogers (2004), (2007); Rogers and Davies (2007)] because of their own gender identification with, and defensive attributions in support of, predominantly male pedophiles (cf. Fergusson and Mullen 1999; Baker 2002;).

Several studies suggested the existence of gender differences in CSA blame Attributions with males, more likely to blame victims, perceive perpetrators as less
responsible, and deem the abuse to be less serious than females. In one study, Rogers and Davies (2007), investigated the roles of respondent, perpetrator, and victim gender, on attributions, towards a 10-year-old victim of sexual abuse and found that while respondents were generally pro-victim regardless of victim or perpetrator gender, male respondents were less positive towards the victim than female respondents.

Annerbäck et al. (2007), found that the judicial system plays a primary role in the way the Swedish system handles child abuse. Violence directed against children is always a crime and can serve as the basis for indictment. Because of difficulties in the investigation of children and in obtaining evidence, reports to the police often lead only to a preliminary investigation and only a few cases go further to court and eventually conviction.

Cohen, J.A. (2007), found that child sexual abuse encompasses a wide variety of abusive acts or experiences, involving children's private body parts. Sexual abuse is associated with a broad spectrum of emotional spectrum of emotional responses, with some children exhibiting great resilience while others display varying levels of distress. Effective treatments are available, for many of the mental health problems, associated with child sexual abuse.

In Sweden, parents born abroad have been shown to constitute a risk group Annerbäck et al. (2007); Lindell and Svedin (2001), Children with functional disabilities are also a risk group Sullivan and Knutson (2000).

A national Swedish study documented that the percentage of children, who have at some time been subjected to severe abuse, has remained stable at about 3-4%
since the 1980s, Allmänna barnhuset (2007), Severe abuse and minor abuse seem in this respect to be completely different phenomena, controlled by different factors. In an investigation of all cases of child abuse, reported to the police in a single police district, severe abuse cases constituted 14% of the total (Annerbäck et al. 2007).

Davies and Rogers (2007), examined the roles of respondents by gender, victim age, and victim-perpetrator relationship and again found that male respondents were more negative towards the victim and deemed CSA to be less serious than did their female counterparts. Thus, it appeared that although males were generally pro-victim, they perceived child victims of CSA as having some responsibility for their own abuse.

Other research have found that while female respondents remain generally pro-victim regardless of victim characteristics, male respondents attributed more blame to victims and less responsibility to perpetrators, when the victim was male, older (e.g., 15 years) and when the perpetrator was female (Broussard and Wagner 1988; Davies and Rogers 2004, 2007; Rogers and Davies 2007; Waterman and Foss-Goodman 1984). Waterman and Foss-Goodman (1984), suggested that males tend to have more rigid male role expectations and as such, tend to view male CSA victims as failing to live up to gender stereotypes where they should be able to resist the sexual advances, even if from an adult. Some of the blame are attributed victims’ parents and/ or society in general.

In 2006, 1.9 per 1,000 children had substantiated reports of child physical abuse (U.S. Department of Health and Human Services, Administration on Children, Youth and Families 2008).
Burns, E.E., Jackson, J.L., Harding, H.G. (2010), examined the relationship between emotion regulation to multiple forms of child abuse and subsequent post traumatic stress. Particular consideration was given to emotional abuse, which has received less attention in the literature. Results, from a survey of 912 female college students, revealed that women, who reported a history of sexual, physical, or emotional abuse, endorsed greater emotion regulation difficulties compared to women without abuse histories. Notably, emotional abuse was the strongest predictor of emotion deregulation. Mediation analyses indicated that emotion dys-regulation partially explained the relationship between physical and emotional abuse and symptoms of post traumatic stress, suggesting that intervention efforts aimed at improving emotion regulation strategies, might be beneficial in decreasing posttraumatic stress among women, with child maltreatment histories.

According to Anderson, K.L. (2010), child abuse entailed acts of omission or commission that may have harmful physical or emotional impact on a child. Types of abuse include physical abuse, sexual abuse, child neglect, emotional or psychological treatment, and sociopolitical abuse. It presented a multidisciplinary discussion of issues characterizing the field of child maltreatment research, and summarized research on the prevalence, etiology, and effects of this prevalent social problem and finally, it concluded with an examination of international social policy approaches, to treat and end child abuse.

Fresno, A., Spencer, R., Ramos, N, Pierrehumbert, B.(2014), in their article highlighted that child sexual abuse to be associated with problems in children's emotional development, particularly increased insecurity of attachment.
However, few studies have examined its effect on the organization of attachment representations in pre-schoolers. The results of the study indicated child sexual abuse does affect children's attachment representation quality. The attachment narratives of child sexual abuse victims, scored significantly higher than non-victims on the hyperactivity and disorganization dimensions of attachment. These results were discussed in terms of attachment theory, clinical findings on child sexual abuse, and clinical implications. The authors have also argued that respondent gender differences in CSA attributions, reflected the acceptance of similarly patriarchal CSA myths.

2.3. RESEARCH CONDUCTED IN INDIA

Radha and Usha (1997), have studied child labour from an economic perspective. Based on a field survey in the Mukkudal village in the Tirunelveli district of Tamil Nadu, an attempt has been made to portray the socio-economic and demographic background of the child labour and present the findings about the children’s earnings and their share in the total family income.

Katherine E. Cox (2000), examined development issues that were raised in a legal analysis of international human rights law, relating to child labour. In doing so, she highlighted some of the weaknesses of the present legal approach to the problem. In order to demonstrate the weaknesses of the system, India was used as an example of a developing country where some of the development issues raised in the legal analysis. The second part of Cox’s paper defined the concept of child labour. It undertook a comprehensive analysis of international legal instruments that deal with the topic of child labour and touched on the relationship between child labour and the right to education. The third part examined some of the development issues that arise out of that legal analysis and critiques the current legal approach. In particular it
focused on the causes of child labour that could not be directly attributed to poor economic development and thus warrant a different approach. The final part of the paper used India as an example of a country which, despite progressive legislation and policy as well as improved economic development, had not been able to make significant inroads into eradicating the practice of child labour.

Inversen and Vegard (2002), have not perceived children as potential economic agents. This neglect may distort analyses of child labour supply, educational attendance, and intra household allocations in developing countries. Among child labour migrants from rural Karnataka, boys outnumber girls and exhibit more autonomy in their economic behaviour. Inversen and Vegard identify the determinants of autonomous migration behaviour and test theories proposing autonomy to be associated with characteristics of individuals, households, and social environments. The empirical results were used to evaluate behavioural presumptions underpinning the analysis of child labour supply. The conventional assumption of no child agency is innocuous for younger children of both sexes and girls in all age groups and it is hard to defend for boys aged 13-14.

A study jointly conducted, by UNESCO and UNICEF, examines the problem of child labour and education in India and other Asian countries. It offered novel insights into the extent of child labour and the shortcomings and inertia of educational systems in adapting to the needs of working children. Also, it described a series of promising educational innovations, meant to bring education within the reach of working children and youth. Particular attention was given to the condition of the female working child. Innovative strategies that were discussed include India’s Institute of Psychological and Educational Research, Self-Employed Women’s
Association, Chetna Vikas, the Indian Institute of Education, a crafts project in Madhya Pradesh, and the Indian Institute of Rural Workers. Thailand’s mobile school, Malaysia’s on-the-job training and Bangladesh’s educational program for underprivileged children were also discussed. It was concluded that the record of achievement in the field of education in South Asia, was not impressive, except in the cases of Thailand and Sri Lanka. Powerful vested interests, whether in semi-feudal agriculture or unorganized industry, continued their severe exploitation by actively recruiting child labour in a perpetual quest for profit. State intervention was needed to achieve the goal of universal primary education.

Padma M Sarangapani (2003), explained that attitude and belief were reconstructed via a vivid and evocative description of classroom atmosphere and the petty tyranny in which the control of knowledge became an assertion of power. “The teachers were not interested in simply identifying those who did not know but in exposing them. The technique emphasised the students’ lack of knowledge and their lower epistemic status. It also served to show them that they could not hide this ignorance from the teachers who used these occasions to remind the students of their need for strict pedagogic authority and an authoritarian teacher.”

Vijaya Kumar (2003), in his study on economic implications of elimination of child labour from selected industries, observed that many children from poor families in rural and urban areas did not go to school because their labour was essential to supplement their family income. The study attempted to investigate the possible economic and social consequences that may affect (positively and negatively) the industries where child labour has to be replaced by adult workers.
Through this study, the child labourers were observed in leather, agriculture, beedi manufacturing industries, etc and the children in the agricultural sector.

According to Veena AS and Prabha S Chandra (2003), in many parts of the developed world child abuse can be reported irrespective of the context in which it was unearthed or disclosed. The State subsequently took the responsibility to safeguard the interests of the child and offer protection. The study had furnished ample evidence and rationale for enforcing child protection system in India. But does India have the resources of countries like the UK or Australia, where children are the State’s responsibility and child protection agencies are active and ready for such eventualities? When sex education in the country is facing so much opposition, what can be the role of parents and schools in at least discussing some of these issues? Patriarchy and power imbalances in relation to children, particularly female children, are so high in some parts of India that it is doubtful how far rules and laws would penetrate families where emotional and physical abuse were the norm.

Shantha Sinha (2005), explicates that the general feeling among the poor towards education was that it was a waste of money and did not help to create resources in the future. Hence, it is very important to develop a system which provides some hope of employment opportunities for the children who have been sent to school. This will happen only when proper economic development aimed at employment generation takes place. Only economic empowerment can restore dignity and self-respect among the poor children of our society.

Lakshmi Rani, D. and Manabendra Nath Roy (2005), studied the dynamics of poverty which forced poor children to accept the jobs of Child Domestic Workers (CDWs) and abandon their childhood. They have pointed out that 20 per cent of all
children, working outside home in India, were in child domestic labour. They observed the socio-economic and cultural factors responsible for leading children into domestic work and to understand the situation/condition of children, engaged in domestic work, in the selected areas. The study has shown that only 30.98 per cent of the children had studied till secondary level, 21 per cent were illiterates and the rest were just literate. Many child labourers were found in the agriculture followed, by service sectors. Most of the family’s income was in the range of Rs.1001-1500 per month. Majority of CDWs (87.5%) worked in urban areas. Majority of CDWs (85.15%) had to work for more than 8 hours per day. A vast majority 92 per cent CDWs had no access to education as per the reports gathered from their parents. CDWs visited their homes once in 3 months or 6 months. Majority of CDWs (87%) had studied till Class IV-VI. The study suggested that community should be made aware of the importance of education.

Arun C. Mehta (1991), conducted a focused study on Education for all in India and explained about free and compulsory education to all children, up to the age of fourteen years. At the time of adoption of the Constitution in 1950, the aim was to achieve the goal of Universalisation of Elementary Education (UEE) within the next ten years i.e. by 1960. Keeping in view the educational facilities available in the country at that time, the goal was far too ambitious to achieve within a short span of ten years.

A.Vaidyanathan and P R. Gopinathan Nair (2001), provided an in-depth and systematic analysis of the present educational scenario in rural India. Based on data drawn from eight States, it focused on the vast and persistent disparities in
educational progress across and within regions, the nature and extent of these disparities, their underlying causes, and possible remedies.

**Kacker et al (2007),** found that there was very little research on physical abuse in India; ii. Only two earlier studies recorded that two out of three children were physically abused; iii. Out of 69% children, 54,68% were boys; iv. Over 50% children in all 13 sample states were being subjected to one or the other form of physical abuse; v. Most children did not report the matter to anyone; vi. The States of Andhra Pradesh, Assam, Bihar and Delhi have almost consistently reported higher rates of abuse in all forms as compared to other States; vii. In different age categories, the higher percentage of physical abuse was reported among younger children (5-12 years); viii. Out of those children physically abused in family situations, 88,6% were physically abused by parents; ix. 65% of school going children reported facing corporal punishment i.e. two out of three children were victims of corporal punishment; x. 62% of the corporal punishment was in government and municipal school; xi. NGO - run schools also reported high percentage of corporal punishment; xii. Boys and girls were being equally abused and run high risk of abuse; xiii. Percentage of abuse in correctional institutions was very high at 56.37%; and xv. Physical abuse of girls in institutions also was very high.

**The Report on Child Abuse in India (2007),** report revealed that boys, as compared to girls, were equally at risk of abuse. Persons in trust and authority were major abusers. Every second child reported facing emotional abuse. In more than 80% of the cases parents were the abusers. Two out of every Three children were physically abused. 88,6% of children, physically abused in family situations were physically abused by parents. More than half of the child respondents reported facing
one or more forms of sexual abuse. 5-12 year old children were in the high risk category: across the forms of abuse. The percentage of abuse among them was the highest. Two out of every three school going children were victims of corporal punishment. Half of these incidents were in government run schools. 70% of the children did not reported abuse to anyone. Andhra Pradesh, Assam, Bihar and Delhi almost consistently reported high rates of abuse, in all forms, as compared to other States.

A Government study in 2007 found that 53 per cent of an estimated 420 million children surveyed, had faced some form of sexual victimisation. Law Minister M. Veerappa Moily told Hindustan Times; “This convinced us that a special law was mandatory to effectively tackle the issue.” The Bill also proposed special courts to try these cases.

Kacker, et al (2007), in their study about the sexual abuse of children in India, found the following: i. 53.22% children reported having faced one or more forms of sexual abuse; ii. Andhra Pradesh, Assam, Bihar and Delhi reported the highest percentage of sexual abuse among both boys and girls; iii. 21.90% child respondents faced severe forms of sexual abuse and 50.76% other forms of sexual abuse; iv. Out of the children respondents, 5.69% reported being sexually assaulted; v. Children in Assam, Andhra Pradesh, Bihar and Delhi reported the highest incidence of sexual assault; vi. Children on street, children at work and children in institutional care reported the highest incidence of sexual assault; vii. 50% abusers were persons known to the child or in a position of trust and responsibility and viii. Most Children did not report the matter to anyone.
Karibeeran Sathyamurthi (2009), found that the worst form of abuse was sexual one, in which the children were physically and mentally harassed. Majority of the social scientists reported that sexual abuse was perpetrated on the child by his/her immediate society. Victimisation due to sexual abuse was based on gender. More than half of the respondents (54.7%) opined that they had not undergone any sexual abuse. But a substantial proportion of the respondents (45.3 %) had expressed that they had been sexually abused. Among those who reported sexual abuse, 30 % of the respondents disclosed that their friends and peers are the higher perpetrators of sexual abuses, 12 % of the respondents had revealed that their parents had also sexually abused, 2.7 % of the respondents were sexually abused by their neighbours and 0.7 % of the respondents were by opposite sex strangers. This data revealed that the schooling children undergo sexual abuses which were unheard. It was startling that parents who need to protect them had also abused them sexually. The proportion of male respondents being abused was high.

The improvement in school enrolment of girls in India shows the encouraging trend of the growing outreach of the schools to the girls. The share of girls in the total enrolment at primary and upper primary level was 19% and 46.5% respectively in the year 2005-06. This increased to 48.5 and 48.1 at primary and upper primary levels respectively in 2009-10.

According to the Children in India, (2012), Gender Parity Index (GPI) has shown significant increase, particularly at the upper primary level. Gender Parity Index (GPI) in enrolment, at primary and secondary, is the ratio of the number of female students enrolled at primary and secondary levels, in public and private schools, to the number of male students. In general, at the national level, the number of girls enrolled at all levels, i.e. primary, secondary and higher education was less
than their counterparts. However, the female-male ratio in education has been steadily improving over the years. In primary education, the GPI ratio went up from 0.76 in 1990-91 to 1.00 in 2009-10, showing 31.6% increase and in secondary education the increase was from 0.60 in 1990-91 to 0.88 in 2009-10, thereby showing 46.7% increase.

2.3. 1. Child Abuse and Role of Teachers

Nagatomo et al. (2007), investigated association between teachers' workshop attendance, detection of child abuse signs and perceptions about the prevention of child abuse and found that workshop attendance was associated with certain aspects of child abuse detection. They found that while most teachers suspected child abuse, based on ‘parental violent behaviors’, many teachers did not regard ‘being unable to contact parents’ or ‘parental refusal to see teachers’ as potential signs of abuse. They reported that in many cases, the signs of suspected child abuse that teachers detected, were ‘unnatural things in daily life’ such as ‘unnatural wounds on children's bodies’, ‘dirty clothing’, and ‘children's cruel behavior to other living creatures’. Teachers often did not suspect child abuse from abnormal behaviors such as ‘children's obsession with eating or no appetite’ or ‘lack of concentration in class’, because teachers did not regard them as signs of abuse. They also found that 90% of teachers, in their study, found it difficult to identify individual cases of abuse.

Tanaka (2007) and Saito et al. (2007), reported that many junior-high school teachers had difficulty dealing with problematic families. These findings indicate that dealing with parents and guardians in instances of child abuse is challenging.

Fukuoka (2007a) and Fukuoka et al. (2009), reported that teachers found ‘possible risk of upsetting trusted relationships with parents’ and ‘proper level of
intervention given to individual privacy’ were difficult issues while responding to child abuse.

**Fukuoka et al. (2007),** in a study on awareness of child abuse found that 93.2% of elementary school teachers in their study were aware of mandatory reporting; 53.4% knew that both social welfare offices and child guidance centers could receive the child abuse reports and 35.2% thought only child guidance centers were able to receive the reports. They reported that 86.4% of schools had some response system in place although details of the systems were not revealed. Because most school personnel were aware of their obligation in working to detect abuse early, specific responses to abuse need to occur from the heart of pre-existing internal systems. They also found that most Yogo Teachers managed student discipline committees or committees/departments in charge of student lifestyle guidance.

In terms of teacher and staff concerns and perceptions about their roles, **Shibuya (2007),** reported that 85.7% of elementary school teachers and 79.5% of junior-high school teachers were aware of the legal stipulation that “staff and organizations related to social welfare for children should strive for early detection of child abuse.”

**Tsunoda et al. (2007),** investigated the signs of child abuse for detection. He reported that child abuse cases, detected by Yogo teachers in schools, were likely to involve physical abuse and neglect.

According to the **Ministry of Education, Culture, Sports, Science and Technology (2006); Tamai (2007),** internal and external cooperation with other relevant organizations is essential for schools to respond properly to child abuse. While laws stipulate the need for early detection and obligatory reporting, alongside
close cooperation across different professions, some studies show disparities in the perceptions held by administrators, school teachers and staff members.

According to Health and Welfare Statistics Association, 2008; Statistical Association Health Foundation, (2008), the Japanese Society of School Health, 2001 studied the physical and mental health of children, being impacted by recent rapid changes in lifestyle and the social environment due to urbanization, an ageing population with a low birthrate, and an information-oriented society. The health related problems of children have also become more diverse and complex. Among these problems, the issue of child abuse has become an increasingly acute social problem that requires immediate attention. There was a constant flow of serious cases, resulting in death and human rights violations of children as well as a continuing number of consultation cases, brought to child guidance centers.

Tanaka et al. (2009), found that more than half of junior-high school teachers, in their sample, had never attended a workshop on child abuse and that those who had attended, failed to connect the presence of abuse to questionable occurrences or abnormalities in daily life such as ‘unusual events or behaviors’, ‘abnormalities in social relationships’, ‘isolated families’, and ‘violent behaviors of parents’. On the basis of this, the authors proposed that instruction on child abuse in university teacher-training courses would be partially effective in helping teachers determine the presence of abuse.

Oto et al. (2009), stated that most Yogo teachers in their study were highly concerned about child abuse and aware of their responsibility for early detection, indicating the strong concerns present about child abuse within schools. Additionally, concerning perceived difficulties in responses to child abuse, they stated that the most
frequently reported issue, that Yogo teachers found difficult to handle, was ‘interaction with parents’, followed by ‘identifying an abuse case’, ‘level of intervention in family issues’, ‘cooperation with other organizations’, and ‘internal cooperation within schools’.

With regard to school responses to child abuse, in January 2010, the Ministry of Education, Culture, Sports, Science and Technology issued a notice. The notice entitled, Promotion of Appropriate Child Abuse Prevention in Institutes was targeted at Schools. The notice advocated the promotion of appropriate child abuse prevention in institutes such as schools and emphasized administering laws and preventive measures on child abuse in schools, community cooperation with school boards and social welfare bureaus for children, teacher training programs related to responsiveness to child abuse by actively using the training materials published by the Ministry of Education, Culture, Sports, Science and Technology.

Reviews and analyses of eleven academic journal articles on school responses to child abuse, generated four categories: ‘support for child abuse issue’, ‘calls for improvement of school organizational systems’, ‘workshops on child abuse’, and ‘informing teachers about relevant systems and laws’.

2.4. INFERENCES OF THE PREVIOUS STUDIES CONDUCTED IN OVERSEAS

From the reviews, the Researcher understood the various kinds of abuses against children all over the world. At the global level there were many studies on child abuse. But in India very few studies have been conducted. It is unfortunate that 19 % of the world child population is in India, but there is still need for care and protection of children against abuse.
From the inference of reviews, the Researcher classified the kinds of abuse into four parameters such as Gender Discrimination, Physical, Psychological / Emotional / Neglect and Child Sexual abuses.

**Gender Discrimination**

The review shows that all countries including India, Pakistan, China, etc, have practised some kind of abuses and discrimination towards girl children rather than boys. Especially girls were either not allowed to receive schooling or else were kept at home to help look after their siblings or to assist the family economically by working. At the same time, male children faced other forms of abuse. While girls were at increased risk for infanticide in many places boys were subjected to harsher physical punishment. Abuses towards children exist in the society. But the way they were abused vary according to their sex, culture and community. It was clear that, wide cultural gaps between different societies, also influence to child abuse.

**Physical Abuse**

The research, conducted in Republic of Korea, Egypt, Ethiopia, Romania and India, exposed child labour and their development issues. Some studies dealt with the parental physical abuse of their children, including being hit with an object, being harmed and being deprived of food.

The review also shows that a substantiate amount of harsh punishment occurred in schools and other institutions at the hands of teachers and care givers. In this area, the World SAFE study suggested a wider divergence among societies and cultures. Some kinds of physical abuses include shaking children, pinching them, slapping them on the face or head, whipping.
Emotional Abuse / Psychological Abuse / Neglect

The review showed that the experience of abuse and neglect can impede the attachment process and decrease the youngsters’ feelings of security and trust in their caregivers. Because of the maltreatment, children feel unworthy, unloved, and view the world as a dangerous, unhappy place.

The review also revealed that substance abuse was also predictive of later maltreatment, higher substantiations of neglect where mothers have been subjected to domestic violence, domestic violence added to the risk of neglect over and above the risk of other maltreatment, parental drug or alcohol use was the second most important factor (after the young age of neglected children) in differentiating neglected children.

The World SAFE study reveals that there is evidence to suggest that shouting at children is a common abuse by parents across many countries. In the Philippines, for example, threats of abandonment were frequently reported by mothers as a disciplinary measure. In Chile, the rate of using such threats was much lower, at about 8%.

Neglect and abuse were the major issues encountered in all societies and it affects development of both healthy and disabled children negatively and it may even cause death. While abuse may be physical or emotional or sexual, the neglect may be both emotional and physical. In disabled children, especially mentally challenged children’s encounter risk with abuse and neglect, is higher.

Child Sexual Abuse

Fergusson and Mullen (1999) differentiated between (a) ‘penetration’ CSA where full anal and/or vaginal intercourse had occurred, (b) ‘contact only’ CSA,
where physical but non-penetrative abuse such as oral sex and genital fondling had occurred and (c) ‘noncontact’ CSA where the child was not physically touched and abuse took the form of exhibitionism and/or inappropriate sexual suggestion.

The survey of Romanian families found that 0.1% of parents admitted to having sexually abused their children, while 9.1% of children reported having suffered sexual abuse. This shows that the parents abused their own children sexually. There was no safety for children in their own house. This is because of male domination and consumption of alcohol by the parents.

Young and innocent children were the subjected to child sexual abuse and the studies revealed that CSA was known to have long-term negative consequences with adult survivors more prone to depression, anxiety, low self-esteem, alcohol, and drug addictions, psychosexual and relationship difficulties and suicidal ideation.

The study conducted among the school children in Netherlands, found that among the victims of child sexual abuse, boys were more likely to use alcohol, drugs, display aggressive and criminal behavior, truancy and suicidal attempts than girls. This shows the negative impact among children and which leads to another form of abusive behavior.

The negative family reactions, in which child victims were seen as either lying or to blame for their own abuse are likely to have damaging implications for the victim’s long-term psychological adjustment. Child Sexual Abuse is associated with problems in children's emotional development, particularly increased insecurity of attachment.
Sexual abuse is associated with a broad spectrum of emotional responses, with some children exhibiting great resilience while others display varying levels of distress. Effective treatments are available for many of the mental health problems, associated with child sexual abuse.

2.5. THE INFERENCES OF THE PREVIOUS STUDIES CONDUCTED IN INDIA

Child labour is a kind of child abuse where the child’s fundamental rights are denied and the children work in hazardous works instead of having education. The study by Radha and Usha (1997) showed that children worker and their wages are counted as a family income. The socio-economic and cultural factors, responsible for leading children into domestic work should be analysed, to understand the situation / condition of children engaged in domestic work. Poverty forces poor children to accept the jobs of child domestic workers (CDWs) and abandon their childhood and hence only economic empowerment can restore dignity and self-respect among the poor of our society.

Patriarchy and power imbalances in relation to children, particularly female children, are so high in some parts of India that it is doubtful how far rules and laws will penetrate families where emotional and physical abuse are the norm. This shows that in India, patriarchy and power relations is the first cause of any kind of abuse.

It is revealed through a few studies conducted in India and was found that due to patriarchy and male domination there was some sort of gender discrimination that led to child abuse practices in India. Child labour is the major issue in India, which is associated with child abuse. Parents, teachers, caretaker are the perpetrators who are
Responsible for child abuse and it includes gender discrimination, physical and emotional/psychological/neglect.

Unemployment, low socio-economic status, economic difficulties, parental substance or alcohol abuse, the occurrence of violence between the parents, the experience the parents themselves have of abuse, psychiatric symptoms/illness, and mental illness of the parents are the major cause of child abuse.

2.6. INSIGHTS GAINED FROM THE REVIEW

Reviewing the literature had helped the Researcher to choose the appropriate research design for the present study, which is a survey type. It also helped to understand the nature and delineation of the research problem, appropriate research methodology and the necessary statistical methods to be used.

2.7. RATIONALE OF THE PRESENT STUDY

Having gone through the literature thoroughly, it was understood that so far very few studies had been undertaken to find out the child abuse in a gender perspective in India. The Researcher has not come across any study investigating from this perspective. The present study is the first of its kind. Hence the Researcher decided to conduct a study entitled “A GENDER PERSPECTIVE STUDY ON CHILD ABUSE”.

2.8. SUMMARY

Review has created the context for a study exploring child abuse from a gender perspective. In terms of the literature concerned, this Chapter has confirmed the critical importance of using evidence to find out the child abuse in the light of
gender perspective. The literature also revealed that, as the problem of child abuse has been steadily increasing, there is a need for such a study.

Further, the literature in this chapter has identified a number of critical research problems and gaps facing educators, researchers and learners today. Based on this literature review and theoretical background, the next chapter sets out the specific research purposes of this study and discusses the design and methodology chosen to operationalize the key questions contained therein.