

CORPORAL PUNISHMENT AND RIDICULE—RESIDUAL  
PSYCHOLOGICAL EFFECTS IN EARLY ADULTHOOD:  
IMPLICATIONS FOR COUNSELORS

by

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## ABSTRACT

Corporal punishment at home has been positively correlated with aggression (Cohen & Brook, 1995; Straus, Sugarman, & Giles-Sims, 1997) and internalizing disorders (Luby & Morgan, 1997; Turner & Finkelhor, 1996). Corporal punishment at school has also been positively associated with post-traumatic stress disorder (Hyman, 1990; Krugman & Krugman, 1984). Ridicule was found to be positively related to anti-social behaviors (Egeland & Erickson, 1987) depression (Braver, Bumberry, Green, & Rawson, 1992) and PTSD (Krugman & Krugman, 1984). The preponderance of the literature addressed the association between corporal punishment at home and psychopathology in children.

The purpose of this study was to examine the relationship between corporal punishment experienced in childhood and psychopathology; specifically, anxiety, depression, phobic anxiety, and PTSD evident in adulthood. In addition, positive or negative attitude regarding childhood punishment experiences was examined. Psychopathology was assessed with the Brief Symptom Inventory (Derogatis, 1993) and the Impact of Event Scale-Revised (Weiss & Marmar, 1997). Multivariate analysis of variance and t-tests were used to examine the data.

The results indicated all measures of psychopathology to be significantly related to exposure to both corporal punishment and ridicule. When those who experienced corporal punishment only at home were compared to those who were exposed to corporal punishment both at school and at home it was found that the exposure to corporal punishment in two environments was more deleterious than exposure only at home. Ridicule demonstrated the strongest effects, including the presence of PTSD in both the school and home environments relative to exposure to ridicule at home. These results reveal an association between corporal punishment or ridicule in childhood and the risk of a negative psychological outcome in adulthood. Nonetheless, the participants indicated that exposure to corporal punishment had a positive effect on them as adults.

Implications for counselors include recognition that the effects of physical punishment and ridicule experienced during childhood both at school and at home may be associated with psychological compromise in adulthood. In addition, the counselor must assume that clients are not cognizant of the deleterious effects associated with corporal punishment.

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## CHAPTER I

### INTRODUCTION

Even in the United States in the late 20th century, corporal punishment is a fact of life for children. In fact, physical punishment is a common and accepted form of behavior management for children (Flynn, 1996; Graziano, Lindquist, Kuncce, & Munjal, 1992; Greven, 1991; Straus & Mathur, 1996; Straus & Stewart, 1998). Twenty-three states and the District of Columbia permit the use of corporal punishment in the public schools (Hyman, 1995). During the 1993-1994 academic year, 478,350 students experienced corporal punishment at school on at least one occasion (Office of Civil Rights, 1997). It is at the hands of their parents, however, that most children are physically punished (Flynn, 1996; Graziano et al., 1992; Straus, 1994; Straus & Stewart, 1998). In addition, it is a misconception that corporal punishment is used as a last resort after every other intervention has been tried. Quite the opposite is true. School children are sometimes struck as the first response to misbehavior (Hyman, 1990; Shaw & Braden, 1990).

Most European countries, the United Kingdom, and the countries of the former Soviet Union have banned corporal punishment in their schools (Hyman, 1990; British Broadcasting Corporation, 1998); in addition, some countries have prohibited its use

by parents (Riak, 1996). In 1989, the United Nations Convention on the Rights of the Child issued a position statement calling for a ban on the use of corporal punishment. Many American professional organizations have also called for a ban on its use (for example, American Academy of Pediatrics, 1991, American School Counselor Association, 1995, American Psychological Association, 1998).

Corporal punishment is the intentional infliction of pain for the purpose of correcting or controlling a child who has committed an offense (Hyman, 1990; Straus, Sugarman, & Giles-Sims, 1997). It is important to understand that children may suffer pain as a result of care given to them that is not corporal punishment. For example, a child experiences pain as a result of the cleansing and disinfecting of a wound in which the intention is not to inflict pain, but rather is a byproduct of the process of treating a wound. Whereas, in the case of corporal punishment, inflicting pain is the goal (McCord, 1991).

There are several pertinent theories in the examination of corporal punishment. Although behavior theory is the basis for using punitive measures to control children, a careful reading of the tenets of learning theory does not reveal support for its use as a training technique (Houston, 1986). Skinner (1979) did not support punishment as an efficacious method for teaching children discipline. Bandura and his associates (Bandura & Huston, 1961; Bandura, Ross, & Ross 1961, 1963) demonstrated that modeling aggressive behavior created

aggressive behavior in the observer. Baumrind's (1967, 1971) work with parenting styles found that harsh punitive techniques were not conducive to the rearing of competent children. However, she promoted the use of mild physical punishment, in addition to the use of reasoning, with young children (1966, 1996, 1997). Although physical punishment is not supported by theory, there is controversy concerning its efficacy even among the theorists.

Children are hit at home and at school. Children are struck with an open hand, switches, boards, straps, and rods (Dobson, 1987, 1992; Fugate, 1996; Greven, 1991; Straus, 1994). They are also punished in other ways; such as, having their mouths washed out with soap or being required to exert themselves physically beyond their capability (Hyman, 1990).

Far from being a benign punishment for behavior which is unacceptable, corporal punishment does result in injuries, both psychological and physical. These injuries can be permanent. Sadly, in some instances, children have even died (Hyman, 1990). Children and adolescents also experience psychological punishment in the form of ridicule. Sarcasm, name-calling, and other verbal behaviors aimed at denigrating the young person are damaging psychologically (Egeland & Erickson, 1987; Krugman & Krugman, 1984).

Despite its adverse effects, currently in the United States there are many proponents of corporal punishment. Some believe that



faithful practice of their religion requires that children be punished using a rod (Fugate, 1997; Greven, 1991) or another implement, such as a switch or paddle (Dobson, 1976, 1987, 1992). Others recalling that they were spanked when they were children and believing themselves to be responsible people (Straus, 1996) have concluded that being a responsible parent requires spanking (Greven, 1991). Many educators perceive physical punishment as an expedient and effective method of dealing with behavioral problems in the school (Gursky, 1992; Kennedy, 1995; Reinholtz, 1979). Furthermore, teachers who experienced corporal punishment when they were students are more likely to be proponents of its use (Lawrence, 1998; Rust & Kinnard, 1983).

Given the prevalence of corporal punishment, an important but often overlooked question remains. Regardless of the amount of corporal punishment administered to a child, how does the experience affect that person when he or she reaches adulthood? Given the fact that corporal punishment has been found to have detrimental psychological effects on children, it seems logical to question whether the psychological sequelae continue into adulthood. Other questions to ponder include:

- Is it true that adults who experienced physical punishment as children suffer no negative consequences?
- Does the experience of being belittled continue into adulthood?

- Are there negative psychological correlates that relate to such experience?

This study examines the experiences of both corporal and psychological punishment to determine if there is a relationship between such exposure and residual psychological effects in young adults.

In addition, given that the majority of the people in the United States support corporal punishment (Straus, 1994; Straus & Mathur, 1996) and even those exposed to what was unambiguously physical abuse fail to recognize the seriousness of their experience (Knutson & Selner, 1994), it is important to also question the participants' perception of the current positive or negative effect of their childhood corporal punishment. That is, do they perceive it as beneficial in their current lives?

#### Importance of this Study

In the United States, corporal punishment is supported by the majority of people, experienced by most, and practiced by many (Flynn, 1996; Graziano et al., 1992; Straus, 1994; Straus & Mathur, 1996; Straus & Stewart, 1998). Despite its popularity, little is known of its psychological consequences; even less is known about the psychological sequelae for average adults. At present the research on corporal punishment is primarily focused on its effects for young

children and those adults and adolescents involved in crime. In addition, the preponderance of the research has focused on physical punishment in the home. School punishment has been virtually ignored. Researchers have examined the issue of psychological punishment and the possible residual effects of exposure to denigration even less often than the effects of corporal punishment which have continued into adulthood. Since there is an obvious gap in the literature on the effects of corporal punishment and ridicule experienced at home, as well as at school, and the psychological sequelae for young adults, this study was designed to address these issues.

### Research Questions and Hypotheses

The research questions were composed of primary and secondary emphases. The two primary questions examined the relationship of psychopathology to childhood exposure to corporal punishment and ridicule. Psychopathology was measured with the Brief Symptom Inventory and the Impact of Event Scale-Revised. A significance level of .05 was required for acceptance.

The first research question was: Is corporal punishment associated with negative psychological effects that continue into adulthood for the average adult?

The hypotheses were:

- 1.1. There will be significantly more psychopathology among those who experienced corporal punishment than among those who did not experience corporal punishment.
- 1.2. There will be significantly more psychopathology among those who experienced corporal punishment at school than among those who did not experience corporal punishment at school.
- 1.3. There will be significantly more psychopathology among those who experienced more extensive corporal punishment at home; that is, the greater the exposure to corporal punishment, the more severe the psychopathology.
- 1.4. There will be significantly more psychopathology among those who experienced corporal punishment both in the home and in the school than among those who experienced corporal punishment only in the home.
- 1.5. There will be significantly more psychopathology among those who experienced corporal punishment in the home only than among those who experienced corporal punishment in the school only.

The second primary research question was: Is the experience of ridicule associated with negative psychological effects that continue into adulthood for the average adult?

The hypothesis was:

2. There will be significantly more psychopathology among those who experienced ridicule than among those who did not.

The secondary research question was: Do those who experienced corporal punishment during childhood perceive it to have a positive or negative effect currently? The hypotheses examined the relationship between the childhood experience of corporal punishment and the currently held perception of positive or negative effect due to the experience. Positive and negative effects were measured with two Likert-like scales written by the investigator for the Event Summary. A significance level of .05 was required for acceptance.

The secondary hypotheses were:

3. There will be a significantly more positive perception of current effect among those who witnessed corporal punishment.
4. There will be a significantly more positive perception of current effect among those who knew someone who was corporally punished.
- 5.1 There will be a significantly more positive perception of current effect among those who report being corporally punished when they were 5 years old or less.
- 5.2 There will be a significantly more positive and a significantly more negative perception of current effect among those who report being corporally punished when they were between the ages of 6 and 12.
- 5.3. There will be a significantly more negative perception of current effect among those who report being corporally punished when they were between the ages of 13 and 17 years.

### Delimitations

This study investigated the consequences of the customary use of corporal punishment: to control, or correct behavior by, a child. Although corporal punishment can be quite severe, with the line between it and child abuse being blurry, it was not the intent of the investigator to explore the problems of what was clearly child abuse. Secondly, this study did not address the physical punishment of students with physical or mental challenges. While it is true that exceptional children are frequently subjected to corporal punishment (Office of Civil Rights, 1997; Richardson, Wilcox, & Dunne, 1994), addressing this issue was beyond the scope and purpose of this study.

### Limitations

There are factors which limit this study. Foremost is the fact that the great majority of people have experienced corporal punishment (Straus, 1994; Straus & Mathur, 1996; Straus & Stewart, 1998). There was no control group of participants who had not experienced corporal punishment. Therefore, it was not possible to examine the existence of psychopathology among those who were not physically punished and compare it to those who had experienced corporal punishment.

Another limitation is the use of self-report measures for this study. Use of self-report surveys has been questioned for

methodological reasons; foremost among these reasons is the possibility that the responses are contaminated by the participants' perception of events and behavior, or simply that they may not be truthful (Nunnally & Bernstein, 1994). Compounding the lack of objectivity inherent in self-report measures is the retrospective nature of the questions regarding the incidence of corporal punishment, which is also a limitation (Neale & Liebert, 1986).

The fact that this study is correlational and not experimental is a limitation. Causation cannot be determined when using a correlational design. The most that can be said is that the factors are related.

Generalization from this study to the population as a whole may be limited. There are two reasons for this. First, a convenience sample was used for this study rather than a representative sample. Secondly, the participants were students at a large university in the southwest United States and their experience may differ from that of people in other geographical areas. They may also be different from non-students. Therefore, the conclusions reached in this study may not generalize to other populations.

Finally, the experimenter greeted the participants, explained the study, proctored the completion of the instruments, and collected the completed materials. Lewin (1987) suggests that the personal

involvement of the experimenter may create a response set. To the extent that this occurred, it is a limitation.

### Definitions

The following definitions are provided to assist the reader.

**Average adult:** An adult capable of independent living who is not incarcerated nor a patient in a mental health facility.

**Chastisement:** Chastisement uses flexible rods to inflict pain or suffering upon a child through corporal punishment with the goal of ending a child's rebellion, defiance, or disrespect of authority (Fugate, 1996).

**Corporal punishment:** Corporal punishment is the intentional infliction of pain for the purpose of correcting or controlling a child who has committed an offense (Hyman, 1990; Straus, Sugarman, & Giles-Sims, 1997).

**Discipline:** To train by instruction and exercise, especially in self-control (Merriam-Webster, 1988), with the goal of developing competence, independence, and concern for others (Howard, 1996).

**Extensive punishment:** A term used to describe the greatest frequency and variety of punishment. Specifically, extensive punishment would be of more than one type (i.e., spanking or school paddling, other types of hitting, and other types of physical punishment which did not include hitting). In addition, extensive



punishment would necessarily have occurred during childhood more than 5 times for one type of punishment and at least once or twice for another type of punishment, or three times for two types of punishment and once or twice for a third.

**Minimal punishment:** A term used to describe the least frequency and variety of punishment. Specifically, minimal punishment was defined as punishment during childhood that occurred no more than three times.

**Moderate punishment:** A term used to describe the medium frequency and variety of punishment. Specifically, moderate punishment would require that during childhood one type of punishment occurred 4 or more times or a combination of types of punishment occurred; such as, one type of punishment occurring 3 times and another occurring once or twice.

**Paddling:** Being struck on the buttocks with a board. It may also be referred to as “getting licks,” “getting the board” or another similar term.

**Physical punishment:** A term used synonymously with corporal punishment.

**Psychological punishment:** A term used synonymously with ridicule.

**Ridicule:** The use of sarcasm, name-calling, or embarrassment to belittle or denigrate. It is psychological punishment.

Spanking: Administration of one or more strikes to the buttocks with an open hand.

### Summary

Corporal punishment is a common experience among children in the United States. It is supported by both religion and tradition. Many educators also support its use in the schools.

Some research has been conducted to investigate the effects of using corporal punishment with children and adolescents. The majority of this research is concerned with punishment meted out in the home. In fact, few studies have examined the school incidence of corporal punishment. In addition, little is known about the long-term effects manifested in adults who experienced corporal punishment as children.

There are very few studies that examine the incidence of punishment in the school environment. Research investigating the psychological sequelae in adulthood is even more rare. This study has added to the body of research in an important way by investigating the relationship between self-report of corporal punishment in childhood and adolescence and the presence of psychopathology in young adults. The study also has compared the experiences of school and home punishment. Furthermore, the population sample studied was that of

young adults with whom little research into the relationship between psychopathology and corporal punishment has been conducted.

## CHAPTER II

### REVIEW OF THE LITERATURE

Many adults believe that it is necessary to physically punish children in order to impress upon them the seriousness of their errors and to demonstrate that they must change their behavior. It is no longer legal to use physical punishment in the pursuit of correction for anyone except a minor (Hentoff, 1979; Straus, 1994). However, the majority of American adults support the practice of corporal punishment as an appropriate method to teach children discipline (Flynn, 1996; Graziano, Lindquist, Kuncce, & Munjal, 1992; Straus & Mathur, 1996).

Baumrind (1967, 1971, 1989, 1997) wrote that harsh punishment is not conducive to the rearing of children who are competent and not aggressive. Bandura and his associates (Bandura & Huston, 1961; Bandura, Ross, & Ross, 1961, 1963) demonstrated that children who observe violence are more likely to be violent. Skinner (1979) suggested that punishment is not an efficient way to increase learning.

Corporal punishment has been shown to contribute to both physical and psychological problems. The physical problems can be quite serious, which is evident in the fact that some children have died as a result of corporal punishment (Hyman, 1990). Studies have shown that there are psychological consequences; such as, the

internalizing disorders of anxiety and depression (Durant, Getts, Cadenhead, Emans, & Woods, 1995; Luby & Morgan, 1997; Turner & Finkelhor, 1996), post-traumatic stress disorder (Hyman, 1990; Krugman & Krugman, 1984), and anti-social behavior (Bates, Pettit, & Dodge, 1995; Cohen & Brook, 1995; Huesmann, Eron, Lefkowitz, & Walder, 1984; McCord, 1991; Strassberg, Dodge, Pettit, & Bates, 1994). However, little is known of the psychological effects which may extend into adulthood.

This chapter is divided into eight primary sections. The headings are as follows: history, contemporary corporal punishment, reasons for the persistence of corporal punishment, legal support, consequences, theoretical issues, deficiencies in the literature, and a summary.

### History

Corporal punishment has existed for a long time. Sailors have been flogged; slaves whipped. Wives have been subjected to abuse by their husbands for correction. Criminals have been sentenced to receive lashes. And, children have been given corporal punishment for transgressions (Glenn, 1984). While caning (Mwangi, 1997; Wallace, 1994) and whipping ("Charles," 1997) of adults continues to be legal in some countries, no form of corporal punishment is legal in the

United States any longer, unless the recipient is a child (Hentoff, 1979; Straus, 1994).

Ancient civilizations treated children with a certain indifference and sometimes put them to death as sacrifices or because of transgressions or imperfection. The Greeks did not distinguish between their children and slaves, using the same words for both. Children were the property of their parents (Oosterhuis, 1993), and only useful for what they would become--adults (Williams, 1979).

### Biblical Exhortations on Parenting

The Bible provides a historical vantage point regarding the use of punishment with children. There are several Biblical passages which are often quoted to support the use of corporal punishment on children. "Foolishness is bound up in the heart of a child; / The rod of discipline will remove it far from him" (Proverbs 21:15, New American Standard); "I will be a father to him...when he commits iniquity, I will correct him with the rod of men and the strokes of the sons of men" (2 Samuel 7: 14). For serious transgressions this includes the punishment of death: "And he who curses his father or his mother shall surely be put to death" (Exodus 21:17); "And he who strikes his father or his mother shall surely be put to death" (Exodus 21:15). Deuteronomy 21: 18-21 tells parents that if they have a son who will not obey and, after

chastisement, will not listen to them, that they should bring him to the elders and the men of the city should then stone him to death.

The most quoted instruction about child rearing is the statement, "Spare the rod and spoil the child." Although this phrase is often attributed to Solomon in the book of Proverbs, it is not from the Bible at all. It is from a poem by Samuel Butler. The statement and the preceding line read, "Love is a boy, by poets styl'd, / Then spare the rod and spoil the child" (Butler, 1674/1967, lines 843-844). The Biblical statement is "He who spares his rod hates his son, / But he who loves him disciplines him diligently" (Proverbs 13:24). Instead of a rod of punishment the reference may be to the staff used by shepherds to guide sheep. The implication is that the parent is to provide guidance to the child which will instruct him or her in learning self-discipline. If this guidance is not provided the parents are negligent in their parental responsibility (Carey, 1994). However, this phrase from Proverbs (13:24) is frequently understood to mean that the loving parent is to punish the child by striking him or her with a rod (Fugate, 1996).

The Biblical admonitions indicate that the child is to obey his or her parents without question and failing to do so requires that the child receive physical punishment. The importance of this is the belief that the child who does not learn to obey his or her parents and respect

their authority will also not learn to obey God and His authority, thereby losing his or her soul (Fugate, 1996; Greven, 1991).

### Punishment in the Home

In the American colonies of the 17th century, the Puritans believed that disobedient children would force God to condemn them to eternal damnation; and therefore, the whipping of children was necessary (Forehand & McKinney, 1993). In 1732, in a letter to her adult son John Wesley, the founder of the Methodist Church, Susanna Wesley recalled that she had taught her children by the time they were a year old “to fear the rod and cry softly...” (as cited in Greven, 1991, p. 19). The reason for early correction is contained in another passage of Susanna Wesley’s letter, “I insist on the conquering of the will of children betimes, because this is the only strong and rational foundation of a religious education...(as cited in Greven, 1991, p. 66). Her letter continues to be read by evangelical Christians (Dobson, 1987; Greven, 1991).

In the 18th and 19th centuries, children enjoyed no legal protections in the home or school against physical punishment. They were whipped daily, tortured, burned, and starved. In 1874, it was the Society for the Prevention of Cruelty to Animals that worked to have an abused child removed from her New York home (Williams, 1979).



## Punishment at School

Children were expected to sit erectly and stand when speaking. Lane (1995) stated that it was very unusual that transgressions were of a criminal or violent nature. Children were punished for tardiness, acts regarded as immoral, failing at recitation, inattention, hyperactivity, or playing with someone of the opposite sex (Manning, 1979).

In eighteenth century America, punishments included having a child stand on one foot in a shoe that had sharp pegs driven up through the sole, being whipped for a classmate's transgression, and requiring a child to hold heavy objects at arm's length (Small & Falk, as cited in Manning, 1979). In the mid-nineteenth century, the use of a cane or whip to punish students was commonplace (Glenn, 1984; Lane, 1995; Manning, 1979; Raichle, 1979).

## Early Attempts at Reform or Moderation

As early as the 17th century, efforts were being made toward moderation or reform in the use of punishment at school. In fact, there were some schools that attempted to teach without using pain.

Noah Webster suggested that both persuasion and punishment were important (Webster, as cited in Glenn, 1984). Manning (1979) reports that there were schools in which the master or mistress kept

order and taught without whipping children. Indeed, one school fined children for indiscretions (Johnson, as cited in Manning, 1979).

To alter the conditions of corporal punishment in their schools, a petition was submitted in 1669 and later in 1698-1699 to the members of the English Parliament on behalf of children. However, the petition did not become law and did nothing to slow the use of physical punishment (Freeman, 1979).

By the mid-nineteenth century, along with the prohibition of flogging of sailors in 1850 as well as concerns about slavery, treatment of the insane, and harsh punishment of criminals, a renewed interest developed in prohibiting corporal punishment of school children (Glenn, 1984; Manning, 1979). New Jersey became the first state to ban corporal punishment in their schools in 1867. It would be more than a century before another state, Massachusetts, in 1972--followed New Jersey's lead (Raichle, 1979).

### Contemporary Corporal Punishment

Parental use of spanking has been specifically exempted from laws which forbid child abuse (Straus, 1994); although, if it causes moderate physical or psychological harm it is considered abuse (Sedlak & Broadhurst, 1996). Normative corporal punishment is defined as two or three spansks with an open hand to the buttocks of a child (Larzelere, Schneider, Larson, & Pike, 1996). Parental use of either an

instrument (American Academy of Pediatrics, 1998) or the hand is considered abusive if at least moderate harm occurs, defined as physical evidence or psychological sequelae lasting more than 48 hours (Sedlak & Broadhurst, 1996).

Within the education system, use of a paddle is the customary technique (Hyman, 1990; Maurer, 1990). As of 1995, corporal punishment in schools was still legal in 23 states (Hyman, 1995). Physical punishment of children is not limited to spanking. In schools, children are usually hit with a paddle. This is a piece of wood that may be 3 feet long, 4-6 inches wide, and 1/2 to 1 inch thick (Friedman & Friedman, 1979). Modifications may be made to increase the effect; for example, some have holes drilled in them (Hyman, 1995). Hyman (1990) reported that schools have made children swallow noxious substances and extend themselves in physical exertion beyond their capability. In addition, others are locked in closets, or tied to chairs. Children have had their mouths taped and been stuck with tacks and pins (Hyman, 1990); others have been subjected to strip searches (Hyman, 1995).

There is no correlation between age and the severity of the punishment (Hyman, Clarke, & Erdlen, 1987). Generally, it is the younger children who are most frequently physically punished (Hyman & Wise, as cited in Hyman, 1995; Shaw & Braden, 1990). Punishment often reaches a peak in the junior high years and

decreases rapidly after that. There are at least two reasons for this. First, children of junior high age tend to be more rambunctious than those in senior high school; second, it is more daunting to hit a student who is of adult size, especially when there is more concern about retaliation (Hyman et al., 1987).

### Incidence

Knutson and Selner (1994) used a ten-year cross-sectional design and found that 83% of college students reported having experienced physical punishment during their childhood. The National Family Violence surveys conducted by Straus and associates (as cited in Straus, 1994) in 1975 and 1985, used a nationally representative sample of parents. According to these surveys, in 1975 95% of parents of three year olds reported they used corporal punishment. In 1985, this figure had declined by 5%; that is to 90%. Straus (1994) reported that in both 1975 and 1985, more than 80% of children between the ages of 4 and 9 received physical punishment, more than 60% of those between the ages of 10 and 12 were still experiencing physical punishment, by 14 years of age 40% were receiving physical punishment, and 25% of 17-year-olds received physical punishment from their parents.

In a later study, using Gallup survey data from a nationally representative sample, Straus and Stewart (1998) reported on the

incidence of corporal punishment in the home. Spanking on the buttocks with the hand was used with 32% of children under the age of two, 72% of children between the ages of 2 and 4, and 71% of children between 5 and 8 years of age. Parents were less likely to spank older children. In reports obtained from parents, forty-three percent of the children between 9 and 12, and 14% of the teenagers between the ages of 13 and 17 were spanked. It appears that the number of children who received corporal punishment at home declined between 1985 and 1995. However, the figures for 1975 and 1985 were for corporal punishment of various types and the percentages for 1995 were for spanking with the hand only (Straus, 1994; Straus & Stewart, 1998). Straus and Stewart (1998) reported that when all types of corporal punishment were taken into account, 94% of children between the ages of 3 and 4 were punished. This represents a slight reduction over the 99% incidence of corporal punishment by parents of 5-years-olds reported 40 years earlier (Sears, Maccoby, & Levin, 1957).

The frequency of corporal punishment at home is difficult to determine. Straus (1994) reported that 66% of children under the age of 6 were hit at least 3 times a week. It was also stated that of the adolescents who were subjected to corporal punishment, the frequency was 6 times a year as reported by their parents (Straus, 1994). In 1998, Straus reported that parents physically punished their 2-year-olds a minimum of 18 times during the previous year. He also stated that the

frequency estimates are almost certainly the result of underreporting given that parents are frequently not cognizant of how often they spank their children or may be reluctant to report the frequency (Straus, 1994; Straus & Stewart, 1998).

The Office of Civil Rights, a division of the U.S. Department of Justice, compiles statistics regarding various school issues. The number of children enrolled in school and the number who graduated from school are tabulated. Also included are data regarding the use of corporal punishment. Schools are required to report the number of children who received corporal punishment, which includes those who were paddled, spanked, or received another type of corporal punishment (see Table 2.1). However, because schools do not report the number of incidences (Office of Civil Rights, 1997), there appears to be a systematic underreporting of the amount of corporal punishment that actually occurs in the schools. These data include the following states in which there was no corporal punishment, as it was not permitted: Alaska, Connecticut, Hawaii, Maine, Maryland, Massachusetts, Michigan, Minnesota, Montana, Nebraska, Nevada, New Hampshire, New Jersey, North Dakota, Oregon, Rhode Island, South Dakota, Vermont, and Wisconsin (“The Last ? Resort” as cited in Richardson, Wilcox, & Dunne, 1994). The Office of Civil Rights (1997) and others (Gursky, 1992; Richardson, Wilcox, & Dunne, 1994) reported that states in the South and Southwest used more corporal

Table 2.1: National School Enrollment, Corporal Punishment, Suspension and High School Graduation for 1993-1994, by Gender and Ethnicity

United States	Ethnicity										Total	
	Native Am.		Asian/Pacific Islander		Hispanic		African Am.		Caucasian			
	Number	%	Number	%	Number	%	Number	%	Number	%		Number
<b>Enrollment</b>												
Male	227534	-*	816319	2	2786869	7	3642140	9	14430284	34	21903137	51
Female	217571	-	771805	2	2638116	6	3550598	8	13608784	32	20788174	49
Total	445105	1^	1568124	4	5425976	13	7193038	17	28039068	66	42691311	100
<b>Corp. Punish.</b>												
Male	5390	1	659	-	27922	6	140840	29	219206	46	394037	82
Female	1003	-	77	-	5084	1	40825	9	37324	8	84313	18
Total	6393	1	756	-	33006	7	181665	38	256530	54	478350	100
<b>Suspension</b>												
Male	28164	1	45022	1	295048	10	697331	23	1136717	38	2229232	72
Female	11387	-	14080	-	109907	4	333226	11	389485	13	858085	28
Total	39551	1	59102	2	404955	13	1030557	33	1555302	50	3087367	100
<b>H.S. Diploma</b>												
Male	11657	-	58072	2	113487	5	136636	6	863618	36	1183470	49
Female	12343	-	58527	2	123359	5	167204	7	879869	36	1241302	51
Total	24000	1	116599	5	236846	10	303840	13	1743487	72	2121772	100

\* less than 1%

^ percentages rounded to nearest whole number

Adapted from the Office of Civil Rights, 1997

punishment than did other parts of the United States (see Appendix A). In California, Illinois, Iowa, New York, Utah, Virginia, West Virginia, and Washington corporal punishment has been outlawed but these states reported some corporal punishment (Office of Civil Rights, 1997). The reason for this incidence may be that if teachers are attacked they may defend themselves even if the state has outlawed the use of corporal punishment (Hyman, 1990; Lawrence, 1998).

### Reasons for the Persistence of Corporal Punishment

Laws and legal decisions, as well as societal pressures, continue to provide justification for those who believe that physically punishing schoolchildren is appropriate. Some of the same reasons apply to the use of spanking by parents. These factors include tradition, religious beliefs, and geographical location. Ethnicity, gender, as well as parental income and education, also influence the likelihood that punishment will be administered.

The conditions that encourage the use of corporal punishment are complex. None of the factors exists in a vacuum. A variety of things contribute to the decision to physically punish a child. This section examines the various factors which support the use of corporal punishment by parents and educators.



## Tradition

Tradition begins with the sentiment, “It happened to me, and I turned out all right.” Parents find it difficult not to spank their children. Pressure from relatives, friends, neighbors, and occasionally, strangers encouraged parents to use spanking when a child misbehaves (Straus, 1994). In addition, most parents were spanked by their own parents and thus, they use the same parenting practices (Greven, 1991; Straus, 1994). Likewise, educators who experienced corporal punishment were frequently proponents of the practice in schools (Lawrence, 1998; Rust & Kinnard, 1983).

## Parental Support

As Greven (1991) posits, the physical punishment of children is so pervasive in our society, it is difficult to consider alternatives. Since most people in the United States experienced being spanked by their own parents, to suggest that it is inappropriate to hurt children by spanking may seem like an attack of one’s parents. In addition, given that most parents have used this punishment with their own children (Straus, 1994), to say that it is not a good way to manage their children creates cognitive dissonance; that is, it is difficult to deprecate the practice if one has used it and denouncing it would create mental conflict. Consequently, if one believes that a particular behavior is correct, one cannot also believe it to be inappropriate. The two

cognitions are dissonant with one another. Moreover, behavior must be consistent with cognition. Should either belief or behavior be inconsistent with cognition, cognitive dissonance exists. The internal pressure to resolve the dissonance depends on the importance of the issue involved. Cognitive dissonance may be resolved in one of two ways. Either the person can decide that the originally held belief is incorrect and it is appropriate to change philosophy and behavior. Conversely, the person can rationalize the original belief, decide that it is correct and maintain the behavior (Festinger, 1957). Cognitive dissonance may help explain both the use and support for corporal punishment.

Straus and Mathur (1996) investigated the prevalence of support for parental use of corporal punishment. Using the 1968 National Violence Survey, the General Social Surveys from 1986, 1988-1991, and the 1994 Gallup Survey, Straus and Mathur (1996) compared attitudes about corporal punishment administered by parents. The question analyzed was whether or not the respondent agreed or disagreed that children occasionally needed a “good, hard spanking” (p. 4). It was found that there was a steady decline in the rate of approval for corporal punishment in the home from 93.26% in 1968 to 83.38% in 1986, and 68.59% in 1994. This represents an overall reduction in approval rate of 24.67% over 26 years. In contrast, Buntain-Ricklefs, Kemper, Bell, and Babonis (1994) in their sample of Caucasian and

African American parents found that 87% approved the use of spanking. When Welsh (1978) questioned parents of youth who had exhibited delinquency, he found that 80% of African American and Puerto Rican parents approved of corporal punishment, while 40% of the Caucasian parents approved. This is in agreement with the finding that African American adults, not necessarily parents, approved of corporal punishment at a greater rate than did others (Ellison & Sherkat, 1993; Straus & Mathur, 1996). Buntain-Ricklefs et al. (1994) found African Americans to be more likely to approve of unusual, or emotional punishments, such as ridicule, than were Caucasian parents.

### Ethnicity

The actual application of corporal punishment may be effected by ethnicity; however, the association is unclear. Some studies have found that African American parents administered more corporal punishment than Caucasian parents (Straus & Stewart, 1998; Welsh, 1978), while other research found no differences (Straus, 1994), or found Caucasian parents more likely to use corporal punishment than were minority group parents (Straus & Moynihan, 1994). Caucasian and African American parents used more corporal punishment than Hispanic families (Escovar & Escovar, as cited in Straus, 1994; Vazsonyi & Flannery, 1997).

Students who are members of some ethnic groups are more likely to receive corporal punishment in school than are others. The data from several states, such as Arkansas, Arizona, and Oklahoma revealed that Native American schoolchildren received corporal punishment at school at a greater rate than did their peers. Nationally, African American children received 38% of the corporal punishment although they represented only 17% of the total population. Children of Hispanic descent received corporal punishment at about half the rate of their total enrollment. Pacific Islanders and Asian children received corporal punishment at a rate of less than 1% while their total enrollment was 4% of the population. Finally, 54% of those children punished were Caucasian although they represented 66% of the total population (see Table 2.1; Office of Civil Rights, 1997). McFadden, Marsh, Price, and Hwang (1992) found that Caucasian students were more likely to receive internal suspension as a disciplinary measure while African American students were more likely to receive corporal punishment and school suspension. African American children were more likely to be referred for disciplinary action and, when referred, their offenses were less severe in nature than those of Caucasian children (Shaw & Braden, 1990). These studies would seem to indicate that preferential treatment was given to Caucasian students.

## Income

One of the factors correlated with ethnicity is poverty. African American children and Hispanic children were more likely to experience poverty than their counterparts (U.S. Census Bureau, 1997). Although school administered corporal punishment occurred more often in areas where poverty is pervasive (Hyman, 1990); nevertheless, in one study socio-economic status (SES) was only marginally significant in the incidence of physical punishment in the home (Cohen & Brook, 1995), while in another study there was no relationship between the two variables (Straus & Moynihan, 1994). Another study found the middle-class was more likely to use corporal punishment than were the lower- or upper-classes (Straus and Donnelly, 1993). Recent studies reported an inverse relationship between SES and the incidence of physical punishment (Deater-Deckard, Dodge, Bates, & Pettit, 1996; Straus & Stewart, 1998); however, if the parents were young the effect of high SES was not significant (Straus & Stewart, 1998). With regard to attitude, Ellison and Sherkat (1993) found that income level did not significantly alter support of physical punishment in the home; yet Grasmick, Morgan, and Kennedy (1990) determined that families with greater income were less supportive of corporal punishment in schools.

Higher SES was a factor in the lack of support for corporal punishment in the schools and schools in areas of lower SES

administered more corporal punishment. The findings regarding support and parental use of corporal punishment relative to SES were mixed.

### Parental Education

Most researchers (Ellison & Sherkat, 1993; Grasmick et al., 1992) report an inverse correlation between education and corporal punishment. Yet, when assessing support for parental use of corporal punishment, Buntain-Ricklefs et al. (1994) found no differences in educational level and parental acceptance. In contrast, Straus and Mathur (1996) found an inverse relationship between education level and support of corporal punishment. The lack of congruence between these studies may be due to the methodologies used in the two studies. Straus and Mathur divided their sample into 4 income levels, whereas Buntain-Ricklefs et al. used only two educational levels. Moreover, in the latter study, the attainment of a high school diploma satisfied the criteria of high education, placing many with a relatively low education in the high education group. Nevertheless, there is no agreement on the association between parental education and the degree of approval in the use of corporal punishment in the home.

## Gender and Age

Not only are more boys than girls struck at school (Office of Civil Rights, 1997), but more boys are struck at home as well (Flynn, 1996; Straus, 1994; Straus & Stewart, 1998). This discrepancy may be valid as boys tend to be more aggressive than girls (Maccoby & Jacklin, 1974).

The data from the Office of Civil Rights (1997) demonstrated that nationally, of those who received corporal punishment in the schools, 82% were boys and 18% were girls (see Table 2.1). An examination of the data for the rates of suspension provided evidence that boys may have received more than their share of the corporal punishment as 72% of those suspended were boys, while 28% were girls. If the students were receiving punishment equally, more girls would also be physically punished as the proportion of girls who were suspended was fully 10% greater than it was for corporal punishment.

Men approved of the use of corporal punishment more than women (Flynn, 1996; Grasmick et al., 1992). However, mothers were more likely to administer it (Straus & Moynihan, 1994; Straus & Stewart, 1998); with the exception that adolescent boys (Straus & Donnelly, 1993) and children between the ages of 9 and 12 (Straus & Stewart, 1998) were equally likely to be struck by either parent. In schools, it was found to be far more likely that the paddling was done

by a man (Hyman, 1990); this was especially true for older students (Hyman, Clarke, & Erdlen, 1987).

### Geographical Location

The area where a child lived was also important in predicting the likelihood of exposure to corporal punishment. Children who lived in the South were more likely to experience physical punishment than those living in other parts of the United States (Flynn, 1996; Office of Civil Rights, 1997). The only southern state that has prohibited the use of corporal punishment in the schools is Virginia (Richardson, Wilcox, & Dunne, 1994).

Schools in rural areas were more likely to administer corporal punishment than those in urban areas (Hyman, 1990). People who lived in rural areas also supported corporal punishment to a greater extent (Ellison & Sherkat, 1993).

### Parenting Experts

Books on child-rearing have provided a certain amount of approval for the physical punishment of children. Fitzhugh Dodson (1970), in How to Parent, wrote about various methods to assist children in learning discipline, such as natural consequences, time-out, positive reinforcement, and extinction techniques. He also advocated spanking when a child's behavior has frightened or so angered the



parent that he or she decides to strike the child. Such spanking should occur in anger, not in a “cold-blooded” manner later (p. 227). Dodson differentiated between the “ ‘right’ kind of spanking and a ‘wrong’ kind” (p. 226, emphasis in the original). The first is administered with an open hand and is one, or a few quick swats to the child’s buttocks. The wrong kind is described as

...a cruel and sadistic beating. This fills the child with hatred, and a deep desire for revenge. This is the kind that is administered with a stick or strap or some other type of parental ‘weapon.’ Or it could also mean a humiliating slap in the face. (p. 226)

Dodson provided abundant information and examples of techniques other than corporal punishment for training children. He also stated that spanking will only temporarily alter behavior. Nonetheless, he did promote the occasional use of physical punishment.

Dr. Benjamin Spock was, without doubt, the most well-known authority on parenting. His views about punishment changed little through the years. In his 1946 edition of The Common Sense Book of Baby and Child Care he stated, “I don’t think [a]...parent should feel ashamed or a failure because he...uses punishment occasionally. But I disagree...that punishment is a good regular method of controlling a child” (Spock, 1946, p. 270). In 1957, Dr. Spock said, “...we ought to realize that [punishment] is **never** the main element in discipline--it’s only a vigorous additional reminder that the parent feels strongly

about what he says” (p. 332, emphasis in the original). He continued, saying,

...the parent is to keep the child on the right track by means of firmness. (You don't sit by and watch a small child destroy something and then punish him afterward.) You come to punishment...once in awhile when your system of firmness breaks down. (p. 333)

He also suggested that parents who were frequently punishing and reprimanding their children were parents who were not allowed as children to believe themselves to be “basically good and well-behaved” (p. 335) and therefore, they cannot believe that their own children can be so (Spock, 1957). In the 1985 addition of his child care book, there was little that was different from that stated in 1957 (Spock & Rothenberg, 1985). From 1946-1985, Dr. Spock recommended against “legalistic, ‘take-the-consequences’” (Spock, 1946, p. 271) punishment prior to 3 years and suggested using it sparingly before 6 years. Instead, Spock concluded that it is necessary for the parent to ensure that the young child not get into situations which would bring difficulties for him or her (Spock, 1946, 1957; Spock & Rothenberg, 1985). That is, instead of relying on a spank to keep them safe, other means should be employed to make certain they are not in danger.

These types of extreme situations are precisely those for which Lickona (1983) believed a quick spanking appropriate although he is not an advocate of routine physical punishment. He suggested that physical punishment should not be the first response, and should be

limited to a single swat with no more than 3 or 4 swats delivered with the open hand to the buttocks of a child. Furthermore, the child should be between 2 and 5 years of age.

Leach (1997) promoted a developmental approach to child rearing. Children should be recognized as immature, inexperienced, and in need of training. She suggested that allowing children to suffer the logical consequences of their ill-advised behavior is sufficient to encourage learning. In addition, parents should avoid inadvertently reinforcing undesirable behavior.

An agreement was found among child care experts that behavior is not permanently changed through the use of corporal punishment (Dodson, 1970; Leach, 1997; Lickona, 1983). Although corporal punishment may temporarily restrain a child from doing something harmful (Dodson, 1970; Lickona, 1983), it is more important to teach a child to have self-discipline (Dodson, 1970; Leach, 1997). A major problem with spanking is that once spanking is used, it is likely to be used again, except even harder (Leach, 1997; Lickona, 1983). In many instances fear and resentment are created in the child experiencing corporal punishment (Dodson, 1970; Leach, 1997; Lickona, 1983; Spock, 1988). If some corporal punishment occurs it should be infrequent and spontaneously used in anger (Dodson, 1970; Leach, 1997; Spock, 1957), and should be followed with an apology for losing one's temper (Leach, 1997) if, upon reflection, an apology is

called for (Dodson, 1970). Habitual use of corporal punishment demonstrates that “might makes right” (Spock, 1988, p. 151), and increases violence (Dodson, 1970; Leach, 1997; Lickona, 1983; Spock, 1988).

### Religious Beliefs

Religion plays a very important role in the lives of many people and often influences the rearing of their children. The cohesiveness of Protestant fundamentalist churches permits a great deal of influence on their members (Grasmick, Bursik, & Kimpel, 1991). Twice-born Christians, a distinction made in some denominations which refers to those who have made a conscious decision to accept Jesus Christ as their Savior and are thus said to be born again as Christians (John 3: 3-7), hold that a child’s nature is sinful (Dobson, 1976; Greven, 1991) and his or her will must be broken (Dobson, 1976; Fugate, 1996; Greven, 1991). Basically the goal is that the child must follow through with requests without question the first time something is asked of him or her (Fugate, 1996). The reason for training a child to obey in a reflexive manner is the belief that without learning unquestioning obedience to parents, the child will not learn to obey God and thus, his or her soul will be lost (Fugate, 1996; Greven, 1991). The child is assisted both in becoming a responsible adult and is simultaneously

prepared to subject himself or herself to the will of God. This is accomplished by demanding compliance to parental demands.

Fugate (1996) suggested that parents should not baby proof their home as the child must learn the meaning of the word “no,” which will occur when he or she learns “that it is painful to disobey his parents” (p. 129). To accomplish this, a baby of just 6 months who is squirming while being diapered is to first be told “no” and held still for a moment. If the behavior continues he or she is to be told “no” and is to be hit lightly with a switch. “An angry cry and continued squirming may indicate a strong-willed child who will require more pressure in both intensity and frequency” (p. 128). Once the child is diapered he or she should be held and comforted.

A program of formal chastisement is implemented in order to bring the child under the parents’ will. Whipping with a rod of various sizes and lengths, depending on the age of the child, is expected to cause pain and stripes, as well as welts and bruising at times. The goal is not to cause these things, although they are a by-product, but rather to force the “child’s obedience to the will of his parents” (Fugate, 1996, p. 172). Chastisement is not to be used for every misbehavior but to extinguish the child’s rebellion (Fugate, 1996).

Although James Dobson (1992) and Fugate (1996) agreed that chastisement must be painful to be effective, they disagreed regarding appropriate ages for both starting and stopping the use of corporal

punishment. While Dobson (1987, 1992) maintained that a child should not be spanked before about 18 months and most spanking should have ended by the age of 6, Fugate (1996) considered a 6-month-old baby old enough to learn the meaning of the word “no” and believed that children in their teens should receive chastisement if it was necessary to gain or maintain control. In contrast, Dobson (1992) was adamant that teenagers should not be physically punished. Dobson (1992) and Fugate (1996) agreed that children are not to be hit in anger. Instead, there is to be a chastisement ritual which would last a minimum of 10 to 15 minutes (Hyles, as cited in Greven, 1991) and consists of the use of a flexible rod which will cause stinging pain to the buttocks (Fugate, 1996). Sets of three strikes are recommended, allowing the child time to consider the lack of respect and compliance to the parents’ will. If the child is ready to accept guilt and ask for forgiveness, the chastisement will cease; if not there will be another set of three strikes. This pattern is to continue until the child ceases his or her rebellion. Afterwards, there is not to be a lot of crying (Fugate, 1996), but if crying continues for more than 2 to 5 minutes then the parent should “require him to stop the protest crying, usually by offering him a little more of whatever caused the original tears” (Dobson, 1992, p. 70). After the completion of the chastisement, the parent is to offer forgiveness (Dobson, 1992), the child is to ask God for

forgiveness (Fugate, 1996; Greven, 1991), and the parent is to love and comfort the child (Dobson, 1992; Fugate, 1996).

Moderate approaches to Christian child rearing have been suggested. Foster and Fay (1990) instructed that children should not be spanked after the age of 3 years, nor before the age of language acquisition. The infraction must only be one of basic commands and should only be carried out by a person who can continue to whisper after applying no more than three strikes to the buttocks. Mitchell and Mitchell (1997) advised that parents should not scream or yell, nor use physical punishment or coercion.

Given the fact that some prominent Christian child care authorities have indicated support for physical punishment, it is not surprising that in a study conducted in one of the Bible Belt states, Grasmick et al. (1991) found that 82% of their participants approved of corporal punishment administered by parents, and 66% supported its administration in schools. They reported that religiosity and a belief in a punitive God were significantly correlated with support for corporal punishment; moreover, belief in the Bible as literal truth had the largest correlation of the three variables. Another study, also conducted in the South, found that beliefs in the literal truth of the Bible, the sinful nature of humankind, and the importance of punishing sinners were the best predictors of support for corporal punishment. It was adherence to these core beliefs, not an association

with a conservative Protestant congregation, that was found to predict support of corporal punishment. (Ellison, Bartkowski, & Segal, 1996; Ellison & Sherkat, 1993). Thus, in these studies the punitiveness of God and the belief that the Bible should be accepted literally were associated with support for corporal punishment. This effect was present even when the variable of authoritarian parenting was controlled (Ellison et al., 1996). In contrast, Grasmick et al. (1992) found that Fundamentalist Protestant affiliation itself was associated with support for corporal punishment in the schools.

### Legal Support

All states in the United States permit spanking of children by parents (Straus, 1994). Twenty-three states and the District of Columbia permit corporal punishment in schools (Hyman, 1995). In contrast, most Western democracies and the former Soviet block have prohibited the use of corporal punishment in their schools (Hyman, 1990; British Broadcasting Corporation, 1998). Furthermore, Austria, Cyprus, Denmark, Finland, Italy, Norway, and Sweden have outlawed the use of spanking by anyone, including parents (Riak, 1996).

Although there are a number of state rulings which have upheld the practice in the United States, the most influential decision in the continued use of corporal punishment in the schools was the *Ingraham v. Wright* decision by the United States Supreme Court in



1977. James Ingraham, a Dade County, Florida boy, was one party to the suit which ultimately reached the U.S. Supreme Court. The other boy was Roosevelt Andrews. They were both students at Drew Junior High School. James was reprimanded for failure to leave the auditorium stage as quickly as the teacher wished. He was first sentenced to 5 licks, and later the sentence was increased to twenty; however, James stated that his punishment exceeded 20 licks. Two administrators held him down while a third administered the paddling.

When James' mother saw his buttocks, she promptly took him to the hospital where he was found to have a hematoma, a swelling containing blood. He was medically excused from activities for a total of 11 days and was seen by physicians at least 3 times. The size of the hematoma was six inches in diameter on the 8th day and was oozing fluid (Lee, 1979).

On the day of Roosevelt Andrews' paddling, one of 10 he received that year, he was en route to his class with 2 minutes to spare. An educator stopped him, told him he would be late, and sent him to Mr. Barnes, an assistant to the principal, who was on his way to the boys' bathroom, paddle in hand. Although Roosevelt objected to the assessment that he would be late to class, his objection was disregarded. Mr. Barnes paddled every boy in the bathroom. Believing the punishment unjust, Roosevelt did not cooperate. Mr. Barnes then hit him "on the backsides" (p. 177). Roosevelt stood up, was pushed,

and then hit on the leg, back, arm, and the back of the neck. Roosevelt was administered corporal punishment again within ten days, despite the fact that his father protested his punishment at a meeting with the school administrators. He was struck on his buttocks and wrist, resulting in the loss of the use of his wrist and arm for a period of 7 days (Lee, 1979).

A legal suit was brought on behalf of Ingraham and Andrews for personal damages with a third count being brought on behalf of the class of all students at Drew Junior High, submitting that corporal punishment was unconstitutional. The suit was originally filed on January 7, 1971 (Lee, 1979). The case was decided by the U. S. Supreme Court in 1977. Despite the fact that there were no laws or rulings which permitted the severe corporal punishment as was practiced at Drew Junior High (Lee, 1979), the court found that there was no cause to deny the use of corporal punishment by schools (Piele, 1979).

The Supreme Court decided in a 5-4 split that there was no case for cruel and unusual punishment, the Eighth Amendment. Such protection is reserved for criminals who do not have the community oversight that is present in the school environment. The court also found that although students did have a liberty right, the Fourteenth Amendment did not require due process procedures prior to the implementation of corporal punishment (Lee, 1979).

The result of this ruling is that if legal action is brought against any educator due to striking a student, the educator invokes the ruling in *Ingraham v. Wright*, providing support for the teacher or administrator and his or her use of corporal punishment. This ruling has made it virtually impossible to bring a successful suit against educators in cases of severe corporal punishment (Hyman, 1990). State laws protect teachers too. For instance, the law in Texas permits educators to paddle students as long as it does not result in permanent injury or death (Friedman, & Hyman, 1979; Straus, 1994). The law in many states permits a degree of force in the application of corporal punishment to schoolchildren that, if applied by anyone else, including parents, would be cause for charges of child abuse (Hyman, Clarke, et al., 1987; Sedlak & Broadhurst, 1996).

### Consequences

There are multiple consequences to the application of physical punishment to children's bodies. These consequences include the medical problems that sometimes ensue as a result of striking a child or using another form of punishment. Psychological sequelae; notably, depression, post-traumatic stress disorder, and anti-social behavior, are often present.

## Medical Consequences

When there is a physical assault on a child's body by someone who is much larger and stronger, it is easy for things to go awry and create injury. There have been whiplash injuries, sciatic nerve damage, and CNS hemorrhage resulting from corporal punishment (Friedman, as cited in Williams, 1979). One child suffered rupture of his testicles following a paddling (Hyman, 1995). A high school girl, paddled during menstruation, began hemorrhaging (Hyman, 1990). If the force of the paddling is sufficient, damage may also occur to the lower spine and coccyx. A large number of nerves pass through the sacrum, the large bone at the lowermost part of the spine. Fracture of the sacrum can result in difficulties with bowel and bladder functioning. It can also cause problems with sexual function, including the loss of the ability to attain an erection (Taylor & Maurer, 1998). Striking the buttocks region can create sexual dysfunction which is not limited to tissue damage, it also may create sado-masochistic desires as pain is linked to sexual arousal through the striking of an erogenous area (Johnson, 1996; Taylor & Maurer, 1998).

Corporal punishment is not limited to paddling; in fact some educators are very creative in designing punishment. Maurer (1979, 1998) reported that two boys were required to either eat the cigarettes they were caught with or take a paddling. They ate the cigarettes. This resulted in both becoming ill, one boy required hospitalization due

to aggravation of an ulcer. Coaches tend to require additional physical exertion and at times it is extreme. United Press International (UPI, as cited in Maurer, 1979) reported on a college freshman who died as a result of the punishment drills his coach required. During the course of multiple drills, both running and calisthenics, witnesses watched as he fell several times, and was ordered to do more drills. Obviously, most corporal punishment does not result in these dire consequences; however, frequently there is bruising and an assortment of welts (Hyman, 1990, 1995; Maurer, 1979) and there is always the potential for severe injury.

### Psychological Consequences

The intentional infliction of pain upon a child by a parent who is loving and nurturing creates conflict and may result in greater psychological distress (Turner & Finkelhor, 1996). The affect generated will dominate over any cognitive rationalization (Zajonc, 1980). In addition, the child is frequently not permitted to express his or her anger (Dobson, 1992) and thus it is repressed. Conscious memory of punishment may also be lost, especially if it occurred very early in the child's life (Greven, 1991). In any case, the memory of the punishment may be repressed since it is difficult to reconcile the use of pain by a loved one. Despite the repression, the rage remains. Thus,

corporal punishment is not without psychological distress to the recipient.

Researchers have reported a greater incidence of the internalizing disorders of anxiety and depression (Luby & Morgan, 1997; Turner & Finkelhor, 1996), post-traumatic stress disorder (Hyman, 1990; Krugman & Krugman, 1984), as well as anti-social behavior (Cohen & Brook, 1995; Straus, Sugarman, & Giles-Sims, 1997) among those who have experienced corporal punishment. Other types of psychopathology; such as, borderline personality disorder and dissociative identity disorder, have been diagnosed as resulting from violence toward children. However, the level of violence in these cases is related to unequivocal child abuse rather than corporal punishment (Herman, 1995; Terr, 1995). Anxiety, depression, post-traumatic stress disorder (PTSD), and anti-social behavior do appear in the literature as related to corporal punishment. Yet an investigation of the residual effects of corporal punishment in young adults has been neglected in the scholarly literature. Psychological punishment; that is, ridicule and denigration, has also been largely ignored. The psychological consequences of this emotional stressor will be addressed separately.

In researching the topic of psychological sequelae as it is associated with punishment, the focus was on studies that examined corporal or psychological punishment rather than abuse. However,

due to a lack of pertinent literature in some cases it was necessary to draw on studies in which abuse was the independent variable.

### Anxiety and Depression

Although anxiety and depression are commonly experienced, they have been the least investigated with regard to the effects of corporal punishment. Of the two, anxiety has received less attention. PTSD, although an anxiety disorder, will be examined separately.

Luby and Morgan (1997) investigated the relationship between corporal punishment and psychopathology among young children. The children, whose mean age was 3-1/2 years, exhibited internalizing disorders at a rate of 24%.

A few studies examined the relationship between aggression or punishment and anxiety or depression in middle childhood. Boivin and Vitaro (1995) found that the boys who were rated more aggressive by their peers were less socially anxious. Other research revealed that mothers of boys who were high in impulsivity and low in anxiety in kindergarten were more controlling of their sons 5 years later. However, these mothers were not more punitive than the mothers whose sons exhibited low impulsivity and high anxiety (Tremblay, 1995). This pair of studies seems to indicate that boys likely to exhibit externalizing behavior were also likely to be low in anxiety. The Boivin and Vitaro (1995) study did not address the variable of

punishment, while Tremblay (1995) found that there was no difference in the use of punishment between the low and high impulsivity groups. This finding may indicate that punishment is not dependent on externalizing behavior. In a study that examined the effect of father perpetrated physical abuse, McCloskey, Figueredo, and Koss (1995) reported anxiety and major depression among the children.

Durant, Getts, Cadenhead, Emans, and Woods (1995) determined that depression was correlated with corporal punishment among adolescents. Credence for this finding is found in a study by Turner and Finkelhor (1996), who found that while 30% of their 10- to 16-year-old, male and female sample experienced corporal punishment in the previous year, only 7 percent reported that it was frequent, which means that corporal punishment occurred at least once a month. Depression among this high frequency group was three times more prevalent than among those who reported no corporal punishment. A study (Straus & Kantor, 1994) involving retrospective reports from adults found that depression and a greater consideration of suicide were present in those who had experienced corporal punishment as adolescents. Moreover, the effect was stronger with a greater incidence of physical punishment. Women had a higher depression score than men; however, both increased in relation to the incidence of corporal punishment experienced in adolescence (Straus, 1995).



## Post-traumatic Stress Disorder

According to the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders-4th edition (1994) PTSD may develop after exposure to an extreme stressor which threatens personal physical integrity, creating intense fear, helplessness, or horror (p. 424). It is not necessary that the trauma be one outside usual human experience (Breslau & Davis, 1987; Brewin, Dalgleish, & Joseph, 1996; Davidson, 1994; McFarlane, 1991). Protracted exposure to physical punishment, or the threat of punishment, can cause the development of PTSD (Herman, 1995; Rossman, Bingham, & Emde, 1997). According to Terr (1995), traumas are not only extreme events that take place once; they are "also those marked by prolonged and sickening anticipation" (p. 303). Individual differences must be taken into account when determining the severity of traumatic stressors (Davidson, 1994; Horowitz, Weiss, & Marmar, 1987). Those persons who are younger (Rossman et al., 1997; van der Kolk, 1985) or without a supportive social network (Pynoos, 1994) are more likely to develop PTSD.

The incidence and frequency of physical punishment is more pervasive than many believe it to be (Hyman, 1990; Office of Civil Rights, 1997; Straus, 1994; Straus & Stewart, 1998). Children are captive in both the home (Herman, 1995) and school (Hyman, 1990, 1995) and are therefore subject to the demands of parents or teachers

and administrators. Herman (1995) described two things that can make a situation more fearful. They are the unpredictability of uproar and a series of unimportant rules inconsistently applied. Herman (1995) suggested that in a situation in which the recipient of pain is dependent on the perpetrator, more damaging psychologically than unremitting fear, is fear interspersed with kindness. When the perpetrator is a caretaker, there is an increased violation of security as the child's support system is breached (Brewin, Dalgleish, & Joseph, 1996; Pynoos, 1994; Pynoos, Steinberg, & Goenjian, 1996).

Although PTSD is very similar in adults and children (Lyons, 1987; McNally, 1993), its expression may be altered. Developmental stages must be considered not only at the moment of trauma but also as the child's age increases (Pynoos et al., 1996; Terr, 1995).

The criteria for PTSD comprises symptoms in three areas: Reexperiencing the trauma, hyperarousal, and avoidance. According to Pynoos (1994) reexperiencing the trauma is the primary method of processing it. Reexperiencing phenomena include dreams or nightmares of the experience, flashbacks, play reenactment, and physiological reactance. Reenactment was evident in play (Hyman, 1990; McNally, 1993; Pynoos, 1994; Pynoos et al., 1996; Schwarz & Kowalski, 1991; Terr, 1984) and behavior (Pynoos et al., 1996). Frequently, children drew pictures depicting their trauma (Pynoos, 1994; Terr, 1995). Another form of reexperiencing, dreaming of the

trauma, was common in children (Hyman, 1995; Krugman & Krugman, 1984; McNally, 1993; Terr, 1982, 1984). However, Terr (1995) reported that children under five did not dream of their trauma. Flashbacks were reported as part of the symptomatology among children (McNally, 1993) and adolescents (Pynoos, 1994). In contrast, Hyman (1990) found no flashbacks due to school trauma and Terr (1982) did not find flashbacks among the children of the Chowchilla kidnapping. Hallucinations (McNally, 1993) or other methods of reexperiencing the trauma (McNally, 1993; Pynoos et al., 1996) were evident in children. Cues that reminded the person of the trauma caused emotional distress (McNally, 1993; Pynoos et al., 1996; Terr, 1982) or a physiological reaction (McNally, 1993; Schwarz & Kowalski, 1991). The avoidant criteria was expressed in loss of interest in previously enjoyed activities, emotional estrangement, and a belief that a normal future was unlikely. Avoidance was expressed in a lack of interest in usual activities (Krugman & Krugman, 1984; McNally, 1993; Pynoos, 1994; Rossman et al., 1997; Schwarz & Kowalski, 1991; Terr, 1984); such as, a lack of desire to enjoy a previous physical closeness to a parent (Terr, 1982) or a change in play emphasis (Terr, 1984). There was also a restricted range of affect (McNally, 1993; Terr, 1995), or a sense of foreshortened future (McNally, 1993; Schwarz & Kowalski, 1991); that is, a failure to construct life wishes or a belief that they would die early (Terr, 1982, 1984). Hyman (1990) and Terr (1982, 1984) indicated that

amnesia was not a part of the symptom profile of PTSD in children; conversely, McNally (1993) reported that amnesia did occur. Children withdrew (Hyman, 1990), developed estrangement, and were avoidant (Hyman, 1995; Krugman & Krugman, 1984; McNally, 1993; Pynoos, 1994; Rossman et al., 1997; Terr, 1982, 1984). The symptom of hyperarousal was demonstrated in an exaggerated startle response, sleep difficulties, aggressiveness, and poor concentration. An exaggerated startle response was reported (McNally, 1993; Pynoos, 1994; Pynoos et al., 1996; Terr, 1982, 1984); an example given by Terr (1982) was that of children hiding when they unexpectedly encountered familiar people. In addition, children experienced sleep difficulties (Krugman & Krugman, 1984; McNally, 1993; Pynoos, 1994; Schwarz & Kowalski, 1991; Terr, 1982, 1984), including sleep walking, sleep talking, night terrors (Hyman, 1990; Pynoos et al., 1996), and bed wetting (Hyman, 1990; Terr, 1984). Some of the hyperarousal symptomatology was expressed in changes in personality; such as, fearfulness, thrill-seeking, or aggression (McFarlane, Policansky, & Irwin, 1987; Pynoos et al., 1996; Terr, 1982, 1984), although these were more often a part of the symptomatology of older children (Pynoos, 1994). Terr (1984) reported poor concentration and distractability in school and some children became underachieving (McFarlane et al., 1987; Terr, 1984).

Terr (1995) noted that if a child had not previously experienced trauma prior to its unexpected one-time occurrence, memory of it was retained, assuming that the child was at least 28 to 36 months of age; although retrieval of the memory might be dependent on the emotional state of the child (Perry, 1997; Whitfield, 1995). Trauma that was repeated and was chronically present in the child's life resulted in incomplete memories (Terr, 1995; Whitfield, 1995). In addition, PTSD had a different presentation when it was due to chronic traumatic experiences. Psychic numbing and guilt were more prominent. There was dissociation (Pynoos, 1994; Pynoos et al., 1996; Terr, 1995) and self-hypnosis (Terr, 1995). Rage or extreme passivity were present (Pynoos, 1994; Terr, 1995).

### Anti-social Behavior

Aggression has been found to be a stable characteristic, with a stability that is similar to that of intelligence (Huesmann, Eron, Lefkowitz & Walder, 1984; Olweus, 1979). The link between aggression and punishment has been studied a great deal. There are conflicting viewpoints both in the assessment of a link and the degree of association. Some have suggested that punishment is undoubtedly the cause of aggression (Cohen & Brook, 1995; Straus, 1998; Straus et al., 1997), while others suggest that the relationship between punishment and aggression is more ambiguous (Baumrind, 1967, 1971;

Larzelere et al., 1996). An examination of these viewpoints and the supporting evidence follows.

The constructs of anti-social behavior, criminality, and aggression include common elements. Researchers concluded that these constructs are not necessarily the same (Kandel, 1992; Straus, 1994) despite the fact that all involve hostility. Given that there is evidence (Browne & Hamilton, 1998; Luby & Morgan, 1997; Ritchie, 1983; Straus et al., 1997) that all are correlated with the experience of physical punishment in childhood, they will be grouped together here.

Evidence of aggressiveness is present in young children. Luby and Morgan (1997), studied children between the ages of 9 and 70 months (Mean, 42 months) and reported that 65% of their sample were corporally punished. Externalizing disorders were found significantly more often in the corporally punished group than in the group whose parents reported not using corporal punishment. Children who had been spanked at home prior to kindergarten were significantly more aggressive toward their peers at school than those who had not been spanked (Strassberg, Dodge, Pettit, & Bates, 1994; Weiss, Dodge, Bates, & Pettit, 1992). Bates, Pettit, and Dodge (1995) found that aggressiveness in kindergarten predicted aggressiveness in first grade. Furthermore, a punitive family environment predicted aggressiveness in kindergarten but did not predict aggressiveness in first grade when kindergarten aggressiveness was statistically controlled. Weiss et al.

(1992), in addition to the finding that corporal punishment and later aggression were linked, also found that the experience of corporal punishment was related to difficulty appropriately assessing social cues, misinterpreting them as being hostile and responding in an aggressive manner. In an earlier study, Kagan and Moss (as cited in Olweus, 1979) found that aggression present between 2 and 3 years of age might be predictive of aggression in early adulthood. More recently, Cohen and Brook (1995), in a longitudinal study of children aged 1 to 10 at time 1, concluded that children who received the most punishment at home were twice as likely to have conduct disorder at time 2 (9 to 18 years of age), while at time 3 (11 to 20 years old) the odds were increased to nearly 4 to 1, compared to those who did not receive corporal punishment.

In a longitudinal study of 6- to 9-year-olds, Straus et al. (1997) controlled for prior evidence of anti-social behavior. Between time 1 and time 2, there was a difference in anti-social behavior of 1 standard deviation between the children whose parents reported frequent spanking and those children who were not spanked. Anti-social behavior at home in the 4th grade was indicative of anti-social behavior at school a year later (Ramsey, Patterson, & Walker, 1990) and these students were at greatest risk for delinquent behavior in early adolescence (Patterson & Yoerger, 1995). Moreover, the aggression evident in young children was predictive of aggression in adulthood

(Huesmann, Eron, Lefkowitz, & Walder, 1984; McCord, 1979; Patterson & Yoerger, 1995). McCord (1991) found that sons who experienced corporal punishment from their non-criminal fathers were nearly twice as likely to be adult criminals as sons whose fathers did not use corporal punishment. However, if the father was a criminal and used corporal punishment the odds of the son being an adult criminal were 3 to 1.

Although adolescent physical punishment was found to be significantly related to teenage delinquent behavior, it was not related to adult criminality (Laub & Sampson, 1995). Yet, Straus (1991) reported that corporal punishment in adolescence was associated with anti-social behavior that continued into adulthood. Straus and Yodanis (1996) and Straus (1991) also found a positive correlation between corporal punishment during adolescence and later spousal assault. A relationship between the experience of corporal punishment as a child and violence toward the parents during adolescence was found by Browne and Hamilton (1998). There was a correlation between delinquent behavior and parenting that was high on physical and verbal punishment (Patterson & Yoerger, 1995; Simons, Wu, Conger, & Lorenz, 1994). These studies agree that there is a relationship between criminal behavior and punitive parenting techniques.

In contrast, research supported the use of moderate physical punishment as an appropriate tool to address children's misbehavior.



Larzelere and Schneider (as cited in Larzelere, 1993) found that spanking or slapping of the hand, combined with reasoning was effective in “increasing the delay until the next misbehavior recurrence” (p. 144). A later study by Larzelere and associates in 1996 demonstrated the use of both punishment and reasoning together to be more effective in delaying the reoccurrence of toddler misbehavior than either punishment or reasoning used alone. Furthermore, corporal punishment (e.g., spanking, slapping) combined with reasoning were found to be more effective than non-corporal punishment (e.g., time out, loss of privileges) and reasoning in delaying toddler fighting. Baumrind (1989) agreed that “some show of force is often necessary for the voice of reason to be noticed” (p. 363). According to Baumrind (1997), spanking is not violent and is a normative part of parenting young children. Baumrind (1968) pointed out that although “punitive, forceful measures” (p. 261) were an essential part of the authoritarian home, the use of spanking was nearly universal among the participants in her research and was not considered in her conclusions regarding permissive, authoritative, and authoritarian parenting styles (Baumrind, 1997). Larzelere (1993) maintained that while there is support for moderate punishment, the support is confined to children from 2 to 6 years of age. It may be that negative effects leading to anti-social behavior are due to continued use of corporal punishment past the pre-school period.

Cultural differences may also be a factor in the effects of corporal punishment. Deater-Deckard et al. (1996) found that increased amounts of physical punishment were positively related to more aggressive behavior but only for Caucasian children. Although not significant, the relationship was negatively correlated for African American children. In contrast, a study comparing Caucasian and Hispanic youths whose behavior was delinquent found that, whereas Caucasian parents used significantly more punishment, the rates of delinquent behavior were higher for Hispanic adolescents (Vazsonyi & Flannery, 1997). Clearly, there is not a direct relationship between the use of physical punishment and the manifestation of anti-social behavior.

### Consequences of Psychological Punishment

Psychological punishment involves the denigration of a human being. Belittling someone deprives them of dignity (Hart, Germain, & Brassard, 1987). Definitions of emotional abuse are ill-defined (Egeland & Erickson, 1987; Garbarino & Vondra, 1987), but the effect of vilification is a loss of self-esteem (Krugman & Krugman, 1984) which in turn may lead to delinquent behavior (Lawrence, 1998). Furthermore, vilification may result in the impairment of the ability to develop and sustain social relationships. Cognitive functioning may also be compromised as the person attempts to function despite the

pain and fear resulting from psychological punishment (Navarre, 1987).

Exposure to ridicule has been found to be related to several psychological disorders. Briere and Runtz (1990) found that undergraduate students who reported previous parental psychological abuse had low self-esteem. Braver, Bumberry, Green, and Rawson (1992) investigated the effects of physical, sexual, and psychological abuse. They discovered no significant differences between those who had experienced psychological abuse only and those who experienced some combination of abuse which included psychological abuse. For those participants who were abused in any manner, they found evidence of depression, borderline personality disorder, and generally compromised psychological functioning. Similarly, Egeland and Erickson (1987) found that there were no differences in the choleric and noncompliant attitudes of the children who had experienced physical abuse compared with those whose abuse was psychological. Krugman and Krugman (1984) found that both psychological and physical punishment in the classroom were linked to symptoms of PTSD. Another study discovered a link between a childhood history of emotional abuse and later physical violence against the parents (Browne & Hamilton, 1998). Kosson, Steuerwald, Newman, and Widom (1994) found a negative correlation between the amount of yelling or criticism endured as children and indicators of socialization,

which was related to anti-social behavior. Clearly, psychological punishment is related to impaired functioning.

### Theoretical Issues

#### Operant and Classical Conditioning

Operant conditioning, developed by B. F. Skinner, is the theoretical basis for the use of punishment in the control of children. Fear is classically conditioned, then instrumentally avoided. Learning theory proposes that incorrect behavior, if punished consistently and accurately, will cease (Houston, 1986).

In using operant conditioning, the difficulty lies in punishing each and every time and confining the fear to the appropriate target, that of the misbehavior. If the punishment is carried out on a varied schedule, the undesirable behavior is strengthened (Houston, 1986).

Behavior can be extinguished if punishment is applied each time an undesirable behavior occurs. This type of conditioning does work with humans. It can be seen quite clearly in the process of learning not to touch a hot iron. Without fail, each time one touches an iron when it is hot, one is punished. Fear of pain is engendered and one learns not to touch a hot iron. The behavior, touching the iron, is not repeated. However, because of the need for consistency and accuracy of the feared, not all learning can be conditioned.

Punishment is not effective in training children in the complex behaviors that society demands. Most apparent is the fact that punishment is frequently not an inherent part of undesirable behavior. For most objectionable behavior, punishment must be arranged as a consequence. In the example of the hot iron, the punishment occurs due to the act of touching the iron. However, if a child pours shampoo into his or her bath water, no punishment occurs as a result of that specific act. That is, nothing painful or aversive happens as a direct result of pouring the shampoo in the bath water. Instead, there is a reward: bubbles in the tub. Parents may inflict pain as a result of disobedience or the loss of the shampoo, but the child's fear is not directed to the act of pouring the shampoo in the bath water; rather, it is directed at the parent who is causing the pain (Zajonc, 1980). Another reason that punishment is unsuccessful is due to a lack of consistency. Punishment, to be effective, must occur every time the behavior occurs (Patterson, 1975). Parents and teachers are not on 24-hour duty, their sole responsibility monitoring behavior. For this reason at times the misbehavior goes unnoticed. The child is able to enjoy his or her transgression unnoticed and unpunished. The child does not know if his or her behavior will again be rewarded on the next occasion or if he or she will be caught and punished. Therefore, the child is doubly reinforced if the behavior is unnoticed as he or she is able to engage in the misbehavior and avoid detection (Hyman,

Bongiovanni, Friedman, & McDowell, 1977). The child's misbehavior may go undetected many times before the parent or teacher punishes the child. This variable interval reinforcement schedule is the strongest of reinforcement schedules, and the most difficult to extinguish (Houston, 1986).

Skinner (1979) was opposed to the use of punishment. He concluded that teachers should be taught positive methods of training children; such as, programmed instruction and positive reinforcement (Skinner, 1968, 1989). He also suggested that the extensive use of punishment was due to a lack of knowledge of non-punitive methods (Skinner, 1979).

### Modeling Theory

Bandura (1972) proposed that children not only learn through direct instrumental learning, but learning is also accomplished through observation. His classic study (Bandura, Ross, & Ross, 1961) found that when preschool children observed a model who behaved aggressively toward an inflatable 5-foot Bobo doll, they also became aggressive toward the doll as the opportunity arose. In contrast, in the non-aggressive condition the model assembled tinker-toys and ignored the Bobo doll. These children behaved significantly less aggressively than the aggressive condition group. An expansion of this study found that children modeled aggression observed not only by a live model,

but also aggression which they viewed on film and television. Exact imitation of a cartoon was not as strong as it was in non-cartoon conditions, but for all three conditions, real-life model, filmed model, and televised cartoon, aggressive behavior was significantly increased following the observation of an aggressive model. Also important was the finding that those children who observed a non-aggressive model made fewer aggressive responses than the control group, indicating that non-aggressive behavior is also imitated (Bandura, Ross, & Ross, 1963).

Another study by Bandura and Huston (1961) found that behaving in a nurturing manner toward children increased the likelihood that they would imitate the behavior of the model. Of importance is the finding that not only were the behaviors relating to the apparatus imitated, but the extraneous behavior of the model was also imitated (Bandura & Huston, 1961).

Modeling theory suggests that children are highly responsive to the people in their environment. That is, children imitate the behavior they have observed. Specifically, for both the behavior presented in real-life as well as that observed in film and on television, children were impressionable and incorporated vicarious learning into their own behavior.

## Baumrind's Parenting Styles

Baumrind's (1967, 1971) research with preschool children has been highly influential in developmental psychology. Baumrind posits that there are three parenting styles which contribute to the well-being of children. She described these styles as authoritative, authoritarian, and permissive. The authoritative style provided the best environment for children. In the authoritative environment, there were firm rules to which adherence was required. Positive and negative reinforcement, as well as punishment techniques were used; however, explanation was provided and children were permitted discussion about the rules and consequences. Parents recognized both their own and their children's rights and needs. In the authoritative environment, children were assigned household chores, which permitted them to contribute to the family. In this environment, autonomy was encouraged. The parents were engaged with their children and provided both guidance and emotional support. Children of authoritative parents were the most self-sufficient, self-regulated, inquisitive, content, and competent. Girls were self-assured and more focused on achievement while boys were more congenial and cooperative than the children of other parenting styles (Baumrind, 1967, 1971, 1989, 1997).

In contrast, authoritarian parents were rigid and demanding. Children were expected to accept their parent's word without question.



The parenting philosophy was an external one based on theology or a respected secular authority. Authoritarian parents were punitive and expected to control their children's will. An important parenting goal was ensuring their children internalized traditional values; specifically, a strong work ethic, respect of authority, and the maintenance of order. Autonomy was discouraged. Authoritarian parents were less warm than authoritative parents and were detached and controlling. Children of authoritarian parents were distrustful, discontent, and withdrawn. Boys tended to be hostile and resistant. Girls, in comparison to those from authoritative homes, were lacking in independence and self-assurance (Baumrind, 1966, 1967, 1971, 1989).

Permissive parenting was associated with a laissez-faire attitude. Parents were accepting and neither harsh nor punitive. Directing the child was accomplished through reasoning and manipulation. Parents were available to provide assistance, but they avoided exerting control over their children. Although very few demands were placed on children, and maturity was not encouraged, the parents were emotionally supportive and available. Children of permissive parents were not only less self-reliant, explorative, self-regulated, and less achievement oriented than children of authoritative parents, but in addition, they demonstrated these attributes to a lesser degree than the children of authoritarian parents (Baumrind, 1966, 1967, 1989).

## Summary

The physical punishment of children is widespread in the United States. Certain populations are more likely to endorse its use than others. Although the experience of being corporally punished is almost universal, theory does not support its use. Compounding the problem is the fact that literature examining the psychological sequelae is sparse. The deficit is most severe relative to the average adult population.

Studies examining the psychopathology among adults who experienced corporal punishment or ridicule as children are scarce. Four studies addressed the association of corporal punishment and psychological consequences among college students. Bryan and Freed (1982) found that those who received the greatest amount of corporal punishment were most likely to report anti-social behavior, depression and anxiety; however, the researchers failed to ensure anonymity, which rendered the results suspect. Anti-social behavior was linked to both psychological and corporal punishment (Browne & Hamilton, 1998; Kosson, Steuerwald, Newman, & Widom, 1994). Muller (1996) found that aggressiveness and corporal punishment are part of reciprocal family dynamics. Finally, in studies using a nationally representative sample of adults, Straus (1995) and Straus and Kantor (1994) found an association between corporal punishment during adolescence and the development of psychopathology.

The preponderance of the literature demonstrates a positive relationship between psychopathology and both corporal punishment and ridicule. Psychological punishment has been linked to low self-esteem (Briere & Runtz, 1990; Krugman & Krugman, 1984) and aggressive behavior (Egeland & Erickson, 1987). Corporal punishment is reflected in anxiety and depression (Durant et al., 1995; Luby & Morgan, 1997; Straus & Kantor, 1994; Turner & Finkelhor, 1996), PTSD (Hyman, 1990; Krugman & Krugman, 1984), and aggressive behavior (Bates et al., 1995; Laub & Sampson, 1995; Simons et al., 1995; Strassberg et al., 1994; Straus et al., 1997; Weiss et al., 1992). Depression was three times more prevalent in the high punishment group than it was in those who reported no corporal punishment (Turner & Finkelhor, 1996). The experience of corporal punishment was related to the reexperiencing of the trauma in various ways, as well as hyperarousal and avoidance behaviors (Hyman 1990; Krugman & Krugman, 1984; McNally, 1993; Pynoos, 1994; Pynoos et al., 1996; Rossman et al., 1997; Schwarz & Kowalski, 1991; Terr, 1982, 1984, 1995). Punishment at home was related to aggressiveness in kindergarten (Bates et al., 1995; Strassberg et al., 1994; Weiss et al., 1992). Conduct problems evident in children were related to delinquent behavior during adolescence (Cohen & Brook, 1995; Laub & Sampson, 1997) and to criminal behavior in adulthood (Huesmann et al., 1984; McCord, 1979, 1991; Patterson & Yoerger, 1995). The findings

from cultural comparative studies (Deater-Deckard et al., 1996; Vazsonyi & Flannery, 1997) provided evidence that there is not a direct relationship between corporal punishment and aggressive behavior (McCord, 1991).

Furthermore, Larzelere and his associates (1993; Larzelere et al., 1996) and Baumrind (1966, 1989, 1996, 1997) argued that young children may need the limited use of corporal punishment in conjunction with reasoning in order to learn compliance to parental authority. The difference between the findings of Baumrind (1967, 1971) and Larzelere et al. (1996) and the researchers who found a positive relationship between corporal punishment and psychopathology (Bates et al., 1995; Hyman, 1990; Kosson et al., 1994; Turner & Finkelhor, 1996) were the research goals. Baumrind and Larzelere addressed the issues of acquiescence and temporary suspension of the misbehavior, while others examined the presence of deleterious effects associated with the use of corporal punishment.

## CHAPTER III

### METHODOLOGY

#### Participants

Two hundred eighty-four undergraduate students at a large university in the southwestern United States participated in this study, which was approved by the Human Subjects Committee (see Appendix B). The participants were recruited from an introductory computer technology class. Participation was voluntary, and the students received extra credit for their participation.

This study investigated the relationship between childhood and adolescent experience of corporal punishment and the psychological functioning of the average adult. An average adult was defined as someone capable of independent living who was neither incarcerated nor a patient in a mental health facility. For the purpose of selecting a sample, registration as a student at the university and current class attendance were considered *prima facie* evidence that the three conditions were met; therefore, participation as a respondent was acceptable.

Of the original sample of 284 participants, 12 were eliminated from the analyses because they were over the age of 25 and therefore did not fit the criteria of being a young adult. Thus, the final sample included 272 participants, 207 females and 65 males. The mean age of

the participants was 19.78 with a standard deviation of 1.56, and a range of 18-25 years. There were 84 freshmen, 101 sophomores, 58 juniors, and 29 seniors.

Ethnicity was a variable that proved to have cell sizes too unequal to have validity in the analyses as 82 percent were Caucasian, 8 percent Hispanic, 6 percent African American, and 5 percent were of other ethnic backgrounds. (These percentages were rounded and therefore do not total 100%.) It was not appropriate to combine the smaller cells as the literature review suggested that there were differences between these ethnic groups with regard to corporal punishment (Escovar & Escovar, as cited in Straus, 1994; Straus & Mathur, 1996; Vazsonyi & Flannery, 1997).

Other information about the participants includes the following: During the time they were in high school, 77 percent came from families in the three highest levels of socio-economic status (SES). Using the criteria developed by Hollingshead (1975), this indicates that the participants' parents had careers in upper management, owned sizable businesses, or had professional degrees. Seventy-nine percent of the sample indicated that they were raised in intact homes by their biological parents. Forty-one percent reported their religious background as fundamentalist Protestant (Assembly of God, Baptist, Church of Christ, Pentecostal, or Nazarene), 23 percent reported their background as Catholic, and 36 percent reported a religion or

denomination which was neither fundamentalist Protestant nor Catholic. Finally, during high school, 95 percent of the participants lived in the South or Southwest.

### Instruments

There were a total of 5 different instruments used in the study (see Appendix C). Two instruments are in the public domain. These include the Balanced Inventory of Desirable Responding (BIDR); (Paulhus, 1988/1991), and the Impact of Event Scale-Revised (Weiss & Marmar, 1997). The original version of the latter scale was developed by Horowitz, Wilner, and Alvarez (1979). The Brief Symptom Inventory (BSI) was also administered (Derogatis, 1993). This is a published and copyrighted instrument. The investigator designed two of the instruments, a demographic questionnaire and an event summary.

### Demographic Questionnaire

Designed by the investigator, the demographic questionnaire requested information regarding gender, ethnicity, age, college classification, and religious preference in the home in which the participant was reared. The participant was asked to indicate the city and state where the person attended elementary, junior high, and senior high school. Additionally, the demographic questionnaire asked

for the marital status of the participant's parents, step-parents or other caregiver prior to the time of the participant's graduation from high school. In the case of multiple caregivers, information was obtained regarding with whom the participant lived, and the number of years that the participant had lived with particular caregivers. Finally, the education and occupation of each caregiver was requested. This information was used to determine socio-economic status (Hollingshead, 1975). The procedure for assigning socio-economic status (SES) involved determining with whom the participant had lived for the majority of their childhood. A number was assigned for SES based on the occupation of the caregiver in the highest level occupation. The level of education was used if there was a question regarding occupation which could be resolved by using that additional information; for example, if "nurse" was designated without indicating whether this referred to a nurse's aide, Licensed Vocational Nurse, or Registered Nurse, the educational level was used to make a decision. When it was necessary to make a decision regarding assignment to one level or the next, the assumption was made that the higher level was more appropriate.

### Event Summary

The Event Summary, designed by the investigator, asked the participants to report the extent of punishment they experienced as



well as their knowledge of others' punishment. The Event Summary inquired about punishment at home and at school. Additional queries sought to address the extent to which the participant was personally ridiculed, and whether or not they witnessed punishment, or knew others who were punished. Each thematic area, such as exposure to ridicule, included 5 questions addressing the subject's experience. This instrument provided the information for the primary independent variables. In addition, two questions within each group of questions queried the subjective view of the current positive and negative effect of the punishment experienced in childhood.

Initially, this questionnaire was administered to a convenience sample ( $n = 22$ ) to check for reliability in a pilot study. Cronbach's alpha was calculated for the full scale which consisted of 60 items yielding a reliability coefficient of .83. Reliability was also computed for the 30 items of the home incidence scale ( $\alpha = .70$ ) and the school incidence scale ( $\alpha = .65$ ). The home incidence of spanking, other hitting, or punishment other than hitting provided 15 items with an alpha of .86. The school incidence scale of paddling, other hitting, or punishment other than hitting also consisted of 15 questions ( $\alpha = .48$ ). The subscales designed to examine the occurrence and impact of knowing a child who had been punished (home,  $\alpha = .86$ ; school,  $\alpha = .89$ ), and witnessing the punishment of a child (home,  $\alpha = .22$ ; school,  $\alpha = .90$ ) were also examined. Another set of questions dealt with the

experience of ridicule which yielded coefficients of .90 for home incidence and .88 for school incidence. Each of these subscales consisted of 5 items.

As a result of the comments offered by the participants in the pilot study, alterations were made to the questionnaire in order to achieve greater clarity. These changes consisted of underlining the modifiers; such as, earliest, most recent, positive, and negative. Also, definitions were included for spanking, paddling, other hitting, and physical punishment other than hitting.

Reliability of the event summary was analyzed with the responses of the 272 study participants. The instrument demonstrated moderate to high Cronbach's reliability coefficients, ranging from .60 for the subscale of home spanking to .95 for the two subscales measuring home physical punishment other than hitting and school hitting other than paddling. The combined measures of home incidence of physical punishment (spanking, other types of hitting, and other physical punishment which was not hitting) had a reliability of .83. The combined school incidence of physical punishment had a reliability of  $\alpha = .84$ . There were 15 items in each of these combinations. The home incidence and the school incidence scales, consisting of 30 items each, were found to be reliable at  $\alpha = .87$  and  $\alpha = .88$ , respectively. The total scale of 60 items demonstrated a reliability coefficient of .90.

## Impact of Event Scale-Revised

The Impact of Event Scale-Revised (IES-R), developed by Weiss and Marmar (1997), is an instrument used extensively for the determination of PTSD (McFall, Smith, Mackay, & Tarver, 1990; Solomon, Mikulincer, Waysman, & Marlowe, 1991; van der Kolk, 1985). The instrument asks that the respondent answer the questions with regard to a single traumatic event. In this study, the IES-R was administered twice: first, for the worst experience with punishment in school; and second, for the worst punitive experience at home.

Weiss and Marmar (1997) investigated the reliability of the three subscales of the IES-R: Intrusion, Avoidance, and Hyperarousal. The participants were drawn from two disasterous events: the I-880 freeway collapse during the 1989 Loma Prieta, California earthquake and the Northridge, California earthquake. The coefficient alphas ranged from .87 to .92 for Intrusion, .84 to .86 for Avoidance, and .79 to .90 for Hyperarousal. Test re-test reliability was assessed and correlations ranged from .57 to .94 for Intrusion, .51 to .89 for Avoidance, and .59 to .92 for Hyperarousal. The lower of the test-retest reliability scores may be attributed to a longer interval between assessments and the fact that the event evaluated, the I-880 freeway collapse, occurred a year and a half prior to assessment; whereas, for those involved in the Northridge earthquake initial data were collected only 6 weeks after the event.

Factor analysis has not been conducted on the revised IES. However, the original IES (Horowitz et al., 1979) was factor analyzed and principal components analysis was conducted, providing confirmation of variables loading on three factors. Loading on Intrusion and Avoidance was as expected with the exception that the item “I was aware that I still had a lot of feelings about it, but I didn’t deal with them” loaded on Intrusion rather than Avoidance. Additionally, the items 8 and 15, “I felt as if it hadn’t happened or it wasn’t real” and “My feelings about it were kind of numb,” respectively, loaded on a third factor (Joseph, Williams, Yule, & Walker, 1992; Yule, Bruggencate, & Joseph, 1994). With regard to the IES-R, the factor analyses of the original IES is of limited utility. This is due to the fact that while many of the items remained the same on the IES-R, there has been an addition of 7 items, one item was divided, the items were re-arranged, and the subscale of hyperarousal was created. However, given that many of the items were retained and the results of the factor analysis of the original scale demonstrated high congruence for the constructs of avoidance and intrusion, the information provides relevant data to assess the validity of the IES-R.

Reliability was measured for the current sample. Cronbach’s alpha of .94 was found for the total home incidence scale. Total school incidence also yielded an alpha of .94. The subscales ranged from  $\alpha = .78$  for school hyperarousal to  $\alpha = .90$  for home intrusiveness.

## Brief Symptom Inventory

The Brief Symptom Inventory (BSI), developed by Derogatis (1993) is a self-report psychological symptom inventory consisting of 53 items. It is a shortened form of the Symptom Check List-90-R (SCL-90-R); (Derogatis, 1992). The dimensions scored are: somatization, obsessive-compulsive, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoid ideation, and psychoticism. Additionally, three global indices of psychopathology are scored. The most informative of these is the global severity index (GSI).

Reliability of the BSI has been assessed by Derogatis (1993). Internal consistency, employing coefficient alpha, was found to range from .71 for Psychoticism to .85 for Depression. Test-retest reliability coefficients ranged from .68 for Somatization to .91 for Phobic Anxiety. The Global Severity Index, Positive Symptom Total, and Positive Symptom Distress Index achieved test-retest reliability coefficients of .90, .80, and .87, respectively.

Validity was assessed between the SCL-90-R symptom dimensions and the MMPI clinical, Wiggins, and Tryon Scores (Derogatis, Rickels, & Rock, as cited in Derogatis, 1992). These data were reanalyzed using the BSI scoring, possible because the SCL-90-R and the BSI share the same items. Correlations ranged from .30 to .72. Correlations between the BSI and the SCL-90-R ranged from .92 on the dimension of Psychoticism to .99 for the Hostility dimension

(Derogatis, 1993), suggesting high convergence between BSI and SCL-90 scores.

The study sample yielded a Cronbach's alpha of .97 for the total BSI. The subscales ranged from  $\alpha = .74$  for anxiety to  $\alpha = .89$  for depression.

### Balanced Inventory of Desirable Responding

The Balanced Inventory of Desirable Responding (BIDR) (Paulhus, 1988/1991) is used as an index of social desirability. The impression management (IM) subscale from this instrument was used as a check for a social desirability response set. Impression management (IM) was defined as a deliberate attempt to project a particular image of oneself.

Paulhus (1991) reported that internal consistency was measured in a number of studies and provided a Cronbach's alpha ranging from .75 to .86 on the IM scale. It was reported that the test-retest reliability over a 5-week interval was .65 for IM. The BIDR correlated with the Marlowe-Crowne ( $\alpha = .71$ ), providing concurrent validity. A correlation of .80 between the BIDR and the Multidimension Social Desirability Inventory (Jacobson, Kellogg, Cauce, & Slavin, as cited in Paulhus, 1991) provided further evidence of concurrent validity. The IM subscale has been found to correlate highly with lie scales, such as the MMPI lie scale (Paulhus, 1991).

The reliability was examined for the current sample. A Cronbach's alpha of .75 was found for the IM scale.

### Procedure

This study was conducted in a classroom at a large university in the Southwest. The participants began responding to the survey instruments on the hour and half-hour on three non-consecutive days. The study required about 1 hour to complete.

The investigator provided an oral introduction and summarization of the instructions (see Appendix D). The consent form (see Appendix E) was attached to the front of the packet of instruments which was distributed to the participants along with scan-able sheets. The consent form was completed and returned prior to beginning the questionnaires.

The participants were asked to indicate their response to each item on both the scan-able sheets and the instruments. Answers to the demographic and qualitative questions were recorded on the questionnaires only.

Once the questionnaires were completed, the participants were provided with an opportunity to indicate a desire to receive a summary of the findings or to indicate willingness to be contacted in the future. Names and addresses, for the participants and other individuals who could act as contact persons, were requested on this form. The consent

form and the follow-up form were collected separately from the instrument packet. To provide confidentiality, the forms have been kept separately from the test response sheets.

Two methods were employed for the collection of missing data. First, the request to answer both on the scan-able forms and the questionnaires permitted the retrieval of some information. Second, the consent form provided a procedure for contacting the participant should additional information be needed. By telephone, the participants were contacted and asked if they would be willing to provide the missing information. Every person for whom successful contact was made agreed to answer the questions.

Two participants were not contacted. In one instance, the missing datum was one question on the Brief Symptom Inventory (BSI). This was resolved through the use of the recommended procedure for missing data on that instrument (Derogatis, 1993). The other person did not complete data regarding SES. This participant was not included in analyses which evaluated this dimension.

### Methods

The instruments included in the questionnaire packet were given in the following order: Demographics, Event Summary, Impact of Events-Revised (Weiss & Marmar, 1997) which was given twice, once for the worst experience with punishment at school and again for the



worst experience with punishment at home, the Balanced Inventory of Desirable Responding (Paulhus, 1988/1991), and Brief Symptom Inventory (Derogatis, 1993). The instruments were coded with an identifying number to ensure that all instruments remained together. This identifying number also appeared on the consent form and the follow-up form. With the exception of the Demographic Questionnaire, all instruments were coded both on a scan-able sheet and on the questionnaire. The scan-able sheets were submitted to computing services for a digital print-out.

The data from the two IES-R (Weiss & Marmar, 1997) forms were scored, providing a total PTSD score for each form; that is, school punishment and home punishment experiences. The subscales, avoidance, hyperarousal, and intrusiveness, were also scored for both home and school experience.

The BSI (Derogatis, 1993) was scored by computer. The information regarding scoring parameters was entered and the scores for each of the subscales and the three global indexes were calculated. The depression, anxiety, phobic anxiety, and hostility subscales were used in this study. In addition, the Global Severity Index (GSI) was also used in assessing psychopathology.

The data obtained from the BIDR (Paulhus, 1988/1991) were used as a global index of impression management. This instrument provided a check for socially desirable responding.

### Design and Statistics

This was a quasi-experimental, between-subjects design employing surveys. Analyses were conducted for both Home incidence of corporal punishment and School incidence of corporal punishment. In addition, comparisons were made between corporal punishment occurring only in the home and exposure to corporal punishment in both the home and school environments. The occurrence of ridicule both at home and school was also analyzed. The incidence of corporal punishment was taken from the first question in each group of questions on the Event Summary. This question asked how often a particular type of event took place. The options were (a) once or twice; (b) three times; (c) four or 5 times; (d) more than 5 times; and (e) never. The options were collapsed into minimal, moderate, or extensive corporal punishment at home. School incidence was dichotomized, either the participant did or did not experience it.

The dependent variables included psychopathology and subjective belief of the positive or negative effect of the experience of corporal punishment. The variable of psychopathology was specific to the dimensions of post-traumatic stress disorder (PTSD), anxiety, depression, and anti-social characteristics. The data for a subjective belief of the positive or negative effect of the experience of corporal punishment were collected through two items utilizing Likert-like scales on the Event Summary. These items concerned the current

positive and negative effect due to experiencing the event. They were the 4th and 5th items in each group of questions.

Demographic variables, not central to the research questions of the current study, were also examined. These included gender, religious background, ethnicity, and SES. These variables were addressed in a preliminary analysis. A correlation was computed to determine if they contributed to the dependent variables. If it was found that these demographic variables contributed to the dependent variables, they were to be controlled with the use of MANCOVA. However, if they were not related to the dependent variables, they were to be dropped from further analysis.

The primary research questions involved measuring the amount of psychopathology present as it related to experience with corporal punishment at home or at school, or both, as well as exposure to ridicule. Corporal punishment was defined as spanking or paddling, other types of hitting, or physical punishment which did not involve hitting. Therefore, the questions addressing the issues of ridicule, witnessing, and knowing were not tabulated with corporal punishment.

MANOVA was used for the hypotheses examining the issues of corporal punishment and ridicule. However, a t-test for independent samples was the appropriate statistical analysis for Hypothesis 1.2 as

this hypothesis consisted of one group with two levels in the independent variable. All analyses were between-subject designs.

The secondary hypotheses predicted that there would be a perception of positive or negative effects, present in young adulthood, due to experience with corporal punishment. These experiences included witnessing corporal punishment and knowing someone who received physical punishment. Also included in the secondary hypotheses was the prediction of current subjective effects relative to exposure to corporal punishment at various ages. The prediction of positive or negative effect as a result of corporal punishment at a particular age was based on the findings of the literature review.

### Research Questions and Hypotheses

The research questions were composed of primary and secondary emphases. The two primary questions examined the relationship of psychopathology to childhood exposure to corporal punishment and ridicule. Psychopathology was measured with the Brief Symptom Inventory and the Impact of Event Scale-Revised. A significance level of .05 was required for acceptance.

The first research question was: Is corporal punishment associated with negative psychological effects that continue into adulthood for the average adult?

The hypotheses were:

- 1.1. There will be significantly more psychopathology among those who experienced corporal punishment than among those who did not experience corporal punishment.
- 1.2. There will be significantly more psychopathology among those who experienced corporal punishment at school than among those who did not experience corporal punishment at school.
- 1.3. There will be significantly more psychopathology among those who experienced more extensive corporal punishment at home; that is, the greater the exposure to corporal punishment, the more severe the psychopathology.
- 1.4. There will be significantly more psychopathology among those who experienced corporal punishment both in the home and in the school than among those who experienced corporal punishment only in the home.
- 1.5. There will be significantly more psychopathology among those who experienced corporal punishment in the home only than among those who experienced corporal punishment in the school only.

The second primary research question was: Is the experience of ridicule associated with negative psychological effects that continue into adulthood for the average adult?

The hypothesis was:

2. There will be significantly more psychopathology among those who experienced ridicule than among those who did not.

The secondary research question was: Do those who experienced corporal punishment during childhood perceive it to have a positive or negative effect currently? The hypotheses examined the relationship between the childhood experience of corporal punishment and the currently held perception of positive or negative effect due to the experience. Positive and negative effects were measured with two Likert-like scales written by the investigator for the Event Summary. A significance level of .05 was required for acceptance.

The secondary hypotheses were:

3. There will be a significantly more positive perception of current effect among those who witnessed corporal punishment.
4. There will be a significantly more positive perception of current effect among those who knew someone who was corporally punished.
- 5.1 There will be a significantly more positive perception of current effect among those who report being corporally punished when they were 5 years old or less.
- 5.2 There will be a significantly more positive and a significantly more negative perception of current effect among those who report being corporally punished when they were between the ages of 6 and 12.
- 5.3. There will be a significantly more negative perception of current effect among those who report being corporally punished when they were between the ages of 13 and 17 years.

## CHAPTER IV

### RESULTS

The sample consisted of 284 participants, 12 of whom were eliminated from the analyses because they were over the age of 25 and therefore did not fit the criteria of being a young adult. Thus, the analyses were conducted with a sample of 272 subjects. The mean age was 19.78 years with a standard deviation of 1.56, and a range of 18-25 years. The mean classification was 2.12 (i.e., second year), with a standard deviation of 0.969. Approximately 1/3 of the participants were male.

Between-subjects multivariate analysis of variance (MANOVA) was conducted with the following three dependent variables that measure psychopathology: the Brief Symptom Inventory (Derogatis, 1993) and the Impact of Event Scale-Revised (Weiss & Marmar, 1997), the latter was administered twice, once for home incidence and again for school incidence. If the global scales of the Brief Symptom Inventory (BSI-GSI) and the Impact of Event Scale-Revised for home (IES-R Home) and school (IES-R School) were significant, the subscales for the significant measures were analyzed. The Brief Symptom Inventory's (BSI) subscales of depression, anxiety, phobic anxiety, and hostility were used. Also, the Impact of Event Scale-Revised (IES-R) subscales of hyperarousal, avoidance, and

intrusiveness were examined for both home and school incidence. Independent variables analyzed with the MANOVA procedure were the incidence of corporal punishment at home, the exposure to corporal punishment at both school and home, and the experience of ridicule at home and at school. Each of these variables had three levels: minimal, moderate, and extensive; with the exception of the school incidence of ridicule. The latter variable was divided into groups consisting of those who experienced ridicule at school and those who did not. These analyses resulted in a total of ten MANOVAs.

Hypothesis 1.2, predicting differences between those who experienced corporal punishment in school and those who were not exposed to physical punishment at school, was one of the primary hypotheses. However, this hypothesis required a two group between-subjects design. The analyses were conducted with a t-test for independent samples.

The secondary hypotheses were analyzed using a 2 group between-subjects, quasi-experimental design. T-tests for independent samples were performed. The secondary hypotheses examined the current perception of subjective effect due to childhood exposure to corporal punishment, both positive and negative, that was experienced during childhood. The participants evaluated the current positive and negative effect of having witnessed corporal punishment at home and at school. They were also asked about the experience of having known



someone who experienced corporal punishment. In addition, the participants evaluated the experience of corporal punishment that occurred at various ages.

### Preliminary Analyses

Examination of the data revealed that the assumptions of linearity, multicollinearity, singularity, homogeneity of variance, normality, and orthogonality were satisfactory. An explanation of some of the specifics of the evaluation follows.

#### Orthogonality

Nonorthogonality was present due to the fact that this research was pseudo-experimental. The difference in cell size was a result of the configuration of the sample. Some of the original cells were combined to eliminate large differences in cell size, resulting in no cell having less than 20 participants. The fact that this study was not experimental and the cells were maintained at least at the level of 20 participants, allowed robustness to the violation of orthogonality to be assumed (Tabachnick & Fidell, 1996).

#### Homogeneity of Variance

Homogeneity of variance was assumed because this was a quasi-experimental study in which there was no division of subjects into

groups. Independent variables were those of incidence of corporal punishment in particular environments. At no time were there fewer than 20 subjects in a particular level submitted for analysis. In addition, the variances among levels were never more than 4 times the size of any of the others. Pagano (1994), suggested that ANOVAs are robust under such circumstances, even when statistical evidence for a violation of the assumption is present. Therefore, the robustness of these data to a violation of the assumption of homogeneity of variance can be assumed (Glass & Hopkins, 1984; Pagano, 1994; Tabachnick & Fidell, 1996).

### Correlational Analyses

A correlational analysis was conducted with the demographic variables of gender, religious background, ethnicity, and the size of the community from which the participants came, in comparison to the dependent variables, which included the Brief Symptom Inventory's global severity index (BSI-GSI), and the depression, hostility, anxiety and phobic anxiety subscales; as well as the Impact of Event Scale-Revised (IES-R) totals for home and school over the previous seven days. This analysis was conducted to determine if any of the variables had a significant impact and would need to be controlled through use of MANCOVAs. There were no correlations between these variables having a magnitude of .30 or greater.

Correlational analysis of the Balanced Inventory of Desirable Responding (Paulhus, 1988/1991) with the subjective variables and those of gender, religion, ethnicity, and parents' SES resulted in 42 correlations. Of these, only the global severity index ( $r = -.33$ ) and the hostility subscale ( $r = -.40$ ) of the Brief Symptom Inventory yielded a correlation of .30 or above. The finding of negative correlations indicated that the greater the score on the global severity index or the hostility subscale, the less likely the person would be to make socially desirable responses. This finding is intuitively understandable. Therefore, it was concluded that socially desirable responding did not have a significant effect on the participants ratings. The participants were asked to rate the current effect, both positive and negative, with regard to having been punished, ridiculed, or having witnessed punishment or known someone who was punished. These questions were asked both about school and home experiences. Of 96 correlations between the subjective dependent variables and those of gender, religion, ethnicity, and parental socio-economic status (SES), only 3 proved to have a correlation of .30 or greater. The specific variables were those of both positive and negative effect due to having been paddled at school and positive effect due to having been physically punished at school other than some type of hitting. In each of these cases, the correlation was with gender. This was to be addressed in subsequent analyses by splitting the file between males

and females and running identical analyses on the subjective variables that correlated with gender.

### Preliminary Analyses Conclusions

Since there was a negligible number of large correlations between the demographic and dependent variables, the MANCOVA procedures were not needed. However, the subjective dependent variables that correlated strongly with gender were to be analyzed by splitting the file and investigating the effect of male or female gender on the variable in question. Given that the assumptions of linearity, multicollinearity, singularity, homogeneity of variance, normality, and orthogonality were satisfactory, further analyses were conducted.

### Primary Hypotheses

The data relevant to the primary hypotheses were analyzed with MANOVA with one exception, a t-test for independent samples was used for Hypothesis 1.2. An alpha of .05 was established as the criteria needed to accept significance of the findings. The Wilks' Lambda multivariate test of significance was performed and univariate tests were conducted on the individual DVs. The BSI and IES-R subtests were examined only if the global index of the respective measure was significant. When significant univariate differences were

found, Tukey's Honestly Significant Difference post hoc tests were employed to determine the specific means which were significantly different.

#### Hypothesis 1.1

There will be significantly more psychopathology among those who experienced corporal punishment than among those who did not experience corporal punishment.

In this sample, only 12 participants had not experienced any corporal punishment at home. Given that, it was not possible to investigate the presence of psychopathology among those who had not experienced corporal punishment. Therefore, this hypothesis could not be addressed.

#### Hypothesis 1.2

There will be significantly more psychopathology among those who experienced corporal punishment at school than among those who did not experience corporal punishment at school.

The participants answered 3 questions about the incidence of corporal punishment at school. These questions inquired about paddling, other types of hitting, and other types of physical punishment which did not include hitting. The responses to these questions were combined, resulting in a independent variable (IV) of

total corporal punishment at school. The IV was dichotomized into those who experienced corporal punishment at school and those who did not. This resulted in cells containing 146 participants with no corporal punishment experience, and 126 participants who had experienced corporal punishment. This was a 2 group between-subjects design. T-tests for independent samples were used for these analyses.

Of those participants who experienced corporal punishment at school ( $n = 126$ ) the majority ( $n = 97$ ) reported that it happened only once or twice ( $n = 97$ ). Therefore, the experience group was not divided into minimal, moderate, and extensive experience levels.

More PTSD symptomatology, as indicated by the IES-R for school experience, was found among those who experienced corporal punishment at school compared with those who did not (see Table 4.1). Although the hyperarousal and avoidance subscales demonstrated a positive trend ( $p < .054$  and  $p < .084$ , respectively); only the intrusive subscale was significant (see Table 4.2). In addition, the BSI-GSI was not significant relevant to exposure to physical punishment at school. Therefore, the BSI subscales were not analyzed. The significant findings for the global measure of the IES-R for school exposure and the significant finding from the intrusive subscale indicate partial support for this hypothesis.

Table 4.1: Corporal Punishment at School: Analysis of the IES-R Global Index with Means and Standard Deviations

Group	Number of Cases	Mean	SD	t-value	df	2-Tail Significance
No experience	146	1.75	6.06	-2.14	270	.033
Experience	126	3.57	7.94			

Table 4.2: Corporal Punishment at School: Analysis of the Intrusion Subtest of the IES-R with Means and Standard Deviations

Group	Number of Cases	Mean	SD	t-value	df	2-Tail Significance
No experience	146	0.51	2.05	-2.33	270	.021
Experience	126	1.23	3.04			

### Hypothesis 1.3

There will be significantly more psychopathology among those who experienced more extensive corporal punishment at home; that is, the greater the exposure to corporal punishment, the more severe the psychopathology.

The incidence of corporal punishment was calculated across the three types of punishment; that is, spanking, other types of hitting, and other types of physical punishment which did not involve hitting. Therefore, both the frequency and the type of punishment were

incorporated in the independent variable of physical punishment at home. Given that only 12 participants had not been physically punished in the home, it was necessary to combine those with no experience and those who had experienced some corporal punishment and compare them with participants who had experienced it more often. There were three groups: minimal, moderate, and extensive punishment. Minimal punishment was defined as punishment which occurred no more than three times. Punishment of one type occurring 4 or more times or a combination of types of punishment; such as, one type of punishment occurring 3 times and another occurring once or twice, would receive a moderate rating. Extensive punishment would be of more than one type and, for example, it would necessarily have occurred more than 5 times for one type of punishment and at least once or twice for another or three times for two types of punishment and once or twice for a third. This analysis was conducted with the entire sample,  $N = 272$ . It was a three group between-subjects design. MANOVA was used for the analysis.

There were significant findings for the home incidence of corporal punishment. Wilks' Lambda was significant,  $F(6, 534) = 3.40$ ,  $p < .003$ . The univariate F tests for the BSI-GSI was significant, as was the IES-R global scale for home incidence of corporal punishment as manifested in the home environment (see Table 4.3). However, home incidence of corporal punishment was not significantly related to



Table 4.3: Home Incidence of Corporal Punishment: Analysis of the BSI and IES-R Global Scales

Variable	SS	df	MS	F	p
BSI-global index	94.89	2,269	0.35	5.90	0.003
IES-R home total	18967.39	2,269	70.51	5.79	0.003
IES-R school total	13411.23	2,269	49.86	0.06	0.939

symptoms of PTSD at school, as indicated by the IES-R for school incidence of corporal punishment. Tukey's Honestly Significant Difference (HSD) post hoc tests when applied to the BSI-GSI, demonstrated that those with extensive experience with corporal punishment differed significantly from both those with minimal and moderate exposure to corporal punishment. In addition, application of Tukey's HSD test found significant differences between the extensive experience group in comparison to the minimal and moderate groups relative to the IES-R global scale for home incidence (see Table 4.4).

The Wilks' Lambda criterion was significant at  $F(8, 532) = 3.94$ ,  $p < .000$  for the subscales of the BSI. The univariate F tests for the subscales of the BSI: depression, hostility, and phobic anxiety were found to be significantly related to home incidence of corporal punishment (see Table 4.5). The measure of anxiety approached significance ( $p < .053$ ). Tukey's HSD was used for the post hoc

Table 4.4: Corporal Punishment at Home: Means and Standard Deviations for the BSI and IES-R Global Scales

Psychopathology Index	Incidence					
	Minimal ( <u>n</u> =71)		Moderate ( <u>n</u> =120)		Extensive ( <u>n</u> =81)	
	Mean	SD	Mean	SD	Mean	SD
BSI-global index	0.60	(0.56) a	0.60	(0.50) a	0.87	(0.74) b
IES-R home total	2.68	(8.12) a	2.23	(5.69) a	6.16	(11.45) b
IES-R school total	2.38	(6.71) a	2.75	(7.75) a	2.56	(6.24) a

Note: Higher scores indicate poorer adjustment. Within rows, Means with different subscripts indicate the groups which were significantly different ( $p < .05$ ) by Tukey HSD.

Table 4.5: Home Incidence of Corporal Punishment: Analysis of the BSI Subscales

Variable	SS	df	MS	F	p
Anxiety	112.17	2,269	0.42	2.97	0.053
Depression	176.13	2,269	0.65	3.33	0.037
Hostility	143.73	2,269	0.53	5.40	0.005
Phobic Anxiety	57.44	2,269	0.21	10.97	0.000

analyses. On the depression subscale, the extensive experience group was significantly different than the minimal experience group. The extensive punishment group of the hostility subscale was significantly different than both the minimal and moderate punishment groups. On

the phobic anxiety subscale, the extensive punishment group was significantly different than the moderate experience group (see Table 4.6).

Wilks' Lambda demonstrated a significant multivariate  $F$  for the subscales of the IES-R with regard to symptoms manifested in the home environment,  $F(6, 534) = 2.89, p < .009$ . The univariate  $F$  tests for the IES-R subscales of avoidance, hyperarousal, and intrusiveness were all significant (see Table 4.7). Tukey's HSD was used for the post hoc analyses. For both the avoidant and hyperarousal subscales, the extensive group was significantly different than the moderate group.

Table 4.6: Corporal Punishment at Home: Means and Standard Deviations for the BSI Subscales

Psychopathology Index	Incidence					
	Minimal ( $n=71$ )		Moderate ( $n=120$ )		Extensive ( $n=81$ )	
	Mean	SD	Mean	SD	Mean	SD
Anxiety	0.54	(0.58) a	0.57	(0.58) a	0.77	(0.78) a
Depression	0.61	(0.75) a	0.70	(0.75) ab	0.93	(0.93) b
Hostility	0.66	(0.68) a	0.63	(0.64) a	0.96	(0.88) b
Phobic anxiety	0.26	(0.47) ab	0.11	(0.21) b	0.42	(0.68) a

Note: Higher scores indicate poorer adjustment. Within rows, Means with different subscripts indicate the groups which were significantly different ( $p < .05$ ) by Tukey HSD.

Table 4.7: Home Incidence of Corporal Punishment: Analysis of the IES-R Subscales

Variable	SS	df	MS	F	p
Avoidant	4234.92	2,269	15.74	3.86	0.022
Hyperarousal	1070.17	2,269	3.97	3.50	0.031
Intrusive	2766.42	2,269	10.28	7.57	0.001

The intrusiveness subscale's extensive punishment group was significantly different than both the minimal and moderate punishment groups (see Table 4.8).

Table 4.8: Corporal Punishment at Home: Means and Standard Deviations for the IES-R Subscales

Psychopathology Index	Incidence								
	Minimal ( <u>n</u> =71)		Moderate ( <u>n</u> =120)		Extensive ( <u>n</u> =81)				
	Mean	SD	Mean	SD	Mean	SD			
Avoidant	1.30	(4.14)	ab	1.31	(3.36)	b	2.77	(4.60)	a
Hyperarousal	0.55	(1.72)	ab	0.29	(1.15)	b	1.05	(2.97)	a
Intrusive	0.83	(2.76)	a	0.63	(1.90)	a	2.35	(4.75)	b

Note: Higher scores indicate poorer adjustment. Within rows, Means with different subscripts indicate the groups which were significantly different ( $p < .05$ ) by Tukey HSD.

With the exception of the anxiety subscale which only approached significance, the BSI measures and the IES-R for home environment were significantly positive for psychopathology. Follow-up analyses supported the hypothesis that greater exposure to corporal punishment at home would be related to more psychopathology.

#### Hypothesis 1.4

There will be significantly more psychopathology among those who experienced corporal punishment both in the home and in the school than among those who experienced it in only the home.

This analysis examined the effects of home punishment if there was no school punishment and compared it to the effects of punishment which occurred in both the home and at school. The creation of these variables was accomplished by sorting the sample into those who were exposed to corporal punishment only in the home and those who experienced corporal punishment both at home and school. This resulted in measures of corporal punishment in both the home and the school (HS),  $N = 126$ , and corporal punishment at home only (HO),  $N = 146$ . These variables were necessarily related because most of the participants had experienced corporal punishment at home. That is, those who received school punishment also received home punishment. Thus, the groups of HO and HS were not

independent of each other and no interaction analysis was possible. Therefore, these variables were analyzed with separate MANOVAs. Unlike the other hypotheses which examined the incidence of school corporal punishment and divided the sample dichotomously, in this hypothesis it was possible to apply severity levels. Thus, the severity levels for the HO and HS groups were the minimal, moderate, and extensive experience levels previously described.

The variable for HO was not significant when it was examined against the global indexes for the BSI and those for school and home environments of the IES-R. No further analyses of this IV were conducted.

The Wilks' Lambda criterion was significant for the HS variable when the global indexes of the BSI and IES-R were examined,  $F(6, 242) = 2.65, p < .017$ . The univariate F tests for both the BSI-GSI and the IES-R for worst experience at home were significant. However, the IES-R was not significant for worst experience at school (see Table 4.9). Tukey's HSD was used for post hoc comparisons. The extensive group demonstrated significantly more psychopathology than the moderate group on both the BSI-GSI and the IES-R for home (see Table 4.10). The Wilks' Lambda multivariate F was also significant for the examination of the subtests of the BSI,  $F(8, 240) = 2.24, p < .026$ . All four of the univariate F tests for the BSI subtests were significant:

Table 4.9: Home and School Incidence of Corporal Punishment:  
Analysis of the BSI and IES-R Global Scales

Variable	SS	df	MS	F	p
BSI-global index	42.73	2,123	0.35	6.11	0.003
IES-R home total	10171.19	2,123	82.69	4.61	0.012
IES-R school total	7853.68	2,123	63.85	0.17	0.847

Table 4.10: Corporal Punishment at Home and School: Means and  
Standard Deviations for the BSI and IES-R Global Scales

Psychopathology Index	Incidence					
	Minimal ( <u>n</u> =27)		Moderate ( <u>n</u> =51)		Extensive ( <u>n</u> =48)	
	Mean	SD	Mean	SD	Mean	SD
BSI-global index	0.60	(0.46) ab	0.52	(0.47) b	0.92	(0.75) a
IES-R home total	2.11	(6.82) ab	2.20	(5.69) b	7.23	(12.50) a
IES-R school total	2.85	(6.51) a	2.59	(8.93) a	3.96	(7.66) a

Note: Higher scores indicate poorer adjustment. Within rows, Means with different subscripts indicate the groups which were significantly different ( $p < .05$ ) by Tukey HSD.

anxiety, depression, hostility, and phobic anxiety (see Table 4.11).

Tukey's HSD was used for the post hoc comparisons. In all of the

subtests, anxiety, depression, hostility, and phobic anxiety, the

extensive group was significantly different than the moderate group

(see Table 4.12).

Table 4.11: Home and School Incidence of Corporal Punishment:  
Analysis of the BSI Subscales

Variable	SS	df	MS	F	p
Anxiety	48.60	2,123	0.40	3.59	0.031
Depression	72.60	2,123	0.59	4.11	0.019
Hostility	69.03	2,123	0.56	3.68	0.028
Phobic anxiety	31.07	2,123	0.25	8.44	0.000

Table 4.12: Corporal Punishment at Home and School: Means and  
Standard Deviations for the BSI Subscales

Psychopathology Index	Incidence								
	Minimal ( <u>n</u> =27)		Moderate ( <u>n</u> =51)		Extensive ( <u>n</u> =48)				
	Mean	SD	Mean	SD	Mean	SD			
Anxiety	0.53	(0.56)	ab	0.46	(0.54)	b	0.79	(0.74)	a
Depression	0.57	(0.62)	ab	0.57	(0.66)	b	0.97	(0.93)	a
Hostility	0.70	(0.66)	ab	0.67	(0.70)	b	1.05	(0.84)	a
Phobic anxiety	0.21	(0.38)	ab	0.07	(0.14)	b	0.48	(0.75)	a

Note: Higher scores indicate poorer adjustment. Within rows, Means with different subscripts indicate the groups which were significantly different ( $p < .05$ ) by Tukey HSD.



With regard to the subscales of the IES-R, the comparison was conducted both with the full complement of subscales for both home and school environment as well as only for those measuring the extent of PTSD present in the home environment. Although the Wilks' Lambda multivariate F approached significance ( $p < .09$ ), it did not meet the required standard ( $p < .05$ ). Therefore, the subscales were not analyzed.

The hypothesis predicted that there would be significant differences between the group who experienced corporal punishment in two environments versus the group whose exposure was limited to one environment. This hypothesis was upheld as corporal punishment experienced both at home and at school was significantly related in a positive direction to psychopathology; whereas, there were no significant findings for the group who experienced corporal punishment in the home only.

#### Hypothesis 1.5

There will be significantly more psychopathology among those who experienced corporal punishment in the home only than among those who experienced corporal punishment in the school only.

It was not possible to analyze the data for this hypothesis because too few participants had experienced physical punishment in

the school only. Specifically, of the 12 participants who were not physically punished at home, 4 experienced punishment in the school.

### Hypothesis 2

There will be significantly more psychopathology among those who experienced ridicule than among those who did not.

A MANOVA was used to investigate this hypothesis. The event summary variables for ridicule in home and in school were examined against the dependent psychopathology variables as measured by the BSI and the IES-R. For these analyses the independent variables were incidence of ridicule in the home and in the school. The levels of severity were the same as those for corporal punishment: minimal, moderate, and extensive for home incidence; school incidence was dichotomized into experience and no experience. These analyses were conducted with the entire sample ( $N = 272$ ).

None of the interactions were significant. However, there were main effects for both school and home incidence of ridicule.

Wilks' Lambda was significant for the home incidence measure of ridicule as it related to the BSI-GSI and the IES-R for home and school environments,  $F(6, 528) = 6.77, p < .000$ . The univariate F tests were significant for the main effects of the BSI-GSI, and the IES-R for both home and school environments (see Table 4.13). Tukey's HSD post hoc comparisons were conducted. The results indicated that on

Table 4.13: Home Incidence of Ridicule: Analysis of the BSI and IES-R Global Scales

Variable	SS	df	MS	F	p
BSI-global index	87.36	2,266	0.33	10.50	0.000
IES-R home total	18367.44	2,266	69.05	6.68	0.001
IES-R school total	12601.59	2,266	47.37	5.12	0.007

the BSI-GSI the moderate and the extensive groups were significantly different than the minimal group. On the IES-R for home environment the extensive group was significantly different than the minimal and moderate groups. With regard to the IES-R for school environment, the moderate group was significantly different than the minimal group (see Table 4.14). The Wilks' Lambda multivariate F criterion was also significant for the school incidence measure of ridicule as it related to the BSI-GSI and the IES-R for home and school environments,  $F(3, 264) = 2.78, p < .041$ . However, univariate Fs indicated significance only for the BSI-GSI (see Table 4.15). Tukey's HSD post hoc comparison was conducted. The experience group's mean was significantly different than that of the no experience group (see Table 4.16).

Table 4.14: Ridicule at Home: Means and Standard Deviations for the BSI and IES-R Global Scales

Psychopathology Index	Incidence					
	Minimal ( <u>n</u> =89)		Moderate ( <u>n</u> =89)		Extensive ( <u>n</u> =94)	
	Mean	SD	Mean	SD	Mean	SD
BSI-global index	0.44	(0.39) a	0.73	(0.62) b	0.86	(0.68) b
IES-R home total	1.04	(3.84) a	3.21	(6.98) a	6.14	(11.82) b
IES-R school total	1.12	(3.93) a	4.52	(9.99) b	2.17	(5.43) ab

Note: Higher scores indicate poorer adjustment. Within rows, Means with different subscripts indicate the groups which were significantly different ( $p < .05$ ) by Tukey HSD.

Table 4.15: School Incidence of Ridicule: Analysis of the BSI and IES-R Global Scales

Variable	SS	df	MS	F	p
BSI-global index	87.36	1,266	0.33	8.41	0.004
IES-R home total	18367.44	1,266	69.05	0.70	0.405
IES-R school total	12601.59	1,266	47.37	0.07	0.788

Table 4.16: Ridicule at School: Means and Standard Deviations for the BSI and IES-R Global Scales

Psychopathology Index	Incidence			
	No experience ( <u>n</u> =136)		Experience ( <u>n</u> =136)	
	Mean	SD	Mean	SD
BSI-global index	0.55	(0.50) a	0.81	(0.67) b
IES-R home total	2.68	(6.89) a	4.35	(9.88) a
IES-R school total	2.49	(7.94) a	2.71	(6.03) a

Note: Higher scores indicate poorer adjustment. Within rows, Means with different subscripts indicate the groups which were significantly different ( $p < .05$ ) by Tukey HSD.

The Wilks' Lambda criterion was significant,  $F(4, 263) = 3.99$ ,  $p < .004$ ) for the BSI subtests. All four BSI subtests were significant for school incidence of ridicule (see Table 4.17). Tukey's HSD post hoc comparisons were conducted. It was found that the experience group was significantly different than the no experience group on all subtests (see Table 4.18).

Table 4.17: School Incidence of Ridicule: Analysis of the BSI Subscales

Variable	SS	df	MS	F	p
Anxiety	107.60	1,266	0.40	6.51	0.011
Depression	160.49	1,266	0.60	4.80	0.029
Hostility	134.04	1,266	0.50	7.35	0.007
Phobic anxiety	56.14	1,266	0.21	15.15	0.000

Table 4.18: Ridicule at School: Means and Standard Deviations for the BSI Subscales

Psychopathology Index	Incidence			
	No experience (n=136)		Experience (n=136)	
	Mean	SD	Mean	SD
Anxiety	0.51	(0.56) a	0.74	(0.71) b
Depression	0.60	(0.74) a	0.89	(0.87) b
Hostility	0.58	(0.66) a	0.89	(0.79) b
Phobic anxiety	0.12	(0.25) a	0.36	(0.61) b

Note: Higher scores indicate poorer adjustment. Within rows, Means with different subscripts indicate the groups which were significantly different ( $p < .05$ ) by Tukey HSD.

Ridicule in the home environment as measured by the BSI subscales was significant. The Wilks' Lambda multivariate F demonstrated significance,  $F(8, 526) = 3.91, p < .000$ . The four subtests were significant (see Table 4.19). Tukey's post hoc analyses were conducted. For all four subtests, anxiety, depression, hostility, and phobic anxiety, the moderate and extensive groups were significantly different than the minimal group (see Table 4.20).

Table 4.19: Home Incidence of Ridicule: Analysis of the BSI Subscales

Variable	SS	df	MS	F	p
Anxiety	107.60	2,266	0.40	3.59	0.029
Depression	160.49	2,266	0.60	11.15	0.000
Hostility	134.04	2,266	0.50	9.01	0.000
Phobic anxiety	56.14	2,266	0.21	3.55	0.030

The IES-R subtests were not significant for the school incidence of ridicule. However, the IES-R subtests, measuring PTSD, were significant for ridicule experienced in the home environment. The subtests, avoidance, hyperarousal, and intrusive, were significant not only for PTSD manifested at home but also for PTSD reported in the school environment (see Table 4.21).

Table 4.20: Ridicule at Home: Means and Standard Deviations for the BSI Subscales

Psychopathology Index	Incidence					
	Minimal (n=89)		Moderate (n=89)		Extensive (n=94)	
	Mean	SD	Mean	SD	Mean	SD
Anxiety	0.45	(0.51) a	0.70	(0.69) b	0.71	(0.71) b
Depression	0.42	(0.50) a	0.79	(0.85) b	1.00	(0.92) b
Hostility	0.46	(0.46) a	0.79	(0.80) b	0.95	(0.83) b
Phobic anxiety	0.12	(0.22) a	0.29	(0.53) b	0.30	(0.58) b

Note: Higher scores indicate poorer adjustment. Within rows, Means with different subscripts indicate the groups which were significantly different ( $p < .05$ ) by Tukey HSD.

Table 4.21: Home Incidence of Ridicule: Analysis of the IES-R Subscales

Variable	SS	df	MS	F	p
Avoidant-home	4102.10	2,266	15.42	5.25	0.006
Hyperarousal-home	1042.85	2,266	3.92	4.92	0.008
Intrusive-home	2707.96	2,266	10.18	6.64	0.002
Avoidant-school	3416.64	2,266	12.84	4.41	0.013
Hyperarousal-school	499.02	2,266	1.88	4.95	0.008
Intrusive-school	1717.51	2,266	6.46	3.94	0.021



Tukey's post hoc tests were conducted. In the home environment, it was found that on the avoidant subtest the extensive group was significantly different from the minimal group. On both the hyperarousal and intrusive subtests, the extensive group was significantly different from both the minimal and moderate groups (see Table 4.22). With regard to the school environment, significant differences were found between the moderate and minimal groups on the avoidant, hyperarousal, and intrusive subtests (see Table 4.22).

Table 4.22: Ridicule at Home: Means and Standard Deviations for the IES-R Subscales

Psychopathology Index	Incidence					
	Minimal ( <u>n</u> =89)		Moderate ( <u>n</u> =89)		Extensive ( <u>n</u> =94)	
	Mean	SD	Mean	SD	Mean	SD
Avoidant-home	0.64	(2.21) a	1.74	(4.04) ab	2.78	(4.95) b
Hyperarousal-home	0.16	(0.93) a	0.42	(1.32) a	1.15	(2.97) b
Intrusive-home	0.25	(1.33) a	1.06	(2.43) a	2.21	(4.71) b
Avoidant-school	0.62	(1.99) a	2.27	(5.25) b	1.15	(2.77) ab
Hyperarousal-school	0.10	(0.58) a	0.78	(1.99) b	0.36	(1.17) ab
Intrusive-school	0.40	(1.65) a	1.47	(3.44) b	0.66	(2.23) ab

Note: Higher scores indicate poorer adjustment. Within rows, Means with different subscripts indicate the groups which were significantly different ( $p < .05$ ) by Tukey HSD.

These results indicate support for the hypothesis that there would be significantly more psychopathology among those who experienced ridicule than among those who did not. This was true for both those who experienced ridicule at home as well as those whose exposure was at school. The home experience of psychological punishment was found to be related to greater psychopathology. Moreover, the home experience of ridicule was also found to be related to PTSD experienced in the school environment.

#### Primary Hypotheses Summary

Two hypotheses; Hypothesis 1.5, which was to examine the relationship of home only versus school only corporal punishment, and Hypothesis 1.1, which was to address the experience of corporal punishment versus no experience with corporal punishment; could not be examined due to the vagaries of the sample. Specifically, exposure to corporal punishment in the home was almost universal among the participants.

Four hypotheses could be examined and were supported by the data. These were the hypotheses relating to school incidence of corporal punishment (Hypothesis 1.2), home incidence of corporal punishment (Hypothesis 1.3), home and school corporal punishment as opposed to home only corporal punishment (Hypothesis 1.4), and ridicule at school and at home (Hypothesis 2). There were both

similarities and differences between the results of the various hypotheses.

Although all of the primary hypotheses which could be examined were supported, the findings of some specific measures and a particular subset of a hypothesis were not significant. There were significant findings on the BSI for all hypotheses except Hypothesis 1.2. None of the measures for the Home Only (HO) group of Hypothesis 1.4 were significant. The IES-R for home environment was not significant for Hypothesis 1.2 and the School group of Hypothesis 2. Finally, the IES-R for school environment was not significant for Hypotheses 1.3, 1.4 and the School group of Hypothesis 2.

The support for the hypotheses was broad. The BSI was significant for Hypothesis 1.3, the Home and School (HS) group of Hypothesis 1.4, and for Hypothesis 2. The IES-R for home environment supported Hypothesis 1.3, the HS group of Hypothesis 1.4, and the Home group of Hypothesis 2. The IES-R for school environment supported Hypothesis 1.2, and the Home group of Hypothesis 2.

Noteworthy is the finding that on the BSI ridicule in the home environment (Hypothesis 2) was found to have more deleterious effects at a lesser level of experience than was exposure to corporal punishment (Hypotheses 1.3 and 1.4). In addition, ridicule at home was found to be related to PTSD at school as well as in the home

environment. In contrast, this effect was not found for ridicule at school. Furthermore, the experience of corporal punishment in a particular environment was not found to be related to PTSD in another environment; only exposure to ridicule was found to have this effect.

Psychopathology was found to be related to both corporal punishment and psychological punishment. The more extensive the incidence of punishment, the greater the degree of psychopathology. Ridicule was associated with deleterious effects beginning at a lower level of exposure than was corporal punishment.

### Secondary Hypotheses

The data that addressed the secondary hypotheses; that is, hypotheses 3 to 5.3, utilized the subjective dependent variables. These variables were generated by asking the participants how they believed they were affected currently due to their earlier experiences with punishment. Each of these hypotheses used a 2 group between-subjects design. T-tests were used for these analyses as each IV consisted of only two groups. Significance of at least an alpha of .05 was required to reject the null hypothesis.

### Hypothesis 3

There will be a significantly more positive perception of current effect among those who witnessed corporal punishment.

These analyses were conducted with the subjective dependent variables using t-tests. The subjective dependent variables were examined against the incidence of witnessing the physical punishment of someone either at school or at home. Those who indicated that they had not had the experience of witnessing corporal punishment were eliminated from these analyses, resulting in groups smaller in size than the total participant pool. Specifically, the home witness group (N = 142) was slightly greater than half of the total participant pool, while the group of school witness (N = 82) was slightly less than one-third of the total participant pool. Due to small cell size each of the incidence variables, home witnessing and school witnessing, were combined, resulting in 2 cells. Two levels were formed. One represented incidence of three times or less, and the other, more than 4 times.

The subjective dependent variables of both positive and negative effect were examined. None of these variables were significant. The hypothesis of subjective current positive effect in relation to witnessing corporal punishment was not upheld.

#### Hypothesis 4

There will be a significantly more positive perception of current effect among those who knew someone who was corporally punished.

For this hypothesis t-tests were used. The subjective dependent variables were examined against the incidence of knowing someone who was physically punished at school or at home. Those who indicated that they had not had the experience of knowing someone who experienced corporal punishment were eliminated from these analyses. This resulted in groups which were slightly greater than half of the total participant pool: home knowing (N = 160) and school knowing (N = 145). Due to small cell size, each of the incidence variables, home knowing and school knowing, were combined, resulting in 2 cells. One represented incidence of three times or less, and the other more than 4 times.

This hypothesis was partially upheld. The expected finding that knowing someone at school who had experienced corporal punishment would be perceived as having a positive effect was not supported. Yet, knowing a neighborhood friend or friends who received corporal punishment (home knowing) was reported to have a positive effect on the participant (see Table 4.23). Those who knew of someone who

Table 4.23: Relationship Between Knowing Someone Who Received Corporal Punishment and Subjective Positive Effect

Group	Number of Cases	Mean	SD	t-value	df	2-Tail Significance
≤ 3 times	85	1.41	0.75	-2.56	158	.011
≥ 4 times	75	1.79	1.01			

received corporal punishment 4 or more times reported that they were significantly more positively affected than those who reported knowing someone who received corporal punishment 3 times or less (see Table 4.23). The means indicate that those who knew about other's corporal punishment 4 or more times perceived this as having a mild effect while those who knew of another person's corporal punishment 3 times or less indicated that it was of no positive effect. The measure of subjective perception of negative effect was not significant.

#### Hypotheses 5.1, 5.2, and 5.3

These hypotheses investigated the subjective effect of corporal punishment at various ages. The hypotheses stated: There will be a significantly more positive perception of current effect among those who report being corporally punished when they were 5 years old or less. There will be both a significantly more positive and a significantly more negative perception of current effects among those who report being corporally punished when they were between the ages of 6 and 12 years. There will be a significantly more negative perception of current effect as indicated by the subjective ratings among those who report being corporally punished when they were between the ages of 13 and 17 years.

These hypotheses were examined with t-tests, comparing the effect of age at the time of occurrence or earliest occurrence by the

companion subjective dependent variables. The DVs measured whether or not the participants perceived a positive or negative effect in their adult lives due to having been physically punished as children or adolescents. This was done for the variables of spanking at home, paddling at school, and other physical punishment, both at home and at school. The variable of other hitting which did not include spanking or paddling was not included as the cell sizes were too small.

Hypothesis 5.3 could not be examined due to the small number of participants reporting first or only occurrence of corporal punishment between the ages of 13 and 17.

Analyses were conducted for the variables relating to the age of occurrence of paddling at school and physical punishment at school which did not include hitting. However, none of the variables for the age of occurrence of school punishment was significant. The correlations which required subsequent additional analyses using a gender split were those of school punishment relative to the subjective variables. Because none of the school punishment subjective variables was significant, no gender split analyses were conducted.

The home spanking variable consisted of two cells, one for those who reported earliest or only occurrence before the age of 5 years and the other for earliest or only occurrence between the ages of 6 and 12 years. The results were significant with regard to the age of occurrence (see Table 4.24). Those who experienced their first or only



exposure to spanking when they were younger perceived this as more positive than those for whom this occurred when they were older (see Table 4.24). The means indicated that those who were 5 or under at the time they were spanked perceived it to be moderately positive, while those who were between 6 and 12 years of age indicated that it had a mild positive effect. There were no other significant findings, measuring either positive or negative subjective effects.

Table 4.24: Relationship Between Age of Occurrence of Spanking and Subjective Positive Effect

Group	Number of Cases	Mean	SD	t-value	df	2-Tail Significance
≤ 5 years	160	3.07	1.01	2.05	186.61	.042
6 - 12 years	97	2.78	1.12			

Hypothesis 5.1 was upheld. Positive effects were attributed to corporal punishment administered at age 5 or younger. Hypothesis 5.2 received partial support as there were positive effects attributed to the experience of corporal punishment between the ages of 6 and 12 years; however, there were no negative effects attributed to corporal punishment administered during this time period. Hypothesis 5.3 could not be analyzed.

## Secondary Hypotheses Summary

The results of the secondary hypotheses were mixed.

Hypothesis 3 predicted that those who witnessed corporal punishment would perceive that experience to have a positive effect on them currently. There were no significant findings for this hypothesis.

Hypothesis 4 addressed the issue of having known someone who received corporal punishment and predicted that such an experience would be perceived as having a current positive effect. This hypothesis was upheld for home environment. However, those who knew someone at school who received corporal punishment did not indicate that it had a current positive effect, nor did they indicate that it was negative.

Hypothesis 5.1 investigated the experience of corporal punishment at age 5 or younger and predicted that it would have a current positive effect. This hypothesis was supported.

Hypothesis 5.2 examined the relationship between the experience of corporal punishment between the ages of 6 and 12 years and that it would have both a positive and a negative effect, currently. This hypothesis received partial support. There was a perception of positive effect but it was not perceived as negative.

Hypothesis 5.3 predicted that the experience of corporal punishment during the teenage years, 13-17, would have a negative effect. This hypothesis could not be examined.

### Summary of Findings

Corporal punishment was found to be related to psychopathology. The results of the Brief Symptom Inventory's subscales indicated that there was more anxiety, depression, and hostility than there was phobic anxiety. The lower means on the phobic anxiety subscale were consistent with the relative lack of significant findings on the Impact of Event Scale-Revised.

The investigation of ridicule found a pattern of results that indicated that there was a relationship between psychopathology and experiencing ridicule in the home and school. Moreover, the experience of ridicule in the home was found to be related to PTSD manifested in the school environment.

However, the experience of corporal punishment was perceived as being a positive one by those who reported receiving corporal punishment before the age of 13. The vicarious experience of corporal punishment implied in knowing someone who received it was also perceived as having a positive influence. Thus, participants believed childhood exposure to corporal punishment had a positive effect currently, despite the finding of deleterious effects related to corporal punishment.

## CHAPTER V

### DISCUSSION

The study was designed to investigate psychopathology relative to the experience of childhood corporal punishment, both in the home and in the school. Scholarly endeavor has previously focused little attention on the relationship between corporal punishment and psychopathology evident in average adults who experienced punishment during childhood.

There is much support for the use of corporal punishment of children both in the home (Greven, 1991; Straus & Mathur, 1996) and school (Hyman, 1990, 1997; Kennedy, 1995; Lawrence, 1998; Reinholtz, 1979; Rust & Kinnard, 1983). Both historical precedent (Greven, 1991) and current supporters (Baumrind, 1966, 1989, 1996, 1997; Dobson, 1987, 1992; Fugate, 1996, Larzelere, 1993; Larzelere, Schneider, Larson, & Pike, 1996) encourage its use. Moreover, the belief that spanking is an appropriate method of training children is so pervasive that parents who do not use corporal punishment have been criticized by other members of their family and community (Straus & Mathur, 1996). It is a self-perpetuating cycle. Those who experienced corporal punishment in the home or in school are more likely to be advocates of the practice (Greven, 1991; Lawrence, 1998; Rust & Kinnard, 1983; Straus, 1996). However, changes are occurring. There has been a

slight decrease in the use of corporal punishment by parents (Straus, 1994; Straus & Stewart, 1998). In addition, 27 states prohibit the use of corporal punishment in the schools (“Danger Zones,” 1998; “The Last ? Resort,” as cited in Richardson, Wilcox, & Dunne, 1994).

Findings supporting the use of corporal punishment between the ages of 2 and 6 included studies by Larzelere et al. (1996) and Baumrind (1967, 1971). Others have shown that physical punishment at any age is detrimental (e.g., Laub and Sampson, 1995; Luby & Morgan, 1997; Strassberg, Dodge, Pettit, & Bates, 1994; Ramsey, Patterson, & Walker, 1990). Specifically, research has demonstrated that anxiety and depression (e.g., Luby & Morgan, 1997; Turner & Finkelhor, 1996), post-traumatic stress disorder (Hyman, 1990; Krugman & Krugman, 1984), and anti-social behaviors (e.g., Cohen & Brook, 1995; Straus, Sugarman, & Giles-Sims, 1997) are related to corporal punishment.

In this study, 272 participants, between the ages of 18 and 25, completed questionnaires inquiring about the incidence of corporal and psychological punishment in their childhood, both at home and at school. To assess current psychopathology, they completed the Brief Symptom Inventory (Derogatis, 1993) and two administrations of the Impact of Event Scale-Revised (Weiss & Marmar, 1997), one for the worst experience at home and another for the worst experience at school. The analyses revealed very few had experienced no physical

punishment at home. Higher levels of anxiety, depression, post-traumatic stress disorder (PTSD), and hostility were present in those who had experienced both corporal and psychological punishment, with more psychopathology related to greater incidence.

This chapter is divided into the following sections: primary hypotheses discussion, secondary hypotheses discussion, contribution of the results, implications for counselors, recommendations for future research, and conclusions. Under the headings of primary hypotheses discussion and secondary hypotheses discussion, the findings of each hypothesis will be reviewed, the convergence or divergence with the literature and the implications of the findings will be discussed, and appropriate statistical commentary will be provided. In the section titled contribution of the results, the implications and limitations of the study in its entirety will be examined. Finally, implications for counselors and recommendations for future research will be explored and conclusions will be drawn.

### Primary Hypotheses Discussion

#### School Incidence of Corporal Punishment

The hypothesis predicted that there would be more psychopathology; specifically, anxiety, depression, hostility, phobic anxiety, and PTSD, among those who experienced corporal punishment at school than among those who had not been physically

punished. Only post-traumatic stress disorder (PTSD) manifested in the school environment was significantly related to the experience of corporal punishment at school. The subscale measuring intrusion was the only one of the subscales found to be significantly related to corporal punishment at school. These intrusive experiences might include such events as having dreams about the corporal punishment experience, repeatedly remembering the event and being upset about it, behaving or feeling as though the event is recurring (e.g., flashbacks, or hallucinations), experiencing intense psychological distress or physiological reactivity if environmental or internal cues reminded one of the corporal punishment (DSM-IV, 1994, p. 428). Thus, these findings indicate that exposure to corporal punishment is related to reexperiencing the event.

In this study, the finding that symptoms of PTSD were linked to corporal punishment at school was similar to the findings of Hyman (1990) and Krugman and Krugman (1984). However, the results of the current study found only intrusiveness, or reexperiencing, of the trauma to be significantly related to corporal punishment; whereas, others (Hyman, 1990; Krugman & Krugman, 1984) reported evidence to support the manifestation of avoidance and hyperarousal as well as intrusiveness. Thus, these researchers indicated that schoolchildren exhibited more of the criteria necessary for diagnosis of PTSD than did the current sample of college students.

The finding of support for the PTSD criterion of intrusiveness in this sample is important because re-experiencing the trauma is the primary method used for processing of traumatic experiences (Pynoos, 1994). Thus, since the participants in this study reported years later that they continued to experience intrusiveness of memories of corporal punishment indicates that it was a traumatic event in their lives. The discrepancy between the finding of all three criteria among the schoolchildren and the finding of only intrusiveness in the current study may be due to the elapsed time between the event and the collection of the data in the current study. Alternatively, the participants in the current sample may not have ever experienced all of the PTSD criteria.

No relationship between the school incidence of corporal punishment and either anxiety or depression was found in the literature. Therefore, the lack of findings on these subscales in this study is convergent with previous research. The literature identified aggressiveness (Hyman, 1990; Lawrence, 1998; Straus, 1991; Welsh, 1978) and school phobia (Hyman, 1990) as being related to corporal punishment at school. However, in this study a significant relationship was not found. The reasons for this may be due to other factors prevalent in the individuals, family, or community; such as, a belief that accepting punishment is a manly thing to do (Hyman, Clarke, & Erdlen, 1987). Alternatively, the lack of variability among the



experience group for school punishment, which resulted in an inability to create divisions based on greater exposure to corporal punishment at school, may have been a factor in the lack of significant findings on the BSI.

This analysis divided the sample into those who experienced corporal punishment and those who did not. The two groups were approximately equal in size. As the majority of the participants who had experienced corporal punishment were only exposed once or twice, it was not possible to differentiate the exposure to corporal punishment into minimal, moderate, or extensive experience. The inability to examine this hypothesis with such specificity may have reduced the likelihood of producing statistical significance.

#### Home Incidence of Corporal Punishment

The hypothesis predicted that there would be significant differences in psychopathology; specifically, anxiety, depression, hostility, phobic anxiety, and PTSD, among those who had been corporally punished at home. The participants were divided into groups of extensive, moderate, or minimal to no experience with corporal punishment. Minimal punishment was defined as punishment which occurred no more than three times. Punishment of one type occurring 4 or more times or a combination of types of punishment; such as, one type of punishment occurring 3 times and another

occurring once or twice, would receive a moderate rating. Extensive punishment would be of more than one type and, for example, would necessarily have occurred more than 5 times for one type of punishment and at least once or twice for another or three times for two types of punishment and once or twice for a third.

The analyses were conducted using MANOVA. No interactions were found. There were main effects. The findings indicated that there were significant differences among the groups on the global index of the Brief Symptom Inventory (BSI). In addition, PTSD was found to be present in the home environment. The means of the global indexes for the BSI and the IES-R indicated that the extensive experience group exhibited more psychopathology than either the minimal or moderate experience groups. The subscales of depression, hostility, and phobic anxiety were significant; with anxiety approaching significance. The subscale means indicated that the extensive experience group had more difficulty with adjustment than the groups who had less exposure. All of the IES-R subscales, avoidance, hyperarousal, and intrusiveness, were significant. The means for the extensive experience group indicated poorer adjustment.

Home incidence of corporal punishment was found to be related to the symptomatology of depression, hostility, phobic anxiety, and PTSD. PTSD was manifested in the home environment only and there was no significant association between exposure to corporal

punishment at home and the manifestation of PTSD at school. These findings are congruent with previous research linking depression and phobic anxiety with the experience of being corporally punished (Durant, Getts, Cadenhead, Emans, & Woods, 1995; Luby & Morgan, 1997; McCloskey, Figueredo, & Koss, 1995; Pynoos, 1994; Straus & Kantor, 1994; Turner & Finkelhor, 1996). The poorer adjustment with greater exposure to corporal punishment is similar to the finding of adult reports of depression and suicidal ideation reported by Straus and Kantor (1994). This research found that hostility was significantly related to the experience of corporal punishment and is supported by the previous research connecting the experience of corporal punishment with the manifestation of aggressiveness (e.g., Bates, Pettit, & Dodge, 1995; Cohen & Brook, 1995; Luby & Morgan, 1997; Ritchie, 1983) continuing into adulthood (Huesmann, Eron, Lefkowitz, & Walder, 1984; McCord, 1979, 1991; Straus, 1991).

Even though this research study found PTSD to be correlated with exposure to corporal punishment in the home, this research cannot be compared with other research because the home incidence of corporal punishment has not been addressed in the PTSD literature. The evidence is confined to the current understanding of PTSD as it is manifested in children after being exposed to stressors such as accidents, natural disasters, kidnapping, abuse, and incest (McNally, 1993; Pynoos, 1994; Pynoos et al., 1996; Terr, 1995) as well as

corporal and psychological punishment in the schools (Hyman, 1990; Krugman & Krugman, 1984). Although suggesting that PTSD can occur as a result of long-term exposure to a punitive home atmosphere is controversial (Goodwin, 1996), the results reported by Hyman (1990) and Krugman and Krugman (1984) indicated that a relationship between punishment and PTSD did exist. The symptoms of intrusiveness, hyperarousal, and avoidance were significant for this hypothesis. These symptoms were experienced by children following exposure to traumatic experiences (McNally, 1993; Pynoos, 1994; Pynoos et al., 1996; Terr, 1995). Thus, the findings in this study are congruent with the research on PTSD occurring in childhood.

This research contributes to the literature in revealing an association between corporal punishment and deleterious outcome. The significant differences were between those who had experienced extensive punishment and those whose exposure was less than extensive. Although extensive punishment might be regarded as within the normative use of punishment, it was more frequent and the type more varied than for the lesser levels of punishment. Therefore, the implication is that extensive exposure to corporal punishment is related to more harmful effects.

The entire sample was used for the analysis of this hypothesis (Home Incidence of Corporal Punishment). This provided greater power than the statistical analysis of a subsequent hypothesis.

However, this examination of the effects of home incidence of corporal punishment was not an exclusive examination of individuals who experienced corporal punishment only in the home. That analysis was accomplished by the following hypothesis.

#### Home and School Incidence of Corporal Punishment

It was expected that more psychopathology would be manifested in those individuals who experienced corporal punishment in both the home and the school environments than those who experienced it in only one environment. It was necessary to compare those who had experienced corporal punishment in both home and school environments with those who had experienced it in the home only because too few participants had only been punished at school. In this analysis, separate MANOVAs were used for each of the two groups due to the fact that the experience of corporal punishment was nearly universal. Therefore, the variables of home and school (HS) and home only (HO) were necessarily related. The number of participants was 126 and 146, respectively. Thus, the sample for the analysis of this hypothesis was approximately half of that available for the other hypotheses.

The independent variable of HO was not significant for either the BSI or the IES-R for home or school environment. Therefore, no further analyses were conducted with the HO variable.

The HS variable was significant on both the global index of the BSI and for the IES-R for home incidence. However, the Wilks' Lambda criterion was not significant for the home incidence IES-R subscales; therefore, the three PTSD criterion were not examined. The IES-R for school incidence was not significant. The BSI subscales were significant in all domains investigated; that is, anxiety, depression, hostility, and phobic anxiety. For all of the subscales, the significant differences were between the moderate and extensive groups. The means for the extensive group were indicative of greater deleterious effects than those of the moderate group.

Since previous research has not investigated the combined effect of corporal punishment experienced both at home and at school, it is not possible to cite research that is directly relevant to the effect of exposure to corporal punishment in both environments. However, there is convergence with research that examined the effects of parental use of physical punishment. McCloskey et al. (1995) found both anxiety and depression to be related to the use of physical punishment. The significant findings in this study on the measure of depression are congruent with earlier research linking corporal punishment with depression (Durant et al., 1995; Turner & Finkelhor, 1996) and the degree of the depression was positively correlated with the frequency of the punishment (Straus & Kantor, 1994). The aggressiveness which was found to be related to exposure to corporal

punishment (Huesmann et al., 1984; Luby & Morgan, 1997; Patterson & Yoerger, 1995; Ritchie, 1983; Weiss, Dodge, Bates, & Pettit, 1992) is congruent with the current finding of hostility. Finally, previous research has reported a link between corporal punishment and phobias (Pynoos, 1994).

School incidence of corporal punishment has been associated with aggressiveness (Clarke, Lieberman-Lascoe, & Hyman, 1982; Lawrence, 1998; Maurer, 1990; Ritchie, 1983; Straus as cited in Hyman, 1995) and school phobia (Hyman, 1990). Thus, the finding that the HS variable is linked to these constructs is convergent with the literature. However, the literature revealed no relationship between depression and corporal punishment administered at school. Therefore, the current finding provides some evidence to suggest that there may be a link between depression and corporal punishment experienced at school when the student is also exposed to corporal punishment at home.

The IES-R global index for home incidence was significant for the HS group. This indicates that there was PTSD symptomatology present, although the power was not great enough to provide a significant Wilks' Lambda criterion. The finding of significance on the global scale is congruent with the findings of Hyman (1990) and Krugman and Krugman (1984) who found that PTSD is related to corporal punishment at school. There is no literature to support the

association of PTSD and corporal punishment at home. Therefore, this finding provides some evidence to suggest that such a relationship may exist.

The lack of significance of the IES-R for school incidence is contrary to the research of Hyman (1990) and Krugman and Krugman (1984) who reported that PTSD was related to school administered corporal punishment. In addition, the fact that the IES-R was not significant for school incidence is not congruent with the findings for Hypothesis 1.2 of this study. This may be due to low power, which is discussed below.

Furthermore, in this hypothesis there were no significant findings for corporal punishment in the home only (HO). This is divergent with both the previous literature and the findings of Hypothesis 1.3. This may be due to the fact that Hypothesis 1.3 included all participants; thus, the effect may have been due to the inclusion of those who experienced corporal punishment at school as well as in the home.

The lack of statistical significance for the minimal group on the various measures and for all the IES-R subscales was possibly due to low power. The cell size of the minimal group was 27, which was approximately one-half the number of the other two groups. The combination of these two deficiencies could be responsible for the lack of significance.



Nonetheless, the lack of significant findings among those who reported receiving physical punishment only at home lends credence to the contentions of Baumrind (1966, 1989, 1996, 1997), Larzelere (1993) and Larzelere et al. (1996) that spanking is an acceptable part of discipline training. However, the HS findings indicate evidence of anxiety, depression, hostility, phobic anxiety, and post-traumatic stress disorder. This implies that there is a relationship between psychopathology and corporal punishment among those who were exposed to physical punishment in two environments.

### Ridicule

The hypothesis predicted that there would be more psychopathology among those who experienced ridicule than among those who did not. Ridicule was examined in both the home and the school environments. There was no interaction between the two environments. However, there were main effects for each environment.

Psychological punishment at home was significantly related to psychopathology as measured by the global index of the BSI and the IES-R for both home and school environments. Ridicule at school was significant only for psychopathology measured by the BSI.

The analysis of the school incidence of ridicule revealed subscale means of the BSI that were significant for all four domains

measured: anxiety, depression, hostility, and phobic anxiety. As expected, the students who experienced psychological punishment at school had higher mean scores, indicative of a more deleterious effect. That is, there was more anxiety, depression, hostility and phobic anxiety in this group. School incidence of ridicule was not found to be related to PTSD in either the school or the home environments.

Psychological punishment in the home was also significantly related to elevated scores on the anxiety, depression, hostility, and phobic anxiety subscales. The difference was between those who experienced minimal ridicule and those who experienced a moderate amount or more. This indicates that experiencing even a moderate amount of ridicule is related to poorer adjustment. The analysis of the IES-R subscales revealed that ridicule at home was manifested in PTSD in both the home and school environments. Exposure to ridicule at home was found to be related to avoidance, hyperarousal, and intrusiveness, the three criteria domains of PTSD, in both the home and school environments.

The literature on psychological abuse, though sparse, indicated that there was anger (Egeland & Erickson, 1987), anti-social behavior (Browne & Hamilton, 1998; Kosson, Steuerwald, Newman, & Widom, 1994), and depression (Braver, Bumberry, Green, & Rawson, 1992). The present findings are convergent with the literature on psychological punishment at home. However, the results provide

evidence of the presence of anxiety, phobic anxiety, and PTSD. This is psychopathology not previously reported.

Hyman (1990) and Krugman and Krugman (1984) reported PTSD symptoms related to the experience of psychological punishment at school. The current results were not significant for PTSD associated with school incidence of psychological punishment. Therefore, these findings are not concurrent with the existing literature on the school incidence of corporal punishment. PTSD has been associated with the school incidence of ridicule (Hyman, 1990; Krugman & Krugman, 1984); however, there were no significant findings on this dimension in the current study. Anxiety, depression, hostility, and phobic anxiety were found to be related to psychological punishment at school. In contrast, only school phobia (Hyman, 1990; Krugman & Krugman, 1984) has been previously associated with ridicule at school.

These results imply that there is a significant relationship between deleterious effects and exposure to ridicule. Furthermore, exposure to ridicule at home bears a relationship to psychopathology manifested both in the home and at school. Yet, psychological punishment occurring at school was related to the manifestation of anxiety, depression, hostility, and phobic anxiety; but it was not related to PTSD. Therefore, these results indicate that the experience of

ridicule is more detrimental when it emanates from parents than when an authority figure at school is the originator.

The entire sample was used for these analyses. The school experience of ridicule was divided into two groups, those who experienced psychological punishment, and those who did not. If it had been possible to differentiate between those whose experience was more extensive than others, significance may have been found for the IES-R.

#### Summary of Significant Findings

There were significant findings for all of the hypotheses except Hypotheses 1.1 and 1.5, which could not be examined. A summary of the results follows.

Both the global index of the BSI and the subscales of depression, hostility, and phobic anxiety were significant for the Hypothesis of 1.3 (home incidence of corporal punishment); in addition to the aforementioned subscales, anxiety was also significant for Hypotheses 1.4 (HS incidence of corporal punishment), and 2 (ridicule).

PTSD present in the home environment was significant for Hypotheses 1.3, 1.4, and 2. All of the PTSD subscales were significant for home incidence of corporal punishment and psychological punishment. The global index of the IES-R was significant for the incidence of corporal punishment in both the home and school

environment; however, the Wilks' Lambda criterion was not met for the subscales.

Manifestation of PTSD at school was found only for Hypotheses 1.2 (school incidence of corporal punishment) and 2 (ridicule). Hypothesis 1.2 examined corporal punishment in the school and used the entire sample. In this case, only the intrusive subscale was significant. Hypothesis 2 explored the effect of ridicule both at home and at school. There were significant results demonstrating a relationship between ridicule at home and the presence of PTSD in the school environment.

The primary hypotheses demonstrate that there is a statistically significant relationship between corporal and psychological punishment and the manifestation of psychopathology. Furthermore, ridicule is associated with more deleterious psychopathological effects than is corporal punishment.

### Secondary Hypotheses Discussion

The secondary hypotheses utilized a Likert-like scale to measure the subjective positive and negative effect of witnessing corporal punishment or knowing someone who was corporally punished. The same scale was also employed to measure the subjective positive or negative effect of experiencing corporal punishment at various ages. No measures of psychopathology were

used in assessing the secondary hypotheses. Rather, the emphasis was on measuring personal belief regarding the effect of corporal punishment.

### Witnessing and Knowing

There were two hypotheses addressing the issues of witnessing corporal punishment or knowing someone who was corporally punished. It was predicted that knowing someone who had experienced corporal punishment or witnessing the punishment would be reported as having a positive effect on the participant.

Hypothesis 3, which investigated the experience of witnessing corporal punishment, was not supported. There were no significant findings.

Hypothesis 4, which predicted that a positive effect would be reported due to knowing someone who had experienced corporal punishment, was partially supported. Knowing someone at school who experienced corporal punishment was not supported as there were no significant findings. However, knowing a neighborhood friend or friends who received corporal punishment was perceived to have a positive effect on the participant currently. In addition, it was the awareness of several occurrences of corporal punishment that created the effect.

This finding may indicate that the participants were affected by vicarious learning due to knowing about a friend's corporal punishment. Alternatively, the implication may be that the participants gained something else from observation. It is possible that such an objective viewpoint taught something about corporal punishment that is not possible when the punishment is one's own. This might explain the finding that the positive effect was associated with multiple experiences of knowing someone who was corporally punished. However, this is supposition and further research would be needed to determine why knowing of another person's corporal punishment was perceived to be a positive experience.

#### Age at Exposure to Corporal Punishment

There were three hypotheses, Hypotheses 5.1, 5.2, and 5.3, addressing the issue of age at first or only occurrence of corporal punishment. These hypotheses were designed to explore the subjective effect of corporal punishment at 5 years of age or less, between the ages of 6 and 12 years, and between the ages of 13 and 17 years. It was predicted that the group who experienced corporal punishment before the age of 6 years would report that it had a positive effect; the group who experienced corporal punishment between the ages of 6 and 12 would report it to have had both a

positive and a negative effect; and the group who experienced it during the teen years would report a negative subjective effect.

The group that had their only experience or first experience with spanking before the age of 6 reported that it had a moderately positive effect. Therefore, Hypothesis 5.1 was supported. The group that experienced spanking for the first or only time between the ages of 6 and 12 years reported that it had a mild positive effect on them. However, they reported no negative effect. Therefore, Hypothesis 5.2 was partially upheld. Finally, the group whose first reported incidence of corporal punishment was between the ages of 13 and 17 lacked sufficient cell size. Therefore, Hypothesis 5.3 was not examined.

A belief that spanking is an appropriate and positive method of child-rearing is implied in these findings. This was found to be true not only for those whose first or only occurrence was before the age of 6 but also for those whose experience occurred between the ages of 6 and 12 years. This positive belief in the use of spanking is congruent with the research of Baumrind (1966, 1967, 1971), Larzelere (1993), and Larzelere et al. (1996) who found it an appropriate method of teaching discipline to children from 2 to 6 years. It is also congruent with the traditional belief that spanking is good because he or she turned out all right. In addition, the theory of cognitive dissonance (Festinger, 1957) validates the positive support of spanking given by the recipients. The fact that those between the ages of 6 and 12 found it to



be a positive influence without a concomitant negative perception may be due to the effects of cognitive dissonance.

### Contribution of the Results

The manifestation of psychopathology was displayed in both similarities and differences between the hypotheses. It is important to note that while there were significant findings for both Hypotheses 1.2 and 1.3, school and home incidence, respectively; the results for Hypothesis 1.4, which divided the sample into those who experienced corporal punishment in the home only and those whose exposure was both at school and home, was distinctly different. Taken together, these findings indicate that among people who almost universally experienced corporal punishment, there is a relationship between exposure to physical punishment in two environments and psychopathology. Indeed, it is corporal punishment in the school environment that is related to the negative effect. The group who received the most extensive punishment, rather than those who were exposed to minimal or moderate punishment, displayed poorer adjustment (see Table 5.1). Although these results must be tempered with the knowledge that there was no control group with which to compare, they do lend support to the contention that the normative

Table 5.1: Comparison of Findings Across Primary Hypotheses

Instruments	1.2: Corp. P. ^ *		1.3: Corp. P.		1.4: Corp. P.		2: Ridicule	
	School	Home	Home	Home Only	Home & School	Home	School	Home
BSI global	n.s.	min, mod < ext	n.s.	n.s.	mod < ext	min < mod, ext	no exp < exp	no exp < exp
Anxiety	--	n.s.	--	--	mod < ext	min < mod, ext	no exp < exp	no exp < exp
Depression	--	min < ext	--	--	mod < ext	min < mod, ext	no exp < exp	no exp < exp
Hostility	--	min, mod < ext	--	--	mod < ext	min < mod, ext	no exp < exp	no exp < exp
Phobic Anxiety	--	mod < ext	--	--	mod < ext	min < mod, ext	no exp < exp	no exp < exp
<hr/>								
IES-R global-home	n.s.	min, mod < ext	n.s.	n.s.	mod < ext	min, mod < ext	n.s.	n.s.
Avoidant	--	mod < ext	--	--	Wilks' Lambda	min < ext	--	--
Hyperarousal	--	mod < ext	--	--	not significant	min, mod < ext	--	--
Intrusive	--	min, mod < ext	--	--	for subscales	min, mod < ext	--	--
<hr/>								
IES-R global-school	no exp < exp	n.s.	n.s.	n.s.	n.s.	min < mod	n.s.	n.s.
Avoidant	n.s.	--	--	--	--	min < mod	--	--
Hyperarousal	n.s.	--	--	--	--	min < mod	--	--
Intrusive	no exp < exp	--	--	--	--	min < mod	--	--

^ N = 272 except Hypothesis 1.4 which was split into Home only (N = 146) and Home and School (N = 126).

\* Corp. P. = corporal punishment, n.s. = not significant, min = minimal, mod = moderate, ext = extensive, exp = experience

use of physical punishment at home is an appropriate method of teaching discipline (Baumrind, 1966, 1989, 1996, 1997; Larzelere, 1993; Larzelere et al., 1996). The results also support the reports of others who have suggested that corporal punishment is an inappropriate method of control in schools (Hyman, 1990, 1995; Hyman, Bongiovanni, Friedman, & McDowell, 1977; Maurer, 1979, 1990, 1998 ; Skinner, 1979).

Exposure to ridicule, Hypothesis 2, was related to psychopathology to a greater degree than was experience with corporal punishment. This was true with regard to two different facets. The significant differences were frequently between the minimal exposure and moderate or more extensive exposure groups. In addition, exposure to psychological punishment at home not only bore a relationship to anxiety, depression, hostility, phobic anxiety, and PTSD manifested in the home environment; it was also related to PTSD at school. That is, there was a transfer of the effect into the school environment. This did not occur in relation to exposure to corporal punishment (see Table 5.1). These two differences, the poorer adjustment beginning with moderate exposure to ridicule and the transfer effect, imply that psychological punishment is more deleterious than is corporal punishment.

Hypothesis 1.4 seems to demonstrate that it is the cumulative effect of home and school punishment that is most related to

psychopathology. In the case of psychological punishment (Hypothesis 2), it is the experience of ridicule at home that bears the greater relationship to psychopathology. Neither of these findings exist in the literature; therefore, they substantially inform the discussion on the effects of corporal and psychological punishment.

### Limitations

Significant effects were found which suggest that punishment and psychopathology are linked. The hypotheses were supported. However, this was a correlational study and causation cannot be inferred. Caution must be exercised in interpreting that punishment is the reason for the psychopathology. Although it is possible that such a conclusion may be accurate, it is also possible that there are other explanations. One such alternative is that children who exhibit psychopathology are more likely to be punished (Muller, 1996; Rosemond, 1998). Perhaps it is not the corporal punishment alone that is influential in the development of anti-social behavior, but the parenting style that may accompany it. Patterson (1975) and others (Patterson, DeBaryshe, & Ramsey, 1989; Patterson & Yoerger, 1995; Simons, Wu, Conger, & Lorenz, 1994) suggest that inconsistency and inadequate monitoring of children and adolescents, in addition to physical punishment, are associated with the development of anti-social behavior. Another possibility is that there is a third factor that

explains both the psychopathology and the propensity to be punished. One intriguing idea has been examined by Amen, Stubblefield, Carmichael, and Thisted (1996). They found brain physiology and function to be different in people who are violent or aggressive. There may also be a genetic component to aggression (Gottesman, Goldsmith, & Carey, 1997; Renfrew, 1997), depression (Gershon, Dunner, & Goodwin, 1971), and other psychopathology (Kroll, 1993). Certainly, it is not a simple matter of proclaiming that children who are punished develop psychopathology. Human behavior is extremely complex and behavior of individuals is dependent on genetic profile, brain insult, compromised physical functioning, learning, and the social situation in which the behavior occurs.

The psychopathology of the participants may have effected their recall of ridicule or corporal punishment experiences. For example, it is possible that a person who was depressed at the time he or she was answering the questionnaires may have been more likely to remember corporal punishment than someone who had a more positive viewpoint. To the extent that psychopathology effected the report of punishment experiences, it is a limitation.

The study used the Event Summary designed by the investigator to assess the experience of punishment. Although the scores on this instrument were found to have respectable Cronbach's alpha coefficients indicating good reliability, the study might have been

improved by using another scale such as the Conflict Tactics Scales for the assessment of punishment experience. The Conflict Tactics Scale has been used in many studies (e.g., Browne & Hamilton, 1998; Muller, 1996), has good reliability and validity (Straus & Hamby, 1997), and its use might have increased generalizability of the study. If a researcher wished to ask about positive or negative perceptions of the event, such questions could be asked separately.

On the Event Summary the questions of knowing and witnessing corporal punishment were confounded. Although the intent was for participants to respond to the questions about knowing someone as the experience of being aware of the event without witnessing it, this was not made clear in the statements on the questionnaire. Therefore, it is unclear whether participants who answered affirmatively to knowing a friend who had experienced corporal punishment also witnessed the event. Another improvement to the Event Summary would have been a different scale for the positive and negative subjective experience of punishment. Specifically, the scale increments were: no positive (or negative) effect, mild, moderate, or significant effect. It is not obvious what is meant by the response of no positive (or negative) effect. It was the intention of the investigator to provide an option if the participant perceived a mild to significant effect on the opposite scale. However, upon further examination it is clear that a finding of no positive effect has little

meaning. Perhaps a better design would be to provide an option of “not applicable” in addition to the option of “never happened.”

Another limitation is the fact that the Event Summary did not provide a method for accurately determining when the punishment ceased. Therefore, it is not known whether punishment was limited to the preschool years or extended into adolescence. The relevance of this distinction is due to the association between adolescent exposure to punishment and negative effects (e.g., Browne & Hamilton, 1998; Straus & Donnelly, 1993; Straus & Kantor, 1994). Although preschool punishment is recommended by Baumrind (1966, 1989, 1996, 1997), Larzelere (1993), and Larzelere et al. (1996) it too has been associated with deleterious outcomes (e.g., Luby & Morgan, 1997; Strassberg et al., 1994). Determination of the time period during which corporal punishment occurred would have been informative relative to the literature.

The IES-R was administered twice, once for worst punishment experience at home and again for worst punishment experience at school. No protocol was provided to permit participants the opportunity to delineate the particular experience about which they were reporting. Obtaining this information would have provided valuable information for this study.

In summary, the study might have been improved by asking some additional questions. In addition, alteration of the Event

Summary would have provided clarification for some issues. Finally, this study was correlational in design and causation may not be inferred.

### Implications for Counselors

These findings indicate that there is a relationship between psychopathology and both corporal and psychological punishment occurring in childhood. Corporal and psychological punishment is frequently disregarded as a factor in a person's psychological profile (Zaidi & Foy, 1994), compounding this is the frequent lack of recognition by the person themselves that these events may be significant (Rausch & Knutson, 1991; Knutson & Selner, 1994). These results provide evidence that the incidence of ridicule and physical punishment should be assessed and any compromise in functioning should be addressed. Failure to do so may result in poorer therapeutic outcome if these factors in the development of psychopathology are overlooked. It has been shown that the existence of a history of physical abuse is associated with the development of PTSD due to a severe stressor occurring later in life, demonstrating that early experiences can increase the severity of later psychopathology (Zaidi & Foy, 1994). This finding provides additional evidence for the need to assess childhood punishment experiences.



Clinical practice may also involve children, either directly, in family therapy, or when addressing parenting issues with an adult client. Assessment should include an exploration of the extent of the use of corporal punishment by parents. It is also imperative that an examination of the presence of ridicule be conducted as these findings suggest that psychological punishment is more damaging at a lower intensity than is corporal punishment. If the assessment is positive for psychological punishment or extensive corporal punishment the counselor will need to assist parents in learning to apply appropriate alternatives.

The American School Counselor Association (1995) has charged its members to work within their schools to effect change in the use of corporal punishment and the policies that support them. In addition, it is incumbent upon school counselors to address this issue with the public and local, state, and federal legislatures. The findings of this study provide evidence of a relationship between corporal punishment used in the schools and the development of psychopathology. There is an exigency to eliminate the use of corporal punishment in the schools.

#### Recommendations for Future Research

Perhaps the most prominent question raised by this study is: How is the presentation of psychopathology different for people who did not experience corporal punishment as children? If it were

possible to find a control group of individuals for whom there was no exposure to corporal punishment and compare them to groups of individuals who had experienced physical punishment, the information gained would be far more useful than the results of this study.

There are other independent variables worthy of examination. The effect of gender and its relationship to the experience of corporal punishment and the presentation of psychopathology is a topic of interest. In addition, use of a more culturally diverse sample would be an appropriate adjustment.

Given that the child's psychopathology may effect the parental use of physical punishment (Muller, 1996; Rosemond, 1998) it would be appropriate to examine the effect of particular psychological profiles as they influence the use of corporal punishment.

Researchers found that the psychological profiles of parents (Famularo, Fenton, Kinscherff, Ayoub, & Barnum, 1994) and teachers (Rust & Kinnard, 1983) are a factor in the use of corporal punishment. Although more research with an emphasis on parents or teachers might be fruitful, an examination of the influence of the child's psychopathology would also be informative. Optimally, use of longitudinal research designs would provide information regarding cause and effect.

An expansion of this study might examine how these participants will parent their own children. It would be helpful to

learn if the extensiveness of their own punishment bears a relationship to the decision to use corporal punishment. Furthermore, a comparison of a person's prediction regarding use of corporal punishment with future children against actual use relative to personal childhood punishment experiences would inform the discussion on corporal punishment.

There are several other dependent variables worthy of examination. These include the use of alcohol and other drugs by persons who were exposed to corporal punishment. While this study examined only the Brief Symptom Inventory (BSI) subscales of anxiety, depression, hostility, and phobic anxiety, it might be productive to determine the relationship between corporal punishment and the other subscales. Another approach would be to investigate how exposure to corporal punishment is related to career success or satisfying interpersonal relationships.

An improvement to the design would be to determine clinical significance as well as statistical significance of the psychopathology. It would also be appropriate to conduct individual interviews by a researcher blind to the results of the inventories. Such a research methodology would both improve the accuracy of the findings and be appropriate ethically.

A prospective, longitudinal design with a control group would be the ideal study. This might be possible if interviews of expectant

parents were conducted and participants selected on the basis of their stated philosophical views on the use of corporal punishment. It would be necessary to select far more parents than needed for statistical analysis to guard against attrition and the expectation that the use and non-use of corporal punishment by some parents would differ from philosophical ideal during pregnancy. The participants could be followed for twenty-five years or longer, providing information on the long-term psychological effects of corporal punishment or its absence. The design might include a punishment diary similar to that used by Larzelere et al. (1996) and home visits every quarter. The participants would be generously compensated for their effort. Clearly, this would be an enormously expensive study. However, this proposed study is ideal and would provide information inaccessible when using retrospective self-reports of punishment experiences.

### Conclusions

The results from this study indicate that among average young adults (capable of independent living and not incarcerated nor patients in a mental hospital), the exposure to either corporal or psychological punishment during childhood may be associated with the presence of psychopathology. Specifically, the results indicate that children who are exposed to moderate ridicule or extensive corporal punishment are

at risk for negative psychological outcomes that continue into adulthood. Psychological punishment is related to greater deleterious effects than is corporal punishment. Nonetheless, the participants perceived their experience with spanking as having a positive effect on themselves as adults.

As a clinician it is important to inquire about the existence of corporal or psychological punishment both in the client's background as well as current use with children. Clinicians must also be aware that clients may not recognize the impact of their punishment experience. Completing a thorough history including assessment of punishment as well as addressing those issues, if present, may improve therapeutic outcome.

The need for continued research into the relationship between psychopathology and both corporal and psychological punishment is evident. It would be particularly informative if investigators included a control group comprised of persons who had not experienced corporal or psychological punishment. In addition, the use of longitudinal designs could more adequately inform the discussion.

Controversy surrounds the issue of corporal punishment. There is evidence to support its use, especially for young children. Evidence also exists, including this study, indicating that there is a relationship between punishment experiences and deleterious effects continuing into adulthood. Only continued research can address the

conflicting beliefs about corporal punishment. Specifically, do the benefits provided by the immediate efficacy of corporal punishment (Larzelere et al., 1996) outweigh the possible consequences in psychopathology? This is a question not answered by this research. It is a question only answerable with a longitudinal design employing a control group. Presently, one must rely on the current literature, some of which is longitudinal, demonstrating that there is a link between corporal punishment and deleterious effects. The current study contributes to this literature, finding that there is a relationship between psychopathology and both corporal and psychological punishment. This study encompasses both the literature revealing a relationship between psychopathology and corporal and psychological punishment as well as the research demonstrating approval for and lack of recognition of the deleterious effects of corporal punishment. Hopefully, this study will provide a bridge between these two areas of research on corporal punishment and ridicule and will serve as a catalyst for future research.

## REFERENCES

- Amen, D. G., Stubblefield, M., Carmichael, B., & Thisted, R. (1996). Brain SPECT findings and aggressiveness. Annals of Clinical Psychiatry, 8, 129-137.
- American Academy of Pediatrics (1991). Corporal punishment in schools (RE9207). Pediatrics, 88, 173.
- American Psychiatric Association (1994). Diagnostic and statistical manual of mental disorders (4th ed.). Washington, D. C.: Author.
- American Psychological Association (1998, September 13). APA resolution on corporal punishment. Washington, D. C.: Author. [On-line], Available: <http://www.apa.org/pi/cyfres.html#punish>
- American School Counselor Association (1995). The school counselor and corporal punishment in the schools. [On-line], Available: [http://www.cnw.com/~wsca/pos\\_9.html](http://www.cnw.com/~wsca/pos_9.html)
- Bandura, A. (1972). The role of modeling processes in personality development. In C. S. Lavatelli & F. Standler (Eds.), Readings in child behavior and development (3rd ed.). New York: Harcourt Brace Jovanovich.
- Bandura, A., & Huston, A. C. (1961). Identification as a process of incidental learning. Journal of Abnormal and Social Psychology, 63, 311-318.
- Bandura, A., & Ross, D., & Ross, S. A. (1961). Transmission of aggression through imitation of aggressive models. Journal of Abnormal and Social Psychology, 63, 575-582.
- Bandura, A., & Ross, D., & Ross, S. A. (1963). Imitation of film-mediated aggressive models. Journal of Abnormal and Social Psychology, 65, 3-11.
- Bates, J. E., Pettit, G. S., & Dodge, K. A. (1995). Family and child factors in stability and change in children's aggressiveness in elementary school. In J. McCord (Ed.), Coercion and punishment in long-term perspectives (pp. 124-138). Cambridge, England: Cambridge University Press.

- Baumrind, D. (1966). Effect of authoritative parental control on child behavior. Child Development, 37, 887-907.
- Baumrind, D. (1967). Child care practices anteceding three patterns of preschool behavior. Genetic Psychology Monographs, 75, 43-88.
- Baumrind, D. (1968). Authoritarian vs. authoritative parental control. Adolescence, 3, 255-272.
- Baumrind, D. (1971). Current patterns of parental authority. Developmental Psychology Monograph, 4, 1-103.
- Baumrind, D. (1989). Rearing competent children. In W. Damon (Ed.), Child development today and tomorrow (pp. 349-378). San Francisco: Jossey-Bass.
- Baumrind, D. (1996). A blanket injunction against disciplinary use of spanking is not warranted by the data. Pediatrics, 98, 828-831.
- Baumrind, D. (1997). Necessary distinctions. Psychological Inquiry, 8, 176-182.
- Boivin, M., & Vitaro, F. (1995). The impact of peer relationships on aggression in childhood: Inhibition through coercion or promotion through peer support. In J. McCord (Ed.), Coercion and punishment in long-term perspectives (pp. 183-197). Cambridge, England: Cambridge University Press.
- Braver, M., Bumberry, J., Green, K., & Rawson, R. (1992). Childhood abuse and current psychological functioning in a university counseling center population. Journal of Counseling Psychology, 39, 252-257.
- Breslau, N., & Davis, G. C. (1987). Posttraumatic stress disorder: The stressor criterion. Journal of Nervous and Mental Disease, 175, 255-264.
- Brewin, C. R., Dalgleish, T., & Joseph, S. (1996). A dual representation theory of posttraumatic stress disorder. Psychological Review, 103, 670-686.
- Briere, J., & Runtz, M. (1990). Differential adult symptomatology associated with three types of child abuse histories. Child Abuse and Neglect, 14, 357-364.



- British Broadcasting Corporation (1998, March 25). BBC News Online: UK: Politics: Corporal punishment banned for all. [On line], Available: [http://www.bbc.co.uk/low/english/uk/politics/newsid\\_69000/69478.stm](http://www.bbc.co.uk/low/english/uk/politics/newsid_69000/69478.stm)
- Browne, K. D., & Hamilton, C. E. (1998). Physical violence between young adults and their parents: Associations with a history of child maltreatment. Journal of Family Violence, *13*, 59-79.
- Bryan, J. W., & Freed, F. W. (1982). Corporal punishment: Normative data and sociological and psychological correlates in a community college population. Journal of Youth and Adolescence, *11*, 77-87.
- Buntain-Ricklefs, J. J. (1994). Punishments: What predicts adult approval. Child Abuse and Neglect, *18*, 945-955.
- Butler, S. (1674/1967). Hudibras (2nd part, canto I, lines 843-844). Oxford, England: Clarendon Press.
- Carey, T. A. (1994). "Spare the rod and spoil the child." Is this a sensible justification for the use of punishment in child rearing? Child Abuse and Neglect, *18*, 1005-1010.
- Charles may intervene. (1997, Sept. 28). Houston Chronicle, p. 31A.
- Clarke, J., Lieberman-Lascoe, R., & Hyman, I. A. (1982). Corporal punishment in school as reported in nationwide newspapers. Child and Youth Services, *4*, 47-55.
- Cohen, P., & Brook, J. S. (1995). The reciprocal influence of punishment and child behavior disorder. In J. McCord (Ed.). Coercion and punishment in long-term perspectives (pp. 154-164). Cambridge, England: Cambridge University Press.
- Danger zones: States in the U. S. that permit pupil-beating (1998, September 1). [On-line], Available: <http://silcon.com/~ptave/eddpts.htm>
- Davidson, J. (1994). Issues in the diagnosis of posttraumatic stress disorder. In R. S. Pynoos (Ed.) Posttraumatic stress disorder: A clinical review. Lutherville, MD: The Sidran Press.

- Deater-Deckard, K., Dodge, K. A., Bates, J. E., & Pettit, G. S. (1996). Physical discipline among African American and European American mothers: Links to children's externalizing behaviors. Developmental Psychology, 32, 1065-1072.
- Derogatis, L. R. (1992). SCL-90-R: Administration, Scoring & Procedures Manual - II (2nd ed.). Towson, MD: Clinical Psychometric Research.
- Derogatis, L. R. (1993). BSI: Brief Symptom Inventory: Administration, Scoring and Procedures Manual (3rd ed.). Minneapolis, MN: National Computer Systems.
- Dobson, J. C. (1976). The strong-willed child: Birth through adolescence. Wheaton, IL: Living Books/Tyndale House.
- Dobson, J. C. (1987). Parenting isn't for cowards. Dallas, TX: Word Publishing.
- Dobson, J. C. (1992). The new dare to discipline. Wheaton, IL: Tyndale House.
- Dodson, F. (1970). How to parent. New York: Signet.
- Durant, R. H., Getts, A., Cadenhead, C., Emans, S. J., & Woods, E. R. (1995). Exposure to violence and victimization and depression, hopelessness, and purpose in life among adolescents living in and around public housing. Development and Behavioral Pediatrics, 16, 233-237.
- Egeland, B., & Erickson, M. F. (1987). Psychologically unavailable caregiving. In M. R. Brassard, R. Germain, & S. N. Hart (Eds.), Psychological maltreatment of children and youth (pp. 110-120). New York: Pergamon Press.
- Ellison, C. G., Bartkowski, J. P., & Segal, M. L. (1996). Do conservative Protestant parents spank more often? Further evidence from the National Survey of Families and Households. Social Science Quarterly, 77, 663-673.
- Ellison, C. G., & Sherkat, D. E. (1993). Conservative Protestantism and support for corporal punishment. American Sociological Review, 58, 131-144.

- Famularo, R., Fenton, T., Kinscherff, R., Ayoub, C., & Barnum, R. (1994). Maternal and child posttraumatic stress disorder in cases of child maltreatment. Child Abuse and Neglect, 18, 27-36.
- Festinger, L. (1957). A theory of cognitive dissonance. Evanston, IL: Row, Peterson.
- Flynn, C. P. (1996). Regional differences in spanking experiences and attitudes: A comparison of Northeastern and Southern college students. Journal of Family Violence, 11, 59-80.
- Forehand, R., & McKinney, B. (1993). Historical overview of child discipline in the United States: Implications for mental health clinicians and researchers. Journal of Child and Family Studies, 2, 221-228.
- Foster, C., & Fay, J. (1990). Parenting with love and logic: Teaching children responsibility. Colorado Springs, CO: Pinion.
- Freeman, C. B. (1979). The Children's Petition of 1669 and its sequel. In I. A. Hyman & J. H. Wise (Eds.), Corporal punishment in American education: Readings in history, practice, and alternatives (pp. 41-49). Philadelphia: Temple University Press.
- Friedman, D. B., & Friedman, A. S. (1979). Pediatric considerations in the use of corporal punishment in the schools. In I. A. Hyman & J. H. Wise (Eds.), Corporal punishment in American education: Readings in history, practice, and alternatives (pp. 337-341). Philadelphia: Temple University Press.
- Friedman, R. H. , & Hyman, I. A. (1979). Corporal punishment in the schools: A descriptive survey of state regulations. In I. A. Hyman & J. H. Wise (Eds.), Corporal punishment in American education: Readings in history, practice, and alternatives (pp. 157-168). Philadelphia: Temple University Press.
- Fugate, J. R. (1996). What the Bible says about child training: Parenting with confidence (2nd ed.). Tempe, AZ: Family Building Seminars.
- Garbarino, J., & Vondra, J. (1987). Psychological maltreatment: Issues and perspectives. In M. R. Brassard, R. Germain, & S. N. Hart (Eds.), Psychological maltreatment of children and youth (pp. 25-44). New York: Pergamon Press.

- Gershon, E. S., Dunner, D. L., & Goodwin, F. K. (1971). Toward a biology of the affective disorders: Genetic contributions. Archives of General Psychiatry, 25, 1-15.
- Glass, G. V., & Hopkins, K. D. (1984). Statistical methods in education and psychology (2nd ed., pp. 350-353). Englewood Cliffs, NJ: Prentice-Hall.
- Glenn, M. C. (1984). Campaigns against corporal punishment: Prisoners, sailors, women, and children in antebellum America. Albany, NY: State University of New York Press.
- Goodwin, J. M. (1996). Adult survivors of child abuse and neglect. In S. J. Kaplan (Ed.), Family violence: A clinical and legal guide (pp. 209-240). Washington, DC: American Psychiatric Press.
- Gottesman, I. I., Goldsmith, H. H., Carey, G. (1997). A developmental and a genetic perspective on aggression. In N. L. Segal, G. E. Weisfeld, & C. C. Weisfeld (Eds.), Uniting psychology and biology: Integrative perspectives on human development. Washington, DC: American Psychological Association.
- Grasmick, H. G., Bursik, R. J., Jr., Kimpel, M. (1991). Protestant fundamentalism and attitudes toward corporal punishment of children. Violence and Victims, 6, 283-298.
- Grasmick, H. G., Morgan, C. S., & Kennedy, M. B. (1992). Support for corporal punishment in the schools: A comparison of the effects of socioeconomic status and religion. Social Science Quarterly, 73, 177-187.
- Graziano, A. M., Lindquist, C. M., Kuncze, L. J., & Munjal, K. (1992). Physical punishment in childhood and current attitudes: An exploratory comparison of college students in the United States and India. Journal of Interpersonal Violence, 7, 147-155.
- Greven, P. (1991). Spare the child: The religious roots of punishment and the psychological impact of physical abuse. New York: Alfred A. Knopf.
- Gursky, D. (1992). Spare the child? Teacher Magazine, 3, 16-19.

- Hart, S. N., Germain, R. B., & Brassard, M. R. (1987). The challenge: To better understand and combat psychological maltreatment of children and youth. In M. R. Brassard, R. Germain, & S. N. Hart (Eds.), Psychological maltreatment of children and youth (pp. 3-24). New York: Pergamon Press.
- Hentoff, N. (1979). Preface. In I. A. Hyman & J. H. Wise (Eds.) Corporal punishment in American education: Readings in history, practice, and alternatives (pp. xi-xii). Philadelphia: Temple University Press.
- Herman, J. L. (1995). Complex PTSD: A syndrome in survivors of prolonged and repeated trauma. In G. S. Everly, Jr. & J. M. Lating (Eds.), Psychotraumatology: Key papers and core concepts in post-traumatic stress (pp. 87-100). New York: Plenum Press.
- Hollingshead, A. B. (1975). Four factor index of social status. Unpublished manuscript, Yale University.
- Horowitz, M., Wilner, N., & Alvarez, W. (1979). Impact of Event Scale: A measure of subjective stress. Psychosomatic Medicine, 41, 209-218.
- Horowitz, M. J., Weiss, D. S., & Marmar, C. (1987). Diagnosis of post-traumatic stress disorder. Journal of Nervous and Mental Disease, 175, 267-268.
- Houston, J. P. (1986). Fundamentals of learning and memory (3rd ed., pp. 46-47, 158-159,163). New York: Harcourt Brace Jovanovich.
- Howard, B. J. (1996). Advising parents on discipline: What works. Pediatrics, 98, 809-815.
- Huesmann, L. R., Eron, L. D., Lefkowitz, M. M., & Walder, L. O. (1984). Stability of aggression over time and generations. Developmental Psychology, 20, 1120-1134.
- Hyman, I. A. (1990). Reading, writing, and the hickory stick: The appalling story of physical and psychological abuse in American schools. Lexington, MA: Lexington Books.
- Hyman, I. A. (1995). Corporal punishment, psychological maltreatment, violence, and punitiveness in America: Research, advocacy, and public policy. Applied and Preventive Psychology, 4, 113-130.

- Hyman, I. A. (1997). School discipline and school violence: The teacher variance approach (pp. 31-32, 138-140, 259, 329-337, 247-252, 334-337). Boston: Allyn & Bacon.
- Hyman, I. A., Bongiovanni, A., Friedman, R. H., & McDowell, E. (1977, September/October). Paddling, punishing, and force: Where do we go from here? Children Today, 17-23.
- Hyman, I. A., Clarke, J., & Erdlen, R. J., Jr. (1987). Analysis of physical abuse in American schools. Aggressive Behavior, 13, 1-7.
- Johnson, T. (1996). The sexual dangers of spanking children. Alamo, CA: Parents and teachers against violence in education (PTAVE). [On-line], Available: <http://www.cei.net/~rcox/sexdngr.html>
- Joseph, S. A., Williams, R., Yule, W., & Walker, A. (1992). Factor analysis of the impact of events scale with survivors of two disasters at sea. Personality and Individual Differences, 13, 693-697.
- Kennedy, J. H. (1995). Teachers, student teachers, paraprofessionals, and young adults' judgments about the acceptable use of corporal punishment in the rural South. Education and Treatment of Children, 18, 53-64.
- Knutson, J. F., & Selner, M. B. (1994). Punitive childhood experiences reported by young adults over a 10-year period. Child Abuse and Neglect, 18, 155-166.
- Kosson, D. S., Steuerwald, B. L., Newman, J. P., & Widom, C. S. (1994). The relations between socialization and antisocial behavior, substance use, and family conflict in college students. Journal of Personality Assessment, 63, 473-488.
- Kroll, J. (1993). Post-traumatic stress disorder and borderline personality disorder: Are they the same? In J. Kroll, PTSD/Borderlines in therapy: Finding the balance, (pp. 57-78). New York: W. W. Norton.
- Krugman, R. D., & Krugman, M. K. (1984). Emotional abuse in the classroom: The pediatrician's role in diagnosis and treatment. American Journal of Diseases of Children, 138, 284-286.

- Lane, R. W. (1995). Beyond the schoolhouse gate: Free speech and inculcation of values. Philadelphia: Temple University Press.
- Larzelere, R. E. (1993). Response to Oosterhuis: Empirically justified uses of spanking: Toward a discriminating view of corporal punishment. Journal of Psychology and Theology, 21, 142-147.
- Larzelere, R. E., Schneider, W. N., Larson, D. B., & Pike, P. L. (1996). The effects of discipline responses in delaying toddler misbehavior recurrences. Child and Family Behavior Therapy, 18, 35-57.
- Laub, J. H., & Sampson, R. J. (1995). The long-term effect of punitive discipline. In J. McCord (Ed.), Coercion and punishment in long-term perspectives (pp. 247-258). Cambridge, England: Cambridge University Press.
- Lawrence, R. (1998). School crime and juvenile justice (pp. 59-88, 150-156). Oxford, England: Oxford University Press.
- Leach, P. (1997). Your baby and child: From birth to age 5 (Rev. ed.). New York: Alfred A. Knopf.
- Lee, V. (1979). A legal analysis of *Ingraham v. Wright*. In I. A. Hyman & J. H. Wise (Eds.), Corporal punishment in American education: Readings in history, practice, and alternatives (pp. 173-206). Philadelphia: Temple University Press.
- Lewin, M. (1987). The experiment. In Understanding psychological research: The student researcher's handbook (Corrected reprint edition, p. 104). Malabar, FL: Robert E. Krieger.
- Lickona, T. (1983). Raising good children: From birth through the teenage years. New York: Bantam.
- Luby, J. L., & Morgan, K. (1997). Characteristics of an infant/preschool psychiatric clinic sample: Implications for clinical assessment and nosology. Infant Mental Health Journal, 18, 209-220.
- Lyons, J. A. (1987). Posttraumatic stress disorder in children and adolescents: A review of the literature. Developmental and Behavioral Pediatrics, 8, 349-356.
- Maccoby, E. E., & Jacklin, C. N. (1974). The psychology of sex differences. Stanford, CA: Stanford University Press.

- Manning, J. (1979). Discipline in the good old days. In I. A. Hyman & J. H. Wise (Eds.), Corporal punishment in American education: Readings in history, practice, and alternatives (pp. 50-61). Philadelphia: Temple University Press.
- Maurer, A. (1979). It does happen here. In I. A. Hyman & J. H. Wise (Eds.), Corporal punishment in American education: Readings in history, practice, and alternatives (pp. 219-236). Philadelphia: Temple University Press.
- Maurer, A. (1990). Corporal punishment in the public schools. Division 32, American Psychological Society.
- Maurer, A. (1998, July 17). All in the name of the "last resort": The abuse of children in American schools. [On-line], Available: <http://silcon.com/~ptave/maurer5.htm>
- McCloskey, L. A., Figueredo, A. J., & Koss, M. P. (1995). The effects of systemic family violence on children's mental health. Child Development, 66, 1239-1261.
- McCord, J. (1979). Some child-rearing antecedents of criminal behavior in adult men. Journal of Personality and Social Psychology, 37, 1477-1496.
- McCord, J. (1991). Questioning the value of punishment. Social Problems, 38, 167-179.
- McFadden, A. C., Marsh, G. E., II, Price, B. J., & Hwang, Y. (1992). A study of race and gender bias in the punishment of school children. Education and Treatment of Children, 15, 140-146.
- McFall, M. E., Smith, D. E., Mackay, P. W., & Tarver, D. J. (1990). Reliability and validity of Mississippi Scale for combat-related Posttraumatic Stress Disorder. Psychological Assessment, 2, 114-121.
- McFarlane, A. C. (1991). Post-traumatic stress disorder. International Review of Psychiatry, 3, 203-213.
- McFarlane, A. C., Policansky, S. K., & Irwin, C. (1987). A longitudinal study of the psychological morbidity in children due to a natural disaster. Psychological Medicine, 17, 727-738.



- McNally, R. J. (1993). Stressors that produce posttraumatic stress disorder in children. In J. R. T. Davidson and E. B. Foa (Eds.), Posttraumatic stress disorder: DSM-IV and beyond. Washington, DC: American Psychiatric Press.
- Merriam-Webster (1988). Webster's ninth new collegiate dictionary. Springfield, MA: Author.
- Mitchell, W., & Mitchell, M. A. (1997). Building strong families: How your family can withstand the challenges of today's culture. Nashville, TN: Broadman and Holman.
- Muller, R. T. (1996). Family aggressiveness factors in the prediction of corporal punishment: Reciprocal effects and the impact of observer perspective. Journal of Family Psychology, 10, 474-489.
- Mwangi, G. (1997, Oct. 31). Maasai woman defies tradition, takes wife-beater husband to court. Houston Chronicle, p. 28A.
- Navarre, E. L. (1987). Psychological maltreatment: The core component of child abuse. In M. R. Brassard, R. Germain, & S. N. Hart (Eds.), Psychological maltreatment of children and youth (pp. 3-24). New York: Pergamon Press.
- Neale, J. M., & Liebert, R. M. (1986). Identifying causal relationships: Problems and threats. In Science and behavior: An introduction to methods of research (3rd ed., p. 110). Englewood Cliffs, NJ: Prentice-Hall.
- Nunnally, J. C., & Bernstein, I. H. (1994). Special problems in classical test theory. In Psychometric theory (3rd ed., pp. 376-386). New York: McGraw-Hill.
- Office of Civil Rights (1997). 1994 elementary and secondary school civil rights compliance report: Projected values for the nation (Rev. ed.). Washington, DC: U. S. Dept. of Education.
- Olweus, D. (1979). Stability of aggressive reaction patterns in males: A review. Psychological Bulletin, 86, 852-875.
- Oosterhuis, A. (1993). Abolishing the rod. Journal of Psychology and Theology, 21, 127-133.

- Pagano, R. R. (1994). Understanding statistics in the behavioral sciences (4th ed., pp. 353-354, 389). Minneapolis/St. Paul, MN: West Publishing.
- Patterson, G. R. (1975). Families: Applications of social learning to family life (Rev. ed.). Champaign, IL: Research Press.
- Patterson, G. R., DeBaryshe, B. D., & Ramsey, E. (1989). A developmental perspective on antisocial behavior. American Psychologist, 44, 329-335.
- Patterson, G. R., & Yoerger, K. (1995). Two different models for adolescent physical trauma and for early arrest. Criminal Behavior and Mental Health, 5, 411-423.
- Paulhus, D. L. (1988/1991). Balanced Inventory of Desirable Responding (BIDR). In J. P. Robinson, P. R. Shaver, & L. S. Wrightsman (Eds.), Measures of personality and social psychological attitudes: Vol. 1. Measures of social psychological attitudes (pp. 37-41). San Diego: Academic Press.
- Perry, B. D. (1997). Memories of fear. In J. Goodwin & R. Attias (Eds.), Images of the body in trauma. New York: Basic Books. [Online], Available: <http://www.bcm.tmc.edu/civitas/featured.htm>
- Piele, P. K. (1979). Neither corporal punishment cruel nor due process due: The United States Supreme Court's decision in *Ingraham v. Wright*. In I. A. Hyman & J. H. Wise (Eds.), Corporal punishment in American education: Readings in history, practice, and alternatives (pp. 91-106). Philadelphia: Temple University Press.
- Pynoos, R. S. (1994). Traumatic stress and developmental psychopathology in children and adolescents. In R. S. Pynoos (Ed.), Posttraumatic stress disorder: A clinical review. Lutherville, MD: The Sidran Press.
- Pynoos, R. S., Steinberg, A. M., Goenjian, A. (1996). Traumatic stress in childhood and adolescence: Recent developments and current controversies. In B. A. van der Kolk, A. C. McFarlane, & L. Weisaeth (Eds.), Traumatic stress: The effects of overwhelming experience on mind, body, and society. New York: Guilford Press.

- Raichle, D. R. (1979). The abolition of corporal punishment in New Jersey schools. In I. A. Hyman & J. H. Wise (Eds.), Corporal punishment in American education: Readings in history, practice, and alternatives (pp. 62-88). Philadelphia: Temple University Press.
- Ramsey, E., Patterson, G. R., & Walker, H. M. (1990). Generalization of the antisocial trait from home to school settings. Journal of applied developmental psychology, 11, 209-223.
- Rausch, K., & Knutson, J. K. (1991). The self-report of personal punitive childhood experiences and those of siblings. Child Abuse and Neglect, 15, 29-36.
- Reinholtz, L. K. (1979). A practical defense of corporal punishment in schools. In I. A. Hyman & J. H. Wise (Eds.), Corporal punishment in American education: Readings in history, practice, and alternatives (pp. 342-347). Philadelphia: Temple University Press.
- Renfrew, J. W. (1997). Genetic, sexual, and hormonal factors. In Aggression and its causes: A biopsychological approach (pp. 21-43). New York: Oxford University Press.
- Riak, J. (1996). Plain talk about spanking (3rd. ed.). [On-line Brochure]. Alamo, CA: Parents and Teachers Against Violence. Available: <http://silcon.com/~ptave/plntk.htm>
- Richardson, R. C., Wilcox, D. J., & Dunne, J. (1994). Corporal punishment in schools: Initial progress in the Bible Belt. Journal of Humanistic Education and Development, 32, 173-182.
- Ritchie, J. (1983). Corporal punishment and attitudes to violence of secondary school students. New Zealand Journal of Educational Studies, 18, 84-87.
- Rosemond, J. K. (1998). To spare or not to spare. In D. S. DelCampo, & R. L. DelCampo (Eds.), Taking sides: Clashing views on controversial issues in childhood and society (2nd ed., pp. 100-109). Guilford, CT: Dushkin McGraw-Hill.
- Rossmann, B. B. R., Bingham, R. D., & Emde, R. N. (1997). Symptomatology and adaptive functioning for children exposed to normative stressors, dog attack, and parental violence. Journal of the American Academy of Child and Adolescent Psychiatry, 36, 1089-1097.

- Rust, J. O., & Kinnard, K. Q. (1983). Personality characteristics of the users of corporal punishment in the schools. Journal of School Psychology, 21, 91-105.
- Schwarz, E. D., & Kowalski, J. M. (1991). Malignant memories: PTSD in children and adults after a school shooting. Journal of the American Academy of Child and Adolescent Psychiatry, 30, 936-944.
- Sears, R. R., Maccoby, E., & Levin, H. (1957). Patterns of child rearing (pp. 324-341). White Plains, NY: Row, Peterson.
- Sedlak, A. J., & Broadhurst, D. D. (1996). Third national incidence study of child abuse and neglect: Final report. Washington, DC: U. S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, National Center on Child Abuse and Neglect.
- Shaw, S. R., & Braden, J. P. (1990). Race and gender bias in the administration of corporal punishment. School Psychology Review, 19, 378-383.
- Simons, R. L., Wu, C. I., Conger, R. D., & Lorenz, F. O. (1994). Two routes to delinquency: Differences between early and late starters in the impact of parenting and deviant peers. Criminology, 32, 247-275.
- Skinner, B. F. (1968). The technology of teaching. New York: Appleton-Century-Crofts.
- Skinner, B. F. (1979). Corporal punishment. In I. A. Hyman & J. H. Wise (Eds.), Corporal punishment in American education: Readings in history, practice, and alternatives (pp. 335-336). Philadelphia: Temple University Press.
- Skinner, B. F. (1989). Recent issues in the analysis of behavior. Columbus, OH: Merrill.
- Solomon, Z., Mikulincer, M., Waysman, M., & Marlowe, D. H. (1991). Delayed and immediate onset Posttraumatic Stress Disorder: Differential clinical characteristics. Social Psychiatry and Psychiatric Epidemiology, 26, 1-7.
- Spock, B. (1946). The common sense book of baby and child care (pp. 270-271). New York: Duell, Sloan, & Pearce.

- Spock, B. (1957). The common sense book of baby and child care (Rev. ed., pp. 331-335). New York: Duell, Sloan, & Pearce.
- Spock, B. (1988). Dr. Spock on parenting: Sensible advice from America's most trusted child-care expert (pp. 132-133, 151). New York: Simon & Schuster.
- Spock, B., & Rothenberg, M. B. (1985). Baby and child care (pp. 358-360). New York: E. P. Dutton.
- Strassberg, Z., Dodge, K. A., Pettit, G. S., & Bates, J. E. (1994). Spanking in the home and children's subsequent aggression toward kindergarten peers. Development and Psychopathology, 6, 445-461.
- Straus, M. A. (1991). Discipline and deviance: Physical punishment of children and violence and other crime in adulthood. Social Problems, 38, 133-154.
- Straus, M. A. (1994). Beating the Devil out of them: Corporal punishment in American families. New York: Lexington Books.
- Straus, M. A. (1995). Corporal punishment of children and adult depression and suicidal ideation. In J. McCord (Ed.), Coercion and punishment in long-term perspectives (pp. 59-77). Cambridge, England: Cambridge University Press.
- Straus, M. A. (1996). Spanking and the making of a violent society. Pediatrics, 98, 837-842.
- Straus, M. A. (1998). Do physically punished children become violent adults? Yes. In Nolen-Hoeksema, S. (Ed.), Clashing views on abnormal psychology: A taking sides custom reader. Guilford, CT: Dushkin/McGraw.
- Straus, M. A., & Donnelly, D. A. (1993). Corporal punishment of adolescents by American parents. Youth and Society, 24, 419-442.
- Straus, M. A., & Hamby, S. L. (1997). Measuring physical and psychological maltreatment of children with the Conflict Tactics Scales. In G. K. Kantor & J. L. Jasinski (Eds.), Out of the darkness: Contemporary perspectives on family violence. Thousand Oaks, CA: Sage.

- Straus, M. A., & Kantor, G. K. (1994). Corporal punishment of adolescents by parents: A risk factor in the epidemiology of depression, suicide, alcohol abuse, and wife beating. Adolescence, 29, 543-561.
- Straus, M. A., & Mathur, A. K. (1996). Social change and trends in approval of corporal punishment by parents from 1968 to 1994. In D. Frehsee, W. Horn, and K. Bussman (Eds.), Violence against children (pp. 91-105). New York: Walter de Gruyter. [On-line], Available: <http://www.unh.edu/frl/cp27.htm>
- Straus, M. A., & Moynihan, M. M. (1994). Who spansks the most? In M. A. Straus, Beating the Devil out of them: Corporal punishment in American families (pp. 49-63). New York: Lexington Books.
- Straus, M. A., & Paschall, M. J. (1998, May 14). Corporal punishment by mothers and child's cognitive development: A longitudinal study. Unpublished manuscript, Family Research Laboratory, University of New Hampshire at Durham. [On-line], Available: <http://www.unh.edu/frl/unpubpap.htm>
- Straus, M. A., & Stewart, J. H. (1998, July). Corporal punishment by American parents: National data on prevalence, chronicity, severity, and duration, in relation to child and family characteristics. Paper presented at the 14th World Congress of Sociology, Montreal, Quebec, Canada.
- Straus, M. A., Sugarman, D. B., Giles-Sims, J. (1997). Spanking by parents and subsequent antisocial behavior of children. Archives of Pediatrics and Adolescent Medicine, 151, 761-767.
- Straus, M. A., & Yodanis, C. L. (1996). Corporal punishment in adolescence and physical assaults on spouses in later life: What accounts for the link? Journal of Marriage and the Family, 58, 835-841.
- Tabachnick, B. G., & Fidell, L. S. (1996). Using multivariate statistics (3rd. ed., pp. 48, 70-71, 80-81). New York: HarperCollins.
- Taylor, L., & Maurer, A. (1998, May 14). No vital organs there, so they say. [On-line], Available: <http://silcon.com/~ptave/taylor.htm>
- Terr, L. C. (1982). Psychic trauma in children: Observations following the Chowchilla school-bus kidnapping. Annual Progress in Child Psychiatry and Development, 384-396.

- Terr, L. C. (1984). Chowchilla revisited: The effects of psychic trauma four years after a school-bus kidnapping. Annual Progress in Child Psychiatry and Development, 300-317.
- Terr, L. C. (1995). Childhood traumas: An outline and overview. In G. S. Everly, Jr., & J. M. Lating (Eds.), Psychotraumatology: Key papers and core concepts in post-traumatic stress (pp. 301-320). New York: Plenum.
- Tremblay, R. E. (1995). Kindergarten behavioral patterns, parental practices, and early adolescent antisocial behavior. In J. McCord (Ed.), Coercion and punishment in long-term perspectives (pp. 139-153). Cambridge, England: Cambridge University Press.
- Turner, H. A., & Finkelhor, D. (1996). Corporal punishment as a stressor among youth. Journal of Marriage and the Family, 58, 155-166.
- UN Convention on the Rights of the Child (1989). [On-line], Available: <http://cs.albany.edu/~ault/fof/misc/unchild/un/part1.html>
- U. S. Census Bureau (1997, Oct. 30). Income and Poverty: 1994 Poverty Summary. [On-line], Available: <http://www.census.gov/hhes/income/povsum.html>
- van der Kolk, B. A. (1985). Adolescent vulnerability to Posttraumatic Stress Disorder. Psychiatry, 48, 365-370.
- Vazsonyi, A. T., & Flannery, D. J. (1997). Early adolescent delinquent behaviors: Associations with family and school domains. Journal of Early Adolescence, 17, 271-293.
- Wallace, C. P. (1994, May 6). U.S. youth is caned; doctor says he's ok. In Los Angeles Times [On-line], Available: <http://www.latimes.com/cgi-bin/archsearch.cgi?DBQUERY1=Michael+Fay&FIELDNAME1=CONNECTOR1=and&DBQUERY2=caning&FIELDNAME2=&CONNECTOR2=butnot&DBQUERY3=sports&FIELDNAME3=&DATE=1994&SECT=&TYPE=&SORT=d%3h&NITEMS=25>
- Weiss, B., Dodge, K. A., Bates, J. E., & Pettit, G. S. (1992). Some consequences of early harsh discipline: Child aggression and a maladaptive social information processing style. Child Development, 63, 1321-1335.

- Weiss, D. S., & Marmar, C. R. (1997). The Impact of Event Scale-- Revised. In J. P. Wilson & T. M. Keane (Eds.), Assessing psychological trauma and PTSD (pp. 399-411). New York: Guilford Press.
- Welsh, R. S. (1978, July). Delinquency, corporal punishment, and the schools. Crime and Delinquency, 336-354.
- Whitfield, C. L. (1995). The forgotten difference: Ordinary memory versus traumatic memory. Consciousness and Cognition, 4, 89-94.
- Williams, G. J. (1979). Social sanctions for violence against children: Historical perspectives. In I. A. Hyman & J. H. Wise (Eds.), Corporal punishment in American education: Readings in history, practice, and alternatives (pp. 25-40). Philadelphia: Temple University Press.
- Yule, W., Bruggencate, S. T., & Joseph, S. (1994). Principal components analysis of the impact of events scale in adolescents who survived a shipping disaster. Personality and Individual Differences, 16, 685-691.
- Zaidi, L. Y., & Foy, D. W. (1994). Childhood abuse experiences and combat-related PTSD. Journal of Traumatic Stress, 7, 33-42.
- Zajonc, R. B. (1980). Feeling and thinking: Preferences need no inferences. American Psychologist, 35, 151-175.



**APPENDIX A**  
**SCHOOL INCIDENCE OF CORPORAL PUNISHMENT,**  
**THE SOUTH AND SOUTHWEST UNITED STATES**

Table A.1: School Enrollment, Corporal Punishment, and High School Graduation for 1993-94,  
by State and Ethnicity for Schools in the South and Southwest

		Ethnicity											
		Native Am.		Asian/Pacific Is		Hispanic		African Am.		Caucasian		Total	
State		Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
Alabama													
Enrollment		5,206	1*	4,464	1	2,863	12	266,005	36	463,508	63	742,046	
Corporal Punishment		579	1	32	1	256	-^	23,666	44	29,696	55	54,229	
H. S. Diploma		355	1	217	1	80	-	10,342	30	23,115	68	34,109	
Arizona													
Enrollment		37,547	5	12,076	2	205,943	29	31,566	4	415,188	59	702,320	
Corporal Punishment		34	20	0	0	86	49	0	0	54	31	174	
H. S. Diploma		2,093	5	788	2	13,106	34	1,003	3	21,893	56	38,883	
Arkansas													
Enrollment		1,182	-	2,240	1	4,383	1	86,507	21	327,509	78	421,821	
Corporal Punishment		592	1	38	-	222	-	20,297	36	35,862	63	57,011	
H. S. Diploma		555	2	116	-	226	1	4,361	21	18,341	78	23,599	

\* Percentages have been rounded to nearest whole number; therefore they may not total 100.

^ Indicates less than 1%

Table A.1: Continued

		Ethnicity											
		Native Am.		Asian/Pacific Is		Hispanic		African Am.		Caucasian		Total	
State		Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
<b>California</b>													
Enrollment		37,568	1	573,759	12	1,895,772	38	417,465	8	2,044,070	41	4,968,634	
Corporal Punishment		0	0	16	2	626	75	58	7	133	16	833	
H. S. Diploma		3,048	1	46,716	14	92,768	28	22,527	7	162,066	50	327,125	
<b>Florida</b>													
Enrollment		4,136	-	35,409	2	303,479	15	504,195	25	1,205,685	59	2,052,904	
Corporal Punishment		28	-	40	-	569	3	6,613	40	9,184	56	16,434	
H. S. Diploma		155	-	2,436	3	12,650	14	18,338	21	55,862	62	89,441	
<b>Georgia</b>													
Enrollment		1477	-	20,362	2	25,305	2	486,730	39	717,555	57	1,251,429	
Corporal Punishment		3	-	22	-	314	1	23,677	55	19,304	45	43,320	
H. S. Diploma		55	-	1,196	2	616	1	19,425	34	35,620	63	56,912	

Table A.1: Continued

State	Ethnicity												Total Number
	Native Am.		Asian/Pacific Is		Hispanic		African Am.		Caucasian				
	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	
Louisiana													
Enrollment	3,911	1	9,527	1	8,601	1	346,488	44	417,934	53			786,461
Corporal Punishment	332	1	58	-	140	1	13,978	52	12,400	46			26,908
H. S. Diploma	127	-	526	1	382	1	12,330	35	22,230	62			35,595
Mississippi													
Enrollment	588	-	3,430	1	1,446	-	263,647	52	233,562	46			502,673
Corporal Punishment	158	-	19	-	35	-	33,962	62	20,855	38			55,029
H. S. Diploma	72	-	211	1	59	-	10,827	48	11,378	50			22,547
New Mexico													
Enrollment	33,105	11	2,471	1	144,748	48	5,876	2	115,358	38			301,558
Corporal Punishment	54	2	0	0	1,157	51	107	5	937	42			2,255
H. S. Diploma	1,905	13	195	1	5,812	41	258	2	6,075	43			14,245

Table A.1: Continued

		Ethnicity											
		Native Am.		Asian/Pacific Is		Hispanic		African Am.		Caucasian		Total	
State		Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
North Carolina													
Enrollment		7,755	1	13,809	1	19,818	2	374,244	32	752,929	64	1,168,555	
Corporal Punishment		130	1	11	-	119	1	3,784	41	5,143	56	9,187	
H. S. Diploma		366	1	746	1	470	1	17,118	29	40,681	69	59,381	
Oklahoma													
Enrollment		83,870	16	5,219	1	16,475	3	50,579	10	371,590	70	527,733	
Corporal Punishment		4,126	25	31	-	233	1	991	6	10,863	67	16,244	
H. S. Diploma		4,217	14	476	2	965	3	2,169	7	22,635	74	30,462	
South Carolina													
Enrollment		775	-	4,866	1	4,086	1	273,514	43	352,374	55	635,615	
Corporal Punishment		70	1	9	-	9	-	6,502	65	3,479	35	10,069	
H. S. Diploma		24	-	325	1	135	-	11,496	37	18,689	61	31,667	

Table A.1: Continued

State	Ethnicity												Total
	Native Am.		Asian/Pacific Is		Hispanic		African Am.		Caucasian				
	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	
Tennessee													
Enrollment	649	-	7,110	1	3,762	-	168,894	21	639,939	78	820,354		
Corporal Punishment	22	-	58	-	140	-	15,485	36	27,628	64	43,333		
H. S. Diploma	22	-	345	1	118	-	6,803	16	34,276	82	54,465		
Texas													
Enrollment	7,456	-	70,645	2	1,210,990	36	496,307	15	1,614,118	47	3,399,516		
Corporal Punishment	210	-	383	-	28,849	24	28,559	24	59,928	51	117,929		
H. S. Diploma	340	-	4,468	3	44,848	29	20,348	13	87,194	55	157,198		
Virginia													
Enrollment	1,769	-	38,374	4	36,088	3	295,255	27	715,971	66	1,087,457		
Corporal Punishment	0	0	0	0	0	0	0	0	8	100	8		
H. S. Diploma	97	-	2,788	5	1,570	3	12,861	22	40,646	70	57,962		

Adapted from the Office of Civil Rights (1997)

**APPENDIX B**  
**HUMAN SUBJECTS APPROVAL**

Letter Granting Approval for Research

Texas Tech University  
Office of Research Services  
203 Holden Hall  
Lubbock, Texas 79409-1035

January 21, 1998

Dr. Loretta J. Bradley  
Ms. Melissa Spencer  
Ed. Psychology and Leadership  
MS 1071

RE: Project 97318 Experiences with Childhood Punishment

Dear Dr. Bradley:

The Texas Tech University Committee for the Protection of Human Subjects has approved your proposal referenced above. The approval is effective from December 1, 1997 through November 30, 1998. You will be reminded of the pending expiration one month before your approval expires so that you may request an extension if you wish.

The best of luck on your project.

Sincerely,

Dr. Roman Taraban, Chair  
Human Subjects Use Committee



**APPENDIX C**  
**INSTRUMENTS**

## Demographics

*The following information is needed in order to understand some basic characteristics of the people in the sample. It will only provide information about the group dynamics. Again, the information you give will be treated with the utmost confidentiality. Therefore, do not put your name or social security number on any of these materials. The questions on religion and ethnicity are essential to this study.*

*However, if you do not wish to answer them, you may excuse yourself from the study.*

*For the following items, please circle the correct answers directly on this form.*

1. Age a) 18 b) 19 c) 20 d) 21 e) 22 f) 23-25 g) 26-34 h) over 35

2. Gender a) M b) F

3. Classification: a) Fresh. b) Soph. c) Jr. d) Sr. e) Grad.

*For the following question, please refer to the list of state and U.S. territory abbreviations that following this demographic questionnaire. If your high school years were spent in a foreign country please write in the country.*

4. State where you spent the majority of your high school years. \_\_\_\_\_

5. Please inspect the following list of religions and circle the one that reflects the way you were reared, even if you no longer subscribe to the same beliefs.

- |  |                           |              |
|--|---------------------------|--------------|
| a) Assembly of God                               | i) Church of the Nazarene | s) Unitarian |
| b) Baptist                                       | j) Episcopal              | t) Other     |
| c) Buddhist                                      | k) Hindu                  | Christian    |
| d) Catholic                                      | l) Jehovah's Witnesses    | u) Other     |
| e) Church of Christ                              | m) Jewish                 | Eastern      |
| f) Christian Science                             | n) Lutheran               | v) Agnostic  |
| g) Church of God                                 | o) Methodist              | w) Other     |
| h) Church of Jesus Christ<br>of Later Day Saints | p) Moslem                 | x) Atheist   |
|  | q) Pentecostal            |              |
|  | r) Seventh-day Adventist  |              |

6. Your ethnicity is \_\_\_\_\_.

African American, Caucasian, Hispanic, and Pacific Islander are examples of acceptable answers. If you are of mixed heritage you may indicate that.

American, Jewish, and Southerner are examples that are not acceptable.

*Please answer the following questions about your parents or the people who raised you, if you did not live with your parents. If you were partially raised by step-parents, there are questions about that below.*

7. My parents were:

- a) married
- b) never married, but lived together
- c) never married, and did not live together
- d) legally separated
- e) divorced
- f) my mother died
- g) my father died
- h) both of my parents died

8. If d, e, f, g, or h are true, how old were you when this event, or events, occurred? For instance, if both of your parents have died, please indicate your age or ages when this happened. \_\_\_\_\_

9. Father's education:

- a) did not graduate from high school
- b) high school graduate
- c) some college (any college credit but without graduation from a 4-year college)
- d) college graduate (Bachelor's degree)
- e) advanced degree (such as: M.S., M.A., J.D., LL.B., M.D., Ph.D., Ed.D.)

10. Write in your father's primary occupation while you were in high school. Please write out your answer, do not use initials or an acronym, and be as specific as possible. For example, elementary school teacher, or high school teacher, electrical engineer, flight engineer, or locomotive engineer, house painter, or artist, registered nurse or licensed practical/vocational nurse. If your father is self-employed, please indicate specifically what it is he does.

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11. Mother's education:

- a) did not graduate from high school
- b) high school graduate
- c) some college (any college credit but without graduation from a 4-year college)
- d) college graduate (Bachelor's degree)
- e) advanced degree (such as: M.S., M.A., J.D. LL.B., M.D., Ph.D., Ed.D.)

12. Write in your mother's primary occupation while you were in high school. Please write out your answer, do not use initials or an acronym, and be as specific as possible. For example, elementary school teacher, or high school teacher, electrical engineer, flight engineer, or locomotive engineer, house painter, or artist, registered nurse or licensed practical/vocational nurse. If your mother is self-employed, please indicate specifically what it is she does.

---

*Please fill out the information below regarding step-parents , or other parental surrogates such as grandparent, aunt or uncle, sister or brother, or foster parents. This should be completed only for those people with whom you lived and who assumed primary responsibility for caring for you while you lived with them. Please use the blank to fill in your relationship with them. There is space for four people here. In the case of several parental figures, please indicate the people with whom you lived the longest. Please so indicate by placing a check-mark beside the question regarding their education.*

13. \_\_\_\_\_ (Step-parent, grandparent, etc.) education:

- a) did not graduate from high school
- b) high school graduate
- c) some college (any college credit but without graduation from a 4-year college)
- d) college graduate (Bachelor's degree)
- e) advanced degree (such as: M.S., M.A., J.D. LL.B., M.D., Ph.D., Ed.D.)

14. Write in this person's primary occupation while you were in high school. Please write out your answer, do not use initials or an acronym, and be as specific as possible. For example, elementary school teacher, or high school teacher, electrical engineer, flight engineer, or locomotive engineer, house painter, or artist, registered nurse or licensed practical/vocational nurse. If this person is self-employed, please indicate specifically what it is he/she does. If the person is

retired or disabled, please say so and also write in the former occupation.

---

15. Please complete this statement: Please complete this statement: I was between \_\_\_\_\_ and \_\_\_\_\_ years old when I lived with this person.

16. \_\_\_\_\_ (Step-parent, grandparent, etc.) education:

- a) did not graduate from high school
- b) high school graduate
- c) some college (any college credit but without graduation from a 4-year college)
- d) college graduate (Bachelor's degree)
- e) advanced degree (such as: M.S., M.A., J.D. LL.B., M.D., Ph.D., Ed.D.)

17. Write in this person's primary occupation while you were in high school. Please write out your answer, do not use initials or an acronym, and be as specific as possible. For example, elementary school teacher, or high school teacher, electrical engineer, flight engineer, or locomotive engineer, house painter, or artist, registered nurse or licensed practical/vocational nurse. If this person is self-employed, please indicate specifically what it is he/she does. If the person is retired or disabled, please say so and also write in the former occupation.

---

18. Please complete this statement: I was between \_\_\_\_\_ and \_\_\_\_\_ years old when I lived with this person.

19. \_\_\_\_\_ (Step-parent, grandparent, etc.) education:

- a) did not graduate from high school
- b) high school graduate
- c) some college (any college credit but without graduation from a 4-year college)
- d) college graduate (Bachelor's degree)
- e) advanced degree (such as: M.S., M.A., J.D. LL.B., M.D., Ph.D., Ed.D.)

20. Write in this person's primary occupation while you were in high school. Please write out your answer, do not use initials or an acronym, and be as specific as possible. For example, elementary school teacher,

or high school teacher, electrical engineer, flight engineer, or locomotive engineer, house painter, or artist, registered nurse or licensed practical/vocational nurse. If this person is self-employed, please indicate specifically what it is he/she does. If the person is retired or disabled, please say so and also write in the former occupation.

---

21. Please complete this statement: I was between \_\_\_\_\_ and \_\_\_\_\_ years old when I lived with this person.

22. \_\_\_\_\_ (Step-parent, grandparent, etc.) education:

- a) did not graduate from high school
- b) high school graduate
- c) some college (any college credit but without graduation from a 4-year college)
- d) college graduate (Bachelor's degree)
- e) advanced degree (such as: M.S., M.A., J.D. LL.B., M.D., Ph.D., Ed.D.)

23. Write in this person's primary occupation while you were in high school. Please write out your answer, do not use initials or an acronym, and be as specific as possible. For example, elementary school teacher, or high school teacher, electrical engineer, flight engineer, or locomotive engineer, house painter, or artist, registered nurse or licensed practical/vocational nurse. If this person is self-employed, please indicate specifically what it is he/she does. If the person is retired or disabled, please say so and also write in the former occupation.

---

28. Please complete this statement: I was between \_\_\_\_\_ and \_\_\_\_\_ years old when I lived with this person.

Table C.1: Abbreviations of States and U.S. Territories

State	Abbreviation	State	Abbreviation
Alabama	AL	Missouri	MO
Alaska	AK	Montana	MT
American Samoa	AS	Nebraska	NE
Arizona	AZ	Nevada	NV
Arkansas	AR	New Hampshire	NH
California	CA	New Jersey	NJ
Canal Zone	CZ	New Mexico	NM
Colorado	CO	New York	NY
Connecticut	CT	North Carolina	NC
Delaware	DE	North Dakota	ND
District of Columbia	DC	Ohio	OH
Florida	FL	Oklahoma	OK
Georgia	GA	Oregon	OR
Guam	GU	Pennsylvania	PA
Hawaii	HI	Puerto Rico	PR
Idaho	ID	Rhode Island	RI
Illinois	IL	South Carolina	SC
Indiana	IN	South Dakota	SD
Iowa	IA	Tennessee	TN
Kansas	KS	Texas	TX
Kentucky	KY	Utah	UT
Louisiana	LA	Vermont	VT
Maine	ME	Virginia	VA
Maryland	MD	Virgin Islands	VI
Massachusetts	MA	Washington	WA
Michigan	MI	West Virginia	WV
Minnesota	MN	Wisconsin	WI
Mississippi	MS	Wyoming	WY

## Event Summary

***Please use the answer sheet (scan-able sheet) to complete the remainder of the questions but also mark your answers on the questionnaire. All questions will follow sequentially. Do not put your name or your social security number on these forms or on the answer sheet.***

*Below are listed various events that may have happened to you. These items are typed in bold print. Following the question in bold, please indicate the number of times that each event has occurred in your life. If it has never occurred, indicate that by so coding on your answer sheet as well as the questionnaire. After each question there will be companion questions, one of which asks that you indicate your age at the time of the event. If the event occurred more than once, indicate your age at the time of the earliest occurrence.*

**[1] Have you experienced sarcasm, ridicule, or name-calling by your parents or guardians?**

- a) Once or Twice
- b) Three times
- c) Four to 5 times
- d) more than 5 times
- e) Never

**[2] Your age at the time of the occurrence, or the earliest occurrence, was:**

- a) 5 years old or less
- b) between 6 and 12 years old
- c) between 13 and 17 years old
- d) 18 or over
- e) Never happened to you

**[3] This event occurred most recently:**

- a) within the last 2 years
- b) between 2 and 5 years ago
- c) 5-10 years ago
- d) more than 10 years ago
- e) Never happened to you

**[4] The degree of positive effect on you now due to having been the recipient of name-calling, ridicule, or sarcasm by your parents or guardians is:**

- |-----|-----|-----|
- a) None                      b) Mild                      c) Moderate                      d) Significant



e) Never happened to you

[5] The degree of negative effect on you now due to having been the recipient of name-calling, ridicule, or sarcasm by your parents or guardians is:

|\_\_\_\_\_||\_\_\_\_\_||\_\_\_\_\_||  
a) None      b) Mild      c) Moderate      d) Significant

e) Never happened to you

[6] **Have you been physically punished by your parents or guardians by being spanked? (Spanking is defined as one or more strikes to the buttocks with an open hand.)**

- a) Once or Twice
- b) Three times
- c) Four to 5 times
- d) more than 5 times
- e) Never

[7] Your age at the time of the occurrence, or the earliest occurrence, was:

- a) 5 years old or less
- b) between 6 and 12 years old
- c) between 13 and 17 years old
- d) 18 or over
- e) Never happened to you

[8] This event occurred most recently:

- a) within the last 2 years
- b) between 2 and 5 years ago
- c) 5-10 years ago
- d) more than 10 years ago
- e) Never happened to you

[9] The degree of positive effect on you now due to having been spanked by your parents or guardians is:

|\_\_\_\_\_||\_\_\_\_\_||\_\_\_\_\_||  
a) None      b) Mild      c) Moderate      d) Significant

e) Never happened to you

[10] The degree of negative effect on you now due to having been spanked by your parents or guardians is:

|\_\_\_\_\_||\_\_\_\_\_||\_\_\_\_\_||  
a) None            b) Mild            c) Moderate        d) Significant

e) Never happened to you

[11] **Have you been physically punished through being hit in some way other than spanking (e.g. slapped or punched or kicked or hit with an object) by your parents or guardians?**

- a) Once or Twice
- b) Three times
- c) Four to 5 times
- d) more than 5 times
- e) Never

[12] Your age at the time of the occurrence, or the earliest occurrence, was:

- a) 5 years old or less
- b) between 6 and 12 years old
- c) between 13 and 17 years old
- d) 18 or over
- e) Never happened to you

[13] This event occurred most recently:

- a) within the last 2 years
- b) between 2 and 5 years ago
- c) 5-10 years ago
- d) more than 10 years ago
- e) Never happened to you

[14] The degree of positive effect on you now due to having been hit in some way other than spanking by your parents or guardians is:

|\_\_\_\_\_||\_\_\_\_\_||\_\_\_\_\_||  
a) None            b) Mild            c) Moderate        d) Significant

e) Never happened to you

[15] The degree of negative effect on you now due to having been hit in some way other than spanking by your parents or guardians is:

|\_\_\_\_\_||\_\_\_\_\_||\_\_\_\_\_||  
a) None            b) Mild            c) Moderate        d) Significant

e) Never happened to you

[16] **Have you been physically punished by your parents or guardians other than being hit in some way? Examples might include having your mouth taped, being put in a closet, being made to do physical labor that was beyond your capability.**

- a) Once or Twice
- b) Three times
- c) Four to 5 times
- d) more than 5 times
- e) Never

[17] Your age at the time of the occurrence, or the earliest occurrence, was:

- a) 5 years old or less
- b) between 6 and 12 years old
- c) between 13 and 17 years old
- d) 18 or over
- e) Never happened to you

[18] This event occurred most recently:

- a) within the last 2 years
- b) between 2 and 5 years ago
- c) 5-10 years ago
- d) more than 10 years ago
- e) Never happened to you

[19] The degree of positive effect on you now due to having been physically punished by your parents or guardians other than by being hit in some way is:

a) None                      b) Mild                      c) Moderate                      d) Significant

e) Never happened to you

[20] The degree of negative effect on you now due to having been physically punished by your parents or guardians other than by being hit in some way is:

a) None                      b) Mild                      c) Moderate                      d) Significant

e) Never happened to you

**[21] Did you witness physical punishment of other children in your home or that of your friends?**

- a) Once or Twice
- b) Three times
- c) Four to 5 times
- d) more than 5 times
- e) Never

[22] Your age at the time of the occurrence, or the earliest occurrence, was:

- a) 5 years old or less
- b) between 6 and 12 years old
- c) between 13 and 17 years old
- d) 18 or over
- e) Never happened to you

[23] This event occurred most recently:

- a) within the last 2 years
- b) between 2 and 5 years ago
- c) 5-10 years ago
- d) more than 10 years ago
- e) Never happened to you

[24] The degree of positive effect on you now due to having witnessed the physical punishment of other children in your home or that of your friends is:

\_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ |  
a) None                      b) Mild                      c) Moderate                      d) Significant

e) Never happened to you

[25] The degree of negative effect on you now due to having witnessed the physical punishment of other children in your home or that of your friends is:

\_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ |  
a) None                      b) Mild                      c) Moderate                      d) Significant

e) Never happened to you

**[26] Did you know a neighborhood friend, or friends, who received physical punishment?**

- a) Once or Twice
- b) Three times
- c) Four to 5 times

- d) more than 5 times
- e) Never

[27] Your age at the time of the occurrence, or the earliest occurrence, was:

- a) 5 years old or less
- b) between 6 and 12 years old
- c) between 13 and 17 years old
- d) 18 or over
- e) Never happened to you

[28] This event occurred most recently:

- a) within the last 2 years
- b) between 2 and 5 years ago
- c) 5-10 years ago
- d) more than 10 years ago
- e) Never happened to you

[29] The degree of positive effect on you now due to having known other children who were physically punished is:

|\_\_\_\_\_||\_\_\_\_\_||\_\_\_\_\_||  
 a) None            b) Mild            c) Moderate        d) Significant

- e) Never happened to you

[30] The degree of negative effect on you now due to having known other children who were physically punished is:

|\_\_\_\_\_||\_\_\_\_\_||\_\_\_\_\_||  
 a) None            b) Mild            c) Moderate        d) Significant

- e) Never happened to you

*The following questions deal with events that may have happened at school.*

[31] **Have you been the recipient of sarcasm, ridicule, or name-calling at school other than by classmates?**

- a) Once or Twice
- b) Three times
- c) Four to 5 times
- d) more than 5 times
- e) Never

[32] Your age at the time of the occurrence, or the earliest occurrence, was:

- a) 5 years old or less
- b) between 6 and 12 years old
- c) between 13 and 17 years old
- d) 18 or over
- e) Never happened to you

[33] This event occurred most recently:

- a) within the last 2 years
- b) between 2 and 5 years ago
- c) 5-10 years ago
- d) more than 10 years ago
- e) Never happened to you

[34] The degree of positive effect on you now due to experiencing sarcasm or name-calling at school by people other than classmates is:

a) None | \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ |  
b) Mild c) Moderate d) Significant

- e) Never happened to you

[35] The degree of negative effect on you now due to experiencing sarcasm or name-calling at school by people other than classmates is:

a) None | \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ |  
b) Mild c) Moderate d) Significant

- e) Never happened to you

[36] **Have you been paddled at school? (Paddling is defined as being spanked on the buttocks. This is usually done with a board. It may also have been referred to as 'getting licks', 'getting the board', or another such term.)**

- a) Once or Twice
- b) Three times
- c) Four to 5 times
- d) more than 5 times
- e) Never

[37] Your age at the time of the occurrence, or the earliest occurrence, was:

- a) 5 years old or less
- b) between 6 and 12 years old
- c) between 13 and 17 years old

- d) 18 or over
- e) Never happened to you

[38] This event occurred most recently:

- a) within the last 2 years
- b) between 2 and 5 years ago
- c) 5-10 years ago
- d) more than 10 years ago
- e) Never happened to you

[39] The degree of positive effect on you now due to having been paddled at school is:

a) None |—————| b) Mild |—————| c) Moderate |—————| d) Significant

- e) Never happened to you

[40] The degree of negative effect on you now due to having been paddled at school is:

a) None |—————| b) Mild |—————| c) Moderate |—————| d) Significant

- e) Never happened to you

**[41] Have you been physically punished through being hit at school in some way other than paddling (e.g. slapped or punched or kicked).**

- a) Once or Twice
- b) Three times
- c) Four to 5 times
- d) more than 5 times
- e) Never

[42] Your age at the time of the occurrence, or the earliest occurrence, was:

- a) 5 years old or less
- b) between 6 and 12 years old
- c) between 13 and 17 years old
- d) 18 or over
- e) Never happened to you

[43] This event occurred most recently:

- a) within the last 2 years
- b) between 2 and 5 years ago

- c) 5-10 years ago
- d) more than 10 years ago
- e) Never happened to you

[44] The degree of positive effect on you now due to having been hit at school in some way other than paddling is:

|-----|-----|-----|  
 a) None                    b) Mild                    c) Moderate                    d) Significant

- e) Never happened to you

[45] The degree of negative effect on you now due to having been hit at school in some way other than paddling is:

|-----|-----|-----|  
 a) None                    b) Mild                    c) Moderate                    d) Significant

- e) Never happened to you

**[46] Have you been physically punished at school other than being paddled, e.g. required to run laps to exhaustion as punishment, being tied to your chair, or having your mouth taped?**

- a) Once or Twice
- b) Three times
- c) Four to 5 times
- d) more than 5 times
- e) Never

[47] Your age at the time of the occurrence, or the earliest occurrence, was:

- a) 5 years old or less
- b) between 6 and 12 years old
- c) between 13 and 17 years old
- d) 18 or over
- e) Never happened to you

[48] This event occurred most recently:

- a) within the last 2 years
- b) between 2 and 5 years ago
- c) 5-10 years ago
- d) more than 10 years ago
- e) Never happened to you



[49] The degree of positive effect on you now due to having experienced physical punishment at school, other than paddling or being hit in other ways, is:

a) None |—————| b) Mild |—————| c) Moderate |—————| d) Significant

e) Never happened to you

[50] The degree of negative effect on you now due to having experienced physical punishment at school, other than paddling or being hit in other ways, is:

a) None |—————| b) Mild |—————| c) Moderate |—————| d) Significant

e) Never happened to you

[51] **Did you witness physical punishment of other children at school?**

- a) Once or Twice
- b) Three times
- c) Four to 5 times
- d) more than 5 times
- e) Never

[52] Your age at the time of the occurrence, or the earliest occurrence, was:

- a) 5 years old or less
- b) between 6 and 12 years old
- c) between 13 and 17 years old
- d) 18 or over
- e) Never happened to you

[53] This event occurred most recently:

- a) within the last 2 years
- b) between 2 and 5 years ago
- c) 5-10 years ago
- d) more than 10 years ago
- e) Never happened to you

[54] The degree of positive effect on you now due to having witnessed at school the physical punishment of other children is:

|\_\_\_\_\_||\_\_\_\_\_||\_\_\_\_\_||  
a) None      a) Mild      c) Moderate      d) Significant

e) Never happened to you

[55] The degree of negative effect on you now due to having witnessed at school the physical punishment of other children is:

|\_\_\_\_\_||\_\_\_\_\_||\_\_\_\_\_||  
a) None      b) Mild      c) Moderate      d) Significant

e) Never happened to you

[56] **Did you know a friend, or friends, who received physical punishment at school?**

- a) Once or Twice
- b) Three times
- c) Four to 5 times
- d) more than 5 times
- e) Never

[57] Your age at the time of the occurrence, or the earliest occurrence, was:

- a) 5 years old or less
- b) between 6 and 12 years old
- c) between 13 and 17 years old
- d) 18 or over
- e) Never happened to you

[58] This event occurred most recently:

- a) within the last 2 years
- b) between 2 and 5 years ago
- c) 5-10 years ago
- d) more than 10 years ago
- e) Never happened to you

[59] The degree of positive effect on you now due to having had a friend who experienced physical punishment at school is:

|\_\_\_\_\_||\_\_\_\_\_||\_\_\_\_\_||  
a) None      b) Mild      c) Moderate      d) Significant

e) Never happened to you

[60] The degree of negative effect on you now due to having had a friend who experienced physical punishment at school is:

\_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ |  
a) None                      b) Mild                      c) Moderate                      d) Significant

e) Never happened to you

### Impact of Event Scale-Revised

Instructions: The following is a list of difficulties people sometimes have after stressful life events. Please read each item, and then indicate how distressing each difficulty has been for you during the past month and in the last 7 days with respect to your worst punishment experience at school. Using the scale below, how much were you distressed or bothered by these difficulties?

| \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ |  
a) not at all   b) a little bit   c) moderate   d) quite a bit   e) extremely

Please answer on both this paper and the scan-able sheet.

last  
7 days   *Regarding my worst punishment experience at School:*

- \_\_\_ 1. Any reminder brought back feelings about it.
- \_\_\_ 2. I had trouble staying asleep.
- \_\_\_ 3. Other things kept making me think about it.
- \_\_\_ 4. I felt irritable and angry.
- \_\_\_ 5. I avoided letting myself get upset when I thought about it or was reminded of it.
- \_\_\_ 6. I thought about it when I didn't mean to.
- \_\_\_ 7. I felt as if it hadn't happened or wasn't real.
- \_\_\_ 8. I stayed away from reminders about it.
- \_\_\_ 9. Pictures about it popped into my mind.
- \_\_\_ 10. I was jumpy and easily startled.
- \_\_\_ 11. I tried not to think about it.
- \_\_\_ 12. I was aware that I still had a lot of feeling about it, but I didn't deal with them.
- \_\_\_ 13. My feelings about it were kind of numb.
- \_\_\_ 14. I found myself acting or feeling like I was back at that time.

- \_\_\_15. I had trouble falling asleep.
- \_\_\_16. I had waves of strong feelings about it.
- \_\_\_17. I tried to remove it from my memory.
- \_\_\_18. I had trouble concentrating.
- \_\_\_19. Reminders of it caused me to have physical reactions; such as, sweating, trouble breathing, nausea, or a pounding heart.
- \_\_\_20. I had dreams about it.
- \_\_\_21. I felt watchful and on guard.
- \_\_\_22. I tried not to talk about it.

Items 1, 2, 3, 6, 9, 14, 16, and 20 measure intrusiveness, items 4, 10, 15, 18, 19, and 21 measure the dimension of hyperarousal, and items 5, 7, 8, 11, 12, 13, 17, and 22 measure avoidance.

[Note: This questionnaire was given twice. The first administration required that the participant answer the questions regarding the worst punishment experience at school and the second time the answers were to reflect the worst punishment experience at home. The instructions were altered to indicate this.]



\_\_\_18. I have never damaged a library book or store merchandise without reporting it.

\_\_\_19. I have some pretty awful habits.

\_\_\_20. I don't gossip about other people's business.

Items 1, 3, 5, 7, 9, 11, 13, 15, 17, & 19 are reverse scored.

**APPENDIX D**  
**ORAL PRESENTATION TO PARTICIPANTS**



## Oral Introduction and Instruction

### I. Personal Introduction

A. Melissa Spencer

B. Doctoral Candidate

### II. Research Information

#### A. Experiences with Childhood Punishment

a) information already know

b) most people have been physically punished

c) a very common experience

#### B. Survey asks different kinds of questions

a) not difficult

b) no right or wrong answers

c) sometimes it can be uncomfortable

1) anticipate no risk

d) important to answer honestly

e) participation is voluntary

#### C. About 1 hour to complete the survey

a) looks like a lot

b) questionnaires are not difficult

c) only about an hour to complete

#### D. Confidential

a) identifying number

1) keep materials together

b) consent form and follow-up

1) both are important

2) will be separated from the data immediately

3) stored separately

4) information you give not looked at individually

a) as a group

### III. Participants

A. Students

B. Must be adults, at least 18 years old

C. Will get extra-credit

a) replaces Module 1

### IV. Sign-up sheets

A. Sheets available

B. Fill out when leave

a) to ensure credit

b) write in name and EDIT number

### V. Ending comments

A. In your packet

a) consent form

b) questionnaire and 2 scan-able sheets

1) please change to the new scan-able sheet when instructed to do so

2) to assist, the question numbers will begin again at number "1"

- B. Please read and fill out consent form
- C. Pick them up
- D. Thank you

### Textual Approximation of Introduction

(Good morning) (Good afternoon), I am Melissa Spencer. I am a doctoral candidate and I will be conducting this research today.

This research asks about experiences with childhood punishment. You already know that most people were physically punished as children, although not all were. It is a very common experience.

The survey asks different kinds of questions. They are not difficult and there are no right or wrong answers. Sometimes it can be uncomfortable but we anticipate no risk. It is important to answer honestly. Participation is entirely voluntary.

It will take about 1 hour to complete the survey. It looks like a lot, but the questionnaires are not difficult and it will take only about an hour to complete.

Your responses are completely confidential. There is an identifying number which will assist us in keeping the materials together. There is a consent form and a follow-up form. Both are important. The follow-up form, called "The Final Word" provides two places for you to check. One requests that we send you information

about the study when it is completed. The other will be used in the event we decide to do further research in the future. Please decide what you would like to do and check the appropriate boxes. The consent form authorizes your participation in the study. Both forms will be separated from the data immediately and stored separately. The information you give will not be looked at individually but as a group.

To participate you must be students and must be adults at least 18 years old. Is anyone here 17 or younger? (Pause to allow a response). You will get extra-credit which will replace a Module 1 grade.

There are sign-out sheets available here on the table. Do not forget to fill this out when you leave. To ensure credit you will need to write in your name and EDIT number. If you do not yet have your EDIT number, please sign out and then get your EDIT number. Come back and complete the form.

In your packet you will find a consent form on top and a questionnaire and 2 scan-able sheets. Please change to the new scan-able sheet when instructed to do so. You will not have completely filled out the first scan-able sheet. To assist with this, the question numbers will begin again at number "1". You will not completely fill in the second scan-able sheet either. The first questionnaire, the demographics, will be answered on the questionnaire only and not on

the scan-able sheet. Beginning with the second questionnaire, the ESS (Event Summary) you will begin answering on the scan-able sheet.

Please answer all questions on the questionnaire also. The last questionnaire of three questions, you will answer only on the questionnaire.

Now, please read and fill out the consent form. I'll come around and pick them up. Thank you for your participation in this study.

**APPENDIX E**  
**FORMS**

## Consent Form

I hereby give my consent for my participation in the project entitled: Corporal Punishment: Residual Psychological Effects Evident in Early Adulthood: Implications for Counselors

I understand that the person responsible for this project is: Dr. Loretta Bradley who may be reached at: 742-2393

Melissa J. Spencer, her authorized representative, has explained the procedures to be followed in completing the questionnaires. I have been told that the information being asked is about experiences most people have had and that sometimes thinking about these things can be uncomfortable. However, little or no risk is anticipated. Answering the questions offers the benefit of providing a time to sort out those experiences. In addition, extra credit will be provided in my EDIT class. I understand that participation is entirely voluntary.

The risks have been explained to me as the following:

Answering the questionnaires about my childhood experiences may be uncomfortable.

It has further been explained to me that the total duration of my participation will be approximately 1 hour; that only Melissa Spencer and the faculty members of her dissertation committee will have access to the data collected for this study; and that all data associated with this study will remain strictly confidential.

Dr. Loretta Bradley has agreed to answer any inquiries that I may have concerning the procedures and has informed me that I may contact the Texas Tech University Institutional Review Board for the Protection of Human Subjects by writing them in care of the Office of Research Services, Texas Tech University, Lubbock, Texas 79409, or by calling 742-3884.

If this research project causes any physical injury to participants in this project, treatment is not necessarily available at Texas Tech University or the Student Health Center, nor is there necessarily any insurance carried by the University or its personnel applicable to cover any such injury. Financial compensation for any such injury must be provided through the participant's own insurance program. Further information about these matters may be obtained from Dr. Robert M. Sweazy, Vice Provost for Research, 742-3884, Room 203 Holden Hall, Texas Tech University, Lubbock, Texas 79409-1035.

I understand that I may not derive therapeutic treatment from participation in this study. I understand that I may discontinue this study at any time I choose without penalty.

Signature of Participant \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Project Director or her Authorized Representative:

\_\_\_\_\_ Date: \_\_\_\_\_



## General Instructions

Participation in this study is entirely voluntary. Confidentiality will be preserved. You will receive extra credit. Because your answers are confidential do not place your name or social security number on any of the materials.

This study consists of 7 questionnaires. The first questionnaire deals with demographics such as your age, university classification, and your parents' education. Some questions will ask that you circle the correct answer, and others will require that you write something in the blank, such as the town where you spent your elementary school years. You will be writing on this questionnaire.

The other questionnaires are primarily multiple choice and you will be using an answer (scan-able) sheet for these responses. Please write your response both on the questionnaires and the scan-able sheet.

Please answer the questions as they are written. Do not change the questions. Provide one response for each question.

The questionnaires in each packet are coded with a number that helps us to ensure that all the materials from one individual are kept together.

This study is about experiences. Everyone has had different experiences that were significant in their lives. Sometimes looking back at our experiences can be uncomfortable. However, we anticipate that this study will entail no risk to you. This study looks at experiences from different angles. There are no right or wrong answers, but it is important to answer the questions honestly.

Participation is entirely voluntary. You may stop at any time if you wish to do so.

We appreciate your participation in this study. Thank you.

### A Final Word

Sometimes people find it difficult to complete questionnaires such as these. Answering these questionnaires may have brought up thoughts and feelings which you have not considered in a long time. You may decide that you would like to seek professional counseling to address these issues. No financial responsibility for counseling is assumed by the researcher, her chairperson or dissertation committee, the College of Education, or Texas Tech University.

You may wish to have a copy of some information regarding what was learned in this study when it is completed. If so, please fill out the form below and drop it into the box provided.

Sometimes it is helpful to do a follow-up study with the same group of people who participated in the original study. If you would be willing to be contacted for such a follow-up study, please indicate on the form below.

This study is part of the work required for a doctoral degree. Melissa J. Spencer, M.Ed., is the investigator. Loretta J. Bradley, Ph.D., is her chairperson. Any questions or comments may be directed to them at:

Melissa J. Spencer, M.Ed.  
MS 1071  
College of Education  
Texas Tech University  
Lubbock, TX 79409

Loretta J. Bradley, Ph.D.  
MS 1071  
College of Education  
Texas Tech University  
Lubbock, TX 79409

Thank you again for participating in this study.

\_\_\_\_\_ Detach Here \_\_\_\_\_

\_\_\_\_\_ Yes, I would like information about the findings of this study when they become available. (It may be up to one year before the findings are available. Therefore, please provide a permanent address.)

\_\_\_\_\_ Yes, I would be willing to participate in a follow-up study.

Please contact me at:

Another person who would know where to contact me is:

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name

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name

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street or P.O. Box

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street or P.O. Box

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city state zip code

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city state zip code

## Follow-up Form

Dear Participant:

Several months ago you participated in a study that inquired about your experiences with punishment at school and at home. You also completed questionnaires asking how you felt in various situations. Credit in your EDIT class was given as compensation for your participation. At the time of the study you requested information about the findings. This letter is in response to that request.

The results of the study indicated that the group who experienced corporal punishment at home and school, especially if the exposure was extensive, was more likely to experience some degree of anxiety, depression, hostility, phobic anxiety, and/or traumatic stress. The experience of ridicule was implicated in more deleterious effects at lower levels of exposure than was corporal punishment.

Knowing someone who had experienced corporal punishment was rated as having had a positive effect on the respondent. Perhaps the experience was a way of learning how not to behave; thus, preventing oneself from participating in future misconduct. Furthermore, the group of participants whose first or only experience with corporal punishment was before the age of 13 years believed that it had a positive effect on them.

These findings reflect the responses of the group of students who participated in the study. They may not reflect your own experience.

As you will recall, the follow-up forms were separated from the other materials when they were completed. They have been maintained separately and your confidentiality has been preserved.

I want to take this opportunity to again thank you for your participation in the study. This research would not have been possible without your support.

Sincerely,

Melissa J. Spencer, M.Ed.