



Global Initiative to
End All Corporal Punishment
of Children

Corporal punishment and children's right to health

Submission to the OHCHR Study on the right of the child to the enjoyment of the highest attainable standard of health

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September 2012

In light of the strong links between the right to health and the right to freedom from all forms of violence and the long established negative impact of corporal punishment on children's physical and mental wellbeing, the Global Initiative to End All Corporal Punishment of Children hopes that the OHCHR will highlight states' immediate obligation under international law to prohibit and eliminate all corporal punishment of children, including in the family home, in its Study on children's right to health.

Prohibition and elimination of all corporal punishment: a human rights imperative

International law is clear that children have a right to protection from all corporal punishment in law and practice, in all settings including their homes. The **Convention on the Rights of the Child** obliges states to take all appropriate legislative measures to protect children from all forms of physical and mental violence (article 19), to take all effective and appropriate measures to abolish traditional practices prejudicial to the health of children (article 24(3)), to ensure that school discipline respects children's human dignity (article 28(2)) and to ensure that children are not subjected to torture or other cruel, inhuman or degrading treatment or punishment (article 37(a)). In its General Comment No. 8 (2006), on the right of the child to protection from corporal punishment and other cruel or degrading forms of punishment,¹ the Committee on the Rights of the Child made it clear that the Convention requires states to prohibit and eliminate all corporal punishment, including in the home. General Comment No. 13 on the right of the child to freedom from all forms of violence highlights the short- and long-term effects of violence, including corporal punishment, on

¹ Committee on the Rights of the Child (2006), *General Comment No. 8: The right of the child to protection from corporal punishment and other cruel or degrading forms of punishment*, para. 11, available at www2.ohchr.org/english/bodies/crc/index.htm

children's health and development,² and General Comment No. 4 on adolescent health emphasises states' obligations to protect adolescents from all forms of violence, including school corporal punishment.³ The Committee consistently recommends prohibition in its concluding observations.

The **Human Rights Committee**, the **Committee Against Torture**, the **Committee on Economic, Social and Cultural Rights** and the **Committee on the Elimination of Discrimination against Women** have all recommended that states prohibit all corporal punishment of children. The issue is regularly raised in the **Universal Periodic Review**.

Children with disabilities are especially vulnerable to corporal punishment. The **Convention on the Rights of Persons with Disabilities** states that all people with disabilities have the right to respect for their physical and mental integrity, to be free from exploitation, violence, abuse and cruel, inhuman or degrading treatment or punishment, and to the highest attainable standard of health.

Corporal punishment and the right to health

Violence is now widely recognised as a public health problem,⁴ and the huge scale of violence against children together with its impact on the health of children and adults is coming to be understood. Corporal punishment is the most common form of violence experienced by children – research shows that it is widespread in homes, schools, care settings and the penal system in states in all world regions.

Corporal punishment kills thousands of children each year and injures and disables many more.⁵ Much violence commonly referred to as “child abuse” is, in fact, corporal punishment – adults using violent and humiliating methods to control children's behaviour. Studies have found that the majority of incidents substantiated as “abuse” by authorities occur in a punitive context,⁶ and research in countries in all regions attests to the severity of the physical violence which children experience in the name of “discipline”. For example, a study in eight countries in **Southeast Asia** found that the most common type of punishment was being hit with hands and objects including whips, belts and chains. Other punishments included children being electrocuted, having their heads submerged in water, having their joints twisted, being forced to the ground, being pinched, having their hair pulled, being scratched and having adults stomp on their stomachs.⁷

All physical punishment, however “mild” and “light”, carries an inbuilt risk of escalation: its effectiveness in controlling children's behavior decreases over time, encouraging the punisher to increase the intensity of the punishment.⁸ A major meta-analysis of 88 studies on parental corporal punishment found an association with physical “abuse” in all ten studies on the topic.⁹ Later studies have confirmed this: a **Canadian** study found that children who were “spanked” by their parents were at seven times greater risk of being severely

² Committee on the Rights of the Child (2011), *General Comment No. 13: The right of the child to freedom from all forms of violence*, para. 15

³ Committee on the Rights of the Child (2003), *General Comment No. 4: Adolescent health and development in the context of the Convention on the Rights of the Child*, paras. 12, 17

⁴ Resolution WHA49.25 (2006)

⁵ Krug, E. G. et al. (eds) (2002), *World Report on Violence and Health*, Geneva: World Health Organization

⁶ Gil, D. G. (1970), *Violence Against Children: Physical Child Abuse in the United States*, Cambridge, MA: Harvard University Press; Trocme, N. et al (2001), *Canadian Incidence Study of Reported Child Abuse and Neglect*, Ottawa: National Clearinghouse on Family Violence

⁷ Beazley, H. et al (2006) *What Children Say: results of comparative research on the physical and emotional punishment of children in Southeast Asia and the Pacific, 2005*, Bangkok, Thailand: Save the Children Sweden

⁸ Elliman, D. & Lynch, M. (2000), “The physical punishment of children”, *Archives of Disease in Childhood*, 83, 196–198

⁹ Gershoff, E. T. (2002), “Corporal punishment by parents and associated child behaviors and experiences: A meta-analytic and theoretical review”, *Psychological Bulletin*, 128(4), 539-579

assaulted (such as being punched or kicked) than children who were not physically punished,¹⁰ while a **US** study found that children who had been “spanked” by their parents in the past month were 2.3 times more likely to suffer an injury requiring medical attention than children who had not been “spanked”.¹¹

That corporal punishment and “abuse” are not two separate phenomena is further evidenced by studies which show that their effects are similar, varying only in degree.¹² The evidence of these damaging short- and long-term effects is overwhelming.

Experiencing corporal punishment as a child is a risk factor for mental health problems in childhood and adulthood. In the major meta-analysis mentioned above, all 12 studies on mental health in childhood concluded that corporal punishment is significantly associated with poor mental health in children, including behaviour disorders, anxiety disorders and depression and with hopelessness in adolescents. All eight studies on mental health in adulthood found an association between corporal punishment and poorer mental health, including low self-esteem, depression, alcoholism, self-mutilation and suicidal tendencies. Later studies have confirmed the associations. For example, a nationally representative study in the **USA** found that adults who had experienced physical punishment as children were more likely to experience mental health problems including major depression, mania, anxiety disorders, alcohol and drug abuse and personality disorders.¹³ An 18 year longitudinal study of 1,025 **New Zealand** born children found that the more physical punishment they experienced during childhood, the more likely they were at age 18 to have had a psychiatric disorder, attempted suicide, been dependent on alcohol or cannabis, been a victim of assault aged 16-18 and committed criminal offences.¹⁴

As well as directly causing physical harm to children, corporal punishment may have an indirect effect on children’s physical health. A study of 3,355 13- to 19-year-old students in Hong Kong, **China** found that those who had experienced corporal punishment in the past three months were more likely to feel that their health was poor and to experience physical illnesses such as asthma, injuries and accidents, as well as anxiety and stress. Those who had experienced corporal punishment in the past three months were more than twice as likely to have stayed in hospital in the past three months as those who had not (6.2% compared to 2.7%). Young people who had experienced corporal punishment were more likely to take up habits which potentially put their health at risk, such as smoking, alcohol consumption, and fighting with others.¹⁵ Another study in **China**, of 1,628 18-70 year olds, found that those who reported experiencing physical punishment sometimes or often during their childhoods were about three times as likely to develop alcohol-related problems (for example, alcohol dependence, social and legal problems due to alcohol drinking and hazard-laden drinking such as drunk driving) than those who rarely or never experienced physical punishment during childhood.¹⁶

¹⁰ Clément, M. E. et al (2000). *La violence familiale dans la vie des enfants du Québec*, Québec: Institut de la Statistique du Québec

¹¹ Crandall, M. et al (2006). “Injury in the first year of life: Risk factors and solutions for high-risk families”, *Journal of Surgical Research*, 133, 7-10

¹² Afifi, T. O. et al (2006), “Physical punishment, childhood abuse and psychiatric disorders”, *Child Abuse & Neglect*, 30, 1093–1103

¹³ Afifi, T. O. et al (2012), “Physical Punishment and Mental Disorders: Results From a Nationally Representative US Sample”, *Pediatrics*, 2 July 2012

¹⁴ Fergusson, D. M. & Lynskey, M. T. (1997) “Physical punishment/maltreatment during childhood and adjustment in young adulthood”, *Child Abuse & Neglect*, 21, 617-30

¹⁵ Lau, J. T. F. et al (1999), “Prevalence and correlates of physical abuse in Hong Kong Chinese adolescents: A population-based approach”, *Child Abuse & Neglect*, 23, 549-557

¹⁶ Cheng, H. G. et al (2011) “Childhood physical punishment and the onset of drinking problems: Evidence from metropolitan China”, *Drug and Alcohol Dependence*, 118, 31-39

Physical punishment has also been shown to have a negative impact on children's cognitive development. This may be due to the effect of early experiences of fear and stress on the developing brain.¹⁷ Results from neuroimaging studies suggest that experiencing harsh physical punishment may reduce the volume of the brain's grey matter in areas associated with performance on a scale used to measure intelligence.¹⁸ Studies which have found an association between corporal punishment and poorer cognitive development in children from the USA include a study of over 2,500 children which found that those who were "spanked" when aged 1 were more likely to score poorly on a test of their mental development aged 3.¹⁹ In another study, over 1,500 children did tests of their cognitive ability (including their reading and maths, memory of locations and motor and social development) when they were aged 2-9 and four years later: the more times children were "spanked" by their mothers in the week prior to the study, the less their cognitive ability had increased four years later.²⁰

Corporal punishment has a negative effect on children's internalisation of moral values and relationship with their parents.²¹ It is closely related to other forms of violence, often coexisting with other forms of family violence such as intimate partner violence,²² and there is abundant evidence that experiencing corporal punishment as a child is associated with increased aggression as a child, adolescent and adult.²³

The legality of corporal punishment of children

Globally, the pace of reform is increasing, with 33 states worldwide prohibiting corporal punishment in all settings including the home as at September 2012. The number of states prohibiting corporal punishment of children in all settings has tripled since 2000, when children had full protection in only 11 states, and has more than doubled since 2006 (16 states).

However, too many states continue to ignore their obligations under international law to protect children. Corporal punishment is legally sanctioned in some settings of children's lives in the majority of states worldwide, and in all settings in 27 states. Judicial sentences of corporal punishment for children, including caning, flogging and amputation, are lawful in 41 states. Corporal punishment is lawful in schools in 81 states and in group care settings such as orphanages in 146 states. In 165 states, violent punishment of children is legally sanctioned in their own homes.

In settings outside the home – in education, penal and care systems – corporal punishment is often "regulated", with legislation prescribing how many times and with which implements the physical punishment is to be administered. Far from protecting a child, such regulation denies every child's right to protection from all forms of corporal punishment and reflects ignorance about the physical and mental harm caused to a child even when physically punished within the law. In countries where corporal punishment is

¹⁷ Fox, N. A. & Shonkoff, J. P. (2011), "How persistent fear and anxiety can affect young children's learning, behaviour and health", *Early Childhood Matters*, 116, The Hague: Bernard van Leer Foundation

¹⁸ Tomoda, A. et al (2009) "Reduced prefrontal cortical gray matter volume in young adults exposed to harsh corporal punishment", *Neuroimage*, 47, 66-71

¹⁹ Berlin, L. J. et al (2009) "Correlates and Consequences of Spanking and Verbal Punishment for Low-Income White, African American, and Mexican American Toddlers", *Child Development* 80(5), 1403-1420

²⁰ Straus, M. A. & Paschall, M. J. (2009) "Corporal Punishment by Mothers and Development of Children's Cognitive Ability: A Longitudinal Study of Two Nationally Representative Age Cohorts", *Journal of Aggression, Maltreatment & Trauma*, 18, 459-483

²¹ See note 9

²² Taylor, C. A. et al (2012), "Use of Spanking for 3-Year-Old Children and Associated Intimate Partner Aggression or Violence", *Pediatrics* 126(3), 415-424

²³ See note 9

lawful as a sentence of the courts, the frequent legal requirement for the involvement of medical professionals exposes the legality of corporal punishment as an impediment to the right to health.

With regard to the home, it is often claimed that laws against “child abuse” or “child cruelty” protect children from “harmful” corporal punishment. But all corporal punishment is harmful – there is no “safe” level of hitting a child. Often laws state that physical punishment should be “moderate” or “reasonable”, but these are arbitrary distinctions used to justify assault of a child in a way which would be unlawful if directed at an adult.

Realising the right of the child to the enjoyment of the highest attainable standard of health is not possible when the law allows them to be hit and hurt under the guise of “discipline”.

About the Global Initiative

Launched in 2001, the Global Initiative to End All Corporal Punishment of Children aims to act as a catalyst for the prohibition and elimination of corporal punishment of children across the world. Supporters of its aims include UNICEF, UNESCO and many other international and national organisations. The Global Initiative has been regularly briefing the Committee on the Rights of the Child on this issue since 2002; since 2004 it has similarly briefed the Committee Against Torture, the Committee on the Elimination of Discrimination Against Women, the Committee on Economic, Social and Cultural Rights, and the Human Rights Committee and, since 2011, the Committee on the Rights of Persons with Disabilities.

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