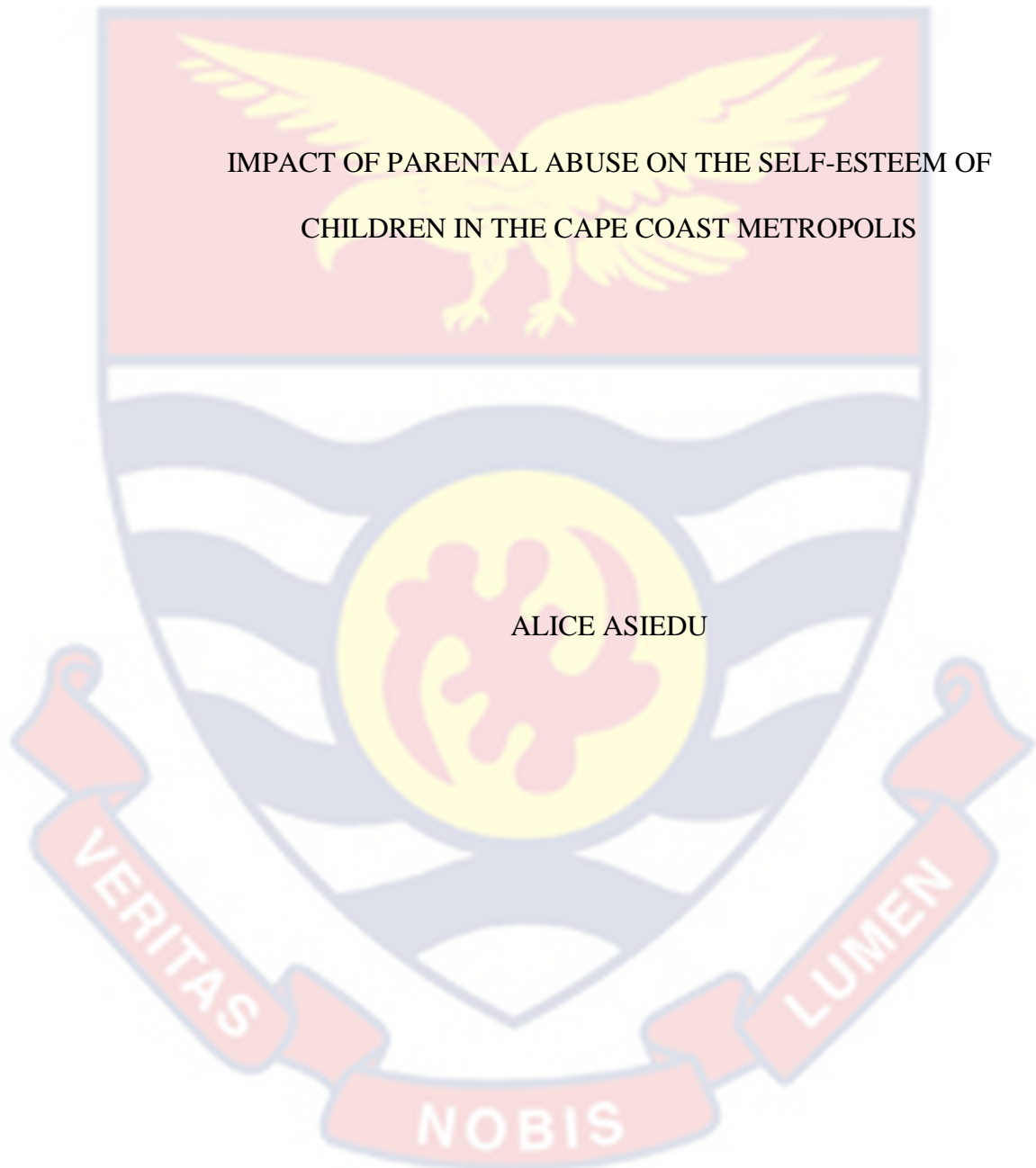


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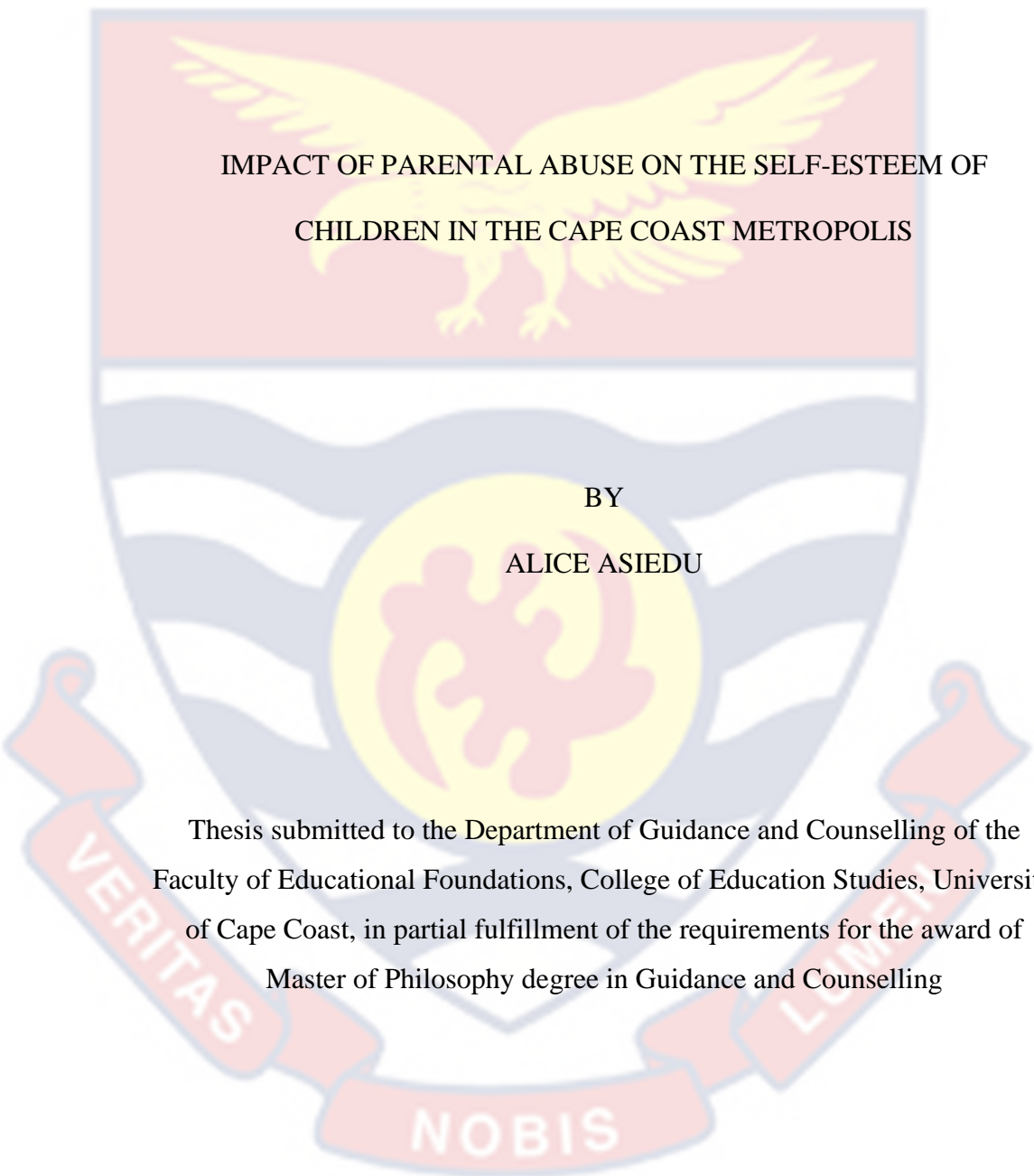


IMPACT OF PARENTAL ABUSE ON THE SELF-ESTEEM OF
CHILDREN IN THE CAPE COAST METROPOLIS

ALICE ASIEDU

2024

UNIVERSITY OF CAPE COAST



IMPACT OF PARENTAL ABUSE ON THE SELF-ESTEEM OF
CHILDREN IN THE CAPE COAST METROPOLIS

BY
ALICE ASIEDU

Thesis submitted to the Department of Guidance and Counselling of the
Faculty of Educational Foundations, College of Education Studies, University
of Cape Coast, in partial fulfillment of the requirements for the award of
Master of Philosophy degree in Guidance and Counselling

APRIL 2024

DECLARATIONS

Candidate's Declaration

I hereby declare that this thesis is the result of my own original research and that no part of it has been presented for another degree in this university or elsewhere.

Candidate's Signature..... Date.....

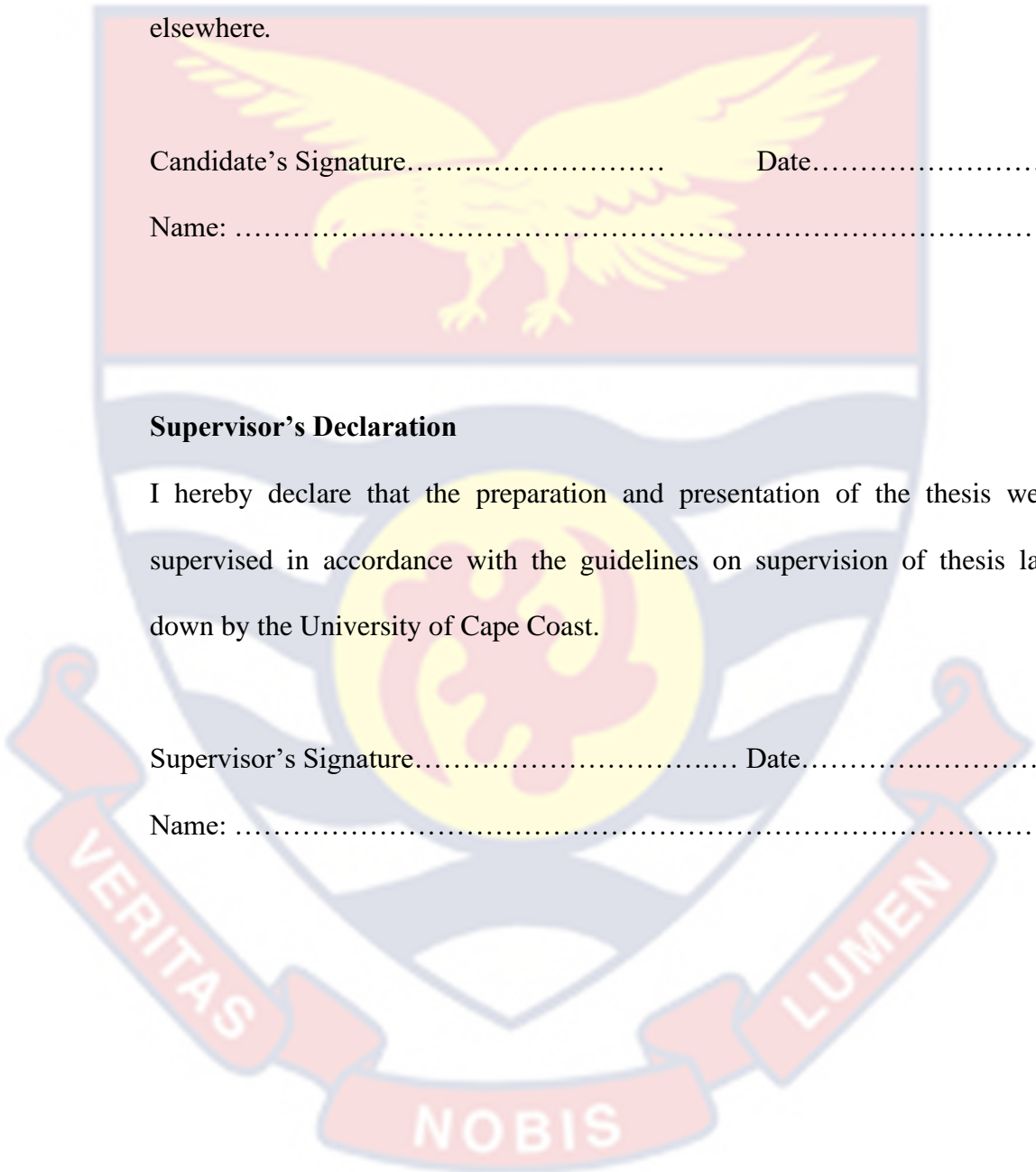
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Supervisor's Declaration

I hereby declare that the preparation and presentation of the thesis were supervised in accordance with the guidelines on supervision of thesis laid down by the University of Cape Coast.

Supervisor's Signature..... Date.....

Name:



ABSTRACT

The purpose of this study was to investigate the impact of parental abuse on the self-esteem of children in the Cape Coast Metropolis. Descriptive survey research design was utilised in this study. In all, 341 students were selected using proportional stratified random sampling from ten selected junior high schools in the Cape Coast Metropolis. Data were collected using questionnaire. Data were analysed using mean and standard deviation, independent samples t-test, one-way analysis of variance and linear regression. The study found that the respondents experienced abuse by their parents on some occasions. The common abuses suffered were psychological or emotional and physical. Also, the study found that the respondents respected themselves, felt useful and felt that they were good. Further, the study showed that support from other family members, friends and teachers, and professional help or assistance can help children cope with abuse experience. There was no significant difference between male and female children regarding their experience of parental abuse. However, significant differences were found in parental abuse experience on the bases of age and class level. Parental abuse also had a significant negative relationship with self-esteem. It was recommended that the Ministry of Gender, Children and Social Protection (MoGCSP) through the Department of Social Welfare organise sensitization programmes for parents on the need for parental abuse to cease.

KEYWORDS

Parental abuse

Psychological abuse

Emotional abuse

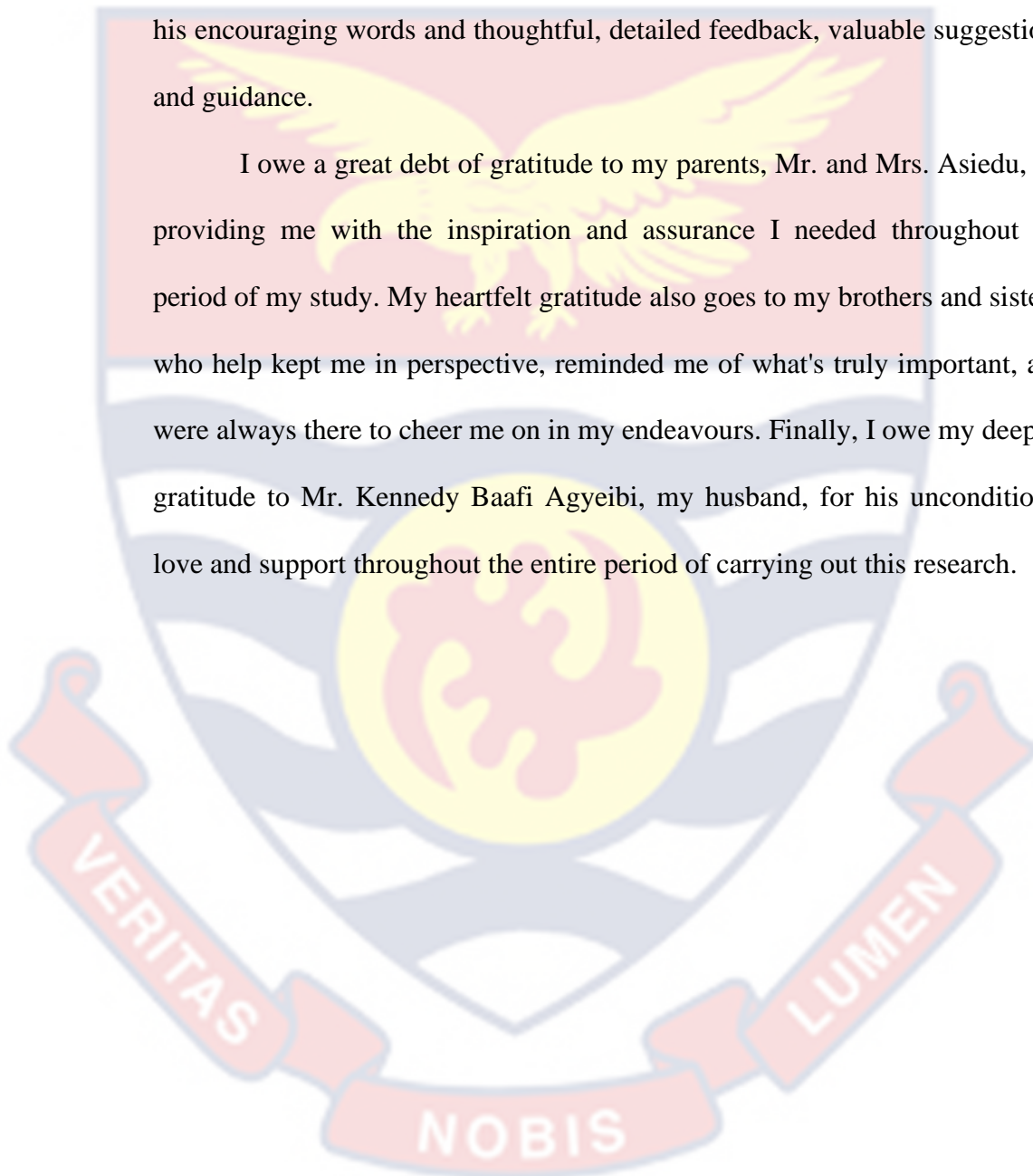
Physical abuse



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DEDICATION

To my children Papa Apoh, Maame Arkoah and Kojo Asiedu.



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CHAPTER ONE

INTRODUCTION

A higher likelihood of psychological, social, and behavioural damage has been linked to early exposure to abusive and neglectful situations (Kim & Cicchetti, 2010). However, the level of damage varies depending on the nature and intensity of the abuse (Pears, Kim, & Fisher, 2008). Children who are abused by their parents experience more significant damaging and profound physical, emotional, and psychological effects than those who experience general forms of abuse (Jin, Wang, Xu & Zhong, 2021). This is because in comparison to other individuals, parents play more significant roles in the overall wellbeing of their children (Sesar, Zivcic-Becirevic & Sesar, 2008). The present study investigated parental abuse in the Cape Coast Metropolis and its impact on the self-esteem of children.

Background to the Study

For every child, the family is the main point of interaction with the world (Alika & Edosa, 2012). The importance of the family cannot be overemphasized since the family provides the foundation for what the child becomes later in life (Agulana, 1999). Levin (2001) believed that parents have the likelihood to be the people within the child's life who have the most genuine and purest interest in their children's lives. Also, parents are significantly influential on their children's psychological, emotional, social, and financial well-being (Uwaifo, 2008). Additionally, Ajila and Olutola (2007) asserted that because parents are a person's earliest socialization influences, the state of the home affects the person and influences the child's personality.

Children must be taken care of and protected by their parents (Nwachi, 2000). Parents' impact on a child's psychological development cannot be disregarded because they are also responsible for providing for and preparing their children for adulthood (Agbo, 1997). Parents have been discovered to be crucial in their children's self-esteem growth (Harter, 2008; Shaffer & Kipp, 2010). Shaffer and Kipp stressed that parents who respond warmly, supportively and foster a healthy home environment usually positively affect the self-esteem of children.

All that notwithstanding, there are instances when parents play negative roles in the lives of their wards. Globally, parents' abusing their children has been identified to be a common and worrying situation with detrimental effects (Butchart, Phinney-Harvey, Mian, Furniss, & Kahane, 2006). Parental abuse of children is a total set of actions or inactions of mothers, fathers or caregivers directed at the child, which prevent or degrade the child's development. The child might suffer negative effects due to these deeds or inactions on their physical, mental, sexual, or social well-being (Tyler, Allison & Winsler, 2006; Tıraşçı & Gönen, 2007).

Despite the fact that different abuses exist, the most prevalent ones are neglect, physical and sexual abuse (Bernstein & Fink, 1998; Kara, Biçer, & Gökalp, 2004; Polat, 2001). Any form of physical injury to a child caused by those in charge of his/her (child) welfare is referred to as physical abuse (Polat, 2001). Also, according to Turhan, Sangün, and Nand (2006), emotional abuse refers to denying children of the affection and attention they require in order to cause psychological harm to them. Topbaş (2004) added that emotional abuse covers the following: humiliating another person, speaking

profane words, isolating another person, intimidation, rejection, disrespect for emotional needs, threatening, expectation of excessive responsibility, and discriminating amongst siblings. Emotional abuse may also include being ignored, not paying attention to, mocked, called names, applying excessive pressure and dominance, and instilling dependency and overprotectiveness (Tell, Pavkov, Hecker & Fontaine, 2006).

Exploitation of a kid by an adult for sexual satisfaction is known as child sexual abuse (Kara et al., 2004). Sexual abuse encompasses a wide range of behaviours, such as stroking one's private parts with one's hands, exhibitionism, voyeurism, child pornography, and rape (Akduman, Ruban, Akduman & Korkmaz, 2005; Tell et al., 2006).

People's psychological wellness is recognized to be strongly correlated with their early life experiences (Cox, Kotch & Everson, 2003). Therefore, adverse childhood encounters frequently bring about subpar psychosocial and physical performance even as an adult (MacMillan et al., 2001). One aspect of children's psychological functioning that is mostly affected by the experience of parental abuse is the self-esteem of children (Arata, Langhinrichsen-Rohling, Bowers & O'Brien, 2007). Healthy self-esteem is viewed as the self-belief that an individual has as being worthy, strong, unique and valued (Mostafavi, Azadbakht & Daniali, 2013). Individuals with high self-esteem are confident in their abilities and qualities, which may have a beneficial impact on their well-being. Conversely, people who have poor self-esteem are more vulnerable to emotional and behavioural issues (Alshawi & Lafta, 2014).

Child maltreatment and poor self-esteem are strongly positively correlated, according to several research studies (Arata et al., 2007;

Benbenishty, Zeira & Astor, 2002). This link between psychological abuse and poor self-esteem arises from the fact that child abuse can have a negative impact on the young person's mental, social, and emotional wellbeing. Thus, the lowering of children's self-esteem has been connected to all of the many types of maltreatment that they endure. For instance, physical child abuse inflicts pain and injuries to a child so much that the child begins to feel inferior while psychological abuse produces emotional harm that affects the sense of self of the child (Murphy & Cascardi, 1999).

Child sexual abuse creates in children a feeling of dejection and shame which affect their sense of self. Self-esteem development can also be hampered by unfavorable parental feedback and a lack of emotional engagement (Gross & Keller, 1992; Karakuş, 2012; Stein, Leslie & Nyamathi, 2002). In other words, those who have experienced abuse may have poor self-esteem as children and later as adults (Miller-Perrin & Perrin, 2012). All of these give the indication that by experiencing maltreatment and abuse, the self-esteem of children would be affected negatively. This is true because when children are abused, it is likely that they would feel that they being hated or that they are not liked. As this continues, children are likely to feel bad about themselves and as such have a negative view of themselves.

Evidence suggests that gender has a significant repercussion on how children live through abuse and how it affects their self-esteem (Xiang, Wanga, & Guan, 2018). Girls benefited more than boys from perceived social support's calming influence on emotional and health outcomes in one instance when there were gender disparities in social support perception (Windle, 1992). Boys are likely to gain more than girls from male engagement in

single-parent homes (Hetherington, Bridges & Insabella, 1998). Boys with poor self-esteem have high likelihood than girls to have emotional issues like depression (Abela & Payne, 2003). With regard to age in abuse and self-esteem, the literature has lacked consistency. Augestad (2017) found age to be a significant factor that influenced the self-esteem of young people while Şahin, Barut and Ersanli (2013) found age not to be significant.

In Ghana, several structures and systems have been put in place to deal with abuse of children. Some of these are the “Department of Social Welfare”, “Domestic Violence and Victim Support Unit” of the Ghana Police Service, “Commission on Human Rights and Administrative Justice (CHRAJ)” and “Ministry of Gender, Children and Social Protection”. These institutions and agencies work using a legal framework which is the Children's Act, 1998 (Act 560). These systems and structures are in place to bring a reduction in the occurrence of child abuse and also ensure that children who suffer abuses receive the best of care. Regardless, many children who suffer abuse do not report or disclose mainly due to the fear of being stigmatized afterward (Gyesi, 2015). Tetteh and Markwei (2018) found that children who are abused usually do not report because there are various sorts of child abuse that are socially acceptable or are seen as just discipline. This is usually the case of parental abuse in Ghana.

Generally, psychologists that specialize in children's development, sociologists, counsellors, teachers, and legislators have long held the belief that parents had the greatest impact on their children's self-esteem (Bjorklund, Yunger & Pallegrin, 2002). This makes the current study of importance in

seeking to protect children and ensuring that the development of children is not affected negatively by parental abuse.

Statement of the Problem

Child abuse is a widespread issue that has grave short- and long-term effects on children (Butchart et al., 2006). Children benefit psychologically much from a calm and supportive atmosphere at home, and vice versa. Parents are probably the figures in a child's life who can affect the child the most (Levin, 2001). Accordingly, parental abuse of children has drawn considerable multidisciplinary attention. Abuse of children by parents has existing connections with negative effects on mental health, according to several research studies. According to studies, teenagers who experienced childhood maltreatment are more prone to experience difficulties like depression, low self-esteem, social disengagement and anxiety (Dehon & Weems, 2010; Leslie, James, Monn, Kauten, Zhang & Aarons, 2010). This may be the case as prior research has shown that childhood maltreatment disrupts the natural development of physical and mental health (Al Odhayani, Watson, & Watson, 2013).

The majority of studies on child abuse have concentrated on its physical and sexual aspects (Crouch, Milner, Skowronski, Farc, Irwin & Neese, 2010; Milner, 2003; Rodriguez, Ryan, Rowan & Foy, 2006; Zlotnick, Mattia & Zimmerman, 2001). This study attempted to offer comprehensive view on the effects of all forms of child abuse perpetrated by parents on the self-esteem of children.

In the Cape Coast Metropolis, reports of Domestic Violence and Victim Support Unit (DOVVSU) mostly show some existence of abuse on

children perpetrated by parents (DOVVSU, 2018). There have been other documented reports of child abuse in the Cape Coast Metropolis. For instance, in February 2019, a five-year old boy was wounded with a machete by his stepmother to the extent that his arm had to be amputated at the Cape Coast Teaching Hospital (Gobah, 2019). Also, in September 2020, a 13-year-old boy jumped from a three-storey building at Ayekoo Ayekoo, a suburb in Cape Coast and died in an attempt to escape beating at home by his parents (Ghanaweb, 2020).

These abusive experiences have the tendency of making children grow up with damage to their psychological wellbeing and specifically their self-esteem. This is because they are likely to feel worthless about themselves because they do not think their parents love them enough (Dehon & Weems, 2010). In Ghana, studies on how parental abuse affects children have either focused on how parenting styles affect children (Dorgbetor, 2014) or on the effects of child abuse (regardless of who perpetrates them) on the psychological health of children (Nyarko, Amissah, Addai, & Dedzo, 2014). The current study was however specific in seeking how abuse perpetrated by parents affect the self-esteem of children. It is against this background that this study was conducted.

Purpose of the Study

This study investigated the impact of parental abuse on the self-esteem of children in the Cape Coast Metropolis. In specific terms, the study sought to achieve the following objectives:

1. identify the prevalence of parental abuse of children in the Cape Coast Metropolis,

2. explore the nature of parental abuse of children in the Cape Coast Metropolis,
3. examine the level of self-esteem of children of parental abuse in the Cape Coast Metropolis,
4. identify measures by which children of parental abuse can be helped to cope with parental abuse,
5. investigate the difference in the impact of parental abuse on male and female children in the Cape Coast Metropolis,
6. investigate the difference in the impact of parental abuse on children in the Cape Coast Metropolis on the basis of age,
7. investigate the difference in the impact of parental abuse on children in the Cape Coast Metropolis on the basis of class level, and
8. identify the impact of parental abuse on the self-esteem of children of parental abuse in the Cape Coast Metropolis.

Research Questions

The research questions answered in this study:

1. What is the prevalence of parental abuse of children in the Cape Coast Metropolis?
2. What is the nature of parental abuse of children in the Cape Coast Metropolis?
3. What is the level of self-esteem of children of parents abuse in the Cape Coast Metropolis?
4. Which measures can help children of parental abuse in the Cape Coast Metropolis to cope with their abusive experience?

Hypotheses

The hypotheses tested in this study are as follows:

1. H_0 : There is no significant difference in how parental abuse impacts male and female children's self-esteem in the Cape Coast Metropolis.

H_1 : There is a significant difference in how parental abuse impacts male and female children's self-esteem in the Cape Coast Metropolis.

2. H_0 : There is no significant difference in how parental abuse impacts children's self-esteem in the Cape Coast Metropolis on the basis of age.

H_1 : There is a significant difference in how parental abuse impacts children's self-esteem in the Cape Coast Metropolis on the basis of age.

3. H_0 : There is no significant difference in how parental abuse impacts children's self-esteem in the Cape Coast Metropolis on the basis of class level.

H_1 : There is a significant difference in how parental abuse impacts children's self-esteem in the Cape Coast Metropolis on the basis of class level.

4. H_0 : There is no significant impact of parental abuse on the self-esteem of children in the Cape Coast Metropolis.

H_1 : There is no significant impact of parental abuse on the self-esteem of children in the Cape Coast Metropolis.

Significance of the Study

The finding from this study will be important to several parties. First and foremost, the findings will shed light on the frequency, type, and effects of

parental abuse on children's self-esteem. Such knowledge will equip policy makers such as the Ministry of Gender, Children and Social Protection as well as the Department of Social Welfare and Development so that strategies can be put in place to be able to reduce and deal with parental abuse of children.

Secondly, it is anticipated the results of the study would help equip human and child rights advocates with knowledge on how to help fight the incidence of parental abuse of children. Counsellors would also be made aware of abuse situations among children and be better positioned to provide appropriate counselling services to assist abused children cope with their traumatic experience of parental abuse so that their self-esteem can be improved. Finally, the results of the study would add to existing literature on the impact of parental abuse on the self-esteem of children in Ghana.

Delimitation of the Study

The study focused only on in-school children in the Cape Coast Metropolis. Specifically, children in junior high schools in the Cape Coast Metropolis were involved in the study. Concerning the scope, the study focused on the nature and prevalence of parental abuse, its effect on self-esteem and how children coped with the abuse experience. Also, the influence of gender, age and class level in the experience of abuse was covered in the study.

Limitations of the Study

The study was limited in the sense that the use of the questionnaire did not offer the participants the chance to freely express themselves as would have been possible through interviews. To prevent this limitation from having

a major effect on the study, I ensured that the questionnaire sufficiently covered all the key areas of the study.

Another limitation of the study had to do with the research design that was used. Using descriptive survey design meant that real cause-and-effect relationship between parental abuse and children's self-esteem could not be established as would have been possible through an experimental design.

Further, the study was challenged because the researcher had to explain the items on the questionnaire to the children in the study since the some of the words were indicated by the children to be difficult to understand. This was a challenge because it delayed the data collection procedure. Also, there was a possibility that the children could misunderstand some of the statements used in the questionnaire.

Definition of Terms

The key terms used in the study are defined in this section:

Caregiver: This term is used to describe anyone who, in addition to parents, may love, look after, and mentor children.

Parent: This is used to refer to the natural or biological parent as well as the guardians of the child.

Parenting: Refers to the process through which a child is raised and educated by their mother and father or caregiver in their family from birth till maturity.

Parental abuse: This term is used to describe all parental acts that impair a child's health, development, or dignity, including physical and emotional abuse, sexual abuse, neglect, and exploitation.

Self-esteem: In this study, this is used to describe how children valued and perceived themselves. It reflects the opinions and beliefs of children about themselves.

Child: This is used to refer to an individual who is below the legal of maturity and mostly aged between infancy and puberty.

Organisation of the Study

This study was structured into five chapters where chapter one presented the introduction to the study. The areas covered in the first chapter included the background to the study, statement of the problem, purpose, research questions, hypotheses, delimitation, limitations, definition of terms and organisation of the study. Chapter two presented the literature review of the study. Theoretical, conceptual and empirical literature were covered in the chapter two. Chapter three focused on the research methods involved in the conduct of the study. Areas included in the chapter three were research design, study area, population, sampling procedures, data collection instrument and procedures, and data processing and analysis. In Chapter four, the results and discussion are presented. Finally, chapter five presented the summary, conclusions and recommendations of the study as well as the implications for counselling and suggestions for further research.

CHAPTER TWO

LITERATURE REVIEW

Introduction

This study investigated the impact of parental abuse on the self-esteem of children in the Cape Coast Metropolis. This chapter focuses on the literature review of the study. Literature was reviewed under the following sub-headings: theoretical framework, conceptual framework, conceptual review and empirical review. The concept of child abuse, types of abuse, causes of child abuse, prevention of child abuse, and concept of self-esteem are reviewed. The rest of the sub-headings are: empirical review, prevalence and nature of child abuse, level of self-esteem of children, impact of parental abuse on the self-esteem of children, measures which can help children cope with parental abuse and abuse and demographic characteristics of children.

Theoretical Framework

Two main theories underpin this study. They are: Bowlby's Attachment Theory and Bandura's Social Learning Theory. These theories are discussed in detail in this section.

Bowlby's Attachment Theory

Bowlby developed the Bowlby's Attachment Theory in 1969. Bowlby defined attachment as the enduring psychological ties that bind people together (Bowlby, 1969). The focus of attachment theory is on interpersonal connections and bonding (Cherry, 2019). This mostly focuses on long-term connections like those between romantic partners and parents and children. Bowlby created the hypothesis in an effort to comprehend the separation anxiety and discomfort that children feel when they are not with their parents

or primary caregivers. The Attachment Theory developed by Bowlby was later refined by Ainsworth (Bretherton, 1992).

According to Fonteboa (2012), a child's emotional development needs a deep connection to at least one major caregiver, Attachment Theory contends. Thus, if a child does not get full emotional bonding with the parent, his or her development is likely to be negatively affected. The theory therefore places emphasis on children living with their parents or caregivers in a strong bond. According to Stams, Juffer, and van Ijzendoorn (2002), child-parent connection traits significantly influence children's adjustment, even among parents of adopted children from variety of races and ethnic groups who are not biologically related to one another.

According to attachment theory, child maltreatment causes insecure and anxious attachment, which can lead to avoidance, ambivalence, or disorganization in a person (Crittenden & Ainsworth, 1989). Anxious attachment is most common in situations of mistreatment and can be seen as a sign of future social and emotional issues (Lewis, Feiring, McGuffog, & Jaskir, 1984). For the child's viewpoint, distorted patterns of relating to others are the basis of how things should be and this influences how children respond to relationships and may even impede the development of a good internal concept of self in the child (Bowlby, 1988).

How the Attachment theory relates to the study

This theory is deemed suitable for the current study because, in accordance with Eagan (2004), when children experience parental abuse, they typically lose some touch with one of their very few attachment figures. For children, it turns into a perplexing and stressful moment. This presents a

challenge to individuals that can affect their entire lives. Several studies such as that of Booth, Clarke-Stewart, McCartney, Owen, and Vandell (2000) have confirmed that behavioural problems, distress, low self-esteem, low level of academic achievement and adjustment difficulties of students are associated with experiencing parental abuse. The implication is that in the context of the current study, parental abuse can destabilize children because of the lack of emotional attachment. This can bring several emotional problems such as poor or low self-esteem.

Social Learning Theory

Bandura (1977) developed Social-Learning Theory. According to the social learning theory, humans pick up social cues through watching and copying other people (Bandura, 1977). The main factor in how children learn is imitation of models. The development of language, violence, and moral judgment can be considered as results of this process (Papalia, Olds & Feldman, 2010).

According to the Social Learning Theory, those who are hostile toward others have learnt these behaviours from role models through operational conditioning and observation of model behaviour (Malley-Morrison & Hines, 2004). Operant conditioning is the process by which behaviours are strengthened via both positive and negative reinforcement as well as suppressed through punishment. Since it frequently results in youngsters complying with parental expectations, corporal punishment may really be used as a technique of discipline (Gershoff, 2002). Physical punishment, however, has been connected to both short- and long-term negative consequences, including physical aggression, strained parent-child connections throughout

childhood, criminal behaviour, antisocial behaviour, mental health issues, and partner or spousal violence in adulthood (Stewart, MacMillan & Wathen, 2013).

The Social Learning Theory's effort to explain how violence is passed down through generations is another aspect of how it explains abuse. It is suggested that as they grow, children get feedback from others about their own behaviours, which helps them form criteria for assessing their own behaviour and look for role models that conform to these standards.

How the Social Learning Theory relates to the study

The Social Learning Theory is relevant in the current study because parents are likely to abuse their children if they believe the abuse can yield disciplinary results. This is particularly so if they observe parental abuse produce 'obedient' children among their neighbours or people they admire. In essence, parental abuse would gain more roots because of the observations made.

Coopersmith's Self-Esteem Theory

In the field of psychology, self-esteem is considered an important component to good mental health and stability. Linked to a diverse range of domains in psychological research, such exploration of self-esteem is usually examined from two different perspectives: self-construct and self-protection (Wills, 2023). Many of the domains covered include personality, cognitive functioning, anxiety, depression and behavioural characteristics. One of the major views explaining self-esteem is that of Coopersmith.

Coopersmith (1967) propounded a theory of self-esteem. In the theory, he proposed that self-esteem can be viewed as "positive and negative attitudes

toward oneself." He considered self-esteem an expression of approval or disapproval of oneself, and a measure of the extent to which one believes that he or she is talented, successful, and that his or her life has meaning and value. As part of the assumptions of the theory, Coopersmith (1981) indicated people can have both high (healthy) and low (unhealthy) self-esteem. Also, Coopersmith revealed that self-esteem can have a significant impact on the lives of pupils.

One major concept in the theory of Coopersmith is his emphasis on childhood experiences. Childhood experiences are considered very important in the theory. Coopersmith (1967) clarified how healthy self-esteem is created. He mentioned that 1) parental warmth and acceptance; 2) clearly defined and enforced limits; and 3) respect for action within these limits; are the conditions that lead to the creation of healthy self-esteem. All of these confirm that self-esteem is routed in early childhood with a foundation of trust, unconditional love and security, impacted on as life progresses by a combination of positive and negative evaluations (Coopersmith, 2002).

One significant aspect of the theory is the development of his self-esteem inventory. Using the scale first established by Carl Rodgers, the Coopersmith developed a 'Self-Esteem Inventory' called Coopersmith Self-Esteem Inventory (CSEI) to assess one's general attitude toward himself or herself. Specific contexts are the basis for understanding the attitude of the tester, which may include peers, interests, school and parents (Seligman, 1996). The inventory measures self-esteem in children and then assesses the parent's child rearing practices for those children with high self-esteem and concluded that the origins of higher self-esteem lay in clear rules and limits

enforced by the parents. The CSEI (Coopersmith, 1981, 1987, 2002) is thus a self-report questionnaire designed to measure attitudes toward the self in a variety of areas (family, peers, school, and general social activities) among young people and adults. This inventory according to Coopersmith, gives a valid view of what self-esteem entails.

How Coopersmith's Self-Esteem Theory relates to the study

Coopersmith's self-esteem theory is relevant in this study because of its emphasis on childhood experiences in building self-esteem. When children are exposed to the best experiences from parents, they are likely to develop healthy self-esteem while children who are exposed to worse experiences from parents are likely to develop poor self-esteem. In this study, parental abuse is likely to create bad experiences for children and this could lead to unhealthy self-esteem among children.

Conceptual Framework

The conceptual framework for this study is based on the key variables in the study. The framework is depicted in Figure 1.

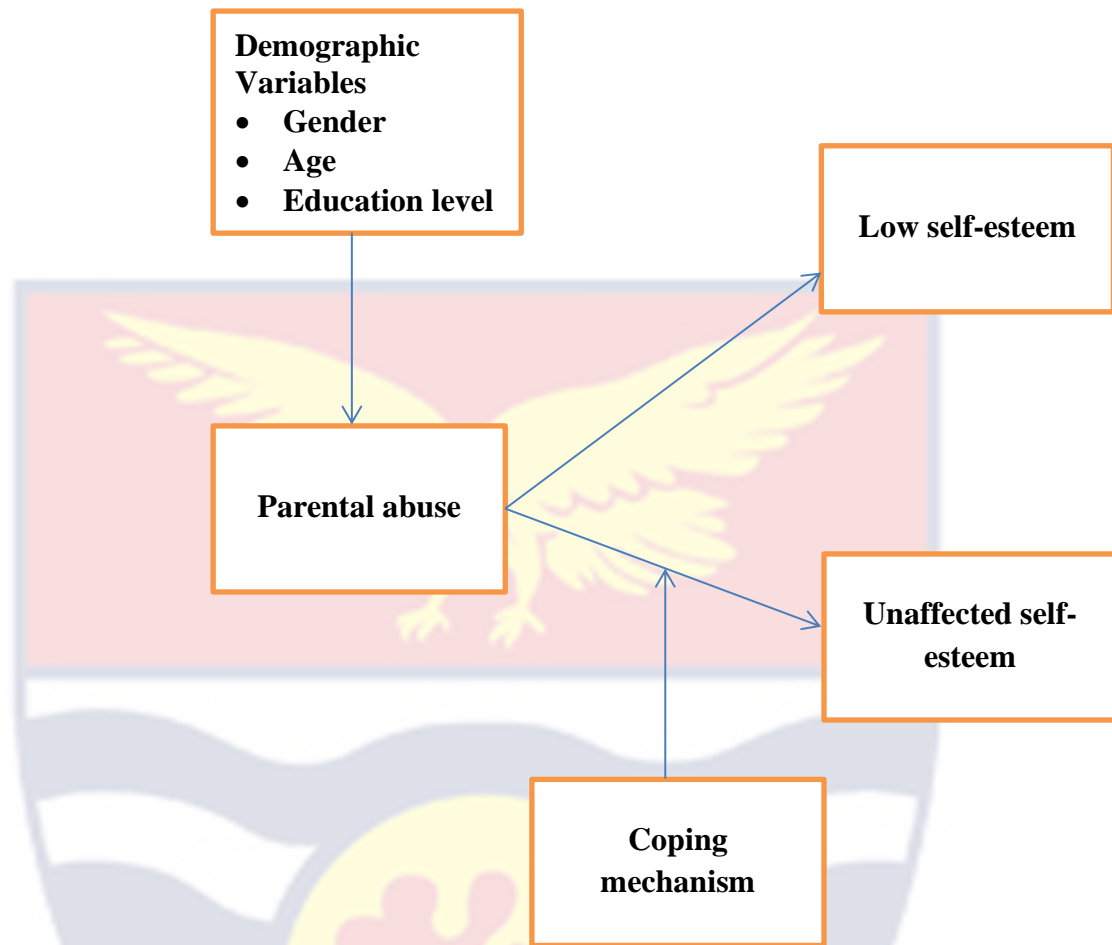


Figure 1: Conceptual Framework of Effects of Parental Abuse on Self-Esteem of Children

Source: Researcher's Construct

From the framework in Figure 1, it can be seen that the experience of parental abuse can affect the self-esteem of children. It can be seen that when children are exposed parental abuse their self-esteem is likely to be low while if the exposure to parental abuse is rare then it is possible that self-esteem of children will be unaffected. This is why there are two arrows leading from parental abuse. Low self-esteem will often result since experts contend that parenting practices have an impact on how children develop emotionally, cognitively, and behaviourally (Maier, 2012). Numerous studies, including those by Priebe, Hansson, and Svedin (2010), have demonstrated a substantial

correlation between a history of sex abuse and reduced self-esteem. Lam (2015) found that teenage internalizing behaviour and decreased self-esteem were strongly predicted by childhood sexual abuse.

Also, it is shown in Figure 1 that coping mechanism adopted by children can stop whatever bad impact that parental abuse could have had. As depicted in the figure, the arrow from the coping mechanism is supposed to curtail or stop any negative effect of parental abuse on self-esteem.

Finally, the demographic variables are depicted to be connected to parental abuse because it is expected that the experience of abuse could be influenced by the gender, age and educational level of the children. In the literature, the gender and age of children have been found to significantly predict the experience of abuse by several researchers (Augestad, 2017; Windle, 1992; Xiang, Wang, & Guan, 2018). The connectedness of the variables in the study have been described above.

Conceptual Review

The key concepts of the study are reviewed in this section.

Concept of Parental Abuse

Over the past few decades, there has been an increase in reports of child abuse all over the world. This could be due to the increased awareness of what constitutes child abuse as well as an increase in protecting the rights of children. Cultural differences in the raising of children made it difficult to reach a consensus on child abuse as there are some disparities in parenting practices in a variety of cultures (Krug et al., 2002; Osmanoğlu, 2019). In African and most East Asian cultures, beating or spanking a child for wrongdoing is acceptable but in the West, it is not. Despite this difference, the

various cultures of the world agree that a child's basic needs such as to be fed, clothed, loved, emotionally affirmed, and approved is necessary for the child's growth into adulthood and a child should not be maltreated or abused (Krug, Mercy, Dahlberg & Zwi, 2002; Osmanoglu, 2019). The WHO defined child abuse as "all forms of physical and emotional ill-treatment, sexual abuse, neglect and exploitation that result in actual or potential harm to the child's health, development or dignity" (Badoe, 2017, p. 1).

Child abuse may also be defined as "doing something or failing to do something that results in harm to a child or puts a child at risk of harm" (Gupta & Aggarwal, 2012, p. 1). One key thing to note from these definitions is that child abuse may be intentional or unintentional i.e. it may be as a result of something that was done or something that was not done but as long as it presents harm or may present damage or hurt to the child, it is considered to be an abuse to the child. As previously stated, child abuse is defined as "the maltreatment of children by parents, guardians, or significant individuals who generally share some form of relationship with the kid" (Nyarko, Amissah, Addai, & Dedzo, 2014, p.1). This definition suggests that a child is more likely to be abused by an individual he or she knows and possibly trusts, or an older person than a stranger. This category of people includes parents. This seems like a breach of the child's trust as society regards the parents of the child as the child's protectors.

Types of Abuse

Studies such as Abamara and Ebue (2016), African child Policy Forum (ACPF) (2014), Badoe (2017), Fayaz (2019), Gupta and Aggarwal (2012) and Krug, Dahlberg, Mercy, Zwi and Lozano (2002) have suggested four main

types of child abuse. These are: physical abuse, emotional abuse, sexual abuse and neglect. Nyarko, Amissah, Addai and Dedzo (2014) suggest a fifth type of abuse on children which is psychological abuse. However, the ACPF (2014) lumps emotional, mental and psychological abuse as one.

Physical Abuse

Krug et al. (2002) defined physical abuse as acts committed by a child's caregiver that brings hurt or has the possibility of causing hurt to the child. It involves any intentional physical contact resulting in injury, pain or discomfort. It can be inferred that intent on the part of the abuser and the possibility of harm to the child form a large part of physical abuse. However, the resulting effect i.e. physical injury may be a by-product of the intent. This is a grey area in the African and East Asian cultures where they believe that a little pain helps in straightening the child when they go wrong. This form of physical punishment is often given by parents of the child (ACPF, 2014). According to Gupta and Aggarwal (2012), this form of abuse is also known as 'battered child syndrome' as it characterises the clinical manifestations of severe physical abuse in children. The child may; have unexplained bites, burns, broken bones, bites or fading bruises, become frightened at the mention of the parents or shrink when an adult comes too close (Gupta & Aggarwal, 2012).

Sexual Abuse

In child sexual abuse, the caregiver or parent exploits a child for sexual purposes. Sexual abuse in children may be defined as "forcing or enticing a child or young person to take part in sexual activities, including prostitution, whether or not the child is aware of what is happening" (Badoe, 2017, p. 2).

Penetrative sex actions include defiling, buggery, or oral sex, kissing, stroking the young person's genitalia or breasts, engaging in full sexual activity with a kid, or rape. The non-penetrative sex acts may involve the child observing sexual actions online, participating in the creation of sexual photos online, or gazing at sexual photographs online or motivating or forcing the child to conduct themselves in sexually unbecoming ways, sending letters, emails or text messages of a sexual nature to a child.

Child marriage and female genital mutilation (FGM) are also considered as forms of sexual abuse. In child marriage, children are expected to act as 'wives' to their older husbands and this often includes having sex. Children who are victims of sexual abuse may have difficulty walking or sitting, become suddenly shy of changing in front of others, have nightmare and experience changes in appetite and may contract venereal diseases (Gupta & Aggarwal, 2012).

Psychological or Emotional Abuse

Coercive or unpleasant behaviours used to threaten or cause emotional harm are known as psychological abuse (Nyarko, Amissah, Addai & Dedzo, 2014). Nyarko et al. further posited that psychological abuse of children includes things like making derogatory remarks about them, threatening to hurt them, and other emotional abuses. This is quite similar to other definitions on emotional abuse I came across. In this regard, the present study lumps emotional and psychological abuse into the same category. Any behaviour that impedes a child's emotional growth or feeling of worth is identified as "emotional abuse". This includes withholding love, support, or counsel, as well as being consistently criticized, threatened, or rejected.

It might be challenging to assist when there is emotional or psychological abuse since it is sometimes difficult to establish (Fayaz, 2019). It is difficult to prove because it leaves no physical signs unlike the other forms of child abuse. Again, this form of abuse can be considered as an oversight on the part of a caregiver or parent in providing a suitable and supportive atmosphere for a child which affects the psychological or mental well-being of the child. Emotional/psychological abuse also comprises actions that may have a negative effect on the emotional health and growth of a child. Some of these actions may involve restriction of a child's movements, denigration, ridicule, threats and intimidation, discrimination, rejection and further violent behaviour that does not involve physical contact (Krug et al., 2002). The indication is that if the right emotional atmosphere is not created for a child, the child may grow into an emotional stunted adult and may also be become an emotional stunted parent if there is no intervention. The child may exhibit extremes in behaviour such as being overly compliant or demanding, aggression or extreme passivity, delay in physical or emotional development and attempted suicide (Gupta & Aggarwal, 2012).

Neglect

This form of abuse suggests “a deliberate choice on the part of parents and caregivers to withhold basic necessities from children and fail to care for them adequately despite having the necessary means, knowledge and access to services” (ACPF, 2014, p. 23). This definition excludes parents who are unable to provide for their children due to illness or poverty or some other valid reason. Forms of neglect may include a failure on the side of the parent or caregiver to provide proper nourishment, a safe environment and housing,

medical care, education, and protection for the child from danger, warmth or harm. Adults who observe that a child is being abused and say or do nothing may be accused of neglect.

Fayaz (2019) categorised neglect into four types. These are physical, educational, medical and emotional neglect. Fayaz indicated that physical neglect involves parents withholding physical things like food, clothing and shelter from children while educational neglect involves parents withholding educational resources and not partaking in their children's educational activities. Additionally, Fayaz said that medical neglect involves parents withholding the best health care from their children while emotional neglect involves withholding affection from a child and leaving the child isolated.

A child who is being neglected may exhibit the following signs; lacks needed medical or dental care, frequent absenteeism from school, begging or stealing food or money, lacks sufficient clothing for the weather, immunizations, or glasses or regularly unkempt and has strong body smell. A parent who is neglecting their kid may act bizarrely or strangely, look apathetic or unhappy, seem indifferent to the child, or abuse alcohol or other drugs (Gupta & Aggarwal, 2012).

Causes of Child Abuse

With child abuse gaining attention over the past few years, some studies have been conducted into the possible causes of child abuse (Gupta & Aggarwal, 2012; Barth, 2009; Chamberlain, 2014). Gupta and Aggarwal (2012) argued that abuse may be perpetuated if the abuser, in this study, the parent was abused as a child (intergenerational transmission of maltreatment), if the parent has a substance abuse problem, lacks the education and skill

needed to raise a child, there is discord between the parents, domestic violence features in the home life, one or both parent(s) is/are unemployed, the family is poor and if they are socially isolated.

A parent who was abused can become an abuser regardless of who his/her abuser was (Gupta & Aggarwal, 2012). It is very common for an abuser to abuse a child especially if their abuse was never discovered or they never received any therapy while growing up. Sometimes, they want to lash out or want others to experience what they went through even if it is their own child. In the case of substance abuse, it is widely known that the abuse of substances like alcohol and drugs has the capacity of blurring the judgment of the user. It can be assumed that the parent(s) who abuses substance has blurry judgment and mistreats the child as a result. Again, some parents lack knowledge on how to raise children and end up unintentionally abusing the child. Discord between the parents may affect how the parents treat the child especially when the blame the child for discord.

Barth (2009) added that women who are victims of abuse in their marriages or relationships tend to have terrible parenting skills. When the family is poor, parents may lash out at the child (ren) due to frustration which stems from their inability to adequately provide for the child (ren). Barth further indicated that four causes of child abuse perpetuated by parents are domestic violence, drug abuse, mental ailment and behavioural problems. Barth was of the view that earlier studies have presented evidence to support that maternal mental illness or maternal depression affects parenting and can be connected to emotional growth and behaviour problems in children. Barth explained also that, parents of children with behavioural problems often

physically abuse the children and cite the child's behaviour as the cause of the abuse.

Chamberlain (2014) reviewed literature on the causes of child abuse and also categorised them into four. The first was personal pathology which comprises substance abuse, mental disability and emotional instability. Role functioning which was the second included lack of training and knowledge about child development, marital problems or domestic abuse, social isolation, poor parenting models as well as intergenerational transmission of maltreatment. Societal factors make up the third category and include poverty, unemployment and social inequality. System failure which has not been previously discussed is the last category. It discusses the failure of the system or agencies in charge of children's welfare to effectively prevent child abuse. Chamberlain added that some of these agencies even the national ones do not carefully investigate allegations of child abuse but return the children to abusers and in some cases are slow to respond if they even respond at all.

Prevention of Child Abuse

The main idea behind prevention deals with ways of stopping negative occurrences from becoming recurring incidences. Stagner and Lansing (2009) argued that the concept of prevention is concerned with affecting future outcomes by influencing current behaviour. This basically means that we put measures in place at the present to correct the wrongs so the future can be free of those wrongs. In relation to child abuse, prevention suggests ways to protect children from abuse. In this section, the ways of preventing parental abuse are discussed.

Fawcett, Claassen, Thurman, Whitney and Cheng (1996) asserted that the first step towards prevention of child abuse is to identify and define the boundaries of the problem. Parental abuse is a problem because parents are the child's first agent of socialization, so, how the child is treated at home may influence the child's worldview. This is evident in how abused children relate to other adults around them. Barth (2009) argued that a lot of interventions target abusive parents yet, they are not tuned to how the abuse of children can be prevented. The argument of Barth is based on the fact that most of the interventions are targeted towards assisting parents to manage their expectations of children and use positive discipline etc.

Chamberlain (2014) presented possible solutions that correspond to specific categories of abuse. For abuse caused by personal pathology, counseling or treatment should be given to the perpetrator or parents and in serious cases, the child should be removed from the parent's care. In instances of abuse caused by role malfunctioning, Chamberlain argued that training or mentorship should be provided to parents and coping skills for stressful incidences should be included in the training. Parent education, support groups and home visits are also encouraged to support parents who abuse children as a result of role malfunctioning. As societal factors are beyond the individual's control, Chamberlain suggested that social and communal changes should be put in place and there should be an increase in social and communal support. To address system failure, Chamberlain posits that social welfare systems should be revamped. This may include better training and compensation for workers.

The ACPF (2014) also suggested ways of preventing child abuse in Africa. Their suggestions place emphasis on laws, policies and programmes that can help prevent abuse. They posited that in spite of the awareness that has been created over the past two decades, many people do not agree that children can have rights. The ACPF argued for the ratification of international instruments against child exploitation; constitutional and legal reforms on child abuse; minimum age legislation to combat child marriage and labour, implementation of laws to govern corporal punishments and implementations of laws to prohibit harmful acts such as child pornography in Africa.

Concept of Self-Esteem

According to Cast and Burke (2002), self-esteem is among the most researched areas of social psychology and is considered as an important part of the self-concept. This is mostly due to the connection between high self-esteem and positive outcomes (Baumeister, 1993; Mecca, Smelser & Vasconcellos, 1989). Rosenberg (cited in Abdel-Khalek, 2016) posited that the concept of self-esteem makes reference to the individual's positive evaluation of him or herself and comprises self-respect (usually based on the individual's capabilities and abilities) and self-worthiness. Self-esteem includes a competence dimension (efficacy-based self-esteem) which corresponds with self-respect and a worth dimension (worth-based self-esteem) and this corresponds with self-worth (Gecas, cited in Cast & Burke, 2002).

It has been observed by several researchers such as Brown and Harris (2013) and Abdel-Khalek (2016) in the literature on self-esteem, that there has not been much agreement on the concept due primarily to the three dimensions of definitions of self-esteem that are used interchangeably. The first dimension

is global or trait self-esteem which refers to “a personality variable that captures the way people generally feel about themselves” (Brown & Harris, 2013, p. 53). Global self-esteem deals with how people feel about themselves i.e. love or affection which translates to high self-esteem and feelings of ambivalence towards self and in extreme cases hate towards self which translate to low self-esteem.

The second dimension of self-esteem is self-evaluations. This dimension refers to “the way people evaluate their various abilities and attributes” (Brown & Harris, 2013, p. 53). Brown added that self-esteem and self-evaluation are connected but are not the same. An individual may have high self-esteem i.e. love themselves but not think highly of their social skills i.e. low social self-esteem and vice versa.

The third component of the concept of self-esteem is self-worth, which refers to transient emotional experiences, especially those that result from a favorable or unfavorable consequence (Brown & Harris, 2013, p. 54). This dimension involves the experiences that influence a person’s sense of value. One’s self-esteem may drop after failing an exam and may rise when they receive a commendation. The difference between this dimension and the first dimension is that trait self-esteem is a general feeling or opinion of oneself while feelings of worth are based on a current experience and may be fleeting in that if the individual has a bad experience that leads to a low self-esteem and can change in the next hour after a positive experience which bring high self-esteem.

Generally, there are some accepted ways of measuring self-esteem and they include the “Rosenberg Self-Esteem Scale (RSES)” developed by

Rosenberg (1965), the “Coopersmith Self-Esteem Inventory (CSEI)” developed by Coopersmith (1967, 2002), “Piers-Harris Self-Concept Scale (PHSCS)” developed by Piers and Herzberg (2002), and “Harter Self-Perception Profile for Children (HSPCC)” developed by Harter (2012).

Despite some differences in their structure or the nature of the questions, all the mentioned scales of measuring self-esteem are answered or filled by the individuals in question (Brown & Harris, 2013; Logan & King, 2016). Some researchers have argued that the results of these tested may be compromised by ‘self-presentational concerns’. This is because instead of choosing options on how they feel about they feel about themselves, individuals may choose options that will create specific impressions in the minds of others. Defensiveness may also affect the results of a self-reported test i.e. the test taker may feel defensive and choose answers that support their defensives instead of the true ones (Brown & Harris, 2013; Logan & King, 2016).

In the development of self-esteem, affective models posit that self-esteem begins to emerge at a young age and is often characterized by two types of emotions: feelings of belonging, which are based on interpersonal interactions, and feelings of mastery, which are more introspective in nature (Brown & Harris, 2013). The development is usually based on feelings of trust developed between the child and their parent. The abuse caused by parents is thus more terrible. Once the child identifies the parent with whom trust is meant to be developed as an abuser, it can be assumed that whatever trust that has already been established will be broken and whatever else was left to be developed may never happen. Inevitably, the development of self-esteem in

the child is affected. This creates a precarious situation which this study aims to investigate.

Empirical Review

Empirical literature are reviewed in this section. The review is done under different sub-headings relating to the objectives of the study.

Prevalence and Nature of Child Abuse

The discussion on the prevalence and nature of child abuse is important given the adverse effects abuse has on a child's development. Stoltenborgh, Bakermans-Kranenburg, Alink and IJzendoorn (2014) reviewed literature on the abuse across the globe so as to provide an appraisal on the global rate of child abuse prevalence. The study combined and compared the results of various meta-analyses on the prevalence of the four types of child abuse and comprised 244 published papers in which reported 551 cases of different types of abuse. The study noted that research on child abuse is preoccupied with works on sexual abuse and child abuse prevalence rates are largely similar across the globe. Differences in prevalence may be due to the different genders, the different types of abuse, geographical region and even reported cases.

Stoltenborgh et al. (2014) gathered literature (from January, 1980 to January, 2008) in three different phases. The first phase involved searching various electronic databases using specific criteria. Secondly, the researchers searched specialised journals on children and child abuse with the same criteria used in the first phase. Lastly, the references of the literature gathered in the first two phases were searched for. From the review, it was shown firstly that most research conducted on child abuse centered on sexual abuse and it

appeared that research on child abuse started with sexual abuse. From the results, it was evident that not much has been done on emotional abuse and neglect.

In Africa, Stoltenborgh et al. (2014) gathered eight studies on female sexual abuse and five on males. The studies on female sexual abuse had a collective sample of 13,318 with a prevalence of 20.2% and that on males had 1,403 participants with 19.3% prevalence. Four studies on physical abuse were reviewed and they had a total of 4,626 participants with a prevalence of 22.8%. Also, four studies were reviewed on emotional abuse with 1,821 participants and a prevalence of 46.7%. Stoltenborgh et al. indicated that at the time of their study, there was no evidence of studies on either physical or emotional neglect in Africa.

In Asia, Stoltenborgh et al. (2014) reviewed 11 studies of sexual abuse of females with 5,466 participants with 11.3% prevalence rate as compared to eight studies on male sexual abuse with a sample of 3,888 and prevalence of 4.1%. Regarding physical abuse, 20 studies were reviewed and 16.7% prevalence rate was realised. There were seven studies on emotional abuse with a sample of 3,586 and a prevalence of 41.6%. Finally, Stoltenborgh et al. indicated that there were three studies on emotional neglect with 1,583 participants and 30.1% prevalence. However, there were no studies on physical neglect were reported.

In Australia, Stoltenborgh et al. (2014) reviewed 12 studies on female sexual abuse with a total of 16,372 participants and 21.5% prevalence as compared to eight studies on male sexual abuse with 10,775 participants and 7.5% prevalence. Nine studies on physical abuse were reviewed with 14,314

participants and 14.3% prevalence and one study on emotional abuse with 1,296 participants and a prevalence rate of 11.3%. Two studies concerning emotional neglect were reviewed with 1,019 participants and 40% prevalence while there no study reported on physical neglect.

Moody et al. (2018) conducted a systematic review of studies on prevalence of child maltreatment. PubMed, Ovid SP and grey literature from the NSPCC, UNICEF, The UK Government, and WHO from 2000 to 2017 were searched. It was revealed that sexual abuse is the most commonly studied form of maltreatment across the world with median prevalence of 20.4% and 28.8% in North American and Australian girls respectively, with lower rates generally for boys. Rates of physical abuse were more similar across genders apart from in Europe, and often very high in some continents, for example, 50.8% and 60.2% for girls and boys respectively in Africa.

Gekoski et al. (2016) explored the prevalence, nature, and impact of familial child sexual abuse. A rapid evidence assessment (REA) was used. Over 57,000 documents were scanned, and 296 ultimately systematically analysed. It was shown that: there was wide variation in prevalence rates between studies; girls were more likely to be victims than boys; the onset of abuse was typically school age; abuse in minority groups was underreported; sibling abuse may be more common than that by fathers; and that female perpetrated abuse may be under-reported.

As part of the study of Stoltenborgh et al. (2014), they reviewed 39 studies on sexual abuse of females in Europe with 35,468 participants and 13.5% prevalence as compared to 24 studies on sexual abuse in male children with 26,513 participants and 5.6 % prevalence. On physical abuse, 19 studies

with a sample size of 16,285 were reported with 22.9% prevalence rate. Six studies with a total of 8,072 participants and a prevalence of 29.2% were reported for emotional abuse. In the case of physical neglect, 2 studies with 2,869 participants with 6.5% prevalence were reported and no studies were reported with emotional neglect.

Stoltenborgh et al. (2014) also reviewed a total of 120 studies on female sexual abuse in North America. The studies covered 143, 883 participants and 20.1% prevalence and 57 studies on male sexual abuse with 99, 681 participants and 8% prevalence. With regard to physical abuse, 102 studies with 144, 794 participants and 24% prevalence were reported. Twenty-four studies with 61, 811 participants with 36.5% prevalence were reported on emotional abuse. On physical and emotional neglect, 11 studies with 56, 537 participants and 19.2% prevalence and 11 studies with 52,053 participants and 14.5% prevalence were reviewed respectively.

Three studies in South America with a sample size of 1,564 and 13.4% prevalence rate were reported on female sexual abuse and 2 studies with a sample size of 415 and a prevalence of 13.8 were reported on male sexual abuse (Stoltenborgh et al., 2014). Three studies were reported on physical abuse with 1, 623 participants and 54.8% prevalence. There were no studies on emotional abuse, physical and emotional neglect from South American at during the selected period used in the study.

A research by UNICEF (2014) examined works of literature from 30 East Asian and Pacific Island nations that were produced between 2000 and 2013. According to their study, child abuse is highly prevalent in all of the locations examined, with prevalence rates ranging from 17 to 35 percent for

both males and females in low- and lower-middle-income countries and from 1 to 13 percent in upper middle- and high-income nations. Also, about three out of four children experienced violent discipline, according to the UNICEF study. In various nations, the frequency of child sexual abuse ranged from 3 to 16.5 percent for boys and 11 to 22 percent for girls. In general, it was also discovered that females stood a higher chance than boys to experience sexual abuse in all contexts, with notable outliers in the low-income nations in the region, where reports suggested that boys experienced sexual abuse more frequently than girls (16.5 percent vs. 13 percent respectively) (UNICEF, 2014).

According to the same survey conducted by UNICEF in 2014, the prevalence estimates for children who saw parental violence ranged from 12 to 32 percent for both boys and girls who reported having seen violence between their parents or other caregivers. The prevalence estimates for emotional abuse also showed a large variation among nations in the area, but fairly alike estimations for males and females in lower middle- and upper middle-income nations. These estimates ranged from 18 to 41.6%. The study showed again that about one out of every 10 children was experiencing child labour in China. Finally, the UNICEF report revealed that about one-fourth of all children get married before the age of 18, and in certain countries, nearly one-tenth of all children get married before the age of 15.

To comprehend and describe the degree of child abuse in Africa, the African Child Policy Forum (ACPF) (2014) undertook a research on child abuse in a few different African nations. They discovered that almost 50% of children in Mali and Ethiopia and around 60 percent of those in Zambia,

Uganda, and Morocco had received physical punishment from family members. The most frequent offenders in the family environment were mothers, dads, and elder siblings. The major goal of these activities was to correct the child's behaviour or punish them for it. Despite the fact that almost 60 % of children reported that no serious hurt was perpetrated on them, 16 % said that their most current incident of physical punishment left them with scars, and 25% reported that the pain exacted on them had prevented them from being involved in school or play activities. However, the school was the place where physical violence was most likely to occur. Around 92 % in Togo, 86% in Sierra Leone, 73% in Egypt, 71 % in Ghana, 60% in Kenya, and 55% in Senegal and Benin reported being physically abused by instructors or classmates in schools (ACPF, 2014).

The least frequently reported type of child abuse is neglect or carelessness with the intent to do damage to a kid. According to the ACPF study (2014), 14% of Ugandan children and 5% of Moroccan children reported deliberate neglect, which included depriving the child of food and water when they were available, making them wear soiled, torn-up clothing or inadequately warm clothing, and delaying medical attention when they were ill despite having access to the needed means, resources, and services.

Chiroro et al. (2006) investigated the nature and prevalence of self-reported childhood sexual abuse (CSA) among a sample of Zimbabwean girls and college students. A total of 1059 high school girls and college students with a mean age ($M = 18.31$, $SD = 3.66$) participated in study. Overall, a CSA prevalence rate of 41.26% was found. The highest CSA prevalence rate was found among respondents who resided on commercial farms and mines (53%).

Respondents who lived with their biological parents during childhood were significantly less likely to be sexually abused than were respondents who lived with non-parents such as uncles and brothers-in-law. Only 7.22% of the perpetrators were strangers. The researchers concluded that sexual abuse of children in Zimbabwe was rampant, multifaceted, and linked to cultural factors that must be addressed as part of efforts to confront this scourge.

Higgins et al. (2023) examined the prevalence in Australia of multi-type child maltreatment, defined as two or more maltreatment types (physical abuse, sexual abuse, emotional abuse, neglect, or exposure to domestic violence) and to examine its nature, family risk factors, and gender and age cohort differences. Of 8503 participants, 62.2% experienced one or more types of child maltreatment. Prevalence of single-type maltreatment was 22.8% whereas 39.4% of participants reported multi-type maltreatment and reported all five types. Multi-type maltreatment prevalence was highest for those aged 25-44 years. Family-related adverse childhood experiences - especially mental illness and alcohol or substance misuse - increased risk. Exposure to domestic violence was the maltreatment type most often present in multi-type maltreatment patterns.

According to the ACPF (2014), children have been exposed to many types of sexual assault in their families, the houses of friends, relatives, or neighbors, as well as in schools and communities. According to the ACPF, a 2010 survey in Kenya reported that schools were the second most frequent setting for sexual abuse of females between the ages of 13 and 17. In Sierra Leone, 30 percent of rape cases were tied to school-related situations. Abuse, particularly against girls, happens outside of safe spaces in public places like

the market or on girls' routes to school. In Kenya, 46% of girls reported experiencing sexual assault at the hands of others.

Generally, in Africa, forms of abuse other than the perpetration of physical harm are rarely given the recognition as abuse (ACPF, 2014). Therefore, damage to a person's mental or psychological health caused by non-physical means is rarely documented. Children are especially vulnerable to a variety of forms of abuse, from insults and calling of names to bullying, intimidation, and threats since their growth and feeling of integrity as human beings are still growing (ACPF, 2014). According to the study, psychological abuse was frequently utilized as a form of punishment, along with threats meant to stop children from acting out.

Further, according to the ACPF (2014), it is challenging to consistently identify the border between tough treatment of children and inflicting emotional abuse. Both the frequency of psychological and emotional abuse in the family and the attitudes and perceptions of its commission vary. Children in surveys conducted in Zambia and Morocco reported prevalence rates of 75% and 72%, respectively. Children in Ethiopia reported a prevalence of 53%. The prevalence of various types of violence varies greatly among schools as well. In comparison to students in Kenya or Mozambique, pupils in Ghana were two-times more probable to suffer psychological abuse at school.

Fayaz (2019) aimed to comprehend child abuse, its many manifestations, effects, and countermeasures. Fayaz discovered that there are typically four forms of child abuse: neglect, sexual abuse, emotional abuse, and physical abuse. Additionally, it was discovered by Fayaz that child abuse can have both instant and long-term effects, including social, emotional,

cognitive, and educational issues; poor self-esteem; and even self-harm or suicide. Osmanolu (2019) aimed to comprehend abuse and the problems it raises. A content analysis of the data gathered from 616 students was performed. According to the conclusions, 75% of the children in all age groups were found to have been abused, and across all age groups, peer abuse was most prevalent, followed by abuse from family and friends.

Varieties of abuse are experienced by children in different contexts. This has been established in the different studies reviewed.

Level of Self-Esteem of Children

The level of self-esteem of children has also been explored in several studies. Lingren (1991) did a study into the development of self-esteem in children. The study asserted that in children, when questions of likeability by teachers, friends and family are answered positively, trust and security develop and this cause a development in confidence and a sense of self-worth. The study listed three places which help children develop self-esteem; home, school and among friends. Lingren revealed that children who felt competent or are intellectually able at age 7 years, develop a relatively high self-esteem by age 12. Lingren found also that the kind of environment created by the school, the values the school emphasizes and acceptance by friends affect the development of self-esteem in children.

Keshky and Mohammed (2017) investigated the different factors that play important roles in how children develop self-esteem and to identify relationships among its essential factors. Keshky and Mohammed utilized meta-analysis as well as regression analysis. Databases were accessed and certain search parameters were inputted. A coding system was developed to

cater for the variables in the various studies such as the year of publication, participants, methodology and results. The study found that factors such as peers, school, home and family members were influential in the self-esteem of children. Generally, age was found to have the greatest impact on the development of self-esteem in children, followed by other factors such as parenting.

In order to gain insight into how self-esteem develops, Orth, Erol and Luciano (2018) set out in a longitudinal way to study diverse sample who reported on their self-esteem every two years. The study investigated the effect family characteristics in the early childhood (which the study defined as from birth to 6years) on self-esteem in later years. The sample consisted of 8,711 individuals comprising 49% females and 51% males. It was discovered that a key factor in the growth of self-esteem was the home environment that was given for children (quality of parenting, stimulation of learning, degree to which the physical home environment is safe and ordered). Comparing the impacts of other family environment factors, the quality of the home setting had the biggest impact on self-esteem across the age range assessed in the study. Additionally, Orth et al. (2018) revealed that the impact of quality of home environment could last into adulthood.

In order to search out the mediating role of self-esteem on the link between various parenting techniques and adolescents' life happiness, Pérez-Fuentes et al. (2019) looked at the correlations between the practices of parents, self-esteem, and life satisfaction. With a total of 742 teenagers, the sample's average age was 15.63. Pérez-Fuentes et al. employed the “Rosenberg Self-Esteem Scale”, the “Satisfaction with Life Scale”, and the

“Parenting Style Scale”. According to the study, self-esteem somewhat mediated the association between parenting styles and teenage happiness with life. In particular, the impact of self-disclosure on the adolescent's life satisfaction seems to be moderated by self-esteem.

Troshikhina and Manukyan (2016) looked into the relationship between mothers' parenting styles and their three-year-old children's emotional growth and self-esteem. The results showed a negative correlation between the self-esteem of children and their ability to recognize emotions, but not in relation to their ability to have an understanding of the causes of those emotions. Also, emotional development factors are connected to the various parenting styles of mothers. In being specific, when a mother exhibits attitudes of dominance, being intrusive, and forcing dependence, children are able to recognize emotions at high level. In these kinds of interactions, a child must learn to recognize emotions well so as to cope with the demands and pressure from the mother. Although it comes at a significant cost in terms of a healthy self-esteem, a child of a mother who is intrusive might learn to effectively detect others' emotional states in relationships with authority. The higher a person's understanding of the causes of emotions, the higher the level of self-esteem, and the average level of emotion recognition, on the other hand, are all influenced by the mother's democratic views.

In a study of 652 12-year-old school pupils, Diamantopoulou, Rydell, and Henricsson (2008) investigated the competing hypothesis that either low or inflated but contested self-esteem is connected to aggressiveness. Among other things, they found that self-esteem levels of school children were positive and that low levels of self-worth among children was exaggerated in

the literature. This finding therefore was in contrast with several of the studies in the literature. More contextual studies are required to bring clarity in the level of self-esteem of children, particularly those who have experienced some forms of abuse.

Impact of Parental Abuse on the Self-Esteem of Children

Some studies have been carried out in the past on how parental abuse affects the self-esteem of children. In this section, several of these research works have been evaluated. According to Karakuş' (2012) investigation on how adult self-esteem is related to childhood trauma, self-esteem may be influenced by childhood maltreatment. In all, 915 secondary school pupils from Konya's core area made up the sample; they were chosen at random. Overall, 382 were males and 583 were females. From the results, childhood abuse served as a notable element which predicts self-esteem, and it was observed that emotional abuse, particularly, is a significant determinant of self-esteem. The findings of the research showed that as childhood abuse worsened, students' levels of self-esteem fell.

The relationship between dispositional envy and child abuse, as well as the mediation effects of self-esteem and social support, were examined by Xiang, Wang, and Guan (2018). The "Child Abuse Scale", "Dispositional Envy Scale", "Rosenberg Self-Esteem Scale", and "Multi-Dimensional Scale of Perceived Social Support" were used to gather data from 426 Chinese college students. The findings showed that the connection between child abuse and envy was somewhat mediated by self-esteem. Also, self-esteem and social support were shown to be connected to the experience of abuse.

Mwakanyamale and Yizhen (2019) explored the connection between teenage self-esteem and psychological abuse in Tanzania. To gather the necessary number of research participants, a multistage cluster sampling approach was used. The study's variables were measured using the “Rosenberg Self-Esteem Scale”, the “Kessler Psychological Distress Scale (K10)”, and the “Childhood Trauma Questionnaire (CTQ)”. For the study, a sample of 1000 learners was gathered, of which 447 (44.7%) were females and 553 (55.3%) were males. From the study, 766 (76.6%) of the 1000 participants had psychological abuse; 24.7 percent of the participants reported experiencing emotional abuse, whereas 51.9 percent involved emotional neglect. Self-esteem and psychological abuse were strongly correlated, whereas psychological abuse and psychological discomfort were substantially but weakly correlated. Additionally, the findings revealed a significant link between psychological discomfort and self-esteem.

Through a methodical literature analysis, Pacheco, Irigaray, Werlang, Nunes, and Argimon (2014) examined the consequences of exposure to child abuse on peer relationships, self-esteem, academic achievement and social competence. A search of papers included in the “Medline”, “PsycINFO”, “Embase” and “Amed Databases” between 1984 and 2012 was conducted for this aim. Based on inclusion and exclusion criteria, 19 English-language empirical publications were examined for this study. These research works demonstrated that, generally speaking, self-esteem, peer connections, and academic achievement were worse in both adults and teenagers who had experienced childhood abuse.

In her study, Birgisdóttir (2015) looked at the impact that teenage sexual assault might have on their sense of self. The sample was made up of teenagers from Iceland who took part in the “Youth in Iceland 2004” research, which was carried out in all Icelandic second cycle schools. The findings showed that sexual abuse had substantial primary impacts, with those who had not experienced it having better self-esteem than those who did. However, there was little distinction between abuse within families and abuse outside of them. Parents' support showed a substantial main effect as well; people with more parental support had better self-esteem than people with lower parental support (Birgisdóttir, 2015).

In their 2016 study, Wairimu, Macharia, and Muiru examined the connection between parental participation and adolescents' self-esteem among secondary school students in Nyeri County's Kieni West District. The study used a mixed-methods research method. The instruments consisted of questionnaires and unstructured interviews. Using the probability sampling approach, quantitative data were gathered from 200 individuals chosen from eight schools. Using the purpose sampling approach, qualitative information was gathered from eight individuals chosen from eight schools. The study found that the involvement of parents in the lives of their wards led to children having high self-esteem. Parental participation or involvement was shown to be correlated with teenage self-esteem.

In Ghana, Nyarko, Amissah, Addai and Dedzo (2014) investigated how abuse of children affects their mental and psychological wellbeing. In all, 109 people were purposefully chosen to be involved in the study. Those involved in the study included boys and girls, aged 9 to 18, from various

socioeconomic backgrounds, including 68 males and 41 females. While some of the participants (n=57) had historically been abused, others (n=68) did not. There were 36 cases of physical abuse and 21 cases of psychological abuse among individuals who had experienced abusive treatment. Each participant's degree of anxiety and depression was assessed using standard techniques. The data showed that there was a considerable rise in children's anxiety and depression following both physical and psychological maltreatment. In essence, the self-worth and esteem of the children were affected by the experience of physical and psychological abuse.

In a descriptive survey, Dorgbetor (2014) examined the effects of parental child raising practices on junior high school students' self-esteem and attendance at school in the Sefwi Wiawso Municipality. A total of 340 pupils made up the study's sample. The respondents filled out Parental Authority Questionnaire to provide the researcher with information on the parenting styles used by their parents. The "Rosenberg Self-Esteem Scale" was also used in the collection of information on the self-esteem of these students. A record of school attendance of the students within the sample was taken from their respective schools. The findings showed that the authoritarian parenting style was the common among those in the study and it adversely correlated with school attendance and self-esteem. The association between self-esteem and in-class attendance was shown to be significant. According to the study's findings, parenting practices significantly affected children's self-esteem and school attendance.

Forde (2004) studied the impact of sexual abuse on Ghanaian school girls and found that sexual abuse creates significant trauma on school girls and

as such abused girls need helping in coping with the abuse. Even though her study was specifically focused on sexual abuse, the findings are relevant in the current study.

From the studies reviewed, it has become clear that there is a connection between parenting and self-esteem. For children who experience abuse from parents, the literature have shown that their self-esteem may be affected, mainly depending on the nature and degree of abuse experienced.

Measures which can help Children cope with Parental Abuse

Several researchers have identified different measures by which parental abuse can be dealt with. Some of the studies of the researchers have been discussed in this section. With a group of students at the University of Mostar, Sesar, Šimić and Barišić (2010) attempted to retrospectively examine the many types of abuse, how these affect children and the coping methods they adopt. A convenience sample of 233 (196 females and 37 males) took part in the research. The “Child Maltreatment Scales for Adults”, the “Trauma Symptom Checklist”, and the “Coping Inventory for Stressful Situations” were utilised in the study. According to the findings, 172 individuals (74 percent) reported having suffered many forms of abuse as children, and 11 (5 percent) also experienced all kinds of abuse. The most prevalent forms of abuse were emotional and physical, and they typically happened in conjunction with other forms of abuse. The various kinds of abuse were shown to be significantly associated. Anxiety/depression, traumatic symptoms, somatic symptoms, and sexual issues were all significantly predicted by exposure to sexual abuse as a kid and coping mechanisms. Sesar et al. concluded by saying that problem-

oriented coping techniques guarantee a better psychosocial adjustment compared to emotion-oriented ones.

With 141 sexually abused children aged 7 to 12, Wamser-Nanney and Campbell (2020) looked into the relationship between the characteristics of child sexual abuse, stress, and maternal support, as well as the use and perceived effectiveness of different coping methods by children. It was shown that children employed about seven different kinds of coping mechanisms. The use of internalized and avoidant coping was linked to the length of the child sexual abuse, and the adoption of avoidant coping strategies was determined by the presence of maternal blame or mistrust. Also, girls expressed their anger more often than boys did. Elements of child sexual abuse and abuse stress were substantially not related to children's perceived capacity to cope. Compared to white children, children of color indicated greater levels of perceived effectiveness of internalized tactics. From the findings, it can be concluded that the nature of coping adopted by children was connected, however, minimally to the abuse suffered.

Doyle (2001) investigated the elements of emotionally abused children's settings that may be crucial in assisting them in overcoming their abusive upbringings. The research technique involved conducting interviews which were not structured with 14 people who had experienced severe emotional abuse as children. The non-abusing parent did not appear as one of the external influences, despite the respondents listing a number of them. The majority of respondents received help from other family members, notably aunts, grandparents, and siblings. Religious organizations had a beneficial role for some while friends, teachers, and other professionals also provided

assistance. For many children, non-human lifelines like dogs, toys, and books were crucial.

In their 2010 study, Phanichrat and Townshend used interpretive phenomenological analysis to analyze the coping mechanisms used by seven adult survivors of child sexual abuse and to chart their course toward healing. Semi-structured interviews were utilised to acquire the data for the analysis. Two major theme clusters were identified as a result of the analysis: problem-focused and avoidant coping methods. The subjects underwent comparable progressive and dynamic coping mechanisms, beginning with avoidant coping mechanisms before switching to problem-focused ones. The search for purpose, cognitive engagement, hopeful thinking, and self-acceptance were all components of a healthy process of coping with sexual assault. According to this study, problem-focused coping techniques ought to be encouraged as a component of therapeutic intervention.

Fayaz (2019) aimed to comprehend child abuse, its many manifestations, effects, and countermeasures. Fayaz discovered that primary preventative strategies for preventing child abuse also include making schools the main focus of working adults' efforts to educate young children about child abuse. On the other hand, parents have a responsibility to instruct their wards about the dangers of child abuse and the outcomes of such behaviour. Professionals in child and adolescent mental health can aid young ones in recovering from the effects of parental abuse. Additionally, there are laws and regulations protecting children against abuse of any kind. Such regulations offer a secure environment where children can be maintained while promoting

their growth. The literature has generally shown that different and varied approaches can be taken to address parental abuse.

Parental Abuse and Gender of Children

Gender of children has been documented to be significant factors that influence parental abuse. Some of the studies in this regard have been reviewed in this section. Regarding gender, parental support, and the type of offender, Birgisdóttir (2015) investigated how sexual abuse affected teenagers' sense of self-worth (i.e. intra- or extrafamilial abusers). Teenagers from all Icelandic secondary schools took part in the study. The findings showed that sexual abuse had substantial primary impacts, with those who had not experienced it having better self-esteem than those who did. However, there was little distinction between abuse within families and abuse outside of them. Boys exhibited higher self-esteem than females, and gender had a substantial main influence on the results. Parents' support showed a substantial main effect as well; people with more parental support had better self-esteem than people with lower parental support. None of the factors' interactions were statistically significant.

In their 2018 study, Xiang, Wang, and Guan examined the link between mistreatment of children and dispositional envy as well as the mediating roles played by social support and self-esteem. The findings showed that males are less likely to have strong social networks than females do when they score highly for child abuse. These findings offer a crucial point of reference for explaining how early abuse impacts adult social feeling, notably dispositional envy. They might be an important source for psychological

therapy aimed at maltreated children and adults of both sexes. Generally speaking, formal disclosures of child sexual abuse did not differ by gender.

A cross-sectional descriptive-analytic study was undertaken by Rostamia, Abdib, and Heidaric (2014) to take a look at the relationship between different forms of childhood abuse and mental health. The sample comprised 337 married individuals residing in Tehran. A self-reported scale of child abuse was administered. The results showed that a significant and favourable relationship existed between various forms of child maltreatment and adult mental health. Additionally, a substantial distinction between various forms of abuse among boys and girls was found.

In mainland China, Jin, Wang, Xu, and Zhong (2021) investigated various levels of child maltreatment and associated psychological effects. The respondents were given a Chinese form of the “Norvold Abuse Questionnaire”. It was found first that children experienced mainly emotional and physical abuse. In terms of gender, differences existed regarding emotional, physical and sexual abuse. However, concerning prevalence of general abuse experience, no significant difference existed in relation to gender.

Moreover, a comprehensive study was undertaken by Gallo, Munhoz, Loret de Mola, and Murray (2018) to determine whether there are any gender variations in the consequences of abuse on mental health. The following databases were searched for pertinent research released up to May 2016: “Medline”, “PsycINFO”, “Web of Science”, and “Lilacs”. Generally, gender differences were not statistically significant. Even though they found some studies which identified physical and sexual abuse effects to be larger for

females, the researchers concluded that there was not enough information to conclusively determine whether or not there are gender disparities in the effects of abuse. Contracting all these studies, the study of Rostamia, Abdib and Heidaric (2014) brought to light that a significant difference exists in the various types of abuse in relation to gender.

Parental Abuse and Age of Children

The age of children is cited in some literature to be significant factors that influence parental abuse. Şahin, Barut and Ersanli (2013) investigated the influences of a mother and father's age level on the self-esteem of Turkish teenagers. Data were gathered using the "Rosenberg Self-Esteem Scale". According to the findings, there were no appreciable changes in self-esteem levels by age.

Augestad (2017) carried out a comprehensive analysis of the scientific literature on the subject of self-concept and self-esteem in teenagers who have visual impairment. The articles published between 1998 and 2016 were reviewed. The inclusion criteria were satisfied by a total of 26 articles from 15 different nations, 24 of which employed a cross-sectional design for their study. According to some of the research works, perceived self-esteem was impacted by age.

Regarding age, Ferragut, Ortiz-Tallo and Blanca (2021) examined characteristics of Child Sexual Abuse (CSA) experiences in a Spanish population. The findings showed that, except some few cases, children between the ages of 6 and 12 were the ones who were most likely to suffer maltreatment for the first time. The researchers generally concluded that there were age differences in CSA experiences. Similarly, Putnam (2003) looked at

the most well-researched instances of psychopathology linked to CSA. The findings revealed that CSA differed according to gender, age, impairments, and dysfunctional parents. More specifically, abuse increased after age nine.

In at least 19 nations, including the United States and Canada, assessments of child sexual abuse in large nonclinical populations were reviewed by Finkelhor (1994). Children of all ages are at danger, but it has been established that those between the ages of 7 and 13 are the most susceptible to abuse. From the studies discussed, it is realized that age is a major factor in terms of the experience of parental abuse.

Parental Abuse and Educational Level of Children

There have been some studies which have examined the connection between abuse and educational level of children. Chime, Orji, Aneke and Nwoke (2021) explored the rate, pattern and correlates of CSA among learners in secondary schools in Enugu Metropolis, Nigeria. The study was cross-sectional in nature. The results revealed among other things that educational level was a determining factor in the experience of abuse.

Similarly, Sika-Bright and Nnorom (2013), in the Cape Coast Metropolis, investigated the concerns of child sexual abuse among pupils in government elementary schools. A proportionate sample of 256 children was chosen to take part in the study. It was shown that a kid's age, educational attainment, and gender all had an impact on their likelihood of experiencing child sexual abuse. This means that for most cases of parental abuse, the class or educational level of the child is of significant consideration.

The study of Şahin et al. (2013) among Turkish teenagers also showed that there was no difference in self-esteem levels after abuse on the basis of

grade level. This gave the indication that children of different grade or class levels could be impacted in similar ways in terms of their abuse experiences and their self-esteem.

Summary of Literature Review

This chapter focused on a discussion of previous research works relevant to the topic. Several key issues were identified from the literature reviewed. Firstly, it was realized through the literature review that parental abuse was common in most of the studies reviewed. The most common forms of parental abuse were physical, verbal, and emotional/psychological. Most of the studies reviewed depicted high prevalent rates of parental abuse suffered by children.

Another key issue seen from the literature was that parental abuse was detrimental to children in several ways. In connection to self-esteem, the literature review demonstrated clearly that self-esteem of children can be affected negatively when children experience abuse.

Further, the literature reviewed demonstrated that gender, age and educational level of children are significant in terms of the experience of abuse. In some studies, females experienced abuse more than males and abuse was common for younger and lower-class level children. Overall, it was observed that the literature in relation to the Ghanaian context was however relatively scanty.

CHAPTER THREE

RESEARCH METHODS

Introduction

This study investigated the impact of parental abuse on the self-esteem of children in the Cape Coast Metropolis. This chapter discusses the methods that were used while carrying out this research. The areas covered include the research design, study area, population, sampling procedures, data collection instrument, data collection procedures and the data processing and analysis.

Research Design

This study was undertaken by using a descriptive survey research approach. Descriptive survey research design, in the view of Best and Kahn (2009), is a design that examines the connections that exist, behaviours that are common, ideas and attitudes held, processes that are taking place, and impacts or trends that are emerging with reference to a certain occurrence. Simply said, a descriptive survey examines a specific phenomenon in its natural setting as it manifests itself within a specific community. The approach is appropriate for the study since it made it easier to explain how parental maltreatment affects children's self-esteem in the Cape Coast Metropolis. It aided in the non-manipulative collection of data about respondents' opinions.

The descriptive survey, according to Saunders, Lewis, and Thornhill (2009), focuses on accurate profiling of individuals, events, or circumstances. When the population is relatively large and also comparably much simpler to grasp and explain, the survey technique is quite helpful. The researcher might examine the scenario in order to clarify and assess the relationships between

variables by using a descriptive survey. Because of this, descriptive surveys are useful for the investigation.

Contrarily, if stringent precautions are not followed, bias may be introduced into the study design, which might lead to results in descriptive survey research being subject to distortion (Amedahe & Gyimah, 2003). The bias may come because this design mostly relies on self-reported information from respondents. As a result, some respondents may not be completely honest in their responses and this may affect the study. Therefore, the researcher must usually encourage respondents to be as honest as possible so that accurate conclusions can be drawn from the data gathered (Jacob, 2011). Notwithstanding this, the descriptive survey design is deemed relevant because it can help to accurately describe the experience of parental abuse and how it affects the self-esteem of the children.

Study Area

The Cape Coast Metropolitan Assembly hosted the research. From the Ghana Statistical Service (GSS), (2014), the Cape Coast Metropolitan Assembly is one of 260 Metropolitan, Municipal and District Assemblies (MMDAs) in Ghana and one of 22 in the Central Region. The Metropolis is the smallest metropolis in the nation, with a total size of 122 square kilometers. It is situated in latitude 5°06'N and longitude 1°15'W. It covers around 122 square kilometers of space (GSS, 2014). The Cape Coast Metropolitan Assembly is one of the first districts established in Ghana, with Cape Coast serving as its administrative center. In 1987, LI 1373 advanced it to municipality status, and in 2007, LI 1927 promoted it to metropolitan status (GSS, 2010). The Gulf of Guinea borders the Cape Coast Metropolitan Area

on its south, the Abura Asebu Kwamankese District on its east, the Komenda Edina Eguafu/Abrem Municipal on its west, and the Twifo Hemang Lower Denkyira District on its north. Referring from the 2021 Population and Housing Census, there are 189,925 people living in the Metropolis, with 92,790 men and 97,135 women (GSS, 2021).

Cape Coast Metropolis has a wide variety of schools, from primary to postsecondary institutions, spread out throughout its whole length and breadth. People who are interested in pursuing various levels of academic and professional education come to these schools from all around the nation and the West African Subregion. This means that education is of great importance in the Metropolis. Anything that can affect the education of children is therefore of great concern to society. As a result, the researcher found it necessary to conduct the study in the study area.

Population

The target population in this research comprised in-school children in the Cape Coast Metropolis. Specifically, there are 55 junior high schools (JHS) in the Metropolis. The accessible population for the study was composed of children in 10 selected JHS in the Cape Coast Metropolis. Selecting 10 out of 55 schools represented about 18% of the total number of schools. This was justified because it is documented that in selecting from a population, a minimum of 10% is acceptable (Singh & Masuku, 2014) while other researchers believe that between 10% and 20% is acceptable (Israel, 1992). On this basis, the use of 10 schools fell within suitable percentage rates.

These ten schools were OLA Girls JHS, OLA Presby JHS, St. Augustine Practice, St. Monica's, Catholic Jubilee, Philip Quarcoe Boys, Pedu

M/A, St. Lawrence Catholic, St. Nicholas JHS and Methodist Basic JHS. The overall population of the students in the schools based on records from the Metropolitan Education Office was 3000.

Sampling Procedure

A sample is a selection made from the greater population of something (Osuala, 2005). Therefore, the study's generalizable findings would apply to a subset of the population that was engaged in the study. Krejcie and Morgan's (1970) table for calculating sample sizes was used to determine the study's sample size. The sample size for the study was 341.

In doing the sampling, the 10 schools were selected from the 55 schools randomly. Names of the schools were written on sheets of paper and 10 were picked randomly.

After, randomly selecting 10 schools, sampling was done based on the various schools. Thus, proportional stratified random sampling procedure was used. This procedure involves putting the population into strata, which are reasonably homogeneous groups, and then taking random samples from each stratum (Albright, Winston, & Zappe, 2010). Thus, in arriving at the number of children to sample from each of the 10 schools, stratification was used. Each stratum's size in the sample was equivalent to its size in the larger population. This means that the sample size for each school depended on the size of the school in the main population. Stratification was done to ensure that each of the 10 schools was appropriately represented in the study. This was the justification for using proportional stratified random sampling. After the stratification, the actual respondents from each school were selected randomly. This was to ensure that every child had an equal chance of being selected.

In terms of the inclusion criteria, only children in JHS within the schools were sampled. There were no other criteria, since the study focused on all JHS students within the schools.

In arriving at the sample size for each school, the following computations were done:

Sample = Population of School / Population of all Schools X Sample size

OLA Girls JHS:

$$\frac{285}{3006} \times 341 = 32.3$$

This was done for the rest of the schools. The sample distribution for the various schools is depicted in Table 1.

Table 1: Sample Distribution for Schools

| School | Population | Sample |
|------------------------|------------|--------|
| OLA Girls JHS | 285 | 32 |
| OLA Presby JHS | 312 | 35 |
| St. Augustine Practice | 295 | 33 |
| St. Monica's | 305 | 35 |
| Catholic Jubilee | 310 | 35 |
| Philip Quarcoe Boys | 284 | 32 |
| Pedu M/A | 310 | 35 |
| St. Lawrence Catholic | 304 | 35 |
| St. Nicholas JHS | 297 | 34 |
| Methodist Basic JHS | 304 | 35 |
| Total | 3006 | 341 |

Source: Data from Various Schools

In Table 1, the population of the 10 schools along with their respective sample sizes are shown. For each school, the sample size is representative and commensurate with the population size. In essence, schools with small population had small sample size. This was because of the proportional stratified sampling which ensured that the proportion of a particular school in the sample is equal to the proportion of the school in the population.

Data Collection Instrument

The data collection instrument utilised in this research was a questionnaire. Questionnaire is defined as an organized form of questions developed to elicit replies to specific research issues (Sidhu, 2002). The use of questionnaire was fitting for the current study because questionnaires help to gather huge amount of data within a short period of time and also afforded the respondents the freedom and privacy to respond in an honest manner. Also, questionnaire was deemed appropriate since all the respondents could read and write and the questionnaire was more convenient than other data collection instruments.

The questionnaire was adapted from the “Child Abuse Self-Report Scale (CASRS)” developed by Mohammadkhani, Mohammadi, Nazari, Salavati and Razzaghi (2003) and the Rosenberg Self-Esteem scale (RSES) (1965). These instruments are described below:

Child Abuse Self-Report Scale (CASRS)

Child Abuse and Self Report Scale (CASRS) developed by Mohammadkhani et al. (2003) assesses four categories of child abuse. These are psychological, physical, neglect and sexual abuse. Criterion validity was

established for the CASRS and reliability coefficient of 0.92 was ascertained by the developers.

Rosenberg Self-Esteem scale (RSES)

Rosenberg Self-Esteem scale (RSES) was developed by Rosenberg (1979) as 10 item scale to measure self-esteem. Originally the measure was designed to measure the self-esteem of high school students. However, since its development, the scale has been used with a variety of groups including younger children. The RSES demonstrates a Guttman scale coefficient of reproducibility of .92, indicating excellent internal consistency and test-retest reliability over a period of 2 weeks reveals correlations of .85 and .88, indicating excellent stability (Rosenberg, 1979). The scale also had concurrent, predictive and construct validity using known groups and correlated significantly with other measures of self-esteem, including the Coopersmith Self-Esteem Inventory.

Final questionnaire (Parental Abuse and Self-esteem Questionnaire)

The two adapted instruments together formed the instrument for the study titled “Parental Abuse and Self-esteem Questionnaire”. The CASRS was adapted because the original instrument was on child abuse in general but had to be modified to suit the current study on parental abuse.

The questionnaire (Parental Abuse and Self-esteem Questionnaire) had four main sections. Section A had to do with the demographic data of those involved in the study. Section B focused on the prevalence and nature of parental abuse. Section C covered the self-esteem of the children while the Section D focused on the measures by which children cope with parental abuse. With the exception of the final section, all the sections of the

questionnaire were close-ended. The questionnaire was on a four-point Likert-scale. The Section B of the questionnaire was on a scale comprising 0= Never, 1= Sometimes, 2= Most often, and 3= Always. The Section C was on a scale ranging from '1=Strongly Disagree', '2= Disagree', '3= Agree' to '4=Strongly Agree'. The items on the questionnaire were in such a way that the language was suitable for junior high school children.

Validity and Reliability of Instrument

Validity of an instrument is an important psychometric property that needs to be established. In order for an instrument to be valid, it must, in particular, be able to measure what it is intended to measure (Ogah, 2013). My supervisor determined the questionnaire's content validity. Content validity describes the degree to which an instrument adequately covers the content it was intended to cover.

Reliability is the consistency of the scores from an instrument. The reliability coefficient of the original Child Abuse Self-Report Scale (CASRS) was 0.74 while that of the Rosenberg Self-Esteem scale was 0.77. The reliability was ascertained by calculating the Cronbach alpha co-efficient after pilot testing the instrument. A total of 50 children from Amamoma Presby JHS in the Cape Coast Metropolis was used for the pilot. Using 50 participants for the pilot test was appropriate because it was more than 10% of the sample which has been shown in the literature to be appropriate for pilot study (Connelly, 2008). Connelly indicated that for a pilot study, researchers should use a sample that is not less than 10% of the sample for the main study. In this study, 50 participants represented about 15% of the sample which was 341. This meant that the sample of 50 for the pilot study fell in an acceptable range.

Also, using more than 10% was appropriate to take care of any attrition that could have happened.

Cronbach co-efficient alpha was utilised in establishing the internal consistency of the questionnaire for the study (Parental Abuse and Self-esteem Questionnaire). An overall reliability co-efficient of 0.748 was realised which showed that the questionnaire was reliable. The reliability of the various sections of the questionnaire were also established. For Section B, the reliability co-efficient was 0.751 while for Section C, the reliability co-efficient was 0.781. Finally, for Section D, the reliability co-efficient was 0.724. All of these reliability co-efficients show that the questionnaire was reliable.

Data Collection Procedure

The Ethical Review Board of the College of Education Studies, University of Cape Coast provided approval for the data collection process. The Department of Guidance and Counselling then provided a letter of introduction, which was sent to the schools where the data was gathered. By presenting the letter of introduction to the school administration, permission was obtained from them. After gaining permission, appointments were made as to the specific days to collect the data. On the agreed days, I administered the questionnaires to the participants personally. The questionnaire administration was done with assistance from teachers within each selected school. These teachers were given some short training on the procedures involved in carrying out a research as well as the ethical issues to adhere to. They were also given information regarding the study and the purpose of the

study so that they could effectively assist in the administration of the data. Four weeks was used for the entire data collection.

The goal of the study was described to the participants, and any questions they might have had were clarified, to ensure that they completed the questionnaire correctly. An average period of 20 minutes was used in responding to the items of the questionnaire. The items were read and clearly explained to the children so that they could easily understand the items and respond honestly. A 100% return rate was obtained.

Ethical Considerations

The participants were made aware that taking part in the study was completely optional and that they had the option of accepting or declining. The students' permission was requested at each location where data was collected, and they were forced to actively choose to participate in the study. This was done by making the teachers in the schools sign consent forms as proxy for the children since they were minors and therefore could not give consent.

The present study additionally placed a high value on the anonymity of the study participants. Oliver (2010) noted that because anonymity allows participants the chance to have their identities obscured, it is a crucial problem in research ethics. The ethical requirement of anonymity was upheld by not requesting respondents' names or any other personally identifying information. Regarding confidentiality, attempts were made to keep the answers provided by the participants private. Participants were given the information that their answers would be kept private and that no one would have access to the data without their permission.

Data Processing and Analysis

With the exception of the final section, all the sections of the questionnaire were close-ended. The questionnaire was on a four point Likert-scale. The Section B of the questionnaire was on a scale comprising 0= Never, 1= Sometimes, 2= Most often, and 3= Always. On a scale of "1=Strongly Disagree," "2= Disagree," "3= Agree," and "4=Strongly Agree," the Section C was rated. The Statistical Package for Service Solution (SPSS) version 21 software was used to code and input the responses from the respondents' completed copies of the questionnaire. For research questions 1, 2, 3, and 4, the data were analyzed descriptively using means and standard deviations. Also, Independent Samples t-Test was used to test hypothesis 1, while One-Way ANOVA was used to test hypotheses 2 and 3. Hypothesis four was tested using Simple Linear Regression.

Chapter Summary

This chapter was focused on the methodology involved in carrying out the study. Descriptive survey research design was adopted for this research work. A sample of 341 students was selected using proportional stratified random sampling from ten selected junior high schools in the Cape Coast Metropolis. Data were collected using questionnaires and analysed using descriptive and inferential statistics.

CHAPTER FOUR

RESULTS AND DISCUSSION

Introduction

This study investigated the impact of parental abuse on the self-esteem of children in the Cape Coast Metropolis. This chapter showcases the results and discussion of the study. The chapter covers the demographic data of the respondents. Also, the results and discussion of the research questions and hypotheses are done in this chapter.

PART 1: Demographic Data

The demographic data of the participants are covered in this section. The data involves the gender, age and class level of the respondents. These are shown in Table 2.

Table 2: Demographic Data of Respondents

| Item | Frequency (F) | Percentage (%) |
|-----------------------|---------------|----------------|
| Gender | | |
| Male | 173 | 50.7 |
| Female | 168 | 49.3 |
| Age (in years) | | |
| 9-12 | 22 | 6.5 |
| 13-15 | 219 | 64.2 |
| 16 and above | 100 | 29.3 |
| Class Level | | |
| JHS 1 | 98 | 28.7 |
| JHS 2 | 94 | 27.6 |
| JHS 3 | 149 | 43.7 |

Source: Field Survey (2021)

From Table 2, it can be seen that 50.7% of the respondents were males while 49.3% were females. From this data, it can be said that the proportion of males and females in the study was almost the same. There was however, a

little more male respondents than female respondents. Also, it is seen that majority of the participants (64.2%) were aged between 13 and 15 years. At the Junior High School (JHS) Level, most pupils are within the boundaries of 13 and 15 and as such the data in this study can be relied on. Finally, it is shown in Table 2 that 43.7% of the respondents were in JHS 3, 28.7% were in JHS 1 and 27.6% were in JHS 2. This means that there were more JHS 3 pupils participating in the study.

PART 2: Data Analysis

Research Question 1: What is the prevalence of parental abuse of children in the Cape Coast Metropolis?

In answering this research question, the questionnaire was on a scale of: 0= Never, 1= Sometimes, 2= Most often, 3= Always. This means that any score of 0 or 1 shows that the abuse was rare while any score of 2 or 3 indicates that the abuse often occurred. The data were analysed using mean and standard deviation. The scoring bands were 0 – 1.0; 1.1 – 2.0; and 2.1 – 3.0.

Based on the scoring of the questionnaire (0= Never, 1= Sometimes, 2= Most often, 3= Always), mean scores between 0.0 and 1.0 implies that respondents rarely experienced the particular abuse. This lied between never (0) and sometimes (1). On the other hand, mean scores between 1.1 and 2.0 implies that respondents experienced the particular abuse at moderate level. This lied between sometimes (1) and most often (2). Finally, mean scores between 2.0 and 3.0 implies that the respondents often experienced the particular abuse. This is because the responses lied between most often (2) and always (3).

The results are presented in Tables 3.

Table 3: Prevalence of Abuse

| Parental Abuse Experienced | Mean | SD | Rank |
|----------------------------|------|------|-----------------|
| Psychological/Emotional | 0.87 | 0.85 | 1 st |
| Physical | 0.87 | 0.81 | 2 nd |
| Neglect | 0.71 | 0.88 | 3 rd |
| Sexual | 0.10 | 0.42 | 4 th |

Source: Field survey (2021)

It can be observed in Table 3 that psychological/emotional abuse was the most experienced parental abuse (M=0.87, SD=0.85) along with physical abuse (M=0.87, SD=0.81). However, sexual abuse was the least experienced type of abuse (M=0.10, SD=0.42). All of the parental abuses however had mean scores less than 1.0 which indicated that, overall, all the types of abuse were experienced at a rare level.

Research Question 2: What is the nature of parental abuse of children in the Cape Coast Metropolis??

This research question was aimed at finding out the nature of parental abuse in the Cape Coast Metropolis. In answering this research question, the different categories of parental abuse were examined. The questionnaire was on a scale of: 0= Never, 1= Sometimes, 2= Most often, 3= Always. Analysis was done using mean and standard deviation. This means that any score of 0 or 1 shows that the abuse was rare while any score of 2 or 3 indicates that the abuse often occurred. The data were analysed using mean and standard deviation. The scoring bands were 0 – 1.0; 1.1 – 2.0; and 2.1 – 3.0.

Based on the scoring of the questionnaire (0= Never, 1= Sometimes, 2= Most often, 3= Always), mean scores between 0.0 and 1.0 implies that

respondents rarely experienced the particular abuse. This lied between never (0) and sometimes (1). On the other hand, mean scores between 1.1 and 2.0 implies that respondents experienced the particular abuse at moderate level. This lied between sometimes (1) and most often (2). Finally, mean scores between 2.0 and 3.0 implies that the respondents often experienced the particular abuse. This is because the responses lied between most often (2) and always (3).

In presenting the results, the different categories of parental abuse which include physical, psychological, neglect and sexual abuse were considered separately. Thus, the results on the nature of these different categories of parental abuse are presented in Tables 4 to 7.

Table 4: Nature of Physical Abuse

| Statement | Mean | SD |
|---|-------------|-----------|
| My parents... | | |
| Often cane me | 1.54 | 0.74 |
| Often throw things at me | 0.45 | 0.80 |
| Often slap me | 0.51 | 0.96 |
| Beat me with items in the house when I make small mistake | 1.54 | 0.88 |
| Push me to the floor when I do a wrong thing | 0.29 | 0.69 |
| Mean of means | 0.87 | 0.81 |

Source: Field survey (2021)

It is shown in Table 4 by the respondents that they were caned by their parents ($M=1.54$, $SD=0.74$) and were beaten with items in the house when they made small mistakes ($M=1.54$, $SD=0.88$). The mean scores were between 1.0 and 2.0 indicating that the experiences were moderate. The rest of the statements however recorded mean scores below 1.0 meaning that they were rarely experienced. The mean of means (0.87) also shows that overall, physical abuse was experienced but at a rare rate.

The results on the nature of psychological/emotional abuse are presented in Table 5.

Table 5: Nature of Psychological/Emotional Abuse

| Statement | Mean | SD |
|---|------|------|
| My parents... | | |
| make me feel like that they do not like me and do not care for me | 0.53 | 0.86 |
| make me feel like I am a burden to them | 0.94 | 0.88 |
| always criticize me | 1.70 | 0.95 |
| always tease me | 0.77 | 0.72 |
| somehow say they wished I was not born | 0.52 | 0.71 |
| treat me with disrespect | 0.58 | 0.77 |
| make me feel worthless | 0.66 | 0.78 |
| are very hard on me | 1.80 | 0.96 |
| blame me in others presence | 0.63 | 0.85 |
| have never told me they love me | 0.52 | 0.97 |
| Mean of means | 0.87 | 0.85 |

Source: Field survey (2021)

From Table 5, it can be observed from the respondents that their parents were very hard on them ($M=1.80$, $SD=0.96$). This was however not experienced often as the mean score of 1.80 falls in the range of moderate level experience. Also, the respondents indicated their parents criticized them ($M=1.70$, $SD=0.95$). This experience was also at a moderate level. The rest of the statements all had mean scores below 1.0 which show that those experiences were rare. This is confirmed by the mean of means score of 0.87.

The results on the nature of neglect are shown in Table 6.

Table 6: Nature of Neglect

| Statement | Mean | SD |
|---|------|------|
| My parents... | | |
| do not pay attention to my wishes | 0.58 | 0.87 |
| do not care about my hygiene | 0.40 | 0.86 |
| do not care about what I eat | 0.45 | 0.88 |
| do not make me have enough sleep and rest | 1.65 | 0.99 |
| do not help me if I have a problem. | 0.46 | 0.80 |
| Mean of Means | 0.71 | 0.88 |

Source: Field survey (2021)

It is shown in Table 6 that lack of sleep and rest was moderately experienced by the respondents (M=1.65, SD=0.99). The respondents indicated that their parents did not make them have enough rest and sleep. Aside this, the other forms of neglect were rarely experienced.

The results on the nature of sexual abuse are presented in Table 7.

Table 7: Nature of Sexual Abuse

| Statement | Mean | SD |
|--|------|------|
| At least one parent: | | |
| has tried to look at my private parts | 0.13 | 0.48 |
| has tried to hurt me sexually | 0.11 | 0.47 |
| has made me look at or touch his/her private parts | 0.09 | 0.37 |
| has had sex with me | 0.05 | 0.32 |
| has made me watch blue films. | 0.13 | 0.45 |
| Mean of means | 0.10 | 0.42 |

Source: Field survey (2021)

The results in Table 7 show that generally, the respondents rarely experienced sexual abuse. For all the items in the Table, the mean scores were below 1.0. This implies that none of the sexual abuse situations were frequently experienced. In other words, sexual abuse occurrences were rare.

Research Question 3: What is the level of self-esteem of children of parents abuse in the Cape Coast Metropolis?

This research question was aimed at finding out the level of self-esteem of the respondents. The part of the questionnaire for this question was on a scale of: “1= Strongly Disagree, 2= Disagree, 3= Agree and 4= Strongly Agree” for positive items and “1= Strongly Agree, 2= Agree, 3= Disagree and 4= Strongly Disagree” for negative items. Analysis was done using mean and standard deviation.

Based on the scoring of the questionnaire, mean scores above 2.5 connote agreement while means scores below 2.5 connote disagreement for the positive items. However, for the negative statements, mean scores above 2.5 connote disagreement while means scores below 2.5 connote agreement.

The results are depicted in Table 8.

Table 8: Level of Self-Esteem of Respondents

| Statement | Mean | SD |
|--|------|------|
| I feel: | | |
| that I am as good as anybody else | 2.77 | 1.17 |
| that there are a lot of good things about me | 3.24 | 0.94 |
| that I fail a lot | 3.28 | 0.97 |
| I can do things as well as most other people | 2.99 | 1.12 |
| I do not have much to be proud of | 2.76 | 1.10 |
| I don't respect myself | 3.43 | 0.96 |
| useless at times | 3.28 | 0.98 |
| I am no good at all | 3.28 | 1.07 |
| I like myself | 3.45 | 0.91 |
| I am happy with myself | 3.53 | 0.85 |

Source: Field survey (2021)

Table 8 shows that on the positive side, the respondents indicated their agreement that they were happy with themselves (M=3.53, SD=0.85), they

liked themselves ($M=3.45$, $SD=0.91$) and that there were a lot of good things about them ($M=3.24$, $SD=0.94$). From these views it was clear that the respondents had positive views of themselves.

On the negative side, the respondents disagreed with the views that “they do not respect themselves” ($M=3.43$, $SD=0.96$), “they felt useless at times” ($M=3.28$, $SD=0.98$) and that “they were no good at all” ($M=3.28$, $SD=1.07$). This gives the indication that the respondents did not have any of these negative feelings. In other words, the respondents respected themselves, felt useful and felt that they were good.

The results in Table 8 showed that the respondents had positive or high self-esteem. This is because they agreed mostly to the positive items but disagreed mostly to the negative items. The mixture of both positive and negative statements has advantages in the questionnaire because it helps reduce acquiescent bias which happens when participants generally go on auto-pilot and agree to all statements.

Research Question 4: Which measures can help children of parental abuse in the Cape Coast Metropolis cope with their abusive experience?

This research question intended to find out the measures which can help children of parental abuse in the Cape Coast Metropolis cope with their abusive experience. This section of the questionnaire was open-ended so that the respondents could freely write or indicate their own views. From the views of the respondents, some common themes were derived. These were support from relatives, support from friends, support from teachers and professional support.

The respondents were of the view that support from relatives can greatly help them in coping or dealing with their abusive experiences. When children experience abuse from their parents, they would most likely seek support from their relatives. Aside relatives, some children may seek support from their friends as to what they can do in dealing with the abuse. Teachers are also key people that children seek assistance from. For children who feel comfortable with their teachers, they would connect to their teachers and seek help from them in dealing with the experience of abuse.

Overall, the study revealed that support from other family members, friends and teachers, and professional help or assistance. Also, it was shown that health professionals and authorities can target schools and seek out children who are abused but cannot voice out and give them support.

Hypothesis One

H₀: There is no significant difference in how parental abuse impacts male and female children's self-esteem in the Cape Coast Metropolis.

H₁: There is a significant difference in how parental abuse impacts male and female children's self-esteem in the Cape Coast Metropolis.

This hypothesis was intended to find out the significant difference between male and female child victims of parental abuse in the Cape Coast Metropolis in their experience of parental abuse. The data were analysed using an independent samples t-test with a significance level of 0.05.

The Levene's test for equality of variance was assessed. The summary of the results can be seen in Table 9.

Table 9: Levene's Test for Equality of Variances

| | F | Sig |
|-----------------------------|-------|------|
| Equal variances assumed | 0.322 | .571 |
| Equal variances not assumed | | |

Source: Field Survey (2021)

It can be observed from Table 9 that the significant value of .571 is above .05 the significant level. The result gives the indication that equal variances can be assumed for the data.

The outcomes of the independent t-test can be seen in Table 10.

Table 10: Summary of Independent Samples t-test of Gender Difference in the Impact of Parental Abuse on Children's Self-esteem

| Gender | N | Mean | SD | Df | t-value | Sig (2-tailed) |
|--------|-----|-------|-------|-----|---------|----------------|
| Male | 173 | 10.97 | 10.37 | 339 | .470 | .639 |
| Female | 168 | 10.45 | 10.01 | | | |

Source: Field survey (2021)

Not Significant, $p > .05$

It is evident in Table 10 that there is no statistically significant difference between male and female children regarding their experience of parental abuse [$t(339) = .470, p > .05$]. Male children had a mean score of 10.97, while female children had a mean score of 10.45. Even if the mean scores differ, these variations are not statistically significant. The null hypothesis, which stated that there is no significant difference in the experiences of male and female children of parental abuse in the Cape Coast Metropolis, is therefore upheld. This suggests that the difference between male and female children's experiences of parental abuse was insignificant.

Hypothesis Two

H₀: There is no significant difference in how parental abuse impacts children's self-esteem in the Cape Coast Metropolis on the basis of age.

H₁: There is a significant difference in how parental abuse impacts children's self-esteem in the Cape Coast Metropolis on the basis of age.

The hypothesis sought to find out the statistically significant difference in the experience of parental abuse among child victims of parental abuse in the Cape Coast Metropolis on the basis of age. The One-Way ANOVA was used to analyze the data at the 0.05 level of significance since there were three different age groups involved in the study. The outcome of the Levene's test of equality of variances is also shown in Table 11.

Table 11: Test of Homogeneity of Variances

| Levene Statistic | df1 | df2 | Sig. |
|------------------|-----|-----|------|
| 15.801 | 2 | 338 | .075 |

Source: Field Survey (2021)

It can be seen in Table 11 that the significant level of .075 is above .05.

The indication is that homogeneity of variances can be assumed. Therefore, it is assumed appropriate to carry out One-Way ANOVA.

The results of the descriptive statistics for the age groups are shown in Table 12.

Table 12: Descriptive Results for Age Groups in terms of Parental Abuse

| Age (in years) | N | Mean | Std. Dev. |
|----------------|-----|-------|-----------|
| 9-12 | 22 | 16.86 | 11.61 |
| 13-15 | 219 | 12.53 | 12.67 |
| 16 and above | 100 | 9.26 | 8.27 |
| Total | 341 | 10.71 | 10.19 |

Source: Field Survey (2021)

The mean and standard deviations of the different age groups are shown in Table 12. It is observed that the respondents within ages 9 and 12 had a mean score of 16.86 and a standard deviation of 11.61. The mean score for respondents within 13 to 15 years group was 12.53 with a standard deviation of 12.67. Finally, the respondents 16 years and above of age had a mean score of 9.26 and a standard deviation of 8.27. From the mean scores, it can be seen that there are differences among the different age groups. Specifically, it can be seen that pastors between ages of 9 and 12 years had the highest mean score implying that they experienced parental abuse more than the other age groups.

Table 13 shows the results of the ANOVA test.

Table 13: ANOVA Results on Parental Abuse on the Basis of Age

| | Sum of Squares | Df | Mean Square | F | Sig. |
|----------------|-----------------------|-----------|--------------------|----------|-------------|
| Between Groups | 1624.593 | 2 | 812.296 | 8.158* | .000 |
| Within Groups | 33655.665 | 338 | 99.573 | | |
| Total | 35280.258 | 340 | | | |

Source: Field survey (2021)

*Significant, $p < .05$

From Table 13, it is obvious that there is a significant difference in the experience of parental abuse on the basis of age [$F(2, 338) = 8.158, p < .05$]. The alpha value of 0.011 is less than the .05 significant level. This means that there was a statistically significant difference in the mean scores of the three different age groups. The null hypothesis that there was no significant difference in the experience of parental abuse among children of parental abuse in the Cape Coast Metropolis on the basis of age was rejected. Since a significant difference was found, there was the need for a post-hoc analysis.

Tukey's Post-Hoc test was used in doing the post-hoc analysis since Tukey's test seeks to find out which groups in a specific sample differ from each other. The outcomes of the post-hoc analysis are depicted in Tables 14 and 15.

Table 14: Multiple Comparisons

Dependent Variable: Parental abuse

Tukey HSD

| (I) Age | (J) Age | Mean Difference e (I-J) | Std. Error | Sig. | 95% Confidence Interval | |
|-----------------------|-----------------------|-------------------------------|---------------|------|----------------------------|----------------|
| | | | | | Lower Bound | Upper Bound |
| 9-12 years | 13-15 years | 4.33364 | 2.34985 | .157 | -1.1981 | 9.8654 |
| | 16 years and above | 7.60336* | 2.23175 | .002 | 2.3496 | 12.8571 |
| 13-15 years | 9-12 years | -4.33364 | 2.34985 | .157 | -9.8654 | 1.1981 |
| | 16 years and above | 3.26973* | 1.20433 | .019 | .4346 | 6.1048 |
| 16 years and above | 9-12 years | -7.60336* | 2.23175 | .002 | -12.8571 | -2.3496 |
| | 13-15 years | -3.26973* | 1.20433 | .019 | -6.1048 | -.4346 |

*. The mean difference is significant at the 0.05 level.

Source: Field survey (2021)

It is observed in Table 14 that significant difference exists between the respondents aged 9 to 12 years and those aged 16 years and above (.002). Also, significant difference exists between the respondents who were within the ages of 13 and 15 years and those 16 years and above (.019). Thus, from the post-hoc test, it is clear that the mean score of respondents aged 16 years and above was significantly different from the other age groups. From the results in Table 14, it can be seen that the difference was caused mainly by the respondents aged 16 years and above.

The homogenous subsets results are shown in Table 15.

Table 15: Tukey HSD^{a,b}

| Age | N | Subset for alpha = 0.05 | |
|--------------------|-----|-------------------------|---------|
| | | 1 | 2 |
| 16 years and above | 100 | 9.2603 | |
| 13-15 years | 219 | 12.5300 | 12.5300 |
| 9-12 years | 22 | | 16.8636 |
| Sig. | | .231 | .078 |

Source: Field survey (2021)

Table 15 shows that respondents within the ages of 9 and 12 recorded the highest mean followed by those aged between 13 and 15 years. Those aged 16 years and above recorded the lowest mean score. From the results, it can be seen that younger respondents experienced parental abuse more than older respondents.

Hypothesis Three

H₀: There is no significant difference in how parental abuse impacts children's self-esteem in the Cape Coast Metropolis on the basis of class level.

H₁: There is a significant difference in how parental abuse impacts children's self-esteem in the Cape Coast Metropolis on the basis of class level.

The hypothesis sought to find out the statistically significant difference in the experience of parental abuse among children of parental abuse in the Cape Coast Metropolis on the basis of age. The One-Way ANOVA was used to analyze the data at the 0.05 level of significance since there were three different age groups involved in the study. The outcomes of the Levene's test for homogeneity of variances are shown in Table 16.

Table 16: Test of Homogeneity of Variances

| Levene Statistic | df1 | df2 | Sig. |
|------------------|-----|-----|------|
| 8.793 | 2 | 338 | .085 |

Source: Field Survey (2021)

It can be seen in Table 13 that the significant level of .085 is above .05.

This means that homogeneity of variances can be assumed. Therefore, it is assumed appropriate to carry out One-Way ANOVA.

The outcome of the descriptive statistics can be seen in Table 17.

Table 17: Descriptive Results for Class Levels in terms of Parental Abuse

| Age (in years) | N | Mean | Std. Dev. |
|----------------|-----|-------|-----------|
| JHS 1 | 98 | 12.76 | 9.35 |
| JHS 2 | 94 | 11.19 | 11.46 |
| JHS 3 | 149 | 7.81 | 8.11 |
| Total | 341 | 10.71 | 10.19 |

Source: Field Survey (2021)

The mean and standard deviations of the different age groups are shown in Table 17. It can be seen that the respondents in JHS 1 had a mean score of 12.76 and a standard deviation of 9.35. The mean score for respondents in JHS 2 was 11.19 with a standard deviation of 11.46. Finally, the respondents in JHS 3 had a mean score of 7.81 and a standard deviation of 8.11. From the mean scores, it is obvious that there are differences among the different age groups. Specifically, the respondents in JHS 1 experienced more abuse situations compared to those in the other classes.

Table 18 shows the results of the ANOVA test.

Table 18: ANOVA Results on Parental Abuse on the Basis of Class Level

| | Sum of Squares | Df | Mean Square | F | Sig. |
|----------------|-------------------|-----|----------------|--------|------|
| Between Groups | 1236.227 | 2 | 618.113 | 6.137* | .002 |
| Within Groups | 34044.031 | 338 | 100.722 | | |
| Total | 35280.258 | 340 | | | |

Source: Field survey (2021) *Significant, $p < .05$

From Table 18, it is obvious that there is a significant difference in the experience of parental abuse of children on the basis of their class level [$F(2, 338) = 6.137, p < .05$]. The p-value of 0.002 is less than the .05 significant level. This means that there was a statistically significant difference in the mean scores of the class levels. The null hypothesis that there was no significant difference in the experience of parental abuse among child victims of parental abuse in the Cape Coast Metropolis on the basis of class level was rejected. Tukey's Post-Hoc test was carried out and the results are shown in Table 19.

Table 19: Multiple Comparisons

Dependent Variable: Parental Abuse

Tukey HSD

| (I) Class Level | (J) Class Level | Mean Difference (I-J) | Std. Error | Sig. | 95% Confidence Interval | |
|-----------------------|--------------------|-----------------------------|---------------|------|----------------------------|----------------|
| | | | | | Lower Bound | Upper Bound |
| JHS 1 | JHS 2 | 1.56047 | 1.30528 | .457 | -1.5123 | 4.6332 |
| | JHS 3 | 4.94659* | 1.44889 | .002 | 1.5358 | 8.3574 |
| JHS 2 | JHS 1 | -1.56047 | 1.30528 | .457 | -4.6332 | 1.5123 |
| | JHS 3 | 3.38612* | 1.32193 | .029 | .2742 | 6.4981 |
| JHS 3 | JHS 1 | -4.94659* | 1.44889 | .002 | -8.3574 | -1.5358 |
| | JHS 2 | -3.38612* | 1.32193 | .029 | -6.4981 | -.2742 |

*. The mean difference is significant at the 0.05 level.

Source: Field survey (2021)

It is evident in Table 19 that significant difference exists between the respondents in JHS 1 and those in JHS 3 (.002). Also, significant difference exists between the respondents in JHS 2 and those in JHS 3 (.029). Thus, from

the post-hoc test, it is seen the mean score of respondents in JHS 3 was significantly different from the other class levels. The difference observed in the groups was thus caused by the respondents in JHS 3.

The homogenous subsets results are shown in Table 20.

Table 20: Tukey HSD^{a,b}

| Class Level | N | Subset for alpha = 0.05 | |
|-------------|-----|-------------------------|---------|
| | | 1 | 2 |
| JHS 3 | 149 | 7.8085 | |
| JHS 2 | 94 | | 11.1946 |
| JHS 1 | 98 | | 12.7551 |
| Sig. | | 1.000 | .486 |

Source: Field survey (Asiedu, 2021)

Table 20 shows that respondents in JHS 1 recorded the highest mean trailed by those in JHS 2. Those in JHS 3 recorded the lowest mean score. Inferring from Table 20, it is realized that respondents in lower class levels experienced parental abuse more than respondents higher class levels.

Hypothesis Four

H₀: There is no significant impact of parental abuse on the self-esteem of children in the Cape Coast Metropolis.

H₁: There is no significant impact of parental abuse on the self-esteem of children in the Cape Coast Metropolis.

This hypothesis meant to establish whether parental abuse will significantly impact on self-esteem of the respondents. In testing this hypothesis, simple linear regression was used. The predictor variable was parental abuse while the dependent variable was self-esteem.

Normality Testing

Normality should be assumed of the data before regression can be carried out. The normality of the data is shown in the P-P Plot below.

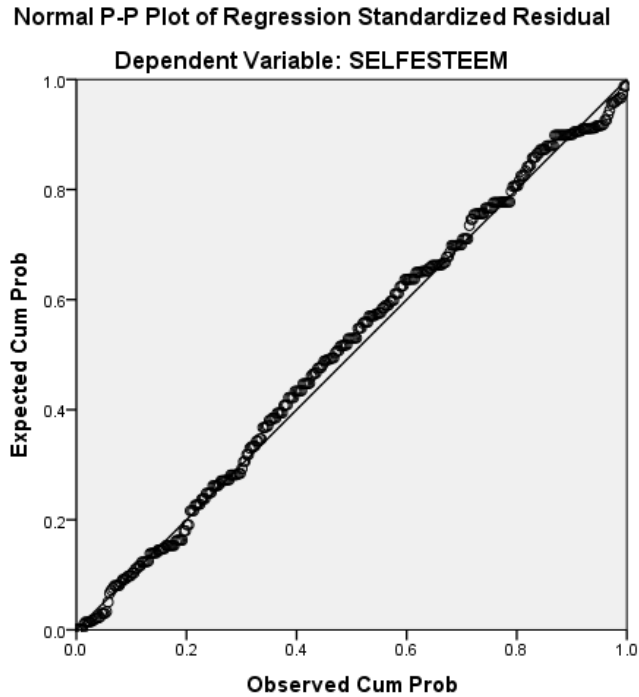


Figure 2: Normality of Data
Source: Field Data (2021)

The P-P Plot reveals that the points congregate near the horizontal line. The presumption of normalcy was apparently satisfied, according to this. The data was mostly normal.

Homoscedasticity

This presumption is founded on the idea that residuals (errors) should not differ systematically between explanatory variable values. A scatterplot is examined to determine the pattern in order to prove this.

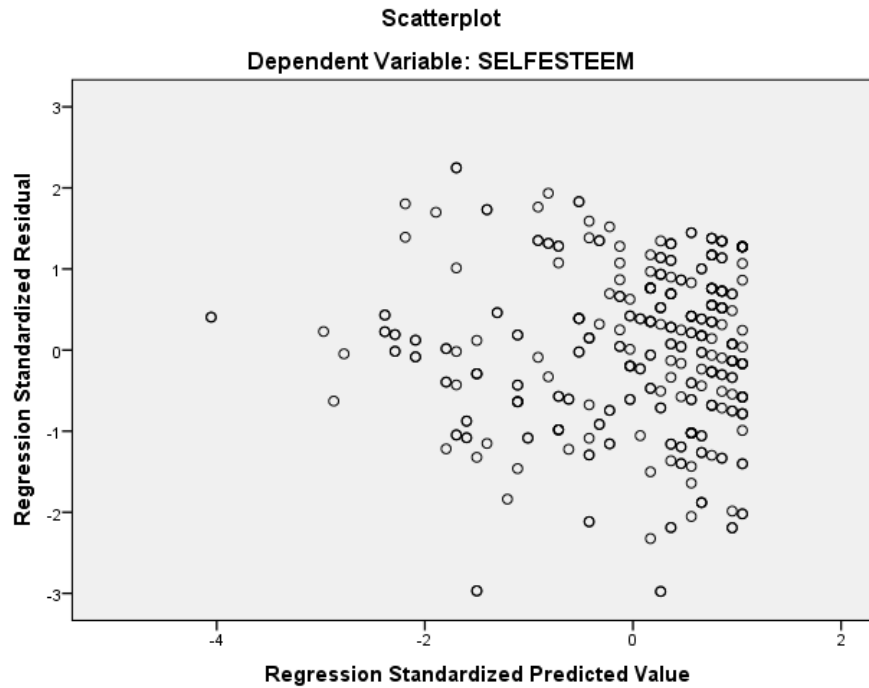


Figure 3: Scatterplot of Parental Abuse and Self-Esteem
Source: Field Survey (Asiedu, 2021)

In figure 3, it can be seen that there is no homoscedasticity. This is because the dots representing the data are scattered and not in a discernable pattern.

Independence of Observations

The Durbin-Watson Statistic was used to establish whether independence of observation existed in the data. The results are presented in Table 21 below.

Table 21: Test for Independence of Observations

| Model | R | R Square | Durbin-Watson |
|-------|-------------------|----------|---------------|
| 1 | .334 ^a | .112 | 1.810 |

Source: Field survey (2021)

The model in Table 21 shows that the assumption of observational independence was satisfied since the Durbin-Watson statistic is 1.810. This is due to the fact that the Durbin-Watson statistic must be between 1.5 and 3.0 in order to satisfy the assumption of observational independence.

The model summary for the regression analysis is shown in Table 22 after the assumptions for the linear regression have been confirmed.

Table 22: Model Summary

| Model | R | R Square | Change Statistics | | | | |
|-------|-------------------|----------|-------------------|----------|-----|-----|---------------|
| | | | R Square Change | F Change | df1 | df2 | Sig. F Change |
| 1 | .334 ^a | .112 | .112 | 42.654 | 1 | 339 | .000 |

a. Predictors: (Constant), Parental Abuse
b. Dependent Variable: Self-Esteem

Source: Field survey (2021)

*Significant, $p < .05$

It can be realized from the model summary that the predictor contributed 11.2% to the variation in the dependent variable ($R^2 = .112 \times 100 = 11.2\%$). This means parental abuse contributed to self-esteem. Since the model was significant ($p < .05$), it can be said that parental abuse can significantly impact on self-esteem.

A one-way ANOVA test of the regression model was done and the output can be seen in Table 23.

Table 23: ANOVA^a

| Model | | Sum of Squares | Df | Mean Square | F | Sig. |
|-------|------------|----------------|-----|-------------|--------|-------------------|
| 1 | Regression | 1006.405 | 1 | 1006.405 | 42.654 | .000 ^b |
| | Residual | 7998.592 | 339 | 23.595 | | |
| | Total | 9004.997 | 340 | | | |

a. Dependent Variable: Self-esteem

b. Predictors: (Constant), Parental Abuse

Source: Field survey (2021)

*Significant, $p < .05$

The ANOVA table also confirms that the regression model is significant [$F(1, 339) = 42.654, p < .05$]. In essence, the model can be relied on.

The relationship between the predictor variable (Parental Abuse) and the dependent variable (Self-esteem) is shown in the correlation table below.

Table 24: Correlations

| | | Self-Esteem | Parental Abuse |
|---------------------|----------------|-------------|----------------|
| Pearson Correlation | Self-esteem | 1.000 | -.334* |
| | Parental abuse | -.334* | 1.000 |
| Sig. (1-tailed) | Self-esteem | . | .000 |
| | Parental abuse | .000 | . |
| N | Self-esteem | 341 | 341 |
| | Parental abuse | 341 | 341 |

Source: Field survey (2021)

*Significant, $p < .01$

From Table 24, it is noted that parental abuse had a significant negative relationship with self-esteem ($r = -.334$, $p < .01$). In particular, the relationship was a weak negative relationship because of the $-.334$ coefficient. The results mean that as the experience of parental abuse increases, the level of self-esteem reduces and as the experience of parental abuse decreases, the level of self-esteem increases.

The coefficient of the predictor variable is shown in Table 25.

Table 25: Coefficients^a

| Model | | Unstandardized Coefficients | | Standardized Coefficients | | Sig. |
|-------|----------------|-----------------------------|------------|---------------------------|---------|------|
| | | B | Std. Error | Beta | t | |
| 1 | (Constant) | 33.812 | .382 | | 88.520 | .000 |
| | Parental Abuse | -.169 | .026 | -.334 | -6.531* | .000 |

a. Dependent Variable: Self-esteem

b. Predictors: (Constant), Parental Abuse

Source: Field survey (2021)

*Significant, $p < .05$

In Table 25, it can be seen that parental abuse significantly affects self-esteem ($t = -6.531$, $p < .05$). Specifically, parental abuse affects self-esteem negatively. On the basis of the results in Tables 22 to 25, the null hypothesis

that there was no significant impact of parental abuse on the self-esteem of child victims of parental abuse in the Cape Coast Metropolis was rejected. This means there was a significant impact of parental abuse on self-esteem.

Discussion

Prevalence of Parental Abuse

The study found that the respondents experienced abuse by their parents on some occasions. In all these abuse cases, the experiences were not often. The common abuses suffered were psychological or emotional and physical. On the other hand, it was shown that the respondents rarely experienced sexual abuse. It is clear that, even though there was the existence of parental abuse, the experiences were not often.

In Ghana, it seems parents use several physical disciplinary methods in handling their children (Adonteng-Kissi, 2020). In most cases, it appears that some abusive conducts like caning, insulting or shouting at children are seen as discipline. It is thus not surprising that psychological/emotional and physical abuses were the common types experienced by the children.

The results of the current study corroborate those of Fayaz (2019), who investigated the causes, manifestations, effects, and preventative methods of child abuse and found that parents typically abuse their children physically and emotionally. Osmanoğlu (2019) also sought to understand abuse and its related issues and revealed that most children were subjected to some forms of abuse mostly by their parents.

Further, in line with the findings of the current study, Mwakanyamale and Yizhen (2019) revealed that adolescents in Tanzania experienced psychological maltreatment and emotional abuse. Sesar, Šimić and Barišić

(2010) also found that emotional and physical abuse were the most frequent types of abuse suffered by children from their parents.

From the findings discussed, it can be seen that psychological and physical abuse are commonly reported compared to other forms of abuse. This may not mean that those are the only abuses experienced but may mean that the other types of abuse are less reported.

Nature of Parental Abuse

The study revealed physical abuse was mainly characterized by canning and being beaten with items in the house. In terms of psychological abuse, the respondents indicated that their parents were very hard on them and criticized them. There was also the experience of neglect in terms of parents not allowing respondents to have enough rest and sleep. Sexual abuse experiences were rare as already established in the first research question.

The findings of the current study could be because in Ghana, parents do not see anything wrong with being hard on their children, criticizing them and even using canes and household items to beat them (Adonteng-Kissi, 2021). This could explain why these were the common abuse experiences of the children in the study. Also, in Ghana, parents can wake children up almost at any time to carry out some tasks (Adonteng-Kissi, 2020). This is why it was found in the current study.

The findings are also in consonance with the findings of Gupta and Aggarwal (2012) that children experienced physical abuse in the form of being battered or beaten with some physical materials. These were confirmed by the children in the study. In similar vein, the findings of the current study on psychological abuse confirmed the findings of Krug et al. (2002) that children

usually suffered denigration, ridicule, threats and intimidation, discrimination and rejection from their parents. Even though these treatments are not physical, they still affected children greatly.

Additionally, from the study of the ACPF (2014), 14 % of children from Uganda and 5 % from Morocco reported instances of deliberate neglect where the child was refused food and drink though they were available and also not given the best of care regarding their health and rest. Fayaz (2019) in speaking about neglect indicated that there is neglect when parents refuse to let their children get the best of care to their health and general wellbeing. These were established in the current study.

The evidence from the discussion is that even though children may experience several abuses from their parents, there are some common abuse situations that they may face. These are usually related to physical and psychological abuse and to some extent neglect. These are commonly meted out by parents to children.

Level of Self-Esteem of Children

The study showed that the children in the study had a positive view of themselves. Thus, they had positive or high self-esteem. Specifically, the respondents respected themselves, felt useful and felt that they were good. Also, the respondents were happy with themselves, they liked themselves and believed that there were a lot of good things about them. Even though the respondents experienced some form of abuse, it could be that because the abuse experiences were not often, their self-esteem was not affected in a bad sense. Also, it can be that children are mostly positive in their thinking until they are exposed to several negative experiences (Nyarko et al., 2014; Kong &

You, 2013). As a result, without exposure to negative experiences, children would have positive self-esteem.

The results confirm the results of the study of Wairimu, Macharia and Muiru (2016) that adolescents in their study had high self-esteem. Similarly, Keshky and Mohammed (2017) found that children had positive view of themselves and did not see themselves as worthless even regardless of their experiences. This was similar to the findings of the current study.

Further, Diamantopoulou, Rydell and Henricsson (2008) found that self-esteem levels of school children were positive and that low levels of self-worth among children was exaggerated in the literature. From the findings of the different studies, it is evident that children had positive or good views of themselves.

Self-esteem is purely based on how an individual views him or herself and as such for children who are mostly innocent and without a lot of experiences, it is not surprising that they would have a good view of themselves. As such, throughout the literature on self-esteem among children, the evidence is clear that children usually have a positive view of themselves.

Measures that Can Help Child Victims of Parental Abuse

The study revealed that different measures could help child victims of parental abuse deal with the abuse. Some of the measures identified in the study included support from other family members, friends and teachers, and professional help or assistance. Also, it was shown that health professionals and authorities can target schools and seek out children who are abused but cannot voice out and give them support.

The findings give the indication that support is the key thing that can help abused children. When children suffer parental abuse, usually the only people they can turn to are those who are close to them. Thus, support from relatives, friends and in most cases, teachers are what can help child victims of parental abuse. In such situations, these key people should make their support count so that abused children can receive the needed help.

The conclusions of the study are consistent with those of Doyle (2001), who looked at environmental factors that might be significant in assisting emotionally abused children in coping with their abusive upbringings and found that other family members, particularly aunts and siblings, offered support in doing so. Doyle discovered that in addition to them, friends, teachers, and other professionals were all beneficial, and certain religious groups had a good influence. Similarly, Phanichrat and Townshend (2010) discovered that finding support, engaging cognitively, thinking positively, accepting oneself, and looking for meaning were all important components of a healthy process of dealing with sexual assault. All of these are similar to the current study in that the current study showed that support from significant others is key in helping children cope with parental abuse.

In addition, the results of the current study support Fayaz's (2019) conclusions that the key preventative actions that can be performed to prevent child abuse include making schools the primary attention to raise awareness of child abuse among children. Additionally, Fayaz disclosed that specialists in child and adolescent mental health might assist the youngster in recovering from the effects of child maltreatment. Additionally, there are laws and regulations protecting children against abuse of any kind. Such regulations

offer a secure environment where children can be maintained while promoting their growth.

From the discussion, it appears that the main way for children to cope with the experience of parental abuse is to receive support. The support can come from family, friends, teachers and even mental health professionals. For children who may not have the boldness to seek for these kinds of support, significant others in the lives of children can attention to children and provide early intervention as and when children are exposed to parental abuse.

Gender and Parental Abuse

The study found that there was no significant difference between male and female children regarding their experience of parental abuse. Even though there were minor differences in the mean scores, these differences were not statistically significant. On this basis, the null hypothesis that there is no significant difference between male and female child victims of parental abuse in the Cape Coast Metropolis in their experience of parental abuse was retained. In essence, male and female children did not differ significantly in terms of their experience of parental abuse.

The findings are in line with a variety of existing literature. For instance, Jin, Wang, Xu and Zhong (2021) found that in China, children experienced mainly emotional and physical abuse and in terms of gender, there were differences between male and female school children regarding emotional, physical and sexual abuse. However, in terms of prevalence of general abuse experience, no significant difference was identified on the basis of gender. The results of the current investigation corroborated this.

Similarly, when Xiang, Wanga, and Guan (2018) examined the link between dispositional envy and child maltreatment as well as the mediating roles that self-esteem and social support played in this connection, they found no statistically significant variations between males and females related to maltreatment. Additionally, the finding of the current study supports the finding of Okur, van der Knaap and Bogaerts (2020) that there were no gender differences for formal disclosure of child sexual abuse.

Moreover, Gallo, Munhoz, Loret de Mola, and Murray (2018) did a systematic review of past studies on abuse and the results showed that gender differences were not statistically significant. Even though they found some studies which identified physical and sexual abuse effects to be more severe for women, there was not enough information to conclusively determine if there are gender disparities in the experience of abuse.

Contracting all the studies discussed, the study of Rostamia, Abdib and Heidari (2014) revealed that a significant difference exist between males and females in terms of the various types of abuse. The differences could be in the scale used in measuring abuse or in the differences in sample characteristics.

From the discussion, it can be seen that even though most of the studies found no gender difference, other studies found gender difference in the experience of abuse. More contextual studies may be needed to concretize the findings on gender difference in the experience of abuse.

Age and Parental Abuse

The study showed that there was a significant difference in the experience of parental abuse on the basis of age. This means that there was a statistically significant difference in the mean scores of the three different age

groups. The null hypothesis that there was no significant difference in the experience of parental abuse among child victims of parental abuse in the Cape Coast Metropolis on the basis of age was rejected. The post-hoc results revealed that respondents within the ages of 9 and 12 recorded the highest mean followed by those aged between 13 and 15 years. Those aged 16 years and above recorded the lowest mean score.

From the results, it can be seen that younger respondents experienced parental abuse more than older respondents. Considering the prevalent nature of abuse suffered in this study (canning, beating, criticizing etc.), the finding on the basis of age was not surprising. This is because in Ghana, it is common to see most parents shout at and use items to beat their children in the house but as the children grow up, parents begin to reduce this practice (Adonteng-Kissi, 2021).

The results of the present study are in confirmation with those of Ferragut, Ortiz-Tallo, and Blanca (2021), who found that the average age at which children in Spain first experienced abuse was 6 years old and older, albeit some experiences were different. Ferragut et al. concluded from their data that there were age differences in CSA experiences. Similarly, Putnam (2003) found that CSA varied on the basis of gender, age, disabilities, and parental dysfunction. Specifically, from age 9 years old, abuse became prevalent.

Further, in accordance with the results of the current study, Finkelhor (1994) discovered that while children of all ages in nations like the United States and Canada are at danger, they are most susceptible to abuse between

the ages of 7 and 13. From the studies discussed, it is realized that age is a major factor in terms of the experience of parental abuse.

In terms of parental abuse, there are some ages where parents would have no difficulty abusing their children with the idea that they are disciplining them. This could explain why age differences exist in the experience of parental abuse. This is common in different cultures, either Africa or Europe or the United States of America as has been demonstrated in the studies discussed.

Class Level and Parental Abuse

The study revealed that there was a significant difference in the experience of parental abuse of children on the basis of their class level. The null hypothesis that there was no significant difference in the experience of parental abuse among child victims of parental abuse in the Cape Coast Metropolis on the basis of class level was rejected. The post-hoc analysis revealed that respondents in JHS 1 recorded the highest mean, after which came those in JHS 2. Those in JHS 3 recorded the lowest mean score. Observing the results, it can be seen that respondents in lower class levels experienced parental abuse more than respondents higher class levels. Usually, as children progress in class levels, the extent to which parents can physically and psychologically abuse them reduces. This is because as children go to higher class levels, parents begin to see them as grown and as such do not speak to them harshly or use physical items to abuse them (Şahin, Barut & Ersanli, 2013).

The findings of the current study back up those of Chime, Orji, Aneke and Nwoke (2021) who revealed that educational level was a determining

factor in the experience of abuse in Enugu, Nigeria. Similarly, Sika-Bright and Nnorom (2013) showed that the ages, level of schooling and gender of children influenced the experience of child sexual abuse. This means that for most cases of parental abuse, the class or educational level of the child is of significant consideration.

As children advance in educational or class level, the ability to abuse them with the idea of disciplining them begins to fade. Parents are unlikely to be comfortable with maltreating their children while at the same time children become more exposed because of school and are able to articulate their issues with their parents more clearly. This is why age difference existed in the experience of abuse in the current study.

Impact of Parental Abuse on the Self-Esteem of Children

Finally, the study found that parental abuse had a significant negative relationship with self-esteem. Specifically, the relationship was a weak negative relationship. The regression results showed that parental abuse can significantly affect self-esteem negatively. Considering the results, the null hypothesis that there was no significant impact of parental abuse on the self-esteem of child victims of parental abuse in the Cape Coast Metropolis was rejected. The results mean that as the experience of parental abuse increases, the level of self-esteem reduces and as the experience of parental abuse decreases, the level of self-esteem increases. The experience of parental abuse in this study was seen not to be high and as such it was not surprising that the self-esteem of the children was not affected negatively.

The findings of this current study support the findings of several previous studies. For instance, Karakuş (2012) revealed childhood abuse

served as a notable forecast of self-esteem, and that emotional abuse, particularly, was a significant determinant of self-esteem. Karakuş revealed that when abuse increased, children's self-esteem decreased.

Xiang, Wanga, and Guan (2018) also looked at the mediation role of social support and self-esteem in the link between dispositional envy and child maltreatment and found that the maltreatment had an impact on children's self-esteem. This was given support by the findings of this current study. Mwakanyamale and Yizhen (2019) revealed that among adolescents in Tanzania, a significant relationship was found to exist between psychological abuse and levels of self-esteem.

The present study's findings concur with those of Pacheco, Irigaray, Werlang, Nunes, and Argimon (2014), who found that children and teens who experienced abuse as children had lower self-esteem. The impact of sexual abuse on teenagers' self-esteem in Iceland was explored by Birgisdóttir (2015), who found that there were important main effects for sexual abuse; those who had not experienced sexual abuse had better self-esteem than those who had.

In furtherance, the findings support other findings in Ghana. For instance, Nyarko, Amissah, Addai and Dedzo (2014) investigated discovered that children's despair and anxiety increased significantly as a result of both physical and psychological maltreatment. In essence, the self-worth and esteem of the children were affected by the experience of physical and psychological abuse. Dorgbetor's (2014) study in the Sefwi Wiawso Municipality also revealed that the manner in which parents raise their children has a significant impact on their children's levels of self-esteem. This

means that if children are treated with respect and care, their self-esteem will be affected and vice versa.

The impact of parental abuse on self-esteem of children seems to be undeniable as evidenced by the findings of the several studies discussed. This means that children who are abused the most are likely to have issues with their self-esteem.

Chapter Summary

This chapter dealt with the results and discussion of the study. The results of the analyses of four research questions and four hypotheses were presented and discussed in this chapter. The study found that the children experienced physical and psychological abuses, albeit, not often. The self-esteem levels of the children were however not affected negatively. Support from relatives, peers, teachers and professionals were found to be measures that could help child victims of parental abuse cope. Significant differences in parental abuse were found on the basis of age and class level but not in terms of gender. Finally, it was found that there was a significant relationship between parental abuse and self-esteem.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

Introduction

The preceding chapter presented the results and discussion of the study. In this chapter, the researcher offers a summary of the study, along with its conclusions and recommendations. The chapter also includes discussions on the implications of its findings for counselling and recommendations for additional research.

Summary of the Study

This study aimed to investigate the impact of parental abuse on the self-esteem of children in the Cape Coast Metropolis. In particular, the study purposed to provide responses to four research questions and examined four hypotheses.

Research Questions

1. What is the prevalence of parental abuse in the Cape Coast Metropolis?
2. What is the nature of parental abuse in the Cape Coast Metropolis?
3. What is the level of self-esteem of children of parents abuse in the Cape Coast Metropolis?
4. Which measures can help children of parental abuse in the Cape Coast Metropolis cope with their abusive experience?

Hypotheses

1. H_0 : There is no significant difference in how parental abuse impacts male and female children's self-esteem in the Cape Coast Metropolis.

H₁: There is a significant difference in how parental abuse impacts male and female children's self-esteem in the Cape Coast Metropolis.

2. H₀: There is no significant difference in how parental abuse impacts children's self-esteem in the Cape Coast Metropolis on the basis of age.

H₁: There is a significant difference in how parental abuse impacts children's self-esteem in the Cape Coast Metropolis on the basis of age.

3. H₀: There is no significant difference in how parental abuse impacts children's self-esteem in the Cape Coast Metropolis on the basis of class level.

H₁: There is a significant difference in how parental abuse impacts children's self-esteem in the Cape Coast Metropolis on the basis of class level.

4. H₀: There is no significant impact of parental abuse on the self-esteem of children in the Cape Coast Metropolis.

H₁: There is no significant impact of parental abuse on the self-esteem of children in the Cape Coast Metropolis.

The theoretical framework for the study focused on Bowlby's Attachment Theory and Social Learning Theory. The conceptual framework was based on the main variables in the study. The concept of child abuse, types of abuse, causes of child abuse, prevention of child abuse and the concept of self-esteem were also reviewed. Empirical literature relating to parental abuse and its effect on the self-esteem of children were reviewed. From the literature review, it was realized that parental abuse was common in

most societies. The most common forms of parental abuse were physical, emotional/psychological and sexual. The literature also revealed that the experience of parental abuse affected the self-esteem and overall wellbeing of young people. The literature in relation to the Ghanaian context was however scarce.

Descriptive survey research design was chosen in this research. A sample of 341 students was selected using proportional stratified random sampling from ten selected junior high schools in the Cape Coast Metropolis. The use of questionnaires allowed for the collection of data. The acquired information was analysed using statistical tools like means and standard deviations, independent samples t-test, one-way analysis of variance and simple linear regression.

Major Findings

The study found that the respondents experienced abuse by their parents on some occasions. In all these abuse cases, the experiences were not often.

Also, the study found that the common abuses suffered were psychological or emotional (hard on them, criticized them, not made them have enough rest) and physical (caning and beaten with house items). On the other hand, it was shown that the respondents rarely experienced sexual abuse. Thus, none of the sexual abuse situations in the study was experienced by the respondents.

The study found that the respondents had a positive view of themselves. Specifically, the respondents respected themselves, felt useful and felt that they were good. Also, the respondents were happy with themselves,

they liked themselves and believed that there were a lot of good things about them.

Further, the study revealed that different measures could help child victims of parental abuse deal with the abuse. Some of the measures identified in the study included support from other family members, friends and teachers, and professional help or assistance. Aside these, the respondents indicated that health professionals and authorities could target schools and seek out children who are abused but cannot voice out and give them support.

In addition, the study found that there was no significant difference between male and female children regarding their experience of parental abuse. This implies that male and female children did not differ significantly in terms of their experience of parental abuse. In terms of age, the study found that there was a significant difference in the experience of parental abuse on the basis of age. The post-hoc results revealed that respondents within the ages of 9 and 12 recorded the highest mean followed by those aged between 13 and 15 years. Those aged 16 years and above recorded the lowest mean score. Thus, younger respondents experienced abuse more than older respondents.

The study revealed also that there was a significant difference in the experience of parental abuse of children on the basis of their class level. This means that there was a statistically significant difference in the mean scores of the three age groups. The post-hoc analysis revealed that respondents in JHS 1 recorded the highest mean followed by those in JHS 2. Those in JHS 3 recorded the lowest mean score. Thus, respondents in lower class levels experienced parental abuse more than respondents higher class levels.

Finally, the study found that parental abuse had a significant negative relationship with self-esteem. Thus, parental abuse could significantly affect self-esteem negatively. Thus, as the experience of parental abuse increases, the level of self-esteem reduces and as the experience of parental abuse decreases, the level of self-esteem increases.

Conclusions

On the basis of the results, some conclusions are drawn. In the first place, it was concluded that parental abuse was experienced by children in the Cape Coast Metropolis to some level. Essentially, this means that parents in the Cape Coast Metropolis subjected their children to some level of abuse.

Secondly, it was concluded that it is not all forms of abuse which were experienced by children in the Cape Coast Metropolis. The nature of the abuse mostly experienced were emotional and physical.

From the findings, it was also concluded that children in the Cape Coast Metropolis had positive self-esteem. This gives the indication that the children had a good feeling about themselves and who they are.

Additionally, it was concluded that children who experience parental abuse can cope with the experience mostly when they receive some external support. The support is most essential when its from relatives, friends, teachers and health professionals. In the context of the study, support is the main means by which children can cope with their experiences.

Further, it was concluded that male and female children in the Cape Coast Metropolis are likely to have similar experiences of parental abuse. The indication from this is that parental abuse can be suffered by any child regardless of their gender.

Moreover, it can be concluded from the findings that younger children in the Cape Coast Metropolis experienced more parental abuse compared to older children. This in essence implies that younger children may be more vulnerable to parental abuse than older children.

Regarding class levels, it was concluded children in lower class levels (JHS 1) experienced parental abuse more than children higher class levels. This could give the indication that as children progressed in their levels of study, the experience of abuse is likely to go down or decrease.

Finally, it was concluded that the experience of parental abuse significantly affects the self-esteem of children in the Cape Coast Metropolis. Essentially, this conclusion means that more parental abuse experiences can make children have poor self-esteem while reduced parental abuse experiences can make children build up their self-esteem.

Recommendations

According to the results of the research, the following recommendations are offered as possible courses of action:

1. Parental abuse was found to be happening in the Cape Coast Metropolis. It is recommended that the Ministry of Gender, Children and Social Protection (MoGCSP) through the Department of Social Welfare organise sensitization programmes for parents on the need to avoid abusing their children.
2. The study revealed that physical and psychological abuses from their parents. It is recommended that parents reduce the extent to which they physically and psychologically abuse their children.

3. The study found that the children in the Cape Coast Metropolis had positive self-esteem. On this basis, it is recommended that teachers in schools educate and encourage children to continually have a positive of themselves.
4. The study found that measures which can help children cope with parental abuse were mainly support from relatives, friends and teachers. It is recommended that relatives, friends and teachers consistently check on children around them and provide assistance if they are experiencing any form of parental abuse.
5. The study revealed that male and female children did not differ in their experience of parental abuse. It is recommended that relatives provide the same kind of attention and support for both male and female children experiencing parental abuse.
6. Relatives and support networks of children suffering parental abuse should provide more support to younger children than older children. This is because the study found that younger children experienced parental abuse than older children.
7. In schools, it is recommended that since teachers were found to be support systems for children of parental abuse, they should provide more support to children in lower class levels than children in higher class levels.
8. The study found that parental abuse was related to self-esteem of children. On this basis, it is recommended that school heads collaborate with the MoGCSP to organise abuse awareness and sensitization programmes for school children. This can help children

who are experiencing abuse find the need and boldness to voice out their experiences and receive help so that their self-esteem is not affected.

Implications for Counselling

The findings of the study have implications for the work of counsellors. The following are some of them:

1. School counsellors should make counselling for abused children a major part of the services they provide, since children in basic schools do experience some forms of parental abuse.
2. School counsellors could take the initiative and work with teachers to provide assistance and counselling support for children identified to be abused.
3. School counsellors should organize outreach programmes for parents on the dangers of parental abuse to ensure that parents avoid abusing their children.
4. School counsellors could collaborate with the appropriate health professionals and authorities to provide additional and specialized help to children who have suffered parental abuse.

Suggestions for Further Research

The following ideas are offered as suggestions for additional research:

1. Future researchers can explore the actual abuse experiences of children through a qualitative study. This is because this current study being a quantitative study has made it known that children experience parental abuse to some level.

2. Future researchers can consider the views of parents as part of such a study so that the reasoning behind some of the physical and psychological abuses can be known and as such proper measures recommended in resolving the issues.



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APPENDICES

APPENDIX A

UNIVERSITY OF CAPE COAST

COLLEGE OF EDUCATION STUDIES

DEPARTMENT OF GUIDANCE AND COUNSELLING

QUESTIONNAIRE FOR STUDENTS

The purpose of this study is to learn more about how parents relate to their children in the Cape Coast Metropolis. It is also to find out how the ways parents treat children affect children. This will help bring about good suggestions that will help parents to do better and help children also to feel better about themselves. Any information that you volunteer will be held in strict confidence. Please feel free to give honest responses in the study.

Thank you.

Direction: Please respond by checking the box [] and writing in the appropriate spaces where applicable.

Section A – Background / Demographic Information

1. Gender: Male [] Female []
2. Age: 9 - 12 years [] 13-15 years [] 16 years and above []
3. School:
4. Class Level:

Section B: Prevalence and Nature of Abuse

Please indicate how often you have experienced the following. Please use the scale below:

0= Never, 1= Sometimes, 2= Most often, 3= Always

| My parents... | 0 | 1 | 2 | 3 |
|--|----------|----------|----------|----------|
| 1. make me feel like that they do not like me and do not care for me | | | | |
| 2. make me feel like I am a burden to them | | | | |
| 3. always criticize me | | | | |
| 4. always tease me | | | | |
| 5. somehow say they wished I was not born | | | | |
| 6. treat me with disrespect | | | | |
| 7. make me feel worthless | | | | |
| 8. are very hard on me | | | | |
| 9. blame me in others presence | | | | |
| 10. have never told me they love me | | | | |
| 11. do not pay attention to my wishes | | | | |
| 12. do not care about my hygiene | | | | |
| 13. do not care about what I eat | | | | |
| 14. do not make me have enough sleep and rest | | | | |
| 15. do not help me if I have a problem. | | | | |
| 16. often cane me | | | | |
| 17. often throw things at me | | | | |
| 18. often slap me | | | | |
| 19. beat me with items in the house when I make small mistake | | | | |
| 20. push me to the floor when I do a wrong thing | | | | |

| At least one parent... | 0 | 1 | 2 | 3 |
|---|----------|----------|----------|----------|
| 1. has tried to touch my private parts | | | | |
| 2. has tried to look at my private parts | | | | |
| 3. has tried to hurt me sexually | | | | |
| 4. has made me look at or touch his/her private parts | | | | |
| 5. has had sex with me | | | | |
| 6. has made me watch blue films. | | | | |

Section C: Level of self-esteem

Please indicate how much you agree or disagree with the statements in this section. Please use the scale below:

1= Strongly Disagree, 2= Disagree, 3= Agree and 4= Strongly Agree

| I Feel: | 1 | 2 | 3 | 4 |
|---|----------|----------|----------|----------|
| 1. that I am as good as anybody else | | | | |
| 2. that there are a lot of good things about me | | | | |
| 3. that I fail a lot | | | | |
| 4. I can do things as well as most other people | | | | |
| 5. I do not have much to be proud of | | | | |
| 6. I don't respect myself | | | | |
| 7. useless at times | | | | |
| 8. I am no good at all | | | | |
| 9. I do like myself | | | | |
| 10. I am happy with myself | | | | |

Section D: Measures to help children to cope with parental abuse

What do you want to be done to help you from been abused?

.....

.....

.....

.....

.....

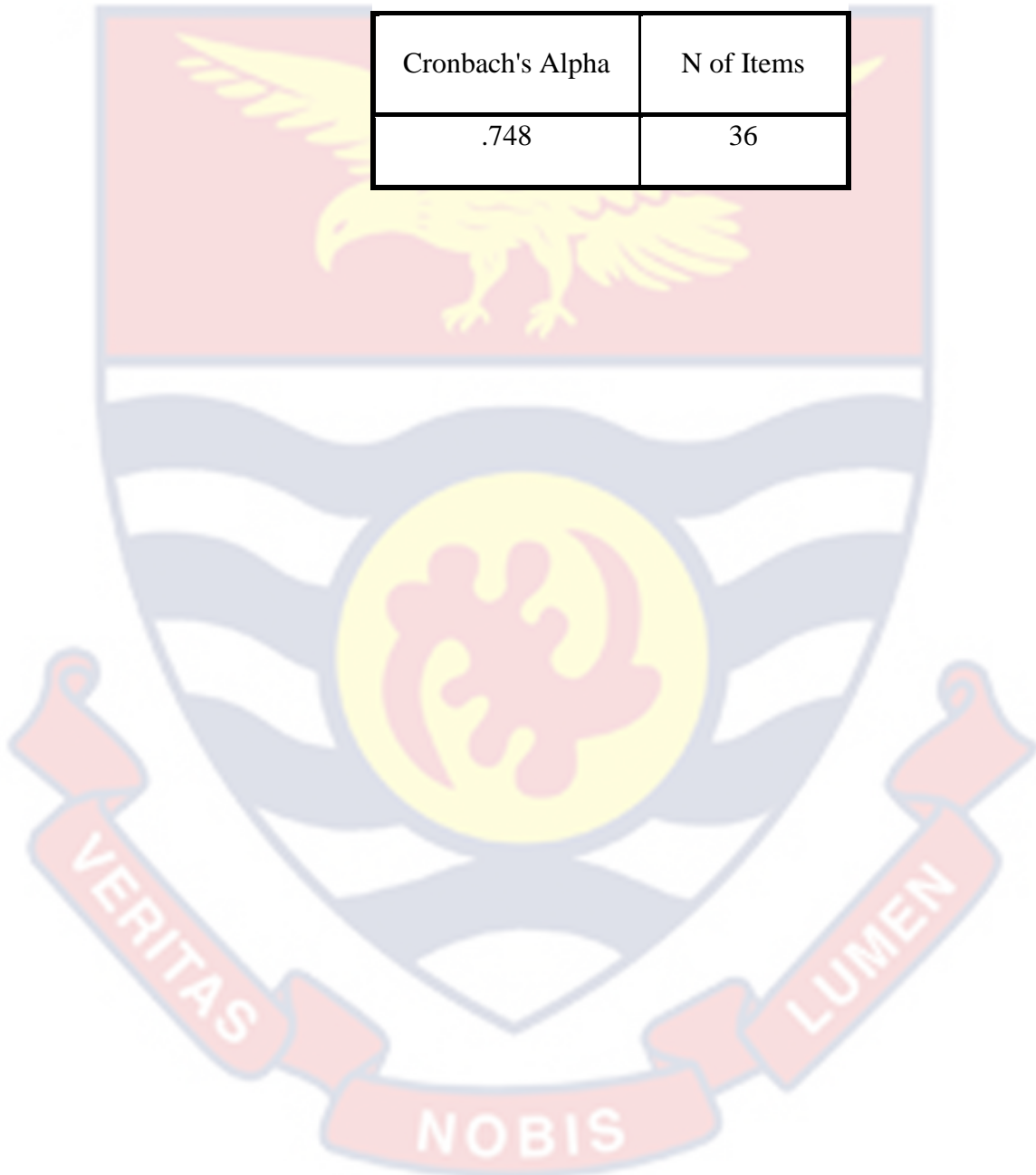
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.....

APPENDIX B
RELIABILITY OUTPUT

Reliability Statistics

| Cronbach's Alpha | N of Items |
|------------------|------------|
| .748 | 36 |



APPENDIX C

INTRODUCTORY LETTER



APPENDIX D

ETHICAL CLEARANCE

UNIVERSITY OF CAPE COAST
COLLEGE OF EDUCATION STUDIES
ETHICAL REVIEW BOARD

UNIVERSITY POST OFFICE
CAPE COAST, GHANA

Our Ref: CES-ERB/ucc/edu/MS/21-89



Date: 27~~th~~ August 2021

Your Ref:

Dear Sir/Madam,

ETHICAL REQUIREMENTS CLEARANCE FOR RESEARCH STUDY

Chairman, CES-ERB
Prof. J. A. Omotosho
jomotosho@ucc.edu.gh
02443784739

Vice-Chairman, CES-ERB
Prof. K. Edjah
kedjah@ucc.edu.gh
0244742357

Secretary, CES-ERB
Prof. Linda Dzama Forde
lforde@ucc.edu.gh
0244786680

The bearer, Abice Asiedu, Reg. No. EF/KCP/19/004 is
M.Phil/ Ph.D. student in the Department of Guidance
and Counselling in the College of Education Studie
University of Cape Coast, Cape Coast, Ghana. ~~He~~ / She wishes to
undertake a research study on the topic:

Impact of parental abuse on the
Self-esteem of children in the
Cape Coast Metropolis.

The Ethical Review Board (ERB) of the College of Education Studies
(CES) has assessed ~~his~~ her proposal and confirm that the proposal
satisfies the College's ethical requirements for the conduct of the
study.

In view of the above, the researcher has been cleared and given approval
to commence ~~his~~ her study. The ERB would be grateful if you would
give him/her the necessary assistance to facilitate the conduct of the said
research.

Thank you.
Yours faithfully,

Prof. Linda Dzama Forde
(Secretary, CES-ERB)