The Relationship between Child Abuse and Depression among Secondary School Students in Makurdi Metropolis, Makurdi Local Government Area of Benue State, Nigeria.

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Abstract
An investigation of the relationship between child abuse and depression was conducted in a survey of 230 participants drawn from some selected secondary schools in Makurdi metropolis. The participants made up of 109 males, 121 females took part in the study. Five hypotheses were postulated while two instruments (Child abuse questionnaire and Beck depression inventory) were used for data collection. The results of the study showed that: there is a relationship between physical abuse and depression among students. Significant relationship between sexual abuse and depression among students. There is a relationship between emotional abuse and depression among students. Significant relationship between child neglect and depression among students and No significant difference between male and female on child abuse among students. The study recommended that parents/guardians should provide for their children/wards both physical and psychological needs such as love, attention, food, clothing and education which will help them develop self-esteem and self-consciousness.

Keywords: depression, child abuse, physical abuse, emotional abuse, sexual abuse and neglect

Introduction
Depression is a condition in which one feels blue or sad. But these feelings are usually for a short period of time. Depression interferes with daily life activities of an individual. It is a common but serious illness (National Institute of Mental Health, 2011). It is a major cause of disability across the regions and it causes fatigue, suicide, decreased ability to do work and attend school (Institute for Health Metrics and Evaluation, 2013). Depression disrupts a person’s thinking processes, emotional reactions and day-by-day behaviors (Williams, 1984; Farby, 1980). Depression may signify a mood, a symptom or a syndrome as a mood; it refers to temporary feelings of sadness, despair, and discouragement. As a symptom, it refers to these feelings, when they persist and are associated with such problems as decreased
pleasure, hopelessness, guilt, and disrupted sleeping and eating patterns. The entire syndrome is also referred to collectively as a depression or depressive disorder (Gale encyclopedia of psychology, 2001).

Historically, the presence of depression in children has spawned considerable controversy (Lefkowitz & Burton, 1978; Rie, 1966). Studies have showed that factors like child abuse has tendencies that can lead to depression among children (Salmons, 1997; Fergusson Horwood & Lynskey 1996 and Moeller, Bachmann, & Moeller, 1993).

Main forms of child abuse include physical, emotional, and sexual harassment, and neglect (Killen, 2001 & Manly, Cicchetti and Barnett, 1994). In line with this, Eggen and Donkauchak (1994) asserted that child abuse is a deliberate action or attempt which could range from physical abuse, sexual abuse, child neglect and emotional injuries on children and it involves both male and female equally. Cook (1982) opined that child maltreatment is any act or series of action of commission or omission by a parent or other caregivers that result in harm, potential for harm or threat of harm to a child. Theorists (e.g., Beck, 1967; Bowlby, 1973, 1980) have long thought that negative experiences in childhood may contribute vulnerability to the development of psychopathology across the lifespan. Consistent with this hypothesis, studies have generally supported the relationship between a history of childhood physical or sexual abuse and diagnoses of depressive and anxiety disorders, particularly posttraumatic stress disorder (PTSD), in adulthood (Paolucci, Genuis & Violato 2001; Putnam, 2003; Rodriguez, Vande-Kemp & Foy 1998).

Child abuse is related with depression became whenever children are abused, they have a state of low mood and aversions to activities that can have negative effects on their thoughts, feelings, world views and physical well-being (Salmons, 1997). Similarly National Institute Mental Health, (2012) reported that depressed children may feel sad, anxious, empty, hopeless, worried, helpless, worthless, guilt, irritable, hurt or restless. They may loss interest in the activities that were pleasurable, experience loss of appetite or over acting, have problems to concentrating, remembering details, or making decisions and may contemplate or attempt suicide, insomnia, excessive sleeping, fatigue, loss of energy, or aches, pains or digestive problems that are resistant to treatment may also be present.

Fergusson et al, (1996) and Moeller et al, (1993) concluded that child abuse may have a causative role in the most severe depression. Rosen and Martin (1996) have drawn attention to the fact that research into child abuse often focuses on only one type of abuse. This, however, overlooks the combined effect of different types of abuse: Horwitz’s prospective study (2003) suggests that children who have experienced child sexual abuse often grow up in impoverished environments with poverty, inadequate parenting, parents who are unemployed, or parents using drugs or alcohol. Such children have often experienced other forms of child maltreatment as well, including emotional abuse, neglect, physical abuse and witnessing domestic abuse in the home (Coid, Petruckevitch & Feder, 2001; Radford and Hester 2006).

Dubowitz et al, (2002) opine that child abuse has many harmful effects vary depending on a number of factors, including the circumstances, personal characteristics of the child’s environment and may endure long after the abuse or neglect occurs. Researchers have identified links between child maltreatment with difficulties during infancy such as depression and withdrawal symptoms, common among children as young as three who have experienced emotional or physical abuse, or neglect (Gelles, 1998). Read (1998) observed that 50% of people receiving mental health services report abuse as children. While 50 to 60
percent of psychiatric inpatients and 40 to 60 percent of outpatients report childhood histories of physical or sexual abuse or both.

Emotional abuse is inherent in all forms of maltreatment and cannot be disentangled from other types of abuse (Barbarino et al (1986). Emotional abuse can have a severe impact on a developing child’s mental health, behaviour and self-esteem, particularly when it occurs in infancy (Glaser et al, 2001). Richard and Krugman, (2012) observed that emotional abuse such as rejection, ignoring, criticizing, isolation or terrorizing of children has the effect of eroding the child’s self-esteem. Kent and Waller (1998) discovered that emotional abuse predicted more depression and anxiety than other forms of abuse. Children who experience emotional neglect demonstrate anxious attachment (Egeland & Sroufe, 1981) and internalizing problems (Erickson & Egeland, 1996). Though little research has focused on long-term effects of emotional neglect, psychologists have demonstrated sequelae including major depression (Yamamoto, Iwata, Tomoda, Tanaka, Fujimaki, & Kitamura, 1999).

Theoklitous and Kabitisis (2011) outline that; physical abuse involves physical aggression directed at a child by an adult. He further noted in most cases when the child is physically abused, they normally experience depressive symptoms such as difficulties in concentration, distressed, loss of interest, sadness, crying, worthlessness, irritability, chronic pains, less of appetite etc. they also found that 62% of male are physical abuse while 38% female which means that male are physically abused than female. Cheng, Mei, Cheng and Ming (2008) found that childhood physical abuse significantly increased the risk of depression. Toth, Manly and Cicchetti, (1992) noted that coalescing evidence suggest a relation between maltreatment in childhood and the presence of depression. These results are especially consistent with regard to physical abuse. Similarly, Kaufman (1991), explored the presence of depression in children experiencing a range of types of maltreatment, including physical abuse, sexual abuse, emotional maltreatment, and neglect interestingly; children meeting depression criteria were found to have higher scores on experiences of physical abuse and emotional maltreatment, while differences on sexual abuse and neglect were not obtained.

Neglect not only causes economic losses (Fang, Fry, Brown, Mercy, Dunne, Butchart, Corso, Maynzyuk, Dzhygyr & Chen, 2015), but also increases the risk of criminality (Kim, Park & Kim, 2016) and psychiatric illnesses such as depression (Li, D’Arcy and Meng, 2016). Moreover, one study found that depression severity in orphans is related more strongly to neglect than abuse (Hermenau, Eggert, Landolt & Hecker, 2015). The risk of childhood abuse and neglect is greater among children and adolescents with disabilities (Blef, Walters, Hughes, Sutton, Marshall, Crothers, Lehman, Paserba, Talkington, Taormina & Huang, 2013; Sullivan & Knutson, 2000 and Sobsey, 1994). Onwuameze, Uga & Paradiso (2016) noted that of all childhood maltreatments, childhood neglect would be the strongest predicting factor for depression. Streta, (1993) put forward that when the welfare of a child is neglected such as school, food, social activities, shelters, clothing, it begins to affect the psychological well-being of that child and this consequently leads to sadness, hopelessness, difficulty in concentration, suicidal thought, self-dislike, loss of interest, and loss of stable sense of worth. According to Heim and Nemeroff, (2001) child abuse was contributed to mental health disorders; this could lead to depression as a result of abuse. Agid, Kohn & Lerer (2000) argued that persistent neglect can lead to impairment of health and development; children may also experience low self-esteem, depression or feelings of being unloved and isolated.

Abubakadir (2010) observed that in the North central Nigeria, a one year hospital based
review in Mina found two cases of sexual abused, boys accounted for 7% and girls 92% of the total cases of child sexual abuse reported within that period, additionally, social circumstances such as street hawking, attendances at care institution, commercial sex workers and membership in certain social organizations have been found to be risk factors for child sexual abuse. His research also found that, most of these children who are sexually abused are usually experiences of suicidal though, self-dislike, guilty feeling, sadness, tiredness, loss of energy, distress, etc. in the same vein, the study of Davidson (1995) and Ross (1987) cited in Journal of Counseling and development, reported that there is a relation between sexual abuse and depression. Petter (2012) also found a positive association between sexual abuse and depression. Bifulco, Moran, Baines, Bunn & Stanford (1991) posited that women who had experienced sexual abuse in childhood are found to have the highest rates of depression. Heger, Tilson, Velasques and Bernier, (2002) asserted that sexual abuse is linked to disturbed mental health resulting in self-harm, inappropriate sexualize behaviour and this lead to sadness, depression and loss of self-esteem. According to the National College Health Assessment Survey, the rates of students reportedly having been diagnosed with depression have increased from 10% in 2000 to 21% in 2011. The survey also showed that female had the highest percentage of depression; female 66% while male were 34% respectively.

The current study was designed to articulate further the relation between child abuse and depression. To date, no study of such has been carried out in Makurdi metropolis. Most of the previous studies on depression and its determinants like child abuse were either conducted in western societies or too timeworn. Accordingly, the existing studies could not able to adequately explain changes in the situation of the contemporary societies of developing countries. Moreover, the issue of depression and the factors influencing it is a virgin area of research in Benue State and in Makurdi in particular. Consequently, this study was conducted to fill this knowledge gap by focusing on the forms of child abuse like Physical abuse, Emotional abuse, neglect and sexual abuse in relation to depression.

**Aim and Objectives**

i. To examine the relationship between physical abuse and depression  
ii. To find-out the relationship between sexual abuse and depression  
iii. To determine the relationship between emotional abuse and depression  
iv. To examine the relationship between child neglect and depression  
v. To verify whether there is a gender difference on child abuse.

**Research Question**

i. Is there any significant relationship between physical abuse and depression among students?  
ii. Will there be any significant relationship between sexual abuse and depression among students?  
iii. Will there be any significant relationship between emotional abuse and depression among students?  
iv. Is there any significant relationship between child neglect and depression among students?  
v. Will there be any significant difference in gender on child abuse among students.

**Research Hypotheses**

i. There will be a significant relationship between physical abuse and depression among secondary school students in Makurdi metropolis.  
ii. There will be a significant relationship between sexual abuse and depression among secondary school students in Makurdi metropolis.
secondary school students in Makurdi metropolis.

iii. There will be a significant relationship between emotional abuse and depression among secondary school students in Makurdi metropolis.

iv. There will be a significant relationship between child neglect and depression among secondary school students in Makurdi metropolis.

v. There will be a significant difference in gender on child abuse among secondary school students in Makurdi metropolis.

Methodology
The study adopted a survey design. The population of the study consists of secondary schools within Makurdi metropolis. With the use of cluster random sampling technique; five different secondary school within Makurdi metropolis of Benue State which includes: Tilley Gyado College North bank, Padopads Harmony Secondary school high level, Community secondary school Wadata, Aveco Model college Modern Market and Gaadi comprehensive college Gaadi. Two hundred and thirty (230) respondents were drown from the above mention schools with the use of simple random sampling method. The participants comprise of one hundred and nine (109) male and one hundred and twenty one (121) females.

Instruments
Data for this study were collected using three (2) instruments: Child abuse questionnaire and Beck depression inventory II (BDI=II). Demographic characteristics was measured using 6 item subscale, sample items of this scale include: information such as sex, course of study, religious affiliation, age, level of study and cumulative grade point average. Respondents were asked to indicate their level of agreement for each statement by ticking and writing their response.

Procedures for Data Collection
Prior to the administration of questionnaires, permission was obtained from five randomly selected secondary schools. The researchers preceded and obtained informed consents of students who formed sample for the study. The researchers personally administered the questionnaires to the respondents at their various classrooms, in keeping with ethical standard, the respondents were debriefed accordingly.

Method for data analysis
The study adopted Pearson r correlation and t-test for data analysis. Pearson r, was used to test relationship between child abuse and depression while t-test was used to test the gender difference on child abuse

Results
Hypothesis one: there will be a significant relationship between physical abuse and depression among secondary school students in Makurdi metropolis.

Table 1: showing the result on the relationship between physical abuse and depression

<table>
<thead>
<tr>
<th>Variables</th>
<th>N</th>
<th>X</th>
<th>SD</th>
<th>r</th>
<th>p</th>
<th>Remark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical abuse</td>
<td>230</td>
<td>9.95</td>
<td>2.082</td>
<td>.457</td>
<td>0.05</td>
<td>sig</td>
</tr>
<tr>
<td>Depression</td>
<td>17.63</td>
<td>10.323</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The result shows that there is a statistically significant relationship between physical abuse and depression. Therefore, the research hypothesis was accepted and the null hypothesis was rejected. This implies that whenever a child is physically abused, he or she gets depressed.

**Hypothesis two:** there will be a significant relationship between sexual abuse and depression among secondary school students in Makurdi metropolis.

**Table 2: showing the result on the relationship between sexual abuse and depression**

<table>
<thead>
<tr>
<th>Variables</th>
<th>N</th>
<th>X</th>
<th>SD</th>
<th>r</th>
<th>p</th>
<th>Remark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual abuse</td>
<td>230</td>
<td>9.80</td>
<td>1.980</td>
<td>.372</td>
<td>0.05</td>
<td>sig</td>
</tr>
<tr>
<td>Depression</td>
<td>17.63</td>
<td>10.323</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The result shows that there is a statistically significant relationship between sexual abuse and depression. Therefore, the research hypothesis was accepted and the null hypothesis was rejected. This means that a sexually abused child is likely to get depressed.

**Hypothesis three:** there will be a significant relationship between emotional abuse and depression among secondary school students in Makurdi metropolis.

**Table 3: showing the result on the relationship between emotional abuse and depression**

<table>
<thead>
<tr>
<th>Variables</th>
<th>N</th>
<th>X</th>
<th>SD</th>
<th>r</th>
<th>p</th>
<th>Remark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional abuse</td>
<td>230</td>
<td>7.92</td>
<td>1.326</td>
<td>.187</td>
<td>0.05</td>
<td>sig</td>
</tr>
<tr>
<td>Depression</td>
<td>17.63</td>
<td>10.323</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The result shows that there is a statistically significant relationship between emotional abuse and depression. Therefore, the research hypothesis was accepted and the null hypothesis was rejected. This result implies that emotional abuse has a bilateral relationship with depression because when children are abused emotionally, they get depression.

**Hypothesis four:** there will be a significant relationship between neglect and depression among secondary school students in Makurdi metropolis.

**Table 4: showing the result on the relationship between neglect and depression**

<table>
<thead>
<tr>
<th>Variables</th>
<th>N</th>
<th>X</th>
<th>SD</th>
<th>r</th>
<th>p</th>
<th>Remark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neglect</td>
<td>230</td>
<td>9.18</td>
<td>1.680</td>
<td>.369</td>
<td>0.05</td>
<td>sig</td>
</tr>
<tr>
<td>Depression</td>
<td>17.63</td>
<td>10.323</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The result shows that there is a statistically significant relationship between neglect and depression. Therefore, the research hypothesis was accepted and the null hypothesis was rejected. This indicates that children who are neglected either by parents/guardians or by
teachers are found depressed because in most cases they are not giving adequate care attention in all areas of life.

**Hypothesis five:** there will be a significant between male and female on child abuse and depression among secondary school students in Makurdi metropolis.

**Table 5: showing the result for gender difference on child abuse and depression**

<table>
<thead>
<tr>
<th>Variables</th>
<th>N</th>
<th>X</th>
<th>SD</th>
<th>df</th>
<th>r</th>
<th>p</th>
<th>Remark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>109</td>
<td>36.30</td>
<td>5.261</td>
<td>228</td>
<td>.979</td>
<td>0.05</td>
<td>N sig</td>
</tr>
<tr>
<td>Female</td>
<td>121</td>
<td>37.04</td>
<td>6.096</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The result shows that there is no statistically significant difference between male and female on child abuse among secondary school students in Makurdi metropolis. Therefore, the research hypothesis was rejected and the null hypothesis was accepted.

**Discussion**

The first hypothesis raised for the study states that there will be a significant relationship between physical abuse and depression among secondary school students in Makurdi metropolis. The finding showed that a significant relationship between physical abuse and depression do exist. This finding is in line with previous finding by Theoklitous and Kabitisis (2011), they noted that in most cases when the child is physically abused, they normally experience depressive symptoms such as difficulties in concentration, distressed, loss of interest, sadness, crying, worthlessness, irritability, chronic pains, less of appetite etc. the result of the present study also goes in line with Cheng, Mei, Cheng and Ming (2008) who found that childhood physical abuse significantly increased the risk of depression. This result is consistent with Toth, Manly and Cicchetti, (1992) noted that coalescing evidence suggest a relation between maltreatment in childhood and the presence of depression. Similarly, Kaufman (1991), who observed that children meeting depression criteria were found to have higher scores on experiences of physical abuse and emotional maltreatment.

The second hypothesis postulated for the study say; there will be a significant relationship between sexual abuse and depression among secondary school students in Makurdi metropolis. This result indicates that there is a significant relationship between sexual abuse and depression. This present finding is in congruent with previous findings by Abubakadir (2010) found that, most of these children who are sexually abused are usually experiences of suicidal though, self-dislike, guilty feeling, sadness, tiredness, loss of energy, distress, etc. in the same vein, the study of Davidson (1995) and Ross (1987) reported that there is a relation between sexual abuse and depression. This current finding is in agreement with Petter (2012) who found a positive association between sexual abuse and depression. This finding also support that of Heger, Tilson, Velasques and Bernier, (2002) sexual abuse is linked to disturbed mental health resulting in self-harm, inappropriate sexualize behaviour and this lead to sadness, depression and loss of self-esteem.

Regarding the third hypothesis; there will be a significant relationship between emotional abuse and depression among secondary school students in Makurdi metropolis. The result showed that there is a significant relationship between emotional abuse and depression. This
finding align with previous findings by Gelles, (1998) who identified links between child maltreatment with difficulties during infancy such as depression and withdrawal symptoms, common among children as young as three who have experienced emotional or physical abuse, or neglect. This result of the present study is in line with Kent and Waller (1998) discovered that emotional abuse predicted more depression and anxiety than other forms of abuse.

The fourth hypothesis put forward states that; there will be a significant relationship between child neglect and depression among secondary school students in Makurdi metropolis. The result showed a significant relationship between child neglect and depression. This result is in line with previous findings by Li, D’Arcy and Meng, (2016) neglect increases the risk of psychiatric illnesses such as depression. Hermenau, Eggert, Landolt & Hecker, (2015) they found that depression severity in orphans is related more strongly to neglect than abuse. The result of this current study is also congruent with previous finding by Onwuameze, Uga & Paradiso (2016) noted that of all childhood maltreatments, childhood neglect would be the strongest predicting factor for depression. The by Streta, (1993) agrees with the present finding; his finding put forward that when the welfare of a child is neglected such as school, food, social activities, shelters, clothing, it begins to affect the psychological well-being of that child and this consequently leads to sadness, hopelessness, difficulty in concentration, suicidal thought, self-dislike, loss of interest, and loss of stable sense of worth.

Regarding the last hypothesis raised by the study; there will be a significant difference in gender on child abuse among secondary school students in Makurdi metropolis. The finding of this present study indicates that there is no significant difference on child abuse. The finding is in contrast with previous findings by Theoklitous and Kabitisis (2011) found that 62% of male are physical abuse while 38% female which means that male are physically abused than female; and Abubakadir (2010) observed that in the North central Nigeria, a one year hospital based review in Mina found two cases of sexual abused, boys accounted for 7% and girls 92% of the total cases of child sexual abuse reported within that period, additionally.

Conclusion
Based on the findings of the study, the study arrived at the following conclusions:
There is a significant relationship between physical abuse and depression.
Sexual abuse and depression are correlated
There is a significant link between emotional abuse and depression
Significant correlation does exist between neglect and depression
There is no significant difference between genders.

Recommendation
Base on the outcomes of the study, the recommended that:
Parents/guardians should provide for their children/wards both physical and psychological needs such as love, attention, food, clothing and education which will help them develop self-esteem and self-consciousness.

References
Harper and Row.