

# Child Abuse and Neglect

Joanna Włodarczyk – Empowering Children Foundation

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**M**altreatment at the hands of loved ones, parents or caregivers, is one of the greatest risks to a child's safety and development. Child maltreatment may take the form of abuse or neglect (WHO, 2018). Child abuse may be physical, sexual, or emotional. Neglect can also be divided into several categories: physical (lack of appropriate care or the failure to provide physical conditions necessary for the child's development), emotional (lack of a healthy bond and emotional nurturing), but also medical (lack of appropriate care in times of illness, the failure to immunize the child, etc.), legal (the failure to register the child after birth), and even educational (the failure to provide schooling for the child). To sum up, abuse involves acts of commission, while neglect involves acts of omission.

Child maltreatment leads to measurable negative consequences at the individual and societal levels. Many of them involve victims' health, both in childhood and adolescence, and later in life (WHO, 2006).

All children have the right to live without abuse – not only because of its negative consequences for their safety and development, but, above all, because children should be protected from violence and abuse just like every other citizen. The importance of protecting children from maltreatment is reflected by the fact that this area is regulated both by international conventions, primarily the Convention on the Rights of the Child, and by the Polish law, particularly the Act on Counteracting Family Violence.

This chapter presents data on physical and emotional abuse and neglect, whereas sexual abuse is discussed in Chapter *Child sexual abuse*.

## Definitions

The World Health Organization defines **physical abuse** of a child as acts or behaviours that lead to actual or potential physical harm from an interaction, which is reasonably within the control of a parent or another person in a position of responsibility, power or trust. Child physical abuse may involve single or repeated incidents (WHO, 1999).

In its definition of child physical abuse, the United Nations emphasises the intentional use of physical force or power, that either results in or has a high likelihood of resulting in actual or potential harm to the child's health, survival, development or dignity. Among behaviours classified as physical abuse the UN lists hitting, kicking, shaking, beating, bites, burns, strangulation, poisoning, and suffocation by members of the child's family (Pinheiro, 2006). Physical abuse of children by their parents or caregivers often takes the form of corporal punishment (WHO, 2006). The Committee on the Rights of the Child defines corporal or physical punishment as any punishment in which physical force is used and intended to cause some degree of pain or discomfort, however light. It mostly involves hitting ("smacking", "slapping", "spanking") children, with the hand or with an implement – a whip, stick, belt,

shoe, wooden spoon, etc. But it can also involve, for example, kicking, shaking or throwing children, scratching, pinching, biting, pulling hair or boxing ears, forcing children to stay in uncomfortable positions, burning, scalding or forced ingestion (Committee on the Rights of the Child, 2006). According to the Committee, any corporal punishment is degrading. These forms of punishment were commonly used in the past, in many different societies. Today they are illegal in a growing number of countries, including in Poland since 2010 (Global Partnership to End Violence Against Children, 2016).

**Psychological or emotional abuse** of a child is more difficult to define than physical abuse, because there is no one clear moment of violating the child's boundaries, such as, for example, when he or she is hit by the abuser. Psychological abuse is "more like a spectrum: some acts, considered to be relatively benign, occur only occasionally, while others can be severe and extremely destructive" (Iwaniec, 2012, p. 31). Additionally, the definition of emotional abuse depends largely on the cultural context and social norms about parenting and the role of caregivers. One of the most popular definitions of emotional abuse is the one proposed by the WHO, which defines this category of abuse as the failure to provide a developmentally appropriate and supportive environment, including the availability of a primary attachment figure, so that the child can develop a stable and full range of emotional and social competencies commensurate with her or his personal potential and social context. Abusive acts towards the child cause or have a high probability of causing harm to the child's health or physical, mental, spiritual, moral or social development. Emotional abuse occurs within the child's relationship with a parent or another person in a position of responsibility, trust or power. Abusive acts include restriction of movement, patterns of belittling, denigrating, scapegoating, threatening, scaring, discriminating, ridiculing or other non-physical forms of hostile or rejecting treatment (WHO, 1999).

According to the Polish Act on Counteracting **Family Violence** (amended in 2010), family violence should be understood as "isolated or repeated deliberate acts of commission or omission that violate the rights or personal interests of family members, particularly ones that put these persons at risk of losing their life or health, violate their dignity, bodily integrity, and freedom (including sexual freedom), cause harm to their physical or mental health, and lead to suffering and moral harm in the victims. Since the 1st of August 2010, an amendment to the Polish Family and Guardianship Code (Journal of Laws [Dz.U.] No. 9, item 59 with amendments) has been in force, which introduced, in Article 96, a legal ban on the use of corporal punishment by persons exercising parental authority or providing care for children.

According to the World Health Organization, **neglect** includes both isolated incidents, as well as a pattern of failure over time on the part of a parent or other family member to provide for the development and well-being of the child – where the parent is in a position to do so. It may concern such areas as health, education, emotional development, shelter and safe living conditions. The parents of neglected children are not necessarily poor. They may equally be financially well-off (WHO, 2006).

## Prevalence and dynamics of abuse (physical and emotional abuse, witnessing violence)

There are two sources of information about the prevalence of child abuse in Poland: official statistics and social surveys. Different kinds of statistical data about child abuse are gathered by the police and courts, but also by multidisciplinary teams dealing with family violence or support and crisis

intervention centres. It should be emphasised that police and court statistics reflect just a part of the reality; usually, they provide information about criminal offences committed, so they do not include some forms of abuse, which are not criminalized, and they only include cases that have been reported to law enforcement agencies. This is particularly important when it comes to child abuse by parents or caregivers, as children have a limited capability to report such incidents. That said, official statistics can be a very good indicator of trends and tendencies.

Social surveys reveal much more broadly defined abuse, including behaviours that have not been described in legal codes. Moreover, they show a larger scale of abuse, as they may include not only experiences that have not been reported to the police, but also ones that the child has not previously disclosed to anyone.

## Official data

The main statistics on child abuse are those collected within the Blue Card procedure, which was introduced in 1998. It is an integrated system of support and monitoring for families in which cases of violence have been reported. In recent years, there has been a decrease in the number of forms drawn up: from 97,000 in 2016 to 82,000 in 2021. The Blue Card procedure may be initiated by the police, social services, health care professionals, or members of the communal committees for solving alcohol abuse problems. In practice, in the vast majority of cases the procedure is started by the police (78%, according to 2021 data). In 13% of cases it is initiated by social services, in 4% – by representatives of the educational system, in 3% – by communal committees for solving alcohol abuse problems, and in just 1% of cases – by health care professionals (MRPiPS, 2022; Table 1).

**Table 1.** The numbers of “Blue Card A” forms completed by representatives of each of the services that initiated the procedure between 2016 and 2021

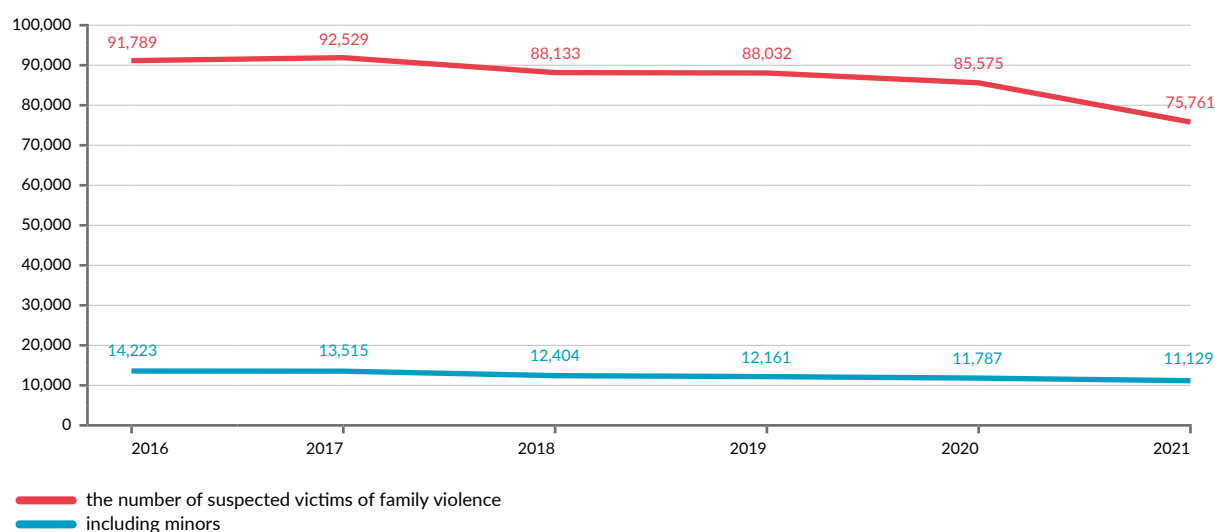
Year	2016	2017	2018	2019	2020	2021
Social services	11,789	13,667	11 177	12,083	10,065	10,907
Police	73,531	75,662	73,153	74,313	72,601	64,250
Education	5,547	4,184	4,431	4,849	5,307	3,231
Health care	607	713	623	658	1,039	1,138
Communal committees for solving alcohol abuse problems	5,736	4,081	3,927	2,813	2,369	2,566
Total	97,210	98,307	93,311	94,716	91,381	82,092

Source: MRPiPS, 2022.

Importantly, the categories of abuse reported within the Blue Card procedure, include not only physical, but also emotional and sexual abuse. Therefore, we should bear in mind that the data cited in this section refers to all categories of violence and abuse and to all kinds of interventions taken, not only those where the victims were children. At the same time, we need to remember that most of these families have children, for whom witnessing violence between the parents or caregivers is a form of emotional abuse.

In 2021 the number of suspected victims of family violence was 75,761, including 11,129 (15%) children and young people under 18. The number decreased from 2017 – by about 17% for all suspected victims, and by 22% for children. However, between the 2020 and 2021 data, there is a significantly larger decrease in the total number of persons (by 15%) than in the case of minors (by 6%). The share of boys and girls in the overall number did not change over time; it remained equal and was 5,545 (50%) and 5,584 (50%) in 2021 (Figure 1).

**Figure 1.** The number of persons, including minors, who were suspected victims of family violence between 2016 and 2021



Source: Own analysis, based on MRPiPS data of 2017–2022.

In 2021, the number of children who were removed from their families due to imminent risk to their life or health, was 1335. The figure remained more or less stable since 2016 (Table 2).

**Table 2.** The number of children removed from their families under Article 12a of the Act on Counteracting Family Violence

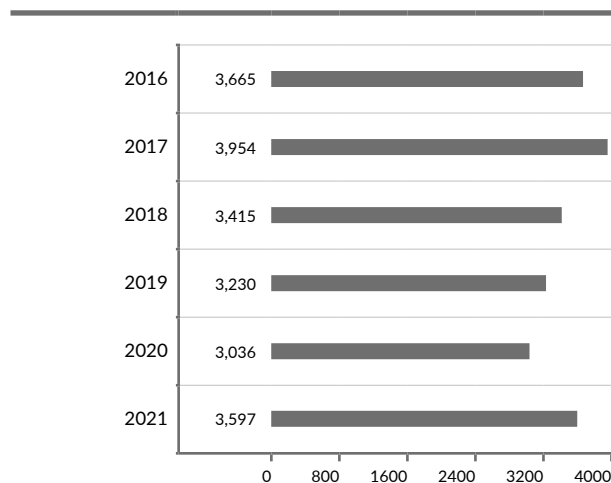
Year	2016	2017	2018	2019	2020	2021
Number of children removed by social workers	1,214	1,123	1,130	1,303	1,217	1,335

Source: MRPiPS, 2022.

Particularly drastic instances of child abuse are registered in police statistics as offences under Article 207 of the Penal Code (PC). This article concerns physical or psychological maltreatment of an immediate family member or another person being in permanent or temporary relation of dependence to the perpetrator, or a person who is helpless due to their age or mental or physical condition. Between three and nearly four thousand minors fall victim to this crime every year (Figure 2).

There are also other criminal offences that may be considered forms of physical or psychological abuse of children. These are discussed in detail in chapter *Children in legal procedures*.

**Figure 2.** The number of minor victims of the criminal offence under Article 207 § 1 of PC in 2016–2021



Source: Own analysis, based on data collected by the Ministry of Justice.

As already mentioned, cases when children are physically abused by their parents, are not easily reported to law enforcement authorities. Reporting requires a person who knows about the abuse and is willing to notify the authorities, which may be difficult when the perpetrator is the child's parent. It is particularly problematic for very young children, who do not go to kindergarten or school, and do not have regular contact with adults outside the family, who could notice that something wrong is going on in the child's home and respond to it. Young children are at a higher risk of abuse and neglect, because they need constant care. Hence the crucial role of healthcare professionals in monitoring the child's situation. They should be and often are in regular contact with young children, and are able to report suspected child abuse. However, healthcare professionals initiate just 1% of all Blue Card procedures, even though in 2020 the number of procedures started by them increased significantly (to 1,039, from 658 in the previous year; MRPiPS, 2021). Physicians have their own system for reporting cases of children whose injuries may suggest abuse: they can use the ICD-10 code T74 – Adult and child abuse, neglect and other maltreatment, confirmed – in their diagnoses. Importantly, this code includes different categories of child maltreatment: not just physical abuse, but also

psychological and sexual abuse and neglect. In Poland only 30 diagnoses with this code are reported annually; half of these cases involve girls (Table 3).

**Table 3.** The number of ICD-10: T74 codes in 2016–2020, by gender

Year	2016	2017	2018	2019	2020
Total	21	33	32	29	25
Boys	9	13	12	11	8
Girls	12	20	20	18	17

Source: Own analysis, based on data from the National Institute of Public Health: National Institute of Hygiene.

These statistics do not reflect the actual prevalence of the problem, as the code referring to the cause (in this case, child maltreatment), is an optional addition to the basic code describing the immediate reason for seeking medical care, i.e., an injury of bone fracture.

## Data from social surveys

A much larger scale of child abuse than is suggested by official statistics, emerges from surveys conducted both among children (asking about their personal experiences) and among adults (retrospective studies focused on adult respondents' own childhood experiences or surveys asking parents about their use of violence against their children).

When it comes to children's experiences of abuse in Poland, the scale of the problem was examined by two studies conducted in 2017 and 2018 by the Empowering Children Foundation (ECF).

The first one was a retrospective survey conducted on a sample of university students at five universities in different parts of Poland. The study used the Adverse Childhood Experiences (ACEs) Questionnaire and its methodology focused on analysing the relationship between ACEs (including child abuse) and health outcomes. This kind of study is conducted on a sample of adults, asking them about their childhood experiences, to be able to observe health outcomes, which may often develop in adulthood.

The other survey was conducted in 2018 on a sample of children and adolescents aged 11–17. Thus, it is more



up-to-date than the first one, as it reflects the situation in 2018, rather than at least a few years earlier, as was the case with the retrospective survey. The methodology of the 2018 study was based on the Juvenile Victimization Questionnaire (JVQ), which focuses on examining the prevalence of different categories of child abuse and maltreatment.

The results of both studies with respect to physical and emotional abuse and neglect by adults in close relationships, are presented in Table 4. As can be easily noticed, there are considerable differences between the two studies. For example, the 2017 survey of university students found that 47% of the respondents had experienced physical abuse, whereas in the 2018 survey of children the figure was 22%. These discrepancies are largely accounted by differences in methodology: different questionnaires, different questions, different numbers of questions (the survey of university students used many more questions, so more situations could qualify as abuse), different populations. It does not mean we do not know the actual scale of abuse, but rather demonstrates how important it is to know exactly what we are asking about. Each of the two studies answers a slightly different question.

For example, according to the 2018 *National Survey of Child Maltreatment*, 41% of children aged 11–17 experienced abuse by a familiar adult in their lifetime, and 27% were victimized in the year preceding the study. Physical abuse by a close adult was experienced by one third of the respondents (33%), and emotional abuse – by one fifth (20%). In 2018 physical abuse by a close adult was measured with two questions: one involving hitting, kicking or another form of physical violence, and the other asked about spanking. Physical abuse was defined as being hit or kicked any time in their lifetime (similar to other questions), or getting spanked at least a few times a year (the respondents who were spanked once a year or less frequently, were excluded from the analyses). One fifth of the children and adolescents surveyed (19%) were ever hit by an adult, and 10% experienced this form of abuse in the year preceding the study. Nearly half of the respondents (48%) were spanked in their lifetime, although the figure was only 4% in the year preceding the study. When it

comes to the frequency of spanking, 24% reported they were spanked regularly, i.e. at least a few times a year. The same proportion of children (24%) were spanked once a year or less frequently (Włodarczyk et al., 2018).

The 2017 survey of university students found that nearly half of the respondents (45.93%) had experienced childhood physical abuse by their parents or caregivers. Among the respondents, 16.68% were pushed, grabbed, shoved, slapped, or thrown something at by their parents/caregivers. A small proportion of the respondents (5.11%) were hit so hard that they had marks or injuries. One of the most common types of abuse experienced by the respondents was corporal punishment in the form of spanking: 41.26% of them reported they had been spanked at least a few times a year (Makaruk et al., 2018).

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*My parents criticise me all the time, they point out every mistake I make. They snipe at me and are mean to me. Maybe I'm oversensitive, but I cry at night and I can't calm down for hours. I feel good at school, I can be myself there. How can I learn to ignore my parents' mean words and become resistant to them?*

*15-year-old girl*

*A quote from phone calls and emails to 116 111 Helpline for Children and Young People*

**Table 4.** Findings from social surveys concerning child abuse and neglect, and witnessing domestic violence

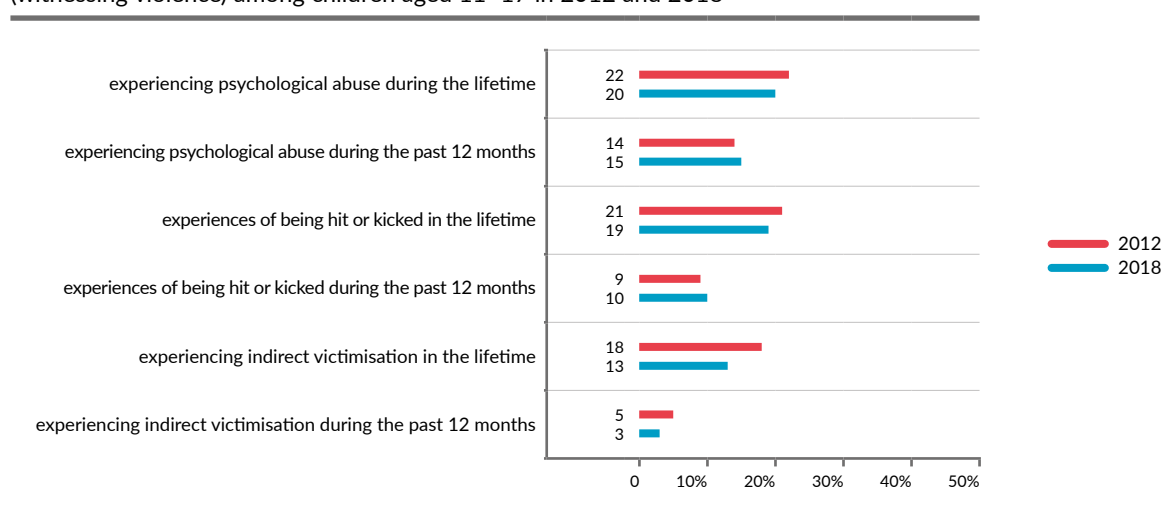
	Year	Study	Method	Sample	Questions	%
Physical abuse	2017	Adverse childhood experiences and related health risk behaviours among Polish university students	PAPI	1,722 students (18–25 y.o.)	<i>During the first 18 years of your life, did your parent, stepparent or another adult living in your home push you, grab, shove, slap you, or throw things at you? (rarely, sometimes, often, very often); or hit you so hard that you had marks or were injured? (rarely, sometimes, often, very often); or: How often were you spanked? (a few times a year; many times a year; at least once a week)</i>	<b>46</b>
	2018	National Survey of the Prevalence and Determinants of Child Maltreatment	(Audio) CASI	1,155 children and adolescents (11–17 y.o.)	<i>At any time in your life, did any grown-up family member or another known adult hit you, kick you or physically hurt you in any other way? (yes); or: How often are you / were you spanked? (a few times a year, a few times a month, at least once a week)</i>	<b>22</b>
Psychological/emotional abuse	2017	Adverse childhood experiences and related health risk behaviours among Polish university students	PAPI	1,722 students (18–25 y.o.)	<i>People in your family called you things like “lazy” or “ugly”. (sometimes, often, very often); or: People in your family said hurtful or insulting things to you. (sometimes, often, very often); or: You believe you were emotionally abused. (sometimes, often, very often); or: Did your parent, stepparent, or adult living in your home swear at you, insult you, or put you down? (sometimes, often, very often); or Act in a way that made you afraid that you might be physically hurt? (sometimes, often, very often)</i>	<b>42</b>
	2018	National Survey of the Prevalence and Determinants of Child Maltreatment	(Audio) CASI	1,155 children and adolescents (11–17 y.o.)	<i>At any time in your life, did any grown-up you know ever call you names, say mean things about you, or say they don’t want you? (Yes)</i>	<b>20</b>
Witnessing domestic violence	2017	Adverse childhood experiences and related health risk behaviours among Polish university students	PAPI	1,722 students (18–25 y.o.)	<i>Did your parent/caregiver do any of these things to the other parent/caregiver: Push, grab, slap or throw something at them? (sometimes, often, very often); or: Kick, bite, hit them with a fist, or hit them with something hard? (sometimes, often, very often); or: Repeatedly hit them over at least a few minutes? (sometimes, often, very often); or: Threaten them with a knife or gun, or use a knife or gun to hurt them? (sometimes, often, very often)</i>	<b>8</b>
	2018	National Survey of the Prevalence and Determinants of Child Maltreatment	(Audio) CASI	1,155 children and adolescents (11–17 y.o.)	<i>At any time in your life, did you see one of your parents/caregivers get hit by the other parent/caregiver? (Yes); or: At any time in your life, did you see you parent/caregiver hit or beat your siblings or other children in the family (e.g., cousins), not including spanking on the bottom? (Yes)</i>	<b>13</b>
Physical neglect	2017	Adverse childhood experiences and related health risk behaviours among Polish university students	PAPI	1,722 students (18–25 y.o.)	<i>You were hungry and you didn’t have enough to eat. (sometimes, often, very often); or: You knew there was someone to take care of you and protect you. (never, rarely); or: Your parents were too drunk or high to take care of the family. (sometimes, often, very often); or: You had to wear dirty clothes. (sometimes, often, very often); or: There was someone to take you to the doctor if you needed it. (never, rarely)</i>	<b>12</b>
	2018	National Survey of the Prevalence and Determinants of Child Maltreatment	(Audio) CASI	1,155 children and adolescents (21–17 y.o.)	<i>When you were under 12, did you ever come to school wearing dirty clothes, because you had no clean ones to put on? (Yes); or: When you were under 12, did it ever happen that no one looked after you when you were sick? (Yes)</i>	<b>6</b>
Emotional neglect	2017	Adverse childhood experiences and related health risk behaviours among Polish university students	PAPI	1,722 students (18–25 y.o.)	<i>There was someone in your family who helped you feel important or special. (never, rarely); or: You thought your parents wished you had never been born. (sometimes, often, very often); or: People in your family looked out for each other. (never, rarely); or: You felt that someone in your family hated you. (sometimes, often, very often); or: People in your family felt close to each other (never, rarely); or: Your family was a source of strength and support. (never, rarely); or: You felt loved. (never, rarely)</i>	<b>25</b>
	2018	National Survey of the Prevalence and Determinants of Child Maltreatment	(Audio) CASI	1,155 children and adolescents (11–17 y.o.)	<i>You have someone you can turn to in times of difficulty. (I have no such person)</i>	<b>7</b>

Source: Own analysis, based on: Makaruk et al., 2018; Włodarczyk et al., 2018.



One important advantage of social surveys is that they can be repeated (using the same methodology). As such, they enable the observation of trends and social change, although the change process is relatively slow. The ECF survey of 2018 was the second edition of the study (the first one was conducted in 2012). Thus, we can compare the results of the two editions (Figure 3).

**Figure 3.** Experiences of psychological abuse, physical abuse, and indirect victimisation (witnessing violence) among children aged 11–17 in 2012 and 2018

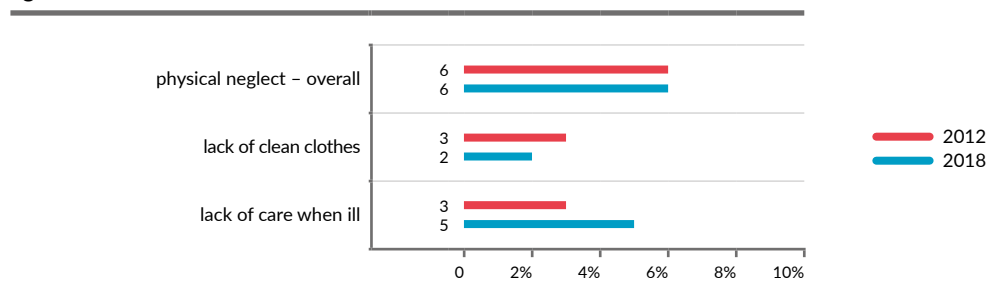


Source: Own analysis, based on: Szredzińska & Włodarczyk, 2019.

The results concerning physical and psychological abuse in 2018 are not significantly different than those obtained in the 2012 edition of the study, when 22% of the respondents reported being psychologically abused in their lifetime and 15% – during 12 months prior to the survey (Wójcik, 2013). In contrast to physical abuse, the trend for psychological abuse did not change when it comes to gender. Both in 2012 and in 2018 girls were more likely than boys to experience this type of abuse. The percentage of adolescents who reported experiences of indirect victimisation any time in their lifetime decreased: from 18% in 2012 to 13% in 2018. Similarly, a slight decrease was found with respect to indirect victimisation during 12 months preceding the study (Szredzińska & Włodarczyk, 2019).

When it comes to neglect, there was a slight increase in the percentage of adolescents who were not provided with care when they were ill. In 2012 such experiences were reported by 3% of the respondents. However, the overall proportion of children and young people who had any of those experiences, did not change (Szredzińska & Włodarczyk, 2019; Figure 4).

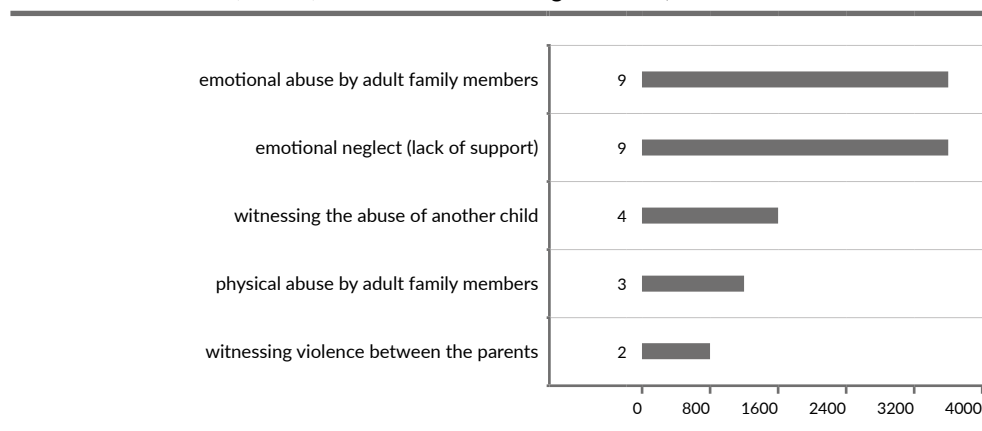
**Figure 4.** Experiences of neglect among children and adolescents aged 11–17 in 2012 and 2018



Source: Own analysis, based on: Szredzińska & Włodarczyk, 2019.

More recent findings concerning children's and adolescents' experiences of abuse and neglect by their loved ones come from 2020, when the ECF asked questions similar to those used in the 2012 and 2018 studies, but only with respect to the initial period of the COVID-19 pandemics – from mid-March to the end of June 2020. Additionally, the survey used a different method (CAWI) and was conducted among adolescents aged 13–17, so it cannot be compared with the previous study waves. Importantly, however, it demonstrated that in the initial period of the pandemics, when leaving home and contacts with people outside the close family context were severely restricted, and schools moved their classes online, children still experienced abuse. It was mostly psychological abuse by adult family members (9%), but just as many children can be regarded as emotionally neglected: although they were at home with their family, they had no one to talk to about their problems or difficulties (Figure 5).

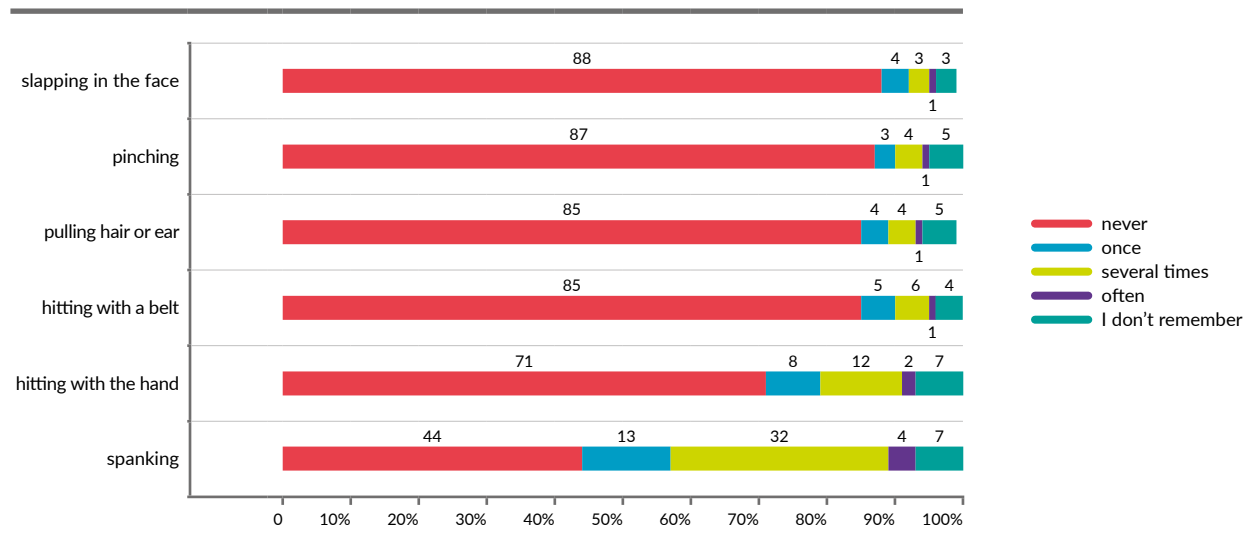
**Figure 5.** Experiences of physical abuse, psychological abuse, neglect, and witnessing domestic violence in the initial period of the COVID-19 pandemics (from mid-March to the end of June 2020; CAWI, N = 500 adolescents aged 13–17)



Source: Own analysis, based on: Szredzińska & Włodarczyk, 2021.

The prevalence of child abuse can be examined not only by surveying victims of such behaviours, but also by asking questions to (potential) abusers, i.e., parents. Based on a CAWI survey conducted for the ECF on a sample of Polish parents, we know how often they report using physical violence against their children in the form of corporal punishment. The vast majority of parents in Poland say they have never slapped their children in the face, pinched them, pulled their hair, or hit them with a belt. Only 1% of the respondents admitted they often used those punishments. More parents admit they hit their children with the hand – 2% do it often and 22% has done it at least once. The largest proportion of parents report they use corporal punishment in the form of spanking – half of the respondents (49%) have spanked their child at least once. In this group, 32% have done it a few times, and 4% do it often (Figure 6).

**Figure 6.** Parents' answers to the question: How often have you used the following measures to discipline your child? N = 911, CAWI, 2022



Source: own analysis, based on Makaruk and Drabarek, 2022.

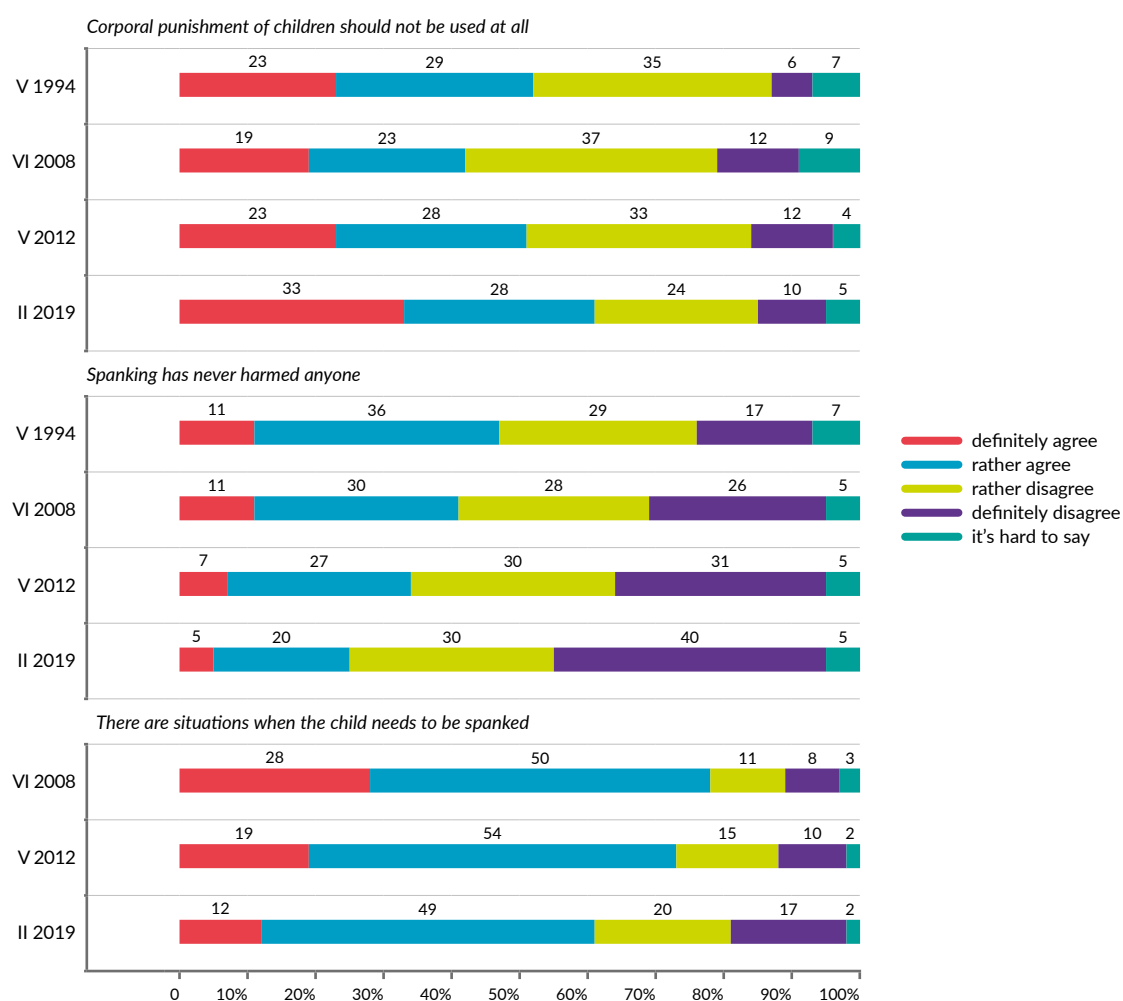
These results can be summarised as follows: only a small proportion of parents use corporal punishment to discipline their children, except for spanking, which is still used by half of Polish parents. Many people do not regard spanking as abuse or corporal punishment, so the Polish society continues to show quite high acceptance of this kind of abusive behaviour.

## Societal attitudes towards corporal punishment

In 2010 an amendment was passed to the Polish Act on Counteracting Family Violence, which added Article 96 to the Family and Guardianship Code, prohibiting parents and caregivers from using corporal punishment of children. For many years social campaigns have also been carried out to emphasise the negative consequences of corporal punishment, including spanking. Metanalyses of studies conducted over many years, have clearly demonstrated that corporal punishment – especially when used regularly, as the main disciplinary measure – may have as negative consequences for children's development and wellbeing as more severe forms of abuse (Durrant, 2012; Gershoff, 2002; Gershoff

et al., 2018; Paolucci & Violato, 2004). All those efforts have contributed to a gradual decrease in the acceptance of corporal punishment of children in recent years. The longest term research into the subject has been conducted by the Public Opinion Research Centre (CBOS), which has been asking the same questions since the 1990s, which makes it possible to observe social change. In 1994, 51% of Poles thought corporal punishment of children should not be used at all; by 2019 the figure grew to 61%. A similar trend can be seen for all the questions about corporal punishment. Although it is a positive tendency, the majority of Poles (61%) still believe that “there are situations when the child needs to be spanked” (Figure 7).

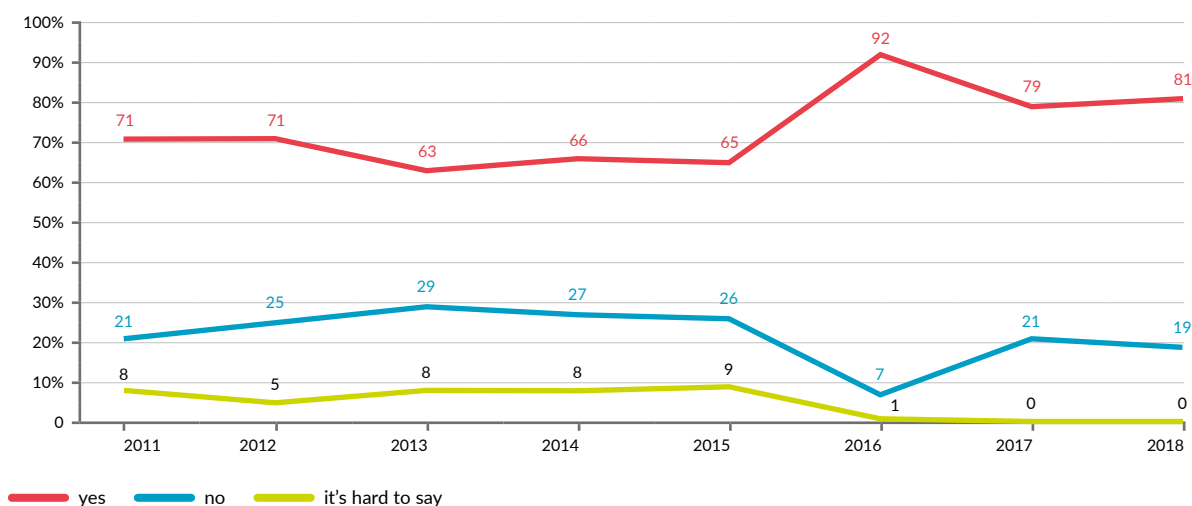
**Figure 7.** Answers to the question: “Do you agree or disagree with the following statements?”, among adult Poles in 1994, 2008, 2012, and 2019



Source: CBOS, 2019, p. 2.

Similar trends can be seen in long-term research by Marek Michalak (the Ombudsman for Children) and Prof. Ewa Jarosz. Figure 8 shows the respondents' answers to the question about their perception of corporal punishment as an effective discipline measure. Between 2011 and 2018 the proportion of people disapproving of this parenting method increased by 10% (from 21% to 31%). At the same time, the percentage of those who approved beating children as a discipline technique did not really change (21% and 19%, respectively), whereas the percentage of hesitant respondents (those choosing the "hard to say" answer) decreased from 8% to 0%.

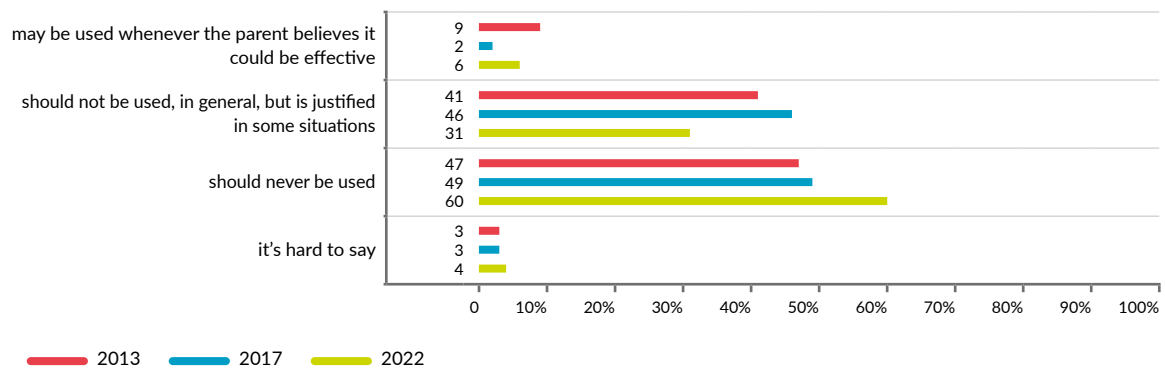
**Figure 8.** Answers to the question: "Do you agree with the following statement: In some situations beating a child is the most effective discipline measure?", in 2011–2018



Source: Own analysis, based on: Jarosz, 2018.

Many years of research carried out by the ECF have shown a similar trend: the percentage of opponents of corporal punishment as a parenting method, regardless of the circumstances, has been growing (from 47% in 2012 to 60% in 2022), while the proportion of those who justify its use in some situations is decreasing (from 41% in 2012 to 31% in 2022). The percentage of respondents who believe parents have the right to beat their children to discipline them, was 9% in 2012 and 6% in 2022 (Figure 9).

**Figure 9.** Adult Poles' attitudes toward corporal punishment of children in 2012, 2017, and 2022, based on their answers to the question: "Do you think beating children as a punishment is a discipline method which..."



Source: Own analysis, based on: Włodarczyk, 2017, and Makaruk & Drabarek, 2022.

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*I never got any support from my parents. The punishments they used affected my mental health: I have depression and suicidal thought, and I cut myself. When I was a little boy, my parents sometimes didn't let me eat or use the toilet as punishment. I was called names and beaten by them.*

16-year-old boy

A quote from phone calls and emails to 116 111 Helpline for Children and Young People

Women are significantly more likely than men to think beating children as a punishment should never be used, whereas men are more likely than women to believe that corporal punishment should not be used, in general, but is justified in some situations. Respondents over 60 are significantly more likely to say that beating children as a punishment can be used whenever parents consider it effective (Makaruk & Drabarek, 2022).

## Consequences of child abuse

The relationship between ACEs and health behaviours was examined by a study conducted in the US on a sample of 13,494 respondents. The results demonstrated that childhood abuse and family dysfunction contributed to health problems in adulthood. That survey and many other studies found a strong relationship between ACEs and smoking, substance abuse, depression, suicidal attempts, and violence perpetration (Bellis et al., 2014b; Felitti et al., 1998; WHO, 2006).

The association between health-risky behaviours and adverse childhood experiences is most probably mediated by ACEs' effect on the developing mind. Early traumas may lead to structural and functional changes in the brain and in its stress systems. This, in turn, affects such functions as emotional regulation or fear response, which may increase these individuals' tendency to engage in risky behaviours later in life (Anda et al., 2006).

ACEs have been found to be associated with changes in the nervous, hormonal, and immune systems. Research suggests that stressful childhood experiences may lead to significant biological responses, and consequently have an effect on physiological stress responses in adulthood (Danese & McEwen, 2012).



A 2017 survey, conducted by the ECF on a sample of Polish university students, found a relationship between sexual abuse and risky health behaviours, such as smoking, early (under the age of 15) smoking initiation, alcohol abuse, risky drinking, using psychoactive substances, early (under the age of 16) sexual initiation, having more than three sex partners, self-injury, low physical activity, missing work or university classes due to psychological malaise, missing work or university classes due to illness, and the lack of close relationships (Makaruk i in., 2018).

Among all the relationships examined, the strongest were the ones between emotional abuse and neglect and suicide attempts (OR = 7.92 and 10.77, respectively), and self-injury (OR = 3.85 and 3.92, respectively). Respondents who, as children, were physically neglected, witnessed domestic violence, or were physically abused by close adults, were also more likely to attempt suicide and engage in self-injury (Makaruk et al., 2018; Table 5).

**Table 5.** The relationship between abuse, neglect and witnessing violence, and increased occurrence of suicide attempts and self-injury, 2017

	Suicide attempts	Self-injury
Emotional neglect	11 ×	4 ×
Emotional abuse	8 ×	4 ×
Physical neglect	3 ×	2 ×
Witnessing domestic violence	3 ×	2 ×
Physical abuse	2 ×	2 ×

Source: Own analysis, based on: Makaruk et al., 2018.

Additionally, the study found the following relationships between ACEs and health-harming behaviours:

- physical abuse → risky drinking and substance use,
- emotional abuse → missing work or university classes due to psychological malaise,
- emotional neglect → missing work or university classes due to psychological malaise,
- witnessing domestic violence → early smoking initiation, more sex partners, early sexual initiation, missing work or university classes due to malaise, substance use (Makaruk et al., 2018).

## Conclusion

The World Health Organization offers a four-step approach to public health issues, such as child maltreatment (WHO, 2007, p. 23):

- **Step 1:** Collecting data on the magnitude, characteristics, extent and consequences of the problem at the local, national and international levels.
- **Step 2:** Identifying causes of the problem, as well as factors increasing or decreasing individual susceptibility to the problem, and examining how these factors might be modified.
- **Step 3:** Designing, implementing, monitoring and evaluating interventions aimed at preventing the problem, based on the information gathered in steps 1 and 2.

- **Step 4:** Disseminating information on the effectiveness of interventions; implementing effective interventions on a larger scale; and evaluating the cost-effectiveness of larger-scale implementation.

As you can see, collecting appropriate data is of crucial importance in the process. In Poland available official data provide very limited information about the prevalence of child abuse, let alone its characteristics, scope or consequences. Things are slightly better when it comes to social surveys. We should remember, however, that the ultimate goal of collecting and analysing data is to develop effective interventions and evaluate the existing ones. Only in this way we can systematically protect children from abuse and neglect.

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