

## CHILD ABUSE IN IGBOLAND OF NIGERIA: CONTEXT AND CHARACTERISTICS

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**Abstract:** *Igboland is located in south-eastern Nigeria and the inhabitants are known for the love they have for children. These children depend on their parents, teachers and extended families for both their physical and psychological well-being. The interaction that the children have with their parents and others influences their physical, emotional, social and intellectual development. Some parents with the intention of teaching values, beliefs, attitudes end up abusing them because of the type of disciplinary methods that they apply. In Igboland, some parents and those who are in charge of children find it hard to detect and identify child abuse and its characteristics. Most of the children who are abused in Igboland display some of the characteristics that are discussed in this work. This paper will help parents and the society to watch for red flags.*

**Key words:** *child abuse, characteristics, Igboland.*

### 1. Introduction

The Igbo ethnic group is located in the south-eastern part of Nigeria. The Igbo people are divided into clans. The different clans make up the towns, while each town consist of villages. The basic family structure includes the nuclear family and the extended family members. The family is the foundation of Igbo society and it plays a vital role in the upbringing of a child. The family nurtures the child so that he or she raise to be psychologically balanced. In most of the Igbo families, there are norms which guide them and sometimes these norms constitute part of the problem of child abuse in Igboland. Parents, adults and caregivers sometimes exceed the borderline of discipline which affects the psychological well-being of the child. Nevertheless, the point remains that inadequate child rearing in Igboland often lead to child abuse. It is prevalent in Igboland and remains a neglected issue (Ayinmode & Adegunoye, 2011). Nowadays people are beginning to speak out on the issue.

Child abuse and child neglect as major topics have received a lot of attention both from the government and non-governmental organisation. For a relatively long time a good number of researchers and psychologists have been trying to understand the

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origin of child abuse, causes of child abuse and everything that surrounds it. "Since the 1960s, several major theories and frameworks have been used to explain child maltreatment, such as psychodynamic/psychopathology framework, social learning theory, attachment theory, ecological models, strengths and resilience frameworks, and social information processing theory" (Schelbe & Geiger, 2017, p. 15).

Child abuse remains a persistent problem in Igboland of Nigeria and all over the world. Child abuse affects not only the child and the immediate family, but equally affects the community and society. Even though, usually, the abuse occurs within the family, it directly or indirectly affects the society. For that reason, concerns about the seriousness of the social problem have been expressed by many authors and psychologists. Urie Bronfenbrenner did not write specifically on child abuse, but his theory of ecological systems highlights the importance of factors such as the social network. "An ecological perspective allows for a multidimensional approach to understand parenting, child maltreatment, and intergenerational transmission of child maltreatment and is most appropriate in guiding study's research questions, methodology, and analysis" (Schelbe & Geiger, 2017, p. 21).

The theory of Bronfenbrenner gives a framework for a better understanding of children's development, recognises the environmental impact on the child and helps to understand the problem of child abuse. The child interacts with different people in different contexts. In Igboland for example, the interactions are with the family, neighbourhood, school, community, culture, society and all these interactions have psychological influences on the child. Thus, when children are abused, they tend to display certain behaviours and reactions. The few characteristics presented in this paper will help some individuals, especially the parents, in identifying when the child exhibit some strange behaviours.

## **2. Characteristics of abused child**

Abused children exhibit different characteristics in different occasions and circumstances, depending on the type of abuse and the abusive environment. As we know very well, child abuse occurs in different areas and in different parts of Igboland. Rachel Calam who works at the department of clinical psychology, Royal Manchester children's hospital, Pendelbury and Cristina Franchi who works at social service department, London Borough of Waltham Forest listed nine characteristics that has been observed by some psychologists in a group of abused children. These characteristics are as follows: "impaired capacity to enjoy life, psychiatric symptoms e.g. enuresis, tantrums, hyperactivity, bizarre behaviour, low self- esteem, school learning problems, withdrawals, opposition, hypervigilance, compulsivity and pseudo-mature behaviour" (Calam & Franchi, 1987). This paper will not approach the psychiatric symptoms. We will mainly present the individual characteristics that are common to the abused children in Igboland.

## 2.1. Aggression

The word aggression is among the most common words that are used by psychology students in various universities. Again, outside the university environment, people use this word often. However, the question remains, what is the meaning of aggression? DSM- 5 classifies aggression under the intermittent explosive disorder. "A. Recurrent behavioural outbursts representing a failure to control aggressive impulses as manifested by either of the following: 1. Verbal aggression (e.g., temper tantrums, tirades, verbal arguments or fights) or physical aggression toward property, animal, or other individuals, occurring twice weekly, on a period of 3 months. The physical aggression does not result in damage or destruction of property and does not result in physical injury to animals or other individuals. 2. Three behavioural outbursts involving damage or destruction of property and/or physical assault involving physical injury against or other individuals occurring within a 12-month period. B. The magnitude of aggressiveness expressed during the recurrent outbursts is grossly out of proportion to the provocation or to any precipitating psychosocial stressors" (American Psychiatric Association, 2013, p. 466).

This definition points to the fact that aggression is an essential component of human behaviour. Again, the history of child abuse shows that abused children often exhibit aggressive behaviours. In fact, "Child abuse has also been linked to aggressive behaviour later in life, especially among children who have intrinsic vulnerabilities, such as cognitive, psychiatric, and neurological impairment. Researches show that being abused or witnessing abused is strongly related to highly violent behavioural patterns" (Bordens & Horowitz, 2012, p. 386).

Some psychologists from the Department of psychiatry, University of Connecticut Health Centre consider that aggressive behaviour occurs in two distinct functional subtypes. Reactive aggression has its theoretical roots in the frustration- aggression model, which states that reactive aggression is an angry, defensive response to perceived threat, frustration, or provocation. Proactive aggression is deliberate coercive behaviour that is controlled by external reinforcements and is used as a means of obtaining a desired goal, consistent with social learning (Ford, Fraleigh, & Connor, 2010). For a better understanding of the above definitions, let us give an example for each of them. "An example of a reactive aggression statement is, when this child has been teased or threatened, he or she gets angry easily and strikes back. An example of proactive aggression statement is when the child uses force in order to dominate other kids" (Ford et al., 2010).

The above stated aspects tend to emphasise that abused children have a high risk of aggression. Again, "some abused children have learned, presumably through early experiences of parental modelling of aggression and use of ineffective punishment, to use aggressive behaviour as a legitimate or predominant mean of resolving interpersonal conflicts. As a result, they are more physically and verbally aggressive towards their peers than non-abused and more likely to respond with anger and aggression both to friendly overtures from peers to signs of distress to other children"

(Wolfe, 1999, p. 50). The bottom line is that abused children tend to exhibit aggressive behaviour directed towards their family members, peers and friends.

## **2.2. Low self-esteem**

Child abuse is associated with low self-esteem. Actually, low self-esteem is one of the main characteristics manifested by abused children. Low self-esteem is often classified under the persistent depressive disorder. Let's not forget that self-esteem plays a vital role in the development of a child. "Low self-esteem is a series of ambivalent feelings towards the self. Ambivalent means both positive and negative. Low self-esteem is actually a form of self-hate, self-disgust, self-resentment, self-neglect, and is very self-defeating" (Gerber, 2001, p. 31). Low self-esteem makes children to see their painful situation in a more negative way.

When one look closely to the problem of low self-esteem, we find out that part of the problem is that the abused children feel that they are not loved by their parent, caregivers or adults living with them and, as such, that justifies the reason for their abuse. Again, the type of abuse contributes to the severity with which the child evaluates him or herself. For instance, "sexually abused children frequently have extremely low self-esteem. They may feel self-worthless, valued only as sexual objects because of their experience. Some children describe themselves as feeling invisible because they have gone unnoticed and unprotected from the sexual abuse, particularly if the abuse was lengthy and ongoing. The child with low self-esteem frequently feels unworthy and undeserving of positive attention and affection" (Wickham & West, 2002, p. 102).

In Igboiland, children that are abused sexually seems to have low self-esteem and they have poor socialization skills. Likewise, children with other types of child abuse have the same problem. "Poor socialization skills are often the result of living in dysfunctional families where children are not allowed to have healthier relationships outside of their own family cycle. The frequently, unsatisfactory experiences which may result when victims attempts to make friends among age-mates and to initiate outside social relationships further tend to decrease self-esteem" (Hagood, 2000, p. 81). The same applies to all types of abuse because it involves human relationship.

## **2.3. Withdrawal**

It is of paramount importance to state that withdrawal refers to one of the main reactions that abused child display. Child withdrawal from activities in the family, school or among peers is one of the characteristics that victims of abuse manifest. He or she withdraws from the crowd or avoids participating in any activity. The idea is that if he or she makes a mistake or breaks the rules of the games, it may occur further abuses. The withdrawal can be emotionally or socially. "Social withdrawal, therefore, can be construed as isolating oneself from the peer group, whereas social isolation indicates isolation by the peer group" (Marsh & Barkley, 2003, p. 376).

The type of abuse contributes on how a child withdraws from his or her usual activities

in the family or elsewhere. Some parents who abuse their children physically and psychologically use at the same time authoritarian style of parenting. This leads to withdrawal and shyness in children and creates other behavioural problems for the children. Actually, "they may withdraw from previously enjoyable activities such as playing with others, hobbies and school works. Their negative beliefs about themselves can result in depressing thoughts and behaviours that also result in other children withdrawing from them. Under these circumstances a child may even switch peers group in order to identify with other children who do not think positively about themselves" (Ellsworth, 2007, p. 106).

The withdrawal of the abused child often happens in different forms. Some abused children withdraw from physical contacts, others, especially those that were sexually abused, withdraw from close relationships with adults and children. William B. Carey, a clinical professor of paediatrics sustains that "Child abuse and neglect serves an example of the many factors related to social withdrawal and isolation. Both social withdrawal and isolation and maltreatment are complex, multiple determined phenomena. Environmental factors, child temperament, and parental knowledge and behaviours all play a role in the occurrence and the developmental of both abuse and neglect. As is the situation for social withdrawal and anxiety, combination of multiple elements rather than any single, isolated factor, are important" (Carey, Crocker, Coleman, Elias & Feldman, 2009, p. 401).

The above points highlight the fact that child withdrawal from usual activities is a part of the characteristics that victims of child abuse exhibit especially in Igboland of Nigeria. Most of the time, these children feel that the best option is to withdraw from everything and to avoid participation in any activity. Unfortunately, this would only worsen the matter for them and prevents their psychological development. Therefore, when a child is abused, he or she tends to withdraw from the settings. Withdrawal from family, friends, peers, classmates, school, church, activities and places previously enjoyed or sources of pleasure, is often accompanied with cries and claimings that he or she is fine.

#### **2.4. Hypervigilance**

Hypervigilance is defined as the act of being keenly watchful in order to detect danger. The state of hypervigilance includes increased sensory activity and an exaggerated intensity of feelings and behaviours required to detect threats. A hypervigilant individual is likely to continuously scan the environment for continuous threats. From a psychological perspective, the hypervigilance is specifically targeted at identifying possible emotional threats. In other words, a hypervigilant individual is usually always on the lookout for any interaction that might elicit an uncomfortable psychological state (Kelly, 2016).

Child abuse in general and child sexual abuse, in particular, is a difficult situation which is always difficult for a child to handle alone. Children who are abused in any way have a complex of confusion. For those sexually abused, apart from the shame and guilt, they feel dissociated from the body. "Children who have been sexually abused almost always experience a sense of chronic anxiety and fear. Frequently, the sexual abused child

becomes hypervigilant to cope with and survive the overpowering nature of the experience. The child becomes hyperaware of the dangers in the environment, even at times when they are not present” (Wickham & West, 2002, p. 116). At this point, let us not forget that the child is trying to reconcile a lot of things which seems to be irreconcilable, to protect oneself and avoid further abuse.

Krill (2005), affirms that “depending on the type of abuse suffered, hyper-vigilance can include some of the following emotions and behaviours: being edgy, being worried, a nervous feeling, feeling like someone is watching you, feeling like something bad is about to happen, feeling like you do not know what to expect from other people, especially the abuser, needing to check over your shoulder or behind you frequently, needing to check that doors and windows are locked, needing to know where the people you care are at all the time, feeling very uncomfortable with certain behaviours, like hugging, touching, or sex, and having a difficult time falling asleep; keeping one eye open” (Krill, 2005, p. 32). The child who is abused by the parent or the caregiver has no place to run to and, worse, cannot cope with the abuse.

Abuse is a negative phenomenon and is not something that a child should cope and experience. Hence, the abused children always think of what to do in order to avoid future abuse. “Hypervigilance was probably a result of the continual activation of their fight- or- flight system in their bodies due to chronic and unpredictable abuse. They were in a constant state of stress response activated by the possibility of danger. When they perceive an event as potential dangerous - such as proximity to a parent who had a history of inflicting pain - their brain signals the hypothalamus to release cortisol, which in turn triggered the release of adrenaline into their blood stream. As a result, they go on high alert, with heightened and focused attention to the environmental cues that signals danger” (Baker & Schneiderman, 2015, p. 32).

## **2.5. Flashback**

DSM-5 talks about flashback under the category of posttraumatic stress disorder. It is sustained that dissociative reactions entail that the child may re-enact the event in play (American Psychiatric Association, 2013). “In psychological terms, a flashback is an involuntary recurrent memory or a psychological phenomenon in which an individual has a sudden powerful, re-experience of a past experience or elements of a past experience. The experience can be happy, sad, exciting, or any other emotion. The term is used when the memory is re-called involuntarily and/or when it is so tense that the person relives the experience, unable to recognise it as a memory, and not something that is happening in real time” (Cuffy, 2011, p. 30).

These definitions stress the fact that flashbacks are the personal experiences of these abused children which pops into their awareness and disrupts their usual daily activities. “Flashbacks are believed to be a consequence of traumatic memory” (Muscar & Josefowitz, 1996, p. 179).

Children who are victims of abuse sometimes experience flashback of their abuse episodes and it affects them deeply. When flashback happens to abused children, they continue to struggle within themselves to overcome this nightmare. This affects their

mood during the day and sleep at night. Flashbacks determine the child to avoid certain places and persons so as not to remember the ugly episode. Flashback makes the child to re-experience the abuse and it affects the whole being. "Research on the area of post-traumatic stress disorder indicates that when an individual is confronted with their original trauma psychophysiological and neuroendocrine responses occur, indicating that they have been conditioned to respond as if they were re-experiencing the event. In other words, the body continues to act as if it were being traumatised even though the original trauma may have occurred many years previously" (Garratt, 2011, p. 26). Flashback makes victims of child abuse to be fearful, distress, hopeless and confused.

## **2.6. Suicidal thoughts**

Explaining the concept of suicide will help us in understand the idea of suicidal thoughts. It is not always easy to define suicide. For example, "most people would agree that intentionally drinking large quantities of alcohol or injecting or smoking a bad batch of heroin or crack could result in death. Should all drug overdoses and fatal cases of alcohol poisoning be considered suicide? Just about everyone knows that heroin, crack and alcohol are unhealthy, and that consummation of excessive amounts leads to death. An important distinction, though, is whether they intended to die" (Tartaro & Lester, 2009).

However, for a better clarification we need to ask an important question. Is suicide "the act of killing oneself deliberately"? (Colman, 2009). The word "deliberately" helps us in understanding the act. There are certain factors which needs to be considered in the definition: "killing oneself is the primary intention, the individual is not following an order from a superior, and lastly, the individual is not trying to achieve some kind of status after death" (White, 2011, p. 15). For many abused children especially in Igboland, the feeling of being violated, defiled makes them to have suicidal thoughts. They often have suicidal thoughts and feels frustrated, helpless or hopeless. They tend to become extremely pessimistic when their repeated attempts to solve problems appear to have failed. They may verbalize feeling like a burden to others. Abused children that have suicidal thoughts often have a style of thinking that can be described as tunnel vision, leading them to believe that suicide is the only solution to their problem (Cutler, 2014).

As above-mentioned, in most cases the abused children who have suicidal thoughts feel isolated, helpless, depressed, hopeless, demoralized, frustrated, and angry. This feeling of worthlessness and disappointment with self and life often ushers in the thoughts of ending one's life. We may not be wrong to state that some of them feel that there is no end to the problem they are experiencing. Their mode of thinking about life and of living could be summarised in these words: I have nothing to live for. These children display some signs and symptoms through their words and actions, but unfortunately the people around them do not pay much attention to them. Abused children often verbalise their suicidal thoughts in statement such as "I wish I were dead", "I would be better off dead", or "I have nothing to live for" (Mueser & Gingerich, 2006). We will not be wrong to support, once again, the idea

that suicidal thoughts and suicide attempts are more frequent in children who were sexually abused, as some authors suggested (Altun, 2018).

### **2.7. Struggle with intimacy**

Our working definition for the concept of intimacy “is an interpersonal repertoire that involves the disclosure of one’s innermost thoughts and feelings, and results in a sense of connection, attachment and close relationship with another” (Tsai et al., 2009, p. 131). The topic of intimacy is not relevant only in the case of the abused children. It is the problem that many people are facing. Nowadays, the increasing number of divorce cases, separated families, broken relationships will give us an idea of the intimacy difficulties with which many people are struggling in order to create a mature relationship.

In fact, “intimacy, by its very nature, involves allowing another person to enter into our private world. While often associated with physical closeness, true intimacy encompasses true emotional bonding and deep connection. When a person has been emotionally abused, the ability to establish deep emotional bonds is compromised. Often, the source of that emotional abuse has come from a past intimate relationship with a spouse, sibling, or parent. Intimate relationships, therefore, are viewed with suspicion and fear. If relationship is possible, the abused person may not allow it to reach beyond a surface level, in order to avoid the potential for being hurt; intimacy is simply not worth the risk” (Jantz & McMurray, 2009, p. 194). In fact, they avoid being physically touched by friends because it can trigger flashbacks and negative emotions and thus, affecting their relationship with others (Nielsen, Wind, Thomsen & Martinsen, 2018).

Another interesting fact is that the survivors of abuse in childhood may yearn for intimacy and affection and yet fear and repel it. The resultant lack of intimacy leads to a sense of emptiness and tactile hunger, in which the survivor yearns to be touched but cannot allow that, and so, seeks tactile stimulation through clothing fetishes such as fur, silk or towelling. Again, fear of intimacy and an inability to trust can impact the general social relationships, relationships with men and women, and relationship with the survivor’s own child or parents. Many adult survivors fear becoming a parent as they consider themselves unable to protect their children from all types of abuse especially child sexual abuse (Sanderson, 2006).

### **2.8. Anxiety**

Sometimes when some individuals see an abused child, they think that the child is crazy, acting out of control, or has a mental disorder. The problem is that we fail to see that the child is anxious. So what is anxiety? It is not so easy to come up with a specific definition of anxiety because we at times confuse the term with fear. However, Noyes & Hoehn-Saric (1998), defined anxiety as “a universal experience and, as such, is a part of human condition. It serves as biological warning system that is activated by danger. It may also occur following loss or may arise from intrapsychic conflict, as in conflict between inner drives and external demands or between conflicting value systems.

Anxiety is a distressing emotion usually associated with bodily discomfort. In contrast to depression, which is a reaction to a loss and is oriented towards the past, anxiety is a reaction to threat and is directed toward the future. The threat may involve danger, lack of support or what is unknown" (Noyes & Hoehn-Saric, 1998, p. 1). In a nutshell, "Child sexual abuse is a risk factor for anxiety disorders" (Maniglio, 2012).

In 2004, anxiety was defined as "a tense, unsettling application of a threatening but vague event; a feeling of uneasy suspense. It is a negative affect so closely related to fear that in many circumstances the two terms are used interchangeably; like anxiety, fear is also a combination of tension and unpleasant anticipation. Anxiety is not a lesser form and pale form of fear and in many ways is more difficult to tolerate than fear. It is unpleasant, unsettling, persistent, pervasive, and draining (Rachman, 2004, 3). The age of the child determines how he or her will demonstrate the feeling of anxiousness. "Younger children in particular are less likely to connect their behaviours to the abuse and may present with generalised anxiety symptoms: fear of strangers, fear of the dark and monsters, separation anxiety, and avoidance of triggers that have no apparent connection to the abuse" (Freeman & Ronen, 2007, p. 243).

## **2.9. Reluctance to go home from school**

First of all, we need to understand that that abused children respond in different ways. However, scholars like Hall, Williams, and Elliman (2009), affirm that reactions and behaviours of child abuse manifest in different ways, but the very one that is noticeable are the episodes of repeated running away from home, or reluctance to return home after school (Hall, Williams, & Elliman, 2009). In abuse situations, school can serve as a place of refuge for children, giving them some respite from the violence, although they can feel torn between not wanting to go home after school and needing to see their mother and to be reassured that she was right. In this case, the father is considered as the perpetrator. Some children would attempt to spend as much time at school as possible, getting there very early in the morning and leaving very late, even if it meant getting into trouble in order to do so (McGee, 2000).

A general question that we need to ask is why children feel reluctant to go home after school? Why do children run away from home? There are several reasons why children may run away from home. For instance, a child may feel that the rules at home are too strict. Some children leave because of problems within the home, such as a divorce, or a stepparent that they do not like. In a nutshell, our major reason is that children run away because they are being abused by their parents and caregivers. Sometimes, when they are asked to leave the school, they move on the streets instead of going home. Street life can determine a child or adolescent to get involved in juvenile delinquencies activities. For example, "children who are sexually abused sometimes create fantasy as a protective and defensive mechanism. Some children run away from home and become street transients. Some get involved in child prostitution as a means of survival. For those who cannot run away, sometimes the world of fantasy helps them to cope with the horrible abuse" (Edward, 2009, p. 69).

It is hardly surprising that children living in this situation may arrive in school tired, exhausted, nervous, bored, or frightened and cautions when interacting with other persons and, therefore, find it hard to pay attention to the lectures in school. Even when the teacher notices one or two changes, they may be unwilling to vocalise their feelings and react inappropriately. Their reaction may make their schoolmates or classmates to keep a distance. Part of the child's reason for acting in such manner is that overheard threats at night hurts them psychological on long term. They struggle to feel better and refusing to go home is one of the methods that works for some of them. In fact, many may feel reluctant to go home, particularly if the abuse is directed at them and they become anxious, spiteful and distressed as soon as they hear the school bell and others start getting ready to go home (Glenn, Helps, & Cousins, 2009).

### 3. Conclusion

Generally, abused children, especially in Igboland of Nigeria, are afraid or feel shy to open up to someone who can help them, such as their parents, teachers or caregivers. Knowing the characteristics of abused children is a step in recognising the signs of a child in pain. Even though some parents do not supervise their children and, as such, their actions do not help the children to speak out. It is important to remember that not all types of child abuse have noticeable signs. Thus, it makes difficult for an adult to identify and pick out the type of abuse that the child is undergoing. Finally, it is the primary responsibility of parents, teachers and caregivers to protect the children. To achieve this uphill task, parents need to pay attention to their children's emotion. "It is of utmost importance to listen to the child, to make eye contact and to acknowledge what the child is saying in a non-threatening, neutral manner" (Goldman, Hain, & Liben, 2012, p. 361).

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