The focus of this commentary is on whether research can or should be used as a basis for public policy to end use of corporal punishment (CP) by parents. CP is “the use of physical force with the intention of causing the child to experience pain, but not injury, for purposes of correction or control of the child’s behavior” (Straus, 2001). CP is currently legal in every state of the US and in most other nations (Global Initiative to End All Corporal Punishment, 2007). In practice, the difference between corporal punishment and physical abuse hinges on whether the child is injured seriously enough for the case to come to the attention of child protective services, regardless of the intent of the parent.

**Uses of Public Policy**

Public policy to promote specific behavior or societal conditions generally takes one of three forms (Douglas, 2002): 1) Punishment of those who violate the policy, such as penalties for sex before the age of consent; 2) Benefits for those adhering to the policy, such as increasing the number of available housing vouchers or a tax break for those who follow a policy; and 3) Information and guidelines to encourage adherence to a policy, such as appropriation of funds to inform the public about the harmful effects of shaking a baby.

**Public Policy and Corporal Punishment (CP)**

In 1979 Sweden passed the first legislation banning CP by parents. This legislation is part of the civil, not the criminal code, and there is no criminal penalty for using CP. The purpose was to set a national standard for humane treatment of children and to provide funds for public education on this issue, and funds to help parents use more positive methods of discipline. As of October 2007, nineteen countries have forbidden corporal punishment by parents and a number of others have legislation pending (Global Initiative to End All Corporal Punishment, 2007). In June 2006, the United Nations Committee on the Rights of the Child declared that it is “the obligation of all States parties to move quickly to prohibit and eliminate all corporal punishment and all other cruel or degrading forms of punishment of children” (United Nations Committee on the Rights of the Child, 2006).

**Role of Social Science Research in Informing Public Policy**

Medical research has frequently led to new public policies. However, research from psychology, sociology, anthropology, and social work (the disciplines most concerned with CP by parents) has seldom been the basis for new public policy. These disciplines have nevertheless made important contributions to public policy. Weiss and Bucuvalas (Weiss & Bucuvalas, 1980) showed that the contribution has been mainly in the form of justifying, revising, consolidating, and sometimes correcting, policies that had been initiated in response to changes in social circumstances, including changes in cultural norms and values. A specific example is the effort by feminists starting in the mid 1970s to change police treatment of domestic violence. The change was happening, but slowly. However, the pace quickened dramatically after publication of the results of an experiment comparing three modes of police action: separating and calming down the parties, referral to services, and arrest of the offender. The study showed that those arrested were less likely to reoffend (Sherman & Berk, 1984). This experiment is unlikely to have been done, and the results are unlikely to have been the subject of a brief sent to all police departments in the US, were it not for changes already brought about by the women’s movement. Child abuse is another age-old phenomenon that was gradually addressed by legislation to protect children from abuse and neglect. That effort was galvanized by publication in 1962 of the paper on the “battered-child syndrome” which described the phenomenon and provided X-ray diagnostic criteria (Kempe, Silverman, Steele, Droegemueller, & Silver, 1962).

Policies to end CP in the armed services and in schools occurred because of a change in values and beliefs, not because of research evidence. Similarly, the Swedish no-spanking law of 1979 was enacted primarily on the basis of moral principles. Currently, just over half the states and almost all large school districts prohibit CP by teachers. This change began long before there was empirical research to support it, and even now the quality of research showing harmful effects of CP in schools is minimal.

The sequence of events for policy on CP by parents in the US has been somewhat different. There has been a large amount of research, much of it of high quality,
showing that CP is a risk factor for many social and psychological problems. If past history is a guide, this research will be ignored until a “moral passage” (Gusfield, 1981) brings about policy changes, and with it receptivity to the empirical evidence to justify and improve the policy. However, if the research on CP is extensive, of high quality, and if it consistently shows harmful side effects, perhaps the increasing demand for “evidence-based” interventions and policies will lead to one of the few examples of research resulting in a new social policy. But is there sufficient evidence for public policies to end legal use of CP?

The Research Evidence
There have been over a hundred studies, including longitudinal studies and experiments, concerning the effect of CP on children and adults. The meta analysis by Gershoff (2002) revealed 93% agreement on the harmful effects of CP. The volume and the quality of the research have continued to grow since that publication. Yet content analyses of child development text books published in 1980–1985, 1990–1995 (Straus & Stewart, 1999), and 2000–2005 (Douglas & Straus, in press; Straus & Stewart, 1999) showed an average of only half a page on CP and that none recommend parents should never spank. How can so little space be given to a mode of parenting for which there is strong evidence of harmful side effects, and which is experienced by over 90% of pre-school children (Newson & Newson, 1968; Straus & Stewart, 1999) and by at least a third of infants (Newson & Newson, 1963; Straus & Stewart, 1999)? We suggest it is because, there has not yet been a moral passage about hitting children. The majority of the American public and of professionals concerned with children remain convinced that CP is “sometimes necessary” (Davis, Smith, & Marsden, 2005; Schenck, Lyman, & Bodin, 2000).

The meta-analysis of 88 studies by Gershoff (2002) showed a degree of agreement between studies that may be unique. Twelve of the studies examined the relation of CP to mental health problems of children, such as anxiety and depression, and eight examined the relation of childhood CP to adult mental health problems. Without exception, these 20 studies revealed that CP was associated with an increased probability of mental health problems. Thirteen studies investigated delinquent behavior. It is widely believed that CP “teaches the child a lesson” and therefore reduces delinquency. Instead, in 12 of the 13 studies CP was found to be associated with a higher probability of delinquent and anti-social behavior. The same near unanimity (4 out of 5) was found for studies of the relation between experiencing CP as a child and later adult criminal behavior.

Given these empirical results, why don’t most professionals concerned with children, including many who are in principle opposed to CP, take steps to advise parents to never spank, the same way that we advise parents to never shake a baby? Part of the explanation may be that most experienced CP as a child and do not see it as having any adverse effects. But that is the situation with almost all adverse life experiences. For example, a third of heavy smokers will die of a smoking related disease (Matteson, Pollack, & Cullen, 1987). This also means that two thirds will not. They can say at age 70 that they have smoked all their lives and are okay. That may be factually correct about their health, but the implication that smoking is okay is false. The correct implication is that they are one of the lucky two thirds. Smokers can only directly perceive the satisfaction from smoking. They have no way of perceiving future harmful effects. Similarly, those who were spanked or who spank can only directly perceive that when spanked, the child stops the misbehavior. They have no way to directly perceive the harmful effects because they do not surface until later, and as in the case of smoking, show up in only a fraction of the cases. From this one can infer a second explanation for the failure of psychologists, and especially clinical child psychologists (Forehand & McKinney, 1993; Schenck, Lyman, & Bodin, 2000), to advise parents to never spank. It is because, as the content analyses of textbooks shows, the academic community has failed to inform them of the research showing harmful side-effects. Similarly, they have not been informed about the results of research which show that, although spanking does correct misbehavior, it is not more effective than other methods of correction and control (Larzelere, Schneider, Larson, & Pike, 1996; Roberts, 1988; Roberts & Powers, 1990). Thus, they continue to believe the cultural myth that spanking works when other methods do not. Given this belief, and given their concern for the well-being of children, it is not surprising that there is continued acceptance of the cultural myth that spanking may sometimes be necessary, and they therefore do not advise to parents to never spank. With over 90% agreement in the research showing that CP is a risk factor for development problems, we believe the evidence not only permits, but requires, a change in policy to one focused on ending CP.

Ethics of Advising Parents Never to Spank
Some defenders of CP argue that it is unethical to advise parents to never spank until there is absolutely conclusive evidence on the harm and on the equal or greater effectiveness of other methods of correction and control (Baumrind, Larzelere, & Cowan, 2002; Larzelere, Baumrind, & Polite, 1998). The evidence, although extremely strong, is not absolutely conclusive. That is a frequent situation with prescription drugs. Nevertheless, standard public policy requires advising parents to stop using a drug, or withdrawing it from the market, if there is evidence of harmful side effects, even though the evidence is not conclusive, provided there is an equally effective drug without the harmful side effect. CP is like the drug with a harmful side effect. Because there are alternatives that are equally or more effective which do not have the side effects of CP, there is an ethical requirement to advise parents to “switch drugs” (i.e. to never spank).

Types of Policy
Returning to the three forms of public policy to promote specific behavior or societal conditions, we believe that policy to end CP should be non-punitive and follow the
successful Swedish example. This provides encouragement in the form of public education campaigns, information and advice, and benefits in the form of help to parents who are having difficulty managing without spanking. For psychology, it means revising child development text books to reflect three key facts. First, over 90% of American parents spank pre-school children, at least on occasion. Second, to reveal what is probably the best kept secret of American child psychology—that a large amount of research, including longitudinal studies controlling for Time 1 misbehavior and family and parenting characteristics, show that children who are not spanked, are on average, the best behaved and have the lowest rates of psychological problems. Third, there is no need to put a child at risk for the harmful side effects of CP because the research, which includes random assignment to treatment experiments (Larzelere, Sather, Schneider, Larson, & Pike, 1998; Larzelere, Schneider, Larson, & Pike, 1996; Roberts, 1988; Roberts & Powers, 1990) shows that spanking is not more effective than other methods.

We believe that Division 43, the APA in general, the Society For Research On Child Development, the US Children’s Bureau, and many other private and governmental organizations should adopt a policy of advising parents to never, under any circumstance, spank; that is, to never hit a child as a method of correction and control. It is important that the conclusions or advice be never spank because advising parents, as Spock did (Spock & Rothenberg, 1992) to avoid it if you can, paradoxically, almost ensures perpetuation of spanking. The explanation of this paradox lies in the limited ability of toddlers to control their own behavior. It is almost inevitable that a toddler will repeatedly fail to do something they are supposed to do, or repeatedly do something they were told not to do. After the third or fourth repetition, parents of two year olds are likely to conclude that they can’t avoid spanking. So there needs to be an unequivocal never spank message. Two of the few parenting education programs which do this are Nurturing Parent (Bavolek, 1992–2006) and Effective Black Parenting (Alvy & Marigna, 1987). We conclude that public policy should be modeled on these types of parenting education programs and shaken baby prevention campaigns, to provide education and support concerning the potentially negative impacts of spanking a child and to state that spanking a child is never acceptable.

References
Global Initiative to End All Corporal Punishment. (2007). Ending legalized violence against: Following up the UN Secretary General’s study on violence against children.