

Lerner Center for Public Health Promotion & Population Health



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How has the Opioid Overdose Crisis Affected Child Maltreatment in the U.S.?

Alexander Chapman

KEY FINDINGS

- Counties with higher opioid overdose mortality rates have higher child maltreatment rates.
- Poverty exacerbates the effects of the opioid crisis on the incidence of child maltreatment.
- Reducing the share of families in poverty and implementing opioid-related harm reduction programs (such as overdose reversal education and training, safe injection sites, and syringe exchange programs) may reduce the incidence of child maltreatment.

Individuals who are mistreated as children are at increased risk of negative outcomes later in life, including teen motherhood, HIV-risk behaviors, drug use, and poor behavioral and developmental outcomes. 1,2 Places that have higher rates of opioid overdose have also been shown to have higher rates of child maltreatment. 3,4

This brief summarizes findings from my recent peer-reviewed study published in The ANNALS of the American Academy of Political and Social Science that examined associations between U.S. county-level opioid mortality rates and child maltreatment rates from 2007 to 2017. I combined datasets that cover nearly 80% of all fatal opioid overdoses and child maltreatment reports in the U.S. over this period. County-level opioid overdose rates are associated with reports of child maltreatment. This association is affected by poverty. Where the proportion of families in poverty increases, the association between fatal opioid overdose rates and child maltreatment also increases. These findings hold even after accounting for time trends and other characteristics of counties. These results suggest that decreasing poverty and opioid overdose rates would decrease child maltreatment.

Poverty Exacerbates the Relationship Between Opioid Overdose Mortality and Child Maltreatment

Child maltreatment rates are higher in counties with higher opioid overdose mortality rates, but the problem is even worse in counties with high poverty rates. As show in Figure 1, opioid overdose mortality rates have no association with child maltreatment

rates in counties at low-poverty levels (the bottom 10% and bottom 25% of counties). However, in higher poverty counties (those in the top 25% and 10% of poverty), higher opioid overdose mortality rates are associated with higher child maltreatment rates. My models estimate that decreasing the poverty rate by 5% would decrease the number of child maltreatment reports by nearly 10 percent for most counties.

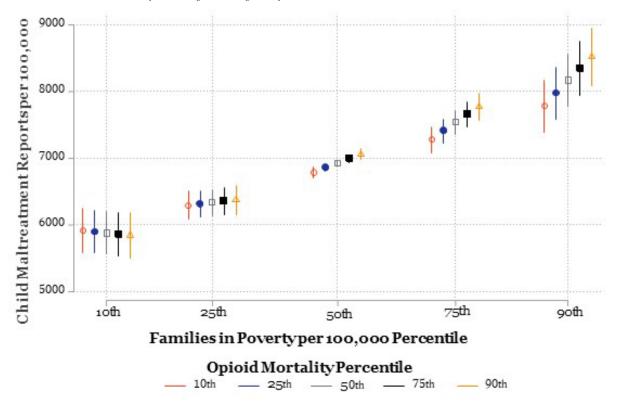


Figure 1. Relationship between County-Level Poverty Rate and Opioid Overdose Mortality Rate (deaths per 100,000 population) on Child Maltreatment Rate (reports per 100,000 population)

Data Source: CDC WONDER and NCANDS 2007-2017. The figure shows the predicted number of child maltreatment reports per 100,000 children by percentile of opioid overdose mortality and families in poverty at the county-level.

Decreasing Opioid Overdoses and Poverty Can Reduce Child Maltreatment

Policymakers can intervene and decrease child maltreatment by decreasing poverty rates through investments in high poverty counties and advancing harm reduction efforts to reduce opioid overdoses. Specific examples of interventions include overdose reversal training and education, safe injection sites, syringe exchange programs, and broadening government programs that reduce poverty. These county-level interventions would improve children's health and wellbeing by reducing child maltreatment.

Data and Methods

The data for these analyses come from U.S. Centers for Disease Control and Prevention Wide-ranging Online Data for Epidemiologic Research (CDC WONDER) Multiple Cause of Death mortality data and National Child Abuse and Neglect Data

System (NCANDS) information on countyspecific child maltreatment reports from 2007-2017. They encompass roughly 80 percent of all opioid mortality and child maltreatment over the period. Please see the published journal article for further details.

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About the Author

Alexander Chapman

(alexander.chapman@psu.edu) is a PhD candidate in Sociology and Demography and a Graduate Research Associate in the Population Research Institute at The Pennsylvania State University.

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