

Analysis Brief

Comparing rates of child abuse between rural and urban Alaskan communities

Rittman DS, Parrish JW

March 2020

Background

We set out to explore the documented disparity that child physical and sexual abuse is elevated in rural Alaska. Although rural children receive more reports to the Office of Children's Services (OCS) for abuse, there is no geographic or cultural reasoning behind it.

We linked 2007–2016 Pregnancy Risk Assessment Monitoring System (PRAMS) data with administrative data from OCS. The data were used to adjust for pre-birth factors that independently predict contact with OCS for physical abuse and sexual abuse. We calculated the crude (unadjusted) and adjusted association of residence (rural vs urban) and child physical/sexual abuse reports.

Child physical abuse

- Children born in rural communities are 1.6 times as likely to be reported to OCS for physical abuse compared to children born in urban communities
- The unadjusted odds ratio (OR) for children born in rural communities and OCS contact for physical abuse attenuates by 54% ($OR_{unadjusted} = 1.6$, $OR_{adjusted} = 0.7$) when adjusting for maternal substance use during pregnancy, socioeconomic status, marital status, maternal education, and number of living children
- In the final adjusted model, rural residence transitions from a risk to a protective factor against physical abuse

Child sexual abuse

- Children born in rural communities are 1.8 times as likely to be reported to OCS for sexual abuse compared to children born in urban communities
- The unadjusted odds ratio (OR) for children born in rural communities and OCS contact for sexual abuse attenuates by 52% ($OR_{unadjusted} = 1.8$, $OR_{adjusted} = 0.8$) when adjusting for maternal substance use during pregnancy, socioeconomic status, marital status, maternal education, and number of living children

Implications and recommendations

Health and safety are influenced by factors at the individual, familial, community, and societal levels. Although children living in rural communities have an elevated risk of experiencing a physical abuse and/or sexual abuse report, it appears that this disparity is driven primarily by substance use and economic challenges. After account for these two factors, living in a rural community is actually protective against physical abuse (relative to children living in urban communities). This “reversal” of effect is likely due to multiple unmeasured factors such as increased cohesion with community and multiple supports. Providers should be aware of this important connection between community and child abuse, and avoid generalized language that may weaken the collective strengths of individual communities.

Given these findings, prevention efforts in rural communities should focus around substance use and resources, while in urban areas, additional broader considerations are likely needed.

