

Health Care Utilization and Costs Associated with Childhood Abuse

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Abstract

Background

Physical and sexual childhood abuse is associated with poor health across the lifespan. However, the association between these types of abuse and *actual* health care use and costs over the long run has not been documented.

Objective

To examine long-term health care utilization and costs associated with physical, sexual, or both physical and sexual childhood abuse.

Design

Retrospective cohort.

Participants

Three thousand three hundred thirty-three women (mean age, 47 years) randomly selected from the membership files of a large integrated health care delivery system.

Measurements

Automated annual health care utilization and costs were assembled over an average of 7.4 years for women with physical only, sexual only, or both physical and sexual childhood abuse (as reported in a telephone survey), and for women without these abuse histories (reference group).

Results

Significantly higher annual health care use and costs were observed for women with a child abuse history compared to women without comparable abuse histories. The most pronounced use and costs were observed for women with a history of both physical and sexual child abuse. Women with both abuse types had higher annual mental health (relative risk [RR] = 2.07; 95% confidence interval [95%CI] = 1.67–2.57); emergency department (RR = 1.86; 95%CI = 1.47–2.35); hospital outpatient (RR = 1.35; 95%CI = 1.10–1.65); pharmacy (incident rate ratio [IRR] = 1.57; 95%CI = 1.33–1.86); primary care (IRR = 1.41; 95%CI = 1.28–1.56); and specialty care use (IRR = 1.32; 95%CI = 1.13–1.54). Total adjusted annual health care costs were 36% higher for women with both abuse types, 22% higher for women with physical abuse only, and 16% higher for women with sexual abuse only.

Conclusions

Child abuse is associated with long-term elevated health care use and costs, particularly for women who suffer both physical and sexual abuse.

Health Care Utilization and Costs Associated with Childhood Abuse

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BACKGROUND: Physical and sexual childhood abuse is associated with poor health across the lifespan. However, the association between these types of abuse and actual health care use and costs over the long run has not been documented.

OBJECTIVE: To examine long-term health care utilization and costs associated with physical, sexual, or both physical and sexual childhood abuse.

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PARTICIPANTS: Three thousand three hundred thirty-three women (mean age, 47 years) randomly selected from the membership files of a large integrated health care delivery system.

MEASUREMENTS: Automated annual health care utilization and costs were assembled over an average of 7.4 years for women with physical only, sexual only, or both physical and sexual childhood abuse (as reported in a telephone survey), and for women without these abuse histories (reference group).

RESULTS: Significantly higher annual health care use and costs were observed for women with a child abuse history compared to women without comparable abuse histories. The most pronounced use and costs were observed for women with a history of both physical and sexual child abuse. Women with both abuse types had higher annual mental health (relative risk [RR]=2.07; 95% confidence interval [95%CI]=1.67–2.57); emergency department (RR=1.86; 95%CI=1.47–2.35); hospital outpatient (RR=1.35; 95%CI=1.10–1.65); pharmacy (incident rate ratio [IRR]=1.57; 95%CI=1.33–1.86); primary care (IRR=1.41; 95%CI=1.28–1.56); and specialty care use (IRR=1.32; 95%CI=1.13–1.54). Total adjusted annual health care costs were 36% higher for women with both abuse types, 22% higher for women with physical abuse only, and 16% higher for women with sexual abuse only.

CONCLUSIONS: Child abuse is associated with long-term elevated health care use and costs, particularly for women who suffer both physical and sexual abuse.

KEY WORDS: health care utilization; costs; childhood abuse; physical abuse; sexual abuse.

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INTRODUCTION

Physical and sexual childhood abuse history in women is prevalent^{1–5} and is associated with poor health across the lifespan.^{6–12} Studies have also shown higher health care use and costs for women with a history of childhood abuse.^{1–4,12–15} For example, in a large study that used automated health plan data on health care use and costs, women with a history of childhood sexual abuse had unadjusted annual health care costs that were 18% higher than costs for women without reported abuse.¹² In a large Canadian study that used self-reported health care use and assigned costs to health care use, women with a history of both physical and sexual childhood abuse had annual health care costs that were 93% higher than costs for women without these abuse histories.⁴

Despite promising information from these studies, they relied on self-reported health care utilization;^{3,4,15} limited their examination to a subset of health services;^{13–15} included clinic-based convenience samples;^{1,13–15} or included women with an average or median age of only the mid to late 30s.^{4,13–15} Information regarding actual health care use and costs associated with specific childhood abuse types (e.g., physical, sexual, or both types of abuse) across the full range of health services for women through middle age is lacking.

This paper examines the actual health care utilization and costs associated with physical only, sexual only, or physical and sexual child abuse using data from women enrolled in a large health care delivery system. Our study improves on the methods of prior studies by isolating the association between physical, sexual, or both physical and sexual abuse and annual health care utilization and costs using automated visit encounter data over an average 7.4-year period, including a large population-based random sample of women (average age 47 years) and including a wide range of health services utilization areas.

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