

Family and Intimate Partner Homicide *Virginia, 2008*

2010



*Commonwealth of Virginia
Virginia Department of Health
Office of the Chief Medical Examiner
Published June, 2010*

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FAMILY AND INTIMATE PARTNER HOMICIDE

A descriptive analysis of the
characteristics and circumstances
surrounding family and intimate partner
homicide in Virginia, 2008

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Suggested Citation: Family and Intimate Partner Homicide Surveillance Project, Office of the Chief Medical Examiner, Virginia Department of Health (2010). *Family and intimate partner homicide: A descriptive analysis of the characteristics and circumstances surrounding family and intimate partner homicide in Virginia, 2008*. Retrieved [insert date of retrieval here] from <http://www.vdh.virginia.gov/medExam/violence.htm>.

LETTER FROM THE CHIEF MEDICAL EXAMINER

Citizens of the Commonwealth:

A decade ago, the General Assembly enacted Virginia Code §32.1-283.3 and made a critical step toward our increased understanding of family and intimate partner violence in Virginia. This Code section authorized the development of local family and domestic violence fatality review teams and created a statewide surveillance system to collect data on those deaths involving family and/or intimate partners.

In the time since this legislation was enacted, our knowledge of these fatalities has increased and been used to develop programs and services to prevent violence and assist victims and their families. Data trends and some of the Office of the Chief Medical Examiner's accomplishments in regards to family and/or intimate partner violence are listed below.

Ten years worth of data reveal the following trends:

- A third of all homicides were due to family or intimate partner conflict.
- Males and females were both vulnerable; however, females had a greater probability of being killed by current or former intimate partners whereas males had a greater probability of being killed while in the "crossfire" of an intimate partner relationship.
- Racial disparities continued to exist. Black Virginians were at significantly greater risk than white Virginians.
- Infants were our most vulnerable citizens; the homicide rate for this group was the highest regardless of sex or race/ethnicity.
- Most victims were killed with a firearm and while in a residence.

In addition, between 1999 and 2008 the Office of the Chief Medical Examiner (OCME):

- Helped to establish 15 Family and Intimate Partner Fatality Review Teams throughout Virginia. These teams have enabled communities to develop coordinated responses to family and domestic violence.
- Developed statewide interdisciplinary workgroups to review data and make recommendations regarding family and domestic violence prevention and intervention.
- Provided comprehensive data to stakeholders working to prevent family and domestic violence.
- Worked with the Virginia Sexual and Domestic Violence Action Alliance (the Alliance) and conducted a statewide coordinated community response conference examining trends in fatality review and surveillance.

Ten years worth of data and action have improved the Commonwealth's ability to respond to these deaths. However, we must continue to be vigilant in our data collection, analysis, and prevention efforts. In 2008 we lost 149 lives to family and intimate partner violence. These deaths were preventable and underscore the need for continued knowledge and action to end violence.

Leah L. E. Bush, MS, MD
Chief Medical Examiner

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Introduction

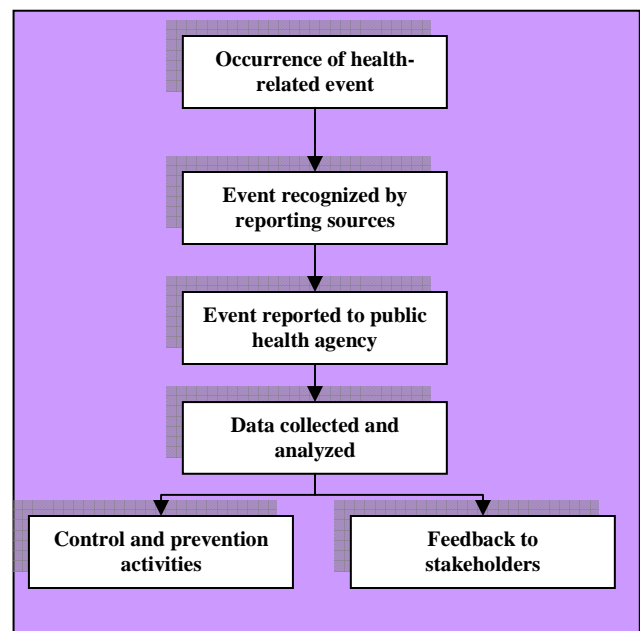
Collecting accurate information on family and intimate partner (FIP) homicide is essential for the overall health and well-being of a community. These data provide policy makers, community groups, and the general public information needed to understand the magnitude of homicide in their communities and the circumstances surrounding these events. Specifically, these data provide stakeholders with the ability to track changes, identify trends over time, identify at-risk populations, and develop evidence-based interventions.

Data are important for understanding a community's functioning and needs; however, before 1999, collecting data and understanding the degree to which FIP homicide impacted Virginia was difficult. Virginia lacked standard criteria for identifying FIP cases and a commonly accepted method to input and analyze data. In summary, the absence of a standardized monitoring process impacted public health by limiting the ability to identify and respond to FIP homicide.

In 1999, the Virginia General Assembly enacted legislation that mandated the development and implementation of a statewide Family and Intimate Partner Homicide Surveillance System. The overall goal was for the Office of the Chief Medical Examiner (OCME) to develop a system that would provide accurate, timely, and complete information about FIP homicide. This mandate included two additional objectives, (a) the development of a FIP classification system and (b) the production of comprehensive annual reports to be used for prevention activities, public health planning, and policy development and change.

For ten years the FIP Homicide Surveillance Program has collected key data elements to help community leaders quantify the rate of FIP homicide in Virginia. Program goals are the same goals established in 1999; however, the data collection, classification, and analysis tools continue to evolve based on current trends regarding public health surveillance.

Figure 1. Steps in a Public Health Surveillance System



Adaptation of CDC (2001). *Updated guidelines for evaluating public health surveillance systems*. Available: www.cdc.gov/mmwr/preview/mmwrhtml/rr5013a1.htm. Accessed June 1, 2009.

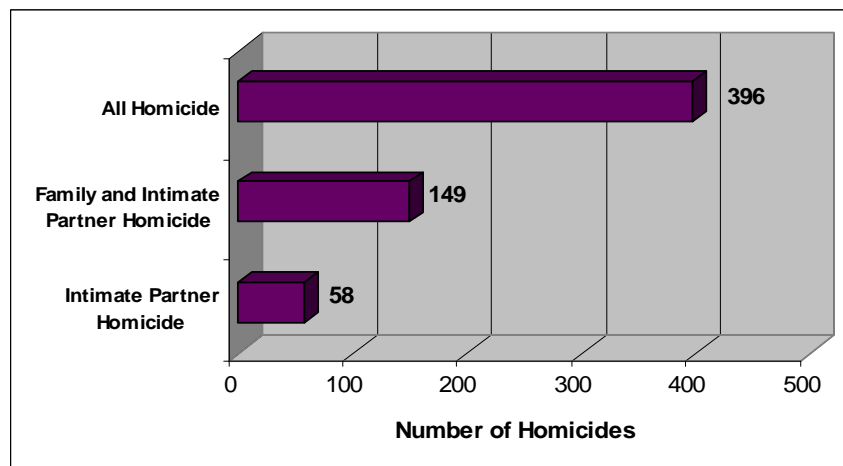
Organization and Methodology

The fatalities included in this report were those deaths classified as “homicide” after a medicolegal death investigation conducted by the OCME.¹ Family and intimate partner (FIP) deaths in which the fatal injury occurred in Virginia and the subsequent death occurred out-of-state were also included. These deaths, identified through newspaper surveillance, were important to include because they allowed a more comprehensive portrait of the magnitude of domestic violence in Virginia and the circumstances surrounding fatal injuries. Consequently, data presented in this report may differ from homicide data reported by law enforcement agencies and mortality data published by the Virginia Division of Health Statistics.

The Family and Intimate Partner Homicide Surveillance Coordinator compiled a list of all homicides in Virginia and evaluated each case, paying particular attention to the relationship between the decedent and the alleged offender. Information reviewed included the following two types: (a) medicolegal death records, including documents such as the victim’s death certificate, autopsy, death investigation reports, and other documentation compiled during the medical examiner investigation and (b) articles on homicides from surveillance of Virginia newspapers. Data extracted from these sources were crucial in identifying FIP homicides and providing demographic and epidemiological information about risk factors and other characteristics surrounding these deaths.

Cases in which the alleged offender was a current or past intimate partner or a family member were placed into one of six mutually exclusive categories. These categories are listed and defined in Table 1. The remaining cases were categorized as “other homicide.” Figure 2 illustrates the number of homicides, family and intimate partner homicides, and intimate partner homicides in Virginia in 2008.

Figure 2. Overview of Homicide in Virginia: 2008



¹ Deaths attributed judicial execution were excluded.

TABLE 1. CLASSIFICATION OF FAMILY AND INTIMATE PARTNER HOMICIDE: 2008

Intimate Partner Homicide (IPH)	A homicide in which a victim was killed by one of the following: spouse (married or separated), former spouse, current or former boyfriend, girlfriend or same-sex partner, or dating partner. This group could include homicides in which only one of the parties had pursued a relationship or perceived a relationship with the other, where at least one of the following was historically noted: rejection, threats, harassment, stalking, possessiveness, or issuance of a protective order.
Intimate Partner Associated Homicide (IPA)	A homicide in which a victim was killed as a result of violence stemming from an intimate partner relationship. Victims could include alleged abusers killed by law enforcement or persons caught in the crossfire of intimate partner violence such as friends, co-workers, neighbors, relatives, new intimate partners, or bystanders.
Child Homicide by Caregiver (CHC)	A homicide in which a victim was a child under the age of 18 killed by a caregiver.
Elder Homicide by Caregiver (EHC)	A homicide in which a victim was an adult 55 years or older who was killed by a caregiver.
Other Family Homicide (OFH)	A homicide in which a victim was killed by an individual related to them biologically or by marriage (e.g. grandparent, [step]parent, [step]sibling, cousin, in-laws) and who does not meet the criteria for one of the four groups above.
Family Associated Homicide (FAH)	A homicide in which a victim was killed as a result of violence stemming from a familial relationship. Victims could include persons killed by law enforcement during a familial conflict or persons caught in the crossfire, such as friends, co-workers, neighbors, relatives, or bystanders.

Explanation and Interpretation of Data

Throughout this report, information about homicide is presented using three statistics: (a) the number of cases that fit a category, (b) the percentage of cases that fit a category, and (c) the homicide rate for selected categories. Rates provide a standard unit of measurement and permit precise comparisons between groups. However, rates (and percentages) based on small numbers of cases (20 or fewer) should be interpreted with caution.

Rates for this report were calculated per 100,000 persons in the population using U.S. Census data or U.S. Census estimates for every year available from 1999 – 2008. For example, in Table 3, the homicide rate for females was calculated using Virginia’s

female population in 2008. In 2008, 77 family and intimate partner homicide victims were female. Census data estimated Virginia's female population at 3,952,047. The female homicide rate per 100,000 was calculated by dividing 77 by 3,952,047 and then multiplying that figure by 100,000. The resulting rate was 1.9. Specifically, 1.9 of every 100,000 females in Virginia were family and intimate partner homicide victims in 2008.

The way in which a decedent's racial/ethnic group membership was denoted changed in 2004. Hispanic persons can identify as a member of any race and are a separate ethnic group. Therefore, beginning in 2004, Hispanic persons may appear both in the race categories (White, Black and Other) *and* in the separate ethnic category labeled "Hispanic." Prior to 2004, Hispanic persons were reported exclusively as a separate ethnic category, not as part of a racial category.

This report describes the geographic location of homicide in three ways: by locality of fatal injury, OCME District, and Health Planning Region. The OCME divides Virginia's localities into four geographic regions: Central, Northern, Tidewater, and Western. Similarly, Virginia has five Health Planning Regions: Central, Eastern, Northern, Northwest, and Southwest. For public health purposes, this report presents data by both OCME District and Health Planning Region. Please refer to page 53 for a list of localities indicating their OCME District and Health Planning Region.

TABLE 2. VIRGINIA POPULATION BY RACE/ETHNICITY: 2008*		
RACE	No.	%
White	5,739,424	73.9
Black	1,587,765	20.4
Other	441,900	5.7
Total	7,769,089	100.0
ETHNICITY	No.	%
Hispanic	531,396	6.8


*Population estimates are from the U.S. Bureau of the Census, 2008.

Homicide numbers are reported for the locality or Health Planning Region in which the *fatal injury occurred*. The actual death may have occurred in a different locality, Health Planning Region, or out-of-state.

Information describing the characteristics and circumstances of homicides is provided in two ways, by individual *case* and by *event*. For instance, if two persons are killed in a car accident, there are two victims and one event. Individual demographic information is captured for each decedent; however, the circumstances surrounding the car accident and the events leading up to it are counted only one time. This process ensures that all decedents are included in the description of at-risk groups while providing an unduplicated count of the *circumstances surrounding events*.


Organization of Report

This report is divided into two parts. Each section provides a summary section, tables, and figures (when appropriate). Part One provides an overview of family and intimate partner (FIP) homicides that occurred in 2008. Information on homicide cases is



presented in aggregate and then divided by the type of FIP homicide. A summary table for 2008 FIP homicides is presented at the end of this section. Summary tables for 1999 – 2008 will be published in a special anniversary issue.

Part Two is the appendix and includes a glossary and a list of localities by Virginia OCME District and Health Planning Region.



PART ONE: 2008 OVERVIEW

Homicide

This report focuses on family and intimate partner homicide in Virginia. However, in order to understand the context of family and intimate partner homicide and how these homicides fit into the “total picture” of homicide in Virginia, a review of the characteristics of all homicide victims in Virginia is provided. Information on 2008 homicide cases was obtained from the Office of the Chief Medical Examiner’s Annual Report.²

In 2008 there were **396** homicides. This represents a 9.9% decrease from the previous year. The demographic characteristics of homicide victims were similar to demographic characteristics identified in 2007; most victims were male (74.9%), Black (55.9%) and between the ages of 25 and 34 (23.6%). In addition, the most commonly reported fatal agency, a firearm (66.2%), was also the most commonly reported fatal agency for 2007.

Homicide victims ranged in age from infant (less than one year of age) to 94 years of age. The average victim was 33.0 years of age. Male victims were younger than female victims, 32.0 years and 35.0 years, respectively.

² Office of the Chief Medical Examiner, Virginia Department of Health (2009). *Office of the Chief Medical Examiner’s Annual Report, 2008*. Retrieved March 1, 2010 from <http://www.vdh.state.va.us/medExam/documents/2009/pdfs/2008%20OCME%20Annual%20Report.pdf>

Family and Intimate Partner Homicide

Family and intimate partner (FIP) homicide includes victims of intimate partner, intimate partner associated, child homicide by caregiver, elder homicide by caregiver, other family, and family associated homicides. See Table 1 for definitions of each case type. In 2008, there were **140** family and intimate partner homicide events with **149** homicide victims in Virginia. This represents an 18.3% increase of family and intimate partner homicide deaths over the previous year.

- The average age of family and intimate partner homicide victims was 34.22 years ($SD = 19.91$) with ages ranging from 0 (infant under 12 months) to 83 years of age. Half of all victims were 34 years of age or younger. Males had a slightly higher average age than females, 35.15 years ($SD = 18.19$) and 33.35 years ($SD = 21.49$), respectively.
- FIP homicide rates for females and males were identical, 1.9 and 1.9, respectively.
- Blacks were killed at more than three times the rate of Whites.
- Infants had the highest family and intimate partner homicide rate of all age groups (9.3). The lowest homicide rate was among children 5 – 14 years of age (0.3).
- The Northern OCME District had the lowest family and intimate partner homicide rate (0.9). The Central OCME District (3.0) had the highest rate.
- The Central Health Planning Region had the highest FIP homicide rate (3.7).
- The majority of FIP homicides ($n = 99$, 66.4%) stemmed from violence between intimate partners (e.g., intimate partner or intimate partner associated homicide). In 38.9% of FIP homicide cases ($n = 58$), the alleged offender was a current or past intimate partner.
- Localities with five or more family and intimate partner homicide victims included Norfolk, Richmond and Roanoke Cities; and Chesterfield, Fairfax, Henrico, and Stafford Counties. Over thirty-six percent (36.2%) of all family and intimate partner homicides occurred in these seven localities. Further, Roanoke City had the highest FIP homicide rate among these localities (8.6).
- Black females were killed at more than three times the rate of White females. Black males were killed at almost three and a half times the rate of White males.
- When examining gender and age, the FIP homicide rate was highest among females under the age of one (15.3). The second highest rate was among males under the age of one (3.7).
- One in two (49.7%) family and intimate partner homicide victims were killed with a firearm. The second most common fatal agency was a sharp instrument (24.2%).
- The majority of FIP homicides ($n = 124$, 83.2%) took place at a residence.

FAMILY AND INTIMATE PARTNER HOMICIDE

- In addition to the 149 FIP homicide victims, there were 39 people who were attacked and survived these homicide events.
- A total of 56 children were present during a family or intimate partner homicide. These children lived through the event. The type of exposure varied and included the following: witnessing the event, hearing the event, and finding the homicide victim.
- Precipitating factors are factors that immediately preceded the event. The precipitating factor/event was known in 69.1% ($n = 103$) of family and intimate partner homicide cases. The most commonly reported precipitating factor was a new partner or the perception of a new partner (21.4%), followed by the termination or break-up of a relationship (19.4%), an argument or discussion about financial issues (12.6%), and two persons fighting over the same intimate partner (11.7%).
- There was some evidence of substance use at the time of the fatal event. Almost one in four alleged offenders ($n = 34$, 24.3%) used alcohol during the event. In addition, one in ten alleged offenders ($n = 15$, 10.7%) used substances other than alcohol during the event.³

Tables 3 – 7 and Figures 3 – 4 provide additional details regarding key characteristics of family and intimate partner homicide victims.

³ There were 140 alleged offenders.

FAMILY AND INTIMATE PARTNER HOMICIDE

TABLE 3. FAMILY AND INTIMATE PARTNER HOMICIDE VICTIMS IN VIRGINIA (N = 149): 2008

	No.	%	Rate
SEX			
Female	77	51.7	1.9
Male	72	48.3	1.9
RACE			
White	75	50.3	1.3
Black	70	47.0	4.4
Other	4	2.7	0.9
ETHNICITY			
Hispanic	4	2.7	0.8
AGE			
< 1	10	6.7	9.3
1 - 4	6	4.0	1.4
5 - 14	3	2.0	0.3
15 - 24	34	22.8	3.1
25 - 34	24	16.1	2.3
35 - 44	25	16.8	2.2
45 - 54	22	14.8	1.9
55 - 64	14	9.4	1.6
> 64	11	7.4	1.2
OCME DISTRICT			
Central	62	41.6	3.0
Northern	23	15.4	0.9
Tidewater	21	14.1	1.3
Western	43	28.9	2.7
HEALTH PLANNING REGION			
Central	49	32.9	3.7
Eastern	23	15.4	1.3
Northern	19	12.8	0.9
Northwest	18	12.1	1.5
Southwest	39	26.2	2.9
Out of State	1	0.7	--
Unknown	0	0.0	--
TYPE OF HOMICIDE			
Intimate Partner 18 and Over	58	38.9	1.0
Intimate Partner Associated	41	27.5	0.5
Child Homicide by Caregiver	15	10.1	0.8
Elder Homicide by Caregiver	0	0.0	0.0
Other Family	29	19.5	0.4
Family Associated	6	4.0	0.1
TOTAL	149	100.0	1.9

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

TABLE 4. FAMILY AND INTIMATE PARTNER HOMICIDES IN VIRGINIA BY LOCALITIES WITH FIVE OR MORE VICTIMS: 2008

LOCALITY	No.	Rate
Richmond City	14	6.9
Henrico County	8	2.7
Roanoke City	8	8.6
Chesterfield County	7	2.3
Fairfax County	6	0.6
Norfolk City	6	2.6
Stafford County	5	4.1
TOTAL	54	--

In 2008, 36.2% of all family and intimate partner homicides occurred in these seven localities. Roanoke City had the highest FIP homicide rate among these localities (8.6). Rates were calculated per 100,000 persons.

FAMILY AND INTIMATE PARTNER HOMICIDE

**TABLE 5. FAMILY AND INTIMATE PARTNER HOMICIDE VICTIMS IN VIRGINIA
BY RACE/ETHNICITY AND SEX (N = 149): 2008**

	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
White	37	48.1	1.3	38	52.8	1.3	75	50.3	1.3
Black	36	46.8	4.3	34	47.2	4.5	70	47.0	4.4
Other	4	5.2	1.8	0	0.0	0.0	4	2.7	0.9
TOTAL	77	100.0	1.9	72	100.0	1.9	149	100.0	1.9
Hispanic	2	2.6	0.8	2	2.8	0.7	4	2.7	0.8

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

**TABLE 6. FAMILY AND INTIMATE PARTNER HOMICIDE VICTIMS IN VIRGINIA
BY AGE AND SEX (N = 149): 2008**

	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
< 1	8	10.4	15.3	2	2.8	3.7	10	6.7	9.3
1 - 4	3	3.9	1.5	3	4.2	1.4	6	4.0	1.4
5 - 14	2	2.6	0.4	1	1.4	0.2	3	2.0	0.3
15 - 24	17	22.1	3.3	17	23.6	3.0	34	22.8	3.1
25 - 34	12	15.6	2.3	12	16.7	2.2	24	16.1	2.3
35 - 44	14	18.2	2.4	11	15.3	1.9	25	16.8	2.2
45 - 54	6	7.8	1.0	16	22.2	2.9	22	14.8	1.9
55 - 64	8	10.4	1.8	6	8.3	1.4	14	9.4	1.6
> 64	7	9.1	1.3	4	5.6	1.0	11	7.4	1.2
TOTAL	77	100.0	1.9	72	100.0	1.9	149	100.0	1.9

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

FAMILY AND INTIMATE PARTNER HOMICIDE

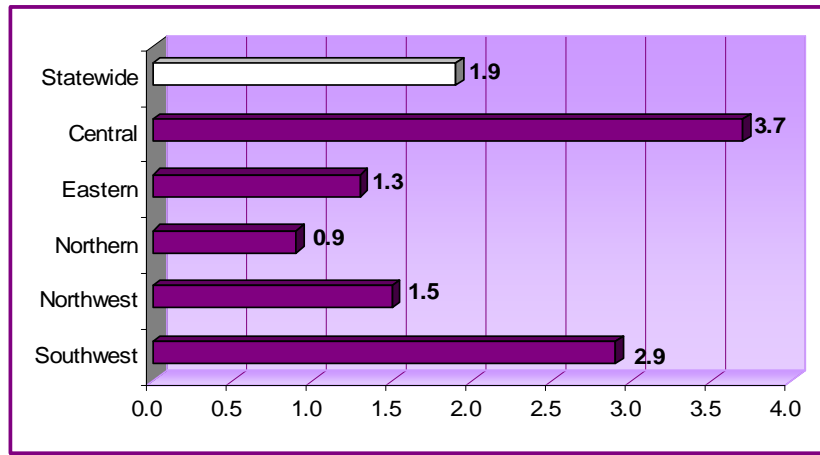
**TABLE 7. FAMILY AND INTIMATE PARTNER HOMICIDE VICTIMS IN VIRGINIA
BY FATAL AGENCY AND SEX (N = 149): 2008**

<i>FATAL AGENCY</i>	Female		Male		Total	
	No.	%	No.	%	No.	%
Firearm	33	42.9	41	56.9	74	49.7
Sharp Instrument	17	22.1	19	26.4	36	24.2
Personal Weapon	9	11.7	6	8.3	15	10.1
Blunt Instrument	8	10.4	3	4.2	11	7.4
Strangulation or Choking	8	10.4	2	2.8	10	6.7
Motor Vehicle	0	0.0	1	1.4	1	0.7
Drowning	0	0.0	0	0.0	0	0.0
Pushing or Slamming or Throwing Against an Object	1	1.3	0	0.0	1	0.7
Fire or Smoke Inhalation	2	2.6	0	0.0	2	1.3
Smothering or Suffocation	0	0.0	1	1.4	1	0.7
Poisoning or Carbon Monoxide	0	0.0	0	0.0	0	0.0
Other	3	3.9	0	0.0	3	2.0
Unknown	1	1.3	0	0.0	1	0.7

More than one fatal agency can be used in a homicide, therefore, fatal agencies will neither sum to the total the number of family and intimate partner homicides for females (77) or males (72), nor sum to 100%.

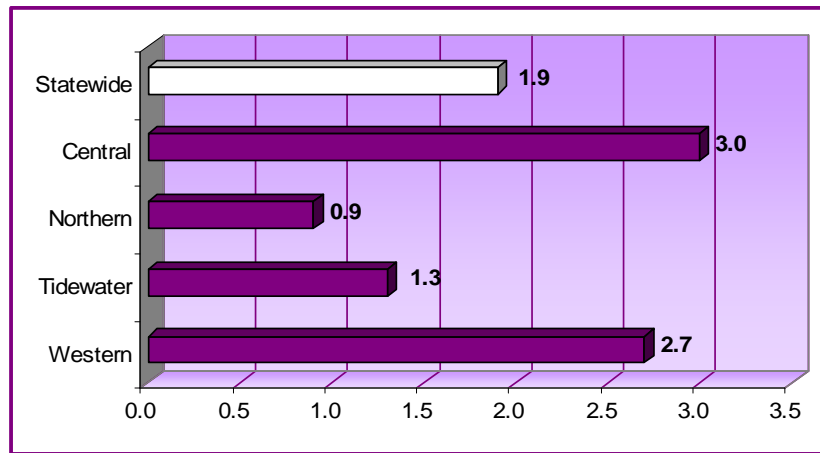
FAMILY AND INTIMATE PARTNER HOMICIDE

Figure 3. Family and Intimate Partner Homicide Rate by Virginia Health Planning Region (N = 149): 2008*



*Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

Figure 4. Family and Intimate Partner Homicide Rate by Virginia OCME District (N = 149): 2008*



*Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

Intimate Partner Homicide

Intimate partner homicide victims were victims 18 years of age and older who were killed by a current or former spouse, current or former boyfriend or girlfriend, same-sex partner, or dating partner. In 2008 there were **58** intimate partner homicide victims age 18 and over. This represents a 13.7% increase over the previous year.

- The average age of intimate partner homicide victims was 37.90 years ($SD = 14.45$) with ages ranging from 18 to 87 years. Half of all victims were 41 years of age or younger.
- Female victims had an IP homicide rate over three and a half times the rate of male victims. In addition, almost four out of five ($n = 41$, 79.3%) intimate partner homicide victims were female.
- Blacks were killed at more than three times the rate of Whites.
- Most victims were in the 18 – 24 age group (24.1%) or in the 35 – 44 age group ($n = 14$, 24.1%) The 18 – 24 year old age group had the highest rate of IPH among all age groups (1.8).
- The Central OCME District had the highest intimate partner homicide rate (1.4). The Northern and Tidewater Districts each experienced a rate of 0.6 deaths per 100,000 persons.
- Among Health Planning Regions, the Central Region had the highest intimate partner homicide rate (1.9).
- The most common relationship between the intimate partner homicide victim and the alleged offender was boyfriend/girlfriend ($n = 24$, 41.4%), followed by spouse ($n = 20$, 34.5%), and ex-boy/girlfriend ($n = 13$, 22.4%).
- Localities with three or more victims included Chesterfield County with four victims and Fairfax County, Henrico County, and Roanoke City with three deaths each. Over twenty-two percent (22.4%) of all family and intimate partner homicides occurred in these four localities. Further, Roanoke City had the highest intimate partner homicide rate among these localities (4.2).
- Black females were killed at three times the rate of White females. Black males were killed at three times the rate of White males.
- Examining sex and age showed that females 18 – 24 years of age had the highest intimate partner homicide rate (3.3).
- A firearm was used in half of all intimate partner homicides ($n = 29$, 50.0%).
- Almost half of all female homicide victims ($n = 46$, 46.4%) were killed by an intimate partner. In comparison, less than 5.0% of adult male homicide victims ($n = 12$, 4.0%) were killed by an intimate partner.
- More than one in three intimate partner homicide victims ($n = 21$, 36.2%) were killed in a homicide–suicide event.
- In addition to the 58 intimate partner homicide victims, there were 4 people who

INTIMATE PARTNER HOMICIDE

were attacked and survived these homicide events.

- In more than one in four cases ($n = 15$, 25.9%), a child witness was present during the event. A total of 22 children were exposed to the intimate partner homicide and survived.
- Almost 40% of all intimate partner homicides ($n = 23$, 39.7%) involved more than one decedent (e.g., an alleged offender killing more than one person or him or herself).
- Four intimate partner homicide victims (6.9%) were affiliated with the military. This affiliation may have included being on active duty, a veteran, or a military dependent.
- One victim was sexually assaulted at the time of the fatal incident.
- A majority of intimate partner homicides took place at a residence ($n = 52$, 89.7%), followed by street, alley, or sidewalk ($n = 3$, 5.2%).
- Precipitating factors are factors that immediately preceded the event. Precipitating factors/events were known in 67.2% of intimate partner homicide events ($n = 39$). Some cases ($n = 15$, 38.5%) had multiple precipitating factors. The most commonly reported precipitating factor was the termination or break-up of a relationship ($n = 15$, 38.5%), followed by a new partner or the perception of a new partner ($n = 15$, 38.5%), and financial issues ($n = 6$, 15.4%)

Tables 8 – 13 and Figures 5 – 6 provide additional details about intimate partner homicide.

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TABLE 8. INTIMATE PARTNER HOMICIDE VICTIMS IN VIRGINIA (N = 58): 2008			
	No.	%	Rate
SEX			
Female	46	79.3	1.5
Male	12	20.7	0.4
RACE			
White	31	53.4	0.7
Black	25	43.1	2.2
Other	2	3.4	0.6
ETHNICITY			
Hispanic	1	1.7	0.3
AGE			
18 - 24	14	24.1	1.8
25 - 34	12	20.7	1.1
35 - 44	14	24.1	1.2
45 - 54	9	15.5	0.8
55 - 64	7	12.1	0.8
> 64	2	3.4	0.2
OCME DISTRICT			
Central	23	39.7	1.4
Northern	11	19.0	0.6
Tidewater	7	12.1	0.6
Western	17	29.3	1.3
HEALTH PLANNING REGION			
Central	19	32.8	1.9
Eastern	8	13.8	0.6
Northern	10	17.2	0.6
Northwest	7	12.1	0.8
Southwest	14	24.1	1.3
Out of State	0	0.0	--
Unknown	0	0.0	--
RELATIONSHIP OF VICTIM TO ALLEGED OFFENDER			
Spouse	20	34.5	--
Ex-Spouse	1	1.7	--
Boy/Girlfriend	24	41.4	--
Ex-Boy/Girlfriend	13	22.4	--
Other	0	0.0	--
TOTAL	58	100.0	1.0

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

TABLE 9. INTIMATE PARTNER HOMICIDES IN VIRGINIA BY LOCALITIES WITH THREE OR MORE VICTIMS: 2008		
LOCALITY	No.	Rate
Chesterfield County	4	1.8
Fairfax County	3	0.4
Henrico County	3	1.4
Roanoke City	3	4.2
TOTAL	13	--

In 2008, 22.4% of all family and intimate partner homicides occurred in these four localities. Roanoke City had the highest intimate partner homicide rate among these localities (4.2). Rates were calculated per 100,000 persons.

INTIMATE PARTNER HOMICIDE

**TABLE 10. INTIMATE PARTNER HOMICIDE VICTIMS IN VIRGINIA
BY RACE/ETHNICITY AND SEX (N = 58): 2008**

	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
White	24	52.2	1.1	7	58.3	0.3	31	53.4	0.7
Black	20	43.5	3.3	5	41.7	0.9	25	43.1	2.2
Other	2	4.3	1.1	0	0.0	0.0	2	3.4	0.6
TOTAL	46	100.0	1.5	12	100.0	0.4	58	100.0	1.0
Hispanic	1	2.2	0.6	0	0.0	0.0	1	1.7	0.3

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons

**TABLE 11. INTIMATE PARTNER HOMICIDE VICTIMS IN VIRGINIA
BY AGE AND SEX (N = 58): 2008**

	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
18 - 24	12	26.1	3.3	2	16.7	0.5	14	24.1	1.8
25 - 34	11	23.9	2.1	1	8.3	0.2	12	20.7	1.1
35 - 44	11	23.9	1.9	3	25.0	0.5	14	24.1	1.2
45 - 54	4	8.7	0.7	5	41.7	0.9	9	15.5	0.8
55 - 64	6	13.0	1.3	1	8.3	0.2	7	12.1	0.8
> 64	2	4.3	0.4	0	0.0	0.0	2	3.4	0.2
TOTAL	46	100.0	1.5	12	100.0	0.4	58	100.0	1.0

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons

INTIMATE PARTNER HOMICIDE

**TABLE 12. INTIMATE PARTNER HOMICIDE VICTIMS IN VIRGINIA
BY FATAL AGENCY AND SEX (N = 58): 2008**

FATAL AGENCY	Female		Male		Total	
	No.	%	No.	%	No.	%
Firearm	24	52.2	5	41.7	29	50.0
Sharp Instrument	11	23.9	7	58.3	18	31.0
Personal Weapon	1	2.2	0	0.0	1	1.7
Blunt Instrument	5	10.9	0	0.0	5	8.6
Strangulation or Choking	6	13.0	0	0.0	6	10.3
Motor Vehicle	0	0.0	0	0.0	0	0.0
Drowning	0	0.0	0	0.0	0	0.0
Pushing or Slamming or Throwing Against an Object	0	0.0	0	0.0	0	0.0
Fire or Smoke Inhalation	2	4.3	0	0.0	2	3.4
Smothering or Suffocation	0	0.0	0	0.0	0	0.0
Poisoning or Carbon Monoxide	0	0.0	0	0.0	0	0.0
Other	1	2.2	0	0.0	1	1.7
Unknown	0	0.0	0	0.0	0	0.0

More than one fatal agency can be used in a homicide, therefore, fatal agencies will neither sum to the total the number of intimate partner homicides for females (46) or males (12), nor sum to 100%.

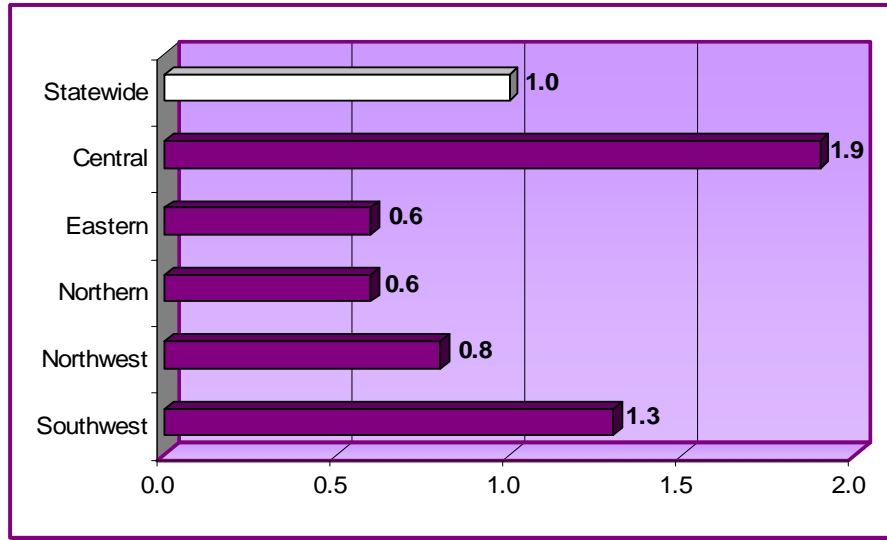
**TABLE 13. PRECIPITATING EVENTS IN ADULT
INTIMATE PARTNER HOMICIDE (N = 39): 2008**

	No.	%
Termination of Relationship/Break Up	15	38.46
New Partner or the Perception of a New Partner	15	38.46
Financial Issues	6	15.38
Argument over Property	4	10.26
Argument over IP feeling "Disrespected"	3	7.69
Self Defense	3	7.69
Argument-Not Specified by Sources	2	5.13
Argument about or Attempted Unwanted Sexual Contact	1	2.56
Other	2	5.13

Precipitating factors were determined in sixty-seven percent ($n = 39, 67.2\%$) of cases. Some cases had more than one identified precipitating factor. Thus, the total number of precipitating factors will not sum to the total number of cases and the percent will not sum to 100.

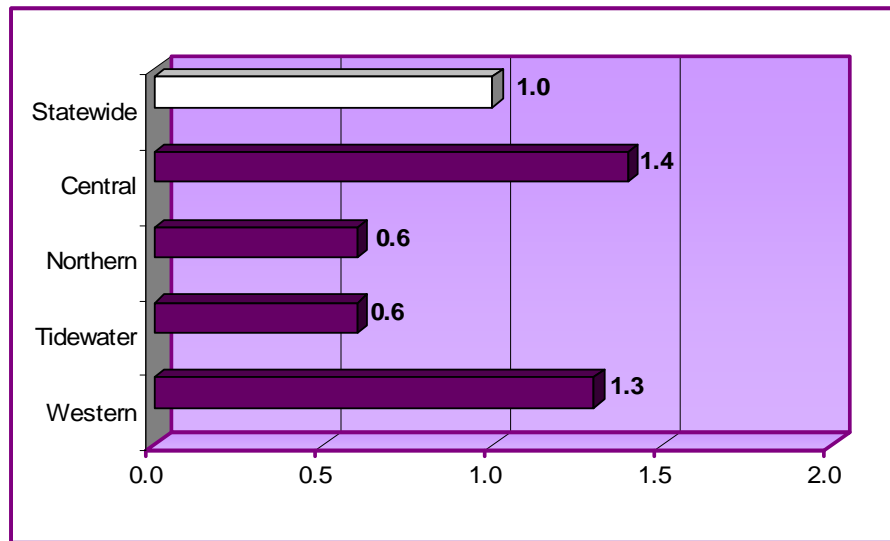
INTIMATE PARTNER HOMICIDE

Figure 5. Adult Intimate Partner Homicide Rate by Virginia Health Planning Region (N = 58): 2008*



*Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

Figure 6. Adult Intimate Partner Homicide Rate by Virginia OCME District (N = 58): 2008



*Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

Intimate Partner Associated Homicide

The category intimate partner associated homicide illustrates the broad effect of domestic violence-related homicide on a community. These victims were killed as a result of violence or discord stemming from an intimate partner relationship. Victims could include alleged abusers killed by law enforcement, or persons “caught in the crossfire” of intimate partner violence such as friends, co-workers, neighbors, relatives, new intimate partners, or bystanders. This category also includes children who were killed in retaliation for a partner leaving a relationship. In 2008, there were **34** intimate partner associated homicide events and **41** intimate partner associated homicide victims. The number of intimate partner associated homicide victims for 2008 was the same as the number for 2007. Tables 14 – 18 provide additional details regarding intimate partner associated homicide.

- The average age of victims was 32.88 years ($SD = 17.02$). Victims ranged in age from one to 78 years of age. Half of all victims were 29 years of age or younger.
- The average ages for male and female victims were 32.86 ($SD = 16.00$) and 33.00 ($SD = 24.00$), respectively. Female victims ranged from two to 68 years; male victims ranged from one to 78 years.
- Males were killed at over four and a half times the rate of females.
- Blacks had the highest rate of intimate partner associated homicide. This rate was four times the rate of Whites.
- Those in the 15 – 24 age group had the highest intimate partner associated homicide rate.
- The Western OCME District had the highest intimate partner associated homicide rate.
- The Southwest and Central Health Planning Regions had the highest intimate partner associated homicide rates (1.1 and 1.0, respectively). Over half of all intimate partner associated homicides ($n = 28$, 68.3%) occurred in these two Regions.
- When examining race and gender, Black males had the highest intimate partner associated homicide rate. This rate was three times the rate of the second highest group, White men.
- Males in the 25 – 34 age group had the highest rate of intimate partner associated homicide.
- Localities in which three or more intimate partner associated homicides occurred were Richmond City, Roanoke City, and Stafford County. In 2008, 22.0% of all intimate partner associated homicides occurred in these three localities. Further, Roanoke City had the highest intimate partner associated homicide rate among these localities.
- Most intimate partner associated homicide victims ($n = 28$, 68.3%) were killed by

INTIMATE PARTNER ASSOCIATED HOMICIDE

a firearm. The second most frequently reported fatal agency was a sharp instrument ($n = 9$, 22.0%)

- Most homicides ($n = 25$, 61.0%) occurred at a residence or residential setting. The second most frequently reported place was a business or store ($n = 7$, 17.1%)
- One victim was a law enforcement officer responding to a domestic violence call and one victim was killed by a law enforcement officer who was responding to domestic violence call.
- In twelve intimate partner associated homicide events (44.1%), there was at least one additional person who was attacked but survived. The total number of survivors was 22.⁴
- A child was present or otherwise exposed to the homicide in nine events (26.5%). The total number of children who were exposed to the event and lived was 12.⁵
- Precipitating factors are factors that immediately preceded the event. Precipitating factors/events were known in 91.2% of the intimate partner associated homicide events ($n = 31$).⁶ Some events ($n = 10$, 32.3%) had multiple precipitating factors. The most commonly reported precipitating factor was an argument between two persons fighting over the same intimate partner ($n = 11$, 35.5%), followed by a new partner or the perception of a new partner ($n = 6$, 19.4%) and a “bystander” intervening on behalf of someone being physically or emotionally abused ($n = 6$, 19.4%).

⁴ There were 34 intimate partner associated events.

⁵ *Ibid*

⁶ *Ibid*

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TABLE 14. INTIMATE PARTNER ASSOCIATED HOMICIDE VICTIMS IN VIRGINIA (N = 41): 2008

	No.	%	Rate
SEX			
Female	6	14.6	0.2
Male	35	85.4	0.9
RACE			
White	22	53.7	0.4
Black	19	46.3	1.2
Other	0	0.0	0.0
ETHNICITY			
Hispanic	2	4.9	0.4
AGE			
< 1	0	0.0	0.0
1 - 4	2	4.9	0.5
5 - 14	0	0.0	0.0
15 - 24	12	29.3	1.1
25 - 34	11	26.8	1.0
35 - 44	6	14.6	0.5
45 - 54	5	12.2	0.4
55 - 64	2	4.9	0.2
> 64	3	7.3	0.3
OCME DISTRICT			
Central	17	41.5	0.8
Northern	5	12.2	0.2
Tidewater	3	7.3	0.2
Western	16	39.0	1.0
HEALTH PLANNING REGION			
Central	13	31.7	1.0
Eastern	3	7.3	0.2
Northern	4	9.8	0.2
Northwest	6	14.6	0.5
Southwest	15	36.6	1.1
Out of State	0	0.0	--
Unknown	0	0.0	--
TOTAL	41	100.0	0.5

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

TABLE 15. INTIMATE PARTNER ASSOCIATED HOMICIDES IN VIRGINIA BY LOCALITIES WITH THREE OR MORE VICTIMS: 2008

LOCALITY	No.	Rate
Richmond City	3	1.5
Roanoke City	3	3.2
Stafford County	3	2.5
TOTAL	9	--

In 2008, 22.0% of all intimate partner associated homicides occurred in these three localities. Roanoke City had the highest intimate partner associated homicide rate among these localities (3.2). Rates were calculated per 100,000 persons.

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**TABLE 16. INTIMATE PARTNER ASSOCIATED HOMICIDE VICTIMS IN VIRGINIA
BY RACE/ETHNICITY AND SEX (N = 41): 2008**

	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
White	3	50.0	0.1	19	54.3	0.7	22	53.7	0.4
Black	3	50.0	0.4	16	45.7	2.1	19	46.3	1.2
Other	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0
TOTAL	6	100.0	0.2	35	100.0	0.9	41	100.0	0.5
Hispanic	0	0.0	0.0	2	5.7	0.7	2	4.9	0.4

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

**TABLE 17: INTIMATE PARTNER ASSOCIATED HOMICIDE VICTIMS IN VIRGINIA
BY AGE AND SEX (N = 41): 2008**

	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
< 1	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0
1 - 4	1	16.7	0.5	1	2.9	0.5	2	4.9	0.5
5 - 14	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0
15 - 24	2	33.3	0.4	10	28.6	1.8	12	29.3	1.1
25 - 34	0	0.0	0.0	11	31.4	2.0	11	26.8	1.0
35 - 44	1	16.7	0.2	5	14.3	0.9	6	14.6	0.5
45 - 54	1	16.7	0.2	4	11.4	0.7	5	12.2	0.4
55 - 64	0	0.0	0.0	2	5.7	0.5	2	4.9	0.2
> 64	1	16.7	0.2	2	5.7	0.5	3	7.3	0.3
TOTAL	6	100.0	0.2	35	100.0	0.9	41	100.0	0.5

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

INTIMATE PARTNER ASSOCIATED HOMICIDE

**TABLE 18. INTIMATE PARTNER ASSOCIATED HOMICIDE VICTIMS IN VIRGINIA
BY FATAL AGENCY AND SEX (N = 41): 2008**

FATAL AGENCY	Female		Male		Total	
	No.	%	No.	%	No.	%
Firearm	5	83.3	23	65.7	28	68.3
Sharp Instrument	1	16.7	8	22.9	9	22.0
Personal Weapon	0	0.0	1	2.9	1	2.4
Blunt Instrument	0	0.0	2	5.7	2	4.9
Strangulation or Choking	0	0.0	0	0.0	0	0.0
Motor Vehicle	0	0.0	1	2.9	1	2.4
Drowning	0	0.0	0	0.0	0	0.0
Pushing/Slamming / Throwing Against Object	0	0.0	0	0.0	0	0.0
Fire or Smoke Inhalation	0	0.0	0	0.0	0	0.0
Smothering or Suffocation	0	0.0	0	0.0	0	0.0
Poisoning or Carbon Monoxide	0	0.0	0	0.0	0	0.0
Other	0	0.0	0	0.0	0	0.0
Unknown	0	0.0	0	0.0	0	0.0

More than one fatal agency can be used in a homicide, therefore, fatal agencies will neither sum to the total the number of family and intimate partner homicides for females (6) or males (31), nor sum to 100%.

Understanding Risk: Intimate Partner Risk Factors

Risk factors increase the probability of intimate partner homicide. Understanding the level of risk associated with certain situations and behaviors is important for the development of intervention and prevention strategies. This section summarizes the risks associated with intimate partner homicide events. Information was obtained by examining OCME death records, police and court reports, and news articles related to intimate partner homicide. The information presented is valuable but likely provides a conservative estimate of the true magnitude of risk involved in these events. Information regarding the behaviors exhibited by the perpetrator of abuse and the abuse victim was obtained for 82.8% ($n = 48$) of adult intimate partner homicide events. Tables 19 and 20 provide additional information regarding risk factors.

- The most frequently occurring behaviors exhibited by the perpetrator of abuse included the following: abusing alcohol ($n = 15$, 31.3%), using illegal drugs ($n = 15$, 31.3%), and threatening to harm the abuse victim's family members and/or friends ($n = 12$, 25.0%).
- The most frequently occurring behaviors exhibited by the abuse victim included beginning an intimate relationship with a new person or having the abuser believe this to be true ($n = 16$, 33.3%), and using drugs illegally ($n = 6$, 12.5%).
- Almost half ($n = 21$, 43.8%) of intimate partners terminated their relationship prior to the fatal injury. The decedent or the alleged offender may have initiated the termination.
- A history of physical abuse between the intimate partners was noted in 41.7% of cases ($n = 20$).
- In 14.6% ($n = 7$) of cases, one partner attempted to leave or force the other out of the home.
- In 60.4% of cases ($n = 29$), a third party such as a friend, co-worker, law enforcement officer, or neighbor knew about the abuse.
- Almost one in four cases ($n = 11$, 22.9%) had a history of previous domestic violence calls to law enforcement.
- A majority of intimate partner homicide victims ($n = 43$, 89.6%) lived with their partner at some time during their relationship. Of these 43 persons, 67.4% ($n = 29$) lived with the alleged offender *at the time* of the fatal injury.
- More than one in five victims ($n = 11$, 22.9%) had children under 18 in common with the alleged offender.
- Prior to the fatal event, 8.3% of IPH homicide victims ($n = 4$) had some type of civil court involvement with their intimate partner. This involvement may have included proceedings related to divorce, child support, child visitation or custody, or protection orders.

UNDERSTANDING RISK: IP RISK FACTORS

TABLE 19. BEHAVIORS PRESENT IN VIRGINIA INTIMATE PARTNER RELATIONSHIPS PRIOR TO HOMICIDE (N = 48): 2008*

	No.	%
The perpetrator of abuse...		
Abused alcohol	15	31.3
Used drugs illegally	15	31.3
Threatened to harm the victim's family members or friends	12	25.0
Was arrested or convicted of non-domestic violence offenses	11	22.9
Exhibited jealousy	10	20.8
Threatened to kill the abuse victim	7	14.6
Was unemployed or recently lost a job	7	14.6
Exhibited controlling behaviors	7	14.6
Threatened or attempted to commit suicide	6	12.5
Experienced financial hardship	5	10.4
Stalked the abuse victim	4	8.3
Threatened the victim with a firearm or other weapon	4	8.3
Was violent outside of the home relationship	2	4.2
Harmed intimate partner's or family's pet	1	2.1
Destroyed the intimate partner's property	1	2.1
Choked or strangled the abuse victim	0	0.0
The abuse victim...		
Began an intimate relationship with a new person (or perpetrator believed this to be true)	16	33.3
Used drugs illegally	6	12.5
Expressed a belief that the intimate partner was capable of killing her/him	5	10.4
Had a child who was not the biological child of the intimate partner	3	6.3
Threatened or attempted suicide	2	4.2

*Some cases had more than one risk factor present. These factors were documented as part of the history of the intimate partner relationship. This table lists the number of intimate partner homicide cases indicating the presence of a given risk factor.

TABLE 20. EVENTS PRESENT IN VIRGINIA INTIMATE PARTNER RELATIONSHIPS PRIOR TO HOMICIDE (N = 48): 2008*

	No.	%
A third party (e.g., friend, law enforcement officer, coworker, etc.) knew of the abuse	29	60.4
The relationship had ended or was ending**	21	43.8
Intimate partner relationship had a history of physical abuse	20	41.7
Within the past year, either partner had moved out of the home that they shared	13	27.1
There was evidence that 911 calls regarding domestic violence had been placed	11	22.9
The intimate partners were involved in civil court proceedings	4	8.3
Either partner was attempting to leave or was forced out of the home by the other partner	3	6.3
A protective order was obtained by an intimate partner (either abuse victim or abuser)	1	2.1

*Some cases had more than one risk factor present. These factors were documented as part of the history of the intimate partner relationship. This table lists the number of intimate partner homicide cases indicating the presence of a given risk factor.

**Evidence demonstrated that one or both parties attempted to end the relationship. In a few cases, partners continued to live together after their relationship ended.

Child Homicide By Caregiver

Child homicide by caregiver (CHC) victims were killed by a parent, babysitter, or other person responsible for the child's care or supervision. In 2008, there were 38 homicide victims in Virginia under the age of 18. Of these children, **15** (39.5%) were killed by caregivers. Between 2007 and 2008, CHC deaths increased by 36.7%. Tables 21 – 25 provide additional details regarding CHC victims. The following information provides a summary of findings.

- Ages of CHC victims ranged from infant (under 12 months) to 12 years of age. The most frequently occurring age category was infant ($n = 10$, 66.7%).
- Most children killed by caregivers were female ($n = 11$, 73.3%). Females had a CHC rate that was three times the rate for males.
- Children under the age of one had the highest CHC rate (9.3).
- Over half of children killed were Black ($n = 8$, 53.3%). In addition, Black children had the highest rate of CHC.
- The highest percentage of CHC took place in the Tidewater OCME District ($n = 6$, 40.0%), followed by the Western OCME District ($n = 5$, 33.3%). The Tidewater and Western OCME Districts had the highest rates of CHC (both 1.5).
- Among Health Planning Regions, the highest homicide rate occurred in the Southwest Region.
- Most victims were killed by their biological parent ($n = 11$, 73.3%) or by their parent's intimate partner ($n = 2$, 13.3%).
- One in five CHC fatal injuries occurred in the city of Norfolk ($n = 3$, 20.0%).
- Regarding race/ethnicity and sex, Black females had the highest rate of CHC.
- Regarding age and sex, female children under the age of one had the highest rate of CHC.
- Over half of children were killed by a personal weapon ($n = 10$, 66.7%). This may have included being shaken or beaten.
- One child was killed as part of an attempted homicide-suicide event. The alleged offender killed the child and then attempted to kill his or herself but failed.
- All victims were killed at a residence ($n = 15$, 100.0%). In 60.0% of cases, it was difficult to ascertain the exact time of the fatal injury.
- The average age of alleged offender was 24.93 years ($SD = 3.2$) with alleged offenders ranging from 20 to 31 years of age. Half of alleged offenders were 25 years of age or less.

CHILD HOMICIDE BY CAREGIVER

TABLE 21. CHILD HOMICIDE BY CAREGIVER VICTIMS IN VIRGINIA (N = 15): 2008			
	No.	%	Rate
SEX			
Female	11	73.3	1.2
Male	4	26.7	0.4
RACE			
White	7	46.7	0.5
Black	8	53.3	1.8
Other	0	0.0	0.0
ETHNICITY			
Hispanic	0	0.0	0.0
AGE			
< 1	10	66.7	9.3
1 - 4	4	26.7	1.0
5 - 14	1	6.7	0.1
15 -17	0	0.0	0.0
OCME DISTRICT			
Central	3	20.0	0.6
Northern	1	6.7	0.2
Tidewater	6	40.0	1.5
Western	5	33.3	1.5
HEALTH PLANNING REGION			
Central	1	6.7	0.3
Eastern	6	40.0	1.4
Northern	0	0.0	0.0
Northwest	3	20.0	1.1
Southwest	5	33.3	1.9
Out of State	0	0.0	--
Unknown	0	0.0	--
RELATIONSHIP OF VICTIM TO ALLEGED OFFENDER			
Biological Child	11	73.3	--
Step Child	1	6.7	--
Child of Alleged Offender's IP	2	13.3	--
Unknown	1	6.7	--
TOTAL	15	100.0	0.8

TABLE 22. CHILD HOMICIDE BY CAREGIVER VICTIMS IN VIRGINIA BY LOCALITIES WITH THREE OR MORE VICTIMS: 2008		
LOCALITY	No.	Rate
Norfolk City	3	5.0

In 2008, 20.0% of all child homicide by caregiver deaths occurred in Norfolk. Norfolk also had the highest rate among localities (5.0). Rates were calculated per 100,000 persons.

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

CHILD HOMICIDE BY CAREGIVER

**TABLE 23. CHILD HOMICIDE BY CAREGIVER VICTIMS IN VIRGINIA
BY RACE/ETHNICITY AND SEX (N = 15): 2008**

	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
White	5	45.5	0.8	2	50.0	0.3	7	46.7	0.5
Black	6	54.5	2.8	2	50.0	0.9	8	53.3	1.8
Other	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0
TOTAL	11	100.0	1.2	4	100.0	0.4	15	100.0	0.8
Hispanic	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

**TABLE 24. CHILD HOMICIDE BY CAREGIVER VICTIMS
IN VIRGINIA BY AGE AND SEX (N = 15): 2008**

	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
< 1	8	72.7	15.3	2	50.0	3.7	10	66.7	9.3
1 - 4	2	18.2	1.0	2	50.0	0.9	4	26.7	1.0
5 - 14	1	9.1	0.2	0	0.0	0.0	1	6.7	0.1
15 - 17	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0
TOTAL	11	100.0	1.2	4	100.0	0.4	15	100.0	0.8

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

**TABLE 25. CHILD HOMICIDE BY CAREGIVER VICTIMS IN VIRGINIA BY
FATAL AGENCY AND SEX (N = 15): 2008**

FATAL AGENCY	Female		Male		Total	
	No.	%	No.	%	No.	%
Firearm	0	0.0	0	0.0	0	0.0
Sharp Instrument	1	9.1	0	0.0	1	6.7
Personal Weapon	6	54.5	4	100.0	10	66.7
Blunt Instrument	0	0.0	0	0.0	0	0.0
Strangulation or Choking	0	0.0	0	0.0	0	0.0
Motor Vehicle	0	0.0	0	0.0	0	0.0
Drowning	0	0.0	0	0.0	0	0.0
Pushing/Slamming/Throwing Against Object	1	9.1	0	0.0	1	6.7
Fire or Smoke Inhalation	0	0.0	0	0.0	0	0.0
Smothering or Suffocation	0	0.0	0	0.0	0	0.0
Poisoning or Carbon Monoxide	0	0.0	0	0.0	0	0.0
Medical and/or Nutritional Neglect	3	27.3	0	0.0	3	20.0
Other	0	0.0	0	0.0	0	0.0
Unknown	0	0.0	0	0.0	0	0.0

More than one fatal agency can be used in a homicide, therefore, fatal agencies will neither sum to the total the number of child homicide by caregiver victims for females (11) or males (4), nor sum to 100%.

Other Family Homicide

Other family homicide (OFH) victims were those persons killed by family members who were not included in the other homicide categories in this report. These homicide victims were related to the alleged offender by blood or marriage, and could include relationships such as a grandparent, [step]sibling, [step]parent, in-law, aunt, or uncle. In 2008, there were 28 other family homicide events with **29** homicide victims. This represents a 45.0% increase in the number of OFH victims over the previous year. Tables 26 – 30 provide additional details regarding OFH victims. The following information provides a summary of findings.

- The average age of OFH victims was 45.55 years of age ($SD = 20.38$), with victims ranging from 5 to 83 years of age. Half of all victims were 48.00 years of age or older.
- Males had an OFH rate more than one and a half times the rate for females.
- Blacks represented less than half of OFH victims but had an OFH homicide rate more than two and a half times that of Whites.
- The most frequently occurring age group for OFH victims was 45 – 54 years of age. The highest rate of OFH occurred among those aged 45 – 54 and 55 – 64 (both 0.6).
- The Central OCME District had the highest OFH rate. This area represented 55.2% of all OFH homicides.
- Among Health Planning Regions, the Central Region had the highest OFH rate.
- One in three OFH victims were killed by his or her biological child ($n = 10$, 34.5%).
- Regarding race and sex, the highest rate of OFH homicide was among Black males.
- Regarding age and sex, the highest rate of OFH homicide was among males 45 – 54 years of age.
- Almost one in four decedents ($n = 7$, 24.1%) had a permanent physical limitation at the time of the fatal injury.
- The most frequently reported fatal agency was a firearm ($n = 13$, 44.8%), followed by a sharp instrument ($n = 6$, 20.7%), and strangulation/choking ($n = 4$, 13.8%).
- The most frequently reported premise of fatal injury was a residence ($n = 28$, 96.6%).
- Two victims (7.0%) were sexually assaulted during the fatal injury.
- Precipitating factors are factors that immediately preceded the event. The precipitating factors/events were known in 57.1% of other family homicide events

($n = 16$).⁷ Common precipitating factors included argument over property ($n = 3$, 18.8%), argument over financial issues ($n = 3$, 18.8%), and an argument over an existing mental health issue ($n = 3$, 18.8%).

- Alleged offenders ranged from 10 to 81 years of age with the average being 35.26 years ($SD = 18.9$). Half of all alleged offenders were less than 26 years of age.
- Most alleged offenders were male ($n = 25$, 89.3%).⁸
- Almost half of alleged offenders were White ($n = 13$, 48.1%). The second most frequently reported race of alleged offender was Black ($n = 12$, 44.4%).⁹

⁷ There were 28 other family homicide events.

⁸ There were 28 alleged offenders.

⁹ The race and ethnicity of alleged offenders was known for 96.4% ($n = 27$) of the 28 OFH events.

OTHER FAMILY HOMICIDE

TABLE 26. OTHER FAMILY HOMICIDE VICTIMS IN VIRGINIA (N = 29): 2008			
	No.	%	Rate
SEX			
Female	11	37.9	0.3
Male	18	62.1	0.5
RACE			
White	15	51.7	0.3
Black	12	41.4	0.8
Other	2	6.9	0.5
ETHNICITY			
Hispanic	1	3.4	0.2
AGE			
< 1	0	0.0	0.0
1 - 4	0	0.0	0.0
5 - 14	2	6.9	0.2
15 - 24	5	17.2	0.5
25 - 34	0	0.0	0.0
35 - 44	5	17.2	0.4
45 - 54	7	24.1	0.6
55 - 64	5	17.2	0.6
> 64	5	17.2	0.5
OCME DISTRICT			
Central	16	55.2	0.8
Northern	6	20.7	0.2
Tidewater	3	10.3	0.2
Western	4	13.8	0.2
HEALTH PLANNING REGION			
Central	13	44.8	1.0
Eastern	4	13.8	0.2
Northern	5	17.2	0.2
Northwest	2	6.9	0.2
Southwest	4	13.8	0.3
Out of State	1	3.4	--
Unknown	0	0.0	--
RELATIONSHIP OF VICTIM TO ALLEGED OFFENDER			
Parent	10	34.5	--
Sibling	4	13.8	--
Biological Child	3	10.3	--
Cousin	3	10.3	--
In-Law	3	10.3	--
Step Parent	3	10.3	--
Other	3	10.3	--
TOTAL	29	100.0	0.4

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

TABLE 27. OTHER FAMILY HOMICIDE VICTIMS IN VIRGINIA BY LOCALITIES WITH TWO OR MORE VICTIMS (N = 29): 2008		
LOCALITY	No.	Rate
Richmond City	7	3.5
Fairfax County	3	0.3
Henrico County	2	0.7
Powhatan County	2	7.1
Virginia Beach City	2	0.5
TOTAL	16	--

In 2008, 55.2% of all other family homicides occurred in these five localities. Powhatan County had the highest other family homicide rate among these localities (7.1). Rates were calculated using population estimates from the U.S. Bureau of the Census. Rates are per 100,000 persons.

OTHER FAMILY HOMICIDE

**TABLE 28. OTHER FAMILY HOMICIDE VICTIMS IN VIRGINIA
BY RACE/ETHNICITY AND SEX (N = 29): 2008**

	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
White	5	45.5	0.2	10	55.6	0.4	15	51.7	0.3
Black	4	36.4	0.5	8	44.4	1.1	12	41.4	0.8
Other	2	18.2	0.9	0	0.0	0.0	2	6.9	0.5
TOTAL	11	100.0	0.3	18	100.0	0.5	29	100.0	0.4
Hispanic	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0

Rates were calculated using population estimates from the US Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

**TABLE 29: OTHER FAMILY HOMICIDE VICTIMS IN VIRGINIA
BY AGE AND SEX (N = 29): 2008**

	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
< 1	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0
1 - 4	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0
5 - 14	1	9.1	0.2	1	5.6	0.2	2	6.9	0.2
15 - 24	1	9.1	0.2	4	22.2	0.7	5	17.2	0.5
25 - 34	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0
35 - 44	2	18.2	0.3	3	16.7	0.5	5	17.2	0.4
45 - 54	1	9.1	0.2	6	33.3	1.1	7	24.1	0.6
55 - 64	2	18.2	0.4	3	16.7	0.7	5	17.2	0.6
> 64	4	36.4	0.7	1	5.6	0.3	5	17.2	0.5
TOTAL	11	100.0	0.3	18	100.0	0.5	29	100.0	0.4

Rates were calculated using population estimates from the US Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

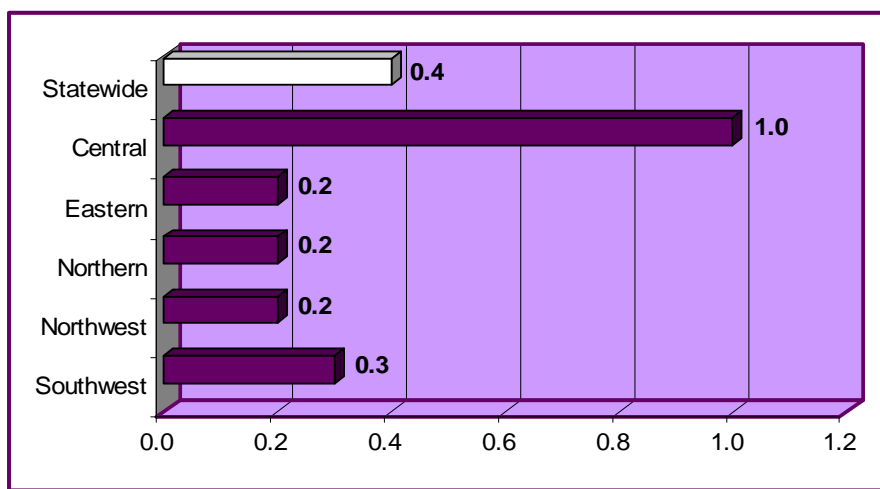
**TABLE 30. OTHER FAMILY HOMICIDE VICTIMS IN VIRGINIA
BY FATAL AGENCY AND SEX (N = 29): 2008**

FATAL AGENCY	Female		Male		Total	
	No.	%	No.	%	No.	%
Firearm	1	9.1	12	66.7	13	44.8
Sharp Instrument	4	36.4	2	11.1	6	20.7
Personal Weapon	2	18.2	1	5.6	3	10.3
Blunt Instrument	2	18.2	1	5.6	3	10.3
Strangulation or Choking	2	18.2	2	11.1	4	13.8
Motor Vehicle	0	0.0	0	0.0	0	0.0
Drowning	0	0.0	0	0.0	0	0.0
Pushing/Slamming /Throw Against an Object	0	0.0	0	0.0	0	0.0
Fire or Smoke Inhalation	0	0.0	0	0.0	0	0.0
Smothering or Suffocation	0	0.0	1	5.6	1	3.4
Poisoning or Carbon Monoxide	0	0.0	0	0.0	0	0.0
Other	0	0.0	0	0.0	0	0.0
Unknown	0	0.0	0	0.0	0	0.0

More than one fatal agency can be used in a homicide, therefore, fatal agencies will neither sum to the total the number of family and intimate partner homicides for females (11) or males (18), nor sum to 100%.

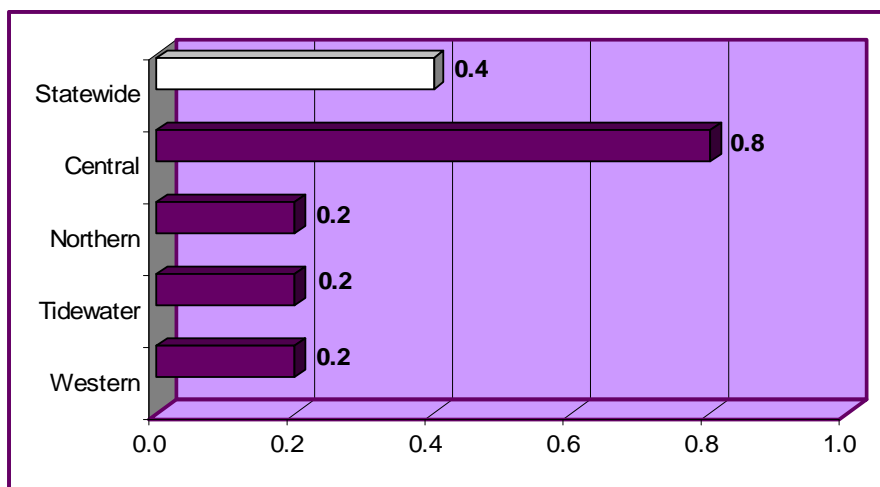
OTHER FAMILY HOMICIDE

Figure 7: Other Family Homicide Rate by Virginia Health Planning Region (N = 29): 2008*



*Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

Figure 8: Other Family Homicide Rate by Virginia OCME District (N = 29): 2008*



*Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

Homicide – Suicide

A homicide-suicide event is a homicide event followed within seven days by the alleged offender's suicide. In 2008, there were 26 homicide-suicide events with a total of 32 homicide victims. Of these 26 events, 92.3% ($n = 24$) were due to family or intimate partner conflict.

There were **29** homicide victims associated with the 24 FIP homicide-suicide events. Tables 31 – 35 provide additional information about these cases. The following are highlights.

- The average age for a homicide-suicide victim was 36.45 years ($SD = 17.7$) with ages ranging from infant (12 months or less) to 81 years of age. Half of victims were 37 years of age or older. One in ten victims was under the age of 18 ($n = 3$, 10.3%).
- The majority of homicide victims were female ($n = 24$, 82.8%). Females also had a higher rate of homicide-suicide than males.
- Most victims were White ($n = 18$, 62.1%); however, the rate for Black victims was over two times the rate for White victims.
- Those 35 to 44 years old had the highest FIP homicide-suicide rate.
- The Western OCME district had the highest rate of FIP homicide-suicide victims (0.6).
- Almost one in three FIP homicide-suicide victims were injured in the Southwest Health Planning Region ($n = 9$, 31.0%). This region also had the highest rate of FIP homicide-suicide.
- Most homicide-suicides were committed by a current or former intimate partner ($n = 21$, 72.4%).
- Almost one in three victims was killed by a spouse ($n = 9$, 31.0%). The next most frequently reported alleged offenders were the current boyfriend/girlfriend ($n = 5$, 17.2%) and the former boyfriend/girlfriend ($n = 5$, 17.2%).
- Regarding race/ethnicity and gender, Black females had the highest rate of FIP homicide-suicide.
- Regarding gender and age, females between the ages of 35 – 44 had the highest rate of FIP homicide-suicide, followed by females ages 15 – 24.
- In most cases, a firearm was used to inflict the fatal injury ($n = 25$, 86.2%). The second most common fatal injury reported was a sharp instrument ($n = 4$, 13.8%).
- Most fatal injuries occurred at a residence ($n = 28$, 96.6%).
- In two cases, the decedent was either pregnant or the alleged offender believed that the decedent was pregnant at the time of the fatal injury.

- In one case, the decedent was at his or her place of employment when the fatal injury occurred.

The Alleged Offender¹⁰

- Alleged offenders ranged from 18 to 81 years of age with the average age being 40.35 years ($SD = 17.1$). Half of alleged offenders were 41 years of age or older. Most offenders were male ($n = 22, 95.7\%$).
- In more than half of all cases, the alleged offender was White ($n = 13, 56.5\%$). The second most frequently reported race for alleged offender was Black ($n = 9, 39.1\%$).
- Seventeen percent ($n = 4, 17.4\%$) of alleged offenders had a military affiliation. This affiliation may have been as an active duty member, veteran, or dependent.
- Almost 40% of alleged offenders had positive blood alcohol levels at the time of the fatal event ($n = 9, 39.1\%$). Blood alcohol levels ranged from .01 to .32. Thirty percent of alleged offenders were legally intoxicated at the time of the fatal event ($n = 7, 30.4\%$).
- Five alleged offenders (21.7%) had at least one additional substance in his or her blood at the time of the fatal injury. Additional substances could have been illegal drugs (e.g., cocaine, marijuana, and heroin) or legal substances (e.g., antidepressants or pain medication)
- Evidence of mental health issues (e.g., bipolar disorder, depression, etc.) was noted among 17.4% ($n = 4$) of alleged offenders.
- Survivors were noted in four homicide-suicide events ($n = 4$). Survivors are those persons who were attacked during the homicide suicide event but did not die.
- A total of 14 children were present and exposed to the violence during seven homicide-suicide events. This exposure could have included seeing or hearing the event, finding the decedents after the event, or being attacked but surviving.
- Precipitating factors are factors that immediately preceded the event.¹¹ Precipitating factors/events were known in 70.8% of homicide-suicide events ($n = 17$). The most commonly reported precipitating factor was the termination or break-up of a relationship ($n = 7, 41.2\%$), followed by a new partner or the perception of a new partner ($n = 5, 29.4\%$).

¹⁰ There were 24 alleged offenders; however, data were available for 23.

¹¹ There were 24 homicide-suicide events.

TABLE 31. FAMILY AND INTIMATE PARTNER HOMICIDE-SUICIDE VICTIMS IN VIRGINIA (N = 29): 2008			
	No.	%	Rate
SEX			
Female	24	82.8	0.6
Male	5	17.2	0.1
RACE			
White	18	62.1	0.3
Black	11	37.9	0.7
Other	0	0.0	0.0
ETHNICITY			
Hispanic	0	0.0	0.0
AGE			
< 1	0	0.0	0.0
1 - 4	2	6.9	0.5
5 - 14	0	0.0	0.0
15 - 24	6	20.7	0.6
25 - 34	4	13.8	0.4
35 - 44	9	31.0	0.8
45 - 54	4	13.8	0.3
55 - 64	2	6.9	0.2
> 64	2	6.9	0.2
OCME DISTRICT			
Central	10	34.5	0.5
Northern	5	17.2	0.2
Tidewater	5	17.2	0.3
Western	9	31.0	0.6
HEALTH PLANNING REGION			
Central	6	20.7	0.5
Eastern	5	17.2	0.3
Northern	3	10.3	0.1
Northwest	6	20.7	0.5
Southwest	9	31.0	0.7
Out of State	0	0.0	--
Unknown	0	0.0	--
TYPE OF HOMICIDE			
Intimate Partner	21	72.4	--
Intimate Partner Associated	7	24.1	--
Other Family	1	3.4	--
TOTAL	29	100.0	0.4

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

TABLE 32. FAMILY AND INTIMATE PARTNER HOMICIDE-SUICIDE VICTIMS IN VIRGINIA BY LOCALITIES WITH TWO OR MORE HOMICIDE VICTIMS: 2008		
LOCALITY	No.	Rate
Stafford County	3	2.5
Chesterfield County	2	0.7
Fairfax County	2	0.2
Grayson County	2	12.5
Hopewell City	2	8.6
Montgomery County	2	2.2
Norfolk City	2	0.9
Roanoke City	2	2.2
TOTAL	17	--

In 2008, 36.2% of all family and intimate partner homicide-suicide deaths occurred in these eight localities. Grayson County had the highest homicide rate among these localities (12.5). Rates were calculated per 100,000 persons.

TABLE 33. FAMILY AND INTIMATE PARTNER HOMICIDE-SUICIDE VICTIMS IN VIRGINIA BY RACE/ETHNICITY AND SEX (N = 29): 2008

	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
White	14	58.3	0.5	4	80.0	0.1	18	62.1	0.3
Black	10	41.7	1.2	1	20.0	0.1	11	37.9	0.7
Other	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0
TOTAL	24	100.0	0.6	5	100.0	0.1	29	100.0	0.4
Hispanic	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

TABLE 34. FAMILY AND INTIMATE PARTNER HOMICIDE-SUICIDE VICTIMS IN VIRGINIA BY AGE AND SEX (N = 29): 2008

	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
< 1	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0
1 - 4	1	4.2	0.5	1	20.0	0.5	2	6.9	0.5
5 - 14	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0
15 - 24	6	25.0	1.1	0	0.0	0.0	6	20.7	0.6
25 - 34	3	12.5	0.6	1	20.0	0.2	4	13.8	0.4
35 - 44	8	33.3	1.4	1	20.0	0.2	9	31.0	0.8
45 - 54	2	8.3	0.3	2	40.0	0.4	4	13.8	0.3
55 - 64	2	8.3	0.4	0	0.0	0.0	2	6.9	0.2
> 64	2	8.3	0.4	0	0.0	0.0	2	6.9	0.2
TOTAL	24	100.0	0.6	5	100.0	0.1	29	100.0	0.4

Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

TABLE 35. FAMILY AND INTIMATE PARTNER HOMICIDE-SUICIDE VICTIMS IN VIRGINIA BY FATAL AGENCY AND SEX (N = 29): 2008

FATAL AGENCY	Female		Male		Total	
	No.	%	No.	%	No.	%
Firearm	20	83.3	5	100.0	25	86.2
Sharp Instrument	4	5.2	0	0.0	4	13.8
Personal Weapon	0	0.0	0	0.0	0	0.0
Blunt Instrument	0	0	0	0.0	0	0.0
Strangulation or Choking	0	0	0	0.0	0	0.0
Motor Vehicle	0	0	0	0.0	0	0.0
Drowning	0	0	0	0.0	0	0.0
Pushing/Slamming/ Throwing Against an Object	0	0	0	0.0	0	0.0
Fire or Smoke Inhalation	0	0	0	0.0	0	0.0
Smothering or Suffocation	0	0	0	0.0	0	0.0
Poisoning or Carbon Monoxide	0	0	0	0.0	0	0.0
Other	0	0	0	0.0	0	0.0
Unknown	0	0.0	0	0.0	0	0.0

More than one fatal agency can be used in a homicide, therefore, fatal agencies will neither sum to the total the number of family and intimate partner homicide-suicides for females (24) or males (5), nor sum to 100%.

2008 FAMILY AND INTIMATE PARTNER HOMICIDE SUMMARY

TABLE 36. SUMMARY OF MOST FREQUENTLY REPORTED CHARACTERISTICS FOR HOMICIDE IN VIRGINIA BY PERCENT (N = 149): 2008

	FIP Homicide (N = 149)	IP Homicide (N = 58)	IPA Homicide (N = 41)	CHC Homicide (N = 15)	OF Homicide (N = 29)
<i>Average Age of Victim*</i>	34.22 years (SD = 19.91)	37.90 years (SD = 14.45)	32.88 years (SD = 17.02)	Infant	45.55 years (SD = 20.38)
<i>Age Range of Victims*</i>	Infant – 83 years	18 – 87 years	1 – 78 years	Infant – 12 years	5 – 83 years
<i>Most Common Age Group*</i>	15 – 24 years (22.8%)	18 – 24 years (24.1%) 35 – 44 years (24.1%)	15 – 24 years (29.3%)	Infant (66.7%)	45 – 54 years (24.1%)
<i>Most Common Gender</i>	Female (51.7%)	Female (79.3%)	Male (85.4%)	Female (73.3%)	Male (62.1%)
<i>Most Common Race/Ethnicity</i>	White (50.3%)	White (53.4%)	White (48.8%)	Black (53.3%)	White (51.7%)
<i>Most Common Fatal Agencies**</i>	Firearm (49.7%)	Firearm (50.0%) Sharp Instrument (31.0%)	Firearm (68.3%)	Personal Weapon (45.5%) Neglect (20.0%)	Firearm (44.8%)
<i>Most Common Premises of Fatal Injury</i>	Residence (83.2%)	Residence (89.7%)	Residence (61.0%) Business/Store (17.1%)	Residence (100.0%)	Residence (96.6%)
<i>Most Common OCME District***</i>	Central (41.6%)	Central (39.7%)	Central (41.5%)	Tidewater (40.0%)	Central (55.2%)
<i>Most Common Health Planning Region of Injury***</i>	Central (32.9%)	Central (32.8%)	Southwest (36.6%)	Eastern (40.0%)	Central (44.8%)

*An infant is defined as a person less than 12 months of age.

**Neglect includes medical and/or nutritional neglect. It also includes inadequate supervision.

***See page 53 for a list of the localities included in the OCME Districts and Health Planning Regions.

2008 FAMILY AND INTIMATE PARTNER HOMICIDE SUMMARY

TABLE 37. SUMMARY OF MOST FREQUENTLY REPORTED CHARACTERISTICS FOR HOMICIDE IN VIRGINIA BY RATE (N = 149): 2008*

	FIP Homicide (N = 149)	IP Homicide (N = 58)	IPA Homicide (N = 41)	CHC Homicide (N = 15)	OFH Homicide (N = 29)
<i>Age Group**</i>	Infant (9.3) 15 – 24 years (3.1)	18 – 24 years (1.8)	15 – 24 years (1.1)	Infant (9.3)	45 – 54 years (0.6) 55 – 64 years (0.6)
<i>Gender</i>	Male (1.9) Female (1.9)	Female (1.5)	Male (0.9)	Female (1.2)	Male (0.5)
<i>Race/ Ethnicity</i>	Black (4.4)	Black (2.2)	Black (1.2)	Black (1.8)	Black (0.8)
<i>OCME District***</i>	Central (3.0) Western (2.7)	Central (1.4)	Western (1.0)	Tidewater (1.5) Western (1.5)	Central (0.8)
<i>Health Planning Region of Injury***</i>	Central (3.7) Southwest (2.9)	Central (1.9)	Southwest (1.1)	Southwest (1.9)	Central (1.0)
<i>State Rate</i>	1.9	1.0	0.5	0.8	0.4

*Rates were calculated using population estimates from the U.S. Bureau of the Census for 2008. Rates were calculated per 100,000 persons.

**An infant is defined as a person less than 12 months of age.

***See page 53 for a list of the localities included in the OCME Districts and Health Planning Regions.

FIVE-YEAR FAMILY AND INTIMATE PARTNER HOMICIDE SUMMARY

TABLE 38. FIVE-YEAR FAMILY AND INTIMATE PARTNER HOMICIDE SUMMARY

	2004			2005			2006			2007			2008		
	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	%	Rate
SEX															
Female	76	56.3	2.0	72	48.6	1.9	62	43.4	1.6	61	48.4	1.6	77	51.7	1.9
Male	59	43.7	1.6	75	50.7	2.0	81	56.6	2.2	65	51.6	1.7	72	48.3	1.9
RACE/ETHNICITY															
White	61	45.2	1.1	72	48.6	1.3	62	43.4	1.1	52	41.3	0.9	75	50.3	1.3
Black	61	45.2	4.0	63	42.6	4.1	70	49.0	4.5	58	46.0	3.7	70	47.0	4.4
Hispanic	6	4.4	1.4	7	4.7	1.5	9	6.3	1.9	12	9.5	2.4	4	2.7	0.8
Other	7	5.2	1.8	5	3.4	1.2	2	1.4	0.5	4	3.2	0.9	4	2.7	0.9
AGE															
<1	4	3	4.0	8	5.4	7.6	15	10.5	14.5	7	5.6	6.6	10	6.7	9.3
1-4	12	8.9	3.0	10	6.8	2.5	8	5.6	2.0	5	4.0	1.2	6	4.0	1.4
5-14	7	5.2	0.7	5	3.4	0.5	4	2.8	0.4	5	4.0	0.5	3	2.0	0.3
15-24	23	17.0	2.2	20	13.5	1.9	21	14.7	2.0	21	16.7	1.9	34	22.8	3.1
25-34	24	17.8	2.4	25	16.9	2.5	23	16.1	2.2	23	18.3	2.2	24	16.1	2.3
35-44	29	21.5	2.5	36	24.3	3.1	29	20.3	2.5	26	20.6	2.2	25	16.8	2.2
45-54	13	9.6	1.2	20	13.5	1.8	22	15.4	1.9	12	9.5	1.0	22	14.8	1.9
55-64	9	6.7	1.2	10	6.8	1.2	13	9.1	1.6	17	13.5	2.0	14	9.4	1.6
>64	14	10.4	1.7	13	8.8	1.5	8	5.6	0.9	10	7.9	1.1	11	7.4	1.2
FATAL AGENCY															
Firearm	79	58.5	--	79	53.7	--	82	57.3	--	75	59.5	--	74	49.7	--
Sharp Instrument	22	16.3	--	30	20.4	--	29	20.3	--	22	17.5	--	36	24.2	--
Personal Weapon	14	10.4	--	18	12.2	--	9	6.3	--	10	7.9	--	15	10.1	--
Blunt Instrument	4	3.0	--	8	5.4	--	7	4.9	--	9	7.1	--	11	7.4	--
Strangle/Choke	6	4.4	--	8	5.4	--	3	2.1	--	5	4.0	--	10	6.7	--
Motor Vehicle	1	0.7	--	1	0.7	--	0	0.0	--	2	1.6	--	1	0.7	--
Push/ Slam/ Throw to Ground/Wall	3	2.2	--	1	0.7	--	0	0.0	--	1	0.8	--	1	0.7	--
Drown	0	0.0	--	3	2.0	--	0	0.0	--	1	0.8	--	0	0.0	--
Fire/Smoke Inhalation	2	1.5	--	0	0.0	--	1	0.7	--	2	1.6	--	2	1.3	--
Smother/Suffocate	1	0.7	--	0	0.0	--	9	6.3	--	2	1.6	--	1	0.7	--
Poison/Carbon Monoxide	1	0.7	--	0	0.0	--	2	1.4	--	1	0.8	--	0	0.0	--
Other	2	1.5	--	5	3.4	--	3	2.1	--	1	0.8	--	3	2.0	--
Unknown	2	1.5	--	1	0.7	--	2	1.4	--	1	0.8	--	1	0.7	--

FIVE-YEAR FAMILY AND INTIMATE PARTNER HOMICIDE SUMMARY


TABLE 38. FIVE-YEAR FAMILY AND INTIMATE PARTNER HOMICIDE SUMMARY

	2004			2005			2006			2007			2008		
	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	%	Rate
OCME DISTRICT															
Central	48	35.6	2.4	47	31.8	2.3	33	23.1	1.6	42	33.3	2.0	62	41.6	3.0
Northern	15	11.1	0.6	23	15.5	1.0	33	23.1	1.4	21	16.7	0.9	23	15.4	0.9
Tidewater	39	28.9	2.5	34	23.0	2.2	44	30.8	2.9	31	24.6	2.0	21	14.1	1.3
Western	33	24.4	2.1	43	29.1	2.7	33	23.1	2.1	32	25.4	2.0	43	28.9	2.7
TYPE OF HOMICIDE															
Intimate Partner under 18	1	0.7	0.1	2	1.4	0.1	0	0.0	0.0	1	0.8	0.1	0	0.0	0.0
Intimate Partner 18 and over	61	45.2	1.1	67	45.3	1.2	49	34.3	0.8	51	40.5	0.9	58	38.9	1.0
Intimate Partner Associated	27	20.0	0.4	35	23.6	0.5	48	33.6	0.6	41	32.5	0.5	41	27.5	0.5
Child by Caregiver	18	13.3	1.0	20	13.5	1.1	18	12.6	1.0	11	8.7	0.6	15	10.1	0.8
Elder by Caregiver	0	0.0	0.0	1	0.7	0.1	2	1.4	0.1	1	0.8	0.1	0	0.0	0.0
Other Family	24	17.8	0.3	22	14.9	0.3	24	16.8	0.3	20	15.9	0.3	29	19.5	0.4
Family Associated	4	3.0	0.1	1	0.7	<0.1	2	1.4	<0.1	1	0.8	<0.1	6	4.0	0.1
TOTAL	135	100	1.8	148	100	2	143	100	1.9	126	100	1.6	149	100	1.9

*Rates were calculated using population estimates from the U.S. Bureau of the Census for the respective year(s). Rates were calculated per 100,000 persons.

**More than one fatal agency can be used in a homicide, therefore, fatal agencies will neither sum to the total number of homicides for females or males, nor sum to 100%.

***In 2004, "Push/Slam/Throw to Ground/Wall" was added as a fatal agency.



PART TWO: APPENDIX

GLOSSARY

Adult – A person 18 years of age or older.

Alleged Offender – A person suspected of or charged (by law enforcement) with the commission of a homicide.

Attempted Homicide-Suicide – Event in which an alleged offender kills at least one other person and then *unsuccessfully* attempts to kill him or her self within seven days after the homicide victim dies.

Caregiver – A person responsible for the care and/or supervision of another person.

Child – A person under the age of 18.

Child Homicide by Caregiver – Victims under the age of 18 who were killed by a caregiver.

Disability – A person with a disability is defined as “a person with a *physical or mental impairment that substantially limits one or more of the major life activities....*”¹² This includes illnesses or conditions such as HIV, impaired hearing, paralysis, broken bones, severe arthritis, seizure disorder, Alzheimer’s disease, and degenerative back conditions. Pregnancy was included if there were complications that restricted normal activities.

Elder – A person age 55 or older.

Elder Homicide by Caregiver – Victims 55 years of age or older who were killed by a caregiver.

Family Associated Homicide – A homicide in which a victim was killed as a result of violence stemming from a familial relationship. Victims could include persons killed by law enforcement during a familial conflict or persons caught in the crossfire, such as friends, co-workers, neighbors, relatives, or bystanders.

Fatal Agency – The means of injury which led to the death of a victim (e.g., firearm).

¹² Americans with Disabilities Act of 1990, Pub. L. No. 101-336, §2, 104 Stat. 328 (1991).

Homicide – The intentional killing of a person by another.

Homicide–Suicide Event – A homicide followed within seven days by the alleged offender’s suicide.

Intimate Partner Associated Homicide – A homicide in which a victim was killed as a result of violence stemming from an intimate partner relationship. Victims could include alleged abusers killed by law enforcement or persons caught in the crossfire of intimate partner violence such as friends, co-workers, neighbors, relatives, new intimate partners, or bystanders.

Intimate Partner Homicide – A homicide in which a victim was killed by one of the following: spouse (married or separated), former spouse, current or former boyfriend, girlfriend or same-sex partner, or dating partner. This group could include homicides in which only one of the parties had pursued a relationship or perceived a relationship with the other, where at least one of the following was historically noted: rejection, threats, harassment, stalking, possessiveness, or issuance of a protective order.

Older Homicide Victim – Victims over the age of 55 years. See also *elder*.

Other Family Homicide – A homicide in which a victim was killed by an individual related to them biologically or by marriage (e.g. grandparent, [step]parent, [step]sibling, cousin, in-laws) and who does not meet the criteria for intimate partner or intimate partner associated homicide, child homicide by caregiver, or elder homicide by caregiver.

Risk Factors – Characteristics present prior to the occurrence of a family or intimate partner homicide which might have placed the victim at increased probability for violence.

Residence – House or apartment, including yard or driveway.

Surveillance – The systematic collection, analysis, and interpretation of data regarding health events of interest for purposes of intervention and the creation of prevention strategies.

VIRGINIA OCME DISTRICTS AND HEALTH PLANNING REGIONS

VIRGINIA OCME DISTRICTS AND HEALTH PLANNING REGIONS										
LOCALITIES	OCME DISTRICTS				HEALTH PLANNING REGIONS					
	CENTRAL	NORTHERN	TIDEWATER	WESTERN	CENTRAL	EASTERN	NORTHERN	NORTHWEST	SOUTHWEST	
Accomack County			✓			✓				
Albemarle County	✓							✓		
Alexandria City		✓					✓			
Alleghany County				✓					✓	
Amelia County	✓				✓					
Amherst County				✓					✓	
Appomattox County				✓					✓	
Arlington County		✓					✓			
Augusta County				✓				✓		
Bath County				✓				✓		
Bedford City				✓					✓	
Bedford County				✓					✓	
Bland County				✓					✓	
Botetourt County				✓					✓	
Bristol City				✓					✓	
Brunswick County	✓				✓					
Buchanan County				✓					✓	
Buckingham County	✓				✓					
Buena Vista City				✓				✓		
Campbell County				✓					✓	
Caroline County	✓							✓		
Carroll County				✓					✓	
Charles City County	✓				✓					
Charlotte County	✓				✓					
Charlottesville City	✓							✓		
Chesapeake City			✓			✓				
Chesterfield County	✓				✓					
Clarke County		✓						✓		
Colonial Heights City	✓				✓					
Covington City				✓					✓	
Craig County				✓					✓	
Culpeper County		✓						✓		
Cumberland County	✓				✓					
Danville City				✓					✓	
Dickenson County				✓					✓	
Dinwiddie County	✓				✓					
Emporia City	✓				✓					
Essex County	✓					✓				
Fairfax City		✓					✓			
Fairfax County		✓					✓			
Falls Church City		✓					✓			

VIRGINIA OCME DISTRICTS AND HEALTH PLANNING REGIONS

VIRGINIA OCME DISTRICTS AND HEALTH PLANNING REGIONS										
	OCME DISTRICTS					HEALTH PLANNING REGIONS				
LOCALITIES	CENTRAL	NORTHERN	TIDEWATER	WESTERN		CENTRAL	EASTERN	NORTHERN	NORTHWEST	SOUTHWEST
Fauquier County		✓							✓	
Floyd County				✓						✓
Fluvanna County	✓								✓	
Franklin City			✓				✓			
Franklin County				✓						✓
Frederick County		✓							✓	
Fredericksburg City	✓								✓	
Galax City				✓						✓
Giles County				✓						✓
Gloucester County	✓						✓			
Goochland County	✓					✓				
Grayson County				✓						✓
Greene County	✓								✓	
Greensville County	✓					✓				
Halifax County	✓					✓				
Hampton City			✓				✓			
Hanover County	✓					✓				
Harrisonburg City				✓					✓	
Henrico County	✓					✓				
Henry County				✓						✓
Highland County				✓					✓	
Hopewell City	✓					✓				
Isle of Wight County			✓				✓			
James City County	✓						✓			
King and Queen County	✓						✓			
King George County	✓								✓	
King William County	✓						✓			
Lancaster County	✓						✓			
Lee County				✓						✓
Lexington City				✓					✓	
Loudoun County		✓						✓		
Louisa County	✓								✓	
Lunenburg County	✓					✓				
Lynchburg City				✓						✓
Madison County		✓							✓	
Manassas City		✓						✓		
Manassas Park City		✓						✓		
Martinsville City				✓						✓
Mathews County	✓						✓			
Mecklenburg County	✓					✓				
Middlesex County	✓						✓			
Montgomery County				✓						✓

VIRGINIA OCME DISTRICTS AND HEALTH PLANNING REGIONS

VIRGINIA OCME DISTRICTS AND HEALTH PLANNING REGIONS										
	OCME DISTRICTS					HEALTH PLANNING REGIONS				
LOCALITIES	CENTRAL	NORTHERN	TIDEWATER	WESTERN		CENTRAL	EASTERN	NORTHERN	NORTHWEST	SOUTHWEST
Nelson County	✓								✓	
New Kent County	✓					✓				
Newport News City			✓				✓			
Norfolk City			✓				✓			
Northampton County			✓				✓			
Northumberland County	✓						✓			
Norton City				✓						✓
Nottoway County	✓					✓				
Orange County		✓							✓	
Page County		✓							✓	
Patrick County				✓						✓
Petersburg City	✓					✓				
Pittsylvania County				✓						✓
Poquoson City			✓				✓			
Portsmouth City			✓				✓			
Powhatan County	✓					✓				
Prince Edward County	✓					✓				
Prince George County	✓					✓				
Prince William County		✓						✓		
Pulaski County				✓						✓
Radford City				✓						✓
Rappahannock County		✓							✓	
Richmond City	✓					✓				
Richmond County	✓						✓			
Roanoke City				✓						✓
Roanoke County				✓						✓
Rockbridge County				✓					✓	
Rockingham County				✓					✓	
Russell County				✓						✓
Salem City				✓						✓
Scott County				✓						✓
Shenandoah County		✓							✓	
Smyth County				✓						✓
Southampton County			✓				✓			
Spotsylvania County	✓								✓	
Stafford County	✓								✓	
Staunton City				✓					✓	
Suffolk City			✓				✓			
Surry County	✓					✓				
Sussex County	✓					✓				
Tazewell County				✓						✓
Virginia Beach City			✓				✓			

VIRGINIA OCME DISTRICTS AND HEALTH PLANNING REGIONS

VIRGINIA OCME DISTRICTS AND HEALTH PLANNING REGIONS										
	OCME DISTRICTS					HEALTH PLANNING REGIONS				
LOCALITIES	CENTRAL	NORTHERN	TIDEWATER	WESTERN		CENTRAL	EASTERN	NORTHERN	NORTHWEST	SOUTHWEST
Warren County		✓							✓	
Washington County				✓						✓
Waynesboro City				✓					✓	
Westmoreland County	✓						✓			
Williamsburg City	✓						✓			
Winchester City		✓							✓	
Wise County				✓						✓
Wythe County				✓						✓
York County			✓				✓			

**For additional information on the Family and
Intimate Partner Homicide Surveillance Project contact:**

**Family and Intimate Partner Homicide
Surveillance Coordinator
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Office of the Chief Medical Examiner
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Richmond, VA 23219
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**This report is available online at:
<http://www.vdh.virginia.gov/medExam/Violence.htm>**

