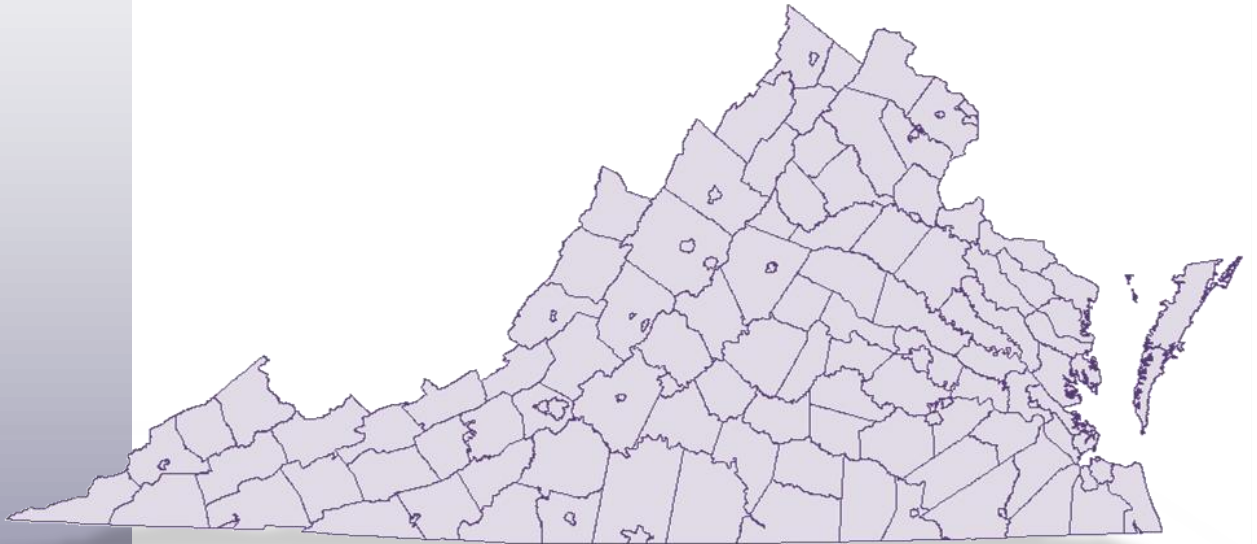


Homicide Across the Life Course



VDH VIRGINIA
DEPARTMENT
OF HEALTH
Protecting You and Your Environment



A report from the Virginia Violent Death Reporting System

**Commonwealth of Virginia
Virginia Department of Health
Office of the Chief Medical Examiner**

October, 2013

Homicide Across the Life Course

A Report from the Virginia Violent Death Reporting System

October, 2013

by:

Marc E. Leslie, MS, VVDRS Coordinator
Virginia Powell, PhD, VVDRS Principal Investigator

with:

Jennifer Burns, VVDRS Surveillance Coordinator
Debra Clark, VVDRS Surveillance Coordinator
Tom Kincaid, VVDRS Surveillance Coordinator
Keshara Luster, VVDRS Surveillance Coordinator

Cover design and layout by Debra Clark

Questions or comments should be directed to:

Marc Leslie
(804) 205-3855
marc.leslie@vdh.virginia.gov

VVDRS online: <http://www.vdh.virginia.gov/medExam/NVDRS.htm>

This paper was created to provide information that can be used to prevent violent death in the future. Please notify Marc Leslie (see contact information above) if you distribute or use any portion of this report for training, policy decisions, or other uses.

Suggested citation: Virginia Violent Death Reporting System, Office of the Chief Medical Examiner, Virginia Department of Health. Homicide Across the Life Course. October, 2013.

The research files for this report were created on February 17, 2012. Data may continue to be entered and altered in VVDRS after this date.

The publication was supported by Award Number U17/CE001315 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

Acknowledgements

This report is possible through the support and efforts of those who generously contribute their time and expertise to the VVDRS. We gratefully acknowledge the ongoing contributions of the OCME's Forensic Pathologists and Pathology Fellows whose expertise adds depth to our knowledge; the OCME State and District Administrators who support the project's human resources requirements; the critical role of our Medicolegal Death Investigators and Medical Examiners in the collection and analysis of information that is the foundation for our work; and the support of all office and forensic staff who participate actively in our quest for information. Finally, we applaud the efforts of our Surveillance Coordinators, past and present, whose commitment moves this project forward.

Virginia Violent Death Reporting System Advisory Committee Members

Heather Board Injury Prevention Program Manager Division of Prevention and Health Promotion Virginia Department of Health	Rita L. Katzman Program Manager Child Protective Services Virginia Department of Social Services
Joseph L. Cannon Special Agent in Charge Department of Alcoholic Beverage Control	James M. Martinez, Jr., MEd Director Office of Mental Health Services Virginia Department of Behavioral Health and Developmental Services
K. Scott Downs First Sergeant Virginia Department of State Police	Janet M. Rainey Director Division of Vital Records Virginia Department of Health
Andrew Goddard President Virginia Center for Public Safety	Calvin T. Reynolds Director Division of Health Statistics Virginia Department of Health
Sherrie N. Goggans Project Manager Virginia Sexual and Domestic Violence Action Alliance	Dana G. Schrad, Esq. Executive Director Virginia Association of Chiefs of Police
William T. Gormley, MD Acting Chief Medical Examiner Office of the Chief Medical Examiner Virginia Department of Health	Johanna W. Schuchert Executive Director Prevent Child Abuse Virginia
Linda C. Jackson Director Virginia Department of Forensic Science	Anne Zehner Epidemiologist Division of Policy and Evaluation Virginia Department of Health
John W. Jones Executive Director Virginia Sheriff's Association	

Other Reports Available from the VVDRS at
<http://www.vdh.virginia.gov/medExam/NVDRS.htm>

Elder Suicide in Virginia: 2003-2010

Violent Death in Custody

Violent Death in the Workplace

Military-Related Suicide in Virginia: 2003-2010

Physical Health Problems and Suicide in Virginia: 2007-2010

Suicide Trends in Virginia: 2003-2010

The Geography of Violent Death in Virginia: 2003-2008

Suicide Among College Students in Virginia: 2003-2008

Suicide and Criminal Legal Problems in Virginia: 2007-2008

Suicide in the Eastern Health Planning Region: 2003-2008

Suicide in the Northern Health Planning Region: 2003-2008

Suicide in the Central Health Planning Region: 2003-2008

Suicide in the Northwest Health Planning Region: 2003-2008

Suicide in the Southwest Health Planning Region: 2003-2008

Suicide Methods in Virginia: Patterns by Race, Gender, Age, and Birthplace

Alcohol Consumption Before Fatal Suicides

Poison-Related Attempted and Completed Suicides in Virginia: 2003-2006

Suicide and Mental Health in Virginia: 2003-2007

Final Exit: What Type of Suicide Victim Seeks Guidance?

Deaths from Violence: A Look at 17 States

Substance Use and Violence

Violent Death in Virginia: 2006

Unintentional Firearm Deaths in Virginia, 2003-2006

Table of Contents

Acknowledgements ii

Other Reports Available from the VVDRS iii

Index of Tables v

Index of Figures vi

Introduction 1

Data Sources 1

Interpreting Data Based on a Small Numbers of Cases 1

Annual Homicide Rates by Age Group, Race, and Gender 1

 All Ages 2

 Males and Females 3

 Black Males and Black Females 5

Homicide Across the Life Course 6

 Ages 0-4 10

 Ages 5-14 10

 Ages 15-24 11

 Ages 25-39 12

 Ages 40-59 12

 Ages 60 and Older 13

Conclusion 14

Index of Tables

Table 1. Selected Traits of Homicide Victims by Age Group Including Number of Deaths, Percentage, and Rate, Virginia: 2003-2011 7

Table 2. Selected Traits of Homicide Victims by Age Group Including Number of Deaths and Percentage, Virginia: 2003-2011 8

Index of Figures

Figure 1. Homicide Rates by Year of Death and Age Group, Virginia: 2003-2011 2

Figure 2. Male Homicide Rates by Year of Death and Age Group, Virginia: 2003-2011 3

Figure 3. Female Homicide Rates by Year of Death and Age Group, Virginia: 2003-2011 4

Figure 4. Black Male Homicide Rates by Year of Death and Age Group, Virginia: 2003-2011 5

Figure 5. Black Female Homicide Rates by Year of Death and Age Group, Virginia: 2003-2011 6

INTRODUCTION

This report examines homicide in Virginia using two perspectives. First, a longitudinal perspective is used to describe the changing homicide rates from 2003-2011, particularly how these rates are related to different ages, races, and genders. Second, a life course perspective is utilized to examine populations at risk and the circumstances that shape homicide among different age groups.

DATA SOURCES

Fatal homicide data used in this report come from the Virginia Violent Death Reporting System (VVDRS). The VVDRS is part of the National Violent Death Reporting System (NVDRS). The NVDRS documents violent deaths that originate within a state's borders.¹ It compiles information from sources used in violent death investigation, and links decedents to circumstances to explain why the homicide occurred and the relationship between the victim and the suspect. The VVDRS is the operation and reporting system of the NVDRS within Virginia, and uses the same methodology, definitions, coding schema, and database of the NVDRS.

The VVDRS abstracts death investigation information from several sources, primarily the Office of the Chief Medical Examiner, law enforcement, the Virginia Division of Health Statistics, and the Virginia Department of Forensic Science. Each relevant death record is reviewed by a Coordinator. The Coordinator ensures that all information sources required by the NVDRS are in the record, requests reports that are not already in the file, and abstracts and manually enters the relevant information into the database. Continuous quality assurance activities maintain data accuracy as well as consistency among Coordinators. Deaths entered into the VVDRS are reconciled with deaths reported by the Virginia Division of Health Statistics and the Virginia Office of the Chief Medical Examiner for the purpose of comprehensive case identification.

In the VVDRS database, age is recorded from three sources: the Death Certificate, Medical Examiner report, and Law Enforcement report. To determine victim age, the age reported by these three sources was compared. Any age differences were reconciled.

INTERPRETING DATA BASED ON SMALL NUMBERS OF CASES

Data made up of relatively small numbers (20 or fewer cases) are considered statistically unreliable and should be interpreted and used with caution. Numbers, percentages, or rates for 20 or fewer cases are presented here in the interest of complete reporting.

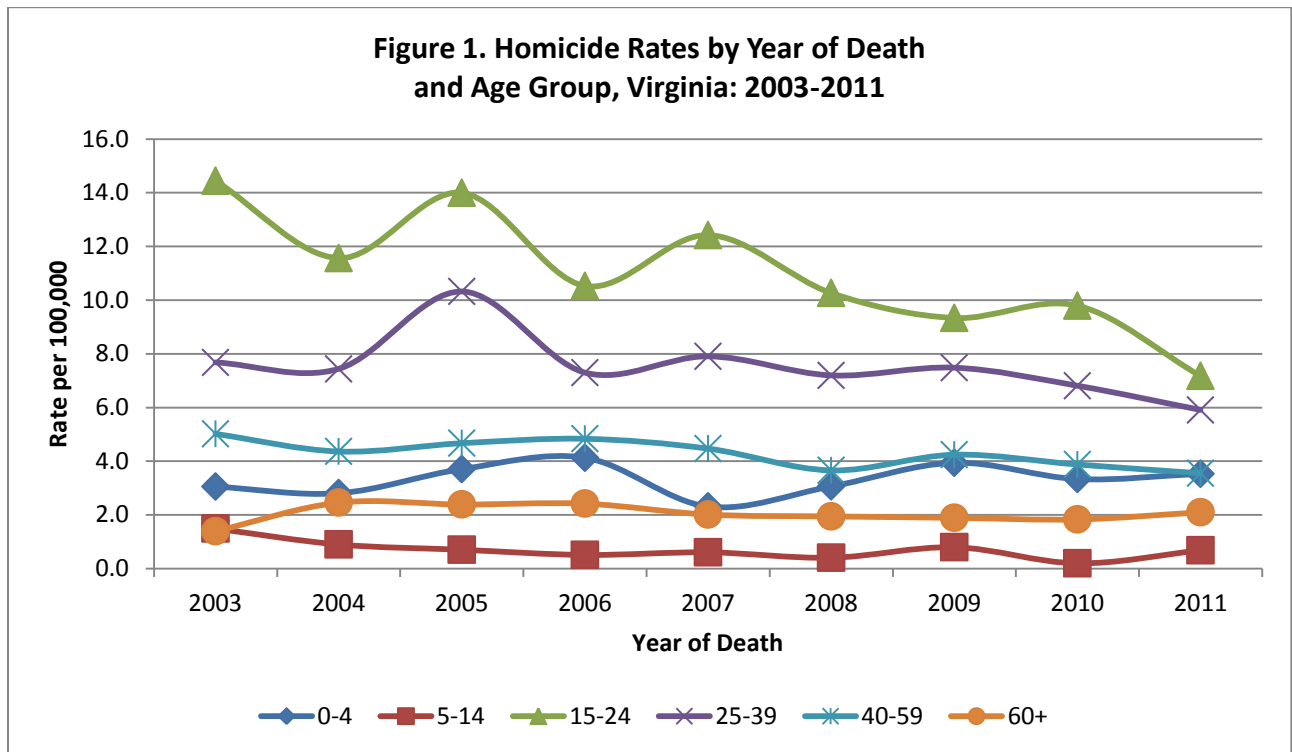
ANNUAL HOMICIDE RATES BY AGE GROUP, RACE, AND GENDER

This section examines homicides rates for the nine-year period from 2003-2011. During this time period, the overall homicide rate in Virginia decreased from a high of 6.2 (in 2005) to a low of 3.9 (in 2011). The number of homicides went from a high of 470 to a low of 316.

¹ Persons who die in Virginia, but were residents of another state, are excluded.

All Ages

Figure 1 shows annual homicide rates² for each age group.

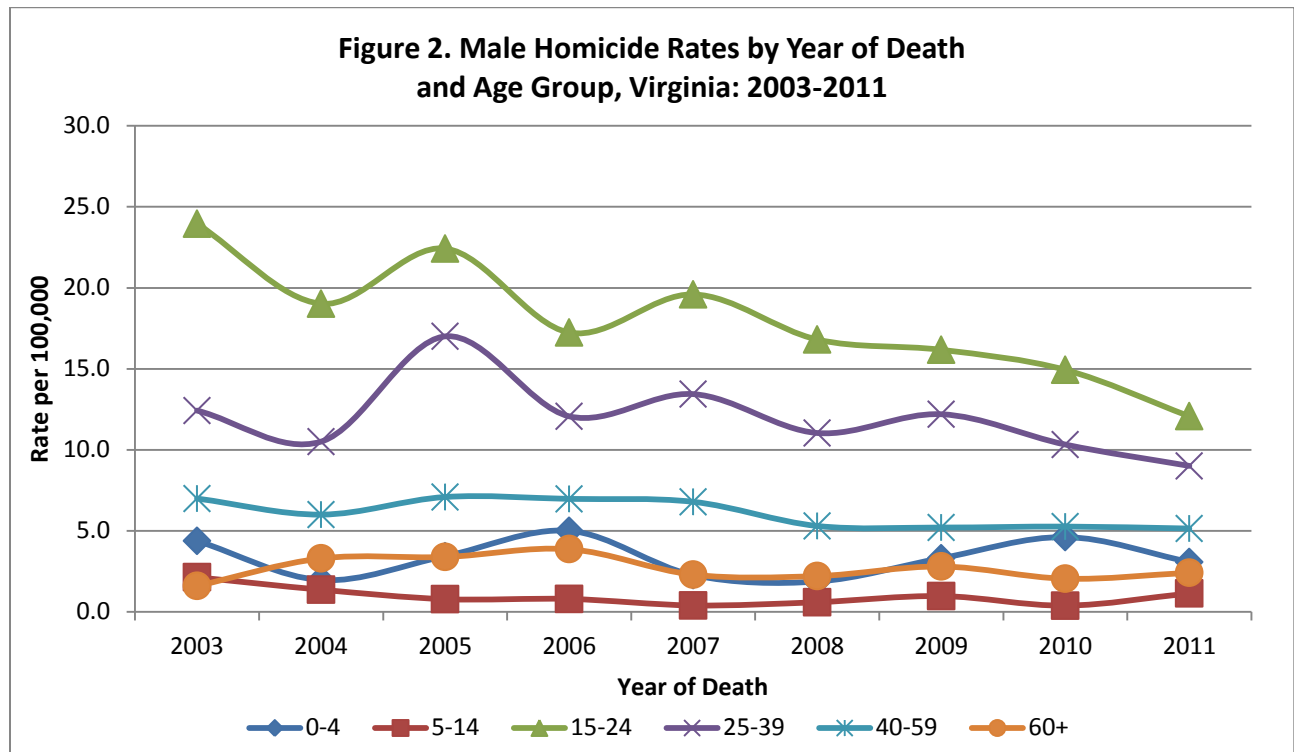


- Over the nine-year period the homicide rate declined or remained relatively constant for most age groups. The biggest declines occurred among persons ages 15-24, 25-39, and 40-59; combined, these three ages groups account for the majority (87%) of homicide victims in Virginia.
- For those ages 15-24 the rate fell from a high of 14.4 in 2003 to a low of 7.2 in 2011. The number of homicide deaths for this age group simultaneously declined from 150 to 81.
- Among those 25-39 years of age, the rate declined from a high of 10.3 in 2005 to a low of 5.9 in 2011. The number of deaths declined from 128 to 97 in the same time period.
- For victims ages 40-59 the rate diminished from a high of 5.0 in 2003 to a low of 3.6 in 2011 as homicide deaths decreased from 106 to 82.

² All rates presented in this report are per 100,000 persons.

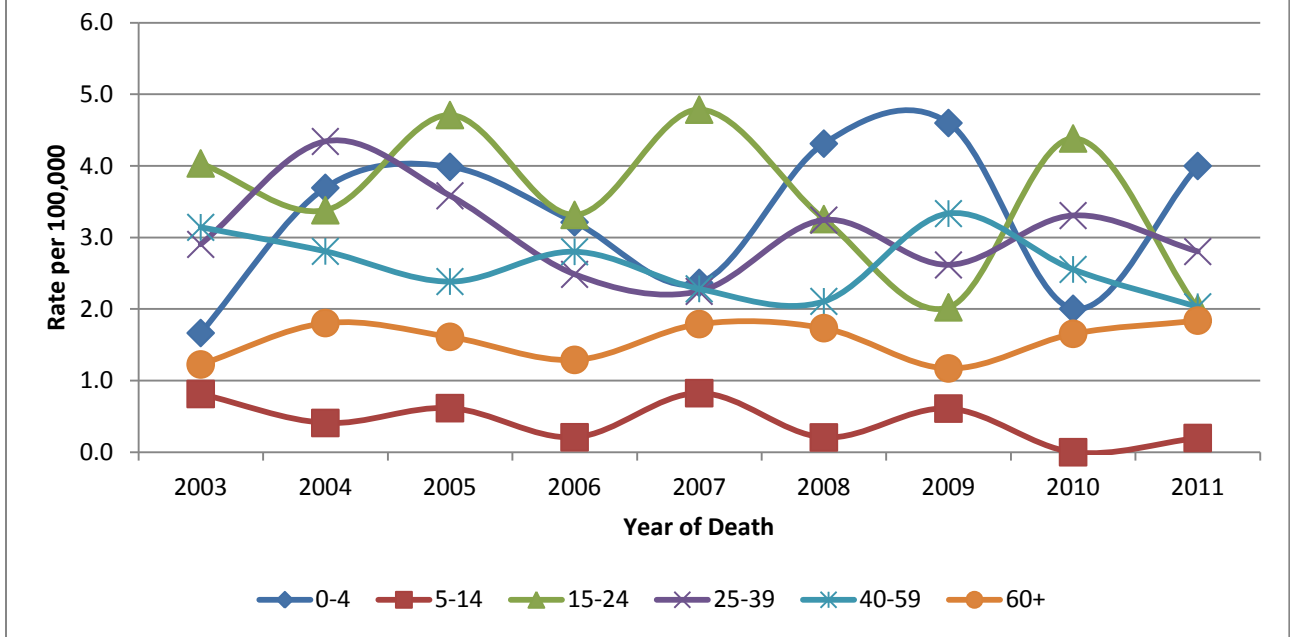
Males and Females

Figures 2 and 3 show the annual homicide rates for males and females by age group.



- The most significant homicide rate reduction was among males ages 15-24; this homicide rate peaked at 24.0 in 2003 and then fell to its lowest point, 12.1, in 2011. This age group also had the largest drop in the number of homicides, from 130 to 70.
- Males ages 25-39 had a peak in homicide rates in 2005 (17.0); rates then generally subsided until 2011 (rate of 9.0).
- All other male age groups had homicide rates that either declined across the nine-year period or remained relatively static.
- The primary group driving the reduction of overall homicide rates over this nine year period was males in the age range from 15-39, who comprise 68% of all male homicide victims.

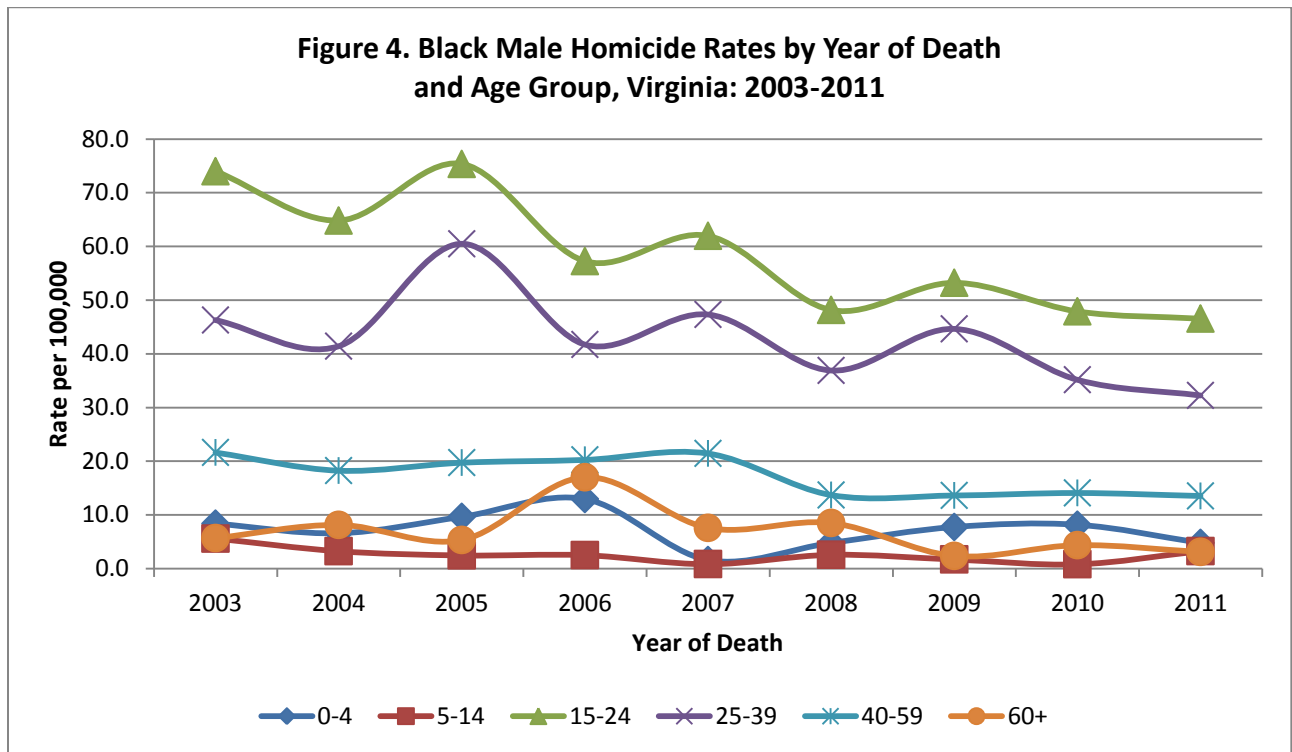
Figure 3. Female Homicide Rates by Year of Death and Age Group, Virginia: 2003-2011



- Homicide rates in most female age groups fluctuated from year to year, with no clear or predictable pattern of increase or decrease.
- Most age groups had fewer than 20 homicides per year; in general, this relatively small number of deaths causes rates to be unstable and to fluctuate as shown in Figure 3.
- Compared with males, the overall homicide rate among females was relatively low and constant over the nine year period, ranging from 2.0 to 2.8.

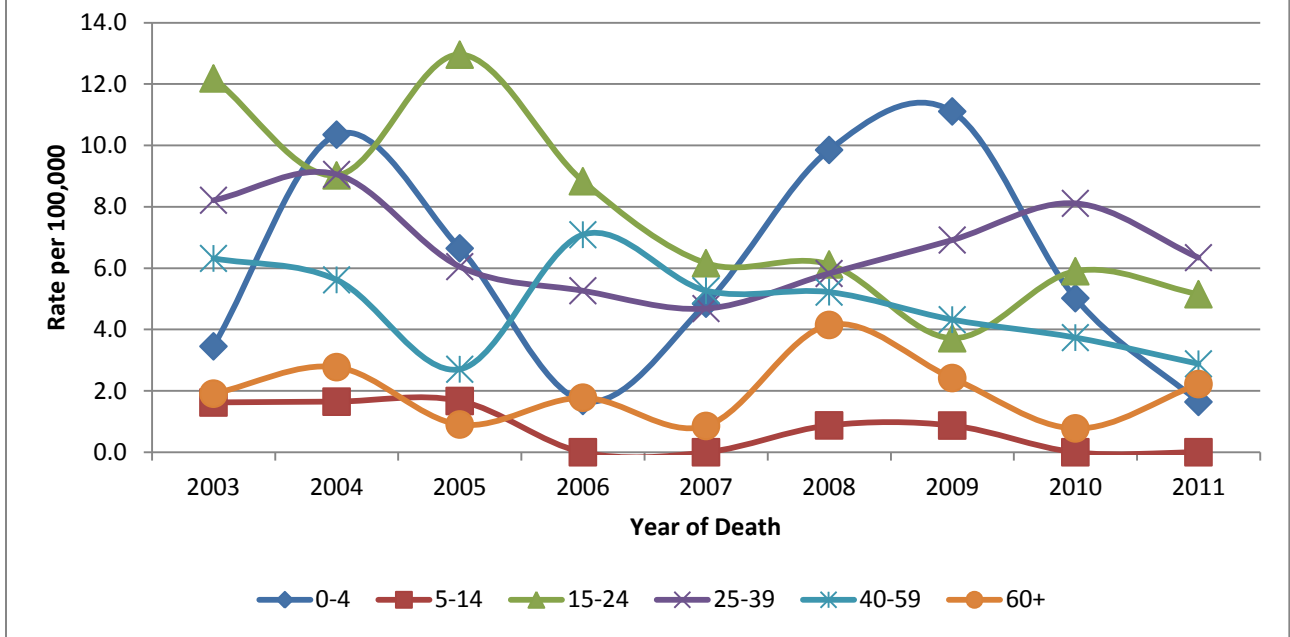
Black Males and Black Females

Figures 4 and 5 plot the annual rates for Black males and Black females by age group.



- Black male homicide rates saw a reduction from 33.1 (2005) to 19.5 (2011).
- Homicide rates among Black males ages 15-24 declined dramatically, from 75.4 to 46.6, with the number of homicides dropping from a high of 100 to a low of 64.
- Black males ages 25-39 also experienced a decline in homicide rates from 60.5 (2005) to 32.2 (2011).
- Looking at the cumulative impact of age, gender, and race, the decrease in Black male homicides was largely responsible for the overall decline in homicides for Virginia. Half (50%) of homicide victims were Black males.

Figure 5. Black Female Homicide Rates by Year of Death and Age Group, Virginia: 2003-2011



- Between 2003 and 2011, the overall Black female homicide rate was cut nearly in half, declining from 6.1 to 3.3, with a reduction in numbers from 49 (2004) to 29 (2011).
- The most significant drop in rates occurred among those ages 15-24, with the rate shifting from a high of 13.0 (2005) to a low of 3.7 (2009) before increasing again in 2010 and 2011.

HOMICIDE ACROSS THE LIFE COURSE

Using age groupings, this second section of the report examines the dynamics of homicide across the life course. The following summary tables provide highlights for each age group. In Table 1, each cell contains three pieces of information: the number of homicides, the percentage of homicides represented for each age group, and the homicide rate for that particular population. In Table 2, each cell contains the number of homicides and the percentage of homicides represented for each age group.

Table 1. Selected Traits of Homicide Victims by Age Group Including Number of Deaths, Percentage, and Rate, Virginia: 2003-2011

	Ages 0-4 (153, 4%, 3.3)	Ages 5-14 (63, 2%, 0.7)	Ages 15-24 (1,075, 31%, 11.0)	Ages 25-39 (1,094, 31%, 7.5)	Ages 40-59 (856, 25%, 4.3)	Ages 60 and older (239, 7%, 2.0)	Total (3,480, 100%, 5.0)
Gender	Male (78, 51%, 3.3)	Male (44, 70%, 1.0)	Male (909, 85%, 18.0)	Male (874, 80%, 12.0)	Male (590, 69%, 6.1)	Male (136, 57%, 2.6)	Male (2,631, 76%, 7.7)
	Female (75, 49%, 3.3)	Female (19, 30%, 0.4)	Female (166, 15%, 3.5)	Female (220, 20%, 3.1)	Female (266, 31%, 2.6)	Female (103, 43%, 1.6)	Female (849, 24%, 2.4)
Race	Black (73, 48%, 6.6)	Black (36, 57%, 1.7)	Black (793, 74%, 33.6)	Black (723, 66%, 24.3)	Black (403, 47%, 10.6)	Black (70, 29%, 3.9)	Black (2,098, 60%, 14.8)
	White (74, 48%, 2.3)	White (23, 37%, 0.4)	White (254, 24%, 3.7)	White (337, 31%, 3.2)	White (417, 49%, 2.8)	White (162, 68%, 1.7)	White (1,267, 36%, 2.5)
Race and Gender	Black male (40, 26%, 7.1)	Black male (28, 44%, 2.6)	Black male (704, 66%, 58.6)	Black male (620, 57%, 42.8)	Black male (306, 36%, 17.2)	Black male (49, 21%, 6.7)	Black male (1,747, 50%, 25.7)
	Black female (33, 22%, 6.1)	Black female (8, 13%, 0.8)	Black female (89, 8%, 7.7)	Black female (103, 9%, 6.7)	Black female (97, 11%, 4.8)	Asian male (4, 2%, 2.3)	Black female (351, 10%, 4.7)
	White male (38, 25%, 2.3)	Asian male (2, 3%, 0.8)	White male (186, 17%, 5.2)	White male (233, 21%, 4.4)	White male (262, 31%, 3.5)	White male (83, 35%, 2.0)	White male (815, 23%, 3.2)
	White female (36, 24%, 2.3)	White male (13, 21%, 0.4)	Asian male (8, 1%, 3.3)	White female (104, 10%, 2.0)	Asian male (16, 2%, 3.5)	Black female (21, 9%, 2.0)	Asian male (38, 1%, 2.1)
Hispanic Status and Gender	Hispanic (15, 10%, 2.8)	Hispanic (4, 6%, 0.5)	Hispanic (77, 7%, 10.1)	Hispanic (94, 9%, 6.7)	Hispanic (21, 3%, 2.2)	Hispanic (7, 3%, 2.9)	Hispanic (218, 6%, 4.7)
	Hispanic male (8, 5%, 2.9)	Hispanic female (3, 5%, 0.8)	Hispanic male (68, 6%, 16.2)	Hispanic male (79, 7%, 10.0)	Hispanic male (16, 2%, 3.3)	Hispanic female (5, 2%, 3.6)	Hispanic male (174, 5%, 7.0)
	Hispanic female (7, 5%, 2.6)	Hispanic male (1, 2%, 0.3)	Hispanic female (9, 1%, 2.6)	Hispanic female (15, 1%, 2.5)	Hispanic female (5, 1%, 1.1)	Hispanic male (2, 1%, 1.9)	Hispanic female (44, 1%, 2.0)
Virginia Health Planning Region of Injury	Eastern (62, 41%, 5.6)	Central (17, 27%, 1.1)	Central (368, 34%, 22.0)	Central (340, 31%, 14.2)	Central (262, 31%, 7.6)	Central (59, 25%, 2.9)	Central (1,068, 31%, 9.0)
	Southwest (32, 21%, 5.0)	Eastern (22, 35%, 1.0)	Eastern (418, 39%, 16.8)	Eastern (405, 37%, 12.2)	Eastern (239, 28%, 5.4)	Eastern (59, 25%, 2.2)	Eastern (1,205, 35%, 7.4)
	Central (22, 14%, 3.0)	Southwest (10, 16%, 0.7)	Southwest (131, 12%, 7.6)	Southwest (162, 15%, 7.3)	Southwest (182, 21%, 5.4)	Southwest (58, 24%, 2.2)	Southwest (575, 17%, 4.8)

Table 2. Selected Traits of Homicide Victims by Age Group Including Number of Deaths and Percentage, Virginia: 2003-2011

	Ages 0-4 (153, 4%, 3.3)	Ages 5-14 (63, 2%, 0.7)	Ages 15-24 (1,075, 31%, 11.0)	Ages 25-39 (1,094, 31%, 7.5)	Ages 40-59 (856, 25%, 4.3)	Ages 60 and older (239, 7%, 2.0)	Total (3,480, 100%, 5.0)
Relationship between Victim and Suspect	Family (82, 54%)	Family (23, 37%)	None/Unknown (669, 62%)	None/Unknown (596, 55%)	None/Unknown (335, 39%)	None/Unknown (74, 31%)	None/Unknown (1,706, 49%)
	Intimate Partner/ Related (34, 22%)	Intimate Partner/ Related (19, 30%)	Friend/Acquaintance (209, 19%)	Intimate Partner/ Related (246, 23%)	Intimate Partner/ Related (253, 30%)	Intimate Partner/ Related (63, 26%)	Intimate Partner/ Related (752, 22%)
Circumstances	Argument (97, 71%)	Argument (19, 40%)	Argument (241, 32%)	Argument (226, 29%)	Intimate Partner/ Related (238, 37%)	Intimate Partner/ Related (61, 37%)	Argument (791, 31%)
	Intimate Partner/ Related (32, 24%)	Intimate Partner/ Related (15, 31%)	Crime Related (212, 28%)	Crime Related (210, 27%)	Argument (174, 27%)	Crime Related (56, 33%)	Intimate Partner/ Related (658, 26%)
		Crime Related (12, 25%)	Drug Related (175, 23%)	Intimate Partner/ Related (203, 26%)	Crime Related (158, 24%)	Other Argument (34, 20%)	Crime Related (654, 26%)
Premise of Injury	House/Apartment (143, 94%)	House/Apartment (49, 78%)	House/Apartment (452, 42%)	House/Apartment (551, 50%)	House/Apartment (518, 61%)	House/Apartment (191, 80%)	House/Apartment (1,904, 55%)
			Street (257, 24%)	Street (217, 20%)	Street (104, 12%)		Street (591, 17%)
Injury Occurred at Victim's Home	Yes (122, 80%)	Yes (45, 71%)	No (828, 77%)	No (727, 67%)	Yes (436, 51%)	Yes (188, 79%)	No (2,058, 59%)
Method of Fatal Injury	Shaking/Inflicted Head Trauma (54, 35%)	Firearm (38, 60%)	Firearm (917, 85%)	Firearm (868, 79%)	Firearm (513, 60%)	Firearm (113, 47%)	Firearm (2,460, 71%)
	Blunt Instrument (31, 20%)			Sharp Instrument (137, 13%)	Sharp Instrument (191, 22%)	Sharp Instrument (50, 21%)	Sharp Instrument (475, 14%)
	Personal Weapons (24, 16%)	Sharp Instrument (8, 13%)	Sharp Instrument (86, 8%)	Blunt Instrument (51, 5%)	Blunt Instrument (85, 10%)	Blunt Instrument (46, 19%)	Blunt Instrument (244, 7%)

Table 2. Selected Traits of Homicide Victims by Age Group Including Number of Deaths and Percentage, Virginia: 2003-2011 (continued)

	Ages 0-4 (153, 4%, 3.3)	Ages 5-14 (63, 2%, 0.7)	Ages 15-24 (1,075, 31%, 11.0)	Ages 25-39 (1,094, 31%, 7.5)	Ages 40-59 (856, 25%, 4.3)	Ages 60 and older (239, 7%, 2.0)	Total (3,480, 100%, 5.0)
Toxicology – Positive Results	Opiates (3, 2%)	Alcohol (any) (8, 13%)	Alcohol (any) (328, 31%)	Alcohol (any) (453, 43%)	Alcohol (any) (341, 42%)	Alcohol (any) (62, 28%)	Alcohol (any) (1,192, 36%)
			Alcohol (≥ .08) (177, 17%)	Alcohol (≥ .08) (275, 26%)	Alcohol (≥ .08) (225, 28%)	Alcohol (≥ .08) (29, 13%)	Alcohol (≥ .08) (709, 21%)
		Opiates (2, 4%)	Cocaine (56, 6%)	Cocaine (202, 20%)	Cocaine (177, 24%)	Opiates (17, 10%)	Cocaine (443, 14%)

Ages 0-4

- Among infants and young children, males and females each account for approximately half of all homicide victims and have the same homicide rate. This is the only age group where male and female homicide numbers or rates are equal.
- Although the number of homicides among Black and White victims was also similar, the homicide rate for Black children was nearly three times higher. The Black homicide rate is greater than the White homicide rate over the entire life course.
- In this age category, Black males had the largest number of homicides and the highest rate. Black males and Black females had similar homicide rates. This is the only age group where Black males and Black females have similar homicide numbers or rates.
- Hispanics comprised 10% of all victims, the largest proportion of Hispanic homicide victims of any age group.
- Infants and young children are most commonly killed in the context of child abuse by a family member, such as a parent, other relative, or a relative's intimate partner (i.e., their mother's boyfriend). Relatedly, most (94%) of these fatal injuries occurred in a private home, with 80% happening inside the child's own home.
- Shaking/inflicted head trauma and blunt instruments were the most common methods of fatal injury. This was the only age group where firearms were not a significant factor.
- The eastern area of Virginia had the largest homicide numbers and rates for this age group; this is the only age group where the homicide rate is highest in this region.

Ages 5-14

- Compared with infants and very young children, overall homicide risk decreases significantly among children ages 5 to 14. This is the stage of life when homicide is rarest.
- Males now comprise 70% of all homicide victims and have 2.5 times more homicide risk than females. The male homicide rate will be greater than the female homicide rate for the remainder of the life course.
- The number of Black homicide victims surpasses the number of White homicide victims; the rate among Black children climbs to more than four times the rate for their White counterparts.
- While family members are still the most common perpetrator, intimate partner violence and intimate partner related violence, such as a child who is killed by his mother's boyfriend, is now a factor in 30% of all homicides.
- Homicides related to other crimes³ are now a major factor, occurring in 25% of homicides to young children. This type of homicide tends to be more common with teenagers, but was also common for those ages 9-11.

³ Crime related homicides occur when the victim and suspect come in contact due to another crime; for example, persons who are killed after being robbed, where the robbery was the primary motive of the suspect.

- Similar to those ages 0-4, most victims ages 5-14 were injured in a private home, with 71% being injured in their own home.
- At this stage, a firearm becomes the most common method of fatal injury (60%); firearms remain the most common method of fatal injury across the rest of the life course.
- Alcohol begins to be a factor in homicides, starting with this age group. Thirteen percent of children tested for alcohol had some level present in their system at death.
- Central, eastern, and southwestern Virginia communities have similar homicide rates for young children.

Ages 15-24

- Among teenagers and youth, males comprise 85% of all victims, with a rate more than five times that of females. This age group has the largest percentage of homicide victims who are male.
- The proportion of homicide victims who are female is at the lowest point among this age group (15%); however, this is the age group where females have their highest risk for homicide.
- Blacks are now 74% of homicide victims with a rate 9.1 times that of Whites. This age group has the largest proportion of victims who are Black and the greatest gap between homicide risk for Blacks and Whites. Compared to the previous age group (ages 5-14) the homicide rate among Blacks increased nearly 20 times.
- Black males reach the peak of their number of homicides, comprise the greatest proportion of victims, and have the highest rate of any other age group. Compared to the previous age group (ages 5-14) the Black male homicide rate increases nearly 23 times. The Black male rate (58.6) is almost eight times the rate for Black females (7.7).
- The homicide rate for Hispanics and Hispanic males peaks at this point of the life course.
- The relationship between the homicide victim and his/her suspected murderer becomes largely unclear or is unknown; either there is not a known suspect or the relationship between victim and suspect is not clear.
- At this point in the life course, homicides shift from occurring at home and being perpetrated by family members to occurring in public spaces and being perpetrated by strangers and other persons.
- Nearly one-third (32%) of homicides among those ages 15-24 are related to general arguments that involve a myriad of disagreements that cannot be categorized in any meaningful way, but exclude arguments that are clearly related to money, drugs, property, or intimate partners. These homicides are often related to short-term or immediate conflict.
- Homicides related to producing, selling, or using illegal drugs comprise 23% of this age group; this is the largest proportion of drug related homicides of any age group.
- Firearms account for 85% of all homicides, the largest percentage of any age group.

- The proportion of homicide victims with any alcohol in their system at death increases to 31% with 17% having a BAC of .08 or greater. Cocaine also appears among teenagers and youth, present in 6%.
- The number of homicides is highest in the eastern region of Virginia, but the central region has the highest homicide rate.

Ages 25-39

- Males are still the majority of homicide victims and have a homicide rate exceeding females. The gap between male and female homicide rates and numbers, however, begins to narrow.
- The Black homicide rate dips from 33.6 (ages 15-24) to 24.3; this rate is still greater than the average and for all other races, but represents a steep decline. Similarly, the Black male homicide rate declines from 58.6 (ages 15-24) to 42.8.
- More than half (55%) of homicides have no identified suspects or the relationship between the homicide victim and the suspect is unknown.
- The most common homicide type (29%) is one related to a variety of disagreements, but excludes arguments that are clearly related to money, drugs, property, or intimate partners. Homicides related to the occurrence of another crime are common (27%) as are homicides related to intimate partner violence (26%).
- Half of all homicides (50%) occur in a private residence while the percentage that occurs in the street shrinks to 20%. More than two-thirds (67%) occur at a location other than the victim's home.
- Firearms as the method of fatal injury decrease to 79% while sharp instruments (e.g., knives) increase to 13%.
- Alcohol use by the victim prior to the homicide becomes more common, appearing in 43% of homicide victims; 26% of those tested had a BAC of .08 or greater. One-fifth (20%) of those tested for cocaine had this substance in their system.
- Eastern Virginia had more homicides but the rate was highest in the central area of the state.

Ages 40-59

- The proportion of homicide victims that are male falls to 69% and the gap between male and female rates narrows further. In comparison with ages 25-39, the male homicide rate is cut in half.
- The Black homicide rate decreases by more than half, from 24.3 to 10.6, when compared to the rates for ages 25-39.
- The gap between Black and White homicide rates narrows. Whites now comprise a greater number of homicide victims than Blacks, but homicide risk is still greater among Blacks than among Whites.
- The Black male homicide rate is reduced again, this time from 42.8 to 17.2. Black males still constitute the largest race/gender grouping, but are no longer the majority of homicide victims.
- Both the proportion of victims who are Hispanic and the Hispanic homicide rate decrease.

- The percentage of homicides with no suspect or where the relationship between the victim and the suspect is unknown drops to 39%.
- Greater than one-third (37%) of homicides among those ages 40-59 are related to intimate partner violence or conflict.
- Homicides precipitated by other crimes are still prevalent at this point of the life course (24%).
- Homicides begin to occur in private homes again, with 61% occurring within a private residence and 51% occurring within the victim's own home.
- Firearms as the method of fatal injury decline to 60%. Homicides involving a sharp instrument increases to 22% and those involving a blunt instrument (e.g., baseball bat) now make up 10%.
- Alcohol is found in 42% of all persons tested; 28% had a BAC of .08 or greater. Use of cocaine prior to the homicide increases to nearly one-fourth (24%).
- Central Virginia had both the largest number of homicides and the highest homicide rate. Eastern and southwest Virginia had the same homicide rate.

Ages 60 and Older

- Males account for 57% of elder homicides, their smallest proportion since ages 0-4. The male homicide rate is 1.6 times higher than the female rate.
- Blacks still have the highest risk of homicide but now make up 29% of homicide victims, down from a high of 74% at ages 15-24.
- White males and White females each make up a greater number of total homicide victims than do Black males, but Black males retain the highest homicide rate.
- Asian males have a relatively small number of homicides but have the second-highest rate of any race/gender grouping.
- More than one-third (37%) of elder homicides are related to intimate partner violence.
- The proportion of homicides related to other crimes reaches its peak here at 34%. This type of homicides is common across this age group.
- Most homicides (80%) now transpire in a private residence; 79% occur in the victim's own residence.
- The presence of alcohol drops to 28%, and the proportion with a BAC of .08 or greater declines to 13%. Ten percent of homicide victims now have opiates in their system.
- Central, eastern, and southwest Virginia have essentially the same number of elder homicides with the highest rate in central and equal rates in eastern and southwest.

CONCLUSION

Age is a prominent factor in understanding homicide risk for all persons; this is especially true among Blacks, and more specifically, Black males. Black male homicide rates are strongly tied to age and increase or decrease on a scale that is not experienced by other groups. Black male homicide numbers and rates dominate homicide statistics to the point that the rise and fall of Black male rates causes the rise and fall of overall homicide rates in Virginia. This finding mirrors a general trend in public health research, one which identifies significant social disparities by age, race, and gender in areas of chronic and infectious disease; unfortunately, this disparity extends to homicidal violence as well.

Homicides on either end of the life course spectrum are similar. The general nature of homicide for the very young and for those in the older age groups has key matching components. Both younger and older victims tend to be killed by someone they know as a family member, an intimate partner, or the intimate partner of a relative; those in the middle are more often killed by other persons to whom they are not related or involved with intimately. Both younger and older victims are killed inside of their own home while those in the middle are killed more often in public spaces. Younger and older homicide victims have less gender and racial disparity while the middle age groups are dominated by male homicides, especially Black male homicides.

Homicidal violence represents a profound challenge for public health. Viewed predominantly through the lens of the criminal justice system, communities tend to emphasize charges, convictions, sentences, restorative justice, and prison terms rather than primary prevention strategies to reduce child abuse, domestic violence, and other forms of homicide. This report identifies populations who are more at risk than others, and documents regions of Virginia and circumstances surrounding homicide that can assist in developing targeted responses and interventions to reduce homicide and support healthier communities in the Commonwealth.