



Office of the Chief Medical Examiner
November, 2015

2014

Family and Intimate Partner Homicide

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

Prepared by:

Emma Duer, MPH

Program Coordinator

Family and Intimate Partner Homicide Review & Surveillance

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Suggested Citation: Virginia Office of the Chief Medical Examiner. (2015). *Family and intimate partner homicide: A descriptive analysis of the characteristics and circumstances surrounding family and intimate partner homicide in Virginia, 2014*. Richmond, VA: Virginia Department of Health. Retrieved [insert date of retrieval here] from www.vdh.virginia.gov/medExam/fipvhs-reports-publications.htm



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

Emma Duer, MPH
Family and Intimate Partner Homicide Surveillance Coordinator
Virginia Department of Health
Office of the Chief Medical Examiner
737 North 5th Street, Suite 301
Richmond, VA 23219
Emma.Duer@vdh.virginia.gov
Telephone: (804) 205-3853
Fax: (804) 786-1877

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INTRODUCTION

In 1999, the Virginia General Assembly enacted Virginia Code §32.1-283.3 directing the Chief Medical Examiner to provide ongoing surveillance of fatal family violence occurrences and to promulgate an annual report based on accumulated data. The resulting Family and Intimate Partner Homicide Surveillance Project is a public health effort for understanding the scope of fatal domestic violence in Virginia. It provides a standardized method for monitoring and reviewing all domestic related homicides in the state.

The project is coordinated at the Virginia Department of Health, Office of the Chief Medical Examiner (OCME). Cases are identified by newspaper surveillance and through OCME records. Cases in the project are deaths deemed by the OCME to be a homicide after a medico-legal death investigation. Since deaths are identified by newspaper surveillance and OCME records, numbers may differ from data reported by law enforcement agencies and the Virginia Division of Health Statistics. Information about each homicide is drawn from records obtained and compiled by the OCME during death investigation, as well as court records and internet news searches.

TECHNICAL NOTES

Cases are included in this project if the decedent was injured and/or died in Virginia. To provide a sense of where fatal domestic violence occurs in Virginia, two types of regional breakdowns are provided. Health Planning Region (HPR) describes where the fatal injury occurred, revealing areas of the Commonwealth where prevention efforts are most needed. OCME Districts portray where the death investigation took place, which may be different from the district where injury occurred.

Population data are from the U.S. Census Bureau Annual Estimates for 2014 (Table 1; See Appendix A). Ethnicity is reported separately from Race in this report, as Hispanic persons can identify as a member of any race and are a separate ethnic group. Where appropriate, tables include numbers, percentages, and rates. Rates allow comparisons to be made over time and across different populations. Some data are omitted when the number of cases is low to protect the confidentiality of decedents and their families. Rates are calculated for every 100,000 persons in the population, and are specific to age, race, and/or sex unless otherwise specified. Rates based on 20 or fewer cases are considered statistically unreliable and should be interpreted with caution. Where no table or figure is referenced, data is sourced from additional unpublished analyses.

FAMILY AND INTIMATE PARTNER (FIP) HOMICIDE CLASSIFICATION

The Family and Intimate Partner (FIP) Homicide Surveillance project uses the following six Case Types to differentiate categories of fatal domestic violence.

Intimate Partner Homicide (IPH)	A homicide in which the victim was killed by one of the following: spouse (married or separated) or former spouse; current or former boyfriend, girlfriend or same-sex partner; or current or former dating partner. This case type could include homicides in which only one of the parties had pursued or perceived a relationship with the other, as in some stalking cases.
Intimate Partner Associated (IPA) Homicide	A homicide in which the 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, romantic rivals, or bystanders.
Child Homicide by Caregiver (CHC)	A homicide in which the victim was a child under the age of 18 killed by a caregiver.
Adult Homicide by Caregiver (AHC)	A homicide in which the victim was an adult 18 years or older who was killed by a caregiver.
Other Family Homicide (OFH)	A homicide in which the victim was killed by a family member related to them biologically, by marriage, or by other legal arrangement (e.g., foster or adoptive family member) and which does not meet the criteria for one of the four categories above.
Family Associated Homicide (FAH)	A homicide in which the 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.

ADDITIONAL CASE CATEGORIES USED IN THIS REPORT

Intimate Partner Related (IPR) Homicide: A homicide involving an intimate partner relationship, including Intimate Partner Homicide and Intimate Partner Associated Homicide.

Family Related Homicide (FRH): A homicide involving a family relationship, including Other Family Homicide and Family Associated Homicide.

FAMILY AND INTIMATE PARTNER (FIP) HOMICIDE IN VIRGINIA

OVERVIEW

To understand the context of Family and Intimate Partner (FIP) Homicide, consider the following statistics regarding the 358 total homicides that occurred in Virginia in 2014:¹

- The homicide rate in Virginia in 2014 was 4.3, a 5% increase from 2013.
- The majority of victims were male (73%) and identified as black (55%).
- 34% of victims were males aged 20-34.
- 71% of homicide victims were killed with a firearm, including half of all females (56%) and three-quarters of males (76%).

In 2014 there were 100 Family and Intimate Partner Homicide events in Virginia, resulting in 112 deaths. These deaths occurred at a rate of 1.3, representing a 13% decrease from 2013 (1.5). In 2014 there were no Adult Homicides by Caretaker.

LONG TERM TRENDS

The total number of homicides in Virginia in 2014 increased from 2013 by 5%, while the number of homicides related to family and intimate partner violence decreased by 8% to 112—the lowest number recorded since surveillance began in 1999 (Figure 2, Table 25). Rates of death from family and intimate partner violence stayed the same or decreased for some case types as was the case for Child Homicides by Caretaker (from 1.1 to 0.9; Figure 3). While Intimate Partner Homicide comprises the largest category of Family and Intimate Partner Homicides (43% in 2014), children killed by a caretaker consistently die at the highest rate (1.0 from 2010-2014; Figure 3).

Table 25 (page 37) provides a five-year look at selected characteristics of FIP Homicides, highlighting other long term trends. For example, the rate at which males die in FIP Homicide has decreased every year for the past five years of surveillance.

31% OF ALL HOMICIDES IN 2014 IN VIRGINIA WERE ATTRIBUTED TO FAMILY AND INTIMATE PARTNER VIOLENCE (TABLE 12). WHILE THE OVERALL NUMBER OF HOMICIDES HAS GENERALLY DECREASED OVER THE PAST DECADE, 2014 WAS THE FIRST YEAR SINCE 2007 THAT THE PROPORTION OF DEATHS ATTRIBUTED TO FIPV HAS FALLEN BELOW ONE IN THREE (FIGURE 2).

¹ Preliminary data from the Virginia Medical Examiners Data System (VMEDS). Retrieved July 9, 2014.

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Figure 1: Number of All Homicide, FIP Homicide, and IPH Victims and Percent FIP Homicide (FIPH) in Virginia: 2010-2014

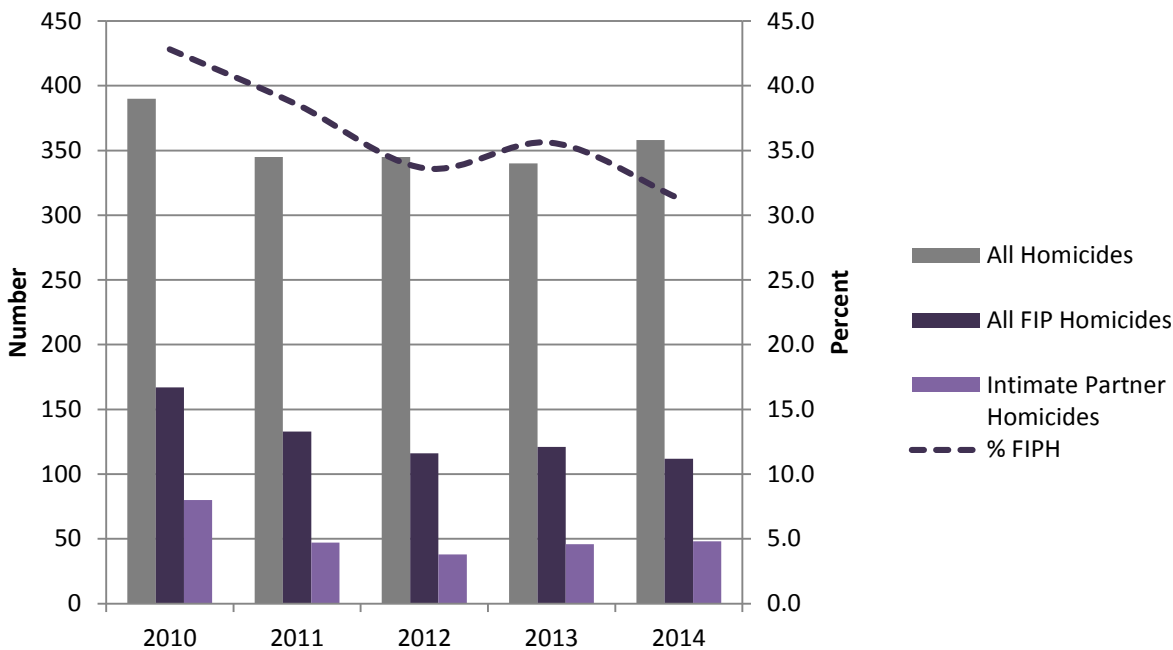
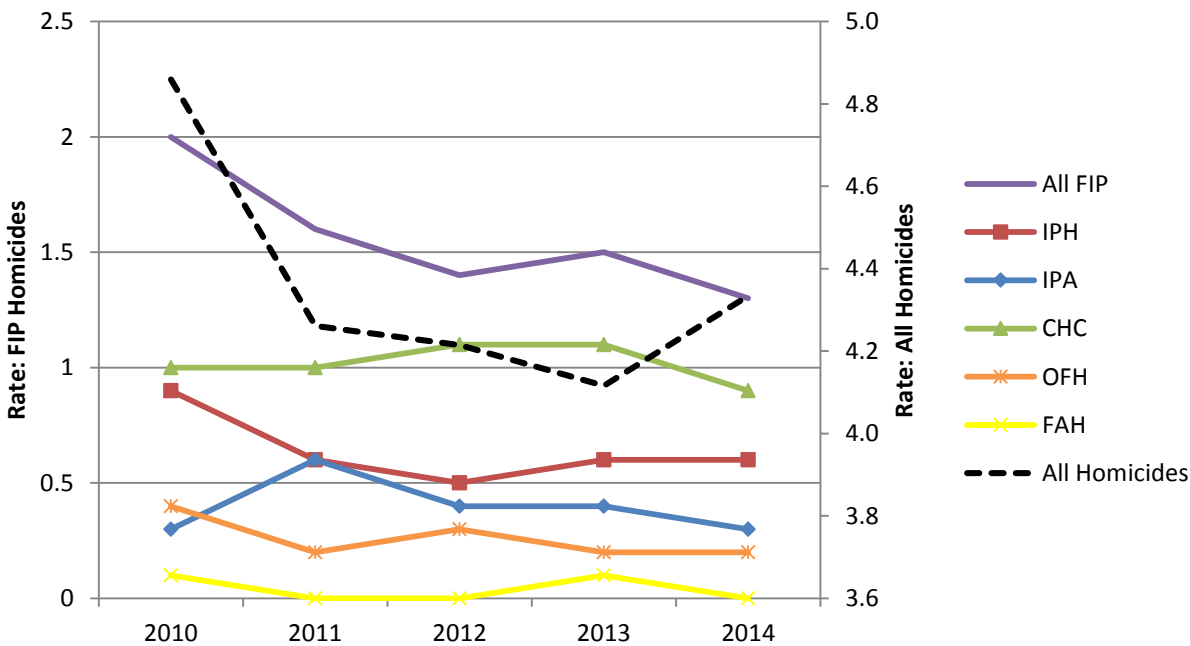


Figure 2: Rate of Death by Homicide Case Type in Virginia: 2010-2014



Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

CHARACTERISTICS OF FAMILY AND INTIMATE PARTNER HOMICIDES

The FIPS Project collects information on demographic and risk factor characteristics for each death to better understand who dies in FIP Homicide and the circumstances that surround those events. The following sections provide a summary of these characteristics for FIP Homicides, and an overview of homicide characteristics by case type.

2014 FIPH Victims Were:

- 51% white
- 62% female
- Aged 0-79, with a median age of 31
- 28% injured in the Eastern HPR
- 54% killed with a firearm

DESPITE THE MAJORITY OF FIP HOMICIDE VICTIMS BEING WHITE, THE HIGHEST DEATH RATE WAS AMONG BLACKS (2.9), WITH BLACK FEMALES DYING AT A HIGHER RATE THAN ANY OTHER GROUP (3.3; TABLE 14).²

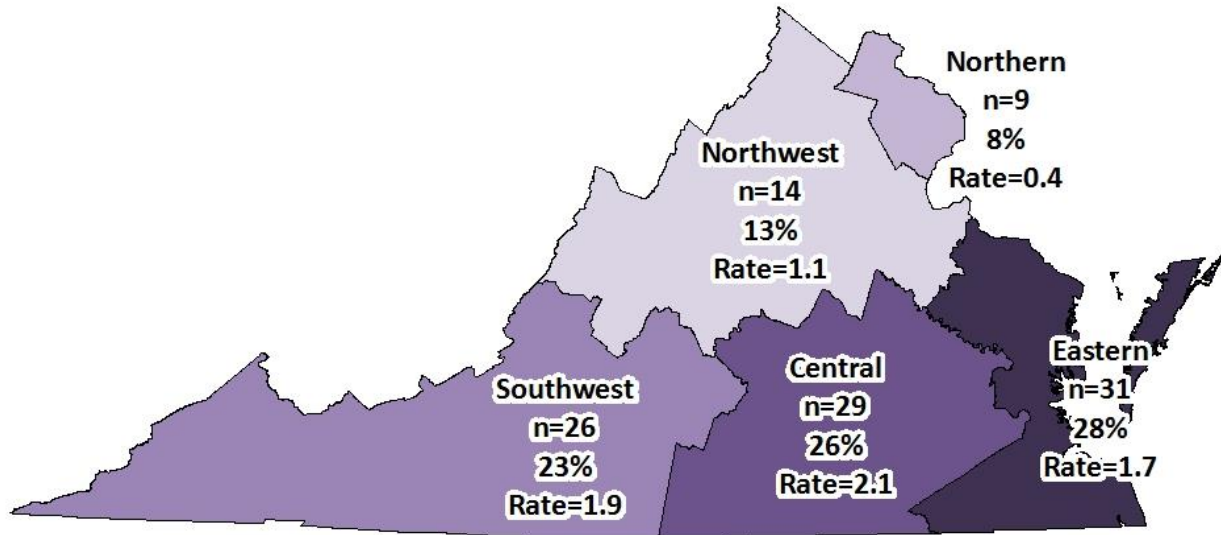
2014 HIGHLIGHTS:

- While the rate of death among blacks did not change from 2013, the burden shifted from black males to black females with the rate among black males decreasing by 16% and the rate among black females increasing by 27% (Table 14).
- The rate at which infants died from FIP Homicide reduced by half (from 12.6 in 2013 to 5.8 in 2014), while the rate of death for children aged 1-4 nearly doubled (from 1.7 to 2.9 in 2014; Figure 13).
- Deaths from strangulation increased by one third (from 6 to 8 in 2014) while blunt instrument injuries more than doubled (from 5 in 2013 to 12 in 2014; Table 11).
- The proportion of FIP Homicides involving a firearm fell by 5% (from 57% in 2013 to 54% in 2014; Table 11).
- The reduction in FIP Homicides in 2014 was unevenly distributed by gender. While 17 fewer males were killed in FIP Homicides (causing the overall number to go down), the number of females killed actually increased (Table 14).

² Tables numbered 11 and higher and Figures 13 and higher appear in Appendix A beginning on page 23.

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Figure 3: Number, Percent, and Rate of FIP Homicide Deaths by Health Planning Region of Injury in Virginia (N=112): 2014



2014 GEOGRAPHIC HIGHLIGHTS (FIGURE 3, TABLE 2):

- Richmond City remained the locality with the highest number of FIP Homicides (12) and the number of victims there increased in 2014 by two deaths, with a corresponding rate increase of 17% from 2013.
- Culpeper County and Petersburg City together rose to the fourth most common locality of injury in 2014, each with the highest number of FIP Homicides recorded in a single year in those respective localities since surveillance began in 1999 (5).
- The rate of death from FIP Homicide decreased in the Eastern (to 1.7 from 2.1 in 2013).

Table 2. Number, Percent, and Rate of FIP Homicide Deaths by Most Common Localities of Injury in Virginia (N=112): 2014

Locality	No.	%	Rate
Richmond City	12	10.7	5.5
Norfolk City	11	9.8	4.5
Chesterfield County	6	5.4	1.8
Loudoun County	6	5.4	1.7
Petersburg City	5	4.5	15.3
Culpeper County	5	4.5	10.2
Virginia Beach City	5	4.5	1.1

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

CHARACTERISTICS BY CASE TYPE

Characteristics of FIP Homicide vary depending on the type of relationship involved. Tables 3-4 highlight a selection of the most common characteristics by case type, with the following notable comparisons in 2014:

- Children killed by a caretaker were equally likely to be male or female, while females died more often in FIP Homicide overall (62%).
- Males had the highest risk of dying in the crossfire of intimate partner violence; males died at twice the rate in IPA Homicide when compared with males killed directly by an intimate partner or family member (0.4 compared to 0.2).
- Victims of IPA Homicide were on average younger than FIP homicide victims overall (26 compared to 31).
- Victims of Family Related Homicide were older (average age of 42 compared to 31) and more often white than other types of victims (59% compared to 51%).
- Firearms stand out as the most common method of fatal injury (54% overall), except in the case of Child Homicide by Caretaker where the most common fatal agent was a personal weapon (33%).
- While the most common race of FIPH victims varied slightly by case type (Table 3), without exception blacks died at the highest rate from all forms of fatal domestic violence (2.9; Table4).

Table 3: Common Characteristics of FIP Homicide Victims by Case Type in Virginia (N=112): 2014

Characteristic	IPH (%) (n=48)	IPA (%) (n=26)	CHC (%) (n=16)	FRH (%) (n=22)	All FIPH (%)
Average Age	38	26	2	42	31
Age Range	17-79	2-74	0-8	4-78	0-79
Age Group <i>Males</i>	25-34 (40.0)	35-44 (30.8)	1-4 (50.0)	35-44 (30.0)	35-44 (23.3)
<i>Females</i>	25-44 (57.9)	5-24 (54.5)	Infant-4 (75.0)	45-54 (33.3)	25-34 (18.8)
Gender	Female (79.2)	Male (57.7)	Female/Male (50.0 each)	Female (54.5)	Female (61.6)
Race/Ethnicity	White (54.2)	Black (53.8)	Black (50.0)	White (59.4)	White (50.9)
Fatal Agent	Firearm (63.8)	Firearm (76.9)	Personal Weapon (33.3)	Firearm (63.6)	Firearm (54.1)
Percent of Total	42.9	23.2	14.3	19.6	100.0

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Table 4: Rate of FIP Homicide Victims by Case Type and Common Characteristics in Virginia (N=112): 2014

Characteristic		IPH (n=48)	IPA (n=26)	CHC (n=16)	FRH (n=22)	All FIP
Age Group	Male	25-34 (0.7)*	1-4 (1.5)*	Infant (5.7)*	35-44 (0.6)*	Infant (5.7)*
	Females	25-44 (1.9)	5-14 (0.6)*	Infant (5.9)*	45-54 (0.7)*	Infant (5.9)*
Gender		Female (0.9)	Male (0.4)*	Female (0.9)*	Female (0.3)*	Female (1.6)
Race/Ethnicity		Black (1.1)*	Black (0.8)*	Black (1.8)*	Black (0.5)*	Black (2.9)
Overall Rate		0.6	0.3	0.9*	0.3	1.3

*Rates are based on fewer than 20 cases and should be interpreted with caution. See Appendix A for additional data.

For additional data on Family and Intimate Partner Homicide, see the following figures and tables:

<i>Label</i>	<i>Title</i>	<i>Page</i>
Figure 13	<i>Number of FIP Homicide Victims by Age and Sex in Virginia (N=112): 2014</i>	23
Figure 14	<i>Rate of FIP Homicide Deaths by Age and Sex of Victim in Virginia (N=112): 2014</i>	24
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Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

INTIMATE PARTNER HOMICIDE (IPH)

In 2014 there were 48 Intimate Partner Homicides (IPH), resulting in 48 deaths. The rate of death from IPH was 0.6, the same as the rate in 2013.

2014 IPH Victims Were:

- 54% white
- 79% female
- Aged 17-79, with a median age of 38
- 25% injured in each of the Southwest and Eastern HPRs
- 64% killed with a firearm

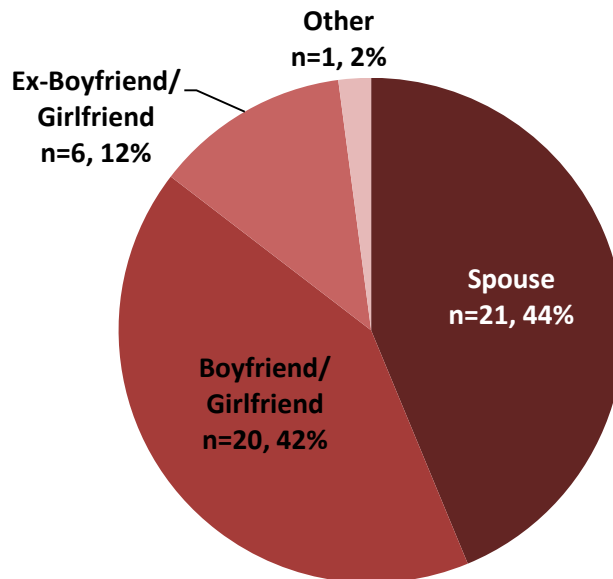
ALTHOUGH THE MAJORITY OF IPH VICTIMS WERE WHITE, BLACKS DIED AT TWICE THE RATE (1.1 COMPARED TO 0.4), WITH BLACK FEMALES HAVING THE HIGHEST RATE AT 1.5 (TABLE 17).

2014 HIGHLIGHTS:

- Intimate Partner Homicides committed with a motor vehicle tripled from 2013, from one to three cases (Table 17).
- The number of deaths from IPH among blacks increased, primarily due to an increase in the number of black male victims (from 1 in 2013 to 6 in 2014; Table 17).

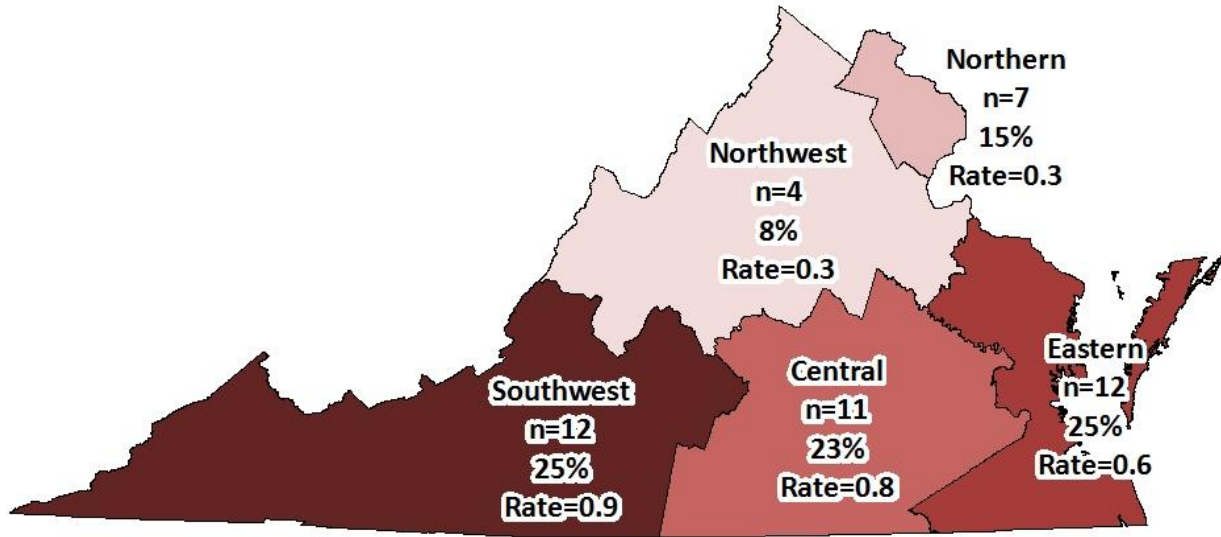
WHILE THE MAJORITY OF IPH VICTIMS WERE KILLED BY A CURRENT SPOUSE (FIGURE 4), MALE VICTIMS WERE MORE OFTEN KILLED BY A BOYFRIEND OR GIRLFRIEND.

Figure 4: Number and Percent of IPH Victims by Relationship to Alleged Offender in Virginia (N=48): 2014



Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Figure 5: Number, Percent, and Rate of IPH Deaths by Health Planning Region of Injury in Virginia (N=48): 2014



2014 GEOGRAPHIC HIGHLIGHTS (FIGURE 5):

- The distribution of IPH across Virginia’s HPRs in 2014 was similar to 2013.

For additional data on Intimate Partner Homicide, see the following figures and tables:

Label	Title	Page
Figure 16	Number of IPH Victims by Age and Sex in Virginia (N=48): 2014	27
Figure 17	Rate of IPH Deaths by Age and Sex of Victim in Virginia (N=48): 2014	27
Figure 18	Number, Percentage, and Rate of IPH Deaths by OCME District in Virginia (N=48): 2014	28
Table 15	Number and Percentage of IPH Victims by Fatal Agent and Sex in Virginia (N=48): 2014	28
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Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

INTIMATE PARTNER ASSOCIATED (IPA) HOMICIDE

In 2014 there were 14 Intimate Partner Associated (IPA) Homicide events in Virginia, resulting in 26 deaths.

2014 IPA Homicide Victims Were:

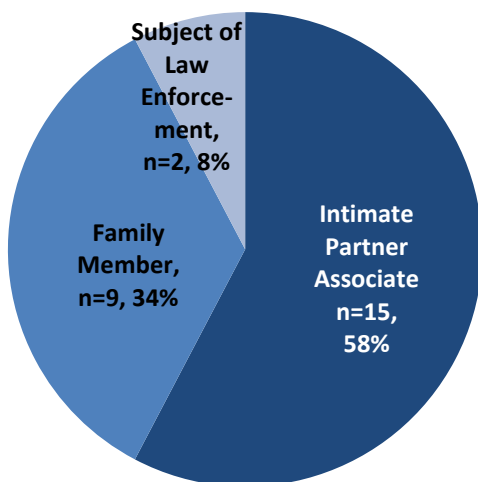
- 54% black
- 58% male
- Aged 2-74, with a median age of 26
- 45% injured in the Central HPR
- 77% killed with a firearm

ALTHOUGH FEMALES DIED MORE OFTEN IN FIP HOMICIDE OVERALL, MALES WERE MORE LIKELY THAN FEMALES TO BE KILLED IN IPA HOMICIDE (TABLE 20).

2014 HIGHLIGHTS:

- The number of separate IPA homicide events in 2014 fell from 26 to 14 although the total number of deaths remained the same. This resulted in the average number of victims killed in an IPA homicide event nearly doubling from 1.1 in 2013 to 1.9 in 2014.
- Nine IPA victims were killed by a family member in Intimate Partner Homicide events where an intimate partner was the primary victim; each of these events were family annihilations where the alleged offender killed all the members of his/her household before committing suicide (Figure 6, Table 19).
- The number of females killed in IPA Homicide nearly doubled from 6 in 2013 to 11 in 2014. The majority of this increase was caused by a rise in the number of black females killed (from 1 to 8; Table 20).

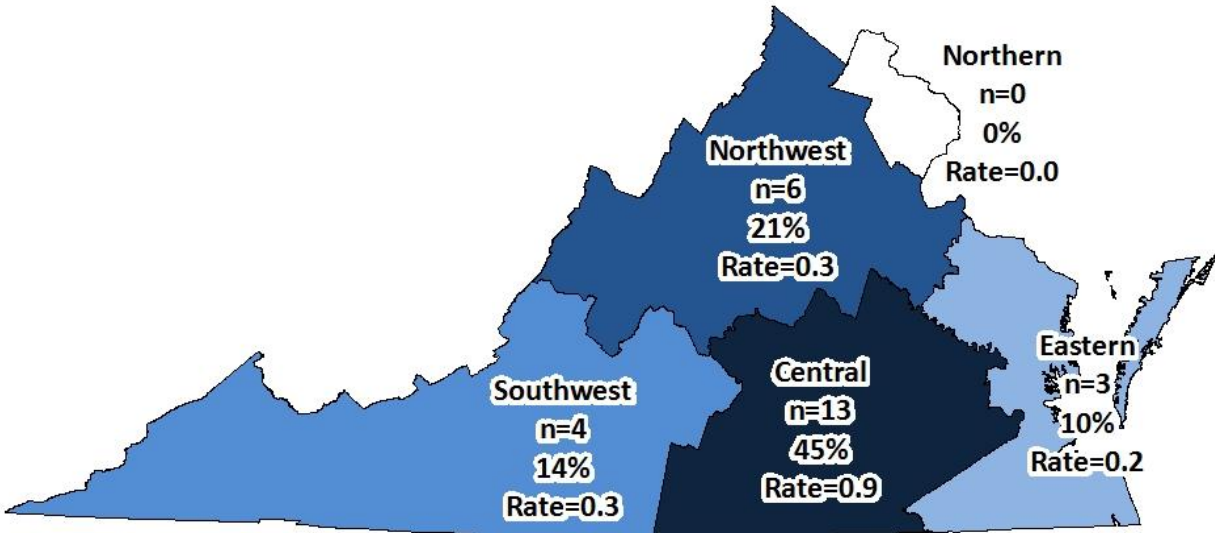
Figure 6: Number and Percent of IPA Homicide Victims by Relationship to Alleged Offender in Virginia (N=26): 2014



In Intimate Partner Associated Homicide, victims are not part of the intimate partner relationship but often associated with one or both partners as a friend, family member, or other intimate partner. Intimate Partner Associates comprise the majority of victims of IPA Homicide (58%). Family members and abusers killed by law enforcement account for the remainder of IPA Homicide victims in 2014 (Figure 6).

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Figure 7: Number, Percent, and Rate of IPA Deaths by Health Planning Region of Injury in Virginia (N=26): 2014



2014 GEOGRAPHIC HIGHLIGHTS (FIGURE 7):

- There were no incidents of IPA Homicide in the Northern HPR in 2014, compared to 5 in 2013.
- The number of deaths from IPA Homicide decreased in the Eastern from 11 in 2013 to 3 in 2014.

For additional data on Intimate Partner Associated Homicide, see the following figures and tables:

Label	Title	Page
Figure 19	Number of IPA Homicide Victims by Age and Sex in Virginia (N=26): 2014	30
Figure 20	Rate of IPA Homicide Deaths by Age and Sex of Victim in Virginia (N=26): 2014	30
Figure 21	Number, Percentage, and Rate of IPA Homicide Deaths by OCME District in Virginia (N=26): 2014	31
Table 18	Number and Percentage of IPA Homicide Victims by Fatal Agency and Sex in Virginia (N=26): 2014	31
Table 19	Number and Percentage of IPA Homicide Victims by Sex and Relationship to Alleged Offender in Virginia (N=26): 2014	31
Table 20	Number, Percentage, and Rate of IPA Homicide Victims by Race, Ethnicity, and Sex in Virginia (N=26): 2014	32

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

INTIMATE PARTNER RELATED (IPR) HOMICIDE

RISK FACTORS

Of the 74 Intimate Partner and Intimate Partner Associated Homicides (Intimate Partner Related [IPR] Homicide), 66 (89%) had one or more identifiable risk factors prior to the homicide in 2014. The most common risk factors for fatal intimate partner violence from prior years remained prominent in 2014: an abuser with a history of violence (39%) or criminal offenses (41%), and the ending of a relationship (28%; Table 5). In 2013, alcohol and drug abuse were the third and fourth most common risk factors present in IPR Homicide (24% and 22% respectively); in 2014 the number of cases involving an abuser with a history of substance abuse decreased to 12% overall. For more information on trends in the role of substance abuse in FIPH, see page 21.

Table 5: Number and Percent of IPR Homicide Deaths by Selected Risk Factors in Virginia (N=74): 2014

Risk Factor	No.	%
Abuser was arrested or convicted of a criminal offense	30	40.5
History of violence or threats of violence	29	39.2
Relationship had ended or was ending	21	28.4
Abuser had controlling behavior	11	14.9
Either partner had moved out of the home	10	13.5

LETHALITY ASSESSMENT

The *Lethality Screen for First Responders*³ is used in many communities to identify a victim’s potential level of risk for fatal violence. A positive response to one or more of the first three items on the tool indicates a victim at the highest level of risk. In 2014, one in eight (13%) Intimate Partner Related events in Virginia involved a relationship where at least one of these high-risk factors was identified during surveillance:

- Item #1: The abuser had threatened or assaulted the victim with a weapon.
- Item #2: The abuser had threatened to kill the abuse victim.
- Item #3: The abuse victim believed the abuser was capable of killing them.

IN 24 INTIMATE PARTNER RELATED HOMICIDES (39%), A THIRD PARTY KNEW ABOUT PAST VIOLENCE OR THREATS OF FUTURE VIOLENCE PRIOR TO THE HOMICIDE.

³Lethality Assessment Program Maryland Model for First Responders, Maryland Network Against Domestic Violence (2005). Retrieved October 11, 2013 from <http://mnadv.org/lethality>.

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

PRECIPITATING CHARACTERISTICS

In 2014, 53 (85%) IPR Homicides had one or more identifiable precipitating characteristics. The most common triggers for fatal violence remain stable from previous years, including the ending of a relationship (39%) and the presence or perceived presence of a new intimate partner relationship (19%; Table 6).

FINANCIAL ISSUES PLAYED A LARGER ROLE IN PRECIPITATING FATAL INTIMATE PARTNER VIOLENCE IN 2014, WITH THE PERCENTAGE OF IPR HOMICIDES INVOLVING THIS TYPE OF CONFLICT INCREASING FROM 7% IN 2013 TO 11% (TABLE 6).

Table 6: Number and Percent of IPR Homicide Deaths by Selected Precipitating Factors in Virginia (N=74): 2014

Precipitating Factor	No.	%
Termination of the relationship	29	39.2
New partner or the perception of a new partner	14	18.9
Unspecified argument	13	17.6
Financial issues	8	10.8
Third party intervention	7	9.5

CIVIL COURT PROCEEDINGS AND PROTECTIVE ORDERS

In 13 (21%) IPR homicide events (n=62), the intimate partners had a history of civil court involvement, including child custody, visitation or support; divorce; and protective orders.

IN EIGHT (13%) IPR HOMICIDE CASES IN 2014, THE INTIMATE PARTNER HAD A HISTORY OF REQUESTING A PROTECTIVE ORDER. THIS WAS DOUBLE THE NUMBER IN 2013 (4).

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

CHILD HOMICIDE BY CARETAKER (CHC)

In 2014, there were 16 Child Homicide by Caretaker (CHC) events, resulting in 16 deaths.

2014 CHC Victims Were:

- 50% black
- 50% male
- Ages 0-8, with a mean age of 2
- 56% injured in the Eastern HPR
- 33% killed with a personal weapon

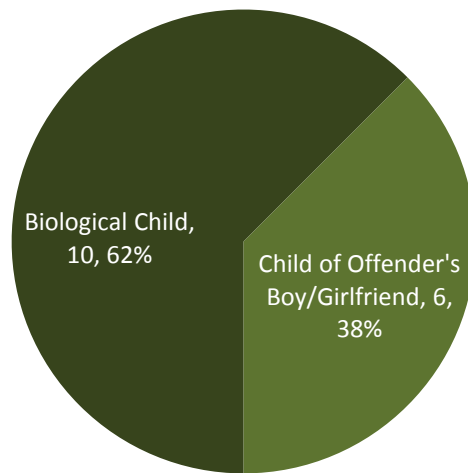
INFANTS WERE AT THE GREATEST RISK OF FIP HOMICIDE, AND HOMICIDE BY A CARETAKER SPECIFICALLY, WITH A 5-YEAR RATE OF 9.8—MORE THAN FOUR TIMES THE RATE IN THE NEXT HIGHEST RISK GROUP OF CHILDREN AGED 1-4 (2.2; TABLE 25).

2014 HIGHLIGHTS:

- The number of Child Homicides by Caretaker fell in 2014 from 21 in 2013, a 24% decrease. The majority of this reduction was a decrease in the number of infant deaths (from 12 in 2013 to 6; Figure 22).
- In 2014, two children were killed with a firearm (Table 21).
- The rate of death from CHC among blacks fell from 2.6 in 2013 to 1.8 (Table 22).

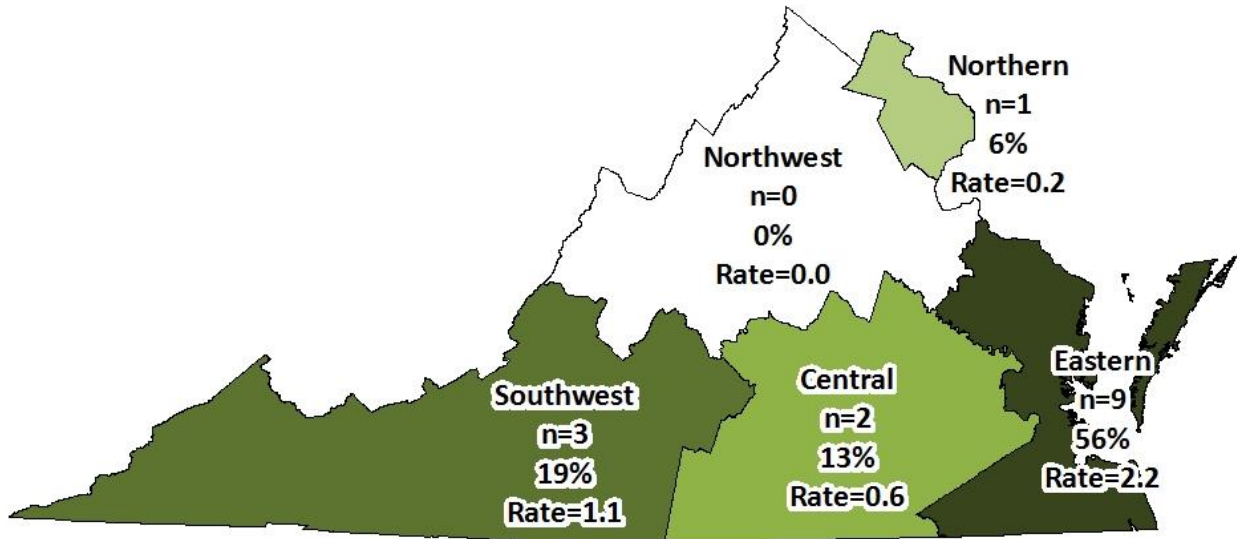
MORE THAN ONE IN THREE (38%) CHILDREN WHO DIE IN CHC WERE KILLED BY THEIR PARENT’S LIVE-IN BOYFRIEND OR GIRLFRIEND (FIGURE 8).

Figure 8: Number and Percent of CHC Victims by Relationship to Alleged Offender in Virginia (N=16): 2014



Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Figure 9: Number, Percent, and Rate of CHC Deaths by Health Planning Region of Injury in Virginia (N=16): 2014



2014 GEOGRAPHIC HIGHLIGHTS (FIGURE 9):

- More than half of all CHC deaths (56%) occurred in the Eastern HPR. The proportion of all CHC deaths occurring in the Eastern HPR nearly doubled in 2014, from 29% in 2013.
- There were no cases of CHC in the Northwest HPR in 2014, compared to 3 in 2013.
- The number of CHC deaths in the Central HPR decreased from 8 in 2013 to 2 in 2014.

IN 50% OF CHC DEATHS, THERE WAS A PRIOR HISTORY OF PHYSICAL VIOLENCE; 44% OF CHC VICTIMS WERE LIVING IN A HOUSEHOLD WHERE ONGOING FAMILY OR INTIMATE PARTNER VIOLENCE WAS ALSO OCCURRING (TABLE 7).

Table 7: Number and Percent of CHC Deaths by Selected Risk Factors in Virginia (N=16): 2014

Risk Factor	No.	%
History of violence or threats of violence	8	50.0
Living in a home with family or intimate partner violence	7	43.8
Alleged offender had been arrested or convicted of a criminal offense	5	31.3
Alleged offender had a history of substance abuse	3	18.8
CPS had previously been alerted to the household	2	12.5

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

For additional data on Child Homicide by Caretaker, see the following figures and tables:

Label	Title	Page
<i>Figure 22</i>	<i>Number of CHC Victims by Age and Sex in Virginia (N=16): 2014</i>	<i>33</i>
<i>Figure 23</i>	<i>Rate of CHC Deaths by Age and Sex of Victim in Virginia (N=16): 2014</i>	<i>33</i>
<i>Figure 24</i>	<i>Number, Percentage, and Rate of CHC Deaths by OCME District in Virginia (N=16): 2014</i>	<i>34</i>
<i>Table 21</i>	<i>Number and Percentage of CHC Victims by Fatal Agent and Sex in Virginia (N=16): 2014</i>	<i>34</i>
<i>Table 22</i>	<i>Number and Percentage of CHC Victims by Race, Ethnicity, and Sex in Virginia (N=16): 2014</i>	<i>34</i>

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

FAMILY RELATED HOMICIDE (FRH)

In 2014 there were 22 Other Family (OFH) and Family Associated Homicides (FAH) (Family Related Homicides [FRH]), resulting in 22 deaths.

2013 FRH Victims Were:

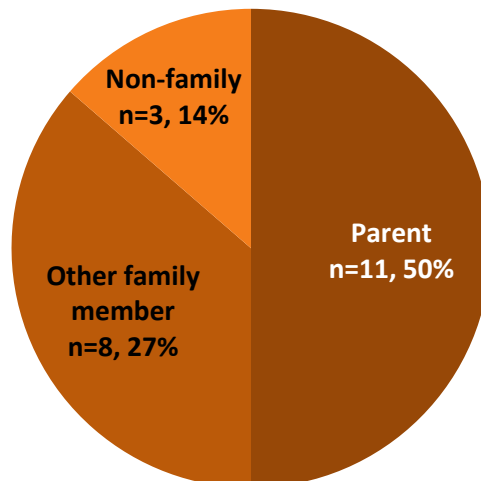
- 59% white
- 55% female
- Aged 4-78, with a mean age of 42
- 32% injured in each of the Eastern and Southwest HPRs
- 64% killed with a firearm

A LARGER PROPORTION OF FRH VICTIMS WERE WHITE, COMPARED TO OTHER FIP HOMICIDE CASE TYPES (59%; TABLE 24).

2014 HIGHLIGHTS:

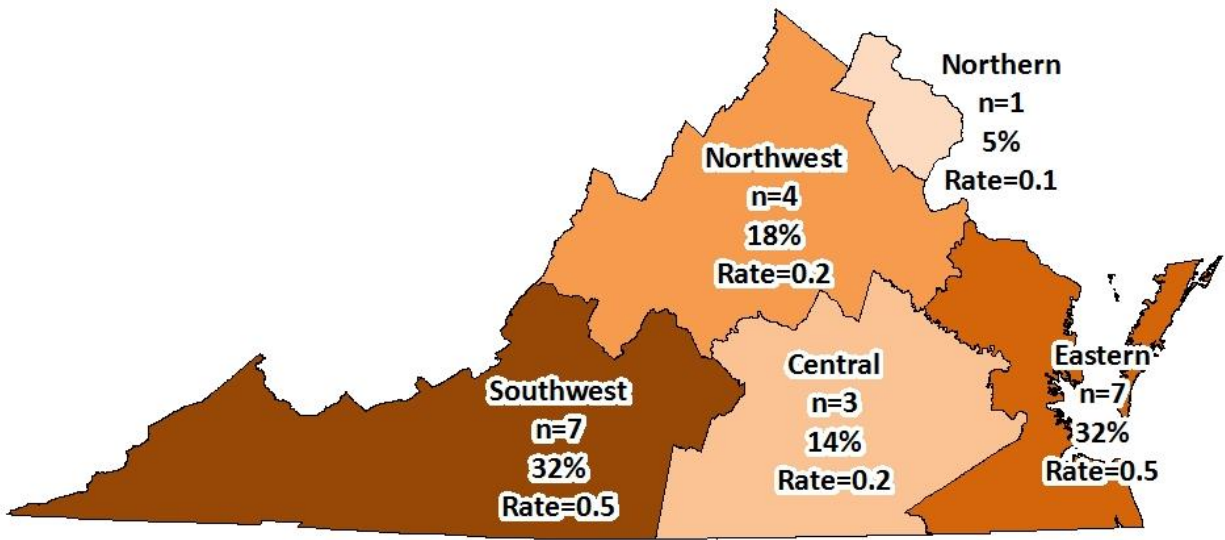
- Family Related Homicides involving a firearm decreased from 71% in 2013 to 64% in 2014, an 18% reduction (Table 23).
- A greater proportion of FRH victims were killed by a child in 2014 (50%) than in 2013 (38%); the majority of alleged offenders in these cases were adult children (91%), including biological and step-children (Figure 10).

Figure 10: Number and Percent of FRH Victims by Relationship to Alleged Offender in Virginia (N=22): 2014



Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Figure 11: Number, Percent, and Rate of FRH Deaths by Health Planning Region of Injury in Virginia (N=22): 2014



2014 GEOGRAPHIC HIGHLIGHTS (FIGURE 11):

- The number of FRH deaths in the Northwest HPR (4) increased in 2014 from 2 in 2013.

RISK FACTORS

The most common risk factors present in Family Related Homicide included a history of threats against the victim (32%), living in a home where ongoing family or intimate partner abuse was occurring (32%), and an abuser with a criminal history (23%; Table 8).

THE PROPORTION OF FRH CASES WHERE THERE WAS A HISTORY OF VIOLENCE OR THREATS OF VIOLENCE INCREASED FROM 21% TO 32% FROM 2013 TO 2014. HOWEVER, FEWER OFFENDERS IN FAMILY RELATED HOMICIDES HAD A CRIMINAL HISTORY (38 TO 23%).

Table 8: Number and Percent of FRH Deaths by Selected Risk Factors in Virginia (N=22): 2014

Risk Factor	Total	
	No.	%
History of violence or threats of violence	7	31.8
Lived in a home with family or intimate partner violence	7	31.8
Alleged offender was arrested or convicted of a criminal offense	5	22.7

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

PRECIPITATING CHARACTERISTICS

The most common precipitating characteristic of family related fatal violence was an argument or conflict due to a mental health issue (23%; Table 9). See page 21 for more information on trends in mental health issues in FIP Homicide.

2014 HIGHLIGHTS (TABLE 9):

- The proportion of cases precipitated by a mental health issue increased to 23% in 2014 from 17% in 2013, a 35% increase.
- The number of FRH deaths that were precipitated by a third party intervention increased from 1 in 2013 to 4 in 2014, a four-fold increase.
- Accidental shootings played a significant role in Family Related Homicides in 2014, with 3 cases involving a minor child shooting a family member while handling a firearm. In 2013 there was 1 FRH involving an accidental shooting by a minor.

Table 9: Number and Percent of FRH Deaths by Selected Precipitating Characteristics in Virginia (N=22): 2014

Precipitating Characteristics	No.	%
Mental health issue	5	22.7
Third party intervention	4	18.2
Financial issue or property dispute	4	18.2
Abuser had substance or alcohol use/abuse	3	13.6
Accidental shooting	3	13.6

For additional data on Family Related Homicide, see the following figures and tables:

Label	Title	Page
Figure 25	Number of FRH Victims by Age and Sex in Virginia (N=22): 2014	35
Figure 26	Rate of FRH Victims by Age and Sex in Virginia (N=22): 2014	35
Figure 27	Number, Percentage, and Rate of FRH Deaths by OCME District in Virginia (N=22): 2014	36
Table 23	Number and Percentage of FRH Victims by Fatal Agency and Sex in Virginia (N=22): 2014	36
Table 24	Number, Percentage, and Rate of FRH Victims by Race, Ethnicity, and Sex in Virginia (N=22): 2014	36

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

THE IMPACT OF FATAL FIP VIOLENCE: ADDITIONAL FINDINGS

MULTIPLE DEATHS

Eighteen (18%) FIP Homicide events were followed within one week by the alleged offender's suicide. IPH was the most common context for homicide-suicide (78%), representing nearly a third (29%) of IPH fatalities (Table 10). In an additional 2 cases, the alleged offender attempted but did not complete suicide. Five (5%) fatal events resulted in multiple homicides (with as many as 4 victims each).

CHILDREN

One in three (32%) FIP Homicide events exposed 52 children to fatal violence in 2014 (Table 10). This was an increase from one in four events involving child witnesses in 2013 (25%). Fifteen of these children directly witnessed (saw or heard) the homicide. One third (34%) of events in which children were exposed were Intimate Partner Homicides.

In Intimate Partner Related Homicides, 31% of intimate partner relationships involved children in common under the age of 18; in 29% of IPR Homicides, one or both partners had a child under the age of 18 from another relationship.

SURVIVORS

Eighteen (18%) FIP Homicides had one or more survivors, totaling 23 surviving victims. The majority of these were survivors of an IPA Homicide (39%), with half of all IPA events involving surviving victims (50%).

Table 10: Number and Percent of FIP Homicide Events by Selected Characteristic in Virginia (N=100): 2014

Characteristic	No.	%
Multiple Deaths (Including Suicide)	19	19.0
Homicide-Suicide	18	18.0
Children Exposed	32	32.0
Event Had Survivor(s)	18	18.0

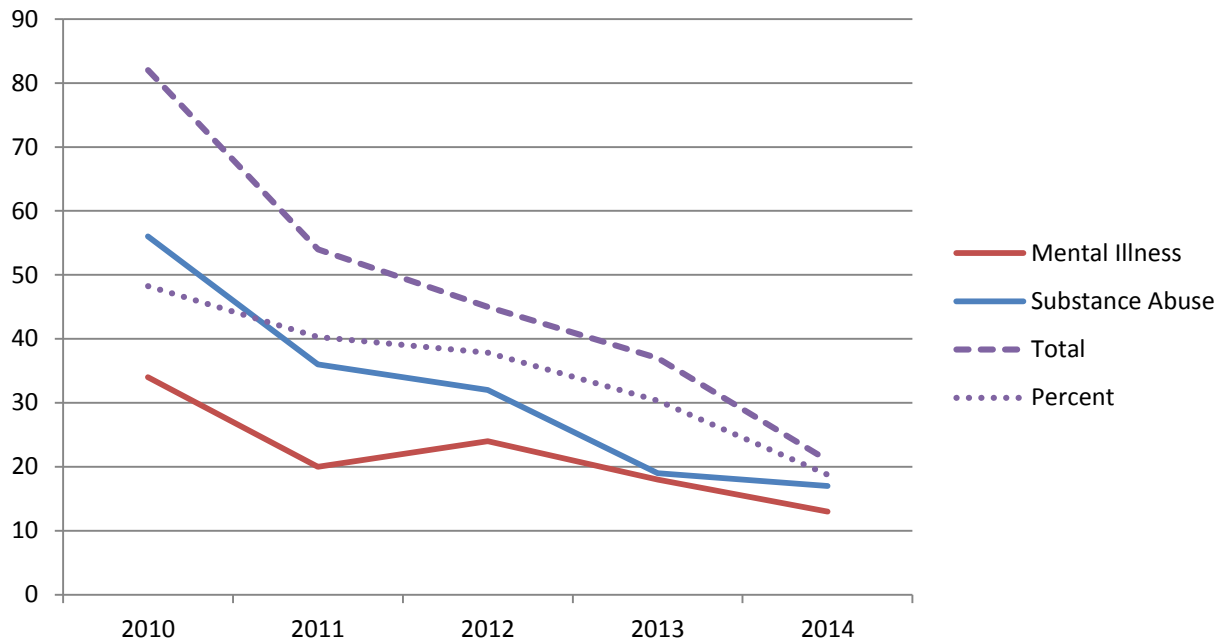
MENTAL HEALTH AND SUBSTANCE ABUSE

Mental health and substance abuse figure prominently in Family and Intimate Partner Homicide. In 2014, 12% of FIP Homicides involved an abuser with a history of mental illness and 15% a history of substance abuse. A total of 19% of FIP Homicides involved one or both factors. While an equal number of FIP Homicides involving mental health and substance abuse issues were Intimate Partner and Other Family Homicides (38% each in 2014), two in five Other Family Homicides involved such a history (compared to 17% of IPH).

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

From 2010-2014, 36% of FIP Homicides involved an abuser with a history of mental illness or substance abuse. A review of surveillance data from the past five years indicates that the number of FIP Homicides involving a history of mental illness or substance abuse is steadily decreasing (Figure 12). Substance abuse decreased the most, from 57 cases in 2010 to 17 in 2014 (a 70% reduction).

Figure 12. Number and Percent of FIP Homicides Involving an Abuser with a History of Mental Illness or Substance Abuse in Virginia (N=657): 2010-2014



Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

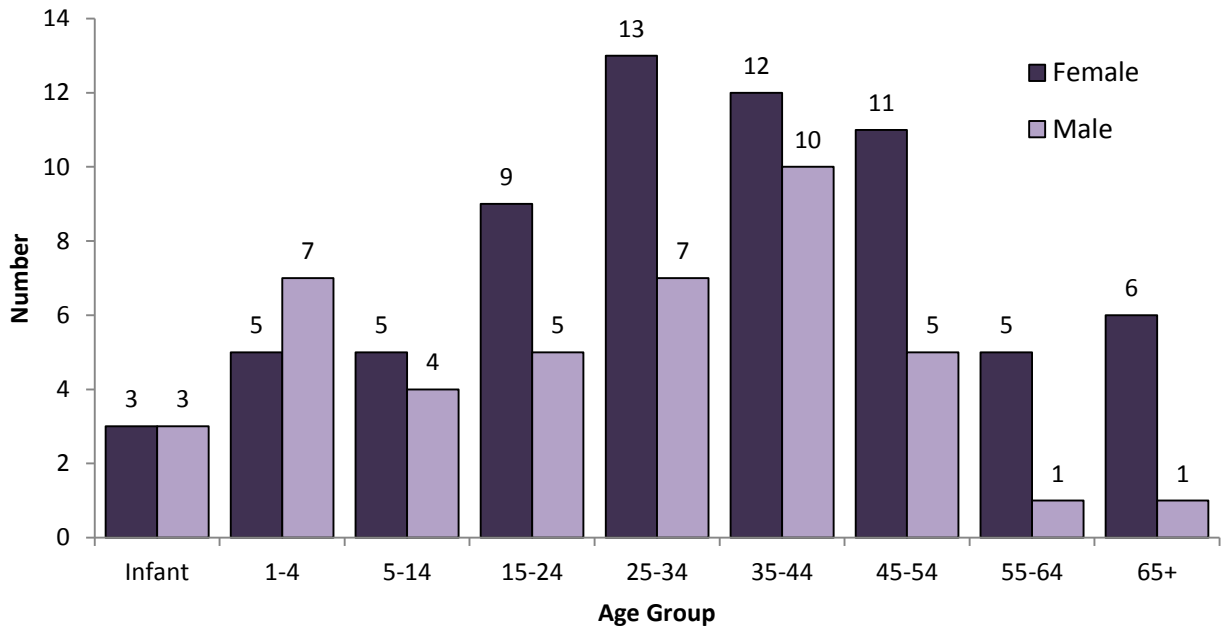
APPENDIX A: FIGURES AND TABLES

Table 1: Number and Percent of Virginia Resident Population by Race and Sex: 2014⁴

Race	Female		Male		Total	
	No.	%	No.	%	No.	%
White	3,012,061	71.2	2,973,554	72.6	5,985,615	71.9
Black	891,208	21.1	820,593	20.0	1,711,801	20.6
Other	327,776	7.7	301,097	7.4	628,873	7.6
Total	4,231,045	100.0	4,095,244	100.0	8,326,289	100.0

FAMILY AND INTIMATE PARTNER (FIP) HOMICIDE

Figure 13: Number of FIP Homicide Victims by Age and Sex in Virginia (N=112): 2014



⁴ Annual Estimates of the Resident Population by Sex, Age, Race Alone or in Combination, and Hispanic Origin for the United States and States: April 1, 2011 to July 1, 2014; Source: U.S. Census Bureau, Population Division (Release Date: January 2015)

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Figure 14: Rate of FIP Homicide Deaths by Age and Sex of Victim in Virginia (N=112): 2014

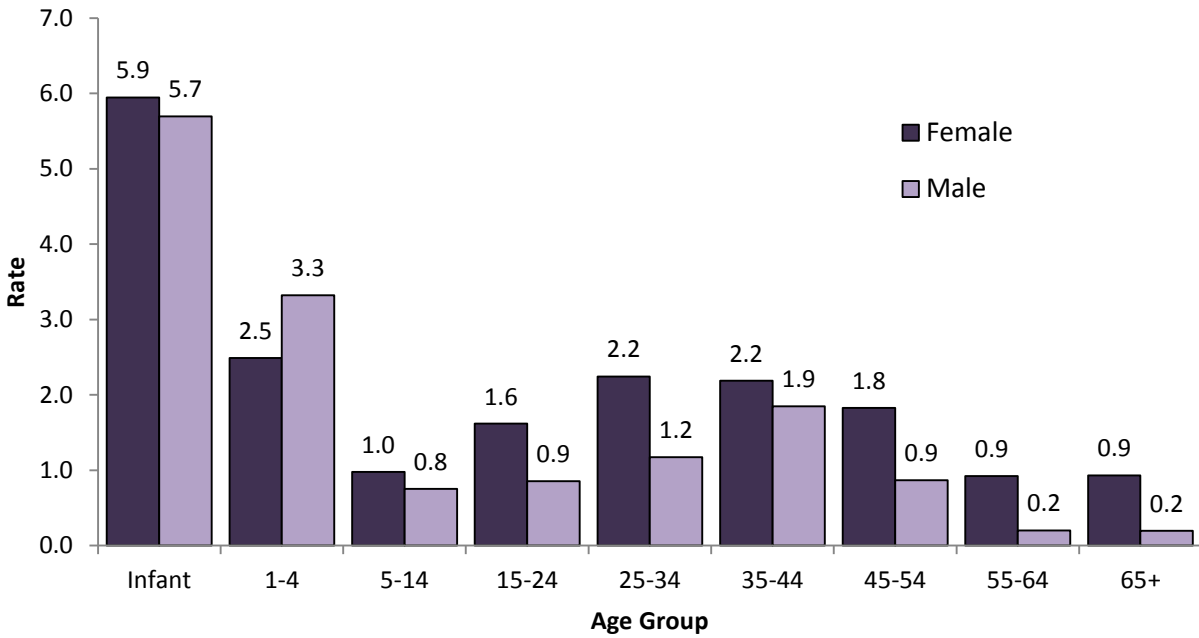
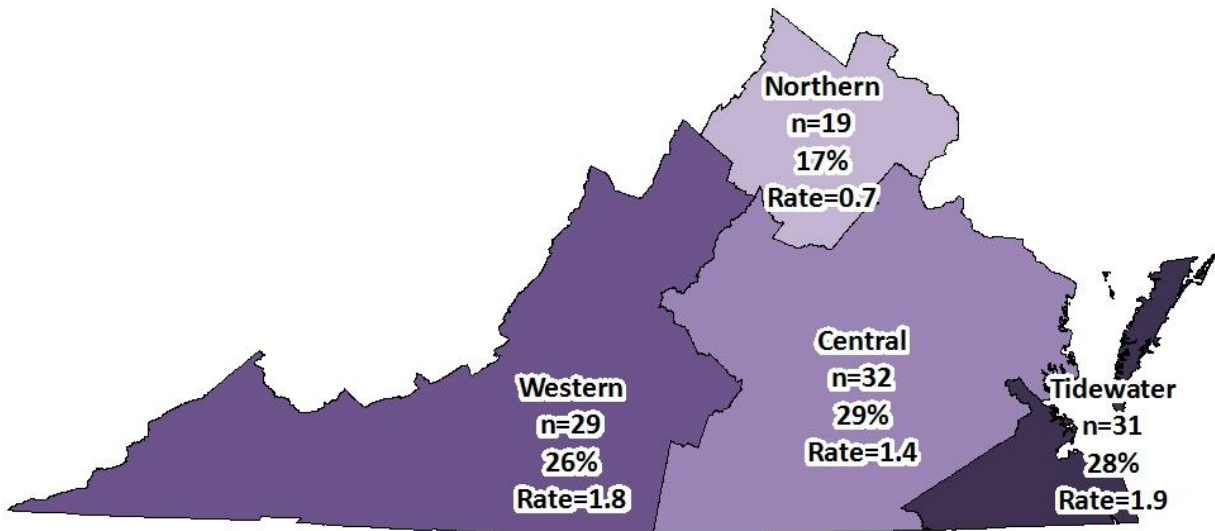


Figure 15: Number, Percent, and Rate of FIP Homicide Deaths by OCME District in Virginia (N=112): 2014



Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Table 11: Number and Percent of FIP Homicide Victims by Sex and Fatal Agency in Virginia (N=112): 2014⁵

Fatal Agency	Female (n=69)		Male (n=43)		Total	
	No.	%	No.	%	No.	%
Firearm	41	66.1	25	41.7	66	54.1
Sharp Instrument	12	19.4	3	5.0	15	12.3
Blunt Instrument	9	14.5	3	5.0	12	9.8
Personal Weapon	5	8.1	5	8.3	10	8.2
Strangle/Choke/Hang	6	9.7	2	3.3	8	6.6
Smother/Suffocate	3	4.8	2	3.3	5	4.1
Motor Vehicle	0	0.0	3	5.0	3	2.5
Fire/Smoke Inhalation	1	1.6	1	1.7	2	1.6
Push/Slam/Throw	0	0.0	1	1.7	1	0.8

Table 12: Number of FIP Homicide Victims by Case Type, Number of All Homicide Victims, and Percent FIP Homicides in Virginia (N=1,778): 2010-2014

Type	2010	2011	2012	2013	2014
Intimate Partner Homicides	81	48	41	47	48
Intimate Partner Associated Homicides	25	49	29	29	26
Child by Caretaker Homicide	20	18	20	21	16
Other Family Homicide	37	16	2	18	20
Family Associated Homicide	5	2	3	6	2
Elder Homicide by Caregiver	2	1	0	1	0
All FIP Homicides	170	134	117	122	112
All Homicides	391	345	344	340	358
Percent FIP Homicide	43.5	38.8	34.0	35.9	31.3

Table 13: Number, Percent, and Rate of FIP Homicide Victims by Case Type and Sex in Virginia (N=112): 2014

Type	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Intimate Partner Homicide	38	55.1	0.9	10	23.3	0.2	48	42.9	0.6
Intimate Partner Associated Homicide	11	15.9	0.3	15	34.9	0.4	26	23.2	0.3
Other Family Homicide	12	17.4	0.3	8	18.6	0.2	20	17.9	0.2
Child by Caretaker Homicide	8	11.6	0.2	8	18.6	0.2	16	14.3	0.2
Family Associated Homicide	0	0.0	0.0	2	4.7	0.0	2	1.8	0.0
Elder Homicide by Caregiver	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0
Total	69	61.6	1.6	43	38.4	1.0	112	100.0	1.3

⁵ Eight decedents were killed with two or more fatal agents.

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Table 14: Number, Percent, and Rate of FIP Homicide Victims by Race and Sex in Virginia (N=112): 2014

Race	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
White	36	52.2	1.2	21	48.8	0.7	57	50.9	1.0
Black	29	42.0	3.3	21	48.8	2.6	50	44.6	2.9
Other	4	5.8	1.2	1	2.3	0.3	5	4.5	0.8
Total	69	61.6	1.6	43	38.4	1.0	112	100.0	1.3

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

INTIMATE PARTNER HOMICIDE

Figure 16: Number of IPH Victims by Age and Sex in Virginia (N=48): 2014

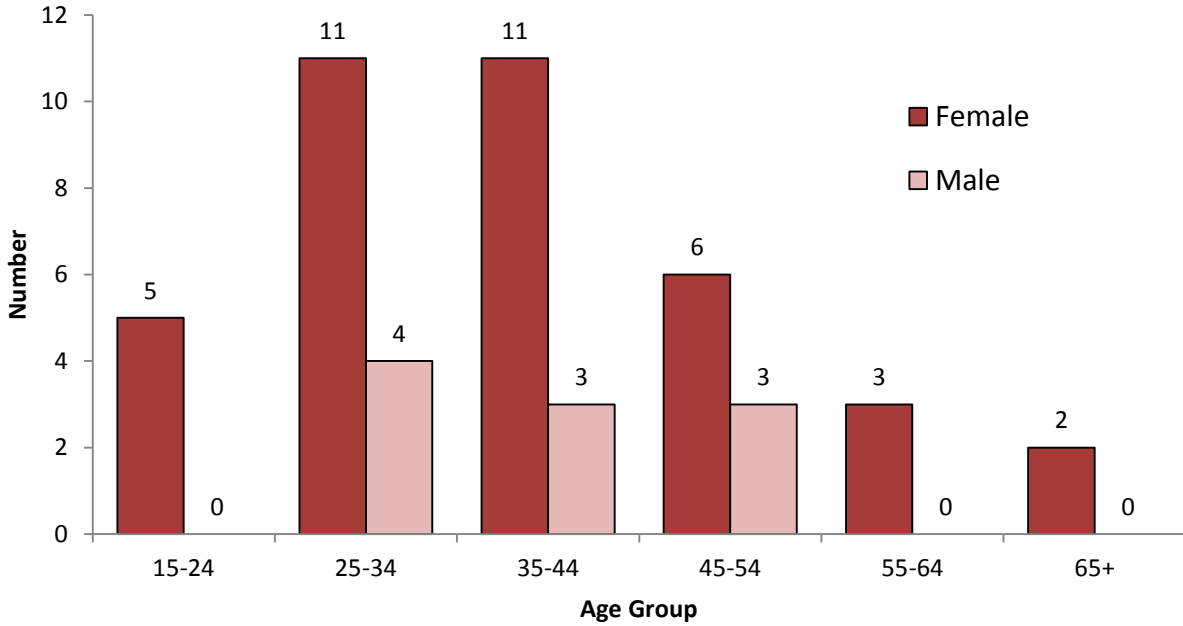
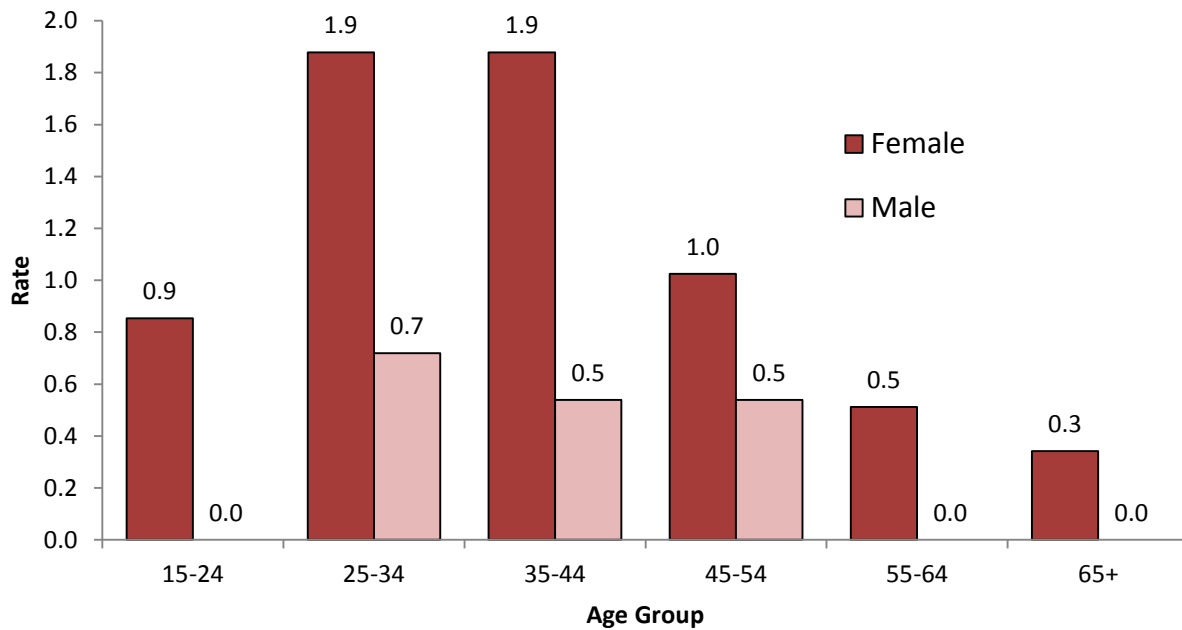


Figure 17: Rate of IPH Deaths by Age and Sex of Victim in Virginia (N=48): 2014



Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Figure 18: Number, Percent, and Rate of IPH Deaths by OCME District in Virginia (N=48): 2014

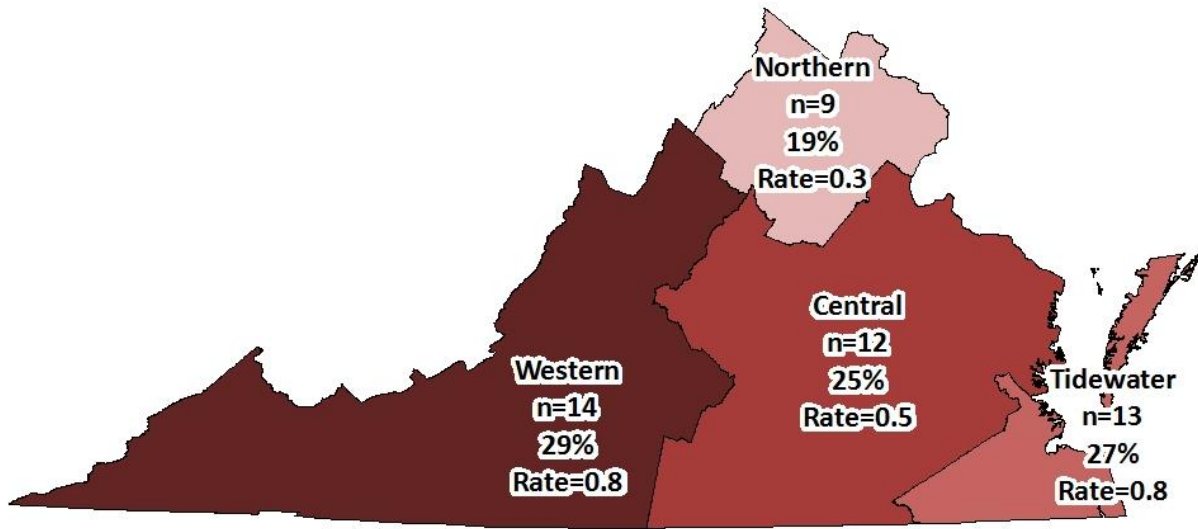


Table 15: Number and Percent of IPH Victims by Fatal Agent and Sex in Virginia (N=48): 2014⁶

Fatal Agent	Female (n=38)		Male (n=10)		Total	
	No.	%	No.	%	No.	%
Firearm	26	65	4	57.1	30	63.8
Sharp Instrument	6	15	2	28.6	8	17.0
Strangle/Choke/Hang	4	10	0	0.0	4	8.5
Blunt Instrument	2	5	1	14.3	3	6.4
Motor Vehicle	0	0	3	42.9	3	6.4
Personal Weapon	1	2.5	0	0.0	1	2.1
Smother/Suffocate	1	2.5	0	0.0	1	2.1

Table 16: Number and Percent of IPH Victims by Sex and Relationship to Alleged Offender in Virginia (N=48): 2014

Relationship	Females (n=38)		Males (n=10)		Total	
	No.	%	No.	%	No.	%
Current Spouse	18	47.4	3	30.0	21	43.8
Boyfriend/Girlfriend	15	39.5	5	50.0	20	41.7
Ex-Boyfriend/Girlfriend	5	13.2	1	10.0	6	12.5
Other	0	0.0	1	10.0	1	2.1

⁶ Two females were killed with two or more fatal agents.

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

*Table 17: Number, Percent, and Rate of IPH Victims by Race and Sex
in Virginia (N=48): 2014*

Race	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
White	22	57.9	0.7	4	40.0	0.1	26	54.2	0.4
Black	13	34.2	1.5	6	60.0	0.7	19	39.6	1.1
Other	3	7.9	0.9	0	0.0	0.0	3	6.3	0.5
Total	38	79.2	0.9	10	20.8	0.2	48	100.0	0.6

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

INTIMATE PARTNER ASSOCIATED HOMICIDE

Figure 19: Number of IPA Homicide Victims by Age and Sex in Virginia (N=26): 2014

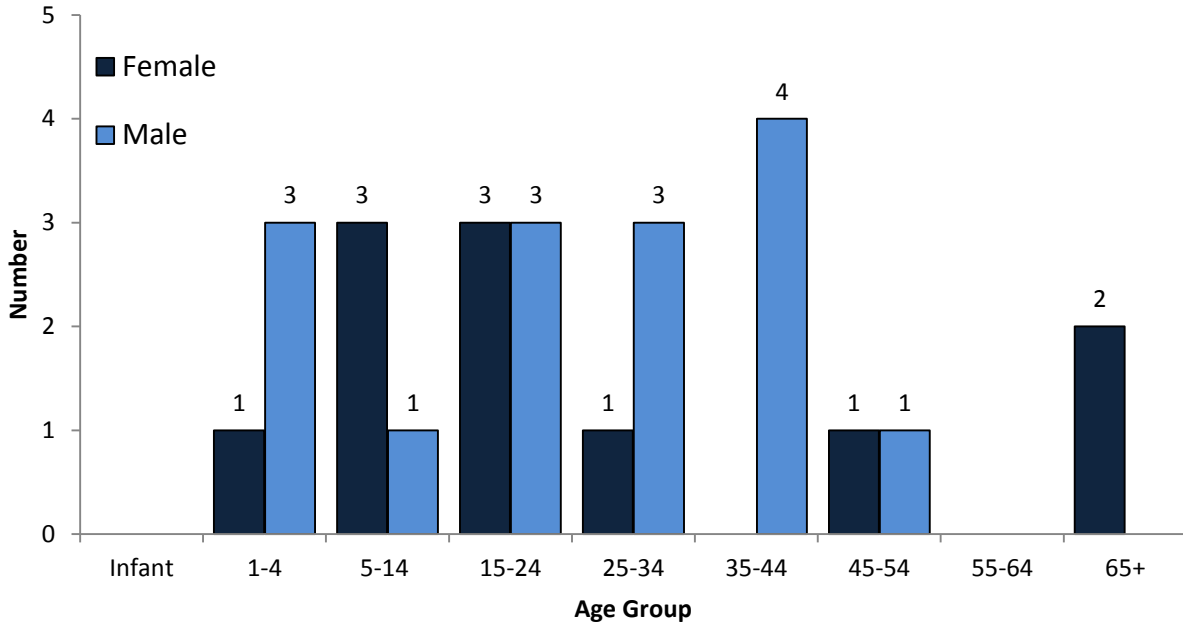
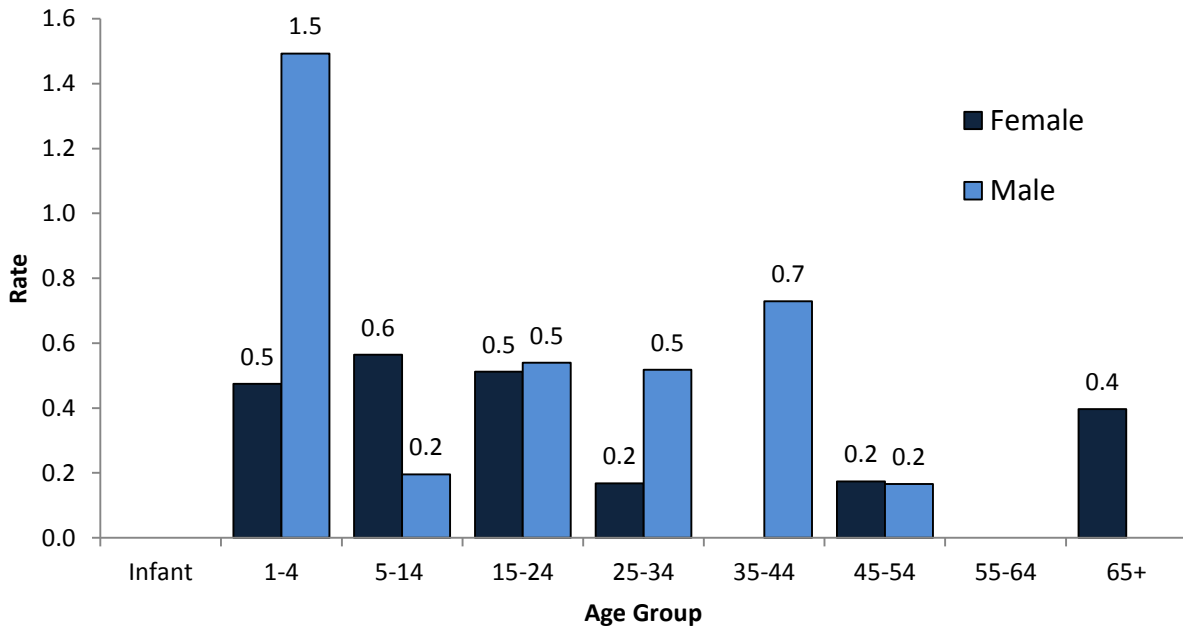


Figure 20: Rate of IPA Homicide Deaths by Age and Sex of Victim in Virginia (N=26): 2014



Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Figure 21: Number, Percent, and Rate of IPA Homicide Deaths by OCME District in Virginia (N=26): 2014

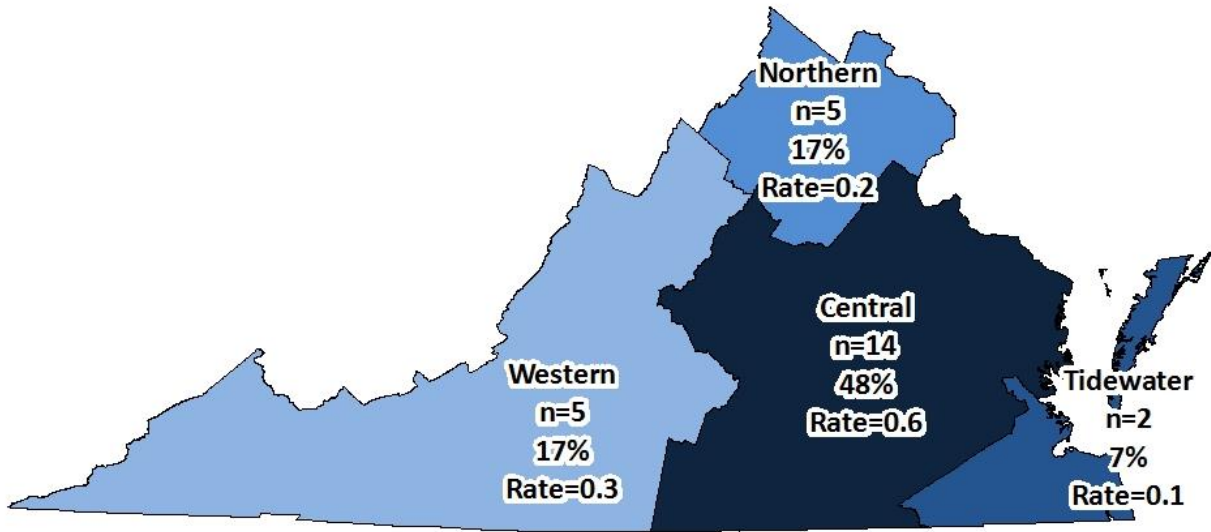


Table 18: Number and Percent of IPA Homicide Victims by Fatal Agency and Sex in Virginia (N=26): 2014

Fatal Agency	Female (n=11)		Male (n=15)		Total	
	No.	%	No.	%	No.	%
Firearm	6	54.5	14	93.3	20	76.9
Sharp Instrument	2	18.2	0	0.0	2	7.7
Blunt Instrument	2	18.2	0	0.0	2	7.7
Fire/Smoke Inhalation	1	9.1	1	6.7	1	3.8

Table 19: Number and Percent of IPA Homicide Victims by Sex and Relationship to Alleged Offender in Virginia (N=26): 2014

Relationship	Females (n=11)		Males (n=15)		Total	
	No.	%	No.	%	No.	%
Intimate Partner Associate	6	54.5	9	60.0	15	57.7
Family member	5	45.5	4	26.7	9	34.6
Subject of law enforcement response	0	0.0	2	13.3	2	7.7

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Table 20: Number, Percent, and Rate of IPA Homicide Victims by Race and Sex in Virginia (N=26): 2014

Race	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
White	3	27.3	0.1	8	53.3	0.3	11	42.3	0.2
Black	8	72.7	0.9	6	40.0	0.7	14	53.8	0.8
Other	0	0.0	0.0	1	6.7	0.3	1	3.8	0.2
Total	11	42.3	0.3	15	57.7	0.4	26	100.0	0.3

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

CHILD HOMICIDE BY CARETAKER

Figure 22: Number of CHC Victims by Age and Sex in Virginia (N=16): 2014

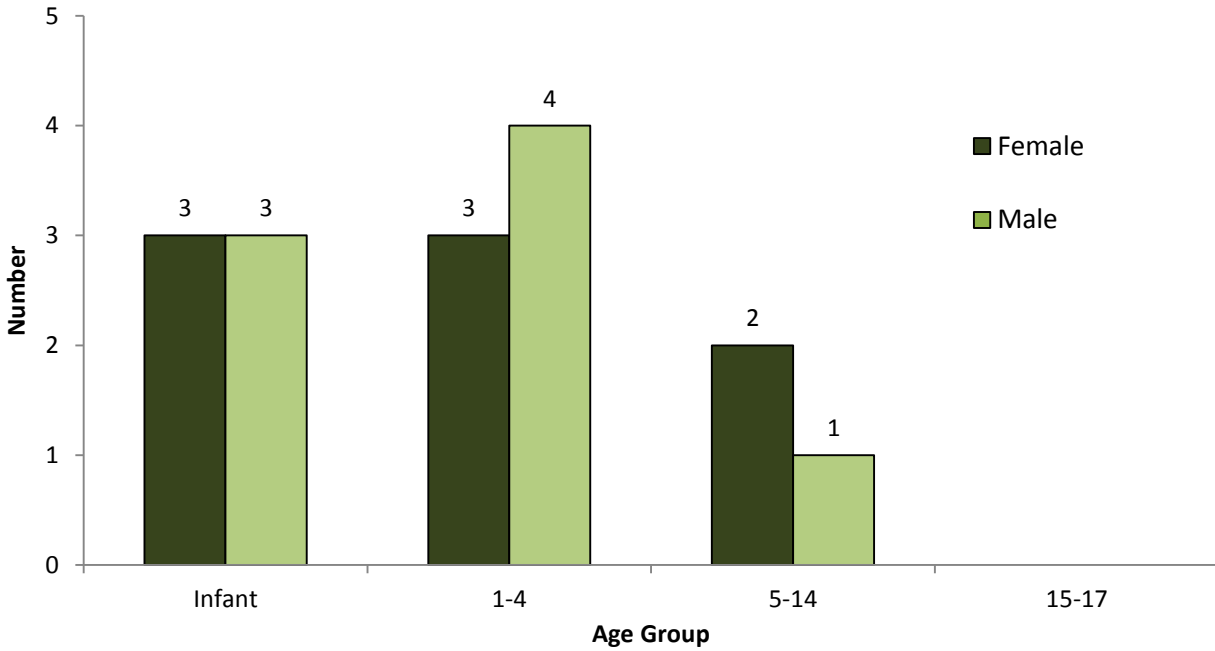
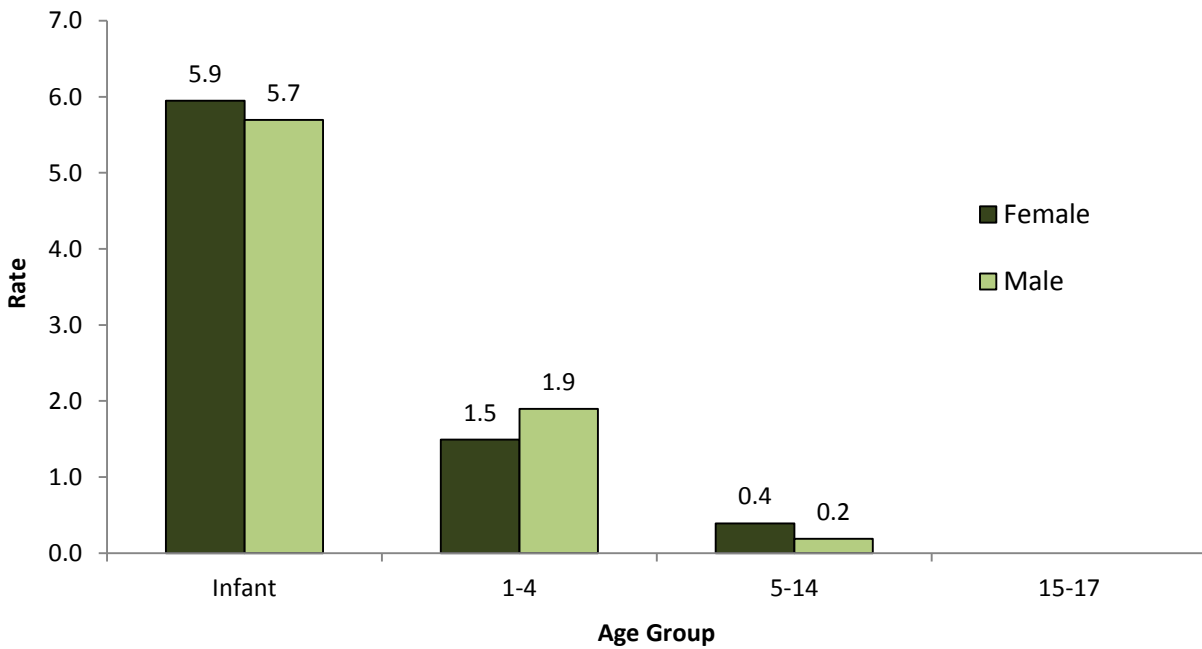


Figure 23: Rate of CHC Deaths by Age and Sex of Victim in Virginia (N=16): 2014



Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Figure 24: Number, Percent, and Rate of CHC Deaths by OCME District in Virginia (N=16): 2014

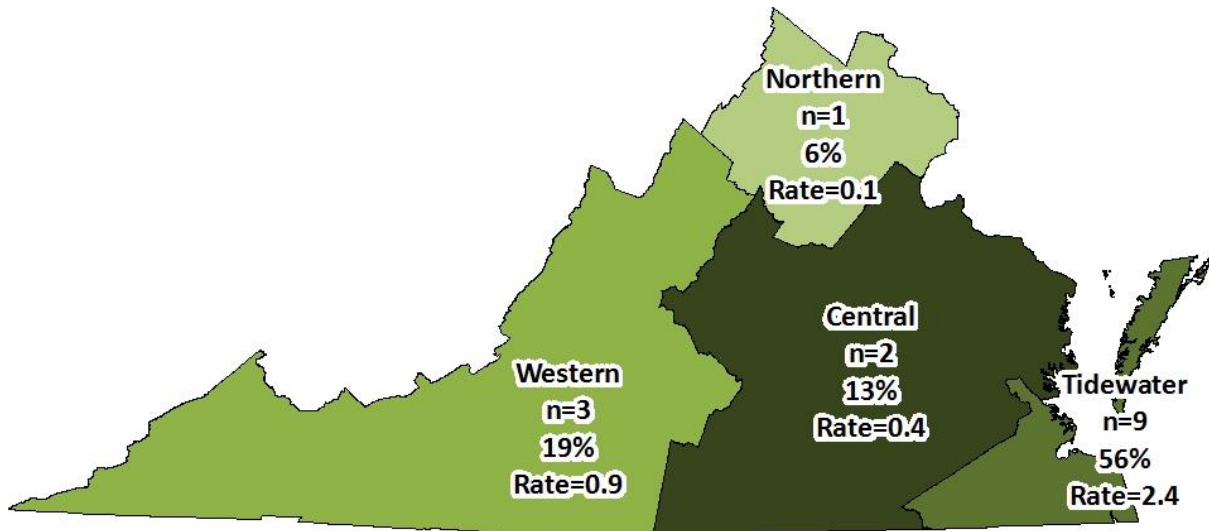


Table 21: Number and Percent of CHC Victims by Fatal Agent and Sex in Virginia (N=16): 2014⁷

Fatal Agent	Female (n=8)		Male (n=8)		Total	
	No.	%	No.	%	No.	%
Personal Weapon	4	50.0	2	25.0	6	33.3
Blunt Instrument	2	25.0	1	12.5	3	16.7
Smother/Suffocate	1	12.5	2	25.0	3	16.7
Firearm	2	25.0	0	0.0	2	11.1
Strangle/Choke/Hang	0	0.0	2	25.0	2	11.1
Push/Slam/Throw	0	0.0	1	12.5	1	5.6

Table 22: Number and Percent of CHC Victims by Race and Sex in Virginia (N=16): 2014

Race	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
White	4	50.0	0.6	3	37.5	0.5	7	43.8	0.5
Black	3	37.5	1.4	5	62.5	2.2	8	50.0	1.8
Other	1	12.5	1.3	0	0.0	0.0	1	6.3	0.7
Total	8	50.0	0.9	8	50.0	0.8	16	100.0	0.9

⁷ Three children were killed with two or more fatal agents.

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

FAMILY RELATED HOMICIDES (FRH)

Figure 25: Number of FRH Victims by Age and Sex in Virginia (N=22): 2014

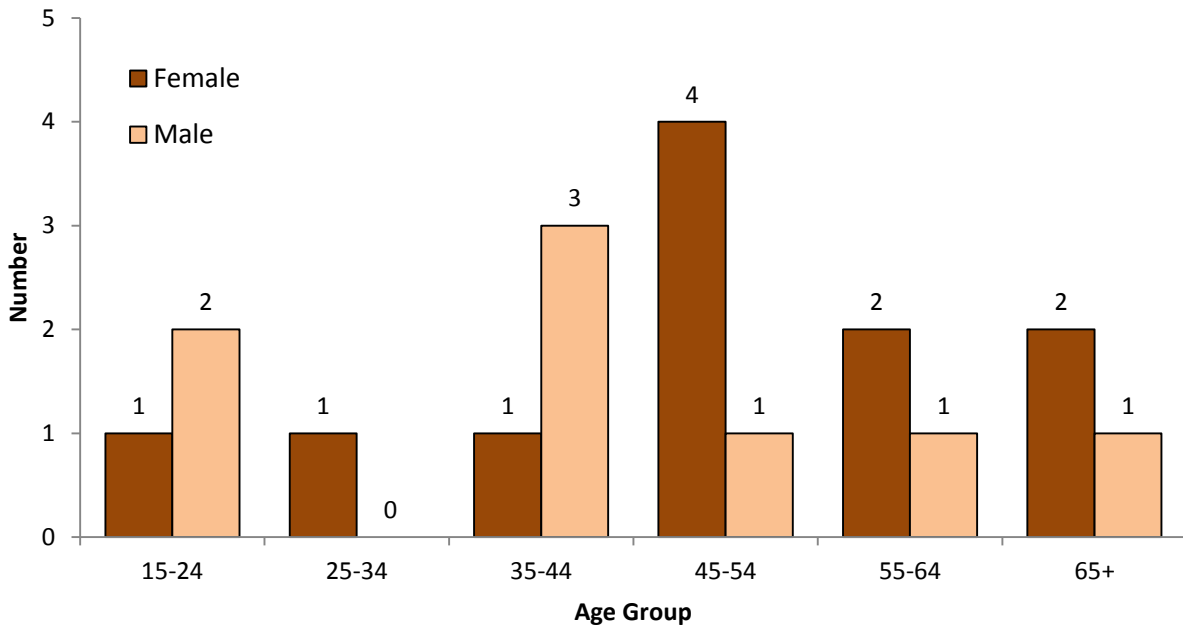
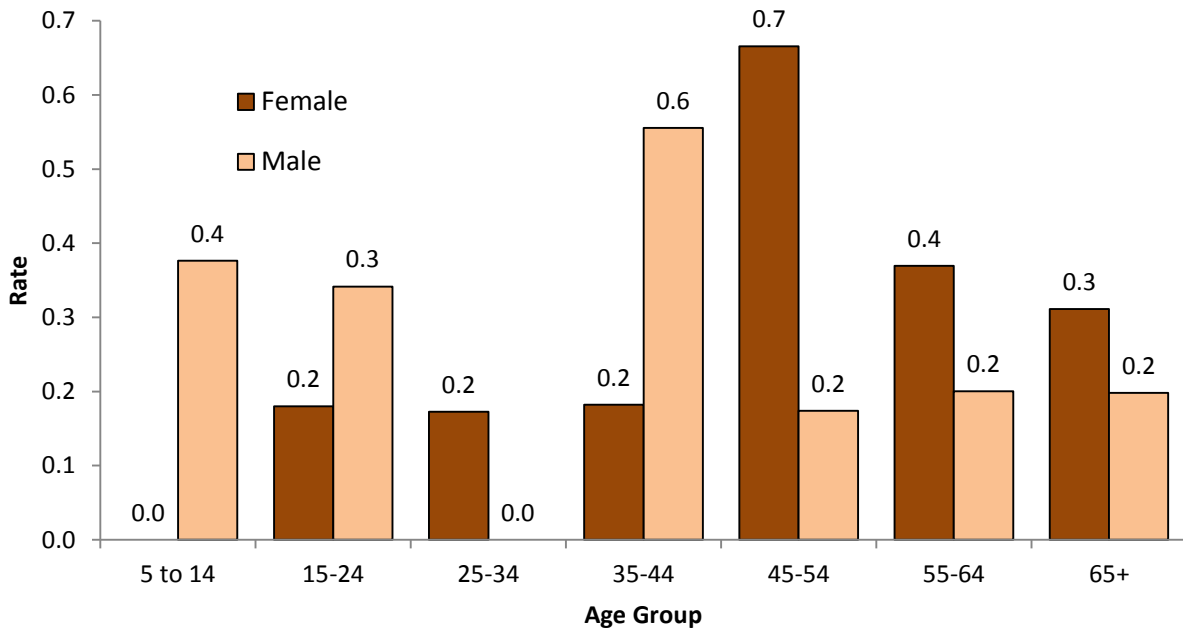


Figure 26: Rate of FRH Deaths by Age and Sex of Victim in Virginia (N=22): 2014



Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Figure 27: Number, Percent, and Rate of FRH Deaths by OCME District in Virginia (N=22): 2014

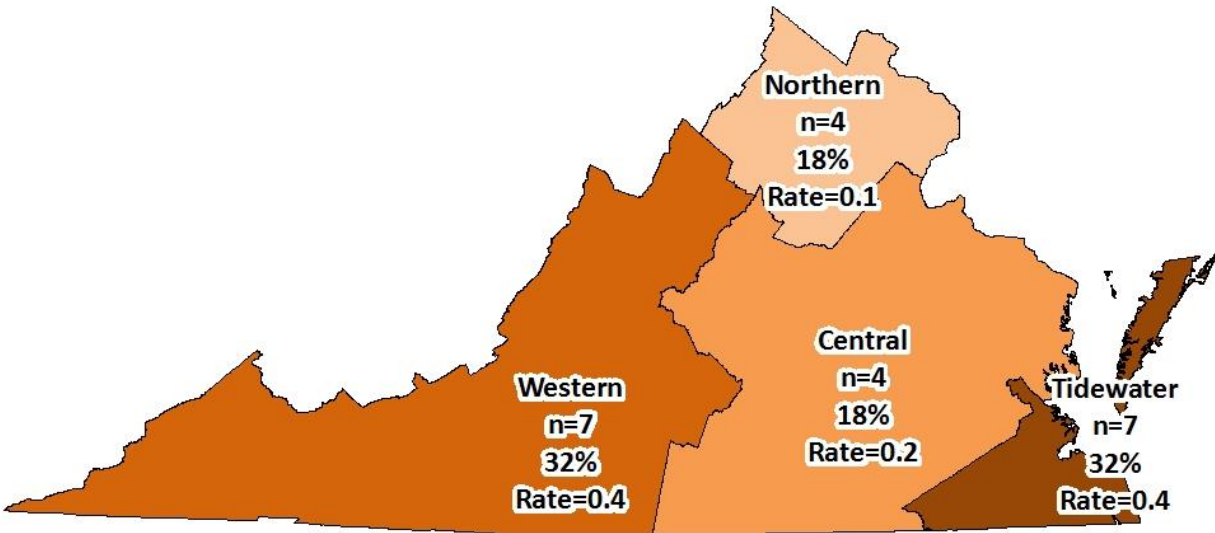


Table 23: Number and Percent of FRH Victims by Fatal Agency and Sex in Virginia (N=22): 2014

Fatal Agency	Female (n=12)		Male (n=10)		Total	
	No.	%	No.	%	No.	%
Firearm	7	58.3	7	70.0	14	63.6
Sharp Instrument	4	33.3	1	10.0	5	22.7
Blunt Instrument	1	8.3	3	30.0	4	18.2
Personal Weapon	0	0.0	1	10.0	1	4.5
Strangle	0	0.0	1	10.0	1	4.5
Smother	0	0.0	1	10.0	1	4.5

Table 24: Number, Percent, and Rate of FRH Victims by Race and Sex in Virginia (N=22): 2014

Race	Female			Male			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
White	7	58.3	0.2	6	60.0	0.2	13	59.1	0.2
Black	5	41.7	0.6	4	40.0	0.5	9	40.9	0.5
Other	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0
Total	12	54.5	0.3	10	45.5	0.2	22	100.0	0.3

Some data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Table 25: Five Year Summary of Family and Intimate Partner Homicide in Virginia: 2010-2014

	2010			2011			2012		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Sex									
Female	92	54.1	2.3	66	49.3	1.6	60	51.3	1.5
Male	78	45.9	2.0	68	50.7	1.7	57	48.7	1.4
Race									
White	103	60.6	1.8	77	57.5	1.3	62	53.0	1.0
Black	59	34.7	3.6	52	38.8	3.1	53	45.3	3.2
Other	8	4.7	0.9	5	3.7	0.9	2	1.7	0.3
Ethnicity									
Hispanic	5	2.9	0.8	12	9	1.8	9	7.7	1.3
Age									
<1	12	7.1	12.0	11	8.2	10.8	8	6.8	7.9
1-4	7	4.1	1.7	7	5.2	1.7	12	10.3	2.9
5-14	2	1.2	0.2	6	4.5	0.6	3	2.6	0.3
15-24	31	18.2	2.8	20	14.9	1.8	16	13.7	1.4
25-34	29	17.1	2.7	21	15.7	1.9	16	13.7	1.4
35-44	37	21.2	3.3	26	19.4	2.4	18	15.4	1.6
45-54	26	15.3	2.1	19	14.2	1.6	24	20.5	2.0
55-64	15	8.8	1.6	12	9.0	1.2	9	7.7	0.9
65+	11	6.5	1.1	12	9.0	1.2	11	9.4	1.0
Fatal Agency									
Firearm	97	57.1	--	77	57.5	--	57	48.7	--
Sharp Instrument	26	15.3	--	24	17.9	--	27	23.1	--
Personal Weapon	21	12.4	--	18	13.4	--	24	20.5	--
Blunt Instrument	15	8.8	--	4	3	--	4	3.4	--
Strangle/Choke	8	4.7	--	9	6.7	--	6	5.1	--
Smother/Suffocate	3	1.8	--	2	1.5	--	2	1.7	--
Motor Vehicle	2	1.2	--	0	0	--	1	0.9	--
Fire/Smoke Inhalation	0	0	--	2	1.5	--	1	0.9	--
Poison	1	5.9	--	1	0.7	--	1	0.9	--
Unknown	1	5.9	--	2	1.5	--	1	0.9	--
Drown	0	0	--	0	0	--	2	1.7	--
Push/slam/throw	0	0	--	0	0	--	0	0.0	--
Other	7	4.1	--	1	0.7	--	0	0.0	--
OCME District									
Central	52	30.6	2.4	35	26.1	1.61	37	31.6	1.7
Tidewater	42	24.7	2.6	43	32.1	2.7	32	27.4	2.0
Western	50	29.4	3.0	35	26.1	2.13	28	23.9	1.7
Northern	25	14.7	1.0	21	15.7	0.78	20	17.1	0.7
Out of State	0	0.0	--	0	0.0	--	0	0.0	--
Case Type									
Intimate Partner	81	47.6	1.0	48	35.8	0.6	41	35	0.5
Intimate Partner Associated	25	14.7	0.3	49	36.6	0.6	29	24.8	0.4
Family	37	21.8	0.5	16	11.9	0.2	24	20.5	0.3
Child by Caregiver	20	11.8	1.1	18	13.4	1.0	20	17.1	1.1
Family Associated	5	2.9	<0.1	2	1.5	<0.1	3	2.6	<0.1
Elder by Caregiver	2	1.2	<0.1	1	0.7	<0.1	0	0.0	0.0
Total	170	100.0	2.1	134	100.0	1.7	117	100.0	1.4

Selected data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Table 25 (Continued): Five Year Summary of Family and Intimate Partner Homicide in Virginia: 2010-2014

Sex	2013			2014		
	No.	%	Rate	No.	%	Rate
Female	62	50.8	1.5	69	61.6	1.6
Male	60	49.2	1.4	43	38.4	1.0
Race						
White	62	50.8	1.0	57	50.9	1.0
Black	50	41.0	2.9	50	44.6	2.9
Other	10	8.2	1.4	5	4.5	0.8
Ethnicity						
Hispanic	10	8.2	1.3	3	2.7	0.4
Age						
<1	13	10.7	12.6	6	5.4	5.8
1-4	7	5.7	1.7	12	10.7	2.9
5-14	2	1.6	0.2	9	8.0	0.9
15-24	22	18.0	1.9	14	12.5	1.2
25-34	21	17.2	1.8	20	17.9	1.7
35-44	17	13.9	1.6	22	19.6	2.0
45-54	20	16.4	1.7	16	14.3	1.4
55-64	13	10.7	1.3	6	5.4	0.6
65+	7	5.7	0.6	7	6.3	0.6
Fatal Agency						
Firearm	69	56.6	--	66	58.9	--
Sharp Instrument	21	17.2	--	15	13.4	--
Personal Weapon	16	13.1	--	10	8.9	--
Blunt Instrument	5	4.1	--	12	10.7	--
Strangle/Choke	6	4.9	--	8	7.1	--
Smother/Suffocate	2	1.6	--	5	4.5	--
Motor Vehicle	1	0.8	--	3	2.7	--
Fire/Smoke Inhalation	1	0.8	--	2	1.8	--
Poison	2	1.6	--	0	0.0	--
Unknown	0	0.0	--	0	0.0	--
Drown	1	0.8	--	0	0.0	--
Push/slam/throw	0	0.0	--	1	0.9	--
Other	13	10.7	--	0	0.0	--
OCME District						
Central	42	31.4	1.9	32	28.6	1.4
Tidewater	35	28.7	2.2	31	27.7	1.9
Western	28	23.0	1.7	29	25.9	1.8
Northern	17	13.9	0.6	19	17.0	0.7
Out of State	0	0.0	--	1	0.9	--
Type of Homicide						
Intimate Partner	47	38.5	0.6	48	42.9	0.6
Intimate Partner Associated	29	23.8	0.4	26	23.2	0.3
Other Family	18	14.8	0.2	20	17.9	0.2
Child by Caregiver	21	17.2	1.1	16	14.3	0.9
Family Associated	6	4.9	0.1	2	1.8	<0.1
Elder by Caregiver	1	0.8	<0.1	0	0.0	0.0
Total	122	100.0	1.5	112	100.0	1.3

Selected data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

APPENDIX B: GLOSSARY

Abuser: Person who was the primary aggressor of abuse towards an intimate partner or family member. The perpetrator is often times the alleged offender, but this is not always the case, such as in a case where a domestic violence victim's new boyfriend murders the victim's abuser. In this case, the new boyfriend is the alleged offender but not the domestic violence perpetrator.

Adult Homicide by Caretaker (AHC): A homicide in which the victim was a dependent adult 18 years or older who was killed by a caretaker. A dependent adult could include someone who is elderly or disabled, and requires part- or full-time care from another person.

Alleged offender: A person who law enforcement suspects or charges with the commission of a homicide.

Caretaker: A person responsible for the care and/or supervision of another person. This is not limited to a biological parent, but can include a babysitter or person of no biological relation who is in charge of or responsible for the care of another person. In Virginia a parent of a minor is always considered a caretaker, unless their parental rights have previously been terminated.

Child Homicide by Caretaker (CHC): A homicide in which the victim was a child under the age of 18 killed by a caretaker.

Child/children: A person under the age of 18.

Family Associated Homicide (FAH): A homicide in which a victim was killed as a result of violence stemming from a familial relationship.

Family Homicide, Other (OFH): A homicide in which the victim was killed by a family member related to them biologically, by marriage, or by other legal arrangement--with the exception of spouses (e.g. grandparent, [step] parent, [step] sibling, cousin, in-law).

Family member: Includes parents, children, siblings, grandparents and grandchildren (in-laws, adopted, biological, foster, half-siblings, etc.), or another person related by blood, marriage, or other legal arrangement (e.g., foster and adoption). Excludes spouses.

Family Related Homicide (FRH): A homicide involving a family relationship, including Other Family Homicide and Family Associated Homicide (not including homicides involving intimate partners or caretakers).

Fatal agent: The instrument or method causing the death of a victim (e.g., firearm, poison, strangling).

Fatal assault/event: A homicide(s) with shared circumstances. Information describing the characteristics and circumstances of homicides is provided in two ways, by individual case and event. For instance, if two persons are killed in a car accident, there are two victim cases and one event.

Selected data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Financial issues: Difficulty making income and/or paying debts or expenses (e.g., living at or below the poverty level, unemployment, excessive debt, and inability or difficulty paying rent/utilities).

Homicide: “Occurs when death results from an injury or poisoning or from a volitional act committed by another person to cause fear, harm, or death. Intent to cause death is a common element but is not required for classification as homicide.”⁸

Homicide-Suicide: A homicide that is followed within one week by the suicide of the alleged offender.

Intimate partner: May include a current or former spouse, boyfriend/girlfriend, dating partner, or same-sex partner; any individual who has a child in common with the person; or, any individual who cohabits or who, within the previous 12 months, cohabited with the person.

Intimate partner associate: A person killed in an Intimate Partner Associated Homicide who is the friend, family member, or past/current intimate partner of one or both of the involved intimate partners.

Intimate Partner Associated (IPA) Homicide: A homicide in which the victim was killed as a result of abuse and/or violence stemming from an intimate partner relationship (e.g., persons caught in the crossfire of intimate partner violence: such as friends, co-workers, neighbors, romantic rivals, or bystanders).

Intimate Partner Homicide (IPH): A homicide in which a victim was killed by an intimate partner.

Intimate Partner Related (IPR) Homicide: A homicide involving an intimate partner relationship, including Intimate Partner Homicide and Intimate Partner Associated Homicide.

Lethality factors: Events or characteristics that when present in an intimate partner relationship indicate an elevated risk for lethal domestic violence.

Mental health issues: Mental health issues include all disorders and syndromes identified in the DSM-IV (e.g., depression, anxiety, schizophrenia, eating disorders, personality disorders, and dementia), regardless of whether the issue was ever diagnosed or treated by a professional.

Neglect: Behaviors causing injury or harm, characterized by inadequate supervision or failure to provide essential care (e.g., food, medicine, health care).

Precipitating factor: A circumstance that occurred immediately before or during the fatal event and might be considered a trigger or motive for the violence.

Protective order: A legal order issued by a court to protect one person from abuse or threatening behavior by another.

⁸ Centers for Disease Control and Prevention. (2003). *Medical Examiners' and Coroners' Handbook on Death Registration and Fetal Death Report*.

Selected data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

Risk factor: Characteristics present prior to the occurrence of a homicide which might have placed the victim at an increased probability for abuse.

Stalking: When a person becomes fearful of their safety because someone is repeatedly pursuing, harassing, and/or following them, which is unwanted and serving no legitimate purpose.

Substance abuse: The recurrent pattern of the use of drugs, alcohol, or other substances for purposes other than intended and/or impairs the user's life.

Suicide: A death that "results from an injury or poisoning as a result of an intentional, self-inflicted act committed to do self-harm or cause the death of one's self."⁹

Third party intervention: An incident in which a person outside the family or intimate partner relationship tries to intervene or interfere in a conflict.

⁹ Ibid.

Selected data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.

APPENDIX C: VIRGINIA LOCALITIES BY REGION

HEALTH PLANNING REGION (HPR)

Central: Counties of Amelia, Brunswick, Buckingham, Charles City, Charlotte, Chesterfield, Cumberland, Dinwiddie, Goochland, Greensville, Halifax, Hanover, Henrico, Lunenburg, Mecklenburg, New Kent, Nottoway, Powhatan, Prince Edward, Prince George, Surry, Sussex. Cities of Colonial Heights, Emporia, Hopewell, Petersburg, and Richmond.

Northern: Counties of Arlington, Fairfax, Loudoun, and Prince William. Cities of Alexandria, Fairfax, Falls Church, Manassas, and Manassas Park.

Eastern: Counties of Accomack, Essex, Gloucester, Isle of Wight, James City, King and Queen, King William, Lancaster, Mathews, Middlesex, Northampton, Northumberland, Richmond, Southampton, Westmoreland, and York. Cities of Chesapeake, Franklin, Hampton, Newport News, Norfolk, Poquoson, Portsmouth, Suffolk, Virginia Beach, and Williamsburg.

Northwest: Counties of Albemarle, Augusta, Bath, Caroline, Clarke, Culpeper, Fauquier, Fluvanna, Frederick, Greene, Highland, King George, Louisa, Madison, Nelson, Orange, Page, Rappahannock, Rockbridge, Rockingham, Shenandoah, Spotsylvania, Stafford, and Warren. Cities of Buena Vista, Charlottesville, Fredericksburg, Harrisonburg, Staunton, Waynesboro, and Winchester.

Southwest: Counties of Alleghany, Amherst, Appomattox, Bedford, Bland Botetourt, Buchanan, Campbell, Carroll, Craig, Dickenson, Floyd, Franklin, Giles, Grayson, Henry, Lee, Montgomery, Patrick, Pittsylvania, Pulaski, Roanoke, Russell, Scott, Smyth, Tazewell, Washington, Wise, and Wythe. Cities of Bristol, Covington, Danville, Galax, Lynchburg, Martinsville, Norton, Radford, Roanoke, and Salem.

OFFICE OF THE CHIEF MEDICAL EXAMINER (OCME) DISTRICT

Central: Counties of Albemarle, Amelia, Brunswick, Buckingham, Caroline, Charles City, Charlotte, Chesterfield, Cumberland, Dinwiddie, Essex, Fluvanna, Gloucester, Goochland, Greene, Greensville, Halifax, Hanover, Henrico, James City, King and Queen, King George, King William, Lancaster, Louisa, Lunenburg, Mathews, Mecklenburg, Middlesex, Nelson, New Kent, Northumberland, Nottoway, Powhatan, Prince Edward, Prince George, Spotsylvania, Stafford, Surry, Sussex, Richmond, and Westmoreland. Cities of Charlottesville, Colonial Heights, Emporia, Fredericksburg, Hopewell, Petersburg, Richmond, and Williamsburg.

Northern: Counties of Arlington, Clarke, Culpeper, Fairfax, Fauquier, Frederick, Loudoun, Madison, Manassas, Orange, Page, Prince William, Rappahannock, Shenandoah, and Warren. Cities of Alexandria, Arlington, Fairfax, Falls Church, Manassas Park City and Winchester.

Tidewater: Counties of Accomack, Isle of Wight, Northampton, Southampton, and York. Cities of Chesapeake, Franklin, Hampton, Newport News, Norfolk, Poquoson, Portsmouth, Suffolk, and Virginia Beach.

Western: Counties of Alleghany, Amherst, Appomattox, Augusta, Bath, Bedford, Bland, Botetourt, Buchanan, Campbell, Carroll, Craig, Dickenson, Floyd, Franklin, Giles, Grayson, Henry, Highland, Lee, Montgomery, Patrick, Pittsylvania, Pulaski, Roanoke, Rockbridge, Rockingham, Russell, Scott, Smyth, Tazewell, Washington, Wise, and Wythe. Cities of Bristol, Buena Vista, Covington, Danville, Galax, Harrisonburg, Lexington, Lynchburg, Martinsville, Norton, Radford, Roanoke, Salem, Staunton, and Waynesboro.

Selected data are omitted to protect confidentiality. Rates based on 20 or fewer cases should be interpreted with caution.