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**NEW REPORT REVEALS THOSE MOST LIKELY
TO DIE DUE TO FAMILY OR INTIMATE
PARTNER (DOMESTIC) VIOLENCE**

(RICHMOND, Va.)— A new report from the Virginia Department of Health examines the demographic and event characteristics for 1,232 Virginia family and intimate partner homicides that occurred between 1999 and 2007.

“This report represents a milestone in our understanding of fatal domestic violence in Virginia,” said Leah Bush, M.S., M.D., chief medical examiner. “It is the first report to present nine-years-worth of Virginia data examining victim characteristics and event risk factors. As a result of this report, public health officials and policy developers have the tools needed to understand how the rate of domestic violence has changed over time. This is vital to creating and implementing violence prevention strategies, an important mission for the Virginia Department of Health.”

Results from this report indicate that during the nine-year period, family and intimate partner homicide remained a threat to all Virginians. Approximately one out of three homicides was related to family or intimate-partner discord or violence. One out of five family and intimate partner homicides was a homicide-suicide in which one person killed him or herself after committing a homicide. In addition, this report illustrates that several populations are vulnerable to specific types of domestic violence. For example, African Americans and infants are more vulnerable to all types of family and intimate partner homicide, females are vulnerable to intimate partner homicide, and males are vulnerable to intimate partner associated homicide.

Additional findings for the nine-year period include the following:

- Most family and intimate partner homicides (67%) were related to conflict or violence within an intimate partner relationship.
- A firearm was used in over half (56.1%) of all family and intimate partner homicides. A sharp instrument such as a knife (16.4%) was the second-most commonly used weapon.
- The state rate for family and intimate partner homicide varied from a low of 1.6 to a high of 2.1 victims per 100,000 people.
- Black persons were at increased risk for death related to family or intimate partner violence. For each of the nine years, Blacks had the highest rate of family and intimate partner homicide. The rate for Blacks varied from a low of 3.6 to a high of 4.5 victims per 100,000 people.

- Infants were vulnerable to death due to family or intimate partner violence. For each of the nine years, infants had the highest rate of family and intimate partner homicide. The rate ranged from a low of 4.0 to 14.2 victims per 100,000 people.
- Gender differences emerged in intimate partner homicides. Females were more likely to die at the hands of an intimate partner and males were more likely to die in the “crossfire” of intimate partner violence.
- The Medical Examiner District that had the highest rate of family and intimate partner homicide varied over time. The Western District with a range of 2.0 to 2.8 victims per 100,000 people had the highest rate for four of the nine years. The Tidewater District with a range of 1.8 to 2.9 victims per 100,000 people had the highest rate for three of the nine years.
- The Northern Office of the Chief Medical Examiner District, which includes the Virginia suburbs of Washington, D.C., had the lowest rate of family and intimate partner homicide. Rates ranged from a low of 0.6 to a high of 1.3 victims per 100,000 persons.

This report used data from the Family and Intimate Partner Homicide Surveillance Program. The Program began in 1999 with the goal of providing accurate, timely, and complete information about Virginia family and intimate partner homicide to community leaders and stakeholders. Data collected are used for prevention activities, public health planning, and policy development and change. The current report is available at <http://www.vdh.state.va.us/medExam/familyandintimatepartnerviolence.htm> .

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