CITY OF OAKLAND CHOSE TO CLEEN AGENDA REPORT

To:

Office of the City Administrator

Attn:

Deborah Edgerly Police Department

From: Date:

September 26, 2006

Re:

An Informational Report from the Alameda County Public Health Department

"Violence in Oakland" A Public Health Crisis, Violent Death Reporting System

2002-2004

The attached report contains information compiled by the Alameda County Public Health Department. This report was prepared to help identify underlying factors and circumstances of homicide victims and perpetrators in an attempt to develop strategies to help reduce violent crime in Oakland. Mr. Matt Beyers of the Alameda County Health Department will attend the September 26, 2006 Public Safety Committee meeting to present this information.

Respectfully submitted,

Chief of Police

APPROVED AND FORWARDED TO THE PUBLIC SAFETY COMMITTEE:

Office of the City Administrator

Item: Public Safety Comte. September 26, 2006

Violence in Oakland A Public Health Crisis

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Alameda County Bublic Health Department
August 2006

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Violence in Oakland

A Public Health Crisis

Alameda County Violent Death Reporting System 2002-2004

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This report is dedicated to the victims of violence and their families.

Acknowledgements

The report was made possible under the leadership and support of Dr. Gregory Victorino, Chief of the Alameda County Medical Center, and Arnold Perkins, Director of the Alameda County Public Health Department (ACPHD). The Highland Hospital Trauma Center and the Community Assessment, Planning, Education and Evaluation (CAPE) Unit of the Public Health Department were instrumental in obtaining permission and funding to support this effort. We especially thank Mona Mena at the Emergency Medical Services, and Evette Brandon, an intern with the CAPE Unit for thoroughly abstracting selected data from the coroner's reports on a timely basis. We are grateful for the access to Automated Vital Statistics System and the death certificate files provided by the vital registration staff at ACPHD. We could not have done this without the guidance and oversight of our CAPE Director, Dr. Sandra Witt.

We are sincerely thankful to all of our partners listed below who continue to dedicate their lives to ending violence in Oakland and in Alameda County. Without their cooperation and the data they graciously provided, the Alameda County Violent Death Reporting System would not be possible.

Oakland Police Department Alameda County Coroner's Office

Lieutenant James Emery Carolyn Harris

Lieutenant Ersie Joyner Lieutenant Timothy White

Sergeant James Rullamas Mike Yost

Youth ALIVE! Emergency Medical Services, Public Health Department

Deane Calhoun Cindy Abbissinio

Alameda County Medical Center, Trauma Department

Nic Bekaert Kathy James Dr. Caesar Ursic Dr. Gregory Victorino

The collaboration with the State Department of Health Services Epidemiology and Prevention for Injury Control Branch, the Centers for Disease Control and Prevention, and Carolyn Klassen, formerly of San Francisco Public Health Department, was also very helpful in establishing a local surveillance system. Finally, we would like to acknowledge Harvard University School of Public Health for developing the national violent injury statistics system (www.nviss.org).

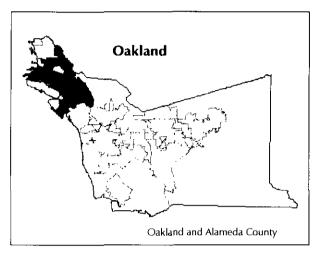
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Executive Summary and Recommendations

Background

Five different data sources, specifically the Oakland Police Department, Alameda County Coroner's Office, Supplemental Homicide Reports, newspaper data, and death certificates, were linked to provide a more complete picture of homicide victims and perpetrators in Oakland. Oakland, a major metropolitan city in the county of Alameda, is highly diverse in terms of race/ethnicity and socioeconomic status. Oakland has some of the highest-risk neighborhoods in the county, with the greatest number of homicides and violent



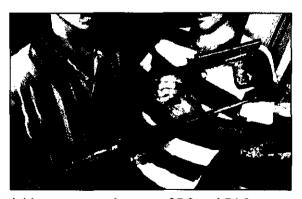
crimes in the area. More than 80% of violent crimes in the county occur in Oakland or to Oakland residents. The crime rate in Oakland has been consistently high over the last two decades. It demands urgent attention by local program and policy makers to collectively develop and enact creative prevention strategies to reduce risk factors and increase resiliency factors. Our goal is to prevent homicides.

This report was prepared to help identify underlying factors and circumstances of victims and perpetrators of homicides, in an attempt to learn from the data, identify gaps and develop prevention strategies in collaboration with various community partners. The major findings were not surprising or new. Disparities by race, age, gender, and neighborhoods have been well documented. Our hope is that the information is interpreted, put in context, widely distributed and used by program and policymakers in the spirit of reducing fatal and non-fatal violent crimes in Oakland.

Major Findings

Access to guns

Ongoing collection and analysis of data on guns confiscated in crimes among local, state, and national law enforcement would reduce the number of illegal weapons flowing into the hands of criminals and youth. This greater effort to trace guns could reduce the high rate of homicide from guns (almost 80%).



Violence prevention programs

Youth in East and West Oakland, where the homicide rate ranges between 37.2 and 74.3 per 100,000, say "We want violence to be a surprise in our neighborhoods". Many youth feel that violence is inevitable. Youth development programs and early prevention programs schools on

anger management, family and dating violence, sexual assault, alcohol and drug violence, and gang violence are essential on getting youth to think differently.

Re-entry strategies

Nearly half of the suspected perpetrators and half of the victims were under the care of the criminal justice system. Developing a continuum of care that serves and monitors youth on probation and parole prior to entering the system, during, and for at least a year post exit would be essential to ensuring better outcomes for them, their family and for the community. This would involve closer collaboration among partners working with this population including the courts, probation, parole, community-based services, social services, behavioral health care, and others.

Summaries of Data

Weapon used

• The majority of victims were shot to death using firearms (78%). In the other 22% of homicides, the weapon used was a beating, blunt or sharp object, or strangulation.

Overall homicide death rate

- In 2002-2004 Oakland, a city of 400,000 people, recorded 315 homicides, the vast majority being African American victims and suspects.
- The death rate in Oakland was 25.6 per 100,000 in 2002-2004, three times higher than the county rate (average of 8.3 from 2001-03), and four times higher than the state and national rates of 6.7 and 6.1, respectively. The national Healthy People 2010 objective is 3.0 per 100,000.
- The homicide rate for African American males was 102.1 per 100,000.

Victim demographics

- Although African Americans make up only 35% of the total population in Oakland, they represent more than 77% of the homicide victims.
- The majority of deaths were to males (85%).
- The highest rate of homicide was among 20 to 24 year olds, a rate of 79.6 per 100,000. The next highest rates were among those 15 to 19 years (47.4 per 100,000) and 25 to 34 years (44.4 per 100,000).

Socioeconomic status

- High school graduates made up the majority of the homicide victims (71.8%); they comprise 73.9% of the Oakland's resident population.
- Most of the victims worked in blue-collar jobs (36%), retail or personal services (21%); 13% had never worked, and 20% were employed for less than one year.

Suspect demographics

- The majority of suspects, similar to victims, were African American males (63%).
- The average age of the suspect was 28 years, ranging from 14 to 73 years.
- The majority (86%) of the suspects were not employed anywhere.

- Most of the suspects and victims had a prior relationship of some sort (75%). Only 25% were strangers.
- About 20% of the suspects were on parole, 25% on probation and 3% on both at the time of the incident.

Other victim characteristics

- Most were long-time residents of their county of residence. 54% had lived in their county for their entire life. Several victims were residents of nearby counties, most commonly Contra Costa and San Francisco.
- The majority (69%) of homicide victims were single and had never been married, 16% were married, and 13% were divorced or widowed.

When and where the homicide occurred

- 62% of homicides occurred during late night hours from 8pm until 4am. About 14% occurred between 4pm and 8pm.
- The homicides were highest during the months of July, August, and September.
- The death rate was highest in the West Oakland (74.3 per 100,000) and Elmhurst neighborhoods (48.1 per 100,000). The hills and North Oakland had the lowest rates of homicides.

Why the homicide occurred

According to Oakland Police Department (OPD) records, 11% of homicides occurred as a
result of retaliation, 19% argument, 7% drug-related cause, 9% robbery, and 8% were due
to domestic violence. The majority did not have a known circumstance, as there were
usually no witnesses. OPD however believes that most homicides are gang-related and
involve drugs in some way (66%).

Recommendations

Surveillance system

- Continue to assess and monitor the magnitude, nature, and consequences of violence at the neighborhood, city, and county level.
- Continue to track and improve data collected on each homicide.
- Standardize and enhance data collection across agencies and service providers to ensure that critical comprehensive information for each case, including his/her family history, medical records and circumstances.
- Expand surveillance activities to include 1) other types of violence such as child abuse, elder abuse, and intimate partner violence; 2) suicides; 3) hospitalizations due to violent injuries using hospital discharge data; 4) other types of local violent crime data available.
- Collect qualitative data using focus groups or in-depth interviews with victims' families and suspects' social networks.
- Share the linked data with key partners to ensure that effective data-driven prevention and intervention strategies are being developed for victims and perpetrators.
- Use the data presented to identify and fill critical gaps in services including mental health, employment, and public health.

General

- Improve community capacity, especially in West Oakland and Central East Oakland, to provide a safe supportive environment for all youth.
- Provide positive opportunities to youth and young adults in the community, among peers and at home during after school and summer time.

• Monitor and ensure the healthy development of parolees and those on probation after exit

from the system.

- Ensure that young adults in Oakland have sustainable economic opportunities available to them, especially post-high school. Have policies and programs to increase opportunities for young adults preand post- high school.
- Identify and ensure that residents are linked to resources and services available to the community and families to combat violence.
- Track and discourage gang involvement.
- Track and implement policies to control guns in/to Oakland.
- Enhance partnerships across agencies and communities to collectively combat violence.



Introduction

Violence in Alameda County: A Public Health Crisis provides an initial look at the type of information we can analyze from linked homicide data. The report covers homicides that occurred in Oakland in the years 2002 to 2004. This report, based on linked surveillance data, covers socio-demographics of the victims including detailed data on socioeconomic status; rates by neighborhood; the circumstances involved; some information on the suspects such as demographics, parole or probation, relationship to the victim; and weapon characteristics. We hope this report can serve as a monitoring and reference tool that meets the needs of all local agencies and partners.

The purpose of this report is:

- 1. To better consolidate multiple data sources to understand the extent of violence in Oakland neighborhoods.
- 2. To identify the circumstances and situations that increase the risk of being a victim or a perpetrator of violence.
- 3. To inform violence prevention strategies.

The Importance of Linking Surveillance Data

The types of data collected on homicide deaths and injuries by the police department, hospital patient registries, and the coroner serve different purposes within each agency. Police are focused on criminal investigations with the goal of arresting perpetrators. Health care providers are concerned about treatment of victims and the outcomes of injuries. The coroner's office has charge over scene and background investigations, and consults with police and criminal justice officials on incident reconstruction. Of course, the data collected by



individual agencies is useful in directing efforts to reduce violent deaths and injuries; however, the data is fragmented and not comprehensive. The need for linked data goes beyond the reporting of the exact same numbers of deaths and injuries each year. Linked surveillance data will serve as a basis for a public health approach, which crosses over agency and geographical boundaries. It will help us to identify areas of prevention and intervention from multiple facets of the individuals' life – as many times the suspect in one situation becomes the victim in another.

Although there are numerous agencies and individuals working tirelessly to end violence in Oakland, they are missing the power of data to support their voice. Despite the magnitude, severity, and cost of violence, there continues to be a lack of comprehensive violence prevention efforts in Oakland and Alameda County. Lack of coordinated local data at the county and community-level inhibits our ability to advocate and intervene effectively. Assessment of violent deaths and assaults is also critical for identifying unmet need for services.

Linking data across agencies on each homicide helps to provide greater detail on the root causes and consequences associated with each incident. As the chain of events unfolds and different agencies intervene and collect data specific to their needs, it helps to better understand the root causes of violence, tell a more complete picture of each case and incident and improves quality and comprehensiveness of data. It tells us who or what may be responsible — whether it is lack of family structure or economic stability, lack of opportunities or positive community, or is it association with gangs or deviant peers that leads one to becoming a victim or a perpetrator of homicide. It may guide us to who is perpetrating the violence and why. What circumstances increase one's chances of being a suspect of violence? Who is at increased risk of being a victim of homicide? Do the victims know the perpetrators? If so, could these situations and circumstances be prevented?

An innovative system of data collection was initiated by Centers of Disease Control and piloted by ten states throughout the nation. Alameda County is participating in this effort through the California Violent Death Reporting System (CVDRS), beginning with 2005 data. We are building and personalizing the system to meet our local needs. This surveillance system has been deemed essential for planning and policy development, and presents a model that works.

It is our hope that the information provided will be used as an advocacy tool and a reference guide to strengthen the capacity of community partners and promote collaboration across employment, health, schools, law enforcement, and social services agencies. The surveillance system may also serve as a monitoring tool for the blueprint on violence prevention in Alameda County, *A Lifetime Commitment to Violence Prevention*, accessible at http://www.acgov.org/acvpb.htm.

Several important issues are not covered in this report because the present data do not reach these areas. For example, the availability of guns is an important risk factor for homicides. The Oakland Gun Tracing Committee tracing project found that 28% of guns confiscated from juveniles came from a single dealer in San Leandro. They found that "the market supplying Oakland youth with firearms appears to be primarily a local problem of undocumented, street-level transactions between individuals" where straw purchasers buy guns legally and sell them illegally to juveniles and felons.

The Long-term Plan

The Alameda County Violent Death Reporting System (ACVDRS) is based on the National Violent Death Reporting System (NVDRS) developed by Harvard University and implemented in a number of cities nationwide. ACVDRS is an active surveillance system that employs standard definitions, a coding scheme, uniform data elements, a dedicated software application, and a relational database. The system incorporates data from multiple data sources to capture greater detail about each violent death. The system allows for analysis of disparate existing information in a timely manner for use in developing and evaluating interventions to reduce violence in Alameda County.

This pilot project links information on homicide victims and perpetrators using police, death certificate, coroner, and state Department of Justice supplemental homicide reports. The second phase of the project will include all violent injury in Oakland. New sources of data will include emergency department log sheets and hospital discharges. The third phase expands the project to the entire county of Alameda. Further data sources are arrest records from other law enforcement agencies including the police departments of the remaining cities, the sheriff's department, and

public transit and other police forces. Finally, depending on the community needs, we may tie in other databases to the system. The data may come from firearm registries, domestic violence calls for service, or children and family services data on reported cases of child abuse and neglect.

Specific project objectives are to:

- 1. Implement a Alameda County Violent Death Reporting System.
- 2. Categorize violent deaths demographically and geographically and identify critical areas of the county for prevention activities.
- 3. Categorize violent events by modality to assist in legislative actions to reduce availability of identified weapons.
- 4. Assist public agencies, public policy makers, violence prevention groups, and public health experts to develop and evaluate strategies to reduce the number of violence crimes.

A countywide centralized database will serve as a resource for our community. According to the National Violent Death Reporting System training manual, once the data are routinely collected and centralized at the county public health department, the data can be used by:

- Coroners, death certificate registrars and crime lab investigators to share and compare information, and to respond with greater efficiency and accuracy to public inquiries.
- Police departments to more easily look beyond agency boundaries, to examine comprehensive statistics for neighborhoods and cities and at the county level, to further understand underlying issues, to identify potential suspects, and to better enforce and evaluate crime interventions.
- **Public health and mental health professionals** to better understand trends and disparities in violence; to identify underlying risks for victims and suspects; to develop effective prevention strategies at the neighborhood and county levels.
- **Community-based organizations** to develop policy recommendations; to develop and implement programs that will more effectively reduce violence.
- **Policy makers** to better pinpoint and break the cycle of violence via policies; to develop programs that address underlying causes and environment; and to guide funding and legislative initiatives accordingly.

Violent Crime Rate

Homicides are one type of crime against persons that are commonly used to assess the burden of violence in a community. Other violent crimes include robbery with a weapon, aggravated assault, and forcible rape, of which assaults are the most common, followed by robbery, rape, and then homicides. Homicides represent a small percentage of crimes in the county, although they are the most severe.

Violent crimes pose a significant threat to the lives and well-being of persons involved.

From 1993 to 2003

- The number of violent crimes in Alameda County has fallen by 43% from 17,647 in 1993 to 10,104 in 2003, according to the Criminal Justice Statistics Center, Department of Justice.
- Oakland's violent crime rate rose significantly through the early 1990s and then dropped gradually from 2,600 per 100,000 in 1993 to about 1,380 per 100,000 in 2003.
- Over time, the Oakland UCR homicide rate¹ has dropped steadily from a high of 42.7 per 100,000 people in 1992 to 26.8 in 2003.

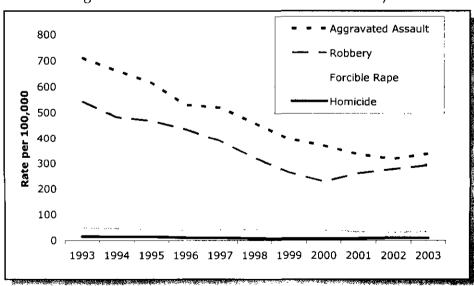


Figure 1: Violent Crime Rates in Alameda County

Source: FBI Uniform Crime Reporting System.

¹ UCR: The FBI Uniform Crime Reporting System. UCR homicides do not include those that are self defense.

State and National Comparisons

- In 2004, Oakland had the third-highest rate of violent crimes of all the 61 major cities in California with a population of 100,000 and above. Stockton and San Bernardino had the higher rates.
- In Oakland in 2001-2003, the homicide rate was 24.5 per 100,000 people, three times higher than the average county rate of 8.3 per year from 2001-2003, and four times higher than the statewide and national homicide rate of 6.7 and 6.1, respectively.
- The Oakland homicide rate in 2001-2003 was eight times higher than the national Healthy People objective for 2010, which is 3.0 per 100,000.

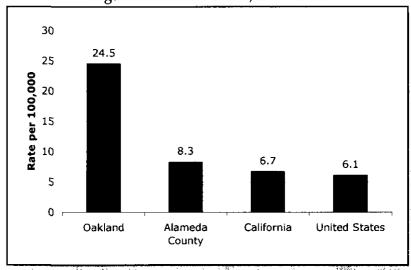


Figure 2: Homicide Rate, 2001-2003

Source: FBI Uniform Crime Reporting System.

Weapon Used

Firearms are a pervasive part of violence – the ease of access to firearms and availability to perpetrators significantly increases the risk of a homicide. Compared to other mechanisms such as blunt objects, firearm attacks are more likely to result in fatal outcomes for the victim. The average cost of firearm injury per person is very high, estimated around \$53,000 per person. The per person cost for a fatal firearm injury is around \$370,000, according to national estimates.

- According to OPD data, 247 of the homicide victims were killed with firearms, 24 were stabbed, 16 were beaten, six were strangled, and 15 had blunt trauma.
- At least 200 of the firearm deaths were attributable to handguns. At least 33 were attributable to assault rifles.

Table 1: Mechanism of Injury

Mechanism	#	%
Firearm	247	78.4
Beating	16	5.1
Sharp instrument	24	7.6
Blunt instrument	15	4.8
Strangulation	6	1.9
Other	7	2.2
Total	315	100.0

Socio-demographics of Homicide Victims

Alameda County is one of nine counties in the San Francisco Bay Area and has the highest homicide rate in Northern California. In the county, the city of Oakland bears the highest burden of homicide deaths. Thus, it is important to identify the risks people face in Oakland, at the neighborhood or individual level, that may increase their chances of being a victim of violence. Who is targeted as a victim of violence? Does a person's race or gender increase his/her chances of being a victim? Socio-demographics of the victims provide us with information on the type of individuals being victimized by perpetrators, and may help explain an individual's and community's risk of being a victim of violence.

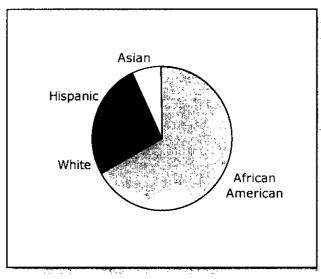
Disparities by Age, Race/Ethnicity, and Gender

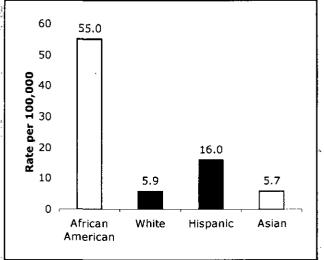
Table 2: Distribution and Rates of Homicides by Gender, Race, and Age, 2002-2004

		Homicides	Rate per 100,000	Percentage of Total
Candan	Male	268	45.1	85.1
Gender	Female	47	7.4	14.9
	African American	243	55.0	77.1
	White	17	5.9	5.4
Race/ethnicity	Hispanic	43	16.0	13.7
•	Asian	12	5.7	3.8
	African American males	206	102.1	65.4
	0-14	10	3.8	3.2
	15-19	36	47.4	11.4
	20-24	71	79.6	22.5
Age	25-34	99	44.4	31.4
	35-44	47	24.1	14.9
	45-64	45	17.5	14.3
	65+	7	5.4	2.2
Male	0-14	7	5.3	2.6
	15-19	31	80.8	11.6
	20-24	64	147.3	23.9
	25-34	85	77.2	31.7
	35-44	38	39.8	14.2
	45-64	38	31.3	14.2
	65+	5	9.6	1.9
	0-14	3	2.3	6.4
	15-19	5	13.3	10.6
	20-24	7	15.3	14.9
Female	25-34	14	12.4	29.8
	35-44	9	9.0	19.1
	45-64	7	5.1	14.9
	65+	2	2.6	4.3

Figure 3: Race/Ethnicity of Victim

Figure 4: Homicide Rates by Race/Ethnicity



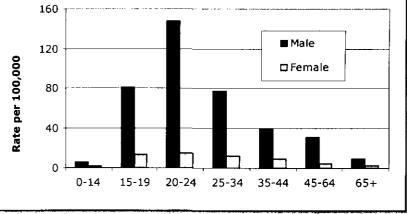


- In 2002-2004, a large number of homicide victims were African American (77%), 14% were Hispanic, 5% were White, and 4% Asian. Even though African Americans make up about 35% of the total Oakland population, they were disproportionately targeted as victims and perpetrators of street violence. Whereas the other racial/ethnic groups comprise greater proportion of Oakland population, they experience significantly less homicides.
- Anecdotally, OPD believes that in recent years (2005 and 2006) Latinos are becoming a
 greater proportion of homicide victims and suspects in Oakland.
- Within all the racial/ethnic groups, males are the majority of the victims. More than 65% of the victims were African American males (n=206). The death rate for African American males was 102.1 per 100,000, four times higher than the Oakland average of 25.6 per 100,000.
- One out of three homicide victims (33.9%) were between the ages of 15 and 24 years, followed by 31.4% from 25 to 34 years, 14.9% from 35 to 44 years and 16.5% 45 years of age or older. People

of all ages, ranging in age from one- to 80year olds, were targeted as victims of homicide.

- The majority (85.1%)
 of homicide deaths
 were to males
 compared to 14.9% to
 females.
- Among the males and the females, the highest rate were for those 20 to 24 years old.

Figure 5: Homicide Rate by Age and Gender



Socio-economic Status of Victims

In terms of socioeconomic background, Oakland residents are less educated and have lower socioeconomic status than county residents. Of the population that is at least 25 years of age, 73.9% had at least a high school education, compared to 82.4% for the county. In 1999, about one in five persons (19.4% vs. 11.0% countywide), and one in four children under five years were living in poverty. Since 2000, the unemployment rate has risen dramatically, similar to state and national trends. The percent of people out of work in Oakland, including the ones not looking for work, rose from



6% in 2000 to beyond 10% in 2002. This is substantially higher that the county and state rate of about 7% since 2002.

Education level

- Persons of lower socioeconomic status, as measured by education level or poverty status, tend to be at higher risk for being a victim of violence. In 2002-2004, the majority (71.8%) of homicide victims 18 years or more had completed high school or equivalent (GED).
- The homicide rate for those 25 years or more with more than a high school education was 9.5 per 100,000. For those with a high school education or less, the rate was 42.0 per 100,000.
- About 28% of victims 18 years or older did not complete high school and 7% had less than ninth grade education, whereas 17% had some college or higher.
- The average education attainment among the victims 18 years or more with completed education data (n=277) was 11.7 years.

Type of employment

The underground economy provides economic support for some families in some of the most beleaguered neighborhoods. This economy has businessmen and entrepreneurs.

- The occupation status listed here is from the death certificate. It is unknown if the person
 - was working at the time of death. The police record shows a profile much different from that presented below. In the police record, 75.2% were unemployed, 13.7% were employed, 1.3% were students, 1.0% were retired, and 8.9% had unknown employment status.
- For the death certificate data, among those victims 18 years or older, almost 13% had never worked, 14% were general laborers, and 7% were either going to school or college.

Table 3: Reported Occupation of Homicide Victims 18 Years or More, 2002-2004

		1. 16
Blue collar	104	36.0
Retail and personal services	61	21.1
White collar	26	9.0
Caregiver	9	3.1
Student	19	6.6
Never worked	38	13.1
Unknown	14	4.8
Other	18	6.2

- Most of the victims reportedly worked in blue-collar jobs such as in maintenance, landscaping, construction, or warehouse type jobs.
- Among those 18 years or older, the average number of years employed was 6.7 years, ranging from the ones who had never worked to the elderly victims who had been employed for 60 years.
- Almost 20% were employed for less than one year at their jobs, 12% had no work experience, and 33% had been employed for more than five years at their occupation.

Marital and Veteran Status of Victims

• Most of the victims, 69%, have never been married. An additional 15.6% were married at the time of the homicide.

Table 4: Marital Status of Victims, 2002-2004

Marital status	# ****	%
Married	49	15.6
Single, never married	218	69.2
Divorced, annulled	35	11.2
Widowed	7	2.2
Unknown	6	1.9
Total	315	100.0

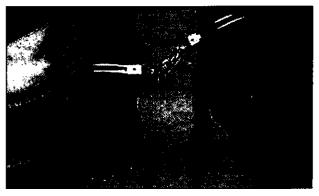
• Only a few, 3.2%, of the victims had been in the U.S. military.

Table 5: Veteran Status of Victims, 2002-2004

U.S. military service	#	%
No	277	87.9
Yes	10	3.2
Unknown	28	8.9
Total	315	100.0

IV. Suspect Characteristics

Oakland Police Department and Supplemental Homicide Reports collect information on how many suspected perpetrators there were for each homicide, whether they were arrested or charged, their previous criminal history, their relationship to the victim, and suspect demographics. Although the majority of cases have only one suspect, several cases had multiple suspects reported. At least *some* suspect information was available for 241, or 76.5%, of the cases.



Socio-demographics of the Perpetrators

- The majority of known primary suspects, similar to victims, were African American males.
- For 240 of the suspects, the race was known. Of these, 5 were Asian, 26 were Hispanic, and 205 (85.4%) were African American.
- Most (95.8%) of the suspects were males and 4.2% were females.
- The average age of the primary suspects was 27.9 years, with a range of 14-73.

Table 6: Primary Suspect Gender, Race, and Age, As Known, 2002-2004

The Application of the Applicati			
Gender (n=241)	Male	231	95.8
Genuer (n-241)	Female	10	4.2
	African American	205	85.4
	White	1	0.4
Dagg/othminity (n=140)	Hispanic	26	10.8
Race/ethnicity (n=240)	Asian	5	2.1
	Other	3	1.3
	African American males	197	82.1
	0-14	1	0.6
	15-19	29	17.8
	20-24	42	25.8
Age (n=163)	25-34	57	35.0
-	35-44	23	14.1
	45-64	9	5.5
	65+	2	1.2

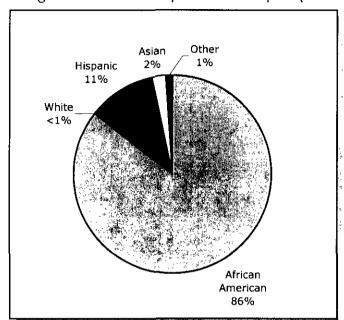


Figure 6: Race/Ethnicity of the Primary Suspect

• For 146 of the suspects, employment status was known. Of them, 127 or 86.4% of the suspects were not employed anywhere. Nineteen or 12.9% of the suspects were employed. For those whose job type was known they were blue-collar jobs. One was a student. This occupation status is from the Oakland police record.

Relationship to the Victim

• For 163 of the cases, the relationship of the perpetrator to the victim was known, whereas for 152 cases the relationship was not documented. Only 41 (25% of the cases where the relationship is known) of the suspects were strangers. Thus, in Oakland, as with national data, we observe that the victim has had some history or relationship with the perpetrator. We can conclude that an individual was at greater risk for being a victim of homicide from someone they already know.

Table 7: Primary Suspect Relationship to Victim

Relationship	#1	%
Unknown	152	48.3
Acquaintance	108	34.3
Strangers	41	13.0
Intimate partners	9	2.9
Family	5	1.6
Total	315	100.0

Current Parole and Probation Status of Victims and Suspects

- Of 306 victims with known information, 44.8% were under the jurisdiction of the criminal justice system: 12.4% were on parole at the time of the homicide, 28.8% were on probation, and 3.6% were on both parole and probation.
- For 150 cases, current parole and probation information for the primary suspect was available. Forty-eight percent were under the jurisdiction of the criminal justice system: 20% were on parole at the time of the homicide, 24.7% were on probation, and 3.3% were on both.

Table 8: Victim and Primary Suspect Parole and Probation Status

A CONTRACTOR OF THE CONTRACTOR	Victim		Primary Suspect	
Status	#	%	# * .	%
Probation	88	28.8	37	24.7
Parole	38	12.4	30	20.0
Both probation and parole	11	3.6	5	3.3
Neither	169	55.2	78	52.0
Total	306	100.0	150	100.0
Unknown	9		165	
Grand total	· *315		315	, .,

Identifying that at least one out of two suspects had a current history of criminal activity and was currently on probation or parole has major implications for prevention. It underlines the direct association between being on probation or parole and increased likelihood of being a perpetrator of homicides. The probation department also notes that paroles are at increased risk of being a victim of homicides once they get out of the system.

V. When the Homicide Occurred

• The most dangerous day is Sunday (starting at midnight). Thursday is the least dangerous.

Table 9: Day of Homicides, 2002-2004

Day		%
Sunday	60	19.0
Monday	41	13.0
Tuesday	46	14.6
Wednesday	44	14.0
Thursday	27	8.6
Friday	45	14.3
Saturday	45	14.3
Unknown	7	2.2
Total	315	100:0

More than 60% of the injuries occurred during late night hours (from 8pm through 4am).
 Table 10: Time Period of Homicides, 2002-2004

		%
8pm – midnight	124	39.4
Midnight – 4am	73	23.2
4am – 8am	22	7.0
8am – noon	19	6.0
Noon – 4pm	25	7.9
4pm – 8pm	43	13.7
Unknown	9	2.9
Local	**************************************	100.0



 On any given day, most homicides occur between 8pm and 2am. Saturday night through Sunday morning is the most dangerous time, followed by Friday night/Saturday morning, Sunday night/Monday morning, and Monday and Wednesday evening.

Samual Monday Tuesday Wednesday

Number of homicines of home o

Figure 7: Day and Time of Homicides, 2002-2004

Note: For nine of the homicides, day/time were unknown.

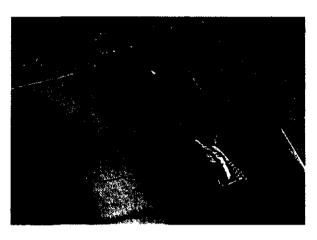
• The number of homicides was highest during July through September. November and April had the lowest number of homicides in 2002-2004.

Table 11: Month of Homicides, 2002-2004

January	24	7.6	July	31	9.8
February	25	7.9	August	33	10.5
March	29	9.2	September	37	11.7
April	17	5.4	October	20	6.3
May	27	8.6	November	17	5.4
June	22	7.0	December	26	8.3
			Unknown	7	2.2

VI. Where the Homicide Occurred

- The majority of victims were long-time residents of Alameda County: 54% had lived in their county for their entire life. Only 28% lived in that county less than half their life.
- About 70% of the victims whose birthplace was known were born in California. Eighteen percent were born in another state in the United States. About 12% were born in a foreign country; about half of them were from Mexico.



Narthwest Hills Southeast Hills Lower Hills Central 5 Miles

Figure 8: Location of Homicides in Oakland, 2002-2004

Note: For several of the cases, the incident location represents where the body was found.

 West Oakland by far had the highest homicide rate in 2002-2004. Next highest were Central East Oakland and Elmhurst. This data points to the need for greater neighborhoodlevel violence prevention efforts using community capacity building.

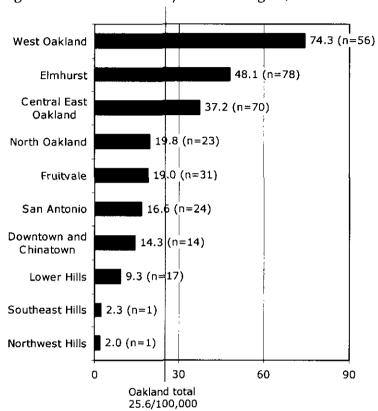


Figure 9: Homicide Rate by Oakland Region, 2002-2004

• Oakland residents made up 73% of the victims whose residence was known. An additional 14% of the victims were residents of Alameda County outside of Oakland. Nine were residents of Richmond (Contra Costa County) who were killed in Oakland. This data may point to the need for greater regional violence prevention efforts.

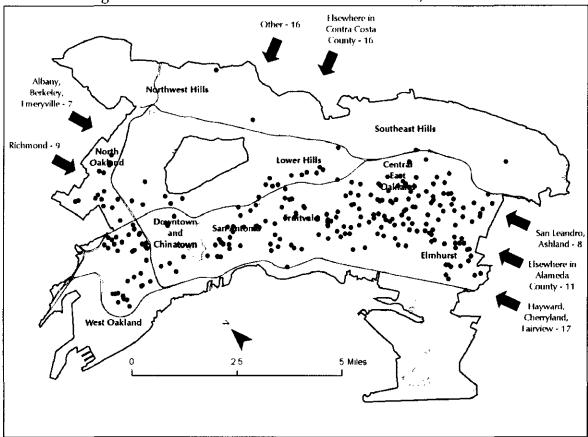


Figure 10: Residence of Oakland Homicide Victims, 2002-2004

• The location of the homicide tended to be close to home; 14.6% of the injuries occurred in the home of the victim or in the front or rear of the home. An additional 18.4% occurred within walking distance, 0.5 miles, of the home.

Table 13: Distance from Home to Incident

Elevation .		%
Home (or in front of home)	46	14.6
Within 0.5 miles	58	18.4
0.6 to 1.0 miles	22	7.0
1.1 to 5.0 miles	76	24.1
5.1 to 15.0 miles	68	21.6
15.1 to 50.0 miles	38	12.1
More than 50.0 miles	7	2.2
		1000

- Homicides tended to occur in high-poverty areas. Those census tracts with the highest poverty rate in Oakland, i.e. more than 30% of the individuals live in poverty², had the highest homicide rate, 54.2 per 100,000.
- As poverty lessens, the homicide rate lessens.

North
North
Oaklayd

Cost Oakland

O 25 5 Miles

Figure 11: Poverty Rate, Oakland Census Tracts, 1999

Table 14: Homicide Rate by Poverty Rate Group

STATEMENT OF THE STATEM		
More than 30%	97	54.2
20 to 30%	138	32.6
10 to 20%	58	17.7
Less than 10%	22	7.3
Total Land	Mari (Bron	25:6

² The measure of poverty is based on residents with a gross income below the federal poverty level (FPL). In 1999, the FPL was set at \$8,240 for an individual living alone and \$16,700 for a family of four.

• Most of the homicides (60%) occurred on the street or in a vehicle on the street.

Table 15: Location of the Incident

Location	#.	%
House/apartment	57	18.1
Street/vehicle	190	60.3
Sidewalk/driveway/parking lot/yard	28	8.9
Business	20	6.3
Other	7	2.2
Remote area	4	1.3
Unknown	9	2.9
Total	315	100.0

- Most (41%) die at the scene of the incident.
- 51% of the victims had surgery performed.
- Although most of the victims survive for only a few minutes, some were admitted to a hospital for a few days.

Table 16: Hospitalization Status of Victims When Died

Hospital status	#	%
Inpatient	50	15.9
ER/Outpatient	111	35.2
DOA	16	5.1
Scene	130	41.3
Unknown	8	2.5
Total	315	100.0

VII. Circumstances

Knowing the circumstances of the victims provides a very important insight into problems and situations they may have been in that led to their death. It would explain the possible risks involved, and in terms of prevention, identify issues of at-risk youth and adult victims lives early on, thus preventing the homicides before they occur.

- Seven of the homicides were reported as justifiable self-defense.
- While the primary reason for the homicide was drugs in 7.3% of the homicides, the Oakland Police Department reports that at least 47.6% of the cases involved drugs in some way. For 41.9% of the homicides, drug involvement was unknown, and for 10.5% there was no drug involvement.

Table 17: Circumstances of Homicides

	4	. %
Argument/fight	59	18.7
Justifiable	7	2.2
Drug related	23	7.3
Domestic violence	26	8.3
Retaliation	34	10.8
Gang related	10	3.2
Robbery/burglary	27	8.6
Other	7	2.2
Unknown	122	38.7
Total	\$ 3	100.0

• Anecdotally, OPD thinks that many more incidents are related to gangs.

Methodology

Case Definition

We included any homicide reported by the Oakland Police Department in their data.

Data Sources

Five primary data sources that collect specific information on homicide cases in Oakland were linked and consolidated to be able to tell a more comprehensive story of each victim and incident to see if any patterns emerge. Each of the data sources has been routinely collecting information. These data sources include:

- Vital Statistics Death certificates from the Alameda County Public Health Department and from the California State Department of Health Statistics were the primary source of homicide deaths. Original death certificates and the Automated Vital Statistics System were used to identify Oakland residents that died outside the county, and also to verify some demographic information on the cases. From the death certificates, primarily sociodemographic data on the victim was available including military service, employment status, years at employment, years in the county, next to kin information, cause of death, location of injury.
- Alameda County Coroner's office Detailed information from the coroner's report and autopsy were made available from the coroner's office. Information included alcohol use and other drug tests, whether victim was in custody, location and number of wounds, type of weapon, current occupation and homeless status of the victim. Some circumstances were also available.
- Oakland Police Department A database with detailed information on all the homicides was made available.
- Supplementary Homicide Reports These reports are authorized by federal law Title 28,
 Section 534 and, although not required, state justice agencies are encouraged by the FBI to
 compile comprehensive, accurate data regarding each homicide on a timely basis.
 Information about victim and offender such as race, age, and gender are collected, as well
 as weapon used, relationships of victim to offender, brief circumstances, and situations
 (e.g. single victim/multiple offenders).
- Oakland Tribune A yearly supplement and map on homicides in Oakland.

A few other data sources were used to help put some of the local data in perspective.

- Population estimates of Oakland residents by age, sex, race/ethnicity, and income levels for July 1, 2003 were projected based on US Census 2000 data. Race, age, and sex for Oakland were calculated based on percent change in population estimated by the Department of Finance city and county population available at http://www.dof.ca.gov/html/demograp/ repndat.asp
- State of California, Department of Justice, Office of the Attorney General http://ag.ca.gov/cjsc/publications/misc/dvsr/rpt.pdf

Data Collection and Abstraction

Indicators for the report were selected based on availability, accuracy, and completeness and their relevance for violence prevention.

The Emergency Medical Services Division of the Public Health Department was instrumental in collecting the coroner's office data. Information Systems in the Public Health Department and the Vital Statistics unit provided restricted access to the automated system of vital statistics and the original death certificates for residents and occurrences. Linking the data was useful in confirming the accuracy and reliability of the total number of final cases, as well as providing additional information on each case.

Data Cleaning and Quality Control

Once the data had been abstracted and entered into the database, each case was counted and confirmed a homicide to address any inconsistencies in the variables across the data sources. For instance, if victim's residence address was different in death certificates vs. in the coroner's files, it was first noted and then decided to use the death certificate as the primary source to report for residence address. Similarly, for several other variables, whether multiple partners/sources collected the same variable information but had inconsistent results, we had to choose to use only one of those sources. Having more than one data source for some of the variables, however, enhanced our ability to ensure reliability of the final numbers presented. The majority of the data was not duplicated across the data sources, thus enriching the amount of information available on each case to be linked.

Limitations of the Data

Although a local violence surveillance system and the report may provide important insights for comprehensive local violence prevention, the results presented should be interpreted with caution. Several limitations of the report are noted below.

- 1. Homicide represents one type of violent crime against persons. Thus, other types of violent crimes such as suicides, or deaths with undetermined intent, legal interventions, or terrorist acts are excluded. This report excludes assaults against persons that also have the intent of hurting another person but do not lead to death. Assaults are much greater in frequency than homicide deaths. Excluding other types of violent acts limits our ability to generalize the results and underestimates the magnitude of the problem in Oakland, and only provides a partial view of violence for prevention efforts and planning. Purposely, this initial effort was restricted to capturing only homicide deaths in Oakland in order to first establish a seamless system of surveillance. The intent is to expand the surveillance system to capture countywide deaths that occur due to violent injuries, and include suicides and other violent injuries in addition to homicides. Assaults, which frequently lead to hospitalization, and can be collected from OSHPD (Office of Statewide Planning, Health and Development) or the trauma registry.
- 2. Although detailed information is available on each homicide case from various data sources, some important information is commonly missing, thus limiting our ability to analyze the extent of the problem and the underlying risk factors.
- 3. The data is not generalizable to cities outside of Oakland or to specific neighborhoods within Oakland since all analysis is done at the city level.

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