

FRANKLIN COUNTY, OHIO

VIOLENCE DATA BRIEF

INTRODUCTION

Violence is a serious public health problem that can impact people in all stages of life. Violence can erode communities by reducing productivity, decreasing property values and disrupting social services.¹

This data brief provides a snapshot of the problem through local, state and national indicators of violence. The City of Columbus, along with other community partners, is working to reduce violent crime in our community through a comprehensive neighborhood safety strategy.

IN THE U.S.

Overall, violence in the U.S. has decreased over the past two decades.² Despite this trend, U.S. homicide rates still far exceed those in other high-income countries. Annually, in the U.S., there are over 16,000 homicides and 1.6 million assaults requiring hospital treatment.³

Suicide is the 10th leading cause of death in the U.S.⁵ and the third leading cause among young people.⁶

Firearm-related violence is the leading cause of homicide, suicide and premature death in the U.S. Firearms kill more than 38,000 people and cause nearly 85,000 injuries each year.⁴

Rates of violence, including self harm, vary greatly by sex, age and geography. In addition, violence is attributable to underlying risk factors, such as poverty and low education.³

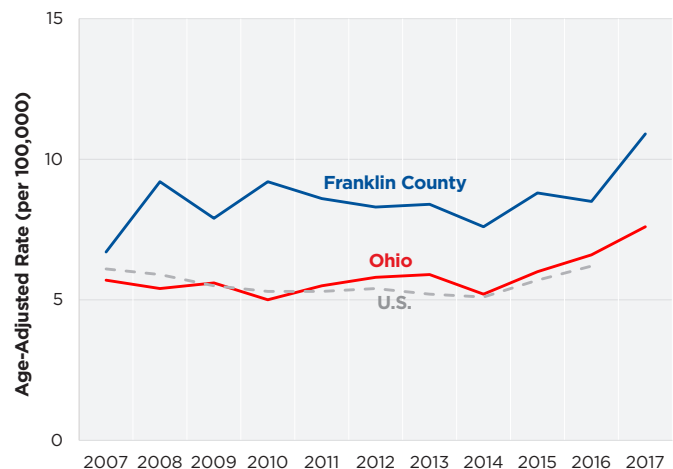
IN OHIO

The homicide rate for Ohio (6.5 per 100,000) is consistent with the homicide rate for the U.S. (6.2 per 100,000). However, in the past five years, Ohio has seen a 30% increase in the annual number of homicides (see Chart 1). Metropolitan counties and those in the southeast and northeast part of the state tend to have higher rates of violent death. Similar to the U.S., Ohio also has variations in rates of violence by sex and race. The disparity is most evident among men, with the rate for African-American males being 14.5 times the rate for White males.

Suicide is the 11th leading cause of death in Ohio and is the second leading cause of death among young people.⁷

Like the U.S., firearms are the most common mechanism for violent deaths in Ohio. Over 70% of homicides involved a firearm and 50% of suicides involved a firearm.⁸

Chart 1: **HOMICIDES**
Age-Adjusted Death Rates
Franklin County, Ohio, U.S., 2007-2017



*US data not available for 2017.

IN FRANKLIN COUNTY

SUICIDES

- Suicide is the 11th leading cause of death.
 - The rate among males is four times higher than among females.
 - The rate among non-Hispanic Whites is more than two times higher than among non-Hispanic African-Americans.
 - The highest rate of suicide is among non-Hispanic White males.

HOMICIDES

- Homicide is among the top 20 causes of death.
 - The number of homicides has increased by 55% over the past four years from 97 in 2014 to 150 in 2017.
 - Homicide rates are higher among the non-Hispanic African-American population (see Chart 2), with the highest homicide rates seen among non-Hispanic African-American males.

ASSAULT-RELATED HOSPITALIZATIONS

- From 2013 to 2015, there were over 2,600 hospitalizations due to assaults, defined as injuries inflicted by one person on another.
 - The leading cause of assault was being struck by a blunt object, accounting for 46% of all injury hospitalizations.
- Males are four times more likely to be hospitalized due to assault than females.
- African-Americans are three times more likely to be hospitalized due to assault than Whites.

DOMESTIC VIOLENCE

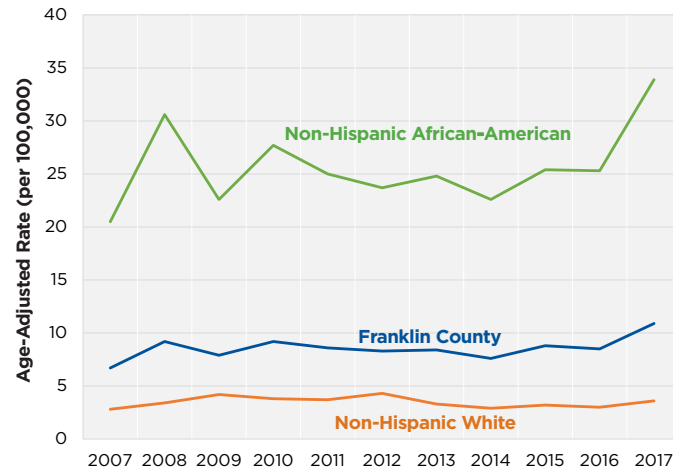
- In 2017, there were 2,097 victims of domestic violence with an injury reported to Columbus Police.
 - This is a 29% decrease since 2013 (see Chart 3).
 - None of these incidents was fatal.
- Among incidents, the highest percentage were committed by an individual with a non-spousal relationship with a child involved.

CHILD ABUSE

- From 2016 to 2017, there were 13,580 reports of child abuse.
 - 42% of these reported physical abuse.
 - 9% reported sexual abuse.

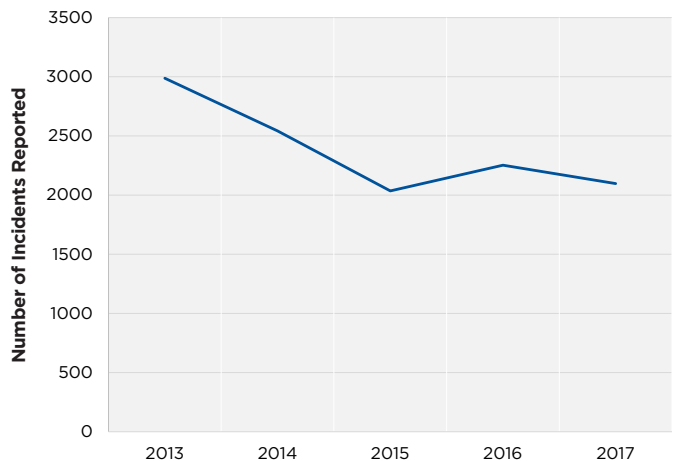
The suicide rate is **highest** among non-Hispanic White males.

Chart 2: **HOMICIDES**
Age-Adjusted Death Rates By Race
Franklin County, 2007-2017



Males are **four times** more likely to be hospitalized due to assault than females.

Chart 3: **DOMESTIC VIOLENCE INCIDENTS**
Victims with Injuries
Columbus Police Reports, 2013-2017



FIREARM-RELATED VIOLENCE IN FRANKLIN COUNTY

SUICIDES

- Firearms are the leading cause of suicide, accounting for 50% of suicides.
 - The rate of firearm-related homicide deaths is highest among non-Hispanic White males.

HOMICIDES

- Firearms are the leading cause of homicide, accounting for 41% of homicides.
- The rate of firearm-related homicides is highest among non-Hispanic African-American males.
 - The rate among non-Hispanic African-American males (48.4 per 100,000) is over 14 times higher than the rate for non-Hispanic White males (3.4 per 100,000).

Firearms are the leading cause of death for homicides (41%) and suicides (50%).

ASSAULT-RELATED HOSPITALIZATIONS

- Firearm-related assaults were the second leading cause of injury hospitalizations from 2013 to 2015.
 - Males were almost eight times more likely to be hospitalized due to a firearm-related assault than females.
 - African-Americans were 10 times more likely to be hospitalized due to a firearm-related assault than Whites.

EMERGENCY DEPARTMENT VISITS

- Between 2015 and 2017, there were 1,906 visits to local emergency rooms for suspected gunshots.
- The average age for these visits was 30 years old.
- Males were almost six times more likely to visit the emergency room for a gunshot than females.

POLICE REPORTS

- There were 2,753 firearm-related incidents reported to Columbus Police, with 3,950 related victims from 2016 to 2017.
 - Almost 60% of the victims were African-American compared to 39% White.
 - The majority of victims were male (69%).

REFERENCES:

- Centers for Disease Control and Prevention. <https://www.cdc.gov/violenceprevention/overview/index.html>
- Gramlich, J. (2018, January 30). 5 facts about crime in the U.S. Retrieved from: <http://www.pewresearch.org/fact-tank/2018/01/30/5-facts-about-crime-in-the-u-s>
- Steven A. Sumner, MD, MSc, James A. Mercy, PhD, Linda L. Dahlberg, PhD, Susan D. Hillis, PhD, Joanne Klevens, MD, PhD, and Debra Houry, MD, MPH. Violence in the United States: Status, Challenges, and Opportunities. JAMA. 2015 August 4; 314(5): 478–488. doi:10.1001/jama.2015.8371.
- American Public Health Association. <https://www.apha.org/topics-and-issues/gun-violence>
- Park-Lee, E., Hedden, S. L., and Lipari, R. N. Suicidal Thoughts and Behavior in 33 Metropolitan Statistical Areas Update: 2013 to 2015. The CBHSQ Report: March 14, 2018. Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, Rockville, MD.
- Cash SJ, Bridge JA. Epidemiology of youth suicide and suicidal behavior. Curr Opin Pediatr 2009;21:613–9. 10.1097/MOP.0b013e32833063e1
- Youth Suicide in Ohio. Ohio Violent Death Reporting System Fact Sheet. Ohio department of Health, Violence and Injury Prevention Program. October 2016.
- Ohio Department of Health, Violence and Injury Prevention Program. Ohio Violent Death Reporting System, 2014 Annual Report. Columbus, OH: Ohio Colleges of Medicine Government Resource Center; 2017

SOURCES:

Homicides and Suicides: Ohio Department of Health Vital Statistics, 2015-2017. Ohio Public Health Data Warehouse. The Department specifically disclaims responsibility for any analyses, interpretations or conclusions. 2017 data considered preliminary.

Assault-Related Hospitalizations: Central Ohio Trauma System (COTS), Regional Trauma Registry, 2013-2015. Injury data is reported for injuries resulting in hospitalizations.

Domestic Violence: Ohio Bureau of Criminal Identification and Investigation, Domestic Violence Report (Franklin County), 2017.

Child Abuse: Public Children Services Association of Ohio, 2016-2017 Factbook (Franklin County).

Emergency Department Visits: Ohio Department of Health’s EpiCenter application (Ohio’s statewide syndromic surveillance system used by state and local public health agencies). Additional data preparation and analysis by Columbus Public Health, Office of Epidemiology. Ohio Department of Health and Columbus Public Health specifically disclaim responsibility for any further analyses, interpretations or conclusions.

Police Reports: Columbus Police Department crime reports (2016-2017) filtered for firearm weapon used. Data further managed/prepared by Office of Epidemiology, Columbus Public Health (CPH). The data presented are estimated number of incidents and victim reports only and are for general monitoring use, therefore use with caution. Furthermore, figures and information on crimes are preliminary and subject to change as updated reports are received and processed. The department specifically disclaims responsibility for any further analysis, interpretations or conclusions.



COLUMBUS
PUBLIC HEALTH