Intentional Injuries: Alabama Suicides and Homicides

In recent years, the suicide rate has soared to new heights in the state and in the nation. The most recent data from the Centers for Disease Control and Prevention (CDC) show that nationally, the suicide rate has risen to the 10th leading cause of death and the homicide rate has dropped to the 16th leading cause of death. Both suicide and homicide are considered to be intentional injuries, even though the homicide is not intended by the victim, but by the perpetrator.

Many are not aware that suicide rates are usually higher than homicide rates, but such has been the case since 1950 as reported by Health, United States, 2015.

The chart on the right shows the suicide rate per 100,000 as compared to the homicide rate per 100,000 from 2006 until 2014. Although the suicide rate has been relatively stable since 2012, the homicide rate dropped to a level last seen in 1964. These rates are age-adjusted, which means that they have been averaged between all age groups, and some age groups are higher, some are lower.

Let’s Change the Conversation...

It is clear that there are societal repercussions when the suicide rate is almost twice as high as the homicide rate. According to data from the FBI’s publication 2014: Crime in the United States, 43 percent of homicides with a known offender are committed by a person familiar to the victim. These include husband and wife, both common-law and ex-spouses, mother, father, sister, brother, son, daughter, stepparents, stepchildren, stepsiblings, other relatives, boyfriend, girlfriend, friends, neighbors, employers, employees, and other acquaintances. We need to acknowledge that it is no longer enough to train our society to beware of strangers, but that we need to broaden the manner that we approach personal safety by becoming more aware of behaviors in persons known to us that appear out of character or unusual. Children need to be taught that any speech or behaviors that make them feel uncomfortable should be discussed with a trusted adult right away.

FBI data show that homicide rates in cities with over 100,000 are increasing, while overall rates are decreasing. This pattern shows true in Alabama as well, with the homicide rate in Birmingham, Montgomery, and Mobile showing an increase in 2014; Huntsville also increased, but at a lesser rate; all other counties decreased. Data from the first six months of 2015 appear to show the same pattern, although final data from 2015 are not yet available.
The highest rates of intentional injuries are seen in males:

As shown in the two charts above, there were 711 suicides and 375 homicides in Alabama during 2014. The demographic patterns shown in these charts are very different. White males have rates of suicide about four times higher than any other population. White females are more likely to die by suicide than are females any other race.

The homicide chart shows that males are most often victims of homicide, with far fewer female victims. The CDC reports that Black males die by homicide at a higher rate than any other race or gender. Females of any race die by homicide at similar rates. These charts show composite totals for Blacks or African Americans combined with all other races because of the lower rates of diversity in Alabama. Other races, including Asian, American Indian or Native Alaskan, Native Hawaiian or Other Pacific Islander, and those of Hispanic ethnicity total only 7.7 percent of the state’s population. Many of these reside in the cities with the highest populations.

References

Alabama Center for Health Statistics; 113 Causes of Death by County of Residence, Race and Sex, 2014; ADPH; 2016.

For More Information, Contact:
Primary author: Debra Hodges, PhD, Senior Public Health Research Analyst Health Promotion and Chronic Disease Bureau, Alabama Department of Public Health 334-206-5314