

New report shows 45 percent increase in mortality from law enforcement from 1999 to 2013

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Researchers from the Charles E. Schmidt College of Medicine at Florida Atlantic University and colleagues conducted analyses of nationwide data on individuals who were killed as a result of legal intervention or law enforcement in the US between 1999 and 2013. Credit: Florida Atlantic University



Between 1999 and 2013 in the United States, between 279 (in 2000) to 507 (in 2012) people were killed each year by legal intervention or law enforcement, other than by legal execution. In 2013, an estimated 11.3 million arrests in the U.S. resulted in approximately 480 deaths from legal intervention. Between 1999 and 2013, there were 5,511 deaths by legal intervention.

Researchers from the Charles E. Schmidt College of Medicine at Florida Atlantic University and colleagues conducted analyses of nationwide data on individuals who were killed as a result of legal intervention or law enforcement in the U.S. between 1999 and 2013.

Results from this report show:

- During this 15-year period, there was a 45 percent net increase in deaths from legal intervention.
- 96 percent of these deaths occurred among men, of which 78 percent occurred between ages 15 and 44 years.
- In men ages 15 to 44 years, American Indians or Alaska Natives (whose numbers were small) had the highest rates of death from legal intervention, but blacks and African Americans, and white Hispanics or Latinos all had rates that were significantly higher than those experienced by non-Hispanic whites and Asians or Pacific Islanders.

There were extensive variations in states and counties with reliable rates:

• In terms of urbanization, the highest mortality rate for non-Hispanic Black and African American men ages 15 to 44 years was in large central metropolitan areas, while the lowest occurred in non-core, non-metro rural areas.



- The highest rate for non-Hispanic black men occurred in Nevada, while the lowest rate was in North Carolina.
- New Mexico had the highest rate for both Hispanic and non-Hispanic white men.
- The lowest rate for Hispanic and non-Hispanic white men was in New York.
- The highest rate for blacks and African American men occurred in Riverside County, Calif., with the lowest rate occurring in Kings County (Brooklyn), N.Y.
- For Hispanic <u>white men</u>, the highest rate occurred in Denver, Colo., and the lowest rate was in Los Angeles, Calif.
- For non-Hispanic white men, the highest rate was in San Bernardino, CA, and the lowest rate was in Los Angeles, Calif.

Data from this study were obtained from the Compressed Mortality File (CMF) administered by the Office of Analysis, Epidemiology, and Health Promotion of the National Center for Health Statistics, Centers for Disease Control and Prevention (CDC), and the Internet-based CDC WONDER, a wide-ranging online data epidemiologic research system.

Data compiled for the report included annual national, regional, state, and county-level information on the underlying cause of death as stated on the death certificate according to age, gender, race, and cause for all legal residents. These data did not pertain to illegal immigrants. In the report, the researchers were able to describe mortality from legal intervention in the U.S. from 1999 to 2013 by time, person and place.

Joanna Drowos, D.O., M.P.H., M.B.A., associate chair in the Department of Integrated Biomedical Science in FAU's College of Medicine; Charles H. Hennekens, M.D., Dr.P.H., the first Sir Richard Doll Professor and senior academic advisor to the dean in FAU's College of Medicine; and Robert S. Levine, M.D., professor of family and community medicine in Baylor College of Medicine, have just published



the results of this report in the current issue of the journal *Preventive Medicine*.

"These large differences by person, place and time suggest the need for further research, and may provide an opportunity for community leaders and policy makers to exert collaborative efforts to reduce mortality from legal intervention," said Drowos.

Provided by Florida Atlantic University

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