

# Police-related killings are countable public health data

16 December 2015, by Lindsay Kobayashi



What is the purpose of public health? Public health is a societal approach to protecting and improving the health and well-being of populations. Rather than focus on the health of individuals – that's medicine – public health practitioners identify and address system-level influences on the health of overall populations. Issues such as clean water supplies, school vaccination programs, and public smoking bylaws all fall in the domain of public health. Social justice is often, and should always be, an overarching focus of public health campaigns. The aim to improve the health of populations means all people in the population, however the 'population' is defined. To protect and improve everyone's health often means different strategies for different segments of the population. Specific 'at-risk' or 'vulnerable' groups are those who face the largest societal burden of ill health through adverse living conditions, and who often have insufficient financial or social means to avoid health risks.

Protecting the health of the most vulnerable people is a duty of [public health](#) systems.

If the focus of public health is to protect the health of entire populations, then why do we not record police-related violence and killings in regular public

health datasets? In a paper published last week in *PLOS Medicine*, Professor Nancy Krieger and colleagues argue that law-enforcement-related deaths are not solely a criminal justice concern, but a public health concern, as they affect the families and communities of the deceased. Therefore, Krieger et al. argue, criminal justice data are also [public health data](#). A role of public health systems, including the U.S. Centers for Disease Control and Prevention (CDC) is to record mortality data for the U.S. population, which is updated regularly and made publicly available on their website. Deaths due to acute and chronic conditions such as pneumonia, HIV/AIDS, cardiovascular disease, and cancers are recorded, as well as accidental deaths and injuries. On principle then, why not include law-enforcement-related deaths, which tallies to 1077 people killed by December 14th 2015?

Krieger et al. effectively cite the case of Freddie Gray, an African American man who was fatally injured at age 25 while in custody of the Baltimore police in April 2015. The resulting civil unrest following the incident led to further violence, mental health trauma, and a surge of pharmaceuticals and opioids hitting the street drug market following the looting of pharmacies, all events leading to negative economic and public health consequences. This instance, and the several other occurrences of police violence and civil unrest over the past year in the U.S. are clear examples of law-enforcement-related harms to the public's health. Unfortunately, there is resistance from police forces to provide data on violence and deaths, as noticed by Krieger et al., who emphasise that these deaths are countable: the Guardian, a United Kingdom newspaper, has established an online database of US police killings to-date in 2015, called [The Counted](#).

Clearly, police killings are identifiable and countable. The authors call for American public health authorities to treat law-enforcement-related death as a 'notifiable condition', just as other

causes of death recoded by the CDC. As a notifiable condition, police-related killings would be recorded in real time by health professionals and used by public health systems to help reduce their occurrence.

This issue feeds into a broader debate about the societal role of public health, which we at *PLOS Blogs* have taken stances on. As many epidemiologists and public health professionals would argue, health comes from all sectors, not just the health sector. Population health is determined by a myriad of system-level factors. To name but a few: minimum wage and unemployment benefit laws, public housing availability and conditions, regulations placed (or not placed) upon the food industry, carbon emission regulations, and, of course, relations between law enforcement agents representing the government and the people they are meant to protect and serve. This call for police violence data to be public health data is exciting and timely. If heeded, it could contribute to a more socially just America with a more holistic public health system.

**More information:** Nancy E. Kass. An Ethics Framework for Public Health, *American Journal of Public Health* (2001). DOI: [10.2105/AJPH.91.11.1776](https://doi.org/10.2105/AJPH.91.11.1776)

N Krieger et al. A vision of social justice as the foundation of public health: commemorating 150 years of the spirit of 1848., *American Journal of Public Health* (1998). DOI: [10.2105/AJPH.88.11.1603](https://doi.org/10.2105/AJPH.88.11.1603)

Nancy Krieger et al. Police Killings and Police Deaths Are Public Health Data and Can Be Counted, *PLOS Medicine* (2015). DOI: [10.1371/journal.pmed.1001915](https://doi.org/10.1371/journal.pmed.1001915)

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