

1991

Criminal Justice Policy Focus, Number 91-1

Criminal Justice Policy Research Group
University of Nebraska at Omaha

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Recommended Citation

Research Group, Criminal Justice Policy, "Criminal Justice Policy Focus, Number 91-1" (1991). *Publications Archives, 1963-2000*. 390.
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Patterns in Omaha's Homicide Rate

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The leading cause of death for black Americans between the ages of 15 and 34 and the fifth leading cause of death for blacks in general is homicide (Center for Disease Control, 1985). Moreover, in recent years there has been public outcry over the extremely high homicide rates in our nation's larger cities. Increased concern about this nation's drug problem, and the vivid imagery of gang related violence and 'drive-by' shootings has helped to fuel the outcry.

Like the nation, Omaha has seen an increase in gang violence, drug use, and random drive-by shootings. This report investigates whether there has been a related change in the nature of criminal homicide in Omaha. We will examine the fundamental characteristics of homicide and whether these characteristics have changed since 1975.

This report is the first in a three-part series examining patterns of homicide in Omaha for the past fifteen years. In this report we examine overall trends and characteristics of homicide in Omaha from 1975 to 1989. The second report will focus on the extent and nature of alcohol involvement in homicide, and the third report will look at neighborhood and social correlates of homicide in Omaha.

After clarifying the definitions and sources used, we investigate the race, age, gender and area of residence of Omaha homicide victims, and circumstances under which these crimes were committed.

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Definitions and Sources

Homicide is death resulting from the killing of one person by another, excluding death caused by law enforcement officers and accidental killings. Reported homicides were from the Omaha Police Division's "Homicide Reports," maintained in the Research Unit. United States data are from the *Uniform Crime Reports for the United States, 1975-1988*, U.S. Department of Justice, Federal Bureau of Investigation.

Homicide victims and perpetrators are classified into two general race categories, black and white. The white racial category includes homicide victims reported as white regardless of ethnicity. Not included in either the black or white category are Native Americans, Asians, Hispanics and Pacific Islanders. These individuals were excluded because of extremely small numbers, which limit statistical analyses and comparisons.

Homicide Rates by Race, Age, Gender, and Area of the City

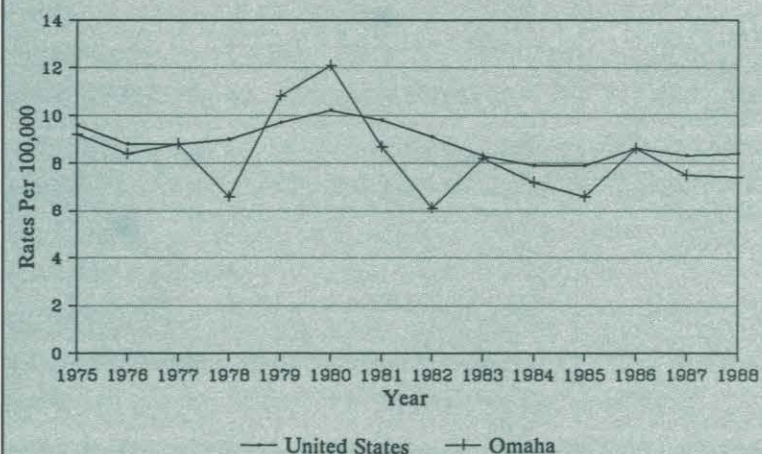
From 1975 to 1989, 389 Omahans¹ lost their lives to homicide. Of these victims, 55 percent were black and the remaining 45 percent were white. Blacks experienced by far the highest homicide victimization rates of any racial group, with a combined fifteen-year rate of 40.1 homicide deaths per 100,000 persons per year. The risk of dying from homicide was eight times greater for blacks than whites during this period: 40.1 and 5.0,² respectively. The black homicide rate for Omaha is significantly higher than the national rate of 31.7; this is a significant difference. An examination of the data in table 1 and figure 1 shows that the overall homicide rate in Omaha parallels that of the nation. This is due to both a higher

Table 1. Homicides and Rates United States and Omaha, 1975-1988

Year	United States		Omaha	
	Number of Homicides	Rate per 100,000*	Number of Homicides	Rate per 100,000
1975	20,510	9.6	36	9.2
1976	18,780	8.8	19	8.4
1977	19,120	8.8	31	8.8
1978	19,555	9.0	24	6.6
1979	21,456	9.7	40	10.8
1980	23,044	10.2	38	12.1
1981	22,516	9.8	28	8.7
1982	21,012	9.1	20	6.1
1983	19,308	8.3	27	8.2
1984	18,692	7.9	24	7.2
1985	18,976	7.9	24	6.6
1986	20,613	8.6	30	8.6
1987	20,096	8.3	28	7.5
1988	20,675	8.4	28	7.4

Rates per 100,000
 *1989 rates not available.
 Source: Uniform Crime Reports for the United States, 1975-1988, U.S. Department of Justice, Federal Bureau of Investigation.

Figure 1. Homicide Rates United States and Omaha, 1975-1988



Source: See Table 1.

than average black homicide rate and a lower than average white rate.

An examination of the data in table 1 and figure 1 illustrates that there has been no significant increase in the number of homicides in Omaha during the past 15 years. Blacks experienced a decrease in the number of homicides during the period under study (table 3). Specifically, 1979 saw the highest number of black homicide victims—20. In 1989 only 10 blacks were included in the city's homicides. This decrease was found in both sex groups. Among whites the highest number of homicides occurred in 1975 and 1979 with 16 individuals falling victim to homicide; the same statistic in 1989 was 10.

Homicide is often considered primarily a "male" problem, because rates for males are consistently much higher than they are for females. Indeed, the risk of being a homicide victim was much higher for black males than black females. During the 15 year period, black males were 43 percent of all homicide victims and 79 percent of the black homicide victims (table 2). However, the rate for black females was higher than the rate for white males. Thus, although homicide rates are higher by far for black males than for any other race-sex group, black females also represent a group at high risk.

For both males and females of each racial category, homicides were highest among young adults aged 15 to 39. Individuals in these age groups accounted for 66 percent of all homicide deaths in the city (table 2). Black males between 20 and 39 accounted for 61.3 percent of the total black homicides. This clearly illustrates that homicide is a serious threat to young black males. A similar pattern is seen among white males in terms of the high risk among young adults and the consistently greater number of males than females in each age group. However, the ratio, of male to female homicides is not quite as great for whites as it is for blacks (tables 2 and 3).

Table 2. Omaha Homicides by Race, Age and Gender of Victim, 1975-1989

Age Group	Black				White				Total	Percent*
	Male	Female	Both	Percent*	Male	Female	Both	Percent*		
1-14	6	9	15	7.1	10	5	15	8.5	30	7.7
15-19	23	6	29	13.7	11	6	17	9.6	46	11.8
20-24	30	9	39	18.4	27	5	32	18.1	71	18.3
25-29	38	7	45	21.2	13	8	21	11.9	66	17.0
30-34	25	5	30	14.2	14	4	18	10.2	48	12.3
35-39	13	3	16	7.5	9	2	11	6.2	27	6.9
40-44	4	2	6	3.0	7	4	11	6.2	17	4.4
45-49	9	2	11	5.2	10	2	12	6.8	23	5.9
50-54	6	0	6	3.0	7	2	9	5.1	15	3.9
55-59	4	2	6	3.0	8	0	8	4.5	14	3.6
60+	7	2	9	4.2	11	12	23	12.9	32	8.2
Total	165	47	212	100.5	127	50	177	100.0	389	100.0

*Percentages may not add to 100 percent due to rounding error.

Source: Omaha Police Division Homicide Data.

Table 3. Omaha Homicide Victims by Race and Gender, 1975-1989

Year	Black			White		
	Male	Female	Total	Male	Female	Total
1975	15	4	19	12	4	16
1976	11	1	12	4	1	5
1977	12	7	19	10	1	11
1978	6	0	6	14	3	17
1979	16	4	20	7	9	16
1980	15	4	19	11	3	14
1981	12	2	14	9	4	13
1982	6	5	11	6	3	9
1983	13	3	16	7	2	9
1984	11	4	15	6	2	8
1985	8	1	9	6	5	11
1986	9	4	13	8	4	12
1987	10	3	13	9	5	14
1988	13	3	16	11	1	13
1989	8	2	10	7	3	10
Total	165	47	212	127	50	177

Source: Compiled by author from Omaha Police Division Homicide Data.

The risk of homicide victimization varies among the different areas of the city (figure 2). As the data in figure 2 show 96 percent of the homicide victims during the years selected lived in, areas H and I. Figure 3 further divides these areas into zip codes and these data show that homicide in Omaha is a fairly concentrated event, although yearly totals increased only in area I.

Weapon Use, Victim-assailant Relationship, and Crime Circumstance

Omaha police data show that two-thirds of all homicides of Omahans during the period 1975 to 1989 were committed with firearms. Knives and piercing instruments were the second type of weapons used to commit homicide. An analysis of weapon use by race reveals that blacks used firearms to commit homicides somewhat more often than whites (66 percent versus 59 percent). Whites used blunt instruments to commit homicide more often than blacks (25 percent versus 12 percent). This pattern in choice of weapons suggests that firearms may be more accessible in the black community even though current research shows no difference in gun ownership by race (Wright, Rossi and Daly, 1983).

There is a common misconception that most homicides are committed by strangers in the act of perpetrating some other felony crime, such as rape or robbery. In fact, most homicide victims know their assailants. Although data are not shown, 82 percent of homicides of Omahans were committed by acquaintances or family members, and only 18 percent were committed by strangers during

the period studied. This pattern varies by sex. Of black male homicide victims, 54 percent were killed by individuals intimate to them, 40 percent were killed by acquaintances and only 6 percent were killed by strangers. Of black female homicide victims, 80 percent were killed by those they knew intimately. Among white male homicide victims only 37 percent were killed by a spouse or lover. Homicides committed by family members were also proportionately greater in number for blacks.

Homicides in Omaha were, for the most part, intraracial in nature. Seventy-four percent of white homicide victims and 92 percent of black victims were killed by members of the same race. Whites were killed by blacks more often than blacks were killed by whites. This can be explained in part by data showing that whites were more likely to be victims of robbery homicides. Almost two-thirds of all homicides of blacks occurred in the context of arguments or some other non-felony circumstance. During the 15 year period under review, only 6 percent to 13 percent of black victims were killed by assailants committing some other felony crime, such as robbery, and even then the victim and assailant were known to each other. The majority of homicides of whites also occurs under non-felony-associated circumstances, but felony homicides account for a greater proportion of homicides among whites.

Figure 2. Geographic Distribution of Homicides in Omaha Area for 1975, 1981 and 1989

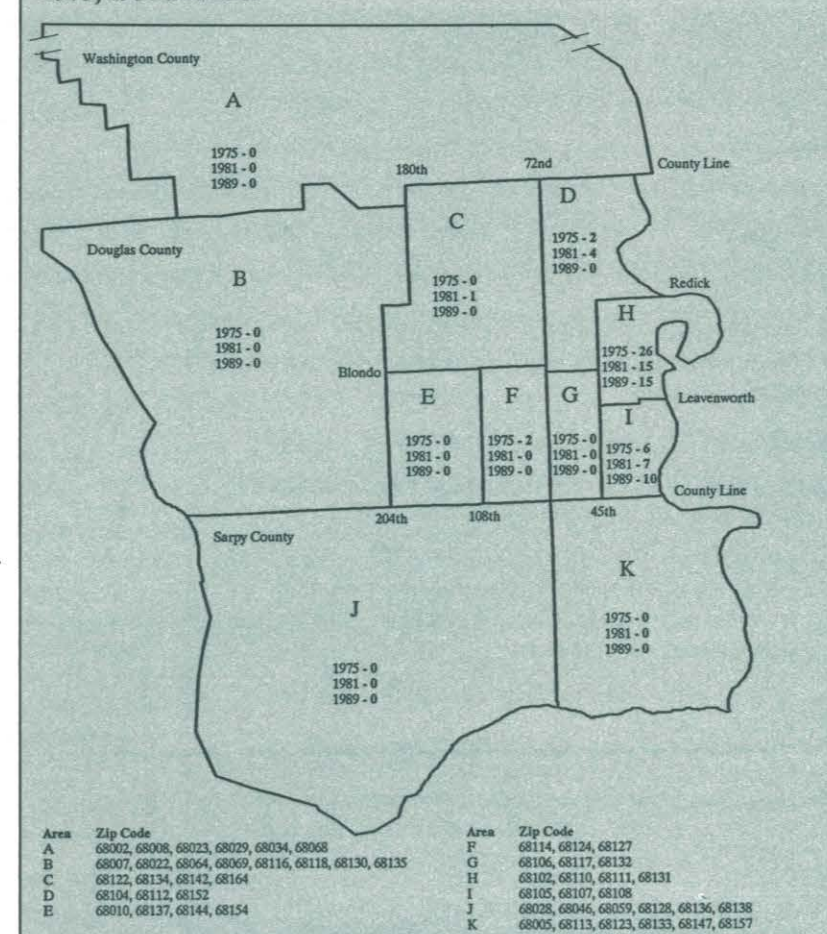
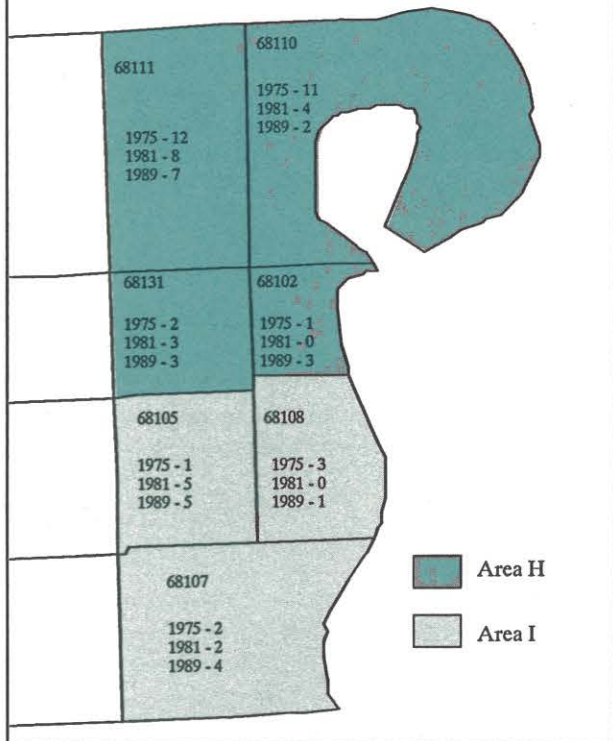


Figure 3. Homicides in Selected Omaha Zip Code Areas for 1975, 1981 and 1989



Common Patterns of Homicide

Considered in light of the dramatic differences noted in the risk of homicide victimization for blacks and whites, it is perhaps remarkable that in a number of ways the patterns of homicide in the two race groups are very similar. Specifically, for both blacks and whites:

- males were many times more likely to die than females;
- for both males and females rates were highest among young adults, peaking among those age 20 to 29;
- rates were highest in the inner city zones, H and I;
- over half of all victims were killed with firearms, most of which were handguns;
- the majority of homicides occurred during the course of some other non-felony circumstance; only a small proportion occurred during the perpetration of another crime;
- at least half of all victims were killed by persons whom they knew;
- a greater proportion of female victims were killed by family members or other than male victims; conversely, a greater proportion of male victims were killed by acquaintances or strangers.

This commonality in patterns among blacks and whites suggests that, despite dramatic differences in risk of homicide victimization, the fundamental causes of

homicide may be much the same regardless of race. This commonality in patterns has also been noted in national studies.³ Differences in rates may arise because those factors which increase the risk of homicide victimization are experienced more frequently or more intensely by blacks than they are by whites. Patterns common to all race groups also suggest that interventions developed for high risk groups may apply to the general population.

Directions for Research and Prevention

In every year of the 15 year period studied, for both sexes and for every age group, black Omahans were many times more likely to die from homicide than white Omahans. Black males experienced the highest number of homicides of any race/gender group during each year studied, and young black males were at especially high risk of homicide victimization. The factors which place Omaha's black males at such high risk of homicide must be identified. This process can be accomplished only with the joint cooperation of neighborhood associations, civic groups, academics and governmental agencies.

Given the common features shared by a great number of the homicide victims, there is hope of developing workable prevention strategies. Since most homicides are not associated with the commission of some other felony crime (e.g. robbery) and since most homicide victims are killed by acquaintances or family members, preventive strategies must include, but also go beyond, the purview of the criminal justice system. Community leaders, civic organizations, and health and social service professionals must work together with law enforcement agencies if we are to reduce the tremendous, tragic toll exacted by homicide among the citizens of Omaha.

Endnotes

¹All figures and tabular data, with the exception of table 1, pertain only to black and white Omaha. The data in table 1 includes all homicide victims regardless of race and were taken from the *Uniform Crime Reports*.

²The population data used to establish the Omaha rates were supplied by the Omaha City Planning Department. In 1970 Omaha had a population of 313,000 whites and 34,000 blacks. In 1980 there were 268,591 whites and 37,864 blacks.

³Mercy, James, and Patrick O'Carroll. "Patterns and Recent Trends in Black Homicide." in *Violence Patterns, Causes and Public Policy*, Neil Weiner, Margaret Zahn and Rita Sagi, editors. New York: Harcourt, Brace, Javanovich, 1990.

Special thanks to Vic Bumphus and Kurt Blakely for their assistance in data collection and analysis. We appreciate the full cooperation given us by Chief James Skinner, Omaha Police Division; Lt. Terry Campbell, Omaha Police Division; Lee Ingram, Records Omaha Police Division; and Margaret Semin, Crime Analyst Omaha Police Division.

Focus: Criminal Justice Policy is published by the Center for Public Affairs Research, University of Nebraska at Omaha, Peter Kiewit Conference Center, 1313 Farnam-on-the-Mall, Omaha, Nebraska 68182. 402/595-2311.



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