Community Violence Prevention Project

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Executive Summary
Our detailed review of Allegheny County’s 107 homicides in 2017 further supports the need to distinguish between types of homicide cases. The 2017 homicide total for the City of Pittsburgh was 57 (remained the same from 2016) and for the Suburbs 50 (increase of 2% from 2016).

Allegheny County Homicide Demographics 2017
- 89 (83%) victims were male (81% in 2016 compared to 87% in 2015).
- 82 (77%) victims were black (78% in 2016, compared to 81% in 2015).
- 13 victims were killed in McKeesport.
- The median age of a homicide victim was 26.
- 29% of homicide victims were African American males between the ages of 21-30.
- The median age of a homicide suspect was 21.

A Typical Homicide in Allegheny County
- **Victim**
  - Male
  - African American
  - Between 21-30 years old
  - Has between 1 and 5 prior arrests
  - Has prior drug and/or burglary arrest on arrest history
  - Was or previously on probation/parole
- **Suspect**
  - Male
  - African American
  - Between 21-30 years old
  - Has between 1 and 5 prior arrests
  - Has prior drug and/or weapon arrest on arrest history
  - Was or previously on probation/parole
- **Homicide Circumstances**
  - The victim and suspect were peers (they had something in common)
  - The incident occurred between 3am-6am
  - The incident occurred on Tuesday
  - The homicide involved a firearm
Key findings from 2017 show that:

- **Homicide victimization continues to be unevenly distributed across populations or places.** While only 13% of Allegheny County residents are black or African American, 83% of the victims were black. Twelve percent of the homicides occurred in just 1 zip code of Allegheny County's 130 neighborhoods, zip code 15206.

- **Firearms are the main cause of death.** Cause of death in 89% of homicides was gunshot wounds.

- **Social context matters for homicide victimization.** Chronic, multigenerational involvement in violence and illegal activities; additional opportunities for conflict through increased use of social media (e.g., Facebook, Instagram, Snapchat); prevalence of drugs, alcohol, and access to firearms; and violence as normative behavior were identified as relevant in the homicides.

The complexity of homicide and intentional injury prevention has become increasingly clear and points to the urgent need for efforts to address violence at multiple levels within Allegheny County communities. The recommendations include:

- **Identify and involve the support networks of at-risk individuals and, specifically, engage those at risk who are not currently involved in mandated health or behavior programs.** Engaging individuals and families at risk of violence victimization in non-traditional settings (e.g., community-based organizations, primary care clinics) is a strategic way to address the complexity of peer conflict. We must begin to vet the agencies that deliver health and behavior health services, to make sure we get the proper fit to assist families, communities, and children affected by this disease.

- **Modify community programs’ participation requirements to ensure equal access.** Engaging individuals will improve participation and commitment: Modify participation requirements (e.g., parent/guardian signature, payment), adapt service delivery to include non-traditional methods in communities, increase communication and coordination among behavior, health, and social programs and systems. After-school programs are a necessity.

- **Increase community participation and investment in violence prevention efforts.** Combat attitudes of violence as normative behavior and promote an appropriate form of conflict resolution; support existing anti-violence groups and coalitions that provide awareness, education, and prevention; improve and strengthen community-police relations; and distribute anti-violence materials throughout Pittsburgh. Provide more education, to change perceptions. We want to change community norms through education.

- **Enhance the homicide review process to better inform our understanding of contributing factors and potential solutions.** Recruit new community and law enforcement members; enhance data collection efforts, specifically to better account for the unique factors involved in intimate partner homicides; increase police involvement; and enhance dissemination methods.
Technical Notes
The Pitt Public Health Community Violence Prevention Initiative, within the Center for Health Equity and Department of Behavioral and Community Health Sciences at the Graduate School of Public Health, began in August 2012. Utilizing a public health perspective, the project seeks to gain an enhanced understanding of the contextual and underlying factors impacting community violence so that appropriate recommendations specific to the unique needs of Allegheny County communities can be made. Utilizing our greater understanding and the experience gained from the 2012 through 2017 Homicide Reviews, this represents our sixth findings report. As of 2014 we started reporting data for Allegheny county and not just Pittsburgh.

Background and Overview
Public Health considers violence a contagious disease. In secondary and tertiary prevention, we interrupt transmission of violence through relationships we have developed in communities. A key way to interrupt the transmission of the disease is through outreach efforts. By engaging community members in this work, and by linking people to appropriate community-based service organizations, we treat the disease and those at high risk of becoming victims. When we are successful in providing needed services, we help prevent the further spread of the disease.

Our homicide reviews can be considered a primary prevention effort. Making information about homicides available to communities and local leadership can change community norms. By engaging the community, we in fact treat the whole community, and we begin to change community norms. This is a way of changing the narrative about community violence.

Communities with high rates of homicide are in distress, with high poverty, unemployment and underemployment, and unstable housing. Housing, in particular, has become a major issue as it relates to continual spread of the disease, particularly the closing of housing communities and relocation of families.

In previous years, we have extended our services to the children of homicide victims. This is yet another approach in interrupting the transmission of the disease, through mentoring and resources we receive from our partners. Once linked to the network of service providers who are treating the disease, we begin the process of changing community norms. This is what we see as taking a true Public Health approach.
Our broad goals are to:
1. Uncover patterns among incidents of homicide
2. Identify key preventable factors that contributed to the homicide.
3. Develop recommendations for homicide prevention
4. Disseminate information and engage in community dialogue about violence prevention within Pittsburgh and Allegheny County neighborhoods.

**Partnership Coordination** Using a participatory-based approach, key local stakeholders were identified and invited to partner on project activities. Community partners involved representatives from a variety of organizations, each invested and contributing expertise to the project’s objectives. Partners included adult and juvenile courts, county jail, city and county social service providers, public health professionals, trauma physicians and health care professionals, anti-gun violence advocates, and community members with long-standing experience with violence prevention efforts in Allegheny County.

**Data from Partners** Data were collected on the 106 homicides through complementary sources of information including the Allegheny County Jail, Allegheny County Department of Human Services, Allegheny County Adult and Juvenile Probation, various social media sites and the Allegheny County Medical Examiner’s Office. Partners were responsible for searching their own agencies for victim-specific information (e.g., previous involvement or supervision history, previous criminal charge) and sharing in preparation for review meetings.

**Data from Community** Two coaches - two academic research staff - constituted the “outreach team,” who gathered fine-grained, contextual information surrounding the homicides from communities impacted by violence in 2017. Our outreach team members are long-term residents of Pittsburgh with extensive violence prevention experience, particularly around retaliatory violence and street outreach. The outreach team discussed homicide cases with key neighborhood members and attended local community meetings to collect further detailed information. Information was gathered for each homicide and victim, including such things as relationship of the victim with the suspected perpetrator, evidence of previous conflict between the two, and family history of violence. The outreach team used information gathered from the community and media outlets to reach a consensus on whether the risk of retaliation was likely.

**Homicide Review Group** Composed of community partners, ten homicide review group meetings took place from January 2017 to December 2017 in which all 2017 homicides were discussed. Review meetings were organized by the month in which the homicide occurred in order to focus on the homicide while it is still current and the dynamics of each homicide. Community-based groups specific to the neighborhood where homicides occurred also were invited to attend the review. Meeting leaders encouraged brainstorming underlying causes of violence and intervention implications and recommendations. All review meeting participants signed a non-disclosure statement.
The information discussed in this report represents a summary of collected data and information shared in homicide review group meetings and does not represent individual or organizational perspectives.
Results

ALLEGHENY COUNTY HOMICIDES 2014-2016

City  Suburbs

2014: 71 37
2015: 59 55
2016: 58 48
2017: 57 50
Not included in the chart were 8 with other or missing race.

In the United States Blacks come in at 52% of homicides, black population is 12%.

Males lead and homicides by 78%, 49% population in the United States.
Allegheny county population estimates at 1,225,365. Within that white alone 80.7% black or African American alone 13.4%, Asian alone 3.6%, Hispanic or Latino 2.0% and 2 or more races 2.1%

51.7% of Allegheny County are females. 16 years and over represent 83.1%

Allegheny County consist of 130 Municipalities, plus the 32 within the City itself.
Each year homicides tend to happen more on the weekend days than weekdays, in 2017 we saw a decrease on Fridays and an increase on Tuesdays. We have been seeing a decrease of weekend homicides and increase during the weekdays.
ALLEGHENY COUNTY HOMICIDES BY MONTH 2014 AND 2017
• Firearms remain the most common cause of homicide death in Allegheny County.
• Firearms accounted for 73% of homicides in the United States in 2017, majority of victims of those firearms being between the ages of 20 to 24 African males.
<table>
<thead>
<tr>
<th>Characteristics</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
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<tr>
<td><strong>Total Number of Homicides</strong></td>
<td>108</td>
<td>114</td>
<td>106</td>
<td>107</td>
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<tr>
<td><strong>Location Type</strong></td>
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<tr>
<td>Street, Road, Avenue</td>
<td>38</td>
<td>43</td>
<td>35</td>
<td>36</td>
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<td>House/Home</td>
<td>33</td>
<td>36</td>
<td>3</td>
<td>35</td>
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<tr>
<td>Housing Authority Housing</td>
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<td>5</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Apartment</td>
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<td>10</td>
<td>2</td>
<td>5</td>
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<td>Automobile</td>
<td>8</td>
<td>10</td>
<td>16</td>
<td>15</td>
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<tr>
<td>Bar, Club</td>
<td>7</td>
<td>3</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Park, Parking lot, Wooded area</td>
<td>8</td>
<td>3</td>
<td>3</td>
<td>7</td>
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<tr>
<td>Group home, Correctional facility</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Other(i.e. vacant building, river, business)</td>
<td>3</td>
<td>3</td>
<td>5</td>
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<tr>
<td><strong>Residence of Victim at time of death</strong></td>
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<td></td>
<td></td>
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<tr>
<td>Pittsburgh</td>
<td>46</td>
<td>55</td>
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<td>54</td>
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<td>----</td>
<td>----</td>
</tr>
<tr>
<td>Homeless</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
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<tr>
<td>Unknown</td>
<td>32</td>
<td>2</td>
<td>12</td>
<td>14</td>
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<td>Outside of Allegheny County</td>
<td>0</td>
<td>3</td>
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<tr>
<td><strong>Killed in Neighborhood of Residence</strong></td>
<td>32</td>
<td>55</td>
<td>43</td>
<td>62</td>
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<tr>
<td>Others injured in incident</td>
<td>4</td>
<td>15</td>
<td>15</td>
<td>14</td>
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<td>Received DHS Services</td>
<td>66</td>
<td>69</td>
<td>48</td>
<td>72</td>
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<tr>
<td>Perpetrator/Suspect</td>
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<td></td>
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<td>Arrest made</td>
<td>29</td>
<td>55</td>
<td>45</td>
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<tr>
<td>Deceased (e.g. murder-suicide)</td>
<td>4</td>
<td>2</td>
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<td>2</td>
<td>1</td>
<td>0</td>
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<td>Law Enforcement</td>
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<td>3</td>
<td>1</td>
<td>1</td>
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<td>Unknown</td>
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<td>52</td>
<td>57</td>
<td>60</td>
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<tr>
<td>Conflict Context</td>
<td>Definitions &amp; Clarification</td>
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<td>----------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------</td>
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| Peer conflict*                   | • Purposeful, self-motivated  
• Peers or individuals with something in common (e.g., avocation, residence, age) with more than a superficial familiarity  
• Conflicts may stem from such things as drugs, money, power, or disrespect, but not gang business. |
| Gang/Group related               | • U.S. Department of Justice gang definition is used, specifically there is:  
  o Identifiable leadership and internal organization  
  o Collective identification by employing a common name, slogan, sign or symbol, style or color of clothing  
• Conflicts are “gang on gang” or one named gang versus another named gang and may involve such things as turf/territory, intimidation, power, pride and respect, or gang business (e.g., drugs, stolen commerce, firearms, prostitution)  
• Geographically defined boundaries in Pittsburgh that determine with what gang you should affiliate |
| Isolated Incident                | • Incidents that are criminally motivated, but do not involve aspects of a peer or gang-related conflict  
• Considered an isolated event  
• Conflicts may stem from such things as:  
  o Robbery, home invasion  
  o Argument/conflict  
  o Contracted killing |
| Child abuse                      | • Intentional injury or violence towards a child |
| Intimate partner/Domestic violence | • Intentional injury or violence perpetrated by a current or former intimate partner (e.g., boyfriend, girlfriend, wife husband).  
• Domestic injury or Violence between family members or household affairs. |
| Non-criminal or unintentional    | • Incidents that are not criminally motivated and do not involve aspects of a peer or gang-related conflict  
• Conflicts may stem from such things as:  
  o Unintended target  
  o No apparent motive  
  o Negligence or improper firearm storage  
  o Personal protection or self-defense |
| Law Enforcement                  | • Any incident that involves law enforcement |
| Unknown                          | • Unknown due to incomplete information |
According to the FBI: United States Crime report, robbery was the highest circumstance in homicides nationwide.
Drug charges was leading charges victims received, majority was manufacture, delivery, or possession with intent to manufacture or deliver.

Charges shown are adult charges, 86% of victims had juvenile charges starting as young as 11 years of age.
Key Contributing Factors
Public information and news outlets often oversimplify intentional injury and homicides in Allegheny County, frequently identifying street gangs and illicit drugs as the source of conflict. Through community engagement and academic-community partnerships, greater contextual information was gathered and homicides were found to involve a variety of factors. Numerous contributing factors were identified and discussed with partners as relevant to homicides from 2017.

Discussion took place around the role of street drugs, multigenerational family involvement in violence and illegal activities. This cycle of violence, and its impact on the breakdown of a family unit, was identified as a contributor to a victim’s involvement in violence. Why we are taking the public health approach of violence being a disease and passed on.

The increasing access to and use of social media (e.g., Facebook, Twitter, Snapchat and Instagram) was still extensively discussed around homicide cases, particularly social media as an additional opportunity for conflict (i.e., beyond face-to-face arguments). In addition to things such as YouTube, Facebook, Instagram, Snapchat and twitter social media is beginning to play a larger role in sources of conflict among individuals and future violence and intentional injury. Additionally, drugs, alcohol, and access to firearms were also frequently highlighted as related to the homicides.

Violence as normative behavior and an appropriate form of conflict resolution was discussed as a significant contributing factor to the homicides. A lack of mentoring or positive behavior modeling within families, in addition to a potential familial cycle of violence, as well as within the schools and carried out in neighborhoods was identified as relevant in the homicides from 2017.

Five Year Comparison: Emerging Differences
Victim and homicide differences emerged between 2012 and 2013. Female victims represented a larger number of homicides in 2013, (17% of total homicides, of which 50% were related to intimate partner violence). Furthermore, female intimate partner homicides were associated with a variation in cause of death compared to 2012 with 50% due to a gunshot wound, 25% due to poisoning, and 25% due to stabbing.

Age of homicide victim differed between the years, with the majority of victims aged 18 to 25 years in 2012 compared to the majority 35 years or older in 2013,

Firearm charges for victims and suspects before the homicide incidents took place was frequent. There were victims and suspects with more than one firearm charge. We noticed that more and more on our lists were charged with firearm violations, more than 50% of our victims and suspects.

Data on victim’s neighborhood of residence at time of death illustrates that in the four years approximately one quarter of 2015-2016 Allegheny County homicide victims were living outside of city limits at time of death.
Recommendations
The complexity of homicide and intentional injury prevention has become increasingly clear over the past three years of project activities. In order to be effective, a range of interventions need to take place at multiple levels. The remainder of this report outlines recommendations from partners that incorporate information and insight gained in 2015. Some of the recommendations are similar to those made following the review of homicides from 2012-2017, illustrating the improvements that still need to take place. Divided into Individuals and Peers at Risk, Service Improvement, and Community Action, the recommendations identify potential opportunities to further understand, increase awareness, and prevent and respond to violence impacting Allegheny County communities.

Individuals and Peers at Risk

- **Identify and involve the support network of at-risk individuals.** Natural supports are key assets in encouraging an individual's engagement, commitment, and success in health and behavior programs. Natural supports play a critical role in the well-being and safety of individuals at risk for violence through their support and advocacy and should be identified and engaged in violence prevention and intervention activities.

- **Reach out and engage those at risk for violence who are not currently involved in a mandated health or behavior program.** Due to regulations of local health and behavior programs (e.g., juvenile court), individuals who are not under mandated involvement, but who may be at risk for violence, are unable to access services that may be of benefit. Emphasis needs to be on engaging and linking these individuals at multiple points of contact (e.g., primary care clinics, community-based organizations, after school programs) to appropriate health and behavior programs.

Service Improvement

- **Enhance linkages between behavior, health, and social programs and systems.** Continuity between behavior, health, and social systems is crucial. Linkages between systems should be improved to avoid any interruption in use or loss to follow-up.

- **Focus on engagement.** Individuals, particularly youth, may be more willing to participate in community health and social programs if they are engaged, rather than identified as needing a particular service. Getting the children of homicide victims more involved in community activities and keeping them actively busy, would be a valuable investment

- **Modify participation requirements.** Community adolescent or youth programs often require a parent/guardian’s signature or payment in order to participate. These requirements eliminate potential participants who are unable to provide either a signature or payment. Program modifications or exceptions to participation
requirements would ensure that all interested adolescents have a chance to participate, and overall, increase their access to a supportive community.

- **Adapt structure of service delivery in community settings.** Community stigma and distrust of certain institutions are significant barriers to access and utilization of existing health and social services. Health and social service organizations should adapt their structure of service delivery to include non-traditional methods (e.g., having more men and women walking neighborhoods) to not only increase awareness and program participation, but also better understand why current services are not being utilized and combat stigma and distrust.

- **Increase communication and coordination among organizations concerned with violence prevention efforts.** Numerous organizations are currently working with individuals and families at risk for violence or around local violence prevention efforts. Increased communication and coordination between these organizations would promote earlier intervention with individuals with an increased risk of victimization, as well as foster a larger network of individually tailored violence prevention efforts.

**Community Action**

- **Combat attitudes of violence as normative behavior and an appropriate form of conflict resolution.** The normalization of violence exists within Pittsburgh families and communities, and overall, supports a cycle of violence. Increase anti-violence initiatives that combat such attitudes; promote positive behavior modeling for children, youth, and young adults; and teach and encourage appropriate conflict resolution strategies.

- **Improve and strengthen community-police relations.** Poor community-police relations negatively impact and undermine violence prevention efforts. Increased trust, respect, and accountability between both groups is essential in order to work toward creating safe communities.

- **Distribute anti-violence and homicide awareness, education, and prevention materials throughout Pittsburgh.** Homicide and community violence information should be distributed throughout communities, local government and county agencies, and local media. Through increasing awareness and knowledge of homicide prevalence, greater attention and discussion can take place around the urgency for more effective prevention efforts.

- **Increase community participation and investment in violence prevention efforts.** Numerous community organizations, groups, and coalitions are already providing anti-violence awareness, education, and prevention throughout Allegheny County. Local governmental agencies, academic institutions, and community assets (e.g., barbershops and beauty salons, religious institutions, funeral homes) should
support these existing efforts, so that a broad coalition to confront the violence problem impacting our communities can be created.

Community Recommendations

- **Enhance data collection efforts.** Toxicology reports conducted by the medical examiner's office, victim's social media presence, and prior residence information, as well as information on surviving children and other family members, would allow for an improved review of homicides. Additionally, data collection efforts should be expanded to better account for the unique factors involved in intimate partner homicides, such as history of abuse, including Protection from Abuse (PFA) filings and prior police-involved incidents; history of substance abuse; weapons in the home; use of community resources; and previous use of mental health and other behavioral health services by perpetrator.

- **Increase police involvement.** Collaboration for the City of Pittsburgh Bureau of Police and County police and their involvement and representation in homicide review meetings is crucial to gaining a comprehensive understanding of homicides within Allegheny County. Their commitment and participation may also foster improved community relations.

- **Disseminate findings through multiple methods.** Findings should be disseminated widely, including non-traditional methods such as public safety meetings, as well as shared with neighborhoods and communities impacted by violence to encourage community engagement and dialogue around appropriate intervention and prevention efforts. Placing copies of the report in barbershops and hair salons, for the community to read.

- **Track initiative involvement.** It is important to keep track of the diverse violence prevention initiatives around Allegheny County and to observe their impacts on the homicide rate. Bringing representatives from these initiatives to the table to share with all homicide review members is essential; they may also assist in disseminating information to the community.
Community Resources

Center for Victims
3433 East Carson Suite #300
Pittsburgh, PA 15203
(412) 482-3240
24 hour crisis hotline 1-866-644-2882

Community Empowerment Association
Arts, Culture, & Training Center
7120 Kelly Street
Pittsburgh, PA 15208
(412) 371-3689

First United Methodist Church
1406 Cornell Street
McKeesport, PA 15132
(412) 672-5352

Department of Human Services
1 Smithfield Street
Pittsburgh, PA 15222
(412) 350-5701

Hill House Association
1835 Centre Avenue
Pittsburgh, PA 15219
(412) 392-4400

Hosanna House
807 Wallace Avenue
Wilkinsburg, PA 15221
(412) 243-7711

Manchester Citizens Corporation
1319 Allegheny Avenue
Pittsburgh, PA 15233
(412) 323-1743

National Council for Urban Peace and Justice
P.O. Box 99746
Pittsburgh, PA 15233
(412) 606-0059

One Hood Media
info@1hood.org
(412) 404-2347

The Pittsburgh Project
2801 North Charles Street
Pittsburgh, PA 15214
(412) 321-1678

The Corner Pittsburgh
200 Robinson St
Pittsburgh, PA 15213
(412) 683-1400

Urban League of Greater Pittsburgh
610 Wood Street
Pittsburgh, PA 15222

YMCA Homewood
7140 Bennett Street
Pittsburgh, PA 15208
(412) 243-2900

Kingsley Association
6435 Frankstown Ave
Pittsburgh, PA 15206
(412) 661-8751
kingsleyassociation.org
Appendix A. Allegheny County Zone Map

Source: http://apps.alleghenycounty.us/website/MuniList.asp
1  Aleppo Township  
2  Borough of Aspinwall  
3  Borough of Avalon  
4  Borough of Baldwin  
5  Baldwin Township  
6  Borough of Bell Acres  
7  Borough of Bellevue  
8  Borough of Ben Avon  
9  Borough of Ben Avon Hts.  
10 Municipalit[y of Bethel Park  
11 Borough of Blawnox  
12 Borough of Brackenridge  
13 Borough of Braddock  
14 Borough of Braddock Hills  
15 Borough of Bradford Woods  
16 Borough of Brentwood  
17 Borough of Bridgeville  
18 Borough of Carnegie  
19 Borough of Castle Shannon  
20 Borough of Chalfant  
21 Borough of Cheswick  
22 Borough of Churchill  
23 City of Clairton  
24 Collier Township  
25 Borough of Coraopolis  
26 Borough of Crafton  
27 Crescent Township  
28 Borough of Dormont  
29 Borough of Dravosburg  
30 City of Duquesne  
31 East Deer Township  
32 Borough of East McKeesport  
33 Borough of East Pittsburgh  
34 Borough of Edgewood  
35 Borough of Edgeworth  
36 Borough of Elizabeth  
37 Elizabeth Township  
38 Borough of Emsworth  
39 Borough of Etna  
40 Fawn Township  
41 Findlay Township  
42 Borough of Forest Hills  
43 Forward Township  
44 Borough of Fox Chapel  
45 Borough of Franklin Park  
46 Frazer Township  
47 Borough of Glassport  
48 Borough of Glenfield  
49 Borough of Green Tree  
50 Hampton Township  
51 Harmar Township  
52 Harrison Township  
53 Borough of Haysville  
54 Borough of Heidelberg  
55 Borough of Homestead  
56 Indiana Township  
57 Borough of Ingram  
58 Borough of Jefferson Hills  
59 Kennedy Township  
60 Kilbuck Township  
61 Leet Township  
62 Borough of Leetsdale  
63 Borough of Liberty  
64 Borough of Lincoln  
65 Marshall Township  
66 Town of McCandless  
67 Borough of McDonald  
68 City of McKeesport  
69 Borough of McKees Rocks  
70 Borough of Millvale  
71 Municipality of Monroeville  
72 Moon Township  
73 Municipality of Mt. Lebanon  
74 Borough of Mt. Oliver  

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Appendix B. Pittsburgh Bureau of Police Zone Map
### Appendix C. Bibliography


