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INEQUALITY, NOT VIOLENCE, IS KILLING AMERICANS AT RECORD RATES

Media coverage obsessively focuses on homicides, which are at historical lows. Meanwhile, suicides and overdoses skyrocket, quietly driving record declines in American life expectancy.

Americans think that homicides drive untimely death, a <u>belief likely fueled</u> by disproportionate news coverage of violence. A <u>recent analysis</u> of New York Times coverage found that in 2016, homicides and terrorism comprised more than half of the newspaper's coverage of death. Similarly, coverage of the deadliest mass shootings typically dominate the headlines for <u>about six days</u>.

On Aug. 8, Ali Watkins of the Times <u>claimed</u> that shootings spiked in North Brooklyn. But according to <u>NYPD data</u>, although shootings in North Brooklyn were up 10 percent this year compared to 2018, when Watkins wrote the article they were down about 27 percent in South Brooklyn, indicating an overall decline in shootings across the borough.

Homicides are at historical lows in many parts of America. In 2017, the national homicide rate was <u>5.3 per 100,000 people</u>, down from a peak of <u>10.2 per 100,000</u> in 1980. In Washington, D.C., homicides declined from <u>482 in 1991</u> to

<u>116 in 2017</u>. And in 1990 there were 13 shootings per day in New York City, while so far in 2019 there have been about two <u>shootings per day</u>.

News coverage of American mortality is <u>not aligned</u> with this reality, perhaps because homicides offer a story of conflict that can be easily dramatized and "solved," where individuals are solely responsible for interpersonal violence (and are <u>typically blamed for it</u>, despite evidence <u>linking</u> homicides to structural racism). Within this framing, the "solution" to violence is always arrest and incarceration: taking "violent people" off our streets.

Sensationalist reporting on violence <u>paves the way</u> for <u>increased fears of crime</u> among the public. In January, the Pew Research Center reported that <u>most</u> <u>Americans believe that crime is increasing</u>, despite steady declines over the last two decades. Stoking fears about violent crime can facilitate public acceptance of authoritarian responses to crime and the <u>rapid erosion of Americans' civil liberties</u>. At the same time, fear of interpersonal violence obscures widereaching structural problems that are far more dangerous: poverty, marginalization, stigma, and punishment collectively cause far more untimely deaths.

There is a real crisis of untimely death in America: In 2017, life expectancy dropped to 78.6 years, marking three consecutive years of steady decline and the longest-lasting decline since 1918. But homicide is not the culprit. According to the Centers for Disease Control and Prevention, suicides and drug overdoses fuel the decline in America's life expectancy. In 2017, there were 14,542 firearm homicides; that same year, there were more than 70,000 overdose deaths. By one estimate, uninsurance leads to at least 35,000 unnecessary deaths per year in America.

Between 1999 and 2017, the national suicide rate <u>increased</u> to 14 per 100,000 people from 10.5, making it the <u>10th most common cause of death</u> in 2017. Meanwhile, the <u>global suicide rate</u> has declined by approximately one-third since 1990.

The causes of America's suicide crisis cannot be reduced to the motivations of individuals, which might explain why suicides receive far less media coverage than homicides. Many Americans <u>lack access</u> to <u>affordable mental health care</u> (and healthcare more broadly), which <u>has been linked</u> to increases in suicide rates. The cost barrier for mental health treatment is exacerbated by rampant <u>wealth inequity</u>; <u>poverty</u> is associated with increased suicide rates. In addition, there are <u>more firearms than people</u> in America; research has shown that <u>firearm ownership increases the risk of suicide</u>, because suicide attempts with guns are more likely to be fatal. This is another reason focusing on gun homicides is a mistake: On average, firearm suicides account for <u>almost twice</u> as many deaths as homicides each year.

The <u>more than 70,000</u> drug overdose deaths in 2017 represent a 9.6 percent increase in the overdose death rate from 2016, making them a leading cause of death in America. Overdoses overlap significantly with suicides; an analysis of data from the past 13 years suggests that <u>between 20 and 30 percent</u> of opioid overdose deaths are suicides. As is the case with suicides, <u>poverty</u> and health inequity are <u>major drivers</u> of drug overdose deaths.

Ultimately, inequality and lack of material security drive America's rapidly increasing rates of <u>depression</u>, which causes tens of thousands of "<u>deaths of despair</u>" each year.

Because Americans tend to view social problems as individual moral failings that can only be solved through punishment, we are predisposed to think that homicides are a far more significant problem than they actually are. But if we are truly concerned about needless deaths, we should focus on institutional instead of personal failure.

This is a moment of nearly unprecedented inequity: the richest ten percent of American households hold <u>70 percent</u> of the nation's wealth, the richest one percent of Americans live, on average, <u>10 to 15 years longer</u> than the poorest one percent (a gap that is increasing even as the homicide rate decreases). According to 2009 data, an <u>estimated 45,000 people</u> die every year because they <u>lack health insurance</u>.

Relying on the criminal legal system to end deaths of despair only exacerbates Americans' suffering. Journalist Alisa Roth notes that America's three largest mental health providers are the jail systems in Los Angeles, Chicago, and New York City. The suicide rate in American state prisons is 20 per 100,000, and 50 per 100,000 in county jails. And thanks to the cruelty of federal legislators and prosecutors, the legality of overdose prevention sites is in question, and Americans report fear of facing criminal legal sanctions for attempting to prevent an overdose. A July 2019 study in The Lancet concluded that median household income and incarceration rates account for "almost all" variation between county overdose death rates. And in the two weeks after an individual exits incarceration, they are 40 times more likely to die of an opioid overdose compared with the general population.

Instead of relying on punishment, we should dramatically expand healthcare access. Expanding Medicaid eligibility to Americans with slightly higher incomes <u>significantly reduces overdose death rates</u>, and states that opted for Medicaid expansions saw <u>3.7 per 100,000 fewer</u> deaths per year as compared to states that declined to expand the program. Recent <u>research</u> also shows that <u>Medicaid expansions reduce recidivism rates</u> for both <u>violent and nonviolent crimes</u>, suggesting that if Americans' <u>basic needs were met</u>, violence may become <u>less pervasive</u>.

Americans are dying because we collectively choose to fund the punishment apparatus instead of <u>healthcare</u> and <u>material security for all</u>. It's time to ensure that every member of society has the resources required to live a healthy, fulfilling life.

Jonathan Ben-Menachem is a criminal justice advocate who also writes about issues including policing and the criminalization of poverty.





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