

Moderator:
Jason Adams

Featured Hosts:
Gael Strack
Michelle Morgan



Non-Fatal Strangulation: Recognizing the Injuries and Connecting Victims to Care

July 15, 2020

Note: This session will be recorded and posted on the Expert Q&A Past Sessions tab when available. The audio for today's session will play through your computer speakers.

Technical Overview

- If you are experiencing any technical issues with the audio for this session, please let us know in the Chat box.
- As with all technology, we may experience a momentary lapse in the webinar session. In the event of a problem, please be patient and remain on the line. If the problem persists, please contact our technical specialist, Bess Hoskins, by emailing her at bhoskins@ovcttac.org for technical assistance.
- Today's session will be recorded and made available on the OVC TTAC Expert Q&A Past Sessions tab, along with a copy of the PowerPoint.

Featured Hosts



Gael Strack



Michelle Morgan

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Introduction

What is non-fatal strangulation?

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Introduction

What is the purpose of strangulation?

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Introduction

It seems that strangulation in respect to domestic violence is being talked about now more than in previous years. Why is this? Hasn't it always been an issue?

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Data

What are the facts about non-fatal strangulation?

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Data

What is the probability of an abuser escalating from strangulation to murder?

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Data

Is this type of abuse seen more in a certain population group?

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Legal

What can the perpetrator be charged with?

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Legal

Should strangulation be charged as attempted murder? Why?

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Legal

How is it prosecuted?

Note: This session will be recorded and posted on the Expert Q&A Past Sessions tab when available.



Legal

Often, prosecutors won't file in cases without injury. How can we start to change this culture?

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Signs & Symptoms

What are the signs to look for with victims of strangulation?

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Signs & Symptoms

SIGNS AND SYMPTOMS OF STRANGULATION

NEUROLOGICAL

- Loss of memory
- Loss of consciousness
- Behavioral changes
- Loss of sensation
- Extremity weakness
- Difficulty speaking
- Fainting
- Urination
- Defecation
- Vomiting
- Dizziness
- Headaches

SCALP

- Petechiae
- Bald spots (from hair being pulled)
- Bump to the head (from blunt force trauma or falling to the ground)

EYES & EYELIDS

- Petechiae to eyeball
- Petechiae to eyelid
- Bloody red eyeball(s)
- Vision changes
- Droopy eyelid

EARS

- Ringing in ears
- Petechiae on earlobe(s)
- Bruising behind the ear
- Bleeding in the ear

FACE

- Petechiae (tiny red spots- slightly red or florid)
- Scratch marks
- Facial drooping
- Swelling

MOUTH

- Bruising
- Swollen tongue
- Swollen lips
- Cuts/abrasions
- Internal Petechiae

CHEST

- Chest pain
- Redness
- Scratch marks
- Bruising
- Abrasions

NECK

- Redness
- Scratch marks
- Finger nail impressions
- Bruising (thumb or fingers)
- Swelling
- Ligature Marks

VOICE & THROAT CHANGES

- Raspy or hoarse voice
- Unable to speak
- Trouble swallowing
- Painful to swallow
- Clearing the throat
- Coughing
- Nausea
- Drooling
- Sore throat
- Stridor

BREATHING CHANGES

- Difficulty breathing
- Respiratory distress
- Unable to breathe

Source: Strangulation in Intimate Partner Violence, Chapter 16, Intimate Partner Violence. Oxford University Press, Inc. 2009.

Graphics by Yesenia Aceves

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- Redness
- Scratch marks
- Bruising
- Abrasions

NECK

- Redness
- Scratch marks
- Finger nail impressions
- Bruising (thumb or fingers)
- Swelling
- Ligature or Clothing Marks

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Illustration & Graphics by Yesenia Aceves

Source: Strangulation in Intimate Partner Violence, Chapter 16, Intimate Partner Violence. Oxford University Press, Inc. 2009.

Medical

How many days after the strangulation is it still possible for someone to die from strangulation?

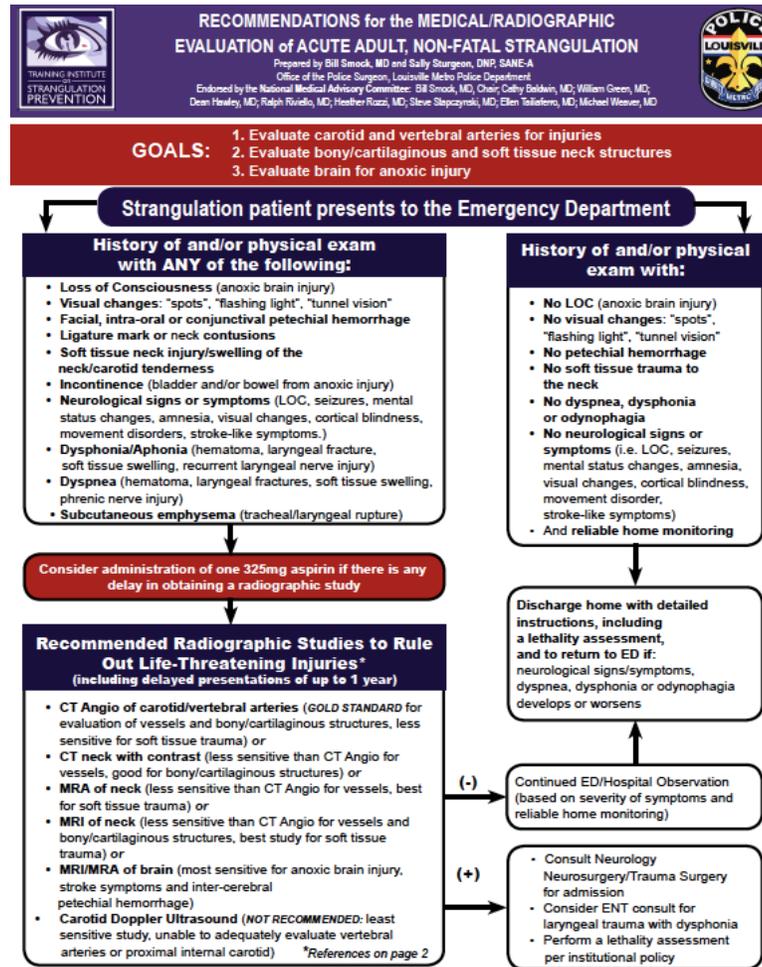
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Medical

Does every strangulation require a CT scan?

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Updated Imaging Recommendations



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(Recommendations based upon case reports, case studies, and cited medical literature)

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<https://www.familyjusticecenter.org/resources/recommendations-for-the-medical-radiographic-evaluation-of-acute-adult-non-fatal-strangulation/>

Medical

What is the process for navigating a patient to obtain evaluation for a traumatic brain injury due to strangulation?

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Advocacy

How can you recognize signs of strangulation?

Note: This session will be recorded and posted on the Expert Q&A Past Sessions tab when available.

Advocacy

What are the important questions to ask a victim following a strangulation?

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Advocacy

How do we assist victims/survivors in understanding the importance of medical help?

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Resources

Are there nationwide resources on this issue?

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<https://www.strangulationtraininginstitute.com>

Resources

The screenshot shows the website's main content area. At the top, there is a navigation bar with links for 'About Us', 'What We Do', 'Resources', 'Training', 'Impact of Strangulation Crimes', 'Donate', 'Media', 'News', and 'Shop'. On the right side of the navigation bar, there is a logo for 'ALLIANCE for HOPE INTERNATIONAL' and social media icons for 'ESCAPE', 'f', and 't'.

The main content area features a large infographic titled 'STRANGULATION IN INTIMATE PARTNER VIOLENCE FACT SHEET'. The infographic includes the following text:

- STRANGULATION:** the obstruction of blood vessels and/or airflow in the neck resulting in asphyxia.
- 1 in 4** women will experience intimate partner violence (IPV) in their lifetime.
- Of women at high risk, up to...** (with a red circle containing '68%') **will experience near-fatal strangulation by their partner.**
- Loss of consciousness can occur within...** (with a red circle containing '10')

 The infographic also lists signs and symptoms of strangulation categorized by body part:

- EYES & EYELIDS:**
 - Petechiae to eyeball
 - Petechiae to eyelid
 - Bloody red eyeball(s)
 - Vision changes
 - Droopy eyelid
- FACE:**
 - Petechiae (tiny red spots - slightly red orford)
 - Scratch marks
 - Facial drooping
 - Swelling
- CHEST:**
 - Chest pain
 - Redness
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 - Bruising
 - Swelling
 - Hoarseness
- EARS:**
 - Ringing in ears
 - Petechiae on earlobe(s)
 - Bruising behind the ear
 - Bleeding in the ear
- MOUTH:**
 - Bruising
 - Swollen tongue
 - Swollen lips
 - Cuts/abrasions
 - Internal Petechiae
- NECK:**
 - Redness
 - Scratch marks
 - Finger nail impressions
 - Bruising (thumb or finger)
 - Swelling
 - Larynx Marks

 To the right of the infographic, there are two 'Monitor Your Signs' and 'Monitor Your Symptoms' forms, each with a 'Date & Time' column and a 'Journal Your Signs/Symptoms' column. Below the infographic, there is a purple banner with the text 'Educating Survivors on Critically Important Issues Related to Strangulation' and the 'ALLIANCE for HOPE INTERNATIONAL' logo.

Join us for our four-day Advanced Strangulation Course in Fort Worth, Texas from on October 24-27, 2017. Priority will be given OVV grantees and those attending in multi-disciplinary teams from the same jurisdiction.

[Click Here to Register »](#)

This block contains four images arranged horizontally:

- A document titled 'Introduction | STRANGULATION—OBJECTIVES' with a list of objectives:
 - This module will enhance your response to calls involving strangulation by providing methods to:
 - Explain the dangers of strangulation
 - Recognize the various signs and symptoms of strangulation
 - Apply victim interview questions to your investigation of strangulation.
 - Identify and implement the actions to help a strangulation victim
- A photograph of a police officer in uniform.
- A photograph of a group of people sitting around a table in a classroom or meeting setting, engaged in discussion.
- The cover of a book titled 'INTIMATE PARTNER VIOLENCE: THE INVESTIGATION AND PROSECUTION OF STRANGULATION CASES' by Corrie Mitchell and Sandra Arbib.

Resources

Top Webinars:

- **Prosecuting Strangulation Cases without the Victim – Making Good Use of Forfeiture by Wrongdoing**
 - Loudon County Commonwealth’s Attorney’s Office, Donald Goodman, Josh Steward, Alex Rueda
- **Understanding the Rage and Lethality of Men Who Strangle**
 - Casey Gwinn, Jim Henderson, Dr. David Wexler, Dr. Oliver Williams
- **Strangulation Survivors Speak Out**
 - Michelle, Joyce and Sara with Gael Strack, Dr. William Smock & Michael Burke
- **Handling Strangulation Cases at the Frontlines**
 - Dr. Jackie Campbell, Dr. Ralph Riviello, Gael Strack, Audrey Bergin, Suzann Stewart, Kathy Bell & Michelle Morgan
- **Strangulation for Advocates with Gael Strack**
 - Sponsored by the Army Community Services Family Advocacy Program
- **Pediatric Strangulation, Part 2**
 - Dr. Cathy Baldwin, Dr. William Smock, Gael Strack, Diana Faugno, Val Sievers & Jennifer Green

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Resources



RESOURCE LIBRARY

UPCOMING TRAININGS

NEWS

RESOURCES

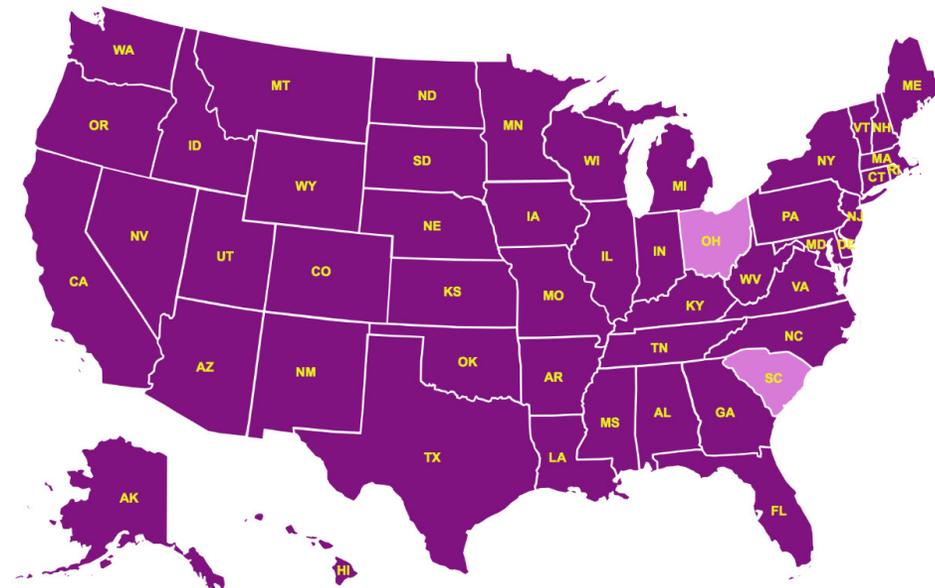
› Hospitals adopting Recommendations

› Legislation Map

- Alabama (2012)
- Alaska (2009/2019)
- Arizona (2011)
- Arkansas (2009)
- California (2011)
- Colorado (2016)
- Connecticut (2007)
- Delaware (2010)
- Federal (2013)
- Florida (2007)
- Georgia (2014)
- Hawaii (2006/2019)
- Idaho (2005/2019)
- Illinois (2010/2017)
- Indiana (2006/2017)
- Iowa (2012)

LEGISLATION MAP

[Click here to view Military Law...](#) | [Click here to view Federal Law...](#) | [Click here to view U.S. Virgin Islands...](#)



Resources

[2016 Toolkit from IAFN](#)

Non-Fatal Strangulation Documentation Toolkit



International Association of Forensic Nurses
www.ForensicNurses.org
November 2016



Contents lists available at ScienceDirect

Social Science & Medicine

journal homepage: www.elsevier.com/locate/socscimed



“Meet me at the hill where we used to park”: Interpersonal processes associated with victim recantation

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ABSTRACT

Our study used live telephone conversations between domestic violence perpetrators and victims to answer novel questions about how and why victims arrive at their decision to recant and/or refuse prosecution efforts. From October 2008 to June 2011, we conducted a qualitative study involving 25 heterosexual couples, where the male perpetrator was being held in a Detention Facility (in the U.S.) for felony-level domestic violence and made telephone calls to his female victim during the pre-prosecution period. We used 30–192 min of conversational data for each couple to examine: 1) interpersonal processes associated with the victim's intention to recant; and 2) the couple's construction of the recantation plan once the victim intended to recant. We used constructivist grounded theory to guide data analysis, which allowed for the construction of a novel recantation framework, while acknowledging the underlying coercive interpersonal dynamic. Our results showed that consistently across couples, a victim's recantation intention was foremost influenced by the perpetrator's appeals to the victim's sympathy through descriptions of his suffering from mental and physical problems, intolerable jail conditions, and life without her. The intention was solidified by the perpetrator's minimization of the abuse, and the couple invoking images of life without each other. Once the victim arrived at her decision to recant, the couple constructed the recantation plan by redefining the abuse event to protect the perpetrator, blaming the State for the couple's separation, and exchanging specific instructions on what should be said or done. Our findings advance scientific knowledge through identifying, in the context of ongoing interactions, strategies perpetrators used—sympathy appeals and minimization—to successfully persuade their victim and strategies the couple used to preserve their relationship. Practitioners must double their efforts to hold perpetrators accountable for their actions, and efforts made to link victims to trusted advocates who can help them defend against perpetrators' sophisticated techniques.

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Resources

Recantation Wheel (2011)

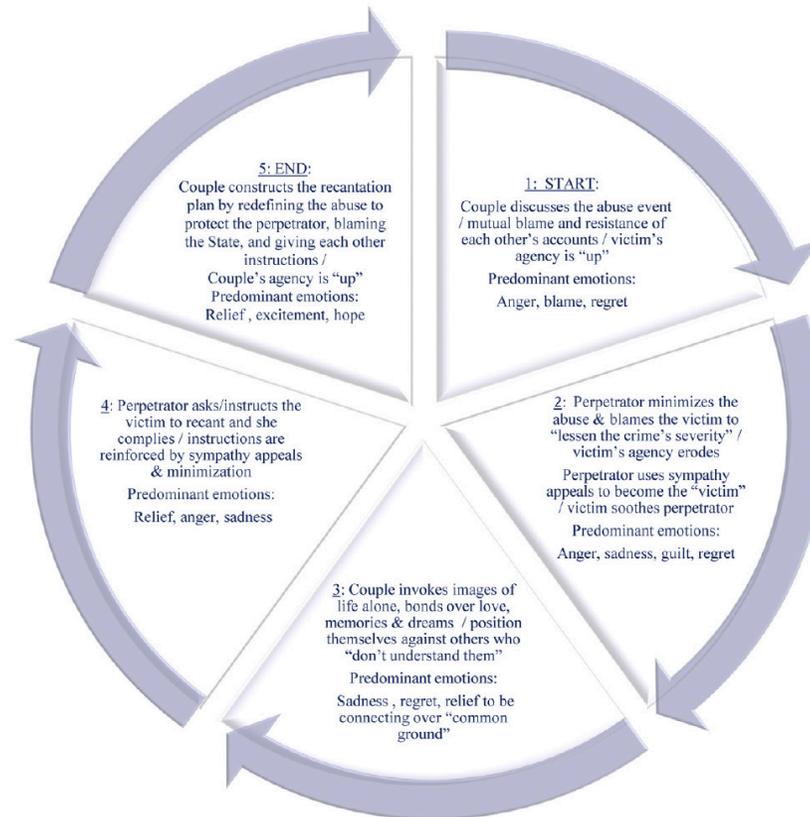


Fig. 1. : Recantation Process.

Resources

5-Stages of Witness Intimidation – Study of Jail Calls Conducted Ohio/Washington (2011)

1. The Victim has Decided To Press Charges of Domestic Violence
2. The Abuser Appeals to His Victim's Sympathy, Love, Compassion
3. The Abuser Creates an "Us Against Them" Bond
4. The Abuser Asks Her To Recant Her Statement
5. The Abuser and Victim Plan What She Will Say About Not Pressing Charges

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Resources

Safety Planning with the Science of HOPE

THE VIGOR

Developed by Sherry Hamby, Ph.D. & Sarah Clark

The Victim Inventory of Goals, Options, & Risks

A Safety Planning Tool to Help Survivors of Violence Assess Their Risk and Decide how to Cope

The VIGOR helps you to develop a personalized safety plan for coping with violence and other life problems and can be used multiple times as your situation changes.

Of course, some problems are outside any one person's individual control. Especially, your partner's behavior is outside of your control. The outcomes of these steps cannot be guaranteed.

Resources

HELPS

H Have you ever **H**it your **H**ead or been **H**it on the **H**ead? Yes No

Note: Prompt client to think about all incidents that may have occurred at any age, even those that did not seem serious: vehicle accidents, falls, assault, abuse, sports, etc. Screen for domestic violence and child abuse. A TBI can also occur from violent shaking of the head, such as whiplash or being shaken as a child.

E Were you ever seen in the **E**mergency room, hospital, or by a doctor because of an injury to your head? Yes No

Note: Many people are seen for treatment. However, there are those who cannot afford treatment, or who do not think they require medical attention.

L Did you ever **L**ose consciousness or experience a period of being dazed and confused?

Yes No

Note: While significant in helping to determine the extent of the injury, many people with minor brain injury may not lose consciousness, yet still have difficulties as a result of their injury.

P Do you experience any of these **P**roblems in your daily life? Yes No

Note: Other problems may include: visual, auditory, sensory impairments, paralysis, weakness of any extremity, balance problems, fatigue, apathy, silliness, impulsivity, mood swings, irritability, decreased self-awareness, decreased ability to learn new information or retrieve old information, shift from one topic to another, set goals or plan tasks, monitor own behavior and difficulty with abstract thinking.

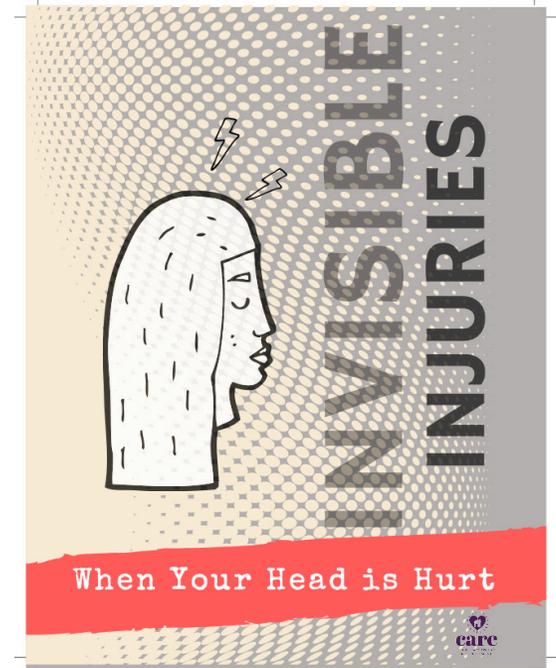
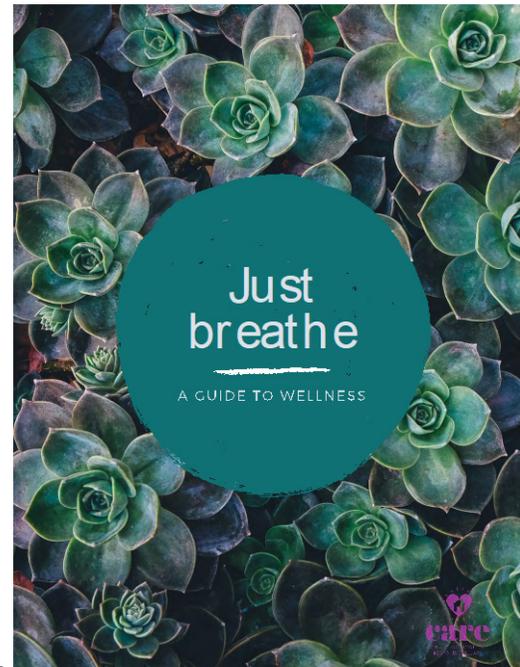
- | | |
|---|--|
| <input type="checkbox"/> headaches | <input type="checkbox"/> difficulty reading, writing, calculating |
| <input type="checkbox"/> dizziness | <input type="checkbox"/> poor problem solving |
| <input type="checkbox"/> anxiety | <input type="checkbox"/> difficulty performing your job/school work |
| <input type="checkbox"/> depression | <input type="checkbox"/> change in relationships with others |
| <input type="checkbox"/> difficulty concentrating | <input type="checkbox"/> poor judgment (being fired from job, arrests, fights) |
| <input type="checkbox"/> difficulty remembering | |

S Any significant **S**icknesses? Yes No

Note: Traumatic brain injury implies a physical blow to the head, but acquired brain injury may also be caused by medical conditions, such as: brain tumor, meningitis, stroke, heart attack, seizures, high fever, etc. Also screen for instances of oxygen deprivation such as near drowning or near suffocation.

Resources

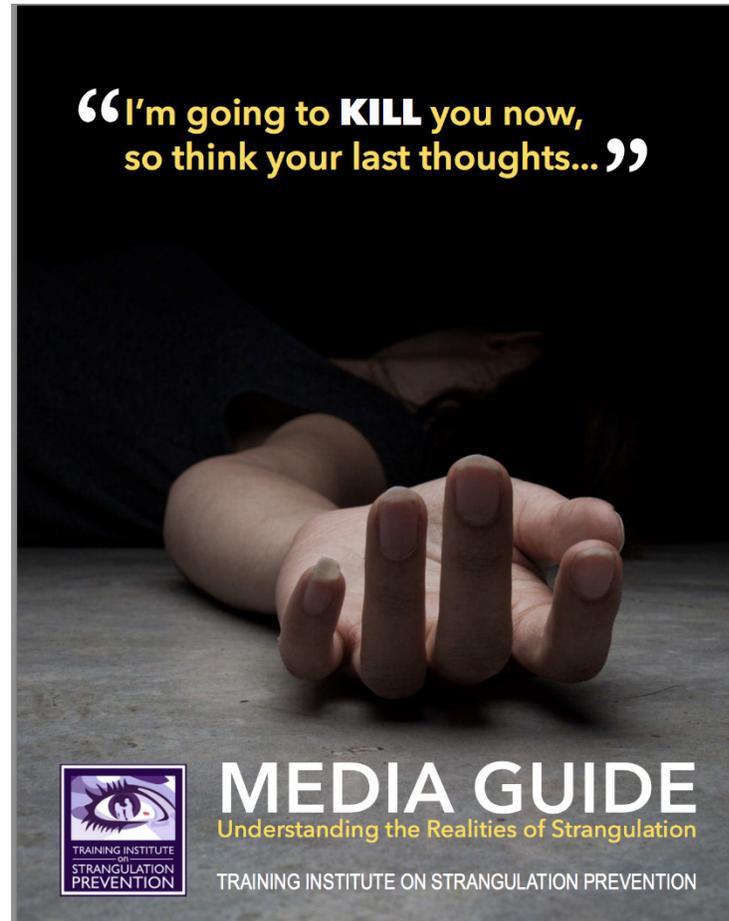
New TBI Resources from Ohio DV Network



Available for download free at www.odvn.org
on the home page under ODVN Cares

Resources

Media Guide:



- Special Thanks to Rachel Frost and Yesenia Aceves
- Media Kit:
 - Background about strangulation
 - Statistics
 - Links to resources like our Factsheet
 - Language
 - Quotes from professionals and survivors
 - Things to say to survivors and calling the Hotline

Resources



ONLY YOU DECIDE WHAT GOES ON YOUR NECK

TALK WITH YOUR HEALTHCARE PROVIDER TODAY IF SOMEONE HAS PUT THEIR HANDS OR AN OBJECT AROUND YOUR NECK

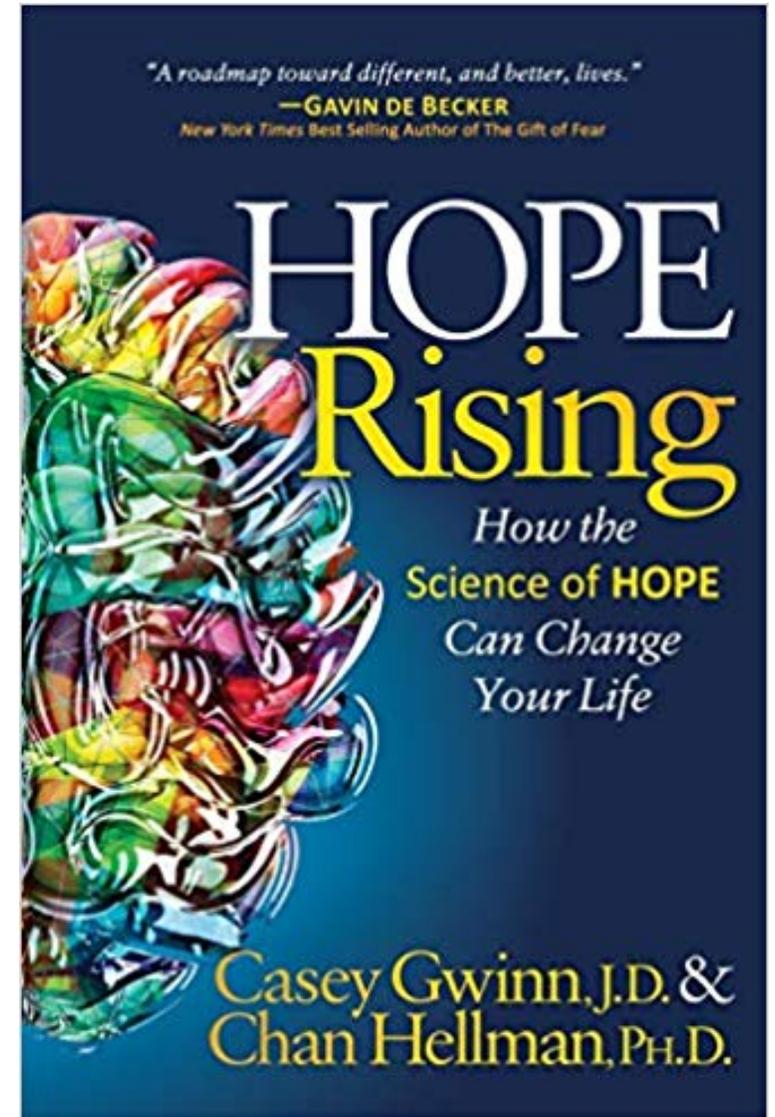
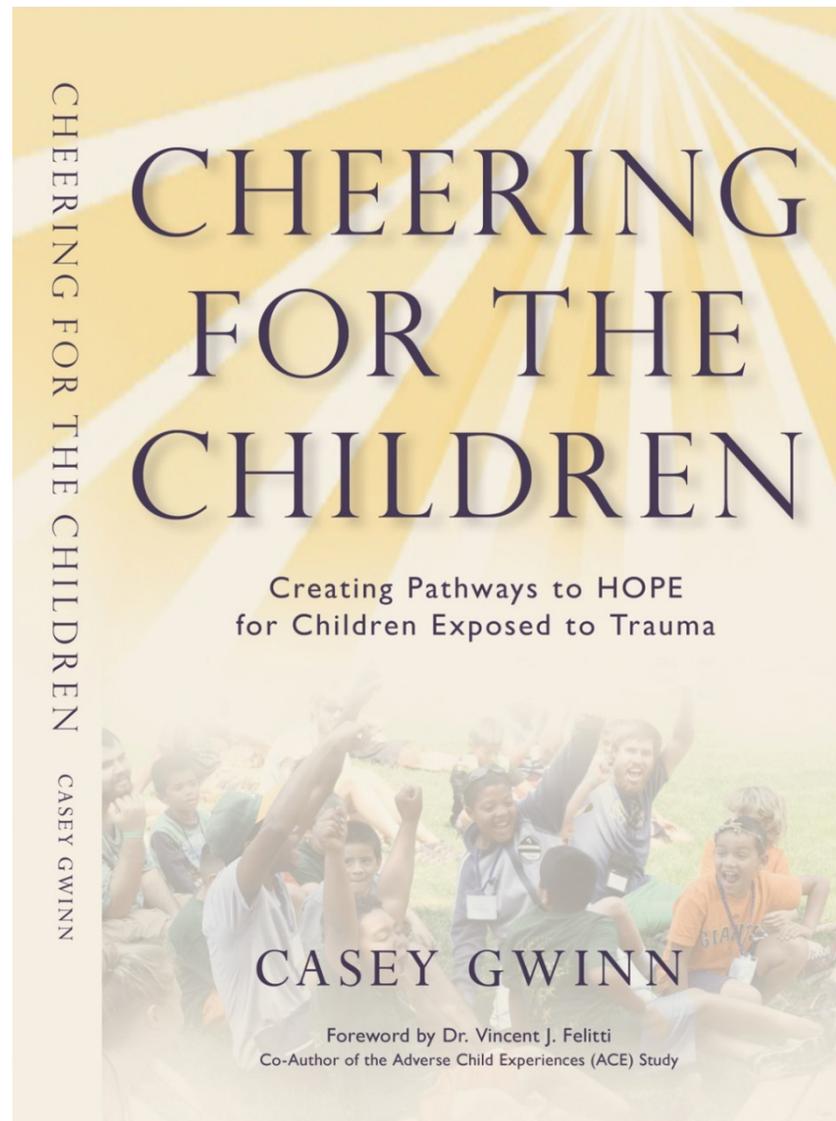
 San Diego County Health Center about your safety and wellness.

National Domestic Violence Hotline
1-888-789-7233 (24 Hour/Confidential)
WWW.THEHOTLINE.ORG

2-1-1 San Diego
(24 Hour/Confidential)
WWW.211.ORG

Resources



It's easy to join our mailing list!
Just send your email address by text message:

Text

HOPEGIVER

To **22828** to get started.

Message and data rates may apply.

Next Month

Topic: Supportive Services Available to Survivors of Sexual Assault in the Military – A Military- and Community-Based Collaboration

Date: August 19, 2020

Featured Host: Pamela Jacobs

Note: This session will be recorded and posted on the Expert Q&A Past Sessions tab when available.



Before You Leave...

Download a [certificate of attendance](#) for today's session from our Downloads pod.

For more [resources related to this topic](#), please see the Additional Links pod.

Note: This session will be recorded and posted on the Expert Q&A Past Sessions tab when available.

Thank You!

If your question was not addressed in this session, you can send your question to our hosts or request additional information by email:

Gael Strack: gael@allianceforhope.com

Michelle Morgan: mmorgan@onesafeplace.org

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