

The Importance of Appropriate Strangulation Response

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Ms. McAllister serves as the Domestic Violence Resource and Training Coordinator for the 26th Judicial District. She provides referrals to members of the public to various support agencies and hosts various domestic violence trainings – including the coordination of the first and second annual Mecklenburg County Domestic Violence Conferences. She is also credentialed by National Organization for Victim Assistance's National Advocacy Leadership Center, and also holds certifications in corporate training and Mental Health First Aid.

She prides herself on her devotion to equal access to justice, belief in community connectedness, and commitment to domestic violence response issues in order to eradicate gender-based violence.

Domestic Violence Resource/Training Coordinator

- Designed to bridge the gap between community resources and the court system by:
 - Providing training to criminal justice system professionals
 - Developing informational outreach workshops for victims and litigants
 - Making referrals to appropriate agencies for crisis intervention and ongoing support
 - Planning an annual Domestic Violence Conference for Mecklenburg and surrounding counties
- Operates through the Mecklenburg County Family Court Administration

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Objectives

- **Define domestic violence** under NC law and using common service provider understandings
- **Increase understanding** of how strangulation impacts lethality and community safety
- **Discuss strategies** for courts to consider when responding to those impacted by strangulation, as either victim or perpetrator

Defining Domestic Violence

Defining Domestic Violence

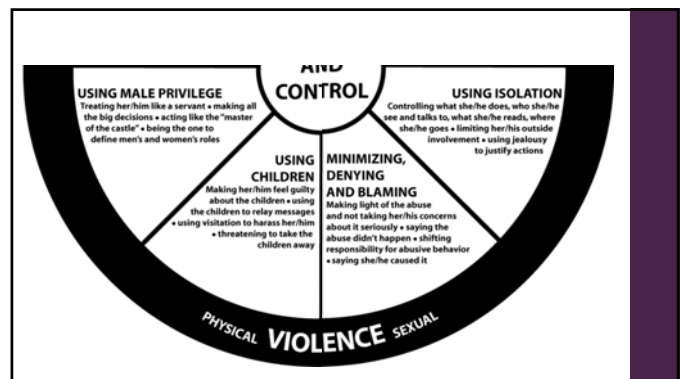
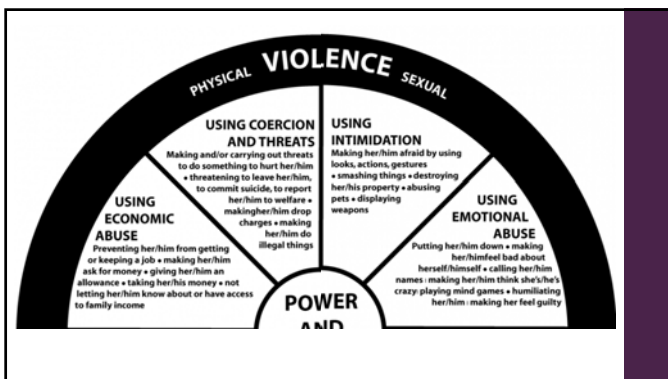
- **NCGS 50B-1:** (1) Attempting to cause or intentionally causing bodily injury; or (2) Placing the aggrieved party or a member of the aggrieved party's family or household in fear of imminent serious bodily injury or continued harassment, that rises to such a level as to inflict substantial emotional distress; or (3) Committing any act defined in G.S. 14-27.21 through G.S. 14-27.33
- Domestic violence: a **pattern** of coercive behavior in which **one** person attempts to **control** another in a relationship through threats or actual use of tactics, which may include any or all of the following: physical, sexual, economic, emotional, verbal, and psychological abuse.
- **This behavior may occur during the relationship or after the relationship**

Domestic Violence Statistics

- Every 9 seconds in the US, a woman is assaulted or beaten
- Intimate partner violence accounts for more than 15% of all violent crime
- According to the DOJ, 76% of victimizations by intimate partners between 2003-2012 were against women
- Most abusers are violent only with their partners. The only exception is that abusers are more likely to physically abuse their children than non-abuser



Adapted from the original *Power and Control Wheel*, developed by Domestic Abusive Intervention Program in Duluth, MN.



DV Homicides in NC

- 2007: **86 murders**
- 2008: **82 murders**
- 2009: **72 murders**
- 2011: **74 murders**
- 2012: **63 murders**
- 2013: **67 murders**
- 2014: **64 murders**
- 2015: **69 murders**
- 2016: **82 murders**
- 2017: **79 murders**

The North Carolina Coalition Against Domestic Violence (NCCADV) tracks deaths which are a result of intimate partner violence. This includes victims killed directly by their current or former intimate partner, as well as third parties killed as a result of intimate partner violence.

Strangulation

Legal Definition

- NCGS 14-32.4: **Assault Inflicting Serious Bodily Injury; Strangulation**
- Commits
- an Assault
- On Another *and*
- Inflicts Physical Injury
- By Strangulation

Strangulation:

A form of **asphyxia** characterized by closure of the blood vessels and/or air passages of the neck as a result of external pressure on the neck

- Suffocation** - obstructing oxygen from getting into the lungs
- Sealing off the mouth and nose by manual compression
 - Duct tape over face
 - Head inside plastic bag
 - Pillow over mouth and nose
 - Sitting on chest

Strangulation Understandings

- Strangulation is one of the most **terrorizing** and **lethal** forms of violence – increasing a victim's risk of homicide by her abuser by 750% (*Glass et al, Journal of Emergency Medicine*)
- Strangulation often leaves no visible "evidence" – and even when it does, it may take time to appear
 - There are often significant and delayed injuries
 - Delayed fatality – death may occur days, weeks, or years after an assault due to carotid artery dissection or respiratory complications
- Strangulation is one of the **biggest predictors of homicide by an intimate partner**
- Correlation between men who strangle their partners and men who commit mass killings or homicides on law enforcement officers
 - Recent study: 40-60% of known cop killers have a history of perpetuating strangulation against a current or former intimate partner

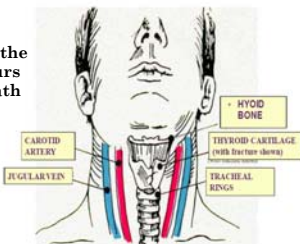


Strangulation is not just a domestic violence matter, but also a matter of **public** and **community** safety

Anatomy: Vessels, Arteries, Veins

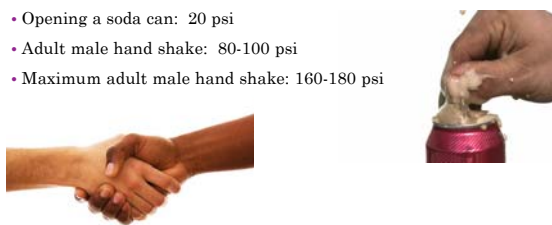
Without sufficient oxygen to the brain, unconsciousness occurs within **10 seconds**, brain death within **4 minutes**.

- 4lbs of pressure to block jugular vein
- 11lbs of pressure to block the carotid arteries
- 33lbs of pressure to block to trachea



Context: Applied Pressure

- Handgun trigger pull: 6 psi
- Opening a soda can: 20 psi
- Adult male hand shake: 80-100 psi
- Maximum adult male hand shake: 160-180 psi



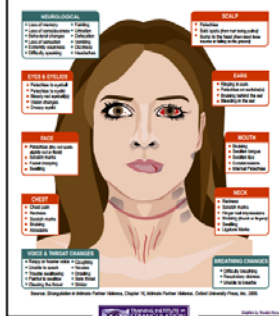
Lethal Progression

- **6 - 10 seconds** – unconscious (brain cells begin to die)
- **15+ seconds** – loss of bladder control
- **30+ seconds** – loss of bowel control
- **?? seconds** – point of no return
- Amount of brain cell death will depend on location of oxygen deprivation in the brain, length of unconsciousness, age, intoxication, prior anoxic episodes
- **? Minutes** – death (no controlled human studies)

- **0 seconds: pressure applied**
- **6-8 seconds: rendered unconscious**
- **14 seconds: anoxic seizure**



SIGNS AND SYMPTOMS OF STRANGULATION



- Raspy voice (50% of cases involve voice changes)
- Neck pain or sore throat
- Difficulty swallowing
- Difficulty breathing
- Nausea / Vomiting
- Dizziness
- Blurred vision / seeing spots
- Tinnitus
- Memory loss

Some signs of strangulation



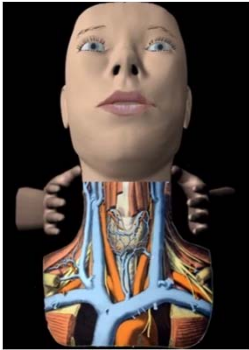
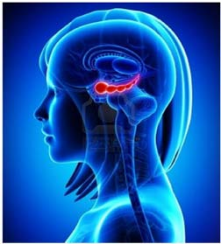
Bruising and petechiae are not usually visible immediately afterwards, but can be seen later.



Pronounced petechiae in the whites of the eyes and on the cheeks/face.



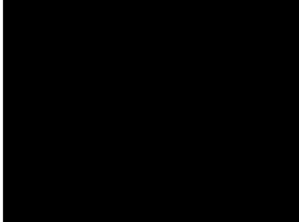
- Bruising / thumb prints (may increase over time)
- Red linear marks
- Petechiae
- Scrapes, scratches, claw marks
- Redness in eyes
- Bruising behind ears
- Neck swelling

- **Hippocampus:** critical for forming, organizing, and storing memory
- Most sensitive to lack of oxygen
- No blood flow = cells dying, brain not working, and **no memory**

Stages of Victim Response

- **Disbelief** – intense fear and severe pain due to air / blood supply loss
- **Realization**
- **Primal response** – fight, flight, or freeze!
- **Resignation** – belief that they are going to die, often cite thinking of children



Significance and Prevalence of Strangulation

- Symbolizes the ultimate use of power and control –
“I can kill you”
- If the victim is being strangled, she has **probably** been the victim of abuse for some time and the abuse is probably severe
 - One study showed that 68% of women in one shelter had been strangled and each had been strangled **over 5 times** in her relationship (*Journal of Emergency Medicine*)
 - Chicago study of 57 female DV homicide victims showed that 53% of them had previously been strangled by her partner

Court Considerations

National Case Law – Published 2014

- **Evidence to support strangulation**
 - Evidence of a "sore throat" due to strangulation assault is circumstantial evidence that supports a finding of "traumatic condition" (People v. Romero, No. B217891, 2011 WL 322393, (1Cal. Ct. App. 2011)).
- **No need to prove difficulty breathing**
 - In State v. Williams, the North Carolina Court of Appeals held that the State did not have to prove that a victim had difficulty breathing to satisfy the statutory requirements for assault by strangulation. State v. Williams, 689 S.E.2d 412 (N.C. App. 2009).
 - The victim testified that she felt the defendant was trying to crush her throat, that he pushed down with his weight on her neck with his foot, and that she thought he was trying to "chok[e] her out" or make her go unconscious, and that she thought she was going to die
- **No need to show complete inability to breathe**
 - State was not required to prove that a victim had a complete inability to breathe in order to prove the elements of assault by strangulation. State v. Braxton, 183 N.C. App. 36 (2007). Victim testified to four separate incidents in which defendant grabbed her by the throat, causing her to have difficulty breathing. Id.

Consider Expert Witnesses

Federal Rule of Evidence 702

• "If scientific, technical or other specialized knowledge will assist the trier of fact to understand the evidence or to determine a fact in issue, a witness qualified as an expert by **knowledge, skill, experience, training or education**, may testify thereto in the form of an opinion or otherwise."

- Emergency room physician
- Medical Examiner
- Certified Forensic Pathologist
- Former prosecutors
- Former DA Investigators
- Former Defense Attorneys
- Forensic/SANE nurse
- Paramedic
- DV Detectives/Law Enforcement Officers
- Advocates

Other Considerations for Judges

- **Understand victim behaviors**
 - DVPO Motions to Modify/Set Aside
- **Trauma-informed Bench Tools**
 - Lethality Assessment Screen
 - Bail enhancement
- **Participate in Coordinated Community Response (CCR) Teams/Task Forces**
 - Consider internal policies and processes
 - Duty to Warn
- **Host or attend domestic violence related training**

DOMESTIC VIOLENCE LETHALITY SCREEN FOR FIRST RESPONDERS

Date: _____ Case #: _____

Officer: _____

You did not answer any of the questions.

If any of Questions #1-3 automatically triggers the protocol referral.

Is a weapon against you or threatened you with a weapon? Yes No

Do you kill you or your children? Yes No

Do you try to kill you? Yes No

Questions #1-3, but positive responses to at least four of Questions #4-6

Can he/she get one easily? Yes No

Is your? Yes No

Understanding Strangulation

- **Strangulation is difficult to prove**
 - Visible injuries present in less than 50% of cases
- **Strangulation can have long-term impacts**
- **Victims underestimate risk, perpetrators minimize act**
- **Victims may recant or appear to be "difficult" witnesses and may not participate in prosecution**
 - Physiological reasons – memory impacted by assault
 - Lack of long-term resources
- **Ongoing training is necessary**

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