

2017

San Diego County

Approved by the Chiefs of Police, Sheriff, San Diego
District Attorney and San Diego City Attorney on
February 1, 2017

STRANGULATION PROTOCOL

Developed and approved in collaboration with criminal justice, healthcare, and social service staff from organizations throughout San Diego.

OBJECTIVE

The San Diego County Strangulation Protocol is adopted to increase public safety, promote public health, and to ultimately save lives. By improving the detection and documentation of domestic violence strangulation cases, San Diego County can better assist victims and hold offenders accountable for these serious criminal acts.

This protocol is not intended to address every situation or every potential issue, nor is it intended to substitute for individual officer discretion or individual departmental policies that are consistent with state law.

INTRODUCTION

From 2008-2015 in San Diego County, the cause of death in 15% of domestic violence homicide cases involved the intimate partner victim being strangled or suffocated. Non-fatal strangulation is a significant risk factor for predicting future homicide in family abuse cases including domestic violence, elder abuse, and child abuse. Female survivors of non-fatal strangulation are more than 600% more likely to become a victim of attempted homicide and more than 700% more likely to become a victim of homicide.¹ Often, strangulation leaves no visible signs of injury. In a study of 300 strangulation cases in San Diego County, 50% of the cases had no visible injury at all, and in 35% of the cases, the injury was not sufficient to photograph.² In addition, many victims of strangulation don't receive the medical care they need. In the same study of 300 strangulation cases in San Diego, only 3% of the survivors in that study sought medical attention after being strangled. Comprehensive evidence collection and survivor interviews along with proper medical care can make a difference to the health and well-being of victims and by better holding perpetrators accountable.

The California Legislature recognizes strangulation as a serious threat to the health and well-being of the citizens of California. In 2012, California Penal Code section 273.5 was amended to specifically include injuries as a result of strangulation and suffocation as grounds for felony prosecution:

Penal Code 273.5 (d): "...traumatic condition" means a condition of the body, such as a wound, or external or internal injury, including, but not limited to, *injury as a result of strangulation or suffocation*, whether of a minor or serious nature, caused by a physical force. For purposes of this section, "*strangulation*" and "*suffocation*"

¹ Glass, N., Laughon, K., Campnell, J., Chair, A., Block, C., Hanson, G., Sharps, P. Taliaferro, E. (2009, Oct). Non-fatal strangulation is an important risk factor for homicide of women. *Journal of Emergency Medicine*, 35(3).

² Strack, G., Gwinn, C., Hawley, D., Green, W., Smock, B., & Riviello, R. (2014, Aug/Sept). Why Didn't Someone Tell Me? Health Consequences of Strangulation Assaults for Survivors. *Domestic Violence Report*, 19 (6), pp. 87-90.

include impeding the normal breathing or circulation of the blood of a person by applying pressure on the throat or neck.” [Penal Code section 273.5(d)]

In 2016, San Diego County law enforcement professionals began a community dialogue about the dangers and health risks of domestic violence strangulation. This conversation involved looking inward at current practices and current responses to strangulation cases and determining where improvement could be made. After a series of meetings and input gathered from personnel across the county, this protocol developed.

PROTOCOL OVERVIEW

- San Diego County law enforcement professionals should be trained in the dangers of strangulation to victims and the potential symptomology that might indicate the need for emergency medical intervention.
- Dispatchers and 911 call operators taking calls of domestic violence should, where circumstances reasonably dictate, consider asking the caller if they were strangled or “choked.”
- First responding law enforcement personnel should ask all questions included on the “*San Diego Countywide Domestic Violence Supplemental*” form, approved by the Chiefs of Police, Sheriff, San Diego District Attorney and San Diego City Attorney. Note that the amended version now includes a specific section and question pertaining to strangulation. (See Addendum A: *San Diego Countywide Domestic Violence Supplemental, page 2 of 2*)
- When law enforcement personnel learn strangulation may have been involved in the assault, it is strongly recommended *The San Diego County Strangulation Documentation Form* be completed. (See Addendum B: *San Diego Countywide Strangulation Documentation Form*)
- Strangulation, regardless of whether visible injuries are initially apparent, should be treated as a serious condition. Paramedics may need to be requested and medical evaluation should be strongly encouraged.
- Prosecutors should, when feasible and appropriate, consider felony issuance of strangulation cases.
- The San Diego City Attorney’s office and the San Diego District Attorney’s office will provide training resources and guidance as related to this protocol, and will

help agencies provide initial and ongoing training to their personnel. The scope of the training should initially include first responders, dispatchers, follow-up investigators, and prosecutors. In the future, agencies providing refresher training to their personnel may seek the assistance of their local prosecutors for training resources, expertise, and guidance.

DEFINITIONS

Strangulation: A form of asphyxia characterized by the intentional closure of blood vessels and/or air passages of the neck as a result of external pressure applied to the neck sufficient to cause disruption of blood flow to or from the brain or disruption of air exchange resulting in a lack of adequate oxygen delivery to the brain.

- **Manual Strangulation:** Use of the fingers or other extremity.
- **Ligature Strangulation:** Use of some form of cord-like object around the neck without suspension.
- **Strangulation by Hanging:** Use of some form of cord-like object around the neck with suspension.

Suffocation: The mechanical obstruction of airflow into the mouth and/or nostrils, as might occur by covering the mouth and nose with a hand, pillow, gag object or a plastic bag. Suffocation can be partial or complete, where partial indicates that the victim is able to inhale some (but not enough) air. In general, asphyxia due to suffocation requires at least partial obstruction of both nasal cavities and the mouth.

Asphyxia: A condition arising when the body is deprived of oxygen, causing unconsciousness and ultimately death.

Positional Asphyxiation: Asphyxia caused by compression of the face, neck, chest and/or abdomen sufficient to making it difficult or impossible to breathe (e.g. sitting on victim's chest).

Note: When strangulation and suffocation are combined, damage to the brain is accelerated which increases the chance of fatality.

“Choking” vs. “Strangulation:” “Choking” refers to a physical obstruction of the windpipe (e.g. food) resulting in a blockage that prevents the normal flow of air.

“Strangulation” is often an intentional form of abuse due to *external* pressure applied to the neck. Although victims or witnesses may use the term “choking” when describing an incident, law enforcement should be aware of this important distinction since many victims/witnesses frequently do not understand what the medical term “strangulation” entails. This is why it is imperative that a broad, open-ended question such as, “During the incident, did anyone put anything around or against your neck or face?,” be asked during the initial investigation.

OVERVIEW OF STRANGULATION

Danger of Strangulation: Death or life threatening injuries can rapidly develop when the jugular veins, carotid arteries, and/or trachea are compressed with enough force to prevent blood or air flow, thus depriving the brain of oxygen. Death and serious health consequences from strangulation are also caused by: (1) Traumatic/swelling in the surrounding neck tissue that can close the airway; (2) Internal bleeding in the neck that can compress the airway or obstruct blood flow; (3) Fractured larynx or trachea that can cause airway obstruction or air leakage into the overlying tissues; (4) Stroke when blood clots from damaged blood vessels break off and travel to the brain; and (5) Lung damage.

Jugular Veins: Transport deoxygenated blood from the brain back to the heart. Pressure on these large vessels reduces blood return causing vascular congestion and smaller blood vessels can burst, which can lead to depressed respirations, unconsciousness and asphyxia. An adult can be rendered unconscious in 5-10 seconds with as little as 4.4 pounds per square inch (PSI) applied to the jugular veins.

Carotid Arteries: Supply oxygenated blood from the heart to the brain. Pressure on these vessels prevents blood flow to the brain and can stimulate the carotid sinus (a nerve sensor in the artery), which can cause dramatic slowing of the pulse. An adult can be rendered unconscious in 5-10 seconds with as little as 11 PSI of consistent pressure.³

³ DiMaio VJ and DiMaio D, Forensic Pathology, Second Edition. Boca Raton: CRC Press, 2001, pp. 245-236; Camps FE and Hunt AC, Pressure on the neck. *J Forens Med* 1959; 6:116-135, and Ikai M et al., Physiological studies on choking in judo, in *Bulletin of the Association for Scientific Studies on Judo, Part 1, Studies in General*, 1958; pp. 1-12; Brouardel P, Cited in Polson CJ, Gee DJ, Knight B, *The Essentials of Forensic Medicine*. New York: Pergamon Press, 1985.

Trachea: Transports air/oxygen to the lungs. Pressure to the trachea blocks airflow and disrupts this process. Approximately 30 pounds per square inch of pressure (PSI) can compress and block an adult trachea.

Strangulation injuries are frequently not visible. Domestic Violence professionals must investigate further to gather evidence related to strangulation.

Visible Injuries: Although visible injuries are not often present, it is imperative to document any that do exist. Visible injuries can include but are not limited to:

- Vertical fingernail scratch marks on the victim – indication of self-inflicted defensive wounds. Victim attempts to release the suspect's grasp around the neck.
- Half-moon shaped abrasions, generally less than one centimeter in size, on the back of the victim's neck (potentially under the hair) may provide evidence the suspect's hands were wrapped around the neck.
- Bite marks on the suspect may indicate the victim's attempts to get the suspect to release his/her grip. The victim may *not* remember biting the suspect. Some bite areas may include the suspect's bicep(s), forearm(s), shoulder(s), and upper chest.
- Head injuries to the victim may happen when the suspect hits the victim's head on the floor or wall during strangulation.
- Swelling (edema) of the victim's neck, lips and/or tongue. Describe these in the narrative, as they may not photograph well.
- Bruising to the neck, such as a pressure point from the suspect's thumb(s) on the neck or from a ligature. Often this bruising does not appear right away and may appear as redness on the neck.
- Petechiae may be present in some cases. These are pin point red or red-purple non-blanching dots that may be seen on the earlobes, eyelids, eyes, lips, cheeks, behind the ears, or elsewhere on the face or neck. Petechiae are caused when the jugular vein is blocked by pressure and capillaries (tiny blood vessels) burst. This same phenomena can also occur in the brain of strangulation victims and they are therefore it is extremely important to document their presence.

Non-Visible Injuries: This evidence can be critical to the case, as visible injuries are often not present. It is important to ask victims about how they felt during the incident, after, and now, since experiences may change with time. Some victims may experience symptoms later.

- Ask about whether breathing changed or was affected, (e.g. shallow or rapid breathing.)
- Ask about dizziness, nausea, headaches, or feeling disoriented or faint.
- Ask about coughing, urination, defecation, vomiting, or dry heaving.

- Ask whether the victim lost consciousness, blacked-out, felt limp, experienced head-throbbing, numbness or disorientation.
- Tenderness in neck, painful to swallow, sore or scratchy throat or any other pain.
- Note whether the victim's voice is raspy or hoarse.
- Ask about loss of hearing during or after strangulation or suffocation (e.g. muffled, ringing, gurgling, or it went silent).
- Ask about any changes to vision (e.g. saw stars, vision was blurry, room closed in).
- Ask about tingling in lips, arms, and legs.
- Ask whether the victim coughed up any blood.

It is important to also ask the victim to describe characteristics about the suspect during the assault. Questions can include but are not limited to:

- In what direction did the suspect look during the assault?
- What did the suspect look like while strangling you?
- Did the suspect threaten to hurt or harm you during the assault?
- What did the suspect say before, during and after the assault?

SAN DIEGO COUNTY LAW ENFORCEMENT RESPONSE TO DOMESTIC VIOLENCE STRANGULATION CASES

911 OPERATOR/DISPATCH

1. 911 operators taking calls of domestic violence incidents should consider when appropriate asking the caller if they were strangled or “choked.”
2. Because incidents of strangulation can result in delayed medical complications, or death⁴, dispatchers should consider the specific circumstances of each incident and evaluate the need to call for emergency medical aid. Circumstances that might indicate a need to call for emergency aid include, but are not necessarily limited to:

⁴ Dooling EC, Richardson EP: Delayed Encephalopathy After Strangling: Arch Neurol 1976; 33: 196-199; Kuriloff DB, Pincus RL: Delayed Airway Obstruction and Neck Abscess Following Manual Strangulation. Ann Otol Rhinol Laryngol. 1989; 98:824-7;

- loss of breath or difficulty breathing
- loss of consciousness
- memory loss
- dizziness, nausea, headache, or disorientation during or after the incident
- vision loss or vision changes
- hearing loss or hearing changes
- voice changes or difficulty speaking
- coughing or difficulty swallowing or sensation of something in the throat
- sore throat
- urination or defecation
- problems with balance or coordination
- pain or stiffness to the neck

FIRST RESPONDER DUTIES

1. First responders to all domestic violence calls shall continue to ask the questions in the *San Diego Countywide Domestic Violence Supplemental* form, which now includes a specific section with a question pertaining to strangulation. (See Addendum A)
2. Because incidents of strangulation can result in delayed medical complications or death, first responders should carefully consider the specific circumstance of each incident and evaluate the need to call for emergency medical aid in all cases involving strangulation. Circumstances that might indicate a need to call for medical aid include, but are not necessarily limited to:
 - loss of breath or difficulty breathing
 - loss of consciousness
 - memory loss
 - dizziness, nausea, headache, or disorientation during or after the incident
 - vision loss or vision changes
 - hearing loss or hearing changes
 - voice changes or difficulty speaking
 - coughing or difficulty swallowing or sensation of something in the throat
 - sore throat
 - urination or defecation
 - problems with balance or coordination

- pain or stiffness to the neck

Many victims will decline medical aid. If there is an obvious concern for the victim's health, or if the strangulation just occurred, first responders should consider requesting paramedics regardless of the victim's desire. Upon medics' arrival, if the victim declines medical attention, it should be noted in the report. If the strangulation was non-recent (e.g. happened on a prior date), first responders should still strongly recommend the victim seek medical attention since late complications of strangulation are not unusual.

3. If the answer to the strangulation question on the San Diego Countywide DV Supplemental is "yes⁵," first responders should consider completing the San Diego Countywide Strangulation Documentation Form (see Addendum B) in order to document additional signs and symptoms of the strangulation. In some agencies this task may be followed-up with investigative personnel.
4. Refer the victim to a domestic violence advocacy agency and/or the San Diego Family Justice Center when feasible. (See addendums C and D for countywide domestic violence resources)

Documenting the victim's **emotional demeanor** is also important. Capture these observations on *The San Diego Countywide Domestic Violence Supplemental* and/or in the narrative of the police report.

Victims will often not seek medical treatment or wish to be transported to the Emergency Department. Stressing the potential for lethality of strangulation, both during and after the incident, is critical.

FOLLOW-UP INVESTIGATIONS

Follow-up is imperative in strangulation cases. Visible injuries may develop later or become apparent after the initial incident. Follow-up regarding non-visible injuries is critical as serious health issues or death can arise in a delayed fashion, without any visible signs on the body. When feasible, agencies should strive to obtain follow-up photographs shortly after the initial incident as needed and when appropriate. Law enforcement agencies may have different internal protocols, depending on the nature and size of the agency, but follow-up in strangulation cases should generally include:

⁵ The new Countywide DV Supplemental Form has a specific section and question about Strangulation on the top of page 2 of 2.

1. Complete *The San Diego Countywide Strangulation Documentation Form*. When a detective or investigator is called to a strangulation scene, or during a follow-up investigation, the investigator should complete the *San Diego Countywide Strangulation Documentation Form* if not already completed by the first responding officer (see Addendum B). Even if the victim did not report strangulation to the dispatch or the first responder, strangulation may have nevertheless been involved in the assault but the victim did not think to report it. For instance, if the assault involved other forms of violence, such as hitting, kicking, shoving, beating, or use of weapons, the victim may not appreciate the significance of the strangulation and it may take a skilled follow-up investigator to elicit this important information.
2. Encourage medical care. Strangulation victims frequently decline medical care or say they will obtain it on their own. Investigative follow-up should include educating the victim about the non-visible signs of strangulation, the risks for late complications, (including stroke, airway obstruction and death) and strongly encourage medical evaluation.
3. Conduct a thorough, follow-up discussion about the prior history of violence including prior strangulation events. When strangulation is involved, it is important for the follow-up meeting with the victim to be thorough, and ideally face-to-face. The interview should include a discussion about the prior history of domestic violence, and the victim should be asked specifically about any prior history of strangulation or suffocation. When feasible, the investigating officer should encourage the victim to re-enact the strangulation on a doll-head, mannequin, or other simulated foam head and documented with photographs or video.
4. Refer the victim to a domestic violence advocacy agency and/or the San Diego Family Justice Center when feasible. (See example in Addendum C and D).
5. Submit strangulation cases for felony review. Cases that involve strangulation should be sent for felony review to the local prosecutorial agency. Consider felony charges such as PC 245(a)(4) (Felony Assault with Force Likely to Produce Great Bodily Injury or Death), PC 273.5 (Corporal Injury to an Intimate Partner), and PC 236/237 (Felony False Imprisonment). Investigators should consider notifying the District Attorney or City Attorney in cases that may need special handling, such as enhanced victim advocacy, or a referral to the three countywide regional High Risk Domestic Violence Case Response Teams (HRT's) and or South Bay's multidisciplinary team (MDT).

PROSECUTION RESPONSE

1. Prosecutors must become trained in the dangers, signs, and symptoms of strangulation cases.
2. Prosecutors, when legally appropriate, should consider filing strangulation cases as felonies per PC 245(a)(4), PC 273.5, and PC 236/237.
3. Prosecutors should, when possible, consult with medical professionals and utilize their testimony in court to assist in proving the “traumatic condition” element of PC 273.5 as well as the “Force likely to produce great bodily injury or death” requirement of PC 245(a)(4).

SOCIAL SERVICE/ADVOCACY

Victims may downplay strangulation, or not even recognize it as abuse. It is imperative victims receive referrals to local domestic violence services by law enforcement at the scene. See the Addendums C & D - Domestic Violence Resource Guides for referrals countywide.

ADDENDUMS

- ***A: San Diego Countywide Law Enforcement Supplemental***
- ***B: San Diego Countywide Strangulation Documentation Form***
- ***C. Domestic Violence Resource Guide (English)***
- ***D. Domestic Violence Resource Guide (Spanish)***

SAN DIEGO COUNTY STRANGULATION PROTOCOL SIGNATURE PAGE

The parties below agree that The San Diego Countywide Strangulation Protocol shall be effective upon approval and shall remain in full force and effect until any party withdraws from participation or revised version is established.



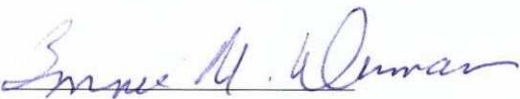
CRAIG CARTER, CHIEF
Escondido Police Department

2-1-17

DATE

On behalf of the following law enforcement agencies:

Carlsbad Police Department
California Highway Patrol
Chula Vista Police Department
Coronado Police Department
El Cajon Police Department
Escondido Police Department
La Mesa Police Department
National City Police Department
Oceanside Police Department
San Diego Harbor Police Department
San Diego Police Department
San Diego Sheriff's Office



BONNIE M. DUMANIS
San Diego County District Attorney

2-1-17

DATE

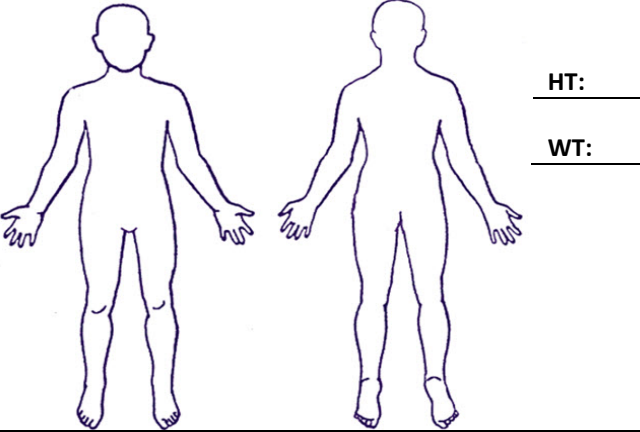
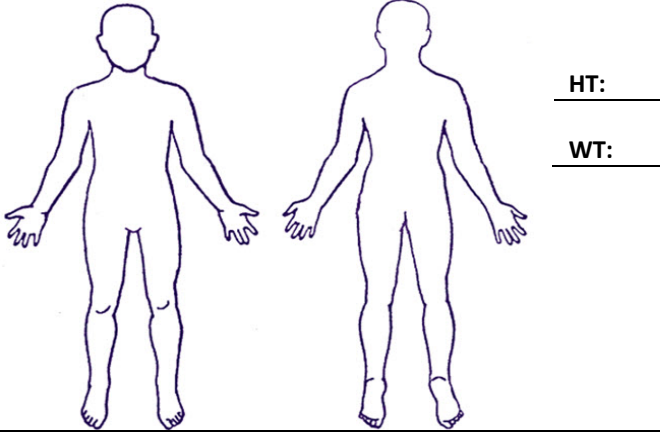


MARA W. ELLIOTT
San Diego City Attorney

2/1/17

DATE

SAN DIEGO COUNTYWIDE DOMESTIC VIOLENCE SUPPLEMENTAL

CASE #:		Reporting Officer & ID#:	
RELATIONSHIP BETWEEN SUSPECT & VICTIM			
<input type="checkbox"/> Spouse <input type="checkbox"/> Former Spouse <input type="checkbox"/> Dating <input type="checkbox"/> Formerly Dating <input type="checkbox"/> Engaged <input type="checkbox"/> Formerly Engaged <input type="checkbox"/> Child in Common <input type="checkbox"/> Cohabitants (not related to each other) <input type="checkbox"/> Former Cohabitants Length of relationship: _____ Year(s) _____ Months(s) If applicable, date relationship ended: _____			
VICTIM		SUSPECT	
VICTIM NAME (Last, First, Middle)		SUSPECT NAME (Last, First, Middle)	
DATE OF BIRTH:	M <input type="checkbox"/> F <input type="checkbox"/>	DATE OF BIRTH:	M <input type="checkbox"/> F <input type="checkbox"/>
EMOTIONAL DEMEANOR UPON ARRIVAL		EMOTIONAL DEMEANOR UPON ARRIVAL	
<input type="checkbox"/> Upset <input type="checkbox"/> Crying <input type="checkbox"/> Fearful <input type="checkbox"/> Calm <input type="checkbox"/> Angry <input type="checkbox"/> Nervous <input type="checkbox"/> Not at Scene <input type="checkbox"/> Flat Affect		<input type="checkbox"/> Upset <input type="checkbox"/> Crying <input type="checkbox"/> Fearful <input type="checkbox"/> Calm <input type="checkbox"/> Angry <input type="checkbox"/> Nervous <input type="checkbox"/> Not at Scene <input type="checkbox"/> Flat Affect	
INJURIES		INJURIES	
<input type="checkbox"/> Report of pain <input type="checkbox"/> Bruise(s) <input type="checkbox"/> Abrasion(s) <input type="checkbox"/> Head injury <input type="checkbox"/> Laceration(s) <input type="checkbox"/> Possible broken bones <input type="checkbox"/> Soreness <input type="checkbox"/> Other: _____ Explain: _____ <input type="checkbox"/> No visible or reported injuries <input type="checkbox"/> Draw location of injuries in diagram below		<input type="checkbox"/> Report of pain <input type="checkbox"/> Bruise(s) <input type="checkbox"/> Abrasion(s) <input type="checkbox"/> Head injury <input type="checkbox"/> Laceration(s) <input type="checkbox"/> Possible broken bones <input type="checkbox"/> Soreness <input type="checkbox"/> Other: _____ Explain: _____ <input type="checkbox"/> No visible or reported injuries <input type="checkbox"/> Draw location of injuries in diagram below	
			
MEDICAL TREATMENT		MEDICAL TREATMENT	
<input type="checkbox"/> None <input type="checkbox"/> First Aid Provided <input type="checkbox"/> Declined Medical Aid <input type="checkbox"/> Will Seek Own Does Victim have Medical Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Paramedic Response <input type="checkbox"/> Transported to Hospital <input type="checkbox"/> Hospital /Medic Unit: _____ <input type="checkbox"/> Medical Release Signed by Victim? <input type="checkbox"/> Is Victim Pregnant? <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> None <input type="checkbox"/> First Aid Provided <input type="checkbox"/> Declined Medical Aid <input type="checkbox"/> Will Seek Own Does Suspect have Medical Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Paramedic Response <input type="checkbox"/> Transported to Hospital <input type="checkbox"/> Hospital /Medic Unit: _____ <input type="checkbox"/> Medical Release Signed by Suspect? <input type="checkbox"/> Is Suspect Pregnant? <input type="checkbox"/> Yes <input type="checkbox"/> No	
SUBSTANCE ABUSE		SUBSTANCE ABUSE	
Possible influence of: <input type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Both <input type="checkbox"/> None <input type="checkbox"/> Symptoms observed: _____ History of Substance Abuse by Victim? <input type="checkbox"/> Yes <input type="checkbox"/> No Sample Taken By: _____ Requested Preservation (Sample Taken at Hospital): <input type="checkbox"/>		Possible influence of: <input type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Both <input type="checkbox"/> None <input type="checkbox"/> Symptoms observed: _____ History of Substance Abuse by Suspect? <input type="checkbox"/> Yes <input type="checkbox"/> No Sample Taken By: _____ Requested Preservation (Sample Taken at Hospital): <input type="checkbox"/>	

STRANGULATIONDid the suspect strangle or "choke" the victim ☐ Yes ☐ No**If yes, complete the Countywide Strangulation Documentation Form.****FIREARMS/DEADLY WEAPONS OWNED/USED/IMPOUNDED**Firearm(s)/deadly weapon(s) used during the incident? ☐ Yes ☐ No List/describe weapon(s) used: _____Does suspect have access to firearms? ☐ Yes ☐ No List/describe: _____Firearm(s)/deadly weapon(s) impounded per PC 18250? ☐ Yes ☐ No List/describe weapon(s) impounded: _____**HISTORY OF ABUSE**Prior history of physical abuse/threats? ☐ Yes ☐ NoWas this prior abuse/threats documented by law enforcement? ☐ Yes ☐ No

Approximate number of prior incidents: _____ Case Number(s): _____

Investigating Agency(s): _____

Previous abuse by suspect to victim: ☐ Threatened with weapons ☐ Threatened to kill victim or victim's children ☐ Constantly jealous☐ Controls victim's daily activities ☐ Abuse has become more frequent ☐ Past strangulation ☐ Suspect is unemployed**If Yes to any of the above, describe this prior abuse (last, worst, first), approximate date(s), injuries, witnesses, etc. in report Narrative.****WITNESSES**Witnesses present during domestic violence? ☐ Yes ☐ NoAll witness statements taken? ☐ Yes ☐ NoWitness info listed in crime report? ☐ Yes ☐ No**Include witness statements in Report****CHILDREN PRESENT DURING INCIDENT**

NAME	DOB	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Present <input type="checkbox"/> Witness <input type="checkbox"/> Injured <input type="checkbox"/> Interviewed	<input type="checkbox"/> Emotional Demeanor: _____	<input type="checkbox"/> Child of victim <input type="checkbox"/> Child of suspect <input type="checkbox"/> Other: _____
NAME	DOB	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Present <input type="checkbox"/> Witness <input type="checkbox"/> Injured <input type="checkbox"/> Interviewed	<input type="checkbox"/> Emotional Demeanor: _____	<input type="checkbox"/> Child of victim <input type="checkbox"/> Child of suspect <input type="checkbox"/> Other: _____
NAME	DOB	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Present <input type="checkbox"/> Witness <input type="checkbox"/> Injured <input type="checkbox"/> Interviewed	<input type="checkbox"/> Emotional Demeanor: _____	<input type="checkbox"/> Child of victim <input type="checkbox"/> Child of suspect <input type="checkbox"/> Other: _____

More than three children present? ☐ Yes ☐ No **If Yes, list additional children in Report.****CROSS REPORT TO CWS**Cross report to Child Welfare Services filed? ☐ Yes ☐ No

Note: Tell the CWS hotline worker whether drugs were involved in the incident, so that a Drug Endangered Children (DEC) referral may be made

EVIDENCE COLLECTEDPhysical Evidence Collected (e.g. torn clothing, broken objects)? ☐ Yes ☐ NoLocation Collected: ☐ Crime Scene ☐ Hospital ☐ Other: _____Photographs Taken? ☐ Victim ☐ Suspect Photographs Of: ☐ Crime Scene ☐ Physical Evidence ☐ Witness(es) ☐ Other: _____**RESTRAINING ORDERS**TRO/RO on record? ☐ Yes ☐ No If Yes, Issuing court:: _____ ☐ TRO/RO No. _____Emergency Protective Order Issued? ☐ Yes ☐ No**VICTIM RESOURCES PROVIDED**☐ Incident or Crime Case Number ☐ Victim Advised of Right to Support Person ☐ Other: (Specify) _____☐ Domestic Violence Resource Guide ☐ Victim Advised of Right to EPO

SAN DIEGO COUNTYWIDE STRANGULATION DOCUMENTATION FORM

VICTIM NAME (Last, First, Middle)	DATE OF BIRTH	M <input type="checkbox"/> F <input type="checkbox"/>	CASE #
SUSPECT NAME (Last, First, Middle)	DATE OF BIRTH	M <input type="checkbox"/> F <input type="checkbox"/>	

STRANGULATION EVENT QUESTIONS

- What did suspect use to strangle you? ☐ Left Hand ☐ Right Hand ☐ Two Hands ☐ Forearm ☐ Knee/Foot
☐ Other Object(s): _____
☐ Describe manner/method in detail in narrative: _____
- Estimate how long strangulation lasted: _____ Minute(s) _____ Second(s) Multiple Times: ☐ Yes # _____ ☐ No
- Estimate the amount of force suspect used to strangle: (1 = weak, 10 = very strong): ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10
- Describe suspect's emotional demeanor while strangling you: _____
- Describe the suspect's face/expression during strangulation: _____
- What did suspect say while strangling you? _____
- What else did suspect do while strangling you? _____
- Were you able to speak during the strangulation? ☐ Yes ☐ No If yes, what did you say? _____
- Did you do anything to attempt to physically stop the strangulation? ☐ Yes ☐ No Describe: _____
- What made the suspect stop? _____
- What did you think during the strangulation? _____
- Has suspect strangled you on other occasions? ☐ Yes ☐ No If yes, # of occasions: _____ When: _____

SYMPTOMS EXPERIENCED BY VICTIM

SYMPTOM	DURING	AFTER	SYMPTOM	DURING	AFTER	SYMPTOM	DURING	AFTER
Vision Changes: Tunnel	<input type="checkbox"/>	<input type="checkbox"/>	Coughing Blood	<input type="checkbox"/>	<input type="checkbox"/>	Hoarse Voice	<input type="checkbox"/>	<input type="checkbox"/>
Vision Changes: Spots	<input type="checkbox"/>	<input type="checkbox"/>	Nausea	<input type="checkbox"/>	<input type="checkbox"/>	Loss of Voice	<input type="checkbox"/>	<input type="checkbox"/>
Hearing Loss/Changes	<input type="checkbox"/>	<input type="checkbox"/>	Vomit/Dry Heaving	<input type="checkbox"/>	<input type="checkbox"/>	Whisper Voice	<input type="checkbox"/>	<input type="checkbox"/>
Loss of Consciousness	<input type="checkbox"/>	<input type="checkbox"/>	Dizziness	<input type="checkbox"/>	<input type="checkbox"/>	Neck Pain/Tender	<input type="checkbox"/>	<input type="checkbox"/>
Unable to Breathe	<input type="checkbox"/>	<input type="checkbox"/>	Headache	<input type="checkbox"/>	<input type="checkbox"/>	Trouble Swallowing	<input type="checkbox"/>	<input type="checkbox"/>
Difficulty Breathe	<input type="checkbox"/>	<input type="checkbox"/>	Feel Faint	<input type="checkbox"/>	<input type="checkbox"/>	Pain Swallowing	<input type="checkbox"/>	<input type="checkbox"/>
Rapid Breathing	<input type="checkbox"/>	<input type="checkbox"/>	Disorientation	<input type="checkbox"/>	<input type="checkbox"/>	Sore Throat	<input type="checkbox"/>	<input type="checkbox"/>
Pain While Breathing	<input type="checkbox"/>	<input type="checkbox"/>	Memory Loss	<input type="checkbox"/>	<input type="checkbox"/>	Urinate	<input type="checkbox"/>	<input type="checkbox"/>
Shallow Breathing	<input type="checkbox"/>	<input type="checkbox"/>	Painful to Speak	<input type="checkbox"/>	<input type="checkbox"/>	Defecate	<input type="checkbox"/>	<input type="checkbox"/>
Coughing	<input type="checkbox"/>	<input type="checkbox"/>	Raspy Voice	<input type="checkbox"/>	<input type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>

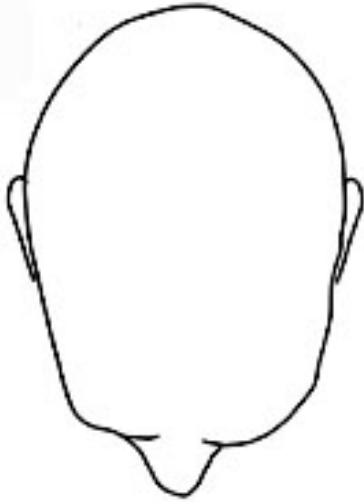
OFFICER OBSERVED INJURIES

FACE	EYES	NOSE	MOUTH
<input type="checkbox"/> Skin Red/Flushed <input type="checkbox"/> Red Spots (e.g. petechiae) <input type="checkbox"/> Scratches or Abrasions <input type="checkbox"/> Swelling <input type="checkbox"/> Bruising <input type="checkbox"/> Other:	<input type="checkbox"/> Red Eye <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Red Spots in Eye <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Red Spots on Eyelid <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Blood in Eyeball <input type="checkbox"/> Eyelid(s) drooping <input type="checkbox"/> Other:	<input type="checkbox"/> Redness <input type="checkbox"/> Red spots (i.e. petechiae) <input type="checkbox"/> Scratches or Abrasions <input type="checkbox"/> Swelling <input type="checkbox"/> Bleeding <input type="checkbox"/> Other:	<input type="checkbox"/> Swollen Lips <input type="checkbox"/> Swollen Tongue <input type="checkbox"/> Bruise(s) <input type="checkbox"/> Scratches or Abrasions <input type="checkbox"/> Red Spots in Palate or Gums, Etc. <input type="checkbox"/> Other:
EARS	UNDER CHIN	NECK	SHOULDERS
<input type="checkbox"/> Redness <input type="checkbox"/> Red spots (i.e. petechiae) <input type="checkbox"/> Bleeding <input type="checkbox"/> Bruising or Discoloration <input type="checkbox"/> Swelling <input type="checkbox"/> Red Spots Behind Ear(s) <input type="checkbox"/> Bruising Behind Ear(s) <input type="checkbox"/> Other:	<input type="checkbox"/> Redness <input type="checkbox"/> Scratches or Abrasions <input type="checkbox"/> Lacerations <input type="checkbox"/> Bruises <input type="checkbox"/> Linear Marks (e.g. fingernail marks) <input type="checkbox"/> Other:	<input type="checkbox"/> Redness <input type="checkbox"/> Scratches or Abrasions <input type="checkbox"/> Bruises <input type="checkbox"/> Linear Marks (e.g. fingernail marks) <input type="checkbox"/> Ligature Marks <input type="checkbox"/> Red Spots (e.g. petechiae) <input type="checkbox"/> Swelling <input type="checkbox"/> Other:	<input type="checkbox"/> Redness <input type="checkbox"/> Scratches or Abrasions <input type="checkbox"/> Lacerations <input type="checkbox"/> Bruises <input type="checkbox"/> Other:
HANDS, FINGERS, ARMS	HEAD	CHEST	
<input type="checkbox"/> Redness <input type="checkbox"/> Bruising <input type="checkbox"/> Swelling <input type="checkbox"/> Scratches or Abrasions <input type="checkbox"/> Broken Fingernails <input type="checkbox"/> Other:	<input type="checkbox"/> Lumps/Bumps <input type="checkbox"/> Lacerations <input type="checkbox"/> Scratches or Abrasions <input type="checkbox"/> Hair missing <input type="checkbox"/> Red Spots on Scalp (e.g. petechiae) <input type="checkbox"/> Other:	<input type="checkbox"/> Redness <input type="checkbox"/> Scratches or Abrasions <input type="checkbox"/> Lacerations <input type="checkbox"/> Bruises <input type="checkbox"/> Linear Marks (e.g. fingernail marks) <input type="checkbox"/> Other:	

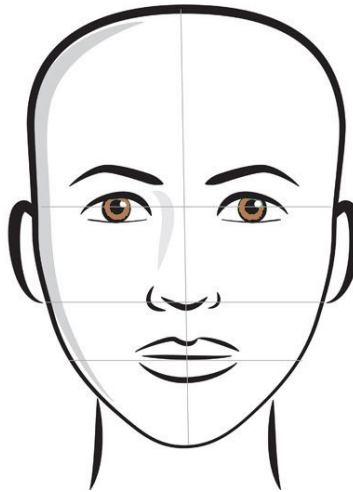
BODY DIAGRAMS

Draw all injuries observed

Top of Head



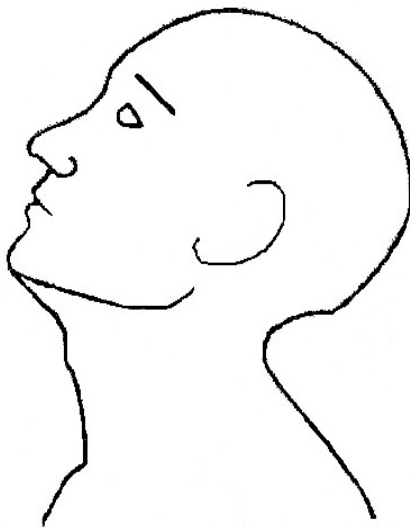
Front



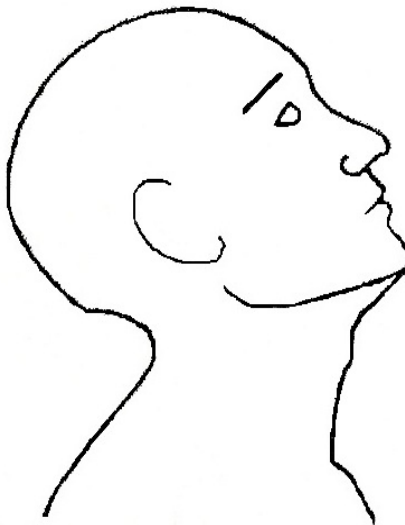
Neck & Chin



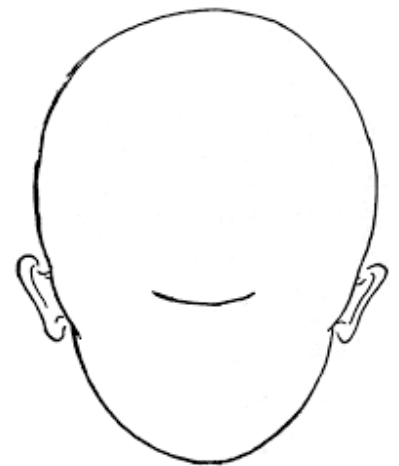
Left Side



Right Side



Back of Head



OFFICER CHECKLIST

- ☐ Photograph all injuries and physical evidence.
- ☐ If strangulation was done using an object, photograph and collect the object.
- ☐ Document where all evidence items were found.
- ☐ Determine if jewelry was worn by either party during the incident. If so, photograph it and, when feasible, look for pattern injuries.
- ☐ If defecation or urination in clothing, collect the clothing as evidence.
- ☐ If victim vomited, take photos of the vomit.
- ☐ Consider contacting duty detective.
- ☐ Take photographs of BOTH parties to document injuries and/or lack of injuries. Include hands, arms, face, chest, neck and all other areas the parties claim injury or physical contact occurred.
- ☐ Obtain evidence from hospital, if available, or follow-up to retrieve.



SAN DIEGO REGIONAL GUIDE DOMESTIC VIOLENCE RESOURCES



National Domestic Violence Hotline 1-800-799-SAFE (7233)

DOMESTIC VIOLENCE SERVICES AND SHELTERS

YWCA of San Diego County (Central)	619/234-3164
Center for Community Solutions (East County)	619/697-7477, 888/385-4657
Center for Community Solutions (North County)	760/747-6282, 888/385-4657
Community Resource Center (North County)	877/633-1112
Women's Resource Center (North County)	760/757-3500
Center for Community Solutions (Coastal)	858/272-5777, 888/385-4657
South Bay Community Services (South County)	800/640-2933, 619-420-3620

OTHER DOMESTIC VIOLENCE SERVICES (Partial list)

San Diego Family Justice Center (Central)	619/533-6000
Jewish Family Services – Project Sarah	858/637-3200
Southern Indian Health Council	619/445-1188
Indian Health Council	760/749-1410
License to Freedom	619/401-2800
Rancho Coastal Humane Society - Animal Safehouse Program (North County)	760/753-6413
Stalking Information Line (County of San Diego District Attorney's Office)	619/515-8900
Lesbian, Gay, Bisexual, Transgender, Questioning, (LGBTQ) Community Center	619/692-2077
San Diego City Attorney's Office, Victim Services Coordinators	619/533-5544
SD District Attorney's Office, Victim Assistance Program:	
Central: 619/531-4041, East: 619/441-4538, Juvenile: 858/694-4595, South: 619/498-5650, North: 760/806-4079	

OTHER HOTLINES (Partial list)

Access & Crisis Line (24 Hour)	888/724-7240
Children Welfare Services & the Child Abuse Hotline (24 Hour)	800/344-6000
Aging and Independence Services & Adult Protective Services (24 Hour)	800/510-2020
Center for Community Solutions - Sexual Assault Crisis Line (24 Hour)	888/385-4657
Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) Heidorn Crisis Line (24 Hour)	858/212-LIFE (5433)
National DV Crisis Intervention, Information and Referral (24 Hour)	800/799-SAFE (7233)
Rape, Abuse, Incest National Network (RAINN) Hotline (24 Hour)	800/656-HOPE (4673)
211 (24 Hour)	211 (cell 800-227-0997)
Meth Hotline	877/NO-2-METH (877-662-6384)

SPANISH SPEAKING AGENCIES (SE HABLA ESPAÑOL) (Partial list)

National Domestic Violence Hotline	800/799-7233
Access & Crisis 24-Hour Hotline	888/724-7240
Casa Familiar	619/428-1115
Chicano Federation of San Diego County, Inc.	619/285-5600
Rady Children's Hospital, Chadwick Center - Trauma Counseling Program	858/966-5803
North County Lifeline	760/726-4900
San Diego Family Justice Center	619/533-6000
South Bay Community Services 24-Hour Hotline and Services	800/640-2933

MILITARY RESOURCES (Partial list)

For referrals for family service and advocacy centers serving Camp Pendleton, MCAS Miramar, MCRD, Naval Base San Diego, NAS North Island, & Sub Base Fleet: Call Military OneSource at 800/342-9647 (24-hour hotline, not confidential) You may call the Family Justice Center Military Liaison 619/533-3592 (confidential) or National DV Hotline 800/799-7233.

CHILDREN'S RESOURCES (Partial list)

Child Welfare Services & the Child Abuse Hotline	800/344-6000
District Attorney's Office Child Abduction Unit	619/531-4345
Rady Children's Hospital, Chadwick Center - Trauma Counseling Program (Main Center)	858/966-5803
Rady Children's Hospital, Chadwick Center - Trauma Counseling Program (South)	619/420-5611
Rady Children's Hospital, Chadwick Center - Trauma Counseling Program (North)	760/967-7082, opt 3

Taking time to think about steps to increase your safety and the safety of your children is important, whether you have left, are considering leaving, or are currently in an abusive relationship. You may call a domestic violence advocacy agency to assist you in safety planning.

Call (800) 799-SAFE (800-799-7233) to speak with a confidential advocate or to be referred to an agency that specializes in domestic violence. You may also reference the Domestic Violence Service hotlines listed in the top section on Page 1. The National DV Hotline's website for safety planning ideas and steps for internet safety: <http://www.thehotline.org/help/path-to-safety/>

JAIL & PRISON NOTIFICATION

Inmates may be released at any time of the day. You may register an email address and/or telephone number(s) with VINE ("Victim Information and Notification Everyday") in order to be notified when an inmate is to be released, is pending release, or when they are to be transferred to a facility in another county or state prison. Call VINE toll-free at (877) 411-5588 or visit <http://www.sdsheriff.net/victims> to register online for this notification.

You may also visit "Who's in Jail" to see current custody status <http://apps.sdsheriff.net/wij/wij.aspx>.

The San Diego County District Attorney's Office offers an online resource providing information about a defendant's pending court appearance: <http://www.sdcda.org/case/index.php>

DOMESTIC VIOLENCE SHELTERS

There are shelters in San Diego County specifically geared to assisting domestic violence victims. In addition to housing and accommodations, most provide such services as support and information, legal assistance, and counseling. To contact Domestic Violence Services and Shelters, see that section of this guide for current shelter hotline numbers.

ORDERING POLICE REPORT(S)

Domestic Violence victims have a right to one free copy of their police report. Contact the responding law enforcement agency in the jurisdiction in which the incident occurred. Requests for reports can be made to most jurisdictions through the mail or in-person. The following information is necessary to request a report copy: name of the parties involved, date and location of incident, and the report number if available. Bring identification if you go in-person to pick up your report.

SAFE AT HOME - CONFIDENTIAL MAILING ADDRESS

Program participants are provided a confidential mailing address, at no cost, so that they may use this instead of their home address. This *mail forwarding program* allows participants to safeguard their address when receiving first-class mail, opening a bank account, completing a confidential name change, filling out government documents, registering to vote, getting a driver's license, enrolling a child in school, and more. You may call toll-free at (877) 322-5227 or visit <http://www.sos.ca.gov/safeathome/applicants-participants.htm> for information and a local enrolling agency.

RESTRAINING ORDERS

You can file for a restraining order at no cost. There are also no cost domestic violence clinics available to assist you in the application process. For a list of updated TRO Clinics and Family Law Facilitators locations and hours visit following website: www.sdcourt.ca.gov and select the "Family" tab and then select "Domestic Violence." You may also visit www.sdsheriff.net/DV for more information on seeking a restraining order.

Arrive early. Be prepared to spend a minimum of one-half of a day to a full day at the court to obtain your restraining order. Arrive a minimum of two hours before the clinic closes. Space is limited at child care facilities at each court house. You are encouraged to make other child care arrangements.

Things to bring with you when you complete your paperwork, if available: Address of the person you would like restrained; date of birth for the person you would like restrained; physical description of the person you would like restrained; photographs of any injuries (if applicable); and a copy of the police report(s) if any.



CONDADO DE SAN DIEGO - GUÍA DE RECURSOS ASISTENCIA DE VIOLENCIA DOMÉSTICA



Línea Directa Nacional de Violencia Doméstica 1-800-799-SAFE (7233)
24 horas, bilingüe, y confidencial

SERVICIOS DE VIOLENCIA DOMÉSTICA Y REFUGIOS (No es lista completa)

YWCA de San Diego (Central)	619/234-3164
Centro de Soluciones para la Comunidad (este del Condado)	619/697-7477, 888/385-4657
Centro de Soluciones Comunitarias (norte del Condado)	760/747-6282, 888/385-4657
Centro de Recursos Comunitarios (norte del Condado)	877/633-1112
Centro de Recursos para Mujeres (norte del Condado)	760/757-3500
Centro de Soluciones Comunitarias (área costera)	858/272-5777, 888/385-4657
South Bay Community Services (sur del Condado)	800/640-2933, 619-420-3620

OTROS SERVICIOS PARA VIOLENCIA DOMÉSTICA

Centro de Justicia Familiar (Central)	619/533-6000
Servicios para Familias Judías – ‘Proyecto Sarah’	858/637-3200
Consejo de Salud del Sur para Indios Americanos	619/445-1188
Consejo de Salud para Indios Americanos	760/749-1410
Licencia a Libertad (License to Freedom)	619/401-2800
Rancho Coastal Humane Society - Programa de casa segura para animales (norte del condado)	760/753-6413
Línea de Información para Víctimas de Acecho (Oficina del Fiscal del Distrito)	619/515-8900
Lesbianas, Gays, Bisexuales, Transgénero, en dudas (LGBT) Centro Comunitario	619/692-2077
Oficina del Fiscal de la Ciudad de San Diego, Coordinadores de Servicios a las Víctimas	619/533-5544
SD Oficina del Fiscal del Distrito, el Programa de Asistencia a las Víctimas:	
Central: 619/531-4041, Este: 619/441-4538, Juvenil: 858/694-4595, Sur: 619/691-4539, Norte: 760/806-4079	

OTRAS LÍNEAS DIRECTAS DE 24 HORAS:

Línea Directa Ayuda en Crisis y Suicidio (24 horas)	888/724-7240
Servicios de Bienestar Para Niños y Línea Directa de Reporte de Abuso a Menores (24 horas)	800/344-6000
Servicios para Adultos Mayores e Independientes; Servicios Protectores de Adultos (24 horas)	800/510-2020
Centro de Soluciones a la Comunidad – Línea de Crisis de Acoso Sexual (24 horas)	888/385-4657
Lesbianas, Gays, Bisexuales, Transgénero, en dudas, (LGBT) ‘Heidorn’ (24 horas)	858/212-LIFE (5433)
Información Nacional de Intervención de Crisis Violencia Doméstica, Información y Referencia	800/799-SAFE (7233)
Línea Directa Nacional de Violación, Abuso e Incesto (‘RAINN’) (24 horas)	800/656-HOPE (4673)
211 (24 horas)	211 (celular 800-227-0997)
Línea Directa de Metanfetamina	877/NO-2-METH (877-662-6384)

AGENCIAS QUE HABLAN ESPAÑOL (No es lista completa)

Línea Directa para la Violencia Doméstica	888/DVLINKS (385-4657)
Línea Directa de 24 horas, Acceso y Crisis	888/724-7240
Casa Familiar	619/428-1115
Federación Chicana del Condado de San Diego	619/285-5600
Rady Children’s Hospital, Chadwick Center- Programa de Trauma y Consejería	619/533-3529
North County Lifeline	760/726-4900
San Diego Centro de Justicia Familiar	619/533-6000
Línea Directa de 24 horas, South Bay Community Services	800/640-2933

RECURSOS PARA MILITARES (no es lista completa)

Para obtener referencias de servicios de familia y los centros de defensa que corresponden a Camp Pendleton, MCAS Miramar, MCRD, NAS North Island y Sub Base Fleet: llame a Military OneSource al 800/342-9647 (24 horas línea telefónica directa, no confidencial). Centro de Justicia Familiar de Enlace Militar 619/533-3592 (confidencial), o la Línea Directa para la Violencia Doméstica 800/799-7233.

RECURSOS PARA NIÑOS (No es lista completa)

Servicios de Bienestar Infantil & Línea Directa para reportar Abuso Infantil	800/344-6000
Oficina del Fiscal del Distrito, Unidad de Abducción de Niños	619/531-4345
Rady’s, Hospital Infantil, Centro Chadwick -Programa de Trauma y Consejería (Centro Principal)	858/966-5803
Rady’s, Hospital Infantil, Centro Chadwick -Programa de Trauma Y Consejería (Sur)	619/420-5611
Rady’s, Hospital Infantil, Centro Chadwick -Programa de Trauma Y Consejería (Norte)	760/967-7082, opción 3

www.sddvc.org

Actualizado 12/12/16

PLANES DE SEGURIDAD

Tomar tiempo para pensar en medidas que aumentan su seguridad y la seguridad de sus hijos es importante, especialmente si usted ha dejado, está pensando en dejar, o se encuentra en una relación abusiva. Puede llamar a una agencia de violencia doméstica para que le ayuden en la planificación de su seguridad.

Llame a **(800) 799-SAFE** (800-799-7233) para hablar con alguien confidencial o para una referencia a una agencia que se especializa en la violencia doméstica. También puede llamar las líneas directas de servicios de Violencia Doméstica mencionadas en la parte superior de la Página 1. La página Web de la Línea Directa Nacional de Violencia Doméstica, para obtener ideas de planificación de seguridad y otros pasos para seguridad del Internet es: <http://www.thehotline.org/get-help/safety-planning/>

NOTIFICACIÓN DE ENCARCELADOS

Los presos se pueden liberar en cualquier momento del día. Usted puede registrar una dirección de correo electrónico y/o número(s) de teléfono con VINE (Información de Víctima y Notificación Diaria) para ser notificado cuando un preso debe ser liberado, está pendiente de liberarse, o cuando será transferido a una instalación en otro condado o prisión del estado. Llame a VINE gratis al **(877) 411-5588** o visite <http://www.sdsheriff.net/victims> para registrarse en línea para esta notificación.

También puede visitar 'Who's in Jail' (Quien está en la cárcel) para ver el estado actual de custodia:

<http://apps.sdsheriff.net/wij/wij.aspx>.

La Oficina del Fiscal del Distrito ofrece información en línea sobre es aspecto del tribunal pendiente de un acusado:

<http://www.sdcda.org/case/index.php>.

REFUGIOS PARA VÍCTIMAS DE VIOLENCIA DOMÉSTICA

Hay refugios en el Condado de San Diego específicamente orientados a ayudar a las víctimas de violencia doméstica. Además de las viviendas y servicios, la mayoría proporcionan servicios tales como asistencia legal y consejería. Vea los números de teléfono bajo la sección Servicios de Violencia Doméstica Y Refugios.

SOLICITAR LOS INFORMES DE LA POLICÍA

Las víctimas de violencia doméstica tienen derecho a una copia gratis de su informe de policía. Póngase en contacto con la agencia de policía que corresponda a la jurisdicción del incidente ocurrido. Las solicitudes de informes pueden hacerse a la mayoría de las jurisdicciones a través del correo o en persona. La siguiente información es necesaria para identificar el informe solicitado: Nombre de personas involucradas, la fecha y lugar de ocurrencia, y el número del informe si es disponible. Traiga una identificación si usted irá en persona a recoger a su informe.

SAFE AT HOME - DIRECCIÓN DE CORREO CONFIDENCIAL

A los participantes del programa se les proporcionan una dirección de correo confidencial, sin costo, para que pueda usar esto en lugar de su domicilio actual. Este programa de "Mail Forwarding" ayuda a los participantes mantener su confidencia al recibir correo de primera clase, abrir una cuenta bancaria, completar un cambio de nombre, llenar documentos del gobierno, registrarse para votar, para conseguir una licencia de manejar, matricular a un niño en la escuela, y más. Usted puede llamar el número telefónico gratis al **(877) 322-5227** o visite a <http://www.sos.ca.gov/safeathome/applicants-participants.htm> para más información y la agencia local para inscribirse.

ORDENES DE RESTRICCIÓN

Usted puede solicitar una orden de restricción sin costo. También hay clínicas de violencia doméstica sin costo disponibles para ayudarle en el proceso de solicitud. Para obtener una lista actualizada de Clínicas 'TRO' y ubicaciones y horas de visita para Facilitadores de Derechos de Familia, visite la página web: www.sdcourt.ca.gov y seleccione "Familia" y a continuación seleccione "Violencia Doméstica." También puede visitar www.sdsheriff.net/DV para obtener más información sobre cómo solicitar una orden de restricción.

Llegue mínimo 2 horas antes de que la clínica se cierre. Esté preparado para pasar un mínimo de la mitad de un día a un día completo en la corte para obtener la orden de restricción. Espacio es limitado en las instalaciones de cuidado infantil en cada corte. Se le recomienda hacer otros arreglos para cuidado de niños.

Cosas para llevar con usted cuando usted completa su orden, si está disponible: la dirección de la persona que le gustaría ser restringida, fecha de nacimiento de la persona que le gustaría ser restringida, la descripción física de la persona que le gustaría ser restringida; fotografías de las lesiones (si corresponde); y una copia de informe(s) de policía, en su caso.