66 I'm going to KILL you now, so think your last thoughts... ??





MEDIA GUIDE

Understanding the Realities of Strangulation

TRAINING INSTITUTE ON STRANGULATION PREVENTION

professionals in understanding the importance of using appropriate language to describe non-fatal strangulation, specifically when discussing strangulation and suffocation within the context of power and control, domestic violence relationships, sexual assaults, and homicides. This guide also provides background and educational resources for the media to assist in accurate reporting of this horrific crime.

The cost of misreporting or misunderstanding strangulation crimes is incredibly high, as strangulation frequently foreshadows an escalating use of violence and homicidal intent, providing a profound disservice to survivors and the public.



101 W. Broadway, Suite 1770 San Diego, California, 92101 888.511.3522

strangulationtraininginstitute.com

Tara checked into a hotel, excited to celebrate her birthday with her boyfriend. Although Tara's boyfriend had been abusive towards her in the past, nothing prepared her for the horror and sheer terror she would face that night. After an argument over her cell phone, Tara was nearly beaten to death, strangled, and held captive in the room, unable to escape. Tara was only able to run for help when her boyfriend finally fell asleep. To this day, Tara remains haunted by her abuser's whispers just inches from her face as he grabbed her throat...

I am going to KILL you now, so think your last thoughts...

DID YOU KNOW... A woman who has suffered a non-fatal strangulation incident with her intimate partner is **750%** more likely to be killed by the same perpetrator...with a gun.

DID YOU KNOW...In 2017, **44** peace officers were shot and killed across the United State in the line of duty. **33** of those officers were killed by a perpetrator with a public record history of at least one non-fatal strangulation incident.

DID YOU KNOW...The majority of strangulation attacks do not leave any visible external injuries on the victim.

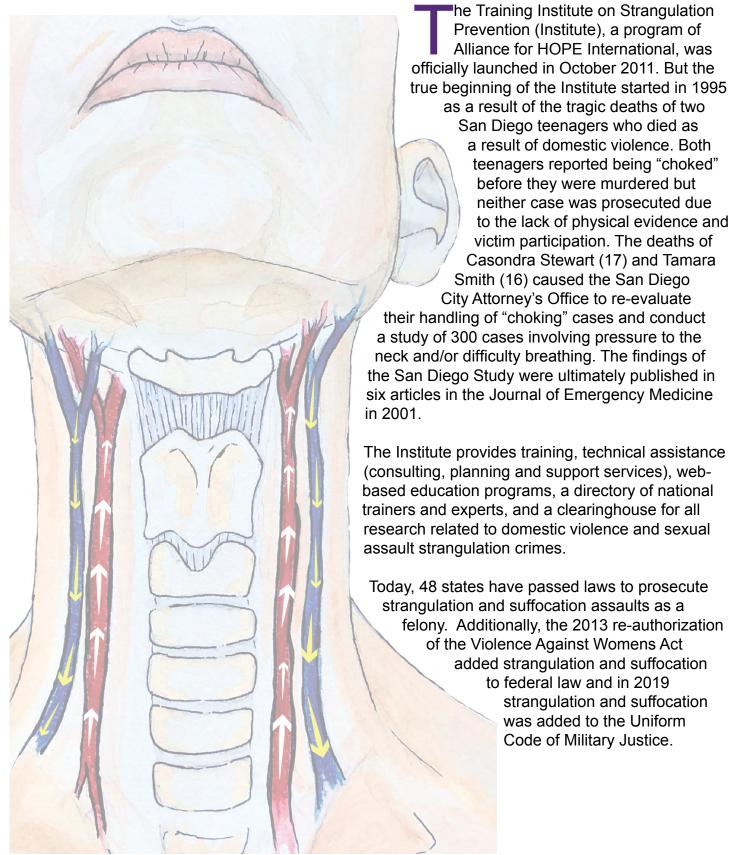
DID YOU KNOW...Strangulation has been identified as **one of the most lethal forms of domestic violence and sexual violence**; unconsciousness may occur within seconds and death within minutes.

DID YOU KNOW...Strangulation is an ultimate form of power and control as the batterer demonstrates his command over the victim's next breath.

DID YOU KNOW...When domestic violence perpetrators strangle their victims, not only is this a felonious assault or possibly an **attempted murder**, but too often it can lead to a fatal outcome.

For more information on strangulation facts and warning signs, please visit: strangulationtraininginstitute.com/resources/

ABOUT The Training Institute on Strangulation Prevention



AN OPEN THANK YOU to the Media

y reporting on strangulation in instances of intimate partner violence, you're helping shed light on the dangerousness and severity of this crime. Thank you for sharing Alliance for HOPE International's vision of a

world where the needs of all victims are met, children are protected, batterers are held accountable, violence fades, economic justice increases, families heal and thrive, hope is realized, and we all work together.

To Speak to a MEDIA REPRESENTATIVE

e have included several hyperlinks within our Media Guide to provide quick and effective access to resources, studies, facts, and information regarding Strangulation. However, if you need to speak with someone, please contact us at:

Alliance for HOPE International Training Institute on Strangulation Prevention

> 101 W. Broadway, Suite 1770 San Diego, California, 92101 Phone 888,511,3522

allianceforhope.com strangulationtraininginstitute.com



The Alliance will discuss the prevalence and physiology, signs and symptoms, dynamics of perpetrators, short and long-term medical and health consequences, and the challenges facing intervention professionals with non-fatal strangulation assaults.

The Alliance does not provide political commentary and rarely comments on pending cases.

The Alliance has strangulation assault survivors available for in-person and telephonic interviews.

The Alliance faculty, available for comment and interview, includes law enforcement officers, prosecutors, advocates, doctors, forensic nurses, mental health professionals and researchers.

The Alliance also has media b-roll available and a host of visual resources for the use in electronic or print media stories as well as online videos available for use with permission.

STRANGULATION IN INTIMATE PARTNER VIOLENCE FACT SHEET AVAILABLE IN OUR RESOURCE LIBRARY

Facts about strangulation are an important way that media professionals can contextualize a particular act of violence within a sadly all-too often common type of abuse, domestic violence. https://www.familyjusticecenter.org/resources/strangulation-intimate-partner-violence-fact-sheet/

STRANGULATION IS MORE **COMMON** THAN WE REALIZED...

ne in four women will experience intimate partner violence in her lifetime. Of women who experience intimate partner violence, between 68% to 80% of high-risk survivors will experience non-fatal strangulation by their partner – often multiple times and to the point of loss of consciousness¹. Strangulation is also a **gendered crime**. Most stranglers are men (over 90%) and most victims are women. Victims often call the crime "choking" but the correct medical and legal term is "strangulation."



women will experience intimate partner violence (IPV) in their lifetime.

STRANGULATION SIGNIFICANTLY INCREASES THE RISK OF DOMESTIC VIOLENCE HOMICIDES...

omen who have suffered a previous strangulation with an intimate partner are at least 750% more likely to later be killed by their strangler, compared to domestic violence victims who have never been strangled.2

Odds for homicide increase 750%

for victims who have been previously strangled, compared to victims who have never been strangled.

EVEN IN FATAL STRANGULATION CASES, THERE ARE OFTEN NO EXTERNAL SIGNS OF INJURY...

n average, only 50% of strangulation victims have visible injuries, 35% of victims have injuries too minor to photograph, and only 15% of victims have visible injuries which can be photographed.3 The lack of physical evidence frequently causes the criminal justice system to treat many "choking" cases as minor incidents, when, in fact, strangulation cases are some of the most lethal and violent cases in the system.4



Only half of victims have visible injuries



Of these, only 15% could be photographed

STRANGULATION CAN PRODUCE SIGNIFICANT, LONG-TERM CONSEQUENCES...

ncluding traumatic brain injury⁵, psychological injury (including PTSD, depression, suicidal ideation, memory problems, and amnesia), and delayed death.



LOSS of consciousness can occur within 5 - 10 seconds. **Death** within minutes and **brain damage** somewhere in between.⁶

WHAT THE MEDIA GETS RIGHT...AND WRONG

hen strangulation is framed well in the media, it (1) uses precise language and does not misidentify "strangulation" as "choking," (2) includes victims' reports of their experiences (when available), and (3) frames the severity of strangulation using the facts and figures outlined in the <u>Strangulation in Intimate Partner Violence Fact Sheet</u>.

STRANGULATION AND CHOKING ARE **NOT THE SAME** THING

trangulation is external pressure to the neck, by any means, that obstructs blood flow and/ or airflow resulting in asphyxia. Strangulation is intentional external force applied to the victim's neck with the perpetrator's hands, arms, legs, or a ligature. "Choking" is internal obstruction of the airway, such as when food is lodged in the throat. Choking is often an accidental act, while strangulation is an intentional tactic of power and control that requires criminal accountability for the perpetrator.

IF THE MEDIA USES THE TERM "CHOKING" WHEN THEY REALLY MEAN "STRANGULATION", THEY MINIMIZE AND TRIVIALIZE THE SEVERITY OF THIS CRIME.

hen non-fatal strangulation is minimized by professionals or the media, it sends the wrong message to victims, professionals, and the public, and frequently **results in inadequate** risk assessment and safety planning.

REPORTING VICTIM EXPERIENCE

uring strangulation attacks, the victim's brain is usually deprived of oxygen. The health consequences of strangulation can include (but are certainly not limited to) loss of memory, loss of consciousness, inability to concentrate, behavioral changes, permanent brain damage, and difficulty speaking. Don't expect the victim to describe this near-death experience chronologically since memory is often impacted.

The victim may be embarrassed or minimize the incident. Victims may change their story over time. This is all a **normal response to trauma**.

USING FACTS TO TELL THE STORY

hen strangulation is framed well in instances of interpersonal violence, it is situated within the dynamics of domestic violence relationships, the threat of domestic violence homicides, and cycles of power and control more generally. Facts and figures that are useful to the framing of strangulation crimes can be found here.



DID YOU KNOW... The majority of mass shootings are related to domestic or family violence and are responsible for 86% of mass shooting child fatalities.

DID YOU KNOW...54% of mass shootings that occurred between 2009 – 2017 also included the suspect shooting an intimate partner or family member.

DID YOU KNOW...54% of mass shootings that occurred between 2009 – 2016 were committed by an intimate partner or family member.

DID YOU KNOW...The perpetrators of the mass homicides at The Pulse Nightclub, the Fort Lauderdale Airport, Sutherland Springs First Baptist Church in Texas, the Boston Marathon Bombing, and more, all have a public record history of domestic violence and usually strangulation against an intimate partner.

DID YOU KNOW...Many perpetrators of mass murder exhibited warning signs/violent behavior prior to committing targeted public violence; one of these behaviors is often strangulation of an intimate partner.

DID YOU KNOW...When domestic violence perpetrators strangle their victims, not only is this a felonious assault or possibly an **attempted murder**, but too often it can lead to a fatal outcome.

Casey Gwinn, president of the Alliance for HOPE International and a co-founder of the Training Institute for Strangulation Prevention along with Gael Strack, commented that the perpetrator of the Sutherland Springs First Baptist Church murders was...

66 A rage-filled domestic violence STRANGLER and child abuser who had left EVERY POSSIBLE LETHALITY MARKER for a mass shooter we know of in plain sight.

- CASEY GWINN and GAEL STRACK

Co-Founders, Training Institute on Strangulation Prevention

TERMINOLOGYBECAUSE LANGUAGE MATTERS

strangulation	is external pressure to the neck, by any means, that obstructs blood flow and/or air flow in the neck. Strangulation is a form of asphyxia. It is generally done intentionally and is a felony crime in most states.
choking	is a partial or complete obstruction of the airway, often due to an object/foreign body (i.e., choking on a piece of food)
non-fatal strangulation	term used to describe the incident when a victim survives a strangulation event (i.e., "She suffered a non-fatal strangulation incident.")
manual strangulation	strangulation of a victim with the suspect using his/her hands, arm, leg, forearm, "chokehold," etc.
ligature strangulation	strangulation of a victim with the suspect using a "ligature," such as a shoelace, rope, chain, etc.
hanging	a form of strangulation with complete or incomplete suspension of a body (with part or all of the body supporting the victim's weight)
asphyxiation	the state or process of being deprived of oxygen; suffocation (i.e., with a pillow, bed sheet, suspect's hand over the victim's nose and mouth, etc.)
positional asphyxiation (postural asphyxia)	the state or process of being deprived of oxygen when body position prevents adequate gas exchange (i.e., when someone's position creates a limitation in chest wall expansion)
forensic pathology	the intersection between law and medicine when dealing with deceased individuals
clinical forensic medicine	the medical discipline that deals with the evaluation and care (both medical and forensic) of living victims
mechanism(s) of injury	the method by which damage to the skin, muscles, organs, and bones occurs
cause of death	WHAT conditions specifically caused the person to die (heart failure, oxygen deprivation, exsanguination/extreme blood loss, etc.)
manner of death	HOW did the cause of death occur? (natural, accident, suicide, homicide, undetermined)

MEET THE **FOUNDERS**



GAEL STRACK, ESQ.

Chief Executive Officer and Co-Founder of the Alliance for HOPE International and oversees the Training Institute on Strangulation Prevention. Gael is a national expert on domestic violence and strangulation assaults. Prior to this position, Gael was the founding director of the San Diego Family Justice Center, a former prosecutor with the San Diego City Attorney's Office, a defense attorney and a deputy county counsel.

CASEY GWINN, ESQ

President and Co-Founder of the Alliance for HOPE International. Casey is also the visionary behind the Family Justice Center Movement, first proposing the concept of the FJC model in 1989. He is a national expert on domestic violence dynamics, prosecution, trauma-exposed children, and the science of hope. Prior to this position, Casey was the elected San Diego City Attorney.



For many years, we didn't realize what strangulation was.

We would see it over and over in police reports. We would hear victims say over and over 'choking, choking, choking' 'he grabbed me' 'he choked me'. It didn't mean anything to us, and we certainly didn't understand HOW LETHAL IT WAS.

But, as we started to deal with it, put the medical experts on the stand and started hearing the actual accounting of what was going on, and then had research to back it up, we found out that choking wasn't down here, choking was right here. A homicide was right here.

And suddenly, choking is strangulation, and now we realize if you're at strangulation, you're at death.

YOU'RE RIGHT ON THE EDGE OF MURDER.

- GAEL STRACK and CASEY GWINN

Co-Founders, Training Institute on Strangulation Prevention

To meet the rest of the Alliance for HOPE International team, please visit: allianceforhope.com/about-us/our-team/

SURVIVOR QUOTES

When I came out of that [strangulation incident],
I was more submissive—more terrified that the next time
I might not come out—I might not make it.
So I think I gave him all my power from there because
I could see how easy it was for him to just TAKE MY LIFE
like he had given it to me.

- FORMER SAN DIEGO FAMILY JUSTICE CENTER CLIENT (2010)

After two years of marriage filled with verbal abuse, shoving, and other physical abuse, one night my husband threw me down on the bed and began strangling me. Unlike any other way that he had attacked me in the past, this horror instantly sent me to a level of terror and trauma I had never known in my whole life. I knew I was seconds away from dying. This was a fear unlike anything I had ever known. Everything was suddenly different in my whole consciousness. I WAS GOING TO DIE.

The unthinking rage in his eyes made that clear.

- JENNIFER BISHOP-JENKINS, LETTER TO U.S. SENTENCING COMMISSION (2014)

Every survivor will tell you the same story.

The inability to breathe is terrifying. It is fundamentally terrifying. It is so basic to our ability to survive. Being hit is bad but losing the ability to breathe (as a result of strangulation) is worst in a whole host of ways. I urge you to understand what those who are subjected to this behavior go through...

and MOVE FORWARD WITH THIS BILL TO PROTECT ALL of us who have been and will be victims of strangulation.

- SENATOR HAYWARD (SURVIVOR OF STRANGULATION AND A PHYSICIAN)
Advocating for a Felony Strangulation Statute in Oregon, SB 1562, Feb 2018

FACULTY QUOTES

Our original study in 1995 proved it most victims of strangulation WILL NOT HAVE VISIBLE
EXTERNAL INJURIES and will not understand the danger.
The lack of injuries and the lack of training caused the
criminal justice system to minimize strangulation.
We failed victims. But now we know - NON-FATAL
STRANGULATION CASES ARE LETHAL and have serious
immediate and long-term health consequences.

- GAEL STRACK

Co-Founder, Training Institute on Strangulation Prevention

The most dangerous domestic violence offenders strangle their victims. The most violent rapists strangle their victims. We used to think all abusers were equal. They are not. Our research has now made clear that when a man puts his hands around a woman's neck, he has just raised his hand and said, "I'M A KILLER." They are more likely to kill police officers, to kill children, and to later kill their partners.

So, when you hear "He choked me", now we know YOU ARE THE EDGE OF A HOMICIDE.

- CASEY GWINN

Co-Founder, Training Institute on Strangulation Prevention

FACULTY **QUOTES**

Non-fatal strangulation is not attempted strangulation...
but ATTEMPTED MURDER.

- JAMES HENDERSON MSW

Director of Offender Accountability, Training Institute on Strangulation Prevention

Every second the brain is deprived of oxygen, millions of brain cells die. So by rendering someone unconscious, you are **INDUCING BRAIN DAMAGE**.

- DR. WILLIAM SMOCK

Police Surgeon, Louisville Metro Police Department

of a loved one with his BARE HANDS...
killing others does not seem to be a stretch.

- JERRY FINEMAN

Assistant District Attorney, County of Riverside

Strangulation is not normal. Strangulation is not self-defense.

STRANGULATION IS ATTEMPTED MURDER

by restricting blood flow or airflow to the brain.

- DETECTIVE TIM BROWN

Gilbert, AZ Police Department



- JOE BERNER

Supervisor, Crime Scene Specialist, San Diego Police Department

SAMPLE MESSAGES FOR VICTIMS

"I am afraid for YOUR SAFETY"

"I am afraid for the SAFETY OF YOUR CHILDREN"

"YOU DO NOT DESERVE to be treated like this"

"THERE IS HELP available"

"I AM HERE FOR YOU no matter what"

The sample messages above were written by Sarah Buel, Esq., who has spent the past 33 years working with battered women, abused children, and juveniles within the legal system. Currently, she is a clinical professor at the University of Texas School of Law, having started, then co-directing, their Domestic Violence Clinic. She teaches Domestic Violence and the Law, Criminal Law and Public Education, Civic Engagement and Policy courses, and co-founded the interdisciplinary University of Texas Institute on Domestic Violence and Sexual Assault that focuses on research, pedagogy, and direct services. §

OTHER AVAILABLE **RESOURCES**

NATIONAL DOMESTIC VIOLENCE HOTLINE

thehotline.org

1-800-799-7233

STRANGULATION PREVENTION RESOURCES

strangulationtraininginstitute.com/resources/

FACT SHEET ON STRANGULATION

familyjusticecenter.org/resources/strangulation-intimate-partner-violence-fact-sheet/

SIGNS AND SYMPTOMS OF STRANGULATION

familyjusticecenter.org/resources/signs-and-symptoms-of-strangulation/

STRANGULATION LEGISLATION MAP

strangulationtraininginstitute.com/resources/legislation-map/

ENDNOTES

- 1 Wilbur, L., Higley, M., Hatfield, J., Surprenant, Z., Taliaferro, E., Smith, D., Paolo, A. (2001). Survey Results of Women Who Have Been Strangled While in an Abusive Relationship. The Journal of Emergency Medicine, 21(3): 297-302;
- Messing, J., Campbell, J., Webster, J., Brown, D., Patchell, B., & Wilson, S. (2015). The Oklahoma Lethality Assessment Study: A Quasi-Experimental Evaluation of the Lethality Assessment Program. Social Service Reviews, 89(3). 499-530;
- Messing, J., Patch, M., Wilson, J., Kelen, G., & Campbell, J. (2018). Differentiating Among Attempted, Completed, and Multiple Nonfatal Strangulation in Women Experiencing Intimate Partner Violence. Women's Health Issues, 28-1. 104-111.
- Glass, N., et al. (2008). "Non-fatal Strangulation is an Important Risk Factor for Homicide of Women, "The Journal of Emergency Medicine, 35(3). 329-335.
 - Strack, G. & Gwinn, C. (2011). On the Edge of Homicide: Strangulation as a Preclude. Fall Criminal Justice. 32.
- 3 Strack, G., McClane, G., & Hawley, D. (2001). A Review of 300 Attempted Strangulation Cases: Part I: Criminal Legal Issues. Journal of Emergency Medicine, 21(3). 303-309.
- 4 Pritchard, A., Reckdenwald, A., Nordham, C., & Holton, J. (2015). Nonfatal Strangulation as Part of Domestic Violence: A Review of Research. Trauma, Violence & Abuse. 1-18.
- 5 Empire Justice Center. (2006). Building Bridges: A Cross-Systems Training Manual for Domestic Violence Programs and Disability Service Providers in New York. Retrieved from

http://www.doj.state.or.us/wp-content/uploads/2017/08/traumatic brain injury and domestic violence.pdf

- Davis, A. (2014). Violence-Related Mild Traumatic Brain Injury in Women: Identifying a Triad of Postinjury Disorders. Journal of Trauma Nursing, 21(6). Retrieved from https://www.health.harvard.edu/blog/intimate-partner-violence-and-traumatic-brain-injury-an-invisible-public-health-epidemic-2018121315529
- Strack, G., McClane, G., & Hawley, D. (2001). A Review of 300 Attempted Strangulation Cases: Part I: Criminal Legal Issues. Journal of Emergency Medicine, 21(3). 303-309.
- Figure 7 Every Town for Gun Safety. Mass Shootings in the United States: 2009-2017. Retrieved December 6, 2018, from www.everytownresearch.org
- 8 Office for Victims of Crime Training and Technical Assistance Center. (2019). "Consultant Spotlight On... Sarah Buel." Retrieved from https://www.ovcttac.gov/views/HowWeCanHelp/dspSpotlightGallery_Ind.cfm?cs=sBuel



With gratitude and special thanks to the National Advisory Board of the Institute, Rachel Frost, Master Investigator from the Riverside County Sheriff's Office, and Yesenia Aceves, Director of Culture and Creative Services, Alliance for HOPE International, for their contributions to this Media Guide.

TRAINING INSTITUTE ON STRANGULATION PREVENTION

a program of Alliance for HOPE International allianceforhope.com | strangulationtraininginstitute.com 101 West Broadway, Suite 1770, San Diego, CA, 92101 | (888) 511-3522

This project is supported all or in part by Grant No. 2016-TA-AX-K067 awarded by the Office on Violence Against Women, U.S. Department of Justice. The opinions, findings, conclusions, and recommendations expressed in this publication/program/exhibition are those of the author(s) and do not necessarily reflect the views of the Department of Justice, Office on Violence Against Women.