



Now is the time to tell what happened...

NON-FATAL STRANGULATION

SAFETY PLANNING GUIDE

This informational brochure was created in collaboration with
The Institute on Strangulation Prevention, a program of Alliance for HOPE International
strangulationtraininginstitute.com

When domestic violence perpetrators strangle (choke) their victims, this is a crime. Strangulation can be charged as a felony assault and could be considered attempted homicide.

Strangulation is an ultimate form of power and control, where the batterer demonstrates control over the victim's next breath, having devastating psychological effects and a potentially fatal outcome.

A SMALL AMOUNT OF PRESSURE AROUND THE NECK CAN RESULT IN A LOST OF CONSCIOUSNESS IN 6.8 SECONDS. DEATH CAN OCCUR WITHIN 62 SECONDS ALL THE WAY TO 152 SECONDS.

Victims of non-fatal strangulation are at a higher risk of being re-assaulted by their abuser/perpetrator and 750% more likely of being killed by their abuser. If the abuser/perpetrator has access to firearms the risk of being killed increases to 1100%



Safety BEFORE Strangulation

- Educate yourself on the seriousness of strangulation.
- If your abuser/perpetrator has threatened to strangle, choke or suffocate you in the past, take it seriously.
- If your abuser/perpetrator talks about using strangulation/choking during sex or as “play,” take this seriously for the health reasons mentioned previously.
- If strangulation is imminent try to remove scarves, jewelry, loose strings or cords that could be easily used to strangle you.
- If possible, avoid rooms like the bedroom, and bathroom where the risk for suffocation by pillow or drowning may increase.
- If comfortable, learn self-defense strategies to try to stop your abuser/perpetrator from strangling, like pressing your chin to your chest to block hands/arms from tightening and kneeing the abuser/perpetrator in the groin.
- If you can sense abuse coming, then you can try to manage it by implementing your safety plan (i.e. leave the home, tell someone you trust, ask someone to check on you, leave the room etc.)
- Remain calm and trust your judgment.
- If you have more questions connect with a victim advocate for additional support and safety planning.
- Keep this document in a safe place away from the abuser/perpetrator.

Safety DURING Strangulation

- Comply with abuser/perpetrator if necessary to stay alive.
- Leave if possible. Your life is at risk.
- Keep pressure off at least one side of your neck in order to keep from losing consciousness.
- If the abuser/perpetrator relaxes their hold, try to escape if you can.
- Trust your instincts, whether fighting back or not is most effective.

Often survivors are reluctant to tell anyone about the abuse.

IF SOMEONE HAS STRANGLERED/CHOKED YOU, OR IF ANYONE HAS EVER CAUSED YOU TO BE UNABLE TO BREATHE, YOU MUST SHARE THIS PIECE OF YOUR STORY; IT IS MOST IMPORTANT TO TELL BECAUSE IT CAN SAVE YOUR LIFE

Safety AFTER Strangulation

- Get away immediately, call for help, and go to a safe place
- Seek immediate medical attention.....**IT MAY SAVE YOUR LIFE**
- Know that you are not alone and there is **HOPE FOR A BRIGHTER FUTURE.**
- If you go to the hospital, tell the doctor/nurse you were strangled and request a CTA scan.
- Give your medical provider the Medical Assessment Card in order to get a complete medical exam.
- Do not be left alone for at least 48 to 72 hours after a strangulation assault.
- Take photos of your injuries immediately and/or few days afterwards.
- Do not be embarrassed if there was involuntary urination or defecation, as this is a symptom of strangulation.
- Do not wash your clothes (which could be evidence).
- It is important to FULLY explain to your medical provider everything that happened to you, and to follow up after your initial appointment.
- Follow up with an Advocate for appropriate safety planning and additional resources and support.

Safety AFTER Strangulation

Questions First Responders*

May Ask

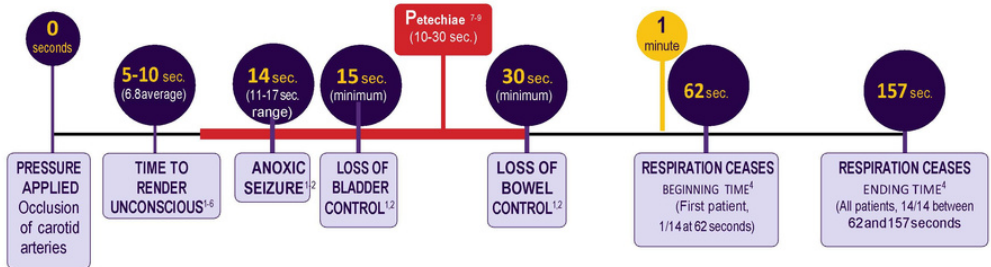
*First Responder is defined as: EMS, Fire/Rescue, Law Enforcement, Medical, 911 Operators, DV Advocates etc.

- Did anyone apply any pressure to your neck by any means?
- Did anyone try to prevent you from breathing, talking or screaming for help?
- Do you have any current pain or discomfort?
 - Where, and to what extent?
- Have you noticed any changes in your voice or speech?
- Any visual or hearing changes?
- Are you having difficulty speaking or breathing now?
- Did you feel faint or dizzy?
- Do you think you may have passed out?
- Are you having any trouble with your balance or coordination?
- Did you urinate or defecate?
- Did you vomit or feel nauseous?
- Are you pregnant? (If victim is a female)

PHYSIOLOGICAL CONSEQUENCES OF STRANGULATION

Occlusion of Arterial Blood Flow: Seconds to Minutes Timeline

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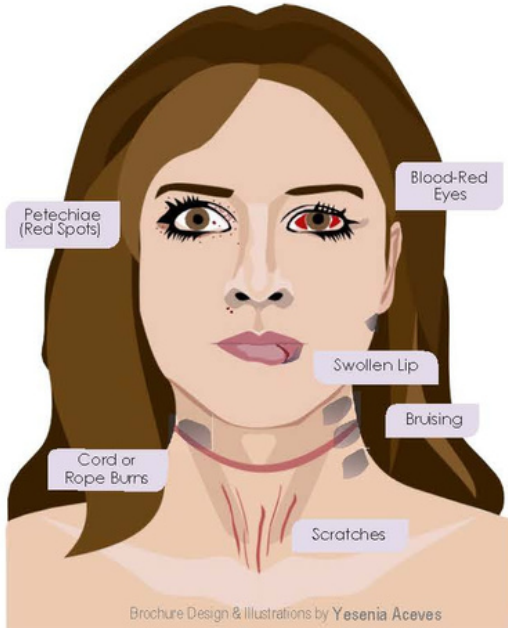
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Strangulation

Visible Signs



Additional Signs and Symptoms

A larger version of the graphic above which contains detailed signs and symptoms is available for download at <https://www.strangulationtraininginstitute.com/Esperanza>

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Observing Changes

Documentation by photographs sequentially for a period of days after the assault is very helpful in establishing a journal of physical evidence.

Victims should also seek medical attention if they experience difficulty breathing, speaking, swallowing or experience nausea, vomiting, lightheadedness, headache, involuntary urination and/or defecation, especially pregnant victims. A medical evaluation may be crucial in detecting internal injuries and saving a life.

Losing Consciousness

Victims may lose consciousness by any one or all of the following methods: blocking of the carotid arteries in the neck (depriving the brain of oxygen), blocking of the jugular veins (preventing deoxygenated blood from exiting the brain), and closing off the airway, making breathing impossible.

Strangulation has only recently been identified as one of the most lethal forms of domestic violence: ***unconsciousness may occur within seconds and death within minutes.*** When domestic violence perpetrators choke (strangle) their victims, not only is this a felonious assault, but it may be an attempted homicide. Strangulation is an ultimate *form of power and control*, where the batterer can demonstrate control over the victim's next breath; having devastating psychological effects or a potentially fatal outcome.

Sober and conscious victims of strangulation will first feel terror and severe pain. If strangulation persists, unconsciousness will follow. Before lapsing into unconsciousness, a strangulation victim will usually resist violently, often producing injuries of their own neck in an effort to claw off the assailant, and frequently also producing injury on the face or hands to their assailant. These defensive injuries may not be present if the victim is physically or chemically restrained before the assault.

Monitor Your SIGNS

Date &
Time

Journal Your Signs

Monitor Your Symptoms

Date &
Time

Journal Your Symptoms

Date & Time

Journal Any Other Sensation

Signs of Strangulation

Head- pinpoint red spots (petechiae) on scalp, hair pulled, bump(s), skull fracture, concussion.

Face- red or flushed, petechiae, scratch marks.

Eyes and Eyelids- petechiae to the left or right eyeball, bloodshot eyes.

Ear- petechiae (external and/or ear canal), bleeding from ear canal.

Nose- bloody nose, broken nose, petechiae.

Mouth- bruising, swollen tongue, swollen lips, cuts/abrasions.

Under the chin- redness, scratch marks, bruise(s), abrasions.

Neck- redness, scratch marks, fingernail impressions, bruise(s), abrasions, swelling, ligature marks.

Chest and Shoulders- redness, scratch marks, bruise(s), abrasions.

Symptoms of Strangulation

Voice changes- raspy and/or hoarse voice, coughing, unable to speak, complete loss of voice.

Swallowing changes- trouble swallowing, painful swallowing, neck pain, nausea/vomiting, drooling.

Breathing changes- difficulty breathing, hyperventilation, unable to breathe.

Behavioral changes- restlessness or combativeness, problems concentrating, amnesia, agitation, Post-traumatic Stress Syndrome, hallucinations.

Vision changes- complete loss or black & white vision, seeing 'stars', blurry, darkness, fuzzy around the eyes.

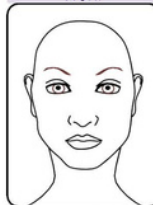
Hearing changes- complete loss of hearing, gurgling, ringing, buzzing, popping, pressure, tunnel-like hearing.

Other changes- Memory loss, unconsciousness, dizziness, headaches, involuntary urination or defecation, loss of strength, going limp.

Diagrams to Mark Visible Injuries

Use a pen or a marker to indicate any visible signs and/or symptoms.

Front



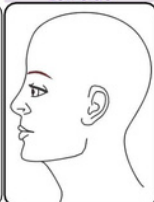
Under Chin



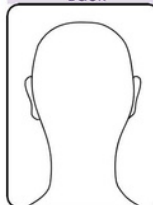
Right Side



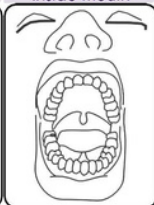
Left Side



Back



Inside Mouth





You are not alone

Confidential Helpline

321.726.8282

Text/TTY

NAME AND PHONE NUMBERS OF WHO TO CALL FOR HELP/SUPPORT



Educate • Advocate • Empower