



SEEKING JUSTICE
RESTORING HOPE

New Orleans Family Justice Center Strangulation Assessment 2016 Report

Recent research in the field of intimate partner violence has shown that prior non-fatal strangulation was associated with greater than six-fold odds of becoming an attempted homicide, and over seven-fold odds of becoming a completed homicide.* Due to this heightened risk, the New Orleans Family Justice Center, with assistance from the Training Institute on Strangulation Prevention, began conducting additional in-depth assessments for survivors who reported strangulation or attempted strangulation.

*Glass et al, Non-fatal strangulation is an important risk factor for homicide of women. J Emerg Med. 2008 Oct; 35(3): 329–335.
doi: 10.1016/j.jemermed.2007.02.065.

Strangulation Data

The strangulation assessment is a completely voluntary set of questions asked at intake if a survivor answers 'yes' on the Danger Assessment to 'Has s/he ever choked or tried to choke you?' Approximately **63%** of survivors answered 'yes' to the question of 'choking' on the Danger Assessment, but for several reasons, not all of those completed the strangulation assessment.

The following data was collected from January 1 - December 31, 2016 at the New Orleans Family Justice Center and Crescent House Domestic Violence Shelter.

New Intakes: 582

Danger Assessments: 532

'Yes' to 'choking': 334

Strangulation Assessments: 240

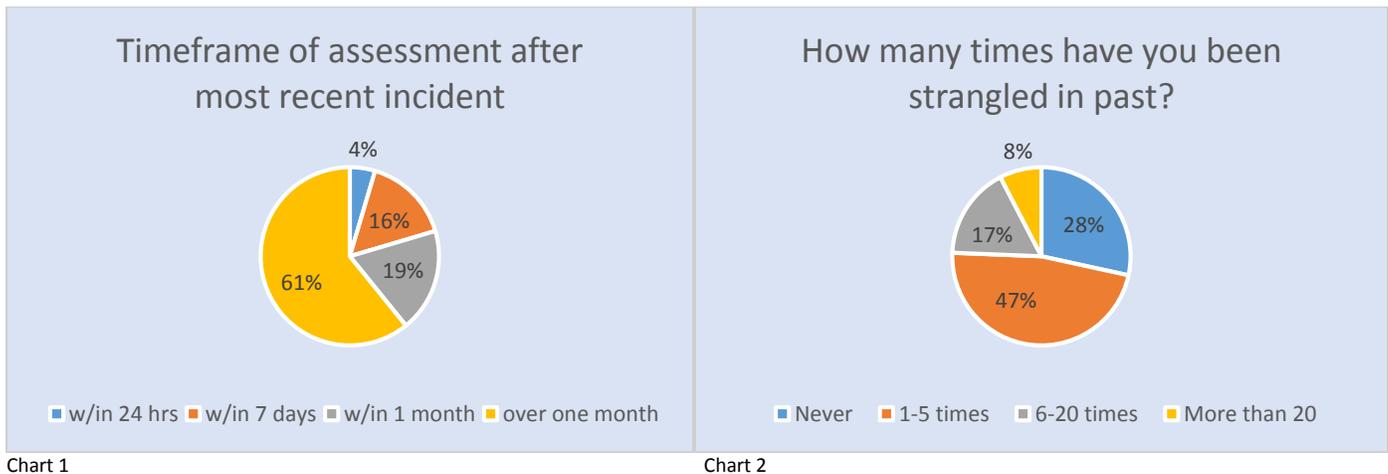


Chart 1

Chart 2

Chart 1: 20% were 'acute' cases, meaning that survivor disclosed to the NOFJC that an incident of strangulation occurred within the past 7 days. Forensic evidence, if available, could be collected for that 20%, and in some cases for those disclosing within a month.

Chart 2: To this open-ended questions, several survivors answered, 'more than 20', 'more than 50', 'more times than I can count', 'all the time', 'many times', 'whenever he got mad', 'over 100 times' (4 people)

- **In 34% of incidents (82), children witnessed strangulation**
- **In nearly 15% of cases (35), survivor was strangled more than once during the same incident**

Symptoms

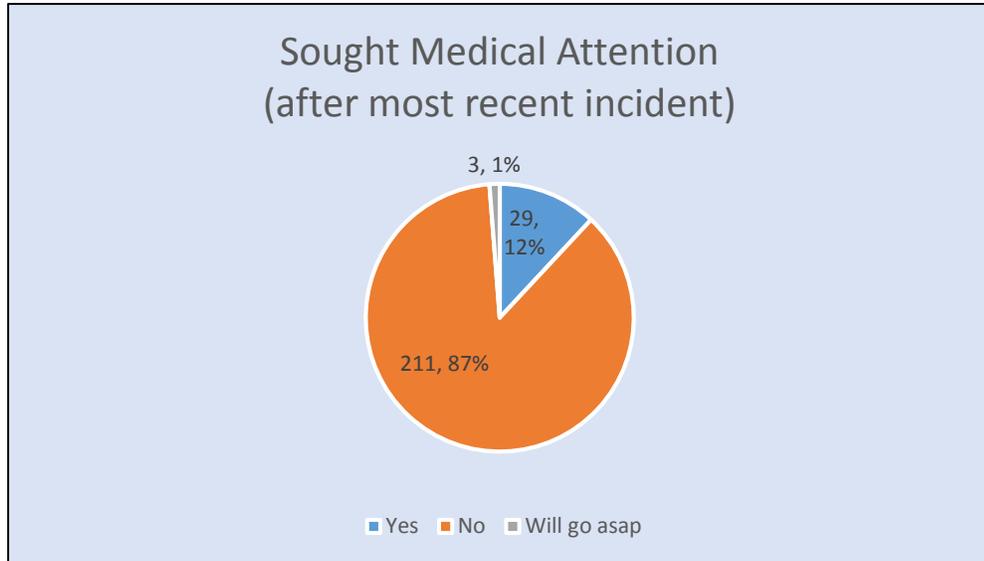
Part of the strangulation assessment is to inquire about symptoms present after the incident of strangulation. While not all survivors are symptomatic, symptoms may indicate a need for greater medical attention and may also be documented for forensic evidence to police.

Symptoms reported post-strangulation	
NO SYMPTOMS REPORTED	13% (31)
ONE OR MORE SYMPTOMS REPORTED	87% (209)

Of those symptomatic:	
Dizziness, headache, weakness, difficulty walking, shaking, visual changes, seizures and/or passed out	83% (174)
Difficulty breathing or voice changes (hyperventilating, coughing, hoarseness)	72% (149)
Bruising, redness, ligature and/or fingerprint impressions on neck	60% (126)
Swallowing changes (neck pain, trouble swallowing, painful swallowing, vomiting, drooling)	56% (117)
Cognitive (hallucinations, agitation, restlessness, combativeness, PTSD)	28% (66)
Bump on head and/or concussion	14% (29)
Bruised mouth, swollen tongue, swollen lips	13% (27)
Bleeding from ear or behind ear	12% (25)
Petechiae (face, nose, eyelids, ears or scalp)	8% (19)
Bloody eyeballs	7% (14)
Bloody or broken nose	4% (8)

Medical Attention and Treatment

It is the policy of the New Orleans Family Justice Center to strongly recommend and encourage medical attention and treatment to every survivor of strangulation when disclosed at any point during service provision. Advocates are trained to explain the impact of strangulation on a survivor's short and long-term health in a trauma-informed way. Ultimately, seeking medical attention is always the survivor's decision.

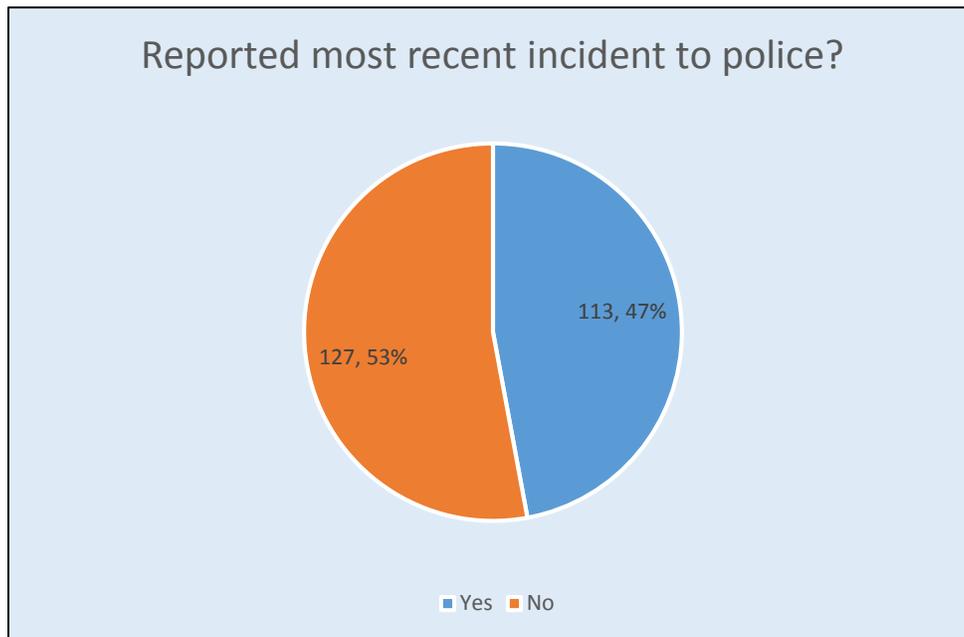


Locations of medical treatment			
Ochsner (various sites)	7	East Jefferson Hospital	1
EMS	3	UMC	1
West Jefferson	3	Crescent City Physicians	1
Urgent Care (St. Claude & MHM)	3	Prenatal at Touro	1
Primary Care Physician (unknown)	3	Prenatal (unknown)	1
Tulane (various)	3	Baton Rouge (unknown)	1
New Orleans East Hospital	2	'ER' (unknown)	1
Terrebonne General	1		

Law Enforcement Response

Police

The decision to report strangulation to the police is always an adult survivor's decision. The New Orleans Family Justice Center will facilitate such report, advocate for that survivor, and assist him or her in navigating the criminal justice response if that is what the survivor wishes to do.

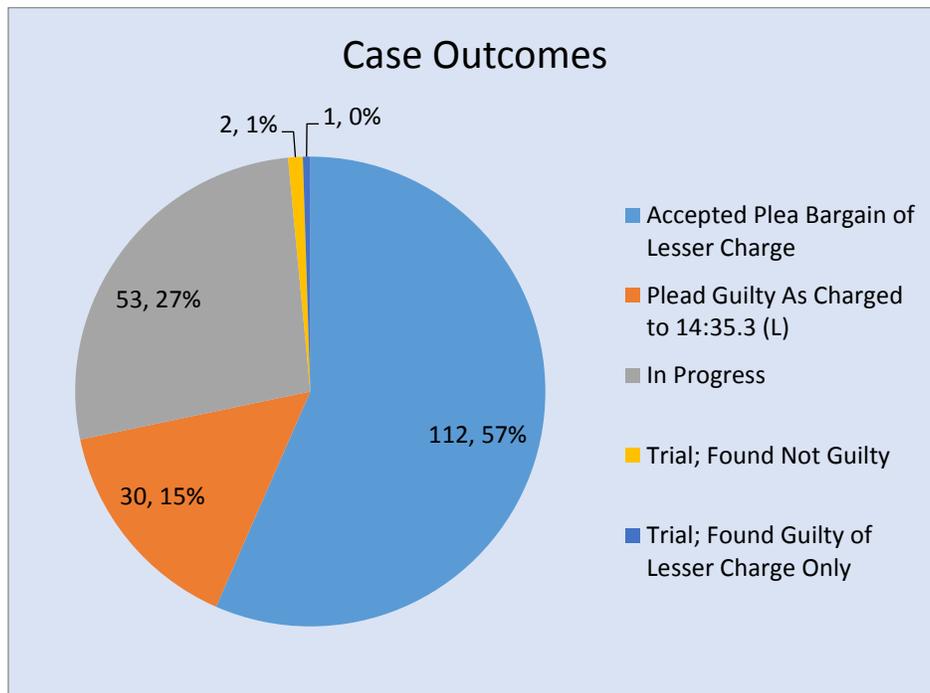


*Data collected from New Orleans Police Department indicates that **274** warrants for arrest were signed by judges in Orleans Criminal District Court for strangulation or attempted strangulation in 2016.*

Prosecution

The decision to prosecute a strangulation case is always at the discretion of the State of Louisiana via the District Attorney's office. Victim Advocates from the District Attorney's office, as well as advocates of the New Orleans Family Justice Center help survivors navigate and better understand the criminal justice response.

Data collected from Orleans District Attorney indicates that **211** cases of 'Domestic Abuse Battery by Strangulation' (14:35.3 L) were accepted for prosecution in 2016. However, several of those were multiple charges of strangulation for the same person, so **198** unduplicated perpetrators were prosecuted.



In many of the cases in which the offender plead guilty as charged to 14:35.3 (L), the State was attempting to charge the defendant as a repeat offender. It seems in those situations, that the State offered to not prosecute as a repeat offender in exchange for a guilty plea to strangulation.

There were also several cases in which the State agreed to not prosecute for strangulation in exchange for the defendant pleading guilty to crimes including but not limited to, 'disturbing the peace', 'simple battery', or 'domestic abuse battery'.

To the knowledge of the New Orleans Family Justice Center, there were no cases in which forensic evidence of strangulation was available and/or utilized in the prosecution of these cases.

Recommendations

Based on the above data, the New Orleans Family Justice Center recommends that greater forensic and medical attention be paid to both victims and perpetrators of strangulation in the City of New Orleans, including but not limited to the following:

- Greater resources must be dedicated towards criminal justice interventions and offender risk assessments which identify those most likely to strangle and/or kill their intimate partners
- More evidence of strangulation must be documented forensically and be made available to the criminal justice system
- Criminal cases must be prosecuted to fullest extent of the law as felonies rather than be plead down to lesser crimes or dismissed.
- Batterer Intervention Programs and private counselors who work with offenders must understand and be able to educate participants in their programs on the effects of strangulation in addition to the effect of witnessing strangulation on children.
- Greater resources must be dedicated to health care interventions which help survivors identify and mitigate brain damage and support their neurological healing to an extent beyond what the city currently offers.
- Health care professionals must be trained to assess for strangulation and provide health education and intervention to survivors.
- Increased mental health counseling resources are needed to address the extent of post-traumatic stress in survivors and child witnesses of strangulation.