

How can I look after myself?

Because we know that strangulation is a common form of abuse, it is possible this work may affect you in a number of ways and may raise some concerns for you. So please take care of your own wellbeing and seek support by accessing support services if needed.

Where can I find help?

In an emergency call:

Ambulance	000
Police	000
Police (non-urgent assistance)	13 14 44

Advice, information or help call:

Women's Health Service	8444 0700
Domestic Violence Services 1800 RESPECT	1800 737 732
Yarrow Place (Rape and Sexual Assault Service)	8226 8787
Nunkuwarrin Yunti (Aboriginal Health)	8406 1600
Mensline Australia	1300 789 978
No to Violence	1300 766 491
Lifeline	13 11 14
TIS (Telephone Interpreting Service)	13 14 50
Mental Health Triage	13 14 65

If your child/young adult needs support or help call:

Metropolitan Youth Health	8255 3477
Child & Adolescent Mental Health Service	1300 222 647
Kids Helpline	1800 551 800

Specialist Health Service: Women's Health Service or Yarrow Place can assess and refer appropriately. They can also document any injuries which may be useful as evidence in court if the client seeks police action. They can also provide certain clinical and counselling support.

Police:

Strangulation without consent is an assault and is against the law. The police can take a report, organise photographs of injuries and can support the client's safety.

Are you a medical practitioner?

If you are a medical practitioner, refer to the SA Health Strangulation Assessment Guidelines for further information. A medical response will depend on the strangulation injuries, any signs and symptoms and when the assault occurred. Specific screening tests may be required and a referral letter to the Emergency Department or specialist should be considered. Accurate documentation of any injuries, symptoms and recommendations offered should also be recorded. Speak with specialist staff at Women's Health Service or Yarrow Place for further information.

Confidentiality

Ensure the client is aware that any information they disclose will NOT be shared with the person that assaulted them or anyone they are connected with (like family or friends).

For Information

For further information, please contact
Women'sSafetyStrategyWCHN@sa.gov.au



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Government of South Australia
Women's and Children's
Health Network

Has your client been strangled?

Information Service Providers need to know

Who is this brochure for?

This pamphlet provides information to help you support your client if they have been strangled.

What is strangulation?

Strangulation occurs when pressure is applied to the neck, obstructing the airflow and blood vessels to and from the brain. This may result in asphyxia with extensive damage to the brain and neck structures. Strangulation can occur in a number of different ways: pressure from a hand or hands or ligature (such as a rope or belt) around the neck; or when something is pushed against the neck or over the mouth and nose. Sometimes clients will refer to strangulation as "being choked".

How common is strangulation?

Domestic and family violence (DFV) is a significant health issue and strangulation is used by the perpetrator to demonstrate their ultimate power to take the life of the victim. Indeed, few other acts of violence cause such serious psychological and physical harm without obvious visible injury to the body.

Sometimes clients do not disclose strangulation in the context of DFV. This will need to be explored with sensitivity as part of your assessment; so always ask if pressure was applied to the neck.

Is strangulation illegal?

Yes, strangulation without consent is illegal. Sometimes people consent to a range of activities, but in the context of DFV there is no consent. It is an offence for a person to choke, suffocate or strangle another person without consent that they are in or have been in a relationship with (Criminal Law Consolidation Act 1935, Version 31.1.2019). This also includes family or kinship relationships and may carry a maximum penalty of up to 7 years imprisonment.

When a person is strangled, they are more likely to be harmed again or even killed in the future by that partner or ex-partner. Strangulation is a WARNING SIGN for future harm or homicide.

Being strangled can be a very frightening experience. 70% of women who have been strangled believed they were going to die.

Is strangulation dangerous?

Yes, strangulation is a dangerous assault considered more dangerous than many other forms of physical violence. It is a significant risk factor for increased severity of DFV and future homicide. Strangulation is also a risk factor for future serious health impacts, in particular:

- brain injury
- severe psychological distress
- harm to the developing foetus (if pregnant)

What can happen to someone who has been strangled?

Most people will survive being strangled and will be OK, however serious injury or even death can occur long after the assault. Despite the obvious lack of marks, the possible health impacts include:

- airway obstruction
- injury to the bony structures and blood vessels of the neck and upper spinal cord
- brain injury
- pregnancy complications or loss
- significant mental health injury

The person may have ongoing symptoms including:

- problems breathing or swallowing
- problems speaking or voice changes
- coughing or pain/swelling in their throat or neck
- vomiting or nausea
- red or blood-shot eyes
- feeling dizzy, lightheaded, have ringing in their ears or have a headache
- neurological or cognitive changes (memory loss, confusion, or restlessness)
- weakness, numbness or a droop on one side of their body or face

People often think that they are OK following strangulation; however, these injuries can get worse in the hours, days or even weeks after being strangled and is made worse the more times strangulation occurs.

Is this an EMERGENCY?

It is important the client seeks **urgent medical care** if they:

- were strangled within 72 hours
- have any signs or symptoms outlined above
- are pregnant
- have been strangled multiple times

Being strangled may cause severe psychological distress and your client is likely to experience a trauma response. This can range from reactions such as trembling and racing thoughts to anxiety, depression or suicidal ideation. It is important the client receives timely support to manage the effects of this trauma so link them in with services suggested in this brochure.

What should I do as a Service Provider?

This will depend on when the strangulation occurred, what symptoms are present and if the client is pregnant. Contact specialist DFV services for advice if you are unsure. As a guide:

- Call an ambulance if concerned about the person's medical condition (e.g. trouble breathing, reduced level of consciousness or neurological symptoms)
- Support the client to seek **urgent** medical care in the first 72 hours post the assault
- Contact services listed over-leaf to arrange medical review
- Complete a safety plan (seek support from SAPOL or DFV services if needed)
- Provide mental health support or refer as needed
- If possible, encourage the client to stay with someone they trust for 24 hrs
- Provide strangulation consumer information
- Provide emergency/crisis information numbers
- Complete a DFV Risk Assessment (officeforwomen.sa.gov.au)
- Complete a CARL report (ph. 13 14 78)

Always create an environment that is trauma informed and enhances safety by being calm, kind and caring. Acknowledge the person's courage and strength in disclosing and believe, reassure and provide non-judgemental support while linking the client in with specialist services.