



## MAINE COMMISSION ON DOMESTIC AND SEXUAL ABUSE

### REPORT TO THE JOINT STANDING COMMITTEE ON JUDICIARY

In Response to LD 1572, An Act Regarding Prosecution Standards for Nonfatal Strangulation or Suffocation in Domestic Violence Cases

**JANUARY 2026**

#### **A. Statement of Purpose**

The Joint Standing Committee on Judiciary, in the 1<sup>st</sup> Session of the 132<sup>nd</sup> Maine Legislature, considered a proposal meant to improve the criminal legal system response to strangulation and suffocation in domestic violence cases. Ultimately, the Judiciary Committee determined more information would be helpful to the Committee before deciding what to do with this proposal. The Committee carried over LD 1572, An Act Regarding Prosecution Standards for Nonfatal Strangulation or Suffocation in Domestic Violence Cases,<sup>1</sup> to the 2<sup>nd</sup> Session. The Committee directed a request (Appendix A) to the Maine Commission on Domestic and Sexual Abuse (the Commission)<sup>2</sup> to review several issues and report back to the Judiciary Committee by January 15, 2026, together with any recommendations for legislative action.

The Commission created a Strangulation and Suffocation Action Group in June 2025 to respond to the Judiciary Committee's request. The Commission directed the action group to prioritize review of the following issues:

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<sup>1</sup> See LD 1572, An Act Regarding Prosecution Standards for Nonfatal Strangulation or Suffocation in Domestic Violence Cases, available at: <https://legislature.maine.gov/bills/getPDF.asp?paper=HP1030&item=1&snum=132>.

<sup>2</sup> See 19-A M.R.S. § 4013(3), "The commission shall advise and assist the executive, legislative, and judicial branches of State Government on issues related to domestic and sexual abuse. The commission may make recommendations on legislative and policy actions, including training of the various law enforcement officers, prosecutors and judicial officers responsible for enforcing and carrying out the provisions of this chapter, and may undertake research development and program initiatives consistent with this section."

- Whether and how to move strangulation out of the aggravated assault statute to be named as a separate crime;
- Whether and how to define suffocation in Maine’s criminal code;
- Any need for mandatory training on strangulation and/or suffocation for any criminal legal system discipline; and
- How other states address these and other issues as part of their criminal legal system’s response to strangulation and suffocation.

## **B. Description of Working Group Structure and Process**

The Strangulation and Suffocation Action Group (the action group) was comprised of a subset of members of the Abuse Commission and others with helpful and relevant experience to support a productive course of discussions.

Members of the Working Group:

- Attorney Andrea Mancuso, Public Policy Dir., Maine Coalition to End Domestic Violence (chair)
- Kelly O’Connor, System Advocacy Dir., Maine Coalition to End Domestic Violence
- Assistant District Attorney Alice Clifford, Penobscot County (Abuse Commission)
- Attorney Shira Burns, Executive Director, Maine Prosecutors Association
- Assistant Attorney General Laura Yustak, Criminal Division, Office of the Maine Attorney General (Attorney General’s designee to the Abuse Commission)<sup>3</sup>
- Lt. Michael Johnson, Maine State Police (Abuse Commission, designee of Col. William Ross )
- Maggie McArthur, System Advocacy Coordinator, Next Step Domestic Violence Project (Abuse commission)
- Attorney Melissa Martin, Public Policy and Legal Dir., Maine Coalition Against Sexual Assault
- Chief Mark Hathaway, Bangor Police Department (Abuse Commission)
- Attorney Cara Cookson, Director of Victim Services, Maine Office of the Attorney General (Abuse Commission)
- Jennifer Annis, Project Manager, Violence Intervention Partnership (Abuse Commission)
- Chief Douglas Snyder, Boothbay Harbor Police Department
- State Representative Holly Stover

Additionally, the action group had the benefit of consultation with several in-state medical professionals with expertise in both the physical effects of and medical response to strangulation and suffocation. The Abuse Commission thanks the following medical experts for their time and

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<sup>3</sup> AAG Yustak provided technical assistance and legal input to the work of the Action Group, which does not constitute the position of the Office of the Attorney General on any proposed legislation.

collaboration and for their ongoing work to support victims of strangulation and suffocation in Maine.

- Keri Kapaldo, BSN, RN, SANE-A, ME-SAFE-A/P St. Joseph Hospital, SAFE Program Coordinator
- Emily Hilton, RN, B.S.N., Maine Medical Center
- Polly Campbell, RN, BS, BA, Clinical Director of the Advanced Nursing Education Sexual Assault Nurse Examiner Program, University of New England
- Shaun Johnson, BSN, RN, ME-SAFE-A, Regional Coordinator, Advanced Nursing Education, Sexual Assault Nurse Examiner Program, University of New England
- Julie Leblanc, RN, SANE-A, ME-SAFE-A/P, Maine Health at Lincoln County, Pen Bay, and Waldo County Hospitals, Program Coordinator, Advanced Nursing Education Sexual Assault Nurse Examiner Program.

The action group met approximately every other week from mid-summer into the fall.<sup>4</sup> Over the course of several months, the action group reviewed relevant information, including: Maine statutes (Appendix B); the statutory approaches in other states to strangulation and suffocation in criminal codes (Appendix C); Maine case law (Appendix D); and the Abuse Commission's 2012 report on strangulation (Appendix E), which had served as the basis for the explicit notation of strangulation as a type of assault that manifests extreme indifference to human life in our aggravated assault statute. The action group also held a meeting at which the above medical care providers with expertise in responding to strangulation and suffocation were invited to share their knowledge and perspective.

Ultimately, the Abuse Commission has concluded that **Maine's criminal justice system responses to the use of non-fatal strangulation and non-fatal suffocation as methods for committing assault could be improved.** To that end the Abuse Commission makes several findings and recommendations for consideration by Maine's legislative, judicial and executive branches.

### **C. Findings and Recommendations**

Non-fatal strangulation and non-fatal suffocation are serious public health and criminal justice issues, with significant, potentially life-altering effects for the victim. More than 10 years ago, Maine joined a growing number of states in modifying criminal statutes to explicitly name strangulation as a method of assault that, when used, should always be considered as an act that manifests extreme indifference to human life. Since that time, states have continued to advance their statutes to respond to these crimes, with 49 states now having criminal statutes that explicitly name strangulation, and 28 states explicitly naming suffocation.

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<sup>4</sup> Meetings were held on July 16<sup>th</sup>, July 31<sup>st</sup>, August 14<sup>th</sup>, September 11<sup>th</sup>, September 25<sup>th</sup>, and January 15<sup>th</sup>.

Strangulation is frequently linked to domestic violence homicide. For more than 10 years, Maine’s Domestic Abuse Homicide Review Panel has consistently observed that in at least 25% of domestic abuse homicides in Maine, the perpetrator had committed non-fatal strangulation prior to committing the homicide.<sup>5</sup> As noted in the 2022 report from the Domestic Abuse Homicide Review Panel, “Strangulation is a significant risk factor for future lethal violence and must be treated with the seriousness it warrants.” The Abuse Commission appreciates the invitation from the Maine Legislature to look at the state’s response to strangulation and suffocation with renewed energy.

The Abuse Commission makes the following findings and recommendations, which are reviewed in more detail below.

**i. Updates are Needed to Maine’s Criminal Code  
to Better Respond to Strangulation & Suffocation Assaults**

Several years ago, the Abuse Commission conducted a study and made a recommendation for codification of strangulation in Maine’s criminal code.<sup>6</sup> At that time, the Abuse Commission recommended that strangulation be explicitly named in the aggravated assault statute and proposed language to accomplish this. The Abuse Commission’s proposal was codified and became effective in mid 2012. Strangulation is currently named in Maine’s aggravated assault statute as an assault type that, by its very nature, always manifests an extreme indifference to human life.<sup>7</sup> Maine now has had more than a decade of experience with the current structure of the aggravated assault statute. With the benefit of that experience, the Abuse Commission takes this opportunity to recommend a structural update to improve Maine’s response to these dangerous crimes.

Additionally, since the explicit codification of strangulation, there has been interest articulated to similarly codify assaults committed by suffocation, as an asphyxiation-based assault type that can and does cause equally devastating short-term and long-term consequences. It is clear not all forms of asphyxiation are covered by the current statutory definition of strangulation. Common types of suffocation assault observed in domestic violence cases by system partners consulted as part of the Abuse Commission’s discussion include:

- Airway obstruction by covering the nose and mouth with hands or a pillow;

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<sup>5</sup> Maine Domestic Abuse Homicide Review Panel (2020). *13th Biennial Report: A 20 Year Lookback*. Augusta, ME: Office of the Attorney General. Available at: <https://www.maine.gov/ag/docs/DAHRP-Report-for-Posting-ACCESSIBLE.pdf> (pg 18).

<sup>6</sup> Maine Commission on Domestic and Sexual Abuse (February 2012). *Report to the Joint Standing Committee on Criminal Justice and Public Safety, Pursuant to Resolve 2011, Chapter 76 (LD 1027)*.

<sup>7</sup> *State v. Saucier*, 2015 ME 144, 126 A.2d 1159 (2015), holding “Section 208(1)(C) plainly defines strangulation as an application of force to a person’s neck or throat that is sufficient to impede a person’s breathing or circulation. The statute includes strangulation as a circumstance that manifests extreme indifference to human life. Here, the victim’s testimony supports the court’s finding that Saucier applied enough force to the victim’s neck to impede her breathing, and that evidence is sufficient to support Saucier’s conviction for aggravated assault.”

- Mechanical asphyxia by positioning a victim such that their upper body cannot expand, such as folding the person down in a chair or small space confinement;
- Being held facedown while the perpetrator sits or lays on the victim's back, preventing chest expansion;
- Held down while the perpetrator sits or kneels on the victim's chest, preventing chest expansion.

Not one of the suffocation assaults in the above list could be considered “strangulation” in Maine, which is defined in the criminal code as, “impeding the breathing or circulation of the blood of another person by intentionally, knowingly or recklessly applying pressure on the person’s throat or neck.” Suffocation is equally as dangerous to human life as strangulation, and the Abuse Commission takes this opportunity to recommend that suffocation crimes be treated in the aggravated assault statutes as equivalent to strangulation crimes.

With respect to the current aggravated assault statute:

- As noted in the statute, and upheld by the Maine Law Court, in cases where the State can prove the assault was perpetrated by use of strangulation, there is no need for the State to independently establish that the assault manifested an extreme indifference to human life. However, the current structure of the statute has led to complicated jury instructions when the State has alleged aggravated assault by strangulation. As a result, Maine prosecutors experience a significant challenge with ensuring the average juror understands the overly complicated wording of the statute.
- Though aggravated assault charges have increased in volume since the modification to explicitly name strangulation as a felony-level behavior,<sup>8</sup> Maine is currently unable to identify which aggravated assault cases charged in our criminal legal system involve strangulation. As a result, the State is unable to meaningfully evaluate:
  - prevalence of strangulation in our criminal legal system;
  - how strangulation cases are handled from charging through sentence completion; or
  - whether there are any notable local or regional disparities in response.

When community members in any given county or region observe a pattern of these case types being systemically minimized, it is not possible to obtain data to evaluate practice, nor is it possible to determine if any given practice or trend reflects a statewide problem or is instead a local or regional variance. Without this data, it is exceedingly difficult to

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<sup>8</sup> A Portland Press Herald analysis in 2014 found that the charging of aggravated assaults, under the provision in which strangulation was explicitly named in 2012 went up 61% from 2011 through 2013 (29 in 2011 to 170 in 2013) (<https://www.pressherald.com/2014/09/01/charges-go-way-up-in-maine-after-law-change-on-strangling/>).

determine what next steps would be most helpful and efficient to improving Maine's response to these potentially lethal crimes.

Data is essential information to determining whether efforts should be prioritized towards supporting a particular aspect of the State's response. For example, the state has good data across the criminal legal system response with respect to how stalking cases are handled. Though the prevalence of stalking cases in our criminal legal system overall is incredibly low, as compared to what research and experience tells us in terms of prevalence in the experience of domestic violence victims, the data about cases that are charged tell us that, where stalking is charged in Maine, conviction rates are relatively high. That data has allowed system partners to understand that efforts to improve criminal legal system response to intimate partner stalking are not best focused on prosecutors but instead on supporting law enforcement with identification and investigation of this patterned crime.

At a time where legal system resources are stretched exceedingly thin, it is essential for the State to understand how to most efficiently and effectively address public safety gaps. With respect to the State's response to strangulation, the current inability to obtain relevant data in Maine makes that an unachievable goal.

- There is significant precedent for structurally separating out strangulation as a method of assault in criminal codes. At least 20 other states have criminal codes wherein strangulation is a separate crime, set out in an independent statute section. Many of the other states who similarly embed assault by strangulation into a broader assault statute do so by denoting strangulation in its own subsection or subparagraph. In the vast majority of other states, criminal codes are structured to allow for better data collection on strangulation cases.
- Suffocation, like strangulation, is an assault type that, by its nature, manifests an extreme indifference to human life. The Abuse Commission consulted with five in-state medical experts on strangulation and suffocation, several of whom have been qualified by Maine's criminal courts to provide expert testimony on these very issues. Each of these medical experts confirmed that, clinically, there are no appreciable differences in the lethality risks and long-term medical complications that can result from suffocation as compared to those that result from strangulation.

Short term impacts include: hypoxia, swelling of the airway, aspiration, increased heart rate, risk of memory gaps, increased agitation, anxiety, headaches, and panic.

Medium term impacts include: increased frequency of headaches and migraines; complications connected to certain co-morbidities such as COPD, congestive heart

failure, substance use, and asthma; changes in voice; increased likelihood of pneumonia; cognitive deficit stemming from anoxic brain injury, wherein part of the brain dies; stroke-like symptoms; chronic respiratory issues; sleep apnea; and persistent neuro impairment.

Long term impacts include: recurring low oxygen events; early onset of dementia; encephalitis; and increased risk of stroke.

As noted by these medical experts, while there appears to be robust amount of literature on non-fatal strangulation, including specifically non-fatal strangulation in domestic violence cases, the same cannot be said for literature specific to non-fatal suffocation. However, both strangulation and suffocation involve the deprivation of oxygen and blood to the brain and lungs, both have substantially the same impacts and risks for long term negative health consequences, up to and including those that result in shortened life-span. **In the consensus opinion of the medical experts consulted by the Abuse Commission, there is no clinical basis to consider suffocation any less life-threatening than strangulation.** As one medical expert consultant noted: “Sustained lack of oxygen to the brain is not sustainable to life.” The Abuse Commission adopts this consensus opinion and further finds there is no compelling policy justification to treat these assault types differently in Maine’s criminal legal response.

- Despite the similar risks of lethality and long-term medical impacts as between suffocation and strangulation, Maine is unable to successfully prosecute suffocation assaults committed under the aggravated assault statute without expert testimony in each case to ensure evidence in the individual trial record concerning the use of suffocation as an action that manifests extreme indifference to human life.
- Maine’s Domestic Abuse Homicide Review Panel has recommended law enforcement officers investigate acts of suffocation to support the charging of aggravated assault.<sup>9</sup> To date there has not been robust implementation of this recommendation. Law enforcement representatives to the Abuse Commission observe that explicitly naming strangulation in the aggravated assault statute led the improvements to date for identification and investigation of strangulation and expect that a similar explicit codification of suffocation would be likely to have the same result.
- Similarly to strangulation, the current structure of Maine’s aggravated assault statute does not provide a mechanism for Maine to have any quality data on the prevalence of suffocation in our criminal legal system or the system’s response to this type of assault.

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<sup>9</sup> Maine Domestic Abuse Homicide Review Panel (2016). *11th Report of the Maine Domestic Abuse Homicide Review Panel*. Augusta, ME: Office of the Attorney General.



In response to these findings, the Abuse Commission **RECOMMENDS** that the aggravated assault statute be modified by the Maine Legislature to:

1. Separate out those assaults committed by strangulation into a separate sub-paragraph; and
2. Add a separate sub-paragraph to expressly name assaults committed by suffocation as an assault type that qualifies as an aggravated assault in Maine.

The following statutory amendment to Maine's Aggravated Assault Statute (Title 17-A, section 208) is proposed by the Abuse Commission (located in Appendix F).<sup>10</sup>

C. Bodily injury to another under circumstances manifesting extreme indifference to the value of human life. Such circumstances include, but are not limited to, the number, location or nature of the injuries, the manner or method inflicted, ~~or the observable physical condition of the victim or the use of strangulation. For the purpose of this paragraph, "strangulation" means impeding the breathing or circulation of the blood of another person by intentionally, knowingly or recklessly applying pressure on the person's throat or neck.~~ Violation of this paragraph is a Class B crime.

2. [repealed]

3. Strangulation. A person is guilty of aggravated assault by strangulation if that person impedes the breathing or circulation of blood by intentionally, knowingly, or recklessly applying pressure on another person's throat or neck. Violation of this sub-section is a Class B Crime.

4. Suffocation. A person is guilty of aggravated assault by suffocation if that person impedes the breathing or circulation of blood by intentionally, knowingly, or recklessly applying pressure on another person's chest or blocking another person's nose and mouth. Violation of this sub-section is a Class B Crime

## **ii. Quality Training is Essential for All Disciplines Involved in Maine's Criminal Legal System Response to Strangulation and Suffocation Assaults**

Though there has certainly been improvement in the criminal legal system's response to strangulation since the express codification of strangulation in Maine's aggravated assault statute more than a decade ago, including an overall increase in the charging of aggravated assault, the Abuse Commission's action group discussed several instances that demonstrate some prosecutors and judges continue to minimize the dangerousness indicated by a defendant having used strangulation or suffocation to assault their partner, to specifically include articulating a defendant's intoxication as justification and excuse for the serious level of violence used. These observations align with findings made by Maine's Domestic Abuse Homicide Review Panel in

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<sup>10</sup> In proposed language to explicitly codify suffocation in the aggravated assault statute, the Abuse Commission's action group observed that medical definitions for suffocation and asphyxiation are more comprehensive and detailed than those typically contained in state criminal codes. The action group reviewed the suffocation definitions used in the criminal codes of other states and the proposed language substantially aligns with the consistent approach used in other criminal codes.



it's 14<sup>th</sup> Biennial Report in 2023: “The Panel observes, after the review of multiple cases involving fatal strangulation, that in some of those cases, the dynamics, mechanics, and impacts of strangulation do not appear to be understood by the Court or the parties.”

The action group also discussed examples where other system partners, who often come to be interacting with victims of strangulation closer in time to the assault, such as advocates, medical professionals and law enforcement, did not timely identify strangulation as part of the victim's experience of a physical assault. **Early identification is essential to ensure a victim of strangulation or suffocation has access to appropriate medical intervention and support** and that perpetrators of these dangerous assaults can be held accountable for their potentially lethal violence.

Certain law enforcement departments and specialized prosecutors in particular regions have benefited from training provided by in-state teams that have attended the Training Institute on Strangulation Prevention<sup>11</sup> and who have brought that training back to Maine. Training from the Institute is widely recognized as the preeminent training on strangulation and suffocation nationwide. Law enforcement members of the action group noted that this training on strangulation has been incredibly helpful in their field to supporting law enforcement officers in identifying, investigating and responding to strangulation assaults. However, training for law enforcement on strangulation and suffocation is not currently universal or even centrally coordinated in Maine.

Medical experts consulted on the issue of education and training on strangulation and suffocation for medical professionals similarly note its importance to timely detection and response. Each of the medical experts consulted has participated in providing training on strangulation and suffocation to their peers. However, each also noted this type of training is not universally or widely available, and specifically additionally noted observed gaps in training for Emergency Medical Services professionals and law enforcement officers.

With respect to training and education on strangulation and suffocation for criminal legal system professionals in Maine, the Abuse Commission **RECOMMENDS**:

- The following entities should each create a plan to ensure training for all professionals noted below by 2030. The training should include, at a minimum, the effects of strangulation and suffocation, the laws related to strangulation and suffocation, and the services available to victims of strangulation and suffocation. Each entity should include in its plan how it will ensure professionals newly hired to their respective roles receive such training within their first two years of service.

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<sup>11</sup> The Training Institute on Strangulation Prevention is widely recognized as the preeminent source for quality training on strangulation and suffocation. The Institute host train-the-trainer sessions wherein teams that include a law enforcement officer, a prosecutor, a medical professional and an advocate are supported to become in-state trainers on these issues. Over the last 10 years, Maine has sent a number of Maine professionals to train-the-trainer sessions to become qualified to provide this training as part of a training team.

- The Maine Criminal Justice Academy for all law enforcement officers, with emphasis on creating opportunities for in-person training;
- The Maine Office of the Attorney General and the Maine Prosecutors Association for all prosecutors, investigators and victim witness advocates responsible for cases involving interpersonal violence;
- The Maine Judicial Branch for all judicial officers, mediators, and guardians ad litem; and
- The Maine Department of Public Safety, Emergency Medical Services Board for all emergency medical services providers.

The above entities should adopt policies to ensure universal compliance with their training plans.

- The Maine Sexual Assault Forensic Examiner Program at the Maine Department of Health and Human Services should continue to work with the Maine Coalition to End Domestic Violence and the Maine Coalition Against Sexual Assault to provide training, education, and outreach to medical professionals on the effects of strangulation and suffocation, Maine laws related to strangulation and suffocation, and services available to victims of strangulation and suffocation.<sup>12</sup>

The Abuse Commission observes that statutory mandates for specific amounts of training on particular topics can be cumbersome to implement, often require the uncompensated participation of other system partners to ensure quality of content, may not be indicated or a continued priority over the long-term, and are most appropriate when there is evidence that statutory mandate is needed. **The Abuse Commission does not recommend statutory mandates for training on strangulation and suffocation at this time.**

The Abuse Commission notes its statutory charge includes a responsibility to make recommendations not only to the Maine Legislature, but also to the Maine Judicial Branch, as well as to the executive branch and its agencies. As such, the Abuse Commission makes the above recommendations to the noted entities through its existing statutory charge and will follow up with the above entities to share these recommendations and coordinate available expertise and support.

#### **D. Summary and Conclusion**

The Abuse Commission is mindful that policymakers must exercise caution around creating specialty crimes for conduct that is, at its core, already criminalized by current statutory language. However, the Maine Legislature recognized more than a decade ago, that explicitly

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<sup>12</sup> The SAFE program should also ensure an invitation to participate in this collaboration is extended to the Wabanaki Women's Coalition, such that the project has an opportunity to benefit from the expertise of tribal domestic violence and sexual assault response programs in Maine.

naming strangulation as an assault type that, by its nature, always manifests extreme indifference to the value of human life, was justified, given the severity and implications. Statutory clarity will aid in efforts to continue to implement an appropriate response.

Suffocation is similarly appropriate for differentiation given its connection to lethality and long-term severe adverse health outcomes, particularly in domestic violence cases. Explicit codification of suffocation, to align with strangulation, addresses the one lethality factor that the Domestic Abuse Homicide Review Panel has looked at that is not yet explicitly named in Maine's criminal code. Both of these recommended adjustments to the aggravated assault statute will simplify the current statute, making it easier for all involved to understand and apply.

Though the Abuse Commission was unable to fully engage with and make recommendations on the full list of the issues outlined in the request received from the Joint Standing Committee on Judiciary, the Abuse Commission has authorized the continuation of its strangulation and suffocation action group to both follow up on the above training recommendations as well as to engage in review and discussion of the other items. The Abuse Commission can provide an update to the Maine Legislature through the Commission's next annual report in 2027.

# APPENDIX A

## SENATE

ANNE M. CARNEY, DISTRICT 29, CHAIR  
RACHEL TALBOT ROSS, DISTRICT 28  
DAVID G. HAGGAN, DISTRICT 10

JANET STOCCO, LEGISLATIVE ANALYST  
ELIAS MURPHY, LEGISLATIVE ANALYST  
SUSAN PINETTE, COMMITTEE CLERK



## HOUSE

AMY D. KUHN, FALMOUTH, CHAIR  
ADAM R. LEE, AUBURN  
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RACHEL A. HENDERSON, RUMFORD  
ELIZABETH M. CARUSO, CARATUNK  
MARK MICHAEL BABIN, FORT FAIRFIELD  
AARON M. DANA, PASSAMAQUODDY TRIBE

### STATE OF MAINE ONE HUNDRED AND THIRTY-SECOND LEGISLATURE COMMITTEE ON JUDICIARY

June 18, 2025

Rebecca Austin, Acting Chair  
Maine Commission on Domestic and Sexual Abuse  
c/o Safe Voices  
P.O. Box 713  
Auburn, Maine 04212

*Re: Laws Governing Domestic Violence Offenses Involving Strangulation and Suffocation*

Dear Acting Chair Austin,

As the Maine Domestic Abuse Homicide Review Panel has noted and as you no doubt know, research demonstrates that nonfatal strangulation and suffocation domestic violence offenses are a significant risk factor for future lethal violence. Recently, the Judiciary Committee considered LD 1572, An Act Regarding Prosecution Standards for Nonfatal Strangulation or Suffocation in Domestic Violence Cases, designed to recognize the significance of these offenses in Maine law.

At the public hearing the Maine Prosecutors Association (MPA), Maine Judicial Branch, Maine Association of Criminal Defense Lawyers (MACDL) and Criminal Law Advisory Commission (CLAC) submitted testimony raising several constitutional concerns regarding the original bill language. In response, the bill sponsor proposed an amendment that would have replaced the language of the bill and would have made the following changes to the aggravated assault and domestic violence aggravated assault statutes, 17-A M.R.S. §208(1)(C) & §208-D(1)(D), which as you know currently make it a Class B crime to intentionally, knowingly or recklessly causing bodily injury to another person under circumstances manifesting extreme indifference to the value of human life:

- Removing reference to “strangulation” within these provisions and instead creating distinct Class B crimes of aggravated assault and domestic violence aggravated assault applicable when a person strangles or suffocates another person. The proposal would retain the definition of “strangulation” in current law and newly define “suffocation” as “impeding the breathing or circulation of the blood of another person by intentionally, knowingly or recklessly applying pressure on the person’s nose, mouth or chest.” By placing these offenses in separate provisions of the aggravated assault and domestic violence aggravated assault statutes, the sponsor intended to enable the collection of data specific to strangulation and suffocation offenses. *See* Proposed Amend. §B-2 & §B-5 (proposing new §208(3) and §208-D(1)(E)).



- Elevating from a Class B crime to a Class A crime the crime of domestic violence assault by strangulation or suffocation if, when the defendant commits the crime, the defendant has previously been convicted of one or more specific domestic violence crimes. *See* Proposed Amend. §B-3 (proposing new §208-D(1)(F)).

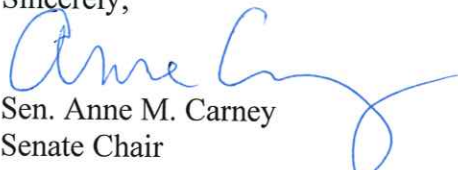
The sponsor's proposed amendment to LD 1572 would have also:


- Established a statutory exception to Rule 404(b) of the Maine Rules of Evidence applicable when a defendant is charged with a crime involving domestic violence that would permit the introduction into evidence of the defendant's commission of other acts of domestic violence for any purpose for which it is relevant as long as the probative value of the evidence is not substantially outweighed by the danger of unfair prejudice, confusing the issues, misleading the jury, undue delay, wasting time or needlessly presenting cumulative evidence as provided in Rule 403. *See* Proposed Amend. §C-1.
- Required the Attorney General, in consultation with a statewide coalition of domestic violence projects, to develop and provide to all prosecutors in the State both a multidisciplinary, comprehensive training and an annual training program on the significance of and best practices in both responding to and preventing nonfatal strangulation and suffocation domestic violence offenses. The proposed amendment would also require the Chief Justice of the Supreme Judicial Court to develop a similar training for all state court judges and justices. *See* Proposed Amend. §§A-1 & A-2.
- Required the Chief Justice to submit a report to the Legislature on December 31, 2029 regarding the number of individuals charged with and convicted of aggravated assault and domestic violence aggravated assault crimes involving strangulation and suffocation.

*A copy of this proposal is attached for your review.* While committee members were grateful to the sponsor for responding to the constitutional concerns through this proposed amendment, the committee ultimately agreed to carry over this bill because further study of the issues surrounding domestic violence strangulation and suffocation offenses is warranted. We believe that the Maine Commission on Domestic and Sexual Abuse, with its broad membership among relevant stakeholders with expertise in this area of the law, is uniquely positioned to conduct this work and we were delighted to hear that the commission is willing to undertake this important project.

Specifically, we respectfully request that the commission examine whether the elements of the crimes of aggravated assault and domestic violence aggravated assault, including definitions applicable to strangulation and suffocation offenses, are clear and appropriate; whether the class of crime applicable to these offenses is appropriate; the best method for ensuring the availability of data on domestic violence nonfatal strangulation and suffocation offenses in the State; and any other issues the commission believes are important related to the prosecution of these offenses. We request that the commission submit a report, including any legislative recommendations, to the Joint Standing Committee on the Judiciary no later than January 15, 2025.

Sincerely,

  
Sen. Anne M. Carney  
Senate Chair

  
Rep. Amy D. Kuhn  
House Chair

c: Joint Standing Committee on the Judiciary

**§208. Aggravated assault**

1. A person is guilty of aggravated assault if that person intentionally, knowingly or recklessly causes:

A. Bodily injury to another that creates a substantial risk of death or extended convalescence necessary for recovery of physical health. Violation of this paragraph is a Class B crime; [PL 2015, c. 358, §1 (AMD).]

A-1. Bodily injury to another that causes serious, permanent disfigurement or loss or substantial impairment of the function of any bodily member or organ. Violation of this paragraph is a Class A crime; [PL 2015, c. 358, §1 (NEW).]

B. Bodily injury to another with use of a dangerous weapon. Violation of this paragraph is a Class B crime; or [PL 2015, c. 358, §1 (AMD).]

C. Bodily injury to another under circumstances manifesting extreme indifference to the value of human life. Such circumstances include, but are not limited to, the number, location or nature of the injuries, the manner or method inflicted, the observable physical condition of the victim or the use of strangulation. For the purpose of this paragraph, "strangulation" means impeding the breathing or circulation of the blood of another person by intentionally, knowingly or recklessly applying pressure on the person's throat or neck. Violation of this paragraph is a Class B crime. [PL 2019, c. 91, §1 (AMD).]

[PL 2019, c. 91, §1 (AMD).]

2.

[PL 2015, c. 358, §1 (RP).]

**SECTION HISTORY**

PL 1975, c. 499, §1 (NEW). PL 1975, c. 740, §43 (AMD). PL 1977, c. 510, §44 (AMD). PL 1981, c. 317, §6 (AMD). PL 2011, c. 640, Pt. B, §2 (AMD). PL 2015, c. 358, §1 (AMD). PL 2019, c. 91, §1 (AMD).

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## APPENDIX C

### State by State Collection of Statutes Criminalizing Strangulation (and Suffocation)

Data Source: Training Institute on Strangulation Prevention (July 2025)

<https://www.allianceforhope.org/training-institute-on-strangulation-prevention/strangulation-legislation>

#### **Separate Strangulation Statute** (vs Embedded in Broader Assault Statute):

20/49 states have a Separate statute. Of the states that embed strangulation in the broader assault statute, it looks like at least 12 have their statute formatted in a way that would allow strangulation charges/cases to be tracked by a statute number.

#### **Inclusion of Suffocation:**

28/49 states address suffocation either by explicitly naming it or by implicitly including behaviors constituting suffocation in the definition of strangulation or adjacent to the conduct that constitutes strangulation.

Flagged in Chart by: Explicitly Names Suffocation is Teal; Defined Broadly Enough to Include is Green

State	Separate Crime(s)	Statute	Language
Alabama	Yes	Al. Crim. Code § 13-A-6-138	Domestic Violence by Strangulation or <span style="background-color: #e0f7fa;">Suffocation</span> (a) For the purposes of this section, the following terms have the following meanings: (1) STRANGULATION. Intentionally causing asphyxia by closure or compression of the blood vessels or air passages of the neck as a result of external pressure on the neck. (2) SUFFOCATION. Intentionally causing asphyxia by depriving a person of air or by preventing a person from breathing through the inhalation of toxic gases or by blocking or obstructing the airway of a person, by any means other than by strangulation. (b) A person commits the crime of domestic violence by strangulation or suffocation if he or she commits an assault with intent to cause physical harm or commits the crime of menacing pursuant to Section 13A-6-23, by strangulation or suffocation or attempted strangulation or suffocation and the victim is a current or former spouse, parent, step-parent, child, step-child, grandparent, step-grandparent, grandchild, step-grandchild, any person with whom the defendant has a child in common, a present household member, or a person who has or had a dating relationship with the defendant. For the purpose of this section, a household member



			<p>excludes non-romantic or non-intimate co-residents, and a dating relationship means a current or former relationship of a romantic or intimate nature characterized by the expectation of affectionate or sexual involvement by either party.</p> <p>(c) Domestic violence by strangulation or suffocation is a Class B felony punishable by law.</p>
Alaska	No	AS 11.41.200	<p>Assault in the First Degree</p> <p>(a) A person commits the crime of assault in the first degree if</p> <p>(1) that person recklessly causes serious physical injury to another by means of a dangerous instrument;</p> <p>(2) with intent to cause serious physical injury to another, the person causes serious physical injury to any person;</p> <p>(3) the person knowingly engages in conduct that results in serious physical injury to another under circumstances manifesting extreme indifference to the value of human life;</p> <p>(4) that person recklessly causes serious physical injury to another by repeated assaults using a dangerous instrument, even if each assault individually does not cause serious physical injury; or</p> <p>(5) that person knowingly causes another to become unconscious by means of a dangerous instrument; in this paragraph, “dangerous instrument” has the meaning given in <a href="#">AS 11.81.900(b)(15)(B)</a>.</p> <p>(b) Assault in the first degree is a class A felony.</p> <p>Dangerous Instrument means:</p> <p>(A) any deadly weapon or anything that, under the circumstances in which it is used, attempted to be used, or threatened to be used, is capable of causing death or serious physical injury; or</p> <p>(B) hands, other body parts, or other objects when used to impede normal breathing or circulation of blood by applying pressure on the throat or neck or obstructing the nose or mouth;</p>
Arizona	No	AZ Rev Stat § 13-1204	Aggravated Assault

			<p>B. A person commits aggravated assault if the person commits assault by either intentionally, knowingly or recklessly causing any physical injury to another person, intentionally placing another person in reasonable apprehension of imminent physical injury or knowingly touching another person with the intent to injure the person, and both of the following occur:</p> <p>(1) <u>The person intentionally or knowingly impedes the normal breathing or circulation of blood of another person by applying pressure to the throat or neck or by obstructing the nose and mouth either manually or through the use of an instrument.</u></p> <p>(2) Any of the circumstances exists that are set forth in Section 13-3601, subsection A, paragraph 1, 2, 3, 4, 5 or 6. [domestic violence]</p> <p>F. Except pursuant to subsections G and H of this section, aggravated assault pursuant to subsection A, paragraph 1 or 2, paragraph 9, subdivision (a) or paragraph 11 of this section is a class 3 felony except if the aggravated assault is a violation of subsection A, paragraph 1 or 2 of this section and the victim is under fifteen years of age it is a class 2 felony punishable pursuant to section 13-705. Aggravated assault pursuant to subsection A, paragraph 3 or subsection B of this section is a class 4 felony. Aggravated assault pursuant to subsection A, paragraph 9, subdivision (b) or paragraph 10 of this section is a class 5 felony. Aggravated assault pursuant to subsection A, paragraph 4, 5, 6, 7 or 8 or paragraph 9, subdivision (c) of this section is a class 6 felony</p>
Arkansas	No	AR Code § 5-13-204	<p>Aggravated Assault</p> <p>(a) A person commits aggravated assault if, under circumstances manifesting extreme indifference to the value of human life, he or she purposely:</p> <p>(3) <u>Impedes or prevents the respiration of another person or the circulation of another person's blood by applying pressure on the throat or neck or by blocking the nose or mouth of the other person.</u></p> <p>(b) Aggravated assault is a Class D felony</p>

California	No	CA Penal Code 273.5	<p>(a) Any person who willfully inflicts corporal injury resulting in a traumatic condition upon a victim described in subdivision (b) is guilty of a felony, and upon conviction thereof shall be punished by imprisonment in the state prison for two, three, or four years, or in a county jail for not more than one year, or by a fine of up to six thousand dollars (\$6,000) or by both that fine and imprisonment.</p> <p>(b) Subdivision (a) shall apply if the victim is or was one or more of the following:</p> <p>(1) The offender's spouse or former spouse.</p> <p>(2) The offender's cohabitant or former cohabitant.</p> <p>(3) The offender's fiancé or fiancée, or someone with whom the offender has, or previously had, an engagement or dating relationship, as defined in paragraph (10) of subdivision (f) of Section 243.</p> <p>(4) The mother or father of the offender's child.</p> <p>(c) Holding oneself out to be the husband or wife of the person with whom one is cohabiting is not necessary to constitute cohabitation as the term is used in this section.</p> <p>(d) As used in this section, "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" include impeding the normal breathing or circulation of the blood of a person by applying pressure on the throat or neck.</p>
Colorado	No	CO Rev Stat § 18-3-202	<p>Assault in the First Degree</p> <p>(1) A person commits the crime of assault in the first degree if:</p> <p>(g) <u>With the intent to cause serious bodily injury, he or she applies sufficient pressure to impede or restrict the breathing or circulation of the blood of another person by applying such pressure to the neck or by blocking the nose or mouth of the other person and thereby causes serious bodily injury.</u></p>

			<p>(2)</p> <p>(a) If assault in the first degree is committed under circumstances where the act causing the injury is performed upon a sudden heat of passion, caused by a serious and highly provoking act of the intended victim, affecting the person causing the injury sufficiently to excite an irresistible passion in a reasonable person, and without an interval between the provocation and the injury sufficient for the voice of reason and humanity to be heard, it is a class 5 felony.</p> <p>(b) If assault in the first degree is committed without the circumstances provided in paragraph (a) of this subsection (2), it is a class 3 felony.</p>
Connecticut	Yes	<p>CT Gen Stat 53a-64cc (3<sup>rd</sup>)</p> <p>CT Gen Stat 53a-64bb (2<sup>nd</sup>)</p> <p>CT Gen Stat 53a-64aa (1<sup>st</sup>)</p>	<p>Strangulation in the 3<sup>rd</sup> Degree (Class A Misdemeanor)</p> <p>(a) A person is guilty of strangulation in the third degree when such person recklessly restrains another person by the neck or throat and impedes the ability of such other person to breathe or restricts blood circulation of such other person.</p> <p>Strangulation in the Second Degree (Class D Felony)</p> <p>(a) A person is guilty of strangulation in the second degree when such person restrains another person by the neck or throat with the intent to impede the ability of such other person to breathe or restrict blood circulation of such other person and such person impedes the ability of such other person to breathe or restricts blood circulation of such other person.</p> <p>Strangulation in the First Degree (Class Felony)</p> <p>(a) A person is guilty of strangulation in the first degree when such person commits strangulation in the second degree as provided in Section 53a-64bb and</p> <p>(1) In the commission of such offense, such person</p> <p>(A) Uses or attempts to use a dangerous instrument, or</p> <p>(B) Causes serious physical injury to such other person, or</p>

			(2) Such person has previously been convicted of a violation of this section or Section 53a-64bb.
Delaware	Yes	DE Title Code 607	<p>Strangulation or Suffocation</p> <p>(a)(1) A person commits the offense of strangulation if the person knowingly or intentionally impedes the normal breathing or circulation of the blood of another person by applying pressure on the throat or neck of the other person</p> <p>(2) A person commits the offense of suffocation if the person knowingly or intentionally prevents another person from breathing by blocking or obstructing the nose or mouth of the other person.</p> <p>(b)(1) Except as provided in paragraph (b)(2) of this section, strangulation or suffocation is a class D felony.</p> <p>(2) Strangulation or suffocation is a class B felony if:</p> <p>a. The person used or attempted to use a dangerous instrument or a deadly weapon while committing the offense; or</p> <p>b. The person caused serious physical injury to the other person while committing the offense; or</p> <p>c. Repealed by 83 Laws 2022, ch. 392, § 1.</p> <p>d. The person was subject to an existing court order prohibiting contact with the victim at the time of the offense; or</p> <p>e. The person committed the offense against a pregnant female; or</p> <p>f. The person committed the offense against a child.</p> <p>(c) Notwithstanding any provisions of this Code to the contrary, any person who commits an offense under subsection (a) of this section within 5 years of a prior conviction under either subsection (a) or (b) of this section or a substantially similar section of another state, shall receive a minimum sentence of 1 year at Level 5.</p> <p>(d) The absence of visible bodily injury shall not preclude a conviction under this section.</p> <p>(e) It is an affirmative defense that an act constituting strangulation was the result of a legitimate medical procedure.</p>

Florida	Yes	FL Stat 784.031 FL Stat 784.041	<p><b>Battery by Strangulation</b>  (1) A person commits battery by strangulation if he or she knowingly and intentionally, against the will of another person, impedes the normal breathing or circulation of the blood of that person so as to create a risk of or cause great bodily harm by applying pressure on the throat or neck of the other person or by blocking the nose or mouth of the other person. This subsection does not apply to any act of medical diagnosis, treatment, or prescription which is authorized under the laws of this state.  (2) A person who violates subsection (1) commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.</p> <p><b>Felony Battery; Domestic Battery by Strangulation</b>  (1) A person commits felony battery if he or she:  (a) Actually and intentionally touches or strikes another person against the will of the other; and  (b) Causes great bodily harm, permanent disability, or permanent disfigurement.  (2) (a) A person commits domestic battery by strangulation if the person knowingly and intentionally, against the will of another, impedes the normal breathing or circulation of the blood of a family or household member or of a person with whom he or she is in a dating relationship, so as to create a risk of or cause great bodily harm by applying pressure on the throat or neck of the other person or by blocking the nose or mouth of the other person. This paragraph does not apply to any act of medical diagnosis, treatment, or prescription which is authorized under the laws of this state.  (b) As used in this subsection, the term:  1. "Family or household member" has the same meaning as in s. 741.28.  2. "Dating relationship" means a continuing and significant relationship of a romantic or intimate nature.</p>
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			(3) A person who commits felony battery or domestic battery by strangulation commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
Georgia	No	GA Code 16-5-21	<p>Aggravated Assault</p> <p>(a) As used in this Code section, the term “strangulation” means impeding the normal breathing or circulation of blood of another person by applying pressure to the throat or neck of such person or by obstructing the nose and mouth of such person.</p> <p>(b) A person commits the offense of aggravated assault when he or she assaults:</p> <p>(1) With intent to murder, to rape, or to rob;</p> <p>(2) With a deadly weapon or with any object, device, or instrument which, when used offensively against a person, is likely to or actually does result in serious bodily injury;</p> <p>(3) With any object, device, or instrument which, when used offensively against a person, is likely to or actually does result in strangulation; or</p> <p>(4) A person or persons without legal justification by discharging a firearm from within a motor vehicle toward a person or persons.</p> <p>(b) Except as provided in subsections (c) through (m) of this Code section, a person convicted of the offense of aggravated assault shall be punished by imprisonment for not less than one nor more than 20 years.</p> <p>Note: Subsections c-m is an extensive list of a variety of circumstances for which the mandatory minimum is higher:  <a href="https://law.justia.com/codes/georgia/title-16/chapter-5/article-2/section-16-5-21/">https://law.justia.com/codes/georgia/title-16/chapter-5/article-2/section-16-5-21/</a></p>
Hawaii	No	HI Rev Stat 709-906(1), (8)	<p>Abuse of Family or Household Members</p> <p>(1) It shall be unlawful for any person, singly or in concert, to physically abuse a family or household member or to refuse</p>



			<p>compliance with the lawful order of a police officer under subsection (4). The police, in investigating any complaint of abuse of a family or household member, upon request, may transport the abused person to a hospital or safe shelter.</p> <p>For the purposes of this section:  “Family or household member”:  (a) Means spouses or reciprocal beneficiaries, former spouses or reciprocal beneficiaries, persons who have a child in common, parents, children, persons related by consanguinity, and persons jointly residing or formerly residing in the same dwelling unit.  (8) Where the physical abuse consists of intentionally or knowingly impeding the normal breathing or circulation of the blood of the family or household member by applying pressure on the throat or the neck, abuse of a family or household member is a Class C felony.</p>
Idaho	Yes	ID Code 18-923	<p>Attempted Strangulation</p> <p>(1) Any person who willfully and unlawfully chokes or attempts to strangle a household member, or a person with whom he or she has or had a dating relationship, is guilty of a felony punishable by incarceration for up to fifteen (15) years in the state prison.</p> <p>(2) No injuries are required to prove attempted strangulation.</p> <p>(3) The prosecution is not required to show that the defendant intended to kill or injure the victim. The only intent required is the intent to choke or attempt to strangle.</p> <p>(4) “Household member” assumes the same definition as set forth in Section 18-918(1)(a), Idaho Code.</p> <p>(5) “Dating relationship” assumes the same definition as set forth in Section 39-6303(2), Idaho Code.</p> <p>(6) Any person who pleads guilty to or is found guilty of a violation of this section shall undergo an evaluation, counseling and other treatment as provided in section 18-918(7), Idaho Code.</p>
Illinois	No	IL 5/12-3.3	Aggravated Domestic Battery

			<p>(a) A person who, in committing a domestic battery, knowingly causes great bodily harm, or permanent disability or disfigurement commits aggravated domestic battery.</p> <p><u>(a-5) A person who, in committing a domestic battery, strangles another individual commits aggravated domestic battery. For the purposes of this subsection (a-5), “strangle” means intentionally impeding the normal breathing or circulation of the blood of an individual by applying pressure on the throat or neck of that individual or by blocking the nose or mouth of that individual.</u></p> <p>(b) Sentence. Aggravated domestic battery is a Class 2 felony. Any order of probation or conditional discharge entered following a conviction for an offense under this section must include, in addition to any other condition of probation or conditional discharge, a condition that the offender serve a mandatory term of imprisonment of not less than 60 consecutive days. A person convicted of a second or subsequent violation of this section must be sentenced to a mandatory term of imprisonment of not less than 3 years and not more than 7 years or an extended term of imprisonment of not less than 7 years and not more than 14 years.</p>
Indiana	Yes	IN Code 35-42-2-9	<p>Strangulation</p> <p>(a) This section does not apply to a medical procedure.</p> <p>b) As used in this section, “torso” means any part of the upper body from the collarbone to the hips.</p> <p>(c) A person who, in a rude, angry, or insolent manner, knowingly or intentionally:</p> <p>(1) Applies pressure to the throat or neck of another person; or</p> <p>(2) <b>Obstructs the nose or mouth of the another person; or</b></p> <p>(3) <b>Applies pressure to the torso of another person; _____</b></p> <p><b>In a manner that impedes the normal breathing or the blood circulation of the other person commits strangulation, a Level 6 felony.</b></p> <p>(d) However, the offense under subsection (c) is a Level 5 felony if:</p> <p>(1) The offense is committed against a pregnant woman; and</p>

			(2) The person who committed the offense knew the victim was pregnant at the time of the offense.
Iowa	No	IA Code 708.2A	<p>Domestic Abuse Assault (Penalties)</p> <p>(1) For the purposes of this chapter, “domestic abuse assault” means an assault, as defined in Section 1, which is domestic abuse as defined in Section 236.2, subsection 2, paragraph “a,” “b,” “c,” or “d.”</p> <p>(2) On a first offense of domestic abuse assault, the person commits:</p> <p>(d) An aggravated misdemeanor, if the domestic abuse assault is committed by knowingly impeding the normal breathing or circulation of the blood of another by applying pressure to the throat or neck of the other person or by obstructing the nose or mouth of the other person.</p> <p>(3) Except as otherwise provided in subsection 2, on a second domestic abuse assault, a person commits:</p> <p>(a) A serious misdemeanor, if the first offense was classified as a simple misdemeanor, and the second offense would otherwise be classified as a simple misdemeanor.</p> <p>(b) An aggravated misdemeanor, if the first offense was classified as a simple or aggravated misdemeanor, and the second offense would otherwise be classified as a serious misdemeanor, or the first offense was classified as a serious or aggravated misdemeanor, and the second offense would otherwise be classified as a simple or serious misdemeanor</p> <p>(4) On a third or subsequent offense of domestic abuse assault, a person commits a Class D felony.</p> <p>(5) For a domestic abuse assault committed by knowingly impeding the normal breathing or circulation of the blood of another by applying pressure to the throat or neck of the other person or by obstructing the nose or mouth of the other person, and causing bodily injury, the person commits a Class D felony.</p>
Kansas	No	KS Stat Ann 21-5414	Domestic Battery; Aggravated Domestic Battery

			<p>(b) Aggravated domestic battery is:</p> <p>(1) <u>Knowingly impeding the normal breathing or circulation of the blood by applying pressure on the throat, neck or chest of a person with whom the offender is involved or has been involved in a dating relationship or a family or household member, when done in a rude, insulting or angry manner;</u> or</p> <p>(2) <u>Knowingly impeding the normal breathing or circulation of the blood by blocking the nose or mouth of a person with whom the offender is involved or has been involved in a dating relationship or a family or household member, when done in a rude, insulting manner</u></p> <p>(c)</p> <p>(2) Aggravated domestic battery is a severity level 7, person felony.</p>
Kentucky	Yes	KRS 508.170 (1 <sup>st</sup> ) KRS 508.175 (2 <sup>nd</sup> )	<p>Strangulation in the First Degree</p> <p>(1) A person is guilty of strangulation in the first degree when the person, without consent, intentionally impedes the normal breathing or circulation of the blood of another person by:</p> <p>(a) Applying pressure on the throat or neck of the other person; or (b) Blocking the nose or mouth of the other person.</p> <p>(2) Strangulation in the first degree is a Class C felony.</p> <p>Strangulation in the Second Degree</p> <p>(1) A person is guilty of strangulation in the second degree when the person, without consent, wantonly impedes the normal breathing or circulation of the blood of another person by:</p> <p>(a) Applying pressure on the throat or neck of the other person; or (b) Blocking the nose or mouth of the other person.</p> <p>(2) Strangulation in the second degree is a Class D felony.</p>
Louisiana	No	LA Rev Stat 35.3	<p>Domestic Abuse Battery</p> <p>(a) Domestic abuse battery is the intentional use of force or violence committed by one household member or family member upon the person of another household member or family member.</p> <p>(b) For purposes of this section:</p>

			<p>(7) “Strangulation” means intentionally impeding the normal breathing or circulation of the blood by applying pressure on the throat or neck or by blocking the nose or mouth of the victim.</p> <p>L. Notwithstanding any provision of law to the contrary, if the domestic abuse battery involves strangulation, the offender, in addition to any other penalties imposed pursuant to this Section, shall be imprisoned at hard labor for not more than three years.</p> <p>O. Except as provided in Subsection P of this Section, if the intentional use of force or violence is committed with a dangerous weapon, the offender, in addition to any other penalties imposed pursuant to this Section, shall be imprisoned at hard labor for not more than ten years.</p> <p>P. Notwithstanding any provision of law to the contrary, if the intentional use of force or violence is committed with a dangerous weapon when the offender intentionally inflicts serious bodily injury, the offender, in addition to other penalties imposed pursuant to this Section, shall be imprisoned at hard labor for not more than fifteen years</p>
Maine	No	17-A MRS 208	<p>Aggravated Assault</p> <p>1. A person is guilty of aggravated assault if that person intentionally, knowingly or recklessly causes:</p> <p>A. Bodily injury to another that creates a substantial risk of death or extended convalescence necessary for recovery of physical health. Violation of this paragraph is a Class B crime;</p> <p>A-1. Bodily injury to another that causes serious, permanent disfigurement or loss or substantial impairment of the function of any bodily member or organ. Violation of this paragraph is a Class A crime;</p> <p>B. Bodily injury to another with use of a dangerous weapon. Violation of this paragraph is a Class B crime; or</p> <p>C. Bodily injury to another under circumstances manifesting extreme indifference to the value of human life. Such circumstances include,</p>

			but are not limited to, the number, location or nature of the injuries, the manner or method inflicted, the observable physical condition of the victim or the use of strangulation. For the purpose of this paragraph, “strangulation” means impeding the breathing or circulation of the blood of another person by intentionally, knowingly or recklessly applying pressure on the person’s throat or neck. Violation of this paragraph is a Class B crime.
Maryland	No	MD Crim Law 3-202	<p>Assault in the First Degree</p> <p>(a) In this section, “strangling” means impeding the normal breathing or blood circulation of another person by applying pressure to the other person’s throat or neck.</p> <p>(3) A person may not commit an assault by intentionally strangling another.</p> <p>(c) A person who violates this section is guilty of the felony of assault in the first degree and on conviction is subject to imprisonment not exceeding 25 years</p> <p>Note: In other sections of MD law, strangulation also appears to act as a class enhancement if perpetrated as part of a sexual assault.</p>
Massachusetts	Yes	MA Gen Law 265, §15D	<p>Strangulation or Suffocation</p> <p>(a) For the purposes of this section the following words shall have the following meanings, unless the context clearly indicates otherwise:</p> <p>“Serious bodily injury,” bodily injury that results in a permanent disfigurement, loss or impairment of a bodily function, limb or organ or creates a substantial risk of death.</p> <p>“Strangulation,” the intentional interference of the normal breathing or circulation of blood by applying substantial pressure on the throat or neck of another.</p> <p>“Suffocation,” the intentional interference of the normal breathing or circulation of blood by blocking the nose or mouth of another.</p>

			<p>(b) Whoever strangles or suffocates another person shall be punished by imprisonment in state prison for not more than 5 years or in the house of correction for not more than 2 ½ years, or by a fine of not more than \$5,000, or by both such fine and imprisonment.</p> <p>(c) Whoever:</p> <p>(i) Strangles or suffocates another person and by such strangulation or suffocation causes serious bodily injury;</p> <p>(ii) Strangles or suffocates another person, who is pregnant at the time of such strangulation or suffocation, knowing or having reason to know that the person is pregnant;</p> <p>(iii) Is convicted of strangling or suffocating another person after having been previously convicted of the crime of strangling or suffocating another person under this section, or of a like offense in another state or the United States or a military, territorial or Indian tribal authority; or</p> <p>(iv) Strangles or suffocates another person, with knowledge that the individual has an outstanding temporary or permanent vacate, restraining or no contact order or judgement issued under Sections 18 or 34B of Chapter 208, Section 32 of Chapter 209, Sections 3, 4 or 5 of Chapter 209A or Sections 15 or 20 of Chapter 209C , in effect against such person at the time the offense is committed, shall be punished by imprisonment in state prison for not more than 10 years, or in the house of correction for not more than 2½ years, and by a fine of not more than \$10,000.</p>
Michigan	No	MI Leg Sec 750.84	<p>Assault with intent to do great bodily harm less than murder; assault by strangulation or suffocation;</p> <p>(1) A person who does either of the following is guilty of a felony punishable by imprisonment for not more than 10 years or a fine of not more than \$5,000.00, or both:</p> <p>(a) Assaults another person with intent to do great bodily harm, less than the crime of murder.</p> <p>(b) Assaults another person by strangulation or suffocation.</p>



			<p>(2) As used in this section, "strangulation or suffocation" means intentionally impeding normal breathing or circulation of the blood by applying pressure on the throat or neck or by blocking the nose or mouth of another person.</p> <p>(3) This section does not prohibit a person from being charged with, convicted of, or punished for any other violation of law arising out of the same conduct as the violation of this section.</p>
Minnesota	Yes	MN Stat 609.2247	<p>Domestic Assault by Strangulation Subdivision 1. Definitions.</p> <p>(a) As used in this section, the following terms have the meanings given:</p> <p>(c) "Strangulation" means intentionally impeding normal breathing or circulation of the blood by applying pressure on the throat or neck or by blocking the nose or mouth of another person.</p> <p>Subdivision 2. Crime.</p> <p>Unless a greater penalty is provided elsewhere, whoever assaults a family or household member by strangulation is guilty of a felony and may be sentenced to imprisonment for not more than three years or to payment of a fine of not more than \$5,000, or both.</p>
Mississippi	No	MS Code 97-3-7	<p>Simple and Aggravated Assault; Simple and Aggravated Domestic Violence</p> <p>(4)</p> <p>(a) When the offense is committed against a current or former spouse of the defendant or a child of that person, a person living as a spouse or who formerly lived as a spouse with the defendant or a child of that person, a parent, grandparent, child, grandchild or someone similarly situated to the defendant, a person who has a current or former dating relationship with the defendant, or a person with whom the defendant has had a biological or legally adopted child, a person is guilty of aggravated domestic violence who:</p>

			<p>(i) Attempts to cause serious bodily injury to another, or causes such an injury purposely, knowingly or recklessly under circumstances manifesting extreme indifference to the value of human life;</p> <p>(ii) Attempts to cause or purposely or knowingly causes bodily injury to another with a deadly weapon or other means likely to produce death or serious bodily harm; or</p> <p>(iii) <u>Strangles, or attempts to strangle another.</u></p> <p>Upon conviction, the defendant shall be punished by imprisonment in the custody of the Department of Corrections for not less than two (2) nor more than twenty (20) years. [note: there are factors additionally listed in the statute that would modify the penalty]</p> <p>(9) For the purposes of this section:</p> <p>(a) "Strangle" means to restrict the flow of oxygen or blood by intentionally applying pressure on the neck, throat or chest of another person by any means or to intentionally block the nose or mouth of another person by any means.</p> <p>(b) "Dating relationship" means a social relationship as defined in Section 93-21-3.</p>
Missouri	No	MO Rev Stat 565.073	<p>Domestic Assault, Second Degree</p> <p>1. A person commits the offense of domestic assault in the second degree if the act involves a domestic victim, as the term "domestic victim" is defined under section 565.002, and he or she:</p> <p>(1) Knowingly causes physical injury to such domestic victim by any means, including but not limited to, use of a deadly weapon or dangerous instrument, or by choking or strangulation; or</p> <p>(2) Recklessly causes serious physical injury to such domestic victim; or</p> <p>(3) Recklessly causes physical injury to such domestic victim by means of any deadly weapon.</p> <p>2. The offense of domestic assault in the second degree is a class D felony.</p>

Montana	Yes	MT Stat 45-5-215	<p>Strangulation of Partner or Family Member</p> <p>(1) A person commits the offense of strangulation of a partner or family member if the person purposely or knowingly impedes the normal breathing or circulation of the blood of a partner or family member by:</p> <p>(a) applying pressure on the throat or neck of the partner or family member; or</p> <p>(b) blocking air flow to the nose and mouth of the partner or family member.</p> <p>(2) (a) A person convicted of a first offense of strangulation of a partner or family member shall be fined an amount not to exceed \$50,000 or be imprisoned in the state prison for a term not to exceed 5 years, or both.</p> <p>(b) A person convicted of a second or subsequent offense under this section shall be imprisoned in the state prison for a term of not less than 2 years or more than 20 years and may be fined an amount not more than \$50,000, except as provided in <a href="#">46-18-219</a> and <a href="#">46-18-222</a>.</p> <p>(3) A person convicted of strangulation of a partner or family member is required to pay for and complete a counseling assessment as required in <a href="#">45-5-206</a>(4).</p> <p>(4) For the purposes of this section, "partner" and "family member" have the meanings provided in <a href="#">45-5-206</a>.</p>
Nebraska	Yes	NE Rev Stat 28-310.01	<p>Strangulation</p> <p>(1) A person commits the offense of assault by strangulation or <b>suffocation</b> if the person knowingly and intentionally:</p> <p>(a) Impedes the normal breathing or circulation of the blood of another person by applying pressure on the throat or neck of the other person; or</p> <p>(b) Impedes the normal breathing of another person by covering the mouth and nose of the person.</p> <p>(2) An offense is committed under this section regardless of whether a visible injury resulted.</p>

			<p>(3) Except as provided in subsection (4) of this section, a violation of this section is a Class IIIA felony.</p> <p>(4) A violation of this section is a Class IIA felony if:</p> <p>(a) The person used or attempted to use a dangerous instrument while committing the offense;</p> <p>(b) The person caused serious bodily injury to the other person while committing the offense; or</p> <p>(c) The person has been previously convicted of a violation of this section.</p> <p>(5) It is an affirmative defense that an act constituting strangulation or suffocation was the result of a legitimate medical procedure.</p>
Nevada	No	NV Rev Stat 200.481	<p>Battery</p> <p>1. As used in this section:</p> <p>(a) "Battery" means any willful and unlawful use of force or violence upon the person of another.</p> <p>(j) "Strangulation" means intentionally applying sufficient pressure to another person to make it difficult or impossible for the person to breathe, including, without limitation, applying pressure to the neck, throat or windpipe that may prevent or hinder breathing or reduce the intake of air, or applying any pressure to the neck on either side of the windpipe, but not the windpipe itself, to stop the flow of blood to the brain via the carotid arteries.</p> <p>2. Except as otherwise provided in <a href="#">NRS 200.485</a>, a person convicted of a battery, other than a battery committed by an adult upon a child which constitutes child abuse, shall be punished:</p> <p>(b) If the battery is not committed with a deadly weapon, and either substantial bodily harm to the victim results or the battery is committed by strangulation, for a category C felony as provided in <a href="#">NRS 193.130</a>.</p>

New Hampshire	No	NH Rev Stat 631:2	<p>Second Degree Assault</p> <p>I. A person is guilty of a Class B felony if he or she:</p> <p>(f) Purposely or knowingly engages in the strangulation of another.</p> <p>II. In this section:</p> <p>(c) “Strangulation” means the application of pressure to another person’s throat or neck, or the blocking of the person’s nose or mouth, that causes the person to experience impeded breathing or blood circulation or a change in voice.</p>
New Jersey	No	NJ Rev Stat 2c:12-1	<p>Aggravated Assault</p> <p>(13) Knowingly or, under circumstances manifesting extreme indifference to the value of human life, recklessly obstructs the breathing or blood circulation of a person who, with respect to the actor, meets the definition of a victim of domestic violence, as defined in subsection d. of section 3 of P.L.1991, c.261 (C.2C:25-19), by applying pressure on the throat or neck or blocking the nose or mouth of such person, thereby causing or attempting to cause bodily injury.</p> <p>Aggravated assault under paragraph (8) of subsection b. of this section is a crime of the third degree if the victim suffers bodily injury; if the victim suffers significant bodily injury or serious bodily injury it is a crime of the second degree. Aggravated assault under paragraph (11) of subsection b. of this section is a crime of the third degree. Aggravated assault under paragraph (12) of subsection b. of this section is a crime of the third degree but the presumption of non-imprisonment set forth in subsection e. of N.J.S.2C:44-1 for a first offense of a crime of the third degree shall not apply. Aggravated assault under paragraph (13) of subsection b. of this section is a crime of the second degree.</p>
New Mexico	No	NM Stat 30-3-16	<p>Aggravated Battery Against a Household Member</p> <p>A. Aggravated battery against a household member consists of the unlawful touching or application of force to the person of a household member with intent to injure that person or another.</p>

			<p>B. Whoever commits aggravated battery against a household member is guilty of a misdemeanor if the aggravated battery against a household member is committed by inflicting an injury to that person that is not likely to cause death or great bodily harm, but that does cause painful temporary disfigurement or temporary loss or impairment of the functions of any member or organ of the body.</p> <p>C. Whoever commits aggravated battery against a household member is guilty of a third degree felony if the aggravated battery against a household member is committed:</p> <p>(1) By inflicting great bodily harm;</p> <p>(2) With a deadly weapon;</p> <p>(3) By strangulation or suffocation; or</p> <p>(4) In any manner whereby great bodily harm or death can be inflicted.</p> <p><b>NM. STAT. 30-3-11. DEFINITIONS</b></p> <p>As used in the Crimes Against Household Members Act:</p> <p>A. “household member” means a spouse, former spouse, parent, present or former stepparent, present or former parent in-law, grandparent, grandparent-in-law, a co-parent of a child or a person with whom a person has had a continuing personal relationship. Cohabitation is not necessary to be deemed a household member for the purposes of the Crimes Against Household Members Act;</p> <p>B. “continuing personal relationship” means a dating or intimate relationship;</p> <p>C. “<b>strangulation</b>” means the unlawful touching or application of force to another person’s neck or throat with intent to injure that person and in a manner whereby great bodily harm or death can be inflicted, the result of which impedes the person’s normal breathing or blood circulation; and</p> <p>D. “<b>suffocation</b>” means the unlawful touching or application of force that blocks the nose or mouth of another person with intent to injure that person and in a manner whereby great bodily harm or death can</p>
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			be inflicted, the result of which impedes the person's normal breathing or blood circulation.
New York	Yes	<p>NY Penal Law 121.11</p> <p>NY Penal Law 121.12 (2<sup>nd</sup>)</p> <p>NY Penal Law 121.13 (1<sup>st</sup>)</p> <p>NY Penal Law 121.13a (agg)</p>	<p><b>Criminal Obstruction of Breathing or Blood Circulation</b>  A person is guilty of criminal obstruction of breathing or blood circulation when, with intent to impede the normal breathing or circulation of the blood of another person, he or she:</p> <ul style="list-style-type: none"> <li>a. Applies pressure on the throat or neck of such person; or</li> <li>b. <b>Blocks the nose or mouth of such person.</b></li> </ul> <p>Criminal obstruction of breathing or blood circulation is a Class A misdemeanor.</p> <p><b>Strangulation in the Second Degree</b>  A person is guilty of strangulation in the second degree when he or she commits the crime of criminal obstruction of breathing or blood circulation, as defined in Section 121.11 of this article, and thereby causes stupor, loss of consciousness for any period of time, or any other physical injury or impairment.  Strangulation in the second degree is a Class D felony.</p> <p><b>Strangulation in the First Degree</b>  A person is guilty of strangulation in the first degree when he or she commits the crime of criminal obstruction of breathing or blood circulation, as defined in Section 121.11 of this article, and thereby causes serious physical injury to such other person.  Strangulation in the first degree is a Class C felony</p> <p><b>Aggravated Strangulation</b>  A person is guilty of aggravated strangulation when, being a police officer as defined in subdivision thirty-four of section 1.20 of the criminal procedure law or a peace officer as defined in section 2.10 of the criminal procedure law, he or she commits the crime of criminal obstruction of breathing or blood circulation, as defined in</p>



			<p>section 121.11 of this article, or uses a chokehold or similar restraint, as described in paragraph b of subdivision one of section eight hundred thirty-seven-t of the executive law, and thereby causes serious physical injury or death to another person.</p> <p>Aggravated strangulation is a class C felony.</p>
North Carolina	No	NC Gen Stat 14-32.4	<p>Assault Inflicting Serious Bodily Injury; Strangulation</p> <p>(a) Unless the conduct is covered under some other provision of law providing greater punishment, any person who assaults another person and inflicts serious bodily injury is guilty of a Class F felony.</p> <p>“Serious bodily injury” is defined as bodily injury that creates a substantial risk of death, or that causes serious permanent disfigurement, coma, a permanent or protracted condition that causes extreme pain, or permanent or protracted loss or impairment of the function of any bodily member or organ, or that results in prolonged hospitalization.</p> <p>(b) Unless the conduct is covered under some other provision of law providing greater punishment, any person who assaults another person and inflicts physical injury by strangulation is guilty of a Class H felony.</p> <p>Strangulation is not defined in statute. Case law interpreting strangulation can be found here:  <a href="https://www.allianceforhope.org/training-institute-on-strangulation-prevention/strangulation-legislation/north-carolina">https://www.allianceforhope.org/training-institute-on-strangulation-prevention/strangulation-legislation/north-carolina</a>.</p>
North Dakota	No	ND Century Code 12.1-17-02	<p>Aggravated assault</p> <p>1. A person is guilty of a class C felony if that person:</p> <p>A. Willfully causes serious bodily injury to another human being;</p>

			<p>B. Knowingly causes bodily injury or substantial bodily injury to another human being with a dangerous weapon or other weapon, the possession of which under the circumstances indicates an intent or readiness to inflict serious bodily injury;</p> <p>C. Causes bodily injury or substantial bodily injury to another human being while attempting to inflict serious bodily injury on any human being; or</p> <p>D. Fires a firearm or hurls a destructive device at another human being.</p> <p>2. The person is guilty of a class B felony if the person violates subsection 1 and the victim:</p> <p>A. Is under twelve years of age;</p> <p>B. Is a peace officer or correctional institution employee acting in an official capacity, which the actor knows to be a fact; or</p> <p>C. Suffers permanent loss or impairment of the function of a bodily member or organ.</p> <p>§ 12.1-01-04. General definitions</p> <p>27. "Serious bodily injury" means bodily injury that creates a substantial risk of death or which causes serious permanent disfigurement, unconsciousness, extreme pain, permanent loss or impairment of the function of any bodily member or organ, a bone fracture, or impediment of air flow or blood flow to the brain or lungs.</p> <p>29. "Substantial bodily injury" means a substantial temporary disfigurement, loss, or impairment of the function of any bodily member or organ.</p>
Ohio	Yes	OH Rev Code 2903.18	<p>Strangulation</p> <p>(A) As used in this section:</p> <p>(1) "Strangulation or suffocation" means any act that impedes the normal breathing or circulation of the blood by applying pressure to the throat or neck, or by covering the nose and mouth.</p> <p>(2) "Dating relationship" has the same meaning as in section 3113.31 of the Revised Code.</p>

			<p>(3) "Family or household member" has the same meaning as in section <a href="#">2919.25</a> of the Revised Code.</p> <p>(4) "Person with whom the offender is or was in a dating relationship" means a person who at the time of the conduct in question is in a dating relationship with the defendant or who, within the twelve months preceding the conduct in question, has had a dating relationship with the defendant.</p> <p>(B) No person shall knowingly do any of the following:</p> <p>(1) Cause serious physical harm to another by means of strangulation or suffocation;</p> <p>(2) Create a substantial risk of serious physical harm to another by means of strangulation or suffocation;</p> <p>(3) Cause or create a substantial risk of physical harm to another by means of strangulation or suffocation.</p> <p>(C) Whoever violates this section is guilty of strangulation.</p> <p>(1) A violation of division (B)(1) of this section is a felony of the second degree.</p> <p>(2) A violation of division (B)(2) of this section is a felony of the third degree.</p> <p>(3) A violation of division (B)(3) of this section is a felony of the fifth degree. If the victim of the violation of division (B)(3) of this section is a family or household member, or is a person with whom the offender is or was in a dating relationship, a violation of division (B)(3) of this section is a felony of the fourth degree. If the victim of the offense is a family or household member, or is a person with whom the offender is or was in a dating relationship, and the offender previously has been convicted of or pleaded guilty to a felony offense of violence, or if the offender knew that the victim of the violation was pregnant at the time of the violation, a violation of division (B)(3) of this section is a felony of the third degree.</p> <p>(D) It is an affirmative defense to a charge under division (B) of this section that the act was done as part of a medical or other procedure undertaken to aid or benefit the victim.</p>
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Oklahoma	No	OK Stat 644	<p>Assault, Assault and Battery</p> <p>J. <u>Any person who commits any assault and battery by strangulation or attempted strangulation against an intimate partner or a family or household member as defined by Section 60.1 of Title 22 of the Oklahoma Statutes</u> shall, upon conviction, be guilty of domestic abuse by strangulation and shall be punished by imprisonment in the custody of the Department of Corrections for a period of not less than one (1) year nor more than three (3) years, or by a fine of not more than Three Thousand Dollars (\$3,000.00), or by both such fine and imprisonment. Upon a second or subsequent conviction for a violation of this section, the defendant shall be punished by imprisonment in the custody of the Department of Corrections for a period of not less than three (3) years nor more than ten (10) years, or by a fine of not more than Twenty Thousand Dollars (\$20,000.00), or by both such fine and imprisonment. The provisions of Section 51.1 of this title shall apply to any second or subsequent conviction of a violation of this subsection.</p> <p>As used in this subsection, “strangulation” <b>means any form of asphyxia; including, but not limited to,</b> asphyxia characterized by closure of the blood vessels or air passages of the neck as a result of external pressure on the neck or the closure of the nostrils or mouth as a result of external pressure on the head.</p>
Oregon	Yes	OR Rev Stat 163.187	<p>Strangulation</p> <p>(1) A person commits the crime of strangulation if the person knowingly impedes the normal breathing or circulation of the blood of another person by:</p> <p>(a) <b>Applying pressure on the throat, neck or chest</b> of the other person; or</p> <p>(b) <b>Blocking the nose or mouth of the other person</b></p> <p>(2) Subsection (1) of this section does not apply to legitimate medical or dental procedures or good faith practices of a religious belief.</p> <p>(3 ) Strangulation is a Class A misdemeanor.</p>

			<p>(4) Notwithstanding subsection (3) of this section, strangulation is a Class C felony if:</p> <p>(a) The crime is committed in the immediate presence of, or is witnessed by, the person's or the victim's minor child or stepchild or a minor child residing within the household of the person or the victim;</p> <p>(b) The victim is under 10 years of age;</p> <p>(c) The victim is a family or household member, as defined in ORS 135.230, of the person;</p> <p>(d) During the commission of the crime, the person used, attempted to use or threatened to use a dangerous or deadly weapon, as those terms are defined in ORS 161.015, unlawfully against another;</p> <p>(e) The person has been previously convicted of violating this section or ORS 163.160, 163.165, 163.175, 163.175, 163.185, or 163.90, or of committing an equivalent crime in another jurisdiction, and the victim in the previous conviction is the same person who is the victim of the current crime;</p> <p>(f) The person has at least three previous convictions for violating this section or ORS 163.160, 163.165, 163.175, 163.175, 163.185, or 163.90 or for committing an equivalent crime in another jurisdiction, in any combination; or</p> <p>(g) The person commits the strangulation knowing that the victim is pregnant.</p> <p>(5) For purposes of subsection (4)(a) of this section, a strangulation is witnessed if the strangulation is seen or directly perceived in any other manner by the child.</p> <p>(6 )The Oregon Criminal Justice Commission shall classify strangulation committed under the circumstances described in subsection (4)(c) of this section as crime category 5 of the sentencing guidelines grid of the commission.</p>
Pennsylvania	Yes	PA Sec 2718	Strangulation

			<p>(a) Offense defined. A person commits the offense of strangulation if the person knowingly or intentionally impedes the breathing or circulation of the blood of another person by:</p> <p>(1) Applying pressure to the throat or neck; or</p> <p>(2) <b>Blocking the nose and mouth of the person.</b></p> <p>(b) Physical injury. Infliction of a physical injury to a victim shall not be an element of the offense. The lack of physical injury to a victim shall not be a defense in a prosecution under this section.</p> <p>(c) Affirmative defense. It shall be an affirmative defense to a charge under this section that the victim consented to the defendant's actions as provided under Section 311 (relating to consent).</p> <p>(d) Grading</p> <p>(1) Except as provided in paragraph (2) or (3), a violation of this section shall constitute a misdemeanor of the second degree.</p> <p>(2) A violation of this section shall constitute a felony of the second degree if committed:</p> <p>(i) Against a family or household member as defined in 23 pa.c.s. § 6102 (relating to definitions);</p> <p>(ii) By a caretaker against a care-dependent person; or</p> <p>(iii) In conjunction with sexual violence as defined in 42 pa.c.s. 62a03 (relating to definitions) or conduct constituting a crime under 18 pa.c.s. § 2709.1 (relating to stalking) or ch. 30 subch. b (relating to prosecution of human trafficking).</p> <p>(3) A violation of this section shall constitute a felony of the first degree if:</p> <p>(1) At the time of commission of the offense, the defendant is subject to an active protection from abuse order under 23 pa.c.s. ch. 61 (relating to protection from abuse) or a sexual violence or intimidation protection order under 42 pa.c.s. ch. 62a (relating to protection of victims of sexual violence or intimidation) that covers the victim;</p> <p>(ii) The defendant uses an instrument of crime as defined in Section 907 (relating to possessing instruments of crime) in commission of the offense under this section; or</p>
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			(iii) The defendant has previously been convicted of an offense under paragraph (2) or a substantially similar offense in another jurisdiction.
Rhode Island	Yes	RI Gen Laws 11-5-2.3	<p>Domestic Assault by Strangulation</p> <p>(a) Every person who shall make an assault or battery, or both, by strangulation, on a family or household member as defined in subsection 12-29-2(b), shall be punished by imprisonment for not more than ten (10) years.</p> <p>(b) Where the provisions of “The Domestic Violence Prevention Act”, Chapter 29 of Title 12, are applicable, the penalties for violation of this section shall also include the penalties as provided in 12-29-5.</p> <p>(c) “Strangulation” means knowingly and intentionally impeding normal breathing or circulation of the blood by applying pressure on the throat or neck or by blocking the nose or mouth of another person, with the intent to cause that person harm.</p>
South Carolina	NONE	NONE	SC is the only state without a statute that specifically addresses strangulation or strangulation behaviors.
South Dakota	No	SD Cod Law 22-18-1.1	<p>Aggravated Assault – Felony</p> <p>Any person who:</p> <p>(1) Attempts to cause serious bodily injury to another, or causes such injury, under circumstances manifesting extreme indifference to the value of human life;</p> <p>(2) Attempts to cause, or knowingly causes, bodily injury to another with a dangerous weapon;</p> <p>(3) Deleted by SL 2005, ch 120, § 2;</p> <p>(4) Assaults another with intent to commit bodily injury which results in serious bodily injury;</p> <p>(5) Attempts by physical menace with a deadly weapon to put another in fear of imminent serious bodily harm; or</p> <p>(6) Deleted by SL 2005, ch 120, § 2;</p> <p>(7) Deleted by SL 2012, ch 123, § 4;</p>

			<p>(8) <u>Attempts to induce a fear of death or imminent serious bodily harm by impeding the normal breathing or circulation of the blood of another person by applying pressure on the throat or neck, or by blocking the nose and mouth;</u></p> <p>is guilty of aggravated assault. Aggravated assault is a Class 3 felony.</p>
Tennessee	No	TN Code 39-13-102	<p>Aggravated Assault</p> <p>(a)</p> <p>(1) A person commits aggravated assault who:</p> <p>(A) Intentionally or knowingly commits an assault as defined in § 39-13-101, and the assault:</p> <p>(i) Results in serious bodily injury to another;</p> <p>(ii) Results in the death of another;</p> <p>(iii) Involved the use or display of a deadly weapon; or</p> <p>(iv) <u>Involved strangulation or attempted strangulation;</u> or</p> <p>(B) Recklessly commits an assault as defined in § 39-13-101(a)(1), and the assault:</p> <p>(i) Results in serious bodily injury to another;</p> <p>(ii) Results in the death of another; or</p> <p>(iii) Involved the use or display of a deadly weapon.</p> <p>(2) For purposes of subdivision (a)(1)(A)(iv), “strangulation” means intentionally or knowingly impeding normal breathing or circulation of the blood by applying pressure to the throat or neck <u>or by blocking the nose and mouth of another person</u>, regardless of whether that conduct results in any visible injury or whether the person has any intent to kill or protractedly injure the victim.</p> <p>(e)</p> <p>(1)</p> <p>(A) Aggravated assault under:</p> <p>(i) Deleted by 2018 Pub.Acts, c. 925, § 3, eff. July 1, 2018.</p> <p>(ii)(a) Except as provided in subdivision (e)(1)(A)(ii)(b), subdivision (a)(1)(A)(i), (iii), or (iv) is a Class C felony; and</p> <p>(b) If the victim is pregnant at the time of the offense, subdivision</p>



			<p>(a)(1)(A)(iv) is a Class B felony;          (iii) Subdivision (a)(1)(A)(ii) is a Class C felony;          (iv) Subdivision (b) or (c) is a Class C felony;          (v) Subdivision (a)(1)(B)(i) or (iii) is a Class D felony;          (vi) Subdivision (a)(1)(B)(ii) is a Class D felony.</p> <p>(f) A violation of subdivision (a)(1)(A)(iv), in which the victim of the offense loses consciousness due to strangulation, may be prosecuted as attempted first degree murder, under § 39-13-202, or attempted second degree murder, under § 39-13-210.</p>
Texas	No	TX Penal Code Ann 22.01	<p>Assault</p> <p>(a) A person commits an offense if the person:</p> <p>(1) Intentionally, knowingly, or recklessly causes bodily injury to another, including the person's spouse;          (2) Intentionally or knowingly threatens another with imminent bodily injury, including the person's spouse; or          (3) Intentionally or knowingly causes physical contact with another when the person knows or should reasonably believe that the other will regard the contact as offensive or provocative.</p> <p>(b) An offense under subsection (a)(1) is a Class A misdemeanor, except that the offense is a felony of the third degree if the offense is committed against:</p> <p>(2) A person whose relationship to or association with the defendant is described by Section 0021(b), 71.003, or 71.005, Family Code, if:</p> <p>(A) It is shown on the trial of the offense that the defendant has been previously convicted of an offense under this chapter, Chapter 19, or Section 20.03, 04, 21.11, or 25.11 against a person whose relationship to or association with the defendant is described by Section 71.0021(b), 71.003, or 71.005, Family Code; or</p> <p>(B) <u>The offense is committed by intentionally, knowingly, or recklessly impeding the normal breathing or circulation of the blood of the person by applying pressure to the person's throat or neck or by blocking the person's nose or mouth:</u></p>

			<p>(b-1) Notwithstanding subsection (b)(2), an offense under subsection (a)(1) is a felony of the second degree if:</p> <p>(1) The offense is committed against a person whose relationship to or association with the defendant is described by Section 71.0021(b), 71.003, or 71.005, Family Code;</p> <p>(2) It is shown on the trial of the offense that the defendant has been previously convicted of an offense under this chapter, Chapter 19, or Section 20.03, 04, or 21.11 against a person whose relationship to or association with the defendant is described by Section 71.0021(b), 71.003, or 71.005, Family Code; and</p> <p>(3) The offense is committed by intentionally, knowingly, or recklessly impeding the normal breathing or circulation of the blood of the person by applying pressure to the person's throat or neck or by blocking the person's nose or mouth.</p> <p>(f) For the purposes of subsections (b)(2)(A) and (b-1)(2):</p> <p>(1) A defendant has been previously convicted of an offense listed in those subsections committed against a person whose relationship to or association with the defendant is described by Section 71.0021(b), 003, or 71.005, Family Code, if the defendant was adjudged guilty of the offense or entered a plea of guilty or nolo contendere in return for a grant of deferred adjudication, regardless of whether the sentence for the offense was ever imposed or whether the sentence was probated and the defendant was subsequently discharged from community supervision; and</p> <p>(2) A conviction under the laws of another state for an offense containing elements that are substantially similar to the elements of an offense listed in those subsections is a conviction of the offense listed.</p> <p>(g) If conduct constituting an offense under this section also constitutes an offense under another section of this code, the actor may be prosecuted under either section or both sections.</p>
Utah	No	UT Stat 76-5-103	<p>Aggravated Assault</p> <p>(1) Aggravated assault is an actor's conduct</p>

			<p>(a) That is:</p> <p>(i) An attempt, with unlawful force or violence, to do bodily injury to another;</p> <p>(ii) A threat, accompanied by a show of immediate force or violence, to do bodily injury to another or;</p> <p>(iii) An act, committed with unlawful force or violence, that causes bodily injury to another or creates a substantial risk of bodily injury to another; and</p> <p>(b) That includes the use of:</p> <p>(i) A dangerous weapons as defined Section 76-1-601;</p> <p>(ii) <u>Any act that impedes the breathing or the circulation of blood of another person by the actor's use of unlawful force or violence that is likely to produce a loss of consciousness by:</u></p> <p>(A) <u>Applying pressure to the neck or throat of a person; or</u></p> <p>(B) <u>Obstructing the nose, mouth, or airway of a person; or</u></p> <p>(iii) Other means or force likely to produce death or serious bodily</p> <p>(2) Any act under this section is punishable as a third degree felony, except that an act under this section is punishable as a second degree felony if:</p> <p>(a) The act results in serious bodily injury; or</p> <p>(b) An act under subsection (1)(b)(ii) produces a loss of consciousness.</p>
Vermont	No	VT Stat 1024	<p>Aggravated Assault</p> <p>(a) A person is guilty of aggravated assault if the person:</p> <p>(1) Attempts to cause serious bodily injury to another, or causes such injury purposely, knowingly, or recklessly under circumstances manifesting extreme indifference to the value of human life; or</p> <p>(2) Attempts to cause or purposely or knowingly causes bodily injury to another with a deadly weapon; or</p> <p>(5) Is armed with a deadly weapon and threatens to use the deadly weapon on another person.</p>

			<p>(b) A person found guilty of violating a provision of subdivision (a)(1) or (2) of this section shall be imprisoned for not more than 15 years or fined not more than \$10,000.00, or both.</p> <p>(c) A person found guilty of violating a provision of subdivision (a)(3), (4), or (5) of this section shall be imprisoned for not more than five years or fined not more than \$5,000.00.</p> <p><b>VT. STAT. § 1021. DEFINITIONS</b></p> <p>For the purpose of this chapter:</p> <p>(1) “Bodily injury” means physical pain, illness or any impairment of physical condition.</p> <p>(2) “Serious bodily injury” means:</p> <p>(B) Strangulation by intentionally impeding normal breathing or circulation of the blood by applying pressure on the throat or neck or by blocking the nose or mouth of another person.</p>
Virginia	Yes	VA Code Ann 18.2-51.6	<p>Strangulation or Suffocation of Another</p> <p>(A) Any person who, without consent, impedes the blood circulation or respiration of another person by knowingly, intentionally, and unlawfully applying pressure to the neck of such person resulting in the wounding or bodily injury of such person is guilty of strangulation, a Class 6 felony.</p> <p>(B) Any person who, without consent, impedes the blood circulation or respiration of another person by knowingly, intentionally, and unlawfully blocking or obstructing the airway of such person resulting in the wounding or bodily injury of such person is guilty of suffocation, a Class 6 felony.</p>
Washington	No	WA Rev Code Ann 9a.36.021	<p>Assault in the Second Degree</p> <p>(1) A person is guilty of assault in the second degree if he or she, under circumstances not amounting to assault in the first degree:</p> <p>(g) Assaults another by strangulation or suffocation.</p> <p>(2)(a) Except as provided in (b) of this subsection, assault in the second degree is a Class B felony.</p>

			<p>(b) Assault in the second degree with a finding of sexual motivation under RCW 9.94A.835 or 13.40.135 is a Class A felony.</p> <p><b>WA. REV. CODE ANN. § 9A.04.110. DEFINITIONS</b></p> <p>(26) “Strangulation” means to compress a person’s neck, thereby obstructing the person’s blood flow or ability to breathe, or doing so with the intent to obstruct the person’s blood flow or ability to breathe;</p> <p>(27) “Suffocation” means to block or impair a person’s intake of air at the nose and mouth, whether by smothering or other means, with the intent to obstruct the person’s ability to breathe.</p>
West Virginia	Yes	WV Code 61-2-9d	<p>Strangulation; Suffocation and Asphyxiation</p> <p>(A) As used in this section:</p> <p>“Bodily injury” means substantial physical pain, illness or any impairment of physical condition;</p> <p>“Strangle” means knowingly and willfully restricting another person’s air intake or blood flow by the application of pressure on the neck or throat</p> <p>“Suffocate” means knowingly and willfully restricting the normal breathing or circulation of blood by blocking the nose or mouth of another; and</p> <p>“Asphyxiate” means knowingly and willfully restricting the normal breathing or circulation of blood by the application of pressure on the chest or torso.</p> <p>(B) Any person who strangles, suffocates or asphyxiates another without that person’s consent and thereby causes the other person bodily injury or loss of consciousness is guilty of a felony and, upon conviction thereof, shall be fined not more than \$2,500 or imprisoned in a state correctional facility not less than one year or more than five years, or both fined and imprisoned.</p>
Wisconsin	Yes	WI Stat Ann 940.235	Strangulation and Suffocation

			<p>(1) Whoever intentionally impedes the normal breathing or circulation of blood by applying pressure on the throat or neck or by blocking the nose or mouth of another person is guilty of a Class H felony.</p> <p>(2) Whoever violates sub. (1) is guilty of a Class G felony if the actor has a previous conviction under this section or a previous conviction for a violent crime, as defined in s. 939.632(1)(e)1.</p>
Wyoming	Yes	WY Stat Ann 6-2-509	<p>Strangulation of a Household Member</p> <p>(a) A person is guilty of strangulation of a household member if he intentionally and knowingly or recklessly causes or attempts to cause bodily injury to a household member by impeding the normal breathing or circulation of blood by:</p> <p>(i) Applying pressure on the throat or neck of the household member; or</p> <p>(ii) <b>Blocking the nose and mouth</b> of the household member.</p> <p>(b) Strangulation of a household member is a felony punishable by imprisonment for not more than ten (10) years.</p> <p>(c) For purposes of this section, “household member” means as defined in W.S. 35-21-102(a)(iv)(A) through (D), (G) and (H).</p>

# APPENDIX D



Cited  
As of: July 18, 2025 5:45 PM Z

## State v. Saucier

Supreme Judicial Court of Maine

October 21, 2015, Submitted on Briefs; November 12, 2015, Decided

Docket: Pen-15-161

### Reporter

2015 ME 144 \*; 126 A.3d 1159 \*\*; 2015 Me. LEXIS 156 \*\*\*

STATE OF MAINE v. DALE J. SAUCIER

**Disposition:** Judgment affirmed.

### Core Terms

aggravated assault, strangulation, neck, assault, extreme indifference, breathing, strangled, impede, value of human life, domestic violence, circumstances, manifesting, beyond a reasonable doubt, sufficiency of evidence, sufficient to support, imprisonment, circulation, lasted, throat, marks, threw, talk, yell

**Counsel:** [\*\*\*1] On the briefs: Randy G. Day, Esq., Garland, for appellant Dale J. Saucier.

R. Christopher Almy, District Attorney, and Tracy Collins, Asst. Dist. Atty., Prosecutorial District V, Bangor, for appellee State of Maine.

**Judges:** Panel: SAUFLEY, C.J., and ALEXANDER, MEAD, GORMAN, JABAR, and HJELM, JJ.

**Opinion by:** JABAR

### Opinion

[\*\*1160] JABAR, J.

[\*P1] Dale J. Saucier appeals from a judgment of conviction for aggravated assault (Class B), [17-A M.R.S. § 208\(1\)\(C\)](#) (2014), and domestic violence assault (Class D), [17-A M.R.S. § 207-A\(1\)\(A\)](#) (2014), entered in the Unified Criminal Docket (Penobscot County, *A. Murray, J.*) after a jury-waived trial. We reject his challenge to the sufficiency of the evidence, and affirm.

#### I. BACKGROUND

[\*P2] The following facts were found by the court

beyond a reasonable doubt, and are fully supported by the evidence in the record. On August 19, 2014, Saucier and the victim, a woman with whom Saucier was in a relationship, became involved in an argument that escalated into a physical altercation. Saucier threw a television remote at the victim, and the victim threw some chips at Saucier. Saucier grabbed the victim's ponytail with one hand and strangled her with the other hand.

[\*P3] Saucier squeezed the victim's neck for approximately eight seconds with sufficient force and [\*\*\*2] strength to impede her breathing. While Saucier was strangling her, the victim felt pressure behind her eyes, felt light-headed, and thought she was going to lose consciousness. The strangling lasted long enough and was forceful enough to leave red marks on the victim's neck, and to affect her voice for several days. During the assault, and while Saucier's hand was on her neck, the victim was talking and yelling.

[\*P4] Saucier was indicted for one count of aggravated assault and one count of domestic violence assault. He waived his right to a jury trial, and the court held a bench trial on March 20, 2015. At the close of the evidence, the court found Saucier guilty of both crimes. The court sentenced him to two years' imprisonment for the aggravated assault conviction, and to a concurrent term of nine months' imprisonment for the domestic violence assault conviction.<sup>1</sup>

[\*P5] Saucier timely appealed.

#### II. DISCUSSION

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<sup>1</sup> Although the docket record and the judgment and commitment form do not reflect that Saucier's sentences were to run concurrently, the transcript of the proceeding establishes that the court actually imposed concurrent sentences. We direct an amendment of the docket and the judgment and commitment form to correctly reflect the [\*\*\*3] concurrent term of the sentences that the court imposed.

[\*P6] "When examining the sufficiency of the evidence, we review the evidence in the light most favorable to the State to determine whether a trier of fact rationally could find beyond a reasonable doubt every element of the offense charged." [State v. Child, 1999 ME 198, ¶ 5, 743 A.2d 230](#) (quotation marks omitted). Saucier was charged with committing aggravated assault pursuant to [17-A M.R.S. § 208\(1\)\(C\)](#), which defines the offense as follows:

A person is guilty of aggravated assault if he intentionally, knowingly, or recklessly causes . . . [b]odily injury to another [\*1161] under circumstances manifesting extreme indifference to the value of human life. Such circumstances include, but are not limited to, the number, location or nature of the injuries, the manner or method inflicted, the observable physical condition of the victim or the use of strangulation. For the purpose of this paragraph, "strangulation" means the intentional impeding of the breathing or circulation of the blood of another person by applying pressure on the person's throat or neck.

[\*P7] Saucier contends that the evidence was not sufficient to support a finding that he assaulted the victim under circumstances manifesting [\*\*\*4] extreme indifference to the value of human life. He argues that the strangulation incident did not demonstrate extreme indifference because it only lasted for eight seconds, and did not constitute "strangulation" within the meaning of [section 208\(1\)\(C\)](#) because the victim was able to talk and yell while she was being strangled. We disagree.

[\*P8] [Section 208\(1\)\(C\)](#) plainly defines strangulation as an application of force to a person's throat or neck that is sufficient to impede the person's breathing or circulation. The statute includes strangulation as a circumstance that manifests extreme indifference to the value of human life. Here, the victim's testimony supports the court's finding that Saucier applied enough force to the victim's neck to impede her breathing, and that evidence is sufficient to support Saucier's conviction for aggravated assault.

The entry is:

Judgment affirmed.



**The State Of Maine**

**MAINE COMMISSION ON DOMESTIC  
AND SEXUAL ABUSE**

**REPORT TO THE JOINT STANDING COMMITTEE ON  
CRIMINAL JUSTICE AND PUBLIC SAFETY**

**Pursuant To Resolve 2011, Chapter 76  
(LD 1027)**

**Resolve, To Coordinate Stakeholders to  
Review Best Practices in the Management  
of Strangulation and Determine Methods  
to Address the Issue in Maine.**

**February 2012**

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## Executive Summary

In 1995, two young California women, Cassondra Stewart and Tamara Smith, who was five months pregnant, were strangled and subsequently murdered by their intimate partners. These deaths and the subsequent investigations became the impetus for a sweeping nationwide reassessment of the management of strangulation. Strangulation became more widely recognized as a serious public health concern and criminal legal issue. This national recognition was accompanied by recommendations for new policy, including changes in statute to more directly address strangulation commensurate with its serious impact. It also resulted in improvements in areas of criminal investigation and prosecution, medical response, training and public awareness. Thirty-four states now have created policy that includes addressing strangulation directly in their criminal codes with associated capacity building and public awareness initiatives. Other states, like Maine, have legislation pending. While there are best practice general guidelines, each of those states has chosen the manner most compatible within their existing policies and criminal codes to integrate strangulation. The goal of this study was to make recommendations for the management of strangulation in Maine.

On June 3, 2011 the Maine House and Senate approved ***Resolve Chapter 76 Resolve, To Coordinate Stakeholders to Review Best Practices in the Management of Strangulation and Determine Methods to Address the Issue in Maine***. The resolve was passed as an emergency measure, requiring the concurrence of 2/3 of the legislative body. Governor LePage signed the Resolve to Study on June 13, 2011. Pursuant to that resolve, The Maine Commission on Domestic and Sexual Abuse (the Commission) accepted the study in keeping with its legislative mandate to provide consultation to the legislature on matters of domestic and sexual abuse. The Commission established a multi-disciplinary task group with statewide representation that met from June 2011 through February 2012. In addition to the members of the task group, community members and subject matter experts have provided consultation to the process.

The Task Group on Strangulation of the Maine Commission on Domestic and Sexual Abuse (the task group) has reached the following observations and recommendations:

1. We observe that strangulation is a significant public health concern and criminal justice issue in Maine due to its prevalence and serious medical and social impacts.
2. We observe that Maine's response to strangulation is not commensurate with the prevalence and severity of the event. We recommend that Maine make improvements in its management of strangulation that will keep people safer and more effectively hold perpetrators accountable. This finding is based on review of

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national best practice, of Maine's current practice and data gathered from criminal legal records, from victims, perpetrators and professionals in Maine.

3. We recommend that action be taken to enhance Maine's effective management of strangulation, including developing clear policy and changes within Maine's criminal code to address strangulation directly; increased training for components of the coordinated community response system; and increased public awareness activities. Consistent with national findings, we observe that what is not named specifically in policy and statute tends to be overlooked resulting in systemic under-response. We observed that existing training for law enforcement officers through the Maine Criminal Justice Academy is robust and does not account for the problems in effective management of strangulation. Years of training and education alone have not resulted in management of strangulation commensurate with its serious impact.
4. We observe that the prevalence, impact and lethality of strangulation justify swift legislative action. We recommend that changes be made to Maine Criminal Code as described in the recommendations in this report through legislation initiated in this 125<sup>th</sup> legislative session by The Criminal Justice and Public Safety Committee of the Maine Legislature.

### **Summary Observations and Recommendations:**

**1. Observations and recommendations for policy:** Clear policy is needed to be sure that strangulation is addressed commensurate with the severity of its social and public health impact. We recommend that Maine implement policy that will:

1. Develop and implement clear statutory language
2. Deter the primary occurrence of strangulation
3. Hold accountable those who have committed strangulation assaults
4. Protect victims of these assaults from further exposure to violence
5. Encourage education and training for effective medical intervention, criminal justice management and advocacy support:
  - a. for criminal justice system to recognize assault by strangulation, investigate, and prosecute successfully
  - b. for medical community to recognize strangulation assault, treat and document effectively
  - c. for advocacy community to better inform victims of risks and provide effective safety planning.
6. Create public awareness of the dangerousness of strangulation and the need for criminal justice and medical response.

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**2. Observations and recommendations for statutory change:**

*“The purpose of having enforceable statutes concerning strangulation from the point of view of public health policy is to deter the primary occurrence of strangulation, to punish those who have committed strangulation assaults, and to protect the victims of these assaults from further exposure to violence. To achieve these goals, the criminal justice response to strangulation needs to be clear and commensurate with the seriousness of the attack, a goal that is best achieved with clear statutory language.” (Laughton, Glass and Worrell, 2009)*

**We recommend that the following changes be made to Maine Criminal Code through legislation initiated in this 125<sup>th</sup> legislative session by The Criminal Justice and Public Safety Committee of the Maine Legislature.**

**1. We recommend that** strangulation be added as an act that constitutes extreme indifference to the value of human life within Aggravated Assault as follows (addition underlined):

**MRSA 17-A §208. AGGRAVATED ASSAULT**

1. A person is guilty of aggravated assault if he intentionally, knowingly, or recklessly causes:
  - a. Serious bodily injury to another: or
  - b. Bodily injury to another with use of a dangerous weapon; or
  - c. Bodily injury to another under circumstances manifesting extreme indifference to the value of human life. Such circumstances include, but are not limited to, the number, location or nature of the injuries, the manner or method inflicted, ~~or~~ the observable physical condition of the victim, or use of strangulation.
2. Aggravated assault is a Class B crime.

**2. We recommend that** a legal definition of strangulation be determined and appropriately placed in statute. That definition should be modeled after national best practice for defining strangulation. A further discussion of the definition choices can be found in the report section “Statute Review and Recommendations.” We offer the definition determined by Vermont that goes to the root issue of asphyxia as the basis for their definition as an example:

“Strangulation is defined as ‘any form of asphyxia, including, but not limited to, asphyxia characterized by closure of the blood vessels or air passages of the neck as a result of external pressure on the neck or the closure of the nostrils or mouth as a result of external pressure on the head.’” (Vermont)

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**3. We recommend that** the following changes and/or additions amend the statutes governing Maine Criminal Justice Domestic Violence law enforcement policy and the Maine Bail Code to require police to provide information to bail commissioners about allegations of strangulation, and the Maine Bail Code to require bail commissioners to obtain and consider that information before setting bail. (changes underlined)

**- Title 25 MRSA sec. 2803-B**

(D)(2) A process for the collection of information regarding the defendant that includes the defendant's previous history, the parties' relationship, whether the alleged offense included strangulation, the name of the victim and a process to relay this information to a bail commissioner before a bail determination is made.

**- Title 15 MRSA sec. 1023-C,.**

4. Limitations on authority. A bail commissioner may not:  
In a case involving domestic violence, set pre-conviction bail for a defendant before making a good faith effort to obtain from the arresting officer, the district attorney, a jail employee or other law enforcement officer:

- (1) A brief history of the alleged abuser;
- (2) The relationship of the parties;
- (3) The name, address, phone number and date of birth of the victim;
- (4) Existing conditions of protection from abuse orders, conditions of bail and conditions of probation.;
- (5) Information about the severity of the alleged offense, including but not limited to whether or not the alleged offense included strangulation.

**Brief Discussion:** We entered this review with no bias that strangulation necessarily required a special place in the Maine Criminal Code given the general permissions found in existing statute. However, we found three realities that moved us toward recommending strangulation be directly addressed in statute. First, we found a strong case that strangulation, by virtue of its medical consequences, level of risk for both lethal and non-lethal escalation of violence, and social impact deserved special attention.

Secondly, we came to the conclusion that a by-product of the current silence in statute, an unintended consequence, had emerged in practice. At all levels of the system, law enforcement, advocacy, prosecutors, medical providers, and even victims themselves were not paying attention to strangulation at the level it needed—if at all. Behavior within those systems is driven substantially by practical considerations of what is useful, that is, what is useful in moving forward prosecution of crimes within the criminal code. Investigations can be truncated prematurely without a statute-driven need to document strangulation, which affects all the down-stream arenas of data collection, investigation and prosecution, advocacy and medical response—and, by extension the awareness of the victim and the public of the severity of the event. This also prevents knowledge of

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the occurrence of strangulation from moving up the chain to the prosecutor, or creates the situation that the knowledge of a strangulation event may not be present within the courtroom and available to the presiding judge.

Third, we observed national best practice shifts with related changes in statute within 34 states (see Table of States) adding language addressing strangulation in some manner to their criminal codes for similar reasons, with several other states having pending legislation to address this issue. This is a clear and evolving best practice shift.

The task group considered a matrix of options, including responses in other states and keeping in mind the instruction that best practice is to integrate strangulation in keeping with existing statutory structures. In addition to asking whether these changes would be helpful, we asked if the change(s) would have the unintended consequence of doing any harm. The task group members after considering the list of alternatives reached consensus on the following recommendations. The group chose not to create a separate crime of strangulation but to add strangulation explicitly as a method that would constitute extreme indifference to the value of human life within Aggravated Assault. We concluded that this response would accomplish the stated policy goals, including enhancing the ability to investigate and prosecute serious strangulation events at an appropriate level of response, allow for continued prosecutorial discretion and avoid negative unintended consequences.

## **Observations and Recommendations on Training and Education**

### **1. Law Enforcement:**

We reviewed law enforcement training provided by the Maine Criminal Justice Academy, the central training entity for law enforcement in Maine. We observe that the training was robust and of high quality throughout the range of their training options and has been delivered over a substantial period of time—over 10 years in their core curriculums. The gap in Maine elevating the issue of strangulation and increasing law enforcement response to strangulation is not a training gap; a law is necessary to provide prosecutors with another tool to recognize strangulation, and therefore to make the existing training functionally useful for law enforcement officers.

A change to the statute will not create great additional training needs. It will provide the small but crucial piece that has been missing from existing trainings – the legal authority to recognize and charge strangulation as life-threatening domestic violence. However, that said, there would be some additional training for new and experienced officers on the investigation and documentation of strangulation related to any new statute. We would recommend that this training be administered by the Maine Criminal Justice Academy consistent with the way they address training on all changes in statute.

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**2. Prosecution:** We recommend that prosecutors be provided training on changes in statute regarding strangulation and any related expectations in the usual manner of their annual update within the context of the Prosecutors Conference. For prosecutors unaccustomed to prosecuting strangulation cases with their particular complexities or unfamiliar with more recent practices in investigation and prosecution, there may be other training needs. We would rely on the Maine community of prosecutors to articulate any of these possible further training needs and identify the appropriate audience and venues for that training.

**2. Medical Professionals and Health Care Settings:** We recommend that a review of training and capacity building needs for Maine's medical professionals, particularly emergency room and medical first responders, take place. We recommend that review address appropriate responses to medical management of strangulation, as well as documentation for forensic purposes. We recommend that training and capacity building to strengthen Maine's medical response to strangulation become a priority for Maine health systems, similar to the current prioritized response by Maine General Hospital.

**3. Advocates within domestic violence resource centers, sexual assault centers and prosecution based advocates:** We observe the significant impact that survivors report strangulation has on their level of intimidation, as well as its presence for some survivors as a powerful motivating factor for a decision to terminate an abusive relationship. We recommend that advocates be well trained in how to support the survivor in managing the emotional, physical and criminal legal aspects of the event. We recommend that the systems that house these advocates prioritize strangulation within their data collection, emergency response and support services and within their role in the coordinated community response networks. We are aware that MCEDV has taken action to continue the task group of representatives from full service domestic violence resource centers already engaged with the Maine Survivors Voice on Strangulation survey in order to address this need within the domestic violence service community.

### **Observations and Recommendations on Public Awareness**

We observe that a general lack of awareness of the medical impact, prevalence and impact of strangulation is consistent within the general public, as well as within professional specialties. Particularly compelling was information from survivors that they did not understand the danger and long-term effects of what was happening to their bodies during a strangulation event. This lack of awareness also accompanied strangulation events not associated with domestic or sexual violence, such as choking games on middle school playgrounds and between "consenting" sexual partners. We observe that there is a need for increased public awareness across the board as to the risks and appropriate management of strangulation. We would recommend that organizations such as MCEDV and MECASA continue their public awareness efforts. We also recommend that Maine's robust public health network, as well as individual health care facilities, use their existing



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training systems and public awareness vehicles, such as newsletters and websites, to increase public awareness about the serious health risks associated with strangulation.

These observations and recommendations are discussed in more detail in the text of the report. The summaries of the Maine Coalition to End Domestic Violence and the Maine Association of Batterer's Intervention Programs surveys of survivors and batterers; the summary of the Maine Coalition Against Sexual Assault case review and other Maine specific data gathered are within the report appendices.

The task group remains available for any questions and/ or comments at the convenience of the Criminal Justice and Public Safety Committee. Thank you for the opportunity to work with you toward our mutual goal of making Maine a safer place.

Submitted:

Julia Colpitts, Vice Chair, Maine Commission on Domestic and Sexual Abuse on behalf of  
the Maine Commission on Domestic and Sexual Abuse Task Group on Strangulation

February 16, 2012



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## **Introduction to the Study**

Until recently, strangulation assault within the context of intimate personal violence, often mistakenly called choking, had been a mostly silent epidemic. The public and professional communities were not generally aware of either the prevalence or the severity of the public health and social impacts of strangulation. Landmark research initiated in the mid-1990's has changed both the way we understand strangulation assault and has resulted in the development of best practice responses for training, education, public awareness, health care and for holding perpetrators accountable through effective investigation and prosecution.

What we know now, in 2012, is that strangulation is extremely dangerous, not only in the obvious situations when it is lethal, but in non-lethal assaults, even when injuries may not be apparent at the scene. We know that a pattern of multiple strangulations increases the medical impact related to anoxic brain damage and physical injuries to the neck and throat. Correspondingly we know that it is common for perpetrators to strangle their partner more than once. We also know that strangulation is prevalent within the context of intimate personal violence. We know that it is an effective tool of intimidation and control that often has more impact on a victims' behavior than other battering assaults.

We also know that this crime can be complicated to prosecute, given the nature of the injuries and the requirements of a thorough investigation. As a result, we know that the criminal justice response consistently had not reflected the true prevalence of strangulation assault nor responded commensurate with the level of its impact. We know that in states that changed their responses in a top-down, best practice model that included amending their criminal codes, both investigation and prosecution improved. We also have information that indicates public awareness and medical responses were improved in relationship to the increased attention with the criminal legal system. As a result of this growing body of knowledge, 34 states now recognize strangulation as a serious public health problem and criminal legal issue and include it specifically in their criminal code. Additional states, like Maine, are in the process of determining the best way to address this issue and have legislation pending. We are recommending that Maine join that growing community of states adopting best practices responses for the management of strangulation assault, including legislation to amend Maine's criminal code.

In 1995, two young California women, Casondra Stewart and Tamara Smith, who was five months pregnant, were strangled and subsequently murdered by their intimate partners. These deaths triggered an investigation by the City Attorney's office of San Diego that focused first a local and then a national spotlight on the prevalence, impact and management of strangulation. The findings by Gael Strack, Assistant City Attorney for San Diego, and her colleagues were so compelling that the information began a national policy change on how strangulation was understood and managed.

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Strack and her colleagues found that strangulation was a dangerous, potentially lethal event that was misunderstood and commonly under responded to by criminal legal and medical systems. They made recommendations for changes in statute, training, criminal investigation, prosecution and medical response that have become best practice guidance. (Strack GB, 2001) As other states conducted their own inquiries into strangulation, they consistently duplicated the major California findings, leading to a rapid nationwide policy shift in public and professional awareness. This increased awareness changed the way strangulation is treated in statute in state after state with accompanying improvements in investigation, prosecution, advocacy and medical response.

In 2009 and 2010 alone, 10 additional states passed legislation addressing statutory change related to strangulation bringing the number to 34 states that directly address strangulation in their criminal codes. Other states, like Maine, have legislation pending. This current Maine study undertaken by the Maine Commission on Domestic and Sexual Abuse is a result of legislation brought by Representative Sara Stevens to the 125<sup>th</sup> session of the Maine legislature.

The first session of the 125th legislature Criminal Justice and Public Safety Committee of the Maine Legislature (the Committee) considered **Resolve Chapter 76, An Act to Make Strangulation an Aggravating Sentencing Factor**. The committee, following their deliberations on the bill, stated that strangulation within the context of domestic violence was a serious issue and that further information and review was necessary prior to making decisions on the management of strangulation in Maine.

On June 3, 2011 the Maine House and Senate approved ***LD 1027 Resolve, To Coordinate Stakeholders to Review Best Practices in the Management of Strangulation and Determine Methods to Address the Issue in Maine***. The resolve was passed as an emergency measure, requiring the concurrence of 2/3 of the legislative body. Governor LePage signed the Resolve to Study on June 13, 2011. The full text of the initial legislation and the resolve can be found in the appendices. The Committee charge relevant to the study is as follows:

**Sec. 1 Review of best practices in management of strangulation. Resolved:** That the Maine Commission on Domestic and Sexual Abuse, created in the Maine Revised Statutes, Title 19-A, section 4013 and referred to in this resolve as "the commission," shall study strangulation to determine the presence and patterns of strangulation in domestic and sexual violence in the State and the current management of strangulation within criminal law. The commission shall review model practices and research in other states, including the impacts of other states' legislation, public awareness activities and changes in policy. The commission shall invite interested parties, including but not limited to representatives from state and local law enforcement, prosecutors, the judicial branch, the Criminal Law

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Advisory Commission under Title 17-A, section 1351, the Maine Coalition to End Domestic Violence, the Maine Coalition Against Sexual Assault, first responders and other emergency care providers; and be it further

**Sec. 2 Report. Resolved:** That the commission shall submit a report by February 15, 2012 to the Joint Standing Committee on Criminal Justice and Public Safety. The report must include the commission's findings and recommendations regarding methods to deal with strangulation in the State, including, as it determines necessary, proposed legislation; proposed education and training for law enforcement, prosecutors and the judiciary; and proposed programs and outreach for public awareness and advocacy. Upon receipt of the commission's report and recommendations, the committee may report out legislation to the Second Regular Session of the 125th Legislature.

**Emergency clause.** In view of the emergency cited in the preamble, this legislation takes effect when approved.'

The sponsor, Representative Sara Stevens and involved stakeholders were in full agreement with this intent. The study was referred to The Maine Commission on Domestic and Sexual Abuse (The Commission) a statutorily appointed, multi-disciplinary commission housed in the Maine Department of Public Safety. The Commission accepted the study, finding the topic area within its statutory mandate to provide consultation to the Maine legislature on issues related to domestic and sexual abuse.

The Task Group on Strangulation (the task group) was created in June with representatives including law enforcement officers, attorneys, community advocates from Maine's domestic violence resource centers (DVRC's) and sexual assault centers, victims witness advocates, medical personnel, a tribal representative and representatives from the Maine Homicide Review Panel (MHR), and the Maine Department of Health and Human Services. A representative from the Maine judiciary provided an advisory role as did the Office of the Maine Attorney General and the Criminal Law Advisory Commission. The task group met over the summer, fall and winter of 2011-2012. Their work is represented in this report. Additional consultation was provided by community members and technical assistance organizations with expertise in medical, legal and social impact of domestic violence and on strangulation within that context. The Vice Chair of the Commission was appointed to oversee the task group work, reporting back to the Commission on regular intervals.

The members of the Commission volunteer their time. One of the strengths of the group is that included in the membership are professionals with links to organizations with considerable expertise in the area of domestic and sexual violence state wide. These organizations provided volunteer resources to facilitate the study. Maine domestic violence resource centers (DVRC's) and Maine Batterer's Intervention programs (BIPs) conducted surveys and focus groups with survivors and batterers who had experienced

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strangulation as a victim or perpetrator. Maine Coalition Against Sexual Assault conducted a survey of advocates in their centers addressing the special circumstances of strangulation and sexual violence. These initiatives allowed the task group to provide state-specific information on the impact of strangulation.

The Homicide Review Panel provided state specific information related to strangulation and homicide. The Criminal Law Advisory Commission provided consultation by reviewing potential statutory recommendations. Local court districts facilitated access to protection from abuse data for review. Pine Tree Legal Services provided a legal intern as did the Next Step Domestic Violence Project. Several district attorneys provided staff time to consult and review the efficacy of suggested recommendations to facilitate effective prosecution of strangulation. However, even with this expertise and resources, this remains a study produced by a volunteer group and as such has some limitations. No funding was provided for this study so that all personnel, travel, materials or other costs were born by the volunteers. The final report printing was provided by the Department of Public Safety. The observations and recommendations within the report will note areas where resources were not available for a larger scope of study and/or where there are ongoing needs for review and recommendations.

This task group included representation from tribal domestic violence resource centers, from rural areas, from refugee and immigrant communities. Consultation from deaf and hard of hearing community and elderly services was provided from the members of the Commission. While the intent was to include refugee and immigrant victims in the survey of survivors of strangulation there were some limitations. While some information was captured about members of those communities who received services in the DVRC's, our major partner in the refugee community United Somali Women of Maine was not able to participate in the survey due to limitations in their funding and staff capacity that emerged mid-study. Tengo Voz also expressed interest and provided consultation, but as an organization that was focused on a time sensitive capacity building process, declined to be part of the survivor study.

In order to manage the study components as well as to facilitate participation statewide, the task group created a work management web site, Maine Commission on Domestic and Sexual Abuse Strangulation Study. That website functioned as repository for documents related to the study, for best practice materials and updates. All documents related to the task group's process are also held in hard copy as appropriate. The website is public now and will remain active for six months following the release of this report at <https://sites.google.com/a/mcedv.org/strangulation-study/>.

The task group focused on several areas consistent with the charge to the Commission. These topic areas have provided the organizational structure for the report and are; prevalence of acts of strangulation within a domestic violence context; medical and social impact of strangulation in a domestic violence context; training and education on

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strangulation in criminal legal systems, advocacy and medical settings; statute review. Each section includes observations and recommendations as well as summarizing those observations and recommendations in the executive summary.

### **Data and Information**

Data and information on strangulation within a domestic or sexual violence context was gathered from multiple sources to inform this report and the task group decision-making process. The task group accessed national literature to review data on overall prevalence of strangulation within the context of domestic violence. We also accessed personnel at technical assistance providers including the National Domestic Violence Fatality Review Initiative (NDVFR) housed in Flagstaff, AZ, at Northern Arizona University; the Battered Women's Justice Project and the National Council of Juvenile Court Judges, as well as written resources from other technical assistance providers.

The task group had difficulty finding information specifically about strangulation within the context of domestic violence or sexual assault in Maine. Data forms that included the option of checking strangulation were often not completed in the advocacy locations and the in law enforcement locations sampled. Emergency room information collected by the Maine CDC does not differentiate strangulation from other injuries. Data banks related to judicial proceedings and other law enforcement documentation may include strangulation notes embedded within the case notes, but that level of detailed search was beyond the scope of the task group.

In order to have Maine specific information, the task group decided to approach additional data collection and/or review of existing data through several avenues.

During September, October and November of 2011, The Maine Coalition to End Domestic Violence instituted a statewide survey of domestic violence survivors who had experienced being strangled by an intimate partner. Survivors who received services at Maine's domestic violence resource centers during those three months and who were not in need of emergency response were offered a chance to complete a brief survey. Domestic Violence Resource Centers who are members of MCEV and the Wabanaki Coalition participated. One Hundred and fifty one women completed surveys. The survey consisted of 10 structured questions and two additional open-ended questions. In addition, a group of advocates representing each domestic violence resource center took part in focus groups to elicit information about the advocates' experience with and management of strangulation in the context of domestic violence. A complete summary of survey results is found in the appendices. Information from that survey and the focus groups will be cited as appropriate in the text topic areas.

The Maine Association of Batterer's Intervention Programs conducted a survey of batterers enrolled in certified batterers intervention programs during that same time frame. The Maine Commission on Domestic and Sexual Abuse members thought that batterers' voices

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should be included to inform their study. The goal would be to inform the Commission's understanding of the impact of the act of strangulation from the batterer's perspective. The Maine Association of Batterer Intervention Programs (MABIPS) worked with MCEDV to coordinate questions for two parallel surveys, one for abusers and one for survivors so that the two would inform each other. Providers met with batterers enrolled in groups who self-reported that they engaged in strangulation behavior with an intimate partner. One hundred and twenty five men actively participating in a Batterer's Intervention Program in Maine agreed to participate in the Strangulation Survey. The geographic areas covered by this survey were; Sagadahoc and Eastern Cumberland, Kennebec, Androscoggin and Franklin Counties. A complete summary of survey results is found in the appendices. Information from that survey will be cited as appropriate in the text topic areas.

The Maine Coalition to End Sexual Assault (MECASA) interviewed advocates in a subset of their member projects who provided information from case reviews. The summary of those focused discussions and case reviews is included in the appendices and will be cited as appropriate in the text topic areas.

Interns from Pine Tree Legal and from The Next Step Domestic Violence Project reviewed Protection From Abuse or harassment filings in Portland and Calais. Justice Valerie Stanfill oversaw a review of Protection from Abuse or harassment filings in the Lewiston Court. This provided a sampling of southern, urban locations, a mid-Maine mixed rural/urban catchment area and a northern rural catchment area. The data was accessible for review and the assumption was that it would provide a glimpse into an initial phase of a victims interaction with the civil court system.

In summary: There were 1520 total complaints reviewed during the calendar year 2010. Of those, 566 Protection were from Harassment complaints, 39 were empty files and 915 Protection from Abuse complaints. Of those Protection from Abuse complaints, 570 were between intimate partners and 6 were brought by the adult victim of the defendant's sexual assault. The reporting of strangulation did vary regionally. In Portland, 21% reported the complaint included mention of strangulation, in Lewiston, 16.6% and in Calais 16%. This is significantly lower than the national prevalence rate would indicate. One intern reviewing files noted that there was not a place where the question was asked. This coupled with the domestic violence victims' reports that the reason they did not talk more about strangulation, in addition to fear of the abusers, was that no one asked.

### **Prevalence of Strangulation in the Context of Intimate Personal Violence**

Ten percent of violence deaths in the United States are attributable to strangulation. (Turket, 2007). A significant subset of those deaths are within the context of intimate personal violence. Prevalence data on strangulation within the context of domestic violence has

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historically been difficult to come by both nationally and in Maine, partly because it was often not collected as a discreet data field related in part to an historical lack of a named presence in criminal codes. More recently data collection on this issue has improved concurrent with its changed status within an increasing number of states' criminal codes and additional medical awareness of the severity of the injuries. Reports of the prevalence of strangulation range between 47% to 68% of women who are also victims of domestic violence. (Stapczynski, 2010) (Wilbur L, 2001) We do not have data on the prevalence in sexual violence where domestic violence is not also present. We do have data, however, that strangulation is a gendered crime strangulation --virtually all perpetrators are men. (Strack & Gwinn, *On the Edge of Homicide: Strangulation as a Prelude*, 2011)

One comprehensive historical study, The Chicago Women's Health Risk Study (CWHRS) found that 24.6% of 57 adult women killed by a male intimate partner in 1995 or 1996 in Chicago were killed by strangulation or smothering. Of the 494 women sampled as they came into Chicago hospitals and clinics for any reason and who said that they had experienced IPV in the past year, 47.3% had experienced at least one incident in the past year in which her partner had tried to choke or strangle her, and 57.6% had "ever" experienced choking or strangulation by the abusive partner. Strangulation was associated with lethality of incident, with almost five percent (4.8%) lethality in the 289 incidents in which a partner or ex-partner strangled the woman, compared to 1.0% of the 4,722 incidents where the abuser used other types of violence. (Block, Devitt, Fonda, Fugate, Marting, & McFarlane, 2000)

The MCEDV study indicated that of 151 women who were receiving services related to domestic violence who completed the survey, 110 or 72.8% reported experiencing strangulation by an intimate partner and 88 or 79.3% said that they had been strangled on more than one occasion. (Maine Coalition to End Domestic Violence, 2011) The MABIP study indicated that of the 125 men interviewed, 35 admitted to strangling an intimate partner. This survey also indicated that 31% of the offenders who admitted to strangling reported strangling multiple partners and more than once with a single partner and 83% noted that the strangulation was part of other violent behaviors. Additionally the batterers noted that 31% of them were scratched, kicked or injured in some way by their partners defending herself during a strangulation assault. Given that strangulation injuries often are not visible immediately after the assault, this is important information for first responders to be aware of—that the visible injuries in an alleged strangulation may be defensive wounds on an abuser. (Maine Association of Batterers Intervention Programs, 2011)

Information from the case review that advocates in a subset of MECASA centers provided did not include information on numbers of cases. However, it did have important information on the link between strangulation and sexual violence in Maine. That report notes: "Nearly every center which responded to the survey indicated that they have worked with clients who had experienced strangulation. Advocates report that this form of

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violence is typically in conjunction with completed (87%) or attempted sexual assault” among the women seeking sexual assault support services. In addition, they noted the same co-occurrence of strangulation with other forms of violence, usually sexual assault. “The strangulation occurred nearly 100 percent of the time in conjunction with attempted or completed sexual assault, and about 80 percent of the time, some other form of violence was also part of the event. ” (Maine Coalition Against Sexual Assault, 2011)

The Task group also paid attention to the presence of strangulation in subgroups within our culture, identifying several vulnerable subgroups with varied prevalence reported. The impact on pregnant women would be considered increased due to the possibility of danger to the unborn child. “The clinical trial of Bullock et al. (2006) of 1,000 pregnant women found that 34% of abused pregnant women reported being “choked” (the term abused women preferred for describing attempted strangulation).” (Laughton, 2009)

While the question as to occurrence in pregnancy was not asked in the MCEDV survey of victims, voluntary comments noted its occurrence on at least one occasion. As one survivor in the MCEDV study responded to an open ended question about her experienced impact from strangulation: “Definitely yes, I was pregnant, I was in fear of my life and my child's life after that; I was walking around on egg shells.”

In addition to concerns about groups at increased vulnerability to the medical impact of a strangulation event, there are groups identified at higher risk.

“Among African American women, strangulation increased odds of becoming a completed homicide by 4.65 (95% CI 2.18–9.95), but among white and Latina women the increase was much higher (13.72 for white women, and 21.16 for Latinas 5.4–34.8, and 5.8–77.8, respectively). Similar results were obtained for attempted homicide when stratifying by race/ethnicity.... Among African American women, strangulation was less of a risk factor for attempted and completed homicide than for white and Latina women. This finding may be a result of one or both of the following. Because African American women were about 4 times as likely to be killed or to become the victim of an attempted homicide by an intimate partner than were women of other race/ethnicity groups, they were generally at greater risk regardless of whether or not they had experienced non-fatal strangulation. Additionally, non-fatal strangulation was a far more common form of physical abuse for African American women vs. other race/ethnic groups whether or not they were the victim of actual or attempted homicide (40% of African American vs. 17% for white and 22% for Latina women).” (Glass, 2008)

While we could not find research specifically about the correlation of strangulation with people with disabilities, we suspect that this population is more vulnerable given other available data on exposure to domestic and sexual violence. Over all rates of



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domestic violence and sexual violence among people with a disability are disproportionately higher, so that a hypothesis that the rates of strangulation are also high should be further investigated. We do know that this is a situation reported by a survivor in Maine: “Yes, I disabled (sic) and can not really defend myself.” (Maine Coalition to End Domestic Violence, 2011)

In summary, nationally, “These findings indicate that strangulation is a relatively prevalent form of violence toward women who experience physical violence in an abusive relationship ...and is a significant predictor for future lethal violence.” (Glass, 2008)

### **Medical and Social Impact of Strangulation**

*“Today, it is known unequivocally that strangulation is one of the most lethal forms of domestic violence. When a victim is strangled, she is at the edge of a homicide. Unconsciousness may occur within seconds and death within minutes.”* (Strack & Gwinn, On the Edge of Homicide: Strangulation as a Prelude, 2011)

Public and professional awareness of the dangerousness of a strangulation event lags well behind the medical progress in the field. While most medical investigation has been conducted in post mortem evaluations, there is a growing literature on the effects of non-lethal strangulation. (Shields LB, 2010) (Strack GB, 2001) .

Confusion can be present from the beginning, associated with the language commonly used to describe the act of strangulation. “Choking” actually refers to having something physical stuck in your throat that interferes with your air intake. One might “choke” on a chicken bone. Strangulation, on the other hand, in the context of intimate personal violence, is an act of physical aggression—an assault by one person on another. The end result of strangulation may include direct physical injuries to the body, particularly the neck and throat such as fracturing the hyoid bone or damaging soft tissues. Strangulation can also result in injuries related to oxygen deprivation. When the body is deprived of air, asphyxia, pathological changes caused by lack of oxygen, results. This oxygen deprivation can result either from impeding the actual airway(s) or by interfering with the blood flow to the brain. Either can be quickly fatal, or produce longer-term damage to the brain called anoxic brain injury. Suffocation, closing off airways at the nose or mouth, can also result in anoxic brain injury. Strangulation and suffocation are both methods that produce asphyxia, which is the root cause of the injury. (Strack & Gwinn, On the Edge of Homicide: Strangulation as a Prelude, 2011) We will discuss the issue of definition more as we consider a statutory response.

The potential lethality of strangulation is present in each assault. The intent of the assailant may not be to kill, merely to intimidate, however death and serious injury can occur without intent, by the intrinsic nature of the assault.

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“Only 4 pounds of pressure for 10 seconds is needed to close off the jugular veins and cause unconsciousness. In comparison, it takes eight pounds of pressure to pull the trigger of a gun. It takes as little as 11 pounds of pressure to close off the carotid arteries and cause unconsciousness. Strangulation can also cause the trachea to close, making it impossible for the victim to breath.” (International Association of the Chiefs of Police, 2006)

Non-lethal strangulation can result in serious injury “Victims may have no visible injuries, yet because of underlying brain damage due to the lack of oxygen during the strangulation assault, they may have serious internal injuries” (Strack & Gwinn, *On the Edge of Homicide: Strangulation as a Prelude*, 2011) The initial brain response to injury is likely to include a period of altered mental state or loss of consciousness followed by headaches, dizziness, slowed processing of information, forgetfulness, tiredness and sensitivity to noise and lights. Most of these initial symptoms will pass after a period of time. However, there can be more long lasting symptoms. (Alabama Department of Rehabilitation Services, 2010)

Particularly when multiple strangulation events occur and/or when the victim has lost consciousness, victims can suffer varying degrees of anoxic brain injury. The range of injuries can include impairment of their executive function, including difficulties in planning and setting goals, being organized, being flexible, engaging in successful problem solving, prioritizing and acting independently. (Alabama Department of Rehabilitation Services, 2010) The injuries may also cause emotional, behavioral and social changes, including depression, anxiety, trouble controlling mood and behavior and with social relationships. (Alabama Department of Rehabilitation Services, 2010)

The literature indicates that it is common for survivors to experience a range of physical and emotional symptoms after a strangulation event.

“ In a study in which women were directly questioned about symptoms, at least 85% of intimate partner strangulation victims experienced physical symptoms (such as sore throat, difficulty breathing, or neurological symptoms) and at least 83% reported one or more psychiatric symptom in the two weeks following the event.” (Wilbur L, 2001)

Maine specific data gathered indicates that survivors’ reports in Maine are consistent with the national data. Their comments indicated a range of symptoms including short and long term medical (Turket, 2007) effects and short and long term emotional symptoms. As one survivor noted, “Today I often choke on my saliva and am constantly trying to clear my throat. I can’t let anyone get near my neck. “ (Maine Coalition to End Domestic Violence, 2011). MECASA’s report notes confirms a corresponding presence of symptoms in victims that sought sexual assault services stating: “Injuries: Of clients experiencing strangulation, 100 percent experienced bruising on throat or neck, difficulty breathing/swallowing, loss of consciousness, and/or other injuries as a result.” (Maine Coalition Against Sexual Assault, 2011)

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We know that a significant number of women experience multiple strangulation events. There is an increased likelihood of negative medical impact with repeated events, particularly neurological symptoms.

“...analysis of the same data found that 56% of the women had experienced more than one strangulation event. The frequency with which women reported some kind of symptoms, particularly neurological, increased among women who were the victims of multiple versus one strangulation event.” (Smith DJ, 2001)

This pattern of multiple strangulation events was noted in the Maine specific data as well, with 79.3% of the women surveyed in the MCEDV study responding that there had been multiple strangulations rather than a single event. (Maine Coalition to End Domestic Violence, 2011) In addition, sexual assault advocates reported that “Of clients indicating they have experienced this kind of violence, about half have done so on more than one occasion.” (Maine Coalition Against Sexual Assault, 2011) Batterers confirmed this pattern of repeat injuries as well as the fact that 20% responded yes to the question as to whether they strangled their partner until they became unconscious.

In addition to the risk of immediate death or injury, the presence of strangulation presents an increased risk element for further lethal or nonlethal events, “strangulation was associated with lethality of incident, with almost five percent (4.8%) lethality in the 289 incidents in which a partner or ex-partner strangled the woman, compared to 1.0% of the 4,722 incidents where the abuser used other types of violence.” (Block, 1999) Significant research as part of Jacquelyn Campbell’s work on the Danger Assessment also indicated that:

“Women who were the victims of completed or attempted homicide were far more likely to have a history of strangulation compared to the abused control women. Further, within each group, scores on the DA (excluding the choking item) were significantly higher for women who reported strangulation than for women without such a history. ....Both analyses found that controlling for the demographic predictors, the odds of becoming an attempted homicide increased by about seven-fold for women who had been strangled by their partner.” (Glass, 2008)

### **Social and Emotional Impacts of Strangulation**

The social and emotional impact of strangulation was demonstrated clearly in the Maine specific data. The MCEDV study asked two open-ended questions aimed at determining impact. Question 9 asked: Do you know what made the abuser stop strangling/choking you? Responses fell into the following categories:

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Consequences to her:

- I passed out; My contacts popped out of my eyes; I like to think that it was because he didn't really want to kill me. I started crying and begging him to stop. I told him to remember I have a little boy.

Intervention by a child or other:

- My son threw himself on both of us and he stopped; I was holding one of my children at the time; My child came into the room and started screaming; My two year old came in the room; His mother hollered at him.

Intervention (or fear of intervention) by an authority:

- Police knocked on the door; Realized could go to jail for attempted murder.

Action on her part:

- I started crying and begging him to stop. I told him to remember I have a little boy; One time was because my hands were free and I punched him. (Another time was because I went unconscious.)

Other: Done violating sexually; He didn't, I had to leave him; Got his point across.  
(Maine Coalition to End Domestic Violence, 2011)

The presence of children either as passive babes in their mothers' arms or as active agents attempting to stop the strangulation was a common theme. Clearly the effect on children exposed to this potentially lethal violence must be seen as a significant impact.

The impact themes within this study were carried further by the question: "It is important that people understand the possible impact of strangulation/choking on a victim. After this event, do you feel that you were more afraid, intimidated or changed your behavior in any way due to a fear of it happening again?" 88.2% of women responding answered yes. They were then given an opportunity for comment. A sample of their responses follows:

Fear and submission:

- I did whatever the hell he wanted me to do; I was afraid of it happening again so I tried to do what he told me to do; I was terrified of him; He made it clear he could kill me with one hand; I lived in fear for 20 years; He often grabbed me by the throat to get my attention; Today I often choke on my saliva and am constantly trying to clear my throat; I can't let anyone get near my neck. His choking sent the message "he was the boss"; I was afraid to call the police; Because the only time I did, they did nothing and he said he would kill me if I ever did it again; Definitely yes, I was pregnant, I was in fear of my life and my child's life after that; I was walking around on egg shells.

Flight and continued fear:

- After the second time, I took the children and left; I have gotten a PFA to keep him away; Victim reported that she is "done with him" due to being choked by the abuser on several occasions; She is in fear for her life.

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Other consequences:

- You withdraw, become more apprehensive of anybody approaching you; More guarded; Lose the open trust that you had; Now I stay away from all relationships; I can't have anyone come up behind me, I really like to have my back to a wall if I am in a crowd. (Maine Coalition to End Domestic Violence, 2011)

The data collected from sexual assault centers on these two issues states:

“Stopping the Strangulation: Clients experiencing strangulation largely indicated that the strangulation did not end until the perpetrator had completed the violence. Responses included, “He was done.” “Client gave in to perpetrator demands.” “Client lost consciousness.” “Perpetrator threatened to kill client.” Only one response indicated that the client was able to end the strangulation by kneeling the perpetrator in the groin.” (Maine Coalition Against Sexual Assault, 2011)

The use of strangulation as a tactic of control in the context of the sexual violence from these reports is clear as well as the clear link between strangulation and sexual assault.

The responses to the survey data collected by MABIPS from batterers is primarily related to domestic violence, but some comments reflect sexual violence within an intimate relationship. Their responses confirm the victims’ assessments that the batterers were intentionally using strangulation as a powerful tactic of intimidation and control. That summary includes comments in response to a similar question of motivation for strangulation such as: “It made her do what I wanted; Stop her from moving; Get what I wanted”. (Maine Association of Batterers Intervention Programs, 2011) As Attorneys Strack and Gwinn comment in their landmark study: “most abusers do not strangle to kill-- they strangle to show they *can* kill”. (Strack & Gwinn, On the Edge of Homicide: Strangulation as a Prelude, 2011)

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**Review of Statutes**

*“The purpose of having enforceable statutes concerning strangulation from the point of view of public health policy is to deter the primary occurrence of strangulation, to punish those who have committed strangulation assaults, and to protect the victims of these assaults from further exposure to violence. To achieve these goals, the criminal justice response to strangulation needs to be clear and commensurate with the seriousness of the attack, a goal that is best achieved with clear statutory language.” (Laughton, Glass and Worrell, 2009).*

As noted in the executive summary, the task group entered this study process with no bias that strangulation necessarily required a special place in current Maine statute. Currently Maine does not name strangulation in the Criminal Code nor have an associated legal definition of strangulation under the assumption that strangulation would be effectively addressed within the more general crimes against the person. In fact, the initial bias was that strangulation could be prosecuted under existing statute without change. However, we found three realities that moved us toward recommending that strangulation be directly addressed in the criminal code.

First, we found a strong case that by virtue of its prevalence and its serious medical and social impacts strangulation deserves special attention. We observed that strangulation was not being prosecuted consistent with its prevalence and/or its severe impact in Maine, which was consistent with other states’ reviews prior to changes in their statutes to address strangulation more directly. We have reviewed data on prevalence and impact in prior sections; so will not revisit that material at this point.

Second, we came to the conclusion that a by-product of the current silence in statute, an unintended consequence had emerged in practice. At all levels of the system, law enforcement, advocacy, prosecutors, medical providers, advocates and victims themselves were not paying attention to strangulation at the level it needed—if at all. Behavior within those systems can be driven by what is named in the criminal code. Investigations may be truncated prematurely without a statute-driven need to document strangulation, which affects law enforcement data collection, advocacy and medical documentation—which in turn affects the ability to prosecute successfully. This lack of data collection also makes it less likely that the awareness of a strangulation event as part of an assault makes it into the court setting to allow judicial consideration in sentencing or other decisions. Lack of data and effective prosecution also affects both the awareness of the victim and the public about the frequency and the severity of the event. In addition we found that a top down attention to strangulation could to alter behavior at other points in the system. Placing the responsibility on law enforcement, advocates, diverted attention from the causal elements of their neglect of strangulation and was unlikely to shift any pattern of behavior. (Please see additional discussion of this issue in the Training and Education section)

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Third, we observed national best practice shifts with related changes in laws within 34 states (see Table of States) adding language addressing strangulation in some manner to their criminal code for similar reasons as stated above, with several other states having pending legislation in process. In the last two legislative years alone (2009 and 2010) ten states have passed legislation address the danger strangulation poses to victims by either creating new strangulation crimes or expanding existing laws related to strangulation. These include: Arkansas (§§ 5-13-204 and 5-13-205) Arizona (§ 13-1204), Delaware (Title 11 § 607), Illinois (720 §§ 5/12-3.3 and §5/12-4), Mississippi (§ 97-3-7), Nevada (§§ 200.400, 200.481, 200.485, and 200.591), New Hampshire (§ 631:2), New York (§§ 121.11 through 121.13 of the Penal Law), Oklahoma (§ 644 of Title 21), and Texas (§ 22.01 of the Penal Code).

*“Given the association between attempted strangulation and later lethal violence as well as the important public health burden of these injuries, the ability to effectively prosecute and incarcerate perpetrators represents a significant advance in enhancing the safety of abused women.....” (Laughton, 2009)*

Once we had determined that statute change was indicated, we went through a decision tree of options keeping in mind:

*“It is less clear whether it is useful to make strangulation a separate statute or to add it to existing assault laws. The usefulness or ease of including a new statute as opposed to amending an existing statute will depend on the structure of similar statutes in the existing statutory scheme. For example, if a state’s statute for felony assault includes a definition of serious bodily injury, then an amendment to the statutory definition of serious bodily injury to include strangulation would result in the needed change in the law and might be easier to accomplish than adding an entirely new statute.” (Review and Analysis of Laws Related to Strangulation in 50 States Kathryn Laughton, Nancy Glass and Claude Worrell, Eval Rev 2009; 33; 358 originally published online Jun 9, 2009);*

The task group considered a matrix of options including stand-alone statutes, sentencing enhancements, changes in domestic violence statutes without addressing other contexts of strangulation, changes in definitions and introducing strangulations as an element into existing crimes. In addition to asking whether these changes would be helpful, we asked if the change(s) would have the unintended consequence of doing any harm. The task group members after considering the list of alternatives reached consensus on the following recommendations. The group chose not to create a separate crime of strangulation but to add strangulation explicitly to an act that constitutes extreme indifference to the value of human life within Aggravated Assault. Following is larger segment of statute that sets the context. (Changes are underlined)

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**MAINE CRIMINAL CODE**  
TITLE 17-A  
CHAPTER 9  
OFFENSES AGAINST THE PERSON

**I. Add to “circumstances manifesting extreme indifference to the value of human life” in the existing aggravated assault statute as:**

**208. AGGRAVATED ASSAULT**

3. A person is guilty of aggravated assault if he intentionally, knowingly, or recklessly causes:
  - a. Serious bodily injury to another; or
  - b. Bodily injury to another with use of a dangerous weapon; or
  - c. Bodily injury to another under circumstances manifesting extreme indifference to the value of human life. Such circumstances include, but are not limited to, the number, location or nature of the injuries, the manner or method inflicted, ~~or~~ the observable physical condition of the victim, or use of strangulation.
4. Aggravated assault is a Class B crime.

Some prosecutors involved in the discussion provided consultation that this change would allow more prosecutions of strangulation without creating unintended negative consequences.

Initially there was also discussion of amending the definition of serious bodily injury by including strangulation. However, consensus was reached that this action was unnecessary as a vehicle to improve management of serious acts of strangulation. In addition the group noted that the internal construct of the definition then would not be parallel, that is having a list of impacts and then a method (strangulation).

Given the chosen recommendations for statute change, we did not find that we additionally needed to address increased penalties, impact of prior convictions, witnessing by a child, affirmative defenses, attempted strangulation or specific sexual assault and/or domestic violence statutes (the intended scope of this protection being larger than DV or SA alone).

**II. Definition of Strangulation:**

Once the decision had been made to recommend inclusion as above in the Criminal Code, the next concern was determining a recommendation for a legal definition of strangulation. Here there was considerable discussion. A particularly important issue was to determine what behaviors or elements would be included within the definition. In Strack and Gwinn’s landmark study on strangulation in 1998, they cite the following definitions:



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"... the terms "strangulation," "choking," and "suffocation." These terms are often confused, yet they all lead to asphyxia--a lack of oxygen to the brain. In "strangulation," external compression of the neck can impede oxygen transport by preventing blood flow to or from the brain or direct airway compression. "Choking" refers to an object in the upper airway that impedes oxygen intake during inspiration and can occur accidentally or intentionally. "Suffocation" refers to obstruction of the airway at the nose or mouth and can also occur accidentally or intentionally. Therefore, the term "strangulation" should always be used to specifically denote external neck compression. The term "choking" should be reserved for internal airway blockage. When the victim, perpetrator, or witness uses the term "choking," document the statement with quotation marks since, in nearly all cases; they are describing strangulation, not choking. Professionals working in this field should always use the word "strangulation" when referring to external compression of the neck." (Strack & Gwinn, On the Edge of Homicide: Strangulation as a Prelude, 2011)

Prevalence and impact data collected from Maine victims and perpetrators, as well as much of the national data on prevalence and impact refer to strangulation without explicitly naming smothering. Here we initially thought that we would face a conflict between our logic that data on prevalence and impact creates a special case for strangulation and the national best practice recommendations that both should be addressed within definitions in order to respond effectively in practice in the field. In looking further into this dilemma we turned to Vermont. The State of Vermont recently adopted a statute directly assessing strangulation. It developed this legislation from errors learned from earlier attempts by other states. They realized that the root problem that caused the significant health and social impacts is asphyxia and addressed that root problem, defining strangulation as behaviors resulting in asphyxia as follows.

"Strangulation is defined as 'any form of asphyxia, including, but not limited to, asphyxia characterized by closure of the blood vessels or air passages of the neck as a result of external pressure on the neck or the closure of the nostrils or mouth as a result of external pressure on the head.'" (Vermont)

National literature addressing the impact of strangulation addresses the impact of asphyxia so there is concurrence there. Prevalence data nationally addressed asphyxia, using a collection of terms such as "choking", "strangulation", "smothering" all that refer to the presence and prevalence of the underlying condition of asphyxia. We feel that the case made for the prevalence and impact of the event determining its need for special attention holds for definitions such as Vermont's and would recommend that Maine follow that example.

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Additional options include: Strangulation would then be defined in a definition section as: impeding the breathing or circulation of the blood of another person by applying pressure on the throat or neck or by blocking the nose or mouth of another person.

### **III. Changes in the Bail Code**

Amend the statutes governing Maine Criminal Justice DV law enforcement policy and the Maine Bail Code to require police to provide information to bail commissioners about allegations of strangulation, and the Maine Bail Code to require bail commissioners to obtain and consider that information before setting bail. (Changes underlined)

#### **- 25 MRS sec. 2803-B**

(D)(2) A process for the collection of information regarding the defendant that includes the defendant's previous history, the parties' relationship, whether the alleged offense included strangulation, the name of the victim and a process to relay this information to a bail commissioner before a bail determination is made.

#### **- Title 15 MRS sec. 1023-C**

4. Limitations on authority. A bail commissioner may not:

In a case involving domestic violence, set pre-conviction bail for a defendant before making a good faith effort to obtain from the arresting officer, the district attorney, a jail employee or other law enforcement officer:

- (1) A brief history of the alleged abuser;
- (2) The relationship of the parties;
- (3) The name, address, phone number and date of birth of the victim;
- (4) Existing conditions of protection from abuse orders, conditions of bail and conditions of probation;
- (5) Information about the severity of the alleged offense, including but not limited to whether the alleged offense included strangulation.

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**Training and Education**

*“Police officers, prosecutors, civil attorneys, advocates, and medical professionals rarely receive medical training concerning the identification and documentation of injuries, or the signs and symptoms associated with strangulation... No legal professional should work with family law, personal assaults, medical symptoms, documentation techniques and long-term effects. Thousands of women continue to suffer such assaults without effective prevention and intervention efforts in place in communities across America. But the research is now clear: When a victim is strangled, she is at the edge of a homicide. We are all responsible for becoming educated and acting aggressively with the information now available. Responsible professionals can prevent major injuries to victims of abuse, facilitate needed treatment and support—even save—lives.” (Strack & Gwinn, On the Edge of Homicide: Strangulation as a Prelude, 2011)*

**Criminal Legal Training and Education:**

Studies have shown that police and prosecutors often overlook strangulation symptoms and instead focus on visible injuries because they don’t know what to look for and/or what questions to ask. (Strack & Gwinn, On the Edge of Homicide: Strangulation as a Prelude, 2011) We make the following observations and recommendations for training in our criminal legal system.

**Law Enforcement:**

Advocates from the member organizations of the Maine Coalition to End Domestic Violence have partnered with law enforcement to provide comprehensive training to new and experienced law enforcement officers in Maine about domestic violence related strangulation on a regular basis for over ten years. More recently the training was included in the Maine State Police annual in-service program for new and experienced Troopers. Strangulation is also a training component in the Basic Law Enforcement Training Program (BLETP) at the Maine Criminal Justice Academy, which individuals take to become certified full time law enforcement officers. More recently in the past year the information has been included in the reconstituted Law Enforcement Pre Service (LEPS) training program, which individuals must take to become certified part time law enforcement officers.

The training includes: information about the dynamics and lethality of strangulation as a tactic of power and control; investigative techniques including recognition of signs and symptoms, interview questions to ask the victim, and; law enforcement officer responsibilities including referrals to the victim for emergency medical care, and follow up

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interviewing and evidence collection. The training reflects best practice in Maine and around the country.

While this training continues in both the BLETP and LEPS at the Maine Criminal Justice Academy, it clearly has not been enough to increase the prosecution of strangulation as an assault dangerous to human life. While strangulation can be prosecuted as aggravated assault if serious bodily injury results or if it is committed under circumstances manifesting an extreme indifference to the value of human life, strangulation, when prosecuted, is usually prosecuted as simple assault (Class D), and offenders are not held fully accountable for this life threatening tactic.

Because of the current application of the assault statutes, the training has had little effect in terms of increasing accountability for offenders who use strangulation. While the training at a minimum has raised awareness, because of prosecution requirements and approaches, there has been little functional use for the training information for law enforcement officers. As a result, there is little data available from law enforcement agencies about the incidence and prevalence of strangulation, unless it appears in the narrative description. The gap in Maine elevating the issue of strangulation and increasing law enforcement response to strangulation is not a training gap; a law is necessary to provide prosecutors with the tool to legally recognize strangulation, and therefore to make the existing training functionally useful for law enforcement officers.

A change to the statute will not create great additional training needs. It will provide the small but crucial piece that has been missing from existing trainings – the legal authority to recognize and charge strangulation as life-threatening domestic violence.

However, that said, there would be some additional training for new and experienced officers on the investigation and documentation of strangulation related to any new statute. We would recommend that this training be administered by the Maine Criminal Justice Academy consistent with the training on all changes in statute.

Given the difficulty retrieving data on occurrence of strangulation from the law enforcement data banks, we do not have clear information on the implementation of the training protocols in the field. However, we do have some Maine specific information drawn from victim and abuser reports. MCEDV study indicates that victims involved law enforcement 39.4% of the time with law enforcement documenting the strangulation 61% of the time. (Maine Coalition to End Domestic Violence, 2011) The MECASA study indicates: “More than half the time, clients experiencing strangulation did not make a report to law enforcement. Of those who did, the strangulation was documented two-thirds of the time”. (Maine Coalition Against Sexual Assault, 2011) The MABIPS study indicated that batterers reported that law enforcement asked about strangulation 46% of the time (these are events where an incident of strangulation had in fact occurred) and that law enforcement documented that incident 49% of the time. Given that the batterers can validate that the incident actually occurred and was asked about less than half the

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time, we have some glimpse into the potential for these incidents to be missed. Batterers also reported that only 37% of the time when they had been involved in an incident of strangulation was that part of the charge that got them to the batterer's intervention program. (Maine Association of Batterers Intervention Programs, 2011) This data would indicate that there is improvement needed in the investigation of strangulation, as noted in the anecdotal reporting.

**Prosecution:** We recommend that prosecutors be provided training on changes in statute regarding strangulation and any related expectations in the usual manner of their annual update within the context of the Prosecutors Conference. For prosecutors unaccustomed to prosecuting strangulation cases with their particular complexities or unfamiliar with more recent practices in investigation and prosecution, there may be other training needs. We would rely on the Maine community of prosecutors to articulate any of these possible further training needs and identify the appropriate audience and venues for that training.

**Advocates within domestic violence resource centers, sexual assault centers and prosecution based advocate:** Advocates, victim witness, court and other community advocates need additional training on strangulation, including its medical risks, affect on victims and appropriate system responses in order to better inform victims/survivors. In addition, the systems that house these advocates need to prioritize strangulation within their data collection, emergency response and support services and within their role in the coordinated community response networks. Noting the significant impact that survivors report strangulation has on their level of intimidation as well as its presence as a motivating factors for a decision to leave an abusive relationships, advocates should be well trained in how to support the survivor in managing the emotional, physical and criminal legal aspects of the event. The Maine Coalition to End Domestic Violence has created a representative group from the full service domestic violence resource centers, who were part of the focus group in the Maine Survivors Voice on Strangulation survey, to address this need within the domestic violence service community.

**Medical Professionals and Health Care Settings:**

“These findings indicate that strangulation is a relatively prevalent form of violence toward women who experience physical violence in an abusive relationship (a finding consistent with the sparse literature on the subject) and is a significant predictor for future lethal violence. There is an urgent need for emergency physicians and nurses to be trained in the importance of strangulation as a risk factor for homicide of women and how to thoroughly assess, document and obtain appropriate treatment. The documentation of the strangulation may be particularly useful to expert witnesses in conveying the risk of lethality in cases of attempted homicide. Further, forensic nurses can play an important role in this endeavor, and training modules for forensic nurses in this arena have already been developed. In addition, it is important for emergency medical technicians and

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police officers, as first responders, to be trained on the importance of ensuring that these incidents are evaluated in an emergency department, both to document the attempt and to thoroughly evaluate the injury. (Glass, 2008)

The literature, as well as the anecdotal reports from medical professionals in Maine including members of the task group and Commission, indicates that medical professionals do not routinely assess for strangulation in domestic or sexual violence situations and that further training is needed as to best practice protocols, including forensic documentation. We also observe that medical first responders, including ER staff, are often the first point of medical contact with victims, so that the training audience should include a focus on this group of medical professionals. The scope of this study did not allow for a thorough review of medical practice in Maine.

However, we were able to get some information about victims' use of and experience within medical intervention in Maine. MCEDV's survey noted that 83 (75.5%) of victims did not receive medical attention subsequent to a strangulation. Of those who did, 24.4% noted that the strangulation was documented in their medical record. In addition, 26.7% said that they did not know what had been entered into the medical record. (Maine Coalition to End Domestic Violence, 2011) MECASA's summary notes as to the experience of sexual assault survivors who experienced strangulation: "About 50 percent of clients experiencing strangulation sought medical attention. Of those, the strangulation was documented two-thirds of the time." (Maine Coalition Against Sexual Assault, 2011) It is of concern that these victims did not receive medical attention. In addition, it is concerning that a lack of documentation in the medical record could interfere with effective investigation and prosecution.

We recommend that a review of training and capacity building needs for Maine's medical professionals, particularly emergency room and medical first responders, take place. We recommend that review address appropriate responses to medical management of strangulation, as well as documentation for forensic purposes. We recommend that training and capacity building to strengthen Maine's medical response to strangulation become a priority for Maine health systems, similar to the current prioritized response by Maine General Hospital.

Note: the awareness that medical staff in Maine hospitals needed additional training to effectively recognize, treat and document strangulation events was sufficiently compelling that Maine General Hospital and co-sponsors such as the Maine Coalition to End Domestic Violence, Physicians for Social Responsibility, and the SAFE Program at the Maine Attorney General's Office, have planned and funded a statewide conference on April 12, 2012 with national speakers on strangulation and risk assessment in medical settings.

In summary, non-lethal strangulation is an important predictor for future lethal violence among women who are experiencing IPV. We urgently need to improve the clinical response to women reporting an incident of non-lethal strangulation

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to improve treatment and enhance safety planning for this high-risk group of abused women. (Glass, 2008)

### **PUBLIC AWARENESS**

General lack of awareness of the medical impact, prevalence and impact of strangulation is consistent within the general and professional public. While we were not able to do widespread awareness testing as part of this study, anecdotal reports and review of policies in multiple disciplines speaks to the lack of awareness. While there are individuals or clusters of professionals who are aware, they are the exception rather than the rule. Particularly compelling was information from survivors that they did not understand the danger and long-term effects of what was happening to their bodies, particularly in cases of multiple strangulation events and particularly related to anoxic brain trauma. This lack of awareness also accompanied strangulation events not associated with domestic or sexual violence, such as choking games on middle school playgrounds and between “consenting” sexual partners—again by consistent anecdotal reporting. There is a need for increased public awareness across the board as to the risks and appropriate interventions in strangulation. We would recommend that organizations such as MCEDV and MECASA continue their public awareness efforts. We also recommend that Maine’s robust public health network, as well as individual health care facilities, use their existing training systems and public awareness vehicles, such as newsletters and websites, to increase public awareness about the serious health risks associated with strangulation. Maine Center for Disease Control has named domestic violence as a major public health concern and created goals and objectives for addressing this issue. We would suggest that they also include both public awareness and professional awareness on the public health concerns related to strangulation within this existing plan.

## Appendix 1: Enabling Legislation

### LD 1027: An Act To Make Strangulation an Aggravating Sentencing Factor

**Be it enacted by the People of the State of Maine as follows:**

**Sec. 1. 17-A MRSA §207, sub-§4** is enacted to read:

4. If the State pleads and proves that the bodily injury or offensive physical contact included strangulation, the court, in determining the appropriate sentence, shall treat this as an aggravating sentencing factor. For the purposes of this subsection, "strangulation" means the application of pressure to another person's throat or neck or the blocking of the other person's nose or mouth that causes the other person to experience impeded breathing or blood circulation.

**Sec. 2. 17-A MRSA §207-A, sub-§3** is enacted to read:

3. If the State pleads and proves that the bodily injury or offensive physical contact included strangulation, the court, in determining the appropriate sentence, shall treat this as an aggravating sentencing factor. For the purposes of this subsection, "strangulation" means the application of pressure to another person's throat or neck or the blocking of the other person's nose or mouth that causes the other person to experience impeded breathing or blood circulation.

**Sec. 3. 17-A MRSA §208, sub-§3** is enacted to read:

3. If the State pleads and proves that the bodily injury or serious bodily injury included strangulation, the court, in determining the appropriate sentence, shall treat this as an aggravating sentencing factor. For the purposes of this subsection, "strangulation" means the application of pressure to another person's throat or neck or the blocking of the other person's nose or mouth that causes the other person to experience impeded breathing or blood circulation.

### SUMMARY

This bill creates an aggravating sentencing factor for assault, domestic violence assault and aggravated assault. If the offensive physical contact, bodily injury or serious bodily injury in the commission of the crime included strangulation, the court must consider it as an aggravating sentencing factor in setting a sentence. "Strangulation" is defined as the application of pressure to another person's throat or neck or the blocking of the other person's nose or mouth that causes the other person to experience impeded breathing or blood circulation.



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**Resolve Chapter 76: Resolve, To Coordinate Stakeholders To Review Best Practices in the Management of Strangulation and Determine Methods To Address the Issue in Maine**

**Emergency preamble. Whereas,** acts and resolves of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

**Whereas,** there is a national increased awareness of the severity of strangulation, including its high prevalence in domestic and sexual assaults, its serious impacts, including life-threatening levels of anoxic brain damage, and its use as a tool of intimidation; and

**Whereas,** public and professional awareness of the prevalence and impact of strangulation in Maine may lag behind research data; and

**Whereas,** stakeholders should promptly review best practices models and tailor them to fit Maine's needs; and

**Whereas,** in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore, be it

**Sec. 1. Review of best practices in management of strangulation.**

**Resolved:** That the Maine Commission on Domestic and Sexual Abuse, created in the Maine Revised Statutes, Title 19-A, section 4013 and referred to in this resolve as "the commission," shall study strangulation to determine the presence and patterns of strangulation in domestic and sexual violence in the State and the current management of strangulation within criminal law. The commission shall review model practices and research in other states, including the impacts of other states' legislation, public awareness activities and changes in policy. The commission shall invite interested parties, including but not limited to representatives from state and local law enforcement, prosecutors, the judicial branch, the Criminal Law Advisory Commission under Title 17-A, section 1351, the Maine Coalition to End Domestic Violence, the Maine Coalition Against Sexual Assault, first responders and other emergency care providers; and be it further

**Sec. 2. Report. Resolved:** That the commission shall submit a report by February 15, 2012 to the Joint Standing Committee on Criminal Justice and Public Safety. The report must include the commission's findings and recommendations regarding methods to deal with strangulation in the State, including, as it determines necessary, proposed legislation; proposed education and training for law enforcement, prosecutors and the judiciary; and

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proposed programs and outreach for public awareness and advocacy. Upon receipt of the commission's report and recommendations, the committee may report out legislation to the Second Regular Session of the 125th Legislature.

**Emergency clause.** In view of the emergency cited in the preamble, this legislation takes effect when approved.

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## Appendix 2: Membership

### a. Maine Commission on Domestic and Sexual Violence

Sherry Edwards, *Caring Unlimited*  
Lois Galgay Reckitt, *Family Crisis Services*  
Mary O'Leary, *Volunteers of America*  
Kathryn Maietta, *Private Practice*  
Michelle Ramirez  
Rick Doyle, *Next Step Domestic Violence Project*  
Lucia Hunt, *Pine Tree Legal Assistance*  
Susan Tedrick  
Alice Clifford, *District Attorney's Office District V*  
Michael Bussiere, *Lewiston Police Department*  
Donna Dennison, *Know County Sheriff's Office*  
John Morrison, *Maine Department of Public Safety*  
Carey Nason, *Safe Campus Project-University of Maine Orono*  
Faye Luppi, *Cumberland County Violence Intervention Partnership*  
Karen Elliot, *Maine Department of Health and Human Services*  
Kate Faragher Houghton, *Consultant*  
Steve Edmondson, *Sagadahoc County District Attorney's Office*  
**Chair**, Julia Colpitts, *Maine Coalition to End Domestic Violence*  
**Vice-Chair**, Elizabeth Ward Saxl, *Maine Coalition Against Sexual Assault*  
Marty McIntrye, *Sexual Assault Crisis Center*  
Tamar Mathieu, *Rape Response Services*  
Susan Beaulieu  
Megan Hatch  
Laura Yustak Smith, *Office of the Attorney General*  
Don Pomelow, *Maine State Police*  
Holly Stover, *Maine Department of Health and Human Services*  
Susan Berry, *Maine Department of Education*  
Denise Giles, *Maine Department of Corrections*  
Hon. Valerie Stanfill, *Maine Judiciary*  
Fatuman Hussein, *United Somali Women of Maine*  
Romy Spitz, *Maine Department of Health and Human Services*  
Denis Culley, *Legal Services for the Elderly*  
Ruth Jewell, *Penobscot Indian Nation*  
Jane Root, *Maliseet Domestic Violence and Sexual Assault Response Program*

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**b. Members of the Strangulation Task Group**

Julia Colpitts, **Chair of Strangulation Task Group**, *Maine Coalition to End Domestic Violence*

Holly Stover, *Maine Department of Health and Human Services*

Jen Annis, *Family Crisis Services*

Sherry Edwards, *Caring Unlimited*

Donna Dennison, *Knox County Sheriff's Office*

Kate Faragher Houghton, *Consultant in Violence Prevention*

Denise Giles, *Maine Department of Corrections*

Margo Batsie, *Maine Coalition to End Domestic Violence*

Polly Campbell, *Maine Office of the Attorney General*

John Burke, *York County District Attorney's Office*

Jill Barkley, *Maine Coalition to End Domestic Violence*

Jane Root, *Maliseet Domestic Violence and Sexual Assault Response Program*

Tamar Mathieu, *Rape Response Services*

Denis Culley, *Legal Services for the Elderly*

Susan Tedrick, *Franklin Memorial Hospital*

Mary O'Leary, *Volunteers of America*

Fatuma Hussein, *United Somali Women of Maine*

Don Pomelow, *Maine State Police*

Steve Edmondson, *Sagadahoc County District Attorney's Office*

Lucia Hunt, *Pine Tree Legal Assistance*

Rick Doyle, *Next Step Domestic Violence Program*

Faye Luppi, *Cumberland County Violence Intervention Partnership*

Kathryn Maietta, *Private Practice*

Ruth Jewell, *Penobscot Indian Nation*

Michael Bussiere, *Lewiston Police Department*

Hilary Fernald, *Legal Intern*

Allison Ouellett, *Legal Intern*

**Consultants to the Task Group**

Hon. Valerie Stanfill, *Maine District Court*

Commissioner John Morris, *Maine Department of Public Safety*

Alice Clifford, ADA, *Penobscot County District Attorney's Office*

Laura Yustak Smith, AAG, *Maine Office of the Attorney General*

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## Appendix 3: National Criminal Statutes Addressing Strangulation

### a. Table of States

State	Specific type of law(s) which addresses strangulation	Classification of the crime	Definition of strangulation (and suffocation)	Statute(s)
Alabama	Criminal domestic violence statute	Class B felony	<p><b>Strangulation:</b> Intentionally causing asphyxia by closure or compression of the blood vessels or air passages of the neck as a result of external pressure on the neck.</p> <p><b>Suffocation:</b> Intentionally causing asphyxia by depriving a person of air or by preventing a person from breathing through the inhalation of toxic gases or by blocking or obstructing the airway of a person, by any means other than by strangulation as defined by statute.</p>	<p><b>Domestic violence by strangulation or suffocation</b> (2011 Alabama Laws Act 2011-581 (H.B. 512)):</p> <p>A person commits the crime of domestic violence by strangulation or suffocation if the person commits an assault with intent to cause physical harm or commits the crime of menacing pursuant to Section 13A-6-23, Code of Alabama 1975, by strangulation or suffocation <b>or</b> attempted strangulation or suffocation against a person with whom the defendant has a <b>qualified relationship</b>.</p>
Alaska	Strangulation included in the definition of “dangerous instrument”	Various	<p><b>Strangulation:</b> Using hands or other objects to impede normal breathing or circulation of blood by applying pressure on the throat or neck or obstructing the nose or mouth.</p>	<p><b>Definitions</b> (AS § 11.81.900):</p> <p>“‘[D]angerous instrument’ means....hands or other objects when used to impede normal breathing or</p>

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State	Specific type of law(s) which addresses strangulation	Classification of the crime	Definition of strangulation (and suffocation)	Statute(s)
Alaska (cont.)				<p>circulation of blood by applying pressure on the throat or neck or obstructing the nose or mouth.”</p> <p><b>Assault in the first degree: class A felony</b> (AS § 11.41.200), <b>assault in the second degree: class B felony</b> (AS § 11.41.210), <b>assault in the third degree: class C felony</b> (AS § 11.41.220) and <b>assault in the fourth degree: class A misdemeanor</b> (AS § 11.41.230):</p> <p>These statutes all refer to physical injury to another person by means of a “dangerous instrument,” though they have different elements.</p> <p><b>Factors in aggravation and mitigation</b> (AS § 12.55.155) and <b>Sentences of imprisonment for felonies</b> (AS § 12.55.125):</p> <p>Using a “dangerous instrument” in furtherance of an offense is an aggravating factor in sentencing.</p>

State	Specific type of law(s) which addresses strangulation	Classification of the crime	Definition of strangulation (and suffocation)	Statute(s)
Arizona	Criminal assault statute	Class 4 felony	<b>Strangulation:</b> Intentionally or knowingly impeding the normal breathing or circulation of blood of another person by applying pressure to the throat or neck or by obstructing the nose and mouth either manually or through the use of an instrument.	<b>Aggravated assault; classification; definition: Class 4 felony</b> (A.R.S. § 13-1204):  A person commits aggravated assault if the person commits assault by either intentionally, knowingly or recklessly causing any physical injury to another person, intentionally placing another person in reasonable apprehension of imminent physical injury or knowingly touching another person with the intent to injure the person, and both of the following occur:  <b>1. The person intentionally or knowingly impedes the normal breathing or circulation of blood of another person by applying pressure to the throat or neck or by obstructing the nose and mouth either manually or through the use of an instrument.</b> <b>2. Any of the circumstances exists that are set forth in § 13-3601, subsection A, paragraph 1, 2, 3, 4, 5 or 6.</b>
Arizona (cont.)				

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<b>State</b>	<b>Specific type of law(s) which addresses strangulation</b>	<b>Classification of the crime</b>	<b>Definition of strangulation (and suffocation)</b>	<b>Statute(s)</b>
<b>Arkansas</b>	None	--	--	--
<b>California</b>	Criminal domestic violence statute	Felony	<b>Strangulation:</b> Impeding the normal breathing or circulation of the blood of a person by applying pressure on the throat or neck.	<p><b>Willful infliction of corporal injury; violation; punishment: Felony (CA PENAL § 273.5):</b></p> <p>“Any person who willfully inflicts upon a person who is his or her spouse, former spouse, cohabitant, former cohabitant, or the mother or father of his or her child, corporal injury resulting in a <b>traumatic condition</b>, is guilty of a felony, and upon conviction thereof shall be punished by imprisonment in the state prison for two, three, or four years, or in a county jail for not more than one year, or by a fine of up to six thousand dollars (\$6,000) or by both that fine and imprisonment.”</p> <p>““Traumatic condition” means a condition of the body, such as a wound, or external or internal injury, <b>including, but not limited to, injury as a result of strangulation or suffocation</b>, whether</p>



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State	Specific type of law(s) which addresses strangulation	Classification of the crime	Definition of strangulation (and suffocation)	Statute(s)
				of a minor or serious nature, caused by a physical force.”
Colorado	None	--	--	--
Connecticut	Three criminal statutes	Class C felony, Class D felony, or Class A misdemeanor	<b>Strangulation:</b> Intentionally or recklessly restraining another person by the neck or throat and impeding their ability to breathe or restricting their blood circulation.	<p><b>Strangulation in the 1<sup>st</sup> degree: Class C felony</b> (Conn. Gen. Stat. § 53a-64aa):</p> <p>“A person is guilty of strangulation in the first degree when such person commits strangulation in the second degree as provided in section 53a-64bb <b>and (1)</b> in the commission of such offense, such person (A) uses or attempts to use a dangerous instrument, or (B) causes serious physical injury to such other person, <b>or (2)</b> such person has previously been convicted of a violation of this section or section 53a-64bb.”</p> <p><b>Strangulation in the 2<sup>nd</sup> degree: Class D felony</b> (Conn. Gen. Stat. § 53a-64bb):</p> <p>“A person is guilty of strangulation in the second degree when such person restrains another person by the neck or throat with the</p>

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State	Specific type of law(s) which addresses strangulation	Classification of the crime	Definition of strangulation (and suffocation)	Statute(s)
Connecticut (cont.)				<p><b>intent</b> to impede the ability of such other person to breathe or restrict blood circulation of such other person <b>and</b> such person impedes the ability of such other person to breathe or restricts blood circulation of such other person.”</p> <p><b>Strangulation in the 3<sup>rd</sup> degree: Class A misdemeanor</b> (Conn. Gen. Stat. § 53a-64cc):</p> <p>“A person is guilty of strangulation in the third degree when such person <b>recklessly</b> restrains another person by the neck or throat <b>and</b> impedes the ability of such other person to breathe or restricts blood circulation of such other person.”</p>
Delaware	Criminal statute	Class D or E felony	<p><b>Strangulation:</b> Knowingly or intentionally impeding the breathing or circulation of the blood of another person by applying pressure on their throat or neck.</p>	<p><b>Strangulation: Class E or D felony</b> (11 Del. C. § 607):</p> <p>“A person commits the offense of strangulation if the person knowingly or intentionally impedes the breathing or circulation of the blood of another person by applying</p>

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State	Specific type of law(s) which addresses strangulation	Classification of the crime	Definition of strangulation (and suffocation)	Statute(s)
Delaware (cont.)				<p>pressure on the throat or neck of the other person.”</p> <p><b>Strangulation is a class E felony, except it is a class D felony if: a.</b> The person used or attempted to use a dangerous instrument or a deadly weapon while committing the offense; <b>or b.</b> The person caused serious physical injury to the other person while committing the offense; <b>or c.</b> The person has been previously convicted of strangulation.</p>
Florida	Criminal domestic violence statute	Felony of the 3 <sup>rd</sup> degree	<p><b>Strangulation:</b> Knowingly and intentionally impeding the normal breathing or circulation of the blood of a person against his or her will, so as to create a risk of or cause great bodily harm, by applying pressure on the throat or neck of the other person or by blocking the nose or mouth of the other person.</p>	<p><b>Felony battery; domestic battery by strangulation: Felony of the 3<sup>rd</sup> degree (Fla. Stat. 784.041):</b></p> <p>“A person commits domestic battery by strangulation if the person knowingly and intentionally, against the will of another, impedes the normal breathing or circulation of the blood of a family or household member or of a person with whom he or she is in a dating relationship, so as to create a risk of or cause great bodily harm by applying pressure on the throat or neck of the other person or by blocking</p>

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				the nose or mouth of the other person.”
Georgia	None	--	--	--
Hawaii	Criminal domestic violence statute	Class C felony	<b>Strangulation:</b> Intentionally or knowingly impeding the normal breathing or circulation of the blood of another person by applying pressure on the throat or neck.	<b>Abuse of family or household members; penalty: Class C felony</b> (Haw. Rev. Stat. Ann. §709-906):  “Where the physical abuse consists of intentionally or knowingly impeding the normal breathing or circulation of the blood of the family or household member by applying pressure on the throat or the neck, abuse of a family or household member is a class C felony.”
Idaho	Criminal domestic violence statute	Felony	No definition of strangulation provided.	<b>Attempted Strangulation: Felony</b> (Idaho Code Ann. §18-923): “(1) Any person who willfully and unlawfully chokes or attempts to strangle a household member, or a person with whom he or she has or had a dating relationship, is guilty of a felony punishable by incarceration for up to fifteen (15) years in the state prison. (2) No injuries are required to prove attempted strangulation. (3) The prosecution is not required to show that the defendant

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				intended to kill or injure the victim. The only intent required is the intent to choke or attempt to strangle.”
Illinois	Bail consideration in domestic violence cases	--	No definition of strangulation provided.	<p><b>Bail; certain persons charged with violent crimes against family or household members</b> (725 ILCS 5/110-5.1):</p> <p>A person who is charged with a violent crime shall appear before the court for the setting of bail if the alleged victim was a family or household member at the time of the alleged offense, and if the person charged, at the time of the alleged offense, was subject to the terms of an order of protection or previously was convicted of a violation of an order of protection or a violent crime if the victim was a family or household member at the time of the offense.</p> <p>Before setting bail, the court shall consider, among other factors, the severity of the alleged violence that is the basis of the alleged offense, including, but not limited to, the duration of the alleged violent incident, and whether the alleged violent incident</p>

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Illinois (cont.)				involved serious physical injury, sexual assault, <b>strangulation</b> , abuse during the alleged victim's pregnancy, abuse of pets, or forcible entry to gain access to the alleged victim.
Indiana	Criminal statute	Class D felony	<b>Strangulation:</b> Knowingly or intentionally applying pressure to the throat or neck of another person or obstructing the nose or mouth of another person in a manner that impedes the normal breathing or the blood circulation of the other person.	<b>Strangulation: Class D Felony</b> (Ind. Code Ann. § 35-42-2-9):  “A person who, in a rude, angry, or insolent manner, knowingly or intentionally: (1) applies pressure to the throat or neck of another person; or (2) obstructs the nose or mouth of another person; in a manner that impedes the normal breathing or the blood circulation of the other person commits strangulation, a Class D felony.”
Iowa	None	--	--	--
Kansas	None	--	--	--
Kentucky	None	--	--	--
Louisiana	Criminal domestic violence statute	Not specified	<b>Strangulation:</b> Intentionally impeding the normal breathing or circulation of the blood by applying pressure on the throat or neck or by blocking the nose or mouth of the victim.	<b>Domestic abuse battery</b> (La. R.S. 14:35.3):  “Notwithstanding any other provision of law to the contrary, if the domestic abuse battery involves strangulation, the offender shall be imprisoned at hard labor for not more than three years.”

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<b>Maine</b>	None	--	--	--
<b>Maryland</b>	Criminal sexual offense statute	Felony	No definition of strangulation or suffocation provided.	<p><b>Sexual offense in the first degree: Felony</b> (MD Code, Criminal Law, § 3-305):</p> <p>A person may not engage in a sexual act with another by force, or the threat of force, without the consent of the other; and <b>suffocate, strangle</b>, disfigure, or inflict serious physical injury on the victim or another in the course of committing the crime; or threaten, or place the victim in fear, that the victim, or an individual known to the victim, imminently will be subject to death, <b>suffocation, strangulation</b>, disfigurement, serious physical injury, or kidnapping.</p> <p>On conviction the individual is subject to imprisonment not exceeding life.</p>
<b>Maryland (cont.)</b>				
<b>Massachusetts</b>	Criminal attempted murder statute	Not specified	No definition of strangulation provided.	<p><b>Attempt to murder</b> (M.G.L.A. 265 § 16):</p> <p>“Whoever attempts to commit murder by poisoning, drowning or <b>strangling</b> another person, or by any means not constituting an assault with intent to commit murder, shall be punished by imprisonment in the</p>

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<b>Massachusetts (cont.)</b>				state prison for not more than twenty years or by a fine of not more than one thousand dollars and imprisonment in jail for not more than two and one half years.”
<b>Michigan</b>	Criminal attempted murder statute	Felony	No definition of strangulation provided.	<b>Attempt to murder: Felony</b> (M.C.L.A. 750.91):  “Any person who shall attempt to commit the crime of murder by poisoning, drowning, or <b>strangling</b> another person, or by any means not constituting the crime of assault with intent to murder, shall be guilty of a felony, punishable by imprisonment in the state prison for life or any term of years.”
<b>Minnesota</b>	Criminal domestic violence statute	Felony	<b>Strangulation:</b> Intentionally impeding normal breathing or circulation of the blood by applying pressure on the throat or neck or by blocking the nose or mouth of another person.	<b>Domestic assault by strangulation: Felony</b> (Minn. Stat. §609.2247):  “Unless a greater penalty is provided elsewhere, whoever assaults a family or household member by strangulation is guilty of a felony and may be sentenced to imprisonment for not more than three years or to payment of a fine of not more than \$5,000, or both.”
<b>Mississippi</b>	Criminal	Possible	<b>Strangulation:</b> Restricting the flow	<b>Simple and</b>



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Mississippi (cont.)	domestic violence statute	felony	of oxygen or blood by intentionally applying pressure on the neck or throat of another person by any means or to intentionally block the nose or mouth of another person by any means.	<p><b>aggravated assault; simple and aggravated domestic violence: Possible felony</b> (Miss. Code Ann. § 97-3-7):</p> <p>“A person is guilty of aggravated domestic violence who commits aggravated assault as described in subsection (2) of this section against, <b>or who strangles, or attempts to strangle,</b> a current or former spouse or a child of that person, a person living as a spouse or who formerly lived as a spouse with the defendant or a child of that person, other persons related by consanguinity or affinity who reside with or formerly resided with the defendant, a person who has a current or former dating relationship with the defendant, or a person with whom the defendant has had a biological or legally adopted child. Upon conviction, the defendant shall be punished by imprisonment in the custody of the Department of Corrections for not less than two (2) years; however, upon a third or subsequent</p>

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Mississippi (cont.)				<p>conviction of aggravated domestic violence, whether against the same or another victim and within five (5) years, the defendant shall be guilty of a felony and sentenced to a term of imprisonment of not less than ten (10) nor more than twenty (20) years.”</p> <p>A person convicted of aggravated domestic violence shall not be eligible for parole under the provisions of Section 47-7-3(1)(c) until he shall have served one (1) year of his sentence.</p>
Missouri	Criminal domestic violence statute	Class C felony	No definition of strangulation provided.	<p><b>Domestic assault in the second degree, penalty: Class C felony</b> (Mo. Rev. Stat. §565.073):</p> <p>A person commits the crime of domestic assault in the second degree if the act involves a family or household member or an adult who is or has been in a continuing social relationship of a romantic or intimate nature with the actor and he or she attempts to cause or knowingly causes physical injury to such family or household member by any means, including but not limited to, by use of a deadly</p>

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Missouri (cont)				<p>weapon or dangerous instrument, <b>or by choking or strangulation.</b></p> <p>Domestic assault in the second degree is a class C felony.</p>
Montana	None	--	--	--
Nebraska	Criminal statute	Class IV or III felony	<p><b>Strangulation:</b> Knowingly or intentionally impeding the normal breathing or circulation of the blood of another person by applying pressure on the throat or neck of the other person.</p>	<p><b>Strangulation; penalty; affirmative defense: Class IV or III felony</b> (Neb. Rev. Stat. §28-310.01):</p> <p>A person commits the offense of strangulation if the person knowingly or intentionally impedes the normal breathing or circulation of the blood of another person by applying pressure on the throat or neck of the other person.</p> <p>Strangulation is a Class IV felony, except it is a Class III felony if:</p> <p>(a) The person used or attempted to use a dangerous instrument while committing the offense;</p> <p>(b) The person caused serious bodily injury to the other person while committing the offense; or (c) The person has been previously convicted of strangulation.</p>
Nevada	Three criminal battery statutes;	Category B or C felony	<p><b>Strangulation:</b> Intentionally impeding the normal breathing or</p>	<p><b>Battery; Definitions; penalties: Category</b></p>

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Nevada (cont.)	bail factor; restriction on probation		circulation of the blood by applying pressure on the throat or neck or by blocking the nose or mouth of another person in a manner that creates a risk of death or substantial bodily harm.	<p><b>C or B felony</b> (Nev. Rev. Stat. Ann. §200.481):</p> <p>If the battery <b>is not</b> committed with a deadly weapon, <b>and</b> either substantial bodily harm to the victim results <b>or the battery is committed by strangulation</b>, it is a category C felony</p> <p>If the battery <b>is</b> committed with the use of a deadly weapon, <b>and</b> substantial bodily harm to the victim results <b>or the battery is committed by strangulation</b>, it is a category B felony punished by imprisonment in the state prison for a minimum term of not less than 2 years and a maximum term of not more than 15 years, and may be further punished by a fine of not more than \$10,000.</p> <p><b>Battery which constitutes domestic violence: Penalties; referring child for counseling; restriction against dismissal, probation and suspension; definitions: Category C felony</b> (Nev. Rev. Stat. Ann. §200.485):</p>

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Nevada (cont.)				<p>Unless a greater penalty is provided pursuant to §200.481, a person convicted of a battery which constitutes domestic violence <b>and is committed by strangulation</b>, is guilty of a category C felony and shall be punished by a fine of not more than \$15,000.</p> <p><b>[Battery with the intent to commit sexual assault]</b>  <b>Definitions;</b>  <b>penalties: Category A felony</b> (Nev. Rev. Stat. Ann. §200.400):</p> <p>If a person is convicted of battery with the intent to commit sexual assault and the crime results in substantial bodily harm to the victim <b>or is committed by strangulation</b>, the individual shall be punished for a category A felony by imprisonment in the state prison for life without the possibility of parole; or for life with the possibility of parole, with eligibility for parole beginning when a minimum of 10 years has been served, as determined by the verdict of the jury, or the judgment of the court if there is</p>

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Nevada (cont.)				<p>no jury.</p> <p><b>Right to bail before conviction; exceptions; imposition of conditions; arrest for violation of condition</b> (Nev. Rev. Stat. Ann. §178.484):</p> <p>The bail amount for a person arrested for a domestic violence battery is affected by whether the individual has previous convictions for domestic violence and whether the battery was “committed by strangulation.” Previous convictions, as well as committing the battery by strangulation, increase the bail amount.</p> <p><b>Additional penalty: Felony committed in violation of order for protection or order to restrict conduct; restriction on probation</b> (Nev. Rev. Stat. Ann. §193.166):</p> <p>The court shall not grant probation to or suspend the sentence of any person convicted of battery which is committed by strangulation if an additional term of imprisonment may be imposed for that primary offense</p>

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				pursuant to this section.
<b>New Hampshire</b>	Criminal assault statute	Class B felony	<b>Strangulation:</b> The application of pressure to another person's throat or neck, or the blocking of the person's nose or mouth, that causes the person to experience impeded breathing or blood circulation or a change in voice.	<b>Second Degree Assault: Class B felony</b> (N.H. Rev. Stat. §631:2):  A person is guilty of a class B felony if he or she purposely or knowingly engages in the strangulation of another.
<b>New Jersey</b>	None	--	--	--
<b>New Mexico</b>	None	--	--	--
<b>New York</b>	Three criminal statutes	Class C felony, Class D felony, or Class A misdemeanor	<b>Strangulation:</b> Intentionally impeding the normal breathing or circulation of the blood of another person by applying pressure on the throat or neck of such person, or by blocking the nose or mouth of such person.	<b>Criminal obstruction of breathing or blood circulation: Class A misdemeanor</b> (NY Penal §121.11):  “A person is guilty of criminal obstruction of breathing or blood circulation when, with intent to impede the normal breathing or circulation of the blood of another person, he or she: <b>a.</b> applies pressure on the throat or neck of such person; <b>or</b> <b>b.</b> blocks the nose or mouth of such person. Criminal obstruction of breathing or blood circulation is a class A misdemeanor.”  <b>Strangulation in the second degree: Class D felony</b> (NY Penal

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<b>New York (cont.)</b>				<p>§121.12):</p> <p>“A person is guilty of strangulation in the second degree when he or she commits the crime of criminal obstruction of breathing or blood circulation, as defined in section 121.11 of this article, and thereby causes stupor, loss of consciousness for any period of time, or any other physical injury or impairment. Strangulation in the second degree is a class D felony.”</p> <p><b>Strangulation in the first degree: Class C felony</b> (NY Penal §121.13):</p> <p>“A person is guilty of strangulation in the first degree when he or she commits the crime of criminal obstruction of breathing or blood circulation, as defined in section 121.11 of this article, and thereby causes serious physical injury to such other person. Strangulation in the first degree is a class C felony.”</p> <p><b>Sentence of imprisonment for a violent felony offense</b> (NY Penal §70.02):</p> <p>Under this statute, the</p>



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<b>New York (cont.)</b>				term of sentence for strangulation in the second degree (a class D felony) must be at least two years and must not exceed seven years, and for strangulation in the first degree (a class C felony) must be at least three and one-half years and must not exceed fifteen years.
<b>North Carolina</b>	Criminal statute	Class H felony	No definition of strangulation provided.	<b>Assault inflicting serious bodily injury; strangulation; penalties: Class H felony</b> (N.C. Gen. Stat. §14-32.4):  “Unless the conduct is covered under some other provision of law providing greater punishment, any person who assaults another person and inflicts physical injury by strangulation is guilty of a Class H felony.”
<b>North Dakota</b>	None	--	--	--
<b>Ohio</b>	Bail consideration in domestic violence cases	--	No definition of strangulation provided.	<b>Factors to be considered when setting bail</b> (O.R.C. § 2919.251):  One of the factors is the severity of the alleged violence that is the basis of the offense, including but not limited to, the duration of the alleged violent incident, and whether the alleged violent incident

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Ohio (cont.)				involved serious physical injury, sexual assault, <b>strangulation</b> , abuse during the alleged victim's pregnancy, abuse of pets, or forcible entry to gain access to the alleged victim.
Oklahoma	Criminal domestic violence statute; bail consideration	Felony	<b>Strangulation:</b> Any form of asphyxia; including, but not limited to, asphyxia characterized by closure of the blood vessels or air passages of the neck as a result of external pressure on the neck or the closure of the nostrils or mouth as a result of external pressure on the head.	<p><b>Assault – Assault and battery – Domestic abuse: Felony</b> (21 Okl. St. §644):</p> <p>This statute was recently amended. In the old version, domestic violence by strangulation was punished by imprisonment in the custody of the Department of Corrections for a period of not less than three years nor more than ten years, or by a fine of not more than \$20,000, or by both such fine and imprisonment</p> <p>After the recent amendment goes into effect, the punishment described in the old version will only be used upon a second or subsequent conviction; the first offense is punished by imprisonment for a period not less than one year nor more than three years, or by a fine of not more than \$3,000, or by both</p>

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<b>Oklahoma (cont.)</b>				<p>such fine and imprisonment.</p> <p><b>Defendant discharged on giving bail – Exceptions</b> (22 Okl. St. §1105):</p> <p>Before determining bond and other conditions of release as necessary for the protection of the alleged victim, the court shall consider, among other factors, the severity of the alleged violence that is the basis of the alleged offense including, but not limited to, whether the alleged violent incident involved strangulation.</p>
<b>Oregon</b>	Criminal statute	Class A misdemeanor	<b>Strangulation:</b> Knowingly impeding the normal breathing or circulation of the blood of another person by applying pressure on the throat or neck of the other person; or blocking the nose or mouth of the other person.	<p><b>Crime of strangulation: Class A misdemeanor</b> (Or. Rev. Stat. §163.187):</p> <p>A person commits the crime of strangulation if the person knowingly impedes the normal breathing or circulation of the blood of another person by applying pressure on the throat or neck of the other person; or blocking the nose or mouth of the other person.</p> <p>Strangulation is a Class A misdemeanor.</p>
<b>Pennsylvania</b>	None	--	--	--

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<b>Rhode Island</b>	None	--	--	--
<b>South Carolina</b>	None	--	--	--
<b>South Dakota</b>	None	--	--	--
<b>Tennessee</b>	Criminal assault statute	Class C felony	<b>Strangulation:</b> Intentionally impeding normal breathing or circulation of the blood by applying pressure to the throat or neck or by blocking the nose and mouth of another person.	<b>Aggravated assault: Class C felony (TN ST § 39-13-102):</b>  A person commits aggravated assault who intentionally or knowingly commits an assault as defined in § 39-13-101, and attempts or intends to cause bodily injury to another by <b>strangulation</b> .
<b>Texas</b>	Criminal domestic violence statute	Felony in the 3 <sup>rd</sup> degree	<b>Strangulation:</b> Intentionally, knowingly, or recklessly impeding the normal breathing or circulation of the blood of the person by applying pressure to the person's throat or neck or by blocking the person's nose or mouth.	<b>Assault: felony in the 3<sup>rd</sup> degree (Tex. Penal Code §22.01):</b>  The offense is a felony of the third degree if it is committed against a person whose relationship to or association with the defendant is described by Section 71.0021(b), 71.003, or 71.005, Family Code, if the offense is committed by intentionally, knowingly, or recklessly impeding the normal breathing or circulation of the blood of the person by applying pressure to the person's throat or neck or by blocking the person's nose or mouth.
<b>Utah</b>	None	--	--	--

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Vermont	Strangulation included in the definition of “serious bodily injury”	--	<b>Strangulation:</b> Intentionally impeding normal breathing or circulation of the blood by applying pressure on the throat or neck or by blocking the nose or mouth of another person.	<b>Definitions</b> (13 V.S.A. §1021):  Strangulation by intentionally impeding normal breathing or circulation of the blood by applying pressure on the throat or neck or by blocking the nose or mouth of another person is a “serious bodily injury.”  <b>Aggravated assault</b> (13 V.S.A. § 1024):  A person is guilty of aggravated assault if the person attempts to cause <b>serious bodily injury</b> to another, or causes such injury purposely, knowingly, or recklessly under circumstances manifesting extreme indifference to the value of human life.  <b>Aggravated sexual assault</b> (13 V.S.A. § 3253): A person commits the crime of aggravated sexual assault if the person commits sexual assault and at the time of the sexual assault, the actor causes <b>serious bodily injury</b> to the victim or to another; or, at the time of the sexual assault, the actor threatens to cause imminent <b>serious bodily injury</b>
Vermont (cont.)				

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				to the victim or to another and the victim reasonably believes that the actor has the present ability to carry out the threat.
Virginia	Criminal robbery statute	Felony	No definition of strangulation or suffocation provided.	<b>[Robbery] How punished: Felony</b> (VA Code Ann. § 18.2-58):  If a person commits robbery by <b>partial strangulation, or suffocation</b> , that is a felony punished by confinement in a state correctional facility for life or any term not less than five years.
Washington	Criminal assault statute	Class B felony	<b>Strangulation:</b> Compressing a person's neck, thereby obstructing the person's blood flow or ability to breathe, or doing so with the intent to obstruct the person's blood flow or ability to breathe.  <b>Suffocation:</b> Blocking or impairing a person's intake of air at the nose and mouth, whether by smothering or other means, with the intent to obstruct the person's ability to breathe.	<b>Assault in the second degree: Class B felony</b> (Rev. Code Wash. §9A.36.021):  A person is guilty of assault in the second degree if he or she, under circumstances not amounting to assault in the first degree, assaults another by strangulation or suffocation.
West Virginia	Criminal robbery statute	Robbery in the 1 <sup>st</sup> degree	No definition of strangulation or suffocation provided.	<b>Robbery or attempted robbery; penalties</b> (W. Va. Code §61-2-12):  Any person who commits or attempts to commit robbery by committing violence to the person, including, but not

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<b>State</b>	<b>Specific type of law(s) which addresses strangulation</b>	<b>Classification of the crime</b>	<b>Definition of strangulation (and suffocation)</b>	<b>Statute(s)</b>
<b>West Virginia (cont.)</b>				limited to, <b>partial strangulation or suffocation</b> or by striking or beating is guilty of robbery in the first degree and upon conviction shall be imprisoned in a state correctional facility not less than 10 years.
<b>Wisconsin</b>	Criminal statute	Class G or H felony	<b>Strangulation:</b> Intentionally impeding the normal breathing or circulation of blood by applying pressure on the throat or neck or by blocking the nose or mouth of another person.	<b>Strangulation and suffocation: Class H or G felony (W.S.A. 940.235):</b>  “Whoever intentionally impedes the normal breathing or circulation of blood by applying pressure on the throat or neck or by blocking the nose or mouth of another person is guilty of a Class H felony.”  Whoever violates the above provision is guilty of a Class G felony if the actor has a previous conviction under this section or a previous conviction for a violent crime, as defined in s. 939.632(1)(e)1.
<b>Wyoming</b>	Criminal domestic violence statute	Felony	<b>Strangulation:</b> Intentionally and knowingly or recklessly causing or attempting to cause bodily injury to another person by impeding the normal breathing or circulation of blood by applying pressure on the throat or neck; or blocking the nose and mouth of the other person.	<b>Strangulation of a household member; penalty: Felony (WY ST § 6–2–509):</b>  A person is guilty of strangulation of a household member if

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<b>State</b>	<b>Specific type of law(s) which addresses strangulation</b>	<b>Classification of the crime</b>	<b>Definition of strangulation (and suffocation)</b>	<b>Statute(s)</b>
<b>Wyoming (cont.)</b>				<p>he intentionally and knowingly or recklessly causes or attempts to cause bodily injury to a household member by impeding the normal breathing or circulation of blood by applying pressure on the throat or neck of the household member; or blocking the nose and mouth of the household member.</p> <p>Strangulation of a household member is a felony punishable by imprisonment for not more than five years.</p>



## Appendix 4: Maine Prevalence and Impact

### a. Maine Coalition to End Domestic Violence: Survivor Voices 2011

Survey Summary: During September, October and November of 2011, MCEDV instituted a statewide survey of domestic violence survivors who had experienced being strangled by an intimate partner. Survivors who received services at Maine's domestic violence resource centers during that three-month interval, who were not in need of emergency response, were offered a chance to complete a brief survey. 151 women participated. These are the questions, their responses and sample comments.

**Q1. Has someone you have been involved in an intimate or dating relationship with ever strangled, choked or aggressively put their hands or something around your throat or neck?**

72.8% (110) Yes                      27.2% (41) No

**Q2. If yes: did the abuser strangle/choke/aggressively put hands or something around your throat on more than one occasion?**

79.3% (88) Yes                      20.7% (23) No

**Q3. Did you lose consciousness while you were being strangled/choked?**

33.6% (38) Yes                      66.4% (75) No

**Q4. Was the strangulation/ choking part of an assault that also included other violent and/or abusive behaviors?**

84.1% (95) Yes                      16.8% (19) No

**Q5. Did you receive medical attention for this assault?**

24.5% (27) Yes                      75.5% (83) No

**Q6. If you received medical attention, did the medical provider document that strangulation/choking occurred in your medical record?**

24.4% (11) Yes                      48.9% (22) No  
26.7% (12) I don't know

**Q7. Was law enforcement involved in the incident?**

39.4% (41) Yes                      61.5% (64) No

**Q8. If law enforcement was involved, did the police officer ask questions about strangulation/choking and document it in his/her report?**

61.4% (35) Yes                      38.6% (22) No

**Q9. Do you know what made the abuser stop strangling/choking you?**

50.5% (54) Yes                      49.5% (53) No

**Q10. It is important that people understand the possible impact of strangulation/choking on a victim. After this event, do you feel that you were more afraid, intimidated or changed your behavior in any way due to a fear of it happening again?**

88.1% (96) Yes                      11.9% (13) No

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**ADDITIONAL FINDINGS:** In addition to the questions that we asked, two important points came from survivor's consistent, unsolicited comments. First, they did not realize the possible medical impact from non-lethal strangulation. Second, they reported that professionals, for the most part, just did not ask about strangulation.

### Themes and Sample Comments

**Q9: Why did it stop?**

Consequences to her:

- I passed out; My contacts popped out of my eyes; I like to think that it was because he didn't really want to kill me.

Intervention by a child or other:

- My son threw himself on both of us and he stopped; I was holding one of my children at the time; My child came into the room and started screaming; My two year old came in the room; His mother hollered at him..

Intervention (or fear of intervention) by an authority:

- Police knocked on the door; Realized could go to jail for attempted murder:

Action on her part:

- I started crying and begging him to stop. I told him to remember I have a little boy; One time was because my hands were free and I punched him. (Another time was because I went unconscious.)

Other: Done violating sexually; He didn't, I had to leave him; Got his point across

**Q10: Impact on the Victim:**

Fear and submission:

- I did whatever the hell he wanted me to do; I was afraid of it happening again so I tried to do what he told me to do; I was terrified of him. He made it clear he could kill me with one hand. I lived in fear for 20 years. He often grabbed me by the throat to get my attention. Today I often choke on my saliva and am constantly trying to clear my throat. I can't let anyone get near my neck. His choking sent the message "he was the boss". I was afraid to call the police. Because the only time I did, they did nothing and he said he would kill me if I ever did it again.

Flight and continued fear:

- After the second time, I took the children and left. I have gotten a PFA to keep him away; Victim reported that she is "done with him" due to being choked by the abuser on several occasions. She is in fear for her life.

Other consequences:

- You withdraw, become more apprehensive of anybody approaching you. More guarded. Lose the open trust that you had. Now I stay away from all relationships.

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**b. Maine Batterer's Intervention: Maine Batterers' Voices on Strangulation**

The Maine Commission on Domestic and Sexual Abuse members thought that batterers voices should be included to inform their study on strangulation conducted during 2011-2012. The goal would be to inform the Commission's understanding of the impact of the act of strangulation from the batterer's perspective. Maine Association of Batterer Intervention Programs (MABIPS) worked with the Maine Coalition to End Domestic Violence (MCEDV) to coordinate questions for two surveys, one for abusers and one for survivors so that the two would be complementary.

125 men actively participating in a Batter Intervention Class in Maine agreed to participate in the Strangulation Survey. The geographic areas covered by this survey were; Sagadahoc and Eastern Cumberland, Kennebec, Androscoggin and Franklin Counties.

Q1. Have you ever strangled a partner at any time in your life?

**35** admitted **Yes** and continued to fill out the survey questions.

Q2. Did this behavior occur with more than one of your partners? **35% Yes**

Q3. How often did this behavior occur?

- **Once 57%**
- **Few times 31%**
- **Many times 5%**

Q4. Did your partner ever lose consciousness? **20% Yes**

Q5. Was the strangulation/choking behavior during an incident that included other violent or abusive behavior? **83% Yes**

Q6. Did you get scratched, kicked, or injured in some way by your partner defending herself? **31% Yes**

Q7. Once law enforcement was involved did they ever ask about strangulation/choking? **46% Yes**

Q8. Did law enforcement document the strangulation/choking in the report? **49% Yes**

Q9. Was strangulation involved in the offence that got you sentenced to a Certified Batterer Intervention Program? **31% Yes** If so, was it part of the charge? **37% Yes**

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Additionally, participants were asked open-ended questions. Here are comments from the open-ended questions.

What made you stop?

- **Scared her.**
- **Knew it was wrong.**
- **I felt her pass out.**
- **I thought I might kill her and then I would go to jail.**
- **Our son pulled me off.**

Why did you choose to strangle/choke? Did it accomplish what you wanted to happen?

- **It made her do what I wanted. Yes.**
- **Stop her from moving. Yes.**
- **Get what I wanted. Yes.**
- **Sense of control.**
- **Stop her from leaving.**

In summary, we note that the results of this brief survey, though limited by the size of the sample, coordinate closely with the results of the survey of the survivors. We note that strangulation has a significant impact within the context of domestic and sexual abuse and that abusers understand the social/emotional impact and intimidation as a toll of control. We additionally note, that abusers do not always understand the medical severity of the act of strangulation.

**c. Maine Coalition Against Sexual Assault**

**Maine Coalition Against Sexual Assault  
Member Center Strangulation Survey Results  
December 21, 2011**

**Methodology:** Member centers were asked to complete a short electronic survey, indicating how many clients or callers had experienced strangulation, choking, or had been aggressively held around the neck or throat with hands or objects. All center staff were invited to participate. The survey then asked questions about the known experiences and outcomes associated with the strangulation, whether the client sought medical or law enforcement attention, and whether the strangulation was documented during those interactions. Responses came from two-thirds of MECASA member centers, representing nearly every geographic region of the state.

**Results:** Nearly every center which responded to the survey indicated that they have worked with clients who had experienced strangulation. Advocates report that this form of violence is typically in conjunction with completed (87%) or attempted sexual assault. The strangulation always resulted in injury, sometimes including loss of consciousness. Though less than half of all clients sought medical attention or made a report to law enforcement (in keeping with state and national rates of reporting for sexual violence), when they did seek services, the strangulation was documented frequently.

**Frequency:** Of clients indicating they have experienced this kind of violence, **about half** have done so on more than one occasion.

**Injuries:** Of clients experiencing strangulation, **100 percent** experienced bruising on throat or neck, difficulty breathing/swallowing, loss of consciousness, and/or other injuries as a result.

**Forms of Violence:** The strangulation occurred nearly **100 percent** of the time in conjunction with attempted or completed sexual assault, and about **80 percent** of the time, some other form of violence was also part of the event.

**Stopping the Strangulation:** Clients experiencing strangulation largely indicated that the strangulation did not end until the perpetrator had completed the violence. Responses included, "He was done." "Client gave in to perpetrator demands." "Client lost consciousness." "Perpetrator threatened to kill client." Only one response indicated that the client was able to end the strangulation by kneeing the perpetrator in the groin.

**Medical Attention and Documentation:** About **50 percent** of clients experiencing strangulation sought medical attention. Of those, the strangulation was documented **two-thirds** of the time.

**Law Enforcement Reporting and Documentation:** **More than half the time**, clients experiencing strangulation did not make a report to law enforcement. Of those who did, the strangulation was documented **two-thirds** of the time.

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## Appendix F: Recommended Legislation for the 132<sup>nd</sup> Maine Legislature

### §208. Aggravated assault

1. A person is guilty of aggravated assault if that person intentionally, knowingly or recklessly causes:

A. Bodily injury to another that creates a substantial risk of death or extended convalescence necessary for recovery of physical health. Violation of this paragraph is a Class B crime;

A-1. Bodily injury to another that causes serious, permanent disfigurement or loss or substantial impairment of the function of any bodily member or organ. Violation of this paragraph is a Class A crime;

B. Bodily injury to another with use of a dangerous weapon. Violation of this paragraph is a Class B crime; or

C. Bodily injury to another under circumstances manifesting extreme indifference to the value of human life. Such circumstances include, but are not limited to, the number, location or nature of the injuries, the manner or method inflicted, or the observable physical condition of the victim or the use of strangulation. For the purpose of this paragraph, "strangulation" means impeding the breathing or circulation of the blood of another person by intentionally, knowingly or recklessly applying pressure on the person's throat or neck. Violation of this paragraph is a Class B crime.

2. [repealed]

3. Strangulation. A person is guilty of aggravated assault by strangulation if that person impedes the breathing or circulation of blood by intentionally, knowingly, or recklessly applying pressure on another person's throat or neck. Violation of this sub-section is a Class B Crime.

4. Suffocation. A person is guilty of aggravated assault by suffocation if that person impedes the breathing or circulation of blood by intentionally, knowingly, or recklessly applying pressure on another person's chest or blocking another person's nose and mouth. Violation of this sub-section is a Class B Crime

### Summary

The amendment specifically identifies suffocation and strangulation as particular methods of aggravated assault to better identify the nature and potential lethality of the conduct. Strangulation and suffocation remain available to be alleged as circumstances that may provide evidence of extreme indifference to the value of human life.