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April 14, 2025

Testimony of Representative Holly B. Stover presenting LD 1572, An Act Regarding Prosecution Standards for Nonfatal Strangulation or Suffocation in Domestic Violence Cases Before the Joint Standing Committee on Judiciary

Senator Carney, Representative Kuhn, and members of the Joint Standing Committee on Judiciary, my name is Holly Stover, and I am here today to present LD 1572, An Act Regarding Prosecution Standards for Nonfatal Strangulation or Suffocation in Domestic Violence Cases.

In particular, I want to emphasize Section 7 of the bill as drafted, which would elevate nonfatal strangulation and suffocation in the context of domestic violence aggravated assault to a Class A crime. This is the most important and urgently needed component of the bill. I am also bringing forward a friendly amendment that addresses concerns in other sections of the bill, which I have worked with multiple stakeholders to develop.

Strangulation and suffocation are not just violent assaults—they are often pre-lethal acts. The Maine Domestic Abuse Homicide Review Panel has reported for over a decade that strangulation is one of the most lethal forms of domestic violence, often used by abusers to demonstrate control and dominance. In its 2022 Biennial Report, the panel stated:

"Strangulation is a significant risk factor for future lethal violence and must be treated with the seriousness it warrants."

- 2022 Maine Domestic Abuse Homicide Review Panel Report, p. 35

National data supports this. According to a widely cited study published in the Journal of Emergency Medicine:

"Victims of nonfatal strangulation are 7 times more likely to be murdered by their intimate partner."

--- Glass, N., et al. (2008). Non-fatal strangulation is an important risk factor for homicide of women. Journal of Emergency Medicine, 35(3), 329–335.

This risk is not hypothetical. Maine has had multiple domestic homicide cases where nonfatal strangulation was part of the abuse pattern before the homicide occurred. In the 2022 panel report, several homicide cases involved previous threats or acts of strangulation that had not been prosecuted to the degree necessary to prevent escalation.

Beyond the immediate violence, strangulation and suffocation frequently result in noxious, traumatic brain injury due to the deprivation of blood flow and oxygen to the brain. Even when visible injuries are minimal, the internal and neurological damage can be profound. Victims may experience cognitive decline, memory loss, emotional dysregulation, chronic headaches, vision or hearing changes, difficulty concentrating, and other symptoms of anoxic or hypoxic brain injury. These outcomes can permanently alter a person's ability to work, learn, or care for themselves and their families.

The uncalculated loss of potential—economic, emotional, and relational—extends far beyond the assault itself. Survivors may require lifelong medical care, specialized therapy, and supports that strain public and private systems. Yet our current legal framework does not reflect the depth or permanence of this harm. Elevating this crime to a Class A felony is a critical step in holding offenders accountable for the full scope of the damage they cause.

Right now, nonfatal strangulation is typically charged as Class B aggravated assault. While serious, this charge does not reflect the high lethality risk or the psychological terror it inflicts. Victims often report they feared they were going to die during the attack. Elevating the charge to Class A aligns the legal consequences with the life-threatening nature of the crime.

Unlike many other forms of physical violence, strangulation can leave little to no visible injury, making it harder to prosecute unless law enforcement is trained to recognize symptoms, such as:

- Difficulty breathing or speaking
- Memory loss or confusion
- Petechiae (small red or purple spots from bleeding under the skin)
- Internal injuries visible only through imaging

This further supports the need for Section 3 of the bill, which should be modified—but not eliminated to encourage that training is provided to judges, prosecutors, law enforcement, dispatchers, and defense attorneys on identifying and responding to nonfatal strangulation. It should be made clear that this training should be within existing resources and possibly integrated into existing DV-related education.

I have worked with numerous stakeholders on refining LD 1572, and I support amending the bill to strike Sections 1, 2, and parts of Section 3, which present constitutional and procedural concerns. However, Sections 4, 5, 6, and especially Section 7 should be preserved and passed into law.

This will give Maine's criminal justice system a powerful, targeted tool to respond more effectively to one of the most predictive warning signs of domestic homicide and one of the most damaging forms of non-lethal abuse.

Elevating nonfatal strangulation and suffocation in domestic violence cases to a Class A crime is not just a policy change. It is a lifesaving intervention. It sends a message to victims that we take their safety seriously and that abusers will be held accountable before it's too late. And it acknowledges the full scope of damage—both seen and unseen—that these assaults leave behind.

I have attached an outline of the proposed amendment to this testimony, and I am prepared to provide a fully drafted amendment to the committee and interested parties in advance of the work session for your deliberation.

Thank you for your time, and I urge you to support the passage of LD 1572 with these essential amendments.

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

Outline of Representative Stover's proposed amendment April 14, 2025

Sec. 1 – Strike

Sec. 2 – Strike

Sec. 3 –

- 1. No suggested changes
- 2. Strike
- 3. Strike
- 4. Strike
- 5. Amend to:

Training and education of judges, justices, prosecutors, law enforcement officers, defense attorneys, and dispatchers is recommended on nonfatal strangulation and suffocation, as available within existing resources. In some instances, this training may be incorporated into or modified from existing domestic violence training programs.

Sec. 4 - No suggested changes

Sec. 5 – No suggested changes

Sec. 6 - No suggested changes

Sec. 7 – No suggested changes