

## Nonfatal Strangulation and Intimate Partner Violence: Prevalence and Policy Implications

---

Intimate partner violence (IPV) describes physical, sexual, or psychological harm by a current or former partner or spouse. IPV is considered a serious public health issue in the United States and worldwide affecting millions of individuals. Multiple strangulations are reported among one third to as many as three fourths of women in domestic violence emergency shelters. In the United States, strangulation accounts for 10% of all violent deaths. In a 66-country-wide study of intimate partner homicide, researchers found that 6 times as many female homicides (compared to male homicides) are perpetrated by an intimate partner.

Strangulation is often defined as a form of asphyxia, characterized by closure of the blood vessels in the neck as a result of external pressure on the neck. Strangulation can be manual or with some sort of ligature, such as a belt or a scarf. Very little pressure is required to strangle someone. As little as four pounds of pressure to the jugular veins and between 5 to 11 pounds to the carotid arteries can cause a person to lose consciousness within 3 to 5 seconds and death can occur within 3 to 5 minutes.

Strangulation is difficult to detect and causes a wide range of health problems. Immediate symptoms of nonfatal intentional strangulation include loss of consciousness; loss of sphincter control; and a raspy voice, which may result in a chronic rasp. Additional symptoms, such as petechiae, bruising, mild brain injury, and even stroke, may appear hours or days later. Even if victims may have no visible injuries, the damage to the brain due to lack of oxygen may result in serious injuries to internal organs or even death within days of the attack or weeks later.

Researchers [Dr. Susan B. Sorenson](#), School of Social Policy and Practice, the University of Pennsylvania, [Dr. Manisha Joshi](#), from the School of Social Work at the College of Behavioral and Community Sciences, University of South Florida, and Elizabeth Sivitz, and the School of Arts and Sciences, at the University of Pennsylvania, have published possibly the first-ever systematic review on the prevalence of strangulation. The article, "A Systematic Review of the Epidemiology of Nonfatal Strangulation, a Human Rights and Health Concern," in the *American Journal of Public Health*, examines the prevalence of strangulation victimization by an intimate partner.

The researchers report that one of every 100 women in the general population of eight countries, including the United States, reported being strangled by an intimate partner in the past year. They also found that women are more likely than men to report that they were strangled by an intimate partner and women with a history of abuse were more likely to report the strangulation.



Susan B. Sorenson

The article outlines similarities between strangulation and torture. "Non-fatal strangulation might be the domestic violence equivalent of water boarding," Sorenson said. "Both leave few marks afterward, both can result in the loss of consciousness or death and both assert the actor's dominance and authority over the life of the other, create intense fear and can be used repeatedly often with impunity."

Sorenson and colleagues suggest that "more work is needed to assess the magnitude, risk factors, mechanisms, and consequences of strangulation across gender, understudied communities, and regions within countries." Focusing on strangulation may help policymakers understand the terror and risks experienced by the women and men who are being abused. Such information would highlight the need for or changes to policy, programs, and



Manisha Joshi

clinical interventions as well as educate others about IPV from a human rights and public health perspective.

Sorenson, Joshi, and Sivitz also found a gap in the epidemiology literature from low- and middle-income countries, notably Africa and Southeast Asia.

“This is a critical issue in that these countries not only report higher levels of intimate partner violence, but the increased political violence in these countries is associated with an increased risk of IPV,” said Joshi. “Further, there are far fewer resources to address non-fatal strangulation as a public health or domestic violence problem.”

For more information about nonfatal strangulation and intimate partner violence, contact Dr. Sorenson at [sorenson@sp2.upenn.edu](mailto:sorenson@sp2.upenn.edu) or Dr. Joshi at [mjoshi@usf.edu](mailto:mjoshi@usf.edu). Read [A Systematic Review of the Epidemiology of Nonfatal Strangulation, a Human Rights and Health Concern](#) on the American Journal of Public Health website.