

# Non-fatal strangulation amongst clients attending Saint Mary's SARC

Dr. Catherine White, Clinical Director Saint Mary's Sexual Assault Referral Centre  
Dr. Rabiya Majeed-Ariss, Research Associate, Saint Mary's Sexual Assault Referral Centre

## Background

Recent research from Australia<sup>1</sup> looking at 79 females (>13 years) over a 6 year period indicated that the most frequent assailant type was an intimate partner and that less than half of the 79 had external physical signs

There has been increasing awareness of the risks of non-fatal strangulation (NFS) in complainants of sexual violence.

In response Saint Mary's SARC has undertaken a number of initiatives including a prevalence study.

## Aims

- To identify the prevalence of NFS as an element of sexual assault / rape
- To identify if there are any particular characteristics of the cases involving NFS as compared to those that do not.
- To understand what symptoms and signs are associated with the NFS cases.

## Methodology

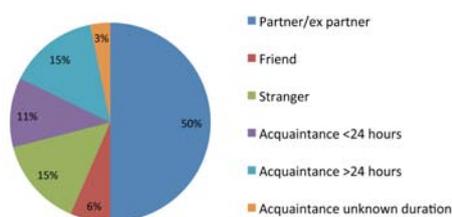
All clients attending Saint Mary's SARC in 2017 for a forensic medical examination following a report of sexual assault / rape were asked about NFS as part of the routine history taking.

Where there was NFS disclosure the history, examination and management were tailored as appropriate.

At the routine case reviews the next working day, NFS cases were identified and data was extracted from the contemporaneous medical notes.

## Results

### Alleged assailant type

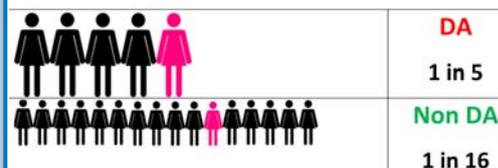


In 2017 753 adults attended for a forensic medical examination

690/753 were adult females  
In 154 of the 690 adult females seen, the alleged assailant was a partner or ex-partner.

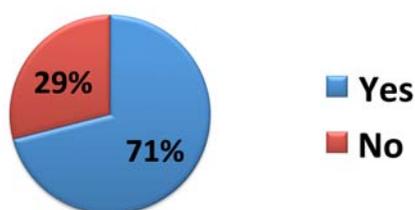
Of the 70 NFS cases identified, 2 were male and 6 were children (under the age of 18 years). The following statistical analyses were undertaken on the 62 adult females.

### Prevalence of NFS in Saint Mary's SARC cases



**\*Domestic abuse**

### Injuries to neck or above noted at FME



### Symptoms associated with NFS since assault

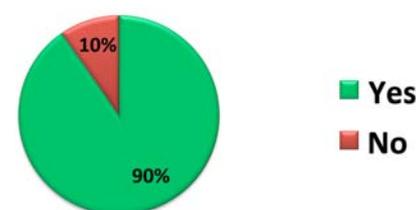
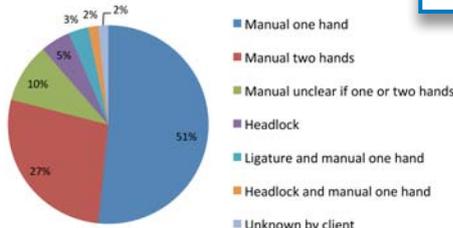


Table 1. Relationship between alleged assailant and NFS in Adult Females attending for FME (n=690)

		History of NFS (n=62)	No history of NFS (n=628)
Alleged assailant type	Partner/Ex-partner	31 (50%)	123 (20%)
	Other	31 (50%)	505 (80%)

### Strangulation method



## Implications

- NFS in adult females reporting sexual assault and rape was common, with 1 in 5 giving a positive history when the alleged assailant was either a partner or ex-partner.
- The vast majority will give a history of symptoms associated with NFS and have evidence of injuries which may be associated (see St Mary's NFS Checklist)

## Next Steps

- Further statistical analysis will be done on this dataset as compared to a control group and data collection is ongoing.
- The data will be used to inform training of professionals and the public, in particular the high prevalence in the domestic abuse cases seen at Saint Mary's SARC.

## References

- 1, R.R. Zilkens et al. *Non-fatal strangulation in sexual assault: A study of clinical and assault characteristics highlighting the role of intimate partner violence* Journal of Forensic and Legal Medicine 43 (2016) 1e7