

UNDER PRESSURE

NON-FATAL STRANGULATION ● *KNOW THE SIGNS*

NORTHERN IRELAND DEPARTMENT OF JUSTICE POLICY BRIEF: NON-FATAL STRANGULATION

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EXECUTIVE SUMMARY

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NON-FATAL STRANGULATION • KNOW THE SIGNS

There is growing awareness internationally around the prevalence and dangers of non-fatal strangulation (NFS). NFS can happen to anyone, but it is overwhelmingly perpetrated by men against female partners, often as a tool of coercive control and a precursor to domestic homicide. This violence stands out against other forms of violence against women and girls (VAWG) due to its connection to intimate partner homicide (IPH).

If a woman survives strangulation from a partner, they are eight times more likely to be killed by their partner.

A severe form of intimate partner violence (IPV) and/or domestic violence (DV), NFS involves the intentional or reckless restriction of a victim's breathing or blood circulation, which can have long-term physical and psychological effects. NFS often leaves no visible injuries in the short term, but it can result in fatal or permanent health complications.

Currently, there is a significant gap in protection for victims. The current Domestic Homicide Risk Assessment only asks one question about NFS and does not give it enough weight in determining if/when/how to escalate protection. This gap in the risk assessment process also means that NFS is often not properly identified, undermining prevention efforts by well-meaning front-line workers.

NFS was made a standalone crime in 2023 in Northern Ireland. While this is a step in the right direction, lessons can, and must, now be learned from the recent implementation and best practice enacted. The sentencing guidelines are unclear and the 'either way' nature of the current law does not appropriately recognise NFS as a practice homicide.

THIS POLICY BRIEF SETS OUT FOUR RESEARCH-LED RECOMMENDATIONS TO THE DEPARTMENT OF JUSTICE (DOJ):

1

CREATE AN NFS RISK ASSESSMENT RESOURCE

2

MAKE NFS AN INDICTABLE ONLY OFFENSE

3

ESTABLISH A CENTRALISED NFS MONITORING AND DATA COLLECTION MECHANISM

4

AND AWARD FUNDING SPECIFICALLY TO LONG-TERM NFS RESEARCH

Non-Fatal Strangulation is the intentional and/or reckless restriction of breathing or blood circulation to the brain. It can include putting hands around someone's neck, choking someone in an arm lock, using an item such as a scarf around someone's neck, covering someone's mouth and nose, or applying pressure to the chest.

NFS has significant effects on the victims' mental and physical health. In the short term, NFS often leaves no visible external injuries but can cause fatal internal injuries or health complications². This ranges from difficulty in breathing and/or swallowing, a change in voice, to lethal or permanent damage to blood vessels and the nervous system.

While research on the long-term effects of NFS are understudied, it has been proven to cause cardiac arrest, seizures, strokes, miscarriages, and preterm births³. The lack of oxygen to the brain can cause an injury resulting in unconsciousness, headaches, and significant problems with memory and concentration³.

NFS is an intimate crime, with the perpetrator often looking the victim in the eyes as they take control over the victim's life. The psychological symptoms following the terror of NFS can include depression, anxiety, insomnia, hypervigilance, PTSD, and flashbacks⁴. NFS sends a clear message of fear and control to the victim- I control whether you live or die.

CONNECTION TO INTIMATE PARTNER HOMICIDE

The most important effect of NFS is that it is considered the 'last warning shot' before an intimate partner homicide (IPH). Almost half of all IPH victims had at least one instance of reported NFS before being murdered⁵. While NFS can happen to anyone, it is a gendered crime with 80% of victims being women and 98% of perpetrators being men⁶.

NFS deserves particular attention as it significantly increases the risk of IPH. Once a woman is strangled by her partner, she is 750% more likely to be murdered by that partner down the line.

As femicide continues to be an epidemic in NI, the need to address NFS is a matter of urgency. As NFS is so closely linked to IPH, it is imperative that the DOJ adequately address the issue from all angles- prominently prevention, intervention,

DOMESTIC HOMICIDE RISK ASSESSMENT

In terms of intervention, it is often front-line workers such as independent domestic violence advocates, social workers, and GPs that encounter victims of NFS. To assess someone's risk of escalated or lethal violence, a Domestic Homicide Risk Assessment (DHRA) is administered by front-line workers. Currently, NI is using a Domestic Homicide Risk Assessment (DHRA) provided by Safelives, a UK-wide charity dedicated to ending DV.

The Safelives DHRA only has one question about NFS, reading,

"Has [name of abuser(s)] ever attempted to strangle / choke / suffocate / drown you?"

While this question is essential, it is not enough. Due to the nature of NFS, victims may have a hard time identifying certain types of violence such as pressure to the chest as NFS. Conversely, perpetrators are often aware of what would constitute a criminal offence and find ways to enact violence that circumvents the legal definition of NFS. On top of the issues surrounding self-identification, this question is weighted equally with the rest of the questions on the DHRA, despite the grave link between NFS and IPH. The result of this is that victims are often unaware of the lethal implications of experiencing NFS.

INCONSISTENCY IN SENTENCING

To address the severity and the scope of NFS, it became a standalone crime in NI in 2023. Section 28 of the Justice (Sexual Offences and Trafficking Victims) Act (Northern Ireland) introduced NFS as an 'either way' offence.

NON-FATAL STRANGULATION SENTENCING IN NORTHERN IRELAND

MAGISTRATES COURT 	 CROWN COURT
FOR 'LESS SERIOUS' CRIMES SUCH AS THEFT, DRUG OFFENSES, AND COMMON ASSAULT.	FOR 'MORE SERIOUS' CRIMES SUCH AS RAPE, MURDER, AND ROBBERY.
FOR NFS CASES WHERE THE HARM DONE TO THE VICTIM IS ASSESSED AS 'LOW' OR 'MEDIUM'	FOR NFS CASES WHERE THE HARM DONE TO THE VICTIM IS ASSESSED AS 'HIGH'
MINIMUM SENTENCE OF 6 MONTHS AND/OR A FINE OR COMMUNITY SERVICE.	MINIMUM SENTENCE OF 5 YEARS AND/OR A FINE.
MAXIMUM SENTENCE OF 2 YEARS AND/OR A FINE OF UP TO £5,000.	MAXIMUM SENTENCE OF 14 YEARS AND/OR A FINE.

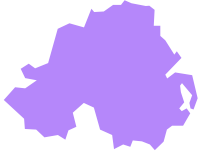
'Either way' offences are designed to allow flexibility in sentencing for crimes that can range significantly in severity. While all criminal cases start in the Magistrates Court, either-way offences that are deemed 'more serious' based on the severity of the injuries sustained by the victim are escalated to the Crown Court. An NFS conviction has a maximum sentence of 14 years in the Crown Court and a maximum sentence of 2 years in the Magistrates Court.

However, considering how NFS clearly maps out onto IPH, and particularly in Northern Ireland, it should not be treated as a one-time assault, but rather a practice homicide. Regardless of the severity of injuries sustained by the victim, NFS is a clear indicator of future, escalated and lethal violence.

There is a major gap in sentencing guidelines that results in the majority of NFS cases landing in the Magistrates Court. Only 24 of the 201 NFS cases in the 2024-25 period went to the Crown Court⁷. As the vast majority of cases go to the Magistrates Court, they will inevitably receive a lower sentence, despite the far-reaching implications of the crime. This outcome of the criminal justice system does not match the seriousness of NFS.

KEY POINTS

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NON-FATAL STRANGULATION • KNOW THE SIGNS



NI HAS THE HIGHEST RATE OF FEMICIDE ACROSS WESTERN EUROPE, WITH 30 WOMEN MURDERED SINCE 2020.⁸

2x

COMPARED TO THE REST OF THE UK, WOMEN IN NI ARE TWICE AS LIKELY TO BE MURDERED AS A RESULT OF DV.⁹

27%

27% OF FEMICIDES IN THE UK BETWEEN 2009–2022 INCLUDED STRANGULATION AND ASPHYXIA.¹⁰



THE RELATIVELY SMALL AMOUNT OF PRESSURE REQUIRED TO AFFECT THE VARIOUS INJURIES IS SOBERING: 4.4 LBS FOR THE JUGULAR (LESS PRESSURE REQUIRED TO OPEN A DRINK'S CAN), 11 LBS FOR THE CAROTID ARTERIES, 33 LBS FOR THE TRACHEA, AND 66 LBS FOR THE VERTEBRAL ARTERIES.¹¹



A REVIEW OF DATA FROM WOMEN'S AID SHOWED THAT 1 IN 4 WOMEN ACCESSING THEIR COMMUNITY BASED AND REFUGE SERVICES REPORTED HAVING EXPERIENCED STRANGULATION OR SUFFOCATION.¹²

1/3

MORE THAN 1/3RD OF PEOPLE WHO EXPERIENCED NFS DURING A SEXUAL ASSAULT THOUGHT THEY WERE GOING TO DIE.¹³



NO MATTER THE CIRCUMSTANCES FOR NFS AND WHETHER HARM IS INTENDED OR NOT, THE CONSEQUENCES CAN BE FAR REACHING.

SHORT TERM

THIS POLICY BRIEF RECOMMENDS THAT THE DOJ

- Collaborate with frontline workers (Women's Aid, Men's Advisory, GPs, Mental Health service providers, etc) to create a supplementary NFS risk assessment resource.
 - This resource should be used in conjunction with the Safelives DHRA to assess the nature, frequency, and severity of NFS committed.
 - This resource should include questions that enquire about the various forms of NFS using accessible and descriptive language as well as the frequency.
 - This will help to address any gaps in protection for victims who have issues with self-identification and help assessors understand the timeline of escalation.
 - Instead of one point towards the entire DHRA, the separate NFS risk assessment should hold significant weight towards a MARAC referral.

MEDIUM TERM

THIS POLICY BRIEF RECOMMENDS THAT THE DOJ

- Make NFS an indictable only offence.
 - While the resulting injuries may vary between NFS cases, the connection between NFS and IPH is consistent.
 - This will improve the consistency in sentencing which remains a vital impediment to the law's meaningful application.
 - Longer sentences will provide better protection for victims from re-victimisation and homicide.

LONG TERM

THIS POLICY BRIEF RECOMMENDS THAT THE DOJ

- Establish a centralised monitoring and data collection mechanism.
 - Creating one centralised repository of information sharing across institutions and charities (i.e. PSNI, NHS, Women's Aid, Men's Advisory, etc) to understand the scope of NFS in NI and the lived effects of surviving strangulation.
 - Information on perpetrators should also be accessible to the UK and the devolved governments of Scotland and Wales in order to prevent evasion of consequences through moving.
- Award funding specifically to long-term NFS research.
 - The funding should go to inter-disciplinary research that is dedicated to improving all lived aspects of NFS
 - This includes but is not limited to prevention, early intervention, medical care for victims, and rehabilitation for perpetrators.
 - Long-term funding will improve the large gaps in policy left by a lack of information on the subject and show the DOJ's commitment to ending VAWG.

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³ ibid

⁴ ibid

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⁵ Glass, N., Laughon, K., Campbell, J., Block, C. R., Hanson, G., Sharps, P. W., & Taliaferro, E. (2008). Non-fatal strangulation is an important risk factor for homicide of women. *The Journal of emergency medicine*, 35(3), 329-335.

⁶White, C., Martin, G., Schofield, A. M., & Majeed-Ariss, R. (2021). 'I thought he was going to kill me': Analysis of 204 case files of adults reporting non-fatal strangulation as part of a sexual assault over a 3 year period. *Journal of Forensic and Legal Medicine*, 79, 102128.

⁷ Public Prosecution Service (2025) Prosecution decisions issued in respect of the offence of Non-Fatal Strangulation or Asphyxiation for the period 1 April 2024 and 31 March 2025. April, 2025. Available at: <https://www.ppsni.gov.uk/files/ppsni/2025-08/FOI%203%20Non-fatal%20strangulation%20prosecutions%20and%20outcomes.pdf>

⁸BBC (2026) Rates of violence against women should 'horrify' every individual. . BBC News. [online] 26 Mar. Available at: <https://www.bbc.co.uk/news/articles/clj9gdpygd0>.

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⁹Victim Support NI (2025) Briefing on VAWG in Northern Ireland. Victim Support Northern Ireland [online] 5 June. Available at: <https://committees.parliament.uk/publications/49483/documents/263392/default/>

¹⁰ O'Callaghan, C., Smith, K.I., Allen, R., Jaso, V. and Elliott, K. (2022). Femicide Census 2022. Femicide Census, p.16.

¹¹ Shields, L. B., Corey, T. S., Weakley-Jones, B., & Stewart, D. (2010). Living victims of strangulation: a 10-year review of cases in a metropolitan community. *The American Journal of Forensic Medicine and Pathology*, 31(4), 320-325.

¹²Women's Aid Annual Audit (2022). THE DOMESTIC ABUSE REPORT 2022 THE ANNUAL AUDIT. <https://www.womensaid.org.uk/wp-content/uploads/2022/03/The-Domestic-Abuse-Report-2022- The-Annual-Audit.pdf>

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WHO ARE WE?

NON-FATAL STRANGULATION: KNOW THE SIGNS

The starting point of this project was a simple statistic. People who are subjected to non-fatal strangulation (NFS), are 750% more likely to subsequently be murdered by that same perpetrator^[1]. The lived reality of this statistic is that many organisations working to combat domestic abuse (DA) and/or intimate partner violence (IPV), consider NFS as the last 'warning shot' before fatalities occur^[2].

Whilst we are aware that statistics can often silence complexity, our research into NFS, particularly in Northern Ireland (NI), does not mirror this. For us, it rapidly became clear that NFS was more common than it was understood.

- ▶ NFS is in the conversations with peers and friends that equate this crime with a kink, namely choking, during sex.
- ▶ NFS is ubiquitous in pornography, where violence against women and girls is being normalised and men's control over women's bodies is rehearsed and performed.
- ▶ NFS is also a pattern occurring in the violent deaths of women in Northern Ireland. Non-fatal strangulation or death by strangulation was a feature in 52% of all femicides in Northern Ireland since 2020.^[3]

THUS, THIS PROJECT SEEKS TO:



RAISE AWARENESS OF NON-FATAL STRANGULATION



OFFER IMPARTIAL ADVICE AND AVENUES FOR SUPPORT



PRESENT RESEARCH-LED RECOMMENDATIONS FOR CHANGE TO TACKLE NFS.

This project was undertaken by the following students undertaking the MA in Conflict Transformation and Social Justice at Queen's University Belfast:

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**CIVIC ENGAGEMENT
AND STRATEGIC
COMMUNICATIONS**

[1] Training Institute for Strangulation Prevention; Domestic Violence Services Network, Inc.

[2] Alliance for Hope International, <https://www.allianceforhope.org/training-institute-on-strangulation-prevention/online-courses>

[3] Where details of cause of death are known. The real figure could be much higher (Mc Morrow, forthcoming)

