

# Key findings & IFAS recommendations: An analysis of Domestic Homicide Reviews with a history of non-fatal strangulation

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In this analysis of 396 DHRs, 74 (19%) had a history of non-fatal strangulation. In this cohort of 74 DHRs:

- There were 80 victims and 75 perpetrators of non-fatal strangulation. *In 5 (7%) of the DHRs there was more than one victim of non-fatal strangulation.*
- Females accounted for the majority of victims
  - 81% of victims were female
  - 13% were male
  - 5% did not have their sex reported in the DHR report
- Males accounted for the majority of perpetrators
  - 97% of perpetrators were male
  - 3% were female
- The most common age group for victims was 20–29 years old and the most common age group for perpetrators was 30–39 years old.
- Where the victims of non-fatal strangulation were male, they were predominantly strangled by other males. There was one instance where a male child was strangled by a female. There were no instances of females non-fatally strangling adult males.
- 70% of victims were strangled by a past or present intimate partner/spouse.
- 50% of the victims did not have their ethnicity or nationality included in the DHR report.
- 59% of non-fatal strangulation incidents were reported to the police.
- A formal domestic abuse risk assessment was conducted in 32% of incidents.
- 53% (42/80) of non-fatal strangulation victims went on to be killed by the person who had subjected them to non-fatal strangulation.
  - Within this group 41/42 (98%) of victims were female, the majority of which were killed by a current or previous intimate partner or spouse (93%, 38/41).
  - The male victim in this cohort was strangled and killed by his brother.
  - In a third of these DHRs it was reported that the victim had a disability or additional vulnerability (such as mental health or drug and alcohol difficulties).

## Method:

- IFAS retrieved 396 published DHRs from 90 Community Safety Partnerships.
- 74 DHRs were identified and included in this analysis.
- Each DHR was read and analyses were conducted around demographic information and the nature of the history of non-fatal strangulation in these DHRs.

## IFAS Recommendations

### Research

- Future research would benefit from an exploration of:
  - prevalence amongst certain groups or identities,
  - perpetrator behaviour,
  - the impact of non-fatal strangulation on victims' mental health and suicidal ideation.

### Practice:

- DHR system improvement:
  - Clear information on victim and perpetrator details,
  - DHRs to acknowledge the high-risk nature of non-fatal strangulation, highlighting cases where opportunities to safeguard victims were missed as well as those cases where best practice was followed.
- Mandatory training on tackling and preventing strangulation for statutory services including identifying non-fatal strangulation as a high-risk criminal offence that warrants a collaborative community response.