

The Honorable William Smith & Members of the Senate Judicial Proceedings Committee
Senate Judicial Proceedings Committee
11 Bladen Street
Annapolis, MD 21401

Dear Chairperson Smith and Judicial Proceedings Committee,

Frederick Health Hospital Forensic Nursing Services Team writes in support of SB 398, Criminal Injuries Compensation Board – Victims of Nonfatal Strangulation. I am the Forensic Services Patient Navigator and a licensed social worker in the state of Maryland. I work closely with forensic nurse examiners to provide care for victims of violence. Nonfatal strangulation continues to be one of the most pervasive acts of violence we encounter in the hospital setting due to the severity of the potential consequences. Many victims of nonfatal strangulation show no external signs of injury. However, the lack of visible injuries does not exclude internal and possibly life-threatening complications.

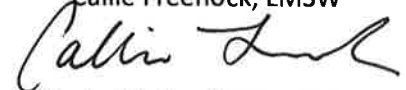
Nonfatal strangulation most often occurs in intimate partner relationships. Perpetrators use strangulation to exhibit power and control over the victim. The presence of domestic violence adds yet another layer of complexity to these cases. A victim seeking care may inadvertently be put into danger when a bill for that care is sent to the patient's residence. If a perpetrator is notified that a victim sought medical care, escalation of violence is likely to occur.

Perpetrators of nonfatal strangulation are more likely to commit future crimes, making it imperative that we increase access to evidence collection and injury documentation for all survivors. Research has made clear that perpetrators of nonfatal strangulation are more likely to kill police officers, to kill children, and to later kill their partners. Victims of nonfatal strangulation are 750% more likely to be killed by their intimate partner in the next year. We continue to see the rates of nonfatal strangulation increase. In the last fiscal year, 26.5% of all forensic patient encounters involved nonfatal strangulation.

In conjunction with a lack of visible injury, it is easy to see why victims would not seek medical care for fear of putting themselves in additional danger. The barriers of safety, financial responsibility, and lack of community education surrounding the consequences of strangulation often leads to victims being silenced. This bill would ensure that victims of nonfatal strangulation have access to the care they desperately need and deserve.

We urge a favorable report on SB 398.

Callie Freenock, LMSW



Frederick Health Hospital
Forensic Services Patient Navigator