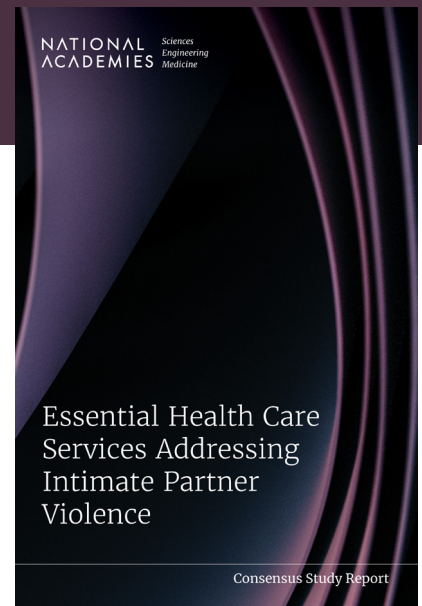


Essential Health Care Services Addressing Intimate Partner Violence

Using Intimate Partner Violence Terminology and Demographic Data Consistently

BACKGROUND

The Health Resources and Services Administration's Office of Women's Health asked the National Academies of Sciences, Engineering, and Medicine to convene a multi-disciplinary committee of experts to identify the essential health care services for women related to intimate partner violence (IPV) during steady state conditions, determine any changes to that list during public health emergencies (PHEs), and define strategies to ensure women can access essential care during PHEs. The resulting report includes recommendations for key actions to address common data issues and research gaps related to IPV.



THE PROBLEM

Most IPV-related surveys and research use different definitions for IPV, the types of IPV studied, demographic categories, and approaches to data collection. This makes it difficult to compare outcomes from intervention studies and understand the prevalence of IPV in the United States, particularly among minoritized populations that may be under-represented in surveys and studies.

Inconsistencies in labeling and definitions of key terms:

- Different definitions of IPV as a whole
- Different definitions of or categorization of types of IPV (physical, sexual, psychological, etc.)
- Combining domestic violence (which includes child abuse and violence between other family members) with IPV or using the two terms interchangeably
- Inconsistent use of the ICD-10 codes specific to IPV in the clinical setting

Inconsistencies in racial and ethnic classification data collection and analyses:

- Misclassification in law enforcement or medical records
- Demographic reporting sections with too few options for race and ethnicity or no option to select for multiple races/ethnicities, leading to overuse of "Other"
- Data from multiple races/ethnicities with small sample sizes aggregated into a larger single group for data analysis

RECOMMENDED ACTION

Researchers and clinicians should use consistent terminology for IPV and consistent approaches to demographic data collection and analysis as described in the Centers for Disease Control and Prevention's *Intimate Partner Violence Surveillance Uniform Definitions and Recommended Data Elements* resource.

Learn more and access the full report at nationalacademies.org/intimate-partner-violence.