

The Intersections of Community Violence and Intimate Partner Violence

A data brief to motivate integrated violence reduction strategies

May 2026

EXECUTIVE SUMMARY

In recent years, the Allegheny County Department of Human Services (ACDHS) has invested more resources in efforts to reduce violence through both the Community Violence Reduction Initiative (CVRI) and the Intimate Partner Violence (IPV) Reform Initiative. Although community violence and IPV represent distinct forms of harm, they share structural, social and individual risk factors that disproportionately impact the same communities. Until recently, however, our ability to examine how IPV and community violence intersect has been limited. However, data newly available in Allegheny County's Data Warehouse capture exposure to IPV and provide meaningful visibility into this overlap at the individual level.

In this brief, we used these emerging data to analyze the prevalence of IPV among people involved in fatal gun violence (homicides) in Allegheny County. We found that one in five victims or perpetrators of homicide had a documented history of IPV and that nearly half of those individuals experienced an IPV-related event within one year of the fatal incident. Individuals exposed to both IPV and gun violence exhibited substantially higher levels of need—including rates of homelessness and substance use treatment that were more than three times the County average and involvement with child welfare at four times the County rate.

Taken together, these findings highlight a significant and under-recognized connection between IPV and gun violence, underscoring the need for more closely integrated cross-system approaches to violence prevention.

***Reader's note:** Key definitions, data sources and methodological context appear in the Appendix. Readers unfamiliar with the systems referenced in this brief may find it helpful to review the Appendix before or while reading the report.*

INTRODUCTION

Interpersonal violence is a complex social problem born from intersecting risk factors across all layers of the social ecosystem. Individual risk factors stemming from adverse childhood experiences are amplified by social relationships that normalize violence as a way to resolve conflict, while structural factors like ease of access to firearms, prior violence, concentrated poverty, social isolation and legal cynicism create and perpetuate the conditions for violence to proliferate. Although violence can impact anyone, the burden disproportionately concentrates in higher-need and Black communities as a result of generations of neighborhood disinvestment, discriminatory policies and major economic shifts.

Intimate partner violence (IPV) and community violence are two categories used to describe different types of interpersonal violence. IPV includes any act of physical, psychological, or emotional abuse that occurs between intimate partners,¹ while community violence consists of serious acts of violence—including fights, assaults and shootings—between unrelated individuals who may or may not know one another.² IPV tends to occur in private spaces while community violence tends to occur in public spaces. These distinctions (outlined in **Figure 1**) are based on the relationship between the victim and perpetrator, the setting in which the violence takes place, and the way in which harm manifests.

FIGURE 1: Distinctions between Intimate Partner Violence and Community Violence

| | Relationship | Setting | Manifestation of Harm |
|----------------------------------|-------------------------------------|----------------|--|
| Intimate Partner Violence | Current or former intimate partners | Private spaces | Abuse, threats, or manipulation across physical, psychological and material levels |
| Community Violence | Acquaintances | Public Spaces | Physical violence or threats |

While these categories are useful for understanding IPV and community violence as distinct constructs, they can also obscure the shared structural, social and individual risk factors that drive both. Prevention efforts are often siloed, designed without attention to the ways in which these types of violence co-occur and reinforce one another. One reason for this fragmentation is the lack of data that capture a comprehensive picture of interpersonal violence. This report uses emerging data from the [Allegheny County Data Warehouse](#) that captures individual-level exposure to both IPV and community violence, offering a rare opportunity to observe how these forms of violence intersect. By analyzing these patterns, we aim to demonstrate the value of integrated data in revealing overlapping risks—and to motivate a more coordinated approach to violence prevention.

METHODOLOGY

Data on interpersonal violence are inherently difficult to capture due to underreporting, confidentiality, and overall complexity that limits data reducibility to a single representative measure. In this data brief, we use the full scope of available administrative data sources to represent IPV and community violence; even so, these remain proxy measures with important limitations and biases.

An overview of the data sources and their key limitations follows.

1 <https://www.cdc.gov/intimate-partner-violence/about/index.html>

2 <https://www.cdc.gov/community-violence/about/index.html>

Gun Violence as Community Violence

We use data on gun violence as a proxy for community violence. The gun violence data include victims of non-fatal shootings and homicides, as well as defendants in criminal homicide cases. Not all community violence manifests as gun violence, and not all incidents of gun violence are related to community violence. However, there is significant overlap; a review of all shootings in Allegheny County from July 2024 through the end of 2025 found that, among the 286 incidents with sufficient information to categorize, 81% were related to community violence. Furthermore, gun violence is the outcome that community violence reduction efforts are most concerned with preventing. Given the data currently available, the absence of a comprehensive, standardized measure of community violence, and—albeit with caveats—the substantial overlap observed, we believe that gun violence is a sufficient proxy measure for community violence for this data brief.

Gun Violence Data Sources

For this data brief, we identified victims of non-fatal shootings using Medicaid claims for emergency department visits related to gunshot wounds, victims of homicide using data from the Allegheny County Medical Examiner's Office, and defendants in criminal homicide cases using data from the Allegheny County Court of Common Pleas. Across all sources, the data span from 2021 through 2024. This report excludes perpetrators of non-fatal gun violence, as there is not a sufficiently precise method for identifying them in administrative data.

Gun Violence Data Limitations

In addition to being a proxy measure, the data on gun violence itself come with biases and limitations:

- **Victims of gun violence are easier to identify than perpetrators.** The clearance rate on homicides is less than 100%, meaning that the police do not arrest and charge alleged perpetrators in all cases.³ Furthermore, there is no specific criminal statute related to non-fatal gun violence, making it difficult to reliably identify criminal defendants for non-fatal shootings in the court data. Identification of victims is much more straightforward.
- **Victims of non-fatal shootings include only Medicaid recipients.** The data on non-fatal shooting victims include only individuals who were insured by Medicaid and went to the emergency department for their injuries. Those who were privately insured or did not seek medical attention are unobservable in these data. What's more, although the data capture individuals who received care in Allegheny County, the shooting itself may have occurred outside the County.
- **We use criminal charges rather than convictions to identify homicide perpetrators.** Using charges instead of convictions enables us to capture more comprehensive and less time-lagged data; however, a proportion of individuals who face charges will ultimately not receive convictions. What's more, as with any justice system sources, the data will be biased towards those who, for structural and social reasons, are more likely to have contact with law enforcement.

3 Although recent clearance rates on homicides in Allegheny county and the city of Pittsburgh sit above national averages, at 75% and 91%, respectively.

Intimate Partner Violence

We use a variety of administrative sources to identify individuals involved in IPV. These include:

- Emergency Protection from Abuse (PFA) petitions (defendants and plaintiffs)
- Child welfare referrals and cases (victims and offenders)
- Criminal Court (defendants and victims)
- Battering Intervention Programs (offenders only)

To account for the uncertainty inherent to many of these sources, we coded observations as either indications (less certain or less immediate) or confirmations (more certain and more immediate). For example, an emergency PFA petition that was **granted** is classified as a confirmation, while one that was **denied** is classified as an indication (see the **Appendix** for more detailed definitions of indications and confirmations by source system). This analysis includes both indications **and** confirmations as evidence of IPV involvement, although roughly two in three people in this cohort had at least one confirmation.

Intimate Partner Violence Source Limitations

Although our data on IPV involvement are more comprehensive than ever before, they represent a vast underestimate, not only in terms of the general prevalence of IPV, but also in terms of the diverse ways in which it manifests. At best, they provide a floor estimate for IPV involvement across the County. Additionally, they contain the following biases:

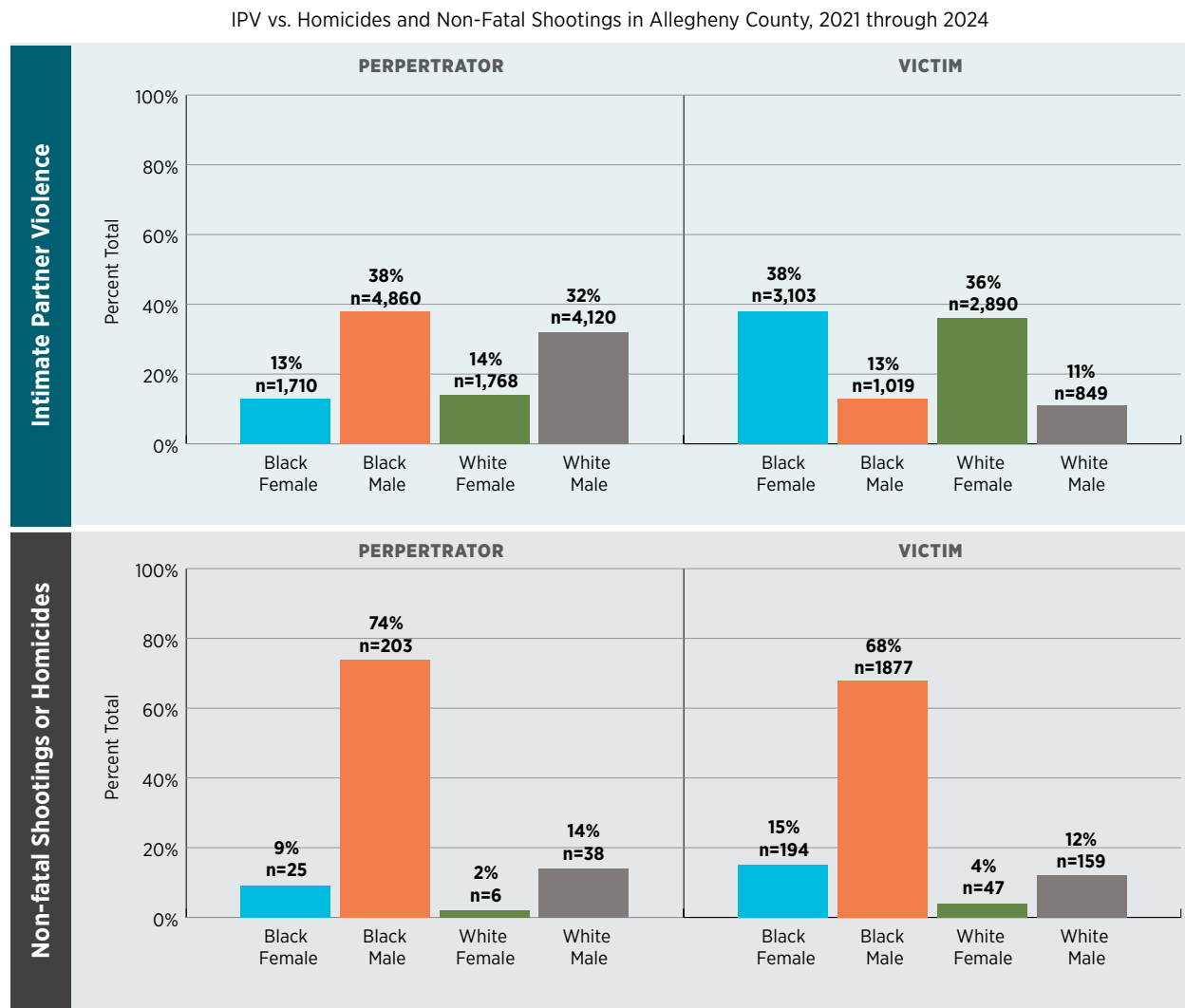
- **Formal system interactions:** Observations in the IPV data are conditional upon individuals reporting instances of abuse and having contact with the above-listed formal systems as a result. Unreported instances of abuse, which are highly common in IPV contexts, remain unobserved. This results not only in an undercount, but also in selection bias.

Perpetrators are overrepresented compared to victims: Due to the nature of the data sources, perpetrators of IPV are easier to identify than victims. In our data we identify 60% of individuals as perpetrators and 40% as victims, when the assumed reality is closer to a 50-50 split.

A Note on Victim–Perpetrator Roles: The dynamics of interpersonal violence are complex, and it can be tempting to view individual involvement through a binary lens, i.e., one is either a victim of harm or the one causing it. In our data, individuals show up as either a victim or a perpetrator in a given incident; however, this falls short of conveying the contextual nuance that is necessary for understanding not only the incident itself, but also the bigger picture of someone’s experience with violence.⁴ Furthermore, the concept of victim-perpetrator roles is not perfectly analogous between IPV and community violence. In IPV, the chronic and patterned nature of behavior means that individuals will usually—although not always—be primarily a victim or the person causing harm. With community violence, there is significant overlap between those who are victimized and those who use it; victimization—or connection to those who are victimized—is a significant risk factor for future perpetration, and vice versa. Demographic trends demonstrate the incongruity between IPV and community violence when it comes to the victim-perpetrator distinction (**Figure 2**). In IPV, there is a significant gender split between victims and perpetrators, with women more commonly showing up as victims and men as perpetrators. In homicides and shootings, Black men make up the majority of both victims and accused perpetrators.

4 For example, police may arrest an IPV survivor on charges stemming from an IPV dispute in which they used violence in self-defense, making them appear in the data as an IPV offender. Additionally, victims of gun violence may be retaliatory targets for an act of violence they committed against someone else.

FIGURE 2: Demographics of Individuals Exposed to Violence



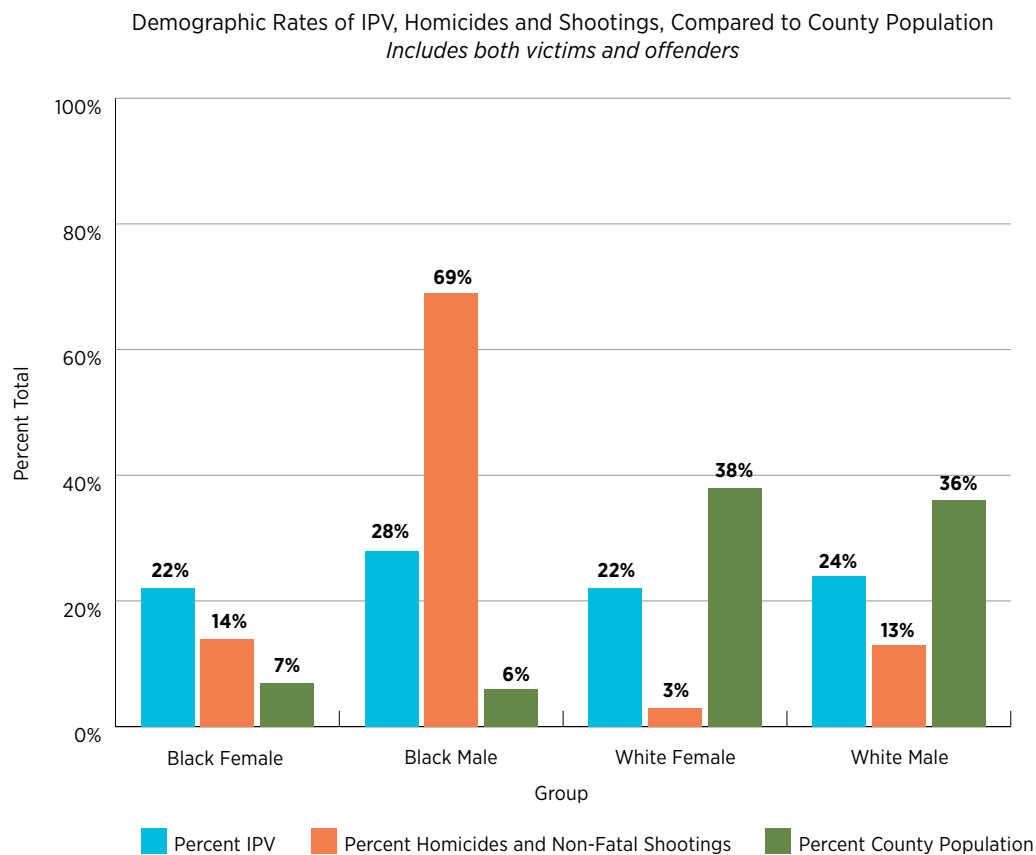
Due to the limited context provided by administrative data—along with the conceptual incongruity between IPV and community violence in terms of the victim-perpetrator divide—this analysis does not emphasize distinctions between role types in cases of interpersonal violence. Instead, it assumes that the risk factors for experiencing violence, whether as a victim or a perpetrator, are sufficiently overlapping to warrant a more generalized analytical approach.

FINDINGS

Demographic and Geographic Disparities Underscore Structural Risk Factors

The burden of violence falls disproportionately on individuals in communities that have been subjected to systemic and structural inequalities. In Allegheny County data, these disparities show up in demographic-population rates, which show both Black men and Black women exposed to IPV and gun violence at rates disproportionate to their share of the population. For example, while Black men make up only six percent of the County population, they account for 28% and 70% of individuals exposed to IPV and gun violence, respectively (Figure 3). Similarly, Black women make up only seven percent of the County population but account for 22% and 14% of individuals exposed to IPV and gun violence. **Figure 3** helps to visualize these stark disparities by showing the demographic rates of IPV vs. community violence exposure relative to the County population. Groups for which the rates of IPV and homicides and non-fatal shootings are higher than the population rate are those for whom IPV or community violence has a disproportionate impact.

FIGURE 3: Population Rates of IPV Exposure

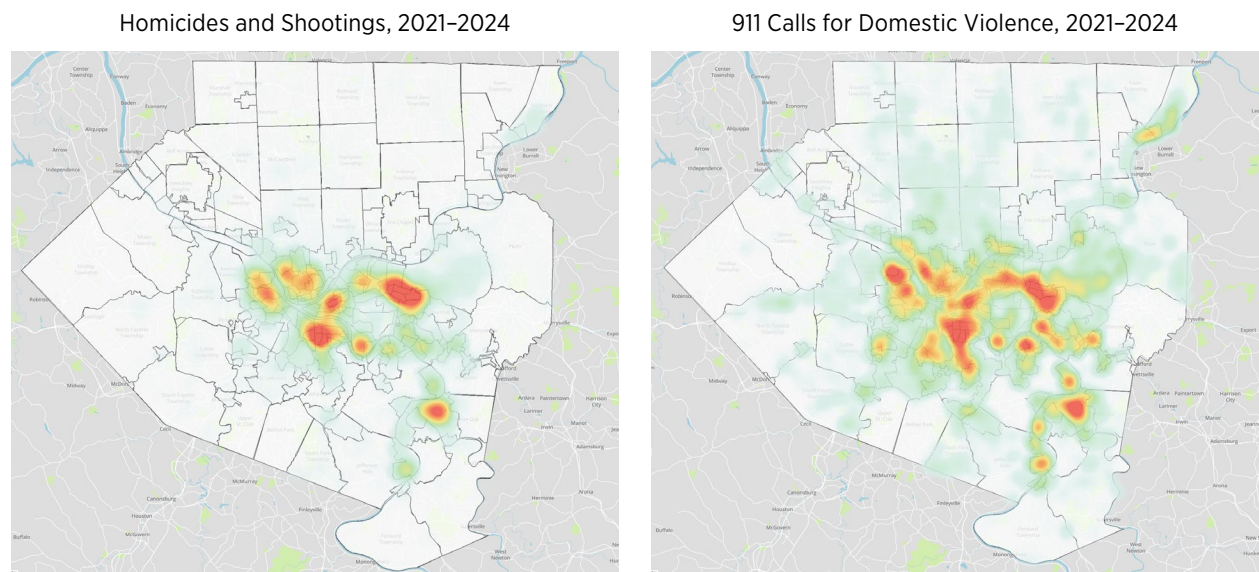


Discriminatory housing, lending and land use policies, outmigration and major economic shifts like deindustrialization have led to heavily racially and economically segregated communities in Allegheny County, making municipal and neighborhood boundaries highly correlated with race and economic status. As a result, alongside these demographic disproportionalities are geographic concentrations of gun violence and IPV that follow the same patterns.

Figure 4 shows density maps for proxy indicators of community violence (homicides and shootings) and IPV (911 calls for domestic violence) from 2021 through 2024. Both maps show the biggest hotspots in the Mon Valley, the South Hilltop, Homewood and McKees Rocks. Other areas of high concentration include the Hill District, Upper Northside, East Hills and Wilkinsburg.

The same neighborhoods and communities that had the highest concentration of homicides and shootings from 2021 through 2024 also had the highest concentration of 911 calls for domestic violence/DV⁵ during the same time frame. These are also communities with the highest levels of need across multiple dimensions, including poverty, joblessness and low educational attainment.⁶ High-stress neighborhoods act as structural drivers of violence.

FIGURE 4: Geographic Concentration of IPV and Community Violence



5 Note that our 911 data does not differentiate domestic violence from intimate partner violence. Thus, this count includes calls for non-IPV domestic situations. We have proceeded under the assumption that the patterns of concentration would remain the same if this showed only IPV calls.

6 <https://www.alleghenycountyanalytics.us/2024/05/31/alleggheny-county-community-need-index/>

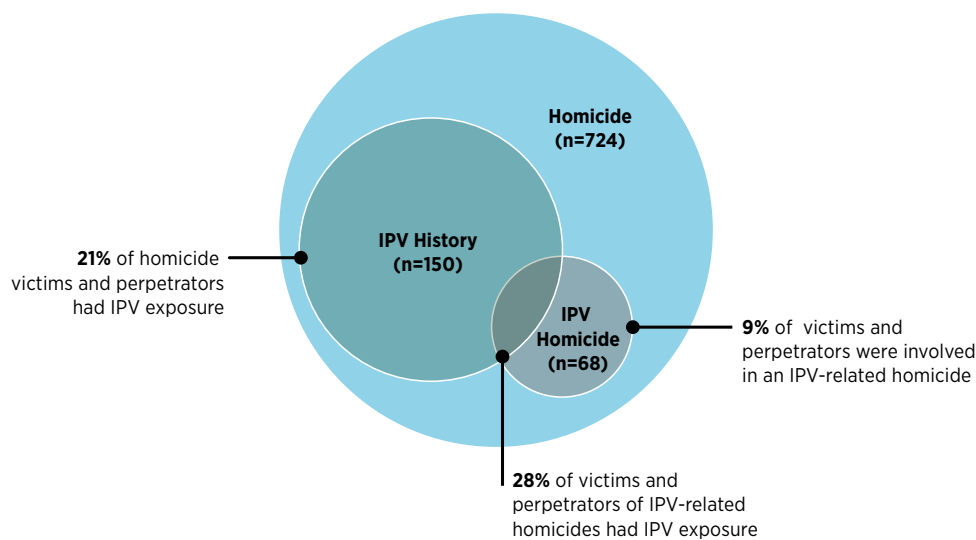
IPV Exposure is Common Among Individuals Involved in Fatal Violence

The overlapping concentration of IPV and gun violence among the same populations underscore their shared structural and social risk factors. These patterns also show up at the individual level, where data reveal a high level of dual exposure to IPV and gun violence among the same individuals.

Although intimate partner homicides (IPH) represent only 10% of Allegheny County homicides in any given year, at least one in five victims and perpetrators had indications of prior IPV exposure (**Figure 5**), regardless of whether the homicide itself was between intimate partners. This rate is likely higher given that it does not capture unreported instances of abuse; however, it is still disproportionately high relative to the rate of IPV exposure for the full County population, which, by these data, is only one percent.

Figure 5 is a visual representation of this overlap, with the largest circle including all homicide victims and accused perpetrators from 2021 through 2024 (n=724), the second-largest representing the subset which had any indication of IPV history (n=150), and the smallest showing homicides between intimate partners or other relationship to IPV (n= 68). The overlap of all three circles represents the 19 (28%) individuals involved in IPH who also had indications of IPV exposure prior to the incident.

FIGURE 5: Homicide Victims and Perpetrators with IPV Exposure



Individuals Arrested for IPV-related Offenses had Other Types of Criminal-Legal Interaction

Alongside high rates of IPV exposure among people impacted by gun violence, we also observed that roughly half of those arrested on IPV-related charges had prior legal-system contact for reasons other than IPV. Among these individuals (n = 3,715), nearly half (47%) had at least one prior violent charge and about a third (34%) had a history of drug-related offenses (**Table 1**).

While this arrest history is not a direct proxy for gun violence, it suggests that IPV harm often occurs within a broader pattern of criminalized behavior. This points to a need for multilayered approaches to IPV prevention that, in addition to power and control, focus on the broader social, cognitive-behavioral and structural factors that drive violence.

The most common crime types for defendants in IPV criminal cases who had a non-IPV-related criminal history are shown in **Table 1**. Crime type categories correspond to the most serious charge associated with each criminal case (which is often associated with multiple charges) and are based on standard classifications used by the Pennsylvania State Court Administration. The percentages listed are a proportion of the full cohort; for instance, 47% of individuals in this group had at least one prior person-type charge. As people can have multiple prior charges and types, each category includes them in the count (and percentages will not sum to 100).

TABLE 1: Most Common Types of Prior Charges, Excluding IPV

| CHARGE TYPE | PERCENT (N) |
|---|-------------|
| Person | 47% (1,740) |
| Property | 39% (1,429) |
| Drugs | 34% (1,258) |
| Public Order | 28% (1,047) |
| Driving Under the Influence of Substances (DUI) | 22% (797) |
| Weapons | 17% (615) |

System Involvement Reveals Multi-Faceted Needs

Individuals with dual exposure to IPV and gun violence also experience high levels of need across a range of social and material domains. **Figure 6** compares the rates of lifetime system involvement among four groups of individuals and shows percents of involvement in various systems in order of decreasing lifetime involvement to support visual comparison across groups:

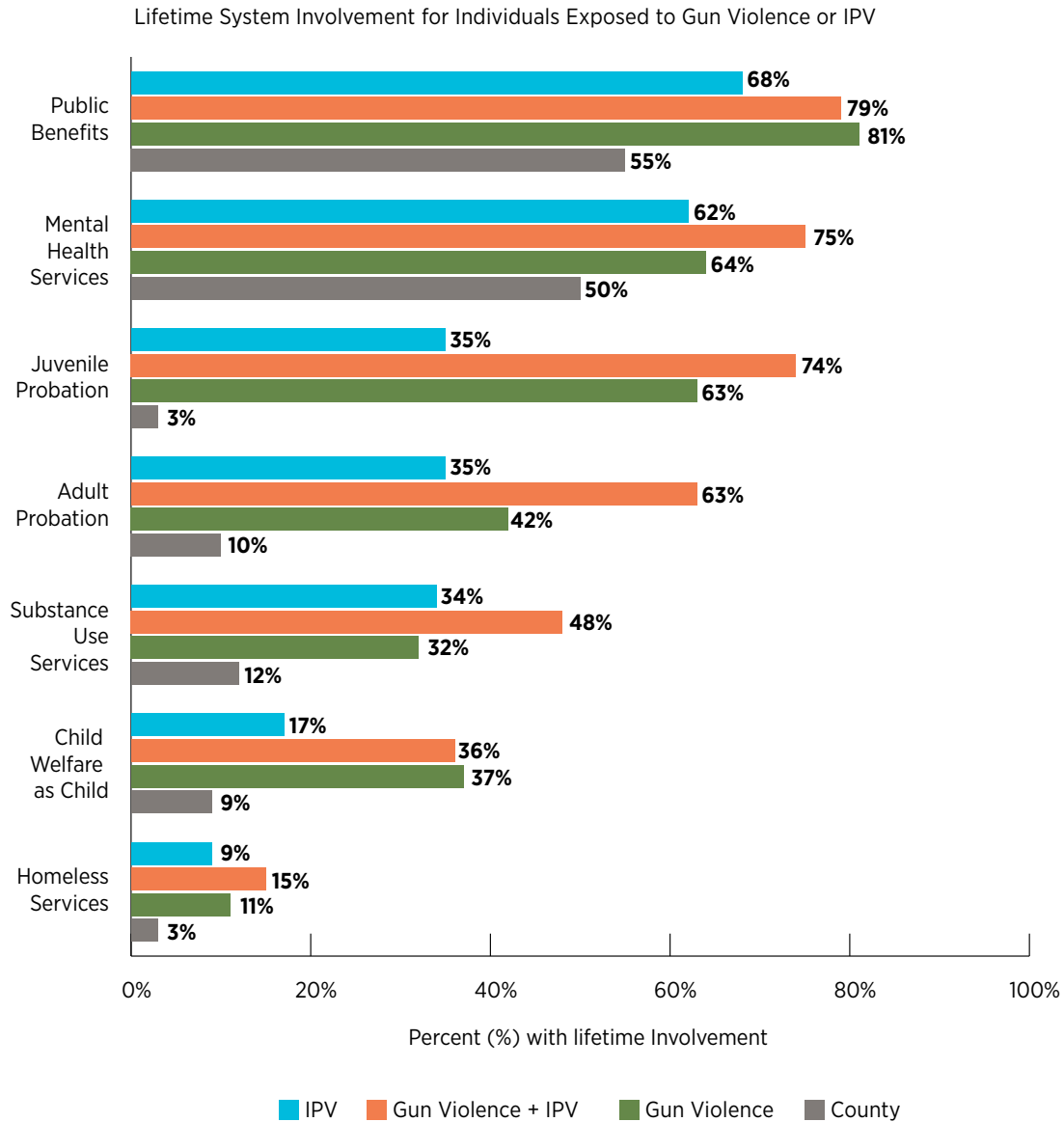
- 1) individuals with IPV exposure who were not involved in homicides or shootings (IPV)
- 2) victims and perpetrators of homicides and shootings who also had IPV exposure (Gun Violence + IPV)
- 3) victims and perpetrators of homicides and shootings who had no IPV exposure (Gun Violence)
- 4) the full County population

The data show that people affected by either form of violence had disproportionately higher rates of homelessness, child welfare involvement and behavioral health challenges compared to the general County population.⁷ Those at the intersection of IPV and gun violence faced the highest levels of need: roughly three in four had a history of juvenile justice involvement and mental health treatment, just under half received substance use treatment, and over a third experienced child welfare involvement as children.

These patterns highlight the complex and compounding challenges faced by individuals most affected by violence—challenges that can function as both precursors to and consequences of harm.

7 Population estimates for lifetime system involvement use aggregate data from [Allegheny County's Quick Count](#) tool relative to [the ACS 2023 5-year estimates](#) of the age-eligible population in Allegheny County. Homeless services and public benefits enrollment rates are relative to the full County population, while child welfare and juvenile probation are relative to the population under age 39. Adult probation is relative to the population over 18. We calculate the rates for mental health and substance use treatment based on the Medicaid-enrolled population, as derived from Quick Count.

FIGURE 6: Lifetime System Involvement of Individuals Involved in IPV and Community Violence



Interactions May Amplify Risk of Lethality

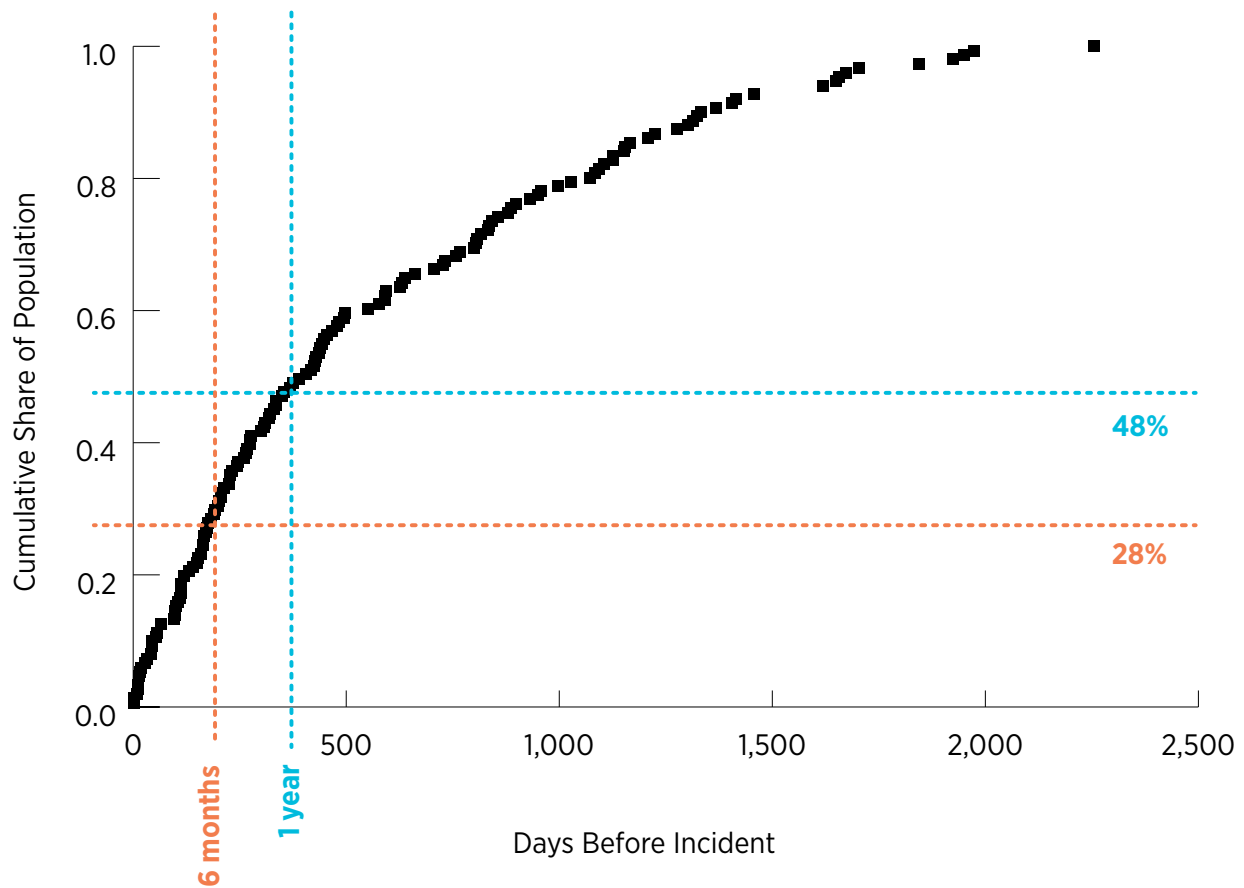
Dual exposure to IPV and gun violence is not only a consequence of elevated risk; the interaction can also deepen cycles of harm and increase the likelihood of lethal outcomes.

Figure 7 shows how soon IPV was known to the system before each homicide incident. The horizontal axis represents the number of days prior to the homicide that IPV became known for an individual and the vertical axis represents the percentage of the cohort that had an IPV event in this time frame.

Twenty-eight percent of individuals involved in any homicide with prior IPV exposure had an IPV-related event (e.g., PFA, arrest, open child welfare case) within six months of the homicide and just under half had one within a year, indicating that IPV is often proximally present in the lead-up to serious and fatal incidents.

The steep slope of the curve on the left side of the chart suggests that IPV events occurring proximally to homicide incidents were more common than those that occurred many years prior. This is a strong indication that IPV is a risk factor for escalating violence.

FIGURE 7: Proximity of IPV Events Relative to Homicides

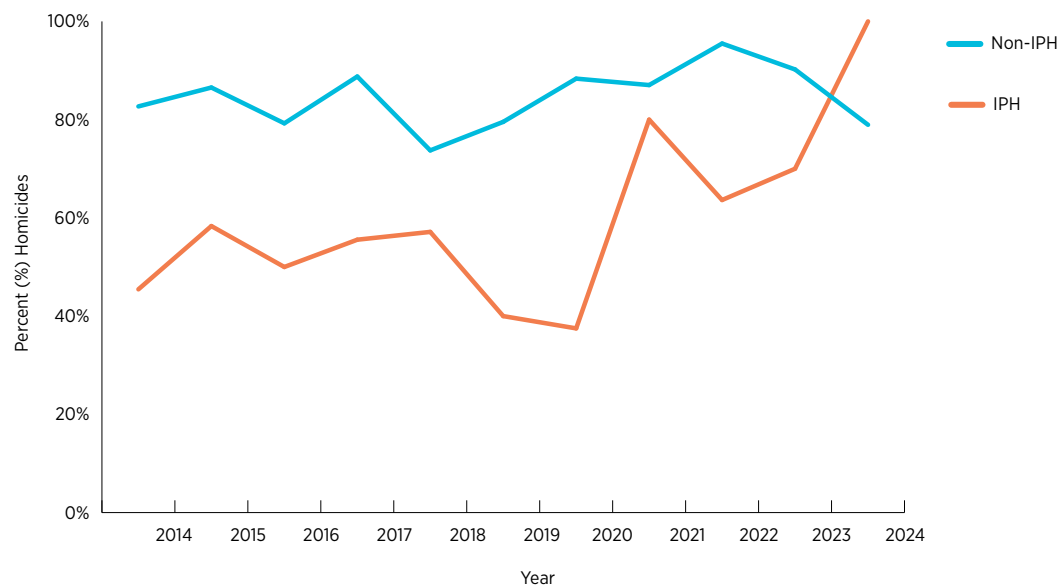


Additionally, the broader social context of community violence compounds the risks associated with IPV in both direct and indirect ways. In neighborhoods highly impacted by violence, residents are more likely to carry firearms as a manner of protection,⁸ which directly increases the risk of IPV lethality.⁹ Persistent exposure to high-stress environments in these communities also makes people more frequently default to reactive “system 1 thinking.” System one thinking is a learned thought pattern that becomes automatic over time. While this type of thinking is well suited for making quick decisions in low-stakes contexts, it can increase the risk of serious harm in high-stakes situations (such as interpersonal conflict where someone is carrying a gun) when not disrupted with the more conscious, deliberate “system 2 thinking” that supports complex problem solving.¹⁰

Finally, widespread distrust in the police and the criminal-legal system in communities highly impacted by violence—rooted in a long history of harmful interactions with law enforcement—makes IPV victim-survivors less willing to rely on formal systems for support. In the absence of trusted alternatives, this creates a gap in services that allows violence to continue unchecked.

Figure 8 compares yearly trends in firearm-related homicides for IPH and non-IPH. The blue line represents the annual proportion of non-IPHs caused by a fireman, while the orange line represents the proportion of IPH caused by a firearm. The share of non-IPH involving firearms has decreased since 2022, while the share among IPH has gone up, peaking at 100% (n=11) in 2024. This trend is replicated in national data. This suggests that current efforts to reduce gun violence, while effective overall, are not having the same impact in IPV contexts, and points to a gap in trusted, coordinated interventions to stop cycles of abuse in the communities most impacted by violence.

FIGURE 8: Year-by-Year Trends in the Percent of Homicides Caused by Firearms, 2014 through 2024



8 <https://pmc.ncbi.nlm.nih.gov/articles/PMC8724395/>

9 National studies have found that the presence of a firearm increases the likelihood of IPHs by 400%. <https://giffords.org/lawcenter/gun-laws/policy-areas/who-can-have-a-gun/domestic-violence-firearms/>

10 Ludwig, Jens, 2025. Unforgiving Places: *The Unexpected Origins of American Gun Violence*.

CONCLUSION

In 2024, ACDHS, in collaboration with other stakeholders from the criminal-legal system and victim service agencies, began conducting a weekly review of individuals arrested for IPV offenses who are at high risk for causing serious harm. The goal of these reviews is to coordinate targeted actions to stop IPV-offending behavior. Through this work, we have observed individuals with a history of community violence who continue to commit IPV despite repeated arrests. This underscores the added complexity of disrupting IPV when it co-occurs with community violence, raises questions about the effectiveness of legal sanctions alone, and prompted us to examine how community violence and IPV prevention strategies could be more intentionally integrated.

Local IPV Interventions have focused primarily on victim safety, while legal system sanctions such as PFAs, criminal charges and battering intervention programs have been the primary mechanisms of deterring offenders from future violence. This model plays an important role in promoting victim safety and offender accountability, but it often falls short of enacting meaningful behavior change because it neither addresses structural drivers of violence nor creates opportunities for intervention outside of formal systems—systems that, in many communities affected by systemic inequities, are widely distrusted. These limitations underscore the need for an additional layer of community-based support within IPV intervention strategies, without which many people remain vulnerable to continued harm.

Allegheny County's Community Violence Reduction Intervention (CVRI) strategy offers a model for what community-based prevention can look like in practice. Rooted in public health approaches to violence prevention, CVRI strategies deploy credible messengers to identify and engage the small number of people at highest risk of gun violence involvement, exposing them to non-clinical cognitive behavioral intervention and de-escalating conflicts as they arise. Credible messengers also work to change community norms around violence by modeling positive behavior. By leveraging the social credibility of trusted community members in lieu of punitive consequences, CVRI aims to disrupt reactive behavior and help people re-engage in more deliberate decision-making. Applied to IPV contexts, this model can help fill gaps in the current response by creating pathways for engagement and behavior change beyond formal systems, particularly in communities where trust in those systems is low.

However, the CVRI model does not universally account for the ways in which IPV manifests and perpetuates cycles of harm beyond abusive partnerships. Thus, these efforts may overlook key dynamics driving ongoing violence and miss opportunities to support survivors who are hesitant to engage with the legal system. Just as CVRI models can help address gaps in IPV interventions, a deeper understanding of IPV can also strengthen CVRI practice and further amplify its impact. A stronger IPV lens can enhance CVRI practitioners' ability to recognize patterns of harm, assess risk, and engage individuals whose experience of violence is shaped by abusive dynamics that may not otherwise be visible.

ACDHS is committed to investing in innovative approaches to reducing violence in our communities and using data to drive intentional, strategic design. While there is still much to learn about what coordinated interventions could look like, approaching violence prevention through a more integrated lens is critical to advancing our understanding of its causes and finding solutions that enhance the health and well-being of all Allegheny County residents.

APPENDIX

APPENDIX

1. System Involvement Data and Definitions

The Allegheny County data warehouse contains information on system involvement and service utilization from over 20 different sources of information, including claims for publicly funded physical and behavioral health services, housing and homelessness support, criminal court filings and child protective services. Historical data from each source are varied and limited, with the earliest dates of involvement reaching back to 2002. As such, the rates of “lifetime” involvement shown in this report are not true lifetime rates, but rather the most comprehensive historical look we have for everyone in Allegheny County. What’s more, the data do not include analogous system involvement outside of Allegheny County. For all these reasons, readers should interpret the estimates listed in this report as undercounts of the true rate.

Formal Definitions:

- **Public Benefits:** Individuals who have received services from ACDHS who are also receiving public benefits from the Pennsylvania Department of Human Services (PADHS). PADHS public benefits include cash assistance, Supplemental Nutrition Assistance Program (SNAP), financial assistance for childcare, health care coverage, home heating assistance (LHEAP), school meals, Select Plan for Women and long-term living services. *Data are available from July 2002 to the present.*
- **Juvenile Probation:** A person who has attained 10 years of age and is not yet 21 who is alleged to have, upon or after the juvenile’s 10th birthday and prior to reaching 18, committed a delinquent act or violated the terms of juvenile probation prior to termination of juvenile court supervision. *Data are available from January 2007 to the present.*
- **Adult Probation:** All individuals actively supervised by Adult Probation. *Data are available from January 2007 to the present.*
- **Mental Health Services:** Individuals receiving a publicly funded (Allegheny County or Medicaid managed care/HealthChoices) mental health service. Includes both clinical services such as individual and group therapy, and non-clinical services such as case management and peer support. *Data availability is different based on the source. The earliest available data are from 2002.*
- **Substance Use Services:** Individuals receiving a publicly funded (Allegheny County or Medicaid managed care/HealthChoices) substance use disorder service, excluding level of care (LOC) assessments. *Data are available from July 2002 to the present.*
- **Child Welfare as a Child:** Children and youth, 18 and younger, with an open case in the Allegheny County child welfare system. This includes individuals receiving home- and community-based services, living in an out-of-home placement, and/or otherwise supported by an assigned child welfare caseworker. The child welfare system responds to concerns of abuse and neglect and coordinates services with families. *Data are available from July 2002 to the present.*
- **Homeless Services:** Individuals or families who are homeless, residing in short term care/refuge, or living in unsheltered locations who receive outreach services intended to connect them with emergency shelter or other critical services. *Data are available from July 2002 to the present.*

APPENDIX

2. Details on IPV Cross-System Data

We identified individuals as IPV victims or offenders using multiple source systems of information. Using the universal client identifier in Allegheny County's data warehouse, we compiled these involvements at the individual level to show a more complete picture of cross-system engagement. While ACDHS is working to expand the breadth of source systems over time, currently this information comes from the Criminal Justice and Child Welfare systems.

Child Welfare system sources:

- 1. Child Welfare Allegations:** Referrals to child welfare with allegations of abuse and neglect include allegations of IPV. Although not every allegation results in an investigation, it provides an early indication of IPV within a household. When caseworkers investigate allegations, they mark them as "indicated," "founded," or "substantiated," to indicate that the caseworker believes there is sufficient evidence to prove the allegation is true. Otherwise, they may mark an allegation as "unfounded," meaning that there was not sufficient evidence to prove the allegation true.
- 2. Universal Assessments/FAST:** When child welfare investigates families, they conduct a comprehensive assessment of needs and risk factors, including overall risk of DV/IPV. This results in detailed information on perpetrator and victim relationships, history of violence and current risk level.
- 3. Non-Placement Services:** Non-placement services (NPS) are services provided to families actively involved in child welfare in which the child is not removed from the household. In practice, participating in these services is a condition of keeping children in the household. Within NPS data systems, there are two services relevant to IPV/DV: IPV Counseling and Batterers Intervention Program. Use of these services indicates IPV risk in a household.

Criminal Justice System Sources

- 1. Emergency PFAs:** Emergency protection from abuse orders (PFAs) are civil court orders that prohibit contact between the plaintiff (alleged victim) and defendant (alleged offender). Violations of the order constitute a criminal charge. Emergency PFAs are a stand-in for more formal "temporary" PFAs. If granted, emergency PFAs are in force from the moment of filing to the next time the downtown PFA office is open, or for no more than 72 hours. Oftentimes, couples in conflict will file PFAs against each other. Thus, the role of defendant and plaintiff is not a reliable indicator of who the primary aggressor is in the situation.
- 2. DV and IPV Arrests:** When law enforcement arrests and charges someone, the Office of Pretrial Services assesses their needs and risks prior to the initial arraignment, reviewing details of the police affidavit and marking any cases that involve IPV. The judge uses this assessment to make decisions about bail. Because there are no criminal statutes related to IPV, this is the most reliable method of identifying IPV-related cases in the system.
- 3. Domestic Violence Court Cases:** The Court of Common Pleas will put criminal cases on the DV event track if the defendant has had multiple DV cases in the past.
- 4. Batterer Intervention Program Enrollment:** Lower Court judges can refer defendants to Batterer Intervention as a condition of bond—a requirement of pretrial release—on an IPV or DV criminal case. Although the Lower Court is the most common referral source for this program, child welfare is another referral pathway.

APPENDIX

Indications vs. Confirmations

Within and across data sources, there are different degrees of certainty in identifying the presence of IPV. To account for this nuance, we developed the concept of an “event type,” which separates instances of IPV identification according to how certain we are that the data reflect reality. A broad definition of each event type and a description of what each means within each data source follows.

Confirmation

An event type is a confirmation of IPV if there is high confidence that the event indicates actual IPV involvement. Within each data source, we identified confirmations as:

- **IPV Arrest:** An arrest related to IPV
- **Emergency PFA (granted):** A granted petition for an emergency PFA. This instance means the MDJ found sufficient evidence to issue the order.
- **Batterer Intervention Program Enrollment:** Any referral to Batterer Intervention
- **Domestic Violence Court:** A criminal case on the domestic violence event track
- **Child Welfare Non-Placement Services (Batterer Intervention or domestic abuse counseling):** Counselors deliver counseling in cases where individuals have used abusive behaviors and child welfare has not placed the child out of the home.
- **Child Welfare Universal Assessment/FAST (Score = 2 or 3):** Indicates that a client scores a 2 or 3 on the IPV section of the assessment, indicating a “higher level of concern” and “need for intervention”
- **Child Welfare Referral Allegation (valid + IPV noted):** A DV allegation defined and indicated or valid on a referral with an IPV factor in the case notes

Indication

An event type is an indication of IPV if there is less confidence that the event represents actual IPV involvement. Readers should interpret indications as “maybe” IPV-involved or having historical IPV involvement that is not current relative to the observation date. Within each source, we identify indications as follows:

- **Domestic Violence Arrest (non-IPV):** An arrest related to DV, meaning that the alleged violence occurred between individuals who are not intimate partners but share a familial relation and/or live together. We treat these as indications of IPV involvement due to the high rate of overlap between non-IPV DV and IPV.
- **Emergency PFA (denied):** A denied petition for an emergency PFA. This means that the MDJ did not find sufficient evidence to uphold it.
- **Child Welfare Non-Placement Services (family violence or sexual assault counseling):** When counselors provide services in cases involving family violence or sexual assault and child welfare does not remove the child from the home
- **Child Welfare Universal Assessment/FAST (score = 1):** A client scores a 1 on the assessment under the IPV category, indicating a history of IPV but a low level of current concern
- **Child Welfare Referral Allegation (invalid or no IPV noted):** When a DV allegation is invalid or a domestic violence allegation is valid but IPV is not in the case notes.