

## Abstract

# Telehealth and Intimate Partner Violence: A Systematic Review of Telehealth Interventions

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## Abstract

**Background:** Intimate partner violence (IPV) is a global public health problem and often leads to deleterious outcomes. IPV is associated with elevated psychological distress, impaired physical health, and high rates of morbidity and mortality. Since the start of the COVID-19 pandemic in December 2019, there has been an exponential increase in the rates of IPV worldwide. The COVID-19 pandemic has also heralded an increased use of telehealth to deliver medical and psychological services. *Telehealth* is defined as the use of technology communication systems (ie, mobile apps, videoconferencing, etc) in the provision of health care. Given increases in access to Wi-Fi and computing technology, telehealth has become increasingly popular in all types of health care interventions, including those for IPV.

**Objective:** Reviewing and synthesizing information on telehealth intervention, screening, and prevention for IPV is essential for our knowledge of the efficacy and future of telehealth in IPV. Accordingly, this study conducted a systematic review of telehealth interventions for IPV, with a focus on screening and intervention for IPV victimization and perpetration.

**Methods:** This study applied the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) guidelines to a literature search that identified research evaluating telehealth and telemedicine interventions for DV and IPV. Only 14 studies met the study inclusion criteria, with 3 articles focusing on telehealth screening for IPV and 11 articles studying telehealth interventions for IPV.

**Results:** The studies demonstrated heterogeneity in the (1) purpose of the intervention (screening, prevention, or treatment), (2) type of intervention delivered via telehealth (website vs telephone vs videoconferencing) and intervention dosage, and (3) outcomes assessed. Scientific rigor according to the Oxford Center for Evidence-Based Medicine was also variable. Studies predominantly focused on women. The results show promising evidence of the efficacy of telehealth screening (over face-to-face screening) for IPV victimization. Only specific types of telehealth interventions were shown to have promise for reducing psychological distress among IPV survivors. The results suggest that telehealth may be a viable option for the delivery of IPV screening and intervention programs, especially when face-to-face interaction is not feasible.

**Conclusions:** The present findings highlight the growing utilization of telehealth modalities for IPV screening and intervention. Further research is needed to enhance the evidence base for the telehealth screening, prevention, and intervention of IPV and to evaluate the effectiveness of the approaches for individuals involved in IPV.

**Conflicts of Interest:** None declared.

(*iproc* 2022;8(1):e39326) doi: [10.2196/39326](https://doi.org/10.2196/39326)

## KEYWORDS

telehealth; IPV; DV; telemedicine

*Edited by S Pagoto; this is a non-peer-reviewed article. Submitted 06.05.22; accepted 15.06.22; published 29.06.22.*

Please cite as:

Chan GYC, Cruz-Sánchez M, Bhuptani PH, Millman C, Orchowski LM

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*iproc* 2022;8(1):e39326

URL: <https://www.iproc.org/2022/1/e39326>

doi: [10.2196/39326](https://doi.org/10.2196/39326)

PMID:

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