SDG indicator metadata
(Harmonized metadata template - format version 1.0)

0. Indicator information

0.a. Goal
Goal 5: Achieve gender equality and empower all women and girls

0.b. Target
Target 5.2: Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation

0.c. Indicator
Indicator 5.2.1: Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age

0.d. Series
Propportion of ever-partnered women and girls subjected to physical and/or sexual violence by a current or former intimate partner in the previous 12 months, by age (%) VC_VAW_MARR

0.e. Metadata update
2022-03-31

0.f. Related indicators
5.2.2: Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months, by age and place of occurrence

5.6.1: Proportion of women aged 15-49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care. (as includes a component on saying no to sex.)

11.7.2: Proportion of persons victim of physical or sexual harassment, by sex, age, disability status and place of occurrence, in the previous 12 months

16.1.3: Proportion of population subjected to physical, psychological, or sexual violence in the previous 12 months

16.2.3: Proportion of young women and men aged 18-29 years who experienced sexual violence by age

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0.g. International organisations(s) responsible for global monitoring
World Health Organization (WHO)
United Nations Children's Fund (UNICEF)
United Nations Entity for Gender Equality and the Empowerment of Women (UN Women)
United Nations Office on Drugs and Crime (UNODC)
United Nations Population Fund (UNFPA)
United Nations Statistics Division (UNSD)

1. Data reporter

1.a. Organisation
2. Definition, concepts, and classifications

2.a. Definition and concepts

Definition:
This indicator measures the percentage of ever-partnered women and girls aged 15 years and older who have been subjected to physical, sexual, or psychological violence by a current or former intimate partner, in the previous 12 months. The definition of violence against women and girls (VAWG) and the forms of violence specified under this indicator are presented in the next section (Concepts).

NOTE: References to “violence against women” (VAW) throughout also include adolescent girls (15-19 years old).

Concepts:
According to the UN Declaration on the Elimination of Violence against Women (1993), violence against women is “Any act of gender-based violence that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life. Violence against women shall be understood to encompass, but not be limited to, the following: Physical, sexual and psychological violence occurring in the family […]”. See here for the full definition: https://undocs.org/en/A/RES/48/104

Intimate partner violence (IPV) against women includes any abuse perpetrated by a current or former partner within the context of marriage, cohabitation, or any other formal or informal union.

The different forms of violence included in the indicator are defined as follows:

1. Physical violence consists of acts aimed at physically hurting the victim and include, but are not limited to acts like pushing, grabbing, twisting the arm, pulling hair, slapping, kicking, biting, hitting with a fist or object, trying to strangle or suffocate, burning or scalding on purpose, or threatening or attacking with some sort of weapon, gun or knife.

2. Sexual violence is defined as any sort of harmful or unwanted sexual behaviour that is imposed on someone, whether by use of physical force, intimidation, or coercion. It includes acts of abusive sexual contact, forced sexual acts, attempted or completed sexual acts (intercourse) without consent (rape or attempted rape), non-contact acts such as being forced to watch or participate in pornography, etc. In intimate partner relationships, sexual violence is commonly operationally defined in surveys as being physically forced to have sexual intercourse, having sexual intercourse out of fear for what the partner might do or through coercion, and/or being forced to do something sexual that the woman considers humiliating or degrading.

3. Psychological violence consists of any act that induces fear or emotional distress. It includes a range of behaviours that encompass acts of emotional abuse such as being frequently humiliated in public, intimidated or having things you care for destroyed, etc. These often coexist with acts of physical and
sexual violence by intimate partners. In addition, surveys often measure controlling behaviours (e.g., being kept from seeing family or friends, or from seeking health care without permission). These are also considered acts of psychological abuse, although usually measured separately.


2.b. Unit of measure

Percent (%)

2.c. Classifications

The ‘gold standard’ and operational definitions applied to the generation of the 2018 global, regional and national estimates for intimate partner violence against women (WHO, 2021) reference the UN Guidelines for Producing Statistics on Violence against Women (UN, 2014) and the UNODC International Classification of Crime for Statistical Purposes ICCS (UNODC, 2015). These international standards on measurement and reporting include:

1. standardized definitions of physical, sexual, and psychological IPV against women;
2. measurement of these forms of violence using acts-based questions
3. Appropriate sample size
4. disaggregation by age groups
5. application of the appropriate denominator/target population (ever-partnered women)
6. reporting by type of perpetrator
7. comprehensive interviewer training to administer violence against women questions, and following internationally agreed ethical and safety guidelines, including on privacy, confidentiality and support service information.

Survey measurement, should be guided by these international standards and documentation should report on all of the above to allow for an overall assessment of data quality. However, to date, individual studies and surveys use different measures, methodologies and reporting standards. This makes it challenging to compare the prevalence across studies and requires the use of adjusted estimates for international comparability (see section 4b).

3. Data source type and data collection method

3.a. Data sources

The SDG 5.2.1 Indicator Database comprises data from population-based household surveys representative at the national and/or sub-national level and implementing a methodology that uses acts-based questions. All sources date from 2000 to 2018.

A significant proportion of data from low- and middle-income countries are obtained from the Domestic Violence Module of the Demographic and Health Surveys (DHS). Some data come from dedicated surveys on violence against women in countries that have implemented, for example, WHO’s violence against women survey methodology or other methodologies consistent with international
guidelines and best practices. In the case of higher-income countries, data were obtained from Crime Victimisation Surveys (CVS) or dedicated surveys.

3.b. Data collection method

Data are collated by the WHO on behalf of the Inter-Agency Working Group on Violence against Women.

Data come from publicly available survey data or data provided by National Statistics Offices (NSOs) or other relevant national entities through the consultation process with countries. For efficiency, some data are collated using existing data-compiling online platforms (e.g., DHS StatCompiler and the EU-wide Survey on Violence Against Women (Fundamental Rights Agency Data Explorer)).

3.c. Data collection calendar

Countries are encouraged to conduct surveys at regular intervals. The recommended interval, depending on available resources, is three (3) to five (5) years which will allow countries to effectively measure progress. The prevalence database will be updated on an annual basis.

3.d. Data release calendar

Data on SDG indicator 5.2.1 were collected, compiled, and sent back to countries alongside the country estimates for their review. It is expected that the modeled estimates will be updated every 2 years.

3.e. Data providers

Data are provided by nationally or sub-nationally representative surveys on violence against women conducted by National Statistical Offices (in most cases), line ministries/other national institutions or other entities.

3.f. Data compilers

Data are compiled and reviewed by the Interagency Working Group on Violence against Women Data (WHO, UN Women, UNICEF, UNSD, UNFPA, UNODC).

3.g. Institutional mandate

WHO is the directing and coordinating authority on international health within the United Nations System. It supports countries as they coordinate the efforts of multiple sectors of the government and partners to attain their health objectives and support their national health policies and strategies, including through developing norms and standards, and strengthening data collection, reporting, and use. The organization produces estimates and statistics for a wide range of diseases and health conditions including in its annual world health statistics report. It has led work on the measurement of violence against women since 1998, developed and tested new instruments for measuring VAW cross-culturally, as well as ethical and safety standards for research on VAW.

In 2016, WHO Member States endorsed the *Global plan of action on strengthening the health system role in addressing violence, in particular against women and girls, and against children* (WHA Resolution 69.5) Improving the collection and use of data was one of its four strategic directions and included: a)
Developing and disseminating harmonized indicators and measurement tools to support Member States in collecting standardized information on VAWG; b) Supporting Member States to implement population-based surveys on VAW; c) Building capacity in the collection, analysis and use of data; d) Regularly updating estimates of the prevalence of VAW.

**UNICEF** is responsible for global monitoring and reporting on the wellbeing of children. It provides technical and financial assistance to the Member States to support their efforts to collect quality data on violence against children, including through the UNICEF-supported Multiple Indicator Cluster Surveys (MICS) household survey program. UNICEF develops standards, tools, and guidelines for data collection. Furthermore, it compiles statistics on violence to make internationally comparable datasets publicly available, and it analyses such data which are included in relevant publications, including in its flagship publication, *The State of the World’s Children*.

**UN Women** is committed through the conjunction of its triple mandate of normative support, UN coordination, and operational activities to work at the global, regional, and country-level to support the Member States in filling critical gaps in generating and using data, statistics, evidence, and analysis on gender equality in crucial areas. The organization supports the Member States in setting norms that include global standards. It conducts research, and compiles and provides evidence, including good practices and lessons learned, to inform intergovernmental debates and decisions; that help design specific policies and development plans at the regional, national, and local levels as part of its operational activities. It also assists in implementing norms and standards through its country programmes. In addition, UN Women leads and coordinates the UN system’s work in support of gender equality and the empowerment of women.

**The Statistics Division of the Department of Economic and Social Affairs (UNSD)** helps the Member States to build sound national statistical systems, which includes solid institutional infrastructures, systematic data collection activities, the compilation of aggregate macroeconomic, social, and environment statistics according to global standards and norms, and a multichannel data dissemination system. In the area of methodological work, the Division develops international statistical standards and methods essential for the compilation of reliable and comparable statistics and methodological guidelines for the collection, processing, analysis, and dissemination of data. The Division has unparalleled recognition around gender statistics. Over the past 4 decades, it has supported countries in their efforts to produce and use high quality and timely gender data for better evidence-based policymaking; developed and promoted standards and methodological guidelines addressing emerging issues of gender concern; produced the World’s Women report every 5 years, and compiled gender statistics and facilitated access to data. ([https://unstats.un.org/unsd/demographic-social/gender/](https://unstats.un.org/unsd/demographic-social/gender/)).

**UNODC** – as custodian of the UN standards and norms in crime prevention and criminal justice, UNODC assists the Member States in reforming their criminal justice systems to be effective, fair, and humane for the entire population, including women and girls. UNODC develops technical tools to assist Member States in implementing the UN standards and norms and supports the Member States through the provision of technical assistance in crime prevention and criminal justice reform. It does so through several Global programs and the UNODC field office network.

**UNFPA** - is the United Nations sexual and reproductive health agency. Our mission is to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled. The agency collects and facilitates the gathering of the most accurate population data available to
empower countries to make informed decisions on crucial development issues and humanitarian response. Its Population Data strategy addresses long-standing shortfalls in population data and related human capacity. The strategy seeks to expand the scope and quality of modern census and registry data, increase the use of geo-referenced population data to accelerate progress towards the SDGs, and advance the objectives of its mandate. The agency provides census technical support to more than 125 countries, through strong partnerships with governments, UN country teams, the US Census Bureau, and the population and data sectors worldwide. Census data provide the denominators for computation of many of the Sustainable Development Goals (SDGs) and a basis for weights when calculating regional and global aggregates of various indicators, including SDGs.

4. Other methodological considerations

4.a. Rationale

Intimate partner violence is one of the most common forms of violence that women face globally. Given prevailing social norms that sanction male dominance over women, male violence towards their female intimate partners is often perceived as an ordinary/normal element of relationships in the context of marriage or other unions/relationships. Violence against women is an extreme manifestation of gender inequality and discrimination.

Prevalence data are required to measure the magnitude of the problem; understand the various forms of violence and their consequences; identify groups at high risk and explore the barriers to seeking help to ensure that the appropriate responses are being provided. These data are the starting point for informing laws, policies and developing effective responses and prevention programs. They also allow countries to monitor change over time and optimally target resources to maximize the effectiveness of interventions (especially in resource-constrained settings).

4.b. Comment and limitations

Comparability:
The availability of comparable data remains a challenge in this area as many data collection efforts have relied on different survey methodologies, or used different definitions of partner or spousal violence and recall periods (e.g., different definitions of “lifetime”). Many survey measures and/or reports lack disaggregation by different forms of intimate partner violence (physical, sexual, psychological). There are often differences in survey question formulations and/or denominators e.g. all women [various age ranges], or only ever-married/partnered or currently married/partnered women). There is also heterogeneity in age groups sampled and reported on. The quality of interviewer training also likely varies, although this is difficult to quantify. Willingness to discuss experiences of violence and understanding of relevant concepts may also differ according to how the survey is implemented and the social/cultural context, and this can affect reported prevalence levels.

Given the wide variations in methodologies, measurement, and quality across studies from different countries, statistically adjusted estimates are currently needed to ensure comparability across countries and regions. However, generating estimates is an interim solution and individual countries need to collect robust, internationally comparable, high-quality data that reflect the relevant socio-economic, political and cultural risk, and protective factors associated with the prevalence of violence against women (VAW) to inform appropriate policy responses and programmatic decision-making. As more countries adopt
international recommendations and guidelines, including the key elements described in this document, the need for adjustments for estimates for global monitoring will be greatly reduced.

**Regularity of data production:**
Since 2000, only about 78 countries have conducted more than one survey on VAW. Obtaining data on VAW is a costly and time-consuming exercise, whether they are obtained through stand-alone dedicated surveys or modules in other surveys. Demographic and Health Surveys (DHS), the main source of data for low- and lower-middle Income Countries (LMICs), are conducted every 5 years or so and dedicated surveys, if repeated, are conducted usually with less periodicity than this. Monitoring this indicator with certain periodicity may be a challenge if sustained capacities are not built and financial resources are not available for regular surveys. At the same time prevalence is unlikely to change from year to year so, depending on resources, every 3-5 years is recommended.

**Feasibility:**
This indicator calls for global reporting on three types of intimate partner violence (IPV): physical, sexual, and psychological. While there is global consensus on how physical and sexual IPV are generally defined and measured, psychological partner violence—is conceptualized differently across cultures and in different contexts. This indicator therefore currently reports on physical and/or sexual intimate partner violence only. Efforts are underway by custodian agencies to develop a global standard for measuring and reporting psychological IPV. This will enable reporting on the three stipulated types of partner violence in the future.

Similarly, this indicator calls for global reporting of violence ever-partnered women aged 15 years and above have been subjected to. Most data come from DHS, which typically sample only women aged 15-49, and there is a lack of consistency in the age range of sample populations across other country surveys. For those surveys that interview a sample of women from a different age group, the prevalence for the 15-49 age group is often published or can be calculated from available data. The global indicator therefore currently reports on both violence ever-partnered women 15-49 years of age and 15 years and older have been subjected to. Given the existing limited data availability on violence against women aged 50 years and older, efforts are underway by the custodian agencies to improve the measurement and encourage increased availability of data for women of this age group. This will enable a better estimation of the extent of this problem and understanding the experiences of partner violence for women over 50.

**4.c. Method of computation**

This indicator calls for breakdown by form of violence and by age group. Countries are encouraged to compute prevalence data for each form of violence as detailed below to assist comparability at the regional and global levels:

1. **Physical intimate partner violence:**
   Number of ever-partnered women (aged 15 years and above) subjected to any act of physical violence by a current or former intimate partner in the previous 12 months divided by the number of ever-partnered women and girls (aged 15 years and above) in the population multiplied by 100.

2. **Sexual intimate partner violence:**
   Number of ever-partnered women (aged 15 years and above) subjected to any act of sexual violence by a current or former intimate partner in the previous 12 months divided by the number of ever-partnered women (aged 15 years and above) in the population multiplied by 100.
3. Psychological intimate partner violence:
Number of ever-partnered women (aged 15 years and above) subjected to psychological violence by a current or former intimate partner in the previous 12 months divided by the number of ever-partnered women (aged 15 years and above) multiplied by 100.

4. Any form of physical and/or sexual intimate partner violence:
Number of ever-partnered women (aged 15 years and above) who experience physical and/or sexual violence by a current or former intimate partner in the previous 12 months divided by the number of ever-partnered women (aged 15 years and above) multiplied by 100.

5. Any form of physical, sexual and/or psychological intimate partner violence:
Number of ever-partnered women (aged 15 years and above) subjected to any act of physical, sexual and/or psychological violence by a current or former intimate partner in the previous 12 months divided by the number of ever-partnered women (aged 15 years and above) multiplied by 100.

NOTE: To assist comparability at the regional and global level, and due to more comparable data available, countries are encouraged to additionally compute the above figures for ever-partnered women aged 15 to 49. Regional and global reporting on this indicator currently only includes data computed by countries for #4 above (i.e., any form of physical and/or sexual partner violence), and for both the 15-49 and the 15 years and older age groups). For further details, see Feasibility section above.

4.d. Validation
A country consultation on the intimate partner violence (IPV) estimates was conducted in early 2020. All countries received their country profile which included their data sources, estimate, and a technical note explaining the methodology (available in six official languages). The consultations ensured: i) countries had the opportunity to review their nationally modeled IPV estimate and the data sources (surveys/studies) used in the production of these estimates, ii) the identification of any additional surveys/studies that met the inclusion criteria (i.e published between 2000-2018, used acts-based measures of IPV, nationally or subnationally representative) but which may not have been previously identified; and iii) familiarize countries with the statistical modeling approach used to derive the global, regional, and national estimates.

4.e. Adjustments
There have been significant improvements in the measurement, availability, and quality of population-based survey data on intimate partner violence (IPV) globally. However, substantial heterogeneity remains in how national surveys and studies measure the different forms of intimate partner violence against women (VAW). For international comparability, data are statistically adjusted to ensure harmonization concerning: definitions (e.g. severity); age groupings (5 year age groups and aggregate 15 to 49 or 15 years and above), type of IPV (physical IPV only or sexual IPV only), the perpetrator of partner violence (spouse only or spouse/partner; current or most recent spouse/partner only or any current or previous spouse/partner), sample profile (ever-married/partnered women or currently-married/partnered women or all women) and geographical scope (national or sub-national, rural, urban).

4.f. Treatment of missing values (i) at country level and (ii) at regional level

- At country level
When data for a country are entirely missing, no country-level estimate is published.
At regional and global levels
Imputations are made in cases where country data are not available for the purposes of regional and global figures. The number of countries included in the average and with data available is clearly indicated by SDG region.

4.g. Regional aggregations
Global aggregates are weighted averages of all the countries that make up the world. Regional aggregates are weighted averages of all the countries within the region. Weights used are the population of women aged 15 to 49 from the most recent 2019 revision of the World Population Prospects. Where data are not available for all countries in any given region, regional aggregates may still be calculated. The number of countries included in the average is indicated.

It should be noted that regional and global figures should be interpreted with caution, as they do not necessarily represent with accuracy the region or world, especially for regions where population coverage is below 50 percent.

Custodian agencies, in consultation with the Member States, have produced-to-date global, regional, and country estimates, enhancing the quality and accuracy of 5.2.1 reporting and addressing the comparability challenges outlined above. These new regional and global estimates (2018) are included in this round and form a baseline for the monitoring of progress. These are also available for World Bank, Global Burden of Disease and individual agency regions.

4.h. Methods and guidance available to countries for the compilation of the data at the national level
Countries gather data on intimate partner violence (IPV) through (1) specialized national prevalence surveys dedicated to measuring violence against women (VAW), (2) VAW modules that are added to international/national household surveys, such as the DHS; and (3) crime victimization surveys. Although administrative data from health, police, courts, justice, and social services, among other services used by survivors of violence, can provide information on VAW, these do not provide prevalence data, but rather incidence data or service use (i.e., number of cases received in/who seek services). Many women who are subjected to abuse do not report or seek help for the violence and those who do, tend to be the most serious cases. Therefore, administrative data are not recommended as a data source for this indicator.

For more information on recommended practices in the production of VAW statistics, see UN Guidelines for Producing Statistics on Violence against Women- Statistical Surveys (UN, 2014). The WHO with other co-custodians are finalizing a “Quality checklist for surveys on IPV against women” as a tool for strengthening country capacity in collecting and reporting high-quality data on violence against women.

4.i. Quality management
The identification of surveys and entering of data in the database was independently checked by 2 or 3 people and consistency checks were carried out by 2 analysts. The estimates followed the Guidelines for Accurate and Transparent Health Estimates Reporting (GATHER) and were reviewed by WHO’s Data Department and reviewed by the other co-custodians.
4.j Quality assurance

The Interagency Working Group on Violence against Women Data, which comprises all custodian agencies for this SDG indicator, thoroughly reviews all country data, including its primary source when deemed necessary, to assess quality and comparability based on exclusion/inclusion criteria agreed upon a priori. These criteria refer to, inter-alia, survey population coverage, operational definitions, methodology, and period. All data points have been discussed and a consensual decision made for every data point included/excluded from the current SDG Indicators Database.

In 2020, a country consultation and validation process of data compiled by custodian agencies for this indicator was undertaken, including with identified SDG indicators focal points and focal points in other relevant ministries.

4.k Quality assessment

The estimates on physical and/or sexual intimate partner violence against women were based on the Global Database on the Prevalence of Violence against Women (housed at WHO). Studies included within this database were identified through a comprehensive systematic review of published global prevalence data, metadata repositories of national statistics offices and through the country consultation process as explained below.

Informed by international guidelines on the survey measurement of violence against women, including the Guidelines for Producing Statistics on Violence against Women- Statistical Surveys (UN, 2014) only population-based studies, representative at national or subnational level that used the ‘gold standard’ act-specific measures of IPV were eligible for inclusion. This criterion aimed to minimise the under-estimation of the prevalence of IPV that is associated with the use of broader non-acts-based measures. Data extractions were conducted by two data analysts independently and underwent additional quality control and rigorous consistency checks by a third reviewer.

The United Nations Inter-Agency Working Group on Violence Against Women Estimation and Data (VAW-IAWGED) guided the process of developing the estimates and reviewed the Technical Note for the country consultation and published estimates’ report. The independent external Technical Advisory Group (TAG) to the VAW-IAWGED provided expert advice and input throughout the process of developing the methodology and the estimates.

In addition to the above, and in line with WHO’s quality standards for data production and publication a formal country consultation process was conducted with 194 Member States and one territory (occupied Palestinian territory). The purpose this consultation process was to (i) to ensure that countries had the opportunity to review their national modelled intimate partner violence estimates and the data sources (surveys/studies) used in the production of these estimates; (ii) to ensure the inclusion of any additional surveys/studies that met these inclusion criteria but not been previously identified; and (iii) to familiarize countries with the statistical modelling approach used to derive the global, regional and national estimates.

5. Data availability and disaggregation

Data availability:
Since 2000, 161 countries have conducted violence against women (VAW) national or subnational prevalence surveys or have included a module on VAW in a DHS or other national household surveys. However, not all these data are comparable and in many cases, they are not collected on a regular basis.

**Time series:**
Some countries (~77) have data on physical and/or sexual intimate partner violence for two or more time points. Global time series with comparable data are not yet available.

**Disaggregation:**
In addition to form of violence and age, income/wealth, education, ethnicity (including indigenous status), disability status, marital/partnership status, relationship with the perpetrator (i.e., current/former partner), geographic location, migration status, and frequency of violence are suggested as desired variables for disaggregation for this indicator. Though disaggregated data by these variables is not yet feasible to report on at regional and global levels, countries are encouraged to report these levels of disaggregation in their national reports; and—whenever possible—include these data for the age group 15 to 49.

### 6. Comparability / deviation from international standards

**Sources of discrepancies:**
All available survey data sources that are representative at the national and subnational level, are used to generate the prevalence estimates. The data are from published survey reports and/or data and datasets provided by countries. In cases where only data disaggregated by violence type were presented in the report, microdata was used to calculate the aggregate measure of physical and/or sexual intimate partner violence (IPV). As there is variability in the measurement across surveys and countries, relevant covariate adjustments were made to enhance comparability. These include adjustments for case definitions (e.g. severity), type of violence (i.e. physical IPV only or sexual IPV only), population surveyed (e.g. currently married women only or all women), reference partners (e.g. current/most recent partners), and geographical strata (rural or urban), aggregate measure of physical and/or sexual IPV where only one of the two forms were available.

### 7. References and Documentation

**URL:**

https://srhr.org/vaw-data

http://evaw-global-database.unwomen.org/en
data.unicef.org


**References:**


4. World Health Organization, Department of Reproductive Health and Research, London School of Hygiene and Tropical Medicine, South African Medical Research Council, 2013. Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence. Available at: https://www.who.int/publications/i/item/9789241564625


7. UNSD Portal on the minimum set of gender indicators: https://genderstats.un.org/#/home

8. UNSD dedicated portal for data and metadata on violence against women: http://unstats.un.org/unsd/gender/vaw/