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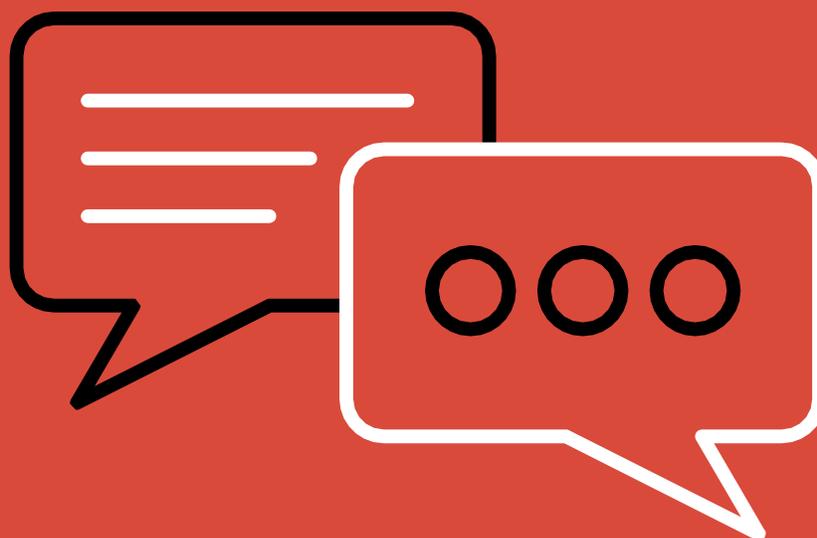
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# Chat and Text Advocacy Services for Survivors of Interpersonal Violence: An Implementation Guide



**SAFE** | stop abuse for  
everyone



The University of Texas at Austin  
Steve Hicks School of Social Work

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# Chat and Text Advocacy Services for Survivors of Interpersonal Violence: *An Implementation Guide*

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# Introduction

Fueled by service delivery changes during the COVID-19 pandemic, development of **chat and text hotlines** has accelerated exponentially in the last two years, and are now implemented in a variety of local, state, national, and global violence-focused agencies. This emerging modality represents a shift in service provision to meet survivors of violence “where they are” in terms of communication preferences, and to provide a trauma-informed digital space for support. Chat and text hotlines provide a community forum for education and resource access, especially when linked to longer-term supportive services. Despite the documented need for this service and increased use during the pandemic, there is little guidance for the implementation and sustainability of chat/text hotlines for victims of crime, especially those maintained by local agencies. As a result, we created **this guide** to provide an overview of chat/text services developed from our evaluation of a chat/text hotline, SAFELine in Austin, Texas, and to provide a map to aid the implementation, service approach, and evaluation of chat/text hotline services for survivors of violence and community members supporting victims. Agencies with and without chat and text services may find this document helpful in considering program training, quality, and impact assessment.

**Sections at-a-glance:** This guide includes the following sections:

- **Section one:** Advocacy. This section includes an overview of advocacy models, a glossary of types of violence experiences addressed by services, and practice approaches the guide advocacy. Advocacy is an evidence-based practice provided in many formats to address the impacts of interpersonal violence and prevent future harm.
- **Section two:** Hotlines. This section provides an overview of hotline services, the increasing implementation of technology-based services, and a summary of the research activities conducted in this evaluation to develop the materials in this guide. Hotline services have been used for decades to help victims of crime, but chat and text applications are newer and need evaluation.
- **Section three:** SAFELine model. This section includes information about chat/text service use and a detailed breakdown of the five goals that guide chat and text services and accompanying advocate skills at SAFELine, as developed by the evaluation project. The five goals of SAFELine are 1). Rapid engagement for support and connection; 2). Identification of needs and options; 3). Expanded understanding of violence, abuse, and harm through education; 4). Improved survivor safety and 5). Increased access to timely supports. An outline of digital-specific skills for chat-and text-based advocacy services is located in this section.
- **Section four:** Experience. This section is a summary of this evaluation’s findings on service user experiences and SAFELine potential program outcomes, as well as a discussion of five barriers to quality in chat- and text service provision. The SAFELine evaluation found the service to be helpful in building connections, increasing resources, and addressing safety needs of survivors. Addressing barriers, such as service access and advocate quality, helps make the service more useable.
- **Section five:** Strategies. This section outlines the strategies this evaluation identified for effective implementation of chat and text advocacy services, including safety considerations, platform selection, costs, staff training and hiring practices, and population-specific guidance for service provision. Ongoing training and supervision are critical to chat and text hotline services.
- **Section six:** Evaluation. This section is a summary of techniques and best practices to evaluate and monitor chat- and text-based hotline services. This section includes an overview of tools (including those used in this evaluation), key data points, ethical considerations in evaluation, and further reading and resources. Tools used for the evaluation can be found in the appendices.

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# Section One:

## Advocacy for Interpersonal Violence Survivors

### What are advocacy services for survivors of violence?<sup>1</sup>

Offered in community programs, criminal justice agencies, and school/university settings, **advocacy** is a supportive service model for people who have experienced violence/harm. Advocates work collaboratively with survivors to help meet goals, gain resources and social support, and address safety and health concerns. While sometimes compared to case management or crisis intervention, advocacy is different because the focus is on both micro (individual) strategies and macro (community and environmental) strategies to end violence and improve the lives of survivors (Sullivan & Goodman, 2019).

Advocacy is for survivors of violence, including:

- **Intimate partner violence (IPV)**  
Intimate partner violence (sometimes called domestic violence) encompasses physical, psychological, sexual, stalking, and financial harm from one intimate/dating partner to another. Partners may use power and coercive control to dominate, monitor, or intimidate another partner. The Centers for Disease Control and Prevention (CDC) estimate that 36% of U.S. women (43.6 million) and 33% of U.S. men (37.3 million) experience sexual violence, physical violence, or stalking by an intimate partner during their lifetime. (Smith et al., 2018).
- **Sexual Assault**  
Sexual assault, including rape and attempted rape, is unwanted sexual contact that happens without consent, through tactics such as coercion, incapacitation, and force. The CDC estimates that 44% of U.S. women (52 million) and 25% of U.S. men (27.6 million) experience some form of sexual violence in their lifetime (Smith et al., 2018).
- **Teen Dating Violence**  
Teen dating violence (TDV), similar to IPV, is violence, power, and control from one adolescent/emerging adult partner to another adolescent/emerging adult partner. TDV is a major public health concern and considered an adverse childhood experience, or ACE (Felitti, 2019). Approximately 1 in 11 female and 1 in 14 male high school students have experienced physical dating violence in the last year and about 1 in 8 female and 1 in 26 male high school students have experienced sexual dating violence in the last year (Smith et al., 2018). Additionally, 26% of women and 15% of men who have experienced physical violence, sexual violence, or stalking in their lifetime, first experienced partner violence before the age of 18 (Smith et al., 2018).

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<sup>1</sup>A note on terms: We use the term “service user” to refer to people who engage in services on SAFELINE. While most people who use SAFELINE are survivors or victims of crime, some are *informal* supports to survivors (friends, family, partners) or *formal* supports (social workers, medical personnel, volunteers). We use the phrase “service user” to be inclusive of all engagements.

- Stalking**  
 Stalking is unwanted conduct or surveillance that makes one person feel afraid for their own safety or the safety of someone close to them. In the U.S., nearly 1 in 6 women (19 million) and 1 in 17 men (6.4 million) have experienced stalking at some point in their lifetime that made them feel very fearful or believe that they or someone close to them would be harmed or killed (Smith et al., 2018).
- Elderly Abuse**  
 Elder abuse includes physical, sexual, psychological, financial harm, and neglect to persons 65 and older and/or vulnerable or disabled adults. Elder abuse prevalence rates range from 10-47% of adults 65 and older (Dong, 2015).
- Child Maltreatment**  
 Child abuse, including physical, medical, psychological, and sexual harm, as well as neglect, are forms of child maltreatment. About 1 in 7 children have experienced child abuse or neglect in the past year (CDC, 2021). In 2019, over 650,000 children in the U.S., were confirmed by child protective services as victims of maltreatment (HHS, 2019).
- Human Trafficking**  
 There are two primary types of human trafficking: sex trafficking and labor trafficking. Sex trafficking is a type of human trafficking that uses force, fraud, or coercion to make an adult (age 18 and older) engage in commercial sex acts. For youth (under age 18), any time an individual engages a child in a commercial sex act it is considered sex trafficking even without elements of force, fraud, or coercion (HHS, 2020). Labor trafficking is the recruitment, harboring, transportation, providing, or obtaining of a person for labor or services through force, fraud, or coercion (U.S. Trafficking and Violence Protection Act, 2000). In 2019, 22,326 survivors (adult and child) of human trafficking (both labor and sex) were identified to the National Human Trafficking Hotline (Polaris, 2019).

Advocacy may be a good service model for other types of violence and harm, such as family violence and property crimes. Most of what we know about advocacy comes from work with IPV and sexual assault survivors.

### What do advocates do?

Advocates work with survivors to address their needs and goals *as survivors define them for themselves*. Some of the most common things advocates help with include:

- Resource provision:** Identifying resources and referrals to help with survivor needs, including safety, material support, health care, housing, and jobs.
- Safety planning:** Working with survivors to identify and address safety concerns from both the person using violence, and the environment around them (Davies & Lyon, 2014).
- Emotional support and connection:** Offering non-judgmental support with sympathy, empathy, and validation after violence, as well as connecting survivors to other sources of support to relieve isolation from abuse.
- Education:** Providing information to survivors and community members about violence, relationships, prevention strategies, and health.

- **Collaboration and representation:** Working with survivors, community partners, and policy makers to prevent and reduce violence, represent survivor needs, and improve programs and policies to lessen the impacts of violence.

### Practice approaches guiding advocacy

Advocacy may vary in setting, modality, and skills used. Advocacy approaches – especially high-quality ones – are typically **survivor-centered**; that is, service users lead the interaction, choose the course of services, and set their own goals, rather than having an agency or worker-driven agenda pushed on them (Davies & Lyon, 2014; Goodman et al., 2016a). Guiding principles of high-quality advocacy include:

- **Low-barrier:** Easy to access with minimal eligibility criteria and little-to-no wait.
- **Voluntary:** Service engagement is not mandated and survivors can choose to use services as they need them.
- **Trauma-informed:** Advocacy services for interpersonal violence survivors are provided in a trauma-informed way, applying six key principles outlined below (Substance Abuse and Mental Health Services Administration (SAMSHA), 2014):
  - **Empowerment:** Experiences of violence, oppression, and control can limit personal power and agency. Advocates help center survivor voice and choice by working from an empowerment-based perspective.
  - **Safety:** Services are offered in a manner that are both physically and emotionally safe, and survivors are able to define their own safety risks. Services focus on meeting safety needs and reducing risks for harm.
  - **Peer support:** Advocates engage with survivors to build supportive connections with informal networks and with other people who share their lived experiences.
  - **Collaboration:** Using a survivor-centered approach, advocates collaborate with survivors to address their needs and identify solutions. Advocates also collaborate with service providers to make the community safer and more supportive of survivors.
  - **Attention to cultural, historical, and gender issues:** Discrimination is intertwined with violence experiences. Advocates provide services with respect to survivor cultural ties, experiences of oppression, and identity positions. A social justice framework that acknowledges and addresses the intersection of interpersonal violence and oppression is critical to advocacy work.
  - **Trustworthiness and transparency:** Communication to build trust is facilitated by transparency about advocacy services and roles. Boundaries are communicated clearly and respectfully to survivors and are consistently implemented. Trust and transparency helped to build an *alliance* between the survivor and advocate, which is an essential component of impactful services (Goodman et al., 2016b).

### Why do we need advocacy services?

#### ***Interpersonal violence has economic, psychological, emotional, and spiritual impacts***

Impacts of interpersonal violence include injury, illness, death, and negative mental health symptoms, like anxiety and depression (Black et al., 2011), job loss, and housing instability (Pavao et al, 2007; Rollins et al., 2012). Further, trauma and harm create generational consequences that merit intervention to build protective strategies and reduce risk factors. Survivors need safety, resources, and support to heal from violence impacts.

#### ***The causes and consequences of interpersonal violence are socioecological***

Individual and relational strategies, like counseling and case management, have typically been applied to address the impacts of interpersonal violence, but lack understanding of the broader experiences of

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survivors. The community, including neighborhoods, schools, social services, along with broader environment conditions, like poverty, systemic racism, and homophobia, contribute to increased risk for interpersonal violence, but also to solutions to address these types of harm. Advocacy applies relational, community, and environmental strategies to address survivor needs, enhance formal and informal support networks, and improve community safety and connection through education, policy making, and representation at the micro and macro level.

### ***Advocacy is evidence-based***

Previous research has found that advocacy services for IPV and sexual assault survivors are connected to decreased violence, increased safety, decreased negative mental health symptoms, increased social support, and improved quality of life (Goodman et al., 2016b; Lyon et al., 2008; Rivas et al., 2015; Sullivan & Bybee, 1999; Sullivan & Virden, 2017; Wathen & MacMillan, 2003; Wood et al., 2020a).

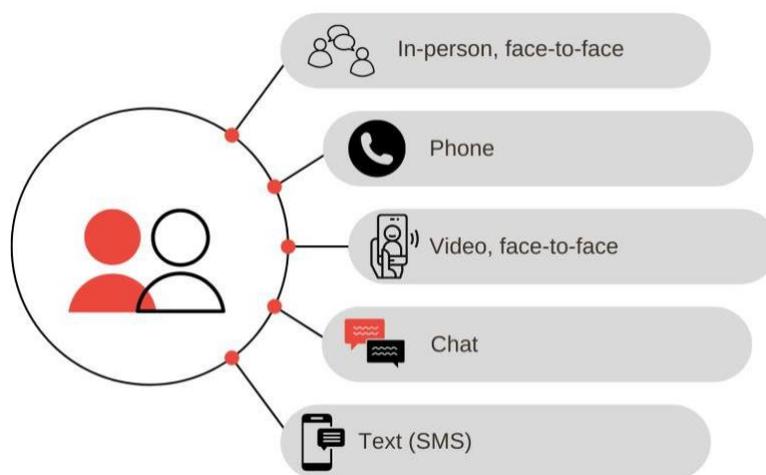
### **Where is advocacy provided?**

Advocacy services may be offered in the following locations:

1. **Emergency shelter**, a short-term housing model focused on immediate safety and stabilization for survivors of violence and their children.
2. **Housing programs**, such as transitional and rapid rehousing vouchers, where longer-term residential services are provided to survivors to address ongoing needs and longer-term impacts.
3. **Non-residential centers**, a model for violence survivors in the community that need supportive services to increase resources, plan for safety, and build social networks.
4. **“Mobile” advocacy**, where advocates meet survivors at a location of their choice in the community to provide services and support.
5. **Home-based services**, including visiting programs, where survivors engage with advocates on issues focused particularly on children, families, and parenting.
6. **Phone, chat, text and video hotline**, including global, national, state, and local helplines for survivors of violence.
7. **In co-located collaborations**, such as child protective services, schools, and college campus.

### **How is advocacy provided?**

Advocacy is provided in multiple ways including:



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## Section Two:

### Hotline/Helpline Advocacy

#### **History and scope of hotline/helpline services**

Advocacy services has long been a cornerstone of interpersonal violence service provision. One of the most common modalities to providing timely services to survivors and community members is phone-based hotlines (sometimes called help or crisis lines). Phone technology has been used for decades to provide immediate support to survivors of violence, community members, law enforcement, and social service workers. Hotlines are traditionally a primary access point for connection to formal support services for survivors, such as shelter, counseling, and legal advocacy. Hotlines are offered in both a national format, such as the National Domestic Violence Hotline (NDVH), or as an extension of a local community agency or college campus-based program. The national hotline was created as part of the Violence Against Women Act (VAWA) of 1994 and took its first call in 1996 (NDVH, 2020). The majority of local IPV and sexual assault programs operate a 24-hour, 7 day a week hotline (Bennett et al., 2004). The National Network to End Domestic Violence (NNEDV) 2020 annual census of IPV services reported that across the nation, local IPV-focused agencies answered 21,321 hotline calls over a single 24-hour period. An estimated 31% of agencies offer text-based helplines and 18% have chat helplines (NNEDV, 2020).

Hotlines are often used when individuals are in acute distress, and can also provide a gateway to longer-term interventions (Grossman et al., 2019). Hotlines are an effective intervention on their own as they are a short-term, free, and accessible service in particularly critical moments of an individual's life (Grossman et al., 2019; Kinzel & Nanson, 2000). Service approaches on hotlines include establishing rapport, exploring needs and goals, providing service options, and determining wellness and coping strategies (Finn & Hughes, 2008; Kalafat et al., 2007). Hotlines have the potential to reach individuals that have previously not sought formal support services (Finn & Hughes, 2008) and increase survivors' knowledge about how and where to seek services (Bennett et al., 2004). Previous evaluations of hotlines have shown that these services increase self-efficacy among survivors and improve connections with informal support systems (e.g. family, friends, caregivers) (Hodgson et al., 2021).

#### **Hotline goes digital: Chat and text**

Over the past decade, in response to the rapid increase of internet and smartphone use, interpersonal violence focused agencies have increasingly implemented digital hotline platforms that use chat and text messaging services to reach individuals more comfortable with technology-based interactions (Brody et al., 2019; Nesmith, 2018; Rempel et al., 2018; Wood et al., 2021). Chat and text services can be accessed using a laptop or smartphone that has access to the internet or via cell phone messaging services using any phone with the ability to text (NNEDV, 2019). Digital, or virtual, services are becoming a preferred way to reach out for help, especially for younger generations (Budinger et al., 2015). Individuals that wish to remain anonymous may choose to engage in digital crisis intervention services (Szyk et al., 2020). Chat and text services allow people to reach out inaudibly, potentially providing a safer way to reach out for those with active safety concerns (Budinger et al., 2015). As the gap between individuals that have broadband access at home and those who do not shrinks (Dolcini et al., 2021; Lenhart, 2010; Strasburger et al., 2009), technology-based communication is becoming more accessible to typically marginalized communities. The use of chat and text services, along with video platforms such as Zoom,

increased rapidly during the COVID-19 pandemic, as IPV and sexual assault agencies pivoted to meet survivor needs during stay-at-home orders (Wood et al., 2020b).

### **Why offer chat and text services?**

Offering chat and text hotline services is an opportunity to reach more service users by increasing communication options. Potential benefits of chat and text include extending program reach to populations such as:

- **Individuals that are D/deaf and hard-of-hearing**, who may prefer text/chat-based communication over a telecommunications relay system.
- **Those who cannot audibly ask for help because of safety reasons**, such as being quarantined with an abusive partner during COVID-19, or confined in a location with someone using violence.
- **Adolescents and emerging adults**, who may prefer this communication modality. Chat- and text-based communication is highly popular among adolescents and emerging adults (age 18-25). Youth and emerging adults (age 18-25) may be more likely to use chat and text services and discuss difficult or distressing issues via chat or text (Glasheen et al., 2016; Haner & Pepler, 2016).
- **Those who have experienced trauma and are not comfortable verbalizing requests**, for help but feel comfortable typing it out. Across the lifespan, some violence survivors may not feel able to reach out by phone to verbally express their experience, but may be more likely to chat or text.

### **Summary of Evaluation of Technology-based Advocacy Services (ETA) Project**

This guide was developed from the *Evaluation of Technology-based Advocacy Services (ETA)* project, a formative evaluation of SAFEline, the phone, chat, and text service of SAFE Alliance in Austin, Texas. SAFE Alliance was formed in 2017 through a merger of two long-standing central Texas agencies, SafePlace and Austin Children's Shelter. The merger aimed to provide streamlined, integrated services for those affected by myriad and interrelated types of interpersonal violence, abuse, and exploitation that affect individuals across their lifespan. In addition to SAFEline, SAFE Alliance provides a variety of services for both adult and youth survivors of violence and abuse, including emergency shelter and longer-term transitional housing services, counseling, financial and legal advocacy, sexual assault forensic nursing, foster and adoption services, and an onsite school. SAFE also provides prevention and outreach services to the community, including programs designed specifically for teens, individuals with disabilities, individuals that are D/deaf and hard-of-hearing, and parents and families with multiple stressors or involved in the child welfare system.

SAFEline provides 24/7 phone, chat, and text support to survivors, offering crisis intervention, safety planning, emotional support, screening for admission to most SAFE services, as well as information and referrals. Accessed through a phone, the SAFE website, and/or via text, SAFEline serves as a safe and private way for survivors to connect with advocates. SAFEline is the only bilingual (English/Spanish) call/chat/text line in Travis County, Texas, home to the state capitol, Austin. The Austin metro area has over 2 million people, with 72.6% of the population identifying as white and 33.9% identify as Hispanic or Latino, and 7.8% identify as black (U.S. Census, 2019). SAFE is the major violence prevention and intervention agency in the Austin area. SAFEline is available for anyone that is experiencing or has experienced previously, interpersonal violence including IPV, teen dating violence, sexual assault, child maltreatment, and human trafficking. Additionally, individuals use SAFEline for information and resources on parenting, general questions about SAFE Alliance, and relationships. Individuals

experiencing violence, formal and informal supports of survivors, and people using violence may use SAFELine services.

SAFE's phone-based helpline started as a hotline for shelter services, and evolved into its own program at SAFE that works to provide information and access to the range of services offered by SAFE Alliance. In 2015, SAFE identified the need to add chat and text services to the phone-based hotline, planning for the implementation of chat/text services occurred over the next year, and in December 2015, SAFELine began a chat line with limited weekday and weekend hours. In January 2018, full 24/7 text and chat services began at SAFELine.

SAFELine staff and researchers from the University of Texas at Austin (UT) and the University of Texas Medical Branch (UTMB) partnered to conduct an evaluation of chat and text advocacy services. This study encompassed a formative evaluation that used both quantitative and qualitative methods to understand 1) How technology-based advocacy is being implemented at SAFELine and used by SAFE Alliance to provide support to service users; 2) How advocacy models to support survivors are being adapted for different technological platforms; 3) Service users of technology-facilitated advocacy, their needs, and experiences seeking services; and 4) Agency and community supports and resources that are needed to implement technology-based advocacy, and conduct subsequent process and outcome evaluations.

Five streams of data were collected for the evaluation:

- **392 de-identified chat and text session transcripts** from chat and text services at SAFELine.
- **SAFELine program information** including service use numbers, programmatic documents, and training materials. Over 150 articles and books about violence, services, and technology were also reviewed.
- **Semi-structured interviews** with 17 staff advocates and managers.
- **Semi-structured interviews** with 50 SAFELine service users and prospective service users.
- **Brief surveys** with 171 SAFELine chat/text service users completed after a session.
- **Listening sessions** of 42 calls with SAFELine managers to observe phone advocacy methods.

Data were analyzed using thematic and content analysis for qualitative data and descriptive and bivariate analysis for quantitative methods.

## Section Three:

### Goals and Skills Used in Chat and Text Advocacy

#### Chat/text service use at SAFeline

SAFeline service data illustrates the high volume of contacts, that increased during the COVID-19 pandemic from the previous year. Service contacts were highest in 2018-2019, but increased by over 1000 interactions from 19/20 to 20/21.

Table 1: *SAFeline call, text, and chat volume by year (2018-2021)*

<b>March 2018- February 2019</b>	
Calls	16,560
Text	1,349
Chat	1,437
Total Contacts	19,346
<b>March 2019-February 2020</b>	
Calls	15,020
Text	1,078
Chat	1,763
Total Contacts	17,861
<b>March 2020-February 2021</b>	
Calls	15,936
Text	1,620
Chat	1,441
Total Contacts	18,997

Chat and text use at SAFeline has steadily increased since implementation. Chat and text service use increased from March 2020 through February 2021, the first full year of the COVID-19 pandemic, over the previous year.

Table 2: *Chat and Text Volume by Year (2018-2021)*

<b>Year</b>	<b>Chat/Text Session</b>
2018-2019	2,786
2019-2020	2,841
2020-2021	3,061

### Who uses chat/text advocacy?

The vast majority of service contacts on SAFELINE related to IPV, followed by sexual assault. Table 3 below outlines the service user victimization experience by year.

Table 3: *SAFELINE Request Type by Year (2018-2021)*

<b>Service Contacts</b>	
<b>March 2018- February 2019</b>	
Intimate Partner Violence	13,882
Sexual Assault	2,701
<b>March 2019-February 2020</b>	
Intimate Partner Violence	13,307
Sexual Assault	2,182
<b>March 2020-Febraruy 2021</b>	
Intimate Partner Violence	14,104
Sexual Assault	2,236

### What are the needs and concerns of people engaging in services?

In table 4 below, the needs and concerns expressed in chat and text transcripts of chat/text sessions analyzed for the evaluation are listed. The most common need or concerns was legal advocacy, followed closely by emotional support.

Table 4: *Needs and Concerns of Individuals Using SAFELINE*

<b>Need/Concern<sup>2</sup></b>	<b>=n</b>
Legal Advocacy/Legal Aid	89
Counseling/Emotional Support	87
Emergency Shelter	72
Relationship Advice	52
Housing	36
Medical	26
Financial Assistance	4
Childcare	3

Emergency shelter is also a frequent need of SAFELINE service users. Table 5 below lists the number of shelter requests received through SAFELINE (phone/chat/text) for the SAFE Alliance shelter each year (March-February) from 2018-2021.

Table 5: *Annual number of shelter requests from SAFELINE service users*

<b>Year</b>	<b>Shelter Requests</b>
2018-2019	2,666
2019-2020	2,777
2020-2021	2,344

<sup>2</sup> Based on review of text and chat transcripts. Participants may have indicated more than one need.

Shelter requests in the three-year period were highest in 2019/2020, and reduced in 2020/2021. Local and national conditions, such as housing policy and the COVID-19 pandemic, influence requests for emergency shelter at SAFE Alliance.

### **Service approach on SAFELINE**

Analysis of data collected for the evaluation demonstrates that **the SAFELINE chat/text approach is:**

- **Service user-centered:** Participants engaged with advocates on their self-defined goals at their own pace.
- **Trauma-informed:** Advocates acknowledge and center the role of trauma and trauma reactions, and the need for safety, empowerment, and privacy, in their interactions with service users.
- **Social justice-oriented:** Service user identities and cultural ties are valued, and experiences of historical and current oppression are considered in program design, referrals, and advocacy approach.
- **Social presence-facilitated:** Advocates engaged with service users with individualized responses for unique situations, showing their professional personality and authentic human qualities.

### ***Goals and skills guiding chat and text***

The following are goals and skills guiding chat and text hotline advocacy at SAFELINE as developed from evaluation activities, including interviews with staff and service users. Programs considering adding or enhancing chat and text services may choose to use or adapt these goals and skills for their own agency setting and context. These goals and skills may be similar to advocacy on the phone or even in face-to-face communication. Below, we outline the approach with examples from authentic (and de-identified) service interactions. The SAFELINE Logic Model can be found in Appendix A and offers additional details on skills and approaches.

### **Goal One: Rapid engagement for support and connection**

*Chat and text hotline-based advocacy aims to provide a means for survivors of violence to get support quickly, with minimal wait, from a person who responds with kindness and empathy.*

#### **Skills for Goal 1**

- *Welcoming to services and establishing safety*  
“I'm glad you're safe and thank you for reaching out to us. If at any time you need to disconnect, please feel free to do so.” [Chat transcript]
- *Identification of preferred language or communication*  
“Hi there. Are you safe to text?” [Text transcript]
- *Empathic communication*  
“Nobody deserves to be treated that way. I am sorry again that you are going through this.” [Text transcript]
- *Identifying strengths*  
“I understand that. I can't imagine how scary and painful all of this is. Your children deserve to be safe and I know you are doing everything you can to make that happen for them.” [Chat transcript]
- *Establishing boundaries*  
“I do not know much legal stuff that is out of my scope of practice but we do offer free legal aid.” [Text Transcript]
- *Guided call termination*

“I have to free up the chat line now. Thank you for reaching out and I hope your [family members] get in a safe space soon. Feel free to reach out if anything else happens and you have questions.” [Chat transcript]

**Goal Two: Identify needs and options related to violence, abuse, harm, and related concerns**

*Chat and text hotline-based advocacy aims to help survivors of violence and supportive individuals identify options for support and to address needs based on their expressed concerns.*

**Skills for Goal 2**

- *Assessment of needs and goals*  
“Ok, there maybe some information I can provide that might be helpful. Can you tell me a little more about what is going on in your situation?” [Chat transcript]
- *Collaboratively identify options*  
“I can definitely talk with you about what's going on, and maybe explore some options for support!” [Chat transcript]

**Goal Three: Expand understanding of violence, abuse, and harm through community and survivor education.**

*Chat and text hotline-based advocacy aims to serve as a community education tool to increase understanding and knowledge of the impacts of violence, abuse, and harm on survivors, survivor support networks, and community members.*

**Skills for Goal 3**

- *Psychoeducation on violence and impacts*  
“Abusers tend to want power and control over their significant others. This is just one way he may think he is able to hold some sort of control over you. Because this does affect you very negatively :( ” [Chat Transcript]
- *Education on rights*  
“You absolutely deserve to feel safe and secure in your own home. To the best of my knowledge, any apartment complex is required to work with you on breaking your lease at no cost if you have some sort of documentation of the abuse such as a protective order (or a past emergency protective order) or a police report if there was an incident the police got involved with.” [Chat transcript]
- *Identification of wellness and grounding strategies*  
“If you need to give yourself a break from your thoughts, would you feel better having <pet> with you? Are there things you can do to just take care of yourself right now, like watching your favorite movie or listening to music you like?” [Chat transcript]

**Goal Four: Improve survivor safety to prevent future violence and harm.**

*Chat and text hotline-based advocacy aims to improve survivor safety, directly or through a support person, by assessing safety concerns and safety planning.*

**Skills for Goal 4**

- *Crisis de-escalation*  
“There are advantages and disadvantages of working with law enforcement, honestly. I can't tell you to contact the police or not, but I can talk about those advantages and disadvantages with you. Would that be helpful?” [Chat Transcript]

- *Identification of survivor-defined safety and harm-reduction strategies*  
“Oh my gosh, I'm so sorry that happened. You know how to best keep yourself safe and run for it when you have the opportunity. Do you have the option of gathering some things like your wallet/purse, and paperwork, medication, things like that?” [Text transcript]
- *Safety assessment*  
“It sounds like he's definitely capable of harm or at least creating more problems for you. I want you to know that leaving a relationship is almost always the most dangerous time in one's relationship, so if he was going to become violent or the violence was going to escalate, while you're leaving would be the time. So to prepare as much as you can ahead of time is absolutely essential.” [Chat Transcript]
- *Actual or waitlist for emergency shelter*  
“Additionally, if you can call our hotline, we can talk and find out if getting you onto the waiting list for our shelter is a good option for you right now, or if there are other options that would work better for you at this time.” [Chat transcript]
- *Technology safety*  
“I'm glad you're safe and thank you for reaching out to us today. If at any time you need to stop replying do so for your safety. If your abuser checks your phone, please make sure to erase this conversation at the end of our chat.” [Text transcript]

**Goal Five: Increase access to timely supports and address needs by opening door to the agency and beyond.**

*Chat and text hotline-based advocacy aims to provide tangible resources and help support survivors of violence and others impacted by violence, abuse, and harm.*

**Skills for Goal 5**

- *Help-seeking assistance*  
“I cannot make any promises that therapy will stop things, especially not immediately. But our counseling program has lots of positive results they do group and individual counseling for survivors. There are a couple of ways to access our counseling program. First you can call [XXX-XXX-XXXX] and leave a message. Alternatively you can come for a walk-in intake appointment at our campus on [address]” [Text transcript]
- *Identify informal support*  
“Oh, you're welcome. I'm so sorry this is happening to you. Do you have friends or anyone who are supportive of you that you can talk with? I mean later when we're done chatting if you need a friend to talk to?” [Chat Transcript]
- *Identify formal support*  
“There are legal services for survivors that range from pro - bono or low cost, depending on the type of assistance she is needing.” [Chat transcript]
- *Resource referral*  
“Ok, let's see about trying to find some financial resources first. I'm going to list everything I can find. If you'd like, when we end this conversation, you can have our chat emailed to you so that your resources are in one place.” [Chat transcript]

**Digital specific skills**

Some advocacy skills are specific to the chat/text modalities. These include:

1. Timely and welcome response. *Answering chat and texts as soon as possible helps build rapport and trust with service users.*

2. Metacommunication about content, tone, and response expectations. *Advocates use written language to discuss the process of the service interaction, what the service user can expect from the advocacy, as well as clarify meaning and tone.*
3. Concise communication. *Advocates aim to keep information on chat/text sessions short and concise to keep service users engaged and to illustrate active listening. Chat and text communication should be “nutrient rich” with important information and short in length due to text character limitations. Providing links to additional resource helps to keep communications brief.*
4. Use of emotive language, emoticons, and minimal encouragers. *Emotive language and emoticons are used in chat and text session to signal tone and personality such as exclamation points, smiley faces, and hearts.*

#### **“I am not a bot.” Ways for advocates to show presence over chat and text**

- Communicate as your (professional) self. Consider how you present yourself over phone and in-person with clients to let them know that you are listening, and you care about them. Translating those skills to chat/text through written communication will help build rapport and meet service user needs.
- Introduce yourself using first name used for work. Letting service users know you are a “real” agency staff member by introducing yourself, using your first name, and responding in real time helps show social presence.
- Share reactions similar to phone in written format. Over the phone, you may say things like “uh huh,” “ok” and “hold on while I look that up.” Typing these smaller phrases in a service interaction helps the other person feel understood and “heard.”
- Use emotive text cues to show tone and express emotion. A well-placed exclamation point, smiley face, or question mark helps the service user know *how* to read your response and assess your tone. Some advocates may use memes or GIFs, but care should be taken to ensure selections are appropriate, professional, and inclusive.
- Acknowledge the potential for miscommunication. Advocates may emphasize that miscommunication can occur over chat and text. Asking service users to clarify or provide additional information, when needed, can help build rapport and meet needs.

*A note on cultural responsiveness and equity:* This evaluation was an initial step in understanding a chat- and text-based advocacy model that is survivor-centered, trauma-informed, and social justice-oriented. Based on lessons-learned from this evaluation, SAFELINE and the evaluation team expect to keep refining issues related to cultural responsiveness and equity in technology-facilitated advocacy models. Based on the present work, core components and basic mechanisms of chat- and text-based advocacy were identified, and in the future, cultural adaptations and modifications will be evaluated and included in implementation.

## Section Four:

### Service User Experience and Outcomes

#### Service user experience

SAFEline service users report high levels of satisfaction with the service. Our survey of 171 people who used SAFEline showed that 82.9% of service users were satisfied with the amount of time SAFEline advocates spent with them during their session. Overall satisfaction rates (satisfied/ very satisfied) were 79.5% of those surveyed, indicating high levels of program acceptability and utility. Additional key findings from our survey of service users include:

- 75.8% of service users agreed or strongly agreed they learned more about getting safer on SAFEline
- 85.3% of service users agreed or strongly agreed that SAFEline staff are knowledgeable about resources
- 79.6% of services users got some or a lot of support from SAFEline

Interviews with chat and text service users highlighted the role of connection and information in good service experiences on SAFEline.

**“The chat line was a lifeline for me.** It seemed that the times that I would reach out, I always ended up with the same person. That helped build a little bit of a relationship, which I genuinely needed the encouragement to put up with my parents’ abuse.” [Service User Interview]

**“I go back to those conversations from the chat line lots of time mentally. I realized then that that was when I was planning. I was prepping myself. I don’t think that it can be underestimated that when someone is reaching out, if they don’t necessarily have the guts to go ahead and go for it, or if they’re just calling to talk, I don’t think it can be underestimated that you need all the mental preparation you can get for when you are ready because, if you do successfully get out, and you don’t look back, it takes a foundation you didn’t even know you had.”** [Service User Interview]

#### Offering communication choices is survivor-centered

Interviews and surveys with service users and SAFEline staff emphasize the critical role of choice in how people are able to access hotline services. Aligned with the survivor-centered perspective, offering multiple modes of communication (chat, text, phone and even video) provide people the opportunity to reach out in the way they most feel comfortable at that particular time. Some service users are “phone people” and some service users are “text people” and will use the modality that is the best fit for them. Circumstances and safety considerations may shift communication preferences, making a range of options essential to meeting shifting safety needs.

**Chat and text hotline selected impacts.** Through toolkit evaluation activities, the following potential outcomes were identified for survivors of crime using hotline services via chat and text. See logic model for all impacts.

### **Select Short-term**

Short-term impacts are those that happen within approximately three days of service use, and are often immediate.

- Service users are able to reach out through modality of their choice (chat/text/phone): Offering options for communication gives service users safe options to reach out in their preferred modality, increasing access to needed services and supports.
- Connection to informal and formal support systems: Chat/text services provide service users with referrals and information to access formal supports, addressing needs and mitigating crisis. Advocates work with service users to identify supportive friends and family, which creates ongoing support after the chat/text interaction is over.
- Increased knowledge of SAFE services: Local chat, text, and phone hotlines serve as the entry portal to agency services. By offering chat and text services, service users have increased access to information about services offered at the organization, increasing awareness of options for help. Over 84% of survey participants indicated SAFEline advocates helped them with their needs.
- Increased knowledge of the impacts of trauma through psychoeducation: Hotline advocates provide information to improve understanding of trauma impacts, reducing shame and stigma for survivors and community members. Over 70% of service users surveyed indicated they got more information from working with SAFEline.
- Crisis de-escalation and stabilization: Crisis intervention strategies increase emotional and physical safety, contributing to reduced distress.

### **Select Long-term**

Long-term impacts are those that happen within approximately a week to 6 months from service use.

- Repeated outreach to SAFEline by service users. Service user needs shift over time as safety, resource, and healing needs evolve, necessitating repeated outreach. Continued use of the service illustrates relevancy and trust with the platform and the agency. Repeated use of SAFEline was indicated by 32% of survey participants, and 93% of service users surveyed indicated they would be likely to contact SAFEline again.
- Increased access to SAFE Alliance services among vulnerable and hard to reach populations. Chat and text services increase access in populations that have been marginalized or underserved by offering choice for communication and inclusive support.
- Reduction of isolation. Resource and emotional support, as well as psychoeducation provided by chat/text services reduces isolation, especially when services are offered 24-hours a day/7-days a week and available for repeated use.
- Abusive/harmful behaviors are identified by service user if they reoccur. Education about healthy and unhealthy relationships, violence, power, and control, paired with emotional support, increases knowledge and identification of behaviors for service users.
- Mental health impacts are identified and addressed as needed. Psychoeducation, assessment, and goal identification help to understand health experiences and resource provision addresses needs, leading to supports that address mental health concerns like depression and anxiety.
- Safety is improved. Through resource provision, safety planning, information, and housing, service user safety is improved in the long-term through chat and text services.

## Barriers to service quality on chat and text:

Five common barriers were identified in the evaluation that prevent high levels of service satisfaction and positive outcomes referenced in the SAFEline logic model. These barriers are common for many program-based chat and text lines. Barriers and potential solutions from SAFEline staff and service user interviews are outlined below.

Barrier 1: Lack of access to technology to use service. The most common barrier to using chat/text hotline is not having access to a phone or computer to use the service.

“Because at the time, I was without housing or, sometimes, I was without a phone, so it was difficult to communicate and, also, sometimes, I had trouble communicating my exact needs.”  
[Service User Interview]

Some participants may have a phone or computer, but their partner is monitoring the device:

“Now I would be inclined to chat maybe, but four years ago, I needed a phone call that’s what there was. In text, if they’re actively in an abusive relationship where the person is checking their phones and their computer records, it’s potentially dangerous to reach out with a written record.” [Prospective Service User Interview]

## Recommendations to address lack of access:

1. Partner with libraries, community centers, schools, and other spaces with free computer access to promote chat/text services and digital safety strategies.
2. Offer resources to help potential service users secure a phone and/or tablet, including phone donation programs and cash assistance to maintain access of current device.
3. Provide “mobile” advocacy services at the location of service user choice for those that cannot use chat/text or phone.

Barrier 2: Confusion about *how* and *when* to use chat/text services. Some potential service users, especially those who routinely rely on phone, rather than chat and text for communication, were unsure about how services would be offered over chat/text, and if they would have the same level of support.

“I feel like that’s the biggest downside of having the chat option because you can’t really get feedback right away as you do with a phone call.” [Prospective Service User Interview]

People expressed concerns about safety and confidentiality over chat and text.

“I would prefer the phone just because I feel things will kinda lost in between the lines of textin' and chattin'. I would prefer the phone...Just confirming that it is private and confirmin' that we're here to hear your—what you possibly need and what we can help you with. Just kinda knowin' that it's private.” [Service User Interview]

There were also concerns that chat and text services would be impersonal, or “robotic.”

“There’s just something about when you don’t know someone, and you’re typing with

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them or texting. It just feels pretty impersonal. It's like when you go on Best Buy dot com and then there's the bot or whatever. Even though it's a real person, it just doesn't have that extrafeeling." [Service User Interview]

**Recommendations to address confusion about service use:**

1. Highlight confidentiality and privacy protections on website and chat/text service promotion.
2. Educate the community and potential service users about the nature of chat/text services and address common questions and concerns.
3. Introduce the advocate- and the advocacy services- and the beginning of services to indicate the authentic and individual nature of the chat/text interaction.

Barrier 3: Long response times. For some participants that had used chat and text services at SAFEline and other agencies, challenges getting connected to an advocate in a timely manner prohibited further chat and text use. Wait times in excess of 30-60 minutes (and sometimes longer) discouraged further service use. Delays in response to participant texts in the midst of service interactions can contribute to service users feeling unheard and unsupportive.

"I would say definitely if they're taking a long time to answer to my messages, I would feel like I'm taking their time or I'm wasting their time or they're not really interested in what I have to say." [Prospective Service User Interview]

**Recommendations for long response times:**

1. Engage potential service users with information about service wait time expectations and alternative forms of connecting quickly.
2. Increase staffing at high volume outreach times to meet service needs.
3. Show presence and support through timely response during service interactions. When managing several interactions, advocates can share additional resources and acknowledge wait times through caring communication.

Barrier 4: Advocate tone and communication is perceived as judgmental or unsupportive. On some occasions, service users reached out on chat, text, or phone, and found the advocate's tone to be dismissive, unfriendly, or not empathic, limiting connection and desire to use the service again.

"I can say I've had incidents where someone was very abrupt. They clearly just wanted to get your information, and pass you off, and let you know that, "Okay, we don't have anything available, so sorry, you're on the list. Bye-bye," and that's not good. It hurts because you're—it's so insensitive, and they clearly don't care. You also wonder, in the back of your mind, "Am I on the list,<for shelter>" or "Am I gonna come up next? Are they just telling me that?" [Service User Interview]

**Recommendations for addressing misaligned communication approaches:**

1. Empathically seek clarification if service user needs or goals are unclear. Advocates can use paraphrasing and questions to seek clarification and confirmation that they understand the help needed by service users.

2. Use strengths-based language. Empathic and non-judgmental communication is both trauma-informed and respectful to service user lived experiences.

Barrier 5: The needed service or support is not available. Many service users accessing local program-based chat/text services are seeking emergency shelter, counseling, legal advocacy, and other supportive measures. High demands for interpersonal violence services, especially shelter, means often the requested service is not available for service users, contributing to service user discomfort and a lack of met needs. Some participants reported lists of referrals are overwhelming, creating more outreach work during a time of crisis.

**Recommendations for this barrier:**

1. Link service user with other potential resources. Whenever possible, advocates can support service users by providing tailored referrals, including connections to resources available immediately to that person. Direct referrals can reduce the labor of service users in crisis reaching out to multiple agencies where services are also unavailable.
2. Manage expectations about service waitlists. Many programs, such as housing, counseling, and childcare, may be available to service users but have significant waitlists. Advocates on SAFeline prepare service users for the potential waitlist on services during the referral process. SAFE, as an agency regularly communicates on current waits among departments so that SAFeline service users can aware of the most up-to-date service waits.
3. Offer any immediate service connection available. Service users seeking shelter or counseling may benefit from other programs while they wait for other supports to be available. If the agency has any immediate supports available, such as mobile advocacy or materials supports, advocates can help make a short-term connection while waiting for the focal service.

## Section Five:

### Strategies for Implementing Chat and Text in Your Program

For programs who have already started chat/text hotline advocacy services, or for those considering adding this service, there are many important considerations, including safety, platform selection, as well as staff training and support. Key strategies for implementing chat and text hotline services developed from the ETA project are discussed below.

#### **Safety and privacy considerations**

##### ***Platform safety***

Before opting for a particular company for chat and/or text services, programs should understand the platform's data security and privacy policies. This includes exploring if or what data platforms keep track of, including phone number, Internet Protocol (IP) address, and location of the service users. Selecting a platform that does not retain chat/text sessions long-term is both a legal recommendation, through the Violence Against Women Act (VAWA) and the Family Violence Prevention and Service Act (FVPSA), and an ethical obligation through many social service and counseling licensing and professional boards for most IPV and sexual assault programs. Additionally, advocacy programs must have an understanding of what data they are able to retain internally from individuals that use their chat and text services, particularly, if they are planning to store potentially identifying information. The National Network to End Domestic Violence (NNEDV) provides guidance on assessing platform safety (see resource section).

##### ***“Covering tracks”***

Advocacy programs looking to implement chat and text services should choose a platform that offers the ability for service users to quickly delete their activity from their phone and/or computer, sometimes called “covering tracks.” Service users must have an easy way to delete any chat or text conversations with the hotline for privacy and safety. This includes any data or information from the application that may be retained on the device as well (for example, on app list on phone, showing up in browser history, or data/memory storage lists). Advocates should mention safety measures like deleting conversations as part of routine service introduction and especially if the service user shares their device is being monitored or they have experienced other digital abuse.

##### ***Digital Abuse***

Chat/text-based hotlines should have processes and protocols in place to keep service users safer if their devices are monitored. Advocates should also discuss the ways in which individuals can experience violence digitally such as cyber stalking, monitoring, and emotional abuse via chat, text, phone, and video as a part of safety planning.

##### ***“Off-target” contacts***

Hotlines implementing chat and text should have a protocol in place to determine when a chat or text is off-target. This may include: individuals that do not qualify for their services; sexual gratification chats/texts, or individuals being verbally or emotionally harmful toward advocates. Planning for off-target calls may include routing those individuals to appropriate services via resource referrals or terminate the session.

### ***Communicating with service users about privacy and consent***

Advocates working on chat/text hotlines should be familiar with all organizational privacy and consent policies as well as any professional licensing they are obligated to maintain. These policies, especially those around mandated reporting concerning child/elderly abuse and harm, must be communicated clearly and succinctly to service users, when applicable. Ideally, privacy, reporting, and consent policies are communicated to the service user before they disclose something that needs to be reported.

Advocates should be trained to gently interrupt conversations about reportable incidences to discuss how, when, and to whom they have to fulfill mandated reporting obligations.

### **Platform selection and considerations**

#### ***Cost***

Many non-profits operate with challenging budget constraints, limiting platform options. When selecting a platform for chat and/or text, organizations should consider initial fees for the software, ongoing maintenance fees and updates, and any potential hardware updates that are needed at the time of implementation. Along with cost, asking representatives from potential platforms about the availability of technical assistance and the process for system updates will help assess additional operation costs and delays.

#### ***Integration***

Hotlines planning to implement chat and/or text services should assess their current programming and understand how the addition of chat and text services could disrupt ongoing hotline services, change staffing needs and availability, and potentially increase requests for available services at the agency as access is increased through chat and text hotline services. Taking time to realistically assess both the pros and cons of adding chat and/or text services will help programs develop policies and procedures that ensure continued high-quality service provision.

SAFEline operates phone, chat, and text 24/7, in English and in Spanish. Programs may not be prepared to introduce the service at this level and may select more limited hours for chat and text. If implementing chat and text on a more limited basis, consider operating at the most high-volume hours. At SAFEline, the most popular times for hotline use are Monday, Tuesday, and Wednesday during the work day (8am-5pm). Chat/text services with limited hours should offer information on phone hotline, and national chat and text services, such as the National Domestic Violence Hotline, in “down” hours. Clear communication on program materials and with community partners about limitations on chat and text hours and language access is critical to implementing more limited-service hours successfully. Small programs may choose to offer chat/text services in limited hours or through a memorandum of understanding (MOU) with a larger agency or national hotline.

#### ***Testing the platform***

Prior to full implementation of a chat and/or text platform, programs should plan to pilot test software with a small number of staff and pilot service users. Pilot testing allows chat/text advocates to learn the software, develop skills to troubleshoot any technical difficulties in real time, and build advocacy skills specific to chat and text. Former non-residential service users with previous phone hotline service use are ideal for testing chat and text.

#### ***Plan for service disruptions***

Ideally, the implementation of chat and text will occur as a seamless addition to phone hotline services. However, depending on agency and staff availability, as well as any needed hardware and/or software

installation or upgrades, service disruption may be inevitable. Planning for service disruption internally with advocates and administrative staff, as well as externally with service users and potential service users will allow for increased rapport with survivors and lower potential workplace stress for staff. Internet and power outages at SAFEline have been addressed through coordination with the National Domestic Violence Hotline, and remote staff working in locations where the outages are not occurring.

For more information on implementation considerations for chat and text services, the National Network to End Domestic Violence (NNEDV) has compiled a Digital Services Toolkit. Access the guide here: <https://www.techsafety.org/digital-services-toolkit>

### **Chat/Text costs.**

SAFEline is staffed 24 hours a day, 7 days a week by bilingual staff that can respond to service users in chat, text, and phone modalities. SAFEline has 10 full time and 13 part time or pro re nata (PRN) staff. Cost considerations for SAFEline and other chat/text lines include:

- Labor (salary and benefits)
- Internet
- Chat/Text/Call Center costs
- Equipment, including computers, headsets, and phones
- Office space (if not working remote)
- Service advertising
- Staff training
- Electronic storage

**Use of volunteers.** SAFEline uses paid staff to provide hotline services. Agencies without the resources to hire hotline staff may use volunteers to provide services. The use of volunteers should be accompanied by intensive training, quality monitoring, and frequent supervision and support.

### **Staff hiring and training**

When starting, expanding, or maintaining chat and text services, hiring and training of staff is critical to high quality and impact services.

Skills SAFEline looks for when hiring a chat/text advocate include:

- Understanding of interpersonal violence and trauma-informed care
- Commitment to survivor-centered model
- Excellent active listening skills
- Ability to multi-task
- Patience and flexibility
- Comfort with technology and communicating with chat/text
- Willingness to engage in supervision
- Passion for ending violence and social justice
- Comfort with stressful work environment
- Able to work remotely

### **Training essentials at SAFEline**

Staff at SAFEline receive an initial 40-hour general advocacy training, with an additional 20-hour hotline training that focuses on chat and text advocacy.<sup>3</sup>

#### *Select Core 40-hour training topics*

- Sexual Assault and IPV: Historical perspective, causes, and consequences
- SAFE service eligibility criteria and program highlights
- Advocacy and social change
- Program philosophy
- Legal options for survivors of violence
  - Overview of basic processes and information on referrals
  - Overview of how advocates should discuss legal options, including phrases such as “I am not a lawyer and cannot give you legal advice”
- Trauma responses and impact of trauma on the brain
- Empathetic communication and active listening skills
- Supporting individuals from marginalized populations that experience interpersonal violence
- Cultural humility
  - Include training on bias, discrimination, and social justice approaches
  - Systemic oppression and intersecting identities of survivors
- Safety planning
  - Include context and historical perspective as to why law enforcement may not be a safe option for all individuals
- Crisis intervention techniques
- De-escalation techniques
  - Include an overview of some basic grounding techniques appropriate for chat/text

#### *20-Hour Hotline Specific Training*

- Hotline operations
  - Documentation
  - Remote working expectations
  - How to use equipment
  - How to use language lines and interpretation
- Community resources
- Mandated reporting (child maltreatment and elder and vulnerable adults)
- Handling off-target contacts
- SAFE shelter admissions and wait list management
- SAFEline database protocols for documentation

#### *Chat and Text Training*

- Navigating the platform (logging in and out, password security, support tools)
- Queue management and expectations
- Best practice for communicating via chat/text
- Communication for consent and mandatory reporting in practice
- Addressing digital abuse and stalking threats

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<sup>3</sup> This is an overview of many topics offered over the course of 40 hours and not inclusive to all content and skills discussed.

### *Next steps after training*

After the initial operations training, SAFEline advocates complete the following activities to practice the chat/text modality:

1. Independent study and review of example chat and text transcripts.
2. Live observation and debrief in real time of chat and text hotline session conducted by an experienced SAFEline advocate.
3. Live observation of chat and text hotline session with supportive training for new advocate by an experienced staff member.

### **Hotline staff support considerations**

Hotline work is rewarding, but often stressful and challenging. Hotline staff are frontline workers addressing life-and-death situations, often with limited resources. Occupational stress, such as burnout and secondary traumatic stress (STS) can lead to turnover without the right organization structures and supports. Staff turnover risks the quality and availability of services. Material resources and emotional supports are needed to recruit and retain quality staff. Strategies to meet staff needs include:

- Living wage
- Paid leave
- Peer support
- Medical insurance that includes mental health services
- Paid wellness time
- Professional development
- Trauma-informed supervision

Other strategies to address occupational stress include minimizing excessive workloads, offering employee assistance plans (EAP), and providing resources for wellness.

**Remote work.** Currently, all SAFEline employees work remotely and use a secure virtual platform for hotline services, team collaboration, and supervision. SAFEline employees sign a telework agreement that states they will work from the Central Texas region (eligible counties are included in the agreement). SAFEline advocates working remotely must:

- Have a safe, healthy working space that is free from excessive noise
- Have working internet access and a telephone
- Be able to attend required meetings in person or via teleconference equipment

Individual employee schedule expectations and available hours are included in the teleworking agreement. The agreement also includes communication and availability expectations, information security, and terms of termination of both the teleworking agreement and employment. Agencies considering remote hotline positions may benefit from a similar agreement.

### **Additional training and implementation considerations for chat and text**

#### ***Practice with the platform and format prior to implementation***

Advocates, hotline administrative staff, and other support personnel who will interact with the chat/text platform (both internally and externally with service users) should have time to practice using the software. This should include practice sessions with representatives from the software platform that can provide in-depth knowledge of platform functions, assistance in troubleshooting technical difficulties, as well as data management and privacy features. Practice will help with technical aspects of service

delivery. Practice sessions with other advocates and former service users will help apply technical and practical skills.

### ***Become comfortable helping service users with digital communication***

Advocates should be comfortable with both chat and text mediums as well as able to address discomfort with chat/text mediums among service users. Helping work through technical difficulties and implementing chat/text-specific skills are vital to providing high quality, survivor-centered services. Advocates should have basic knowledge of technology safety to help support service users.

### ***Provide up-to-date resources and referrals***

SAFEline advocates have created a “living” document that includes referral information and resources that is available for quick access during chat and text sessions. This document is regularly reviewed and updated by staff. Advocates on staff are review this document in order to familiarize themselves with the resources listed. The document can be used to make a tailored list of resources for staff needs.

### ***Language that advocates are able to copy and paste and modify into sessions for quick response***

Prior to, or during, the implementation of chat and text services, programs may determine that they would like to provide more structure to sessions by using automated or prewritten responses. Advocates may find that they are providing the same information multiple times and it would be beneficial to have that information in a pre-written message ready to be copied by the advocate and pasted into the chat or text session. Examples may include welcome messages, information on how to report an instance of child maltreatment, or information on accessing agency programs such as counseling or mental health services. Advocates are encouraged to individualize pre-written statements per service user needs to convey social presence.

### ***Welcome service users and orient them to the platform***

A timely and warm greeting when a service user initiates a chat or text session is important to a trauma-informed and survivor-centered advocacy session. A warm greeting will help with rapport building and indicating the advocate is a “real” person and not a robot.

### ***Communicate at accessible reading level***

Advocates should write on a level that will be accessible to service users. This is flexible and may change from session to session. Advocates should use straightforward sentences that are concise and use everyday vocabulary. Advocate tone can be formal or more informal based on advocate preferences and service user communication style. SAFEline advocates work to mirror service user tone and vocabulary while maintaining professional boundaries.

### ***Individualized communication***

Advocates are encouraged to communicate in a professional manner that is also authentic to their preferred style. Showing personality is a way that advocates may build rapport and trust with service users and also indicate that they are a “real person” and not a robot. SAFEline advocates show personality in their chat and text sessions through emoticons, using local nicknames for places, figures of speech (e.g. “oh my gosh!”), and punctuation for expression.

### ***Complete shelter intakes/assessments over the phone***

As compared to national helplines, many people access local hotlines to get emergency support. When advocates at SAFEline have a session where the service user is requesting emergency shelter, the advocate encourages the service user to call to complete the assessment. Shelter assessments take on

average 20-30 minutes on the phone, and up to 60 minutes or more chat and text. Some agencies may require shelter intakes over the phone to have verbal verification of identity.

### ***Understand that chat and text sessions take time***

Chat and text sessions will typically take more time than phone calls for two primary reasons. The first is that it will take advocates and services users more time to type out their messages than it does to speak to each other on a phone call. Second, service users may require additional time to absorb and respond to the information. At SAFELINE, chat and text sessions “time out” (terminate) after 15 minutes of inactivity but can be reinitiated by service users. Service users get a message on the chat platform when their session is about to time out.

### **Population-specific Guidance**

Chat and text advocacy are helpful service modalities for many people. Prior to implementing a chat or text hotline, programs should consider protocols for how to adapt in real time for diverse populations, including:

- **Non-English speakers and individuals that prefer to speak in a language other than English:** Prior to implementation, programs should create a protocol for how chat/text advocates work with service-users who prefer to communicate in a language other than English. In scheduling staff time and schedules, it is imperative to have an advocate who is bilingual in English and Spanish on shift. Other languages may be essential given your location. Features like Google Translate may not work for the sensitive and individual nature of chat and text for violence survivors. If you do not have staff fluent in writing in the preferred language of the service user, consider using a language line service via phone.
- **Adolescent service users:** Adolescents may be more likely to use chat and text, especially for initial support. Privacy and confidentiality are top concerns for teens needing support, especially when parents or abusive partners are monitoring devices. Prior to implementation, programs should clarify and review mandated reporter protocols with advocates and discuss how to talk through consent and reporting requirements with adolescent service users. Advocates may also want to consider how tone, vocabulary, and showing personality may need to shift in sessions with adolescents and teens based on their developmental stage. Adolescents will need adapted safety planning approaches based on their living situation and legal status as minors.
- **Emerging adult/college populations:** Like adolescents, emerging adults (18-25) may prefer chat and text communication. Advocates should have training on working with emerging adults and have knowledge of services available from universities in their area. Advocates may also want to consider how shifting needs during the emerging adulthood period, including increased access to alcohol, changing mental health needs, and distance from family of origin. Both adolescents and emerging adults may require additional guidance on how to access help from agencies and health systems.
- **Individuals chat or texting the hotline from outside of the service area:** Local agencies implementing chat and text should clarify protocols for responding and working with individuals outside of the agency service area. If advocates will be expected to provide hotline services, programs should develop a process for locating possible referrals and resources for service users chat or texting the hotline outside the traditional service area.
- **Formal supports:** Advocates should have an understanding of available formal support systems in the hotline service area including housing, social service support, criminal justice systems and other professionals working in the field, including referrals for statewide and national formal

support. Advocates should have information ready to provide individuals chatting or texting the hotline from these systems on behalf of survivors as well.

- **Informal supports:** Advocates should have an understanding of available informal support systems in the hotline service area, including peer support groups, social networks, and social support groups directed for survivors and their informal support networks. Chat/text service users include friends and families of survivors, who may benefit from resources and supports for survivors and for themselves.

## Section Six:

### Evaluating and Monitoring Chat/Text (and phone) Hotlines

Program evaluation is a valuable tool that provides information on service user experience, evidence of program effectiveness, and also bring attention to areas for improvement. Evaluation should begin as early as the initial development of the program idea, and continue as an iterative part of program operations that provides ongoing information about short- and long-term change.

For chat and text hotline (and phone!) advocacy programs, evaluation and monitoring can help:

- Understand service user experiences and help incorporate their feedback into the program model
- Develop a deeper understanding of the needs of people using services
- Monitor program quality and fidelity to a model of service
- Assess impact of advocacy, including short- and long-term outcomes
- Identify needed adaptations for a particular population, violence experience, or cultural context
- Provide evidence of program efficacy and impact to support funding, agency support, and community support

#### **A brief review of evaluation tools for chat and text hotline**

The primary types of evaluations are formative, process, and impact. Evaluations can also include a needs assessment, which helps to understand the challenges within system and communities and identify potential solutions within your program model. See resource section for more evaluation guidance. Below, we offer potential evaluation approaches for chat, text, and phone hotline.

- **Demographic survey**

Programs may want to offer a brief demographic survey at the end of chat and text surveys to understand more about service users. Offering confidential and voluntary questions at the end of a service interaction is a way to monitor who is- and who is not- using the chat and text. Consider querying gender identity, age range, race, ethnicity, preferred language, county of residence, sexual orientation, and other demographic factors that may help the agency with outreach and planning.

- **Fidelity monitoring**

- **Fidelity checklists:** Fidelity checklists ask staff (and sometimes service users) to record skills used, actions taken, and goals addressed during advocacy sessions, with the aim of understanding how program activities are being implemented and if program goals are achieved. Fidelity checklists see how “faithful” the program is to the logic model. Fidelity checklists can be used for routine quality monitoring, when program models are adapted or changed, or as part of staff support and training. See Appendix B for a sample fidelity tool matching the SAFeline logic model. Fidelity checklists can be used as needed or as part of routine evaluation processes.

- **Chat/text transcript review:** Reviewing de-identified transcripts of hotline interactions is an evaluation approach that helps with understanding advocacy processes and service user outcomes. Programs can use a standardized checklist (such as the fidelity checklist) or iterative conversation with staff to review chat or text sessions and identify strengths and areas for continued work. When reviewing transcripts with staff, be mindful of power dynamics in supervision roles, especially when discussing improvements.

- **Listening sessions:** A listening session is like a focus group, and involves having a conversation with people who are knowledgeable about service provision and experience. Listening sessions can be used to gather feedback on a program, for guidance about serving a specific survivor population, and for assessing unmet needs. Listening sessions can be conducted with staff, people engaging in services, as well as prospective service users. Listening sessions may be conducted by program staff or an external partner. Sessions should be confidential and in a comfortable and private physical or virtual space, and participants should be offered food, a giftcard or some other support to participate. Open-ended, program focused questions will solicit valuable feedback. For an example of a listening guide, see the *Campus-Based Advocacy Evaluation Toolkit* (resource section).
- **Service user satisfaction**
  - **Brief feedback surveys:** Sometimes called “client satisfaction” surveys, feedback assessments can be used to assess service experiences, to determine adherence to the programmatic logic model, and to get rapid feedback for program improvement. These types of surveys typically are used for gathering both positive and negative feedback in order to guide service provision, but are limited in obtaining detailed information related to specific program components or service user outcomes. Feedback surveys can be a useful on-going evaluative tool to pair with more extensive evaluations on a periodic basis. Consider offering anonymous electronically programmed brief surveys at the end of chat and text interactions for ongoing program monitoring. See Appendix C for sample feedback questions matching the SAFeline logic model and program approach. Programs may choose to send surveys when advocates determine service users to not be in active crisis to avoid creating additional burden in times of stress and diminished safety.
  - **Outcome evaluation:** Outcome, or impact, evaluations assess program impact over time and often involve a comparison group. They are a critical component of long-term evaluation and can be collected longitudinally (i.e., at multiple data collection time points, allowing for assessment of change over time). Outcome evaluations provide some of the best indicators of how well your program is doing in meeting its stated short and long-term outcomes. In some cases, programs may survey or interview participants at the outset of service use to establish a baseline or a starting point. Programs may offer assessments at time intervals to track service user progress based on goals. In a survivor-centered model, assessments should be tailored to expressed goals of service users, and modified as safety and environmental concerns change.

### Key data points that can be used in evaluation of chat/text advocacy

The below data points correspond with short-term outcomes on SAFeline, and can be collected by the advocate and/or in a brief post-session survey. Agencies may choose to ask questions in the course of the call, or document as offered by the service user. Data points should be programmed into the agency’s data systems for ease of collection and review on an ongoing basis. Programs can adapt these data points based on their needs.

- Method of contact/call/chat/text
- Languages used (both by bilingual staff and use of language line services)
- Duration of session
- *Age If indicated*
- *Race/ethnicity If indicated*
- *Gender identify If indicated*
- Presenting concerns and needs
- Referral/information given- Internal to agency

- Referral/information given- External to agency
- Shelter requests *If agency has a shelter*
- Repeated service use
- Any technical issues noted in the session

### **Ethical considerations in evaluation and monitoring**

When conducted thoughtfully and ethically, program evaluation should not re-traumatize or harm service users. Previous research with evaluation participants has indicated that survivors of interpersonal violence are not typically harmed by participating in research and evaluation related to violence experiences, and may receive potential benefits, especially when given private and safe spaces to provide feedback (Cook et al., 2015; Edwards et al., 2009). When evaluating chat and text hotline services, programs should be mindful of:

- Confidentiality- evaluation assessments should be confidential and/or anonymous.
- Voluntary-Service users should not have to participate in the evaluation as a condition of service. All participation, including individual survey and interview questions, should be voluntary.
- Power differentials- service users rely on agencies for critical support related to safety. Feedback should not impact service user standing at the agency, even if negative. Use of an external evaluation team or partnership with another organization can create more equity and safety when providing feedback.
- Safety- It may not be safe or feasible for all service users to participate, especially if in active crisis or safety concerns.

## Chat/Text advocacy implementation and evaluation items and actions

Table 6 below will help guide program implementation, adaptation, and evaluation of chat and text services at your agency. Modify the items as needed to fit your agency context, culture, and setting. Consideration items by domain are presented, with potential actions for agencies to take in implementing and planning.

**Table 6: Considerations and potential action items for program implementation and evaluation**

<u>Considerations for program implementation, sustainability, and evaluation</u>	<u>Potential Actions to address program policies and procedures</u>
<p><b>Assessment</b></p> <ol style="list-style-type: none"> <li>1. Will it benefit the agency, survivors, and the community to add chat and text services?</li> <li>2. Are similar services available by another local agency?</li> </ol>	<ul style="list-style-type: none"> <li>• Conduct community, service user, and staff needs assessments to understand programming recommendations.</li> <li>• Discuss chat and text service provision with similar agencies offering the service.</li> </ul>
<p><b>Leadership</b></p> <ol style="list-style-type: none"> <li>1. Who will lead program implementation and ongoing operations?</li> <li>2. What support will staff need to add a new service modality?</li> </ol>	<ul style="list-style-type: none"> <li>• Convene agency and community stakeholders to determine who has the expertise, bandwidth, and passion to lead.</li> <li>• Ask staff to identify needed supports and resources to make programmatic changes.</li> </ul>
<p><b>Budget and cost</b></p> <ol style="list-style-type: none"> <li>1. What funding opportunities are available to implement the program?</li> <li>2. What budget is manageable for the agency to begin services?</li> </ol>	<ul style="list-style-type: none"> <li>• Review current grant and contract opportunities, and ask similar agencies how they are funding services.</li> <li>• Consider what new staff positions will need to be added to minimize staff and budget burden.</li> </ul>
<p><b>Platform</b></p> <ol style="list-style-type: none"> <li>1. Which platform will be used to provide chat/text services?</li> <li>2. What additional or existing information technology will need to be added or enhanced?</li> </ol>	<ul style="list-style-type: none"> <li>• Assess platform cost, user interface, and compliance with agency, state, and federal policy.</li> <li>• Consider integration with existing systems, including phone system and service database.</li> </ul>
<p><b>Service approach</b></p> <ol style="list-style-type: none"> <li>1. How does the agency describe its' advocacy approach and philosophy?</li> <li>2. What are the goals and functions of the hotline/helpline currently and how will they change by adding chat and text?</li> </ol>	<ul style="list-style-type: none"> <li>• Consider how the advocacy approach will need to be modified for chat and text.</li> <li>• Explore any potential changes in goals or skills used on hotline through the new platform.</li> </ul>
<p><b>Service environment and setting</b></p> <ol style="list-style-type: none"> <li>1. Where will services be offered in the agency?</li> <li>2. What resource and design considerations are needed to make service provision trauma-informed?</li> </ol>	<ul style="list-style-type: none"> <li>• Determine if/how workers will be located in person or remotely.</li> <li>• Ensure the "built environment" or physical space around the work environment for chat and text services is private, calm, and accessible.</li> </ul>
<p><b>Service operations</b></p>	<ul style="list-style-type: none"> <li>• Identify peak service times to plan a pilot of chat and text services. Chat and texts often</li> </ul>

<b><u>Considerations</u> for program implementation, sustainability, and evaluation</b>	<b><u>Potential Actions</u> to address program policies and procedures</b>
<ol style="list-style-type: none"> <li>1. What hours are ideal for chat/text services to be offered and what can the agency budget support?</li> <li>2. What information is most often requested on the current phone hotline?</li> </ol>	<p>take more time than phone calls, so staffing will need to increase.</p> <ul style="list-style-type: none"> <li>• Develop adaptable answers for frequently asked questions to be modified for use by advocates on chat and text interactions.</li> </ul>
<p><b><i>Service polices</i></b></p> <ol style="list-style-type: none"> <li>1. Who is eligible to use the chat and text services?</li> <li>2. How will requests for program services, such as shelter or counseling, be approached via chat and text?</li> </ol>	<ul style="list-style-type: none"> <li>• Review agency data, mission, and goals to assess who should be eligible for service.</li> <li>• Create an agency-wide system for real time updates on expected waits for popular services.</li> </ul>
<p><b><i>Training</i></b></p> <ol style="list-style-type: none"> <li>1. What training will staff need on the platform and on new service modality?</li> <li>2. How will new staff be onboarded?</li> </ol>	<ul style="list-style-type: none"> <li>• Identify staff interested in proving peer support in chat and text modalities.</li> <li>• Develop staff onboarding polices and training processes that emphasize practice with the platform.</li> </ul>
<p><b><i>Community outreach</i></b></p> <ol style="list-style-type: none"> <li>1. Who refers services users to the current hotline program and who is likely to refer now that chat and text are offered?</li> <li>2. Who does the current hotline most often refer service users to outside of the agency?</li> </ol>	<ul style="list-style-type: none"> <li>• Determine who needs to be notified of service changes, including community partners, and provide multiple communications with opportunities for feedback.</li> <li>• Develop a common referral list for your service area that encompasses high-quality options for service users.</li> </ul>
<p><b><i>Promoting equity and justice</i></b></p> <ol style="list-style-type: none"> <li>1. How will the agency address communications about criminal justice and community-based safety solutions?</li> <li>2. What languages will chat/text services be offered in to reach service users?</li> </ol>	<ul style="list-style-type: none"> <li>• Offer safety planning approaches that provide education about criminal justice remedies, along with community and social support alternatives for service users that do not feel safe working with police.</li> <li>• Assess what languages staff can communicate in written format, and who will need to be served by phone language line.</li> </ul>
<p><b><i>Staff supervision and support</i></b></p> <ol style="list-style-type: none"> <li>1. How often and in what format will chat/text advocates engage in supervision?</li> <li>2. What are the stressors impacting the work of chat and text advocates?</li> </ol>	<ul style="list-style-type: none"> <li>• Identify who will supervise staff, and a regular schedule for staff peer support and supervision.</li> <li>• Build supportive programs and policies to address staff needs, including limits on interactions, time for debrief, and frequent breaks.</li> </ul>
<p><b><i>Evaluation</i></b></p> <ol style="list-style-type: none"> <li>1. What are the success indicators for the current hotline approach and how will they change by adding chat and text?</li> <li>2. What are the evaluation approaches in place at the agency?</li> </ol>	<ul style="list-style-type: none"> <li>• Modify or build a logic model for chat and text services to map outcomes.</li> <li>• Adapt agency data collection systems to assess chat and text program impact.</li> </ul>

# Further Reading and Resources

## ***National Hotline, Helpline and Advocacy Resources***

### Love is Respect

English: [www.loveisrespect.org](http://www.loveisrespect.org)  
Spanish: <https://espanol.loveisrespect.org/>  
Hotline: 1-866-331-9474  
TTY: 1-866-331-8453  
Text: loveis to 22522

National hotline where young people have access to information and get help. Love is Respect also provides support to concerned family and friends, teachers, counselors, services providers, and members of law enforcement. Services available in English and Spanish.

### National Domestic Violence Hotline

English: <https://www.thehotline.org/>  
Spanish: <https://espanol.thehotline.org/>  
Hotline Number: 1-800-799-SAFE (7233)  
TTY: 1-800-787-3224  
Text: START to 88788

National hotline support and referral services available 24/7/365 that are confidential, free, and available in over 200 languages for survivors of domestic violence, their loved ones, or others working with survivors.

### Rape, Abuse & Incest National Network (RAINN) Hotline

English: <https://www.rainn.org/>  
Spanish: <https://www.rainn.org/es/>  
Hotline: 800.656.HOPE (4673)

National anti-sexual violence organization that operates a national sexual assault hotline and provides resources, program assessments, training, and information about sexual violence.

### National Human Trafficking Resource Center and Hotline

English: <https://humantraffickinghotline.org/>  
Spanish: <https://humantraffickinghotline.org/obtenga-ayuda>  
Hotline: 1-888-373-7888  
TTY: (711)  
Text: 233733  
Live chat: <https://humantraffickinghotline.org/chat>

A national confidential hotline and resource hub operated by the nonprofit organization, Polaris. It is not connected to law enforcement, immigration, or any investigative agency and is strictly confidential.

### Stalking Prevention Awareness and Resource Center (SPARC)

<https://www.stalkingawareness.org/>  
Victim Connect: 1-855-4VICTIM (1-855-484-2846)

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Resources for professionals and survivors to help identify and respond to stalking. Website includes a victim resources page and training modules for professionals and advocates.

#### The Strong Hearts Native Helpline

<https://strongheartshelpline.org/>

Helpline: 1-844-762-8483

A Native-centered hotline staffed by advocates with a strong understanding of Native cultures, as well as issues of tribal sovereignty and law.

#### The Network/LA Red

<https://www.tnlr.org/en/>

24-hour hotline: 617-742-4911 or 800-832-1901 (Toll-Free)

Confidential emotional support, information, referrals, safety planning, and crisis intervention for lesbian, gay, bisexual, queer and/or transgender (LGBTQ/T) individuals, as well SM/kink and polyamorous communities who are being abused or have been abused by a partner.

#### National Coalition of Anti-Violence Programs

<https://avp.org/ncavp/>

Hotline: 212-714-1141

24-hour, free, bilingual (English/Spanish) hotline that offers support to LGBTQ and HIV-affected victims and survivors of any type of violence. NCAVP also provides resources on LGBTQ and HIV-affected victims of hate and intimate partner violence.

#### SAMHSA helpline

<https://www.samhsa.gov/find-help/national-helpline>

Hotline: 1-800-662-HELP (4357)

TTY: 1-800-487-4889

Free, confidential, 24/7, 365-day-a-year treatment referral and information service (in English and Spanish) for individuals and families facing mental and/or substance use disorders.

#### Suicide Prevention Lifeline

<https://suicidepreventionlifeline.org/>

Hotline (English): 1-800-273-8255

Hotline (in Spanish): 1-888-628-9454

TTY: (711)

Chat: <https://suicidepreventionlifeline.org/chat/>

National organization that provides free and confidential support to people in suicidal crisis or emotional distress 24/7 and works with a network of over 180 local crisis centers. Hotline services are available in English and Spanish.

#### Trevor Project

<https://www.thetrevorproject.org/>

Hotline: 1-866-488-7386

Crisis intervention and suicide prevention services to LGBT+ individuals under 25.

#### ***Digital Advocacy/Tech Safety/Digital Abuse***

National Network to End Domestic Violence (NNDEV)

[www.techsafety.org](http://www.techsafety.org)

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Resources for technology as it relates to IPV, partner violence, sexual assault, and violence against women.

National Network to End Domestic Violence (NNEDV)-Digital Services Toolkit

<https://www.techsafety.org/digital-services-toolkit>

Information, guidance, and best practices for agencies that are planning to implement or have already implemented technology- based services.

The Cyber Helpline

[www.thecyberhelpline.com](http://www.thecyberhelpline.com),

Speak to a Chatbot, live Helpline Responders, or an online guide for victims of cybercrime and online harm.

Surveillance Self Defense:

<https://ssd.eff.org/en>

Resource for safer online communications including guides for understanding how online surveillance works.

Crash Override

<http://www.crashoverridenetwork.com/>

A network of survivors and experts that have created a resource center for individuals experiencing online abuse.

Speak Up & Stay Safe(r)

<https://onlinesafety.feministfrequency.com/en/>

An online guide for understanding and staying safe from online harassment.

myPlan

<https://www.myplanapp.org/>

A free app to help safety plan and decisions for individuals that are experiencing violence in their intimate relationship.

### ***Evaluation***

American Evaluation Association

<https://www.eval.org/>

Professional association for program, personnel, technology, and other forms of evaluation. AEA offers professional development opportunities, an eLibrary of evaluation resources, and publications/journals on program evaluation.

Campus-based Advocacy Evaluation Toolkit

<https://www.utmb.edu/cvp/divisions/evaluation/campus-based-advocacy-evaluation-toolkit>

This toolkit was developed to help colleges and universities, as well as agencies serving college-attending survivors, evaluate advocacy services for sexual assault and intimate partner violence survivors. An overview of evaluation approaches for violence prevention and intervention programs is provided in the toolkit.

Community-based Participatory Research (CBPR) for Interpersonal Violence

<https://cbprtoolkit.org/>

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Toolkit for IPV research across disciplines and social locations. Toolkit is aimed at emerging researchers and advocates seeking to evaluate and review service provision programs. Toolkit sections include an overview of CBPR, preparation and planning, values (such as equity, sharing power) and best practices.

#### Domestic Violence Evidence Project

<https://www.dvevidenceproject.org/>

Repository of research, evaluation, and evidence-based practices for IPV advocates. Aimed at state coalitions, local domestic violence programs, researchers, and other advocates and a program of the National Resource Center on Domestic Violence (NRCDV).

#### Adaptation Guidelines for Serving Latino Children and Families Affected by Trauma

<https://safehousingpartnerships.org/node/54>

This guide was created by Rady Children's Chadwick Center for Children and Families in partnership with the National Child Traumatic Stress Network.

#### ***Serving Diverse Survivors***

##### Esperanza United

<https://esperanzaunited.org/en/>

A partnership of Casa de Esperanza and the National Latin@ Network for Healthy Families and Communities (NLN) which provides national training, technical assistance, evaluation, and research on gender-based violence in Latin@ communities.

##### Ujima: The National Center on Violence Against Women in the Black Community

<https://ujimacommunity.org/>

This national center focused on violence against women in the Black community works with communities to end IPV, sexual assault, and community violence in the Black community. Ujima has a resource library of webinars and trainings.

##### Asian Pacific Institute on Gender-Based Violence

<http://www.api-gbv.org/>

A national resource center on IPV, sexual assault, trafficking, and other forms of gender-based violence in Asian/Asian American and Pacific Islander communities.

##### National Indigenous Women's Resource Center

<https://www.niwrc.org/>

A Native-led national nonprofit organization and resource center dedicated to ending violence against Native women and children.

##### Centers for Disease Control and Prevention, Injury Center, Preventing Teen Dating Violence

<https://www.cdc.gov/violenceprevention/intimatepartnerviolence/teendatingviolence/fastfact.html>

Information about teen dating violence, statistics about the issues, risk factors, and prevention strategies for service providers.

##### Polaris

<https://polarisproject.org/>

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National organization focused on fighting sex and labor trafficking and which provides research, training, and information about trafficking.

National LGBTQ Institute on IPV

<https://lgbtqipv.org/>

Resources, training, and research for policy and best practices for preventing and intervening in LGBTQ intimate partner violence.

***National Resources on Trauma-Informed Care***

U.S. Substance Abuse and Mental Health Services Administration (SAMHSA): Concept of Trauma and Guidance for a Trauma-Informed Approach

<https://store.samhsa.gov/system/files/sma14-4884.pdf>

Best practices guidance by SAMHSA on trauma-informed service provision including purpose and approach, background on trauma, key assumptions and principles, and implementation guidance.

Center of Excellence for Integrated Health Solutions

<https://www.thenationalcouncil.org/integrated-health-coe/>

A project of the National Council on Mental Wellbeing funded by SAMHSA, this center has many resources available about trauma informed care such as an overview of trauma, Adverse Childhood Experiences (ACEs), and resources for clinicians and advocacy staff. Resources include information on substance use and trauma, Post-Traumatic Stress Disorder (PTSD), and at-risk populations.

National Center on Domestic Violence, Trauma & Mental Health (NCDVTMH)

<http://www.nationalcenterdvtraumamh.org/>

A national technical assistance provider that provides information, resources and toolkits about the connections between trauma, mental health and substance misuse for survivors of IPV.

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# Appendix A:

## Logic Model

See Below

# Goal 1.

## Rapid engagement for support and connection

### Activities

- Timely responsiveness to service users
- Welcoming to **SAFEline**
- Establishing:
  - safety for all callers
  - boundaries of **SAFEline** service possibilities
- Use of emotive language and emoticons to show presence (tech-based skill)
- Empathy, sympathy, and validation
- Promotion of service user strengths
- Encouraging future connections to **SAFEline**
- Guided call termination to end service interactions
- Metacommunication about content and tone (tech-based skill)
- Identification of preferred language or communication

### Outcomes

#### Short-Term

- Calls/texts/chats are answered with no or minimal wait time
- Increased service access for vulnerable/hard to reach populations
- **SAFEline** service users:
  - are able to reach out through modality of their choice (chat, text, phone)
  - understand **SAFEline** services
  - can identify personal strengths
  - feel respected and listened to by advocate
  - perceive advocates are present and available to support them
  - feel comfortable reaching out again

Immediately after service

#### Long-Term

- Repeated outreach on **SAFEline** by service users
- Increased:
  - chat, texts, and calls
  - chat, texts, and calls from hard-to-reach populations
  - community connection and support
- Reduction of isolation
- Service users:
  - refer their friends and social networks to **SAFEline**
  - trust **SAFEline** and SAFE Alliance
  - feel cared for by **SAFEline** staff and SAFE Alliance

0-6 months after service

### Activity Key

#### Welcoming to **SAFEline**

Advocate welcomes the service user to the interaction and ask them how they are doing and how they may help them today. Ex: *“Hello! Thank you for reaching out to **SAFEline** today.”*

#### Establishing safety for all callers

Advocate assesses for safety and makes sure the service user is safe to interact. Advocate might also assess for safety outside of the immediate situation. Ex: *“This is an advocate with **SAFE**. I’m so sorry for the delay! I am happy to assist you in any way I can. But first, can you let me know if it is safe to text?”*

#### Establishing boundaries of **SAFEline** service possibilities

Advocate shares what services they are able to provide/not provide through **SAFEline** with regards to their expertise. (i.e. *“I am not a lawyer...”, “I am not a counselor...”, or “I cannot provide you with any legal/counseling advice...”*). Also, when an advocate talks about the confidentiality boundaries of **SAFEline** or the service area of **SAFEline** specifically. *“I’m not a legal expert therefore I can’t really guide you in that area. But I can definitely give you some legal aid resources.”*

#### Empathy, sympathy, and validation

Supportive statements to convey empathy, sympathy, and validation. Advocate uses phrases to convey they understand how the caller might be feeling. Ex: *“I can understand why this must be so difficult for you...”, “Wow, that sounds really scary...”* “you don’t deserve this” or advocates may use details the service user has shared to express these *“It’s understandable to feel uneasy about the whole situation. You just went out to get drinks and the night ended so differently than you expected.”*

#### Promotion of service user strengths

Advocate uses words and phrases that reflect and focus on an individual’s self-determination, strength, and resiliency. Ex: *“You are really strong for making that decision...”, “You deserve to be happy and free from this control...”, “You know what is best for your life...”* *“It sounds like you’ve thought of really everything. He doesn’t know the exact location of your bestie’s place. You’re letting loved ones know. You’re safe for now until 11. I think you’ve got this.”*

#### Encouraging future connections to **SAFEline**

Advocate encourages service user to reach back out if they need any additional services. Ex. *“Please reach out to us if you need anything else.”, “We will be thinking about you. Please check in and let us know how you are doing.”*

#### Guided call termination to end service interactions

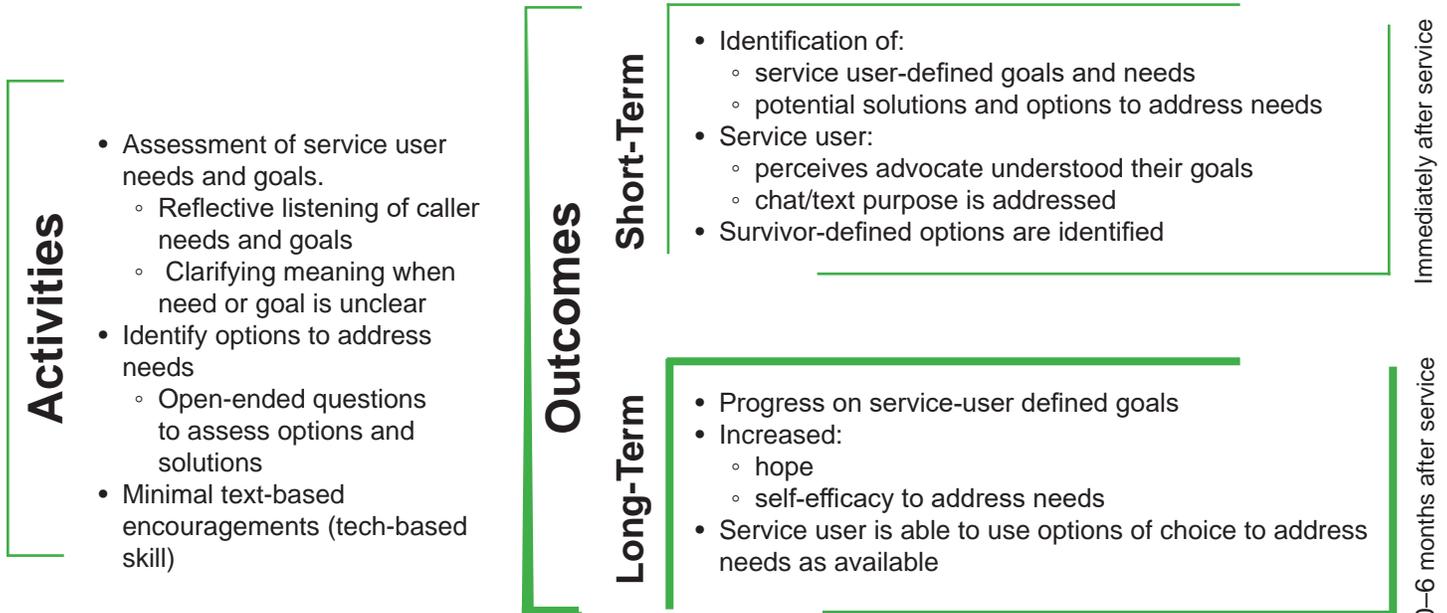
Advocate communicates about and/or previews needing to end the call. Ex. *“I am going to need to get off for the next chat. But thank you for reaching out and looking out for your family members and younger family members in this difficult situation.”*

#### Identification of preferred language or communication

Advocate assesses service user preferred language and/or communication modality. If the language of choice is not one the advocate can communicate in, they use resources to meet service user communication needs.

## Goal 2.

Identify needs and options related to violence, abuse, and harm, and related concerns



### Activity Key

Assessment of service user needs and goals

Advocate asks questions to identify service user/caller’s purpose, safety, needs, and level of immediate crisis. Advocate asks the service user how they can help them today. Advocate asks questions or makes statements that help identify what referrals or resources they may provide. Ex. “Hi, thank you for reaching the Safeline. How can I best support you today?”

Reflective listening of service user needs and goals

Advocate illustrates listening by reflecting content or asking further information about service user goals. Ex. “By help do you mean possibly getting on the waiting list for shelter? Or in general other information of resources that might help you secure shelter or temporary housing?”

Clarifying meaning when need or goal is unclear

Advocates ask to clarify statements and service user needs through follow-up questions. Ex. “Can you explain a little more about what you mean when you said...?” “What do you need to feel safe?”

Identifying options to address needs

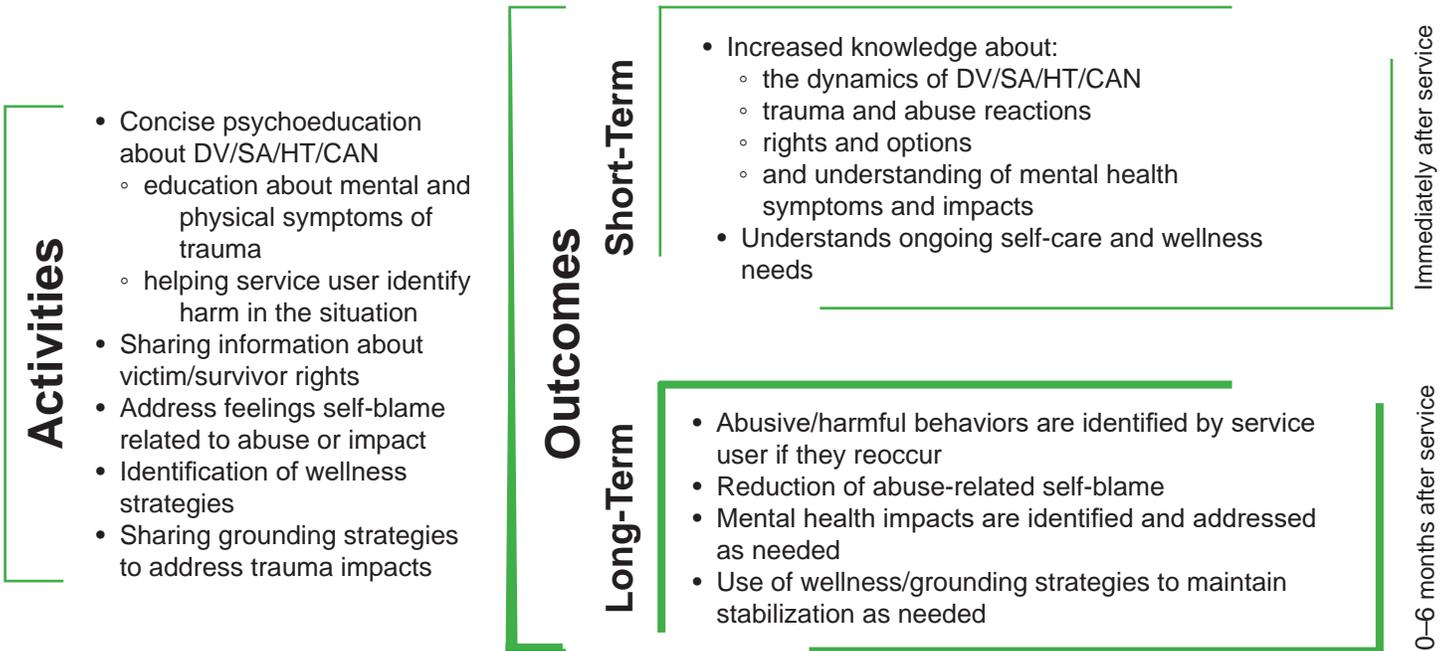
Advocate gives different options to service users. Ex. “It can be hard to find a counselor that you really like. There might be other ways to seek therapy with more privacy; like online or distance counselors for example? Have you tried other things outside therapy for self-care or support? Self-care and support can look different for each of us.”

Open-ended questions to assess options and solutions

Advocate uses probing and open questions to explore options, solutions, and scenarios, similar to techniques used in motivational interviewing. Advocate asks open-ended questions like “Help me understand...” “what would it be like”, “What have you tried and how did that go for you?”, “May I ask what you think might happen if you talk about it?”

## Goal 3.

Expand understanding of violence, abuse, and harm through community and survivor education



### Activity Key

Concise psychoeducation about DV/SA/HT/CAN

Advocate provides education about dynamics of domestic violence, sexual assault, human trafficking, and child abuse and neglect. Ex. *“Well, just because you are managing mental illness, does not invalidate your feelings. One type of emotional abusive behavior is labeling their partner “crazy” in situations like this. It is sometimes referred to as “gaslighting.”*

Education about mental and physical symptoms of trauma

Advocate gives service user information about different trauma reactions. Ex. *“I can understand why you are stressed, that actually happens often when someone experiences what you have experienced.”*, *“Feeling paranoid is something that people do experience after...”*

Helping service user identify harm in the situation

Advocate helps service user to understand abusive and harmful behavior. Ex. *“Wow, I’m so sorry. It sounds like he gaslights you and is very controlling and emotionally abusive. Smashing inanimate objects and blaming you for it is also abuse. You’ve done nothing wrong and you deserve much, much better.”*

Sharing information about victim/survivor rights

Advocate gives information, referrals, and resources about civil rights. Ex. *“Well, you are eligible for the address confidentiality program because of the stalking. We can even help you complete the paperwork here at our agency.”*

Address feelings self-blame related to abuse and/or impact

Advocate says to the service user that this is not their fault or they are not to blame for what is happening to them. Ex. *“I just want to reassure you that this isn’t your fault.”*

Identification of wellness strategies

Advocate works with service users to identify self-defined wellness strategies. Ex. *“Since you are feeling so upset right now, what would it look like to take a break from the conversation and do something that helps relax? Like laying down and reading?”*

Sharing grounding strategies to address trauma-impact

Advocate educates service users on breathing techniques and other approaches to “ground” during times of acute distress. Ex. *“Do you think it would help to try to just focus on one thing? Like turn everything else but the TV off, and try to watch while doing breathing exercises?”*

# Goal 4. Improve survivor safety to prevent future violence and harm



**Activity Key**

Crisis de-escalation

Advocate uses strategies to address immediate crisis from service user. Ex: *“I can’t imagine how exhausted you are, you deserve care right now, not abuse. Do you have any safe places to go where you can take a break from this situation? Like a friend or family member’s home?”; “Have you tried going for a jog when you start feeling this way? Screaming straight into a pillow can definitely help in moments like these. But you don’t always have a pillow with you so that’s understandable as to why it’s not always an option.”*

Individualized Safety Planning

Advocate helps service user think about their safety. The advocate engages in an assessment of safety needs and issues with abusive partner. Specific activities include:

Identification of survivor-defined safety and harm reduction strategies

Advocate asks questions to help service user brainstorm ways to keep safe. Advocate will offer suggestions about how to remain safe or reduce the severity of the abuse. Ex: *“It sounds like you have a plan in place and I’m glad he doesn’t know her exact address. As far as getting the rest of your things, you can call 311 for a police escort for when the time comes to retrieve the rest of your stuff, if that’s helpful at all.”; “I worry that without action this will continue. If you do not want to get a protection order, you can also mention that to him in the hope that he will stop before you actually have to do that.”; “Is there a safe place you can go to unwind and get away from the situation?”; “That would be rough having to hide yourself in the bathroom. Would you be able to keep him from coming into your bedroom if need be?”*

Safety assessment

The advocate asks questions to assess the level of immediate danger the service user may be in. Ex: *“That sounds very unsafe. Have you or your family been in contact with the police about this?”; “Do you have any expected date of when he will be released? Or way of knowing?”; “Prior to last night, was that the last incident that occurred?”*

Actual or waitlist for emergency shelter

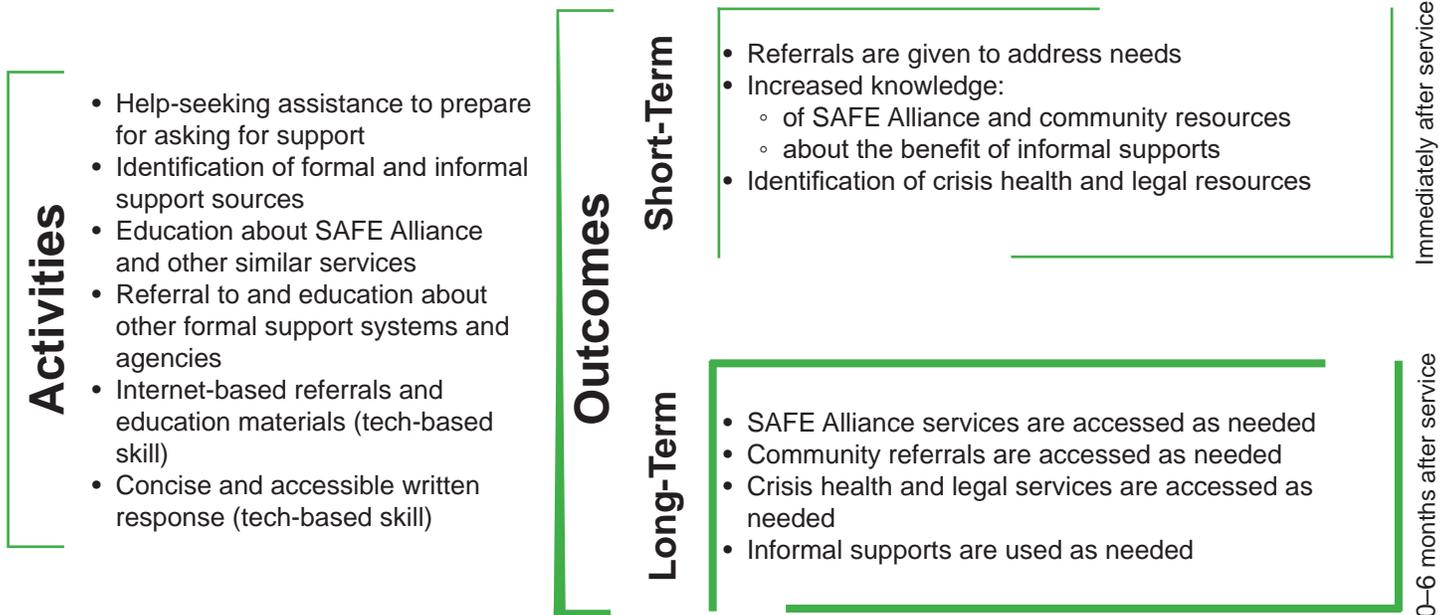
Assessment of need for emergency shelter via the lethality assessment. Ex. *“It sounds like you’re in immediate physical danger and would be a good candidate for the shelter. Throwing things and yelling at you is not ok. You have every right to be intimidated. We are here to help and support you. Please give us a call when you get a chance.”*

Technology safety.

Advocate provides information about safety and privacy considerations regarding the use of technology for services, personal and professional communications. This includes information about social media settings, digital tracking prevention, and cyber stalking.

## Goal 5.

Increase access to timely supports and address needs by opening doors to SAFE Alliance and beyond



### Activity Key

Help-seeking assistance to prepare for asking for support

Advocate helps the service user identify individuals, groups or organizations they can go to for help or to get their needs met. This could be any time the advocate or service user talks about identifying sources of support.

**Formal-** *“You can file a police report for the damage. Calling 311 may be able to help guide you in terms of pressing charges and what your options are there. You can also call the Texas Advocacy Project where they will connect you to an attorney for free legal advice. They may also be able to give you beneficial advice in terms of how to press charges and how to proceed with that process.”*

**Informal-** *“I hear you say you don’t have anywhere to go and are homeless. You don’t have any other family or friends that can help you or would be willing to pay a few nights at a motel for you?”*

Identification of formal and informal support sources

Advocate identifies specific formal and informal support services for the service user. Ex. *“Have you considered going to the Police or Child Protective Services?”; “Do you have any support outside of this relationship (friends, family, counselor,)?”*

Referral to and education about other formal support systems and agencies

Advocate gives service users information about resources outside of SAFE to address expressed needs. Ex. *“In the meantime, would it be helpful to send you a few numbers to other shelters in the area? That way you have a few options to reach out to tomorrow.”*

Education about SAFE Alliance and other similar services

Advocate gives information about how, when, who/what, to do to access SAFE services. Ex. *“You can text or call the same numbers you already have. We are 24/7 so an advocate will be able to speak with you for a few minutes if you need to. We also offer free counseling to victims of abuse. Is that something you’re interested in?... To contact our counseling and support group services you can call 512-356-1553 and leave a message; they will return your call within a week to set up an appointment. Or you can come in between 9 am–noon on Wednesday mornings for a first come, first served walk-in session.”*

## Technology Specific Skills

## Showing digital social presence

### Use of emotive language and emoticons

Emotive language and emoticons are used in chat and text calls to signal tone. Examples include use of exclamation points, smiley faces, and hearts.

!!! ☺ ☺ ☺ ♥ ♥ ♥

### Internet-based referrals and education materials

Advocate uses chat or text to send website addresses that are hyperlinked to the website.

### Minimal text-based encouragers

Advocate uses language to encourage service user. Advocate uses encouragers like a “verbal head nod.” Ex: “mmhmm”; “yeah”; “ok”.

### Concise and accessible written response

Advocate uses straightforward and short sentences to convey as much information as possible in a few lines of text. Ex: *“I think we can work within your limitations. I’d suggest getting in touch with the management at your apartment and explaining the situation. Since it sounds like she’s not paying rent, she might not have much legal grounds to be staying there. You can also contact the Austin Tenants Council to find out what your legal rights are: <https://www.housing-rights.org/>”*

### Timely responsiveness to service user

Advocate responds in a prompt manner to chat/texts from service users. Ex: *“Sorry about that earlier. There were a high number of chats and they become inactive after 8 minutes so I couldn’t reach back out. Do you mean evening hours for walk in counseling?”; “One moment please. Sorry about that. Was having an issue with my computer.”*

### Metacommunication about content and tone

Advocate uses language to convey tone and show presence via text. Advocate uses language that expresses emotion, personality, and empathy in a way that maintains human connection and clarity with the service user. *“We do not have a room tonight, but we might tomorrow. Please text us tomorrow morning to check back about the room. I encourage you to speak with the boss about getting a ride here and planning with him about being able to do so at anytime tomorrow if we have a room available... Thank you for reaching out to us tonight. I wish I had better news, but I am glad you will reach back out to us in the morning.”*; Ex: *“Ok, give me just a moment to type please.”; “I have more just bear with me for a few minutes please.”*

### Communication about response and service expectations

Advocate communicates to services user about how the chat/text functions of the hotline work and/or specifically mentions wait times for **SAFEline**. Ex: *“I’m glad you’re reaching out! Everything we talk about today is confidential (unless you tell me about child/elder abuse).”; “Also, I want to let you know that I can spend about 10 more minutes chatting tonight. However, we do want to provide you with support. You are more than welcome to contact our 24/7 hotline or maybe we can find some support closer to where you live. But for these last 10 minutes I want to make sure we talk about what you think is the most important need you have right now.”; “Our organization provides support to those affected by interpersonal violence, sexual assault, and human trafficking. We are located in Austin, Texas, USA and primarily focus our services here.”*

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## SAFEline Technology-facilitated Advocacy Model of Service

**Theoretical Bases:** Trauma theory and trauma-informed care; empowerment theory; strengths perspective; conservation of resources theory; transtheoretical model of behavioral change; social cognitive/self-efficacy theory.

## Inputs

### Resources and Funding

- Chat platform
- Text platform
- Phone call center
- Video platform (Bridge to Safety)

### Staffing

- **SAFEline** Program Director
- **SAFEline** Manager
- **SAFEline** Advocates
- Bridge to Safety advocate

### Virtual Space

- Web space
- Virtual promotion with quality assurance (i.e. the ability for managers to listen to advocate calls and a virtual waiting room for service users)
- Technical assistance/training for staff and Wifi for working remotely
- Collaborative app for teams (i.e. Slack, Teams, Google Chat)

### Physical Space

- **SAFEline** office space
- Staff break room

### Tools

- Training for staff
  - Tech-based team collaboration, still working together in the virtual space and access to all of the outputs
  - Shifts app. Have internal and external technology/apps
- Computers
- Phone

## External Factors

**Resource availability:** **SAFEline** works to connect all service users to SAFE services and/or other informal and formal supports in the Austin area. However, currently there is a shortage of available services in the Austin area to meet demand. Service users often face long wait lists and other challenges when attempting to access such services as shelter, housing programs, financial assistance, and therapeutic services. **SAFEline** opens the door to longer-term services but the lack of longer-term service availability is an external factor that ultimately impacts service users' overall outcomes.

**Availability of housing in Austin area:** Austin is currently one of the most expensive places to live in Texas and there is a housing shortage. Even fewer safe, affordable housing options are available for low-income individuals and families. Because of these immense gaps in affordable housing, **SAFEline** is limited in how it can assist service users with long-term housing stability.

**Systemic racism and bias:** The **SAFEline** program works to acknowledge and address systemic racism and the many ways racism and bias affect service users. **SAFEline** advocates work to address systemic racism and bias on an individual level and are committed to promoting change within the organization. However, systemic racism and bias are also macro-level issues that cannot be solely mitigated for service users by **SAFEline** advocates. The inequities caused by systemic racism, individual racism, and implicit bias impact service users' long-term outcomes.

**Economic inequality:** **SAFEline** operates within a broader economic climate. The United States, Texas, and Austin are all facing income disparities and inequities. Advocates provide information and access to services that will help service users find some economic stability; however, the current economic environment makes long-term stability challenging and will affect the long-term outcomes of service users.

## Outputs

- One-time and repeated sessions
  - Text-based
  - Chat-based
  - Phone-based
  - Virtual/Video Bridge to Safety)
- Referral and resource list
- Community education materials
- Emergency shelter nights
- Training
- Employee supervision

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## Appendix B:

### SAFEline Staff Fidelity Checklist

*The following checklist was created by the evaluation team and pilot tested and refined by the SAFEline staff. This tool aligns with the SAFEline logic model and can be modified for use by other programs. Consider using the tool periodically or routinely in paper or electronic format. This tool can guide supervision, staffing, training, and transcript review.*

1. Staff Member Name: \_\_\_\_\_
2. Service Date: \_\_\_\_\_
3. Service time: \_\_\_\_\_
4. Service Duration (in minutes): \_\_\_\_\_
5. Service Type:
  - a. Chat
  - b. Text
  - c. Phone
6. Service User Group:
  - a. Survivor/victim
  - b. Formal support person (e.g. social service staff, school personnel, clergy)
  - c. Informal support person (e.g. parent, cousin, friend)
  - d. Additional (fill in)
7. Type of Violence/Harm Referenced: (*Check all that apply.*)
  - a. Intimate partner violence
  - b. Adult sexual assault
  - c. Child abuse &/or neglect
  - d. Stalking
  - e. Potential human trafficking/Confirmed human trafficking
  - f. Child sexual abuse
  - g. Other physical assault
  - h. Elder abuse
  - i. Teen dating violence
  - j. Additional (fill in)
8. Primary Objective of Service Interactions: (*Select the best fit.*)
  - a. Support and connection
  - b. Identify needs and options related to harm/violence
  - c. Learn more about violence and trauma impacts
  - d. Improved safety/safety planning support
  - e. Resource and referral (within SAFE Alliance)

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- f. Resource and referral (outside of SAFE Alliance)
  - g. Shelter request/check-in
9. Skills Used in the Session: *(Check all that apply.)*
- Welcoming to services:** Advocate welcomes the service user to the interaction and asks them how they are doing and how they may help them today.
  - Establishing safety:** Advocate assesses for safety and makes sure the service user is safe enough to interact.
  - Crisis intervention de-escalation:** Advocate uses strategies to address immediate crisis and safety needs of service user.
  - Assessment of needs and goals:** Advocate asks questions to identify service user's purpose, goals, needs, and presenting issues.
  - Identify service user strengths:** Advocate uses words, approaches, and phrases that reflect and focus on an individual's self-determination, strength, and resiliency.
  - Explaining chat/text services:** Advocate communicates about how the chat/text functions of the hotline work, including technology safety.
  - Safety planning:** Advocate helps service user think about their safety and engages in an assessment of safety needs and issues with sources of harm, such as current or former partner.
  - Help service user identify options:** Advocate provides and helps to identify different options with service users.
  - Help-seeking assistance:** Advocate helps the service user identify individuals, groups, or organizations they can go to for help or to get their needs met.
  - Identify formal supports:** Advocate helps identify specific formal support services for the service user.
  - Identify informal supports:** Advocate helps identify specific informal support services for the service user.
  - Resource referrals-internal:** Advocate gives information about resources inside of the SAFE organization to address expressed needs.
  - Resource referrals-external:** Advocate gives information about resources outside of SAFE to address expressed needs.
  - Psychoeducation about relationships and trauma:** Advocate shares information about healthy and unhealthy relationships, trauma reactions, and violence impacts.
  - Rights education:** Advocate gives information, referrals, and resources about civil rights.
  - Identification of wellness strategies:** Advocates work with service users to identify self-defined wellness strategies, including coping approaches.
  - Emoticons, emojis:** Advocate uses emotive language and emoticons in chat and text calls to signal tone.
  - Establish boundaries of chat/text line:** Advocate shares what services they are able to provide or not provide through SAFEline or in their role as advocates.
  - Encouraging service user to contact service again:** Advocate encourages service user to reach back out if they need any additional services.
10. What referrals did you provide?
- a. SAFE shelter
  - b. SAFE counseling services
  - c. Eloise House (SANE services)

- d. SAFE legal services
- e. SAFE donation center
- f. Other SAFE program
- g. Other Austin shelter
- h. Other Austin counseling services
- i. Transportation resources
- j. Food bank or other food resources
- k. Law enforcement/Criminal Justice
- l. Shelter outside of Austin
- m. Other legal aid
- n. Hospital/physical health resources
- o. Transitional or permanent housing resources (Non-SAFE or emergency shelter resources)
- p. Others (Fill in): \_\_\_\_\_

**Service User Demographics**

*Please answer the following questions if disclosed during the service interaction.*

11. Age

- a. Under 18
- b. 18-25
- c. 26-50
- d. 50+

12. Gender

- a. Female
- b. Male
- c. Additional (fill in)

13. Did the chat/text session have any technical issues?

- a. Yes
- b. No

14. If yes, please describe the technical issues: \_\_\_\_\_

15. Did the service user mention any barriers to engaging in SAFEline services?

- a. Yes
- b. No

16. If yes, please describe the barriers encountered: \_\_\_\_\_

17. Is there anything else to note about the service interaction?

\_\_\_\_\_

\_\_\_\_\_

## Appendix C:

### Evaluation of Technology-Based Advocacy-Brief Survey for Service Users<sup>4</sup>

*Survey questions to assess user experience were developed, tested and refined by the study team to correspond with the SAFEline logic model. Questions were asked immediately following a chat or text session via voluntary and anonymous electronic survey.*

1. How many times have you contacted SAFEline before?
  - a. This is the first time
  - b. 2-3 times
  - c. 4-6 times
  - d. More than 6 times
  
2. This time, did you receive support on SAFEline by:
  - a. Phone
  - b. Text
  - c. Online chat
  
3. How long did you wait to be connected with an advocate?
  - a. 1 minute or less
  - b. 2-5 minutes
  - c. 6-10 minutes
  - d. 10-20 minutes
  - e. More than 20 minutes
  
4. What was the main reason you contacted SAFEline this time? Please briefly describe:  
\_\_\_\_\_
  
5. What was your primary goal in contacting SAFEline this time? (Check all that apply.)
  - a. Help with shelter
  - b. Help with abuse/violence
  - c. Help with counseling or support
  - d. Help with housing (other than shelter)
  - e. Help someone else experiencing violence or abuse
  - f. Other, please fill in: \_\_\_\_\_
  
6. How much support did you get from SAFEline this time you contacted them?
  - a. A lot of support
  - b. Some support
  - c. A little support
  - d. No support at all

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<sup>4</sup> Adapted in part by the study team from: Sullivan, C.M. & Allen, N. (n.d.) *The community advocacy fidelity questions*. Available at <https://cap.vaw.msu.edu/maintaining-program-integrity/>

Please tell us how much you agree or disagree with the following statements.

7. SAFeline staff helped me with my needs
  - a. Strongly agree
  - b. Agree
  - c. Disagree
  - d. Strongly disagree
  
8. SAFeline staff members are knowledgeable about resources.
  - a. Strongly Agree
  - b. Agree
  - c. Disagree
  - d. Strongly disagree
  
9. I learned more about keeping safe because of my interaction with SAFeline.
  - a. Strongly Agree
  - b. Agree
  - c. Disagree
  - d. Strongly disagree
  
10. As a result of your time with SAFeline staff, how much more information do you have about choices available to you?
  - a. A lot more information
  - b. Somewhat more information
  - c. A little more information
  - d. No more information
  
11. Overall, how satisfied have you been with the amount of time SAFeline staff put in toward working on these things with you today?
  - a. Not satisfied - Not enough time
  - b. Satisfied - Just the right amount of time
  - c. Not satisfied - Too much time
  
12. Who decided what you discussed during your SAFeline session today?
  - a. I did, completely
  - b. I did, mostly
  - c. The SAFeline staff member and I, equally
  - d. The SAFeline staff member did, mostly
  - e. The SAFeline staff member, completely
  
13. Overall, how satisfied are you with your interaction with SAFeline?
  - a. Very satisfied
  - b. Satisfied
  - c. Somewhat unsatisfied
  - d. Very unsatisfied
  
14. How likely would you be to contact SAFeline again?
  - a. Very likely
  - b. Likely
  - c. Unlikely
  - d. Very unlikely