

# Accomplishments of the Domestic Violence Hotline, Online Connections and Text: Initial Findings and Next Steps



The National Domestic Violence Hotline (The Hotline) and loveisrespect (LIR), the help line targeted towards young people, provide information and assistance to adult and youth victims/survivors of domestic or dating violence, their friends and family, service providers, and others, including batterers/abusers. The Hotline and LIR provide these services via 24-hour, national, toll-free, and confidential telephone hotlines, online chat, text messaging services, and websites. They are funded by the Family Violence Prevention Services Act (FVPSA) Program within the Family and Youth Services Bureau (FYSB) at the Administration for Children and Families (ACF) and serve as critical partners in the intervention, prevention, and resource assistance efforts of domestic violence and dating violence service providers to build healthy, safe, and supportive communities. The Hotline and LIR provide (1) **crisis intervention** and support; (2) **information** about national, state, and community resources; and (3) **nationwide referrals** to domestic violence shelters and outreach programs, social service agencies and programs, legal assistance providers, economic self-sufficiency programs, and other related services.

The purpose of the Accomplishments of the Domestic Violence Hotline, Online Connections, and Text (ADVHOCaT) project is to evaluate the services provided by The Hotline and LIR. The George Washington University Milken Institute School of Public Health is conducting the project in partnership with ACF’s Office of Planning, Research, and Evaluation (OPRE) and FVPSA. The objectives of the first phase of the ADVHOCaT project are to describe the activities and immediate outcomes of The Hotline and LIR and to revise or develop new performance measures. This fact sheet presents initial findings from the first phase of the project, as well as next steps for data collection and analyses.

## Research Questions:

The first phase of the ADVHOCaT project considers the following questions:

- 1) What services and resources do The Hotline/LIR provide to contactors (i.e., those who contact The Hotline and LIR, including victims/survivors, friends and family, service providers, and batterers/abusers?)
- 2) Do contactors receive the information and assistance they need and/or seek?
- 3) Do contactors view the information and assistance as helpful?
- 4) What are the trends and patterns in the various modes of service and which modes of service do contactors prefer?

## Sources of Data:

The ADVHOCaT project leverages several sources of data to address the above research questions. These data sources include information about phone calls, chats, and text messages and website activity, as well as information about contactors.

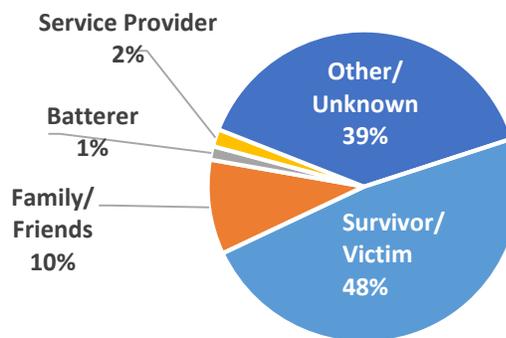
Data Collection	How is the data collected?
Advocate Caller Application (ACA)	Advocates (i.e., The Hotline/LIR staff who answer calls/chats/texts) manually enter anonymous data about the <b>caller/chatter/texter</b> and the <b>call/chat/text</b> into the ACA database.
Immediate Outcomes of Contact Survey	This survey assesses contactors’ perceptions immediately after interacting with an advocate. A Hotline/LIR staff member other than the advocate asks <b>callers</b> the questions. <b>Chatters</b> complete the survey after ending their chat. <b>Website visitors</b> click a link on The Hotline/LIR websites to complete the survey online.
Preference of Use Survey	<b>Website visitors</b> complete survey questions online after clicking a link on The Hotline or LIR websites about their preferred mode of contacting The Hotline or LIR.
Observational Listening Instrument	Trained researchers use a data collection instrument to assess the interaction between <b>callers</b> and advocates who have spoken via phone.
Live Person Platform	The Live Person Platform that hosts/manages the chats automatically collects <b>chat</b> -related data (including chat transcripts) and maintains pre/post survey data that the <b>chatter</b> voluntarily provides.
Phone	The phone data system automatically collects data related to the <b>phone calls</b> , such as the number of calls received, the number of unanswered calls, and each call’s duration.
Google Analytics	Google Analytics automatically collects data about use of The Hotline and LIR <b>websites</b> .



## Who is Contacting The Hotline and LIR?

Between January 2014 and December 2015, The Hotline and LIR received over 500,000 contacts across three modes: phone, online chat, and text messaging. Using data from the Advocate Caller Application (ACA), *Figure 1* describes the types of contactors, which include victims/survivors, friends and family of victims/ survivors, batterers/abusers, service providers, and people who did not identify themselves into one of these categories (other/unknown). Most contacts made to The Hotline and LIR came from victims/survivors (48%) and contactors who did not identify themselves (39%).

**Figure 1. Types of Contactors to The Hotline and LIR**



**Table 1. Services Provided by The Hotline /LIR (%)\***

	The Hotline	LIR
Crisis Intervention	43.1	25.5
Safety Planning	37.2	18.3
Referral	34.8	20.0
DV Education	13.6	10.3
Healthy Relationships	7.9	19.4

\*Percentages do not add to 100%; advocates can select more than one service provided in the ACA

### Question 1: Services Provided

The Hotline and LIR advocates provide a range of services to meet contactors' needs, including talking about strategies for crisis intervention and safety planning, referral to resources and services, and education about domestic violence and healthy relationships. *Table 1* summarizes data from the ACA and indicates the percentage of contactors that were provided various services. Forthcoming analyses of chat transcripts and data from observational listening will provide additional information about the services and resources provided to contactors.

**Tables 2 and 3. Self-Reported Immediate Outcomes for Chatters**

Increase in Knowledge	Percent of Chatters	Satisfaction with Services	Percent of Chatters
5 = A lot	47.2	Excellent	66.2
4	15.6	Very Good	15.8
3 = Somewhat	18.3	Good	7.5
2	4.9	Fair	4.0
1 = Not at all	14.0	Poor	6.6

### Questions 2 and 3: Self-Reported Immediate Outcomes

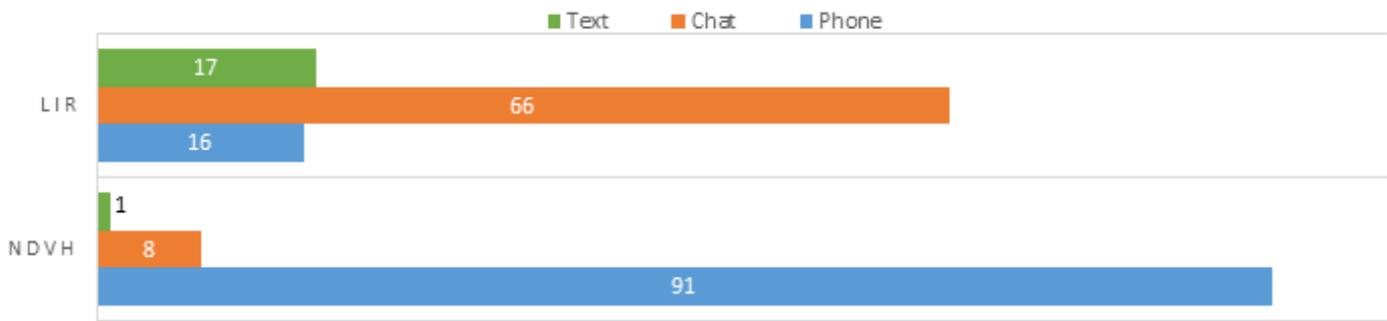
Those who contacted The Hotline and LIR by phone or chat or who accessed The Hotline and LIR websites were given the option to complete the Immediate Outcomes of Contact survey. Chatters also voluntarily complete a post-chat survey. *Tables 2 and 3* summarize chatters' responses to two questions (completed by 17.4% of all chatters): A) How much did your

knowledge about abusive relationships increase as a result of contacting us?; and B) How were the overall services you received through chat? ADVHOCaT continues to analyze survey data from callers and website visitors. Future analyses of chat transcripts and observational listening data will describe the advocate interaction process, as well as the extent to which provided assistance was needed or sought.

### Question 4: Trends in Mode of Service

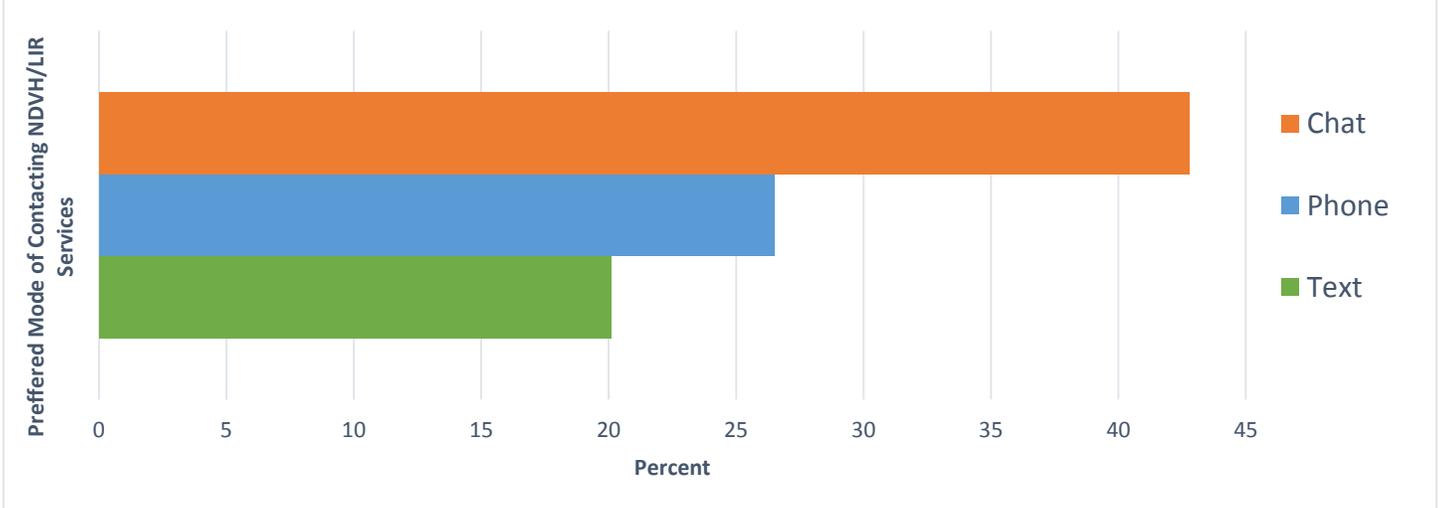
Data from the ACA provide information about the ways by which contactors connect with The Hotline and LIR advocates. The most common mode of contact (*Figure 2*) for all contactors to LIR was chat (66%), followed by text (17%) and phone (16%). By contrast, the most common mode of contact to The Hotline was phone (91%), followed by chat (8%).

**Figure 2. Mode Used to Contact The Hotline and LIR (% of contactors)**



To understand trends in the modes by which contactors engage with The Hotline and LIR, the ADVHOCaT project is analyzing data from the Live Person and phone databases. Additionally, those who visited The Hotline and LIR websites, Facebook pages, or Instagram accounts were asked to complete a web-based survey about their preferred mode of accessing The Hotline and LIR services. The largest percentage of survey respondents (43%) identified chat as their preferred mode of connecting with a Hotline or LIR advocate (*Figure 3*). Upcoming reports will provide further analyses of these results.

**Figure 3: Preferred mode of contacting The Hotline/LIR services**



**Next Steps**

The second phase of the ADVHOCaT project will follow up (after approximately 2 weeks) on short term outcomes for those who contact The NDVH and LIR. The study team is currently working with experts in the domestic violence and hotline evaluation fields to identify and develop methods for following up with contactors while maintaining their safety and confidentiality.

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