

Theoretical Framework and Performance Measures for the National Domestic Violence Hotline

Report from the National Domestic Violence Hotline Services Assessment Framework Based on Theory (SAF-T) Project



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Overview

Introduction

This report describes efforts to develop a survivor-centered theoretical framework. It also explains the processes used to develop, test, and refine a set of theoretically based performance measures for program assessment of the National Domestic Violence Hotline ([The Hotline](#)[®]) and presents results of a program assessment using data from The Hotline.

Primary Research Questions

Three overarching research questions guided the study design to test and refine performance measures for The Hotline:

1. To what extent are contactors¹ engaged with **survivor-centered approaches** during interactions with The Hotline?
2. To what extent are contactors engaged in **survivor-centered activities** during interactions with The Hotline?
3. To what extent are contactors engaged with **survivor-centered approaches** and engaged in **survivor-centered activities** during interactions with The Hotline?

Purpose

The purpose of this report is to help a broad audience (e.g., practitioners, policy makers, academicians, researchers, and the public) understand the process of developing a theoretical framework for a brief crisis intervention and associated performance measures to inform program performance monitoring and evaluation.

¹ We use the term “contactors” to refer to individuals who contact The Hotline via phone, online chat, or text.

Key Findings and Highlights

Key findings and highlights from the first two phases of the SAF-T project include the following:

- A survivor-centered framework for brief crisis intervention depicts the approach and activities necessary to support and empower those affected by relationship abuse. The combined use of both the survivor-centered approach and activities will likely result in better outcomes.
- Analyses of data from The Hotline led to the recommendation of seven theoretically based performance measures.
- Contactors were effectively engaged with a combination of both survivor-centered approaches and activities during interactions with The Hotline.

Methods

We reviewed published literature and de-identified online chat transcripts. Findings from these activities were incorporated into for a four-step concept mapping process used to develop a survivor-centered framework. We used the final framework to inform the development of a set of performance measures and analyzed data currently collected by The Hotline to conduct a program assessment.

Glossary

Advocates are staff from The Hotline who provide crisis intervention and other services to individuals who contact The Hotline via phone, online chat, or text

Constructs are complex concepts or ideas formed from the synthesis of more simple concepts or ideas (VandenBos, 2015).

Contactors are individuals who contact The Hotline via phone, online chat, or text.

Performance monitoring (and improvement) is the process of measuring and reporting program performance for the purpose of continuous quality improvement.

Program assessment is a theoretically based approach designed to answer questions about a program. Performance monitoring (and improvement) and program evaluation are two types of program assessment.

Program evaluation is a systematic method used to determine how well a program is working.

Salesforce is a management information system The Hotline uses to systematically record “demographic and situational” information about calls, instant messages, and texts received and details about advocacy services provided during each interaction.

Executive Summary

Purpose

The purpose of this report is to help a broad audience (e.g., practitioners, policy makers, academicians, researchers, and the public) understand the process of developing a theoretical framework for a brief crisis intervention and associated performance measures to inform program performance monitoring and evaluation. The report includes a description of project objectives, methods used, research questions addressed, key findings from program assessment, and recommendations.

Background

The National Domestic Violence Hotline (The Hotline[®]) provides 24-hour, national, toll-free, and confidential advocacy services by phone, online chat, and text messaging. It offers brief crisis intervention, safety planning, emotional support, resources, and referrals to community programs. The Hotline informs and assists adult victims/survivors of relationship abuse, their family and household members, as well as others affected by violence to build healthy, safe, and supportive communities and families. Through its loveisrespect project, The Hotline provides tailored services to youth and young adults focused on promoting healthy relationships and preventing patterns of abuse (National Domestic Violence Hotline, 2017).

Demonstrating impact for domestic violence programs, such as crisis intervention hotlines, poses significant challenges. To achieve appropriate outcomes, abuse victims/survivors require tailored responses to address their specific experiences and circumstances. Program evaluation and performance monitoring are critical for understanding the outcomes of programs as well as for making program adjustments. Additionally, comprehensive and relevant measures of performance must reflect program complexity. A program theory is necessary to explain how and why a program will produce desired outcomes (Hansen, Kanning, Lauer, Steinacker, & Schlicht, 2017). Yet, no existing theories of behavior change related to hotline use adequately explain how or why The Hotline can expect to achieve desired outcomes.

The Office of Planning, Research, and Evaluation and the Family Violence Prevention and Services Act (FVPSA) Program at the Administration for Children and Families (ACF) contracted with Westat and its subcontractor, the University of Pittsburgh Graduate School of Public Health, to conduct the multi-phase SAF-T project. We used a theoretically grounded and stakeholder-informed approach to accomplish the project’s three objectives:

1. Develop a theoretical framework for The Hotline services based on behavior change theory,
2. Develop performance measures based on the framework for ongoing monitoring and future evaluation of services provided by The Hotline, and
3. Provide feedback to ACF and The Hotline regarding findings of performance measurement to inform program improvement efforts.

Methods

To develop the theoretical framework, we utilized a series of qualitative approaches. Initial activities included a review of published literature, interviews with Advocates,² and review of de-identified online chat transcripts from The Hotline. These activities provided rich content for a four-step concept mapping process involving a diverse set of participants recruited from five stakeholder groups. Through these concept mapping activities, stakeholders identified 106 factors necessary for effective brief crisis intervention to empower and support those affected by relationship abuse. Further analysis yielded eight key constructs.³ The Hotline, ACF, expert panel members, and SAF-T project staff collaborated on refinement of the final theoretical framework and identification of an initial set of performance measures for The Hotline.

The survivor-centered framework applies to those affected by relationship abuse who may benefit from brief crisis intervention provided by The Hotline. The framework focuses on survivor outcomes of feeling supported and empowered and organizes key constructs into two components: approach and activities. The approach component of the framework includes constructs specific to expressing sensitivity, building trust and rapport, as well as providing validation. The activities component includes constructs specific to assessing survivor perspectives and beliefs, assessing situation and needs, developing an action and safety plan,

² We use the term “Advocate” to describe staff from The Hotline who provide crisis intervention and other services to individuals who contact The Hotline via phone, online chat, or text.

³ Constructs are complex concepts or ideas formed from the synthesis of more simple concepts or ideas (VandenBos, 2015).

and ultimately, sharing resources. This survivor-centered framework prioritizes the needs and wishes of survivors and respects their readiness to make changes. It tailors the intervention approach and activities to the unique needs of each survivor seeking assistance, to ensure that they feel supported and empowered.

During the second phase of the project, we used the final framework to inform the development of performance measures and identified numerical indicators from data currently collected by The Hotline. We began the process by matching theoretical framework factors to three existing data sources from The Hotline: (1) Salesforce database,⁴ (2) Quality Assurance (QA) forms⁵ for assessing phone Advocate performance, and (3) QA forms for assessing digital Advocate performance. Next, we selected preliminary performance measures with the strongest conceptual fit between theoretical framework factors and data elements from The Hotline’s existing data sources. We then tested and refined these measures through a multi-step process with input from experts and stakeholders and conducted analyses using data from The Hotline to address three main research questions. These questions, which include several sub-questions, are guided by the theoretical framework. They are as follows:

1. To what extent are contactors⁶ engaged with **survivor-centered approaches** during interactions with The Hotline?
 - a. To what extent are contactors shown **sensitivity** during interactions with The Hotline?
 - b. To what extent are contactors engaged in a manner that facilitates **trust and rapport** during interactions with The Hotline?
 - c. To what extent are contactors provided with **validation and support** during interactions with The Hotline?

⁴ Salesforce is a management information system The Hotline uses to systematically record “demographic and situational” information about calls, instant messages, and texts received and details about advocacy services provided during each interaction.

⁵ QA forms include four scoring categories (skills support needed, building, effective, and mastery) for key skills essential to effective interactions; there are separate forms for digital and phone interactions. The Hotline supervisors use specific scoring criteria to routinely assess Advocate performance and complete at least two QA forms per Advocate each month. Phone supervisors conduct their assessment while the call is in progress, whereas digital supervisors conduct their assessments by reviewing transcripts after a contact has been completed.

⁶ We use the term “contactors” to refer to individuals who contact The Hotline via phone, online chat, or text.

2. To what extent are contactors engaged in **survivor-centered activities** during interactions with The Hotline?
 - a. To what extent are contactors' **perspectives and beliefs assessed** during interactions with The Hotline?
 - b. To what extent are contactors' **situation and needs assessed** during interactions with The Hotline?
 - c. To what extent are contactors encouraged and supported in the **development of a personalized action and safety plan** during interactions with The Hotline?
 - d. To what extent are contactors **provided with resources** during interactions with The Hotline?
3. To what extent are contactors engaged with **survivor-centered approaches** and engaged in **survivor-centered activities** during interactions with The Hotline?

Key Findings

Key findings from the first two phases of the SAF-T project include descriptions of (1) major assumptions of the final survivor-centered framework, (2) theoretically informed performance measures recommended for ongoing performance monitoring and evaluation, and (3) program assessment results from the analysis of data from The Hotline.

- **A survivor-centered framework for brief crisis intervention depicts the approach and activities necessary to support and empower those affected by relationship abuse.** The survivor-centered framework prioritizes the needs and wishes of survivors and respects their readiness to make changes. It focuses on tailoring the approach and activities to the specific needs of each individual seeking assistance to achieve the intended outcomes for survivors.
- **The combined use of both the survivor-centered approach and activities is important for survivors to feel supported and empowered.** The framework illustrates the importance of engaging survivors with both a survivor-centered approach and activities. In doing so, survivors are more likely to feel supported and empowered following a brief crisis intervention. While activities can be conducted independent of the approach, and result in positive outcomes, combining these activities with a survivor-centered approach will likely result in better outcomes. In

other words, the types of services provided during a brief crisis intervention are important, but the manner in which services are delivered also matters.

- **The theoretically grounded and stakeholder-informed approach supported development of a framework reflective of the unique context and goals of brief crisis interventions.** The resulting survivor-centered framework reflects current published literature on relationship abuse, safety behavior, and theory combined with stakeholder expertise and experiences.
- **Analyses of data from The Hotline using a preliminary set of performance measures led to the recommendation of seven final theoretically based performance measures:**
 1. Contactor was engaged using a kind and compassionate tone throughout chat/text/call (“express sensitivity”);
 2. Contactor was provided emotional support throughout chat/text/call (“build trust and rapport”);
 3. Contactor was validated consistently and appropriately throughout chat/text/call (“provide validation and support”);
 4. Contactor was helped to assess advantages, disadvantages, and potential risks of options (“assess survivor perspectives and beliefs”);
 5. Contactor was assisted in thinking about next steps and possible timeline (“assess survivor situation and needs”);
 6. Contactor was assessed for immediate safety (“develop action and safety plan”); and
 7. Contactor was provided information, resources, and options (“share resources”).
- **Contactors were effectively engaged with survivor-centered approaches during interactions with The Hotline.** These survivor-centered approaches included expressing sensitivity, building trust and rapport, and providing validation and support. Combined data across the three approaches revealed that 94.3 percent of phone contactors and 85.3 percent of digital contactors were effectively engaged with survivor-centered approaches. Individual *effective* ratings for each of the three performance measures in the approach component ranged from 91 to 98 percent among phone contacts and 78.2 to 88 percent among digital contacts.

- **Contactors were effectively engaged in survivor-centered activities during interactions with The Hotline.** However, across combined survivor-centered activities, contactors were engaged significantly more often during phone (94.2%) than digital (77.4%) contacts. The four activities included assessment of immediate safety, assessment of perspectives and beliefs, assessment of situation and needs, and sharing resources. *Effective* ratings for each of the four survivor-centered activities ranged from 90 to 100 percent among phone contacts and from 57.6 to 98.3 percent among digital contacts.
- **Contactors were effectively engaged with a combination of both survivor-centered approaches and activities during interactions with The Hotline.** We combined contacts rated as *effective* for the majority of the three approaches and the majority of the four activities and found that The Hotline effectively engaged the majority of contactors with a combination of both approach and activities. However, the combined *effective* rating was significantly higher among phone contacts (90.8%) than digital contacts (70.7%).

Based on results of our analyses, we recommend:

- The Hotline closely examine Advocate trainings and the assessment process for phone and digital modes and make adjustments, as needed, to ensure that they are appropriate and as consistent and streamlined as possible, considering the unique attributes of each mode. For example, significantly higher ratings of *effective* for phone contacts than digital contacts may reflect differences in how the two modes are assessed. Phone supervisors conduct their assessment while the call is in progress. In contrast, digital supervisors conduct their assessments by reviewing transcripts after a contact has been completed.
- ACF and The Hotline consider both the goal of the performance measurement and the potential level of burden to The Hotline staff when determining performance measurement frequency.
- ACF and The Hotline establish benchmarks for service provision that show The Hotline’s four-level quality ratings collapsed into two categories: *less than effective* and *effective*. We also recommend separate benchmarks for digital and phone contacts, given the differences between the two modes.

- The Hotline review and appropriately restructure the QA data collection database to facilitate data retrieval and thereby reduce burden and enhance completeness for future analysis.
- A skilled programmer or analyst design a push-button macro that The Hotline can use to populate the tables in this report with new data as desired.

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1. Introduction

The National Domestic Violence Hotline Services Assessment Framework based on Theory (SAF-T) project is a collaborative effort among Westat; the University of Pittsburgh Graduate School of Public Health; the Office of Planning, Research, and Evaluation (OPRE); and the Family Violence Prevention and Services Act (FVPSA) program within the Family and Youth Services Bureau at the Administration for Children and Families (ACF). The project had three objectives: (1) develop a theoretical framework for the National Domestic Violence Hotline ([The Hotline](#)[®]) services based on existing behavior change theory; (2) develop, test, and refine performance measures based on the framework for ongoing performance monitoring and future evaluation of services provided by The Hotline; and (3) provide ACF and The Hotline with performance measurement feedback to inform program improvement efforts. This report presents an overview of The Hotline and SAF-T project as well as a description of the methodology and results of project activities.

1.1 The Hotline

The Hotline's mission is to, "answer the call to support and shift power back to those affected by relationship abuse" (National Domestic Violence Hotline, 2018b). Initially funded with a \$1 million grant appropriated under the Violence Against Women Act of 1994, The Hotline answered its first call on February 21, 1996 (National Domestic Violence Hotline, 2018a). Through continued funding from the FVPSA program, The Hotline provides 24-hour, national, toll-free, and confidential advocacy services by phone, online chat, and text. It offers brief crisis intervention, safety planning, emotional support, resources, and referrals to community programs. The Hotline informs and assists adult victims/survivors of relationship abuse, their family and household members, as well as others affected by violence to build healthy, safe, and supportive communities and families. Through its [loveisrespect](#) project, The Hotline provides tailored services to youth and young adults focused on promoting healthy relationships and preventing patterns of abuse (National Domestic Violence Hotline, 2017).

The Hotline receives a monthly average of 17,765 contacts, and [loveisrespect](#) receives 3,219 (McDonnell et al., 2018). The most common method to contact The Hotline is by phone (91%), followed by online chat (8%) and text (1%). Online chat is the most common method to contact

loveisrespect, with 66 percent of contactors⁷ communicating this way, followed by text (17%) and phone (16%). The Hotline serves a variety of users, including victims/survivors, family/friends, service providers, and abusers. Almost half of contactors (48%) identified themselves as victims/survivors (McDonnell et al., 2018).

1.2 Purpose of the SAF-T Project

Demonstrating outcomes for domestic violence programs, such as crisis intervention hotlines, poses significant challenges. Program evaluation and performance monitoring are critical for understanding the outcomes of programs and for making program adjustments. In addition, comprehensive and relevant measures of performance for evaluation must reflect the complexity of these programs. To achieve appropriate outcomes, abuse victims/survivors require unique and tailored responses to address their specific experiences and circumstances. A program theory is necessary to explain how and why a program will produce desired outcomes (Hansen, Kanning, Lauer, Steinacker, & Schlicht, 2017). Yet, no existing theories of behavior change related to hotline use adequately explain how or why The Hotline can expect to achieve desired outcomes.

The National Domestic Violence Hotline Services Assessment Framework based on Theory (SAF-T) project is a multi-phase project. The purpose of the first phase of the project was to develop a theoretical framework based on existing behavior change theory and to develop performance measures for ongoing monitoring and future evaluation of services provided by The Hotline. The purpose of the second phase of the project was to (1) test and refine the performance measures developed in the first phase to improve operationalization and measurement and (2) provide ACF and The Hotline with performance measurement feedback to inform program improvement efforts.

We used principles of community-based participatory research to guide stakeholder engagement throughout the project (Burke et al., 2013). (See Appendix A for a more detailed description of the process we used for engaging stakeholders in the development of the theoretical framework.) The information presented in this report can help a broad audience (e.g., practitioners, policy makers, academicians, researchers, and the public) understand the

⁷ We use the term “contactors” to refer to individuals who contact The Hotline via phone, online chat, or text.

process of developing a theoretical framework for brief crisis intervention and developing associated performance measures to inform program performance monitoring and evaluation.

1.3 Organization of Report

The remaining chapters of this report present the methodology, results, and discussion of the SAF-T project. Chapter 2 contains a discussion of the literature review, Advocate⁸ interviews and review of The Hotline chat transcripts, the concept mapping process, and the resulting theoretical framework used to inform performance measure development. Chapter 3 discusses steps involved with identifying initial performance measures and the process associated with testing and refining performance measures. Chapter 4 presents results of the analysis of data from The Hotline and reports program performance on the proposed measures, and Chapter 5 provides a discussion of SAF-T project results, study strengths and limitations, and recommendations for next steps.

2. Theoretical Framework Development

We used multiple methods to address the first project objective of developing a theoretical framework for explaining the work of The Hotline. Primary sources of information included a review of published literature on relationship abuse (including domestic violence and dating violence), safety behavior, and theories of behavior change. Additionally, we interviewed Advocates from The Hotline about victim/survivor needs, reviewed de-identified online chat and text transcripts, and conducted a concept mapping activity. The following sections describe each of these methods.

2.1 Literature Review

We conducted a review of peer-reviewed literature on relationship abuse, safety behavior, and theory to uncover conceptual factors that support survivor-centered actions. The literature review identified 32 articles that applied a theoretical framework to safety behavior among

⁸ We use the term “Advocate” to describe staff from The Hotline who provide crisis intervention and other services to individuals who contact The Hotline via phone, online chat, or text.

relationship abuse survivors, and those articles addressed 22 theoretical frameworks. (See Appendix B for the final set of literature review citations.)

As Table 1 illustrates, the 32 articles most frequently incorporated the Transtheoretical Model, followed by the Socioecological Model and Investment Model. Other theories included the Theory of Reasoned Action, Psychosocial Readiness Model, and Theory of Planned Behavior. One-quarter of the articles applied more than one theory.

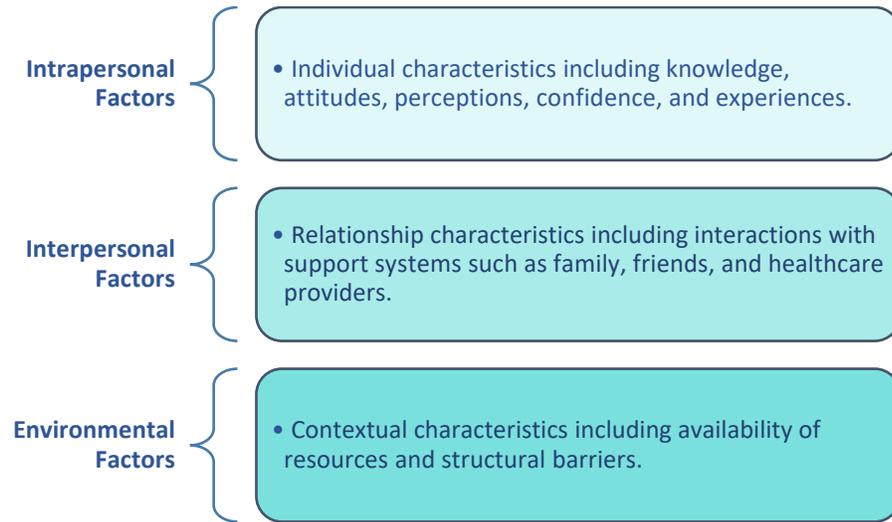
Table 1. Overview of most frequently used theories in the literature review of articles focused on relationship abuse, safety behavior, and theory

Name of theory	Number of articles using theory	Brief description
Transtheoretical Model/Stages of Change	14	This theory states that the behavior change process is conceptualized as five stages of readiness to change behavior and those stages are affected by 10 cognitive and behavioral processes of change (Prochaska & DiClemente, 1983).
Socioecological Model	5	This theory states that individual behaviors and decisions are influenced by a range of factors with multiple dimensions to include individual characteristics, interpersonal influences, community and organizational factors, and social, political, and cultural contexts (McLeroy, Bibeau, Steckler, & Glanz, 1988).
Investment Model	4	This theory conceptualizes relationship continuation as predicted by relationship commitment, which is a function of relationship investment, relationship satisfaction, and perceived alternatives (Rusbult & Martz, 1995).

The theoretical constructs⁹ found to support safety behaviors among those affected by relationship abuse were similar across the 32 articles and fit into three categories: intrapersonal, interpersonal, and environmental factors (Figure 1). Findings from the literature review informed the concept mapping activity. See Burke, O’Malley, Folb, Hagen, and Rabinovich (2019) for detailed information on the literature review process and results.

⁹ Constructs are complex concepts or ideas formed from the synthesis of more simple concepts or ideas (VandenBos, 2015).

Figure 1. Theoretical constructs that support safety behaviors among those affected by relationship abuse



2.2 Interviews with Advocates and Review of Hotline Chat Transcripts

We conducted semi-structured telephone interviews with four phone and five digital Advocates from The Hotline to understand how Advocates describe their work and the needs and requests of individuals who contact The Hotline. The Hotline responds to a number of different types of contacts each day. However, for the purpose of the interviews, we specifically focused on interactions with victims/survivors of relationship abuse. Participants described their brief crisis intervention and advocacy work across a range of scenarios, including how they navigated interactions, how they identified survivor needs, and what they did to meet these needs. We audio-recorded and subsequently transcribed the interviews, which typically lasted 30-45 minutes. Content analysis of interviews identified key themes of effective strategies for empowering and supporting contactors.

We also analyzed a sample of de-identified transcripts from online chat and text interactions between contactors and Advocates on one day per month for six months in 2015. Content analysis identified key reasons for contacting The Hotline and types of resources provided to contactors. Findings informed the concept mapping activity.

2.3 Concept Mapping

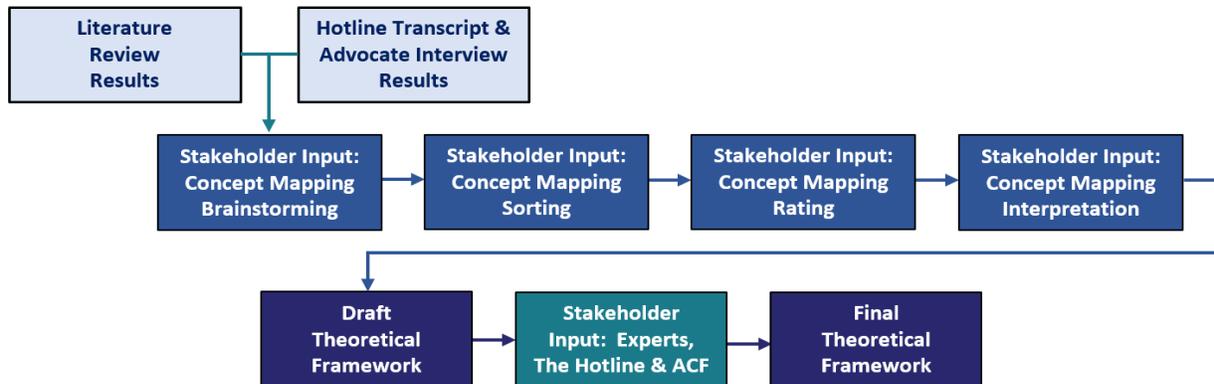
To explore perspectives on key factors necessary for effective brief crisis intervention for those affected by relationship abuse, we recruited stakeholders to participate in a concept mapping activity. The focus on empowerment and support in the concept mapping activity, rather than a broader category of “safety behaviors” identified in the literature review, reflects discussions with ACF, the SAF-T project team, and the expert panel.

Concept mapping is a participatory qualitative research method that helps users to develop a conceptual framework for how a group views a topic or aspects of a topic (Galvin, 1989; Kane & Trochim, 2007). Concept mapping uses a structured data collection approach, which allows for the collection of a wide range of participant-generated ideas and applications of quantitative analytic tools (e.g., multidimensional scaling and hierarchical cluster analysis). Results from this process produce illustrative cluster maps depicting relationships among shared ideas. The method has been used successfully with diverse stakeholder groups, ranging from adolescent schoolchildren to healthcare providers to community neighborhood residents; it has also been used to address a variety of community health topics, from pregnancy outcomes to school violence (Burke et al., 2005; Vaughn, Jones, & Burke, 2017). Concept mapping directly engages different types of stakeholders (Vaughn, Jones, & Burke, 2017) and stakeholders become collaborators throughout several steps, “contributing more than responses to questions” (Burke et al., 2005, p. 1394).

To recruit stakeholders to participate in the concept mapping activity, we used non-probabilistic sampling methods to construct the stakeholder sample across five stakeholder groups: (1) The Hotline staff, (2) The Hotline contactors, (3) service providers, (4) policy advocates, and (5) federal staff. The five groups were selected to include stakeholders representing a broad range of perspectives and domestic violence expertise and had varying relationships to The Hotline. To initiate the sampling process, we developed a list of potential sources to identify stakeholders with input from The Hotline, ACF, and the expert panel. Next, we sent email invitations to potential participants to introduce the project and associated stakeholder engagement activities and to request that potential participants nominate up to three additional people to participate in the concept mapping activities. The goal was to recruit 15 participants per stakeholder group.

Concept mapping participants completed at least one of the four online activities: brainstorming, sorting, rating, and interpretation. Figure 2 illustrates the concept mapping steps in the process for developing a theoretical framework and performance measures. In the first activity, brainstorming, participants added to a pre-populated list of key factors necessary for effective brief crisis intervention.

Figure 2. Steps of the concept mapping process to develop a theoretical framework

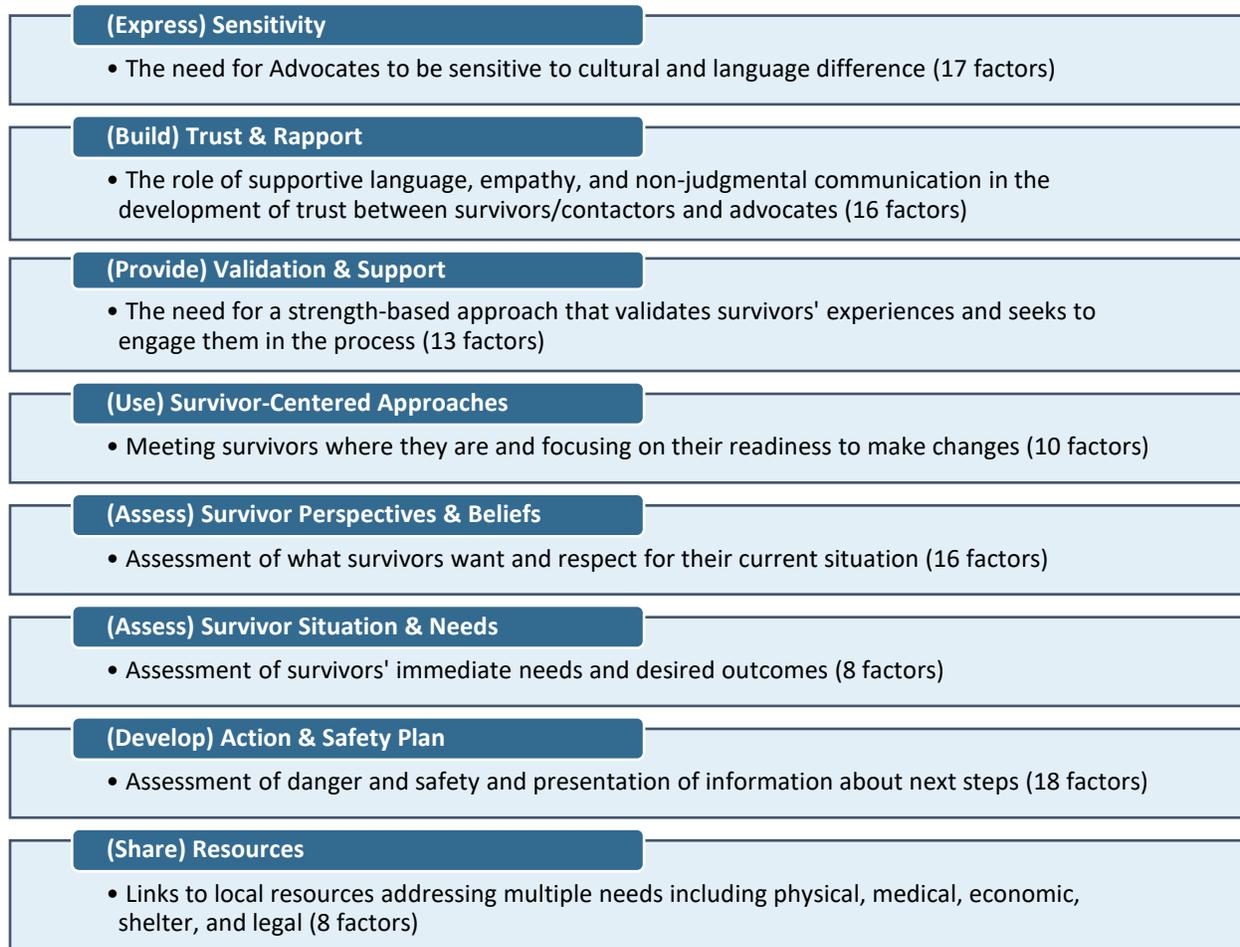


The pre-populated list included findings from the literature review, interviews with The Hotline Advocates, and issues identified in a review of selected online chat and text transcripts. Following the brainstorming activity, participants sorted the final set of factors into meaningful categories and named each category. Next, participants rated each factor on its level of importance for (1) empowering and (2) supporting those affected by relationship abuse. During a final online interactive interpretation session, participants provided input on the final constructs.

Through the four concept mapping activities, stakeholders identified 106 factors necessary for effective brief crisis intervention to empower and support those affected by relationship abuse.¹⁰ Further analyses yielded eight key constructs (see Figure 3). For example, “(Express) Sensitivity” includes 17 factors related to the need for Advocates to be sensitive to cultural and language differences.

¹⁰ Stakeholder participation varied by concept mapping activity: brainstorming (48 participants), sorting (33 participants), rating (32 participants), and interpretation (21 participants).

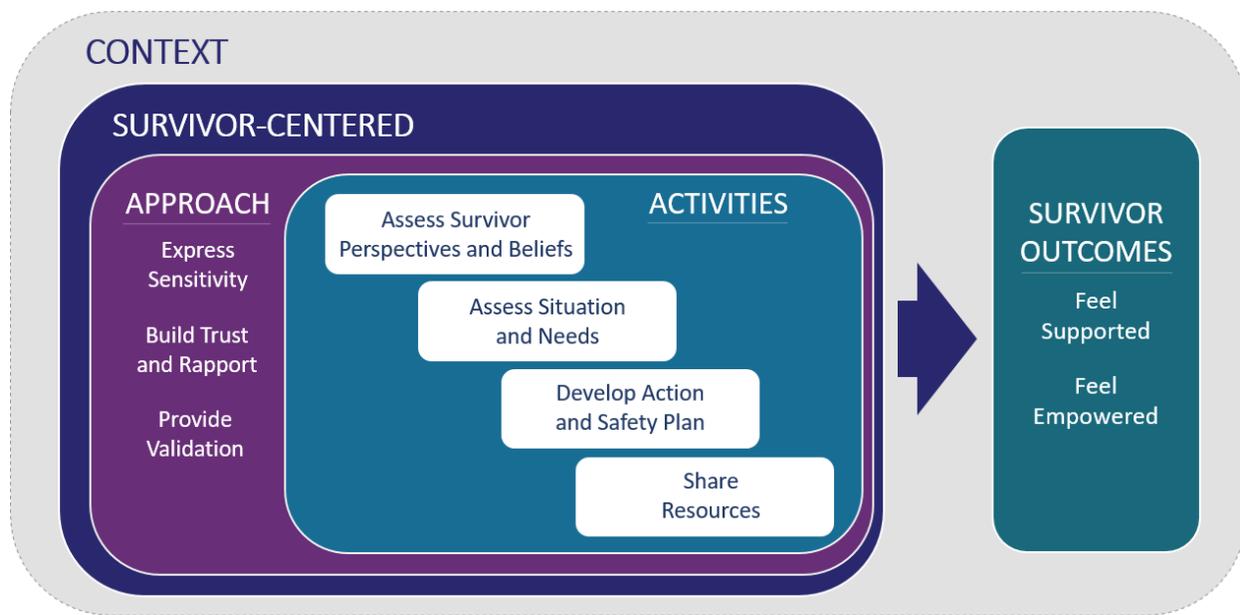
Figure 3. Eight key constructs that stakeholders identified as necessary for effective brief crisis intervention to empower and support those affected by relationship abuse



2.4 The Theoretical Framework

We engaged members of the expert panel, The Hotline, and ACF in the interpretation of the concept mapping findings and collaborated with them to refine the survivor-centered theoretical framework. Figure 4 presents the final theoretical framework and shows how the constructs informed the development of the theoretical framework. The survivor-centered framework focuses on survivor outcomes of feeling supported and empowered, and organizes key constructs into two components: approach and activities. This survivor-centered framework prioritizes the needs and wishes of survivors and respects their readiness to make changes. It focuses on tailoring the approach and activities to the unique needs of each individual seeking assistance to achieve the contactor's desired outcomes.

Figure 4. Survivor-centered framework for brief crisis intervention guiding the work of The Hotline



The approach component of the framework includes constructs specific to expressing sensitivity, building trust and rapport, as well as providing validation. This emphasizes the need for Advocates to be sensitive to cultural and language differences. The role of supportive language, empathy, and non-judgmental communication is essential for the development of trust between survivors/contactors and Advocates. It also reflects the need for a strengths-based approach that validates survivors' experiences and seeks to engage them in the process.

The activities component includes constructs specific to assessing survivor perspectives and beliefs, assessing situations and needs, developing an action and safety plan, and, ultimately, sharing resources. Assessment of what survivors want, their immediate needs and desired outcomes, and their safety is critical. Assessment is necessary to inform next steps and link survivors to relevant local resources to address their needs (e.g., physical, medical, economic, shelter, and legal resources). These activities ideally occur sequentially and result in a survivor-centered response.

As the nested illustration of the framework suggests, *survivor-centered* comprises both components (i.e., approach and activities) and the associated constructs.¹¹ When Advocates employ both survivor-centered approaches and activities, survivors are more likely to feel supported and empowered following a brief crisis intervention. While activities can be conducted independent of the approach and result in positive outcomes, combining these activities with a survivor-centered approach will likely result in better outcomes. In other words, the types of services provided during a brief crisis intervention are important, but the manner in which services are delivered also matters. Furthermore, outcomes of a brief crisis intervention may be affected by a broader context, such as cultural and community norms or state-specific policies and laws. The framework includes a shaded background to illustrate that outcomes of a brief crisis intervention may be influenced by a broader context.

3. Developing Performance Measures

The final survivor-centered theoretical framework formed the foundation for development of performance measures for The Hotline. The process for developing performance measures included a number of steps, which are described in the sections below.

3.1 Identifying Initial Performance Measures and Indicators

In this section, we discuss the steps involved in identifying an initial set of performance measures and indicators for testing and refinement. Specifically, we describe the process of matching theoretical framework factors to existing data sources, assessing conceptual fit between these factors and matched data elements, and refining these matches. Next, we explain our preliminary assessment of The Hotline data, selection of preliminary performance measures and indicators, and incorporation of stakeholder and expert feedback. Finally, we present the research questions that guided our testing and refinement of the final performance measures.

¹¹ In consultation with members of the expert panel and with input from The Hotline and ACF, we agreed that seven of the eight constructs identified could be grouped into two conceptually distinct components (i.e., approach and activities). However, our findings indicated that the “survivor-centered” construct differed from the other seven key constructs. Specifically, “survivor-centered” includes factors that overlap with the other seven key constructs, making it both an activity and an approach. Therefore, the final framework reflects the overarching nature of the “survivor-centered” construct.

3.1.1 Matching

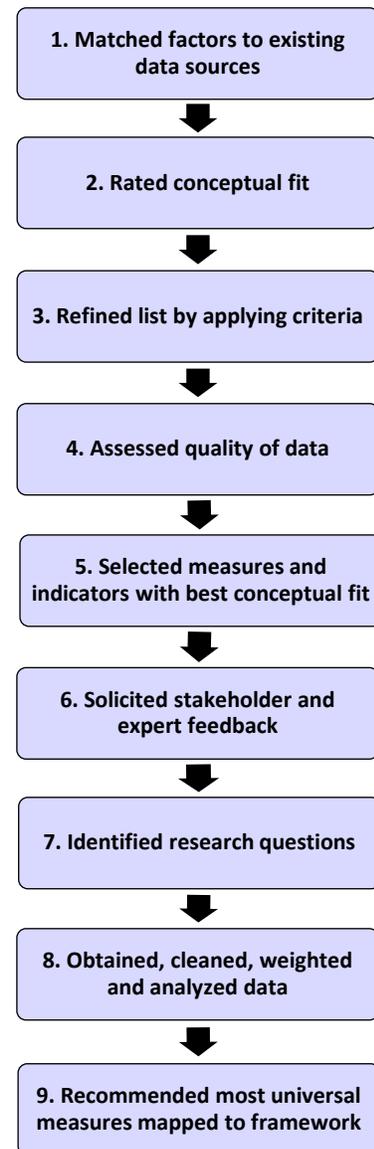
As Figure 5 illustrates, we began the process of identifying performance measures by matching theoretical framework factors to three existing data sources from The Hotline: (1) Salesforce database,¹² (2) Quality Assurance (QA) forms¹³ for assessing phone Advocate performance, and (3) QA forms for assessing digital Advocate performance. The Salesforce database includes information specific to interactions with contactors, which Advocates complete during and following all interactions. Supervisors complete the QA forms during and following observations of Advocates interactions with contactors.

Initially, the matching task involved matching 49 key theoretical framework factors to existing data elements.¹⁴ To ensure that we appropriately interpreted data elements, we shared the initial matching spreadsheet with The Hotline management staff for review. We incorporated feedback from The Hotline staff into the spreadsheet.

3.1.2 Conceptual Fit

As a next step, we independently rated the extent to which each theoretical factor was a good conceptual fit with the matched data elements. During a virtual expert panel meeting on October 30, 2018, we presented results of the matching exercise and subsequent ratings and

Figure 5. Process for developing performance measures



¹² Salesforce is a management information system The Hotline uses to systematically record “demographic and situational” information about calls, instant messages, and texts received and details about advocacy services provided during each interaction.

¹³ QA forms include four scoring categories (*skills support needed, building, effective, and mastery*) for key skills essential to effective interactions; there are separate forms for digital and phone interactions. The Hotline supervisors use specific scoring criteria to routinely assess Advocate performance and complete at least two QA forms per Advocate each month.

¹⁴ Although the results of the concept mapping yielded 106 theoretical factors, we limited our matching activity to the 49 factors rated as having high importance for empowerment and support.

facilitated a discussion on conceptual fit. Following the meeting, the experts and The Hotline staff reviewed the Excel spreadsheet and formally rated¹⁵ the conceptual fit between each theoretical factor and the matched data element. Three experts and one staff member from The Hotline participated in this rating exercise.

We reviewed individual ratings from our project team, The Hotline staff, and the experts to create an overall rating score. When raters agreed a match was not a good conceptual fit, it was dropped. Similarly, when raters agreed a match was a good conceptual fit, it moved forward to the next phase. If there was a lack of consensus regarding the quality of a match (e.g., raters disagreed or indicated uncertainty), it was allowed to carry over into the next phase. Theoretical framework factors with no corresponding data element did not progress to the next phase.¹⁶

3.1.3 List Refinement

We refined the list of data elements by applying these criteria to the remaining factors matched to data elements:

- Data elements must be collected for both phone and digital interactions, and
- Data elements can only be matched to factors from one theoretical component (i.e., activities or approach, but not both) with “(Use) Survivor-Centered Approaches” as the only exception.

If any data element failed to meet these two criteria, it was dropped from consideration.¹⁷ The remaining 25 matched data elements represented 25 potential performance measures.

¹⁵ The experts were each given a spreadsheet with a column for rating each factor/data element match as “Yes, good match,” “No, not a good match,” and “Maybe, a good match.” They were also encouraged to provide qualifying comments for each of their ratings.

¹⁶ Eleven factors were dropped due to no matching data element: *belief in survivor, patience, presentation of information about next steps as options – not forcing survivor to do something they are not ready for, understand survivor’s overall situation, crisis assessment, survivor’s current physical and mental health status, supportive language, recognition that survivor may be worried about other people (e.g., children) in the situation and how their decisions could impact them, cultural sensitivity, provide opportunity for survivor to self-assess, and solicitation of survivor’s vision for future.* Note: Factors reflect the language of concept mapping participants.

¹⁷ Four factors were dropped because their corresponding data elements are not collected for both phone and digital interactions: assurance of confidentiality, foundation of rapport – connect with survivor, direct connection to shelters, and emotional safety planning. Two factors were dropped because their corresponding data elements were matched to both theoretical components: strengths based and open mind.

3.1.4 Preliminary Assessment of The Hotline Data

We used a one-month sample of The Hotline data (August 2018) for a preliminary analysis to assess the quality of The Hotline data for the proposed data elements. Our analysis examined frequencies to assess the extent of missing data and identify outliers. Overall, there were 33,448 contacts to The Hotline during August 2018. Of these, 28,722 (85.9%) were to The Hotline¹⁸ and 4,726 (14.1%) were to the loveisrespect project.¹⁹ We created a subset of data for victims/survivors²⁰ only, which represented almost half (46.3%; n=15,475) of the total contacts for August 2018.²¹ We created a similar subset of data for the QA forms. Over three-quarters (79.8%; n=95) of the phone QA forms in August 2018 involved a victim/survivor. Approximately three-quarters (76.6%; n=72) of the digital QA forms involved victims/survivors. Results of the preliminary analysis indicated a sufficient amount of data to conduct planned analyses.

3.1.5 Selecting Preliminary Performance Measures and Indicators

Based on the results of our activities described above, we selected a set of preliminary performance measures with the strongest conceptual fit between theoretical framework factors and data elements, ensuring at least one performance measure for each theoretical component and construct of the theoretical framework. Then, we identified numeric indicators for each performance measure and developed corresponding research questions to guide the testing and refinement of the performance measures and indicators.

3.1.6 Incorporating Stakeholder and Expert Feedback into Study Design

We convened an expert panel meeting in Washington, DC on March 5, 2019, and presented the results of the activities described in the preceding sections, along with our proposed design for the next phase of the project. We received feedback on the 25 potential performance measures, indicators, and research questions and incorporated it into the final study design for testing and refinement of 10 performance measures. (See Appendix C for revised performance

¹⁸ The 28,722 contacts to The Hotline included online chat (33.7%) and phone (66.3%) contacts.

¹⁹ The 4,726 contacts to loveisrespect included online chat (54.5%), phone (32%), and text (13.5%) contacts.

²⁰ “Victim/survivor” includes individuals who have experienced intimate partner violence (IPV) and non-IPV (i.e., victims/survivors of abuse committed by individuals other than partners).

²¹ For these preliminary analyses, we included victims/survivors of IPV and non-IPV. Non-IPV victims/survivors represented only a small percentage of the sample.

measures and key indicators for testing, by theoretical framework component and construct.) The final research questions are presented in Section 3.1.7.

3.1.7 Research Questions

Three overarching research questions guided the study design to test and refine performance measures for The Hotline. Each of the overarching questions includes sub-questions that link to the major constructs in the final theoretical framework and are listed below:

1. To what extent are contactors engaged with **survivor-centered approaches** during interactions with The Hotline?
 - a. To what extent are contactors shown **sensitivity** during interactions with The Hotline?
 - b. To what extent are contactors engaged in a manner that facilitates trust and rapport during interactions with The Hotline?
 - c. To what extent are contactors provided with validation and support during interactions with The Hotline?
2. To what extent are contactors engaged in **survivor-centered activities** during interactions with The Hotline?
 - a. To what extent are contactors' **perspectives and beliefs assessed** during interactions with The Hotline?
 - b. To what extent are contactors' **situation and needs assessed** during interactions with The Hotline?
 - c. To what extent are contactors encouraged and supported in the **development of a personalized action and safety plan** during interactions with The Hotline?
 - d. To what extent are contactors **provided with resources** during interactions with The Hotline?
3. To what extent are contactors engaged with **survivor-centered approaches** and engaged in **survivor-centered activities** during interactions with The Hotline?

3.2 Testing and Refining Performance Measures

This section details the processes used to test and refine the preliminary performance measures, which included obtaining data from the Hotline to determine baseline measurements of the various numerical indicators for each performance measure. We provide a description of the data sources in Section 3.2.1, followed by a description of data cleaning steps (Section 3.2.2), data weighting procedures (Section 3.2.3), and data issues (Section 3.2.4). Then, we describe our analysis approach in Section 3.2.5.

3.2.1 Data Sources

The Hotline provided phone and digital QA form and Salesforce data for three non-consecutive months: August 2018, October 2018, and February 2019. We included three non-consecutive months to examine both seasonal variation (i.e., summer, fall, winter) and variation related to the length of time since the most recent Advocate training (conducted in January 2018 and September 2018). For consistency, we selected months following the July 2018 updates to data definitions. Details regarding the analysis of these data and results of testing are described in the sections below.

3.2.1.1 QA Forms

As noted in Section 3.1.1, Advocate supervisors at The Hotline use QA forms to assess the quality of services Advocates provide when responding to contacts to The Hotline. Supervisors are expected to routinely assess Advocate performance and complete at least two QA forms per Advocate each month, though new Advocates are assessed four times per month. The Hotline uses QA forms to internally evaluate Advocates and provide feedback for improvement.

Both phone and digital QA forms include 30 specific skills for assessment. While most of the skills listed on phone and digital QA forms are the same, a few are tailored to their respective modes of contact. Supervisors rate each observed skill based on a four-level scale, including *skills support needed*, *building*, *effective*, and *mastery*. The definitions of each level are shown in Table 2.

After a thorough review of QA form data, we selected 10 skills (or data elements) as performance measures.²² Each performance measure indicates the available data element that best represents each of the seven key theoretical framework constructs, with at least one data element per performance measure. The 10 performance measures were chosen from data elements on phone and digital QA forms.

Table 2. Criteria used by The Hotline supervisors to assess Advocate performance using QA forms[†]

Scoring category	Scoring category definition
Skills support needed	<ul style="list-style-type: none"> • Advocate appears to be in need of support of basic skills understanding • Advocate appears to be in need of mentoring from manager • Currently not following crisis intervention model (CIM) as outlined in training • Appears to get stuck on the call and struggles to get back on track • Many areas for growth documented
Building	<ul style="list-style-type: none"> • Advocate appears to demonstrate a start in understanding of skills needed to successfully implement CIM • Able to implement some of the CIM as outlined in training, while other times missing key components of CIM • Some areas for growth documented
Effective	<ul style="list-style-type: none"> • Advocate appears to have a solid understanding of the skills needed to successfully navigate a call • Is self-reliant and confident on call • Implements all areas of the CIM as outlined in training • No areas of growth documented
Mastery	<ul style="list-style-type: none"> • Advocate appears to have an exceptional expertise of the skills needed to successfully navigate a call • Has higher level understanding of CIM (as documented by examples) • Demonstrates creativity and innovation on call (as documented by examples) • Is able to demonstrate to the manager monitoring the call new ideas and ways to interact with caller (as documented by examples)

[†] Criteria provided by The Hotline.

²² The 10 preliminary measures were as follows: Contactor was... (1) engaged using a kind and compassionate tone throughout chat/text/call; (2) provided emotional support throughout chat/text/call; (3) offered encouragement for their plan of action developed; (4) validated consistently and appropriately throughout chat/text/call; (5) helped to assess advantages, disadvantages, and potential risks of options; (6) assisted in thinking about next steps and possible timeline; (7) assessed for immediate safety; (8) assessed for lethality, including suicide; (9) provided assistance in creating a comprehensive, customized safety plan; and (10) provided information, resources, and options.

3.2.1.2 Salesforce

The Salesforce database contains one record for each contact with The Hotline. During each interaction, Advocates enter data to include interaction date; Advocate identification (ID) number; contactor type (e.g., victim/survivor, family/friend, service provider), demographics, location, and needs; abuse type; and a summary of the conversation as well as additional information. To develop the performance measures, we used contacts by Advocate ID from Salesforce to match corresponding Advocate IDs on QA forms and then weighted data from the QA forms as described in Section 3.2.3.

3.2.2 Data Cleaning Process

As described earlier, The Hotline provided an extract of the Salesforce database and all phone and digital QA forms for August 2018, October 2018, and February 2019. To reduce burden, we requested three months of non-consecutive data spanning a six-month time period, hoping to capture some of the seasonal variation in our analysis file. The Hotline provided QA form data in individual Excel spreadsheets via Westat's secure File Transfer Protocol (FTP) website.

We designed a process to extract data from each Excel file and combined it by mode of contact for each of the three focal months. Next, we restricted data to victims/survivors and matched each Advocate ID number represented on QA forms to the corresponding Advocate ID represented in the Salesforce database within month and phone or digital contact. Any records associated with Advocate IDs that could not be matched between the two files were dropped from the analysis file. As a result, we excluded one phone QA form from October 2018.

Table 3 shows the number of QA forms for victim/survivor contacts to The Hotline by month and mode of contact. After excluding the one non-matching record, there were 277 phone QA forms and 254 digital QA forms, for a combined total of 531 QA forms across the three months.

We also found 3,833 Salesforce records with Advocate IDs that did not have a matching QA form; we excluded these from the analysis file. Based on the Advocate ID matching process, we excluded one or more Salesforce records for each month and mode of contact.

Table 3. Number of QA forms for victim/survivor contacts to The Hotline, by month and mode of contact – August 2018, October 2018, and February 2019¹

Month of contact	Number of QA forms		
	Phone	Digital	Combined
August 2018	100	74	174
October 2018	92	85	177
February 2019	85	95	180
Total – All months	277	254	531

¹ Excludes one QA form that did not have a corresponding Salesforce record.

Table 4 shows counts of Salesforce records received by month and mode of contact. Across all three months, there were a total of 13,404 digital contacts and more than twice as many phone contacts (n=27,849), for a total of 41,253 contacts.

Table 4. Number of Salesforce records for victim/survivor contacts to The Hotline, by month and mode of contact – August 2018, October 2018, and February 2019¹

Month of contact	Number of Salesforce records		
	Phone	Digital	Combined
August 2018	10,041	3,854	13,895
October 2018	9,346	4,725	14,071
February 2019	8,462	4,825	13,287
Total – All months	27,849	13,404	41,253

¹ Excludes 3,833 Salesforce Records that did not have a corresponding QA form.

3.2.3 Data Weighting Procedures

As a result of discussions during the March expert panel meeting, we decided to use “contact” as the unit of analysis. However, the performance measures are based on data elements found on QA forms. We developed weights that allow QA form data to represent the contactor experience. The number of QA forms per Advocate varies between one and four in our analysis file. An unweighted analysis would closely represent the experience of the Advocate, though more emphasis would be placed on the new Advocates as there are more QA forms for new Advocates. Also, representing Advocate experiences does not equal representing the contactor experience because of variation in the number of contacts per Advocate per month. Since the Salesforce database is at the contact level, we used counts of the number of contacts per month from the Salesforce file to weight performance measures selected from QA forms.

To develop weights, we implemented a multi-step process. First, we computed counts of contacts for each Advocate by month and mode of contact. Second, we used the computed number of contacts to adjust the QA form counts such that the weighted count when summarized to the Advocate level equaled the number of contacts in which the Advocate had participated for that month. For example, if Advocate #105 had two QA forms and 100 contact records in the Salesforce database, the weight of each QA form for that Advocate would be $100/2 = 50$. If Advocate #202 had two QA forms and 1,000 contact records in the Salesforce database, the weight of each QA form for that Advocate would be $1,000/2 = 500$. Therefore, QA forms for Advocate #202 would have 10 times the influence on analysis results. This corresponds to contactor experience, as the average contactor would be 10 times more likely to interact with Advocate #202 than with Advocate #105.

Third, we adjusted weights to account for Salesforce records with missing QA forms. As described earlier, these records were dropped from the file. Weights for the remaining records were adjusted to account for the excluded records within month and mode of contact. For example, for the August phone file, there were 557 records excluded, with 10,598 records remaining on the file. We applied an adjustment factor to the weight for the remaining records on the August phone file so the records in the file represented all phone contacts in August. The adjustment factor for the August phone file was $(10,598 + 557)/10,598 = 1.05$. Therefore, if there was seasonal variation, this weight adjustment will properly represent the month when records are combined across months.

This multi-stage weighting process resulted in a weighted number of QA forms for victim/survivor contacts to The Hotline by month and mode of contact. As shown in Table 5, the analysis file included weighted totals of 29,455 phone QA forms and 15,431 digital QA forms, for a combined weighted total of 44,886 QA forms.

Table 5. Weighted number of QA assessment forms for victim/survivor contacts to The Hotline, by month and mode of contact – August 2018, October 2018, and February 2019

Month of contact	Number of QA forms (weighted)		
	Phone	Digital	Combined
August 2018	10,598	4,877	15,475
October 2018	9,692	5,508	15,200
February 2019	9,165	5,046	14,211
Total – All months	29,455	15,431	44,886

Note: Weights account for the 3,833 Salesforce records that did not have a corresponding QA form.

3.2.4 Data Issues

Considering The Hotline assessment process, all Advocates with contacts represented in the Salesforce database should have at least one QA form for any given month. However, 3,833 contacts associated with 63 Advocates did not have corresponding QA forms within the same month. These missing QA forms occurred in all three months for both modes of contact, although August digital contacts represented one-third of the contacts associated with missing QA forms. Possible explanations offered by The Hotline staff included hiring of Advocates mid-month or Advocates switching from one mode of service to another (e.g., phone to digital) mid-month.

Clerical errors could also account for some of the missing forms. The percentage of missing QA forms was relatively small: less than 10 percent of all contacts. However, missing QA forms were more of an issue with digital contacts (11.6%) as compared to phone contacts (5.8%). As explained in preceding sections, we excluded any records associated with Advocate IDs that did not include matching QA and Salesforce data. If Advocates with missing QA forms are somehow different than those without missing QA forms, the results of the analysis could be biased.

Supervisors assess Advocates on each skill (data element) on the QA form by selecting a quality rating of *skills support needed*, *building*, *effective*, or *mastery*. If supervisors determine that a data element does not apply to the observed interaction, they should select *not applicable*. On rare occasions, there was a nonresponse resulting in missing data. Tables 6a and 6b provide the percentage missing and *not applicable* for each performance measure among phone contacts and digital contacts, respectively.

Table 6a. Weighted percentage of data completeness for victim/survivor *phone* contacts to The Hotline, by theoretical framework component, research question number, construct, and preliminary performance measure – August 2018, October 2018, and February 2019 (weighted N=29,455)

Theoretical framework component	Research question number	Construct	Preliminary performance measures	Weighted percentage ¹		
				Applicable responses ²	Not applicable	Missing
Approach	1a	(Express) Sensitivity	(1) Contactor was engaged using a kind and compassionate tone throughout chat/text/call	98.7	0.0	1.3
	1b	(Build) Trust & Rapport	(2) Contactor was provided acknowledgement of the impact of abuse endured or other hardships	96.9	2.5	0.5
	1c	(Provide) Validation & Support	(3) Contactor was offered encouragement for the plan of action they developed	93.2	3.2	3.6
			(4) Contactor was validated consistently and appropriately throughout chat/text/call	98.9	0.7	0.4
Activities	2a	(Assess) Survivor Perspectives & Beliefs	(5) Contactor was helped to assess advantages, disadvantages, and potential risks of options	85.8	12.2	2.0
		(Assess) Survivor Situation & Needs	(6) Contactor was assisted in thinking about next steps and possible timeline	89.6	6.9	3.5
		(Develop) Action & Safety Plan	(7) Contactor was assessed for immediate safety	99.1	0.0	0.9
			(8) Contactor was assessed for lethality, including suicide	80.8	15.9	3.4
			(9) Contactor was provided assistance in creating a comprehensive, customized safety plan	78.9	19.3	1.7
		(Share) Resources	(10) Contactor was provided information, resources, and options	92.8	5.0	2.1

¹ Row percentages may not total 100 due to rounding.

² Applicable responses include four quality rating categories: *skills support needed, building, effective, and mastery.*

Table 6b. Weighted percentage of data completeness for victim/survivor *digital* contacts to The Hotline, by theoretical framework component, research question number, construct, and performance measure – August 2018, October 2018, and February 2019 (weighted N = 15,431)

Theoretical framework component	Research question number	Construct	Performance measure	Weighted percentage		
				Applicable responses ¹	Not applicable	Missing
Approach	1a	(Express) Sensitivity	(1) Contactor was engaged using a kind and compassionate tone throughout chat/text/call	99.3	0.0	0.7
	1b	(Build) Trust & Rapport	(2) Contactor was provided acknowledgement of the impact of abuse endured or other hardships	99.3	0.0	0.7
	1c	(Provide) Validation & Support	(3) Contactor was offered encouragement for the plan of action they developed	56.8	41.2	2.0
			(4) Contactor was validated consistently and appropriately throughout chat/text/call	99.3	0.0	0.7
Activities	2a	(Assess) Survivor Perspectives & Beliefs	(5) Contactor was helped to assess advantages, disadvantages, and potential risks of options	73.0	25.6	1.4
	2b	(Assess) Survivor Situation & Needs	(6) Contactor was assisted in thinking about next steps and possible timeline	59.9	38.2	1.9
	2c	(Develop) Action & Safety Plan	(7) Contactor was assessed for immediate safety	98.7	0.0	1.3
			(8) Contactor was assessed for lethality, including suicide	83.6	16.0	0.4
			(9) Contactor was provided assistance in creating a comprehensive, customized safety plan	60.8	38.5	0.7
	2d	(Share) Resources	(10) Contactor was provided information, resources, and options	78.0	21.5	0.5

¹ Applicable responses include four quality rating categories: *skills support needed, building, effective, and mastery.*

3.2.4.1 Missing Data Elements

When we examined the 10 data elements identified as performance measures, we found some variation in missing data. For example, Table 6a shows that only 0.4 percent of phone contacts have missing data for performance measure #4 (Contactor was validated consistently and appropriately throughout chat/text/call) and that 3.6 percent of contacts have missing data on performance measure #3 (Contactor was offered encouragement for their plan of action developed). There was slightly less variation in missing data for digital contacts. Specifically, the percentage missing ranged from 0.4 percent for performance measure #8 (Contactor was assessed for lethality, including suicide) and 2.0 percent for performance measure #3 (Contactor was offered encouragement for their plan of action developed). Overall, missing data was not a major issue.

3.2.4.2 Not Applicable

The Hotline supervisor determines when a data element on the QA form is *not applicable* during a call. According to The Hotline, supervisors often use *not applicable* when the contactor disconnects soon after the Advocate assesses the situation. The use of *not applicable* varied greatly among the 10 data elements identified as performance measures. For example, Table 6a shows that, for phone contacts, supervisors never used *not applicable* for performance measure #1 (Contactor was engaged using a kind and compassionate tone throughout chat/text/call) or performance measure #7 (Contactor was assessed for immediate safety). In contrast, supervisors selected *not applicable* in 19.3 percent of contacts for performance measure #9 (Contactor was provided assistance in creating a comprehensive, customized safety plan).

Use of *not applicable* also varies across mode of contact. For example, supervisors selected *not applicable* for 3.2 percent of phone contacts and 41.2 percent of digital contacts for performance measure #3 (Contactor was offered encouragement for their plan of action developed). Assuming The Hotline supervisors used *not applicable* appropriately, it is important to note that population size in the analysis tables may vary by performance measure because some performance measures are not universal. However, universality is not necessarily an indicator of performance measure effectiveness. For contacts where a performance measure is applicable, a high quality rating would suggest that the contactor received high-quality service. However, if *not applicable* is being overused (i.e., used inappropriately), there may be bias in the results.

3.2.5 Analysis Approach

The goals of our analyses were to address study research questions and to recommend performance measures The Hotline can implement periodically for ongoing program assessment. We conducted numerous preliminary analyses to determine the best approach to examining performance measures. One consideration was whether to analyze combined data for digital and phone contacts. Through discussions with The Hotline and ACF, we discovered key differences in the assessment process for the two modes. Phone supervisors conduct their assessment while the call is in progress. In contrast, digital supervisors conduct their assessments by reviewing transcripts after a contact has been completed. As a result, digital supervisors have time to carefully review transcripts for specific words and phrases and assess the quality of interaction based on their findings. Comparatively lower quality ratings on digital contacts may result, in part, from differences in the assessment process. In addition, our preliminary analyses revealed the following:

- Results comparing phone and digital contacts were statistically different for nearly all performance measures.
- Phone results would have a larger influence on combined results because the number of phone contacts is twice the number of digital contacts (see Section 3.2.2).
- Values for not applicable on the performance measures are quite different between digital contacts and phone contacts (see Section 3.2.4.2).

Based on these considerations, as well as discussions with ACF and The Hotline, we decided to analyze digital and phone data separately. As described in Section 3.2.3, we used data from QA forms weighted by Salesforce data to ensure that results reflected the experience of the contactor. We first excluded missing and *not applicable* counts from all analyses. Next, we computed frequencies and percentages separately for digital contacts and phone contacts to reflect each performance measure by all four quality rating categories: *skills support needed*, *building*, *effective*, and *mastery*. Then, we collapsed the four quality rating categories into two categories: (1) *less than effective*, which includes the categories *skills support needed* and *building*, and (2) *effective*, which includes the categories *effective* and *mastery*. Finally, we computed frequencies and percentages separately for digital and phone contacts, delineating each performance measure by the *less than effective* and *effective* dichotomous categories.

To further address the research questions, we aggregated performance measures within the two theoretical components – approach and activities – as well as all performance measures

across both components. We computed frequencies and percentages separately by mode for contacts rated as *effective* for the majority of performance measures included in the approach and activities components. When we combined approach and activities by contact mode, we included only contacts rated as *effective* for the majority of performance measures in both the approach and activities components. To test for statistically significant differences, we cross-tabulated phone and digital modes by each performance measure and by combined performance measures within the approach component, the activities component, and the approach/activities components combined.

4. Results

Chapter 4 presents the results of the analyses of The Hotline data. Section 4.1 presents the final seven recommended performance measures and the criteria for selecting them. Section 4.2 presents the results of the analysis of each performance measure over three non-consecutive months, reported separately for phone and digital contacts.

4.1 Recommended Performance Measures

As a final step in the performance measurement development process, we reduced the preliminary list of 10 performance measures to a final list of seven recommended performance measures. For ease of interpretation, we selected a single performance measure for each of the seven constructs of the theoretical framework.²³ For constructs with more than one performance measure originally mapped, we selected the most universal; that is, we selected the performance measure with the smallest percentage of *not applicable* ratings. All seven of the recommended performance measures can be applied to phone and digital contacts. Table 7 presents the recommended performance measures by theoretical framework component, research question number, construct, and key indicator.

²³ We originally identified eight theoretical constructs, but later determined the eighth one (survivor centered) to be an overarching construct that comprises both components (i.e., approach and activities) and the associated constructs. Since all seven of the remaining constructs are also “survivor centered,” it was unnecessary for us to independently match existing data elements to this eighth construct.

Table 7. Recommended performance measures of The Hotline, by theoretical framework component, research question number, construct, and key indicator

Theoretical framework component	Research question number	Construct	Performance measure	Key indicator
Approach	1a	(Express) Sensitivity	(1) Contactor was engaged using a kind and compassionate tone throughout chat/text/call	Percentage of Advocates assessed as effectively using a kind and compassionate tone throughout chat/text/call
	1b	(Build) Trust & Rapport	(2) Contactor was provided emotional support throughout chat/text/call	Percentage of Advocates assessed as effectively acknowledging impact of abuse endured or other hardships
	1c	(Provide) Validation & Support	(3) Contactor was validated consistently and appropriately throughout chat/text/call	Percentage of Advocates assessed as effectively validating survivor throughout chat/text/call consistently and appropriately
Activities	2a	(Assess) Survivor Perspectives & Beliefs	(4) Contactor was helped to assess advantages, disadvantages, and potential risks of options	Percentage of Advocates assessed as effectively helping to assess advantages, disadvantages, and potential risks of options
	2b	(Assess) Survivor Situation & Needs	(5) Contactor was assisted in thinking about next steps and possible timeline	Percentage of Advocates assessed as effectively assisting survivors in thinking about next steps and possible timeline
	2c	(Develop) Action & Safety Plan	(6) Contactor was assessed for immediate safety	Percentage of Advocates assessed as effectively assessing for immediate safety
	2d	(Share) Resources	(7) Contactor was provided information, resources, and options	Percentage of Advocates assessed as effectively providing information, resources, and options to survivors

4.2 Performance of The Hotline

This section presents the results of our analysis of The Hotline data for the seven recommended performance measures. Data presented in the tables below are point-in-time estimates and may provide the basis for developing benchmarks for ongoing assessment.

Table 8a shows wweighted percentages of victim/survivor phone contacts to The Hotline by theoretical framework component, research question number, construct, performance measure, and quality rating category (i.e., *skills support needed, building, effective, and mastery*). The largest proportion of phone contacts across the seven performance measures

was in the *effective* quality rating category. Percentages ranged from 83.9 percent for performance measure #4 (Contactor was helped to assess advantages, disadvantages, and potential risks of options) to 98.3 percent for performance measure #6 (Contactor was assessed for immediate safety).

Table 8a. Weighted percentage of victim/survivor *phone* contacts to The Hotline, by theoretical framework component, research question number, construct, performance measure, and quality rating category – August 2018, October 2018, and February 2019 (weighted N=29,455)

Theoretical framework component	Research question number	Construct	Performance measure	Quality rating category ^{1,2} (weighted percentage)			
				Skills support needed	Building	Effective	Mastery
Approach	1a	(Express) Sensitivity	(1) Contactor was engaged using a kind and compassionate tone throughout chat/text/call	0.0	2.0	98.0	0.0
	1b	(Build) Trust & Rapport	(2) Contactor was provided emotional support throughout chat/text/call	1.9	4.3	90.2	3.6
	1c	(Provide) Validation & Support	(3) Contactor was validated consistently and appropriately throughout chat/text/call	1.8	7.5	88.8	1.9
Activities	2a	(Assess) Survivor Perspectives & Beliefs	(4) Contactor was helped to assess advantages, disadvantages, and potential risks of options	1.8	8.7	83.9	5.6
	2b	(Assess) Survivor Situation & Needs	(5) Contactor was assisted in thinking about next steps and possible timeline	0.6	5.8	89.3	4.3
	2c	(Develop) Action & Safety Plan	(6) Contactor was assessed for immediate safety	0.0	0.0	98.3	1.7
	2d	(Share) Resources	(7) Contactor was provided information, resources, and options	0.5	4.2	90.9	4.5

¹ Excludes missing and *not applicable*.

² Row percentages may not total 100 due to rounding.

Although considerably less than the *effective* quality rating category, the second largest percentage of phone contacts for each of the seven performance measures was found in the *building* quality rating category. Percentages ranged from 0.0 percent for performance measure #6 (Contactor was assessed for immediate safety) to 8.7 percent for performance measure #4 (Contactor was helped to assess advantages, disadvantages, and potential risks of options).

Only a small percentage of phone contacts received a quality rating of *mastery* for each of the seven performance measures. Percentages ranged from 0.0 percent for performance measure #1 (Contactor was engaged using a kind and compassionate tone throughout chat/text/call) to 5.6 percent for performance measure #4 (Contactor was helped to assess advantages, disadvantages, and potential risks of options).

Across all performance measures, less than 2 percent of phone contacts were rated as *skills support needed*. Percentages ranging from 0.0 percent for performance measures #1 (Contactor was engaged using a kind and compassionate tone throughout chat/text/call) and #6 (Contactor was assessed for immediate safety) to 1.9 percent for performance measure #2 (Contactor was provided emotional support throughout chat/text/call).

Table 8b shows the results of the analysis of the performance measures for digital contacts over the same three non-consecutive months. The largest proportion of digital contacts for all performance measures was found in the *effective* quality rating category. Percentages ranged from 57.6 percent for performance measure #4 (Contactor was helped to assess advantages, disadvantages, and potential risks of options) to 98.3 percent for performance measure #6 (Contactor was assessed for immediate safety).

The second largest proportion of digital contacts for each of the seven performance measures was found in the *building* quality rating category. Percentages ranged from 1.7 percent for performance measure #6 (Contactor was assessed for immediate safety) to 25.9 percent for performance measure #4 (Contactor was helped to assess advantages, disadvantages, and potential risks of options).

The next largest proportion of digital contacts across all performance measures was in the *skills support needed* quality rating category. Percentages ranged from 0.0 percent for performance measure #6 (Contactor was assessed for immediate safety) to 16.5 percent for performance measure #4 (Contactor was helped to assess advantages, disadvantages, and potential risks of options).

Table 8b. Weighted percentage of victim/survivor *digital* contacts to The Hotline, by theoretical framework component, research question number, construct, performance measure, and quality rating category – August 2018, October 2018, and February 2019 (weighted N=15,431)

Theoretical framework component	Research question number	Construct	Performance measure	Quality rating category ^{1,2} (weighted percentage)			
				Skills support needed	Building	Effective	Mastery
Approach	1a	(Express) Sensitivity	(1) Contactor was engaged using a kind and compassionate tone throughout chat/text/call	0.4	11.7	86.6	1.3
	1b	(Build) Trust & Rapport	(2) Contactor was provided emotional support throughout chat/text/call	2.0	13.8	81.6	2.7
	1c	(Provide) Validation & Support	(3) Contactor was validated consistently and appropriately throughout chat/text/call	0.9	20.9	74.0	4.2
Activities	2a	(Assess) Survivor Perspectives & Beliefs	(4) Contactor was helped to assess advantages, disadvantages, and potential risks of options	16.5	25.9	57.6	0.0
	2b	(Assess) Survivor Situation & Needs	(5) Contactor was assisted in thinking about next steps and possible timeline	11.9	20.6	67.5	0.0
	2c	(Develop) Action & Safety Plan	(6) Contactor was assessed for immediate safety	0.0	1.7	98.3	0.0
	2d	(Share) Resources	(7) Contactor was provided information, resources, and options	4.8	11.5	83.3	0.5

¹ Excludes missing and *not applicable*.

² Row percentages may not total 100 due to rounding.

Much smaller percentages of digital contacts received a quality rating of *mastery* for each of the seven performance measures. Percentages ranged from 0.0 percent for performance measures #4 (Contactor was helped to assess advantages, disadvantages, and potential risks of options), #5 (Contactor was assisted in thinking about next steps and possible timeline), and #6 (Contactor was assessed for immediate safety) to 4.2 percent for performance measure #3 (Contactor was validated consistently and appropriately throughout chat/text/call).

Although the detailed breakdown of performance measures by the four quality rating categories is useful for identifying patterns, we decided to collapse the four categories into two effectiveness ratings for ease of interpretation. *Less than effective* includes the *building* and *skills support needed* quality rating categories, while the *effective* rating includes the quality rating categories of *mastery* and *effective*.

Table 9a shows the weighted percentage of victim/survivor phone contacts for each performance measure by theoretical component, research question number, construct, and effectiveness rating. The percentage of phone contacts rated as *effective* on each of the seven performance measures ranged from 90 percent for performance measure #4 (Contactor was helped to assess advantages, disadvantages, and potential risks of options) to 100 percent for performance measure #6 (Contactor was assessed for immediate safety).

Table 9b shows the weighted percentage of victim/survivor digital contacts for each performance measure by theoretical component, research question number, construct, and effectiveness rating. The percentage of digital contacts rated as *effective* on each of the seven performance measures ranged from 57.6 percent for performance measure #4 (Contactor was helped to assess advantages, disadvantages, and potential risks of options) to 98.3 percent for performance measure #6 (Contactor was assessed for immediate safety).

Table 9a. Weighted percentage of victim/survivor *phone* contacts to The Hotline, by theoretical framework component, research question number, construct, performance measure, and effectiveness rating – August 2018, October 2018, and February 2019 (weighted N=29,455)

Theoretical framework component	Research question number	Construct	Performance measure	Effectiveness rating ¹ (weighted percentage)	
				Less than effective	Effective
Approach	1a	(Express) Sensitivity	(1) Contactor was engaged using a kind and compassionate tone throughout chat/text/call	2.0	98.0
	1b	(Build) Trust & Rapport	(2) Contactor was provided emotional support throughout chat/text/call	6.0	94.0
	1c	(Provide) Validation & Support	(3) Contactor was validated consistently and appropriately throughout chat/text/call	9.0	91.0
Activities	2a	(Assess) Survivor Perspective & Beliefs	(4) Contactor was helped to assess advantages, disadvantages, and potential risks of options	10.0	90.0
	2b	(Assess) Survivor Situation & Needs	(5) Contactor was assisted in thinking about next steps and possible timeline	6.0	94.0
	2c	(Develop) Action & Safety Plan	(6) Contactor was assessed for immediate safety	0.0	100.0
	2d	(Share) Resources	(7) Contactor was provided information, resources, and options	5.0	95.0

¹ Excludes missing and *not applicable*.

Table 9b. Weighted percentage of victim/survivor *digital* contacts to The Hotline, by theoretical framework component, research question number, construct, performance measure, and effectiveness rating – August 2018, October 2018, and February 2019 (weighted N=15,431)

Theoretical framework component	Research question number	Construct	Performance measure	Effectiveness rating ¹ (weighted percentage)	
				Less than effective	Effective
Approach	1a	(Express) Sensitivity	(1) Contactor was engaged using a kind and compassionate tone throughout chat/text/call	12.0	88.0
	1b	(Build) Trust & Rapport	(2) Contactor was provided emotional support throughout chat/text/call	15.7	84.3
	1c	(Provide) Validation & Support	(3) Contactor was validated consistently and appropriately throughout chat/text/call	21.8	78.2
Activities	2a	(Assess) Survivor Perspectives & Beliefs	(4) Contactor was helped to assess advantages, disadvantages, and potential risks of options	42.4	57.6
	2b	(Assess) Survivor Situation & Needs	(5) Contactor was assisted in thinking about next steps and possible timeline	32.5	67.5
	2c	(Develop) Action & Safety Plan	(6) Contactor was assessed for immediate safety	1.7	98.3
	2d	(Share) Resources	(7) Contactor was provided information, resources, and options	16.2	83.8

¹ Excludes missing and *not applicable*.

When we aggregated performance measures by theoretical framework component, we found that 94.3 percent of phone contactors and 85.3 percent of digital contactors were effectively engaged with survivor-centered approaches (Table 10). In addition, 94.2 percent of phone contactors and 77.4 of digital contactors were effectively engaged in survivor-centered activities. When we examined the extent to which contactors were engaged with survivor-centered approaches and survivor-centered activities during interactions with The Hotline, we found that this combination occurred in 90.8 percent of phone contacts and 70.7 percent of digital contacts.

Table 10. Summary of weighted percentages of victim/survivor contacts to The Hotline, by theoretical framework component, research question number, majority effectiveness rating, and mode of contact – August 2018, October 2018, and February 2019 (weighted N=44,886)

Theoretical framework component	Research question number	Majority effectiveness rating (weighted percentage) ^{1,2}	
		Phone contact	Digital contact
Approach	1. To what extent are contactors engaged with survivor-centered approaches during interactions with The Hotline?	94.3	85.3
Activities	2. To what extent are contactors engaged in survivor-centered activities during interactions with The Hotline?	94.2	77.4
Approach <u>and</u> activities ³	3. To what extent are contactors engaged with survivor-centered approaches <u>and</u> engaged in survivor-centered activities during interactions with The Hotline?	90.8	70.7

¹ “Majority effectiveness rating” for each mode of contact includes all applicable performance measures. Applicability varies depending on the nature of each call.

² “Majority” indicates that the majority of performance measures within the contacts were rated *effective*. Majority is based on number of valid responses, excluding missing and *not applicable*.

³ The “approach and activities” row represents the overlap of applicable performance measures from both theoretical components. Contacts had to be rated as *effective* for the majority of performance measures in both the *approach* component and the *activities* component in order to be included in the “approach and activities” row.

4.3 Summary of Findings by Research Questions

In this section, we provide a summary of findings by each of the SAF-T study’s three main research questions, including sub-questions.

Research Question 1. To what extent are contactors engaged with *survivor-centered approaches* during interactions with The Hotline?

- a. To what extent are contactors shown *sensitivity* during interactions with The Hotline?
- b. To what extent are contactors engaged in a manner that facilitates *trust and rapport* during interactions with The Hotline?
- c. To what extent are contactors provided with *validation and support* during interactions with The Hotline?

Based on ratings of *effective* for phone (94.3%) and digital (85.3%) contacts, our findings indicate that the vast majority of contactors were engaged with survivor-centered approaches. When we examined performance measures separately within the *approach* component, we found that ratings of *effective* ranged between 91 and 98 percent for phone contacts and between 78.2 and 88.0 percent for digital contacts. It appears that contactors were more likely to be shown *sensitivity* than they were to be engaged in a manner that facilitates *trust and rapport* and, to a lesser extent, provided with *validation and support*. Also, phone contacts had significantly higher ratings of *effective* on combined and all three individual approaches. Differences between modes were greatest for *validation and support*; the percentage of *effective* phone contacts was 91 percent as compared to a significantly lower 78.2 percent for digital contacts.

Research Question 2. To what extent are contactors engaged in *survivor-centered activities* during interactions with The Hotline?

- a. To what extent are contactors' *perspectives and beliefs* assessed during interactions with The Hotline?
- b. To what extent are contactors' *situation and needs* assessed during interactions with The Hotline?
- c. To what extent are contactors encouraged and supported in the *development of a personalized action and safety plan* during interactions with The Hotline?
- d. To what extent are contactors *provided with resources* during interactions with The Hotline?

Similar patterns emerged when we addressed the second research question. We combined all four performance measures that comprise the activities component and found that contactors were effectively engaged in survivor-centered activities during the majority of phone and digital interactions, although significantly more so for phone (94.2%) than digital (77.4%). Separate analyses of each performance measure by mode of contact revealed significantly higher ratings of *effective* among phone contacts for three of the four activities. The exception was *assessment for immediate safety*. As expected, contactors were effectively assessed for immediate safety during all phone (100%) and nearly all digital (98.3%) interactions, a salient finding given the importance of the activity. The second highest rating of *effective* was for *sharing resources* for both phone (95%) and digital (83.8%) contacts. Across the four activity component performance measures, ratings of *effective* ranged from 90 to 100 percent among phone contacts and from 57.6 to 98.3 percent among digital contacts. We attribute the greater

variation among digital contacts to relatively modest ratings on performance measures for *assessment of perspectives and beliefs* (57.6%) and *assessment of situation and needs* (67.5%).

Research Question 3. To what extent are contactors engaged with *survivor-centered approaches* and engaged in *survivor-centered activities* during interactions with The Hotline?

According to the theoretical framework, the potential impact of The Hotline services is greater when contactors are engaged with both survivor-centered approaches and activities. When we combined contacts rated as *effective* for the majority of performance measures in both the *approach* component and the *activities* component, a consistent pattern emerged. In general, The Hotline engaged the majority of contacts with both approaches and activities. However, there was a significantly higher rating of *effective* among phone contacts (90.8%) than digital contacts (70.7%).

5. Summary and Discussion

We used a theoretically grounded and stakeholder-informed approach to accomplish the project's three objectives: (1) develop a theoretical framework for The Hotline services based on existing behavior change theory; (2) develop, test, and refine performance measures based on the framework for ongoing performance monitoring and future evaluation of services provided by The Hotline; and (3) provide ACF and The Hotline with performance measurement feedback to inform program improvement efforts.

Initial project activities (e.g., literature review, interviews with The Hotline staff, review of selected online chat and text transcripts from The Hotline, and group concept mapping) informed the development of a theoretical and stakeholder-informed framework that guided the development of a set of performance measures. Extensive discussions with ACF, The Hotline, and expert panel members led to a refined focus on empowerment and support. This more accurately aligns with the unique context and goals of The Hotline. It is also consistent with existing research recognizing empowerment as a core construct of most domestic violence programs and the goal of survivor-centered practice (Cattaneo & Goodman, 2014; Cattaneo, Grossmann, & Chapman, 2016; Goodman et al., 2016). In addition, active stakeholder engagement facilitated our understanding of the issues from a variety of perspectives.

The final survivor-centered framework for brief crisis intervention identifies key components and constructs necessary for a brief crisis intervention to empower and support those affected by relationship abuse. Specifically, the framework focuses on tailoring the approach and activities for each individual seeking assistance. It also illustrates the importance of employing both survivor-centered approaches and activities during brief crisis intervention, so survivors are more likely to feel supported and empowered. Seven recommended performance measures are mapped to the framework, each representing an important piece of what The Hotline aims to accomplish in order to achieve the intended outcomes for survivors.

Results of our analysis of three months of QA data using the seven recommended performance measures suggest The Hotline is effectively implementing the survivor-centered theoretical framework. However, there is room for improvement, especially for services provided via online chat and text. The manner of communication is distinctly different for digital than for phone interactions. Most notably, digital interactions are somewhat delayed. Without the verbal inflection and verbal cues that phone interactions can provide, it is likely to be more challenging to assess options, plan next steps, and maintain contactor engagement via chat and text. Nevertheless, certain groups of contactors (e.g., teens and young adults) may prefer digital communication. For example, a recent evaluation of The Hotline found that 65 percent of contactors to loveisrespect were under age 25, and these contactors most often used chat (66%) or text (17%) (McDonnell et al., 2018). Therefore, it is important to ensure that The Hotline provides the best services possible to both digital and phone contactors.

5.1 SAF-T Project Limitations

There are limitations to the theoretical and stakeholder-informed approach used for framework development. For example, the initial literature review focused only on peer-reviewed articles and the search may have missed additional relevant work presented in the grey literature (e.g., program reports). Similarly, our analysis of Advocate interviews and online chat transcripts may have yielded more reliable information if we had employed a more systematic approach to categorizing and organizing results and involved multiple coders. During the group concept mapping process, stakeholder participation varied among the four activities. Overall, a relatively small number of participants completed the concept mapping project, so it may not reflect a full range of stakeholder perspectives.

With regard to the performance measures, we used data from The Hotline that were originally intended for other purposes. The Hotline supervisors use QA forms to assess the performance

of Advocates, so essentially QA data represent The Hotline’s review of its own performance. Also, when we matched QA and Salesforce data, we discovered that 11.6 percent of all digital contacts and 5.8 percent of all phone contacts were related to Advocates with missing QA forms for the three months included in our analysis. The results of our analysis could be biased if assessments of Advocates with missing QA forms were somehow different than those with non-missing QA forms. Similarly, the results of the analysis could be biased if supervisors overused *not applicable* in their QA form assessments. Their use of *not applicable* varied widely among the QA data elements that comprised the 10 initial performance measures, and the proportion of *not applicable* responses factored into our selection of the final seven recommended performance measures.

5.2 SAF-T Project Strengths

The SAF-T project employed multiple methods in an iterative process with ongoing stakeholder engagement. Together, the systematic review of published literature, interviews with Hotline Advocates, and review of de-identified Hotline chat transcripts provided rich content for the four-phase concept mapping activity. Our diverse group of stakeholders participated in the brainstorming, sorting, rating, and interpretation phases of concept mapping, which yielded the key constructs undergirding our initial theoretical framework. To further strengthen our approach, The Hotline, ACF, expert panel members, and project staff collaborated to refine the final theoretical framework and select our initial set of performance measures.

With regard to testing and refining the performance measures, we used existing data from The Hotline, which meant that there was no data collection burden on Advocates or risk for victims/survivors. We included phone and digital data for three non-consecutive months to examine both seasonal variation and variation related to the length of time since the most recent Advocate training. While the performance measures are based on data elements found on QA forms for Advocates, we were able to represent the experience of contactors, the actual unit of analysis, by creating weights for QA form data. An unweighted analysis would have placed more emphasis on the contacts of new Advocates, who are assessed more often and therefore have more QA forms in the analysis file. Also, the number of contacts per Advocate varies, so the Advocate experience does not directly represent the contactor experience. To address these issues, we used counts from contact-level Salesforce data to weight performance measure data elements selected from QA forms. We also analyzed digital and phone data separately and discovered several reasons not to combine the two modes. Finally, our analyses

of the initial 10 performance measures helped identify one universal digital and phone performance measure for each of the seven constructs. Ultimately, the data fit the theoretical framework, resulting in seven theoretically based performance measures.

5.3 Recommendations

Findings presented in this report reveal significantly higher ratings of *effective* for phone contacts as compared to digital contacts across nearly all performance measures. These differences may be in part attributed to a higher likelihood of communication challenges associated with the digital mode. However, these findings may also reflect differences in how the two modes are assessed. Digital supervisors review transcripts after interactions and may maintain higher standards for effectiveness ratings. **We recommend that The Hotline closely examine Advocate trainings and the assessment process for both modes and make adjustments, as needed, to ensure that they are appropriate and as consistent and streamlined as possible, considering the unique attributes of each mode.**

Timing and frequency of ongoing performance measurement are important considerations. The project's experts and stakeholders have suggested assessment frequencies ranging from monthly to yearly. An annual assessment would include more data and possibly reduce the burden of gathering and analyzing data more frequently for shorter intervals. However, more frequent data analysis would yield more current results. For example, monthly data analysis would produce close to real-time results. In addition, monthly or quarterly assessments would reveal monthly and/or seasonal variations. **We recommend that ACF and The Hotline consider both the goal of the performance measurement and the potential level of burden when determining performance measurement frequency.**

A logical next step is to develop benchmarks to assess the quality of contacts. The findings presented in this report are point-in-time estimates The Hotline can use as the basis for developing benchmarks for future assessments. **We recommend that ACF and The Hotline establish benchmarks for service provision that show The Hotline's four-level quality ratings collapsed into two categories: *less than effective* and *effective*. We also recommend separate benchmarks for digital and phone contacts, given the differences between the two modes.** It may be helpful to reconvene the expert panel to obtain their input into the development of appropriate benchmarks.

The construction of our data analysis file required several time-consuming steps. For example, to provide a de-identified QA form dataset, The Hotline staff had to manually replace each Advocate name with a unique ID and delete supervisor names at the same time. Because The Hotline currently collects QA form data in individual Excel spreadsheets, we had to design a SAS program to extract data from each individual form. Also, we requested several rounds of data retrieval from The Hotline in an attempt to match contacts captured in the Salesforce database with QA form data, yet were unable to do so for 11.6 percent of digital contacts and 5.8 percent of phone contacts. **We recommend that The Hotline review and appropriately restructure the QA data collection database to facilitate data retrieval and thereby reduce burden and enhance completeness for future analysis.**

After we had created an analysis dataset, data cleaning and analysis required additional skilled programming expertise. One major consideration is whether The Hotline will have the capacity to replicate our process for periodic assessment. The development of an ongoing assessment process could be facilitated and standardized by the design and implementation of a “push-button” analysis tool to generate real-time reports for each of the seven performance measures. However, this endeavor may be more resource intensive than is feasible for The Hotline. **We recommend that a skilled programmer or analyst design a push-button macro that The Hotline can use to populate the tables in this report with new data as desired.** The macro would likely require the use of a data analysis software package such as SAS or SPSS.

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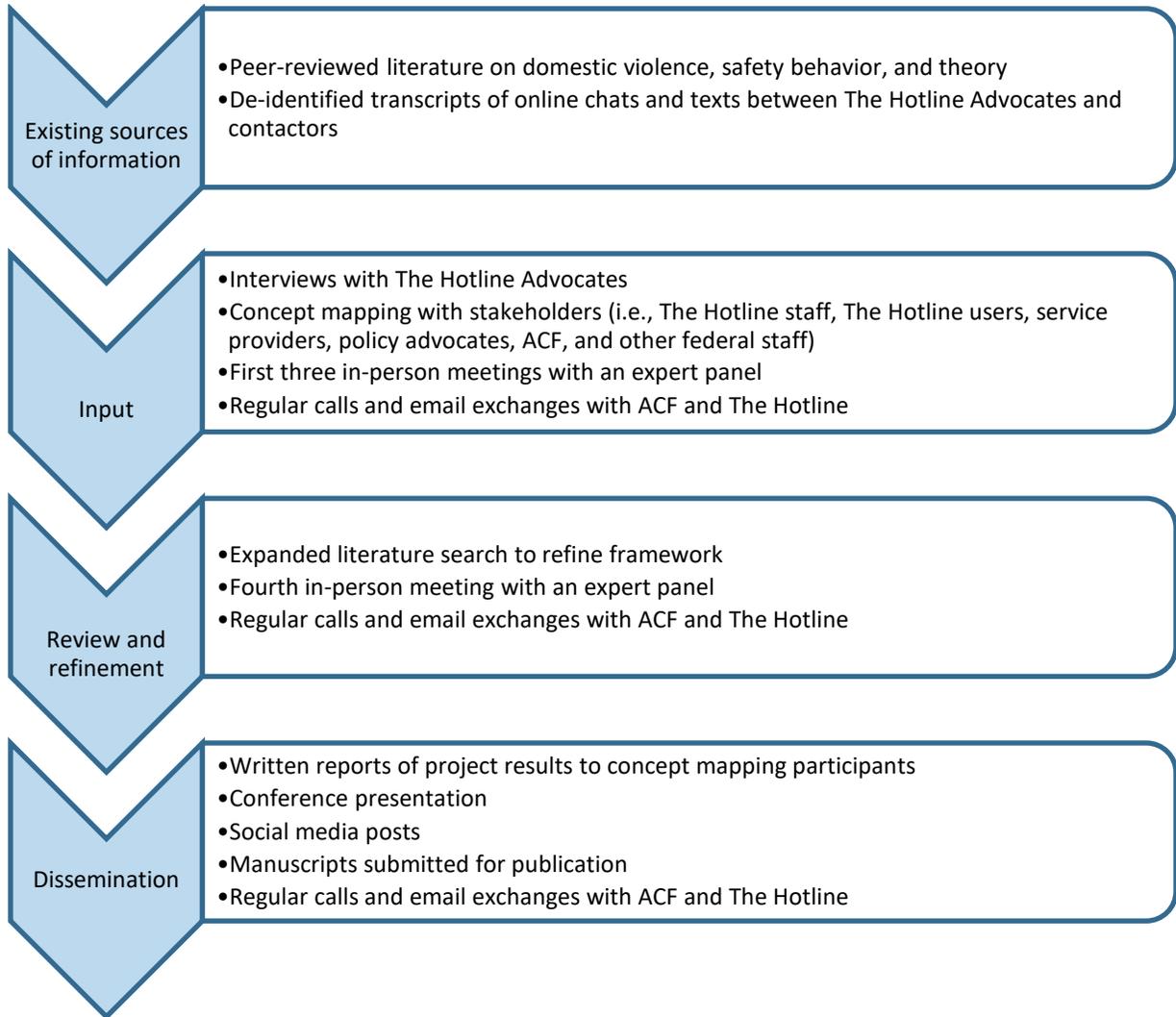
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Appendix A

Process of Stakeholder Engagement for Theoretical Framework Development

Figure A-1 illustrates the process and activities involved in developing the theoretical framework, which incorporated a stakeholder engagement approach. The engagement process included regular review and input from The Hotline staff and the Administration for Children and Families (ACF) (i.e., Office of Planning, Research, and Evaluation and the Family Violence Prevention and Services Act Program) through email and phone communication. We also recruited researchers and practitioners with expertise in domestic violence, theory, and program evaluation to serve on our expert panel. Experts participated in four in-person expert panel meetings and one virtual meeting, along with staff from ACF and The Hotline. In addition, the experts provided feedback and guidance throughout the project, including support around a concept mapping project and framework refinement. Through the concept mapping process, we also engaged a broad set of relevant stakeholders (e.g., The Hotline staff, ACF staff, other federal staff, service providers, policy advocates, and The Hotline contactors/users) in the development of the theoretical framework.

Figure A-1. Process of theoretical framework development for The Hotline using a stakeholder engagement approach



Appendix B

Articles Included in Literature Review

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Appendix C

Performance Measures and Indicators for Testing

Table C-1. Preliminary performance measures and key indicators by theoretical framework component and construct

Theoretical framework component	Theoretical framework construct	Performance measure	Key indicator
Approach	(Express) Sensitivity	Contactor was engaged using a kind and compassionate tone throughout chat/text/call	Percentage of contacts where a kind and compassionate tone was used effectively throughout chat/text/call
	(Build) Trust & Rapport	Contactor was provided emotional support throughout chat/text/call	Percentage of contacts where the impact of abuse endured or other hardships was effectively acknowledged
	(Provide) Validation & Support	Contactor was offered encouragement for their plan of action developed	Percentage of contacts where encouragement was effectively offered for a plan of action developed
		Contactor was validated consistently and appropriately throughout chat/text/call	Percentage of contacts where validation was effectively provided consistently and appropriately throughout chat/text/call
Activities	(Assess) Survivor Perspectives & Beliefs	Contactor was helped to assess advantages, disadvantages, and potential risks of options	Percentage of contacts where help to assess advantages, disadvantages, and potential risks of options was effectively provided
	(Assess) Survivor Situation & Needs	Contactor was assisted in thinking about next steps and possible timeline	Percentage of contacts where assistance in thinking about next steps and possible timeline was effectively provided
	(Develop) Action & Safety Plan	Contactor was assessed for immediate safety	Percentage of contacts where immediate safety was effectively assessed
		Contactor was assessed for lethality, including suicide	Percentage of contacts where lethality, including suicide, was effectively assessed
		Contactor was provided assistance in creating a comprehensive, customized safety plan	Percentage of contacts where assistance in creating a comprehensive, customized safety plan was effectively provided
	(Share) Resources	Contactor was provided information, resources, and options	Percentage of contacts where information, resources, and options were effectively provided