Article Info

Boness, C. L., Helle, A. C., & Logan, S. (2021). Crisis line services: A 12-month descriptive analysis of callers, call content, and referrals. *Health & social care in the community*, 29(3), 738-745. https://doi.org/10.1111/hsc.13325



Study Design

• 1 year

• Features of calls (e.g. call length), callers, and information provided to the caller (e.g. referrals).

• Five crisis lines - 5,001 calls: 10/19 to 9/19.



About Crisis Centers

- Vast range in capabilities (e.g., calls, mobile, WI; staff vs. volunteers; 988 or not)
- Gateway for many people
- Immediacy, referrals, suicide related supports
- Support to others



Aims

- "(a) who is calling, including the caller's victimisation history;
- (b) when calls are being made, which includes information on the call itself (e.g. duration, time of day, month);
- (c) caller needs, such as referrals; and
- (d) whether or not the callers found the service helpful."



Calls

- 5,001 contacts may be duplicated
- Center was suicide hotline, also known for serving deaf and HH
- Archival data
- Volunteers coded sheets after calls
- Text 3.16%; Statewide Phone Line, 76.72%; videophone to a national Deaf crisis line, 5.44%; TTY; calls to two 14.80%;



Call Info

- Length
 - Median 15 minutes; varied widely, including across mode of communication
- Victimization Experiences
 - Adult Violence
 - Child violence
 - Drug and Alcohol
 - Bullying
 - Suicide and Financial were "relatively infrequent" (see notes from Stacey)
 - Intersectionality (e.g., LGBTQ and 35% suicide)





Referrals

- 16.72% referred
 - 16% victim services
 - 80.86% ish 'other'
 - underestimate
- 3% CJ
- Less than 2% agencies that help with CJ rights



Outcomes

- 99.5% of callers that were asked (61.35% of all calls; n = 3,068) reported the call as helpful.
- Bias?
- Recommendations
 - Referral protocols
 - Training for diverse groups
 - Targeted outreach
 - Staffing by time of day
 - Texts are long consider efficiency/planning (notes from us)
- Significant data limitations



Discussion Questions

- How might variations on staff impact outcomes
 - Volunteer/Paid
 - Training
 - Personal experience
 - Identity
- What did you think about the referral data? % referred, where?
- What additional information could be useful around 'helpfulness'?

