Choosing Digital Service Platforms During COVID-19: A Step-by-Step Guide

Are you the person responsible for setting up digital services for your program during COVID-19? With great power, comes great responsibility. As programs try to manage navigating the shift from face-to-face advocacy to tele-advocacy, online, or mobile advocacy, it may be difficult to figure out how and where to start the process of choosing and setting up digital services. Before going through this step-by-step plan, please read Using Technology to Communicate with Survivors During a Public Health Crisis.

It is important to note that once the crisis of COVID-19 is over, you should re-evaluate what services your program is using and determine if changes need to be made to better align with in-person services and best practices. As is always the case with any service your program is adopting or using, survivors and their needs should always be at the core of the work.

Step 1: Identify what need you are trying to meet and your capacity to provide the service.

What are the most pressing needs of your program and the survivors you work with and what is most likely to fulfill those needs?

While many are attempting to switch to providing online video or chat services, if you work in a community where internet service is spotty or survivors are quarantined/sheltering at home with the abuser, these options may be more difficult or even impossible to use. If those are barriers, a phone or text hotline might be more helpful. If your program serves people with disabilities, using a chat tool that isn’t compatible with screen-readers could mean some survivors won’t be able to access your services. Knowing your community’s needs and the tool’s features will be important.
Are there already options that can meet the demand and need for digital services? Will your services fill a gap?

As programs are working hard to meet the needs of survivors during this crisis, it’s critical that we look to each other to create a web of services. We shouldn’t stretch our programs thin or beyond capacity. In some instances, during this public health crisis, programs may extend or create new services. Other programs may scale back on services because the other programs are available. These may not be easy decisions, but each program has to weigh out all the options.

Learn more on how to assess your program’s readiness to provide digital services worksheet and to help the leadership of your program get started on the right path.

Step 2: Determine your program’s budget and staffing capacity to operate digital services.

There is more to providing digital services than the initial cost of set-up. Your program should any additional costs like increasing your program’s internet bandwidth, providing extra layers of security to ensure confidentiality, any extra IT support that may be needed, and covering staff time to keep a chat, text, or video service running. It’s also important to assess the technological capacity of the staff to implement the service. If staff are extremely uncomfortable adopting the technology, it’ll show in the service delivery.

Step 3: Decide what ways your program will communicate (video, chat, or text)

Video tools can help bring a more personal feel to conversations. They can help provide contextual cues that aren’t available in chat or text, like body language and facial expression. They can also be used for support groups, following the same format as in-person support groups, being scheduled in advance for a set period of time.
Here are a few considerations to assess when looking at chat tools:

- Are chat messages sent within the video meeting saved on the user’s computer or stored in the cloud? Can this setting be changed to better protect privacy?

- Does the company have access to the video history and personally identifying information of who joined the call? Can this setting be changed to better protect privacy?

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These questions and others are important to understand if video seems to be the best option. For more on video services visit Communicating with Survivors Using Video: Best Practices.

**Online Chat** may be a practical tool for survivors who want to have quick conversations with someone, who may not have a strong internet bandwidth, or for when it may not be safe to have a conversation out loud. For more on chat services, see Chat with Survivors: Best Practices.

**Texting** may be a great option for survivors, as long as they feel like it’s a safe method to communicate. Threads may be saved on their phone, and could potentially identify that they are seeking help. For more on texting, visit Texting and Messaging with Survivors: Best Practices.

**Phone Calls:** Sometimes, an old-fashioned phone call is needed. Phone calls can be incredibly helpful for survivors, or for bystanders seeking support services for a family member or friend. They also offer more privacy if the person doesn’t feel comfortable writing out their questions or concerns in ways that may later be seen by others. If you have hotlines or are receiving calls from survivors on cell
Step 4: Assess the Tools

Now that you have identified community needs, funding, staff capacity, and which type of service will be good, you can dive into assessing specific products.

Is the tool designed in a way that aligns with the needs of your community, your staff’s capacity to operate, and your confidentiality obligations? If you have IT staff, they should be able to help consider if the tool has end-to-end encryption, if data is stored and where, and risks to breaches and misuse. It’s important to note that no product or tool is going to be labeled as “VAWA/FVPSA/VOCA-compliant.”

Many tools market themselves as “HIPAA-compliant,” but it’s important to remember that HIPAA is not the same thing as VAWA/FVPSA/VOCA, and you’ll need to do a deeper assessment of the security and privacy features of the software to ensure that you are meeting your confidentiality obligations. Our Choosing a Vendor and Video Conferencing & Digital Communications Tools resources may assist with this process.

We cannot endorse tools, but our materials break down basic features and information in an attempt to make this process easier for you. For more information on the differences between HIPAA and VAWA, VOCA, FVPSA, read our Frequently Asked Questions about U.S. Federal Laws & Confidentiality for Survivors.

Step 5: Implementation! Here are things to consider:

A. Test it and test it again. You’ll need to test the software works to see how it works on different devices. You’ll need IT or other staff that are comfortable
becoming the in-house experts for your program, to help with troubleshooting. Also, familiarize yourself with how long it takes for messages or calls to go through, and how your computer or mobile device reacts. Did it start running slower? Also, it can help to reach out to a customer service representative to test how long it will take to get a response if something happens. Knowing how to use the tool is an important in helping this transition go smoothly. Develop a contingency plan if services drop, or if survivors have to log off quickly, and let each user know about these plans at the beginning of each call, text, or video chat.

B. **Check the settings and make sure they prioritize privacy.**

Before launching, go through the privacy and security settings of the tool you’ve chosen and make sure they are all set to prioritize the privacy of the survivors you’ll be working with. It’s important to set the software up so that it collects as little data related to survivor interactions as possible. If you aren’t sure where to find these, you can check the software company’s website or help center, or call their help desk if you aren’t sure where the settings are found.

C. **Train staff.** Staff should be able to test out the tool and familiarize themselves with it prior to using it to provide services. Even during this time when everything feels rushed, make time between purchasing the product and launching it so that staff can learn how to use all of the features needed to do their jobs. Consider how the skills used regularly offline can be translated to online and remote spaces. Also, be wary of using internet slang, emojis, or acronyms. Because these can often have different meanings for different people, they can cause accidental confusion and misunderstandings.

D. **Provide services!** Put the service to work doing what you and your program do best - providing critical advocacy and support services for survivors.
Remember to discuss safety, privacy, and confidentiality each time you interact with a survivor. We want to make sure they are making informed choices on how to engage with us. Every time you engage with a survivor, remind them to check their privacy and security settings, ask them if the mode of communication is still safe, and be ready to offer other options if not.

**Step 6: Reassess and get assistance**

We learn a lot in the provision of services. You may realize there is still a gap in your community. Or that staff are not adapting to the technology as you hoped. Maybe survivors really don’t use the video option, but clearly like the availability of chat. We are always in a state of learning and improving, and this will be no different.

The Safety Net team is here to help you and your program as you think through deciding what service, tool, or mode of communication will be best for you and your community. Reach out to us if you need any help, and good luck in providing digital services. As always, we thank you for the important work you are doing every day. Likewise, if you need help ensuring that your tools are accessible, can accommodate remote interpreting, or have any other questions on providing services for people with disabilities, the Vera Institute of Justice, Center for Victimization and Safety, can provide you with technical assistance.

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