

SBC Monitoring Guidance

Hotlines and Hotline Data

What is a Hotline and Hotline Data?

A hotline usually refers to a no-cost telephone line that is dedicated to a specific purpose (such as police tips, suicide prevention, emergencies, etc.) and may be part of a call center that connects to or coordinates referrals for necessary assistance. Individuals may use hotlines to report emergencies or to request help for specific problems. Additionally, hotlines can be created specifically for monitoring purposes, such as when participants call in and offer insights or opinions related to a program or outcomes of interest. The length of time a hotline is open depends on the purpose of the hotline. Continually open (24-hour) hotlines are often created to serve ongoing needs in a community, such as an emergency hotline, a suicide hotline, or a police tip hotline. Event-based hotlines are often created and used for specific circumstances that are expected to last only for a finite amount of time, such as a disease outbreak surveillance hotline. A hotline designed specifically for a program would likely be considered an event-based hotline, as the hotline will remain open only for the length of the program.

Hotline data refers to the information that can be collected from these call centers. Some hotline data can be used to monitor and improve the effectiveness of an intervention or program, especially in situations where a hotline is linked to a program. Total number of calls, types of call categories, allegations versus inquiries, geographic location of call, substantiation percentage, comparison of calls against prior months or years, themes of calls, and any anomalies in outcomes of interest are some potential areas that can be monitored and explored. In cases of disease outbreak or other comparable events, hotline data can be used to track the geographic progression of a disease and geographic areas that need intervention, as well as limitations of the health system infrastructure or health care workers. Additionally, data collected can be either quantitative (e.g., substantiation percentage or incidence rate of an emerging disease) or qualitative (e.g., themes of calls).

When Should You Use Hotline Data?

Hotline data can be used if there is an existing hotline in place that is either part of the intervention or addresses an outcome of interest. Creating a hotline solely for the purposes of monitoring can be more resource- and cost-intensive than alternative monitoring methods that gather similar data. Additionally, hotline data should be used only if a significant or meaningful portion of your intended population calls the hotline. If the hotline has a low utilization rate, any data gathered may not be representative of your overall population or have meaningful implications.



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STRENGTHS

- Good for collection of quick proxy estimates for prevalence of an issue for national or defined geographic areas, and for case identification.
- Collects data using an existing infrastructure and is therefore cost-effective.
- Some hotlines collect quantitative and qualitative data, thus providing rich monitoring information for an intervention or program.



WEAKNESSES

- Might place extra workload or burden on hotline staff if primary purpose of hotline is not data collection.
- Must rely on participants to call hotline to generate data. Those who do not have access to a phone or choose not to call are missed. Therefore, generalizability can be difficult.
- Hotline administrators may deny access for data collection if it interferes with delivery of services.

Ethical Considerations

As hotline data is data collected from individual calls, it is important to notify each caller regarding which specific data collected from the call will be used for research and to obtain their permission to use their data. Callers should be given the option to complete their call without having their data used for research. The need for data should not interfere with the delivery of real time services or compromise the safety of callers experiencing an emergency. Some hotline data may include anonymous as well as personal information about callers. Seek the advice of researchers when considering, which personal information to collect and which information can and should be excluded or de-identified. Finally, when aggregating and analyzing data, it is important to understand the implications of the findings and any potential unintended consequences that may arise from using or disseminating this information.

Resources

[Field Guide: Setting Up a Hotline](#)

This is an easy-to-use guide produced by the Population Communication Services project to establish a hotline, small or large. It presents information and case studies to help users determine what type of hotline is best suited for a program and set up a hotline, if needed.