A black and white photograph of a young woman with long, wavy hair, looking slightly off-camera with a thoughtful expression. She is wearing a dark jacket with a prominent fur-trimmed collar.

KIDS
HELPLINE

INSIGHTS 2016

NATIONAL STATISTICAL
OVERVIEW

Insights into young people in Australia

Document version: Final 1.0
Issue date: 15 March 2017
Author: Strategy & Research

Abbreviations

ASGS	Australian Statistical Geography Standard
ATSI	Aboriginal and/or Torres Strait Islander
CALD	culturally and linguistically diverse
KAS	Kids Helpline @ School
TSI	Torres Strait Islander

Acknowledgements

yourtown provided 78% of the funding for Kids Helpline in 2016 thanks to the generosity of supporters of the Art Union, donations and corporate support. This includes Optus' support of the Kids Helpline @ School program.

Australian, Queensland and Western Australian Governments provided 22% of the service's funding.



OPTUS



Government of **Western Australia**
Department of Local Government and Communities

Recommended citation:

yourtown (2017). *Kids Helpline Insights 2016: National Statistical Overview*. Brisbane: Author.

This report has been compiled by **yourtown** Strategy and Research. You may make a print or digital copy in whole or in part for your personal non-commercial use, subject to the inclusion of an acknowledgement of the source. All other rights are reserved, except for fair dealings as permitted under the *Copyright Act 1968*.

For further information, contact **yourtown** on 07 3368 3399, email yourtown@yourtown.com.au or visit www.yourtown.com.au. For media enquiries, call 07 3867 1248 or email marketing@yourtown.com.au.

For other reports in the Kids Helpline Insights 2016 series, see www.kidshelpline.com.au/reports

Contents

Contents	ii
Index of Tables and Figures	v
Executive summary	viii
About this report.....	viii
Kids Helpline today.....	viii
Kids Helpline counselling and support service.....	viii
Kids Helpline website.....	xv
Kids Helpline @ School program	xvi
Kids Helpline annual client satisfaction and outcome survey.....	xvii
Key themes from the data.....	xviii
1. Introduction	1
1.1 What is Kids Helpline?	1
1.2 What this report is about and who it is for	1
1.3 Where to get more information.....	2
2. Kids Helpline today	3
2.1 Overview of scope and focus	3
2.2 Kids Helpline's contemporary role in supporting and protecting young Australians.....	5
2.2.1 At an individual level.....	5
2.2.2 At a systemic level.....	7
2.3 Summary.....	11
3. Kids Helpline counselling and support service	12
3.1 Contact characteristics	13
3.1.1 Kids Helpline's <i>Record-a-Contact</i> database	13
3.1.2 Contact characteristics in 2016.....	14
3.1.3 Trends in contact characteristics	15
3.1.4 Summary.....	19
3.2 Contacts by type of help-seeking.....	20
3.2.1 Counselling and non-counselling contacts in 2016	20
3.2.2 Trends in help-seeking – counselling versus non-counselling support.....	22
3.2.3 Trends in help-seeking – types of non-counselling contacts	22
3.2.4 Summary.....	23
3.3 Medium of contact	24
3.3.1 Phone, web chat and email contacts in 2016	24
3.3.2 Trends in medium of contact	26
3.3.3 Summary.....	27
3.4 Issues for which children and young people most commonly sought counselling support.....	29
3.4.1 All counselling contacts.....	29
3.4.2 By medium of contact	30
3.4.3 By age group.....	31
3.4.4 By gender	33
3.4.5 By age group and gender	34
3.4.6 By cultural background.....	36
3.4.7 By remoteness.....	37
3.4.8 By type of support relationship with the service.....	38
3.4.9 Trend analysis of client concerns	39
3.4.10 Summary.....	43
3.5 All concerns of children and young people who received counselling	44

3.6	Referral to further support and duty-of-care actions	46
3.6.1	Referring children and young people to further support.....	46
3.6.2	External contacts and duty-of-care interventions	46
3.6.3	Summary.....	48
3.7	Counselling contacts about issues of contemporary social policy interest.....	49
3.7.1	Mental health	49
3.7.2	Suicide	50
3.7.3	Child abuse.....	50
3.7.4	Self-injury	51
3.7.5	Bullying.....	52
3.7.6	Summary.....	53
3.8	Counselling contacts about cyber-safety issues	54
3.8.1	Enhancing data collection on cyber-safety issues.....	54
3.8.2	Frequency of cyber-safety issues being discussed in counselling contacts	54
3.8.3	Help-seeking concerns of contacts disclosing cyber-safety issues	55
3.8.4	Summary.....	56
3.9	Counselling contacts where significant mental health issues are present.....	57
3.9.1	Current period	57
3.9.2	Trend analysis.....	58
3.9.3	Summary.....	59
3.10	Service demand and responsiveness	60
3.10.1	Attempted/answered contacts and response rates by medium of contact	60
3.10.2	Wait times	65
3.10.3	Demand for different types of support – counselling vs. non-counselling help-seeking	65
3.10.4	Direct client contact time	68
3.10.5	Summary.....	71
4. Kids Helpline website.....	72	
4.1	Service demand	72
4.2	Key issues of interest to website visitors	74
4.2.1	<i>Tips & Infotopics</i>	74
4.2.2	Referrals from other websites.....	76
4.3	Summary.....	77
5. Kids Helpline @ School	78	
5.1	What is Kids Helpline @ School?	78
5.2	Key program activities and outputs for 2016.....	78
5.2.1	Sessions booked and delivered and participants involved.....	78
5.2.2	Topics of discussion	79
5.2.3	Geographical reach.....	79
5.2.4	Use of teacher resource materials	80
5.3	Summary.....	81
6. Kids Helpline 2016 client satisfaction & outcome survey	82	
6.1	Objectives.....	82
6.2	Methodology	82
6.3	Key findings	82
6.3.1	Sample	82
6.3.2	Type of engagement with Kids Helpline in last 12 months	83
6.3.3	Perceived impact of Kids Helpline counselling and support service	84
6.3.4	Service user engagement with <i>Tips & Info</i>	85
6.3.5	Perceived impact of <i>Tips & Info</i>	85

6.3.6	Overall satisfaction	86
6.4	Summary.....	87
7. Conclusion		88
7.1	Key themes from the data.....	88
Theme 1	Kids Helpline continues to play a comprehensive role in protecting young Australians from abuse and harm.....	88
Theme 2	There are continuing shifts in the nature of children and young people's help-seeking	90
Theme 3	Kids Helpline can offer unique insights into the contemporary help-seeking concerns of young Australians	93
7.2	Other publications on Kids Helpline in 2016	94
7.3	How to support Kids Helpline.....	94
8. Appendix		95
8.1	Notes regarding data collection, analysis and interpretation	95
8.1.1	Limitations on counselling service data collection	95
8.1.2	Analysis	95
8.1.3	Other issues in interpretation	96
References		98

Index of Tables and Figures

Tables

Table I. Characteristics of 2016 Kids Helpline contacts aged 5-25 years ¹	14
Table 2. Proportional state breakdown of 2016 Kids Helpline contacts aged 5-25 years compared with Australian population estimates at 30/6/2016	15
Table 3. Characteristics of 2016 Kids Helpline contacts aged 5-25 years - by type of help-seeking ¹	21
Table 4. Characteristics of 2016 Kids Helpline contacts aged 5-25 years - by medium of contact ¹	25
Table 5. Characteristics of Kids Helpline contacts aged 5-25 years - by medium of contact and year (2014-2016) ¹	28
Table 6. Percentage change in number of Kids Helpline counselling contacts aged 5-25 years - by main concern in five-yearly intervals ^{1,2}	42
Table 7. Number and proportion of Kids Helpline counselling contacts aged 5-25 years with particular concerns and classes of concern - by year (2014-2016) ¹	45
Table 8. 2016 Kids Helpline counselling contacts aged 5-25 years with specific self-identified concerns	49
Table 9. Number and percentage of 2016 Kids Helpline counselling contacts aged 5-25 years assessed by counsellors to be experiencing particular issues	58
Table 10. Attempted and answered contacts - by medium, state and year of contact ¹	61
Table II. 2016 Kids Helpline @ School participants and sessions by session topic.....	79
Table 12. Characteristics of 2016 Kids Helpline client satisfaction and outcome survey respondents compared with 2016 Kids Helpline counselling and support service contacts aged 5-25 years ¹	83

Figures

Figure I. Contacts responded to by Kids Helpline's counselling and support service - 1991 to 2016	4
Figure 2. Kids Helpline counselling and support service contacts in 2016	13
Figure 3. Proportional gender breakdown of Kids Helpline contacts aged 5-25 years - by year (2007-2016)	15
Figure 4. Proportional breakdown of age group of Kids Helpline contacts aged 5-25 years - by year (2007-2016)	16
Figure 5. Proportional breakdown of cultural background of Kids Helpline contacts aged 5-25 years - by year (2007-2016)	17
Figure 6. Proportional breakdown of remoteness classification of Kids Helpline contacts aged 5-25 years - by year (2007-2016)	18
Figure 7. Proportional breakdown of Kids Helpline contacts aged 5-25 years according to type of support relationship with the service: first contact or occasional/ongoing support - by year (2007-2016)	18
Figure 8. Type of assistance sought by non-counselling contacts aged 5-25 years - percentage of non-counselling contacts aged 5-25 years by year (2012-2016)	23
Figure 9. Percentage of Kids Helpline contacts aged 5-25 years - medium of contact by year and type of help-seeking (2012-2016)	26
Figure 10. Percentage of Kids Helpline counselling contacts aged 5-25 years - medium of contact by year (2012-2016)	27
Figure II. Most frequently recorded concerns of 2016 Kids Helpline counselling contacts aged 5-25 years	30
Figure I2. Most frequently recorded concerns of 2016 Kids Helpline counselling contacts aged 5-25 years - by medium of contact	31
Figure I3. Most frequently recorded concerns of 2016 Kids Helpline counselling contacts aged 5-25 years - by age group	32
Figure I4. Most frequently recorded concerns of 2016 Kids Helpline counselling contacts aged 5-25 years - by gender	33

Figure I5.	Most frequently recorded concerns of 2016 Kids Helpline counselling contacts aged 5-25 years – by age group and gender	35
Figure I6.	Most frequently recorded concerns of 2016 Kids Helpline contacts aged 5-25 years – by cultural background	36
Figure I7.	Most frequently recorded concerns of 2016 Kids Helpline contacts aged 5-25 years – by remoteness	38
Figure I8.	Most frequently recorded concerns of 2016 Kids Helpline counselling contacts aged 5-25 years – by type of support relationship with the service	39
Figure I9.	Most frequently recorded concerns of Kids Helpline counselling contacts aged 5-25 years – by year (2012-2016)	40
Figure 20.	Main concern of Kids Helpline counselling contacts aged 5-25 years – cumulative counts of contacts 1996-2016	41
Figure 21.	Most frequently recorded main concern of Kids Helpline counselling contacts aged 5-25 years – by year (1997-2016)	42
Figure 22.	Referral to other support – 2016 Kids Helpline counselling contacts aged 5-25 years	46
Figure 23.	Number of external contact attempts by Kids Helpline counsellors, including duty-of-care interventions – by year (2012-2016)	47
Figure 24.	Reasons documented by Kids Helpline counsellors for duty-of-care interventions (2016)	47
Figure 25.	Relative frequency of particular reasons being documented by Kids Helpline counsellors for initiating duty-of-care interventions – by year (2012-2016)	48
Figure 26.	Subcategory of concern where mental health identified as a concern of the child or young person (2016)	49
Figure 27.	Subcategory of concern where suicide identified as a concern of the child or young person (2016)	50
Figure 28.	Subcategory of concern where a form of child abuse identified as a concern of the child or young person (2016)	51
Figure 29.	Subcategory of concern where self-injury identified as a concern of the child or young person (2016)	51
Figure 30.	Bullying concerns of 2016 Kids Helpline counselling contacts aged 5-25 years	52
Figure 31.	Subcategory of concern where bullying identified as a concern of the child or young person (2016)	53
Figure 32.	Percentage of Kids Helpline counselling contacts aged 5-25 years – by disclosure of cyber-safety issues (July-December 2016)	55
Figure 33.	Age group of Kids Helpline counselling contacts by whether or not they disclosed experiencing cyber-safety issues (July-December 2016)	55
Figure 34.	Most frequently recorded concerns of counselling contacts indicating worry about cyber-safety issues compared with other counselling contacts (July-December 2016)	56
Figure 35.	Percentage of Kids Helpline counselling contacts aged 5-25 years assessed by counsellors to be experiencing particular issues – by year (2001-2016)	58
Figure 36.	Number of attempted contacts (demand) by medium – by year (2012-2016)	62
Figure 37.	Number of answered contacts (service responses) by medium – by year (2012-2016)	62
Figure 38.	Percentage of Kids Helpline phone contacts (all ages) contacting via landline or mobile – by year (2002-2016)	63
Figure 39.	Response rates by medium: phone (unadjusted and adjusted to exclude early drop outs), web chat, and all media – by year (2012-2016)	64
Figure 40.	Length of time until phone call to Kids Helpline abandoned showing early drop outs (2016)	64
Figure 41.	Mean wait-time in minutes for attempted and answered phone and web chat contacts – by year (2012-2016)	65
Figure 42.	Number of Kids Helpline answered contacts (all ages) by type of support sought: counselling support or information, referral and other support – by year (2007-2016)	66

Figure 43. Percentage of Kids Helpline contacts aged 5-25 years seeking counselling support - by year (2007-2016)	66
Figure 44. Number of Kids Helpline non-counselling contacts aged 5-25 years seeking particular types of assistance - by year (2012-2016)	68
Figure 45. Total direct client contact time in minutes per year by type of support sought: all Kids Helpline contacts, counselling contacts, and information, referral and other contacts (2007-2016)	69
Figure 46. Mean session duration in minutes: Kids Helpline counselling contacts (all ages) - by year (1991-2016)	69
Figure 47. Mean session duration in minutes - by medium of contact and type of help-seeking: all Kids Helpline contacts responded to 2007-2016	70
Figure 48. Total direct client contact time in minutes per year by medium of contact: all Kids Helpline contacts, phone contacts, web chat contacts and email contacts (2007-2016)	71
Figure 49. Kids Helpline website - number of unique visitors and website sessions - by year (2012-2016)	72
Figure 50. Kids Helpline website - number of page views of different self-help resources - by year (2012-2016)	73
Figure 51. Most frequently visited kids' <i>Tips & Info</i> topics in 2016	74
Figure 52. Most frequently visited teens' <i>Tips & Info</i> topics in 2016	75
Figure 53. Most frequently visited parent <i>Tips & Info</i> topics in 2016	76
Figure 54. Top referring websites to Kids Helpline website in 2016.....	77
Figure 55. Number of 2016 Kids Helpline @ School sessions booked and delivered - by month.....	78
Figure 56. Number of 2016 Kids Helpline @ School participating schools and sessions - by state.....	79
Figure 57. Proportion of 2016 Kids Helpline @ School participating schools - by remoteness.....	80
Figure 58. Number of page views to Kids Helpline @ School micro-website resources for teachers in 2016.....	80
Figure 59. Respondents' engagement with Kids Helpline in last 12 months (2016)	84
Figure 60. Perceived impacts of last session talking to a counsellor (2016)	84
Figure 61. Respondents' perceptions of whether or not <i>Tips & Info</i> topics are interesting (2016).....	85
Figure 62. Perceived impacts of last <i>Tips & Info</i> topic read (2016).....	85
Figure 63. Overall satisfaction with Kids Helpline - all respondents and by types of service engagement (2016)	86
Figure 64. Percentage of 2016 Kids Helpline counselling contacts aged 5-25 years - by cultural background	97

Executive summary

About this report

This report provides a statistical overview of the Kids Helpline service for 2016, including the:

- Kids Helpline counselling and support service
- Kids Helpline website, and
- Kids Helpline @ School program.

It presents 2016 and, where relevant, short- and longer-term trend data in relation to:

- client characteristics
- client needs and concerns
- client communication preferences
- types of help-seeking
- service demand and response, and
- client satisfaction and perception of service impact.

Kids Helpline today

To provide context for the service data presented in the report and to address a range of common misconceptions about Kids Helpline, this edition of the *Overview* incorporates a new chapter (Chapter 2), describing the contemporary scope and focus of Kids Helpline's work and its role in supporting and protecting young Australians, both at an individual and systemic level.

At the individual level, Kids Helpline employs a therapeutic framework focused on empowering children and young people to deal with issues in their lives by identifying and developing their personal resources. It delivers confidential, non-judgemental counselling and support via a range of communication modalities (phone, email and web chat) to support children's sense of trust and comfort in using the service and their ability to access it freely from anywhere. Kids Helpline's needs-based intervention model overlays this therapeutic framework and helps to ensure that the provision of specific supports, interventions and resources to children and young people is tailored to each individual's level and complexity of need.

At the systemic level, Kids Helpline protects and supports children and young people by:

- serving as a portal into specialist support systems that often overlook the particular developmental and structural vulnerabilities of children, ensuring that there is 'no wrong door' into these support systems
- providing mainstream services a child/youth specialist to which they can refer their clients for age-specific information, support and counselling, and
- giving voice to the needs, concerns and experiences of children and young people in policy and research.

The complex and multifaceted role that Kids Helpline plays in two key social support systems – the child protection and mental health systems – is outlined to demonstrate some of the ways Kids Helpline enhances service system cohesion and functionality to better meet the needs of children and young people and provide them with a safety net.

Kids Helpline counselling and support service

Chapter 3 presents a wide range of information about the characteristics, needs, concerns, communication preferences and types of help-seeking of children and young people contacting the Kids Helpline counselling and support service. The service, which operates 24 hours a day, seven days a week, aims *to listen and respond to the needs of children and young people anytime and for any reason, and where appropriate support children and young people to develop strategies and skills to better manage their lives*. Counselling and support services are provided by tertiary-qualified counsellors via telephone, email and web chat.

Contact characteristics

Current period

Of the 181,165 contacts responded to by the counselling and support service in 2016, 177,591 were known to be from children and young people aged 5-25 years – Kids Helpline's target population. Key demographic characteristics of these contacts include the following:

- *Gender.* Roughly three out of four (73%) contacts responded to were from females while one in four (26%) were from males. In 2015, Kids Helpline introduced a new category for gender – intersex, trans and gender-diverse. A total of 1,260 contacts, or 1%, were from children and young people identifying with this third gender category.
- *Age.* More than half (56%) of all contacts responded to were from children and young people aged 13-18 years, three in 10 (30%) were from 19-25 year-olds, and one in seven (14%) were from 5-12 year-old.
- *Cultural background.* Where information was available on cultural background (23% of contacts), 4% of contacts were from individuals identified as Aboriginal and/or Torres Strait Islander (ATSI), 35% from culturally and linguistically diverse (CALD) backgrounds, and 61% from Caucasian Australians.
- *Location.* Contacts were received from all states and territories closely in proportion to the state breakdown of the Australian population of children and young people aged 5-25 years. Where the child or young person's postcode was known (34% of contacts), most were living in Major Cities (72%), one in five (20%) were living in Inner Regional localities, and one in 12 (8%) were living in Outer Regional or Remote localities.
- *Type of support relationship.* Where the child or young person's relationship with the service was recorded (40% of all contacts), just over one third (37%) were contacting for the first time and just under two thirds (63%) were receiving occasional or ongoing support.

Trends in contact characteristics

While there has been much continuity in Kids Helpline contact characteristics over the last decade, the following changes are apparent:

- the proportion of contacts from females compared with males is slowly increasing
- the proportion of contacts from children and young people aged 19-25 years has grown steadily since the service extended its reach to this age group, with a corresponding decrease in the proportion of contacts from 13-18 year-olds
- contacts from children and young people from culturally and linguistically diverse backgrounds have gradually increased as a proportion of all contacts responded to while contacts from Caucasian Australians have decreased proportionally, and
- over the last five years, the proportion of first time contacts has been gradually increasing relative to repeat contacts.

Contacts by type of help-seeking

Contacts responded to by the Kids Helpline counselling and support can be grouped into two broad categories of help-seeking: contacts from children and young people seeking counsellor assistance for a particular concern or problem (these support sessions are called *counselling contacts*), and contacts from children and young people seeking information, referral to other services, or some other form of non-counselling support, like general conversation or playful engagement (these support sessions are called *non-counselling contacts*, or *information, referral and other contacts*).

Current period

- In 2016, 66,963 (or 37%) contacts from children and young people aged 5-25 years were for counselling support while 110,628 (or 63%) were for information, referral or other non-counselling support.
- The demographic profile of counselling and non-counselling contacts differ by gender, age group, cultural background, remoteness and support relationship suggesting that different modalities of support and engagement are necessary to reach, build trust with, and support the diversity of children and young people in the Australian population.

Trends in type of help-seeking

- Over the last decade, the number and proportion of counselling contacts have gradually increased while the number and proportion of non-counselling contacts have decreased.
- The nature of non-counselling contacts is also changing, at least over the short term. Since 2012, the relative frequency with which children and young people have contacted Kids Helpline for the purpose of 'reconnecting or re-engaging' with the service or 'engaging in other ways' has decreased, while the frequency of 'non-conversational' contacts has increased (see section 3.2.3 for definitions of non-counselling contact types).

Medium of contact

- In 2016, three out of four contacts (75%) from children and young people aged 5-25 years were answered by phone, 17% by web chat and 8% by email. Over the last five years, the proportion of contacts answered by web chat has steadily increased, particularly among counselling contacts.
- Children and young people's preferences for engaging with the service via particular media were observed to be related to their gender, age group, cultural background, remoteness, type of support relationship to the service and type of help-seeking. This observation again highlights the importance of Kids Helpline providing a range of engagement modalities in order to reach, build trust with, and support the diversity of children and young people in the Australian population.
- Almost every subgroup of the Kid Helpline population analysed, except those known to be Aboriginal and/or Torres Strait Islander, have slightly or moderately increased their preference for web chat over the last three years while reducing their preference for email-based contact and/or phone-based contact. For the vast majority of subgroups, there is a reduction in preference for both phone *and* email over this period.

Issues for which children and young people most commonly sought counselling

Current period

- During 2016, Kids Helpline counsellors responded to 66,963 contacts from children and young people aged 5-25 years who were seeking help about specific problems or concerns (i.e. *counselling contacts*).
 - Roughly, one in four counselling contacts (23%) was in relation to mental health problems – the child or young person's own mental health or that of another person.
 - Just less than one in five contacts was about family relationship issues (19%) or emotional wellbeing (17%).
 - One in eight (13%) contacts involved the child or young person seeking help for suicide concerns.
 - One in 10 contacts concerned dating and partner relationships (10%) or friend/peer relationships (9%).
 - One in 12 (8%) contacts was about child abuse.
 - One in 13 (7%) contacts focused on self-injury concerns.
 - One in 18 (6%) contacts was about bullying.
 - One in 20 (5%) contacts was in relation to study and education issues.
- The concerns of children and young people contacting Kid Helpline in 2016 were found to vary:
 - greatly according to the child or young person's age group and cultural background
 - moderately according to their gender, and
 - slightly according to their chosen medium of contact.

Remoteness classification appeared to have negligible association with the concerns for which children and young people were seeking counselling support.

Trends in client concern

- The relative frequency with which Kids Helpline has been contacted about each of these issues over the last five years has remained constant.
- Delving into Kids Helpline's data archive, however, it is possible to observe considerable change as well as continuity in the frequency with which particular concerns have been brought for counselling. Most

notably, there has been an increase in help-seeking related to mental and/or emotional health or illness, including self-harm, and suicide. It is likely, however, that these and other observed changes are related to innovations in the operation of Kids Helpline over the last two decades which have specifically facilitated help-seeking in these areas.

Referral to further support and duty-of-care interventions

The counselling and support service endeavours to provide a holistic service to children and young people, linking them whenever appropriate and possible to other support services that may assist them to address issues causing them concern. In addition, there are times when counsellors contact external agencies directly to engage support for a client and/or to protect a client who is experiencing harm or who is at imminent risk of harm.

Current period

- In 36% of counselling contacts in 2016, the child or young person was assessed as requiring referral for additional support:
 - in 16% of contacts, the child or young person was referred to a generalist service or practitioner
 - in 12% of contacts, they were referred to a specific service for ongoing support, and
 - in 7% of contacts, it was not possible to make the required referral, either because the child or young person declined the referral, there were no appropriate services available, or the child or young person finished the session prematurely.
- In 2016, there were a total of 2,451 records of counsellors attempting to contact an external agency, or agencies, to support a child or young person and/or to protect them from significant harm or imminent risk of significant harm. Three out of four of these records (1,907, or 78%) concerned a duty-of-care intervention.
- Child abuse and suicide attempts were by far the most common reasons for duty-of-care interventions in 2016 (38% and 34% respectively).

Trends in duty-of-care interventions

- From 2012 to 2016, there has been:
 - a 157% increase in the number of duty-of-care interventions initiated by counsellors
 - a decrease in the proportion of duty-of-care interventions precipitated by suicide attempts, self-harm and drug overdose, and
 - an increase in the proportion of interventions precipitated by concern about child abuse.

Counselling contacts about issues of contemporary social policy interest

When counsellors record children or young people as having a particular concern, they specify one of a number of subcategories related to that issue to log the concern more specifically. Analysis of concern subcategories is provided for five issues that are of contemporary policy concern: mental health, suicide, child abuse, self-harm and bullying. This analysis highlights that key aspects of the work of Kids Helpline in supporting children and young people with these issues are:

- crisis intervention
- harm minimisation and prevention, and/or
- supporting children and young people to manage significant and ongoing issues impacting on their health and wellbeing.

Mental health

- In 2016, 15,709 counselling contacts (or 23%) were in relation to mental health issues.
- In half (52%) of these contacts, the child or young person was seeking support or strategies to manage an established disorder.
- In almost two thirds (37%) of these contacts, the child or young person was seeking help in relation to the symptoms of an undiagnosed mental health condition. Half of these cases (19%) concerned mild or occasional symptoms and half (18%) were about significant mental health symptoms.

- Around one in 20 (6%) contacts about mental health in 2016 was about concern for another person's mental health.

Suicide

- In 2016, 8,750 counselling contacts (13%) were about suicide-related concerns.
- The vast majority (77%) of these contacts were about the child or young person's own suicidal thoughts or fears.
- Roughly one in seven (14%) was in relation to concern for another person's suicidal thoughts or feelings.
- Just less than one in 10 (9%) contacts concerned the child or young person's immediate intention to suicide or their attempt at suicide at the time of the call.

Child abuse

- In 2016, 5,387 counselling contacts (8%) were about child abuse, domestic or family violence, or issues related to living in out-of-home care.
- Seven out of 10 (69%) of these contacts were about current abuse or risk of abuse, and one in 10 (11%) was about concern for another person experiencing or at risk of abuse.
- One in five (20%) was in relation to the impacts of past abuse.

Self-injury

- In 2016, 4,431 (7%) counselling contacts were in relation to self-injury concerns.
- In 78% of these contacts, the child or young person was contacting for help to avoid acts of self-injury.
- One in 10 (11%) contacts was about the child or young person's concern for another person.

Bullying

- In 2016, 3,828 counselling contacts (6%) were about bullying.
- 84% of these related to bullying at school and 17% concerned bullying in other contexts.
- In 27% of contacts about bullying, the child or young person was assessed as 'at risk of bullying' because it was not established whether the behaviour they were subject to was deliberate or ongoing in nature.
- A further 3% of bullying contacts were about concern for someone else and 2% were for the purpose of gathering information.
- Seven out of 10 (70%) contacts, however, were from children and young people experiencing some form of bullying according the Kids Helpline definition. Types of bullying behaviour reported include: verbal abuse, exclusion, isolation and/or spreading of rumours, intimidation, extortion or threats of personal harm, and physical aggression or assault.
- In 20% of contacts about bullying, the child or young person indicated that the bullying took a variety of these forms.
- In July 2016, Kids Helpline expanded its data collection to investigate the frequency with which *cyberbullying* is being discussed in counselling sessions about bullying. In 28% of contacts about bullying responded to between July and December 2016, the child or young person indicated that the bullying including online or texting elements.

Counselling contacts about cyber-safety issues

Cyber-safety is another issue of contemporary social policy concern. To support its growing role in responding to the cyber-safety concerns of children and young people, Kids Helpline expanded its data collection in July 2016 to gauge the frequency of cyber-safety issues being discussed in counselling sessions.

- In 1,566 counselling sessions between July and December (or 5% of counselling contacts), the child or young person disclosed experiencing cyber-safety issues to counsellors.
- The help-seeking concerns of children and young people in these contacts were found to differ considerably from those recorded for children and young people in other counselling contacts. These differences may offer insight into the nature of children and young people's cyber-safety issues.

- By far the most common concern of those disclosing cyber-safety issues was bullying, with more than one in three (36%) of these counselling sessions focusing on bullying. By comparison, bullying was recorded as a concern of the child or young person in 5% of other counselling sessions.
- In addition to bullying, counselling sessions where cyber-safety issues were disclosed were more likely than other counselling sessions to be focused on the following issues:
 - dating and partner relationships (15% c.f. 10%)
 - friend and peer relationships (15% c.f. 9%)
 - sexual activity (6% c.f. 1%), and
 - sexual harassment (4% c.f. <1%).
- Counselling sessions where cyber-safety issues were disclosed were *less likely* than other counselling sessions to be focused on the following issues, however:
 - mental health issues (14% c.f. 24%)
 - emotional wellbeing (11% c.f. 17%), and
 - family relationship issues (9% c.f. 19%).
- These observations may suggest the following:
 - that online or electronic bullying (cyberbullying) is the most common type of cyber-safety issue worrying children and young people contacting Kids Helpline
 - that cyber-safety issues are experienced more commonly in the context of peer and romantic relationships than family relationships, and
 - that sexual activity may be a particular domain for cyber-safety worries among those contacting Kids Helpline for support.

Counselling contacts where significant mental health issues are present

Current period

- During 2016:
 - in two out of five counselling contacts (40%), the child or young person was identified by a tertiary-qualified Kids Helpline counsellor as either experiencing a mental health disorder or symptoms indicative of a mental health disorder
 - in 14% of counselling contacts, the child or young person disclosed current thoughts of suicide to the counsellor
 - in 12% of counselling contacts, the child or young person disclosed current difficulties with self-injury, and
 - in almost half of all counselling contacts (45%), the child or young person was assessed as experiencing at least one of these three issues.

Trends in mental health needs

- Over the period for which data are available, there would appear to be a slow but steady increase in the proportion of counselling contacts where the child or young person
 - discloses suicidal ideation (from 3% in 2001 to 14% in 2016), and/or
 - is assessed as experiencing a mental health disorder (from 32% in 2011 to 40% in 2016).

The proportion of counselling contacts where self-injury issues are disclosed, however, would appear to be decreasing (from 22% in 2012 to 12% in 2016).
- In interpreting these figures, it is important to note that Kids Helpline offers children and young people with mental health issues ongoing counselling and support where they would like this. Accordingly, the increase in the frequency with which these issues are observed may reflect patterns of recurrent service use among this group of clients.

Service demand and responsiveness

Current period

- In 2016, 356,595 attempts were made to contact the counselling and support service, 78% of these by phone, 18% by web chat and 4% by email. Of these attempts, 181,165 were answered by counsellors, corresponding to an overall response rate of 51%.
- In 2016, major efforts were made to extend children and young people's access to support and counselling via web chat. In particular:
 - hours of service delivery were extended – originally, web chat was only available from 12pm to 10pm Monday to Friday and from 10am to 10pm on weekends; from early 2016, hours were extended gradually to span 8am to midnight, seven days a week, and
 - the Kids Helpline website was upgraded in late February to optimise its usage by mobile devices, including the introduction of a new interface for the delivery of web counselling.

Trends in service demand and responsiveness

Understanding trends in service demand and responsiveness is important for continuing to meet the needs of children and young people. A wide range of data is therefore presented in relation to demand for the Kids Helpline counselling and support service and its responsiveness to clients over the last 5-10 years.

Taken together, the data indicate significant shifts in demand for the counselling and support service.

- The period has seen a gradual shift in client demand away from engagement by telephone (a reduction of 30% in phone attempts from 2012-2016) and email (a reduction of 42% in attempts) toward web chat (an increase of 54% in attempts).
- It has also seen an overall reduction in the number of contacts being responded to (by 41% from 2007 to 2016), although the total time invested by the service in responding to the needs of children and young people has grown considerably (by 69%, from 2007 to 2016).
- This is owing to the fact that an increasing number of clients are requiring more intensive counselling-type responses (an increase of 22% from 2007 to 2016) and because the average length of these sessions is steadily increasing (these were 10 minutes in 1991 and in 2016 they averaged 37 minutes).
- The growing number of web chat contacts responded to (an increase of 151% from 2012 to 2016) is also contributing to upward pressure on counsellor time as these sessions are considerably longer on average than either phone or email contacts (over the last decade web chat sessions averaged 40 minutes compared to 7 minutes for phone sessions).

Complexity of meeting client demand

With a deliberate decision being made by Kids Helpline in recent years, and most notably during 2016, to increase client access to support and counselling via web chat, a mode of service delivery considerably more resource-demanding than telephone or email, service responsiveness can be seen to have both improved and declined as a result:

- the number of answered web chat contacts has grown considerably (from 12,643 in 2012 to 31,765 in 2016)
- mean wait times for web calls being answered by a counsellor have reduced substantially (from 78 minutes in 2012 to 22 minutes in 2016), and
- response rates for web chat have increased markedly (from 30% in 2012 to 48% in 2016).

However, these improvements in access to web chat, without modifying the total amount of time invested in client contact, have inevitably come at the cost of:

- fewer overall service responses (a reduction of 36% from 2012 to 2016)
- lower overall response rates (from 62% in 2012 to 51% in 2016), and
- in 2016, increased wait times for answered phone contacts (from 1.47 minutes in 2015 to 2.23 minutes in 2016).

These data highlight the complexity for Kids Helpline of providing a responsive counselling and support service to children and young people that balances shifting client preferences for receiving support via particular communication modalities with the goal of responding to as many vulnerable children and young people as possible.

Innovations in data management enhancing service responsiveness

While the number of service responses has declined by 41% over the last decade, this reduction is among those seeking information, referral and other non-counselling responses. Closer analysis of the decrease in these contacts over the last five years – the period where the decline in contacts has been sharpest – suggests that much of this can be explained by improvements in therapeutic practice with frequent callers facilitated by innovations in data management and case management that have occurred during the period.

Kids Helpline website

In addition to the counselling and support service, Kids Helpline operates a website for self-directed help-seeking by children, young people and adults (www.kidshelpline.com.au). The self-help resources provided on the website, and in particular the *Tips & Info* topics for *kids, teens* and *parents & carers*, have been developed by clinical staff and researchers. They are intended to provide information and strategies to assist users in responding to common issues and concerns.

Service demand

- In 2016 there were 580,562 unique visitors to the Kids Helpline website who collectively participated in 774,551 web sessions.
- From 2009 to 2015, web sessions increased by 403% and unique visitors by 381%.
- Between 2015 and 2016, however, web sessions decreased by 16% and unique visitors decreased by 19%.

The break, in 2016, from seven years of continuous and substantial growth in website engagement relates to the introduction in February of a new URL and website for Kids Helpline (formerly www.kidshelp.com.au). This innovation unavoidably resulted in a drop in organic search traffic due to delay by Google in re-indexing the site based on the new site structure. Google will organically re-index the site over time, however, so it is anticipated that search traffic will normalise in the coming year and ultimately increase (based on the new site's stronger SEO domain authority).

Keys concerns of website visitors

Demand for Tips & Info topics

Demand for particular information resources, like *Tips & Info* topics, provides some insight into the concerns and interests of website visitors.

- Kids
 - In 2016, there were a total of 46 kids' *Tips & Info* topics available, collectively receiving 54,394 page views.
 - 37% of all kids' *Tips & Info* page views were in relation to five topics – *staying safe online, happy being yourself, building respectful relationships, dealing with homework, and making great friendships*. *Staying safe online* was by far the most visited page in 2014 and 2015 as well, suggesting that cyber-safety may be a standout concern for those in this age group.
 - Ten of the 20 most viewed topics in 2016 relate to dealing with different kinds of relationships and interpersonal issues.

- Teens
 - In 2016, there were a total of 51 teens' *Tips & Info* topics available, collectively receiving 211,346 page views.
 - 37% of all teens' *Tips & Info* page views were in relation to five topics – *leaving home, handling peer pressure, body image, understanding cyberbullying* and *understanding bullying*. The topics *handling peer pressure, leaving home* and *body image* were also among the five most frequently visited teens *Tips & Info* topics in 2014 and 2015, suggesting some continuity in the issues of interest to website visitors of this age group.
 - One in every 10 page views (10%) was in relation to information resources on bullying.
- Parents/carers
 - In 2016, there were a total of 45 *Tips & Info* topics on the website targeted at adults – primarily parents, guardians, teachers and other significant adults in children's lives. These resources collectively received 128,029 page views.
 - Two in five (40%) of all parents'/carers' *Tips & Info* page views were in relation to five topics – *understanding risk-taking, anxiety, celebrating our cultural differences, building respectful relationships, and being a good communicator*. The top four of these five issues were also among the six most frequently viewed topics in both 2014 and 2015, suggesting some consistent themes in the issues of concern to this group of website users.

Referrals from other websites

Referrals from other organisations' websites are another source of information about the needs and concerns of website visitors.

- Of the 30,666 referrals to the Kids Helpline website received from the top 20 referring websites:
 - approximately 10,000 came from youth and generalist mental health and counselling websites (primarily ReachOut, but also Child and Youth Health, mindhealthconnect, etc.)
 - close to 2,000 referrals were received from the Australian Government's eSafety website, and
 - over to 2,600 referrals came from other cyber-safety and anti-bullying websites (i.e. Bullying No Way, Take a Stand Together, National Centre Against Bullying).

Kids Helpline @ School program

Kids Helpline @ School (KAS) is an early intervention and prevention program for primary school-aged children that has been operating since 2013. The program offers primary schools a professional counsellor-facilitated classroom session via video technology to discuss topics impacting on the lives of students with the objectives of building children's mental health literacy, resilience and capacity to seek help when required.

- In 2016, 14,822 primary school students from 170 schools participated in a total of 539 classroom sessions with a Kids Helpline counsellor.
- Schools participated from every state and territory, and one third (33%) of participating schools were located in regional or remote localities.
- Teachers made extensive use of online educational resources developed by Kids Helpline to support schools' participation in the program, with over 30,000 page views of these resources.
- In addition to a wide range of wellbeing topics, from 1 July 2016 a new digital safety curriculum was introduced with the financial support of Optus. These sessions focus on assisting children to engage positively and safely in online environments, teaching them principles of 'digital citizenship' and how to speak out when they, or others, have negative online experiences.

Kids Helpline annual client satisfaction and outcome survey

yourtown believes that service users provide an essential perspective in evaluating the quality and effectiveness of Kids Helpline services. One way that **yourtown** engages the views of Kids Helpline service users is through an annual client satisfaction and outcome survey.

Methodology

A brief online survey, comprising a combination of open- and fixed-response items, was conducted over nine weeks from November 2016 to January 2017. The survey was open to any individual who had accessed the Kids Helpline counselling and support service or visited the Kids Helpline website within the last 12 months.

Key findings

Sample

A total of 625 people responded to the survey, 611 of whom reported being aged 5–25 years. The sample includes children and young people from all states and territories and is broadly representative of Kids Helpline counselling and support service contacts in 2016 with a few exceptions.

Type of engagement with Kids Helpline in the last 12 months

A total of 567 respondents (91%) had contacted the counselling and support service and 310 respondents (50%) had visited the website.

Perceived impact of Kids Helpline counselling and support service

- After speaking to a counsellor:
 - 72% of respondents reported feeling more capable of dealing with their problem, and
 - 75% felt they had more ideas for what to do about the issue.

Engagement with and perceived impact of Tips & Info topics

- Four out of five (80%) respondents who had a read a *Tips & Info* topic said they found it interesting.
- After reading a *Tips & Info* topic:
 - 45% felt more capable to deal with their problem
 - 55% felt they had more ideas for what to do about the problem
 - 57% felt more motivated to deal with the problem, and
 - 59% said they would be more likely to seek further help for the problem.

Overall satisfaction

- 91% of respondents said they would recommend Kids Helpline to a friend and 82% reported that they were either *satisfied* or *very satisfied* with Kids Helpline. Six per cent indicated that they were either *dissatisfied* or *very dissatisfied* with Kids Helpline.
- Respondents' satisfaction was found to be related to the type of engagement they reported having with the service in the last 12 months:
 - 88% who had both browsed the website *and* talked to a counsellor reported being either *satisfied* or *very satisfied*
 - 79% of those who spoke with a counsellor but did not browse the website indicated they were *satisfied* or *very satisfied*, while
 - 67% of those who had browsed information on the website but not spoken to a counsellor indicated being either *satisfied* or *very satisfied*.

Key themes from the data

Three key themes emerge from reviewing the data presented in the 2016 *Overview* report.

Theme 1 Kids Helpline continues to play a comprehensive role in protecting young Australians from abuse and harm

Taken together, the chapters of this report highlight the comprehensive role that Kids Helpline continues to play in protecting children and young people from abuse and harm. The child protection work of the service includes *primary*, *secondary* and *tertiary* prevention activities:

- *Primary prevention* activities are universal or non-targeted services for children and young people that aim to reduce their vulnerability to abuse and other harms. Kids Helpline's primary prevention activities include:
 - information, referral and counselling support for children and young people via phone, web chat and email any time of the day in relation to any issue of concern to the child or young person
 - self-help resources on the Kids Helpline website for children, teenagers and adults, including material focused on building resilience and on keeping children and young people safe, and
 - the Kids Helpline @ School program, which aims to build children and young people's resilience, help-seeking behaviours, coping strategies and knowledge of sources of help, with a new focus in 2016 on preventing and responding to negative online experiences.
- *Secondary prevention* activities are targeted at children and young people experiencing abuse or harm, or at imminent risk of abuse or harm, and aim to reduce the impact or seriousness of the harm. Kids Helpline's secondary prevention activities include providing crisis responses and duty-of-care interventions via phone, web chat and email to children and young people experiencing or at significant risk of mental illness escalation, child abuse, family/domestic violence, suicide and self-injury. They also include supporting children and young people experiencing bullying, cyber-safety issues and other forms of violence and abuse.
- *Tertiary prevention* activities are targeted at those already impacted by abuse, trauma or other harms and aim to help them manage or recover from these experiences. Tertiary prevention activities offered by Kids Helpline include counselling in relation to past abuse as well as case management to support children and young people with complex or ongoing issues associated with past trauma or abuse.

Theme 2 There are continuing shifts in the nature of children and young people's help-seeking

Trend data on service usage presented in this report highlight ongoing shifts in the nature of children and young people's help-seeking in Australia. Key shifts in help-seeking, and Kids Helpline's responses to these, can be summarised as follows:

Help-seeking shift # 1. There continues to be a gradual but steady shift in children and young people's medium of preference for contacting a counsellor – away from telephone and email towards web chat, and away from landlines towards mobile phones.

Kids Helpline has been responding to children and young people's shifting preferences for particular communication media by:

- substantially extending web chat operating hours
- upgrading the Kids Helpline website to optimise usage by mobile devices, as well as introducing a mobile-friendly interface for the delivery of web counselling
- shortening web chat wait times
- improving web chat response rates, and
- answering substantially more web chat contacts.

Help-seeking shift # 2. The intensity of support required by children and young people contacting the counselling and support service is increasing

This trend is evidenced by various things, including:

- a growing number and proportion of Kids Helpline contacts requiring more intensive counselling-type responses
- counselling sessions becoming longer to accommodate discussion of more complex issues
- the proportion of counselling contacts each year in which children and young people are identified as struggling with mental ill-health is increasing, as is the proportion of contacts where the child or young person discloses current thoughts of suicide, and
- the number of duty-of-care interventions initiated by Kids Helpline counsellors to protect children and young people experiencing significant harm is also increasing each year.

Over the last decade, Kids Helpline has responded to this trend in various ways, including the following:

- increasing the professional qualifications of counsellors and providing ongoing specialist training and supervision to assist them to respond to emerging client issues
- increasing the age eligibility for service to include young adults, recognising that mental health concerns correlate strongly with increasing age, and
- changing the Kids Helpline model of service delivery to better support children and young people with more complex needs through the increased provision of ongoing counselling and case management.

Help-seeking shift # 3. Help-seeking in relation to cyber-safety issues, including cyberbullying, is growing

This is evidenced by:

- the increasing frequency with which children and young people seek out self-help resources on the Kids Helpline website related to online safety and bullying
- the growing number of referrals to the Kids Helpline website coming from cyber-safety and anti-bullying websites, and
- the growing demand for Kids Helpline @ School topics related to online safety.

Kids Helpline is responding to this growing sphere of help-seeking in various ways, including the following:

- expanding data collection to gather more reliable information about the frequency with which cyberbullying, and cyber-safety issues more generally, are being discussed in counselling contacts, in order to inform service planning and policy advocacy
- providing counsellors with specialist training in responding to cyber-safety issues
- facilitating children and young people's access to support by giving those who visit the Australian Government's eSafety website priority access to Kids Helpline web counselling to discuss cyber-safety concerns, and
- expanding the Kids Helpline @ School program to include a digital safety curriculum, thanks to the support of Optus.

Help-seeking shift # 4. The demographic profile of help-seekers is shifting

Two key demographic shifts that are underway are: the increasing number of contacts from children and young people

- from culturally and linguistically diverse backgrounds, and those
- who identify as neither male nor female.

Kids Helpline has responded to these shifts by:

- providing counsellors with specialist training in cultural sensitivity and in working sensitively and effectively with gender-diverse and same-sex attracted young people, and
- enhancing data collection through the introduction of a new gender category in 2015 – *intersex, trans and gender-diverse*. This innovation will enable the service to better understand and respond to the issues and concerns of this group of service users.

Theme 3 Kids Helpline can offer unique insights into the contemporary help-seeking concerns of young Australians

This report provides valuable insights into the types of issues for which young Australians are seeking help, including both counselling-type support and information and referral support.

- The issues for which children and young people most commonly sought counselling support in 2016 were *mental health* (23%), *family relationships* (19%), *emotional wellbeing* (17%), *suicide* (13%) and *dating and partner relationships* (10%).
- In terms of insights from visitors to the Kids Helpline website in 2016:
 - The number of referrals to the site received from cyber-safety and anti-bullying websites, and the frequency with which Kids Helpline website visitors of all ages consulted *Tips & Info* topics on cyber-safety issues (e.g. online safety, sexting, cyberbullying, etc.) and bullying suggest that *cyber-safety* and *bullying* are key contemporary concerns of young Australians and those responsible for their care.
 - Similarly, the number of referrals to the website received from mental health and counselling websites, and the frequency with which Kids Helpline website visitors of all ages consulted *Tips & Info* topics on mental health issues (e.g. anxiety, depression, body image, stress, resilience, self-harm, suicide, etc.) suggest that *mental and emotional wellbeing* is another major area of contemporary concern to young Australians and their caregivers.
 - Finally, a theme of interest across age groups visiting the website, but most evidently among children, is *how to manage important relationships* – relationships with parents, siblings, friends, peers and intimate partners.

1. Introduction

Welcome to *Kids Helpline Insights 2016: National Statistical Overview* – a report documenting the work of the service for the 2016 calendar year.

1.1 What is Kids Helpline?

Kids Helpline is a free, confidential counselling and support service for children and young people across Australia aged 5–25 years. The objective of the service is *to listen and respond to the needs of children and young people anytime and for any reason, and where appropriate support children and young people to develop strategies and skills to better manage their lives*. To achieve this end, counselling and support services are provided by tertiary-qualified counsellors via telephone, web chat and email. Telephone and email counselling is provided 24/7 while counselling via web chat is currently available from 8am to midnight (AEST) seven days a week. In addition to the counselling and support service, Kids Helpline operates a substantial website with a diverse range of resources for self-directed help-seeking by children, young people and parents/carers. In partnership with Optus, Kids Helpline also delivers an early intervention and prevention program in primary schools called *Kids Helpline @ School*(KAS).

Kids Helpline is Australia's only 24/7 counselling and support service for children and young people. It is a service of **yourtown** (previously known as BoysTown), a not-for-profit organisation with over 55 years' experience helping disadvantaged children and young people overcome the challenges they face through counselling, support, employment and training services. The service is approximately 80% funded by the community through **yourtown**'s Art Union ticket sales, donations and corporate support, which includes a partnership with Optus. The remaining 20% is funded through State and Commonwealth Government grants.

1.2 What this report is about and who it is for

Kids Helpline is uniquely positioned to inform governments, researchers and the general public about the help-seeking needs and concerns of children and young people in Australia today. It is custodian of valuable information about how these needs and concerns trend over time in response to changing social, cultural, economic and technological circumstances. **yourtown** believes that sharing this information with the community is important because it has the potential to inform the development of more timely, appropriate and effective responses to the mental health and other needs of children and young people in our community.

To that end, this report provides a national statistical overview of the Kids Helpline service for 2016. It has been written especially for people working in social policy and research roles but will also be valuable to a wide range of organisations and professionals working with vulnerable children and young people in the community. Similarly, journalists and others in the community interested in understanding and documenting the current and changing needs and concerns of children and young people in Australia today will find the information useful.

The report has six further chapters and an appendix.

- *Chapter 2* outlines in some detail the scope and focus of the Kids Helpline service and describes the integral role it plays in supporting and protecting children and young people.
- *Chapter 3*presents data in relation to the Kids Helpline counselling and support service. This includes data about client characteristics, types of help-seeking, modes of engagement with the service, most common concerns of children and young people receiving counselling, information about the specific needs of children and young people contacting Kids Helpline in relation to various issues that are of contemporary social policy interest (mental health, suicide, self-injury, child abuse and bullying), and the frequency with which specific mental health difficulties and cyber-safety issues are being identified in counselling contacts. The chapter concludes with analysis of service demand and responsiveness data.
- *Chapter 4*presents data regarding client engagement with the Kids Helpline website and trends emerging in demand for self-help resources.

- *Chapter 5* describes the main activities and outputs of the KAS program in 2016.
- *Chapter 6* describes the objectives and methodology of the 2016 Kids Helpline annual client satisfaction and outcomes survey. It then presents selected findings regarding children and young people's satisfaction with the service and their perception of its impact on them.
- *Chapter 7* brings the report to a close by drawing out a handful of key themes from the data presented in the report for further reflection.

The report concludes with an appendix that provides essential background information on data collection, analysis and interpretation.

1.3 Where to get more information

This report has been compiled by **yourtown**'s Strategy and Research unit. For further information, please contact **yourtown** on 07 3368 3399, email yourtown@yourtown.com.au or visit www.yourtown.com.au.

2. Kids Helpline today

This chapter outlines in some detail the contemporary scope and focus of the Kids Helpline service and its integral role in supporting and protecting children and young people. In articulating this role, we hope to address a range of common misconceptions about what Kids Helpline does, and provide context for understanding the service data presented in the remaining chapters of the report.

2.1 Overview of scope and focus

On the twenty-fifth of March 1991, Kids Helpline first opened its phone line in Brisbane to children and young people aged 5-18 years. Its vision then, which has remained unchanged over time, was to offer a supportive, child-focused response to any child or young person, any time about any issue. Within two and a half years, Kids Helpline was operating in every Australian state and territory, and in its second full year of operation, it responded to close to half a million phone calls from children and young people across the country.

Twenty six years on, Kids Helpline is an integral part of Australia's social support system for children and young people, playing a unique and critical role in various specific support systems including the child protection, mental health, homelessness and e-safety systems. In addition to providing a 24-7 phone line, Kids Helpline today offers professional support and counselling via web chat and email. It has also expanded its reach to young adults aged up to 25 years.

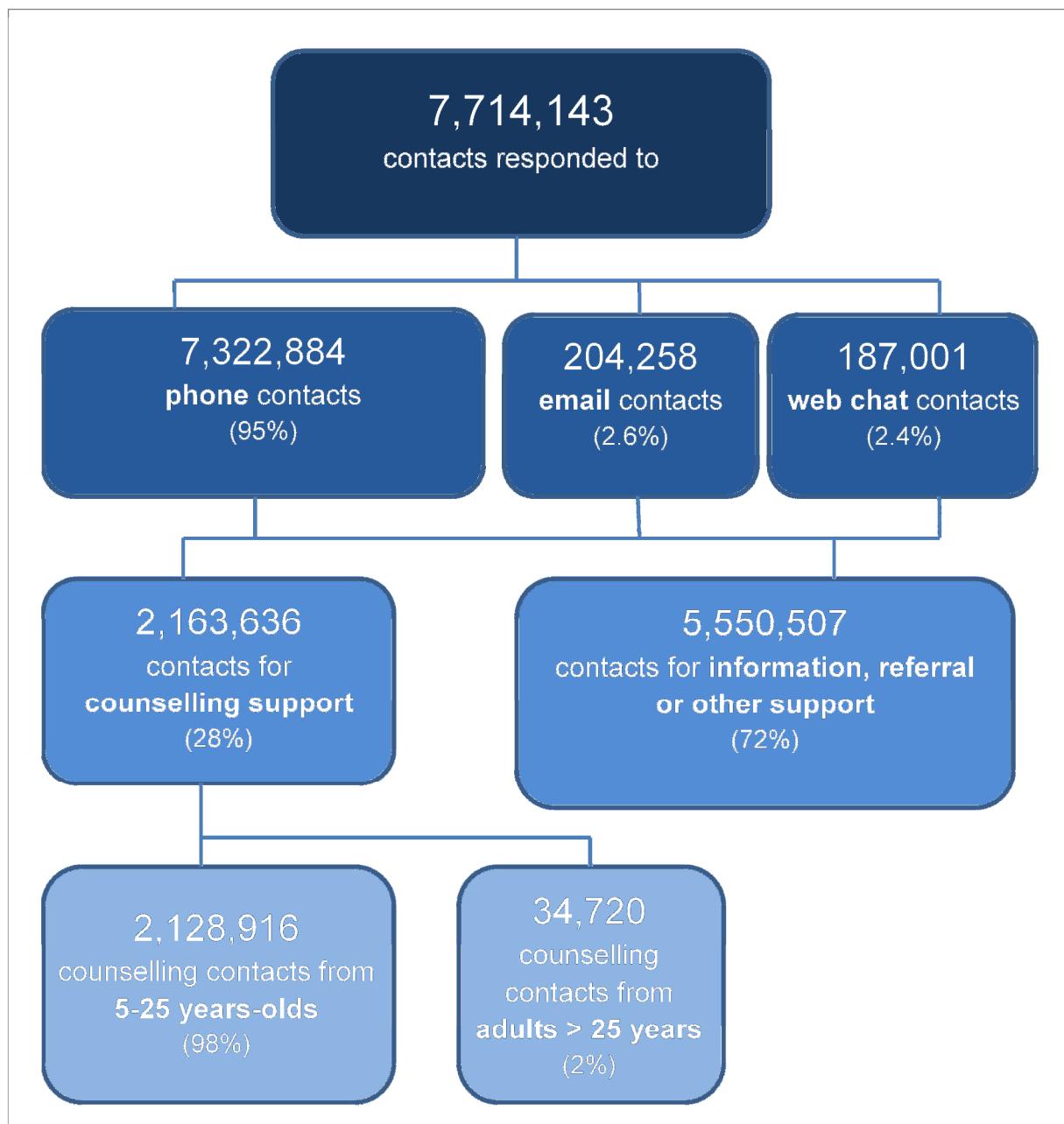
As of 31 December 2016, the Kids Helpline counselling and support service had responded to more than seven and half million (7,714,143) contacts from children and young people, as shown in Figure 1. Ninety-five per cent (7,322,884) of these contacts were received via phone and the remainder by email (204,258) or web chat (187,001). This is equivalent to responding to a contact from a child or young person every 1.8 minutes continuously for 26 years. Just over a quarter of contacts (28%) were seeking help for a particular problem (*counselling contacts*), while the remainder (72%) were seeking information, referral or other forms of non-counselling support. Almost all counselling contacts (98%) were from children and young people aged 5-25 years.

As a complement to its counselling and support service, Kids Helpline has developed a substantial website with three micro-sites for independent help-seeking by children (5-12 years), teenagers (13-18 years) and parents/carers. Two additional microsites, for 'tweens and young adults, are currently under development. Kids Helpline also offers an early intervention and prevention program for primary school-aged children - Kids Helpline @ School (KAS). KAS provides primary schools around Australia with the opportunity to have counsellor-facilitated classroom sessions via video technology which focus on building children's resilience and wellbeing. Our key corporate partner, Optus, provides funding for a subprogram of KAS focused on digital safety. A further recent innovation at Kids Helpline is the trialling of Kids Helpline Circles - a counsellor-facilitated social network to support young people living with chronic anxiety and depression, developed in partnership with the University of Sydney and the Black Dog Institute. Various other service innovations and e-mental-health tools are also under development in partnership with different research institutions, corporate sponsors and philanthropic donors.

Despite the breadth of Kids Helpline's service provision and its high brand awareness, many people remain confused or uninformed about what Kids Helpline does, and accordingly may not appreciate what the Australian community might be like without Kids Helpline. This is not a problem exclusive to Kids Helpline. Child helplines around the world report facing this challenge because what they do in their communities is unique.

A common misconception of Kids Helpline is that it is a crisis service for children and young people, like a children's version of Lifeline. While Kids Helpline *does* provide crisis responses when necessary, this is just one of many interventions offered depending on the presenting needs and objectives of the child or young person. In fact, crisis intervention makes up a relatively small part of the support Kids Helpline provides to children and young people (see section 3.6.2). The bulk of the work that Kids Helpline does is responding to children and young people's concerns about important relationships in their lives that are necessary for sustaining their health and wellbeing – relationships with their families, friends, peers, and intimate partners.

Figure 1. Contacts responded to by Kids Helpline's counselling and support service – 1991 to 2016



Responding to concerns children and young people have in relation to their mental health is another major area of Kids Helpline's work, along with responding to concerns about identity and self-concept, school and education, and health and development issues. Many children also contact because they are experiencing abuse or violence including bullying, while some have concerns about how to manage addictive behaviours, and others contact for help because they are experiencing homelessness or material deprivation. Counsellors also respond to many calls from children and young people who are simply lonely or have no one else with whom to share their news or experiences.

2.2 Kids Helpline's contemporary role in supporting and protecting young Australians

To explain more fully Kids Helpline's contemporary role in protecting and supporting children and young people, it is necessary to think about its work at two different levels – its interventions to protect and support children and young people at an *individual level* and at a broader *systemic level*.

2.2.1 At an individual level

In terms of supporting and protecting children and young people at an *individual level*, Kids Helpline's practice is guided by a specific therapeutic framework and intervention model intended to help the service achieve its objective. This objective is: *to listen and respond to the needs of children and young people anytime and for any reason, and where appropriate support children and young people to develop strategies and skills to better manage their lives.*

Kids Helpline's therapeutic framework

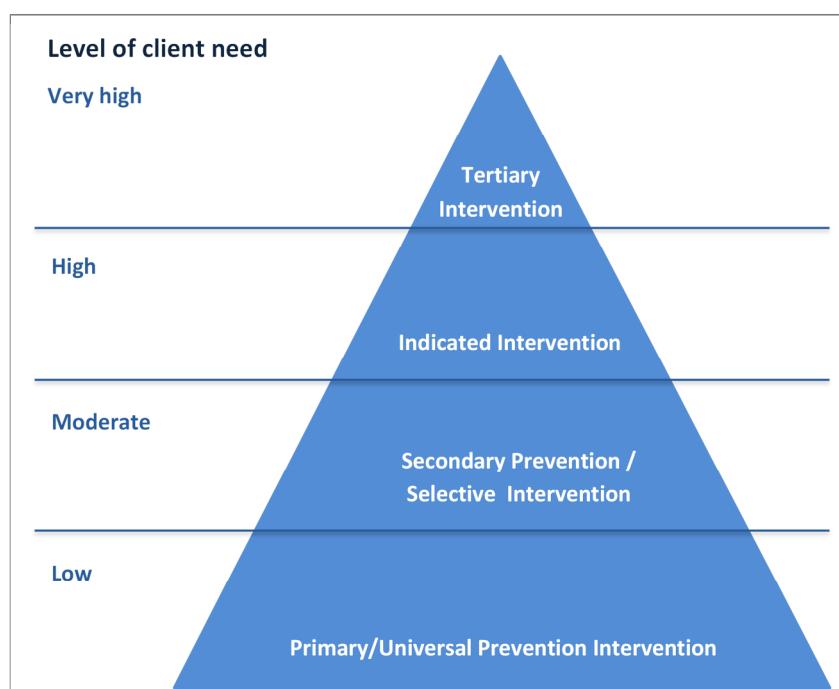
Kids Helpline employs counsellors with relevant experience and tertiary qualifications and then trains them in the core skills and practice values the service believes are essential to achieving its objective. Counsellors are also provided with intensive supervision and support, including regular clinical supervision.

The therapeutic framework counsellors are inducted into is relationship-based and child-centred. It focuses on empowering children and young people to deal with issues in their lives by helping them identify and develop their strengths and resources. The therapeutic framework requires counsellors to actively listen and explore, to teach, collaborate with, encourage, validate, and gently challenge the children and young people who contact Kids Helpline. It also requires of them a non-judgmental attitude towards their clients.

Providing a range of communication modalities, including web chat and email, also helps children build their sense of safety and trust with counsellors, giving them greater control over how they interact with counsellors and how much of themselves they disclose at any one time. At Kids Helpline, we strongly believe it is through the trusting relationships children and young people form with our counsellors that the service is able to have the positive impact it does on their wellbeing.

Kids Helpline's needs-based intervention model

In terms of the specific interventions and services Kids Helpline offers individual children and young people, these vary according to the nature and level of their need. Because the service targets the entire population of children and young people aged 5-25 years, Kids Helpline has developed what is sometimes referred to as a *public health model*, or a *stepped intervention framework*, where a continuum of services and interventions are matched to the individual child or young person's level of need.



Public health models are often represented visually by a triangle sitting on its base. The triangle depicts the entire population and horizontal segments from the base to the tip represent subgroups of the population with increasingly complex or intense needs. The area of each segment is indicative of the relative size of each segment in the population.

Primary or Universal Prevention/Intervention

At the base of the Kids Helpline intervention triangle is the *Primary or Universal Prevention/ Intervention* group. This refers to anyone in the population with general health and wellbeing needs and concerns, either in relation to themselves or someone else. For this group of the population, and indeed all children and young people in the population, Kids Helpline provides services and interventions aimed at building their resilience, through:

- promoting knowledge and behaviours to support mental, emotional and physical health
- fostering a sense of belonging
- teaching social, emotional and general life skills and knowledge, and
- encouraging help-seeking and awareness of support options.

The specific interventions and services offered to children and young people to achieve these aims include:

- age-specific self-help resources on the Kids Helpline website, including an extensive range of *Tips & Info* topics and children and young people's self-submitted stories of successful help-seeking and issues-resolution
- information, referral and other non-counselling support (via phone, email or web chat)
- links to relevant e-mental-health and self-care resources and apps
- the KAS Program, and
- Kids Helpline Facebook posts.

Secondary Prevention or Selective Intervention

The next segment of the intervention triangle above the base is the *Secondary Prevention or Selective Intervention* group. These children and young people have more than general health and wellbeing needs. They are demonstrating some extra vulnerability and elevated risk of poor health or wellbeing. This could be the risk of developing a mental health disorder or exposure to risk factors for experiencing social exclusion, child abuse or homelessness, for example.

For this group of the population, interventions are focused on assessing needs and delivering supports and information with the following objectives:

- building resilience
- preventing increased vulnerability to harm, and/or
- reducing the risk of developing more problematic symptoms.

The interventions and services offered to this group to achieve these aims include:

- information, referral and other non-counselling support (via phone, email or web chat)
- intermittent general counselling support (via phone, email or web chat)
- short-term case management (via phone, email or web chat)
- self-help resources on the Kids Helpline website, and
- links to relevant e-mental-health and electronic self-care resources.

Indicated Intervention and Tertiary Intervention

The pointy end of the intervention triangle represents those children and young people in the population with significantly more intense or complex needs than the general population.

- Children and young people who make up what we call the *Indicated Intervention* group are assessed to be at *high risk* of mental illness, social exclusion, child abuse, homelessness or other harms based on risk factors or symptomatology.
- Those in the *Tertiary Intervention* group, by contrast, are assessed to be *currently experiencing* significant harm or ill health.

The individuals in these two groups make up a relatively small part of the total population that Kids Helpline services, but as we will see later in this report (for example, sections 3.7 and 3.9), responding to the needs of these groups is a major part of the overall work of the service.

With these two groups of children and young people, the focus of intervention continues to be building resilience, preventing increased vulnerability to harm and/or reducing the risk of developing long term problematic symptoms. In light of their more complex presentations, however, clients are typically engaged in ongoing case management (via phone, web chat or email) to achieve these objectives.

In addition to case-management, the following services and interventions are provided to these children and young people:

- crisis responses (via phone, email and web chat), including decisions to act protectively arising from Kids Helpline's duty-of-care, such as external contact with police and emergency services where immediate safety concerns exist
- general counselling (via phone, email and web chat)
- targeted psychotherapeutic interventions (e.g. cognitive behavioural therapy, narrative therapy, mindfulness, etc.)
- wrap-around care with allied support systems (e.g. child and youth mental health services, crisis assessment treatment teams, schools, child protection services, etc.), and
- Kids Helpline Circles (our counsellor-facilitated social networking group for young people with anxiety or depression offered as an adjunct to individual counselling or case management).

2.2.2 At a systemic level

To appreciate more fully Kids Helpline's contemporary role in protecting and supporting children and young people, it is necessary to also take a system-level perspective. From that vantage point, it is evident that Kids Helpline performs various unique and critical roles. Among other things, it:

- provides a safety net for children and young people who might otherwise fall through the cracks of other social support systems, ensuring there is 'no wrong door' into these support systems and that they can get their needs met
- enhances broader service system cohesion and functionality, and
- gives voice to the needs, experiences and views of children and young people in policy and research.

Providing a safety net

National virtual service with 'no wrong door'

Kids Helpline provides a safety-net for children and young people in a broader social support system that often overlooks the particular developmental and structural vulnerabilities and needs of children. One way in which Kids Helpline acts as a safety net is by promoting itself as 'there for anyone at any time about anything', and without a requirement for clients to disclose their identities. In this way Kids Helpline casts a very wide net. This net is cast even more expansively by the fact that the service is accessible from any geographical location, being a 'virtual' service. Kids Helpline's child-centred and relationship-based intervention style further complements this accessibility by increasing children's sense of safety to name, define and explore their concerns and identify the help they need.

Portal into specialist support systems

Another way in which Kids Helpline serves as a safety net is by actively connecting children and young people to the specialist services they require. In 2016, 36% of counselling contacts were identified as in need of a generalist or specialist referral which counsellors provided wherever possible (see section 3.6). Like other child helplines around the world, Kids Helpline is not itself a specialist service but plays a critical role in facilitating children and young people's access to specialist services and support systems that may be confusing, alienating or even frightening for them to find, navigate and use alone. Counsellors help children and young people explore their needs, identify the right services for them using an extensive service provider database, and then actively connect them to those services where this is what the child or young person

wants. Kids Helpline is effectively a *portal* for children and young people into child protection, mental health, homelessness and e-safety support systems, among other key social support systems.

Not only does Kids Helpline actively facilitate children's access to these systems, but it also helps them get their needs met in these systems by providing individual advocacy when a child or young person's needs are not being met adequately or appropriately by an existing service provider.

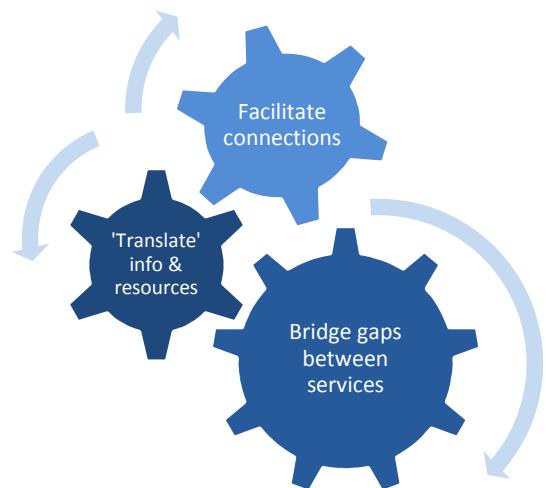
Child/youth specialist support to mainstream services

Referrals are not a one-way street from Kids Helpline to broader support systems, however: Every day, many community and government agencies across Australia refer children and young people to Kids Helpline's counselling and support service or website for age-specific information, referral, support and counselling, recognising that children and young people have unique needs and require specialist support. Many of these agencies will include Kids Helpline as an after-hours support in the case plans they develop with their clients.

Enhancing service system cohesion & functionality

'System fragmentation' and 'service duplication' are pervasive features of large and complex service systems and are therefore often concerns of governments in reforming such systems in the interests of making them more efficient and effective. This was a major concern, for example, of the 2015 National Mental Health Commission's review of the Australian mental health system.

Child helplines, like Kids Helpline, inherently play a role in supporting system cohesion and functionality through the dense network of relationships they cultivate with community, private and government agencies in order to do their job. For children and young people, child helplines bridge gaps between services, facilitate connections, and 'translate' information and resources so that children and young people can access the support and knowledge they need. Kids Helpline has developed specific infrastructure to support this role of integrating systems including, for example, a large and comprehensive national service provider database for referring children and young people to the right services in their local areas.



Two specialist support systems within which Kids Helpline plays an integral role are the child protection and mental health systems. To appreciate something of how Kids Helpline enhances service system cohesion and functionality, it is helpful to look more closely at its role in each of these systems.

Case 1 – Supporting the child protection system

Statutory child protection

In 2016, Kids Helpline responded to 5,387 contacts (or just over 100 contacts every week) from children and young people with child abuse concerns, including domestic and family violence. Of these, seven out of 10 (3,736 contacts) called Kids Helpline because they were currently experiencing abuse or were at risk of abuse. Others were calling about concern for another person experiencing abuse, or because of the impacts of past abuse (see section 3.7.3).

To respond effectively to these children and young people, it has been essential for Kids Helpline to develop close working relationships with child protection authorities in every state and territory including, at times, the establishment of formal referral protocols. When children need the help of statutory child protection agencies, counsellors support them to make those connections in various ways, including via three-way link ups or teleconferences. Further, they provide counselling and support to children in out-of-home care and in relation to issues arising from living in care, and they also provide counselling and support to clients still suffering years later from the trauma of child abuse.

Emergency protective interventions

Kids Helpline also works closely with emergency services in every state and territory to protect children and young people at imminent risk of harm (see section 3.6.2). In 2016, there were 1,907 records of counsellors attempting to contact an external agency to protect a child or young person from significant harm. That's more than 35 emergency care actions every week. The most common issues precipitating these interventions in 2016 were, in order of frequency: child abuse, suicide attempts, mental illness escalation, drug overdose, harm to others, self-injury, sexual assault and homelessness.

Cyber-safety

Another sphere of social life in which children are increasingly vulnerable to violence, intimidation, harassment and exploitation is the online world. To help protect children and young people from such harm, Kids Helpline has formed an active partnership with the Australian Office of the Children's eSafety Commissioner. Among other things, this partnership ensures that children and young people who visit the eSafety website with cyber-safety concerns can receive priority access to Kids Helpline web counselling. The eSafety Commission in turn has provided Kids Helpline counsellors with specialist training in cyber-safety issues, including procedures for raising formal complaints with relevant organizations and internet service providers where a client seeks this kind of support.

Kids Helpline's collaboration with the eSafety Commission extended in 2016 to investigating the impacts of increased online pornography consumption by children and young people. This was with a view to responding better to children and young people's concerns and needs arising from such consumption. More information about this work is available on the [yourtown](#) website.

Kids Helpline has also been working to protect children from online harm through the development of a digital safety curriculum as part of the KAS program. This has been made possible by the financial support of Kids Helpline's corporate partner, Optus.

Case 2 – Supporting the mental health system

Kids Helpline plays a complex and multifaceted role in the mental health system. A steadily increasing focus of Kids Helpline's work is responding to the mental health needs of children and young people. In 2016, close to one quarter (23%) of all counselling contacts responded to were in relation to a client's concern about mental health issues – in the vast majority of cases (94%), this was the client's concern in relation to their own mental health (see section 3.7.1). In addition, in close to half (45%) of all counselling sessions in 2016, the child or young person was assessed as experiencing at least one of the following issues – a mental health disorder, issues with self-injury, or current thoughts of suicide (section 3.9).

Kids Helpline performs an important *preventative function* in relation to children and young people's mental ill-health by responding to the wide range of issues that, if left unaddressed, can precipitate the development of mental health disorders. These issues include child abuse, homelessness, bullying, unresolved issues with self-concept and identity, and chronic social isolation. When children and young people have emerging or established mental health disorders, Kids Helpline provides case management and ongoing support to them, drawing on a range of evidenced psychotherapeutic interventions, to support their recovery.

Kids Helpline also performs a range of *system functions* that again serve to build and maintain a safety net for highly vulnerable young people who might otherwise fall through gaps in the mental health system. These gaps include such things as:

- a chronic and widespread lack of after-hours crisis support targeting young people's needs
- a fragmented pathway between youth and adult mental health services
- difficulty fitting children and young people's early symptom presentations into the diagnostic and service eligibility criteria of mainstream adult mental health services
- a lack of face-to-face services in many geographical areas, and
- the high cost of receiving certain forms of mental health care.

Kids Helpline routinely fills these gaps for children and young people and ensures there is 'no wrong door' into mental health care. Often Kids Helpline is the *only* mental health service that children and young people will reach out to. Research conducted for Kids Helpline in the mid -2000s found, for instance, that many of those

who contact the service for support with mental health issues, particularly those who seek assistance through web chat, do not seek help from face-to-face services, finding the relative anonymity and privacy of a non-face-to-face service a more comfortable pathway into mental health care (King *et al.*, 2006). Kids Helpline counsellors will often spend weeks building the trust of reluctant services users, such as these, and gently, over time, encourage them to access specialist face-to-face services. When they are ready to take this step, counsellors actively facilitate and support their access to relevant local services and offer to support their treatment plans wherever appropriate.

Other ways Kids Helpline supports children and young people to engage with the broader mental health system, and maintain that engagement, include the following:

- providing telephone assessment services
- encouraging young people to get themselves admitted to hospital where necessary, with counsellors making direct referrals to emergency departments if appropriate
- contacting ambulance and/or police where a client is assessed as at high risk of harm and is either unwilling or unable to attend an emergency department
- where young people are experiencing medication compliance issues, encouraging them to discuss these issues with their face-to-face mental health service providers
- providing inpatient support to clients to maintain medication and therapy regimes in collaboration with ward staff
- providing support to clients exiting acute care, knowing that this is a time of heightened vulnerability to suicide and other harm
- providing co-case management, wrap-around-care and after-hours crisis support for clients receiving primary support from specialist mental health services, and
- providing individual advocacy for children and young people in the mental health system who are not receiving appropriate or adequate care.

'Giving voice' to children and young people

Kids Helpline's system-level role

in supporting and protecting young Australians includes 'giving voice' to their needs, concerns and experiences. This is with a view to improving children and young people's circumstances, both as individuals and as a vulnerable population.

Each year, the Kids Helpline counselling and support service responds to a large number of contacts from children and

young people nationally (over 180,000 contacts in 2016, see section 3.1). Many times that number will visit our website to seek self-help resources or engage with us in other ways, like through completing surveys or submitting their own stories (in 2016 over half a million unique visitors participated in over 700,000 information gathering sessions on the Kids Helpline, see section 4.1). Counsellors respond to children and young people from every state and territory, from a diverse range of cultural backgrounds, to children who identify as male, female or neither, and to those who are as young as five years and as old as 25 (see section 3.1). Both in the counselling and support service and on the website, Kids Helpline responds to diverse information needs and concerns from this population – concerns about family relationship issues, bullying, mental health problems, study and education, issues with identity and belonging, and concerns about child abuse and family violence (see sections 3.4, 3.5 and 4.2).

Each year Kids Helpline has extensive contact with children & young people from across Australia from every walk of life seeking help about issues impacting on their lives.

We use these insights from young Australians to:

Inform service provision

Develop research questions

Input into public inquiries

Develop policy advocacy campaigns

Inform local government planning

The scope of this contact with young Australians uniquely positions Kids Helpline to give voice to children and young people's experiences, interests and concerns. From the information we gather from children and young people who use the counselling and support service and website we glean invaluable insights into key issues affecting children and young people in Australia today. Each year we publish this *National Statistical Overview* documenting some of this information to inform policy, research and service provision.

We also use these data to input into a wide range of social policy forums, debates and public inquiries. The data inform our own and others' social policy advocacy campaigns aimed at improving responses to the needs of vulnerable children and young people. Similarly, this information helps **yourtown** develop relevant research questions to delve more deeply into specific issues affecting children and young people today. Some of this research is undertaken by **yourtown**'s Strategy and Research unit while other research is conducted with the support of partner agencies and research institutions.

Kids Helpline also routinely shares data with local governments and community groups concerned about the provision of services in their local area. Typically, these groups want to know about the demographic profile of Kids Helpline contacts in their area, and what the most common concerns of these children and young people are, in order to inform local service planning.

2.3 Summary

This chapter has described the scope and focus of the contemporary Kids Helpline service and the integral role it plays in supporting and protecting children and young people at the individual and systemic levels.

At the individual level, Kids Helpline employs a therapeutic framework focused on empowering children and young people to deal with issues in their lives by identifying and developing their personal resources. It delivers confidential, non-judgemental counselling and support via a range of communication modalities to support children's sense of trust and comfort in using the service and their ability to access it freely from anywhere. Kids Helpline's needs-based intervention model overlays this therapeutic framework and helps to ensure that the provision of specific supports, interventions and resources to children and young people is tailored to the level and complexity of their need.

At the systemic level, Kids Helpline protects and supports children and young people by:

- serving as a portal into specialist support systems that often overlook the particular developmental and structural vulnerabilities of children, ensuring that there is 'no wrong door' into these support systems
- providing mainstream services a child/youth specialist to which they can refer their clients for age-specific information and counselling
- enhancing service system cohesion and functionality through the dense network of relationships it maintains with community, government and private support agencies, and
- giving voice to the needs, concerns and experiences of children and young people in policy and research.

This background information hopefully addresses a range of common misconceptions about Kids Helpline and gives useful context for interpreting the service data presented in the remaining chapters of this report.

3. Kids Helpline counselling and support service

This chapter presents a wide range of information about the current characteristics, needs, concerns, communication preferences and types of help-seeking of children and young people contacting the Kids Helpline counselling and support service. Understanding this population is important for **yourtown** in continuously improving Kids Helpline. However, it is also valuable to a wide range of community and government agencies providing, designing or advocating for support services or mental health interventions for vulnerable children and young people.

To help build understanding about children and young people's contemporary needs and concerns, current (2016), short-term (three to five years) and longer-term (10 years) trend analyses are presented in this chapter in relation to the following aspects of the Kids Helpline counselling and support service:

- contact characteristics (section 3.1)
- types of help-seeking (section 3.2)
- how children and young people contact Kids Helpline (by phone, web chat or email) and which groups of children prefer which medium of engagement (section 3.3)
- the most common issues for which children and young seek help, including analysis of contacts about these issues by medium of contact, age group, gender, cultural background, geographical remoteness, and type of support relationship with the service (i.e. first/occasional contact or ongoing support) (section 3.4)
- referral of clients to further support and information about duty-of-care interventions taken to protect clients from significant harm (section 3.6)
- the specific needs of children and young people contacting Kids Helpline about concerns that are of contemporary social policy interest (mental health, suicide, self-injury, child abuse and bullying) (section 3.7)
- estimates of the frequency with which significant mental health and cyber-safety issues are being identified in counselling sessions (sections 3.9 and 3.8 respectively), and
- service demand and responsiveness (section 3.10).

3.1 Contact characteristics

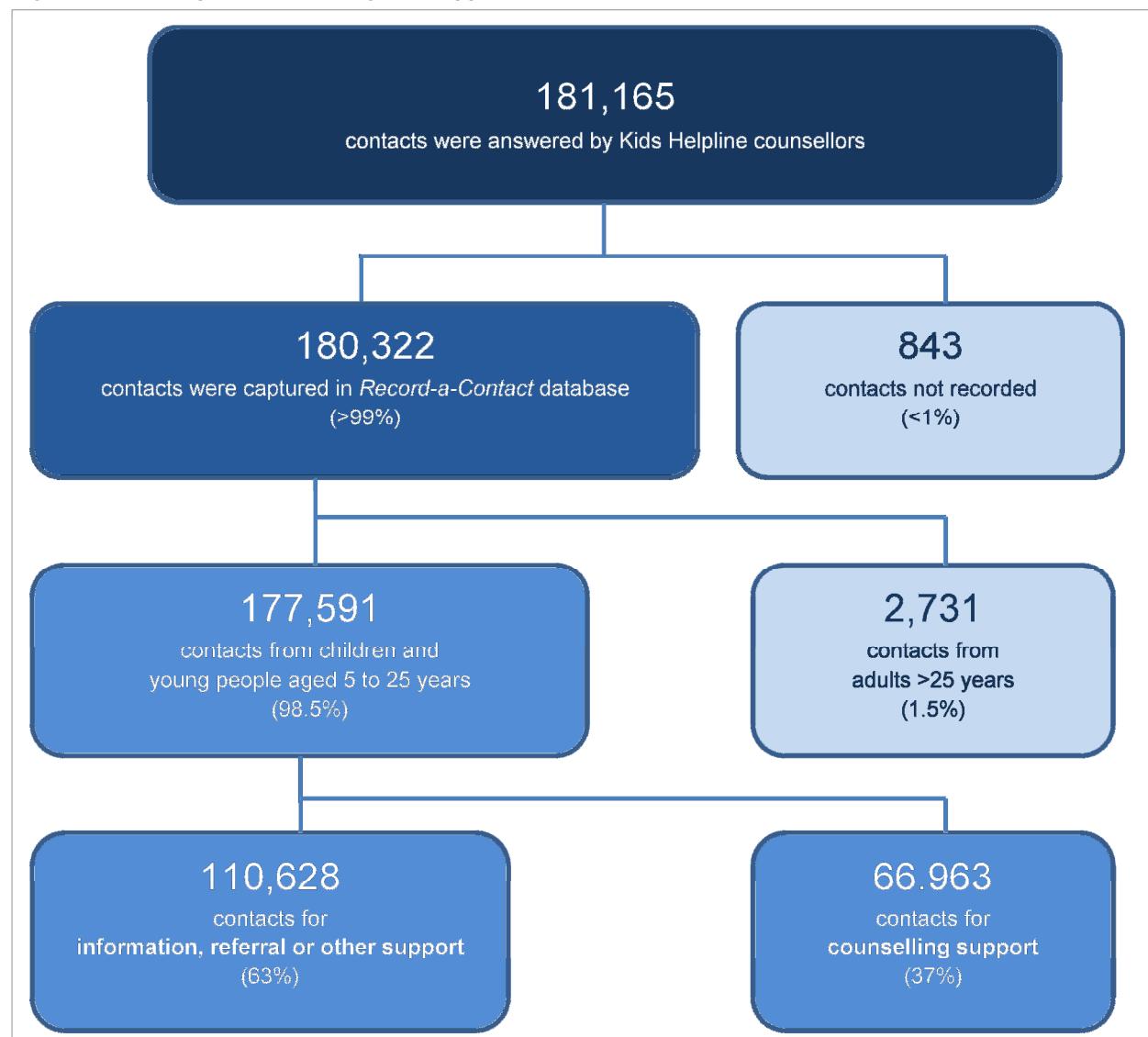
This section describes Kids Helpline contacts from children and young people aged 5-25 years in 2016, including the number and proportion of contacts by gender, age group, cultural background, state of residence, remoteness classification and type of support relationship with the service. Trend data in relation to each of these characteristics are then presented for the last 10 years to highlight continuity and change in the characteristics of those contacting Kids Helpline for assistance.

3.1.1 Kids Helpline's *Record-a-Contact* database

When children and young people contact the Kids Helpline counselling and support service, counsellors record information about the child or young person in a dedicated database. The data presented throughout most of Chapter 3 (sections 3.1 to 3.9) come from this *Record-a-Contact* database.

As shown in Figure 2, the *Record-a-Contact* database contains records for 180,322 of the 181,165 contacts received by the Kids Helpline counselling and support service in 2016. Each year a small number of contacts fail to be recorded by counsellors, either due to technical issues (system outages), counsellor error or because they were non-client contacts (e.g. contacts from external professionals). In 2016, there were 843 of these (<1%). Of those contacts that were recorded, 2,731 (1.5%) were received from adults aged 26 years or older (outside Kids Helpline's target age range) and 177,591 were received from children and young people aged 5-25 years. This chapter will describe the characteristics of these 177,591 contacts and then focus in on the characteristics, needs and concerns of the sub-population of children and young people who contacted Kids Helpline for counselling support in 2016 as more complete and detailed information is available for this cohort.

Figure 2. Kids Helpline counselling and support service contacts in 2016



3.1.2 Contact characteristics in 2016

Table 1 summarises demographic and other characteristics of contacts from children and young people aged 5-25 years responded to by Kids Helpline in 2016. Key observations from the data include the following:

- *Gender.* Just over seven out of 10 contacts responded to (73%) were from females while three in 10 (29%) were from males. In 2015, Kids Helpline introduced a new category for gender – *intersex, trans and gender-diverse*. A total of 1,260 contacts, or 1%, were recorded in this gender category.
- *Age.* More than half (56%) of all contacts responded to were from individuals aged 13-18 years, three in 10 (30%) were from 19-25 year-olds, and one in seven (14%) was from 5-12 year-olds.
- *Cultural background.* Where information was available on cultural background (23% of contacts), 4% of contacts were from Aboriginal and/or Torres Strait Islanders (ATSI), 35% from other culturally and linguistically diverse (CALD) backgrounds, and 61% from Caucasian Australians.
- *Location.* Contacts were received from all states and territories. As shown in Table 2, the proportional state breakdown of Kids Helpline contacts in 2016 closely approximates that for the Australian population aged 5-25 years estimated at 30 June 2016. There is a slight over-representation from New South Wales and Tasmania and a slight under-representation from Western Australia and Queensland. Where the child or young person's postcode was known (34% of contacts), most were living in Major Cities (72%), one in five (20%) was living in an Inner Regional locality, and one in 12 (8%) was living in an Outer Regional or Remote locality.
- *Type of support relationship.* Where the child or young person's relationship with the service was recorded (40% of all contacts), just over one third (37%) of contacts were from children or young people contacting the service for the first time and just under two thirds (63%) were from those receiving occasional or ongoing support.

Table 1. Characteristics of 2016 Kids Helpline contacts aged 5-25 years¹

Contact characteristics	2016 (N = 177,591)	
	n	col. %
Gender		
Female	83,148	73%
Male	29,891	26%
Intersex, trans & gender-diverse	1,260	1%
Total	114,299	100%
<i>Unknown</i>	63,292	
Age group		
5-12 years	13,404	14%
13-18 years	55,815	56%
19-25 years	29,692	30%
Total	98,911	100%
<i><26 but age unknown</i>	78,680	
Cultural background²		
Aboriginal &/or TSI	1,627	4%
CALD	14,237	35%
Neither ATSI nor CALD	24,796	61%
Total	40,660	100%
<i>Unknown</i>	136,931	
State		
ACT	3,334	2%
NSW	56,905	35%
NT	1,421	1%
QLD	31,637	19%
SA	10,975	7%
TAS	4,254	3%
VIC	41,221	25%
WA	13,576	8%
Total	163,323	100%
<i>Unknown</i>	14,268	
Remoteness		
Major Cities	44,056	72%
Inner Regional	11,932	20%
Outer Regional/Remote	5,067	8%
Total	61,055	100%
<i>Unknown</i>	116,536	
Relationship with Kids Helpline		
First contact	26,764	37%
Occasional/Ongoing support	44,807	63%
Total	71,571	100%
<i>Unknown</i>	106,020	
Medium of contact		
Phone	132,966	75%
Web chat	31,029	17%
Email	13,596	8%
Total	177,591	100%

1. Where column percentages sum to more or less than 100%, this is due to rounding.

2. TSI = Torres Strait Islander. CALD = culturally and linguistically diverse. ATSI = Aboriginal and/or Torres Strait Islander.

- *Medium of contact.* Three out of four contacts (75%) were received by phone, while 17% were received by web chat and 8% by email.

Table 2. Proportional state breakdown of 2016 Kids Helpline contacts aged 5-25 years compared with Australian population estimates at 30/6/2016

State	Kids Helpline contacts aged 5-25 years 2016		Australian residents aged 5-25 years ¹	
	n	col. %	N ('000)	col. %
ACT	3,334	2%	108	2%
NSW	56,905	35%	2,061	32%
NT	1,421	1%	73	1%
QLD	31,637	19%	1,354	21%
SA	10,975	7%	439	7%
TAS	4,254	3%	135	2%
VIC	41,221	25%	1,614	25%
WA	13,576	8%	706	11%
Total	163,323	100%	6,491	100%
<i>Unknown</i>	14,268			

1. Population estimates from Australian Bureau of Statistics – Population by Age and Sex Tables.

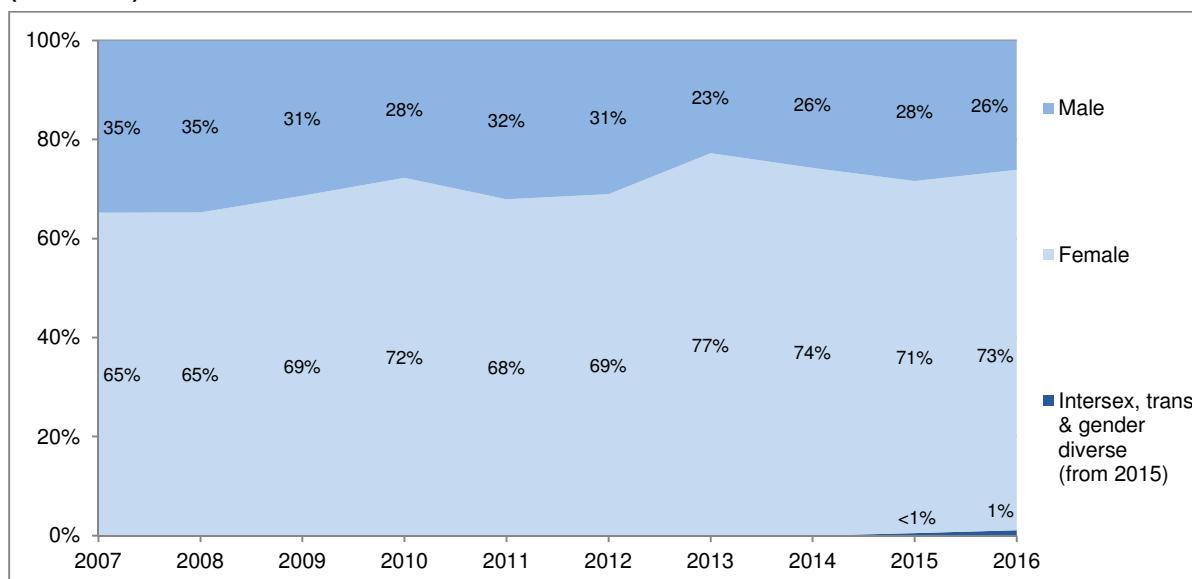
3.1.3 Trends in contact characteristics

In order to consider shifts in the characteristics of Kids Helpline contacts over time, it is helpful to look back over the medium to longer term. This section summarises trends in the gender, age group, cultural background, locality, and type of support relationship of all Kids Helpline contacts from children and young people aged 5-25 years over the last decade where information was recorded in the *Record-a-Contact* database.

Gender

Figure 3 shows the proportional gender breakdown for Kids Helpline contacts where gender was known in each year from 2007 to 2016.

Figure 3. Proportional gender breakdown of Kids Helpline contacts aged 5-25 years – by year (2007-2016)¹



1. From 2007 to 2016, gender data were available for 55% of Kids Helpline contacts aged 5-25 years. Data for intersex, trans and gender-diverse category only collected from 1 January 2015.

Two key observations are apparent from the data in Figure 3:

- The proportional imbalance observed in 2016 between males and females is long-standing in nature, with males consistently comprising a minority of Kids Helpline contacts.

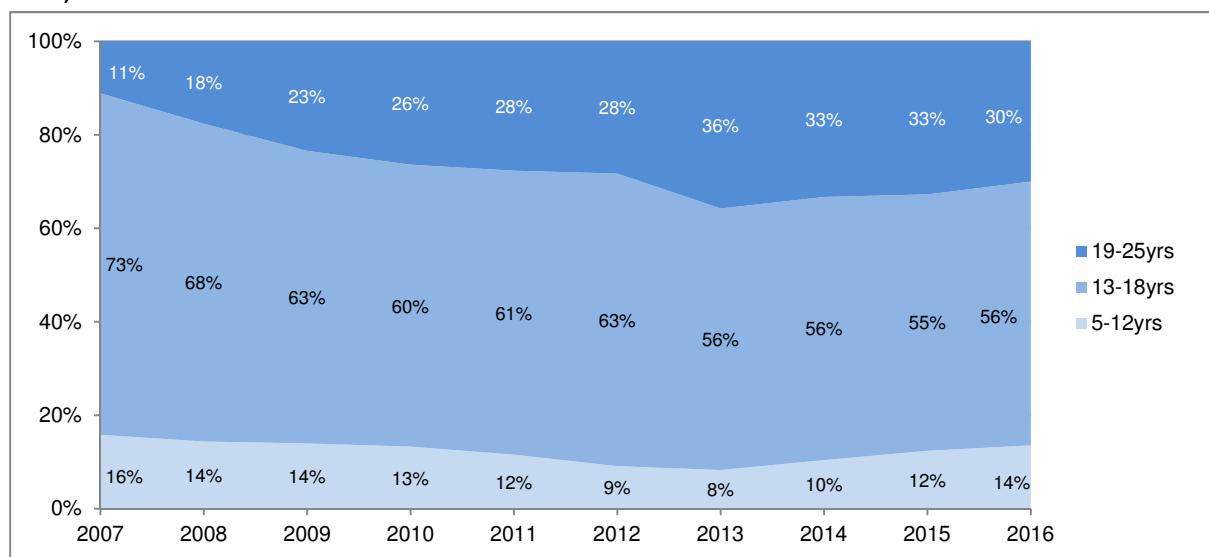
- While the proportional breakdown of contacts from males and females fluctuates from year to year, there would appear to be a growing proportion of contacts from females compared with males. In 2007/2008, more than a third of all contacts were from males; however since 2013, roughly a quarter of all contacts have been from males. This trend may correspond to changes in the proportion of contacts seeking counselling-type support over the last decade, as females are more likely than males to seek counselling-type support (see section 3.2.1, Table 3).

Age group

Figure 4 shows the proportional breakdown of age group for Kids Helpline contacts where age was known in each year from 2007 to 2016. Key observations from the data in Figure 4 include the following:

- 5-12 year-olds.* Children have consistently made up less than one sixth of contacts responded to by Kids Helpline over the last decade. The relative proportion of this age group among Kids Helpline contacts reduced by half from 2007 to 2013 (from 16% to 8%); however, since 2014 this proportion has been on the rise.
- 13-18 year-olds.* Of the three age groups, teens have comprised the largest proportion of contacts in each year over the last decade; however, their relative proportion has declined gradually over this period, from 73% of all contacts in 2007 to 56% in 2016.
- 19-25 year-olds.* In 2003, Kids Helpline expanded its service to include young people aged 19-25 years. Since that time, young adults have gradually become a major client group of the service. From 2007 until 2013, young adults grew as a proportion of contacts responded to from 11% to 36%. Since 2014, this proportion has reduced slightly, to around one third of all contacts.

Figure 4. Proportional breakdown of age group of Kids Helpline contacts aged 5-25 years – by year (2007-2016)¹



1. From 2007 to 2016, age data were available for 38% of Kids Helpline contacts aged 5-25 years.

Cultural background

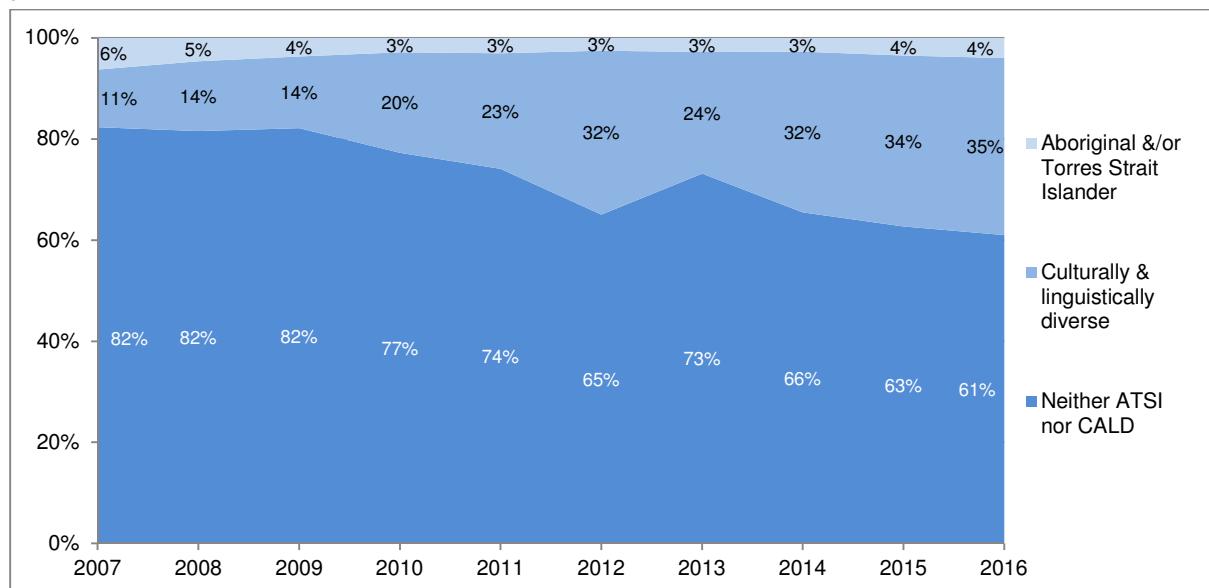
Figure 5 shows the proportional breakdown of cultural background for Kids Helpline contacts where cultural background was known in each year from 2007 to 2016. It is important to note in considering the reliability of these data that cultural background information was only recorded for 18% of all contacts over the period.

Key observations from the data in Figure 5 include the following:

- Aboriginal and/or Torres Strait Islanders.* Over the last decade, contacts from Aboriginal and Torres Strait Islanders have consistently made up between 3% and 6% of all contacts responded to.
- Culturally and linguistically diverse.* Contacts from children and young people from other culturally and linguistically diverse backgrounds have steadily grown as a proportion of total contacts over the last decade, from 11% in 2007 to 35% in 2016.

- *Caucasian Australian.* Contacts from neither Aboriginal, Torres Strait Islander or other culturally and linguistically diverse backgrounds (i.e. Caucasian Australians) have comprised the largest cultural grouping among contacts over the last decade; however, since 2009 they have gradually declined in proportion relative to other cultural groups, from 82% in 2009 to 61% in 2016.

Figure 5. Proportional breakdown of cultural background of Kids Helpline contacts aged 5-25 years – by year (2007-2016)¹



1. From 2007 to 2016, cultural background data were available for 18% of Kids Helpline contacts aged 5-25 years.

Location

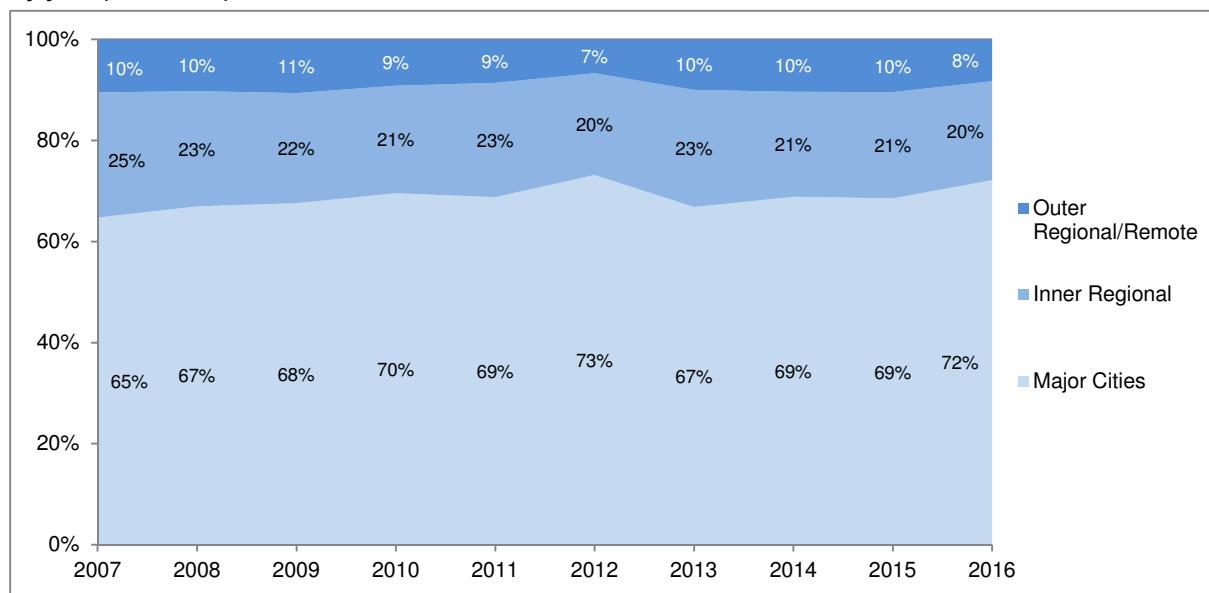
Figure 6 shows the proportional breakdown of remoteness classification for Kids Helpline contacts where postcode was known in each year from 2007 to 2016.¹ It is important to note in considering the reliability of these data that postcode information was only recorded for 18% of all contacts over the last decade.

Key observations from the data in Figure 6 include the following:

- *Outer Regional/Remote.* Over the last decade, contacts from children and young people identified as living in Outer Regional or Remote localities have consistently made up around a tenth of all contacts responded to each year over the last decade.
- *Inner Regional.* Contacts from children and young people identified as living in Inner Regional localities have made up between a fifth and a quarter of contacts responded to each year.
- *Major Cities.* Contacts from children and young people living in Major Cities have consistently over the last decade comprised the largest group of contacts responded to – between 65% and 73% of contacts responded to each year. Since 2013, there would appear to be a slight upward trend in this proportion, from 67% to 72%, but caution should be applied to this observation in light of the substantial missing data on this variable.

¹The remoteness classification system used by Kids Helpline has been adapted from the Australian Bureau of Statistics' Australian Geographical Standard (ASGS). See Appendix for more information.

Figure 6. Proportional breakdown of remoteness classification of Kids Helpline contacts aged 5-25 years – by year (2007-2016)¹



1. From 2007 to 2016, postcode data were available for 18% of Kids Helpline contacts aged 5-25 years.

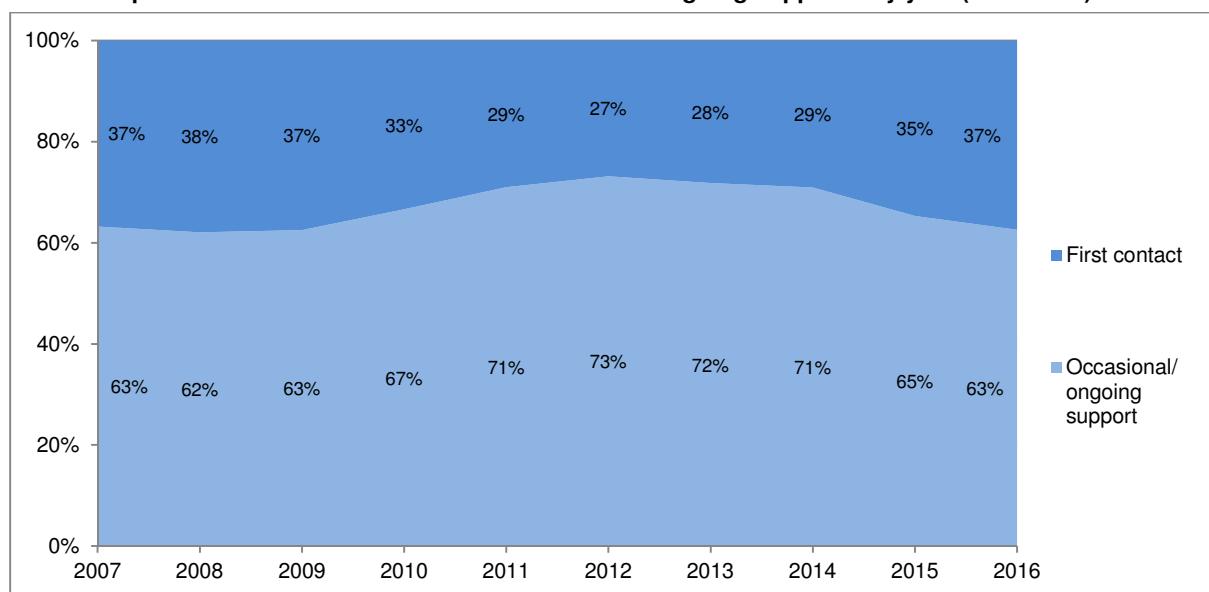
Relationship with service

Figure 7 shows the proportional breakdown of Kids Helpline contacts by their relationship with the service – either as first time contacts or occasional/ongoing support contacts – where information was known in each year from 2007 to 2016.

Two key observations from the data in Figure 7 are apparent:

- A majority of contacts received by Kids Helpline each year over this period (between 62% and 73%) have been from children and young people who have contacted Kids Helpline before, and were receiving occasional or ongoing support from the service including, in some instances, case management.
- In the first half of the decade, there would appear to be a gradual increase in the proportion of repeat contacts, and a corresponding decrease in first time contacts. This pattern reverses in the second half of the decade.

Figure 7. Proportional breakdown of Kids Helpline contacts aged 5-25 years according to type of support relationship with the service: first contact or occasional/ongoing support – by year (2007-2016)¹



1. From 2007 to 2016, relationship with the service was recorded for 28% of Kids Helpline contacts aged 5-25 years.

3.1.4 Summary

This section has described the characteristics of 2016 Kids Helpline contacts from children and young people aged 5-25 years in terms of the number and proportion of contacts by gender, age group, cultural background, state of residence, remoteness classification and type of support relationship with the service. Trend data in relation to each of these characteristics were then presented for the last 10 years to highlight continuity and change in the characteristics of contacts responded to by the service.

While there has been much continuity in contact characteristics over the last decade, the following changes are apparent:

- the proportion of females contacting compared with males is slowly increasing
- the proportion of contacts from young people aged 19-25 years has grown steadily since the service extended its reach to this age group, with a corresponding decrease in the proportion of contacts from 13-18 year-olds contacting the service
- contacts from children and young people from culturally and linguistically diverse backgrounds have steadily increased as a proportion of all contacts responded to, while contacts from Caucasian Australians have decreased proportionally, and
- over the last five years, the proportion of first time contacts has been gradually increasing relative to repeat contacts.

3.2 Contacts by type of help-seeking

Contacts responded to by the Kids Helpline counselling and support service can be grouped into two broad categories of help-seeking:

- *counselling contacts* – these are contacts from children and young people seeking counsellor assistance for a particular concern or problem, and
- *non-counselling contacts, or information, referral and other contacts* – these are contacts from children and young people seeking information, referral to other services, or some other form of non-counselling support, like general conversation or playful engagement.

This section describes and compares 2016 Kids Helpline contacts by the child or young person's type of help-seeking – counselling or non-counselling – including the number and proportion of contacts in each group by gender, age group, cultural background, state or territory of residence, remoteness classification and type of support relationship with the service. Trends in demand for different types of support over the last decade are then noted, followed by presentation of short-term trends in relation to categories or types of non-counselling contacts.

3.2.1 Counselling and non-counselling contacts in 2016

In 2016, 66,963 (or 37%) contacts from children and young people aged 5–25 years were for counselling support while 110,628 (or 63%) were for information, referral or other non-counselling support. Table 3 summarises and compares the demographic and other characteristics of counselling and non-counselling contacts. The use of column percentages allows for easy comparison between counselling and non-counselling contacts with regard to each contact characteristic. A large proportion of missing data is apparent, particularly in relation to non-counselling contacts, and with regard to cultural background, remoteness classification, state of residence and client relationship with Kids Helpline. Caution is therefore required in the use and interpretation of these data.

Key observations from the data include the following:

- *Gender.* The gender imbalance in contacts was greater for counselling contacts than for non-counselling contacts. While roughly one third (34%) of non-counselling contacts were from males, only one fifth (20%) of counselling contacts were from males.
- *Cultural background.* A slightly higher proportion of counselling contacts compared with non-counselling contacts were from children and young people from culturally and linguistically diverse backgrounds (38% c.f. 31%); on the other hand, a slightly smaller proportion of counselling contacts compared with non-counselling contacts were from Aboriginal and/or Torres Strait Islanders (3% c.f. 5%). The reliability of these observations is undermined, however, by the extent of missing data on cultural background.
- *Age group.* Among counselling contacts, those from 13–18 year-olds comprised three out of every five contacts (60%) while those from 19–25 year-olds made up just over a quarter (27%). Among non-counselling contacts, those from 13–18 year-olds made up a smaller relative proportion (51%) while those from 19–25 year-olds comprised a larger relative proportion (34%).
- *Remoteness.* Counselling contacts, compared with non-counselling contacts, were slightly more likely to be living in Major Cities than non-counselling contacts (74% c.f. 70%), although the reliability of this observation is undermined by the extent of missing postcode data.
- *Relationship with Kids Helpline.* Among counselling contacts, two fifths (40%) were first time contacts; however, among non-counselling contacts, one quarter (24%) were first time contacts and the remaining three-quarters (76%) were receiving either occasional or ongoing support.
- *Other demographic characteristics* appear to be fairly consistent across the two help-seeking types of contacts 2016.

Table 3. Characteristics of 2016 Kids Helpline contacts aged 5-25 years – by type of help-seeking¹

Contact characteristics	Counselling contacts (N = 66,963)		Information/referral & other contacts (N = 110,628)		All contacts (N = 177,591)	
	n	col. %	n	col. %	n	col. %
Gender						
Female	50,707	78%	32,441	65%	83,148	73%
Male	13,156	20%	16,735	34%	29,891	26%
Intersex, trans & gender-diverse	862	1%	398	1%	1,260	1%
Total	64,725	100%	49,574	100%	114,299	100%
<i>Unknown</i>	2,238		61,054		63,292	
Age group						
5-12 years	7,925	13%	5,479	15%	13,404	14%
13-18 years	36,621	60%	19,194	51%	55,815	56%
19-25 years	16,853	27%	12,839	34%	29,692	30%
Total	61,399	100%	37,512	100%	98,911	100%
<i><26 but age unknown</i>	5,564		73,116		78,680	
Cultural background²						
Aboriginal &/or TSI	691	3%	936	5%	1,627	4%
CALD	8,614	38%	5,623	31%	14,237	35%
Neither ATSI nor CALD	13,285	59%	11,511	64%	24,796	61%
Total	22,590	100%	18,070	100%	40,660	100%
<i>Unknown</i>	44,373		92,558		136,931	
State						
ACT	1,501	3%	1,833	2%	3,334	2%
NSW	18,407	31%	38,498	37%	56,905	35%
NT	378	1%	1,043	1%	1,421	1%
QLD	12,075	21%	19,562	19%	31,637	19%
SA	3,616	6%	7,359	7%	10,975	7%
TAS	1,184	2%	3,070	3%	4,254	3%
VIC	16,267	28%	24,954	24%	41,221	25%
WA	5,237	9%	8,339	8%	13,576	8%
Total	58,665	100%	104,658	100%	163,323	100%
<i>Unknown</i>	8,298		5,970		14,268	
Remoteness						
Major Cities	25,245	74%	18,811	70%	44,056	72%
Inner Regional	6,087	18%	5,845	22%	11,932	20%
Outer Regional/Remote	2,765	8%	2,302	9%	5,067	8%
Total	34,097	100%	26,958	100%	61,055	100%
<i>Unknown</i>	32,866		83,670		116,536	
Relationship with Kids Helpline						
First contact	24,368	40%	2,396	24%	26,764	37%
Occasional/Ongoing support	37,071	60%	7,736	76%	44,807	63%
Total	61,439	100%	10,132	100%	71,571	100%
<i>Unknown</i>	5,524		100,496		106,020	

1. Where column percentages sum to more or less than 100%, this is due to rounding.

2. TSI = Torres Strait Islander. CALD = culturally and linguistically diverse. ATSI = Aboriginal and/or Torres Strait Islander

3.2.2 Trends in help-seeking – counselling versus non-counselling support

Section 3.I0.3 will provide detailed information on trends in Kids Helpline contacts by type of help-seeking – counselling or non-counselling. It will show that there has been a gradual increase in both the number and proportion of contacts from children and young people seeking counselling support over the last decade (Figures 42 and 43). Contacts from those seeking information, referral or other non-counselling support, on the other hand, have decreased both in number and as a proportion of all contacts during this period.

3.2.3 Trends in help-seeking – types of non-counselling contacts

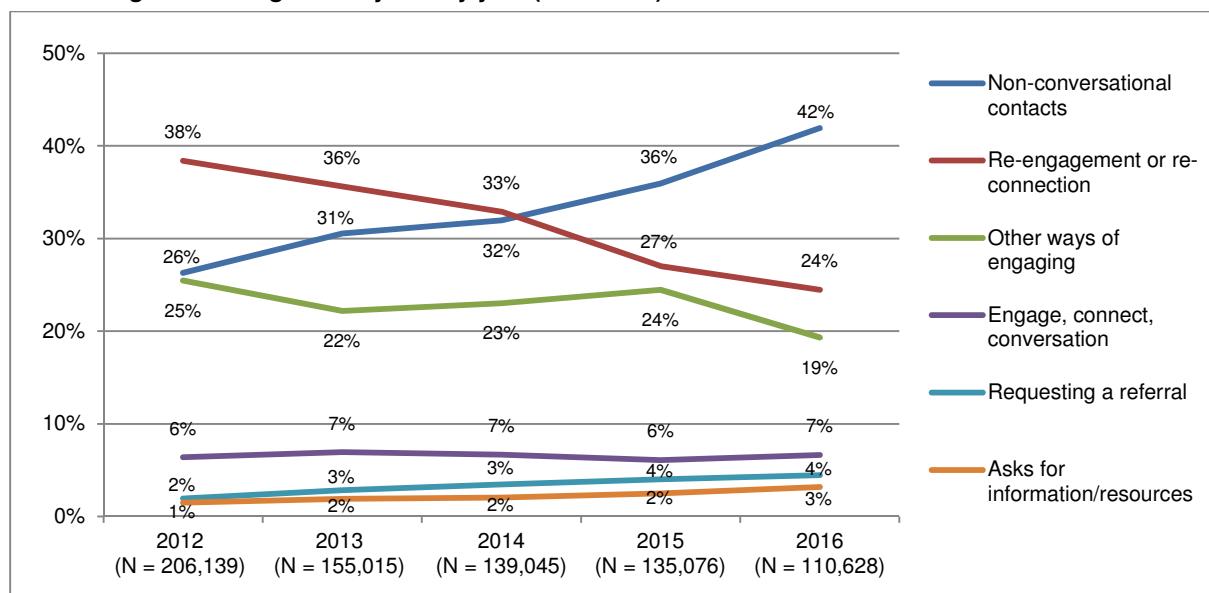
Contacts from children and young people seeking non-counselling types of support can be grouped into six categories according to the particular sort of assistance or engagement they are seeking:

- *Non-conversational contacts.* These include silent contacts, hang ups, noise without verbal content, and in the web chat context, opening a session but not responding.
- *Re-engagement or re-connection.* These are contacts from children or young people who have previously contacted Kids Helpline. They may include general or specific feedback and thanks, reporting-in with a regular counsellor without discussing any specific issue or concern, arranging for a particular counsellor to contact them, and/or challenging or testing access arrangements put in place by Kids Helpline.
- *Other ways of engaging.* These contacts include engaging in resourceful, inventive, unusual, challenging or creative ways, such as joking, singing, giggling, swearing, playing recordings, role-playing, story-telling, and communicating sexual themes with unknown agendas.
- *Engage, connect, conversation.* These contacts are where a child or young person contacts through conversation and no issues or concerns are presented. They may include general conversations, conversations about the counselling process, sharing personal news, exploring ideas, and therapeutic and/or strength-based conversations.
- *Requesting a referral.* These are contacts where the client requests information or contact details for other support services, not related to a particular problem.
- *Asks for information/resources.* These contacts are for information or resources that are not related to a particular problem or issue, such as requests for information about Kids Helpline competitions or campaigns. They exclude referral requests.

Figure 8 presents the relative frequency with which each type of non-counselling help-seeking applied in each year from 2012 to 2016. Key observations from the data in Figure 8 include the following:

- The most common type of non-counselling contact in 2016 was non-conversational exchanges, accounting for more than two out of five non-counselling contacts (42%). The next most common type was re-engagement or reconnection (24%).
- There has been an increase in the proportion of non-counselling contacts where the child or young person is engaging in non-conversational exchanges, from 26% in 2012 to 42% in 2016.
- There has been a corresponding decrease in the proportion of non-counselling contacts where the client is re-engaging or re-connecting with the service, from 38% in 2012 to 24% in 2016. Similarly, there has been a decrease in the proportion of non-counselling contacts where the client engages in ‘other ways’ (from 25% in 2012 to 19% in 2016). Section 3.I0.3 will consider explanations for these trends and link them to changes in data management and therapeutic practice with certain groups of clients over this period.
- The relative frequency of other types of non-counselling contacts has remained fairly constant over the five-year period.

Figure 8. Type of assistance sought by non-counselling contacts aged 5-25 years – percentage of non-counselling contacts aged 5-25 years by year (2012-2016)



1. Note that this figure is based on the same data presented in Figure 44, however Figure 44 shows the *raw counts* of non-counselling contacts over the five years and this figure presents the *relative frequency* of types of non-counselling contacts. That is, the percentages for each year will add up to 100% (or slightly more or less depending on rounding). With relative frequency data, types of contacts reduce and increase relative to each other. So while there has actually been a small decrease in the number of non-conversational contacts from 2012 to 2016, as is apparent in Figure 44, the relative frequency of these types of contacts has increased because the numbers of contacts re-engaging with the service and those engaging in 'other ways' have disproportionately declined over the period, as shown in Figure 44.

3.2.4 Summary

This section has described and compared two groups of Kids Helpline contacts in 2016 reflecting two broad types of help-seeking – *counselling* and *non-counselling*. While substantial missing data for non-counselling contacts somewhat undermine the reliability of the analysis, the two groups appear to have different gender, age group, cultural background, remoteness and support relationship profiles suggesting that different modalities of support and engagement are necessary to reach, build trust with, and support the diversity of children and young people in the Australian population.

Over the last decade, the number and proportion of counselling contacts has gradually increased while the number and proportion of non-counselling contacts has decreased. The nature of non-counselling contacts is also changing, at least over the short term. Since 2012, the relative frequency with which children and young people have contacted Kids Helpline for the purpose of 'reconnecting or re-engaging' with the service or 'engaging in other ways' has decreased, while the frequency of 'non-conversational' contacts has increased.

3.3 Medium of contact

The Kids Helpline counselling and support service provides three communication modalities (media) by which clients can engage counselling or other support – phone, web chat and email. This section explores patterns in children and young people’s communication preferences – for example, whether or not particular subgroups prefer to engage via particular media and whether or not there is a relationship between the child or young person’s type of help-seeking and their preferred communication medium. Such information is useful for developing new and targeting existing support services more effectively to different subgroups of vulnerable children and young people.

3.3.1 Phone, web chat and email contacts in 2016

Table 4 shows the proportion of different sub-populations of Kids Helpline contacts who engaged by phone, web chat or email in 2016. The use of row percentages allows comparison between subgroups, like males and females, in their relative use of different contact media.

Key observations from these data include the following:

- *Gender.* There are notable gender differences in contacting preferences. Females were less likely than males to contact by phone (58% c.f. 80%) and more likely than males to contact by web chat (30% c.f. 14%) and email (12% c.f. 6%). Those identifying as intersex, trans or gender-diverse were more likely than both males or females to contact by web chat (56% c.f. 14% for males and 30% for females) while being less likely to contact by phone (31% c.f. 80% for males and 58% for females).
- *Age.* There are also notable differences in contacting preferences by age group. Compared with younger age groups, 19-25 year-olds were more likely to contact by phone (78% c.f. 49% for 13-18 year-olds and 66% for 5-12 year-olds) and less likely to contact by email (3% c.f. 12% and 12%). Compared with those older and younger in age, 13-18 year-olds were more likely to contact by web chat (38% c.f. 22% of 5-12 year-olds and 19% of 19-25 year-olds).
- *Cultural background.* Contacts known to be Aboriginal and/or Torres Strait Islander in background were more likely than those known to be of other cultural backgrounds to contact by phone (93% c.f. 76% for CALD contacts and 81% for non-ATSI/CALD contacts). They were less likely than those from other cultural backgrounds to contact by either email or web chat. Substantial missing data, small subpopulations and the greater likely influence of repeat contacts on percentage frequencies in this context undermine the reliability of these observations, however.
- *Remoteness.* Those outside Major Cities appeared to contact by phone slightly more frequently than those in Major Cities (59% in Outer Regional/Remote localities and 59% in Inner Regional localities compared with 50% in Major Cities). Those outside Major Cities appeared to contact by web chat slightly less often than those in Major Cities (34% in Outer Regional/Remote localities and 35% in Inner Regional localities compared with 45% in Major Cities). Again, substantial missing data, relatively small subpopulations and the greater likely influence of repeat contacts on percentage frequencies in this context undermine the reliability of these observations.
- *Type of support relationship.* First time contacts were slightly more likely than occasional contacts/contacts receiving ongoing support to engage by web chat (33% c.f. 28%) and slightly less likely to engage by email (10% c.f. 16%).
- *Type of help-seeking.* Children and young people’s preferred medium of contact was strongly associated with whether or not they were seeking counselling support. Counselling contacts compared with non-counselling contacts were less likely to contact via phone (56% c.f. 86%) and more likely to contact by web chat (30% c.f. 10%) or by email (15% c.f. 3%).

Table 4. Characteristics of 2016 Kids Helpline contacts aged 5-25 years – by medium of contact¹

Contact characteristics	Phone (N = 132,966)		Web chat (N = 31,029)		Email (N = 13,596)		All contacts (N = 177,591)	
	n	row %	n	row %	n	row %	n	row %
Gender								
Female	48,381	58%	25,147	30%	9,620	12%	83,148	100%
Male	23,792	80%	4,267	14%	1,832	6%	29,891	100%
Intersex, Trans & Gender-diverse	387	31%	703	56%	170	13%	1,260	100%
Total	72,560	63%	30,117	26%	11,622	10%	114,299	100%
Unknown	60,406	95%	912	1%	1,974	3%	63,292	100%
Age group								
5-12 years	8,907	66%	2,939	22%	1,558	12%	13,404	100%
13-18 years	27,550	49%	21,309	38%	6,956	12%	55,815	100%
19-25 years	23,183	78%	5,563	19%	946	3%	29,692	100%
Total	59,640	60%	29,811	30%	9,460	10%	98,911	100%
<26 but age unknown	73,326	93%	1,218	2%	4,136	5%	78,680	100%
Cultural background²								
Aboriginal &/or TSI	1,520	93%	56	3%	51	3%	1,627	100%
CALD	10,866	76%	2,247	16%	1,124	8%	14,237	100%
Neither ATSI/CALD	20,174	81%	3,499	14%	1,123	5%	24,796	100%
Total	32,560	80%	5,802	14%	2,298	6%	40,660	100%
Unknown	100,406	73%	25,227	18%	11,298	8%	136,931	100%
State								
ACT	2,525	76%	614	18%	195	6%	3,334	100%
NSW	46,476	82%	9,083	16%	1,346	2%	56,905	100%
NT	1,259	89%	138	10%	24	2%	1,421	100%
QLD	25,438	80%	5,165	16%	1,034	3%	31,637	100%
SA	8,767	80%	1,933	18%	275	3%	10,975	100%
TAS	3,618	85%	504	12%	132	3%	4,254	100%
VIC	31,467	76%	8,247	20%	1,507	4%	41,221	100%
WA	10,815	80%	2,219	16%	542	4%	13,576	100%
Total	130,365	80%	27,903	17%	5,055	3%	163,323	100%
Unknown	2,601	18%	3,126	22%	8,541	60%	14,268	100%
Remoteness								
Major Cities	21,935	50%	19,733	45%	2,388	5%	44,056	100%
Inner Regional	7,085	59%	4,222	35%	625	5%	11,932	100%
Outer Regional/Remote	2,983	59%	1,720	34%	364	7%	5,067	100%
Total	32,003	52%	25,675	42%	3,377	6%	61,055	100%
Unknown	100,963	87%	5,354	5%	10,219	9%	116,536	100%
Relationship with Kids Helpline								
First contact	15,279	57%	8,890	33%	2,595	10%	26,764	100%
Occasional/Ongoing support	25,202	56%	12,369	28%	7,236	16%	44,807	100%
Total	40,481	57%	21,259	30%	9,831	14%	71,571	100%
Unknown	92,485	87%	9,770	9%	3,765	4%	106,020	100%
Type of help-seeking								
Counselling contact	37,426	56%	19,761	30%	9,776	15%	66,963	100%
Information/Referral/ Other contact	95,540	86%	11,268	10%	3,820	3%	110,628	100%
Total	132,966	75%	31,029	17%	13,596	8%	177,591	100%

1. Where row percentages sum to more or less than 100%, this is due to rounding.

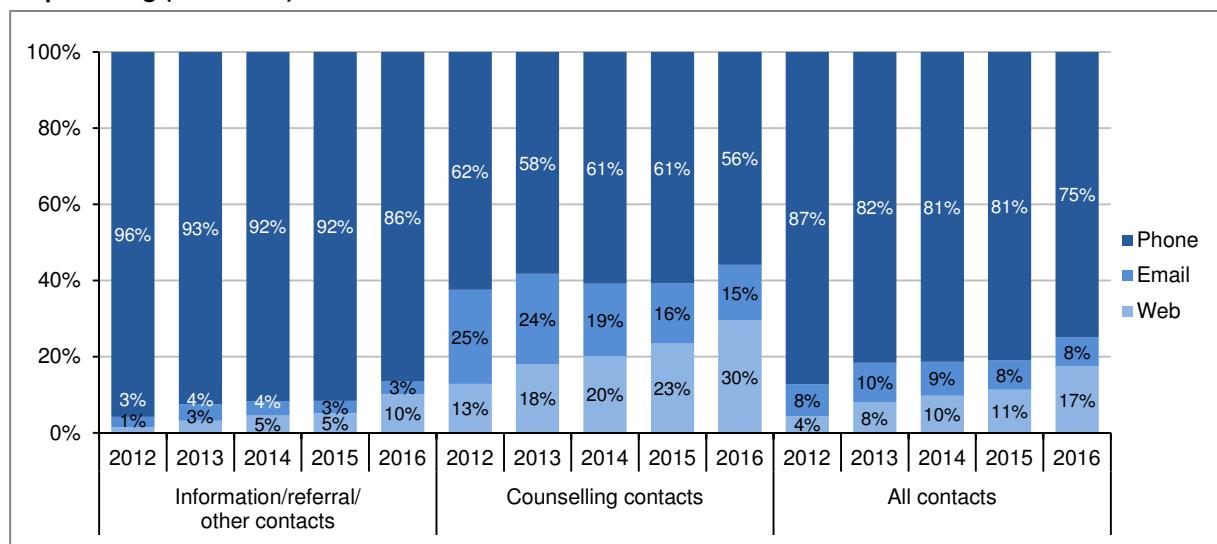
2. TSI = Torres Strait Islander. CALD = culturally and linguistically diverse. ATSI = Aboriginal and/or Torres Strait Islander

3.3.2 Trends in medium of contact

Figure 9 shows the proportion of Kids Helpline contacts engaging with the service via each medium over the last five years according to whether or not the client was seeking counselling or non-counselling types of support. Key observations include the following:

- Counselling contacts compared with non-counselling contacts, are more likely to be conducted via online media (web chat and email).
- For both counselling and non-counselling contacts there has been a steady increase in engagement via web chat and a decrease in engagement by email. These trends are more evident among counselling contacts.
- For both counselling and non-counselling contacts, engagement by phone has remained stable over the period, but in 2016 there appears to be a small but notable decrease in favour of web chat. This may relate to efforts by Kids Helpline in 2016 to make web chat more accessible, both by extending hours of operation and by improving the website's optimisation for mobile devices.

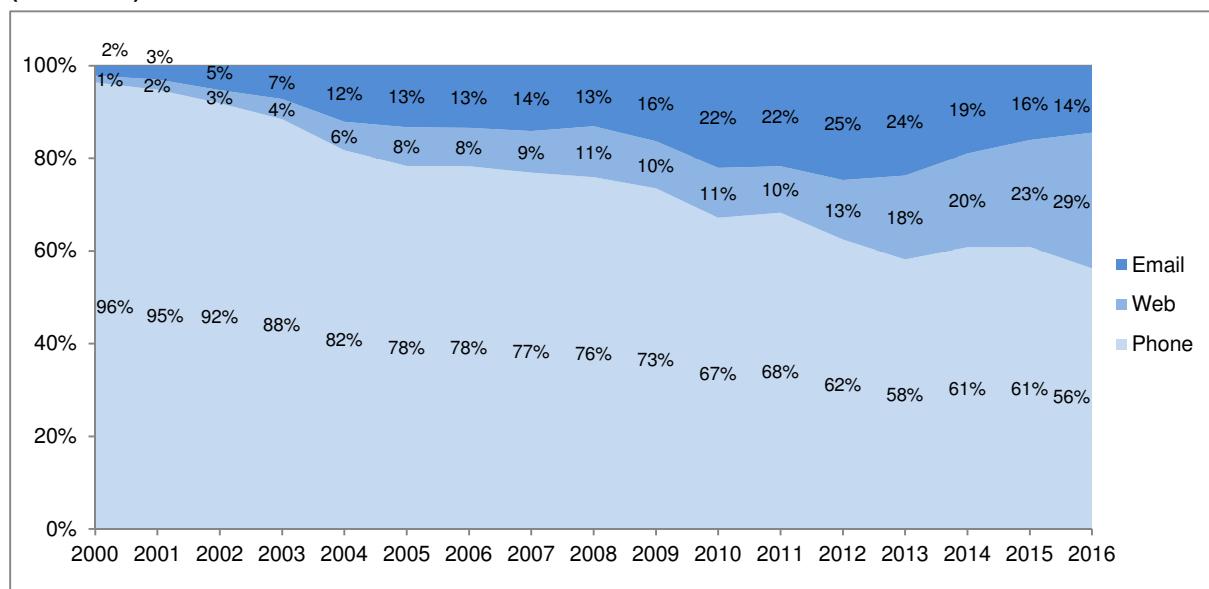
Figure 9. Percentage of Kids Helpline contacts aged 5-25 years – medium of contact by year and type of help-seeking (2012-2016)¹



1. Population sizes as follows: Information/referral/other contacts – N(2012) = 206,140, N(2013) = 155,015, N(2014) = 139,045, N(2015) = 135,076, N(2016) = 110,628. Counselling contacts – N(2012) = 71,298, N(2013) = 72,416, N(2014) = 69,959, N(2015) = 70,210, N(2016) = 66,963. Where stacked bar percentages sum to more or less than 100%, this is due to rounding.

Figure 10 provides long-term trend analysis of the medium by which counselling contacts engage with the service. It shows a gradual but continuous decrease in preference for phone engagement since email and web chat options were introduced (in 1999 and 2000 respectively). It also shows a gradual but steady increase in web chat engagement, and an increase in email engagement up until 2012, after which point email engagement has declined somewhat.

Figure 10. Percentage of Kids Helpline counselling contacts aged 5-25 years – medium of contact by year (2012-2016)



It shows a gradual but continuous decrease in preference for phone engagement since email and web chat options were introduced (in 1999 and 2000 respectively). It also shows a gradual but steady increase in web chat engagement, and an increase in email engagement up until 2012 after which point email engagement has declined somewhat.

To further consider trends in medium of preference, Table 5 presents a breakdown of the characteristics of Kids Helpline contacts according to the child or young person's medium of engagement from 2014 to 2016 to assess short term trends in the engagement of particular subgroups via different media.

The key observation to be taken from Table 5 is:

- Almost every subgroup of the Kid Helpline population listed on the left hand side of the table (i.e. all genders, all age groups, all localities, etc.) except contacts known to be Aboriginal and/or Torres Strait Islander, have slightly or moderately increased their preference for web chat over the last three years while reducing their preference for email-based contact and/or phone-based contact. In the vast majority of subgroups, there is a reduction in preference for *both* phone and email over this period.

3.3.3 Summary

This section has identified demographic characteristics associated with preference for engagement via particular communication modalities. It notes differences in media preferences by gender, age group, cultural background, locality, type of support relationship with the service and type of help-seeking (counselling vs. non-counselling). Notwithstanding these differences, almost every subgroup of the Kids Helpline population is observed to be increasing their preference for web chat over recent years, and web chat contacts are a steadily growing proportion of all contacts, but especially of counselling contacts.

On the basis of steadily growing attempts by children and young people to contact the service by web chat (see section 3.10.1) Kids Helpline has been working in recent years to improve access to web chat. The data presented in this section, showing increasing proportions of contacts engaging by web chat, reflect this effort to some extent. Expanding access to web chat is a complex undertaking, however, as it inevitably impacts on service capacity in other areas, like phone and email counselling (see section 3.10 later in the report for more on this).

Table 5. Characteristics of Kids Helpline contacts aged 5-25 years – by medium of contact and year (2014-2016)¹

Contact characteristics	Medium	2014 (N = 209,004)		2015 (N = 205,286)		2016 (N = 177,591)	
		n	col. %	n	col. %	n	col. %
Gender²							
Female	Phone	66,456	67%	58,798	65%	48,381	58%
	Web	17,247	18%	19,434	22%	25,147	30%
	Email	14,849	15%	11,720	13%	9,620	12%
Male	Phone	29,403	86%	30,558	85%	23,792	80%
	Web	2,876	8%	3,386	9%	4,267	14%
	Email	1,864	5%	1,986	6%	1,832	6%
Intersex, Trans & Gender-diverse	Phone	-	-	344	56%	387	31%
	Web	-	-	202	33%	703	56%
	Email	-	-	73	12%	170	13%
Age group							
5-12 years	Phone	7,997	72%	9,009	70%	8,907	66%
	Web	1,447	13%	1,925	15%	2,939	22%
	Email	1,732	15%	1,890	15%	1,558	12%
13-18 years	Phone	35,821	59%	32,458	57%	27,550	49%
	Web	14,674	24%	16,510	29%	21,309	38%
	Email	10,020	17%	7,889	14%	6,956	12%
19-25 years	Phone	30,142	84%	28,490	84%	23,183	78%
	Web	3,643	10%	4,308	13%	5,563	19%
	Email	1,992	6%	1,148	3%	946	3%
Cultural background³							
Aboriginal &/or TSI	Phone	1,369	95%	1,524	93%	1,520	93%
	Web	29	2%	52	3%	56	3%
	Email	45	3%	66	4%	51	3%
CALD	Phone	14,080	84%	13,242	84%	10,866	76%
	Web	1,150	7%	1,356	9%	2,247	16%
	Email	1,469	9%	1,202	8%	1,124	8%
Neither ATSI nor CALD	Phone	29,800	86%	25,566	87%	20,174	81%
	Web	2,257	7%	2,385	8%	3,499	14%
	Email	2,396	7%	1,337	5%	1,123	5%
Remoteness							
Major Cities	Phone	25,349	61%	23,196	56%	21,935	50%
	Web	12,547	30%	15,029	36%	19,733	45%
	Email	3,998	10%	3,329	8%	2,388	5%
Inner Regional	Phone	8,601	68%	8,354	66%	7,085	59%
	Web	2,674	21%	3,214	25%	4,222	35%
	Email	1,380	11%	1,166	9%	625	5%
Outer Regional/Remote	Phone	4,155	66%	4,425	70%	2,983	59%
	Web	1,193	19%	1,337	21%	1,720	34%
	Email	958	15%	586	9%	364	7%
Relationship with Kids Helpline							
First contact	Phone	15,122	64%	17,303	64%	15,279	57%
	Web	5,694	24%	6,921	26%	8,890	33%
	Email	2,853	12%	2,653	10%	2,595	10%
Occasional/Ongoing support	Phone	33,710	58%	29,025	57%	25,202	56%
	Web	11,619	20%	12,057	24%	12,369	28%
	Email	12,465	22%	9,457	19%	7,236	16%

1. Where column percentages sum to more or less than 100%, this is due to rounding.

2. Intersex, trans, gender-diverse) has only been included in data collection since 2015.

3. TSI = Torres Strait Islander. CALD = culturally and linguistically diverse. ATSI = Aboriginal and/or Torres Strait Islander

3.4 Issues for which children and young people most commonly sought counselling support

During 2016, Kids Helpline counsellors responded to 66,963 contacts from children and young people who were seeking help in relation to a specific problem or concern (i.e. counselling contacts). Analysis of counselling contacts by the types of issues for which the child or young person is seeking help provides valuable insights into the contemporary help-seeking concerns of young Australians.

Each time a child or young person contacts the service, counsellors can record up to four different concerns of the child or young person, taking these from a classification inventory of 39 different concern or problem types. Each concern type has a specific set of subcategories, which allow for more in-depth capturing of the child or young person's concerns.

This section:

- identifies the most frequently recorded concerns in Kids Helpline counselling sessions in 2016
- provides analysis of these concerns by contact characteristics, like medium of contact, gender, age group, cultural background, remoteness, and type of support relationship with Kids Helpline to identify patterns in children and young people's help-seeking, and
- presents trend analysis of the most common issues for which children and young people have sought counselling over both the short-term (5 years) and the longer-term (20 years) to identify any notable shifts in the issues counsellors are most commonly responding to.

Related subsequent sections include:

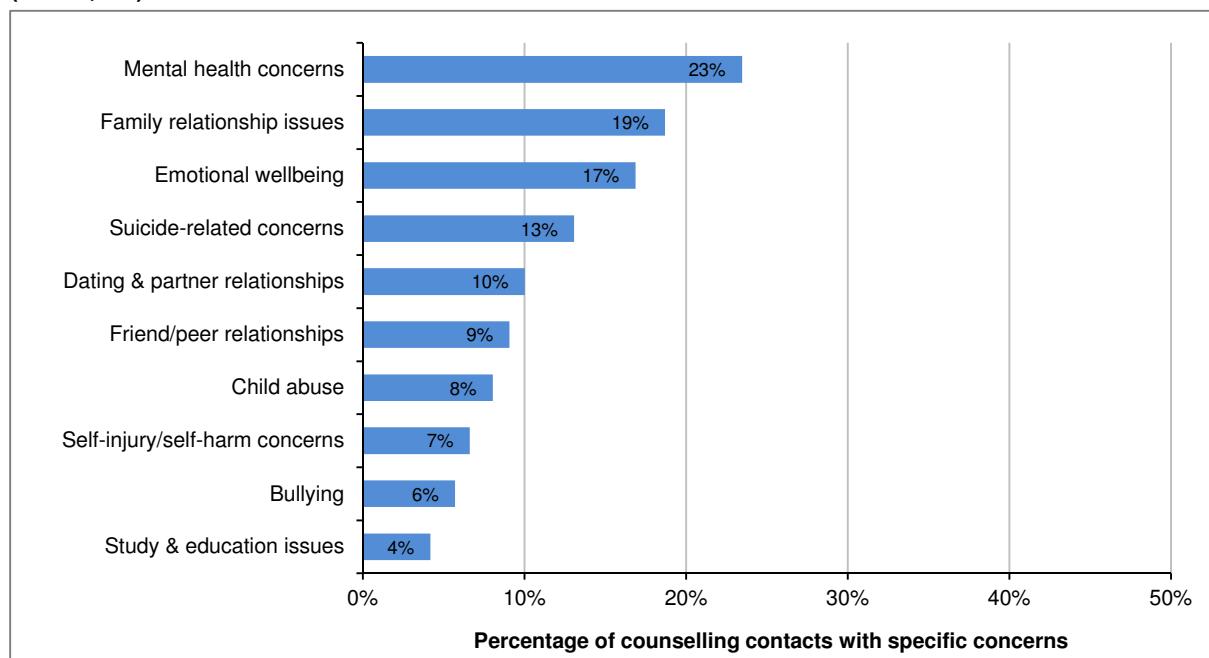
- Section 3.5, which presents 2014-2016 data on *all* the concern categories in the Kids Helpline classification system, not just the *most common*
- Section 3.7, which provides more *in depth analysis* of some common client concerns of contemporary policy interest – mental health, suicide, self-injury, child abuse and bullying concerns, and
- Chapter 6, which reports children and young people's views regarding the impact that talking to a counsellor about their concerns, has on their ability to deal with these issues in their lives.

3.4.1 All counselling contacts

Figure II shows the relative frequency with which counsellors recorded specific concerns of children and young people contacting the service for counselling support in 2016. It reveals that:

- Roughly, one in four counselling contacts (23%) was in relation to mental health problems – the child or young person's own mental health or that of another person.
- Just less than one in five contacts was about family relationship issues (19%) or emotional wellbeing (17%).
- One in eight (13%) contacts involved the child or young person seeking help for suicide concerns.
- One in 10 contacts concerned dating and partner relationships (10%) or friend/peer relationships (9%).
- One in 12 (8%) contacts was about child abuse.
- One in 13 (7%) contacts focused on self-injury concerns.
- One in 18 (6%) contacts was about bullying.
- One in 20 (5%) contacts was in relation to study and education issues.

Figure 11. Most frequently recorded concerns of 2016 Kids Helpline counselling contacts aged 5-25 years (N = 66,963)¹



1. Up to four concerns per contact may be recorded. Accordingly, percentages may sum to more than 100%.

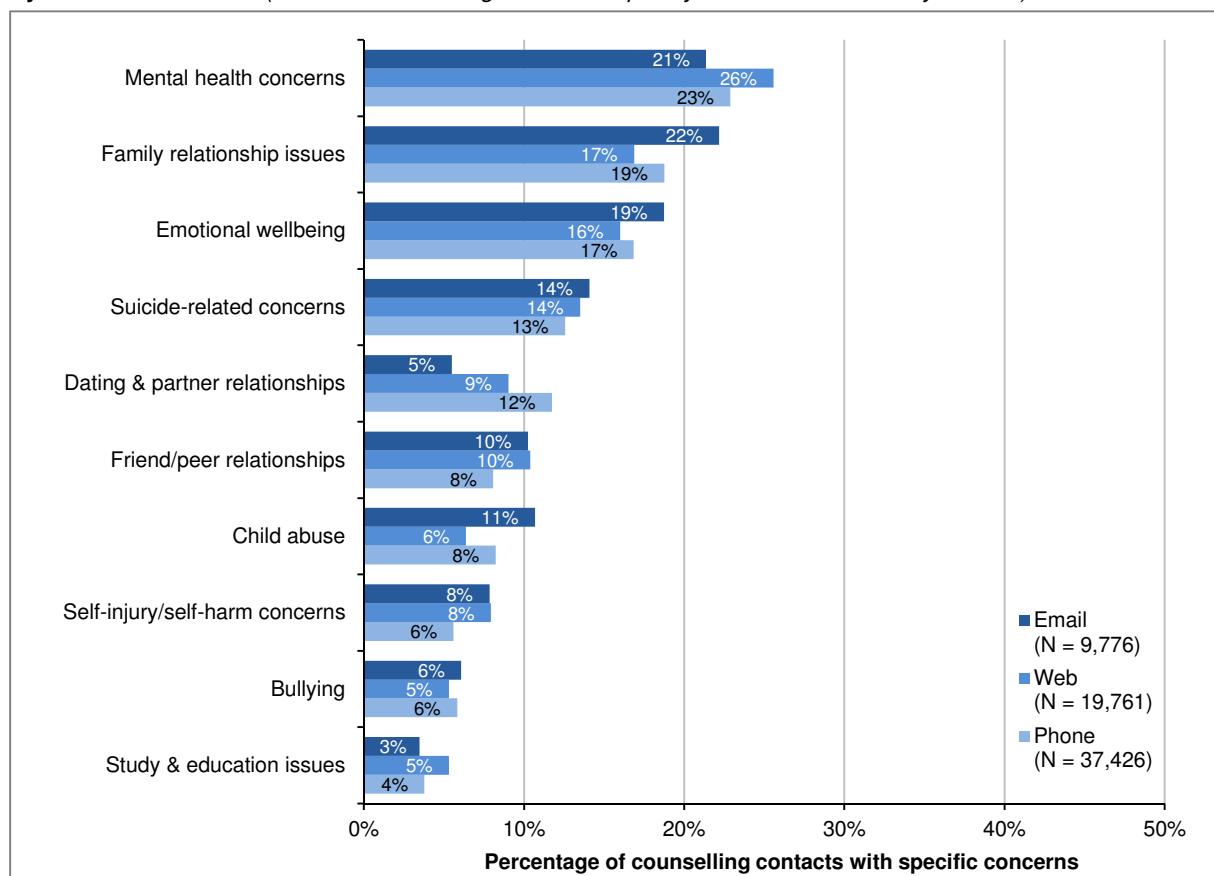
3.4.2 By medium of contact

Later in the report, section 3.10 will outline shifts in demand by children and young people for receiving support from counsellors via different communication modalities. In light of this, it is valuable to consider whether counselling contacts engaging with the service via particular media are more likely to contact about particular issues.

Figure I2 compares the relative frequency with which specific concerns were discussed during counselling contacts in 2016 according to medium of contact. Key observations from the data include the following:

- There are relatively few differences in the frequency with which particular concerns were discussed during counselling contacts according to the medium of contact and these differences in frequency are all small in size.
- Children and young people who contacted via web chat were slightly more likely than those who contacted by other media, especially email, to discuss concerns about mental health issues (26% for web chat c.f. 23% for phone and 21% for email).
- Children and young people contacting by email were more likely than those who contacted by web chat to discuss family relationship concerns (22% c.f. 17%) and child abuse concerns (11% c.f. 6%).
- Children and young people who contacted by email were less likely than those who contacted by phone or web to discuss dating and partner relationships (5% c.f. to 12% for phone and 9% for web chat).

Figure 12. Most frequently recorded concerns of 2016 Kids Helpline counselling contacts aged 5-25 years – by medium of contact (sorted in descending order of frequency of concerns nationally in 2016)¹



1. Up to four concerns per contact may be recorded. Accordingly, percentages may sum to more than 100%.

3.4.3 By age group

Kids Helpline targets a broad age range – from 5-25 years. This age range spans numerous developmental periods and life stages. Understanding the ways in which age influences the help-seeking needs of children and young people contacting the service is valuable both in terms of developing age-appropriate responses but also in undertaking targeted policy advocacy where required.

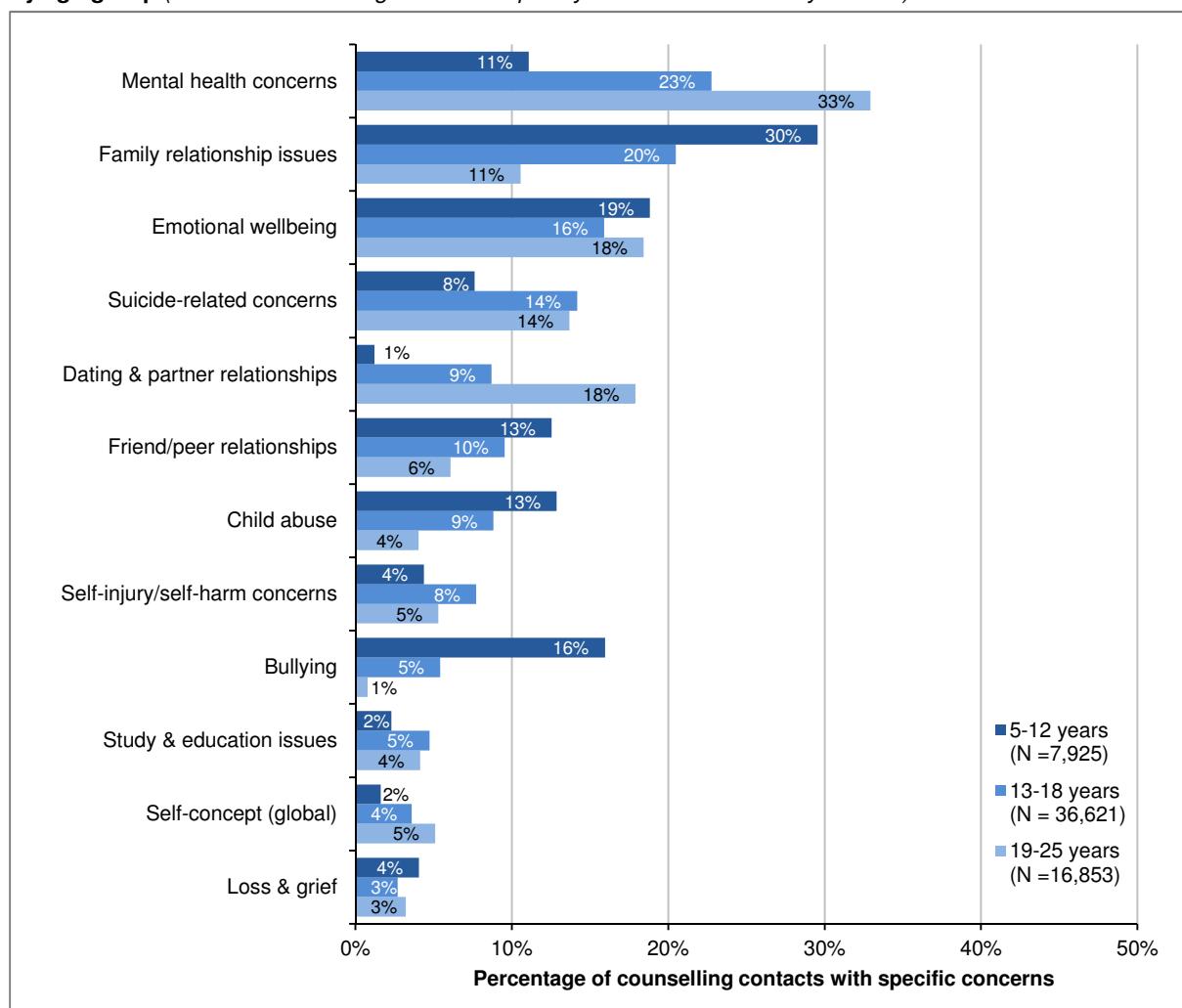
For the purposes of identifying broad patterns in age-related concern, counselling contacts were divided into three groups according to the child or young person's age – *kids* (5-12 year-olds), *teens* (13-18 year-olds) and *young adults* (19-25 year-olds). Figure I3 compares the relative frequency with which the 12 most common concerns of 2016 counselling contacts were raised according to age group.

Key observations from Figure I3 include the following:

- *Age has a major influence on children and young people's concerns.* The frequency with which a majority of concerns were discussed in counselling sessions in 2016 can be seen to be related to the age group of the child or young person contacting the service; in many cases, the age-related differences in frequency are moderate to large.
- *Mental health concerns.* Concern with mental health increases sharply with age. While one in 10 contacts (11%) from children aged 5-12 years was in relation to mental health concerns, one in three (33%) contacts from young people aged 19-25 years was about mental health issues.
- *Family relationship issues.* Concern about family relationships decreases sharply by age. One in three contacts (30%) from children aged 5-12 years was about family relationship issues while roughly one in 10 (11%) contacts from young people aged 19-25 years was about this concern.
- *Suicide-related concerns.* Concern about suicide was almost twice as common among contacts from young people aged 13-18 years (14%) or 19-25 years (14%) than it was among contacts from children aged 5-12 years (8%).

- *Dating and partner relationships.* Concern with dating and partner relationships increases with age. Only one in 100 contacts (1%) from 5-12 year-olds were about this issue compared with roughly one in five (18%) contacts from 19-25 year-olds.
- *Friend and peer relationships.* Concern about friend and peer relationships decreases gradually with age with 13% of contacts from 5-12 year-olds being about these types of relationships compared with 6% of contacts from 19-25 year-olds.
- *Child abuse.* Concern about child abuse decreases with age. Child abuse was a concern discussed in 13% of contacts from 5-12 year-olds compared with 4% of contacts from 19-25 year-olds.
- *Self-injury concerns.* Contacts from 13-18 year-olds were almost twice as likely to be about self-injury concerns (8%) compared with either younger contacts (4%) or older contacts (5%).
- *Bullying.* Bullying is a concern discussed primarily in contacts from 5-12 year-olds, with 16% of these contacts being about bullying in 2016. Concern with bullying decreases to 5% of contacts from teenagers and to 1% of contacts from young adults. It is worth noting, however, that teenagers are a major audience for bullying-related content on the Kids Helpline website (see section 4.2.1).

Figure 13. Most frequently recorded concerns of 2016 Kids Helpline counselling contacts aged 5-25 years – by age group (sorted in descending order of frequency of concerns nationally in 2016)¹

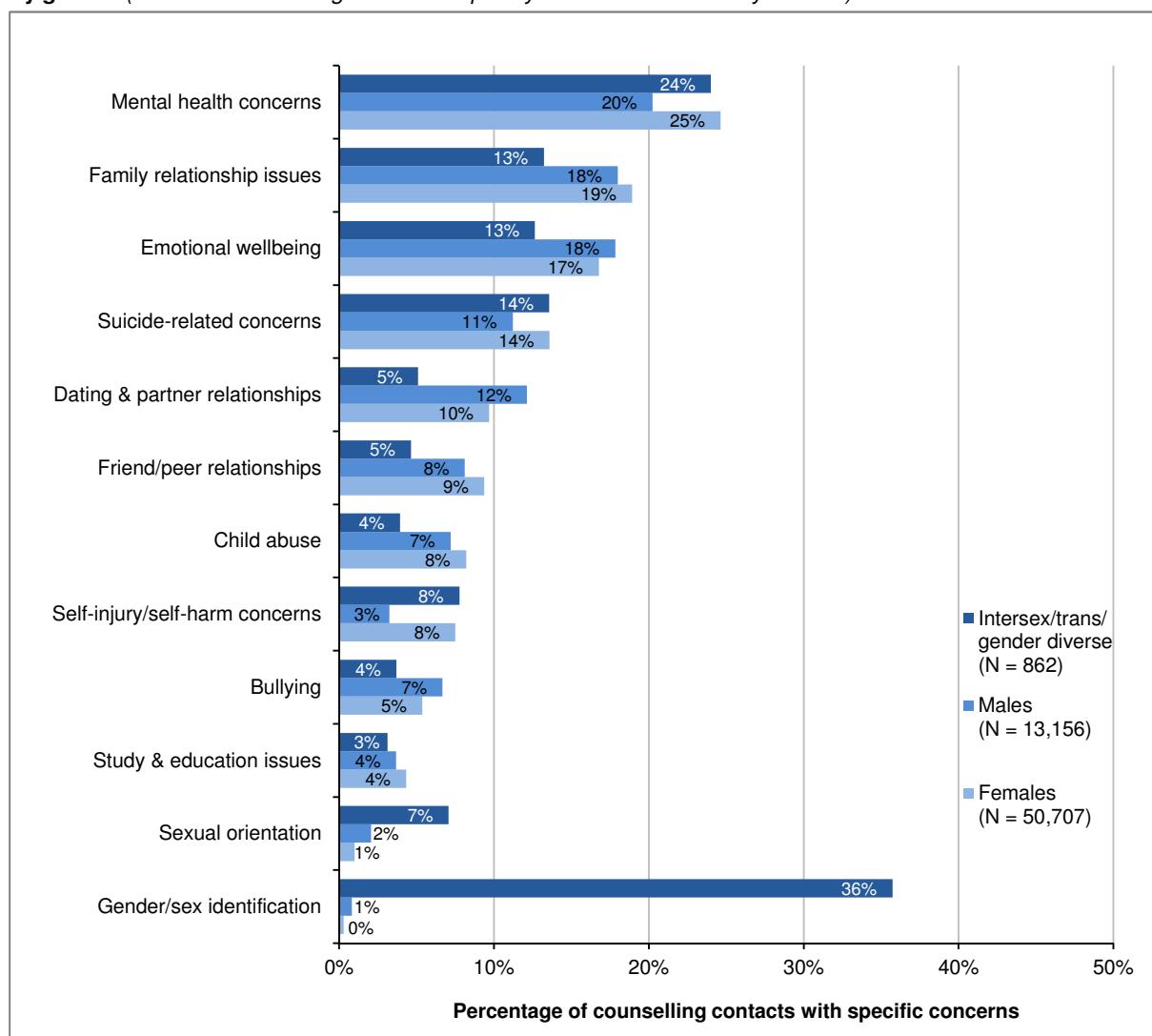


1. Up to four concerns per contact may be recorded. Accordingly, percentages may sum to more than 100%.

3.4.4 By gender

Figure 14 compares the relative frequency with which concerns were discussed in counselling sessions in 2016 according to the child or young person's gender.

Figure 14. Most frequently recorded concerns of 2016 Kids Helpline counselling contacts aged 5-25 years – by gender (sorted in descending order of frequency of concerns nationally in 2016)¹



1. Up to four concerns per contact may be recorded. Accordingly, percentages may sum to more than 100%.

Key observations from the data include the following:

- There are a number of differences in the frequency with which particular concerns were discussed in counselling contacts depending on the gender of the child or young person. These differences are generally small in size between contacts from males and females but often moderate to large between contacts from those identifying as intersex, trans or gender-diverse and contacts from those identifying as either male or female.
- Intersex, trans and gender-diverse.* Children and young people identifying as intersex, trans or gender-diverse were much more likely to be contacting in relation to concern about gender/sex identification than males or females (36% c.f. 1% for males and <1% for females). They were also more likely than either males or females to contact about sexuality/sexual orientation issues (7% c.f. 2% for males and 1% for females). Owing to the relative frequency of their concern about these two issues, contacts from intersex, trans and gender-diverse clients were proportionately less likely than contacts from males or females to be about most other issues, notably family relationship issues, emotional wellbeing, dating and partner relationships, friend and peer relationships, and child abuse.

Despite their relative focus on sexual and gender identity issues, contacts from intersex, trans and gender-diverse clients were no less likely than contacts from either males or females to be about mental health

issues, suicide or self-harm. This observation makes sense in light of numerous studies that indicate that individuals who are same-sex attracted, or intersex, trans, or gender-diverse, are more likely than heterosexual or cisgender individuals to experience mental health disorders (Roberts *et al.*, 2013; Grossman & D'Augelli, 2006; Meyer, 2003), suicidal thoughts and behaviours (Fitzpatrick *et al.*, 2005; LeVassuer *et al.*, 2013; Mueller *et al.*, 2015; Russell & Joyner, 2001; Stone *et al.*, 2014; Walls, Potter & Van Leeuwen, 2009) and/or bullying (LeVassuer *et al.*, 2013; Reisner *et al.*, 2015).

- *Males and females.* Differences in the most common concerns of males and females in 2016 are limited to two areas of concern – mental health and self-injury. Females were more likely than males to contact about mental health issues (25% c.f. 20%) and also more likely than males to contact for help with self-injury issues (8% c.f. 3%).

3.4.5 By age group and gender

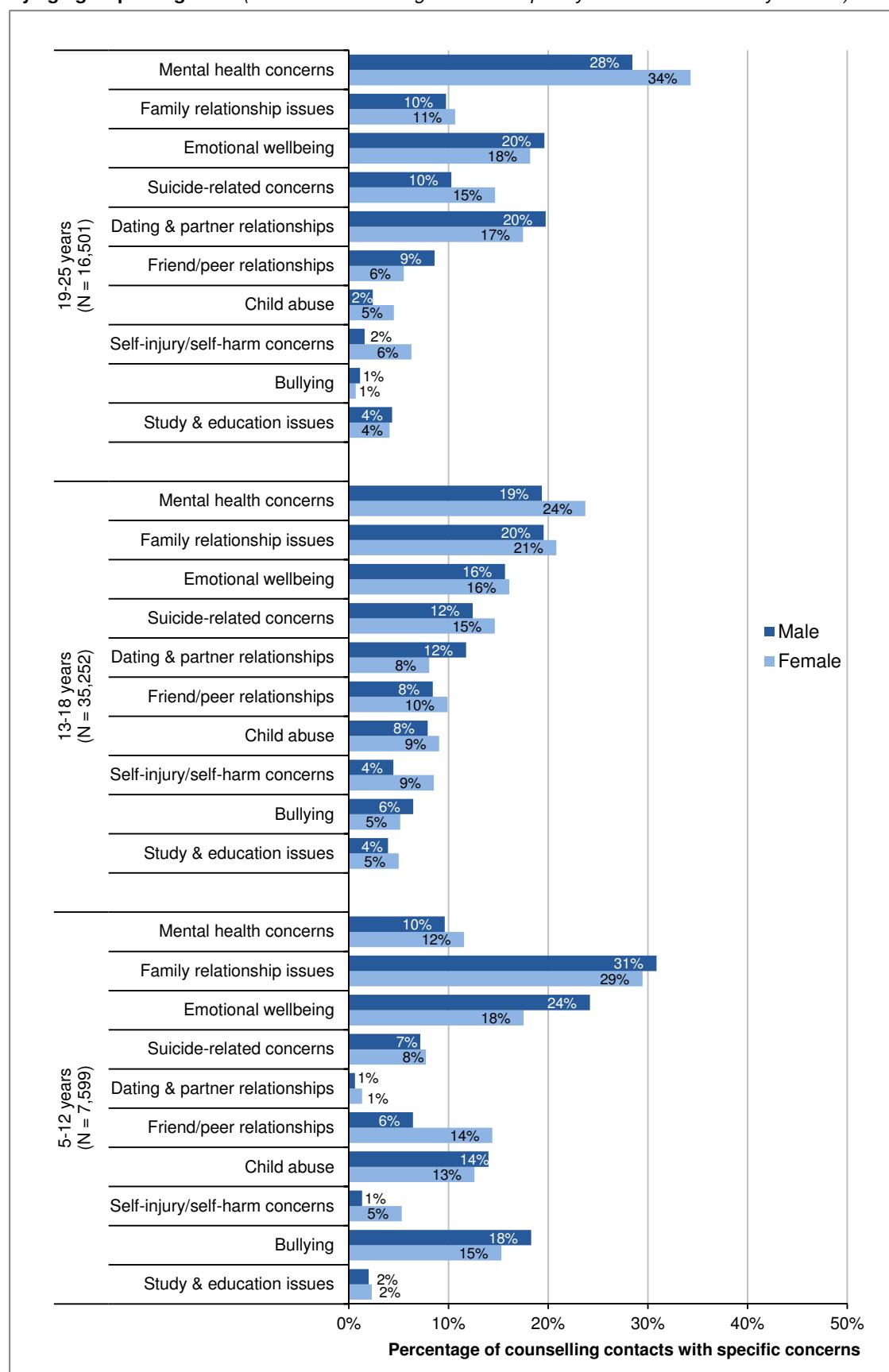
Figure I5 presents the most frequently recorded concerns of Kids Helpline counselling contacts in 2016 by both age group and gender to see if gender differences in the concerns of children and young people contacting Kids Helpline vary according to age group.

Due to the very small number of contacts from clients identifying as intersex, trans and gender-diverse, particularly in certain age groups, this gender category has been excluded from the analysis to avoid potentially presenting unreliable or unrepresentative insights into the age-related concerns of this group in the population. With very small sub-populations, moreover, the distorting impact of repeat contacts on relative frequencies can be substantial.

Key observations from Figure I5 include:

- *Gender differences among contacts from 5-12 year-olds.* Out of the 10 most common concerns analysed, three showed evidence of gender differences for this age group. Contacts from females were more than twice as likely than contacts from males in this age group to be about friend/peer relationships (14% c.f. 6%) and five times more likely to be about self-injury issues (5% c.f. 1%). However, they were less likely than contacts from males to be about emotional wellbeing (18% c.f. 24%).
- *Gender differences among contacts from 13-18 year-olds.* Of the 10 most common client concerns in 2016, three indicated gender differences for this age group. Contacts from females were slightly more likely than contacts from males to be about mental health issues (24% c.f. 19%) and more than twice as likely to be about self-injury (9% c.f. 4%). They were less likely than contacts from males, however, to be about dating and partner relationships (8% c.f. 12%).
- *Gender differences among contacts from 19-25 year-olds.* Of the 10 most common client concerns in 2016, three indicated gender differences for this age group. Contacts from females were more likely than contacts from males in this age group to be in relation to mental health issues (34% c.f. 28%), suicide (15% c.f. 10%) and self-injury (6% c.f. 2%).

Figure 15. Most frequently recorded concerns of 2016 Kids Helpline counselling contacts aged 5-25 years – by age group and gender (sorted in descending order of frequency of concerns nationally in 2016)¹



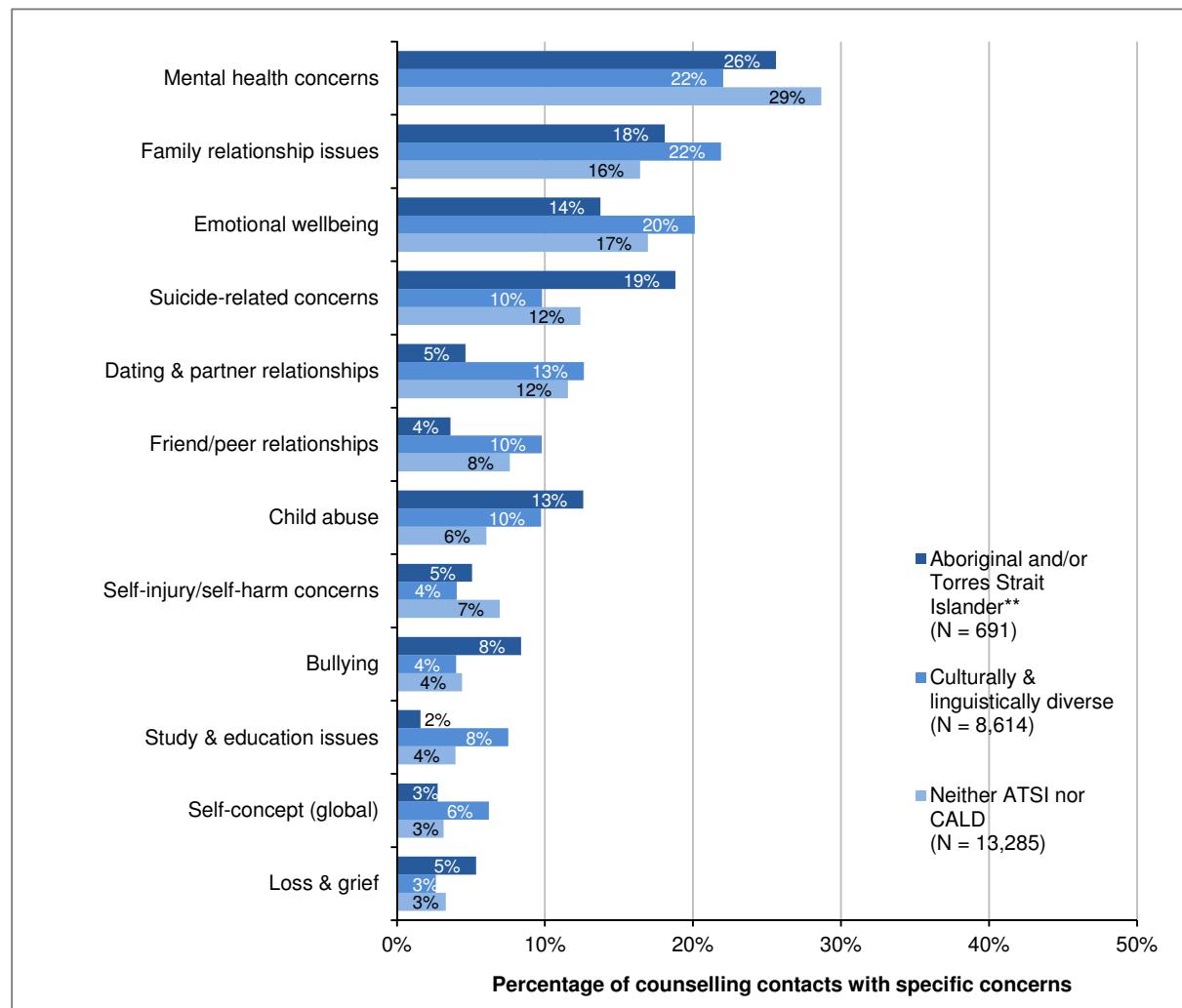
1. Up to four concerns per contact may be recorded. Accordingly, percentages for gender within an age category may sum to more than 100%. For 5–12 year old contacts, N (males) = 1,662, N (females) = 5,937. For 13 to 18 year old contacts, N (males) = 7,028, N (females) = 28,224. For 19 to 25 year old contacts, N (males) = 3,505, N (females) = 12,996.

3.4.6 By cultural background

In terms of developing culturally sensitive and appropriate services for children and young people seeking help, it is valuable to consider the influence of cultural background on the kinds of issues for which children and young people seek counselling support. To this end, Figure 16 compares the relative frequency of the 12 most common concerns of counselling contacts in 2016 according to the child or young person's cultural background – in particular, whether they were Aboriginal and/or Torres Strait Islander (ATSI), from other culturally or linguistically diverse backgrounds (CALD), or from neither ATSI nor CALD backgrounds (i.e. Caucasian Australian).

Unfortunately, cultural background information is only available for approximately one third (34%) of counselling contacts in 2016 and there are likely to be biases associated with missing and known data (see Appendix). These factors will impact on the reliability of the cultural background analysis presented in this section and care therefore needs to be taken with how these data are interpreted and used.

Figure 16. Most frequently recorded concerns of 2016 Kids Helpline contacts aged 5-25 years – by cultural background (sorted in descending order of frequency of concerns nationally in 2016)^{1,2}



1. Up to four concerns per contact may be recorded. Accordingly, percentages may sum to more than 100%.

2. Interpret data for Aboriginal and/or Torres Strait Islander contacts with caution. These contacts comprise a very small subgroup of Kids Helpline counselling contacts. Moreover, the data presented pertain to contacts, not individuals, such that multiple contacts may be received from a single individual. Accordingly, the data presented here in relation to ATSI contacts may not be representative of the population of Kids Helpline service users from Aboriginal and/or Torres Strait Islander backgrounds.

Key observations from Figure 16 include the following:

- *Cultural background has a notable influence on children and young people's concerns.* The frequency with which 10 of the 12 most common concerns were discussed in counselling contacts in 2016 would appear to be related to the cultural background of the child or young person where known.

- *Aboriginal and/or Torres Strait Islander counselling contacts.* Contacts from Aboriginal and/or Torres Strait Islander children and young people were more likely than contacts from children and young people of other cultural backgrounds (either CALD or Caucasian Australian) to focus on:
 - suicide-related issues (19% c.f. 10% or 12%)
 - child abuse (13% c.f. 10% or 6%), and
 - bullying (8% c.f. 4% or 4%).
- *CALD counselling contacts.* Contacts from children and young people from CALD backgrounds appeared slightly or moderately more likely than those from either ATSI and/or non-ATSI/CALD children and young people to focus on:
 - family relationship issues (22% c.f. 18% or 16%)
 - emotional wellbeing issues (20% c.f. 14% or 17%)
 - dating and partner relationships (13% c.f. 5% for ATSI contacts)
 - friend and peer relationships (10% c.f. 4% for ATSI contacts), and
 - study and education issues (8% c.f. 2% or 4%).
- *Counselling contacts who were neither ATSI nor CALD.* Contacts from children and young people who were known to be neither ATSI nor CALD were more likely than contacts from children and young people known to be either ATSI or CALD to be about mental health issues (29% c.f. 26% or 22%).

3.4.7 By remoteness

Kids Helpline services all localities across Australia. It is possible that distance from metropolitan areas will impact on the experiences and/or concerns of children and young people contacting the service.

Understanding these differences is therefore important in delivering a responsive service to children and young people across the continent.

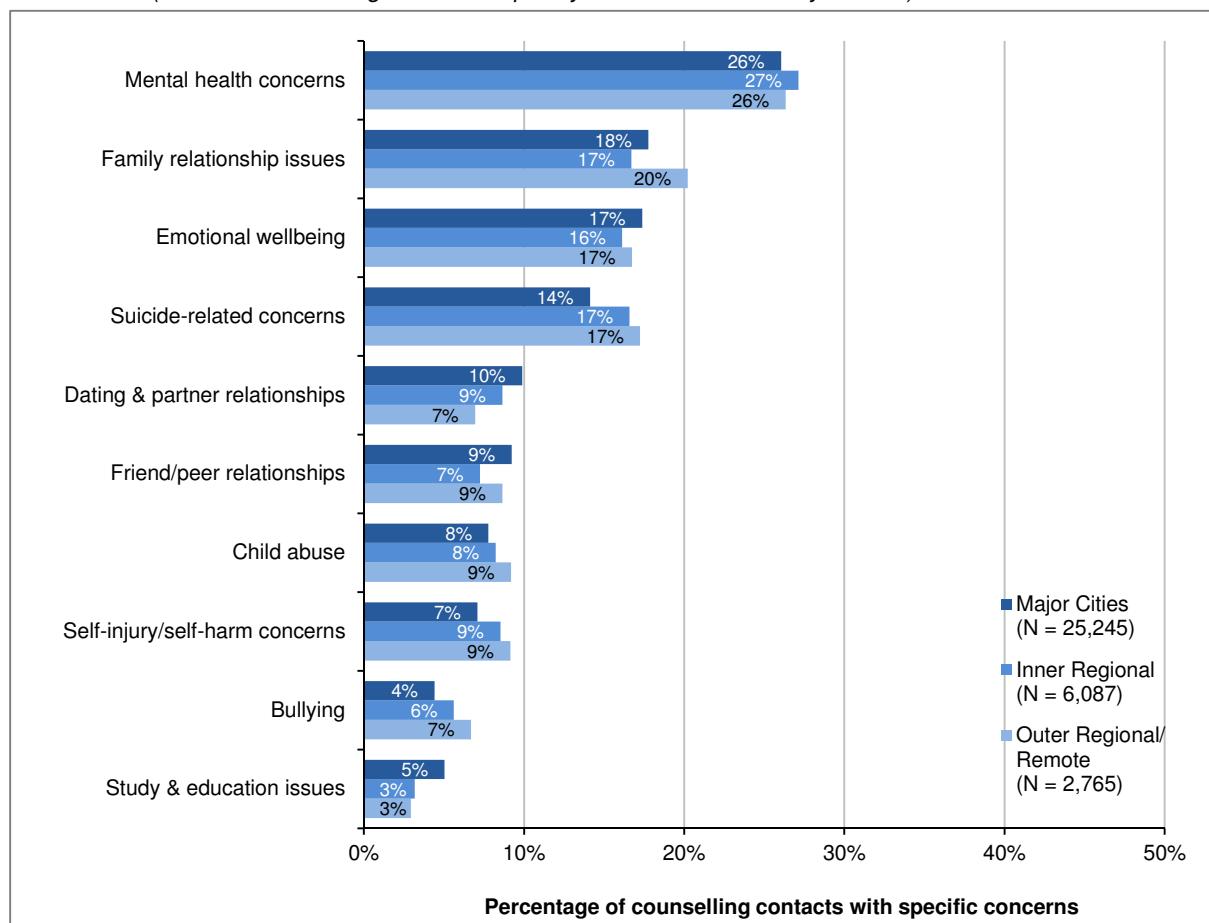
Figure I7 compares the relative frequency with which concerns were raised by counselling contacts in 2016 according to their remoteness classification – in particular, whether they were living in *Major Cities*, in *Inner Regional/localities*, or in *Outer Regional/Remote* contexts. The remoteness classification system used by Kids Helpline has been adapted from the Australian Bureau of Statistics' Australian Geographical Standard (ASGS). See Appendix for more information.

Unfortunately, locality information is only available for half (51%) of counselling contacts in 2016 and there may be biases associated with missing and known data. These factors will impact on the reliability of the remoteness analysis presented in this section and care therefore needs to be taken with how these data are interpreted and used.

Key observations from the data in Figure I7 include the following:

- In 2016, there is no difference apparent in the frequency with which the 10 most common client concerns were discussed in counselling sessions according to the child or young person's remoteness classification.
- Data reliability issues may obscure actual differences, however.

Figure 17. Most frequently recorded concerns of 2016 Kids Helpline contacts aged 5-25 years – by remoteness (sorted in descending order of frequency of concerns nationally in 2016)¹



1. Up to four concerns per contact may be recorded. Accordingly, percentages may sum to more than 100%.

3.4.8 By type of support relationship with the service

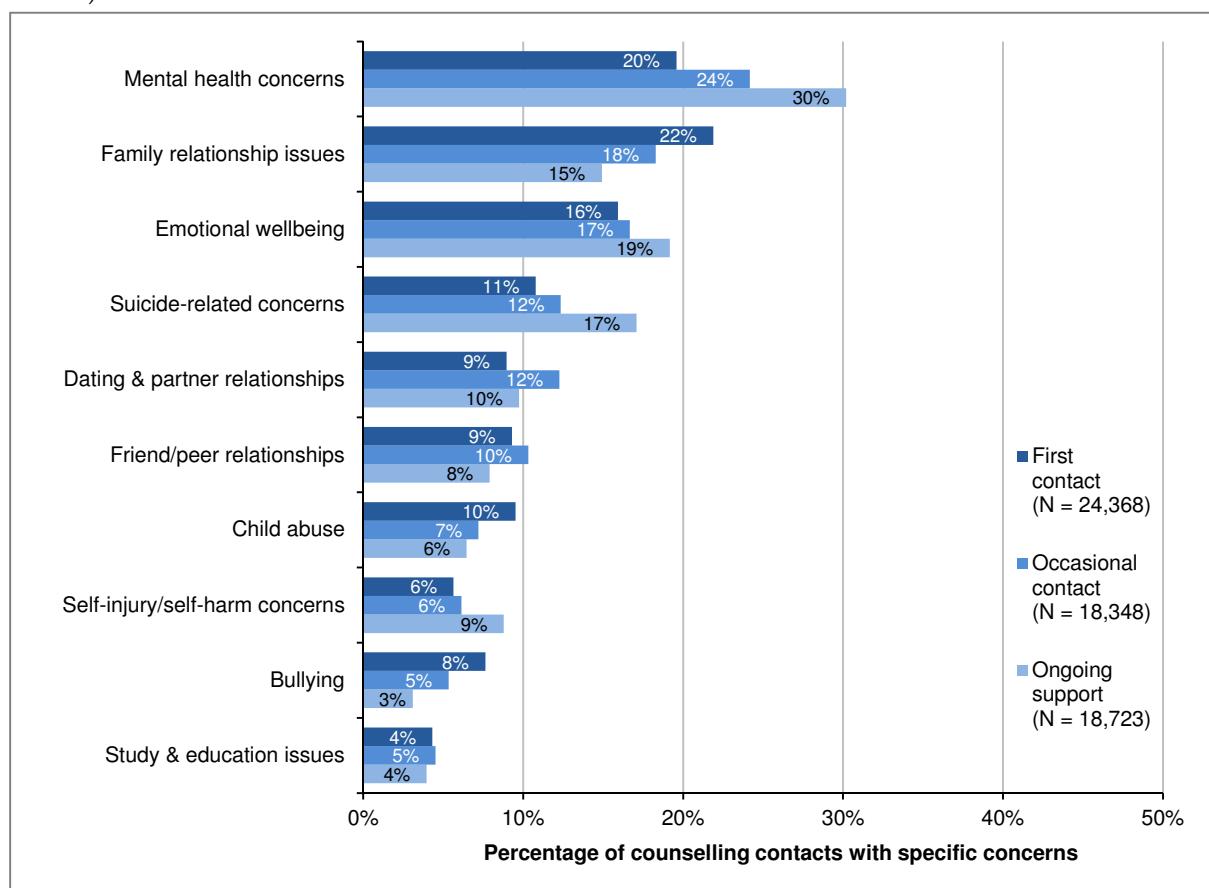
Counsellors classify counselling contacts according to the type of support relationship they have with Kids Helpline – in particular, whether they are a *first time contact*, an *occasional contact* or a contact who receives regular and *ongoing support*.

All children and young people are offered ongoing support if they would like this. However, as certain problems are more likely to be assisted by ongoing support, one would expect to see differences in the relative frequency with which particular concerns are discussed in counselling contacts according to the child or young person's status as a first contact, occasional contact or ongoing support contact.

Figure I8 presents this analysis and confirms the expected relationship. Key observations from Figure I8 include the following:

- The frequency with which children and young people received counselling support for five of the 10 most common concerns in 2016 appears to be related to how established or intensive their support relationship with the service is.
 - The more established or intensive the support relationship, the more likely counselling sessions will focus on mental health and suicide-related issues.
 - By contrast, counselling sessions with first time contacts are more likely than counselling sessions with repeat contacts to focus on family relationship issues, child abuse and bullying.

Figure 18. Most frequently recorded concerns of 2016 Kids Helpline counselling contacts aged 5-25 years – by type of support relationship with the service (sorted in descending order of frequency of concerns nationally in 2016)¹



1. Up to four concerns per contact may be recorded. Accordingly, percentages may sum to more than 100%.

3.4.9 Trend analysis of client concerns

It is interesting to consider whether or not the issues that children and young people most commonly contact Kids Helpline about have changed over time. This section provides short term trend analysis of client concern from 2012, when Kids Helpline's most recent concern classification system was established, through to the end of 2016. This is then supplemented with longer-term trend analysis (20 years) through interrogation of Kids Helpline's data archive.

Short term analysis

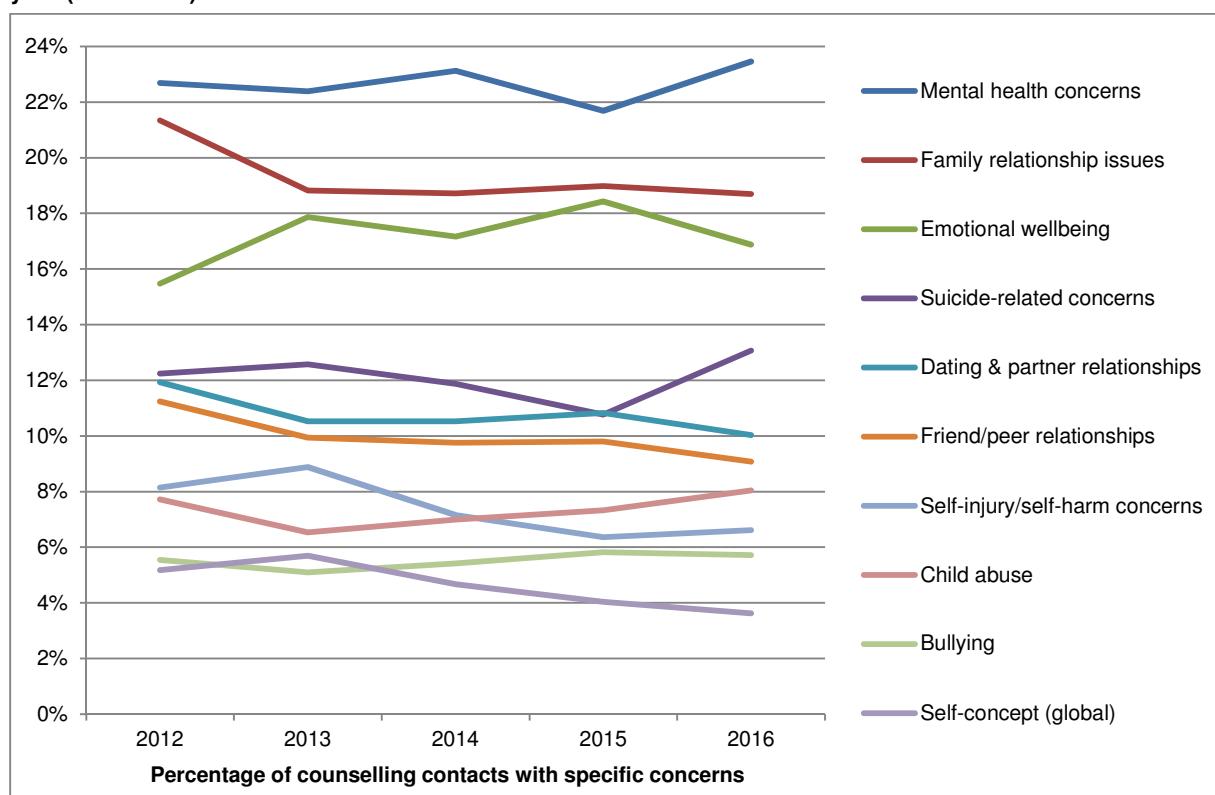
Figure I9 shows the 10 most common concerns of children and young people contacting Kids Helpline for counselling support over the last five years to consider any short-term trends in the concerns of counselling contacts.

The key observation apparent from the data is that the frequency with which children and young people are contacting Kids Helpline about all these issues has remained stable over the period. Variation in the relative frequency of each concern is 2% or less over the period and most variation is unsystematic in nature (i.e. there are both increases and decreases in proportion apparent over the period rather than a clear trend in one direction).

Long term analysis

It is possible to investigate trends in help-seeking over a longer period of time if we dip into Kids Helpline's data archive. Since 1996, there have been two classification systems used for recording the help-seeking concerns of children and young people contacting Kids Helpline, one operating from 10 May 1996 until 31 December 2011, and a new classification system introduced from 1 January 2012. A number of concern categories are sufficiently similar to permit analysis of trends over the entire period from 1996 to 2016. Others can also be recoded into *continuous concern categories* by joining various concern types together during and across the two periods based on concern definitions.

Figure 19. Most frequently recorded concerns of Kids Helpline counselling contacts aged 5-25 years – by year (2012-2016)¹



1. Up to four concerns per contact may be recorded. Accordingly, percentages may sum to more than 100%.

For example, in order to analyse concerns about mental health over time, it is necessary to amalgamate three contemporary concern categories related to mental health – mental health concerns, emotional wellbeing concerns, and concerns about self-injury. The composite concern category is accordingly called *mental and/or emotional health/illness concerns, including self-injury* and it is inaccurate and misleading to abbreviate it to *mental health concerns*.

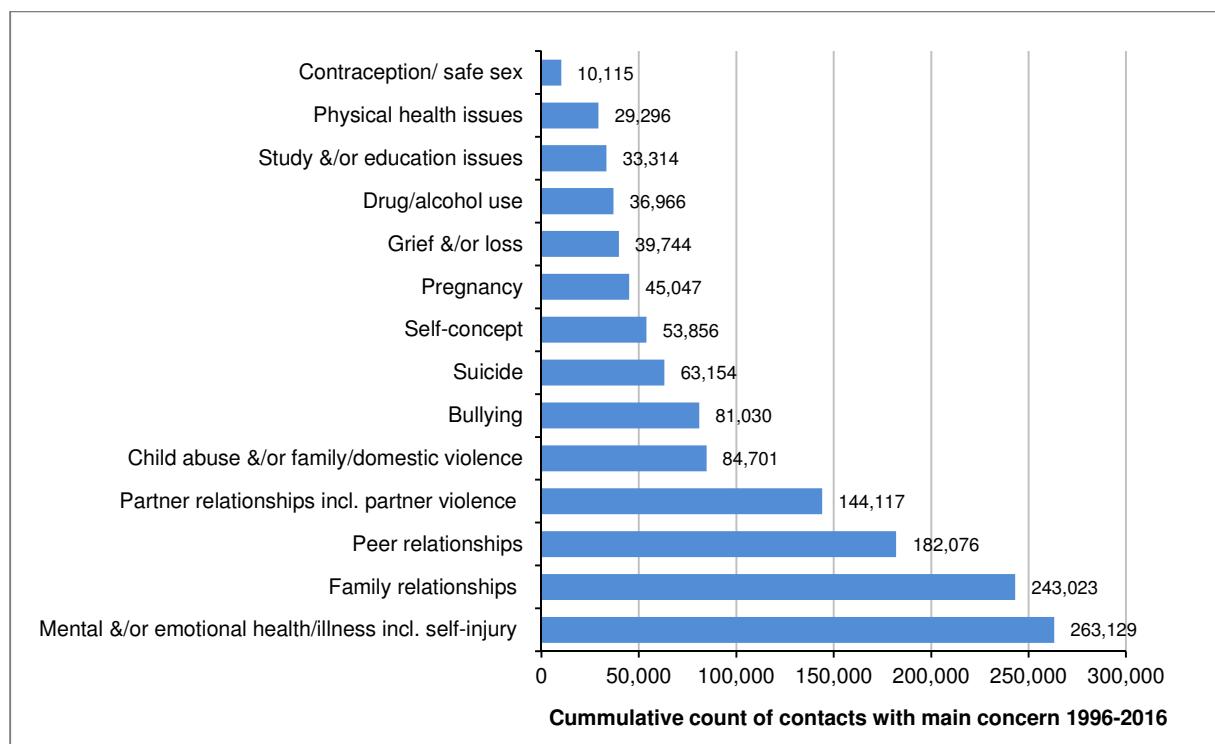
A total of 14 continuous concern categories can be generated in these ways and analysed over time.

Because there have been different numbers of fields for recording client concerns over the years – from one field initially, to two in 2002, to four in 2012, analysis of concerns beyond the last five years is necessarily limited to the *primary* or *main* concern recorded. The 14 continuous concern categories collectively account for 86% of main concerns recorded over the period (or 1,309,568 counselling contacts out of 1,526,210 received between May 1996 and December 2016).

Figure 20 shows the main concerns of Kids Helpline counselling contacts cumulatively from May 1996 to December 2016. It shows that the concerns Kids Helpline has received most contacts about over time are, in order of frequency:

- Mental and/or emotional health/illness, including self-injury (17% of counselling contacts received over the period)
- Family relationships (16%)
- Peer relationships (12%)
- Partner relationships, including partner violence (9%)
- Child abuse and/or family/domestic violence (6%)
- Bullying (5%), and
- Suicide (4%).

Figure 20. Main concern of Kids Helpline counselling contacts aged 5-25 years – cumulative counts of contacts 1996-2016¹



1. These 14 continuous concern categories comprise 86% (or 1,309,568) of all main concerns recorded for counselling contacts aged 5-25 years between May 1996 to December 2016 (N = 1,526,210).

Over the 20 complete calendar years for which we have these data (i.e. 1997 to 2016), continuities and changes are evident in the frequency with which particular concerns have been brought for counselling by children and young people. Table 6 shows raw counts of counselling contacts aged 5-25 years in five-year intervals from 1997-2001 to 2012-2016 according to the child or young person's main concern. The column on the far right-hand side of the table calculates the percentage change in the number of contacts responded to about a particular main concern from the first five-year interval to the most recent.

Key points to note from the data in Table 6 include the following:

- *Family relationships, peer relationships and partner relationships, including partner violence*, were the three most common categories of main concern in the first five years of the 20-year period and in the most recent five-year period all three remained among the five most common categories of main concern. This suggests a great deal of continuity overall in the concerns that children and young people contact Kids Helpline about, and highlights that supporting children and young people to manage significant personal relationships is, and has always been, a core aspect of the work that Kids Helpline undertakes.
- Eleven of the 14 main concern categories show a percentage decrease over time. This is to be expected as counselling contacts have reduced overall by 26% from 1997-2001 to 2012-2016.
- Notwithstanding the overall decrease in counselling contacts, three categories of concern show substantial and noteworthy percentage increases, namely:
 - a 487% increase in the frequency with which issues regarding *mental and/or emotional health or illness, including self-injury*, have been recorded as the client's main concern in counselling sessions
 - a 208% increase in the frequency with which *suicide* has been recorded as the client's main concern, and
 - a 48% increase in the frequency with which *study and/or education issues* have been recorded as the client's main concern during counselling contacts.

Table 6. Percentage change in number of Kids Helpline counselling contacts aged 5-25 years – by main concern in five-yearly intervals^{1,2}

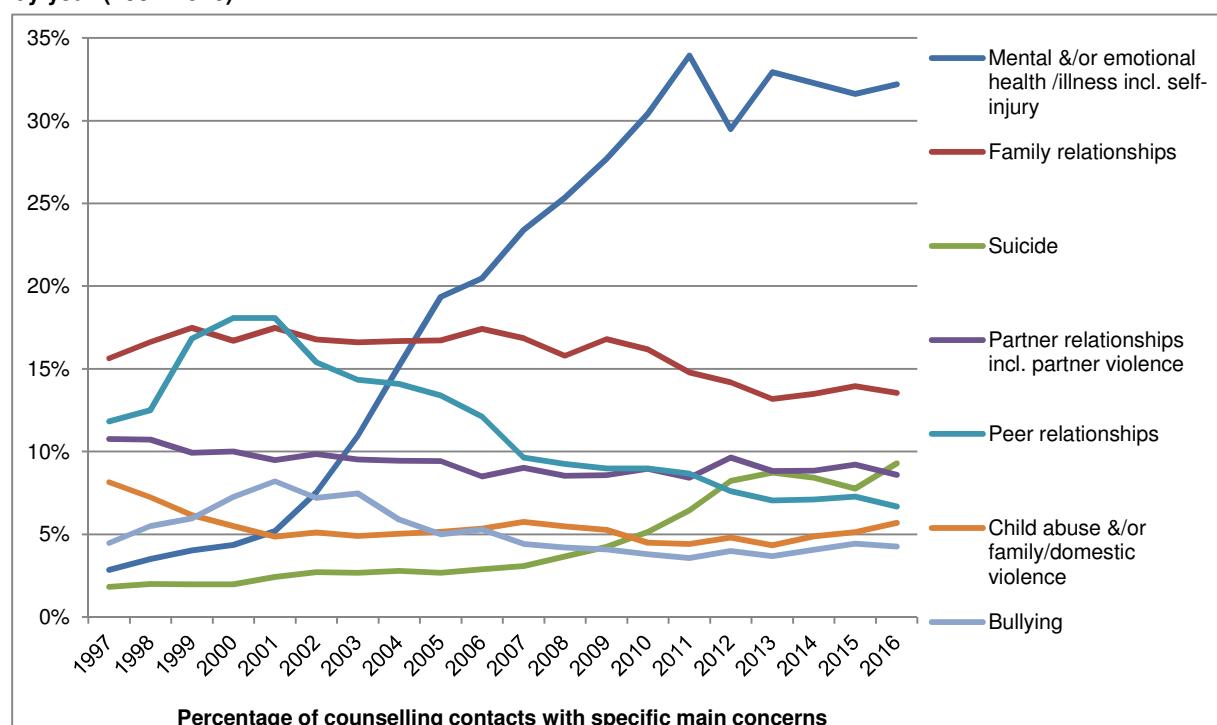
Main concern of counselling contact (continuous concern categories)	Number of contacts with this main concern by five-year intervals				% change from 1997-2001 to 2012-2016
	1997-2001	2002-2006	2007-2011	2012-2016	
Mental &/or emotional health/illness incl. self-injury	18,931	50,854	80,976	111,208	487%
	9,674	10,056	13,127	29,750	208%
	6,623	6,397	5,768	9,824	48%
	16,211	11,811	7,978	15,736	-3%
	48,462	34,475	24,753	31,684	-35%
	12,860	10,145	7,518	7,955	-38%
	79,802	61,552	45,600	47,973	-40%
	10,833	8,393	6,359	6,317	-42%
	30,400	18,631	14,313	17,403	-43%
	29,829	23,235	11,346	14,343	-52%
	73,473	51,419	25,840	25,092	-66%
	17,045	9,597	4,390	4,040	-76%
	21,539	11,743	5,337	3,818	-82%
	5,246	2,857	768	529	-90%

1. Counts of counselling contacts with these 14 continuous concern categories sum to 1,271,838 which comprises 86% of counselling contacts received from 1997 to 2016 ($N = 1,477,036$).

2. Total counselling contacts per five-year period are as follows: $N(1997-2001) = 475,549$; $N(2002-2006) = 366,308$; $N(2007-2011) = 284,312$; $N(2012-2016) = 350,867$.

Figure 21 provides a visual representation of this continuity and change in main client concern, focusing on the seven most frequently recorded of the 14 continuous concern categories. Rather than presenting *raw counts*, as shown in Table 6, it presents the *relative frequency* with which particular main concerns were discussed in counselling sessions each year. This helps to show changes in the frequency of client concerns relative to each other notwithstanding increases or decreases in the total number of counselling contacts responded to from year to year.

Figure 21. Most frequently recorded main concern of Kids Helpline counselling contacts aged 5-25 years – by year (1997-2016)



1. Data provided for the seven most common of 14 continuous concern categories from 1997-2016.

Some explanations for observed trends

It may seem logical to conclude from the trend analysis presented in Table 6 and Figure 21 that there has been an explosion in the mental health needs and suicide concerns of children and young people over the last two decades. While there may be genuine increases in these needs, it is difficult to conclude this from the data because a range of other factors has clearly and significantly contributed to the observed trends and may, indeed, account for them entirely. Almost all of these factors concern innovations in the operation of Kids Helpline to improve responsiveness to client need:

- In 2003, Kids Helpline expanded its service to include children and young people aged 19-25 years. Concern with mental health issues is strongly and positively correlated with age, as shown in section 3.4.3. Further analysis of concern data shows that most of the increase in concern regarding 'mental &/or emotional health/illness, including self-injury' since around 2004 is attributable to the inclusion of this older age group.
- In the early 2000s, Kids Helpline increased the professional training requirements for its counsellors including mandatory training in the symptoms of common mental health disorders. Over a number of years, counsellors were all required to achieve relevant tertiary-level counselling qualifications to support their practice. These changes in staff training and qualifications almost certainly resulted in counsellors increasingly recognising, responding to, and recording mental health concerns among children and young people contacting the service.
- During the 2000s, in tandem with the professionalisation of counsellors, the service expanded its provision of case management services to children and young people with more complex issues, such as ongoing mental health conditions. This service model, where individual children and young people can receive regular and at times intensive support from counsellors in relation to certain issues, inevitably results in increased numbers of contacts about those more complex issues. Further analysis of main concern data by client status as a *first time or repeat contact* reveals that much of the growth in numbers of contacts concerned about 'mental and/or emotional health/illness, including self-injury' and 'suicide' is attributable to repeat contacts, corresponding to individuals who are more likely to be receiving case management support.
- Over the last 20 years, and particularly over the last 10 years, there has been growing awareness and increasing acceptance of mental health issues in the community. This social and cultural change is likely to have increased children and young people's recognition of these issues in themselves and/or their willingness to seek help.

3.4.10 Summary

During 2016, Kids Helpline counsellors responded to 66,963 contacts from children and young people aged 5-25 years who were seeking help about specific problems or concerns (i.e. counselling contacts). The concerns most commonly discussed in counselling sessions, in order of relative frequency, mental health, family relationships, emotional wellbeing, suicide, dating and partner relationships, friend and peer relationships, child abuse, self-injury, bullying and study and education issues.

The concerns of children and young people contacting Kids Helpline in 2016 were found to vary:

- greatly according to contacts' age group and cultural background
- moderately according to their gender, and
- slightly according to their chosen medium of contact.

Remoteness classification appeared to have negligible association with the concerns for which children and young people were seeking counselling support.

The relative frequency with which Kids Helpline has been contacted about each of these issues over the last five years has remained constant. Delving into Kids Helpline's data archive, however, it is possible to observe considerable change as well as continuity in the frequency with which particular concerns have been brought for counselling. Most notably, there has been an increase in help-seeking related to mental and/or emotional health or illness, including self-injury, and suicide. It is likely, however, that these and other observed changes are related to innovations in the operation of Kids Helpline over the last two decades which have specifically facilitated help-seeking in these areas.

3.5 All concerns of children and young people who received counselling

Section 3.4 provided analysis of the *most commonly reported* concerns of children and young people contacting the Kids Helpline counselling and support service in 2016 and presented subgroup analysis to explore the priority concerns of 18 different subpopulations. Children and young people contact Kids Helpline about a very wide range of concerns, however, and focusing on the 10, 12 or 14 most common concerns can obscure that diversity and the emergence of trends in other areas of less common client concern.

To address this issue, the current section reports the frequency with which *every concern* in the Kids Helpline's concern classification system was raised by counselling contacts in 2016 and compares this with the frequency with which the concern was raised in 2014 and 2015.

This analysis is presented in Table 7. It shows:

- the complete list of 49 individual issues that counsellors use to classify the concerns of children and young people contacting the service for counselling support and the frequency with which each concern was discussed in counselling sessions in 2016
- aggregated totals for 11 *concern classes* which group a number of concerns together conceptually, thereby giving a sense of the overall frequency with which broad groupings of concern are arising in the population, and
- trend data for the last three years to enable analysis of short-term changes in the relative frequency with which different issues are being discussed in counselling contacts.

Counsellors can record up to four concerns each time a child or young person contacts the service. As a consequence:

- column percentages will sum to more than 100% for each year, and
- totals provided for *concern class* will be less than the sum of the individual concerns that make up that class due to the fact that multiple concerns within the class may have been identified in a single contact.

The key observation to be noted from the data in Table 7 is that the relative frequency with which children and young people have been contacting Kids Helpline about all these different concerns, and classes of concern, is remarkably consistent over the short-term. Based on the data presented in section 3.4.9 showing trends in the most common client concerns over 20 years, this observation is somewhat to be expected. The analysis in section 3.4.9 highlighted that trends in client concerns are difficult to identify in the short or medium term and a longer-term analysis is necessary. Unfortunately, owing to a major overhaul of Kids Helpline's concern classification system in 2012, the data presented in Table 7 are only available going back as far as 2012.

Table 7. Number and proportion of Kids Helpline counselling contacts aged 5-25 years with particular concerns and classes of concern – by year (2014-2016)¹

Concern and concern class	2014 (N = 69,959)		2015 (N = 70,210)		2016 (N = 66,963)	
	n	col. %	n	col. %	n	col. %
Mental health & emotional wellbeing	37,147	53.1%	36,343	51.8%	35,774	53.4%
Mental health concerns	16,181	23.1%	15,230	21.7%	15,709	23.5%
Emotional wellbeing	12,007	17.2%	12,939	18.4%	11,300	16.9%
Suicide-related concerns	8,310	11.9%	7,562	10.8%	8,750	13.1%
Self-injury/self-harm concerns	5,006	7.2%	4,466	6.4%	4,431	6.6%
Loss and grief	2,479	3.5%	2,268	3.2%	1,967	2.9%
Friends, peers, partners & dating	13,810	19.7%	14,136	20.1%	12,495	18.7%
Dating and partner relationships	7,364	10.5%	7,598	10.8%	6,718	10.0%
Friends/peer relationships	6,824	9.8%	6,881	9.8%	6,079	9.1%
Family relationships	13,096	18.7%	13,329	19.0%	12,523	18.7%
Child-parent relationships	9,170	13.1%	9,439	13.4%	8,907	13.3%
Other family relationships	2,809	4.0%	2,848	4.1%	2,673	4.0%
Changing family structures	1,685	2.4%	1,714	2.4%	1,644	2.5%
Parenting own children	240	.3%	193	.3%	160	.2%
Identity & self-concept	5,733	8.2%	5,371	7.6%	4,882	7.3%
Self-concept (global)	3,267	4.7%	2,835	4.0%	2,426	3.6%
Body image	1,066	1.5%	895	1.3%	839	1.3%
Sexual orientation	811	1.2%	923	1.3%	870	1.3%
Gender/sex identification	350	0.5%	434	0.6%	599	0.9%
Disability-related concerns	296	0.4%	347	0.5%	206	0.3%
Cultural identity	152	0.2%	139	0.2%	147	0.2%
Violence & abuse (non-family)	5,797	8.3%	5,913	8.4%	5,819	8.7%
Bullying - school related	3,275	4.7%	3,425	4.9%	3,217	4.8%
Bullying - other	563	0.8%	693	1.0%	650	1.0%
Sexual assault or abuse (non-family)	1,115	1.6%	854	1.2%	1,000	1.5%
Dating and partner violence	427	0.6%	517	0.7%	509	0.8%
Harassment and assault (non-sexual)	321	0.5%	309	0.4%	317	0.5%
Sexual harassment	220	0.3%	215	0.3%	251	0.4%
Child abuse & family violence	4,897	7.0%	5,147	7.3%	5,387	8.0%
Physical abuse	2,359	3.4%	2,654	3.8%	2,809	4.2%
Sexual abuse	1,179	1.7%	992	1.4%	943	1.4%
Emotional abuse	1,123	1.6%	1,272	1.8%	1,451	2.2%
Neglect of child	230	0.3%	242	0.3%	282	0.4%
Exploitation by family member	8	0.0%	2	0.0%	10	0.0%
Exposure to family violence	470	0.7%	490	0.7%	563	0.8%
Living-in-care issues	229	0.3%	241	0.3%	174	0.3%
School, education & work	4,327	6.2%	4,434	6.3%	3,949	5.9%
Study and education issues	3,319	4.7%	3,269	4.7%	2,807	4.2%
Employment issues	688	1.0%	788	1.1%	846	1.3%
School authority issues	377	0.5%	439	0.6%	359	0.5%
Physical or sexual health & development	3,800	5.4%	3,684	5.2%	3,341	5.0%
Physical health concerns	1,955	2.8%	1,734	2.5%	1,601	2.4%
Pregnancy-related concerns	852	1.2%	842	1.2%	804	1.2%
Sexual activity	792	1.1%	897	1.3%	778	1.2%
Physical/sexual development	139	0.2%	149	0.2%	120	0.2%
Contraception/safe sex	150	0.2%	126	0.2%	124	0.2%
Homelessness & basic needs assistance	1,798	2.6%	1,869	2.7%	1,888	2.8%
Homelessness	1,018	1.5%	1,045	1.5%	1,028	1.5%
Practical/material assistance	599	0.9%	667	1.0%	681	1.0%
Financial assistance/concerns	215	0.3%	208	0.3%	223	0.3%
Substance use, addictions & risk-taking	1,482	2.1%	1,449	2.1%	1,363	2.0%
Drug use	965	1.4%	909	1.3%	812	1.2%
Alcohol use	420	0.6%	411	0.6%	401	0.6%
Addictive behaviours (not drugs/alcohol)	122	0.2%	123	0.2%	152	0.2%
Physical risk-taking	36	0.1%	42	0.1%	20	0.0%
Gang/cult involvement	15	0.0%	22	0.0%	23	0.0%
Offending, abusive or violent actions	617	0.9%	693	1.0%	645	1.0%
Illegal/offending behaviour	326	0.5%	367	0.5%	283	0.4%
Abusive or violent actions	221	0.3%	282	0.4%	338	0.5%
Sexual violence/offending actions	78	0.1%	53	0.1%	33	0.0%

1. Up to four concerns per contact may be recorded. Totals provided for class of concern will be less than the sum of the individual concerns for that class due to multiple concerns within the class being identified in a single contact.

3.6 Referral to further support and duty-of-care actions

This section provides information about the number and type of referrals made in Kids Helpline counselling sessions in 2016 and also the number of attempts made by counsellors to contact external agencies to support or protect clients in 2016. This includes the number of duty-of-care interventions that counsellors initiated and the reasons for these interventions. Short-term trend analysis of external contacts is also provided to consider shifts in client need.

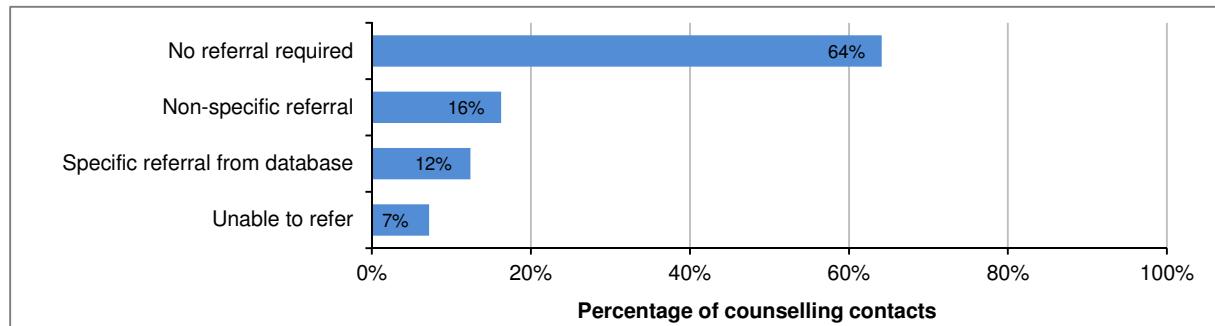
3.6.1 Referring children and young people to further support

Chapter 2 described the important role that Kids Helpline plays in providing a safety net for vulnerable children and young people in Australia. One way in which Kids Helpline performs this role is by actively connecting children and young people to specialist services they require. Like other child helplines around the world, Kids Helpline is not itself a specialist service but plays a critical role in facilitating children and young people's access to specialist services and support systems that may be confusing, alienating or even frightening for them to find and navigate alone. Counsellors help children and young people explore their needs, identify the right services for them using an extensive service provider database, and then actively connect them to those services where this is what the child or young person wants.

During 2016, more than one in three (36%) counselling contacts required referral for additional support, as indicated in Figure 22:

- 16% of counselling contacts were referred to a generalist service or practitioner, such as a doctor, school/guidance counsellor, local police or mental health worker
- 12% were referred to a specific service for further support, including crisis responses and three-way link-ups with both the client and another agency, and
- 7% required additional support but counsellors were unable to provide a referral. Reasons for this include the child or young person declining a referral, there being no suitable or appropriate service available to refer them to, or the child or young person finishing the session before the referral could be completed or discussed.

**Figure 22. Referral to other support – 2016 Kids Helpline counselling contacts aged 5-25 years
(N = 66,963)¹**



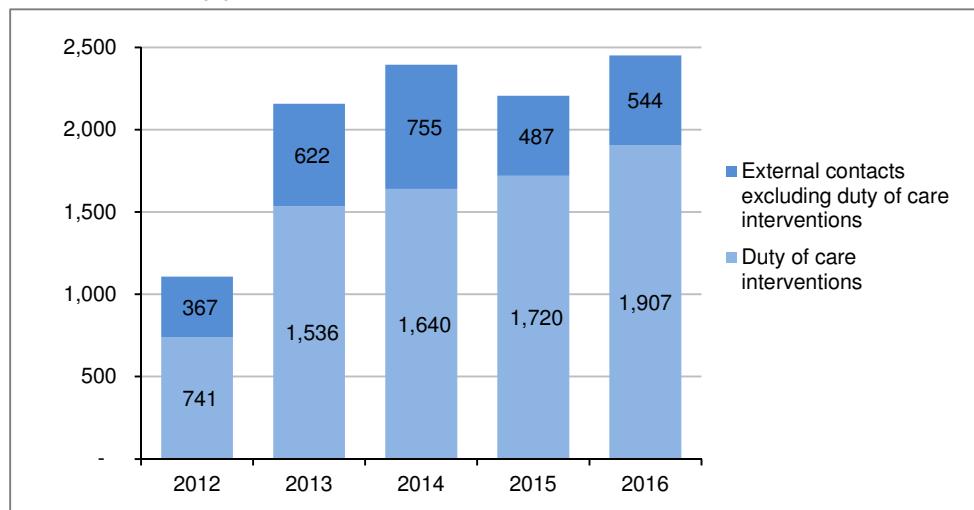
1. Percentages sum to less than 100% due to rounding.

3.6.2 External contacts and duty-of-care interventions

Another way in which Kids Helpline acts as a safety-net for vulnerable children and young people is by directly contacting external agencies to provide support to them when needed. In 2016, there were 2,451 records of counsellors attempting to contact an external agency, or agencies, to support a child or young person and/or to protect them if, at the time of the contact, they were experiencing significant harm or were at imminent risk of significant harm. More than three out of four of these records (1,907 or 78%) concerned a duty-of-care intervention to protect a child from significant harm, as shown in Figure 23.

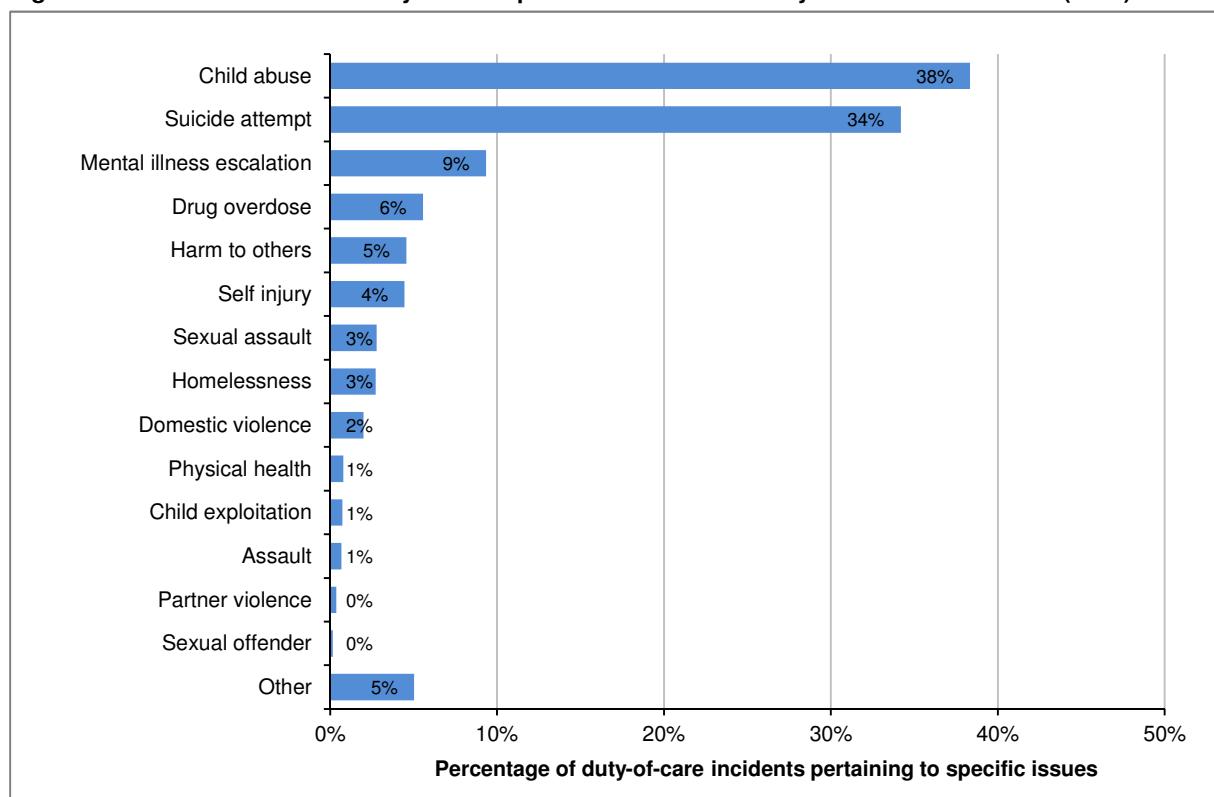
Figure 23 also shows the number of external contact attempts from 2012 to 2015. Over the full five-year period (2012 to 2016), there has been a 121% increase in external contact attempts by Kids Helpline counsellors. Duty-of-care interventions have increased by 157% over the same period.

Figure 23. Number of external contact attempts by Kids Helpline counsellors, including duty-of-care interventions – by year (2012-2016)



Counsellors are able to record up to four different reasons for a duty-of-care action being taken. Figure 24 shows the frequency with which different reasons for duty-of-care interventions were recorded in 2016. It reveals that child abuse and suicide attempts were by far the most common reasons for duty-of-care interventions in 2016 (38% and 34% respectively).

Figure 24. Reasons documented by Kids Helpline counsellors for duty-of-care interventions (2016)



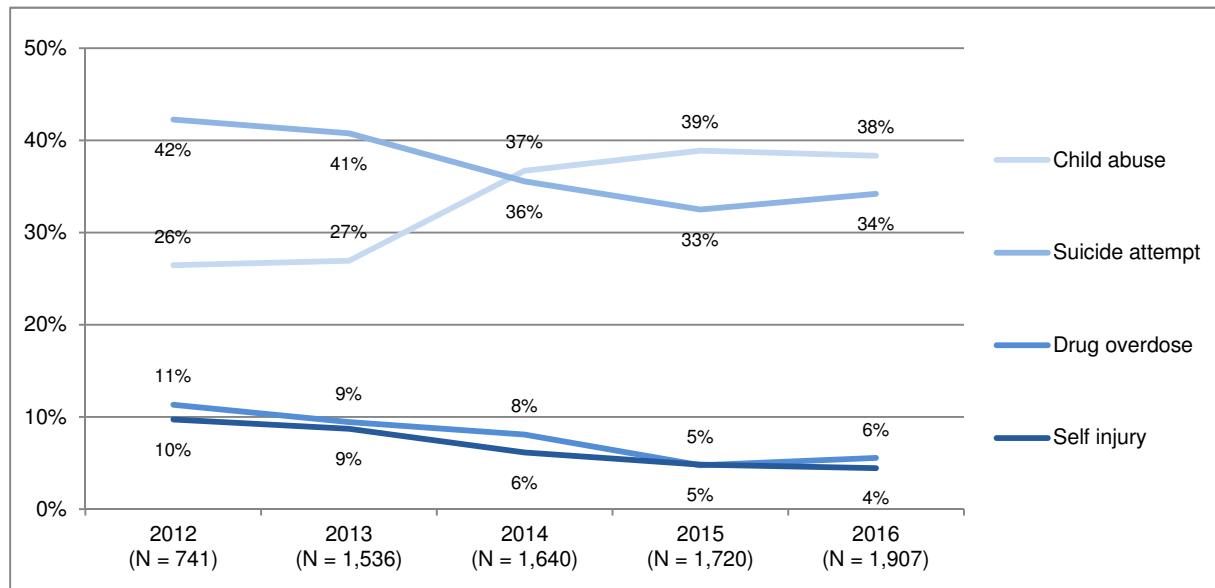
1. Up to four issues may be recorded for each duty-of-care intervention. Accordingly, percentages sum to more than 100%.

It can be interesting to know if the issues precipitating duty-of-care actions are changing over time. Analysis over the last five years of the 15 issue-categories shown in Figure 24 indicates that four have changed in relative frequency over this period – child abuse, suicide attempts, drug overdose and self-injury attempts. Figure 25 presents these trends in relative frequency for the four issues.

Key observations include the following:

- Child abuse has increased proportionally as a reason for initiating a duty-of-care action, from 26% in 2012 to 38% in 2016.
- Suicide attempts, however, have decreased relative to other issues, from 42% in 2012 to 34% in 2016.
- Drug overdose and self-injury have also decreased relative to other documented issues, from 11% in 2012 to 6% in 2016 for drug overdose, and from 10% in 2012 to 4% in 2016 for self-injury.

Figure 25. Relative frequency of particular reasons being documented by Kids Helpline counsellors for initiating duty-of-care interventions – by year (2012-2016)¹



1. Up to four issues may be recorded for each duty-of-care intervention. Accordingly, if all 15 issue-categories from Figure 24 were shown, percentages would sum to more than 100%. Percentages sum to less than 100%, however, because only four issue-categories are presented.

3.6.3 Summary

In 2016, more than one in three counselling contacts required referral for additional support. In addition, close to 50 times every week, Kids Helpline counsellors attempted to contact an external agency or agencies to support and/or protect a child or young person at risk of harm. Three out of four of these attempts concerned a duty-of-care intervention – an action to protect a child or young person experiencing, or at imminent risk of, serious harm. Child abuse and suicide attempts were by far the most common reasons for such interventions in 2016. Over the last five years, the number of duty-of-care interventions initiated by Kids Helpline counsellors has increased by 157%, and child abuse has overtaken suicide attempts as the most common reason for such interventions.

3.7 Counselling contacts about issues of contemporary social policy interest

Kids Helpline is frequently contacted for more in depth information about various concerns of children and young people where these issues are of contemporary social policy interest. Key among these issues at present are mental health, suicide, child abuse, self-injury and bullying. Table 8 restates the frequency with which children and young people sought help from Kids Helpline in relation to these issues in 2016.

When counsellors record a specific issue as a concern of a child or young person, they are required to specify additional information about that concern from a list of subcategories relevant to that concern type. This section presents frequency data on the subcategories of concern related to these five help-seeking issues. The analysis highlights that key aspects of the work of Kids Helpline in supporting children and young people with these issues are:

- crisis intervention
- harm minimisation and prevention, and/or
- supporting children and young people to manage significant and ongoing issues impacting on their health and wellbeing.

Table 8. 2016 Kids Helpline counselling contacts aged 5-25 years with specific self-identified concerns

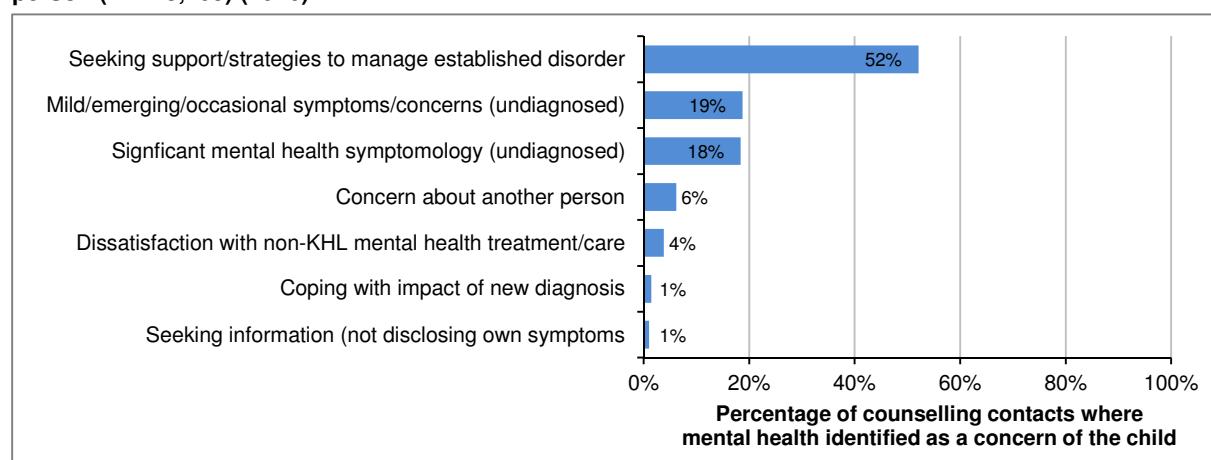
Particular concern	Number of contacts with this concern	% of counselling contacts (N = 66,963)
Mental health		
	15,709	23%
Suicide		
	8,750	13%
Child abuse		
	5,387	8%
Self-injury		
	4,431	7%
Bullying		
	3,828	6%

3.7.1 Mental health

In 2016, 15,709 counselling contacts (or 23%) from children and young people aged 5-25 years were in relation to mental health issues.

When counsellors record mental health as a concern of a child or young person contacting the service, they are required also to specify one of seven subcategories of concern relating to mental health. Figure 26 shows the frequency with which each subcategory was recorded in 2016.

Figure 26. Subcategory of concern where mental health identified as a concern of the child or young person (N = 15,709) (2016)¹



1. Percentages sum to more than 100% as more than one subcategory of mental health concern may be identified per contact.

Key observations from the data include the following:

- In half (52%) the contacts about mental health, the child or young person was seeking support or strategies to manage an *established disorder*.

- In almost two fifths (37%) of contacts about mental health, the child or young person was seeking help in relation to the symptoms of an *undiagnosed* mental health condition. Half of these cases (19%) concerned mild or occasional symptoms and half (18%) were about significant mental health symptoms.
- Around one in 20 (6%) contacts about mental health were in relation to the child or young person's concern for another person's mental health.

3.7.2 Suicide

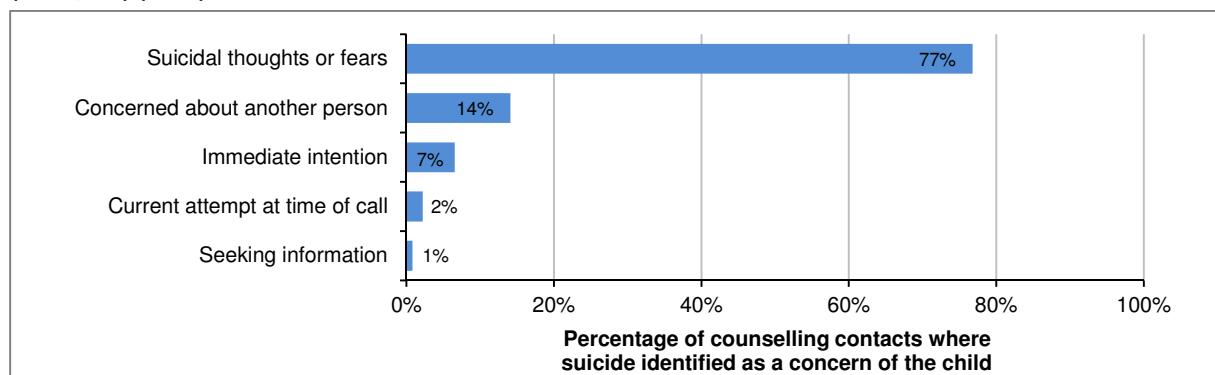
In 2016, 8,750 counselling contacts (13%) from children and young people aged 5-25 years were about suicide-related concerns.

When counsellors record suicide as a concern of a child or young person, they are required to specify one of five subcategories of concern relating to suicide. Figure 27 shows the frequency with which each subcategory was recorded in 2016 when suicide was a concern of the child or young person.

Key observations from the data include the following:

- The vast majority (77%) of these contacts were about the child or young person's own suicidal thoughts or fears.
- Roughly one in seven (14%) contacts was in relation to concern for another person's suicidal thoughts or feelings.
- Just less than one in 10 (9%) contacts concerned the child or young person's immediate intention to suicide or their attempt at suicide at the time of the call.

Figure 27. Subcategory of concern where suicide identified as a concern of the child or young person ($N = 8,750$) (2016)¹



1. Percentages can sum to more than 100% as more than one subcategory of suicide concern may be identified per contact.

3.7.3 Child abuse

In 2016, 5,387 counselling contacts (8%) from children and young people aged 5-25 years were about child abuse, domestic or family violence, or issues related to living in out-of-home care.

When counsellors record child abuse as a concern of a child or young person, they are required to specify the type of child abuse or concern, namely:

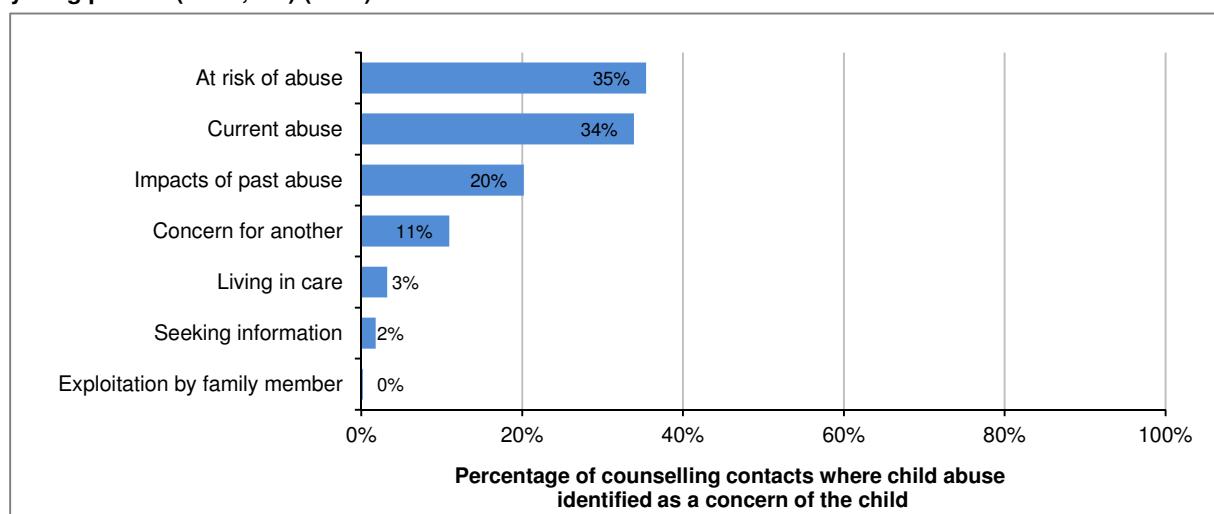
- physical abuse
- sexual abuse
- emotional abuse
- neglect
- exploitation by family member
- exposure to family violence, or
- living in care issues.

Each of these child abuse concerns has its own set of concern subcategories and counsellors are required to identify one of these each time a type of child abuse concern is identified. A number of the subcategories are consistent across child abuse concern types and can be aggregated for analysis purposes. Figure 28 presents this aggregated data for subcategories of concern about child abuse when a type of child abuse or living in care issue was recorded as a concern of the child or young person.

Key observations from the data include the following:

- Seven out of 10 (69%) of these contacts were about current abuse or risk of abuse.
- One in five (20%) contacts was in relation to the impacts of past abuse.
- One in 10 (11%) contacts was about concern for another person experiencing or at risk of abuse.
- One in 33 (3%) contacts was about an issue related to living in out-of-home care.

Figure 28. Subcategory of concern where a form of child abuse identified as a concern of the child or young person ($N = 5,387$) (2016)¹



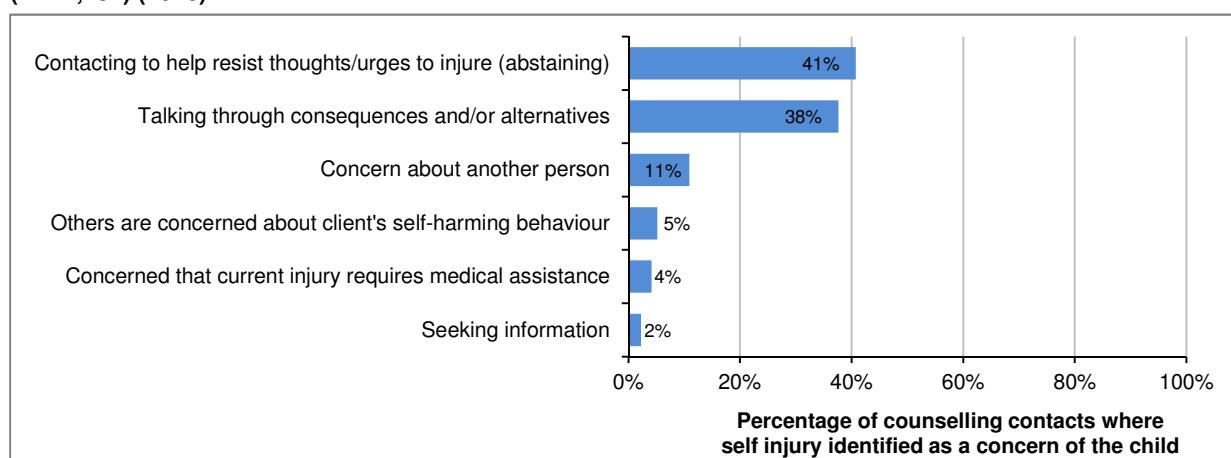
1. Percentages sum to more than 100% as more than one subcategory of child abuse concern may be identified per contact.

3.7.4 Self-injury

In 2016, 4,431 (7%) counselling contacts from children and young people aged 5-25 years were in relation to self-injury concerns.

When counsellors record self-injury as a concern of a child or young person, they are required to specify one of six subcategories of concern relating to self-injury. Figure 29 shows the frequency with which each subcategory was recorded when self-injury was recorded as a concern of the child or young person.

Figure 29. Subcategory of concern where self-injury identified as a concern of the child or young person ($N = 4,431$) (2016)¹



1. Percentages sum to more than 100% as more than one subcategory of self-injury concern may be identified per contact.

Key observations from the data include the following:

- In 78% of contacts about self-injury, the child or young person was contacting for help to avoid acts of self-injury.
- One in 10 (11%) contacts was about the child or young person's concern for another person.
- One in 20 (5%) contacts was in relation to other people's concern about the child or young person's self-harming behaviour.

3.7.5 Bullying

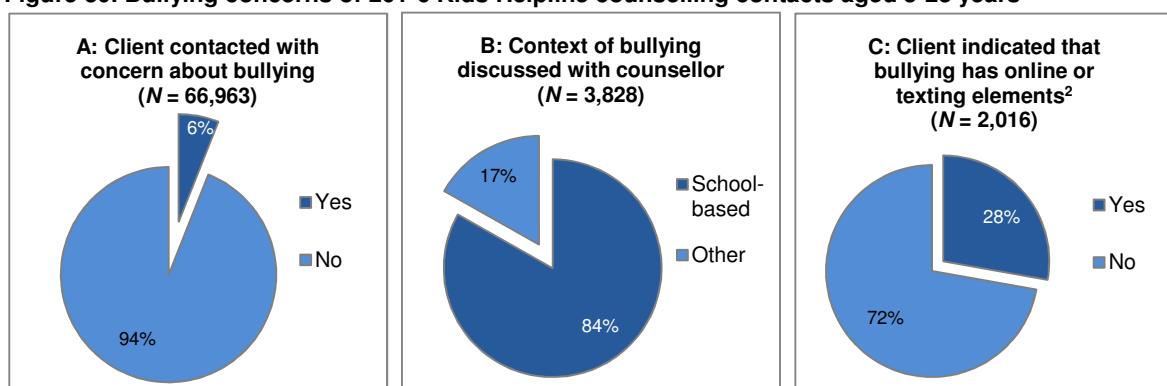
Within Kids Helpline's concern classification system, bullying is defined as:

Deliberate and ongoing harassment and/or assault of one person by another or group of others. Includes many forms of harassment and abuse that are intended to harm and create an imbalance of power in relationships. May include any of the following: verbal abuse, physical aggression, physical assault, physical gestures, intimidation, threats of personal harm, exclusion or isolation, spreading rumours, extortion, name calling, damage to personal property. May include contacts from clients concerned about impact of past bullying. May include use of the internet, social networking sites, mobile phones and other digital devices to verbally abuse or harass.

Figure 30 summarises data about bullying concerns responded to by Kids Helpline in 2016. Part A indicates that 3,828, or 6%, of counselling contacts from children and young people aged 5-25 years were about bullying. Part B shows that of these, 3,217 or 84% were classified by counsellors as instances of 'school-based bullying', and 650 or 17% were classified as 'other bullying'.

To gauge the prevalence of *cyberbullying* concerns among Kids Helpline contacts, counsellors began collecting information from 1 July 2016 about whether or not the child or young person indicated that the bullying included an online or texting element. Part C of Figure 30 shows that of the 2,016 contacts received about bullying between July and December 2016, 560 or 28% indicated that the bullying included online or texting aspects (i.e. cyberbullying).

Figure 30. Bullying concerns of 2016 Kids Helpline counselling contacts aged 5-25 years



1. Percentages sum to more than 100% as more than one bullying concern may be recorded in a single contact.

2. Data on cyber bullying only collected from 1 July 2016, so these data pertain to the n = 2,016 bullying concerns raised by counselling contacts in the second half of the year only.

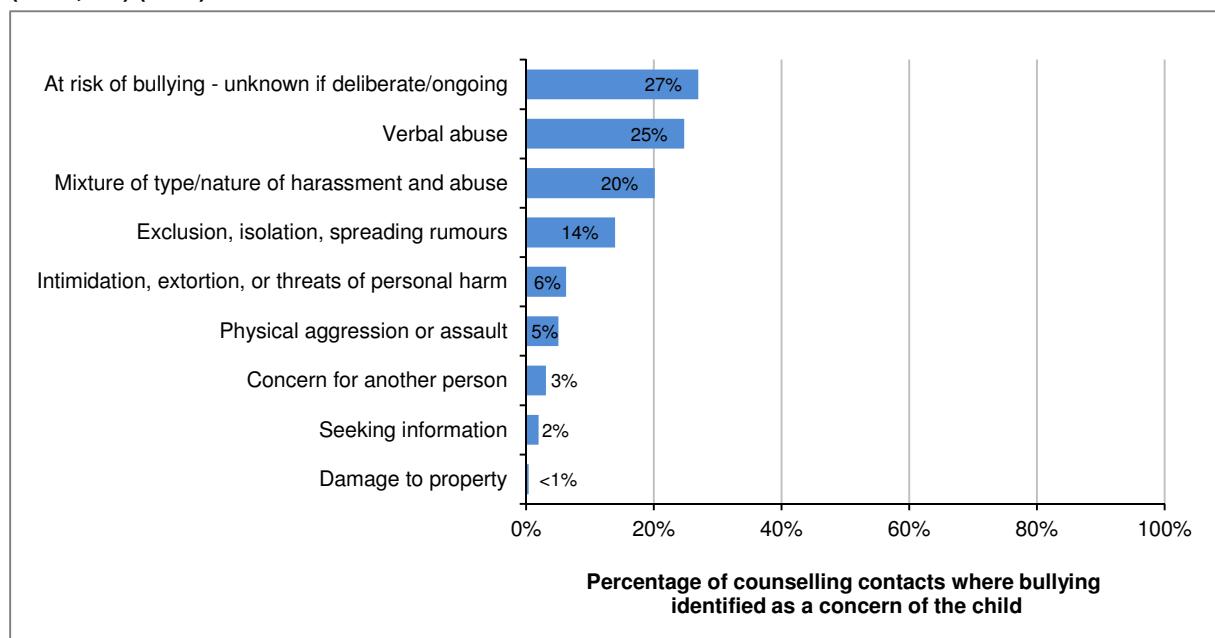
When counsellors record bullying (school-based or otherwise) as a concern of a child or young person, they are required to specify one of nine subcategories of concern relating to bullying. Figure 31 shows the frequency with which each subcategory was recorded in 2016 when bullying was a concern of the child or young person.

Key observations from the data include the following:

- In 27% of contacts about bullying, the child or young person was assessed as *at risk of bullying* because it was not established whether the behaviour they were subject to was deliberate or ongoing in nature.
- A further 3% of bullying contacts were about concern for someone else and 2% were for the purpose of gathering information.

- Seven out of 10 (70%) contacts, however, were from children and young people experiencing some form of bullying according the Kids Helpline definition:
 - in 25% of contacts, the bullying was described as *verbal abuse*
 - in 14% of contacts, the bullying was characterised as *exclusion, isolation and/or spreading of rumours*
 - one in 20 contacts classified the bullying as *intimidation, extortion or threats of personal harm* (6%) and a similar proportion (5%) of cases were characterised as *physical aggression or assault*, and
 - in 20% of contacts, the bullying took a variety of these forms.

Figure 31. Subcategory of concern where bullying identified as a concern of the child or young person ($N = 3,828$) (2016)¹



1. Percentages sum to more than 100% as more than one bullying concern may be recorded in a single contact.

3.7.6 Summary

This section has presented more in-depth information about the help-seeking of children and young people contacting Kids Helpline for support in relation to five specific issues – mental health, suicide, child abuse, self-injury and bullying. The analysis highlights Kids Helpline's substantial and multifaceted role in protecting children and young people from harm, through:

- crisis intervention
- harm minimisation and prevention, and/or
- supporting children and young people to manage significant and ongoing issues impacting on their health and wellbeing.

3.8 Counselling contacts about cyber-safety issues

3.8.1 Enhancing data collection on cyber-safety issues

Chapter 2 noted that Kids Helpline is playing a growing contemporary role in protecting children and young people from online harm. To this end, Kids Helpline has formed an active partnership with the Australian Office of the Children's eSafety Commissioner. This partnership ensures that children and young people who visit the eSafety website with cyber-safety concerns can receive priority access to Kids Helpline web counselling. The eSafety Commission in turn has provided Kids Helpline counsellors with specialist training in responding to cyber-safety issues, including procedures for raising formal complaints with relevant organizations and internet service providers where a client seeks this kind of support.

Kids Helpline has also been working to protect children from online harm through the development of a digital safety curriculum as part of the Kids Helpline @ School program (see Chapter 5). This has been made possible by the financial support of Kids Helpline's corporate partner, Optus.

To support Kids Helpline's growing work in this area, it was decided that more information was needed on the frequency of cyber-safety issues being discussed in counselling sessions. So, from 1 July 2016, Kids Helpline counsellors began recording, for every counselling session, whether or not the child or young person indicated concern, worry and/or feeling unsafe as a result of online or texting activity. 'Online or texting activity' that falls into Kids Helpline's provisional definition of 'cyber-safety issues' includes (but is not limited to):

- receiving unwanted contact
- participating in sexting
- bullying
- uncontrolled/excessive use of internet, e.g. gaming, social networking, etc.
- viewing of disturbing content
- disclosure of personal information (passwords, address, etc.)
- harassment/blackmail/solicitation/suspected grooming, and/or
- the client's own online behaviour ('digital reputation').

While this definition is quite broad, the estimate of the prevalence of these issues in counselling sessions will be conservative as counsellors do not ask children and young people for this information directly. Rather, they are instructed to record disclosure by the child or young person in the course of the counselling session of any level of concern or worry about these types of activities. They are asked to include cases where the client's cyber concern relates to the past but was discussed in the current session. However, when online or texting activity is reported by a child or young person *without* indications of concern or worry, counsellors are instructed to exclude these cases from the record of contacts with cyber-safety issues.

3.8.2 Frequency of cyber-safety issues being discussed in counselling contacts

Between July and December 2016, a total of 33,525 counselling contacts were responded to. In 1,566 of these sessions, or 5%, the child or young person disclosed experiencing cyber-safety issues to the counsellor (Figure 32).

Compared with other counselling contacts, those where cyber-safety issues were disclosed were more likely to be from children and young people aged 13-18 years (68% c.f. 59%) and less likely to be from young people aged 19-25 years (19% c.f. to 28%) (Figure 33). This observation may suggest that children and young people's vulnerability to cyber-safety issues is greater in the teenage years. Alternatively, it may suggest that teenagers are more willing to seek help from Kids Helpline in relation to these issues than other age groups.

Figure 32. Percentage of Kids Helpline counselling contacts aged 5-25 years – by disclosure of cyber-safety issues (N = 33,525) (July-December 2016)

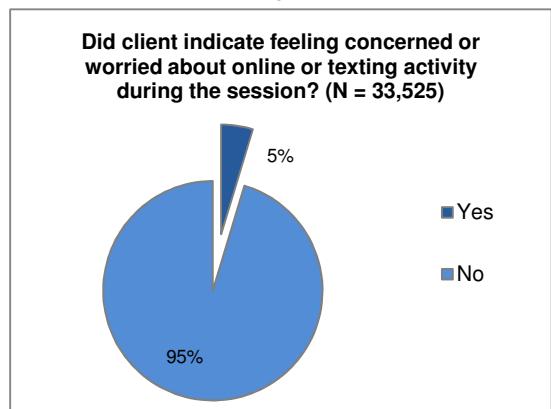
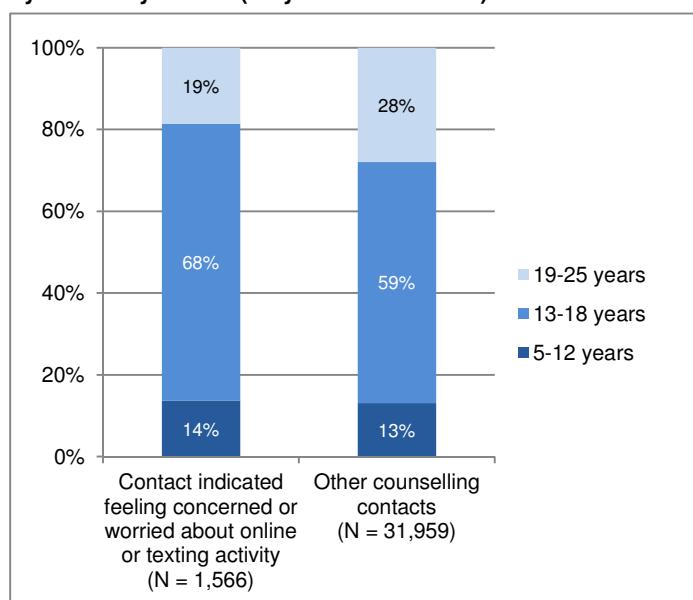


Figure 33. Age group of Kids Helpline counselling contacts by whether or not they disclosed experiencing cyber-safety issues (July-December 2016)



3.8.3 Help-seeking concerns of contacts disclosing cyber-safety issues

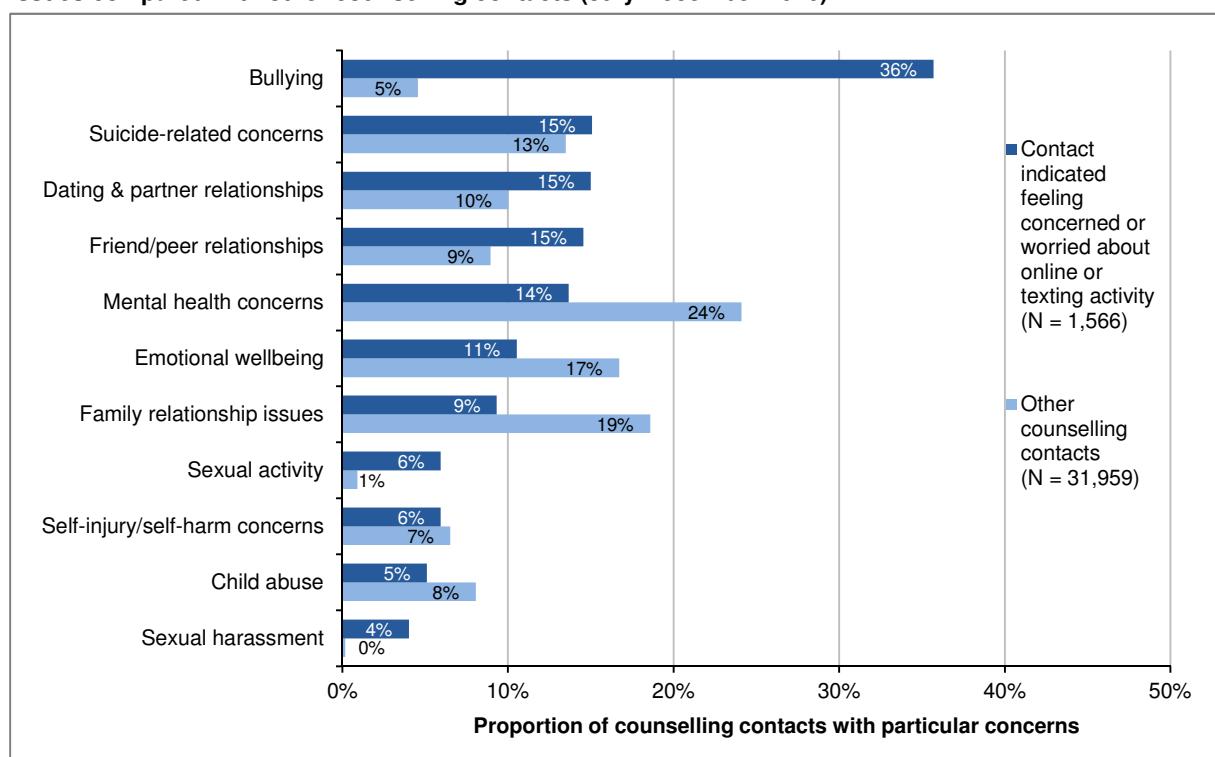
Counsellors are not currently asked to record the nature of the child or young person's cyber-safety worries, although some will have recorded this in open-ended contact notes. More systematic classification of these issues may be undertaken in the future. In the interim, however, in order to glean some insight into the nature of cyber-safety issues that children and young people are experiencing, it may be helpful to look at the most commonly recorded help-seeking concerns of children and young people in counselling sessions where cyber-safety issues are disclosed and compare this with the frequency with which these issues are the focus in other counselling contacts.

Figure 34 presents this analysis. It reveals the following:

- By far the most common help-seeking concern of those disclosing cyber-safety issues was bullying, with more than one in three (36%) of these counselling sessions focusing on bullying. By comparison, bullying was recorded as a concern of the child or young person in 5% of other counselling sessions.
- In addition to bullying, counselling sessions where cyber-safety issues were disclosed were more likely than other counselling sessions to be focused on the following issues:
 - dating and partner relationships (15% c.f. 10%)
 - friend and peer relationships (15% c.f. 9%)
 - sexual activity (6% c.f. 1%), and
 - sexual harassment (4% c.f. <1%).

- Counselling sessions where cyber-safety issues were *less likely* than other counselling sessions to be focused on the following issues, however:
 - mental health issues (14% c.f. 24%)
 - emotional wellbeing (11% c.f. 17%), and
 - family relationship issues (9% c.f. 19%).
- These observations may suggest the following:
 - that online or electronic bullying (cyberbullying) is the most common type of cyber-safety issue worrying children and young people contacting Kids Helpline
 - that cyber-safety issues are experienced more commonly in the context of peer and romantic relationships than family relationships, and
 - that sexual activity may be a particular domain for cyber-safety worries among those contacting Kids Helpline for support.

Figure 34. Most frequently recorded concerns of counselling contacts indicating worry about cyber-safety issues compared with other counselling contacts (July-December 2016)¹



1. Up to four concerns per contact may be recorded. Accordingly, percentages may sum to more than 100%.

3.8.4 Summary

To support its growing role in responding to the cyber-safety concerns of children and young people, Kids Helpline expanded its data collection in 2016 to gauge the frequency of cyber-safety issues being discussed in counselling contacts. In the first six months of data collection, cyber-safety issues were disclosed by children and young people once in every 20 counselling sessions. The help-seeking concerns of children and young people in these contacts were found to differ considerably from those recorded for children and young people in other counselling contacts. These differences may offer insight into the nature of children and young people's cyber-safety worries. In counselling sessions where cyber-safety concerns were disclosed, bullying was by far the most common issue for which children and young people sought help, suggesting that online or electronic bullying (cyberbullying) is the most common type of cyber-safety issue worrying children and young people contacting Kids Helpline.

3.9 Counselling contacts where significant mental health issues are present

Chapter 2 overviewed the complex and multifaceted role that Kids Helpline plays in the mental health system. It observed that children and young people with mental health problems are vulnerable to falling through numerous cracks in a system oriented primarily toward adults and described some of the ways Kids Helpline bridges these gaps and ensures there is 'no wrong door' into mental health care.

The purpose of this section is to:

- provide some insight into the current frequency with which significant mental health issues are being observed or disclosed in counselling sessions
- consider trends in the frequency with which these issues are being observed or disclosed in counselling sessions over the short or medium term, depending on the availability of data, and thereby also
- draw attention to how much of Kids Helpline's work pertains to supporting children and young people dealing with significant mental health difficulties.

3.9.1 Current period

When a child or young person contacts Kids Helpline for counselling support, counsellors are required to record whether or not:

- mental health issues were indicated in the session or known to be previously assessed as present for the client (this includes clients known to be diagnosed with a mental health disorder *and* those clients that do not yet have a diagnosis but are assessed by a Kids Helpline counsellor to be experiencing or describing symptoms indicative of a mental health disorder)
- the client indicated during the session experiencing current or recent issues with self-injury² including the urge to injure themselves, and/or
- the client disclosed thoughts about killing themselves during the session.

These issues are recorded by counsellors in addition to the self-identified concerns of the child or young person. At times, children and young people experiencing these significant mental health issues will not identify them as their reasons for contacting the service, and yet these issues are important indicators of the child or young person's wellbeing and needs for support. This is why counsellors make these assessments wherever possible.

In terms of the validity of these assessments, it is worth noting that Kids Helpline exclusively employs tertiary-qualified counsellors who have been trained in recognising the symptoms of common mental health disorders.

Table 9 summarises the number and proportion of counselling contacts in 2016 where the child or young person was experiencing a mental health disorder, issues with self-injury or suicidal ideation. It also indicates the number and proportion of counselling sessions where the child or young person was assessed to be experiencing *at least one* of these three issues.

² Kids Helpline defines self-injury as deliberate, non-life-threatening, self-inflicted bodily harm with the intent to cause physical harm to oneself in ways that are not intended to end one's life. This could include cutting, hitting a part of the body on a hard surface, punching, hitting or slapping oneself, burning skin, biting or overdosing on substances believed to be non-lethal. Self-injury *does not include* deep slashing; self-poisoning or overdoses of substances believed by the young person as likely to be fatal; suicide attempts; deliberate car crashing; ear or nose piercing; professional tattooing; nail-biting; head-shaving; intentional harm to emotions or feelings; or starving oneself, such as in relation to an eating disorder. Kids Helpline recognises that self-injury is different from suicidal behaviour, but some young people who self-injure are also suicidal or can become suicidal.

The data in Table 9 reveal that:

- in two out of five counselling contacts (40%) in 2016, the child or young person was identified as experiencing a mental health disorder, or symptoms indicative of a mental health disorder
- in 14% of counselling contacts, the child or young person disclosed current thoughts of suicide to the counsellor
- in 12% of counselling contacts, the child or young person disclosed experiencing current difficulties with self-injury, and
- in almost half of all counselling contacts (45%), the child or young person was assessed as experiencing at least one of these three issues.

Table 9. Number and percentage of 2016 Kids Helpline counselling contacts aged 5-25 years assessed by counsellors to be experiencing particular issues

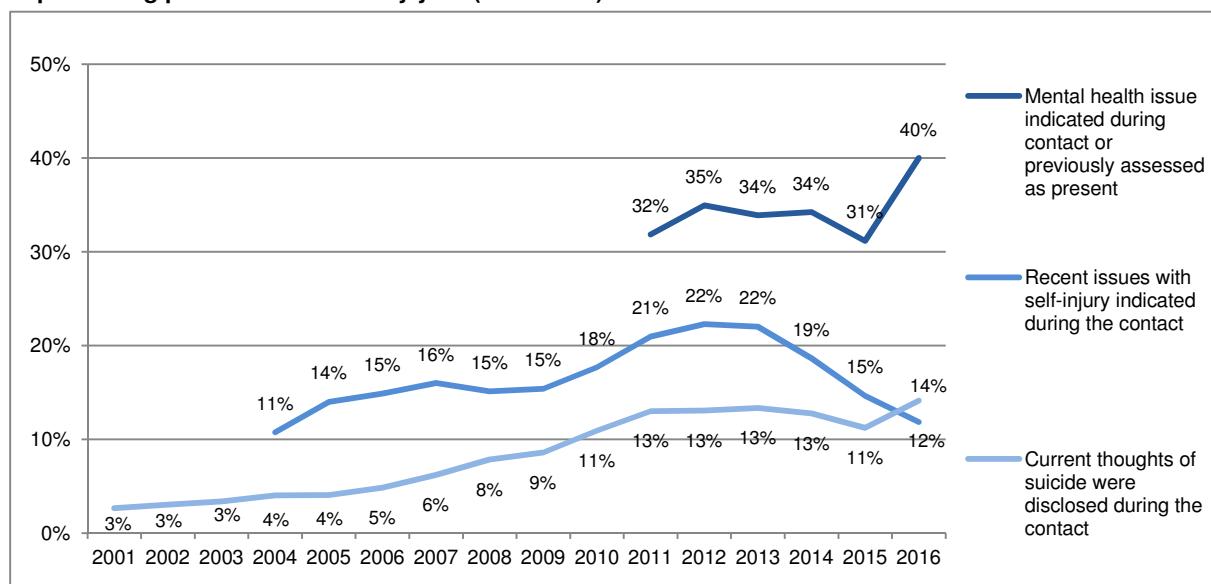
Issue being experienced by child or young person as assessed by counsellor	n	% counselling contacts (N = 66,963)
Has mental health disorder	26,787	40%
Has current thoughts of suicide	9,453	14%
Has current difficulties with self-injury	7,913	12%
Has at least one of the above issues	30,254	45%

3.9.2 Trend analysis

Figure 35 presents trend analysis of the relative frequency with which each of these issues has been observed or disclosed in counselling contacts over the short or medium term depending on the availability of data. Key points to note from Figure 35 include the following:

- Mental health.* Data on mental health issues have been collected since 2011. From 2011 to 2015, the proportion of counselling sessions in which the child or young person was assessed to have a mental health disorder was around one in three. However in 2016, the frequency with which mental health issues were assessed by counsellors as being present increased to 40% of counselling contacts.
- Self-injury.* Data on self-injury issues have been collected since 2004. From 2004 to 2012, the proportion of counselling sessions in which the child or young person indicated current difficulties with self-injury doubled, from 11% in 2004 to 22% in 2012. Since 2013, however, there has been a steady decline in this proportion. In 2016, the proportion of counselling sessions in which self-injury issues were disclosed by the child or young person was 12%, the second lowest figure recorded since Kids Helpline began collecting data on self-injury.
- Suicidal thoughts.* Data on suicidal ideation have been collected since 2001. Figure 35 shows a gradual but steady increase in the proportion of counselling contacts where the child or young person disclosed suicidal thoughts to the counsellor, from 3% in 2001 to 14% in 2016.

Figure 35. Percentage of Kids Helpline counselling contacts aged 5-25 years assessed by counsellors to be experiencing particular issues – by year (2001-2016)



3.9.3 Summary

Close to half of Kids Helpline counselling contacts in 2016 were experiencing at least one of the following issues: a mental health disorder, difficulty with the impulse to self-injure, and/or current thoughts of suicide. Over the period for which data are available, there would appear to be a slow but steady increase in the proportion of counselling contacts in which children and young people are disclosing suicidal ideation or being assessed as having a mental health disorder; however, the proportion of counselling contacts in which children and young people are disclosing self-injury issues would appear to be decreasing.

In interpreting these figures, it is important to note that Kids Helpline offers children and young people with mental health issues ongoing counselling and support where they would like this. Accordingly, the increase in the frequency with which these issues are observed in counselling contacts may reflect patterns of recurrent service use by this group of clients.

3.10 Service demand and responsiveness

In order to continue to meet the needs of children and young people who contact the counselling and support service, it is important to understand patterns of service demand and responsiveness and changes over time. Service demand and responsiveness are complex concepts in this service environment. Accordingly, four inter-related dimensions of service demand/responsiveness are considered in this section in order to provide a complete and balanced picture. These dimensions are as follows:

- the number of attempted and answered contacts and corresponding response rates for each contact medium
- the length of time clients waited to be answered by a counsellor in each medium
- demand for particular types of support (i.e. counselling support or information/referral/other support), and
- time spent by counsellors in direct client contact.

Data are presented for 2016 but also over five or 10 years where necessary to demonstrate emerging trends.

Taken together, the data presented in this section indicate significant shifts over the last decade in demand for the counselling and support service. The period has seen a gradual shift in client demand away from engagement by telephone and email toward web chat. It has also seen an overall reduction in the number of contacts being responded to, although the total time invested by the service in responding to the needs of children and young people has grown considerably. This is owing to the fact that an increasing number and proportion of clients are requiring more intensive counselling-type responses and because the average length of these sessions is steadily increasing. The growing number and proportion of web chat contacts responded to is also contributing to upward pressure on counsellor time as these sessions are considerably longer on average than phone or email contacts.

With a deliberate decision being made by the service in recent years, and most notably during 2016, to expand client access to counselling and support via web chat – a mode of service delivery considerably more resource-demanding than telephone or email – service responsiveness can be seen to have both improved and declined as a result. While the number of answered web chat contacts has grown considerably, wait times for web calls being answered by a counsellor have reduced substantially, and response rates for web chat have improved, this has come at the cost of fewer overall service responses, lower overall response rates and, in 2016, increased wait times for phone contacts. The reduction in service responses has primarily occurred, however, in relation to non-counselling-type responses and closer analysis of the decrease in these contacts suggests that much of this can be explained by improvements in therapeutic practice with frequent callers facilitated by innovations in data management and case management.

3.10.1 Attempted/answered contacts and response rates by medium of contact

Current period

Table 10 summarises data from Kids Helpline's telephone, email and web chat data systems in relation to attempted and answered contacts from children, young people and other members of the community in 2016. In particular, it presents the:

- number of attempted and answered contacts for each of the three contact media (phone, web chat, and email) and aggregates these for 'all media'
- breakdown of attempted and answered contacts and response rates for each state estimated from the best available information about contacts' state of residence, and
- breakdown of attempted and answered phone contacts and response rates according to whether or not calls were made from mobile phones or landlines.

It is important to note in interpreting these data that during early 2016, Kids Helpline expanded access to web chat for children and young people in two ways:

- *hours of service delivery were extended* – originally web chat was only available from 12pm to 10pm Monday to Friday and from 10am to 10pm on weekends; from early 2016, hours were extended gradually to span 8am to midnight seven days a week, and
- *the Kids Helpline website was upgraded* in late February to optimise its usage by mobile devices, including the introduction of a new interface for the delivery of web counselling.

Key observations from Table 10 about service demand and response in 2016 include the following:

- 356,595 attempts were made to contact the Kids Helpline counselling and support service, 78% of these by phone (276,960), 18% by web chat (65,954) and 4% by email (13,681).
- Of these attempts 181,165 were answered by counsellors, corresponding to an overall response rate of 51%.
- The number of attempted and answered contacts varies considerably from state to state reflecting the relative size of the states. New South Wales recorded the largest number of attempted and answered contacts, while the Northern Territory recorded the lowest number of both types of contacts.
- Response rates across states in 2016 ranged from 57% in Tasmania to 45% in the Northern Territory.
- Mobile calls made up 83% of phone attempts, while landlines made up 17%. Response rates for landlines were higher than for mobiles (55% c.f.48%).

Trend data

Attempted contacts (service demand)

Figure 36 provides a detailed comparison of attempted contacts over the last five years by medium of contact. It shows the following:

- Attempts to contact the service from 2012 to 2016 have reduced overall by 22%.
- The reduction in demand pertains to phone attempts and email attempts only, which reduced by 30% and 42% respectively from 2012 to 2016.
- Web chat attempts, on the other hand, increased by 54% across the same period.
- Notwithstanding the growth in web attempts, phone continues to be the medium by which the great majority of attempts are made (78% of attempts in 2016 came via phone).

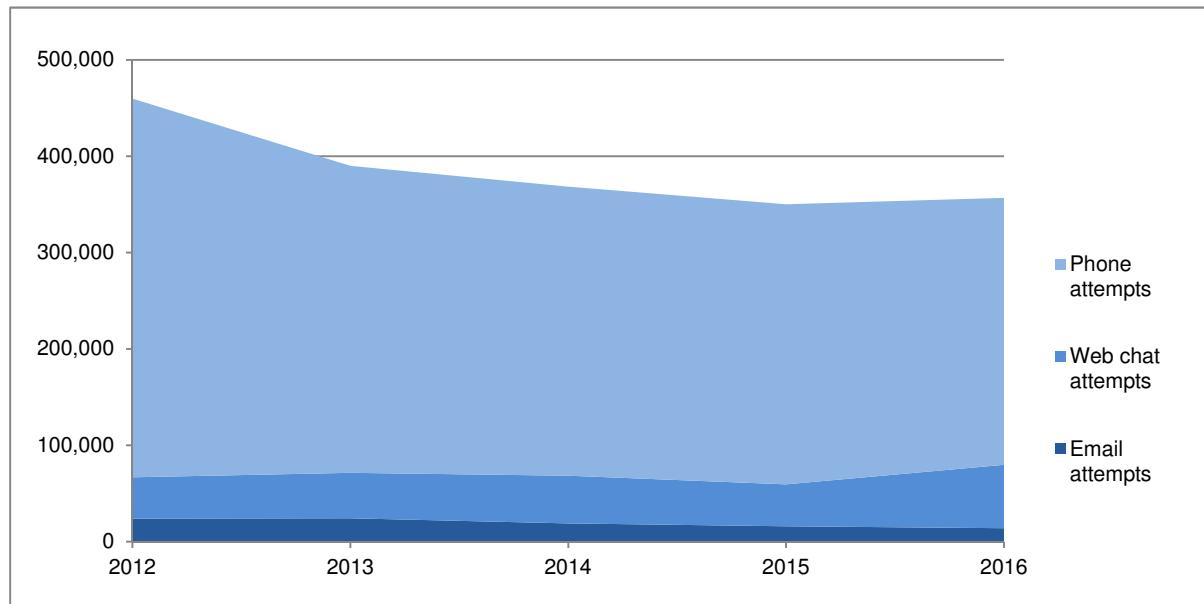
Table 10. Attempted and answered contacts – by medium, state and year of contact¹

Medium of contact	2016		
	Attempts	Answered	Response rate
Phone			
ACT	4,841	2,615	54%
NSW	99,894	49,003	49%
NT	2,955	1,303	44%
QLD	54,824	26,133	48%
SA	18,106	9,054	50%
TAS	6,602	3,711	56%
VIC	65,232	32,820	50%
WA	24,507	11,079	45%
All States	276,960	135,719	49%
Ph. type			
Mobile	229,966	109,870	48%
Landline	46,994	25,849	55%
Web chat			
ACT	1,506	699	46%
NSW	21,412	10,355	48%
NT	272	124	46%
QLD	12,045	5,894	49%
SA	4,268	2,180	51%
TAS	1,283	597	47%
VIC	19,555	9,392	48%
WA	5,614	2,524	45%
All States	65,954	31,765	48%
Email			
ACT	536	536	100%
NSW	3,655	3,655	100%
NT	61	61	100%
QLD	2,767	2,767	100%
SA	739	739	100%
TAS	365	365	100%
VIC	4,087	4,087	100%
WA	1,470	1,470	100%
All States	13,681	13,681²	100%
All media			
ACT	6,883	3,850	56%
NSW	124,960	63,012	50%
NT	3,288	1,489	45%
QLD	69,636	34,794	50%
SA	23,113	11,973	52%
TAS	8,250	4,673	57%
VIC	88,874	46,299	52%
WA	31,591	15,074	48%
All States	356,595	181,165	51%

1. The data presented in this table are sourced from Kids Helpline phone, web chat and email systems databases.

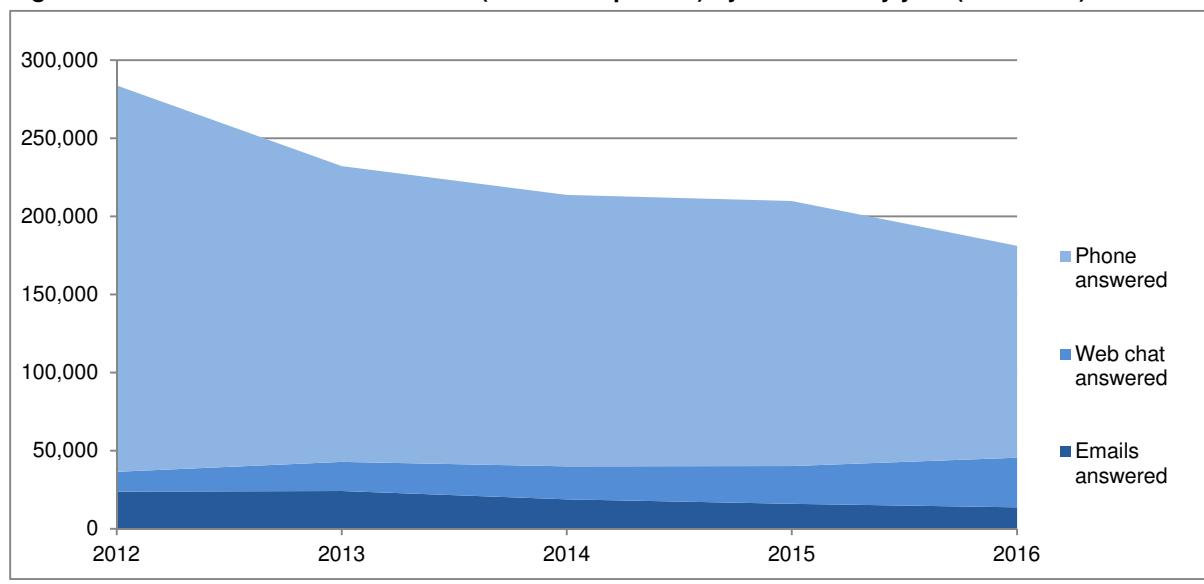
2. In addition to 13,681 emails received and responded to in 2016, 413 outreach emails were sent.

Figure 36. Number of attempted contacts (demand) by medium – by year (2012-2016)¹



1. The data presented in this figure are sourced from Kids Helpline phone, web chat and email systems databases.

Figure 37. Number of answered contacts (service responses) by medium – by year (2012-2016)¹



1. The data presented in this figure are sourced from Kids Helpline phone, web chat and email systems databases.

Answered contacts (service responses)

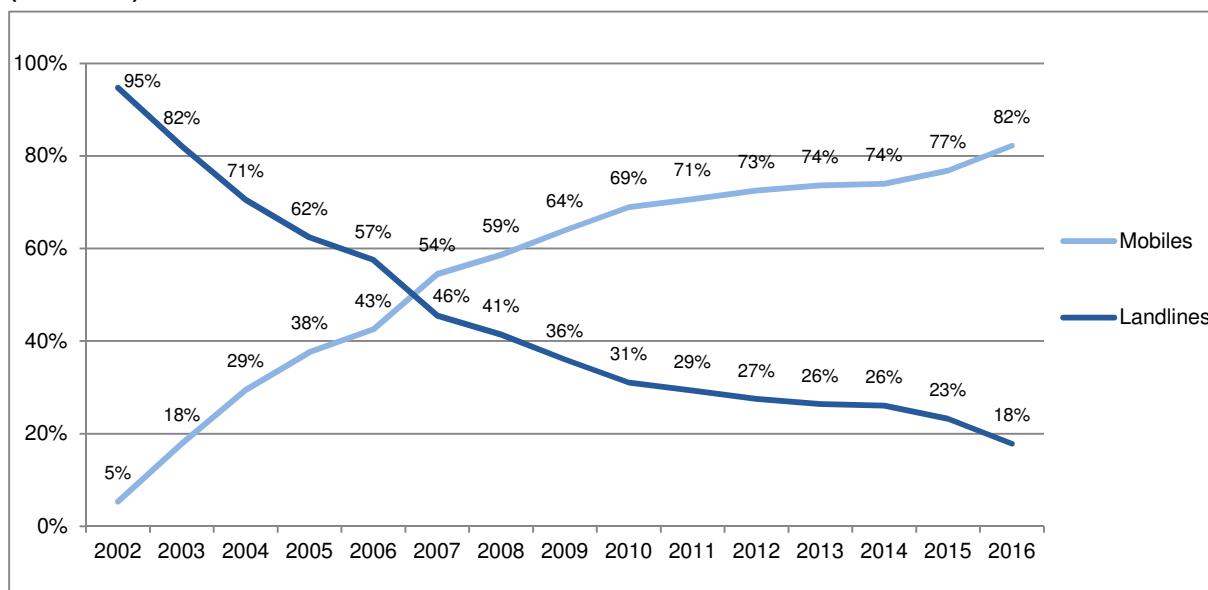
Service responsiveness has largely mirrored these shifts in demand. Figure 37 shows the number answered of contacts (service responses) over the last five years by medium of contact. It reveals the following:

- Answered contacts have decreased overall by 36% from 2012 to 2016.
- The reduction in service responses relates to phone and email responses only, which reduced by 45% and 42% respectively from 2012 to 2016.

- The reduction in service responses relates to phone and email responses only, which reduced by 45% and 42% respectively from 2012 to 2016.
- Web chat responses, by contrast, increased by 151% across the period.
- Notwithstanding the growth in web chat responses, the greatest number of client responses are still phone responses (75% of answered contacts in 2016 were phone contacts).

Looking more closely at phone responses, it is possible to see in 2016 the continuation of a long-term trend in client engagement – away from contacting via landlines and towards mobile phones. This trend is represented in Figure 38 which shows the percentage of answered phone contacts over the last 15 years by phone type. In 2002, almost all telephone contacts (95%) responded to were from landlines with 5% coming via mobile phone. In 2016, the vast majority (82%) came via mobile phone. This trend reflects broader social changes over the last two decades in the availability and preferential use of mobile technology.

Figure 38. Percentage of Kids Helpline phone contacts (all ages) contacting via landline or mobile – by year (2002-2016)¹



1. Data presented in this figure are sourced from Kids Helpline's *Record-a-Contact* database. From 2002 to 2016, data on phone type were available for 86% of Kids Helpline phone contacts. Note that proportions for 2016 are slightly different to that for mobile/landline answered phone calls reported in Table 10. This is owing to the fact that data in Figure 3 are taken from the client contact database (a slightly incomplete record of all contacts received). The data in Table 10 is taken from Kids Helpline's telephone system database.

Response rates

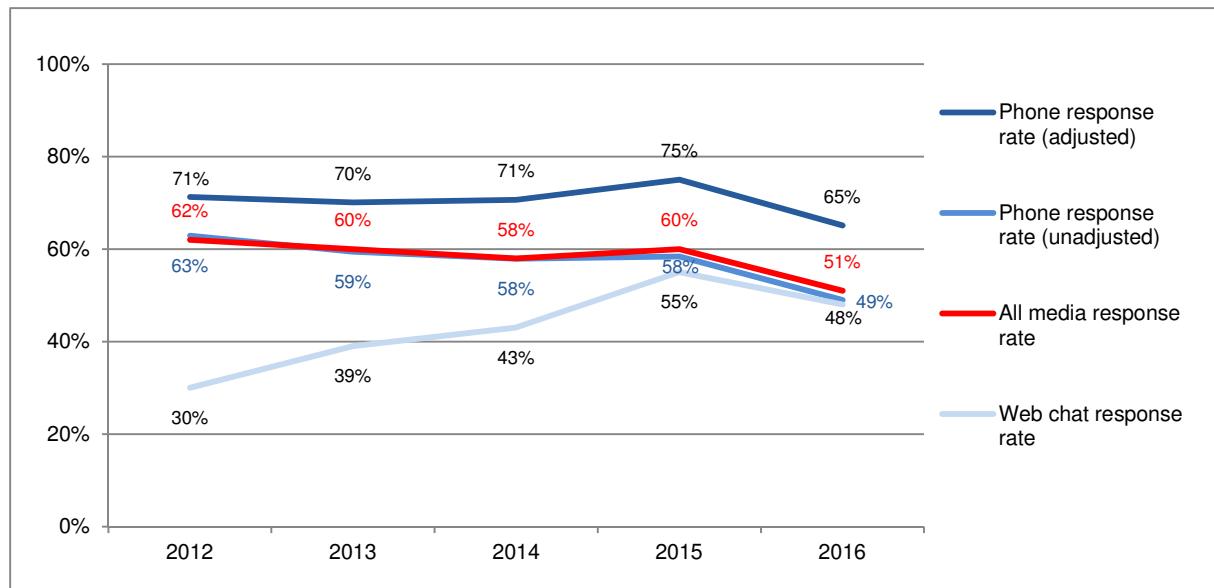
Figure 39 presents trend data for the last five years in relation to response rates broken down by medium of contact. All emails received are responded to, so email response rates are not shown. Two phone response rates are shown, however:

- the *unadjusted* response rate, which is simply the number of answered phone contacts divided by the number of attempted phone contacts, and
- the *adjusted* response rate which removes from the count of attempts those phone calls terminated by callers before the end of a 21 second mandatory wait message informing them of privacy and call monitoring policies. The reason for excluding these calls (known as *early drop outs*) is because they are not available to counsellors to answer and including them in the calculation of response rates provides a misleading or incomplete indication of service responsiveness. This is especially the case in light of how many early drop outs Kids Helpline receives. Figure 40 shows the length of time before phone calls to Kids Helpline were abandoned in 2016, for example. It indicates that half (49%) of all unanswered phone calls were abandoned in the first 21 seconds before they became available to counsellors to be answered.

The trend data for response rates by medium of contact presented in Figure 39 reveal the following:

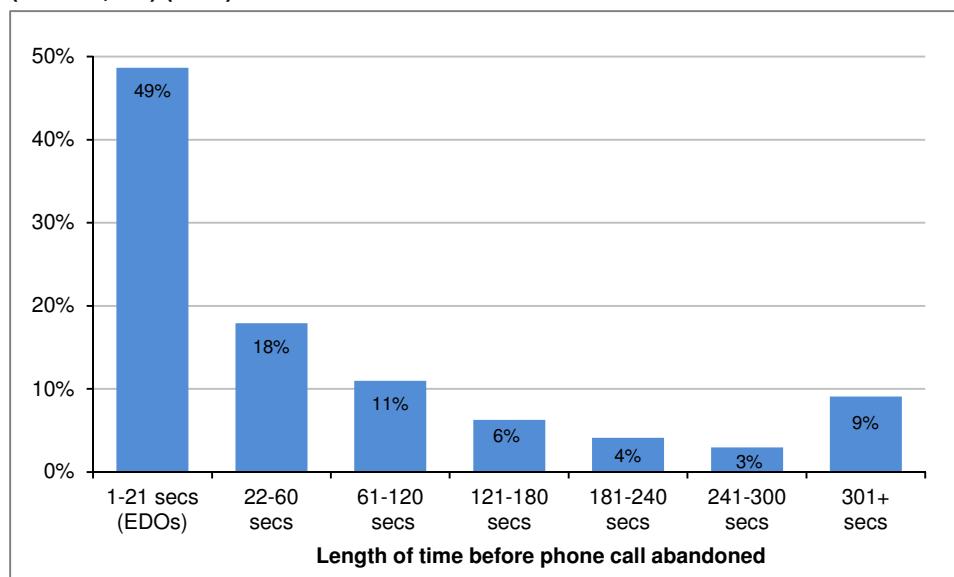
- from 2012 to 2015 the adjusted phone response rate was steady between 70-75% but declined to 65% in 2016
- from 2012 to 2015 the web chat response rate increased from 30% to 55%; however, in 2016 it dipped back to 48%, and
- from 2012 to 2015 the overall service response rate (*all media*) was stable around 60%; however, in 2016 it dropped to 51%.

Figure 39. Response rates by medium: phone (unadjusted and adjusted to exclude early drop outs), web chat, and all media – by year (2012-2016)¹



1. Data presented in this table are sourced from Kids Helpline phone system database.

Figure 40. Length of time until phone call to Kids Helpline abandoned showing early drop outs (N = 140,941) (2016)¹



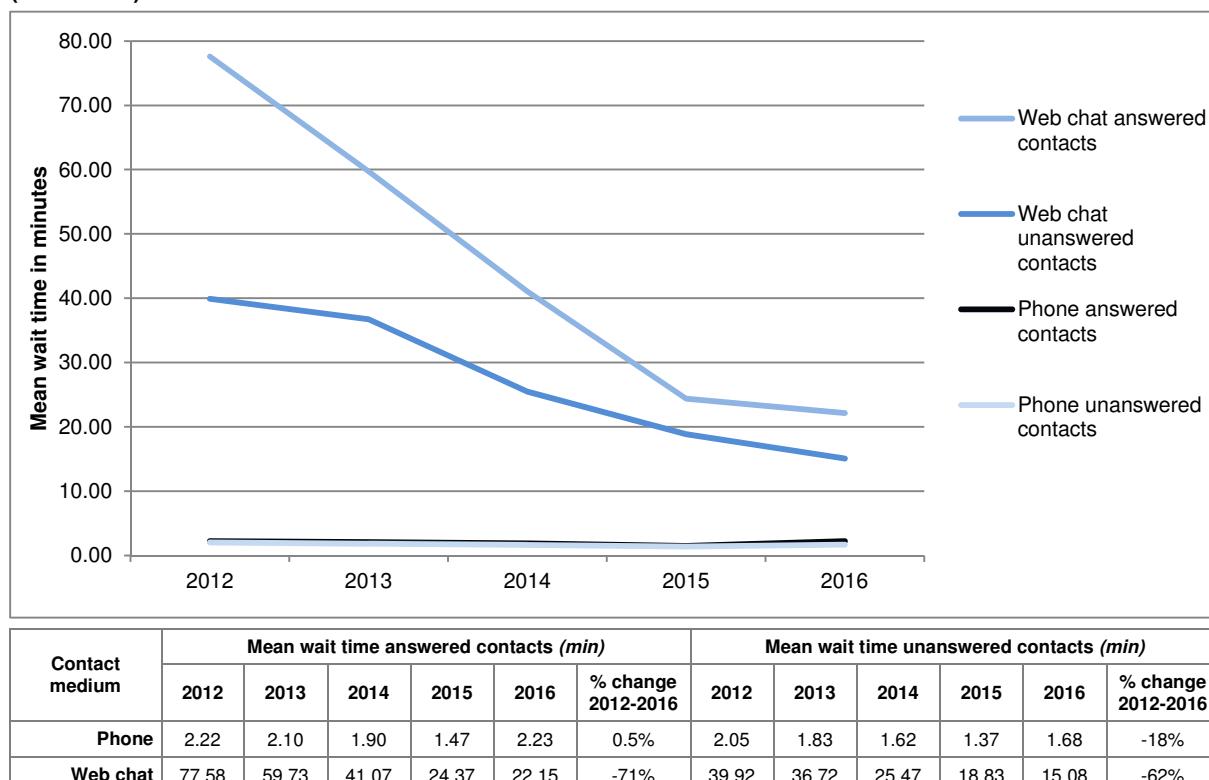
1. Data presented in this table are sourced from Kids Helpline telephone system database. The number of unanswered calls reported in this figure is slightly greater than that reported in Table 1 due to the use of summary and unit record data in Table 10 and Figure 40 respectively.

3.10.2 Wait times

Another measure of service demand and responsiveness is the length of time that clients wait to be answered by counsellors. Figure 41 presents mean wait times for attempted and answered contacts for Kids Helpline's synchronous services – i.e. phone and web chat – from 2012 to 2016. These data indicate the following:

- Mean wait times for answered web chat contacts decreased by 71% between 2012 and 2016. Five years ago, answered web chat contacts waited 78 minutes on average to be answered and in 2016 they waited just 22 minutes on average.
- Over the same period, the mean wait time for answered phone contacts remained unchanged at just over 2 minutes.
- The mean wait time for both unanswered web chat and unanswered phone contacts has improved over the five years – by 62% and 18% respectively.

Figure 41. Mean wait-time in minutes for attempted and answered phone and web chat contacts – by year (2012-2016)¹



1. Data presented in this figure are sourced from Kids Helpline phone system and web chat system databases.

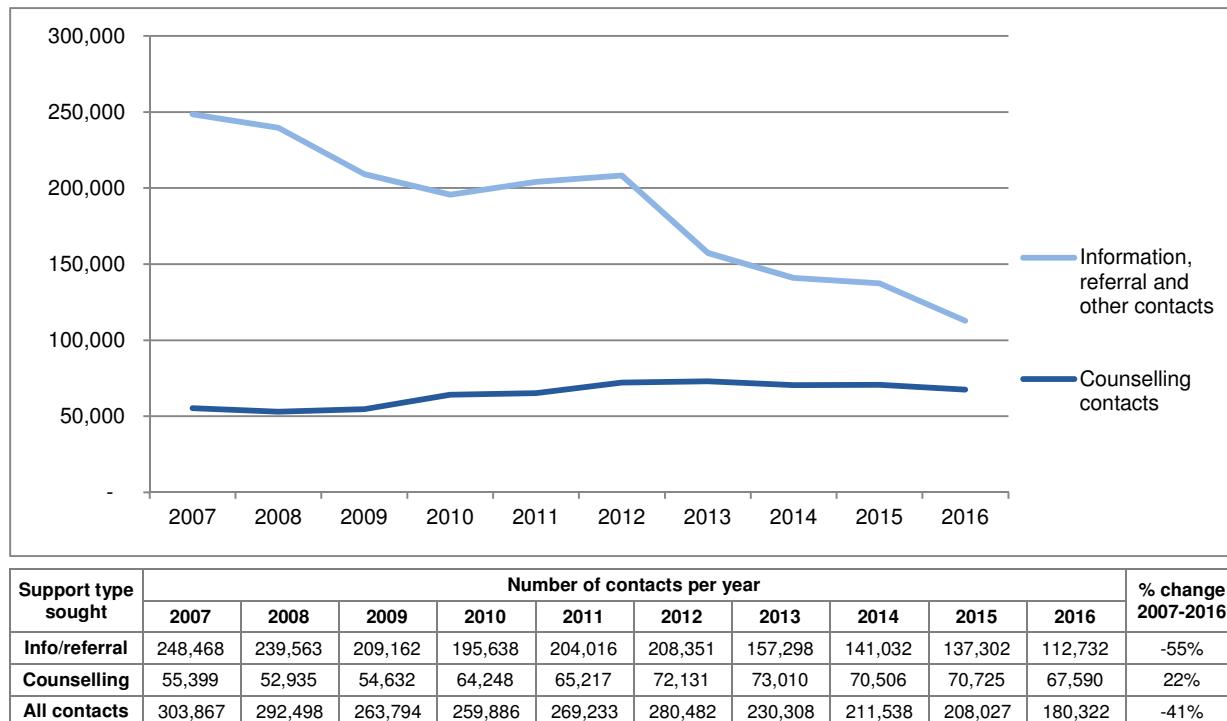
3.10.3 Demand for different types of support – counselling vs. non-counselling help-seeking

As explained in section 3.2, the Kids Helpline counselling and support service responds to two broad categories of help-seeking: those children and young people seeking counsellor assistance for a particular concern or problem (*counselling contacts*), and those seeking general information, referral to other services, or some other form of non-counselling support, like general conversation or playful engagement (*non-counselling contacts*, also called *information, referral and other contacts*). These different types of help-seeking involve significantly different time and skill resources on the part of Kids Helpline counsellors, so it is important for the service to monitor shifts in demand for different support types over time.

Figure 42 shows the number of answered contacts each year over the last decade by the type of support sought – counselling support or information, referral and other non-counselling support. These data show that:

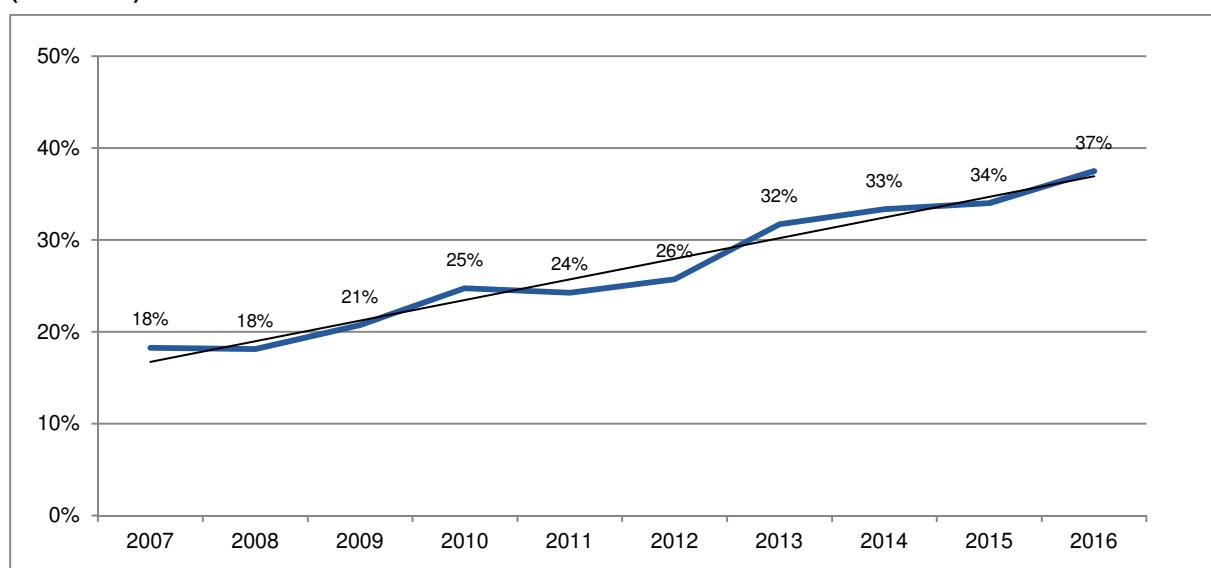
- overall, answered contacts have reduced across the period by 41% (from 303,867 in 2007 to 180,322 in 2016)
- the decrease, however, is among those seeking information, referral and other non-counselling responses (a reduction of 55%, from 248,468 in 2007 to 112,732 in 2016)
- counselling contacts have actually grown across the period by 22% (from 59,353 to 66,963) and have increased quite substantially as a proportion of all contacts responded to in a year, as shown in Figure 43. Figure 43 reveals that over the last decade the proportion of answered contacts requiring counselling responses has increased steadily, from 18% in 2007 to 37% in 2016.

Figure 42. Number of Kids Helpline answered contacts (all ages) by type of support sought: counselling support or information, referral and other support – by year (2007–2016)¹



1. Data presented in this figure are sourced from Kids Helpline's *Record-a-Contact* database. Note that the numbers presented for 'all contacts' are slightly lower than those quoted in Table 10 (under all media answered contacts). This is owing to fact that data in Figure 42 are taken from Kids Helpline's client contact database (a slightly incomplete record of all contacts responded to) while the data in Table 10 is taken from Kids Helpline's telephone, email and web chat system databases which record all answered contacts without client information, such as the nature of the child or young person's help-seeking.

Figure 43. Percentage of Kids Helpline contacts aged 5–25 years seeking counselling support – by year (2007–2016)¹



1. Data presented in this figure are sourced from Kids Helpline's *Record-a-Contact* database.

So what is driving the apparent decrease in demand for non-counselling support? In order to understand this trend, it is useful to look more closely at the types of non-counselling support being sought by contacts over the last five years – the period during which the decrease in non-counselling contacts is sharpest.

As noted earlier in section 3.2.3, children and young people who contact Kids Helpline for support other than counselling can be grouped into six categories according to the type of assistance they are seeking:

- *Non-conversational contacts.* These include silent contacts, hang ups, noise without verbal content, and in the web chat context, opening a session but not responding.
- *Re-engagement or re-connection.* These are contacts from clients who have previously contacted Kids Helpline. They may include general or specific feedback and thanks, reporting-in with a regular counsellor without discussing any specific issue or concern, arranging for a particular counsellor to contact them, and/or challenging or testing access arrangements put in place by Kids Helpline.
- *Other ways of engaging.* These contacts include engaging in resourceful, inventive, unusual, challenging or creative ways, such as joking, singing, giggling, swearing, playing recordings, role-playing, story-telling, and communicating sexual themes with unknown agendas.
- *Engage, connect, conversation.* These contacts are where a child or young person contacts through conversation and no issues or concerns are presented. They may include general conversations, conversations about the counselling process, sharing personal news, exploring ideas, and therapeutic and/or strength-based conversations.
- *Requesting a referral.* These are contacts where the client requests information or contact details for other support services, not related to a particular problem.
- *Asks for information/resources.* These contacts are for information or resources that are not related to a particular problem or issue, such as requests for information about Kids Helpline competitions or campaigns. They exclude referral requests.

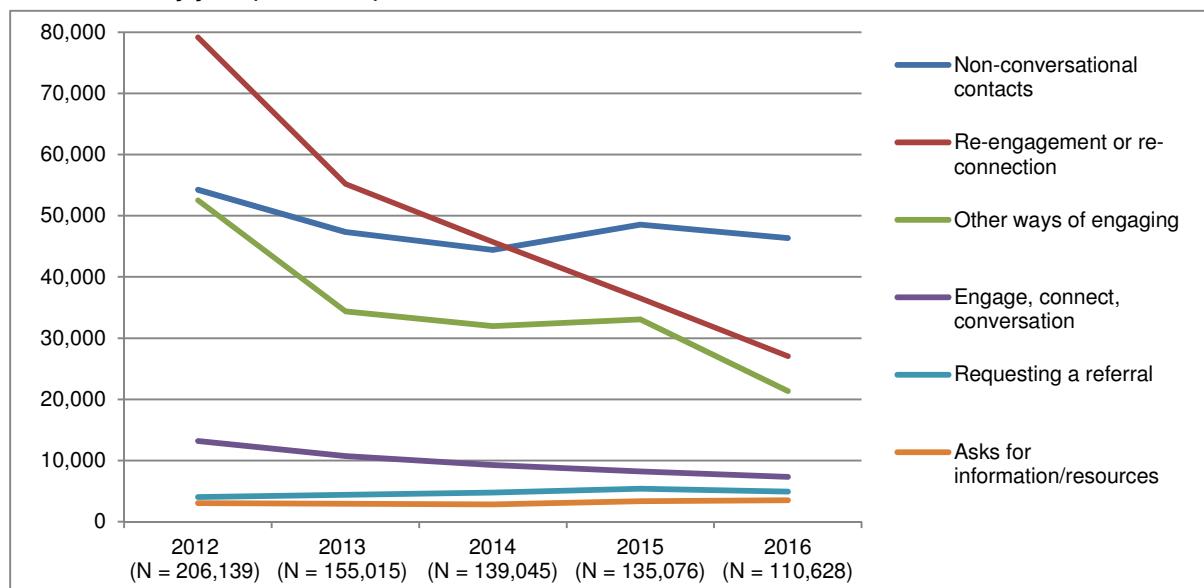
Figure 44 shows the number of non-counselling contacts in each of these categories each year over the last five years. It reveals that only certain types of non-counselling contacts have reduced during this period. Those seeking information or referral have actually increased (by 16% and 23% respectively). On the other hand, contacts seeking to re-engage or reconnect with the service have decreased by 66%, or in raw numbers, by over 50,000 contacts (from 79,134 in 2012 to 27,069 in 2016). Similarly, those 'engaging in other ways' decreased by 59%, or over 30,000 contacts (from 52,509 contacts in 2012 to 21,365 in 2016).

While there is a range of possible explanations for these observations, the start of this trend coincided with two major practice innovations in 2012.

- The first of these innovations was the integration of **yourtown**'s client information system into the Kids Helpline counselling and support service's *Record-a-Contact* database. This innovation enabled counsellors for the first time to recognise existing clients on the basis of previously recorded client information and/or contact metadata (like phone numbers, the vast majority of non-counselling contacts being phone contacts). This was especially salient for two groups of returning clients:
 - those contacting the service quite frequently who may have benefited from more focused and structured therapeutic work but were not engaged in such activity because counsellors did not recognise just how frequently they were contacting or the full complexity of the issues with which they were presenting, and
 - the small group of clients who have compulsive, and typically anonymous, calling behaviour. Many of these clients will have had in place a formal access agreement with the service in the interests of good therapeutic practice – specifying how often and when they would receive support from a counsellor. However, in the past, these clients were able to contact anonymously without being identified.

The integration of the data systems enabled counsellors to recognise these two groups of individuals more easily and to then have new conversations and interactions with them – in relation to the first group, inviting them into more focused therapeutic engagement with the service, like ongoing counselling or case management and, in relation to the second group, gently and consistently challenging them about their behaviour and/or exploring alternative therapeutic options, including referral to more appropriate services.

Figure 44. Number of Kids Helpline non-counselling contacts aged 5-25 years seeking particular types of assistance – by year (2012-2016)¹



Type of non-counselling contact	Number of contacts per year					
	2012	2013	2014	2015	2016	% change 2012-2016
Non-conversational contacts	54,223	47,324	44,410	48,519	46,366	-14%
Re-engagement or re-connection	79,134	55,212	45,742	36,510	27,069	-66%
Other ways of engaging	52,509	34,392	31,988	33,051	21,365	-59%
Engage, connect, conversation	13,200	10,751	9,291	8,220	7,347	-44%
Requesting a referral	4,021	4,391	4,783	5,419	4,948	23%
Asks for information/resources	3,052	2,945	2,831	3,357	3,533	16%

1. Data presented in this figure are sourced from Kids Helpline's *Record-a-Contact* database.

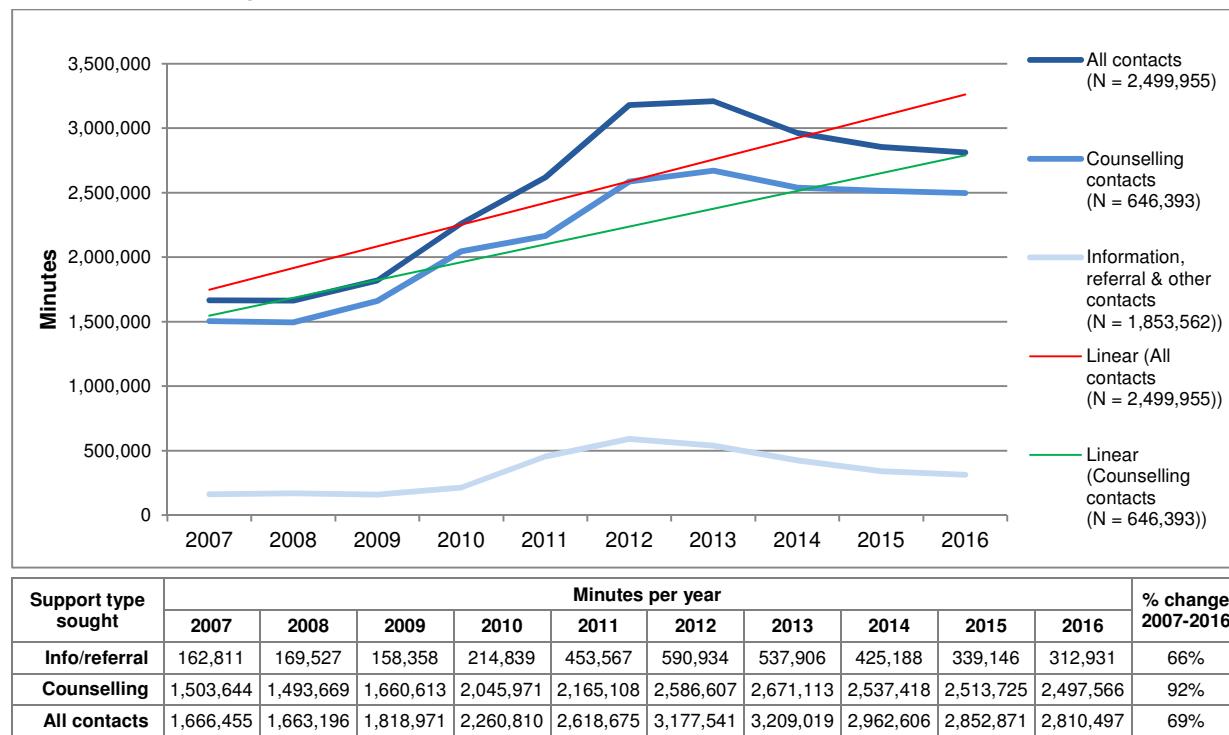
- The second innovation in practice that occurred in 2012 was the implementation of a new case management framework for Kids Helpline. This framework was aimed at engaging clients who require ongoing support in a more structured and focused way than in the past, clarifying therapeutic or developmental goals with clients, and the pathway to achieving these. A by-product of this innovation in practice was the conclusion of work with quite a number of long-term clients. This emerged from more focused, goal-directed counselling and also the identification of clients whose specific needs and objectives were not able to be met by the service and who required referral to more appropriate services.

Arguably these two innovations go a long way to accounting for the substantial reduction in contacts to Kids Helpline since 2012 that were classified as 're-engaging or reconnecting'. In terms of accounting for the sizeable decrease in contacts 'engaging in other ways' over the last five years, it is probable that the reduced anonymity brought about by the integration of data systems eroded the interest of some individuals in engaging in these ways. Another possible explanation is that the last five years have seen a dramatic expansion in alternative opportunities for children and young people to meet needs to play creatively and/or anonymously in a social space, for example, through social media and online gaming. It will be interesting to watch these trends into the future in light of this ongoing cultural and technological change.

3.10.4 Direct client contact time

Direct client contact time is another measure of service demand and provision. Figure 45 shows the total amount of time spent by counsellors each year in direct contact with children and young people for the last decade. It also breaks down client contact time by the type of support sought by the child or young person – counselling support compared with information, referral and other types of non-counselling support.

Figure 45. Total direct client contact time in minutes per year by type of support sought: all Kids Helpline contacts, counselling contacts, and information, referral and other contacts (2007-2016)¹

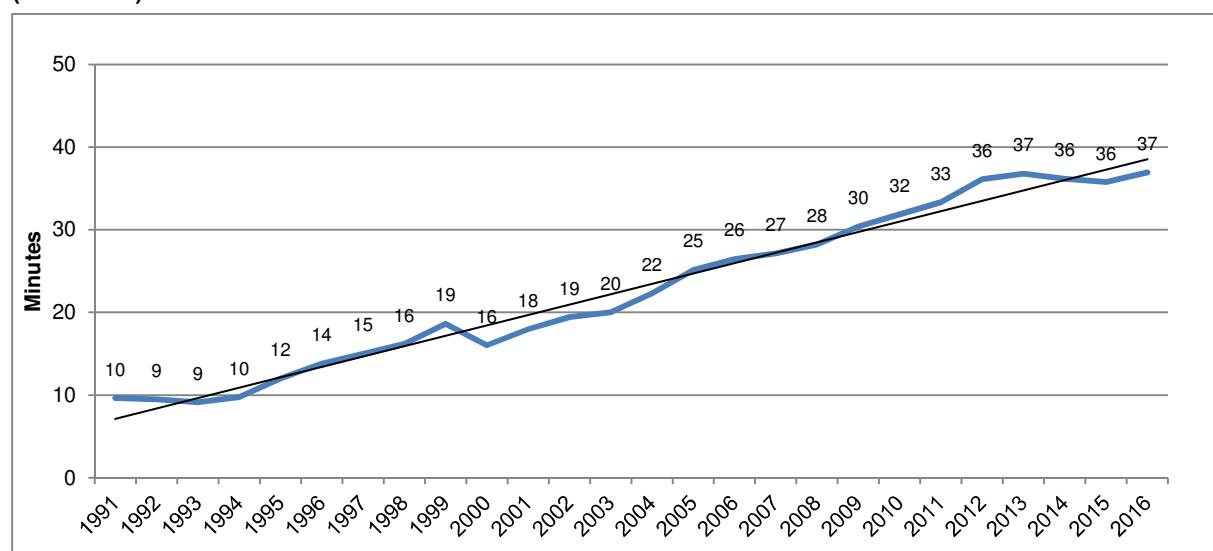


1. Data presented in this figure are sourced from Kids Helpline's *Record-a-Contact* database.

As indicated by the red trend line, the overall time spent in client contact has increased substantially over the last decade (by 69%), notwithstanding the overall reduction in the number of contacts responded to (Figure 42). Figure 45 also highlights the comparative time burden of counselling versus non-counselling contacts. Counselling contacts made up just 26% of all contacts across the 10-year period but comprised 87% of the total time counsellors spent with clients.

The increase in time spent in direct contact with clients is due in part to the growing number and proportion of contacts requiring a counselling response (Figure 42) and the fact that the mean duration of counselling sessions has steadily increased over time. Figure 46 shows the mean duration of counselling sessions in minutes each year over the 26 years Kids Helpline has been in operation. The trend line indicates a continuous and steady increase in counselling session duration. In 1991, counselling sessions were 10 minutes on average. In 2016 they were almost four times as long, at 37 minutes.

Figure 46. Mean session duration in minutes: Kids Helpline counselling contacts (all ages) – by year (1991-2016)¹

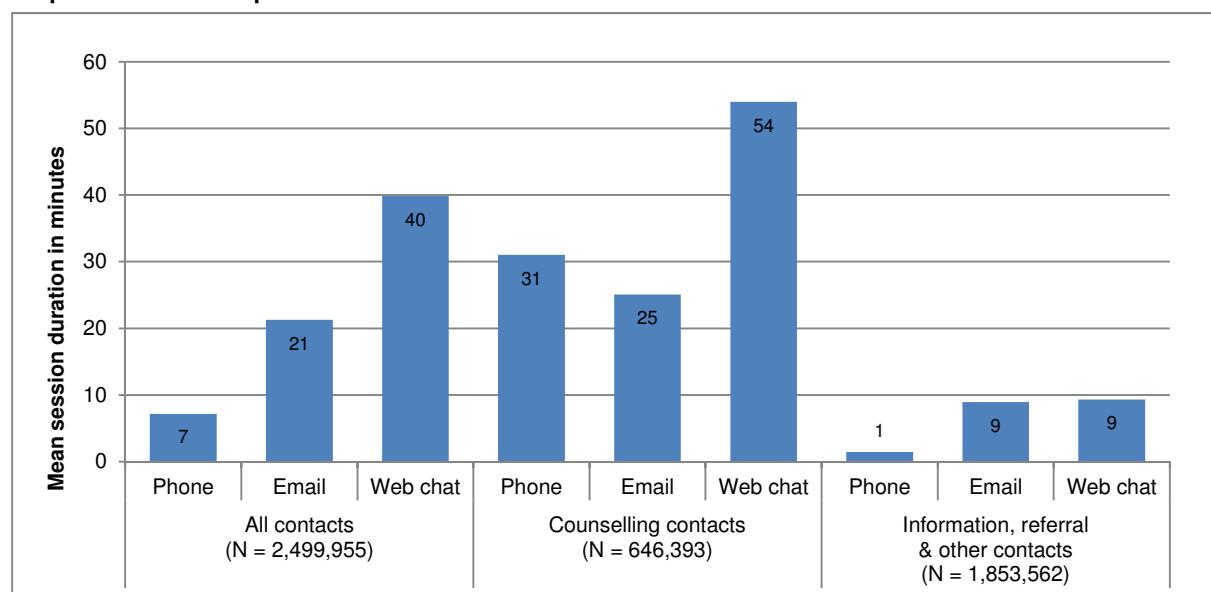


1. Data presented in this figure are sourced from Kids Helpline's *Record-a-Contact* database.

The increase in time spent in direct contact with clients while contact numbers have declined overall, and the increase in average counselling session duration, are both related to the growing proportion of web chat contacts responded to (Figure 37) and the fact that web chat contacts take considerably more counsellor time, on average, than contacts via other media.

Figure 47 demonstrates this, showing the mean duration of a session by medium of contact – email, phone or web chat. For robustness, means are based on all contacts responded to over the last 10 years. As web chat sessions, compared with phone sessions, are more likely to be counselling sessions, Figure 47 breaks down average session duration by medium *and* by the type of support provided to the client. It shows that on average, across all contacts, web chat sessions are almost six times longer than phone contacts (40 minutes c.f. 7 minutes). Among counselling contacts, the difference in duration between web chat and phone contacts is less but still substantial (54 minutes c.f. 31 minutes). The pattern is also evident among non-counselling contacts, where the average web chat session is nine times longer than a phone session (9 minutes c.f. 1 minute).

Figure 47. Mean session duration in minutes – by medium of contact and type of help-seeking: all Kids Helpline contacts responded to 2007-2016¹

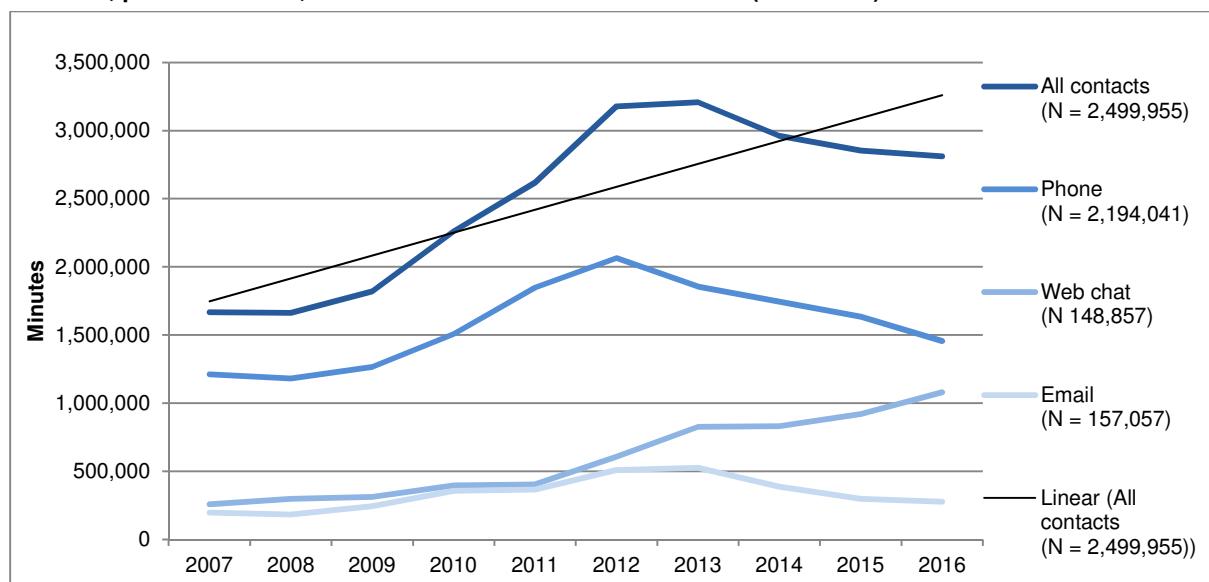


1. Data presented in this figure are sourced from Kids Helpline's *Record-a-Contact* database.

Direct client contact time spent in web chat sessions has increased disproportionately to client contact time in other media over the last decade, as shown in Figure 48. While total client contact time has increased by 69% over this period, time spent with clients in web chat has increased by 317% compared with 20% for phone contact and 41% for email. Since 2012, time spent in responding to telephone and email contacts has steadily declined (by 29% and 46% respectively) while time invested in responding to web chat contacts has grown by 78%.

The data in Figure 48 also reiterate the disproportionate time burden of web chat engagement compared with phone or email. In 2016, web chat can be seen to make up 38% of total counsellor time spent in responding to clients, while phone engagement comprised 52%. However, as indicated in Table 10, web chat contacts made up just 18% of all contacts responded to, while phone contacts made up 75%. The shifting focus of counsellor time towards web chat will therefore inevitably apply downward pressure on the total number of contacts from children and young people that the service can respond to without investment of further resources.

Figure 48. Total direct client contact time in minutes per year by medium of contact: all Kids Helpline contacts, phone contacts, web chat contacts and email contacts (2007-2016)¹



1. Data presented in this figure are sourced from Kids Helpline's *Record-a-Contact* database.

3.10.5 Summary

Taken together, the data presented in this section indicate significant shifts over the last decade in demand for the counselling and support service. The period has seen a gradual shift in client demand away from engagement by telephone and email toward web chat. It has also seen an overall reduction in the number of contacts being responded to, although the total time invested by the service in responding to the needs of children and young people has grown considerably. This is owing to the fact that an increasing number of clients are requiring more intensive counselling-type responses and because the average length of these sessions is steadily increasing. The growing number and proportion of web chat contacts responded to is also contributing to upward pressure on counsellor time as these sessions are considerably longer on average than either phone or email contacts.

With a deliberate decision being made by the service in recent years, and most notably during 2016, to increase client access to support and counselling via web chat, a mode of service delivery considerably more resource-demanding than telephone or email, service responsiveness can be seen to have both improved and declined as a result. While the number of answered web chat contacts has grown considerably, wait times for web calls being answered by a counsellor have reduced substantially, and response rates for web chat have improved markedly, these improvements in access to web chat have come at the cost of fewer overall service responses, lower overall response rates and, in 2016, increased wait times for phone contacts.

These data highlight the complexity for Kids Helpline of providing a responsive counselling and support service to children and young people that balances shifting client preferences for receiving support via particular communication modalities with the goal of responding to as many vulnerable children and young people as possible.

The final point to note from the analysis presented in this section is that while the number of service responses has declined by 41% over the last decade, this reduction is among those seeking information, referral and other non-counselling responses. Closer analysis of the decrease in these contacts over the last five years – the period where the decline in contacts has been sharpest – suggests that much of this can be explained by improvements in therapeutic practice with frequent callers facilitated by innovations in data management and case management that have occurred during the period.

4. Kids Helpline website

In addition to its counselling and support service, Kids Helpline operates a website for self-directed help-seeking by children, young people and parents/carers/teachers (www.kidshelpline.com.au). The self-help resources provided on the website, and in particular the *Tips & Info* pages for *kids, teens and parents & carers*, have been developed by clinical staff and researchers. They are intended to provide information and strategies to assist users in responding to common issues and concerns.

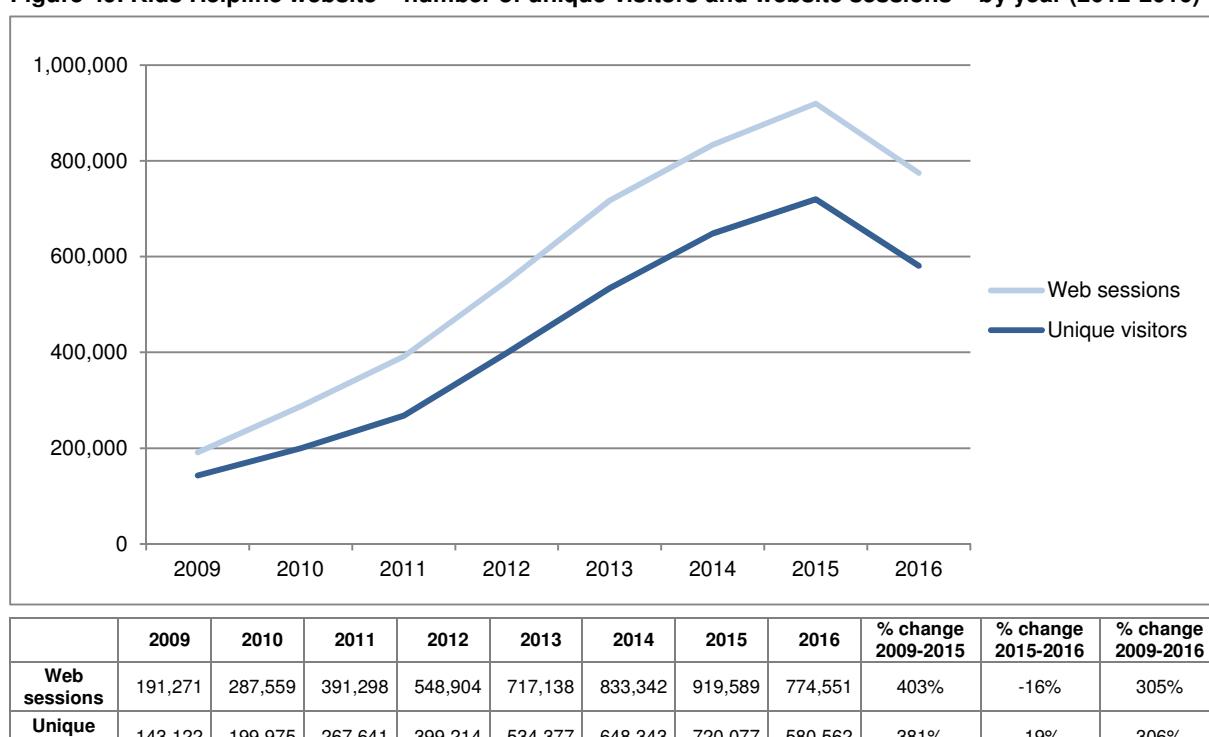
Understanding patterns in website use and demand are important in terms of continuing to develop this aspect of the service and to ensure that the materials provided are being used. This chapter first analyses demand for various types of self-help resources and then considers the issues or topics that appear to be of greatest interest or concern to website visitors.

Children and young people's views about current website resources and their perception of how effective *Tips & Info* topics are in helping them with problems were captured in the 2016 Kids Helpline client satisfaction and outcomes survey. Selected findings are report in Chapter 6.

4.1 Service demand

Figure 49 presents data in relation to two key measures of website demand/engagement and compares these over the full period for which data are available (eight years) to identify medium term trends in demand for website resources. A data table is supplied to assist with analysis.

Figure 49. Kids Helpline website – number of unique visitors and website sessions – by year (2012-2016)



1. Data courtesy of Google Analytics.

2. Due to technical difficulties with Google Analytics, website activity was not recorded from 1-11 October 2015. Accordingly, all website activity measures for 2015 will be undercounts.

3. From 2016, a new filter has applied to analysis of Google Analytics data to remove ghost-spam and other instances of artificially-generated website activity. This filter very slightly reduces counts of all measures of website engagement reported in this chapter. As a result of applying this filter, data from 2016 are not strictly comparable to previous years' data.

Key observations from Figure 49 include the following:

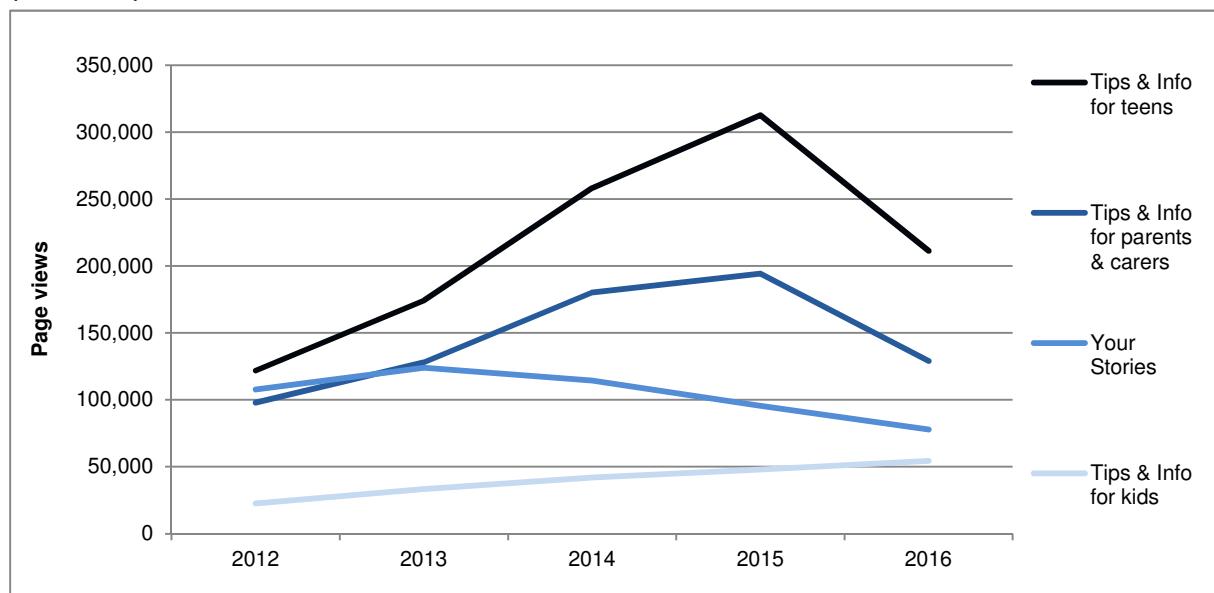
- In 2016 there were 580,562 unique visitors to the Kids Helpline website who collectively participated in 774,551 web sessions.
- From 2009 to 2015, web sessions increased by 403% and unique visitors by 381%.
- Between 2015 and 2016, however, web sessions decreased by 16% and unique visitors decreased by 19%.

This dramatic break, in 2016, from seven years of continuous and substantial growth in both measures of website engagement, relates to the introduction in February 2016 of a new URL and website for Kids Helpline (formerly www.kidshelp.com.au). This innovation unavoidably resulted in a drop in organic search traffic due to delay by Google in re-indexing the site based on the new site structure. Google will organically re-index the site over time, however, so it is anticipated that organic search traffic will normalise in the coming year and ultimately increase (based on the new site's stronger SEO domain authority).

Figure 50 presents data in relation to demand for key self-help resources on the Kids Helpline website and compares this from 2012 to 2016 to identify short term trends in demand for website resources. Key observations from the data include the following:

- From 2012 to 2015 there was rapid and continuous growth in demand for all self-help resources, except for *Your Stories* – children and young people's self-submitted stories about different issues and successful help-seeking. Total pages views of *Tips & Info* topics increased by 129% over the four years, and page views for teen *Tips & Info* topics increased by 157%.
- However, between 2015 and 2016, demand for all resources reduced notably (between 18% and 34%), except demand for *Tips & Info* topics for kids which increased by 13% from the previous year.
- The break in continuous growth in demand for these resources in 2016 again relates to the establishment of the new Kids Helpline URL and website, resulting in a drop in organic search traffic which is expected to normalise over the coming year and ultimately increase.

Figure 50. Kids Helpline website – number of page views of different self-help resources – by year (2012-2016)



1. Data courtesy of Google Analytics.

2. Due to technical difficulties with Google Analytics, website activity was not recorded from 1-11 October 2015. Accordingly, all website activity measures for 2015 will be undercounts.

3. From 2016, a new filter has applied to analysis of Google Analytics data to remove ghost-spam and other instances of artificially-generated website activity. This filter very slightly reduces counts of all measures of website engagement reported in this chapter. As a result of applying this filter, data from 2016 are not strictly comparable to previous years' data.

4.2 Key issues of interest to website visitors

Understanding the interests and needs of website visitors is important in terms of developing relevant and effective self-help resources. Two sources of insight into the issues of concern to website visitors are:

- the most commonly visited self-help resources, and in particular *Tips & Info* topics for kids, teens and parents/carers, and
- the most common sources of referral to the Kids Helpline website.

4.2.1 *Tips & Info* topics

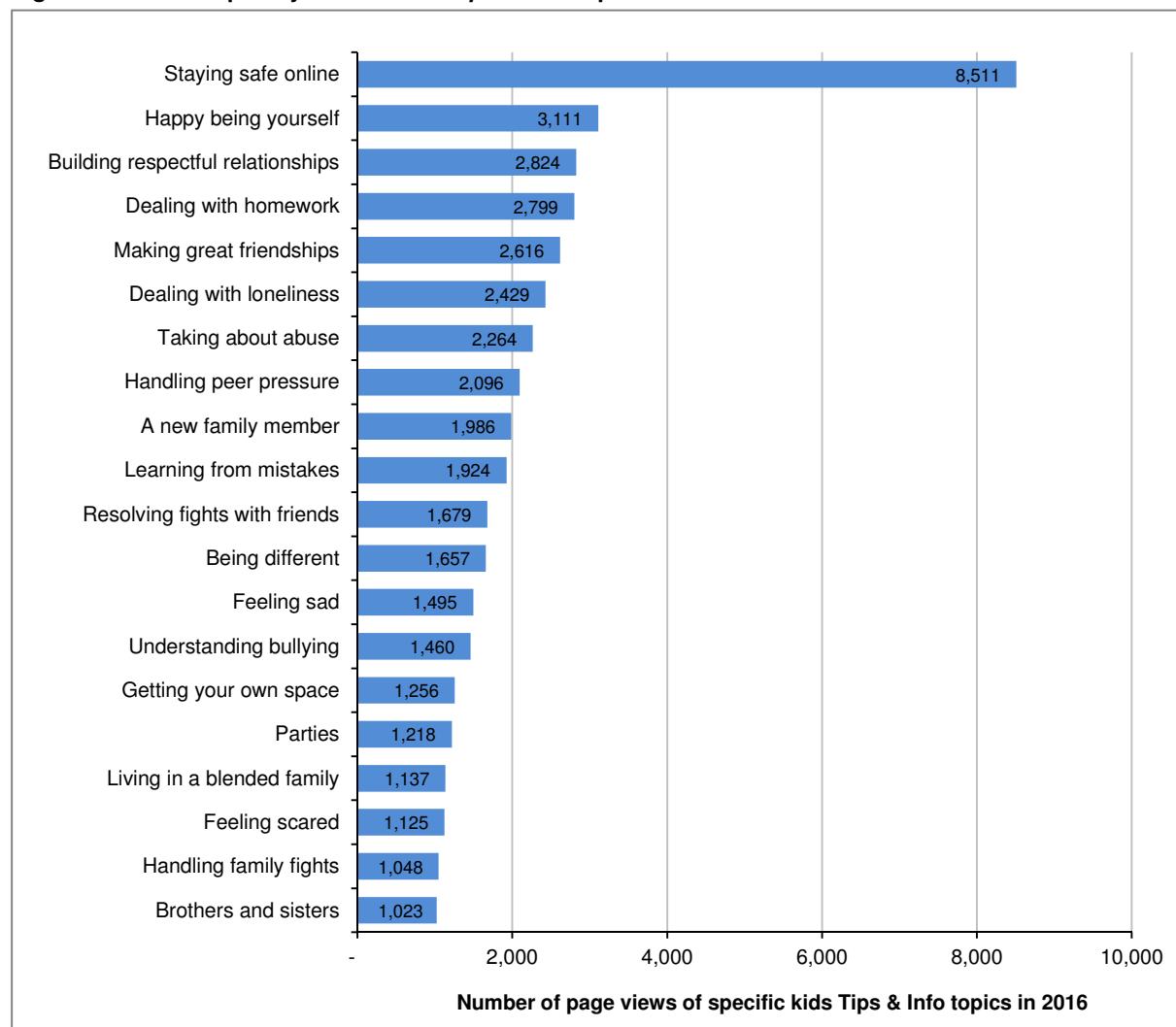
Kids

During 2016, there were 46 *Tips & Info* topics on the Kids Helpline website targeted at children, receiving a total of 54,394 page views. Figure 51 shows the frequency with which the 20 most popular of these resources were accessed.

Key observations from the data in this figure include the following:

- More than one third (37%) of all kids' *Tips & Info* page views were in relation to five topics – *staying safe online*, *happy being yourself*, *building respectful relationships*, *dealing with homework*, and *making great friendships*. *Staying safe online* was by far the most visited page in 2014 and 2015 as well, suggesting that cyber-safety may be a standout concern for those in this age group.
- Ten of the 20 most viewed topics in 2016 related to dealing with different kinds of relationships and interpersonal issues.

Figure 51. Most frequently visited kids' *Tips & Info* topics in 2016¹



1. Total kids' *Tips & Info* page views in 2016 = 54,394.

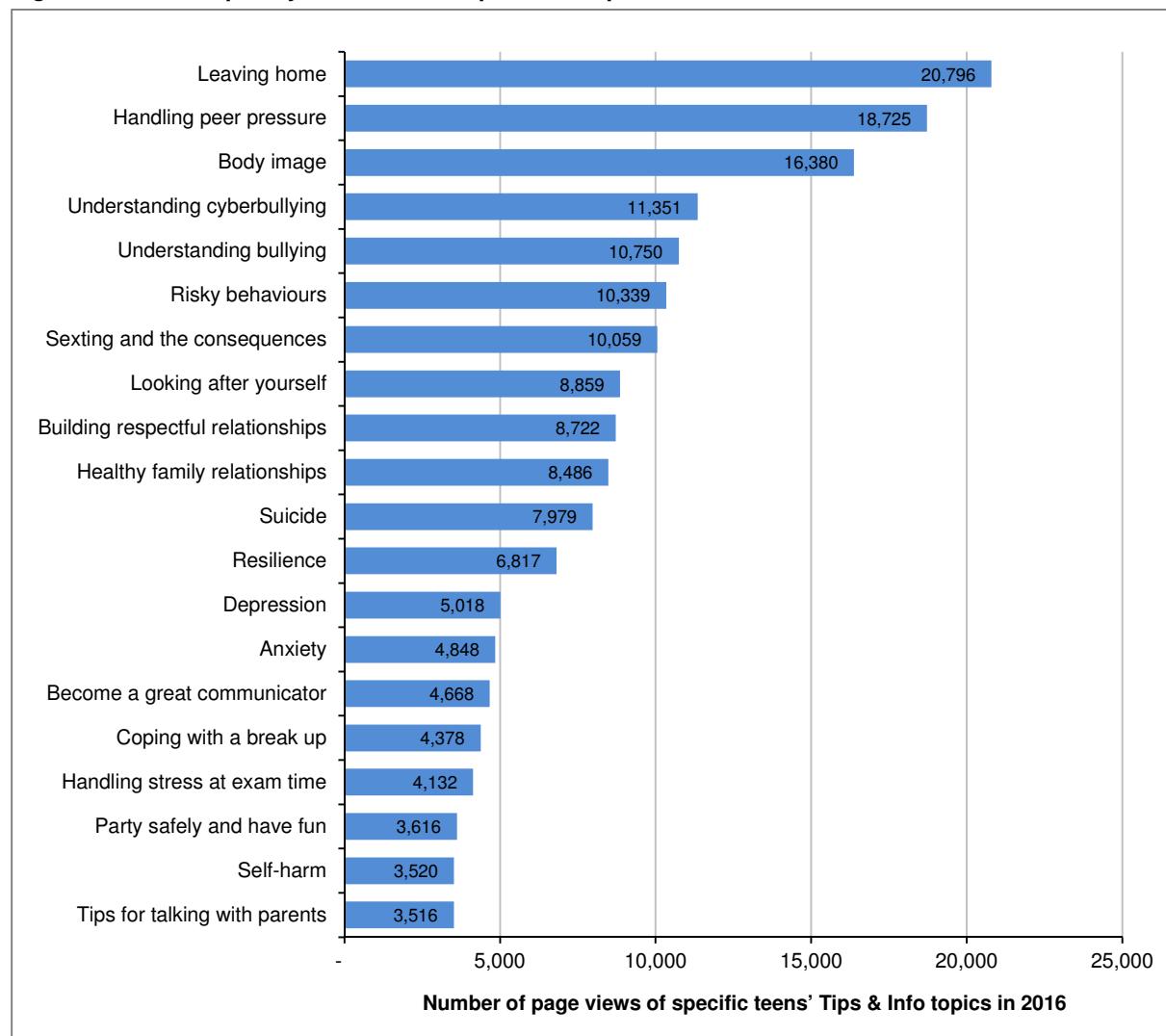
Teens

During 2016, there were 51 *Tips & Info* topics targeted at teenagers receiving a total of 211,346 page views. Figure 52 shows the frequency with which the 20 most popular of these resources were accessed.

Key observations from the data in this figure include the following:

- More than one third (37%) of all teens' *Tips & Info* page views were in relation to five topics – *leaving home, handling peer pressure, body image, understanding cyberbullying* and *understanding bullying*. The topics *handling peer pressure, leaving home* and *body image* were also among the five most frequently visited teens' *Tips & Info* topics in 2014 and 2015, suggesting some continuity in the issues of interest to website visitors of this age group.
- One in every 10 page views (10%) was in relation to topics on bullying.

Figure 52. Most frequently visited teens' *Tips & Info* topics in 2016¹



1. Total teens' *Tips & Info* page views in 2016 = 211,346.

Parents/carers

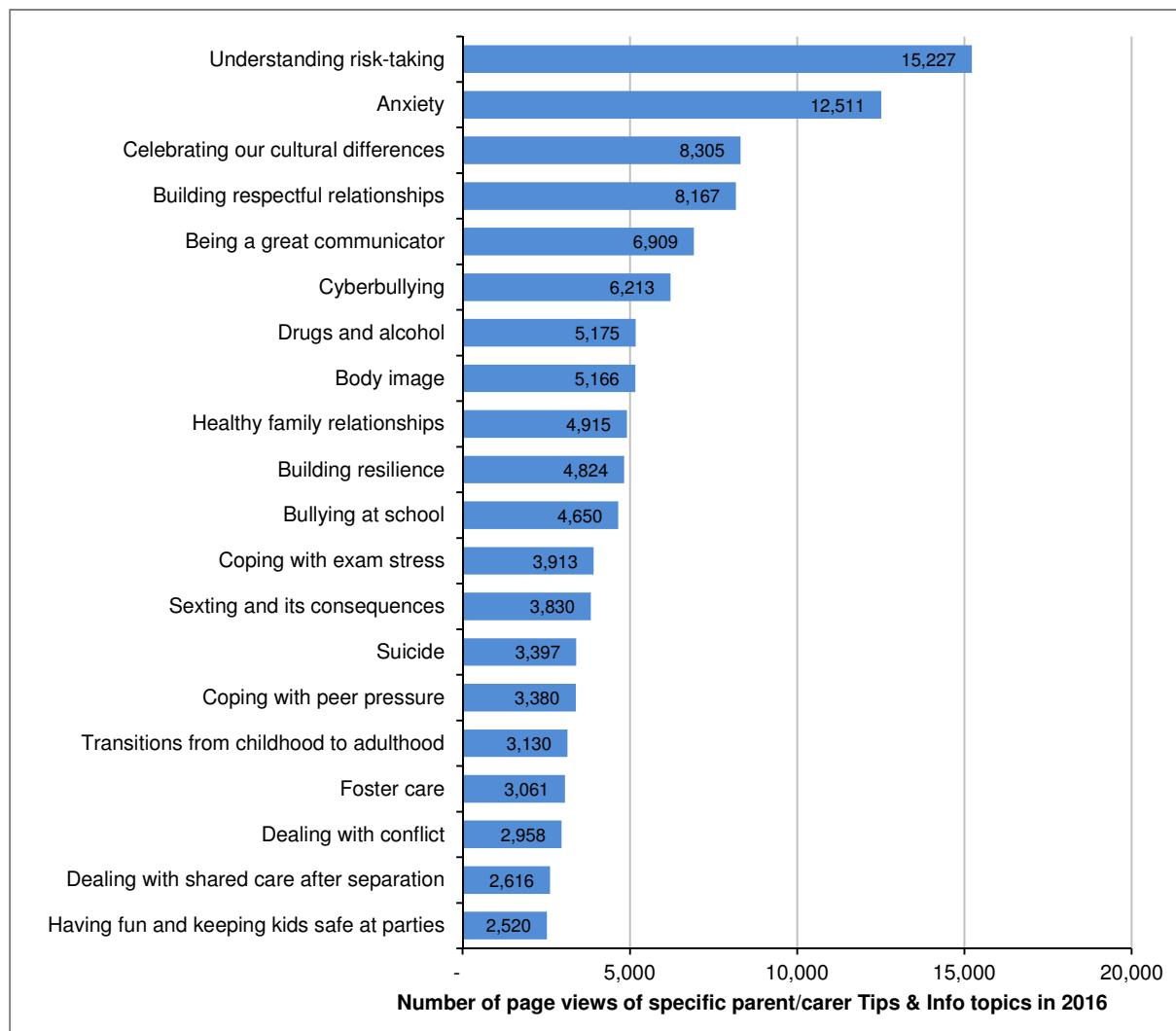
During 2016, there were 45 *Tips & Info* topics targeted at adults – primarily parents, guardians, teachers and other significant adults in children's lives. Figure 53 shows the frequency with which the 20 most popular of these resources were accessed.

Key observations from the data in this figure include the following:

- Two in five (40%) of all parents'/carers' *Tips & Info* page views were in relation to five topics – *understanding risk-taking, anxiety, celebrating our cultural differences, building respectful relationships, and being a good communicator*. The top four of these five issues were also among the six most

frequently viewed topics in both 2014 and 2015, suggesting some consistent themes in the issues of concern to this group of website users.

Figure 53. Most frequently visited parent *Tips & Info* topics in 2016¹



1. Total parent *Tips & Info* page views in 2016 = 128,029.

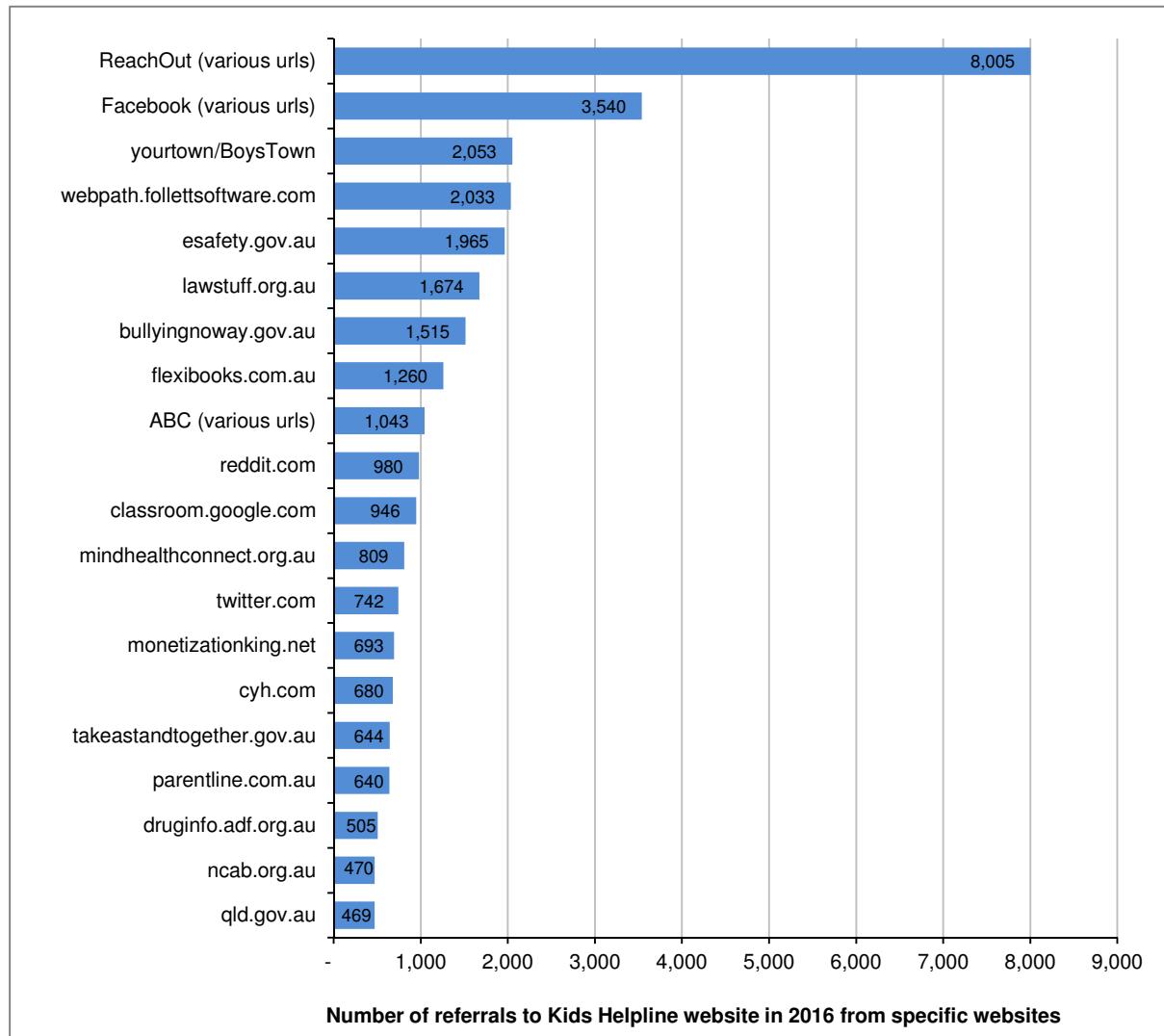
4.2.2 Referrals from other websites

The pathways by which website visitors find and access the site are also important for understanding and responding effectively to their interests and needs. Figure 54 shows the websites that most frequently referred people to the Kids Helpline website during 2016.

Key observations from the data include the following:

- Of the 30,666 referrals to the Kids Helpline website received from these 20 websites:
 - approximately 10,000 referrals came from youth and generalist mental health and counselling websites (primarily ReachOut, but also Child and Youth Health, mindhealthconnect, etc.)
 - close to 2,000 referrals were received from the Australian Government's eSafety website, and
 - over to 2,600 referrals came from other cyber-safety and anti-bullying websites (i.e. Bullying No Way, Take a Stand Together, National Centre Against Bullying).

Figure 54. Top referring websites to Kids Helpline website in 2016¹



1. Excludes referrals from search engines and Kids Helpline website.

4.3 Summary

The Kids Helpline website continued in 2016 to provide a wide range of resources for self-directed help-seeking by children, young people and parents/carers. Due to the introduction in February of a new URL and website for Kids Helpline, a substantial drop in organic search traffic took place, bringing to an end years of continuous and rapid growth in website engagement by service users. Search traffic is anticipated to normalise in the coming year and then increase.

The number of referrals to the website received from cyber-safety and anti-bullying websites, and the frequency with which Kids Helpline website visitors of all ages consulted *Tips & Info* topics on cyber-safety issues (e.g. online safety, sexting, cyberbullying, etc.) and bullying suggest that cyber-safety and bullying are key contemporary concerns of young Australians and those responsible for their care.

Similarly, the number of referrals to the website received from mental health and counselling websites, and the frequency with which Kids Helpline website visitors of all age group consulted *Tips & Info* topics on mental health issues (e.g. anxiety, depression, body image, stress, resilience, self-harm, suicide, etc.) suggest that is another major area of contemporary concern to young Australians and their parents and carers.

Another theme of interest across age groups, but most evidently among children, is interest in how to manage important relationships – relationships with parents, siblings, friends, peers and intimate partners.

5. Kids Helpline @ School

5.1 What is Kids Helpline @ School?

Kids Helpline @ School (KAS) is an early intervention and prevention program for primary school-aged children operating since 2013. The program offers primary schools a professional counsellor-facilitated classroom session via video technology to discuss topics impacting on the lives of students. Sessions have been developed in line with the most common issues for which primary school students contact the Kids Helpline counselling and support service for help. These issues include bullying, peer and friend relationships, family relationships and emotional wellbeing. Sessions are designed to raise awareness of issues related to mental health and wellbeing and encourage discussion about these topics. They are also intended to increase children's mental health literacy, resilience, coping strategies, and willingness to seek help when needed.

In addition to these topics, from 1 July 2016 a new digital safety curriculum was introduced with the support of Kids Helpline's long-standing corporate partner, Optus. These sessions focus on assisting children to engage positively and safely in online environments, teaching them principles of 'digital citizenship' and how to speak out when they, or others, have negative online experiences.

This chapter of the report describes the main activities and outputs of the KAS program in the 2016 calendar year.

5.2 Key program activities and outputs for 2016

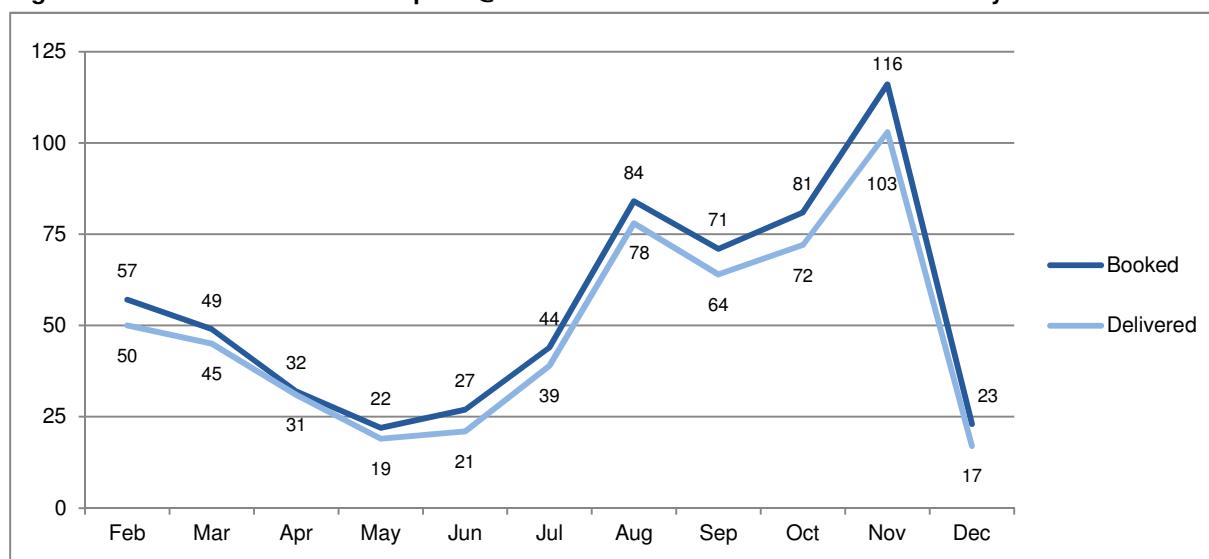
5.2.1 Sessions booked and delivered and participants involved

In 2016, 205 schools used the KAS website to book 606 sessions between February and December, as shown in Figure 55. Of these, 170 schools completed 539 sessions. A total of 14,822 primary school students participated in sessions.

Sixty-seven sessions were cancelled for reasons ranging from school technology faults and firewall issues, teacher illness or class unavailability, and state education technology platform changes. The majority of sessions cancelled were subsequently rebooked and completed.

There were no sessions booked or held during January 2016 due to school holidays. Other months affected by school holidays in 2016 were April, July, September and December.

Figure 55. Number of 2016 Kids Helpline @ School sessions booked and delivered – by month



5.2.2 Topics of discussion

In 2016, sessions were conducted on 19 different topics. Table 11 shows the number and percentage of students who participated in sessions on each topic and the number of sessions held on that topic. The topics most frequently requested by teachers for discussion were *online safety, developing resilience, friendship, transition to high school* and *introduction to Kids Helpline*.

Table 11. 2016 Kids Helpline @ School participants and sessions by session topic

Topic	Number of participants	% of total participants	Number of sessions held
Online safety	3,854	26%	132
Developing resilience	1,748	12%	59
Friendship	1,592	11%	58
Transitional to high school	1,053	7%	36
Introduction to Kids Helpline	1,013	7%	35
Relationships online	928	6%	31
Cyberbullying	662	4%	42
Peer pressure	644	4%	24
Bullying	639	4%	25
Being a school leader	539	4%	19
Worry	508	3%	21
Coping with change	351	2%	92
Feeling sad	343	2%	13
Digital identity	337	2%	9
Balance	259	2%	7
Taking charge of anger	163	1%	7
Positive use of technology	116	1%	5
Family arguments	50	0%	1
Digital media literacy	23	0%	1
Total	14,822	100%	539

5.2.3 Geographical reach

Three out of five schools (61%) participating in the program in 2016 were located in either Victoria or New South Wales, as indicated in Figure 56. These states also held the largest number of sessions, accounting for 64% of the total number of sessions held. Schools in the ACT participated at a notably higher rate than the national average of 3.1 sessions per school with a rate of 25 sessions per school.

Figure 56. Number of 2016 Kids Helpline @ School participating schools and sessions – by state

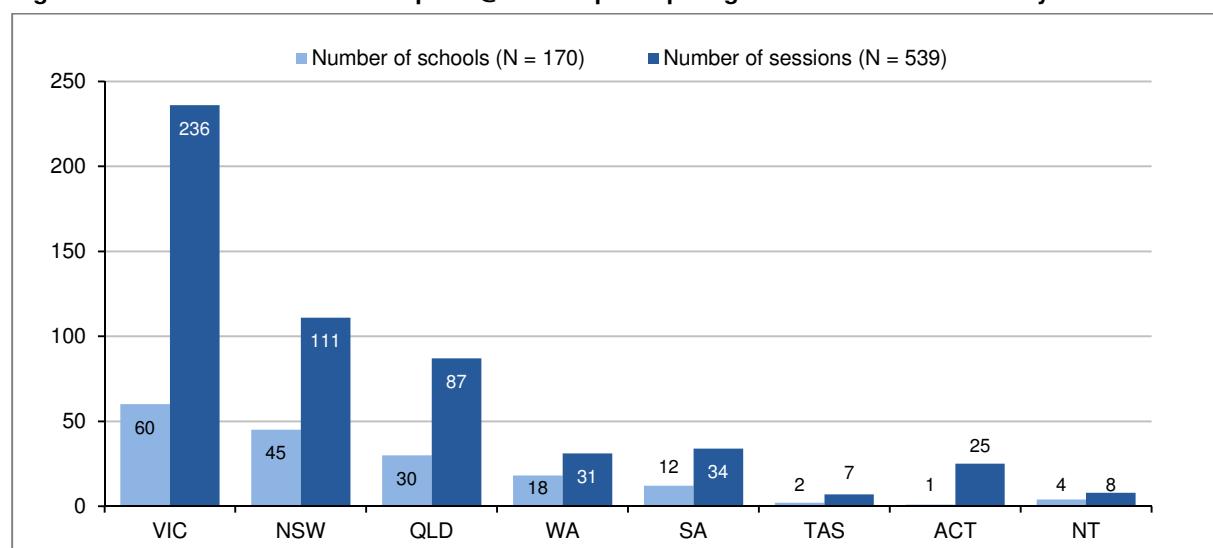
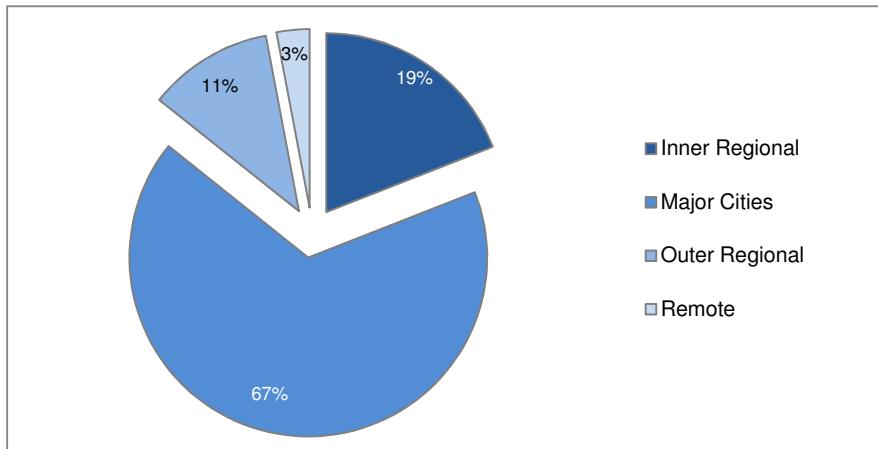


Figure 57 reveals the proportion of participating schools by remoteness classification (see Appendix for more on Kids Helpline's remoteness classification system). Two out of three schools (67%) were situated in Major Cities, while 14% were based in Outer Regional or Remote locations. One in five (19%) was based in an Inner Regional location.

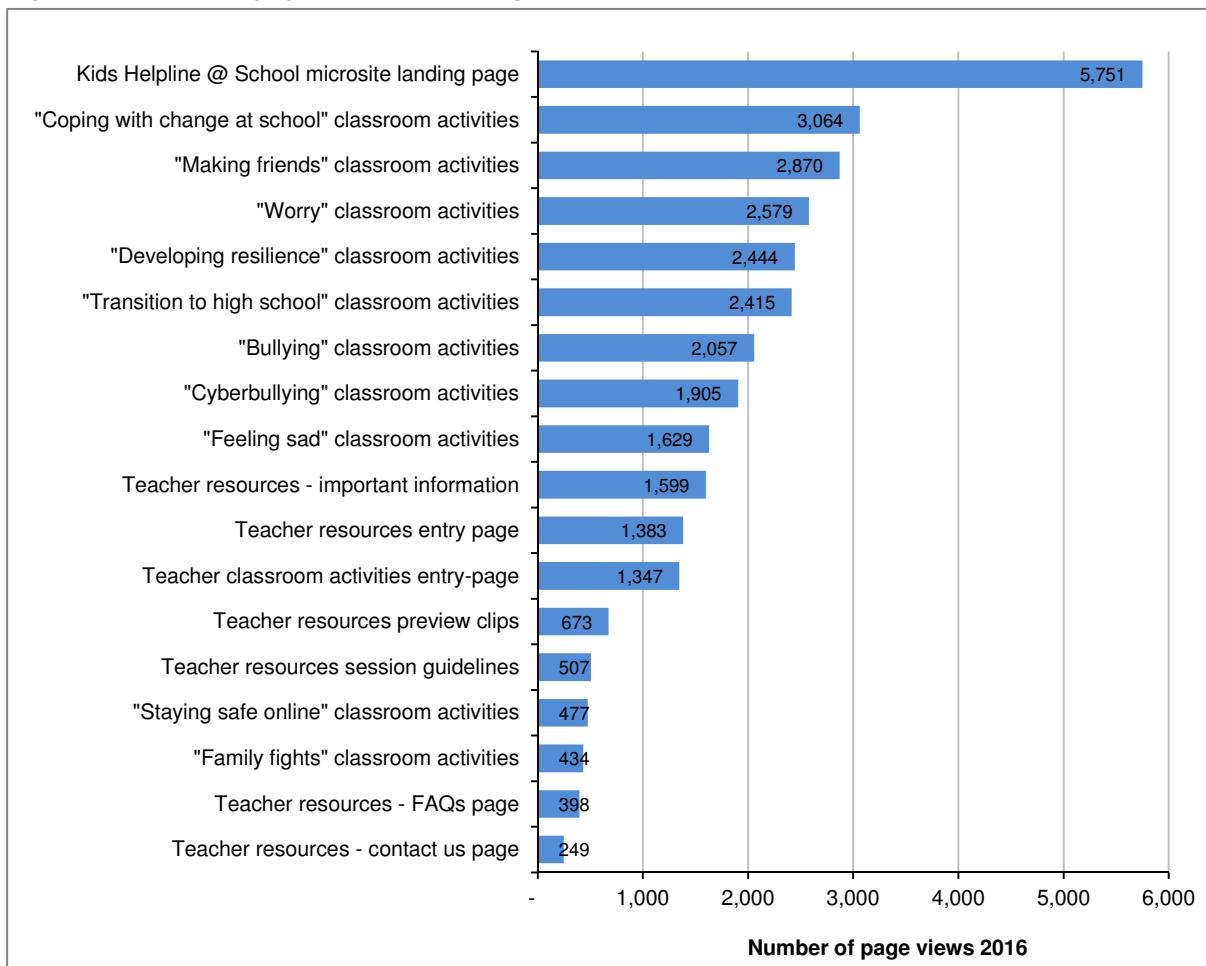
Figure 57. Proportion of 2016 Kids Helpline @ School participating schools – by remoteness (N = 168)



5.2.4 Use of teacher resource materials

During 2016, teachers made substantial use of educational material uploaded to the KAS micro-website with 5,751 views of the KAS microsite landing page. Figure 58 shows the number of views of pages containing specific information or educational material available to teachers on the microsite to support their participation in the KAS program.

Figure 58. Number of page views to Kids Helpline @ School micro-website resources for teachers in 2016



1. Total page views of KAS teacher resources in 2016 = 31,781.

5.3 Summary

Kids Helpline continued its innovative KAS program in 2016, reaching 14,822 primary school students from 170 schools through participation in 539 classroom sessions. The program continued to engage schools from every state and territory, and one third of participating schools in 2016 were located in regional or remote localities. Teachers made extensive use of online educational resources developed by Kids Helpline to support schools' participation in the program, with over 30,000 page views of these resources. With the assistance of Optus, Kids Helpline was able in 2016 to extend its curriculum to include a focus on digital safety. This subject corresponds to the number one topic of interest to visitors to the microsite on the Kids Helpline website designed specifically for this age group (see section 4.2.1).

6. Kids Helpline 2016 client satisfaction & outcome survey

yourtown believes that service users provide an essential perspective in evaluating the quality and effectiveness of Kids Helpline services. One way that **yourtown** engages the views of Kids Helpline service users is through an annual client satisfaction and outcome survey. This chapter provides a summary of findings from the 2016 survey. A more comprehensive report of findings, including qualitative feedback from service users, will be available later in 2017.

6.1 Objectives

The objectives of the Kids Helpline annual client satisfaction and outcome survey are to:

- gauge the satisfaction of children and young people who use the Kids Helpline counselling and support service and/or Kids Helpline website, and
- gain feedback about the service, including the impact service users perceive the service has had on them.

This information is collected both to inform ongoing service development and for the purpose of reporting to funding bodies and sponsors.

6.2 Methodology

A brief online survey, comprising a combination of open and fixed response items, was conducted over nine weeks from November 2016 to January 2017. The survey was open to any individual who had accessed the Kids Helpline counselling and support service or visited the Kids Helpline website within the last 12 months.

A hyperlink to the survey entitled *Have Your Say* was placed on the front page of both the kids' and teens' microsites of the Kids Helpline website. In addition, the survey was promoted to potential respondents through invitations to participate, included in:

- the final exchange of web chat counselling sessions
- the concluding email of email counselling sessions
- the phone call wait message for children and young people waiting to speak to a counsellor (this was active for the last two weeks of the data collection period)
- the closing statement of counsellors to children and young people who participated in phone counselling (this was at the counsellor's discretion, however), and
- a post on the Kids Helpline Facebook page during the data collection period.

6.3 Key findings

6.3.1 Sample

A total of 625 individuals responded to the survey, 611 of whom indicated they were aged 5-25 years. Table I2 provides a summary of the demographic characteristics of respondents. It also compares respondents' characteristics with those of Kids Helpline counselling and support service contacts aged 5-25 years in 2016 to assess how representative the sample may be of those using the counselling service.

Key observations from the data include the following:

- *Gender.* The vast majority of survey respondents were female (83%). Survey respondents were more likely to be female than were counselling and support service contacts in 2016 (83% c.f. 73%). They were also more likely to be intersex, trans or gender-diverse (3% c.f. 1%).
- *Age.* The sample over-represents 13-18 year old service users. Seven out of 10 (71%) respondents were aged 13-18 years, while just over half (56%) of counselling and support contacts in 2016 were in this age range. On the other hand, those aged 19 to 25 years are under-represented in the survey sample compared with the population of Kids Helpline counselling and support service contacts in 2016 (14% c.f. 30%).

- *Cultural background.* Aboriginal and/or Torres Strait Islanders were represented in the survey sample in higher proportion to counselling and support service contacts in 2016 (7% to 4%); however, those from CALD backgrounds were comparatively under-represented (15% c.f. 35%) and those from non-ATSI/CALD backgrounds were comparatively over-represented (78% c.f. 61%)
- *State.* Survey respondents were represented from every state and territory in close proportion to the state breakdown for counselling and support service contacts in 2016.

Table 12. Characteristics of 2016 Kids Helpline client satisfaction and outcome survey respondents compared with 2016 Kids Helpline counselling and support service contacts aged 5-25 years¹

Respondent characteristics	2016 Kids Helpline client satisfaction & outcome survey respondents (n = 625)		2016 Kids Helpline counselling & support service contacts aged 5-25 years (N = 177,591)	
	n	col. %	n	col. %
Gender				
Female	519	83%	83,148	73%
Male	83	13%	29,891	26%
Intersex, trans or gender-diverse	17	3%	1,260	1%
Total	619	100%	114,299	100%
<i>Unknown</i>	6		63,292	
Age group				
5-12 years	89	14%	13,404	14%
13-18 years	438	71%	55,815	56%
19-25 years	84	14%	29,692	30%
26 +	3	<1%	-	-
Total	614	100%	98,911	100%
<i>Unknown</i>	11		78,680	
Cultural background²				
Aboriginal &/or TSI	39	7%	1,627	4%
CALD	92	15%	14,237	35%
Neither ATSI nor CALD	464	78%	24,796	61%
Total	595	100%	40,660	100%
<i>Unknown</i>	30		136,931	
State				
ACT	22	4%	3,334	2%
NSW	186	30%	56,905	35%
NT	5	1%	1,421	1%
QLD	114	19%	31,637	19%
SA	45	7%	10,975	7%
TAS	19	3%	4,254	3%
VIC	171	28%	41,221	25%
WA	50	8%	13,576	8%
Total	612	100	163,323	100%
<i>Unknown</i>	13		14,268	

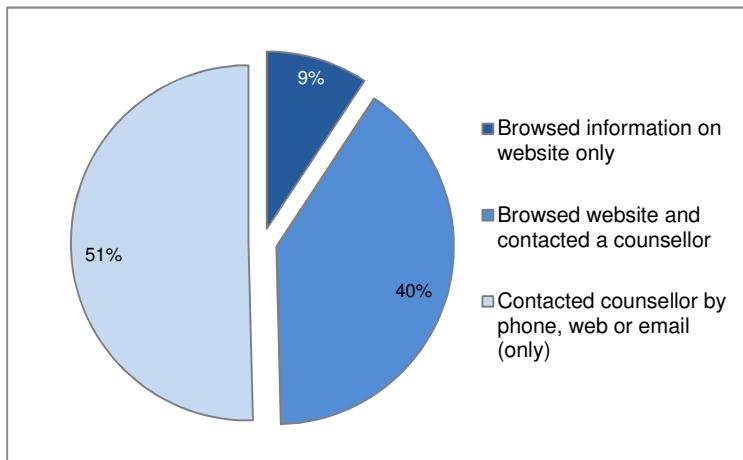
1. Where column percentages sum to more or less than 100%, this is due to rounding.

2. TSI = Torres Strait Islander. CALD = culturally and linguistically diverse. ATSI = Aboriginal and/or Torres Strait Islander

6.3.2 Type of engagement with Kids Helpline in last 12 months

Survey respondents were asked about their engagement with the Kids Helpline counselling and support service and website over the last 12 months. A total of 567 respondents (91%) had contacted the counselling and support service and 310 respondents (50%) had visited or browsed the website. As shown in Figure 59, half the respondents (50%) had contacted the counselling and support service but not browsed the website, while most of the other half (40%) had contacted the counselling and support service *and* browsed the website. Only one in 10 (9%) had visited the website but not contacted the counselling and support service.

Figure 59. Respondents' engagement with Kids Helpline in last 12 months (*n* = 625) (2016)



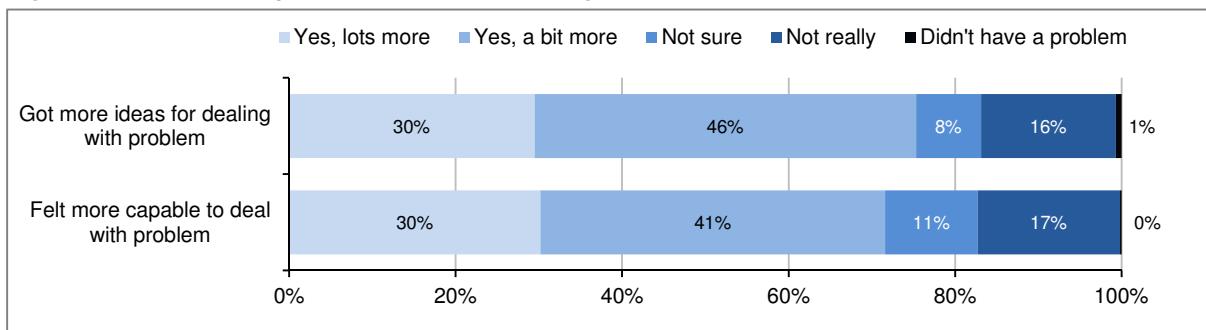
6.3.3 Perceived impact of Kids Helpline counselling and support service

Respondents who reported contacting the counselling and support service (*n* = 567) were asked two questions to gauge the effectiveness of the support provided:

- Last time you spoke to a counsellor (by phone, email or web chat) did you get ideas for how to deal with your problems?
- After you last spoke to a counsellor (by phone, email or web chat) did you feel more capable of dealing with your problems than before?

Figure 60 summarises respondents' answers to these questions. Three out of four respondents (75%) reported having more ideas for dealing with their problems after speaking to a counsellor and a similar proportion (72%) felt more capable of dealing with their problems.³

Figure 60. Perceived impacts of last session talking to a counsellor (*n* = 567) (2016)¹



1. Where percentages sum to more or less than 100%, this is due to rounding.

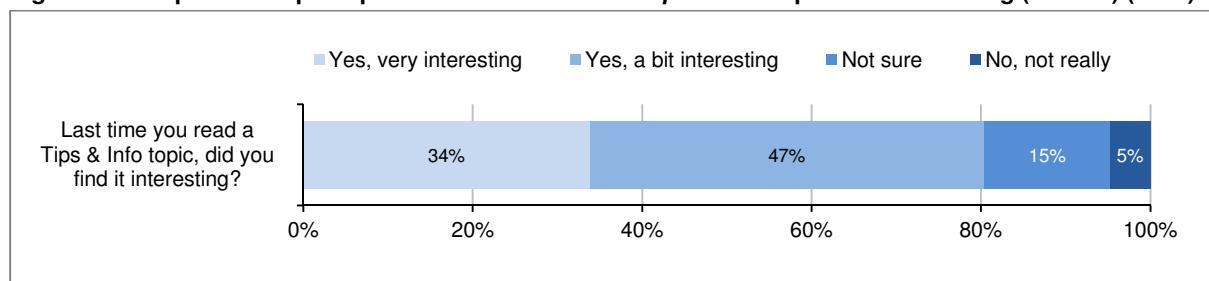
³ The aggregated statistics quoted in this sentence sum to less (75%) and more (72%) than the disaggregated figures presented in the graph due to rounding.

6.3.4 Service user engagement with *Tips & Info*

Respondents who reported having browsed resources on the website in the last 12 months ($n=310$) were asked various questions about *Tips & Info* topics to gauge how well they were engaged by the material and whether or not the support provided was effective.

To assess user engagement, respondents were asked the question: Last time you read a *Tips & Info* topic did you find it interesting? Responses are summarised in Figure 61. Four out of five (80%) respondents said they found the last *Tips & Info* topic they read either *very interesting* (34%) or *a bit interesting* (47%). One in 20, however, did not find the *Tips & Info* topic interesting.

Figure 61. Respondents' perceptions of whether or not *Tips & Info* topics are interesting ($n = 275$) (2016)¹



1. Percentages sum to more than 100% due to rounding.

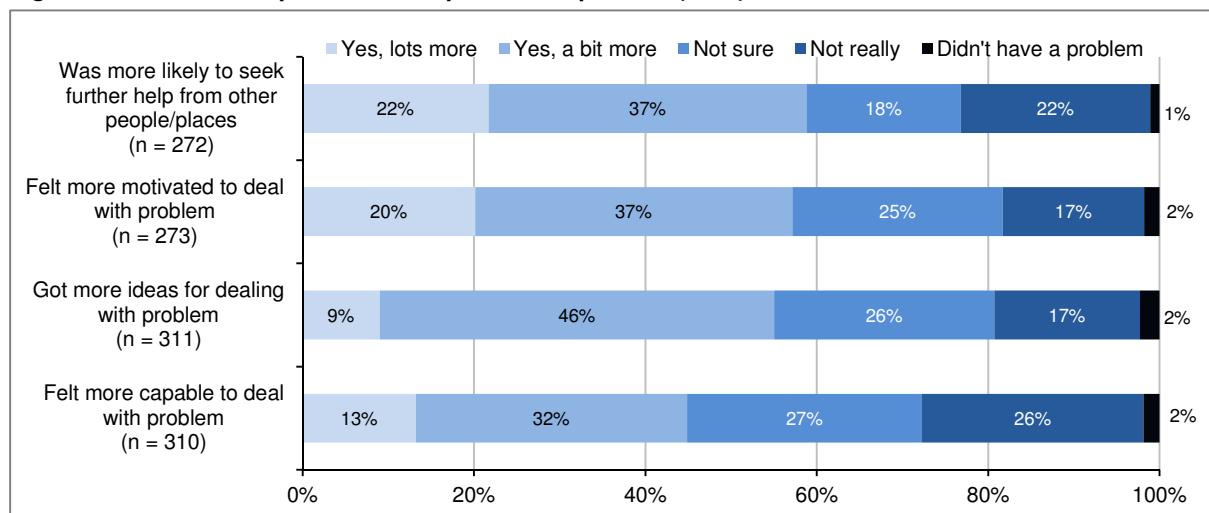
6.3.5 Perceived impact of *Tips & Info*

To assess perceived impact, respondents were asked four questions:

- Last time you read a *Tips & Info* topic did you get ideas for how to deal with your problems?
- After you last read a *Tips & Info* topic:
 - did you feel more capable of dealing with your problems than before?
 - did you feel more motivated to deal with your problem?
 - were you more likely to seek further help from other people/places for your problem?

Responses to these questions are summarised in Figure 62.

Figure 62. Perceived impacts of last *Tips & Info* topic read (2016)¹



1. Where percentages sum to more or less than 100%, this is due to rounding.

Key observations from the data include:

- Very few respondents did not have a problem for which they were seeking help when they read their last *Tips & Info* topic.
- In relation to each of the four impact questions, at least four out of 10 of respondents felt they had more personal resources to deal with their problem after reading the *Tips & Info* topic. Forty-five per cent felt more capable to deal with the problem, 55% felt they had more ideas for what to do, 57% felt more motivated to deal with the problem and 59% reported being more likely to seek further help for the problem.
- The extent to which respondents felt they had more ideas for dealing with their problem after reading a *Tips & Info* topic (55%) is notably lower than the extent to which respondents felt they had more ideas for dealing with their problem after talking to a counsellor (72%).
- Similarly, the extent to which respondents felt more capable to deal with their problem after reading a *Tips & Info* topic (45%) is substantially lower than the extent to which respondents felt more capable to deal with their problem after talking to a counsellor (75%).

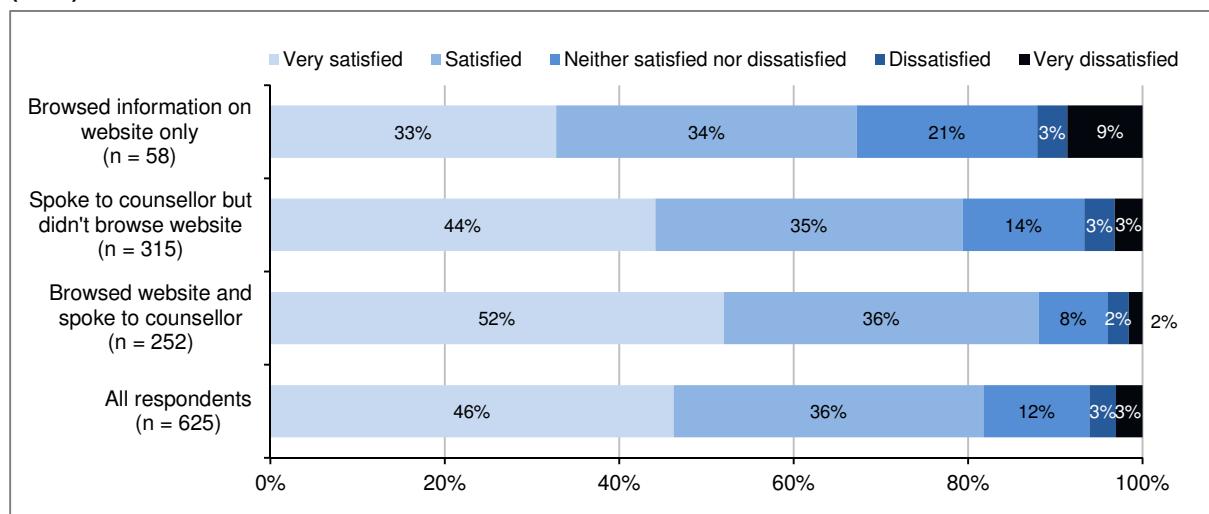
6.3.6 Overall satisfaction

To gauge overall satisfaction with Kids Helpline, respondents were asked two questions:

- Would you recommend Kids Helpline to a friend? (yes/no)
- How satisfied are you with Kids Helpline? (five-point response scale)

A total of 570 out of 625 respondents (91%) said they would recommend Kids Helpline to a friend while 54 (9%) said they would not. Figure 63 shows young people's responses to the five-point satisfaction question. Across all respondents, 82% reported that they were either *satisfied* (36%) or *very satisfied* (46%) with Kids Helpline, while 6% indicated they were either *dissatisfied* (3%) or *very dissatisfied* (3%) with Kids Helpline.

Figure 63. Overall satisfaction with Kids Helpline – all respondents and by types of service engagement (2016)^{1,2}



1. Where percentages sum to more or less than 100%, this is due to rounding.

2. Difference is statistically significant. $\chi^2(8, 625) = 20.86, p = .008$

Respondents' satisfaction with Kids Helpline was analysed according to the type of engagement they reported having with the service over the last 12 months – whether they just browsed information on the website, talked to a counsellor, or did both.⁴ A statistically significant relationship was observed between satisfaction and engagement-type. Those who had both browsed the website and talked to a counsellor were

⁴ These analyses used Pearson chi-square tests of significance. A 95% confidence level was applied.

the most likely to report being satisfied, with one in nine (88%) reporting they were either *satisfied* (36%) or *very satisfied* (52%). Of those who spoke with a counsellor but did not browse the website, 79% indicated they were *satisfied* (35%) or *very satisfied* (44%). The least commonly satisfied group was those who had browsed information on the website but not spoken to a counsellor – two out of three (67%) of these respondents indicated being either *satisfied* (34%) or *very satisfied* (33%).

6.4 Summary

Kids Helpline received a healthy response to its annual client satisfaction and outcomes survey with 625 respondents. The sample includes children and young people from all states and territories and is broadly representative of Kids Helpline counselling and support service contacts in 2016 with a few exceptions.

Roughly three out of four respondents who had spoken to a counsellor reported having more ideas or feeling more capable to deal with their problem as a result.

Four of five who had browsed information on the website found the *Tips & Info* topics interesting, and at least four out of 10 felt they had more personal resources for dealing with their problems as a result of reading the material.

More than four out of five respondents indicated satisfaction with the service and nine out of 10 said they would recommend the service to a friend. Satisfaction was found to be related to respondents' type of engagement with the service over the last 12 months. Respondents who had both spoken to a counsellor and browsed resources on the website were the most likely to report satisfaction with Kids Helpline.

7. Conclusion

This report has provided a comprehensive statistical overview of the activities of Kids Helpline during 2016, presenting a wide range of information about services delivered, demand for services, client needs and characteristics, and client satisfaction and perception of service impact. It has also provided trend analysis on a number of measures to help identify emerging issues in service demand and delivery.

This concluding section:

- draws together key themes from the data
- highlights other publications in the series that may be of interest to readers, and
- invites readers to assist Kids Helpline to continue and extend the critical support it provides to vulnerable young Australians.

7.1 Key themes from the data

Various themes emerge from reviewing the data presented in the 2016 *Overview* report, three of which are summarised in the following section.

Theme 1 Kids Helpline continues to play a comprehensive role in protecting young Australians from abuse and harm

Taken together, the chapters of this report highlight the multifaceted role that Kids Helpline continues to play in protecting children and young people from harm. The child protection work of the service includes primary, secondary and tertiary prevention activities:

Primary prevention

Primary prevention activities are universal or non-targeted services for children and young people that aim to reduce their vulnerability to abuse and other harms. Kids Helpline's primary prevention activities include:

- *information, referral and counselling support* for children and young people via phone, web chat and email any time of the day in relation to any issue (see Chapter 2)
- *age-appropriate self-help resources* on the Kids Helpline website for children, teenagers and adults covering a wide range of topics including those on building children and young people's resilience and on keeping children and young people safe – from bullying, relationship violence, child abuse, domestic violence, risky behaviour and online harassment (see Chapter 4), and
- *the Kids Helpline @ School program*, which aims to build children and young people's resilience, help-seeking behaviours, coping strategies and knowledge of sources of help, with a focus on preventing and responding to negative online experiences (see Chapter 5).

Secondary prevention

Secondary prevention activities are targeted at those experiencing abuse or harm, or at imminent risk of abuse or harm, and aim to protect children and young people from further or more serious impact. Kids Helpline's secondary prevention activities include providing crisis responses and duty-of-care interventions via phone, web chat and email to children and young people experiencing, or at significant risk of mental illness escalation, child abuse, family/domestic violence, suicide, and self-injury. They also include supporting children and young people experiencing bullying and cyber-safety issues and other forms of violence and abuse, and where necessary assisting them to make formal complaints about their treatment.

Secondary prevention activities in 2016 include the following responses to children and young people:

- *Mental illness*. Twenty-three per cent of counselling contacts from children and young people were in relation to mental health issues. In half (52%) of these contacts, the child or young person was seeking support and strategies to manage an established disorder, while in close to two-fifths of counselling contacts (37%), help was being sought to manage the symptoms of an undiagnosed disorder (see section 3.7.1).
- *Child abuse and family/domestic violence*. Eight per cent of counselling contacts were about child abuse, domestic and/or family violence or issues related to living in out-of-home care. Seven out of 10 (69%) of

these contacts were about current abuse or risk of abuse, and one in 10 (11%) was about concern for another person experiencing or at risk of abuse (see section 3.7.3).

- *Suicide.* Thirteen per cent of counselling contacts were about suicide. The vast majority (77%) of these contacts were about the child or young person's own suicidal thoughts or fears. Just less than one in 10 (9%) of these contacts concerned the child or young person's immediate intention to suicide, or their attempt at suicide at the time of the call. Fourteen per cent of these contacts were about concern for another person's suicidal thoughts or feelings (see section 3.7.2).
- *Self-injury.* Seven per cent of counselling contacts were in relation to self-injury concerns. In 78% of these contacts, the child or young person was seeking help to avoid acts of self-injury and in 4% of these contacts, the child or young person was seeking medical assistance following self-injury. Eleven per cent of these contacts were about concern for another person (see section 3.7.4).
- *Bullying.* Six per cent of counselling contacts were about bullying. Seven out of 10 (70%) of these contacts were from children and young people experiencing some form of bullying according the Kids Helpline definition. Types of bullying behaviour reported include: verbal abuse, exclusion, isolation and/or spreading of rumours, intimidation, extortion or threats of personal harm, and physical aggression or assault. In 20% of contacts about bullying, the child or young person indicated that the bullying took a variety of these forms (see section 3.7.5).
- *Duty-of-care interventions.* There were 1,907 instances where Kids Helpline counsellors contacted emergency services or other agencies to help protect a child or young person experiencing, or at imminent risk of, significant harm. That's more than 35 emergency care interventions a week. Child abuse and suicide attempts were by far the most common reasons for duty-of-care interventions in 2016 (38% and 34% respectively) (see section 3.6.2).

Tertiary prevention

Tertiary prevention activities are targeted at those already impacted by abuse, trauma or other harms and aim to help them manage or recover from these experiences. Tertiary prevention activities offered by Kids Helpline include counselling in relation to past abuse as well as case management support to assist children and young people with complex or ongoing issues associated with past trauma and abuse:

- *Support with past abuse.* In 2016, one in five (20%) counselling contacts about child abuse were from children and young in relation to the impacts of past abuse (see section 3.7.3).
- *Support with ongoing issues.* Child abuse is strongly associated with long term negative impacts on social and emotional wellbeing and functioning. Children and young people who have experienced abuse and are being impacted by such consequences can receive ongoing counselling and case management if they would like this. The most common concern of ongoing support clients in 2016 was mental health (30% of ongoing support clients), followed by emotional wellbeing concerns (19%) and suicide-related concerns (17%). Seven per cent of counselling sessions with clients receiving ongoing support were in relation to child abuse (see Figure I8).
- *Self-help resources on the Kids Helpline website.* Many of the self-help resources developed for specific age groups on the Kids Helpline website are focused on mental and emotional wellbeing topics that may be relevant to children and young people who have experienced abuse or trauma – like anxiety, depression, self-harm, suicide, social anxiety, loneliness, etc. These resources link children and young people to further information and professional support if they are experiencing ongoing issues.

Theme 2 There are continuing shifts in the nature of children and young people's help-seeking

Trend data on service usage presented in this report highlight ongoing shifts in the nature of children and young people's help-seeking in Australia and how Kids Helpline is responding to these. These shifts in help-seeking and Kids Helpline's responses to these can be summarised as follows:

Help-seeking shift #1

There continues to be a gradual but steady shift in children and young people's medium of preference for contacting a counsellor – away from telephone and email towards web chat, and away from landlines towards mobile phones

- Over the last decade, the proportion of contacts from children and young people seeking counselling support whose preferred medium is phone has decreased from 77% in 2007 to 56% in 2016 (see Figure 10). While the proportion of counselling sessions conducted by email rose as high as 25% in 2012, this proportion has been gradually falling since, back to 14% in 2016. The proportion of counselling sessions taking place via web chat, on the other hand, has increased from 9% to 29%.
- From 2014 to 2016, almost every subgroup of the Kid Helpline population analysed, except contacts known to be Aboriginal and/or Torres Strait Islander, have slightly or moderately increased their preference for web chat while reducing their preference for email-based contact and/or phone-based contact. For the vast majority of subgroups, there is a reduction in preference for both email *and* phone over this period (see section 3.3.2, Table 5).
- The proportion of answered phone contacts from mobile phones compared with landlines continues to increase (from 54% in 2007 to 82% in 2016, see Figure 38). This trend away from landlines towards mobiles has been going on for over a decade. In 2002, 95% of all phone attempts were from landlines and only 5% were from mobiles.
- These shifts in medium of preference for contacting a counsellor reflect growing levels of mobile and internet-based social communication and interaction in the population, and particularly among children and young people growing up in the current technological environment.

Kids Helpline's response

Kids Helpline has been responding to children and young people's shifting preferences for particular communication media in the following ways:

- *Extending web chat operating hours.* In early 2016, Kids Helpline substantially expanded web chat operating hours – originally web chat was only available from 12pm to 10pm Monday to Friday and from 10am to 10pm on weekends; from early 2016, hours were extended gradually to finally span 8am to midnight, seven days a week.
- *Upgrading technology.* The Kids Helpline website was upgraded in February 2016 to optimise its usage by mobile devices, including the introduction of a new mobile-friendly interface for the delivery of web counselling.
- *Shortening web chat wait times.* Over the last five years, mean wait times for web calls being answered by a counsellor have reduced substantially (from 78 minutes in 2012 to 22 minutes in 2016).
- *Improving web chat response rates.* Over the last five years response rates for web chat have increased markedly (from 30% in 2012 to 48% in 2016) (see Figure 39).
- *Answering more web chat contacts.* Over the last five years, the number of answered web chat contacts has grown considerably (by 151%, from 12,643 in 2012 to 31,765 in 2016) (see Figure 37).

Help-seeking shift #2

The intensity of support required by those contacting the counselling and support service is increasing

- The proportion of contacts approaching Kids Helpline for counselling support – the more intensive kind of support provided by the service – has steadily increased over the last decade (by 22% in raw counts, or, as a proportion of all contacts received, from 18% to 37% (see Figures 42 and 43)).
- In addition, the mean length of counselling sessions has been increasing over time. In 1991, counselling sessions were 10 minutes on average; in 2016, they were 37 minutes (see Figure 46).
- Increasing session lengths are associated with changes in the types of issues being brought for counselling by children and young people (see section 3.4.9, Table 6). From 1997 to 2016, analysing in five-yearly intervals, there has been a 487% increase in the number of counselling contacts responded to where the client's main concern was *mental and/or emotional health or illness, including self-injury*. During this time there was also a 208% increase in the number of counselling sessions where the client's main concern was *suicide*. Counselling sessions in relation to these issues are longer on average owing to their comparative complexity and the need to provide the child or young person with sufficient space and time to discuss these issues.
- In close to half (45%) of all counselling contacts in 2016, the child or young person was assessed as experiencing at least one of the following issues – a mental health disorder, issues with self-injury, or current thoughts of suicide. Over the period for which data are available, the proportion of counselling contacts in which the child or young person is identified as struggling with mental ill-health is increasing, as is the proportion of contacts where the child or young person discloses current thoughts of suicide (see section 3.9.2).
- The number of duty-of-care interventions initiated by Kids Helpline counsellors to protect a child or young person experiencing significant harm, or at imminent risk of significant harm, has increased by 157% over the last five years (from 741 in 2012 to 1,907 in 2016). Child abuse and suicide attempts are the most common reasons for duty-of-care interventions (see section 3.6.2).

Kids Helpline's response

As noted in section 3.4.9, shifts in the frequency with which particular issues are brought by children and young people for counselling reflect innovations in service delivery over the last decade designed to respond better to these more complex presentations. These innovations include:

- *increasing the professional qualifications of counsellors*, including the provision of mandatory training in recognising and responding to mental health conditions
- *increasing the age of eligibility for service* from 18 to 25 years with mental health concerns correlating strongly with increasing age
- *changing our model of service delivery* to support children and young people with chronic and complex issues by expanding the provision of ongoing support options and case management services, and
- *continually upgrading the professional knowledge and skills of counsellors* to respond to emerging client issues; for example, Kids Helpline counsellors have recently received specialist training in such topics as trauma, online safety, grief and loss, case management, homicidal presentations and bullying.

Help-seeking shift #3

Help-seeking in relation to cyber-safety issues, including cyberbullying, is growing

With children and young people's increasing presence and participation in cyberspace, their exposure to violence, intimidation, harassment, bullying and exploitation in that environment is greater, reflected in increased help-seeking by children and young people in relation to cyber-safety issues. For example:

- By far the most commonly viewed kids' *Tips & Info* topic on the Kids Helpline website in 2016 was *staying safe online*, viewed over 8,500 times. *Staying safe online* was also the most visited kids' topic in 2014 and 2015 (see section 4.2.1).

- Among teenagers, out of 51 *Tips & Info* topics available for self-directed help-seeking in 2016, *understanding cyberbullying* was the fourth most commonly viewed resource, receiving 11,351 page views, and *sexting and the consequences* was the seventh most viewed resource, receiving over 10,000 page views (see section 4.2.1).
- The most commonly sought-after session topic in the Kids Helpline @ School curriculum in 2016 was *online safety*, with close to 4,000 primary school children participating in 132 sessions held on this topic. Over 900 children participated in sessions on the topic of *relationships online* and more than 650 attended sessions on the topic of *cyberbullying* (see section 5.2.2).
- Close to 2,000 referrals to the Kids Helpline website in 2016 came from the Australian Government's eSafety website and over 2,600 referrals came from other cyber-safety and anti-bullying websites (i.e. Bullying No Way, Take a Stand Together, National Centre Against Bullying) (see section 4.2.2).

Kids Helpline's response

Some of the ways in which Kids Helpline is responding to this growing sphere of vulnerability and help-seeking by children and young people, include the following:

- *Enhancing our understanding.* In 2016, Kids Helpline expanded its data collection system to gather more reliable information about the frequency with which cyberbullying, and cyber-safety issues more generally, are being discussed in counselling contacts (see section 3.7.5 and 3.8 for more on this). This is to inform both counselling practice and policy advocacy work in this area.

Based on data collected from July-December 2016:

- 28% of counselling contacts seeking help in relation to bullying indicated to counsellors that the bullying included online or texting elements, and
- one in 20 counselling contacts (5%) disclosed feeling concerned, worried or unsafe as a result of online or texting activity.

This is valuable base-line data for analysing trends in this area into the future.

- *Specialist training.* Kids Helpline counsellors have also received specialist training in responding to cyber-safety issues and complaints, thanks to our partnership with the Office of the Children's eSafety Commissioner.
- *Facilitating access to support.* As part of our partnership with the eSafety Commission, Kids Helpline provides priority access to web counselling to children and young people who visit the eSafety website for assistance with cyber-safety concerns.
- *Enhancing prevention and early intervention.* In 2016, Kids Helpline expanded its Kids Helpline @ School program to include a digital safety curriculum, thanks to the financial support of Optus. Sessions included in this curriculum focus on assisting primary school children to engage positively and safely in online environments, teaching them principles of 'digital citizenship' and how to speak out when they, or others, have negative online experiences.

Help-seeking shift #4

The demographic profile of help-seekers is shifting

Two key demographic shifts that are underway are: the increasing proportion of contacts from children and young people:

- from culturally and linguistically diverse backgrounds, and those
- who identify as neither male nor female.

Kids Helpline's response

Kids Helpline has responded to these shifting demographics in various ways including the following:

- *Specialist training.* Counsellors have been provided with specialist training in cultural sensitivity and in working sensitively and effectively with gender-diverse and same-sex attracted young people.
- *Enhancing data collection.* With increasing numbers of contacts from children and young people identifying as neither male nor female, Kids Helpline introduced a new gender category for data collection in 2015 – intersex, trans and gender-diverse. In 2016, 1,260 contacts (or 1%) were received from children and young people identifying with this third gender category.

Theme 3 Kids Helpline can offer unique insights into the contemporary help-seeking concerns of young Australians

This report summarises data in relation to the help-seeking needs and concerns of Kids Helpline counselling and support service contacts (non-counselling contacts in section 3.2.3 and counselling contacts in sections 3.4 and 3.5) and the topics of interest to self-directed help-seekers accessing the Kids Helpline website (section 4.2). Together this information provides unique and valuable insights into the most common issues for which young Australians currently seek help.

Concerns of children and young people contacting the counselling and support service

- The issues for which children and young people most commonly sought counselling support in 2016 were *mental health* (23%), *family relationships* (19%), *emotional wellbeing* (17%), *suicide* (13%) and *dating and partner relationships* (10%).
- The relative frequency with which Kids Helpline has been contacted about each of these issues over the last five years has remained constant.
- While there is relative stability in the frequency with which particular issues of concern are being raised with counsellors by the client population, this population is far from homogenous in its help-seeking concerns. Chapter 3 demonstrates that the concerns of children and young people contacting Kids Helpline in 2016 vary:
 - greatly according to the child or young person's age group and cultural background
 - moderately according to their gender, and
 - slightly according to their chosen medium of contact.

Remoteness classification appeared to have negligible association with the concerns for which children and young people were seeking counselling support, however.

Concerns/interests of children and young people visiting the Kids Helpline website

- The most frequently viewed *Tips & Info* topics for children in 2016 were *staying safe online*, *happy being yourself*, *building respectful relationships*, *dealing with homework*, and *making great friendships*. As just noted, *staying safe online* was by far the most visited page in 2014 and 2015 as well, suggesting that *cyber-safety* may be a standout concern for those in this age group. Also of note, 10 of the 20 most viewed topics in 2016 relate to dealing with different kinds of relationships and interpersonal issues.
- The most frequently viewed *Tips & Info* topics for teenagers in 2016 were *leaving home*, *handling peer pressure*, *body image*, *understanding cyberbullying* and *understanding bullying*. The topics *handling peer pressure*, *leaving home* and *body image* were also among the five most frequently visited teens' *Tips & Info* topics in 2014 and 2015, suggesting some continuity in the issues of interest to website visitors of this age group. One in every 10 page views (10%) in 2016 was of an information resource on bullying.
- The most common sources of referral to the Kids Helpline website in 2016 were youth and generalist mental health and counselling websites and cyber-safety and anti-bullying websites. These were also the most common sources of referral in 2014 and 2015, suggesting that *mental and emotional wellbeing*, *cyber-safety* and *bullying* are key contemporary concerns of young Australians and their caregivers.

7.2 Other publications on Kids Helpline in 2016

This report is part of a suite of publications produced by **yourtown** about Kids Helpline in 2016. In addition to this *National Statistical Overview* report, **yourtown** has prepared the following publications:

- The *Kids Helpline Insights 2016* which provides a summary of headline data from this report as well as information about:
 - how Kids Helpline and **yourtown** advocate to improve services for and policies impacting on vulnerable young Australians
 - how **yourtown** collaborates with government, business and the community to maximise the reach and quality of the services it delivers to children and young people
 - service users' needs and experiences, drawn from case studies and young people's own stories, and
 - innovations and developments in service delivery to improve our responsiveness to the needs of children and young people contacting Kids Helpline.
- *Kids Helpline Insights 2016 – Statistical Summary Report* for each state and territory. These reports includes presentation of:
 - the demographic characteristics of Kids Helpline contacts from that state or territory in 2016 with comparison to contacts from the rest of Australia
 - a three-year trend analysis of the demographic characteristics of contacts from that state or territory
 - the most common concerns of counselling contacts responded to from that state or territory compared with the concerns of counselling contacts from the rest of Australia
 - a three-year trend analysis of the most common concerns of counselling contacts from that state or territory, and
 - a three-year trend analysis of all concerns raised by counselling contacts from that state or territory.
- In addition to these publications, **yourtown** routinely publishes *research articles*, *information sheets* and *policy advocacy papers* based on analysis of specific Kids Helpline data as appropriate to the topic.

All publications are available from the **yourtown** website.

7.3 How to support Kids Helpline

In 2016 Kids Helpline cost \$10.5 million to run. **yourtown** provided 78% of the funding thanks to the generosity of supporters of the Art Union, donations and corporate support, while the Australian, Queensland and Western Australian Governments contributed the remaining 22%.

Despite the generosity of the community and governments, Kids Helpline is unable to meet the current demand from children and young people for counselling and other support. On average, a child or young person makes contact with the Kids Helpline counselling and support service every 90 seconds but many of these contacts we are still unable to respond to. In 2016, our overall response rate dipped to 51% as we focused on expanding the access of children and young people to counselling and support via web chat.

'We care and we listen, any time and for any reason.' This is the promise Kids Helpline has made to the children and young people of Australia. Please help us to keep this promise by donating today: www.kidshelpline.com.au/support/donate.

8. Appendix

8.1 Notes regarding data collection, analysis and interpretation

8.1.1 Limitations on counselling service data collection

Kids Helpline counsellors record information at the end of every telephone, web chat or email session. There are a maximum of 38 different fields where data may be logged; however, only 10 are mandatory (including date, time, length of session, frequency of contact, main concern or problem, problem severity, referral, and whether or not the child or young person was experiencing current thoughts of suicide, was engaged in deliberate self-injury or was assessed to have a mental health disorder or symptoms consistent with a mental health disorder).

Ideally, counsellors enter information for each field. In reality, however, the amount of information recorded about each session varies due to the following:

- *Privacy and confidentiality* – Kids Helpline offers itself to children and young people as a private and confidential service. Frequently clients choose not to reveal details about themselves, particularly those that might compromise their anonymity.
- *Sensitivity of information* – the nature of some contacts is such that direct information gathering is not advisable, appropriate or possible.
- *The length or nature of the call* – at times even basic data collection is impossible or irrelevant.

Percentages and proportions presented in this report are based on those contacts for which information is available. Most tables indicate the number of contacts where data are missing and all figures report the size of the population or subpopulation for which data are available (N). Where missing data are substantial, this can therefore be identified.

8.1.2 Analysis

Most of the analysis presented in this report is in the form of frequencies and/or percentages of Kids Helpline contacts meeting particular criteria. Sometimes percentages in tables are calculated by row and sometimes by column depending on the purpose of the analysis. This will be indicated in the table header (either *col. %* or *row %*). Percentages are almost always provided as rounded integers, so where column or row percentages sum to slightly more or less than 100%, this is due to rounding.

Another reason that percentages may sum to more than 100% is where data collection fields permit multiple responses. Many of the figures presented in the report show the percentage of groups of counselling contacts with specific concerns. Because counsellors can record up to four concerns per contact, percentage frequencies in these figures will exceed 100% in most cases.

Subgroup analysis

Subgroup analysis is undertaken extensively in Chapter 3, comparing Kids Helpline counselling contacts by age group, gender, cultural background, remoteness of locality, type of support relationship to the service, and so on. Note that statistical significance is not reported for any subgroup comparisons as all the data in this chapter pertain to the population of Kids Helpline contacts in 2016, not samples of this population.

Trend analysis

Changes in a range of client characteristics, client demand and service delivery variables are analysed over the last three years (2014-2016), five-year (2012-2016) or 10 years (2007-2016) for the most part. Occasionally trends are analysed over a longer period of time where this is possible and necessary to understand shifts occurring in service delivery. Again, statistical significance is not reported in these analyses as the data analysed concern the population of Kids Helpline contacts during this period, not random samples of this population.

Remoteness analysis

Throughout Chapter 3, client characteristics and concerns are analysed by remoteness of locality. This analysis is based on an adaptation of the Australian Statistical Geography Standard (ASGS) currently used by the Australian Bureau of Statistics. This adaptation involves attributing a categorical descriptor of remoteness to each Australian postcode – *Major City, Inner Regional, Outer Regional, Remote, and Very Remote* – based on the majority categorisation of the postcode under the ASGS. So where a postcode may have been classified under the ASGS as 45% Inner Regional and 55% Outer Regional, in the current analysis the postcode would be classified as Outer Regional. Accordingly, the analysis of remoteness is approximate and may potentially obscure or misrepresent location-based differences.⁵

In addition, postcode information is available for half (51%) of counselling contacts in 2016 and there are likely to be biases associated with missing and known data. These factors will impact on the reliability of the remoteness analysis presented in Chapter 3 and care therefore needs to be taken with how these data are interpreted and used.

8.1.3 Other issues in interpretation

Describing but not explaining observations in the data

Throughout this report we have endeavoured to present data objectively, describing and summarising key observations for readers. With the exception of the conclusion and parts of Chapter 3 discussing trends service demand and client concerns, we have tried to avoid offering explanations for phenomena observed in the data. This is because there may be various explanations for these and without thoroughly considering other relevant sources of information and research – something that is beyond the scope of this report – explanations offered may be misleading or incorrect.

Deciding when observed differences are meaningful

There is likely to be random variation in the data collected from year to year in addition to non-randomised variation. In this report, variations of less than 4% over a time period of 3 to 10 years are not interpreted as meaningful and not specifically referred to.

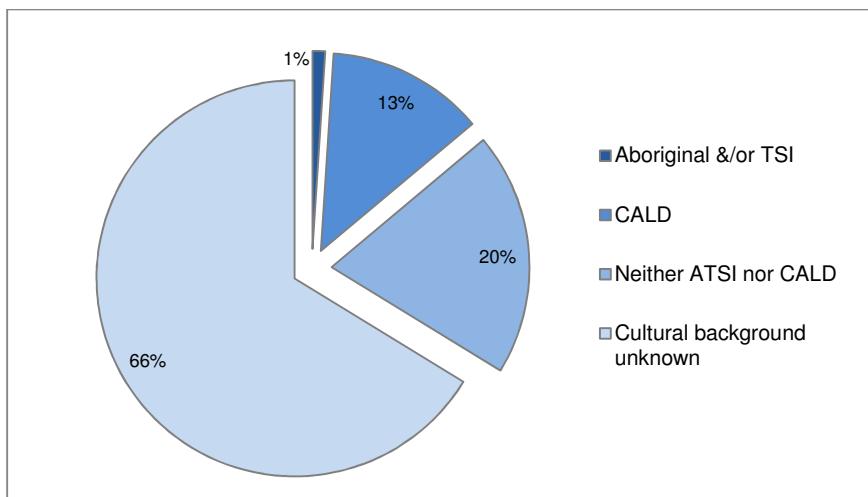
Dealing with missing data

The extent of random variation is likely to increase with the proportion of missing data and to decrease with the size of the subpopulation being analysed. Where substantial proportions of missing data exist, and/or where the subpopulation is very small, this is noted in the text along with caution about interpretation and use of the data.

For example, as shown in Figure 64 below, cultural background information is only available for 34% of counselling contacts in 2016. Accordingly, when changes over time in the concerns of Aboriginal and/or Torres Strait Islander contacts are analysed, a substantial amount of the variation observed may be attributable to the incomplete picture we have of this very small subpopulation. There may also be biases associated with missing and known data. For example, we are more likely to know the cultural background of ongoing clients, or clients with more significant mental health concerns.

⁵ For more information on the Australian Statistical Geography Standard (ASGS) Remoteness Structure refer to [http://www.abs.gov.au/websitedbs/d330114.nsf/home/australian+statistical+geography+standard+\(asgs\)](http://www.abs.gov.au/websitedbs/d330114.nsf/home/australian+statistical+geography+standard+(asgs)).

Figure 64. Percentage of 2016 Kids Helpline counselling contacts aged 5-25 years – by cultural background (N = 66,963)



The impact of repeat contacts

Another issue that needs to be considered when interpreting the data in this report is the issue of repeat contacts. Children and young people are free to contact Kids Helpline as often as they need. Therefore, data reported may include repeat contacts from the same individuals over a period of time. This can result in the data not being reasonably representative of children and young people in a subpopulation, particularly when a subpopulation is very small or where there is a large amount of missing data related to that data collection field – for example, the client's remoteness classification or cultural background. It may also result in the appearance of trends that are not reflective of genuine changes in the characteristics or needs of the subpopulation. Similarly, it may result in failure to identify trends that really do exist.

The existence of repeat contacts in the population of contacts analysed is another reason why statistical significance tests are avoided as these assume unique randomised sampling of a population.

References

- Fitzpatrick, K., Euton, S., Jones, J. & Schmidt, N. (2005). Gender role, sexual orientation and suicide risk. *Journal of Affective Disorders, 87*(1), 35-42.
- Grossman, A. & D'Augelli, A. (2006). Transgender youth: Invisible and vulnerable. *Journal of Homosexuality, 51*, 111-128.
- King, R., Bambling, M., Lloyd, C., Gomurra, R., Smith, S., Reid, W. & Wegner, K. (2006). Online counselling: The motives and experiences of young people who choose the Internet instead of face-to-face or telephone counselling. *Counselling and Psychotherapy Research, 6*(3), 169-174.
- LeVassuer, M., Kelvin, E. & Grosskopf, N. (2013). Intersecting identities and the association between bullying and suicide attempt among New York City youths: Results from the 2009 New York City Youth Risk Behaviour Survey. *American Journal of Public Health, 103*(6), 1082-1089.
- Meyer, I. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin, 129*(5), 674-697.
- Mueller, A., James, W., Abrutyn, S. & Leven, M. (2015). Suicide ideation and bullying among US adolescents: Examining the intersections of sexual orientation, gender, and race/ethnicity. *American Journal of Public Health, 105*(5), 980-985.
- Reisner, S., Greytak, E., Parsons, J. & Ybarra, M. (2015). Gender minority social stress in adolescence: Disparities in adolescent bullying and substance use by gender identity. *The Journal of Sex Research, 52*(3), 243-257.
- Roberts, A., Rosario, M., Slopen, N., Calzo, J. & Austin, S. B. (2013). Childhood gender non-conformity, bullying victimisation, and depressive symptoms across adolescence and early adulthood: An 11-year longitudinal study. *Journal of American Academy of Child and Adolescent Psychiatry, 52*(2), 143-152.
- Russell, S. & Joyner, K. (2001). Adolescent sexual orientation and suicide risk: Evidence from a national study. *American Journal of Public Health, 91*(8), 1276-1281.
- Stone, D., Luo, F., Ouyang, L., Lippy, C., Hertz, M. & Crosby, A. (2014). Sexual orientation and suicide ideation, plans, attempts, and medically serious attempts: Evidence from local Youth Risk Behaviour Surveys, 2001-2009. *American Journal of Public Health, 104*(2), 262-272.
- Walls, N. E., Potter, C. & Van Leeuwen, J. (2009). Where risks and protective factors operate differently: Homeless sexual minority youth and suicide attempts. *Child & Adolescent Social Work Journal, 26*, 235-257.



24/7 HELP FOR CHILDREN AND YOUNG PEOPLE AGED 5–25 YEARS

Kids Helpline
1800 55 1800
kidshelpline.com.au

The **Kids Helpline Insights 2016: National Statistical Overview** provides extensive data about the issues affecting children and young people across Australia.

It is supported by regional based **State and Territory Reports** and the **Kids Helpline Insights 2016 summary report**.

These can be accessed at
kidshelpline.com.au/reports

Contact us:
07 3368 3399
kidshelpline.com.au
facebook.com/KidsHelpline

Media contact:
07 3867 1395
media@yourtown.com.au

Help us:
facebook.com/yourtownprizehomes
kidshelpline.com.au/support
corporaterelations@yourtown.com.au