insights2017

kidshelpline
Anytime | Any Reason

Kids Helpline National Statistical Overview

Insights into young people in Australia

Document version: Final
Issue date: 28 February 2018
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 72% of the funding for Kids Helpline in 2017 thanks to the generosity of supporters of the Art Union, donations and corporate support, including Optus' support of the Digital Thumbprint Program, delivered by Kids Helpline Counsellors, free to primary schools nationally.

Australian, Queensland and Western Australian Governments provided 28% of the service's funding.

Recommended citation:

yourtown (2018). *Kids Helpline Insights 2017: 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 media@yourtown.com.au, or contact the Head of Marketing and Fundraising Tracey Gillinder on 0434 077 478 (email: tgillinder@yourtown.com.au) or the Corporate Affairs and Media Advisor Regan Flor on 07 3867 1395 (email: rflor@yourtown.com.au).

For other reports related to Kids Helpline research, evaluations and advocacy, see https://www.yourtown.com.au/insights/research-and-evaluations

© yourtown 2018

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 xvi
Kids Helpline annual counselling client satisfaction and outcome survey xviii
Kids Helpline @ School program xix
Key themes from the data xx

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 people in Australian 5
2.2.1 At an individual level 5
2.2.2 At a systemic level 8
2.3 Summary 12

3. Kids Helpline counselling and support service 13
3.1 Contact characteristics 14
3.1.1 Kids Helpline's *Record-a-Contact* database 14
3.1.2 Contact characteristics in 2017 15
3.1.3 Trends in contact characteristics 16
3.1.4 Summary 20
3.2 Contacts by type of help-seeking 21
3.2.1 Counselling and non-counselling contacts in 2017 21
3.2.2 Trends in help-seeking – counselling versus non-counselling support 23
3.2.3 Trends in help-seeking – types of non-counselling contacts 23
3.2.4 Summary 24
3.3 Medium of contact 25
3.3.1 Phone, web chat and email contacts in 2017 25
3.3.2 Trends in medium of contact 27
3.3.3 Summary 28
3.4 Issues for which children and young people most commonly sought counselling support 30
3.4.1 All counselling contacts 30
3.4.2 By medium of contact 31
3.4.3 By age group 32
3.4.4 By gender 34
3.4.5 By age group and gender 35
3.4.6 By cultural background 37
3.4.7 By remoteness 38
3.4.8 By type of support relationship with the service 39
3.4.9 Trend analysis of client concerns 40
3.4.10 Summary 46

3.5 All concerns of children and young people who received counselling 47
3.6 Referral to further support and duty-of-care actions 49
3.6.1 Referring children and young people to further support 49
3.6.2 External contacts and duty-of-care interventions 49
3.6.3 Summary 52
3.7 Counselling contacts about issues of contemporary social policy interest 53
3.7.1 Mental health 53
3.7.2 Suicide 54
3.7.3 Child abuse 55
3.7.4 Self-injury 56
3.7.5 Bullying 56
3.7.6 Summary 58
3.8 Counselling contacts about cyber-safety issues 59
3.8.1 Enhancing data collection on cyber-safety issues 59
3.8.2 Frequency of cyber-safety issues being discussed in counselling contacts 59
3.8.3 Help-seeking concerns of contacts disclosing cyber-safety issues 60
3.8.4 Summary 62
3.9 Counselling contacts where significant mental health issues are present 62
3.9.1 Current period 62
3.9.2 Trend analysis 63
3.9.3 Summary 64
3.10 Service demand and responsiveness 65
3.10.1 Attempted/answered contacts and response rates by medium of contact 67
3.10.2 Wait times 71
3.10.3 Demand for different types of support – counselling vs. non-counselling help-seeking 71
3.10.4 Direct client contact time 75
3.10.5 Summary 81

4. Kids Helpline website 83
4.1 Service demand 83
4.2 Key issues of interest to website visitors 85
4.2.1 *Tips & Info* topics 85
4.2.2 Referrals from other websites 89
4.3 Evaluation data 90
4.3.1 Method and sample 90
4.3.2 Respondent engagement with the service in the past 12 months 90
4.3.3 Impact of resources on respondents 91
4.4 Summary 92

5. Kids Helpline 2017 counselling client satisfaction & outcome survey 93
5.1 Objectives 93
5.2 Methodology 93
5.3 Key findings 93
5.3.1 Sample (counselling clients only) 93
5.3.2 Type of engagement with Kids Helpline in last 12 months 94
5.3.3 Perceived impact of Kids Helpline counselling and support service 95
5.3.6 Overall satisfaction with the Kids Helpline counselling and support service 96
5.4 Summary 97

6. Kids Helpline @ School 98
6.1 What is Kids Helpline @ School? 98
6.2 Key program activities and outputs for 2017 98
6.2.1 Sessions booked and delivered and participants involved 98

6.2.2 Topics of discussion 99
6.2.3 Geographical reach 100
6.2.4 Use of teacher resource materials 101
6.2.5 Kids Helpline at School (KAS) Optus Digital Thumbprint program - evaluation results 101
6.3 Summary 102

7. Conclusion 103
7.1 Key themes from the data 103
Theme 1 Kids Helpline continues to play a comprehensive role in protecting young people in Australian from abuse and harm 103
Theme 2 There are continuing shifts in the nature of children and young people's help-seeking 105
Theme 3 Kids Helpline can offer unique insights into the contemporary help-seeking concerns of young people in Australian 108
7.2 Other publications on Kids Helpline in 2017 109
7.3 How to support Kids Helpline 109

8. Appendix 110
8.1 Notes regarding data collection, analysis and interpretation 110
8.1.1 Limitations on counselling service data collection 110
8.1.2 Analysis 110
8.1.3 Other issues in interpretation 111

References 113

Index of Tables and Figures

Tables

Table 1. Characteristics of 2017 Kids Helpline contacts aged 5-25 years[1] 15
Table 2. Proportional state breakdown of 2017 Kids Helpline contacts aged 5-25 years compared with Australian population estimates at 30/6/2017 16
Table 3. Characteristics of 2017 Kids Helpline contacts aged 5-25 years – by type of help-seeking[1] 22
Table 4. Characteristics of 2017 Kids Helpline contacts aged 5-25 years – by medium of contact[1] 26
Table 5. Characteristics of Kids Helpline contacts aged 5-25 years – by medium of contact and year (2015-2017)[1] 29
Table 6. Percentage change in number of Kids Helpline counselling contacts aged 5-25 years – by main concern in five-yearly intervals[1, 2] 43
Table 7. Number and proportion of Kids Helpline counselling contacts aged 5-25 years with particular concerns and classes of concern – by year (2015-2017)[1] 48
Table 8. 2017 Kids Helpline counselling contacts aged 5-25 years with specific self-identified concerns (c.f. 2016) 53
Table 9. Number and percentage of 2017 Kids Helpline counselling contacts aged 5-25 years assessed by counsellors to be experiencing particular issues (c.f. 2016) 63
Table 10. Attempted and answered contacts – by medium, state and year of contact[1] 67
Table 11. Characteristics of 2017 Kids Helpline counselling client satisfaction and outcome survey respondents compared with 2017 Kids Helpline counselling and support service contacts aged 5-25 years[1] 94
Table 12. 2017 Kids Helpline @ School participants and sessions by session topic 99
Table 13. 2017 Kids Helpline @ School (Optus Digital Thumbprint component) results (2016-17 financial year) 102

Figures

Figure 1. Contacts responded to by Kids Helpline's counselling and support service – 1991 to 2017 4
Figure 2. Kids Helpline counselling and support service contacts in 2017 14
Figure 3. Proportional gender breakdown of Kids Helpline contacts aged 5-25 years – by year (2007-2017)[1] 16
Figure 4. Proportional breakdown of age group of Kids Helpline contacts aged 5-25 years – by year (2007-2017)[1] 17
Figure 5. Proportional breakdown of cultural background of Kids Helpline contacts aged 5-25 years – by year (2007-2017)[1] 18
Figure 6. Proportional breakdown of remoteness classification of Kids Helpline contacts aged 5-25 years – by year (2007-2017)[1] 19
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 (2007-2017)[1] 19
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 (2012-2017) 24
Figure 9. Percentage of Kids Helpline contacts aged 5-25 years – medium of contact by year and type of help-seeking (2012-2017)[1] 27
Figure 10. Percentage of Kids Helpline counselling contacts aged 5-25 years – medium of contact by year (2000-2017) 28
Figure 11. Most frequently recorded concerns of 2017 Kids Helpline counselling contacts aged 5-25 years (*N*= 66,386)[1] 31
Figure 12. Most frequently recorded concerns of 2017 Kids Helpline counselling contacts aged 5-25 years – by medium of contact *(sorted in descending order of frequency of concerns nationally in 2017)* 32
Figure 13. Most frequently recorded concerns of 2017 Kids Helpline counselling contacts aged 5-25 years – by age group *(sorted in descending order of frequency of concerns nationally in 2017)* 33
Figure 14. Most frequently recorded concerns of 2017 Kids Helpline counselling contacts aged 5-25 years – by gender *(sorted in descending order of frequency of concerns nationally in 2017)*[1,2] 34
Figure 15. Most frequently recorded concerns of 2017 Kids Helpline counselling contacts aged 5-25 years – by age group and gender *(sorted in descending order of frequency of concerns nationally in 2017)* 36

Figure 16. Most frequently recorded concerns of 2017 Kids Helpline contacts aged 5-25 years – by cultural background *(sorted in descending order of frequency of concerns nationally in 2017)*[1, 2] 37
Figure 17. Most frequently recorded concerns of 2017 Kids Helpline contacts aged 5-25 years – by remoteness *(sorted in descending order of frequency of concerns nationally in 2017)*[1] 39
Figure 18. Most frequently recorded concerns of 2017 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 2017)*[1] 40
Figure 19. Most frequently recorded concerns of Kids Helpline counselling contacts aged 5-25 years – by year (2012-2017)[1] 41
Figure 20. Main concern of Kids Helpline counselling contacts aged 5-25 years – cumulative counts of contacts 1996-2017[1] 42
Figure 21. Most frequently recorded main concern of Kids Helpline counselling contacts aged 5-25 years – by year (1997-2017) 44
Figure 22. Referral to other support – 2017 Kids Helpline counselling contacts aged 5-25 years (*N* = 66,386)[1] 49
Figure 23. Number of external contact attempts by Kids Helpline counsellors, including duty-of-care interventions – by year (2012-2017) 50
Figure 24. Reasons documented by Kids Helpline counsellors for duty-of-care interventions (2017) 51
Figure 25. Relative frequency of particular reasons being documented by Kids Helpline counsellors for initiating duty-of-care interventions – by year (2012-2017)[1] 52
Figure 26. Subcategory of concern where mental health identified as a concern of the child or young person (*N* = 17,115) (2017)[1] 53
Figure 27. Subcategory of concern where suicide identified as a concern of the child or young person (*N* = 10,636) (2017)[1] 54
Figure 28. Subcategory of concern where a form of child abuse identified as a concern of the child or young person (*N* = 5,173) (2017)[1] 55
Figure 29. Subcategory of concern where self-injury identified as a concern of the child or young person (*N* = 4,545) (2017)[1] 56
Figure 30. Bullying concerns of 2017 Kids Helpline counselling contacts aged 5-25 years 57
Figure 31. Subcategory of concern where bullying identified as a concern of the child or young person (*N* = 3,523) (2017)[1] 58
Figure 32. Percentage of Kids Helpline counselling contacts aged 5-25 years – by disclosure of cyber-safety issues (*N* = 66,386) (2017) 60
Figure 33. Age group of Kids Helpline counselling contacts by whether or not they disclosed experiencing cyber-safety issues (2017) 60
Figure 34. Most frequently recorded concerns of counselling contacts indicating worry about cyber-safety issues compared with other counselling contacts (2017)[1] 61
Figure 35. Percentage of Kids Helpline counselling contacts aged 5-25 years assessed by counsellors to be experiencing particular issues – by year (2001-2017) 64
Figure 36. Number of attempted contacts (demand) by medium – by year (2012-2017)[1] 68
Figure 37. Number of answered contacts (service responses) by medium – by year (2012-2017)[1] 68
Figure 38. Percentage of Kids Helpline phone contacts (all ages) contacting via landline or mobile – by year (2002-2017)[1] 69
Figure 39. Response rates by medium: phone (unadjusted and adjusted to exclude early drop outs), web chat, and all media – by year (2012-2017)[1] 70
Figure 40. Length of time until phone call to Kids Helpline abandoned showing early drop outs (*N* = 138,048) (2017)[1] 70
Figure 41. Mean wait-time in minutes for attempted and answered phone and web chat contacts – by year (2012-2017)[1] 71
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 (2008–2017)[1] 72
Figure 43. Percentage of Kids Helpline contacts aged 5-25 years seeking counselling support – by year (2008-2017)[1] 73
Figure 44. Number of Kids Helpline non-counselling contacts aged 5-25 years seeking particular types of assistance – by year (2013-2017)[1] 75

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 (2008-2017)[1] 76
Figure 46. Mean session duration in minutes: Kids Helpline counselling contacts (all ages) – by year (1991-2017)[1] 77
Figure 47. Mean session duration in minutes – by medium of contact and type of help-seeking: all Kids Helpline contacts responded to 2008-2017[1] 78
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 (2008-2017)[1] 79
Figure 49. Kids Helpline website – number of unique visitors and website sessions – by year (2009-2017) 83
Figure 50. Kids Helpline website – N of page views of different self-help resources, by year (2012-2017) 85
Figure 51. Most frequently visited kids' *Tips & Info* (old site) / *Issues* (new site) topics in 2017[1] 86
Figure 52. Most frequently visited teens' *Tips & Info* (old site) / *Issues* (new site) topics in 2017[1] 87
Figure 53. Most frequently visited young adults' *Issues* (new site only) topics in 2017[1] 88
Figure 54. Most frequently visited parents' *Tips & Info* (old site) / *Issues* (new site) topics in 2017[1] 89
Figure 55. Top referring websites to Kids Helpline website in 2017[1] 90
Figure 56. Respondents' engagement with Kids Helpline in last 12 months (*n* = 723) (2017) 91
Figure 57. Impact of resources on respondents' understanding, capability and resources for addressing their issue/s (N varies per question) (2017) 91
Figure 58. Impact of resources on respondents' help-seeking and motivation to address their issue/s (N varies with question) (2017) 92
Figure 59. Perceived impacts of last session talking to a counsellor (N varies with item) (2017)[123] 95
Figure 60. Perceived impacts of last session talking to a counsellor (N varies with item) (2017)[12] 96
Figure 61. Perceived impacts of last session talking to a counsellor (N varies with item) (2017)[12] 97
Figure 62. Number of 2017 Kids Helpline @ School sessions booked and delivered – by month 99
Figure 63. Number of 2017 Kids Helpline @ School participating schools and sessions – by state 100
Figure 64. Proportion of 2017 Kids Helpline @ School participating schools – by remoteness (*N* = 221)[1] 100
Figure 65. Number of page views to Kids Helpline @ School micro-website resources for teachers in 2017. 101
Figure 66. Percentage of 2017 Kids Helpline counselling contacts aged 5-25 years – by cultural background (*N* = 66,386) 112

Executive summary

About this report

This report provides a statistical overview of the Kids Helpline service for 2017, including the:

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

It presents 2017 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, as with the previous edition, this edition of the KHL Insights incorporates a chapter (Chapter 2), describing the contemporary scope and focus of Kids Helpline's work and its role in supporting and protecting young people in Australian, 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 157,656 contacts responded to by the counselling and support service in 2017, 154,868 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 (74%) contacts responded to were from females while one in four (24%) were from males. In 2015, Kids Helpline introduced a new category for gender – intersex, trans and gender-diverse. A total of 2,155 contacts, or 2%, were from children and young people identifying with this third gender category.
- *Age*. More than half (54%) of all contacts responded to were from children and young people aged 13-18 years, three in 10 (33%) were from 19-25 year-olds, and about one in seven (13%) were from 5-12 year-olds.
- *Cultural background*. Where information was available on cultural background (25% of contacts), 3% of contacts were from individuals who identified as Aboriginal and/or Torres Strait Islander (ATSI), 36% from culturally and linguistically diverse (CALD) backgrounds, and 60% 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 (39% of contacts), most were living in Major Cities (72%), one in five (19%) 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 (47% of all contacts), just over one third (36%) were contacting for the first time and just under two thirds (64%) 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 gradually 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 young people in Australian 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 2017, 66,386 (or 43%) contacts from children and young people aged 5-25 years were for counselling support while 88,482 (or 57%) were for information, referral or other non-counselling support.
- The demographic profile of counselling and non-counselling contacts differs with 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 2017, seven out of ten contacts (70%) from children and young people aged 5-25 years were answered by phone, 22% by web chat and 8% by email. Over the last five years, the proportion of contacts answered by web chat has steadily increased, particularly for 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.
- All subgroups of the Kid Helpline contacts analysed, including those coded as being from Aboriginal and/or Torres Strait Islander people, have slightly or moderately increased their preference for web chat over the last three years while reducing their preference for email-based and/or phone contact. For the vast majority of subgroups, there is a reduction in preference for *both* phone *and* email over this period. Comparison of the *change in proportions* of web-chat counselling contacts (for 5-25 year olds) between 2015 and 2017 shows that this trend is
  - similar for females and males (+11% c.f. +9%), and greater for intersex/transgender coded contacts (+15%)
  - similar for 5-12 and 13-18 year olds (+15% c.f. +14%) but less marked for 19-25 year olds (+6%)
  - similar for all cultural classifications (ATSI +6; CALD +7%; and Neither +7%)
  - similar across all remoteness classifications but increasing with remoteness (cities +11%; inner regional +13%; outer regional/remote +14)
  - higher for first-time contacts (+11%) than for those receiving occasional / on-going support (+5%).

Although the majority of contacts are via phone, the preference for web-chat continues to grow, and for most sub-groups growth in web-chat preferred over both phone and email.

Issues for which children and young people most commonly sought counselling

Current period

- During 2017, Kids Helpline counsellors responded to 66,386 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 (26%) was in relation to mental health problems – the child or young person's own mental health or that of another person.
  - A little less than one in six contacts was about family relationship issues (18%) or emotional wellbeing (17%).
  - About one in six (16%) contacts involved the child or young person seeking help for suicide concerns.

Mental health concerns, family relationship issues, emotional wellbeing and suicide-related concerns are the top four concerns discussed in counselling.

- 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 20 (5%) contacts was about bullying.
- One in 25 (4%) contacts was in relation to study and education issues.

- The concerns of children and young people contacting Kid Helpline in 2017 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 six years has remained consistent with only unsystematic and small variations (i.e. both increases and decreases are observed, and fluctuations are of 2% or less in magnitude). Two emerging exceptions are suicide-related and mental health-related concerns, both of which have increased (5% and 4% respectively) since 2015.
- 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.

> Both long term and short-term trends indicate that contacts about mental health-related concerns and suicide-related concerns continue to grow, and the main growth 2011-2017 is in the 10-14 year old group.

- Although most of the growth in mental health-related contacts from about 2000-2011 can be explained by innovations in the operation of Kids Helpline over the last two decades which have specifically facilitated help-seeking in these areas (increasing access to 19-25 year-olds and counsellor training and hiring practices), the growth in these contacts 2011-2017 is mainly in the 10-14 year age category.

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 32% of counselling contacts in 2017, the child or young person was assessed as requiring referral for additional support:
  - in 15% of contacts, the child or young person was referred to a generalist service or practitioner
  - in 11% of contacts, they were referred to a specific service for ongoing support, and
  - in 6% 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 2017, there were a total of 2,598 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. Eight out of ten of these records (2,150, or 83%) concerned a duty-of-care intervention.
- Child abuse and suicide attempts were by far the most common reasons for duty-of-care interventions in 2017 (36% and 37% respectively).

Trends in duty-of-care interventions

- From 2013 to 2017, there has been:
  - a 40% 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-injury 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-injury 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 2017, 17,115 counselling contacts (or 26%) were in relation to mental health issues.
- In half (54%) of these contacts, the child or young person was seeking support or strategies to manage an established disorder.
- In almost two fifths (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%) were about significant mental health symptoms and half (18%) concerned mild or occasional symptoms.
- One in 20 (5%) contacts about mental health in 2017 was about concern for another person's mental health.

Of counselling contacts:

26% related to mental health issues

16% related to suicide concerns

8% related to child abuse

7% related to self-injury.

Suicide

- In 2017, 10,636 counselling contacts (16%) were about suicide-related concerns.
- The vast majority (79%) of these contacts were about the child or young person's own suicidal thoughts or fears.
- Roughly one in eight (12%) was in relation to concern for another person's suicidal thoughts or feelings.
- Less than 2 in 100 (2%) 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 2017, 5,173 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 (21%) was in relation to the impacts of past abuse.

Self-injury

- In 2017, 4,545 (7%) counselling contacts were in relation to self-injury concerns.
- In 80% 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 2017, 3,523 counselling contacts (5%) were about bullying.
- 83% 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 (72%) bullying 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.

> Of counselling contacts:
>
> 5% related to bullying and
>
> 72% of these were from children and young people experiencing some form of bullying according to the Kids Helpline definition

- In 22% of contacts about bullying, the child or young person indicated that the bullying took a variety of these forms.
- In 27% of contacts about bullying responded to, 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 collects data to gauge the frequency of cyber-safety issues being discussed in counselling sessions.

> 5% of counselling contacts related to cyber-safety issues

- In 3,087 counselling sessions (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 contacts where cyber-safety issues are also indicated, were found to differ considerably from those recorded for children and young people in other counselling contacts where no cyber-safety concerns were expressed. These differences may offer insight into the nature of children and young people's cyber-safety issues. Some of these are outlined below.
- By far the most common concern of those disclosing cyber-safety issues was bullying, with just short of one in three (31%) of these counselling sessions focusing on bullying. By comparison, bullying was recorded as a concern of the child or young person in 4% 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 (14% c.f. 10%)
  - friend and peer relationships (16% c.f. 9%)
  - sexual activity (5% 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. 26%)
  - emotional wellbeing (12% c.f. 18%), and
  - family relationship issues (11% 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 2017:
  - in three out of seven counselling contacts (43%), 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 17% 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 about half of all counselling contacts (49%), 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 17% in 2017), and/or
  - is assessed as experiencing a mental health disorder (from 32% in 2011 to 43% in 2017).

  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 and 2017).
- 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.

> The numbers of contacts in which the child or young person discloses suicidal ideation or is assessed by the counsellor as experiencing a mental health disorder continue to grow, whereas contacts where self-injury is involved are declining

Service demand and responsiveness

Current period

- In 2017, 339,724 attempts were made to contact the counselling and support service, 73% of these by phone, 23% by web chat and 4% by email. Of these attempts, 157,656 were answered by counsellors, corresponding to an overall response rate of 46%.
- In 2017, the strategies implemented in 2016 to extend children and young people's access to support and counselling via web chat (e.g. extending operating hours, optimisation of the website for mobiles and the introduction of a new web chat interface) continue to support an evolving preference of web chat as a mode of engagement with counselling and support services.

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

> In the period 2012-2017, engagement attempts
>
> - by telephone decreased 37%
> - by email decreased 47%
> - by web chat increased 85%
>
> Overall attempts to contact the service are down 26% (2012-2017) or 5% (16,871 contacts) 2016-17

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 37% in phone attempts from 2012-2017) and email (a reduction of 47% in attempts) toward web chat (an increase of 85% in attempts).
- It has also seen an overall reduction in the number of contacts being responded to (by 44% from 2007 to 2017), although the total time invested by the service in responding to the needs of children and young people has grown considerably (by 72%, from 2007 to 2017).
- This is owing to the fact that an increasing number of clients are requiring more intensive counselling-type responses (an increase of 26% from 2007 to 2017) and because the average length of these sessions is steadily increasing (these were 10 minutes in 1991 and in 2017 they averaged 38 minutes).
- The growing number of web chat contacts responded to (an increase of 178% from 2012 to 2017) 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 39 minutes compared to 8 minutes for phone sessions).

Use of web-chat is growing whist phone and email attempts are decreasing.

Web chat contacts take

- 5 times longer on average to complete overall (39 mins versus 8 mins)
- 2 times longer for counselling (mean 54 mins versus 32 mins)

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 35,201 in 2017)
- mean wait times for web contacts being answered by a counsellor have reduced substantially (from 78 minutes in 2012 to 24 minutes in 2017), and
- response rates for web chat have increased markedly (from 30% in 2012 to 45% in 2017).

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 44% from 2012 to 2017)
- lower overall response rates (from 62% in 2012 to 46% in 2017), and
- in 2017, increased wait times for answered phone contacts (from 1.47 minutes in 2015 to 3.52 minutes in 2017).

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 46% over the last decade, this reduction is among those seeking information, referral and other non-counselling responses. Information, referral and other contacts have declined 62% in the last decade, whereas counselling contact frequency has increased 26% in the same period.

Closer analysis of the decrease in these contacts over the last six 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 and increasingly effective use of the website to provide information as an alternative to connecting with the service.

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. From 27 November 2017 a new website was launched. Many of the *Tips & Info* topics for *kids*, *teens* and *parents & carers*, were re-written by the time of the launch, simplifying content and shortening the articles and enriching the experience for users with animations. As well, site navigation was enhanced and a new age category was created (young adults – 19 to 25 years) to guide visitors in all age groups in a more nuanced and targeted fashion to the resources that are best-tailored to their needs. Navigation was enhanced by the introduction of a comprehensive set of Issues and sub-issues that facilitate rapid and focused discovery and exploration of self-help resources.

Service demand

- In 2017 there were 607,634 unique visitors to the Kids Helpline website who collectively participated in 801,810 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%.
- From 2016-2017 the visitor count increased again (by 5%) and the sessions count also increased (by 4%).

The Kids Helpline website had 607,634 unique visitors who collectively participated in 801,810 web sessions, in 2017.

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 was anticipated that search traffic would normalise in the subsequent year and, with increased SEO investment, increase again, and indeed this is the pattern that is observed in the 2016-17 period.

Key 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 2017, there were a total of 45 kids' *Tips & Info* (and 19 *Issues* pages in the new site) topics available, collectively receiving 71,123 page views.
  - 33% of all kids' *Tips & Info* (*Issues*) page views were in relation to five topics – *online safety, new family member, abuse, homework and individuality.* Of these, *online safety, individuality and homework* were in the top 5 most frequently visited resources in 2017.
  - *Staying safe online* was by far the most visited page in 2014, 2015 and 2016 as well, suggesting that cyber-safety may be a standout concern for those in this age group.
  - 10 of the 20 most viewed topics in 2017 relate to dealing with different kinds of relationships and interpersonal issues.

The most frequently viewed pages in the Kids' section of the website included resources on *online safety, new family member, abuse, homework and individuality.*

- Teens
  - In 2017, there were a total of 51 teens' *Tips & Info* (and 28 *Issues pages in the new site*) topics available, collectively receiving 194,936 page views.
  - 34% of all teens' *Tips & Info* (*Issues*) page views were in relation to five topics – *sexting*, *leaving home*, *body image*, *suicide*, and *peer pressure*. The topics *handling peer pressure*, *leaving home* and *body image* were also among the five most frequently visited teens *Tips & Info* topics in 2014, 2015, and 2016 suggesting some continuity in the issues of interest to website visitors of this age group.
  - One in every 10 page views (11%) was in relation to information resources on bullying.

> The most frequently viewed content in the Teens' section of the website included resources on *sexting, leaving home, body image, suicide, and peer pressure.*

- Young adults
  - In 2017, there were a total of 33 *Issues* topics on the website targeted at young adults. These resources collectively received 3,861 page views. The number of page views is small because the resources and website section only existed from 27 November 2017.
  - About half (47%) of all young adults *Issues* page views were in relation to five topics – *family relationships, respectful relationships, sexual identity*, *suicide* and *depression*.

> The most frequently viewed content in the Young adults' section of the website included resources on *family relationships, respectful relationships, sexual identity, suicide and depression.*

- Parents/carers
  - In 2017, there were a total of 44 *Tips & Info* topics (and 19 *Issues* pages in the new site) on the website targeted at adults – primarily parents, guardians, teachers and other significant adults in children's lives. These resources collectively received 116,239 page views.
  - Two in five (38%) of all parents'/carers' *Tips & Info* page views were in relation to five topics – *understanding risk-taking, building respectful relationships, alcohol and drugs, being a good communicator* and *anxiety. Understanding risk-taking*, *anxiety, building respectful relationships*, and *being a good communicator* were top 5 topics in 2016 and among the top 6 in 2014 and 2015, suggesting some consistent themes in the issues of concern to this group of website users.

> The most frequently viewed content in the Young adults' section of the website included resources on *understanding risk-taking, building respectful relationships, alcohol and drugs, being a good communicator and anxiety.*

Referrals from other websites

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

- Of the 31,402 referrals to the Kids Helpline website received from the top 20 referring websites:
  - Over 12,000 came from youth and generalist mental health and counselling websites (primarily ReachOut, lifeline.org.au, mindhealthconnect.org.au, cyh.com, ruok.org.au, blackdoginstitute.org.au, ncab.org.au, healthdirect.gov.au etc.)
  - 1,373 referrals were received from the Australian Government's eSafety website, and
  - 5,346 referrals came from various psychological specialist services.

Evaluation and perceived impact of Tips & Info *topics / website resources*

- The majority (88%) found the *Tipsheets* interesting and, as a consequence of reviewing them, 72% of the respondents were more likely to seek further help and 66% said they were more motivated to address their issue/s.

- After reading a *Tips & Info* topic:
  - about two thirds of respondents believed the Kids Helpline website resources were effective in increasing their ability to deal with their issue/s (64%),
  - three-in-four said the resources gave them new ideas to help them address their issue/s (76%), and
  - seven-in-ten said the resources gave them a better understanding of their issue/s (68%).

Kids Helpline annual counselling 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 2017 to January 2018. 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

Responses from 636 children and young people who had received counselling responded to a survey. 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 2017 with a few exceptions.

Type of engagement with Kids Helpline in the last 12 months

Of the total of 636 respondents 328 had contacted the counselling and support service only and the balance (308) had both contacted the counselling service and visited the website.

Perceived impact of Kids Helpline counselling and support service

- After speaking to a counsellor:
  - 75% of respondents reported feeling more capable of dealing with their problem, and
  - 77% of the respondents indicate high levels of agreement that they got more ideas for dealing with their issue/s.

Overall satisfaction

- 92% of respondents said they would recommend Kids Helpline to a friend and 82% reported that they were *satisfied* to *very satisfied* with Kids Helpline.
- 90% reported being *satisfied* to *very satisfied* with the service.
- The majority of respondents' (70%) reported feeling supported as a consequence of counselling
- 68% of respondents reported feeling less distressed as a consequence of counselling

After counselling, in responses to a survey:

70% reported feeling supported

68% of respondents reported feeling less distressed

75% reported feeling more capable of dealing with their issue/s

77% agree that they had more ideas for dealing with their issue/s

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 2017, 24,221 primary school students from 221 schools participated in a total of 810 classroom sessions with a Kids Helpline counsellor.
- Schools participated from every state and territory, and one third (38%) 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 45,000 page views of these resources.
- We continued to offer the Optus Digital Thumbprint" digital literacy and safety curriculum components of the KAS program, that have been funded since 1 July 2016 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.
- Results of an evaluation study of the Optus Digital Thumbprint program component of KAS indicate high levels of awareness of topic content and help-seeking resourcefulness in students who attended sessions. For instance 98% of students in Grades 1-3 can identify at least one source of help available to them for cyber-safety issues, and students in Grades 4-6 are more aware of sources of help (91%) had gained some ideas of how to address the issues discussed (85%) and had greater confidence in their ability to deal with cyber-safety issues (73%) after the session they had attended.

24,221 primary school students from 221 schools participated in a total of 810 classroom sessions with a Kids Helpline counsellor.

Key themes from the data

Three key themes emerge from reviewing the data presented in the 2017 Insights report.

Theme 1 Kids Helpline continues to play a comprehensive role in protecting young people in Australian 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, young adults and adults (parents and carers), including material focused on building resilience and on keeping children and young people safe, and
  - the Kids Helpline @ School programs, which aim to build children and young people's resilience, help-seeking behaviours, coping strategies and knowledge of sources of help, with a new focus (since 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 since 2016
- 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 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 (though importantly the growth in contacts for this concern comes mainly from 10-14 year olds), 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
- a consistent flow of referrals to the Kids Helpline website coming from the Federal Government's eSafety Commission's website, and
- the growing demand for Kids Helpline @ School Optus Digital Thumbprint program topics related to online safety.

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

- continuing the expanded data collection protocols introduced in 2016, 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
- continuing to facilitate 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
- maintaining the provision of the expanded Kids Helpline @ School Optus Digital Thumbprint program's 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 continuing are: the increasing number of contacts from children and young people

- from culturally and linguistically diverse backgrounds, and those
- who identity as inter-sex, trans and gender diverse.

Kids Helpline has responded to these shifts, in recent years, 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 people in Australian

This report provides valuable insights into the types of issues for which young people in Australian 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 2017 were *mental health* (26%), *family relationships* (18%), *emotional wellbeing* (17%), *suicide* (16%) and *dating and partner relationships* (10%).
- In terms of insights from visitors to the Kids Helpline website in 2017:
  - 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 people in Australian and those responsible for their care.
  - Similarly, 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 people in Australian 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 2017: National Statistical Overview* – a report documenting the work of the service for the 2017 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. Kids Helpline also delivers an early intervention and prevention programs in primary schools called *Kids Helpline @ School* (KAS); the Optus Digital Thumbprint Program and the Wellbeing Program.

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 72% funded by the community through **yourtown**'s Art Union ticket sales, donations and corporate support, which includes a partnership with Optus. The remaining 28% 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 2017. 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, and evaluation of, the Kids Helpline website and trends emerging in demand for self-help resources.
- *Chapter 5* reports on the evaluation of the Kids Helpline counselling service based on data collected in the annual client satisfaction and outcomes survey, 2017.
- *Chapter 6* describes the main activities and outcomes of the Kids Helpline at School program in 2017.
- *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. For media enquiries contact Tracy Gillinder, Head of Marketing and Fundraising: tgillinder@yourtown.com.au or Regan Flor Corporate Affairs and Media Advisor: rflor@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 seven 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 also continues to provide support to young adults aged up to 25 years.

As of 31 December 2017, the Kids Helpline counselling and support service had responded to more than 7.8 million (7,871,293) contacts from children and young people, as shown in Figure 1. Ninety-four per cent (7,433,130) of these contacts were received via phone and the remainder by email (216,647) or web chat (221,516). This is equivalent to responding to a contact from a child or young person every 1.8 minutes continuously for 27 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. On 27 November of 2017 a new website was launched which added a microsite for young adults (19-25 years)

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 corporate partner, Optus, provides funding for a subprogram of KAS focused on digital safety, Optus Digital Thumbprint.

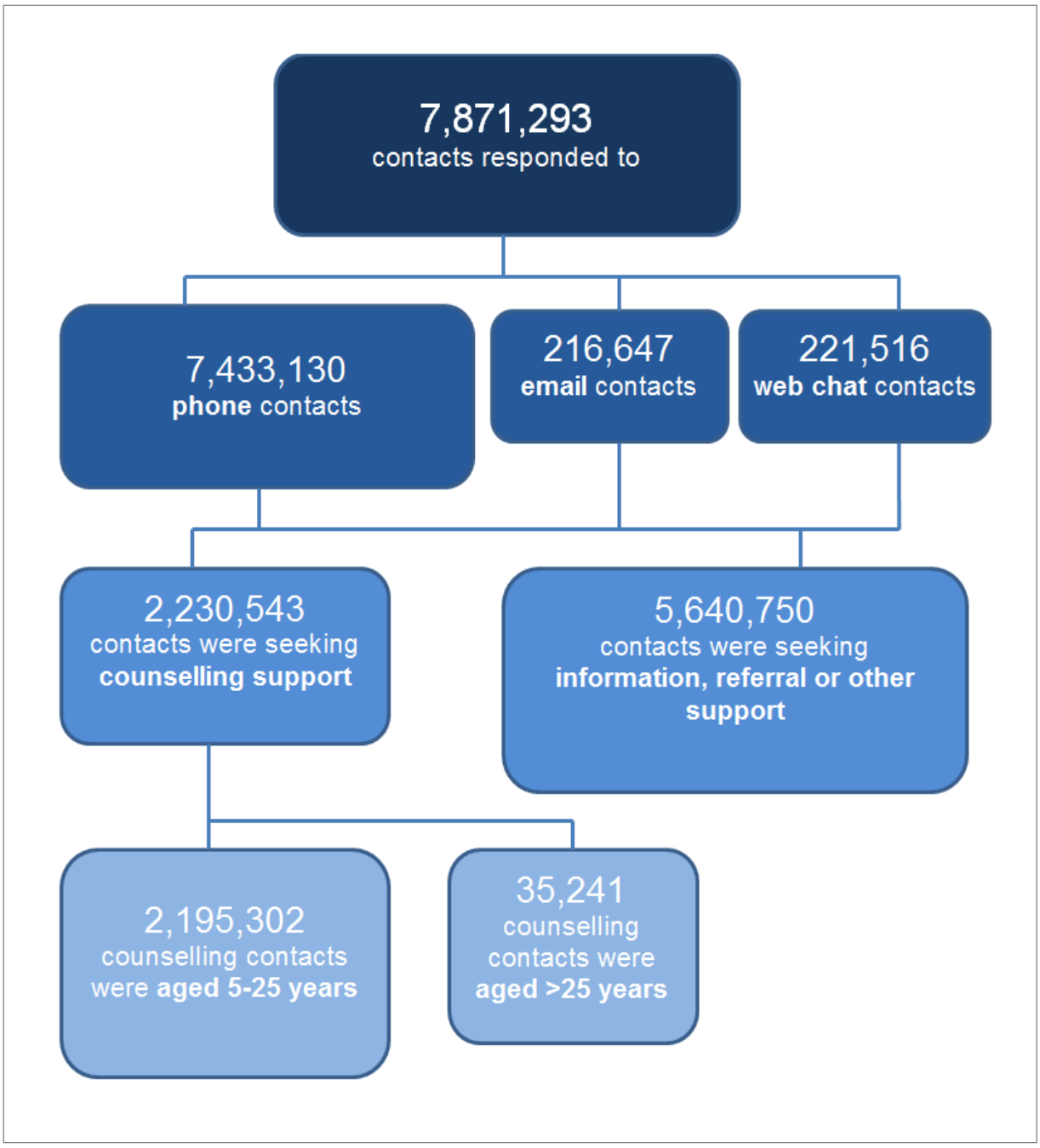
A further recent innovation at Kids Helpline is the trialling of Kids Helpline Circles – a counsellor-facilitated social network to support young people living with family conflict, and other priority concerns. KHL Circles was developed in partnership with the University of Sydney and the Black Dog Institute. 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 uniformed 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 2017



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 people in Australian

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.

The strengths-focused approach is adopted that is designed to empower children and young people by supporting them to:

- Understand the consequences of particular actions
- Help identify their own resources and inform them about other resources available
- Help develop a sense of control in their life
- Utilise their strengths
- Develop options for change

The approach to practice is child-centred, supporting and working with young people through:

- Listening to and respecting what the young person has to say
- Focusing on their needs
- Seeing the world from their perspective
- Believing that the young person is the client
- Respecting the young person

Underpinning practice are 5 principles:

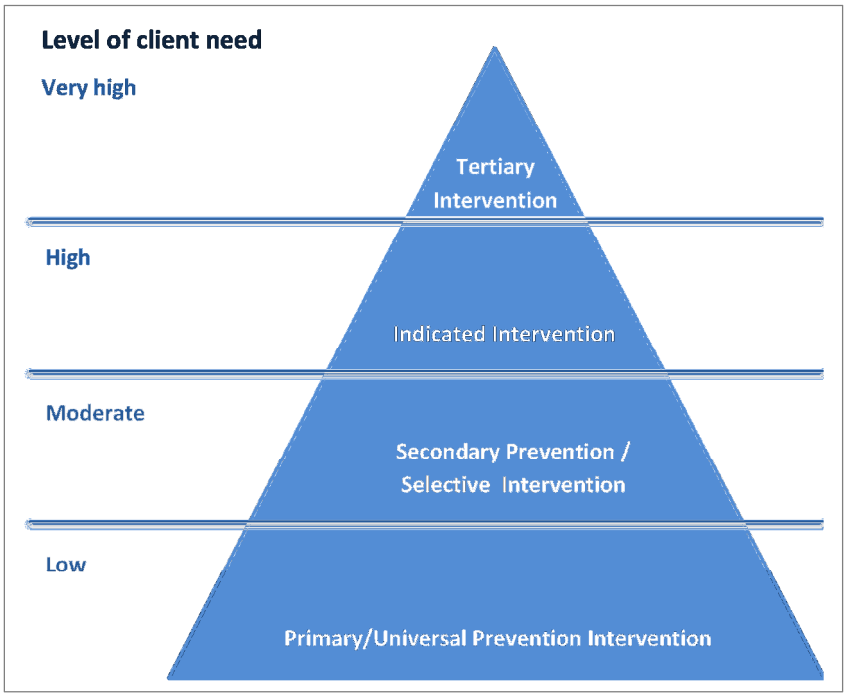
- Privacy and confidentiality
- All young people are treated with respect
- All young people can choose the gender of the counsellor they speak to
- Young people are able to access the same counsellor if they wish to call back
- Young people are encouraged to give feedback about Kids Helpline & the service they receive.

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 social media platforms.

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. At Kids Helpline we are always developing innovative ways to support children and young people. In 2017 we continued to develop an app that children and young people can use to create, sustain, inform and monitor their own personalised recovery journeys. We also have developed and are trialling virtual support 'circles' in which children and young people can share with others their stories and through which they can support each other, facilitated by a counsellor.

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 2017, 32% 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.

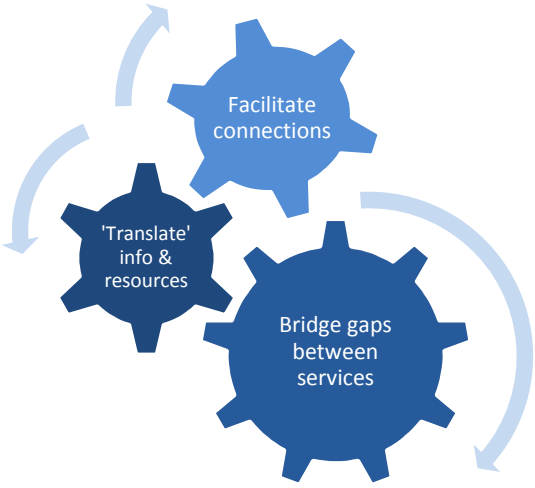
Not only does Kids Helpline actively facilitate children's access to these systems, but it also helps them get their needs met in these systems by providing individual advocacy when a child or young person's needs are not being met adequately or appropriately by an existing service provider.

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 2017, Kids Helpline responded to 5,173 contacts (or about 100 contacts every week) from children and young people with child abuse concerns, including domestic and family violence. Of these, seven in 10 (3,575 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 2017, there were 2,150 records of counsellors attempting to contact an external agency to protect a child or young person from significant harm. That's more than 40 emergency care actions every week. The most common issues precipitating these interventions in 2017 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 digital 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 has also been working to protect children from online harm through the implementation during 2017 of a digital safety curriculum, Optus Digital Thumbprint, 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 2017, over one quarter (26%) of all counselling contacts responded to were in relation to a client's concern about mental health issues – in the vast majority of cases (95%), this was the client's concern in relation to their own mental health (see section 3.7.1). In addition, in close to half (49%) of all counselling sessions in 2017, 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 (Pompili et al 2011). 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.

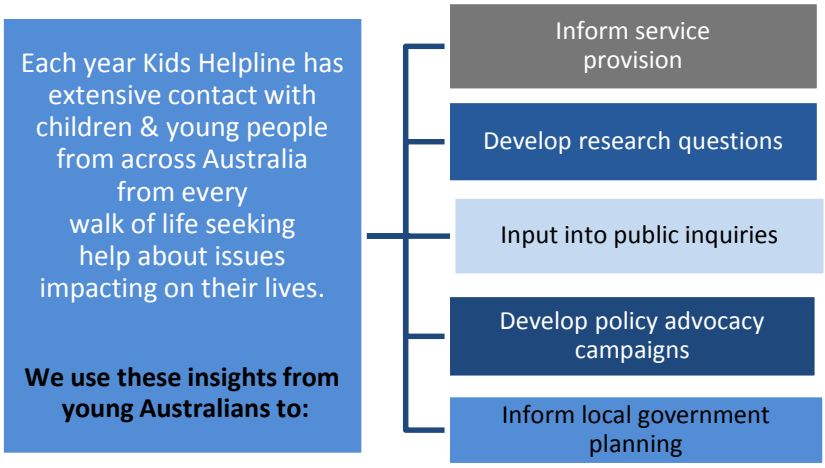
Other ways Kids Helpline supports children and young people to engage with the broader mental health system, and maintain that engagement, include the following:

- 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 155,000 contacts in 2017, 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 2017 over half a million unique visitors participated in over 800,000 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).

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 and strengths-focused 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 (2017), 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

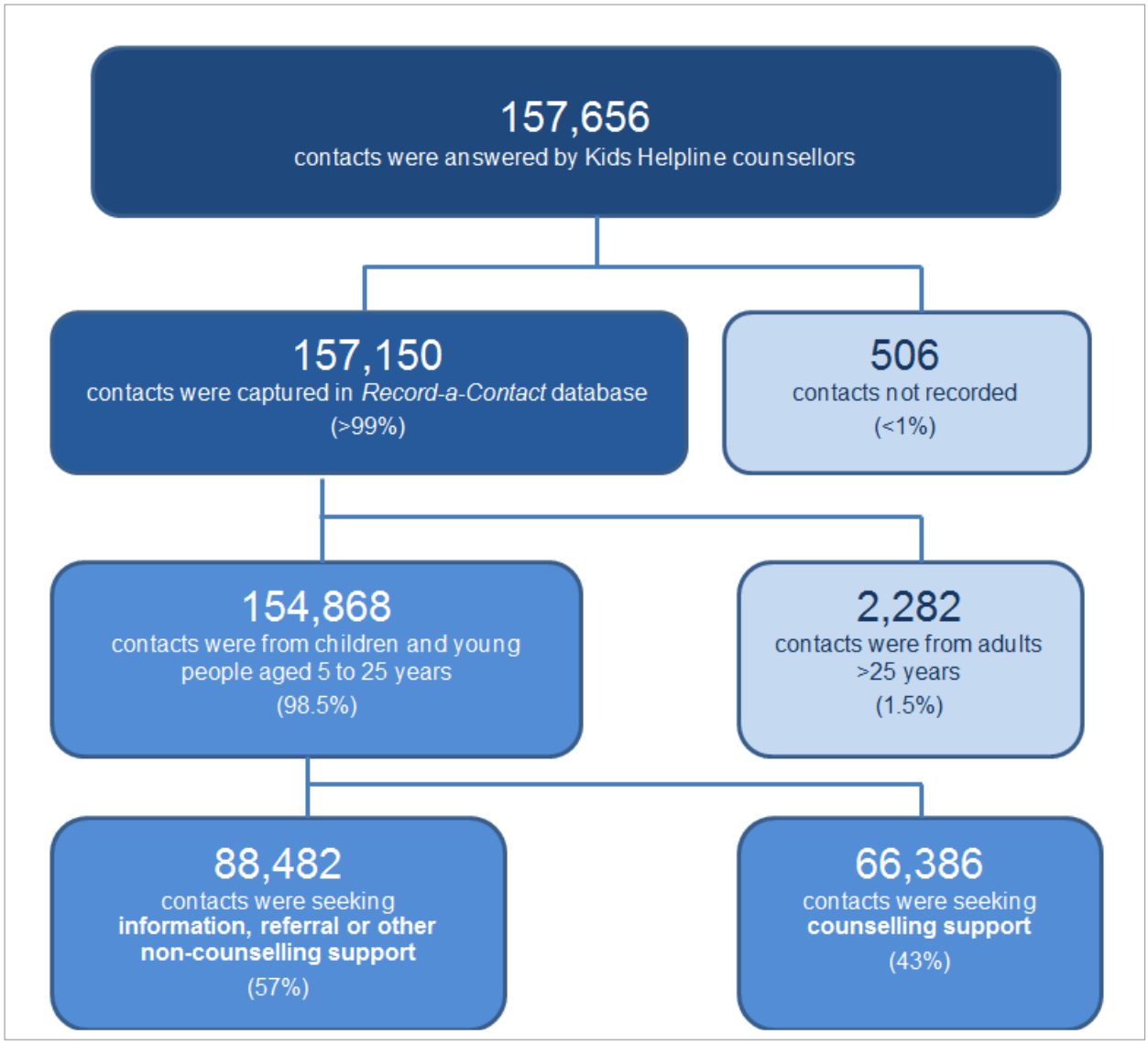
This section describes Kids Helpline contacts from children and young people aged 5-25 years in 2017, including the number and proportion of contacts by gender, age group, cultural background, state of residence, remoteness classification and type of support relationship with the service. Trend data 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 157,150 of the 157,656 contacts received by the Kids Helpline counselling and support service in 2017. 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 2017, there were 506 of these (<1%). Of those contacts that were recorded, 2,282 (1.5%) were received from adults aged 26 years or older (outside Kids Helpline's target age range) and 154,868 were received from children and young people aged 5-25 years. This chapter will describe the characteristics of these 154,868 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 2017 as more complete and detailed information is available for this cohort.

Figure 2. Kids Helpline counselling and support service contacts in 2017



3.1.2 Contact characteristics in 2017

Table 1 summarises demographic and other characteristics of contacts from children and young people aged 5-25 years responded to by Kids Helpline in 2017. Key observations from the data include the following:

- *Gender.* Just over seven out of 10 contacts responded to (74%) were from females while almost three in 10 (24%) were from males. In 2015, Kids Helpline introduced a new category for gender – *intersex, trans and gender-diverse.* A total of 2,155 contacts, or 2%, were recorded in this gender category.
- *Age.* More than half (54%) of all contacts responded to were from individuals aged 13-18 years, three in 10 (33%) were from 19-25 year-olds, and one in eight (13%) was from 5-12 year-olds.
- *Cultural background.* Where information was available on cultural background (25% of contacts), 3% of contacts were from Aboriginal and/or Torres Strait Islanders (ATSI), 36% from other culturally and linguistically diverse (CALD) backgrounds, and 60% 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 2017 closely approximates that for the Australian population aged 5-25 years estimated at 30 June 2017. There is a slight over-representation from Victoria and Tasmania and a slight under-representation from South Australia and Western Australia. Where the child or young person's postcode was known (39% 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 (47% of all contacts), just over one third (36%) of contacts was from children or young people contacting the service for the first time and just under two thirds (64%) were from those receiving occasional or ongoing support.

Table 1. Characteristics of 2017 Kids Helpline contacts aged 5-25 years[1]

Contact characteristics	2017 (*N* = 154,868)	
	n	col. %
Gender		
Female	81,994	74%
Male	25,985	24%
Intersex, trans & gender-diverse	2,155	2%
Total	**110,134**	**100%**
Unknown	*44,734*	
Age group		
5-12 years	13,233	13%
13-18 years	53,534	54%
19-25 years	32,693	33%
Total	**99,460**	**100%**
<26 but age unknown	*55,408*	
Cultural background[2]		
Aboriginal &/or TSI	1,198	3%
CALD	13,864	36%
Neither ATSI nor CALD	23,034	60%
Total	**38,096**	**100%**
Unknown	*116,772*	
State		
ACT	3,105	2%
NSW	45,187	32%
NT	962	1%
QLD	28,909	21%
SA	8,569	6%
TAS	3,815	3%
VIC	37,184	27%
WA	12,276	9%
Total	**140,007**	**100%**
Unknown	*14,861*	
Remoteness		
Major Cities	43,986	72%
Inner Regional	11,636	19%
Outer Regional/Remote	5,099	8%
Total	**60,721**	100%
Unknown	*94,147*	
Relationship with Kids Helpline		
First contact	25,714	36%
Occasional/Ongoing support	46,702	64%
Total	**72,416**	**100%**
Unknown	*82,452*	
Medium of contact		
Phone	108,160	70%
Web chat	34,401	22%
Email	12,307	8%
Total	**154,868**	**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.* Almost three quarters of contacts (70%) were received by phone, while 22% were received by web chat and 8% by email.

Table 2. Proportional state breakdown of 2017 Kids Helpline contacts aged 5-25 years compared with Australian population estimates at 30/6/2017

State	Kids Helpline contacts aged 5-25 years 2017		Australian residents aged 5-25 years[1]	
	n	col. %	*N ('000)*	col. %
ACT	3,105	2%	115	2%
NSW	45,187	32%	2098	32%
NT	962	1%	72	1%
QLD	28,909	21%	1374	21%
SA	8,569	6%	446	7%
TAS	3,815	3%	133	2%
VIC	37,184	27%	1698	26%
WA	12,276	9%	695	10%
Total	**140,007**	**100%**	**6633**	**100%**
Unknown	14,861			

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

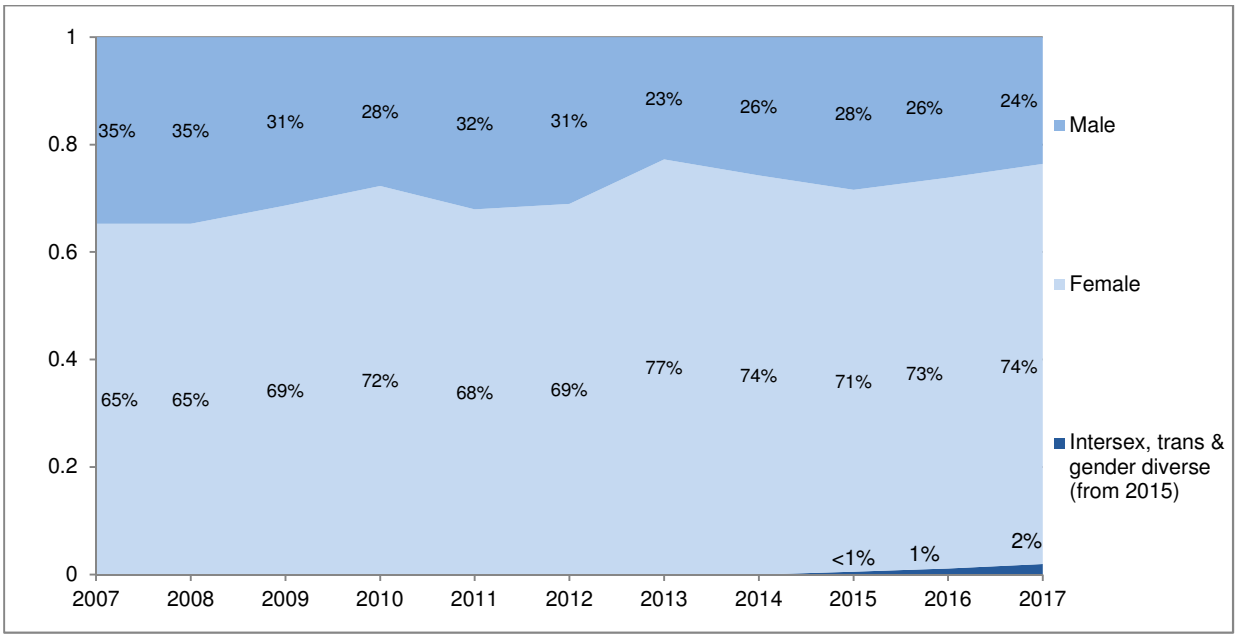
3.1.3 Trends in contact characteristics

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 2017.

Figure 3. Proportional gender breakdown of Kids Helpline contacts aged 5-25 years – by year (2007-2017)[1]



1. From 2007 to 2017, gender data were available for 56% 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 2017 between males and females is long-standing in nature, with males consistently comprising a minority of Kids Helpline contacts.

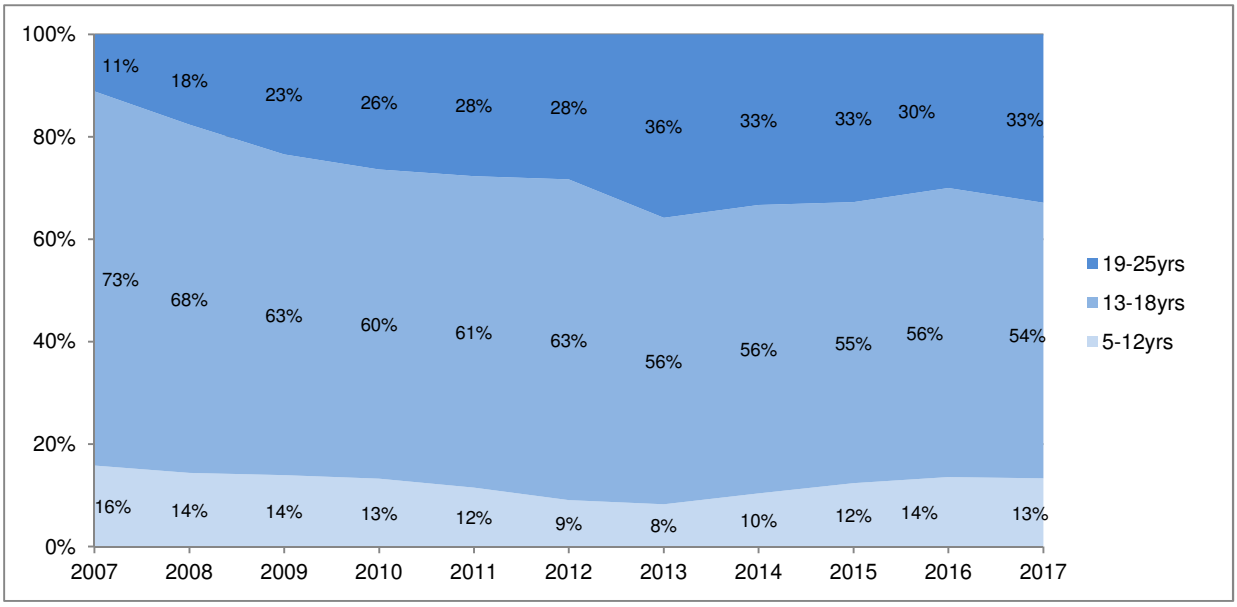
- While the proportional breakdown of contacts from males and females fluctuates from year to year, there would appear to be a growing proportion of contacts from females compared with males. In 2007/2008, more than a third of all contacts were from males; however since 2013, roughly a quarter of all 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 2017. 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 54% in 2017.
- *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 (2007-2017)[1]



1. From 2007 to 2017, age data were available for 38% of Kids Helpline contacts aged 5-25 years.

Cultural background

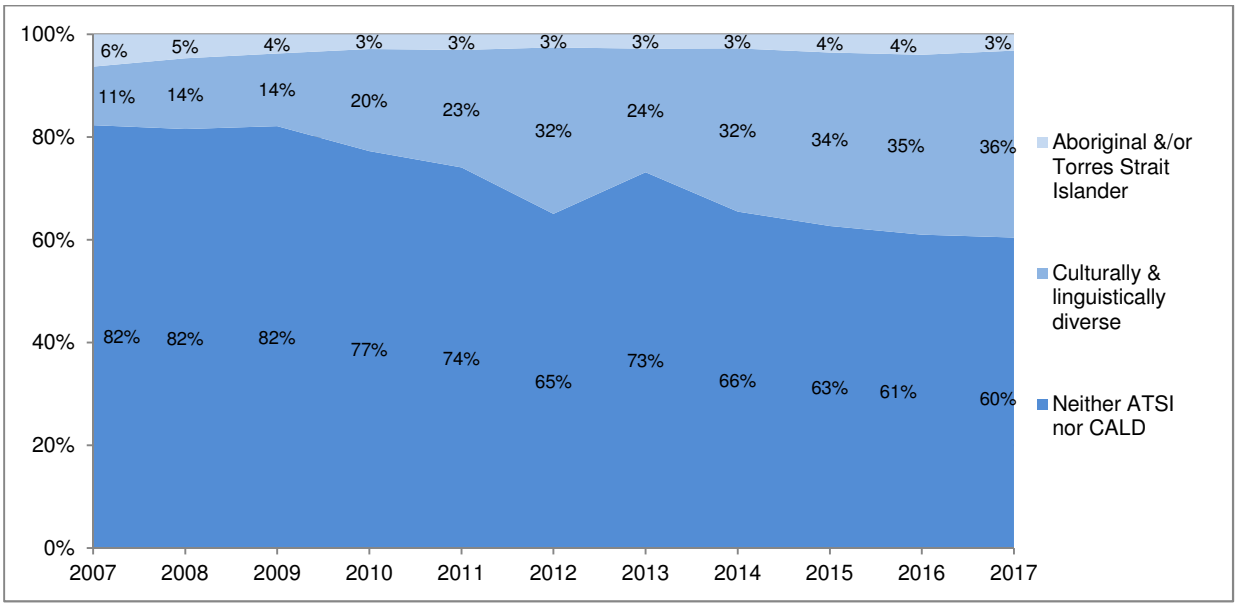
Figure 5 shows the proportional breakdown of cultural background for Kids Helpline contacts where cultural background was known in each year from 2007 to 2017. It is important to note in considering the reliability of these data that cultural background information was only recorded for 25% of all contacts 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 36% in 2017.

- *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 60% in 2017.

Figure 5. Proportional breakdown of cultural background of Kids Helpline contacts aged 5-25 years – by year (2007-2017)[1]



1. From 2007 to 2017, cultural background data were available for 18% of Kids Helpline contacts aged 5-25 years.

Location

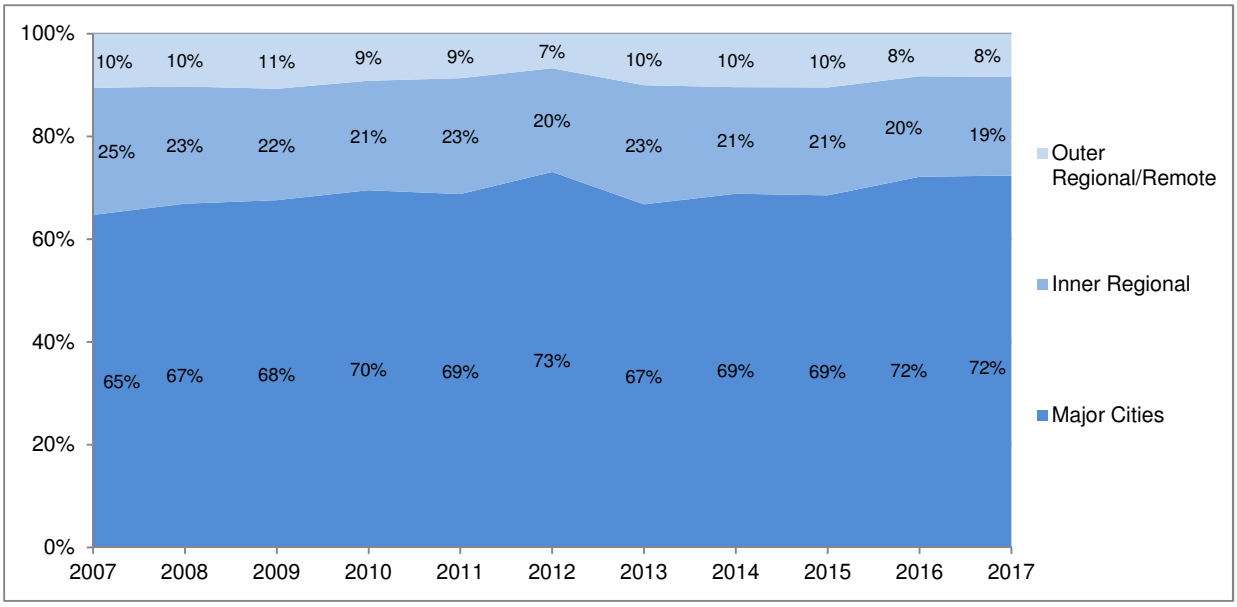
Figure 6 shows the proportional breakdown of remoteness classification for Kids Helpline contacts where postcode was known in each year from 2007 to 2017.[1] It is important to note in considering the reliability of these data that postcode information was only recorded for 19% of all contacts over the period 2007-2017.

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

- *Outer Regional/Remote.* Over the last 11 years, 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 period 2007-17.
- *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.

[1] 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.

Figure 6. Proportional breakdown of remoteness classification of Kids Helpline contacts aged 5-25 years – by year (2007-2017)[1]



1. From 2007 to 2017, postcode data were available for 19% of Kids Helpline contacts aged 5-25 years.

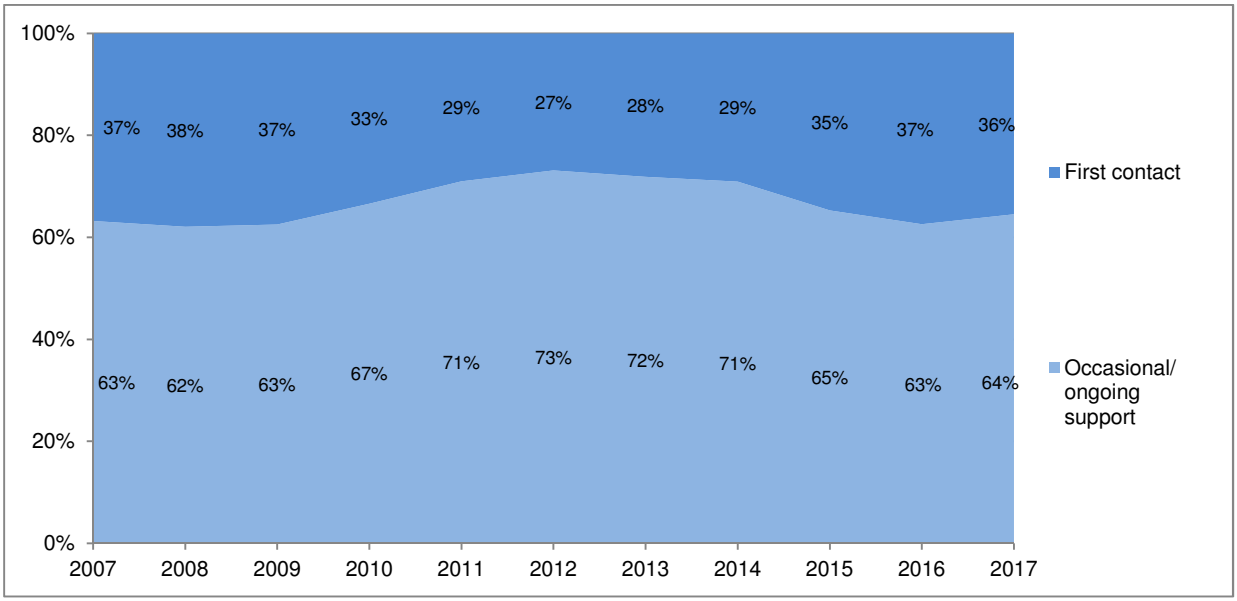
Relationship with service

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 2017.

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 (2007-2017)[1]



1. From 2007 to 2017, relationship with the service was recorded for 29% of Kids Helpline contacts aged 5-25 years.

3.1.4 Summary

This section has described the characteristics of 2017 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 2017 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 2017

In 2017, 66,386 (or 43%) contacts from children and young people aged 5-25 years were for counselling support while 88,482 (or 57%) 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 quarter (28%) of non-counselling contacts were from males, only one fifth (20%) of counselling contacts were from males.
- *Age group.* Among counselling contacts, those from 13-18 year-olds comprised almost three out of every five contacts (58%) while those from 19-25 year-olds made up just under three-in-ten (29%). Among non-counselling contacts, those from 13-18 year-olds made up a smaller relative proportion (47%) while those from 19-25 year-olds comprised a larger relative proportion (38%).
- *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 (40% c.f. 32%); on the other hand a slightly lower proportion of counselling contacts compared with non-counselling contacts were from children and young people who identified as neither from culturally and linguistically diverse backgrounds nor of aboriginal or Torres Strait Islander descent (57% c.f. 65%); a *slightly* smaller proportion of counselling contacts compared with non-counselling contacts were from Aboriginal and/or Torres Strait Islanders (3% c.f. 4%). The reliability of these observations is undermined, however, by the extent of missing data on cultural background.
- *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. 71%), although the reliability of this observation is undermined by the extent of missing postcode data.
- *Relationship with Kids Helpline.* Among counselling contacts, three eighths (38%) were first time contacts; however, among non-counselling contacts, one fifth (20%) were first time contacts. The contrasts in proportions of counselling versus non-counselling contacts seeking occasional or on-going support is more start with 62% of counselling contacts, but 80% of non-counselling receiving either occasional or ongoing support.
- *Other demographic characteristics* appear to be fairly consistent across the two help-seeking types of contacts in 2017.

Table 3. Characteristics of 2017 Kids Helpline contacts aged 5-25 years – by type of help-seeking[1]

Contact characteristics	Counselling contacts (*N* = 66,386)		Information/referral & other contacts (*N* = 88,482)		All contacts (*N* = 154,868)	
	n	col. %	*n*	col. %	*n*	col. %
Gender						
Female	50,148	78%	31,846	70%	81,994	74%
Male	12,981	20%	13,004	28%	25,985	24%
Intersex, trans & gender-diverse	1,356	2%	799	2%	2,155	2%
Total	**64,485**	**100%**	**45,649**	**100%**	**110,134**	**100%**
Unknown	*1,901*		*42,833*		*44,734*	
Age group						
5-12 years	7,934	13%	5,299	14%	13,233	13%
13-18 years	35,745	58%	17,789	47%	53,534	54%
19-25 years	18,256	29%	14,437	38%	32,693	33%
Total	**61,935**	**100%**	**37,525**	**100%**	**99,460**	**100%**
<26 but age unknown	*4,451*		*50,957*		*55,408*	
Cultural background[2]						
Aboriginal &/or TSI	610	3%	588	4%	1,198	3%
CALD	8,559	40%	5,305	32%	13,864	36%
Neither ATSI nor CALD	12,148	57%	10,886	65%	23,034	60%
Total	**21,317**	**100%**	**16,779**	**100%**	**38,096**	**100%**
Unknown	*45,069*		*71,703*		*116,772*	
State						
ACT	1,532	3%	1,573	2%	3,105	2%
NSW	18,180	31%	27,007	33%	45,187	32%
NT	333	1%	629	1%	962	1%
QLD	11,901	21%	17,008	21%	28,909	21%
SA	3,551	6%	5,018	6%	8,569	6%
TAS	1,322	2%	2,493	3%	3,815	3%
VIC	16,092	28%	21,092	26%	37,184	27%
WA	4,993	9%	7,283	9%	12,276	9%
Total	**57,904**	**100%**	**82,103**	**100%**	**140,007**	**100%**
Unknown	*8,482*		*6,379*		*14,861*	
Remoteness						
Major Cities	24,971	74%	19,015	71%	43,986	72%
Inner Regional	6,080	18%	5,556	21%	11,636	19%
Outer Regional/Remote	2,790	8%	2,309	9%	5,099	8%
Total	**33,841**	**100%**	**26,880**	**100%**	**60,721**	**100%**
Unknown	*32,545*		*61,602*		*94,147*	
Relationship with Kids Helpline						
First contact	23,586	38%	2,128	20%	25,714	36%
Occasional/Ongoing support	38,300	62%	8,402	80%	46,702	64%
Total	**61,886**	**100%**	**10,530**	**100%**	**72,416**	**100%**
Unknown	*4,500*		*77,952*		*82,452*	

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 3.10.3 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 the *proportion* of contacts from children and young people seeking counselling support over the last decade compared with the *proportion* seeking non-counselling support, though the *number* of counselling contacts has increased only slightly (from 52,935 in 2008 to 66,907 in 2017 (all ages) or 50,979 in 2008 to 66,386 in 2017 (5-25 year olds)) in the same time period (Figures 42 and 43). Contacts from those seeking information, referral or other non-counselling support, on the other hand, have decreased markedly 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

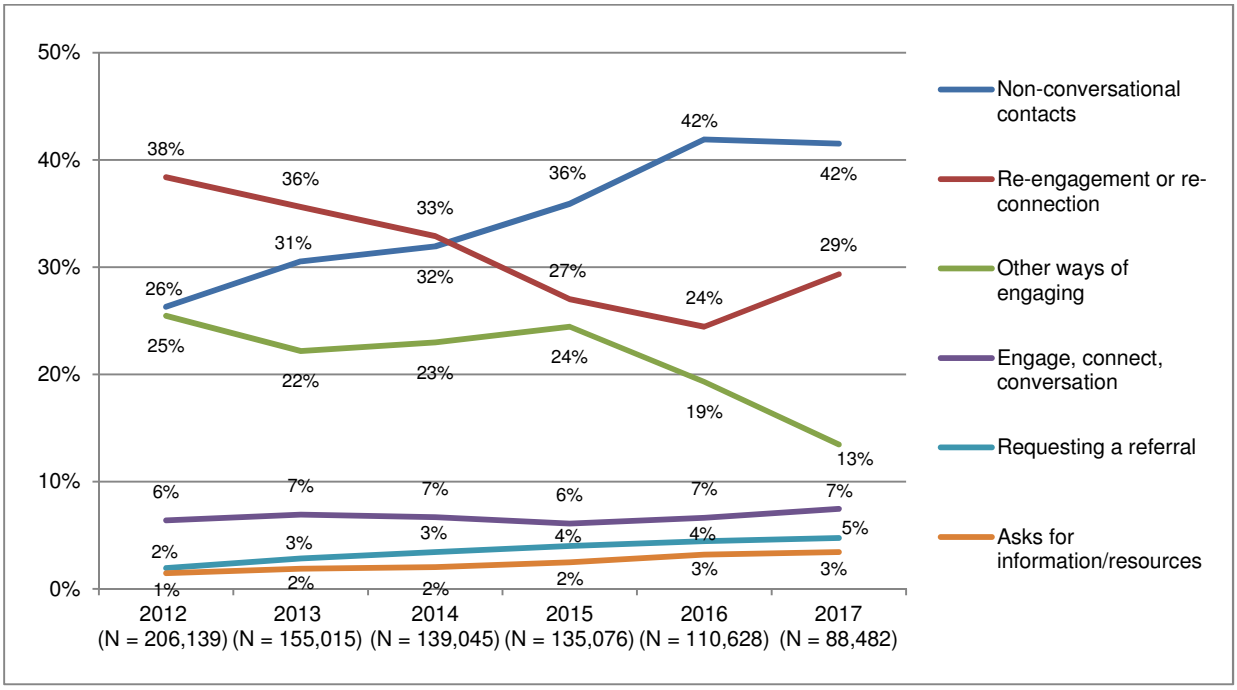
Contacts from children and young people seeking non-counselling types of support can be grouped into six categories according to the particular sort of assistance or engagement they are seeking:

- *Non-conversational contacts.* These include silent contacts, hang ups, noise without verbal content, and in the we7 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 occurred in each year from 2012 to 2017. Key observations from the data in Figure 8 include the following:

- The most common type of non-counselling contact in 2017 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 (29%).
- 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 2017.
- 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 29% in 2017.
- 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 13% in 2017). Section 3.10.3 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 (2012-2017)



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 six 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, proportions of contacts reduce and increase relative to each other. So while there has actually been a decrease in the number of *non-conversational contacts* from 2013 to 2017, as is apparent in Figure 44, the relative frequency of these types of contacts has increased because the numbers of *re-engagement* contacts 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 2017 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.

Since 2007, the number of counselling contacts, from clients aged 5-25 years, has increased 25% while the number of non-counselling contacts from the same group has markedly decreased by 64%. Consequently, the relative proportions of the two broad types of help-seeking have changed also, with a ratio of non-counselling to counselling in 2008 of approximately 80:20 reducing to a ratio of approximately 30:20 in 2017.

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 2017

Table 4 shows the proportion of different sub-populations of Kids Helpline contacts who engaged by phone, web chat or email in 2017. 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 (56% c.f. 75%) and more likely than males to contact by web chat (33% c.f. 18%) and email (10% c.f. 6%). Those identifying as intersex, trans or gender-diverse were more likely than both males or females to contact by web chat (48% c.f. 18% for males and 33% for females) while being less likely to contact by phone (44% c.f. 75% for males and 56% 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 (77%% c.f. 45% for 13-18 year-olds and 59% 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 (43% c.f. 30% 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 (84% c.f. 77% for CALD contacts and 80% 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 55% in Inner Regional localities compared with 48% in Major Cities). Those outside Major Cities appeared to contact by web chat slightly less often than those in Major Cities (35% in Outer Regional/Remote localities and 38% in Inner Regional localities compared with 47% 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 (37% c.f. 29%) and slightly less likely to engage by email (9% c.f. 14%). The preference for phone as a medium across these two groups is similar (55% for first-time contacts c.f. 57% for occasional/on-going contacts).
- *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 (55% c.f. 81%) and more likely to contact by web chat (32% c.f. 15%) or by email (13% c.f. 4%).

Table 4. Characteristics of 2017 Kids Helpline contacts aged 5-25 years – by medium of contact[1]

Contact characteristics	Phone (*N* = 108,160)		Web chat (*N* = 34,401)		Email (*N* = 12,307)		All contacts (*N* = 154,868)	
	n	row %	*n*	row %	*n*	row %	*n*	row %
Gender								
Female	46,058	56%	27,375	33%	8,561	10%	81,994	100%
Male	19,547	75%	4,759	18%	1,679	6%	25,985	100%
Intersex, Trans & Gender-diverse	942	44%	1,026	48%	187	9%	2,155	100%
Total	**66,547**	**60%**	**33,160**	**30%**	**10,427**	**9%**	**110,134**	**100%**
Unknown	*41,613*	*93%*	*1,241*	*3%*	*1,880*	*4%*	*44,734*	*100%*
Age group								
5-12 years	7,761	59%	3,936	30%	1,536	12%	13,233	100%
13-18 years	24,345	45%	22,892	43%	6,297	12%	53,534	100%
19-25 years	25,332	77%	6,362	19%	999	3%	32,693	100%
Total	**57,438**	**58%**	**33,190**	**33%**	**8,832**	**9%**	**99,460**	**100%**
<26 but age unknown	*50,722*	*92%*	*1,211*	*2%*	*3,475*	*6%*	*55,408*	*100%*
Cultural background[2]								
Aboriginal &/or TSI	1,004	84%	112	9%	82	7%	1,198	100%
CALD	10,699	77%	2,178	16%	987	7%	13,864	100%
Neither ATSI/CALD	18,335	80%	3,557	15%	1,142	5%	23,034	100%
Total	**30,038**	**79%**	**5,847**	**15%**	**2,211**	**6%**	**38,096**	**100%**
Unknown	*78,122*	*67%*	*28,554*	*24%*	*10,096*	*9%*	*116,772*	*100%*
State								
ACT	2,350	76%	643	21%	112	4%	3,105	100%
NSW	34,181	76%	9,678	21%	1,328	3%	45,187	100%
NT	797	83%	148	15%	17	2%	962	100%
QLD	22,495	78%	5,544	19%	870	3%	28,909	100%
SA	6,311	74%	1,979	23%	279	3%	8,569	100%
TAS	3,022	79%	637	17%	156	4%	3,815	100%
VIC	27,461	74%	8,384	23%	1,339	4%	37,184	100%
WA	9,393	77%	2,378	19%	505	4%	12,276	100%
Total	**106,010**	**76%**	**29,391**	**21%**	**4,606**	**3%**	**140,007**	**100%**
Unknown	*2,150*	*14%*	*5,010*	*34%*	*7,701*	*52%*	*14,861*	*100%*
Remoteness								
Major Cities	21,018	48%	20,865	47%	2,103	5%	43,986	100%
Inner Regional	6,413	55%	4,452	38%	771	7%	11,636	100%
Outer Regional/Remote	3,009	59%	1,767	35%	323	6%	5,099	100%
Total	**30,440**	**50%**	**27,084**	**45%**	**3,197**	**5%**	**60,721**	**100%**
Unknown	*77,720*	*83%*	*7,317*	*8%*	*9,110*	*10%*	*94,147*	*100%*
Relationship with Kids Helpline								
First contact	14,123	55%	9,395	37%	2,196	9%	25,714	100%
Occasional/Ongoing support	26,701	57%	13,528	29%	6,473	14%	46,702	100%
Total	**40,824**	**56%**	**22,923**	**32%**	**8,669**	**12%**	**72,416**	**100%**
Unknown	*67,336*	*82%*	*11,478*	*14%*	*3,638*	*4%*	*82,452*	*100%*
Type of help-seeking								
Counselling contact	36,642	55%	21,233	32%	8,511	13%	66,386	100%
Information/Referral/ Other contact	71,518	81%	13,168	15%	3,796	4%	88,482	100%
Total	**108,160**	**70%**	**34,401**	**22%**	**12,307**	**8%**	**154,868**	**100%**

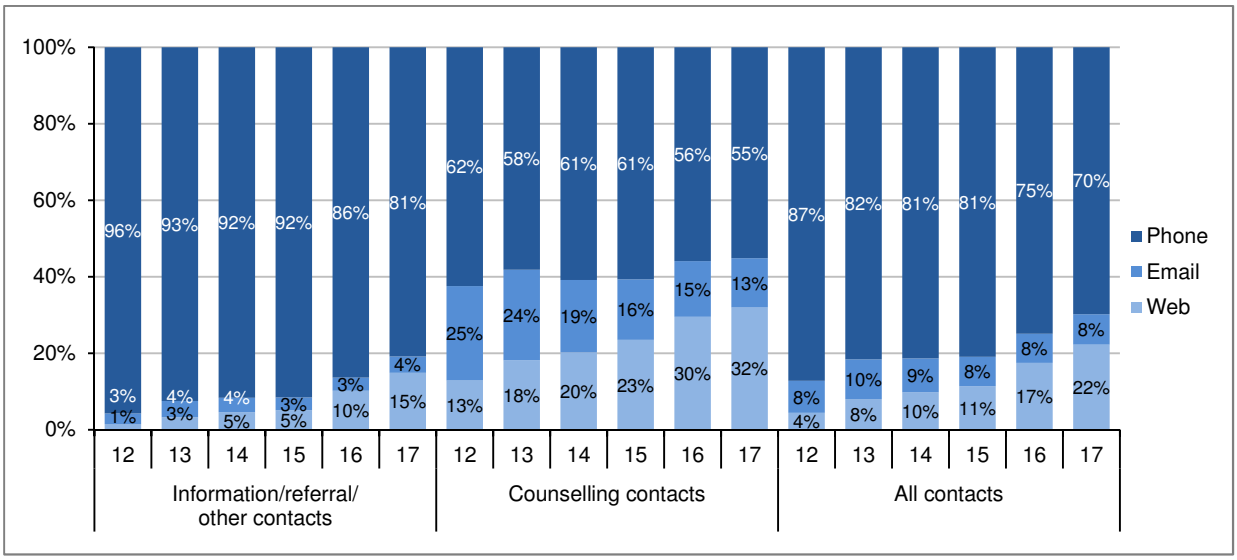
1. Where row percentages sum to more or less than 100%, this is due to rounding.
2. TSI = Torres Strait Islander. CALD = culturally and linguistically diverse. ATSI = Aboriginal and/or Torres Strait Islander

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 six 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 2017 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 (2012-2017)[1]

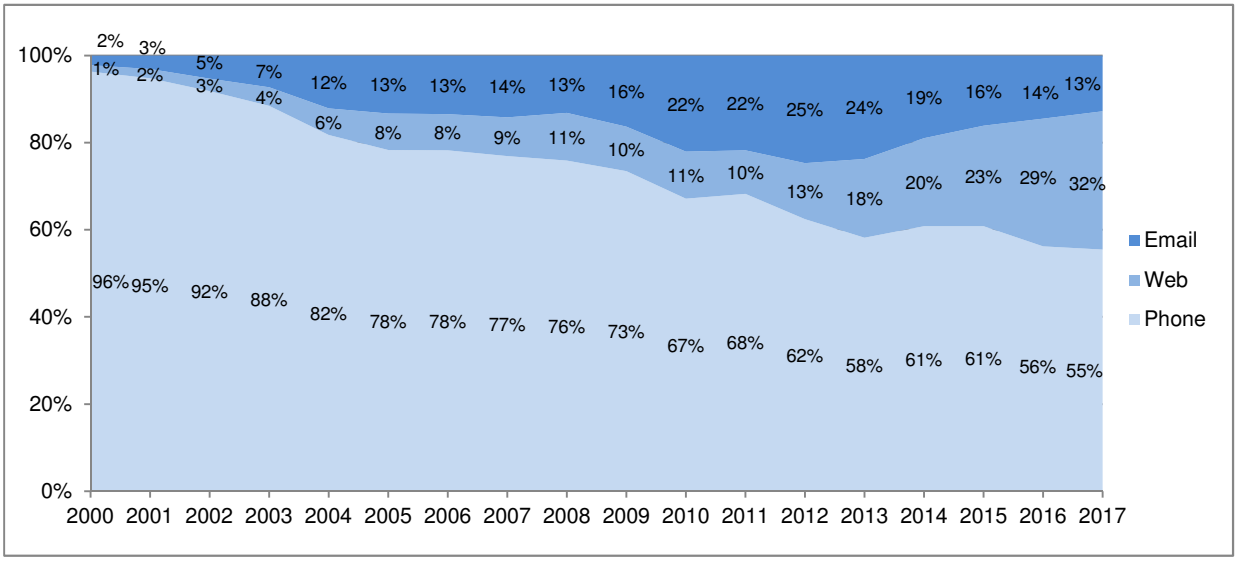


1. Population sizes as follows: Information/referral/other contacts – *N*(2012) = 206,140, *N*(2013) = 155,015, *N*(2014) = 139,045, *N*(2015) = 135,076, *N*(2016) =88,628 *N*(2017) = 88,482. Counselling contacts – *N*(2012) = 71,298, *N*(2013) = 72,416, *N*(2014) = 69,959, *N*(2015) = 70,210, *N*(2016) = 66,963, *N*(2017) = 66,386. 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 (2000-2017)



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 2015 to 2017, in order 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.) including (though only appearing in 2017 figures) contacts known to be Aboriginal and/or Torres Strait Islanders, 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 (2015-2017)[1]

Contact characteristics	Medium	2015 (*N* = 205,286)		2016 (*N* = 177,591)		2017 (*N* = 154,868)	
		n	col. %	*n*	col. %	*n*	col. %
Gender[2]							
Female	Phone	58,798	65%	48,381	58%	46,058	56%
	Web	19,434	22%	25,147	30%	27,375	33%
	Email	11,720	13%	9,620	12%	8,561	10%
Male	Phone	30,558	85%	23,792	80%	19,547	75%
	Web	3,386	9%	4,267	14%	4,759	18%
	Email	1,986	6%	1,832	6%	1,679	6%
Intersex, Trans & Gender-diverse	Phone	344	56%	387	31%	942	44%
	Web	202	33%	703	56%	1,026	48%
	Email	73	12%	170	13%	187	9%
Age group							
5-12 years	Phone	9,009	70%	8,907	66%	7,761	59%
	Web	1,925	15%	2,939	22%	3,936	30%
	Email	1,890	15%	1,558	12%	1,536	12%
13-18 years	Phone	32,458	57%	27,550	49%	24,345	45%
	Web	16,510	29%	21,309	38%	22,892	43%
	Email	7,889	14%	6,956	12%	6,297	12%
19-25 years	Phone	28,490	84%	23,183	78%	25,332	77%
	Web	4,308	13%	5,563	19%	6,362	19%
	Email	1,148	3%	946	3%	999	3%
Cultural background[3]							
Aboriginal &/or TSI	Phone	1,524	93%	1,520	93%	1,004	84%
	Web	52	3%	56	3%	112	9%
	Email	66	4%	51	3%	82	7%
CALD	Phone	13,242	84%	10,866	76%	10,699	77%
	Web	1,356	9%	2,247	16%	2,178	16%
	Email	1,202	8%	1,124	8%	987	7%
Neither ATSI nor CALD	Phone	25,566	87%	20,174	81%	18,335	80%
	Web	2,385	8%	3,499	14%	3,557	15%
	Email	1,337	5%	1,123	5%	1,142	5%
Remoteness							
Major Cities	Phone	23,196	56%	21,935	50%	21,018	48%
	Web	15,029	36%	19,733	45%	20,865	47%
	Email	3,329	8%	2,388	5%	2,103	5%
Inner Regional	Phone	8,354	66%	7,085	59%	6,413	55%
	Web	3,214	25%	4,222	35%	4,452	38%
	Email	1,166	9%	625	5%	771	7%
Outer Regional/Remote	Phone	4,425	70%	2,983	59%	3,009	59%
	Web	1,337	21%	1,720	34%	1,767	35%
	Email	586	9%	364	7%	323	6%
Relationship with Kids Helpline							
First contact	Phone	17,303	64%	15,279	57%	14,123	55%
	Web	6,921	26%	8,890	33%	9,395	37%
	Email	2,653	10%	2,595	10%	2,196	9%
Occasional/Ongoing support	Phone	29,025	57%	25,202	56%	26,701	57%
	Web	12,057	24%	12,369	28%	13,528	29%
	Email	9,457	19%	7,236	16%	6,473	14%

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 2017, Kids Helpline counsellors responded to 66,386 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 49 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 2017
- 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 (6 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:

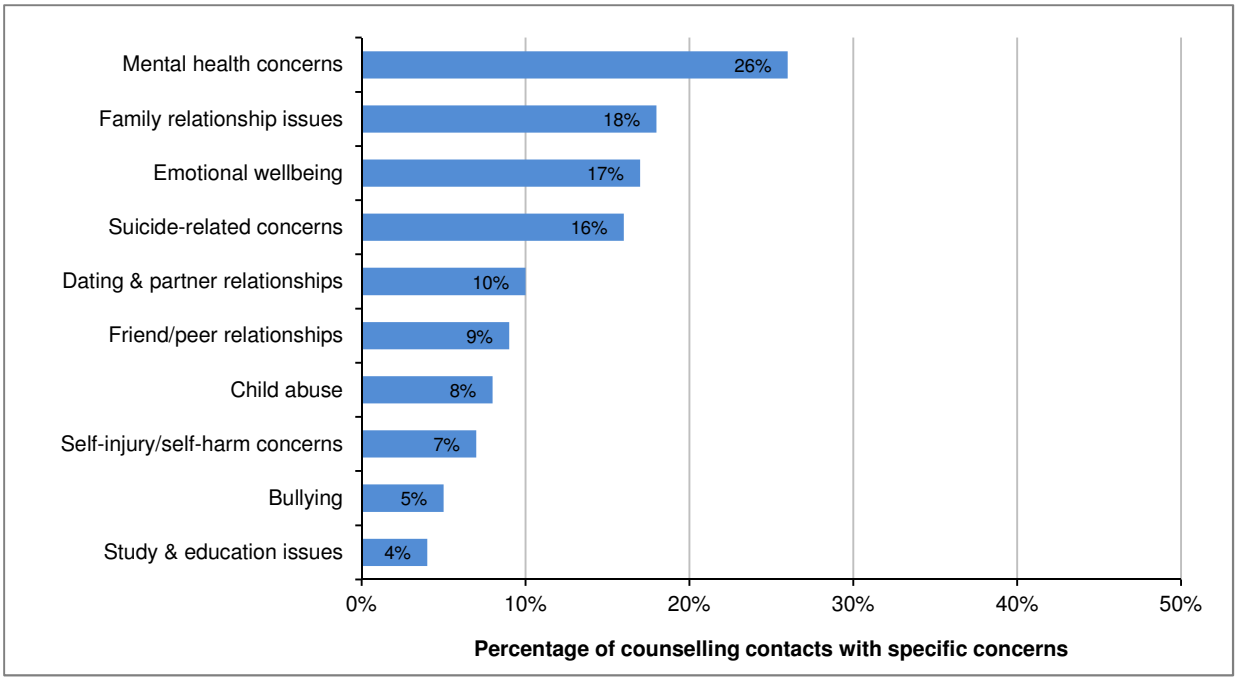
- Section 3.5, which presents 2015-2017 data on *all* the concern categories in the Kids Helpline classification system, not just the *most common*
- Section 3.7, which provides more *in depth analysis* of some common client concerns of contemporary policy interest – mental health, suicide, self-injury, child abuse and bullying concerns, and
- Chapter 5, 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 11 shows the relative frequency with which counsellors recorded specific concerns of children and young people contacting the service for counselling support in 2017. It reveals that:

- Roughly, one in 4 counselling contacts (26%) 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 5 contacts was about family relationship issues (18%) or emotional wellbeing (17%).
- About one in 6 (16%) 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 20 (5%) contacts was about bullying.
- One in 25 (4%) contacts was in relation to study and education issues.

Figure 11. Most frequently recorded concerns of 2017 Kids Helpline counselling contacts aged 5-25 years (*N* = 66,386)[1]



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

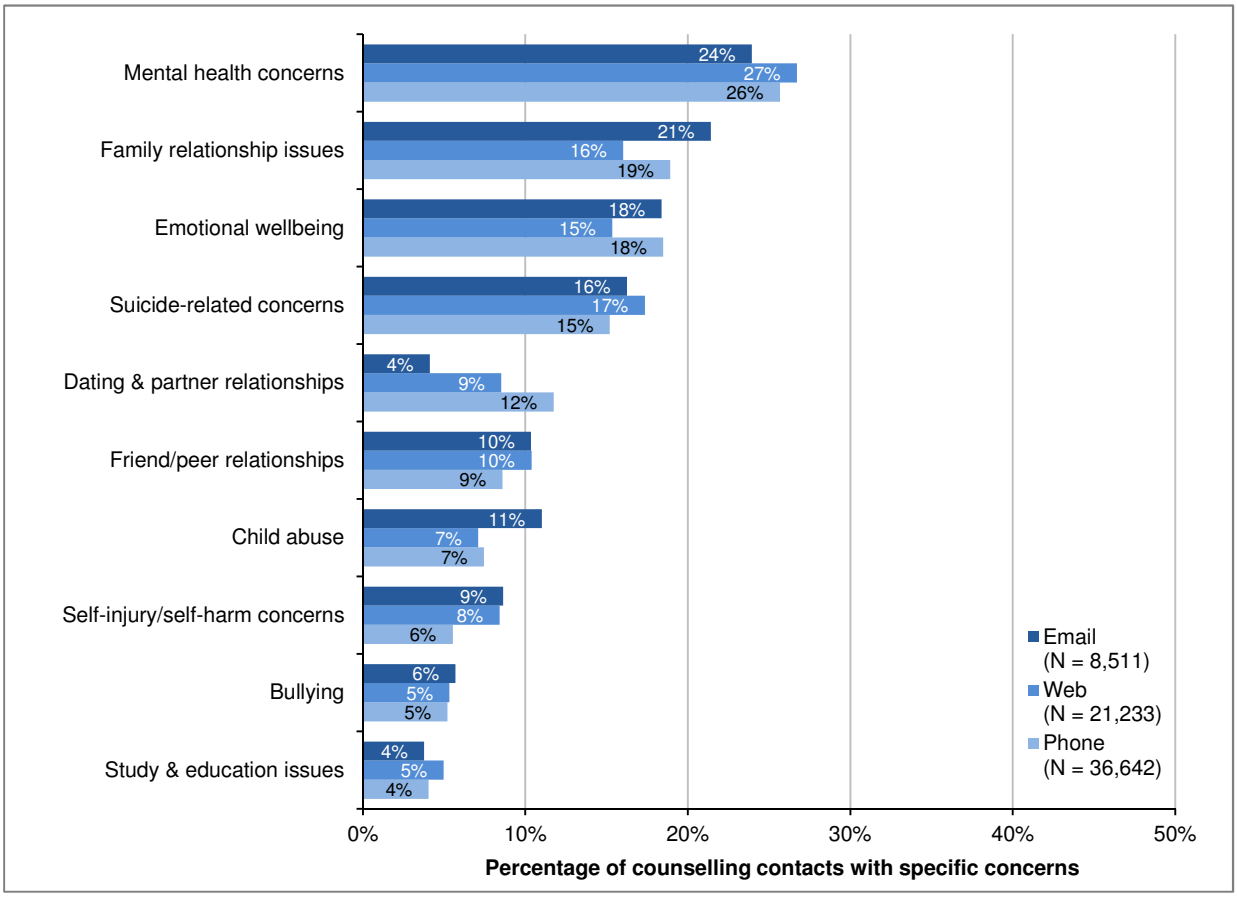
3.4.2 By medium of contact

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 12 compares the relative frequency with which specific concerns were discussed during counselling contacts in 2017 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 and phone were slightly more likely than those who contacted by email, to discuss concerns about mental health issues (27% for web chat and 26% for phone c.f. 24% for email).
- Children and young people contacting by email were more likely that those who contacted by web chat to discuss family relationship concerns (21% c.f. 16%) and child abuse concerns (11% c.f. 7%).
- 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 (4% c.f. to 12% for phone and 9% for web chat).

Figure 12. Most frequently recorded concerns of 2017 Kids Helpline counselling contacts aged 5-25 years – by medium of contact *(sorted in descending order of frequency of concerns nationally in 2017)*[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.

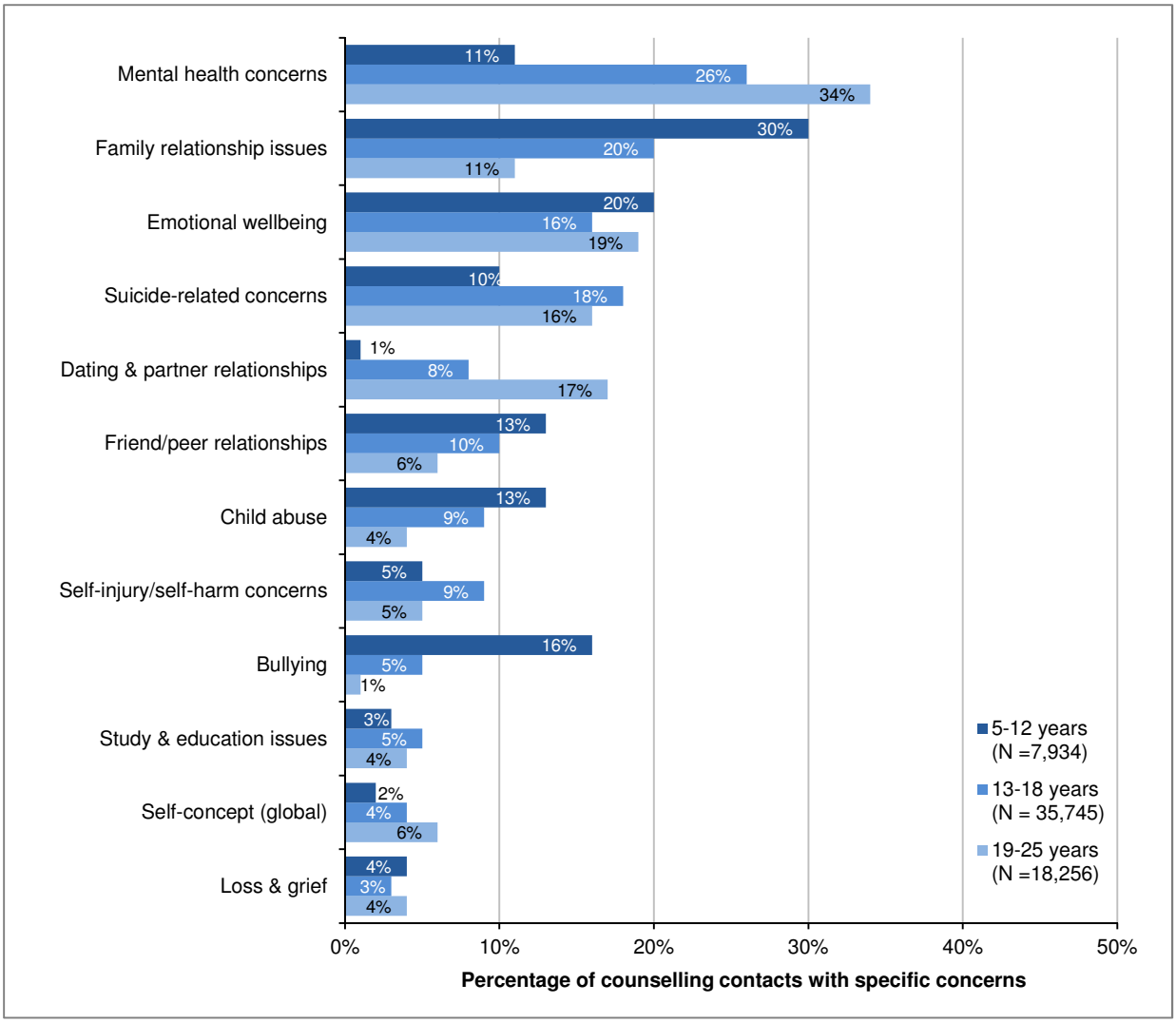
For the purposes of identifying broad patterns in age-related concern, counselling contacts were divided into three groups according to the child or young person's age – *kids* (5-12 year-olds), *teens* (13-18 year-olds) and *young adults* (19-25 year-olds). Figure 13 compares the relative frequency with which the 12 most common concerns of 2017 counselling contacts were raised according to age group.

Key observations from Figure 13 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 2017 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 (34%) 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 1.8 and 1.6 times more common (respectively) among contacts from young people aged 13-18 years (18%) or 19-25 years (16%) than it was among contacts from children aged 5-12 years (10%).

- *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 six (17%) 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 (9%) compared with either younger contacts (5%) 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 2017.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 2017 Kids Helpline counselling contacts aged 5-25 years – by age group *(sorted in descending order of frequency of concerns nationally in 2017)*[1]

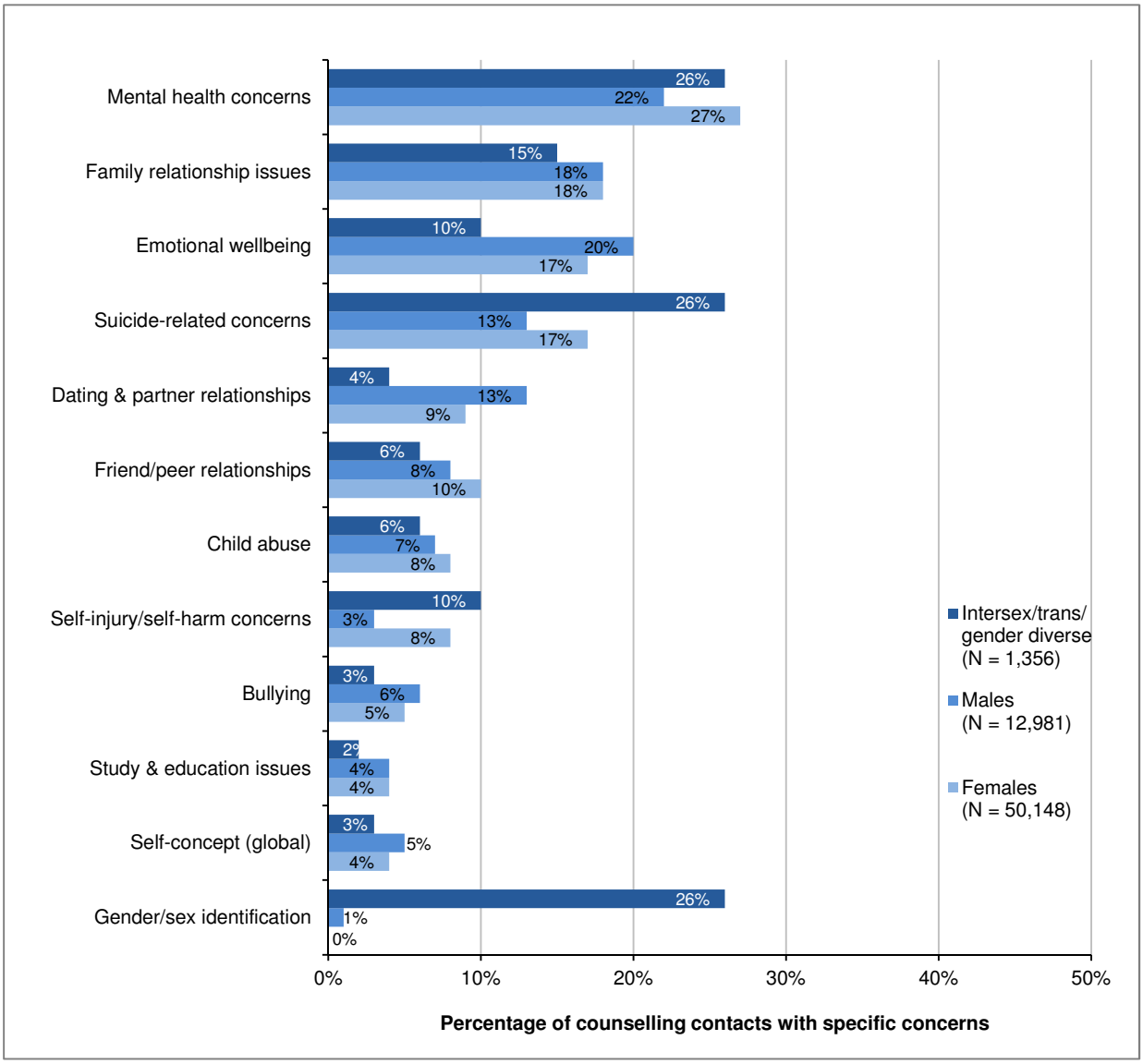


1. Up to four concerns per contact may be recorded. Accordingly, percentages may sum to more than 100%.

3.4.4 By gender

Figure 14 compares the relative frequency with which concerns were discussed in counselling sessions in 2017 according to the child or young person's gender.

Figure 14. Most frequently recorded concerns of 2017 Kids Helpline counselling contacts aged 5-25 years – by gender *(sorted in descending order of frequency of concerns nationally in 2017)*[1,2]



1. Up to four concerns per contact may be recorded. Accordingly, percentages may sum to more than 100%. 2. Included in top 12 listed are concerns in the top 5 for any particular gender group not otherwise included if the listing done only on national figures (thus the inclusion of "gender/sex identification which is a key concern for one gender group).

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 (26% c.f. 1% for males and <1% for females). Children and young people identifying as intersex, trans or gender-diverse also contact about mental health concerns more than males and at about the same rate as females (26% c.f. 22% for males and 27% for females).

Along with their relatively greater focus on sexual and gender identity issues, contacts from intersex, trans and gender-diverse clients were more likely than either males or females to be about suicide (26% c.f. 17% females and 13% males), and as likely as females to be about mental health issues (26% c.f. 27% females and 22% males) and self-harm (10% c.f. 8% females and 3% males).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 2017 are limited to four areas of concern – mental health, self-injury, suicide-related concerns, and dating & partner relationships. Females were more likely than males to contact about mental health issues (27% c.f. 22%), suicide-related concerns (17% c.f. 13%), and also more likely than males to contact for help with self-injury issues (8% c.f. 3%). Males were more likely to contact about dating and partner relationships tan females (13% c.f. 9%).

3.4.5 By age group and gender

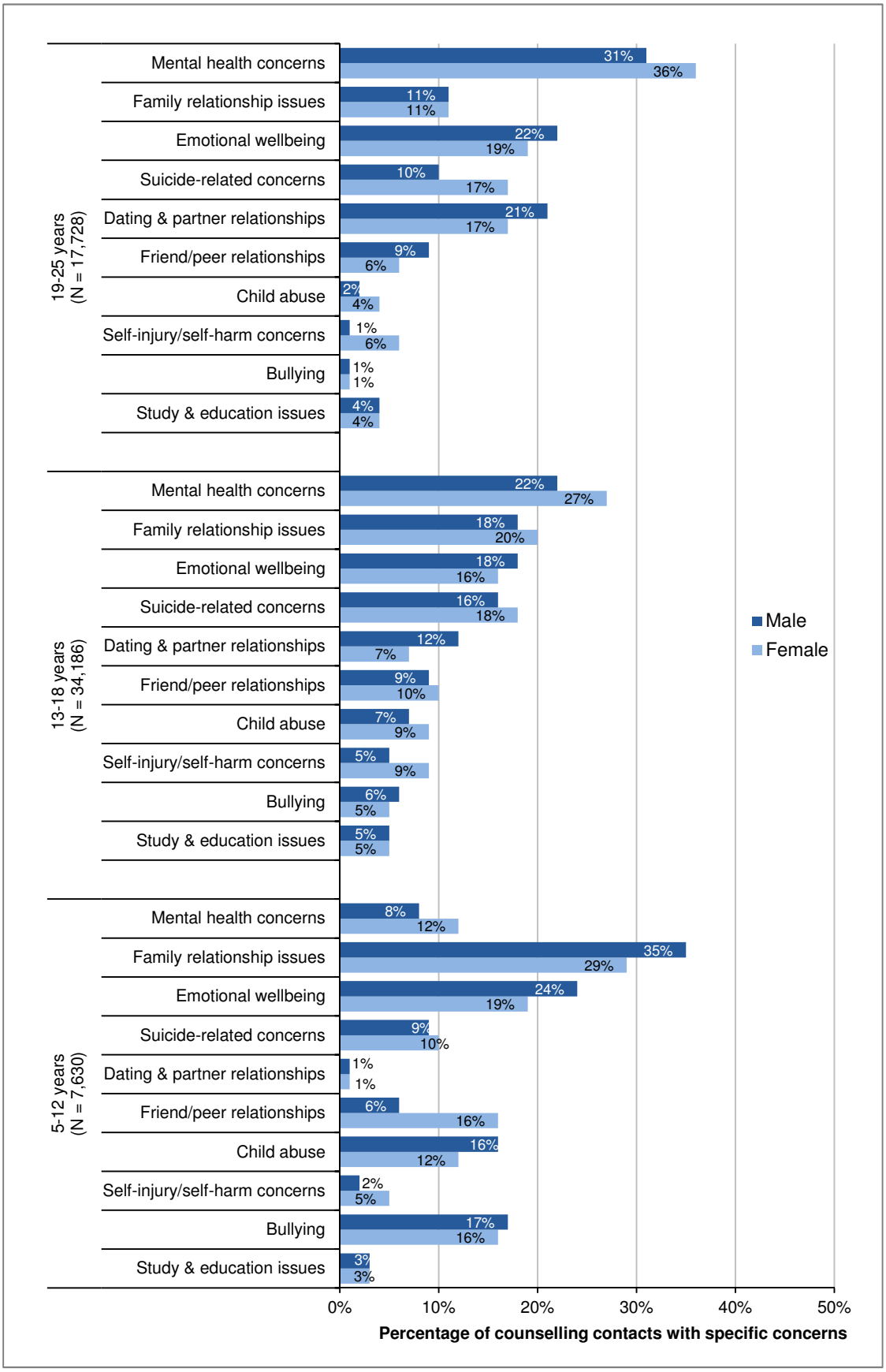
Figure 15 presents the most frequently recorded concerns of Kids Helpline counselling contacts in 2017 by both age group and gender to see if gender differences in the concerns of children and young people contacting Kids Helpline vary according to age group.

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 15 include:

- *Gender differences among contacts from 5-12 year-olds*. Out of the 10 most common concerns analysed, four 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 (16% c.f. 6%) and two-and-a-half times more likely to be about self-injury issues (5% c.f. 2%). However, they were less likely than contacts from males to be about emotional wellbeing (19% c.f. 24%) and family relationship issues (29% c.f. 35%).
- *Gender differences among contacts from 13-18 year-olds.* Of the 10 most common client concerns in 2017, three showed evidence of gender differences for this age group. Contacts from females were slightly more likely than contacts from males to be about mental health issues (27% c.f. 22%) and almost twice as likely to be about self-injury (9% c.f. 5%). They were less likely than contacts from males, however, to be about dating and partner relationships (7% c.f. 12%).
- *Gender differences among contacts from 19-25 year-olds.* Of the 10 most common client concerns in 2017, four 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 (36% c.f. 31%), suicide (17% c.f. 10%) and self-injury (6% c.f. 1%). Contacts from males were slightly more likely than contacts from females in this age group to be in relation to dating and partner relationship (21% c.f. 17%).

Figure 15. Most frequently recorded concerns of 2017 Kids Helpline counselling contacts aged 5-25 years – by age group and gender *(sorted in descending order of frequency of concerns nationally in 2017)*[1]



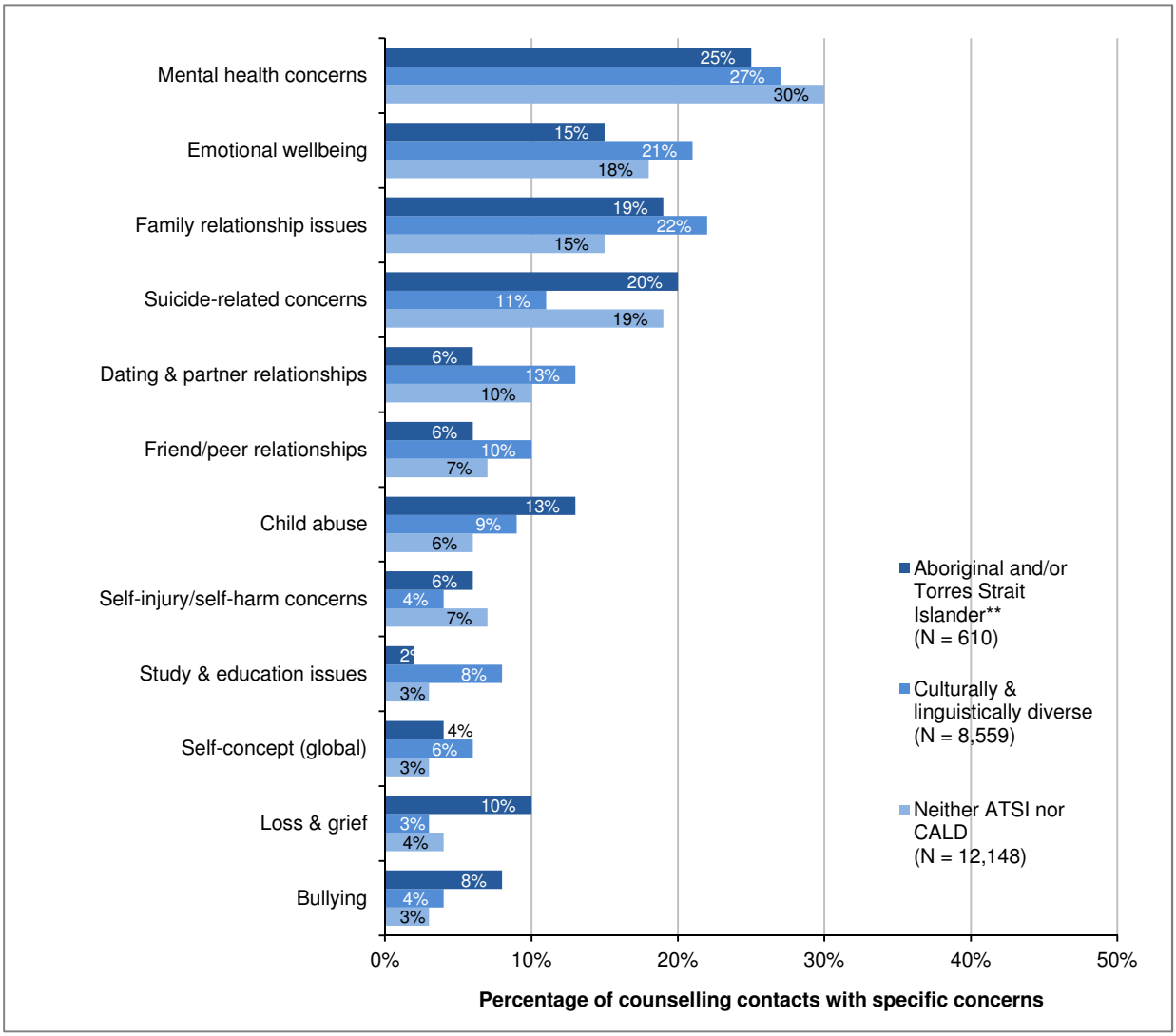
1. Up to four concerns per contact may be recorded. Accordingly, percentages for gender within an age category may sum to more than 100%. For 5 – 12 year old contacts, N (males) = 1,731, N (females) = 5,899. For 13 to 18 year old contacts, N (males) = 6,602, N (females) = 27,584. For 19 to 25 year old contacts, N (males) = 3,843, N (females) = 13,885.

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 2017 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 (32%) of counselling contacts in 2017 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 2017 Kids Helpline contacts aged 5-25 years – by cultural background *(sorted in descending order of frequency of concerns nationally in 2017)*[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 2017 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 (20% c.f. 11% CALD but about the same as Caucasian at 19%)
  - child abuse (13% c.f. 9% or 6%),
  - bullying (8% c.f. 4% or 3%) and
  - loss and grief (10% c.f. 3% and 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. 19% or 15%)
  - emotional wellbeing issues (21% c.f. 15% or 18%)
  - dating and partner relationships (13% c.f. 6% for ATSI contacts)
  - friend and peer relationships (10% c.f. 6% for ATSI contacts), and
  - study and education issues (8% c.f. 2% or 3%).
- *Counselling contacts who were neither ATSI nor CALD.* Contacts from children and young people who were known to be neither ATSI nor CALD were slightly more likely than contacts from children and young people known to be either ATSI or CALD to be about mental health issues (30% c.f. 27% or 25%).

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.

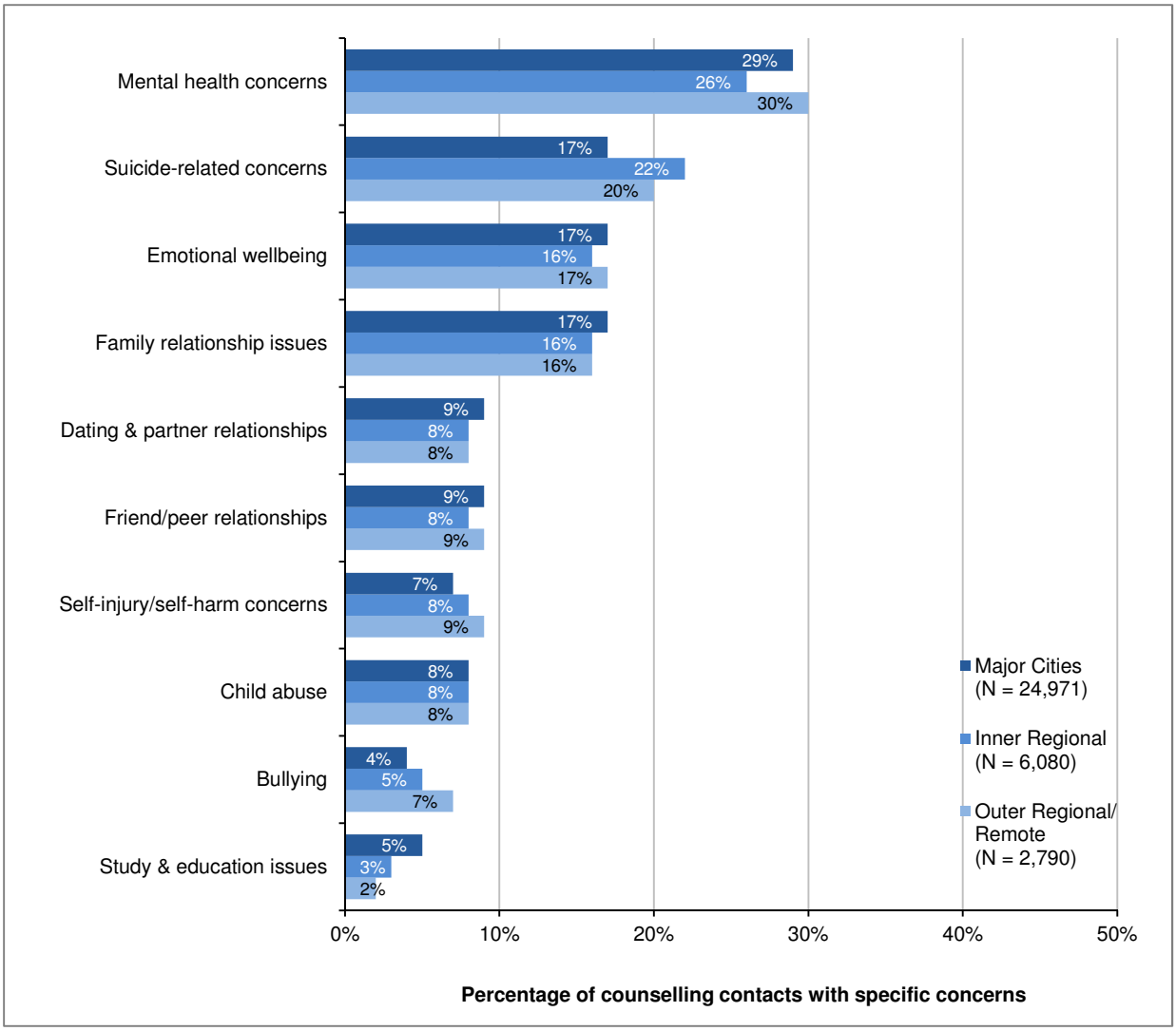
Figure 17 compares the relative frequency with which concerns were raised by counselling contacts in 2017 according to their remoteness classification – in particular, whether they were living in *Major Cities*, in *Inner Regional* localities, or in *Outer Regional/Remote* contexts. The remoteness classification 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 2017 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 17 include the following:

- In 2017, there is no substantial 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.
- Contacts from people in inner-regional locations are slightly more likely to contact about suicide-related concerns (22%) than are those in major cities (17%).
- Data reliability issues may obscure actual differences.

Figure 17. Most frequently recorded concerns of 2017 Kids Helpline contacts aged 5-25 years – by remoteness
(sorted in descending order of frequency of concerns nationally in 2017)[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

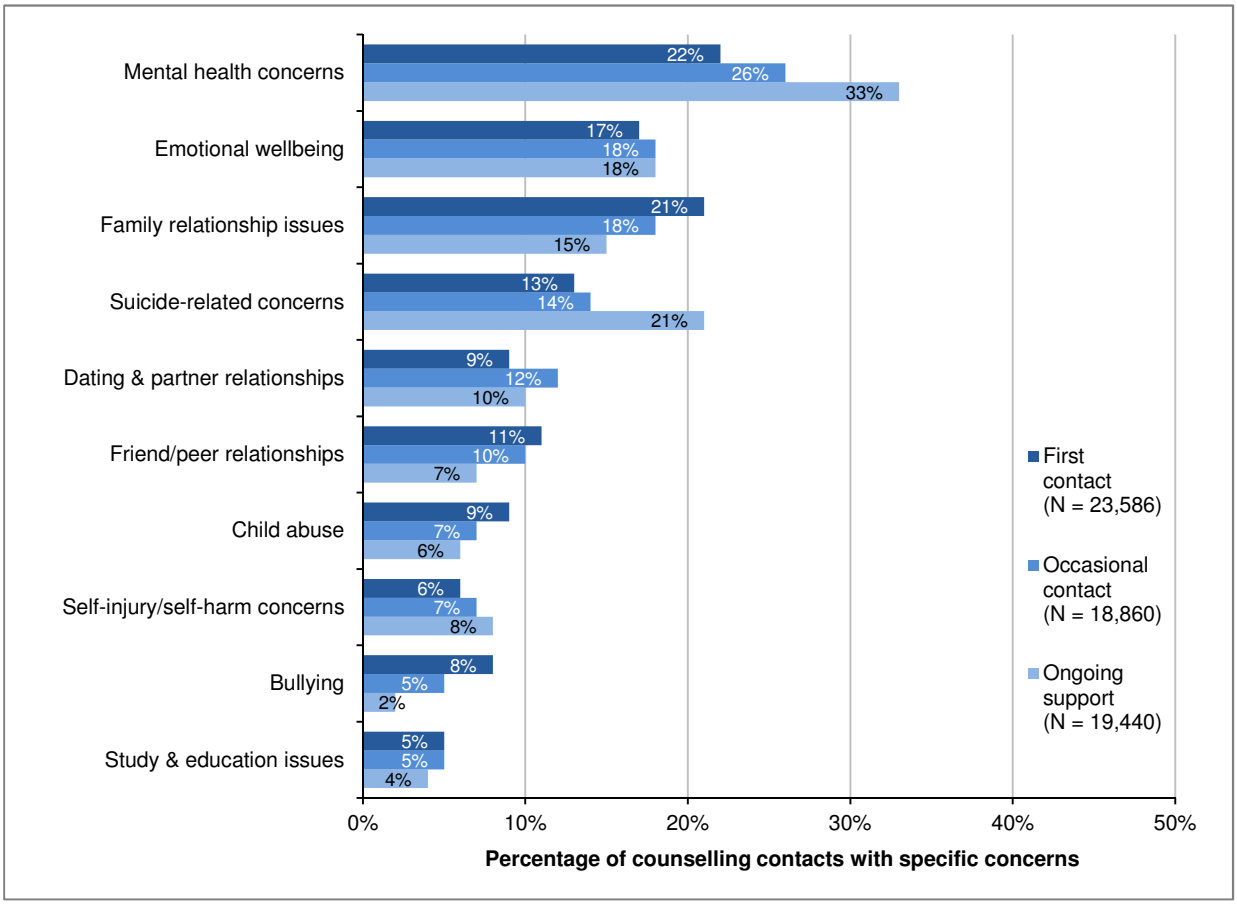
Counsellors classify counselling contacts according to the type of support relationship they have with Kids Helpline – in particular, whether they are a *first time contact*, an *occasional contact* or a contact who receives regular and *ongoing support*.

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 18 presents this analysis and confirms the expected relationship. Key observations from Figure 18 include the following:

- The frequency with which children and young people received counselling support for five of the 10 most common concerns in 2017 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 2017 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 2017)*[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 2017. This is then supplemented with longer-term trend analysis (20 years) through interrogation of Kids Helpline's data archive.

Short term analysis

Figure 19 shows the 10 most common concerns of children and young people contacting Kids Helpline for counselling support over the last six years to consider any short-term trends in the concerns of counselling contacts.

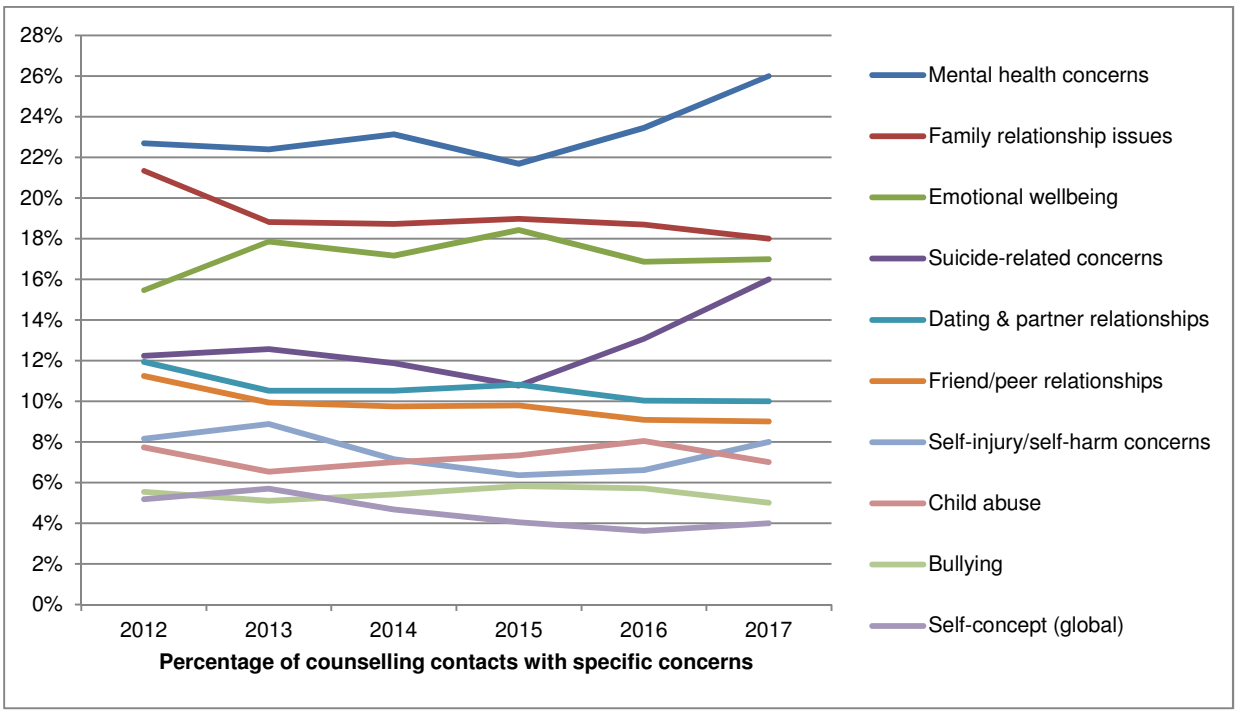
The key observation apparent from the data is that the frequency with which children and young people are contacting Kids Helpline about most of these top issues has remained stable over the period. Notwithstanding two notable exceptions (mental health and suicide related concerns), variation in the 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). In the case of suicide and mental health related concerns, both exhibit a similar pattern – after some years of stability until 2015, both have taken an upswing (of 5% and 4% respectively).

Long term analysis

It is possible to investigate trends in help-seeking over a longer period of time by analysing data from 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 2017. 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 (2012-2017)[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*.

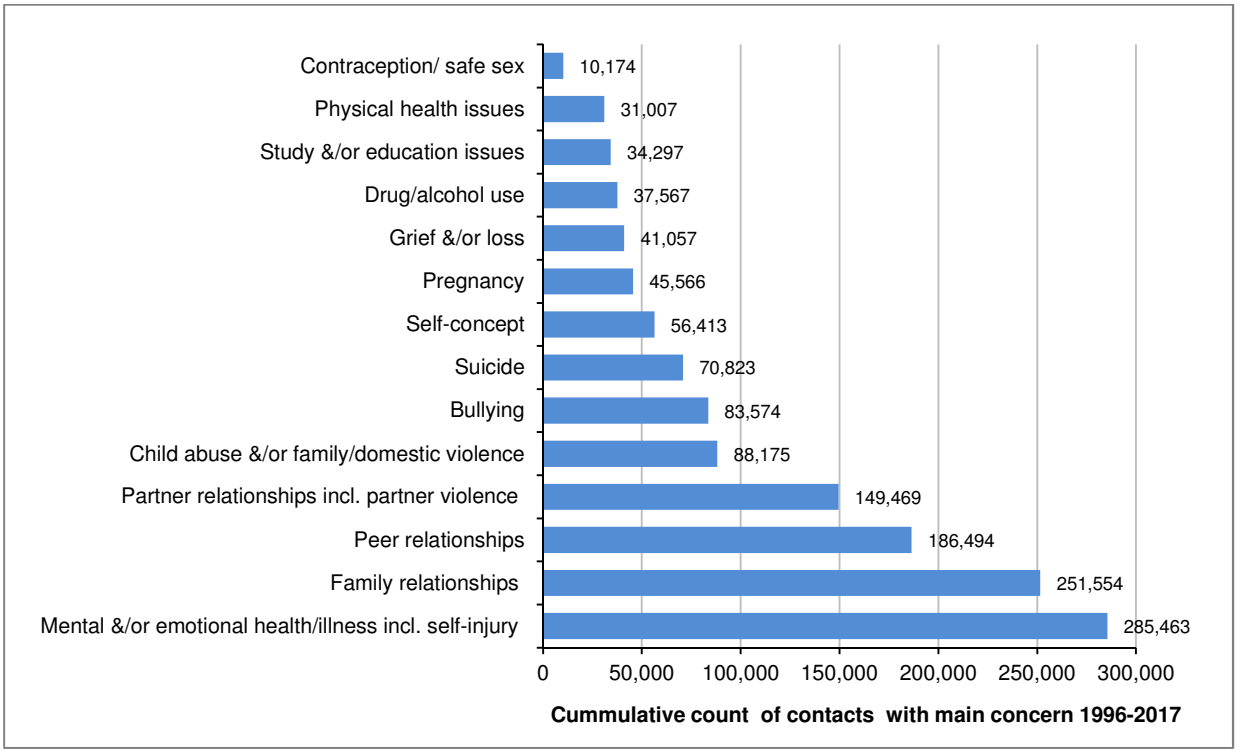
A total of 14 continuous concern categories can be generated in these ways and analysed over time.

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 six years (since 2012)is necessarily limited to the *primary* or *main* concern recorded. The 14 continuous concern categories collectively account for 87% of main concerns recorded over the period (or 1,263,619 counselling contacts out of 1,451,423 received between 01 January 1998 and 31 December 2017).

Figure 20 shows the main concerns of Kids Helpline counselling contacts cumulatively from May 1996 to December 2017. 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 (18% 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 1996-2017[1]



1. These 14 continuous concern categories comprise 86% (or 1,371,633) of all main concerns recorded for counselling contacts aged 5-25 years between May1996 to December 2017 (N = 1,592,596).

Over 20 complete calendar years for which we have these data (i.e. 1998[2] to 2017), 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 1998-2002 to 2013-2013 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 remained in the top-5 main concerns for each of the remaining 5-year periods. This suggests a good 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 1998-2002 to 2013-2017.

[2] Data are available for full years since, and including, 1997, however the data analysis approach here is to take 5-year slices, therefore the data range is 1998-2017.

- Notwithstanding the overall decrease in counselling contacts, three categories of concern show substantial and noteworthy percentage increases, namely:
  - a 397% 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 207% increase in the frequency with which *suicide* has been recorded as the client's main concern, and
  - a 40% increase in the frequency with which *study and/or education issues* have been recorded as the client's main concern during counselling contacts.

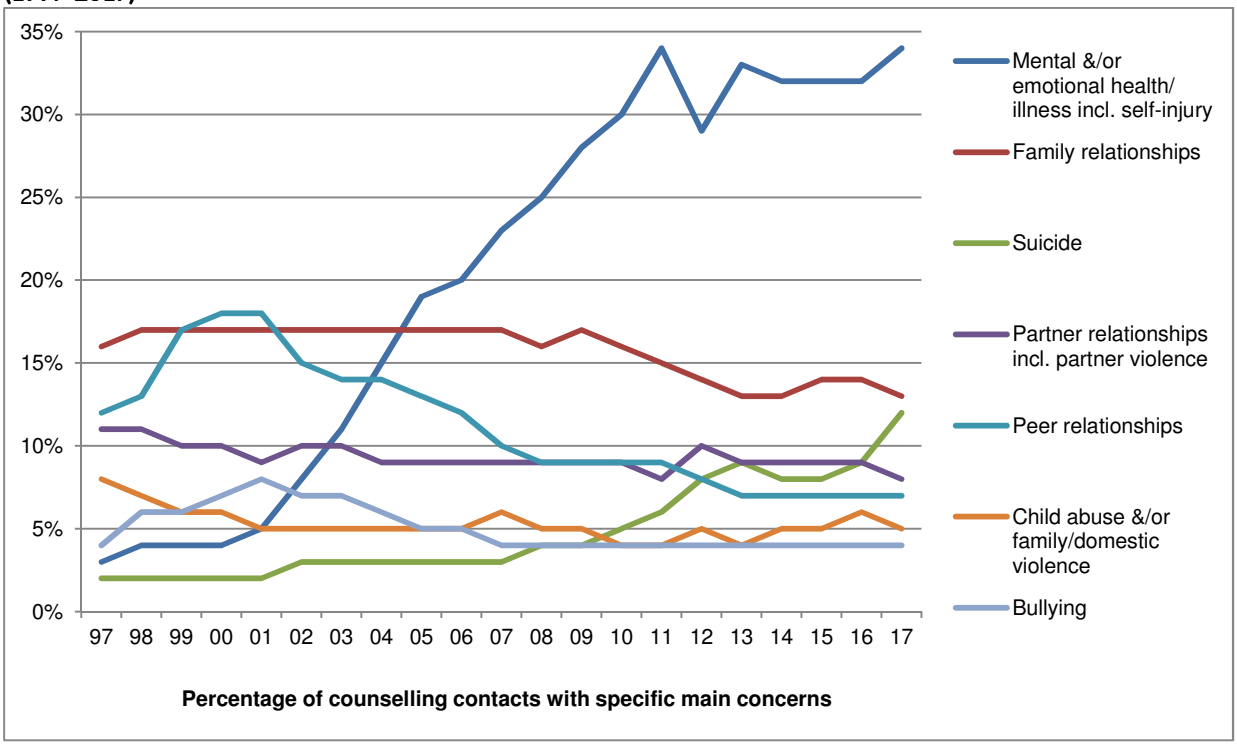
Table 6. Percentage change in number of Kids Helpline counselling contacts aged 5-25 years – by main concern in five-yearly intervals[1, 2]

Main concern of counselling contact (continuous concern categories)	Number of contacts with this main concern by five-year intervals				% change from 1998-2002 to 2013-2017
	1998-2002	2003-2007	2008-2012	2013-2017	
Mental &/or emotional health/illness incl. self-injury	22646	56949	89564	112518	397
Suicide	10288	9411	17348	31556	207
Study &/or education issues	6930	6085	6497	9680	40
Self-concept	15562	10544	9622	14983	-4
Partner relationships incl. partner violence	46851	30982	26834	30159	-36
Child abuse &/or family/domestic violence	27198	17387	14682	17452	-36
Family relationships	79529	56412	46753	46384	-42
Physical health issues	10280	7618	6681	5759	-44
Grief &/or loss	13464	8973	8026	7342	-45
Bullying	31770	19529	11846	14035	-56
Peer relationships	75541	43590	26141	24085	-68
Drug/alcohol use	15868	8120	4137	3815	-76
Pregnancy	19581	9885	5071	3418	-83
Contraception/ safe sex	4794	2299	666	479	-90

1. Counts of counselling contacts with these 14 continuous concern categories sum to 1,263,619 which comprises 87% of counselling contacts received from 1998 to 2017 (*N* = 1,451,423).
2. Total counselling contacts per five-year period are as follows: *N(1998-2002)* = 467,670; *N(2003-2007)* = 335,356; *N(2008-2012)* = 302,463; *N(2013-2017)* = 345,934.

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 (1997-2017)



1. Data provided for the seven most common of 14 continuous concern categories from 1997-2017.

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 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' from around 2004 through to 2011 is attributable to the inclusion of this older age group. However, this explanation does not account for the pattern of growth in since 2011, which sees a degree of *stability* in the numbers and relative frequencies for both the 15-18 and 19-25 year age groups, and, if anything, a slight *decline* in number and relative frequency in those groups.
- Contrasted with this is the observation that though there has been an 8% growth in the raw number of contacts for mental health and related concerns since 2011 (N(2011)=19460 to N(2017)=20967; Δ=1516) almost all of it is attributable to growth in the number of contacts form 10-14 year olds (Δ = 2414). Indeed the number of contacts from 15-18 and 19-25 year olds *decreased* in that time period (Δ= -1009 across both age categories). The balance of the growth in the total is attributable to a small amount of growth in the 5-9 year old group (Δ = 111) – see Figure 21a.

> Most growth, since 2011, in contacts where mental health is identified as an issue comes from 10-14 year olds

- 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 professionalization 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. Long-term analysis shows that about half (45%) of the mental health contacts in 2017, in the 10-14 age group, were first-time contacts, whereas only about a fifth in the 19-25 year age group were first-time contacts (see Figure 21b), and growth in the number of first time (mental health) contacts 2011-17 is greatest in the 10-14 age group (123% or 1,250 contacts) and is over twice that of the growth in first time (mental health) contacts from 19-25 year olds in the same period (54% or 423 contacts). This pattern is consistent with an emerging trend of increasing numbers of first time contacts from 10-14 year olds wanting to discuss mental health related matters.
- 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.

Figure 21a. Supplementary data on change in N of contacts by age (mental health, emotional health, or self-injury) (2011-2017)

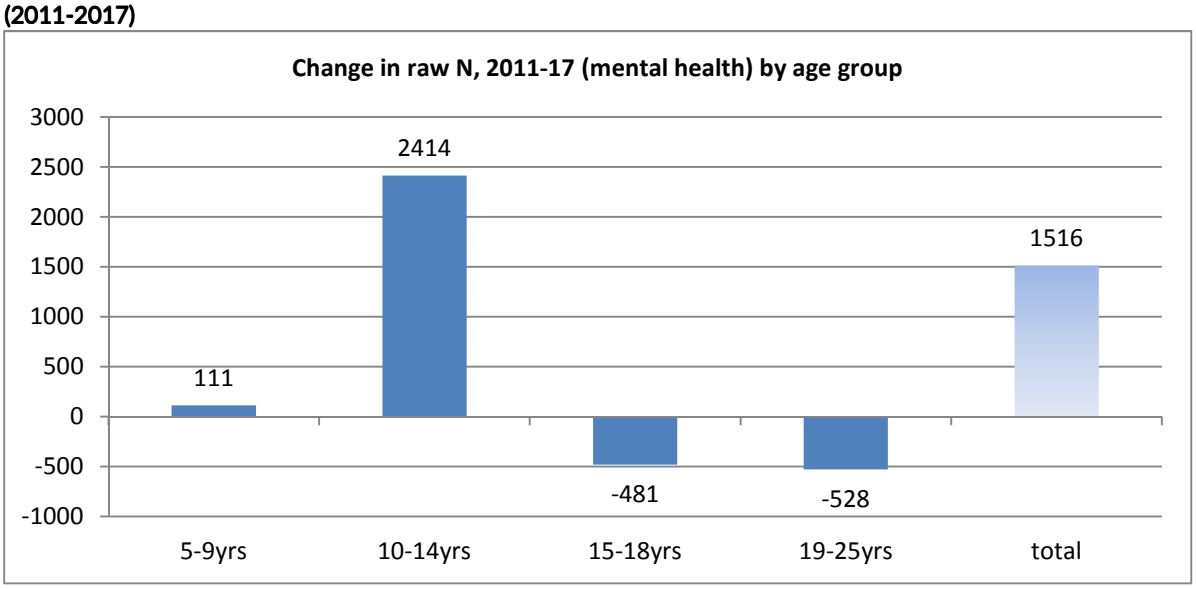
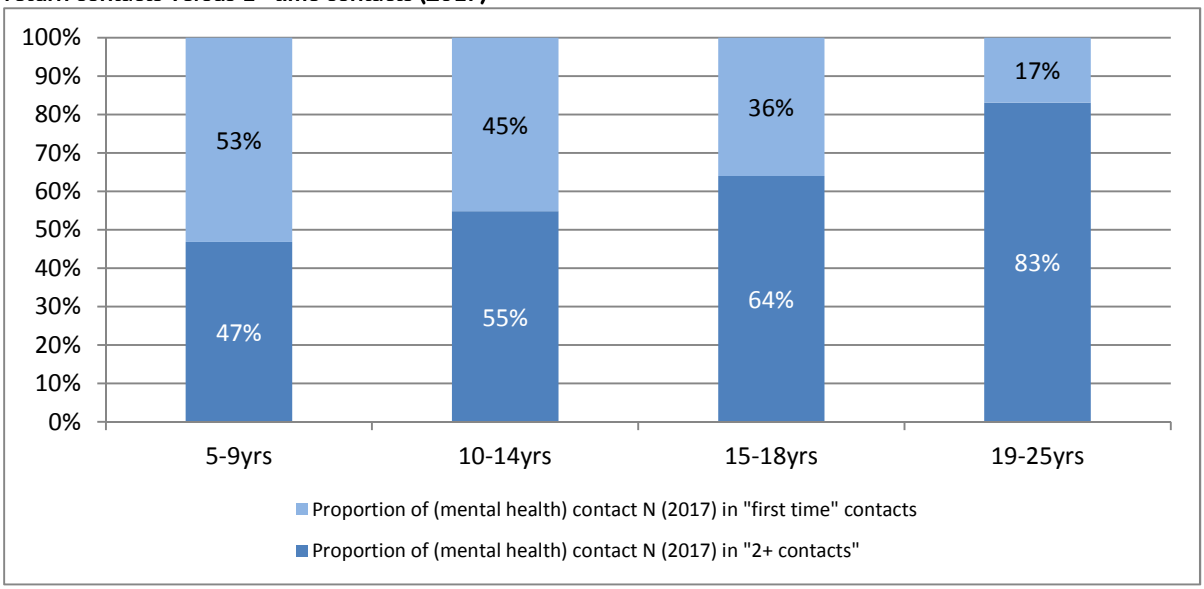


Figure 21b. Proportion of number of contacts (mental health, emotional health, or self-injury) in each age group - return contacts versus 1st time contacts (2017)



Note: Analyses based on the KHL Longitudinal Data Archive which uses a variable that identifies the presence of mental health concerns including self-harm and suicide; differences in tallies for the 1st time versus 2+ contacts is the result of some cases being unclassifiable.

3.4.10 Summary

During 2017, Kids Helpline counsellors responded to 66,386 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 2017 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 fairly consistent, although there is some evidence of an increase in the number and relative frequency of both mental health and suicide related contacts since 2015.

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 is an increase in help-seeking related to mental and/or emotional health or illness, including self-injury, and suicide. It is likely that some proportion of 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; notwithstanding this explanation, there is evidence of growth in the number of contacts about mental health related concerns particularly from 10-14 year olds especially since 2011.

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 2017 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 2017 and compares this with the frequency with which the concern was raised in 2015 and 2016.

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 the period 2015-2017
- 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 that are the basis of Table 7 are only available going back as far as 2012.

Consistent with the observations already made two areas of concern in which growth has occurred (both in raw N of contacts and in proportions relative to all contacts for each year) are suicide and mental health related concerns.

Table 7. Number and proportion of Kids Helpline counselling contacts aged 5-25 years with particular concerns and classes of concern – by year (2015-2017)[1]

Concern and concern class	2015 (*N* = 70,210)		2016 (*N* = 66,963)		2017 (*N* = 66,386)	
	n	col. %	*n*	col. %	*n*	col. %
Mental health & emotional wellbeing	**36,343**	**51.8%**	**35,774**	**53.4%**	**38,334**	**57.7%**
Mental health concerns	15,230	21.7%	15,709	23.5%	17,115	26%
Emotional wellbeing	12,939	18.4%	11,300	16.9%	11,596	18%
Suicide-related concerns	7,562	10.8%	8,750	13.1%	10,636	16%
Self-injury/self-harm concerns	4,466	6.4%	4,431	6.6%	4,545	7%
Loss and grief	2,268	3.2%	1,967	2.9%	2,154	3%
Friends, peers, partners & dating	**14,136**	**20.10%**	**12,495**	**18.70%**	**12,381**	**18.70%**
Dating and partner relationships	7,598	10.8%	6,718	10.0%	6,460	9.70%
Friends/peer relationships	6,881	9.8%	6,079	9.1%	6,234	9.40%
Family relationships	**13,329**	**19.00%**	**12,523**	**18.70%**	**12,153**	**18.30%**
Child-parent relationships	9,439	13.40%	8,907	13.30%	8,695	13.10%
Other family relationships	2,848	4.10%	2,673	4.00%	2,486	3.70%
Changing family structures	1,714	2.40%	1,644	2.50%	1,545	2.30%
Parenting own children	193	0.30%	160	0.20%	192	0.30%
Identity & self-concept	**5,371**	**7.60%**	**4,882**	**7.30%**	**4,827**	**7.30%**
Self-concept (global)	2,835	4.00%	2,426	3.60%	2,577	3.90%
Body image	895	1.30%	839	1.30%	881	1.30%
Sexual orientation	923	1.30%	870	1.30%	635	1.00%
Gender/sex identification	434	0.60%	599	0.90%	578	0.90%
Disability-related concerns	347	0.50%	206	0.30%	182	0.30%
Cultural identity	139	0.20%	147	0.20%	157	0.20%
Violence & abuse (non-family)	**5,913**	**8.40%**	**5,819**	**8.70%**	**5,483**	**8.30%**
Bullying - school related	3,425	4.90%	3,217	4.80%	2,942	4.40%
Bullying - other	693	1.00%	650	1.00%	615	0.90%
Sexual assault or abuse (non-family)	854	1.20%	1,000	1.50%	1,064	1.60%
Dating and partner violence	517	0.70%	509	0.80%	455	0.70%
Harassment and assault (non-sexual)	309	0.40%	317	0.50%	290	0.40%
Sexual harassment	215	0.30%	251	0.40%	240	0.40%
Child abuse & family violence	**5,147**	**7.30%**	**5,387**	**8.00%**	**5,173**	**7.80%**
Physical abuse	2,654	3.80%	2,809	4.20%	2,593	3.90%
Sexual abuse	992	1.40%	943	1.40%	931	1.40%
Emotional abuse	1,272	1.80%	1,451	2.20%	1,533	2.30%
Neglect of child	242	0.30%	282	0.40%	267	0.40%
Exploitation by family member	2	0.00%	10	0.00%	10	0.00%
Exposure to family violence	490	0.70%	563	0.80%	585	0.90%
Living-in-care issues	241	0.30%	174	0.30%	213	0.30%
School, education & work	**4,434**	**6.30%**	**3,949**	**5.90%**	**3,968**	**6.00%**
Study and education issues	3,269	4.70%	2,807	4.20%	2,857	4.30%
Employment issues	788	1.10%	846	1.30%	862	1.30%
School authority issues	439	0.60%	359	0.50%	319	0.50%
Physical or sexual health & development	**3,684**	**5.20%**	**3,341**	**5.00%**	**3,035**	**4.60%**
Physical health concerns	1,734	2.50%	1,601	2.40%	1,602	2.40%
Pregnancy-related concerns	842	1.20%	804	1.20%	630	0.90%
Sexual activity	897	1.30%	778	1.20%	678	1.00%
Physical/sexual development	149	0.20%	120	0.20%	108	0.20%
Contraception/safe sex	126	0.20%	124	0.20%	74	0.10%
Homelessness & basic needs assistance	**1,869**	**2.70%**	**1,888**	**2.80%**	**1,459**	**2.20%**
Homelessness	1,045	1.50%	1,028	1.50%	786	1.20%
Practical/material assistance	667	1.00%	681	1.00%	490	0.70%
Financial assistance/concerns	208	0.30%	223	0.30%	215	0.30%
Substance use, addictions & risk-taking	**1,449**	**2.10%**	**1,363**	**2.00%**	**1,216**	**1.80%**
Drug use	909	1.30%	812	1.20%	672	1.00%
Alcohol use	411	0.60%	401	0.60%	403	0.60%
Addictive behaviours (not drugs/alcohol)	123	0.20%	152	0.20%	154	0.20%
Physical risk-taking	42	0.10%	20	0.00%	28	0.00%
Gang/cult involvement	22	0.00%	23	0.00%	16	0.00%
Offending, abusive or violent actions	**693**	**1.00%**	**645**	**1.00%**	**650**	**1.00%**
Illegal/offending behaviour	367	0.50%	283	0.40%	298	0.40%
Abusive or violent actions	282	0.40%	338	0.50%	312	0.50%
Sexual violence/offending actions	53	0.10%	33	0.00%	45	0.10%

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 2017 and also the number of attempts made by counsellors to contact external agencies to support or protect clients in 2017. 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.

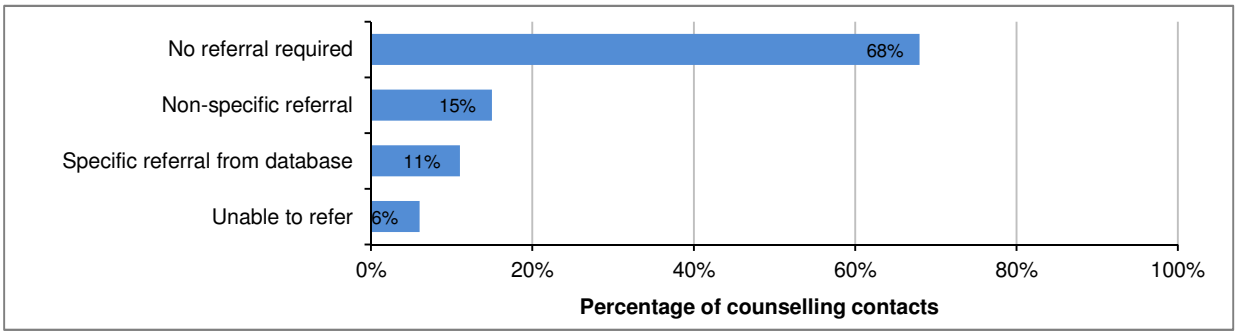
3.6.1 Referring children and young people to further support

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 2017, approximately one in three (32%) counselling contacts required referral for additional support, as indicated in Figure 22:

- 15% of counselling contacts were referred to a generalist service or practitioner, such as a doctor, school/guidance counsellor, local police or mental health worker
- 11% 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
- 6% 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 – 2017 Kids Helpline counselling contacts aged 5-25 years (*N* = 66,386)[1]



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

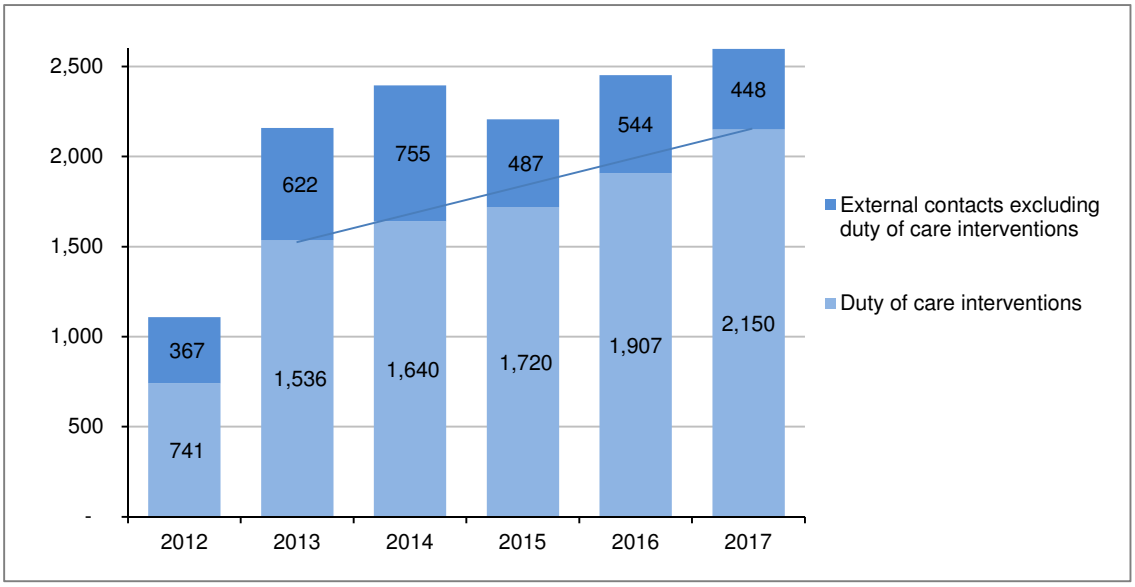
3.6.2 External contacts and duty-of-care interventions

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 2017, there were 2,598 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. Eight out of ten of these records (2,150 or 83%) concerned a duty-of-care intervention to protect a child from significant harm, as shown in Figure 23.

Duty-of-care contact attempts continue to rise steadily – up 40% since 2013; suicide and child abuse are the main reasons for duty-of-care interventions

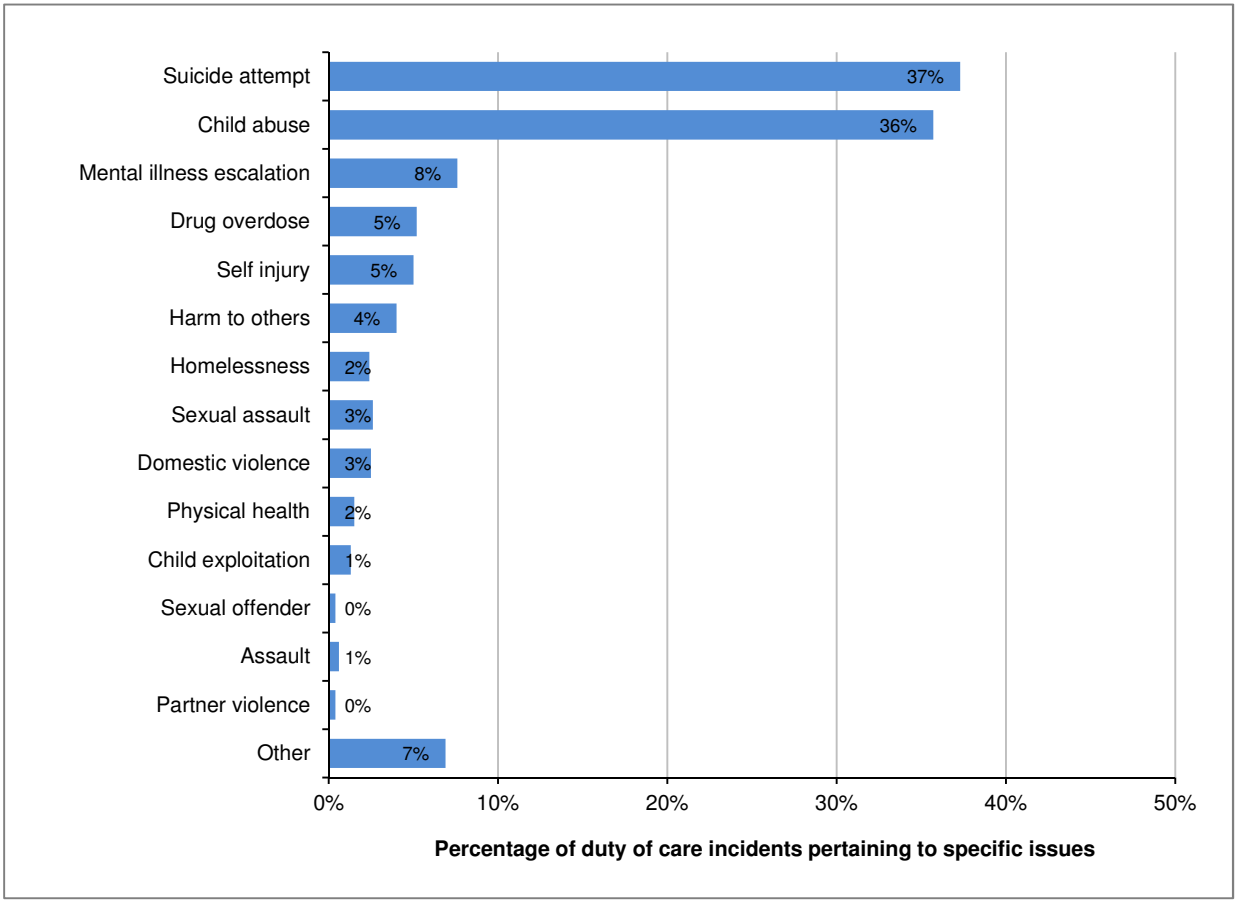
Figure 23 also shows the number of external contact attempts from 2012 to 2017. Over the five-year period (2013 to 2017), there has been a 20% increase in all external contact attempts by Kids Helpline counsellors. Duty-of-care interventions have increased by 40% over the same period. In the 2016 report, the 5-year increase was reported as 157%, however Figure 23 clearly shows that a more stable but less severe trend is observable in the data if 2012, a clear outlier in the data, is omitted from the trend estimate (1,536 in 2013 to 2,150 in 2017).

Figure 23. Number of external contact attempts by Kids Helpline counsellors, including duty-of-care interventions – by year (2012-2017)



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 2017. It reveals that child abuse and suicide attempts were by far the most common reasons for duty-of-care interventions in 2017 (36% and 37% respectively).

Figure 24. Reasons documented by Kids Helpline counsellors for duty-of-care interventions (2017)



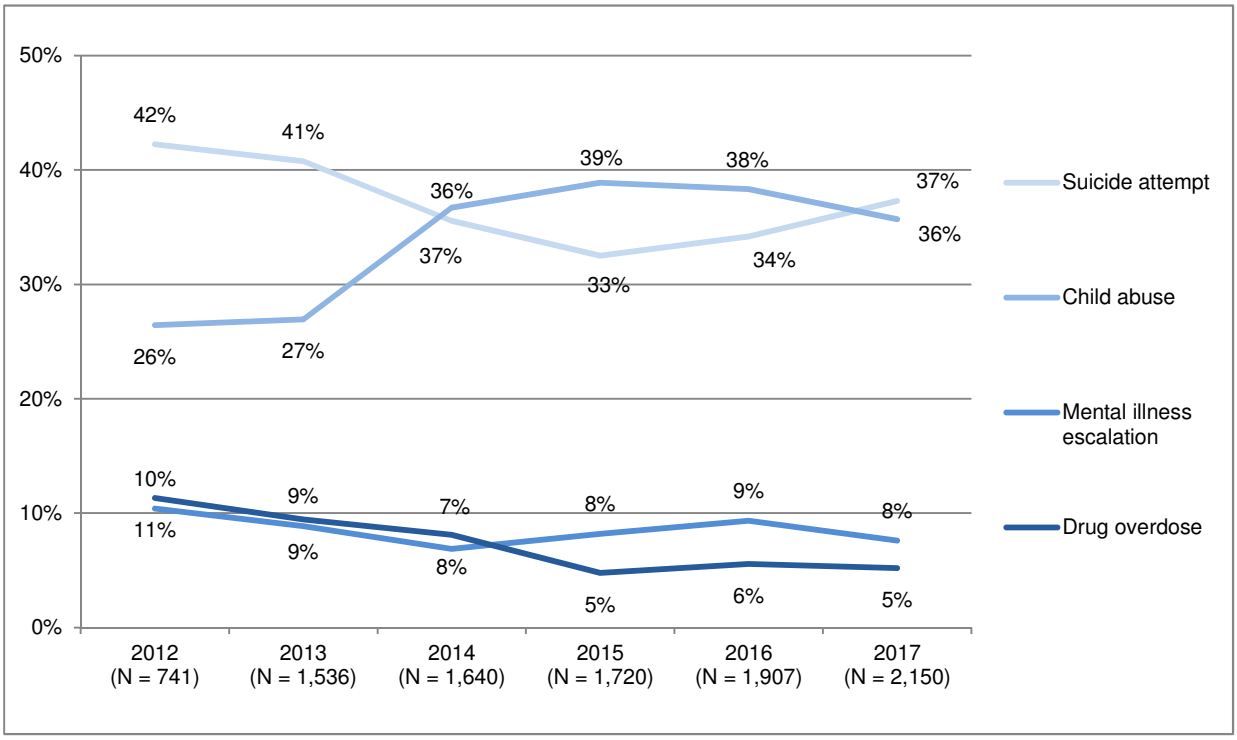
1. Up to four issues may be recorded for each duty-of-care intervention. Accordingly, percentages sum to more than 100%.

It can be interesting to know if the issues precipitating duty-of-care actions are changing over time. Analysis over the last six 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 36% in 2017, after a peak in 2015.
- Suicide attempts, however, have decreased relative to other issues, from 42% in 2012 to 37% in 2017, though the graph indicates that their relative frequency is on the rise since a trough in 2015.
- Drug overdose and self-injury have also decreased relative to other documented issues, from 11% in 2012 to 8% in 2017 for drug overdose, and from 10% in 2012 to 5% in 2017 for self-injury.

Figure 25. Relative frequency of particular reasons being documented by Kids Helpline counsellors for initiating duty-of-care interventions – by year (2012-2017)[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%. In Figure 25, Percentages sum to less than 100%, however, because only four issue-categories are presented.

3.6.3 Summary

In 2017, approximately one in three counselling contacts required referral for additional support. In addition, about 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. Five out of every six 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 2017. Over the last five years, the number of duty-of-care interventions initiated by Kids Helpline counsellors has increased by 40%, and child abuse and suicide attempts are on par as the most commons 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 2017, along with the figures for 2016 for comparison.

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. 2017 Kids Helpline counselling contacts aged 5-25 years with specific self-identified concerns (c.f. 2016)

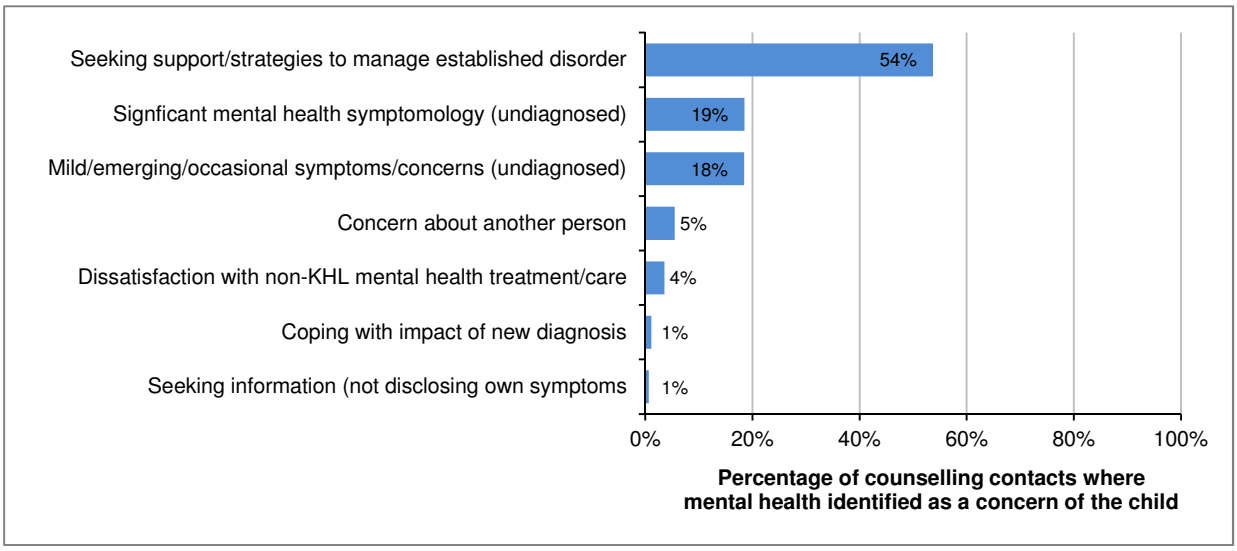
Particular concern	Number of contacts with this concern	% of counselling contacts (*N* = 66,386)
Mental health (2017)	**17,115**	**26%**
(2016)	15,709	23%
Suicide (2017)	**10,636**	**16%**
(2016)	8,750	13%
Child abuse (2017)	**5,173**	**8%**
(2016)	5,387	8%
Self-injury (2017)	**4,545**	**7%**
(2016)	4,431	7%
Bullying (2017)	**3,523**	**5%**
(2016)	3,828	6%

3.7.1 Mental health

In 2017, 17,115 counselling contacts (or 26%) 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 2017.

Figure 26. Subcategory of concern where mental health identified as a concern of the child or young person (*N* = 17,115) (2017)[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 (54%) 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 (18%) concerned mild or occasional symptoms and half (19%) were about significant mental health symptoms.
- One in 20 (5%) contacts about mental health were in relation to the child or young person's concern for another person's mental health.

The observation that over half (54%) of the contacts about mental health concerns are from children and young people seeking support or strategies to manage an *established disorder* is indicative of Kids Helpline's role as a safety net for young people in the context of the broader mental health system – see Section 2.2.2.

3.7.2 Suicide

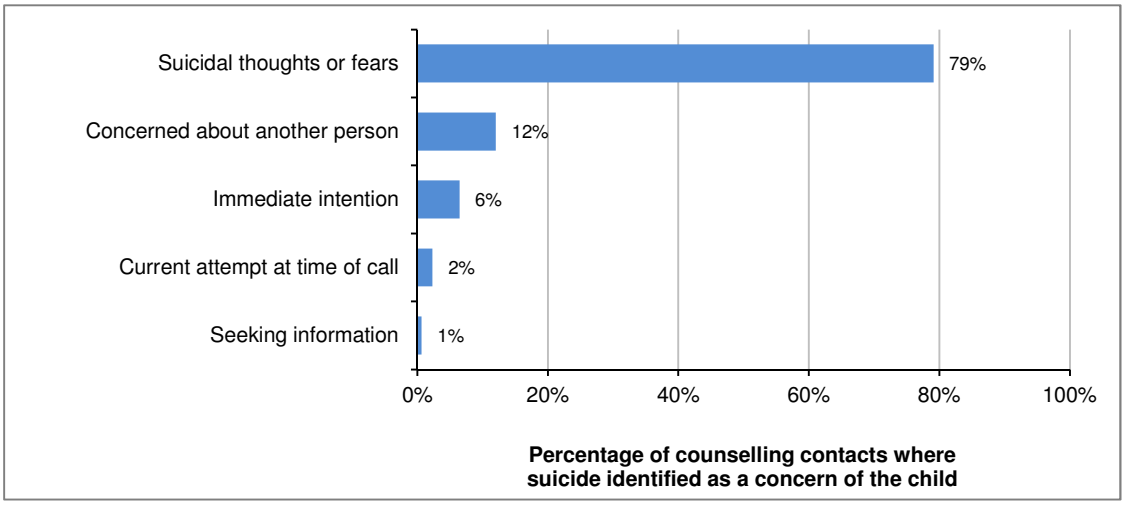
In 2017, 10,636 counselling contacts (16%) from children and young people aged 5-25 years were about suicide-related concerns.

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 2017 when suicide was a concern of the child or young person.

Key observations from the data include the following:

- The vast majority (79%) of these contacts were about the child or young person's own suicidal thoughts or fears.
- Roughly one in eight (12%) contacts was in relation to concern for another person's suicidal thoughts or feelings.
- Just less than one in 10 (6%) 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* = 10,636) (2017)[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 2017, 5,173 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:

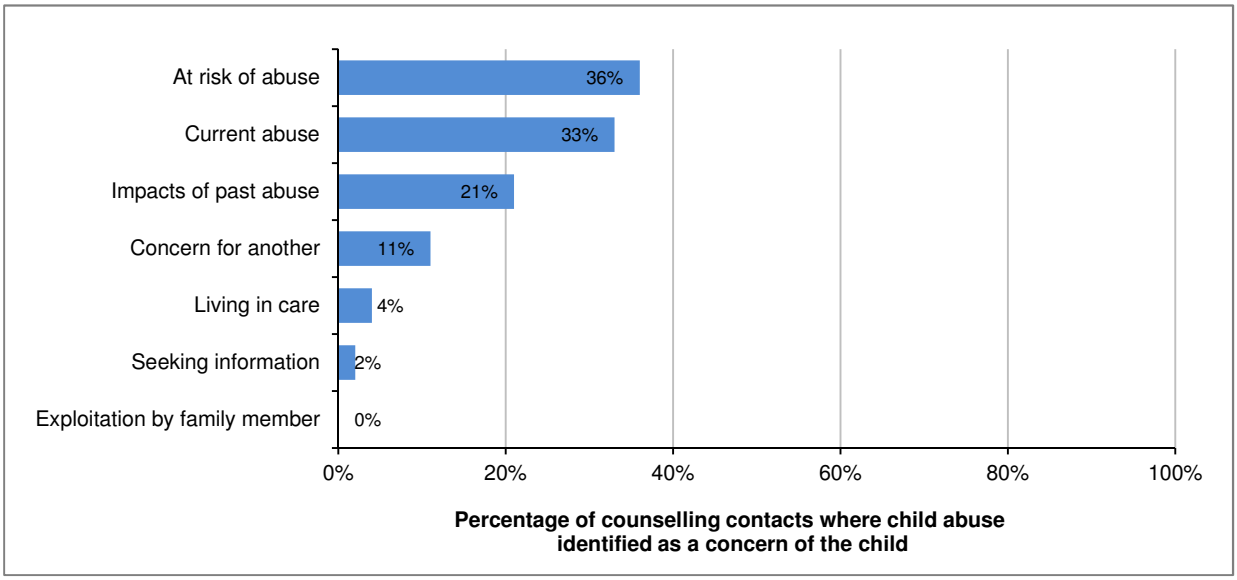
- physical abuse
- sexual abuse
- emotional abuse
- neglect
- exploitation by family member
- exposure to family violence, or
- living in care issues.

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 (21%) 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 25 (4%) 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* = 5,173) (2017)[1]



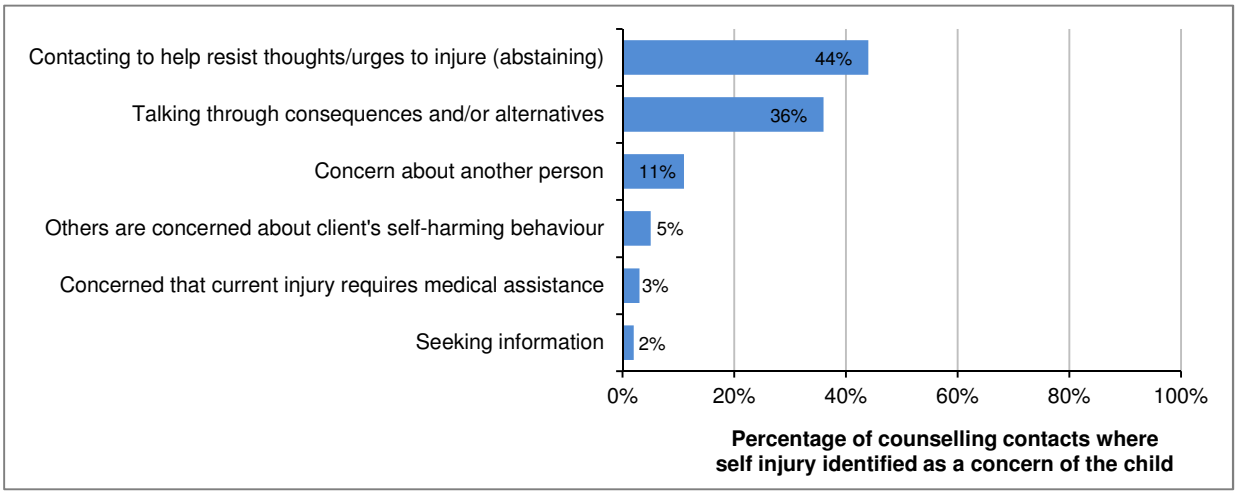
1. Percentages sum to more than 100% as more than one subcategory of child abuse concern may be identified per contact.

3.7.4 Self-injury

In 2017, 4,545 (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* = 4,545) (2017)[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 eight out of ten contacts (79%) 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

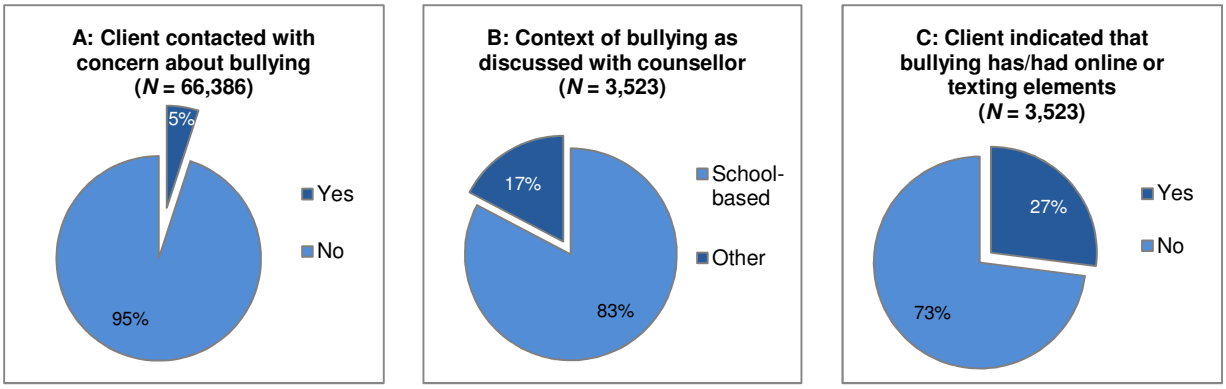
Within Kids Helpline's concern classification system, bullying is defined as:

> *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, mobiles phones and other digital devices to verbally abuse or harass.

Figure 30 summarises data about bullying concerns responded to by Kids Helpline in 2017. Part A indicates that 3,523, or 5%, of counselling contacts from children and young people aged 5-25 years were about bullying. Part B shows that of these, 2,942 or 83% were classified by counsellors as instances of 'school-based bullying', and 615 or 17% were classified as 'other bullying'.

To gauge the prevalence of *cyberbullying* concerns among Kids Helpline contacts, counsellors began in 2016 collecting information 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 3,523 contacts received about bullying in 2017, 956 or 27% indicated that the bullying included online or texting aspects (i.e. cyberbullying).

Figure 30. Bullying concerns of 2017 Kids Helpline counselling contacts aged 5-25 years



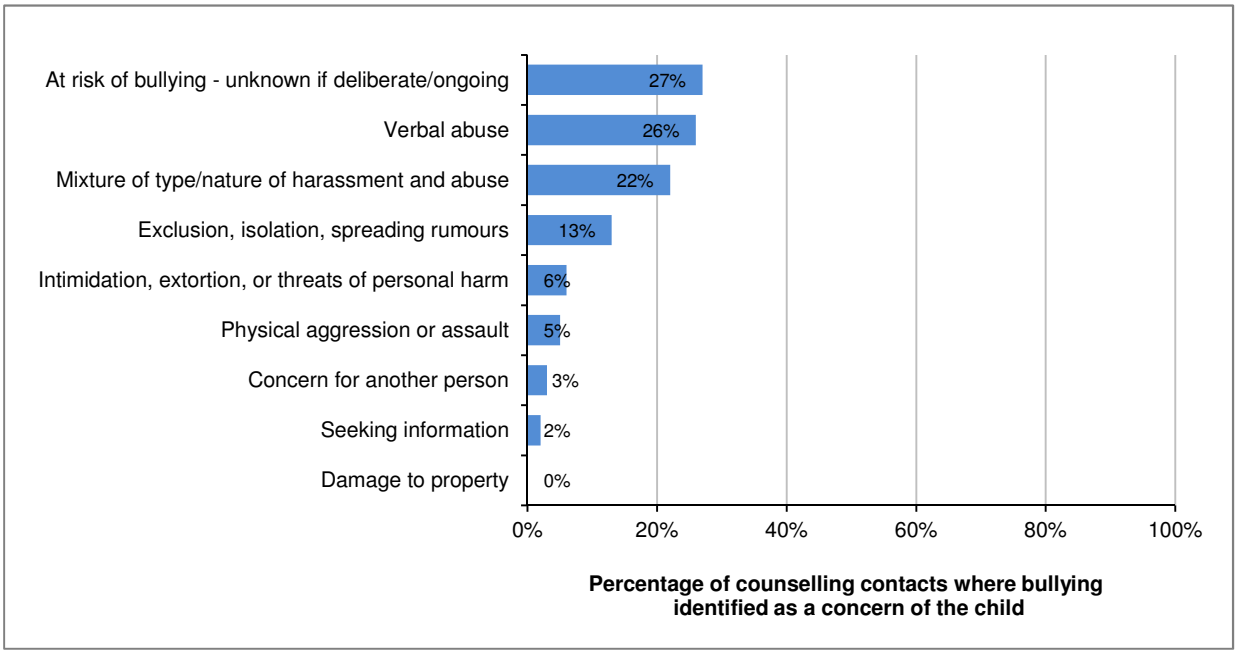
1. Percentages sum to more than 100% as more than one bullying concern may be recorded in a single contact.

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 2017 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 (72%) contacts, however, were from children and young people experiencing some form of bullying according the Kids Helpline definition:
  - in 26% of contacts, the bullying was described as *verbal abuse*
  - in 13% 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 22% 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* = 3,523) (2017)[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 eSafety Commissioner. This partnership ensures that children young people experiencing concerns arising from their online environment are provided with counselling and support through Kids Helpline. Children and young people can receive priority access to Kids Helpline web counselling via the eSafety website or can be referred directly.

In addition to this Kids Helpline have worked collaboratively with The eSafety Commission to develop lesson plans and an interactive quiz for its "young and esafe" platform and continues to promote the cyberbullying and image based abuse reporting platforms via the Kids Helpline website. Our Practice unit also delivered training to eSafety staff on self-care in the workplace .

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 social media platforms and internet service providers where a young person 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, Optus *Digital Thumbprint* program (see Chapter 6). 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, Kids Helpline counsellors record, 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 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

In 3,087 (5%) of the 66,386 counselling contacts responded to by Kids Helpline counsellors, 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 (64% c.f. 57%) and less likely to be from young people aged 19-25 years (22% c.f. 30%) (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* = 66,386) (2017)

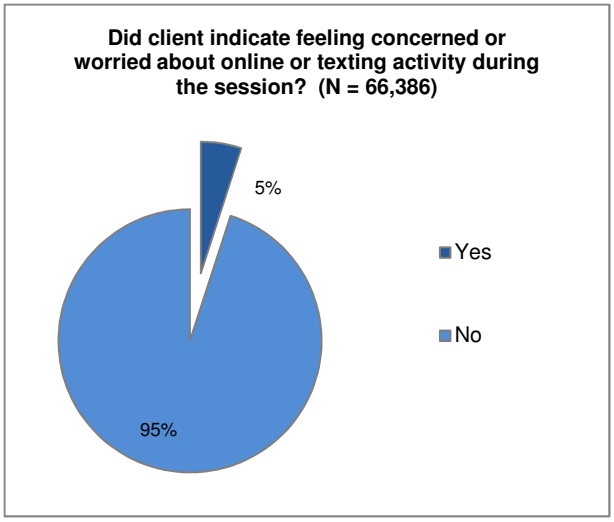
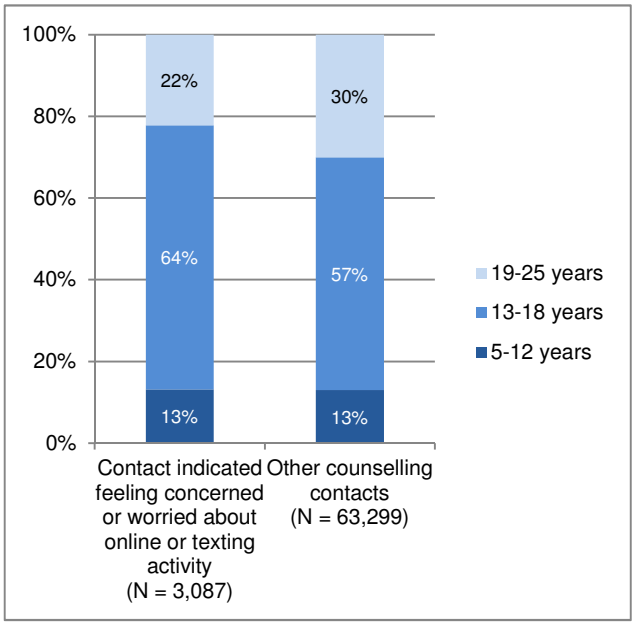


Figure 33. Age group of Kids Helpline counselling contacts by whether or not they disclosed experiencing cyber-safety issues (2017)



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

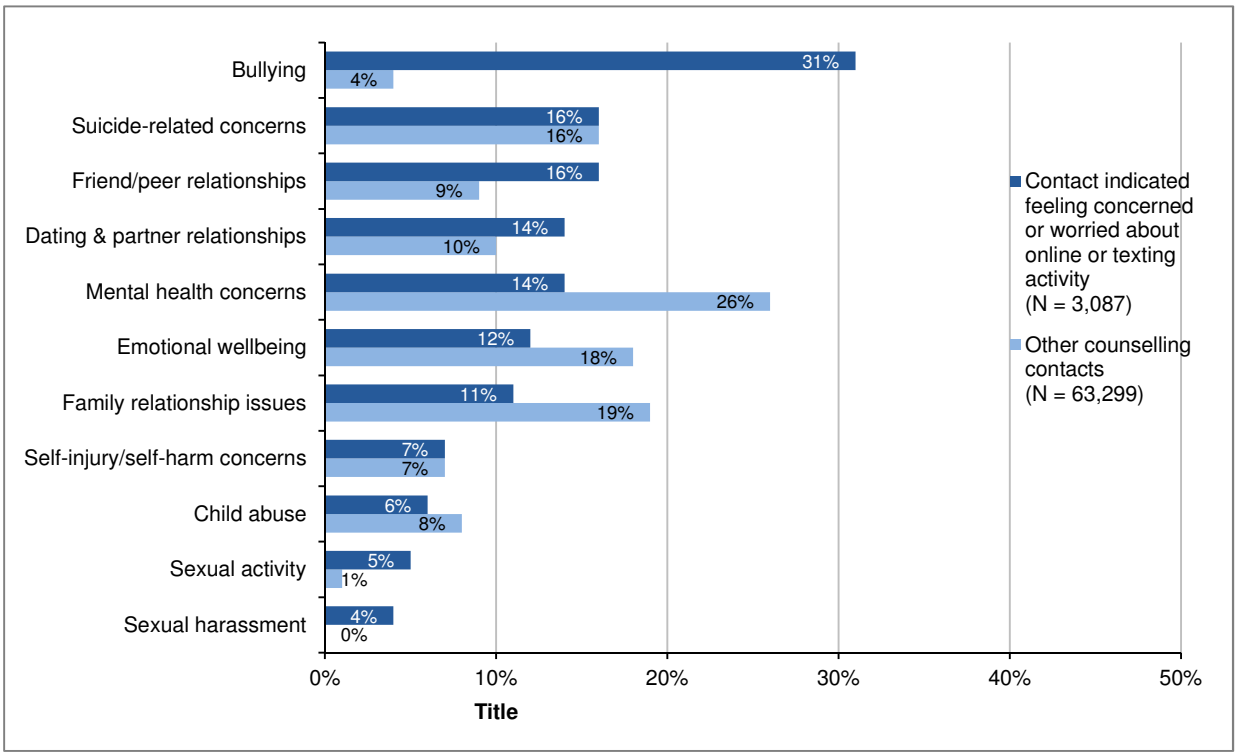
Counsellors are not currently asked to record the nature of the child or young person's cyber-safety worries, although some will have recorded this in open-ended contact notes. More systematic classification of these issues may be undertaken in the future. In the interim, however, in order to glean some 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 one in three (31%) of these counselling sessions focusing on bullying. By comparison, bullying was recorded as a concern of the child or young person in 4% 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 (14% c.f. 10%)
  - friend and peer relationships (16% c.f. 9%)
  - sexual activity (5% 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. 26%)
  - emotional wellbeing (12% c.f. 18%), and
  - family relationship issues (11% 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 (2017)[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 includes this issue in its data collection to gauge the frequency of cyber-safety issues being discussed in counselling contacts.

In 2017, 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 and context. 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-injury[3] including the urge to injure themselves, and/or
- the client disclosed thoughts about killing themselves during the session.

[3] Kids Helpline defines self-injury as deliberate, non-life-threatening, self-effected 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.

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 2017 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.

The data in Table 9 reveal that:

- in three out of seven counselling contacts (43%) in 2017, the child or young person was identified as experiencing a mental health disorder, or symptoms indicative of a mental health disorder (this is a 7% increase since 2016 or an extra 1,933 contacts)
- in 17% of counselling contacts, the child or young person disclosed current thoughts of suicide to the counsellor (this is a 17% increase since 2016 or an extra 1,892 contacts)

Table 9. Number and percentage of 2017 Kids Helpline counselling contacts aged 5-25 years assessed by counsellors to be experiencing particular issues (c.f. 2016)

Issue being experienced by child or young person as assessed by counsellor (2017 and c.f. 2016)	*n*	% counselling contacts (*N* = 66,386)
Has mental health disorder (2017)	28,720	43%
(2016)	26,787	40%
Has current thoughts of suicide (2017)	11,345	17%
(2016)	9,453	14%
Has current difficulties with self-injury (2017)	7,685	12%
(2016)	7,913	12%
Has at least one of the above issues (2017)	32,482	49%
(2016)	30,254	45%

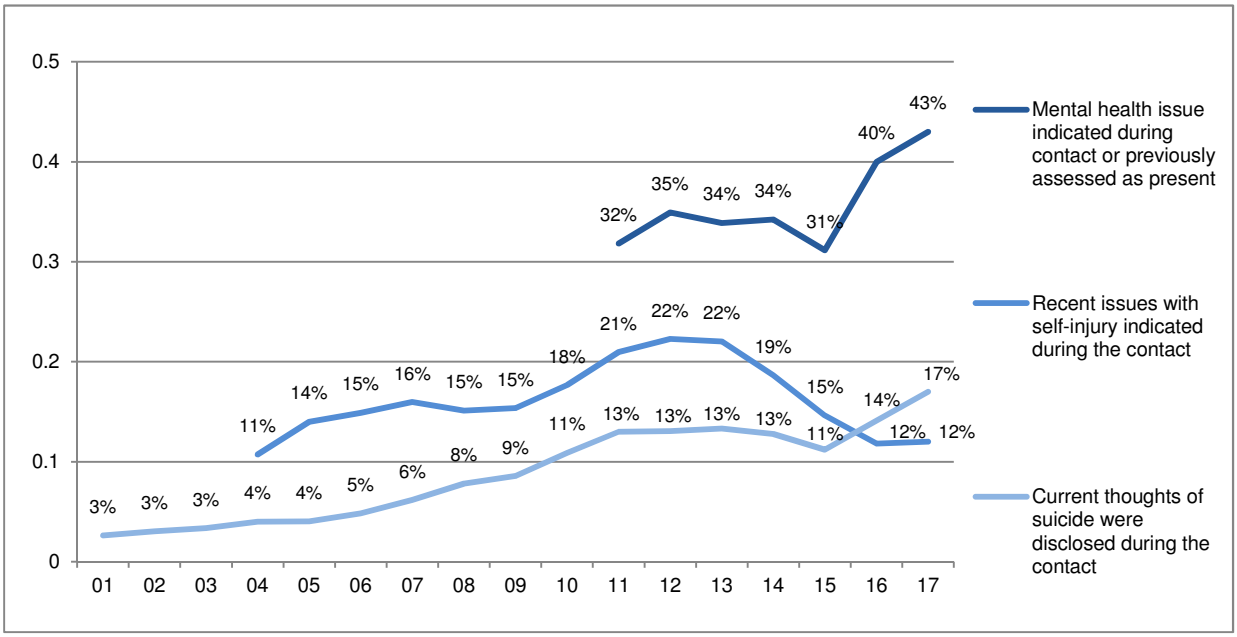
- in 12% of counselling contacts, the child or young person disclosed experiencing current difficulties with self-injury (this is a 3% decrease since 2016, though as a *proportion of all contacts* this issue remains stable at 12% compared with 2016), and
- in half of all counselling contacts (49%), the child or young person was assessed as experiencing at least one of these three issues (an increase of 7% on 2016, or an extra 2,228 contacts).

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 2017, the frequency with which mental health issues were assessed by counsellors as being present increased to 43% 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 2017, 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 17% in 2017.

Figure 35. Percentage of Kids Helpline counselling contacts aged 5-25 years assessed by counsellors to be experiencing particular issues – by year (2001-2017)



3.9.3 Summary

Close to half (49%) of Kids Helpline counselling contacts in 2017 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 2017 but also over six 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 2017, increased wait times for phone contacts (up almost 60% to approximately 4 minutes, from 2 minutes in 2012).

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.

Whilst these innovations in practice and in data- and case-management may account for much of the decline in the numbers of non-counselling contacts, other factors may also be at play, including the availability, through social media, of alternate avenues for young people to engage socially, playfully and in entertaining ways.

Regardless of the causes of the reductions in answered non-counselling contacts, it is worth noting that, based on the analysis of the durations of the two types of contact (counselling and non-counselling) 2011-2017, the ratio of counselling contact duration to non-counselling contact duration is approximately 13::1. In other words a reduction of 13,000 non-counselling contacts would liberate approximately enough counsellor time for 1000 counselling contacts, on average. (In fact, per medium, the ratios are: email 2.9 to 1; phone 15 to 1; and web chat 6 to 1, approximately, based on averaging the ratios over time – 2012-2017).

Since 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 2016 to optimise its usage by mobile devices, including the introduction of a new interface for the delivery of web counselling.

The result of this change, perhaps combined with increasing demand/preference for web-chat, is that more contacts are received via web-chat. Combined with the fact that web counselling is more time consuming per contact (for both counselling and no-counselling types), the nett effect on the counselling centre's staff-time resource is greater than the nett change in number of contacts of counselling and non-counselling types.

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 2017. 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.

Key observations from Table 10 about service demand and response in 2017 include the following:

- 339,724 attempts were made to contact the Kids Helpline counselling and support service, 73% of these by phone (248,008), 23% by web chat (79,054) and 4% by email (12,662).
- Of these attempts 157,656 were answered by counsellors, corresponding to an overall response rate of 46%.
- 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 2017 ranged from 51% in ACT to 37% in the Northern Territory.
- Mobile calls made up 86% of phone attempts, while landlines made up 14%. Response rates for landlines were slightly higher than for mobiles (47% c.f.44%).

Trend data

Attempted contacts (service demand)

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

- Attempts to contact the service from 2012 to 2017 have reduced overall by 26%.
- The reduction in demand pertains to phone attempts and email attempts only, which reduced by 37% and 47% respectively from 2012 to 2017.
- Web chat attempts, on the other hand, increased by 85% across the same period.

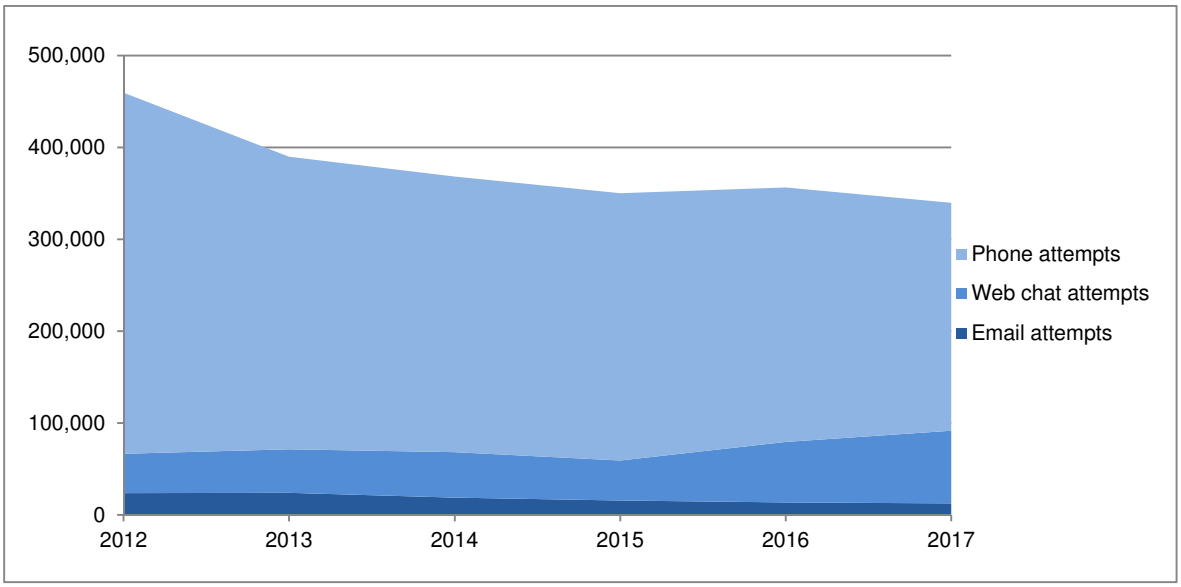
Table 10. Attempted and answered contacts – by medium, state and year of contact[1]

Medium of contact	2017		
	Attempts	Answered	Response rate
Phone			
ACT	4,828	2,457	51%
NSW	83,750	35,836	43%
NT	2,356	811	34%
QLD	51,608	23,066	45%
SA	15,359	6,494	42%
TAS	5,784	3,129	54%
VIC	61,332	28,629	47%
WA	22,991	9,371	41%
All States	**248,008**	**109,793**	**44%**
Ph. type			
Mobile	213,591	93,510	44%
Landline	34,417	16,283	47%
Web chat			
ACT	1,790	784	44%
NSW	25,771	11,573	45%
NT	475	197	41%
QLD	14,532	6,615	46%
SA	5,348	2,413	45%
TAS	1,815	828	46%
VIC	22,397	9,980	45%
WA	6,927	2,811	41%
All States	**79,054**	**35,201**	**45%**
Email			
ACT	298	298	100%
NSW	3,634	3,634	100%
NT	48	48	100%
QLD	2,380	2,380	100%
SA	775	775	100%
TAS	440	440	100%
VIC	3,691	3,691	100%
WA	1,396	1,396	100%
All States	**12,662**	**12,662** [2]	**100%**
All media			
ACT	6,915	3,539	51%
NSW	113,155	51,043	45%
NT	2,879	1,056	37%
QLD	68,521	32,061	47%
SA	21,481	9,681	45%
TAS	8,039	4,397	55%
VIC	87,420	42,300	48%
WA	31,314	13,578	43%
All States	**339,724**	**157,656**	**46%**

1. The data presented in this table are sourced from Kids Helpline phone, web chat and email systems databases.
2. In addition to 12,662 emails received and responded to in 2017, 418 outreach emails were sent.

- Notwithstanding the growth in web attempts, phone continues to be the medium by which the great majority of attempts are made (73% of attempts in 2017 came via phone).

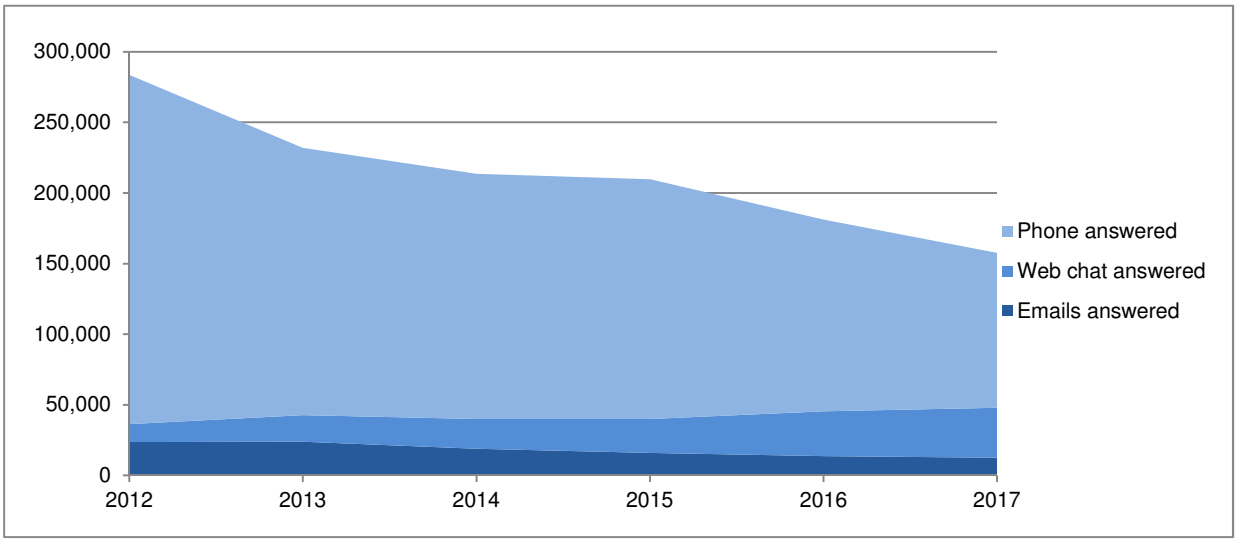
Figure 36. Number of attempted contacts (demand) by medium – by year (2012-2017)[1]



Contact medium	2012	2013	2014	2015	2016	2017	% change 2012-2017
Phone attempts	393,069	318,633	300,200	290,767	276,960	248,008	-37%
Web chat attempts	42,806	47,335	49,429	43,464	65,954	79,054	85%
Email attempts	23,726	24,000	18,832	15,886	13,681	12,662	-47%
All attempts	459,601	389,968	368,461	350,117	356,595	339,724	-26%

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 (2012-2017)[1]



Contact medium	2012	2013	2014	2015	2016	2017	% change 2012-2017
Phone responses	247,350	189,394	173,752	169,802	135,719	109,793	-56%
Web chat responses	12,643	18,678	21,082	24,115	31,765	35,201	178%
Email responses	23,726	24,000	18,832	15,886	13,681	12,662	-47%
All responses	283,719	232,072	213,666	209,803	181,165	157,656	-44%

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

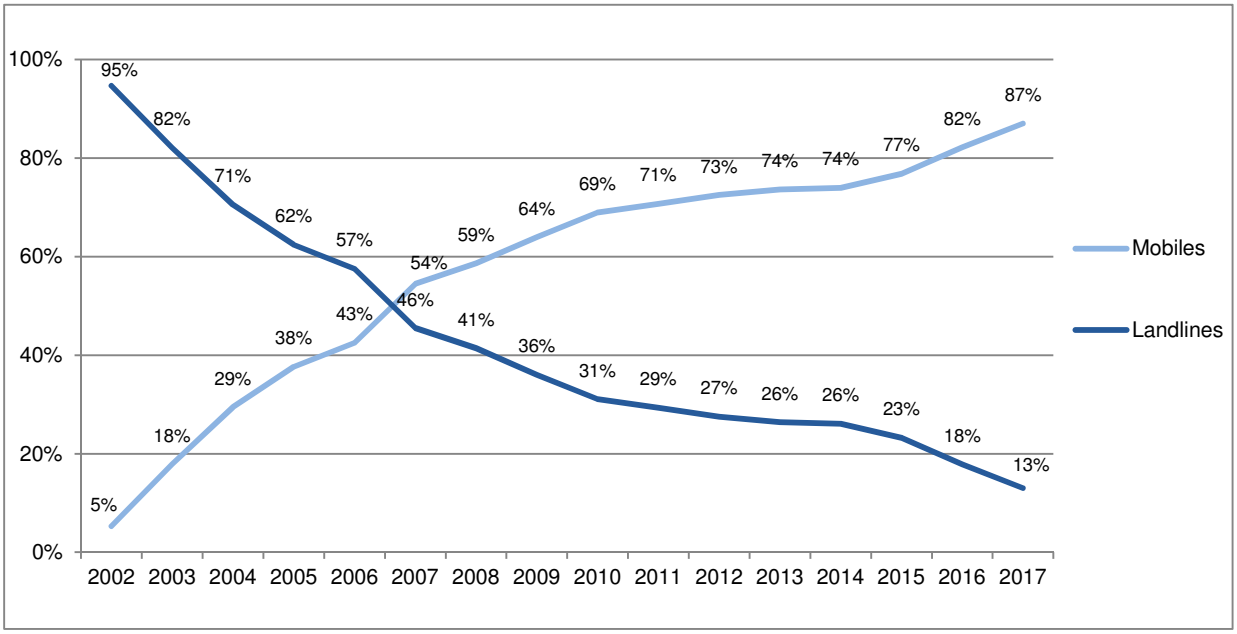
Answered contacts (service responses)

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 44% from 2012 to 2017.
- The reduction in service responses relates to phone and email responses only, which reduced by 56% and 47% respectively from 2012 to 2017.
- Web chat responses, by contrast, increased by 178% across the period.
- Notwithstanding the growth in web chat responses, the greatest number of client responses are still phone responses (70% of answered contacts in 2017 were phone contacts).

Looking more closely at phone responses, it is possible to see in 2017 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 16 years by phone type. In 2002, almost all telephone contacts (95%) responded to were from landlines with 5% coming via mobile phone. In 2017, the vast majority (87%) 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 (2002-2017)[1]



1. Data presented in this figure are sourced from Kids Helpline's *Record-a-Contact* database. From 2002 to 2017, data on phone type were available for 86% of Kids Helpline phone contacts. Note that proportions for 2017 are slightly different to that for mobile/landline answered phone calls reported in Table 10. This is owing to 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:

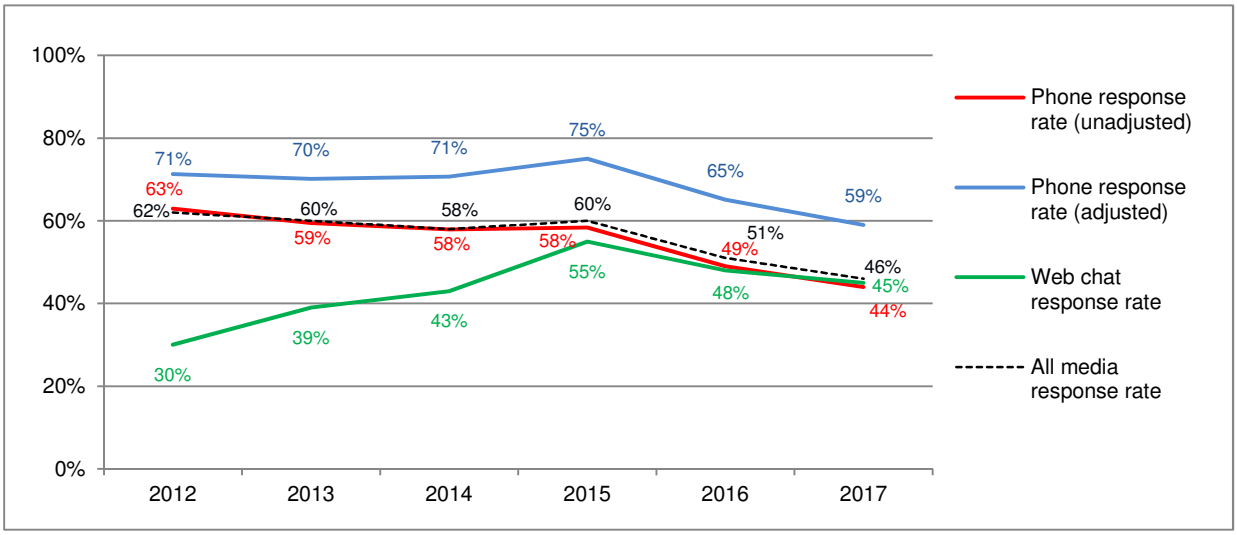
- the *unadjusted* response rate, which is simply the number of answered phone contacts divided by the number of attempted phone contacts, and
- the *adjusted* response rate which removes from the count of attempts those phone calls terminated by callers before the end of a 21 second mandatory wait message 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 2017, for example. It indicates that half (45%) 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:

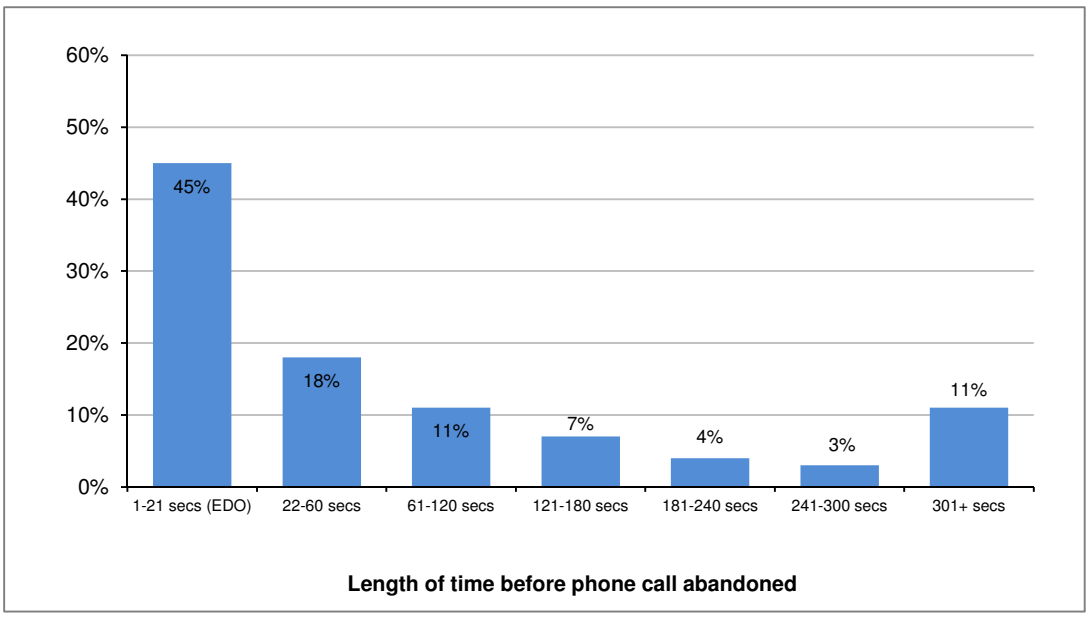
- from 2012 to 2015 the adjusted phone response rate was steady between 70-75% but declined to 59% in 2017
- from 2012 to 2015 the web chat response rate increased from 30% to 55%; however, in 2017 it dipped back to 45%, and
- from 2012 to 2015 the overall service response rate (*all media*) was stable around 60%; however, in the period 2015 to 2017 it has dropped to 46%.

Figure 39. Response rates by medium: phone (unadjusted and adjusted to exclude early drop outs), web chat, and all media – by year (2012-2017)[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* = 138,048) (2017)[1]



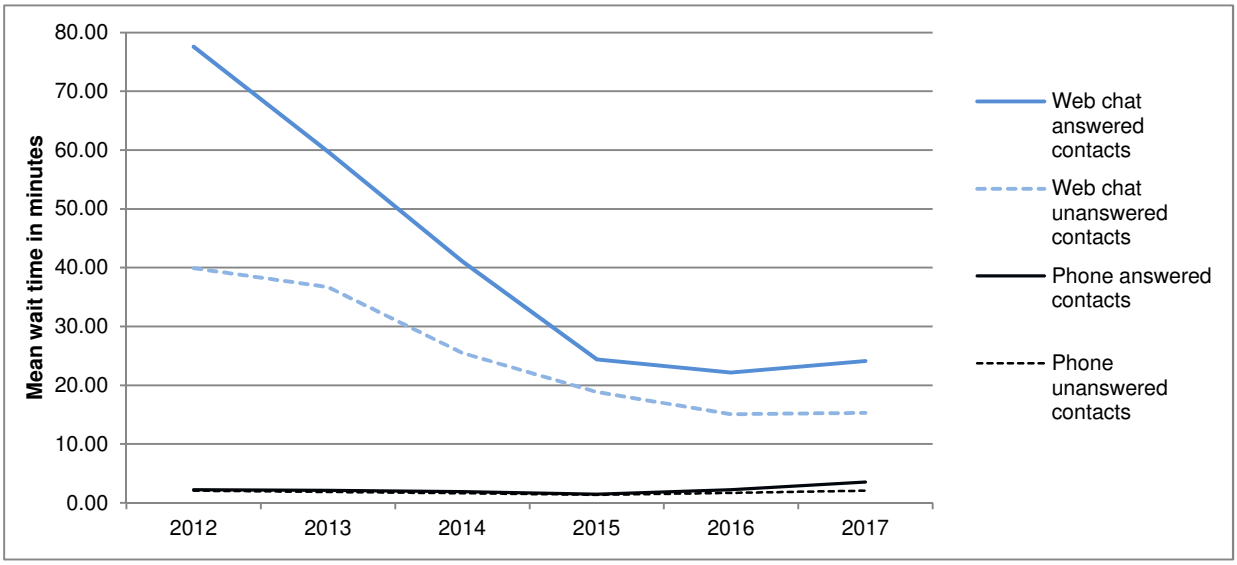
1. Data presented in this table are sourced from Kids Helpline telephone system database. The number of unanswered calls reported in this figure is slightly greater than that reported in Table 1 due to the use of summary and unit record data in Table 10 and Figure 40 respectively.

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 2017. These data indicate the following:

- Mean wait times for answered web chat contacts decreased by 69% between 2012 and 2017. Six years ago, answered web chat contacts waited 78 minutes on average to be answered and in 2017 they waited just 24 minutes on average.
- Over the period 2012-2016, the mean wait time for answered phone contacts remained unchanged at just around 2 minutes; in 2017 that has increased to an average wait time of three-and-a-half minutes (an increase of 58% over the six year period).
- The mean wait time for unanswered web chat has improved over the six years (2012-2017) – by 62%; the mean wait time for phone contacts has marginally improved over the same period – by 2%.

Figure 41. Mean wait-time in minutes for attempted and answered phone and web chat contacts – by year (2012-2017)[1]



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

Contact medium	Mean wait time answered contacts *(min)*							Mean wait time unanswered contacts *(min)*						
	2012	2013	2014	2015	2016	2017	% change 12-17	2012	2013	2014	2015	2016	2017	% change 12-17
Phone	2.22	2.10	1.90	1.47	2.23	3.52	**58%**	2.05	1.83	1.62	1.37	1.68	2.08	**2%**
Web chat	77.58	59.73	41.07	24.37	22.15	24.13	**-69%**	39.92	36.72	25.47	18.83	15.08	15.31	**-62%**

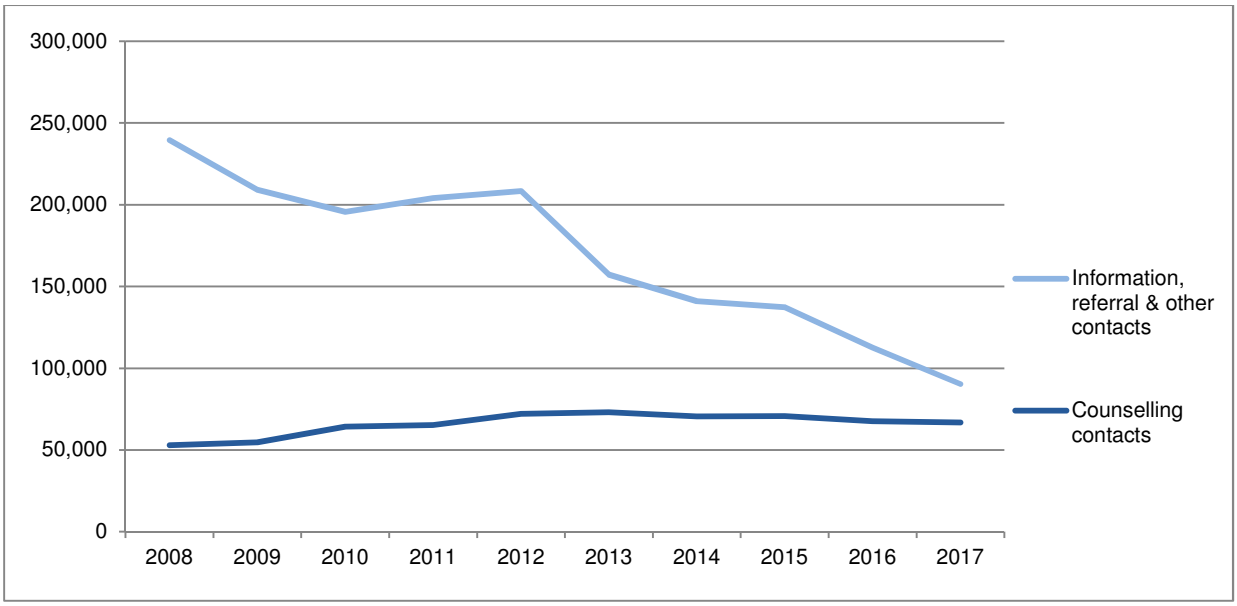
3.10.3 Demand for different types of support – counselling vs. non-counselling help-seeking

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 46% (from 294,498 in 2008 to 157,150 in 2017)
- the decrease, however, is among those seeking information, referral and other non-counselling responses (a reduction of 62%, from 239,563 in 2008 to 90,243 in 2017)
- counselling contacts have actually grown across the period by 26% (from 52,935 to 66,907) and have increased 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 2008 to 43% in 2017. However, this proportionate growth is the result of reduction in the number of referral and other non-counselling contacts.
- the number of counselling contacts reached a recent peak in 2013, and since then has been gently declining (with a mean count of about 70,000 contacts per year). The variation evident in the counts of counselling contacts appears, if we take a long-term view, to be part of the normal ebb and flow of contacts of this type over time (indeed, the decrease since 2013 of 6,030 counselling contacts is less than one-half of a standard deviation in the annual variation in counselling contact counts since 2001 – see Figure 42a).

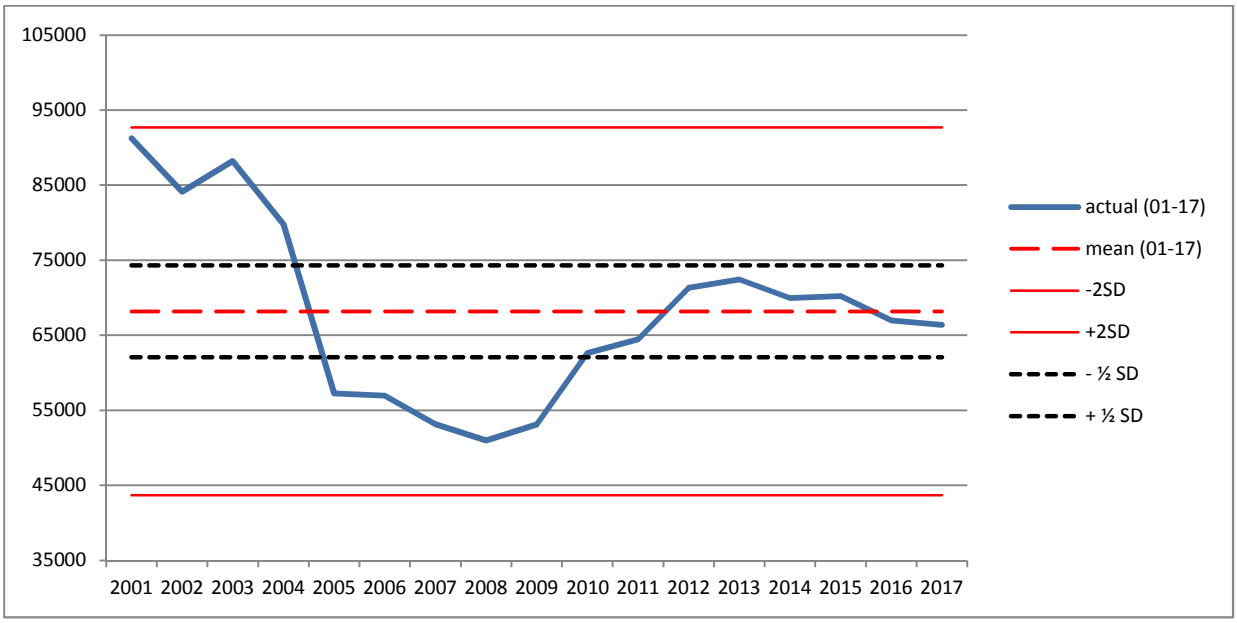
Figure 42. Number of Kids Helpline answered contacts (all ages) by type of support sought: counselling support or information, referral and other support – by year (2008–2017)[1]



Support type sought	Number of contacts per year										% change 08-17
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	
Info/referral	239,563	209,162	195,638	204,016	208,351	157,298	141,032	137,302	112,732	90,243	-62%
Counselling	52,935	54,632	64,248	65,217	72,131	73,010	70,506	70,725	67,590	66,907	26%
All contacts	292,498	263,794	259,886	269,233	280,482	230,308	211,538	208,027	180,322	157,150	-46%

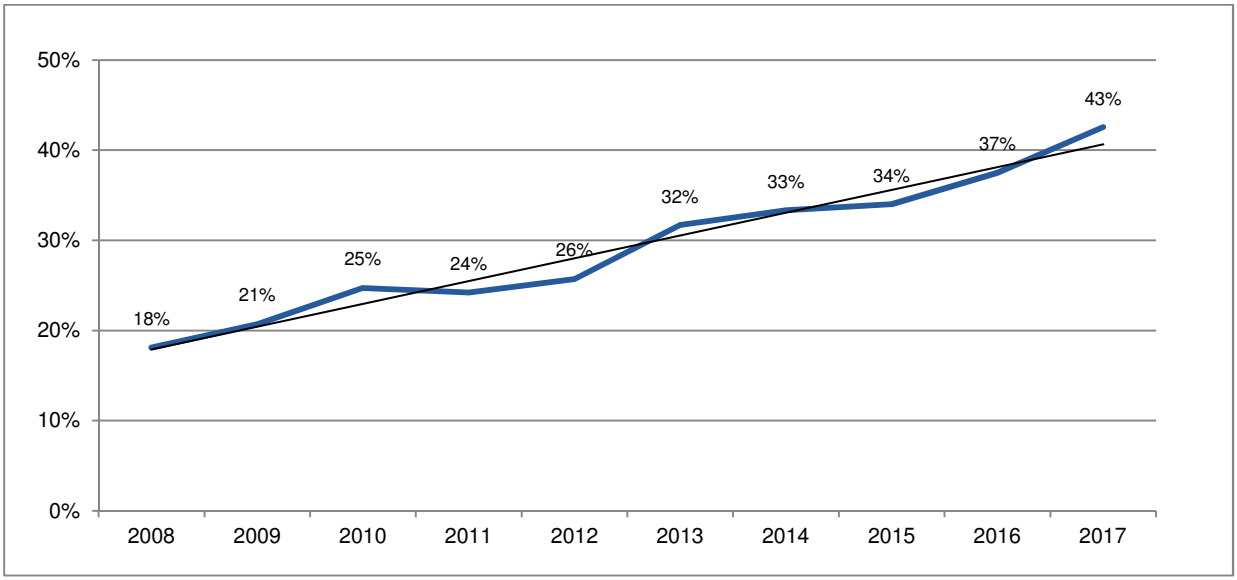
1. Data presented in this figure are sourced from Kids Helpline's *Record-a-Contact* database. Note that the numbers presented for 'all contacts' are slightly lower than those quoted in Table 10 (under all media answered contacts). This is owing to fact that data in Figure 42 are taken from Kids Helpline's 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 42a. Variation in Kids Helpline contacts aged 5-25 years seeking counselling support – by year (2001-2017) showing ± ½ SD and ± 2 SD about the mean[1]



1. Data presented in this figure are sourced from Kids Helpline's Record-a-Contact database. SD=Standard deviation.

Figure 43. Percentage of Kids Helpline contacts aged 5-25 years seeking counselling support – by year (2008-2017)[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, contacts from 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 all bar one of these non-counselling contacts have reduced during this period. Those seeking information/resources has increased marginally (by 3%). Of the rest, those seeking referrals are down only marginally (by 4%), but the remaining four have seen marked reductions over this period (ranging from 39% to 65%). Across all categories that have reduced, the total number of contacts represented by the reduction is 66,629, or about 13,000 per year, over the 5 years.

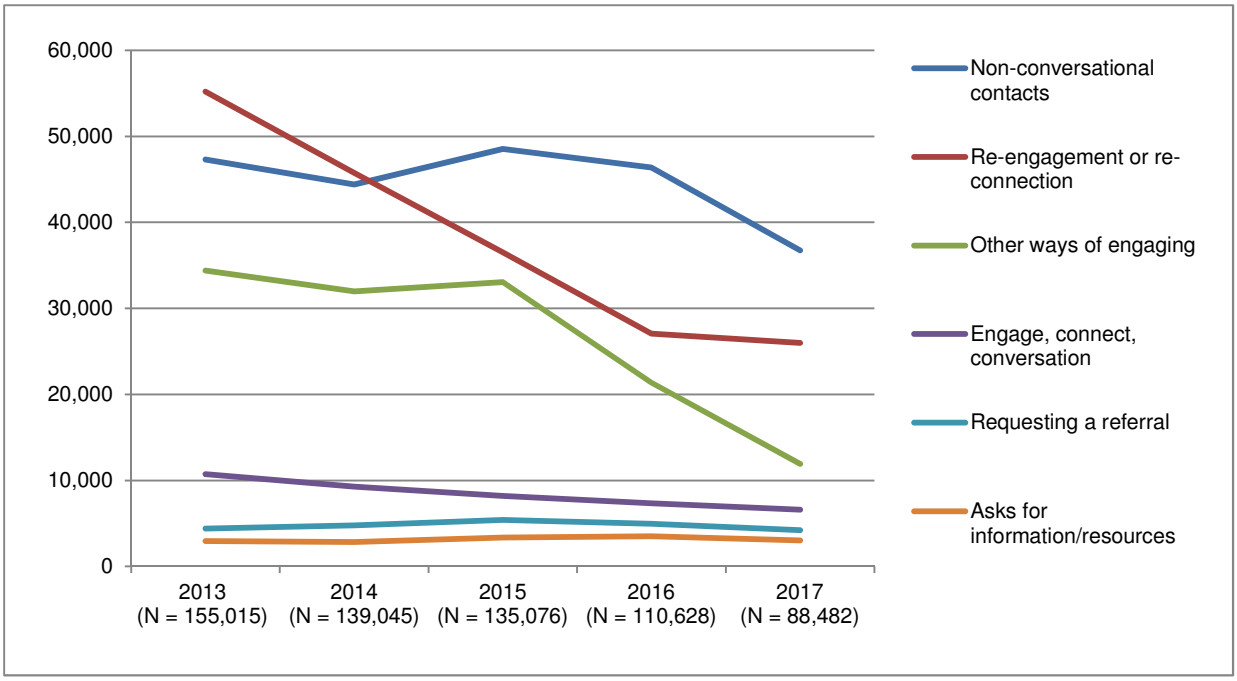
While there is a range of possible explanations for these observations, the start of this trend coincided with two major practice innovations in 2012.

- 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.

- 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.

Figure 44. Number of Kids Helpline non-counselling contacts aged 5-25 years seeking particular types of assistance – by year (2013-2017)[1]



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

Type of non-counselling contact	Number of contacts per year						
	2013	2014	2015	2016	2017	% change 13-17	N change 13-17
Non-conversational contacts	47,324	44,410	48,519	46,366	36,731	-22%	-10593
Re-engagement or re-connection	55,212	45,742	36,510	27,069	25,975	-53%	-29237
Other ways of engaging	34,392	31,988	33,051	21,365	11,920	-65%	-22472
Engage, connect, conversation	10,751	9,291	8,220	7,347	6,600	-39%	-4151
Requesting a referral	4,391	4,783	5,419	4,948	4,215	-4%	-176
Asks for information/resources	2,945	2,831	3,357	3,533	3,041	3%	96

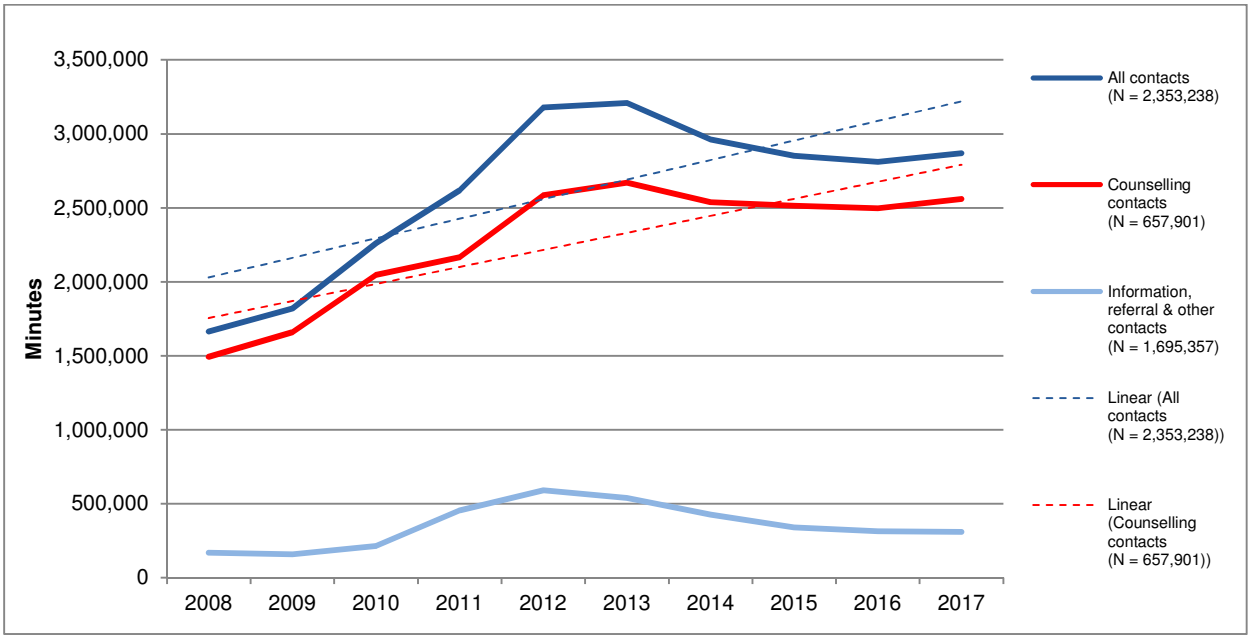
Arguably these two innovations go a long way to accounting for the substantial reduction in contacts to Kids Helpline since 2012 that were classified as 're-engaging or reconnecting'.

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. Similarly, the reduction in non-conversational contacts may have been affected by either or both of these explanatory influences – reduction in anonymity and/or increased availability through social media for meeting various needs of children and young people.

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 (2008-2017)[1]



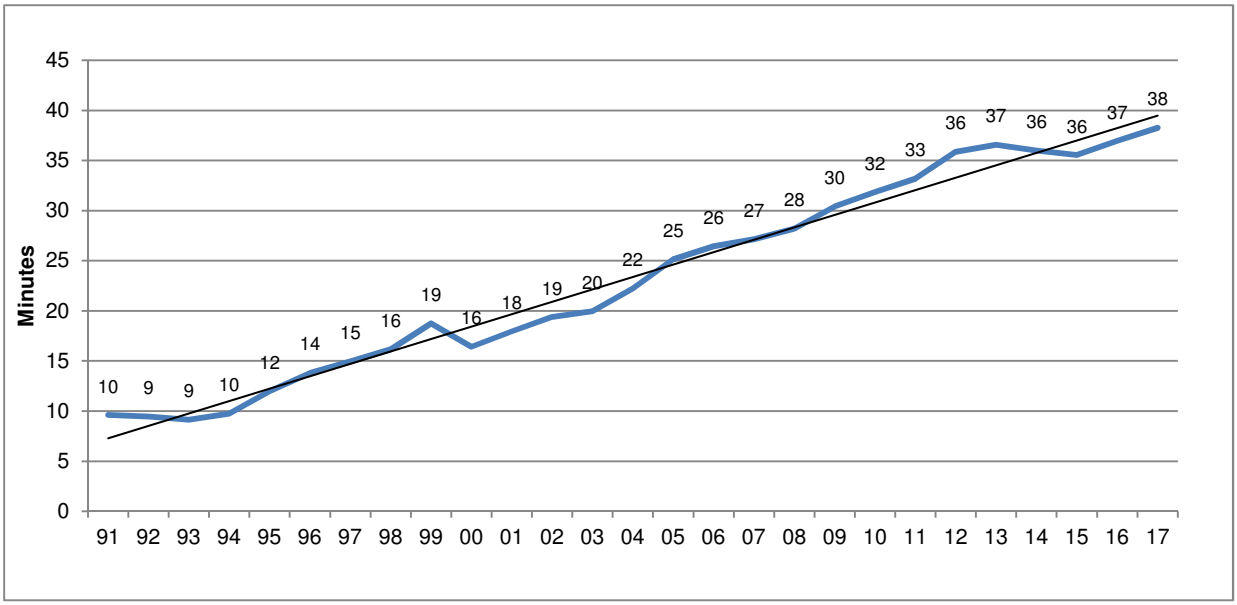
Support type sought	Minutes per year										% change 2008-2017
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	
Info/referral	169,527	158,358	214,839	453,567	590,934	537,906	425,188	339,146	312,931	308,672	82%
Counselling	1,493,669	1,660,613	2,045,971	2,165,108	2,586,607	2,671,113	2,537,418	2,513,725	2,497,566	2,560,049	71%
All contacts	1,663,196	1,818,971	2,260,810	2,618,675	3,177,541	3,209,019	2,962,606	2,852,871	2,810,497	2,868,721	72%

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 72%), notwithstanding the overall reduction of 46% 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 28% of all contacts, on average, across the 10-year period but comprised 87% of the total time counsellors spent with clients on average, during that time. In 2017, counselling contacts are 43% of the total contact load, but take 89% of the total time invested in direct contact (see Figures 47, 48a and 48b).

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 27 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 2017 they were almost four times as long, at 38 minutes.

Figure 46. Mean session duration in minutes: Kids Helpline counselling contacts (all ages) – by year (1991-2017)[1]

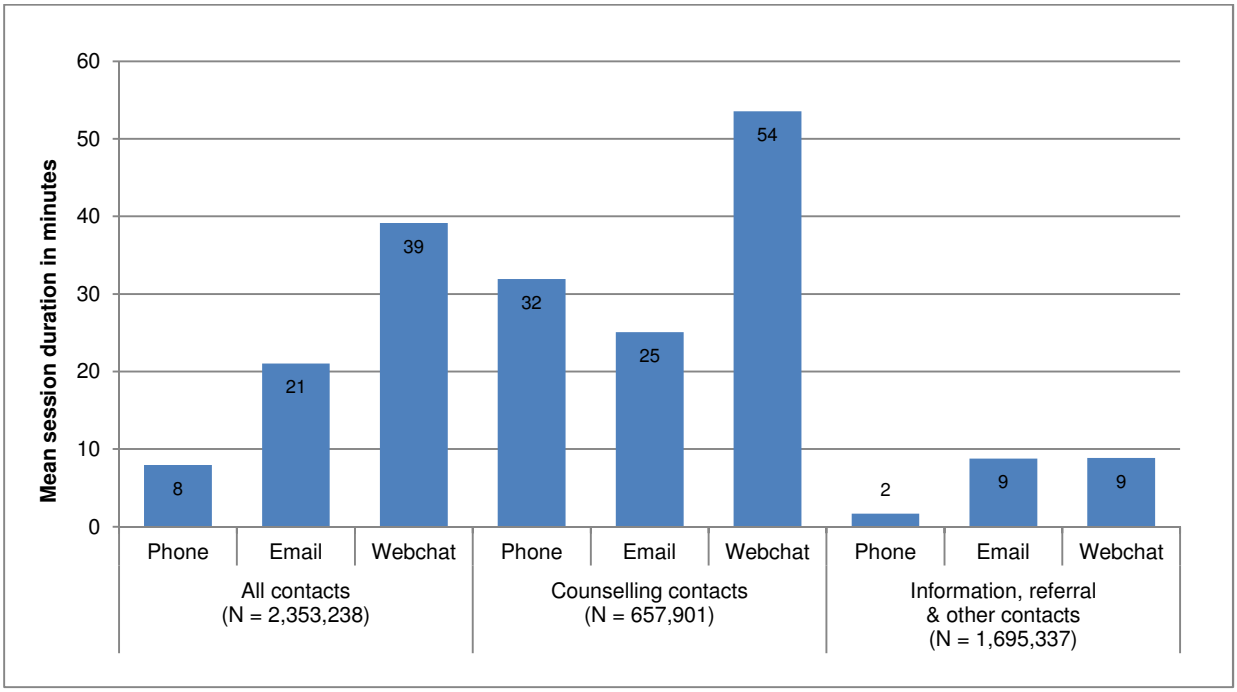


1. Data presented in this figure are sourced from Kids Helpline's *Record-a-Contact* database.

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 five times longer than phone contacts (39 minutes c.f. 8 minutes). Among counselling contacts, the difference in duration between web chat and phone contacts is less but still substantial (54 minutes c.f. 32 minutes). The pattern is also evident among non-counselling contacts, where the average web chat session is five times longer than a phone session (9 minutes c.f. 2 minute).

Figure 47. Mean session duration in minutes – by medium of contact and type of help-seeking: all Kids Helpline contacts responded to 2008-2017[1]



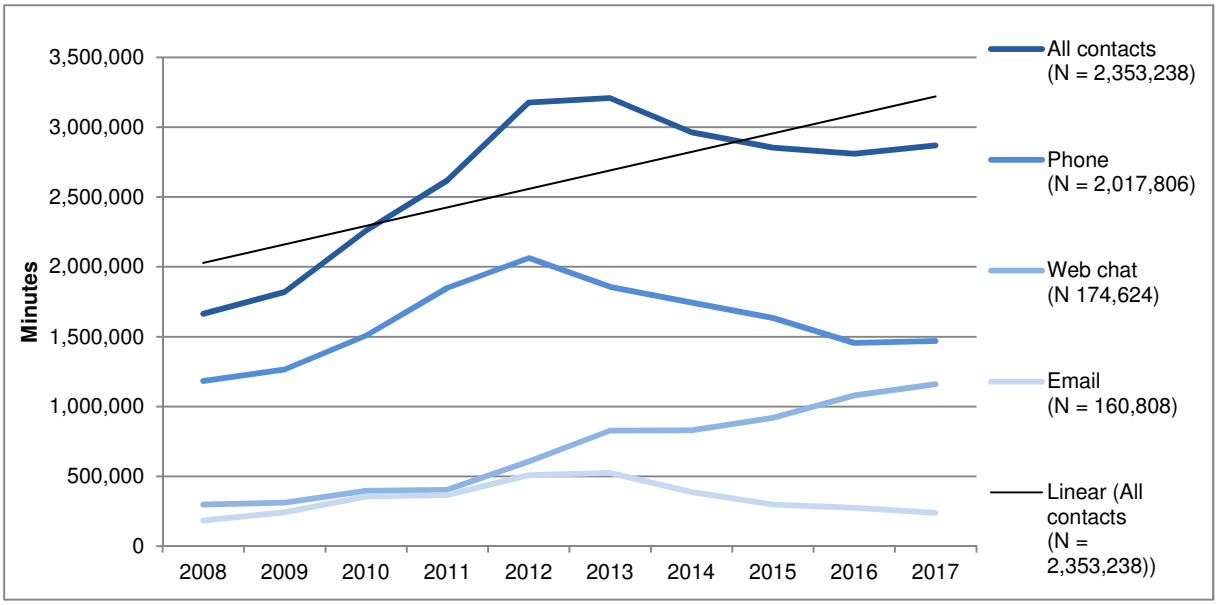
1. Data presented in this figure are sourced from Kids Helpline's *Record-a-Contact* database.

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 72% over this period, time spent with clients in web chat has increased by 289% compared with 24% for phone contact and 30% for email. Since 2012, time spent in responding to telephone and email contacts has steadily declined (by 29% and 53% respectively) while time invested in responding to web chat contacts has grown by 92%.

The data in Figure 48 also reiterate the disproportionate time burden of web chat engagement compared with phone or email. In 2017, web chat can be seen to make up 40% of total counsellor time spent in responding to clients, while phone engagement comprised 51%. However, as indicated in Table 4, web chat contacts made up just 22% of all contacts responded to, while phone contacts made up 70%.

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. This is an important consideration as the trends towards a preference for web-chat as a medium of engagement, evident in the past few years, has continued in 2017 (Figure 10).

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 (2008-2017)[1]



Contact medium	Minutes per year										% change 2008-2017
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	
Email	182,783	243,005	356,622	366,475	508,300	525,750	387,949	298,279	276,355	237,654	30%
Phone	1,182,147	1,265,053	1,507,151	1,848,497	2,063,367	1,856,161	1,743,837	1,634,920	1,454,813	1,470,316	24%
Web chat	298,266	310,913	397,037	403,703	605,874	827,108	830,820	919,672	1,079,329	1,160,751	289%
All contacts	1,663,196	1,818,971	2,260,810	2,618,675	3,177,541	3,209,019	2,962,606	2,852,871	2,810,497	2,868,721	72%

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

With the marked decline in non-counselling type contacts over the years, it is worth noting the relative impact different contact types and medium of contact has on the cost of delivery (in time) of the service. Comparing Figures 48a and 48b we see that though the total number of non-counselling contacts has been for many years much larger than the total number of counselling contacts (Figure 48a), the time allocation to these calls is much smaller as a proportion of all the time invested in contacts over the same period (Figure 48b).

Figure 48a. Relative frequencies of contact types per year by medium of contact: Kids Helpline contacts (<26 years), phone contacts, web chat contacts and email contacts (2001-2017)[1]

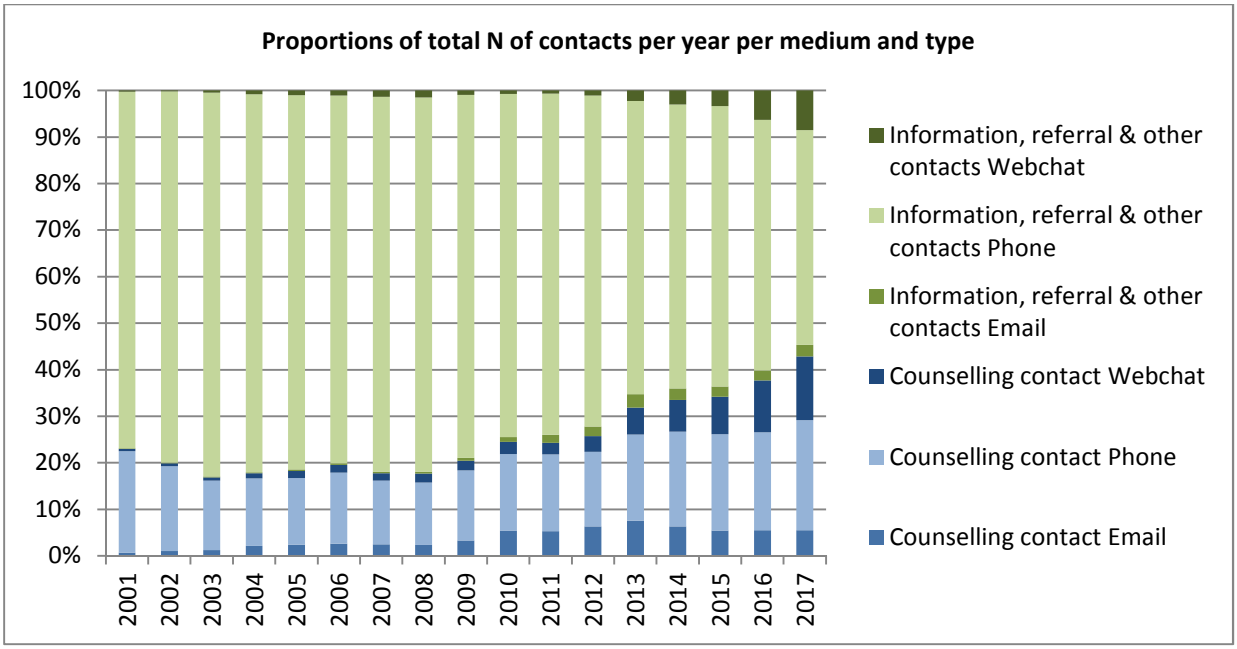


Figure 48b. Relative frequencies (proportions) of total time per year by medium of contact: Kids Helpline contacts (<26 years), phone contacts, web chat contacts and email contacts (2001-2017)[1]

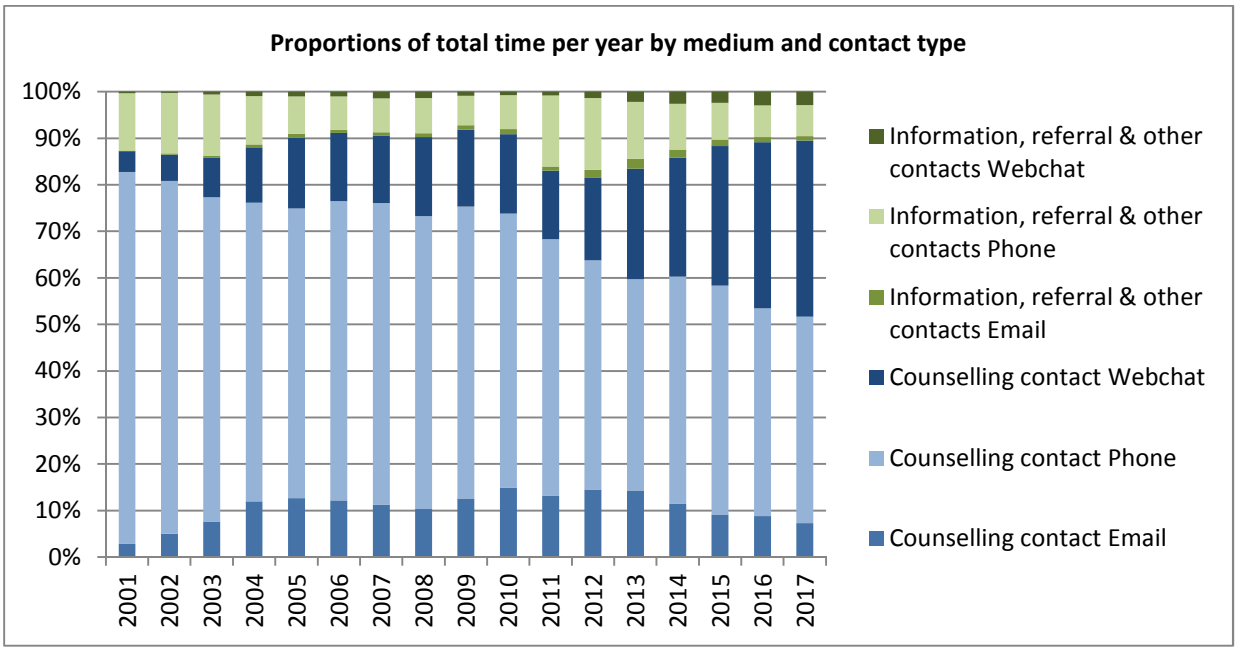
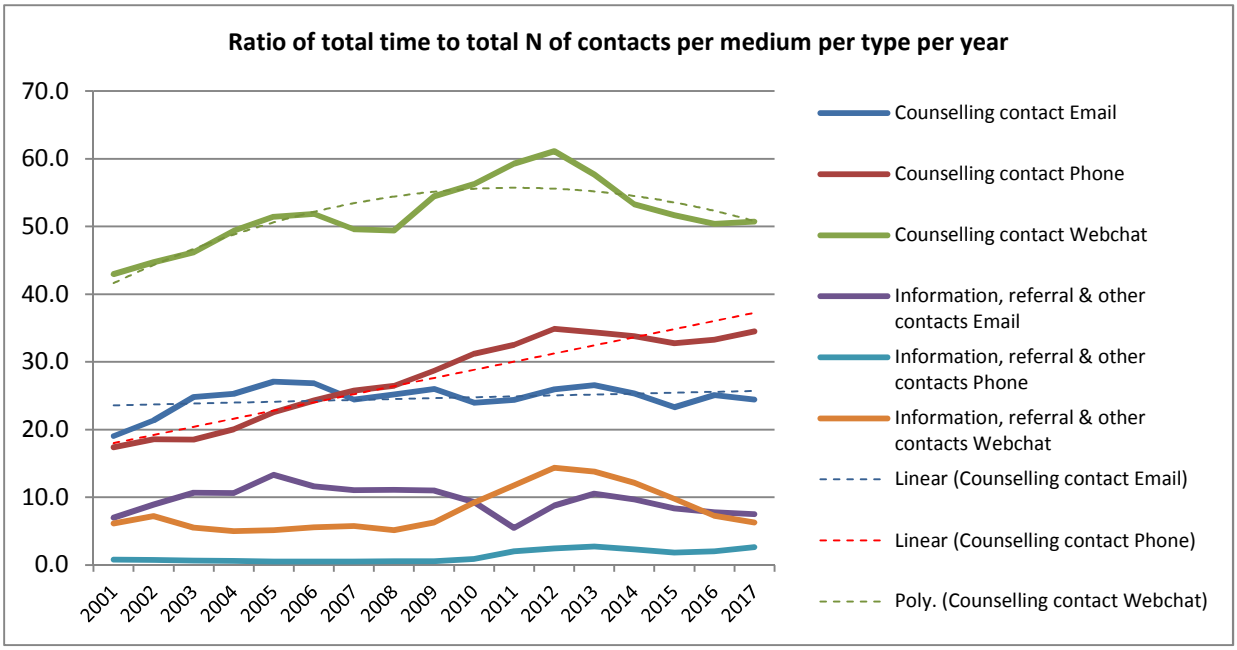


Figure 48b also shows that the proportion of total time used each year for web counselling contacts has been growing whilst the proportion of total time used each year for phone counselling contacts has been shrinking, so that now they are very similar (at around 40% of total time each) even though the ratio of the number of phone counselling to web counselling contacts is approximately 1.7 to 1 (N of phone counselling in 2017, 5-25 years = 36,642; N of phone counselling in 2017, 5-25 years = 21,233 (see Table 4)). This is again indicative of the extra time cost of web counselling.

Using the ratio of total time cost to total number of contacts per year, for each contact type and medium, Figure 48c shows that, although more time is being spent, each year, on average, on each phone counselling contact, web counselling contacts are possibly becoming more time efficient; this bodes well given the expansion in the use of web counselling by children and young people, and the emphasis being placed upon it by the service.

Figure 48c. Ratio of total time to total N of contacts per year by medium of contact: Kids Helpline contacts (<26 years), phone contacts, web chat contacts and email contacts (2001-2017)[1]



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 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, depending on the measure and time-frame used.

While the number of answered web chat contacts has grown considerably, wait times for web contacts being answered by a counsellor, though declining since 2012, have plateaued for unanswered web chats and have increased slightly (since 2016) for answered web chats. Further, response rates for web chat have worsened since 2015 (though they are still better than they were in 2012) (Figure 39).Thus, the improvement in access to web chat has come at the cost of fewer overall service responses, lower overall response rates and, in 2017, increased average wait times for phone contacts (figure 41).

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 46% over the last decade (Figure 42), this reduction is in those contacts seeking information, referral and other non-counselling responses. Further analysis reveals that, though the time cost per web counselling contact is higher than that for each phone counselling contact (Figure 47) and that the time spent in each phone counselling contact is increasing over time, over time, web counselling contacts are becoming shorter on average.

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, and by reference to the changing access to opportunities for young people seeking to engage in the world in playful ways via social media rather than for example by contacting Kids Helpline.

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. Towards the end of 2017 a new website was launched. The new website was launched on 27 November, 2017. *Tips & Info* pages were re-written for the new site, and a new separate area for young adults (ages 19-25) was created to structure the site and run alongside sections for *kids* (5-12) and *teens* (13-18). The area for parents/carers was retained as was a microsite to facilitate schools' access to Kids Helpline at School (more on this in Chapter 6).

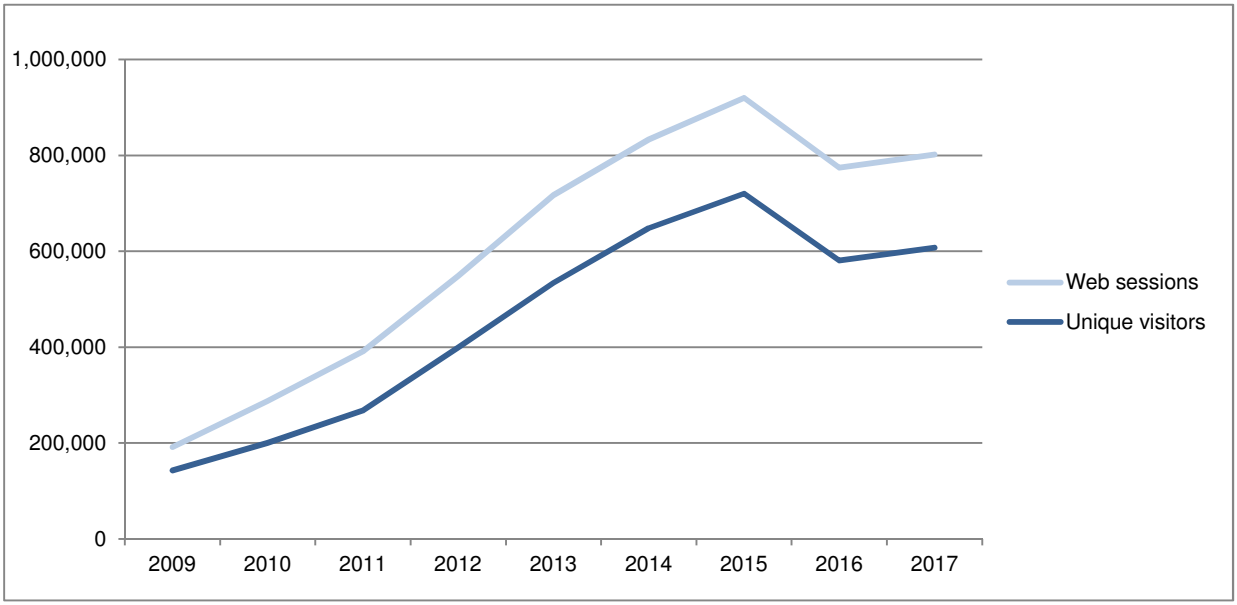
Understanding patterns in website use and demand are important in terms of continuing to develop this aspect of the service and to ensure that the materials provided are being used. This chapter first analyses demand for various types of self-help resources and then considers the issues or topics that 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 2017 Kids Helpline client satisfaction and outcomes survey. Selected findings are report in this chapter, relating to web resources. Findings of the counselling services evaluation are reported in Chapter 5.

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 (nine 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 (2009-2017)



	2009	2010	2011	2012	2013	2014	2015	2016	2017	% change 2009-15	% change 2016-17	% change 2009-17
Web sessions	191,271	287,559	391,298	548,904	717,138	833,342	919,589	774,551	801,810	381%	4%	319%
Unique visitors	143,122	199,975	267,641	399,214	534,377	648,343	720,077	580,562	607,634	403%	5%	325%

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 onwards are not strictly comparable to previous years' data.

Key observations from Figure 49 include the following:

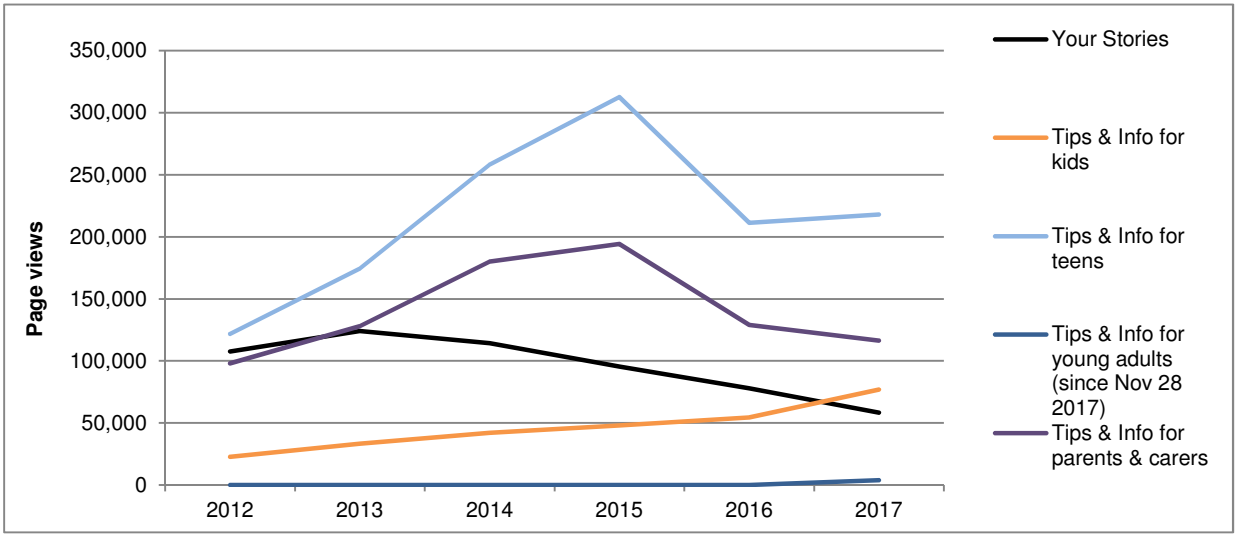
- In 2017 there were 607,634 unique visitors to the Kids Helpline website who collectively participated in 801,810 web sessions.
- From 2009 to 2015, web sessions increased by 403% and unique visitors by 381%.
- Between 2015 and 2016, the number of web sessions decreased by 16% and the number of unique visitors decreased by 19%; however, some of those reductions have been ameliorated by a 4% and 5% increase (respectively) 2016-2017.

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 organically re-indexes 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). The old URL was again put into use from 27 September 2016. A further disruption to the website and associated data occurred in 2017 with the advent of a new website, active since 27 November 2017; the original URL has been retained or the new website.

Figure 50 presents data in relation to demand for key self-help resources on the Kids Helpline website and compares this from 2012 to 2017 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 2017, demand for all resources reduced notably (by about 25% across all sub-sites), except demand for *Tips & Info* topics for kids, which increased by 60% since 2015 and 41% since 2016. Tips and info for teens increased slightly (3%) 2016-2017 also.
- 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. The URL was re-instated in October 2016, and traffic has slightly increased for kids and teens during that time, but not for the parents' sub-site and its resources.

Figure 50. Kids Helpline website – N of page views of different self-help resources, by year (2012-2017)



Resource type[1,2,3]	2012	2013	2014	2015	2016	2017	% change 2012-15	% change 2015-17	% change 2012-17
Your Stories[4]	107,639	124,044	114,335	95,455	77,869	58,337	**-11%**	**-39%**	**-46%**
Tips & Info for kids	22,668	33,344	41,980	48,033	54,394	76,818	**112%**	**60%**	**239%**
Tips & Info for teens	121,854	174,297	258,269	312,619	211,346	218,006	**157%**	**-30%**	**79%**
Tips & Info for young adults[5]	0	0	0	0	0	3,861	**NA**	**NA**	**NA**
Tips & Info for parents & carers	97,994	127,987	180,102	194,336	128,938	116,239	**98%**	**-40%**	**19%**
Total Tips & Info page views	242,516	335,628	480,351	554,988	394,678	414,924	**129%**	**-25%**	**71%**
Total page views	2,220,729	2,645,463	2,747,033	2,714,829	2,104,298	2,051,601	**22%**	**-24%**	**-8%**

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. The capacity for visitors to submit their own stories for publication in the "Your stories" section of the site was disabled in June 2017, so after that no new stories were published. Further the new site, activated on 27 November 2017, has no "Your stories" section, although
5. The client age category "young adults" (19-25) was introduced for the first time on the new website from its launch on 27/11/17.

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

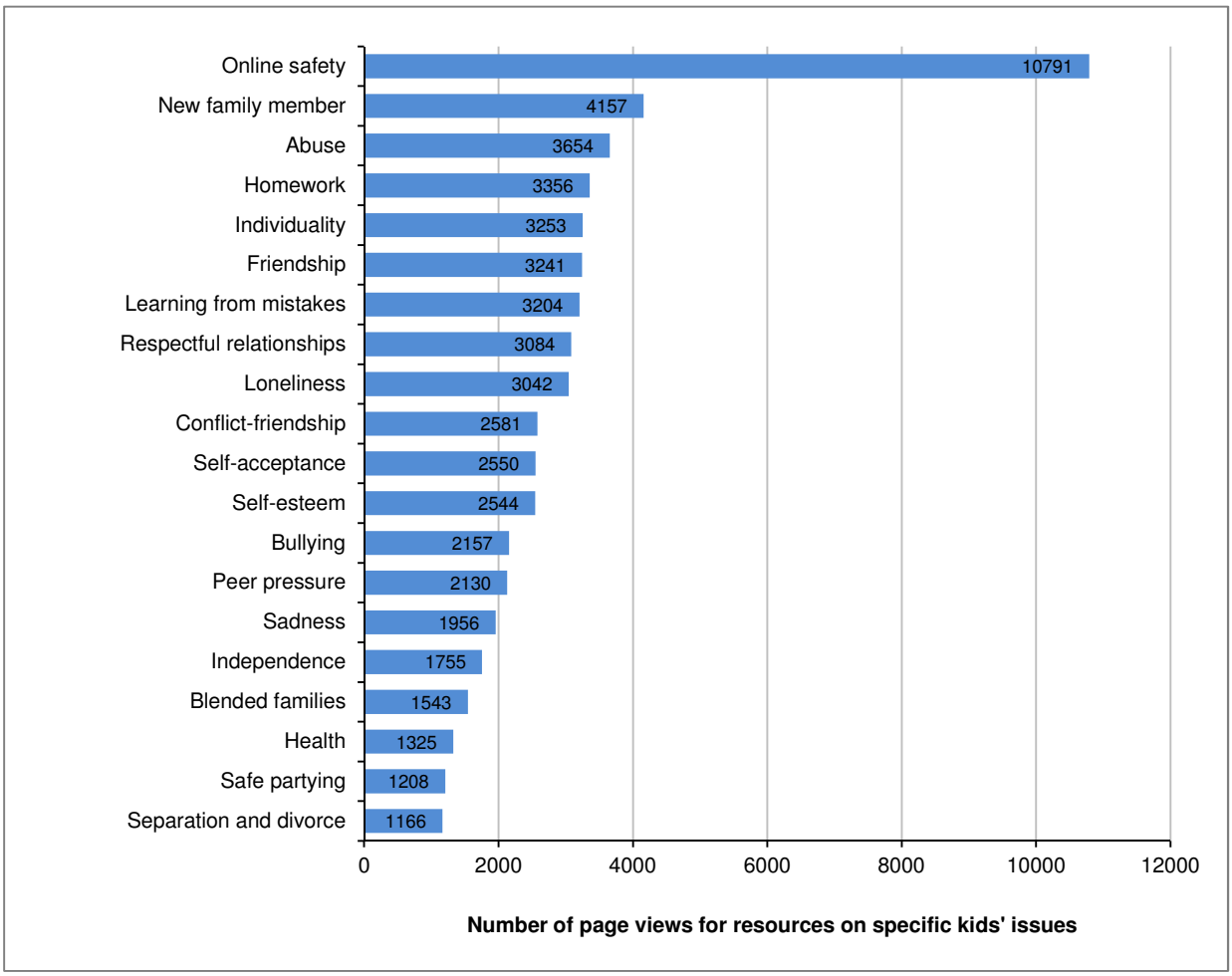
During 2017, there were 45 *Tips & Info* topics (and 19 *Issues* pages in the new site) on the old Kids Helpline website targeted at children, receiving a total of 71,123 page views. In the new site there were 19 resources aimed at kids receiving 5,695 page views. These were mapped to the old website resources and their page view counts were summed. 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:

- 33% of all kids' Tips & Info (Issues) page views were in relation to five topics – online safety, new family member, abuse, homework and individuality. Of these, online safety, individuality and homework were in the top 5 most frequently visited resources in 2017.

- On-line safety is the most heavily visited resource area, with 10,791 page views, which is nearly 2.5 times as many views as the next most popular topic pages. *Staying safe online* was by far the most visited page in 2014, 2015 and 2016 as well, suggesting that cyber-safety may be a standout concern for those in this age group.
- The 20 most viewed topics in 2017 can be grouped according to their focus on
    - self (9 resources – including emotion-regulation, self-management, development, loneliness, and other themes)
    - family relationships (2 resources)
    - friendship relationships (7 resources) and
    - other contexts (school and on-line safety, 1 resource each).
- 10 of the 20 most viewed topics in 2017 relate to dealing with different kinds of relationships and interpersonal issues.

Figure 51. Most frequently visited kids' *Tips & Info* (old site) / *Issues* (new site) topics in 2017[1]



1. Total kids' *Resources* page views in 2017 = 76,818 (Old Site Total = 71,123; New site total = 5,695)

Teens

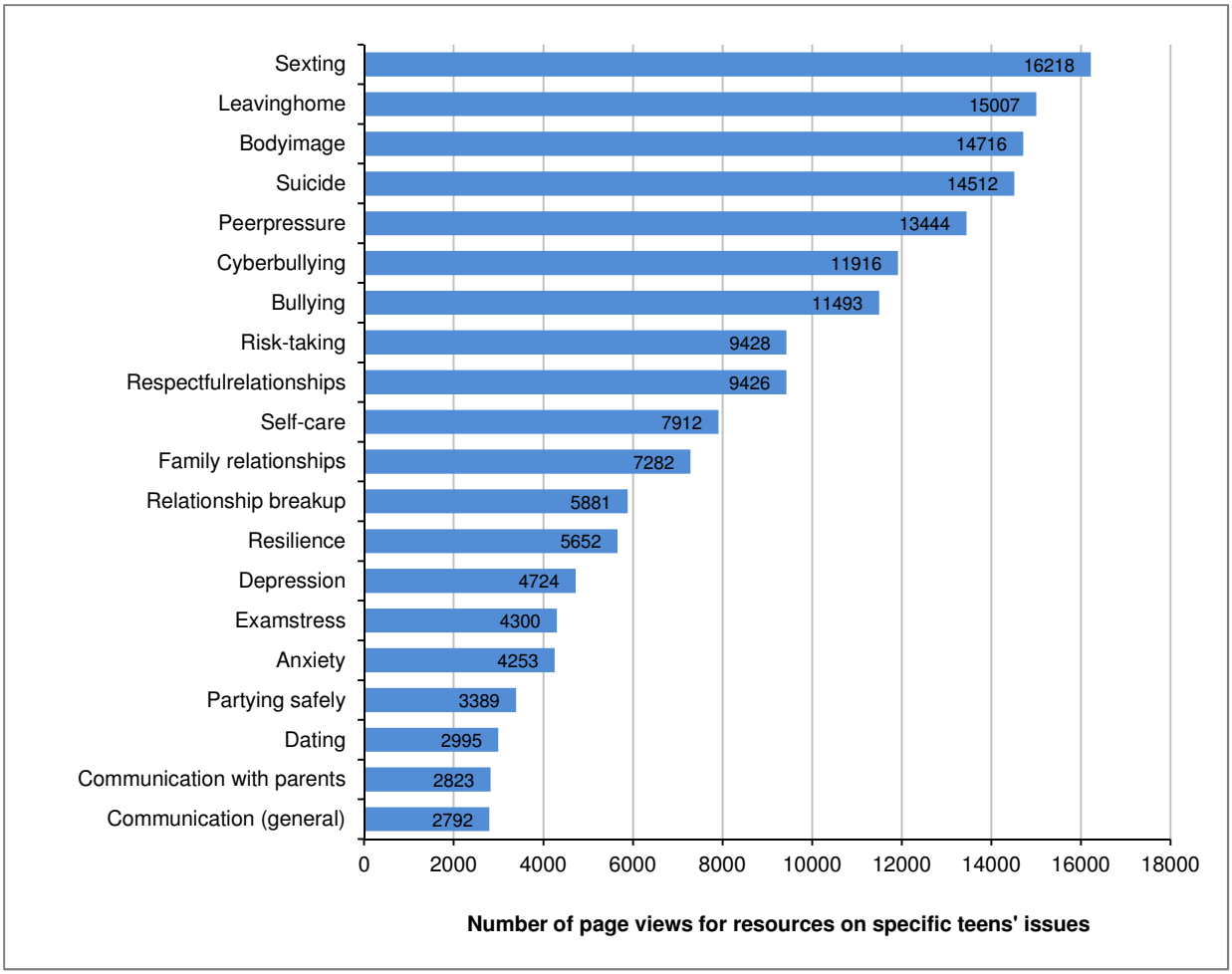
During 2017, there were 51 *Tips & Info* topics (and 28 *Issues pages in the new site*) targeted at teenagers receiving a total of 194,936 page views on the old website. Additionally the new website, operational from 28 November 2017, housed 28 resources that received 23,070 page visits. Total combined page views count across both sites, for resources aimed at teens, for 2017 was 218,006. The 28 new web site resources were mapped to the old web site resources and their page view counts were summed. 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:

- 34% of all teens' Tips & Info (Issues) page views were in relation to five topics – sexting, leaving home, body image, suicide, and peer pressure. The topics handling peer pressure, leaving home and body image were also among the five most frequently visited teens Tips & Info topics in 2014, 2015, and 2016 suggesting some continuity in the issues of interest to website visitors of this age group.

- One in every 10 page views (11%) was in relation to information resources on bullying.

Figure 52. Most frequently visited teens' *Tips & Info* (old site) / *Issues* (new site) topics in 2017[1]



1. Total teens' *Resources* page views in 2017 = 218,006 (Old Site Total = 194,936; New site total = 23,070)

Young adults

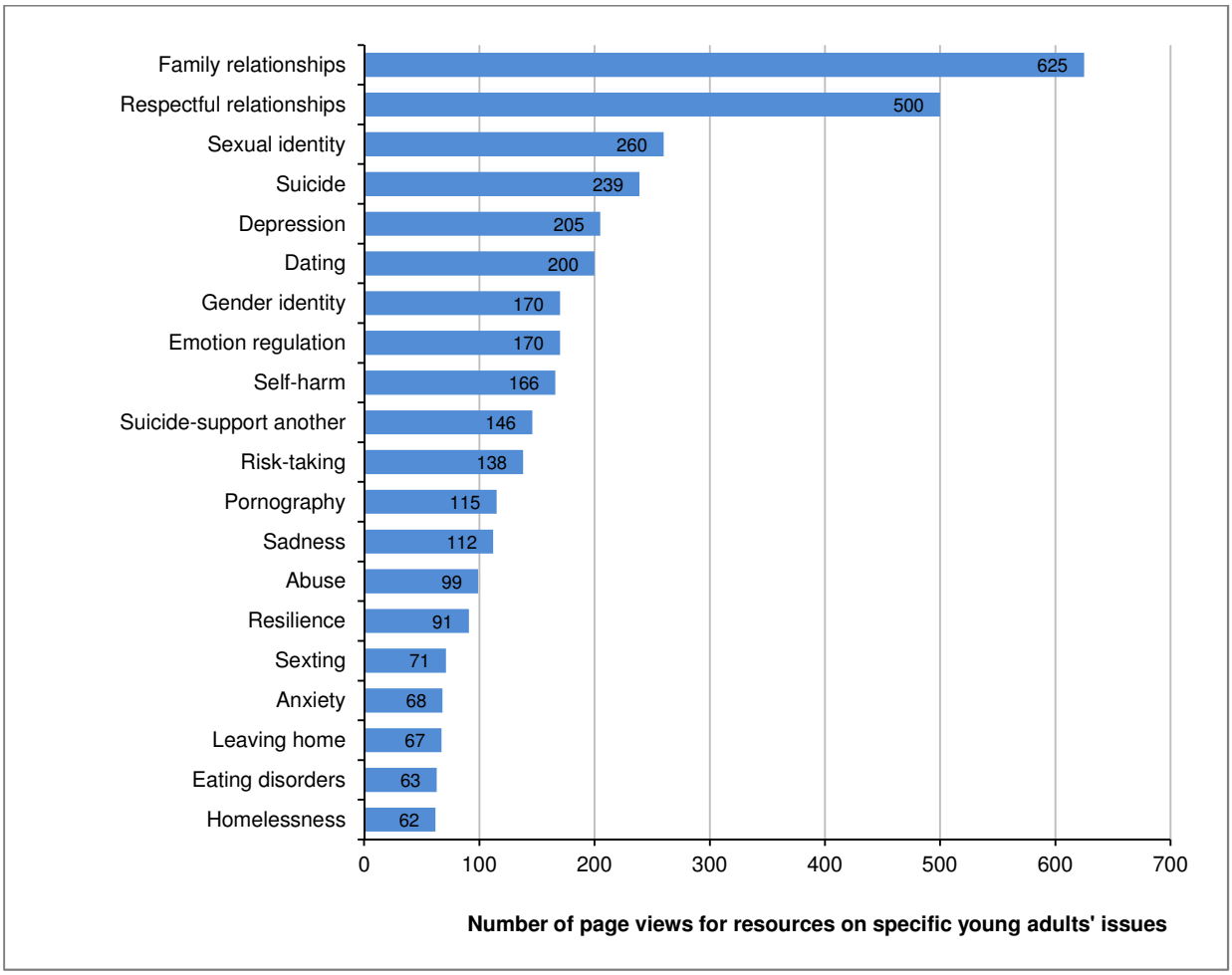
During 2017, along with the new website design, a new age categorisation was adopted: 'young adults'. Resources were developed and deployed under this categorisation appropriate to users aged 19-25. In 2017, there were a total of 33 Issues topics on the website targeted at young adults. Total page view for this collection is small (N=3861) because the resources only existed since 27 November, 2017.

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

- The most popular resources (with 30% of total page views) pertained to relationship matters.

- About half (47%) of all young adults Issues page views were in relation to five topics – family relationships, respectful relationships, sexual identity, suicide and depression.

Figure 53. Most frequently visited young adults' *Issues* (new site only) topics in 2017[1]



1. Total young adults' *Resources* page views in 2017 = 3,861. *N.B.* The client age grouping "young adults – 19-25" was not used prior to the advent of a new website which was operational from 27 November 2017.

Parents/carers

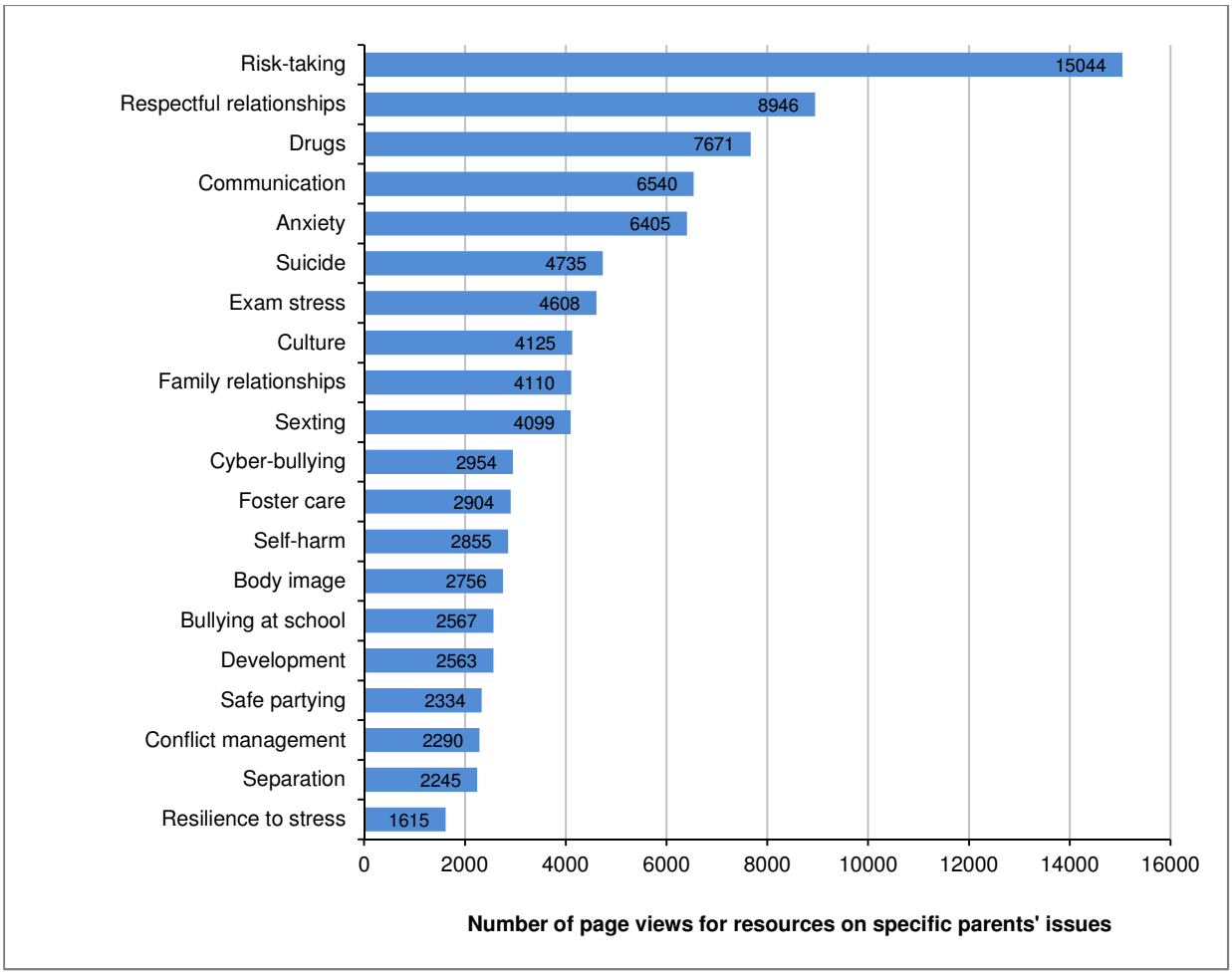
During 2017, there were 44 *Tips & Info* topic resources on the old website, (and 19 *Issues* pages in the new site) targeted at adults – primarily parents, guardians, teachers and other significant adults in children's lives; on the new website there were 18 such resources since it commenced in operation (27/11 to 31/12). Total page views across both sites for resources targeted at parents/carers were 116,239 (old site total = 109,411; new site total = 6,828). Fifteen of the 18 resources on the new site map directly to *Issues* resources on the old site, so their page view counts are summed for calculating the top 20 topics reported here. Figure 53 shows the frequency with which the 20 most popular of these resources were accessed on both websites in 2017.

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

- Two in five (38%) of all parents'/carers' Tips & Info page views were in relation to five topics – understanding risk-taking, building respectful relationships, alcohol and drugs, being a good communicator and anxiety. Understanding risk-taking, anxiety, building respectful relationships, and being a good communicator were top 5 topics in 2016 and among the top 6 in 2014 and 2015, suggesting some consistent themes in the issues of concern to this group of website users.

- Risk-taking by children is the most visited parents' and carers' resource page.

Figure 54. Most frequently visited parents' *Tips & Info* (old site) / *Issues* (new site) topics in 2017[1]



1. Total parents'/carers' *Resources* page views in 2017 = 116,239 (Old Site Total = 109,411; New site total = 6,828)

4.2.2 Referrals from other websites

Referrals from other websites

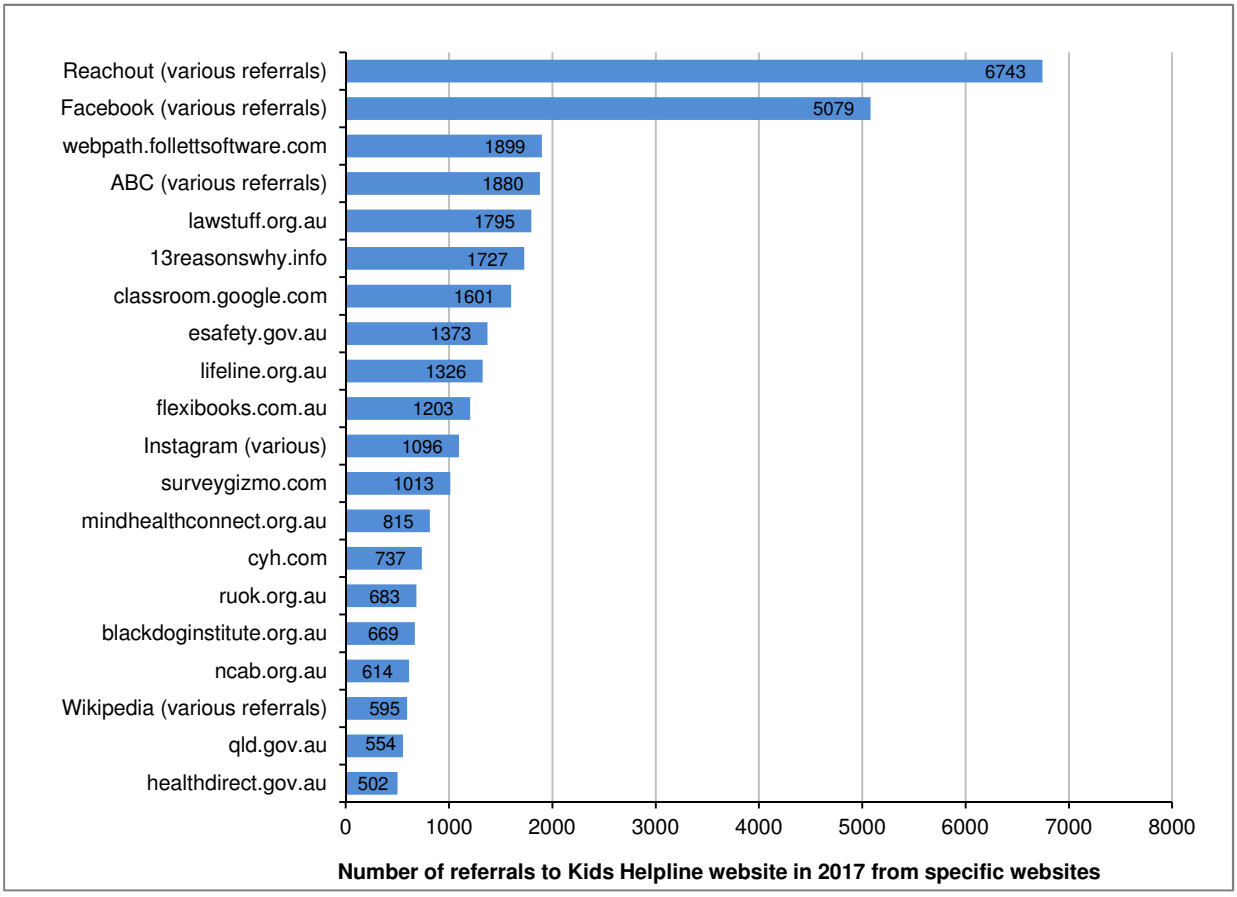
Referrals from other organisations' websites are another source of information about the needs and concerns of website visitors.

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 55 shows the websites that most frequently referred people to the Kids Helpline website during 2017.

Key observations from the data include the following:

- Of the 31,402 referrals to the Kids Helpline website received from the top 20 referring websites:
  - Over 12,000 came from youth specialist, or generalist mental health and counselling websites (primarily ReachOut, lifeline.org.au, mindhealthconnect.org.au, cyh.com, ruok.org.au, blackdoginstitute.org.au, ncab.org.au, healthdirect.gov.au etc.)
- 1,373 referrals were received from the Australian Government's eSafety website, and
- 5,346 referrals came from various psychological specialist services.

Figure 55. Top referring websites to Kids Helpline website in 2017[1]



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

4.3 Evaluation data

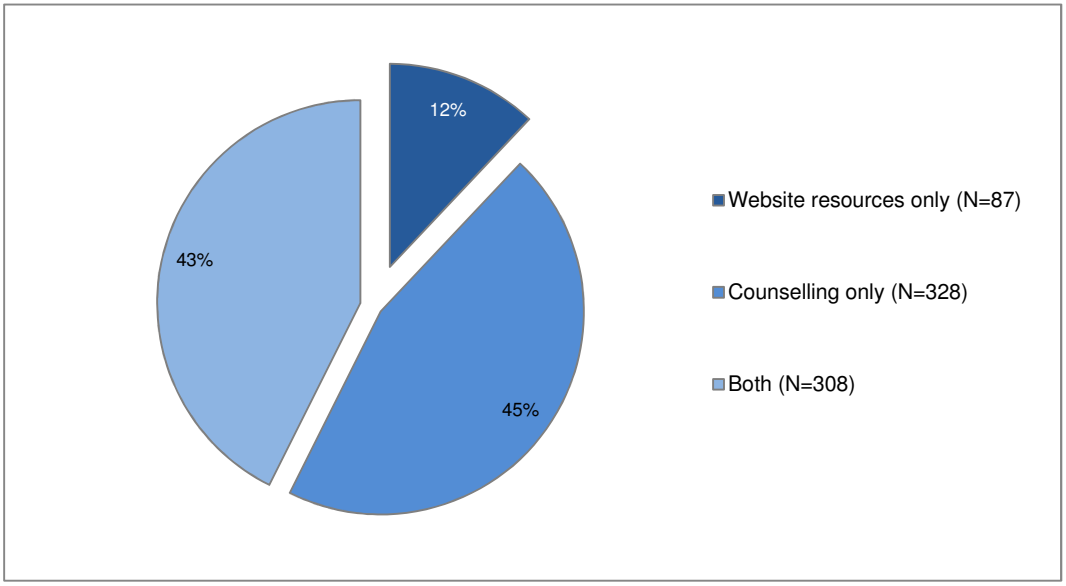
4.3.1 Method and sample

A survey was conducted to support the evaluation of the counselling services and the website resources. Survey respondents were asked about their engagement with the Kids Helpline counselling and support service and website over the last 12 months.

4.3.2 Respondent engagement with the service in the past 12 months

As shown in Figure 56, almost half the respondents (45%) had contacted the counselling and support service but not browsed the website, while a similar proportion (43%) had contacted the counselling and support service *and* browsed the website. Only about one in 10 (12%) had visited the website but not contacted the counselling and support service.

Figure 56. Respondents' engagement with Kids Helpline in last 12 months (*n* = 723) (2017)



4.3.3 Impact of resources on respondents

Figure 57 indicates that about two thirds of respondents believed the Kids Helpline website resources were effective in increasing their ability to deal with their issue/s (64%), whilst three-in-four said the resources gave them new ideas to help them address their issue/s (76%), and seven-in-ten said the resources gave them a better understanding of their issue/s (68%).

Figure 57. Impact of resources on respondents' understanding, capability and resources for addressing their issue/s (N varies per question) (2017)

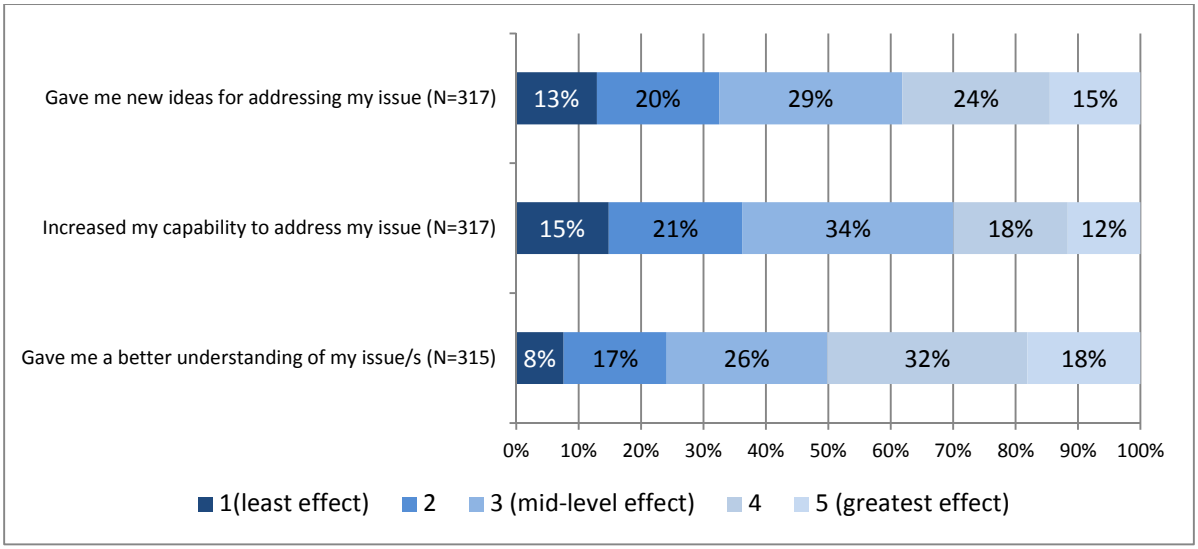
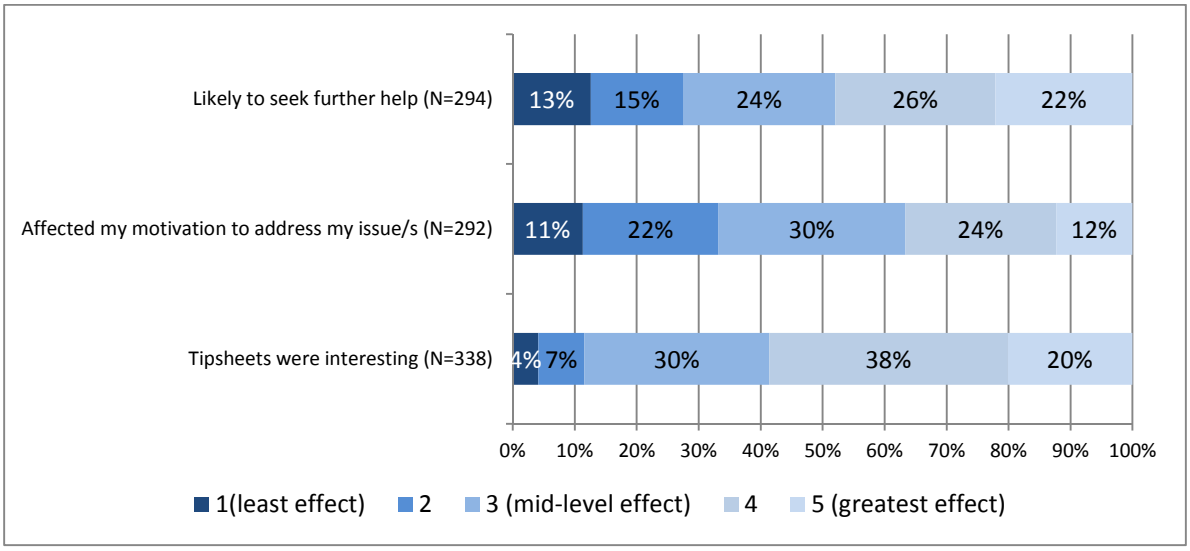


Figure 58 shows that The majority (88%) found the *Tipsheets* interesting and, as a consequence of reviewing them, 72% of the respondents were more likely to seek further help and 66% said they were more motivated to address their issue/s.

Figure 58. Impact of resources on respondents' help-seeking and motivation to address their issue/s (N varies with question) (2017)



Key observations from the data include:

- The website resources were designed with specific functional outcomes in mind:
  - To engage interest and through this to facilitate the education of visitors to the website, on a range of issues;
  - to enhance visitors' capabilities for, and resourcefulness in, dealing with their issue/s; and
  - to encourage and guide the decision to seek further help if necessary.

  These results show that the *Tipsheets* are effective for one-third to two-thirds of the respondent visitors.

During the greater part of 2017 (until the advent of the new website in November 2017), the *Tipsheets* being deployed were designed and written to provide comprehensive and well-researched information about the issues dealt with in each, with an explicit intention to educate young people about each of the issues canvassed. The new website adopts a different approach and the *Tipsheets* have been re-written so as to be much briefer; the impact of this change may be measureable in part from data reported in the 2018 Annual Statistical Overview.

4.4 Summary

The Kids Helpline website continued in 2017 to provide a wide range of resources for self-directed help-seeking by children, young people and parents/carers.

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 groups 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. Similarly, the number of visits to resources on on-line safety, sexting, and cyber-bullying indicate that cyber safety issues of concern for Kids Helpline website users.

Another theme of interest across age groups is interest in how to manage important relationships – relationships with parents, siblings, friends, peers and in later years, with intimate partners.

The majority of web resource users in an evaluation survey said they found the resources interesting, said they motivated them to seek further help with their issue/s, gave them ideas to help them address their issue/s, a better understanding of the issue/s and greater capacity to deal with their issue/s.

5. Kids Helpline 2017 counselling 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 2017 survey.

5.1 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.

5.2 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 Homepage of the Kids Helpline website. In addition, the survey was promoted to potential respondents through invitations to participate, including in:

- on the exit page following web chat counselling sessions
- at the bottom of counsellors' emails
- during the phone call wait message for children and young people waiting to speak to a counsellor
- by counsellors to children and young people who participated in phone counselling (this was at the counsellor's discretion, however).

5.3 Key findings

5.3.1 Sample (counselling clients only)

A total of 1007 individuals provided complete responses to the survey, 472 of whom indicated they were aged 5-25 years. As shown in Figure 56, 636 respondents had used the counselling services.

Table 12 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 2017 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 (85%). Survey respondents were more likely to be female than were counselling and support service contacts in 2017 (85% c.f. 74%). Respondents were also more likely to be intersex, trans or gender-diverse (3% c.f. 2%)
- *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 (54%) of counselling and support contacts in 2017 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 2017 (13% c.f. 33%).

- *Cultural background*. Aboriginal and/or Torres Strait Islanders were represented in the survey sample in higher proportion to counselling and support service contacts in 2017 (5% to 3%); however, those from CALD backgrounds were comparatively under-represented (16% c.f. 36%) and those from non-ATSI/CALD backgrounds were comparatively over-represented (79% c.f. 60%)
- *State*. Survey respondents were represented from every state and territory in close proportion to the state breakdown for counselling and support service contacts in 2017.

Table 11. Characteristics of 2017 Kids Helpline counselling client satisfaction and outcome survey respondents compared with 2017 Kids Helpline counselling and support service contacts aged 5-25 years[1]

Respondent characteristics	2017 Kids Helpline counselling client satisfaction & outcome survey respondents (*n* = 1007)		2017 Kids Helpline counselling & support service contacts aged 5-25 years (*N* = 154,868)	
	n	col. %	*n*	col. %
Gender				
Female	402	85%	81,994	74%
Male	58	12%	25,985	24%
Intersex, trans or gender-diverse	13	3%	2,155	2%
Total	**473**	**100%**	**110,134**	**100%**
Unknown	*534*		*44,734*	
Age group				
5-12 years	73	15%	13,233	13%
13-18 years	339	71%	53,534	54%
19-25 years	60	13%	32,693	33%
26 +	4	<1%	NA	-
Total	**476**	**100%**	**99,460**	100%
Unknown	*531*		*55,408*	
Cultural background[2]				
Aboriginal &/or TSI	25	5%	1,198	3%
CALD	76	16%	13,864	36%
Neither ATSI nor CALD	375	79%	23,034	60%
Total	**476**	**100%**	**38,096**	**100%**
Unknown	*531*		*116,772*	
State				
ACT	22	5%	3,105	2%
NSW	151	32%	45,187	32%
NT	2	<1%	962	1%
QLD	86	18%	28,909	21%
SA	34	7%	8,569	6%
TAS	15	3%	3,815	3%
VIC	122	26%	37,184	27%
WA	37	8%	12,276	9%
Total	**469**	**100**	**140,007**	**100%**
Unknown	*538*		*14,861*	

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

5.3.2 Type of engagement with Kids Helpline in last 12 months

Figure 56 indicates that of the sample surveyed 45% (328) respondents had used the counselling service only and a further 43% (308) had used both the counselling service and had visited and read *Tipsheets*. The results reported here are from those who used the counselling services either alone or in addition to website resources. The results reported here focus on the counselling services; evaluation of the web resources is to be found in section 4.3.

5.3.3 Perceived impact of Kids Helpline counselling and support service

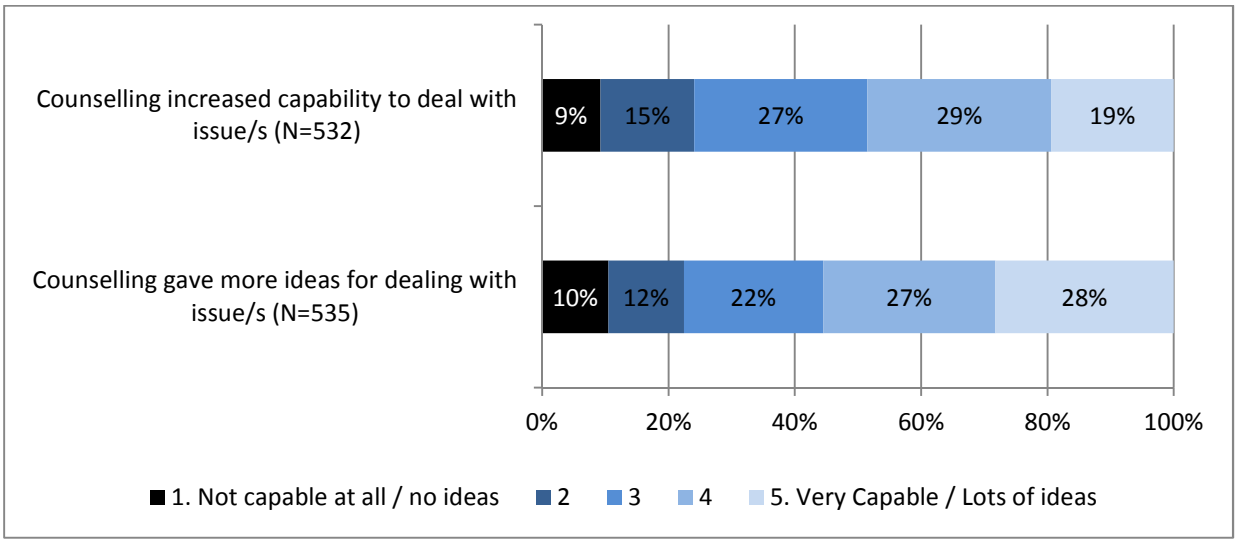
Respondents who reported contacting the counselling and support service were asked two questions to gauge the effectiveness of the support provided:

- 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 59 indicates that

- Through counselling three-quarters (75%) had an increased capability to deal with their issue/s.
- About three-quarters of the respondents (77%) indicate high levels of agreement that they got more ideas for dealing with their issue/s.

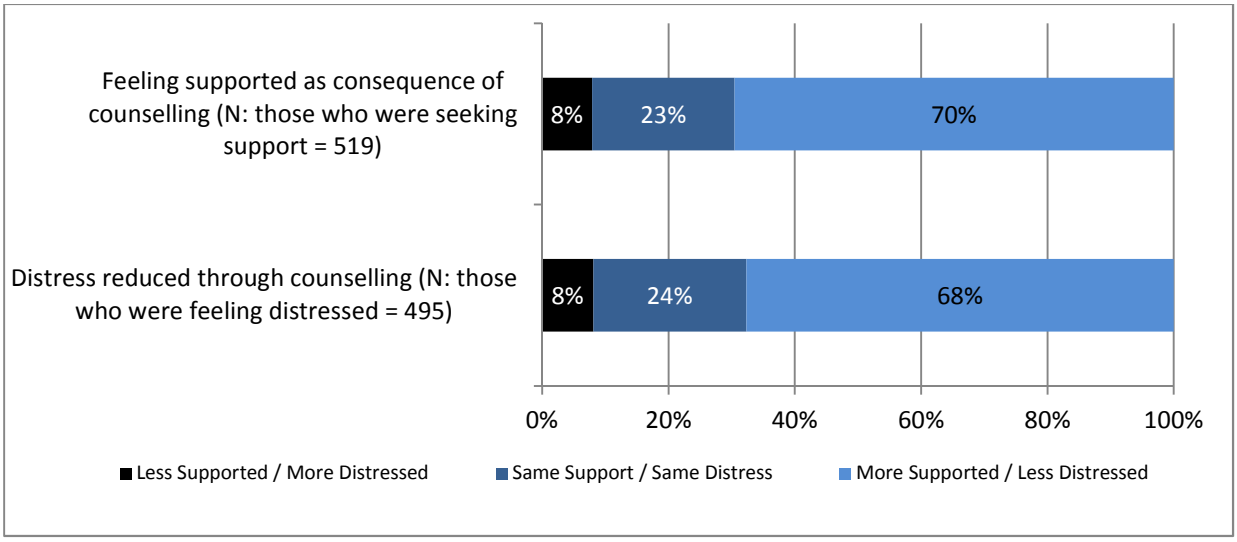
Figure 59. Perceived impacts of last session talking to a counsellor (N varies with item) (2017)[1][2][3]



1. Where percentages sum to more or less than 100%, this is due to rounding.
2. For the *capability* question there were 5 response categories: 1="not capable at all" through 5="very capable".
3. For the *ideas* questions, there were 5 response categories - 1="no ideas at all" through 5="lots of ideas".

Other goals of counselling are to reduce stress and to provide a supportive professional relationship context for a client. Figure 60 summarises results on two questions targeting these goals.

Figure 60. Perceived impacts of last session talking to a counsellor (N varies with item) (2017)[12]



1. Where percentages sum to more or less than 100%, this is due to rounding.
2. For the *support* and *distress reduction* questions there were only three response categories - "less", "same", and "more". Thus at the positive end are "more supported" and "less distressed" and at the negative end of the scale are "less supported" and "more distressed".

Figure 60 shows that

- Sixty-eight per cent (68%) of the respondents who were experiencing distress at the time of counselling (N=495) indicated that counselling reduced their distress; only 8% of respondents believed that after counselling they felt more distressed.
- Seventy per cent of those for whom getting support was a relevant outcome (N=519) agreed or strongly agreed that they felt more supported after the counselling experience.

5.3.6 Overall satisfaction with the Kids Helpline counselling and support service

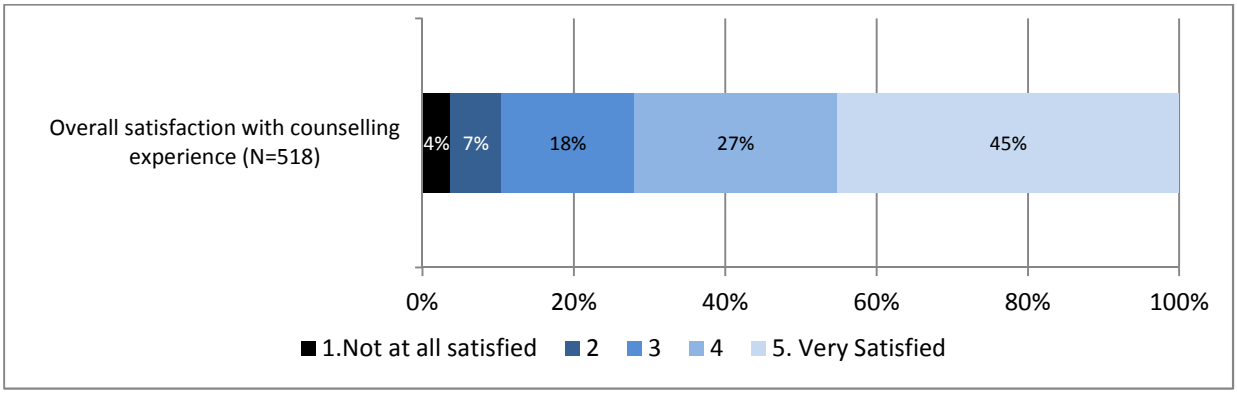
To gauge overall satisfaction with the Kids Helpline counselling service, respondents were asked two questions:

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

Figure 61 summarises respondents' answers to the overall satisfaction question.

- Half of respondents (45%) were very satisfied with the counselling experience, three out of four respondents (72%) reported very high or high levels of satisfaction with their counselling experience. A further 18% indicated a middle level of satisfaction on the scale. Thus the vast majority of respondents (90%) recorded responses across the top three levels of "satisfied" combined. Only 4% indicated that they were "not at all satisfied".
- Further, ninety-two percent (92%) of respondents who had experience Kids Helpline counselling said they would recommend the service to others (this item not shown graphically as it has just two categories).

Figure 61. Perceived impacts of last session talking to a counsellor (N varies with item) (2017)[12]



1. Where percentages sum to more or less than 100%, this is due to rounding.
2. For the *satisfaction* question, there were 5 response categories - 1="not at all satisfied" through 5="Very satisfied".

5.4 Summary

Kids Helpline received an adequate response to its annual client satisfaction and outcomes survey with 1007 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 2017 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.

Nine out of 10 respondents indicated satisfaction with the service and a similar proportion said they would recommend the service to a friend.

6. Kids Helpline @ School

6.1 What is Kids Helpline @ School?

Kids Helpline @ School (KAS) is a free early intervention and prevention program available to all primary schools Australia-wide, operating since 2013. The program offers primary schools a professional counsellor-facilitated classroom session via video technology to discuss curriculum-aligned 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. Sessions are designed to improve students' mental health literacy, resilience, wellbeing and emotional intelligence, as well as enhance student's communication skills within interpersonal relationships, normalize and encourage help-seeking, and promote digital citizenship.

Optus continues to partner with **yourtown** to support the Kids Helpline @ School Optus Digital Thumbprint program with a specific focus on delivering a digital citizenship curriculum which aims to assist students to think critically about digital safety, media messages, maintain a positive digital reputation, develop online resilience strategies and engage online in ways that are responsible, respectful and empathetic. As well the curriculum helps students feel more confident to speak out when they, or others, have negative online experiences.

All sessions are facilitated by a tertiary qualified Kids Helpline counsellor who works collaboratively with the teacher/school counsellor to tailor each session to the needs of the school/class. Sessions are evidence based, interactive and fun. They are designed to introduce students to the Kids Helpline service and create a space for safe, open discussions around a range of issues impacting on the students' lives.

This chapter of the report describes the main activities and outputs of the KAS program in the 2017 calendar year.

6.2 Key program activities and outputs for 2017

6.2.1 Sessions booked and delivered and participants involved

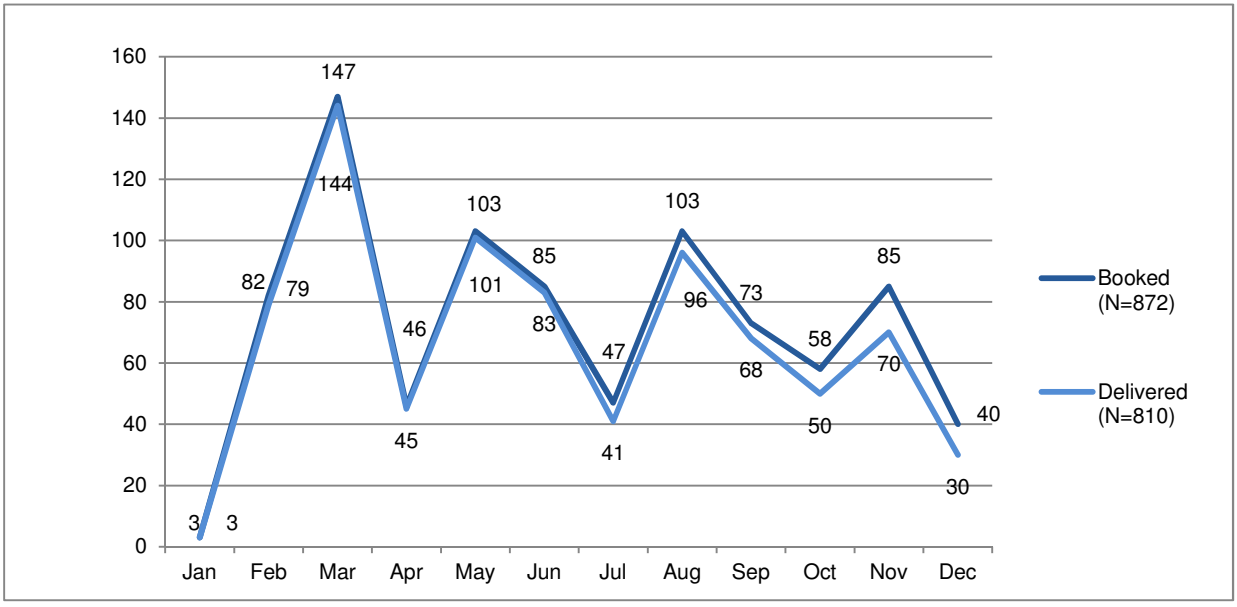
In 2017, 239 schools used the KAS website to book 872 sessions between January and December.

Of these, 221 schools completed 810 sessions with a total of 24,221 primary school students participating in sessions.

Sixty-two 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 very few sessions booked or held during January 2017 due to school holidays. Other months affected by school holidays in 2017 were April, July, October and December.

Figure 62. Number of 2017 Kids Helpline @ School sessions booked and delivered – by month



6.2.2 Topics of discussion

In 2017, sessions were conducted on 21 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, cyberbullying, friendship, developing resilience, bullying, introduction to Kids Helpline*, and *transition to high school*.

Table 12. 2017 Kids Helpline @ School participants and sessions by session topic

Topic	Number of participants	% of total participants	Number of sessions held
Staying Safe Online *	3604	15%	108
Friendship	2685	11%	95
Cyberbullying *	2445	10%	80
Developing resilience	2203	9%	81
Bullying	2057	8%	79
Introduction to Kids Helpline *	1628	7%	50
Transitional to high school	1448	6%	47
Respectful online relationships *	1293	5%	41
Positive use of technology *	1015	4%	35
Worry	954	4%	37
Balancing life and technology *	954	4%	30
Being a school leader	663	3%	24
Digital identity *	586	2%	17
Managing Emotions	576	2%	20
Safety	576	2%	14
Peer pressure	536	2%	15
Taking charge of anger	353	1%	14
Digital media literacy *	295	1%	10
Feeling sad	238	1%	9
Coping with change	60	<1%	2
Family arguments	52	<1%	2
Total	**24221**	**100%**	**810**

* Sessions marked with an asterisk are funded by Optus as part of the *Digital Thumbprint* Program. The remailing sessions are part of Kids Helpline's *Welfare* Program.

6.2.3 Geographical reach

Almost two in three schools (64%) participating in the program in 2017 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 67% of the total number of sessions held. Schools in the ACT participated at a notably higher rate than the national average of 3.7 sessions per school with a rate of 5.3 sessions per school.

Figure 63. Number of 2017 Kids Helpline @ School participating schools and sessions – by state

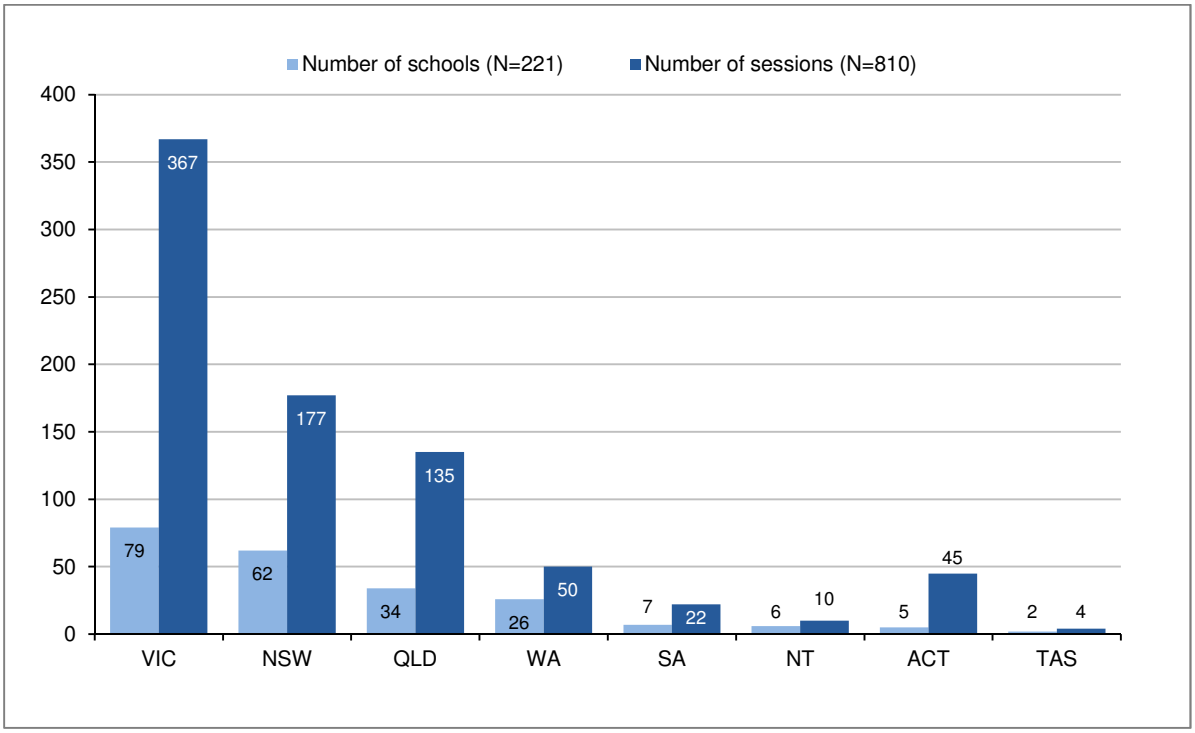
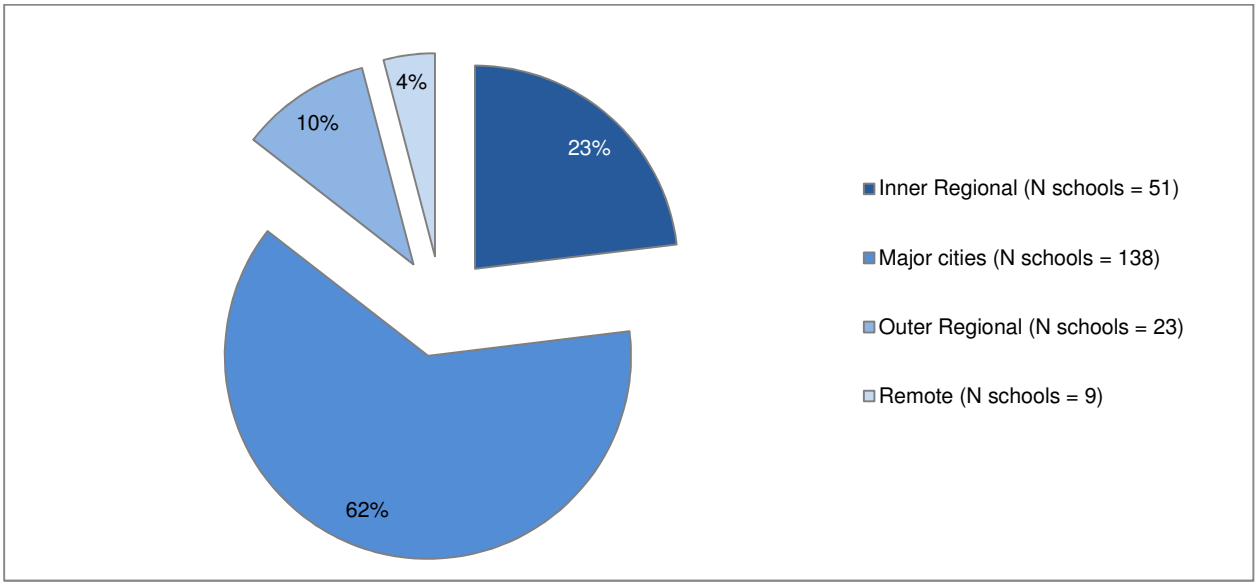


Figure 57 reveals the proportion of participating schools by remoteness classification (see Appendix for more on Kids Helpline's remoteness classification system). Almost two out of three schools (62%) were situated in Major Cities, while 14% were based in Outer Regional or Remote locations. Almost a quarter (23%) were based in an Inner Regional location.

Figure 64. Proportion of 2017 Kids Helpline @ School participating schools – by remoteness (*N* = 221)[1]

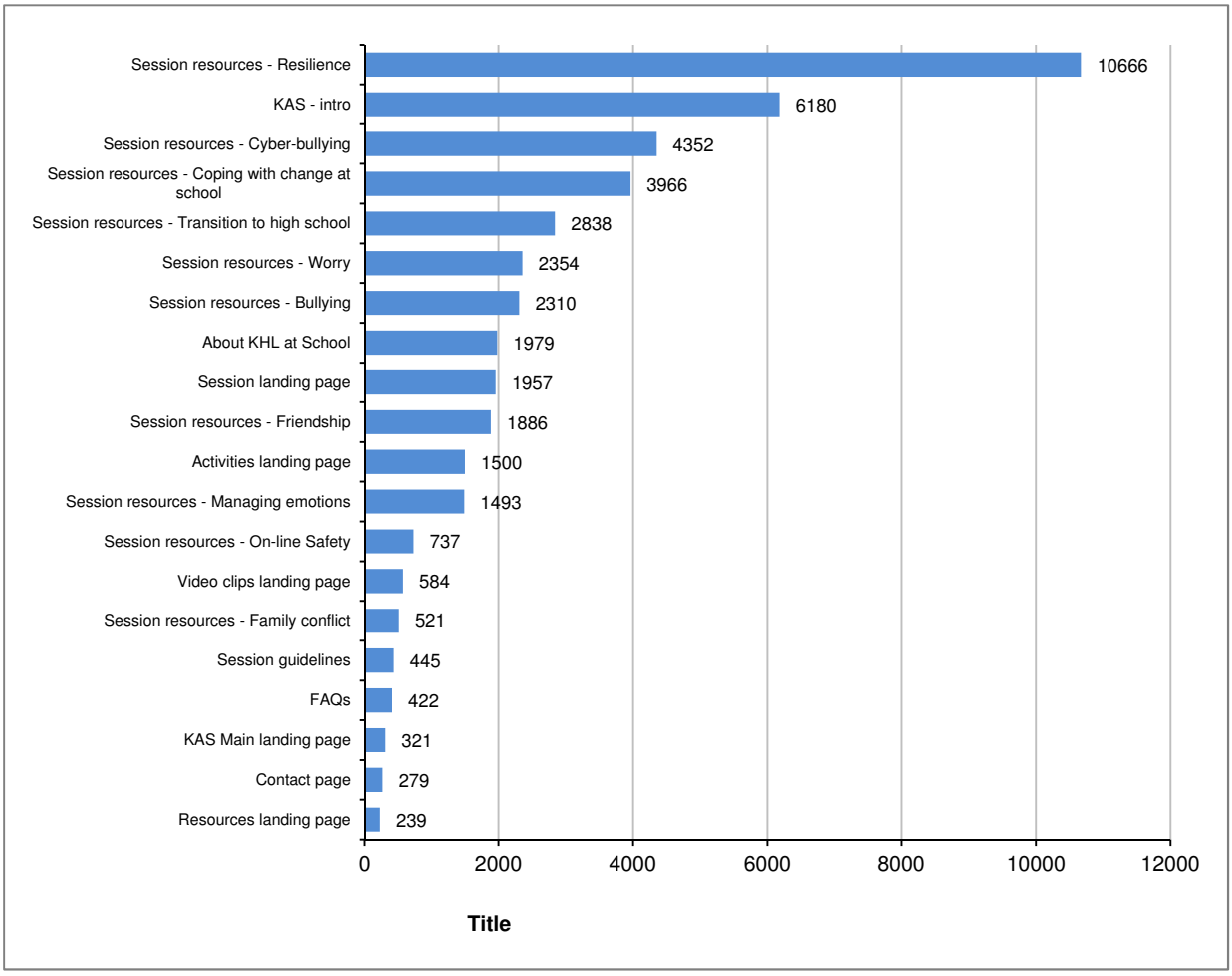


1. Where percentages sum to greater or less than 100 it is due to rounding.

6.2.4 Use of teacher resource materials

During 2017, teachers made substantial use of educational material uploaded to the KAS micro-website with 45,107 views of the KAS microsite landing page. Figure 65 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 65. Number of page views to Kids Helpline @ School micro-website resources for teachers in 2017



1. Total page views of KAS teacher resources in 2017 = 45,107.

6.2.5 Kids Helpline at School (KAS) Optus Digital Thumbprint program - evaluation results

Optus, a key strategic partner in the development of digital literacy and on-line safety, funds the Optus Digital Thumbprint part of KAS school sessions focused on cyber-safety issues. This most recent evaluative study (2016-2017 financial year) demonstrated that KAS Optus Digital Thumbprint effectively conveys information designed to assist primary school aged children to conduct their online lives safely and constructively. Students were able to report key messages gained from their sessions, including ideas about how to avoid or resolve digital life problems and knowledge of how and where to seek help if needed. The study also presented evidence of high levels of student willingness to contact Kids Helpline for support if required following their session.

Two stakeholder groups were convenience-sampled and surveyed immediately following their KAS Digital sessions:

- All teachers were emailed a link to an online survey
- The student stakeholder group was divided into younger (grades 1-3) and older (grades 4-6) children, and feedback gathered from each cohort using two age-appropriate paper surveys which aimed to measure similar constructs.
- A total of 1,040 stakeholders from these three groups gave their feedback. The table below outlines the numbers of responses from each stakeholder group:
    - Number of teachers surveyed: 132
    - Number of Grades 1-3 students surveyed: 249 from 13 sessions
    - Number of Grades 4-6 students surveyed: 659 students from 29 sessions
    - Total number of sessions represented in student survey results: 36
    - Total number of sessions represented in teacher surveys: 147

Survey results (for students only) for selected key indicators are in Table 13. Results indicate high levels of awareness of topic content and help-seeking resourcefulness.

Table 13. 2017 Kids Helpline @ School (Optus Digital Thumbprint component) results (2016-17 financial year)

Grades 1-3	post session at least one source of help available to them	98%
Grades 4-6	post-session awareness of where to go for help	91%
	able to remember some topic content following their session	93%
	gaining ideas about how to deal with the issue discussed	85%
	reporting increased confidence to deal with the issue discussed	73%

Selected results show that

- 98% of students in Grades 1-3 can identify at least one source of help available to them for cyber-safety issues, and
- students in Grades 4-6 are more aware of sources of help (91%) had gained some ideas of how to address the issues discussed (85%) and had greater confidence in their ability to deal with cyber-safety issues (73%) after the session they had attended.

6.3 Summary

Kids Helpline continued its innovative KAS program, Optus Digital Thumbprint + Wellbeing, in 2017, reaching 24,221 primary school students from 221 schools through participation in 810 classroom sessions.

The program continued to engage schools from every state and territory, and one third of participating schools in 2017 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 45,000 page views of these resources.

With the assistance of Optus, Kids Helpline was able in 2017 to continue to deliver 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 6.2.2).

7. Conclusion

This report has provided a comprehensive statistical overview of the activities of Kids Helpline during 2017, 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 2017 KHL Insights report, three of which are summarised in the following section.

Theme 1 Kids Helpline continues to play a comprehensive role in protecting young people in Australian 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 6).

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 2017 included the following responses to children and young people:

- *Mental illness*. Twenty-six per cent of counselling contacts from children and young people were in relation to mental health issues. In half (54%) 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).
- *Suicide*. Sixteen per cent of counselling contacts were about suicide. The majority (79%) of these contacts were about the child or young person's own suicidal thoughts or fears. Just less than one in 10 (8%) 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. Twelve per cent of these contacts were about concern for another person's suicidal thoughts or feelings (see section 3.7.2).

- *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).
- *Self-injury*. Seven per cent of counselling contacts were in relation to self-injury concerns. In 80% of these contacts, the child or young person was seeking help to avoid acts of self-injury and in 3% 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*. Five per cent of counselling contacts were about bullying. Seven out of 10 (72%) 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 22% 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 2,598 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 50 emergency care interventions a week. Child abuse and suicide attempts were by far the most common reasons for duty-of-care interventions in 2017 (37% and 36% 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 2017, one in five (21%) counselling contacts about child abuse was from a child or young person 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 2017 was mental health (33% of ongoing support clients' contacts), followed by suicide-related concerns (21%) and emotional wellbeing concerns (18%). Six per cent of counselling sessions with clients receiving ongoing support were in relation to child abuse (see Figure 18).
- *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 55% in 2017 (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 13% in 2017. The proportion of counselling sessions taking place via web chat, on the other hand, has increased from 9% to 32%.
- From 2015 to 2017, every subgroup of the Kid Helpline population analysed, including 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 87% in 2017, 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 re-developed and a new site launched in November 2017 to optimise access to age-targeted resources on particular issues, and to make the resources more "web-friendly".
- *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 24 minutes in 2017). In the last 3 years the wait times for answered web contacts has stabilised at around 23 minutes (Figure 41)
- *Improving web chat response rates*. Over the last five years response rates for web chat have increased markedly (from 30% in 2012 to 45% in 2017) (see Figure 39).
- *Answering more web chat contacts*. Over the last six years, the number of answered web chat contacts has grown considerably (by 178%, from 12,643 in 2012 to 35,201 in 2017) (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 26% in raw counts, or, as a proportion of all contacts received, from 18% to 43% (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 2017, they were 38 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 1998 to 2017, analysing in five-yearly intervals, there has been a 397% 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 207% 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 (49%) of all counselling contacts in 2017, 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 40% over the last five years (from 1,536 in 2013 to 2,150 in 2017). 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/*Issues article* on the Kids Helpline website in 2017 was *staying safe online*, viewed over 10,791 times. *Staying safe online* was also the most visited kids' topic in 2014, 2015 and 2016 (see section 4.2.1).

- Among teenagers, out of 51 *Tips & Info* topics available for self-directed help-seeking in 2017, *understanding cyberbullying* was the sixth most commonly viewed resource, receiving 11,916 page views, but the resource on *sexting and the consequences* was the most viewed resource, receiving over 16,000 page views (see section 4.2.1).
- The most commonly sought-after session topic in the Kids Helpline @ School curriculum in 2017 was *Safety online*, with close to 4,000 primary school children participating in 108 sessions held on this topic. Over 1,293 children participated in sessions on the topic of *relationships online* and more than 2,445 attended sessions on the topic of *cyberbullying* (see section 6.2.2).
- Close to 1,300 referrals to the Kids Helpline website in 2017 came from the Australian Government's eSafety website (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 2017, Kids Helpline continued to operate an expanded 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 in 2017:
  - 27% 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.
- *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 2017, Kids Helpline continued to conduct its Kids Helpline @ School *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 identity as inter-sex, trans and gender diverse.

Kids Helpline's response

Kids Helpline has responded to these shifting demographics in various ways in the past few years 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 2017, 2,155 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 people in Australian

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 2017 were *mental health* (26%), *family relationships* (18%), *emotional wellbeing* (17%), *suicide* (16%) 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 2017 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.

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

- The most frequently viewed pages in the Kids' section of the website included resources on online safety, new family member, abuse, homework and individuality. Staying safe online was by far the most visited page in 2014, 2015 and 2016 as well, suggesting that cyber-safety may be a standout concern for those in this age group.
- The most frequently viewed content in the Teens' section of the website included resources on sexting, leaving home, body image, suicide, and peer pressure. The topics handling peer pressure, leaving home and body image were also among the five most frequently visited teens Tips & Info topics in 2014, 2015, and 2016 suggesting some continuity in the issues of interest to website visitors of this age group. One in every 10 page views (11%) in 2017 was of an information resource on bullying.
- The most common sources of referral to the Kids Helpline website in 2017 were youth and generalist mental health and counselling websites and cyber-safety and anti-bullying websites. Over 12,000 came from youth and generalist mental health and counselling websites (primarily ReachOut, lifeline.org.au, mindhealthconnect.org.au, cyh.com, ruok.org.au, blackdoginstitute.org.au, ncab.org.au, healthdirect.gov.au etc.). These were also the most common sources of referral in 2014 and 2015, and 2016, 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 2017

This report is part of a suite of publications produced by **yourtown** about Kids Helpline in 2017. In addition to this *National Statistical Overview* report, **yourtown** has prepared the following publications:

- *Kids Helpline Insights 2017 – 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 2017 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 2017 Kids Helpline cost $12.3 million to run. **yourtown** provided 72% of the funding thanks to the generosity of supporters of the Art Unions, donations and corporate support, while the Australian, Queensland and Western Australian Governments contributed the remaining 28%.

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 about every 88 seconds but many of these contacts we are still unable to respond to. In 2017, our overall response rate dipped to 46% 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: https://kidshelpline.com.au/about/support-us.

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 39 different fields where data may be logged; however, only 11 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, and whether or not the person was concerned about online or texting activity).

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 2017, 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 (2015-2017), six-year (2012-2017) or 10 years (2008-2017) for the most part. Occasionally trends are analysed over a longer period of time where this is possible and necessary to understanding 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.[4]

In addition, postcode information is available for half (50%) of counselling contacts in 2017 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-random 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.

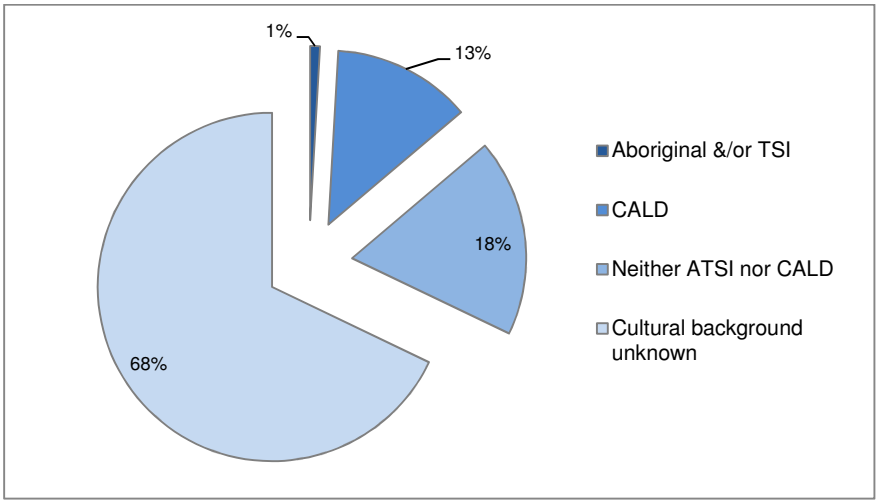
Dealing with missing data

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 66 below, cultural background information is only available for 32% of counselling contacts from children and young people 5-25 years of age in 2017. 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.

[4] For more information on the Australian Statistical Geography Standard (ASGS) Remoteness Structure refer to http://www.abs.gov.au/websitedbs/d3310114.nsf/home/australian+statistical+geography+standard+(asgs).

Figure 66. Percentage of 2017 Kids Helpline counselling contacts aged 5-25 years – by cultural background (*N* = 66,386)



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.

Pompili, M., Innamorati, M., Szanto, K., Di Vittorio, C., Conwell, Y., Lester, D., Amore, M. (2011). Life events as precipitants of suicide attempts among first-time suicide attempters, repeaters, and non-attempters. *Psychiatry Research, 186*(2–3), 300–305. doi:10.1016/j.psychres.2010.09.003

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.

We're here.
Anytime. Any Reason.

kidshelpline.com.au 24/7

1800 55 1800 FREE CALL

Kids Helpline is a service of **yourtown** for 5-25 year olds

KHL-PI-T-0218