Kids Helpline 2007 Overview—Issues Concerning Children and Young People
Since March 1991, young Australians have been contacting Kids Helpline about a wide range of issues; from everyday topics such as family, friends and school to more serious issues of child abuse, bullying, mental health issues, drug and alcohol use, homelessness and suicide.

Counselling and support is provided via the phone, web and email. Email counselling began in 1996 and real-time web counselling commenced in 2000.

Children and young people have direct access to a counsellor and can choose to speak with either a male or female counsellor. They are also able to arrange to speak again with the same counsellor to work through their issues.

No other organisation speaks with as many young Australians. The Kids Helpline 2007 Overview offers unrivalled insight into key issues concerning children and young people in Australia.
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Children and young people continued to seek help in significant numbers during 2007, with 571,936 attempts to reach Kids Helpline. Counsellors responded to more than half of these contacts (an increase of 3% compared with 2006). Almost 309,000 telephone and online interactions were provided, an additional 887 contacts than in 2006.

Counsellors engaged in 53,168 counselling sessions during 2007: 40,890 telephone and 12,278 web and email sessions.

Kids Helpline remained an extremely important service for children and young people living in regional and remote areas. While only one third of the population lives in these areas, they accounted for just under half of all contacts.

There was a continued upsurge in the number of children and young people using a mobile phone to contact the telephone service. More than half of callers (58%) used a mobile in 2007 compared with 45% in 2006.

One-in-four counselling sessions were with children and young people receiving either ongoing counselling or intensive support with a case management plan. This represents a 150% increase in contacts with young people receiving case management and a 13% increase in ongoing counselling contacts compared with 2006.

Current thoughts of suicide were reported during 3,289 counselling sessions. This equates to more than nine counselling sessions each day, a 21% increase from 2006 and a 42% increase from 2005.

Two-thirds of counselling sessions were with older adolescents and young adults, continuing a six-year trend of increasing contact from older age groups.

Responses required to protect children, such as contacting an emergency service or child protection agency, were actioned for 594 sessions, an increase of 3% from 2006 and 62% since 2003.

Children and young people identifying as Indigenous increased their contact in 2007, with double the number of total contacts and 40% more counselling sessions than in 2006. Overall, 6.1% of all contacts were from young people who identified as being Indigenous.

The main reason for contacting Kids Helpline was family relationships. This has been consistent over the 16 years of operation.

Key relationships were a significant issue - almost 19,000 counselling sessions related to family, friends and partners.

Mental health contacts continued to rise - it was the third most common reason for contacting the service in 2007, rising from a ranking of fourth in 2006. When combined with counselling sessions regarding suicide, it was the second most common reason for contacting Kids Helpline. In addition, mental health was the top concern for females aged 19 to 25 years.

Forty-eight percent (2,103) of the young people presenting with mental health concerns were ongoing clients and 42% (1,319) of these were also engaging in deliberate self-injury.

Child abuse, homelessness, grief and loss, study issues, and physical health continued to be common reasons for seeking help in 2007.

Young people continued to present different concerns through online counselling than telephone counselling. Self-image, eating and weight issues were presented online at almost triple the rate of the telephone. Mental health, suicidal thoughts, deliberate self-injury and emotional and/or behavioural management presentations online were double the rate presented on the telephone.
Each week, counsellors engaged in approximately 373 online interactions. In total, 29,855 online contacts were received and 19,423 (65%) responded to, an increase in response rate of 7% compared with 2006. A total of 9,468 web counselling sessions were provided and all of the 9,955 email contacts received a reply.

Overall, Kids Helpline improved its response to children and young people, increasing from 51% to 54% of contacts answered.

The demand for Kids Helpline from each State and Territory was generally reflective of the actual population of children and young people living in each area. (see Figure 1).

Self-injury remained a serious concern with 16% of counselling sessions held with young people who had deliberately injured themselves through actions such as cutting, burning or tattooing skin, pulling out hair or taking overdoses of substances they believed to be non-lethal.

Forty-one percent of counselling sessions (21,600) were with children and young people who fell within the parameters of groups defined as “at risk of social exclusion”. These groups include individuals experiencing homelessness, mental health issues, child abuse, bullying, domestic violence and contact with the criminal justice system.

Males accounted for 22% of counselling sessions, consistent with the previous year. Males were proportionally more likely than females to seek help about bullying, homelessness, peers, partner relationships, sexual activity and harassment/assault.

Indigenous children and young people were proportionally more likely to seek help about child abuse, homelessness, grief and loss, drug and/or alcohol use and physical health (compared with non-Indigenous clients).

Children and young people of culturally and linguistically diverse speaking backgrounds were more likely to seek help about family relationships, bullying, study issues, and self-image when compared with other clients.

How they sought help

Children and young people’s rates of help-seeking remained high in 2007, with 571,936 attempts to reach Kids Helpline’s telephone and online services. Counsellors responded to 308,702 (54%) of these contacts.

More than 5,560 telephone calls were answered by counsellors each week, a total of 289,276 during 2007.

More than 88,000 of the Australians who called the service disconnected during the wait message. In an attempt to minimise this a new means of communicating will be trialled.
Regional and remote areas

Kids Helpline continued to provide strong support to children and young people living in regional and remote areas. These young people tend to have less access and choice in support services.

Despite the fact that only one in three young people in the general population live in regional and remote areas, just under half of all Kids Helpline contacts in 2007 were from these areas.

These children and young people contacted Kids Helpline mostly by phone, with only 25% of all online contacts from these areas. Overall their web contacts decreased in 2007. However, their email contacts increased by 71%, with the service receiving 941 email contacts from rural and remote areas compared with 550 in 2006.

How they contacted us

Upsurge in the use of mobiles

Kids Helpline continued to see an upsurge in the number of children and young people using a mobile phone to contact the telephone service. In 2007, 307,291 attempts were made from mobile phones, accounting for 58% of all telephone calls. This is a 21% increase on 2006 mobile phone contacts (254,914) and a 43% increase since 2003 (215,376).

It is important to note that not all phone calls made from mobile phones to Kids Helpline are free. Calls from the Optus network, including Virgin and Vodaphone, are free. Normal mobile charges apply to calls from the other network provider.

Public phones still relevant

Despite the enormous growth in mobile phone use, payphones still play a significant role in children and young people accessing Kids Helpline. Almost one-in-ten (4,202) of all telephone counselling sessions were made from payphones.

Access to payphones is particularly important for Indigenous children and those young people located in regional and remote areas of Australia. Almost one-in-five calls to Kids Helpline from Indigenous children and young people and almost one-in-ten calls from regional and remote areas were made from payphones.

Ensuring easy and free access to telephone services is more critical for these two groups because they are often disadvantaged by a lack of local services and rely heavily on communication technologies to seek help via telephone and internet-based services.

Providing counselling, support and connection

Children and young people contact Kids Helpline for a diverse range of reasons. Counsellors are trained to respond to each individual’s needs - support, encouragement, counselling, assistance, information and connection are provided.

Some interactions are with children and young people who do not report any immediate problems, but have heard of Kids Helpline through schools or advertising and want to “check out” the service to find out what counsellors actually do. At the time, these calls do not always have discernable outcomes. However, Kids Helpline has confidence that if young people test the service in this way and are responded to in a positive and respectful manner then they are likely to connect with a counsellor if more serious concerns arise.

Fifteen year-old Emily* called very distressed, she was thinking about hanging herself after ongoing fights with her family in regard to her mental health issues. Her family was struggling to deal with the dramatic ups and downs associated with her bi-polar disorder, and Emily was also distressed about many of the people in her small town knowing about her mental health. She spoke with the counsellor in detail about her intentions and thoughts and she calmed down significantly when able to vent her fears and frustrations. Together they came up with a safety plan which included tapping into her existing support network, taking her prescribed medication, and removing herself from access to any deadly means. As the call ended Emily said she was relieved and felt more able to care for herself and stay safe.

*Name changed for privacy reasons.
Almost half (44%) of all interactions are with children and young people seeking counselling or support. Some are in crisis and have heard of Kids Helpline’s reputation for assisting in these kinds of situations. These young people often know what they want and are able to ask for what they need. Others may be facing less critical concerns and are seeking help to consider their options or simply want to talk things through.

The online medium attracts a far higher percentage of young people wanting counselling and support than telephone (85% compared with 41%).

The average time spent in phone counselling sessions has continued to grow in line with increasingly complex presentations to the service. Counsellors spent an average of 20 minutes with children and young people in telephone counselling sessions, compared with 17 minutes in 2006. The time spent in web counselling remained constant, with sessions lasting an average of 52 minutes.

**Information on counselling sessions**

The remainder of this Overview is based upon counsellor’s reports on the 40,890 telephone and 12,278 web and email counselling sessions held with children and young people aged 5 to 25 years.

**Increase in ongoing counselling and intensive support**

Young people with severe, complex and long-standing issues benefit from working with a service on a regular or ongoing basis (ongoing counselling). This usually includes speaking predominantly with one or two key counsellors who become familiar with their concerns. There was a 13% increase in sessions with young people who are working with designated counsellors in an ongoing way.

Case management is a model of care that offers more intensive support, generally to ensure numerous different needs can each be considered and planned for.

Sometimes this might mean linking the young person with other more specialised face-to-face services and developing joint or “wrap-around” case management plans.

Kids Helpline has noted a 150% increase in the past year in the number of counselling sessions provided to case-managed clients.

Of the 39,087 counselling sessions where counsellors recorded the nature of the contact, one-in-four (9,996) were with children and young people receiving either ongoing counselling (15%) or intensive support with a case management plan (11%).

Ongoing counselling was provided at almost double the rate though our online services (21%) compared with telephone counselling (11%). However, intensive support through case management was similar across telephone and online mediums.

The majority of sessions (74%) were with children and young people who were contacting Kids Helpline for the first time or who occasionally contacted the service.

**Referral to other support**

Across all counselling sessions, counsellors were able to directly assist 37,037 (71%) of young people contacting the service without referring them on to another agency. For those counselling sessions in which a referral was required:

- 11% (5,513) resulted in the client being referred to another service for ongoing support (including crisis response and three-way link-ups) or other non-specific referrals.

Fifteen year-old Emily* called very distressed, she was thinking about hanging herself after ongoing fights with her family in regard to her mental health issues. Her family was struggling to deal with the dramatic ups and downs associated with her bi-polar disorder, and Emily was also distressed about many of the people in her small town knowing about her mental health. She spoke with the counsellor in detail about her intentions and thoughts and she calmed down significantly when able to vent her fears and frustrations. Together they came up with a safety plan which included tapping into her existing support network, taking her prescribed medication, and removing herself from access to any deadly means. As the call ended Emily said she was relieved and felt more able to care for herself and stay safe.

*Name changed for privacy reasons.
In 2,045 sessions, counsellors were unable to provide a referral because either no appropriate service was available or the young person finished the session before a referral could be discussed. This may have been because they did not want to engage in the process, were reluctant to disclose identifying information or were not ready to seek face-to-face help.

14% (7,411) were referred to their doctor, school/guidance counsellor, mental health worker.

**Age, gender and background of clients**

Females made up the majority of counselling sessions in 2007, with the proportion of males contacting Kids Helpline consistent with help-seeking trends for males in the majority of counselling services:

- 40,836 females (78%)
- 11,315 males (22%)

The telephone service remained the preferred method for males seeking counselling. Boys and young men continued to make almost one-in-four contacts via the telephone service compared with one-in-ten via the online service.

Two-thirds of all counselling sessions were with older adolescents and young adults during 2007, continuing a six-year trend of increasing contact from older age groups (see Table 1).

### Table 1:
**Age of children and young people engaging in counselling sessions**

<table>
<thead>
<tr>
<th>Age</th>
<th>Number of Contacts</th>
<th>% of Contacts</th>
</tr>
</thead>
<tbody>
<tr>
<td>5-9 years</td>
<td>1,388</td>
<td>3%</td>
</tr>
<tr>
<td>10-14 years</td>
<td>14,425</td>
<td>29%</td>
</tr>
<tr>
<td>15-18 years</td>
<td>25,674</td>
<td>53%</td>
</tr>
<tr>
<td>19-25 years</td>
<td>7,424</td>
<td>15%</td>
</tr>
<tr>
<td>Total</td>
<td>53,168</td>
<td>100%*</td>
</tr>
</tbody>
</table>

* These percentages were related to contacts where age was known. There were 4,257 contacts where age was not recorded.

Online clients in particular tend to be older, with 15 to 25 year-olds involved in three-quarters of online counselling sessions (compared with two-thirds of telephone sessions).

During 2007, Kids Helpline saw a 43% increase in the level of ethnic background reported by counsellors compared with the previous year. In line with this, the number of telephone and online contacts where counsellors recorded backgrounds as being either Indigenous or culturally and linguistically diverse also increased.

Despite the increase in reporting, the background of clients was still only recorded in one-third of counselling sessions. Therefore the following figures are likely to be a significant under-representation of the actual amount of counselling with culturally diverse clients. Overall:

- 882 counselling sessions were with Indigenous children and young people: a 70% increase from 2006.
- 2,762 counselling sessions were with children and young people from culturally and linguistically diverse backgrounds.

### Table 2:
**Cultural and linguistic background Kids Helpline counselling clients**

<table>
<thead>
<tr>
<th>Background</th>
<th>All (N=17,409)</th>
<th>Telephone (N=15,416)</th>
<th>Online (N=1993)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indigenous</td>
<td>5%</td>
<td>5%</td>
<td>3%</td>
</tr>
<tr>
<td>CALD</td>
<td>14%</td>
<td>16%</td>
<td>16%</td>
</tr>
<tr>
<td>Other</td>
<td>81%</td>
<td>79%</td>
<td>81%</td>
</tr>
<tr>
<td>Total</td>
<td>100%*</td>
<td>100%*</td>
<td>100%*</td>
</tr>
</tbody>
</table>

*Proportions based on counselling sessions which recorded background of client.*
The concerns of children and young people who contact Kids Helpline are often complex and relate to more than one issue, for instance bullying and peer relationships. However, the primary topic discussed during each counselling session is recorded in order to provide an indication of what is concerning young Australians.

The 15 most frequent concerns reported by children and young people in 2007 are shown in Figure 2 along with comparative data for the 2002-2006 period.

Contact from young males

Although young males make 22% of counselling contacts to Kids Helpline, they engage in a greater level of testing activity. When both counselling and non-counselling activity is considered, 104,604 (34%) of contacts were with males. This greater chat and testing activity may be due to young males wanting to contact help services but requiring more time and practice than females at asking for what they need.

* Gender is only recorded in approximately 35% of all contacts. This figure has been extrapolated.

Indigenous clients predominantly phoned Kids Helpline while culturally and linguistically diverse children and young people were proportionally more likely to seek help online.

Concerns of Australian children and young people

Main concerns - highlights and trends

The concerns of children and young people who contact Kids Helpline are often complex and relate to more than one issue, for instance bullying and peer relationships. However, the primary topic discussed during each counselling session is recorded in order to provide an indication of what is concerning young Australians.

The 15 most frequent concerns reported by children and young people in 2007 are shown in Figure 2 along with comparative data for the 2002 - 2006 period.

Fifteen year-old Chelsea* rang two days before Christmas. She was intoxicated, distressed, and dreading Christmas because it meant “happy families”. She had been living with her father when he overdosed whilst suffering terminal, AIDS-related cancer and she was now homeless. Chelsea had been emotionally and physically abused by her mother and felt worthless, isolated and unloved. After being picked up by police for sleeping in the park, Chelsea, with the help of her counsellor, finally found a shelter. But her previous unstructured life made adapting to rules and regulations extremely difficult and the shelter would not tolerate her extensive self-harming.

With the ongoing support of her counsellor Chelsea is now managing to abide by the rules of her second shelter and beginning to build a more positive self-identity. She has managed to reduce her reliance on alcohol to deal with her grief but still suffers bouts of depression that end in suicidal attempts. However, these as well as her self-harming attempts, are reducing as she slowly gains a sense of security and purpose in her life.

*Name changed for privacy reasons.
Almost 19,000 counselling sessions focussed on relationships.

Family relationships remained the top concern for young people aged between 5 and 18 years, and for those from Indigenous and culturally and linguistically diverse backgrounds aged 5 to 25 years.

Relationships with friends or peers were a key concern for children aged 10 to 14 years. Forty percent of the counselling sessions relating to friendships involved this age group.

Contacts regarding mental health issues have more than doubled since 2002. Forty percent (2,103) of these counselling sessions were with ongoing clients and 42% (1,319) were with young people engaging in deliberate self-injury. In addition, this was the top concern for females aged 19 to 25 years.

The top concern for males aged between 15 and 25 years was partner relationships.

Bullying concerns were predominantly presented by children younger than 15 years and by first-time or occasional clients. There was an overall decrease in calls responded to by Kids Helpline from this age group. However, 2,352 counselling sessions were held about bullying. Most incidences of bullying involve episodic or frequent occurrences, with males proportionally more likely than females to report this concern.

Almost half of child abuse contacts were from children and young people reporting a current abusive or neglectful situation. The majority of these contacts were with children aged between 10 and 14 years. Proportionally, males and females are equally likely to contact Kids Helpline about child abuse.

Concerns about homelessness increase with age, with 80% of counselling sessions regarding homelessness or leaving home involving young people aged 15 to 25 years.

Suicide concerns increased in 2007, with numbers up by almost 20 percent compared with 2006. Kids Helpline counsellors engaged in an average of nine counselling sessions per day with young people expressing current thoughts of suicide: a total of 3289 during 2007.

After 16 years of operation the number one reason children and young people contact Kids Helpline remains concerns about family relationships.

However, over the past seven years the proportion of counselling sessions related to mental health issues, emotional and/or behavioural management, deliberate self-injury and thoughts of suicide have increased. There has been a substantial decrease in peer relationship and bullying concerns and smaller decreases in relation to drug and/or alcohol, pregnancy, sexual activity and contraception concerns across this period. Small increases emerged in relation to study issues and partner relationships during 2007.

Social exclusion
Of the 53167 total counselling sessions, more than 21,600 were with children and young people ‘at risk of social exclusion’.

Kids Helpline believes experiences leading to social exclusion include homelessness, mental health issues, child abuse, bullying, domestic violence and contact with the criminal justice system.
Online vs telephone counselling

During 2007, online counselling continued to be accessed for different concerns to telephone counselling. Online counselling appears to provide a greater degree of comfort to young people when disclosing issues that may feel shameful. This may be because there can be a greater level of anonymity in online communication.

In the eight years Kids Helpline has offered web and email counselling, greater proportions of young people have consistently sought help online for some of the more severe concerns.

Deliberate self injury, emotional and/or behavioural management, mental health issues, self-image, and eating and weight issues were presented online at almost double the rate of telephone counselling during 2007.

Conversely, more children and young people were likely to engage in telephone counselling rather than online services when needing to discuss concerns surrounding drugs and alcohol, bullying, pregnancy, and homelessness.

The top 15 concerns about which young people contacted Kids Helpline online are shown in Figure 3. Telephone counselling figures are also given in order to provide a comparison.

Note: There were 40,890 telephone counselling sessions during 2007 compared with 12,278 online sessions.
Relationships with family

Family relationships remained the most frequent concern for children and young people. Table 3 shows the nature of counselling sessions about family relationships.

Table 3: Family relationships

<table>
<thead>
<tr>
<th>Family Relationships</th>
<th>All (N=8,967)</th>
<th>Telephone (N=7,150)</th>
<th>Online (N=1,817)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Worry about a family member</td>
<td>12%</td>
<td>13%</td>
<td>9%</td>
</tr>
<tr>
<td>Occasional family conflict or disruption</td>
<td>26%</td>
<td>27%</td>
<td>23%</td>
</tr>
<tr>
<td>Frequent or major family conflict or disruption</td>
<td>50%</td>
<td>48%</td>
<td>58%</td>
</tr>
<tr>
<td>Family breakdown, separation or divorce</td>
<td>12%</td>
<td>12%</td>
<td>10%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Younger children along with young people from non-English speaking backgrounds made proportionally more contacts about family relationships. It was also the number one concern for Indigenous children. These concerns were more likely to be discussed via the telephone rather than online. In particular:

- More than a third of counselling sessions with 5 to 9 year-olds and a quarter with 10 to 14 year-olds were about family relationships.

- More than one-in-five counselling sessions with Indigenous children and young people focused on their family.

- An equal proportion of males and females contacted Kids Helpline regarding concerns with family relationships.

More information is available in the Kids Helpline Information Sheet: Family Relationships.

Emotional and/or behavioural management

The proportion of children and young people seeking help about emotional and/or behavioural management increased significantly in 2007, continuing a three-year trend. It became the second most common concern, accounting for almost 12% of all counselling sessions.

The nature of concerns about managing emotional and behavioural responses are varied but include anger management, violent behaviour, self-injurious behaviour and coping with traumatic experiences. Table 4 shows the nature of these 6,163 counselling sessions.

Sasha *, 20 called from her family home very distressed, and crying. She had returned to her home from uni for the weekend, and her parents were arguing and trying to hurt each other. Her father has a history of alcohol abuse and violence towards the family, although he is no longer physically violent. Sasha is depressed being back in the house compared to the fun she has been having at uni. She didn’t want to be there anymore, but she also didn’t want to sever her relationship with her parents. The counsellor gave her space to cry and to talk about how she was feeling.

They worked together to develop ways of maintaining communication with her parents in a safe way, for example, staying with a friend when visiting and meeting her parents in a neutral location (eg catching up for coffee) or using phone contact. Sasha calmed down throughout the call and was able to look to the future with hope.

*Name changed for privacy reasons.
Emotional and/or behavioural management features as a major concern for all our clients. Of note:

- This was the top concern for online counselling, frequently with an ongoing client and the young person was also often engaging in self-injury.
- The proportion of contacts about emotional and/or behavioural management concerns via online (18%) was substantially higher than those via the telephone (10%).
- 38% of these sessions were with an ongoing or case managed client.
- 30% were with young people engaging in deliberate self-injury.
- Almost 60% focused primarily on the young person needing to talk through their emotions or behaviour.

### Table 4: Emotional/behavioural management

<table>
<thead>
<tr>
<th>Emotional and/or behavioural management</th>
<th>All (N=6,163)</th>
<th>Telephone (N=4,009)</th>
<th>Online (N=2,154)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concerned about another person</td>
<td>1%</td>
<td>2%</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Needing to talk through emotions or behaviour</td>
<td>59%</td>
<td>58%</td>
<td>61%</td>
</tr>
<tr>
<td>Seeking management strategies</td>
<td>12%</td>
<td>12%</td>
<td>11%</td>
</tr>
<tr>
<td>Experiencing difficulty managing emotions or behaviours</td>
<td>24%</td>
<td>24%</td>
<td>24%</td>
</tr>
<tr>
<td>Extremely distressed at the time of contact</td>
<td>4%</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

### Deliberate self-injury

All children and young people contacting Kids Helpline are assessed in relation to recent incidences of deliberate self-injury. During 2007, 16% (8,498) of counselling sessions were with young people who had deliberately injured themselves through actions such as cutting, burning or tattooing skin, pulling out hair or taking overdoses of substances they believed to be non-lethal.

Self-injury was significantly more likely to be reported by females (95%) than males (5%), with one-in-five female clients indicating they engaged in deliberate self-harming behaviour. Almost two thirds of all young people presenting with this behaviour were aged between 15 and 18 years. Online contacts (25%) were almost double the rate of the telephone service (13%).

**Amanda**, 15 years, regularly speaks with two counsellors regarding self-harm and suicidal thoughts. They discuss what happens for her before, during and after she harms herself, as well as assessing and exploring her suicidal thoughts rather than trying to hide the emotional pain by replacing it with physical pain. She has been able to talk through distressing issues rather than escaping life. With her counsellors’ support, Amanda has developed a personal safety plan which includes ways of self-soothing and a list of distractions she can use if necessary. Her self-harming has reduced from a weekly behaviour to approximately once a month, and she has also dramatically decreased her thoughts about self-harm. Although she has only used the online service 24/7 when she feels she can’t cope, she can phone for support outside of her two regular counsellors. Considering all her difficulties, that she continues to go through a lot of difficulties, this is a significant achievement and her counsellors continue to assist Amanda in making positive choices for herself.

*Name changed for privacy reasons.*
Mental health issues

Mental health continues to emerge as a growing concern amongst young people contacting Kids Helpline, and was the third most frequent issue for children and young people in 2007. Accounting for 10% (5,320) of counselling sessions, mental health issues were presented at more than double the rate compared with 2003 (4% of counselling sessions).

The nature of mental health concerns presented included depression, anxiety, psychosis, personality disorders, Attention Deficit Hyperactivity Disorder (ADHD) and other childhood disorders. Specific or early stage mental health issues were also recorded within other Kids Helpline problem types, including suicide, eating and weight issues, substance use and emotional and/or behaviour management. Table 5 shows the nature of the telephone and online counselling sessions related to mental health issues during 2007.

Table 5: Mental health issues

<table>
<thead>
<tr>
<th>Mental health issues</th>
<th>All (N=5,320)</th>
<th>Telephone (N=3,435)</th>
<th>Online (N=1,885)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seeking information or concerned about a significant other</td>
<td>7%</td>
<td>8%</td>
<td>4%</td>
</tr>
<tr>
<td>Experiencing mild or occasional symptoms or concerns</td>
<td>29%</td>
<td>23%</td>
<td>41%</td>
</tr>
<tr>
<td>Severely distressed or experiencing major effects on their life</td>
<td>20%</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Clinically diagnosed mental health issue</td>
<td>44%</td>
<td>49%</td>
<td>35%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Specifically:
- Mental health concerns were the second most common online counselling concern.
- 86% of all contacts regarding mental health were made by females.
- 42% of these counselling sessions were with young people engaging in deliberate self-injury.
- One-in-seven reported current thoughts of suicide. This is an increase from the previous year in which one-in-ten reported having thoughts of suicide.

More information is available in the Kids Helpline Mental Health Information Sheet.

Relationships with friends and peers

While the proportion of counselling sessions in relation to peer relationships has been decreasing since 2001, this issue remains an important concern. Table 6 shows the nature of the 5,124 counselling sessions regarding relationships with friends and peers in 2007.

Mental health concerns were presented in proportionally higher rates online (15%) compared with telephone (8%). Almost 90% of all contacts regarding mental health concerns were by older adolescents and young adults. Three quarters of these counselling sessions were with an ongoing or case-managed client and the young people were often engaging in deliberate self-injury behaviours.
Relationships with partners

Partner or intimate relationships continued to be a major concern for young people. Table 7 shows the nature of the 4,796 counselling sessions about partner relationships during 2007.

Counselling sessions focused on intimate relationships were predominantly via the telephone service and with first-time or occasional callers. These concerns were also presented in proportionally higher rates by males, and by older adolescent and young adults. In particular:

- More than 60% were with a first-time or occasional Kids Helpline client.
- For young people of culturally and linguistically diverse backgrounds, partner relationships ranked as the third most common concern.
- Males were proportionally more likely than females to seek help about partner relationships. It was the most common concern for 15 to 25 year-old males.
- The proportion of contacts about partner relationships via telephone (10%) was substantially higher than those via the online service (7%).

Almost half of all peer relationship concerns were presented by children aged between 10 and 14 years.

The most common issue regarding friends or peers was occasional or one-off feelings of rejection (36%), followed by reports of concern for a friend’s well being (32%).

Ten percent of all contacts by young people from culturally and linguistically diverse backgrounds were regarding relationships with friends or peers.

Table 6: Peer relationships

<table>
<thead>
<tr>
<th>Peer relationships</th>
<th>All (N=5,124)</th>
<th>Telephone (N=3,962)</th>
<th>Online (N=1,162)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concern for a friend’s well being</td>
<td>32%</td>
<td>33%</td>
<td>31%</td>
</tr>
<tr>
<td>Occasional or one-off friendship problems</td>
<td>36%</td>
<td>37%</td>
<td>30%</td>
</tr>
<tr>
<td>Significant relationship problems</td>
<td>19%</td>
<td>17%</td>
<td>25%</td>
</tr>
<tr>
<td>Difficulty making or maintaining friendships</td>
<td>13%</td>
<td>13%</td>
<td>14%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Table 7: Partner relationships

<table>
<thead>
<tr>
<th>Partner relationships</th>
<th>All (N=4,796)</th>
<th>Telephone (N=3,896)</th>
<th>Online (N=900)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wanting to establish a relationship</td>
<td>12%</td>
<td>11%</td>
<td>17%</td>
</tr>
<tr>
<td>Seeking help with negotiating a relationship</td>
<td>33%</td>
<td>32%</td>
<td>36%</td>
</tr>
<tr>
<td>Concern for their partner’s well-being</td>
<td>5%</td>
<td>5%</td>
<td>6%</td>
</tr>
<tr>
<td>Significant relationship difficulties or relationship breakdown</td>
<td>50%</td>
<td>52%</td>
<td>41%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>
Child abuse

Child abuse is the sixth most frequent concern for children and young people, accounting for approximately 5% of all counselling sessions. The majority of these 2,769 contacts were in relation to physical abuse (46%) or sexual abuse (38%), with 11% related to emotional abuse and 5% concerning neglect.

Almost half of the child abuse counselling sessions were with children and young people reporting a current abusive or neglectful situation (see Table 8).

Table 8: Child abuse

<table>
<thead>
<tr>
<th>Child abuse</th>
<th>All (N=2,769)</th>
<th>Telephone (N=2,214)</th>
<th>Online (N=555)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seeking information</td>
<td>10%</td>
<td>11%</td>
<td>5%</td>
</tr>
<tr>
<td>Currently at risk of abuse/neglect</td>
<td>13%</td>
<td>14%</td>
<td>11%</td>
</tr>
<tr>
<td>Current and/or ongoing abuse/neglect</td>
<td>45%</td>
<td>46%</td>
<td>39%</td>
</tr>
<tr>
<td>Abuse no longer current, seeking assistance with unresolved issues</td>
<td>32%</td>
<td>29%</td>
<td>45%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Child abuse concerns were held by a mixture of first-time, occasional or ongoing clients and one-in-four were given a referral to another organisation or service. Key points regarding child abuse counselling sessions include:

- 14% were with young people engaging in deliberate self-injury.
- 4% reported current thoughts of suicide.
- Males reporting child abuse were most likely to talk about current or ongoing physical abuse.
- Females reporting child abuse were most likely to make contact about either the unresolved impact of past sexual abuse or current/ongoing physical abuse.

Bullying

School-related bullying accounted for more than 2,300 counselling sessions in 2007. The number of contacts made to Kids Helpline regarding this issue has continued to decrease since 2001. Table 9 shows the nature of these counselling sessions.

Bullying concerns were predominantly presented on the telephone by children younger than 15 years and by first-time or occasional callers. These concerns were also presented in proportionally higher rates by males.

In particular:

- 82% of these counselling sessions were with children younger than 15 years.
- 77% were with a first-time caller or occasional Kids Helpline client.
- Boys were proportionally more likely than girls to seek help about this issue (7% of all counselling sessions with males compared with 4% of sessions with females).
- The proportion of contacts about bullying via telephone (5%) was more than double the proportion presented via online sessions (2%).
- Young people and children from culturally and linguistically diverse backgrounds were more likely than any other group to contact Kids Helpline about bullying.
Homelessness and leaving home

Kids Helpline counsellors responded to 1,753 young people facing homelessness or leaving home. Table 10 shows the nature of these concerns.

Most counselling sessions that focused on leaving home or homelessness were via the telephone, with first-time or occasional clients, and with young people aged between 15 and 18 years. Counsellors were able to provide more than half of all these callers with a referral to other services. Concerns about homelessness were also presented in proportionally higher rates by males and Indigenous young people.

Specifically:

- The proportion of contacts about homelessness via telephone (4%) was four times higher than the online service (1%).
- 66% of counselling sessions were with children and young people aged between 15 and 18 years.
- Although females made a greater number of contacts about homelessness than males, boys were proportionally more likely to seek help about this issue (5% of all counselling sessions with males compared with 3% of sessions with females).
- Indigenous children and young people were proportionally more likely to seek help about homelessness when compared with non-Indigenous young people (5% and 3% respectively).

---

### Table 10: Homelessness/leaving home

<table>
<thead>
<tr>
<th>Homeless/leaving home</th>
<th>All (N=1,753)</th>
<th>Telephone (N=1,657)</th>
<th>Online (N=96)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seeking information or contemplating leaving home</td>
<td>34%</td>
<td>32%</td>
<td>67%</td>
</tr>
<tr>
<td>Young person told to leave their home</td>
<td>20%</td>
<td>20%</td>
<td>18%</td>
</tr>
<tr>
<td>Left home with somewhere to stay</td>
<td>16%</td>
<td>17%</td>
<td>10%</td>
</tr>
<tr>
<td>Left home with nowhere to stay</td>
<td>27%</td>
<td>28%</td>
<td>4%</td>
</tr>
<tr>
<td>Severely distressed or at risk of harm</td>
<td>3%</td>
<td>3%</td>
<td>1%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>
Suicidality

Suicidality was the ninth most common reason for contacting Kids Helpline, accounting for 1,642 or 3% of counselling sessions during 2007. A larger proportion of suicide concerns were presented via online counselling (4.1%) than on the phone (2.8% of calls). Table 11 shows the nature and severity of counselling sessions during 2007 where the majority of counselling work was related to suicide.

Table 11: Suicide-related issues

<table>
<thead>
<tr>
<th>Suicide-related issues</th>
<th>All (N=1,642)</th>
<th>Telephone (N=1,137)</th>
<th>Online (N=505)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seeking information or concerned about a friend</td>
<td>14%</td>
<td>16%</td>
<td>9%</td>
</tr>
<tr>
<td>Experiencing suicidal thoughts or fears</td>
<td>65%</td>
<td>58%</td>
<td>82%</td>
</tr>
<tr>
<td>Immediate intention or making an attempt whilst talking with a counsellor</td>
<td>21%</td>
<td>26%</td>
<td>9%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Of note, counselling sessions related to suicide were often with an ongoing or case-managed client and the young people were often engaging in deliberate self-injury. Specifically:

- Over half (52%) of these counselling sessions were with young people engaging in deliberate self-injury.
- 38% of sessions were with an ongoing or case managed client.
- Females were significantly more likely than males to contact Kids Helpline regarding suicide concerns: 85% of all these counselling sessions were with females.
- Three quarters of counselling sessions were with young people aged between 15 and 25 years.
- Indigenous young people were proportionally more likely to seek help about suicide when compared with non-Indigenous young people (5% and 3% respectively).

Current thoughts of suicide

Regardless of the main issue recorded, a more accurate reflection of suicidal thinking in young people is demonstrated through counsellors also assessing children and young people in relation to current thoughts of suicide. In 2007, current thoughts of suicide were reported during 3,289 counselling sessions (2,256 telephone and 1,033 online). This equates to approximately nine counselling sessions each day and represents a 20% increase on 2006 figures. This finding is particularly important as whilst it is concerning that it appears young people are increasingly likely to have thoughts of suicide, it also suggests that they are more likely to contact Kids Helpline in times of extreme emotional stress. The proportion of young people with current thoughts of suicide presenting for online counselling (8% of sessions) was more than the rate of the telephone service (6% of calls).
Grief and loss

Grief and loss concerns were the tenth most common reason for seeking help via both telephone and online counselling during 2007. These concerns include any kind of grief response to death or loss such as the death of a parent, pet, friend, grandparent or the loss of relationships or lifestyle such as moving interstate.

Table 12 shows the nature of these 1,418 counselling sessions.

**Table 12: Grief and loss**

<table>
<thead>
<tr>
<th>Grief and loss</th>
<th>All (N=1,418)</th>
<th>Telephone (N=1,025)</th>
<th>Online (N=393)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seeking information</td>
<td>2%</td>
<td>3%</td>
<td>1%</td>
</tr>
<tr>
<td>Needing to talk through an experience of loss</td>
<td>50%</td>
<td>49%</td>
<td>51%</td>
</tr>
<tr>
<td>Suffered a recent loss and in acute distress</td>
<td>32%</td>
<td>33%</td>
<td>31%</td>
</tr>
<tr>
<td>Unable to resume usual lifestyle</td>
<td>9%</td>
<td>7%</td>
<td>12%</td>
</tr>
<tr>
<td>Experiencing extreme long-term distress</td>
<td>7%</td>
<td>8%</td>
<td>5%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

- Sixty-one percent of these counselling sessions were from first time or occasional clients.
- Indigenous children and young people were proportionally more likely to seek help about grief and loss compared with non-Indigenous clients (3.3% and 1.8% respectively).
- It was not uncommon for children and young people seeking help about grief and loss to be engaging in deliberate self-injury (14% of these counselling sessions).

Increase in protective actions

Counsellors exercise their duty of care obligations if they assess that a child is at risk of injury or harm at the time of their call or online contact. Responses required to protect children, such as contacting an emergency service or child protection agency, were actioned during or after 594 counselling sessions during 2007 (478 via the telephone service and 84 via online counselling). This was an increase of 3% on 2006 figures. Overall protective actions taken by counsellors have risen 62% since 2003.

Luther, 20 years, rang at the end of a very difficult few weeks in which he had lost his job, been evicted, had his car break down, his relationship end, and his pet die. He described symptoms of depression and also said, “If I had a gun, I probably would have shot myself by now.” Luther’s support networks and internal resources, such as his ability to get through similar hardships previously, were explored at length. By the end of the call he was able to list several firm options as alternatives to suicide and agreed to call back at a set time.

*Name changed for privacy reasons.*
Are boys and young men's issues different?

The pattern of contacts from males and females is relatively similar. However, while males account for only 22% of counselling sessions, they are proportionally more likely than females to seek help about bullying, homelessness, peers, partner relationships, sexual activity and harassment/assault.

Top 10 concerns of male clients
1. Family relationships
2. Partner relationships
3. Emotional and/or behavioural management
4. Issues with peers and friends
5. Bullying
6. Mental health issues
7. Homelessness or leaving home
8. Child abuse
9. Drug and alcohol use
10. Sexual orientation

What are the issues for Aboriginal and Torres Strait Islander clients?

The number of contacts from Indigenous and Torres Strait Islander children and young people rose to 6.1%, an increase of 24% from 2006 and 51% from 2005. In addition, counselling contacts increased by 66% from 2006 figures. This finding is particularly important as it has been a key objective for Kids Helpline to improve and increase contact with Indigenous children and young people. The 2007 findings indicate they are increasingly reaching out to Kids Helpline for contact and counselling needs. These children and young people are proportionally more likely to seek help about child abuse, homelessness, grief and loss, drug and/or alcohol use, and physical health compared with non-Indigenous clients.

Top 10 concerns of Indigenous youth
1. Family relationships
2. Emotional and/or behavioural management
3. Mental health issues
4. Partner relationships
5. Relationship with peers and friends
6. Child abuse
7. Homelessness
8. Drugs and alcohol
9. Bullying
10. Suicide

What are the issues for young people from culturally and linguistically diverse backgrounds?

Children and young people from culturally and linguistically diverse (CALD) backgrounds are proportionally more likely to seek help about family relationships, bullying, study issues, and self-image (when compared with other clients).

Top 10 concerns of CALD clients
1. Family relationships
2. Emotional and/or behavioural management
3. Partner relationships
4. Relationships with friends and peers
5. Mental health issues
6. Child abuse
7. Bullying
8. Study issues
9. Developmental issues
10. Grief and loss

What concerns children of different ages?

Relationships with family along with emotional and/or behavioural management feature as major concerns for children and young people of all ages. To follow is a list of the top 10 concerns for each age group and gender during 2007.

Differences of particular note are:

- For children up to 14 years of age, peer relationships, bullying, child abuse and grief feature more prominently than for older ages.
- Mental health issues, partner relationships and drug and/or alcohol use become increasingly more common concerns for older age groups.
- For older adolescents and young adults, mental health, suicide, homelessness and self-image issues feature more strongly than for younger clients.
Top 10 concerns for each age group and gender

Female 5-9 years
1. Family relationships
2. Bullying
3. Relationships with friends and peers
4. Emotional and/or behavioural management
5. Child abuse
6. Grief and loss
7. Domestic violence
8. Physical health
9. Loneliness
10. Development issues

Male 5-9 years
1. Family relationships
2. Bullying
3. Emotional and/or behavioural management
4. Child abuse
5. Relationships with friends and peers
6. School related authority
7. Mental health issues
8. Grief and loss
9. Domestic violence
10. Study issues

Female 10-14 years
1. Family relationships
2. Relationships with friends and peers
3. Emotional and/or behavioural management
4. Bullying
5. Child abuse
6. Partner relationships
7. Mental health issues
8. Grief and loss
9. Suicidality
10. Pregnancy issues

Male 10-14 years
1. Family relationships
2. Bullying
3. Emotional and/or behavioural management
4. Child abuse
5. Relationships with friends or peers
6. School related authority
7. Partner relationships
8. Mental health issues
9. Homelessness
10. Developmental issues

Female 15-18 years
1. Family relationships
2. Emotional and/or behavioural management
3. Mental health issues
4. Partner relationships
5. Relationships with friends and peers
6. Child abuse
7. Suicidality
8. Homelessness
9. Pregnancy issues
10. Eating or weight concerns

Male 15-18 years
1. Partner relationships
2. Family relationships
3. Relationships with friends and peers
4. Emotional and/or behavioural management
5. Homelessness
6. Mental health issues
7. Sexual orientation
8. Drug and alcohol issues
9. Child abuse
10. Study issues

Female 19-25 years
1. Mental health issues
2. Partner relationships
3. Emotional and/or behavioural management
4. Family relationships
5. Relationships with friends and peers
6. Suicidality
7. Child abuse
8. Grief and loss
9. Eating behaviours
10. Physical health

Male 19-25 years
1. Partner relationships
2. Mental health issues
3. Emotional and/or behavioural management
4. Family relationships
5. Drug and alcohol issues
6. Homelessness
7. Relationships with friends or peers
8. Suicidality
9. Physical health
10. Grief and loss
<table>
<thead>
<tr>
<th>PROBLEM</th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INTERPERSONAL RELATIONSHIPS</strong></td>
<td>45.1%</td>
<td>42.0%</td>
<td>40.5%</td>
<td>39.2%</td>
<td>39.5%</td>
<td>38.0%</td>
<td>35.5%</td>
</tr>
<tr>
<td>Family</td>
<td>17.5%</td>
<td>16.8%</td>
<td>16.6%</td>
<td>16.7%</td>
<td>16.7%</td>
<td>17.4%</td>
<td>16.9%</td>
</tr>
<tr>
<td>Friends</td>
<td>18.1%</td>
<td>15.4%</td>
<td>14.4%</td>
<td>14.1%</td>
<td>13.4%</td>
<td>12.1%</td>
<td>9.8%</td>
</tr>
<tr>
<td>Partners</td>
<td>9.5%</td>
<td>9.9%</td>
<td>9.5%</td>
<td>9.4%</td>
<td>9.4%</td>
<td>8.5%</td>
<td>9.0%</td>
</tr>
<tr>
<td><strong>SEX RELATED</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual Activity</td>
<td>3.3%</td>
<td>3.6%</td>
<td>3.2%</td>
<td>2.3%</td>
<td>1.8%</td>
<td>1.5%</td>
<td>1.3%</td>
</tr>
<tr>
<td>Contraception</td>
<td>0.9%</td>
<td>0.9%</td>
<td>1.0%</td>
<td>0.7%</td>
<td>0.7%</td>
<td>0.5%</td>
<td>0.4%</td>
</tr>
<tr>
<td>Pregnancy</td>
<td>3.8%</td>
<td>3.6%</td>
<td>3.6%</td>
<td>3.2%</td>
<td>2.7%</td>
<td>2.6%</td>
<td>2.2%</td>
</tr>
<tr>
<td>STDs</td>
<td>0.5%</td>
<td>0.5%</td>
<td>0.5%</td>
<td>0.4%</td>
<td>0.4%</td>
<td>0.4%</td>
<td>0.3%</td>
</tr>
<tr>
<td><strong>ALCOHOL/DRUGS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol Use</td>
<td>0.5%</td>
<td>0.5%</td>
<td>0.6%</td>
<td>0.5%</td>
<td>0.5%</td>
<td>0.4%</td>
<td>0.5%</td>
</tr>
<tr>
<td>Drug Use</td>
<td>2.8%</td>
<td>2.6%</td>
<td>2.4%</td>
<td>1.9%</td>
<td>1.8%</td>
<td>1.7%</td>
<td>1.5%</td>
</tr>
<tr>
<td><strong>SELF CONCEPT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Developmental Issues</td>
<td>1.8%</td>
<td>2.1%</td>
<td>2.1%</td>
<td>1.8%</td>
<td>1.6%</td>
<td>1.6%</td>
<td>1.6%</td>
</tr>
<tr>
<td>Sexual Orientation</td>
<td>1.4%</td>
<td>1.7%</td>
<td>1.7%</td>
<td>1.6%</td>
<td>1.5%</td>
<td>1.3%</td>
<td>1.3%</td>
</tr>
<tr>
<td><strong>CHILD ABUSE</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional Abuse</td>
<td>0.5%</td>
<td>0.4%</td>
<td>0.4%</td>
<td>0.5%</td>
<td>0.6%</td>
<td>0.6%</td>
<td>0.6%</td>
</tr>
<tr>
<td>Neglect</td>
<td>0.3%</td>
<td>0.3%</td>
<td>0.2%</td>
<td>0.2%</td>
<td>0.2%</td>
<td>0.2%</td>
<td>0.2%</td>
</tr>
<tr>
<td>Physical Abuse</td>
<td>2.1%</td>
<td>2.1%</td>
<td>2.0%</td>
<td>2.1%</td>
<td>2.2%</td>
<td>2.2%</td>
<td>2.4%</td>
</tr>
<tr>
<td>Sexual Abuse</td>
<td>1.7%</td>
<td>2.0%</td>
<td>1.8%</td>
<td>1.8%</td>
<td>1.7%</td>
<td>2.0%</td>
<td>2.0%</td>
</tr>
<tr>
<td><strong>SCHOOL</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School Authority</td>
<td>11.1%</td>
<td>10.3%</td>
<td>10.2%</td>
<td>8.7%</td>
<td>7.7%</td>
<td>7.9%</td>
<td>7.4%</td>
</tr>
<tr>
<td>Bullying</td>
<td>1.5%</td>
<td>1.4%</td>
<td>1.2%</td>
<td>1.0%</td>
<td>0.8%</td>
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</table>
Data collection and limitations

Kids Helpline counsellors record non-identifying information at the end of every telephone or online session. There are a maximum of 32 different fields where data may be logged. However, only 10 are mandatory (including date, time, length of session, cultural background, frequency of contact, main problem, problem severity, outcome, whether the session related to suicide in any way and whether the client engages in self-injury).

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

**Anonymity** – Kids Helpline markets itself to young people as an anonymous service – frequently clients choose not to reveal details of themselves, particularly those that might in their view lead to identification.

**Sensitivity of information** – the nature of some contacts is such that direct information gathering is either contraindicated or proves difficult.

**The length or nature of the call** – is such that even basic data collection is impossible or irrelevant.

Other issues that need to be considered in relation to the data within this report include:

**Repeat contacts** – children and young people are free to use the service as often as they need. Therefore, data reported may include repeat contacts made by individuals across a period of time. Indeed, for many young people, the sense of connectedness Kids Helpline provides is a key preventative tool for serious issues such as mental health and self-harm.

**Multiple problems** – many young people’s issues are multifaceted, spanning across more than one of the 35 problem types. Counsellors record the one problem type on which most of the counselling time was spent.

**Missing data** – Kids Helpline has adopted a policy of recording data in each field in such a way as to identify incomplete, unknown or blank responses. All statistical information reported is therefore based on those instances where the information is known.

**Statistical significance** – all stated data comparisons have been assessed against a 95% confidence interval.
BoysTown is a company limited by guarantee.

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Kids Helpline is a service of BoysTown