Awareness of the 116 111 child helpline number

A report on the findings of an evaluation in five European countries

Dr Cristian Dogaru, Professor Emma Bond and Professor Tink Palmer
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Executive summary

- This report presents the findings of an evaluation, investigating the awareness of the European regionally-harmonised child helpline number 116 111 among a number of European institutions and stakeholders, as well as among national stakeholders and general public, separately for adults and young people below 25 years of age, in five European countries: Greece, Portugal, Romania, Slovakia and Sweden. The evaluation, commissioned by Child Helpline International, was undertaken by the University of Suffolk between May and July 2017.

- According to the United Nations Convention on the Rights of the Child (UNCRC), children have the right to an adequate standard of living (Article 27), to health and healthcare (Article 24) and to education (Article 28); that governments must do all that they can to make sure that children can enjoy their rights (Article 4), without discrimination (Article 2); that they be protected from violence, abuse and neglect (Article 19) and from sexual exploitation (Article 34) and other forms of exploitation (Article 36); that they have a right to juvenile justice and the right to legal assistance (Article 40); to information from the media (Article 17) and that they have a right to be listened to and that their views should be respected (Article 12).

- The EU Agenda for the Rights of the Child, presented in 2011, reaffirms the strong commitment of all EU institutions, and of all EU Member States, to promoting, protecting and fulfilling the rights of the child in all relevant EU policies. In 2007, The European Commission Decision 2007/116/EC established the 116 111 European harmonised number for child helplines. The assignment and activation of this number is now established in the majority of EU Member States.

- Child helplines provide a valuable and much needed service to children around the world. In 2016, the five child helplines who participated in this evaluation answered 215,445 contacts from children and young people.

- The aim of the evaluation was to explore how aware stakeholders and general public (both adults and young people) were of the regionally harmonised number 116 111 for child helplines in five European countries: Greece, Portugal, Sweden, Romania and Slovakia. The evaluation used online surveys in each country to ascertain the awareness of the 116 111 child helpline number amongst children and young people, adults and national stakeholders. It also adopted the use of an online survey for European institutions and stakeholders. The surveys were distributed with an in-kind contribution of Facebook, a partner of Child Helpline International.

- As of May 2017, there are currently 35 members of Child Helpline International in 28 EU Member States of which 24 operate the 116 111 number. The five countries who participated in the evaluation volunteered to take part and were chosen for diversity of maturity, size and geographic location in Europe. This report additionally outlines the key characteristics of each child helpline through an analysis of the operational data provided by the child helplines to inform the evaluation.

- The results of the online survey found that 23% of the 706 young people aged up to 25 years who responded to our questionnaire reported that they recognised and knew what the 116 111 child helpline number stood for and 52% were aware of the

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1 The category “children and young” people was identified as 0-18 years of age and 18 to 25 years of age as per the definitions of the participating child helplines.
existence of child helplines, even if they did not recognise the 116 111 number. 20% of the 1,781 adults who responded to the survey reported that they recognised and knew what the 116 111 child helpline number stood for. All European 15 stakeholders were aware of child helplines, with 60% of them recognising the 116 111 number. Of the 38 national stakeholders who agreed to participate only 2 (5%) were not aware of child helplines operation in their countries, while 14 (37%) were aware of the 116 111 number.

- 16% of the young people who took part in the survey and eight per cent of adults responded that they had become aware within the last year of the 116 111 number and the services they provide. Six of the 15 European institutions and stakeholders (40%) and six of the 38 national stakeholders (16%) who took part in the survey reported that their awareness of the services provided by 116 111 child helplines had also increased in the last year.

- The reasons for children and young people contacting child helplines varies considerably from country to country, but the main reason for contacting the child helplines in 2016 in the five countries studied was mental health (17,901 records). Other main reasons were family relationships (15,040 records); peer relationships (10,526 records); school related issues (6,838 records); bullying (4,761 records) as well as sexuality and sexual awareness (5,069 records).

- Ensuring that children are aware of the 116 111 number and know that they can contact the child helpline for confidential support and advice is essential.

Acknowledgments

The University of Suffolk would like to express their gratitude and appreciation to both Child Helpline International and the five child helplines who took part in the evaluation, for their willingness to work collaboratively throughout the evaluation process: Child Helpline (National Helpline for Children SOS 1056/European Helpline for Children and Adolescents 116 111 – The Smile of the Child) in Greece; SOS Criança - Instituto de Apoio à Criança in Portugal; Telefonul Copilului in Romania; Linka Detskej Istoty in Slovakia, and BRIS in Sweden. This participatory approach was key to the success of the study overall. The University also wishes to express their gratitude and appreciations to all participants in the study, who made this project possible.
1. **Introduction**

Child Helpline International was identified in 2015 as a strategic partner in strengthening the role of child helplines in European Union (EU) Member States and entered into a three-year Framework Partnership Agreement with DG Justice of the European Commission. The Framework Partnership Agreement 2015-2017 focused on three main objectives:

1. to raise awareness of the 116 111 regionally-harmonised number in all EU Member States;
2. to strengthen child protection systems in EU Member States; and,
3. to strengthen child helplines in EU Member States.

In order for child helplines to provide help, advice and support to children and young people effectively, it is essential that children and young people are actually aware of the services that these child helplines can offer, and ideally of the 116 111 number, where applicable. 116 111 is a European-wide harmonised number for child helplines, which is operational in certain EU Member States and Child Helpline International is working towards its operationalisation and harmonisation in all EU Member States. Child Helpline International, therefore, commissioned an evaluation of the awareness of the child helpline 116 111 number (as outlined in Objective 1 above) in five countries where the child helpline is accessed via the common European number for child helplines.

The University of Suffolk undertook this evaluation over a twelve-week period to explore the awareness of the regionally-harmonised 116 111 number for child helplines among European institutions and stakeholders, as well as national stakeholders, adults, and children and young people in five European countries – Greece, Portugal, Romania, Slovakia and Sweden. In order to ascertain the level of public and stakeholder awareness in each participating country, the evaluations adopted the use of anonymous online surveys in each nation and, as child helplines collect monitoring data on who used their services (Hepburn et al., 2014), the operational data supplied by the child helplines provided contextual information on each participating country’s child helpline.

This research provides evidence of the awareness that children and young people have of the harmonised child helpline 116 111 number, the child helpline’s services, the public’s awareness in general, as well as that of national and European institutions and stakeholders. It also, drawing on data supplied by the five child helplines, outlines the numbers of contacts the five participating countries had from children and young people in 2016 and the reasons why children and young people contacted the child helplines. This report presents the main findings of the evaluation undertaken in June – July 2017 by the University of Suffolk, UK. The report is structured into four sections:

*Section 1* – outlines the evaluation itself, the aims and objectives of the evaluation, the methodological approach adopted, and some of the study’s limitations.

*Section 2* – provides a contextual background to the evaluation. It considers previous research on helplines, focusing specifically on child helplines. An outline of the purpose, use and services offered by the child helplines is also provided in this section, to highlight the
work that the child helplines do and Child Helpline International’s specific role in supporting their work.

Section 3 – presents the main findings of the evaluation overall. It considers the awareness of the regionally-harmonised 116 111 child helpline number in relation to the four different stakeholder groups who reported to the online questionnaire from the five participating countries (Greece, Portugal, Romania, Slovakia and Sweden) and from four groups of stakeholders (European institutions and stakeholders, national stakeholders, children and young people under the age of 25, and adults over the age of 25). It is important to note that the 116 111 number is promoted and used in Europe only. The findings of the evaluation are presented overall, but additionally an analysis of the operational data provided by the child helplines is presented specifically in relation to each participating child helpline.

Section 4 – draws together the conclusions of the evaluation and makes some recommendations for increasing awareness of the 116 111 child helpline number in order to support the valuable work of child helplines across the globe.

1.1. Research focus

The purpose of the research was to evaluate the public’s awareness of the 116 111 child helpline number and their understanding of what services these child helplines offer. 116 111 is the European harmonised number dedicated to child helplines. There are currently 28 Member States of the EU operating a child helpline, 24 of which are using the regionally harmonised number 116 111. It is important to note that not being aware of the European child helpline number 116 111 does not mean that children are unable to contact their child helpline. Child helplines can be reached through other means of communication or, in some cases, through another national number. However, this research focuses specifically on the European harmonised number for child helplines 116 111. Working in close collaboration with Child Helpline International and the participating child helplines, the evaluation focused on five countries with child helplines operating and promoting the 116 111 number, namely Greece, Portugal, Romania, Slovakia and Sweden. These countries were selected to cover a wide geographic reach across Europe. The child helplines all volunteered to take part in the evaluation and were also selected to offer a broad range of maturity, size and service delivery. The research was funded by DG Justice, European Commission.
Furthermore, the evaluation focused, as requested by Child Helpline International, on two different target groups:

1. decision/policy makers and national governments in EU Member States; for example, Ministries of Social Welfare, Children Ombudsmen, MEP’s, regulatory authorities and telecom operators
2. children, young people and adults in EU Member States.

Specifically, the evaluation set out to investigate:

**RQ1:** What proportion of children, young people and adults recognise and know what the 116 111 number stands for?

**RQ2:** What proportion of children, young people and adults report that they have heard about the 116 111 and the child helpline in the last year?

**RQ3:** What proportions of decision makers and national governments have heard about the 116 111 and the child helpline in the last year?

**RQ4:** How many and what types of contacts from children and young people were responded to by each of the five child helplines in 2016?

**RQ5:** What reasons do children and young people have for contacting each of the five child helplines in 2016?

The answers to these questions and the conclusions drawn from these answers are presented in Section 4, page 30.
1.2. Methodology

The evaluation used anonymous surveys online among children and young people (up to 25 years), adults (above 25 years of age) in each of the five participating countries and to European institutions and stakeholders generally. The five countries were chosen by Child Helpline International on the basis that:

- The child helplines within these countries are well-established child helplines
- The child helplines within these countries operate the 116 111 number
- The child helplines within these countries volunteered to take part in the evaluation and to share useful data and information
- The child helplines are located within an EU Member State
- The child helplines represent a range of different sizes of helplines
- The child helplines offer a range of service delivery (for example, working times) and different length of times that they had been established, ranging from 1971 (Sweden) to 2001 (Romania).

The questions were initially developed in English in close consultation with Child Helpline International’s team. The Youth Advisory Council of Child Helpline International reviewed the questions directed to children and young people. The questions were then piloted with different stakeholder groups, including children and young people of various age groups. Once finalised, the questions were then translated into each nation’s main language and sent to the child helplines in each participating country for final checking. The survey was launched on 5th June and remained open until 8th July 2017. The survey was promoted through child helpline networks, professional and personal networks; the child helpline network and through social media, namely Facebook with an in-kind contribution by Facebook. Furthermore, a data sharing agreement between the participating child helplines and the University of Suffolk enabled the operational data from each participating child helpline to be analysed and included as part of the evaluation. The operational data from each participating country was not used to assess each nation’s awareness of the 116 111 number, but rather to set the stage and provide the context of service delivery in each country.

Child Helpline International provided additional support for the evaluation, too. They liaised initially with all their member child helplines, hosted the ‘kick off’ meeting in Amsterdam, selected the final five child helplines, coordinated the launch of the survey, as well as promoted it. They also provided the research team with previous evaluations, related research reports and annual statistical data.

1.3. Limitations

Like all research methods, online survey research has benefits and drawbacks. It can be challenging to ensure that the study adequately addresses its objectives while balancing time and cost constraints (Sue and Ritter, 2007). With this in mind, this report presents the findings of the evaluation, but it should also be noted that the evaluation, like most studies, has a number of limitations.
Firstly, only five child helplines (out of the 35 member child helplines of Child Helpline International in the 28 EU Member States) were included in the evaluation and, as such, generalisations as to the extent of public awareness in other EU Member States or across Europe cannot be induced from this study. Secondly, the collection of data from children and young people overlapped in some of the surveyed countries with the summer holidays, which might have affected the response rates, since part of the advertising for the study was done through schools. Thirdly, internet surveys require that target respondents have access to the internet (Sue and Ritter, 2007) thus potentially excluding responses from those who do not; in addition the campaign through social media cannot reach children younger than 13 years, since they are not supposed to be using social media networks. We were also anxious not to overburden the participants with too many demographic questions, just as the data collected routinely by the child helplines does not reflect diversity in terms of ethnic minorities, disability and sexuality. Fourthly, comparisons between the participating countries should be made cautiously, as the operational data provided by the child helplines highlights the very different nature and characteristics of each child helpline. Finally, it should be noted that this evaluation focuses only on the awareness of the 116 111 European number dedicated to child helplines and does not consider the effectiveness of the child helplines themselves in supporting children and young people from their perspective.

2. Background

2.1. Child Helplines

Children all over the world seek support on child helplines for the serious and often pressing matters they face. Abuse and violence, mental health issues, peer relations, sexuality and family matters are all subjects that are frequently discussed on child helplines. Staff at child helplines frequently discuss children’s matters concerning physical health, substance use and, albeit less frequently, commercial exploitation, HIV/AIDS and discrimination. A number of the different problems, as distinguished by child helplines, are encountered by these psychological services for youth in every part of the world. (Fukkink et al., 2016: 514).

The EU in its founding Treaty (Art. 3) commits to promoting and protecting the rights of the child, and bases all its internal policies and external relations on the full respect and promotion of the United Nations Convention on the Rights of the Child (UNCRC). The UNCRC enshrines children’s rights to protection as well as children’s rights for participation, to be listened to and to be heard. Article 12 of the UNCRC lays out children’s rights to be heard (The United Nations, 1989, art. 12); child helplines fulfil this right by giving children a voice, involving them in decision-making, empowering them to develop their own solutions to their problems, as well as being aware of their rights and actively shaping their own lives. Article 3 of the UNCRC maintains that “States Parties undertake to ensure the child such protection and care as is necessary for his or her well-being, taking into account the rights and duties of his or her parents, legal guardians, or other individuals legally responsible for him or her, and, to this end, shall take all appropriate legislative and administrative matters” (The United Nations, 1989, art. 3). According to the United Nations Children’s Fund (UNICEF), a child protection system is “the set of laws, policies, regulations and services needed across all sectors – especially social welfare, education, health, security and justice – to support prevention and response to protection-related risks” (UNICEF, 2008). Child helplines provide valuable support and advice to children and young people across the globe and are part of a larger system to protect children from harm.
Following the Lisbon Treaty coming into force in 2009, the European Fundamental Rights Charter has had the same legal value as the EU treaties. Hence, the charter is part of the EU’s constitutional basis, and gives the EU its own tool to promote children’s rights. Article 24 of the Charter spells out the rights of the child with specific mention of the child’s best interests and their right to freedom of expression. The EU Agenda on the Rights of the Child, COM/2011/60, defines a comprehensive framework to support children’s rights in and outside Europe, seeking a comprehensive and multi-stakeholder approach and for stronger children participation. Regulation (EU) No 1381/2013 of the European Parliament and the Council of the EU sets out clear goals for protecting children’s rights in the Rights, Equality and Citizenship (REC) Programme for the period 2014 to 2020, focusing on promoting the rights of the child and protecting children from harm and violence. The 9th European Forum on the Rights of the Child looked at the role of integrated child protection systems with a view to developing EU guidance for Member States. Accordingly, the Reflection Paper, identifying the 10 common principles of national protection systems in EU Member States, explicitly mentions child helplines as child-sensitive and accessible complaint and reporting mechanisms that should be integrated in national child protection systems.

“The idea of a helpline builds on a concept firmly established in other fields of social care and describes a service that provides listening and emotional support, as well as information to assist users with issues they may encounter in their lives” (Dihn et al., 2016: 2). Potter and Hepburn (2003) argue that helplines are an important area for academic study. However, little academic research has been undertaken to date. The studies published so far demonstrate the very important and valuable work that helplines do. Ben-Ari and Azaiza’s (2003) study, for example, found that callers perceive a significant improvement in the severity of the problem following the helpline conversation.

Child helplines around the world offer a sympathetic ear to children seeking advice and support. The helplines offer easy access to an anonymous and confidential medium, often as a national telephone counselling service with a toll-free or low-cost number. The various child helplines offer social support, solutions to problems and referrals for emergency situations to a heterogeneous population with different questions and needs (Fukkink et al., 2016: 510).

Research currently being finalised by van Dolen and Sindahl (forthcoming) considers the impact of child helplines in five countries and, although the final results were not available at the time of writing this report, the impact report from Belgium evidences excellent results. Van Dolen and Sindahl’s study found that 72% of children reported being immediately helped after contacting Belgium’s child helpline, Awel. 60% of children reported that their contact still had had a positive impact two weeks after their engagement with Awel, and 89% reported feeling that they felt that they had been listened to and felt heard by the child helpline. It is also interesting to note that in the forthcoming study, 78% of the children reported an immediate improvement in wellbeing and 90% of the children reported being satisfied with the service.

2.2. Child Helpline International

Child Helpline International was founded in 2003 when the first global meeting of child helplines was held in The Netherlands. A number of 49 child helplines initially convened to

2 Currently unpublished research report provided by Child Helpline International to the evaluation team.
form Child Helpline International. The promotion and protection of children’s rights are at the centre of the individual child helplines’ and Child Helpline International’s work. By strengthening child helplines and their role in child protection systems and by stimulating new partnerships with international and national actors, Child Helpline International contributes to building a safer environment for children where their needs are respected and fulfilled, and supports the advancement of children’s rights by advocating for the importance of an anonymous, unbiased, professional and accessible service to children seeking any kind of assistance.

Child Helpline International is the global network of 181 organisations in 147 countries (updated May 2017). Only in 2015, the network received more than 20 million children and young people in need of care and protection. Child Helpline International supports the creation and strengthening of national toll-free child helplines worldwide, and by aggregating and interpreting the data coming in from child helplines, they use the child helpline data and knowledge to highlight gaps in child protection systems and advocate for the rights of children. Millions of individual stories and reports come into Child Helpline International to form a detailed picture of how and where in the world children and young people are suffering injustice, abuse and dangers. Child Helpline International present this data, illustrated by real life case studies, to influence policy makers, to significantly impact the changes that improve understanding and the conditions for children in meaningful ways globally,regionally and locally.

Child helplines in 24 EU Member States, two EU candidate states and two non-EU Member States are using the regionally-harmonised number 116 111. The “116 + 3 digits” is a range of easy-to-remember and free-of-charge phone numbers to assist children and adults in need across Europe. The European Commission reserved five short numbers with single format 116 + 3 digits for child helplines that should be accessible to everyone in Europe. The number 116 111 is specifically for children who seek assistance and need someone to talk to. The service helps children in need of care and protection and links them to the appropriate services and resources, providing children with an opportunity to express their concerns and talk about issues directly affecting them\(^3\).

Child Helpline International works in close partnerships with the International Telecommunication Union (ITU), with partners from the Information and Communication Technology (ICT) sector and with GSMA, an industry association representing the interests of nearly 800 mobile operators and 300 companies from the broader mobile ecosystem worldwide, in order to operationalise the 116 111 number in Europe and provide training and technological support to national child helplines. Through their “Free Our Voices” campaign, Child Helpline International secured partnership and support around a number of key points, including waiving costs from incoming calls, developing and maintaining the infrastructure needed to run the child helplines, directing calls to the right place, training child helpline staff on subjects such as mechanisms for quality control or child protection online, and developing and implementing new ways for children and young people to reach the child helplines, such as specialised apps for mobile communication. GSMA especially has been instrumental in

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helping to overcome technical issues around connectivity with all mobile operators to ensure that the number is toll free for all callers.

Article 12 of the UNCRC (The United Nations, 1989, art. 12) emphasises the importance of children’s participation in matters affecting them, and Child Helpline International’s members listen to children and help them help each other. This rich tapestry of children’s lived experiences informs how society can make a difference in troubled young lives as Child Helpline International collects and shares the best practices from child helplines around the world – from how to counsel an abused child, to how best to staff a call centre and provide up-to-date training. Child Helpline International also supports individual child helplines by sharing information and knowledge from the best of them with all of them, so they can do their critically important work even better.

As noted above, for the period 2015-2017, Child Helpline International entered into a three-year Framework Partnership Agreement with DG Justice of the European Commission as a strategic partner to promote and protect the rights of children by strengthening the role of child helplines in EU Member States. In 2007, the European Commission decided to reserve the national numbering range beginning with ‘116’ for harmonised services of social value so that citizens of the EU, including travellers and disabled users, would be able to access certain services that have a social value by using the same recognisable numbers in all Member States. The idea was that the combination ‘same number – same service’ ensures that a specific service in whichever Member State it is provided is always associated with a specific number within the EU. This provides the service with a pan-European identity to the benefit of the European citizens who will know that the same number dialled will give access to the same type of service in different Member States. This measure encourages pan-European services to develop. Thereby, the number 116 111 was reserved for child helplines to provide psycho-social support services and referrals services to children in need.

Dihn et al., (2016: 10) helpfully summarise the characteristics of helplines as:

- anonymity reduces the psychological barrier that prevents many from seeking help
- callers have more control since they can terminate the interaction whenever they choose
- accepting calls from anyone on any topic may ease the decision to seek help
- child helplines are staffed by volunteers or professionals, who have proven their effectiveness in helping people in crisis due to their spontaneity, warmth and authenticity
- in many cases, assistance is available at the callers’ convenience, 24 hours a day
- geographical barriers are easily bridged since callers may receive help or support wherever their location.

The number 116 111 is currently operational in 24 EU (EU) Member States, two EU candidate states and two non-EU Member States. Children seeking for help through the 116 111 number are helped by professionally trained staff. 116 111 is operated by national child helplines, which can be non-profit organisations, governmental institutions or social enterprises. The website www.116111.eu provides an overview of all child helplines operating in Europe and the ones operating the 116 111 number. The confidential nature of
such services is highly valued (Danby et al., 2011 and Fukkink et al., 2016). The services provided by child helplines were originally based on confidential one-to-one telephone interaction but have now, in many countries, been extended to one-to-one web-based online chat (Fukkink and Hermanns, 2009) and in some countries app-based communication is also offered (for example, Childline in the UK).

Child helplines across Europe use a variety of different methods to ensure that children can access help, find someone to talk to, and get the information they need. To ensure that children can find support in various ways, alternatives include: telephone services; mobile phone; text messaging; apps; online via email; one-to-one-chat and online forums; drop-boxes in schools and community centres; postal services; or radio and mobile outreach units. It is important to note that child helplines also reach out to those who may not be able to access their services, including ‘street’ children, children with disabilities and children in marginalised areas or communities.

As evidenced in the data from each of the five participating countries, child helplines comprise a variety of different types (see section 3.1). However, as Dihn et al. (2016: 130) suggest, all have in common the provision of a confidential service that offers information, support, guidance and referral. Children and young people contact the child helpline seeking answers to diverse, often urgent questions concerning different subjects, including “abuse and violence, discrimination, family matters, homelessness, physical or mental health, peer problems and sexuality” (Fukkink et al., 2016: 510) and ways young people seek help vary and are influenced by gender, age, culture, ethnicity and sexuality (Franks and Medforth, 2005).

Many child helplines carefully evaluate the effectiveness of their services, collecting data on characteristics of callers such as age, sex, sexual orientation and ethnicity, volume of calls, repeat callers and reasons for calling (see, for example, the data from the five child helplines in section 3.1 and Child Helpline International publications). Some child helplines have also evaluated their service by adopting a child-centred approach through consulting with children and young people (for example, NSPCC in the UK and Kids Help Line in Australia). Such studies are vital in evidencing the positive impact that child helplines can have in children’s lives, especially in relation to how children feel after contacting a child helpline. Fukkink and Hermanns’ (2009: 764) study, for example, found that children who contacted the Dutch child helpline, Kindertelefoon reported “an increase in well-being immediately after the call or chat session, and a decrease in the perceived burden or the problem they had sought support for” which further evidences the importance of listening to children as service users. Furthermore, as noted above, in van Dolen and Sindahl’s (forthcoming) research, the vast majority of children positively reported on the emotional and instrumental support they received, and felt both listened to and also empowered, thanks to contacting the Belgium’s child helpline, Awel.

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4 https://www.childline.org.uk/toolbox/for-me/
6 Available from https://www.childhelplineinternational.org/data-overview/
In order for children and young people to be able to contact the child helpline, they need to be aware that the child helpline exists, how to make contact and how the child helpline may be able to help and support them. Therefore, “awareness-raising is a significant factor that contributes to the level of publicity of child helplines’ work. Awareness-raising activities are recognised as the most efficient and effective means of information communication to the general public” (Dihn et al., 2016: 36). It is the awareness of the child helplines and the 116 111 number that is the focus of the evaluation presented here.

3. Findings

3.1. Overall findings

The five child helplines that took part in this evaluation answered 215,445 contacts from children and young people in 2016. These contacts include those which lead to the child helpline providing direct assistance or active listening, as well as silent, abusive and other non-counselling calls. This section of the report presents the findings from the data provided by the five child helplines and then presents the findings from the online survey.

Child Helpline International’s report *The Importance of Child Helplines for Child Protection in Europe* published in 2015 (page 25) states: “A best practice for child helplines is to be fully available for children at all times, commonly referred to as 24/7 access, using all possible channels of communications”. Access across the five child helplines in this evaluation varied considerably in both times and days that the child helplines were available and in the channels of communication offered to children and young people, as detailed in Table 1 below. In particular, all child helplines offer a telephone service and email, two additionally offer walk in face-to-face help and support (Greece and Portugal) and three (Portugal, Slovakia and Sweden) also offer online chat. Table 2 below presents the number of specific reasons the national child helplines were contacted during 2016. To note that the number of reasons presented in the table represents the number of separate instances of the specific reasons, and not the number of children making contact; children can have more than one reason to contact a child helpline, or the child helpline can record the contact according to one or more categories. It is interesting to note that Sweden recorded 17,901 contacts concerned with mental health issues, but Greece recorded no calls related to mental health, and Portugal only 81. Peer relationship issues also provide an interesting topic for consideration as Slovakia and Sweden recorded 5,019 and 4,720 respectively. However, in Portugal, only one call related to peer relationships was recorded. Cyberbullying is also an interesting category as Beckman et al.’s (2013) study in Sweden found that 8.8% of adolescents had been cyberbullied. And yet, while Slovakia recorded 175 calls related to cyberbullying, Sweden did not record any.

Of the five child helplines, the most established is Sweden, which was set up in 1971. Romania represents the newest child helpline in the evaluation, set up in 2001. In the other countries, child helplines were established in 1988 in Portugal, in 1996 in Slovakia and the first child helpline in Greece in 1997.

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### Table 1: Comparison of child helplines; availability and ways of contacting child helplines

<table>
<thead>
<tr>
<th>Country</th>
<th>Child helpline</th>
<th>Availability</th>
<th>Ways of contacting the child helpline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greece – established in 1997 and in 2015(^{10}), respectively</td>
<td>The Smile of the Child helpline (National Helpline for Children SOS 1056/European Helpline for Children and Adolescents 116111)</td>
<td>24 hours a day, seven days a week</td>
<td>Telephone child helpline; email and walk-in face to face</td>
</tr>
<tr>
<td>Portugal – established in 1988</td>
<td>SOS Criança - Instituto de Apoio à Criança (IAC)</td>
<td>9am – 7pm, Monday to Friday</td>
<td>Telephone child helpline; email; online chat and walk-in face to face</td>
</tr>
<tr>
<td>Romania – established in 2001</td>
<td>Telefonul Copilului</td>
<td>8am – midnight, seven days a week</td>
<td>Telephone child helpline and email</td>
</tr>
<tr>
<td>Slovakia – established in 1996</td>
<td>Linka Detskej Iстотy</td>
<td>24 hours-a-day, seven days a week</td>
<td>Telephone child helpline; email and online chat</td>
</tr>
<tr>
<td>Sweden – established in 1971</td>
<td>BRIS</td>
<td>9am – 9pm Monday-Friday and from 2pm – 9pm at the weekend</td>
<td>Telephone child helpline; email and online chat</td>
</tr>
</tbody>
</table>

\(^{10}\) The National Helpline for Children SOS 1056 was established in 1997 and the European Helpline for Children and Adolescents 116 111 was established in 2015.
Table 2: Reasons children and young people had for contacting the child helplines in 2016

<table>
<thead>
<tr>
<th></th>
<th>Greece 25,779</th>
<th>Portugal 1,078</th>
<th>Romania 24,454</th>
<th>Slovakia 49,444</th>
<th>Sweden 118,615</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical abuse</td>
<td>773</td>
<td>148</td>
<td>800</td>
<td>226</td>
<td>1,217</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>21</td>
<td>31</td>
<td>102</td>
<td>187</td>
<td>710</td>
</tr>
<tr>
<td>Emotional abuse</td>
<td>61</td>
<td>59</td>
<td>759</td>
<td>111</td>
<td>1,034</td>
</tr>
<tr>
<td>Neglect</td>
<td>958</td>
<td>168</td>
<td>728</td>
<td>159</td>
<td>658</td>
</tr>
<tr>
<td>Other forms of abuse</td>
<td>773</td>
<td>27</td>
<td>366</td>
<td>147</td>
<td>209</td>
</tr>
<tr>
<td>Online Child sexual</td>
<td>23</td>
<td>2</td>
<td>0</td>
<td>67</td>
<td>0</td>
</tr>
<tr>
<td>exploitation and abuse</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Addiction</td>
<td>23</td>
<td>13</td>
<td>121</td>
<td>1,380</td>
<td>242</td>
</tr>
<tr>
<td>Basic needs</td>
<td>4,434</td>
<td>62</td>
<td>364</td>
<td>35</td>
<td>0</td>
</tr>
<tr>
<td>Bullying</td>
<td>619</td>
<td>30</td>
<td>1,545</td>
<td>1,087</td>
<td>1,480</td>
</tr>
<tr>
<td>Cyberbullying</td>
<td>0</td>
<td>0</td>
<td>9</td>
<td>175</td>
<td>0</td>
</tr>
<tr>
<td>Children on the move/Child migration</td>
<td>216</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Commercial exploitation and abuse</td>
<td>1,780</td>
<td>11</td>
<td>242</td>
<td>11</td>
<td>0</td>
</tr>
<tr>
<td>Children in conflict or disaster zones</td>
<td>783</td>
<td>0</td>
<td>186</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Discrimination</td>
<td>0</td>
<td>2</td>
<td>27</td>
<td>270</td>
<td>105</td>
</tr>
<tr>
<td>Family relationships</td>
<td>1,867</td>
<td>147</td>
<td>616</td>
<td>4,011</td>
<td>8,399</td>
</tr>
<tr>
<td>Harmful traditional practices</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>137</td>
</tr>
<tr>
<td>HIV/AIDS infected/ affected children</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Homelessness</td>
<td>373</td>
<td>0</td>
<td>89</td>
<td>111</td>
<td>0</td>
</tr>
<tr>
<td>Legal matters and juvenile justice</td>
<td>812</td>
<td>83</td>
<td>491</td>
<td>321</td>
<td>240</td>
</tr>
<tr>
<td>Parenting and child-rearing</td>
<td>2558</td>
<td>45</td>
<td>754</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Peer relationships</td>
<td>475</td>
<td>1</td>
<td>311</td>
<td>5,019</td>
<td>4,702</td>
</tr>
<tr>
<td>Physical health and healthcare</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>707</td>
<td>618</td>
</tr>
<tr>
<td>Psychosocial, mental health</td>
<td>0</td>
<td>81</td>
<td>2,194</td>
<td>1,562</td>
<td>14,064</td>
</tr>
<tr>
<td>School-related issues and education</td>
<td>226</td>
<td>28</td>
<td>37</td>
<td>2,292</td>
<td>4,245</td>
</tr>
<tr>
<td>Sexuality and sexual awareness</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>3108</td>
<td>1959</td>
</tr>
<tr>
<td>Information/ questions about the helpline</td>
<td>8,495</td>
<td>96</td>
<td>354</td>
<td>1,511</td>
<td>510</td>
</tr>
<tr>
<td>Other issues</td>
<td>0</td>
<td>47</td>
<td>261</td>
<td>3,044</td>
<td>10,395</td>
</tr>
</tbody>
</table>

11 For example: domestic abuse; corporal punishment; or gang-related violence. (It is interesting from the Greek child helpline data, there are 773 calls recorded as corporal punishment, 42 in Slovakia, but only seven in Portugal and none in Romania or Sweden.)
12 predominantly smoking related
13 for example, being used for begging
Note: the numbers in this table do not represent the actual number of children who received counselling services in 2016. Some contacts may be assigned to multiple, interrelated categories

3.2. European institutions and stakeholders

Awareness of 116 111

Dihn et al. (2016: 46) point out that “helplines work within an environment in which effective partnerships with multiple stakeholders are of great importance”. The online questionnaire was completed by 15 people, representing nine different European-level institutions and/or stakeholders: the European Union Agency for Fundamental Rights; the European Parliament; Missing Children Europe; Victim Support Europe; ILGA-Europe; Government child protection agencies; Save the Children International EU Office; the Council of Europe; and the Child Rights International Network. All participants were aware of the national helplines dedicated to supporting children and young people, and nine of them stated that they were aware of the unique 116 111 telephone number. Seven respondents had heard of 116 111 from working directly with Child Helpline International (Missing Children Europe; Victim Support Europe; ILGA-Europe; Save the Children International EU Office; Missing Children Europe; Council of Europe; Child Rights International Network). Five respondents had heard of 116 111 as the result of attending a conference. Four knew of 116 111 from reading about it in a report, and three as a result of social media. Six respondents (40%) declared that they know more about child helplines than they did a year before, while the other nine stated that knew about the same.

This result probably reflects that fact that of the nine respondents who stated that they knew about the same, six of these were from the group of respondents who knew about child helplines from their work with Child Helpline International. This, therefore, probably reflects positively on a sustained close-working relationship and collaboration with Child Helpline International.

Figure 1. European institutions and stakeholders’ awareness of child helplines and the 116 111 number

![Chart showing European institutions and stakeholders’ awareness of child helplines and the 116 111 number]

- 60%: I was aware of the existence of child helplines, but I did not know the phone number(s) they use
- 40%: I did know that many child helplines use the unique 116 111 number
Most European institution and stakeholder respondents (74%) stated that they actively promote the 116 111 number and that they will continue to promote the 116 111 services within their organisations. The ways in which the 116 111 number is promoted varies from organisation to organisation, as depicted in the examples below:

"We have made an MoU with the child helpline to refer cases to the child protection structures. Since then, we have widely promoted the number with children in schools, with professionals, by placing posters in schools, hospitals, police stations, municipalities and social care centres. In a country-wide campaign, we have called for the public to report cases and the child helpline has been promoted throughout" (European institution/stakeholder).

"In as far as complementarity and joint support for 116 000 and 116 111 can be achieved, we have been a keen supporter of mutual support and awareness raising" (European institution/stakeholder).

Furthermore, of the European institutions and stakeholders who responded to the survey, the majority (70%) stated that that they are actively promoting 116 111 outside their organisations, and they proposed a range of activities and ways in which they felt 116 111 could be promoted in the future.
There were also some recommendations from European institutions and stakeholders as to how the relationship with Child Helpline International could further benefit collaborations with other stakeholders:

“...many of our members are working independently or with line ministries at the national level on child helplines. It would be important to understand the added value of 116 111 and how it interacts with other existing national projects (or eventually replaces them?)” (European institution/Stakeholder).

“A general guideline on how to run and establish a child helpline would be useful, together with standards for such a service, as our national legislation now foresees the establishment of such child helplines, it would be useful to have a guideline on how this can be done – or enter into partnership with child helplines that fulfil such standards” (European institution/stakeholder).

3.3. National stakeholders

The survey was completed by 38 participants: five from Greece, 11 from Portugal, nine from Romania, four from Slovakia and nine from Sweden. They represented a variety of institutions and organisations, including statutory and third sector organisations. Except for two respondents from Sweden (both representing a political party at national or local level) all respondents were aware of child helplines, with 14 of them (37%) being aware of the 116 111 number as well.

Three of the respondents who were aware of the services (12%) did not indicate where they heard about child helplines. Half of the 22 respondents who indicated a source of information selected three sources or more; overall, the most common sources were social media, leaflet/posters, followed by working directly with child helplines and word of mouth (Figure 3).
Six respondents (16% of all participants) declared that they know more about child helplines now than they did a year ago; eighteen (47%) declared they know about the same and 14 (37%) did not answer the question (Figure 4).

When asked to offer their opinion about the most effective ways to increase awareness about child helplines, the approaches most commonly selected were campaigns through social media, campaigns through schools and campaigns through sports centres, each being selected by more than 60% of the participants as being “somewhat effective” or “very
effective”. Healthcare settings, TV campaigns and social services where selected by about half of the participants (Table 3). Opinions about the relative importance of these types of campaigns in reaching vulnerable children were more diverse, as no strategy was picked as the most important by more than 20% of the respondents (Table 4).

Table 3. Opinion on the effectiveness of various potential awareness campaigns

<table>
<thead>
<tr>
<th>Campaigns</th>
<th>Not effective at all</th>
<th>Not very effective</th>
<th>Neither effective nor ineffective</th>
<th>Somewhat effective</th>
<th>Very effective</th>
<th>No answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Campaigns through social media</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>1 (3%)</td>
<td>7 (18%)</td>
<td>16 (42%)</td>
<td>14 (37%)</td>
</tr>
<tr>
<td>Political lobbying</td>
<td>0 (0%)</td>
<td>2 (5%)</td>
<td>4 (11%)</td>
<td>9 (24%)</td>
<td>7 (18%)</td>
<td>16 (42%)</td>
</tr>
<tr>
<td>Healthcare settings&lt;sup&gt;14&lt;/sup&gt;</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>3 (8%)</td>
<td>9 (24%)</td>
<td>10 (26%)</td>
<td>16 (42%)</td>
</tr>
<tr>
<td>Campaigns on TV and radio</td>
<td>0 (0%)</td>
<td>2 (5%)</td>
<td>2 (5%)</td>
<td>6 (16%)</td>
<td>13 (34%)</td>
<td>15 (39%)</td>
</tr>
<tr>
<td>Campaigns through schools</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>6 (16%)</td>
<td>18 (47%)</td>
<td>14 (37%)</td>
<td></td>
</tr>
<tr>
<td>Campaign through NGOs</td>
<td>1 (3%)</td>
<td>0 (0%)</td>
<td>4 (11%)</td>
<td>10 (26%)</td>
<td>8 (21%)</td>
<td>15 (39%)</td>
</tr>
<tr>
<td>Campaigns through sport centres for youth</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>5 (13%)</td>
<td>18 (47%)</td>
<td>15 (39%)</td>
</tr>
<tr>
<td>Social services</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>2 (5%)</td>
<td>9 (24%)</td>
<td>11 (29%)</td>
<td>16 (42%)</td>
</tr>
</tbody>
</table>

Note: % of all respondents, including those who did not answer

Table 4. Ranking of services for reaching vulnerable children

<table>
<thead>
<tr>
<th>Campaigns</th>
<th>First choice</th>
<th>Second choice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Campaigns through social media</td>
<td>3 (14%)</td>
<td>5 (23%)</td>
</tr>
<tr>
<td>Political lobbying</td>
<td>3 (14%)</td>
<td>1 (5%)</td>
</tr>
<tr>
<td>Healthcare settings&lt;sup&gt;14&lt;/sup&gt;</td>
<td>2 (9%)</td>
<td>4 (18%)</td>
</tr>
<tr>
<td>Campaigns on TV and radio</td>
<td>4 (18%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Campaigns through schools</td>
<td>4 (18%)</td>
<td>3 (14%)</td>
</tr>
<tr>
<td>Campaign through NGOs</td>
<td>4 (18%)</td>
<td>1 (5%)</td>
</tr>
<tr>
<td>Campaigns through sport centres for youth</td>
<td>1 (5%)</td>
<td>3 (14%)</td>
</tr>
<tr>
<td>Social services</td>
<td>1 (5%)</td>
<td>5 (23%)</td>
</tr>
</tbody>
</table>

Note: % of those who answered to the question

<sup>14</sup> For example doctor’s surgeries or clinics.
3.4. Adults and young people

In total 2,487 people participated in the study and 28% of those (n= 706) were between 13 and 25 years of age. The questionnaire was distributed through targeted social media campaigns, as well as via personal and professional networks. Interestingly, over 82% of all participants responded to the survey after being sent a link via social media (namely, through Facebook) but also of note is that the proportion of responses from the Facebook campaign is lower (59%) among young people under 25 years old.

There were also some differences in terms of participation, both by country and by age. Figure 5 shows that, for example, Greece had the highest participation overall, but most of them were adults, while for Sweden the situation was reversed, with more young people than adults responding to the survey. It should be noted that these distributions should not be considered to be representative of the five countries’ populations. Throughout the evaluation, the data collection mechanisms adopted a number of promotional strategies that included social media campaigns targeted at specific age groups in specific countries. The high number of respondents among adults in Greece is because the surveys were shared by high influential people from Greece on social media.

Interestingly, the majority (83%) of respondents were female (n= 2,064). This distribution did not differ markedly by country, varying between 77% female respondents in Portugal and 92% female respondents in Greece. Among children and young people, 30% lived in a rural area (village or countryside), compared with only 16% adult participants who lived in rural areas (Figure 6). Only 3% of participants declared that they spoke a different language in the families compared to the language of the country targeted in the survey.
Figure 5. Number of participants, by country and age

Number of participants

- Greece: Adults - 957, Children and Young people - 78
- Portugal: Adults - 175, Children and Young people - 72
- Romania: Adults - 254, Children and Young people - 185
- Slovakia: Adults - 307, Children and Young people - 209
- Sweden: Adults - 77, Children and Young people - 157

Figure 6. Place of residence by age

Place of residence

- Large city: Adults - 52%, Children and Young people - 31%
- Small city or town: Adults - 32%, Children and Young people - 39%
- Village: Adults - 12%, Children and Young people - 23%
- Countryside: Adults - 4%, Children and Young people - 7%
Awareness of 116 111

In terms of people’s awareness of child helplines and the 116 111 regionally harmonised number in Europe, 2,114 participants (83%) declared that they were aware of child helplines, of which 494 participants (19%) declared that they also knew the 116 111 number. The difference in awareness by age is significant: while the proportions of people above and below 25 years of age who did know about the 116 111 phone number are similar (around 20%), there is proportionally a significant difference among those who had not heard at all about child helplines: 23% of children and young people, compared with 6% of adults (Figure 7).

Figure 7: Awareness of child helplines – general public (adults, and children and young people)

![Awareness about child helplines](image)

Note: % within age group

Overall, the majority (81%) of the participants who were aware of child helpline services, regardless of age, had heard of them in the last 2-3 years or previously, while just 9% had only recently become aware of them. When compared by age, 30% of young people responded that they had heard of child helpline services in the last year or more recently, compared with only 15% of adults. In contrast, 38% of young people had heard about child helplines more than three years ago, compared with 61% of adults (Figure 8).
The questionnaire additionally asked eight questions about the types of services that child helplines might provide. Five of these questions referred to services that child helplines typically offer, such as information about children’s rights, advice and support, and child protection. Three optional answers on the questionnaire referred to services that are, in reality, not offered through child helplines, such as financial support or help with homework. For each subset of questions, a single score (‘correct score and ‘incorrect score’) was created, determining whether the participant selected none, one or two, three or four, or five correct or incorrect answers, respectively.

In the event, there were no differences between young people and adults as to the number of incorrect answers, with almost 90% of respondents in each age group selecting no ‘incorrect’ answers. However, there was a significant difference between adults and young people in selecting correct answers: proportionally more adults selected three or more types of services that child helplines typically offer, compared with young people (Figure 9).

Overall, it seems that adults are comparably more informed about the types of services these child helplines offer in practice. However, only a few of the services typically offered were selected by more than 65% of the participants, regardless of age.
Figure 9. Number of type of services correctly selected by adults versus children

Number of correct answers about services
Sources of knowledge of 116 111

The most common sources of information about child helplines are TV advertisements (47% of all respondents) and online sources (41% of all respondents). For many young people, school is an additional source of information; with 42% of them reporting that they heard about child helplines at school. There are some other differences between young people and adults in terms of their sources of information: compared to adults, young people are more likely to have heard from a friend (13% vs. 6%) and parents (8% vs. 2%) and less likely to get the information from TV advertising (23% vs. 56%) or online (32% vs. 45%).
Figure 11. Sources of information

Sources of information about child helplines

Note: % within age group

Contact with child helplines

Seventy-two participants, representing a tenth of the young people in the study had contacted a child helpline in the past: four (5% of young people) in Greece, two (3%) in Portugal, five (3%) in Romania, 23 (11%) in Slovakia and 38 (25%) in Sweden. It is very likely that the higher proportion of young people who had contacted child helplines in Slovakia and Sweden was because in these countries many respondents were reached through the website or the social media networks of the local national child helplines. Thirty-five of them (51%) declared that the child helpline was very helpful or somewhat helpful; 27 children (38%) declared that the child helpline was not helpful, while for six children (8%) the child helpline did not answer.
Nearly all adult participants (over 94%) declared that they believe it is important or extremely important to have helplines dedicated to children and to use a European-wide harmonised phone number.

4. Conclusions

The final section of this report draws together the conclusions of the evaluation, summarises the findings in relation to the research questions, and makes some recommendations for increasing awareness of the 116 111 child helpline number to support the valuable work that the child helplines do across the globe.

Child Helpline International is the global network of 181 child helplines in 147 countries (updated May 2017), which together received over 20 million contacts only in 2015 from children and young people in need of care and protection. Child Helpline International supports the creation and strengthening of national toll-free child helplines worldwide, and by aggregating and interpreting the data coming in from the child helplines in their global network, they use this data and knowledge to highlight gaps in child protection systems, and advocate for the rights of children.

The five child helplines that took part in this evaluation answered 215,445 contacts from children and young people in 2016\textsuperscript{15}. This section of the report initially presents the findings

\textsuperscript{15} These contacts include those which lead to the child helpline providing direct assistance or active listening, as well as silent, abusive and other non-counselling calls.
from the data provided by the five child helplines and then presents the findings from the online survey.

The data from the child helplines illustrates differences in delivery across the five countries, including reasons for contacting, ways of contacting the child helpline and when the child helplines are available. The reasons for children and young people contacting the child helplines varies considerably from country to country but the main reason for contacting the child helplines in 2016 was mental health (17,901 records). Other main reasons were family relationships (15,040 records); peer relationships (10,526 records); school related issues (6,838 records); bullying (4,761 records) as well as sexuality and sexual awareness (5,069 records).

The purpose of the research was to evaluate the public’s awareness of the 116 111 number and their understanding of what the number stands for. The evaluation used anonymous surveys online in each of the five participating countries and to European institutions and stakeholders.

RQ1: What proportion of young people and adults recognise and know what the 116 111 number stands for?

Of the 706 young people who responded to our survey, 23% reported that they recognised and knew what the 116 111 child helpline number stood for. Of the 1,781 adults who responded to the survey, 20% reported that they recognised and knew what the child helpline number stood for. The correct types of services that are typically offered by child helplines were indicated by up to 66% of young people and up to 70% of adults, while less than 10% of either young people or adults selected types of services that are not offered by child helplines. Overall, it seems that adults are comparably more informed about the types of services these child helplines offer, with proportionally more adults indicating three or more services that are typically offered by child helplines (61% vs. 55%)

RQ2: What proportion of young people and adults report to have heard about the 116 111 child helpline in the last year?

Of the 706 of young people who responded to our survey, 30% reported that they had heard about the 116 111 child helpline number in the last year or more recently, compared with 15% of the adults.

Generally, the most common sources of information about child helplines were TV advertisements (46% of all respondents) and online sources (40% of all respondents). For many young people, school is an additional source of information, with 42% of them reporting that they heard about child helplines from school. There are some other differences between young people and adults in terms of sources of information: compared to adults, young people are more likely to have heard from a friend (13% vs. 6%) and parents (8% vs. 2%) and less likely to get the information from TV advertising (23% vs. 56%) or online (32% vs. 45%).
RQ3: What proportion of decision-makers and national governments has heard about the 116 111 child helpline in the last year?

Six respondents (40%) of the European institutions and stakeholders reported knowing more about child helplines than they did a year before and six respondents (16%) of the national stakeholders also reported that they knew more about child helplines now than they did a year ago.

RQ4: How many and what types of contacts from children and young people were responded to by each of the five child helplines in 2016?

“Data from various child helplines analysed in this study do not only provide a window into the hearts and minds of young people, but also underlines the practical importance of child helplines for youth actively seeking help and support” (Fukkink et al., 2016: 517).

In total, the five child helplines who took part in this evaluation provided counselling services to a total of 117,617 contacts in 2016: Greece to 25,779 contacts, Portugal to 1,080, Romania to 10,356, Slovakia to 24,454, and Sweden to 55,948.

RQ5: What reason do children and young people have for contacting each of the five child helplines in 2016?

The reasons for children and young people contacting the child helplines in 2016 varies considerably from country to country but the main reason for contacting the child helplines was mental health, with 24,405 (21%) records. Other main reasons were family relationships with 15,040 (13%) records; peer relationships, with 10,526 (9%) records; school related issues, with 6,838 (6%) records; bullying, with 5,192 (4%) records, as well as sexuality and sexual awareness, with 5,069 (4%) records.

Nearly all adult participants (over 94% of participants) declared that they believe it is important or extremely important to have helplines dedicated to children and to use a European-wide harmonised phone number.

4.1. Supporting the work of child helplines

4.1.1 Raising public awareness of child helplines

Ensuring that children are aware of the 116 111 number and know that they can contact the child helpline for confidential support and advice is essential. Dihn et al. (2016: 37) suggest that “support from government and from public figures can be a distinct advantage in raising public awareness”.

The five child helplines who participated in the evaluation adopt a range of awareness-raising activities, although sometimes this can be limited. The child helpline in Portugal, for example, was not able to undertake awareness-raising activities in 2016 due to a lack of resources. In Sweden, the BRIS child helpline launched Brisbot, a chatbot that answers children’s questions to common issues and provides support when the child helpline is not available. The bot, in both English and Swedish, is available via iMessenger and Kik, with answers written by child helpline counsellors.
The BRIS annual campaign ‘Idolkort’ raises awareness of BRIS, using famous Swedish people as role models, who support children by sharing their experiences and letting them know that even their idols have had to overcome setbacks and struggles in their childhood.

In Greece, The Smile of the Child raises awareness of common issues via their website and through social media, and also raises awareness of the child helpline, encouraging the public to contact the child helpline for further information, advice and counselling. They have also launched a campaign to raise the child helpline’s profile, using television and press media, as well as by distributing information leaflets. The child helpline in Greece hosts workshops and school-based activities, while providing children with a safe online platform for entertainment and interaction that also familiarises them with the child helpline.

In Slovakia, the Linka Detskej Istoty child helpline also engages with schools, facilitating workshops for their students and teachers on bullying, safer internet use, and cyberbullying. They hosted an event for friends and supporters to distribute educational and awareness-raising materials. They also initiated a national project for Slovakian students – Let’s read – which provided materials about the child helpline services to more than 41,000 students. Their idea for a fundraising and awareness-raising event for their child helpline was a 21km run for children. Plus, they co-organised the International Conference SPAY 2016, which attracted delegates from seven countries and more than 250 participants.

In Romania, the organisation Asociatia Telefonul Copilului mainly promotes 116 111 in school manuals and during face-to-face educational sessions held by the organisation’s school’s specialists. They aim to tackle the main problems addressed by children at the child helpline, especially bullying, cyberbullying and child trafficking (but not limited to these) using relevant online platforms addressed to children, the pre-paid calling cards, and social media, with the support of relevant stakeholders (both public and private) the Romanian organisation cooperates with. The contribution of mass media is also essential as journalists promote the child helpline number and organise debates on the problems raised by children and parents on the child helpline, inviting representatives of the Romanian organisation, other specialists and relevant institutions around the same table. Moreover, the public awareness campaigns developed by the organisation are promoted on TV and radio, with continuous support offered by the relevant channels.

4.1.2 Supporting the work of the child helplines – European and National institutions and stakeholders

Child Helpline International plays a key role in building bridges between child helplines, as well as facilitating joint learning. This enables the network of child helplines to engage in crucial advocacy efforts on a European and national level, which in turn increases the financial and political support for child helplines across Europe, and it continuously stresses the role of child helplines in national child protection systems.

Over the past 10 years, Child Helpline International has been pivotal in implementing 116 111. Since 2005, in a close partnership with the International Telecommunications Union and the European Commission, Child Helpline International has been active in the allocation of the regionally harmonised number 116 111 throughout EU Member States, as well as its operationalisation. Region-wide marketing campaigns, led by Child Helpline International in
collaboration with all European child helplines, have contributed to an increasing awareness and use of the 116 111 number across the EU. Child Helpline International also manages the 116111.eu website, providing relevant information on the work of child helplines in Europe.

Additionally, Child Helpline International’s contribution can be clearly seen in the standardisation of data collection, while setting quality standards for the services offered to children by child helplines in Europe. In collaboration and dialogue with key European and national institutions such as the European Parliament, the Council of Europe, GSMA (the association of mobile operators worldwide), as well as ministries of social welfare and children ombudsmen, Child Helpline International creates important links for European child helplines and presents structural solutions to challenges around protecting children in Europe.

4.2. Recommendations

♦ As the comparison across the five countries found that children and young people under the age of 25 were less likely to know about the child helpline compared to those over 25, we recommend that activities continue to raise awareness of the child helplines and the 116 111 number with young people in Europe.

♦ In addition to raising awareness of the 116 111 number and the existence of the child helpline in Europe, we recommend that campaigns also focus specifically on the type of services that the child helpline provide.

♦ We also suggest that consideration is given to how awareness is raised, as only 41% (less than half) of children and young people reported hearing of the child helplines through school.

♦ Only 32% of children and young people in our survey had heard of child helplines through social media – less than the adults (45%) – which is surprising, given that children use social media more than adults. As such, we therefore suggest a more targeted campaign to raise awareness may be beneficial, using, for example, YouTube and Instagram to reach children over 13 years of age, who are using these social media networks.

♦ As evidenced in the data provided by the five child helplines who participated in the evaluation, there is a considerable disparity between countries in their records of the reasons children contacted the child helplines. While this may reflect cultural differences in children’s lived experiences in their countries of residence, we recommend that Child Helpline International provide more detailed guidance as to what should be recorded in each category per contact.
4.3. References


5. Country-level information

5.1. Greece

A number of 1,035 people from Greece participated in the study, of which only 78 (7.5%) were between 13 and 25 years of age. The questionnaire was distributed through targeted social media campaigns, as well as via personal and professional networks. Throughout the evaluation, the data collection mechanisms adopted a number of promotional strategies that included social media campaigns targeted at specific age groups in specific countries. The high number of respondents among adults in Greece is because the surveys were shared by high influential people from Greece on social media. Only 48 (5%) of them were males; the gender distribution was slightly more balance in the under 25 years old, with 19% male respondents. Among children and young people, 13% lived in a rural area (village or countryside), compared with 10% of the adult participants who lived in rural areas (Figure 2).

Figure 13. Number of participants, by country and age

Figure 14. Place of residence by age
5.1.1 Awareness of 116 111

In terms of people’s awareness of child helplines and the 116 111 regionally harmonised number in Europe, 973 participants (98%) declared that they were aware of child helplines, of which participants 260 (26%) declared that they also knew the 116 111 number, with some differences by age (Figure 3).

Figure 15: Awareness of child helplines – general public (adults, and children and young people)

Note: % within age group

Overall, the majority (87%) of the participants who were aware of child helpline services, regardless of age, had heard of them in the last 2-3 years or previously, while just 4% had only recently become aware of them. When compared by age, 26% of young people responded that they had heard of child helpline services in the last year or more recently, compared with only 12% of adults. In contrast, 46% of young people had heard about child helplines more than three years ago, compared with 63% of adults (Figure 4).

Figure 16. When did participants hear about child helplines?

5.1.2 Knowledge of types of services provided

The questionnaire additionally asked eight questions about the types of services that child helplines might provide. Five of these questions referred to services that child helplines

...
typically offer, such as information about children’s rights, advice and support, and child protection. Three optional answers on the questionnaire referred to services that are, in reality, not offered through child helplines, such as financial support or help with homework. For each subset of questions, a single score (‘correct score and ‘incorrect score’) was created, determining whether the participant selected none, one or two, three or four, or five correct or incorrect answers, respectively.

In the entire sample, there were no differences between young people and adults as to the number of incorrect answers, with around 82% of respondents in each age group selecting no ‘incorrect’ answers. However, there was a significant difference between adults and young people in selecting correct answers: proportionally more adults selected three or more types of services that child helplines typically offer, compared with young people (Figure 5).

Overall, it seems that adults are comparably more informed about the types of services these child helplines offer in practice. However, except “Emotional support”, the other services typically offered were selected by less than 63% of the participants, regardless of age (Figure 6).

**Figure 17. Number of type of services correctly selected by adults versus children**

**Figure 18. Knowledge of services offered by child helplines – general public (adults and children and young people)**
5.1.3 Sources of knowledge of 116 111

The most common sources of information about child helplines are TV advertisements (67% of all respondents) followed by online sources (41% of all respondents). For many young people, school is an additional source of information, with 33% of them reporting that they heard about child helplines at school. There are some other differences between young people and adults in terms of their sources of information: compared to adults, young people are more likely to have heard from parents (9% vs. 3%) and less likely to get the information from TV advertising (59% vs. 71%) or online (42% vs. 54%).

Figure 19. Sources of information

5.1.4 Contact with child helplines

Four participants from Greece, representing 5% of the young people in the study, had contacted a child helpline in the past. Of them 3 found the counsellors helpful or very helpful, and 2 not much helpful.

Virtually all adult participants (over 97%) declared that they believe it is important or extremely important to have helplines dedicated to children and to use a European-wide harmonised phone number.
Figure 20. How helpful were counsellors at the child helpline?
5.2. Portugal

A number of 247 people from Portugal participated in the study, of which 72 (29%) were between 13 and 25 years of age. Only 50 (21%) of them were males; the gender distribution was only slightly more balance in the under 25 years old, with 27% male respondents. Among children and young people, 7% lived in a rural area (village or countryside), compared with 10% of the adult participants who lived in rural areas (Figure 2).

Figure 21. Number of participants, by country and age

![Number of participants chart]

Figure 22. Place of residence by age

![Place of residence chart]

5.2.1 Awareness of 116 111

In terms of people’s awareness of child helplines and the 116 111 regionally harmonised number in Europe, 165 participants (73%) declared that they were aware of child helplines, 36 of them (16%) declared that they also knew the 116 111 number, with significant differences by age (Figure 3): almost half (49%) of children and young people were not aware at all of child helplines, compared with 17% of the adults.
Overall, the majority (78%) of the participants who were aware of child helpline services, regardless of age, had heard of them in the last 2-3 years or previously, and 12% had only recently become aware of them. When compared by age, 55% of young people responded that they had heard of child helpline services in the last year or more recently, compared with only 13% of adults. In contrast, 15% of young people had heard about child helplines more than three years ago, compared with 65% of adults (Figure 4). It is apparent that among respondents form Portugal adults seem to be more aware of child helplines compared with children, and had known about them for longer.

5.2.2 Knowledge of types of services provided

The questionnaire additionally asked eight questions about the types of services that child helplines might provide. Five of these questions referred to services that child helplines
typically offer, such as information about children’s rights, advice and support, and child protection. Three optional answers on the questionnaire referred to services that are, in reality, not offered through child helplines, such as financial support or help with homework. For each subset of questions, a single score (‘correct score and ‘incorrect score’) was created, determining whether the participant selected none, one or two, three or four, or five correct or incorrect answers, respectively.

In the entire sample, there were little differences between young people and adults as to the number of incorrect answers: 96% of adult respondents did not select any ‘incorrect’ answers, compared with 82% of the children and young people. However, there was a significant difference between adults and young people in selecting correct answers: proportionally more adults selected three or more types of services that child helplines typically offer, compared with young people (Figure 5).

Overall, it seems that adults are comparably more informed about the types of services these child helplines offer in practice. However, except “Advice and guidance about child protection services”, the other services typically offered were selected by less than 60% of the participants, regardless of age (Figure 6).

Figure 25. Number of type of services correctly selected by adults versus children
5.2.3 Sources of knowledge of 116 111

The most common sources of information about child helplines are TV advertisements (26% of all respondents) followed by online sources (21% of all respondents). For many young people, school is an additional source of information, with 28% of them reporting that they heard about child helplines at school. There are some other differences between young people and adults in terms of their sources of information: compared to adults, young people are more likely to have heard from parents (8% vs. 2%) and a friend 4% vs. <1%) and less likely to get the information from TV advertising (8% vs. 26%) or newspaper (1% vs. 13%).

Note: % within age group
5.2.4 Contact with child helplines

Only 2 participants from Portugal had contacted a child helpline in the past. One of them found the counsellors helpful or very helpful, and the other not much helpful.

Virtually all adult participants (over 97%) declared that they believe it is important or extremely important to have helplines dedicated to children and to use a European-wide harmonised phone number.

Figure 28. How helpful were counsellors at the child helpline?
5.3. Romania

A number of 439 people from Romania participated in the study, of which 254 (58%) were between 13 and 25 years of age. Only 52 (12%) of them were males; the gender distribution was slightly more balanced in the under 25 years old, with 24% male respondents. Among children and young people, 45% lived in a rural area (village or countryside), compared with 19% of the adult participants who lived in rural areas (Figure 2).

Figure 29. Number of participants, by country and age

![Bar chart showing the number of participants by age and gender in Romania](chart1.png)

Figure 30. Place of residence by age

![Bar chart showing the place of residence by age and gender](chart2.png)

5.3.1 Awareness of 116 111

In terms of people’s awareness of child helplines and the 116 111 regionally harmonised number in Europe, 327 participants (78%) declared that they were aware of child helplines, 68 of them (16%) declared that they also knew the 116 111 number. There were significant differences by age (Figure 3): almost a third (32%) of children and young people were not aware at all of child helplines, compared with 16% of the adults.
Figure 31: Awareness of child helplines – general public (adults, and children and young people)

Awareness of child helplines

<table>
<thead>
<tr>
<th></th>
<th>Adults</th>
<th>Children and young people</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all</td>
<td>16%</td>
<td>32%</td>
</tr>
<tr>
<td>I know there is one, but I did not know the number</td>
<td>48%</td>
<td>71%</td>
</tr>
<tr>
<td>I did know the number</td>
<td>13%</td>
<td>20%</td>
</tr>
</tbody>
</table>

Note: % within age group

Overall 61% of the participants who were aware of child helpline services had heard of them in the last 2-3 years or previously, and 12% had only recently become aware of them. When compared by age, 47% of young people responded that they had heard of child helpline services in the last year or more recently, compared with only 35% of adults. In contrast, 15% of young people had heard about child helplines more than three years ago, compared with 65% of adults (Figure 4). It is apparent that among respondents from Romania, adults seem to be more aware of child helplines compared with children, and had known about them for longer.

Figure 32. When did participants hear about child helplines?

When heard about child helpline

<table>
<thead>
<tr>
<th></th>
<th>Adults</th>
<th>Children and young people</th>
</tr>
</thead>
<tbody>
<tr>
<td>Only recently</td>
<td>17%</td>
<td>26%</td>
</tr>
<tr>
<td>Last year</td>
<td>17%</td>
<td>20%</td>
</tr>
<tr>
<td>Last 2-3 years</td>
<td>30%</td>
<td>27%</td>
</tr>
<tr>
<td>More than 3 years ago</td>
<td>36%</td>
<td>26%</td>
</tr>
</tbody>
</table>

5.3.2 Knowledge of types of services provided

The questionnaire additionally asked eight questions about the types of services that child helplines might provide. Five of these questions referred to services that child helplines
typically offer, such as information about children’s rights, advice and support, and child protection. Three optional answers on the questionnaire referred to services that are, in reality, not offered through child helplines, such as financial support or help with homework. For each subset of questions, a single score (‘correct score’ and ‘incorrect score’) was created, determining whether the participant selected none, one or two, three or four, or five correct or incorrect answers, respectively.

In the entire sample, there were little differences between young people and adults as to the number of incorrect answers: 97% of adult respondents did not select any ‘incorrect’ answers, compared with 86% of the children and young people. However, there was a significant difference between adults and young people in selecting correct answers: proportionally more adults selected three or more types of services that child helplines typically offer, compared with young people (Figure 5).

There seem to be little difference between adults and children and young in their knowledge about the type of services child helplines typically offer. However, all of the services typically offered were selected by less than 60% of the participants, regardless of age (Figure 6).

**Figure 33. Number of type of services correctly selected by adults versus children**

<table>
<thead>
<tr>
<th>Number of correct answers about services</th>
<th>Adults</th>
<th>Children and young people</th>
</tr>
</thead>
<tbody>
<tr>
<td>none</td>
<td>6%</td>
<td>12%</td>
</tr>
<tr>
<td>1 or 2</td>
<td>50%</td>
<td>46%</td>
</tr>
<tr>
<td>3 or 4</td>
<td>34%</td>
<td>35%</td>
</tr>
<tr>
<td>5</td>
<td>10%</td>
<td>7%</td>
</tr>
</tbody>
</table>
5.3.3 Sources of knowledge of 116 111

The most common sources of information about child helplines are TV advertisements (39% of all respondents) followed by online sources (35% of all respondents). For many young people, school is an additional source of information, with 17% of them reporting that they heard about child helplines at school. There are some other differences between young people and adults in terms of their sources of information: compared to adults, young people are more likely to have heard from parents (5% vs. 1%) and a friend (5% vs. 3%) and less likely to get the information from TV advertising (31% vs. 46%) or online sources (32% vs. 37%).
5.3.4 Contact with child helplines

Only 4 participants from Romania had contacted a child helpline in the past. Two of them found the counsellors helpful or very helpful, one found the counsellor not much helpful while the fourth declared that the child helpline did not answer (Figure 8).

Virtually all adult participants (over 92%) declared that they believe it is important or extremely important to have helplines dedicated to children and to use a European-wide harmonised phone number.
5.4. Slovakia

A number of 516 people from Slovakia participated in the study, of which 209 (41%) were between 13 and 25 years of age. Only 80 (16%) of them were males; the gender distribution was more balanced in the under 25 years old group, with 31% male respondents. Among children and young people, 36% lived in a rural area (village or countryside), compared with 28% of the adult participants who lived in rural areas (Figure 2).

5.4.1 Awareness of 116 111

In terms of people’s awareness of child helplines and the 116 111 regionally harmonised number in Europe, 437 participants (88%) declared that they were aware of child helplines,
58 of them (12%) declared that they also knew the 116 111 number. There were significant differences by age (Figure 3): close to a quarter (25%) of children and young people were not aware at all of child helplines, compared with only 4% of the adults.

Figure 39: Awareness of child helplines – general public (adults, and children and young people)

Awareness about child helplines

Not at all | I knew there is one, but I did not know the number | I did know the 116 111 number
---|---|---
Adults | 4% | 59%
Children and young people | 23% | 18%

Note: % within age group

Overall 80% of the participants who were aware of child helpline services had heard of them in the last 2-3 years or previously, and 12% had only recently become aware of them. When compared by age, 35% of young people responded that they had heard of child helpline services in the last year or more recently, compared with only 12% of adults. In contrast, 32% of young people had heard about child helplines more than three years ago, compared with 62% of adults (Figure 4). It is apparent that among respondents from Slovakia, adults seem to be more aware of child helplines compared with children, and had known about them for longer.
5.4.2 Knowledge of types of services provided

The questionnaire additionally asked eight questions about the types of services that child helplines might provide. Five of these questions referred to services that child helplines typically offer, such as information about children’s rights, advice and support, and child protection. Three optional answers on the questionnaire referred to services that are, in reality, not offered through child helplines, such as financial support or help with homework. For each subset of questions, a single score (‘correct score’ and ‘incorrect score’) was created, determining whether the participant selected none, one or two, three or four, or five correct or incorrect answers, respectively.

In the entire sample, there were little differences between young people and adults as to the number of incorrect answers: 95% of adult respondents did not select any ‘incorrect’ answers, compared with 92% of the children and young people. However, there was a significant difference between adults and young people in selecting correct answers: proportionally more adults selected three or more types of services that child helplines typically offer, compared with young people (Figure 5).

There seem to be little difference between adults and children and young in their knowledge about the type of services child helplines typically offer. However, except “Emotional support”, the services typically offered by helplines were selected by less than 70% of the participants, regardless of age (Figure 6).
Figure 41. Number of type of services correctly selected by adults versus children

Figure 42. Knowledge of services offered by child helplines – general public (adults and children and young people)
5.4.3 Sources of knowledge of 116 111

The most common sources of information about child helplines are school (38% of all respondents) followed by TV (31%) and online sources (30% of all respondents). For many young people, school is an additional source of information, with more than half (56%) of them reporting that they heard about child helplines at school. There are some other differences between young people and adults in terms of their sources of information: compared to adults, young people are more likely to have heard from friends (24% vs. 17%) and parents (7% vs. 3%) and less likely to get the information from the other sources.

Figure 43. Sources of information

![Sources of information about child helplines](image)

Note: % within age group

5.4.4 Contact with child helplines

Twenty-three participants from Slovakia (14% of children and young people respondents) had contacted a child helpline in the past. Twelve of them found the counsellors helpful or very helpful, 6 found the counsellors not much helpful while 2 declared that the child helpline did not answer (Figure 8).

Virtually all adult participants declared that they believe it is important or extremely important to have helplines dedicated to children (98%) and to use a European-wide harmonised phone number (88%).
Figure 44. How helpful were counsellors at the child helpline?
5.5. Findings – adults, young people and children

A number of 234 people from Sweden participated in the study, of which 157 (67%) were between 13 and 25 years of age. Only 24 (10%) of them were males; the gender distribution was similar in the under 25 years old group, with only 11% male respondents. Among children and young people, 24% lived in a rural area (village or countryside), compared with 28% of the adult participants who lived in rural areas (Figure 2).

Figure 45. Number of participants, by country and age

Figure 46. Place of residence by age
In terms of people’s awareness of child helplines and the 116 111 regionally harmonised number in Europe, 204 participants (93%) declared that they were aware of child helplines, of which 68 (31%) declared that they also knew the 116 111 number. There were significant differences by age (Figure 3): 34% of children and young people were aware of the 116 111 number, compared with 24% of adults.

Overall 90% of the participants who were aware of child helpline services had heard of them in the last 2-3 years or previously, and 5% had only recently become aware of them. When compared by age, 90% of adults have heard of the child helpline more than 3 years before, compare with 53% of children and young people (Figure 4).
5.5.2 Knowledge of types of services provided

The questionnaire additionally asked eight questions about the types of services that child helplines might provide. Five of these questions referred to services that child helplines typically offer, such as information about children’s rights, advice and support, and child protection. Three optional answers on the questionnaire referred to services that are, in reality, not offered through child helplines, such as financial support or help with homework. For each subset of questions, a single score (‘correct score and ‘incorrect score’) was created, determining whether the participant selected none, one or two, three or four, or five correct or incorrect answers, respectively.

In the entire sample, there were little differences between young people and adults as to the number of incorrect answers: 97% of adult respondents did not select any ‘incorrect’ answers, compared with 93% of the children and young people.

There seem to be little difference between adults and children and young in their knowledge about the type of services child helplines typically offer. More interestingly, despite the fact that people were aware of child helplines generally for 3 or more years, less than half of the respondents selected any of the correct types of services that the child lines typically offer (Figure 6).
Figure 49. Number of type of services correctly selected by adults versus children

Number of correct answers about services

<table>
<thead>
<tr>
<th>Type of Services</th>
<th>Adults</th>
<th>Children and Young People</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>13%</td>
<td>6%</td>
</tr>
<tr>
<td>1 or 2</td>
<td>14%</td>
<td>25%</td>
</tr>
<tr>
<td>3 or 4</td>
<td>48%</td>
<td>50%</td>
</tr>
<tr>
<td>5</td>
<td>21%</td>
<td>19%</td>
</tr>
</tbody>
</table>

Figure 50. Knowledge of services offered by child helplines – general public (adults and children and young people)

Type of services offered by child helplines

<table>
<thead>
<tr>
<th>Type of Services</th>
<th>Adults</th>
<th>Children and Young People</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advice and guidance about child protection services</td>
<td>64%</td>
<td>61%</td>
</tr>
<tr>
<td>Help with transportation</td>
<td>7%</td>
<td>1%</td>
</tr>
<tr>
<td>Emotional support and counselling</td>
<td>73%</td>
<td>88%</td>
</tr>
<tr>
<td>Information about my rights as a child/young person</td>
<td>66%</td>
<td>66%</td>
</tr>
<tr>
<td>Financial support</td>
<td>3%</td>
<td>3%</td>
</tr>
<tr>
<td>Emergency help</td>
<td>29%</td>
<td>29%</td>
</tr>
<tr>
<td>Help with homework</td>
<td>6%</td>
<td>6%</td>
</tr>
<tr>
<td>Information about where can I get more help</td>
<td>71%</td>
<td>65%</td>
</tr>
</tbody>
</table>
5.5.3 Sources of knowledge of 116 111

The most common sources of information about child helplines are school (52% of all respondents) followed by online sources (38%) and posters (30% of all respondents). For many young people, school is an additional source of information, with more than two thirds (66%) of them reporting that they heard about child helplines at school. There are some other differences between young people and adults in terms of their sources of information: compared to adults, young people are more likely to have heard from parents (10% vs. 3%) and posters (46% vs. 39%) and less likely to get the information from TV (13% vs. 45%).

Figure 51. Sources of information

![Sources of information about child helplines](image)

Note: % within age group

5.5.4 Contact with child helplines

Thirty-eight participants from Sweden (24% of children and young people respondents) had contacted a child helpline in the past. Eighteen of them (47%) found the counsellors helpful or very helpful, 17 (45%) found the counsellors not much helpful while 3 declared that the child helpline did not answer (Figure 8).

Virtually all adult participants declared that they believe it is important or extremely important to have helplines dedicated to children (95%) and to use a European-wide harmonised phone number (85%).
Figure 52. How helpful were counsellors at the child helpline?