

CONCURRENT SESSION

C8 Hidden homelessness – unaccompanied children



BETTER, BIGGER, STRONGER

Responding to the mental health
care needs of unaccompanied
homeless children in Tasmania

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SOCIAL
ACTION &
RESEARCH
CENTRE



Content warning

This presentation includes description and discussion of a range of distressing experiences including physical and sexual abuse and violence, intimate partner violence, self-harm, suicide ideation and suicide attempts. If you are affected, please practice self-care, take a break, and remember skilled support is available.

- Blue Knot (childhood and complex trauma support): 1300 657 380
- A Tasmanian Lifeline: 1800 98 44 34
- Lifeline: 13 11 14
- National sexual assault, family and domestic violence counselling service: 1800RESPECT/1800 737 732
- Kids Helpline: 1800 55 1800

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Unaccompanied child homelessness

- Homelessness experienced by children (under 18) who are alone and not in the custody of a parent or guardian.
- Most commonly experienced as couch surfing, cycling through SHS services, rough sleeping, swapping sex and criminal activity for shelter.
- Key drivers are family conflict, abuse, neglect, abandonment, intimate partner violence of caregivers.
- As unaccompanied minors, children struggle to access income, shelter, food, safety, education, health and mental health care and are at high-risk cumulative trauma extending from early childhood into adolescence.

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Situating *Bigger, Better, Stronger*: SARC's research and key policy developments

- 2017 *Too hard? Highly vulnerable teens in Tasmania*
- 2017 Tasmanian Youth at Risk Strategy
- 2017 *Who cares? Supported accommodation for unaccompanied children*
- 2018 *Outside in: How the youth sector supports the school reengagement of vulnerable children in Tasmania*
- 2019 Affordable Housing Action Plan 2019-2023
- 2019 Department of Communities Under 16s Homelessness Taskforce
- 2020 *#StayHome? The impact of COVID-19 on unaccompanied homeless children in Tasmania*

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Situating *Better, Bigger, Stronger*

- 2020 CAMHS Review
- 2020 *A public health approach to ending unaccompanied child homelessness in Tasmania*
- 2020 Department of Communities Under 16s Homelessness Working Group
- 2021 Strong Families, Safe Kids Next Steps Action Plan 2021-2023
- 2021 Tasmanian Child and Youth Wellbeing Strategy
- 2022 Under 16s Homelessness. Children and young people under 16 who alone and at risk of or experiencing homelessness. A policy framework for Tasmania
- **2022 *Better, Bigger, Stronger: Responding to the mental health care needs of unaccompanied homeless children in Tasmania***

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Better, bigger, stronger: Responding to the mental health care needs of unaccompanied homeless children in Tasmania

Overarching research aims:

1. To understand unaccompanied homeless children's experiences of mental ill-health
2. To investigate barriers to mental health service provision for unaccompanied homeless children
3. To consider what models of support and service would better meet the needs of unaccompanied homeless children

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How the research was done

Qualitative, transformational research approach, involving 80 participants in in-depth interviews including:

- 45 professionals from community-based youth homelessness, outreach, health and mental health services, including managerial and frontline SHS staff, youth outreach workers, service clinical leads, psychologists, clinical social workers, social workers, a GP, and a nurse
- 18 professionals from 4 colleges and 2 high schools, including a principal, assistant principals, school psychologists, school social and youth workers and school nurses
- 2 social work professionals from a Tasmanian Government youth health service
- 15 children and young people aged 15-20 years (average 17 years) with current or previous experience of unaccompanied homelessness and mental ill-health

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Key findings: Children and young people

- Common experience of early childhood trauma (neglect, abuse, violence) at home, continued trauma and violent victimisation during homelessness, and emerging mental illness, self-harm, suicide ideation and suicide attempts
- A need and active desire for intense and complex mental health support
- An inability to access needed help: Falling through the gaps between early intervention services (primary and allied health, headspace) and tertiary (CAMHS) and acute services (ED)
- A fundamental mismatch between their complex mental health needs and existing service delivery and design

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Key findings: Professionals

- Identification of cumulative, complex trauma as common for unaccompanied homeless children
- No open doors: Unresponsive health and mental health service systems, extreme difficulty accessing primary, allied, tertiary and acute services
- The 'missing middle' of moderate to severe and complex mental health service provision
- Risk-holding by non-specialist support providers (schools, SHS services, outreach services) and resulting vicarious trauma for clients and staff
- A troubling culture (driven by high thresholds) of conditional mental health care provision: Stabilise housing first, then mental health care will follow

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Recommendations

1. Strengthen early responses to childhood adversity through expanding social work capacity in primary schools
2. Target increased access to primary and allied health care for children and young people experiencing disadvantage through additional investment in the Youth Health fund and mobile health care outreach
3. Establish a complex mental health service with significant outreach capacity in the Tasmanian Child and Adolescent Mental Health Service
4. Develop a care coordination service through Children, Youth and Families for children and young people experiencing complex needs, comprising mobile care coordination teams and multi-agency specialist practitioner teams

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For further information

<https://www.anglicare-tas.org.au/unaccompanied-homeless-children-in-tasmania/>

<https://www.anglicare-tas.org.au/better-bigger-stronger/>

Please feel very welcome to contact Catherine with any queries:

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