

15.0 Service provider perspectives

During the consultation process Youth Service Providers were asked to describe any factors that they believed supported or inhibited their ability to respond to young homeless people at risk of suicide. Youth Service Providers were from outreach and accommodation services and responses differed between these two types of services as a result of the structure and services provided by each.

When Youth Service Providers were asked what the main challenges were to providing care to young homeless people who were at risk of suicide, the most common response was access to mental health services. The types of access issues experienced varied between services and included:

- Challenges that were the result of many mental health and support services not being available after hours i.e. nights or weekends
- Extended waitlists
- Young people refusing to access services
- Young people not meeting admission criteria
- Lack of mental health professionals working at accommodation services

Young people may not meet the admission criteria for mental health services, this may be because they were assessed as not being at risk of suicide, despite having disclosed suicidal urges to Youth Service Providers, or because, they were experiencing behavioural issues not attributed to mental ill health. One service provider explained that if a young person has behavioural issues they may be struggling just as much as a young person with mental health issues but do not receive the same level of care. When an accommodation service provider is unable to promptly connect a young person to mental health services or other appropriate supports, this generally results in the young person being returned to their care. This is often not the best environment for the young person due to a lack of expertise of staff and insufficient time to address the young person's complex needs. A number of accommodation service providers explained that having a mental health professional work alongside services for young homeless people would help to overcome access barriers.

Access to accommodation services was described as a key issue by both accommodation and outreach service providers. Accommodation services regularly turned away young people, with one service explaining that in the first six months of 2013, they had declined close to 260 requests for accommodation. It is difficult for accommodation service providers to accommodate more than one person who is suicidal or who engages in self-harming behaviours because of issues with contagion. Accommodation services must consider the needs of existing residents and if they already have a young person who is self-harming or suicidal then the addition of another young person experiencing the same issues may exacerbate the situation, placing additional strain on a service staff and residents. Further to this issue, there seemed to be little existing expertise in the area of how to address contagion within accommodation service setting. As a result a number of services have adapted different, and at times, conflicting approaches.

Identified enablers that contributed to good service provision for young people at risk of suicide included relationship building.

The ability of service staff to develop positive relationships that encourage open communication was the most common factor that enhanced a service provider's ability to support young homeless people at risk of suicide. Outreach services often describe their ability to build relationships with disengaged young people and connect them to support as a key strength. Youth Service Providers described that the ability of staff to look behind what is really going on in their lives often helped to address the causal factors impacting a young person's behaviour and suicidality. The majority of services agreed that taking a client-centred, strengths-based approach fostered positive outcomes for the young people.

A number of Youth Service Providers described partnerships that they had developed with other services as enhancing their response to young homeless people who are suicidal. One service provider highlighted the important role that Headspace had played in encouraging services in the area to collaborate and the positive impact this had on service delivery. A few services held regular meetings with other services in the area to discuss current issues and to develop effective strategies to overcome them. Some Youth Service Providers felt that collaborating with other services enhanced the level of care provided to the young person through co-case managing as well as facilitating strong connections to referral services.