

## TK, 16 years old

TK, 16 years old, originally from Mali, came to the Arsis hostel in Makrinitza after a referral from EKKKA. He spoke Bambara, a little French and even less English. The only information that the scientific team had received from the previous hostel where the minor was hosted, was that the minor had been monitored by a psychiatrist in a mental health centre in Athens. The internal rules of the hostel allowed the children to get used to the place and did not bother them with questions during the first days of their stay. During this transition period, the institution relied on existing anamnesis reports (transferred by the previous accommodation),

However, during those first days, TK suffered from various dietary problems. He complained of abdominal pain, an issue he had never complained about before, according to his medical history overview. Three days after his arrival he indicated to be suffering from strong headaches, these could be so strong that he would be unable to fall asleep. During evenings he used to disappear without a trace and often would not return to the hostel until the early morning hours. His behaviour caused a great deal of tension and anxiety for the other inhabitants.

The team, having not received any information on any health problems the minor might have been suffering from, found it very difficult to deal with this situation. The hostel is situated in the mountainous countryside, where snowstorms greatly reduce mobility. Each time that TK disappeared of all members of the hostel had to be mobilised and stress levels would be very high while staff went to look for him. However, TK would always return to the hostel of his own accord in the early mornings.

The team decided to initiate a holistic action plan. The hostel's psychologist contacted the psychiatrist, who discovered that minor had been abused in the past, but had withheld this information when being interviewed to compile his medical history. As it was considered important for the child to continue the sessions with the same psychiatrist, regular meetings were set up via skype, in order to overcome the distance. Furthermore, the support of the regional public hospital was enlisted, in order to diagnose from what the child suffered and to determine the appropriate treatment. The examination showed no abnormal physical findings. The psychiatrist determined that TK faked the health problem in order to be transported out of the hostel.

The cooperation between the psychiatrist and the hostel's psychologist, established that the inner conflicts of the minor, running away in the evening without any additional planning, were the result of internal conflicts and anger. An action plan was created by the staff, with the cooperation of all the other minors hosted in the shelter, in order to achieve a smooth integration into the hostel. TK's good behaviour was encouraged as much as possible by granting rewards when he behaved according to the hostel rules.