







# Resource landscapes for young people leaving residential alcohol and drug services: Research Summary 6

Opportunities and limits: Exploring staff care for young people in residential alcohol and other drug services

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## **Overview**

This paper explores relationships between young people and residential alcohol and other drug (AOD) service staff, with a focus on care. Care is an important feature of what AOD staff do, and the way staff care for young people during critical moments in their lives, such as entering AOD services, is important. It can shape young people's understandings of substance use, their relationships with services, their selfworth, and their broader substance use trajectories.

Care can be found in everyday interactions between staff and clients. These acts of care show that staff genuinely recognise young people and their needs. At the same time, providing care in residential AOD settings comes with challenges and ethical dilemmas. Workers have to balance the provision of care with their professional duties, and these need to be navigated within the context of the residential environment.

For this paper, we look at how care practices are integrated in relationships between residential AOD workers and young people to create opportunities, but also how care might be limited by the residential context staff work within.

## How we did the research

This study investigates the experiences of 38 young people aged 16-24, who recently left or were in residential AOD services in NSW, Victoria and the ACT. Interviews were conducted while young people were in services, six months, and 12 months later. Most participants were recruited from rehabs, as well as supported accommodation, detox units and day programs. The interviews explored AOD use, life events, relationships, feedback for services, and future plans.

Here, we focused on how young people talked about their relationships with residential AOD workers. We analysed these findings into broad themes.

# What did we find: Opportunities and limits to care

Young people described positive relationships with workers when workers tailored care to their needs, were respectful, made an effort to understand what the young person valued, and showed empathy. This created opportunities, but also highlighted some limits to care.

## Opportunities enabled by care

## Challenging stigmatised identities and discourse

Caring relationships between staff and young people challenged some of the negative views about alcohol and drug use that young people held, as well as some of the stigma around asking for help. For example, the staff gave young people practical advice on how to reduce harm and shared their own experiences with alcohol and drugs. This broke down formal barriers and made young people see AOD services as social support, rather than just medical treatment.

Everyone's way more supportive than I thought they would be. Constantly keeping me occupied. And it's normalised here. But, as I was saying earlier, so I feel more safe in this area. And, yeah, just like my whole outlook on it's a lot different now and I feel like helping's like ... they're helping out people, not more so people reaching out for help because there's something wrong. I more see it as [Youth AOD service] has helped young youth and people in certain states. (Roman, Interview 1)

## Self-care and wellbeing

Young people talked about staff taking time to listen and teach self-care skills – skills that many young people didn't know before. Staff also regularly checked in with young people, which made them feel better about their mental health and improved their self-worth.

I guess they just like give positive like, you know, they, they give you positive feedback and they like, you know, they see that there's potential in ya, like even though you don't think you, like, you know, you've got potential. And like, you know, they, they make you feel like you're, I don't know, you're worth something. (Jack, Interview 1)

#### Respect and mutual relationships

Many young people stressed how respect was important to them and how, when staff demonstrated respect, this modelled and enabled mutually respectful relationships. Several young people also talked about 'good workers' being able to both support the young people while also holding them responsible for their actions.

They respect me, so I show the sort of respect they need as well (Zander, Interview 1)

#### Meaningful relationships beyond residential stays

For some young people, positive and caring relationships with workers built during residential stays had an enduring effect, even once they had left the service. Acts of outreach by staff, such as phone calls and check-ins, meant young people felt cared for after leaving the residential site. This allowed them to





maintain a sense of connection to the service (and return to services if they needed), and instilled a feeling of belonging and that they had shared their "journey".

It's just, yeah, it's nice to have people who have seen my journey and stuff be supportive and, and all of that. So, it's really nice. (Aimee, Interview 3)

#### **Limits to care**

#### Providing care individually and communally

Within residential AOD services, relations between residents also affected their relationships with staff. For example, if a residential service was full, young people might feel that they received less attention from workers. Young people discussed conflict with peers that could make them feel less cared for by workers.

I had some good relationships [with rehab staff] and stuff, and, yeah, most of them were quite good. And, yeah, but like I guess, on the other hand, no-one really did anything when I was getting, when I was struggling with my roommate. I mean they moved me rooms. Like they, I got moved like to another room but it was still happening; all of the stuff with her. (Bridget, Interview 3)

# Co-producing care in structured environments

Because of the highly structured nature of many of the residential services, tensions arose when young people felt workers imposed care rather than tailored care to their needs. Some young people talked about how rules and expectations diminished their autonomy and had a knock-on effect for their relationships with staff.

Sometimes, you have workers that are really good but they're just constantly like, "Consequence!" and it just makes you trust them less, in a way. (Carmen, Interview 1)

#### Transitioning out of services

Young people felt uncertain about how meaningful relationships with staff would be maintained when they exited residential services, and were disappointed if the follow-up contact didn't meet their expectations. These transitions could be particularly difficult if young people felt coerced or rushed to leave.

You can't just grab someone from here, help them with like – you know give them all this care, then throw them out into this whole other space. There's got to be a transition period. (Emily, Interview 1)

# Conclusion

In residential AOD environments, the contexts and social networks of young people's lives are substituted with structured programs, peers and AOD workers. The relationships they form with staff during this time can be very important. Even though many young people acknowledge that the care work that staff do creates positive opportunities, clear dialogue between workers and residents may be useful in overcoming the limits in care that young people perceive. Talking openly can bridge the gap between what young people expect and what realistically happens in terms of care, and it can help set respectful boundaries and create a balanced relationship between the staff and the young people.





#### Recommendations: What does the research tell us we need to do

- Equip staff to have clear conversations with young people about how their needs can be met within the context of the residential service, including communicating the boundaries of staff-client relationships.
- Encourage communicative and supportive interactions between staff and young people as part of 'everyday practice'.
- Ensure workers within residential settings continually assess young people's needs and tailor their goals if needed.
- Prepare young people to transition away from residential services, including the options for maintaining engagement in the long-term.
- Assist young people in building up their care networks outside of the service, including external workers, friends and family.

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#### For the full paper:

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For more information about this project, please visit: <a href="https://www.unsw.edu.au/arts-design-architecture/our-schools/social-sciences/our-research/engagement-impact/our-projects/resource-landscapes-young-people-leaving-residential-drug-alcohol-services">https://www.unsw.edu.au/arts-design-architecture/our-schools/social-sciences/our-research/engagement-impact/our-projects/resource-landscapes-young-people-leaving-residential-drug-alcohol-services</a>



