

Understanding young people's relationships with residential AOD staff as an ethics of care

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Introduction: An important feature of young people's engagement with residential alcohol and other drug (AOD) services and of treatment effectiveness is their relationships with staff. Yet little research has unpacked young people's perspectives on what makes these relationships beneficial. We explore these relationships using an 'ethics of care' framework to highlight how young people's attitudes and actions can be shaped by AOD staff care practices.

Method: This paper draws on three waves longitudinal interviews with 38 young people from several states in Australia. Initial interviews were conducted while young people were in residential AOD services, with follow-up interviews conducted approximately 6 and 12 months afterwards.

Key Findings: Young people described how residential AOD staff enacted care ethics through respect, empathy, emotional support, and co-creating goals. Stronger relationships were formed when AOD staff were regarded as trusted mentors, rather than as authority figures or clinicians. However, structured programs that reduced young people's autonomy could impact on their capacity to build relationships with staff. Moreover, the logic of residential stays – intensive, structured, and sometimes short – impacted young people differently; some felt relationship loss after leaving, while others felt continued support and connection to services.

Discussions and Conclusions: Young people build important relationships and emotional connections with residential AOD staff, who have to maintain professional boundaries. Given the intensity of these relationships, an ethics of care approach might emphasise the importance of nurturing young people's competences and fostering other positive relationships, enabling them to feel supported both during and after their residential stays.

Practice or Policy Implications: Youth AOD services and residential staff work within funding systems that encourage professional relationships, but the care they provide often goes beyond this. Formally recognising the continuous care provided through staff relationships would allow services to better support their staff, and by extension, young people entering residential services.

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