Social work in contexts of vulnerability. Contributions regarding social intervention, access to services and the development of the field

Abstract of the Habilitation Thesis

Doctoral Field: Social Work

Conf.Univ.Dr. Mihaela RĂDOI

The habilitation thesis entitled “Social work in contexts of vulnerability. Contributions regarding social intervention, access to services and the development of the field” summarises the evolution of a research and academic development programme carried out in the field of social work, at its intersection with the sociology of health, the study of addictive behaviours and university education.

The programme is organised around a central theme – addictions, prevention and social intervention – and two other interrelated themes – vulnerability, health and access to services, and the training and wellbeing of social work professionals.

The thesis argues that substance dependence cannot be adequately explained or addressed through a single model centred exclusively on individual behaviour, clinical diagnosis or social control. Problematic substance use arises at the intersection of personal vulnerabilities, family and group relationships, socioeconomic conditions, cultural norms, the availability of substances and the way institutions operate. Consequently, the social work response must combine prevention based on risk and protective factors with multidimensional assessment, case management, service coordination, stigma reduction, and support for recovery and inclusion. This perspective has been developed progressively, from research into the prevalence of substance use and the analysis of explanatory theories, to the study of prevention within the family and at school, and subsequently to the systematisation of the social worker’s roles, stages and intervention tools.

The axis relating to vulnerability and health shows that access to educational, social and health services is not merely the formal existence of a service, but a process encompassing the recognition of need, provision of information, the practical ability to seek help, the acceptability of the service, the relationship with the professional, continuity and the achievement of a meaningful outcome for the service user. Research into the social determinants of health, trust in doctors and healthcare institutions, difficulties in the professional–beneficiary relationship, adherence to treatment and self-care has contributed to the formulation of a relational and institutional framework for access to services. Within this framework, inequalities in income, education, housing, employment and social capital influence both exposure to risk and an individual's ability to utilise services and sustain change.

The third axis concerns the conditions under which professionals in the field of social and socio-medical services are trained and carry out their roles. Studies on personal and professional values, perceptions of training, specialist practice and professional identity have been continued, in the context of the pandemic, through research into students' academic and professional concerns, social support, life satisfaction and well-being. The results indicate that professional training is not limited to the transfer of knowledge: it involves the integration of values, the exercise of judgement in complex situations, supervised practical experience and institutional support mechanisms. Student wellbeing is treated as a prerequisite for a sustainable transition into the profession, whilst practitioner wellbeing is viewed as a dimension of the quality and continuity of services.

The programme's originality stems from the articulation of these three pillars within an integrated model of social intervention. The model links: early identification; assessment of the individual within their environment; participatory development of the intervention plan; coordination of social, medical and educational resources; support for recovery and social roles; as well as the development and protection of professional capacity. The contributions are *theoretical* through the integration of the explanatory levels of addiction, *conceptual* by treating access as a relationship

between the individual's resources and the institution's responsiveness, *methodological* by combining theoretical analyses, quantitative and qualitative research, and the operationalisation of academic concerns, and *applied* by translating the results into teaching materials, assessment tools and guidelines for case management.

The development plan aims to strengthen the programme through research into access to services, the outcomes of integrated intervention and the well-being of professionals. It envisages the development of an interdisciplinary research hub, the involvement of service users and practitioners in programme design, the integration of research into the curriculum, and the translation of findings into guidelines, continuing professional development and policy recommendations.

Keywords: addictions; prevention; social intervention; vulnerability; access to services; professional training; wellbeing.