

Abstract

Background: Addiction in various forms is a part of people's lives, often accompanying them throughout their lives. The impacts of addiction are not limited to just the individual for whom addiction is a problem but also affect other family members. Therefore, it is desirable to work with other family members and close individuals using addictive substances when working with addiction clients, seeking together a way to manage the difficult situation. Addiction clients appear in various types of services, including social services, and it is precisely in these services that an addiction specialist with their transdisciplinary theoretical knowledge and skills could contribute to improving the life situations of families seeking social counseling, shelters, or utilizing socially activating services for families with children.

Objectives: The aim of the study is to map out the possibilities of employing addiction specialists in selected social services focusing on family work in Prague. Specific objectives address the question of whether and how selected facilities work with addiction clients and their families and how informed they are about the position of an addiction specialist and their scope of work.

Methods: Data collection was carried out through qualitative research using semi-structured interviews. Recorded audio interviews were transcribed into MS Word documents. Data were analyzed by creating categories and coding. Key excerpts illustrating the most significant themes were presented. Ethical considerations were observed.

Research sample: The basic sample consists of selected social services focusing on family work in Prague, comprising a total of 12 family counseling services (family counseling centers, counselling services for family, marriage, and interpersonal relations), 12 social care services (shelters), and 19 social prevention services (social activation services for families with children). The research sample was randomly selected using the = randbetween function in MS Excel. Three shelters, two social activation services, and one social counseling service were selected for the research.

Results: The research indicates that selected social services approach the issue of substance abuse among clients differently. Variations exist even among groups of the same type of facility, reflecting the diversity in addressing this issue. The primary work with addiction clients focuses mainly on monitoring participation in treatment programs and motivating treatment, often through parental skills and an open approach to addiction issues. Service leaders are aware of the scope of addictologist work. Two shelters and one social activation service express interest in collaborating with addictologists, particularly in prevention and external cooperation. However, one shelter and one social activation service face obstacles such as insufficient financial resources and a shortage of work positions. The second shelter sees no obstacles in employing an addictologist externally for prevention. Other services currently find

cooperation with addiction services satisfactory and state they do not need addictologist. In the case of increased utilization of family conferences by social services, an addictologist would find employment in a multidisciplinary team as one of the specialists.

Conclusion: Clients with addiction issues are increasingly appearing not only in addiction services but also in social services. An addictologist possesses competencies for work beyond the realm of healthcare services; however, the aim is not to replace any profession indiscriminately. The current situation, where selected social services closely collaborate with addiction services and thus do not directly require an addictologist within the facility's team, appears satisfactory. Nevertheless, there is still a need to further explore avenues for improving the care provided to clients.

Key words: addiction, addictologist, family, Prague, social services