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FACULTY OF SOCIOLOGY AND SOCIAL WORK
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SUMMARY OF THE DOCTORAL THESIS

**Collaborative Practices and Institutional Adaptation in Social Services for
Older People: A Qualitative Study with a Longitudinal Perspective in Cluj-
Napoca (2018–2025)**

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The COVID-19 pandemic simultaneously exposed the structural fragility and the latent adaptive capacity of the social services system for older people in Romania. This thesis investigates this tension through a qualitative study with a longitudinal perspective on the institutional ecosystem of social services for older people in Cluj-Napoca (2018–2025), analyzing how the collaborative practices developed between public institutions, non-governmental organizations and civic initiatives activated pre-existing relational resources and functioned as mechanisms of adaptation and resilience in the context of the crisis. The research uses constructivist Grounded Theory methodology (Charmaz, 2014) and is structured in two stages of data collection and analysis: Stage I (2021–2022) and Stage II (2025–2026). The central problem of the research is not whether institutions coped with the crisis in the short term, but which institutional capacities remained after the emergency pressure disappeared and through which mechanisms collaborative practices are transformed – or not – into durable forms of institutional resilience.

The introductory chapter situates the research in relation to the dual demographic and institutional urgency that shapes the field of social services for older people in Romania. The share of persons aged 65 and over exceeds 20% of the total population (Institutul Național de Statistică, 2024), the demographic ageing index exceeded 120 older persons per 100 young persons in 2023, and the social services system is marked by chronic underfunding, incomplete decentralization and structural dependence on inter-institutional collaboration. The COVID-19 pandemic amplified these vulnerabilities, forcing the emergence of unprecedented forms of collaboration and opening a rare window for observing institutional mechanisms under conditions of extreme stress.

The main gap addressed is twofold: the absence of a post-pandemic longitudinal perspective and the absence of a systematic analysis of the institutionalization trajectories of collaborative practices that emerged in the crisis. The originality of the research lies in the longitudinal perspective with two distinct stages of data collection, in the inclusion of informal civic initiatives as actors of analysis and in the integration of a threefold theoretical framework – neo-institutionalism, collaborative governance and organizational resilience. Through these elements, the research aims to contribute to a better understanding of the mechanisms through which inter-institutional collaboration activated in a crisis can be transformed into durable institutional capacity.

Chapter 1 – The Ageing Population and Social Services in Romania. The chapter outlines the situation of older people and of the social services system in Romania, providing the basis for an original study of the collaborative aspects of the system. Demographic ageing is analyzed as a multidimensional phenomenon: Romania records one of the fastest rates of demographic ageing in the EU – over 20% of the population is aged 65 and over (Institutul Național de Statistică, 2024) – with marked territorial inequalities: older people in rural areas, older women and persons with cumulative disabilities are the categories at the highest risk of social exclusion.

Ageing is examined through several theoretical lenses, such as disengagement theory, active ageing and constructivist perspectives. The main focus of the analysis is on the implications of ageing for the design and delivery of social services. The second part of the chapter presents the legislative framework of social services for older people – Law no. 292/2011 and Law no. 17/2000 – which distributes responsibilities across several administrative levels without concrete operational mechanisms for inter-institutional coordination, producing the structural fragmentation that forms the background of the research.

The chapter details care policies for older people, with an emphasis on the structural tension between the residential and the community-based model. Romania inherited a predominantly institutional orientation from the communist period. The pandemic revealed the costs of this orientation: residential centers proved particularly vulnerable to the transmission of infection, while community care allowed more effective individual isolation. The National Long-Term Care Strategy 2023–2030 (Government Decision no. 1492/2022) is a legislative response to these vulnerabilities, and the partnership between the Directorate of Social and Medical Assistance (DASM) and the Inspectorate for Emergency Situations (ISU) for the home vaccination of over 1,400 bedridden older persons in Cluj-Napoca concretely illustrates the type of intervention that the national strategy proposes as a model. The chapter concludes that inter-institutional collaborative practices are not a circumstantial option, but a structural condition for the functioning of the social services system for older people.

The research context is completed by the statistical data of DASM Cluj-Napoca (2018–2019), which provide a precise quantitative picture of the pre-pandemic ecosystem of the empirical research: home care services covered 13–18 beneficiaries per year out of a population of approximately 55,000 older persons (below 0.03%), the total residential capacity of 497 places represented less than 1% of potential need, and day centers had 2,800–3,750 members.

Empirical data confirm a significant gap between available funding and the real costs of services (Direcția de Asistență Socială și Medicală Cluj-Napoca, 2025): the subsidy granted to NGOs under Law no. 34/1998 covered less than half of the real cost of services, and the residential cost standard approved by Government Decision no. 426/2020 was 23,784 lei per year – below the real cost of care.

Chapter 2 – The COVID-19 Pandemic: Context and Social Impact. The pandemic is analyzed both as an institutional stress factor and as an accelerator of collaboration and organizational change. Older people were the most severely affected category: 95.6% of COVID-19 deaths in Romania occurred among persons with at least one comorbidity (Voicu et al., 2022), and digital exclusion massively amplified social isolation.

The pandemic simultaneously generated three types of institutional pressure: coercive – through mandatory ordinances and protocols; mimetic – through the rapid diffusion of effective improvised solutions; and normative – through the activation of social workers' professional networks. The chapter documents that the pandemic did not create inter-institutional collaboration from scratch, but activated a pre-existing latent relational capital – professional familiarity built up over years of institutional co-presence and rapidly converted into operational collaboration. The WhatsApp group of Local Public Authorities (APL) with 125 partners coordinated by the Prefect's Institution, the civic initiatives Un Singur Cluj and Vă ajutăm din Cluj, and the DASM–ISU partnership are empirically documented forms of this activation.

The chapter also shows that the pandemic did not create social inequalities, but amplified them and made them visible, in three forms: inequalities in mortality, inequalities in access to care – suspended services disproportionately affected persons without informal support networks – and digital inequalities. Civil society rapidly filled gaps in the public system: in March 2020, the Royal Margareta of Romania Foundation launched the Special Fund for Older People, which activated a network of social and support services for seniors in difficulty. The chapter concludes that the pandemic made visible both the latent resources of the system and its structural fragilities.

Chapter 3 – Integrated Theoretical Framework. The chapter builds the integrated analytical framework of the research, articulating three complementary theoretical perspectives. Neo-institutional theory (DiMaggio & Powell, 1983; Scott, 2014) provides the concepts of coercive, mimetic and normative isomorphism for analyzing the pressures that led to the adoption of collaborative practices. The framework is extended with perspectives on institutional agency (Battilana & D’Aunno, 2009) and institutional contradictions (Seo & Creed, 2002), which are needed to explain change, not only stability.

Collaborative governance theory (Ansell & Gash, 2008; Kania & Kramer, 2011) describes the conditions for successful inter-institutional collaboration and provides, through the Collective Impact model, the interpretive framework for the informal civic initiatives that spontaneously functioned according to this logic.

Organizational resilience theory (Boin & van Eeten, 2013; Li, 2026; Walker et al., 2004) assesses the capacity of institutions to absorb, adapt and transform in the aftermath of a crisis. The integrated analytical framework is operationalized directly in the data collection instruments and in the Grounded Theory (GT) analysis codes, ensuring the internal coherence of the research.

The theoretical framework integrates the Durkheimian concept of organic solidarity – based on the functional interdependence of specialized actors – which explains why collaboration crossed sectoral barriers during the pandemic without being formally imposed. The Iceberg model of systems thinking (Meadows, 2008) provides an analytical grid for understanding why intense crisis collaboration did not automatically produce lasting change: intervention at the level of visible events, without changing the generating structures and mental models, produces temporary adaptation, not institutional transformation.

The integrated analytical framework articulates these perspectives in a sequential logic: neo-institutional theory explains the pressures that led to the adoption of collaborative practices and the depth of change, through the three pillars of institutionalization – regulative, normative and cultural-cognitive (Scott, 2014); collaborative governance explains how collaboration functioned in the acute phase; and resilience theory, understood as a relational property of the institutional field rather than a fixed characteristic of individual organizations, explains the differentiated post-crisis trajectories.

Chapter 4 – Collaborative Practices in Social Services: A Conceptual Synthesis. The chapter reviews the literature on the forms and typology of inter-institutional collaboration in social services, identifying the main analytical dimensions: intensity, formality, directionality and temporality. Collaboration in crisis contexts adds a specific dimension: urgency produces rapid and effective but structurally fragile collaboration, dependent on external pressure for its continuation.

The digitalization of collaboration is analyzed as a transformation with dual effects: communication among the 125 partners of the APL group enabled a speed of decision-making impossible to achieve through formal channels, yet older beneficiaries remained largely outside this transformation – in Romania, only 28% of the population aged 16 to 74 has basic digital skills, the lowest level in the European Union. The chapter also analyzes the frailty of older people – physical, social and digital – as a structural factor that makes collaboration a condition of service delivery rather than an organizational option.

The chapter identifies an important gap in the scientific literature: the role of informal civic initiatives as actors of institutional collaboration is insufficiently theorized, as the literature focuses on formal actors with defined mandates. The empirical data of this research address this gap directly, documenting the mechanisms through which actors without stable legal personality exercised real coordination functions. The synthetic conclusion is that collaboration is not a structural given, but an actively constructed process, with a fundamental asymmetry between the capacity for rapid activation in a crisis and the capacity for durable institutionalization.

Chapter 5 – Methodology. The chapter describes the complete methodological design. Epistemologically, the research adopts a moderate constructivist position – it acknowledges the researcher's role in the construction of data without abandoning the claim to rigor and validation through triangulation. The choice of constructivist Grounded Theory (Charmaz, 2014) is consistent with the aim of generating analytical categories emerging from the data rather than testing predetermined hypotheses.

The general objective is operationalized through five research questions: pre-pandemic organization and latent relational capital; forms of pandemic collaboration; the maintenance, transformation or abandonment of practices after the pandemic; actors' perceptions; and

implications for sustainable models. The choice of Cluj-Napoca is theoretically justified: the density of the local institutional ecosystem creates optimal conditions for observing collaborative mechanisms in all three forms identified.

Theoretical sampling targeted three types of actors: a public institution with an intersectoral coordination role, non-governmental organizations and informal civic initiatives. The empirical corpus comprises 16 actors and sources: eight in Stage I and eight formal interviews in Stage II. Stage I (2021–2022) combined exploratory discussions and a semi-structured interview with actors from the ecosystem, reconstructed as GT analytical memos, with primary institutional documents and verified public sources – triangulated for validation. Stage II (2025–2026) included eight formal semi-structured interviews, documented through transcripts validated by the participants. The analysis followed the three-stage GT procedure: open coding (47 codes), axial coding (6 analytical families) and selective coding (the core category), using Microsoft Word and Excel. GT analytical memos form the bridge between raw data and theoretical categories and ensure the traceability of the analytical process. The research was approved by the UBB Ethics Committee, approval no. 227/26.03.2026.

The longitudinal perspective adopted does not involve interviewing the same persons repeatedly, but following the same organizations and the same institutional field over seven years – making it possible to capture institutional changes that occur slowly, through progressive sedimentation.

The chapter explicitly acknowledges the limits of the research. Its focus on a single municipality, with a comparatively developed civic infrastructure, calls for analytical rather than statistical generalization. The retrospective character of part of the data was offset by triangulation with primary documents from the pandemic period. The risk of confirmation bias arising from the author's previous professional involvement in the field was mitigated through reflexive memos, constant comparison across sources and stages, and analytical review by the doctoral supervisor. Civic initiatives without permanent legal structures were documented through verified public sources and through interviews with the institutional actors who collaborated with them, while the direct perspective of older beneficiaries remains a direction for future research.

Chapter 6 – Findings: Collaborative Practices and Institutional Adaptation. The chapter presents the empirical data, organized longitudinally in four sections.

Section 6.1 reconstructs the pre-pandemic ecosystem along two complementary dimensions. Section 6.1.1 documents the legal framework applicable to social services for older people – Law no. 17/2000, Law no. 292/2011 and Law no. 34/1998 – and maps the configuration of services before, during and after the pandemic. Day centers were closed under ANDPDCA provisions; home-delivered meals expanded through the partnership with the HoReCa sector (NGO-2: from 25 to 140 beneficiaries in 7 days); home vaccination of more than 1,400 bedridden older persons emerged as a new service through DASM–ISU collaboration. After the pandemic, home-delivered meals stabilized at a level above the pre-pandemic one, partial digitalization became an established practice, and the APL group with 125 partners is still active in 2026. The second dimension (6.1.2) documents the actors of the ecosystem and the latent relational capital: established professional relationships that did not translate into formal collaboration but enabled rapid activation in the crisis. Concrete data include approximately 55,000 older persons in the municipality, 497 residential places (under 1% of the population), and 25 beneficiaries of NGO-2's home-delivered meals service before the pandemic compared with 140 in the first 7 days of the pandemic.

The pandemic generated three simultaneous forms of collaboration: vertical coordination through the Prefect's Institution (the APL group with 125 partners), horizontal coordination through informal civic initiatives, and direct operational collaboration (the DASM–ISU partnership for the vaccination of more than 1,400 bedridden older persons). Post-pandemic trajectories proved structurally asymmetric: transformation (the Prefect's Institution), legitimized reversibility (DASM), consolidated recovery (NGOs) and latent resilience (civic initiatives).

Vertical coordination was structured around the Prefect's Institution, which was absent as a significant actor in the pre-pandemic data on social services but became the central node of intersectoral coordination in the first days of the crisis. The coordination infrastructure combined three levels: the APL WhatsApp group with 125 institutional and civic partners, the Microsoft Teams platform with DSU-GOV access, and daily meetings of the County

Committee for Emergency Situations (CJSU) in the acute phase; the Prefecture published three COVID-19 guides and explicitly named civic initiatives as active partners. The model was not one of command and control but of facilitation and legitimation, and the role of pre-existing relational capital is captured directly by participants: partners “knew whom to call, without needing to introduce themselves” (representative of the Prefect's Institution, Stage II, 2026).

Horizontal coordination was provided by informal civic initiatives, grouped inductively into three profiles. The intersectoral platform *Un Singur Cluj*, set up on 30 March 2020 by the organizers of the city's major festivals together with local and county authorities, raised approximately 191,538 euros in about 60 days, with more than 100 partner organizations, empirically meeting the conditions of the Collective Impact model without prior deliberate design. The volunteer network *Vă ajutăm din Cluj*, launched on 16 March 2020, mobilized 450 members and 92 active volunteers, delivered 537 packages to 345 beneficiaries and, through its call center, functioned as a pandemic social dispatch service; its complementarity with DASM – the institution assessed the need, the network delivered the response – worked without any written protocol. The third profile consists of specialized volunteer groups (*Beard Brothers Cluj*, *CERT Transilvania*, *Rescue 4&4*), which acted as extensions of the formal emergency structures.

Direct operational collaboration produced measurable results: home vaccination of more than 1,400 bedridden older persons, carried out with a single ambulance, increased from 12 to 24 persons vaccinated per day; NGO-2's home-delivered meals service grew from 25 to 140 beneficiaries in the first week, through a partnership with restaurants whose activity had been suspended; DASM counselled and monitored 853 older persons online, with approximately 280 monthly participants in its online activities. The data also document forms of distributed case management, in which several actors informally coordinated the needs of the same beneficiary, the medical–social interface in the Emergency Department, and the uninterrupted continuity of NGO-3's social canteen, which discovered a new civic network during the crisis: “We learned to know each other better, to discover our ‘neighbours’ and fellow professionals” (NGO-3, Stage II, 2026).

Non-governmental organizations showed recovery and consolidation: pandemic capacities were integrated into their operating models, and socialization groups doubled compared with the pre-pandemic level. The Prefect's Institution underwent a transformation of mission: the intersectoral coordination capacities built during the pandemic were explicitly transferred to the 2022 Ukrainian refugee crisis. DASM Cluj-Napoca illustrated legitimized reversibility: a coherent return to its core operational mission. Civic initiatives entered latent resilience: the platforms were not formally institutionalized, but the networks remain mobilizable (for the conceptual tripartition into active, latent and preparedness-oriented resilience, see section 6.3.4).

Interview data illustrate these trajectories directly. For the Prefect's Institution, the pandemic functioned as a dress rehearsal: “When the refugee crisis came, we knew exactly what to do.” (representative of the Prefect's Institution, Stage II, 2026). For DASM, the return to the status quo is perceived as an adaptation consistent with its mission: “The emergency was over and it was normal for the collaborations related to it to end as well.” (PUB-02, Stage II, 2026). Within latent resilience, three sub-trajectories were identified inductively: active – Un Singur Cluj, reactivated in 2022 for the Ukrainian refugee crisis through the same mechanisms; continuous – Vă ajutam din Cluj and SuperMed, the latter moving from a civic initiative to a permanent community medicine service; and dormant – Beard Brothers Cluj, CERT Transilvania and Rescue 4&4, which returned to civic invisibility, with no mechanism for recording their contribution.

The longitudinal analysis makes it possible to identify the conditions that differentiate institutional trajectories: organizations that systematically documented their pandemic practices maintained an institutional memory that facilitated recovery or transformation. Organizations that did not document them – often because of insufficient resources – lost the accumulated knowledge once the emergency was over. This produces a structural inequality in the capacity to benefit from one's own crisis experience.

The final section synthesizes the Grounded Theory model: the 47 codes were organized through axial coding into six analytical families – inter-institutional collaboration (A), structural barriers (B), the crisis as an accelerating factor (C), differentiated post-pandemic

institutionalization (D), asymmetric resilience by type of actor (E) and structural profiles of actors (F). Selective coding led to the core category: adaptive cross-sectoral coordination as a mechanism of institutional adaptation differentiated by the structural type of the actor. The integrative model follows the conditions – mechanism – actions – consequences scheme and answers the central research question: why the same pandemic shock produced different types of resilience among actors in the same institutional field.

Chapter 7 – Discussion: Adaptive Cross-Sectoral Coordination. The chapter proposes the central explanatory mechanism of the research: adaptive cross-sectoral coordination. This mechanism describes how collaboration is rapidly activated in a crisis through the mobilization of latent relational capital, while post-crisis institutionalization depends on the actor's structural position – the mandate, resources and time horizon of the organization – rather than on the intensity of collaboration during the acute period.

The mechanism operates in three steps: latent relational capital radically reduces the transaction costs of cooperation in an emergency; the crisis acts as an accelerating factor; and the type of adaptation depends on the actor's mandate and structural position, not on its competence or will. The analysis of institutional pressures shows that pandemic practices operated predominantly at the level of informal norms of professional behavior, without systematically penetrating the regulative or cultural-cognitive pillar (Scott, 2014), which explains why most collaborations stopped once the emergency disappeared. The findings extend the typology of institutional resilience proposed by Li (2026) – absorption, adaptation and transformation – by adding latent resilience and the structural dimension of the institutional field.

The chapter identifies three recurrent structural dilemmas of theoretical and practical relevance: the tension between persistent relational capital and the failure of institutional memory – relationships survive the crisis, procedures do not; the opposition between the speed of informal collaboration and the legitimacy of formal structures; and the tension between the digitalization of professional coordination and the digital exclusion of older beneficiaries. The first dilemma underpins one of the central recommendations of the thesis: investment in institutional knowledge management functions.

A second inductively identified mechanism is institutionalization through mission extension, a concept derived from the analysis of the Prefect's Institution case. The transfer of capacities developed during the pandemic to the management of the Ukrainian refugee crisis did not involve a formal change of the institutional mandate, but the reuse and contextual extension of the same relational, organizational and procedural resources. In Streeck and Thelen's (2005) terms, the mechanism operates as a form of layering – the addition of new functions on top of existing structures, without replacing them – through the contextual extension of the mission.

The three persistent structural dilemmas identified in the research are analyzed through the typology proposed by Viggiani (1997). The first highlights the tension between the persistence of relational capital and the fragility of institutional memory. Although the professional relationships built during the crisis survived and remained mobilizable, the accumulated institutional knowledge was not systematically transformed into procedures, organizational routines or institutional learning mechanisms. Consequently, every new crisis risks restarting formal coordination almost from scratch, as one participant aptly summarized: “We did not write down anywhere what worked. If others come, they will start from scratch.” (NGO-2, Stage II, 2026). The second dilemma concerns the tension between the speed and flexibility of informal collaboration and the legitimacy and formalization requirements of institutional structures. The third highlights the contrast between the accelerated digitalization of professional coordination and the persistence of digital exclusion among older beneficiaries. From a systems-thinking perspective (Meadows, 2008), these three dilemmas do not act in isolation but form a system of mutually reinforcing vulnerabilities that affect the adaptive capacity and resilience of the institutional ecosystem.

Conclusions. The conclusions provide direct answers to the five research questions, showing that post-pandemic institutional resilience has a structurally asymmetric character: the same pandemic shock generated four distinct trajectories – transformation, legitimized reversibility, consolidated recovery and latent resilience – differentiated by the mandate and structural position of the actors, not by their competence or motivation. The sustainability of collaboration depends on three simultaneous structural conditions: a formal mechanism of

permanent coordination, funding of services at their real cost, and the systematic codification of good practices.

In short, the pre-pandemic ecosystem was characterized by insufficiently developed formal collaboration but significant latent relational capital; the pandemic activated this capital in three forms of collaboration – vertical, horizontal and operational – that were operationally effective but structurally fragile; post-pandemic institutionalization was asymmetric, and the main failure was not the loss of collaboration but the absence of codification of good practices; the actors' perceptions reflect their structural positions – those with stable resources and clear mandates perceive change as durable, while those with occasional resources perceive it as fragile. Without the structural conditions listed above, the crisis experience remains an episode, not a resource.

The conclusions put forward five concrete public policy recommendations, anchored directly in the empirical data: (1) investment in permanent collaborative infrastructure at municipal and county level; (2) revision of the subsidy mechanism under Law no. 34/1998 so as to cover the real cost of services; (3) the creation of dedicated institutional knowledge management functions, enabling the systematic codification and transfer of good practices generated in the crisis; (4) the mapping of civic capacity and the transformation of dormant latent resilience into preparedness-oriented resilience (Wildavsky, 1988); and (5) the systematic inclusion of the perspective of older beneficiaries in the design and evaluation of services. Five directions for future research are identified: a comparative study across several local contexts, a module dedicated to the perspective of older beneficiaries, an analysis of the impact of Order no. 2489/2023 on case management, longitudinal continuation in Stage III (2027–2028), and the integration of artificial intelligence tools in the coordination of services for older people.

The theoretical, empirical and methodological contributions are presented below, after the empirical documentation, as the cumulative result of the research.

From a theoretical perspective, the first contribution is the identification of the conditions under which collaboration between public institutions and private organizations

becomes possible, effective and partly durable: the convergence of pre-existing relational capital, sufficiently intense external pressure and at least one actor with coordination capacity. The second contribution is the conceptualization of the model of four institutional resilience trajectories – transformation, legitimized reversibility, consolidated recovery and latent resilience – and the empirical demonstration of the asymmetric character of resilience as a property of the institutional field rather than of individual organizations. The research introduces three original concepts: adaptive cross-sectoral coordination, institutionalization through mission extension and asymmetric resilience. In addition, it proposes the tripartition of civic resilience – active, latent and preparedness-oriented – refined through the inductive identification of three sub-trajectories of latent resilience: active (reactivable), continuous and dormant.

From an empirical perspective, the research documents longitudinally, over seven years, the evolution of collaborative practices in a specific institutional ecosystem in Romania, offering a replicable model and a comparative basis for future research in post-socialist contexts with underfunded social service systems in transition.

From a methodological perspective, the research contributes to the literature on the use of constructivist Grounded Theory (GT) in longitudinal designs with retrospective data, offering a model of triangulation between GT analytical memos, primary institutional documents and verifiable public sources – useful in situations where contemporaneous data collection was not possible for objective reasons.

Keywords: institutional collaboration; collaborative governance; social services for older people; organizational resilience; neo-institutionalism; COVID-19 pandemic; institutional adaptation.