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Practice, Partnership, and Progress: Social Work's Contribution to the SDGs and Community Wellbeing

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Abstract
The 2030 Agenda for Sustainable Development, with its 17 Sustainable Development Goals (SDGs), presents both a formidable challenge and a significant opportunity for the social work profession. While social work's historical and ethical foundations are deeply aligned with the principles of social justice, equity, and human dignity that underpin the SDGs, the profession's traditional focus on micro-level interventions has often limited its engagement with broader systemic and structural change. This conceptual paper argues for a strategic repositioning of social work towards a more interdisciplinary and macro-oriented practice framework to effectively contribute to the achievement of the SDGs and build sustainable, resilient communities. By examining the intersections of social work with fields such as urban planning, public health, environmental science, and the law, the researcher demonstrates the necessity of moving beyond siloed approaches. This paper synthesizes existing literature to propose a model for interdisciplinary social work practice that is equity-centered, community-driven, and policy-engaged. It explores practical implications for social work education, particularly the need for curriculum reforms that embed the SDGs and foster competencies for interdisciplinary collaboration. Through an analysis of the profession's contributions to key SDGs, including SDG 11 (Sustainable Cities), SDG 3 (Good Health and Wellbeing), and SDG 16 (Peace, Justice, and Strong Institutions), this paper illustrates how interdisciplinary social work can serve as a catalyst for sustainable development, health equity, and community resilience. Ultimately, this paper asserts that to remain relevant and effective in the 21st century, social work must fully embrace its role as a bridging discipline, actively engaging in interdisciplinary partnerships to address the complex, interconnected challenges of our time.

Keywords: Interdisciplinary Social Work, Sustainable Development Goals (SDGs), Community Resilience, Health Equity, Macro Social Work, Social Work Education

1. Introduction

The world stands at a critical juncture, confronting a confluence of interconnected crises that threaten the wellbeing of communities and the sustainability of the planet. Climate change, widening socioeconomic inequality, persistent health disparities, forced migration, and political instability are not isolated issues but are interwoven manifestations of systemic injustice (Alston, 2015; Dominelli, 2012) [2, 42]. The United Nations' 2030 Agenda for Sustainable Development, with its 17 Sustainable Development Goals (SDGs), provides a comprehensive blueprint for addressing these global challenges by promoting a holistic vision of development that balances economic, social, and environmental dimensions (United Nations, 2015). The SDGs explicitly call for interdisciplinary partnerships and integrated approaches, recognizing that progress in one area is dependent on progress in others (UNRISD, 2016).

Within this complex landscape, the social work profession is uniquely positioned to play a pivotal role. With its core values of social justice, human rights, collective responsibility, and respect for diversities, social work is intrinsically aligned with the ethos of the SDGs (Ife, 2012; Reichert, 2018). For decades, social workers have been on the front lines, addressing the consequences of poverty, violence, and inequality, working with individuals, families, and communities to navigate adversity and build resilience (Healy, 2014 [68]; Payne, 2014). However, the very nature of the contemporary crises demands more than a remedial, case-by-case response. The problems are systemic, and their solutions require a shift from a predominantly micro and clinical focus to a more macro and interdisciplinary approach (Austin, 2018 [7]; Mulvale, 2019).

This paper explores the critical and multifaceted role of interdisciplinary social work in advancing the SDGs and fostering

sustainable development, health equity, and community resilience. The researcher contends that the profession's effectiveness in the 21st century hinges on its ability to move beyond traditional silos and embrace collaborative practice with a diverse array of professionals, including urban planners, public health practitioners, environmental scientists, legal experts, and policymakers (Bronstein, 2003; Clark, 2006) [21, 34]. The paper is structured as follows: first, the researcher establishes the conceptual foundations, defining the core principles of interdisciplinary social work and its relationship to sustainability, resilience, and equity. Second, the researcher examines social work's specific contributions to key SDGs, drawing on illustrative examples from the literature. Third, he proposes a model for interdisciplinary practice grounded in equity and collaboration. Finally, the paper discusses the crucial implications for social work education, emphasizing the need for curriculum reform to prepare a future workforce capable of leading interdisciplinary efforts for sustainable development.

2. Conceptual Foundations of Interdisciplinary Social Work for Sustainable Development

2.1 The Imperative of Interdisciplinarity

The challenges of the 21st century are characterized by their complexity and interconnectedness, defying simple solutions that can be crafted within the boundaries of a single discipline. Climate change is not merely an environmental problem; it is a social problem that exacerbates poverty, drives migration, and deepens health inequities (Gasper *et al*., 2019 [54]; Rudiak-Gould, 2013). Urban poverty is not just an economic issue; it is intertwined with housing policy, public health infrastructure, and social cohesion (Sassen, 2014; UN-Habitat, 2016). To effectively address such "wicked problems," collaboration across disciplines is not merely beneficial but essential (Churchman, 1967 [33]; Rittel & Webber, 1973).

Interdisciplinary practice involves a synergistic integration of knowledge, methods, and perspectives from different fields to create a more comprehensive and effective response than any single discipline could achieve alone (Klein, 2010; Repko *et al*., 2016). This goes beyond simple multidisciplinary collaboration, where professionals work in parallel; it requires a true fusion of expertise to develop innovative solutions that address the root causes of complex social problems (Bruhn, 2000 [23]; Nancarrow *et al*., 2013). Social work, with its person-in-environment perspective, systems orientation, and focus on the interaction between individuals and their social, political, and economic contexts, is a natural hub for such collaboration (Germain & Gitterman, 1996 [58]; Meyer, 1983).

2.2 Linking Social Work, the SDGs, and Sustainability

The SDGs provide a unifying framework for interdisciplinary efforts. Goal 17 specifically emphasizes the need for partnerships and collaboration to achieve the entire agenda (United Nations, 2015). Social work's contributions to the SDGs are substantial and multi-layered (Baikady *et al*., 2020 [10]; Midgley, 2017). At a macro level, social workers advocate for policies that address social determinants of health, reduce inequality (SDG 10), and promote decent work and economic growth (SDG 8) (Lombard & Twikirize, 2014; Sowers & Rowe, 2020). At the community level, they facilitate participatory processes to ensure that urban development is inclusive and sustainable (SDG 11) (Craig & Mayo, 2014 [38]; Ledwith, 2020). At the individual and family levels, they support empowerment, enhance wellbeing (SDG 3), and strengthen capacities to cope with adversity (Greene, 2017 [63]; Saleebey, 2013).

However, for many practitioners and students, the SDGs can seem abstract and disconnected from their daily work (Mehta & Phuyal, 2019; Webb, 2020). The challenge lies in bridging the gap between the global goals and local practice. The "TOMA" model, Theory, Organization, Methods, Application, offers one such bridge by providing a structured framework for integrating the SDGs into social work curriculum and practice (Borrmann, 2025) [18]. By grounding the SDGs in concrete theoretical frameworks, organizational contexts, methodological approaches, and practical applications, social workers can translate these ambitious global aspirations into tangible local action.

2.3 Community Resilience and Health Equity as Goals of Interdisciplinary Practice

Two key outcomes of effective interdisciplinary social work are the enhancement of community resilience and the promotion of health equity. Resilience is the capacity of a community to anticipate, adapt to, and recover from adversities, including natural disasters, economic shocks, and social upheaval (Berkes & Ross, 2013 [16]; Norris *et al*., 2008). Building resilient communities is not just about having robust infrastructure; it is fundamentally about strengthening social capital, the networks of trust, reciprocity, and mutual support that enable communities to mobilize resources collectively (Coleman, 1988 [35]; Putnam, 2000). Social work's core competency in community organizing and development is vital for building this social capital (Minkler, 2012; Weil & Gamble, 2005).

Health equity, defined as the absence of avoidable, unfair, or remediable differences in health among population groups, is another central goal (Braveman *et al*., 2017 [19]; Marmot, 2005). Social workers have long understood that health is determined not just by access to medical care but by the broader social determinants of health (SDOH), such as housing, education, food security, and income (Hughes *et al*., 2017; Miller, 2011). Interdisciplinary collaborations are often necessary to address these root causes (Andermann, 2016; Gehlert *et al*., 2008) [4, 57]. For instance, a social worker and a public health official might collaborate on a community health worker program to address diabetes management (SDG 3), while also advocating for policies to improve access to fresh food in underserved neighborhoods (SDG 2) and safe spaces for physical activity (SDG 11) (Brownson *et al*., 2017 [22]; Marmot *et al*., 2012).

3. Social Work's Engagement with the Sustainable Development Goals

3.1 SDG 11: Sustainable Cities and Communities

Urbanization is one of the defining trends of the 21st century, bringing both opportunities and challenges. Cities are engines of economic growth, but they are also sites of profound inequality, where poverty, homelessness, and social exclusion are concentrated (Amin & Thrift, 2017; Harvey, 2008) [3, 65]. Social work has a long history of practice in urban settings, addressing housing instability, community strife, and lack of access to services (DeFilippis & Saegert, 2008; Fisher & Karger, 2011) [40, 47].

Integrating social work into urban development strategies is crucial for achieving SDG 11, which aims to make cities safe, resilient, inclusive, and sustainable (UN-Habitat, 2016). Social workers can contribute by engaging in participatory planning to ensure that the voices of marginalized communities are heard in urban decision-making processes (Forester, 1999; Gaventa, 2006) [48, 55], advocating for equitable housing policies to prevent displacement (Desmond, 2016 [41]; Marcuse, 2009), and promoting social cohesion through programs that build trust and social capital in diverse neighborhoods (Forrest & Kearns, 2001 [49]; Putnam, 2007).

An interdisciplinary lens is critical here. A social worker collaborating with an urban planner can help ensure that the design of a new public space considers not only traffic flow and aesthetics but also social safety and accessibility for all residents (Carmona, 2010 [29]; Low, 2013). This collaborative model recognizes that sustainable cities are not just built structures but are lived social and political ecologies (Gehl, 2010 [56]; Jacobs, 1961).

3.2 SDG 3: Good Health and Wellbeing

Promoting health and wellbeing is a central tenet of social work practice (Beder, 2006; Gitterman & Germain, 2008) [15, 59]. Social workers are trained to address the social determinants of health, making them indispensable members of interdisciplinary healthcare teams (Allen *et al*., 2014 [1]; Rozas *et al*., 2015). They connect patients with essential resources, provide counseling, navigate complex healthcare systems, and advocate for health-promoting policies (Ruth & Marshall, 2017; Schilling & Gitterman, 2018).

The COVID-19 pandemic starkly illustrated the importance of interdisciplinary collaboration and the crucial role of community-based workers. The "Community Health Workers for COVID Response and Resilient Communities" (CCR) program in the United States was a massive investment in this workforce (Peretz *et al*., 2022). The evaluation of the CCR program revealed that community health workers (CHWs), whose values and approach are well-aligned with social work, played a critical role in fostering community resilience and addressing health disparities during the pandemic (Stalker *et al*., 2026). They conducted over a million referrals, reached millions of community members with health education, and established hundreds of partnerships (CCR, 2022) [30]. This large-scale initiative is a testament to the power of embedding community-based, social justice-oriented practitioners within public health infrastructure.

Furthermore, interdisciplinary social work is vital in specialized health contexts. For example, a model for interdisciplinary collaboration in oncology has been developed that explicitly integrates screening and assessment, culturally responsive care, equity-centered interventions, and interdisciplinary collaboration (Brevil, 2025) [20]. This model, while developed for veterans with marginalized identities, provides a framework for improving health outcomes in any population by ensuring care is holistic and rooted in social justice (Simon & Sanders, 2021). Similarly, an interdisciplinary sociolegal model developed in a legal clinic setting demonstrates how social work and legal supervision can be integrated to enhance service quality, reduce professional burnout, and improve student competencies, with direct implications for health and wellbeing (Palacios-Pizarro *et al*., 2025).

3.3 SDG 16: Peace, Justice, and Strong Institutions

SDG 16 is foundational to the entire 2030 Agenda, as sustainable development cannot occur in the absence of peace, justice, and effective institutions (Galtung, 1969 [52]; United Nations, 2015). Social work has a deep commitment to these principles, with a long history of engaging in conflict resolution, community mediation, restorative justice, and violence prevention (Barsky, 2017 [14]; Ramanathan & Link, 1999). In urban settings, social workers mediate between opposing community groups, work on youth violence prevention, and advocate for fairer, more equitable legal institutions (Bush & Folger, 2005 [28]; Umbreit, 2001).

An interdisciplinary practice framework is particularly potent in this domain. The collaboration between social workers and legal professionals is a prime example (Barker, 2018 [12]; Krumer-Nevo, 2016). The "Justice, Care, and Collaboration" model for supervision in interdisciplinary legal practice demonstrates how joint supervision can clarify professional roles, promote collaborative decision-making, and significantly reduce professional burnout while enhancing resilience (Palacios-Pizarro *et al*., 2025). This model underscores that access to justice and effective institutions is not just a legal matter but a socio-legal one, requiring the holistic support that social workers provide (Garland, 2001 [53]; Tonry, 2010).

3.4 Environmental Justice and Ecosocial Work

As the climate crisis intensifies, the concept of environmental justice becomes inseparable from social work practice (Dominelli, 2013 [43]; Kemp & Palinkas, 2015). Environmental degradation disproportionately impacts marginalized communities, who often lack the resources to adapt to climate change (Bullard, 2008 [25]; Shue, 2014). Social work's commitment to social justice compels the profession to confront this reality (Gray & Coates, 2015 [62]; Matthies & Närhi, 2018).

A "reimagining of macro social work" is urgently needed to center environmental justice and health equity (Austin, 2025 [8]; Ranta-Tyrkkö, 2023). This requires moving beyond traditional, nationally-focused paradigms to address global and transnational challenges such as disaster capitalism, food insecurity, and the dispossession of essential resources (Klein, 2007; Peet & Watts, 2004). Interdisciplinary collaborations with environmental scientists, activists, and urban planners are essential (Bäckstrand, 2003 [9]; Lidskog, 2014). In the sustainability discourse, social workers can move beyond conventional practices to advocate for degrowth economics, and promote projects that demonstrate the innovative role of social work in sustainability transitions (Shackelford *et al*., 2025). For example, educators have combined social work, sustainability education, and research in a module designed to raise students' consciousness about the impact of social inequality on communities' ability to withstand climate change (Anghel & Tait, 2025) [5]. These educational experiences are crucial for cultivating the next generation of social workers who are equipped to function as effective agents of change for environmental justice (Maguire, 2021; Powers *et al*., 2019).

4. A Proposed Model for Interdisciplinary Social Work Practice

Building on the literature reviewed, the researcher proposes a model for interdisciplinary social work practice that is

comprised of four interconnected components: (1) Equity-Centered Assessment, (2) Collaborative Intervention and Planning, (3) Cross-Sectoral Partnerships, and (4) Policy Engagement and Advocacy.

1. Equity-Centered Assessment: This component mandates that all assessments be grounded in a critical analysis of power, privilege, and oppression (Goffman, 2019 [60]; Mullaly, 2007). It moves beyond individual-level problem identification to systematically map the social, economic, and environmental determinants that shape the problem (Solar & Irwin, 2010; WHO, 2008). This assessment is not a solitary activity but involves community partners and stakeholders, ensuring that the framing of the problem is co-created by those most affected (Chambers, 1997; Freire, 1970) [31, 51].

2. Collaborative Intervention and Planning: This component is the core of interdisciplinary action (Engel, 1977 [44]; Young & Reed, 1995). Drawing on the insights from the assessment, professionals from various disciplines co-design integrated interventions (Hall & Weaver, 2001 [64]; Reeves *et al*., 2010). This could involve social workers, urban planners, and public health officials jointly developing a community-based program to address food insecurity and promote physical activity, or social workers, lawyers, and healthcare providers co-locating services for immigrant families (Heywood, 2005; Tarman, 2016). The emphasis is on blending the unique expertise of each profession to create a holistic and effective solution (D'Amour & Oandasan, 2005 [39]; Zwarenstein *et al*., 2005).

3. Cross-Sectoral Partnerships: This component focuses on the relational infrastructure needed to sustain interdisciplinary work (Bryson *et al*., 2006; Gray & Wood, 1991) [24, 61]. It involves identifying, building, and maintaining partnerships not just with human service agencies but with organizations across sectors, including housing authorities, public health departments, schools, legal aid, and community-based organizations (Annie E. Casey Foundation, 2017 [6]; Kania & Kramer, 2011). A key insight from research on community capacity-building is that successful partnerships require a focus on building social capital and mutual trust to ensure that networks persist and are usable (Kania & Kramer, 2011; Putnam, 2000).

4. Policy Engagement and Advocacy: This component ensures that the work at the micro and meso levels informs and drives macro-level change (Figueira-McDonough, 2007 [46]; Jansson, 2014). Interdisciplinary teams must leverage their expertise and frontline knowledge to advocate for policies that address the root causes of the problems they encounter (Burns & Thomas, 2019; Hawker *et al*., 2022) [26, 67]. This could involve advocating for zoning laws that promote affordable housing, policies that fund community health worker programs, or legislation that protects the environment (Buse & Hawkes, 2016 [27]; Rinfret *et al*., 2020). The model emphasizes that social work is inherently a political and policy practice, and effective advocacy requires a collaborative voice that speaks with strength across disciplines (Hasenfeld, 2010 [66]; Jansson, 2018).

5. Implications for Social Work Education

Preparing the next generation of social workers for interdisciplinary practice requires a significant and deliberate transformation in social work education (Austin, 2018; Council on Social Work Education, 2022) [7, 37]. The current curriculum often privileges individual-level clinical skills, leaving students underprepared for macro practice, policy advocacy, and interdisciplinary collaboration (Pritzker & Lane, 2020; Rothman & Mizrahi, 2014). To meet the demands of the 21st century, educators must:

1. **Embed the SDGs across the Curriculum:** The SDGs should not be a standalone topic but a framework that informs all courses (Baikady *et al*., 2020 [10]; Webb, 2020). This aligns with the TOMA model, where students learn the Theory, Organization, Methods, and Application of social problems in relation to the SDGs (Borrmann, 2025) [18]. This systematic integration helps students connect local practice with global goals (Jones, 2019; Mapp, 2021).
2. **Teach Competencies for Interdisciplinary Collaboration:** Students need formal training in how to work effectively with other professionals (Freeth *et al*., 2005 [50]; Reeves *et al*., 2011). This includes understanding the roles and ethics of other disciplines, learning to communicate across professional boundaries, and developing skills in conflict resolution and collaborative decision-making (Baker *et al*., 2018 [11]; Thistlethwaite & Moran, 2010). The sociolegal model provides a concrete example of how joint supervision can instill these competencies (Palacios-Pizarro *et al*., 2025).
3. **Create Experiential Learning Opportunities:** Field practicums and other experiential learning opportunities should be designed to expose students to interdisciplinary work (Bogo, 2010 [17]; Wayne *et al*., 2010). This could be facilitated by placing students in settings where they are required to collaborate, or by structuring inter-professional projects within the curriculum (Barrett *et al*., 2013; Cook *et al*., 2012) [13, 36]. The success of programs like the CCR initiative underscores the value of training students for roles that bridge the gap between health care and social services (Peretz *et al*., 2022).
4. **Reinforce a Macro and Policy-Oriented Mindset:** Education must challenge the student's internalized bias towards clinical work and reinforce the importance of macro social work and policy practice (Ezell, 2009 [45]; Pritzker & Burwell, 2016). This includes providing robust coursework on community organizing, advocacy, and policy analysis and ensuring that these are framed not as optional specializations but as essential competencies for all social workers (Chambers & Wedel, 2005; Figueira-McDonough, 2007) [32, 46]. The discourse on environmental justice and sustainability demonstrates the necessity of macro skills to address the root causes of social problems (Austin, 2025 [8]; Powers *et al*., 2019).

6. Conclusion

The Sustainable Development Goals provide a vital roadmap for a more just, equitable, and sustainable world. Achieving this ambitious agenda demands a paradigm shift in how we approach social problems. We must move beyond siloed interventions and embrace interdisciplinary collaboration. Social work, with its person-in-environment perspective, ethical commitment to social justice, and focus on vulnerable populations, is uniquely positioned to lead this charge.

This paper has argued for a strategic repositioning of the

profession, advocating for a move from a predominantly micro-clinical focus to a more macro-oriented, interdisciplinary practice framework. By actively engaging with fields such as urban planning, public health, environmental science, and the law, social workers can be powerful catalysts for achieving the SDGs, particularly those related to sustainable cities (SDG 11), good health and wellbeing (SDG 3), and peace and justice (SDG 16). The proposed model of interdisciplinary social work practice, with its components of equity-centered assessment, collaborative intervention, cross-sectoral partnerships, and policy engagement, offers a practical framework for realizing this vision.

However, for this vision to become a reality, social work education must undergo a significant transformation. Educators must prepare students not just to be skilled clinicians but to be effective collaborators, community organizers, policy advocates, and global citizens. By embedding the SDGs across the curriculum and fostering competencies for interdisciplinary practice, we can empower the next generation of social workers to build the resilient, equitable, and sustainable communities of the future. The challenges are immense, but the opportunity for the profession to reassert its relevance and fulfill its historic mission of social transformation has never been greater.

7. References

1. Allen H, Wright J, Vartivarian S. The role of social work in integrated health care. Social Work in Health Care. 2014; 53(6):533-548.
2. Alston M. Social work, climate change and global warming. In Routledge International Handbook of Social Work and Social Change. Routledge, 2015, 227-239.
3. Amin A, Thrift N. Seeing Like a City. Polity Press, 2017.
4. Andermann A. Taking action on the social determinants of health in clinical practice. CMAJ. 2016; 188(17-18):e474-e483.
5. Anghel R, Tait V. Undergraduate learners as emerging agents of change for sustainability. In Social Work Education for and beyond Sustainable Development. Taylor & Francis, 2025.
6. Annie E. Casey Foundation. Building Strong Communities: A Framework for Action. Baltimore, MD, 2017.
7. Austin MJ. Social Work and Social Welfare: A Human Rights Foundation. Oxford University Press, 2018.
8. Austin S. Reimagining macro social work to advance environmental justice and health equity in the climate crisis. Journal of Environmental Social Work. 2025; 12(1):45-62.
9. Bäckstrand K. Civic science for sustainability: Reframing the role of experts, policy-makers and citizens. Global Environmental Politics. 2003; 3(4):24-41.
10. Baikady R, Sajid SM, Nadesan V. Sustainable Development Goals and Social Work. Springer, 2020.
11. Baker DA, Day R, Salas E. Teamwork as an essential component of high-reliability organizations. Health Services Research. 2018; 53(3):1325-1338.
12. Barker RL. The Social Work Dictionary (6th ed.). NASW Press, 2018.
13. Barrett G, Greenwood R, Ross K. Interprofessional education and practice: A review of the literature. Journal of Interprofessional Care. 2013; 27(3):191-198.
14. Barsky AE. Conflict Resolution for the Helping Professions (3rd ed.). Oxford University Press, 2017.
15. Beder J. Hospital Social Work: The Interface of Medicine and Caring. Routledge, 2006.
16. Berkes F, Ross H. Community resilience: Toward an integrated approach. Society & Natural Resources. 2013; 26(1):5-20.
17. Bogo M. Achieving Competence in Social Work Through Field Education. University of Toronto Press, 2010.
18. Borrmann S. Bridging the gap: Incorporating theoretical and methodological aspects of the SDGs into social work curriculum. In R. Baikady (Ed.), Social Work Education for and beyond Sustainable Development. Taylor & Francis, 2025.
19. Braveman P, Arkin E, Orleans T, Proctor D, Plough A. What is Health Equity? And what Difference does a Definition Make? Robert Wood Johnson Foundation, 2017.
20. Brevil AN. A model for interdisciplinary collaboration in oncology. Health & Social Work. 2025; 50(3):229-239.
21. Bronstein LR. A model for interdisciplinary collaboration. Social Work. 2003; 48(3):297-306.
22. Brownson RC, Baker EA, Leet TL. Evidence-Based Public Health. Oxford University Press, 2017.
23. Bruhn JG. Interdisciplinary collaboration in health care. Journal of Allied Health. 2000; 29(2):95-100.
24. Bryson JM, Crosby BC, Stone MM. The design and implementation of cross-sector collaborations. Public Administration Review. 2006; 66(s1):44-55.
25. Bullard RD. Dumping in Dixie: Race, Class, and Environmental Quality (3rd ed.). Westview Press, 2008.
26. Burns R, Thomas A. Advocacy in social work: A review of the literature. Journal of Social Work. 2019; 19(4):424-441.
27. Buse K, Hawkes S. Health in the sustainable development goals: Ready for a paradigm shift? Globalization and Health. 2016; 12(1):13.
28. Bush RAB, Folger JP. The Promise of Mediation. Jossey-Bass, 2005.
29. Carmona M. Public Places, Urban Spaces: The Dimensions of Urban Design. Routledge, 2010.
30. CCR. Community Health Workers for COVID Response and Resilient Communities: Final Report. U.S. Department of Health and Human Services, 2022.
31. Chambers R. Whose Reality Counts? Putting the First Last. Intermediate Technology Publications, 1997.
32. Chambers DE, Wedel KR. Social Policy and Social Programs. Pearson, 2005.
33. Churchman CW. Wicked problems. Management Science. 1967; 14(4):B-141.
34. Clark MD. Interdisciplinary practice in social work. Journal of Social Work Education. 2006; 42(2):231-246.
35. Coleman JS. Social capital in the creation of human capital. American Journal of Sociology. 1988; 94:S95-S120.
36. Cook DA, Hatala R, Brydges R. Technology-enhanced simulation for health professions education. JAMA. 2012; 306(9):978-988.
37. Council on Social Work Education. Educational Policy

and Accreditation Standards. CSWE, 2022.
38. Craig G, Mayo M. Community Development: A Critical Approach. Policy Press, 2014.
39. D'Amour D, Oandasan I. Interprofessionality as the field of interprofessional practice and education. Journal of Interprofessional Care. 2005; 19(S1):8-20.
40. DeFilippis J, Saegert S. The Community Development Reader. Routledge, 2008.
41. Desmond M. Evicted: Poverty and Profit in the American City. Crown, 2016.
42. Dominelli L. Green Social Work: From Environmental Crises to Environmental Justice. Polity Press, 2012.
43. Dominelli L. Environmental justice at the heart of social work practice. International Journal of Social Welfare. 2013; 22(4):431-440.
44. Engel GL. The need for a new medical model: A challenge for biomedicine. Science. 1977; 196(4286):129-136.
45. Ezell M. Advocacy in the Human Services. Thomson Brooks/Cole, 2009.
46. Figueira-McDonough J. The Welfare State and Social Work: Pursuing Social Justice. Sage Publications, 2007.
47. Fisher R, Karger HJ. Social Work and Community in a Private World. Longman, 2011.
48. Forester J. The Deliberative Practitioner. MIT Press, 1999.
49. Forrest R, Kearns A. Social cohesion, social capital and the neighbourhood. Urban Studies. 2001; 38(12):2125-2143.
50. Freeth D, Hammick M, Reeves S, Koppel I, Barr H. Effective Interprofessional Education. Blackwell, 2005.
51. Freire P. Pedagogy of the Oppressed. Continuum, 1970.
52. Galtung J. Violence, peace, and peace research. Journal of Peace Research. 1969; 6(3):167-191.
53. Garland D. The Culture of Control. University of Chicago Press, 2001.
54. Gasper D, Portocarrero AV, St. Clair AL. The UN Sustainable Development Goals: A Commentary. Oxford University Press, 2019.
55. Gaventa J. Finding the spaces for change: A power analysis. IDS Bulletin. 2006; 37(6):23-33.
56. Gehl J. Cities for People. Island Press, 2010.
57. Gehlert S, Sohmer D, Sacks T, Mininger C, McClintock M, Olopade O. Targeting health disparities. Health Affairs. 2008; 27(2):339-349.
58. Germain CB, Gitterman A. The Life Model of Social Work Practice (2nd ed.). Columbia University Press, 1996.
59. Gitterman A, Germain CB. The Life Model of Social Work Practice (3rd ed.). Columbia University Press, 2008.
60. Goffman E. Stigma: Notes on the Management of Spoiled Identity. Simon & Schuster, 2019.
61. Gray B, Wood DJ. Collaborative alliances: Moving from practice to theory. Journal of Applied Behavioral Science. 1991; 27(1):3-22.
62. Gray M, Coates J. Environmental social work: A new paradigm for the profession. International Social Work. 2015; 58(4):513-529.
63. Greene RR. Human Behavior Theory: A Diversity Framework. Routledge, 2017.
64. Hall P, Weaver L. Interdisciplinary education and teamwork. Medical Education. 2001; 35(9):867-875.
65. Harvey D. The right to the city. New Left Review. 2008; 53:23-40.
66. Hasenfeld Y. Human Services as Complex Organizations (2nd ed.). Sage, 2010.
67. Hawker G, Davis AM, Anderson JR. Social work and health policy. Social Work in Public Health. 2022; 37(2):123-138.
68. Healy LM. International Social Work: Professional Action in an Interdependent World (3rd ed.). Oxford University Press, 2014.