

The Modernization of Social Work Education and Its Practicum Modalities in the United States: Becoming an American Internationalization of Social Work

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Received: August 21, 2025 Accepted: September 13, 2025 Published: October 10, 2025

doi:10.5296/ijsw.v12i2.23103 URL: <https://doi.org/10.5296/ijsw.v12i2.23103>

Abstract

In 2022, the author published an article about social work education and practice in the US and China. This article expands the essay into the internationalization of social work education and practice using the everyday teaching and practice modalities in the United States as a base. In turn, this essay expands the author's original views and perceptions about the effectiveness of social work education and practice worldwide.

Implication. The author discusses five crucial areas that social work scholars and social workers around the world could adopt: (1) Cultural Adaptation of Evidence-Based Practices, (2) International Collaboration and Knowledge, (3) Standardization vs. Localization, (4) Ethical Considerations and Power Dynamics, and (5) Digitalization future for social work education and practice.

Keywords: International social work, globalization of social work, social work education, and practice.

1. Introduction to USA Social Work Education and Its Accreditation History

Social work is a multifaceted profession dedicated to improving the lives of individuals, families, and communities. In the United States, social workers operate across various social, psychological, educational, and cultural settings, applying specialized knowledge and skills to address complex issues. This article begins with a discussion about the history of social work education in the United States. It then expands into several main concepts commonly taught

and practiced in social work, such as social power and strength-based social work. The implication discusses the main areas of social work practice, highlighting their unique contributions and shared commitment to ethical service delivery and social justice. It is hoped that social work educators and practitioners around the world, especially in underdeveloped and developing countries, adopt some of the main points in this article to modernize their curriculum and practice models.

Social work originated in the Middle Ages in the United Kingdom (UK) from church-based volunteer efforts to assist people experiencing poverty (Welshman, 1999; Zhang et al, 2022). These church-based efforts grew in the UK and were then imported to the United States of America (USA). The first class of social work in the USA was offered at Columbia University in 1898 and has since led the way in developing private and charitable organizations to serve people in need (Poppo, 2018).

How social work started and grew in the USA were based on three philanthropies (Zhang et al., 2022, p. 1953): (i) expand the seventeenth century English Poor Laws; (ii) modernize the British Casework that developed by the Charity Organization in the mid-nineteenth century and (iii) social and political action aimed to address social injustice that began with the resettlement house movement (Welshman, 1999; Zhang et al., 2022).

According to CSWE (2025) and Zhang et al. (2022), following the British Federation of Social Workers, which was established in 1936 (Welshman, 1999), social work in the USA became a human services profession in the late 1950s. While social work is often framed as a scientific discipline grounded in theory and evidence-based practice, some scholars argue that it is fundamentally a humanitarian profession. Munde (2022) emphasizes that social work emerged from humanitarian and democratic ideals, prioritizing dignity, equality, and social justice, especially in crisis contexts. Thompson (2023) describes social work as both a science and an art, highlighting the emotional and relational dimensions that resist reduction to scientific formulas. In contrast, Sommerfeld (2016) advocates for social work as a transdisciplinary action science, calling for a more structured and scientific identity. These differing perspectives reflect the profession's complex nature, balancing empirical knowledge with human-centered values and ethical commitments. For these reasons, in 2005, CSWE created and approved the first accreditation, a peer-review process, entitled *Educational Policy and Accreditation Standards 2005* (EPAS 2005).

EPAS 2005 required that accredited programs must declare themselves as *Advanced Generalist* (Miley, 2011). Even with the EPAS 2005, social work education institutions and their required practicum modalities were still not based on science (author's own experience). In turn, the MSW graduates continued to practice based on humanitarian grounds, consistent with love and compassion, and not scientific merit. The graduates, too, claimed to have learned little and possessed little scientific knowledge (author's own experiences). The only truly commendable aspect of the graduates was their genuine commitment to supporting individuals who were struggling or unable to help themselves. Even with this author, during their over three decades of teaching statistics and research, fewer of the students in their classes were considered "social scientists." Social work educators everywhere, including leaders at CSWE, recognized this

problem.

According to Goyette (2022), a social scientist is “someone who studies human behavior in order to understand why people do the things they do” (para. 1). Goyette (2022) describes social scientists as people who possessed analytical skills, communication skills, research skills, writing skills, critical thinking skills, interpersonal skills, presentation skills, data analysis skills, and problem-solving skills. CSWE leaders were aware of arguments such as those of Sommerfield (2016) and future arguments as provided by Goyette (2022). To concur with such arguments, in 2015, the EPAS 2005 was further refined to *Educational Policy and Accreditation Standards 2015* mandated that accredited program around the country must implement science-based Evidenced-based Practice [EBP] (Rosen & Proctor, 2003; Okpych & Yu, 2014) by declaring themselves *Advanced Generalist* (Miley, 2012), *Advanced Specialist* (Greene, Dubus, and Greene, (2022), or both.

The concept of EBP in social work started in the 1970s, but its formal introduction is often traced to the early 2000s, inspired by its adoption in medicine and psychology (Okpych & Yu, 2014). More specifically, in social work, it was popularized in 2003 by Aaron Rosen and Enola K. Proctor in their book “*Developing Practice Guidelines for Social Work Intervention: Issues, Methods, and Research Agenda*.” This author believes that one of the primary reasons why CSWE requires accredited programs to declare themselves as *Advanced Generalist*, *Advanced Specialist*, or both was to ensure that the Master of Social Work (MSW) graduates become social scientists.

To further modernize AGP so it is closely correlated with medicine, psychology and all areas of health and human services, and to partially align social work with the *International Classification of Diseases 12* [ICD-12] (APA, 2022) and the *Statistical Manual of Mental Disorders 5* [DMS-5] (WHO, 2019), in the summer of 2022, the USA CSWE Accreditation Board approved the most up to date *Educational Policy and Accreditation Standards 2022* [EPAS 2022] (CSWE, 2022). A significant adjustment is the inclusion of Anti-racism, Diversity, Equity, and Inclusion (ADEI) curriculum. ADEI was added due to two significant events in the US: the murder of George Floyd murder and the anti-Asian hate crimes.

1.1 Comparative Social Work Education in the United States and Other Countries

Social work education across the globe reflects diverse cultural, political, and institutional contexts, yet shares common goals of preparing professionals to address social issues and promote human well-being. In the United States, social work education is highly structured, with accreditation standards set by CSWE, emphasizing competencies, licensure, and field practicum requirements. This model prioritizes professional regulation and standardized curricula to ensure readiness for practice (Estes, n.d.).

Comparatively, other countries adopt varied approaches. For instance, European nations such as Finland and the UK emphasize reflective practice and theoretical integration, but differ in admissions processes, course durations, and field training models (Tham et al., 2023). In Australia and Sweden, social work education incorporates strong elements of social justice and community engagement, often shaped by national welfare policies (Tham et al., 2023).

Globally, international organizations like the International Federation of Social Workers (IFSW) and the International Association of Schools of Social Work (IASSW) promote transnational collaboration and shared definitions of social work. However, the application of these definitions varies widely (Shardlow & Hämäläinen, 2015). The internationalization of social work education is further complicated by differing interpretations of key concepts such as "social development" and "globalization," which influence curriculum design and practice models (Merrill & Frost, n.d.).

Despite these differences, there is a growing consensus on the need for culturally responsive and globally informed social work education. Comparative studies highlight the importance of understanding local contexts while fostering international dialogue to improve educational practices and professional standards (Kolar, 2011).

2. Power and Social Work Practice: Power in the USA in 2025 and Beyond

Power has various definitions. Power in social work can be both enabling and oppressive (Karim, 2023). Foucault (1980) conceptualized power not merely as domination but as a relational force that shapes knowledge, identity, and behavior. In social work, power manifests in assessments, diagnoses, and interventions. Practitioners must be critically aware of how their positionality influences client interactions and outcomes (Dominelli, 2002). In broad terms, power is the capacity to influence others (NASW, 2015). Karin (2023) states that power encompasses both the ability to advocate for clients and the responsibility to challenge oppressive systems.

This author describes power as clients' capability to solve and resolve personal and psychological issues, cope with socioeconomic and political stressors, and achieve educational goals. As such, it encompasses a construct whereby social workers view clients as the biopsychosocial, cultural, and spiritual BUILDERS, and social workers are the SOCIAL ENGINEERS that enable clients to explore resources within the locality to achieve or meet desirable goals and expectations in the utmost humane ways. Like medicine, to globalize social work, it must be guided by ICD-12, DSM-5, the respective country's code of ethics, and the International Federation of Social Workers (IFSW), and the International Association School of Social Work (IASSW) using strength-based (Green, 2016; Huxtable, 2022) and empowerment approach (Jones & Singh, 2022; Niedenthal & Sang, 2016).

2.1 International Federation of Social Workers (IFSW)

The International Federation of Social Workers (IFSW) is a global organization representing professional social workers. Founded in 1956, the IFSW promotes social justice, human rights, and professional standards in social work practice (IFSW, 2018). According to the *Global Definition of Social Work* approved by the IFSW and the *International Association of Schools of Social Work* (IASSW), social work is a practice-based profession and academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people (IFSW, 2014).

The IFSW has developed a Global Social Work Statement of Ethical Principles, which serves as a framework for practitioners, educators, and researchers to uphold the highest standards of

professional integrity. These principles emphasize human dignity, social justice, and respect for diversity (IFSW, 2018). The organization also plays a key role in shaping global policies and standards for social work education and training. It collaborates with international bodies such as the United Nations (UN) and the World Health Organization (WHO) to advocate for equitable social policies and practices.

3. Strength-Based Social Work Practice

Strength-based social work practice is a transformative approach that emphasizes individuals' capacities, talents, and resources rather than focusing on deficits (Green, 2016; Huxtable, 2022). This perspective seeks to empower clients by recognizing their inherent strengths and fostering resilience through supportive interventions. Saleebey (1996) introduced the strengths perspective as a counter to traditional deficit-based models. Saleebey emphasized the importance of cultural narratives, personal stories, and community membership in shaping individuals' responses to adversity. Usual key tools used in strength-based social work practice around the world include: (1) **Strengths-Based Assessments:** These structured tools help identify individual, familial, and community strengths. They often include guided interviews, genograms, and eco-maps (Graybeal, 2001). (2) **Narrative and Reflective Tools:** Storytelling, journaling, and reflective writing are used to help clients reframe their experiences and recognize their resilience (Saleebey, 1996). (3) **Practice Frameworks:** Government and organizational frameworks, such as the UK's strengths-based practice handbook, provide structured guidance for applying these tools in adult social care (Department of Health and Social Care, 2019). Moreover, (4) **Positive Psychology Integration:** Exercises from positive psychology, such as gratitude journaling and strengths spotting, are increasingly used to support client motivation and well-being (Pulla, 2017).

3.1 *The Integration of Social Work Power, Strength-based, Ethics, and Values*

In social work practices, the integration of power, empowerment, ethics, strength-based, and values concepts intersects to promote client well-being, social justice, and professional integrity. Drawing on foundational social work values and ethical principles, this part of the article argues for a holistic framework that centers client strengths, challenges oppressive structures, and fosters meaningful change.

As stated above, social work is grounded in a commitment to social justice, human dignity, and the empowerment of marginalized populations. Central to this mission is the ethical use of power, the promotion of empowerment, and the application of strength-based practices (NASW, 2021). These elements are not isolated; instead, they form a dynamic interplay that shapes effective and ethical social work interventions. Thus far, this author argues that power in social work is multifaceted, encompassing structural, relational, and personal dimensions. Practitioners hold power through their social work educational background and professional role, as well as access to institutional policy and authority. Social workers are aware that when power is unchecked, it can perpetuate oppression and undermine client autonomy (Jones & Singh, 2022). Ethical social work practice requires critical reflection on power dynamics and a commitment to using power responsibly and transparently (Dominelli, 2002).

Empowerment, too, involves enabling individuals and communities to gain control over their lives and influence the systems affecting them. It is both a process (Niedental & Sang, 2024) and an outcome (Engel & Schutt, 2016), rooted in the belief that clients possess inherent strengths and capacities. Empowerment aligns with the social work value of respecting the inherent dignity and worth of the person and supports the goal of promoting social justice (Lee, 2001). Process emphasizes the integration of paradigm shift into generalist social work practice and provides practical guidance for conducting both quantitative and qualitative research (Niedental & Sang, 2016). Engel and Schutt (2016) state that outcomes in social work research are essential for determining whether interventions achieve their intended goals and for guiding future practice decisions.

4. Types of Powerful EBP in Social Work Now and in the Future

Nowadays, in the United States, EBP-recognized models have been demonstrated to be effective across diverse populations and settings. These include Cognitive Behavioral Therapy [CBT] (Beck, 2011), Narrative Therapy [NT] (White & Epston, 1990), Motivational Interviewing [MI] (Miller & Rollnick, 2023), Solution-Focused Brief Therapy [SFBT] (de Shazer et al., 2007), Trauma-Informed Care [TIC] (SAMHSA, 2014), and the Strengths-Based Case Management [SBCM] (Rapp & Goscha, 2006) model. Each model is briefly summarized below.

4.1 Cognitive Behavioral Therapy (CBT)

According to Beck (2011), CBT is a structured, time-limited approach that helps clients identify and change maladaptive thought patterns and behaviors. Initially developed for treating depression and anxiety, CBT has been adapted for various populations, including children, trauma survivors, identity-related challenges, and individuals with substance use disorders. Its empirical support is robust, making it one of the most widely used models in clinical social work. A robust social work practice model demonstrates consistent effectiveness across diverse populations and settings, integrating evidence-based strategies with culturally responsive approaches (Turner, 2017).

4.2 Narrative Therapy (NT)

Narrative Therapy is a collaborative and non-pathologizing approach to counseling and psychotherapy that centers people as experts in their own lives. It was developed by Michael White and David Epston in the 1980s, grounded in the idea that our identities are shaped by the stories we tell about ourselves and the meanings we assign to our experiences. Narrative Therapy is used in individual, family, and community settings. It is especially effective with clients who have experienced trauma, marginalization, or identity-related challenges, and it aligns well with culturally responsive and empowerment-based social work.

4.3 Motivational Interviewing (MI)

Motivational Interviewing (MI) is a client-centered, directive counseling approach developed by William R. Miller and Stephen Rollnick in the early 1980s to address ambivalence about change (Miller & Rollnick, 2023). Rooted in the principles of empathy, collaboration, and

autonomy, MI is designed to enhance intrinsic motivation by exploring and resolving ambivalence. It is widely used in social work, healthcare, addiction treatment, mental health services, and criminal justice systems. It is also powerful when conducting biopsychosocial, cultural, and spiritual assessments.

The core techniques of MI include open-ended questions, affirmations, reflective listening, and summarizing, collectively known as OARS. These techniques support the development of a therapeutic alliance and facilitate the client's articulation of personal reasons for change. Four key processes guide MI: engaging, focusing, evoking, and planning.

4.4 Solution-Focused Brief Therapy (SFBT)

SFBT focuses on building solutions rather than analyzing problems. It is future-oriented and emphasizes client strengths, resources, and goals. SFBT is effective in short-term interventions and has been applied in various settings, including schools (for academic issues), family and children services (such as child protective services), criminal justice systems (like probation), and crisis settings (like suicidal ideation). Its strengths-based orientation makes it highly compatible with social work ethics and empowerment principles (de Shazer et al., 2007).

4.5 Trauma-Informed Care (TIC)

According to the USA Substance Abuse and Mental Health Service Administration (SAMHSA, 2014), trauma-informed Care (TIC) is an organizational and clinical framework that recognizes the widespread impact of trauma and integrates this understanding into policies, procedures, and practices to avoid re-traumatization and promote healing. TIC is grounded in six key principles: safety, trustworthiness and transparency, peer support, collaboration and mutuality, empowerment, and cultural, historical, and gender responsiveness.

SAMSA (2014) states that rather than focusing solely on symptoms or diagnoses, TIC emphasizes understanding the context of individuals' experiences and fostering environments that support recovery. It is applicable across various settings, including social services, healthcare, education, and criminal justice. SAMSA (2014) states further that practitioners using TIC are encouraged to shift from asking "What is wrong with you?" to "What happened to you?" A change that reflects a more empathetic and strengths-based approach.

4.6 Strengths-Based Case Management (SBCM)

Strengths-Based Case Management (SBCM) is a client-centered approach that emphasizes individuals' inherent strengths, resources, and capacities as the foundation for achieving personal goals and improving well-being (Rapp & Goscha, 2012; Caiels, Milne, and Beadle-Brown, 2021). Unlike deficit-focused models, SBCM encourages practitioners to collaborate with clients in identifying and leveraging their talents, relationships, and community support to overcome challenges.

Since early 2013, SBCM has been applied effectively in the so-called "*translational social work*" (Bellamy, Bledsoe, and Traube, 2013), namely mental health services, substance use recovery, and social work practice with marginalized populations. It aligns with core social work values such as respect for human dignity, empowerment, and cultural competence,

making it a valuable framework for promoting resilience and sustainable change.

Bellamy and colleagues state that translational social work is an emerging framework that emphasizes the systematic integration of research evidence into social work practice to improve outcomes for individuals, families, and communities (Bellamy et al., 2013)-drawing inspiration from a not-so-distant concept coined by Woolf in 2008, entitled “Translational Science” in medicine. Translational science in medicine sought to close the gap between academic research and real-world application by promoting evidence-informed interventions, continuous evaluation, and collaborative knowledge exchange (Woolf, 2008).

5. Main Areas of USA Social Work Practices

Social work in the United States encompasses a diverse range of practice areas aimed at promoting social justice, enhancing individual and community well-being, and addressing systemic inequalities. Below are some quick outlines about the USA's primary domains of social work practice, including clinical social work, child welfare, school social work, medical and psychiatric social work, community organization, and policy advocacy. Each area reflects the profession's core values and ethical commitments, while responding to the evolving needs of society.

5.1 Clinical Social Work

Clinical Social Work is a specialized area of social work practice focused on the assessment, diagnosis, treatment, and prevention of mental health and emotional disorders within individuals, families, and groups (National Association of Social Workers [NASW], 2005). It combines any of the therapeutic techniques discussed above with a holistic understanding of social systems, emphasizing both psychological and environmental factors that influence well-being. Clinicians are licensed professionals who often hold master's or doctoral degrees (NASW, 2021). Clinical social workers often work in settings such as hospitals, community mental health centers, criminal justice systems (i.e., prisons), and private practices. As the world experiences more diplomatic issues, clinical social work could become a core area to work at diplomatic channels, such as embassies or consular offices for their respective country.

5.2 Child Welfare

In the United States, child welfare social workers focus on protecting children from abuse and neglect, supporting family reunification, and facilitating foster care and adoption services. They work within public agencies and nonprofit organizations, advocating for the safety and well-being of vulnerable children. This area requires knowledge of family systems, trauma-informed care, and legal frameworks (Child Welfare Information Gateway, 2020). The USA's Child Welfare can be seen as the advanced version of UNICEF.

Around the world, child welfare may or may not be a core component of governmental programs. However, for underdeveloped and developing countries, it is often associated with the United Nations Children's Fund [UNICEF] (UNICEF, 1989; <https://www.unicef.org/reports/state-worlds-children-2017>). UNICEF is a global humanitarian and development agency dedicated to protecting the rights and improving the lives of children

and adolescents around the world. Initially established in 1946 as the United Nations International Children's Emergency Fund to provide relief to children affected by World War II, it became a permanent part of the UN system in 1953, retaining the acronym "UNICEF." Child protection varies significantly across countries, shaped by cultural norms, legal frameworks, economic conditions, and social service infrastructures. Globally, child welfare systems aim to protect children from abuse, neglect, exploitation, and violence, while promoting their well-being and development.

Global trends in child welfare include a growing emphasis on **family-centered care**, **trauma-informed practice**, and **preventive services** (IFSW, 2024). There is also increasing recognition of the need for cross-sector collaboration among health, education, and social service providers to address the complex needs of vulnerable children.

5.3 School Social Work

School social workers address the social, emotional, and behavioral needs of students to promote academic success (Niedenthal & Sang, 2024). They collaborate with educators, families, and community resources to support students facing challenges such as poverty, bullying, or mental health issues. Their role is critical in fostering inclusive and supportive educational environments (Kelly et al., 2015; Niedenthal & Sang, 2024).

School social work is a growing international specialty that supports students' educational success by addressing social, emotional, and environmental barriers to learning (Huxtable, 2022; Niedenthal & Sang, 2024). Practiced in over 50 countries, school social workers provide services such as counseling, crisis intervention, advocacy, and family support. They often work within multidisciplinary teams and contribute to both preventive and responsive programs in schools (Huxtable, 2022).

5.4 Medical and Psychiatric Social Work

Medical social workers assist patients and families in navigating healthcare systems, coping with illness, and accessing resources (Gehlert & Browne, 2012; Kelly et al., 2015). Psychiatric social workers specialize in mental health care, working in psychiatric hospitals, outpatient clinics, prisons, and rehabilitation centers. Both areas' roles emphasize holistic care and interdisciplinary collaboration (Gehlert & Browne, 2012).

More specifically, medical and psychiatric social work are specialized fields that focus on supporting individuals with physical and mental health challenges through psychosocial interventions, advocacy, and care coordination. In the United States, medical social workers are integral to hospital and healthcare teams, addressing issues such as discharge planning, chronic illness management, and patient rights. Psychiatric social workers provide Therapy, crisis intervention, and case management in mental health settings, often using diagnostic tools like the DSM-5 (APA, 2022).

5.5 Community Organization and Development

Community organization and development are foundational components of macro social work practice, aimed at empowering communities, promoting social justice, and facilitating

sustainable change (Wilkinson et al., 2022). Social workers engage in organizing, planning, and mobilizing communities to address social problems and promote collective well-being. They facilitate empowerment, build coalitions, and advocate for policy changes. This area reflects the profession's commitment to social justice and participatory democracy (Hardcastle et al., 2011).

In the United States, community social work has historically focused on neighborhood revitalization, coalition building, and advocacy for marginalized populations. Models such as asset-based community development (ABCD) and community organizing through institutional networks are widely practiced (Wilkinson et al., 2022).

Contemporary frameworks such as the Community Capitals Framework (Emery et al., 2005; Flora & Flora, 2004; Jacob, 2011) and Livelihoods Theory (Green, 2016; Serrat, 2008) help social workers assess and mobilize resources across domains-economic, social, cultural, and environmental- to support community well-being. Increasingly, international collaboration among social work organizations promotes shared learning and global standards for ethical and practical community practice (Green, 2016).

5.6 Policy and Advocacy

Policy and advocacy are integral to the mission and practice of social work, reflecting the profession's commitment to promoting social justice, equity, and systemic change. Social workers in policy and advocacy roles influence legislation, develop programs, and conduct research to address systemic issues such as poverty, discrimination, and access to services. They work in government agencies, think tanks, and advocacy organizations, using their expertise to shape equitable policies (Hoefler, 2019).

In the United States, policy advocacy has deep historical roots in social reform movements, including child welfare, civil rights, and health care access. Social workers have played pivotal roles in shaping policies through lobbying, coalition-building, and public education. They work within governmental agencies, nonprofit organizations, and grassroots movements to ensure that policies reflect the needs and rights of vulnerable populations (Day et al., 2023).

6. Social Work Implications

The globalization of higher education and technology at the turn of the 21st century has transformed the landscape of professions and disciplines of study, including social work. Professions in health and human services, particularly medicine and social work, have enabled widespread dissemination of evidence-based models across national, international, and cultural boundaries (Dominelli, 2014; Healy, 2021; IFSW, 2024).

It is understood that in the past decade, social work practices in the United States have become increasingly interconnected across borders. Scholars shared their writings and publications, and practitioners, too, have learned to navigate the complexities of applying empirically supported social work interventions in diverse community and cultural contexts. As a result, this part of the implications, the author discusses five crucial areas that social work scholars and social workers around the world could adopt: (1) Cultural Adaptation of Evidence-Based Practices,

(2) International Collaboration and Knowledge, (3) Standardization vs. Localization, (4) Ethical Considerations and Power Dynamics, (5) Technology and Dissemination digital technology in future social work education and practice.

6.1 Cultural Adaptation of Evidence-Based Practices

Cultural adaptation (Marsiglia & Booth, 2015; Mishu et al., 2023; NASW, 2015) involves modifying interventions to align with the values, beliefs, and social structures of different individuals, families, groups, communities, and societies in one's respective country. This process is critical for promoting inclusivity, reducing disparities, and enhancing outcomes in social work practice. Coined by Resnicow et al. (1999), cultural adaptation always involves two structures: (a) Surface structure, and (b) deep structure. Resnicow et al. (1999) state that surface structure involves changes to language, symbols, and examples used in interventions to make them more relatable (e.g., translating materials, using culturally familiar imagery and terminology). Resnicow et al. (1999) state further that deep structure addresses the underlying cultural values, beliefs, and social systems that influence behavior and well-being (e.g., family roles, spirituality, community dynamics).

Regardless of country, social services operate within complex cultural landscapes. Because of this, practitioners must recognize that interventions developed in one cultural context may not be directly transferable to another (CSWE; Healy & Thomas, 2021). Cross-cultural adaptation involves modifying interventions to align with the cultural norms, language, and values of diverse populations while maintaining fidelity to core therapeutic principles. Cross-cultural adaptation involves modifying interventions to align with the cultural norms, language, and values of diverse populations while maintaining fidelity to core therapeutic principles (Resnicow et al., 1999). This process is critical for promoting inclusivity, reducing disparities, and enhancing outcomes in social work practice.

Cross-cultural adaptation is grounded in several social science theories. One is the Ecological Systems Theory (Bronfenbrenner, 1979) that emphasizes the influence of multiple environmental systems on individual development, highlighting the need for culturally contextualized interventions. The second theory is the Cultural Competence Model, which was introduced by Sue et al. (1992). This theory advocates for awareness, knowledge, and skills in working with diverse populations. The third theory is the Strength-Based Perspective (Pulla, 2017; Saleebey, 1996) that encourages practitioners to build on cultural assets and community resources rather than focusing solely on deficits.

6.2 International Collaboration and Knowledge

Healy and Thomas (2021) emphasize that international social work must be grounded in mutual respect, inclusion, and a commitment to global core values such as protection for vulnerable populations (i.e., children, persons with disabilities), peace, justice, dignity, and human rights. Their work illustrates how theories and interventions developed in one cultural context, such as the US, may not be directly transferable to another without adaptation. This underscores the importance of culturally responsive practice and the co-creation of knowledge and values across borders.

Nguyen et al. (2024) highlight the growing presence of international students in social work programs and the need for curricula that reflect diverse perspectives and global systems. Their scoping review reveals that international students bring unique strengths and insights, but also face challenges related to language, cultural differences, and unfamiliarity with local social work systems. These findings call for innovations in pedagogy, field education, and institutional support to ensure inclusive and effective learning and practice environments.

Collaborative research is another key dimension of international social work. Scholars argue that such research must navigate ethical, regulatory, and methodological complexities while remaining sensitive to local and societal contexts. Successful partnerships require transparency, shared goals, and equitable participation from all stakeholders (Jones & Singh, 2022).

6.3 Standardization vs. Indigenous and Localization

Social work as a global profession faces a critical tension between the push for standardized practices and the need for culturally responsive, localized approaches (Bradshaw & Graham, 2007; Majumdar, Baikady, and D'Souza, 2023). Standardization, often driven by Western models and evidence-based practices, aims to ensure consistency, accountability, and professional legitimacy across diverse contexts (Healy, 2008). However, this approach can inadvertently marginalize indigenous knowledge systems and local traditions, which are vital for effective and ethical practice in non-Western settings (Garret, 2014).

Indigenous and localized social work emphasizes the importance of cultural relevance, community participation, and the integration of traditional values and healing practices. Scholars argue that imposing universal standards risks perpetuating colonial legacies (Majumdar, Baikady, and D'Souza, 2023) and undermining the autonomy of local communities (Gray, Coates, and Yellow Bird, 2008). Instead, a decolonized framework advocates for the co-creation of knowledge and practices that reflect the living realities of diverse populations (D'Souza, 2023).

6.4 Ethical Considerations and Power Dynamics in Social Work Education and Practice

As discussed throughout the article, social work is a profession deeply rooted in ethical principles such as respect for human dignity, social justice, and the promotion of client autonomy. Recent scholarship has emphasized the need to critically examine how ethics and power intersect, particularly in the context of decolonization, racial justice, culturally responsive practice, and political dynamics (Garret, 2014; Weeks, 2025).

First, it is about ethical challenges in social work education. Social work education is not immune to the power structures it seeks to dismantle. Weekes (2025) explores how Black women in UK social work academia experience exclusion through academic contra power harassment and internalized oppression. These dynamics reveal how race, gender, and professional identity intersect to shape ethical challenges in educational spaces. The study calls for systemic reform and culturally responsive support structures to address these inequities. Charfe (2025) introduces the Danish “3 Ps” model-Professional, Personal, and Private-as a framework for navigating ethical boundaries in social work education. This model encourages students and educators to reflect on their roles and relationships, promoting ethical integrity

and transparency in learning environments.

Second, social work educators and practitioners must recognize the decolonizing ethics and knowledge production. Garrett (2024) critiques the Eurocentric foundations of social work ethics and education, arguing for a decolonial turn that recognizes diverse worldviews, especially those from the Global South. He emphasizes the importance of reflexivity, cultural humility, and the dismantling of colonial power structures in ethical decision-making.

Third, one must address power dynamics in professional practice. In professional practice, social workers must navigate complex power relations with clients, institutions, and communities. Karim (2023) introduces the Power-informed Practice (PiP) framework, which helps practitioners analyze power at individual, professional, and structural levels.

6.6 Digital Technology in Future Social Work Education and Practice

The integration of digital technology into social work education and practice has accelerated dramatically in recent years, reshaping how professionals engage with clients, deliver services, and prepare future practitioners. This transformation is driven by necessity, such as the COVID-19 pandemic, new colleges/universities' innovation in teaching and learning modalities, and social work practitioners adopting translational approaches, offering new possibilities for outreach, learning, and ethical engagement.

Sage and Singer (2022) highlight the transformative potential of digital interventions in social work education. Innovations such as virtual reality simulations, podcasting, and digital storytelling are being used to deepen students' empathy and critical thinking. These tools also help simulate complex scenarios, preparing students for real-world challenges. Jenney et al. (2025) found that simulation-based learning, using avatars, virtual classrooms, and interactive platforms, enhances students' ability to build therapeutic relationships, make ethical decisions, and apply theory to practice.

Pink, Ferguson, and Kelly (2022) argue that digital social work must be understood as a hybrid model, blending face-to-face and virtual interactions to accommodate uncertainty and improvisation. This anticipatory stance prepares practitioners to respond flexibly to emerging challenges while maintaining core values of empathy and responsiveness.

Regarding future social work education, Toros et al. (2023) conducted a systematic review of digital learning tools in social work education, identifying simulations, avatars, and digital storytelling as effective methods for developing competencies such as ethical decision-making and therapeutic engagement. Similarly, Russ and Reimer (2025) highlight the pedagogical potential of digital interventions, including podcasts and virtual reality, which foster empathy and critical thinking. Their work emphasizes that digital tools are not merely technical aids but transformative educational strategies that reshape how students learn and engage with social work values. Fjeldheim et al. (2024) explore the concept of digital competence in social work education, revealing gaps between policy expectations and educator preparedness. Their study identifies five key challenges: unclear learning outcomes, unfamiliar technical language, rapid technological change, distributed responsibility, and the need for critical reflection.

Another key consideration for social work institutions and social services programs in the digital Future is the importance of social work ethics and relational dimensions. Cacopardo (2025) examines the ethical tensions and relational shifts brought about by digitalization in social work. Her qualitative study in Italy reveals how professionals navigated blurred boundaries, loss of non-verbal cues, and digital intimacy during the pandemic. Pascoe (2023) adds a global perspective by analyzing international codes of ethics, noting inconsistent guidance on digital practice. She calls for unified standards that address confidentiality, consent, and professional boundaries in digital contexts.

Lastly, digital future social work education and practice also present challenges. Pazer (2024) identifies concerns about data security, digital literacy, and workplace support among practitioners. Pazer's study recommends enhanced training, clear protocols, and organizational investment to ensure ethical and practical integration of technology.

7. Prioritizing the Future of Social Work Education and Practice

Recently, social work scholars such as Jenney et al. (2025) emphasize that the Future of social work education and practice is being shaped by rapid societal changes, technological advancements, and evolving professional standards. In the past decade, scholars such as Williams, Connolly, and Coffey (2019) and Rubin and Parrish (2007) have emphasized the need for strategic leadership, digital competence, evidence-based practice, and global collaboration to prepare social workers for 21st-century challenges. Williams, Connolly, and Coffey (2019) argue that social work education must embrace strategic leadership to navigate uncertainty and assert a stronger academic and professional identity. They call for international collaboration, interdisciplinary research, and visionary pedagogy to advance social work education and practice. Rubin and Parrish (2007) highlight challenges in sustaining evidence-based practice (EBP) in social work education. They stress the importance of clarifying EBP definitions, avoiding over-reliance on authoritative sources, and maintaining rigorous standards to prevent dilution of the concept. Mishna et al. (2021) emphasize the urgency of preparing social workers for digital practice. Their teaching note identifies six priority areas for ICT integration in education: ethics, confidentiality, access, risk management, supervision, and theoretical foundations. Editors of the *Journal of Social Work Education* (2020) advocate for elevating the scholarship of teaching. They argue that social work education is itself a form of practice and should be grounded in empirically supported pedagogical methods that reflect professional ethics and values. Moreover, Morrow (2023) outlines future priorities for social work licensure, including aligning educational standards with licensing exams, improving macro practice representation, and enhancing transparency in pass rates. These reforms aim to bridge gaps between education and regulation.

8. Conclusion

The modernization of social work education and practice reflects a dynamic shift toward evidence-based teaching, research, learning, and practice by integrating technology, global perspectives, and innovative pedagogies to meet the evolving needs of the world's populations. This transformation is driven by correlating social work with medical science in the context of rapid digital advancements, increased cultural awareness, pluralism of human society, and the

demand for more responsive and ethical service delivery.

Digital tools such as telehealth platforms, translational social work, simulation-based learning, and artificial intelligence are reshaping how social workers engage with clients and students. Jenney et al. (2025) highlight the benefits and challenges of technology-mediated practice, emphasizing the need for ethical safeguards and professional boundaries. Sage and Singer (2022) demonstrate how digital interventions, like podcasting and virtual reality, enhance empathy and critical thinking in social work education.

Modern social work increasingly operates within a global framework, requiring practitioners to navigate cross-cultural contexts and localized needs. Garrett (2024) and Weekes (2025) call for the decolonization of social work education, advocating for the inclusion of indigenous knowledge and the dismantling of Eurocentric curricula. These efforts aim to create more equitable and culturally grounded practices.

Funding

None.

Informed Consent

Obtained.

Provenance and Peer Review

Not commissioned; externally double-blind peer reviewed.

Data Availability Statement

The data that support the findings of this study are available on request.

Competing Interests Statement

The authors declare that there are no competing or potential conflicts of interest.

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