e-ISSN: 0974-4614 p-ISSN: 0972-0448

The Role of Psychologists, Social Specialists, and Health Experts in Improving Mental and Physical Health Outcomes

Faisal Awwadh Alotaibi¹, Malaa Abdullah Alotaibi², Majed Faris Alotaibi³, Ahmad Saeed Alotaibi⁴, Abdullah Muslat Alsubaie⁵, Yasser Salem Alshehri⁵, Faisal Saeed Althobaiti⁶, Marzouq Bakheet Almayhubi⁷

¹Psychologist, Saudi Armed Forces
²Social Specialist, Ministry of Defense
³Psychologist, Ministry of Defense
⁴Social Specialist, Saudi Royal Marine Forces
⁵Social Specialist, Saudi Armed Forces
⁶Health Informatics Specialist, Saudi Armed Forces
⁷Medical Laboratory Specialist, Saudi Armed Forces

Received: 12.08.2024 Revised: 17.09.2024 Accepted: 09.11.2024

ABSTRACT

Introduction: Today, in the context of contemporary healthcare, it is of immense importance to bring together the mental, social, and medical science in order to elucidate the intricate relationship between the mental and physical health. The approach provides such a comprehensive view that recognizes that mental and physical well-being cannot be divorced or separated, so taking efforts in this direction would be best done in collaboration with the psychologists, the social specialists, and the health experts.

Aim of work: To explore multifaceted roles these professionals play in enhancing health outcomes.

Methods: We conducted a comprehensive search in the MEDLINE database's electronic literature using the following search terms: Role, Psychologists, Social Specialists, Health Experts, Improving, Mental, Physical and Health Outcomes. The search was restricted to publications from 2016to 2025 in order to locate relevant content. We performed a search on Google Scholar to locate and examine academic papers that pertain to my subject matter. The selection of articles was impacted by certain criteria for inclusion.

Results: The publications analyzed in this study encompassed from 2016 to 2025. The study was structured into various sections with specific headings in the discussion section.

Conclusion: Psychologists, social specialists, and health experts have direct roles in bringing about mental and physical health outcomes. Yet work of these various professionals can be done through collaboration and in a holistic manner to provide for the different needs of patients. When they acknowledge that the mental and physical are part of the same whole, and can work collectively to provide complete care to the people in the community and those people in the community can live a much better life.

Keywords: Role, Psychologists, Social Specialists, Health Experts, Improving, Mental, Physical and Health Outcomes

INTRODUCTION

Psychologists, social specialists, and health experts are all crucial to the integration in order to increase mental and physical health outcomes. These professionals have different fields of expertise each, when put together form a comprehensive care of a human health that takes into account its multidimensionality.

Knowing and treating mental health disorders is a role for psychologists. The knowledge of cerebral and affective processes enables the development of well-studied therapeutic interventions. For example, solution focused brief therapy (SFBT) is effective in different settings such as schools and clinical environment. Knauss& Jensen (2024) describe SFBT as clients strengths and resources, and focusing on positive change in a short period. Additionally, psychologists participate in designing and putting in place effective interventions of well-being for certain populations. A systematic review noted how such interventions can benefit siblings of children with chronic health problems (Hsu et al., 2021), and suggested that wider provision of psychological support to families has an effect on siblings.

Social determinants of health are addressed by social specialists, for instance, Social workers. They try to fill that gap between health care services and the people, in order that people have access to the necessary things. Stress in social workers is known to be high due to the fact that this is a high demanding professional role.

Nevertheless, effective coping is crucial for their own well-being as well as for the quality of care they offer (Travis et al., 2021). Moreover, social workers act as instruments of culturally sensitive interventions. For instance, other programs demonstrating that culturally informed practices are important for educational and health equity (Olaboye et al., 2024) are programs aimed at meeting the academic needs of low income African American children.

Health experts as a subgroup of medical professionals focus on the physical but remain acutely aware of the ties that bind the physical and the mental if they are to be able to provide the best health outcome. Collaborative care models like physicians alongside psychologists, physicians with psychologists, physicians and social workers, or any combination thereof have been found to be effective means in managing chronic diseases. These models ensure that care is holistic in nature, addressing physical symptoms and psychological complications associated with an illness. Just so, studies found that depressive symptoms were strongly related to subsequent change in the level of physical activity, indicating a need for integrated treatment models (and Kandola et al., 2021).

Collaboration among the professionals could be seen in the best of healthcare settings where nurses, rehabilitation professions, social workers, and, in some cases, psychologists and psychiatrists bond together. For instance, The Department of Psychiatry at Texas Tech University Health Sciences Center (TTUHSC) has developed a comprehensive program that encompasses psychological assessments, medication management, and community outreach. This highly effective approach has helped to fill in some of the mental health needs in the region and offer full services for a culturally-diverse patient population (Morgan et al., 2017).

To sum up, several professionals- psychologists, social workers, and hence health officials- have to work together for optimal health outcomes to be achieved for a patient. Their combined knowledge fulfills the mental as well as the physical health needs, which in the end leads to a more balanced and improved life for individuals and societies.

AIM OF WORK

This review aims to explore the pivotal roles of psychologists, social specialists, and health experts in improving both mental and physical health outcomes. It examines how these professionals contribute to holistic healthcare through psychological interventions, social support mechanisms, and integrated medical care. By analyzing empirical evidence and multidisciplinary approaches, this review highlights the significance of collaboration among these experts in addressing the complex interplay between mental and physical well-being. Additionally, it identifies challenges in interdisciplinary healthcare and suggests future directions for enhancing integrated care models.

METHODS

A thorough search was carried out on well-known scientific platforms like Google Scholar and Pubmed, utilizing targeted keywords such as Role, Psychologists, Social Specialists, Health Experts, Improving, Mental, Physical and Health Outcomes. The goal was to collect all pertinent research papers. Articles were chosen according to certain criteria. Upon conducting a comprehensive analysis of the abstracts and notable titles of each publication, we eliminated case reports, duplicate articles, and publications without full information. The reviews included in this research were published from 2016 to 2025.

RESULTS

The current investigation concentrated on the importance of early recognition and timely intervention in the management of sepsis in emergency settingsbetween 2016 and 2025. As a result, the review was published under many headlines in the discussion area, including:Psychologists: Bridging Mental and Physical Health, Social Specialists: Navigating the Social Determinants of Health, Health Experts: Integrating Medical and Holistic Care, Collaborative Efforts: A Multidisciplinary Approach, Challenges and Future Directions

DISCUSSION

1. Psychologists: Bridging Mental and Physical Health

Psychologists have been primary players in bridging the divide between mental and physical health and are cognizant of the intricate links between one's psychological health and bodily conditions. Psychological intervention is not limited to classical therapeutic settings; it also extends into modifying behavioral and emotional factors that aggravate chronic illnesses. Implementing relevant psychological principles in healthcare can only serve to boost patient care outcomes, adherence to medical regimes, and improvement in overall quality of life (Anderson &Ozakinci, 2018).

Among the vast contributions psychologists make to the healthcare arena, the application of cognitive-behavioral therapy (CBT) holds a primary position in the management of chronic diseases. CBT is the means through which negative thought patterns and behaviors that exacerbate physical health conditions are identified and modified. For instance, CBT is used to change negative dietary habits and sedentary behaviors in diabetic patients, which modify those beliefs and practices toward better glycemic control and minimizing

complications. Heart disease patients, too, suffer from anxiety and depression that could impede recovery and adherence to treatment plans. With CBT, psychologists teach their patients coping skills for managing stress, develop an optimistic attitude, and improve cardiac health (Nakao et al., 2021).

Making chronic health conditions more bearable, digital health interventions for youth have really altered therapists' lives. The intervention also dwells on giving accessible therapeutic services because the modern intervention can be delivered via electronic gadgets. This can be through channels such as mobile and online platforms that will support interactive modular therapeutic techniques such as CBT. Other interventions are onpremise tools that provide the nds with coping mechanisms, monitoring progress, and using peer support. Research finds such intervention effective in alleviating depressive symptoms and well-being in youths suffering from chronic diseases. Flexible and anonymous- neither platforms will more likely draw higher than usual participation rates to the treatment facility (Domhardt et al., 2021).

Moreover, psychologists contribute to the development of digital health interventions aimed at improving mental health outcomes. According to the systematic review by Välimäki et al. (2017), these interventions tailored by psychologists reduce depressive symptoms and enhance well-being in youth suffering from chronic health conditions. These results illustrate the importance of psychologists in incorporating mental health care into larger health management strategies (Välimäki et al., 2017).

Therapeutic interventions often carry weight in psychology and give a lot to weight on social support concerning health outcomes. One of the primary outcomes of long-term illnesses is often long-term social isolation, contributing to most mental conditions and hindering their responses to treatment. Psychologists will train patients on the building and maintenance of supportive ties, whether through family involvement, support groups, or community-associated resources. Social support has been associated with higher adherence to treatment, lower stress levels, and enhanced feelings of empowerment in controlling one's own health care. Therefore, these connections help psychologists mitigate the psychological overload related to chronic disease and enhance resilience (Uchino et al., 2018).

Also, psychologists are engaged in research into interventions for managing the psychological components of chronic illness and continuing to develop balanced arguments in favor of the creation of an evidence-based pavilion on the ultimate incorporation of mental health services among standard medical care. Institutional activity seeks other professionals in health to establish treatment plans that embrace the mind and the body; thus, mental and physical health cannot be chain-linked but rather must be seen in their interdisciplinary scope to understand optimal patient's care (Ee et al., 2020).

2. Social Specialists: Navigating the Social Determinants of Health

Social workers or community health workers can represent an important step in addressing social determinants of health for individuals and communities that actually influence health outcomes. Their multifaceted roles include engaging with individuals on helping them access much needed resources, advocating at the policy level for systemic changes, and creating solid systems of support to mitigate the damaging effects of poverty on health. The significance of that work is evidential in very many studies that have been published, certain research indicating that the impact of social support networks on mental and physical health is immense (Mantel, 2016).

Most of the literature focuses on the most prevailing themes-the effect of social support in health and well-being promotion-though individual studies also exist. Hill-Briggs et al. carried out a systematic review concluding that the consideration of social determinants in care plans significantly enhances health outcomes in individuals with type 2 diabetes. All this goes to show that one must consider factors like socioeconomic status, education, or community context while devising plans, all of which intrude into patient compliance and overall health improvement (Hill-Briggs et al., 2020). In one more example, Kiely et al. (2022) examined link worker social prescribing programs and have shown the importance of personalized, self-directed support in linking individuals to community resources to address their social needs and reduce healthcare utilization. Such conclusions, therefore, underline truly the indispensable role of social specialists in aligning healthcare systems with community resources for an all-inclusive care package that stretches far beyond clinical interventions (Kiely et al., 2022).

Together with proffering one-on-one assistance, social specialists also aim at designing and executing interventions that are community-based and geared toward collective well-being. This study by Jewett et al. (2021) has examined how social cohesion builds community capacities, concluding that strong communal ties further strengthen the effectiveness of integrated health intervention activity. The authors contend that communities endowed with robust social networks are far better positioned to mobilize resources, share health information, and assist community members in health-promoting behavior adoption. The approach engendered by communities thus not only produces enhanced physical health outcomes but also develops a sense of belonging and social support, which are two working arms of mental health (Jewett et al. 2021). Furthermore, health projects spearheaded by community health activists, as documented by Javanparast et al. (2018), have successfully utilized community health workers to close present cultural and linguistic gaps in healthcare

delivery with regards to accessibility and quality care for the marginalized. The present-day community work embodies the capacity of social specialists to create impactful change through culturally competent and contextually relevant intervention (Javanparast et al. 2018).

Another important area of work for social professionals is policy advocacy. Through their involvement in policy development and reform, social professionals seek to address systemic barriers that maintain health inequities. Thornton et al. (2016) talked about how health promotion and public health policy reduce the impact of social determinants of health with the policy interventions themselves directed at improving education, housing, and employment for a greater health gain (Thornton et al. 2016). Social workers and community health advocates frequently act as intermediaries between the communities and policymakers, articulating the needs and issues faced by underserved populations that are relevant for equitable policy decisions. Their advocacy work is critical in informing policies that will effectively allocate resources for the protection of vulnerable groups and the promotion of social justice. The works that explore mechanisms and programs linking social care into healthcare systems could be seen in this regard; for instance, Khanpoor et al. (2025) have shown the potential for policy reform to create health systems that are more integrated and responsive to both medical and social needs (Khanpoor et al. 2025).

Another aspect of the responsibilities of social scientists consists of conducting research that informs evidence-based practices and policies. Some examples of their research include studies examining the influence of social determinants on health. In this manner, these social science researchers build a comprehensive understanding of the interface between societal factors and health outcomes. Someone looked at the social determinants that affect use of ER care among individuals with intellectual and developmental disabilities and found that unmet social needs tend to increase healthcare use (Menezes et al., 2021). This research highlights the necessity for an integrated care model that addresses both health and social needs to reducing unnecessary healthcare use while improving quality of life. By the efforts of social scientists in this kind of research, interventions become more relevant and appropriate, as they are based on the lived experiences of communities (Menezes et al., 2021).

3. Health Experts: Integrating Medical and Holistic Care

Indeed, health experts, as medical doctors, nurses, and all health personnel are increasingly recommending an entirely holistic approach to traditional medicine. This shift acknowledges the fact that aspects of the spiritual, emotional, as well as psychological needs of the patients must also be met to fulfill the comprehensive needs of the whole individual for health. The traditional biomedical model concentrates primarily on the physical/corporal symptoms and pathologies of patients and addresses their pathologies from a very mechanistic standpoint (Kristoffersen& Clarke, 2023). Holistic approaches fuse up with the biomedical model with the new models that consider the person as a whole because the relationship among mind, body, and spirit is so complex. One example of the holistic integration is the connection of spirituality to practice of health care. As opposed to being religious, spirituality involves an individual's sense of purpose and meaning as they relate to the transcending. Vincensi (2019) stressed the importance of incorporating spirituality into patient care, since that contributes to greater satisfaction and better health outcomes. The meeting points of health experts will pave the way for discussions on spirituality to understand and meet more of the holistic health need of the patient. This means health professionals have to get trained in aspects of spiritual care; for example, ability in conducting spiritual assessment and know when they would need to refer someone to chaplaincy or other spiritual care professionals (Vincensi, 2019).

The application of spirituality in the healthcare system goes beyond the patient to include the health of the healthcare workers themselves. Burnout, characterized by emotional exhaustion and depersonalization, is a common experience among health workers. Studies show that healthcare professionals with spiritual and religious beliefs experience lower burnout and depersonalization. This suggests that nurturing the spiritual well-being of healthcare providers may strengthen their resilience and ability to provide compassionate care. Institutions must therefore be encouraged to support the spiritual health of their employees as this affects provider well-being and the quality of care (De Diego-Cordero et al., 2022).

On top of these spiritual concerns, health professionals are becoming more aware that there is a reciprocal interaction between physical and mental health. Collaboration across disciplines has led to interventions that consider sameness. A good example is the inclusion of physical activity in treatment for mental health disorders. According to a meta-analysis by López-Torres Hidalgo (2019), exercise is more effective than a control intervention and is as effective as psychological therapies or antidepressants for alleviating depressive symptoms. These findings therefore strongly suggest that health practitioners ought to promote exercise as a key component of mental health care (López-Torres Hidalgo, 2019).

Physical exercise has neurobiological effects that explicate its relevance to mental health. Regularization of physical activities has proved to improve signaling in the brain, contributing to the antidepressant role induced through some mechanisms, such as increased levels of brain-derived neurotrophic factor (BDNF), which promote neuronal growth and resilience. These findings emphasize the importance of health workers advocating

physical activity not for improving one's physical health but also as an important strategy for mental health promotion and intervention (Ignácio et al. 2019).

Moreover, holistic approaches will thrive if multidisciplinary teams comprise them. For example, healthcare chaplains play a vital role in fulfilling the spiritual concerns of patients and accompanying them during their hospital stay. Their involvement has associated treatment decisions that are likely to be less aggressive, more probably to be involved with hospice care, and generally patients' acknowledgment and respect of spiritual needs. This whole collaborative model guarantees that care plans are individualized and aligned with people's values and beliefs, enhancing the overall quality of care (Carey et al., 2016).

4. Collaborative Efforts: A Multidisciplinary Approach

The integration of psychology, social work, and medical practice within the healthcare system requires a collaborative, multidisciplinary patient-care delivery system. Such an approach brings together professionals with diverse training backgrounds, including psychologists, social workers, physicians, nurses, and other specialists, to meet the complex needs of patients extensively. This model of collaboration is particularly effective in the intervention of complicated health situations, wherein physical, psychological, and social dimensions work together to largely influence patient outcome (Marsilio et al., 2017). McCormack et al. (2017) comment on the significance of understanding patients' environmental contexts through a social ecological approach to treatment that considers health and well-being a product of dynamic interactions between individuals and their environments, on all levels: familial, communal, and sociopolitical. When health providers take these interactions into consideration, they can propose interventions that are not only patient-centered but meaningful in the context, thus increasing the likelihood of their effectiveness. For example, barriers to adherence to medical recommendations by a patient might be made with reference to socioeconomic status, cultural beliefs, or family dynamics. A multidisciplinary team can identify these factors and address them, thereby ensuring that treatment plans really are tailored to the individual in question and his or her unique situation (McCormack et al., 2017).

Collaborative care models proved to be effective in the outcome that can address the chronic medieval disease. An example of this is the inclusion of mental health services in primary care that identifies early treatment for mental disorders that aggravate physical diseases. For instance, depression and anxiety are among the most chronic diseases associated with disabilities, such as diabetes and heart diseases, which in turn affect the management and course of physical diseases. Early inclusion of mental health professionals in primary care environments allows patients to quickly access psychological support that could eventually improve their handling of physical health problems. This type of integrated care relies on seamless cooperation among all healthcare providers to tend comprehensive care to addressing both mind and body (Southerland et al., 2016).

The extent of efficacy and competence of the multidisciplinary team extends into several specialties, including oncology. Their contribution to improved clinical outcomes includes collaboration among surgeons, oncologists, radiologists, pathologists, and psychosocial support staff. Al-huqayl and his colleagues came out with the study showing that such collaboration brings about improvement in the care coordination, timely interventions, and overall satisfaction of the patient (Al-huqayl et al., 2024). In the same vein, Liam et al. (2020) reported on improved staging, appropriateness of treatment plans, and ultimately survival in response to multidisciplinary team meetings in the management of lung cancer. These results show the importance that diversified models bring to the development of effective strategies regarding treatment (Liam et al., 2020).

In fact, the most significant aspect of rehabilitation of patients with multifaceted conditions such as cerebral palsy will be multidisciplinary teams. As Tremblay (2024) showed through a study that combined efforts employing physiotherapists, occupational therapists, speech therapists, and the rest of medical professionals bulks up rehabilitation, improved by leaps and bounds the functional abilities and quality of life of a patient. This holistic approach is where everything from the motor skills aspect to communication abilities should be addressed by holistic rehabilitation (Tremblay, 2024).

Such strategies have already been successful for some severe cases within critical care. For their part, Green et al. (2016) concentrated on the guide for mobilizing intensive care patients, stressing cooperatively working with the team of clinicians, nurses, and physiotherapists among themselves and with other health professionals. With this teamwork, mobilization protocols required for patients to recuperate faster and lessen hospital days can be developed and implemented. When the team members unite through the job, they can foresee possible complications, individualize interventions for the patient, and change the plan of care on-the-fly, thus achieving optimal outcomes (Green et al., 2016).

5. Challenges and Future Directions

While there are several positive aspects, these multidisciplinary healthcare approaches face significant barriers that obstruct the seamless collaboration of healthcare professionals. An important hurdle is the fragmentation that, by definition, produces disjointed channels of communication among the many practitioners of different fields. This disunity leads to inconsistent care of patients, as the vital information does not flow across

disciplines. For example, systemic barriers frequently interfere with the entire perioperative setting in the application of best practice recommendations, disrupting cohesive team dynamics (Korylchuk et al., 2024).

The pressing issues include a lack of standardized training programs that empower the health professionals with skills for effective interdisciplinary collaboration. Lacking a common set of cores, practitioners find it challenging to incorporate their expertise into a team-based environment, which may lead to overlapping or gap areas in patient care. Besides that, their lack of training raises compelling points for educational reform in favor of more credits designed for the development of skills for collaborative practice (Alreshidi et al.).

Practice models, designed to withstand the integration of psychosocial and health services, will be a major target for future research on care actions that can be integrated so easily and effectively with psychologists, social specialists, and secondary health experts. Evaluation of these models can reveal the proper approaches or highlight areas that need improvement. Policy reforms would also help facilitate service delivery and information sharing among patients efficiently. They will make barriers crumble by introducing effective policies that focus on collaboration action. This multisectoral coordination will bring things to a more solidified health system (Burke et al., 2022).

Education in holistic care would also create a link into medical education. This would indelibly make those future health professionals capable of assuming full control in dealing with patients if these concepts were integrated into the curriculum. This transformation in education prepares them to be a skilled workforce able to manage the intricacies of multidisciplinary collaboration, eventually enhancing patient outcome or advancing well-being (Chow et al., 2016).

CONCLUSION

Improvements in mental and physical health have been attained by involving individuals in all areas of psychosocial and medical expertise. An example is the role played by psychologists in bringing behavior and cognition into a health-related perspective by managing stress, following treatment protocols, or dealing with chronic ailments. They also contribute to address the concepts in digital health interventions and therapeutic processes related to overall well-being. Socially speaking, social workers besides community health advocates tend to the social determinants of health by building networks, lobbying, and designing community approaches. Hence, they continue becoming significant in reducing the effects caused by societal economic disparities on health status. Heavily into patient care, health experts like doctors and staff nurses also involve them in holistic approaches in the recognition that physiological, emotional, and spiritual status are interrelated.

Interdisciplinary approaches have shown much promise in improving health care through collaboration among these professionals, especially in providing needed care for chronic disease and mental health conditions. However, they face challenges like fragmentation of the healthcare system and no standard training on interdisciplinary approaches for easy integration. The future research agenda has been set toward refining collaborative care models, improving communication among healthcare professionals, and policy development to address holistic patient-centered care.

These systems will be more complete and effective in patient care by recognizing the close ties between mental and physical health issues, thereby fostering cooperation among psychologists, social specialists, and health experts. Not only would integrated practice contribute to improved individual health outcomes, but it would also contribute toward the better health of communities and societies.

REFERENCES

- 1. Al-huqayl, A. M. S., Alshahrani, A. S. H., Alqahtani, A. S. S., Alharthi, F. S., Aljohani, A. H., Mudeife, K. A., ... &Aldosary, O. B. (2024). Multidisciplinary Partnership to Upgrade Patient Satisfaction and Healthcare Performance. Journal of Ecohumanism, 3(8), 13013-13021.
- Alreshidi, M. S., Alharbi, S. H. S., & Alotaibi, N. M. A. Bridging Gaps Between Pharmacy, Nursing, and Laboratory Sciences: A Multidisciplinary Approach. International journal of health sciences, 6(S10), 2120-2132
- 3. Anderson, N., &Ozakinci, G. (2018). Effectiveness of psychological interventions to improve quality of life in people with long-term conditions: rapid systematic review of randomised controlled trials. BMC psychology, 6, 1-17.
- 4. Burke, C., Broughan, J., McCombe, G., Fawsitt, R., Carroll, A., & Cullen, W. (2022). What are the priorities for the future development of integrated care? A scoping review. Journal of Integrated Care, 30(5), 12-26.
- 5. Carey, L. B., Hodgson, T. J., Krikheli, L., Soh, R. Y., Armour, A. R., Singh, T. K., &Impiombato, C. G. (2016). Moral injury, spiritual care and the role of chaplains: An exploratory scoping review of literature and resources. Journal of religion and health, 55, 1218-1245.
- 6. Chow, G., Liou, K. T., &Heffron, R. C. (2016). Making whole: applying the principles of integrative medicine to medical education. Rhode Island Medical Journal, 99(3), 16.

- 7. De Diego-Cordero, R., Iglesias-Romo, M., Badanta, B., Lucchetti, G., & Vega-Escaño, J. (2022). Burnout and spirituality among nurses: A scoping review. Explore, 18(5), 612-620.
- 8. Domhardt, M., Engler, S., Nowak, H., Lutsch, A., Baumel, A., &Baumeister, H. (2021). Mechanisms of change in digital health interventions for mental disorders in youth: systematic review. Journal of Medical Internet Research, 23(11), e29742.
- 9. Ee, C., Lake, J., Firth, J., Hargraves, F., De Manincor, M., Meade, T., ...& Sarris, J. (2020). An integrative collaborative care model for people with mental illness and physical comorbidities. International Journal of Mental Health Systems, 14, 1-16.
- 10. Green, M., Marzano, V., Leditschke, I. A., Mitchell, I., &Bissett, B. (2016). Mobilization of intensive care patients: a multidisciplinary practical guide for clinicians. Journal of multidisciplinary healthcare, 247-256.
- 11. Hill-Briggs, F., Adler, N. E., Berkowitz, S. A., Chin, M. H., Gary-Webb, T. L., Navas-Acien, A., ... &Haire-Joshu, D. (2020). Social determinants of health and diabetes: a scientific review. Diabetes care, 44(1), 258.
- 12. Hsu, K. S., Eads, R., Lee, M. Y., & Wen, Z. (2021). Solution-focused brief therapy for behavior problems in children and adolescents: A meta-analysis of treatment effectiveness and family involvement. Children and Youth Services Review, 120, 105620.
- 13. Ignácio, Z. M., da Silva, R. S., Plissari, M. E., Quevedo, J., &Réus, G. Z. (2019). Physical exercise and neuroinflammation in major depressive disorder. Molecular neurobiology, 56(12), 8323-8335.
- 14. Javanparast, S., Windle, A., Freeman, T., & Baum, F. (2018). Community health worker programs to improve healthcare access and equity: are they only relevant to low-and middle-income countries?. International journal of health policy and management, 7(10), 943.
- 15. Jewett, R. L., Mah, S. M., Howell, N., & Larsen, M. M. (2021). Social cohesion and community resilience during COVID-19 and pandemics: A rapid scoping review to inform the United Nations research roadmap for COVID-19 recovery. International Journal of Health Services, 51(3), 325-336.
- 16. Kandola, A., Lewis, G., Osborn, D. P., Stubbs, B., & Hayes, J. F. (2020). Depressive symptoms and objectively measured physical activity and sedentary behaviour throughout adolescence: a prospective cohort study. The Lancet Psychiatry, 7(3), 262-271.
- 17. Khanpoor, H., Alizadeh, A., Khosravizadeh, O., Amerzadeh, M., &Rafiei, S. (2025). A mixed-methods model for healthcare system responsiveness to public health: insights from Iranian experts. Health Research Policy and Systems, 23(1), 1-11.
- 18. Kiely, B., Croke, A., O'Shea, M., Boland, F., O'Shea, E., Connolly, D., & Smith, S. M. (2022). Effect of social prescribing link workers on health outcomes and costs for adults in primary care and community settings: a systematic review. BMJ open, 12(10), e062951.
- 19. Knauss, A., & Jensen, J. F. (2024). Solution-Focused Therapy in the Medical Family Therapy Field: Adapting Clinical Skills to Different Healthcare Settings. Contemporary Family Therapy, 46(1), 76-86.
- 20. Korylchuk, N., Pelykh, V., Nemyrovych, Y., Didyk, N., &Martsyniak, S. (2024). Challenges and benefits of a multidisciplinary approach to treatment in clinical medicine.
- Kristoffersen, L., & Clarke, A. (2023). Integrating Holistic Approaches In Healthcare: Challenges And Opportunities For Professionals. International Journal of Management Practice and Innovation, 11(4), 9-23
- 22. Liam, C. K., Liam, Y. S., Poh, M. E., & Wong, C. K. (2020). Accuracy of lung cancer staging in the multidisciplinary team setting. Translational lung cancer research, 9(4), 1654.
- 23. López-Torres Hidalgo, J. (2019). Effectiveness of physical exercise in the treatment of depression in older adults as an alternative to antidepressant drugs in primary care. BMC psychiatry, 19, 1-7.
- 24. Mantel, J. (2016). Tackling the social determinants of health: a central role for providers. Ga. St. UL Rev., 33, 217.
- 25. Marsilio, M., Torbica, A., & Villa, S. (2017). Health care multidisciplinary teams: The sociotechnical approach for an integrated system-wide perspective. Health care management review, 42(4), 303-314.
- 26. McCormack, L., Thomas, V., Lewis, M. A., & Rudd, R. (2017). Improving low health literacy and patient engagement: a social ecological approach. Patient education and counseling, 100(1), 8-13.
- 27. Menezes, M., Robinson, M. F., Harkins, C., Sadikova, E., &Mazurek, M. O. (2021). Unmet health care needs and health care quality in youth with autism spectrum disorder with and without intellectual disability. Autism, 25(8), 2199-2208.
- 28. Morgan, R. D., Kroner, D., & Mills, J. F. (2017). A treatment manual for justice involved persons with mental illness: Changing lives and changing outcomes. Routledge.
- 29. Nakao, M., Shirotsuki, K., &Sugaya, N. (2021). Cognitive—behavioral therapy for management of mental health and stress-related disorders: Recent advances in techniques and technologies. BioPsychoSocial medicine, 15(1), 16.

- 30. Olaboye, J. A., Maha, C. C., Kolawole, T. O., & Abdul, S. (2024). Promoting health and educational equity: Cross-disciplinary strategies for enhancing public health and educational outcomes. International Journal of Applied Research in Social Sciences, 6(6), 1178-1193.
- 31. Southerland, J. H., Webster-Cyriaque, J., Bednarsh, H., & Mouton, C. P. (2016).Interprofessional collaborative practice models in chronic disease management. Dental Clinics, 60(4), 789-809.
- 32. Thornton, R. L., Glover, C. M., Cené, C. W., Glik, D. C., Henderson, J. A., & Williams, D. R. (2016). Evaluating strategies for reducing health disparities by addressing the social determinants of health. Health affairs, 35(8), 1416-1423.
- 33. Travis, D. J., Lizano, E. L., &Mor Barak, M. E. (2016). 'I'm so stressed!': A longitudinal model of stress, burnout and engagement among social workers in child welfare settings. The British Journal of Social Work, 46(4), 1076-1095.
- 34. Tremblay, S. M. (2024). Rehabilitation services for youth with physical disabilities and co-occurring mental health problems: Current practices, needs and future directions.
- 35. Uchino, B. N., Bowen, K., Kent de Grey, R., Mikel, J., & Fisher, E. B. (2018). Social support and physical health: Models, mechanisms, and opportunities. Principles and concepts of behavioral medicine: A global handbook, 341-372.
- 36. Välimäki, M., Anttila, K., Anttila, M., & Lahti, M. (2017). Web-based interventions supporting adolescents and young people with depressive symptoms: systematic review and meta-analysis. JMIR mHealth and uHealth, 5(12), e8624.
- 37. Vincensi, B. B. (2019). Interconnections: spirituality, spiritual care, and patient-centered care. Asia-Pacific journal of oncology nursing, 6(2), 104-110.