

Meta-Competency 7: Introduction to Interventions

BHSS Educator's Guide Version 1 valid until 12.31.25

Author: Bill O'Connell, EdD

Meta-Competency 7: Interventions

How to Use This Chapter

In recent years, brief evidence-based psychosocial interventions have emerged as crucial tools in addressing mental health concerns efficiently and effectively. These interventions, rooted in systematic research (Anik et al., 2021; Cuijpers et al., 2019; Field et al., 2015; Van Straten et al., 2010), aim to provide individuals with focused strategies to manage distress, build resilience, and improve overall well-being within a short time frame. By incorporating techniques from cognitive behavioral therapy, solution-focused therapy, dialectical behavioral therapy, and other well-validated approaches, brief psychosocial interventions can offer accessible support for individuals facing a range of mental health challenges. This chapter provides a brief overview of each intervention identified as a BHSS competency and recent modifications highlighting their potential to enhance mental health care in diverse settings.

To provide both breadth and depth in teaching psychosocial interventions, this chapter is divided into nine units.

Psychosocial Interventions

Unit MC7-a: Motivational Interviewing by Susan Collins, PhD

Competency: Integrate Motivational Interviewing strategies into practice.

- Motivational Interviewing (MI) is a highly effective psychosocial intervention that empowers individuals to navigate mental health challenges and substance use disorders by fostering intrinsic motivation for change (Miller, 2023). Grounded in a collaborative, person-centered approach, MI enhances self-efficacy and reduces ambivalence by guiding individuals to articulate their own reasons for change (Lundahl & Burke, 2009). Through empathic listening, strategic questioning, and affirming patient autonomy, practitioners help individuals resolve uncertainty and build confidence in their ability to improve their well-being. Research demonstrates that MI strengthens commitment to treatment and supports long-term recovery by encouraging self-directed goals and behavioral changes (Frost et al., 2018). As a versatile and evidence-based approach, MI has been successfully integrated into various therapeutic settings, proving its value in fostering sustainable change and enhancing mental health care.

Unit MC7-b: Psychoeducation by Annie McGuire, MS, MPH

Competency: Provide psychoeducation to patients and their support network about behavioral health conditions and treatment options consistent with recommendations from the healthcare team.

- Psychoeducation is a vital component for behavioral health and medical settings because it equips patients with knowledge and skills to understand and manage their conditions better. By providing clear, evidence-based information about mental health disorders, treatments, and coping strategies, psychoeducation fosters self-awareness and empowerment, enabling patients to participate actively in their care (Herrera et al., 2023). It enhances treatment adherence, reduces stigma, and improves overall health outcomes by helping individuals recognize symptoms early and make informed decisions (Zhao et al., 2015). In primary care settings, psychoeducation also supports integration between physical and mental health care, encouraging whole-person health. As a proactive and accessible intervention, psychoeducation strengthens resilience, promotes self-care, and contributes to sustained recovery.

Unit MC7-c: Distress Tolerance, Problem-Solving Strategies, and Relaxation Techniques by Joel Jin, PhD

Competency: Employ distress tolerance strategies, including problem-solving and relaxation techniques, to reduce the impact of acute stress on patient mental and behavioral health.

- Acute stress may be addressed through brief interventions with positive outcomes (Tol et al., 2013). When patients learn distress tolerance, problem-solving, and relaxation techniques, they are equipped with essential skills to manage acute stress effectively (Davoodi & Ghahari, 2017). Distress tolerance strategies help individuals endure overwhelming emotions without resorting to harmful coping mechanisms, fostering resilience in high-pressure situations. Problem-solving techniques empower patients to approach challenges with a structured and solution-focused mindset, reducing feelings of helplessness and improving decision making. Meanwhile, relaxation techniques, such as deep breathing, progressive muscle relaxation, and mindfulness, counteract the physiological effects of stress, promoting a sense of calm and control. Together, these skills enhance emotional regulation, mitigate the impact of stress on mental and physical health, and contribute to overall well-being, making them invaluable tools in both therapeutic and everyday settings.

Unit MC7-d: Behavioral Activation by Patrick Raue, PhD

Competency: Apply brief, evidence-based treatment for common mental health presentations, including depression, based on behavioral activation principles.

- Behavioral activation is a powerful, evidence-based intervention for depression that helps individuals regain motivation and engagement in meaningful activities (Dimidjian et al., 2011). Depression often leads to withdrawal, inactivity, and a loss of pleasure, reinforcing negative emotions and further reducing motivation. Behavioral activation works by breaking this cycle, encouraging individuals to identify and participate in rewarding and meaningful activities that can improve mood and enhance overall well-being. By increasing positive reinforcement and reducing avoidance behaviors, this approach fosters a sense of accomplishment and strengthens resilience. Research has shown that behavioral activation is highly effective in treating depression, making it an accessible and practical tool for recovery (Jakupcak et al., 2010; May et al., 2024).

Unit MC7-e: CBT for Anxiety by Brenna Renn, PhD

Competency: Apply brief, evidence-based treatment for common mental health presentations, including anxiety, based on cognitive behavioral therapy (CBT) principles.

- Brief cognitive behavioral therapy (CBT) is a highly effective intervention for anxiety, offering structured, time-efficient strategies to reduce distress and improve emotional resilience (Kessler et al., 2012). By focusing on unhelpful thought patterns and behaviors that contribute to anxiety, CBT helps individuals reframe negative thinking, develop coping mechanisms, and gradually face feared situations with greater confidence. Techniques such as cognitive restructuring, exposure therapy, and relaxation training are integrated to foster lasting changes in how individuals respond to stressors. Research indicates that even short-term CBT interventions can significantly decrease anxiety symptoms, making it a practical and accessible option in various therapeutic settings (van Dis et al., 2020). This approach empowers individuals to regain control, improve problem-solving skills, and cultivate a greater sense of well-being in daily life.

Unit MC7-f: SBIRT and Harm Reduction for Substance Use

Competency: Apply harm reduction strategies for substance use concerns, including the delivery of screening, brief intervention, and referral to treatment (SBIRT).

- This competency was composed three years ago and included SBIRT as an effective strategy for helping patients identify treatment options in settings that do not provide substance use disorder care. Since this competency was composed, the curriculum team recognized the inherent differences between SBIRT and harm reduction. A future iteration of the BHSS competencies will separate SBIRT and harm reduction, and this change is reflected in the BHSS Educator's Guide. The proposed new competency for MC7-f is "apply counseling strategies from evidence-based harm reduction treatment to help patients reduce substance-related harm and improve quality of life." For the BHSS Educator's Guide, SBIRT is now identified as MC7-f Part 1 and includes content related to adolescent use. Counseling strategies from harm reduction treatment are reflected in MC7-f Part 2.

1. Unit MC7-f Part 1: Screening Brief Intervention and Referral for Substance Use Disorders with Adolescents and Adults by Bill O'Connell, EdD

- Screening, brief intervention, and referral to treatment (SBIRT) is a structured approach in clinic settings for addressing substance use concerns. Recent studies have revealed mixed results in terms of outcomes depending on drug use patterns (Bray et al., 2017). Early identification through screening allows the BHSS to detect substance use patterns before they escalate into more severe health issues. Depending on the interpretation of "brief intervention," SBIRT may offer focused conversations that motivate individuals toward healthier choices and behavioral change (Del Boca et al., 2017). When necessary, referrals to specialized treatment ensure that those with higher-risk substance use receive appropriate care. SBIRT is cost-effective, integrates well into primary and behavioral health care, and may interrupt substance-related harm. By incorporating this structured approach, many clinics can enhance early intervention, promote recovery, and support overall well-being in individuals at varying levels of risk.

2. Unit MC7-f Part 2: Counseling Strategies from Harm Reduction Treatment for Substance Use Concerns by Susan Collins, PhD

- Learning counseling strategies for harm reduction treatment offers significant benefits by equipping the BHSS with practical tools to support individuals in reducing the negative consequences of risky behaviors without requiring immediate abstinence. These strategies foster a nonjudgmental and collaborative therapeutic alliance that respects patient autonomy and readiness for change. This can enhance engagement and retention in care. By integrating techniques such as Motivational Interviewing, problem-solving, and distress tolerance, BHSSs can help patients build coping skills, increase self-efficacy, and make incremental, sustainable changes that improve overall well-being and reduce harm. This approach is especially effective in diverse settings, including crisis intervention, integrated care, substance use treatment, and specialty mental health (Rigg, 2025).

Competency: Demonstrate a clear understanding of the evidence base for brief treatment that focuses on symptom reduction.

- Brief psychosocial interventions in mental and behavioral health are structured, evidence-based strategies designed to address psychological distress and support well-being within a short time frame. These interventions typically focus on key therapeutic principles, such as cognitive behavioral techniques, Motivational Interviewing, psychoeducation, and stress management, to help individuals develop coping skills and make meaningful behavioral changes. They are particularly effective in settings where time and resources are limited, such as primary care or crisis intervention, offering accessible support without requiring long-term therapy. By focusing on specific concerns and providing practical, solution-focused guidance, brief psychosocial interventions empower individuals to manage their mental health proactively and build resilience.

Future Adolescent and Young Adult Intervention Competencies

MC7-i: Building Developmental Strengths

- Building developmental strengths in adolescent mental health care is essential for fostering resilience, self-efficacy, and emotional well-being. Strength-based approaches focus on identifying and enhancing adolescents' inherent capabilities, such as problem-solving, emotional regulation, and social connectedness, rather than solely addressing deficits. By emphasizing positive attributes and empowering young individuals, these interventions help them navigate challenges with confidence and adaptability. Research suggests that integrating psychoeducation, mindfulness, and supportive peer interactions can significantly improve mental health literacy and resilience in adolescents (Jorm, 2012). Strength-based strategies also encourage a future-oriented mindset, reinforcing optimism and motivation for personal growth. By shifting the focus from limitations to strengths, adolescent mental health care can create a supportive environment that nurtures long-term well-being and development.

MC7-j: Brief Interventions for Family Systems

- Brief psychosocial interventions play a vital role in supporting families and adolescent patients in mental health care by fostering resilience, improving communication, and strengthening coping strategies. These interventions provide structured, evidence-based approaches such as family counseling, psychoeducation, and cognitive behavioral techniques that help adolescents navigate emotional challenges while equipping families with tools to offer effective support (Daniel et al., 2024; Eapen et al., 2024). By addressing stressors, enhancing problem-solving skills, and promoting emotional regulation, these interventions create a collaborative environment that encourages healing and growth. Research suggests that integrating brief psychosocial strategies into adolescent mental health care improves treatment engagement, reduces distress, and strengthens family bonds, ultimately contributing to long-term well-being (Carney et al., 2020).

Chapter Summary

The following units, authored by subject matter experts in the field, provide a detailed curriculum for integration into BHSS programs across a variety of courses. The content may be combined into an Interventions course or distributed across content-related courses that include a clinical practice component. Ample resources are provided to help reinforce learning and assess distinct skills. The existing curriculum was created for the adult population, but there is substantial overlap with adolescent and young adult populations. The BHSS Clinical Training Program is in the process of expanding the Educator's Guide with curriculum to support adolescent and young adult populations following consultation with subject matter experts across the behavioral health, integrated care, and education sectors.

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