

Behavioral Health, Introduction

Exam Information	Description
Exam number 304 Items 50 National Career Cluster Human Services Certification available Yes	The Introduction to Behavioral Health industry certification exam assesses understanding of individual wellness, effective communication, healthy relationships, addictive behaviors, mental health conditions, and protective laws and rights of patients and practitioners. This exam does not evaluate the ability to diagnose oneself, friends, or family but serves as an introduction to the behavioral health career field.

Exam Blueprint and Performance Skills

Standard	Percentage of exam score
1. Individual Wellness	25%
2. Communication	19%
3. Interpersonal Relationships	21%
4. Addictive Behaviors	19%
5. Mental Health	14%
6. Patient Protection Laws	2%

*Includes performance skill evaluation

Standard 1 - Individual Wellness

Candidates will explore individual wellness.

Objective 1 Introduces the different components of individual wellness.

1. The 7-dimension Wellness Wheel includes environmental, physical, spiritual, intellectual, social, financial/occupation, and emotional wellness

Objective 2 Explain how self-concept and self-esteem are built and preserved and how it relates to the perception of individual strengths and weaknesses.

1. Define Self-Concept, Self-Esteem & Self-Ideal
 - a. Self-Concept: how someone thinks about, evaluates or perceives themselves; the mental image or perception that one has of oneself.
2. Self-Esteem: is the positive or negative evaluations of the self, as in how we feel about it.
3. Self-Ideal: the way we would like to be
4. Describe the positive and negative development of self-concept and self-esteem.
 - a. Ways to build self-esteem.
 - b. Things that might hurt self-esteem.
 - c. Self responsibility (resiliency)
 - d. Self talk and affirmations
5. Bullying
 - a. Prevention and resources
 - b. Resiliency
6. Define how personal values, goals, and decision making contribute to self-concept.
 - a. Define and discuss values and their impact on self-esteem.
 - i. Values (Ideas, qualities, beliefs, and attitudes that guide the way you live) can change over time/ experiences, if behaviors are consistent with your values, it will build self-esteem.
 - ii. Behaviors inconsistent with or lack of values can negatively impact self-esteem.
 - b. Describe how goals impact values, behavior, decisions, and self esteem.
 - i. Goals: the result of something a person intends to acquire, achieve, do, reach, or accomplish sometime in the near or distant future.
 - ii. SMART Goals: refers to goals that are Specific, Measurable, Achievable/Attainable, Realistic, and • Time Framed.
 - iii. Short-term and long-term goals.
 - c. Decision making.
 - i. Describe the influence of social pressure on our decisions. i
 - ii. Evaluate the role of emotions, attitudes, and behavior in making decisions.

Objective 3 Explore the reward circuit and prefrontal cortex development on behavior.

1. Define the function of the Reward Circuit
 - a. Impulsive, emotional, and reactive
 - b. Primary area of brain utilized during adolescence
 - c. Impacts risky behaviors and poor decision making
2. Define the function of the Prefrontal Cortex Development

Objective 4 Identify the role of experiences that impact self-concept. in creating one's perception and on personal wellness & resilience.

1. Adverse Childhood Experiences (ACEs)
 - a. Adverse childhood experiences, or ACEs, are potentially traumatic events that occur in childhood (0-17 years). i.e. violence/abuse, death, divorce, substance misuse, etc.
 - b. ACEs are linked to chronic health problems, mental illness, and substance misuse in adulthood.
 - c. ACEs can also negatively impact education and job opportunities.
 - d. The effects of ACEs, with intervention, can be managed.

Trauma: when a person feels intensely threatened by an event that they are involved in or witness. The event is a trauma.

1. Acute – A single traumatic event that occurs in one's life.
2. Complex – Exposure to multiple trauma events often of an evasive, interpersonal nature and the wide ranging, long term effects of this exposure.
3. Chronic – Traumatic event that has occurred over and over in one's life.
4. Protective Factors/Resilience
 - a. Individual, family, and community resources.

Objective 5 Stress Management

1. Stress – the body's and mind's reaction to everyday demands or threats. Can affect how you feel, think, and behave as well as how your body works.
 - a. Eustress – positive impact on physical and mental health. Creates challenge response motivating one to rise to the occasion and increase confidence.
 - b. Distress – negative impact on physical and mental health. Creates a crippling response affecting productivity or ability to think clearly.
2. Coping Skills
 - a. Coping Skills – the method a person uses to deal with negative emotions.
3. Helpful – assists in thought processing to allow progression through negative emotion. i.e. Exercise, diet, journaling, hobbies
4. Hurtful – prevents progressing through the thought process of a negative emotion. i.e. selfharm, eating disorders, avoidance, substance abuse.
5. Coping skills can vary for each individual.

Objective 6 Candidates will explore careers related to individual self-concept wellness.

If possible, guest speakers in career areas related to each strand would add greatly to the course.

1. Clinical or counseling psychologist
2. Clinical social worker

3. Psychiatric nurse practitioner
4. Psychiatric registered nurse
5. Mental health counselor

Optional: Standard performance evaluations on the final page of this document

Standard 2 - Communication

Candidates will practice personal and professional effective communication.

Objective 1 Identify effective destructive and constructive verbal communication.

1. Destructive communication: Methods that tear down communication. i.e. blaming, interrupting, endless fighting, character assassination, calling in reinforcements, withdrawal, need to be right.
2. Constructive communication: Methods that promote and strengthen communication. i.e. “I” messages, clarity, timing, asking questions, reflective listening, respect and consideration, avoiding intense anger)
3. Communication Styles
 - a. Assertive - Confidently aggressive or self-assured. i
 - i. Self Advocacy - learning how to speak up for yourself, making your own decisions, reaching out to others, personal problem solving skills, etc.
 - b. Refusal skills: set of skills to help avoid high risk behaviors.
 - i. Say no, walk away, broken record, make jokes, ask questions, etc.
 - c. Passive aggressive- Denoting or pertaining to a personality type or behavior marked by the expression of negative emotions in passive, indirect ways, as through manipulation or noncooperation.
 - d. Aggressive- Boldly assertive and forward; pushy.
 - e. Passive- Submissive, unresisting.

Objective 2 Examine the effect of technology on communication

1. Identify nonverbal behaviors and messages (Most communication is nonverbal) a. Body Language i. Gestures ii. Eye Contact iii. Posture iv. Dress
2. Demonstrate effective ways to communicate personal boundaries and show respect for the boundaries of others.
3. Zones of Personal Space in Communication
 - a. Intimate Space: This zone is guarded closely and is reserved for close friends, relatives, and those we trust most.
 - b. Personal Space: This space is for those that we like. The closer someone is, the more we like them.
 - c. Social Space: Used for friendly gatherings and acquaintances.
 - d. Public Space: Used by speakers and audiences. Can vary from one person, family, or culture to another.

Objective 3 Examine the effect of technology on communication

1. Discuss positive and negative ways that technology affects communication.
 - a. Identify the purpose of Social Media and the effect on communication.
 - i. Social Media (Facebook, Instagram, Twitter, Tik Tok, etc.)
 - ii. Effect on Relationships (Friendships, Family, Romantic, Professional, etc.)
2. Negative effects
 - a. Affect mental state: comparison culture, contentious culture, body image, depression, loneliness, anxiety, cyber bullying, privacy.
 - b. Potential negative professional implications (loss of job or educational opportunities due to social media posts)
 - c. Positive effects
 - i. Maintain relationships with others, communicate easily, part of a peer/social network that can provide support, more social interaction, educational.
 - d. Social Etiquette
 - e. Human Connection

Objective 4 Explore careers related to effective communication in behavioral health.

1. Speech Pathology
2. Audiologist
3. Communicative Disorders
4. Behavioral Youth Counselor
5. Outreach Specialist

Standard 3 - Interpersonal Relationships

Candidates will explore the importance of healthy relationships.

Objective 1 Explore types of relationships and role responsibilities.

1. List the types of professional relationships (client/patient, teacher/candidate, employer/employee)
 - a. Review the important functions of professional relationships (respect, communication, productivity, collaboration, cooperation)
 - b. Identify appropriate role responsibilities in professional relationships (client/patient, teacher/candidate, employer/employee)
2. List the types of personal relationships (family, friends, romantic relationships)
 - a. Analyze the functions of personal relationships in growth and development (support, safety, guidance, etc.)
 - b. Identify responsibilities in personal relationships (honesty, respect, setting boundaries, clear expectations, respecting privacy, trust, etc.).
3. List types of community-based relationships (civic, religious, neighbor)
 - a. Analyze the functions and benefits of participating in community-based relationships. (volunteer work, educational, networking, invested in community etc.)
4. List virtual environments where relationships can develop (social media, professional affiliates, dating sites, gaming forums etc.)

- a. Identify the functions of virtual relationships (entertainment, networking, friendship, dating, professional etc.)
- b. Compare and contrast the functions of virtual relationships to professional, personal, and community relationships.
- c. Discuss the importance of awareness and safety when participating in virtual relationships.

Objective 2 Evaluate strategies to foster healthy relationships

1. Discuss the level of personal responsibility needed to form and participate in healthy relationships.
 - a. Review components of communication skills practiced in relationships (verbal, non-verbal, compromise, conflict resolution).
 - b. Demonstrate positive communication within each type of relationship. (personal, professional, community, virtual)
2. List behaviors demonstrating trust (dependability, contribution, privacy, advocacy, accountability, transparency, commitment)
 - a. Analyze the value of trust when developing relationships.
 - b. Compare and contrast the characteristics of trust for each type of relationship. (personal, professional, community, virtual)
3. Assess resources that support and foster healthy relationships. (therapy, workshops, community courses, counselor etc.)

Objective 3 Identify characteristics of unhealthy relationships and apply strategies to protect against unhealthy relationships.

1. Define abuse and identify physical/social/emotional forms of abuse and violence.
 - a. Abuse:
 - i. Physical: Intentional use of physical force that can result in physical injury.
 - ii. Emotional: Behaviors that harm one's self-worth or emotional well-being.
2. Identify different types of abuse in relationships (dating, professional, family, peers, community)
3. Identify characteristics and motivations of participants in the abuse/violence cycle
 - a. Stages of violence cycle: tension building, incident, reconciliation, calm.
 - b. Motivations: control, codependency, people pleaser, rescue mentality.
4. Define the types of sexual violations (harassment, assault, rape, abuse)
 - a. Consent: explicit vs. implicit
 - i. Explicit: an individual is clearly presented with an option to agree or disagree with and clearly indicates their choice
 - ii. Implicit: when surrounding circumstances exist that would lead a reasonable person to believe that this consent had been given, although no direct, express, or explicit words of agreement had been uttered.
 - iii. Consent is freely given, reversible, specific, silence is NOT consent.
 - iv. Force/coercion: Force does not always refer to physical pressure v. Perpetrators may use: threats, emotional coercion, manipulation, intimidation tactics etc.
5. Discuss the warning signs of abusive relationships. (jealousy, short temper, no privacy, raised in an abusive home, controlling, manipulation, isolation, reacts physically, lies)

Objective 4 Explore careers related to healthy and unhealthy relationships

1. Any type of therapy can relate to healthy and unhealthy relationships.
2. Specializations could be:
 - a. Domestic Violence
 - b. Domestic Violence Shelters
 - c. Marriage and family counselor
 - d. Psychologist
 - e. Abuse specialist
 - f. Victim advocate
 - g. Occupational therapist
 - h. Marriage and relationship educator
 - i. Sexual crisis counselors
 - j. Nonprofit resource specialist
3. Different agencies offer specific resources and opportunities within the industry.

Standard 4 - Addictive Behaviors

Candidates will identify patterns in addictive behaviors.

Objective 1 Overview of Addiction

1. Understand the process leading up to addiction and define key terms
 - a. Tolerance: when a person no longer responds to a drug or behavior in the way they did at first. People may seek more and more of a drug or behavior to get the “high” they seek.
 - b. Dependence: a condition where the body or brain has become so adapted to a substance that an individual would experience negative side effects should they abruptly cease use. This is known as withdrawal.
 - c. Addiction: a chronic, relapsing disorder characterized by compulsive behavior, continued use despite harmful consequences, and long-lasting changes in the brain.
 - d. Cravings: intense urges to use a particular substance or engage in a particular behavior
2. Identify the two types of addiction (behavioral & substance) and examples of each.
 - a. Behavioral addiction: the individual is addicted to the behavior or the feeling brought about by the relevant action.
 - b. Signs of behavioral addiction: craving, excessive behavior, psychological and physical withdrawal symptoms, loss of control, development of tolerance, whenever a habit changes into an obligation.
 - i. Examples: gambling, video game playing, eating disorders, sports and physical exercise, media use, sex addiction, pathological working, and compulsive criminal behavior.
 - c. Substance use disorder: chronic, relapsing disorder characterized by compulsive drug seeking, continued use despite harmful consequences, and long-lasting changes in the brain.

3. Review that addiction can affect people of all ages, race or gender. (teens, adults, parents, babies)

Objective 2 Explore the function of brain chemistry on mental health.

1. Identify major parts of the brain and their main functions.
 - a. Emphasis should be placed on a basic overview, with more detail given to parts of the brain that are involved with course content (behavior, addiction, mental illness, etc.)
2. Healthy Brain Function
 - a. Neurons (nerve cells) – sends and receives electrical signals to/from other parts of the brain, spinal cord and nerves in the rest of the body.
 - b. Neurotransmitters – chemicals released into the gap (synapse) between neurons that cause changes in the receiving cell.
 - c. Reward circuit –
 - i. Group of neurons in the brain (basal ganglia) that control behavior and memory.
 - ii. Neurotransmitters help the brain make connections between an activity and pleasure. Certain neurotransmitters trigger either “go” or “stop” signals to pass along messages.
 - iii. Example: food, hobbies, relationships, etc.
 - d. Prefrontal Cortex –
 - i. Thoughtful, logical, reasoning, and higher-leveling thinking (promotes the processing of potential consequences of actions)
 - ii. Regulates emotions, recognizes social cues and non-verbal communication
 - iii. Not fully developed until mid-20’s
3. Chemical changes within the brain
 - a. Substances that can modify neurotransmission.
 - i. Medications – over the counter and prescription
 - ii. Alcohol
 - iii. Nicotine
 - iv. Illicit/illegal drugs
 - b. Chemical changes that can lead to addiction
 - c. Repeatedly exposes the brain to a flood of neurotransmitters (by blocking transporters, blocking receptors, exciting neurons, etc.
 - d. With each repeated exposure, the brain slowly adjusts
 - e. Effects are
 - i. Diminished natural highs – what once brought joy/fulfillment does not
 - ii. Higher tolerance – need to increase quantity, potency, and frequency of substance to have the same effect

Objective 3 Explore the addiction recovery process.

1. Determine how the brain can reverse the effects of addiction.
 - a. Define Neuroplasticity: the ability of the brain to form new neural pathways. The more you use your brain in a specific way the stronger the brain and pathways become, but it can also work in reverse.
 - i. Explore the concept of Use it (to learn new things) or Lose it (the brain can change back through sobriety)

- b. An addict's neural pathway is strong but with long periods of sobriety it can begin to heal chemically and physically.
- c. Treatment varies depending on the type of drug and the characteristics of the patients. Matching treatment settings, interventions, and services to an individual's particular problems and needs is critical to his or her ultimate success in returning to productive functioning in the family, workplace, and society.
 - i. A patient may require varying combinations of services and treatment components during the course of treatment and recovery. (Examples: Counseling or psychotherapy, family therapy, medications, etc.)

Objective 4 Identify the effects of addiction on family and friends of an addict.

- 1. Trauma, abuse, neglect, violence, financial hardships, exposure to other drugs, poor school performance, strained relationships, loss of legal custody, reckless behavior.

Objective 5 Explore careers related to addiction recovery.

- 1. Marriage & Family therapy
- 2. Group therapy
- 3. Addiction recovery specialist
- 4. Social Workers
- 5. Medical Professionals

Standard 5 - Mental Health

Candidates will identify mental health conditions and the common signs, symptoms, and treatment.

Objective 1 Categorizing and defining mental health conditions and related stigma.

- 1. Mental Health Condition: "A major disturbance in an individual's thinking, feelings, or behavior that reflects a problem in mental function" (APA, Understanding Mental Disorders p. xvi)
 - a. Deviant, Distressful, Dysfunctional
- 2. Diagnosing a condition
 - a. The Diagnostic and Statistical Manual of Psychological Disorder IV (DSM-5)
 - b. What is the purpose of the DSM-5? To standardize mental health diagnosis and care
 - c. What is in the DSM-5?
 - i. Symptoms
 - ii. Diagnostic Criteria
 - iii. Risk Factors
 - iv. Prevalence
 - v. Comorbidity- conditions that commonly go together
 - vi. Differential Diagnosis- conditions that can be mistaken for other conditions

- vii. Prognosis
 - viii. Treatment Options
- d. Conditional vs. diagnosed mental conditions
 - i. Conditional - normal day to day
 - ii. Diagnosed mental conditions
- 3. 3 types of stigmas related to mental health conditions
 - a. Self stigma- within oneself, internalizing other forms of stigma.
 - b. Social stigma- interpersonal
 - c. Structural/Institutional- examples: societal, hiring practices, government policy
- 4. Mental Health disorder conditions can happen at any age and will be a life-long journey.
 - a. Examples of Types of Treatment
 - i. DBT - dialectical behavior therapy, CBT - Cognitive Behavioral Therapy, ACT - Acceptance, Commitment Therapy- Value Based Therapy, Psychotherapy, etc.
- 5. Treatment options
 - a. Psychotherapy - talk therapy
 - i. Psychotherapy can be offered individually, in couples, families, or groups
 - ii. Some types of psychotherapy (Information via Mayo Clinic)
 - iii. Cognitive Behavioral Therapy (CBT)- helps you identify unhealthy, negative beliefs and behaviors and replace them with healthy, positive ones
 - iv. Dialectical Behavior Therapy (DBT)- teaches behavioral skills to help you handle stress, manage your emotions and improve your relationships with others
 - v. Acceptance and Commitment Therapy (ACT)- becoming aware of and accept your thoughts and feelings and commit to making changes, increasing your ability to cope with and adjust to situations
 - vi. Psychodynamic and psychoanalysis therapy- increase awareness of unconscious thoughts and behaviors, developing new insights into your motivations and resolving conflicts
 - vii. Pharmacological - prescription drugs

Objective 2 Identify some common mental health condition categories, starred categories* are essential: (See addendum)

- 1. Anxiety Disorders *
- 2. Bipolar and Related Disorders
- 3. Depressive Disorders *
- 4. Dissociative Identity Disorder
- 5. Schizophrenia Spectrum and Related Disorders
- 6. Feeding and Eating Disorders *
- 7. Personality Disorders
- 8. Obsessive Compulsive Disorder and Related
- 9. Trauma and Stressor Related Disorders *
- 10. Neurodevelopmental Disorders

Objective 3 Explore knowledge of risk factors, protective factors, warning signs and resources for suicide prevention.

- 1. Risk Factors of suicide
 - a. Mental health conditions

- b. Social isolation
 - c. A time of crisis
 - d. Substance misuse
 - e. Trauma
 - f. Societal pressures
 - g. Life-changing illness or injury
 - h. Suicidal ideation- thinking about, planning, or considering suicide
 - i. Suicidal attempt
2. Protective Factors
- a. Connectedness
 - b. Reduced access to lethal means
 - c. Access to quality Healthcare
 - d. Social supports
 - e. Coping strategies
 - f. Resiliency
3. Warning Signs
- a. Isolation from friends & family
 - b. Change in behavior and sleeping patterns
 - c. Impulsive, irrational, or extreme mood swings
 - d. Giving away personal items
 - e. Substance misuse
 - f. Boredom and indifference
 - g. Violent actions or rebellious behaviors
 - h. Running away
 - i. Writing about death or suicide (Example: poems, diary, songs, social media, etc.).
 - j. Talking about hopelessness, death, or being a burden
- Identify suicide prevention resources
4. Identify suicide prevention resources
- a. If you believe someone may be at risk
 - i. Question, Persuade, Refer (QPR) - Consider bringing in district or health department instructors as a guest speaker.
 - b. Ongoing support
 - i. HOPE Squad
 - c. Resources for suicide prevention
 - i. Safe Utah App
 - ii. Trusted Adults
 - iii. Emergency 911
 - iv. Statewide Crisis Line
 - v. Emergency Mental Health number being considered: 988

Standard 6 - Patient Protection Laws

Candidates will explore patient protection laws and right and professional obligation

Objective 1 Legal, Ethical and professional responsibilities/boundaries

1. Abuse and neglect recognizing & reporting
2. Accurate documentation
 - a. Professional: Correct grammar and proper English
3. Law associated with Behavioral health (History)
 - a. Tarasoff Law Case
 - b. HIPAA Laws
 - c. Hitech
 - d. 42CFR Part 2
4. Ethical responsibility: Guided by Behavioral Health professional organizations

Performance Skills Evaluation

Exam name: Behavioral Health

Candidate Name: _____

Performance assessments may be completed and evaluated any time before the certification is issued. The following performance skills can be used in connection with the associated standards and exam. The evaluator will function as the subject matter expert to determine if the candidate meets the skills requirements with a Yes/No for passing.

Standard 1 – Individual Wellness

- Candidates will evaluate their overall health using the wellness wheel, setting goals in each dimension.
- Candidates will explore different healthy coping skills (Imagery, Meditation, Mindfulness, Yoga etc.)

Pass:

Standard 2 – Communication

- Candidates will explore the effect of communication in multiple environments (Possible examples: survey of peers on technology use, tracking their own use of technology, track their own or peers positive & negative communication, tracking their positive/negative communication in different environments.)
- Demonstrate refusal skills in a variety of situations. (e.g., professional, peer, relationships)

Pass:

Evaluator Name:

Date:
