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Approaching 15 years since the initial publication of BBPSW in 2005, the task of updating this third edition remains both daunting and energizing. Research in human behavior theory, assessment, and intervention continues to expand rapidly in most areas of mental health practice. Evidence continues to demonstrate the need for inter-disciplinary research that supports a coherent yet flexible intervention model that includes a good working relationship with the client, cognitive-behavioral methods, behavioral family therapy, and contingency management approaches within a systems approach. A variety of technology-assisted interventions are emerging and include computer-assisted, smartphone, and virtual reality technology all with varying degrees of clinician assistance for a variety of disorders. These approaches potentially offer great scalability and cost-effectiveness for assisting people who otherwise would not have easy access to care, could not afford traditional face-to-face services, or are reluctant to seek help due to fear, stigma, or privacy concerns. In the coming years, social workers are likely to divide their professional time between online and in-person contact with clients to optimize their assessment, intervention, and evaluation efforts resulting in more cost-effective services. The service-delivery and financing sectors will have to change substantially to accommodate these promising advances in technology-assisted care.

The rapidly expanding literature on evidence-based practices (EBPs) with people from various races, cultures, and countries has also continued to grow and is further emphasized in this third edition. Hopefully this content will help to clarify the aspirations of *culturally competent practice*. As one reviews the empirical literature, it becomes increasingly clear that, with some common sense modifications (e.g., language, understanding local cultural beliefs and customs), EBPs translate quite well across races, cultures, and international borders. Naysayers who opine that science-informed intervention approaches are somehow not suitable for non-Western cultures have either ignored the evidence or have simply missed the growing developments in global mental health. Future research will continue to elucidate the extent to which modifications are necessary to enhance treatment effectiveness from