

# **The Pathways from Trauma in Legal Offenses and How to Help Divert Them**

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# Disclaimer

**The views expressed in this presentation are solely those of the presenter and do not represent those of the Veterans Health Administration or the United States government.**

**The author has no conflicts of interest to disclose.**

# **Trauma in the Criminal Justice System**

# The Prevalence of Trauma in Justice-Involved Populations

The experience of trauma among people with substance abuse and mental health disorders, especially those involved with the justice system, is so high as to be considered *an almost universal experience*.

This is also true among Veterans: a recent study found that 93% of incarcerated Veterans had experienced trauma (Hartwell et al., 2014)

SAMHSA, 2013

# **Childhood Trauma**



## **The Child Welfare System in the United States in 2016**

- 73.7 million children in the U.S.
- 4.1 million referrals
  - One referral *every 8 seconds*
- This represents 3.5 million children
  - 4.7%, or more than 1 out of every 21 children
- 3.47 million investigations

Child Maltreatment 2018, DHHS

# The Child Welfare System in the United States in 2016

- 
- 676,000 child victims
    - This equals 0.9% of children
  - 144,000 children received foster care services
    - 437,000 total children in foster care (U.S. Children's Bureau, 2018)
  - 1,750 fatalities

Child Maltreatment 2018, DHHS





# The Severity of Childhood Maltreatment



- More than 46%-67% of children report at least one traumatic event prior to age 18 (Copeland et al., 2007; National Survey of Children's Health, 2016)
- 14%-16% of boys and 27%-32% of girls report sexual abuse prior to age 18 (Briere & Elliott, 2003; Finkelhor et al., 1990)
- Childhood abuse is associated with future adult victimization (Briere & Elliott, 2003)



# The Effects of Abuse on Early Brain Development

- Excess cortisol and heightened amygdalar response causing
  - Chronic fear and anxiety
  - Inattention
  - Overreactivity
  - Impulsivity
  - Hyperalertness and hyperarousal
  - Sleep problems

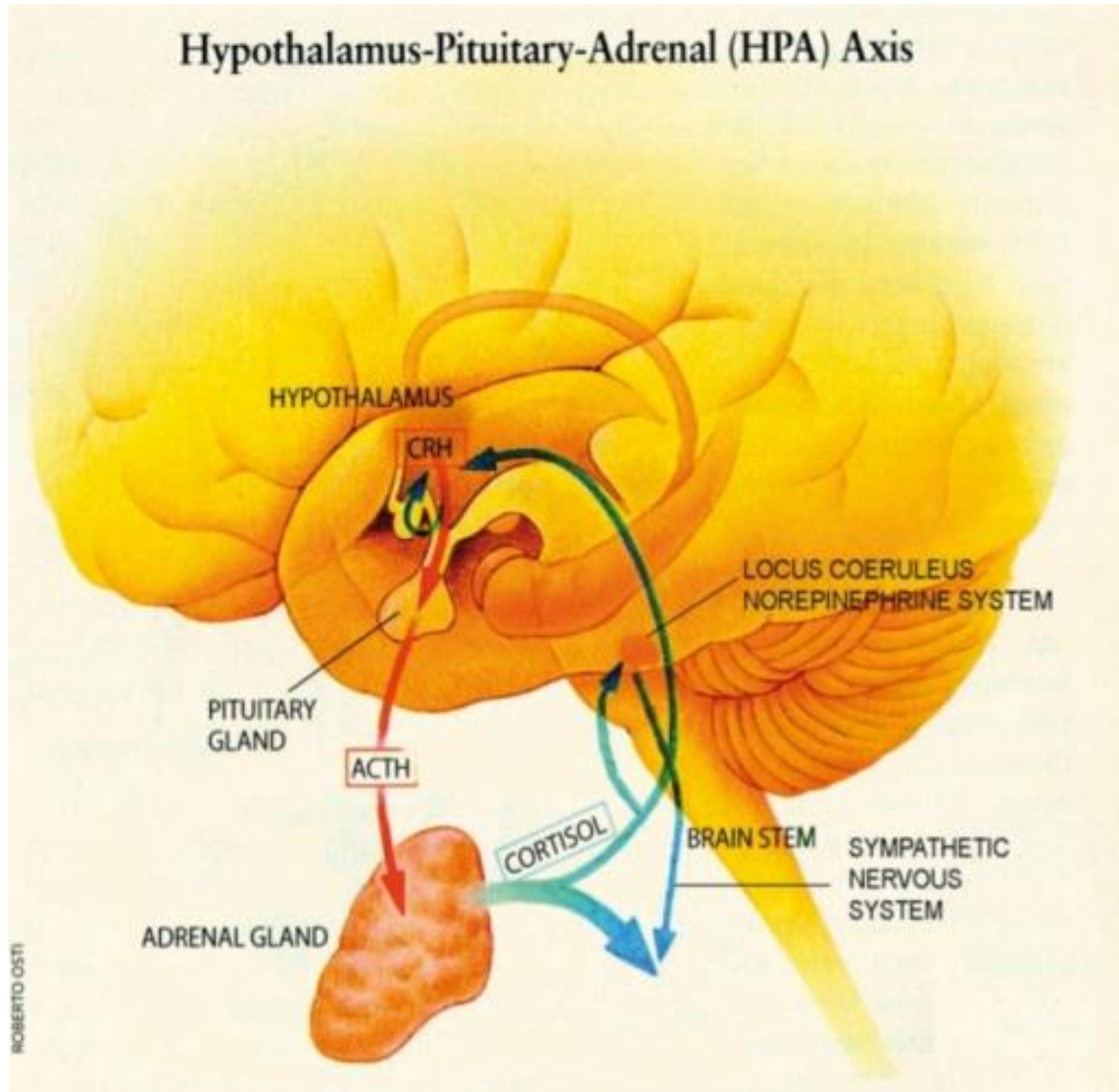
# The Effects of Abuse on Early Brain Development

Increased epinephrine and stress steroids causing:

- Dissociation
- Disengagement
- Distorted attachments to others
- Numbing
- Emotional detachment
- Inability to feel empathy and remorse



# The Effects of Abuse on Early Brain Development



Hyperactivity of the Hypothalamic-Pituitary-Adrenocortical Axis causing:

- Cognitive impairments
- Emotional dysregulation
- Increased passive/avoidant behavior
- Depression

# Some Negative Outcomes of Child Maltreatment

Mental health  
problems

Substance  
abuse

Homelessness

Prostitution

Violence

Involvement in  
the child  
welfare system

Involvement in  
the juvenile  
justice system



# Abuse and the Criminal Justice System

- Estimates of lifetime physical or sexual abuse experienced by men in the criminal justice system range from 25%-68% (James & Glaze, 2006; Weeks & Widom, 1999)
- Estimates of PTSD diagnoses among incarcerated men range from 20%-54.6% (Proctor & Hoffman, 2012; Trestman et al., 2007)
- Rates of physical and sexual victimization among incarcerated men and women range as high as 36% in men and 30% in women (Wolff & Shi, 2010)
  - Men experience more physical assault and women experience more sexual assault
  - These rates are higher among people with mental health problems

# **Arousal**

# PTSD: Increased Arousal

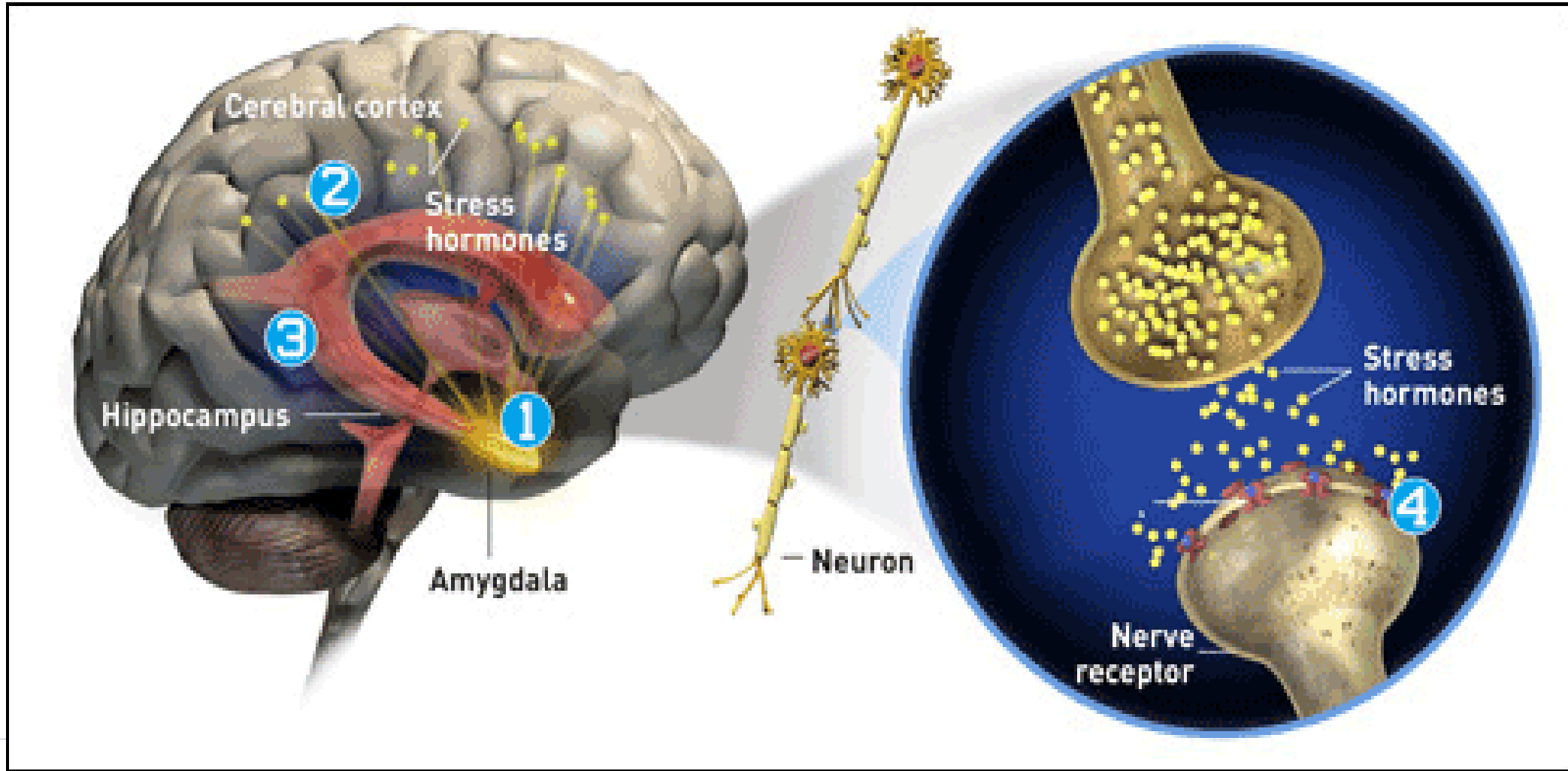
E. Trauma-related alterations in arousal and reactivity that began or worsened after the traumatic event:

- **Irritable or aggressive behavior**
- Self-destructive or **reckless behavior**
- Hypervigilance
- Exaggerated startle response
- Problems in concentration
- Sleep disturbance

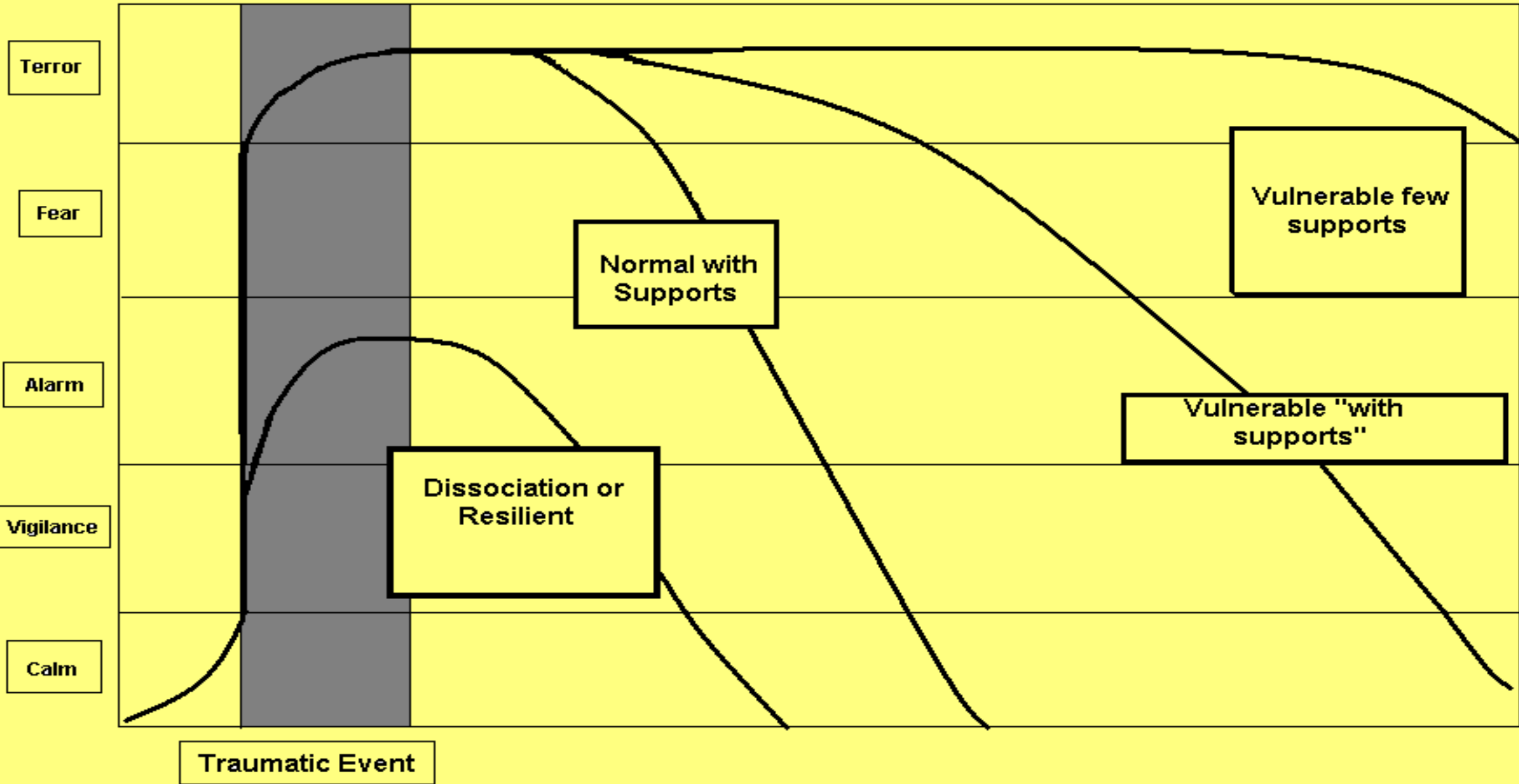




# Traumatic Stress and the Brain



# ACUTE RESPONSE TO TRAUMA

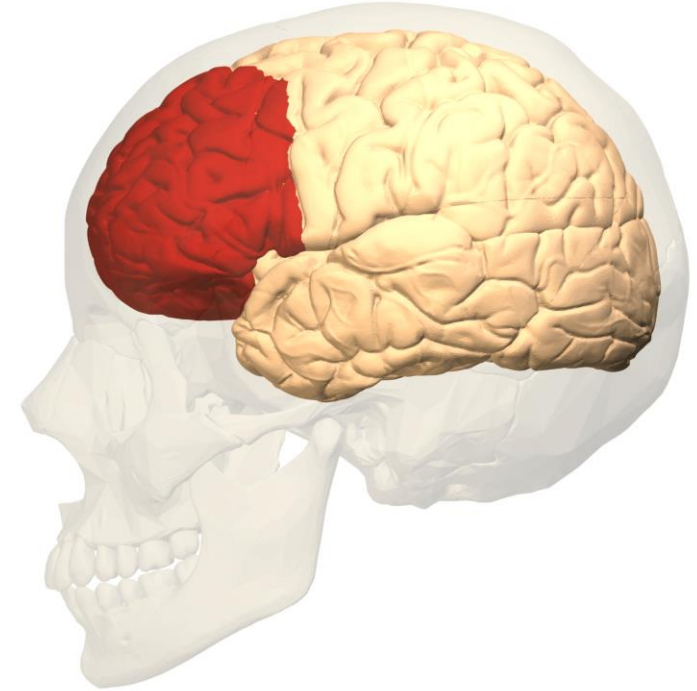


# Post-Combat Arousal Is Like Having An Alarm in Your Body That Is Always Going Off



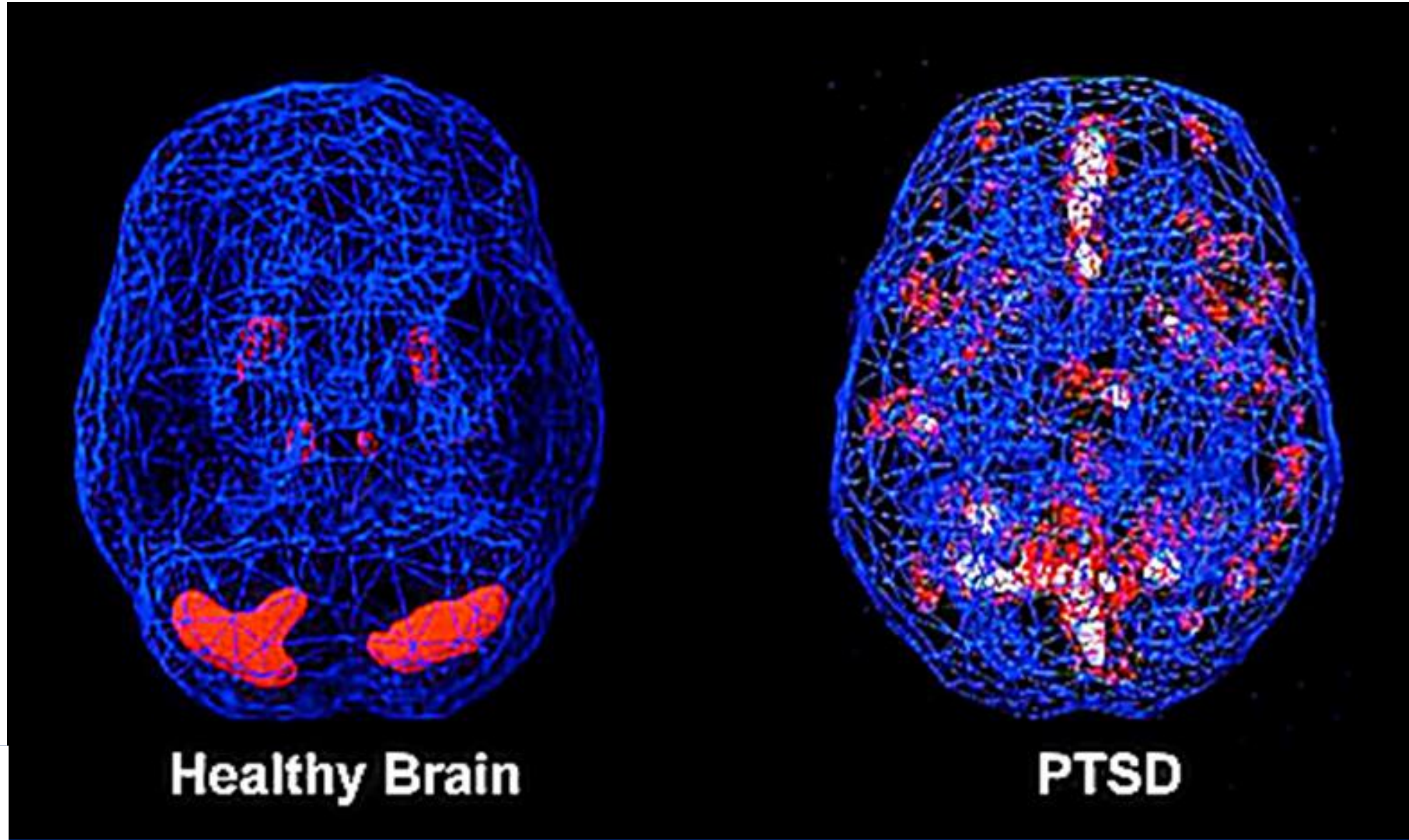
# Traumatic Stress Decreases Activity in the Prefrontal Cortex

- The Prefrontal Cortex is involved in:
  - Judgment
  - Assessment of risk
  - Inhibition
  - Planning
  - Anticipation of consequences
- Combined with the overactivation of the Amygdala, it is therefore unsurprising that people with histories of traumatic experiences are more likely to have legal difficulties than those who do not





# Traumatic Stress Changes the Brain

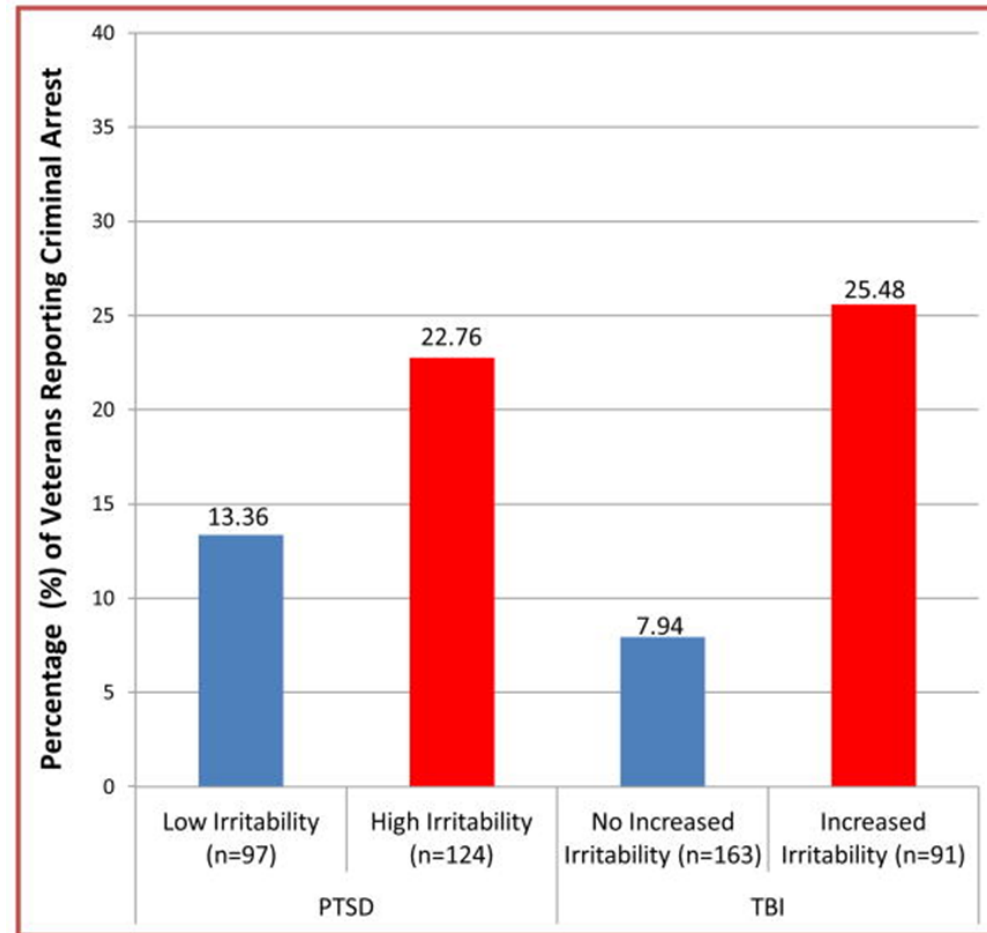


# Substance Abuse and Arousal

- Substance abuse may be a means of decreasing arousal
- It can also result in arrest, conviction, and imprisonment



# Irritability Increases Arrests



Elbogen et al., 2012

# **Post-Traumatic Stress Disorder**



# PTSD: Negative Cognitions and Mood



- Persistent negative trauma-related emotions (e.g., fear, horror, **anger**, guilt, or shame)
- Markedly diminished interest in significant activities
- **Feeling alienated from others**
- Constricted affect: persistent inability to experience positive emotions

# Why PTSD May Contribute to Violence

- Irritability, startle responses, anger, and aggressive behaviors are symptoms of PTSD
- Disturbance of isolation can lead to outbursts
- Response to sudden movements
- Flashbacks
- Dissociation
- Attacks during nightmares
- Arguments about decreased family involvement



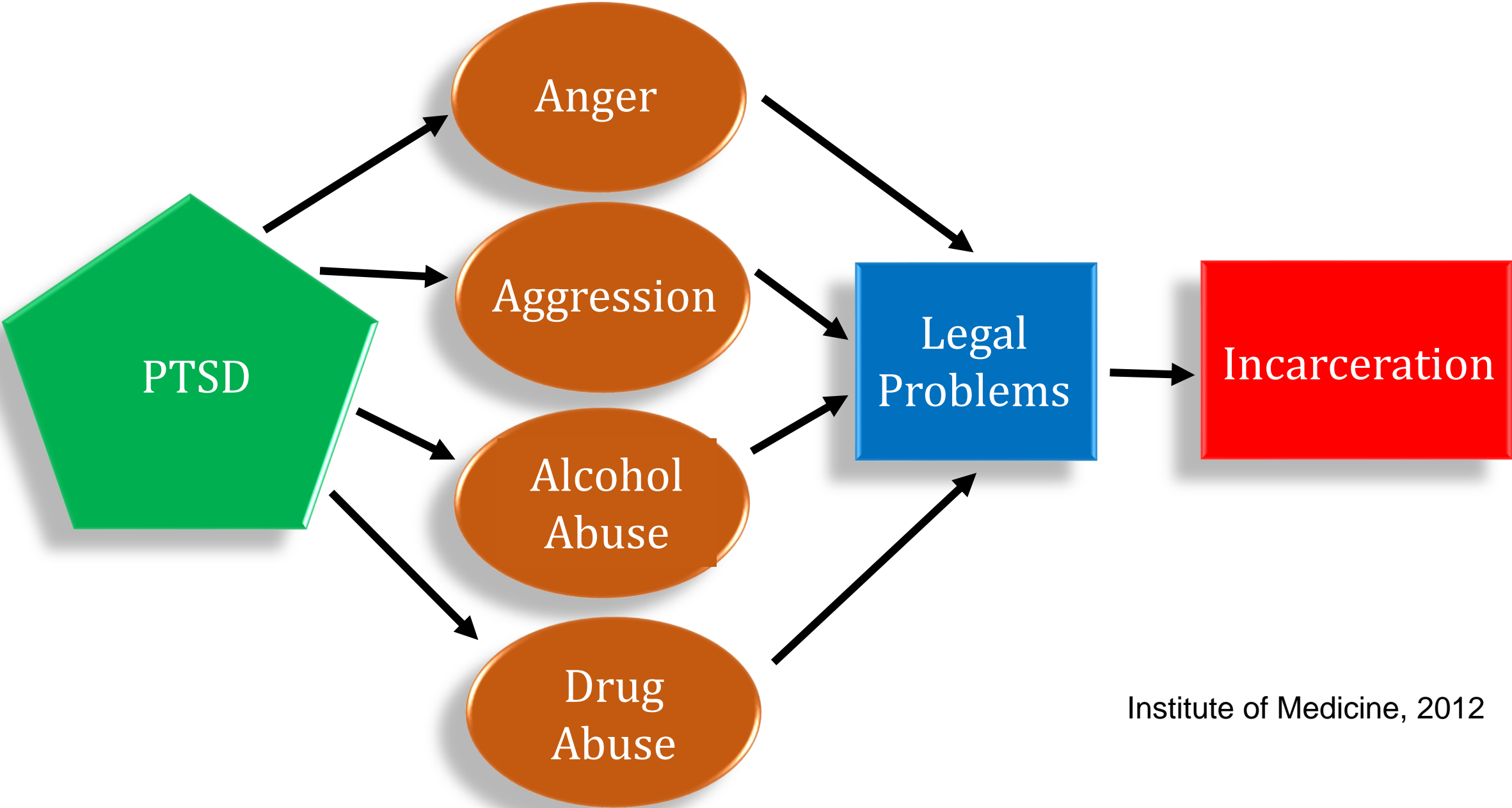
# Some Areas Where PTSD and the Legal System Intersect

- Domestic violence
- Child abuse
- Divorce
- Juvenile delinquency
- Homelessness



- DUI/DWI
- Misdemeanors
- Threats
- Violence
- Criminal behavior

# Links from PTSD to Incarceration



# **The Range of Post-Traumatic Stress Responses**

# Post-Traumatic Responses Occur on a Continuum



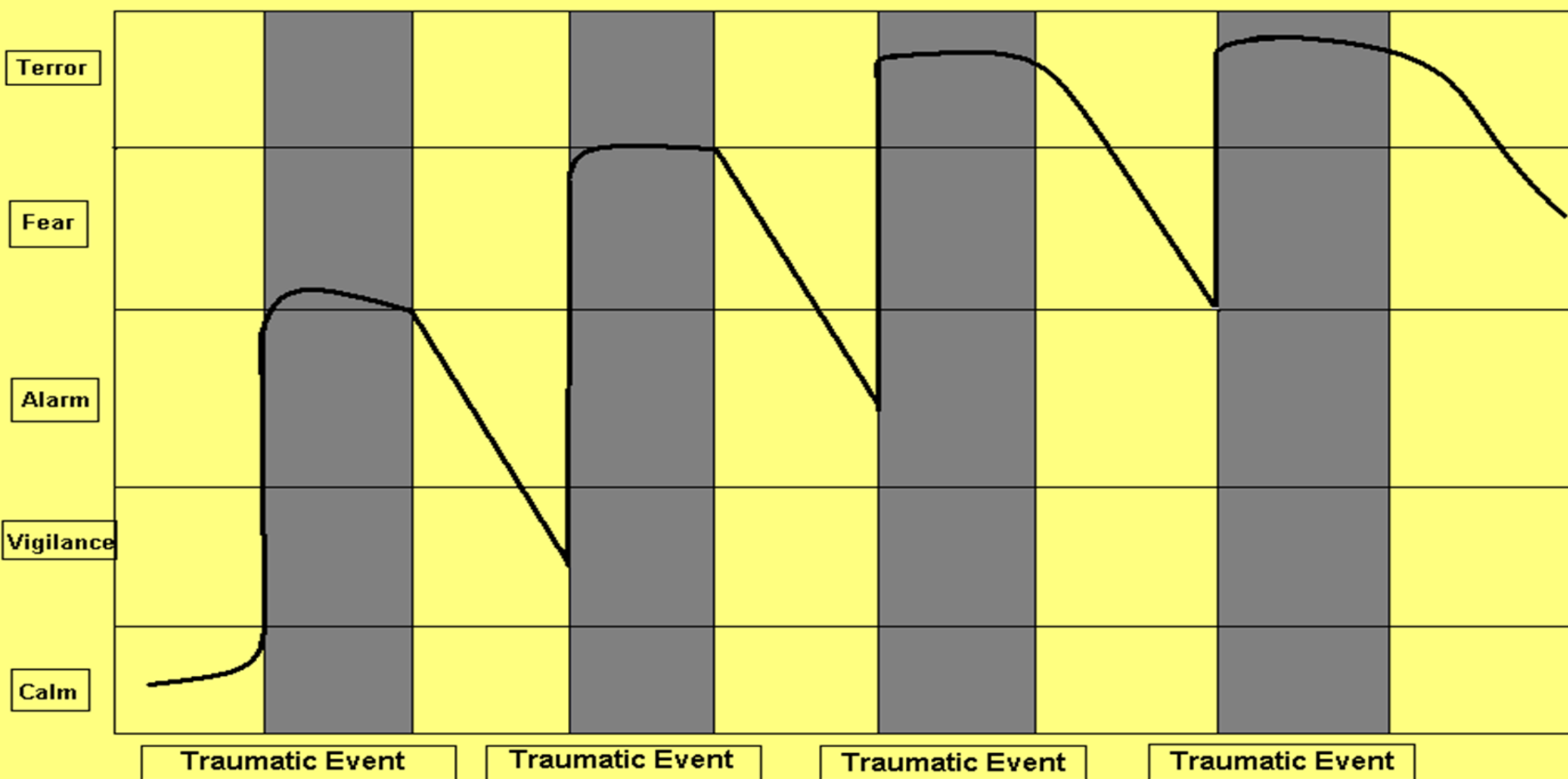
None

Mild

Moderate

Severe

# RESPONSE TO MULTIPLE TRAUMAS



# Complex Trauma

Complex PTSD is the psychological effects of chronic, cumulative, and often different types of traumas

Results from interpersonal victimization, multiple traumatic events, and/or traumatic exposure of prolonged duration

- Sexual and physical abuse
- Domestic violence
- Ethnic cleansing
- Prisoners of war
- Torture
- Being held hostage





# Complex PTSD Is Much More Than Simple PTSD

- Loss of a coherent sense of self
- Problems in self-regulation
- Tendency to be revictimized
- Other mental health disorders
- Substance use disorders
- Health problems
- Relationship problems
- Changes in systems of belief and meaning



# Complex Trauma in ICD 11\*

## PTSD

Re-experiencing

Avoidance

Hyperarousal

\*Released for implementation  
planning on June 18, 2018;  
effective January, 2020

## Complex PTSD

Re-experiencing

Avoidance

Hyperarousal

Affect Dysregulation

Negative Self-Concept

Interpersonal Disturbances

# Personality Disorders



- Borderline Personality Disorder
  - 81% have histories of childhood trauma (Herman et al., 1989)
- Antisocial Personality Disorder
  - Childhood trauma significantly predicts ASPD (Dutton & Hart, 1992; Horwitz et al., 2001; Luntz & Widom, 1994; Marchall & Cooke, 1999)
- 73% of people with personality disorders have histories of child abuse (Battle et al., 2004)
- This suggests that personality disorders may be specific manifestations of complex trauma

# Many Branches of the Trauma Tree

Other Trauma  
and Stressor-  
Related  
Disorders

PTSD

Complex  
PTSD

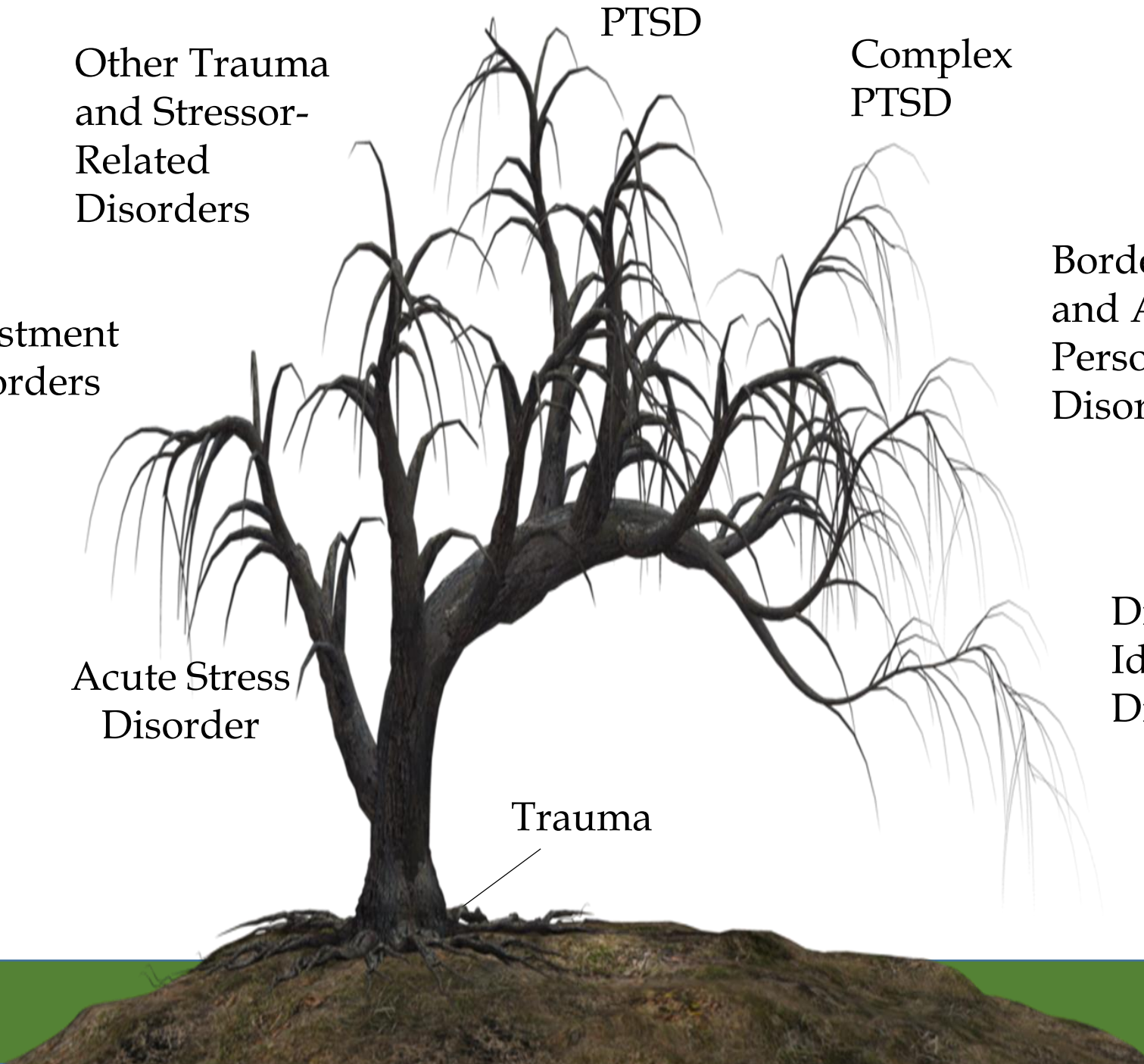
Adjustment  
Disorders

Borderline  
and Antisocial  
Personality  
Disorders

Acute Stress  
Disorder

Dissociative  
Identity  
Disorder

Trauma



# **The Special Case of Veterans**

# High Prevalence of Prior Child Maltreatment

- A study of Army soldiers (Rosen & Martin, 1996) found that:
  - 17% of males and 51% of females reported childhood sexual abuse
  - 50% of males and 48% of females reported physical abuse
  - 11% of males and 34% of females experienced both
- More than 1/3 of incarcerated Veterans report childhood physical abuse (Saxon et al., 2001)
- 77% of incarcerated Veterans experience trauma before the age of 18 (Hartwell et al., 2014)



# Justice-Involved Veterans

- In 2007, 1.2 million Veterans were arrested (Patton, 2014)
- The primary reason Veterans are arrested is substance abuse (Beckerman, et al. 2009; Erickson, et al. 2008)
- 87% of Veterans in jail have a history of trauma (Blodgett et al., 2012)
  - 75% have co-occurring mental health and substance abuse problems





# Violence in Veterans

- The rate of domestic violence is higher in the military than the civilian population, especially severe aggression (Bray & Marsden, 2000; Heyman & Neidig, 1999)
- **Domestic violence in Army families rose 33% from 2006-2011** (DOD, 2012)
- Results of national study of 1,388 Veterans (Elbogen et al., 2012):
  - 10% reported a history of violence prior to deployment
  - 11% reported incidents of severe violence in the past year
  - 32% reported incidents of physical aggression in the past year
  - These were related to combat involvement, depression, alcohol abuse, current PTSD, history of violence, and debt

# **Military and Combat Reinforcement of Arousal, Aggression, and PTSD Symptoms**

**These are all adaptive in a war zone and, in many cases, trained:**

- Reactivity to reminders
- Avoidance of felt danger
- Distrust of outsiders
- Negative expectations of world
- Anger
- Aggressiveness
- Using violence to solve problems
- Numbness
- Hypervigilance
- Startle responses
- Risk-taking
- Insomnia

# How Military Training May Affect Criminal Behavior in Some Veterans

Learned military skills and tactics such as hypervigilance and rapid response to threatening encounters that enhance survival in combat may translate to aggressiveness, impulsivity, **arrest, and potential for incarceration** in the civilian community.

Institute for Veterans Policy, 2011

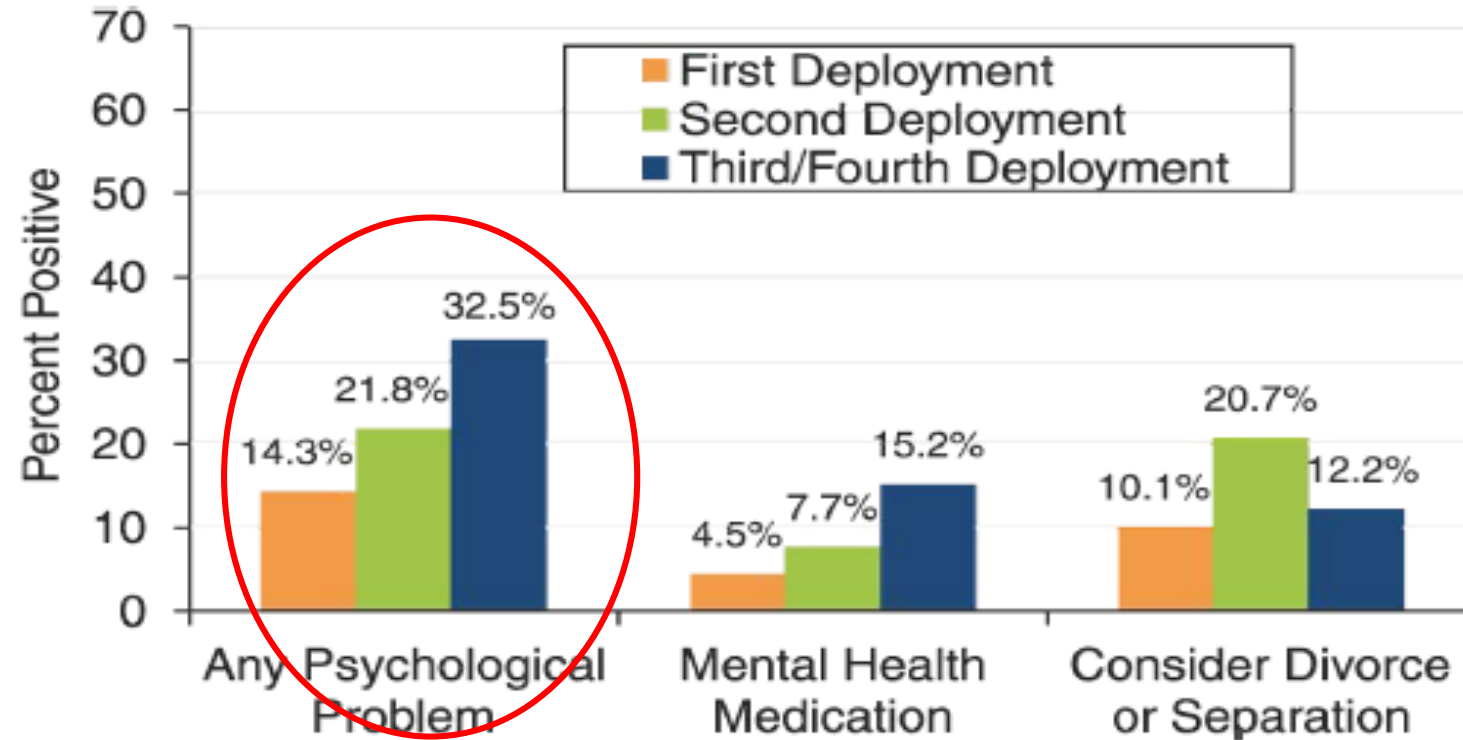


# The Problem of Repeated Deployments

- The Persian Gulf war is the longest war in American history, with the most repeated deployments
- About 10 percent of the 2.4 million servicemembers who have fought in Iraq and Afghanistan deployed three or more times
- Repeated deployments wear down resiliency



# Problems after Multiple Deployments



**FIGURE 4.5** Number of deployments and selected outcomes.  
SOURCE: MHAT-VII, 2011.





# Combat Exposure

- Greater combat exposure is associated with greater **substance abuse** (Prigerson et al., 2002; Reifman & Windle, 1996)
- Army soldiers deployed twice have 1.6 times greater chance of developing **PTSD** than those deployed once (Reger et al., 2009)
- Combat exposure increases rate of **domestic violence** (Prigerson et al., 2002)

# Rates of Violence in OEF/OIF Veterans with PTSD and/or Alcohol Abuse

The co-occurrence of PTSD and substance abuse leads to greater violence than either PTSD or substance abuse alone:

PTSD

10%

Alcohol

10.6%

PTSD + Alcohol

35.9%

Neither

5.3%

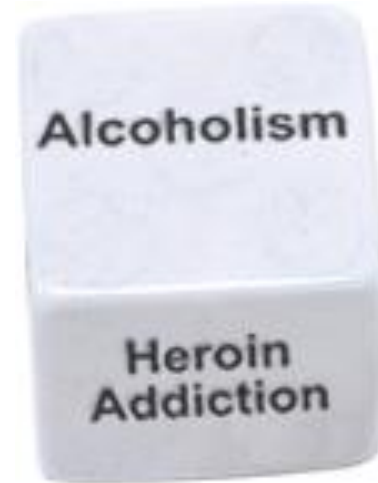


# **Co-occurring PTSD and Substance Abuse**

# Co-occurrence of PTSD and Substance Abuse

Co-occurring disorders are the rule rather than the exception.

**SAMHSA, 2002**



## COMORBID DISORDERS ARE THE RULE, RATHER THAN THE EXCEPTION FOR PTSD

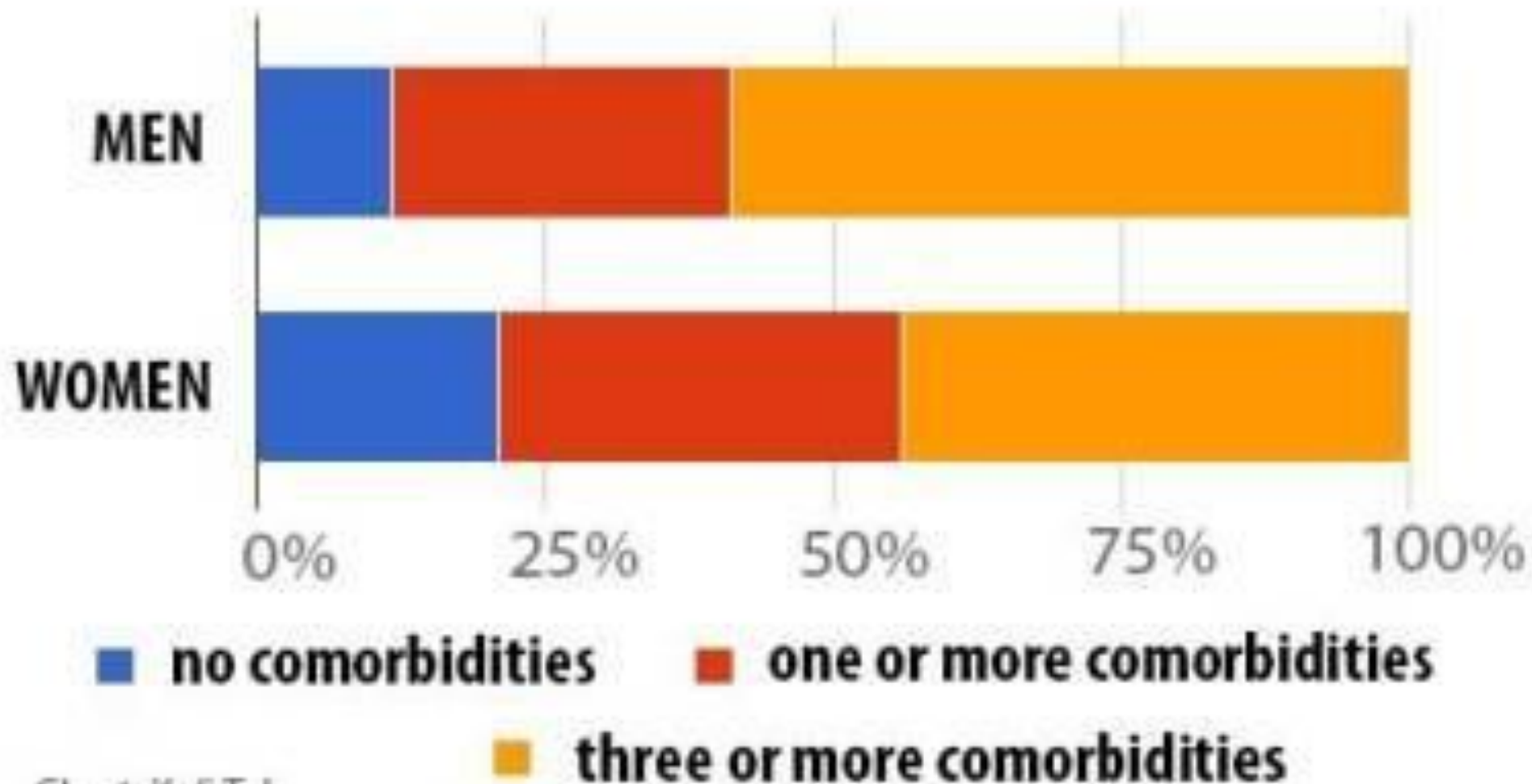


Chart: Kali Tal

# Co-occurrence of PTSD and Substance Abuse

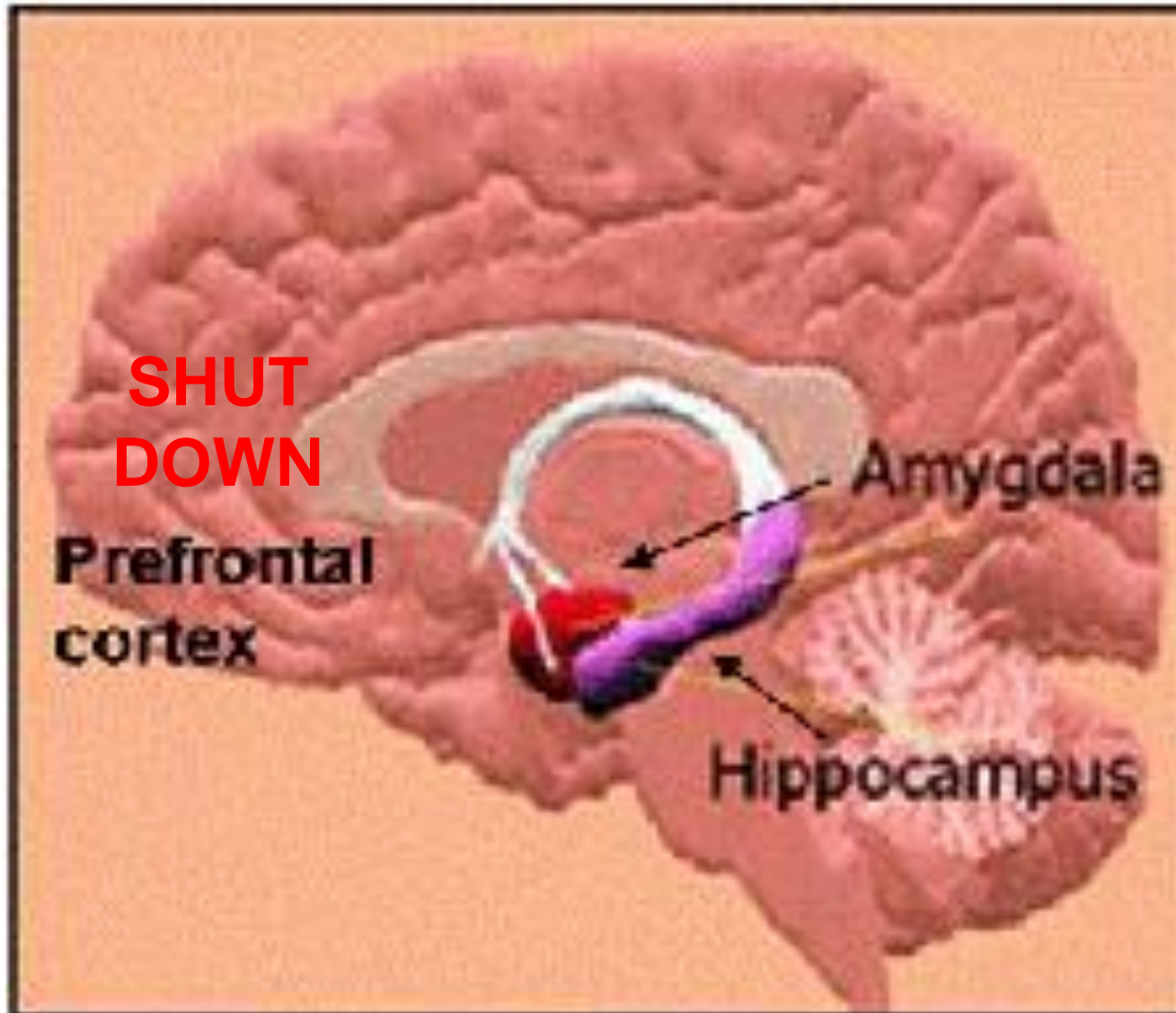
- PTSD and substance abuse co-occur at a high rate
  - 20-40% of people with PTSD also have SUDs (SAMHSA, 2007)
  - 40-60% of people with SUDs have PTSD
- Substance use disorders are 3-4 times more prevalent in people with PTSD than those without PTSD (Khantzian & Albanese, 2008)
- The presence of either disorder alone increases the risk for the development of the other
- PTSD increases the risk of substance relapse (Norman et al., 2007)
- The combination results in poorer treatment outcomes (Ouimette et al., 2003; Sonne et al., 2003)

# National Comorbidity Survey

Among people with PTSD:

|                              | Male  | Female |
|------------------------------|-------|--------|
| Alcohol Abuse/<br>Dependence | 51.9% | 27.9%  |
| Drug Abuse/<br>Dependence    | 34.5% | 26.9%  |

# PTSD and the Brain

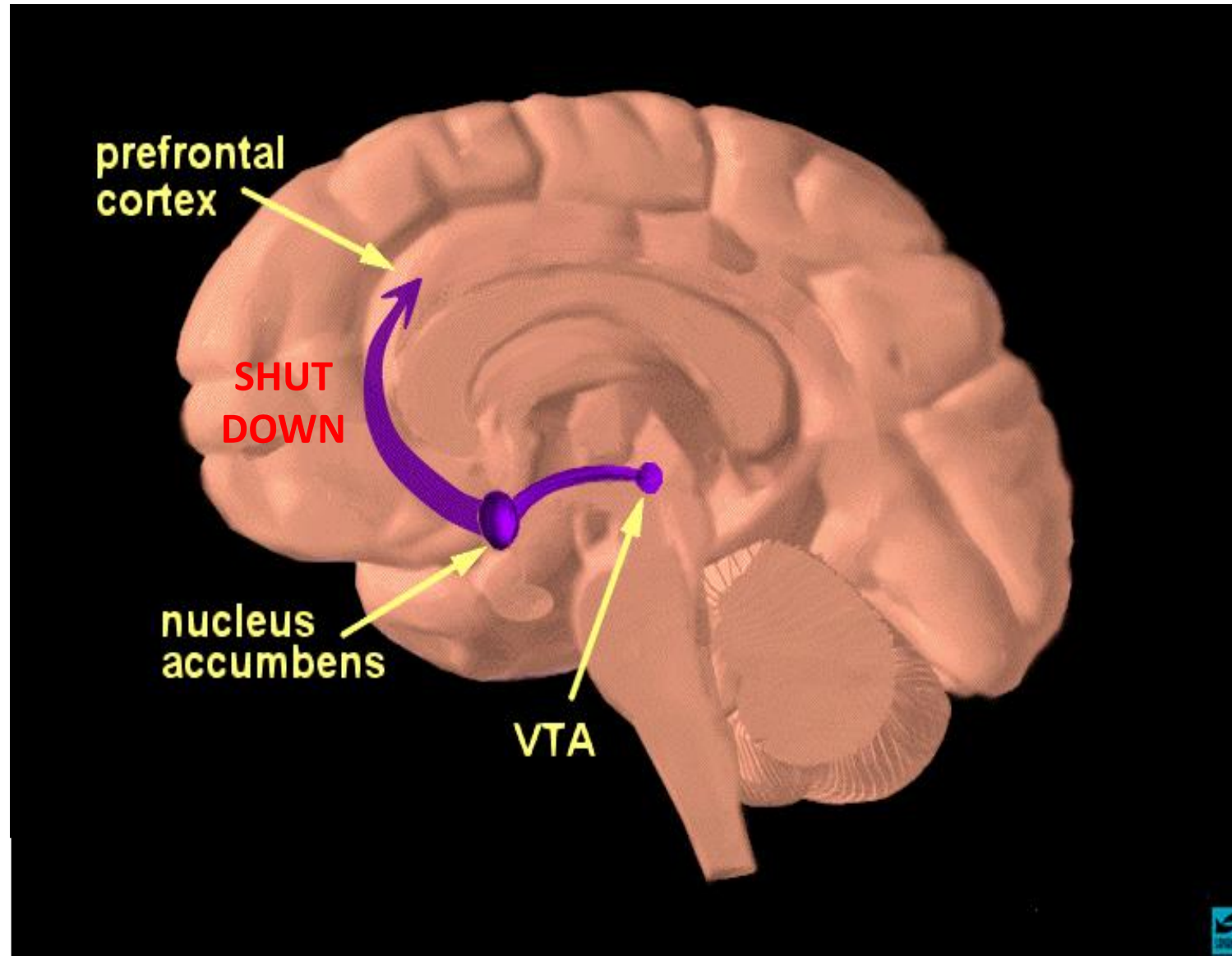


Amygdala –  
Emotional reactions,  
fight or flight alarm  
system

Hippocampus – Relay  
station for sorting  
memories

Prefrontal cortex –  
logic, reasoning,  
planning, impulse  
control, organizing

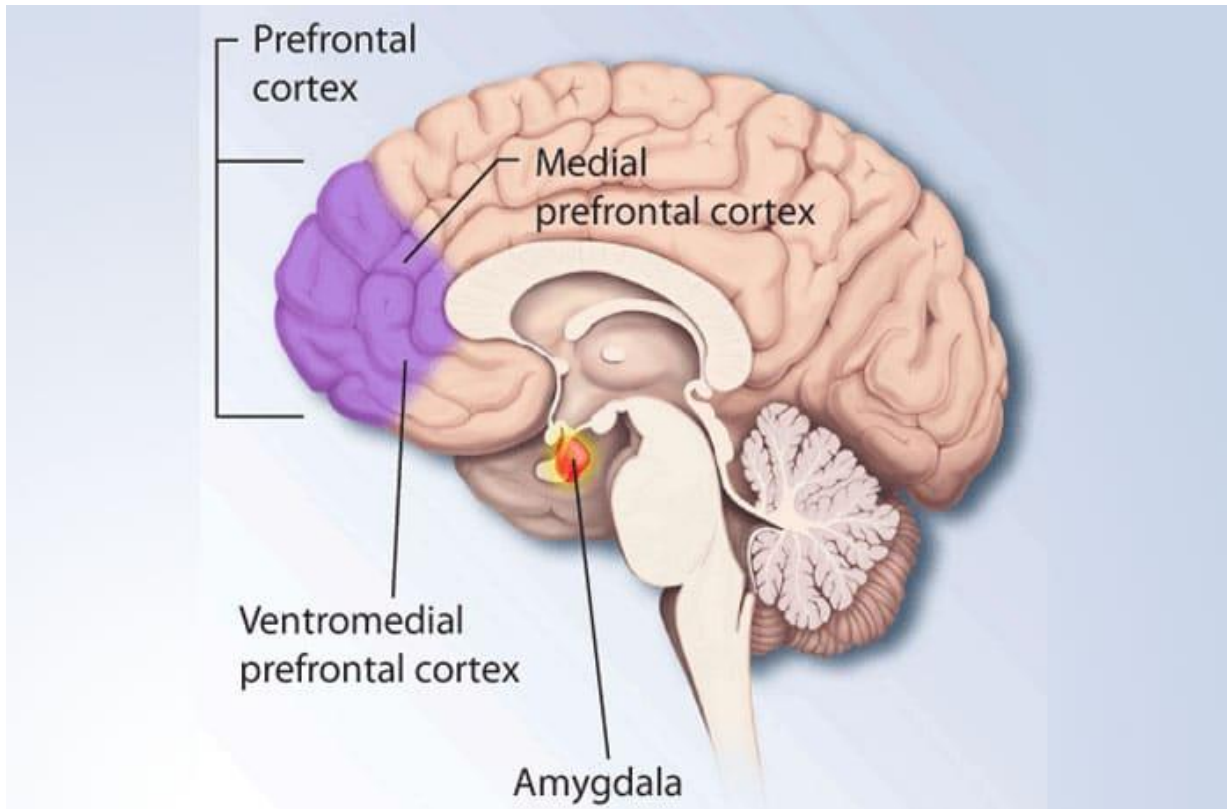
# The Brain's Reward System on Substances



Robeck, 2013



# Shutting Down the Ventromedial Prefrontal Cortex Leads to:



Emotional dysregulation

Acting on impulse

Not considering consequences of actions

Decrease in logical thinking

Inappropriate social behavior

Decreases in empathy, compassion, shame, and guilt

Impaired decision-making

# **PTSD and Substance Abuse Feed Off Each Other**

PTSD and substance  
abuse make each other  
worse in a downward  
spiral

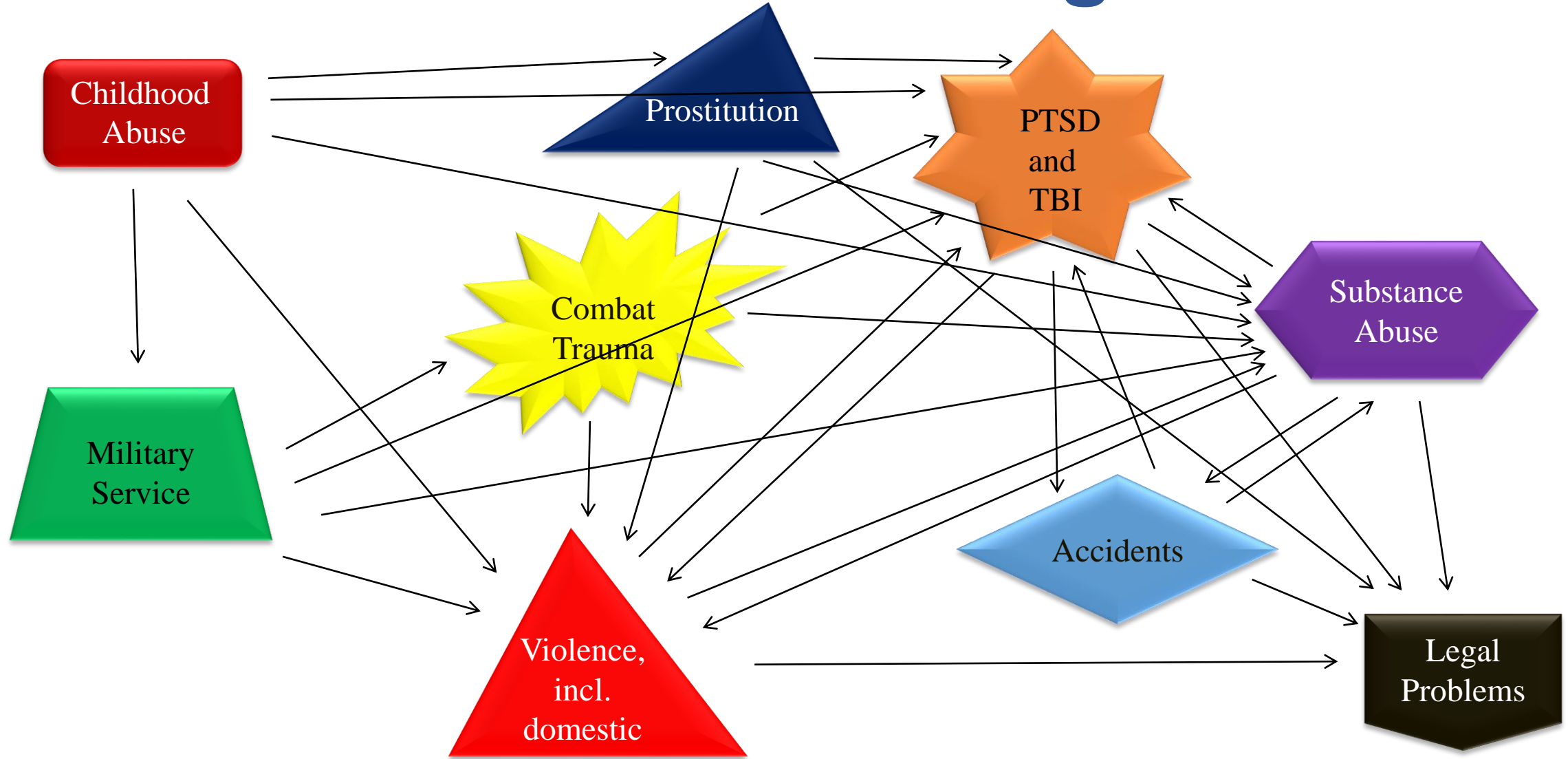


# **PTSD/SUD Patients Have Significantly More Problems**

- Unemployment  
(Henkel, 2011)
- Academic dropout  
(Breslau et al., 2011)
- Homelessness  
(Palepu et al., 2013)
- HIV risk
- Incarceration  
(Nowotny et al., 2014)



# The Paths from Trauma to Legal Problems



# **Diversion through Treatment of Trauma**

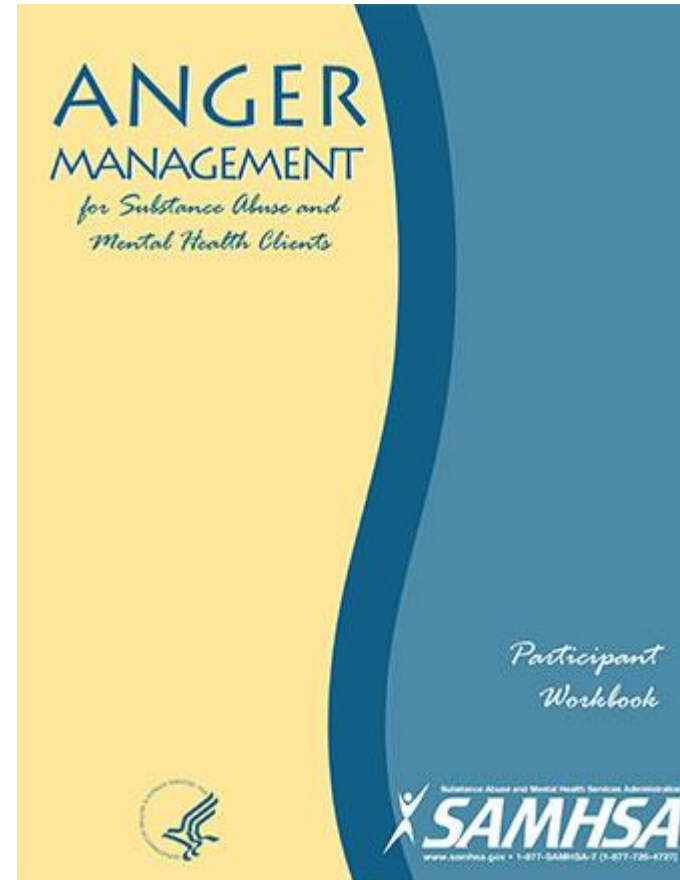
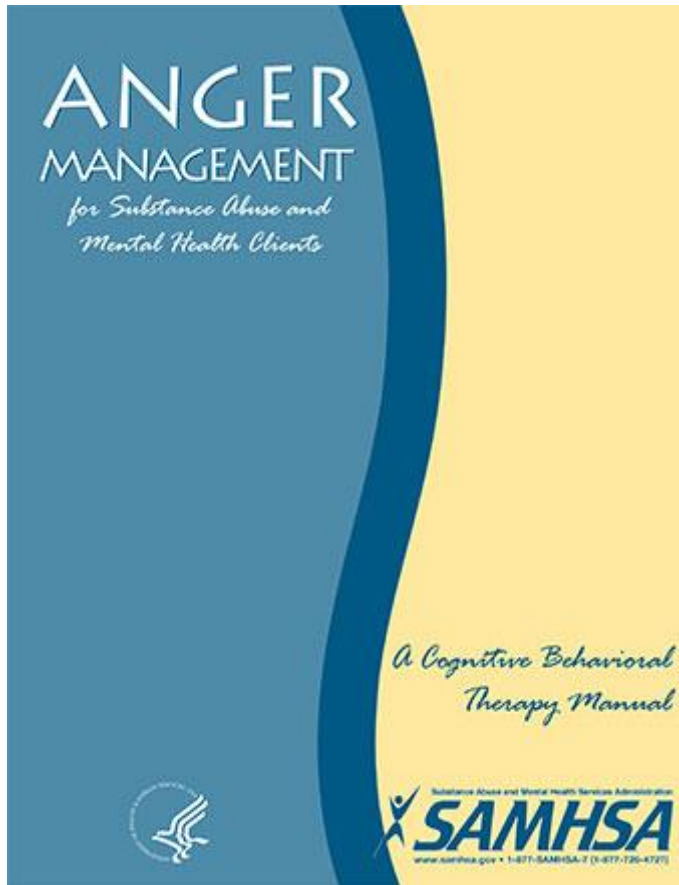
# Reducing Anger

- Identify triggers
- Self-monitor anger frequency and intensity
- Progressive muscle relaxation
- Diaphragmatic breathing
- Cognitive-Behavioral Therapy





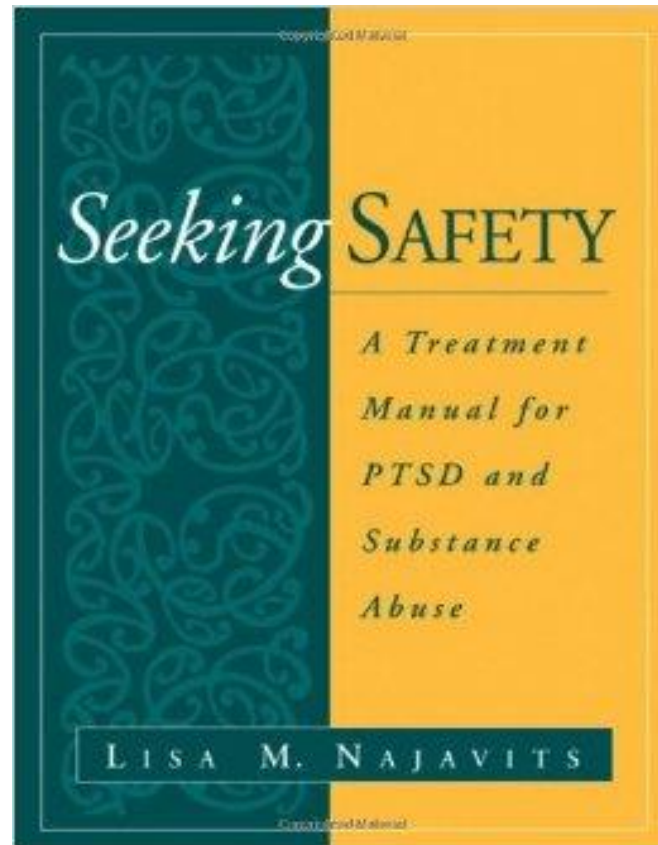
# Reducing Anger



SAMHSA's Anger Management Manuals

# Seeking Safety

Seeking Safety is the only evidence-based treatment for co-morbid PTSD and substance abuse



25 lessons on topics that overlap between PTSD and Substance Abuse

- Safe coping skills
- Asking for help
- Grounding
- Anger
- Boundaries
- Self-care
- Honesty
- Re-thinking

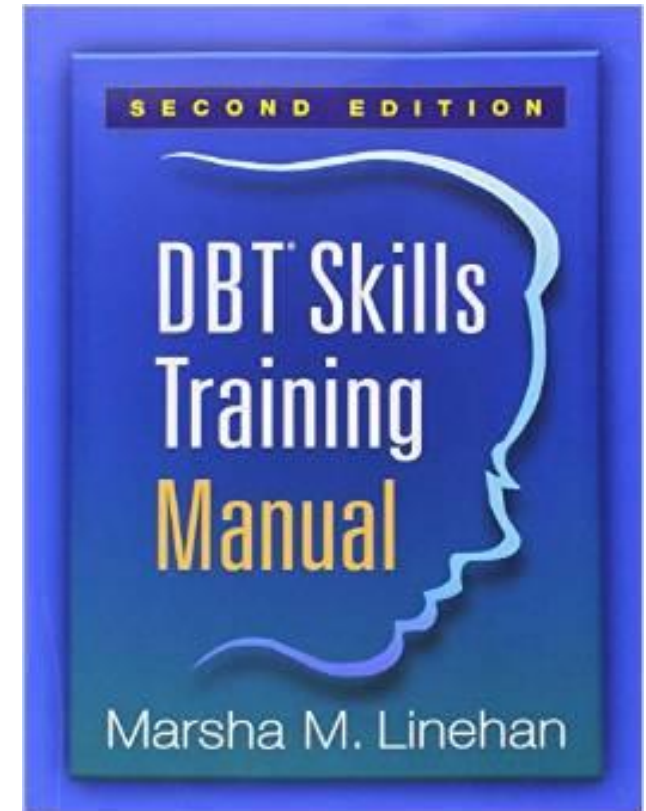
# Seeking Safety



- Weekly 90 minute sessions
- Often taught in 12 sessions
- Can be provided individually or in groups
- Typical group size is 8-10 members
- Can be provided by professionals or paraprofessionals

# Dialectical Behavior Therapy Skills Training

- Four topics with multiple lessons
  - Mindfulness
  - Interpersonal Effectiveness
  - Distress Tolerance
  - Affect Regulation
- New manual provides suggested menus of different specific skills and exercises with different populations, including people who abuse substances



# Evidence-Based Treatments for PTSD



# Cognitive Processing Therapy

- A cognitive intervention to change the way a traumatized person thinks
- 12 weekly sessions delivered in a structured, manualized protocol
  - Number of sessions can be expanded
- May or may not include a trauma narrative
- Can be delivered individually and/or in groups
- Homework worksheets between sessions

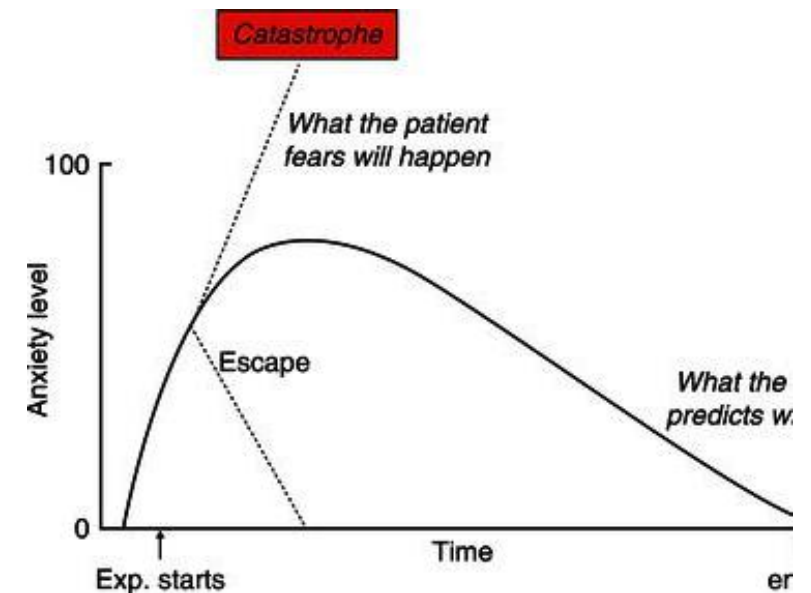


# Cognitive Processing Therapy

- Central techniques:
  - Identifies stuck points
  - Examines evidence for thoughts and beliefs
  - Challenges beliefs
- Changing the interpretation of the traumatic event changes the emotions resulting from the event
- CPT is an effective treatment for PTSD (Vickerman & Margolin, 2009; Ougrin, 2011; Jonas et al., 2013; Ehring et al., 2014)
- CPT successfully treats complex trauma (Resick et al., 2003; Galovski et al., 2013)

# Prolonged Exposure

- A behavioral intervention that repeatedly exposes patients to distressing stimuli in order to decrease their anxiety in response to those stimuli
- 10 weekly sessions
- First part involves *in vivo* exposure to places that increase anxiety (e.g., public places)
  - Uses an anxiety hierarchy



# Prolonged Exposure

- Second part involves writing and dictating a trauma narrative focusing on one traumatic experience
  - The patient listens to the narrative over and over for an hour each day
  - Repeated and prolonged exposure decreases their anxiety
- Prolonged Exposure is an effective treatment for PTSD  
(Vickerman & Margolin, 2009; Ougrin, 2011; Jonas et al., 2013; Ehring et al., 2014)
- There is no evidence that it successfully treats complex trauma

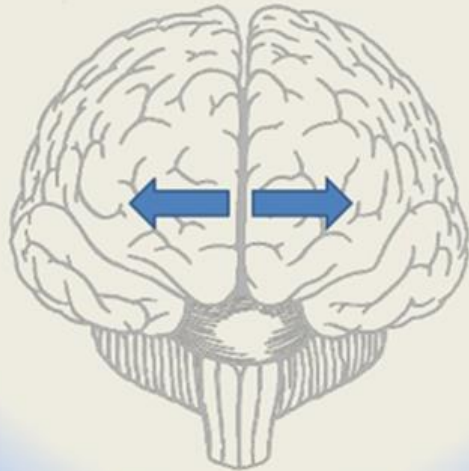
# Eye Movement Desensitization and Reprocessing

- Patient focuses on distressing image
  - States a belief that goes with it
  - Notices feelings that go with it
  - Identifies body sensations that go with it
- Therapist passes fingers back and forth, guiding the eyes
- As this occurs, the images, thoughts, feelings, and body sensations change
- Adaptive information processing results



# Eye Movement Desensitization and Reprocessing

Bilateral Stimulation (BLS) is any rhythmic alternation of stimulation between the left and right hemispheres.



Auditory and tactile alternatives to eye movements using bilateral stimulation

EMDR works for PTSD and complex trauma (Davidson & Parker, 2001; Foa et al., 2009; Maxfield & Hyer, 2002; Seidler & Wagner, 2006)

EMDR can be used to address substance abuse (Vogelmann-Sine et al., 1998)

# Promising Treatments: Mindfulness Meditation

Mindfulness Meditation is a part of:

- Dialectical Behavior Therapy
- Mindfulness-Based Stress Reduction
  - MBSR reduces PTSD symptoms in Veterans (Kearney et al., 2012; Kluepfel et al., 2013)
- Mindfulness-Based Cognitive Therapy
- Mindfulness-Based Relapse Prevention
- Acceptance and Commitment Therapy



# Promising Treatments: STAIR Narrative Therapy



- Skills Training in Affective and Interpersonal Regulation (STAIR) Narrative Therapy (Cloitre et al., 2006)
  - Uses coping skills from Stress Inoculation Training and Dialectical Behavior Therapy
  - 8-10 sessions of skills building and 8 sessions of narrative therapy



# Wellness Activities



Mindfulness Meditation

Yoga

Qi Gong

Tai Chi

Massage

Acupuncture



# One Final Way to Help

Remember “Superkids”?

They were abused and neglected children, mostly in foster care

Q: What did they all have in common?

A: One person who cared about them unconditionally

**Your job is to find that one person**

# Resources

# Resources for PTSD

- *Handbook of PTSD, 2<sup>nd</sup> ed.* (2014), Matthew Friedman, Terence Keane, and Patricia Resick
- *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma* (2014), Bessel van der Kolk
- *Trauma and Recovery* (1993), Judith Herman
- *The PTSD Workbook: Simple, Effective Techniques for Overcoming Traumatic Stress Symptoms, 2<sup>nd</sup> ed.* (2013), Mary Beth Williams and Soili Poijula

# Veterans and PTSD

- *What It Is Like to Go to War* by Karl Marlantes
- *On Killing: The Psychological Cost of Learning to Kill in War and Society* by Dave Grossman
- *Achilles in Vietnam: Combat Trauma and the Undoing of Character* by Jonathan Shay
- Military culture courses:  
[www.ptsd.va.gov/professional/ptsd101/course-modules/military\\_culture.asp](http://www.ptsd.va.gov/professional/ptsd101/course-modules/military_culture.asp)  
and <http://www.deploymentpsych.org/military-culture>

# Resources for PTSD

- National Center for PTSD: [www.ptsd.va.gov](http://www.ptsd.va.gov)
- International Society for Traumatic Stress Studies: [www.istss.org](http://www.istss.org)
- International Society for the Study of Trauma and Dissociation: [www.isst-d.org](http://www.isst-d.org)
- PTSD 101 courses:  
[www.ptsd.va.gov/professional/ptsd101/course-modules.asp](http://www.ptsd.va.gov/professional/ptsd101/course-modules.asp)  
[http://mghcme.org/courses/course\\_detail/from\\_the\\_war\\_zone\\_to\\_the\\_home\\_front\\_supporting\\_the\\_mental\\_health\\_of\\_veteran](http://mghcme.org/courses/course_detail/from_the_war_zone_to_the_home_front_supporting_the_mental_health_of_veteran)

# Veteran Resources for PTSD

- *Once a Warrior--Always a Warrior: Navigating the Transition from Combat to Home--Including Combat Stress, PTSD, and mTBI* by Charles Hoge
- *The PTSD Workbook: Simple, Effective Techniques for Overcoming Traumatic Stress Symptoms* by Mary Beth Williams and Soili Poijula
- *After the War Zone: A Practical Guide for Returning Troops and Their Families* by Matthew Friedman and Laurie Slone
- Free podcast available at <https://itunes.apple.com/eg/podcast/returning-from-the-war-zone/id657517343>



# Veteran Resources for PTSD

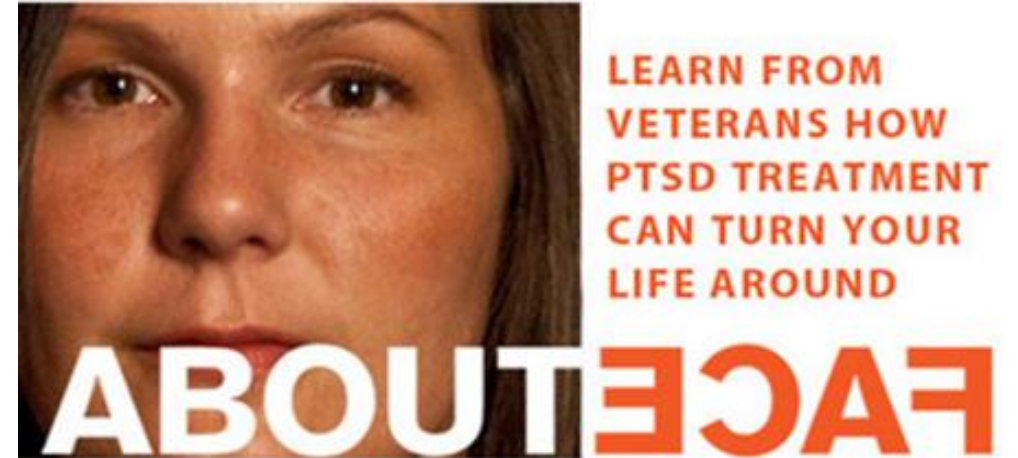
- Adjustment after deployment:

[www.afterdeployment.org](http://www.afterdeployment.org)

<http://maketheconnection.net>

- PTSD treatment can help:

[www.ptsd.va.gov/apps/AboutFace](http://www.ptsd.va.gov/apps/AboutFace)



# Family Resources for PTSD

- *When Someone You Love Suffers from Posttraumatic Stress: What to Expect and What You Can Do* by Claudia Zayfert and Jason Deviva
- *Finding My Way: A Teen's Guide to Living with a Parent Who Has Experienced Trauma* by Michelle Sherman and DeAnne Sherman
- <http://www.ptsd.va.gov/public/pages/fslist-family-relationships.asp>
- Helping family members get veterans into treatment: Coaching Into Care [www.mirecc.va.gov/coaching/index.asp](http://www.mirecc.va.gov/coaching/index.asp)

# PTSD and Substance Abuse

- *Trauma and Substance Abuse (2<sup>nd</sup> ed.)* by Page Ouimette and Jennifer Read
- PTSD 101 course about treating PTSD and SUDs:  
[www.ptsd.va.gov/professional/ptsd101/course-modules/SUD.asp](http://www.ptsd.va.gov/professional/ptsd101/course-modules/SUD.asp)
- Practice recommendations for treating co-occurring PTSD and SUDs: [www.ptsd.va.gov/professional/pages/handouts-pdf/SUD PTSD Practice Recommend.pdf](http://www.ptsd.va.gov/professional/pages/handouts-pdf/SUD_PTSD_Practice_Recommend.pdf)

# Anger Management Workbooks

- <http://store.samhsa.gov/product/Anger-Management-for-Substance-Abuse-and-Mental-Health-Clients-A-Cognitive-Behavioral-Therapy-Manual/SMA13-4213>
- <http://store.samhsa.gov/product/Anger-Management-for-Substance-Abuse-and-Mental-Health-Clients-Participant-Workbook/SMA13-4210>

# **Cognitive Processing Therapy**

*Cognitive Processing Therapy for PTSD: A  
Comprehensive Manual* by Patricia Resick, Candice  
Monson, and Kathleen Chard

# Prolonged Exposure

- *Prolonged Exposure Therapy for PTSD: Emotional Processing of Traumatic Experiences Therapist Guide* (2007), Edna Foa, Elizabeth Hembree, and Barbara Rothbaum
- *Reclaiming Your Life from a Traumatic Experience: A Prolonged Exposure Treatment Program Workbook* (2007), Barbara Rothbaum, Edna Foa, and Elizabeth Hembree

# EMDR

- *Eye Movement Desensitization and Reprocessing (EMDR): Basic Principles, Protocols, and Procedures, 2<sup>nd</sup> Ed. (2001), Francine Shapiro*
- *Getting Past Your Past: Take Control of Your Life with Self-Help Techniques from EMDR Therapy (2013), Francine Shapiro*
- [www.emdr.com](http://www.emdr.com)
- [www.emdria.org](http://www.emdria.org)
- [www.emdrhap.org](http://www.emdrhap.org)



# Seeking Safety

- *Seeking Safety* by Lisa Najavits
- <http://www.treatment-innovations.org/seeking-safety.html>
- *Recovery from Trauma, Addiction, or Both* by Lisa Najavits

# Dialectical Behavior Therapy

- *Cognitive-Behavioral Treatment of Borderline Personality Disorder* by Marsha Linehan
- *DBT Skills Training Manual, 2<sup>nd</sup> edition* by Marsha Linehan
- *DBT Skills Training Handouts and Worksheets, 2<sup>nd</sup> edition* by Marsha Linehan
- <http://www.behavioraltech.com>
- <http://www.linehaninstitute.org>

# Mindfulness

- *Mindfulness for Beginners: Reclaiming the Present Moment - and Your Life (Book and CD)* by Jon Kabat-Zinn
- *Guided Mindfulness Meditation Series 1 (CD)* by Jon Kabat-Zinn
- Mindfulness-Based Stress Reduction:
- [www.umassmed.edu/cfm/stress/index.aspx?id=41252](http://www.umassmed.edu/cfm/stress/index.aspx?id=41252)
- [www.fammed.wisc.edu/mindfulness](http://www.fammed.wisc.edu/mindfulness)
- [www.marc.ucla.edu](http://www.marc.ucla.edu)
- <https://palousemindfulness.com/>

# STAIR Narrative Therapy

- *Treating Survivors of Childhood Abuse: Psychotherapy for the Interrupted Life* by Marylene Cloitre, Lisa Cohen, and Karestan Koenen

- Online at:

<http://www.stairnt.com/index.html>

[http://www.ptsd.va.gov/professional/continuing\\_ed/STAIR\\_training.asp](http://www.ptsd.va.gov/professional/continuing_ed/STAIR_training.asp)

# Online Resources

- Self-assessment Mental Health screening  
<http://www.militarymentalhealth.org>
- Computer-based Problem-Solving Therapy  
<http://startmovingforward.t2.health.mil>
- Wellness resources  
<http://afterdeployment.t2.health.mil>

# Self-Help Mobile Applications

<http://www.t2health.org/mobile-apps>

- PTSD Coach



- CPT Coach



- PE Coach



# Self-Help Mobile Applications

<http://www.t2health.org/mobile-apps>

- T2 MoodTracker



- Breathe 2 Relax



- Tactical Breather





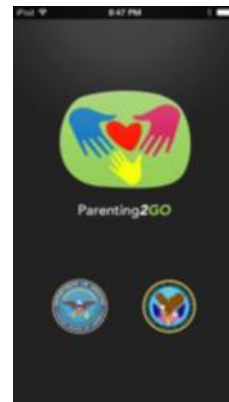
# Self-Help Mobile Applications

<http://www.t2health.org/mobile-apps>

- Mindfulness Coach



- Parenting2Go



- LifeArmor (includes family section)



# Self-Help Mobile Applications

<http://www.militarymentalhealth.org/articles/media>

Positive Activity Jackpot



Virtual Hope Box



Provider Resilience



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